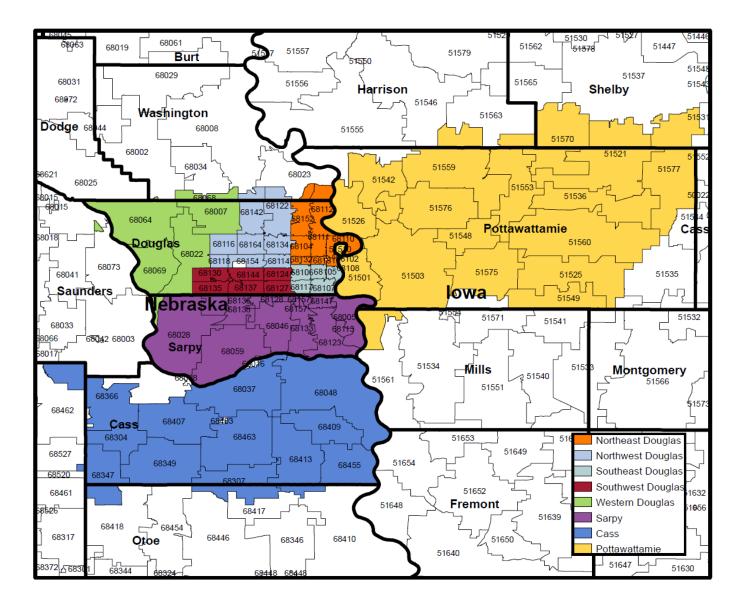


# 2015 PRC Community Health Needs Assessment

### Douglas, Sarpy & Cass Counties, Nebraska Pottawattamie County, Iowa

Prepared for: CHI Health Douglas County Health Department Live Well Omaha Methodist Health System Nebraska Medicine Pottawattamie County Public Health Department/VNA Sarpy/Cass County Department of Health and Wellness

By Professional Research Consultants, Inc.



#### **PRC Community Health Needs Assessment**

Douglas, Sarpy, Cass & Pottawattamie Counties

## Key Informants: Relative Position of Health Topics as Problems in the Community

	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	10
Top-Ranked Issues	Mental Health				77.5%				7.8%		
	Diabetes			63.0%				18.0%			
Nutrition, Physical A	Activity, and Weight	60.0%						21.0%			
	Substance Abuse	51.5%					27	.7%			
Heart	Disease and Stroke	45.9%					34.7%				
Access to H	ealth Care Services _	35.0%				37.0%					
Oral	Health/Dental Care	e 34.0%				38.0%					
	Family Planning	33.3%				32.3%					
	Tobacco Use 🔤	32.0	1%			40.0%					
Sexually Tr	ansmitted Diseases 🔤	27.1%			35.49	%					
	Cancer _	26.8%			4	2.3%					
R	espiratory Diseases 🔤	25.5%			31.6%						
Dementia/	Alzheimer's Disease 🔤	23.5%			42.9	%					
Infa	Int and Child Health	22.0%			45.0%	6					
	HIV/AIDS	18.8%		29.2%							
Immunization and	Infectious Diseases	18.0%		33.0%							
Arthritis/Osteoporos	sis/Back Conditions	15.1%		36.6%							
Chro	onic Kidney Disease 🔤	11.7%		43.6%							
Hearing a	nd Vision Problems 🛛 🗛	<mark>2%</mark>	37.9%	·							

Minor Problem

Moderate Problem

Major Problem

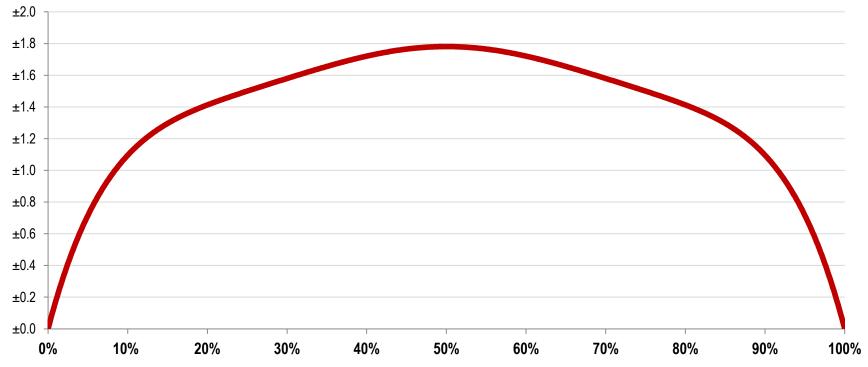
**Professional Research Consultants, Inc.** 

■ No Problem At All

3



## Expected Error Ranges for a Sample of 2,619 Respondents at the 95 Percent Level of Confidence



The "response rate" (the percentage of a population giving a particular response) determines the error rate associated with that response.
 A "95 percent level of confidence" indicates that responses would fall within the expected error range on 95 out of 100 trials.

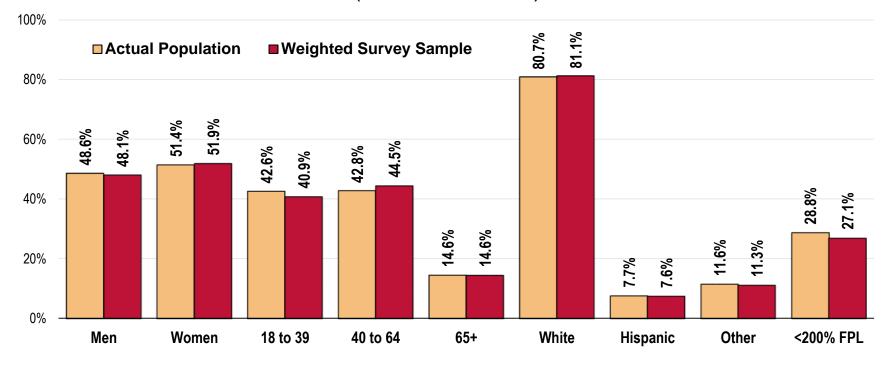
Examples: • If 10% of the sample of 2,619 respondents answered a certain question with a "yes," it can be asserted that between 8.9% and 11.1% (10% ± 1.1%) of the total population would offer this response.

If 50% of respondents said "yes," one could be certain with a 95 percent level of confidence that between 48.2% and 51.8% (50% ± 1.8%) of the total population would respond "yes" if asked this question.



## **Population & Survey Sample Characteristics**

(Metro Area, 2015)

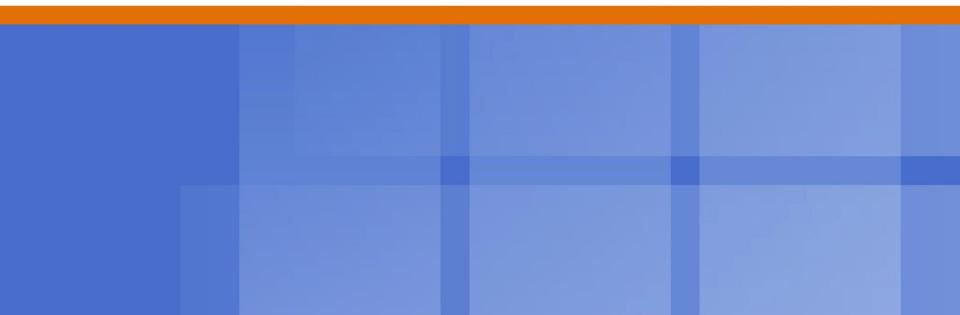


Sources: • Census 2010, Summary File 3 (SF 3). US Census Bureau.

• 2015 PRC Community Health Survey, Professional Research Consultants, Inc.

# **COMMUNITY DESCRIPTION**





PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

# **Demographics**





## **Total Population**

(Estimated Population, 2009-2013)

	Total Population	<b>Total Land Area</b> (Square Miles)	<b>Population Density</b> (Per Square Mile)
Douglas County	524,697	328.37	1,597.89
Sarpy County	162,728	238.93	681.08
Cass County	25,222	557.30	45.26
Pottawattamie County	92,962	950.03	97.85
Metro Area	805,609	2,074.62	388.32
Nebraska	1,841,625	76,803.37	23.98
lowa	3,062,553	55,842.35	54.84
United States	311,536,591	3,530,997.6	88.23

Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

• Retrieved August 2015 from Community Commons at http://www.chna.org.



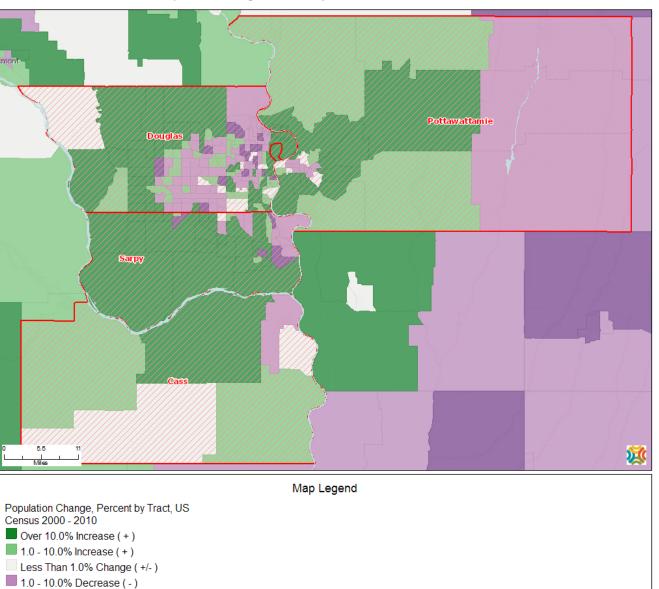
#### **Change in Total Population** (Percentage Change Between 2000 and 2010) 100% 80% 60% An increase of 40% 29.6% 96,131 persons 20% 13.8% 11.6% 9.7% 6.7% 6.2% 4.1% 3.7% 0% US Douglas Sarpy Cass Pott. Metro NE IA County County County County Area

Sources: • Retrieved August 2015 from Community Commons at http://www.chna.org.

• US Census Bureau Decennial Census (2000-2010).

• A significant positive or negative shift in total population over time impacts healthcare providers and the utilization of community resources.

#### PRC Community Health Needs Assessment



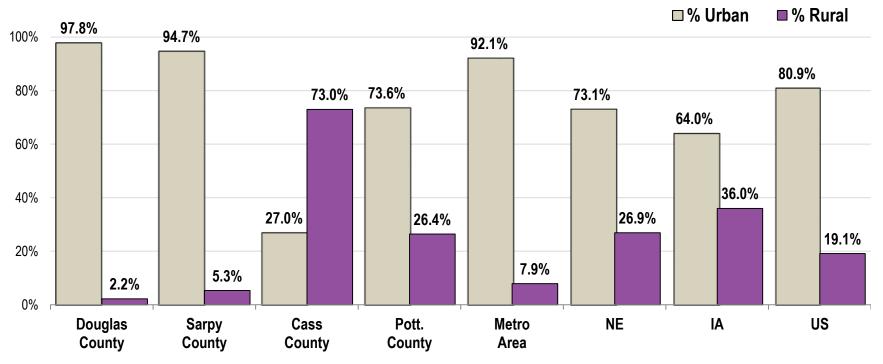
Population Change, Percent by Tract, US Census 2000-2010

wattamie Counties

Over 10.0% Decrease ( - )
No Population or No Data



# Urban and Rural Population (2010)

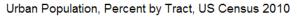


Sources: • US Census Bureau Decennial Census (2010).

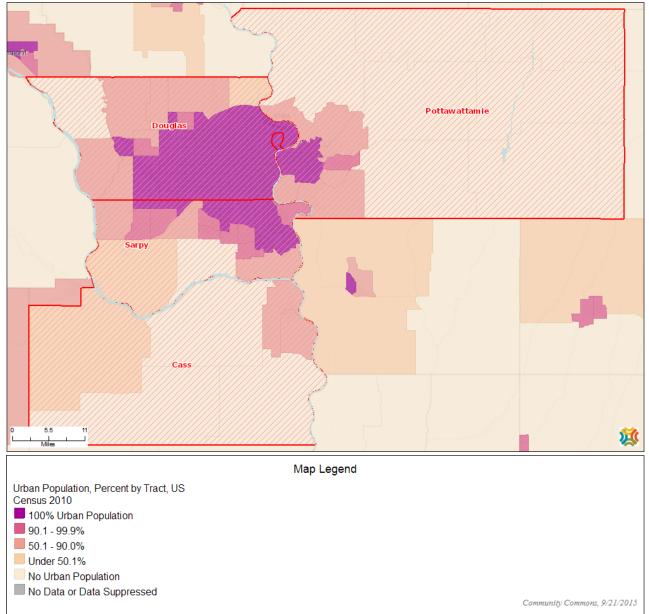
Retrieved August 2015 from Community Commons at http://www.chna.org.

• 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.

#### **PRC Community Health Needs Assessment**

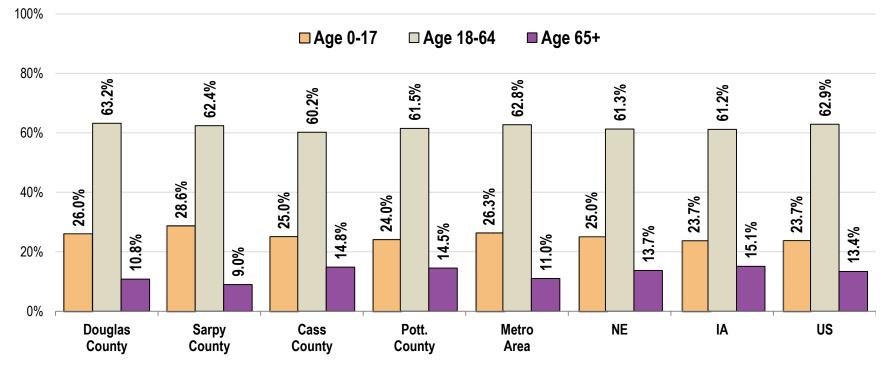


wattamie Counties





# Total Population by Age Groups, Percent (2009-2013)

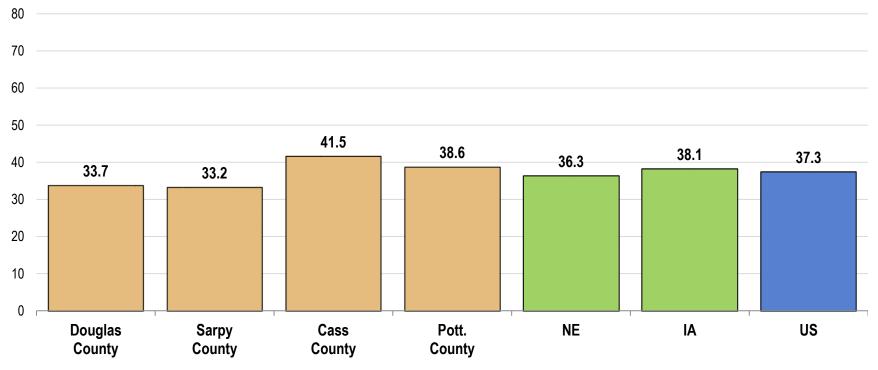


Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

• Retrieved August 2015 from Community Commons at http://www.chna.org.



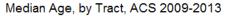
### Median Age (2009-2013)



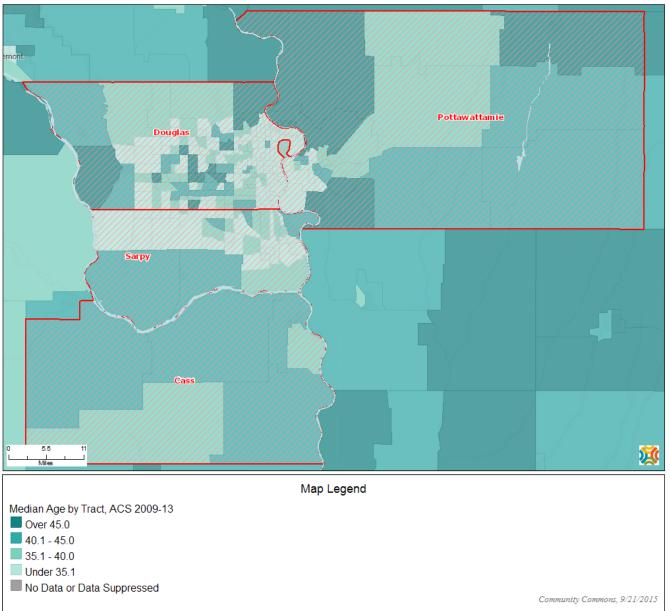
Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

• Retrieved August 2015 from Community Commons at http://www.chna.org.

#### **PRC Community Health Needs Assessment**

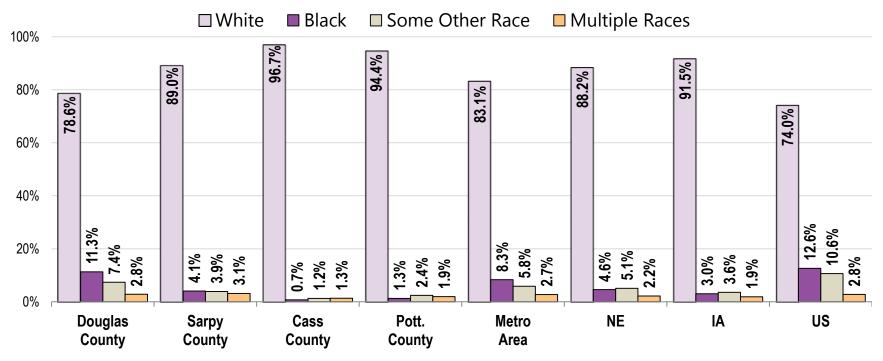


vattamie Counties





# Total Population by Race Alone, Percent (2009-2013)

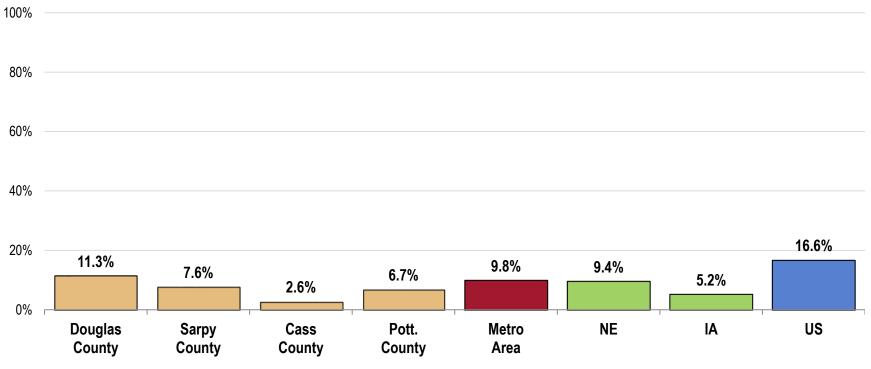


Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

• Retrieved August 2015 from Community Commons at http://www.chna.org.



# Percent Population Hispanic or Latino (2009-2013)



Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

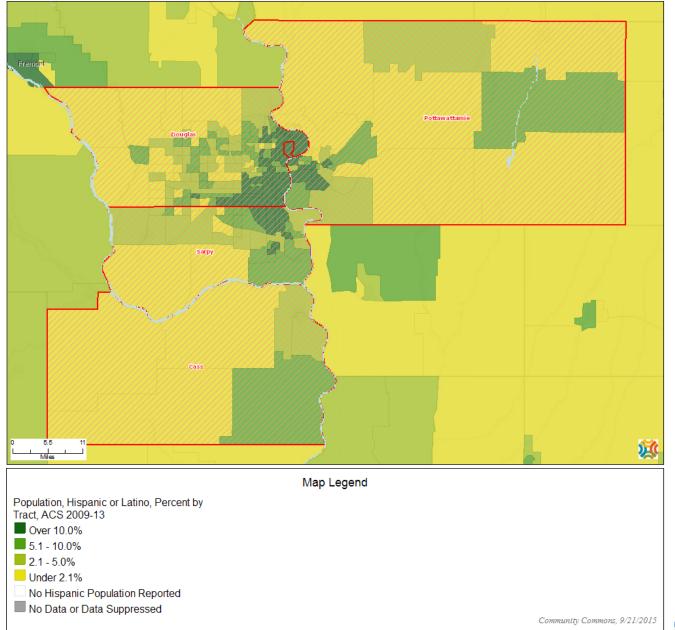
• Retrieved August 2015 from Community Commons at http://www.chna.org.

• Origin can be viewed as the heritage, nationality group, lineage, or country of birth of the person or the person's parents or ancestors before their arrival in the United States. People who identify their origin as Hispanic, Latino, or Spanish may be of any race.

#### DDC Community Lookh Noods Assessment

Population Hispanic or Latino, Percent by Tract, ACS 2009-2013

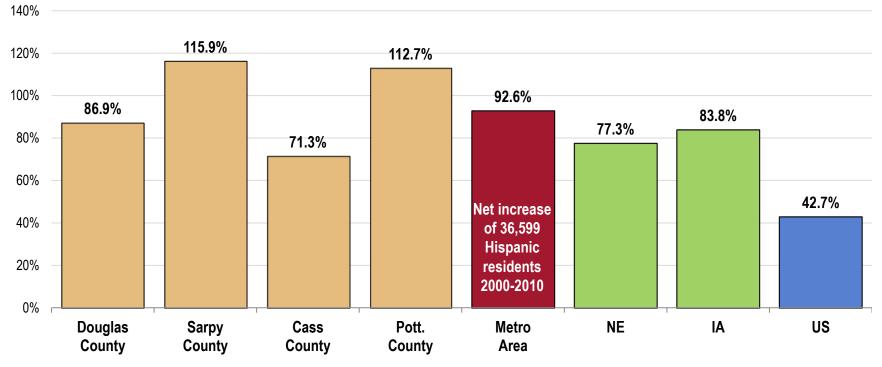
wattamie Counties





## **Hispanic Population Change**

(Percentage Change in Hispanic Population Between 2000 and 2010)

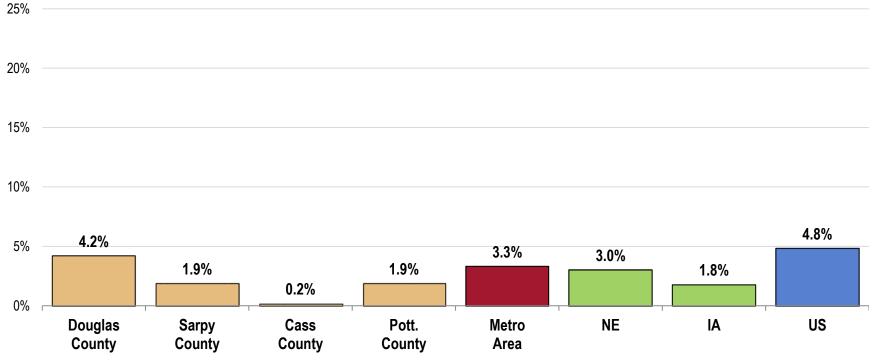


Sources: • US Census Bureau Decennial Census (2000-2010).

• Retrieved August 2015 from Community Commons at http://www.chna.org.



# Linguistically Isolated Population (2009-2013)



Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

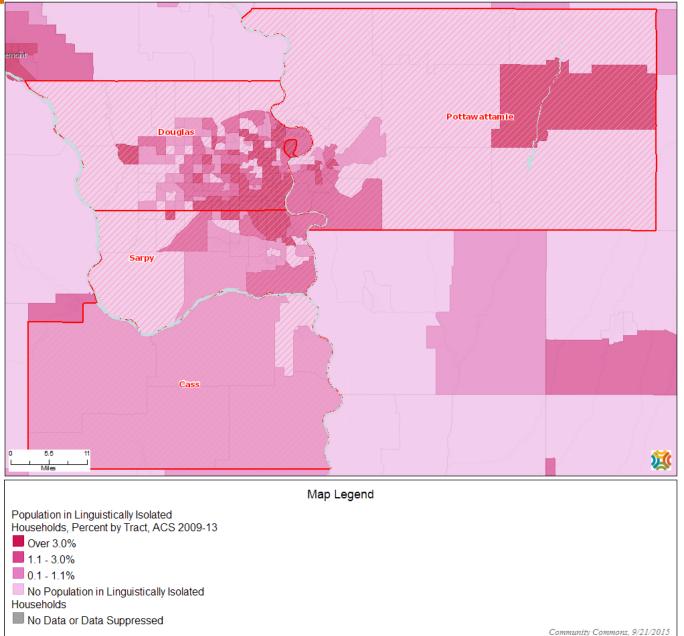
Retrieved August 2015 from Community Commons at http://www.chna.org.

• This indicator reports the percentage of the population aged 5 and older who live in a home in which no person 14 years old and over speaks only English, or in which no person 14 years old and over speak a non-English language and speak English "very well."

