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| **Priority**  **Category** | **Description** | **Individual Measures from Assessment** |
| **Financial Stability and Economic Mobility** | * Financial stability can include many interrelated economic components, such as poverty and income. * Economic mobility means the ability to improve one’s economic situation, which can be reflected by a geography’s cost of living, employment opportunities, and the ability to earn a living wage. | * + Gini coefficient of income inequality (p20-21)   + Percent of households below ALICE threshold (p23-25) |
| **Affordable Housing** | * Affordable housing may improve health by freeing up resources for nutritious food and health care costs. * Quality housing can reduce exposure to mental health stressors, infectious diseases, allergens, neurotoxins, and other dangers. * Families who can only find affordable housing in very high poverty areas may be prone to greater psychological distress and exposure to violent or traumatic events. | * Percent of households who spend more than 30% of their income on housing (p34-35) |
| **Education** | * There is a positive relationship between higher education and improved health outcomes. * Years of formal education correlates strongly with improved work and economic opportunities, reduced psychosocial stress, and healthier lifestyles. | * Percent of adults ≥25 years old with a Bachelor’s degree or higher (p26-28) |
| **Social Connection and Capital** | * A growing body of evidence suggests that non-parent adults have a large influence, either positive or negative, on adolescent development. * Adolescents whose social network includes a non-parent adult mentor who is involved in illegal activity have an increased probability of becoming involved in illegal activity. * Non-parent adults who are positive and supportive can contribute to an adolescent’s self-esteem, problem-solving behavior, and overall resilience. | * Percent of adolescents who know adults in the neighborhood they could talk to about something important (p29-31) |
| **Community Safety** | * High levels of violent crime compromise physical safety and psychological well-being. * Crime rates can also deter residents from pursuing healthy behaviors, such as outdoor exercise. * Increased stress levels, which might arise from continuous exposure to violence or concerns about personal safety, may contribute to obesity. | * Rate of violent crimes (p32-33) |
| **Health Care Access and Quality** | * Health care access and quality reflects one’s ability to physically obtain health care, to afford health care services, and receipt of appropriate and high quality health care services. * Health insurance coverage helps patients gain entry into the health care system. * Access to primary and preventive health care services can prevent future hospitalization and poor health outcomes. Access to specialty care providers is also critical for patients within a community. | * Percent of adults with no primary care provider (p74-76) * Percent of adults 18-64 years old with no health insurance (p77-78) |
| **Environmental Quality** | * An ideal environment is one that has clean air, water, and food and is free from toxic exposures. A contaminated environment may contribute to poor health outcomes. * Human environments generally consist of two components: indoor and outdoor. Indoor environmental issues can include lead, mold, and exposure to allergens and infectious agents from insects or rodents. Outdoor environmental hazards can include poor air quality due to smoke, smog, or pollution, extreme temperatures, and contaminated water sources. | * Rate of elevated blood lead levels among children < 6 years old (p36-37) |
| **Built Environment** | * A properly built environment enhances the development and well-being of its residents and supports healthy behaviors and outcomes. * Built environment can include the design of a community (such as streets, buildings, sidewalks, parks, etc.) and the assets located within the community (grocery stores, green spaces, locations for physical activity, schools, etc.). | * Percent of the population living in a food desert (p38-39) |
| **Obesity** | * Obesity is often the result of an overall energy imbalance due to poor diet and limited physical activity. * Obesity increases the risk for health conditions such as coronary heart disease, type 2 diabetes, cancer, hypertension, dyslipidemia, stroke, liver and gallbladder disease, sleep apnea and respiratory problems, and osteoarthritis. * Obese individuals may face social and psychological problems, such as stigmatization and low self-esteem. | * Percent of adults who are obese (p41-43) * Percent of adolescents who are obese (p44-46) |
