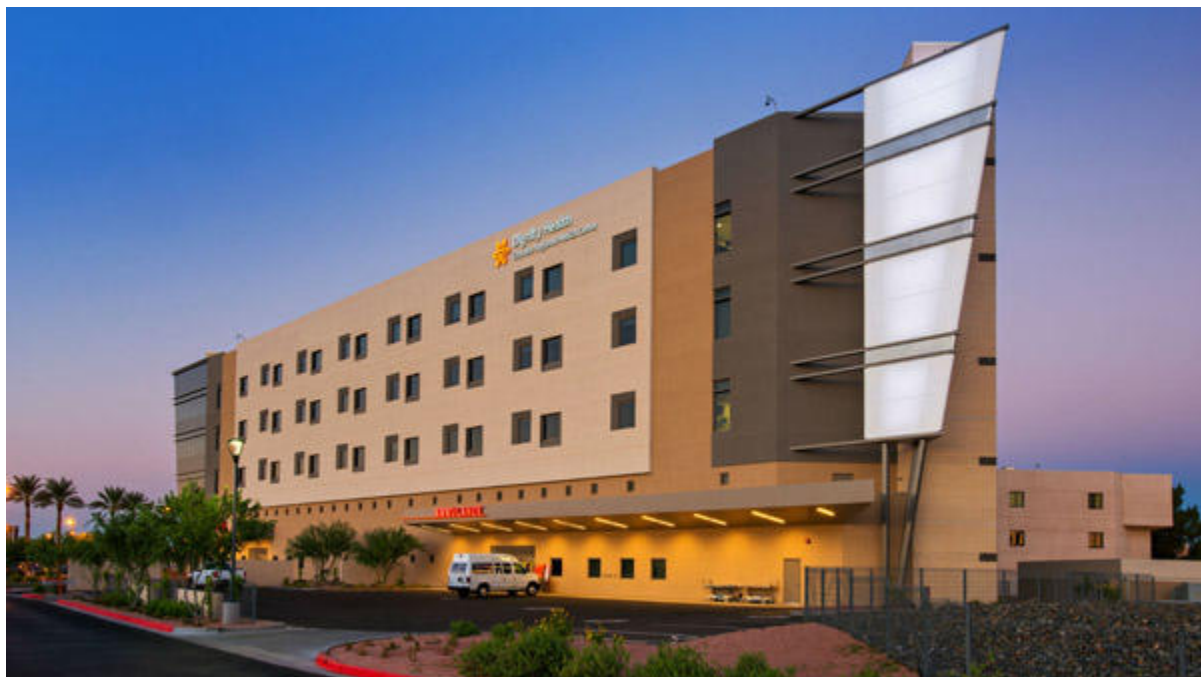# Dignity Health Chandler Regional Medical Center

# Community Health Needs Assessment 2022 – Appendix & Resources

**Adopted May 2022**

# Appendices

The appendix includes the following documents:

**Appendix A**
2019 & 2021 Focus Group Discussion Schedules

**Appendix B**
2019 CHNA Focus Group Questions
2021 COVID-19 Focus Group Questions
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**Appendix D**
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**Appendix E**
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*Chandler Regional Medical Center CHNA 2022 Main Report can be found online at -*
*https://www.dignityhealth.org/arizona/locations/chandlerregional/about-us/community-benefit-outreach/benefits-reports*

# Appendix A – Focus Group Discussion Schedule

2019 Focus Group Schedule

## Cycle 1

| Date | Time | Population | Location |
|---|---|---|---|
| 4/8 (Mon.) | 6:00pm – 8:00pm | Native American Adult Males [n = 8] | **Native American Fatherhood & Families Association** (460 N. Mesa Dr, Suite 115, Mesa, AZ) |
| 4/16 (Tues.) | 10:00am – 12:00pm | Homeless Males over 60 [n = 10] | **St. Vincent de Paul** (420 W. Watkins Rd., Phoenix, AZ) |
| 4/17 (Wed.) & 5/16 (Thurs.) | 6:00pm -8:00pm & 5:30pm–7:30pm | Native American Adults [n = 17] | **Mesa Public Schools** (1025 N. Country Club, Mesa, AZ) & **Native Health (East Valley)** (777 W. Southern Ave., Building C, Mesa, AZ) |
| 4/18 (Thurs.) | 10:30am - 12:30pm | Homeless Women with Children [n = 15] | **UMOM** (3333 E. Van Buren St., Phoenix, AZ) |
| 4/18 (Tues.) | 5:30pm - 7:30pm | African American Males [n = 7] | **Hatton Hall** (34 E. 7th St., Tempe, AZ) |
| 4/23 (Tues.) | 4:30pm - 6:30pm | LGBTQI Adults [n = 7] | **Southwest Center for HIV/AIDS (Parson's Center)** (1101 N. Central Ave, Phoenix, AZ) |
| 4/24 (Wed.) | 6:00pm – 8:00pm | Homeless Youth (14-21) [n = 7] | **Native American Connections/HomeBase** (931 E. Devonshire, Phoenix, AZ) |
| 4/25 (Thurs.) | 12:30pm- 2:30pm | Adults over 60 (New Retirees) [n = 13] | **Ahwatukee Foothills Family YMCA** (1030 E. Liberty Lane, Phoenix, AZ) |
| 4/26 (Fri.) | 10:30am- 12:30pm | New Parents [n = 7] | **Adelante Healthcare – WIC Office** (1705 W. Main St., Mesa, AZ) |
| 4/27 (Sat.) | 10:30am- 12:30pm | Homeless Veterans [n = 15] | **MANA House** (2422 W. Holly St., Phoenix, AZ) |
| 4/29 (Mon.) | 6:00pm - 8:00pm | Parents of Children with Special Health Needs [n = 9] | **Ignacio Conchos Elementary School** (1718 W. Vineyard Rd., Phoenix, AZ) |
| 4/30 (Tues.) | 6:00pm - 8:00pm | Parents of Children with Special Health Needs [SPANISH; n = 7] | **Ignacio Conchos Elementary School** (1718 W. Vineyard Rd., Phoenix, AZ) |
| 5/4 (Sat.) | 10:30am – 12:30pm | Filipino Adults [n = 8] | **Chandler Community Center** (125 E. Commonwealth Ave., Chandler, AZ) |
| 5/14 (Tues.) | 5:30pm - 7:30pm | Veterans [n = 7] | **Tanner Community Development Corporation** (700 E. Jefferson St., Phoenix, AZ) |
| 5/16 (Wed.) | 8:30am- 10:30am | New Parents [SPANISH; n = 11] | **Moon Mountain Elementary School** (13425 N. 19th Ave, Phoenix, AZ) |