#### Population in Linguistically Isolated Households, Percent by Tract, ACS 2009-2013

#### Assessment

**attamie Counties** 



PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

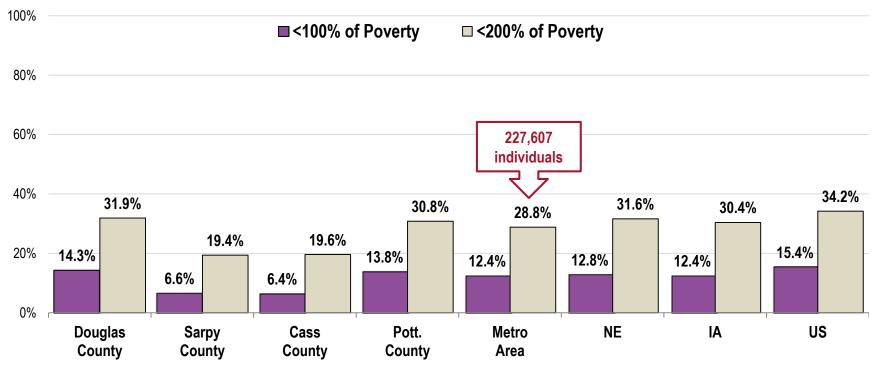
# **Determinants of Health**





## **Population in Poverty**

(Populations Living Below 100% and Below 200% of the Poverty Level; 2009-2013)



Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

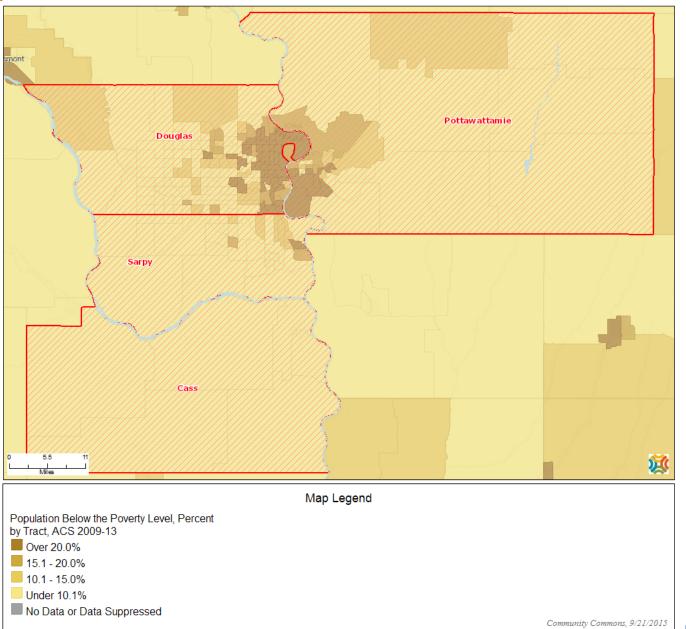
• Retrieved August 2015 from Community Commons at http://www.chna.org.

• Poverty is considered a key driver of health status. This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

### PPC Community Hoalth Mood's Assessment

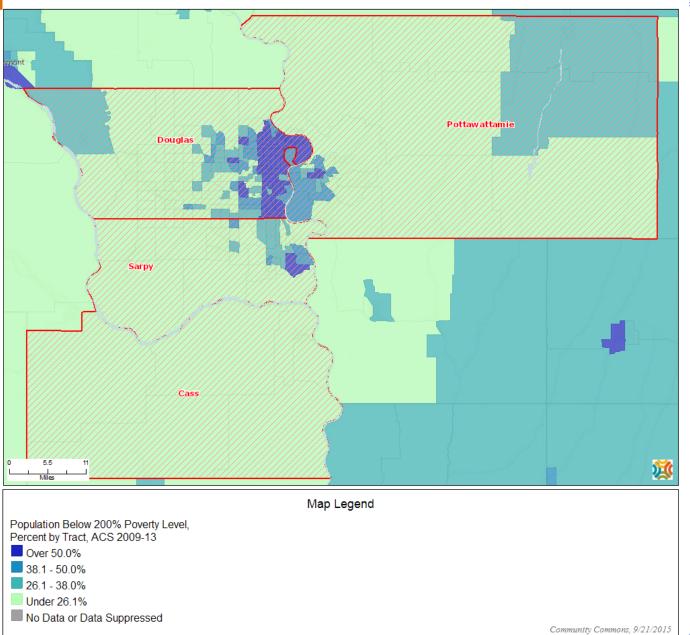
vattamie Counties

Population Below the Poverty Level, Percent by Tract, ACS 2009-2013





## Assessment attamie Counties





#### Percent of Children in Low-Income Households (Children 0-17 Living Below 200% of the Poverty Level, 2009-2013) 100% 80% 76,545 children 60% 43.8% 40.9% 40.6% 40.2% 37.9% 37.0% 40% 26.1% 25.9% 20% 0% Douglas Sarpy Cass Pott. Metro NE IA US County County County County Area

Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

Retrieved August 2015 from Community Commons at http://www.chna.org.

• This indicator reports the percentage of children aged 0-17 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.

#### PBC Community Health Needs Assessment

wattamie Counties

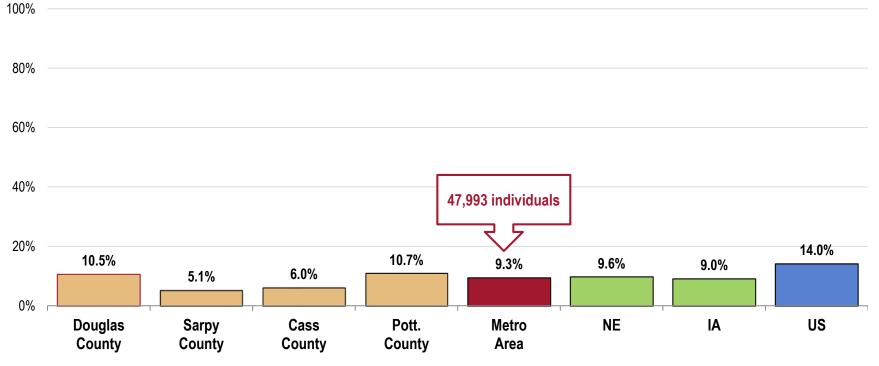
Pottawattamie Douglas Sarpy Cass 5.5 X Miles Map Legend Population Below 200% Poverty Level, Children (Age 0-17), Percent by Tract, ACS 2009-13 Over 56.0% 47.1 - 56.0% 38.1 - 47.0% Under 38.1% No Population Age 0-17 Reported No Data or Data Suppressed Community Commons, 9/21/2015

Children (0-17) Living Below 200% of Poverty, Percent by Tract, ACS 2009-2013



## **Population With No High School Diploma**

(Population Age 25+ Without a High School Diploma or Equivalent, 2009-2013)



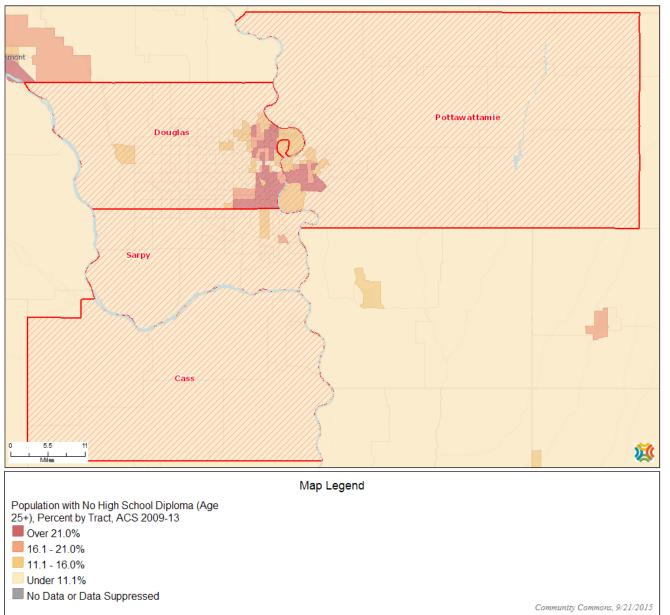
Sources: • US Census Bureau American Community Survey 5-year estimates (2009-2013).

• Retrieved August 2015 from Community Commons at http://www.chna.org.

Notes: 

 This indicator is relevant because educational attainment is linked to positive health outcomes.

#### **PRC Community Health Needs Assessment**



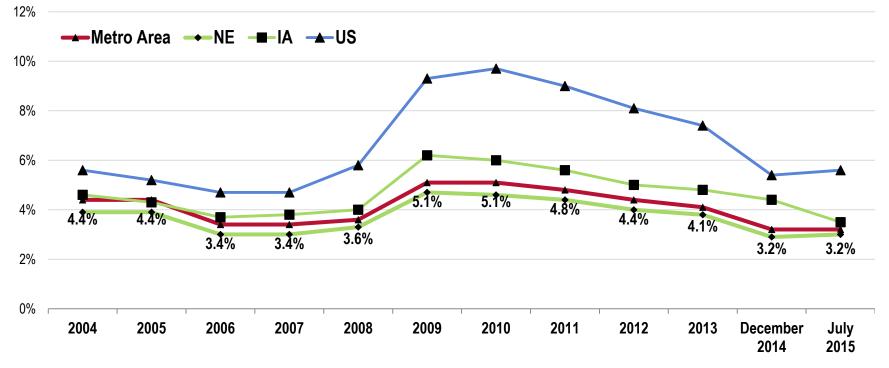
Population With No High School Diploma, Percent by Tract, ACS 2009-2013

vattamie Counties



## **Unemployment Rate**

(Percent of Non-Institutionalized Population Age 16+ Unemployed, Not Seasonally-Adjusted)



Sources:

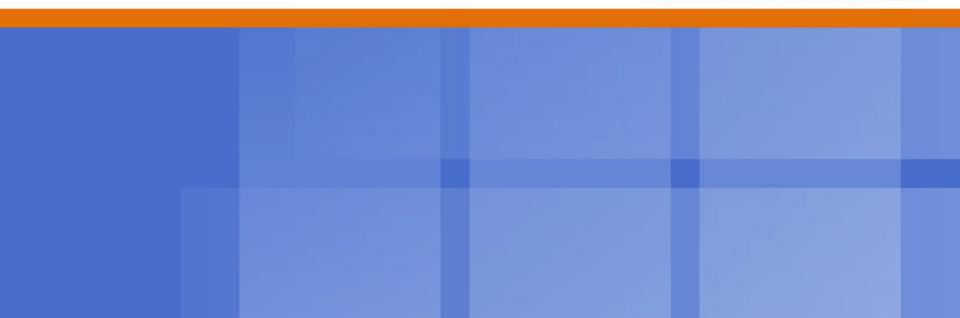
• US Department of Labor, Bureau of Labor Statistics.

Retrieved August 2015 from Community Commons at http://www.chna.org.

• 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.

# **GENERAL HEALTH STATUS**



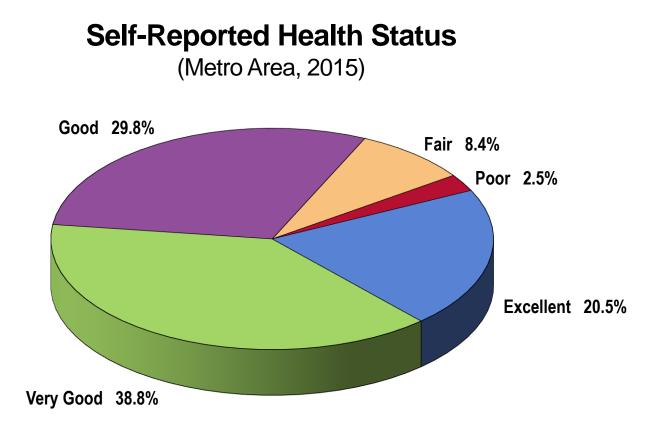


PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

# **Overall Health**







- Sources: 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 5]
- Notes: Asked of all respondents.



## **Experience "Fair" or "Poor" Overall Health**

100%		Metro Area	
80%		Mello Alea	
60%			
40%			
20% 0%	15.6%       17.6%       15.6%       14.8%       13.9%       14.4%       15.3%         7.1%       7.9%       7.0%       6.7%	12.7% 10.9%	
070	NE SE NW SW WesternDouglas Sarpy Cass Pott. Metro NE IA US Omaha Omaha Omaha Douglas County County County Area	2011 2015	

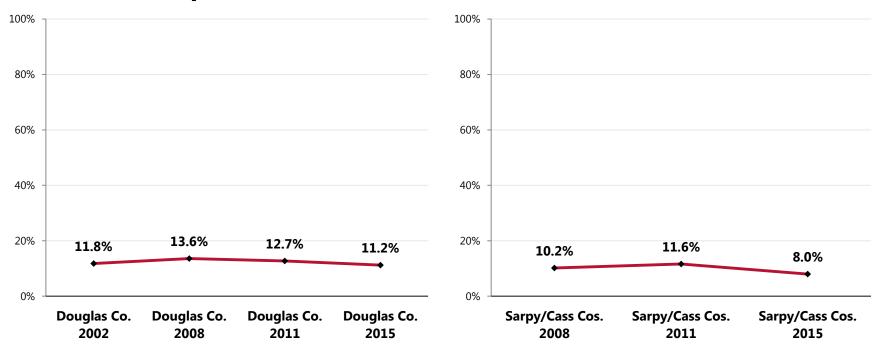
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 5]

• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.

- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- Notes: Asked of all respondents.



## **Experience "Fair" or "Poor" Overall Health**

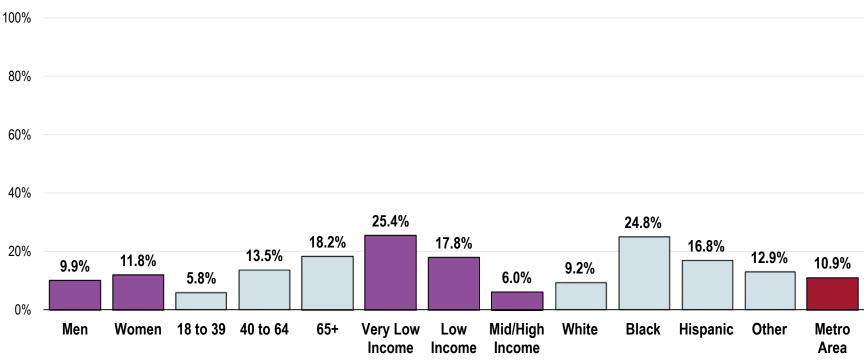


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 5] Notes: • Asked of all respondents.



## Experience "Fair" or "Poor" Overall Health

(Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 5]

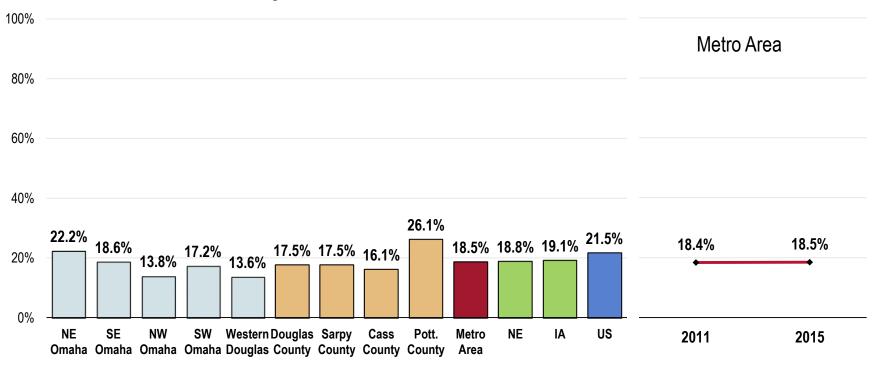
- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.

Notes:



#### Limited in Activities in Some Way Due to a Physical, Mental or Emotional Problem



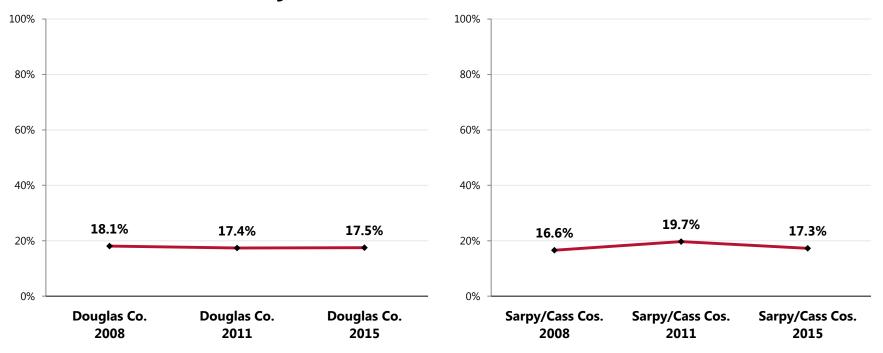
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 105]

• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.

- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- Notes: Asked of all respondents.



#### Limited in Activities in Some Way Due to a Physical, Mental or Emotional Problem

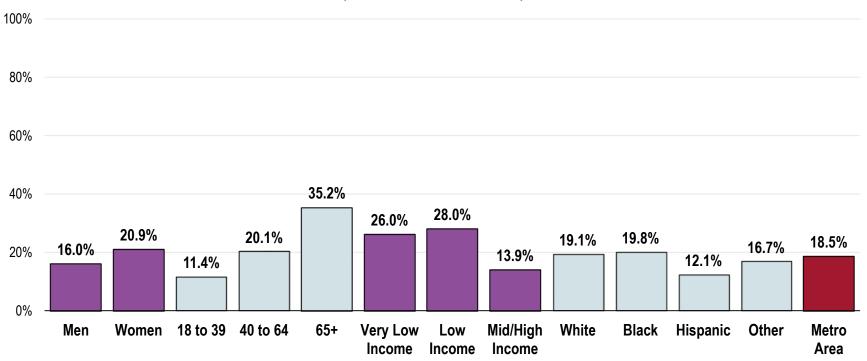


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 105] Notes: • Asked of all respondents.



## Limited in Activities in Some Way Due to a Physical, Mental or Emotional Problem

(Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 105]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



#### **Type of Problem That Limits Activities** (Among Those Reporting Activity Limitations; Metro Area, 2015)

0% 60% 20% 40% 80% 100% **Back/Neck Problem** 11.9% Walking Problem 10.3% Fracture/Bone/Joint Injury 10.0% Arthritis/Rheumatism 9.2% Depression/Anxiety/Mental 6.5% Heart Condition 3.7% Various Other (<3% Each) 48.4%

Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 106]

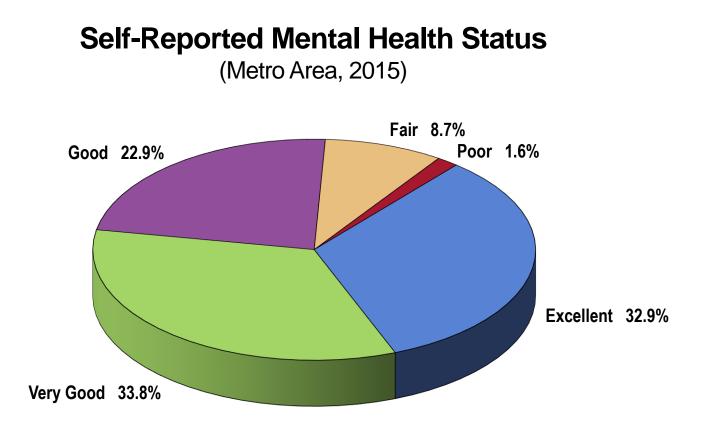
Notes: • Asked of those respondents reporting activity limitations.

PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

# **Mental Health**



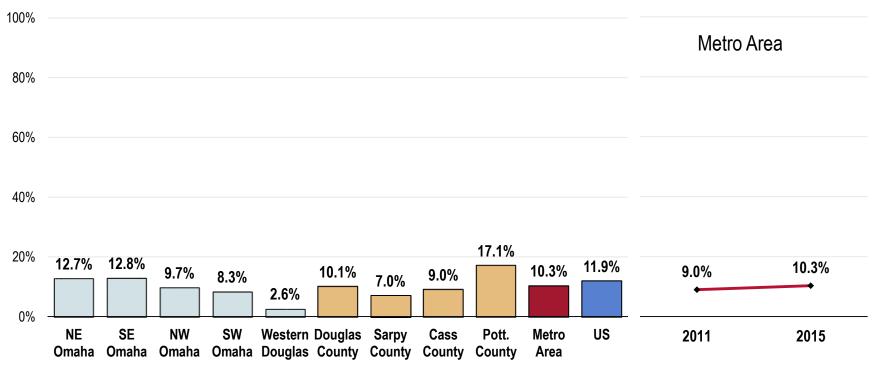




- Sources: 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 100]
- Notes: Asked of all respondents.



#### **Experience "Fair" or "Poor" Mental Health**



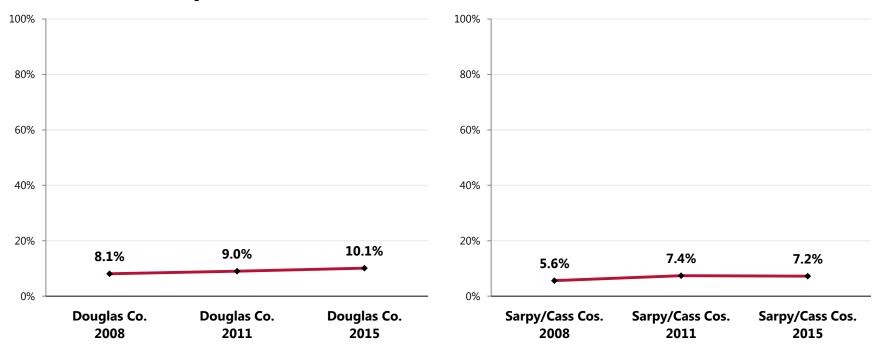
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 100]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.



#### **Experience "Fair" or "Poor" Mental Health**

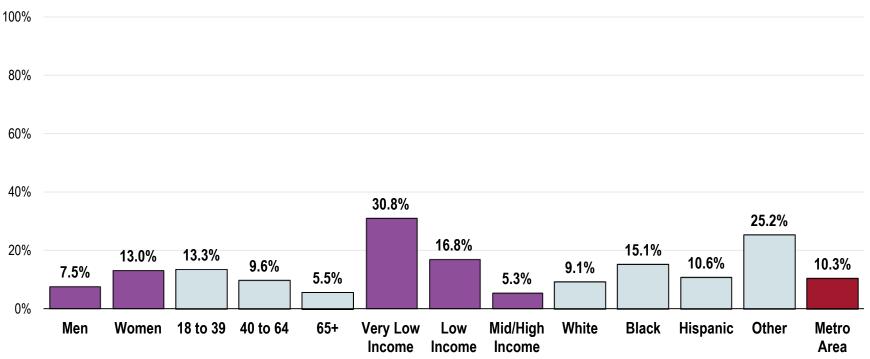


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 100] Notes: • Asked of all respondents.



# Experience "Fair" or "Poor" Mental Health

(Metro Area, 2015)



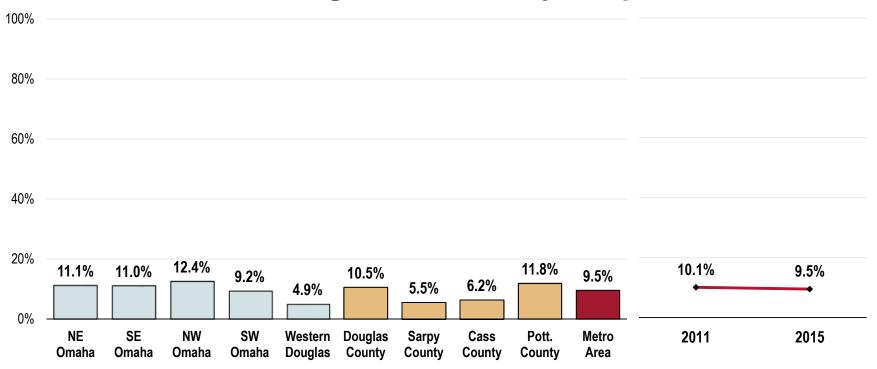
Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 100]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



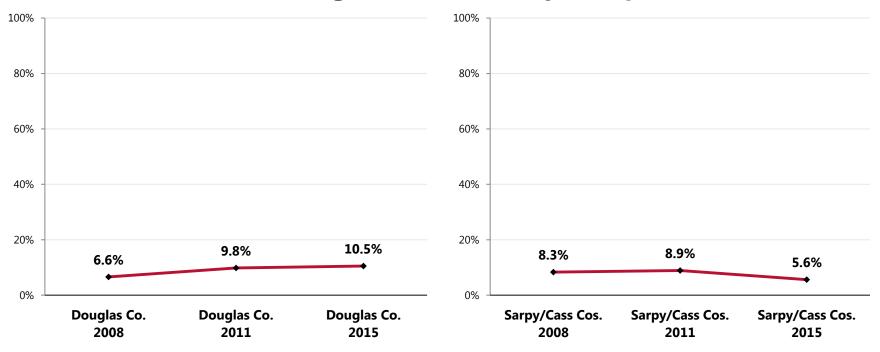
#### Have Been Diagnosed With Major Depression



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 308] Notes: • Asked of all respondents.



#### Have Been Diagnosed With Major Depression

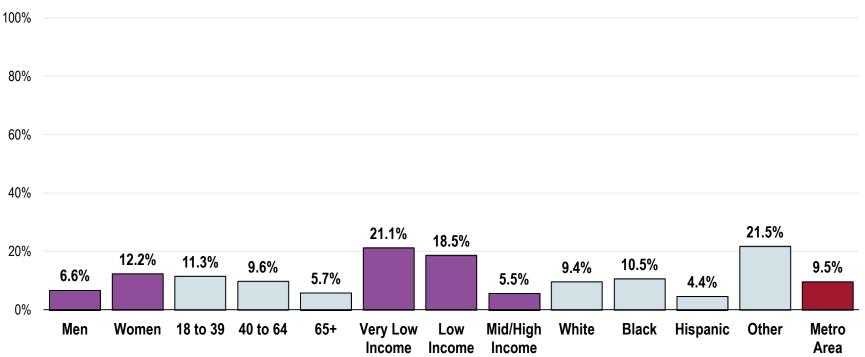


Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 308] Notes: • Asked of all respondents.



