Maine Shared Community Health Needs Assessment

Knox County

November 13, 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.

Department of Health and Human Services

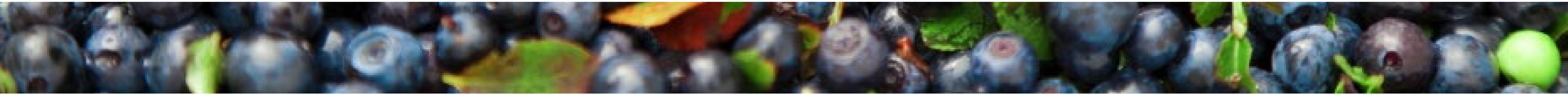
Central Maine Healthcare

MaineGeneral Health

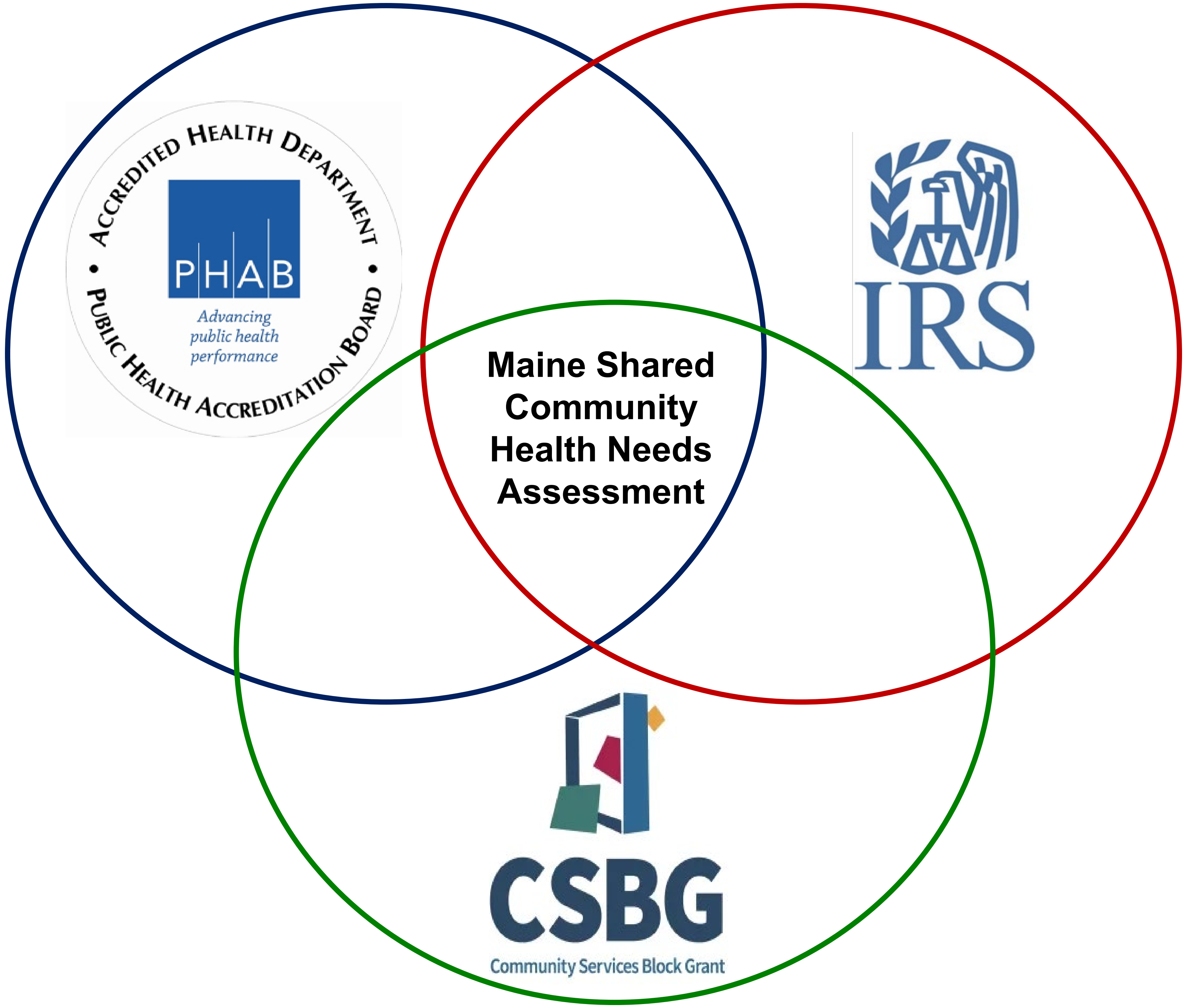
MaineHealth

Northern Light Health

Helping People. Changing Lives.
MeCAP
Maine Community Action Partnership

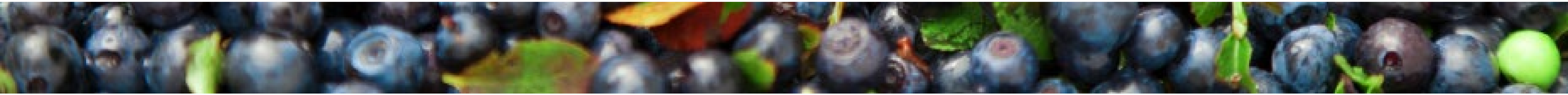


Maine Shared CHNA


Accredited Health Department • Public Health Accreditation Board •
PHAB
Advancing public health performance
IRS
CSBG
Community Services Block Grant

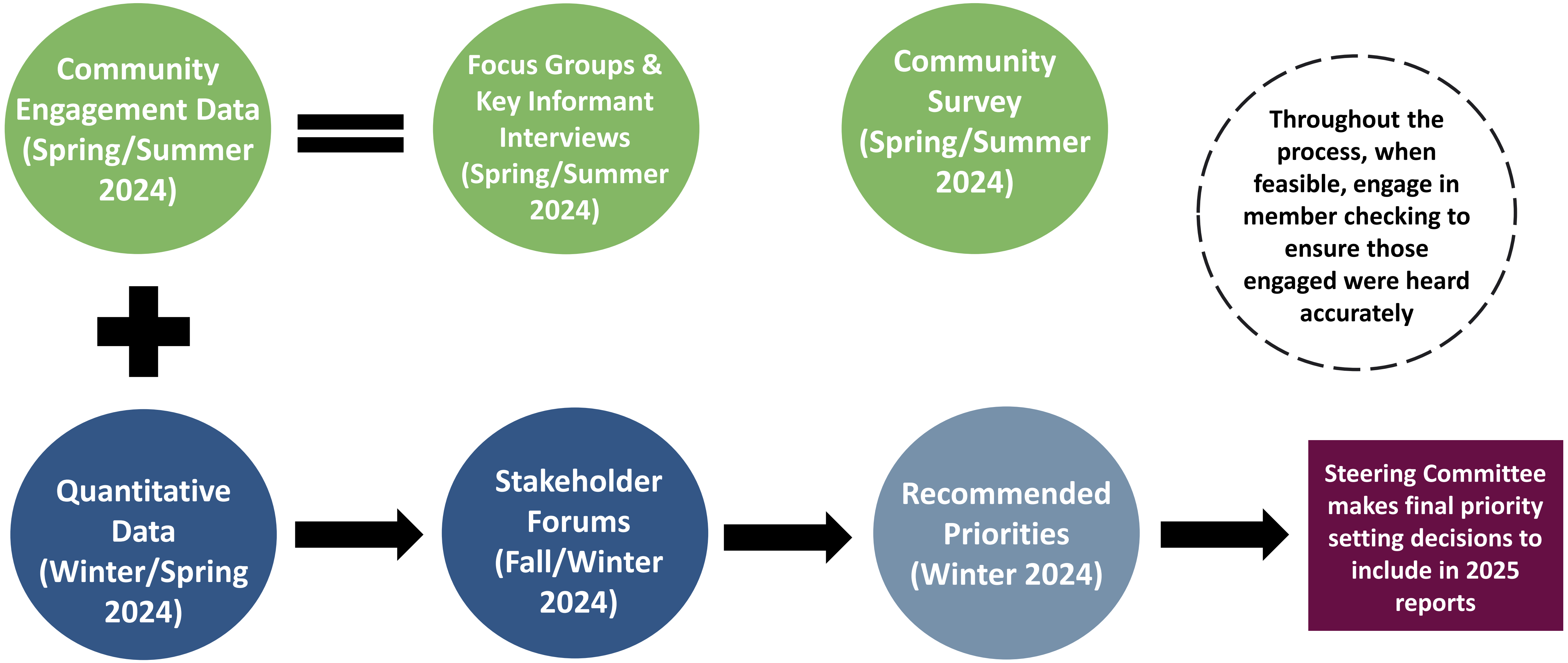
Maine Shared Community Health Needs Assessment

- 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



Community Engagement Data (Spring/Summer 2024)

Focus Groups & Key Informant Interviews (Spring/Summer 2024)

Community Survey (Spring/Summer 2024)

Throughout the process, when feasible, engage in member checking to ensure those engaged were heard accurately

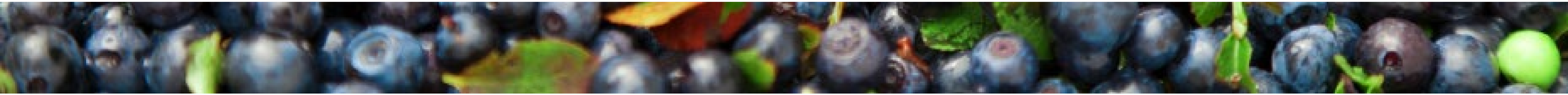
Quantitative Data (Winter/Spring 2024)

Stakeholder Forums (Fall/Winter 2024)

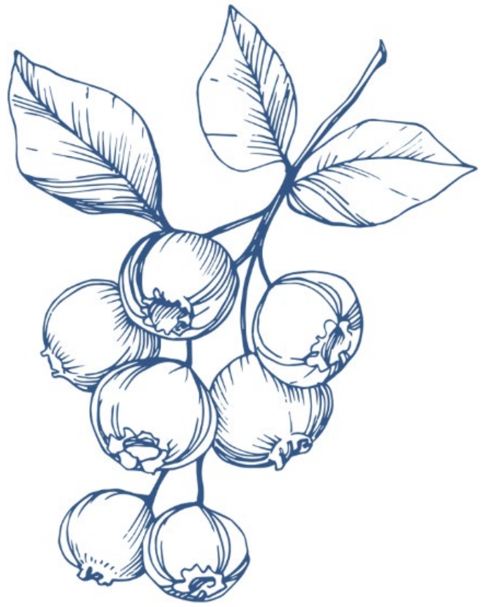
Recommended Priorities (Winter 2024)

Steering Committee makes final priority setting decisions to include in 2025 reports

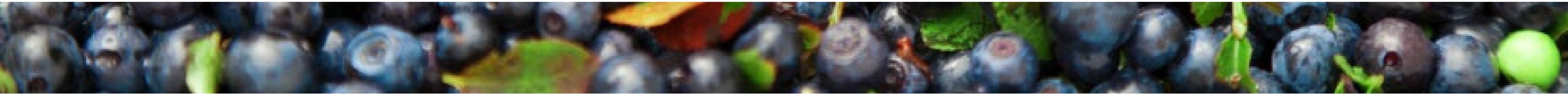
Surveys conducted statewide, included both general community members and professionals; Focus Groups conducted with community members, both low-income population and health equity groups; Key Informant Interviews conducted when focus groups weren't feasible or to collect more information; Stakeholder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