# Cycle 2

| Date | Time | Population | Location |
|---|---|---|---|
| 4/8 (Mon.) | 6:00pm – 8:00pm | Native American Adult Males [n = 8] | **Native American Fatherhood & Families Association** (460 N. Mesa Dr, Suite 115, Mesa) |
| 4/16 (Tues.) | 10:00am – 12:00pm | Homeless Males over 60 [n = 10] | **St. Vincent de Paul** (420 W. Watkins Rd., Phoenix) |
| 4/17 (Wed.) & 5/16 (Thurs.) | 6:00pm -8:00pm & 5:30pm–7:30pm | Native American Adults [n = 17] | **Mesa Public Schools** (1025 N. Country Club, Mesa, AZ) & **Native Health (East Valley)** (777 W. Southern Ave., Mesa) |
| 4/18 (Thurs.) | 10:30am - 12:30pm | Homeless Women with Children [n = 15] | **UMOM** (3333 E. Van Buren St., Phoenix) |
| 4/18 (Tues.) | 5:30pm - 7:30pm | African American Males [n = 7] | **Hatton Hall** (34 E. 7th St., Tempe) |
| 4/23 (Tues.) | 4:30pm - 6:30pm | LGBTQI Adults [n = 7] | **Southwest Center for HIV/AIDS (Parson's Center)** (1101 N. Central Ave, Phoenix) |
| 4/24 (Wed.) | 6:00pm – 8:00pm | Homeless Youth (14-21) [n = 7] | **Native American Connections/HomeBase** (931 E. Devonshire, Phoenix, AZ) |
| 4/25 (Thurs.) | 12:30pm- 2:30pm | Adults over 60 (New Retirees) [n = 13] | **Ahwatukee Foothills Family YMCA** (1030 E. Liberty Lane, Phoenix) |
| 4/26 (Fri.) | 10:30am- 12:30pm | New Parents [n = 7] | **Adelante Healthcare – WIC Office** (1705 W. Main St., Mesa) |
| 4/27 (Sat.) | 10:30am- 12:30pm | Homeless Veterans [n = 15] | **MANA House** (2422 W. Holly St., Phoenix, AZ) |
| 4/29 (Mon.) | 6:00pm - 8:00pm | Parents of Children with Special Health Needs [n = 9] | **Ignacio Conchos Elementary School** (1718 W. Vineyard Rd., Phoenix, AZ) |
| 4/30 (Tues.) | 6:00pm - 8:00pm | Parents of Children with Special Health Needs [SPANISH; n = 7] | **Ignacio Conchos Elementary School** (1718 W. Vineyard Rd., Phoenix, AZ) |
| 5/4 (Sat.) | 10:30am – 12:30pm | Filipino Adults [n = 8] | **Chandler Community Center** (125 E. Commonwealth Ave., Chandler, AZ) |
| 5/14 (Tues.) | 5:30pm - 7:30pm | Veterans [n = 7] | **Tanner Community Development Corporation** (700 E. Jefferson St., Phoenix, AZ) |
| 5/16 (Wed.) | 8:30am- 10:30am | New Parents [SPANISH; n = 11] | **Moon Mountain Elementary School** (13425 N. 19th Ave, Phoenix, AZ) |

## Cycle 3

| Date | Time | Population | Location |
|---|---|---|---|
| 10/16 (Wed.) | 1:00 pm – 3:00 pm | Native Americans - Young adults (19-24) | **ASU Discovery Hall** 250 E Lemon St. Tempe 85281 |
| 10/17 (Thurs.) | 10:00 am – 12:00 pm | Immigrants/Refugee/Asylum Seekers - Congolese | **IRC** 4425 W Olive #400 Glendale 85302 |
| 10/17 (Thurs.) | 1:30 pm – 3:30 pm | Asian Americans - South and southeast Asia [n = 29] | **Asian Pacific Community in Action-IACRF Hall** 2809 W Maryland Phoenix 85017 |
| 10/22 (Tues) | 4:00 pm – 6:00 pm | LGBTQ - Young adults (19-24) | **One.n.ten** 931 #202 Phoenix 85004 |
| 10/28 (Mon.) | 11:00 am – 1:00 pm | Homeless - Young adults (19-24) | **Homebase** 931 E Devonshire Phoenix 85014 |
| 11/1 (Sat.) | 1:00 pm – 3:00 pm | Youth Focus Groups (14 - 18) - African Americans 1 | **Ironwood Library** 4333 E Chandler Phoenix 85048 |
| 11/5 (Tues.) | 10:00 am – 12:00 pm | Adults over 65 - Hispanic/Latino [n = 6] | **Gila Bend Family Resource Center** 303 E Pima St, Gila Bend, AZ 85337 |
| 11/6 (Wed.) | 5:30 pm – 7:30 pm | People Living with Special Healthcare Needs - Parents/caregivers | **Sunset Library** 4930 W Ray, Chandler |
| 11/7 (Thurs.) | 12:00 pm – 2:00 pm | Adults over 65 - African Americans [n = 12] | **Muriel Smith Center** 2230 W Roeser Rd, Phoenix 85041 |
| 11/7 (Thurs.) | 5:00 pm – 7:00 pm | African Americans- Young adults (19-24) [n = 4] | **Muriel Smith Center** 2230 W Roeser Rd, Phoenix 85041 |
| 11/12 (Wed.) | 5:00 pm – 7:00 pm | Youth Focus Groups (14-18) - Homeless | **UMOM** 2344 E Earll Drive |
| 11/13 (Wed.) | 8:30 am – 10:30 am | Youth Focus Groups (14 - 18) - Hispanic | **Natalie's room North High School** 1101 E Thomas Phoenix 85014 |
| 11/13 (Wed.) | 4:00 pm – 6:00 pm | People who have been previously incarcerated – combined | **Black Canyon building** 2445 W Indianola |
| 11/13 (Wed.) | 5:00 pm – 7:00 pm | Youth Focus Groups (14 - 18) - Native American | **Seewa Tomteme Community Center** 8066 S Avenida del Yaqui Guadalupe 85283 |

## 2021 Focus Group Schedule

| FG# | Date | Region | Group (Location/provider) | Number |
|-----|------|--------|---------------------------|--------|
| 1 | 2/16/2021 | SE | I-HELP Chandler | 8 |
| 2 | 2/17/2021 | Central | Native Health- Phoenix | 8 |
| 3 | 2/18/2021 | NE | Paiute - South Scottsdale | 4 |
| 4 | 2/18/2021 | SE | Native Health - Mesa | 5 |
| 5 | 2/25/2021 | NW | Sun Health - NW Valley | 5 |
| 6 | 3/02/2021 | NW | Sun Health - NW Valley | 5 |
| 7 | 3/10/2021 | South Central | South Mountain | 6 |
| 8 | 3/12/2021 | NW | Family Resource Center –English | 6 |
| 9 | 3/19/2021 | NW | Family Resource Center-Spanish | 5 |
| 10 | 3/24/2021 | SW | Gila Bend - English | 8 |
| 11 | 3/26/2021 | SW | Gila Bend - Spanish | 6 |
| 12 | 3/29/2021 | NE | Paiute, S. Scottsdale – Spanish - 9am | 8 |
| 13 | 3/29/2021 | NE | Paiute, S. Scottsdale – Spanish -11:30 | 6 |
| 14 | 3/30/2021 | South Central | South Phoenix (AA/Black) | 6 |
| 15 | 4/07/2021 | SE | Gilbert - AZCEND Moms Club Gilbert | 6 |
| 16 | 4/26/2021 | South Central | S Phoenix Young Parents | 5 |
| 17 | 5/10/2021 | SE | African American/Black Women 85048 | 5 |
| 18 | 5/12/2021 | South Central | Parents w/minors living home 85041 | 4 |
| 19 | 5/14/2021 | * | Asian Americans 65+ | 8 |
| 20 | 5/16/2021 | NW | Parents of Young Children 85086 | 4 |
| 21 | 5/17/2021 | * | Hispanic/Latino Men | 6 |
| 22 | 5/17/2021 | * | Asian Americans | 7 |
| 23 | 5/20/2021 | * | Racial/Ethnic Minority Young Adults | 7 |
| 24 | 5/27/2021 | * | Guadalupe | 6 |
| 25 | 6/01/2021 | * | LGBTQIA+ Community Members | 3 |
| 26 | 6/02/2021 | * | Veterans | 5 |
| 27 | 6/04/2021 | * | Parents with Young Children | 8 |
| 28 | 6/07/2021 | * | Expectant Mothers & Parents of Young Children | 5 |
| 29 | 6/08/2021 | * | Young Adults | 5 |
| 30 | 6/09/2021 | * | Seniors & Veterans | 2 |
| 31 | 6/11/2021 | * | Central Phoenix residents | 10 |
| 32 | 6/14/2021 | * | Immigrants - Spanish | 4 |
| 33 | 6/14/2021 | * | Refugees - Advocates | 4 |
| **Total Participants** | | | | **186** |

