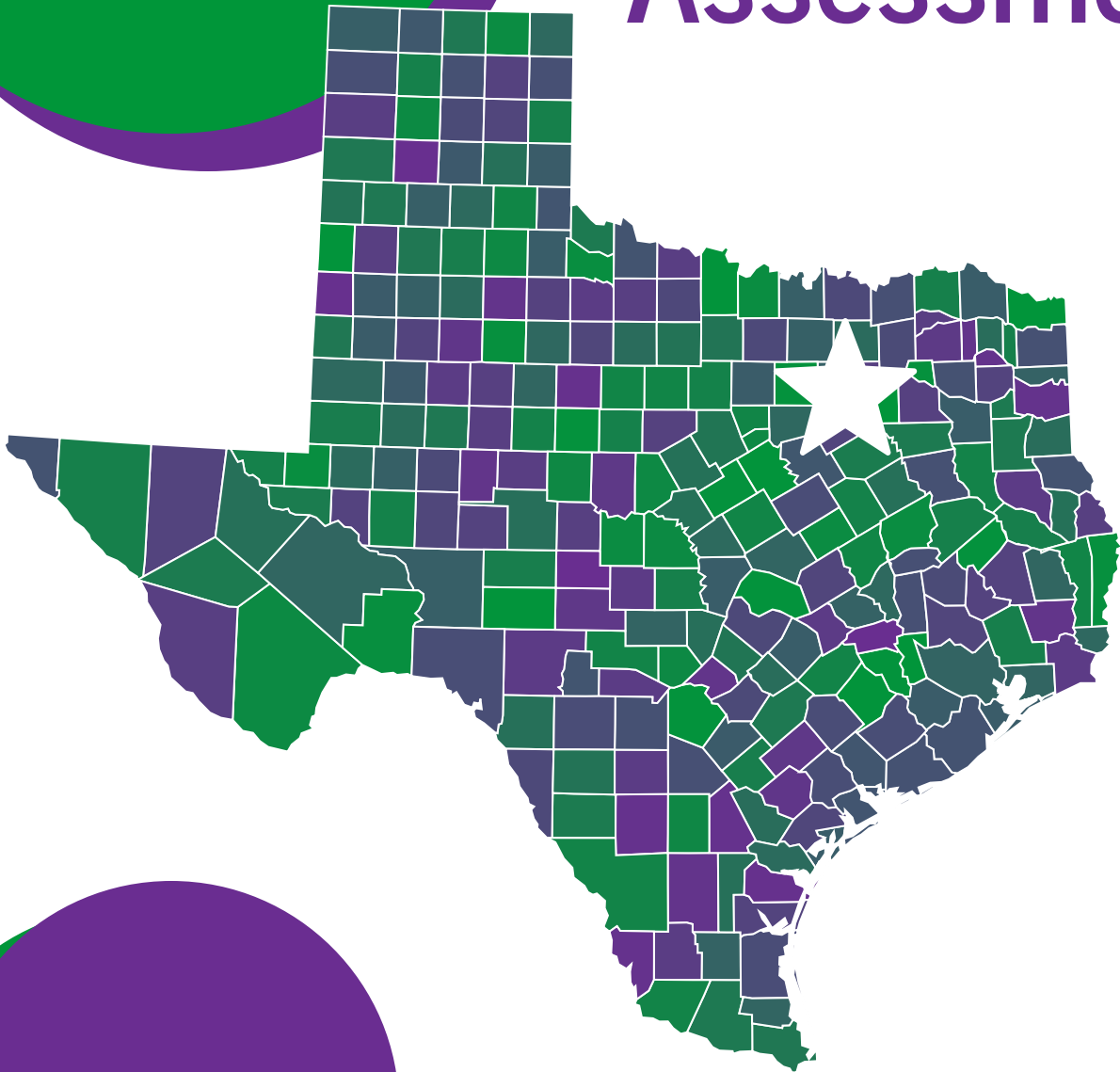


North Texas

Community Needs Assessment



2024



HEALTH SERVICES
— OF NORTH TEXAS —
Medical Care for You

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Who We Are

Health Services of North Texas (HSNT) was established in 1988 by a volunteer group providing support services for people living with HIV. In 1997, we expanded services into four surrounding counties (Collin, Rockwall, Hunt, and Kaufman) and began providing primary medical care for uninsured individuals with HIV/AIDS.

Mission:
Improving the quality of life for all North Texans through medical care, support services and advocacy

Vision:
A healthy community

In 2009, we increased the reach of our evolving mission by acquiring a full-service primary care clinic, incorporating HIV/AIDS care into the facility, and formally changing our name to Health Services of North Texas. During this time, HSNT became the healthcare safety net for the general population, particularly the uninsured and underinsured.

HSNT was federally designated as a Community Health Center (CHC) in 2012. Being a CHC strengthens our ability to provide accessible healthcare to people in need and means we meet the quality and performance standards required by the Health Resources and Services Administration. In 2021, HSNT was designated as a Patient-Centered Medical Home with a distinction in Integrated Behavioral Healthcare, which reflects the comprehensive services we provide and the important relationships between our patients and team members.

Today, HSNT operates 6 health centers in Denton and Collin Counties, providing quality primary medical care, integrated behavioral healthcare, and support services to approximately 18,000 patients annually - regardless of their ability to pay. .

Principles

Patients will be at the center of their care
Services will be offered in an **ethical** and straightforward manner
Privacy and **confidentiality** are of the utmost importance
By operating in a **sustainable** manner, HSNT will better serve our Patients and Community for many years to come
Fostering a **positive environment** benefits patients and HSNT Team Members
A **culture** of problem solving and learning enables us to better serve our Patients and Community
Each person will be embraced as an **individual** that has value and worth
Diversity, Equity, and Inclusion make us stronger

Executive Summary

Staying in tune with the evolving needs of our community enables all of us at Health Services of North Texas (HSNT) to better serve our patients and live out our mission of improving the quality of life for all North Texans through medical care, support services, and advocacy.

HSNT conducts a Community Needs Assessment every 3 years, with a focus on our greater service area of Collin, Denton, Hunt, Kaufman, and Rockwall Counties. As the population of our region continues to grow at a rapid pace, we continually evaluate available resources, health disparities, and gaps in services to effectively address the systemic challenges our neighbors face in accessing care. To evaluate needs in our area, HSNT uses multiple resources, including data compiled by other key stakeholders, census data, and direct feedback from community members.

The interconnected needs North Texans experience, including affordable housing, living wage employment, and nutritious foods, all contribute to the overall health of residents in the area. HSNT is dedicated to advocating for essential resources in our region and maintaining strong partnerships with other service providers to collaboratively and holistically address the health of our community.

Armed with the knowledge gained by conducting this Community Needs Assessment, HSNT is better equipped to address the evolving needs of our community and patients by providing accessible healthcare and support services that meet them where they are, with a deep understanding of the challenges they face on a daily basis. We will use this information to build and maintain programs that truly make a difference in the lives of our patients and community, so we can do our part in creating a healthier North Texas for all.



Doreen Rue, LMSW-AP, ACSW,
Chief Executive Officer,
Health Services of North Texas

Methodology

HSNT assessed the specific needs within the geographic areas from which at least 75% of our patients live. During the needs assessment process, HSNT used the most current data available for the service area to inform and improve upon our delivery of services.

As required, this report describes:

- How HSNT determined our community served
- Methodology: how needs were prioritized
- How data was acquired, including sources
- Existing resources within the community
- A description and evaluation of steps taken in response to the findings within our previous Community Needs Assessment (2020)

During the process of gathering relevant data to describe health trends within our primary service area of Denton and Collin Counties, HSNT gathered qualitative data from secondary sources, including community needs assessments completed by local hospitals and United Ways. HSNT also gathered primary data reported by North Texans via an anonymous survey.

The 2022 United Way of Denton County Community Needs Assessment focuses specifically on communities within the geographical borders of Denton County. The 2022 Texas Health Presbyterian Hospital Denton CHNA focuses on a larger geographic region, including Denton and Wise Counties, and the 2022 Texas Health Presbyterian Hospital Plano CHNA focuses on Collin County. The 2022 Children's Health CHNA has a broader concentration on the North Texas area, which they define as the following counties: Dallas, Collin, Cooke, Denton, Fannin, and Grayson.

Other data sources referenced in this report include the U.S. Census Bureau, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Texas Department of State Health Services, and the Texas Demographic Center. For all data sources referenced in this report, the methodology used by HSNT for identifying and prioritizing needs was similar and therefore comparable: poor performing quantitative indicators were identified when values ranked poorly compared to state and/or national benchmarks.

Needs Assessment	Prioritized Needs
Children's Health 2022	<ol style="list-style-type: none"> 1. Mental and behavioral health among children 2. Insurance coverage 3. Access to pediatric care 4. Childhood obesity 5. Children living in poverty 6. Childcare 7. Foster care 8. Child abuse and neglect 9. Reading proficiency 10. College readiness 11. Kindergarten readiness
Texas Health Presbyterian Hospital Denton and Plano 2022	<ol style="list-style-type: none"> 1. Access to healthcare 2. Quality of care 3. Behavioral health and substance abuse 4. Social determinants of health 5. Food insecurity
United Way of Denton County 2022	<ol style="list-style-type: none"> 1. Children and families 2. Asset Limited, Income Constrained, and Employed (ALICE) population 3. Housing and income 4. Health 5. Veterans
HSNT Community Needs Survey 2023	<ol style="list-style-type: none"> 1. Affordable housing 2. Living-wage employment 3. Financial assistance during emergency situations 4. Affordable childcare 5. Local access to affordable and nutritious food

Previous Plan to Meet Needs

In our previous community needs assessment, HSNT identified the following as the most pressing areas of need:

Capacity and Access
Chronic Disease Care
Care Coordination
Behavioral Health
Infant and Maternal Health

In response to these identified needs and priorities, HSNT has continued to enhance our methods of care delivery to ensure quality healthcare is available to our patients and community, regardless of their ability to pay. HSNT increased access to care by adding providers in the high need categories of Behavioral Health, Primary Care, and Pediatrics. We also expanded our telehealth options in response to COVID-19 and maintained access to virtual appointments as appropriate to increase access to services.

Additionally, HSNT identified the locations in which many of our patients reside and need services and healthcare. In 2021, HSNT transferred operations at our Plano health center to a larger, updated location and significantly expanded access to primary care for patients of all ages. We now provide comprehensive services, including pharmacy services, at our Plano health center and our location inside the Serve Denton Center. In 2021, HSNT also earned the Patient-Centered Medical Home designation, with a distinction in integrated behavioral healthcare, which reflects the comprehensive services we provide and the important relationships providers build with their patients.

As HSNT identifies the current needs in our community through the creation of the 2024 Community Needs Assessment (CNA), our strategic planning committee, in partnership with organizational leadership, will determine and implement systems and strategies to address those needs. The findings in the CNA will be incorporated into HSNT's Strategic Plan to be reviewed and approved by the Governing Board to plan for HSNT's growth and development over the next three years. The strategic planning committee will ensure that HSNT's response to the needs identified in the CNA align with HSNT's budget and scope of services, as well as our Mission, Vision, and Values.

HSNT's strategic planning committee utilized the information from the previous community needs assessment to set strategic priorities for the organization. These priorities included, but were not limited to:

- Patient Centered Medical Home
- Implementation of Primary Care in Collin County
- Adoption of Telemedicine to Increase Patient Access
- Hiring Additional Providers
- Developing Comprehensive Services at the Serve Denton Location, Including Pharmacy Services

Healthcare After the COVID-19 Public Health Emergency

According to one survey, about 1 in 5 adults reported putting off or cancelling medical treatment due to the pandemic in 2021.¹

At the beginning of the COVID-19 pandemic, many patients chose to delay healthcare treatment to reduce their risk of contracting the virus. Delaying treatment for chronic illness can result in worsening of health outcomes for patients. Although recent studies show that healthcare utilization is recovering from low levels during the pandemic, many patients and healthcare providers may still be facing challenges due to insufficient care in years prior.

The COVID-19 virus has created a new set of chronic illnesses affecting survivors, in the form of “Long COVID.” This condition refers to symptoms that arise or continue weeks, months, or years after an initial COVID-19 infection. Long COVID can present itself in the form of other chronic illnesses, such as heart disease and neurological issues. One study found that 1 in 5 adults aged 18-65 infected with COVID-19 experience persisting health conditions resulting from the virus.² Researchers and healthcare professionals are still determining the scope of Long COVID and the best ways to treat COVID-related chronic disease.

The coronavirus pandemic also led to a rapid expansion of telemedicine services in the United States. At the start of the pandemic, healthcare providers began offering some services via phone or video conference to reduce the likelihood of the virus spreading among patients visiting medical offices. As the virus continued to spread, the U.S. government took steps to increase access to telemedicine for Medicare patients. Some of the changes put in place became permanent, for example, there are no longer geographic restrictions for originating sites providing mental and behavioral health services via telehealth for Medicare recipients.³ While the ability to use telemedicine services may allow more opportunities for many Americans to get the healthcare they need, barriers to care remain. Issues such as lack of dependable internet access and low digital literacy can keep some patients from utilizing telehealth, regardless of their insurance coverage.⁴

The COVID-19 pandemic put a large strain on the U.S. healthcare system and its workers. At the beginning of the coronavirus outbreak, an already stressed system faced a rapid influx of patients, and many frontline providers became ill as well. Meanwhile, some healthcare workers employed in sectors not directly related to infectious disease treatment were furloughed or had their hours reduced. Though the number of people employed in the healthcare industry has mostly rebounded since the sharp decline in 2020, many hospitals still reported shortages two years later, especially during the Omicron spike in early 2022.⁵

Community Served

HSNT does not limit our services to individuals living within any geographic boundaries. However, for the purpose of this community needs assessment, HSNT defines our primary service community as the two counties in which 75% or more of HSNT's clients live, namely, Collin County and Denton County, Texas.

Site	Address
HSNT at Denton Medical Center 4304	4304 Mesa Dr. Denton, TX 76207 Denton County
HSNT at Denton Medical Center 4308	4308 Mesa Dr. Denton, TX 76207 Denton County
HSNT at Denton South Center	3537 S. I-35 E. Ste. 210 Denton, TX 76210 Denton County
HSNT at Serve Denton Center	306 N. Loop 288, Ste. 200 Denton, TX 76209 Denton County
HSNT Plano	5501 Independence Parkway, Ste 110 Plano, TX 75023 Collin County
Wylie Children's Medical Center	303 S. Hwy 78, Ste. 106 Wylie, TX 75098 Collin County

State Health Summary

According to the Centers for Disease Control and Prevention, the following are the leading causes of death in the state of Texas as of 2021.⁶

Texas Leading Causes of Death, 2021	Number of Deaths
Heart Disease	50,584
COVID-19	44,516
Cancer	42,552
Accidents	14,704
Stroke	11,944

In the America's Health Rankings (AHR) 2022 Annual Report, Texas ranks 38 out of 50 states in terms of overall health.⁷

Health Performance Measures in Which Texas Ranked in the Bottom 20% Compared to Other States, 2022 (AHR)

Measure	Texas Rank (out of 51)
Public Health Funding (dollars per person)	48
Economic Hardship Index	41
Food Insecurity (% of households)	45
Air Pollution	44
Risk-screening Environmental Indicator Score (unitless score)	50
Severe Housing Problems (% of occupied housing units)	40
Individuals who Avoided Care Due to Cost (% ages 18+)	49
Mental Health Providers per 100,000 Population	49
Primary Care providers per 100,000 population	47
Uninsured (% of population)	50
Colorectal Cancer Screening	47
Dental Visits (% ages 18+)	48
Childhood Immunizations (% by age 24 months)	46
Flu Vaccination (% ages 18+)	44
HPV Vaccination (% ages 13-17)	47
Dedicated Health Care Provider (% ages 18+)	48
Teen Births (births per 1,000 females ages 15-19)	42

The 2023-2028 Texas State Health Plan lists the following as focus areas for improving the health of Texans in the next five years: ⁸

- Access to Care
- Rural Health
- Mental Health and Behavioral Health Workforce
- Teleservices and Technology

Local Health Summary

Healthy North Texas provides the following data on the unique health needs in the service area, including the most significant causes of morbidity and mortality.⁹

Measure	Denton County	Collin County	U.S.
Adults who have had a routine checkup	71.4%	72.6%	74.7%
Adults aged 20+ with diabetes	9%	9%	9%
Age-adjusted death rate due to diabetes	15.5 deaths/ 100,000 population	10.9 deaths/ 100,000 population	22.6 deaths/ 100,000 population
High blood pressure prevalence	29.0%	31.3%	32.6%
Hypertensive adults taking medication for their high blood pressure	70%	72%	76%
Adults who experienced a stroke	2.2%	2.2%	3.2%
Age-adjusted death rate due to cerebrovascular disease (stroke)	38.3 deaths/ 100,000 population	34.3 deaths/ 100,000 population	37.6 deaths/ 100,000 population
Adults who experienced Coronary Heart Disease	4.8%	4.8%	6.4%
Age-adjusted death rate due to coronary heart disease	61.2 deaths/ 100,000 population	65.6 deaths/ 100,000 population	90.2 deaths/ 100,000 population
High cholesterol prevalence	31.9%	33.8%	33.6%
Adults with cancer	5.4%	5.4%	6.5%
Age-adjusted death rate due to cancer	123.5 deaths/ 100,000 population	118.9 deaths/ 100,000 population	149.4 deaths/ 100,000 population
Breast cancer rate	130.0 cases/ 100,000 women	131.0 cases/ 100,000 women	128.1 cases/ 100,000 women
Age-adjusted death rate due to breast cancer	18.0 deaths/ 100,000 women	15.8 deaths/ 100,000 women	19.6 deaths/ 100,000 women
Colon cancer screening rate	60.6%	65.4%	66.4%
Colorectal cancer rate	30.8 cases/ 100,000 population	31.4 cases/ 100,000 population	37.7 cases/ 100,000 population
Age-adjusted death rate due to colorectal cancer	10.5 deaths/ 100,000 population	10.7 deaths/ 100,000 population	13.1 deaths/ 100,000 population
Cervical cancer screening rate	81.0%	81.5%	82.8%
Cervical cancer rate	5.9 cases/ 100,000 women	4.5 cases/ 100,000 women	7.7 cases/ 100,000 women

Population Change and Projections

According to The North Central Texas Council of Governments (NCTOG), as of January 1, 2023, Denton County has likely surpassed the 1 million milestone in number of residents with a population of 1,006,492. Some of the cities with the highest amount of growth since 2022 include Haslet (31%), Argyle (20.3%), and Northlake (18.7%).

