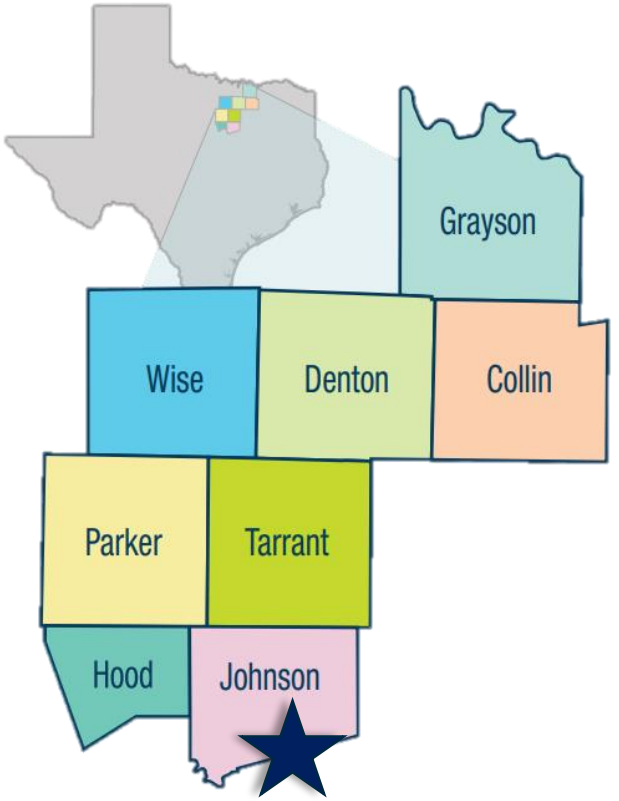
Dedicated to improving the health of children in our communities



Cook Children's

Johnson County Child Health Summit

May 24, 2022

CookChildren's

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

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 Johnson County Alliance for Healthy Kids
- Award Presentation
- Group Discussion
- Call to Action/Adjourn

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Introduction

Becki Hale,
EdD, MA, RDH

Director, Child Health Evaluation

The 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 through the prevention and treatment of illness, disease and injury.

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Introduction

Judge Harmon

The Honorable Roger Harmon

Johnson County Judge

Welcome Address

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2021 Community Health Needs Assessment (CHNA)

- Collaboration Highlights
- Methodology
- Survey Demographics
- CHNA Data Results for Johnson 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

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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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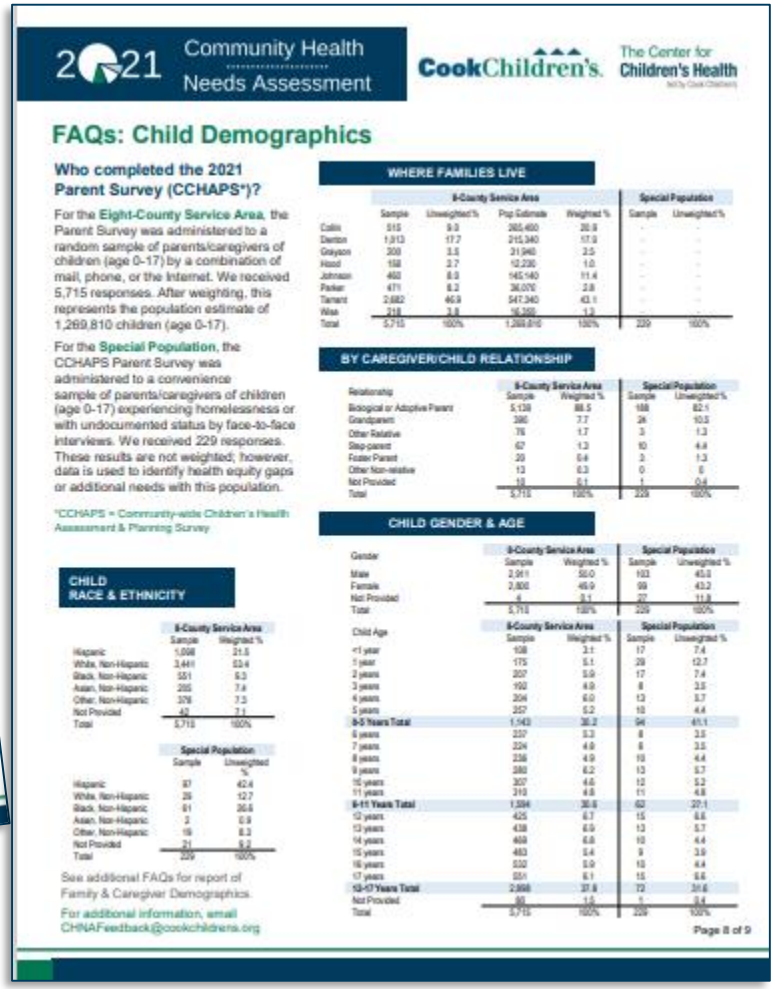
For additional information, email CHNAFeedback@cookchildrens.org



