

Maine Shared
Community Health
Needs Assessment

#### **Androscoggin County**

November 7, 2024

#### Maine Shared CHNA

The Maine Shared Community Health Needs Assessment (Maine Shared CHNA) is a collaborative partnership between Central Maine Healthcare, Northern Light Health, MaineGeneral Health, MaineHealth, the Maine Center for Disease Control and Prevention, and the Maine Community Action Partnership. By engaging and learning from people and communities and through data analysis, the partnership aims to improve the health and well-being of all people living in Maine.





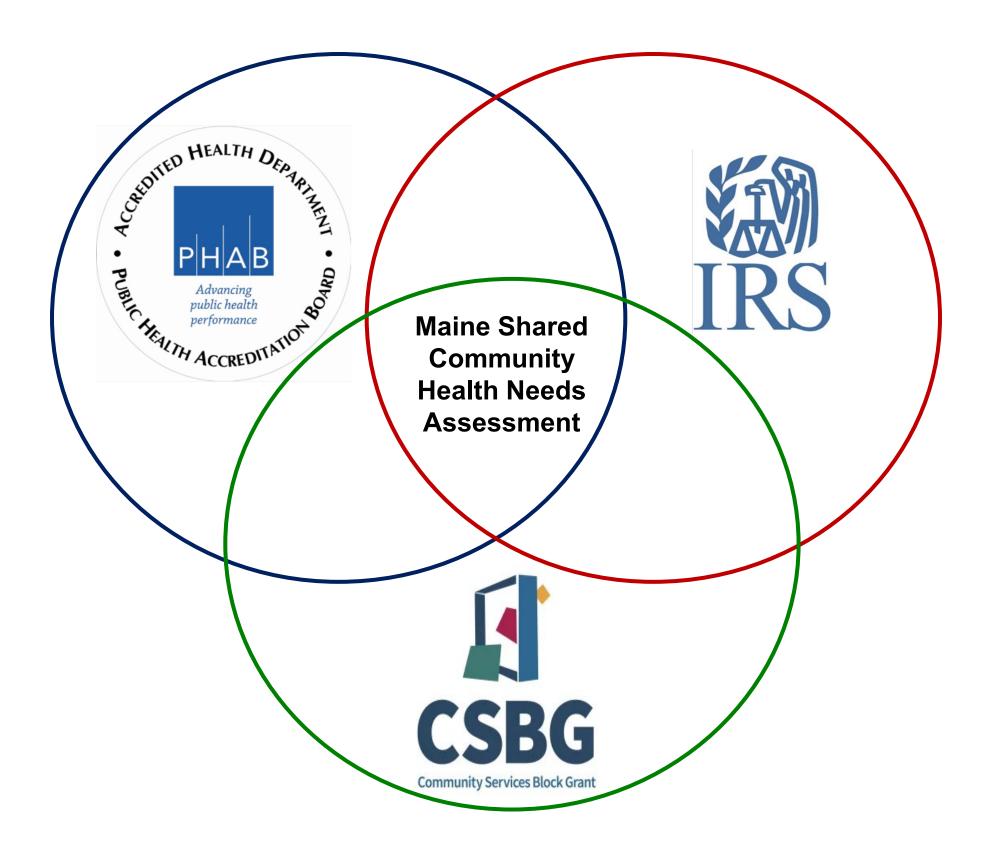








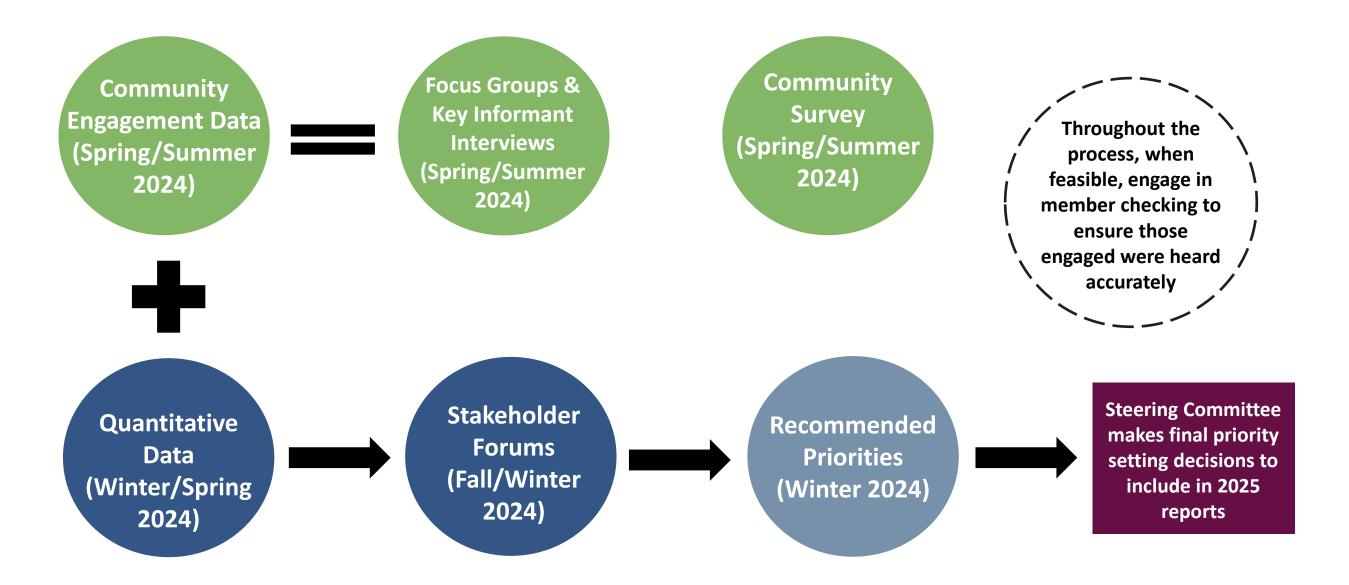
#### Maine Shared CHNA



- Steering Committee
- Program Manager
- Standing Committees
  - Metrics
  - Community Engagement
- Ad-Hoc Committees
- Local Planning Teams

#### Maine Shared CHNA

#### 2024 CHNA Data Analysis, Community Engagement, and Prioritization Process & Timeline



Surveys conducted statewide, included both general community members and professionals; Focus Groups conducted with community members, both low-income population and health equity groups; Key Informant Interviews conducted when focus groups weren't feasible or to collect more information; Stakeholder forums conducted with professionals and advocates

#### **Next Steps**

- County reports will be drafted summarizing the data analysis, community engagement findings, and Forum discussions related each County's final priorities.
- The Steering Committee will review and compile the priorities from each County to inform the final priorities for the State.
- Final reports will be released in March 2025.
- Reports are used by health systems for community health improvement planning, the MeCDC for state health improvement planning, & the CAPs for strategic and programmatic planning

#### Agenda

Welcome!

Overview of Key Findings & Prioritization Voting

**Breakout:** Discussion of Findings & Prioritization Voting

Discussion Report Out & Second Round of Voting

#### **BREAK**

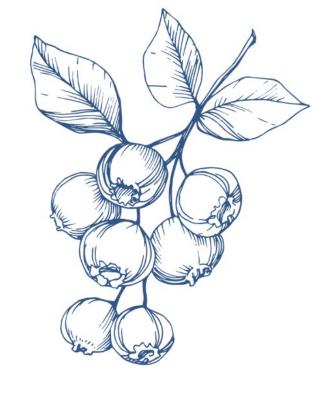
Presentation of Final Priorities

Breakout: Deeper Discussion of Priorities, Round 1

**Breakout:** Deeper Discussion of Priorities, Round 2

**Breakout**: Deeper Discussion of Priorities, Round 3

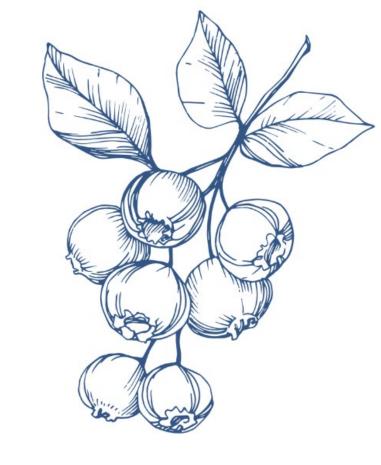
**Conclusion & Next Steps** 



#### Housekeeping

- Step Up. Step Back.
- Listen Longer. Be Curious. Be Bold.
- Take Breaks. Water and De-Water. Move Your Body.
- Maintain Confidentiality.
- Acknowledge Positionality.