* Community members participated from various regions of Maricopa County

# Appendix B
Primary Data Collection Tools

## 2019 Coordinated Community Health Needs Assessment Focus Group Questions

**For the purposes of this discussion, "community" is defined as where you live, work, and play.**

**Opening Question (5 minutes)**

To begin, why don't we go around the table and say your name (or whatever you would like us to call you) and what community event brings everybody out? (Such as: festival, school play, sporting event, parade; what brings all the people together for fun)

**General Community Questions (15 minutes)**

I want to begin our discussion today with a few questions about health and quality of life in your community.

1. What does quality of life mean to you?
2. What makes a community healthy?
3. When thinking about health, what are the greatest strengths in your community?
4. What makes people in the community healthy?
   a. Why are these people healthier than those who have (or experience) poor health?

**Community Health Concerns (15 minutes)**

Next, let's discuss any health issues you have in your community.

5. What do you believe are the 2-3 most important issues that should be addressed to improve health in your community?

   [Prompt – ask this if it does not come up naturally]

   i. What are the biggest health problems/conditions in your community?
   ii. Do other communities in this area have the same health problems?

6. A) What makes it hard to access healthcare for people in your community?

   [Prompt – ask this if it does not come up naturally]

   i. Are there any cost issues that keep you from caring for your health? (such as copays or high-deductible insurance plans)
   ii. If you are uninsured, do you experience any barriers to becoming insured?

iii.      If you do not regularly seek care, are there provider concerns that keep you from caring for your health? (prompt – ask if there are concerns about providers not identifying with them)

B) How do these barriers affect the health of your community? Your family? Children? You?

7. For this question, think about the last year. Was there a time when you or someone in your family needed to see a doctor but could not? Did anything keep you from going?

**Community Health Recommendations (15 minutes)**

As the experts in your community, I would like to spend this final part of the focus group discussion talking about your ideas to improve community health.

8. What are some ideas you have to help your community get or stay healthy? To improve the health and quality of life?

9. A) What else do you (your family, your children) need to maintain or improve your health?

[Prompt – ask this if it does not come up naturally]

i.      Services, support or information to manage a chronic condition or change health behaviors such as smoking, eating habits, physical activity, or substance use
ii.      Preventative services such as flu shots, screenings or immunizations
iii.      Specialty healthcare services or providers (such as heart doctors or dermatologists)

B) What health services do you or your family need that aren't in your community?

10. What resources does your community have/use to improve your health?

[Prompt – ask this if it does not come up naturally]

i.      Why do you use these particular services or supports?

**Ending Question (5 minutes)**

11. Is there anything else related to the topics we discussed today that you think I should know that I didn't ask or that you have not yet shared?

**Facilitator Summary & Closing Comments (5-10 minutes)**

Let's take a few minutes to reflect on responses you provided today. We will review the notes we took and the themes we observed. This is your opportunity to clarify your thoughts or to provide alternative responses. [Co-facilitator provides a brief summary of responses for each of the questions or asks clarifying questions if she thinks she may have missed something.

Thank you for your participation in this focus group meeting. You have all raised a number of great issues for us to consider. We will look at what you have told us and use this information to make recommendations to area hospitals and the Maricopa County Department of Public Health

## 2021 COVID-19 Focus Group Questions

**A. Information about COVID-19**
Let's start our conversation about how COVID-19 has affected you and your family.

1. How has COVID-19 affected you and your family?
2. What do people close to you (e.g., your family/friends) say about the COVID-19 vaccine?
   a. What about your neighbors? Faith/religious leaders or faith community?
   b. PROBE: And what about schools (if applicable)? Colleagues? Employers? Medical professionals? How has COVID-19 affected you differently because of your race or ethnicity?
3. Where have you seen information about the COVID-19 vaccine?
   a. PROBE: Word of mouth? TV? Radio? Social media (e.g., Facebook, Twitter, text message sources)? Online sources?
   b. Where are some places you've noticed health messages in general?
      i. PROBE: Grocery store? Shopping stores (e.g., Walmart, Costco, Walgreens, CVS)? Doctor's office? Health clinic? Community/faith-based organization? Other?
   c. What kind of messaging are you seeing? What do you think of these messages? Do you think they reach Arizona's communities?
4. Who do you trust and/or rely on information or updates about the COVID-19 vaccine?
   a. PROBE: Why do you trust this person/s?
   b. PROBE: Who don't you trust? Why?
5. Is there anything about COVID-19 or vaccine that you want to know more about?
   a. PROBE: Why would you like to know this information?
   b. PROBE: How would you like to receive this information?
   c. PROBE: Language preference? Radio? TV? Pamphlets?
6. Where do you usually go to get health care or for your health needs?
   a. PROBE: Urgent care? Hospital/ER? Clinic? Telehealth?
7. What thoughts do you have on preventing COVID-19?
   a. Where did you get that information?

**B. Intent to get vaccinated against COVID-19**

The following questions are about your intentions to get vaccinated against COVID-19 when a vaccine becomes available to the general public.

1. What do you think about a COVID-19 (Pfizer vaccine? Moderna? Johnson & Johnson)?

      a.   PROBE: What are some reasons you think that (about each)?

2. What are some reasons why you and/or your family did/ would get vaccinated for COVID-19?
   a. PROBE: Where would you go?
3. What concerns do you have about getting vaccinated for COVID-19?
   a. **NOTE: List concerns and probe – ex. "I don't know what is in the vaccine?" ASK: What do you think is in it? What have you heard?
   b. PROBE: What concerns do you have about elders getting vaccinated for COVID19? Children?
4. In your opinion, what barriers do you think there may be to get vaccinated against COVID-19 (e.g., cost)?
   PROBE: perhaps you've already had the vaccine?
5. What challenges do you, your family, and/or your community have in getting the COVID19 vaccine?

## C. Communication and Messaging

Now let's discuss communication about COVID-19 and messaging.

1. What information would your reluctant family/friends need before getting the vaccine?
2. What are some ways we can communicate updates on "COVID-19 vaccines and research information" specifically to [BLACK, INDIGENOUS, HISPANIC/LATINO] communities?
   a. PROBE: What are some things that may work?
3. What ways could community leaders build and maintain trust with your community [or BLACK, INDIGENOUS, HISPANIC/LATINO] communities?
4. What kind of messaging would you or your community need to know the vaccine is safe?
5. Do you think COVID has affected different groups of people differently? (Why do you think this is and how do you think we could we improve this situation?)

## D. FINAL WRAP UP QUESTION

1. At this time, what do you and your family need to maintain or improve your health?
2. Is there anything else related to the topics we discussed today that you think I should know that I didn't ask or that you have not yet shared?