# Have Been Diagnosed With Major Depression

(Metro Area, 2015)



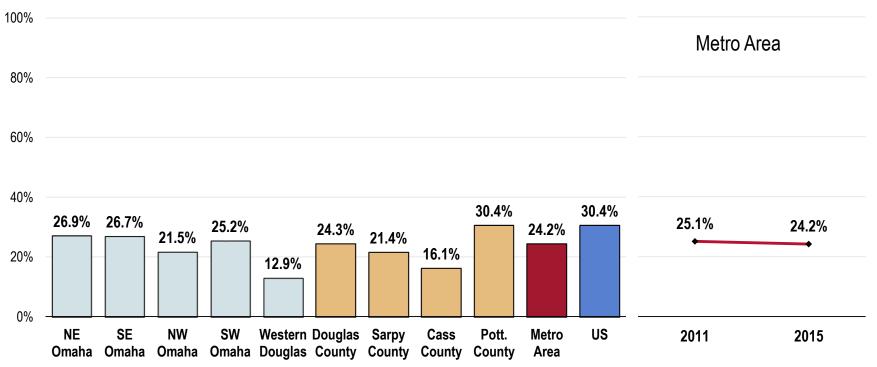
Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 308]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



#### Have Experienced Symptoms of Chronic Depression



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 101]

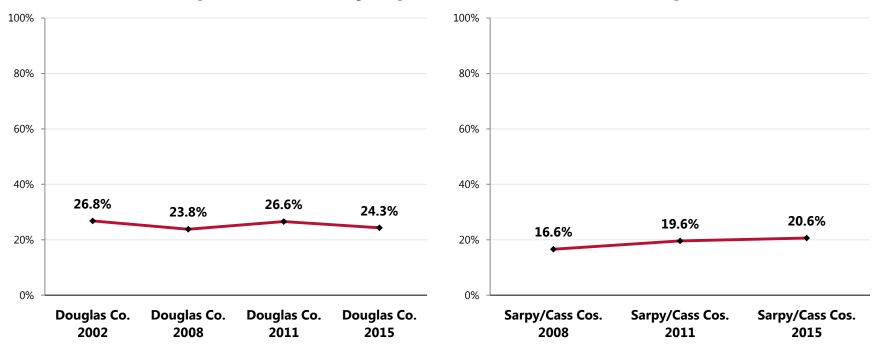
• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.

• Chronic depression includes periods of two or more years during which the respondent felt depressed or sad on most days, even if (s)he felt okay sometimes.



#### Have Experienced Symptoms of Chronic Depression



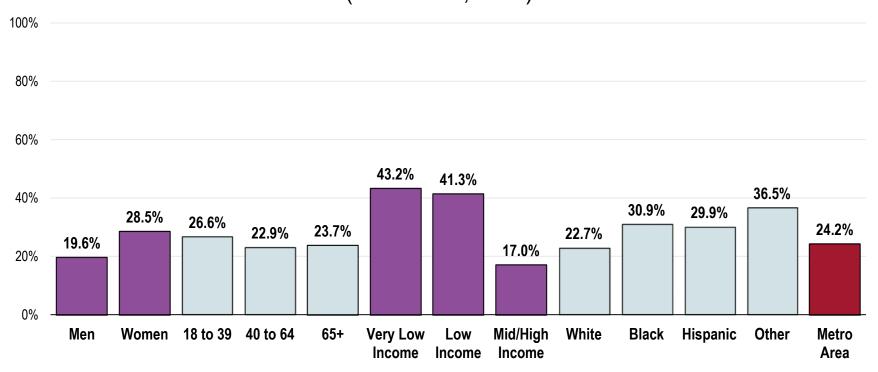
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 101]

Notes: • Asked of all respondents.

• Chronic depression includes periods of two or more years during which the respondent felt depressed or sad on most days, even if (s)he felt okay sometimes.



#### Have Experienced Symptoms of Chronic Depression (Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 101]

Notes: • Asked of all respondents.

• Chronic depression includes periods of two or more years during which the respondent felt depressed or sad on most days, even if (s)he felt okay sometimes.

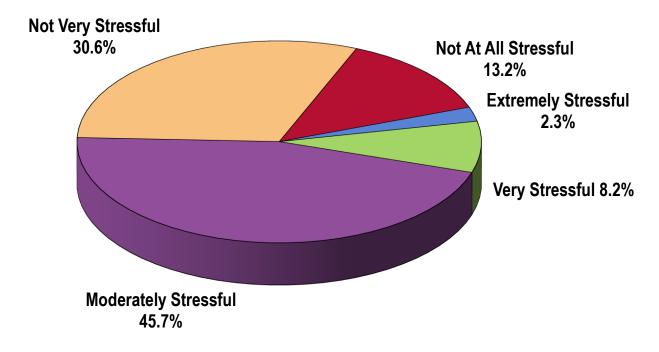
• Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



## Perceived Level of Stress On a Typical Day





- Sources: 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 102]
- Notes: Asked of all respondents.



#### Perceive Most Days As "Extremely" or "Very" Stressful

100%													
												Metro A	Area
80%													
60%													
40%													
20%	8.6%	13.1%	12.2%	11.0%	10.3%	11.1%	8.2%	12.2%	10.1%	10.5%	11.9%	11.5%	10.5%
•••													•
0%	NE	SE	NW	SW	Western			Cass	Pott.	Metro	US	2011	2015
	Omaha	Omaha	Omaha	Omaha	Douglas	County	County	County	County	Area			

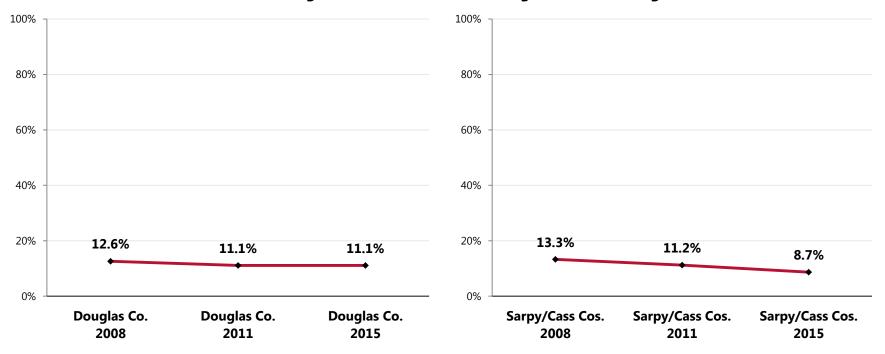
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 102]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.



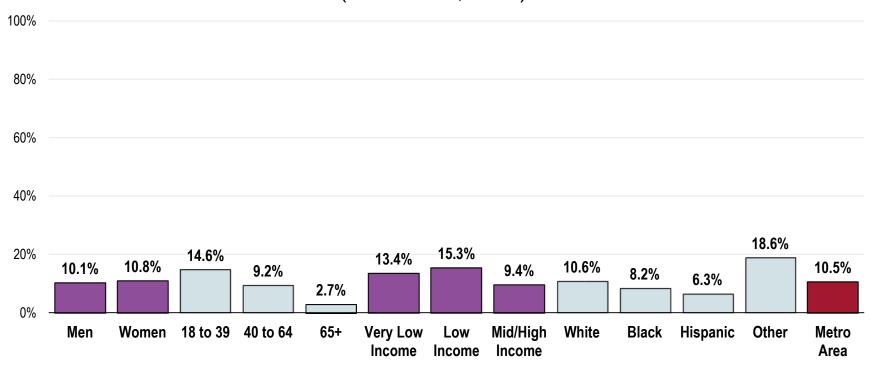
#### Perceive Most Days As "Extremely" or "Very" Stressful



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 102] Notes: • Asked of all respondents.



#### Perceive Most Days as "Extremely" or "Very" Stressful (Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 102]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

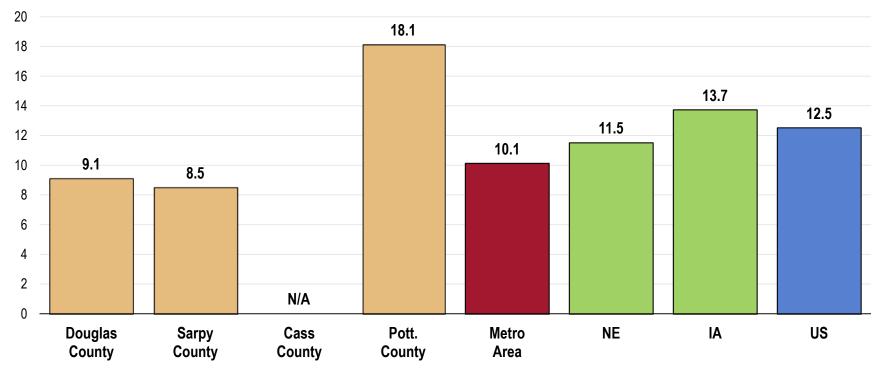
Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



## Suicide: Age-Adjusted Mortality

(2011-2013 Annual Average Deaths per 100,000 Population)

#### Healthy People 2020 Target = 10.2 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective MHMD-1]

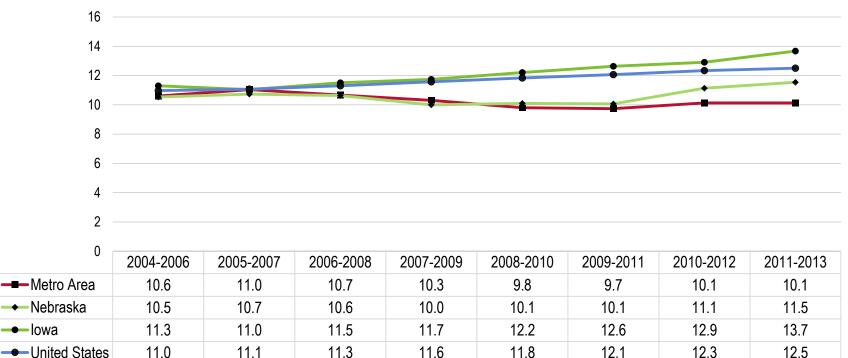
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



## Suicide: Age-Adjusted Mortality Trends

(Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 10.2 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective MHMD-1]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

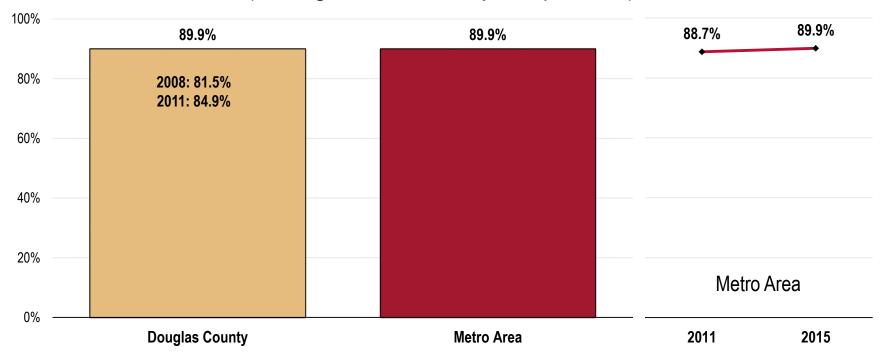
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• Local, state and national data are simple three-year averages.



#### Adults With Major Depression Who Have Ever Sought Professional Help for a Mental or Emotional Problem

(Among Adults With Major Depression)



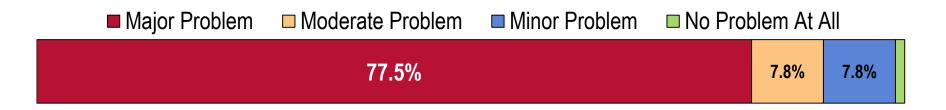
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 123]

Notes: • Reflects those respondents with major depression.



## Perceptions of Mental Health as a Problem in the Community

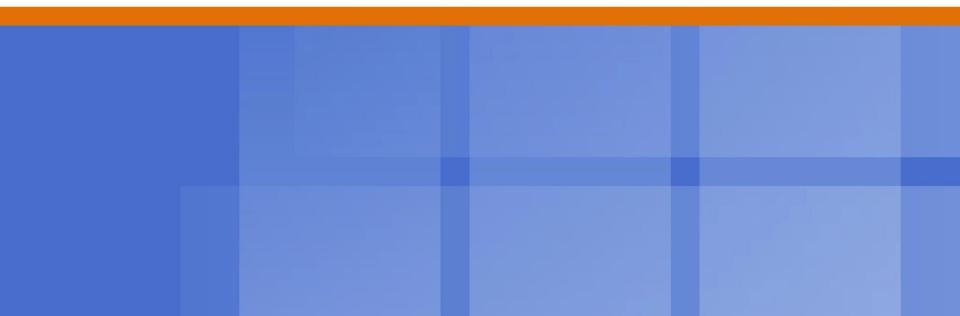
(Key Informants, 2015)



Sources: • PRC Key Informant Focus Groups, August 2015.

# DEATH, DISEASE & CHRONIC CONDITIONS



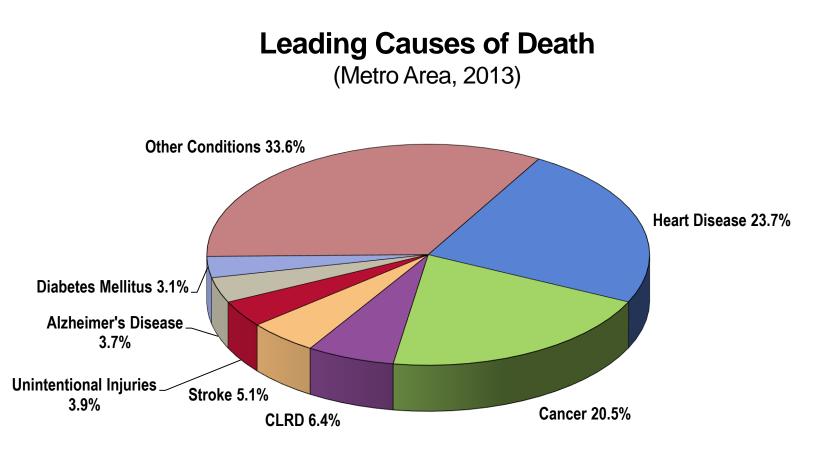


PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

# **Leading Causes of Death**







- CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
  - CLRD is chronic lower respiratory disease.



#### Age-Adjusted Death Rates for Selected Causes

#### (2011-2013 Deaths per 100,000 Population)

	Metro Area	Nebraska	lowa	US	HP2020
Malignant Neoplasms (Cancers)	178.5	163.4	170.0	166.2	161.4
Diseases of the Heart	151.3	147.2	168.4	171.3	156.9*
Chronic Lower Respiratory Disease (CLRD)	50.4	49.0	47.4	42.0	n/a
Cerebrovascular Disease (Stroke)	38.2	36.0	34.3	37.0	34.8
Unintentional Injuries	32.5	36.1	39.8	39.2	36.4
Alzheimer's Disease	28.1	24.7	30.3	24.0	n/a
Diabetes Mellitus	22.7	21.4	18.8	21.3	20.5*
Pneumonia/Influenza	14.7	13.8	16.4	15.3	n/a
Kidney Diseases	11.6	9.8	8.2	13.2	n/a
Intentional Self-Harm (Suicide)	10.1	11.5	13.7	12.5	10.2
Firearm-Related	10.0	9.0	7.4	10.4	9.3
Drug-Induced	9.6	7.9	9.2	14.1	11.3
Cirrhosis/Liver Disease	8.7	7.9	7.8	9.9	8.2
Motor Vehicle Deaths	7.1	11.4	11.1	10.7	12.4
Homicide/Legal Intervention	6.2	3.8	2.0	5.3	5.5
HIV/AIDS	1.3	0.9	0.7	2.2	3.3

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov.

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population and coded using ICD-10 codes.

• \*The Healthy People 2020 Heart Disease target is adjusted to account for all diseases of the heart; the Diabetes target is adjusted to reflect only diabetes mellituscoded deaths.

PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

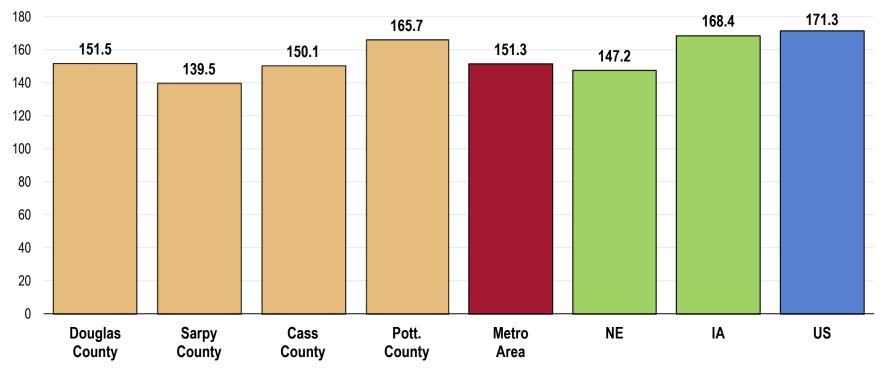
# **Cardiovascular Disease**





### Heart Disease: Age-Adjusted Mortality

(2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 156.9 or Lower (Adjusted)



 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HDS-2]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

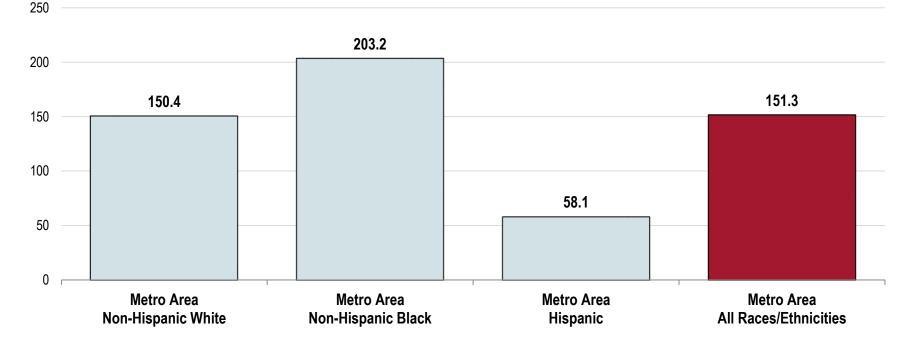
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• The Healthy People 2020 Heart Disease target is adjusted to account for all diseases of the heart.



#### Heart Disease: Age-Adjusted Mortality by Race

(2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 156.9 or Lower (Adjusted)



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HDS-2]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

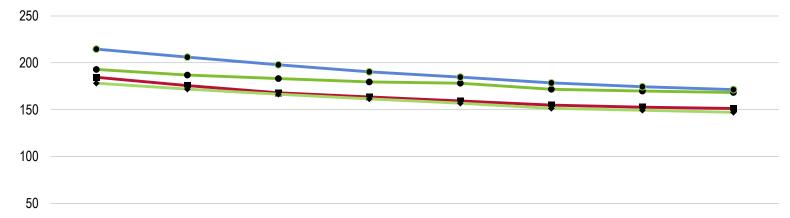
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• The Healthy People 2020 Heart Disease target is adjusted to account for all diseases of the heart.



#### Heart Disease: Age-Adjusted Mortality Trends

(Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 156.9 or Lower (Adjusted)



0	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
Metro Area	184.5	175.7	168.0	163.6	159.3	154.8	152.6	151.3
Nebraska	178.2	171.8	166.4	161.5	156.9	151.4	149.3	147.2
—● Iowa	192.9	186.9	183.2	179.6	178.3	171.8	169.9	168.4
United States	214.6	206.1	197.9	190.3	184.7	178.5	174.4	171.3

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HDS-2]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• Local, state and national data are simple three-year averages.

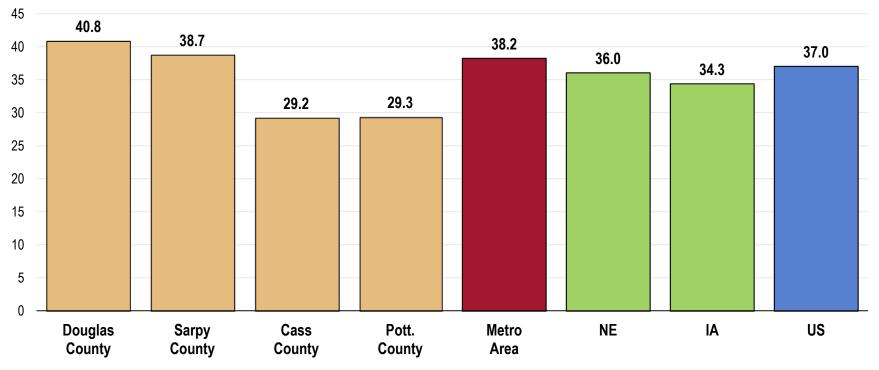
• The Healthy People 2020 Heart Disease target is adjusted to account for all diseases of the heart.



### **Stroke: Age-Adjusted Mortality**

## (2011-2013 Annual Average Deaths per 100,000 Population)

Healthy People 2020 Target = 34.8 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HDS-3]

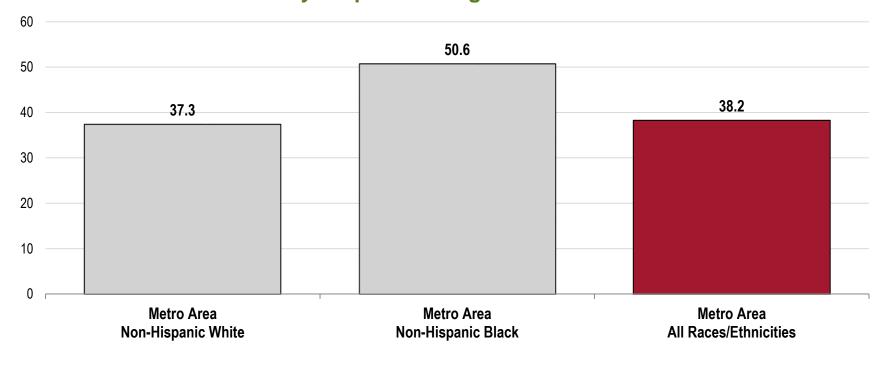
Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### Stroke: Age-Adjusted Mortality by Race

#### (2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 34.8 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HDS-3]

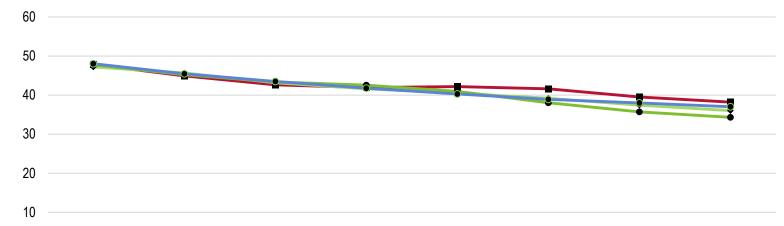
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



## **Stroke: Age-Adjusted Mortality Trends**

(Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 34.8 or Lower



0	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
Metro Area	47.8	44.9	42.6	41.9	42.2	41.6	39.5	38.2
→ Nebraska	47.2	45.6	43.1	41.6	40.5	39.2	37.4	36.0
<b>—</b> ● lowa	47.8	45.2	43.3	42.5	40.9	38.0	35.7	34.3
United States	48.0	45.4	43.5	41.7	40.3	38.9	38.0	37.0

Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HDS-3]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• Local, state and national data are simple three-year averages.



#### **Prevalence of Heart Disease**

100%												Metro A	rea
80%													
60%													
40%													
20%													
0%	4.8%	4.8%	3.7%	5.9%	4.1%	4.8%	5.2%	4.1%	6.9%	5.1%	6.1%	5.2% •	5.1%
	NE Omaha	SE Omaha	NW Omaha	SW Omaha	Western Douglas			Cass County	Pott. County	Metro Area	US	2011	2015

Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 309]

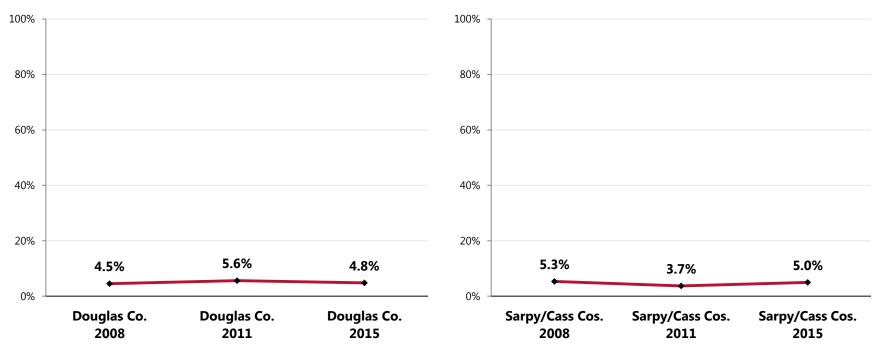
• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.

• Includes diagnoses of heart attack, angina or coronary heart disease.