2023 Community Agreements.pdf (mainephilanthropy.org)

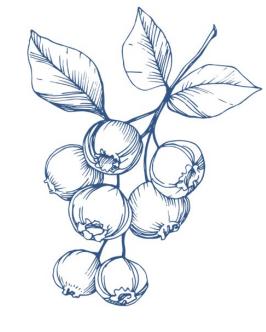




## Key Findings

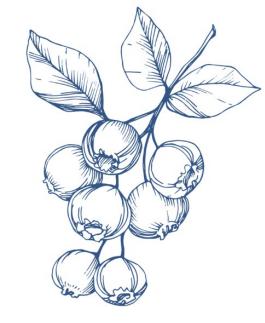
#### **Quantitative Data**

- Indicators are reviewed and updated, as needed, by the Metrics
   Committee using identified criteria
- Data comes from national, state and at times programmatic sources
- Some data is missing or suppressed due to small sample sizes
- Other data may be missing due to complications in collection or errors in analysis on the end of the data source
- The most up to date data profiles can be found on the MeSCHNA website



#### **Qualitative Data**

- Community engagement framework and populations to engage are developed by the Community Engagement Committee
- This cycle's engagement included focus groups (state and county wide), key informant interviews, and surveys
- The multiprong engagement is intended to hear from as many people as possible within our capacity and resources
- The qualitative data and quantitative data are meant to complement each other
- The most up to date overviews can be found at the MeSCHNA website.

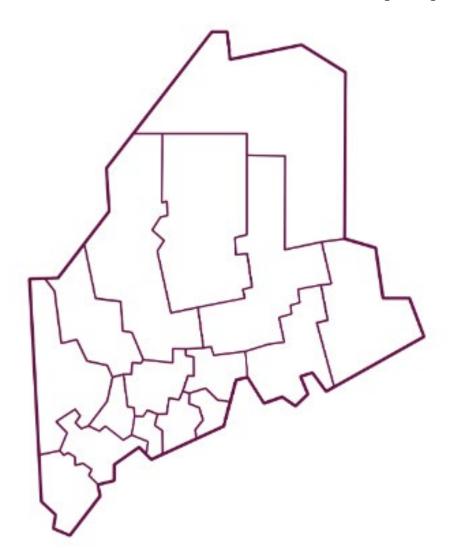


#### Demographics

#### **Total Population**

111,532

8.2% of the total state population



Population by Age



21.8%



Age 18-64

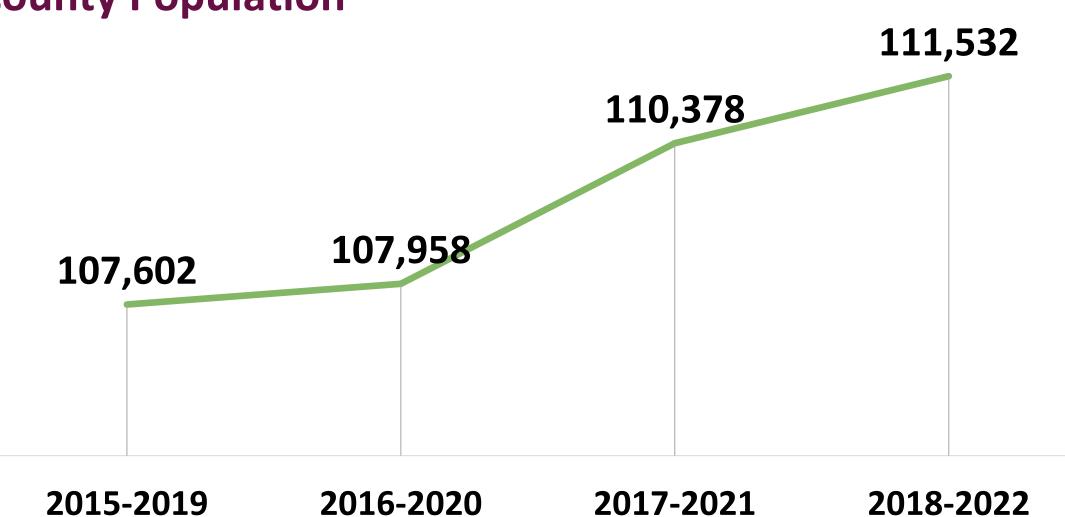


Age 65+

**17.3**%

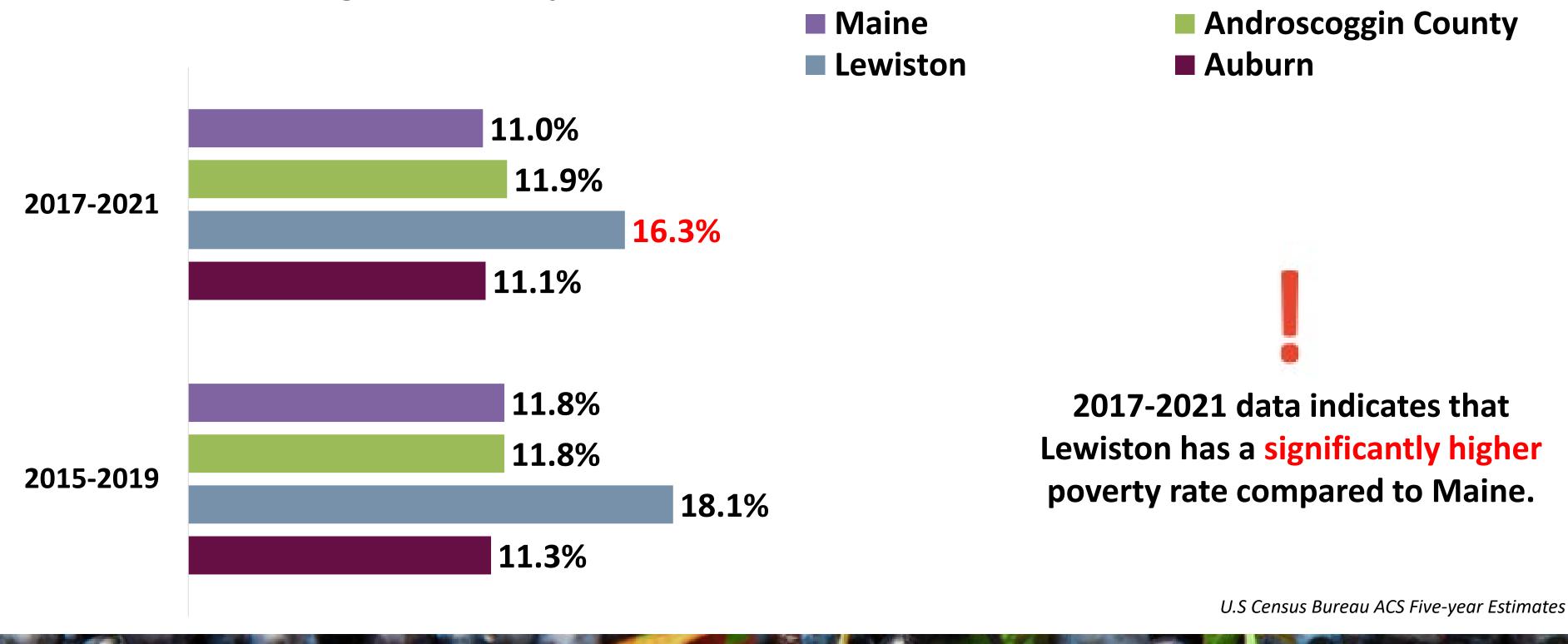
U.S Census Bureau ACS Five-year Estimates 2018-2022