## 2019 Maricopa County Community Health Needs Assessment Survey

The purpose of this brief survey is to get your opinion about issues related to community health and quality of life here in Maricopa County. Information collected in this survey will be kept confidential and used only in combination with others participating in the survey. No personal identifying information will be collected. Your feedback will be used to help guide future community health improvement planning efforts. Thank you for supporting your community. This survey should take about 10 minutes. If you have questions about the survey or need it provided in an alternative format, please visit http://www.MaricopaHealthMatters.org.

*In this survey, "community" is defined as the areas where you work, live, learn and/or play.*

1. **In general, how would you rate your physical health?**

   Poor          Fair          Good          Very Good          Excellent

2. **How would you rate your mental health, including your mood, stress level, and your ability to think?**

   Poor          Fair          Good          Very Good          Excellent

3. **How often are you able to get the services you need to maintain your mental health?**

   Never                    Sometimes                    Always

4. **On a monthly basis, do you have enough money to pay for essentials such as food, clothing and housing?**

   Never                    Sometimes                    Always

5. **In your community, do people trust one another and look out for one another?**

   Never                    Sometimes                    Always

6. **On a monthly basis, do you have enough money to pay for health care expenses (e.g. doctor bills, medications, etc.)?**

   Never                    Sometimes                    Always

7. **How do you pay for your health care (including medications, dental and health treatments)? (Check all that apply.)**

| ☐ Health insurance purchased on my own or by family member | ☐ Health insurance purchased/provided through employer | ☐ I do not use health care services | ☐ Indian Health Services |
|---|---|---|---|
| ☐ Medicaid/AHCCCS | ☐ Medicare | ☐ Travel to a different country to afford health care | ☐ Use free clinics |
| ☐ Use my own money (out of pocket) | ☐ Veterans Administration | ☐ Other: _____ | |

8. **What are the biggest barriers to accessing healthcare in your community? (Check up to 3.)**

| | | | |
|---|---|---|---|
| ☐ Childcare | ☐ Difficulty finding the right provider for my care | ☐ Distance to provider | ☐ Inconvenient office hours |
| ☐ No health insurance coverage | ☐ Not enough health insurance coverage | ☐ Transportation to appointments | ☐ Understanding of language, culture, or sexual orientation differences |
| ☐ Other: _____ | | | |

9. **What are the greatest strengths of your community? (Check all that apply.)**

| | | | |
|---|---|---|---|
| ☐ Ability to communicate with city/town leadership and feel that my voice is heard | ☐ Accepting of diverse residents and cultures | ☐ Access to affordable after school activities | ☐ Access to affordable childcare |
| ☐ Access to affordable healthy foods | ☐ Access to affordable housing | ☐ Access to community classes and trainings | ☐ Access to cultural events |
| ☐ Access to fitness programs | ☐ Access to good schools | ☐ Access to jobs & healthy economy | ☐ Access to medical care |
| ☐ Access to mental health services | ☐ Access to parks and recreation sites | ☐ Access to public libraries and community centers | ☐ Access to public transportation |
| ☐ Access to religious or spiritual events | ☐ Access to safe walking and biking routes | ☐ Access to services for seniors | ☐ Access to social services for residents in need or crisis |
| ☐ Access to substance abuse treatment services | ☐ Access to support networks such as neighbors, friends, and family | ☐ Clean environment and streets | ☐ Good place to raise children |
| ☐ Low crime/safe neighborhoods | ☐ Other: _____ | | |

10. **Which health conditions have the greatest impact on your community's overall health and wellness? (Check up to 5.)**

| | | | |
|---|---|---|---|
| ☐ Alcohol/Substance abuse | ☐ Anorexia/bulimia and other eating disorders | ☐ Arthritis | ☐ Autism |
| ☐ Cancers | ☐ Chronic stress | ☐ Chronic pain | ☐ Dementia/Alzheimer's |
| ☐ Dental problems (oral health) | ☐ Diabetes | ☐ Food allergies/anaphylaxis | ☐ Heart disease and stroke |
| ☐ High blood pressure or cholesterol | ☐ HIV/AIDS | ☐ Lung disease (asthma, COPD, emphysema) | ☐ Vaccine preventable diseases such as flu, measles, and pertussis (whooping cough) |
| ☐ Mental health issues (depression, anxiety, bipolar, etc.) | ☐ Overweight/obesity | ☐ Sexually transmitted diseases | ☐ Suicide |
| ☐ Tobacco use including vaping | ☐ Other: _____ | ☐ | ☐ |

11. **Which <u>issues</u> have the greatest impact on your community's health and wellness? (Check up to 5.)**

| | | | |
|---|---|---|---|
| ☐ Bullying/peer pressure | ☐ Child abuse/neglect | ☐ Distracted driving (such as cell phone use, texting while driving) | ☐ Domestic violence |
| ☐ Dropping out of school | ☐ Elder abuse/neglect | ☐ Gang-related violence | ☐ Gun-related injuries |
| ☐ Homelessness | ☐ Homicide (murder) | ☐ Illegal drug use | ☐ Limited access to healthcare |
| ☐ Lack of affordable healthy food options | ☐ Lack of affordable housing | ☐ Lack of child car seats and seat belts use | ☐ Lack of good jobs |
| ☐ Lack of good schools | ☐ Lack of people immunized to prevent disease | ☐ Lack of public transportation | ☐ Lack of quality and affordable childcare |
| ☐ Lack of safe spaces to exercise and be physically active | ☐ Lack of support networks such as neighbors, friends and family | ☐ Limited places to buy groceries | ☐ Motor vehicle & motorcycle crash injuries |
| ☐ Racism/discrimination | ☐ Rape/sexual assault | ☐ Smoking/electronic cigarette use or caping | ☐ Suicide |
| ☐ Teen pregnancy | ☐ Unsafe working conditions | ☐ Other: _____ | |

**For the next four questions, please imagine a ladder with steps numbered from one at the bottom to ten at the top. The top of the ladder represents the <u>best possible life</u> and the bottom of the ladder represents the <u>worst possible life.</u>**



12. **Which step represents the health of your community?**

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|----|

Worst Possible                                     Best Possible

13. **Indicate where on the ladder you feel you personally stand right now.**

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|----|

Worst Possible                                     Best Possible

14. **On which step do you think you will stand about five years from now?**

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|----|

Worst Possible                                     Best Possible

15. **Now imagine the top of the ladder represents the <u>best possible *financial situation* for you</u>, and the bottom of the ladder represents the <u>worst possible *financial situation* for you</u>. Please indicate where on the ladder you stand right now.**

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|----|
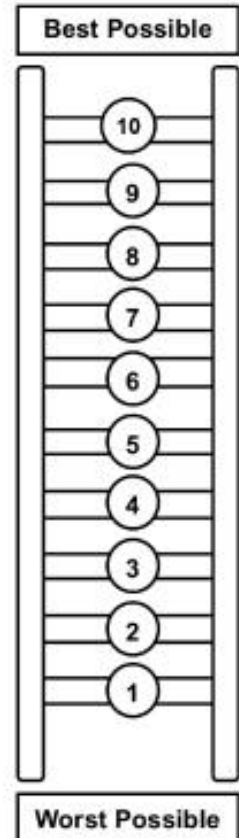
Worst Possible                                     Best Possible

**The following information is used for demographic purposes and does NOT identify you; all responses are confidential.**

16. **What is your ZIP code?** _____

17. **What is your gender?**

| ☐ Male | ☐ Female | ☐ Transgender | ☐ Other |
|--------|----------|---------------|---------|