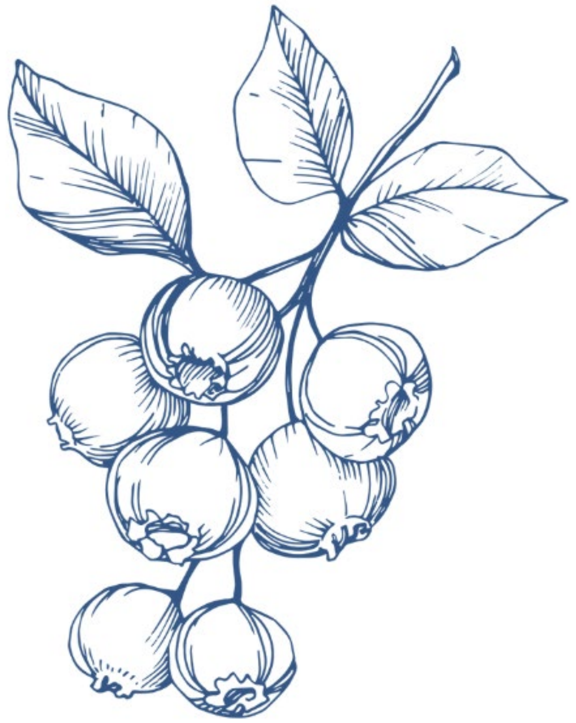
Next Steps



- **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

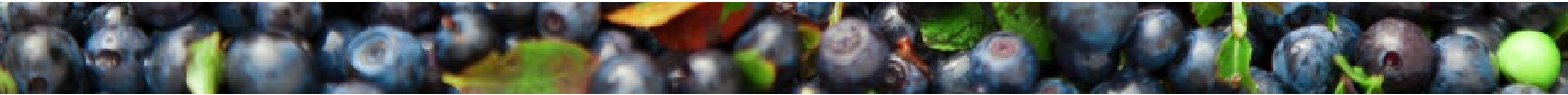
Presentation of Final Priorities

Breakout: Deeper Discussion of Priorities, Round 1

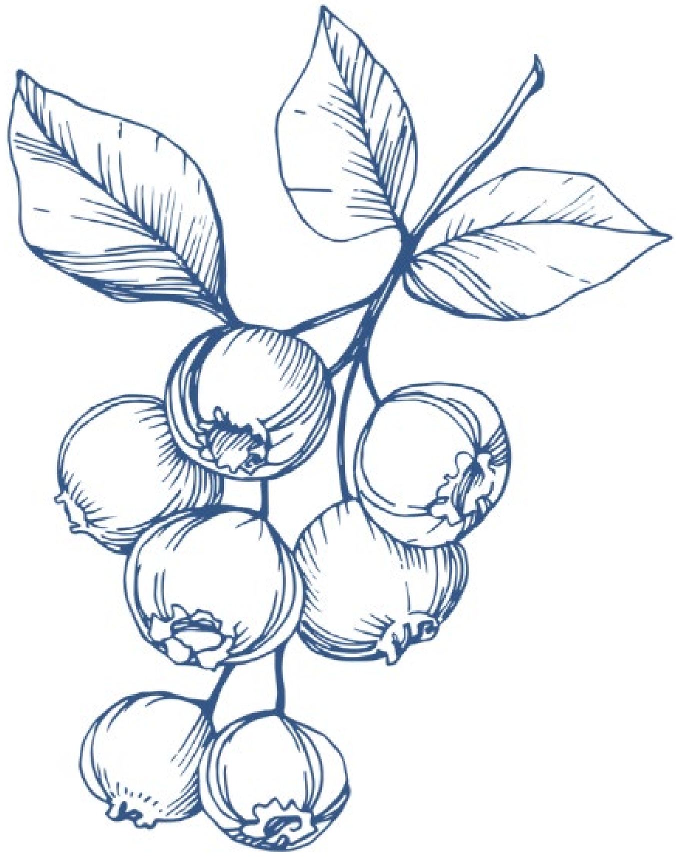
Breakout: Deeper Discussion of Priorities, Round 2

Breakout: Deeper Discussion of Priorities, Round 3

Conclusion & Next Steps

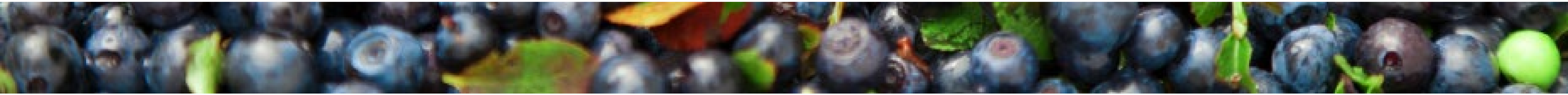


Housekeeping



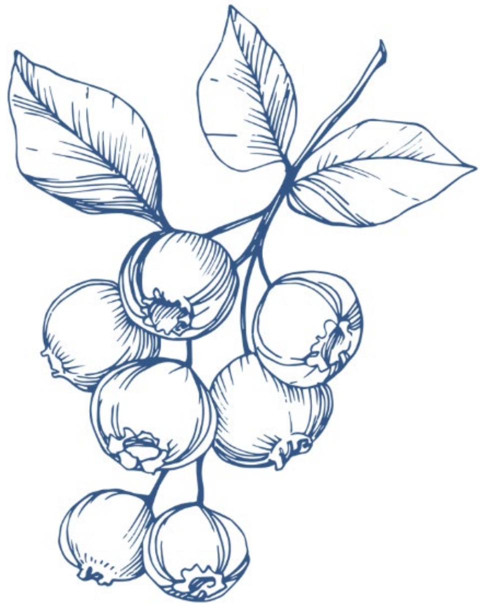
- Step Up. Step Back.
- Listen Longer. Be Curious. **Be Bold.**
- Take Breaks. Water and De-Water. Move Your Body.
- Maintain Confidentiality.
- Acknowledge Positionality.

2023 Community Agreements.pdf (mainephilanthropy.org)

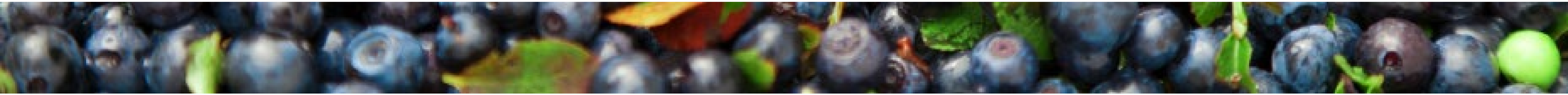


Key Findings

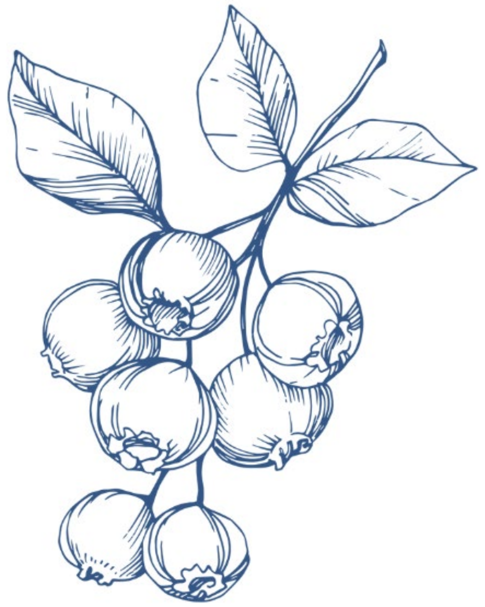
Quantitative Data



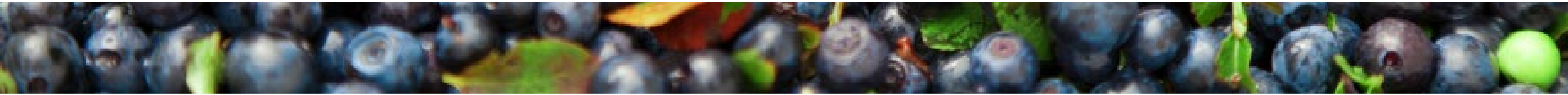
- Indicators are reviewed and updated, as needed, by the Metrics Committee using identified criteria
- Data comes from national, state and at times programmatic sources
- Some data is missing or suppressed due to small sample sizes
- Other data may be missing due to complications in collection or errors 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.