#### **County Population**



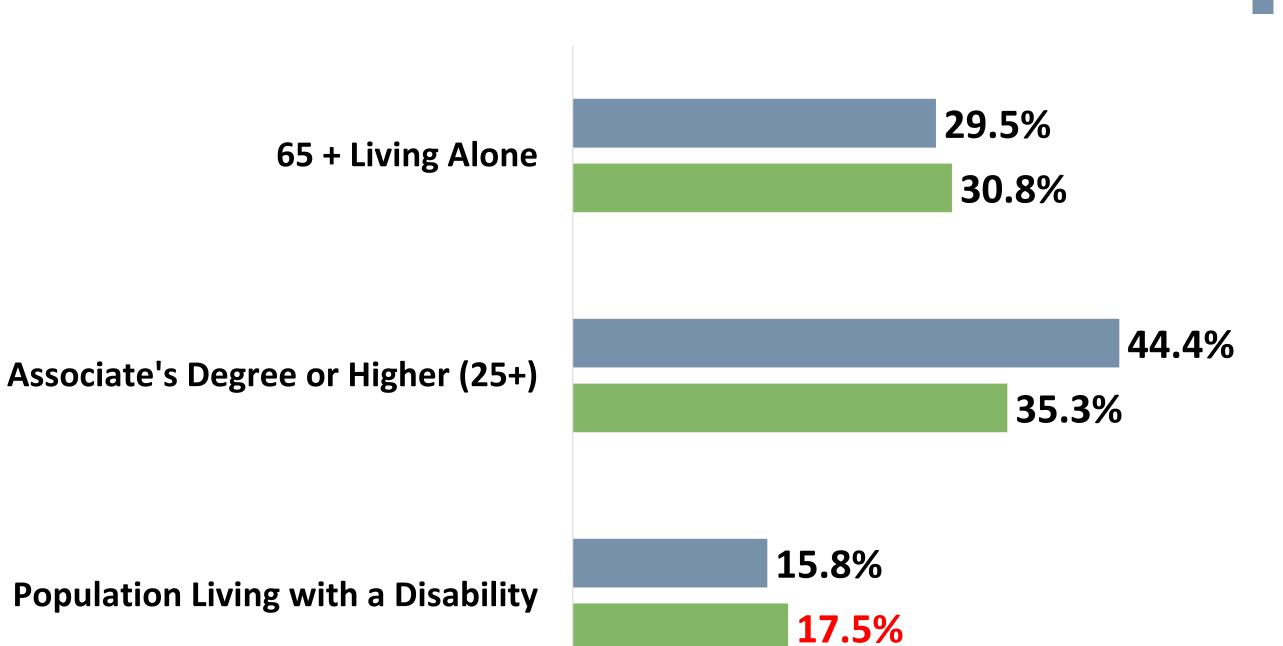
#### Demographics

#### Individuals Living in Poverty



#### Demographics

#### Social Drivers of Health

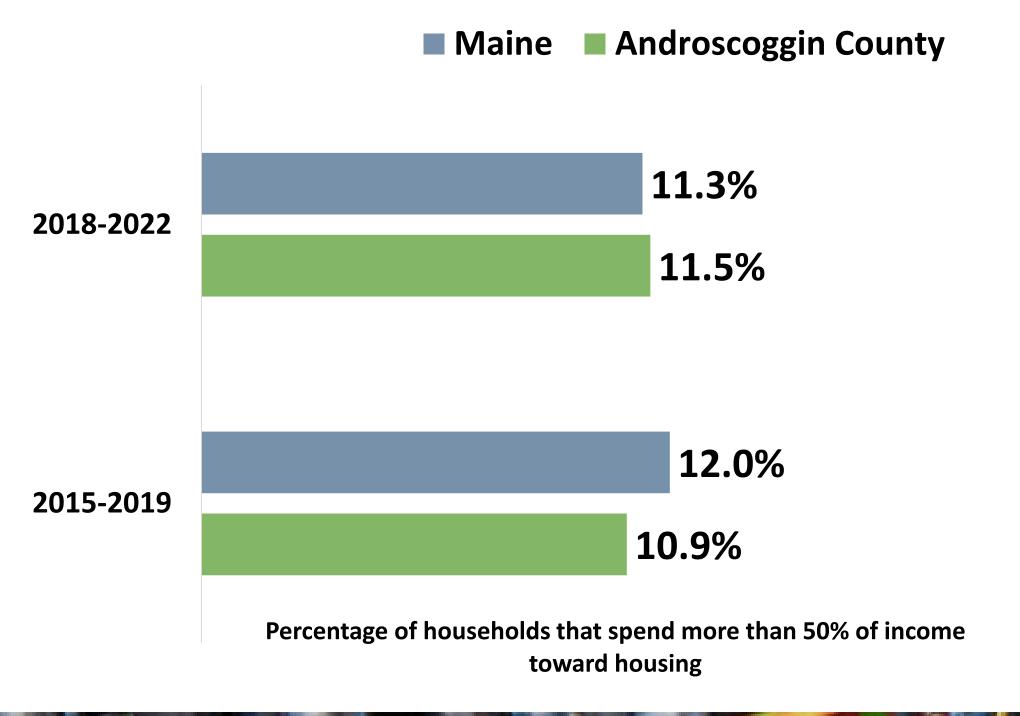


■ Maine ■ Androscoggin County

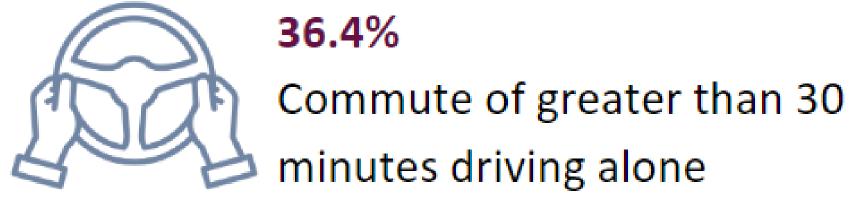
2017-2021 data reflects that Androscoggin County had a significantly higher rate of people living with a disability compared to Maine.

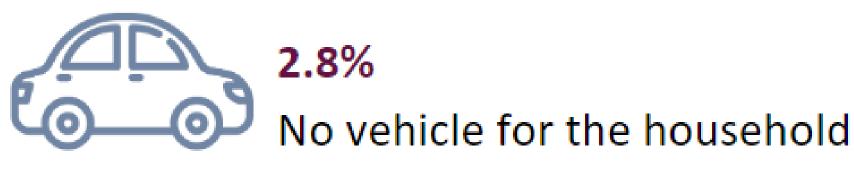
U.S Census Bureau ACS Five-year Estimates 2018-2022 People Living with a Disability, U.S Census Bureau ACS Five-year Estimates 2017-2021

#### Costburdened Households



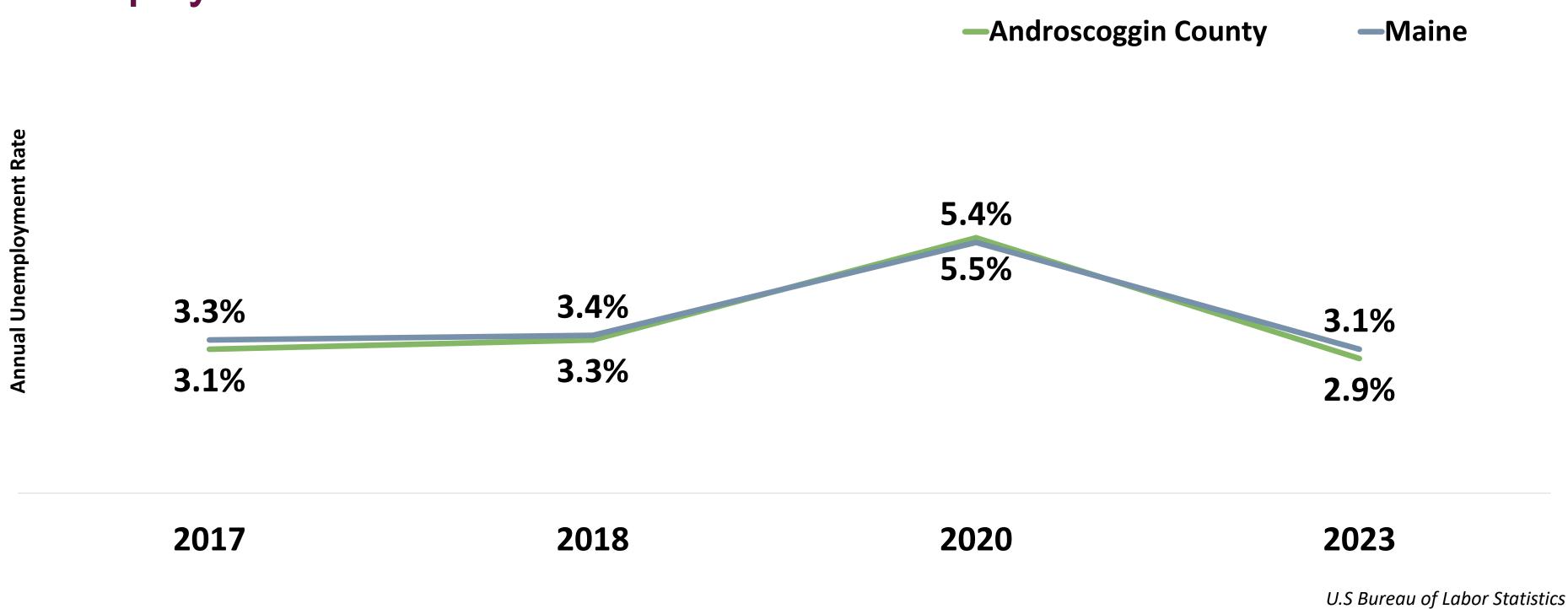
#### **Transportation**





U.S Census Bureau ACS Five-year Estimates 2018-2022 No Vehicle for the Household, U.S Census Bureau ACS Five-year Estimates 2017-2021