18. **What is your age?**

| ☐ 12-17 | ☐ 18-24 | ☐ 25-34 | ☐ 35-44 |
|---------|---------|---------|---------|
| ☐ 45-54 | ☐ 55-64 | ☐ 65-74 | ☐ 75+ |

19. **Which racial or ethnic group do you identify with? (Check only 1.)**

| ☐ White | ☐ Asian | ☐ American Indian: Tribal Affiliation _____ | ☐ Hispanic or Latino |
|---|---|---|---|
| ☐ Black of African American | ☐ Native Hawaiian or Other Pacific Islander | ☐ Alaskan Native | ☐ Multi-racial |
| ☐ Other | | | |

20. **Which group(s) do you most identify with? (Check all that apply.)**

| ☐ Adult with children | ☐ Adult with no children | ☐ Caregiver | ☐ LGBTQI |
|---|---|---|---|
| ☐ Person experiencing homelessness | ☐ Person with a disability | ☐ Refugee/Asylum Seeker | ☐ Single parent |
| ☐ Veteran | ☐ Person living with HIV/AIDS | ☐ Other: _____ | ☐ None |

21. **What range is your household income?**

| ☐ Less than $20,000 | ☐ $20,000 - $29,000 | ☐ $30,000 - $49,000 |
|---|---|---|
| ☐ 50,000 - $74,000 | ☐ $75,000 - $99,999 | ☐ Over $100,000 |

22. **What is the highest level of education you have completed?**

| ☐ Less than a high school graduate | ☐ High school diploma or GED | ☐ Associate's Degree | ☐ Currently enrolled at vocational school or college |
|---|---|---|---|
| ☐ College degree or higher | ☐ Other | | |

## 2021 COVID-19 Impact Community Health Survey

The purpose of this brief survey is to get your opinion about COVID-19's impact on community health and quality of life in Maricopa County since March of 2020. Information collected in this survey will be kept confidential and used only in combination with others participating in the survey. No personal identifying information will be collected. Your feedback will be used to help guide future community health improvement planning and funding efforts. This survey should take about 15 minutes. If you have questions about the survey or need it provided in an alternative language or format, please email Tiffany.Tu@maricopa.gov and we will do our best to accommodate.

**The following information is used for demographic purposes and does NOT identify you; all responses are confidential. To learn more about why CHNAs are important, please visit https://www.cdc.gov/publichealthgateway/cha/plan.html.**

1. **What is the ZIP code that you currently reside in?** _____

2. **What is your gender?**

| | | | | |
|---|---|---|---|---|
| ☐ Female | ☐ Male | ☐ Transgender | ☐ Prefer to self-describe | ☐ Prefer not to answer |

3. **What is your age range?**

| | | | |
|---|---|---|---|
| ☐ 12-17 | ☐ 18-24 | ☐ 25-34 | ☐ 35-44 |
| ☐ 45-54 | ☐ 55-64 | ☐ 65-74 | ☐ 75+ |

4. **Which racial and/or ethnic group do you identify with? (Check no more than two)**

| | | | |
|---|---|---|---|
| ☐ African American/Black | ☐ American Indian/Native American | ☐ Asian | ☐ Hispanic/Latinx |
| ☐ Native Hawaiian or other Pacific Islander | ☐ Caucasian/White | ☐ Other: _____ | ☐ Prefer not to answer |

5. **Which group(s) do you most identify with? (Check all that apply)**

| | | | |
|---|---|---|---|
| ☐ Adult with children under age 18 or living in the same home | ☐ Single parent | ☐ LGBTQI | ☐ Person experiencing homelessness |
| ☐ Person living with a disability | ☐ Immigrant | ☐ Refugee | ☐ Veteran |
| ☐ Person living with HIV/AIDS | ☐ Other | ☐ Prefer not to answer | ☐ None |

6. **What range is your household income?**

| | | |
|---|---|---|
| ☐ Less than $20,000 | ☐ $20,000 - $29,000 | ☐ $30,000 - $49,000 |
| ☐ 50,000 - $74,000 | ☐ $75,000 - $99,999 | ☐ Over $100,000 |
| ☐ Prefer not to answer | | |

7. **What is the highest level of education you have completed?**

| | | | |
|---|---|---|---|
| ☐ Less than a high school graduate | ☐ High school diploma or GED | ☐ Some College or Associate degree (2yr) | ☐ Graduate of vocational/trade school |
| ☐ Currently enrolled in college | ☐ Bachelor's Degree (4yr) | ☐ Postgraduate Degree | ☐ Other |
| ☐ Prefer not to answer | | | |

**In this survey, "community is defined as the areas where you work, live, learn and/or play.**

8.  **Since March of 2020 (the start of the COVID-19 pandemic), how would you rate your physical health?**

| Excellent | Very Good | Good | Fair | Poor |
|-----------|-----------|------|------|------|

9.  **Would you rate your current physical health as Better, Similar, or Worse compared to your physical health prior to March of 2020?**

| Better | Similar | Worse |
|--------|---------|-------|

10. **Since March of 2020 (the start of the COVID-19 pandemic), how would you rate your mental health, including your mood, stress level, and your ability to think?**

| Excellent | Very Good | Good | Fair | Poor |
|-----------|-----------|------|------|------|

11. **Would you rate your current mental health as Better, Similar, or Worse compared to your mental health prior to March 2020?**

| Better | Similar | Worse |
|--------|---------|-------|

12. **Since March of 2020 (the start of the COVID-19 pandemic), if you sought services to address your mental health, including your mood, stress level and/or your ability to think, how often have you been able to get the services you need?**

| Always | Sometimes | Never | Not Applicable |
|--------|-----------|-------|----------------|

13. **What services would have improved overall mental and physical health of your family in the last year? (Check all that apply)**

| ☐ Childcare services | ☐ In-person school | ☐ Technology and internet service | ☐ Assistance with finding employment |
|---|---|---|---|
| ☐ Assistance with paying utilities | ☐ Assistance with paying rent | ☐ Assistance with finding healthcare | ☐ Assistance with finding substance use treatment |
| ☐ Assistance with mental health issues | ☐ Assistance with finding COVID-19 vaccine | ☐ Other _____ | |

14. **Since March of 2020, have you had enough money to pay for essentials such as:**

| | | | | |
|---|---|---|---|---|
| Food | Always | Sometimes | Never | N/A |
| Housing: Rent/Mortgage | Always | Sometimes | Never | N/A |
| Utilities | Always | Sometimes | Never | N/A |
| Car/Transportation | Always | Sometimes | Never | N/A |
| Insurance | Always | Sometimes | Never | N/A |
| Clothing/Hygiene Products | Always | Sometimes | Never | N/A |
| Medication/Treatments | Always | Sometimes | Never | N/A |
| Childcare | Always | Sometimes | Never | N/A |
| Tuition or Student Loans | Always | Sometimes | Never | N/A |

15. **Since March of 2020, have you applied for any of the following financial assistance due to the impact of the COVID-19 pandemic to assist with the essential cost of living expenses listed above?**

| | | |
|---|---|---|
| COVID-19 Relief Funding for You/Family | Yes | No |
| COVID-19 Relief Funding for your business | Yes | No |
| Unemployment due to loss of job (laid off) | Yes | No |
| Unemployment due to staying home to care for children, elderly parents, or ill family members | Yes | No |
| Unemployment due to COVID-19 illness (self) | Yes | No |
| WIC (Women, Infant, and Children) | Yes | No |
| SNAP Food Stamps | Yes | No |
| Medicaid Insurance | Yes | No |