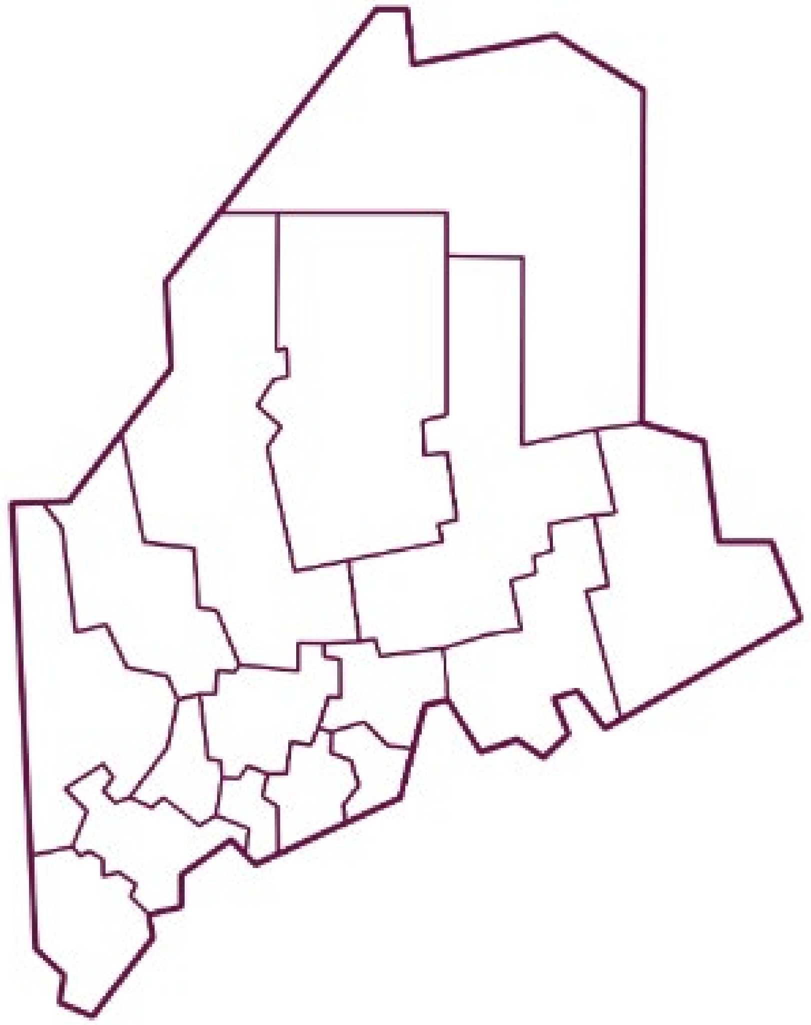


Demographics

Total Population

40,729

3.0% of the total state population

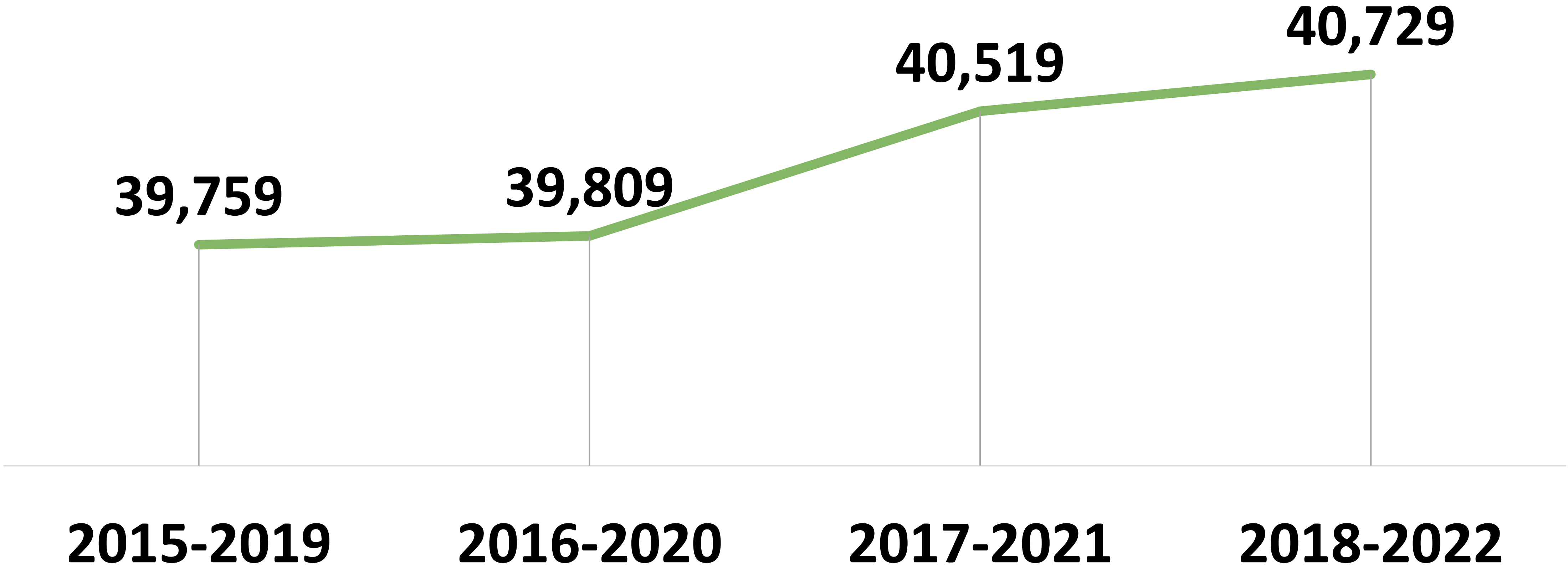


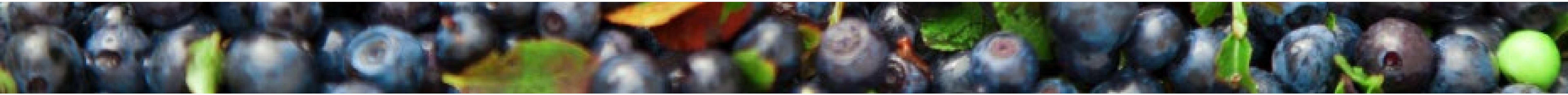
Population by Age

Age Under 18	Age 18-64	Age 65+
17.3%	**56.4%**	**26.3%**

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

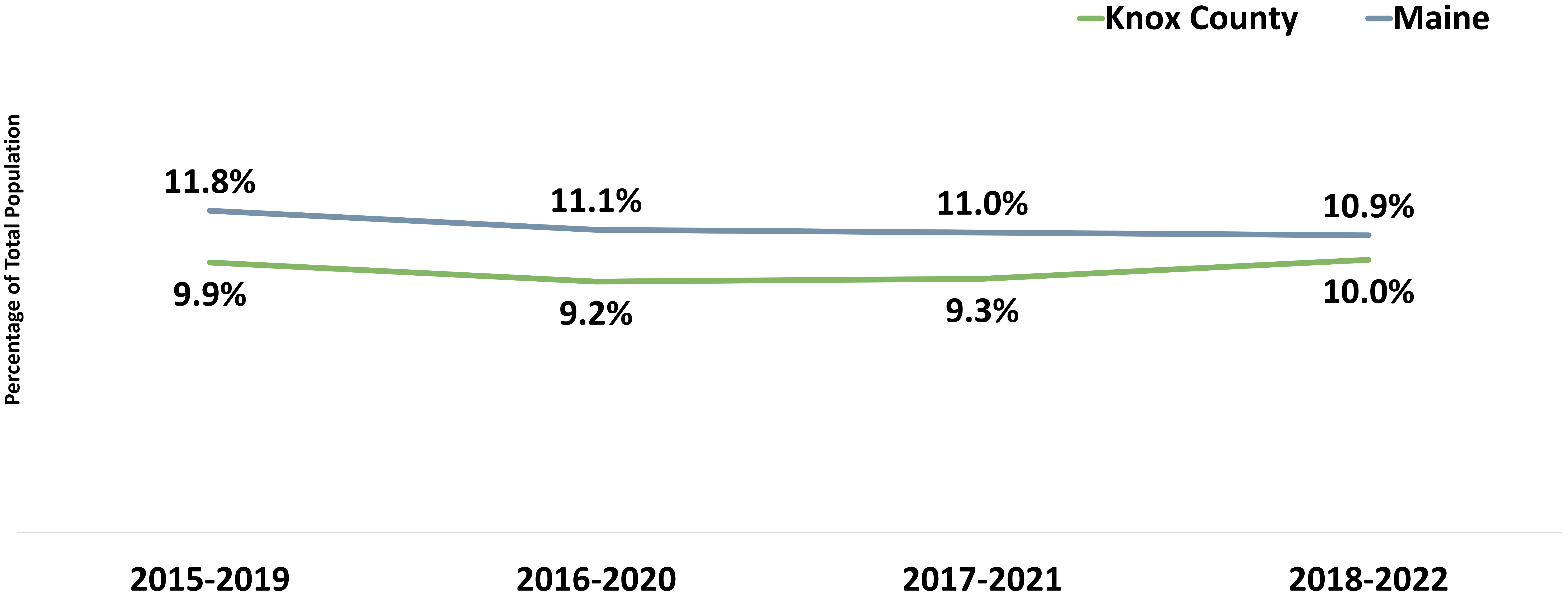
County Population



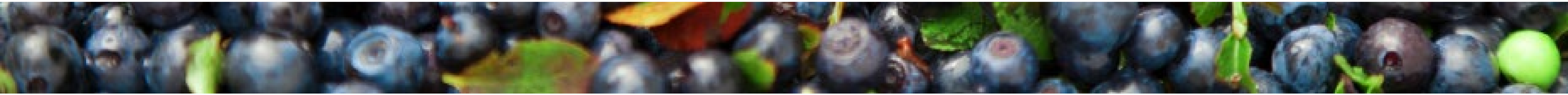


Demographics

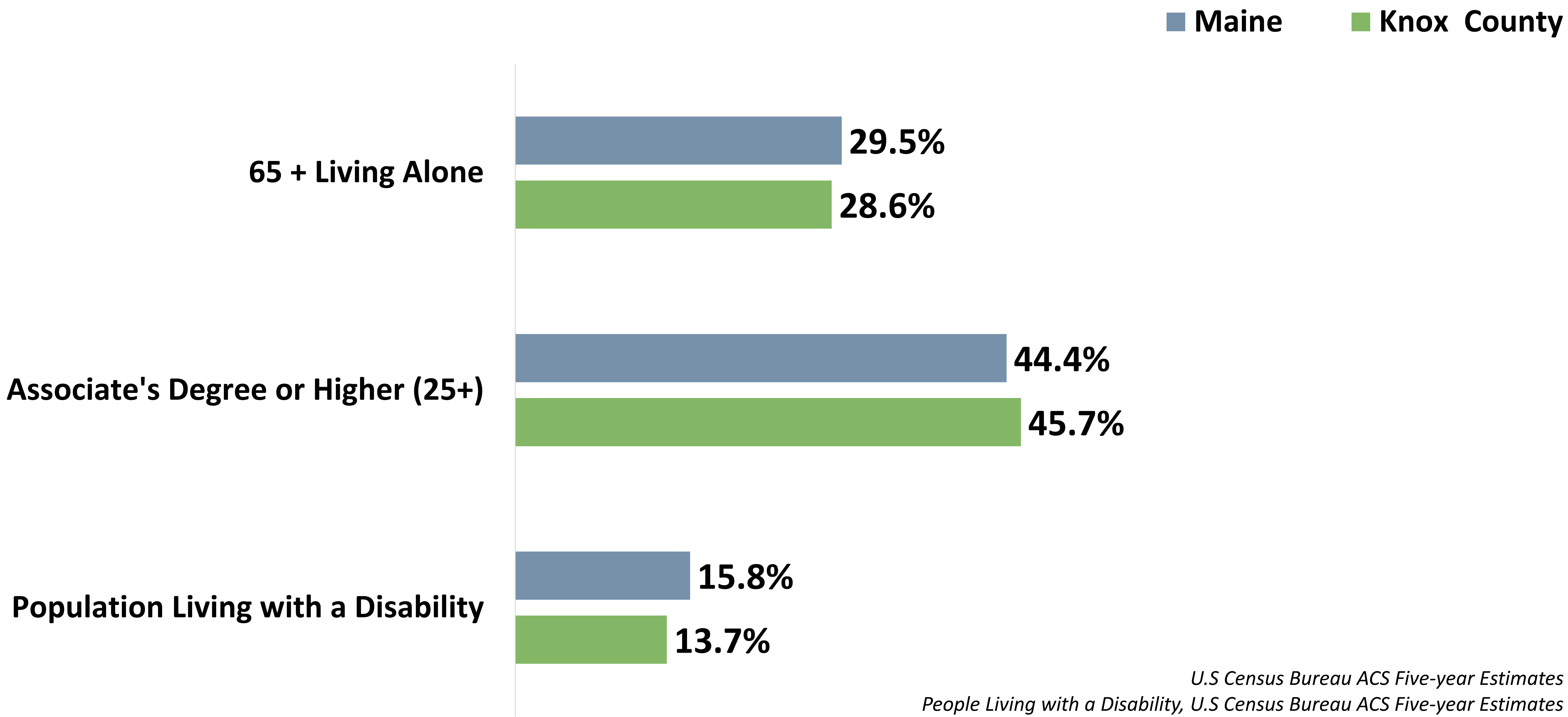
Individuals Living in Poverty



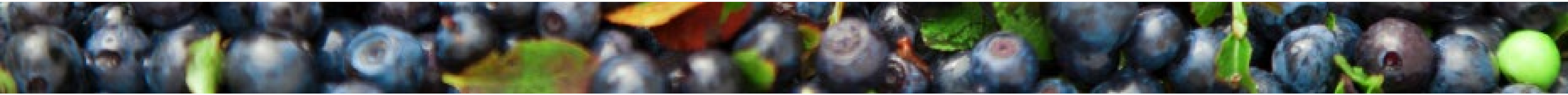
U.S Census Bureau ACS Five-year Estimates



Demographics

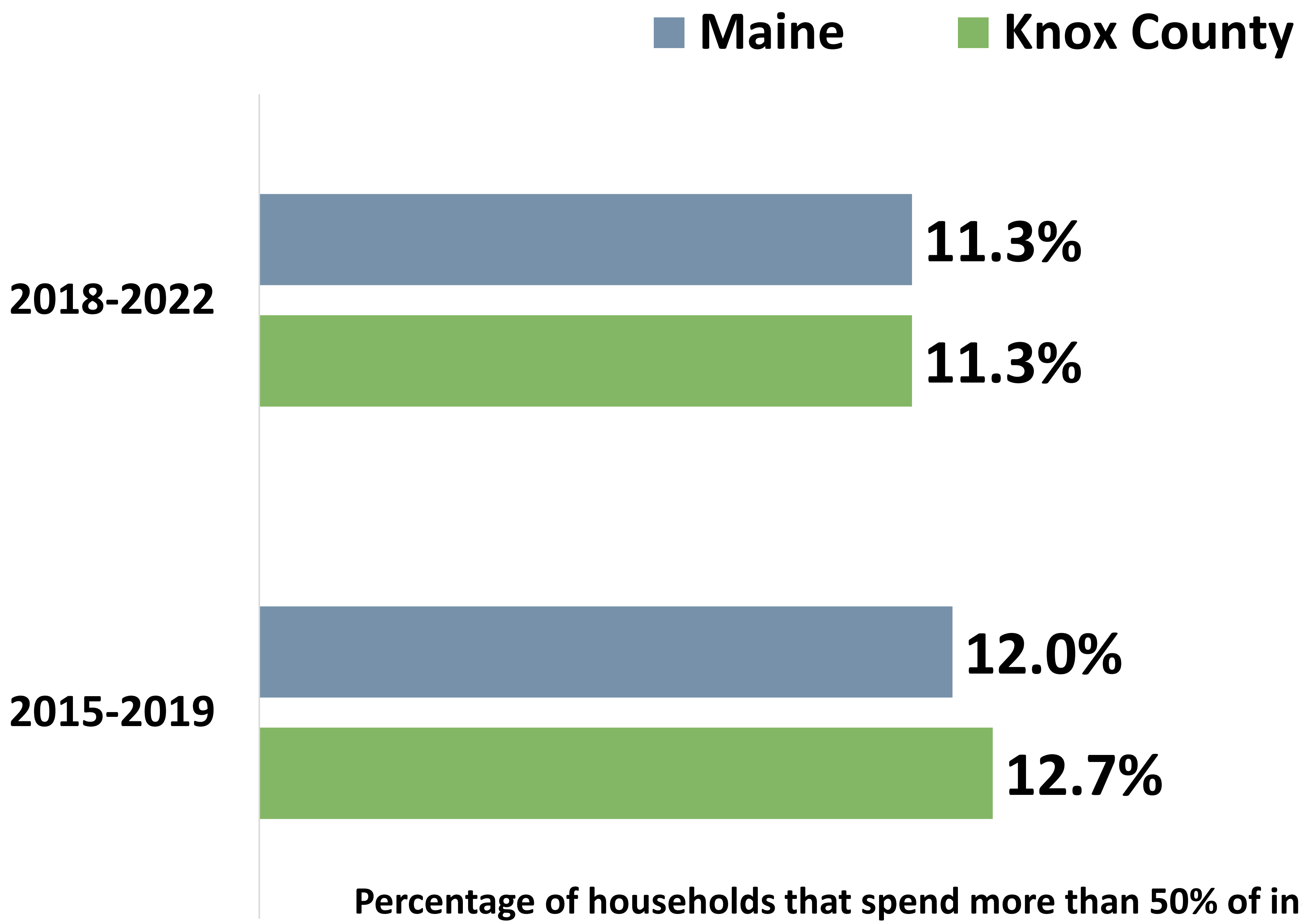


U.S Census Bureau ACS Five-year Estimates 2018-2022
People Living with a Disability, U.S Census Bureau ACS Five-year Estimates 2017-2021



Community Conditions

Cost-burdened Households



Percentage of households that spend more than 50% of income toward housing

Transportation

24.1%

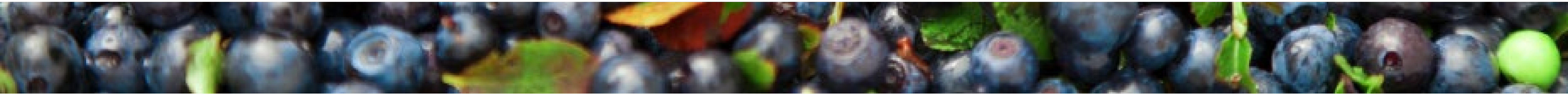
Commute of greater than 30 minutes driving alone