| **Tobacco** | * Tobacco use can include the use of cigarettes, electronic cigarettes, chewing tobacco, and other nicotine-containing products. * Cigarette smoking is a cause of multiple diseases, including various cancers, cardiovascular conditions, low birth weight, and other adverse health outcomes. | * Percent of adults who currently smoke (p47-49) * Percent of adolescents who smoked cigarettes during the past 30 days (p50-52) |
| **Behavioral Health** | * Behavioral health is an emerging term within the mental health and substance abuse fields that focuses on a person’s mental well-being, their ability to function in everyday life, and their concept of self. * Components include aspects of mental health, including stress, depression, psychological disorders, and access to mental health services, and those relating to substance misuse, including inappropriate use of alcohol, prescription drugs, and illegal drugs. | * Percent of adults who binge drank during the past 30 days (p53-55) * Percent of adolescents who binge drank during the past 30 days (p56-58) * Percent of adolescents who have used marijuana in the last 30 days (p59-61) * Percent of adolescents who have used marijuana prior to age 13 (p62-64) * Percent of adults with poor mental health (p81-83) * Percent of adolescents with symptoms of depression in past year (p84-86) |
| **Physical Activity** | * A lack of physical activity can increase one’s risk for cardiovascular disease, stroke, type 2 diabetes, colon and breast cancers, depression, and dementia. * One’s built environment may contribute to the ability to be physically active (parks and walking trails, gyms, bike paths, etc.). | * Percent of adults who participated in leisure time physical activity (p65-67) |
| **Nutrition** | * Fruits and vegetables provide numerous nutrients and fiber. Consuming a variety of fruits and vegetables is necessary to obtain the nutrients necessary for optimal health and, for children, proper growth and development. * A plant-based diet is associated with decreased risk for chronic diseases, like cancer, diabetes, and obesity. | * Percent of adults who consume ≥ 5 servings of fruits and vegetables per day (p68-70) * Percentage of 9th and 11th grade students who ate five or more servings of fruits and vegetables per day during the past seven days. (p71-73) |
| **Communicable Diseases** | * Communicable diseases are diseases that are transmitted between people. These include a variety of respiratory, gastrointestinal, sexually transmitted, bloodborne, and vectorborne infections. * Prevention and treatment of communicable diseases are critical to the health of both individuals and communities. Prevention can take many forms, including vaccination, hand washing, social distancing, use of insect repellants, and use of condoms during sex, to name a few. | * Percent of non-medical immunization waivers granted (p79-80) * Rate of chlamydia cases (p93-94) |
| **Maternal and Child Health** | * Maternal health concerns are traditionally thought of as those relating to pregnancy and childbirth. Increasingly, this field is expanding to consider issues such as pre– and postpartum depression, obesity, and substance misuse. * Child health can relate to many topics, such as infant mortality, immunization, proper development and growth, and common childhood diseases such as asthma and obesity. | * Rate of preventable asthma hospitalization among youths < 18 years (p88-89) * Rate of infant mortality (p98-100) |
| **Chronic Disease** | * Chronic diseases are diseases that generally last one year or longer and usually cannot be prevented by vaccines or cured by medication. * Examples of chronic disease include cardiovascular disease, diabetes, asthma, and arthritis. * Chronic diseases have the largest impact on the health care system, both in terms of use and financial burden. Some chronic diseases can themselves lead to other diseases and cause financial and psychological distress for patients. | * Rate of preventable diabetes hospitalization (p90-92) * Rate of preventable congestive heart failure hospitalization among adults ≥ 65 years old (p95) |
| **Accidental Injury & Mortality** | * Deaths due to accidents are often the largest cause of death for children and young adults. * Poor socioeconomic environments can lead to increased deaths from accidental injury (also referred to as unintentional injury). * Deaths due to accidental injury can be reduced through policy efforts to reduce hazards, as well as individual and family safety precautions. | * Rate of deaths due to accidental injury (p105-106) * Mortality rate (p96-97) * Rate of deaths due to cardiovascular disease (p101-104) |