16. **Since March of 2020, how often did you seek financial assistance to help pay for healthcare expenses (e.g. doctor bills, medications, medical treatments, doctor co-pay, etc.)**

| | | | |
|---|---|---|---|
| Always | Sometimes | Never | N/A |

17. **If you received a stimulus check in the fall of 2020 and spring of 2021, what impact did this have on alleviating your essential living expenses and access to healthcare?**

| | | | | |
|---|---|---|---|---|
| Strong Impact | Moderate Impact | Weak Impact | No Impact/No difference | Did Not Receive |

18. **Since March of 2020, was your employment impacted due to the COVID 19 pandemic? (Check all that apply)**

| ☐ No, continued working the same number of hours | ☐ No, required to continue working onsite | ☐ Yes, work hours were reduced | ☐ Yes, required to telework |
|---|---|---|---|
| ☐ Yes, furloughed (temporary job loss, able to return to work once management contacts you) | ☐ Yes, laid off | ☐ Yes, quit to care for children due to school closure | ☐ Yes, quit to care for ill family members |
| ☐ Yes, quit due to COVID-19 illness (self) | ☐ Yes, unable to return to work due to COVID-19 illness (long-term effects) | ☐ Yes, started a new job | ☐ Other: _____ |

19. **Since March of 2020, how do you currently pay for your healthcare including medications, dental, and health treatments? (Check all that apply)**

| ☐ Health insurance purchased on my own or by family member | ☐ Health insurance provided through employer | ☐ Indian Health Services | ☐ Medicaid/AHCCCS |
|---|---|---|---|
| ☐ Medicare | ☐ Use free clinics | ☐ Use my own money (out of pocket) | ☐ Veterans administration |
| ☐ Did not seek healthcare since March of 2020 | ☐ Other: _____ | | |

20. **Since March of 2020, what have been the primary barriers to seeking or accessing healthcare in your community? (Check all that apply)**

| ☐ Lack of childcare | ☐ Difficulty finding the right provider for my care | ☐ Fear of exposure of COVID-19 in a healthcare setting | ☐ Unsure if healthcare need is a priority during this time |
|---|---|---|---|
| ☐ Distance to provider | ☐ Inconvenient office hours | ☐ No health insurance coverage | ☐ Not enough health insurance coverage |
| ☐ Transportation to appointments | ☐ Understanding of language, culture, or sexual orientation differences | ☐ I have not experienced any barriers | ☐ Other: _____ |

21. **Since March of 2020, what have been the greatest strengths of your community? (Check all that apply)**

| | | | |
|---|---|---|---|
| ☐ Ability to communicate with city/town leadership and feel that my voice is heard | ☐ Accepting of diverse residents and cultures | ☐ Access to schools or school alternatives | ☐ Access to affordable childcare |
| ☐ Access to affordable healthy foods | ☐ Access to COVID-19 testing events | ☐ Access to cultural & educational events | ☐ Access to medical care |
| ☐ Access to affordable housing | ☐ Access to COVID-19 vaccine events | ☐ Access to quality online school options | ☐ Access to mental health services |
| ☐ Access to community programming such as classes & trainings | ☐ Access to Flu vaccine events | ☐ Access to jobs & healthy economy | ☐ Access to parks and recreation sites |
| ☐ Access to public libraries and community centers | ☐ Access to safe walking and biking routes | ☐ Access to substance abuse treatment services | ☐ Access to low crime / safe neighborhoods |
| ☐ Access to public transportation | ☐ Access to services for seniors | ☐ Access to support networks such as neighbors, friends, and family | |
| ☐ Access to religious or spiritual events | ☐ Access to social services for residents in need or crisis | ☐ Access to clean environments and streets | ☐ Other: _____ |

22. **Since March of 2020, in addition to COVID-19, which health conditions have had the greatest impact on your community's overall health and wellness? (Check all that apply)**

| | | | |
|---|---|---|---|
| ☐ Alcohol/Substance abuse | ☐ Cancers | ☐ Dementia/Alzheimer's | ☐ Diabetes |
| ☐ Heart disease and stroke | ☐ High blood pressure or cholesterol | ☐ HIV/AIDS | ☐ Lung disease (asthma, COPD, emphysema) |
| ☐ Vaccine preventable disease such as flu, measles, and pertussis (whooping cough) | ☐ Mental health issues (depression, anxiety, bipolar, etc) | ☐ Overweight/ obesity | ☐ Sexually transmitted disease |
| ☐ Tobacco use including vaping | ☐ Other: _____ | | |

23. **Since March of 2020, which of the following issues have had the greatest impact on your community's health and wellness? (Check all that apply)**

| | | | |
|---|---|---|---|
| ☐ Child abuse/elder abuse & neglect | ☐ Distracted driving (such as cell phone use, texting while driving) | ☐ Domestic violence / sexual assault | ☐ Gang-related violence |
| ☐ Gun-related injuries | ☐ Limited/lack of access to COVID19 testing | ☐ Lack of affordable healthy food options | ☐ Lack of people immunized to prevent disease |
| ☐ Homelessness | ☐ Limited access to healthcare | ☐ Lack of affordable housing | ☐ Lack of public transportation |
| ☐ Drug/substance abuse (illegal & prescribed) | ☐ Limited access to mental/behavioral health services | ☐ Lack of jobs | ☐ Lack of quality and affordable childcare |
| ☐ Lack of COVID-19 vaccine access | ☐ Limited access to educational and supportive programing for children and adolescents | ☐ Lack of alternative educational opportunities | ☐ Lack of safe spaces to exercise and be physically active |
| ☐ Lack of support networks such as neighbors, friends, and family | ☐ Motor vehicle & motorcycle crash injuries | ☐ Racism/ discrimination | ☐ Suicide |
| ☐ Teen Pregnancy | ☐ Other: _____ | | |

24. **Overall, how easy was it to navigate this electronic survey?**

| | | | | |
|---|---|---|---|---|
| ☐ Very easy to use | ☐ Easy to use | ☐ Neither easy nor difficult to use | ☐ Difficult to use | ☐ Very difficult to use |

25. **Based on the given survey questions above, the information provided was easy to understand.**

| | | | | |
|---|---|---|---|---|
| ☐ Strongly agree | ☐ Agree | ☐ Neutral | ☐ Disagree | ☐ Strongly disagree |

26. **What else would you like to share with us regarding your experience with COVID-19 that we didn't ask?**

27. **Want to tell us more? We want to share community members' stories. Let us know you're interested by indicating your type of experience along with sharing your email address/phone so we can contact you.**

   ☐ I experienced COVID-19. _____
   ☐ A loved one experienced COVID-19. _____
   ☐ My work was impacted by COVID-19. _____
   ☐ Other: _____

**Thank you for completing MCDPH's COVID-19 Impact Community Health Assessment Survey.**

## Appendix C – Survey Demographics
2019 & 2021 Community Survey Demographics

| 2019 | |
|---|---|
| Total # of participants | 11,893 |
| Race/Ethnicity | |
| African American/Black | 3.0% |
| American Indian/Native American | 2.0% |
| Asian | 25.0% |
| Caucasian/White | 61.0% |
| Hispanic/Latinx | 4.0% |
| Other | 6.0% |
| Age | |
| 12-24 | 8.0% |
| 25-44 | 32.0% |
| 45-64 | 39.0% |
| 65+ | 21.0% |
| Gender | |
| Female | 73.0% |
| Male | 25.0% |
| Other | 1.0% |

| 2021 | |
|---|---|
| Total # of participants | 14,380 |
| Race/Ethnicity | |
| African American/Black | 4.1% |
| American Indian/Native American | 1.4% |
| Asian | 4.5% |
| Caucasian/White | 64.5% |
| Hispanic/Latinx | 18.3% |
| Native Hawaiian/Other Pacific Islander | 1.2% |
| Two or more races | 1.2% |
| Unknown/Not given | 4.9% |
| Age | |
| 12-24 | 6.4% |
| 25-44 | 30.9% |
| 45-64 | 43.0% |
| 65+ | 20.0% |
| Gender | |
| Female | 68.9% |
| Male | 29.1% |
| Additional Genders | 0.6% |
| Unknown/Not Given | 1.4% |