2021 Community Health Needs Assessment

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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	265,400	20.9	-	-
Denton	1,013	17.7	215,340	17.0	-	-
Grayson	309	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	218	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	50.0	103	45.0
Female	2,800	49.0	99	43.2
Not Provided	4	1.1	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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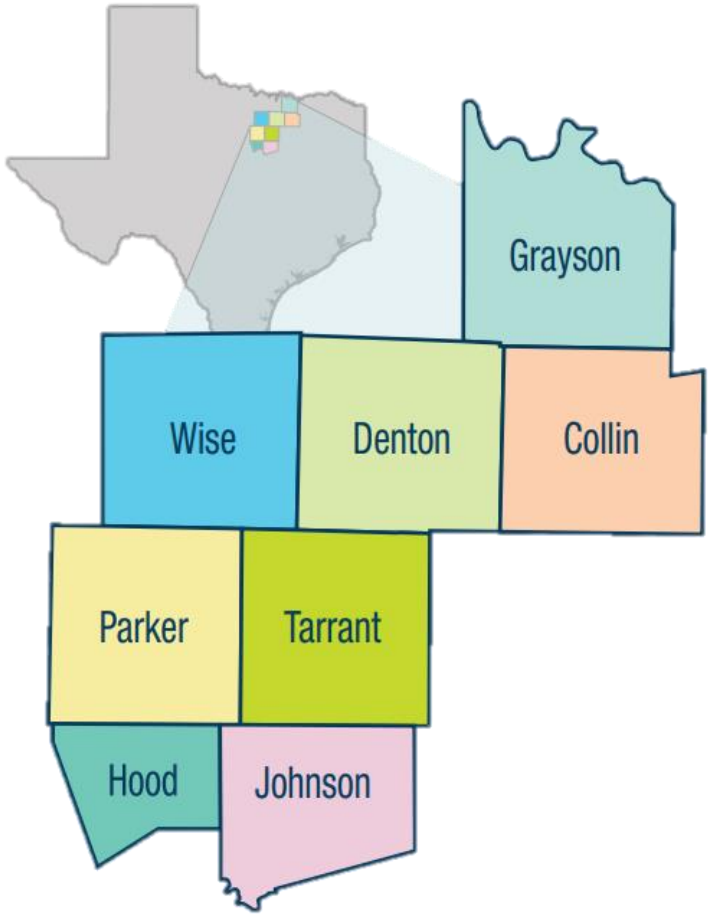
Geography



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, MCHES

Manager, Child Wellness

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

Community Health Needs and Equity Gaps




Johnson County Child Health Summit **| May 24, 2022**

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

2021 CHNA Data Sources Included in this Presentation

- **Survey of caregivers with children (ages 0-17)** provides a representative sample of Johnson County and local 8-county service area children. Descriptive findings reflect caregiver's perspective on their child's health, learning, and safety. Benchmarks with national and state estimates are available for select questions.
- **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

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

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 Johnson County & 8-County Service Area

Community Health Needs and Equity Gaps

Health

Equitable Access to Care & Basic Needs

- Health status
- Oral health status
- Mental health status
- BMI-for-Age
- Preventive care
- Received all needed care (medical, dental, mental)
- Access to basic needs

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Equitable Access to Care & Basic Needs

Johnson County Children

2021 CHNA Survey of Caregivers with Children

Most children have 'excellent' or 'very good' health, mental health, or oral health.

– According to child's caregiver

Health Status

9 in 10 children
(ages 0-17)

Mental Health Status

7 in 10 children
(ages 6-17)

Oral Health Status

7 in 10 children
(ages 1-17)

Local Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n=5,715.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.

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Equitable Access to Care & Basic Needs

Health Status of Johnson County Children

2021 CHNA Survey of Caregivers with Children

9 in 10 children (ages 0-17)
have **'excellent' or 'very good' health**

Trends:

This rate (90%) is **higher than** the local rate and **consistent with** US and TX benchmarks

- *88% 8-county local rate (2021)*
- *90% U.S. (2019); 90% U.S. (2020)*
- *90% Texas (2019); 88% Texas (2020)*

Needs & Gaps:

- **~15,000 children** don't have *ideal health status*
- *Ideal health status rate by age group*
  - 96% in 0-5 age group
  - **85% in 6-11 age group**
  - 88% in 12-17 age group
- *Received a preventive well-child visit by age group*
  - 92% in 0-5 age group
  - **85% in 6-11 age group**
  - 87% in 12-17 age group

Local Rate 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.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson County.