Meanwhile, the estimated population of Collin County at the beginning of 2023 was listed by the NCTCOG as 1,175,974. Smaller, more rural cities such as Anna (14.2%), Josephine (10%), Lavon (26.1%), Melissa (12.9%), and Princeton (23.7%) showed high levels of growth. The city of Celina, which extends across the Denton-Collin County line, recorded a population growth rate of 38.8%.¹⁰

As the population of HSNT's service area increases, the number of low-income and uninsured individuals within the service area will increase as well. The growing number of underserved individuals in the service area has increased the need for accessible healthcare in the area. As of 2023, Denton and Collin counties rank 8th and 10th in the U.S., respectively, in terms of population growth. Since 2010, Denton County's population has increased by 47.83%, while Collin County's population has increased by 46.88%.¹¹ Denton and Collin counties rank 6th and 4th, respectively, of Texas counties in terms of expected population growth between 2010 and 2050.¹²

County	2010 Population	2023 Population (Estimated)	2050 Projected Population	Numeric Change (2010 to 2050)	Percent Change (2010 to 2050)
Collin	782,341	1,175,974	1,794,493	1,012,152	129.37%
Denton	662,614	1,006,492	1,495,119	832,505	125.64%

Table data sources: Lloyd B Potter and Nazrul Hoque, "Texas Population Projections 2010 to 2050," Demographics.Texas.gov, November 2014, https://demographics.texas.gov/Resources/Publications/2014/2014-11_ProjectionBrief.pdf. AND "2023 Population Estimates," North Central Texas Council of Governments, accessed September 28, 2023, <https://data-nctcogis.opendata.arcgis.com/documents/NCTCOGGIS:2023-nctcog-population-estimates-publication/explore>

Denton and Collin County Demographics

Between 2010 and 2021, the white non-Hispanic percentage of the population in Denton County decreased from 64.5% to 55.6%. During that same period, the Asian non-Hispanic population increased the most of all racial groups, from 6.7% to 10.3%.¹³ A similar trend was recorded in Collin County, where the white population decreased by about 10 percentage points, and the Asian population increased by 6 percentage points. The Hispanic/Latino, Black, and Multiracial populations all increased by 0.5-3 percentage points in both counties during the same 11-year period.¹⁴

Not only are Denton and Collin Counties growing in population, but they are also becoming more diverse.

Racial and Ethnic Composition of Denton and Collin Counties, 2010 to 2021

Race/Ethnicity	Denton County 2010	Denton County 2021	Collin County 2010	Collin County 2021
White (non-Hispanic)	64.5%	55.6%	63.1%	52.8%
Hispanic/Latino	18.3%	20%	14.7%	15.8%
Black (non-Hispanic)	8.2%	11.3%	8.4%	11.1%
Asian (non-Hispanic)	6.7%	10.3%	11.4%	17.4%
Multi-Racial (non-Hispanic)	1.8%	2.3%	1.9%	2.5%
American Indian or Alaska Native (non-Hispanic)	0.5%	0.4%	0.4%	0.4%
Native Hawaiian/Other Pacific Islander (non-Hispanic)	0.1%	0.1%	0.1%	0.1%
White (non-Hispanic)	64.5%	55.6%	63.1%	52.8%

Table data sources: "Our Changing Population: Denton County, Texas," USAFacts, accessed October 30, 2023, <https://usafacts.org/data/topics/people-society/population-and-demographics/our-changing-population/state/texas/county/denton-county/>. AND "Our Changing Population: Collin County, Texas," USAFacts, accessed October 30, 2023, <https://usafacts.org/data/topics/people-society/population-and-demographics/our-changing-population/state/texas/county/collin-county/?endDate=2021-01-01&startDate=2010-01-01>.

With any diverse population comes the potential for health disparities among different groups. Just as each individual person has unique health needs, different demographic groups face unique challenges to health and access to healthcare treatment. In the United States as a whole, health disparities contribute to higher levels of disease and lower life expectancy among racial and ethnic minority groups.¹⁵

Barriers to Care

Unmet Need Scores

The Health Resources and Services Administration uses Unmet Need Scores to evaluate the need for new health center program investments. Factors that contribute to Unmet Needs Scores include the percentage of residents below 200% of the federal poverty level, health center penetration, percentage of residents who are uninsured, and percentiles for various health rankings including diabetes and asthma.

The 10 zip codes in HSNT's service area with the highest Unmet Needs Scores are listed to the right.¹⁶

Zip Code	City Area	Unmet Need Score
75057	Lewisville	71.46
76201	Denton	70.79
75074	Plano	66.14
75069	McKinney	65.70
76205	Denton	63.81
75067	Lewisville	61.29
76209	Denton	58.42
76258	Pilot Point	53.92
75065	Lake Dallas	49.08
75075	Plano	48.02

Zip Code	City Area	Percent Living in Poverty	Percent Low-income
76201	Denton	30.4%	53.56%
76205	Denton	19.1%	37.63%
76209	Denton	18.7%	36.87%
75069	McKinney	16.0%	35.70%
75057	Lewisville	14.0%	36.40%
76258	Pilot Point	12.7%	25.35%
75074	Plano	11.4%	33.79%
75067	Lewisville	9.1%	27.99%
76207	Denton	8.6%	27.49%
75075	Plano	8.2%	19.98%

Income


Living in poverty or earning a limited income creates multiple barriers to care. According to 2021 census estimates, 17% of residents in Denton and Collin Counties are considered low-income, earning up to \$29,160 per year for an individual. Further, approximately 7% of people in Denton and Collin Counties are living in poverty (earning up to \$14,580 per year for an individual).¹⁷ People with limited income are less likely to receive health insurance through their jobs and may not qualify for Medicaid because Texas did not expand the qualifications for this public insurance program.

The 10 zip codes in the service area with the highest percentage of residents who are living in poverty are listed to the left.¹⁸

Occupation/Unemployment

According to 2021 census estimates, 14.1% of residents in the service area who are over 16 work in service occupations, 9.6% work in production, transportation, and material moving occupations, and 6.7% work in natural resources, construction, and maintenance. Other categories of employment include management and sales/office.

According to YCharts, the unemployment rate for Denton and Collin Counties is 3.7% and 3.5% respectively, as of April 2023.¹⁹ Unemployment and income level are directly correlated with the use of preventative healthcare services. Unemployed individuals do not have access to employer-sponsored health insurance, and their lack of income often prevents them from being able to afford insurance through other means (i.e. federal insurance marketplace, privately purchased insurance, etc.).



Approximately 12% of residents age 5 and older in Denton and Collin Counties speak Spanish.

Limited English Proficiency

People with limited English proficiency often experience challenges accessing needed services. According to 2022 census estimates, approximately 30% of the population age 5 and older in Collin County and 24% in Denton County households speak a language other than English at home. Approximately 12% of residents age 5 and older in these counties speak Spanish. Approximately 3.7% of total Collin County households and 3.5% of Denton County households report that they are not proficient in English.²⁰

Transportation

According to 2021 census estimates, there are over 9,600 households in HSNT's service area that do not own a car (3%). Residents of Denton and Collin Counties who do not own their own vehicle face significant transportation barriers to healthcare services. According to the Denton County Transportation Authority (DCTA), 73.6% of individuals in Denton accessing bus services are considered low-income. Although the city of Plano has limited service by Dallas Area Rapid Transit (DART), Collin County has very few public transportation options.

The 2022 Access North Texas Plan identifies a need to enhance transportation options and expand services where gaps exist. Public transportation is complemented by a small number of private carriers and nonprofit transportation services, but these limited services are not available to the general public. Improved communication concerning transportation options is needed, particularly within the limited English proficiency population.

The 2022 Access North Texas Plan identifies Dallas Area Rapid Transit (DART) and Denton County Transportation Authority (DCTA) and transportation resources in Collin County but notes that the network of services is complex and disconnected so residents often need assistance in navigating it. My Ride North Texas is a regional mobility management program that coordinates these disjointed transportation services, but residents report that the available services are restrictive in terms of eligibility, hours of operation, and destinations. The high rate of population growth in the county will exacerbate transportation challenges in the future.

In Denton County, the 2022 Access North Texas Plan identifies DCTA and Span Inc. as transportation resources. DCTA has shifted to offering fewer fixed-route bus services and focusing more on an on-demand rideshare service called GoZone. Residents have noted concerns with the affordability, reliability, and sustainability of the on-demand model, as well as the reliance on smart-phone technology to utilize the GoZone service. These challenges create barriers to transportation services for seniors and low-income populations. Survey respondents who reported transportation barriers noted that they are primarily missing work and medical trips.

Internet Access

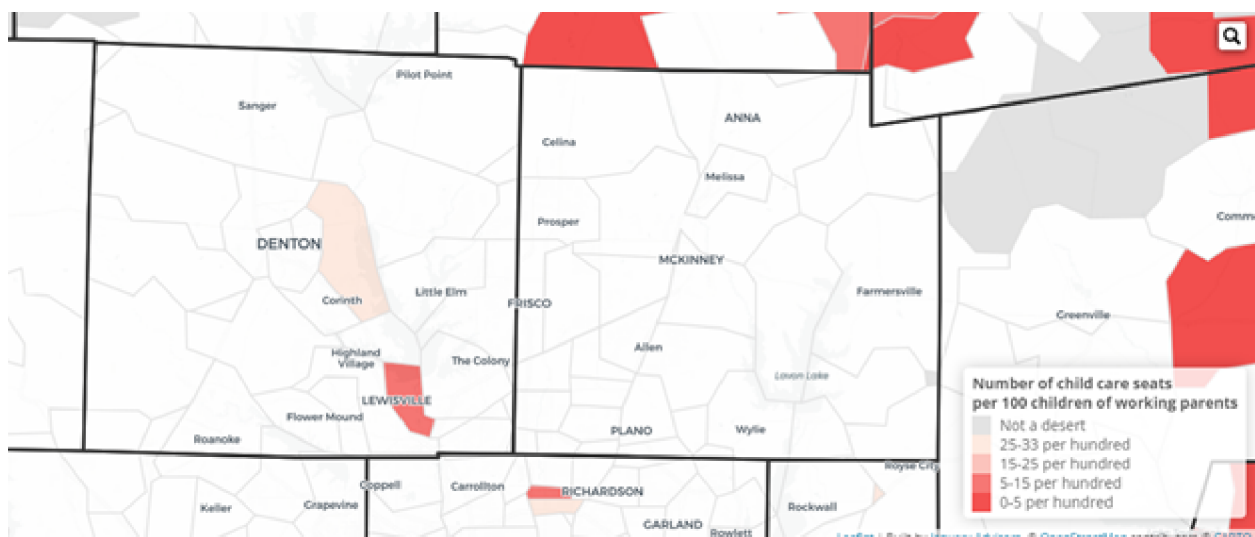
The COVID-19 pandemic has highlighted the importance of reliable internet access as an essential service. However, Healthy North Texas reports that 4.9% of Collin County households and 5.6% of Denton County households do not have a broadband internet subscription, which creates challenges in accessing safety net support services, job applications, remote school or work, and telehealth visits.²¹

Childcare

Accessible childcare is directly related to a person's ability to work and provide for their family. The average cost of childcare in Denton County is \$617 per month, or \$7,404 annually, which represents a large expense that low-income families often cannot afford. Further, from March 2020 to September 2021, childcare capacity in Denton County dropped 24.5%. In September of 2021 the 76208, 76209, 76258, and 75057 Denton County zip codes (covering Denton, Corinth, Lewisville, Shady Shores, and Pilot Point) qualified as "childcare deserts."²² A childcare desert is defined as an area where the number of children younger than six years of age who have working parents is at least three times greater than the capacity of licensed childcare providers in that area.

While Collin County does not contain any recognized childcare deserts, affordability of childcare often presents a barrier for low-income families. The average cost of childcare in Collin County is \$775 per month, or \$9,300 annually. Without affordable childcare, families are unable to meet their earning potential, which consequentially decreases their access to other basic needs.

Childcare Desert Map



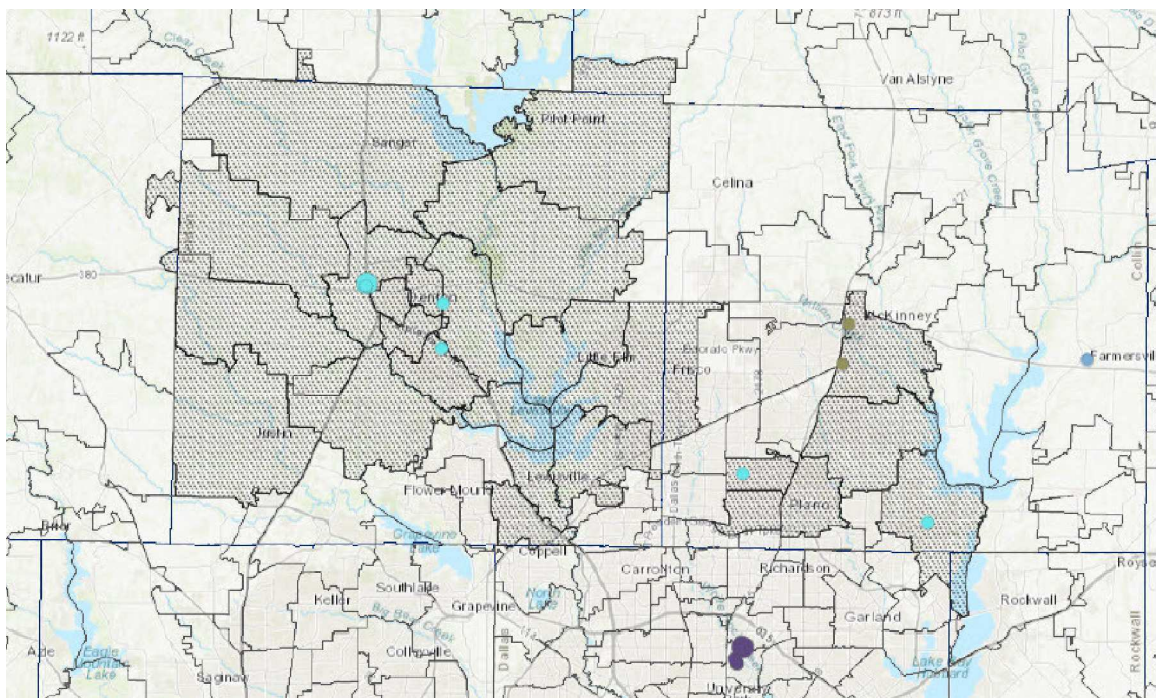
Graphic source: "Child Care Desert Dashboard," Children at Risk, accessed October 30, 2023, <https://www.childrenatrisk.org/childcaredesertmap/>.

Healthcare Provider Shortage

Health Provider Shortage Areas

Denton and Collin Counties both suffer from a shortage of providers available for the size of the population. According to the Health Resources and Services Administration, Denton County is designated as a Health Professional Shortage Area (HPSA) in the categories of primary care, mental health, and dental health. Collin County is designated as an HPSA in the field of mental health. A lack of sufficient healthcare providers in any of these disciplines (i.e. primary care, mental health, and dental health) creates barriers to care for the general population, but especially for people with additional compounding difficulties accessing services. Denton County is also designated as a Medically Underserved Area/Population.

As expected in Health Professional Shortage Areas, low-income residents in Denton and Collin Counties have limited options for affordable health services. HSNT is the only FQHC in Denton County. In Collin County, the closest FQHC is in the City of McKinney, approximately 15 miles (23 minutes) away from the nearest HSNT health center (located in Plano). Neither Denton County nor Collin County have a hospital district or public hospital. Local hospitals, public health departments, and publicly funded clinics are the staples of the healthcare system.



