

## OHC Region Secondary Data Findings

### Social Determinants of Health

The Ozarks Health Commission (OHC) Region tends to have lower income and higher rates of poverty compared to the nation.

- *Families Earning Over \$75,000*: 29.29% (US: 45.19%); ranges from Springfield: 34.52% to Mountain View: 22.27%
- *Per Capita Income*: \$22,111 (US: \$29,829); ranges from Springfield: \$24,323 to Monett: \$20,280
- *Poverty – Population Below 100% FPL*: 18.09% (US: 15.11%); ranges from Branson: 16.75% to Monett: 20.17%
- *Poverty – Population Below 200% FPL*: 42.75% (US: 33.61%); ranges from Springfield: 39.09% to Monett: 48.00%
- *Children Eligible for Free/Reduced Price Lunch*: 55.23% (US: 52.61%); ranges from Springfield: 45.40% to Mountain View: 62.44%

### Education

The OHC Region tends to have a lower percentage than the nation of the population with an associate degree or higher; however, the proportion of the population with a High School Diploma is slightly higher.

- *Percent Population Age 25 with Associate Degree or Higher*: 28.35% (US: 38.49%); ranges from Springfield: 35.29% to Monett: 20.90%
- *Percent Population Age 25 and Older without a High School Diploma*: 12.83% (US: 13.02%); ranges from Springfield: 9.30% to Monett: 16.92%

### Nutrition, Physical Activity, and Obesity

The OHC Region tends to have more residents reporting inadequate fruit/vegetable consumption, inadequate physical activity, and a higher proportion of obese adults than the nation. The OHC Region does have a slightly lower proportion of residents in the overweight category.

- *Inadequate Fruit/Vegetable Consumption*: 81.10% (US: 75.70%); ranges from Joplin: 79.50% to Lebanon: 84.00%
- *Inadequate Physical Activity*: 26.00% (US: 21.80%); ranges from Springfield: 22.90% to Mountain View: 28.90%
- *Obese Adults*: 32.20% (US: 27.50%); ranges from Lebanon: 30.10% to Joplin 33.60%
- *Overweight*: 35.20% (US: 35.80%); ranges from Springfield: 32.60% to Branson: 38.10%



## Access to Care

In general, the OHC Region has less access to care in the three key areas of primary care, dental care, and mental health. This lack of access is driven by the level of uninsured individuals as well as shortages of providers in these key areas.

- *Uninsured Adults*: 16.84% (US: 13.21%); ranges from Springfield: 15.22% to Monett: 19.72%
- *Access to Primary Care [/100,000]*: 67.8 (US: 87.8); ranges from Springfield: 86.9 to Lebanon: 51.2
- *Access to Dentists [/100,000]*: 45.6 (US: 65.6); ranges from Springfield: 57.5 to Branson: 31.9
- *Population Living in a Health Professional Shortage Area*: 97.44% (US: 33.13%); ranges from Branson: 78.28% to 100% in all other communities
- *Access to Mental Health Providers [/100,000]*: 177.9 (US:202.8); ranges from Springfield: 247.4 to Branson: 65.2
- *Lack of a Consistent Source of Primary Care*: 23.50% (US: 22.07%); ranges from Monett: 11.80% to Branson: 27.60%

## Clinical Preventative Services

In most indicators, the OHC Region has lower clinical preventive screenings and services compared to the nation; however, in diabetic screening hemoglobin A1c testing, the OHC Region is slightly better than the nation.

- *Cancer Screening-Mammogram*: 60.60% (US:63.10%); ranges from Springfield: 65.70% to Joplin: 57.20%
- *Cervical Screening*: 69.90% (US: 78.50%); ranges from Mountain View: 75.20% to Joplin: 66.30%
- *Cancer Screening-Sigmoidoscopy or Colonoscopy*: 54.70% (US: 61.30%); ranges from Springfield: 64.70% to Monett: 45.80%
- *Diabetic Screening Hemoglobin A1c Test*: 85.80% (US: 85.20%); ranges from Springfield: 89.50% to Joplin: 83.20%
- *Dental Care Utilization (No Dental Exam)*: 41.70% (US: 30.20%); ranges from Mountain View: 32.80% to Monett: 60.40%

## Tobacco

The rate of tobacco use in the OHC Region is higher than the nation, with all Communities above the national rate.