2.7%

No vehicle for the household

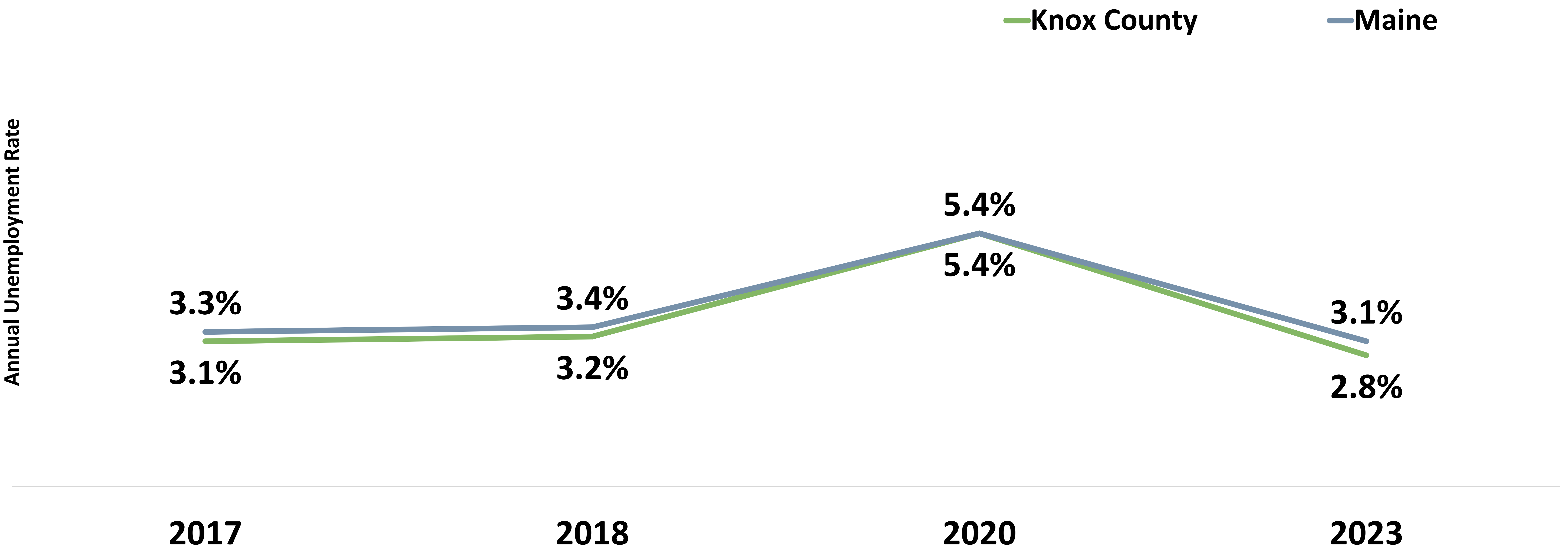
U.S Census Bureau ACS Five-year Estimates 2018-2022

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

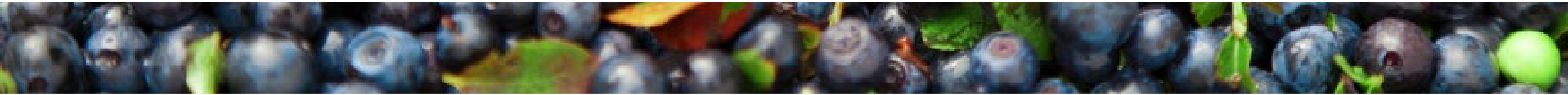


Community Conditions

Unemployment



U.S Bureau of Labor Statistics



Community Conditions

Economic Wellbeing

Median household income

2015-2019: $57,751

2017-2021: $63,399

Households living above the federal poverty level but below the Asset Limited Income Constrained Employed threshold of financial survival

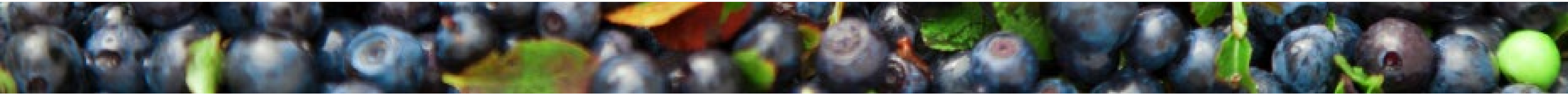
2019: 31.8%

2022: 29.6%

ALICE

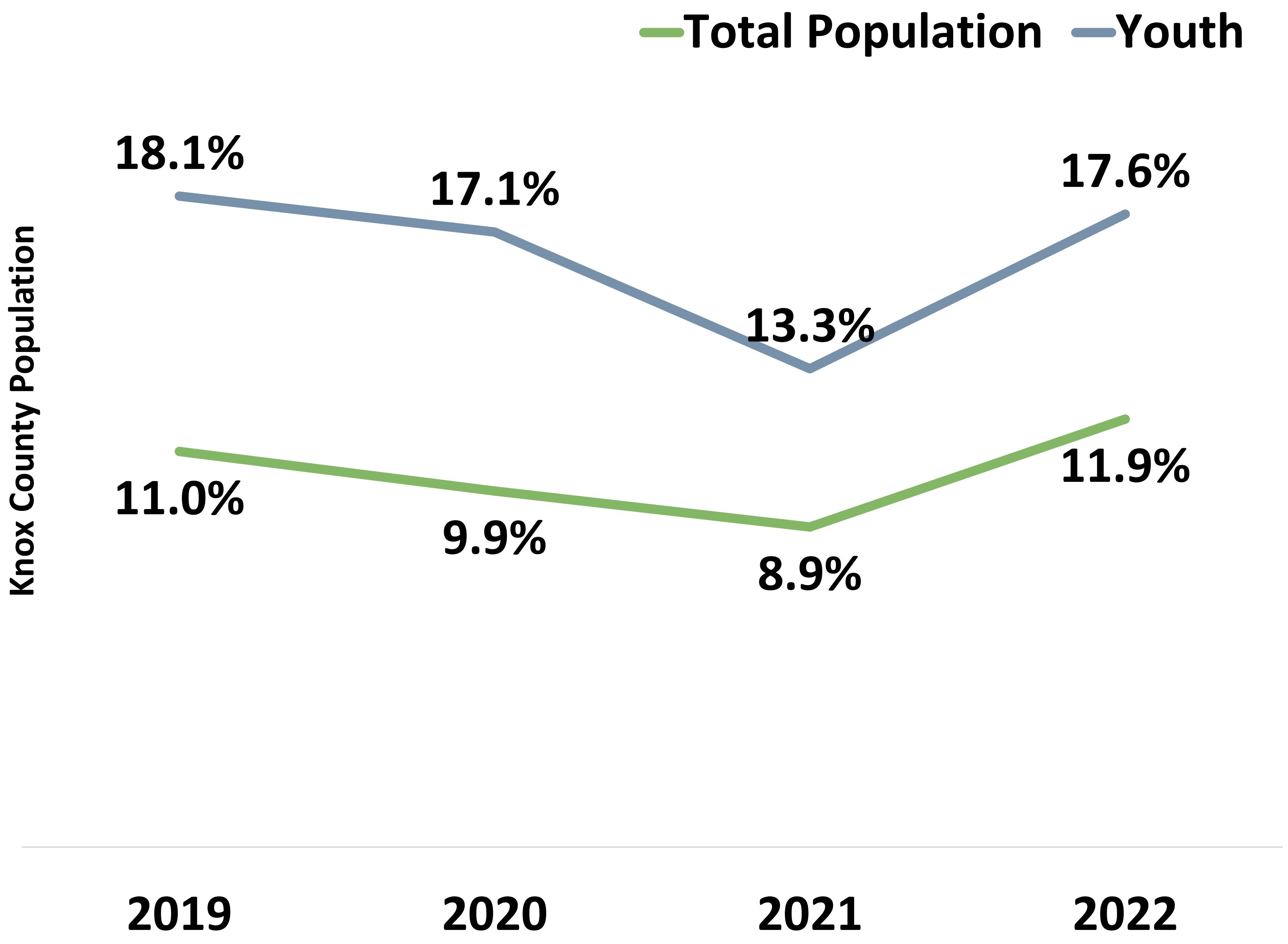
Working families who are struggling to afford basic necessities like housing, food, and childcare despite earning an income technically above the poverty line.