● HSNT health center service delivery site ● Other health center service delivery site

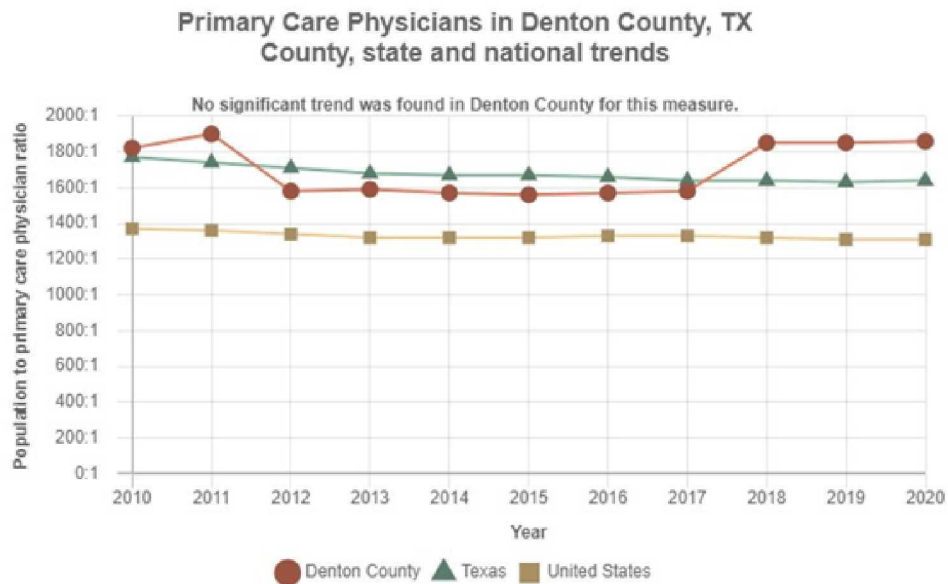
Graphic source: "UDS Mapper," American Academy of Family Physicians, <https://udsmapper.org/>

Both Denton and Collin Counties maintain an Indigent Care Program, but the eligibility requirements present a barrier to care for a substantial portion of HSNT's target population. Denton County's Indigent Health Care Fund is typically accessed for critical hospital care. Eligibility for this fund requires an individual's monthly net income not exceed 21% of the federal poverty level (FPL), which is only \$255.15 per month for an individual or \$525 per month for a family of 4. Collin County's Indigent Health Program also provides health services to qualifying residents. To qualify, an individual's income must be at or below 100% of FPL (\$14,580 per year for an individual or \$30,000 per year for a family of 4).

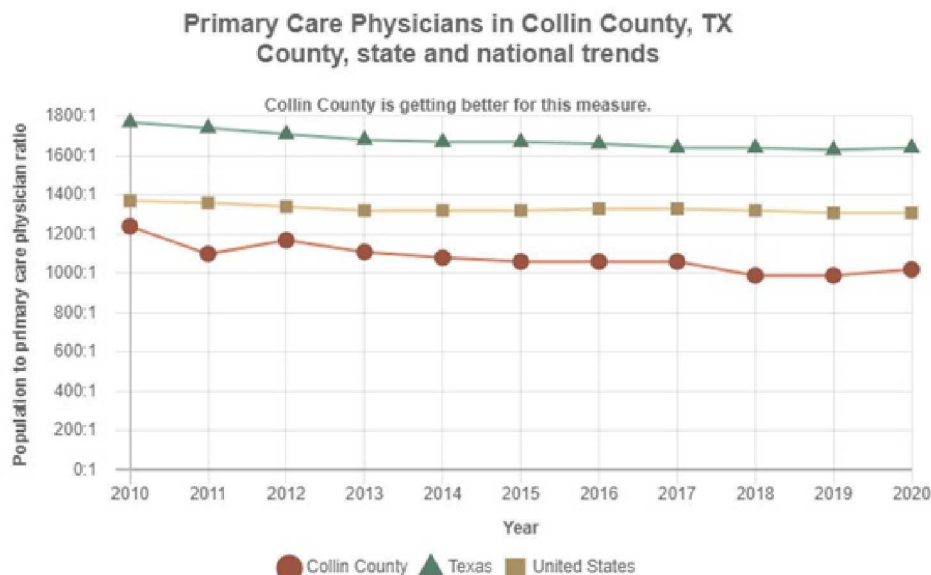
Primary Health Care Provider Shortage

Texas ranks 41st among the 50 states in its ratio of active physicians per 100,000 population. There is a current shortage of physicians in Texas, and this shortage will continue to increase through 2032. Projections for medical education enrollment indicate that the state's medical education system will not create a supply of physicians that will meet the projected demand.²³

Denton and Collin Counties have ratios of residents to primary healthcare physicians of 1,860.0:1 and 1,020:1, respectively, compared to Texas overall which has a ratio of 1,640 residents for every 1 primary healthcare physician or the U.S. as a whole which has a ratio of 1,310 residents for every primary healthcare physician.²⁴



Graphic source: "Primary Care Physicians," County Health Rankings, 2023, <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/clinical-care/access-to-care/primary-care-physicians?year=2023>.

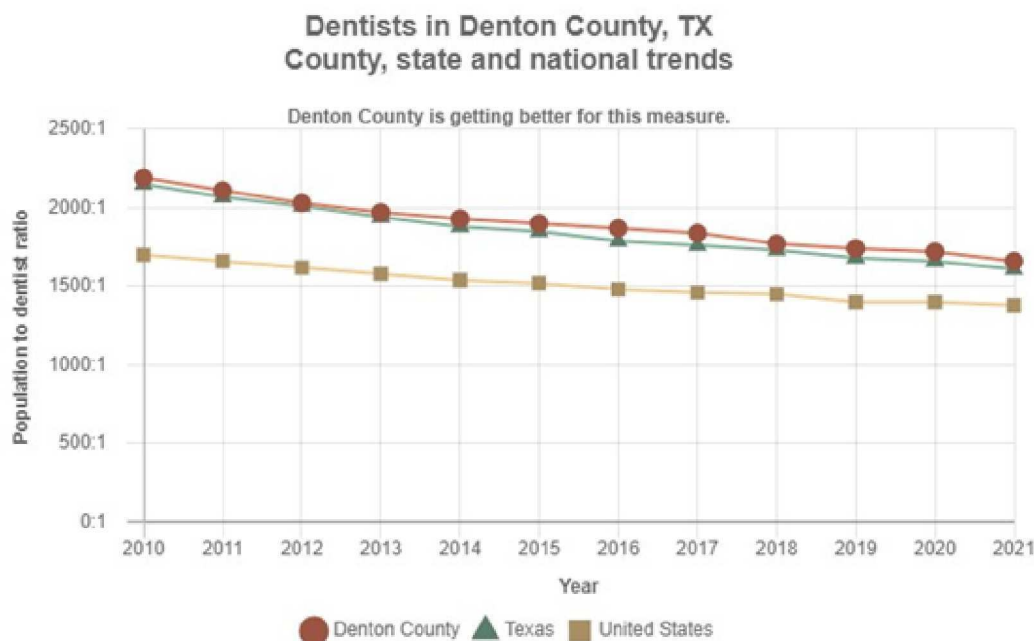


Graphic source: "Primary Care Physicians," County Health Rankings, 2023, <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/clinical-care/access-to-care/primary-care-physicians?year=2023>.

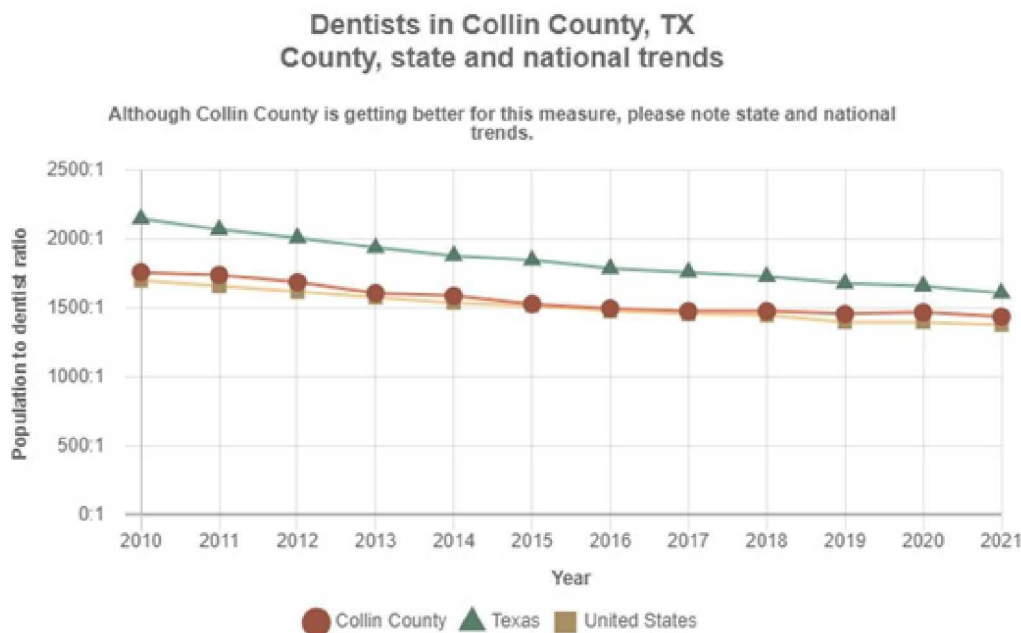
The ratio of other primary care providers is another important measure of access to care. Texas overall has a ratio of 970 residents for every 1 other primary care provider, while Denton County has a ratio of 1,270:1 and Collin County has a ratio of 1,130:1.²⁵ Therefore, these two counties have fewer other primary care providers per capita compared to the statewide ratio.

Dental Health Provider Shortage

With a 1,440:1 ratio of residents to dentists in Collin County and a ratio of 1,660:1 in Denton County, both counties have fewer dentists per capita than the U.S. overall, which has a ratio of 1,380:1.²⁶ Poor oral health has been linked to an increased risk of cardiovascular and respiratory diseases, so accessible dental care is a key factor in improving overall health.²⁷



Graphic source: "Dentists," County Health Rankings, 2023, <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/clinical-care/access-to-care/dentists?year=2023&county=48121>



Graphic source: "Dentists," County Health Rankings, 2023, <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/clinical-care/access-to-care/dentists?year=2023&county=48121>

Health Center Penetration

Although HSNT is the only Community Health Center (CHC), or Federally Qualified Health Center, in Denton County, other CHCs are present in Collin County. However, CHCs are only serving a small percentage of the uninsured and low-income populations in these areas, as well as the population using Medicaid or public health insurance.

Key CHC penetration rates for the 10 zip codes in the service area with the highest Unmet Needs Scores are listed below.

Zip Code	City Area	Health Center Penetration of Low-Income Population	Health Center Penetration of Uninsured Population	Health Center Penetration of Population using Medicaid/public health insurance
75057	Lewisville	3.05%	2.73%	2.56%
76201	Denton	7.25%	7.69%	17.83%
75074	Plano	5.58%	3.54%	8.02%
75069	McKinney	12.12%	12.19%	11.46%
76205	Denton	11.31%	8.57%	13.35%
75067	Lewisville	2.77%	2.69%	1.99%
76209	Denton	17.11%	14.25%	25.47%
76258	Pilot Point	12.94%	6.88%	10.17%
75065	Lake Dallas	7.89%	4.53%	8.81%
75075	Plano	2.71%	2.06%	4.43%

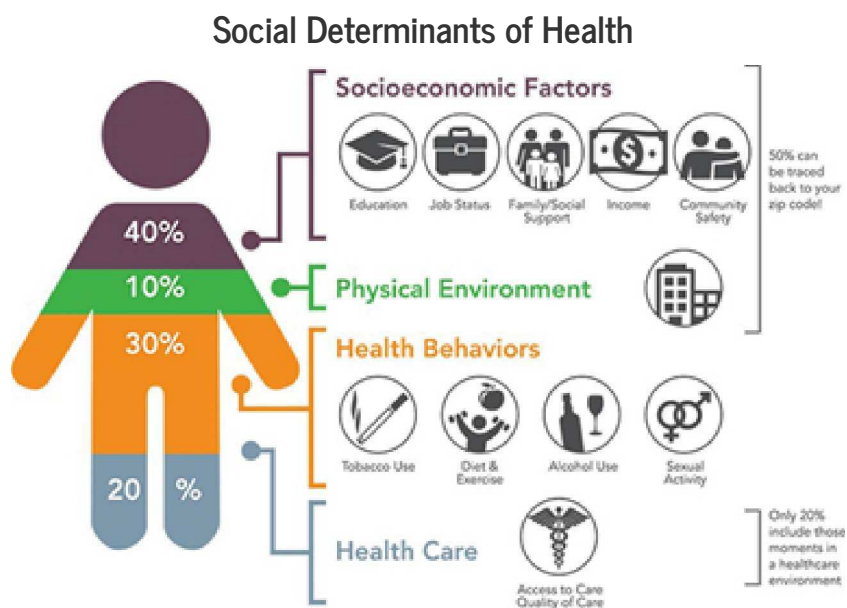
Table data source: "UDS Mapper," American Academy of Family Physicians, <https://udsmapper.org/>

Social Determinants of Health

The U.S. Department of Health and Human Services Healthy People 2030 initiative defines social determinants of health as “the 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”.²⁸ The social determinants of health are further broken down into five domains:

Economic Stability
Education Access and Quality
Health Care Access and Quality
Neighborhood and Built Environment
Social and Community Context

Additionally, estimates indicate that an individual’s overall health is only 20% dependent on their access to quality healthcare.²⁹ Other factors have a decided impact on overall health, including health behaviors, physical environment, and socioeconomic factors. Therefore, understanding social determinants of health is critical to improving health outcomes and promoting health equity.



Graphic source: "Defining Health Equity." National Association of Chronic Disease Directors. October 21, 2023.
<https://coveragetoolkit.org/health-equity-and-the-national-dpp/defining-health-equity/>

Economic Stability

The impacts of economic stability on a person’s health are more than simply being able to afford medical care. Those without stable or adequate income will have difficulty accessing many basic needs, including healthy foods and safe housing, both of which are major contributors to a person’s health.

As of 2022, 11.5% of Americans live in poverty. This is the equivalent of 37.9 million people.³⁰ Hispanic, Black and Native American populations are disproportionately impacted by poverty. Additionally, women are more likely to experience poverty – 12.5% of women live in poverty compared to 10.5% of men. This is even more dramatically represented in female led households with a 24.7% rate, nearly double the national average.

Locally, poverty rates are lower than the national average with Denton County at 7.4% and Collin County at 6.6%.³¹ While the rates are lower than the national average, this results in approximately 148,700 people living in poverty across both counties.

Education Access and Quality

Those with higher levels of education are more likely to be healthier and live longer. This is due to the access to higher paying, more stable jobs that education can provide. Without access to quality education, many children are unduly impacted in their later years with inability to access healthcare, stable housing, and many other services that will impact their health throughout their lifetime.

