



CLAY COUNTY

PUBLIC HEALTH CENTER



800 Haines Drive
Liberty, MO 64068
p. 816-595-4200
clayhealth.com

Clay County Public Health Center FFY 2019-2021 MCH Services Contract Work Plan Executive Summary

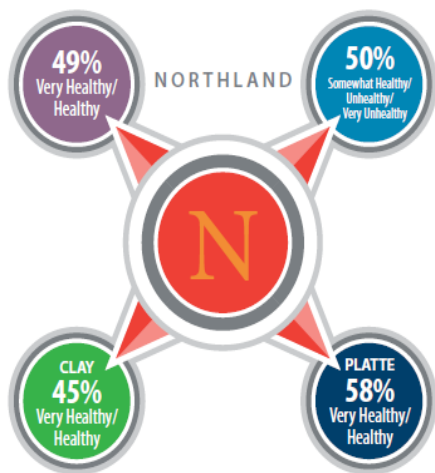
The state of health in Missouri is of grave concern and preventable chronic diseases are frequently in the news. Far too many people are diagnosed with chronic disease and too few are eating a healthy diet or finding time to exercise. We know these are significant health issues facing not only Missouri, but also Clay County. What can we do about them? How do we help families in Clay County achieve and maintain a healthy weight and subsequently a healthier life? We begin by asking questions.

In 2014 Clay County Public Health Center (CCPHC), along with over 60 partner organizations, conducted a Community Health Assessment utilizing MAPP (Mobilizing for Action through Planning and Partnerships) to understand more about the health of the population in Clay County. This effort was part of a larger Northland Community Health Assessment, examining the health of citizens in Platte and Clay Counties. The assessment included a survey shared with citizens through our partner organizations, as well as social and traditional media. The survey asked participants to rate the overall health of the community, to identify the health problems they believe are the most important, to rate risky behaviors they believe are having the greatest impact in the community, and to identify resources, gaps, and barriers regarding access to care. The survey was available in English and Spanish and in online and paper format. More than 1100 Northland residents responded, with over 600 from Clay County.

In addition to the survey, Clay County Public Health Center also conducted public forums in six communities (Excelsior Springs, Smithville, North Kansas City, Kearney, Gladstone, Liberty) to gather feedback and gain deeper insight into the health issues most important to individual communities. To further its commitment to gathering feedback from as broad and diverse an audience as possible, CCPHC established the Diversity Advisory Council on Health Equity (DACHE). This group has met monthly since 2014 to discuss health care and access issues from the perspectives of minority and underserved communities.

Here's Some of What We Learned from Clay County Resident's

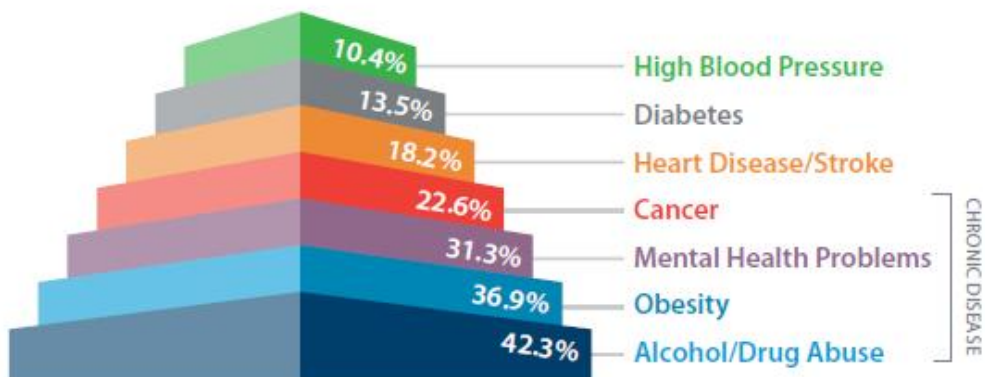
How healthy is my community?



What are the most important “risky behaviors” in my community?



