



**Community Health
Assessment
and
Community Profile
Johnson County, Kansas
2016**

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Executive Summary

The Public Health Accreditation Board (PHAB) says, “A community health assessment is a systematic examination of the health status indicators for a given population that is used to identify key problems and assets in a community. The ultimate goal of a community health assessment is to develop strategies to address the community’s health needs and identified issues. A variety of tools and processes may be used to conduct a community health assessment; the essential ingredients are community engagement and collaborative participation” (PHAB Definition from the PHAB Glossary of Terms Version 1.0), (Turnock, B. *Public Health: What It Is and How It Works*. Jones and Bartlett, 2009).

The process described herein details the history of Johnson County’s prior community health assessments and current efforts, illustrating the methods used to measure the health of the community. The Johnson County Department of Health and Environment (JCDHE) has been coordinating and facilitating the Community Health Assessment Process (CHAP) since 1996. The CHAP group, comprised of numerous community partners, meets regularly to collaborate on needs assessment, data review and program implementation designed to improve health.

Primary and secondary data is required to paint an accurate picture of a population’s health status. In late 2015, JCDHE collected primary data using the Centers for Disease Control and Prevention’s “Community Assessment for Public Health Emergency Response” (CASPER) method. Randomly selected households in 60 census blocks were chosen to participate. Volunteers conducted a total of 376 survey interviews. The survey time averaged 20 minutes. Over 70 community leaders completed key informant surveys. CHAP also compiled and reviewed secondary data from sources such as the Centers for Disease Control and Prevention’s Behavioral Risk Factor Surveillance System, and the United States Census American Community Survey. CHAP played a significant role in evaluating the information in a systematic, comprehensive manner.

The data presented represents the Johnson County community, its unique demographics, issues and health behaviors. Where available, comparison data to the state of Kansas and the United States is included. Additional data sources include the United States Department of Education, Bureau of Labor Statistics, the Kansas Department of Health and Environment, Kansas Health Matters, County Health Rankings and United Community Services of Johnson County.

Executive Summary

Several key findings include:


- Johnson County's population became increasingly diverse; between 2000-2010 the overall population increased by 17 percent, with the largest growth in the non-white population. The Black population grew by more than 100 percent to 4 percent of the overall population and the Hispanic population grew by 117 percent, to 7 percent of the overall population.
- The number of people in poverty rose to over 30,000 in the county, with the highest rates of poverty in the Hispanic/Latino and Black populations.
- The average age of persons experiencing homelessness was 15.
- Cancer surpassed heart disease as the leading cause of death.
- Fifteen percent of individuals reported that they were always/usually worried about paying their monthly bills.
- Seventeen percent of Johnson County adults reported binge drinking (consuming five or more drinks in a two hour period for men, four or more drinks for women).
- Six in 10 Johnson County residents are overweight or obese.
- Eight percent of Johnson County residents do not have health insurance, and of the people who reported visiting the emergency room, 14 percent report that they receive a majority of their care at the hospital emergency room.


CHAP met monthly for ten months, taking the time necessary to understand and assess the large amount of facts, figures and information offered. CHAP chose the following priorities: Chronic Disease Prevention and Health Promotion, Access to Care, Mental Health.

Johnson County has many strengths, resources and services available. A listing of many of the assets the community has to offer is available at the end of this document.

Johnson County


Johnson County is located in the northeast corner of Kansas and the southwestern quadrant of the Kansas City metropolitan region. The county was organized on September 7, 1857. Johnson County is 477 square miles and is made up of 20 municipalities and unincorporated areas (located in the southwest part of the county).





It's the most populous county in Kansas with more than **580,159 residents.**


Estimate based on 2015 U.S. Census Bureau



Johnson County is **477 square miles.**

That's about **302,963 acres** with approximately 59% of land incorporated into city limits of the 20 cities in the county.

Estimate based on 2015 U.S. Census Bureau



Johnson County has **4 of 10** of the largest cities in Kansas.

#2	Overland Park	186,515
#4	Olathe	134,305
#7	Shawnee	65,046
#9	Lenexa	52,490


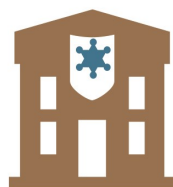
We have **181,824 residences**, including single-family homes, multi-family units, condominiums, townhouses and farmsteads.



The county has **3,518 miles** of city streets.



Across the county, there are **44 fire stations** and **18 law enforcement stations.**

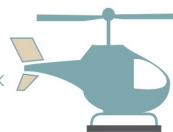



In Johnson County, there are **23 aviation facilities**, including airports and heliports.

Johnson County has **454 miles** of county roadways, including about **122 miles** of gravel roadways.




The county has an extensive network of medical facilities, including numerous surgical centers, urgent care facilities and **8 hospitals.**



LEARN

Johnson County is home to **SixGreat public school districts:** Blue Valley Schools (#229), De Soto Schools (#232), Gardner-Edgerton Schools (#231), Olathe Public Schools (#233), Shawnee Mission Schools (#512) and Spring Hill Schools (#230). Total enrollment for the 2015–2016 school year was more than **95,600 students.**



& PLAY!

The median household income in Johnson County is **\$75,015**.



WORK

There are more than **336,000** workers in Johnson County, and more than **22,000** private-sector jobs.



Including county and city sites, there are **365** parks totaling about **16,692** acres.

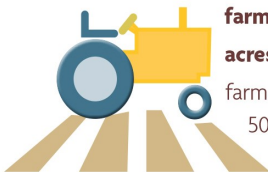
JOB

Low unemployment rate of **2.9%**.

Johnson County is home to about **1,220** restaurants and eateries.



In the county, there are **571** farms, totaling **99,354** acres, and **52%** of the farms have less than 50 acres.



County residents and visitors can enjoy **27** golf courses!



The county is home to **10** museums and **123** historical sites.

The average travel time to work is **21** minutes.



There are **298** shopping centers — including **182** strip malls!



Across the county, there are **163** public school and **49** private school buildings.



Throughout Johnson County, there are **74** hotels, motels and extended-stay facilities.



And Johnson County residents have access to the county's **13** public libraries.

Johnson County has **255** miles of bike lanes, including **159** miles of shared roadways.



In the county, there are **four** colleges, including **Johnson County Community College** which had a Fall 2015 enrollment of **19,091** with more than 10,000 full-time equivalent students.



Across the county, residents can enjoy **27** swimming pools, beaches and aquatic centers.



Johnson County has **455** miles of hiking, jogging and bike trails.

jocogov.org

Johnson County's Community Health Assessment Process

History

In 1996, the Johnson County Health Department initiated a community health assessment to measure the health status and needs of its citizens. Approximately 1,200 residents responded to a phone survey, and the health department collected key informant surveys and gathered data from national, state and local sources. Once the results were tabulated and assessed, individuals who represented diverse groups within the county worked with the department to identify the three issues of greatest concern. This group of community partners called CHAP (Community Health Assessment Process) designed and watched over the initiatives developed to address the most pressing health issues. CHAP's goal was to improve and maintain a high level of health for Johnson County by:

- Evaluating existing systems of care
- Establishing health priorities
- Recommending the implementation of health programs and services
- Planning and implementing processes/initiatives
- Conducting ongoing evaluations

CHAP continues to meet regularly to address the health needs of the community. Annually, CHAP reviews and analyzes county level health data to reassess the group's priorities.

In 2000, CHAP conducted a second survey and tabulated results. The public health issues that were identified in the initial survey and again in the subsequent survey were: Access to Care, Physical Fitness/Obesity, and Childhood Injury Prevention. In 2004, CHAP again re-assessed priorities and identified two additional issues and added them to the existing priorities: Tobacco/Clean Indoor Air Quality and Oral Health.

Below is a sampling of initiatives resulting from CHAP's community collaboration:

- Identified the need for health care access in southern Johnson County that led to Health Partnership Clinic (the County's only Federally Qualified Health Center) opening a second location.
- Initiated a fitness room in a local community center.
- Provided pedometers to doctors to distribute as incentives to increase exercise.
- Created and implemented activities and events through Safe Kids Johnson County on such issues as child passenger safety, bike safety, home safety and fire/burn prevention.
- Provided information to cities that were considering indoor smoking ordinances.
- Established "Elder Smiles" (on-site dental services for seniors in long-term care facilities).

Johnson County's Community Health Assessment Process

History (continued)

In 2011, CHAP again convened to participate in a health assessment of the Johnson County community. The group reviewed and discussed data from a variety of sources, including the 2009 Johnson County *Behavioral Risk Factor Surveillance System Report*, the United States Census *American Community Survey* and United Community Services of Johnson County.

The priorities selected were:

- Physical Activity/Nutrition
- Access to Health Care
- Substance Abuse/Mental Health

Working groups formed around these priorities. The groups identified strategies and objectives for each priority area. This information formed the basis of the Community Health Improvement Plan (CHIP) 2012-2017. CHIP outcomes were:

- Increased access to and participation in physical activities through the promotion of Complete Streets resolutions, the Creating Sustainable Places project, Walking School Bus training, Walk Friendly Communities training and local bikeway plans.
- Increased access to and consumption of healthy foods through the promotion of healthy choices at concession stands, assessment and development of healthy eating policies in child care settings, the establishment of a WIC Community Garden and the formation of the Johnson County Food Policy Council.
- Increased connections between social and health service agencies, via better access and use of My Resource Connection (online resources and referral site).
- Increased availability of dental screenings for Johnson County youth in the school setting through collaborations with dental hygienists, dentists, school districts and Health Partnership Clinic.
- Increased awareness and education about the dental needs of older adults through professional workshops, community sessions and the formation of a non-profit organization to advocate for the dental needs of older adults.

Johnson County's Community Health Assessment Process

History (continued)

- Designed and implemented a population based poster campaign targeted at increasing awareness of substance abuse among youth. Posters were placed at local shopping malls and businesses.
- Delivered the Mental Health First Aid class to train individuals to identify and intervene in mental health issues. Promoted national mental health/substance abuse awareness days via email to the community and Johnson County Government employees. Received grant funds to offer the Families and Schools Together training to school districts, held Café Conversations with families and promoted the “It Matters” campaign about the prevention of underage drinking.

In 2012, the Johnson County Health Department merged with the Johnson County Environmental Department to become the Johnson County Department of Health and Environment (JCDHE).

In 2014, JCDHE was the first health department in Kansas to become accredited by the Public Health Accreditation Board (PHAB). PHAB requires accredited health departments to conduct a community health assessment every five years. IRS regulations specify that non-profit hospitals complete a health assessment every three years. These requirements provide an opportunity for JCDHE to maintain its already strong relationship with the county's non-profit hospitals and work together to conduct community health assessments. Therefore, JCDHE will initiate and complete a community health assessment every three years.

Current

Led by JCDHE, CHAP began planning for the community health assessment valid from 2017 to 2019 in early 2015. The group determined that collecting and incorporating primary research would enhance the process. See Methods on page 12 for a complete description of the primary and secondary research that JCDHE completed.

The data were analyzed by JCDHE's population epidemiologist and presented to CHAP in January 2016. Over the course of the next several months, CHAP studied and discussed the research findings, key informant surveys, reports and information, including the CDC's *Behavioral Risk Factor Surveillance System*, *County Health Rankings*, *Healthy People 2020* and others pertaining to the health issues of the Johnson County. CHAP was asked to prioritize those health issues they felt were the most crucial to the population.

Johnson County's Community Health Assessment Process

The priorities chosen were:

- Chronic Disease Prevention and Health Promotion
- Access to Care
- Mental Health

Once the priorities were chosen, CHAP divided into work groups to discuss mutually agreed-upon goals, strategies, timelines, responsible parties and resources available to achieve the objectives. This information will be included in the Johnson County Community Health Improvement Plan 2017-2019.

Partnerships are a vitally important part of the community health assessment process in Johnson County. Working in partnership with individuals, organizations, agencies and coalitions allows JCDHE to build on one another to move toward a healthier community, a goal shared by all.

Johnson County Community Partners:

American Heart Association
 Amerigroup
 Area Agency on Aging - Human Services Department
 Arthritis Foundation
 Blue Valley School District
 Children's Mercy Hospital
 City of Gardner
 City of Olathe Fire Department
 Community volunteers
 DeSoto School District
 El Centro, Inc.
 Health Partnership Clinic, Inc.
 Healthcare Foundation of Greater Kansas City
 Homewatch CareGivers
 IBossWell
 Jewish Community Center
 Johnson County Community College - Dental Hygiene
 Johnson County Park and Recreation District
 Johnson County Emergency Management
 Johnson County Human Services
 Johnson County Library
 Johnson County MedAct – EMS
 Johnson County Mental Health Center
 Johnson County Planning Department
 Johnson County Transit Department
 Kansas State Extension Office
 Kansas School for the Deaf
 Kansas Department of Health and Environment
 Kids TLC, Inc.
 KVC Health Systems, Inc.

Community Partners

Mental Health Association of the Heartland
Mercy and Truth Medical Missions
Minute Movement
Mother and Child Health Coalition
National Parkinson Foundation
Olathe Health Systems
Olathe Latino Coalition
Olathe School District
Oral Health Kansas
REACH Foundation
ReNewed Health Pantry
Saint Luke's Hospital South
Shawnee Mission School District
Shawnee Mission Medical Center
Spring Hill School District
Sunflower Health Plan
Sunflower House
The Family Conservancy
United Community Services of Johnson County
United Healthcare Kansas City
United Way of Greater Kansas City
University of Kansas Cancer Center
University of Kansas Medical Center
University of Kansas Medical Center – MPH Program
University of Kansas School of Nursing
VVV Marketing & Development, Inc.
WyJo Care
YMCA of Greater Kansas City

Methods

JCDHE and partners used the Center for Disease Control and Prevention's (CDC) two-stage cluster sampling "Community Assessment for Public Health Emergency Response" (CASPER) method to collect primary data. This method yields a representative sample of county households. CASPER has been validated for rapid assessments of a variety of population level public health needs and produces valid and precise estimates that are within 10 percent of the "true" estimate.

In order to randomly select households to participate, 60 census blocks were chosen at random, weighted by 2010 US Census population. Within the selected blocks, teams of volunteers visited seven randomly-selected households and conducted surveys. If no one was home or the resident refused, surveyors visited the next nearest residence until seven surveys were completed. See Appendix A: Survey Map.

During October and November 2015, volunteers conducted a total of 376 interviews throughout the county, reaching the goal sampling success rate of 80 percent. Of those who answered the door, 41 percent completed interviews. Surveyors obtained oral consent in English or Spanish prior to interviewing survey participants. Eligible participants had to be at least 18 years of age and a resident of the selected household. Survey responses were recorded electronically or on paper surveys. The electronic version collected data on LG tablets; the survey was pre-loaded into the CollectSMART mobile application, developed by the North Carolina Institute of Public Health, based on CDC's mobile version EpiInfo.

Data were analyzed in SAS 9.4 (Cary, NC), and results for each question in the community health survey are reported as weighted proportions. Survey weights were calculated using methods described in the CDC CASPER toolkit, which incorporates the total number of households in the sampling frame, the number of households in the census block, and the number of interviews collected in each census block.

Volunteers who conducted the surveys came from Johnson County Government departments, the University of Kansas Medical Center MPH Program, the University of Kansas, and community partners. All surveyors received training to assure consistency and accuracy of collected data. To notify residents and encourage participation, JCDHE mailed postcards to the homes in selected neighborhoods, distributed press releases and ran a series of social media posts. Newspaper and TV coverage also alerted the community.

Methods

Survey time averaged 20 minutes and included 50 questions, which were developed from previously validated surveys. The questions included personal health, lifestyle, access to care, opinions on community health and needs, demographics and questions pertaining to social determinants of health. All data were confidential; names and addresses were not recorded. See Appendix B: Survey Questionnaire Tool.

Secondary research was also part of the community health assessment. County-level information that was part of the community health needs assessment came from the CDC's Behavioral Risk Factor Surveillance System, County Health Rankings, Healthy People 2020, United Community Services of Johnson County, Kansas Kids Count, Oral Health Kansas, REACH Foundation and the Healthcare Foundation of Greater Kansas City.

Key informant surveys went to 71 leaders in community organizations, schools, hospitals and county departments. The survey asked about the county's strengths, greatest needs, important health issues, accessibility, affordability and barriers to healthy lifestyles. JCDHE received 29 completed surveys.

Key information survey highlights include:

- **Johnson County's Greatest Strengths:** County resources and services, good public schools and educational opportunities, parks/green spaces and trails, high employment and good job opportunities and a strong economy and affluent population.
- **Johnson County's Greatest Needs:** Affordable housing, transportation, affordable healthcare and higher wages and jobs with growth potential.
- **The Three Most Important Health Issues:** Access to care (under/uninsured), chronic disease (obesity, nutrition, access to healthy food) and mental health (substance abuse).

For the full complement of survey questions and results, see Appendix C: Key Informant Survey Questions and Results.

Key Findings

Access to Care

Eighteen percent of individuals in Johnson County reported that they do not have a personal doctor or healthcare provider.

Poverty

The number of people in poverty rose to over 30,000, or 6.5% of the population (2014 data). Much of this growth occurred in communities of color.

Diversity

Between 2000-2010, the Johnson County's population increased 17 percent, with the largest growth in the non-white population. The Black population grew by slightly over 100 percent, the American Indian/Alaska Native, Native Hawaiian/Pacific Islander and Multiple Race populations all grew by over 85 percent, and the Hispanic population grew 117 percent.

Leading Cause of Death

For the first time, cancer was the leading cause of death in Johnson County, followed by heart disease. Previously, heart disease was the leading cause of death.

Overweight and Obesity

Six in 10 people were overweight or obese.

Binge Drinking

Seventeen percent of Johnson County adults report binge drinking (consuming five or more drinks for men, four or more for women in a period of about two hours). This is higher than the state of Kansas, where 15 percent of adults report binge drinking.

Transportation

Eighty-five percent of workers drive alone to work. One in 25 households does not have a motor vehicle.

Homelessness

The median age of persons experiencing homelessness is 15.

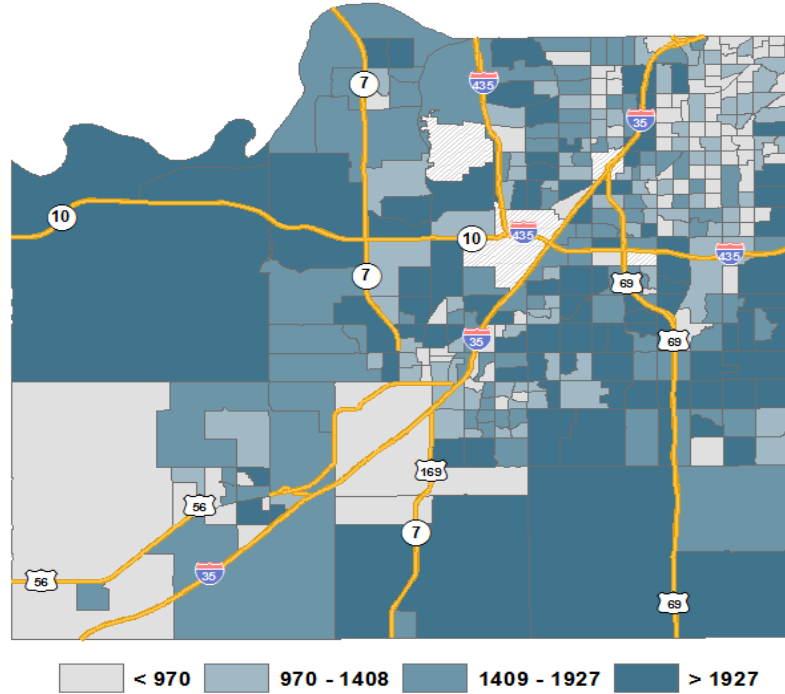
Mental Health

The percentage of adults who were ever diagnosed with a depressive disorder was 15.7 percent. Fifteen percent of individuals also reported that they were always/usually worried about paying their monthly bills.

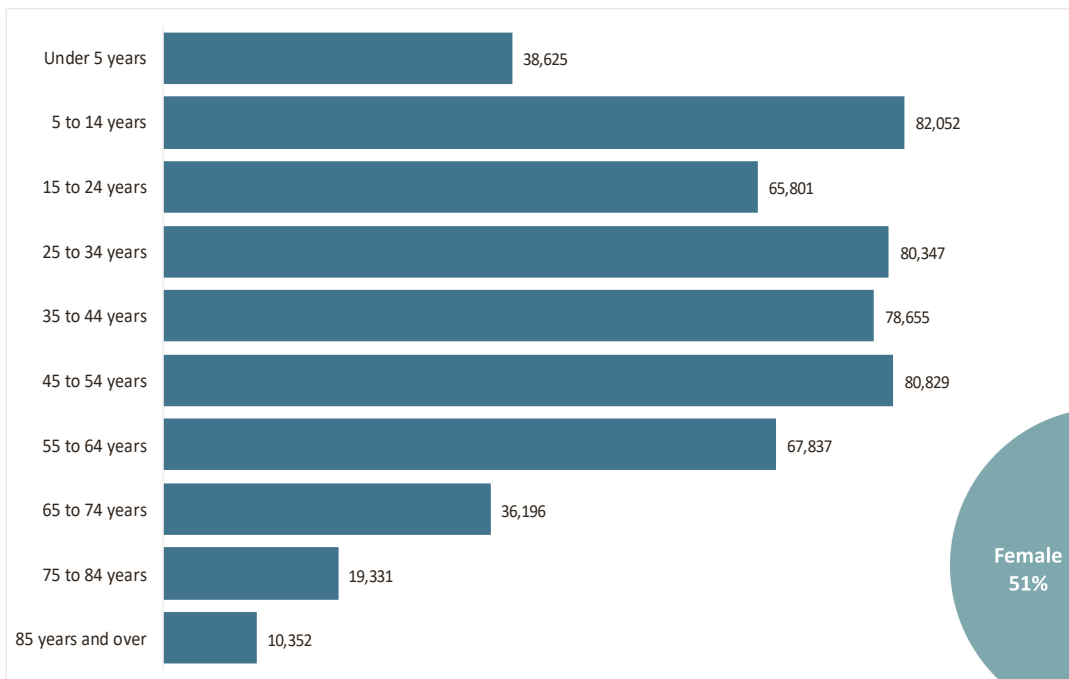
According to the 2010 United States Census, Johnson County's population was 544,179. The 2014 population estimate was 560,025. Between 2000-2010, the population grew by an estimated 21 percent. The majority of the population was aged 25–54, with the median age of 37. Gender was almost evenly distributed.

