

Noland Health Services

MAY 2025
Birmingham Market
Community Health Needs Assessment



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### Welcome to Noland Health Services (Noland)

Noland Health Services (Noland) is a not-for-profit corporation that operates several Long-Term Acute Care Hospitals ("LTACHs"), and ten senior living communities located in various areas throughout the State of Alabama. Noland Health Services (Noland) has a long and rich history of providing health care services and is the premier post-acute healthcare provider in Alabama. Noland Health Services (Noland) has been a pioneer in the development of programs and services for the elderly and chronically ill since its inception.

#### Our Mission

Noland Health Services (Noland) is dedicated to identifying and meeting the healthcare needs of the people and communities we serve by providing innovative, high quality health services and senior living options in a compassionate, efficient, and effective manner.

#### **About Us**

Through its Hospital Division, Noland Health Services (Noland) specializes in establishing innovative long term acute care regional referral hospitals by partnering with premier general acute care hospitals.

The Senior Living Division develops strategically located, comprehensive multi-level senior living communities offering seniors the security of knowing that additional assistance is available, should their needs change.

#### **Program Overview**

Noland Health Services (Noland) LTACHs are regionally based specialty hospitals dedicated to meeting the complex clinical needs of patients who require extended hospital stays. LTACHs are certified by the Centers for Medicare and Medicaid Services ("CMS") and licensed by the state of Alabama as a hospital. Our hospitals are located inside short-term acute care hospitals and are operated as separate legal entities and provide a full array of clinical services.

Noland Hospitals offer comprehensive medical management for medically complex patients. Patients requiring interdisciplinary, acute medical services over an extended period are appropriate for our hospitals.

# Interdisciplinary Treatment Teams

Our team of professionals offer an interdisciplinary approach to each patient's care. Meetings are held weekly to collaborate with the interdisciplinary team to project the type of patient care needed and define expected goals. Progress toward goals is monitored, reviewed, and revised based on the patient's condition. Individualized plans and goals are developed according to patient diagnosis, needs of the patient, acute problems, and acceptable discharge plans.



#### Team members include:

- Physician Advisor
- Case Manager
- Nursing
- Dietary
- Rehab Services
- Pharmacy
- Respiratory
- Wound Care
- Patients and Family

### Noland Health Services (Noland) Inventory

There are many services and programs that are already offered by Noland Health Services (Noland) to residents of the service areas of Noland Health Services (Noland) LTACH hospitals.

#### Specialty Services Offered:

- Ventilator Management/Weaning
- 24/7 Respiratory Therapy
- Daily Physician Visits
- ACLS RN Certified Nursing Staff
- Cardiac Monitoring
- Extensive Wound Management/Wound Vac
- In House Dialysis
- Long-Term IV Antibiotics
- Radiology/Laboratory Services
- TPN/Nutritional Support Services
- Prolonged Surgical Recovery
- Patient and Family Education
- Supplemental Rehabilitation Services (PT, OT, ST)



- Case Management/ Individualized Care Plans
- Discharge Planning

These services include providing treatment for a complete variety of complex medical conditions including, but not limited to:

- Pulmonary Disease
- Infectious Disease
- Congestive Heart Failure
- Uncontrolled Diabetes
- Cardiovascular Disease
- Renal Failure
- Sepsis
- Multi-System Complications
- Spinal Cord Injury
- Head Injury
- Malnutrition
- Wounds
- Neurological Conditions

Source: Nolandhospitals.com



### Process and Methodology

Understanding the community's health needs is important to the Noland Health Services (Noland) mission. To that goal, Noland Health Services (Noland) sought outside assistance from Forvis Mazars. Forvis Mazars is ranked as the eighth largest healthcare management consulting firm in the country by Modern Healthcare and has 950 professionals serving a national footprint. Forvis Mazars demonstrated the necessary capabilities and service offerings to assist Noland Health Services (Noland) on this important project. Forvis Mazars provided the project plan, research and organized the secondary data findings, analyzed, and compiled survey input, and provided support and report of the findings.

Noland Health Services (Noland) identified community health needs by undergoing an assessment process. This process incorporated a comprehensive review by the hospital's Community Needs Assessment Team along with secondary and primary data input using the expertise of Forvis Mazars. The team used several sources of quantitative health, social and demographic data specific to the service area of each facility provided by local public health agencies, health care associations and other data sources. Noland Health Services (Noland) took advantage of this opportunity to collaborate with its administrators, physicians, public health agencies, and local organizations.

Noland sought outside assistance from Forvis Mazars CHNA in this process. Forvis Mazars provided data, organized community input, facilitated priority sessions, and supported the report drafting process.

The community health needs assessment process consists of five steps pictured below:



The "Community Health Needs Assessment 2025" identifies local health and medical needs and provides a plan to indicate how Noland Health Services (Noland)'s hospitals may respond to such needs. This document suggests areas where other local organizations and agencies might work with Noland Health Services (Noland) to achieve desired improvements and illustrates ways, as a medical community, are meeting our obligations to efficiently deliver medical



services.

The data assessment piece was completed during March and April of 2025. In this step, service areas were defined, external data research was completed, and key findings were summarized. As the data assessment was completed, the community input phase was started.

Surveys were distributed among community health professionals, key community members, providers, facility administration, and government representatives. A summary of these findings was created and is included in this report. Prioritization then took place to summarize and overlay data elements with key community input findings.

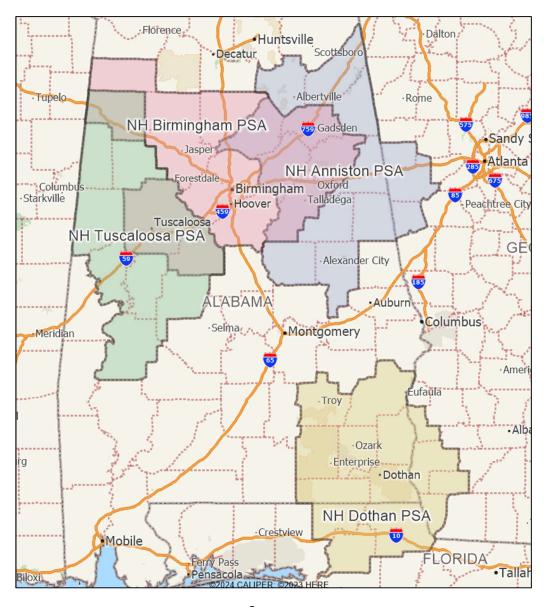
From this prioritization, health priorities were decided based upon the significance of the need to the service area, and Noland Health Services (Noland)'s ability to impact the need. Based on these priorities, each of the four Noland Hospitals decided on which priorities would be included in their implementation strategy and how Noland Health Services (Noland) plans to address the top health needs of their community. These are compiled in the Implementation Strategy document. This report and strategy were then approved by the board and made "widely available" on the Noland Health Services (Noland) website.



### Community Served

Noland Health Services (Noland) specializes in long term acute care hospitals (LTACH) for patients who require care due to chronic diseases or complex medical conditions. Noland Health Services (Noland) hospitals are in Anniston, Birmingham, Dothan, and Tuscaloosa. Noland Health Services (Noland) is the largest provider of long-term acute care in Alabama. LTACHs are innovative regional referral hospitals dedicated to meeting the complex treatment and clinical education needs of patients and families who require extended (exceeding 25 days) or specialty focused stays in a hospital setting.

For this assessment, we have used each facility's patient origin of 80% or greater to determine the counties that are included in its service area. Using a county definition as the service area is crucial for our analysis as much of our secondary data sources are county specific and serve as a comparison tool to other counties, the state of Alabama, and the United States.



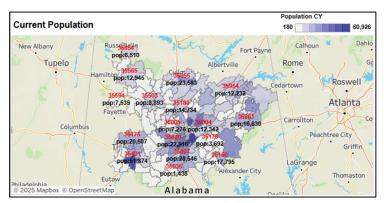


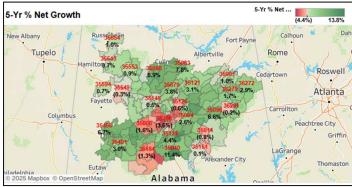


# Data Assessment - Secondary Data

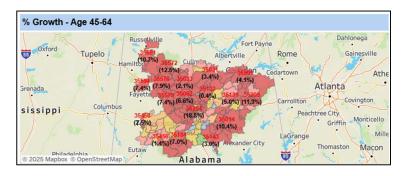
#### **Demographics**

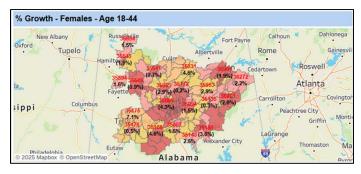
An understanding of the demographics of the residents is a key component of understanding community health. It is also important to understand the differences between the communities. Claritas demographic information was reviewed for each individual county in comparison to the state and national norms. The maps below visual current state of population distribution and future growth areas in the Birmingham Market.

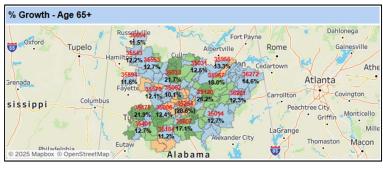




Additionally, the Birmingham Market is projected to see population growth from 2025 to 2030, with St. Clair County (+6.7%) & Shelby County (+6.3%) experiencing the highest percentage increases. Bibb County is the only county with a declining population, at (-1.3%).