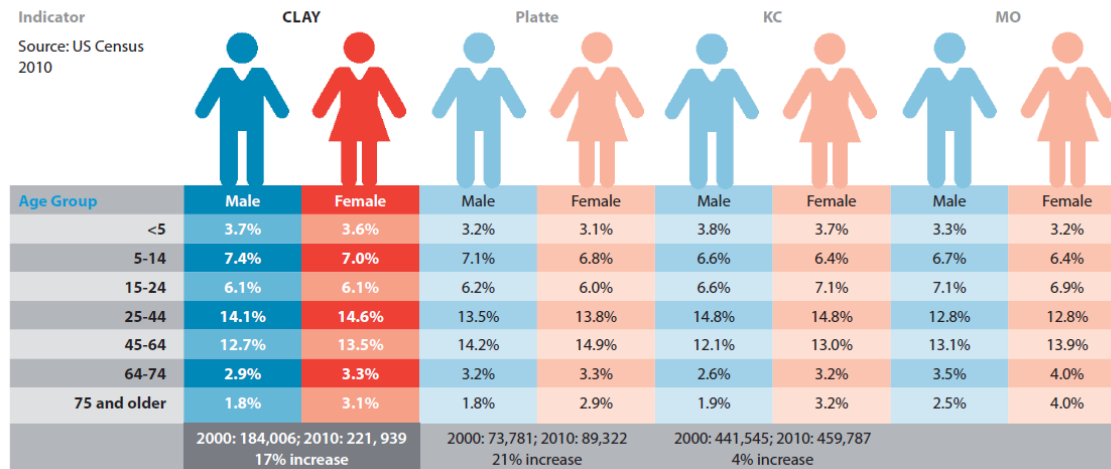
What are the most important health problems in my community?



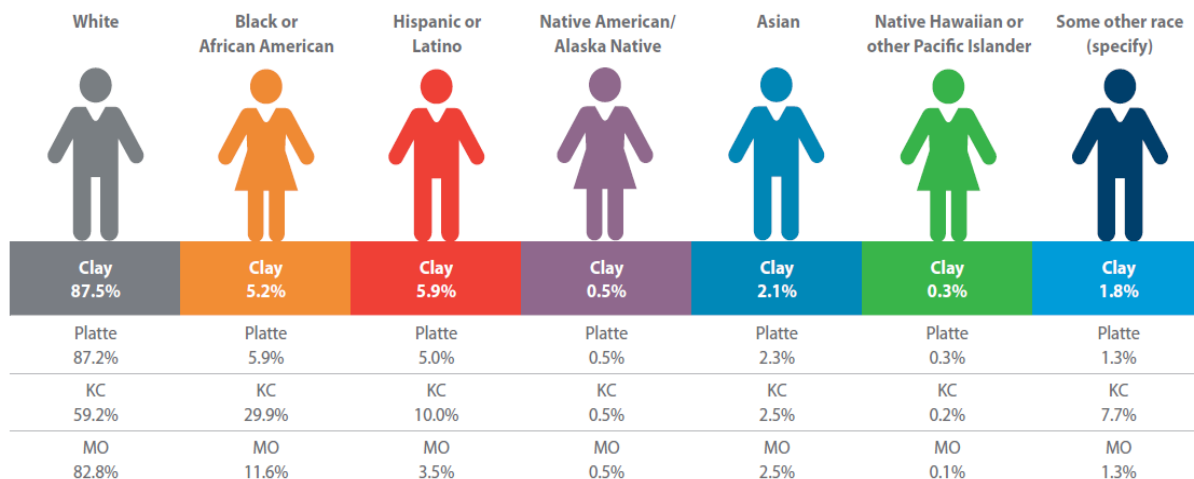
The mission of the Clay County Public Health Center is to deliver the essential public health services of prevention, promotion and protection to the communities of Clay County.

