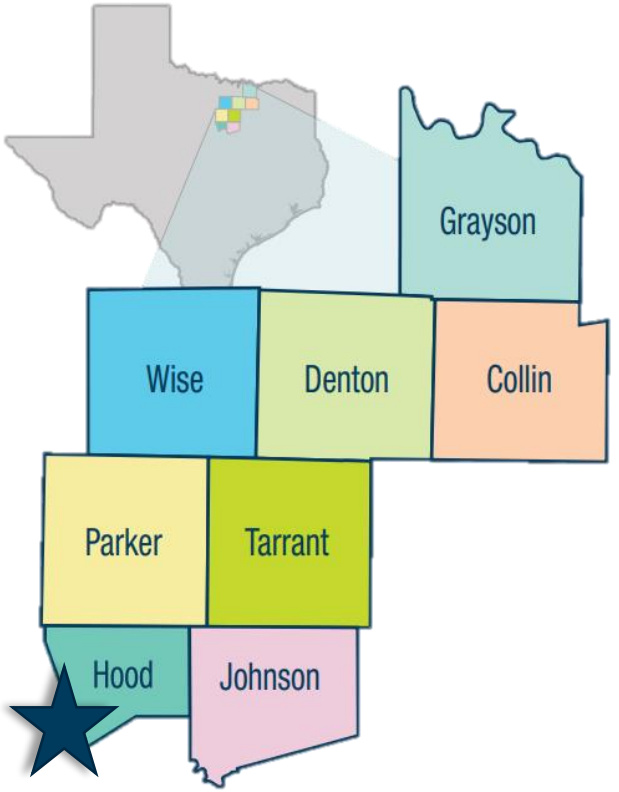
Dedicated to improving the health of children in our communities



Cook Children's

Hood County Child Health Summit

March 1, 2022

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Call to Order

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Questions about the data or our process?

Please email:

CHNAFeedback@cookchildrens.org

Agenda

- Cook Children's Commitment
- Opening Address
- 2021 CHNA Data Presentation
- *Break*
- Overview of Hood County for Healthy Children's Recent Efforts
- Award Presentation
- Group Discussion
- Call to Action/Adjourn

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Introduction

Becki Hale,
EdD, MA, RDH

Director, Child Health Evaluation

Center for Children's Health
Cook Children's Health Care System

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Our Commitment

Cook Children's Promise

Knowing that every child's life is sacred, it is the promise of Cook Children's to improve the health of every child in our region through the prevention and treatment of illness, disease and injury.

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Introduction

Dr. David E. Blocker,
MD, MPH

Dr. David E. Blocker, MD, MPH

Hood County Public Health Authority

City of Granbury Medical Advisor

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Welcome Address

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2021 Community Health Needs Assessment (CHNA)

- Collaboration Highlights
- Methodology
- Survey Demographics
- CHNA Data Results for Hood County

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Many Thanks!

Cook Children's CHNA Administrator

Linda Fulmer
Fulmer & Associates

Data Collection Partners

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ETC Institute

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MHMR Tarrant County

Emily Spence, PhD, Erika Thomson, PhD, Stacy Griner, PhD and team
University of North Texas Health Science Center

Carol Klocek
Center for Transforming Lives

Cook Children's Partners and Supporting Departments

The Center for Children's Health
Compliance
Finance
Healthcare Analytics
Health Equity, System Administration
Health Plan
Internal Audit
Legal
Media Services
Research
Strategic Marketing and Communication

External Advisory Committee Members

JULY 2020 – AUGUST 2021

John Biggan, PhD	ACH Child and Family Services
Godfred Boateng, PhD	Univ. of Texas Arlington
Stephanie Chandler	United Way of Grayson County
Kenyaree Cofer	Cornerstone Comm. Action Agency
Kimberly Dunlap	Slidell ISD
Robin Garrett	Paradise ISD
Leah King	United Way of Tarrant County
Airykka Lasley	Center for Transforming Lives
Lexi Lee	Lee Counseling Services
Tammy Mahan	LifePath Systems
Becky Mauldin	**United Way of Hood County**
Keely McCrady	Texas Agrilife Johnson County
Micky Moerbe	Tarrant County Public Health
Deanna Ochoa	Dept. of State Health Services
Ruby Peralta	Maximus
Matt Richardson, DrPH	Denton County Public Health
Betty White	**Granbury ISD**
The Honorable B. Glen Whitley	Tarrant County

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2021 CHNA Methodology

Parent/Caregiver Survey

Face to Face Interviews with Underserved Population

Virtual Focus Groups with Parents

Community Leader Survey and Interviews

Secondary Research

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2021 CHNA Methodology

Link to Video on YouTube

2021 Community Health Needs Assessment

CookChildren's. The Center for Children's Health

FAQs: General Info about the CHNA

What is a CHNA?

CHNA is the acronym for Community Health Needs Assessment. Cook Children's is conducting an assessment to collect comprehensive data about children's health (ages 0 – 17) in our eight-county service region (Collin, Denton, Grayson, Hood, Johnson, Parker, Tarrant and Wise counties).

Cook Children's 8-county service region is located in North Texas

Why conduct a CHNA?

Everything we do at Cook Children's focuses on the Promise we've made to our community to improve the health of every child in our region through the prevention and treatment of illness, disease and injury. The CHNA helps us fulfill this Promise by providing credible data that guides our strategies for preventing illness and injury to children. The CHNA also meets federal requirements for non-profit hospitals to focus community benefit strategies on the most critical health care needs in the communities we serve.