Nationally, 88.9% of Americans over the age of 25 have a high school diploma with 33.7% also earning a bachelor's degree or higher. Locally, these numbers are higher with over 93% graduating high school and approximately 50% with a bachelor's degree or higher across Collin and Denton Counties. These rates are relatively high compared to Dallas County, Tarrant County, and Texas overall.³²

Residents Age 25 and Older Who Graduated High School

Collin County	93.9%
Denton County	93.3%
Dallas County	80.7%
Tarrant County	86.7%

Neighborhood and Built Environment

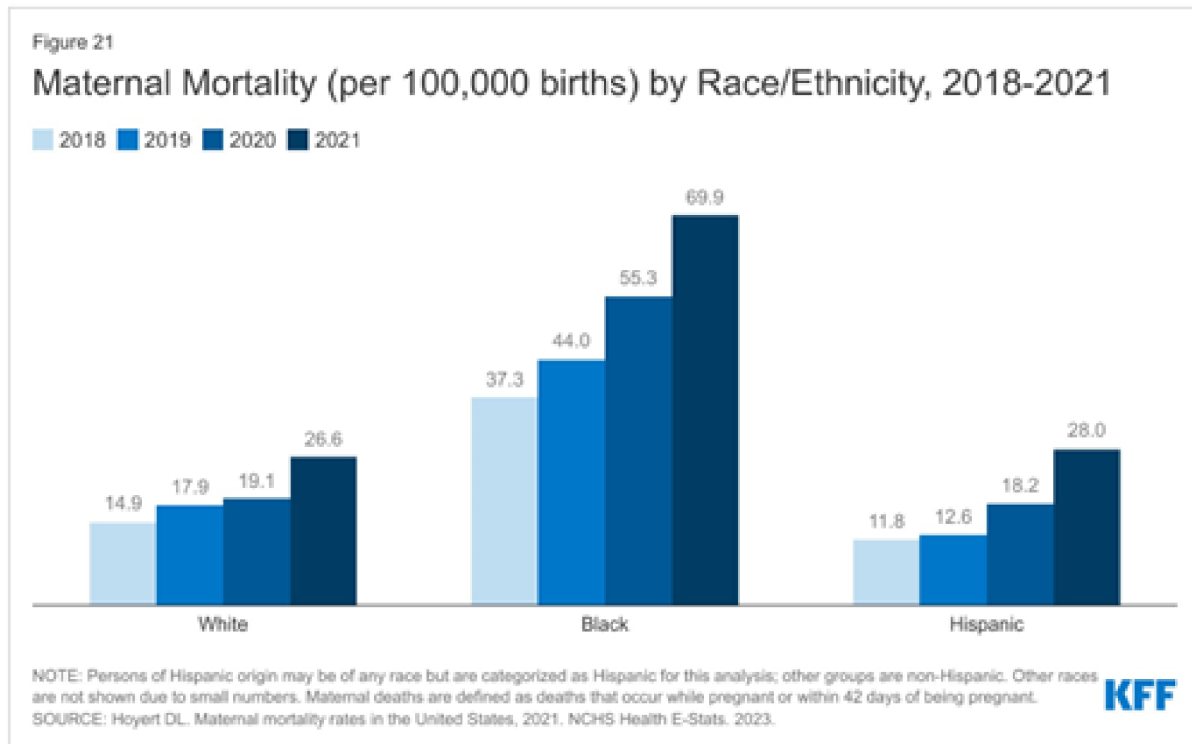
Where a person lives can impact their health in several ways. According to Healthy People 2030:

"Many people in the United States live in neighborhoods with high rates of violence, unsafe air or water, and other health and safety risks. Racial/ethnic minorities and people with low incomes are more likely to live in places with these risks. In addition, some people are exposed to things at work that can harm their health, like secondhand smoke or loud noises."³³

The geography of Denton and Collin Counties also contributes to increased rates of asthma due to high levels of ozone pollution. In November of 2020, the Dallas-Fort Worth metropolitan area did not meet federal standards for ozone pollution.³⁴ Emergency departments experience increased utilization following days with increased ozone levels, and children are at the highest risk of experiencing heightened asthma symptoms because of ozone.³⁵

Social and Community Context

Social and Community Context includes the environment in which a person lives and works and the relationships we have with the people in that environment. This includes many factors that are beyond a person's control including safety, discrimination, and access to essential needs and services. Many of the racial disparities we see in healthcare can be attributed to these issues. We can see this impact when looking at specific health measures. For example, as shown in the graphic below, maternal mortality rates have increased overall since 2018, however Black and Hispanic women are more likely to die than their white counterparts.



Graphic source: "Key Data on Health and Health Care by Race and Ethnicity." Kaiser Family Foundation. March 15, 2023. <https://www.kff.org/racial-equity-and-health-policy/report/key-data-on-health-and-health-care-by-race-and-ethnicity/>

Similar trends can be seen in other areas including diabetes, heart disease, and HIV diagnosis.

In order to see the full picture of an individual's health, we cannot look solely at their medical data, the whole person must be considered. The social determinants of health allow providers to fully assess the needs of their patient and the potential risks and challenges they may face to better provide them with quality care.

Housing Instability

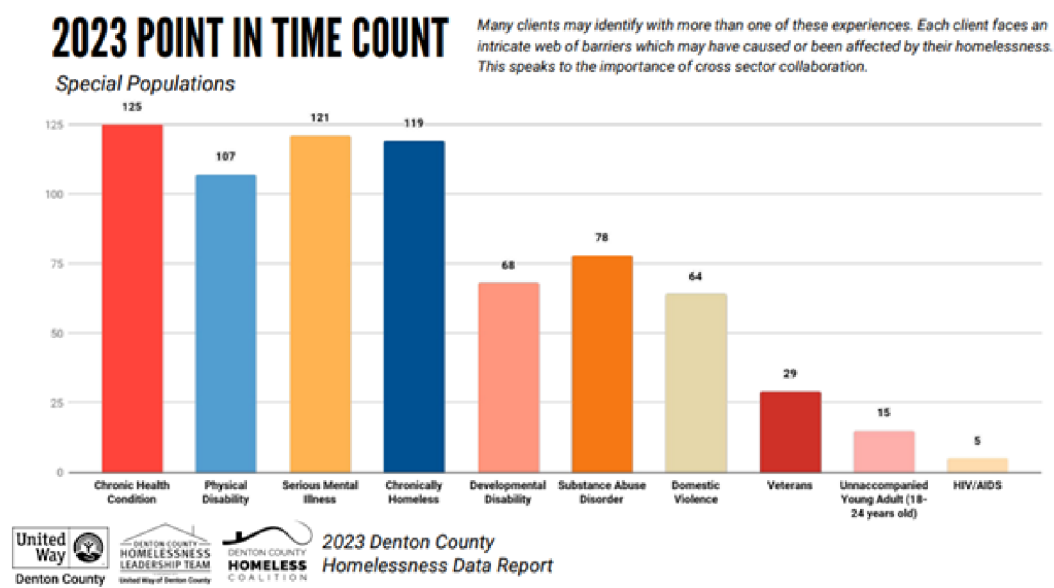
The recent housing crisis has impacted many people's access to safe, adequate housing, in particular those considered low-income. Households with extremely low incomes tend to spend more than 50% of their income on housing.³⁶ Additionally, the U.S. faces a shortage of homes that are affordable and available to low-income families. Since 2019, this shortage has increased from 6.8 million units to 7.3 million units.³⁷

According to the Low-Income Housing Coalition, there is no state or county where a renter working full time at minimum wage can afford a two-bedroom apartment.³⁸ In Texas an individual working minimum wage would need to work 116 hours per week to afford a one-bedroom rental home.³⁹

Housing is an important social determinant of health, as the challenges of being unhoused expand beyond the need for shelter. A lack of stable housing is correlated with poorer health outcomes and a higher prevalence of chronic disease. Additionally, unhoused individuals are at a greater risk of safety concerns, mental health challenges, domestic violence, and sexual abuse.⁴⁰

In January of 2023 there were 431 unhoused individuals in Denton County, according to the Point-In-Time Count performed by the United Way.⁴¹ This represents a 4% decrease compared to 2022, but a 122% increase compared to pre-pandemic levels in 2019. Nearly 30% of unhoused individuals in Denton County had a chronic health condition, and the same percentage reported having a serious mental illness.

Denton County Point in Time Homelessness Data Report



Graphic source: "2023 Denton County Homelessness Data Report," United Way of Denton County, 2023.
<https://www.unitedwaydenton.org/sites/unitedwaydenton/files/2023%20DENTON%20COUNTY%20HOMELESSNESS%20DATA%20REPORT-5.pdf>

Additionally, the 2022 United Way of Denton County Community Needs Assessment cites that 2,032 Denton County students experienced homelessness in the 2020-2021 school year.⁴² This assessment's definition of homelessness includes individuals who are living with others or residing in temporary housing. Denton County contains two universities, and the transient living situations experienced by many low-income students creates a unique need for accessible healthcare.

Collin County identified 516 unhoused individuals in their 2023 Point-In-Time Count. Notable increases were observed in the number of unhoused veterans, youth, and families, as shown in the graphic below.⁴³



Graphic source: "2023 State of Homelessness." Housing Forward, <https://housingforwardntx.org/wp-content/uploads/2023/04/2023-SOHA-Collin-County.pdf>

Both Denton and Collin Counties reported that minority populations were disproportionately unhoused compared to the overall population. In Dallas and Collin Counties, Black households make up only 20% of the population but represent 45% of the unhoused population.⁴⁴ In Denton County Black households make up approximately 11% of the population but represent 31% of the unhoused population.⁴⁵

The City of Denton's Affordable Housing Needs and Market Value Analysis revealed that renters who earn less than 50% of Area Median Income (AMI), and some owners (particularly first-time buyers) who earn less than 80% of AMI, find it difficult to afford housing in Denton without assistance.⁴⁶ Service industry workers and other low-wage workers earning close to minimum wage have the greatest need. The City of Plano also indicates a growing need for affordable multi-family housing in the Planning Department's 2021 Annual Report.⁴⁷

Statewide trends mirror those in Denton and Collin Counties. The U.S. Census Bureau distributes a pulse survey to provide real-time data. As of March 2023, the survey reports that 13% of Texas households who did not own their home free and clear were not currently caught up on their mortgage payments (651,319 households), and 9% of them were at least somewhat likely to need to leave their home due to foreclosure in the next 2 months. People renting their homes experienced similar challenges. Fourteen percent of renters were not currently caught up on rent payments (642,470 households), and nearly half reported that they were at least somewhat likely to need to leave their home due to eviction in the next 2 months.⁴⁸ Although data from the weekly household pulse surveys is not broken down by county or zip code level, it speaks to the statewide impacts COVID-19 has had on housing security.

Since the federal eviction moratorium ended in August of 2021, renters who fell behind on their payments now face eviction. Eviction is linked to numerous poor health outcomes, including high blood pressure, sexually transmitted infections, anxiety, depression, and suicidality. In addition, eviction is linked with respiratory disease, which could increase the risk of complications if COVID-19 is contracted, as well as mortality risk during COVID-19.⁴⁹ Therefore, the housing crisis compounds the need for accessible, comprehensive healthcare services.

Medicare and Medicaid Access

Medicare and Medicaid are considered public insurances. Medicare is a federal program for people aged 65 and older but can also apply to people under 65 with long-term disabilities. Medicaid is a program for low-income individuals and is administered at the state level. The Children's Health Insurance Program (CHIP) offers low-cost health coverage for children 18 and younger whose families cannot afford private health insurance but do not qualify for Medicaid. In Texas, CHIP is not considered Medicaid because it is administered by a private entity.

Medicare

As of July 2022, Texas' population was estimated to be 30,029,572 with 13.44% of the residents aged 65 and older. According to the U.S. Census, Denton County had an estimated population of 977,281 while Collin County was slightly larger at 1,158,696. The two counties had a similar 65 and older population with Denton County at 11.55% and Collin County at 11.69%.⁵⁰

Texas	Total Population	30,029,572
	Age 65 +	4,037,085
	% of Population	13.44%
Denton County	Total Population	977,281
	Age 65+	112,877
	% of Population	11.55%
Collin County	Total Population	1,158,696
	Age 65+	135,472
	% of Population	11.69%

According to the Centers for Medicare and Medicaid Services (CMS), the total Medicare enrollment for the United States as of June 2023 was 66.1 million people with 49% enrolled in a Medicare Advantage (MA) plan and 51% enrolled in a traditional Fee-For-Service (FFS) plan. The traditional Medicare FFS plan includes Part A, which covers hospital visits and Part B, which covers medical visits. Eligible individuals can purchase Part D, which covers medications, and Medicare Supplement Insurance, which covers some or all of your out-of-pocket costs. Medicare Advantage plans are available from private companies and include Part A, Part B, and usually Part D coverage. These plans may also include additional benefits that traditional Medicare does not cover, such as vision and dental services.

Fifteen percent of Texas residents are enrolled in Medicare with only 12% of Denton and Collin County residents enrolled. Denton and Collin County residents have a higher enrollment in traditional Fee-For-Service (FFS) Medicare than the U.S. or Texas.⁵¹

As of June 2023	Texas	Denton County	Collin County
Medicare	4,598,741	119,100	140,504
% of Population	15%	12%	12%
Medicare Advantage	52%	44%	42%
Traditional FFS	48%	56%	58%

Medicaid

Approximately 28% of the total Texas population is 19 or younger. Denton and Collin Counties are similar, with 26% and 27% of residents in this category.⁵² In Collin County over 71,000 residents are covered by Medicaid (6%), and more than 72,000 Denton County residents are covered (7%).⁵³

Texas is one of ten states that did not adopt Medicaid expansion. This leaves 1.9 million people in the coverage gap where they make too much money to qualify for Medicaid but are ineligible for ACA Marketplace subsidies.⁵⁴

The Medicaid continuous enrollment provision ended on March 31, 2023. This year, 7,874,000 Medicaid recipients have been disenrolled in the United States. Texas has the highest rate, with 64% of recipients being disenrolled. Only 27% of recipients were disenrolled due to ineligibility. The rest lost their coverage for procedural reasons such as not completing their renewal or outdated contact information. In the U.S., 41% of disenrollments were children. Again, Texas had the highest rate, with 58% of disenrollments being children.⁵⁵

Lack of Health Insurance

Texas continues to have the highest rate of uninsured residents in the U.S.

Health insurance coverage has a significant effect on an individual's overall health because those who are uninsured are less likely to receive the services and medications they need to improve their health outcomes.⁵⁶ Although the percentage of uninsured residents decreased from 2019 – 2021, Texas continues to have the highest rate of uninsured residents in the country. Nationwide, approximately 8% of people in the U.S. were estimated to be uninsured in 2021. In Texas, this figure reached 16.6% during the same year.⁵⁷ While this is lower than in previous years, Texas still leads the U.S. in the rate of uninsured residents.⁵⁸ The drop in the number of uninsured can be attached to many factors – the majority of which are related to the response to the COVID-19 pandemic. This includes the extension of Medicaid coverage, which expired in March of 2023, and the enhanced subsidies for private insurance as part of the American Rescue Plan Act.⁵⁹

According to 2021 census estimates, Collin County is home to approximately 102,600 residents who do not have health insurance, representing 8.8% of the overall population in the county. The rate of uninsured adults is notably higher than the rate of uninsured children – 6.3% of children in the county are estimated to be without health insurance, but this figure increases to 11.4% for adults below 65 years of age.⁶⁰ Racial and ethnic disparities in health insurance coverage are also significant. In Collin County, 17.4% of Hispanic/Latino residents are living without insurance, as opposed to 7.8% of white non-Hispanic residents. Further, 14.4% of foreign-born residents are uninsured, as opposed to 7.2% of native-born residents.⁶¹ Census estimates also reveal that approximately 22.7% of the population living at or below 138% of the federal poverty level does not have health insurance.

Approximately 93,300 Denton County residents are without health insurance as well, representing 10.3% of the overall population. The percentages of uninsured children and adults under 65 are similar to those in Collin County, at 8.1% and 11.1% respectively. Additionally, census data shows that 21.8% of Hispanic/Latino residents in Denton County are uninsured, compared to 7.2% of white non-Hispanic residents.⁶² Of Denton County's foreign-born residents, 17.1% are uninsured, compared to 8.9% of native-born residents. 27.7% of Denton County residents who live at or below 138% of the federal poverty level are medically uninsured.

Significant disparities in the percentage of uninsured individuals also exist between various zip codes within Collin and Denton Counties.

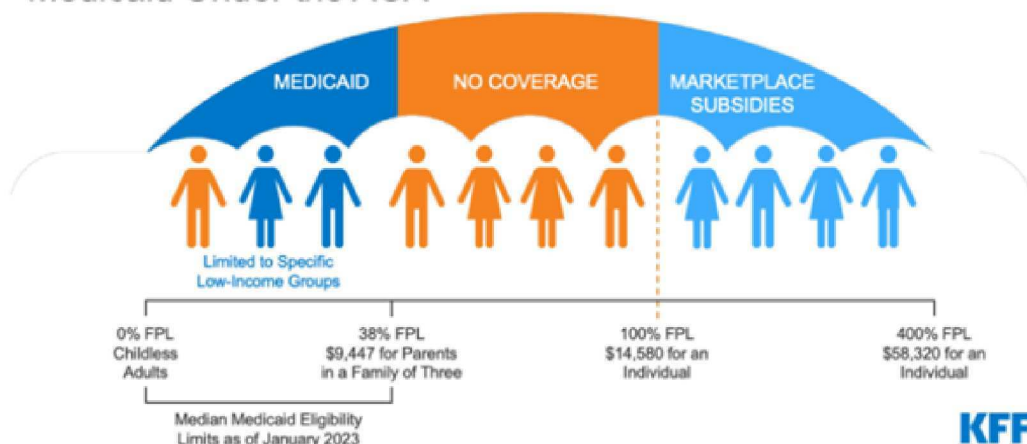
The zip codes with the highest rates of uninsured residents are listed here.

Zip Code	City Area	Percent Uninsured
75057	Lewisville	23.8%
75074	Plano	23.4%
76205	Denton	22.6%
76258	Pilot Point	19.4%
75069	McKinney	18.8%
75067	Lewisville	17.7%
76249	Krum	17.2%
76201	Denton	16.9%
76208	Denton	16.1%
76266	Sanger	16.1%
75065	Lake Dallas	15.2%
75098	Wylie	15.2%
76209	Denton	15.0%

Table source: "Census 2021 Estimates," United States Census Bureau, accessed October 30, 2023, <https://data.census.gov>.

Those earning between 38% and 100% of the federal poverty level (\$5,540.40 - \$14,580 per year for an individual) are considered to be in the health insurance "coverage gap."⁶³ Adults who fall into the coverage gap have incomes above the eligibility for Medicaid but below the federal poverty level, making them ineligible for subsidies in the Affordable Care Act Marketplaces. People in the coverage gap have limited options for primary care services, and options for specialty services are even more limited. Without a subsidy, the current average Marketplace premium in Texas is approximately \$454 per month, or \$5,448 annually, for the lowest-cost silver plan.⁶⁴

Gap in Coverage for Adults in States that Do Not Expand Medicaid Under the ACA



Graphic source: "How Many Uninsured Are in the Coverage Gap and How Many Could be Eligible if All States Adopted the Medicaid Expansion," KFF, March 31, 2023, <https://www.kff.org/medicaid/issue-brief/how-many-uninsured-are-in-the-coverage-gap-and-how-many-could-be-eligible-if-all-states-adopted-the-medicaid-expansion/>.