#### **Prevalence of Heart Disease**



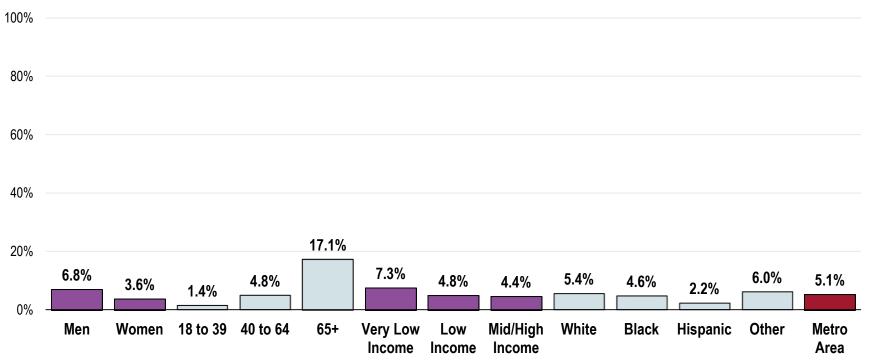
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 309]

- Notes: Asked of all respondents.
  - Includes diagnoses of heart attack, angina or coronary heart disease.



#### **Prevalence of Heart Disease**

(Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 309]

- Notes: Asked of all respondents.
  - Includes diagnoses of heart attack, angina or coronary heart disease.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
  - Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



#### **Prevalence of Stroke**

100%		Metro Area
80%		
60%		
40%		
20%		
0%	3.1%       5.4%       3.8%       3.1%       3.7%       1.3%       0.3%       5.5%       3.4%       2.5%       2.8%       3.9%	2.3% 3.4%
370	NE SE NW SW Western Douglas Sarpy Cass Pott. Metro NE IA US Omaha Omaha Omaha Douglas County County County Area	2011 2015

Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 36]

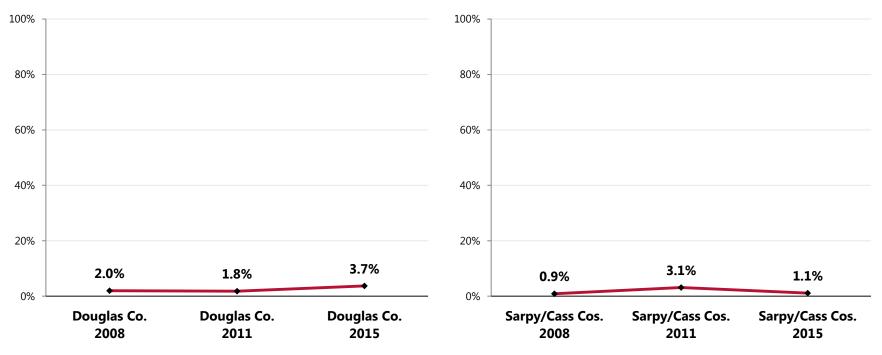
• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.

Notes: • Asked of all respondents.



#### **Prevalence of Stroke**

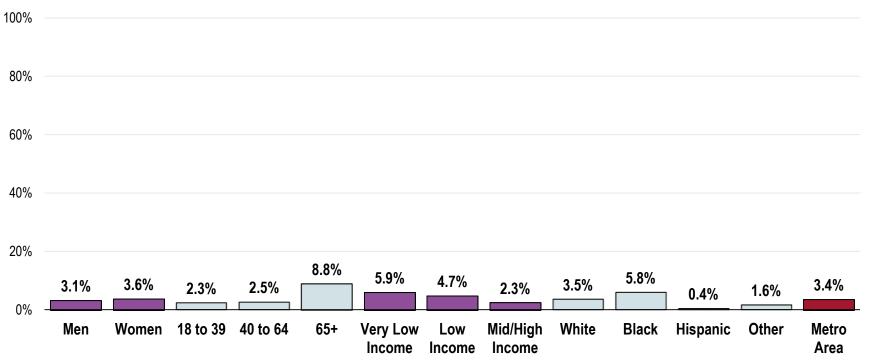


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 36] Notes: • Asked of all respondents.



#### **Prevalence of Stroke**

(Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 36]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



# Perceptions of Heart Disease and Stroke as a Problem in the Community

(Key Informants, 2015)

Major Problem	Moderate Problem	Minor Problem	No Problem At All
45	45.9%		₹. <b>6.1%</b>

Sources: • PRC Key Informant Focus Groups, August 2015.





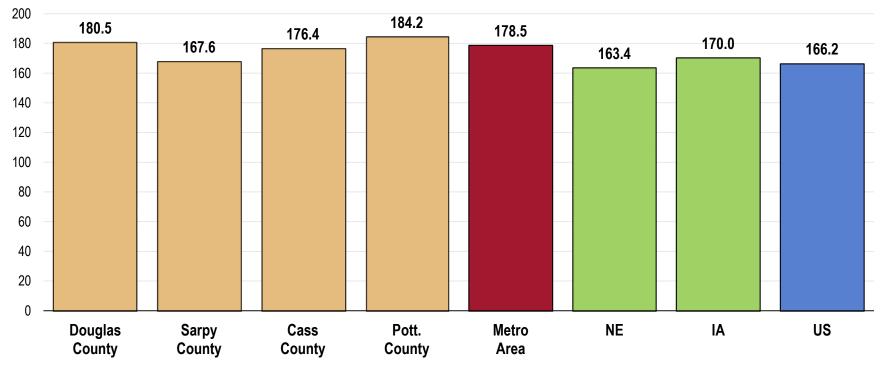




#### **Cancer: Age-Adjusted Mortality**

#### (2011-2013 Annual Average Deaths per 100,000 Population)

Healthy People 2020 Target = 161.4 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective C-1]

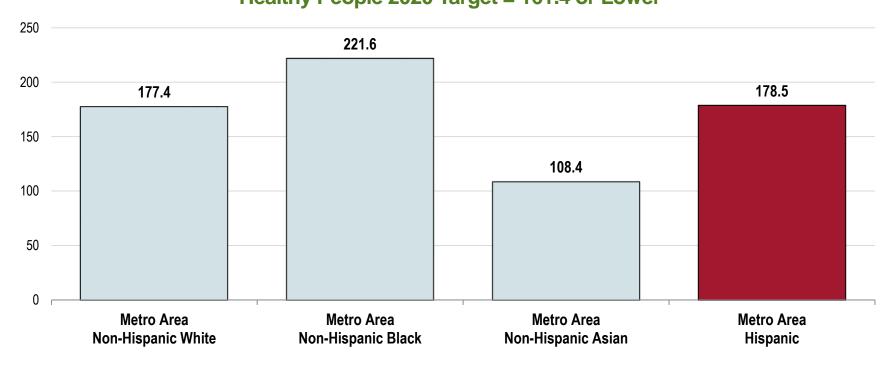
Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### **Cancer: Age-Adjusted Mortality by Race**

(2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 161.4 or Lower



 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective C-1]

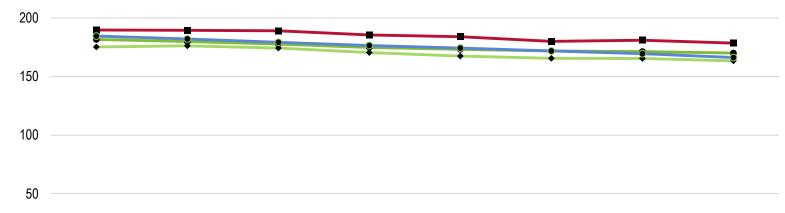
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### **Cancer: Age-Adjusted Mortality Trends**

(Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 161.4 or Lower



0	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
Metro Area	189.6	189.4	189.1	185.5	183.9	179.9	180.9	178.5
Nebraska	175.3	176.2	174.3	170.5	167.4	165.5	165.4	163.4
<b>—</b> ● lowa	181.6	179.8	177.6	174.8	173.1	171.8	171.2	170.0
——United States	184.6	182.1	179.2	176.4	174.2	171.8	169.4	166.2

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective C-1]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• State and national data are simple three-year averages.



#### Age-Adjusted Cancer Death Rates by Site

(2011-2013 Annual Average Deaths per 100,000 Population)

	Metro Area	NE	IA	US	HP2020
Lung Cancer	51.4	42.7	46.6	44.7	45.5
Prostate Cancer	22.3	21.6	20.0	19.8	21.8
Female Breast Cancer	21.9	20.2	19.6	21.3	20.7
Colorectal Cancer	16.7	16.0	16.3	14.9	14.5

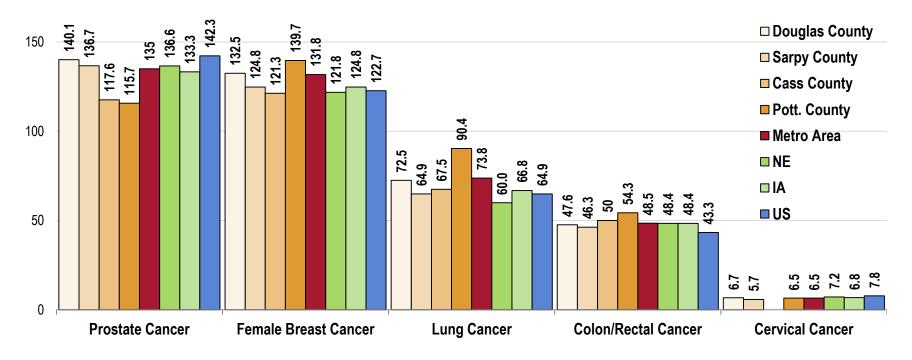
Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov



#### **Cancer Incidence Rates by Site**

(Annual Average Age-Adjusted Incidence per 100,000 Population, 2007-2011)



- Sources: State Cancer Profiles: 2007-11.
  - Retrieved August 2015 from Community Commons at http://www.chna.org.
- This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of cancers, adjusted to 2000 US 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.



#### **Prevalence of Skin Cancer**

100%		Metro Area
80%		
60%		
40%		
20%	10.6%	
0%	3.2%       2.0%       5.2%       6.8%       5.0%       4.6%       5.3%       6.2%       5.1%       5.9%       6.1%       6.7%	5.3% 5.1%
	NE SE NW SW Western Douglas Sarpy Cass Pott. Metro NE IA US Omaha Omaha Omaha Omaha Douglas County County County County Area	2011 2015

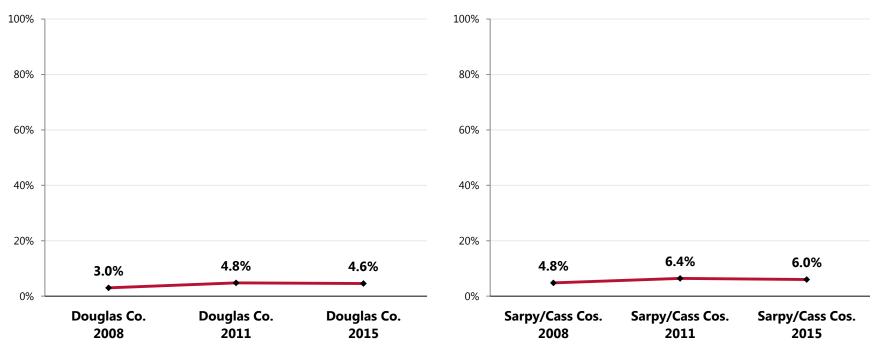
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 31]

• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.

- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- Notes: Asked of all respondents.



#### **Prevalence of Skin Cancer**



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 31] Notes: • Asked of all respondents.



#### **Prevalence of Cancer (Other Than Skin Cancer)**

100%		
		Metro Area
80%		
C00/		
60%		
40%		
20%		
	6.2% 3.3% 2.9% 4.9% 6.7% 4.5% 5.5% 8.5% 8.0% 5.2% 6.8% 7.1% 6.1%	5.8% 5.2%
0%	NE         SE         NW         SW         Western Douglas         Sarpy         Cass         Pott.         Metro         NE         IA         US	
	Omaha Omaha Omaha Omaha Douglas County County County Area	2011 2015

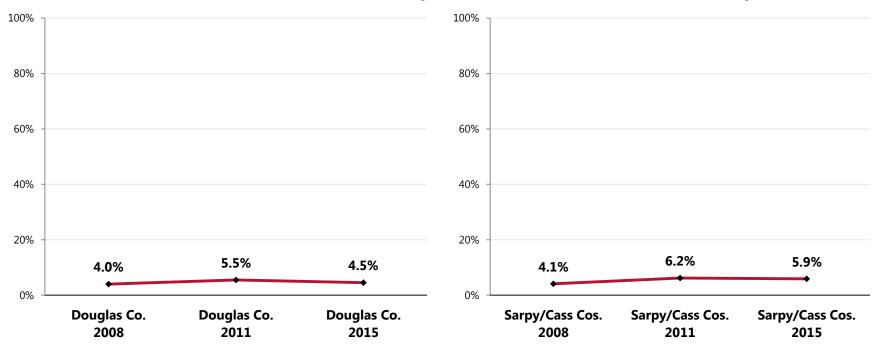
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 30]

• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.

- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- Notes: Asked of all respondents.



#### **Prevalence of Cancer (Other Than Skin Cancer)**

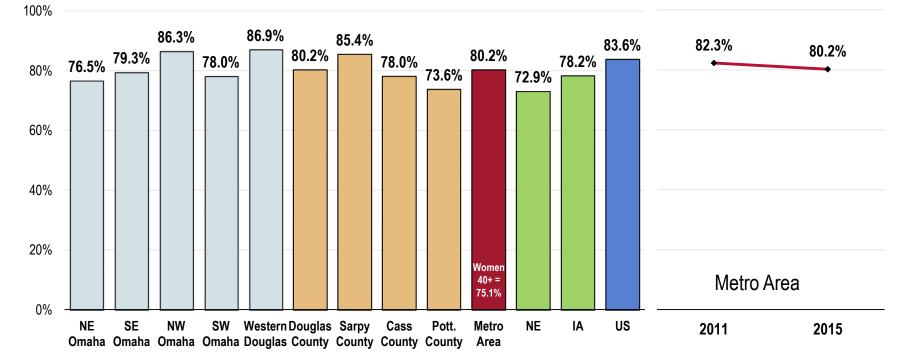


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 30] Notes: • Asked of all respondents.



#### Have Had a Mammogram in the Past Two Years

(Among Women Age 50-74) Healthy People 2020 Target = 81.1% or Higher



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Items 128-129]

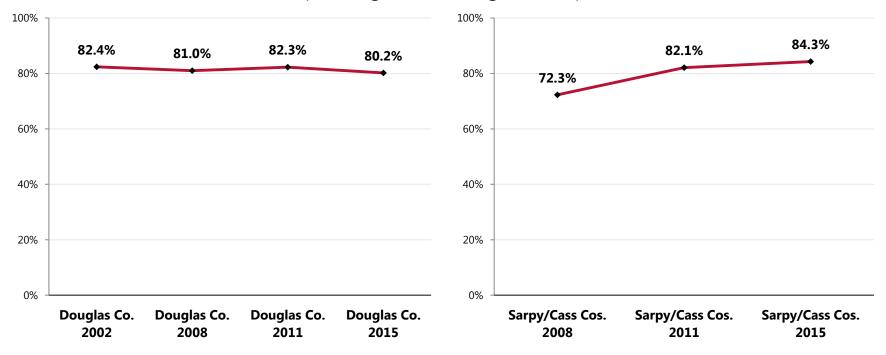
• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2012 Nebraska and Iowa data.

- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective C-17]
- Notes: Reflects female respondents 50-74.
  - \*Note that state data reflects all women 50 and older (vs. women 50-74 in local, US and Healthy People data).



#### Have Had a Mammogram in the Past Two Years

(Among Women Age 50-74)

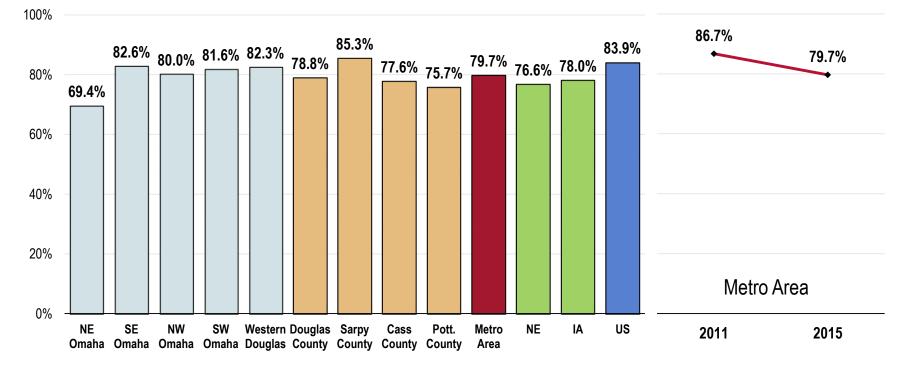


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Items 128-129] Notes: • Reflects female respondents 50-74.



#### Have Had a Pap Smear in the Past Three Years

(Among Women Age 21-65) Healthy People 2020 Target = 93.0% or Higher



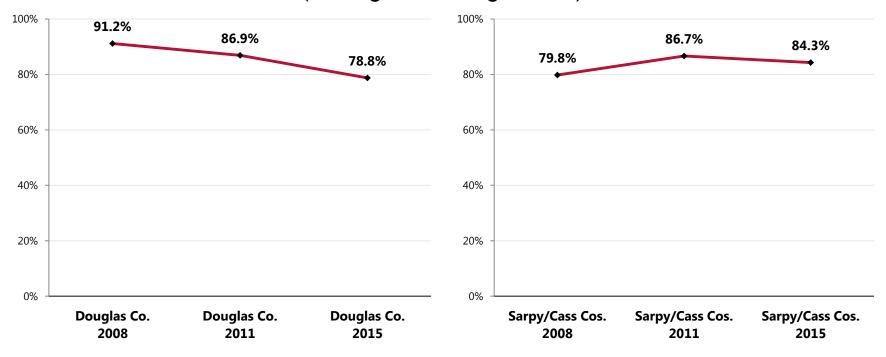
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 130]

- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2012 Nebraska and Iowa data.
- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective C-15]
- Notes: Reflects female respondents age 21 to 65.
  - \*Note that the Nebraska percentage represents all women age 18 and older.



#### Have Had a Pap Smear in the Past Three Years

(Among Women Age 21-65)



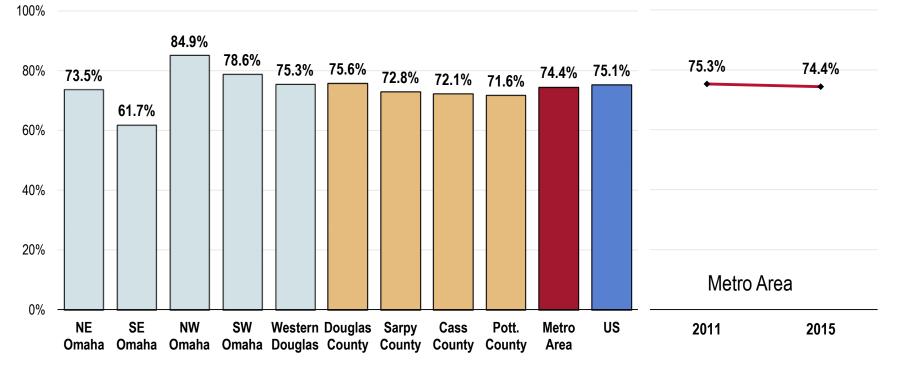
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 130]

Notes: • Reflects female respondents age 21 to 65.



#### Have Had a Colorectal Cancer Screening

(Among Adults Age 50-75) Healthy People 2020 Target = 70.5% or Higher



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 133]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective C-16]

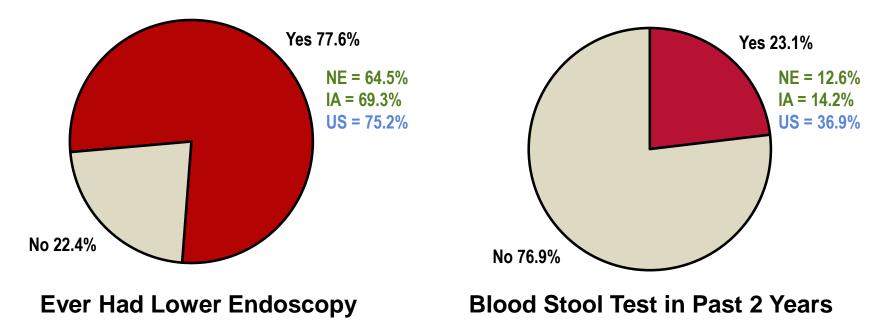
Notes: • Asked of all respondents age 50 through 75.

• In this case, the term "colorectal screening" refers to adults age 50-75 receiving a FOBT (fecal occult blood test) in the past year and/or a lower endoscopy (sigmoidoscopy/colonoscopy) in the past 10 years.



#### **Colorectal Cancer Screenings**

(Among Metro Area Adults Age 50 and Older, 2015)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Items 131-132]

- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2012 Nebraska and Iowa data.
- Notes: Asked of respondents age 50 and older.
  - Lower endoscopy includes either sigmoidoscopy or colonoscopy.



#### Perceptions of Cancer as a Problem in the Community

(Key Informants, 2015)

Major Problem	Moderate Problem	Minor Problem	No Problem At	All
26.8%		42.3%	15.5%	5.2%

Sources: • PRC Key Informant Focus Groups, August 2015.

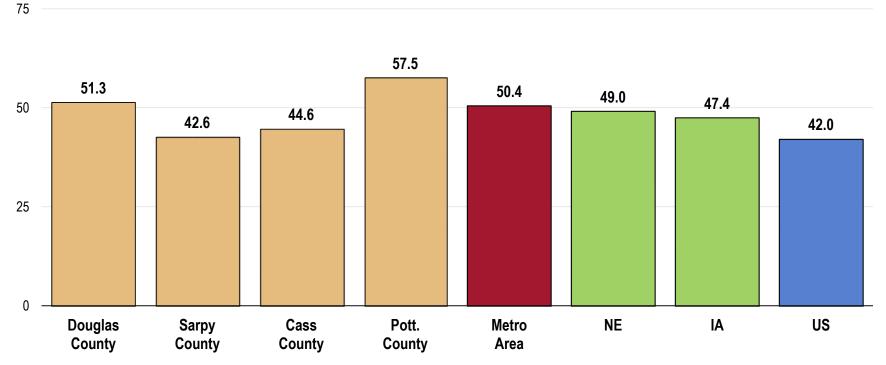
PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

## **Respiratory Disease**





#### **CLRD: Age-Adjusted Mortality** (2011-2013 Annual Average Deaths per 100,000 Population)



 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

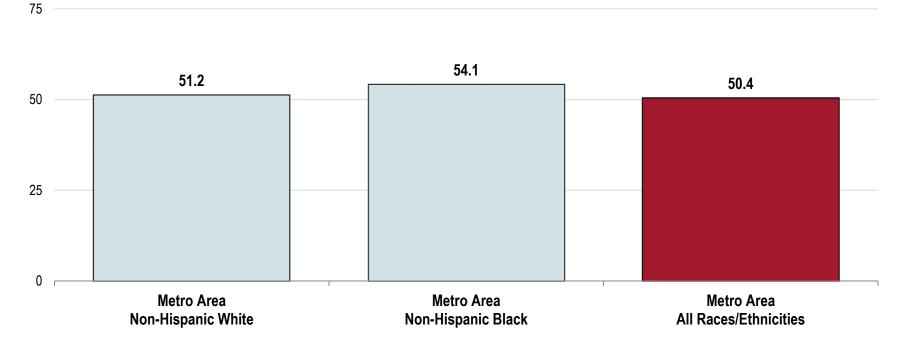
Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
- CLRD is chronic lower respiratory disease.



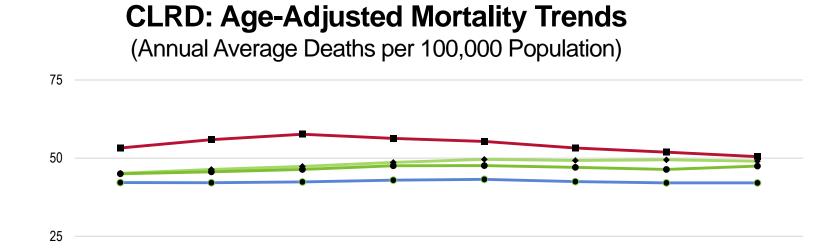
### CLRD: Age-Adjusted Mortality by Race

(2011-2013 Annual Average Deaths per 100,000 Population)



- Sources: CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.
  - Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
    - Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
    - CLRD is chronic lower respiratory disease.





0	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
Metro Area	53.2	55.9	57.6	56.3	55.3	53.2	51.9	50.4
Nebraska	45.1	46.3	47.3	48.6	49.6	49.2	49.4	49.0
<b>—</b> ● lowa	45.0	45.6	46.4	47.5	47.6	47.0	46.4	47.4
United States	42.2	42.1	42.4	42.9	43.2	42.5	42.1	42.0

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

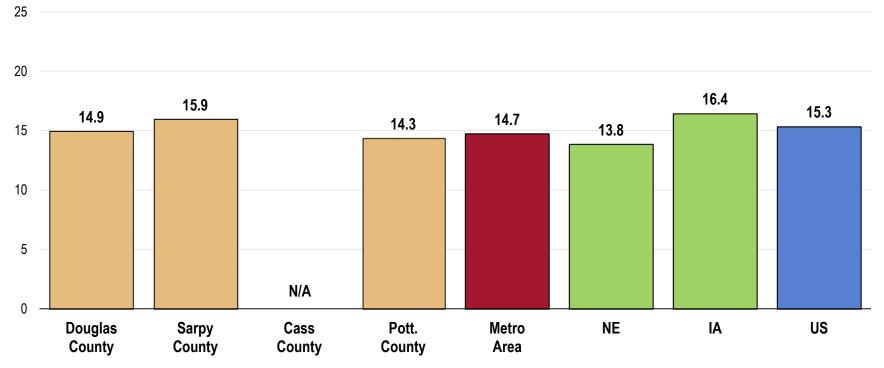
Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
- CLRD is chronic lower respiratory disease.