How is CHNA data collected?

Cook Children's conducts a stratified random sample survey of parents to ask questions about how various health issues impact their children and how easy or difficult it is to obtain care. We also conduct focus groups to provide an opportunity for parents to tell us about issues not included in the survey. The CHNA also includes health data from government and other reliable sources as well as a survey of community leaders. A children's art contest helps us better understand how children feel about their health.

How does this data help our community?

There are multiple obstacles to maintaining good health for many families such as poverty, discrimination, lack of access to good jobs with fair pay, quality education, housing and safe environments. Addressing these obstacles requires a collaborative, community approach. One organization cannot act alone and be successful. Effective partnerships create a shared vision and increase the community's capacity to shape outcomes.

With accurate information representative of the needs of a community, partners can increase understanding about children's health and the factors that influence it, identify priority needs for community action, develop solutions to address priorities, and evaluate the results of their efforts.

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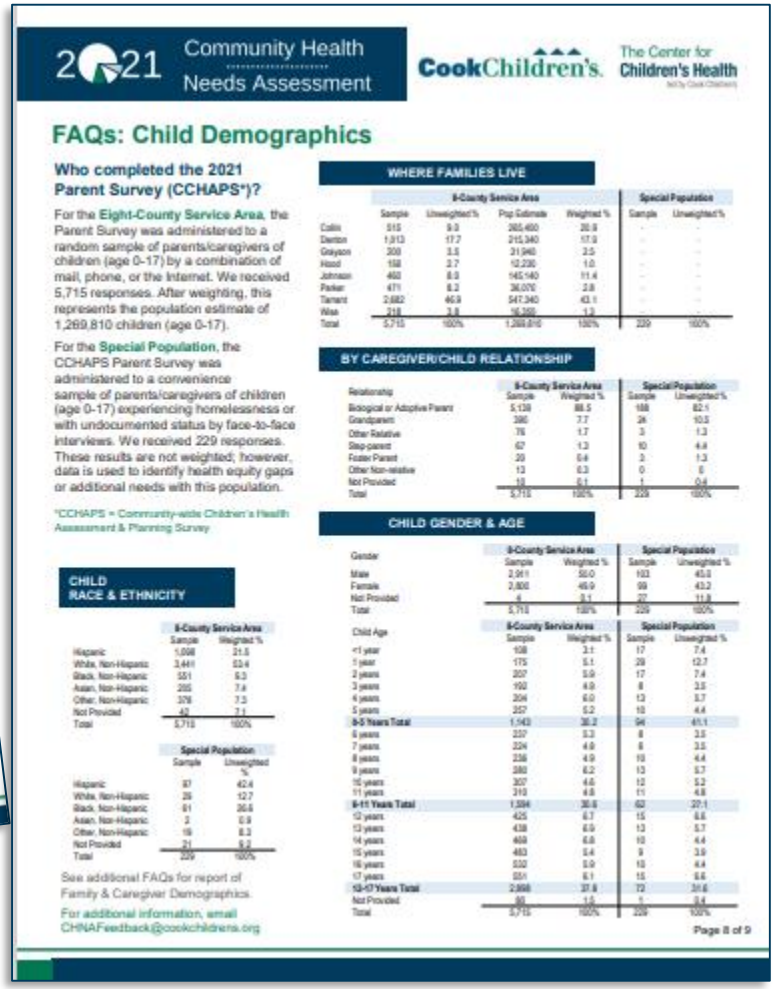
For additional information, email CHNAFeedback@cookchildrens.org



2021 Community Health Needs Assessment

CookChildren's. The Center for Children's Health

FAQs: Child Demographics

Who completed the 2021 Parent Survey (CCHAPS*)?

For the **Eight-County Service Area**, the Parent Survey was administered to a random sample of parents/caregivers of children (age 0-17) by a combination of mail, phone, or the Internet. We received 5,715 responses. After weighting, this represents the population estimate of 1,269,810 children (age 0-17).

For the **Special Population**, the CCHAPS Parent Survey was administered to a convenience sample of parents/caregivers of children (age 0-17) experiencing homelessness or with undocumented status by face-to-face interviews. We received 229 responses. These results are not weighted; however, data is used to identify health equity gaps or additional needs with this population.

*CCHAPS = Community-wide Children's Health Assessment & Planning Survey

WHERE FAMILIES LIVE

	8-County Service Area				Special Population	
	Sample	Unweighted %	Pop Estimate	Weighted %	Sample	Unweighted %
Collin	515	9.0	365,400	28.8	-	-
Denton	1,013	17.7	215,340	17.0	-	-
Grayson	300	5.5	31,940	2.5	-	-
Hood	158	2.7	12,230	1.0	-	-
Johnson	460	8.0	145,140	11.4	-	-
Parker	471	8.2	36,070	2.8	-	-
Tarrant	2,682	46.9	547,340	43.1	-	-
Wise	216	3.8	16,350	1.3	-	-
Total	5,715	100%	1,269,810	100%	229	100%

BY CAREGIVER/CHILD RELATIONSHIP

Relationship	8-County Service Area		Special Population	
	Sample	Weighted %	Sample	Unweighted %
Biological or Adoptive Parent	5,139	88.5	188	82.1
Grandparent	390	7.7	24	10.5
Other Relative	76	1.7	3	1.3
Step-parent	67	1.2	10	4.4
Foster Parent	20	0.4	3	1.3
Other Non-relative	13	0.3	0	0
Not Provided	10	0.1	1	0.4
Total	5,715	100%	229	100%