Source: U.S. Census Bureau 2010; American Community Survey, 2010-2014

Population Distribution:



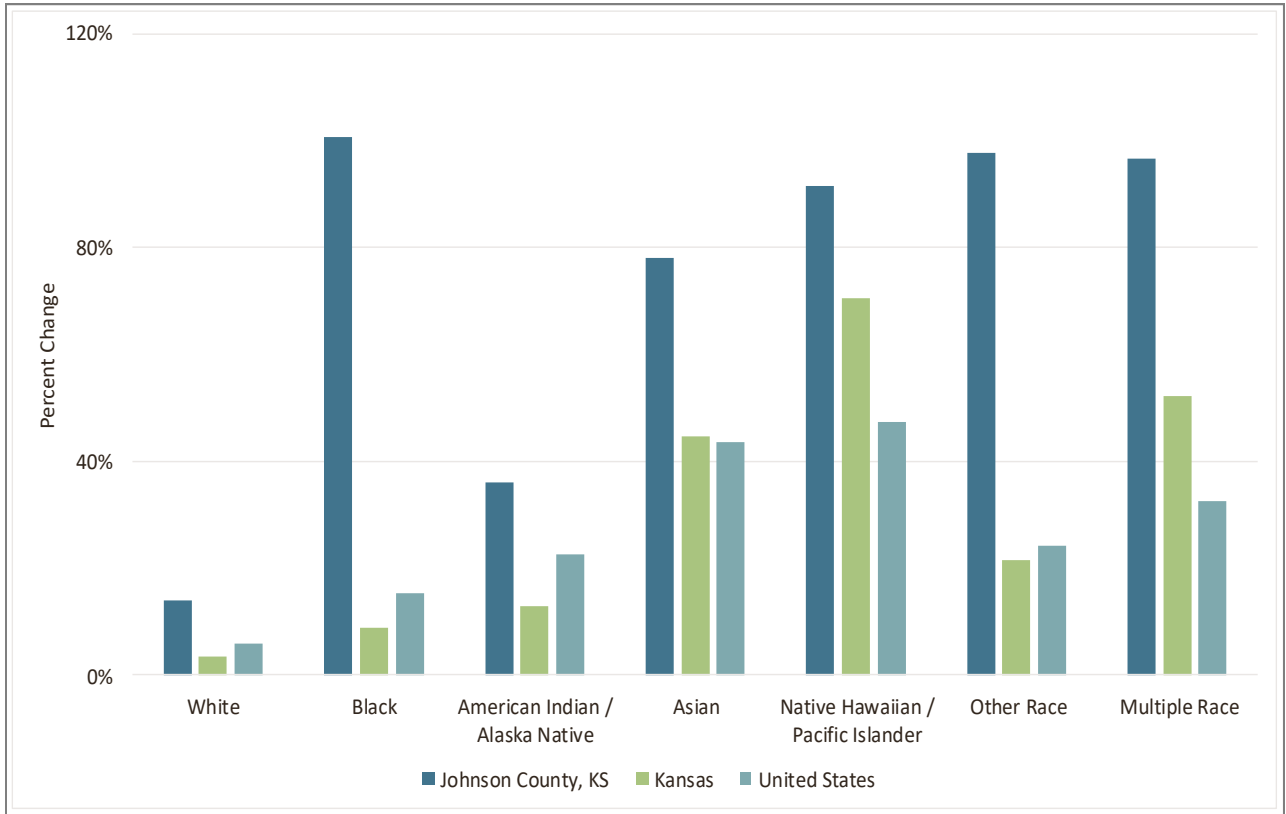
Age and Gender Summary:



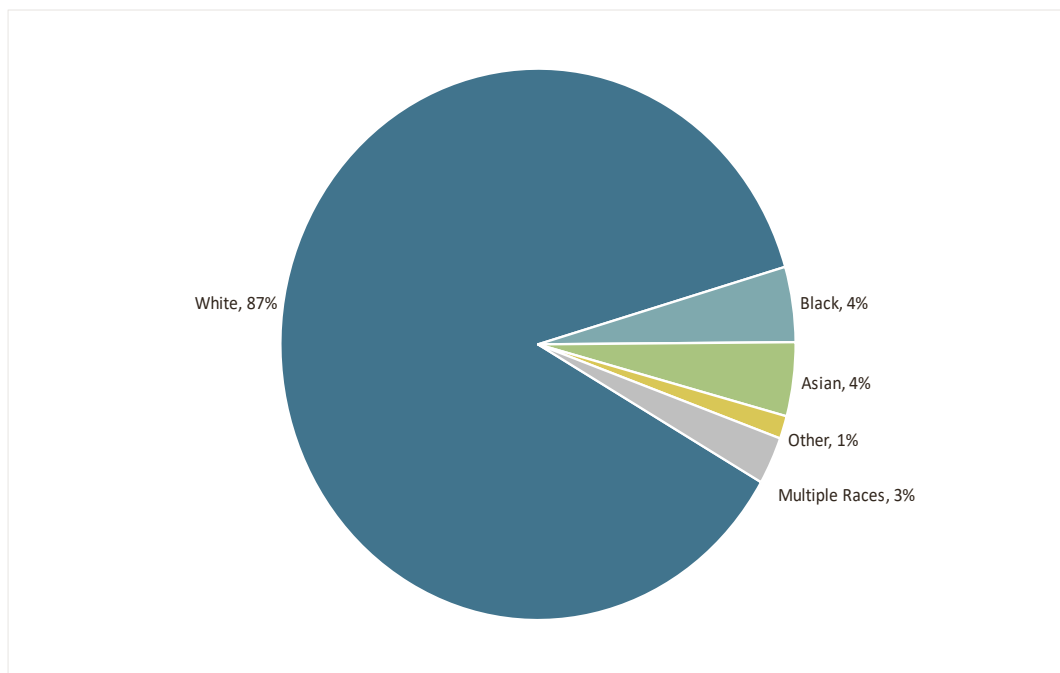
As Johnson County grows, diversity in the population continues to increase. Between 2000 and 2010, Johnson County's racial composition changed at a greater rate than the state of Kansas and the United States.

Source: U.S. Census, American Community Survey 2000-2010 and 2010-2014

Population Changes:



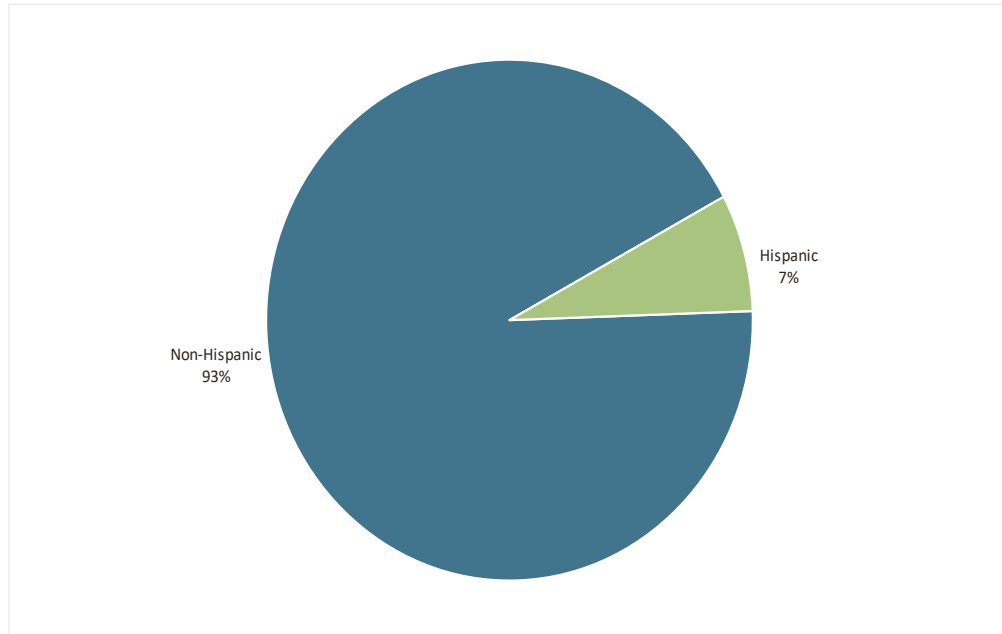
Race Distribution:



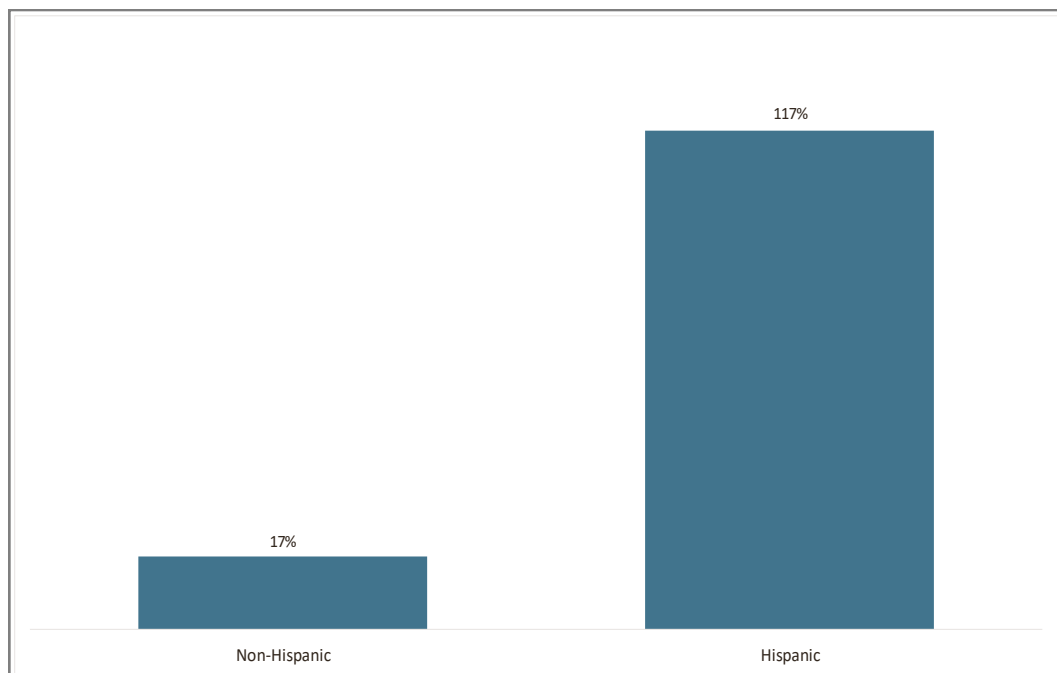
According to the American Community Survey, 7 percent of the Johnson County population identified as white reported to be of Hispanic ethnicity. For the time period 2000-2010, the Hispanic population grew by 117 percent; the growth of the non-Hispanic, white population was 17 percent.

Source: U.S. Census, American Community Survey 2000-2010 and 2010-2014,

Ethnicity Composition:



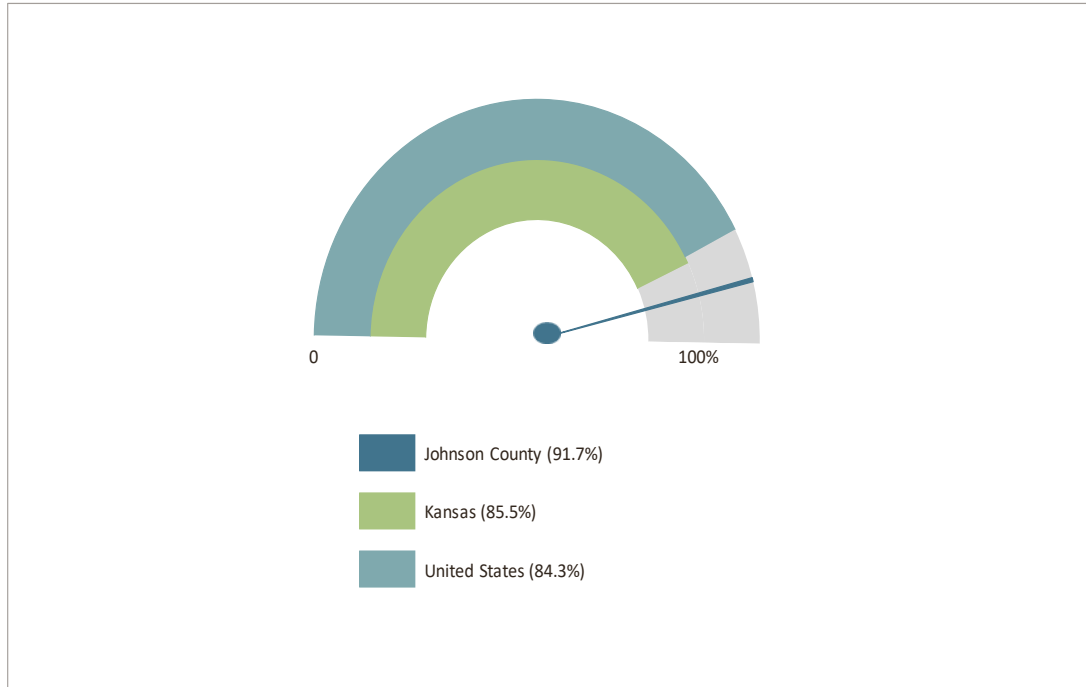
Ethnicity Growth:



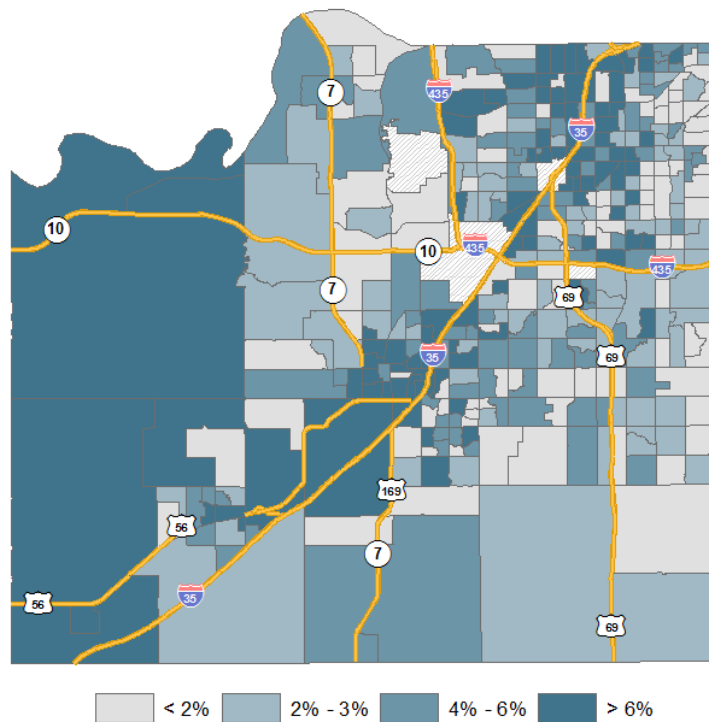
In Johnson County, 91.7 percent of students receive their high school diploma within four years; slightly over 4 percent of the population does not have a high school diploma.

Source: U.S Department of Education, EDData, CARES 2013-14, American Community Survey 2010, 2014

Percentage of Individuals who Receive their High School Diploma within Four Years :



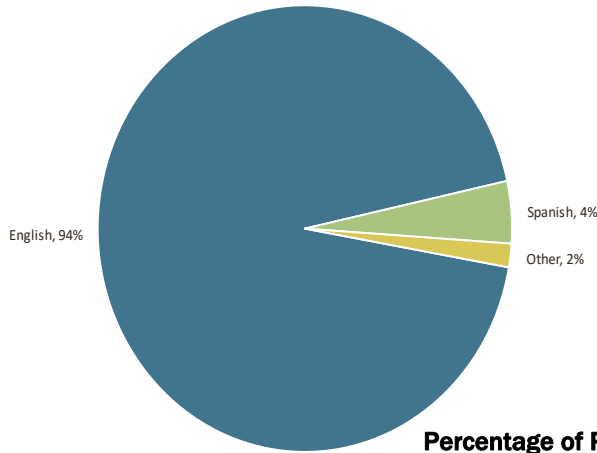
Percentage of Individuals age 25 + with no High School Diploma:



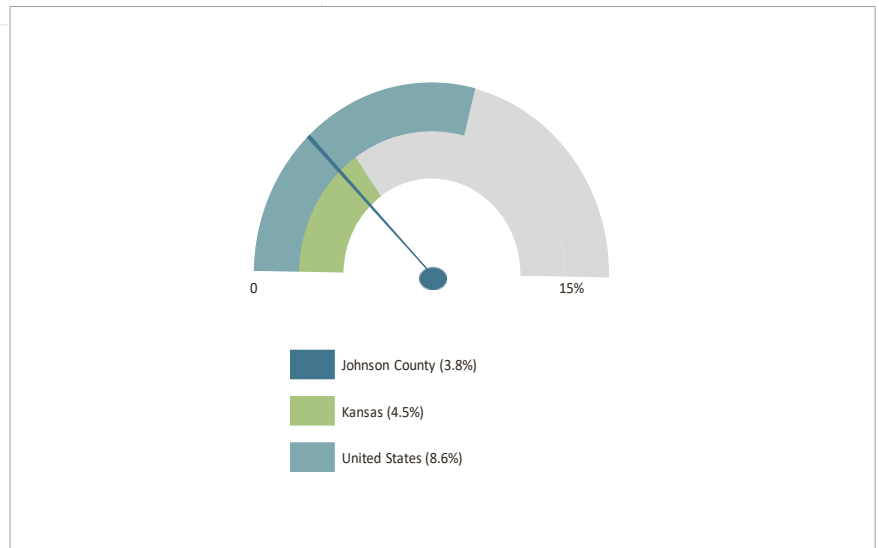
Ninety-four percent of the population reported that English was their primary language; Spanish was primarily spoken in 4 percent of households, 3.8 percent of the population report having limited English proficiency.

Source: Johnson County Community Health Assessment 2015, American Community Survey 2010, 2014

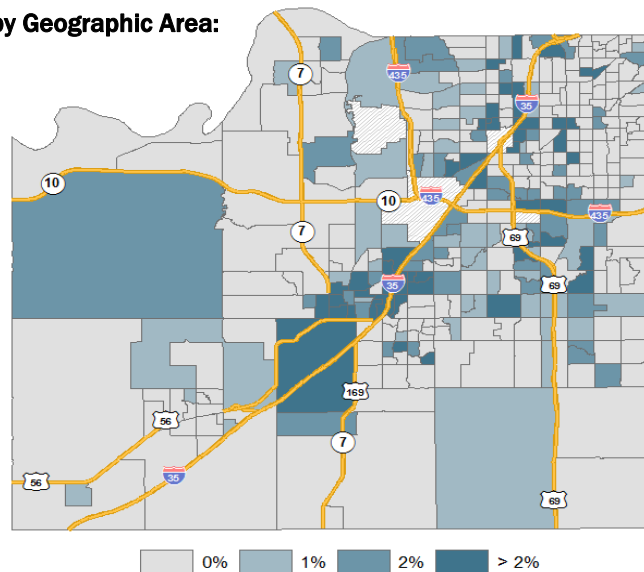
Population Reporting Primary Language Spoken:



Percentage of Population with Limited English Proficiency:



Limited English Proficiency by Geographic Area:

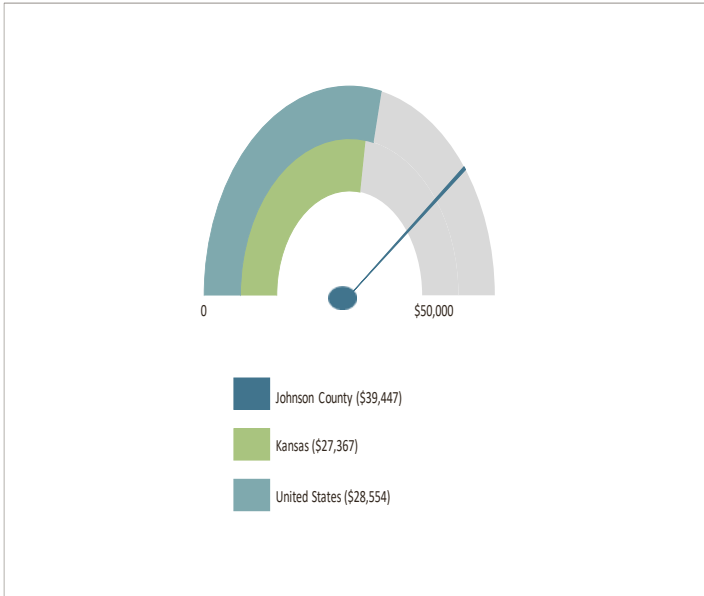


The per capita income for Johnson County was \$39,447, higher than both the state of Kansas and the United States. The median household income for Johnson County was \$74,717.