County Household Demographics

Clay|County by the Numbers

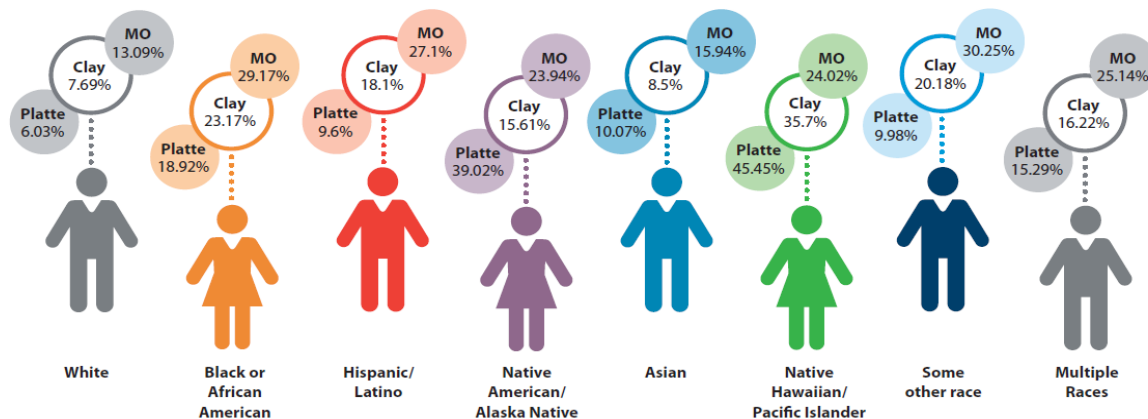


Demographic Profile: Race/Ethnic Distribution



Percent of Persons in Poverty by Race and Ethnicity

Population below 100% FPL – Percent by race and ethnicity
American Community Survey via Community Commons, 2009-2013



The mission of the Clay County Public Health Center is to deliver the essential public health services of prevention, promotion and protection to the communities of Clay County.

Single parent families, particularly those headed by females, are more likely to face economic struggles which in turn impacts their ability to access health care and ultimately their health outcomes. Over a quarter of the children living in Clay County reside in homes headed by a single parent, significantly higher than the U.S. total of 18% but less than the figures for both Missouri and Kansas City.

Percent families below poverty level

Indicator	Platte	Clay	KC	MO	U.S.	Year	Source
Percent Families Below Poverty Level	5.4%	7.7%	14.10%	11.5%	11.6%	2013 (ACS)	U.S. Department of Commerce United States Census Bureau American Fact Finder

Households headed by females in Clay County are particularly at risk for living in poverty. Income inequality is a likely culprit. A 2013 study by the National Partnership for Women and Families found a wage gap exists in every state and in the country's largest 50 metropolitan areas. An analysis of 2011 US Census Bureau data found in the Kansas City metro area, on average, a woman who holds a full-time job is paid \$38,783 per year while a man who holds a full-time job is paid \$50,422 per year. This means that women in the Kansas City area are paid 77 cents for every dollar paid to men in the area, amounting to a yearly gap of \$11,639 between men and women who work full time. This wage gap has major implications for the ability of women to purchase necessities and inevitably limits their access to health care, healthy foods, and often healthy activity.

Female Household in less than 125% FPL – no husband present

Indicator	Platte	Clay	KC	MO	U.S.	Year	Source
Female Headed Households at less than 125% Federal Poverty Level – No husband present	31.6%	29.4%	45%	43.6%	40.9%	2013	U.S. Census

Married Couple Families in less than 125% FPL

Indicator	Platte	Clay	KC	MO	Year	Source
Married Couple Families at less than 125% Federal Poverty Level	3.9%	5.7%	10.8%	9.8%	2013	U.S. Census

Single Parent Families

Indicator	Platte	Clay	KC	MO	U.S.	Year	Source
Percentage of children that live in households headed by single parent	27%	28%	36.6%	33%	18%	2008-2012	County Health Rankings & Roadmaps, 2015 Report (ACS Data)

Free and Reduced-Price Lunch

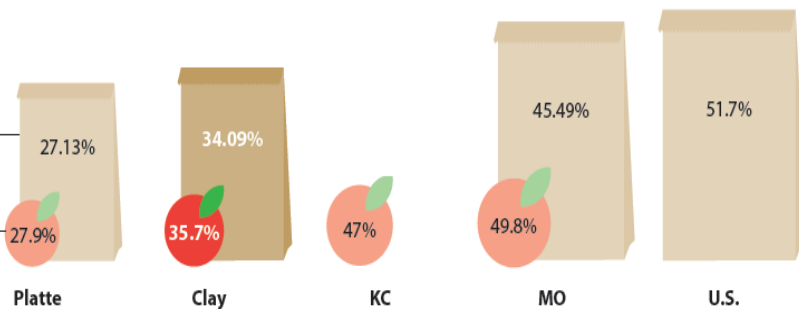
One-third of Clay County students are eligible for Free or Reduced-Price Lunches, although in some schools, the number of eligible students is 70% or greater.