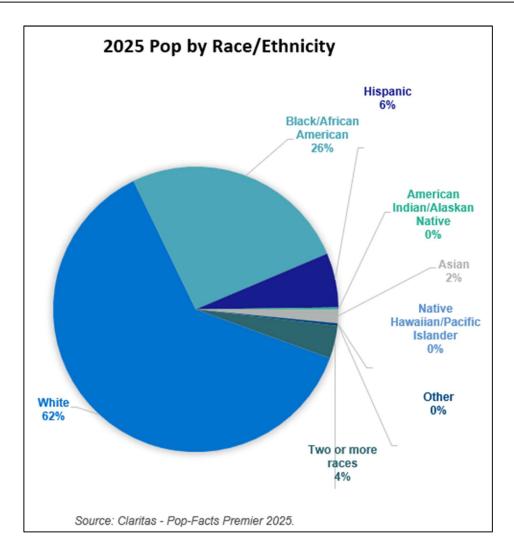






The following table and pie chart display the current and forecasted racial and ethnic diversity in the Birmingham Market.

Race / Ethnicity	Population CY	% of Total Population CY	Population 5-Yr	5-Yr Net Growth	5-Yr % Net Growth
Grand Total	1,808,218	100.0%	1,850,642	42,424	2.3%
White (non Hisp)	1,125,727	62.3%	1,126,092	365	0.0%
Black/African American (non Hisp)	466,610	25.8%	477,062	10,452	2.2%
Hispanic	111,478	6.2%	131,343	19,865	17.8%
Two or More Races (non Hisp)	66,910	3.7%	76,220	9,310	13.9%
Asian (non Hisp)	27,419	1.5%	29,611	2,192	8.0%
Some Other Race (non Hisp)	5,080	0.3%	5,148	68	1.3%
American Indian/Alaskan Native (non His	sp) 4,178	0.2%	4,287	109	2.6%
Native Hawaiian/Pacific Islander (non Hi	sp) 816	0.0%	879	63	7.7%





In the summary table below, there is a disparity between the average median income and the percent of families below poverty compared to the national average. Alabama's median household income (\$64,027) is significantly lower than the U.S. average (\$78,770), with a higher poverty rate of 11.8% compared to the national 8.9%.

Median Househo	old Income by Serv	ice Area			
Service Area	Med HH Inc. CY	Med HH Inc. 5Yr	Med HH Inc. 5Yr Net Growth	Med HH Inc. 5Yr % Net Growth	% Families < Poverty CY
Alabama	\$64,027	\$69,761	\$5,734	9.0%	11.8%
USA	\$78,770	\$85,719	\$6,949	8.8%	8.9%

In the subsequent table, we see that the 45-54 age group represents the largest percentage of households across most income brackets, including the \$125,000-\$149,999 and \$200,000+ranges, showing a concentration of higher-earning households in this population.

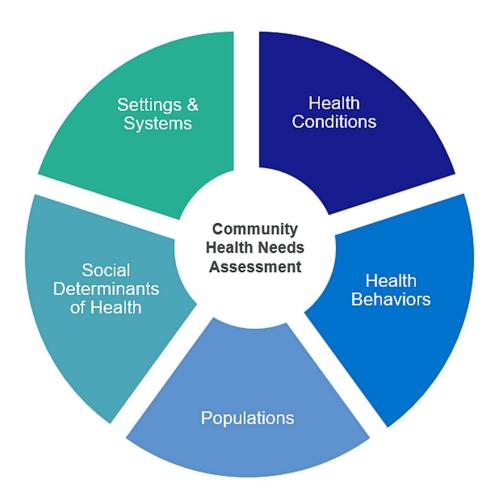
	25-34	35-44	45-54	55-64	65-74	75-84	85p	Totals
Totals	15.3%	17.3%	17.5%	18.8%	17.8%	10.1%	3.3%	100.0%
<\$15,000	14.8%	14.0%	12.4%	19.9%	19.5%	13.6%	5.8%	100.0%
\$15,000 - \$24,999	11.5%	10.6%	12.1%	18.1%	21.9%	17.9%	7.9%	100.0%
\$25,000 - \$34,999	16.8%	14.3%	12.0%	15.8%	20.2%	15.2%	5.6%	100.0%
\$35,000 - \$49,999	17.7%	15.8%	12.6%	15.4%	20.9%	13.3%	4.2%	100.0%
\$50,000 - \$74,999	18.0%	16.7%	15.1%	16.9%	19.8%	10.6%	2.8%	100.0%
\$75,000 - \$99,999	17.6%	18.6%	17.5%	18.2%	17.9%	8.2%	1.9%	100.0%
\$100,000 - \$124,999	16.0%	20.0%	21.9%	20.7%	14.4%	5.8%	1.3%	100.0%
\$125,000 - \$149,999	14.2%	20.6%	24.0%	21.3%	13.6%	5.1%	1.1%	100.0%
\$150,000 - \$199,999	13.1%	22.4%	24.4%	20.7%	13.3%	5.0%	1.1%	100.0%
\$200,000+	8.8%	20.7%	27.6%	23.9%	12.6%	5.2%	1.3%	100.0%



### Other Secondary Data

To present the data in a way that would tell a story of the community needs and identify needs that align with government guidelines, the framework of Healthy People 2030 was selected to guide secondary data gathering and community input. This framework was selected based on its national recognition and governmental relevance.

Within this framework, there are 355 core measurable objectives that were sorted by topic. The five topics have guided discussion and research related to this CHNA. The five topics include Health Conditions, Health Behaviors, Setting and Systems, Social Determinants of Health, and Populations.





# Health Conditions

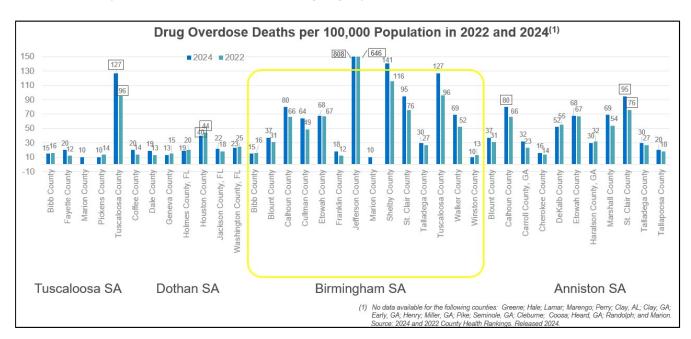
Health Conditions are the prevalent chronic and acute conditions that affect the health of the citizens of the United States. Improvement and achievement of the Healthy People 2030 goals for these conditions will result in the better health of people living with cancer, chronic and mental conditions, infectious diseases, as well as improvement of sexual and reproductive health. The following table displays the Healthy People 2030 measurable. objectives that fall under the health conditions topic.

#### **Healthy People 2030 Objectives**

Addiction	Heart Disease and Stroke*
Arthritis	Infectious Disease
Blood Disorders	Mental Health and Mental Disorders*
Cancer	Oral Conditions
Chronic Kidney Disease*	Osteoporosis
Chronic Pain*	Overweight and Obesity*
Dementias	Pregnancy and Childbirth
Diabetes*	Respiratory Disease
Foodborne Illness	Sensory or Communication Disorders
Health Care – Associated Infections	Sexually Transmitted Infections

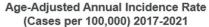
<sup>\*</sup>Objectives that are relevant to Noland Health Services (Noland) Community feedback will be explored further below.

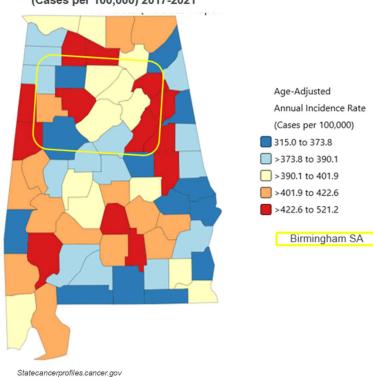
**Addiction:** Healthy People 2030 focuses on preventing substance use disorders and helping people with these disorders get treatment. Strategies to prevent drug and alcohol use include increasing non-opioid pain management and interventions to help people with these disorders. In the Birmingham market, Jefferson County had the highest drug overdose death rate in both 2022 and 2024, rising from 646 to 808 per 100,000, showing a growing crisis. In contrast, Winston County had the lowest rates, declining slightly from 13 to 10 per 100,000.





**Cancer:** Healthy People 2030 focuses on promoting evidence-based cancer screening and prevention strategies — and on improving care and survivorship for people with cancer. The number of cancer cases and deaths for both the Birmingham Market and the state has remained high, with many counties in the region exceeding the state average of 394.9 per 100,000 and some even surpassing the national average of 421.1 per 100,000.