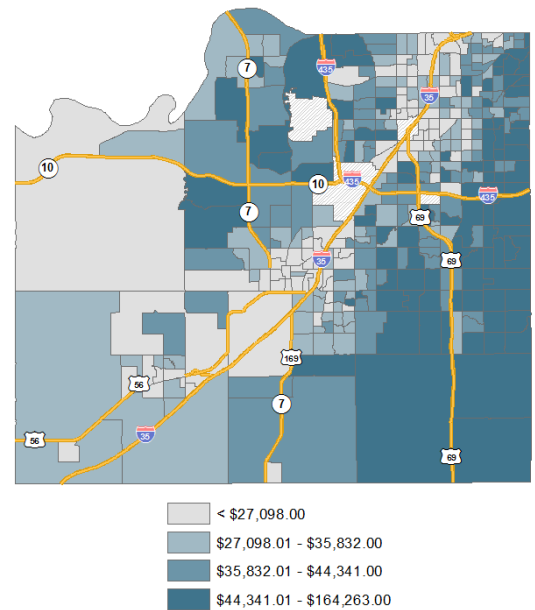
Per capita income by race/ethnicity shows an income difference between racial and ethnic populations.

Source: U.S. Census Bureau, American Community Survey, 2010-2014

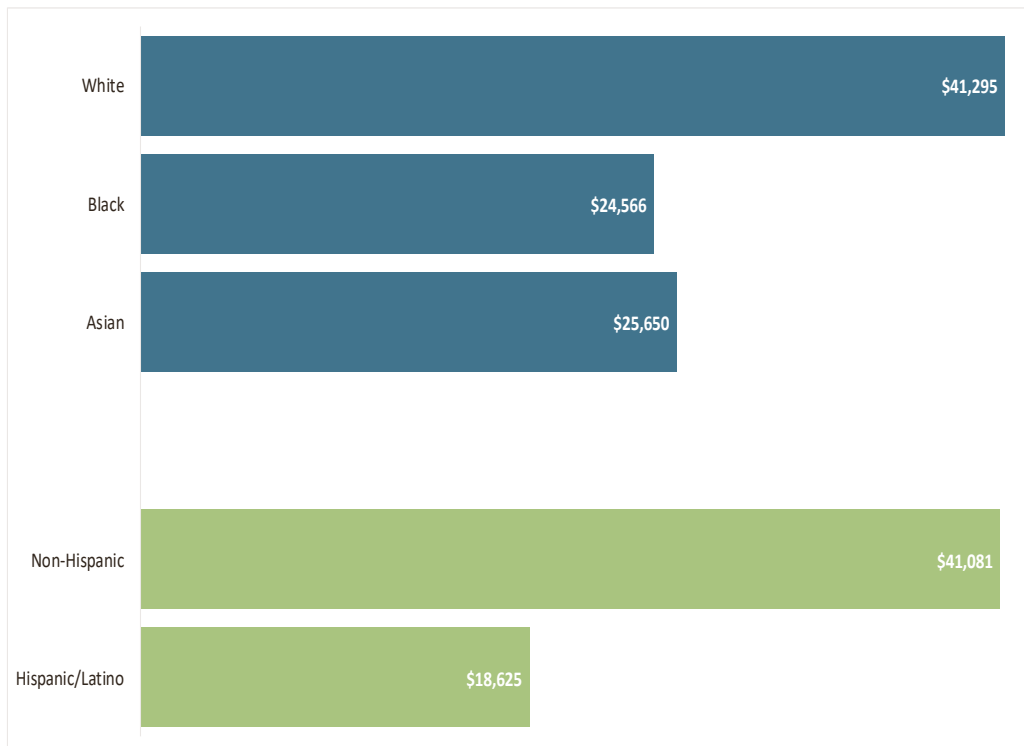
Per Capita Income:



Per Capita Income Geographically:



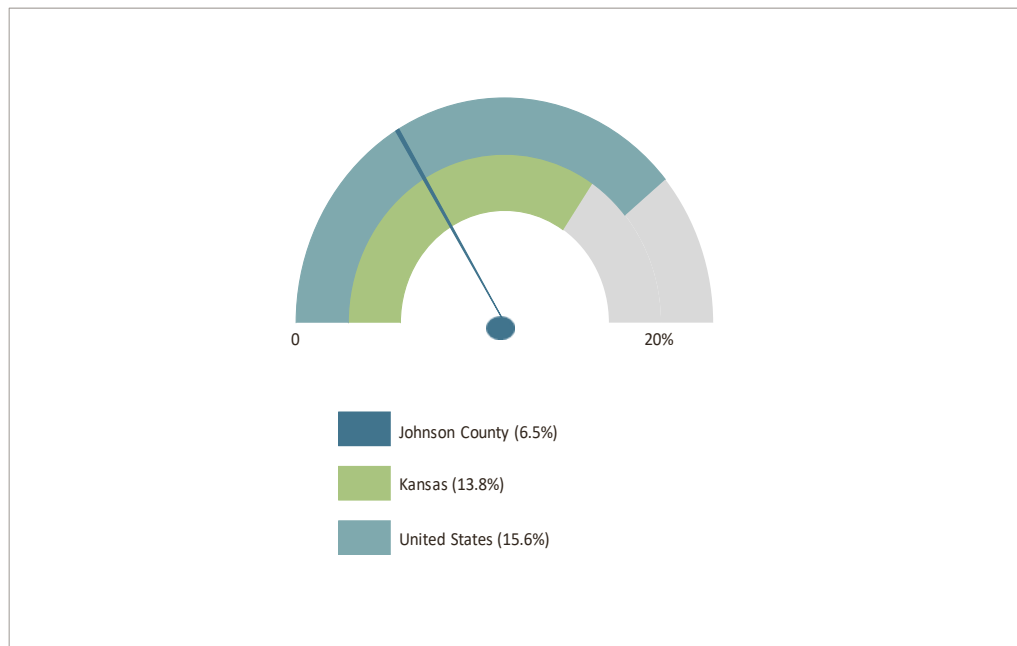
Per Capita Income by Race/Ethnicity:



Poverty in Johnson County was 6.5 percent (2014), lower than the state of Kansas and United States rate. However, poverty affects well over 30,000 people in Johnson County: the most affected are those ages 18-24, followed by children, ages 0-17, as well as minorities. Nearly 8 percent of children live below the federal poverty line. The Johnson County trend mirrors state and national trends that showed a statistical decrease in the poverty rate.

Source: U.S. Census Bureau, American Community Survey, 2010-2014, United Community Services of Johnson County

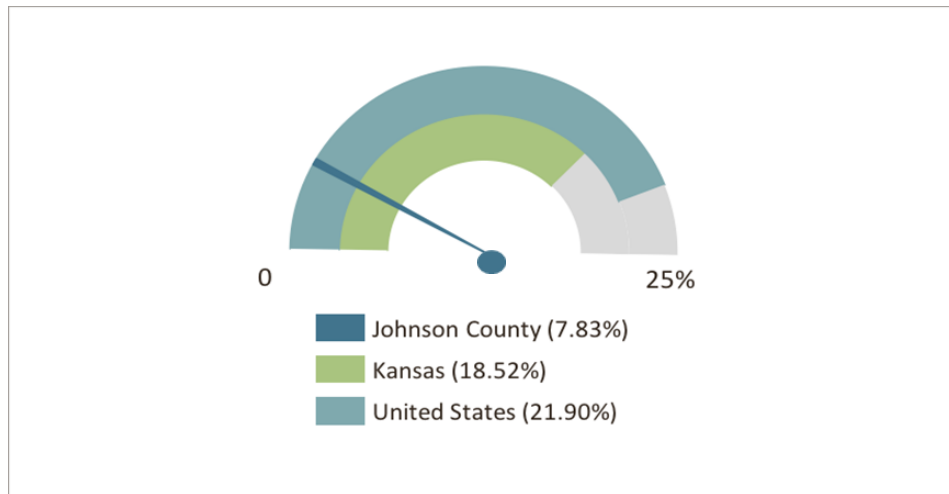
Poverty Rate:



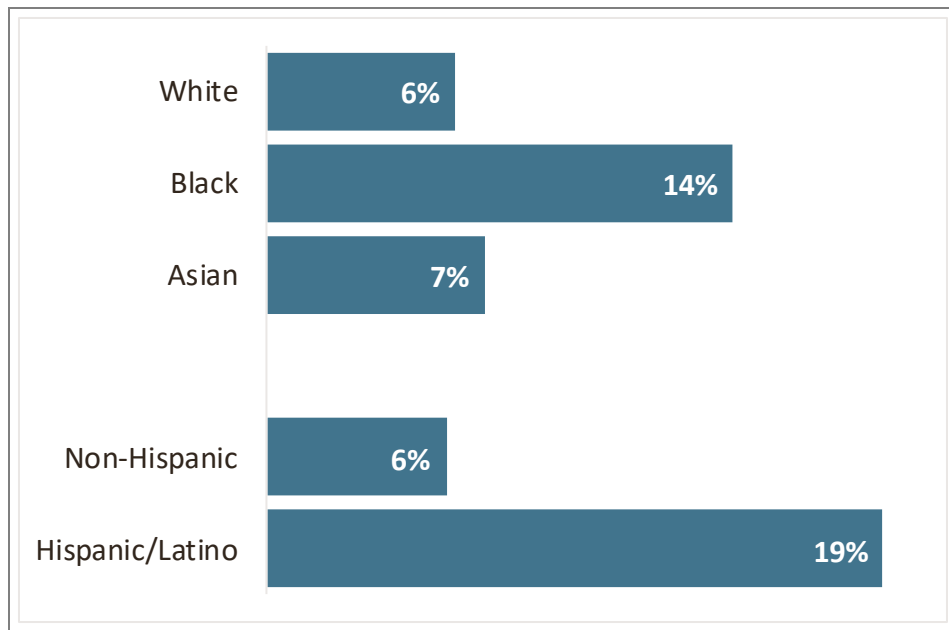
Johnson County Poverty Rate By Age Group:

	2000	2007	2010	2014	2015
Children 0-17	3.6%	5.5%	8.3%	8.3%	6.6%
Young Adults 18-24	9.8%	8.9%	11.7%	10.7%	8.7%
Working Age 25-64	2.5%	3.1%	5.4%	5.3%	4.5%
Seniors 65+	3.6%	3.1%	5.7%	5.6%	4.0%
All Ages	3.4%	4.2%	6.6%	6.5%	5.3%

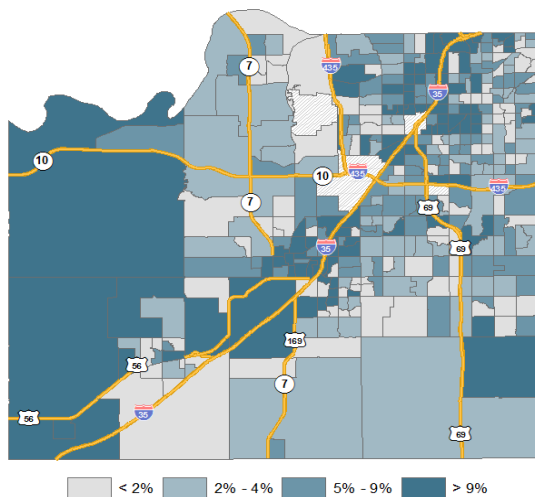
Percentage of Children in Johnson County Living Below the Poverty Line:



Johnson County Poverty Rates by Race/Ethnicity:



Geographic Distribution of Population in Poverty:

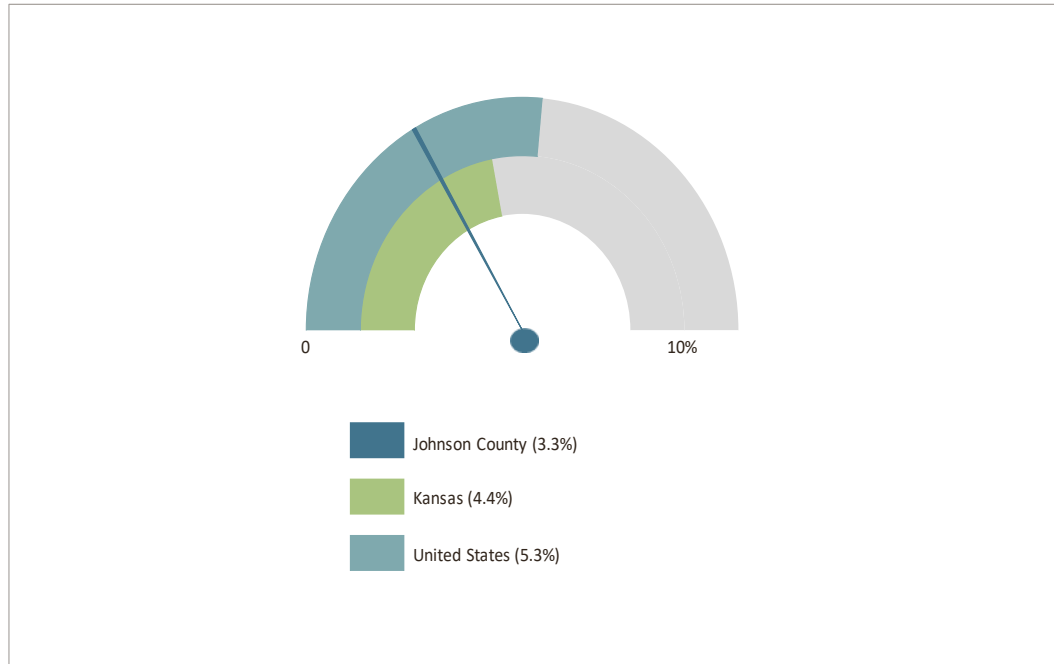


The unemployment rate in Johnson County was 3.3 percent, lower than the state of Kansas and the United States.

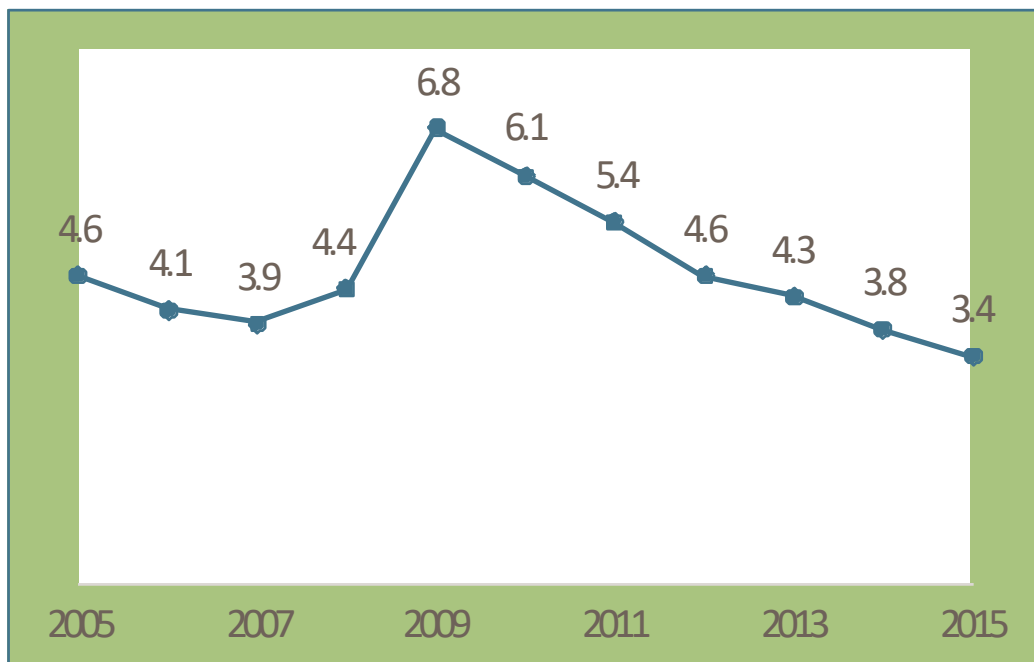
The unemployment trend reflects 10 years (2005-2015) of data, with the highest unemployment rate occurring during the recession of 2008-2009.

Source: Bureau of Labor Statistics, January 2016 and 2005-2015

Johnson County Unemployment Rate:



Johnson County Unemployment Rate Trend 2005-2015



For decades, heart disease has consistently been the leading cause of death in the United States, but in Johnson County, cancer deaths have surpassed heart disease. In 2014, United States life expectancy at birth was 78.8 years.

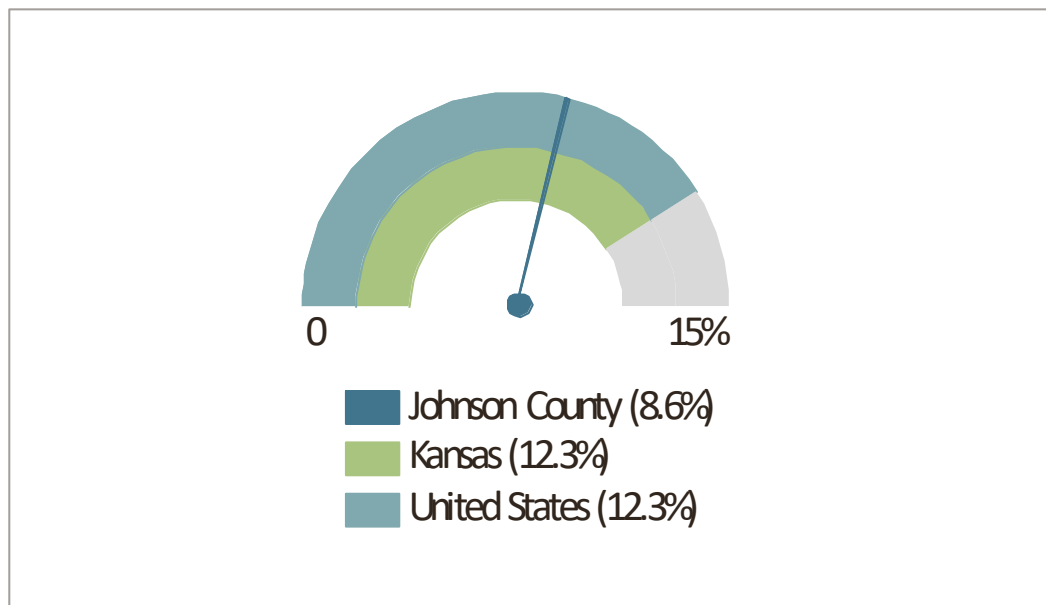
Nearly 9 percent of the Johnson County population reported living with a disability.

Source: Kansas Department of Health and Environment, Vital Statistics, 2007-2011, American Community Survey, 2010-2014

Leading Causes of Death in Johnson County

1. Cancer
2. Heart Disease
3. Atherosclerosis
4. Chronic Lower Respiratory Disease
5. Stroke
6. Unintentional Injury
7. Alzheimer's Disease
8. Suicide
9. Kidney Disease
10. Pneumonia and Influenza

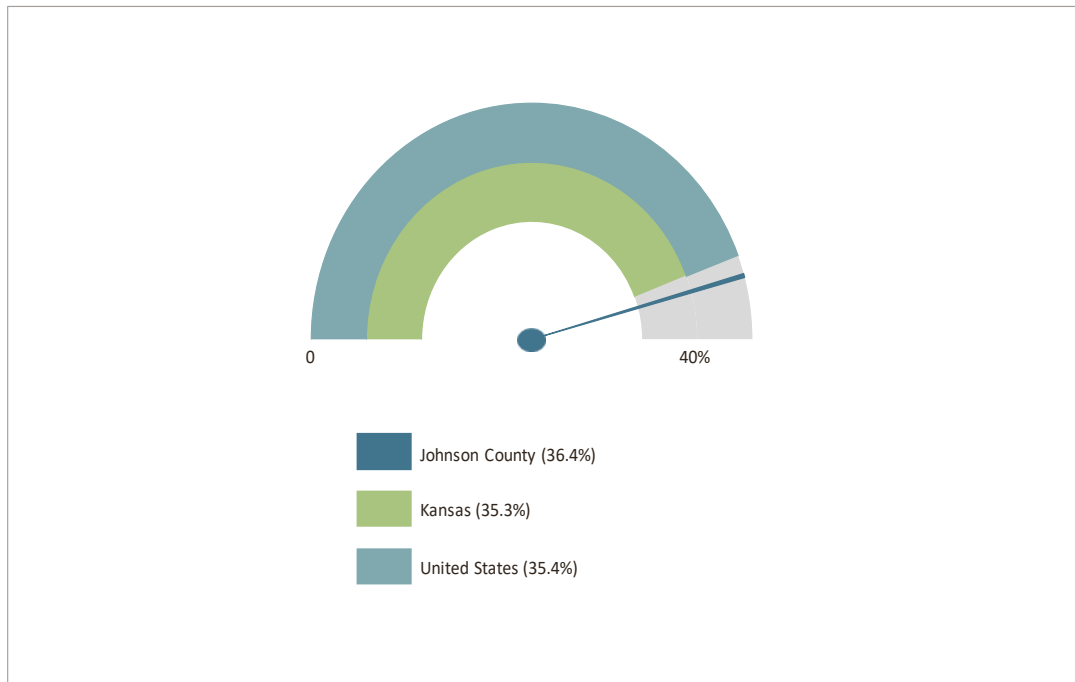
Percentage of the Population Living with a Disability:



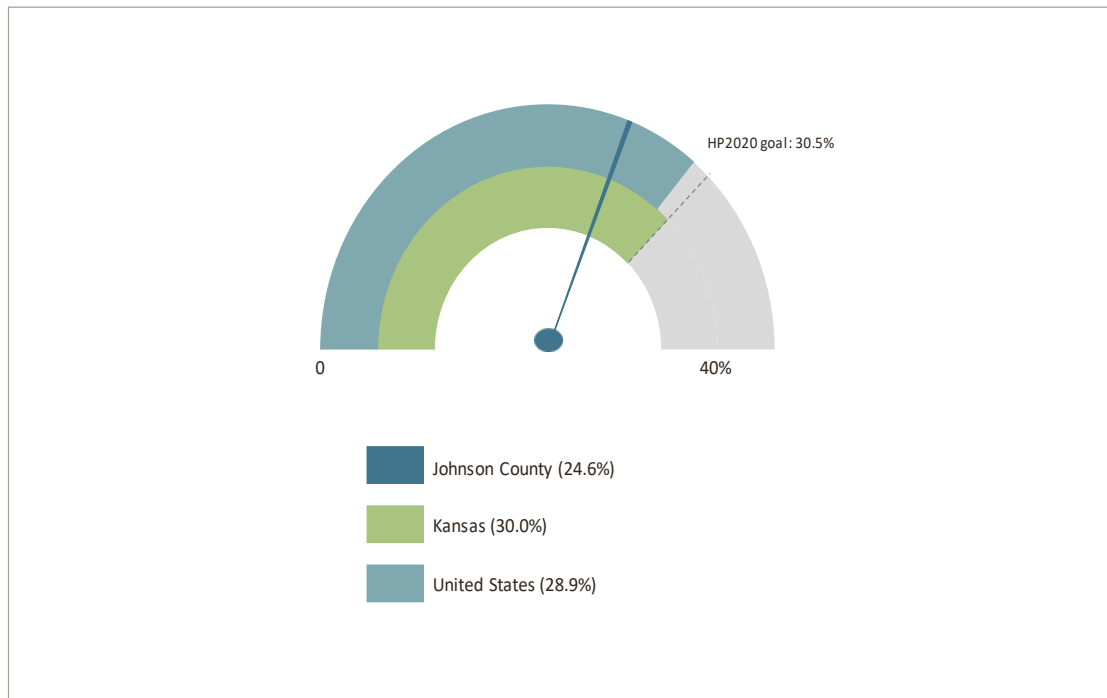
The percentage of people overweight in Johnson County was 36.4 percent, up from the 2011 rate of 34.8 percent. The obesity rate was 24.6 percent, up from the 2011 rate of 22.6 percent. The Healthy People 2020 goal is 30.5 percent. Fewer people in Johnson County were obese, compared to Kansas and the United States, while the percentage of overweight in Johnson County is higher than the state of Kansas and the United States.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, Kansas Health Matters

Percentage of the Population in Johnson County who are Overweight:



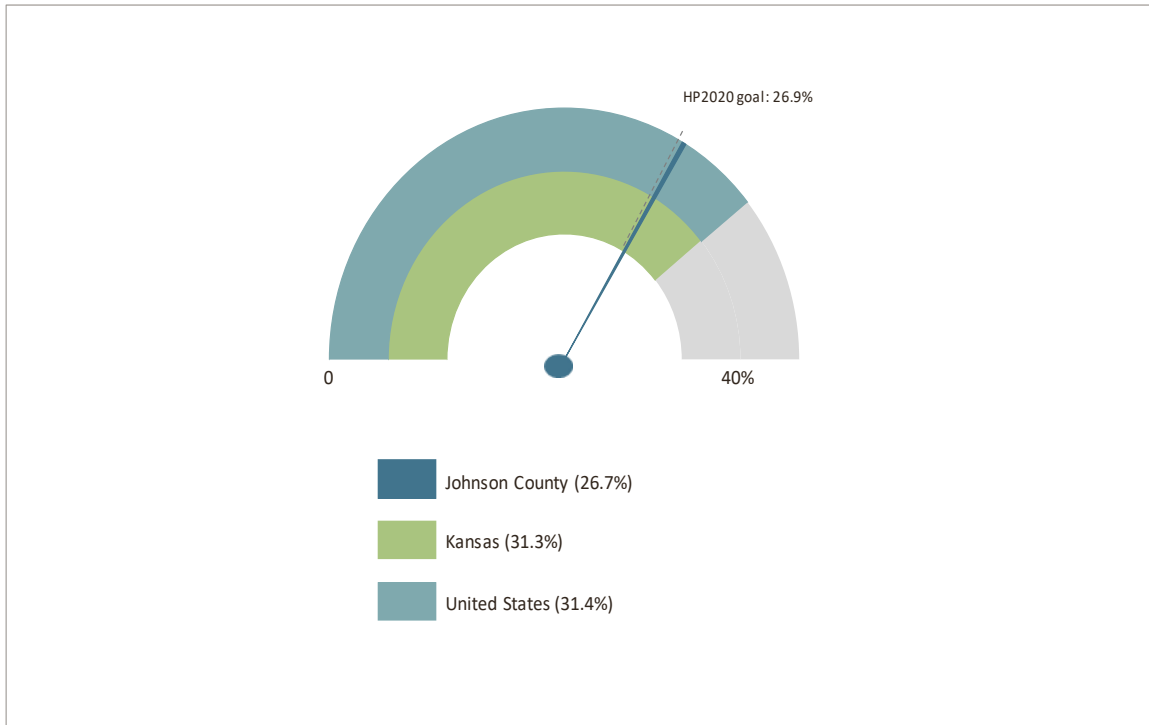
Percentage of Obesity in Johnson County:



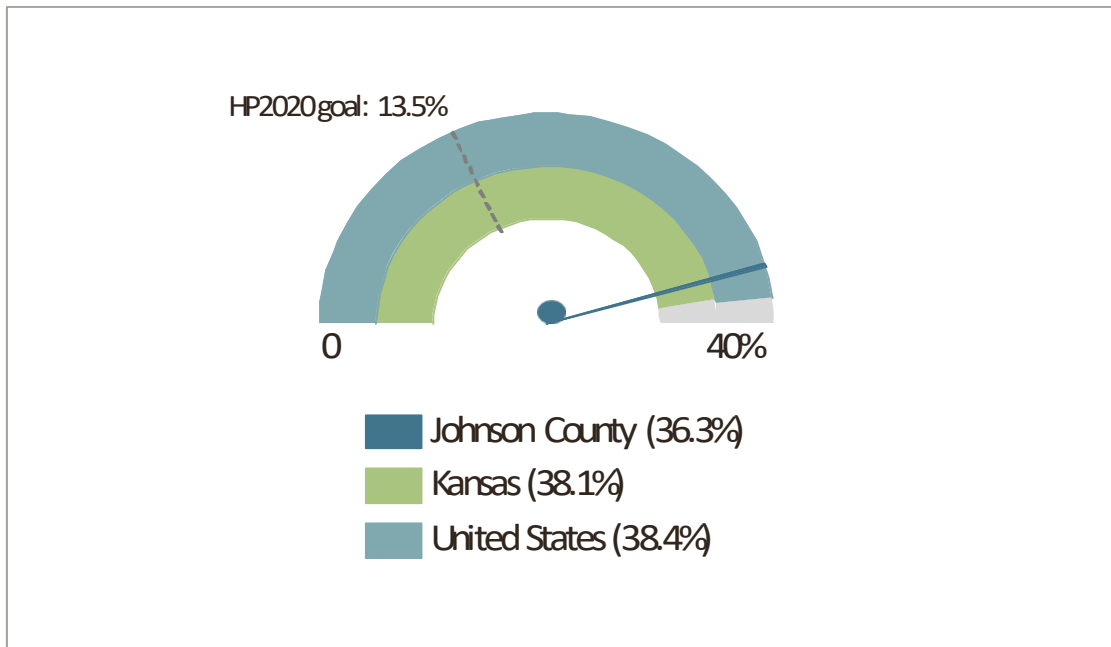
Over 26 percent of the adult population has been diagnosed with hypertension (high blood pressure) which meets the Healthy People 2020 goal of 26.9 percent, however; 36.3 percent have been diagnosed with high cholesterol, which is higher than the Healthy People 2020 goal of 13.5 percent.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, Kansas Health Matters

Percentage of the Population that has been Diagnosed with Hypertension.



Percentage of the Population that has been Diagnosed with High Cholesterol

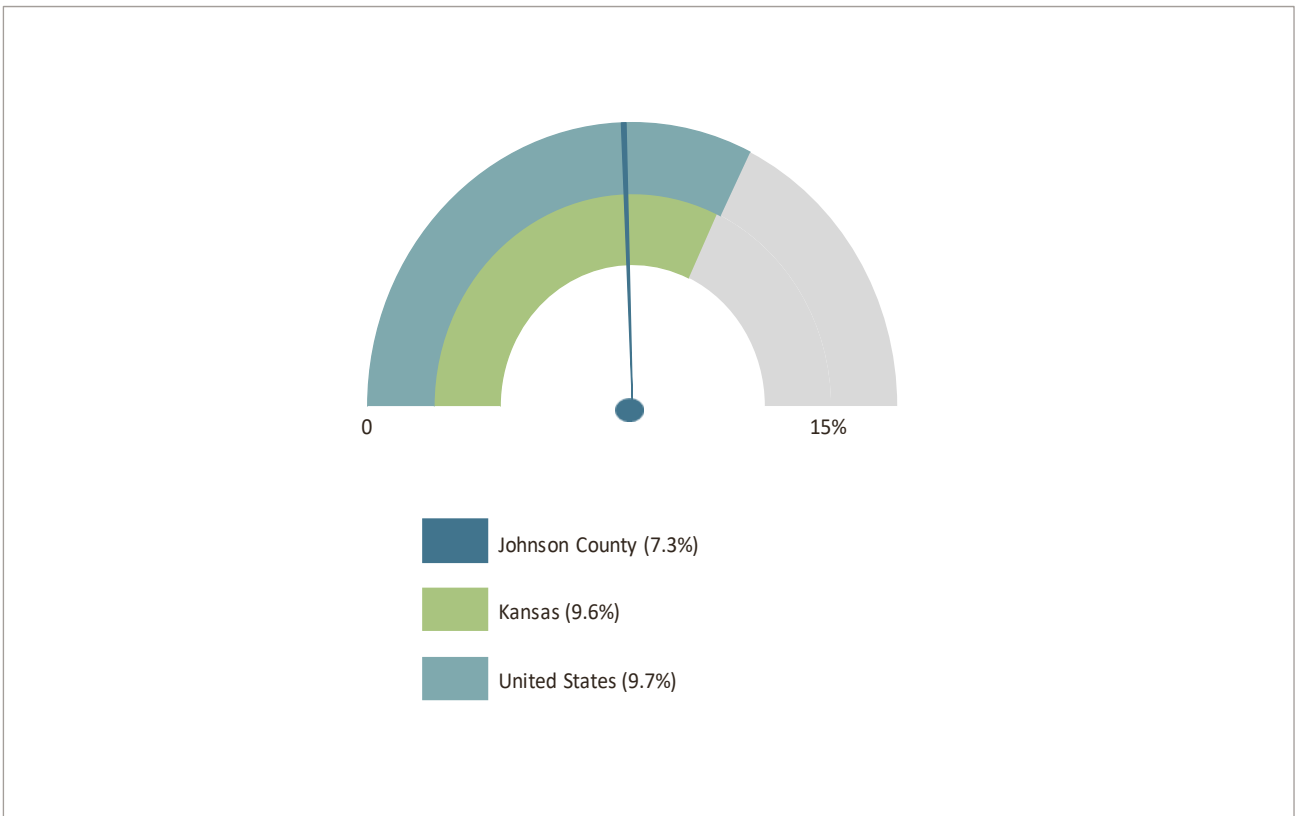


In Johnson County, 7.3 percent of the adult population has been diagnosed with diabetes. Two in five Kansas adults were at risk for developing diabetes.

An additional 10.5 percent of the population report having been diagnosed by a health professional as pre-diabetic. Nine out of ten adults in the United States who have pre-diabetes are not aware that they are pre-diabetic.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, Johnson County Community Health Assessment 2015, Kansas Health Matters

Percentage of the Population that have been Diagnosed with Diabetes.

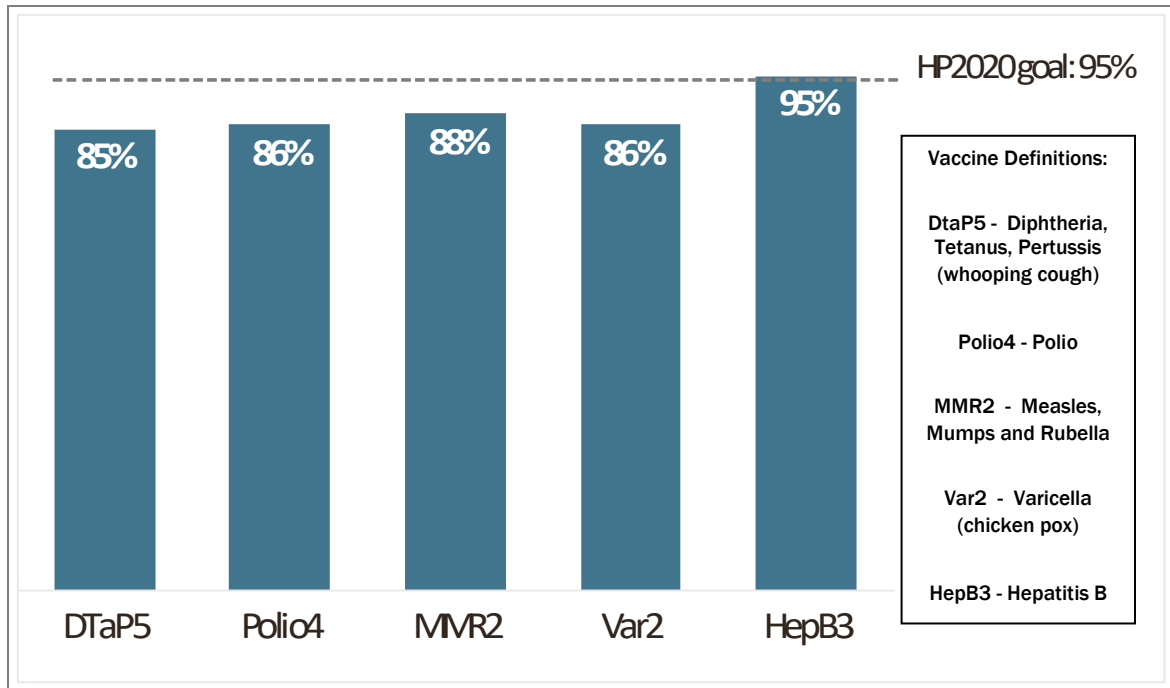


The percentage of children receiving immunizations when they enter kindergarten was 85%; the Healthy People 2020 overall immunizations goal is 95%.

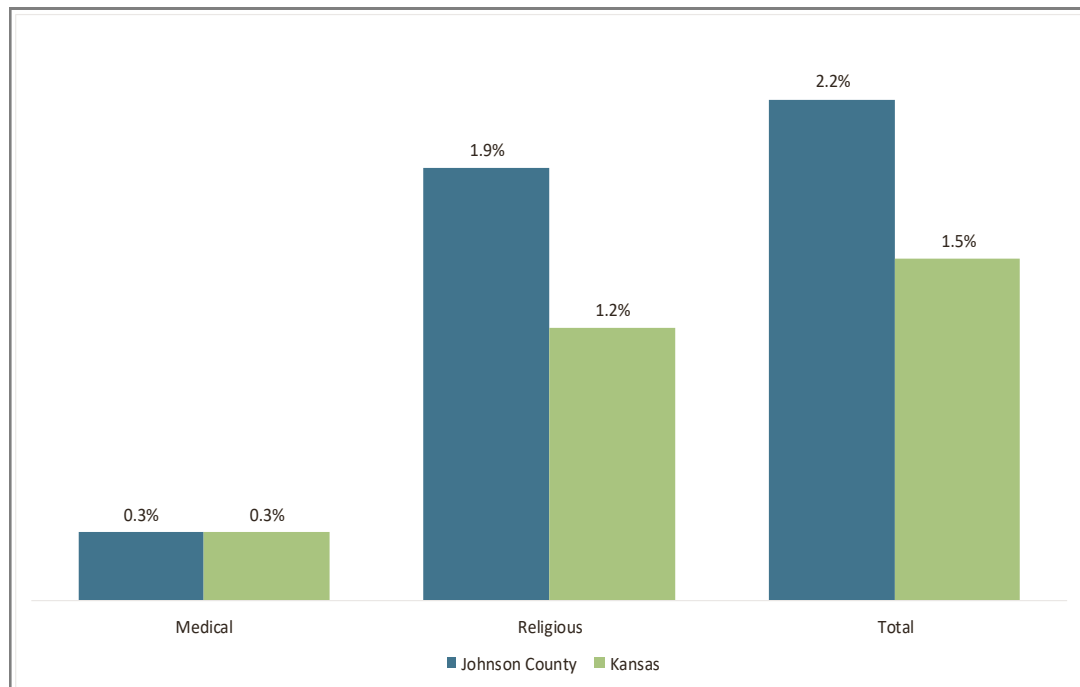
A total of 2.2% of Johnson County kindergarteners were exempt from receiving immunizations due to medical or religious reasons.

Source: Kansas Department of Health and Environment Immunization Assessment Survey, 2014-2015

Percentage of Immunizations:



Percentage of Kindergarteners that are Exempt from Immunizations:

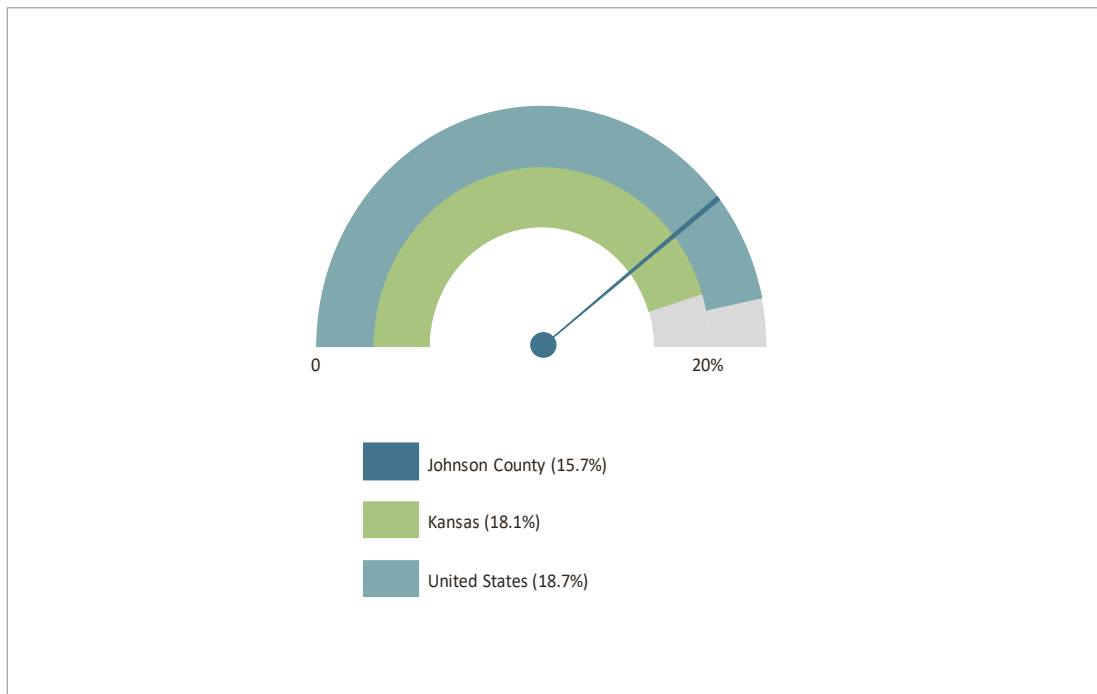


The percentage of adults who were ever diagnosed with a depressive disorder was 15.7 percent. Fifteen percent of individuals also reported that they were always/usually worried about paying their monthly bills.