#### Unemployment



#### **Economic Wellbeing**



Median household income

2015-2019: \$53,509

2017-2021: \$59,287



Households living above the federal poverty level but below the Asset Limited Income Constrained Employed

threshold of financial survival

2019: 27.6%

2022: 30.6%



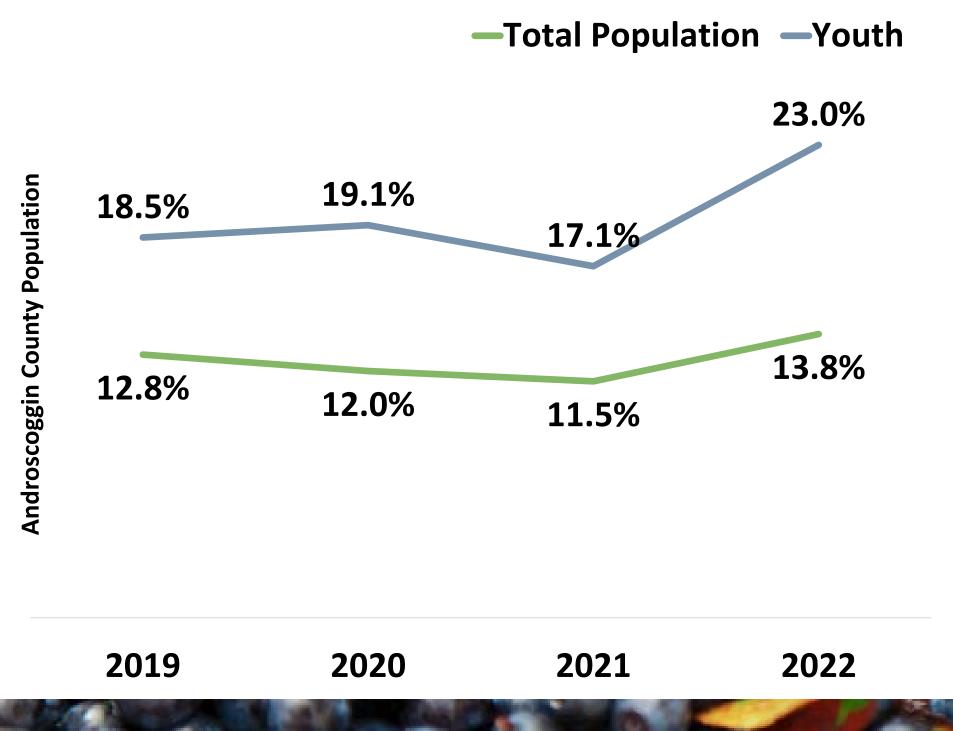
The 2017-2021 median household income in Androscoggin County is significantly lower compared to Maine (\$63,182).

#### **ALICE**

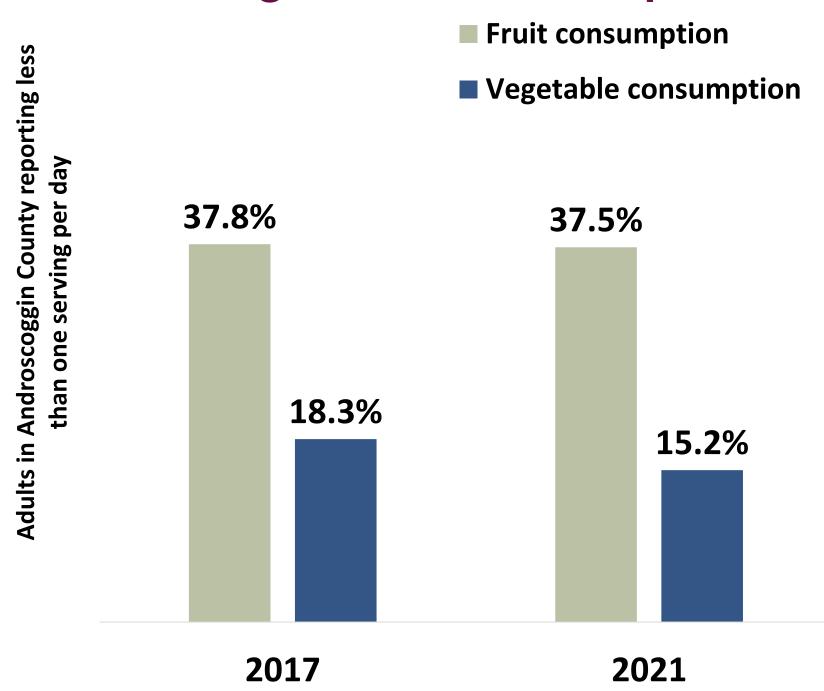
Working families who are struggling to afford basic necessities like housing, food, and childcare despite earning an income technically above the poverty line.

These families are working but still financially insecure due to the high cost of living in their area.





#### Fruit & Vegetable Consumption



#### **Child Care**



**Child Care Centers** 

2020: 83

2024: 70



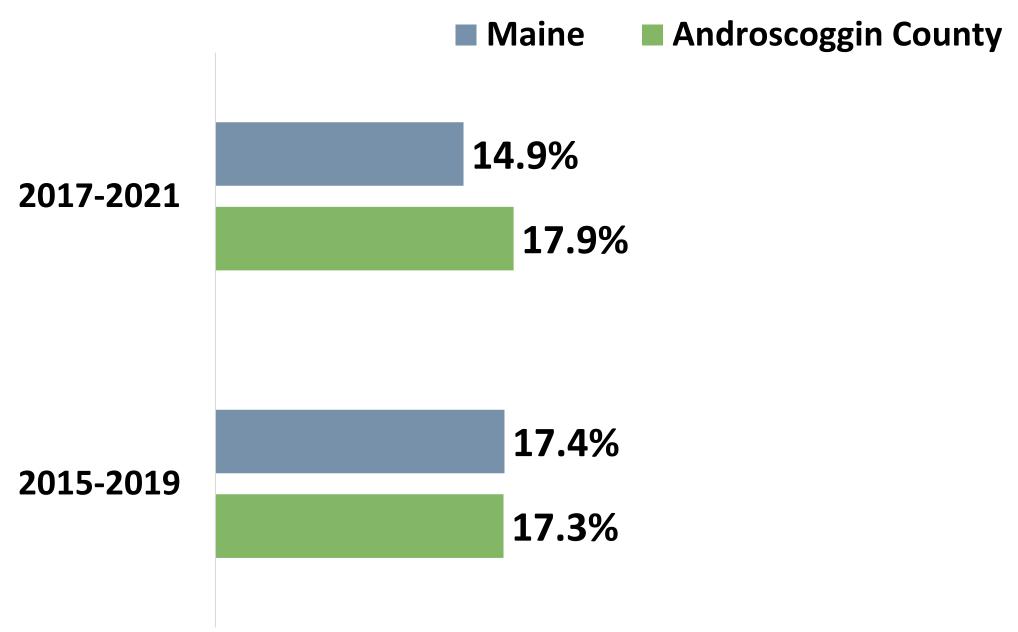
Children served in publicly

funded state & local preschools

2019: 70.3%

2023: 65.8%

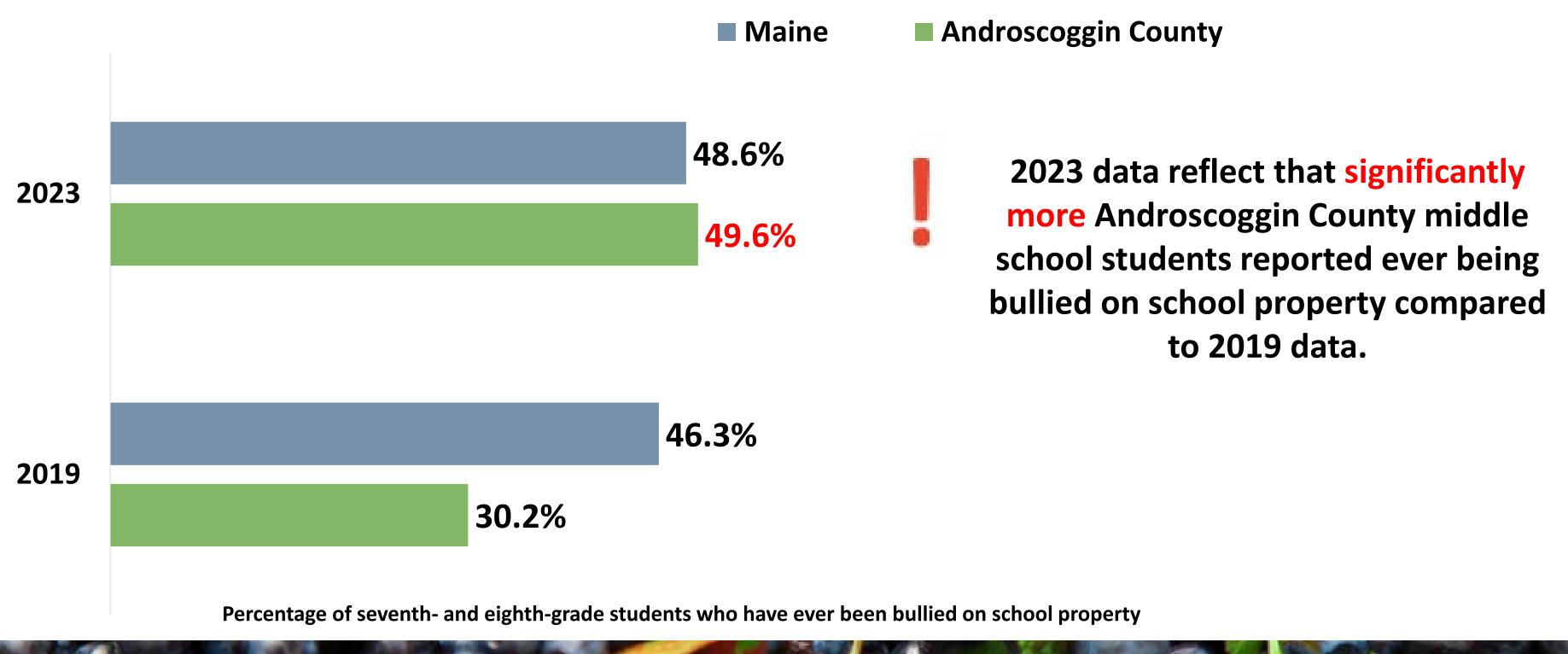
## Head Start eligible infants, toddlers & preschool age children