Uninsured Children

Texas overall, and Denton and Collin Counties specifically, are home to many uninsured children. While the number of uninsured children decreased statewide between 2019 and 2022, Texas still accounts for 22% of all uninsured children in the nation. Over 1 in 10 Texas children were uninsured in 2022, and this number is expected to increase since the Medicaid continuous enrollment condition ended on March 31, 2023.⁶⁵

Top 10 Largest Declines in the Number of Uninsured Children by State, 2019-2022

	2019 Number Uninsured	2022 Number Uninsured	2019-2022 Change in Number Uninsured	2019-2022 Percent Change
United States	4,375,000	3,932,000	-443,000*	-10%*
Texas	995,000	854,000	-141,000*	-14%*
California	334,000	287,000	-47,000*	-14%*
Georgia	197,000	166,000	-31,000*	-16%*
Indiana	119,000	91,000	-28,000*	-24%*
North Carolina	142,000	118,000	-24,000*	-17%*
Illinois	120,000	99,000	-21,000*	-18%*
Utah	82,000	61,000	-21,000*	-26%*
Arizona	161,000	142,000	-19,000*	-12%*
Michigan	78,000	60,000	-18,000*	-23%*
Oklahoma	86,000	73,000	-13,000*	-15%*

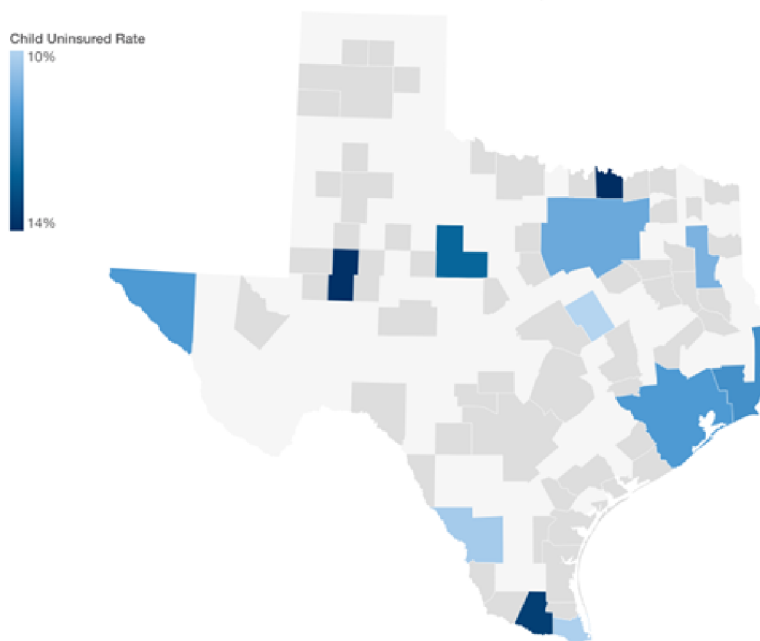
* Change is significant at the 90% confidence level relative to the prior year indicated.

Source: Georgetown University Center for Children and Families analysis of the US Census Bureau American Community Survey (ACS) Table HIC-5, Health Insurance Coverage Status and Type of Coverage by State - Children Under 19: 2008 to 2022, Health Insurance Historical Tables. • [Embed](#) • [Download image](#)



Graphic source: "Medicaid's Pandemic-Era Continuous Coverage Protections Helped Reduce Number of Uninsured Children," Georgetown University McCourt School of Public Policy, November, 15, 2023, <https://ccf.georgetown.edu/2023/11/15/medicaids-pandemic-era-continuous-coverage-protections-helped-reduce-number-of-uninsured-children/>.

Texas Metro Areas with Child Uninsured Rate of 10% or More, 2022



Over 12,500 children in Denton County and 19,200 children in Collin County do not have health insurance.⁶⁶ 11.3% of children in the Dallas-Fort Worth Metroplex, which includes Denton and Collin Counties, were uninsured in 2022.

There are very few areas in the state with higher rates of uninsured children.⁶⁷

Source: Georgetown University Center for Children and Families analysis of the US Census Bureau 2022 American Community Survey (ACS), Table S2701. • [Embed](#) • [Download image](#)



Graphic source: "Medicaid's Pandemic-Era Continuous Coverage Protections Helped Reduce Number of Uninsured Children," Georgetown University McCourt School of Public Policy, November, 15, 2023, <https://ccf.georgetown.edu/2023/11/15/medicaids-pandemic-era-continuous-coverage-protections-helped-reduce-number-of-uninsured-children/>.

Mental Health

The World Health Organization defines mental health as “a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn and work well, and contribute to their community.”⁶⁸ Mental health is vital at every stage of life and affects how people think, feel, and act. Good mental health is freedom from depression, anxiety, substance abuse and other psychological issues and refers to the overall coping mechanisms of an individual.

Having a behavioral health condition is typically not the result of one event. Research suggests multiple, linking causes. Genetics, environment, and lifestyle influence whether someone develops a mental health or substance abuse condition. The consequences of undiagnosed, untreated, or undertreated co-occurring disorders can lead to a higher likelihood of experiencing homelessness, incarceration, medical illnesses, suicide, or early death.⁶⁹

Poverty and homelessness exacerbate mental illness. Community members living in poverty are more concerned with being able to afford living expenses and leave their health needs unmet. Likewise, those experiencing homelessness are more concerned with where they will sleep, and all other needs become secondary. In 2022, the Denton County Homelessness Leadership Team conducted their local version of the national yearly Point in Time count of individuals experiencing homelessness. Of the individuals who participated in the survey in Denton County, 48% reported living with a serious mental illness.⁷⁰ In 2023, the Point in Time Count survey for the Dallas City and County, Irving Continuum of Care, which includes all of Collin County, found that 21% of 4,244 respondents were living with a serious mental illness.⁷¹

As in general healthcare, racial and ethnic disparities are prevalent in the U.S. mental healthcare system. Racial and ethnic minorities in the U.S. are less likely than white residents to receive adequate mental health treatment due to factors such as insufficient access to resources, lack of insurance, and fear of stigma or discrimination. Lack of culturally appropriate care can also be a barrier to services for many Americans.⁷² According to one 2021 study, Black (39%), Hispanic (19%), and Asian (25%) American adults with mental illness were less likely than their white (52%) counterparts to receive mental health treatment.⁷³ While awareness of these issues is increasing, the disparities in mental health treatment persist in many communities.

Although Texas has a low prevalence of substance use disorders in comparison to other U.S. states, substance abuse has been identified as an area of concern by members of the local Denton and Collin County communities. The risk of substance abuse is higher among certain populations, such as those who already struggle with mental health disorders, veterans, and those experiencing homelessness. Denton County Public Health states that more than one out of every five adults who have a mental illness also experience substance use disorders.⁷⁴ 24% of individuals who participated in the Denton County PIT Count survey of unhoused community members reported living with a substance abuse disorder.⁷⁵ In the Dallas and Collin County PIT Count survey in 2023, the number was reported as 15%.⁷⁶ Specifically, opioid abuse continues to be an increasing issue statewide and nationwide. In Texas, opioids are a factor in 46.7% of all overdose deaths.⁷⁷

Ranking of Mental Health Needs and Care Systems in the U.S. - Texas⁷⁸

Measure	Texas Ranking (out of 51)
Overall	46
Adult	35
Youth	46
Prevalence of Mental Illness	3
Access to Care	51
Adult Prevalence of Mental Illness	5
Adults with Substance Use Disorder in Past Year	2
Adults with Serious Thoughts of Suicide	3
Youth Prevalence of Mental Illness	28
Youth with Substance Use Disorder in the Past Year	12
Youth with Severe Major Depressive Episode	20
Adult Access to Care	47
Adults with AMI (mental illness) Reporting Unmet Need	34
Adults with AMI Who Are Uninsured	50
Mental Health Workforce Availability	50

The State of Texas ranks particularly low in availability and access to mental health care, and this issue extends to the local North Texas community as well. Both Denton and Collin Counties have fewer mental health providers per capita than the U.S. overall, which has a ratio of 340:1.⁷⁹

According to United Way of Denton County, 1 in 5 people in Denton County experience a mental health crisis in a year. However, the ratio of mental health service providers to residents in Denton County is 1 provider to every 660 residents.⁸⁰ With the county population estimated to be just over 1 million, that leaves about 1,300 mental healthcare providers for 200,000 residents experiencing a mental health crisis during a year in Denton County.

In Collin County, the ratio of mental health service providers to residents is 1 mental health service provider to every 650 residents. With 11.2% of adults in Collin County reporting frequent mental distress, that leaves about 1,600 mental health service providers for 130,000 adult residents experiencing mental distress. This does not account for the number of children and teens struggling with mental illness in Collin County. The rate of children experiencing mental health crises has risen sharply since the COVID-19 pandemic.⁸³

COVID-19 and the measures put in place to control the spread of the virus have caused an increase in mental health concerns worldwide. These concerns stem from many factors, including fears of infection and transmitting the virus to others, as well as feelings of isolation and frustration due to quarantine protocols. Mental health concerns related to the coronavirus pandemic include stress, anxiety, depression, frustration, and uncertainty about the future. More serious psychological reactions include feelings of hopelessness and desperation which can lead to suicidal behavior. Studies have also reported higher rates of irritability, insomnia, post-traumatic stress disorder, anger, and exhaustion in those under quarantine.⁸⁴ These symptoms are caused by a variety of factors, including lack of childcare, loss of wages, and disruption of routines.

As the demand for mental health services has continued to increase in the aftermath of COVID-19, provider availability across the U.S. has become strained. In response to a survey conducted by the American Psychological Association in 2022, 6 out of 10 mental healthcare practitioners stated they have no capacity for new patients, and 46% said they have not been able to meet increasing treatment demands.⁸⁵



HIV/AIDS

Human Immunodeficiency Virus (HIV) is a virus that attacks the body's immune system. If HIV is not treated it can lead to Acquired Immunodeficiency Syndrome (AIDS). Currently there is no effective cure, but with proper medical care, HIV can be controlled. There are three stages of HIV:

- Stage 1: Acute HIV infection – This stage is very contagious. A newly infected person may experience flu-like symptoms.
- Stage 2: Chronic HIV infection – The HIV virus is active and reproduces in the body. An infected person may not have symptoms or get sick but can transmit HIV.
- Stage 3: AIDS – This is the most severe stage. A person in this stage will have a high viral load and the virus is easily transmittable. Opportunistic infections are common in this stage.⁸⁶

Globally, 39 million people were living with HIV in 2022 with 1.5 million aged 0 to 14 and 37.5 million aged 15 and older. There were 1.3 million people newly infected with HIV in 2022, down from 3.2 million new diagnoses at the peak in 1995.⁸⁷ Texas had 100,700 people living with HIV in 2021 with 4,363 new diagnoses. The majority of these HIV diagnoses are among men.⁸⁸ Locally, 2,045 Collin County residents and 1,539 Denton County residents were living with HIV/AIDS in 2019.⁸⁹

HIV prevalence and diagnoses statistics for the state of Texas are shown in the table below.⁹⁰

2021	Total	Male	Female
HIV Prevalence	100,700	79.2%	20.8%
New HIV Diagnoses	4,363	82.8%	17.2%
2021	Total	Male	Female

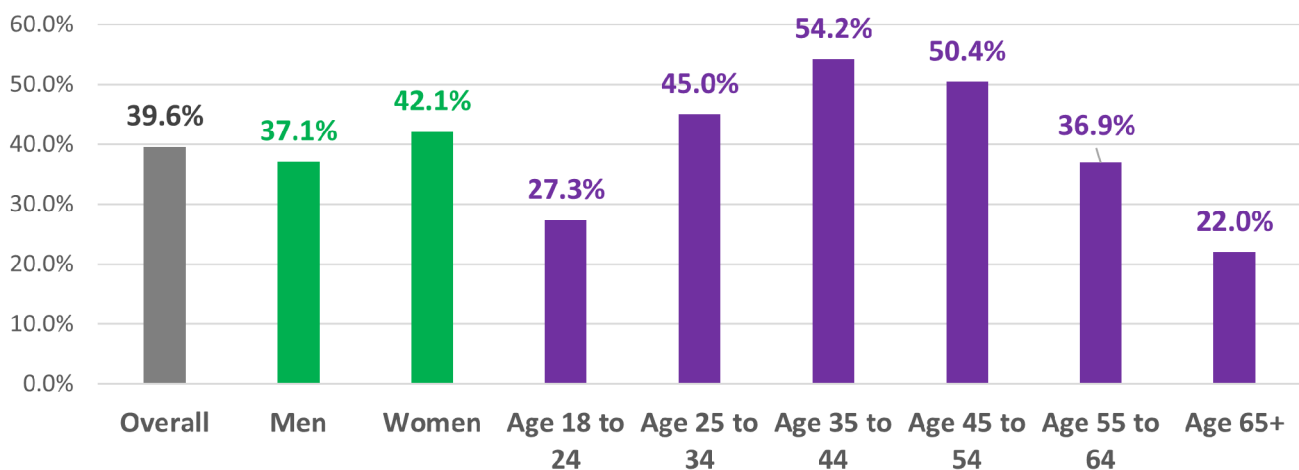
There are many disparities in HIV infections between races compared to the proportion of the population. For example, Texas has a higher percentage of Hispanic people than the United States with a much higher prevalence of HIV. Black residents make up 12.3% of the Texas population, but account for 36% of HIV diagnoses. However, the disparity is greater within the United States as a whole.

	Texas		United States	
HIV Diagnosis by Race	% of Population ⁹¹	% of HIV Diagnoses ⁹²	% of Population ⁹³	% of HIV Diagnoses ⁹⁴
Hispanic	40.2%	41%	18.9%	26%
Black	12.3%	36%	12.6%	42%
White	40.3%	19%	59.3%	26%
Multiple Races	1.6%	3%	2.3%	3%
Asian	5.3%	1%	5.9%	2%
American Indian/ Alaskan Native	0.3%	0%	0.7%	1%
Native Hawaiian/ Other Pacific Islander	0.1%	0%	0.2%	0%

Testing

The CDC recommends everyone age 13 to 64 get tested for HIV at least once. Someone who engages in risky sexual behavior or IV drug use should get tested annually or more often. In the United States, 36.5% of all adults have been tested for HIV at least once as of 2021. Texas ranks 11th in testing with 39.6% of all adults being tested.⁹⁵

HIV Testing, Texas 2021



Graph data source: "Local Data: Texas," AIDSVu, accessed October 31, 2023, <https://aidsvu.org/local-data/united-states/south/texas/>

It is also recommended that all pregnant people be tested for HIV. This helps decrease the number of babies born with HIV, as the earlier treatment is started, the lower the transmission risk is.⁹⁶

Treatment

The first step to treatment is linkage to care, defined as having a visit with an HIV healthcare provider within one month of being diagnosed with HIV. The linkage to care rate in Texas in 2021 was 78.6%.