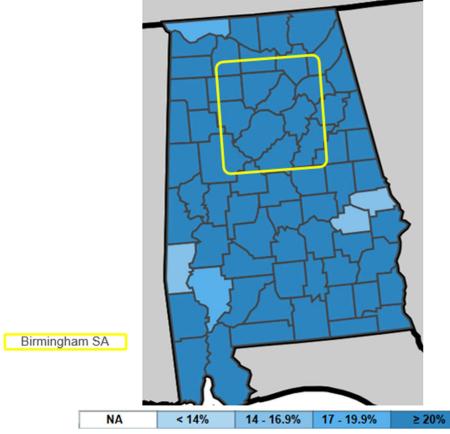
Birmingl	nam Market	:
	Incidence	Mortality
	Rate	Rate
Bibb County	383.9	137.8
Blount County	394.5	146.7
Calhoun County	441.5	151.3
Cullman County	391.8	119.3
Etowah County	432.3	148.9
Franklin County	375.9	151.7
Jefferson County	390.4	134.2
Marion County	378.7	151.5
Shelby County	377.3	100.3
St. Clair County	398.5	123.6
Talladega County	428.2	153.7
Tuscaloosa County	352.6	112.9
Walker County	456.6	149.6
Winston County	373.8	121.3

Top Performers

Low Performers



**Chronic Kidney Disease:** "More than 1 in 7 adults in the United States may have chronic kidney disease (CKD), with higher rates in low-income and racial/ethnic minority groups. And most people with CKD don't know they have it" (Healthy People 2030). The average percentage of adults aged sixty-five and over with diagnosed chronic kidney disease in the Birmingham Market was 28.1%, with Winston County having the lowest prevalence at 22.0%.



Birmingha	am Market
County	Percentage
Bibb	37.2%
Blount	31.0%
Calhoun	25.1%
Cullman	25.6%
Etowah	30.1%
Franklin	27.6%
Jefferson	24.9%
Marion	22.8%
Shelby	27.6%
St. Clair	27.7%
Talladega	25.2%
Tuscaloosa	26.5%
Walker	39.7%
Winston	22.0%

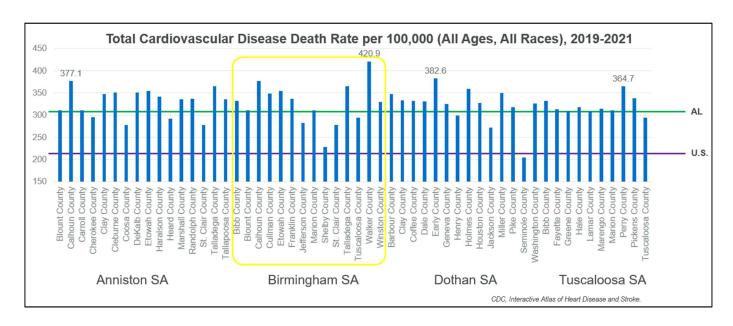
Top Performers

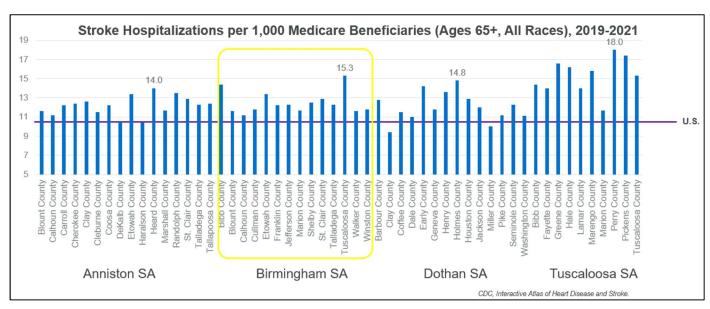
Low Performers

CDC; Kidney Disease Surveillance System, Year of Data Used: 2019.



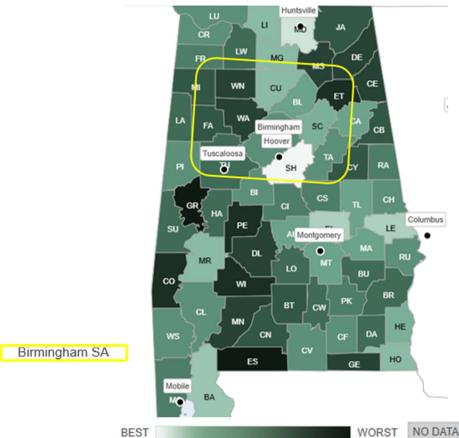
**Heart Disease & Stroke:** Healthy People 2030 focuses on helping people eat healthy and get enough physical activity to reach and maintain a healthy weight. In the Birmingham Market, Walker County had a significantly higher total cardiovascular disease death rate (420.9 per 100,000) compared to the state rate (306.2) and national rate (223.0) showing a critical area for cardiovascular health intervention. Tuscaloosa County had a stroke hospitalization rate of 15.3 per 1,000 Medicare beneficiaries – higher than the national rate of 10.7 – showing a greater stroke prevalence among older adults in the Birmingham Market.







Mental Health and Mental Disorders: About half of all people in the United States will be diagnosed with a mental health disorder at some point in their lifetime. Healthy People 2030 focuses on the prevention, screening, assessment, and treatment of mental disorders and behavioral conditions. The average number of mentally unhealthy days reported in the past 30 days across the Birmingham Market varied. Etowah County reported the highest average at 6.3 days, while Shelby County reported the lowest at 4.9 days.



Birmingha	am Market
County	Days
Bibb	5.8
Blount	5.7
Calhoun	5.7
Cullman	5.5
Etowah	6.3
Franklin	5.9
Jefferson	5.8
Marion	6.1
Shelby	4.9
St. Clair	5.6
Talladega	5.8
Tuscaloosa	6.0
Walker	6.2
Winston	6.2

WORST NO DATA

Top Performers Low Performers

County Health Rankings; 2024 Annual Data Release, Year of Data Used: 2021.



# Health Beh<u>aviors</u>

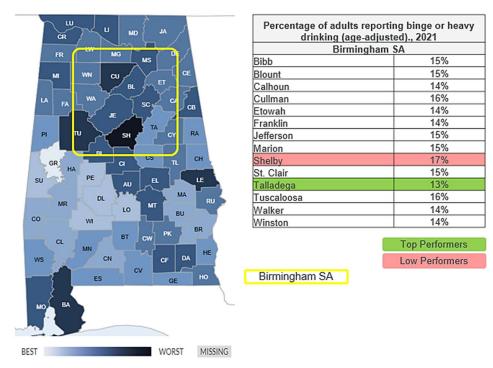
Health Behaviors are the behaviors that influence the health of individuals related to family and personal health, healthcare prevention, substance abuse, violence, as well as other health behaviors such as emergency preparedness and safe food handling. The following table displays the Healthy People 2030 measurable objectives that fall under the health conditions topic.

#### **Healthy People 2030 Objectives**

Child and Adolescent Development	Physical Activity*
Drug and Alcohol Use	Preventative Care*
Emergency Preparedness	Safe Food Handling
Family Planning	Sleep
Healthy Communication*	Tobacco Use
Injury Prevention	Vaccination
Nutrition and Healthy Eating*	Violence Prevention

<sup>\*</sup>Objectives that are relevant to Noland Health Services (Noland) Community feedback will be explored further below.

**Drug and Alcohol Use:** Healthy People 2030 focuses on preventing drug and alcohol misuse and helping people with substance use disorders get the treatment they need. Shelby County had the highest rate of excessive drinking in the Birmingham service area 17% of adults, while Talladega County had the lowest rate at 13%. Comparatively, just over half of the counties in the Birmingham service area are above the state average of 14% while all the counties in the Birmingham service area are below the national average of 18%.

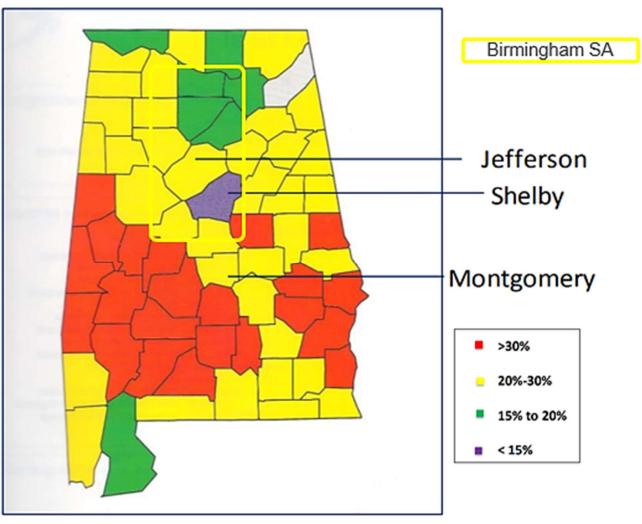


County Health Rankings; Years of Data Used: 2019. Released 2024.





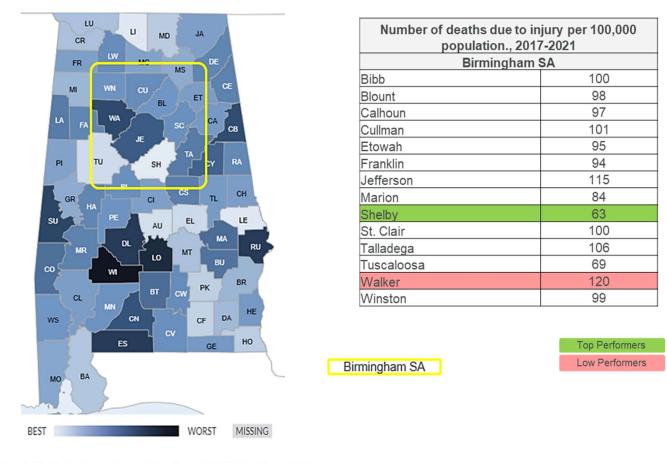
**Health Communication:** Healthy People 2030 focuses on improving health communication so that people can easily understand and act on health information. In Alabama, Shelby County has the lowest percentage of adults with Level 1 Literacy Skills, while Jefferson County is in the second highest percentage range (20-30%). Level 1 Literacy Skills indicate reading at or below a fifth-grade level. Improving literacy presents an opportunity to enhance outcomes for individuals and families across the state.