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

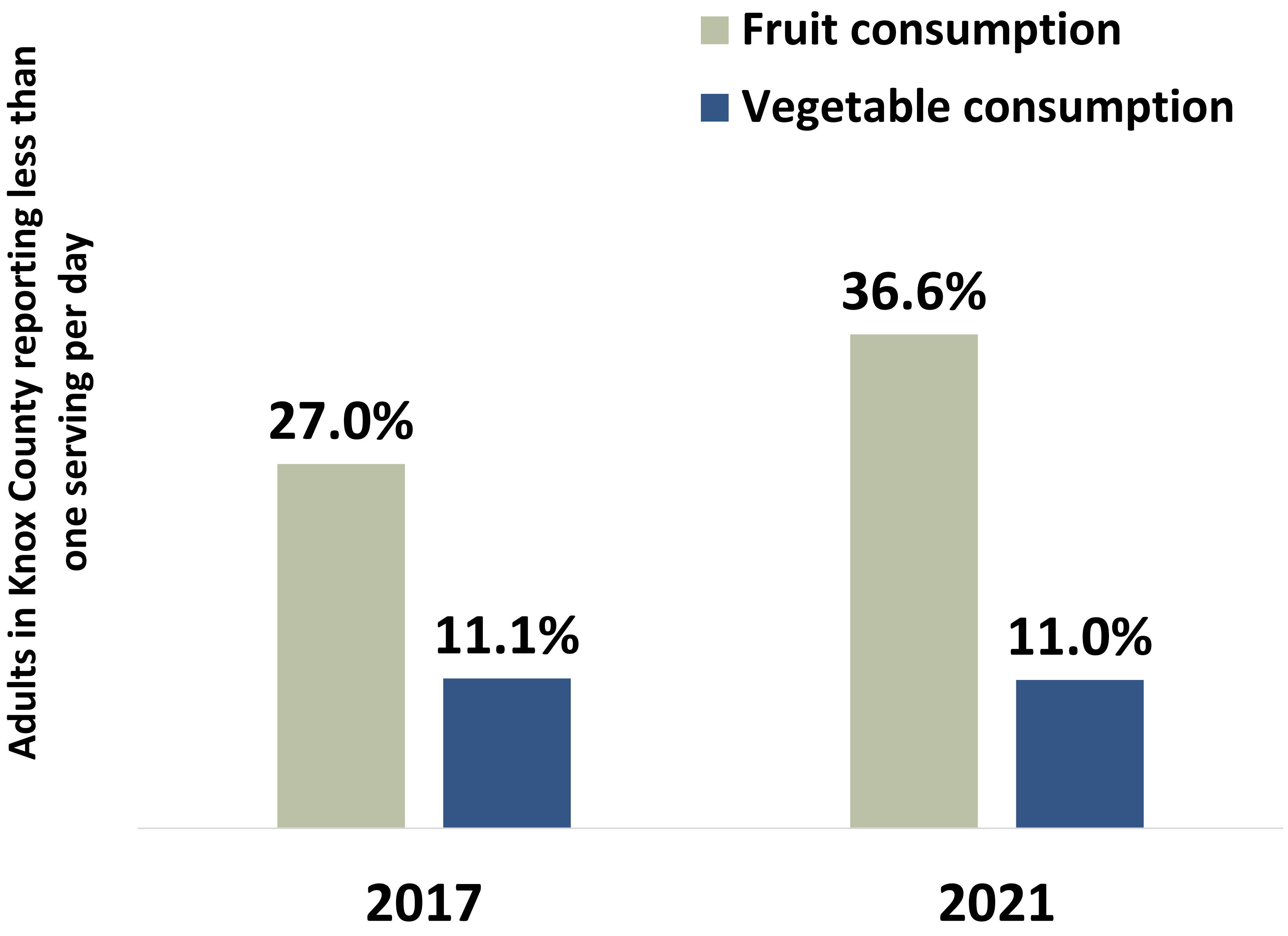


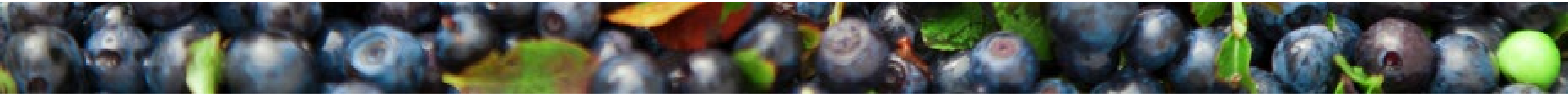
Community Conditions

Food Insecurity



Fruit & Vegetable Consumption





Community Conditions

Child Care

Child Care Centers

2020: 27

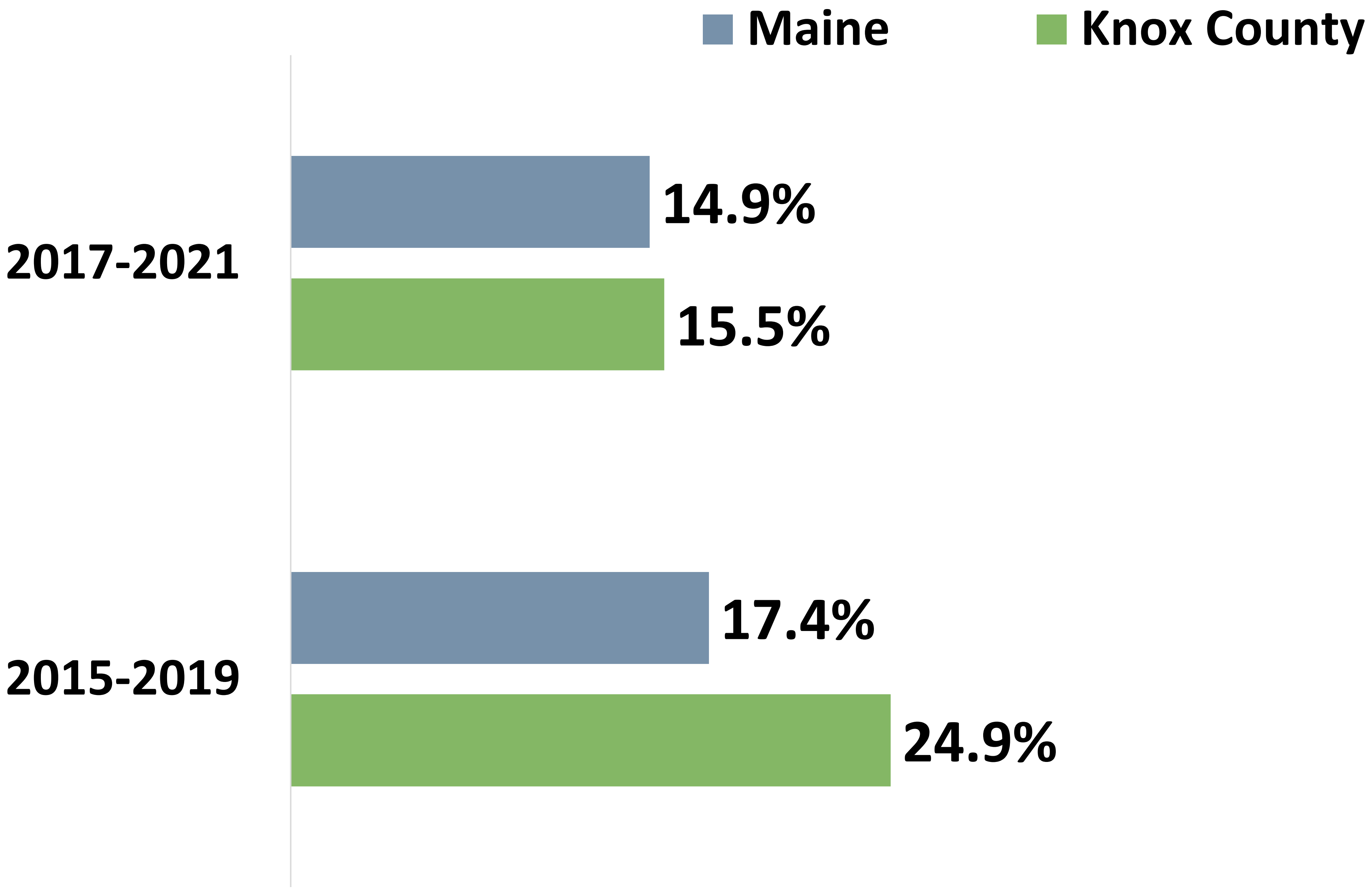
2024: 29

Children served in publicly funded state & local preschools

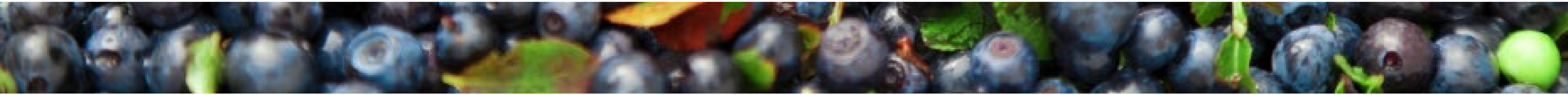
2019: 45.0%

2023: 44.8%

Head Start eligible infants, toddlers & preschool age children

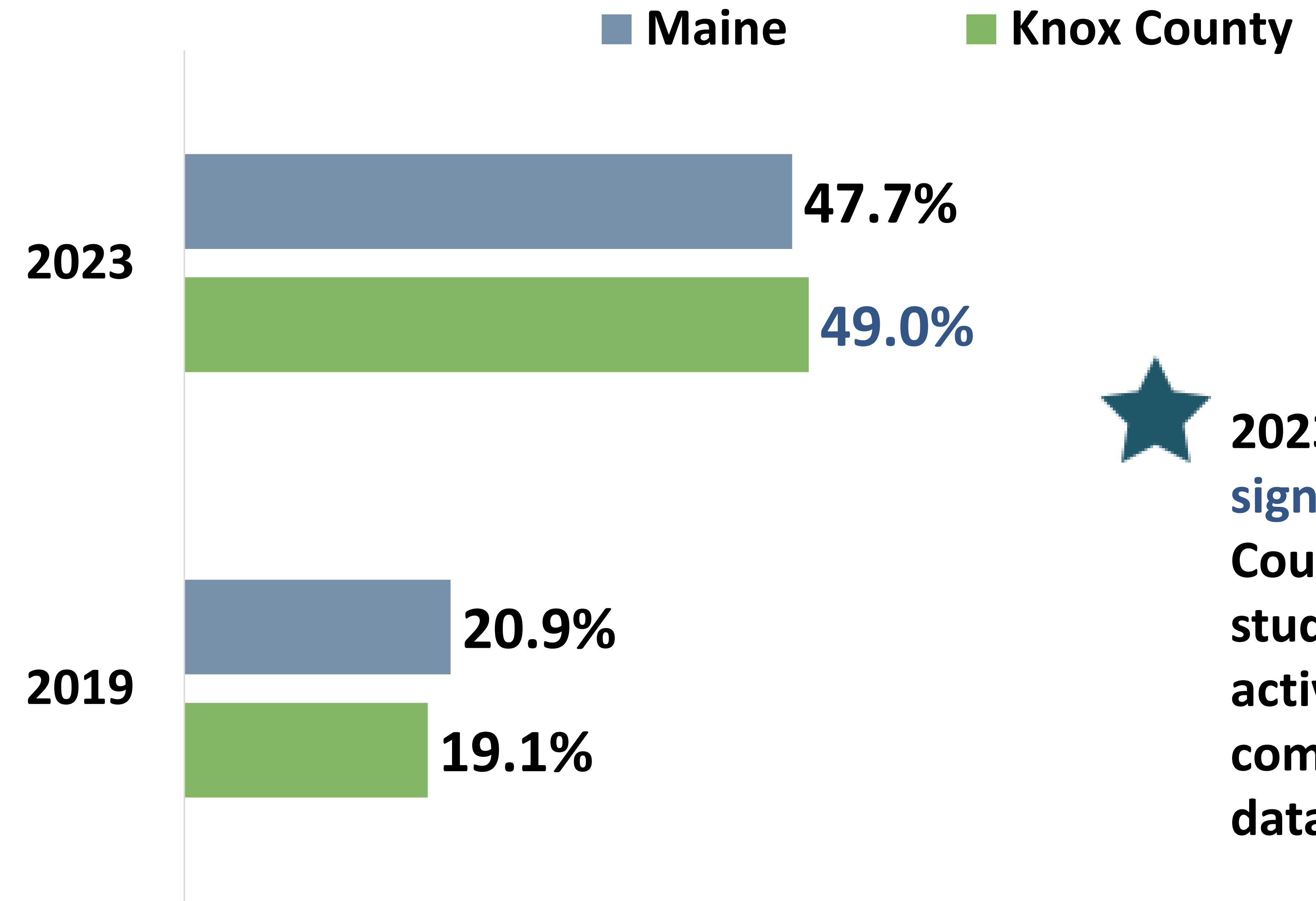


Percentage of children under 6 who live in households where the total income of the householder's family has been below the established federal poverty level in the past year



Protective & Risk Factors

Youth Physical Activity



Percentage of high school students who were physically active for a total of at least 60 minutes per day on seven of the past seven days

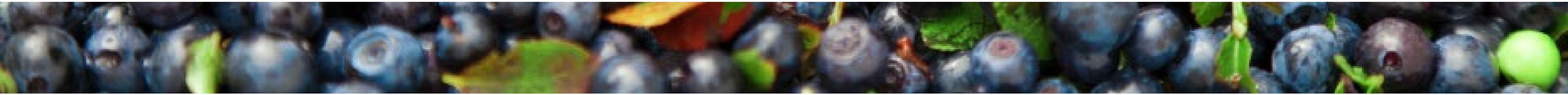
2023 data reflect that significantly more Knox County high school students met physical activity recommendations compared to 2019 county data.

Electronic bullying (high school students)

2021: 19.7 %

2023: 16.6%

2023 data reflect that significantly fewer Knox County high school students have been bullied electronically, including through texting, Instagram, Facebook, or other social compared to 2021 county data.



Health Conditions & Outcomes

Leading Causes of Death

Rank	United States	Maine	Knox 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	Alzheimer's Disease
5	Cerebrovascular Diseases	COVID-19	Chronic Lower Respiratory Disease
6	Alzheimer's Disease	Cerebrovascular Diseases	COVID-19
7	Diabetes	Diabetes	Cerebrovascular Diseases
8	Influenza & Pneumonia	Alzheimer's Disease	Diabetes
9	Liver Disease	Liver Disease	Influenza & Pneumonia
10	Suicide	Influenza & Pneumonia	Chronic Liver Disease and Cirrhosis

Cardiovascular disease deaths per 100,000 population

2015-2019: 205.1

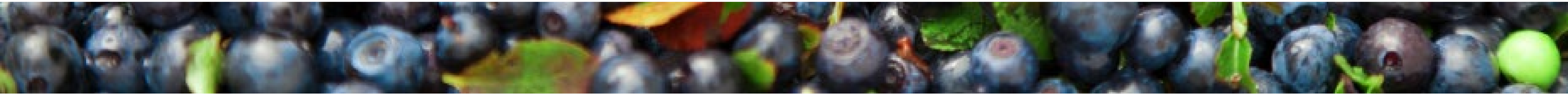
2018-2022: 195.0

Injury deaths per 100,000 population

2015-2019: 84.4

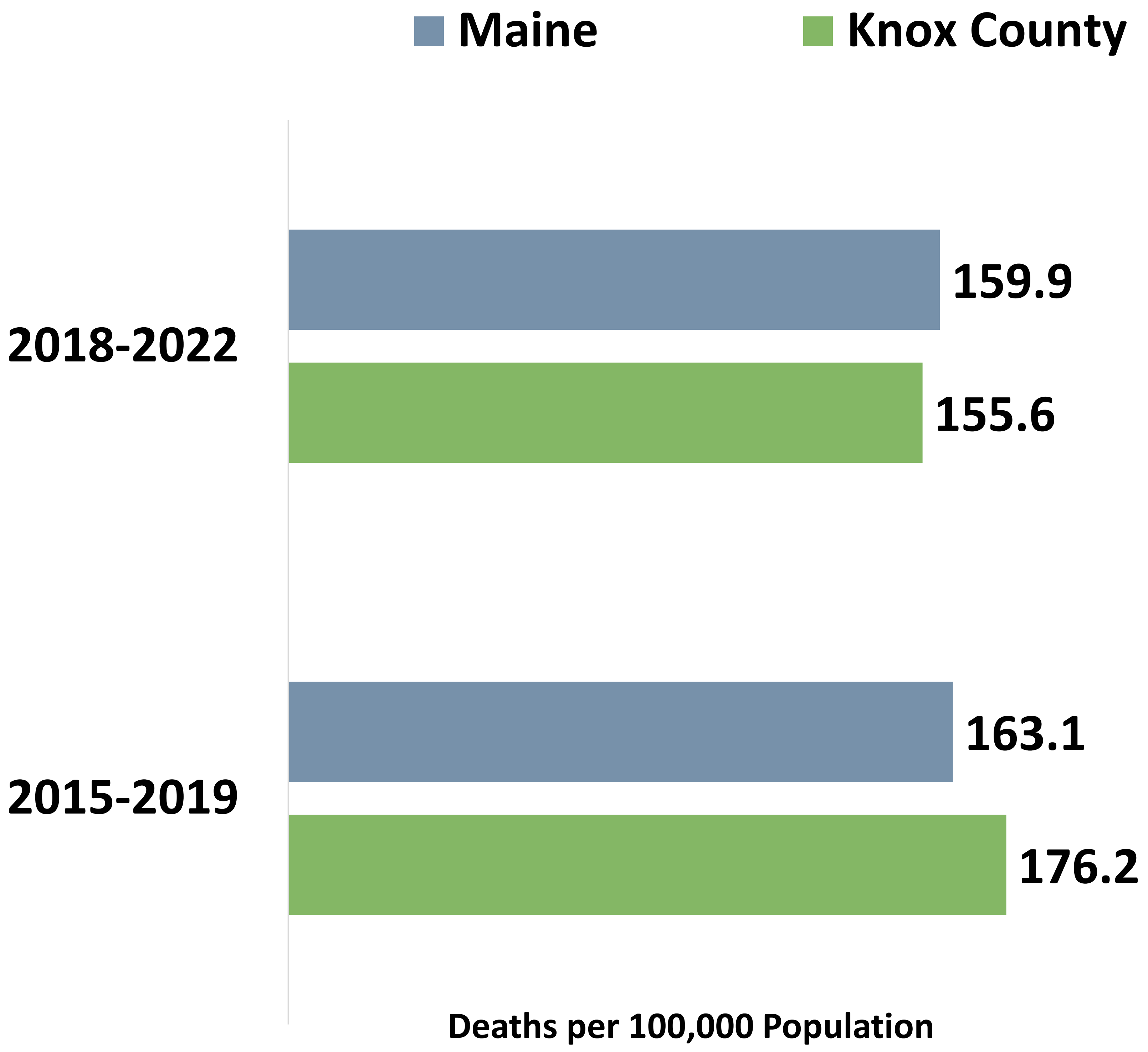
2018-2022: 108.8

Drug overdose deaths are included in unintentional injury deaths for ranking causes of death.