Antiretroviral Therapy, also called ART, is the standard treatment for HIV and works by reducing the amount of HIV virus in the blood. A person has reached viral suppression when they have less than 200 copies of HIV per milliliter of blood. Once someone's viral load is undetectable, they will not transmit HIV through sex.⁹⁷

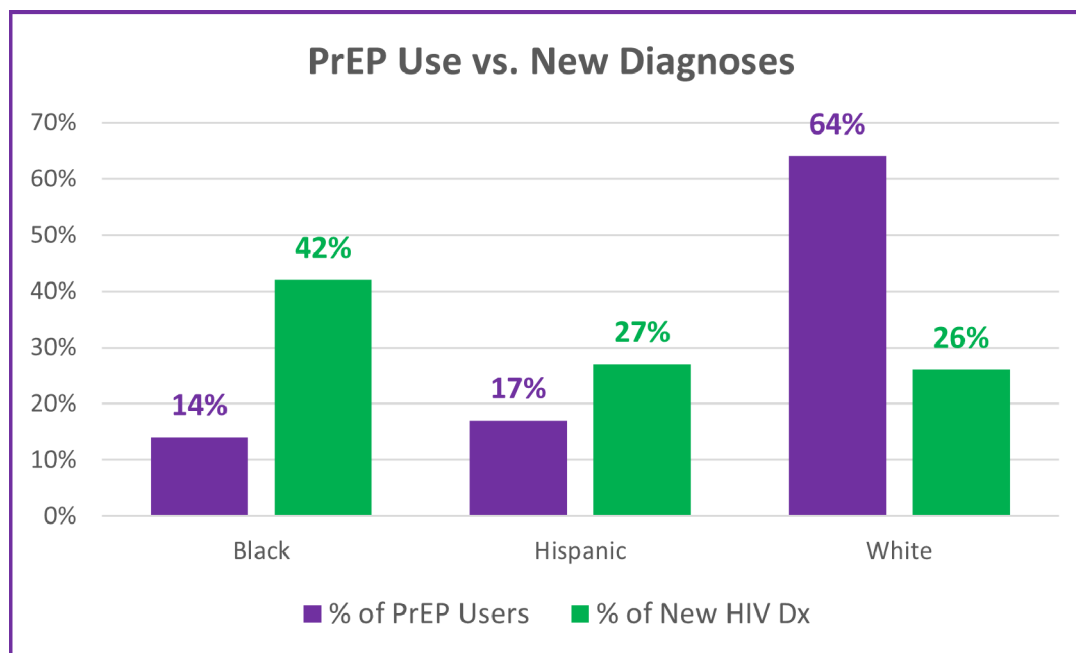
Ending the HIV Epidemic

Ending the HIV Epidemic (EHE) is a ten-year federal initiative with a goal of ending the HIV epidemic by decreasing new HIV diagnoses per year to less than 3,000 by 2030. This will be achieved by diagnosing HIV as early as possible, treating HIV quickly and effectively to reach viral suppression, preventing new HIV transmission, and responding quickly to new outbreaks.⁹⁸

Pre-exposure Prophylaxis

People on Pre-exposure Prophylaxis (PrEP) take HIV medications to lower their chance of becoming infected with HIV. According to the Centers for Disease Control and Prevention (CDC) 1.2 million people in the United States are at high risk for HIV exposure and would benefit from PrEP.⁹⁹ There has been a consistent increase in the use of PrEP since 2012, with a 20% increase in the United States between 2021 and 2022. 65% of PrEP users are between the ages of 24 to 44.¹⁰⁰

The use of PrEP was 1.4 times higher in states with expanded Medicaid. Blacks accounted for only 14% of PrEP users but made up 42% of new HIV diagnoses and Hispanics accounted for only 17% of PrEP users but 27% of new HIV diagnoses. Conversely, Whites make up 64% of PrEP users and only 26% of new HIV diagnoses.¹⁰¹



Graph data source: "Deeper Look: Ending the HIV Epidemic," AIDSvu, accessed October 31, 2023, <https://aidsvu.org/resources/ending-the-hiv-epidemic/>

Community Survey Summary

Methods

HSNT conducted a 2023 Community Needs Assessment Survey in English and Spanish. Participants took part in the survey by accessing a Survey Monkey link or filling out a paper version. The survey consisted of 3 multiple choice questions about general and healthcare related concerns in our community, as well as one open-ended question for respondents to share any additional information.

The survey was shared with community partners via email, social media, and flyers with survey links distributed at local businesses. To incorporate more responses from HSNT patients, paper surveys were distributed in the waiting rooms of our health centers on 3 separate days at 3 different locations.

The following charts represent the combined results from both the Spanish and English versions of the survey. The total number of respondents for both versions of the survey was 222, with 32 Spanish responses and 190 English responses.

Identified Community Needs

1. What are the top 5 community needs or concerns you see in your area?

Response	% of Respondents Selecting
Affordable housing	77%
Living wage employment	53%
Financial assistance during emergency situations for utilities, rent, and other basic needs	39%
Affordable childcare	38%
Local access to affordable nutritious food	36%

2. What are the top 4 healthcare concerns you see in your community?

Response	% of Respondents Selecting
Affordable primary/preventative care	59%
Affordable health insurance	47%
Affordable prescription medication	47%
Mental healthcare	44%

3. What challenges does your community face in finding specialty healthcare? Select the top 3 areas of concern.

Response	% of Respondents Selecting
Specialty providers accepting Medicaid	47%
Psychiatry	39%
In-patient alcohol, drug, and mental health treatment	34%

Overall Survey Results

- Affordable housing was the top choice when selecting the 5 greatest community needs, with 77% of respondents selecting this response.
- Living-wage employment (53%), Financial assistance during emergency situations for utilities, rent and other basic needs (39%), Affordable childcare (38%), and Local access to affordable nutritious food (36%) complete the top 5 list of community needs expressed by survey respondents.
- Affordable primary/preventative care was another expressed need, with 59% of respondents selecting it.
- Affordable prescription medication (47%), Affordable health insurance (47%), Mental healthcare (44%), and Dental care (32%) were the other most selected healthcare needs.
- 47% of respondents chose Specialty providers accepting Medicaid as one of their 3 areas of concern in finding specialty healthcare.
- Other top areas of concern in specialty healthcare included Psychiatry (39%), In-patient alcohol, drug, and mental health treatment (34%), Labs and imaging (22%), and Durable Medical Equipment (18%).
- Among the open-ended responses for the last question in the survey, commonly mentioned concerns include insufficient city infrastructure, lack of resources for undocumented immigrants, lack of access to services for unhoused community members, and insufficient quality of medical care.

Survey Results by Demographic Groups

Spanish and English Surveys

HSNT completed a brief analysis comparing the survey results for respondents who completed the survey in English (190) to results for respondents who completed the survey in Spanish (32).

- For respondents who completed the English survey, affordable housing was listed as the top community need, followed by living-wage employment, financial assistance during emergency situations for utilities, rent and other basic needs, affordable childcare, and local access to affordable nutritious foods.
- Results for the Spanish survey were slightly different, with the top needs being affordable housing, followed by living wage employment, local access to affordable nutritious foods, inflation, and affordable personal transportation (vehicle, repairs, insurance, fuel).

- The top 4 healthcare concerns listed by those who completed the Spanish survey were affordable primary/preventative care, affordable prescription medication, affordable health insurance, and women's health, in that order. For English survey respondents, the top 4 healthcare concerns were affordable primary/preventative care, mental healthcare, affordable prescription medication, and affordable health insurance.
- For English survey respondents, the top 3 concerns in finding specialty healthcare were specialty providers accepting Medicaid, psychiatry, and in-patient alcohol, drug, and mental health treatment. For those who completed the Spanish survey, the top 3 concerns were allergists, speech and language services, and specialty providers accepting Medicaid.

Race and Ethnicity

HSNT completed a brief analysis comparing survey results by the respondents' self-identified race and ethnicity to examine potential racial inequities or differences in needs experienced in our community.

- Affordable housing was the most chosen community need by all race/ethnic groups except for Asian, Pacific Islander, and Native Hawaiians (Non-Hispanic or Latino). For this group, programs and assistance for seniors was the top choice. Inflation ranked in the top 5 needs for all groups except for White Non-Hispanic or Latino. Living-wage employment ranked in the top 5 for all groups.
- Reproductive healthcare did not rank in the top 5 for any group except for Asian, Pacific Islander, and Native Hawaiians, for which it was the top concern. Affordable primary/preventative care, affordable health insurance, and affordable prescription medication all ranked in the top 5 for 4 out of the 5 groups.
- Psychiatry ranked in the top 3 for all groups except Hispanic or Latino of Any Race. Specialty providers accepting Medicaid ranked in the top 3 for 3 out of the 5 groups.

Survey Limitations

Our total of 222 survey responses represents a small fraction of our community and our patient population. Limitations in time and personnel did not allow for a larger sample size to be obtained. Due to limitations in sample size, our survey response group was somewhat skewed in terms of demographics. For example, 78% of survey respondents are female, which is significantly higher than the percent of female residents in our service area. The analysis of our survey results is also limited due to constraints on time and personnel. In the future, we could find many other ways to break down and analyze survey results by demographic, location, etc.

Survey Conclusion

Overall, the results of our survey support the other research compiled for this Community Needs Assessment. Shortages of affordable housing, living-wage employment, and financial assistance resources for emergencies are top of mind for the residents of Denton and Collin Counties. Adjacent to these issues are access concerns for affordable primary care, prescriptions, and health insurance. These survey results reflect the urgent need for affordable healthcare in our community. Concerns surrounding housing, employment, and financial stability are deeply tied to personal health and have a strong impact on health outcomes.

Survey results also point to concerns over city infrastructure and urban planning. Local access to affordable and nutritious food and access to public transportation ranked in the top 10 community needs and concerns chosen by respondents.

Most of the health and specialty health concerns raised by survey respondents are also related to cost, for example, affordable primary/preventative care and specialty providers accepting Medicaid. However, other frequently selected issues include mental healthcare (98 respondents), psychiatry (86 respondents), and substance abuse treatment (75 respondents). This reveals that members of our community are experiencing the effects of living in an area that is underserved in the field of mental health. Dental healthcare also ranked high among survey respondents, with 71 out of 222 respondents choosing it as one of the top 4 healthcare concerns that they see in their community.

For our Spanish-speaking residents, results confirmed that language and translation services are still a significant concern, with 25% of Spanish survey respondents choosing language barriers as a top 5 community need. The Spanish survey results also pointed to other potential gaps in care for our Spanish-speaking community, with women's healthcare and allergy specialists chosen as concerns much more frequently than among English survey respondents.

Results of both the English and Spanish surveys bring attention to the fact that inflation is likely impacting community residents of color more than white residents. This supports other articles and research published about the effects of inflation in the U.S. overall. In our survey, other racial/ethnic groups besides White Non-Hispanic ranked inflation as a top 5 community need. Specifically, 45% of Black Non-Hispanic respondents, 50% of Asian, Pacific Islander, or Native Hawaiian Non-Hispanic respondents, and 36% of Hispanic or Latino respondents chose inflation as one of the top concerns they see, as opposed to 29% of White Non-Hispanic respondents.





Recommendations for the Future

Considering the significant need for quality, affordable healthcare in North Texas, which has further increased since the Medicaid continuous enrollment condition ended on March 31, 2023, HSNT should continue working to increase access to care by connecting patients to health insurance resources and identifying additional sources of funding to support expanded services.

HSNT should continue strengthening access to mental health services for patients of all ages to address the sharp, post-pandemic increase in mental health challenges observed in our community.

Maintaining access to telehealth will benefit our community by supporting timely linkage to care and adequate preparation in the event of a public health emergency.

HSNT should explore additional community partnerships to increase patient access to services such as housing assistance, food donation, employment assistance, mental healthcare, and dental care.

Documenting social (non-medical) determinants of health in HSNT's electronic health record will support necessary systems as insurance payors transition to a value-based care model.

HSNT should consider establishing new locations in other high-need areas, such as the City of Lewisville.

Gathering and assessing information on the required costs, equipment, and staffing needed to operate a sustainable dental practice will enable HSNT to effectively evaluate the feasibility of providing preventative dental services directly.

HSNT should continue to take an intersectional, culturally competent approach to care, with wrap-around services, recognizing the way community issues may affect different groups in various ways.

Advocacy is an important part of HSNT's mission because numerous non-medical factors affect our community's health and wellbeing. HSNT should continue advocating for community resources, including those in the areas of mental healthcare, accessible childcare, affordable housing, living-wage employment, and increased access to health insurance through the expansion of Medicaid.

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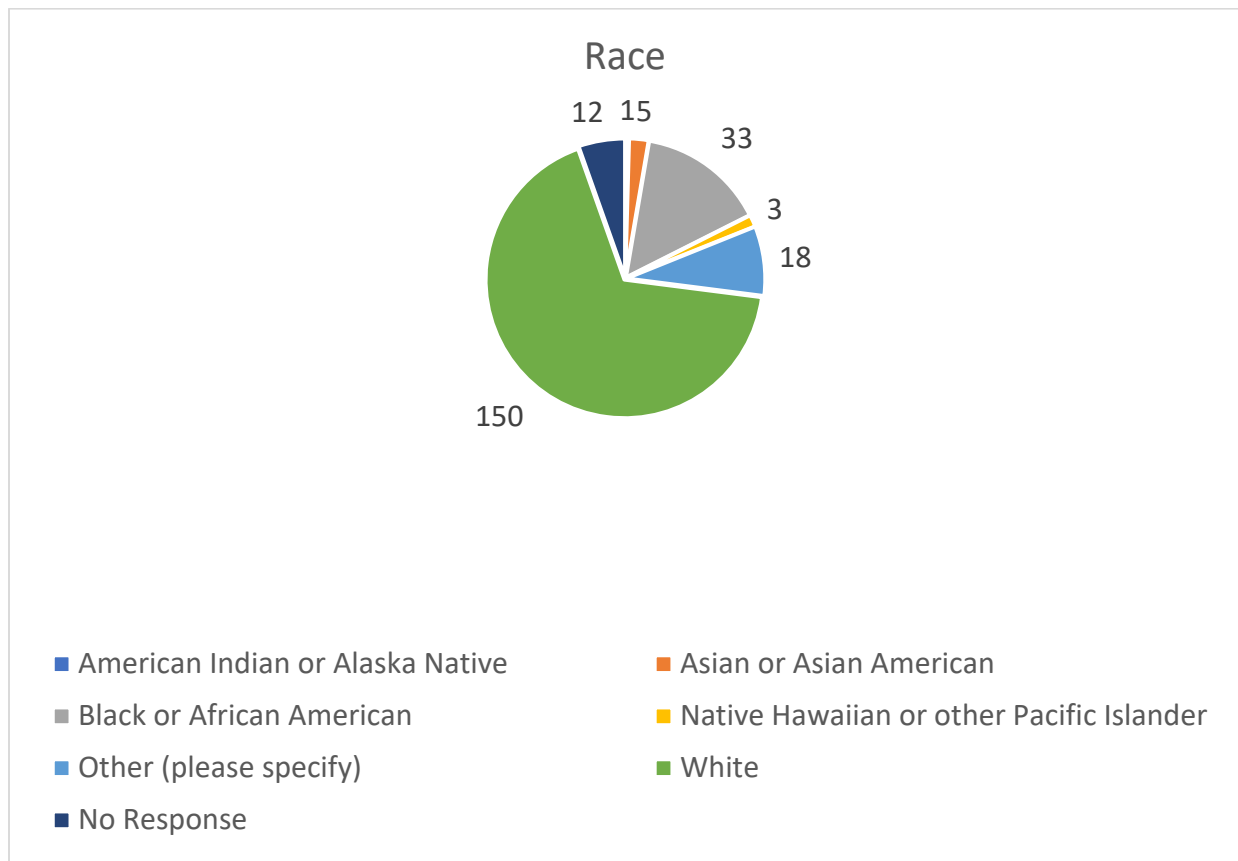
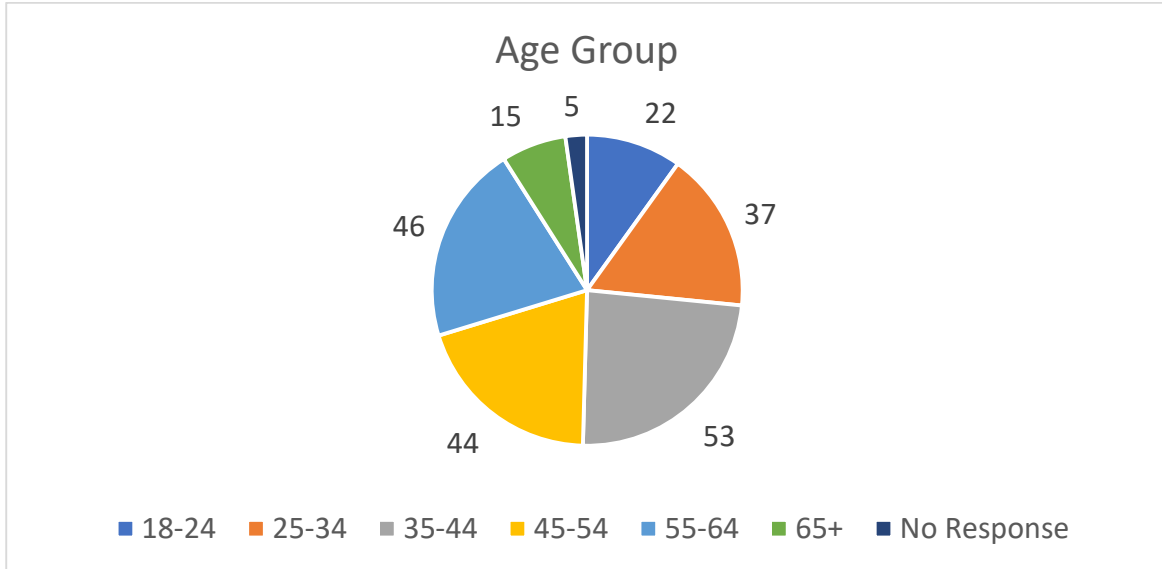
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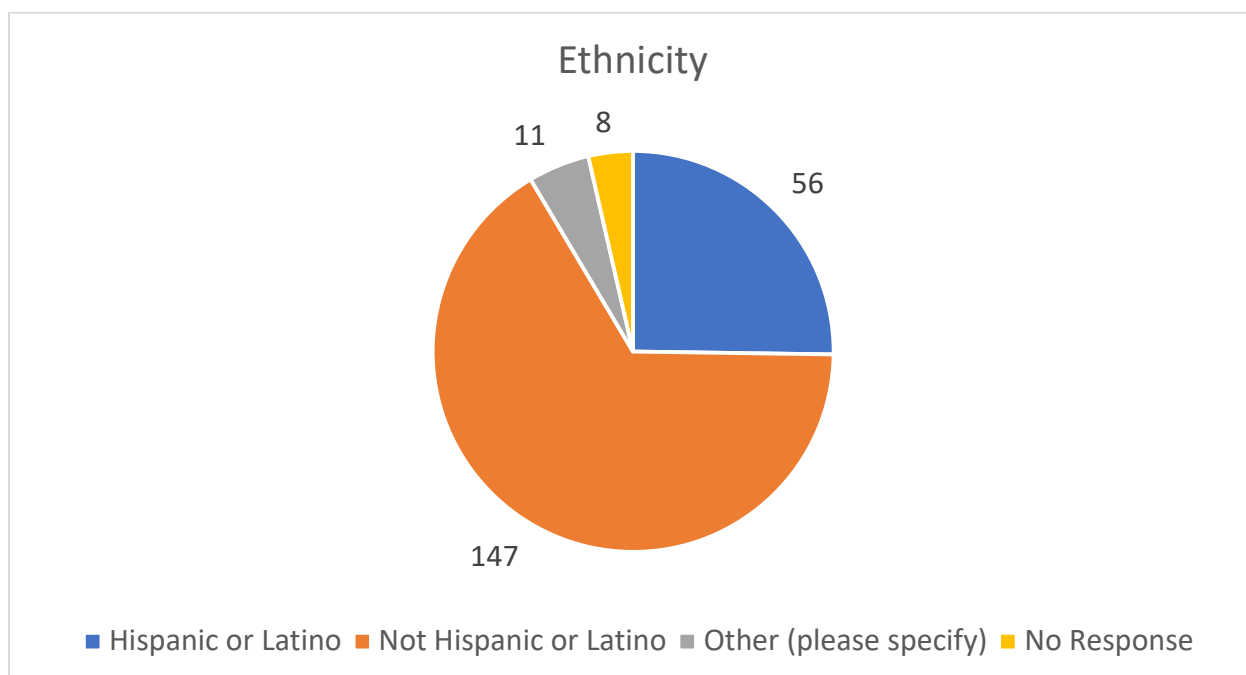
Appendix