#### Pneumonia/Influenza: Age-Adjusted Mortality

(2011-2013 Annual Average Deaths per 100,000 Population)



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

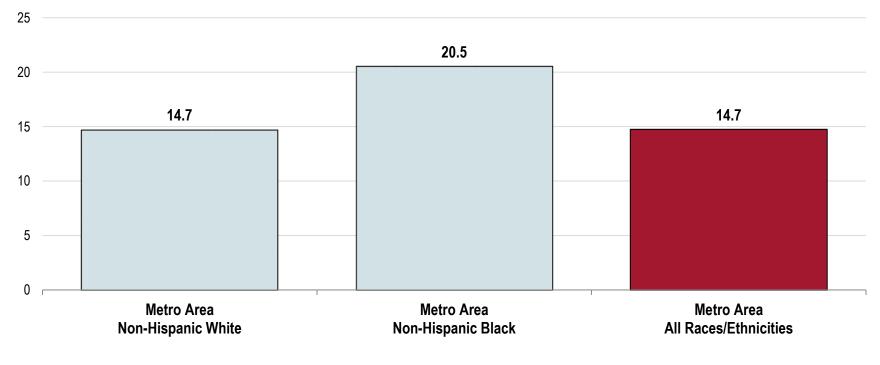
Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### Pneumonia/Influenza: Age-Adjusted Mortality by Race

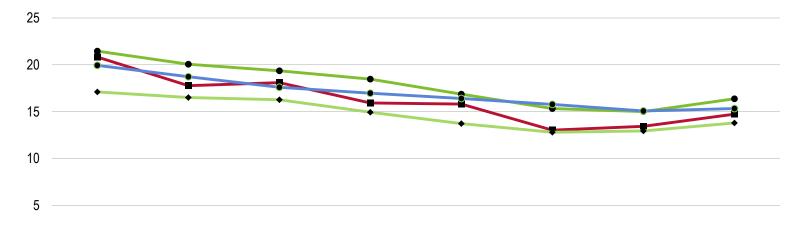
(2011-2013 Annual Average Deaths per 100,000 Population)



- Sources: CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
  - Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### Pneumonia/Influenza: Age-Adjusted Mortality Trends



(	Annual Average De	eaths per ?	100,000 Pc	pulation)
•	5		,	

0	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
Metro Area	20.8	17.8	18.1	15.9	15.8	13.0	13.4	14.7
Nebraska	17.1	16.5	16.3	14.9	13.7	12.8	12.9	13.8
<b>─</b> lowa	21.5	20.1	19.4	18.5	16.9	15.3	15.0	16.4
United States	19.9	18.7	17.6	17.0	16.4	15.8	15.1	15.3

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
- State and national data are simple three-year averages.



#### Prevalence of Chronic Obstructive Pulmonary Disease (COPD)

100%		Metro Area
80%		
60%		
40%		
20%	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	7.4% 8.1% ↓ → →
0%	NE         SE         NW         SW         Western Douglas         Sarpy         Cass         Pott.         Metro         NE         IA         US           Omaha         Omaha	2012* 2015

Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 25]

• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.

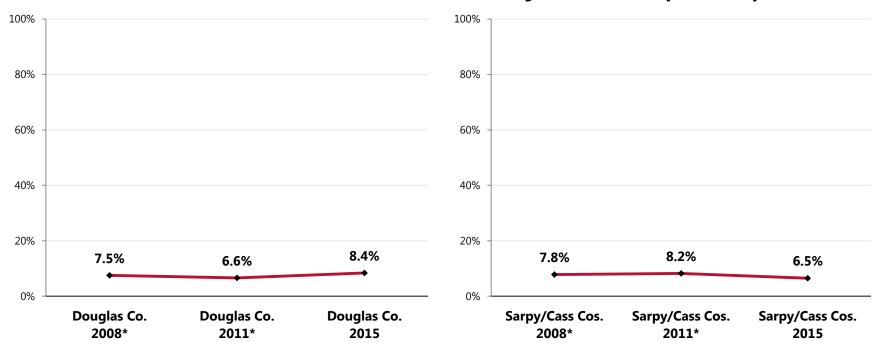
• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.

- Includes those having ever suffered from or been diagnosed with COPD or chronic obstructive pulmonary disease, including bronchitis or emphysema.
- \*In prior data, the term "chronic lung disease" was used, which also included bronchitis or emphysema.



#### Prevalence of Chronic Obstructive Pulmonary Disease (COPD)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 25]

- Notes: Asked of all respondents.
  - Includes those having ever suffered from or been diagnosed with COPD or chronic obstructive pulmonary disease, including bronchitis or emphysema.
  - \*In prior data, the term "chronic lung disease" was used, which also included bronchitis or emphysema.



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#### **Adult Asthma: Current Prevalence**

100%		Matra Araa
80%		Metro Area
60%		
40%		
20%	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	8.6% 8.0%
0%	NE       SE       NW       SW       Western Douglas       Sarpy       Cass       Pott.       Metro       NE       IA       US         Omaha       Omaha       Omaha       Omaha       Douglas       County       County       County       Area	2011 2015

Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 310]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

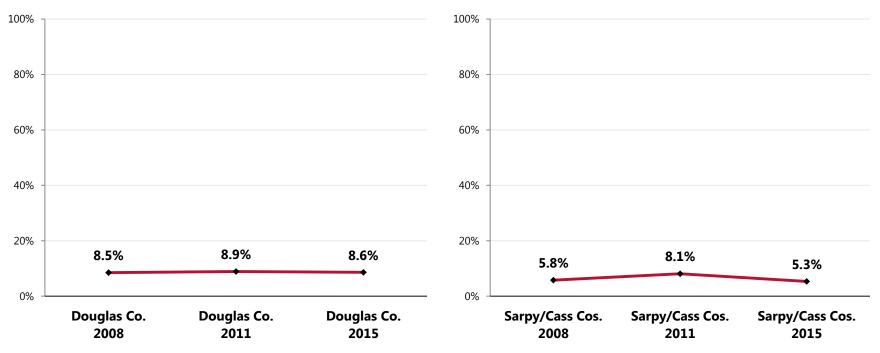
• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.

Notes: • Asked of all respondents.

• Includes those who have ever been diagnosed with asthma, and who report that they still have asthma.



#### **Adult Asthma: Current Prevalence**



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 310]

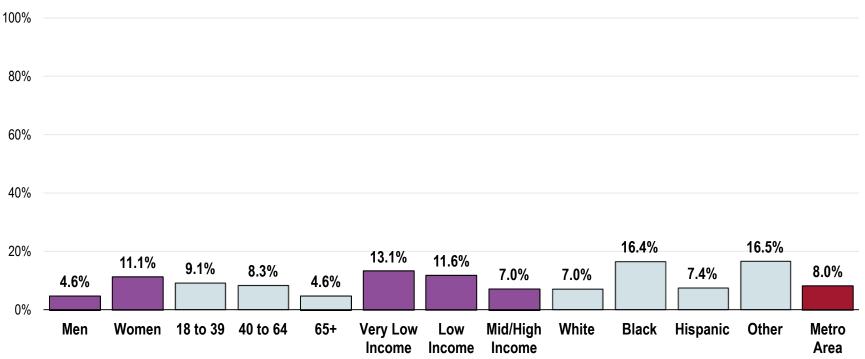
Notes: • Asked of all respondents.

• Includes those who have ever been diagnosed with asthma, and who report that they still have asthma.



#### **Currently Have Asthma**

(Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 310]

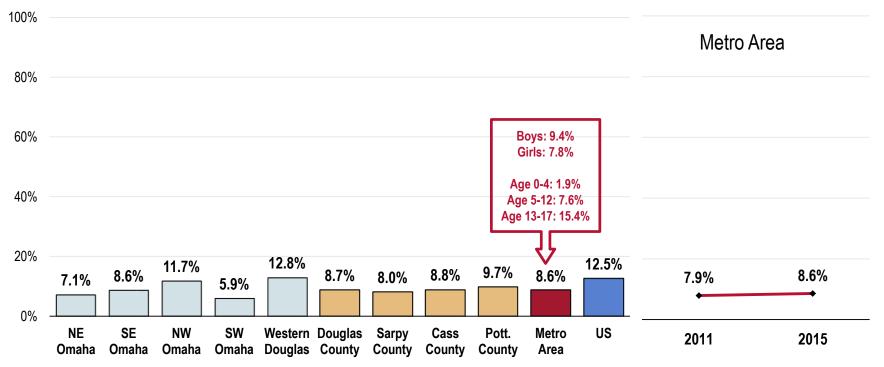
- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



#### **Child Has Ever Been Diagnosed With Asthma**

#### (Among Parents of Children Age 0-17)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 114]

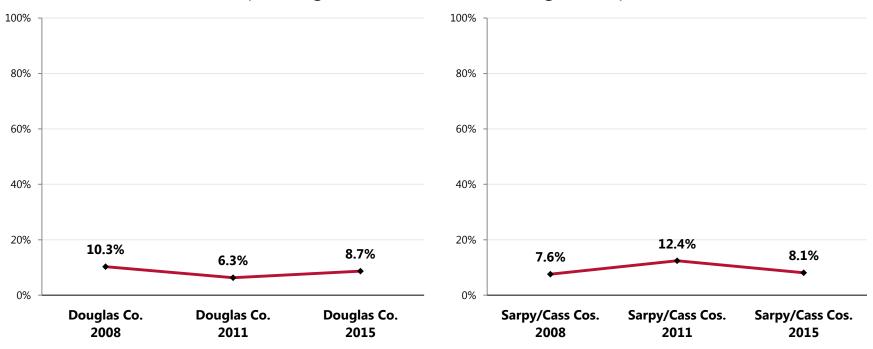
• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents with children 0 to 17 in the household.



#### **Child Has Ever Been Diagnosed With Asthma**

(Among Parents of Children Age 0-17)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 114]

Notes: • Asked of all respondents with children 0 to 17 in the household.



### Perceptions of Respiratory Diseases as a Problem in the Community

(Key Informants, 2015)

Major Problem	Moderate Problem	Minor Problem	No Problem At All		
25.5%	31.6%		28.6%	4.1%	

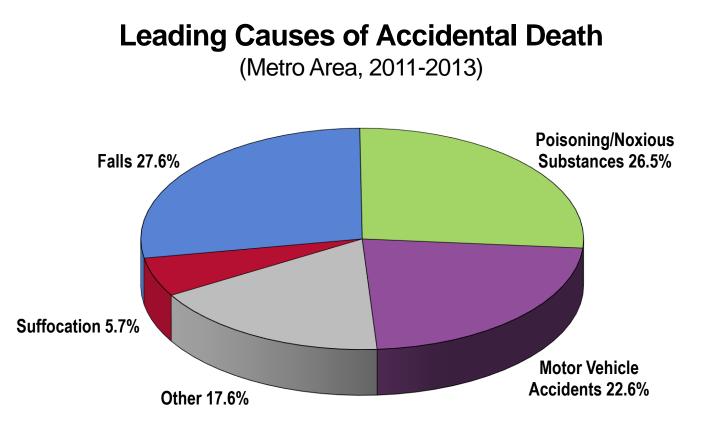
Sources: • PRC Key Informant Focus Groups, August 2015.

PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

# **Injury & Violence**





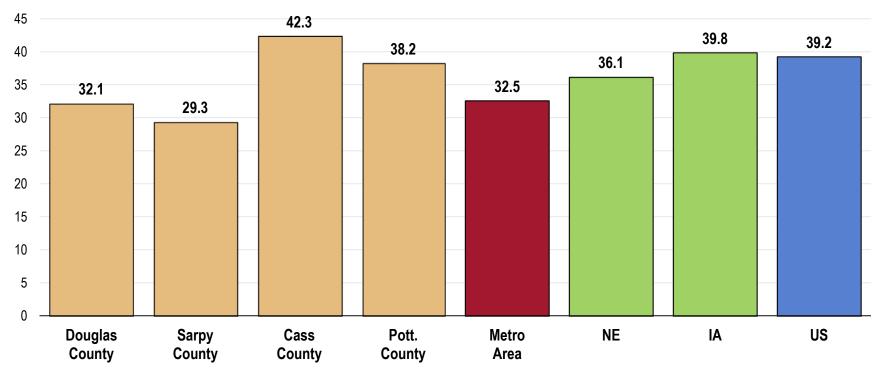


- Sources: CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).



### **Unintentional Injuries: Age-Adjusted Mortality**

(2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 36.4 or Lower



 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-11]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

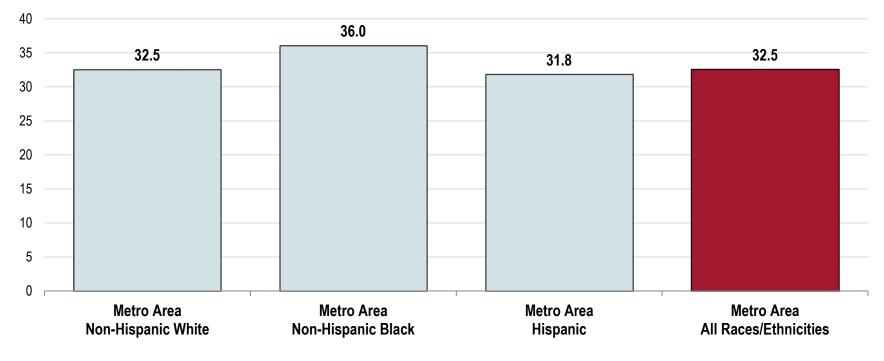
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



### **Unintentional Injuries: Age-Adjusted Mortality by Race**

(2011-2013 Annual Average Deaths per 100,000 Population)

Healthy People 2020 Target = 36.4 or Lower



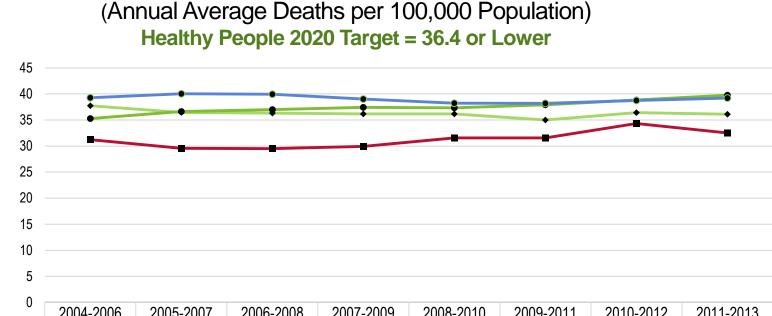
Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-11]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

### **Unintentional Injuries: Age-Adjusted Mortality Trends**



Ũ	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
Metro Area	31.2	29.6	29.5	29.9	31.6	31.6	34.3	32.5
Nebraska	37.7	36.4	36.3	36.2	36.2	35.0	36.4	36.1
<b>—</b> lowa	35.3	36.6	37.0	37.4	37.3	37.9	38.8	39.8
United States	39.3	40.0	39.9	39.0	38.2	38.2	38.7	39.2

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-11]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

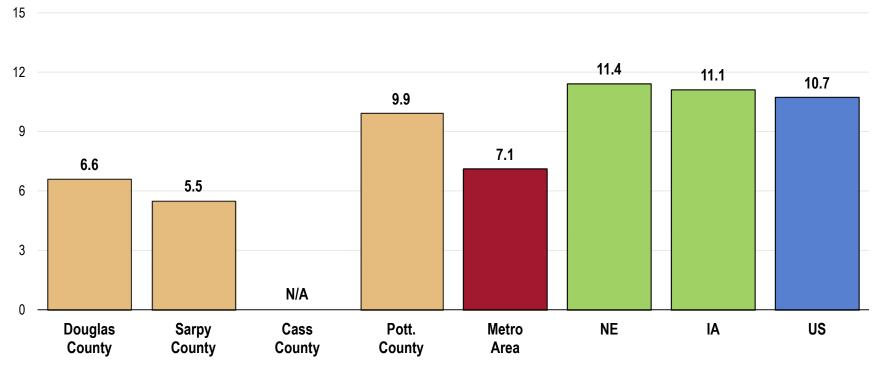
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• Local, state and national data are simple three-year averages.



### Motor Vehicle Crashes: Age-Adjusted Mortality

(2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 12.4 or Lower



 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-13.1]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

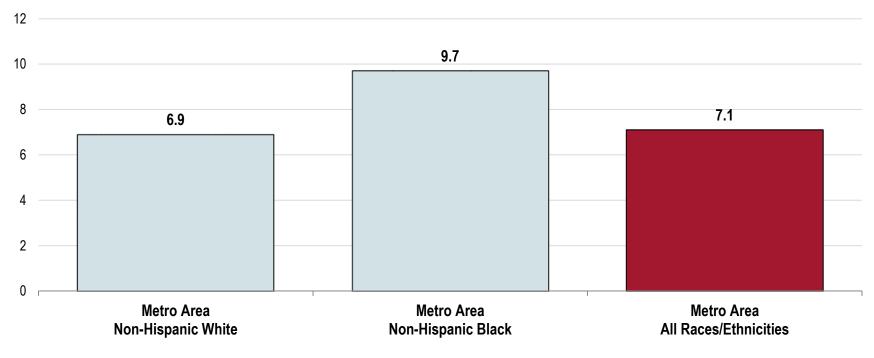
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



### Motor Vehicle Crashes: Age-Adjusted Mortality by Race

(2011-2013 Annual Average Deaths per 100,000 Population)

Healthy People 2020 Target = 12.4 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-13.1]

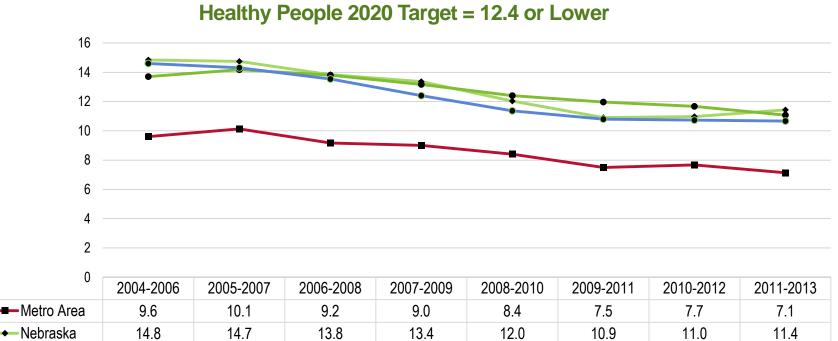
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



### Motor Vehicle Crashes: Age-Adjusted Mortality Trends

(Annual Average Deaths per 100,000 Population)



	14.8	14.7	13.8	13.4	12.0	10.9	11.0	11.4
<b>—</b> Iowa	13.7	14.2	13.8	13.2	12.4	12.0	11.7	11.1
	14.6	14.3	13.5	12.4	11.4	10.8	10.7	10.7

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-13.1]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

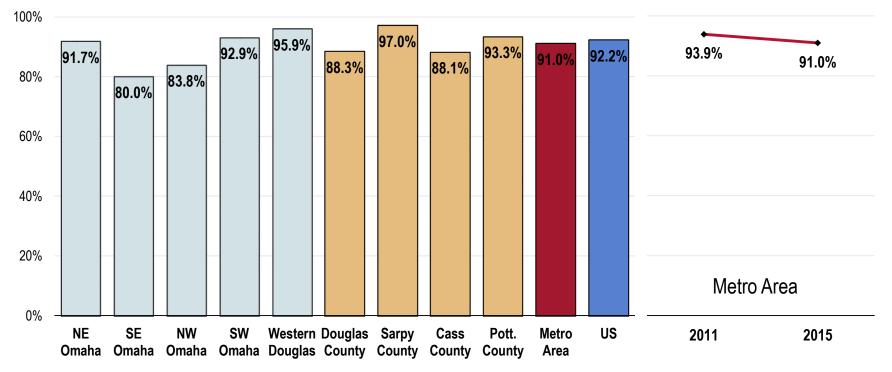
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• Local, state and national data are simple three-year averages.



### Child "Always" Wears a Seat Belt or Appropriate Restraint When Riding in a Vehicle

(Among Parents of Children Age 0-17)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 122]

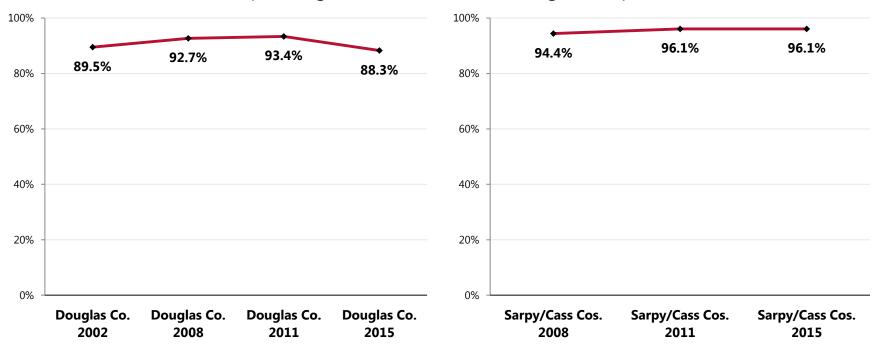
• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents with children 0 to 17 in the household.



### Child "Always" Wears a Seat Belt or Appropriate Restraint When Riding in a Vehicle

(Among Parents of Children Age 0-17)



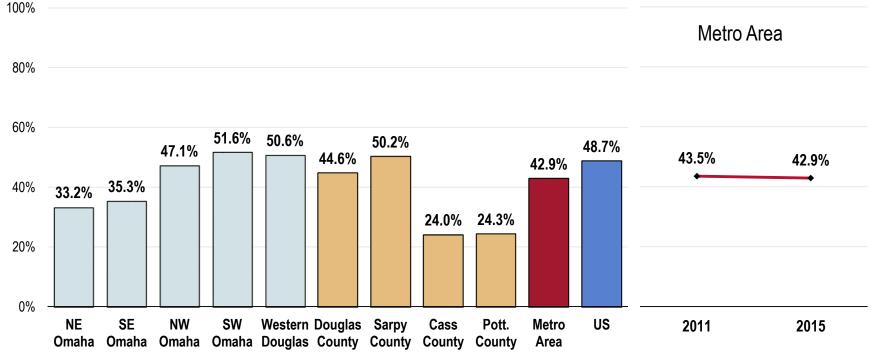
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 122]

Notes: • Asked of all respondents with children 0 to 17 in the household.



### Child "Always" Wears a Helmet When Riding a Bicycle

(Among Parents of Children Age 5-17)



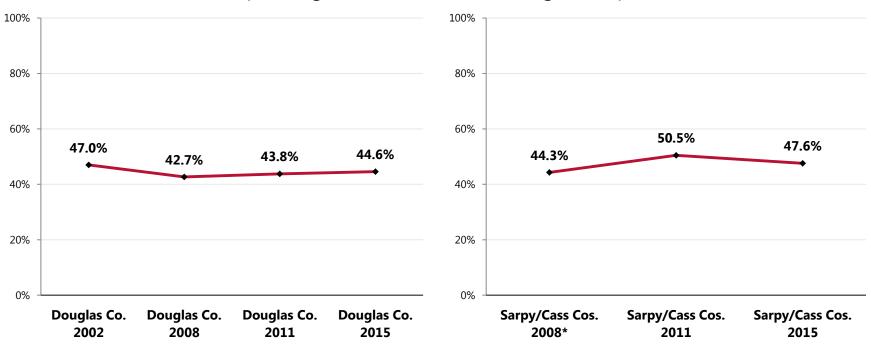
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 121]

Notes: • Asked of all respondents with children age 5 to 17 at home.



### Child "Always" Wears a Helmet When Riding a Bicycle

(Among Parents of Children Age 5-17)



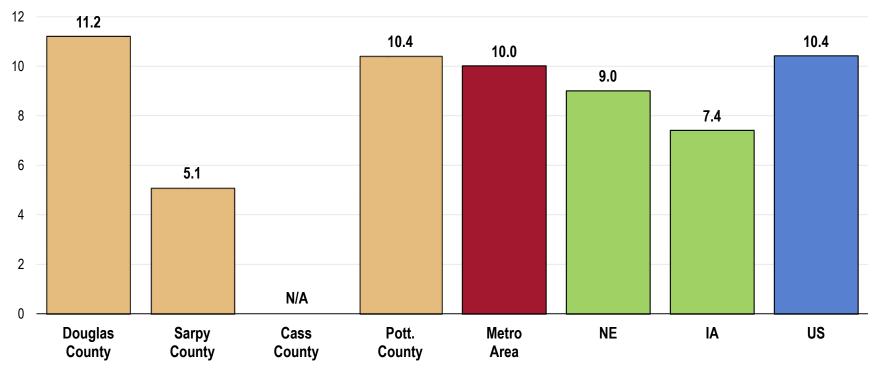
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 121]

Notes: • Asked of all respondents with children age 5 to 17 at home.