- *Tobacco Use-Current Smokers*: 24.60% (US: 18.10%); ranges from Springfield: 20.90% to Monett: 30.1%
- *Youth Tobacco Use*: 12.94%; ranges from Branson: 9.28% to Lebanon: 18.94%



## Mental Health

The OHC Region has higher rates of depression in the Medicare population compared to the nation; however, two communities perform better than the nation.

- *Depression (Medicare Population):* 18.90% (US: 16.70%); ranges from Branson: 15.10% to Springfield: 21.80%

## Oral Health

The rate of poor dental health in the OHC Region is higher than the nation, with all Communities above the national rate.

- *Poor Dental Health:* 23.80% (US: 15.70%); ranges from Springfield: 20.20% to Monett: 33.60%

## Hospitalizations

As a Region, we are performing worse than the nation in preventable hospital events, two of the six Communities have a lower rate than the nation.

- *Preventable Hospital Events:* 51.3/1,000 (US: 49.9/1,000); ranges from Branson: 43.5 to Joplin: 58.4

## Chronic Disease

The chronic disease morbidity rates for the OHC Region are higher than the national rates. The incidence rates for lung, cervical, and colon and rectum cancer are also higher than the nation.

- *Cervical Cancer Incidence:* 9.9/100,000 (US: 7.62/100,000); ranges from Joplin: 7.3 to Branson and Mountain View: 9.9
- *Colon and Rectum Cancer Incidence:* 41.25/100,000 (US: 39.8); ranges from Springfield: 38.09 to Lebanon: 45.24
- *Lung Cancer Incidence:* 71.26/100,000 (US: 61.2); ranges from Springfield: 63.24 to Joplin: 76.64
- *Asthma Prevalence:* 13.5% (US: 13.4%); ranges from Mountain View 9.19% to Joplin 15.8%
- *Blood Pressure Morbidity:* 29.42% (28.16%); ranges from Branson: 26.62% to Monett 34.02%
- *Diabetes (Adult) Morbidity:* 9.46% (9.19%); ranges from Springfield 8.57% to Mountain View 10.88%
- *Heart Disease (Adult) Morbidity:* 5.5% (US: 4.4%); ranges from Branson: 3.9% to Mountain View: 10.1%

- High Cholesterol (Adult) Morbidity: 40.77% (US: 38.52%); ranges from Joplin 38.24% to Mountain View: 48.56%

## Death and Mortality

The OHC Region performs worse than the nation in all listed mortality rates. The region has more than 1,500 premature deaths than the national average.

- *Premature Death*: 8767/100,000 (US: 7,222/100,000); ranges from Springfield: 7,398 to Joplin: 8,279
- *Cancer Mortality*: 177.4/100,000 (US: 160.9/100,000); ranges from Springfield: 160.9 to Joplin: 194.3
- *Coronary Heart Disease*: 124/100,000 (US: 99.6/100,000); ranges from Springfield: 88.5 to Monett: 158
- *Drug Poisoning Mortality*: 18.9/100,000 (US: 15.6/100,000); ranges from Joplin: 14.1 to Lebanon: 23.4
- *Heart Disease Mortality*: 211.3/100,000 (US: 168.2/100,000); ranges from Springfield: 178.6 to Joplin: 240
- *Lung Disease Mortality*: 59.5/100,000 (US: 41.3/100,000); ranges from Branson: 48.6 to Lebanon: 67.5
- *Stroke Mortality*: 44.9/100,000 (US: 36.9/100,000); ranges from Branson: 40 to Mountain View: 48.2
- *Suicide*: 19.6/100,000 (US: 13/100,000); ranges from Monett: 15.2 to Branson: 22.1

## OHC Region Secondary Trend Data Findings

In addition to the OHC Region Secondary Data Findings, the secondary data subcommittee compared the OHC Region data from the 2016 assessment to the most recent data. The committee focused on the key indicators that were identified through the secondary data review. The data was compiled and placed into comparison charts to allow for side-by-side examination of the data. The committee identified key trend findings by selecting indicators that had a percentage change greater than one percentage point and/or a mortality/morbidity indicator that is included in the prioritization matrix. Then, the selected trend indicators were re-calculated based off of the current OHC Region footprint to have a more accurate trend comparison. The OHC Region footprint has changed from the 2016 assessment with 51 counties to the current OHC Region with 29 counties. After the trend data was reviewed, the committee provided their findings to the steering committee. The following are the secondary trend data key findings.