Percentage of children under 6 who live in households where the total income of the householder's family has been below the established federal poverty level in the past year

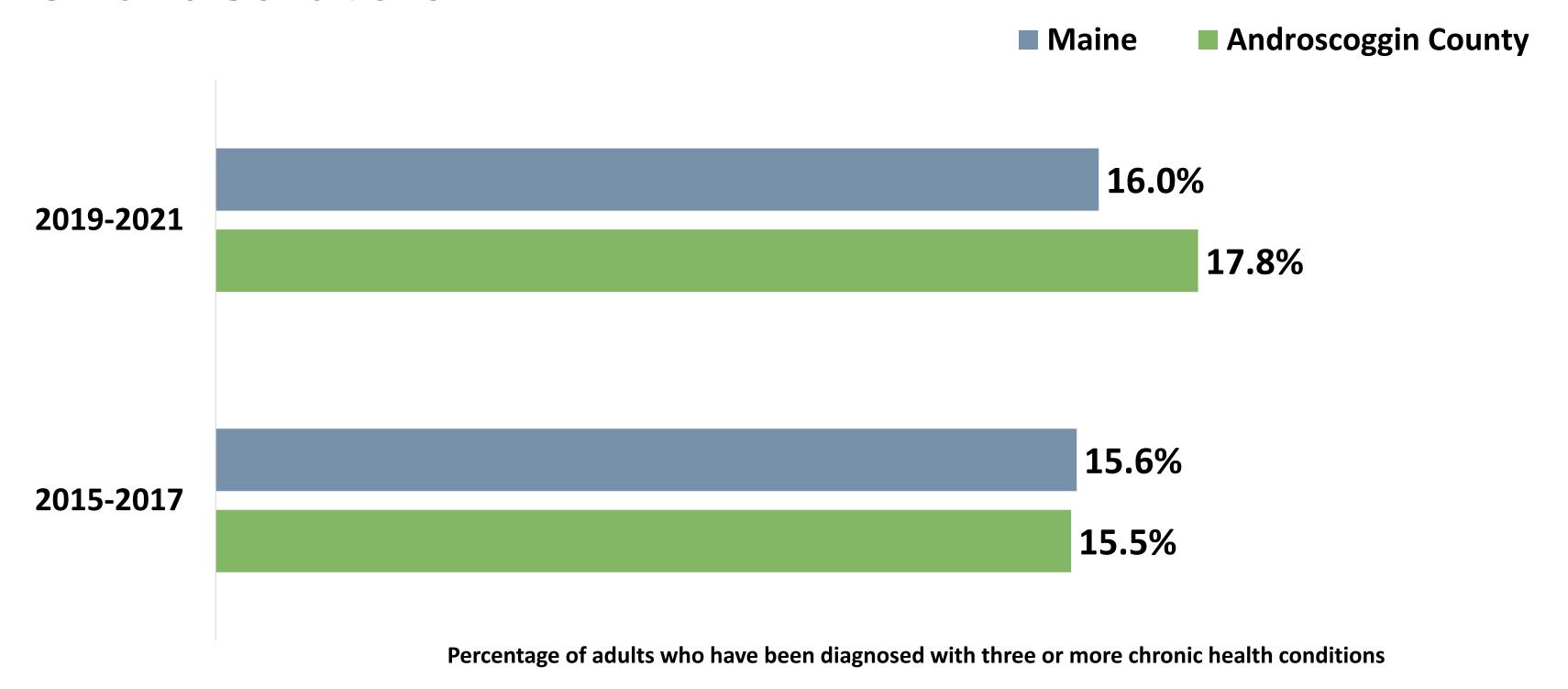
#### Protective & Risk Factors

#### **Bullying**



#### Protective & Risk Factors

#### **Chronic Conditions**



#### **Leading Causes of Death**

Rank	United States	Maine	Androscoggin County	
1	Heart Disease	Heart Disease	Heart Disease	
2	Cancer	Cancer	Cancer	
3	Unintentional Injury	Unintentional Injury	Unintentional Injury	
4	Chronic Lower Respiratory Disease	Chronic Lower Respiratory Disease	COVID-19	
5	Cerebrovascular Diseases	COVID-19	Chronic Lower Respiratory Disease	
6	Alzheimer's Disease	Cerebrovascular Diseases	Alzheimer's Disease	
7	Diabetes	Diabetes	Diabetes	
8	Influenza & Pneumonia	Alzheimer's Disease	Cerebrovascular Diseases	
9	Liver Disease	Liver Disease	Chronic Liver Disease and Cirrhosis	
10	Suicide	Influenza & Pneumonia	Suicide	