CHILD GENDER & AGE

Gender	8-County Service Area		Special Population	
	Sample	Weighted %	Sample	Unweighted %
Male	2,911	52.0	103	45.0
Female	2,800	45.9	99	43.2
Not Provided	4	2.1	27	11.8
Total	5,715	100%	229	100%

Child Age	8-County Service Area		Special Population	
	Sample	Weighted %	Sample	Unweighted %
<1 year	108	3.1	17	7.4
1 year	175	5.1	29	12.7
2 years	207	5.9	17	7.4
3 years	192	4.9	8	3.5
4 years	204	6.0	13	5.7
5 years	257	5.2	10	4.4
0-5 Years Total	1,143	30.2	94	41.1
6 years	237	5.3	8	3.5
7 years	224	4.9	8	3.5
8 years	236	4.9	10	4.4
9 years	280	6.2	13	5.7
10 years	307	4.6	12	5.2
11 years	310	4.8	11	4.8
6-11 Years Total	1,594	30.6	62	27.1
12 years	425	6.7	15	6.6
13 years	438	6.9	13	5.7
14 years	468	6.8	10	4.4
15 years	483	6.4	9	3.9
16 years	532	5.9	10	4.4
17 years	551	6.1	15	6.6
13-17 Years Total	2,958	37.8	72	31.6
Not Provided	80	1.5	1	0.4
Total	5,715	100%	229	100%

CHILD RACE & ETHNICITY

	8-County Service Area		Special Population	
	Sample	Weighted %	Sample	Unweighted %
Hispanic	1,008	21.8	87	42.4
White, Non-Hispanic	3,441	53.4	26	12.7
Black, Non-Hispanic	551	6.3	61	30.6
Asian, Non-Hispanic	205	7.4	3	0.9
Other, Non-Hispanic	376	7.5	19	8.3
Not Provided	42	7.1	21	9.2
Total	5,715	100%	229	100%

See additional FAQs for report of Family & Caregiver Demographics.

For additional information, email CHNAFeedback@cookchildrens.org

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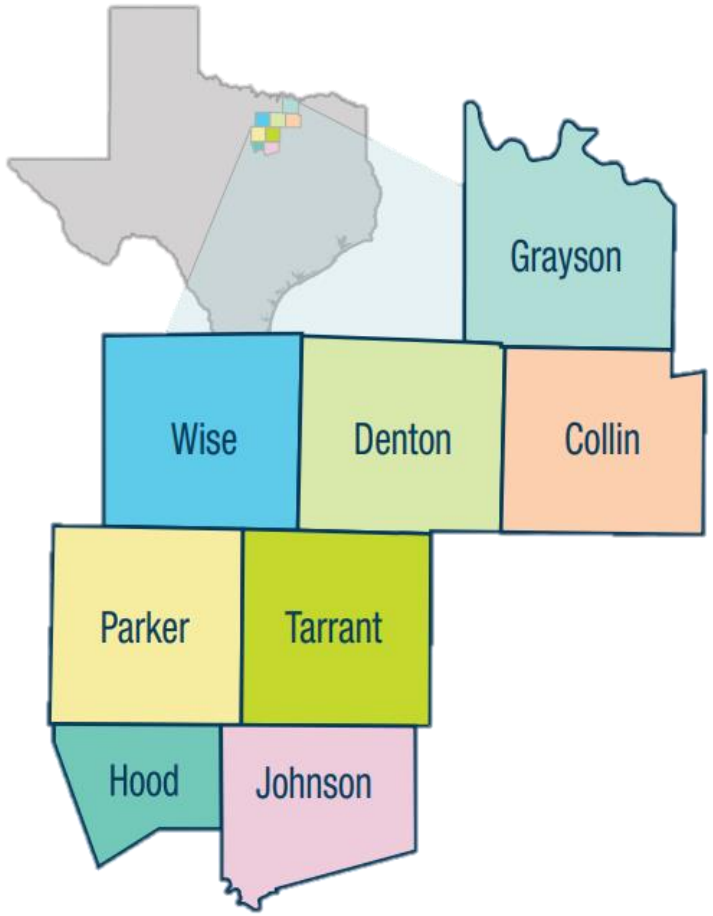
Geography



Parent/Caregiver Survey		
8-County Service Area		
County	**Sample**	**Population Estimate**
Collin	515	265,400
Denton	1,013	215,340
Grayson	200	31,950
Hood	**156**	**12,230**
Johnson	460	145,140
Parker	471	36,070
Tarrant	2,682	547,340
Wise	218	16,350
TOTAL	**5,715**	**1,269,810**

Community Leader Survey Demographics

Primary County	
Collin	5.9%
Denton	11.1%
Grayson	16.0%
Hood	**7.8%**
Johnson	5.6%
Parker	7.2%
Tarrant	41.2%
Wise	5.2%

Role in Community	
Business	8.2%
Clergy/Religious/ Faith Based	4.2%
Community Volunteer	9.5%
Educator/School Official	15.4%
Elected Official	5.6%
Government Employee/ Public Health	12.7%
Medical/Dental/Mental Health Professional	31.0%
Social Services/ Nonprofit	27.5%
Other	3.3%

306 Total Responses

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Introduction

Data Presentation

Blair Williams, MPA, MBA, CPH

Analyst, Child Health Evaluation

Lauren Purvis, MPH, CPH, CHES

Manager, Child Wellness

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H.E.L.P. for Children & Families

Community Health Needs and Equity Gaps




Hood County Child Health Summit | March 1, 2022

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How do we help *every* child with their health needs?