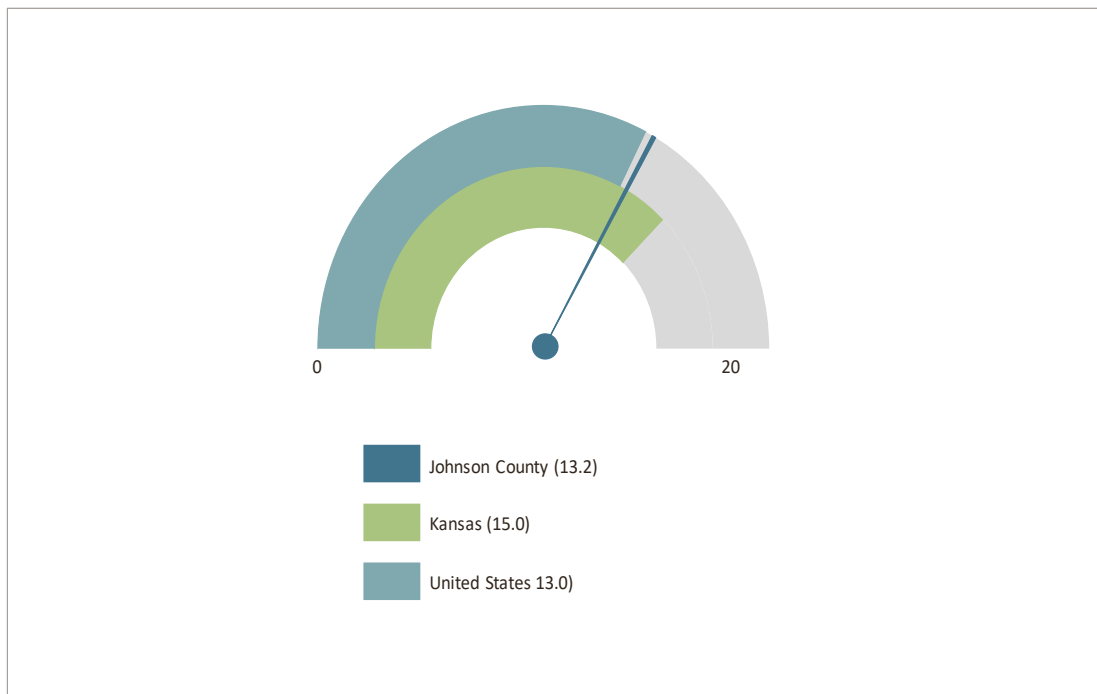
The age-adjusted suicide rate for Johnson County was 13.2 per 100,000 population.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, Community Health Assessment Survey 2015, Kansas Department of Health and Environment 2013-2015

Johnson County Adults Diagnosed with a Depressive Disorder:



Suicide Rate:

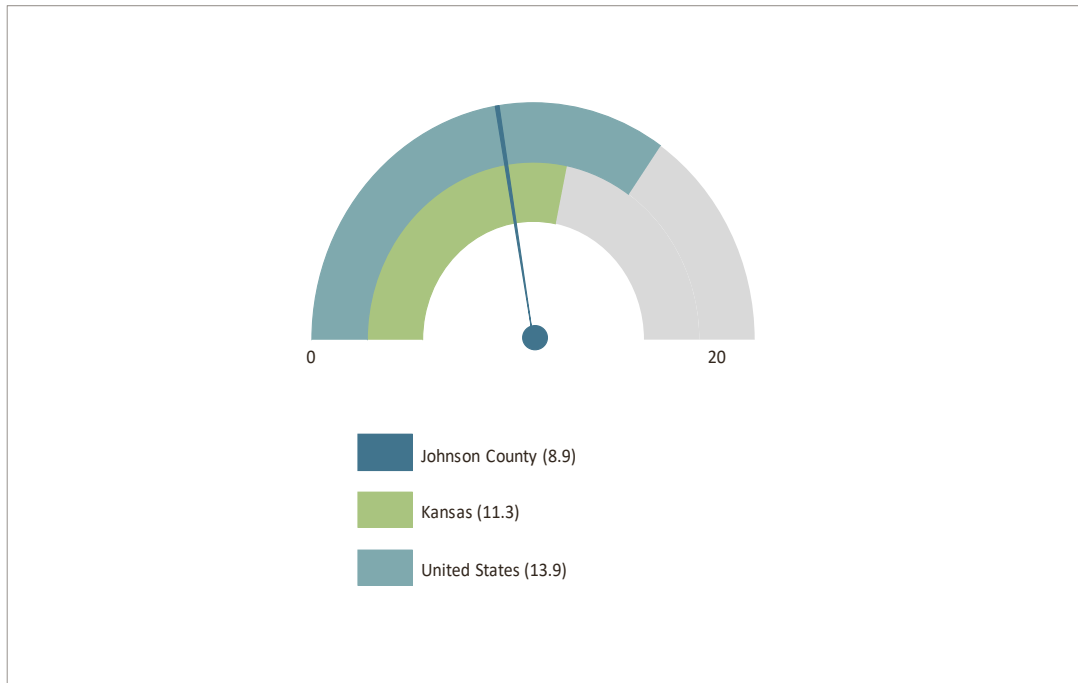


The rate of death due to drug poisoning (overdoses) was 8.9 per 100,000 population, much lower than the state of Kansas (11.3) and the United States. (13.9).

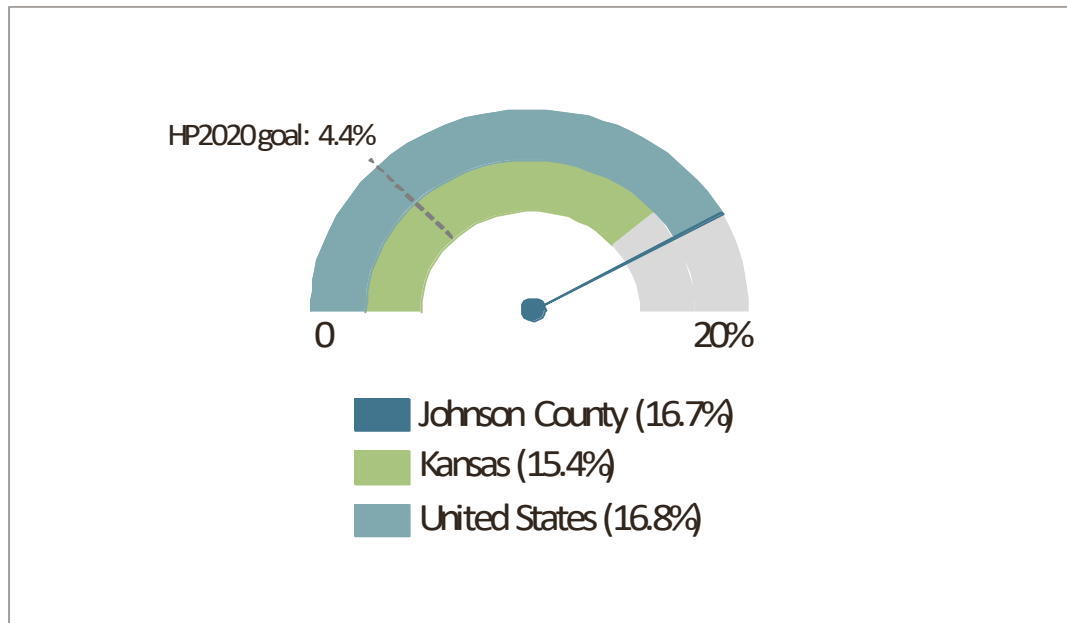
Over 16 percent of adults in Johnson County reported binge drinking, which was close to the state of Kansas and the United States rates. The Healthy People 2020 goal is slightly over 4 percent.

Source: County Health Rankings, 2012-2014, Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System, 2013

Drug Poisoning Death Rate:



Percentage of Adults who Binge Drink:



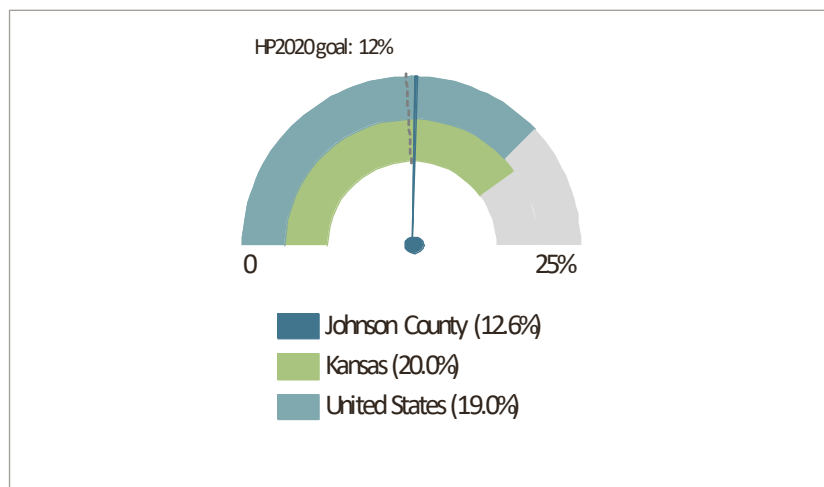
In Johnson County, 12.6 percent of adults smoked cigarettes. Among those who smoke, 55.7 percent reported stopping for one day or longer because they were trying to quit. Although the Johnson County percentage falls in line with the Healthy People 2020 goal of 12 percent, among certain targeted populations, the rate is much higher.

Of adults who smoke, 28.1 percent have been diagnosed with a depressive disorder, 21.2 percent are uninsured, 19.8 percent have a high school education or less, 19.4 percent earn less than \$35,000 per year and 16.5 percent are living with a disability.

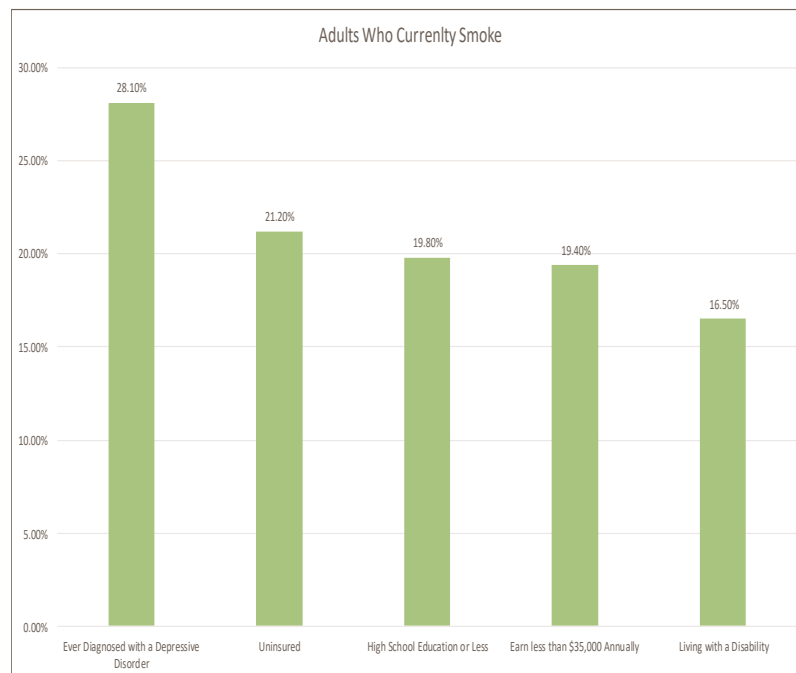
According to the Johnson County Community Health Assessment, three percent of adults reported that they currently smoke e-cigarettes.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, Johnson County Community Health Assessment 2015

Percentage of Adults Who Currently Smoke Cigarettes:



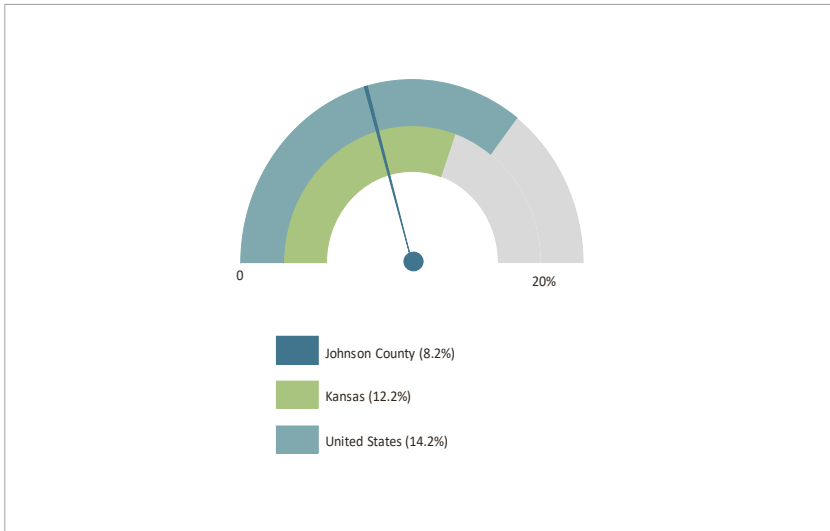
Characteristics of Adults Who Currently Smoke Cigarettes:



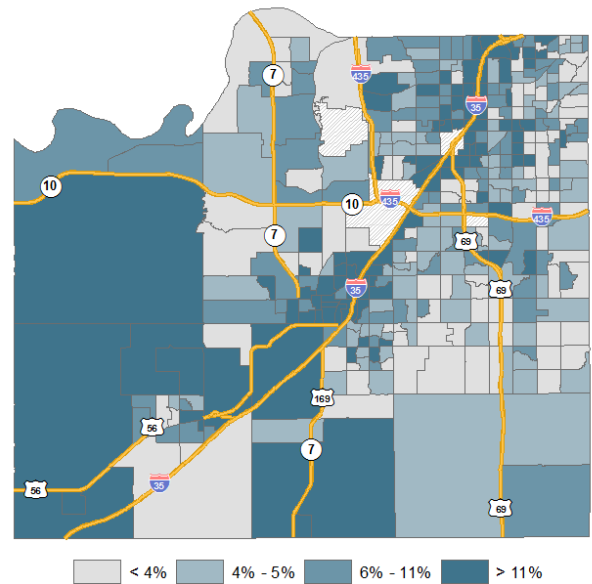
Over eight percent of the Johnson County population reported that they lack health insurance.

Source: American Community Survey 2010-2014

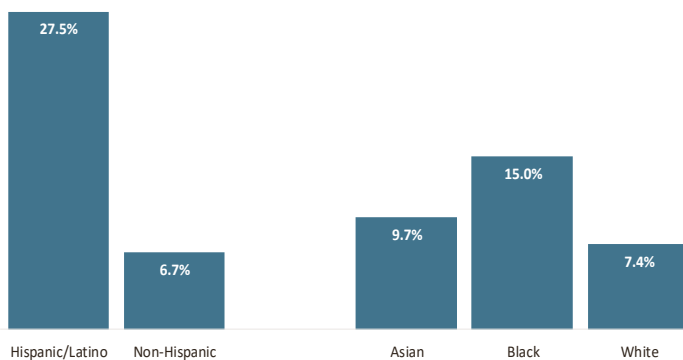
Percentage of Individuals who are Uninsured:



Geographic Distribution of Individuals who are Uninsured:



Ethnic/Racial Breakdown of Individuals who are Uninsured:

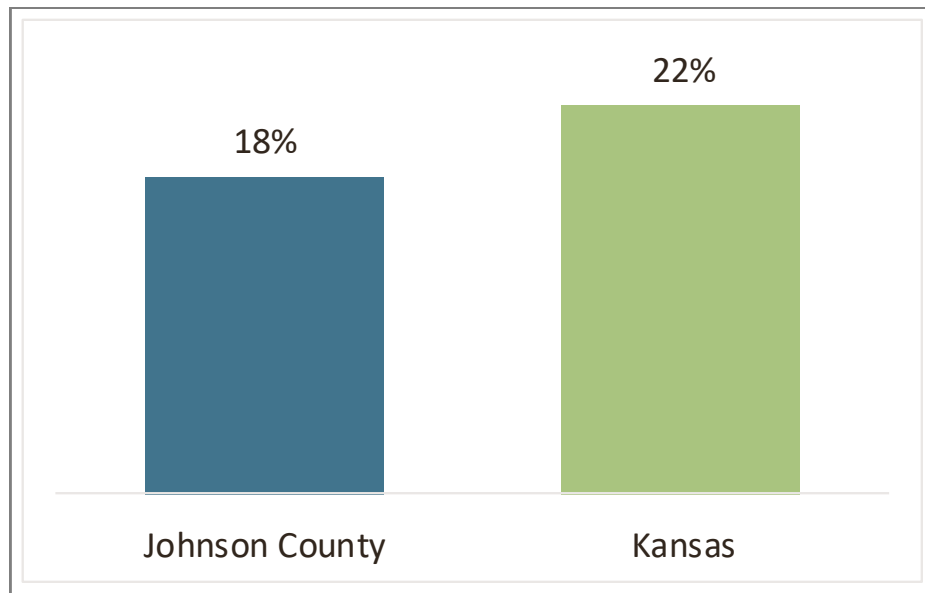


Eighteen percent of individuals in Johnson County reported that they do not have a personal doctor or healthcare provider.

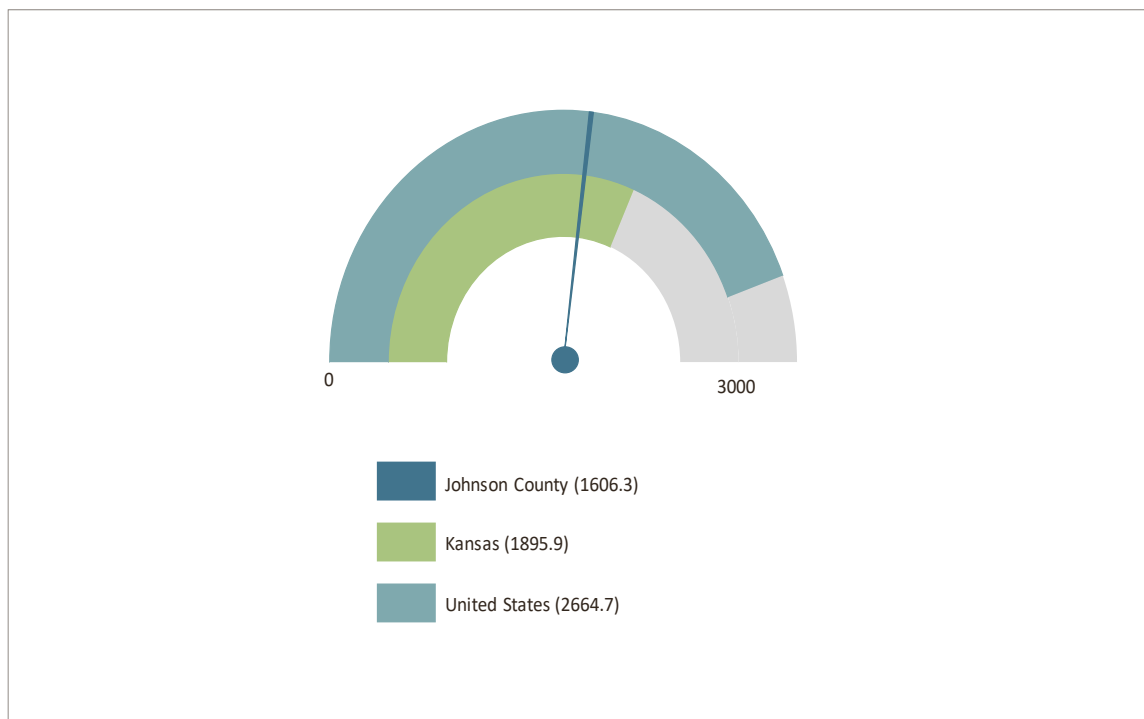
The ratio of the population to primary care physicians was one primary care physician for every 1,603 individuals in Johnson County, which exceeds those of the State of Kansas and the United States.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, Kansas Department of Health and Environment 2014

Percentage of Adults who do not have a Personal Doctor or Healthcare Provider:



Ratio of Population to Primary Care Physicians:

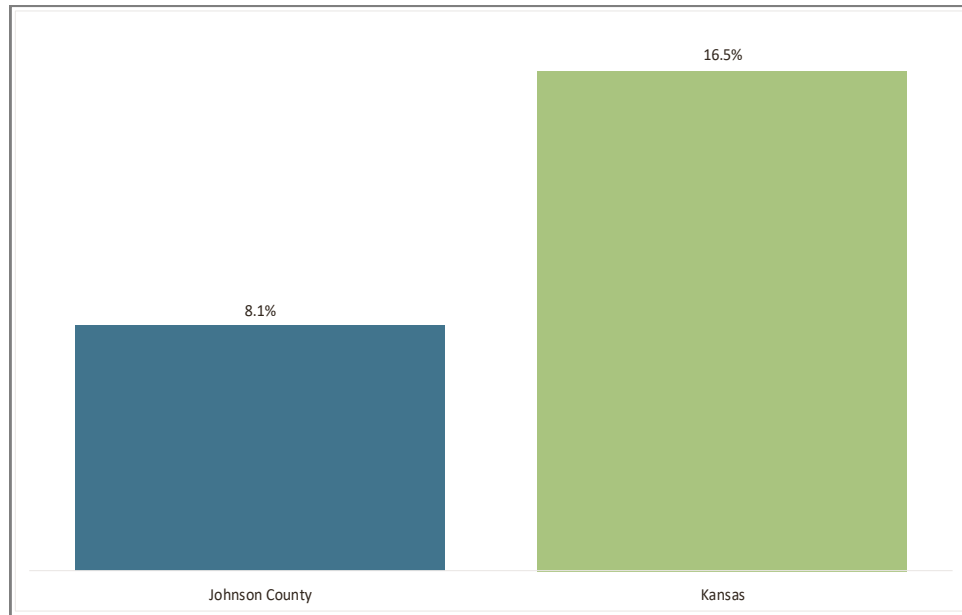


Slightly more than 8 percent of Johnson County (Kindergarten–12) students who participated in dental screenings had obvious dental decay.