Community Survey: Responses and Further Analysis

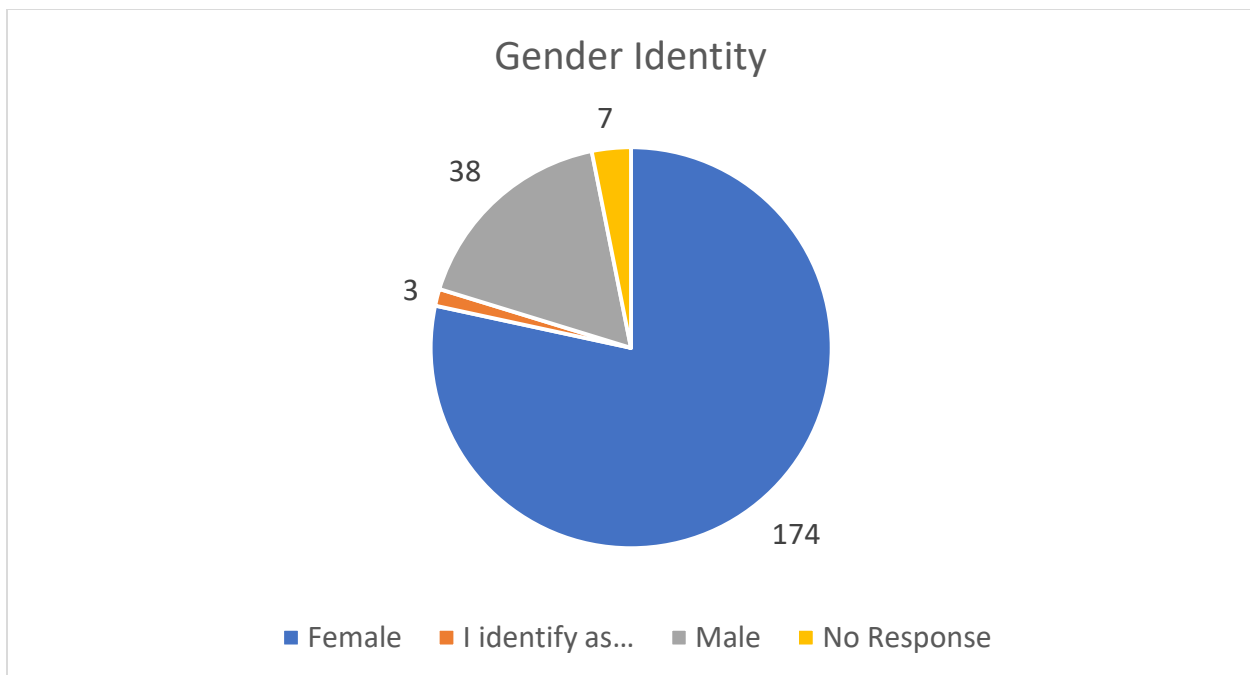
Respondent Demographics



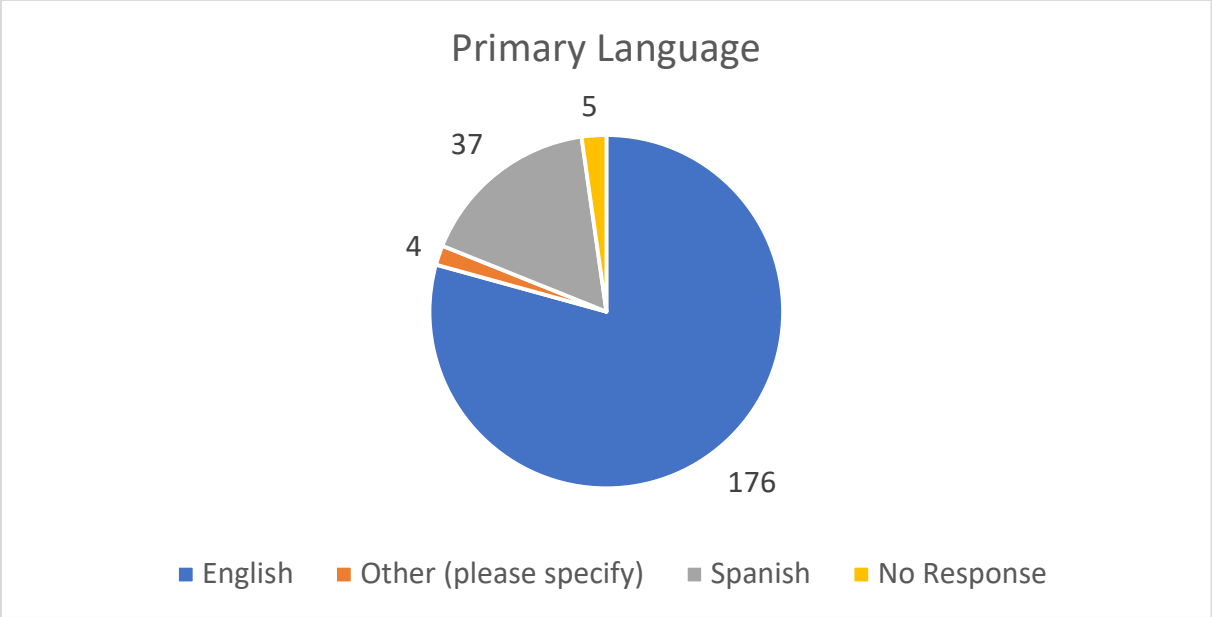
Other (please specify)
Biracial
Mexican
Mixed
European
Mixed race
Brown
Chosen
Latinx
Mixed
Hispano
Hispano
Mexicana
Hispana
Mexicana 100/100
Latina
Hispano
Ispano
What does is matter?



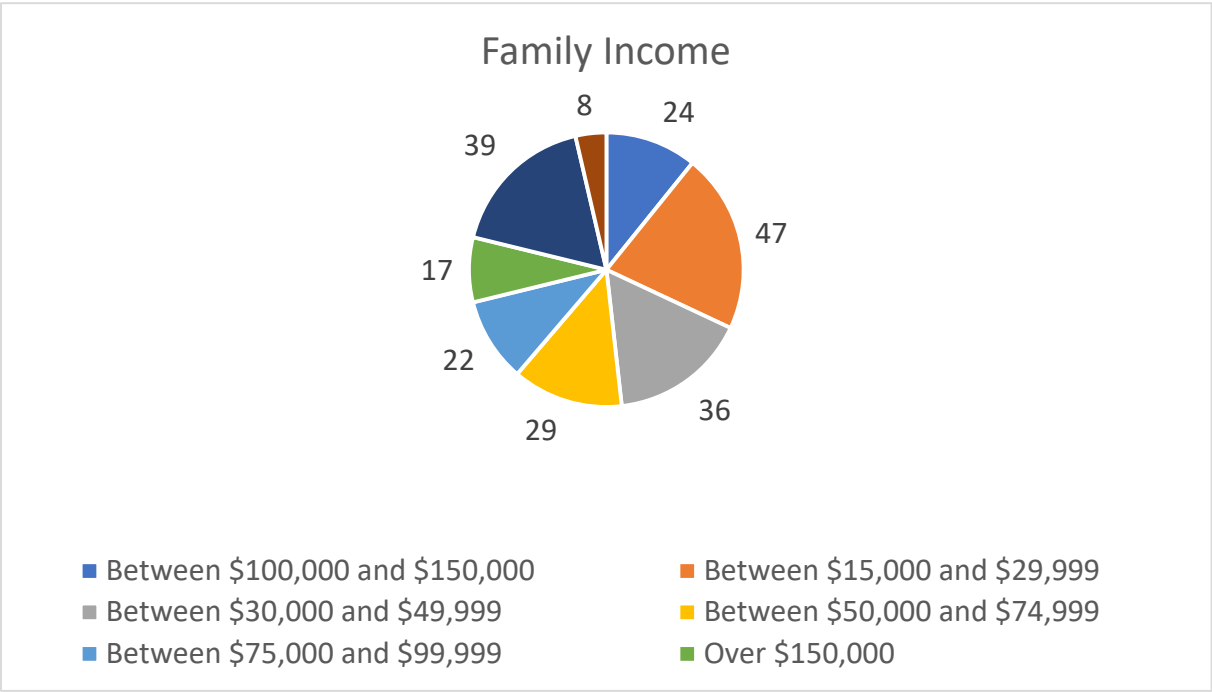
Other (please specify)
Mixed
Biracial
Russian
Mixed
what does it matter?
Black
Brown
Khmer
A child of the most high God Jesus Christ
Asian
Multiracial



I identify as...
Nonbinary
what does it matter?
Genderfluid



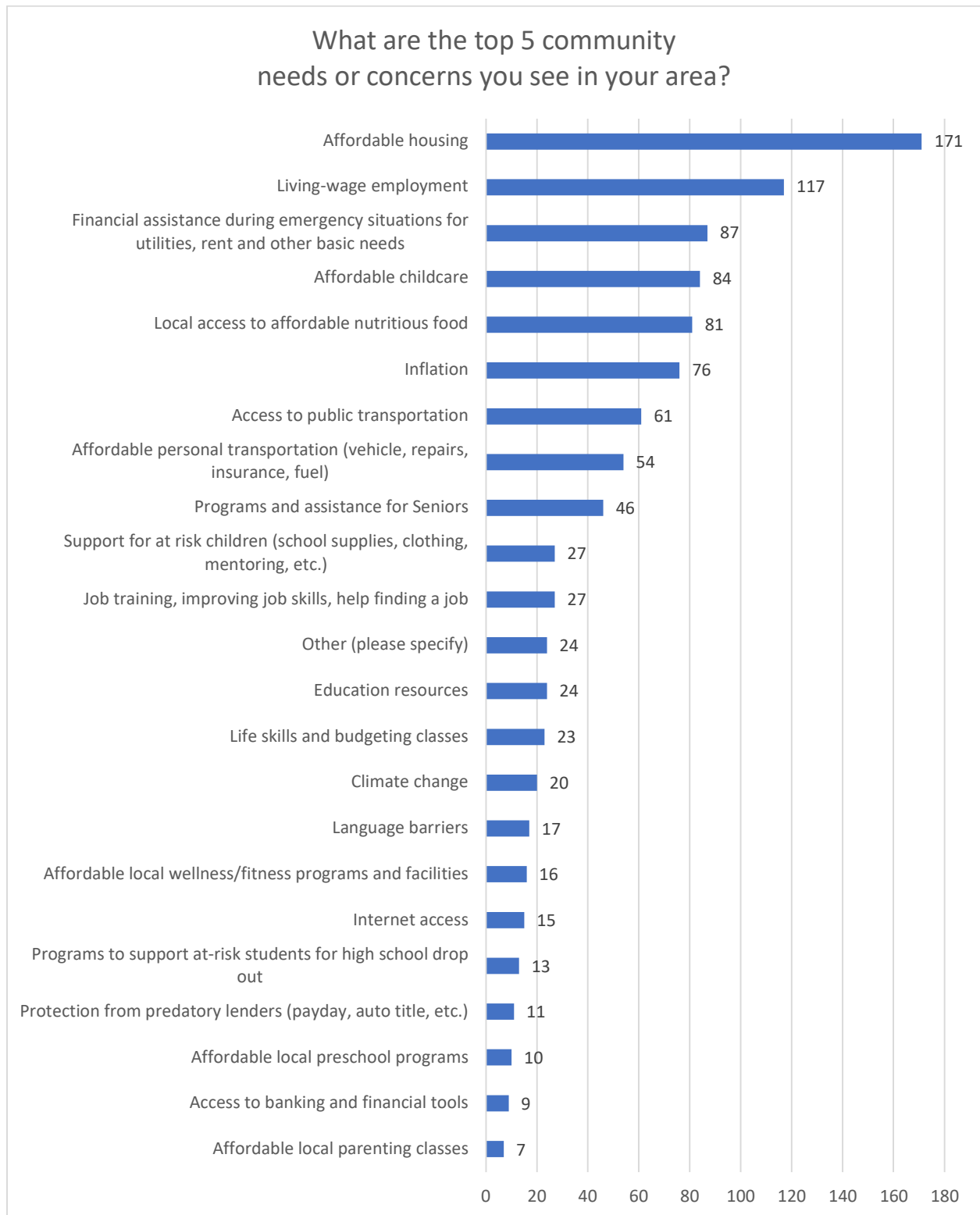
Other (please specify)
bilingual and fluent in both spanish and english
Amharic
Filipino
Both English and Spanish



Zip Code	Number of Respondents	Percentage of Respondents
76209	31	13.96%
76208	15	6.76%
76210	13	5.86%
76205	13	5.86%
76201	12	5.41%
76227	11	4.95%
76266	9	4.05%
76207	8	3.60%
75067	5	2.25%
76247	5	2.25%
76259	5	2.25%
75065	4	1.80%
75098	4	1.80%
75068	4	1.80%
75407	3	1.35%
76249	3	1.35%
76240	3	1.35%
75075	3	1.35%
75077	3	1.35%
75089	2	0.90%
75034	2	0.90%
75002	2	0.90%
75189	2	0.90%
75056	2	0.90%
75074	2	0.90%
75057	2	0.90%
75025	1	0.45%
76107	1	0.45%
75409	1	0.45%
75160	1	0.45%
75069	1	0.45%
75164	1	0.45%
76233	1	0.45%
75173	1	0.45%
76017	1	0.45%
75181	1	0.45%
76114	1	0.45%
75072	1	0.45%
75020	1	0.45%
75202	1	0.45%