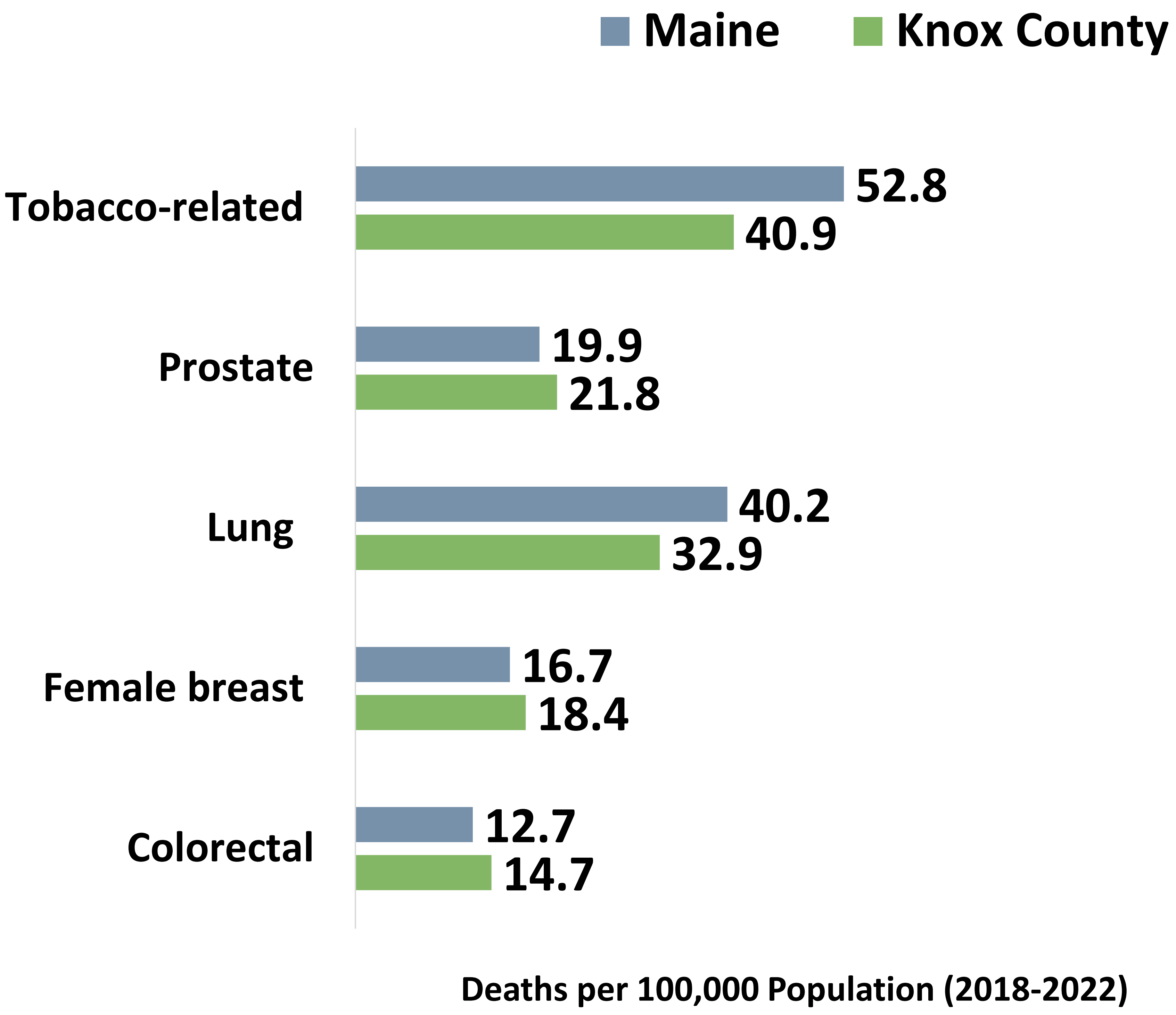


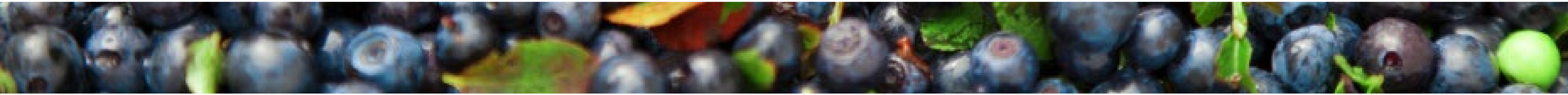
Health Conditions & Outcomes

All Cancer Deaths



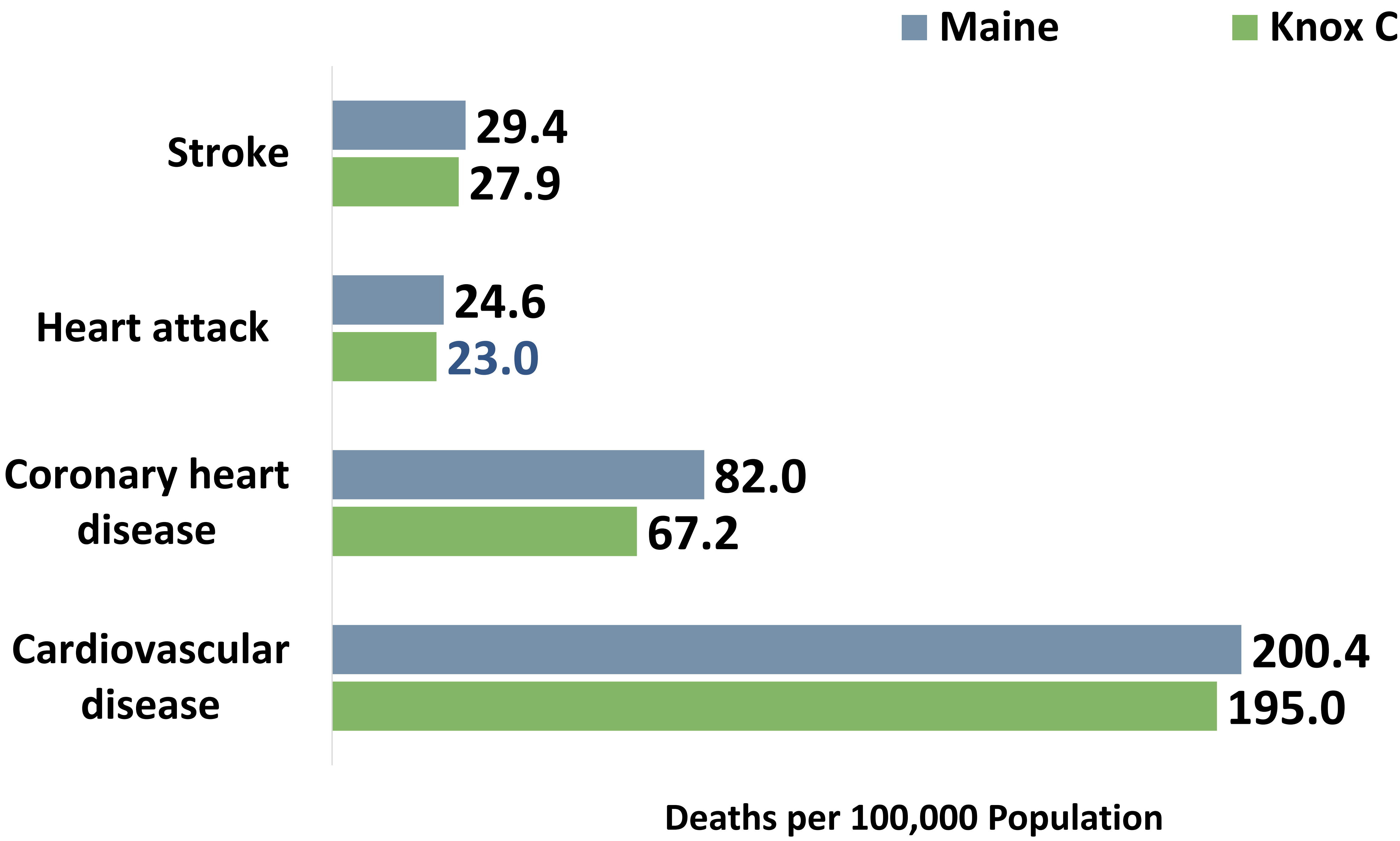
Cancer Mortality by Type



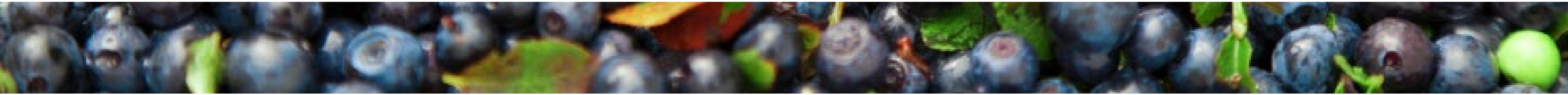


Health Conditions & Outcomes

Chronic Disease Deaths



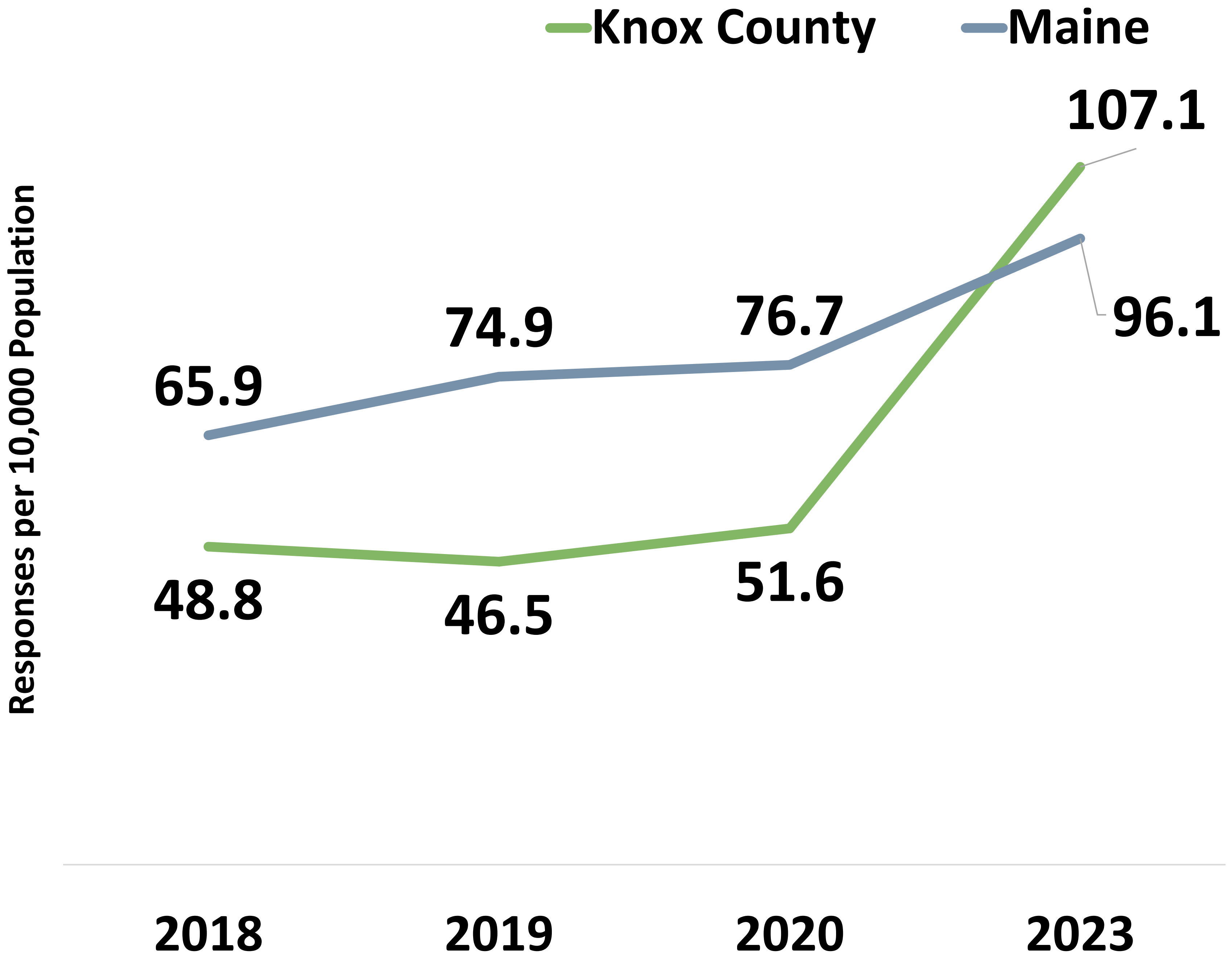
Knox County has a significantly lower death rate due to heart attacks compared to Maine (2018-2022).