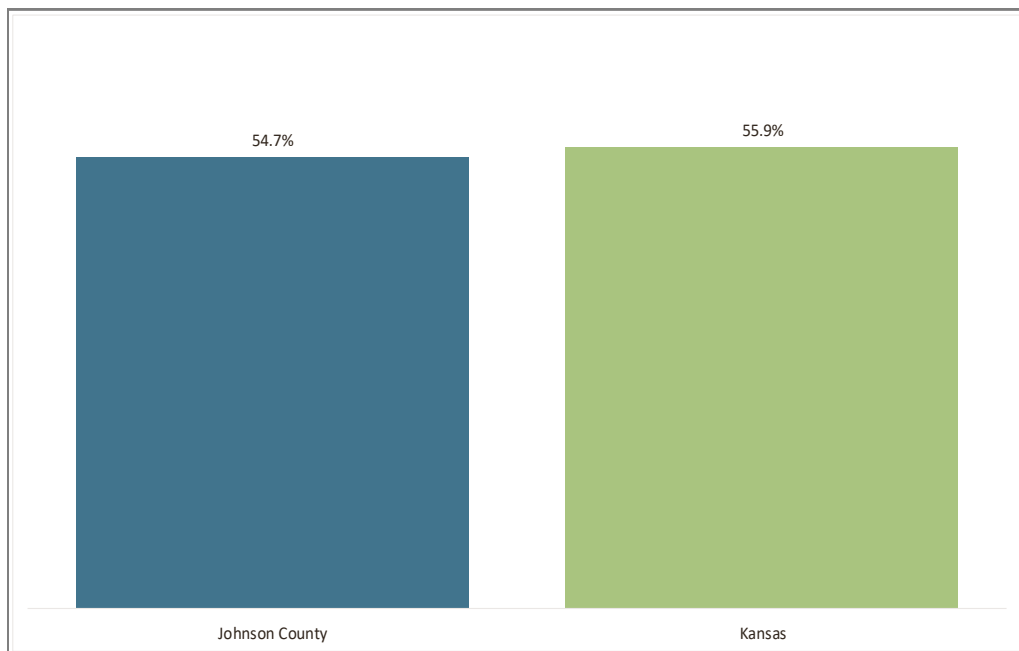
Close to 55 percent of students in grades 3-12 who participated in dental screenings had no dental sealants.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, Kansas Department of Health and Environment 2014

Percentage of Students with Obvious Dental Decay



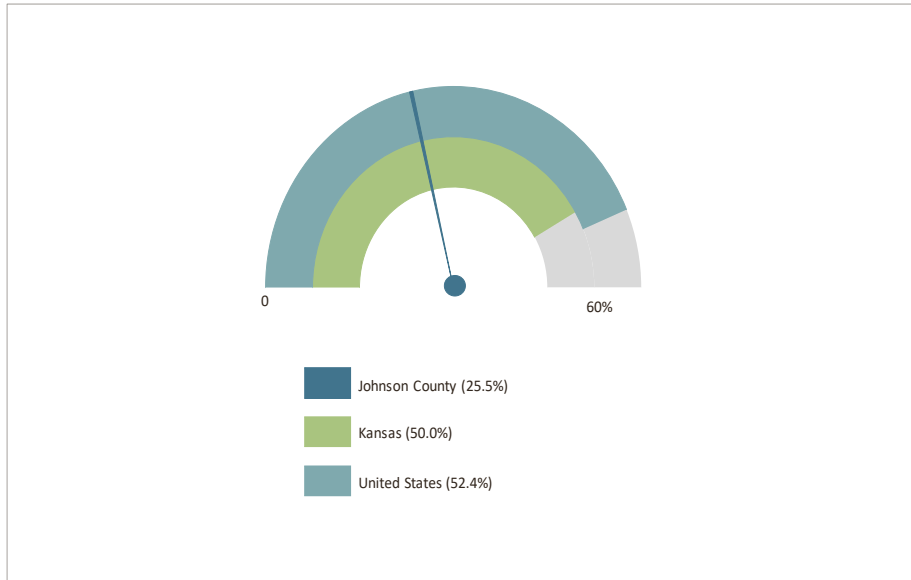
Percentage of Students Grades 3-12 with no Dental Sealants



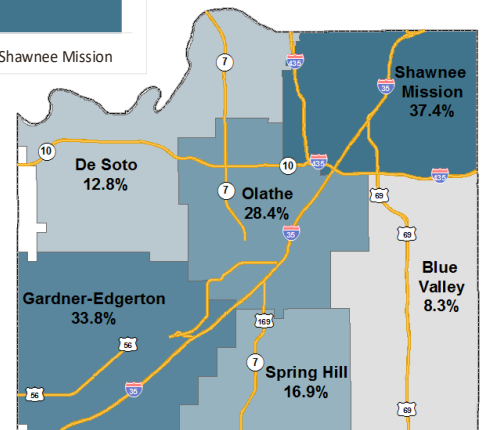
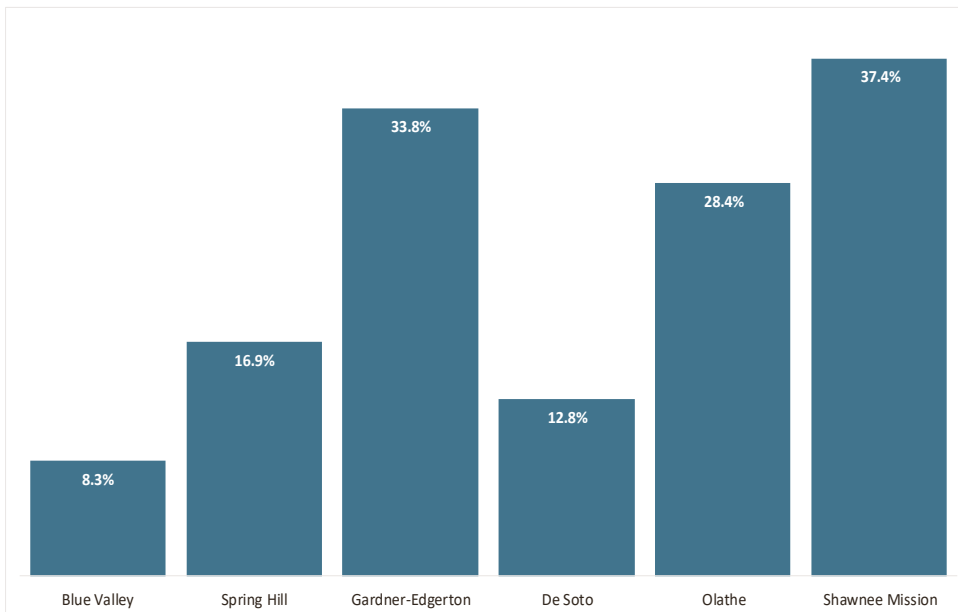
The percentage of students who receive free or reduced cost lunch through the school systems was 25.5%, lower than the percentages in the state of Kansas and the United States.

Source: Kansas Department of Education 2015-2016, NCES Common Core of Data, 2013-2014

Percentage of Students Receiving Free/Reduced Cost Lunch:



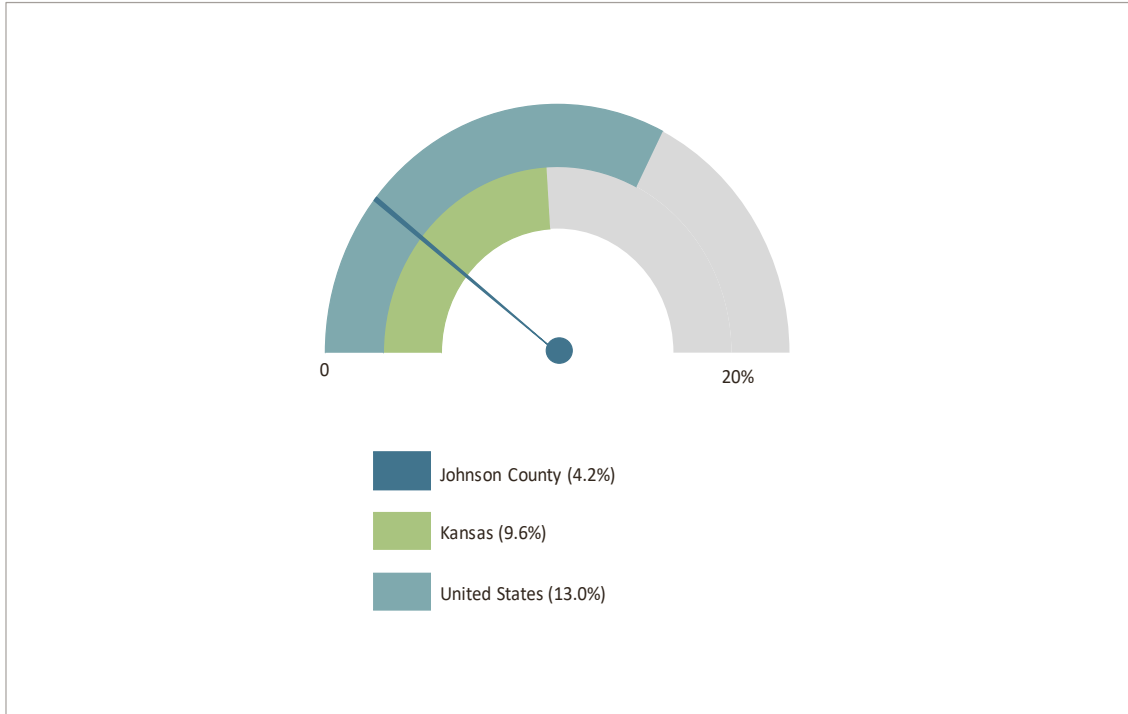
Free/Reduced Cost Lunch by School District:



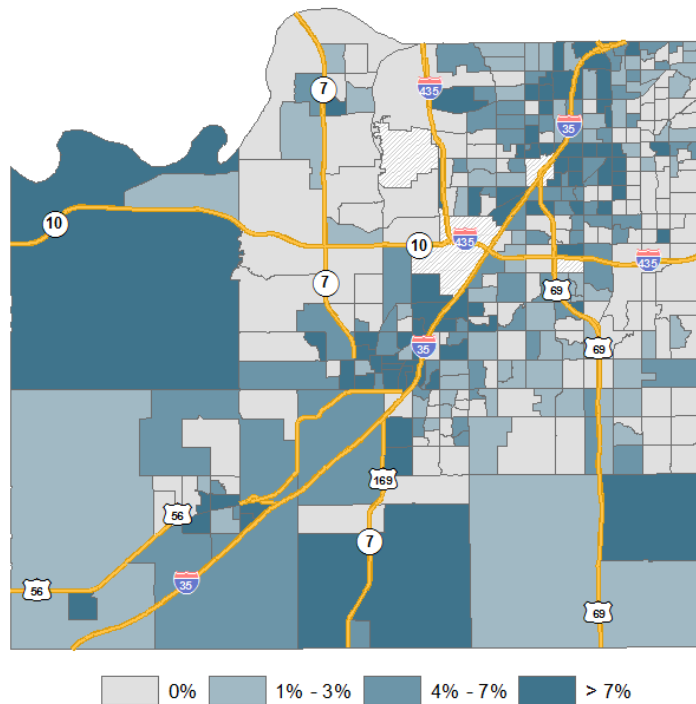
Slightly over 4 percent of individuals received Supplemental Nutrition Assistance Program (SNAP) benefits in Johnson County.

Source: American Community Survey 2010-2014

Percentage of SNAP recipients:

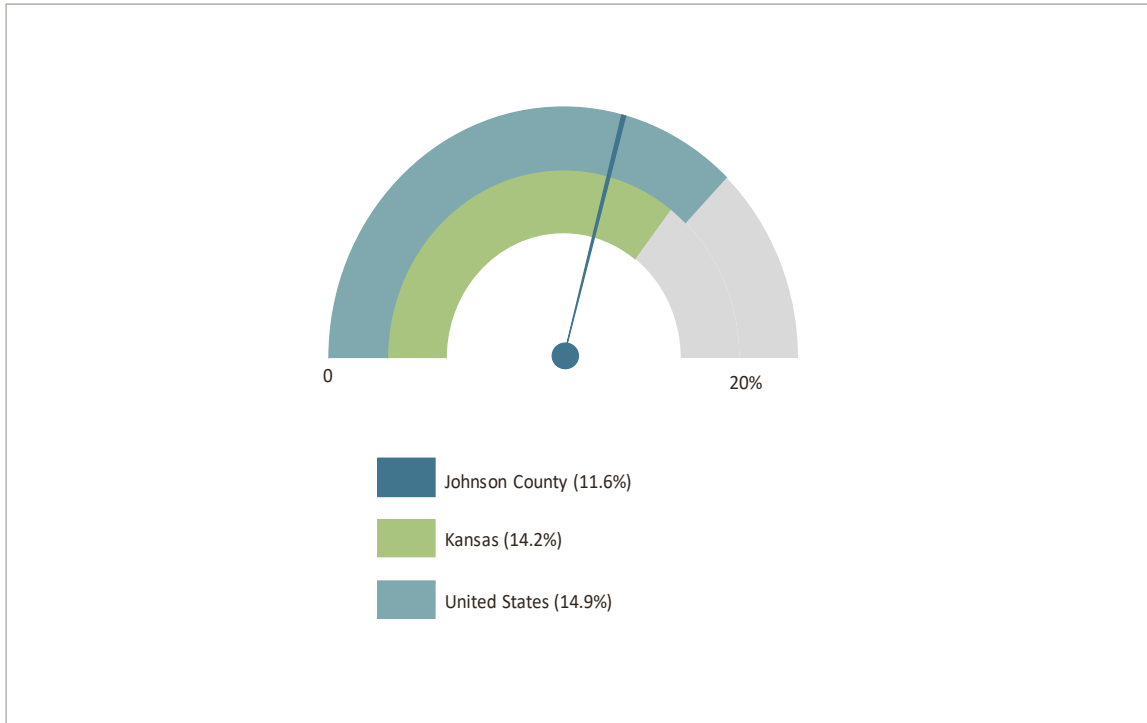


Geographic Distribution of SNAP recipients:



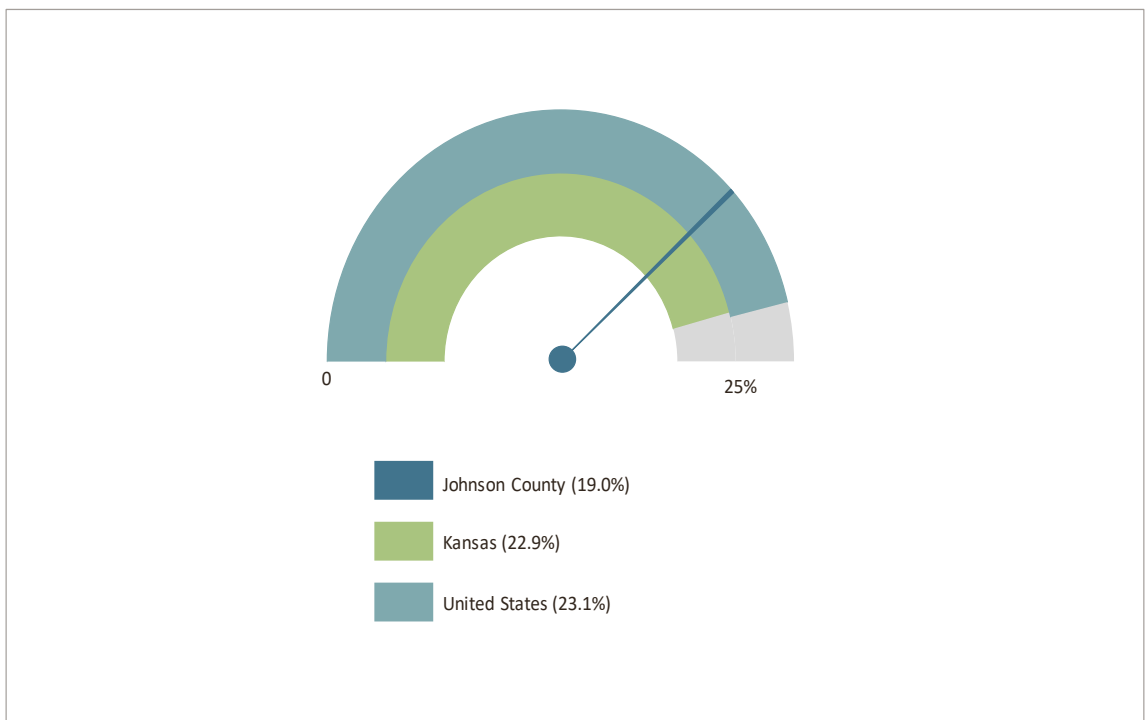
Over 11 percent of the population reported that they were experiencing food insecurity or lack of access to adequate, nutritious food.

Source: Feeding America 2014



Nineteen percent of adults reported consuming vegetables less than one time per day.

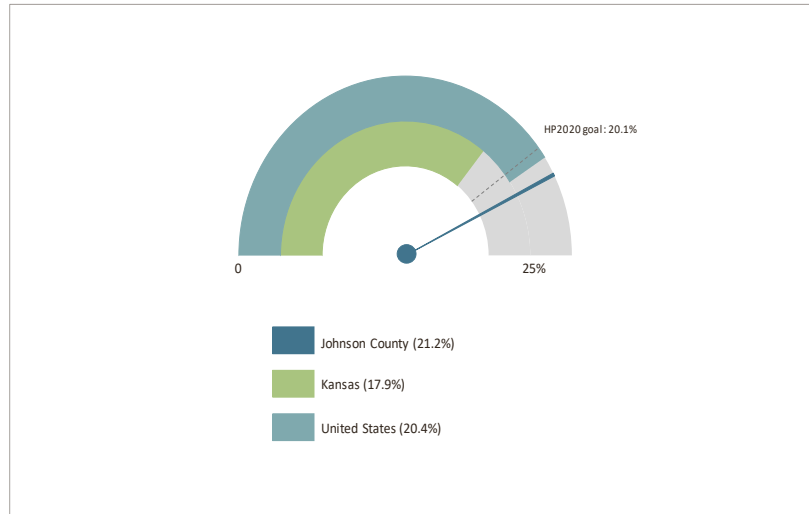
Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, Kansas Health Matters



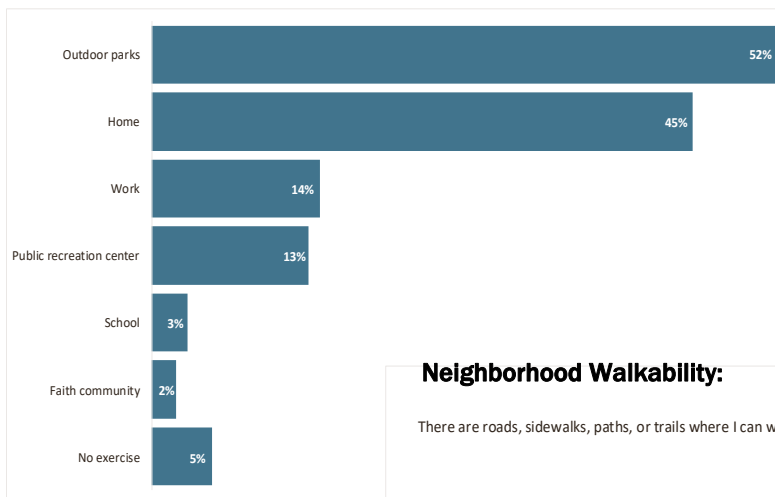
More than 21 percent of adults in Johnson County reported doing enough physical activity to meet both the aerobic and strengthening exercise recommendations. People exercised most at outdoor parks or at home. Most people reported having access to neighborhood outdoor places to exercise available to them.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, American Community Survey 2010-2014, Johnson County Community Health Assessment 2015.

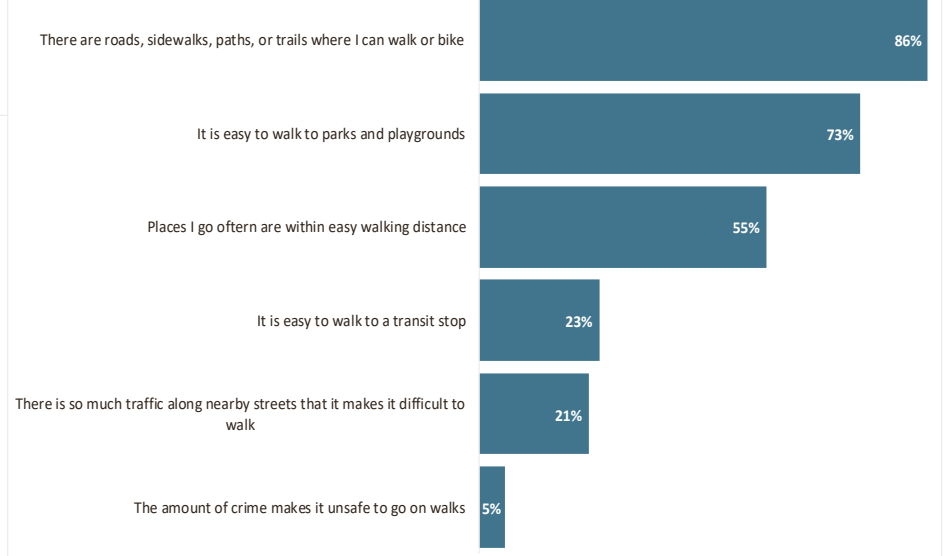
Percentage of Adults Meeting Exercise and Strengthening Recommendations:



Where People Exercise:



Neighborhood Walkability:

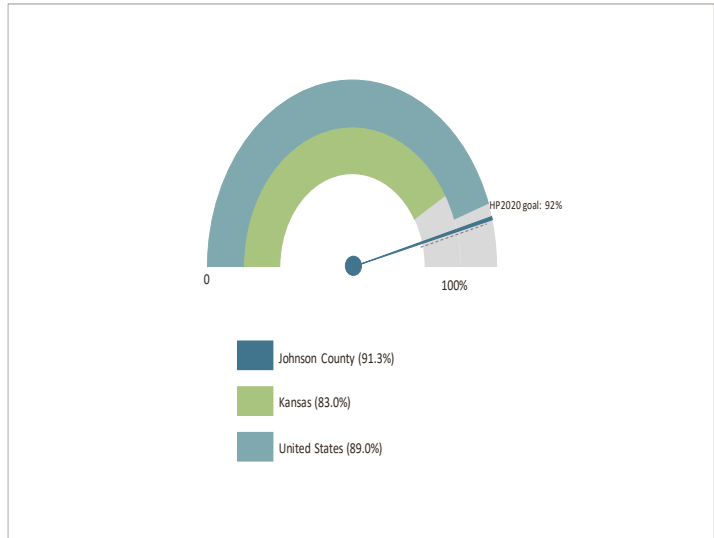


The percentage of individuals who reported that they always wear a seatbelt when they drive or ride in a car was 91.3 percent, almost meeting the Healthy People 2020 goal of 92 percent. In Johnson County, 85 percent of drivers reported that they drive alone to work.

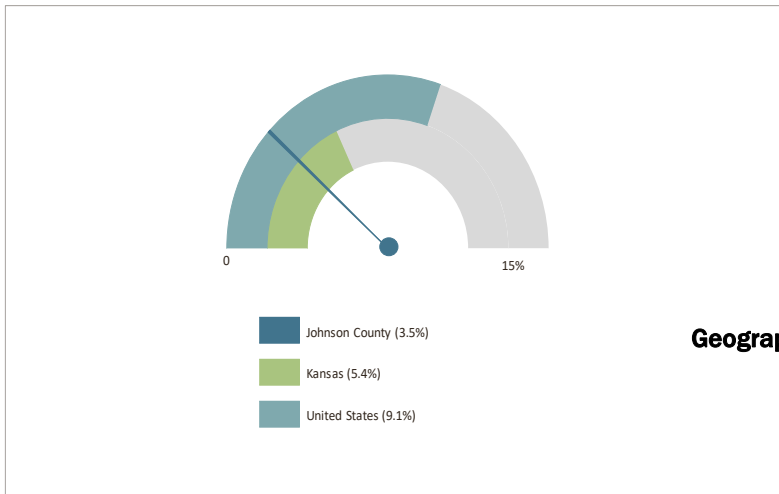
Nearly 4 percent of the households in Johnson County reported that they have no motor vehicle.