 $A labama\,Department\,of\,Public\,Health,\,2025; The\,State\,of\,Literacy\,in\,Georgia\,and\,Florida,\,October\,2023.$ 



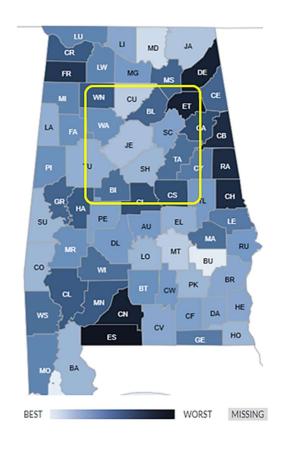
**Injury Prevention:** Healthy People 2030 focuses on preventing intentional and unintentional injuries, including injuries that cause death. Walker County had the highest rate of deaths due to injury in the Birmingham service area at 120 per 100,000 population, while Shelby County had the lowest at 63.



County Health Rankings; Years of Data Used: 2017-2021. Released 2024.



**Preventative Care:** Healthy People 2030 focuses on increasing preventive care for people of all ages. Cullman County led the Birmingham service area with the highest mammography screening rates among female Medicare enrollees ages 65-74 at 47%, while Etowah County had the lowest rates at 29%.



	74 who received an annual mammography screening., 2021			
Birmingham SA				
Bibb	36%			
Blount	35%			
Calhoun	33%			
Cullman	47%			
Etowah	29%			
Franklin	31%			
Jefferson	45%			
Marion	38%			
Shelby	44%			
St. Clair	41%			
Talladega	36%			
Tuscaloosa	41%			
Walker	39%			
Winston	34%			

Birmingham SA

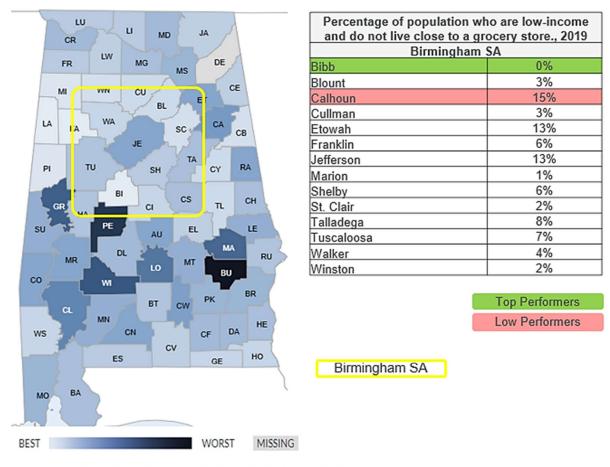
Top Performers

Low Performers

County Health Rankings; Years of Data Used: 2021. Released 2024.



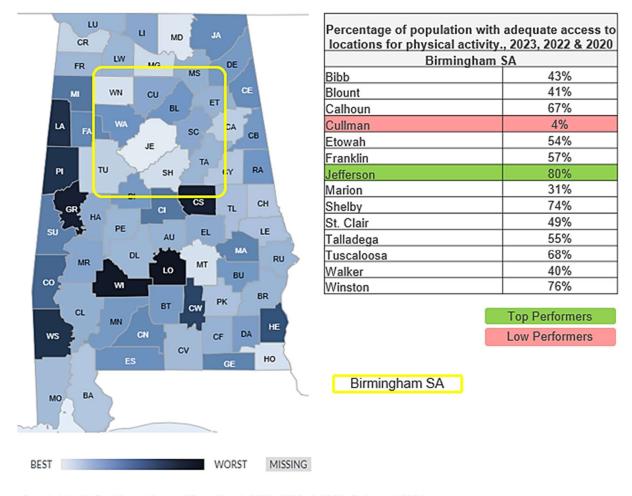
**Nutrition and Healthy Eating:** Healthy People 2030 focuses on improving access to healthy foods and addressing food insecurity. This includes reducing food insecurity and hunger, increasing consumption of fruits, vegetables and whole grains, and promoting safe food handling practices. Within the Birmingham service area, Calhoun County had the highest rate of population who are low-income and do not live close to a grocery store at 15% while Bibb County had the lowest rate at 0%.



County Health Rankings; Years of Data Used: 2019. Released 2024.



**Physical Activity:** Healthy People 2030 focuses on improving the health and well-being of people of all ages to obtain sufficient aerobic and muscle-strengthening activity. Within the Birmingham service area, Cullman County had the lowest rate of population with adequate access to locations for physical activity at 4% while Jefferson County had the highest rate at 80%.



County Health Rankings; Years of Data Used: 2023, 2022, & 2020. Released 2024.



# Setting and Systems

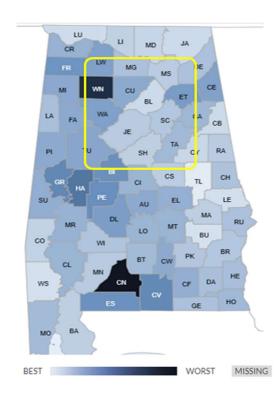
Setting and Systems provide insights into the infrastructure that influences the health outcomes and behaviors of populations. The availability of healthcare resources outside of the traditional healthcare settings play a vital role in the overall health of individuals. The following table displays the Healthy People 2030 measurable objectives that fall under the health conditions topic.

**Healthy People 2030 Objectives** 

	, i
Community	Hospital and Emergency Services*
Environmental Health	Housing and Homes
Global Health	Public Health Infrastructure
Health Care*	Schools
Health Insurance*	Transportation
Health IT	Workplace
Health Policy	

<sup>\*</sup>Objectives that are relevant Noland Health Services (Noland) Community feedback will be explored further below.

**Hospital and Emergency Services:** Healthy People 2030 focuses on reducing preventable hospital visits and improving hospital care, including follow-up services. Winston County had the highest rate of hospital stays for ambulatory-care sensitive conditions in the Birmingham service area at 6,652 per 100,000 Medicare enrollees, while Blount County had the lowest rate at 2,499.

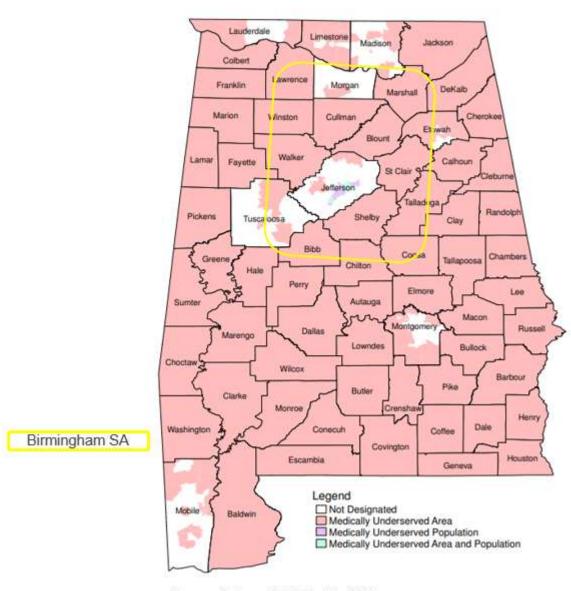


enrollees., 2021 Birmingham SA		
Blount	2,499	
Calhoun	3,491	
Cullman	3,896	
	4,350	
ranklin	4,590	
lefferson	2,957	
Marion	3,984	
Shelby	2,801	
St. Clair	3,045	
「alladega	3,432	
Tuscaloosa	4,030	
Valker	4,225	
Vinston	6,652	

County Health Rankings; Years of Data Used: 2021. Released 2024.



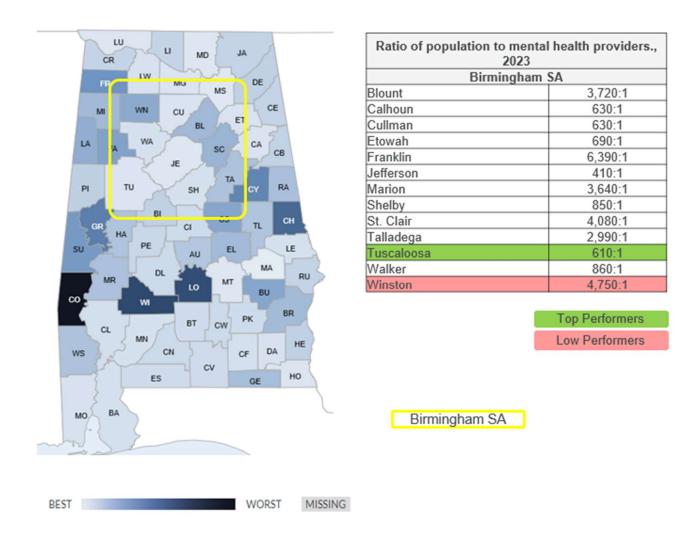
**Health Care:** The majority of Alabama is designated as a Medically Underserved Area. Medically Underserved Areas (MUAs) have a shortage of primary care services and are based on the Index of Medical Underservice (IMU). IMU is calculated based on the population of provider ratio, percent of population below the federal poverty level, percent of population over 65, and infant mortality rate. The majority of the counties located within the Birmingham service area are MUAs. In addition, Jefferson County has portions of the county that are designated as "Medically Underserved Population" and "Medically Underserved Area and Population".



Source: Alabama Public Health, 2024.