Cardiovascular disease deaths per

100,000 population

2015-2019: 221.1

2018-2022: 229.1

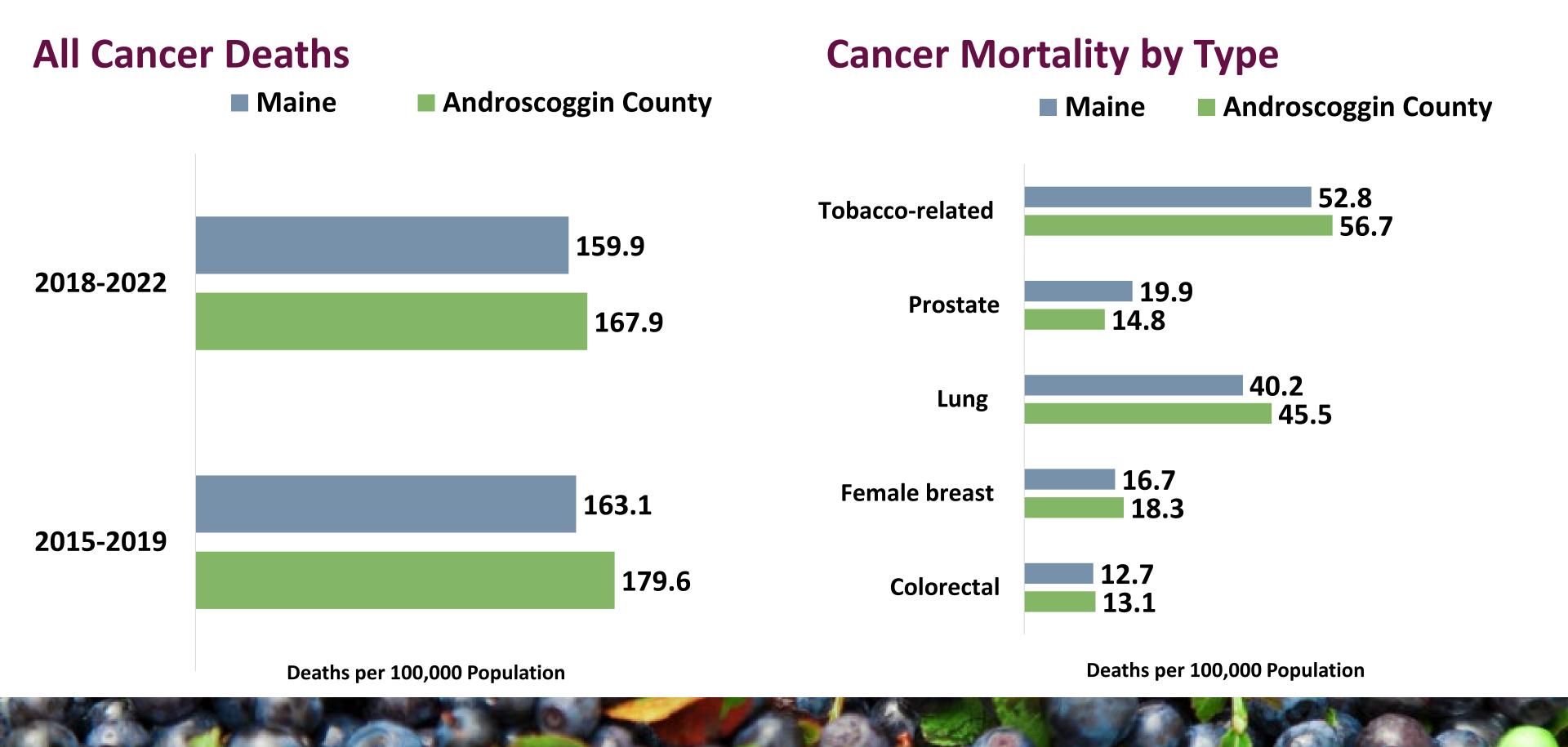


Injury deaths per 100,000 population

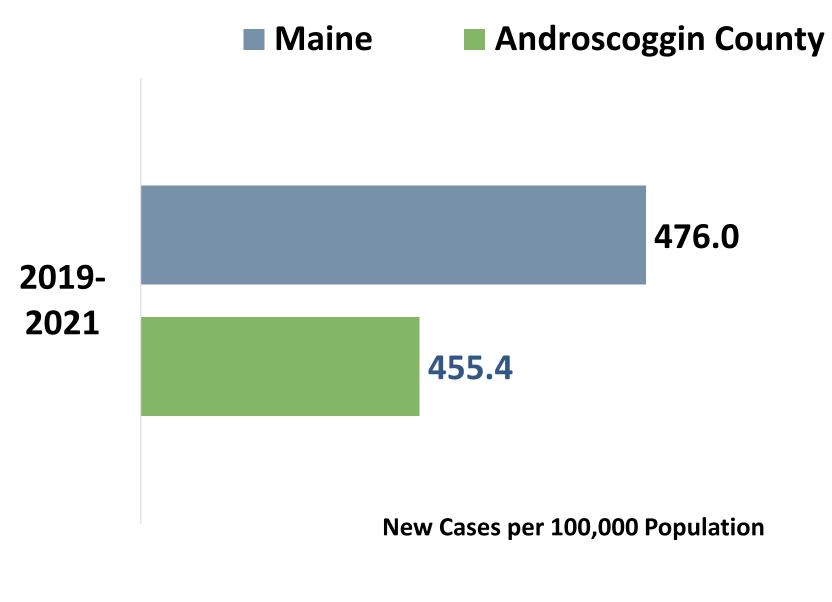
2015-2019: 82.8

2018-2022: 108.1

<sup>\*</sup>Drug overdose deaths are included in unintentional injury deaths for ranking causes of death.



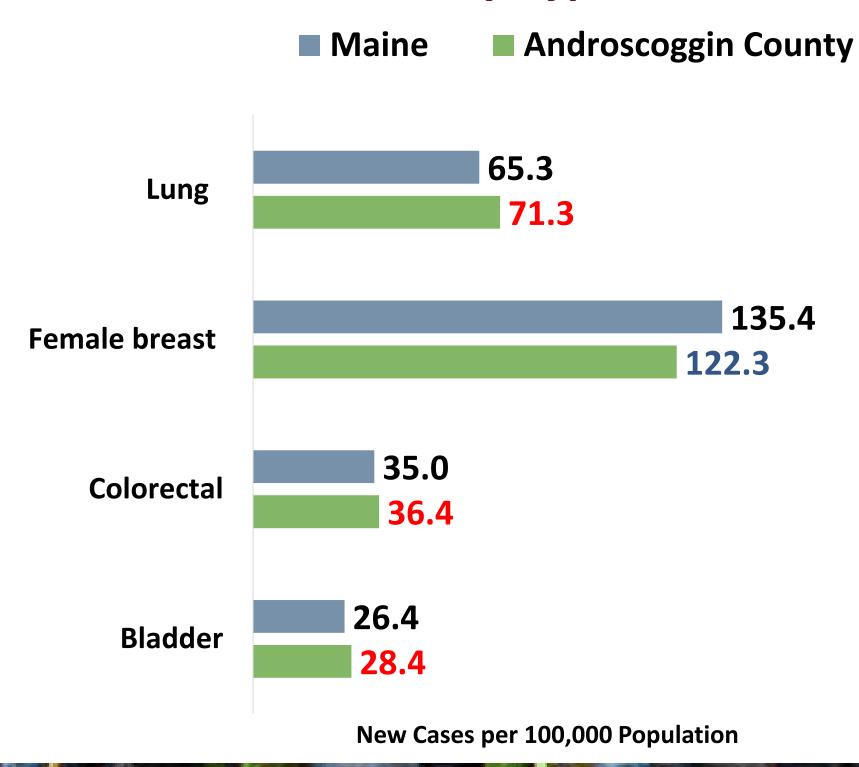
#### **New Cancer Cases**

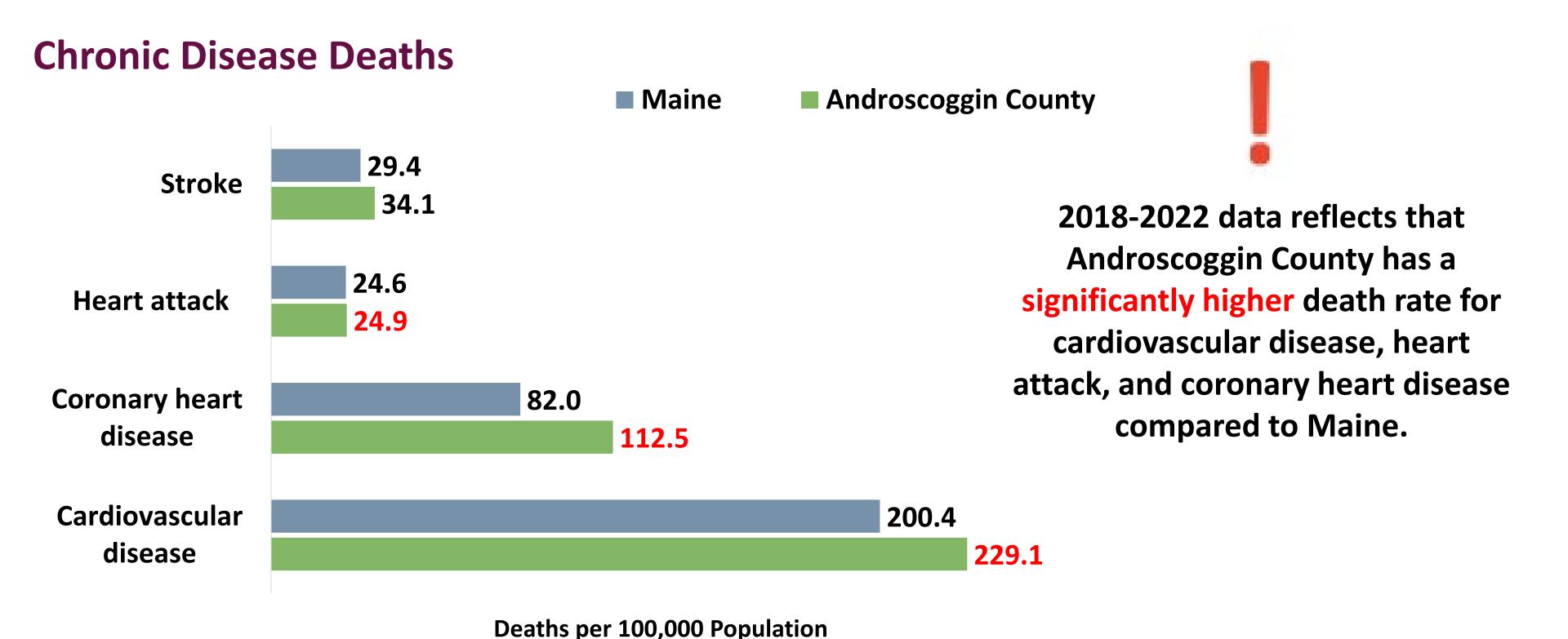




Androscoggin County has a significantly lower rate of all new cancer cases compared to Maine.