Source: Kansas Department of Health and Environment Behavioral Risk Factor Surveillance System 2013, American Community Survey 2010-2014

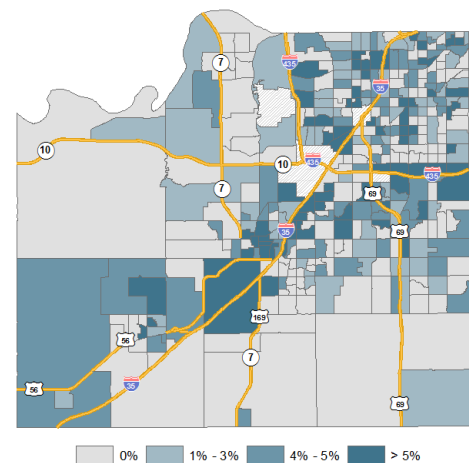
Seatbelt Usage in Johnson County:



Percentage of Households that do not have a Vehicle:



Geographic Distribution of no Vehicle Households

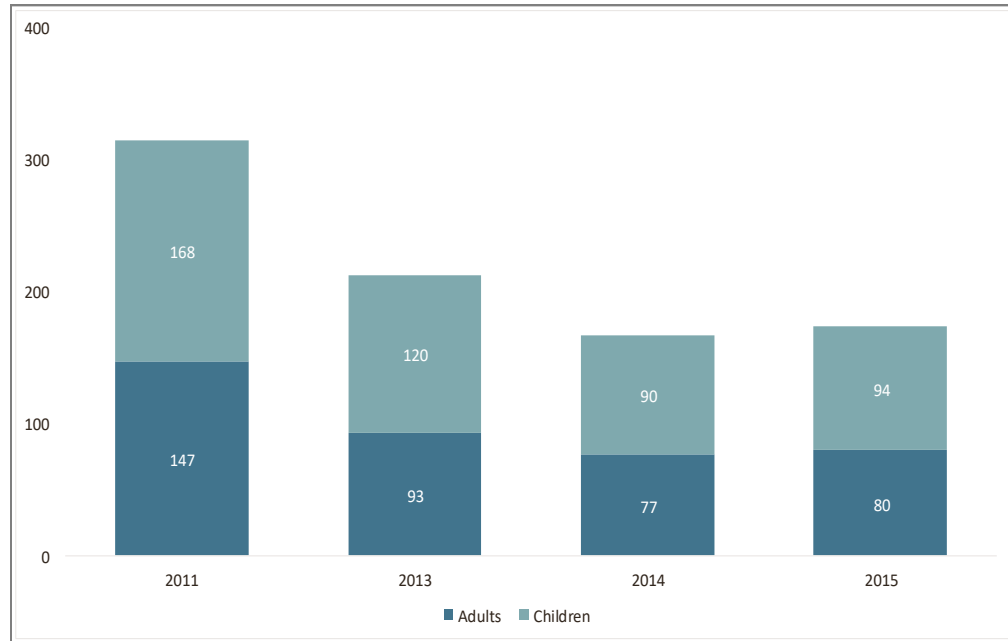


In Johnson County, 31 out of 100,000 people were homeless (either emergency shelter, transitional housing, or unsheltered). The median age of people who were homeless was 15. Seven out of ten households who experienced homelessness in Johnson County contain children. After trending downward since 2011, the number of homeless adults and children rose slightly in 2015.

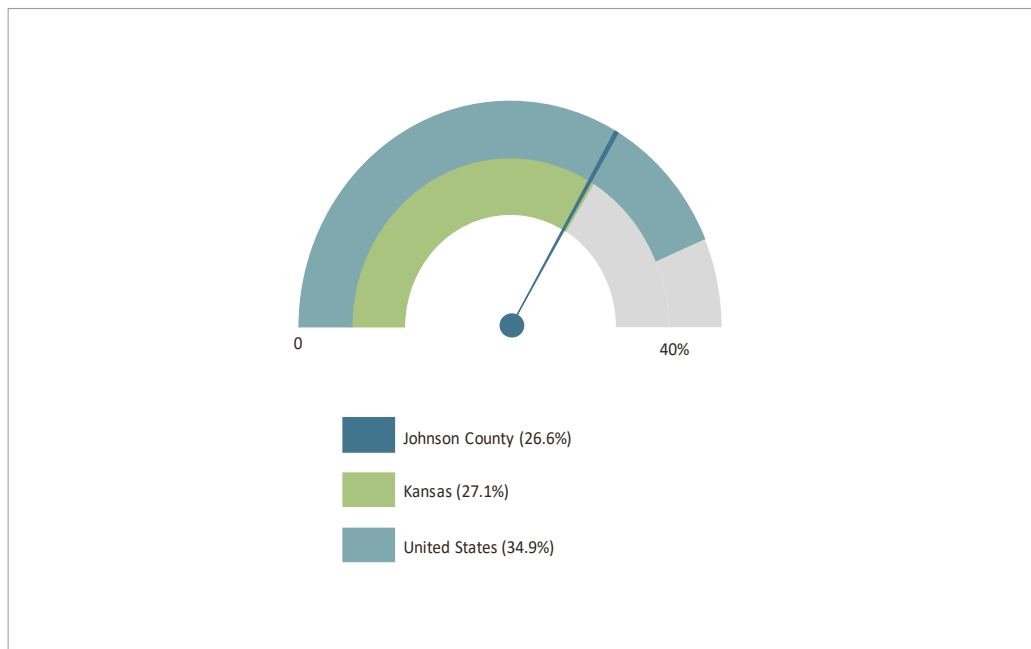
Nearly 27 percent of households in Johnson County reported that housing costs exceed 30 percent of their income.

Source: United Community Services of Johnson County 2015, Point-in-Time Count 2011-2015, American Community Survey, 2010-2014

Homelessness in Johnson County 2011-2015



Housing Costs Exceeding 30% of Income:



Community assets or resources are those things that can be used to improve quality of life of the population in a geographic area. Community assets include organizations, people, partnerships, facilities, funding, policies, regulations, and a community's collective experience. Health issues are best addressed using existing resources and community strengths. Johnson County is fortunate to be able to offer its residents a large number of varied services, assets and resources.

Chronic Health Conditions:

- American Cancer Society <http://www.cancer.org>
- American Heart Association <http://www.heart.org/HEARTORG/#>
- American Lung Association <http://www.lung.org/>
- American Diabetes Association: <http://www.diabetes.org/>
- Asthma and Allergy Foundation: <http://www.aafa.org/>
- Sickle Cell Disease Association: <http://www.sicklecelldisease.org/>

Physical Activity:

- Johnson County Parks and Recreation Department <http://www.jocogov.org/dept/park-and-recreation/home/>
- Blue Valley Recreation <http://www.bluevalleyrec.org/>
- Matt Ross Community Center and Tomahawk Ridge Community Center www.opkansas.org/
- Olathe Community Center <http://www.olatheks.org/ParksRec/OlatheCommunityCenter/>
- Sylvester Powell Jr. Community Center <http://www.missionks.org/pview.aspx?id=16302&catid=0/>
- Jewish Community Center of Greater Kansas City <http://thejkc.org/>
- DeSoto Parks and Recreation <http://www.desotoks.us/parks-and-recreation.html/>
- Edgerton Parks and Recreation <http://www.edgertonparks.org/>
- Fairway Parks and Recreation <http://www.fairwaykansas.org/>
- Gardner Parks and Recreation <http://www.gardnerkansas.gov/government/departments-and-divisions/parks-and-recreation/>
- Leawood Parks and Recreation <https://www.leawood.org/parks/>
- Lenexa Parks and Recreation <http://www.lenexa.com/parks/index.html/>
- Merriam Parks and Recreation <http://www.merriam.org/index.aspx?nid=104/>
- Olathe Parks and Recreation <http://www.olatheks.org/parksrec/>
- Overland Park Parks and Recreation <http://www.opkansas.org/city-government/department-directory/parks-and-recreation/>
- Prairie Village Parks and Recreation <http://pvkansas.com/city-government/departments/parks-recreation/>
- Roeland Park Community Center <http://www.roelandpark.net//?s=community+center/>
- Shawnee Parks and Recreation <http://www.cityofshawnee.org/>
- Private Fitness Clubs and Gymnasiums

Nutrition:**Urban Farming**

- <http://www.cultivatekc.org/>
- <http://urbanfarmstourkc.com/>
- http://www.marc.org/environment/Energy/Green_Practices_Guide/Zoning/urban_ag.htm/ Provides a list of local policies about urban agriculture

Farmers' Markets

- Blue Valley Recreation Farmers' Market: <http://www.bluevalleyrec.org/page/market.php/>
- Gardner Farmers' Market: www.gardnerfarmersmarket.com/
- Merriam Marketplace: <http://www.merriam.org/park/Marketplace/>
- Shawnee Farmers' Market:
<http://www.cityofshawnee.org/WEB/ShawneeCMS.nsf/vwContent/FarmersMarket/>
- Olathe Farmers' Market: <http://www.olatheks.org/ParksRec/Farmers/>
- Overland Park Farmer's Market: http://www.downtownop.org/farmers_market.html/
- Spring Hill Farmers' Market: <http://springhillmarket.org/>

Cooking & Culinary Arts

- The Culinary Center of Kansas City: <http://www.kcculinary.com/>
- Whole Foods Market–The Cooking Studio: <http://wholefoodsmarket.com/stores/metcalfe/cooking-classes-2/>
- Cookbooks and classes from the Johnson County Library: <http://www.jocolibrary.org/>
- K-State Extension Office: <http://www.johnson.ksu.edu/>

Obesity:

- Weighing In: <http://www.childrensmarcy.org/content/view.aspx?id=6557/>
- Healthy Families Program Powered by Blue KC: <http://www.kansascityymca.org/about-y/news/healthy-families-program-powered-blue-kc/>
- Kansas City Chiefs Sports Lab Powered by Blue KC:
<http://www.kcchiefs.com/community/sportslab.html/>

Dental:

- JCCC Dental Hygiene Clinic: <http://www.jccc.edu/community-resources/dental-hygiene-clinic.html/>
- University of Missouri-Kansas City School of Dentistry: <http://dentistry.umkc.edu/index.shtml>
- Health Partnership Clinic: <http://www.hpcjc.org/new-index-1/#dental-1>

Access to Healthcare:

- The Health Resource Guide: http://www.kchealthresource.org/assets/healthresourceguide_eng.pdf/
- Johnson County Community College Dental Hygiene Clinic: <http://www.jccc.edu/dentalhygiene/>
- Health Partnership Clinic www.hpcjc.org/
- Mercy & Truth Medical Missions www.mercyandtruth.com/
- WyJo Care – Medical Society of Johnson and Wyandotte Counties
<http://www.msjwc.org/care.html/>
- Johnson County Department of Health and Environment: <http://www.jocogov.org/dept/health-and-environment/home/>
- JayDoc Free Clinic: <http://jaydocfreeclinic.org/>

Prescription Assistance:

- Partnership for Prescription Assistance: <https://www.pparx.org/>
- Patient Access Network Foundation: <https://panfoundation.org/index.php/en/patients/how-to-apply/>
- Turning Point: The Center for Hope and Healing: <http://www.turningpointkc.org/>

General Services, Support, Referral:

- Office of Vital Statistics- Birth, death, marriage & divorce records–vital records: http://www.kdheks.gov/vital/about_ovs.html
- Catholic Charities of Northeast Kansas: <https://www.catholiccharitiesks.org/>
- Center of Grace: <http://gracech.org/center-grace/>
- Child Support Enforcement (KS): <http://www.dcf.ks.gov/services/CSS/Pages/default.aspx/>
- The Family Conservancy: <http://www.thefamilyconservancy.org/>
- Johnson County Department of Health and Environment: <http://www.jocogov.org/dept/health-and-environment/home/>
- Legal Aid: <http://www.kansaslegalservices.org/>
- Social and Rehabilitation Services (SRS): <http://www.dcf.ks.gov/DCFContacts/Pages/default.aspx/>
- Social Security Office: <https://www.ssa.gov/>
- Kids TLC: <http://www.kidstlc.org/>
- Johnson County Library <https://www.jocolibrary.org/>
- Johnson County Human Services Department <http://www.jocogov.org/dept/human-services/home/>

Mental Health and Substance Abuse:

- Johnson County Mental Health Services: <http://www.jocogov.org/dept/mental-health/home/>
- Substance Abuse Treatment Facility Locator: <http://findtreatment.samhsa.gov/TreatmentLocator/faces/quickSearch.jspx/>
- Treatment Center directory <http://www.treatmentcentersdirectory.com/>
- Mental Health Association of the Heartland www.mhah.org/

Mental Health, Counseling, Addiction, Treatment:

- Alcoholics Anonymous: <http://www.kansas-aa.org/>
- Heartland Regional Alcohol and Drug Assessment Center (RADAC): <http://www.hradac.com/>
- KVC Health Systems: <https://kansas.kvc.org/>
- Narcotics Anonymous: <http://www.kansascityna.org/>
- Salvation Army SOS (Kansas Shield of Services): <http://salarmymokan.org>
- Solace House: <https://www.kchospice.org/solace-house/>
- Valley Hope Association (Overland Park): <https://valleyhope.org/>

Youth:

- House of Hope: <http://www.houseofhopekc.net/about-us/>
- Johnson County Community College-Youth Programs: <http://www.jccc.edu/>
- YMCA of Olathe: <http://www.kansascityymca.org/locations/olathe/>
- The Family Conservancy: <http://www.thefamilyconservancy.org/>

Disability/Developmental Delay:

- Autism Society of the Heartland: <http://www.asaheartland.org/>
- Communityworks: <http://communityworksinc.com/>
- Down Syndrome Guild: <https://www.kcdsg.org/>

Childcare/Head Start:

- Childcare Aware: <http://www.ks.childcareaware.org/>
- Growing Futures—Head Start of Shawnee Mission: <http://www.smks-headstart.org/>
- Mid-America Head Start: <http://marc.org/Community/Head-Start/>
- Parents as Teachers: <http://www.parentsasteachers.org/>
- Johnson County Department of Health and Environment, Child Care Licensing: <http://www.jocogov.org/dept/health-and-environment/health/child-care-licensing/overview>

Hotlines, Crisis Lines:

- AIDS information Line: 1-800-HIV-0440 (1-800-448-0440)
- Al-Anon and Alateen: 1-888-425-2666
- Child Abuse/Neglect Hotline: 1-800-392-3738
- Cocaine Help Line (Spanish Available): 1-866-822-0007
- Crisis Pregnancy Center: 816-887-5100
- Domestic Violence Hotline (National): 1-800-799-SAFE (1-800-799-7233)
- Domestic Violence Hotline (Synergy Services KS/MO): 816-45-8535
- Girls and Boys Town National Hotline: 1-800-448-3000
- Homeless Hotline: 816-474-4599
- National Runaway Switchboard: 1-800-RUNAWAY
- Poison Control: 1-800-222-1222
- Suicide Prevention Hotline: 1-800-273-TALK (1-800-273-8255)
- Teen Dating Abuse Hotline (Love & Respect): 1-866-331-9474
- Veronica's Voice: 816-483-7101 Crisis Line: 816-728-0004
- Youth America Hotline: 1-877-YOUTHLINE

WIC, Food Pantries, Utilities, School Supplies:

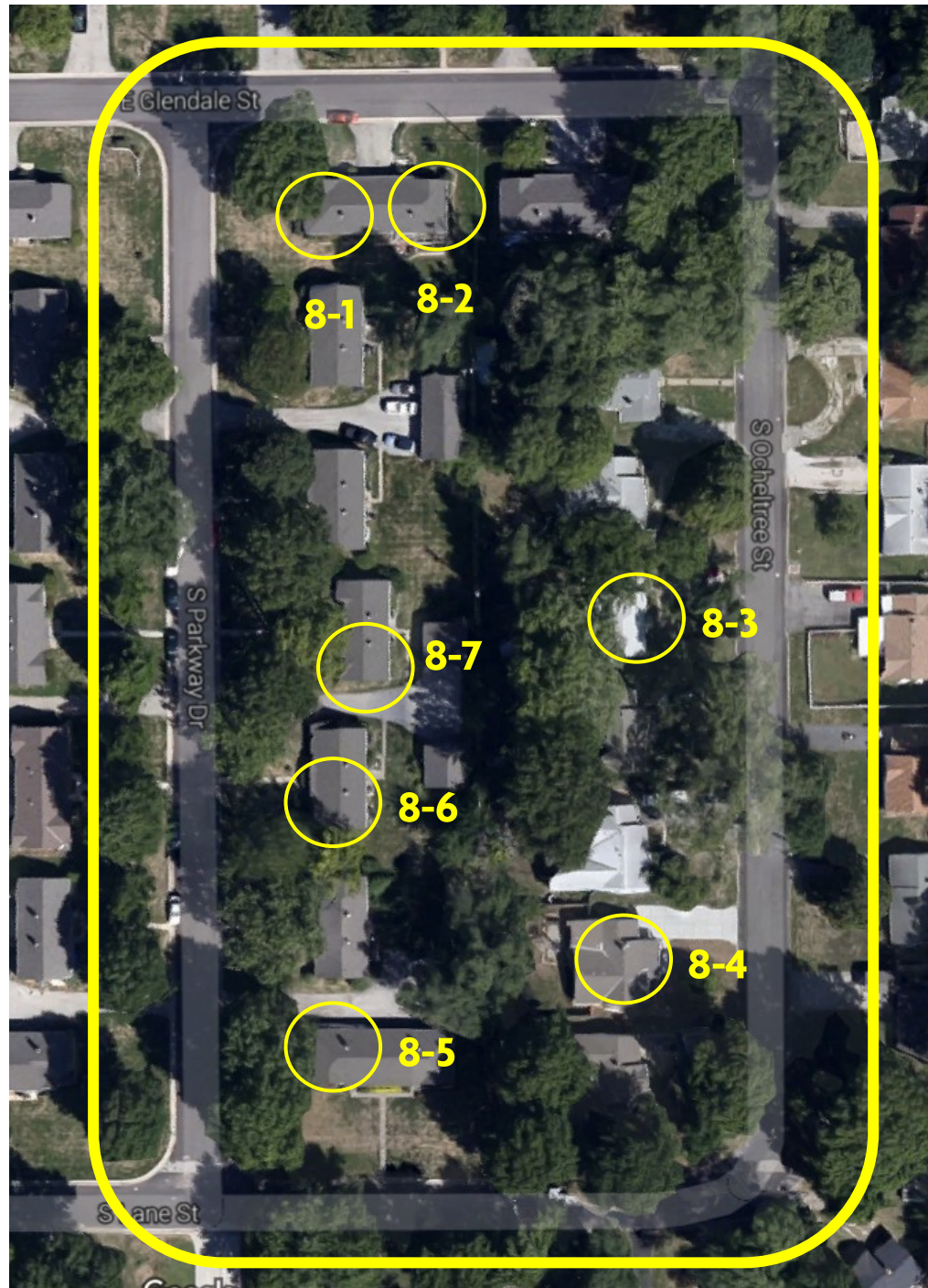
- El Centro: <http://www.elcentroinc.com/>
- Johnson County Human Services Department – Food Pantries <http://www.jocogov.org/dept/human-services/outreach/outreach-services/>
- New Hope Food Pantry: <http://www.nhfoodpantry.com/>
- Overland Park Christian Church: <http://www.opccdoc.org/>
- Overland Park Church of Christ: <http://opcofc.org/>
- Shawnee Community Services: <http://www.scsks.org/>
- St. Mark's United Methodist Church: <http://www.stmarksumc.info/>
- Village Presbyterian Church: <http://www.villagepres.org/>
- WIC: <http://www.fns.usda.gov/wic/women-infants-and-children-wic>

Shelters:

- Safe Home: <http://www.safehome-ks.org/>
- Salvation Army Johnson County Family Lodge: <http://salarmymokan.org/locations/olathe/>

Appendix A: Sample Survey Map

Sample Survey Map



Appendix B: Survey Questionnaire Tool



Hello, I am _____ and this is _____. We represent the Johnson County Department of Health and Environment. *(Show badges.)* We are conducting a community health assessment to learn more about the health and quality of life in Johnson County. The Department of Health and Environment and our community partners will use the results to address the major issues facing our community

We are very interested in including your opinions. The survey is completely voluntary, and it should take approximately 15 minutes to complete. Your answers will be completely confidential and the information you give us will not be linked to you in any way.

Are you willing to participate? Yes No

If Yes: Thank you. *(Begin survey)*

If No: Thank you for your time. *(Proceed to the next closest house and try again)*

Eligibility

We are only interviewing adults 18 and older. Are you 18 years old or older?

Yes No

(If no, ask if you can speak with someone who is 18 years or older. If no one is available, stop the survey here and thank the person for his or her time.)

Do you live in this household? Yes No

(If no, ask to speak with someone who does live there. If no one is available, stop the survey here and thank the person for his or her time.)

If there is anything that we ask or say that you do not understand, or you would like further explanation about any item, please **do not hesitate** to ask.