### Firearms-Related Deaths: Age-Adjusted Mortality

(2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 9.3 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-30]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

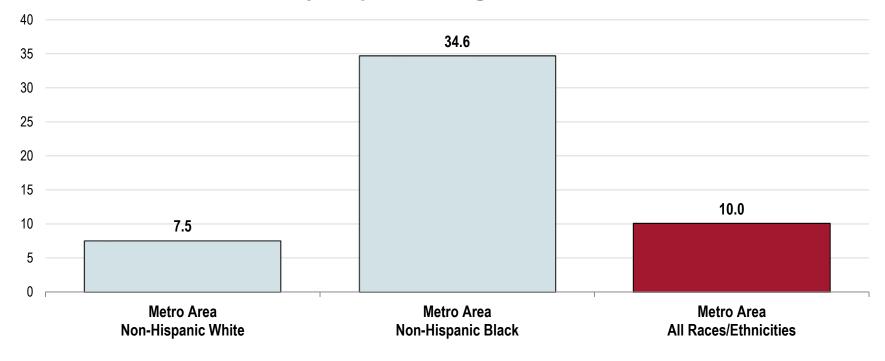
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



### Firearms-Related Deaths: Age-Adjusted Mortality by Race

(2011-2013 Annual Average Deaths per 100,000 Population)

Healthy People 2020 Target = 9.3 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-30]

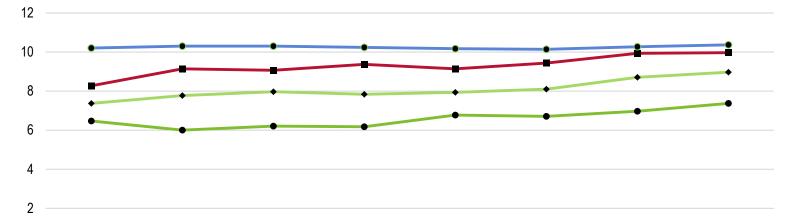
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



### Firearms-Related Deaths: Age-Adjusted Mortality Trends

(Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 9.3 or Lower



0	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
Metro Area	8.3	9.1	9.1	9.4	9.1	9.4	9.9	10.0
Nebraska	7.4	7.8	8.0	7.8	7.9	8.1	8.7	9.0
—● Iowa	6.5	6.0	6.2	6.2	6.8	6.7	7.0	7.4
United States	10.2	10.3	10.3	10.2	10.2	10.1	10.3	10.4

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-30]

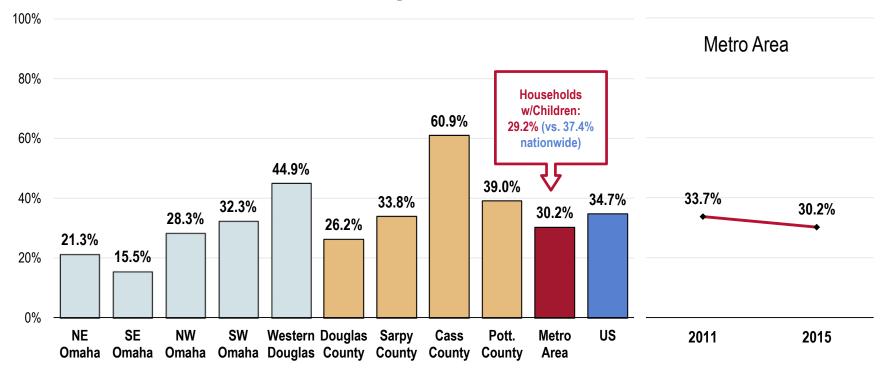
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• Local, state and national data are simple three-year averages.



### Have a Firearm Kept in or Around the Home



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Items 52, 137]

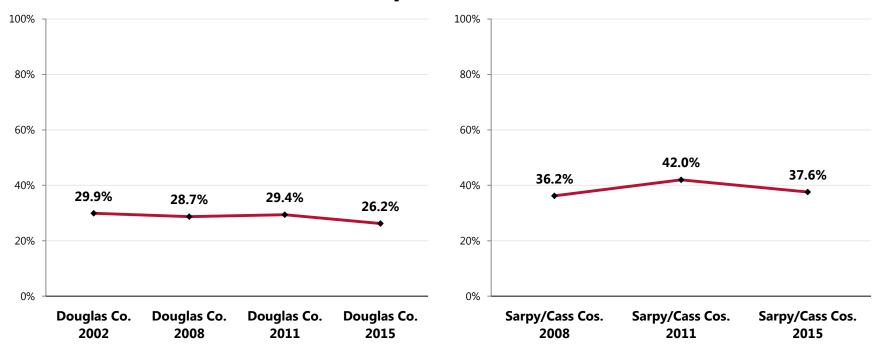
• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: 
 Asked of all respondents.

• In this case, firearms include pistols, shotguns, rifles, and other types of guns; this does not include starter pistols, BB guns, or guns that cannot fire.



#### Have a Firearm Kept in or Around the Home



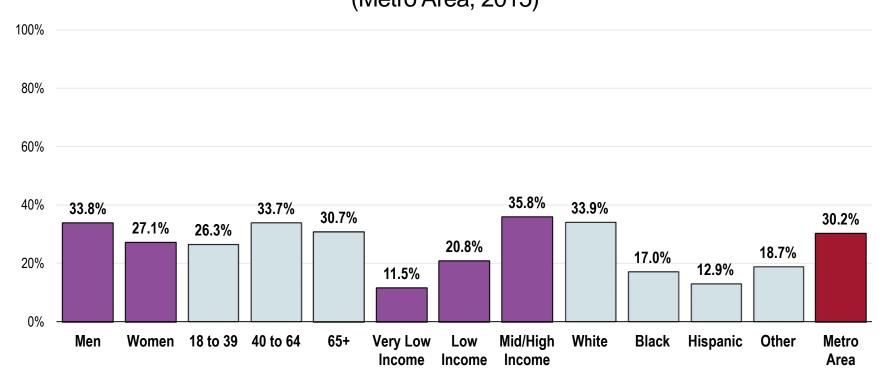
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Items 52, 137]

Notes: • Asked of all respondents.

• In this case, firearms include pistols, shotguns, rifles, and other types of guns; this does not include starter pistols, BB guns, or guns that cannot fire.



#### Have a Firearm Kept in or Around the House (Metro Area, 2015)

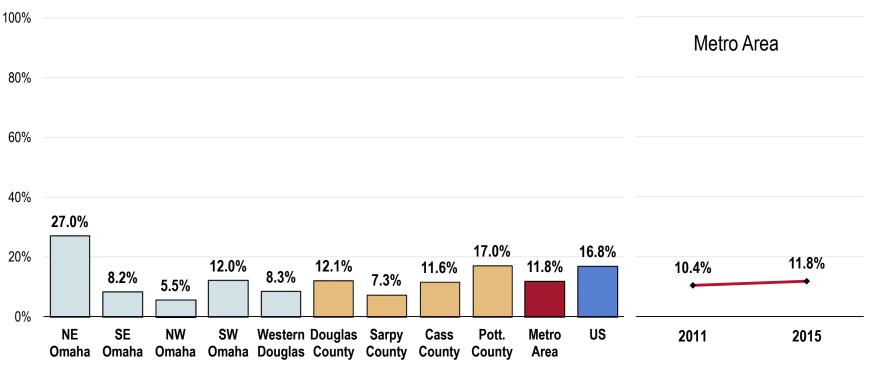


- Sources: 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 52]
- Notes: Asked of all respondents.
  - In this case, firearms include pistols, shotguns, rifles, and other types of guns; this does not include starter pistols, BB guns, or guns that cannot fire.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
  - Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



### Household Has An Unlocked, Loaded Firearm

(Among Respondents Reporting a Firearm in or Around the Home)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 138]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

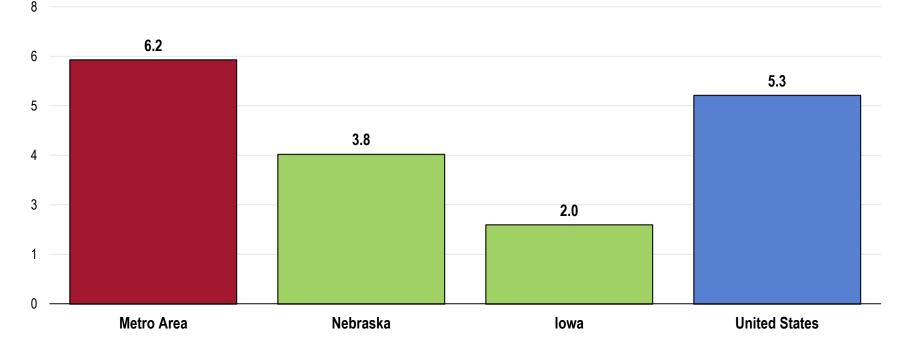
Notes: • Asked of all respondents with a firearm in or around the home.

• In this case, firearms include pistols, shotguns, rifles, and other types of guns; this does not include starter pistols, BB guns, or guns that cannot fire.



### Homicide: Age-Adjusted Mortality

#### (2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 5.5 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-29]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

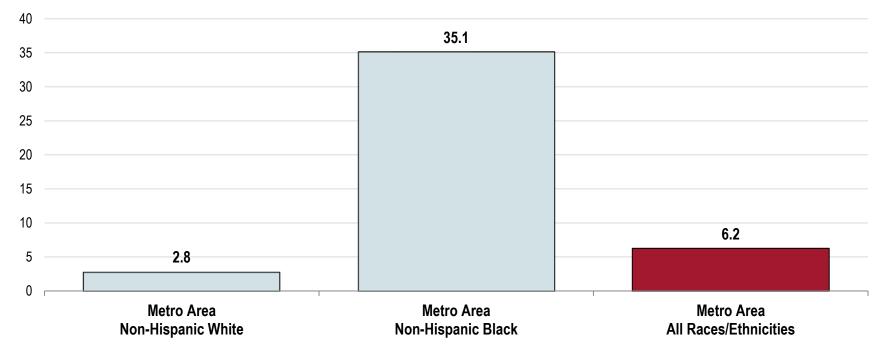
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



### Homicide: Age-Adjusted Mortality by Race

(2011-2013 Annual Average Deaths per 100,000 Population)

Healthy People 2020 Target = 5.5 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-29]

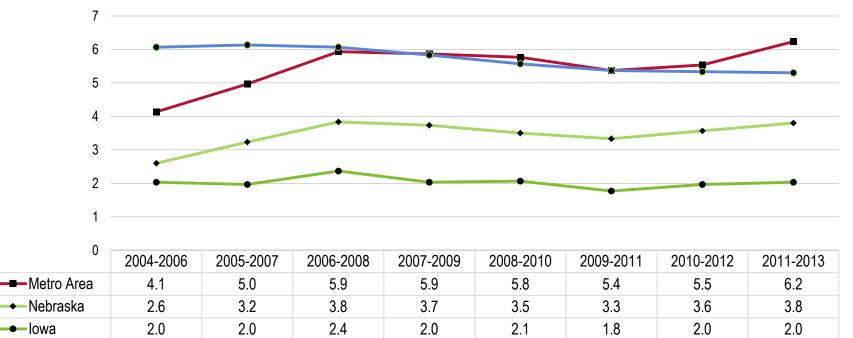
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



### Homicide: Age-Adjusted Mortality Trends

(Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 5.5 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

5.8

5.6

5.4

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective IVP-29]

6.1

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

6.1

• Local, state and national data are simple three-year averages.

6.1

5.3

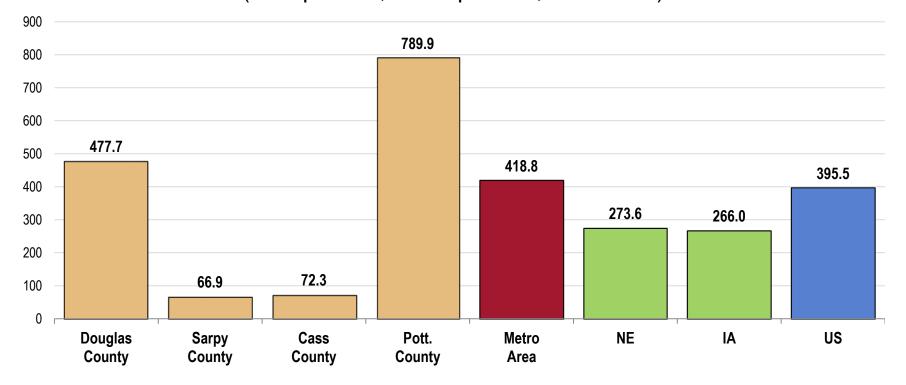
5.3

Notes:

United States



#### Violent Crime (Rate per 100,000 Population, 2010-2012)



- Sources: Federal Bureau of Investigation, FBI Uniform Crime Reports: 2010-2012.
  - This indicator reports the rate of violent crime offenses reported by the sheriff's office or county police department per 100,000 residents. Violent crime includes homicide, rape, robbery, and aggravated assault. This indicator is relevant because it assesses community safety.
    - Participation by law enforcement agencies in the UCR program is voluntary. Sub-state data do not necessarily represent an exhaustive list of crimes due to gaps in reporting. Also, some institutions of higher education have their own police departments, which handle offenses occurring within campus grounds; these offenses are not included in the violent crime statistics, but can be obtained from the Uniform Crime Reports Universities and Colleges data tables.



### Victim of a Violent Crime in the Past Five Years

100%											Metro A	Area
80%												
60%												
40%												
20% 0%	9.2% 5.9%	3.6%	3.1%	0.2%	4.9%	0.7%	0.8%	1.7%	3.6%	2.8%	<b>2</b> .5% ◆	3.6%
070	NE SE Omaha Omał	NW a Omaha	SW Omaha	Western Douglas	Douglas County		Cass County	Pott. County	Metro Area	US	2011	2015

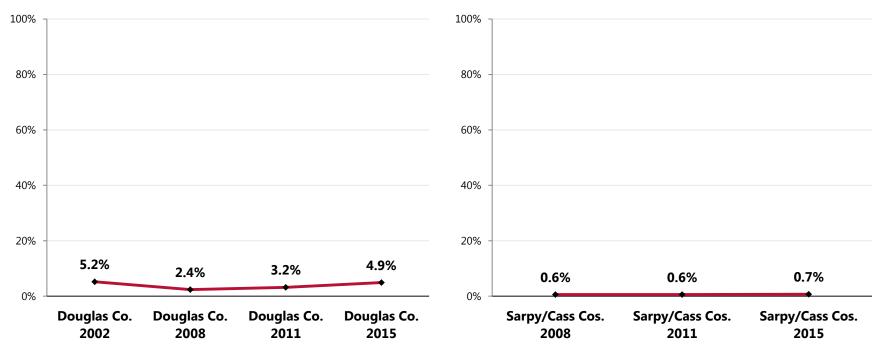
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 50]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.



#### Victim of a Violent Crime in the Past Five Years

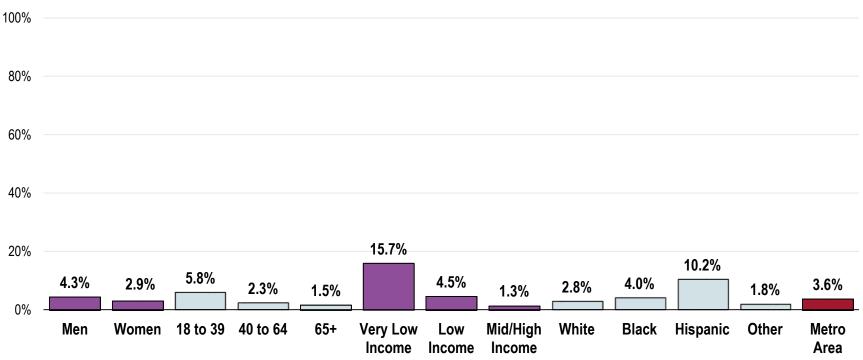


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 50] Notes: • Asked of all respondents.



## Victim of a Violent Crime in the Past Five Years

(Metro Area, 2015)

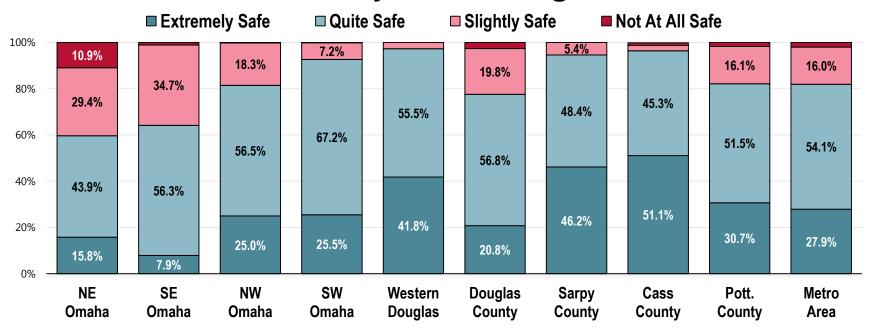


Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 50]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



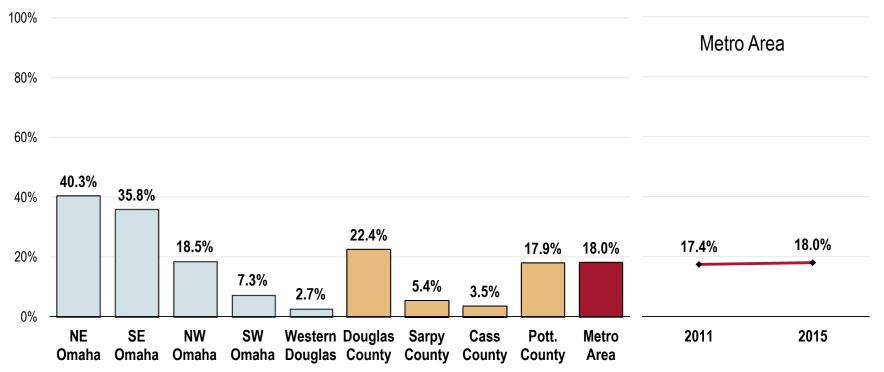


#### **Perceived Safety of Own Neighborhood**

Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 332] Notes: • Asked of all respondents.



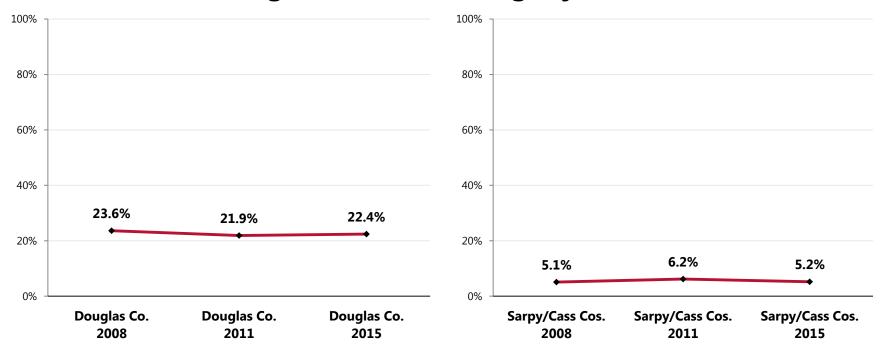
### Perceive Own Neighborhood as "Slightly" or "Not At All" Safe



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 332] Notes: • Asked of all respondents.



### Perceive Own Neighborhood as "Slightly" or "Not At All" Safe



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 332] Notes: • Asked of all respondents.



### Have Ever Been Hit, Slapped, Pushed, Kicked, or Hurt in Any Way by an Intimate Partner

100%												Metro Ar	rea
80%													
60%													
40%													
20% 0%	16.9%	12.8%	11.7%	9.3%	3.2%	11.9%	8.1%	11.0%	15.6%	11.6%	15.0%	12.0%	11.6%
U /0	NE Omaha	SE Omaha	NW Omaha	SW Omaha	Western Douglas			Cass County	Pott. County	Metro Area	US	2011	2015

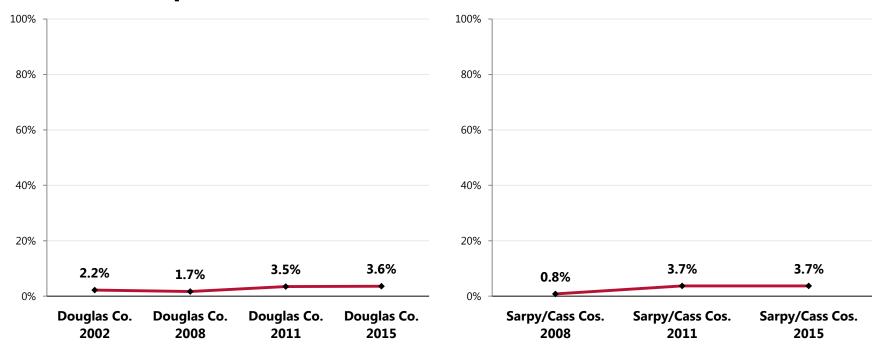
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 51]

2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.



#### Have Experienced Domestic Violence in the Past 5 Years

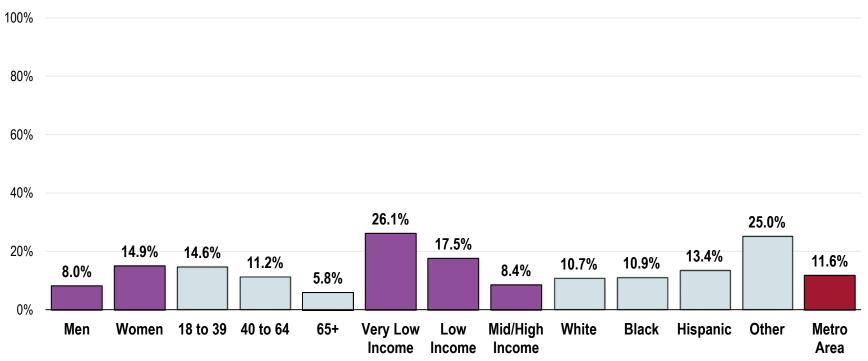


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 312] Notes: • Asked of all respondents.



### Have Ever Been Hit, Slapped, Pushed, Kicked, or Hurt in Any Way by an Intimate Partner

(Metro Area, 2015)



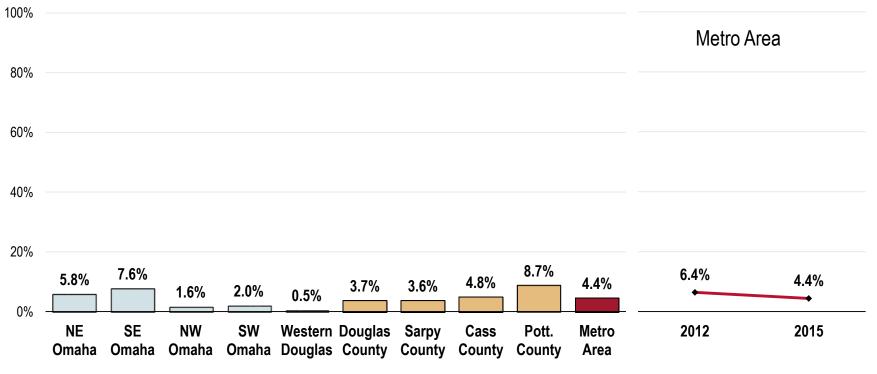
Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 51]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



### An Intimate Partner Has Been Controlling, Degrading, Harassing, or Disruptively Jealous in the Past 5 Years



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 313] Notes: • Asked of all respondents.



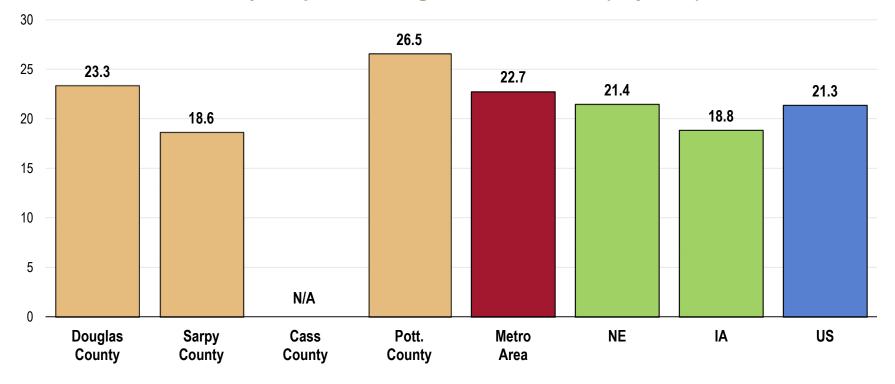
## **Diabetes**





### **Diabetes: Age-Adjusted Mortality**

#### (2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 20.5 or Lower (Adjusted)



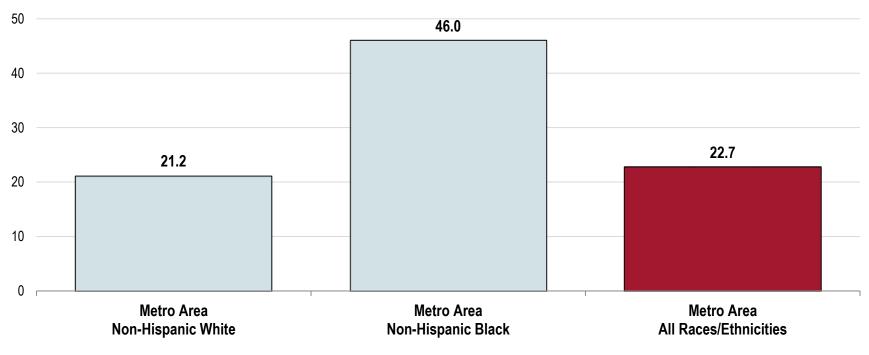
- Sources: CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.
  - US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective D-3]
  - Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
    - Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
    - The Healthy People 2020 target for Diabetes is adjusted to account for only diabetes mellitus coded deaths.