## Appendix D – Chandler Regional Medical Center FY20 PSA Zip Codes

| CRMC's PSA Zip Codes | | |
|---|---|---|
| 85044 | 85202 | 85249 |
| 85048 | 85224 | 85283 |
| 85122 | 85225 | 85284 |
| 85138 | 85226 | 85286 |
| 85139 | 85233 | |
| 85147 | 85248 | |

## Appendix E – Participating Organizations in the Community Health Committee (CHC) Meetings

| Dignity Health and CommonSpirit Health | |
|---|---|
| Arizona General Hospitals | Dignity Health East Valley Hospitals Community Board |
| CommonSpirit Health leadership | Dignity Health East Valley physicians |
| Dignity Health Center for Diabetes management program leadership | Dignity Health Foundation East Valley |
| Dignity Health Community Education program leadership | Dignity Health Medical Group |
| Dignity Health Community Oral Health program leadership | St. Joseph's Hospital and Medical Center |
| Dignity Health Community Wellness program leadership | St. Joseph's Hospital and Medical Center; Community Health |
| Dignity Health East Valley Community Grants Committee | |
| Dignity Health East Valley Executive Leadership | |

| Community Partners | |
|---|---|
| About Care | Hushabye Nursery |
| Amanda Hope Rainbow Angels | ICAN: Positive Programs for Youth |
| Amplify Peace | Intel |
| Aster Aging | LaLoBoy Foundation |
| AZCEND | Lighthouse Psychiatry |
| Cancer Support Community Arizona | Maricopa County Department of Public Health |
| CeCe's Hope Center | Mercy Care |
| Chandler CARE Center | Mesa Chamber of Commerce |
| Chandler Children's Medical and Dental Clinic | Mission of Mercy |
| Chandler Unified School District | notMYkid |
| Child Crisis Arizona | Positive Paths for Women East Valley |
| City of Chandler | Queen Creek Chamber of Commerce |
| First International Bank & Trust | Rayhons Financial |
| Foundation for Senior Living | Teen Unity Board |
| Help & Hope for Youth | Town of Gilbert - Councilmember |
| Hope for Addiction | UCSF |

# Appendix F – Summary of Dignity Health's Human Trafficking 101 Session: Dispelling the Myths

| MYTH ❌ | FACT ✅ |
|---|---|
| **1.** Human trafficking only happens overseas. | Every country is affected by human trafficking, including the United States. The USA passed federal legislation **to outlaw two common forms of human trafficking**: sex trafficking and labor trafficking. According to federal law, human trafficking means **forcing or coercing a person to perform commercial sex or labor/services**. Commercial sex is any sex act in which money or something of value is exchanged. Under federal law, anyone under age 18 involved in commercial sex is automatically a victim of human trafficking – no force or coercion is required. |
| **2.** Only foreign nationals/immigrants are trafficked in the United States. | In 2018, nearly 11,000 tips of human trafficking were reported and **at least 1,237 of these tips involved U.S. citizens or lawful permanent residents**. |
| **3.** Human trafficking and human smuggling are the same crime. | Human trafficking is **NOT** the same crime as human smuggling. Human trafficking is a violation of someone's human rights. Human smuggling is a violation of a country's immigration laws. A person can consent to being smuggled into the country; however, if that person is forced or coerced into commercial sex or labor/services, then they are a victim of human trafficking. |
| **4.** Sex trafficking could never occur in a legal setting like a strip club. | Sex trafficking has been discovered in legal business settings (e.g., strip clubs, escort services, and pornography). **Regardless of the location or legality**, any person induced to perform commercial sex or labor through force or coercion is a victim of human trafficking. |
| **5.** Everyone engaging in prostitution is doing so by choice. | Oftentimes adults are "choosing" to perform commercial sex work due to a **lack of options** as opposed to a free choice. We must refrain from passing judgment and we must offer compassion and resources to persons in need of assistance. |
| **6.** Victims of human trafficking will reach out for help. | Oftentimes victims of sex trafficking, especially youth, do not self-identify as victims. Due to prior abuse, victims may not realize they are being manipulated or exploited. Sex traffickers often target vulnerable and abused youth. Victims of sex or labor trafficking may blame themselves, may fear authorities, or may fear retaliation by traffickers. Foreign national victims may not speak English and may not know their rights in America. |
| **7.** Only women and girls are victims of sex trafficking. | Men and boys are also victims of sex trafficking. Traffickers often target young men and boys living on the streets, many of whom identify as LGBTQ. |
| **8.** Child sex trafficking could never occur in my community. | Child sex trafficking has been reported **in every region served by Dignity Health**. |
| **9.** All sex traffickers are stereotypical pimps. | The term pimp is often associated with a stereotypical pimp (e.g., flashy hat and clothes). These pimps are no longer the norm. "Pimping" has become so normalized and even glamorized in the media that many young men and boys, especially gang members, want to |

| | |
|---|---|
| | become pimps. Gangs consider it easier to sell a person for sex than to sell drugs or guns. **Drugs and guns can be sold only once**. **A person, however, can be sold for sex over and over.** Anyone can be a trafficker, including family members, friends, and neighbors. This crime is not exclusive to known pimps or gang members. One mother sold her 7- and 14-year-old daughters for sex. |
| **10.** Human trafficking refers only to sex trafficking. | Human trafficking is an umbrella term that includes both sex and **labor trafficking**. Unfortunately, labor trafficking often does not get as much exposure in the media as does sex trafficking. Labor trafficking has been identified in industries like agriculture, hospitality, domestic work (e.g., live-in maid), and traveling sales crews. Red flags include the following:<br><br>• Victims may be charged a fee that is impossible to pay off (i.e., debt bondage).<br>• Victims may be forced to work 12+ hours per day, 7 days per week. •<br>Victims may not be allowed to leave the work premises and may be forced to sleep on the floor or on a cot in the back of the business.<br>• Victims of domestic servitude may be forced to sleep in the home. Victims working in traveling sales crews may be forced to sleep in a van or other vehicle. |