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Equitable Access to Care & Basic Needs

Mental Health Status in Johnson County

2021 CHNA Survey of Caregivers with Children

7 in 10 children (ages 6-17)
have **'excellent' or 'very good' mental health**

Trends:

This rate (72%) is **consistent with** the local rate

- *73% 8-county local rate (2021)*

Needs & Gaps:

- ~**28,000 children** don't have *ideal mental health status*
- *Ideal mental health status rate* by age group
  - 76% in 6-11 age group
  - **68% in 12-17 age group**

Local Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children. (Ages 6-17) n=4.492.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children. (Ages 6-17) n= 357.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 6-17): 99,250 for Johnson County.

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Equitable Access to Care & Basic Needs

Oral Health Status of Johnson County Children

2021 CHNA Survey of Caregivers with Children

7 in 10 children (ages 1-17)
have **'excellent' or 'very good' oral health**

Trends:

This rate (71%) is **slightly lower** than the local rate and US and TX benchmarks *during the pandemic*

- *74% 8-county local rate (2021)*
- *80% U.S. (2019); 77% U.S. (2020)*
- *81% Texas (2019); 74% Texas (2020)*

Needs & Gaps:

- ~**39,000 children** don't have *ideal oral health status*
- *Ideal oral health status rate* by age group
  - 83% in 1-5 age group
  - **64% in 6-11 age group**
  - 71% in 12-17 age group
- *Received a preventive dental visit by age group*
  - **46% in 1-5 age group**
  - 70% in 6-11 age group
  - 84% in 12-17 age group

Local Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children (ages 1-17) n=5,527.
US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 1-17) n= 436.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 1-17): 134,940 for Johnson County.

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Equitable Access to Care & Basic Needs

Healthy Lifestyles in Johnson County

Nearly 6 in 10 children (ages 10-17) have **normal BMI-for-Age***

Trends:

The rate **is consistent** with local *non-urban counties* and Texas benchmarks

Needs & Gaps:

Over 25,000 children (ages 10-17) have overweight or obese BMI-for-age*

BMI-for-Age* Classifications (Children ages 10-17 years)

	Normal Weight (5th – 84th percentile)	*Underweight* (less than 5th percentile)	*Overweight* (85th – 94th percentile)	*Obese* (95th percentile or higher)
Johnson County	**57%**	**6%**	**18%**	**19%**
Local Rate (8-County Service Area)	61%	5%	16%	17%
Texas (2019 & 2020)	58%	5%	17%	20%
United States (2019 & 2020)	62%	6%	16%	16%

Local Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children. (Ages 10-17) n=3,515.
US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children. (Ages 10-17) n= 267.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 10-17): 68,120 for Johnson County.
*Note: CDC BMI-for-age calculated with parent-provided data on child height, weight, age, and gender (children ages 10-17 only).

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Equitable Access to Care & Basic Needs

Receiving Needed Healthcare in Johnson County

2021 CHNA Survey of Caregivers with Children

7 in 10 children (ages 0-17)
received all needed healthcare

Trends:

This rate (70%) is **consistent with** the local rate, though both Johnson and local rates are **much lower** than the US and TX benchmarks *from before and during the pandemic.*

- *72% 8-county local rate (2021)*
- *97% U.S. (2019); 96% U.S. (2020)*
- *95% Texas (2019); 93% Texas (2020)*

Needs & Gaps:

- **~43,700 children** did not *receive all needed healthcare*
  - Top reasons include:
    - COVID-19 pandemic
    - Insurance not sufficient to cover cost
    - Services not available in child's area
  - Forgone care by type of care:
    - **~21,000 (15%) did not receive all needed dental care**
    - ~18,000 (12%) did not receive all needed medical care
    - ~11,000 (7%) did not receive all need mental care

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.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson County.

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Equitable Access to Care & Basic Needs

Child Health Insurance in Johnson County

2021 CHNA Survey of Caregivers with Children

9 in 10 children (ages 0-17)
have **continuous health insurance coverage**

Trends:

This rate is **consistent with** the local rate and Texas benchmarks *from before and during the pandemic*

Needs & Gaps:

- **~13,300 children** don't have *continuous health insurance*

  Top reasons include:

  - Change in employer/unemployment (60%)
  - Dropped coverage because it was unaffordable (36%)
  - Problems with application or renewal process (24%)

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.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
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Equitable Access to Care & Basic Needs

Access to Basic Needs

Parents and Community Leaders

Child health and well-being is impacted by limited access to basic needs, such as nutritious food, housing, and healthcare.

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

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

– community leader interview

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

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

Equitable Access to Care & Basic Needs

Barriers to Receiving Care

Parents and Community Leaders

Some families have to drive 40+ miles to find a provider, or a provider who takes their insurance.