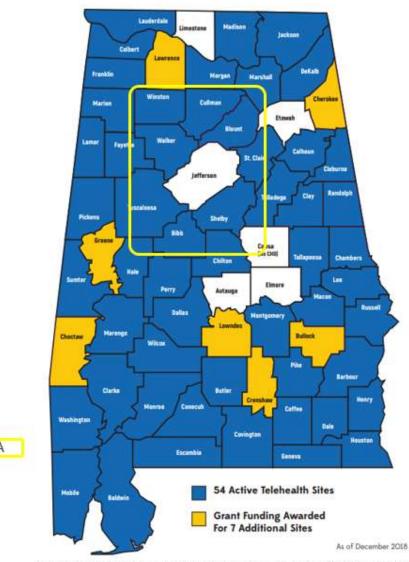
In the Birmingham market, Winston County had the highest population-to-primary care physician ratio at 4,750:1 – compared to the U.S. average of 1,330:1 – showing a shortage of primary care access. In contrast, Tuscaloosa County had the most favorable access at 610.1:1, performing better than the nation.



County Health Rankings; Years of Data Used: 2023. Released 2024.



**Health IT:** Healthy People 2030 focuses on helping health care providers and patients access health IT and use it more effectively. People who can access electronic health information can better track and manage their health care. Through the AL Department of Public Health, telehealth services are available in fifty-four of the sixty-seven counties. Jefferson and Etowah counties are the only counties in the Birmingham service area that do not have an active telehealth site through ALDPH.

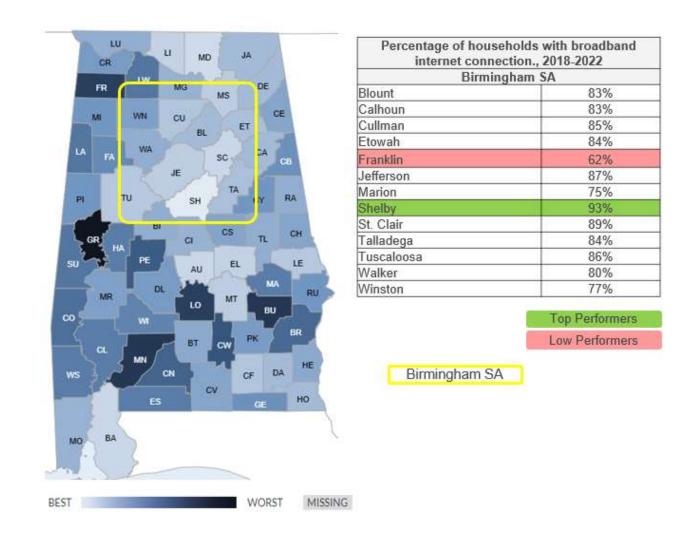


Birmingham SA

AL Public Health Telehealth Network Overview. December 2018; Telehealth.HHS.gov, 2025.



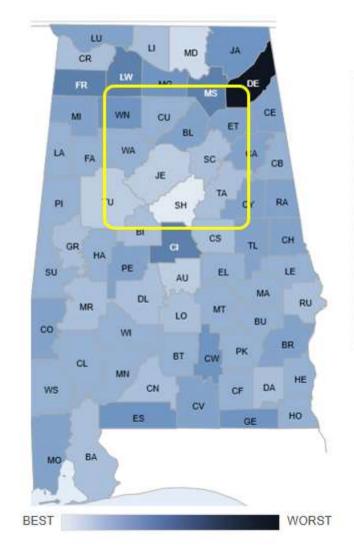
In the Birmingham market, Shelby County had the highest percentage of households with a broadband internet connection at 93%. In contrast, Franklin County had the lower percentage of households with a broadband internet connection at 62%.



County Health Rankings; Years of Data Used: 2018-2022. Released 2024.



**Health Insurance:** Healthy People 2030 focuses on improving health by increasing medical, dental, and prescription drug insurance coverage. About thirty million people in the United States do not have health insurance and people without insurance are less likely to get the health care services and medications they need. In addition, many individuals who are underinsured face similar barriers due to high out-of-pocket costs or limited coverage. Franklin County had the highest percentage of population under age 65 without health insurance in the Birmingham service area at 15%, while Shelby County had the lowest at 8%.



#### Birmingham SA

	ılation under age 65 İnsurance., 2021		
Birmingham SA			
Blount	13%		
Calhoun	13%		
Cullman	12%		
Etowah	13%		
Franklin	15%		
Jefferson	14%		
Marion	13%		
Shelby	8%		
St. Clair	11%		
Talladega	11%		
Tuscaloosa	10%		
Walker	12%		
Winston	14%		

Top Performers

Low Performers

County Health Rankings; Years of Data Used: 2021. Released 2024.



# Social Determinants of Health

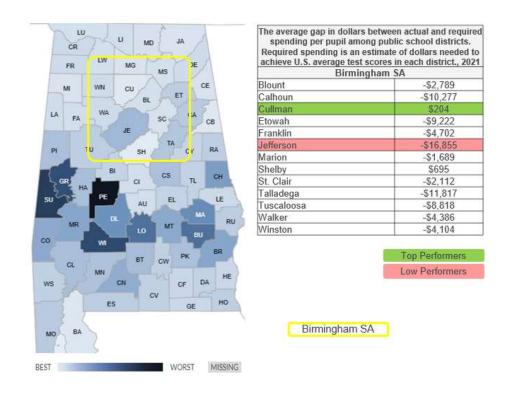
Social Determinants of Health describe the socioeconomic factors that play a role in the level of health people can achieve. This section looks at aspects outside of healthcare such as economic stability, education, and violence in the community. The following table displays the Healthy People 2030 measurable objectives that fall under the health conditions topic.

Healthy	/ People	2030 Ob	iectives

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

<sup>\*</sup>Objectives that are relevant to Noland Health Services (Noland) Community feedback will be explored further below

**Education Access and Quality:** Healthy People 2030 focuses on providing high-quality educational opportunities for children and adolescents. People with higher levels of education are more likely to be healthier and live longer. Additionally, education access and quality impact the overall health literacy of the community. The average gap in Alabama (-\$7,912) is significantly below the U.S. average (-\$634), indicating underfunding in public school districts statewide. Jefferson County had the largest shortfall at -\$16,855, while Cullman County had a small surplus of \$204, outperforming the state of Alabama.

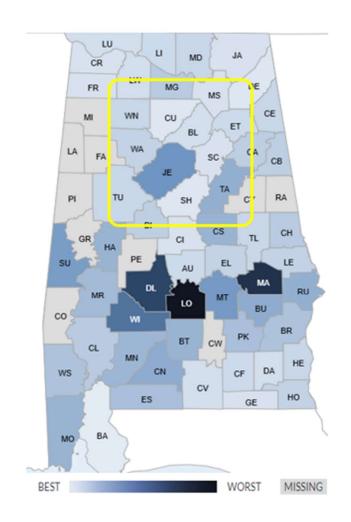


County Health Rankings; Years of Data Used: 2021. Released 2024.





**Neighborhood and Built Environment:** Healthy People 2030 focuses on improving health and safety in the places where people live, work, learn, and play. Talladega County had the highest homicide death rate in the Birmingham service area at 18 per 100,000 population, exceeding the U.S. average of 15. In contrast, Cullman and Shelby Counties had the lowest rates at 4 per 100,000.



Number of deaths due to homicide per 100,000 population., 2015-2021 Birmingham SA			
Blount	6		
Calhoun	10		
Cullman	4		
Etowah	7		
Franklin	5		
Jefferson	Not available		
Marion	Not available		
Shelby	4		
St. Clair	5		
Talladega	18		
Tuscaloosa	8		
Walker	9		
Winston	8		

Top Performers

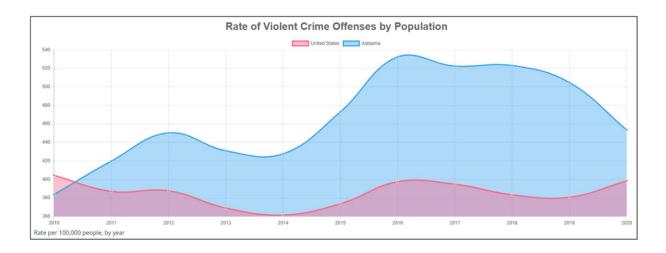
Low Performers

Birmingham SA

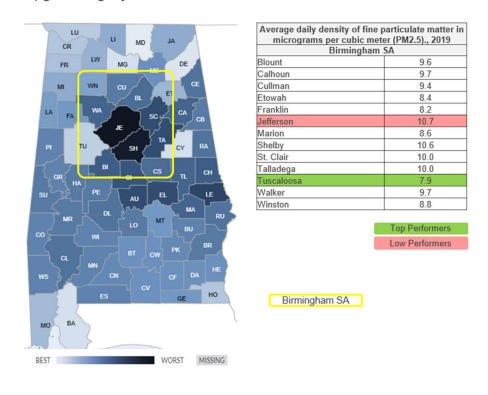
County Health Rankings; Years of Data Used: 2015-2021. Released 2024.



In 2020, the rate of violent crime in Alabama was 453.6 per 100,000 people, higher than the national rate of 398.5. The 20-29 age group is the most common age of both offenders and victims of violent crimes. Healthy People 2030 have a goal to reduce the rate of minors and young adults committing violent crimes to 199.2 per 100,000.