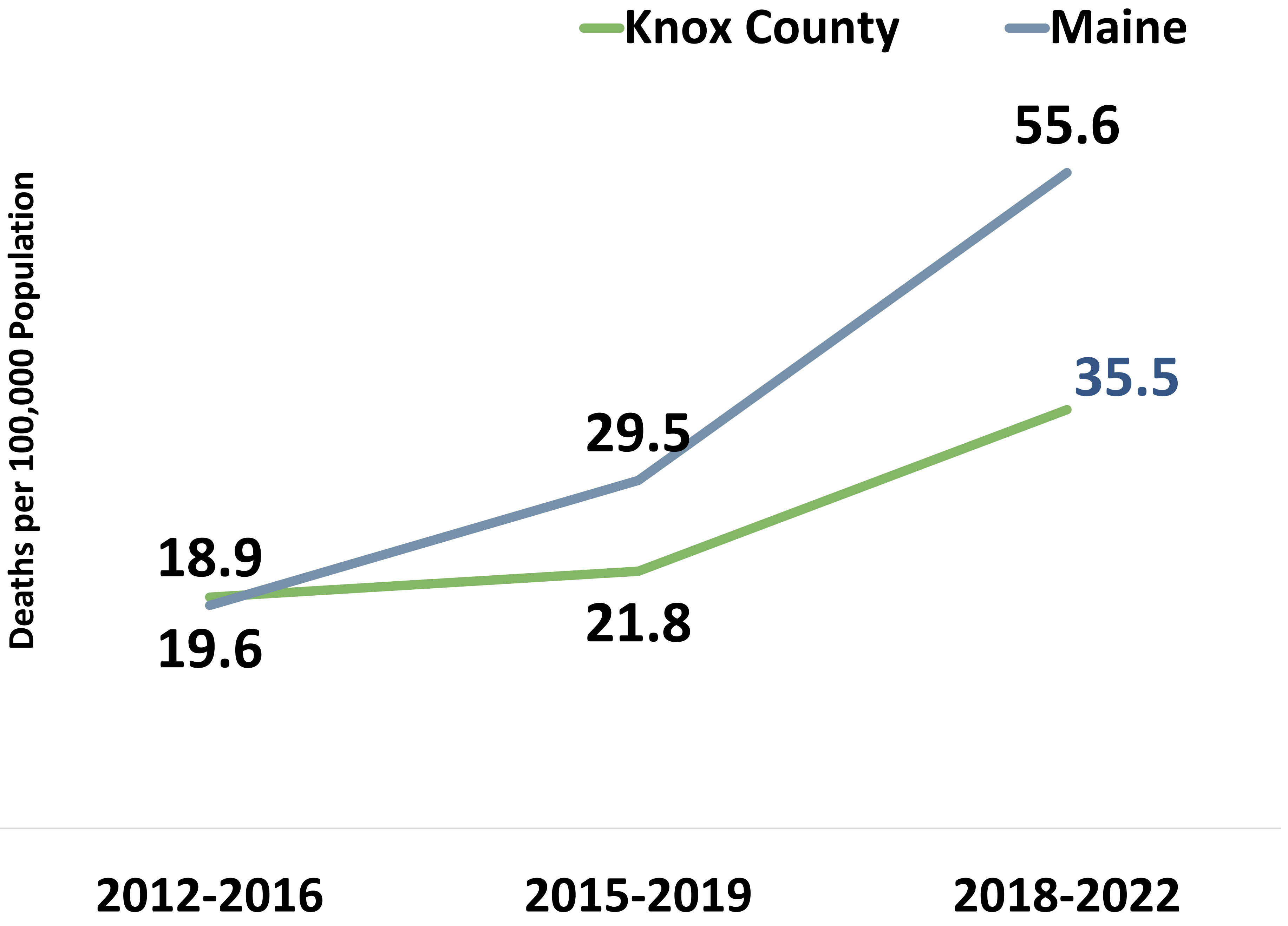
Health Conditions & Outcomes

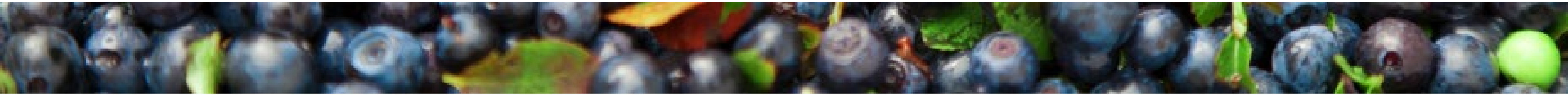
2018-2022 data reflects that Knox County had a significantly lower rate of drug-induced deaths compared to Maine.

Overdose Emergency Medical Service Responses



Drug-induced Deaths





Health Conditions & Outcomes

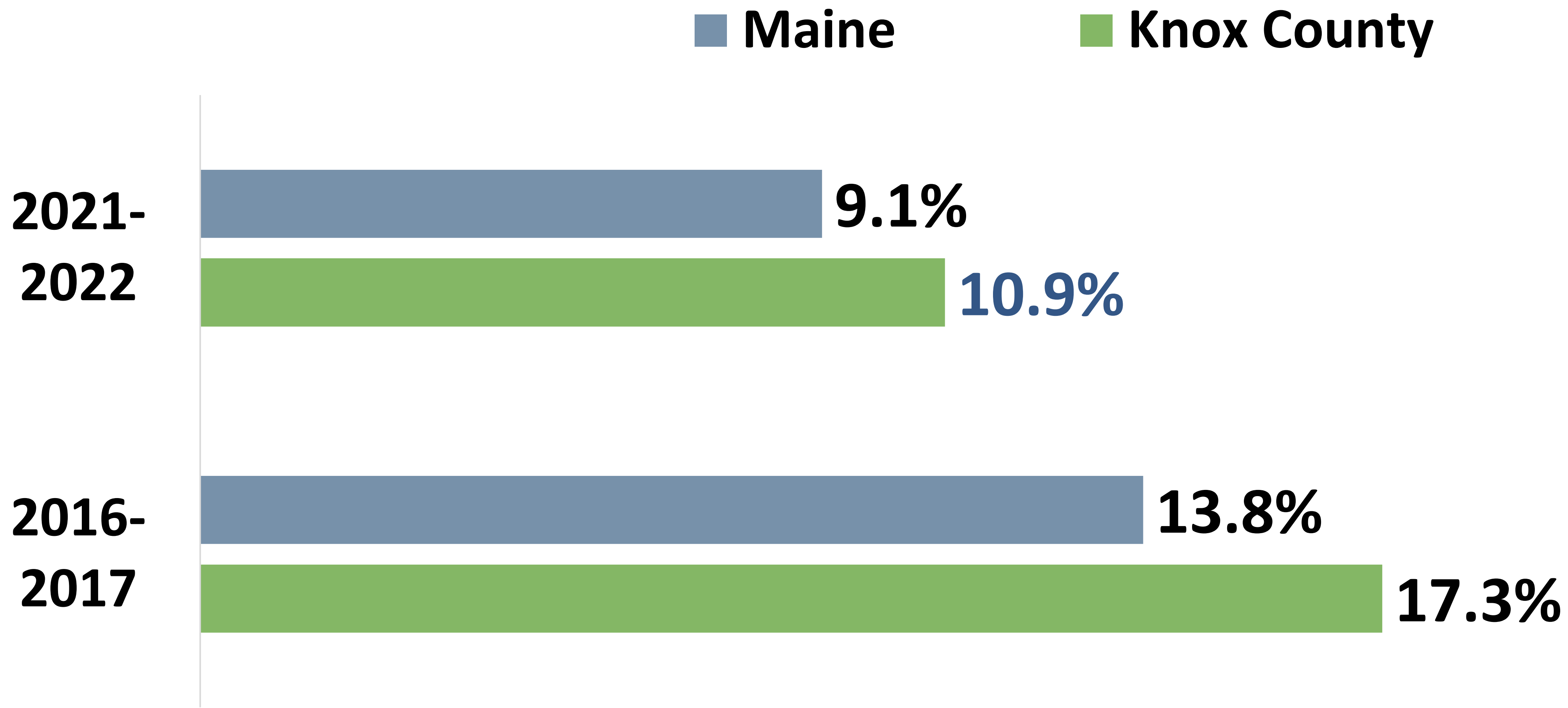
Adequate Prenatal Care

Knox County: 90.6%

Maine: 84.6%

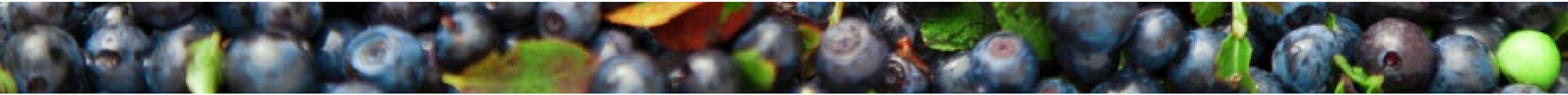
Knox County has a significantly higher rate of infants who are ever breastfed compared to Maine (2021-2022).

Smoked During Pregnancy



Percentage of new mothers who smoked cigarettes at any time during pregnancy

2021-2022 data indicates that Knox County has a significantly lower percentage of women who reported smoking during pregnancy compared to 2016-2017 county data.



Community Engagement

Community Engagement

Focus Group
Top Themes

Access to healthcare

Access to healthy foods

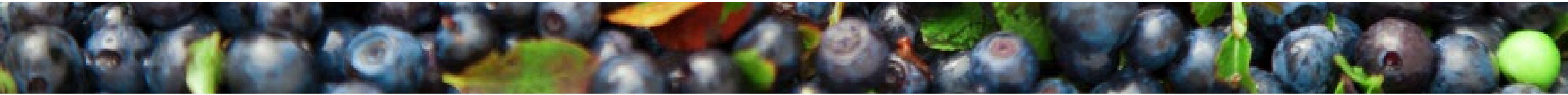
Affordable housing

Timely mental health care

Transportation

Select Quotes From Participants

- “Most specialties. They are available but far away and few accept MaineCare.”
- “Transportation – most of us use the Dash or Mid-Coast Connecter – but they are not reliable. They will call and change your time – you might have to go an hour early to your appointment or stay there an extra hour.”
- “Services in the wintertime – no warming shelters. There is one that is sometimes open on Saturdays. No immediate thing to bridge that gap.”
- “Housing affordability – issues with zoning, gentrification. You almost have to have two jobs to afford housing locally. About $2,500 a month if you have a family.”

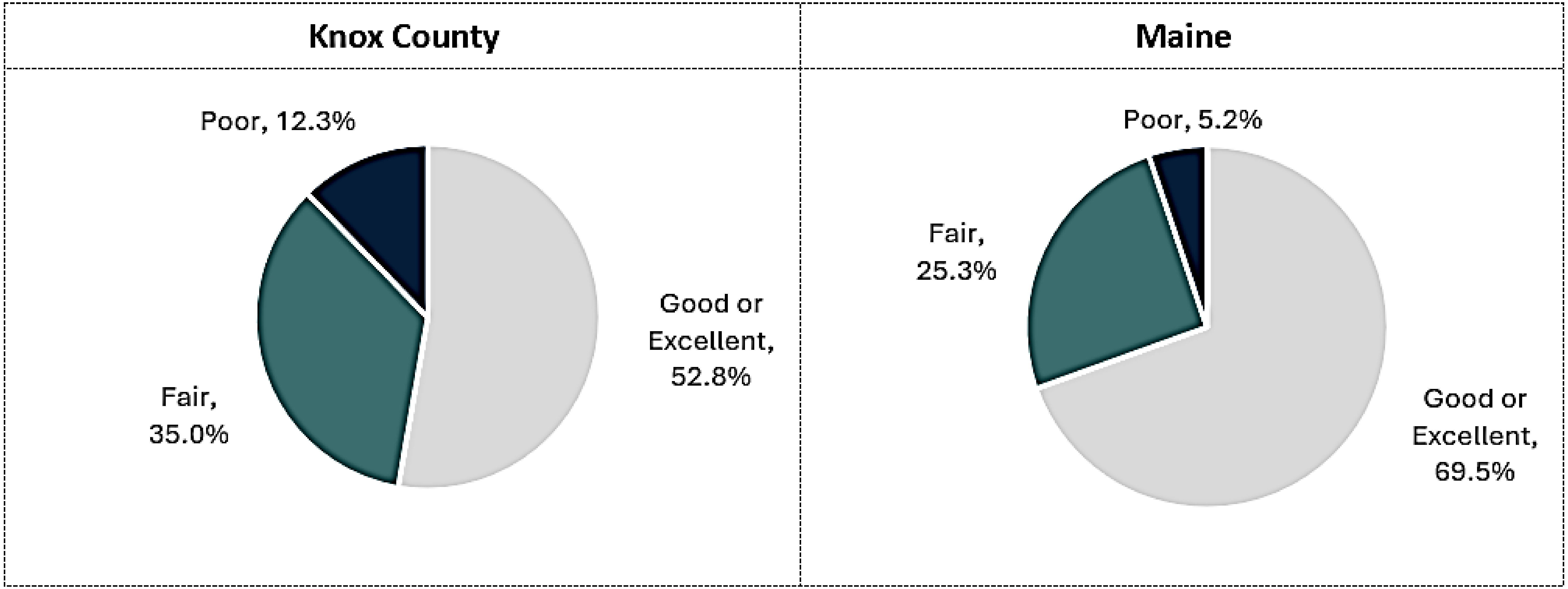


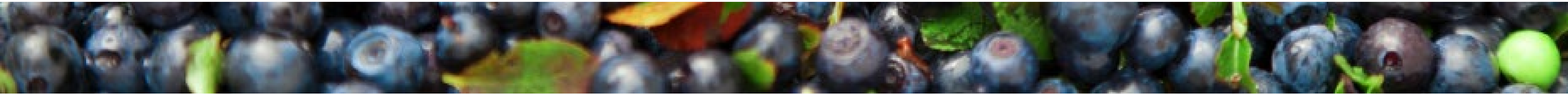
Community Engagement

Total Participants	
Knox County	**Maine**
164	3,967

Community Survey: Physical Health Status

How would you rate your own physical health?