Free and Reduced Price Lunch

Children Eligible for Free and Reduced Price Lunch
National Center for Education Statistics, 2012-13

Percent of children enrolled in school free/reduced lunch programs

Kids Count, Dese.mo.gov, 2013



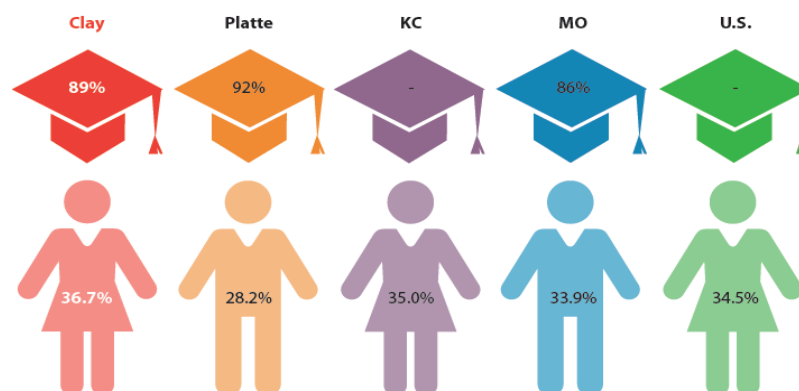
Educational Attainment

Some might be surprised by the correlation between educational attainment and health. Research has demonstrated the better educated a person is, the better health outcomes he or she is likely to enjoy. These better health outcomes can be seen in both morbidity rates for acute and chronic diseases, in mortality rates, and in life expectancy. Further, those with four years of education beyond high school also report more positive health behaviors. They are less likely to smoke, to drink a lot, to be overweight or obese, or to use illegal drugs. These findings may have serious implications for Clay County where 36.7% of residents aged 25 and above have a high school diploma or less.

High School Graduation Rate

High School graduation Rate: Percent of 9th grade cohorts that graduate in 4 years

County Health Rankings & Roadmaps, 2015 Report, 2011-12







Persons aged 25 and older with a high school diploma or less

U.S. Department of Commerce United States Census Bureau American Fact Finder, 2013



How Healthy is Clay County?

Chronic diseases are the leading causes of death and disability in the U.S. They are associated with high healthcare cost, low productivity and loss of quality of life, yet they are the most preventable of all health problems. According to the Missouri Department of Health and Senior Services, nearly 7 out of every 10 Missourians who die each year will die of a chronic disease. Cancer, heart disease, chronic lower respiratory disease and stroke were the leading causes of death for Clay County citizens in 2014.

		Platte	Clay	KC	MO	Healthy People 2020
Heart Disease MICA, 2012		121.1	151.6	165.2	191.5	103.5
		Heart Disease (mortality per 100,000)				
		149.6/100,000	165.5/100,000	187.9/100,000	181.0/100,000	161.4/100,000
Cancer MICA, 2012		Mortality – Age adjusted Rates: All cancers: AAM, Total (mortality per 100,000)				
		151/100,000	167.7/100,000	174.6/100,000	177.5/100,000	
		Mortality – Age adjusted Rates: All cancers: White (mortality per 100,000)				
		90.4@/100,000	104.9@/100,000	212.6/100,000	222.3/100,000	
		Mortality – Age adjusted Rates: All cancers: Black/African American (mortality per 100,000)				
COPD MICA–Chronic, 2012		38.9/100,000	51.1/100,000	48.7/100,000	51.6/100,000	
		Chronic obstructive lung disease (mortality per 100,000)				
		15.4/100,000	15.8/100,000	23.5/100,000	20.2/100,000	66.6/100,000
Diabetes MICA, 2011-2013		Mortality – Age adjusted Rates: All cancers: AAM, Total (mortality per 100,000)				
		14.0/100,000	15.5/100,000	18.3/100,000	18.6/100,000	
		Mortality – Age adjusted Rates: All cancers: White (mortality per 100,000)				
		91.9@/100,000	18.7@/100,000	36.1/100,000	38.0/100,000	
		Mortality – Age adjusted Rates: All cancers: Black/African American (mortality per 100,000)				
* @ symbol indicates an unstable rate with fewer than 20 events.						

Health Behaviors - A Description of Contributing Causes

Chronic diseases are impacted by health choices. Those who are overweight/obese, who smoke, who use or abuse drugs or alcohol, and who do not eat a healthy diet or exercise regularly are at far greater risk to develop and die from a chronic disease. The most current health behavior data captured for Clay County makes clear where the greatest challenges to reducing chronic diseases lie. Nearly 30% of the population is obese. Far too few are eating an adequate diet of fruits and vegetables, and 25% of adults reported they are participating in no leisure time physical activity. Discussion at the Community Health Forums revealed a lack of access to healthy eating and active living opportunities for residents.