## Cancer

Cancer mortality, tobacco use, colon and rectum cancer incidence, and cancer screening have all improved for the OHC Region. The incidence for both lung and cervical cancer have increased.

- *Cancer Screening – Mammogram*: 57.0% (2016 Assessment data) to 60.6% (2018 Assessment data)
- *Cancer Screening – Sigmoidoscopy or Colonoscopy*: 52.0% to 54.7%
- *Cancer Incidence – Cervical (/100,000)*: 8.0 to 9.1
- *Cancer Mortality (/100,000)*: 188.1 to 177.4
- *Tobacco Use*: 26.0% to 24.6%
- *Cancer Incidence – Lung (/100,000)*: 69.2 to 71.3
- *Cancer Incidence – Colon & Rectum (/100,000)*: 43.5 to 41.3

## Diabetes

Adult diabetes and physical inactivity rates have improved overall for the OHC region.

- *Diabetes (Adult)*: 10.0% to 9.5%
- *Physical Inactivity*: 28.0% to 26.0%

## Mental Disorders

The OHC region has seen an increase in both suicide rates and depression.

- *Suicide (/100,000)*: 18.8 to 19.6
- *Depression*: 18.0% to 18.9%

## Lung Disease

Health behavior factors affecting lung disease, such as tobacco use and physical inactivity rates, have improved overall for the OHC Region; however, at this time, lung disease mortality has stayed the same. In the OHC Region, asthma prevalence has increased.

- *Mortality-Lung Disease (/100,000)*: 59.6 to 59.5
- *Tobacco Use*: 26.0% to 24.6%
- *Physical Inactivity*: 28.0% to 26.0%
- *Asthma Prevalence*: 13.0% to 13.5%

## Cardiovascular Disease

Behaviors that effect cardiovascular disease, such as physical activity and tobacco, have improved. Morbidity and mortality measures of cardiovascular disease, such as the rate of heart disease and death rates from stroke and heart disease, have also improved. Overall, the OHC Region has improved in every indicator of cardiovascular disease.

- *Mortality-Stroke (/100,000):* 45.5 to 44.9
- *Mortality-Heart Disease (/100,000):* 215.1 to 211.3
- *Physical Inactivity:* 28.0% to 26.0%
- *Tobacco Use:* 26.0% to 24.6%
- *Morbidity-Heart Disease (Adult):* 6.5% to 5.5%

## Oral Health

Overall, the oral health of the OHC Region has improved with less poor dental health days reported and improved access to dental care.

- *Dental Care Utilization (No Dental Exam):* 43.0% to 23.8%
- *Access to Dentists (/100,000):* 35.8 to 45.6
- *Poor Dental Health:* 27.0% to 23.8%

## Social Determinants of Health

For the OHC Region, the social determinants of health have improved. The population is more educated and earning more money.

- *Families Earning Over \$75,000:* 25.0% to 29.3%
- *Children Eligible for Free/Reduced Price Lunch:* 60.0% to 55.2%
- *Percent Population Age 25 with Associate Degree or Higher:* 25.0% to 28.4%
- *Percent Population Age 25 and older without a High School Diploma:* 16.0% to 12.8%

## Access to Care

The uninsured adult population and preventable hospital events have decreased; however, the percentage of the population living in a Health Professional Shortage Area has increased.

- *Uninsured Adults:* 25.0% to 16.8%
- *Preventable Hospital Events (/1,000):* 66.9 to 51.3
- *Population Living in a Health Professional Shortage Area:* 85.0% to 97.4%