They may need to miss work or school to receive needed care.

Families may not seek care for fear of being reported.

"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

"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

"Some facilities don't see children and other have very specific criteria to go there. Undocumented families can't get help and are often scared to get services." – community leader interview

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Equitable Access to Care & Basic Needs

Household Income in Johnson County

2021 CHNA Survey of Caregivers with Children

Trends:

The median family income of households with children in Johnson County is **$70k.**

– US Census, 2019: ACS 5-Year Estimates

Below $75k / $75k+

Needs & Gaps:

Over **50,000 children** live in households with income ***below $75k***
Compared to children in households with income $75k or more:

- Less likely to have *ideal health status [84% vs 92%]*
- Less likely to have *ideal mental health status [67% vs 71%]*
- Less likely to have *ideal oral health status [58% vs 77%]*
- Less likely to have *continuous health insurance [83% vs 95%]*
- Less likely to have *normal BMI-for-age [46% vs 67%]*
- Less likely to have *access to nutritious foods [52% vs 92%]*
- Less likely to have *access to physical activity [60% vs 68%]*

Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson County.

H.E.L.P. for Children in Johnson 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 preventive care & treatment
- 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 Johnson 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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H.E.L.P. for Children

Safety Where Children Live, Learn, & Play

Accidental Injury in Johnson 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: 16,170

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 & teens, poison 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 supervising younger kids. Perfect storm for injury." – community leader interview

Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson 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 Johnson County

2021 CHNA Survey of Caregivers with Children ages 0-17

1 in 8 children

has two or more
Adverse Childhood Experiences (ACEs).

Estimated number of children: 17,060

Leading ACEs in Johnson County:

- Parent or guardian divorced or separated (21%)
- **Lived with anyone who had a problem with drugs, alcohol (9%)**
- **Lived with anyone who was mentally ill, suicidal, depressed (8%)**
- Parent or guardian served time in jail (6%)
- Witness violence in the home (6%)

Trends:

This rate (12%) **is slightly lower than** the local rate, and the US/TX benchmarks.

- *14% 8-county local rate (2021)*
- *15% U.S. (2019); 15% U.S. (2020)*
- *16% Texas (2019); 14% Texas (2020)*

"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." – community leader interview

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson County.

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Safety Where Children Live, Learn, & Play

Child Safety in Johnson County

2021 CHNA Survey of Caregivers with Children ages 0-17

Children in households with annual family income below $75k may have greater safety needs.

Below $75k / $75k or more

Needs & Gaps

Compared to children in with income $75k or more:

- More likely to have at least 2 ACEs [21% vs 8%]
- Less likely to feel safe in neighborhood [62% vs 80%]
- Less likely to feel child is safe at school [60% vs 75%]

"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…"
- community leader interview

Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson County.

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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 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 (3-17 year olds)
- Learning Disability (3-17 year olds)
- Mental Health (ages 6-17)
- Coping Skills, Resiliency, Self-Regulation (ages 6-17)
- Mental Health & Healthy Lifestyles (ages 6-17)

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Readiness & Support for Academic Success

School Readiness in Johnson County

2021 CHNA Survey of Caregivers with Children

76% of children (ages 3-5)
are **developmentally ready for school based caregiver's perception of growth and skills**

Trends:

Higher than the local rate (70%), the Johnson County rate of 3-5 year olds who may be developmentally ready for school **is similar** to the US (75%) benchmarks *from before the pandemic.*

Needs & Gaps:

- **~5,700 young children** may not *have school readiness*

> **"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

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019 National Survey of Children's Health.
8-county (Local) and Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 3-5) in 8-county (n= 653) and Johnson (n=55).
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates for children ages 3-5 in 8-county (204,050) and Johnson (24,430).

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Readiness & Support for Academic Success

Child Development & Learning in Johnson County

2021 CHNA Survey of Caregivers with Children

15% of children (ages 3-17)
have **a developmental delay**
Caregiver ever told by health care provider or educator
Estimated number of children: 18,500

16% of children (ages 3-17)
have **a learning disability**
Caregiver ever told by health care provider or educator
Estimated number of children: 19,700

> **"In terms of kids struggling with their emotions.. '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.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 3-17) in 8-county (n= 5,145) and Johnson (n=412).
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates for Johnson County children ages 3-17 is 123,680.