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Community Health Needs and Equity Gaps

2021 CHNA Data Sources Included in this Presentation

- **Survey of caregivers with children (ages 0-17)** provides a representative sample of Hood County and 8-county service area children. Descriptive findings reflect caregiver's perspective on their child's health, learning, and safety.
- **Face-to-face survey of 200+ underserved caregivers** with children (ages 0-17).
- **Survey of 300+ community leaders** in 8-county area.
- **Interviews of 25+ community leaders** in 8-county area.
- **Six focus groups and one interview with 20+ caregivers** in 8-county area.
- **Secondary data** such as US Census, NSCH, CDC.

Underserved caregivers: Caregivers of children (ages 0-17) at homeless shelter and/or have at least one undocumented family member.
NSCH: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
CDC: Centers for Disease Control and Prevention. CDC WISQARS (Web-based Injury Statistics Query and Reporting System).

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Community Health Needs and Equity Gaps

Community Health Needs

- Oral Health
- Mental Health
- Healthy Lifestyles
- Parenting and Family Support
- Injury Prevention
- Asthma
- Overall Health and Equitable Access to Care

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Community Health Needs and Equity Gaps

What are social determinants of health?

"Conditions in the environments where people are

born, live, learn, work, play, worship, and age

that affect a wide range of health, functioning,

and quality-of-life outcomes and risks."

Source: Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.

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How do we HELP *every* child with their health needs?

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Framework for Reporting Community Health Needs & Equity Gaps

Health	Equitable Access to Care & Basic Needs
Environment	Safety Where Children Live, Learn, & Play
Learning	Readiness & Support for Academic Success
Parenting	Parenting & Family Support

H.E.L.P. for Children in Hood County & 8-County Service Area

Community Health Needs and Equity Gaps

Health

Equitable Access to Care & Basic Needs

- Health status
- Oral health status
- Received all needed care (medical, dental, mental)
- Well-child preventive visit
- Preventive dental care
- Family-centered care
- Food security
- BMI-for-age

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Equitable Access to Care & Basic Needs

Health Status of Hood County Children

2021 CHNA Survey of Caregivers with Children ages 0-17

9 in 10 children

have ‘excellent’ or ‘very good’ health

Trends:

- **This rate is consistent** with US and TX benchmarks *from before and during pandemic*

Needs & Gaps:

- **~1,200 children** don’t have *ideal health status*
- *Ideal health status* is **lowest in 12-17 age group**
- In 8-county area, *ideal health status* is **lowest among Hispanic** and **non-Hispanic Black children**
- Likelihood of receiving a **well-child visit is lower in school-aged children (ages 6-17)** compared to young children (ages 0-5)

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children’s Health.
Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 12,230 for Hood County.

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Equitable Access to Care & Basic Needs

Oral Health Status of Hood County Children

2021 CHNA Survey of Caregivers with Children ages 0-17

7 in 10 children (ages 1-17)

have 'excellent' or 'very good' oral health

Trends:

- Similar to local rate, the Hood County rate **is lower** than US and TX benchmarks *from before and during pandemic*

Needs & Gaps:

- **~3,200 children** don't have *ideal oral health status*
- *Ideal oral health status* is **lowest in 6-17 age group**
- Nearly 10% of children (ages 6-17) **missed school** because of dental pain
- 1 in 3 children (ages 1-5) **didn't receive a recommendation** to get preventive dental care
- 19% of children (ages 1-17) **didn't receive preventive dental care** in past year

Local Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n=5,715.
US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
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Equitable Access to Care & Basic Needs

Access to Care in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

1 in 4 children

did not receive all needed care for health, dental, or mental services.

Estimated number of children: 3,000

Top reasons why:

- COVID-19 pandemic
- Insurance not sufficient to cover cost
- Services not available in child's area

Trends:

Similar to local rate, the Hood County rate of 'forgone care' **is much higher** than US and TX benchmarks *from before and during the pandemic*

Needs & Gaps:

- 15% did not receive **needed dental care**
- 8% did not receive **needed medical care**
- 1 in 4 did not always receive **family-centered care** that was sensitive to their family values
- 1 in 10 did not have **continuous insurance** coverage in the past year

Local Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n=5,715.
US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
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H.E.L.P. for Children in 8-County Service Area

Equitable Access to Care & Basic Needs

Access to Care

Parents and Community Leaders

Access to care is limited for children who live in non-urban areas, have Medicaid, or have undocumented family members.

Not sure where to go for their child's mental health care.

Others must miss work or school.

"A lot of the time I have to go 30, 40 miles from my house just to see a doctor because doctors in my area don't take my insurance for my kids. And it makes it extremely difficult. Especially if you don't have reliable transportation." – parent @ focus group

"Some facilities don't see children and other have very specific criteria to go there. We also a large Spanish speaking population and they have difficulty navigating care or understanding. Undocumented families can't get help and are often scared to get services." – community leader interview

"Where do I go, how do I get it, and what's the best [mental health] for my kid to get? Guidance counselor at school? Psychiatrist? Doctor? Not knowing where to start just leads you to not start at all." – parent @ focus group

"The nurse and the front office lady have both made remarks about how much school my kids have missed due to doctor's appointments." – parent @ focus group

H.E.L.P. for Children in 8-County Service Area

Community Health Needs and Equity Gaps

Access to Basic Needs

Community Leaders

Over 60% of community leaders surveyed felt poverty and affordable housing were serious problems for children in their communities.