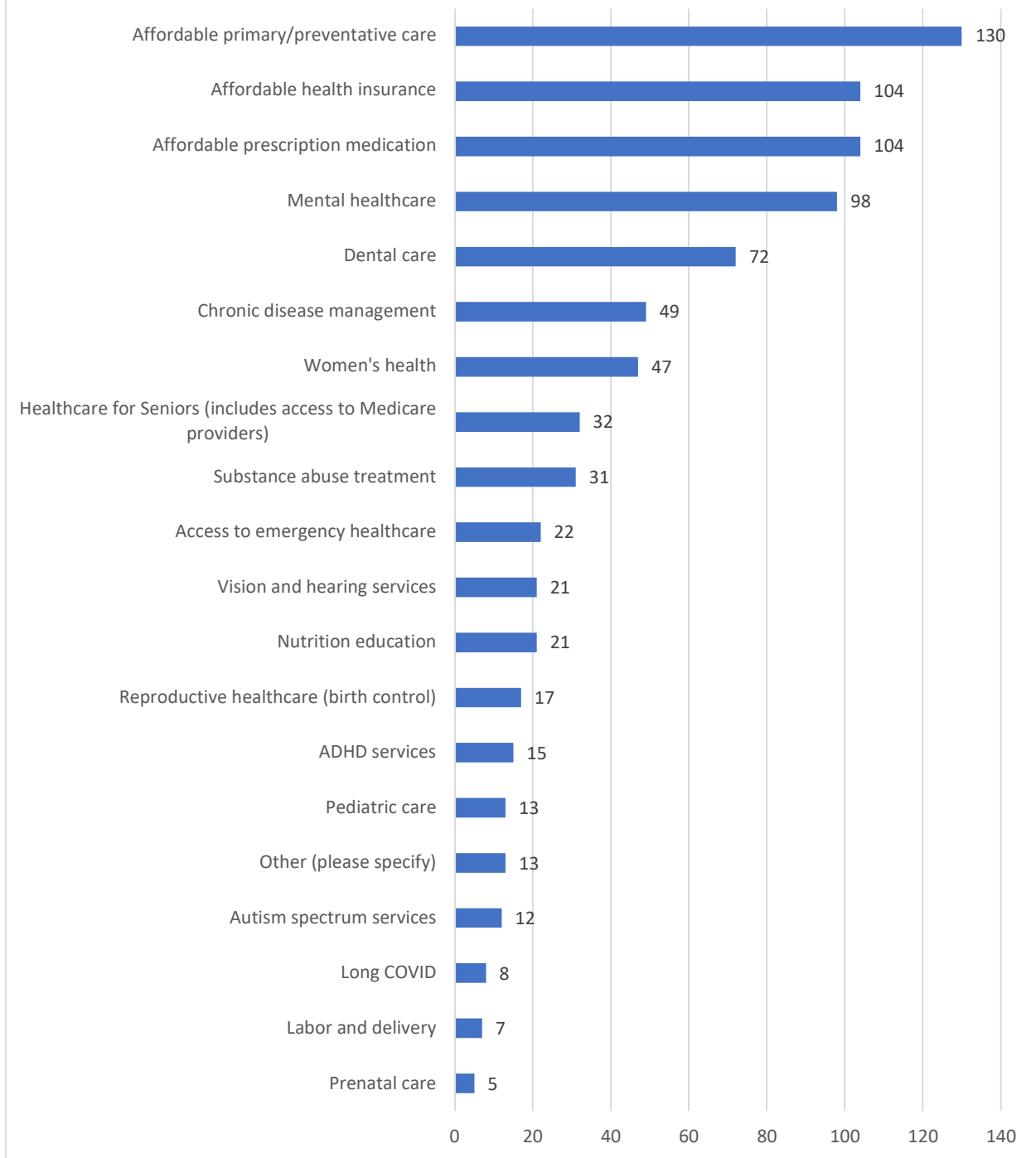
76226	1	0.45%
75208	1	0.45%
75094	1	0.45%
76262	1	0.45%
75442	1	0.45%
76272	1	0.45%
76082	1	0.45%
76111	1	0.45%
76244	1	0.45%
76118	1	0.45%
75078	1	0.45%
75013	1	0.45%
75236	1	0.45%
75023	1	0.45%
75240	1	0.45%
75093	1	0.45%
75244	1	0.45%
75036	1	0.45%
75252	1	0.45%
76234	1	0.45%
75287	1	0.45%
75070	1	0.45%
75082	1	0.45%
76258	1	0.45%
75061	1	0.45%
75043	1	0.45%
75001	1	0.45%
75234	1	0.45%
75216	1	0.45%
76426	1	0.45%
75228	1	0.45%
75229	1	0.45%
75233	1	0.45%

Survey Responses



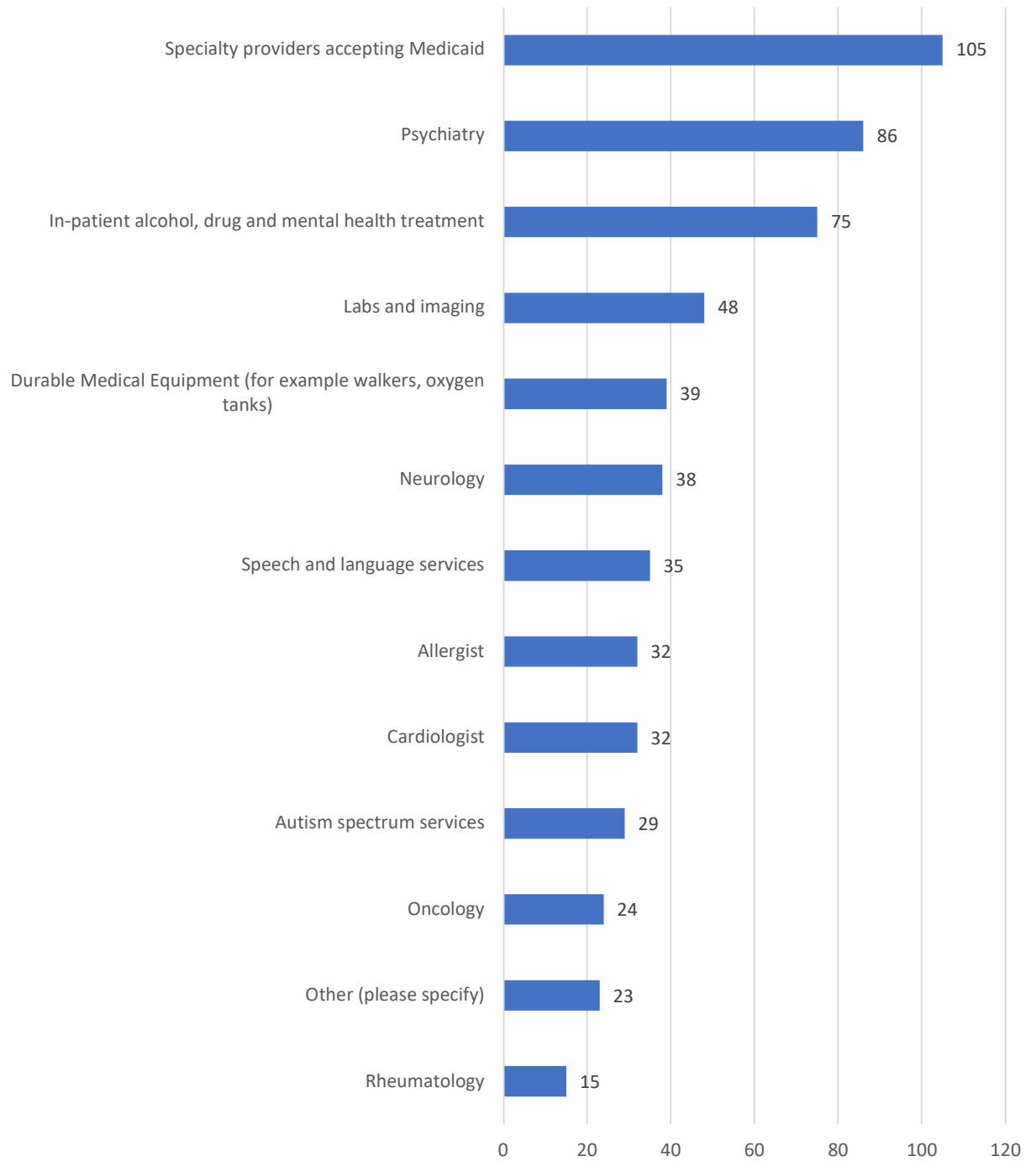
What are the top 5 community needs or concerns you see in your area?
Other (please specify)
Access to childcare for those with autism and behavioral issues
Access to continuing healthcare for chronic health conditions and prescription assistance
Adult children living at home
Adult healthcare coverage- Medicaid expansion
Affordable vision and hearing services
All of the above
Appropriate funding for police and appropriate enforcement of laws
Crime prevention
Dental care
Developmentally-based providers who are covered by insurance (Natural Language Acquisition, Floortime, social cognitive language, Collaborative and Proactive Solutions, etc)
Financial help for dental
Health care assistant without insurance
Homelessness
Homelessness
Lack of IDD support in MHMR center for transitioning children to adulthood, daycare for those with IDD past daycare years ie teens with disabilities. The program of SEAL is a good program tho. Please keep.
Mental health resources other than MHMR
Mental health support and resources
Not enough facilities / programs for people experiencing homelessness. Not enough overnight beds. Need a tiny home village for people experiencing homelessness.
Nursing and rehabilitation facility
Shelters for women and children
Substance education

What are the top 4 healthcare concerns you see in your community?



What are the top 4 healthcare concerns you see in your community?
Other (please specify)
Affordable access to alternative healthcare options
Abortion care
Access to Specialty Services and Indigent Health Care Application Difficulty
Quick access to care
Transportation to and from health care visits
Dental care for the homeless
Non acceptance of my insurance and scheduling me a month later when I need to be seen immediately
Hep c treatment
Problem finding providers to accept Medicaid.
Understanding of those children and teens with disabilities with behavior associated to disability up to and including autism ADHD IDD and other mental health disabilities.
IDD services when the functional capacity is low but IQ is normal/high. Recognizing, diagnosing, and managing developmental disabilities outside the ASD/ADHD radials (they're typically pushed to MH, occasionally to Behavioral Health, as they can't access IDD resources)
A dr that listens
Abortion services

What challenges does your community face in finding specialty healthcare? Select the top 3 areas of concern.



What challenges does your community face in finding specialty healthcare? Select the top 3 areas of concern.
Other (please specify)
Alternative Healthcare Awareness
Basic mental health services - affordable counseling for individuals, families, couples, etc.
Appointment availability PCP. Unable to schedule appointments in under 2 months to see a doctor. Don't want to live in pain.
Out patient treatment for drugs and alcohol
Trans Providers
Needing referrals to see specialist
Urology
Women's healthcare
mental health therapists
All the above
Primary care accepting Medicare
Affordable care for those not Medicaid eligible with high deductibles
Occupational and Physical therapy
Robust OT/PT/ST/MH/attendant/wraparound support outside ABA. Developmental approaches as opposed to behavioral approach.
No access to a community county hospital services and support
Mental health counseling
Counseling/Mental Health Access
Behavioral Health
I just moved from Denton to Plano, I've been answering for Plano.
Endocrinology
Tinnitus
Especialistas que hablan español (<i>Specialists that speak Spanish</i>)
Drogadicciones (<i>Drug addictions</i>)

Are there any other issues, not listed in this survey, that affect the quality of life in your community? (Yes – 49 Responses)
Help with finding doctors that take new patients with the insurance you have
Lack of sidewalks. Lack of housing for the unhoused. Lack of quality affordable housing.
Doctors who are not conspiracy theorist nutjobs or dismissive of conditions they don't understand. I'm not sure which is worse but I'm dealing with both.
Access to safe sidewalks and pedestrian routes (more protected crosswalks). Construction area safety - example/ construction on tennis complex in City of Denton closed a heavily used sidewalk with no alternate route for months forcing pedestrians to walk on the road
lack of transitional housing
youth fitness

Affordable physical exams
Gun ownership
Our City Council / Mayorship has been sold out to real estate development interests, our green spaces are on the chopping block. We also need more public bathrooms on the square for everyone, including people experiencing homelessness. Traffic is so dangerous in Denton ... speed limits are not enforced, red lights are being ran like crazy ... I don't feel safe driving anywhere in town.
Competent physicians. More than just minimal care for homeless, local ERs are awful.
lack of available resources who have funding
I've seen client with diabetes frequently.
access to medical services for homeless persons or those without transportation (to reduce need for emergency care). Also exit planning for homeless persons to transition to appropriate next step. Mental Health and Stability navigators/mentors to support ongoing self-sufficiency.
family issues
Transitional housing for the homeless
Mental health & ADHD screening
I think all communities could benefit from education on insurance. I have "good" insurance but feel relatively clueless about how it works. While I'm comfortably housed, my husband and I both work with our unhoused neighbors and our community desperately needs programs that target mental health and substance abuse in that community.
never-ending traffic and its impact on the quality of life
Beyond what is typical for affordable housing, the fact that home values are rising exponentially along with taxes on those homes. Many families who had affordable housing are now being forced to leave their homes and move or be homeless because they can no longer afford their home.
Accessing services- via transportation between cities
Healthcare is hard to find
Coverage in areas such as Frisco, Allen, McKinney that may be higher income areas but there is still a whole population that is not getting needed services.
High utility costs
Funeral services
Timely doctor appointments
overall sense of community/unity among residents (feels more like tribes/silos based on race, ethnicity, gender, religion, etc. rather than a unified group/community)
Idd transtion services; help for PTSD for children.
parenting classes education or late-night or evening community events to connect neighborhoods
Few taxpayers as UNT, TWU and other large employers don't pay taxes
CKD
Psychiatry
Roads and highways are dangerous! On-ramps and off-ramps on highways shouldn't be the same.
No access to free medicaid/ACA insurance in TX
Overcrowding without taking infrastructure into mind
Secular homeschool resources and worry over the future for our daughter in a red state
Food crisis

Autonomy of care. We need funding to do with as we need. If today it is convenience foods and tomorrow a babysitter, I should have the autonomy to direct that.
Medicaid expansion needed to uninsured adults. No community county Hospital services
There's no training to gently handle mental health crisis' in our hospitals and police forces.
Digestive and gastroenterology care and diagnosis
childcare deserts
Reliable language interpretation services for patients that speak languages other than English. Lack of knowledge by providers about the rights of undocumented patients or caregivers. Forms and other intake instruments often ask for information that may not be necessary or is optional and thus prevents those without a social security or drivers' license to access services and programs that are available to them.
A lack of awareness to services and resources
Mental Health,
Homelessness has increased a lot in the past few years.
Specialty doctors in same network, to alleviate having to go to different cities for complete healthcare.
Neighborhoods with no green space or walking trails within walking distance
Unsafe infrastructure (lack of sidewalks, damaged roads etc.)
Ayuda a los indocumentados con cosas medicas como especialistas <i>(Help for the undocumented with medical things like specialists)</i>

Further Analysis

Spanish and English Surveys

Survey responses with at least a 10-point difference between the percentage of respondents selecting the response on the English survey compared to the Spanish survey are shown in the tables below.

What are the top 5 community needs or concerns you see in your area?		
Need	Percent of English Survey Respondents	Percent of Spanish Survey Respondents
Financial assistance during emergency situations for utilities, rent and other basic needs	44%	13%
Affordable childcare	41%	22%
Access to public transportation	30%	13%
Affordable housing	79%	63%
Programs and assistance for Seniors	23%	9%
Life skills and budgeting classes	12%	0%
Language barriers	5%	25%

What are the top 4 healthcare concerns you see in your community?		
Need	Percent of English Survey Respondents	Percent of Spanish Survey Respondents
Mental Healthcare	50%	9%
Chronic disease management	25%	3%
Healthcare for Seniors (including access to Medicare providers)	16%	3%
Women's health	18%	38%

What challenges does your community face in finding specialty healthcare? Select the top 3 areas of concern.		
Need	Percent of English Survey Respondents	Percent of Spanish Survey Respondents
In-patient alcohol, drug, and mental health treatment	38%	9%
Psychiatry	43%	16%
Specialty providers accepting Medicaid	51%	28%
Speech and language services	13%	31%
Allergist	11%	34%

Race and Ethnicity

The following charts show the top results for each question by race and ethnicity.

What are the top 5 community needs or concerns you see in your area?					
	White, Non-Hispanic or Latino (110 respondents)	Hispanic or Latino of Any Race (56 respondents)	Black or African American, Non-Hispanic or Latino (33 respondents)	Asian, Pacific Islander, or Native Hawaiian, Non-Hispanic or Latino (8 respondents)	Other, Non-Hispanic or Latino (7 respondents)
1	Affordable housing	Affordable housing	Affordable housing	Programs and assistance for Seniors	Affordable housing
2	Living-wage employment	Living-wage employment	Living-wage employment	Inflation	Living-wage employment
3	Affordable childcare	Local access to affordable nutritious food	Financial assistance during emergency situations for utilities, rent and other basic needs	Local access to affordable nutritious food	Programs and assistance for Seniors
4	Financial assistance during emergency situations for utilities, rent and other basic needs	Inflation	Inflation	Living-wage employment	Affordable childcare
5	Local access to affordable nutritious food	Affordable childcare	Affordable personal transportation (vehicle, repairs, insurance, fuel)	Affordable childcare	Inflation

What are the top 4 healthcare concerns you see in your community?					
	White, Non-Hispanic or Latino (110 respondents)	Hispanic or Latino of Any Race (56 respondents)	Black or African American, Non-Hispanic or Latino (33 respondents)	Asian, Pacific Islander, or Native Hawaiian, Non-Hispanic or Latino (8 respondents)	Other, Non-Hispanic or Latino (7 respondents)
1	Affordable primary/preventative care	Affordable primary/preventative care	Affordable prescription medication	Reproductive healthcare (birth control)	Mental healthcare
2	Mental healthcare	Affordable health insurance	Affordable primary/preventative care	Affordable prescription medication	Affordable primary/preventative care
3	Affordable prescription medication	Affordable prescription medication	Mental healthcare	ADHD services	Dental care
4	Affordable health insurance	Dental care	Affordable health insurance	Chronic disease management <i>and</i> Pediatric Care	Affordable health insurance

What challenges does your community face in finding specialty healthcare? Select the top 3 areas of concern.					
	White, Non-Hispanic or Latino (110 respondents)	Hispanic or Latino of Any Race (56 respondents)	Black or African American, Non-Hispanic or Latino (33 respondents)	Asian, Pacific Islander, or Native Hawaiian, Non-Hispanic or Latino (8 respondents)	Other, Non-Hispanic or Latino (7 respondents)
1	Specialty providers accepting Medicaid	Specialty providers accepting Medicaid	Specialty providers accepting Medicaid	Other (please specify)	Speech and language services
2	Psychiatry	Speech and language services	Psychiatry	Psychiatry	Psychiatry
3	In-patient alcohol, drug, and mental health treatment	Labs and imaging	In-patient alcohol, drug, and mental health treatment	Rheumatology	Neurology