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Readiness & Support for Academic Success

Child Mental Health in Johnson County

2021 CHNA Survey of Caregivers with Children

6 in 10 children (ages 6-17)
do not **have one of the most commonly diagnosed mental health conditions**

Caregiver-report of diagnosis by healthcare provider (Anxiety, ADHD, Behavioral/Conduct Problems, Depression)

Trends:

The Johnson County rate (35%) of children ***with at least one commonly diagnosed mental health condition*** **is higher** than local rate (31%) and the US (23%) and TX (23%) benchmarks *from before the pandemic*

Needs & Gaps:

- **~35,000 children** *have diagnosis of at least one common condition*
  - *By income:* **Highest in incomes below $75k [40%]** vs $75k or more [36%]
  - *By age group:* **Highest in ages 12-17 [41%]** vs ages 6-11 [29%]
  - *By ACEs:* **Highest among children with 2-8 ACEs [68%]** vs 0 ACEs [27%]

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

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019 National Survey of Children's Health.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 6-17) n= 357.
*Response option on NSCH and CCHAPS survey listed as "ADD/ADHD"
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates for Johnson County children ages 6-17 is 99,250.

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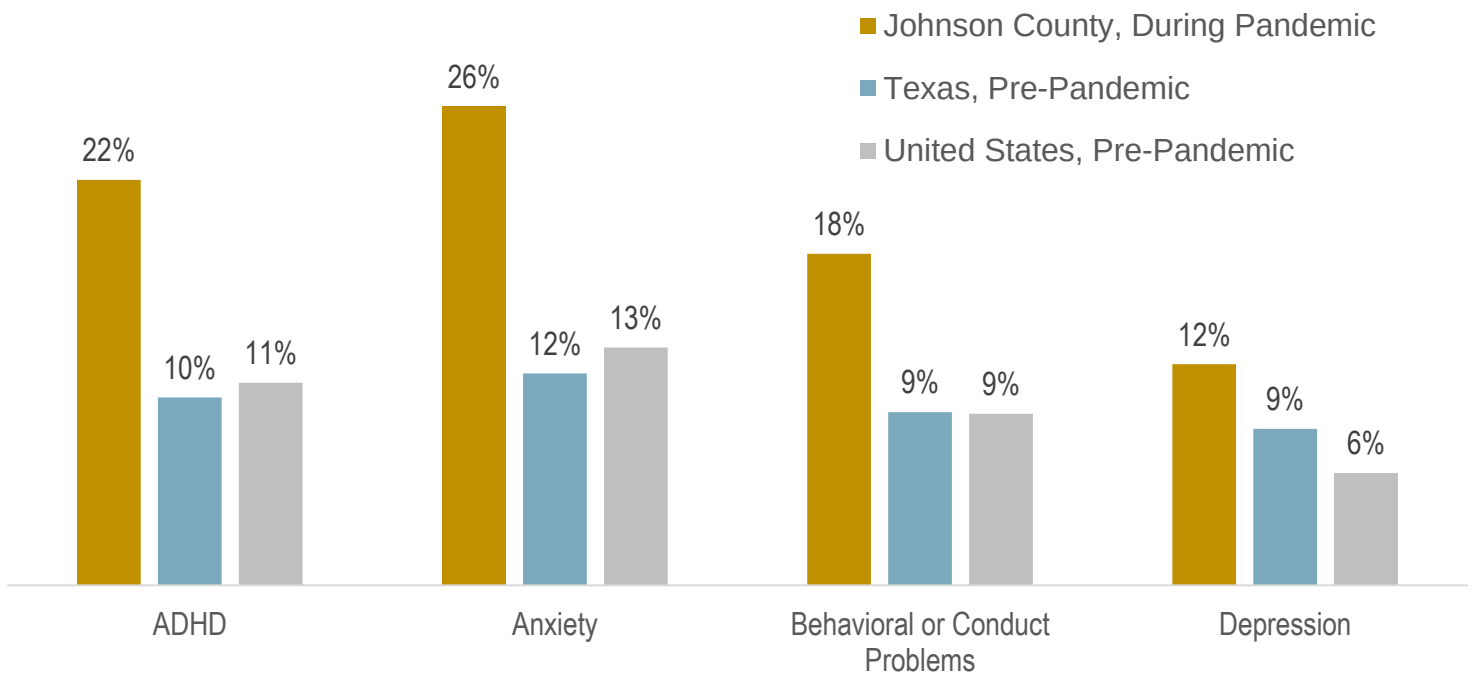
Readiness & Support for Academic Success

Child Mental Health in Johnson County

2021 CHNA Survey of Caregivers with Children

Estimated rates of school-aged children (ages 6-17) with commonly diagnosed mental health conditions <u>are higher</u> than pre-pandemic national and state estimates