"There is such a distinction between the *haves* and the *have nots*."
– community leader interview

"Housing is a complaint for my clients. Hard to find adequate and decent housing - not many rentals. Super expensive or low quality. Wait list for housing is super long. Some are in cars because there is no available housing. Others are priced out of their homes because of tax increases."
– community leader interview

"Affordable housing (or the lack of) contributes to child homelessness. Housing effects everything - and their health and access to health.
– community leader interview

Community Leaders: Survey administered to community leaders in 8-county service area. n= 306.

H.E.L.P. for Children

Equitable Access to Care & Basic Needs

Household Income in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

Below $50k / $50-$100k / $100-150k / $150k+

Over 1 in 4 children

live in households with annual family income below $50k.

Estimated number of children: 3,000

Trends:

The median family income of households with children in Hood County is $83k.

– US Census, 2019: ACS 5-Year Estimates

Needs & Gaps:

- Less likely to have *ideal health status*
- Less likely to have *ideal oral health status*
- Lowest likelihood to be able to afford nutritious foods

Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 12,230 for Hood County.

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Equitable Access to Care & Basic Needs

Household Income in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

Below $50k / $50-$100k / $100-150k / $150k+

2 in 3 children

live in households with annual family income below $100k.

Estimated number of children: 8,000

"The challenge is equitable access to health and healthy food. There are populations with even greater needs because of COVID-19."

– community leader interview

Needs & Gaps:

- Less likely to receive all needed medical, dental, mental care
- Less likely to be able to afford nutritious foods or access to physical activity
- Less likely to have normal BMI-for-age*

Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 12,230 for Hood County.
**Note*: CDC BMI-for-age calculated with parent-provided data on child height, weight, age, and gender for children (ages 10-17).

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H.E.L.P. for Children in Hood County & 8-County Service Area

Equitable Access to Care & Basic Needs

Access to Care

Parents and Community Leaders

In addition to children in low-income households, children in households with income below $100k have health needs and equity gaps.

Children with limited access to preventive care may not receive needed health education, resources, and support.

"Families have to choose between paying for medicine, or necessities for their kids, or might not even be able to make it to a grocery store if they have transportation issues."

– community leader interview

H.E.L.P. for Children in Hood County & 8-County Service Area

Community Health Needs and Equity Gaps

How do we HELP every child with their health needs?

Health

Equitable Access to Care & Basic Needs

- Equitable access to family-centered healthcare
  - Preventive services
  - Prompt treatment for health, dental, mental
- Access to basic needs, such as housing and food

"The pandemic impacted basic needs and food. Our community really stepped up to the plate – churches and programs helped young kids with food and adults who may have lost their jobs. Proud of our community. The community really came together."

– community leader interview

H.E.L.P. for Children in Hood County and 8-County Service Area

Community Health Needs and Equity Gaps

Environment

Safety Where Children Live, Learn, & Play

- ER visit due to accidental injury
- Adverse Childhood Experiences (ACEs)
- Neighborhood & School safety

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Safety Where Children Live, Learn, & Play

Accidental Injury in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

Nearly 1 in 8 children

received emergency care for an accidental injury.

Estimated number of children: 1,400

Trends:

Leading Causes of Unintentional Injury Death in US & TX

- For infants, suffocation due to unsafe sleep environments
- For children 1-4 years, drowning
- For children 5-17 years, motor vehicle traffic accidents
- For young children and teens, poisoning and firearm injuries

"All those injuries typically happen in one moment instance, like you've looked away for a second and that's when it happens." – parent @ focus group

"Some kids aren't in the appropriate car seat – either they can't afford one, don't use it, or they're expired." – community leader interview

"Need to give out lifejackets and promote water safety to parents." – community leader interview

"Thinking about parents who have to work - there may be some kids home alone. Or an older sibling, like 10-12 years old, being home alone and supervising younger kids. Perfect storm for injury when they are home alone." – community leader interview

Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 12,230 for Hood County.
Leading Causes: CDC WISQARS (Web-based Injury Statistics Query and Reporting System).

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Safety Where Children Live, Learn, & Play

Home Safety in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

1 in 5 children

has two or more Adverse Childhood Experiences (ACEs).

Estimated number of children: 2,400

ACEs in Hood County:

- Parent or guardian divorced or separated (24%)
- Lived with anyone who was mentally ill, suicidal, depressed (16%)
- Lived with anyone who had a problem with drugs, alcohol (11%)
- Parent or guardian served time in jail (9%)
- Witness violence in home (8%)
- Parent or guardian died (3%)
- Discrimination (2%)
- Witness violence in neighborhood (1%)

Trends:

This rate **is much higher** than US and TX benchmarks *from before and during the pandemic.*

"I think that living with this COVID-19 Pandemic is an ACE."
– community leader interview

"When you look at ACEs, all of this ties into each other. Youth involved in risk behavior, substance abuse, mental health… it all ties together."
– community leader interview

"One of the ways kids show signs of stress or depression is by fighting or acting out. Comes from a lack of emotional support. Some are isolated in abusive households. A safe environment isn't there." – community leader interview

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 12,230 for Hood County.