#### **Diabetes: Age-Adjusted Mortality by Race**

(2011-2013 Annual Average Deaths per 100,000 Population)

Healthy People 2020 Target = 20.5 or Lower (Adjusted)



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

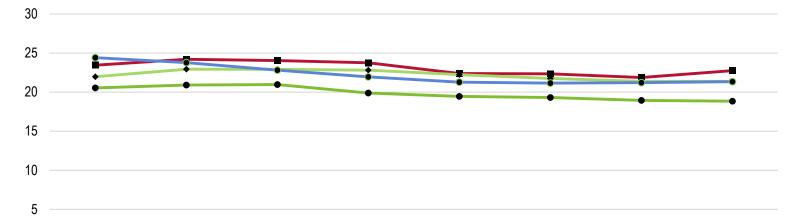
• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective D-3]

- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
- The Healthy People 2020 target for Diabetes is adjusted to account for only diabetes mellitus coded deaths.



#### **Diabetes: Age-Adjusted Mortality Trends**

(Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 20.5 or Lower (Adjusted)



0	2004-2006	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013
Metro Area	23.4	24.2	24.0	23.7	22.4	22.3	21.9	22.7
Nebraska	22.0	22.9	22.9	22.8	22.2	21.7	21.4	21.4
<b>—</b> ● lowa	20.5	20.9	21.0	19.9	19.4	19.3	18.9	18.8
United States	24.4	23.8	22.8	21.9	21.3	21.1	21.2	21.3

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective D-3]

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

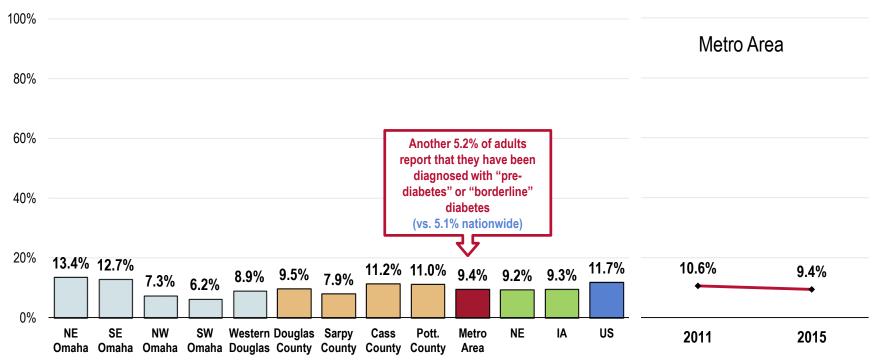
• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

• Local, state and national data are simple three-year averages.

The Healthy People 2020 target for Diabetes is adjusted to account for only diabetes mellitus coded deaths.



#### **Prevalence of Diabetes**

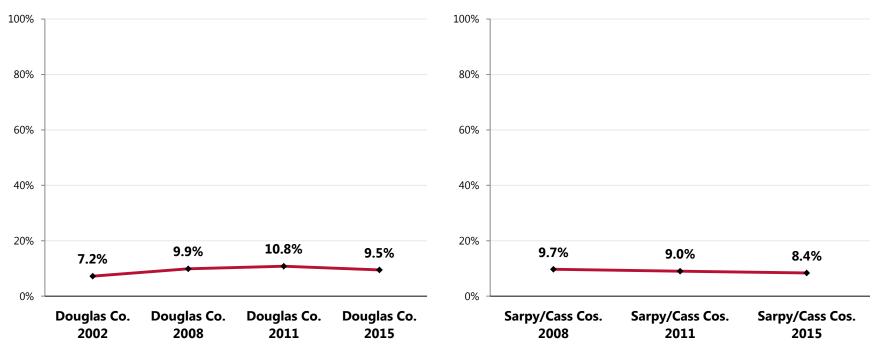


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 136]

- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.
- Notes: Asked of all respondents.
  - Local and national data exclude gestation diabetes (occurring only during pregnancy).



#### **Prevalence of Diabetes**

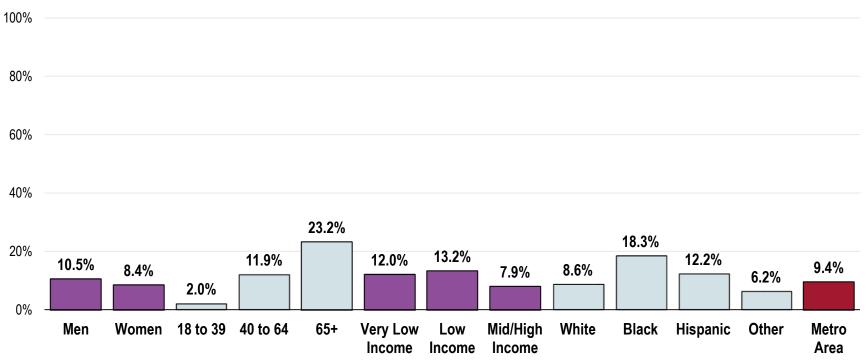


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 136] Notes: • Asked of all respondents.



#### **Prevalence of Diabetes**

(Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 136]

Notes: • Asked of all respondents.

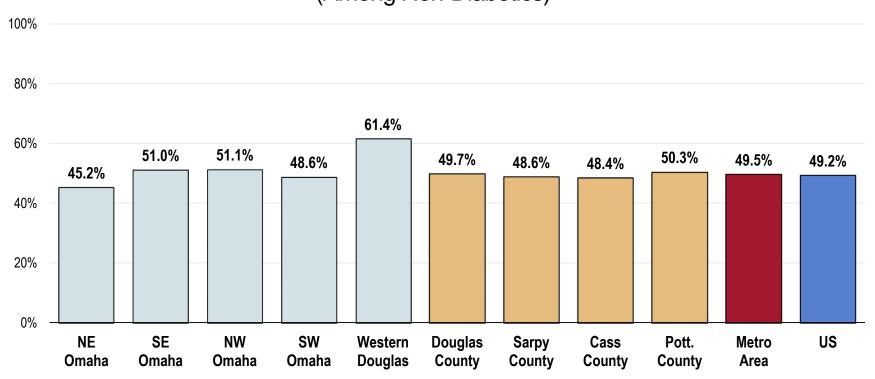
• Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.

• Excludes gestation diabetes (occurring only during pregnancy).



#### Have Had Blood Sugar Tested in the Past Three Years (Among Non-Diabetics)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 40]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

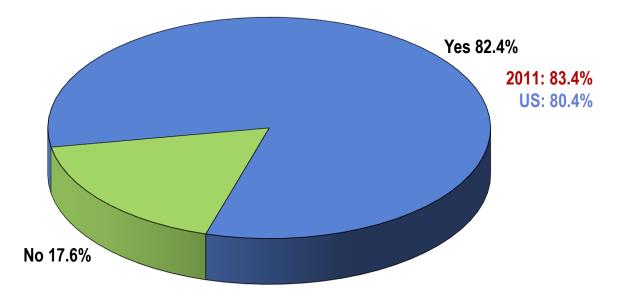
Notes: 

 Asked of respondents who have not been diagnosed with diabetes.



#### **Taking Insulin or Other Medication for Diabetes**





- Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 311]
  - 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- Notes: Asked of all diabetic respondents.



#### Perceptions of Diabetes as a Problem in the Community

(Key Informants, 2015)

Major Problem	jor Problem   Moderate Problem		No Proble	Problem At All	
	63.0%		18.0%	6.0%	5.0%

Sources: • PRC Key Informant Focus Groups, August 2015.

PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

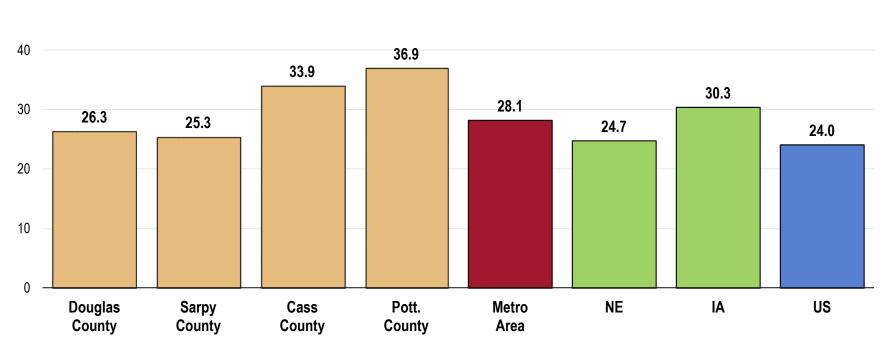
## **Alzheimer's Disease**





#### Alzheimer's Disease: Age-Adjusted Mortality

(2011-2013 Annual Average Deaths per 100,000 Population)



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

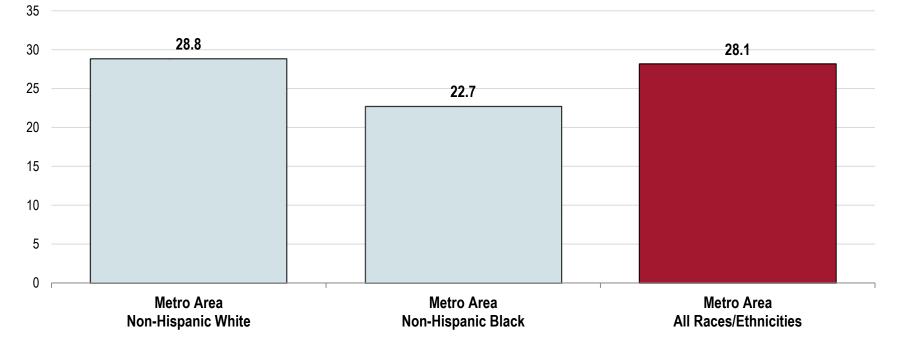
Notes:

50



## Alzheimer's Disease: Age-Adjusted Mortality by Race

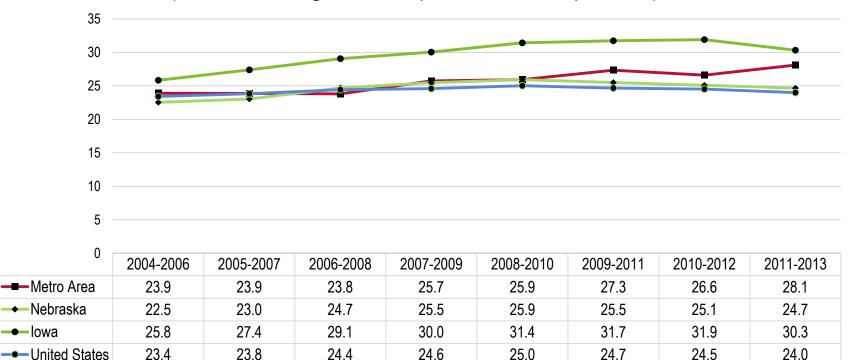
(2011-2013 Annual Average Deaths per 100,000 Population)



- CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
  - Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### **Alzheimer's Disease: Age-Adjusted Mortality Trends**



(Annual Average Deaths per 100,000 Population)

 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### Perceptions of Dementia/Alzheimer's Disease as a Problem in the Community

(Key Informants, 2015)

Major Problem	Moderate Problem	Minor Problem	No Problem At A	All
23.5%	42.	9%	17.3%	5.1%

Sources: • PRC Key Informant Focus Groups, August 2015.

PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

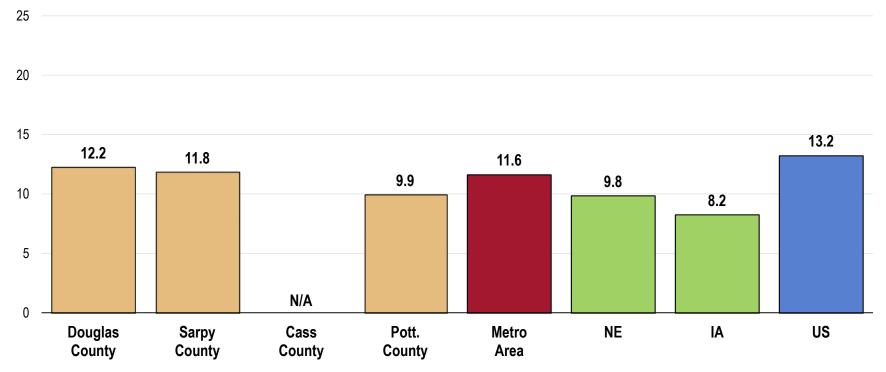
# **Kidney Disease**





#### Kidney Disease: Age-Adjusted Mortality

(2011-2013 Annual Average Deaths per 100,000 Population)



<sup>•</sup> CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

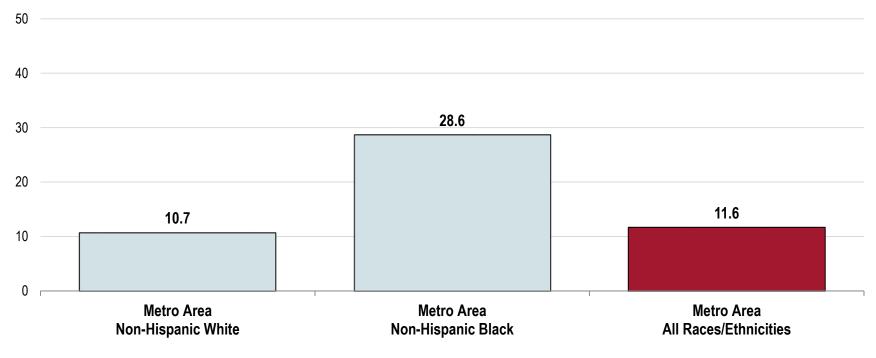
Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



### Kidney Disease: Age-Adjusted Mortality by Race

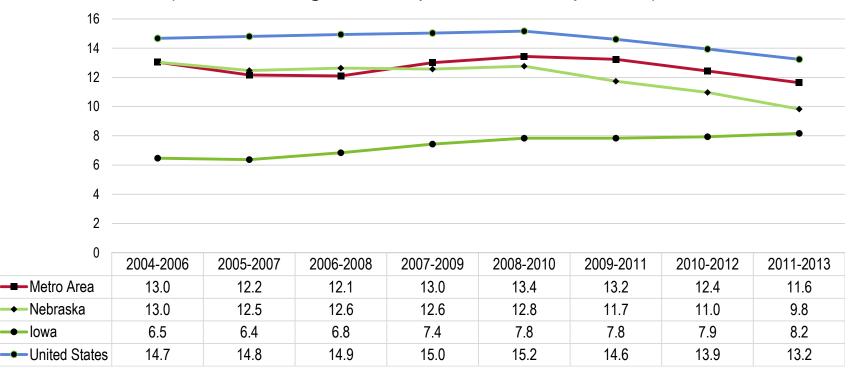
(2011-2013 Annual Average Deaths per 100,000 Population)



- Sources: CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
  - Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### Kidney Disease: Age-Adjusted Mortality Trends



(Annual Average Deaths per 100,000 Population)

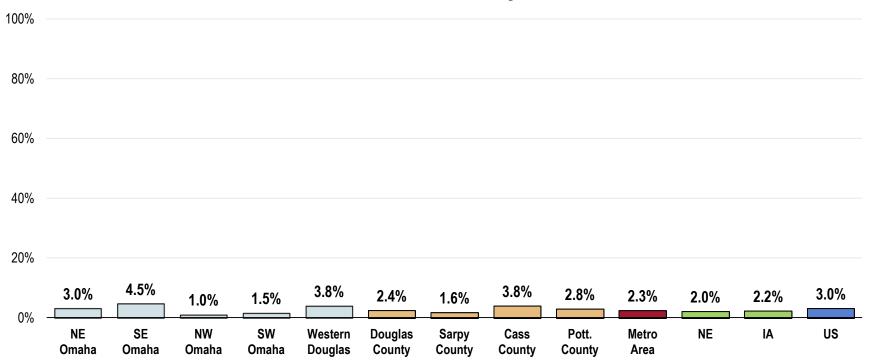
 CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
- State and national data are simple three-year averages.



#### **Prevalence of Kidney Disease**



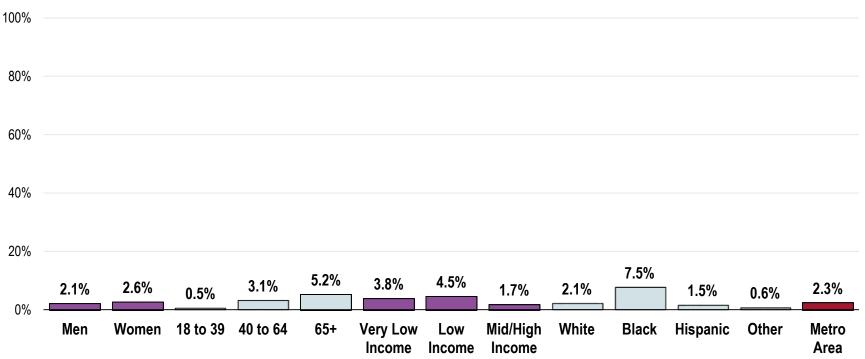
Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 33]

- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Nebraska. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2013 Nebraska and Iowa data.
- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- Notes: Asked of all respondents.



#### **Prevalence of Kidney Disease**

(Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 33]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



#### Perceptions of Chronic Kidney Disease as a Problem in the Community

(Key Informants, 2015)

Major Problem		Moderate Problem		Problem	No Problem At All	
11.7%		43.6%			28.7%	5.3%

Sources: • PRC Key Informant Focus Groups, August 2015.

PRC Community Health Needs Assessment Douglas, Sarpy, Cass & Pottawattamie Counties

# Potentially Disabling Conditions

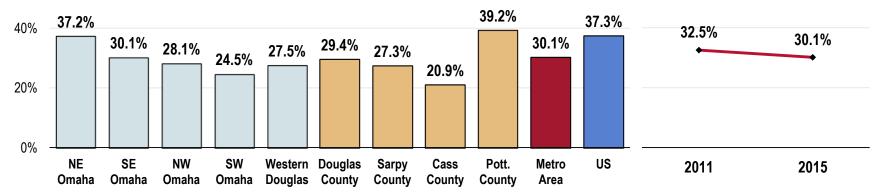




#### **Prevalence of Arthritis/Rheumatism**

#### (Among Adults Age 50 and Older)





Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 139]

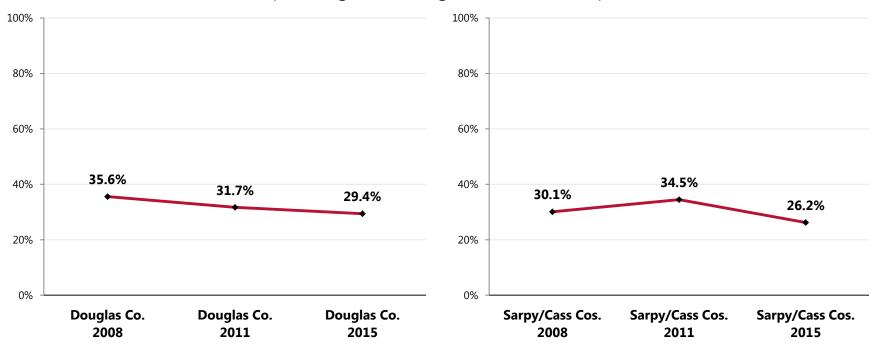
2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Reflects respondents age 50 and older.



#### **Prevalence of Arthritis/Rheumatism**

(Among Adults Age 50 and Older)



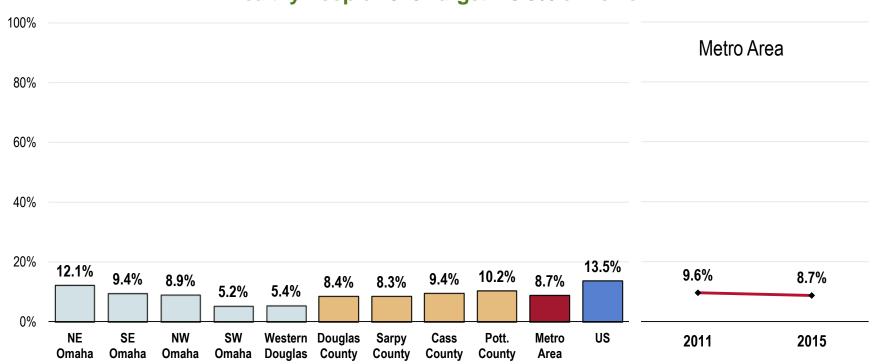
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 139]

Notes: • Reflects respondents age 50 and older.



#### **Prevalence of Osteoporosis**

(Among Adults Age 50 and Older) Healthy People 2020 Target = 5.3% or Lower



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 140]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

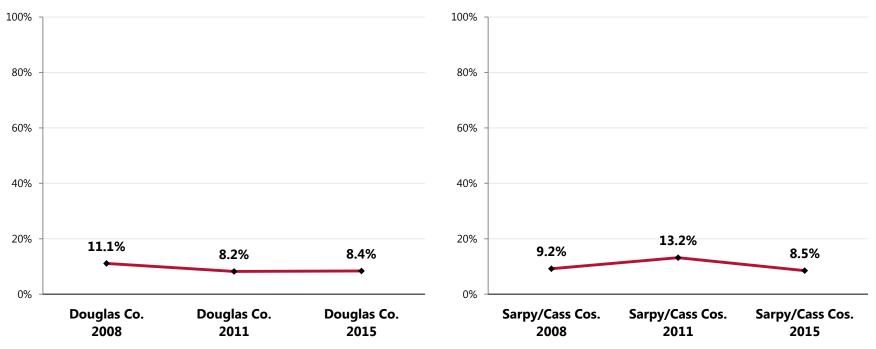
• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective AOCBC-10]

Notes: • Reflects respondents age 50 and older.



#### **Prevalence of Osteoporosis**

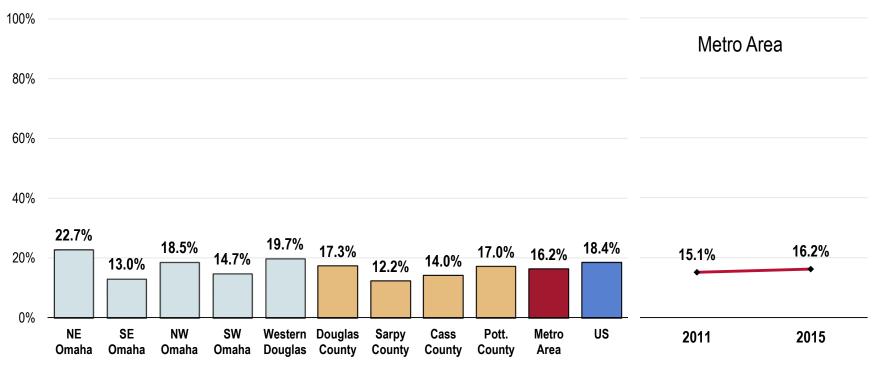
(Among Adults Age 50 and Older)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 140] Notes: • Reflects respondents age 50 and older.



#### **Prevalence of Sciatica/Chronic Back Pain**



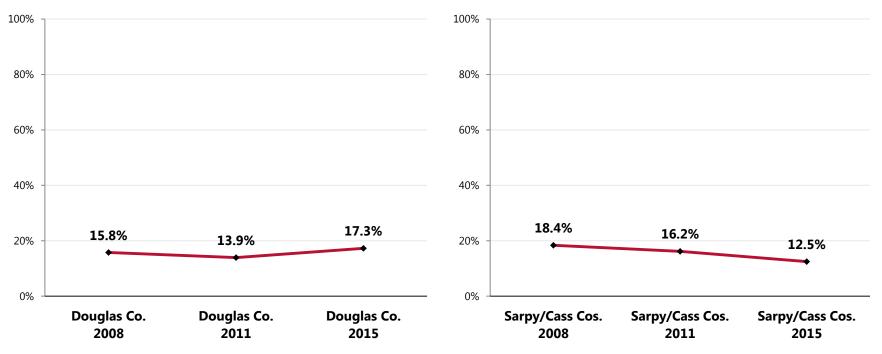
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 29]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.



#### **Prevalence of Sciatica/Chronic Back Pain**



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 29] Notes: • Asked of all respondents.



### Perceptions of Arthritis/Osteoporosis/Back Conditions as a Problem in the Community

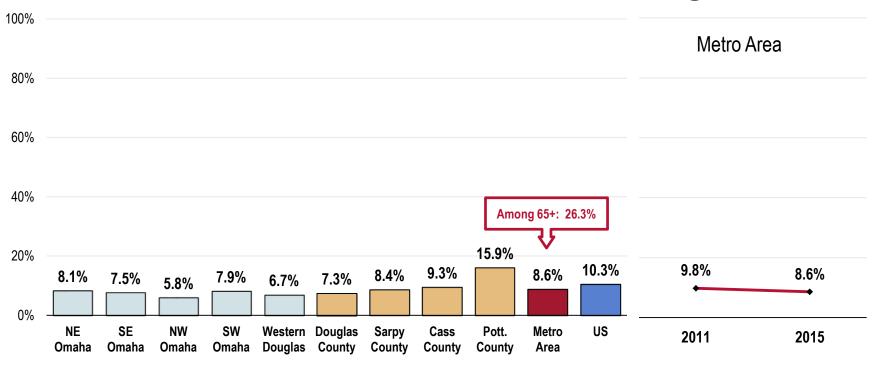
(Key Informants, 2015)

Major Prob	lem  Moderate Problem	Minor Problem	No Problem At All	
15.1%	36.6%	2	9.0%	8.6%

Sources: • PRC Key Informant Focus Groups, August 2015.