Obesity

Healthy People 2011
Baseline 33.9; Target 30.5



Fruit and Vegetable Consumption

Percent of Adults with Inadequate Fruit and Vegetable Consumption

BRFSS via Community Commons, 2005-2009



Maternal and Child Health

Ensuring healthy pregnancies, births and infancies protects adult health and plays a key role in determining the health of the next generation. Yet social determinants such as poverty and racial disparities can impact the health status of a mother as well as her ability to access care. The data from Clay County suggests these issues may be having negative implications for poor mothers and children in the community. The good news is most of Clay County mothers receive prenatal care during pregnancy. While the incidence of low birth weight babies is lower in Clay County than in neighboring Kansas City, **nonwhite mothers are almost twice as likely to have low birth weight babies than white mothers.** The disparity in neonatal and postnatal mortality rates between white and nonwhite mothers in Clay County is just as stark. **The neonatal mortality rate for nonwhite infants is double that of white infants.**

What does this mean and where do we go from here?

Analysis of the health data, including the feedback obtained through the community health assessment survey and forums, led Clay County Public Health Center to identify health priorities that must be addressed to improve the health and quality of life for Clay County citizens. These included Access to Care, Mental Health, and Chronic Disease.

MCH Priority – Obesity and Prevention of Chronic Disease

Reduce incidence of obesity among Clay County children enrolled in WIC, aged 24-59 months, by 5% by end of FFY 2021.

Why?

- Chronic disease is the number one killer in Clay County.
- The seriousness of this issue is recognized by the community at large as indicated by the high percentage of Northland Community Health Survey respondents who listed obesity (37%), heart attack and stroke (18%), and high blood pressure (10%) as serious community health problems.
- Missouri has the 16th highest rate of adult obesity (BMI of 30 or more) in America at 30.4%. In Clay County, 28% of the population is obese.
- More than 80% of Clay County adults do not eat an adequate diet of fruits and vegetables.
- More than a quarter of adults in the Northland reported that they did not participate in any leisure time physical activity.

The Spectrum of Prevention

The Spectrum of Prevention is a broad framework that includes seven strategies designed to address complex, significant public health problems. These strategies consider the multiple determinants of health and can be used to develop a comprehensive approach to current public health issues. The Spectrum can help coordinate the efforts of different groups working on the same issue by providing a framework and common language for people from diverse backgrounds and organizations to come together, share information, highlight gaps in service, and develop joint plans to achieve public health outcomes. The Spectrum of Prevention framework reminds us that difficult public health problems require a broad range of efforts.

The first years of a child's life are a critical developmental period that can shape immediate and long-term well-being, making prenatal development and early childhood a key window to support healthy development and prevent harm. Resilient communities, safe housing, quality early childhood care and education, and supportive relationships with caregivers can all have a significant impact on immediate health and well-being across the life course. Our work will help advance prevention practice on critical early childhood issues, including access to healthy foods and safe places to play and protection from violence, exploitation, and trauma.

The Spectrum of Prevention	MCH Objectives	Evidence Based Strategies
Influence Policy and Legislation	Increase the number of child care centers or schools who have reviewed their policies for language supporting incorporation of physical activity into daily classroom routines and curriculum.	Compare local child care center physical activity policies with federal guidelines for Head Start programs and encourage adoption of those policies within child care centers
Change Organizational Practices	Increase the number of child care centers or schools who have reviewed their policies for containing language supporting incorporation of physical activity into daily classroom routines and curriculum.	Provide equipment and/or staff education opportunities for Clay County child care centers to facilitate incorporation of physical activity within all aspects of the learning environment.
Foster Coalitions and Networks	Increase the number of individuals / organizations working to decrease childhood and adolescent obesity in Clay County.	Collaborate with community partners to expand physical fitness learning opportunities and community events for families through CCPHC's 12345 Fit-Tastic Family Fun Day. Long-term goal to work with partners to develop sustainable events within individual Clay County communities.
Educate Providers	Increase number of Clay County Childcare Center staff, educated in obesity prevention in children through integration of physical activity and learning within a childcare setting.	Provide continuing education opportunities in nutrition and physical activity learning curricula for Clay County child care staff via in-service opportunities at the health center.
Promote Community Education	Increase community engagement of Clay County residents through targeted Health and Wellness events and activities.	Provide Healthy Eating resources and classes to meet the needs of the diverse Clay County community.
Strengthen Individual Knowledge and Skills	Increase knowledge of children and their families about the importance of daily physical activity through education on incorporation of physical activity and proper nutrition to promote healthy lifestyles and reinforcement of positive health behaviors.	Exercise and/or nutrition classes for WIC participants based on community need within Clay County.

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