- According to caregiver-reported diagnosis



US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019 National Survey of Children's Health.
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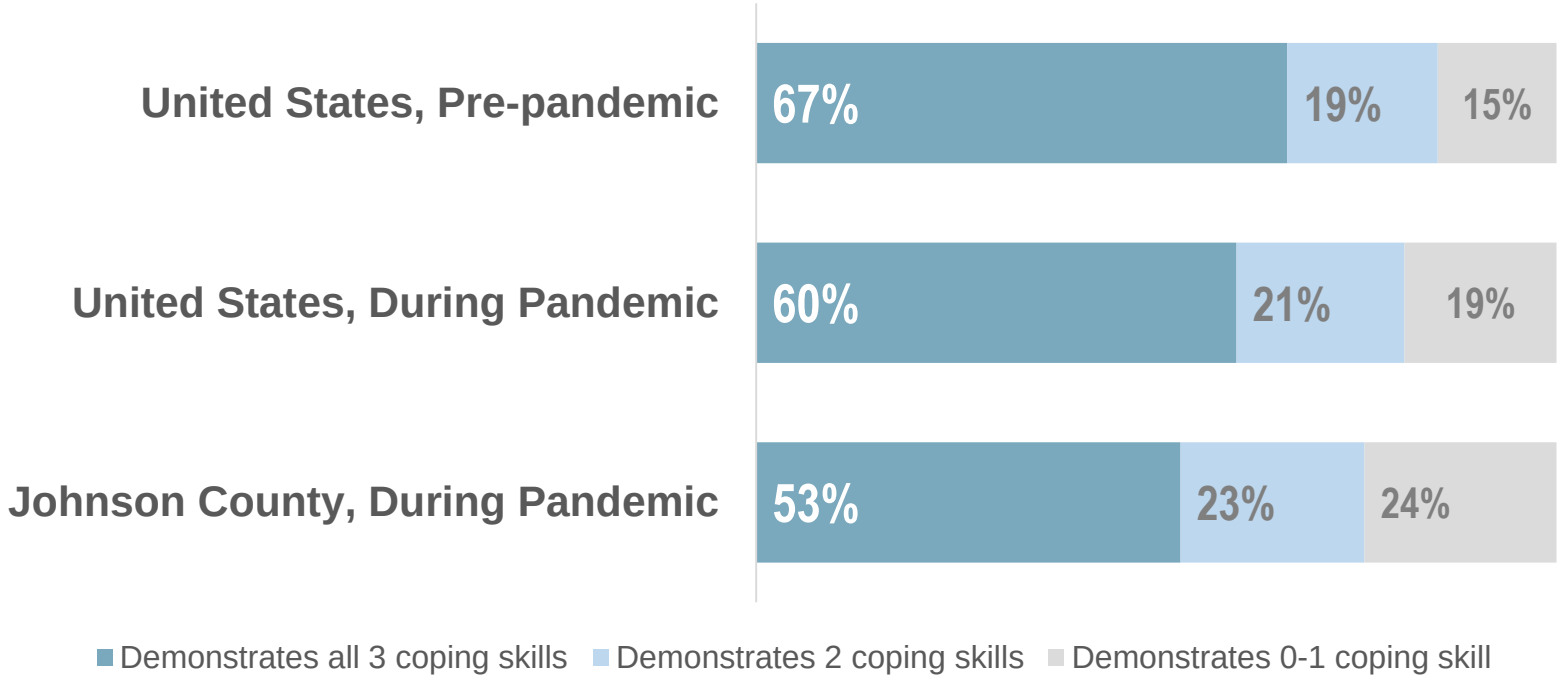
Readiness & Support for Academic Success

Resiliency & Coping in Johnson County

2021 CHNA Survey of Caregivers with Children

Most children (ages 6-17) **have 2 or more coping skills that demonstrate resiliency and self-regulation**

- According to caregiver



US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 6-17) n= 357.
*For children ages 6-17, three questions were asked of caregivers to assess coping skills that demonstrate resiliency and self-regulation.
How often does this child: 1) Show interest and curiosity in learning new things, 2) work to finish tasks he or she starts, and 3) stays calm and in control when faced with a challenge. Responses of 'always' or 'usually' question indicate the child has the identified coping skill.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates for Johnson County children ages 6-17 is 99,250.

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Readiness & Support for Academic Success

Mental Health & Healthy Lifestyle Behaviors

2021 CHNA Survey of Caregivers with Children, 8-County Service Area

School-aged children (ages 6-17) with a commonly diagnosed mental health condition are <u>less likely</u> to meet the following wellness recommendations compared to children without a diagnosed mental health condition:

- Eat fruit most days of the week [50% vs 63%]
- Eat vegetables most days of the week [49% vs 60%]
- 2 hours or less entertainment screen time every day [31% vs 42%]
- 1 hour of physical activity every day [18% vs 25%]
- 8 hours of sleep every day [77% vs 87%]
- Have a family meal on most days [73% vs 84%]

"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

Local Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children (ages 6-17) with *no diagnosis of common mental health condition* (n=2,991) and *with at least 1 diagnosis of common mental health condition* (n=1,488). Common mental health conditions are based on caregiver-report of diagnosis by healthcare provider for Anxiety, ADHD, Behavioral/Conduct Problems, and/or Depression.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 6-17): 867,640 for Collin, Grayson, Denton, Hood, Johnson, Parker, Tarrant, and Wise Counties combined.