#### **Prevalence of Deafness/Trouble Hearing**



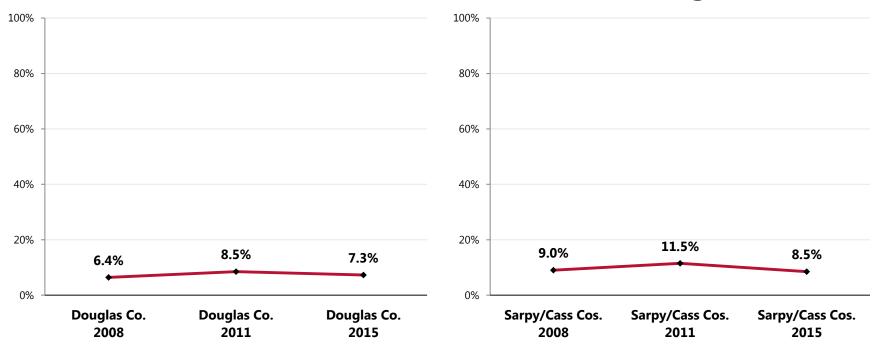
Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 27]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Asked of all respondents.



#### **Prevalence of Deafness/Trouble Hearing**



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 27] Notes: • Asked of all respondents.



#### Perceptions of Hearing and Vision as a Problem in the Community

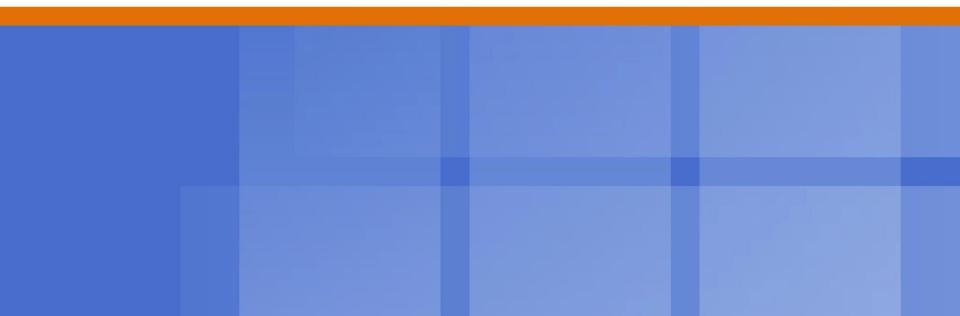
(Key Informants, 2015)

	Major Problem	Moderate Problem	Minor Problem	No Problem /	At All
4.2%	37.9%		37.9%		8.4%

Sources: • PRC Key Informant Focus Groups, August 2015.

## **Infectious Disease**







#### PRC Community Health Needs Assessment

Douglas, Sarpy, Cass & Pottawattamie Counties

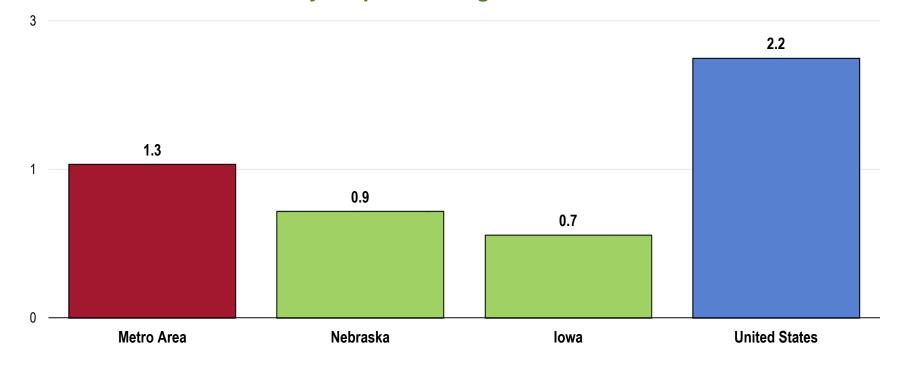
# HIV

**Professional Research Consultants, Inc.** 



#### HIV/AIDS: Age-Adjusted Mortality

#### (2011-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 3.3 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HIV-12]

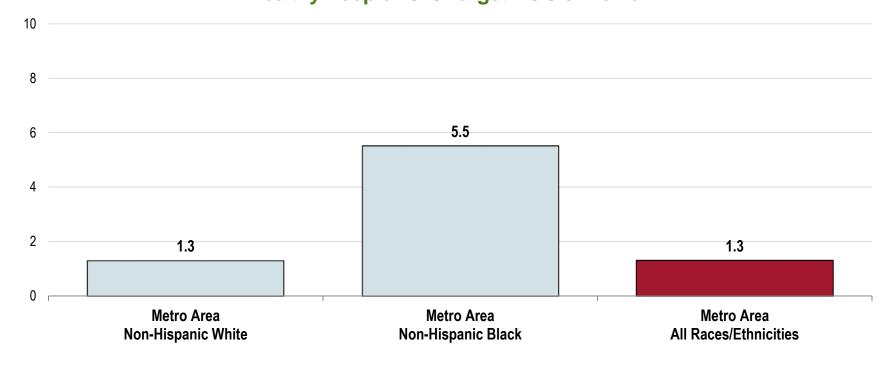
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### HIV/AIDS: Age-Adjusted Mortality by Race

(2004-2013 Annual Average Deaths per 100,000 Population) Healthy People 2020 Target = 3.3 or Lower



Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HIV-12]

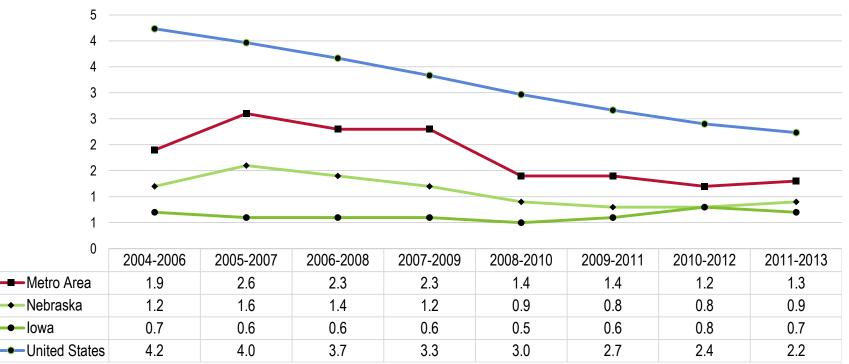
Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

• Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



#### **HIV/AIDS: Age-Adjusted Mortality Trends**





Sources: • CDC WONDER Online Query System. Centers for Disease Control and Prevention, Epidemiology Program Office, Division of Public Health Surveillance and Informatics. Data extracted August 2015.

• US Department of Health and Human Services. Healthy People 2020. December 2010. http://www.healthypeople.gov [Objective HIV-12]

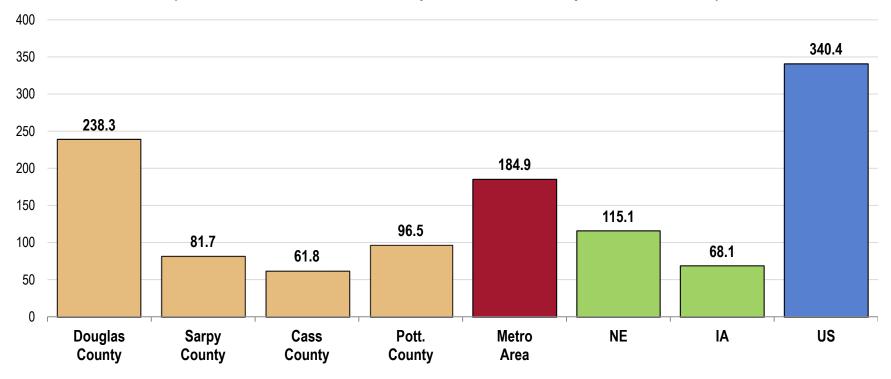
• Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).

- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
- State and national data are simple three-year averages.



# **HIV Prevalence**

#### (Prevalence Rate of HIV per 100,000 Population, 2010)



Sources: • Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention: 2010.

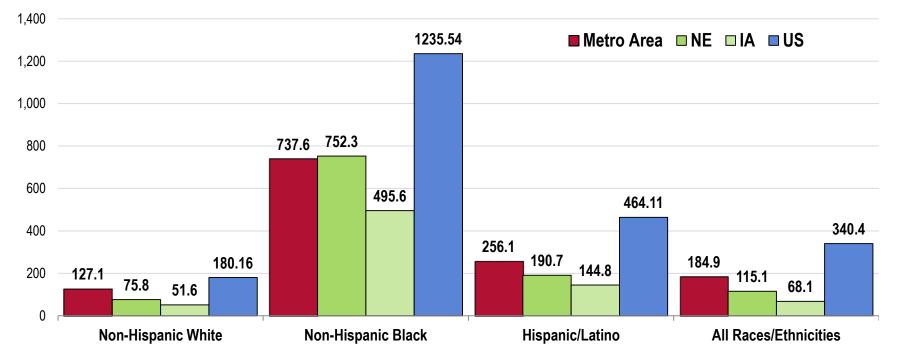
• Retrieved August 2015 from Community Commons at http://www.chna.org.

• This indicator is relevant because HIV is a life-threatening communicable disease that disproportionately affects minority populations and may also indicate the prevalence of unsafe sex practices.



# **HIV Prevalence Rate by Race/Ethnicity**

(Prevalence Rate of HIV per 100,000 Population, 2010)



Sources: 

Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention: 2010.

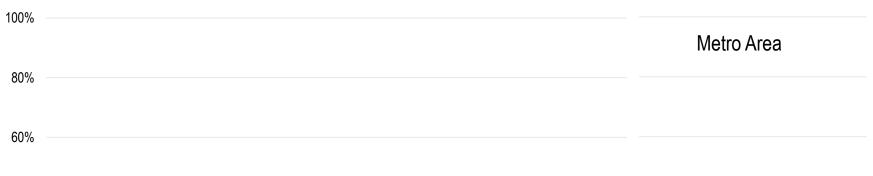
• Retrieved August 2015 from Community Commons at http://www.chna.org.

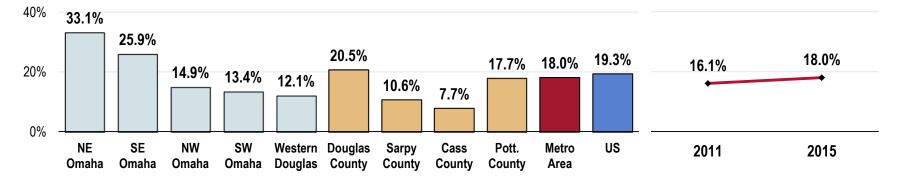
• This indicator is relevant because HIV is a life-threatening communicable disease that disproportionately affects minority populations and may also indicate the prevalence of unsafe sex practices.



# Tested for HIV in the Past Year

#### (Among Adults Age 18-44)





Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 145]

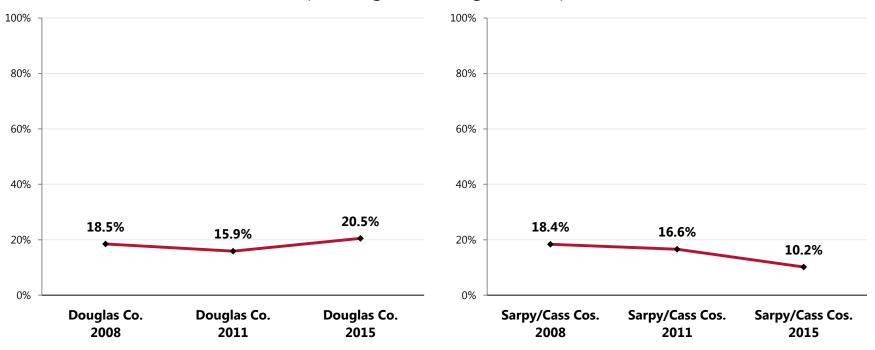
2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: • Reflects respondents age 18 to 44.



# **Tested for HIV in the Past Year**

(Among Adults Age 18-44)

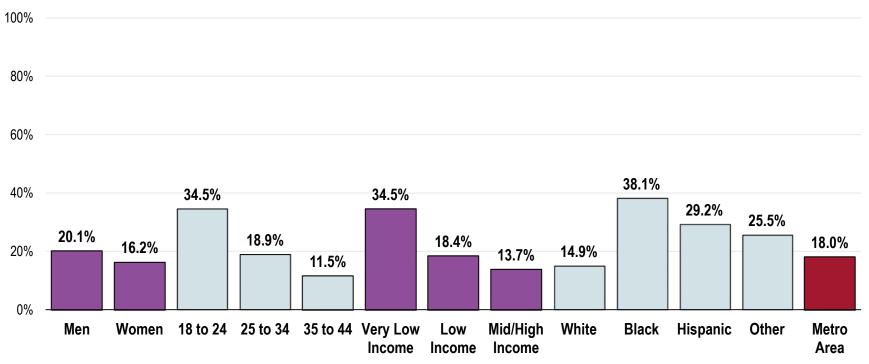


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 145] Notes: • Reflects respondents age 18 to 44.



# Tested for HIV in the Past Year

(Among Adults Age 18-44)



- Sources: 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 145]
- Notes: Reflects respondents age 18 to 44.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
  - Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



# Perceptions of HIV/AIDS as a Problem in the Community

(Key Informants, 2015)

Major Probler	m  Moderate Problem	Minor Problem	linor Problem ■ No Problem At All	
18.8%	29.2%	36.5%		7.3%

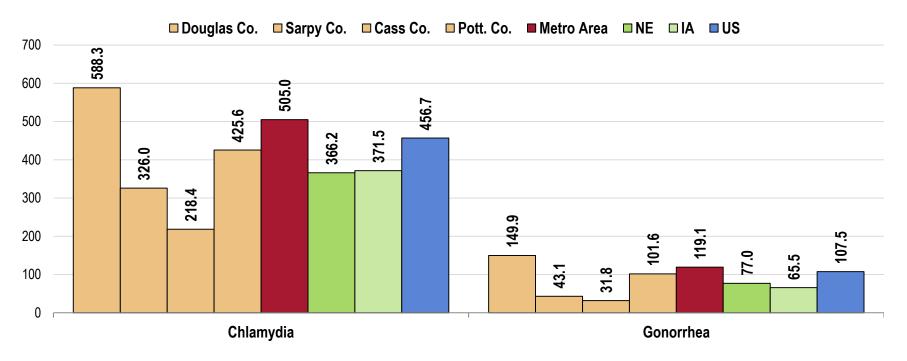
Sources: • PRC Key Informant Focus Groups, August 2015.

# **Sexually Transmitted Diseases**



# Chlamydia & Gonorrhea Incidence

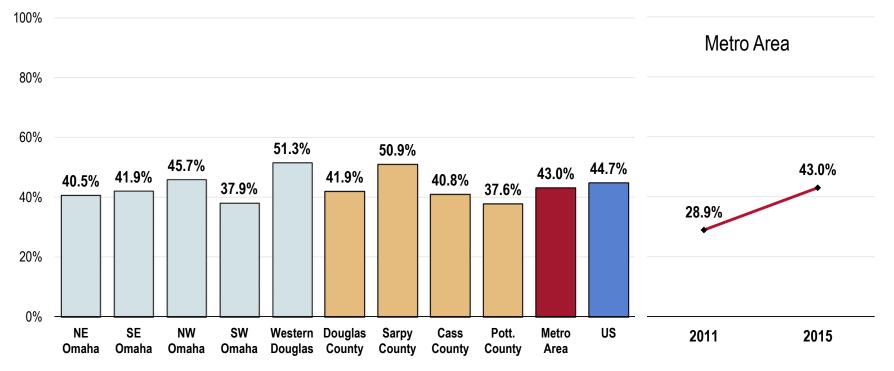
(Incidence Rate per 100,000 Population, 2012)



- Sources: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention: 2012.
  - Retrieved August 2015 from Community Commons at http://www.chna.org.
- This indicator is relevant because it is a measure of poor health status and indicates the prevalence of unsafe sex practices.



# Have Completed the Hepatitis B Vaccination Series

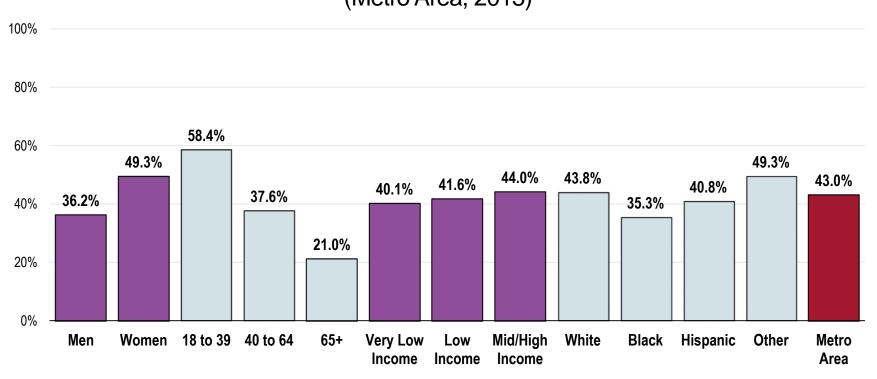


Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 70]

- 2013 PRC National Health Survey, Professional Research Consultants, Inc.
- Notes: Asked of all respondents.
  - Includes a series of three shots, usually administered at least one month between shots.



### Have Completed the Hepatitis B Vaccination Series (Metro Area, 2015)



Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 70]

- Asked of all respondents.
  - Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

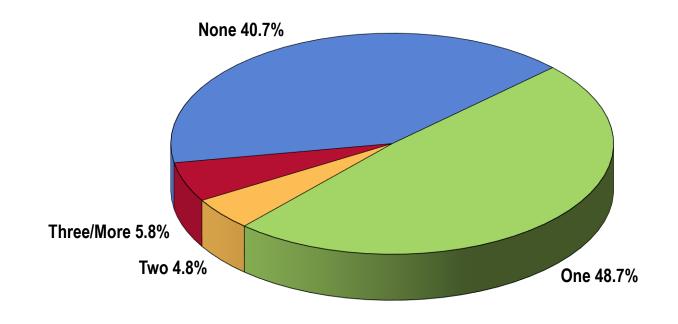
• Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.

Notes:



# **Number of Sexual Partners in Past 12 Months**

(Among Unmarried Adults Age 18-64; Metro Area, 2015)



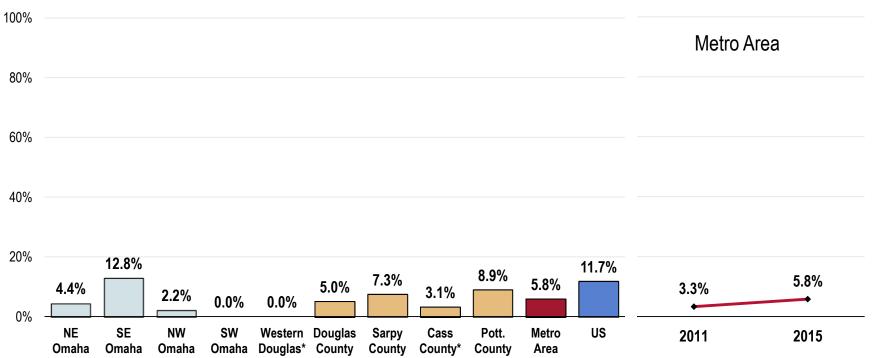
Sources: • 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 86]

• Asked of all unmarried respondents under the age of 65.



# Had Three or More Sexual Partners in the Past Year

#### (Among Unmarried Adults Age 18-64)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 86]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

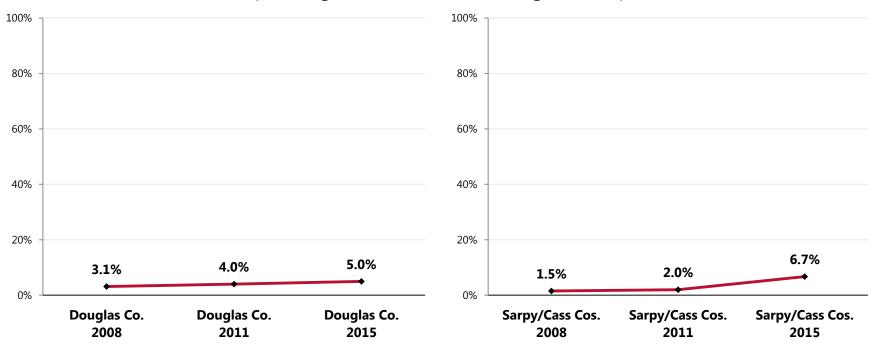
Notes: • Asked of all unmarried respondents under the age of 65.

• \*Use caution when interpreting these percentage results as the sample size falls below 50.



# Had Three or More Sexual Partners in the Past Year

(Among Unmarried Adults Age 18-64)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 86]

Notes: • Asked of all unmarried respondents under the age of 65.



#### Had Three or More Sexual Partners in the Past Year (Among Unmarried Adults Age 18-64; Metro Area, 2015) 100% 80% 60% 40% 20% 13.7% 9.8% 8.5% 5.4% 5.7% 5.8% 4.5% 3.4% 1.8% 1.5% 1.5% 0.0% 0% Men 18 to 39 40 to 64 Very Low White Black Metro Women Low Mid/High Hispanic Other Income Income Income Area

Sources: 

 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 86]

Notes:

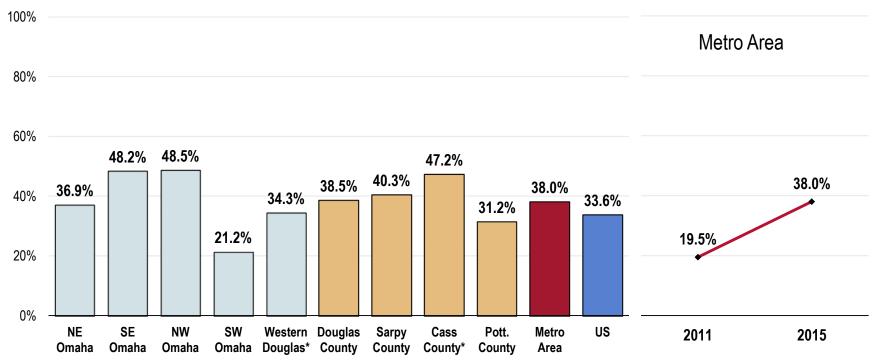
- Asked of all unmarried respondents under the age of 65.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



# **Condom Was Used During Last Sexual Intercourse**

#### (Among Unmarried Adults Age 18-64)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 87]

• 2013 PRC National Health Survey, Professional Research Consultants, Inc.

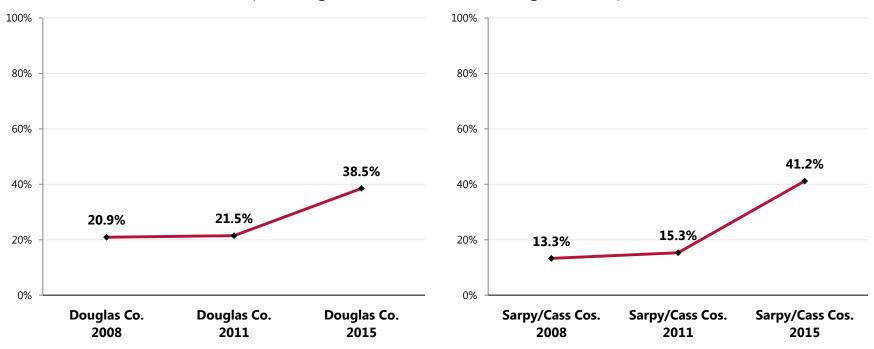
Notes: • Asked of all unmarried respondents under the age of 65.

• \*Use caution when interpreting these percentage results as the sample size falls below 50.



# **Condom Was Used During Last Sexual Intercourse**

(Among Unmarried Adults Age 18-64)



Sources: • PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 87]

Notes: • Asked of all unmarried respondents under the age of 65.



# **Condom Was Used During Last Sexual Intercourse**

100% 80% 60% 51.5% 49.9% 47.9% 43.5% 43.0% 38.6% 38.0% 37.4% 40% 34.3% 31.9% 23.1% 21.5% 20% 0% 18 to 39 40 to 64 Very Low Men Women Low Mid/High White Black Hispanic Other Metro Income Area Income Income

(Among Unmarried Adults Age 18-64; Metro Area, 2015)

Sources: 

 2015 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 87]

Notes:

- Asked of all unmarried respondents under the age of 65.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).

Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households living with defined poverty status; "Low Income" includes households with incomes just above the FPL, earning up to twice the poverty threshold; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.



# Perceptions of Sexually Transmitted Diseases as a Problem in the Community

(Key Informants, 2015)

Major Problem	Moderate Problem	Minor Problem	No Problem At All
27.1%	35.4%	%	28.1%

Sources: • PRC Key Informant Focus Groups, August 2015.



# Perceptions of Immunization and Infectious Diseases as a Problem in the Community

(Key Informants, 2015)

Major Problen	n 🗖 Moderate Problem	Minor Problem	roblem 🛛 🗖 No Problem At All	
18.0%	33.0%	3	5.0%	6.0%

Sources: • PRC Key Informant Focus Groups, August 2015.