#### **New Cancer Cases by Type**



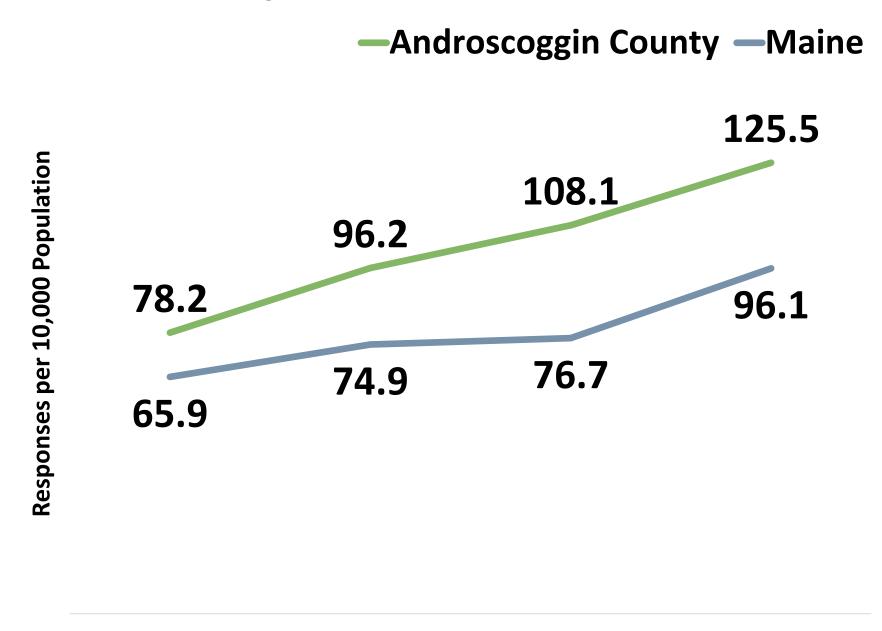


2020

2023

Overdose Emergency Medical Service Responses

2018

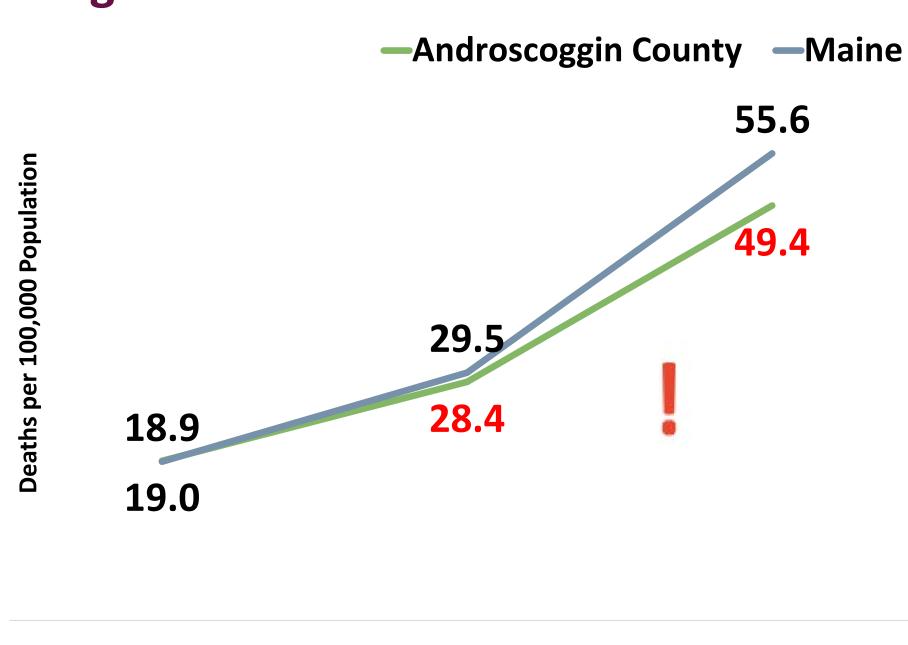


2019

2018-2022 data reflects that Androscoggin County had a significantly higher rate of druginduced deaths compared to 2015-2019 data.

#### **Drug-induced Deaths**

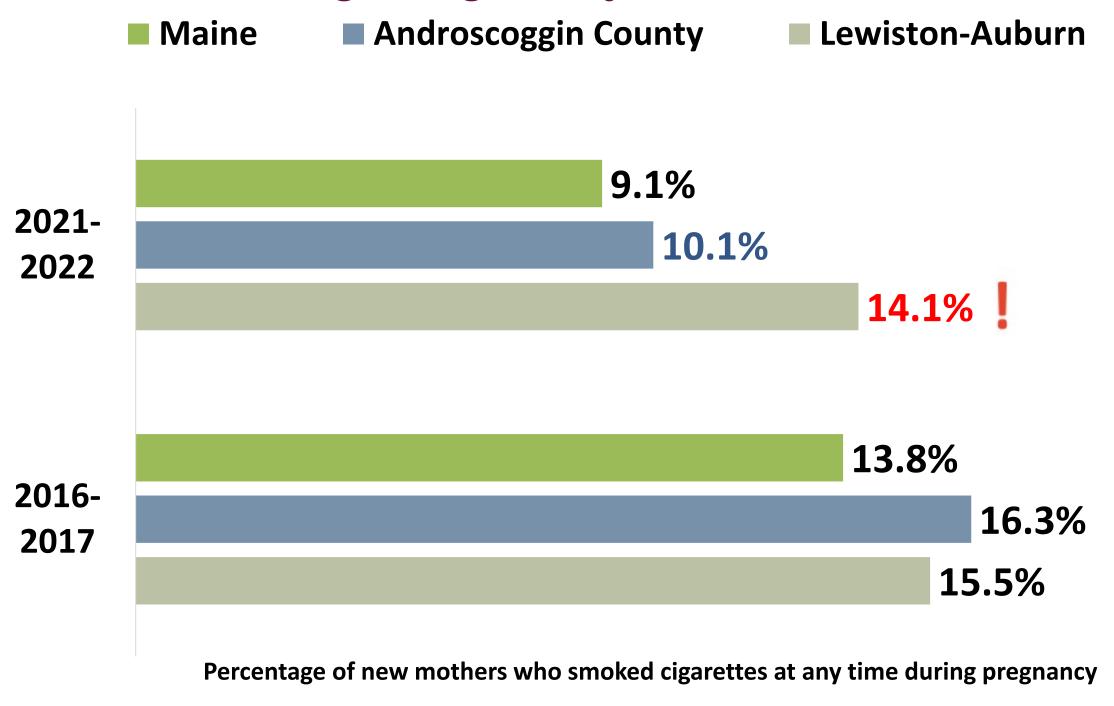
2012-2016



2015-2019

2018-2022

#### **Smoked During Pregnancy**



- Androscoggin County has a significantly lower percentage of women who reported smoking during pregnancy compared to 2016-2017 county data.
- Lewiston-Auburn has a significantly higher percentage of women who reported smoking during pregnancy compared to Androscoggin County & Maine.



## Focus Group Top Themes

Accessibility of care
Affordable housing
Availability of resources
Community safety
Transportation