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Community Health Needs and Equity Gaps

How do we HELP every child with their learning?

Learning

Readiness & Support for Academic Success

- Equitable access to developmental screenings and 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
- Caregiver awareness of community resources

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Parenting & Family Support

Parent Coping in Johnson County

2021 CHNA Survey of Caregivers with Children

55% of children (ages 0-17)

have a **caregiver who is coping 'very well'** with day-to-day demands of raising children

Trends:

This rate **is similar** to the local rate and **lower than the** US and TX benchmarks from *before and during the pandemic.*

- *54% 8-county local rate (2021)*
- *62% U.S. (2019); 60% U.S. (2020)*
- *66% Texas (2019); 65% Texas (2020)*

Needs & Gaps:

- **~4,500 children** have *caregiver who is 'not very well' or 'not well at all'*
- *Rate of not coping 'very well'*
  - *By child age:* 0-5 years (67%) / **6-11 years (47%)** / 12-17 years (54%)
  - *By income:* **Under $75k (53%)** / Over $75k (56%)
  - *By condition:* No mental health condition (55%) / **At least one (40%)**
  - *By ACEs:* 0 ACEs (58%) / 1 ACE (52%) / **2-8 ACEs (46%)**

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

Local Rate Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n=5,715. Based on 4-point Likert Scale with response options of very well, somewhat well, not very well, and not very well at all.
US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson County.

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Parenting & Family Support

Emotional Support in Johnson County

2021 CHNA Survey of Caregivers with Children

90% of children (ages 0-17)

have a **caregiver who has an a source of emotional support with parenting or raising children**

Most common sources are:

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

Trends:

Similar to the local rate (87%), the Johnson County rate of caregivers with emotional support is **higher** than US (75-77%) and Texas (70-72%) benchmarks from *before and during the pandemic.*

Needs & Gaps:

- **~13,800 children** have *caregiver who doesn't have emotional support with parenting or raising children*

"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 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

"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." – parent @ focus group

US and Texas Benchmarks: Child and Adolescent Health Measurement Initiative, 2019-2020 National Survey of Children's Health.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson County.

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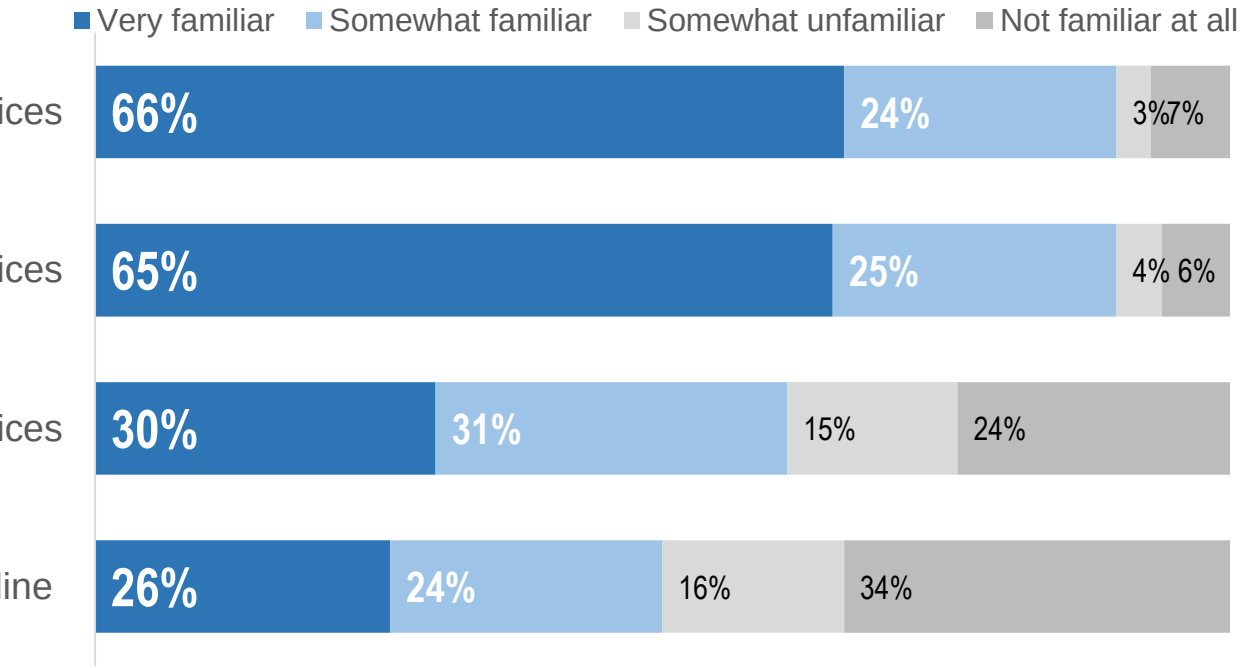
Parenting & Family Support