Alabama's average PM2.5 level (9.3 $\mu$ g/m3) is significantly higher than the U.S. average (7.4 $\mu$ g/m3), indicating worse air quality across the state. Jefferson County had the highest pollution levels at 10.7  $\mu$ g/m3 in the Birmingham service area, while Tuscaloosa County had the lowest at 7.9  $\mu$ g/m3, slightly above the national benchmark.



County Health Rankings; Years of Data Used: 2021. Released 2024.



# **Populations**

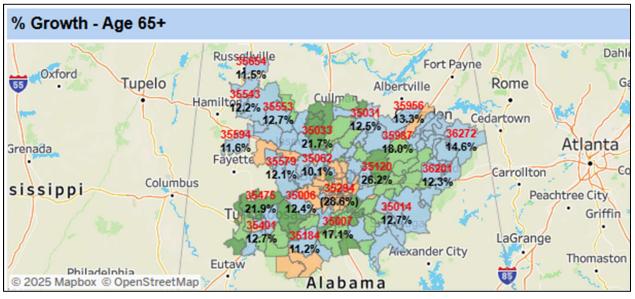
Populations define the populations and demographics that align with other Healthy People 2030 objectives. The population information looks at age groups, gender, race and ethnicity, and disability status. Health and wellness metrics are also identified related to specific populations. The following table displays the Healthy People 2030 measurable objectives that fall under the health conditions topic.

**Healthy People 2030 Objectives** 

Adolescents	Older Adults*
Children	Parents or Caregivers*
Infants	People with Disabilities
LGBT	Women
Men	Workforce

<sup>\*</sup>Objectives that are relevant to Noland Health Services (Noland) Community feedback will be explored further below

**Older Adults:** The Healthy People 2030 focuses on reducing health problems and improving quality of life for older adults. The 65+ age group has the highest projected growth of all other age groups. The 65+ age group is projected to grow by 13% across the service area, with the Anniston Market (14.8%) experiencing the highest increase.



5.1% - 10% Growth	>20% Growth
10.1 - 15% Growth	
15.1 - 20% Growth	

65+ Age Group			
	2025	2030	Total 5-YR
	Population	Population	% Growth
Anniston Service Area	338,003	381,392	12.8%



**Parents or Caregivers:** Healthy People 2030 focuses on ways parents and caregivers can help keep the people they care for — and themselves — healthy and safe. In 2021, about thirty-eight million family caregivers in the United States provided an estimated thirty-six billion hours of care to an adult with limitations in daily activities. The estimated economic value of their unpaid contributions was approximately \$600 billion.

State	State Population	Number of Caregivers	Number of Care Hours (millions)	Value per Hour	Economic Value (millions)
Alabama 5.05M 700,000		660	\$12.66	\$8,300	
National Est	imates (2019), 2019	Adjusted to	Adjusted Number of Caregivers (2019)	Average Hours per Caregiver per Week	Total Adjusted Number of Care Hours
			41.6M	18	\$36.7B

AARP PUBLIC POLICY INSTITUTE. Insight on the Issues 1581602, March 2023.

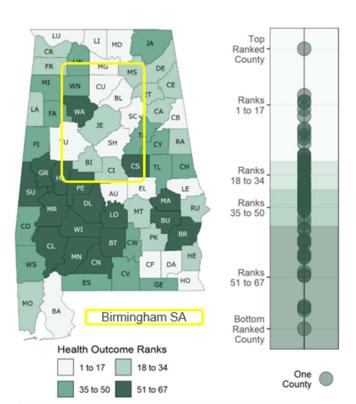
In Alabama, 700,000 family caregivers provided 660 million hours of unpaid care in 2021, with an estimated economic value of \$8.3B at \$12.66 per hour, one of the lowest rates in the nation.



## County Ranking

In addition to reviewing the data, overall county health rankings were utilized. The County Health Rankings & Roadmaps program is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. Measures for this are based on a wide variety of data sources, including the Bureau of Labor Statistics, National Center for Healthcare Statistics, and Behavioral Risk Factor Surveillance System survey data, and other units of the Centers for Disease Control and Prevention, etc. This allows us to understand how each county is performing against another within the state.

**Health Outcomes:** Healthy People 2030 focuses on health outcomes as a measure of how healthy a county is currently. This measure accounts for numerous factors that reflect mental and physical well-being of the community through metrics that impact both length and quality of life. In Alabama, there are sixty-seven counties—where the healthiest county ranks at #1 (Shelby County located within the Birmingham service area), and the least healthy county ranks at #67.



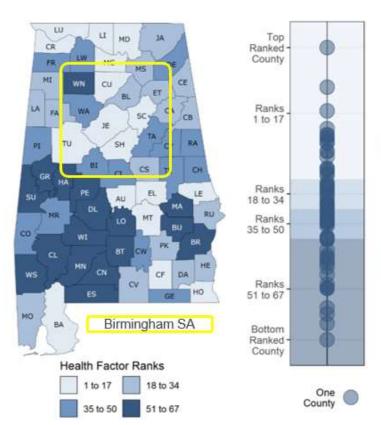
,	tcomes Rankings for the nties in Alabama.
Birmin	gham SA
Blount	15
Calhoun	29
Cullman	16
Etowah	33
Franklin	25
Jefferson	19
Marion	38
Shelby	1
St. Clair	11
Talladega	48
Tuscaloosa	10
Walker	58
Winston	36

The overall rankings in health outcomes represent how healthy counties are within the state. The healthiest county in the state is ranked #1. The ranks are based on two types of measures: how long people live and how healthy people feel while alive.

County Health Rankings; 2022 State Report Alabama.



**Health Factors:** The overall ranking in health factors represents what influences the health of a county. They are estimates of the future health of the county in comparison to other counties. The ranks are based on four types of measures: health behaviors, clinical care, social and economic, and physical environment factors.



Rirming	ham SA
Blount	24
Calhoun	22
Cullman	16
Etowah	25
Franklin	46
Jefferson	5
Marion	34
Shelby	1
St. Clair	13
Talladega	42
Tuscaloosa	8
Walker	36
Winston	52

The overall rankings in health factors represent what influences the health of a county. They are an estimate of the future health of counties as compared to other counties within a state. The ranks are based on four types of measures: health behaviors, clinical care, social and economic, and physical environment factors.

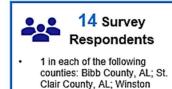
County Health Rankings; 2022 State Report Alabama, Florida, Georgia.



# Community Input Findings

The last and most essential element of the Community Needs Assessment is community input. Noland Health Services (Noland) facilitated the distribution of a community health survey shared with key hospital administrators, physicians, community members, those with knowledge/expertise in public health, and those serving underserved and chronic disease populations. During this phase, the team deployed a survey to gain the community's knowledge.

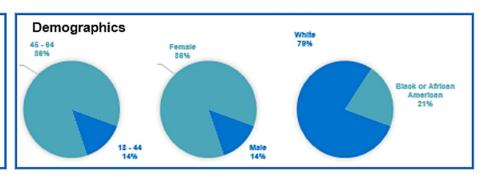
There were 14 out of 69 survey respondents who completed the survey across the Birmingham service area. Below is a summary of the feedback distribution.



- 6 Jefferson County, AL
- · 3 Shelby County, AL

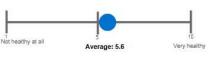
County, AL

· 2 Tuscaloosa County, AL



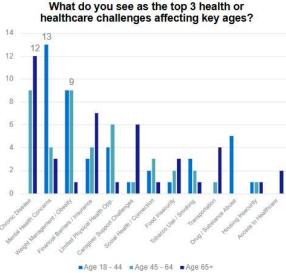
### Community Input Findings

On a scale of 1 - 10, how would you rate the overall health of your community?



One Word Describing the Health of the Community:

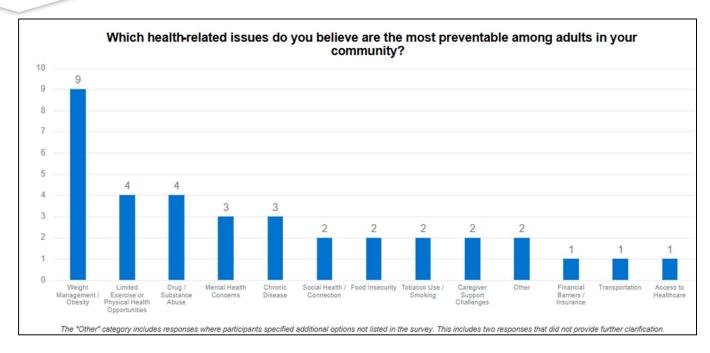




#### What are the biggest barriers to achieving greater health in the community among adults?

- Financial & Insurance Barriers: Includes cost of healthcare and lack of insurance
- Knowledge & Education: Lack of knowledge, understanding, or education about health
- Motivation & Behavioral Commitment: Low motivation, effort, or personal drive toward health goals
- Lifestyle & Culture: Broader lifestyle patterns including food, activity, and cultural habits
- Employment & Decision-Making: Challenges related to work, housing, and life choices that affect health





Respondents were asked what they viewed as the top three health or healthcare challenges affecting key ages facing the Birmingham Market and its residents. They were then asked to elaborate on certain barriers and health of the community.

Based on the feedback provided in the Community Input phase of the CHNA, the following barriers and opportunities were identified when evaluating the health of the Birmingham service area.