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Safety Where Children Live, Learn, & Play

Child Safety in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

Below $50k / $50-$100k / $100-150k / $150k+

Children in households with annual family income below $50k may have greatest safety needs.

Needs & Gaps:

- 8 times more likely to have at least 2 ACEs
- Less likely to feel safe in neighborhood or school
- Less likely to receive care for accidental injury

"In the last year we have seen quite a big increase in the amount of trauma our kids are experiencing at home and a lot stems from parents losing jobs, loss of housing, a lot of kids living in cars, motels, or couch surfing."

- community leader interview

"Because of the affordable housing crisis, we have many families living together. Multiple families are sharing a small duplex. Thinking about sanitation, mental health, safety… Even if people could afford housing, there's not enough housing."

- community leader interview

Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 12,230 for Hood County.

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H.E.L.P. for Children in Hood County & 8-County Service Area

Community Health Needs and Equity Gaps

How do we HELP every child have safety from harm?

Environment

Safety Where Children Live, Learn, & Play

- Equitable access to family-centered healthcare:
  - Emergency care
  - Injury prevention resources
- Access to safe, stable housing, and food
- Parenting & family support

> "The community is engaged and did a great job trying to combat food insecurity and provide rental assistance. Also, our child advocacy center (CAC) saw an increase in case volume - what was to be expected during the pandemic. Our CAC is highly functioning and did a great job responding."
>
> – community leader interview

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Community Health Needs and Equity Gaps

Learning

Readiness & Support for Academic Success

- School Readiness (3-5 year olds)
- Developmental Delay
- Learning Disability
- Mental Health

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Readiness & Support for Academic Success

School Readiness in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

Nearly 70%

of children (ages 3-5) are developmentally ready for school based on their growth and skills

According to child's caregiver

Estimated number of children who may not have school readiness: 500

Trends:

Similar to local rate, the Hood County rate of 3-5 year olds who may be developmentally ready for school **is lower** than US and TX benchmarks *from before the pandemic*

"In terms of kids struggling with moderating their emotions, dealing with uncomfortable emotions and even using the information age…we judge ourselves as a parent: 'Where should my kid be, in terms of their development?' And then, 'How am I responding to that?'"

– parent @ focus group

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019 National Survey of Children's Health.
8-county (Local) and Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 3-5) in 8-county (n= 622) and Hood (n=21).
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates for children ages 3-5 in 8-county (10,480) and Hood (1,890).

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Readiness & Support for Academic Success

Child Development & Learning in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

1 in 10 children

has developmental delay

Caregiver told by health care provider or educator, ages 3-17

Estimated number of children: 1,100

1 in 6 children

has learning disability

Caregiver told by health care provider or educator, ages 3-17

Estimated number of children: 1,600

Trends:

Both rates **are higher** than US and TX benchmarks *from before the pandemic*

"With COVID, [it] became very different from her going to school and being in daycare where she's around other babies and the teachers are helping her with those milestones. She very quickly fell behind."
– parent @ focus group

"We would like to see something for younger kids to catch development delays or autism. Especially for non-verbal toddlers."
– community leader interview

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019 National Survey of Children's Health.
Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 3-17) n= 138.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates for Hood County children ages 3-17 is 10,480.

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Readiness & Support for Academic Success

Child Mental Health in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

1 in 3 school-aged children

has at least one of the most commonly diagnosed mental health conditions

Caregiver-report of diagnosis by health care provider, ages 6-17

Estimated number of children: 3,000

Most commonly diagnosed conditions:

- Anxiety
- Depression
- ADD/ADHD
- Behavioral/Conduct Disorder

Trends:

Similar to the local rate, this rate **is higher** than US and TX benchmarks *from before the pandemic*

"Kids don't show depression like adults. They show it with irritability, acting out and aggression. It is tough for school administrators and some teachers don't have the training to know how to deescalate these situations." – community leader interview

"Junior high is hard enough and then when you add in social media, bullying, cyber bullying…it's just a whole different level of complexity. Outdoor activities or the lack thereof are another contributor to this." – community leader interview

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019 National Survey of Children's Health.
Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 6-17) n= 117.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates for Hood County children ages 6-17 is 8,590.

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Readiness & Support for Academic Success

Learning in Hood County

Access and awareness of developmental screenings and behavioral health may be limited for some families.

Additional factors that could impact child learning, development, and behavioral health:

- COVID-19 pandemic
- Undiagnosed mental health condition
- Adverse Childhood Experiences (ACEs)
- Social determinants of health
- Caregiver concern of being reported/deported

"With the pandemic, all of our mental health has been tested. We are focused on suicide prevention, access to food, and youth resiliency."
– community leader interview

"...some facilities have very specific criteria to go there. We also a large Spanish speaking population and they have difficulty navigating care or understanding. Undocumented families can't get help and are often scared to get services." – community leader interview

H.E.L.P. for Children in Hood County & 8-County Service Area

Community Health Needs and Equity Gaps

How do we HELP every child with their learning?

