St. Luke’s Warren Campus 2022 Community Health Needs Assessment Highlights

Demographics*

- Population: 148,316
- Population Density: 758.85
- Urban housing: 85.7%
- Zip codes (highest serving county):
  - 08865 - Warren
  - 07882 - Warren
  - 07823 - Warren

Race and Ethnicity

- White: 82.5%
- Black: 7.9%
- Asian: 3.2%
- Other Race: 6.3%
- Hispanic: 11.6%

Age

- Under 18: 20.1%
- 18-64: 62.2%
- 65 and older: 17.7%

Sex at Birth

- Male: 48.5%
- Female: 51.5%

ALICE

In Warren county, 30% of people (Belvidere, 40%) are considered Asset Limited Income Constrained Employed

Executive Summary: The Community Health Needs Assessment (CHNA) is conducted every three years as part of the Patient Protection and Affordable Care Act. The following primary and secondary data is compiled to support the St. Luke’s Warren Campus.

Key Findings

Overall Network assessment results highlight three main priority focus areas for our community health initiatives:

- **Access to Care**
- **Prevention of Chronic Illnesses**
- **Mental and Behavioral Health**

These priority areas were determined based on the significant impact of the social determinants of health and provide a guide for our programs and other health initiatives that support our patients, care-workers, and communities. Findings from the 2022 CHNA highlight the differences within communities and systems related to the prevalence of disease and poor health outcomes that contribute to a lack of optimal health for socially disadvantaged populations.

<table>
<thead>
<tr>
<th>Economic Stability</th>
<th>Physical Environment</th>
<th>Education</th>
<th>Food</th>
<th>Community Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employed: 44.7%</td>
<td>75% of respondents in the Warren county service area own/mortgage their home</td>
<td>23.5% of survey respondents have only a high school degree</td>
<td>14.5% of children in Warren county are projected to be food insecure in 2021*</td>
<td>90.3% agreed that their community was safe</td>
</tr>
<tr>
<td>Retired: 43.8%</td>
<td>Asthma disproportionately affects low-income survey respondents making less than $14,999 (21.2%) respondents making $60,000 and above (8.1%)</td>
<td>2.1% of respondents have not completed a degree</td>
<td>Food insecurity rates: Warren county: 12% in 2020, a 40% increase from 2019*</td>
<td>Social Association indicator (available social supports) in Warren county is 9.5 compared to 18.2 of U.S. top performers*</td>
</tr>
<tr>
<td>Unemployed: 8.2%</td>
<td>21.5% of Households in the Warren campus service area live at 200% below the Federal Poverty Line</td>
<td>15% of residents in Warren county have one or more housing problem</td>
<td>20.8% of respondents have a graduate degree</td>
<td>9.4% of households in the Warren campus service area receive Supplemental Nutrition Assistance Program (SNAP)*</td>
</tr>
</tbody>
</table>

*Indicates a secondary data source

Access to Care

Health disparities are heavily influenced by social and economic factors. In the St. Luke’s Warren Campus service area, significant factors contribute to the health disparities seen in the population.

<table>
<thead>
<tr>
<th>Access to Care</th>
<th>Total</th>
<th>Income</th>
<th>Ethnicity</th>
<th>Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care Physician (visit within the past year)</td>
<td>83.7%</td>
<td>Less than $24,999: 79% $60,000 and above: 83%</td>
<td>Hispanic: 85% Non-Hispanic: 83%</td>
<td>Private Insurance: 80% Medicare: 90% Medicaid: 83% Uninsured: 39%</td>
</tr>
<tr>
<td>Dental Visit (visit within the past year)</td>
<td>68.8%</td>
<td>Less than $24,999: 41% $60,000 and above: 75%</td>
<td>Hispanic: 60% Non-Hispanic: 70%</td>
<td>Private Insurance: 61% Medicare: 7% Medicaid: 5% Uninsured: 32%</td>
</tr>
<tr>
<td>Missed Medical Appointment</td>
<td>Share of cost was too high: 6% Thought problem wasn’t serious: 5% Couldn’t get appointment: 4%</td>
<td>3.7% missed an appointment because they couldn’t get time off from work</td>
<td>8% of Hispanic respondents missed an appointment because the share of cost was too high (7% non-Hispanic)</td>
<td>4% missed an appointment because insurance didn’t cover what was needed</td>
</tr>
</tbody>
</table>

*Data from ACS 5-year estimates
COVID-19 IMPACT

The impacts of COVID-19 have yet to be fully realized, but the increase in health disparities is already seen in many aspects of care.