#### **Barriers**

- Financial & Insurance Barriers: Includes lack of insurance, high cost of care, prescriptions, or healthy food.
- Knowledge & Education: Lack of knowledge, understanding, or education about health.
- Motivation & Behavioral Commitment: Low motivation, effort, or personal drive toward health goals.
- Lifestyle & Culture: Broader lifestyle patterns including food, activity, and cultural habits.
- Employment & Decision-Making: Challenges related to work, housing, and life choices that affect health.

#### Most Preventable Health Related Issue

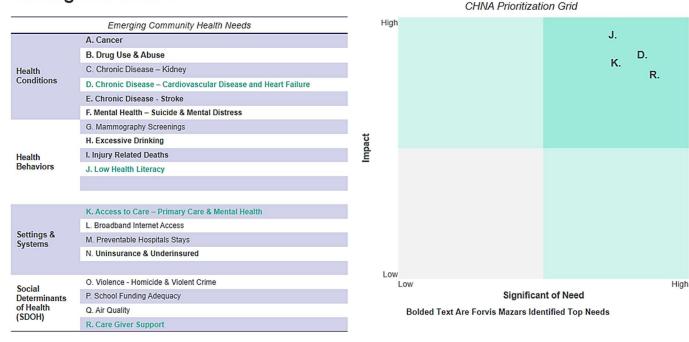
- Weight Management / Obesity
- Limited Exercise or Physical Health Opportunities
- Drug / Substance Abuse
- Mental Health Concerns
- Chronic Disease

Once the issues/community needs were identified and organized, a prioritization session was held with members of the Community Health Needs Assessment Steering Committee. This session resulted in the development of a Prioritization Table. The priorities were ranked based on significance of the community need, Noland Health Services (Noland) ability to impact the need, and community perceived need. This process identified the top prioritized health issues for the Birmingham Market that Noland Health Services (Noland) feels it has an ability to impact at certain levels.



# Prioritized 2025 Community Health Needs

### Birmingham Market



From this prioritization table, the Noland Health Services (Noland) team identified community needs that would be the basis for the development of the implementation strategy. Based on the secondary quantitative data, community input, the needs evaluation process, and the prioritization of these needs, the following community needs have been selected for implementation.

- Chronic Disease / Cardiovascular Disease and Heart Failure Chronic disease is a prioritized health need because its prevalence is prominent in the Birmingham market. The poor physical health practices of individuals have accelerated the development of certain illnesses. Chronic conditions impacting this population include obesity, high blood pressure, diabetes, depression, heart disease, and cancer. Limited access to healthy food, poor lifestyle choices, mental health, and lack of exercise all contribute to the ongoing community health issues seen. Noland Health Services (Noland) seeks to align initiatives around Chronic Disease with the community health prioritize identified by the state of Alabama to maximize impact and align resources.
- Low Health Literacy Low health literacy is a prioritized health need because it significantly impacts individuals' ability to navigate the healthcare system and make informed decisions about their health. In the Birmingham market, a notable portion of the population demonstrates Level 1 literacy skills, indicating reading comprehension at or below a 5th-grade level. This contributes to poor health outcomes, medication errors, reduced preventive care utilization, and higher rates of hospitalization. Factors such as limited education, poverty, and inadequate access to clear and culturally appropriate health information all play a role. Noland Health Services (Noland) seeks to align initiatives



around Health Literacy with the community health priorities identified by the state of Alabama to maximize impact and align resources.

- Access to Healthcare / Primary Care & Mental Health Providing better access points to healthcare in this community is vital to enhancing the quality of life for the Birmingham service area citizens. The resources that the community and Noland Health Services (Noland) provide can have a significant impact on population health outcomes. If more resources are available in the community, the social and physical environments within the community will help to promote good health for all. For the Birmingham market, the promotion of health education, increased provider access, and insurance literacy will help to improve the overall health of the community.
- Care Giver Support Parents and caregivers play a crucial role in the health and wellbeing of those they care for, from children to older adults and individuals with health conditions or disabilities. Noland Health Services (Noland) can support care givers by providing resources, services, and programs that improve the well-being of both the care giver and those they care for, including children and aging parents.

Noland Health Services (Noland) Community Needs Assessment Steering Committee will initiate the development of implementation strategies for each health priority identified above. This implementation strategy will be executed in collaboration with community partners and health issue experts over the next three years. The following key elements will be used in developing their implementation strategy:

- Identify what other local organizations are doing to address the health priority.
- Develop support and participation for these approaches to address the health need.
- Develop specific and measurable goals so that the effectiveness of these approaches can be measured.
- Develop detailed work plans.
- Communicate with the assessment team and ensure appropriate coordination with other efforts currently underway to address the issue.

The team will utilize and build upon the monitoring method developed in the conclusion of the prior CHNA to provide status updates and outcome notifications of these efforts to improve community health. Noland Health Services (Noland) is committed to conducting another health needs assessment in three years.



# Appendix A – Alabama Data Sources

Focus Area	Measure	Description	Weight	Source	Year(s)	Top Performers	US Overall
HEALTH OUT		200.101.	Weight	Jouree	· cui (5)	Terroriners	o verun
Length of Life	Premature Death*	Years of potential life lost before age 75 per 100,000 population (age-adjusted).	50%	National Center for Health Statistics - Natality and Mortality Files; Census Population Estimates Program	2019- 2021	6,000	8,000
Quality of Life	Poor or Fair Health	Percentage of adults reporting fair or poor health (ageadjusted).	10%	Behavioral Risk Factor Surveillance System	2021	13%	14%
	Poor Physical Health Days	Average number of physically unhealthy days reported in past 30 days (age-adjusted).	10%	Behavioral Risk Factor Surveillance System	2021	3.1	3.3
	Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted).	10%	Behavioral Risk Factor Surveillance System	2021	4.4	4.8
	Low Birthweight*	Percentage of live births with low birthweight (< 2,500 grams).	20%	National Center for Health Statistics - Natality Files	2016- 2022	6%	8%
HEALTH FACT	ORS						
HEALTH BEHAV	IORS						
Tobacco Use	Adult Smoking	Percentage of adults who are current smokers (ageadjusted).	10%	Behavioral Risk Factor Surveillance System	2021	14%	15%
Diet and Exercise	Adult Obesity	Percentage of the adult population (age 18 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m2 (age-adjusted).	5%	Behavioral Risk Factor Surveillance System	2021	32%	34%
	Food Environment Index	Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best).	2%	USDA Food Environment Atlas; Map the Meal Gap from Feeding America	2019 & 2021	8.9	7.7
	Physical Inactivity	Percentage of adults age eighteen and over reporting no leisure-time physical activity (age-adjusted).	2%	Behavioral Risk Factor Surveillance System	2021	20%	23%
	Access to Exercise Opportunities	Percentage of population with adequate access to locations for physical activity.	1%	ArcGIS Business Analyst and ArcGIS Online; YMCA; US Census TIGER/Line Shapefiles	2023, 2022 & 2020	90%	84%
Alcohol and Drug Use	Excessive Drinking	Percentage of adults reporting binge or heavy drinking (ageadjusted).	2.5%	Behavioral Risk Factor Surveillance System	2021	13%	18%
	Alcohol-Impaired Driving Deaths	Percentage of driving deaths with alcohol involvement.	2.5%	Fatality Analysis Reporting System	2017- 2021	10%	26%
Sexual Activity	Sexually Transmitted Infections+	Number of newly diagnosed chlamydia cases per 100,000 population.	2.5%	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2021	151.7	495.5
	Teen Births*	Number of births per 1,000 female population ages 15-19.	2.5%	National Center for Health Statistics - Natality Files; Census Population Estimates Program	2016- 2022	9	17



Access to Care	Uninsured	Percentage of population under age 65 without health insurance.	5%	Small Area Health Insurance Estimates	2021	6%	10%
	Primary Care Physicians	Ratio of population to primary care physicians.	3%	Area Health Resource File/American Medical Association	2021	1,030:1	1,330::
	Dentists	Ratio of population to dentists.	1%	Area Health Resource File/National Provider Identifier Downloadable File	2022	1,180:1	1,360::
	Mental Health Providers	Ratio of population to mental health providers.	1%	CMS, National Provider Identification	2023	230:1	320:1
Quality of Care	Preventable Hospital Stays*	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.	5%	Mapping Medicare Disparities Tool	2021	1,558	2,681
	Mammography Screening*	Percentage of female Medicare enrollees ages 65-74 who received an annual mammography screening.	2.5%	Mapping Medicare Disparities Tool	2021	52%	43%
	Flu Vaccinations*	Percentage of fee-for-service (FFS) Medicare enrollees who had an annual flu vaccination.	2.5%	Mapping Medicare Disparities Tool	2021	53%	46%
SOCIAL & ECON	OMIC FACTORS			'			
Education	High School Completion	Percentage of adults ages twenty-five and over with a high school diploma or equivalent.	5%	American Community Survey, 5-year estimates	2018- 2022	94%	89%
	Some College	Percentage of adults ages 25-44 with some post-secondary education.	5%	American Community Survey, 5-year estimates	2018- 2022	74%	68%
Employment	Unemployment	Percentage of population ages sixteen and older unemployed but seeking work.	10%	Bureau of Labor Statistics	2022	2.30%	3.70%
Income	Children in Poverty*	Percentage of people under age 18 in poverty.	7.5%	Small Area Income and Poverty Estimates; American Community Survey, 5-year estimates	2022 & 2018- 2022	10%	16%
	Income Inequality	Ratio of household income at the 80th percentile to income at the 20th percentile.	2.5%	American Community Survey, 5-year estimates	2018- 2022	3.7	4.9
Family and Social Support	Children in Single- Parent Households	Percentage of children that live in a household headed by a single parent.	2.5%	American Community Survey, 5-year estimates	2018- 2022	13%	25%
	Social Associations	Number of membership associations per 10,000 population.	2.5%	County Business Patterns	2021	18	9.1
Community Safety	Injury Deaths*	Number of deaths due to injury per 100,000 population.	5.0%	National Center for Health Statistics - Mortality Files; Census Population Estimates Program	2017- 2021	64	80
PHYSICAL ENVI	RONMENT						
Air and Water Quality	Air Pollution - Particulate Matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5).	2.5%	Environmental Public Health Tracking Network	2019	5	7.4