# Appendix G – Data Indicator Matrix

**Resource Responsibility**

**HDD** - Hospital Discharge Data
**BRFSS** - Behavioral Risk Factor Surveillance Survey
**ACS** - American Community Survey (Census)
**YRBS** - Youth Risk Behavior Survey
**AYS** - Arizona Youth Survey
**H-CUP** - The Healthcare Coast & Utilization Project
**IP** - Iinpatient hospitalization
**ED** - Emergency Department Visits

| Indicator | **Source** | HDD | BRFSS | ACS;Census | YRBS | Death | Birth | ADHS | AYS | PolicyMap | H-CUP | **Level** | Maricopa County | Regions | Zipcode | National | State |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Population Demographics** | | | | | | | | | | | | | | | | | |
| Gender | | | | ● | | | | | | | ● | | ● | ● | ● | ● | ● |
| Age Groups | | | | ● | | | | | | | ● | | ● | ● | ● | ● | ● |
| Race/Ethnicity | | | | ● | | | | | | | ● | | ● | ● | ● | ● | ● |
| Education | | | | ● | | | | | | | ● | | ● | ● | ● | ● | ● |
| Income | | | | ● | | | | | | | ● | | ● | ● | ● | ● | ● |
| Employment Status | | | | ● | | | | | | | ● | | ● | ● | ● | ● | ● |
| **Access to Health Care** | | | | | | | | | | | | | | | | | |
| Health Insurance Coverage | | | | ● | | | | | | | | | ● | | | ● | ● |
| Poverty | | | | ● | | | | | | | | | ● | | | ● | ● |
| Health Care Coverage (18-64) | | | ● | | | | | | | | | | ● | | | | ● |
| Usual Source of Care | | | ● | | | | | | | | | | ● | | | | ● |
| Routine Checkup (last year) | | | ● | | | | | | | | | | ● | | | | ● |
| Primary Payer Type for ED/IP | | ● | | | | | | | | | ● | | ● | | | | |
| **Birth Related** | | | | | | | | | | | | | | | | | |
| IMR | | | | | | ● | ● | | | | | | ● | ● | ● | | |
| Low Birth Weight | | | | | | | ● | | | | | | ● | ● | ● | | |
| PreTerm Births | | | | | | | ● | | | | | | ● | ● | ● | | |
| Teen Birth | | | | | | | ● | | | | | | ● | ● | ● | | |
| Prenatal Care Began | | | | | | | ● | | | | | | ● | ● | ● | | |
| **Top 5 leading cause of death** | | | | | | ● | | | | | | | ● | ● | ● | | |
| **Youth top 5 leading cause of death** | | | | | | ● | | | | | | | ● | ● | ● | | |
| **Top 5 leading emergency department and hospitalization reasons** | | ● | | | | | | | | | ● | | ● | ● | ● | ● | ● |
| **Cancer Incidence & Prevention** | | | | | | | | | | | | | | | | | |
| Cancer (by type) Incidence | | | | | | | | | ● | | | | ● | | | | ● |
| Cancer (by type) Screening | | | ● | | | | | | | | | | ● | | | ● | ● |
| Cancer (by type) Deaths | | | | | | ● | | | | | | | ● | ● | ● | | ● |
| **Chronic Disease** | | | | | | | | | | | | | | | | | |
| Stroke | | | ● | | | | | | | | ● | | ● | ● | ● | ● | ● |
| Stroke Deaths | | | | | | ● | | | | | | | ● | ● | ● | | ● |
| *% Been told they have high blood pressure* | | | ● | | | | | | | | | | ● | | | ● | ● |
| Cardiovascular Disease | | | ● | | | | | | | | ● | | ● | | | ● | ● |
| Cardiovascular Disease Deaths | | | | | | ● | | | | | | | ● | ● | ● | | ● |
| *% Told they have high cholesterol* | | | ● | | | | | | | | | | ● | | | ● | ● |
| Diabetes | | | ● | | | | | | | | ● | | ● | | | ● | ● |
| Diabetes Deaths | | | | | | ● | | | | | | | ● | ● | ● | | ● |
| *Been told they have diabetes* | | | ● | | | | | | | | | | ● | | | ● | ● |
| Alzheimer's ED/IP | | | ● | | | | | | | | ● | | ● | ● | ● | | ● |
| Alzheimer's Deaths | | | | | | ● | | | | | | | ● | ● | ● | | ● |
| *% told they have Confusion/Memory Loss* | | | ● | | | | | | | | | | ● | | | ● | ● |
| COPD ED/IP | | | ● | | | | | | | | ● | | ● | ● | ● | | ● |
| COPD Deaths | | | | | | ● | | | | | | | ● | ● | ● | | ● |
| *Been told they have asthma* | | | ● | | | | | | | | | | ● | | | ● | ● |
| Asthma ED/IP | | | ● | | | | | | | | ● | | ● | ● | ● | | ● |
| Asthma Deaths | | | | | | ● | | | | | | | ● | ● | ● | | ● |
| *Been told they have asthma* | | | | ● | | | | | | | | | ● | | | ● | ● |

| Resource Responsibility | Source | HDD | BRFSS | ACS;Census | YRBS | Death | Birth | ADHS | AYS | PolicyMap | H-CUP | Level | Maricopa County | Regions | Zipcode | National | State |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Mental/Behavioral Illness** | | | | | | | | | | | | | | | | | |
| Mood and Depressive Disorders | | �show | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Schizophrenic Disorders | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Drug-Induced Mental and Behavioral Disorders | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| All Mental/Behavioral disorders | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| **Behavioral Health Risk Factors** | | | | | | | | | | | | | | | | | |
| Alcohol Related ED/IP | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Alcohol Related Deaths | | | | | | ▨ | | | | | | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Intentional Self-Harm/Suicide ED/IP | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Intentional Self-Harm/Suicide Death | | | | | | ▨ | | | | | | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Opioids - Unintentional overdose ED/IP | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Opioids - Unintentional overdose Deaths | | | | | | ▨ | | | | | | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Alcohol/Drug use | | | ▨ | | | | | | | | | | ▨ | | | ▨ | ▨ |
| Youth Alcohol/drug use | | | | | | | | | ▨ | | | | ▨ | | | | ▨ |
| Smoking | | | ▨ | | | | | | | | | | ▨ | | | ▨ | ▨ |
| Youth Smoking | | | | | | | | | ▨ | | | | ▨ | | | | ▨ |
| Nutrition/Diet | | | ▨ | | | | | | | | | | | | | ▨ | ▨ |
| Youth Nutrition/Diet | | | | | ▨ | | | | | | | | | | | ▨ | ▨ |
| Physical Activity | | | ▨ | | | | | | | | | | ▨ | | | ▨ | ▨ |
| Youth Physical Activity | | | | | ▨ | | | | | | | | | | | ▨ | ▨ |
| Obesity | | | ▨ | | | | | | | | | | ▨ | | | ▨ | ▨ |
| Youth Obesity | | | | | ▨ | | | | | | | | | | | ▨ | ▨ |
| **Injury** | | | | | | | | | | | | | | | | | |
| Motor Vehicle Crash related ED/IP | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Motor Vehicle Crash related Deaths | | | | | | ▨ | | | | | | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Fall Related ED/IP | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Fall Related Deaths | | | | | | ▨ | | | | | | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Violence-related ED/IP | | ▨ | | | | | | | | | ▨ | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Violence-related Deaths | | | | | | ▨ | | | | | | | ▨ | ▨ | ▨ | ▨ | ▨ |
| **Social Determinants of Health** | | | | | | | | | | | | | | | | | |
| Transportation; no vehicle households | | | | | | | | | | ▨ | | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Access to Food; Low Income Low Access | | | | | | | | | | ▨ | | | ▨ | ▨ | ▨ | ▨ | ▨ |
| Housing; cost burdened | | | | | | | | | | ▨ | | | ▨ | ▨ | ▨ | ▨ | ▨ |

**Resource Responsibility**

**HDD** - Hospital Discharge Data
**BRFSS** - Behavioral Risk Factor Surveillance Survey
**ACS** - American Community Survey (Census)
**YRBS** - Youth Risk Behavior Survey
**AYS** - Arizona Youth Survey
**H-CUP** - The Healthcare Coast & Utilization Project
**IP** - linpatient hospitalization
**ED** - Emergency Department Visits