Learning

Readiness & Support for Academic Success

- Equitable access to family-centered healthcare:
  - Developmental screenings
  - Mental health services
- Access to safe, stable housing, and food
- Parenting & family support
- Resources for coping, resiliency, and suicide prevention

"We make sure we have a social worker on each campus this year in particular due to the increase in these types of needs. The kids cannot focus on learning if their basic needs are not met. **We want to be sure they are provided with all existing community resources.**"

– community leader interview

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Community Health Needs and Equity Gaps

Parenting

Parenting & Family Support

- Caregiver coping with parenting demands
- Caregiver has source of emotional support

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Parenting & Family Support

Parent Coping in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

1 in 2 children

has a caregiver who is not coping 'very well' with parenting demands

Estimated number of children: 5,500

Trends:

- Similar to the local rate, this rate of caregivers 'coping very well' **is lower** than US and TX benchmarks *from before and during the pandemic* – with all rates decreasing since 2015

Needs & Gaps:

- Rate is **lowest for children ages 12-17**
- Rate is **lowest among caregivers who are separated, widowed, never married, or divorced**

"I'm a single parent…I am exhausted. I work all day. I have to come home and cook. Being exhausted and the kids need a lot of attention. As parents… there's no book."

– parent @ focus group

"Children witnessing parents arguing or stressing due to COVID-19 stressors is a huge concern."

– community leader interview

Local Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n=5,715.
US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 12,230 for Hood County.

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Parenting & Family Support

Emotional Support in Hood County

2021 CHNA Survey of Caregivers with Children ages 0-17

1 in 9 children

has a caregiver who does not have source of emotional support to help with parenting

Estimated number of children: 1,400

Of parents with support, common sources are:

- Other family member or close friend
- Spouse or domestic partner
- Place of worship or religious leader
- Healthcare provider
- Peer support group

"Emotional support? Well, I don't really know. I don't think I'm getting any. I attend church group meetings. There we get to, to release, talk about what's going on. That's about the only support I have or people that I can talk to." – parent @ focus group

"You've got financial stress, you've got emotional stress. You got people that may not have been able to provide as much food for the family."
– parent @ focus group

"Parent lost a job, parents fighting in front of the child, witnessing this stress – children just want to escape. Feel like a burden to their parents. When you look at ACEs - all of this ties into each other. Youth involved in risk behavior, substance abuse, mental health… it all ties together." – community leader interview

Hood County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 156.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 12,230 for Hood County.

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Parenting & Family Support

Parenting

Access to care, basic needs, and emotional support may be limited for some families.

Additional factors that could impact parenting & family support:

- COVID-19 pandemic
- Mental health of caregiver and child
- Adverse Childhood Experiences
- Social determinants of health
- Caregiver concern of being reported/deported

"So we can tell people all day long that they need to have their kids in these [outdoor] activities, but if they're **working two jobs, they can't afford** to just take them to the park every day and they can't afford to put them in these activities and whatnot. I think that between the nutrition lacking and then the activity lacking, **then that creates a big snowball effect**."

– parent @ focus group

H.E.L.P. for Children in Hood County & 8-County Service Area

Community Health Needs and Equity Gaps

How do we HELP every child and their family?

Parenting

Parenting & Family Support

- Awareness of parenting & family support resources
- Equitable access to healthy food and physical activity
- Equitable access to family-centered healthcare:
  - Preventive care
  - Health education
  - Assistance with basic and social needs

"Organizations are pulling resources together - such a positive and uplifting thing. Really profound. We also learned so much about available resources while connecting families in need with specific resources."

– community leader interview

How do we HELP *every* child with their health needs?

Health	Equitable Access to Care & Basic Needs
Environment	Safety Where Children Live, Learn, & Play
Learning	Readiness & Support for Academic Success
Parenting	Parenting & Family Support

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Health	**Equitable Access to Care & Basic Needs** Children with limited access to preventive care may not receive needed health education, resources, and social support.
Environment	**Safety Where Children Live, Learn, & Play** Children with limited access to healthcare, or those without safe, stable housing and relationships have the highest need for safety.
Learning	Readiness & Support for Academic Success Children with limited access to preventive care, developmental screenings, behavioral health, or social services have barriers to learning.
Parenting	Parenting & Family Support Children & families with limited access to basic needs, healthcare, or safety may need additional social and emotional support from the community.

Break

15 Minutes

Feel free to turn your camera off during this time

2021 CHNA Connection to the Community

Link to Video on YouTube

Introduction

Sharla Caro

Coalition Chair

Hood County for Healthy Children

Parenting Support in Hood County

Vision

"Hood County is a community where children are safe, secure, healthy and have a strong sense of self-worth."

Identified Community Health Need

Protective factors for healthy families include a supportive family network, support for basic needs, nurturing parenting skills, and communities that support parents and take ownership in preventing child abuse.

Current Strategies

Sustain & grow parent support initiatives

Improve capacity of professionals to provide support to parents

The Centers for Disease Control & Prevention. (2019). National Center for Injury Prevention and Control, Division of Violence Prevention.
Cook Children's 2018 Community Health Needs Assessment Implementation Strategies to address parenting support for FY2019 – FY2021.