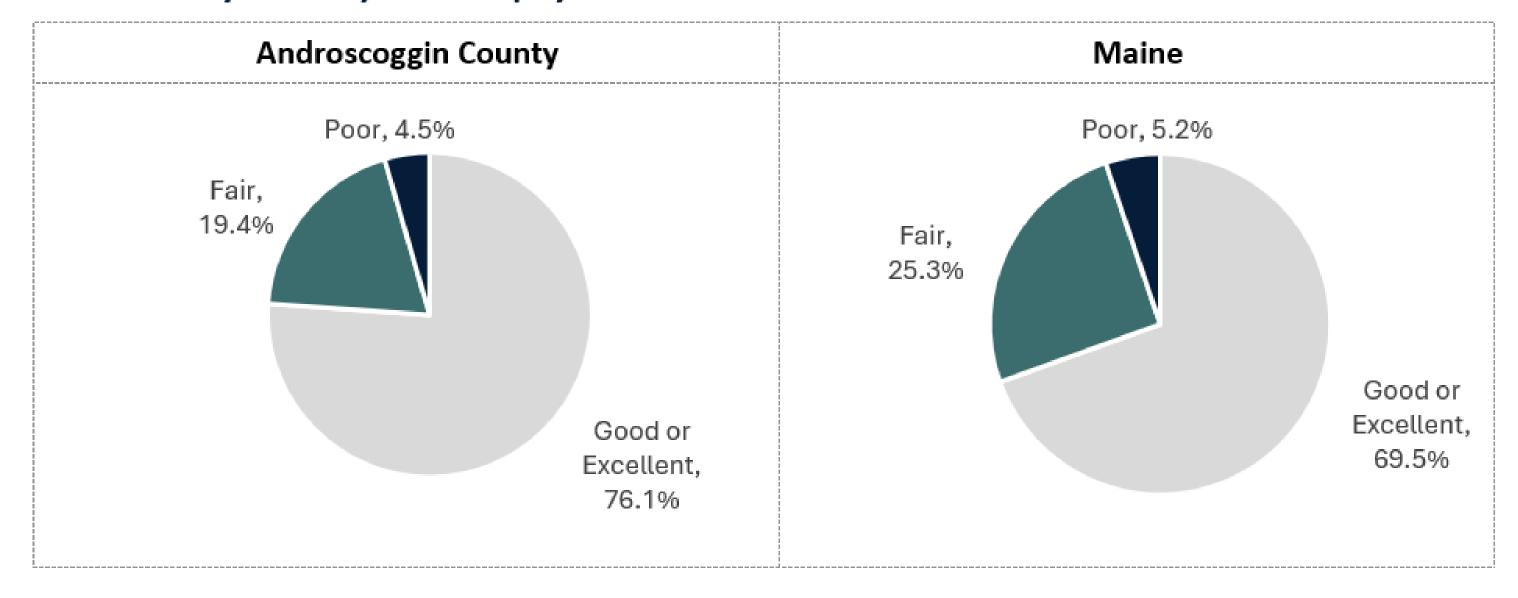
#### Select Quotes From Participants

- "Housing needs to be reformed. It looks like they are doing a lot of housing in the community but not a lot of employment options – people need to travel elsewhere."
- "[Childcare] There are some nice and affordable options but there are also long waitlists. A lot of people choose to stay home with their kids or ask relatives to watch their kids."
- "Access to mental health services... [you] can't get a live person the phone. Some people don't have the access or don't feel comfortable with [virtual options] or telehealth."
- "It's hard to find a good doctor that talks with you. Insurance is a barrier, [you may be able to] find a good provider, but [they might not] take your insurance."

## Total Participants Androscoggin County Maine 247 3,967

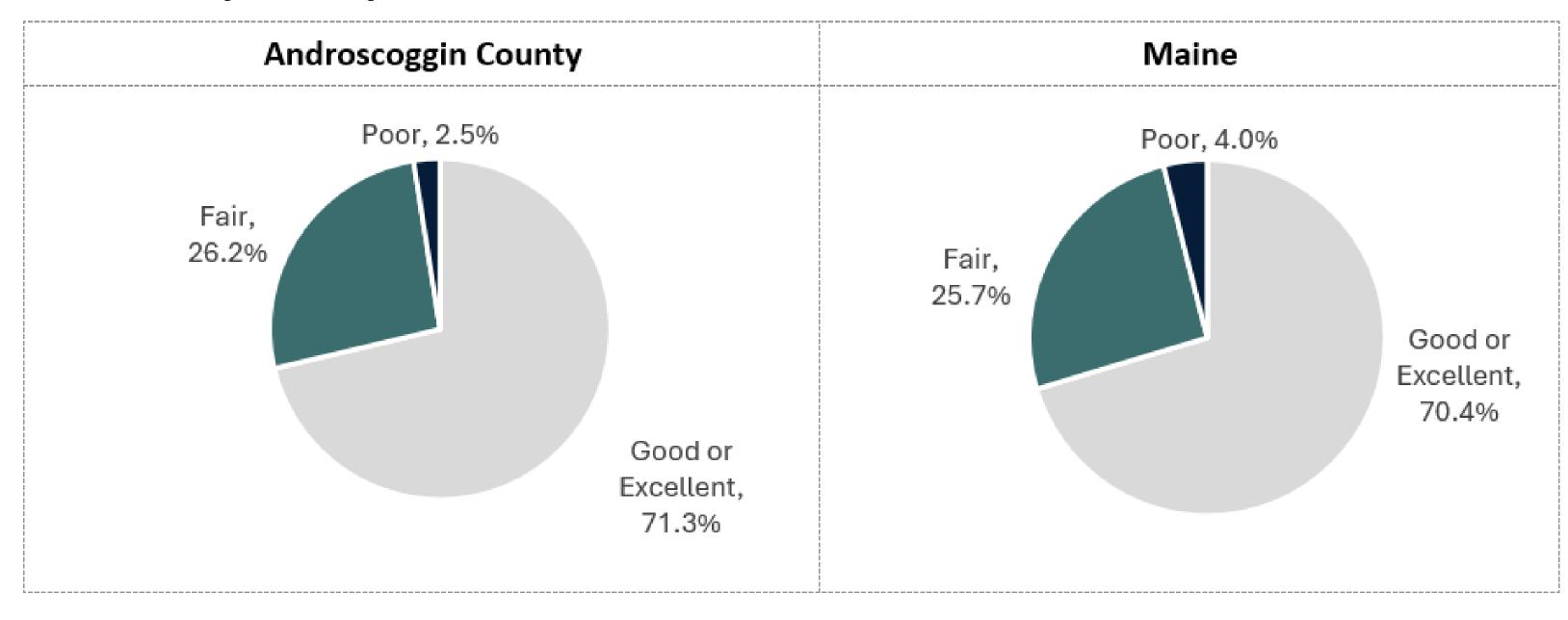
#### Community Survey: Physical Health Status

#### How would you rate your own physical health?



#### Community Survey: Mental Health Status

#### How would you rate your own mental health?



#### Community Survey: Community Health Status

#### Top 5 social concerns that negatively impact your community

Androscoggin County		Maine		
1)	Mental health issues (anxiety, depression, suicide, etc.)	1)	Mental health issues (anxiety, depression, suicide, etc.)	
2)	Substance use (alcohol, cannabis, prescription drugs, illicit drugs, etc.)	2)	Substance use (alcohol, cannabis, prescription drugs, illicit drugs, etc.)	
3)	Low incomes and poverty	3)	Low incomes and poverty	
4)	Homelessness	4)	Housing insecurity	
5)	Housing insecurity	5)	Obesity	

#### Community Survey: Community Health Needs

Please indicate if \_\_\_\_\_ negatively impacts you, a loved one, and/or the community where you live.

Percentage of respondents who answered 'Impacts me, a loved one, and/or my community'

Androscoggin County		Maine		
Mental health needs	75.2%	Economic needs	76.1%	
Economic needs	72.5%	Chronic health conditions (cancer, high blood pressure, heart disease, high cholesterol, etc.)	75.7%	
Chronic health conditions (cancer, high blood pressure, heart disease, high cholesterol, etc.)	71.3%	Mental health needs	73.6%	
Substance use	68.3%	Substance use	68.5%	
Housing needs	67.2%	Housing needs	68.5%	
Public safety needs	67.0%	Transportation needs	60.9%	
Environmental needs	63.9%	Environmental needs	58.4%	
Transportation needs	55.5%	Public safety needs	53.7%	



# Prioritization Voting Results



## Results

## **Community Conditions**

- 1. Housing (84.8%)
- 2. Poverty (65.6%)
- 3. Provider Availability (56.3%)
- 4. Transportation (50.0%)
- 5. Food (25.0%)

### Protective & Risk Factors

- 1. Nutrition (62.5%)
- 2. Illicit Drug Use (59.4%)
- 3. Adverse Childhood (43.8%)
- 4. Adult Screening & Preventative Visits (34.4%)
- 5. Youth Mattering (31.3%)

## Health Conditions & Outcomes

- 1. Mental Health (75.0%)
- 2. Substance Use (62.5%)
- 3. Cardiovascular Disease (56.3%)
- 4. Obesity/ Weight Status (46.9%)
- 5. Diabetes (43.8%)



## Breakout Discussions

#### Breakout Discussion #1

Please discuss the results of the community needs assessment and the results of the first round of priority voting:

- Was anything surprising or new?
- Did the findings confirm anything for you?
- Are any priorities missing from the initial round of voting that should be included in a second round of voting?



## Voting Tool

Based on the presentation, discussions in your breakout, materials, and your knowledge, expertise, and experiences, please vote for the top THREE health and well-being priorities for each of the topic areas:

Community Conditions
Protective & Risk Factors
Health Conditions & Outcomes

as they relate to your County.





- 1. Housing (73.7%)
- 2. Provider Availability (63.2%)
- 3. Poverty (60.5%)

## Results

### Protective & Risk Factors

- 1. Adverse Childhood Experiences (63.2%)
- 2. Nutrition (52.6%)
- 3. Illicit Drug Use (52.6%)
- 4. Adult Screening & Preventative Visits (52.6%)

## **Health Conditions**& Outcomes

- 1. Mental Health (100.0%)
- 2. Substance Use (92.1%)
- 3. Cardiovascular Disease (84.2%)

#### Breakout Discussion #2

## Please discuss the following questions as they relate to the priorities in your topic area:

- Are there other specific populations to focus on within these priorities?
- What do you see as the root causes and/or contributing factors to these priorities?
- Which sectors are working on these priorities? Where is there potential for collaboration?
- What community assets and resources are missing from the pre-populated list to address these priorities?

Review the responses from the group prior to you. As a group, add comments and additional information and suggest edits, as applicable.

Breakout Discussion #4

Review the responses from the group prior to you. As a group, add comments and additional information and suggest edits, as applicable.



## Final Remarks