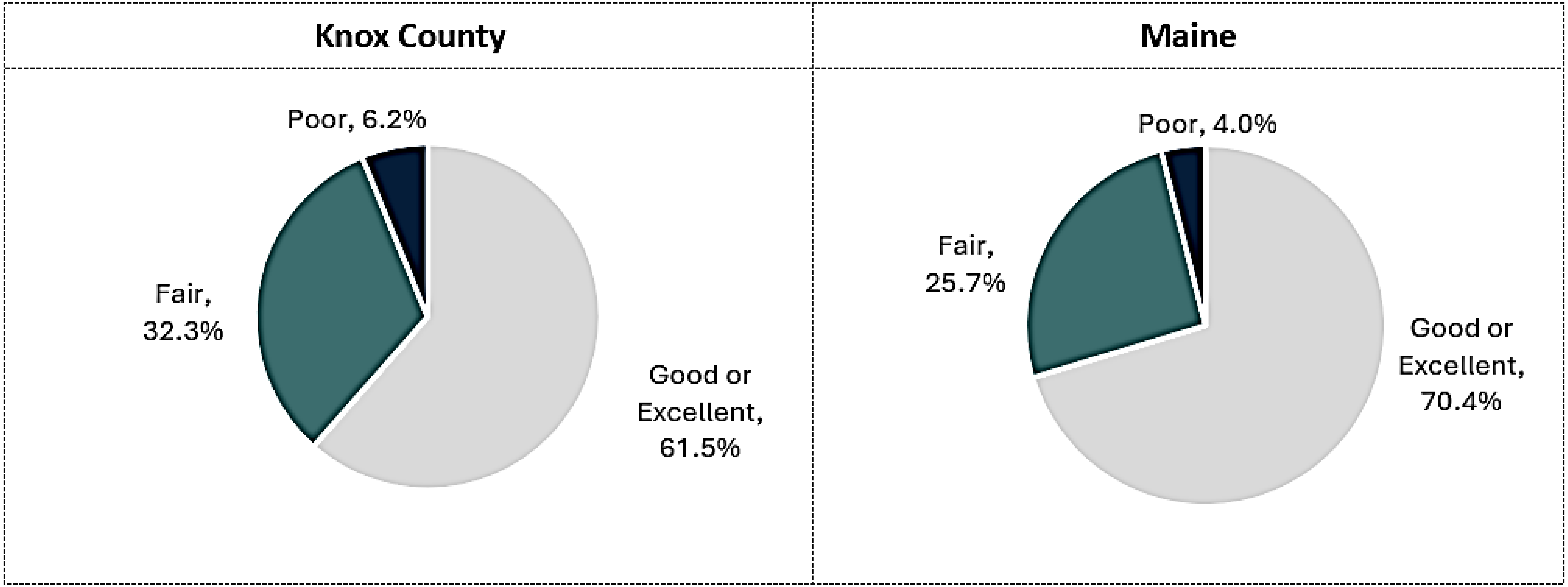


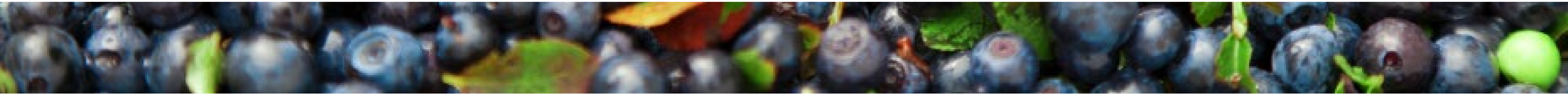


Community Engagement

Community Survey: Mental Health Status

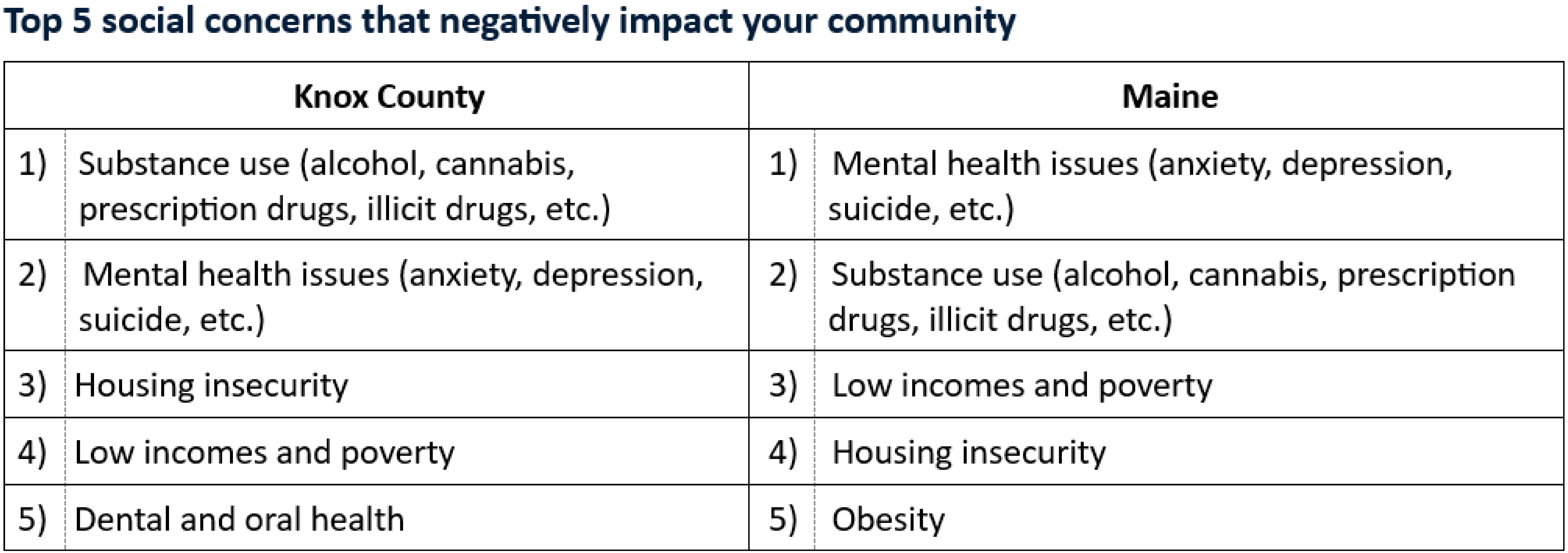
How would you rate your own mental health?





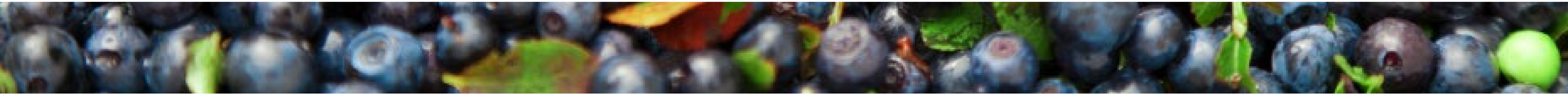
Community Engagement

Community Survey: Community Health Status



Top 5 social concerns that negatively impact your community

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



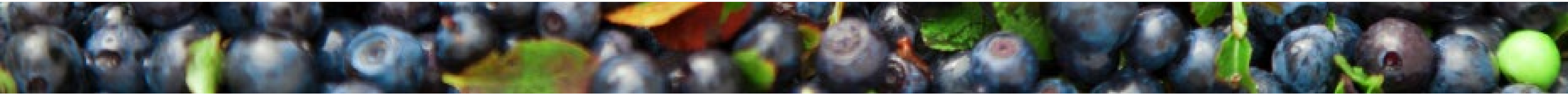
Community Engagement

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'

Knox County		Maine	
Economic needs	79.1%	Economic needs	76.1%
Chronic health conditions (cancer, high blood pressure, heart disease, high cholesterol, etc.)	77.6%	Chronic health conditions (cancer, high blood pressure, heart disease, high cholesterol, etc.)	75.7%
Housing needs	72.7%	Mental health needs	73.6%
Mental health needs	70.2%	Substance use	68.5%
Transportation needs	67.7%	Housing needs	68.5%
Substance use	62.5%	Transportation needs	60.9%
Environmental needs	53.6%	Environmental needs	58.4%
Public safety needs	45.9%	Public safety needs	53.7%



Prioritization Voting Results

Results

Community Conditions

1. Housing (88.2%)
2. Transportation (70.6%)
3. Provider Availability (52.9%)
4. Food (47.1%)
5. Childcare (41.2%)

Protective & Risk Factors

1. Illicit Drug Use (70.6%)
2. Alcohol Use (58.8%)
3. Youth Mattering (47.1%)
4. Preventive Oral Health Care (41.2%)
5. Prescription Drug Misuse (41.2%)

Health Conditions & Outcomes

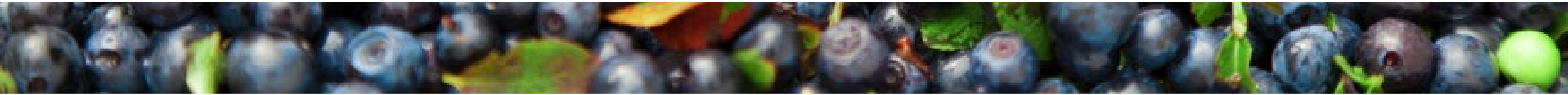
1. Mental Health (94.1%)
2. Obesity/Weight Status (52.9%)
3. Substance Use Related Injury & Death (52.9%)
4. Special Health Care Needs (35.3%)
5. Intentional Injury & Death (29.4%)

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.

Results

Community Conditions

1. Housing (96.2%)
2. Transportation (65.4%)
3. Provider Availability (65.4%)
4. Childcare (26.9%)

Protective & Risk Factors

1. ACES (69.2%)
2. Illicit Drug Use (65.3%)
3. Youth Mattering (61.5%)

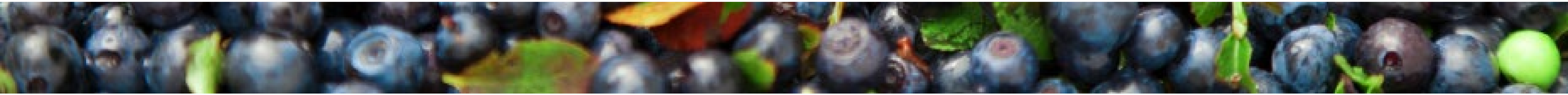
Health Conditions & Outcomes

1. Mental Health (84.6%)
2. Substance Use Related Injury & Death (76.9%)
3. Special Health Care Needs (50.0%)

Breakout Discussion #2

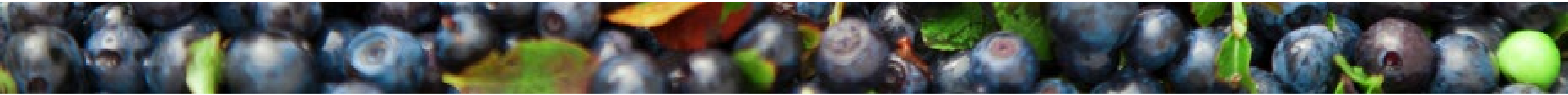
Please discuss the following questions as they relate to the priorities in your topic area:

- **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?**



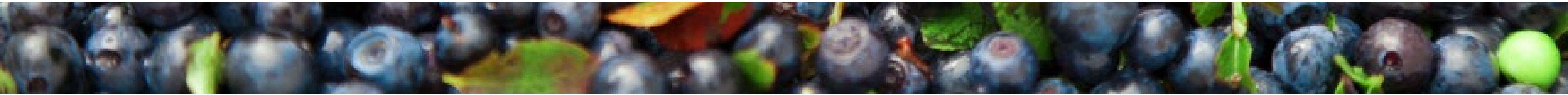
Breakout Discussion #3

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