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Parenting Support in Hood County

Parent Cafés

- Transitioned Parent Cafés to a virtual platform and incorporated one-on-one Parent Cafe sessions, as requested.
- Created short videos highlighting key Parent Café messages as another tool to support parents in the community and create awareness for HC4HC.
- Added 10 additional Parent Café topics

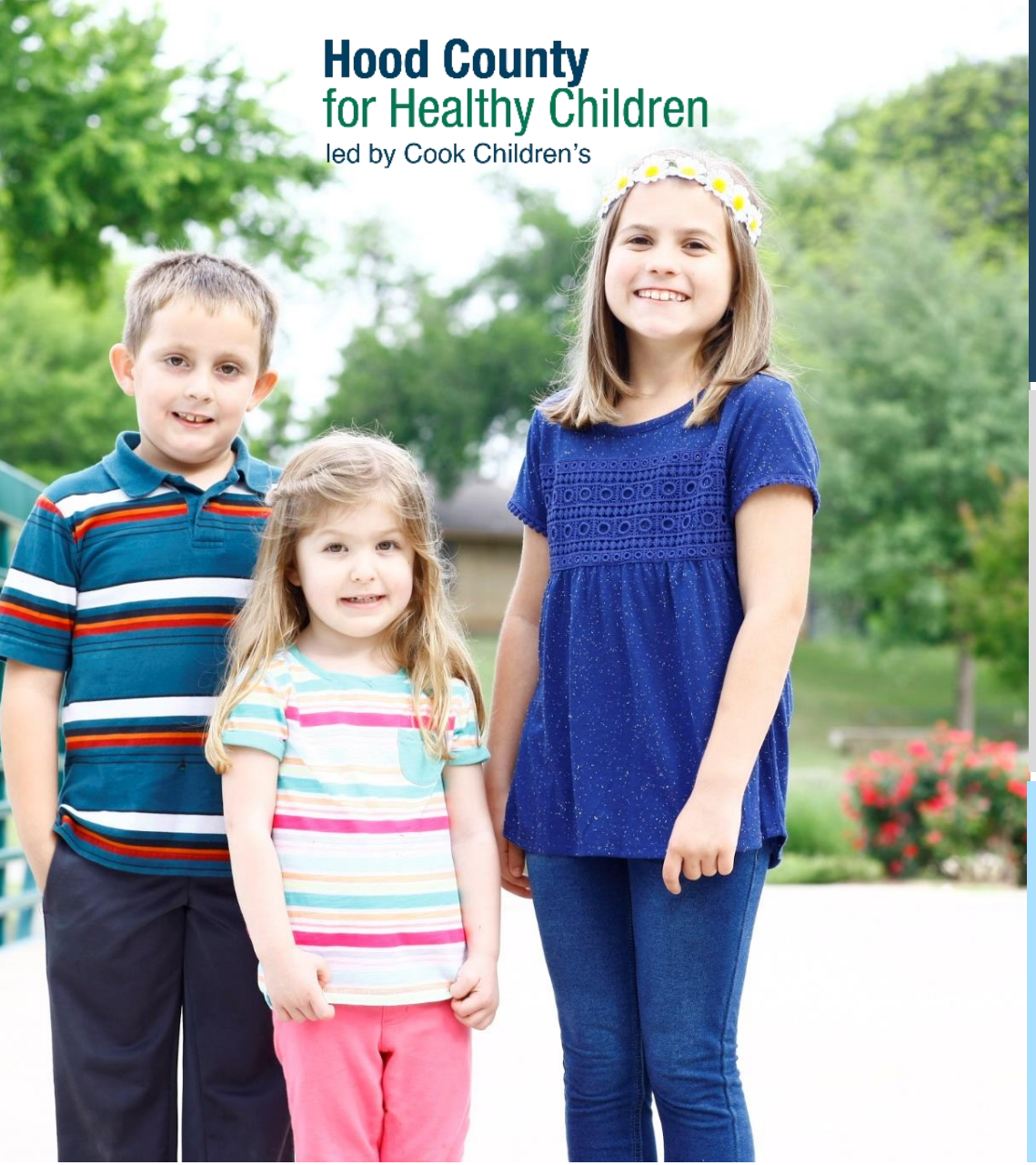
Parenting Support in Hood County

Community Engagement

- Provided Grief Support Boxes to Communities in Schools (CIS) for students who lost a classmate this past year.
- Distributed over 25,000 parenting support tools & educational resources

Child Abuse Prevention Month

- Partnering with the Hood County Child Advocacy Center to highlight the importance of Child Abuse and Neglect Prevention
- Judge Massingill will read a proclamation acknowledging the importance of creating a community that keeps our kids safe and secure.



10 Year Anniversary

2011 - 2021

Convened **322** coalition, workgroup, and stakeholder meetings

Volunteers invested **2,722** hours at a value of **$67,885**

Conducted **12** Parent Café facilitator trainings

Hosted **129** in person Parent Cafés with over **400** parents and caregivers

150 parents and caregivers attended multiple Parent Cafés

Engaged over **30** member organizations and community partners

Distributed over **25,000** parenting support tools & educational resources

Provided resources or volunteer support for **197** Hood County community events

"Hood County is a community where children are safe, secure, healthy and have a strong sense of self-worth."

Prepared by C4CH Child Health Evaluation | Source: FY2013-FY2020 HC4HC Program Measure Reports and record retention files 2011-2013

Introduction

Courtney Barnard,
LMSW-AP

Director, Child Wellness

Center for Children's Health
Cook Children's Health Care System

CookChildren's

The Center for
Children's Health
led by Cook Children's

Green Crystal Award

Mia Best

Rancho Brazos Community Center

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Group Discussion

- Based on the data presentation you just heard, **what resources are available for families in Hood County related to parenting support?**
- Based on the children or families your organization serves, **what types of community resources do families need the most?** Are there collaboration opportunities for providing/sharing these resources?
- What other organization needs to be at the table to improve children's health in our community?

Questions about the data or our process?

Please email:
CHNAFeedback@cookchildrens.org

Visit **www.centerforchildrenshealth.org** to learn how to get involved with the coalition, available resources, and upcoming events.

Review the **Data Dashboard** to learn more about children's health in our region and Hood County.

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