Awareness of Resources in Johnson County

2021 CHNA Survey of Caregivers with Children ages 0-17

Awareness of community resources for access to healthcare, mental health, basic needs, and emotional support helps families.



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Parenting & Family Support

Family Wellness in Johnson County

2021 CHNA Survey of Caregivers with Children ages 0-17

Access to physical activity, nutritious foods, and family support helps children achieve and maintain overall wellness.

2 in 3 children live in areas with nearby sidewalks, parks, or recreation centers

- Estimated number of children **with limited access to physical activity: 49,000**
- Children with overweight/obese BMI have less access (57%) compared to children with normal BMI (70%)

3 in 4 children live in households that *can always afford* to eat nutritious foods

- Estimated number of children **with limited access to nutritious food: 33,000**
- Children with overweight/obese BMI have less access (70%) compared to children with normal BMI (82%)

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

– parent @ focus group

Local Rate Benchmark: 8-county service area results from 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n=5,715.
Johnson County: 2021 CCHAPS administered to parents/caregivers of children (ages 0-17) n= 460.
Population Estimates: US CENSUS 2019, American Community Survey 5-Year Estimates (ages 0-17): 145,140 for Johnson County.

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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

> "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

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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.

Facilitated Discussion After Break

- Based on the data presentation, **what resources are available for families in Johnson County related to healthy lifestyles?**
- 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 organizations need to be at the table to improve children's health in our community?

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2021 CHNA Connection to the Community

Link to Video on YouTube

Introduction

Keely McCrady

Coalition Chair

Johnson County Alliance for Healthy Kids

Healthy Lifestyles in Johnson County

Vision

“Johnson County, a community choosing healthy habits to build healthy generations.”

Identified Community Health Need

Healthy lifestyle education for children through nutrition, physical fitness and resilience and empowering families with healthy living information through community opportunities.

Current Strategies

Facilitate community-driven healthy lifestyles in Johnson County.

Healthy Lifestyles in Johnson County

5210+

- Adapted 5210 curriculum offerings to include 15-minute lessons and virtually trained facilitators
- Created short videos highlighting key healthy lifestyle messages as another tool to support parents in the community and create awareness for JCAHK
- Added “sleep” to the 5210 curriculum and rebranded the program name to 5210+

Gardening

- Developed Microgreen curriculum with 5210 messaging
- Recognized National Gardening Month as part of the coalition’s strategic plan to increase awareness campaigns

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Healthy Lifestyles in Johnson County

Community Engagement

- Provided support to programs addressing food insecurity for kids
- Distributed over 52,000 nutrition & physical activity improvement tools & educational resources
- Distributed gratitude journals to support children's resiliency

Healthy Lifestyle Awareness Campaigns

- Provided microgreen kits and gardening resources (soil, seeds, trees, tools) for garden replants to community partners
- Coordinated a social media campaign encouraging healthy choices and distributed 5210 resources

10 Year Anniversary

2011 - 2021

Convened **400** coalition, workgroup, and stakeholder meetings

Volunteers invested **3,089** hours at a value of **$115,700**

Conducted **27** 5210 presenter coaching sessions

Provided **114** hours educating **3,932** children about 5210 & healthy lifestyles

Supported **36** school and community garden plantings

Engaged over **40** member organizations and community partners

Distributed over **52,000** nutrition/ physical activity improvement tools & educational resources

Provided resources or volunteer support for **196** Johnson County community events

"Johnson County, a community choosing healthy habits to build healthy generations."

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

Introduction

Courtney Barnard,
EdD, LMSW-AP

Director, Child Wellness

The 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

United Way of Johnson County

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Group Discussion

- Based on the data presentation, **what resources are available for families in Johnson County related to healthy lifestyles?**
- 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 organizations need to be at the table to improve children's health in our community?

Thank you!

Please share feedback about today's event.

Questions about the data or our process?

Please email: CHNAFeedback@cookchildrens.org

Contact Dora Garcia at **Dora.Garcia@cookchildrens.org** to learn more about the coalition and involvement opportunities.

Visit **www.centerforchildrenshealth.org** for more information about the coalition, available resources, and upcoming events.

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

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