- While 19% of adults prior to COVID-19 experienced a mental illness (10.8% of those uninsured), during the pandemic this number grew to a reported 53% of adults.¹²
- More than 50 million people in the nation may experience food insecurity due to COVID-19.³
- The opioid epidemic and increased rates of substance use since the start of the pandemic are contributing to drastic increases in need for care and services for mental and behavioral health, with overdose rates increasing 18.2% since the start of the pandemic.⁴

Prevention of Chronic Illness

The goal of our Healthy Living and Chronic Disease Prevention is to improve the nutritional status and physical activity levels while reducing the chronic disease burden. These initiatives are driven by the 2022 CHNA survey results below.

<table>
<thead>
<tr>
<th>Chronic Illness</th>
<th>Percentage of Survey Respondents</th>
<th>Income</th>
<th>Ethnicity</th>
<th>Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes</td>
<td>16.5%</td>
<td>Less than $24,999: 28% $60,000 and above: 13%</td>
<td>Hispanic: 14% Non-Hispanic: 16%</td>
<td>17% of respondents with Medicaid or are uninsured are diabetic</td>
</tr>
<tr>
<td>Hypertension</td>
<td>42.8%</td>
<td>Less than $24,999: 49% $60,000 and above: 38%</td>
<td>Hispanic: 39% Non-Hispanic: 43%</td>
<td>39% of respondents with Medicaid or are uninsured have hypertension</td>
</tr>
<tr>
<td>Hyperlipidemia</td>
<td>31.7%</td>
<td>Less than $24,999: 32% $60,000 and above: 30%</td>
<td>Hispanic: 24% Non-Hispanic: 32%</td>
<td>20% of respondents with Medicaid or are uninsured have hyperlipidemia</td>
</tr>
<tr>
<td>Obesity</td>
<td>42.4%</td>
<td>Less than $24,999: 52% $60,000 and above: 41%</td>
<td>Hispanic: 50% Non-Hispanic: 42%</td>
<td>58% of respondents with Medicaid or are uninsured live with obesity</td>
</tr>
</tbody>
</table>

Mental and Behavioral Health

Mental and Behavioral Health are critical to the livelihood and welfare of our communities. Mental and Behavioral Health resources are insufficient across the nation. Our network continues to grow and address this need while working with community partners toward improving mental health ratios.

<table>
<thead>
<tr>
<th>Mental Health</th>
<th>Percentage of Survey Respondents</th>
<th>Income</th>
<th>Ethnicity</th>
<th>Insurance</th>
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</thead>
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<tr>
<td>I have experienced at least one poor mental health day in the last 30 days</td>
<td>37.5%</td>
<td>Less than $24,999: 53% $60,000 and above: 33%</td>
<td>Hispanic: 41% Non-Hispanic: 32%</td>
<td>56% of respondents with Medicaid or are uninsured had at least one poor mental health day</td>
</tr>
</tbody>
</table>

- 6.6% of youth in Warren county report thinking about suicide and 17% report threatening or harmful behaviors
- The ratio of mental healthcare providers is 470:1 in Warren county (compared to 420:1 in NJ and 270:1 for U.S. top performers)

¹https://www.mhanational.org/issues/state-mental-health-america
²https://www.kff.org/
³https://www.feedingamerica.org/research/coronavirus-hunger-research
⁴https://emergency.cdc.gov/han/2020/han00438.asp