	Drinking Water Violations+	Indicator of the presence of health-related drinking water violations. 'Yes' indicates the presence of a violation, 'No' indicates no violation.	2.5%	Safe Drinking Water Information System	2022		
Housing and Transit	Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.	2%	Comprehensive Housing Affordability Strategy (CHAS) data	2016- 2020	8%	17%
	Driving Alone to Work*	Percentage of the workforce that drives alone to work.	2%	American Community Survey, 5-year estimates	2018- 2022	70%	72%
	Long Commute - Driving Alone	Among workers who commute in their car alone, the percentage that commute more than 30 minutes.	1%	American Community Survey, 5-year estimates	2018- 2022	17%	36%

<sup>\*</sup>Indicates subgroup data by race and ethnicity is available; + Not available in all states.



Focus Area	Measure	Description	Source	Year(s)
HEALTH OUT	OMES			
Length of Life	Life Expectancy*	Average number of years people are expected to live.	National Center for Health Statistics - Natality and Mortality Files; Census Population Estimates Program	2019- 2021
	Premature Age- Adjusted Mortality*	Number of deaths among residents under age 75 per 100,000 population (age-adjusted).	National Center for Health Statistics - Natality and Mortality Files; Census Population Estimates Program	2019- 2021
	Child Mortality*	Number of deaths among residents under age 20 per 100,000 population.	National Center for Health Statistics - Mortality Files; Census Population Estimates Program	2018- 2021
	Infant Mortality*	Number of infant deaths (within 1 year) per 1,000 live births.	National Center for Health Statistics - Natality and Mortality Files	2015- 2021
Quality of Life	Frequent Physical Distress	Percentage of adults reporting 14 or more days of poor physical health per month (age-adjusted).	Behavioral Risk Factor Surveillance System	2021
	Frequent Mental Distress	Percentage of adults reporting 14 or more days of poor mental health per month (age-adjusted).	Behavioral Risk Factor Surveillance System	2021
	Diabetes Prevalence	Percentage of adults aged twenty and above with diagnosed diabetes (age-adjusted).	Behavioral Risk Factor Surveillance System	2021
	HIV Prevalence+	Number of people aged 13 years and older living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population.	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2021
HEALTH FACT	ORS			
HEALTH BEHAV	IORS			
Diet and	Food Insecurity	Percentage of population who lack adequate access to food.	Map the Meal Gap	2021
Exercise	Limited Access to Healthy Foods	Percentage of population who are low-income and do not live close to a grocery store.	USDA Food Environment Atlas	2019
Alcohol and Drug Use	Drug Overdose Deaths*	Number of drug poisoning deaths per 100,000 population.	National Center for Health Statistics - Mortality Files; Census Population Estimates Program	2019- 2021
Other Health Behaviors	Insufficient Sleep	Percentage of adults who report fewer than 7 hours of sleep on average (age-adjusted).	Behavioral Risk Factor Surveillance System	2020
CLINICAL CARE				
Access to Care	Uninsured Adults	Percentage of adults under age 65 without health insurance.	Small Area Health Insurance Estimates	2021
	Uninsured Children	Percentage of children under age 19 without health insurance.	Small Area Health Insurance Estimates	2021
	Other Primary Care Providers	Ratio of population to primary care providers other than physicians.	CMS, National Provider Identification	2023
SOCIAL & ECON	OMIC FACTORS			
Education	High School Graduation+	Percentage of ninth-grade cohort that graduates in four years.	EDFacts	2020- 2021
	Disconnected Youth	Percentage of teens and young adults ages 16-19 who are	American Community	2018-



	Reading Scores*+	Average grade level performance for third graders on English Language Arts standardized tests.	Stanford Education Data Archive	2018
	Math Scores*+	Average grade level performance for third graders on math standardized tests.	Stanford Education Data Archive	2018
	School Segregation	The extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. The index ranges from 0 to 1 with lower values representing a school composition that approximates race and ethnicity distributions in the student populations within the county, and higher values representing more segregation.	National Center for Education Statistics	2022- 2023
	School Funding Adequacy+	The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district.	School Finance Indicators Database	2021
Income	Gender Pay Gap	Ratio of women's median earnings to men's median earnings for all full-time, year-round workers, presented as	American Community Survey, 5-year estimates	2018- 2022
	Median Household Income*	The income where half of households in a county earn more and half of households earn less.	Small Area Income and Poverty Estimates; American Community Survey, 5-year estimates	2022 8 2018- 2022
	Living Wage	The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children.	The Living Wage Institute	2023
	Children Eligible for Free or Reduced Price Lunch+	Percentage of children enrolled in public schools that are eligible for free or reduced price lunch.	National Center for Education Statistics	2021- 2022
Family and Social Support	Residential Segregation - Black/White	Index of dissimilarity where higher values indicate greater residential segregation between Black and white county residents.	American Community Survey, 5-year estimates	2018- 2022
	Child Care Cost Burden	Child care costs for a household with two children as a percent of median household income.	The Living Wage Institute; Small Area Income and Poverty Estimates	2023 8 2022
	Child Care Centers	Number of child care centers per 1,000 population under 5 years old.	Homeland Infrastructure Foundation-Level Data (HIFLD)	2010- 2022
Community Safety	Homicides*	Number of deaths due to homicide per 100,000 population.	National Center for Health Statistics - Mortality Files; Census Population Estimates Program	2015- 2021
	Suicides*	Number of deaths due to suicide per 100,000 population (ageadjusted).	National Center for Health Statistics - Mortality Files; Census Population Estimates Program	2017- 2021
	Firearm Fatalities*	Number of deaths due to firearms per 100,000 population.	National Center for Health Statistics - Mortality Files; Census Population Estimates Program	2017- 2021
	Motor Vehicle Crash Deaths*	Number of motor vehicle crash deaths per 100,000 population.	National Center for Health Statistics - Mortality Files; Census	2015- 2021



	Juvenile Arrests+	Rate of delinquency cases per 1,000 juveniles.	Easy Access to State and County Juvenile Court Case Counts	2021
Other Social & Economic Factors	Voter Turnout+	Percentage of citizen population aged eighteen or older who voted in the 2020 U.S. Presidential election.	MIT Election Data and Science Lab; American Community Survey, 5- year estimates	2020 8 2016- 2020
	Census Participation	Percentage of all households that self-responded to the 2020 census (by internet, paper questionnaire or telephone).	Census Operational Quality Metrics	2020
PHYSICAL ENV	IRONMENT			
Housing and Transit	Traffic Volume	Average traffic volume per meter of major roadways in the county.	EJSCREEN: Environmental Justice Screening and Mapping Tool	2023
	Homeownership	Percentage of owner-occupied housing units.	American Community Survey, 5-year estimates	2018- 2022
	Severe Housing Cost Burden	Percentage of households that spend 50% or more of their household income on housing.	American Community Survey, 5-year estimates	2018- 2022
	Broadband Access	Percentage of households with broadband internet connection.	American Community Survey, 5-year estimates	2018- 2022
DEMOGRAPHI	cs			
All	Population	Resident population.	Census Population Estimates Program	2022
	% Below 18 Years of Age	Percentage of population below 18 years of age.	Census Population Estimates Program	2022
	% Sixty-five and Older	Percentage of population ages sixty-five and older.	Census Population Estimates Program	2022
	% Non-Hispanic Black	Percentage of population identifying as non-Hispanic Black or African American.	Census Population Estimates Program	2022
	% American Indian or Alaska Native	Percentage of population identifying as American Indian or Alaska Native.	Census Population Estimates Program	2022
	% Asian	Percentage of population identifying as Asian.	Census Population Estimates Program	2022
	% Native Hawaiian or Other Pacific Islander	Percentage of population identifying as Native Hawaiian or Other Pacific Islander.	Census Population Estimates Program	2022
	% Hispanic	Percentage of population identifying as Hispanic.	Census Population Estimates Program	2022
	% Non-Hispanic White	Percentage of population identifying as non-Hispanic white.	Census Population Estimates Program	2022
	% Not Proficient in English	Percentage of population aged five and over who reported speaking English less than well.	American Community Survey, 5-year estimates	2018- 2022
	% Female	Percentage of population identifying as female.	Census Population Estimates Program	2022
	% Rural	Percentage of population living in a census-defined rural area.	Decennial Census Demographic and Housing Characteristics File	2020

<sup>\*</sup>Indicates subgroup data by race and ethnicity is available; + Not available in all states.



### Violent Crime Data Sources:

• FBI Crime Data Explorer: https://crime-dataexplorer.fr.cloud.gov/pages/explorer/crime/crime-trend

### Other Health Conditions Data Sources

- CDC: https://nccd.cdc.gov/DHDSPAtlas/?state=County
- State Cancer Profiles: https://statecancerprofiles.cancer.gov/index.html