Appendix B: Survey Questionnaire Tool

1. Please look at this list of factors. (*Give the person a list of factors.*) What do you think are the three most important factors for a “Healthy Community?” These are factors which most improve the quality of life in a community. If there is a something that is not on this list, please let me know and I will write it in. If you would like, I can read these out loud as you think about them. (*Read health problems aloud if asked*) Select only three:

1.	Good place to raise children
2.	Good schools
3.	Affordable housing
4.	Good jobs that pay livable wages
5.	Healthy economy
6.	Access to continuing education opportunities
7.	Strong family life
8.	Low crime / safe neighborhoods
9.	Arts and cultural events
10.	Low level of child abuse
11.	Good race/ethnic relations
12.	Access to healthy and affordable food
13.	Healthy behaviors and lifestyles
14.	Access to health care (e.g., family doctor)
15.	Community preparedness for emergency situations
16.	Access to public transportation
17.	Clean environment
18.	Parks and recreation (e.g., parks, trails, etc.)
19.	Low adult death and disease rates
20.	Low infant deaths
21.	Religious or spiritual values
22.	Other _____

2. Please look at this list of community health issues. (*Give the person a list of services.*) In your opinion, which three (3) of the following services needs the most improvement in your neighborhood or community? If there is a service that you think needs improvement that is not on this list, please let me know and I will write it in. If you would like, I can read these out loud as you think about them. (*Read health problems aloud if asked*) Select only three:

1.	Animal control
2.	Child care options
3.	Elder care options
4.	Services for disabled people
5.	More affordable health services
6.	Culturally appropriate health services
7.	Support to help me manage my health conditions
8.	Mental health services/counseling/support groups
9.	Better/more healthy food choices
10.	Access to assistance for food
11.	More affordable/better housing
12.	Better/more recreational facilities (parks, trails, community centers)
13.	Transgender services
14.	Positive teen activities
15.	Transportation options
16.	Availability of employment
17.	Higher paying employment
18.	Better educational opportunities
19.	Other _____
20.	None

Appendix B: Survey Questionnaire Tool

Built Environment

3. I will now read you a series of statements about walking in your neighborhood. For each item, please tell me if you agree or disagree ('Yes' or 'No'). Both local and within walking distance mean within a 10-15 minute walk from your home.

	Agree	Disagree	Refused
a. Places I go often (e.g., school, library, grocery store, church, etc.) are within easy walking distance of my home, even if I choose not to walk			
b. It is easy to walk to a transit stop (bus) from my home.			
c. It is easy to walk to parks and playgrounds from my home.			
d. The amount of crime in my neighborhood makes it unsafe to go on walks.			
e. There is so much traffic along nearby streets that it makes it difficult or unpleasant to walk in my neighborhood.			
f. Where I live, there are roads, sidewalks, paths, or trails where I can walk or bike			

Personal Health

(Read) Now I would like to ask you some questions about your health. Remember your choices will not be linked to you in any way.

4. Would you say that in general your health is...(read choices and ask to choose one)

Excellent Very Good Good Fair Poor Don't Know Refused

5. Now I would like to ask you some questions about general health conditions. Has a doctor, nurse, or other health professional EVER told you that you had any of the following? For each, tell me "Yes," "No," or you're "Not sure."

	Yes	No	Don't Know	Refused
a. High blood pressure				
b. High cholesterol				
c. Pre-diabetes				
d. Overweight/obesity				
e. Angina/heart disease				
f. Congestive heart failure				
g. Stroke				

6. Over the past 30 days, how often have you been bothered by any of the following problems? (Hand them the response sheet)

	Not at all	Occasionally	Several days	More than ½ the time	Nearly every day	Refused
Little interest or pleasure in doing things						
Feeling down, depressed, or hopeless						

(if both responses = NOT AT ALL then skip to question 8)

7. During the past 30 days, how many times did you see a doctor or other health professional about these feelings?

Appendix B: Survey Questionnaire Tool

(#) _____

(Read) Now I will ask you about food and fitness.

8. On how many of the last SEVEN DAYS did you eat 5 or more servings of fruits and vegetables? Here are some illustrations on what a serving of fruits and veggies looks like. **(if needed, show participant fruit/veggie handout)**

(#) _____

9. I'm going to read some things that individuals report can make changing their eating habits difficult. For each item, please tell me if you agree or disagree (**'Yes'** or **'No'**).

	Agree	Disagree	Refused
a. It is difficult to motivate myself to eat healthy foods			
b. My life is so busy that I have trouble finding time to eat properly			
c. Healthy foods are often not available when it is time for me to eat (e.g., healthy choices not available at home, work, or in restaurants)			
d. I have trouble estimating portion sizes			
e. I don't know how to prepare healthy foods			
f. Healthy foods are too expensive			
g. I often find myself in family and social situations where eating a lot of food is expected			
h. I find nutrition food labels confusing			
i. I am currently watching or reducing my sugar intake			
j. I am currently watching or reducing my sodium or salt intake			

10. There are many reasons why families may not have enough food. Which of these statements best describes the food eaten in your household in the last 3 months **(Hand them the response sheet and read choices)?**

- Enough of the kinds of food we want to eat **(skip to question 12)**
- Enough but not always the kinds of food we want to eat **(skip to question 12)**
- Sometimes not enough to eat
- Often not enough to eat
- Refused**

11. Which of the following reasons explain why your household did not have enough food. Please tell me "Yes," "No," or you're "Not sure."

	Yes	No	Don't Know	Refused
Did not have enough money, food stamps, or WIC vouchers to buy food or beverages				
Did not have working appliances for storing or preparing foods (such as stove or refrigerator)				
Did not have transportation or had transportation problems				

12. On how many of the last SEVEN DAYS did you participate in at least 30 minutes of physical activity? **(Total minutes of continuous activity, including walking, biking, etc.)**

(#) _____

13. Where do you go to exercise or engage in physical activity? **(Read responses if needed and check all that apply)**

- Outdoor parks or trails
- Public recreation/community center
- Faith community
- Private gym/pool
- Home
- Work
- School setting
- I do not exercise

Appendix B: Survey Questionnaire Tool

Other: _____

14. Please tell us which of the following describes the type and amount of physical activity involved in your work.

- I am not employed (e.g., retired, retired for health reasons, unemployed, etc.)
- I spend most of my time at work sitting (such as in an office)
- I spend most of my time at work standing or walking. However, my work does not require much intense physical effort (e.g., shop assistant, hairdresser, security guard, etc.)
- My work involves definite physical effort including handling of heavy objects and use of tools (e.g., plumber, electrician, carpenter, cleaner, hospital nurse, gardener, postal delivery workers, etc.)
- My work involves vigorous physical activity including handling of very heavy objects. (e.g., scaffolder, construction worker, etc.)

15. For each of the following statements that relate to ideas about exercise, please tell me if you agree or disagree ('Yes' or 'No').

	Agree	Disagree	Refused
I don't have time to exercise			
Places for me to exercise are too far away			
It costs too much to exercise			
Exercise is not important to me			
I would need child care and I don't have it			
I have physical challenges that prevent me from exercising			
I don't know where the closest park or trail is			
It is difficult to motivate myself to exercise			

16. Do you currently smoke cigarettes...(read choices and ask to choose one)

- Every day Some days Not at all Don't Know Refused

17. Do you currently use e-cigarettes...(read choices and ask to choose one) (Note: You may know them as vape-pens, hookah-pens, e-hookahs, or e-vaporizers. Some look like cigarettes, and others look like pens or small pipes. These are battery-powered, usually contain liquid nicotine, and produce vapor instead of smoke)

- Every day Some days Not at all Don't Know Refused

18. Do you currently take prescription medication?

- Yes No Don't know Refuse

(if NO skip to question 21)

19. Do you ever forget to take your medicine?

- Yes No Don't know Refuse

20. Sometimes if you feel better or worse when you take your medicine, do you stop taking it?

- Yes No Don't know Refuse

21. Have you used drugs other than for medical reasons in the last 12 months?

- Yes No Don't know Refuse

(Read:) Now I am going to ask you about financial factors that can affect a person's health. (Do not read unless asked: we ask this question in order to compare health indicators among people in different housing situations)

22. How often in the past 12 months would you say you were worried or stressed about having enough money to pay your regular monthly expenses (including rent/mortgage, electricity, water, etc.)? Would you say...(read choices and ask to choose one)

- Always Usually Sometimes Rarely Never N/A Don't Know Refused

23. How worried are you right now about not being able to pay for medical costs of a serious illness or accident? Are you...(read choices and ask to choose one)

- Very worried Moderately worried Not too worried
 Not worried at all Don't Know Refused

Appendix B: Survey Questionnaire Tool

Emergency Preparedness

(Read:) The next series of questions asks about how prepared you are for a large-scale disaster or emergency. By large-scale disaster or emergency we mean any event that leaves you isolated in your home or displaces you from your home for at least 3 days. This might include natural disasters such as tornados, floods, and ice storms, or man-made disasters such as explosions, terrorist events, or blackouts.

24. For each of the following, please tell me "Yes," "No," or you're "Not sure." Does your household have a:

	Yes	No	Don't Know	Refused	N/A
3-day supply of water for everyone who lives here? (A 3-day supply of water is 1 gallon of water per person per day)					
3-day supply of nonperishable food for everyone who lives here? (By nonperishable we mean food that does not require refrigeration or cooking)					
3-day supply of prescription medication for each person who takes prescribed medicine?					
A working flashlight and working batteries for your use if the electricity is out?					

25. What would be your main method or way of getting information from authorities in a large-scale disaster or emergency? **(DO NOT read the options. If they can't think of anything... Here are some possibilities. Please choose only one. Read responses.)**

- | | |
|----------------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Television | <input type="checkbox"/> Social networking site |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Neighbors |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Friends/family |
| <input type="checkbox"/> Print media (e.g., newspaper) | <input type="checkbox"/> NotifyJoCo |
| <input type="checkbox"/> Text message (emergency alert system) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Refused | <input type="checkbox"/> Don't know |

26. In answering the next set of questions I am going to ask you, I want you to think about your current relationship with friends, family members, coworkers, community members, and so on. Please tell me if you agree or disagree ('Yes' or 'No') with each statement that describes your current relationships with other people.

	Agree	Disagree	Refused
There are people who enjoy the same social activities I do			
I feel personally responsible for the well-being of another person			
I feel part of a group of people who share my attitudes and beliefs			
I have close relationships that provide me with a sense of emotional security and well-being			
There are people I can count on in an emergency			

Access to care

27. Now I'm going to ask you about healthcare. What kind of place do you USUALLY go to when you are sick? **(Hand the list of healthcare locations.)**

- | | |
|------------------------------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Free/low cost clinic or health center | <input type="checkbox"/> Health department |
| <input type="checkbox"/> Doctor's office | <input type="checkbox"/> Urgent care |
| <input type="checkbox"/> Pharmacy clinic (e.g., Minute Clinic) | <input type="checkbox"/> Hospital emergency room |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Refused | |

28. What kind of place do you USUALLY go to when you need routine or preventive care, such as a physical examination or check-up?

- | | |
|----------------------------------------------------------------|--------------------------|
| <input type="checkbox"/> Free/low cost clinic or health center | <input type="checkbox"/> |
| <input type="checkbox"/> Doctor's office | <input type="checkbox"/> |

Appendix B: Survey Questionnaire Tool

- Pharmacy clinic (e.g., Minute Clinic)
- Hospital emergency room
- Other: _____
- Don't know
- Refused
- N/A (doesn't get preventive care)

29. In the past 12 months, did you have a problem getting the healthcare you needed for you personally or for a family member from any type of health care provider, dentist, pharmacy, or other facility?

Yes No Don't know Refuse

(if NO skip to question 31)

30. Since you said "yes," what type of provider or facility did you or your family member have trouble getting health care from? (Hand them list of providers) You can choose as many of these as you need to. If there was a provider that you tried to see but we do not have listed here, please tell me and I will write it in. If you would like, I can read these out loud as you think about them. (Read Providers if asked.) Check all that apply.

- Dentist
- Eye care/optometrist/ophthalmologist
- General practitioner
- Pharmacy/prescriptions
- Pediatrician
- Physical/occupational therapy
- OB/GYN
- Mental health provider (e.g., psychologist, psychiatrist, counselor)
- Health Department
- Hospital
- Urgent care center
- Medical clinic
- Other: _____
- Refused
- Don't know

31. DURING THE PAST 12 MONTHS, was there any time when you or your family member needed any of the following, but didn't get it because you couldn't afford it? For each of the following, please tell me "Yes," "No," or you're "Not sure."

	Yes	No	Don't Know	Refused
Prescription medicines				
Routine healthcare				
Dental care (including checkups)				
Eyeglasses				
Hearing aids				
See a specialist				
Follow-up care				

32. Have you or a family member delayed getting care for any of the following reasons in the PAST 12 MONTHS? For each of the following, please tell me "Yes," "No," or you're "Not sure."

	Yes	No	Don't Know	Refused
It wasn't a priority or you didn't think your condition was serious				
You couldn't get an appointment soon enough				
The (clinic/doctor's) office wasn't open when you could get there				
You didn't have transportation				
You didn't have health insurance				
Your insurance wasn't accepted by the provider				
Your insurance didn't cover what you needed				
Your share of the cost (deductible/co-pay) was too high				
An interpreter who speaks your language wasn't available				
You didn't know where to go				

33. (Hand them response card) During the PAST 12 MONTHS, HOW MANY TIMES have you gone to a HOSPITAL EMERGENCY ROOM about your own health (this includes emergency room visits that resulted in a hospital admission)?

Appendix B: Survey Questionnaire Tool

None 1 2-3 4-6 7-11 12 or more Don't Know Refused

(if NONE skip to question 35)

34. Tell me which of these apply to your last emergency room visit? For each of the following, please tell me "Yes," "No," or you're "Not sure."

	Yes	No	Don't Know	Refused
Your doctor's office or clinic was not open				
The problem was too serious for the doctor's office or clinic				
You get most of your care at the emergency room				
You arrived by ambulance or other emergency vehicle				

35. Now I will ask you questions about your experience with race. How often do you think about your race? Would you say... (read answer choices, pick one)

Never Once a year Once a month Once a week
 Once a day Once an hour Constantly Refused

36. Within the past 12 months at work, do you feel you were treated worse than, the same as, or better than people of other races?

Worse than Same as Better than Refused N/A

37. Within the past 12 months when seeking health care, do you feel your experiences were worse than, the same as, or better than for people of other races?

Worse than Same as Better than Refused

38. Within the past 30 days, have you experienced any physical symptoms, for example, a headache, an upset stomach, tensing of your muscles, or a pounding heart, as a result of how you were treated based on your race?

Yes No Don't know Refuse

39. Within the past 30 days, have you felt emotionally upset, for example angry, sad, or frustrated, as a result of how you were treated based on your race?

Yes No Don't know Refuse

Demographics

40. (Hand participant age category list) Which age category are you in?

- 1. 18-24
- 2. 25-34
- 3. 35-44
- 4. 45-54
- 5. 55-64
- 6. 65-74
- 7. 75 or older
- 8. Refused

41. Are you Male or Female? (Only ask this question if you are unable to visually determine the participant's sex)

Male Female Refuse

42. What is your race? (Read answer choices)

- White
- Black or African American
- Asian
- Asian Indian
- Race: _____
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native
- Race: _____
- Refused
- Other: _____

43. Are you of Hispanic, Latino, or Spanish origin?

Yes No Refuse

(if NO skip to question 45)

Appendix B: Survey Questionnaire Tool

44. Are you (**check all that apply**):
- Mexican, Mexican American, or Chicano
- Puerto Rican
- Cuban
- Other: _____
- Refused**
45. What language is primarily spoken in your home?
- English Spanish Other: _____ **Refused**
46. (**Hand participant list**) What is your marital status? (**Read categories. Mark only one. No explanation needed for "other".**)
1. Never married/single 4. Divorced
2. Married 5. Widowed
3. Unmarried Partner 6. Separated
- Other **Refused**
47. What is the highest level of school, college or vocational training that you have finished? (**Mark only one.**)
1. Less than 9th grade 5. Some college (no degree)
2. 9 - 12th grade, no diploma 6. Bachelor's degree
3. High school graduate (or GED/equivalent) 7. Graduate or professional degree
4. Associate's degree or vocational training Other: _____
- Refused**
48. What kind of health insurance or health care coverage do you have?
1. Private health insurance 5. Indian Health Service
2. Medicaid or KanCare 6. Other
3. Medicare 7. No insurance
4. Military health care (TRICARE/VA/CHAMP-VA) 8. **Don't know**
- Refused**
49. What was your total household income last year, before taxes? (**Hand them list**) Let me know which category you fall into. (**Read choices if asked. Mark only one.**)
1. Less than \$10,000 5. \$35,000 to \$49,999
2. \$10,000 to \$14,999 6. \$50,000 to \$74,999
3. \$15,000 to \$24,999 7. \$75,000 to \$99,999
4. \$25,000 to \$34,999 8. \$100,000 or more
- Refused**
50. How many *children* 18 or younger does this income support? _____
How many *adults* does this income support? _____
- (**If you are asked about child support: If you are paying child support but your child is not living with you, this still counts as someone living on your income.**)
51. What is your employment status? (**hand them employment card**) Let me know which ones apply to you. (**Read choices. Check all that apply.**)
1. Employed full-time 6. Homemaker
2. Employed part-time 7. Retired
3. Self-employed 8. Unemployed for more than 1 year
4. Armed forces 9. Unemployed for less than 1 year
5. Student **Refused**
52. Do you have access to the Internet?
- Yes No **Don't know** **Refuse**

(Read) These are all the questions that we have. Thank you so much for taking the time to complete this survey!

Appendix C: Key Informant Survey Questions and Results

Key Informant Surveys

Johnson County Health and Environment- 29 Completed Surveys

Johnson County survey did not ask respondent to provide organization they served, but did request information about the population they served. The population served by the respondents:

- 200% below poverty (5)
- Under / Uninsured
- Low income pregnant women and children 0-5
- Suburban, mostly white residents (4)
- Birth to 3 with developmental disabilities
- Patients in need of emergency services
- 60+ population
- Deaf and hard of hearing (2)
- Adult and juvenile criminal offenders
- Latinos and immigrants (2)

What is Johnson County's greatest strengths?

- High quality of living
- Strong economy and affluent population (3)
- High employment and good job opportunities (3)
- Options for dining, shopping and recreation
- Affordable and quality housing
- Infrastructure and good roads (2)
- Parks/green spaces and trails (4)
- Safe neighborhoods (2)
- Part of a large metropolitan area
- Good public schools and educational opportunities (5)
- Good health outcomes
- Low uninsured rate
- Professional governments (county and city)
- County resources and services (6)

Appendix C: Key Informant Survey Questions and Results

What are the greatest needs in Johnson County?

- Affordable housing (9)
- Transportation (8)
- Affordable health care (6)
- Higher wages and jobs with growth potential (6)
- Bi-cultural services (3)
- Focus on communities in poverty (2)
- Child support enforcement
- Child care
- Dental

What are the 3 most important health issues?

- **Access to care (26)**
 - Under/uninsured (14)
 - Health insurance literacy (3)
 - Medications (2)
 - Access to care during non-traditional hours
 - Preventive care
 - Specialists
 - Physicians who will see uninsured/Medicaid
 - Medical devices and equipment for specific health conditions
 - Medications
 - Pre-natal support
- **Chronic Disease (12)**
 - Obesity/Nutrition / Access to healthy food (5)
 - Diabetes/Heart Disease (3)
 - Wellness education (4)
 - COPD (1)
- **Mental health (8)**
 - Substance abuse (2)
 - Suicide
- **Dental (4)**

Appendix C: Key Informant Survey Questions and Results

Most Important Health Issues continued:

- **Built Environment (5)**
 - Infrastructure to support physical activity (3)
 - Water/Air pollution (2)
- **Aging (2)**
 - Health care for end of life
 - Alzheimer's and dementia

How accessible and adequate are primary health services?

- Very accessible and adequate for those who have health insurance and ability to pay (8)
- Limited access for those with no insurance or means to pay (10)
- Transportation is an issue for those without cars (3)
- Hours are not conducive to working schedules

How accessible and adequate are mental health services?

- Average to above average (3)
- Transportation is a barrier (3)
- Long waits for services (3)
- Mental health needs are not being met (3)
- Difficult to access for those not diagnosed with SPMI (2)
- Difficult to access and need more access points (3)
- JC Mental Health changes are continuing to show improvements (3)
- Need to focus on building community support through police and mental health workers

How affordable is our community?

- Affordable to reasonably affordable (10)
- Not affordable, especially for those on limited income (10)

What are our transportation needs?

- Nearly all respondents indicated an improved public transportation options and transportation is very difficult without a car.

Is there adequate programming to promote healthy lifestyles?

58 YES (17) and NO (12)

Appendix C: Key Informant Survey Questions and Results

If no, what is needed?

- More offerings through employers
- Continued expansion and connectivity to trails and parks
- Community programs through the schools
- Safe routes to schools
- Adult bike education
- Low cost options for community centers
- Use of food stamps at farmers markets

What is needed to promote more physical activity?

- Promotion and awareness campaigns (7) *consider Latinos in messaging
- Promotion and better marketing of trail system (6)
- More bike friendly options
- Safe walk/bike to school (2)
- Increase PE at schools
- More affordable gyms/sliding scale (5)
- Policy, planning and promotion to support active transportation (2)
- Free or low cost programs for specific age groups including seniors (2)
- More community events that are low cost or free

Are there barriers to accessing, preparing consuming healthy food? Yes (22)

- Cost (11)
- Sales tax on food (2)
- Knowledge on how to prepare healthy food (4)
- Too many fast food restaurants
- Grocery stores are becoming further apart
- Convenience/Time to prepare (2)
- Inability to use food stamps at farmers markets

**Community Health Assessment
and
Community Profile
2016**

Johnson County, Kansas

**Johnson County Department of
Health and Environment**

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