



JACKSON
COUNTY
PUBLIC
HEALTH

DECEMBER 2023

Eastern Jackson County Community Health Assessment

*Presented by
Jackson County Public Health*

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A Letter to the Community

Health is more than what happens at the doctor's office. It is shaped in complex ways across a range of factors. The places where we live, learn, work, and play — and the choices we make — all matter to our physical, mental, and social well-being. Social and economic opportunities, such as affordable housing, stable jobs with a living wage, and strong social networks are foundational to achieving long and healthy lives.

All these factors, coupled with our history, shape the opportunities we have to attain good health. For example, growing up in a safe neighborhood with infrastructure that promotes walkability and social cohesion provides opportunities to live a more active lifestyle. These opportunities affect the probabilities that we will grow up healthier. As opportunities decline, so does the likelihood of attaining our healthiest lives. In Eastern Jackson County, this manifests as wide-ranging disparities in the length of our lives. Right now, residents living just a few miles apart have up to a 13-year difference in their life expectancy.

The ideal of the American Dream provides us with an aspirational state, in that anyone, regardless of their background, can attain a higher quality of life. The 2023 Community Health Assessment, building off previous assessments in 2015 and 2017, demonstrates meaningful gaps in the opportunities that different groups of people have in living out the American Dream. The 2023 assessment shows that in Eastern Jackson County:

- The overall poverty rate in 2020 was 7%, but rates were highest for residents identifying as Native Hawaiian and Pacific Islander (16%), Black (12%), or another historically marginalized racial or ethnic group. [\(page 48\)](#)
- 42% of renters and 20% of homeowners are cost-burdened – spending more than 30% of their household income on housing costs. [\(page 54\)](#)
- Opioid-related deaths doubled between 2018 and 2021. [\(page 118\)](#)

We hope that this report, and the thousands of voices and perspectives that helped to shape it, provide a foundation for better understanding and opportunities for future research. The complex health challenges facing our communities cannot be solved by one person or organization alone. As such, we encourage you to join regional collaborations to remove systemic barriers to opportunity.

Only through truly collaborative, systems-level change can we begin to affect these wicked challenges.

Yours in partnership,



Bridgette Shaffer

BRIDGETTE SHAFFER, MPH
JCPH HEALTH DIRECTOR



Key Definitions

HEALTH EQUITY TERMS

Health Disparities: Preventable differences in the burdens of disease, injury, violence, or opportunities to achieve optimal health experienced by socially disadvantaged populations. Health disparities stem from health inequities, and with social determinants of health, are the metric for assessing health equity.

Health Equity: The opportunity to attain the highest level of health for all people. To achieve health equity, we 1) work to improve the health of groups who have been historically marginalized, excluded, or otherwise placed at a social disadvantage, and 2) do so by improving healthcare and social determinants of health that cause inequities.

Health Inequity: Differences in health that are unnecessary and avoidable and are considered unfair and unjust. These differences in health outcomes are closely linked to social, economic, and environmental conditions.

Social Determinants of Health: Non-medical factors that influence health outcomes. Social determinants of health are conditions in the environment in which people are born, live, work, play, worship, and age, and a wider set of factors and systems that shape the conditions of daily life. Social determinants of health can be grouped into five domains and can influence health equity in positive and negative ways:

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

DEMOGRAPHIC CHARACTERISTICS

Ethnicity: Social classification based on cultural heritage that reflects historical, cultural, contextual, and geographic experiences of a population.^{1,2}

- **Hispanic/Latino:** Ethnicity classification used for people who identify as “Hispanic,” “Latino/Latina/LatinX,” and/or have origins from Spain, the Spanish-speaking countries of Central or South America, or another Spanish culture or origin. Origin can be viewed as the heritage, nationality group, lineage, or country of birth of the person or person’s parents or ancestors before their arrival in the United States. People who identify their origin as Hispanic, Latino, or Spanish may be of any race.

Gender Identity: One’s innermost concept of self as male, female, a blend of both or neither—how individuals perceive themselves and what they call themselves. One’s gender identity can be the same or different from their sex assigned at birth. For the purposes of the CHA, the terms “male,” “female,” “woman,” and “man” are used to describe how people identify themselves.³



- **Non-binary:** An adjective describing a person who does not identify exclusively as a man or a woman. They may fall somewhere in between or completely outside of these categories. While many also identify as transgender, not all non-binary people do. Non-binary can also be used as an umbrella term encompassing identities such as agender, bigender, genderqueer, or gender-fluid.
- **Transgender:** An umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth. Being transgender does not imply any specific sexual orientation. Therefore, transgender people may identify as straight, gay, lesbian, bisexual, etc.

Race: The social classification of people based on physical features, often skin color.^{2,4,5}

- **Black:** A person having origins in any of the Black racial groups of Africa. Also referred to as African American
- **White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa
- **Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- **American Indian and Alaskan Native:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment
- **Native Hawaiian and Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- **Bi-racial:** A person who identifies as two races
- **Multi-racial:** A person who identifies as two or more races
- **Other Race:** A person who identifies as a race not listed in the Census or on the Community Health Assessment Survey

Sexual Orientation: An inherent or immutable enduring emotional, romantic, or sexual attraction to other people. Note: an individual's sexual orientation is independent of their gender identity.³

- **Bisexual:** A person emotionally, romantically, or sexually attracted to more than one gender, though not necessarily simultaneously, in the same way, or to the same degree. Sometimes used interchangeably with pansexual
- **Gay:** A man who is emotionally, romantically, or sexually attracted to other men. Men and non-binary people may use this term to describe themselves.
- **Lesbian:** A woman who is emotionally, romantically, or sexually attracted to other women. Women and non-binary people may use this term to describe themselves.
- **Straight:** A person emotionally, romantically, or sexually attracted to someone who identifies as the opposite gender.

ADDITIONAL TERMS

Adjusted Cohort Graduation Rate: The percentage of first-time ninth-graders in public high schools who graduate with a regular diploma within four years.⁶

Birth Person: Someone who gives birth, regardless of their gender identity, which may be female, male, non-binary, or another gender identity. Many sources that provide pregnancy and birth data define the birthing population as female. For the purpose of this document, the term 'birthing person' is used to promote inclusivity.⁷

Census Tract: Census tracts (CTs) are small subdivisions of a county that provide more specific geographic context for population statistics from the U.S. Census Bureau. CTs average about 4,000 inhabitants but can hold a population between 1,000 and 8,000.

Childcare Desert: When the number of children under age five in a community is more than triple the available space in licensed childcare centers. A total childcare desert occurs when there is more than triple the demand for all state-registered childcare providers in an area (including licensed and license-exempt providers).⁸

Data Suppression: When the number of events/cases is too small to protect confidentiality or to use reliably in calculations, data is excluded.

Live birth: Removal of an infant with signs of life from their birthing parent, through natural birth or through an operation.⁹

Low-income Low-access (LILA) Census Tracts: Census tracts that fall under the definition of low-income and low-access census tracts.¹⁰

- **Low-access (LA) Census Tracts:** *Census tracts that have low access to food stores, characterized by the number (at least 500) and share (at least 33%) of people at different distances from the nearest supermarket, supercenter, or large grocery store. Low-access census tracts are also characterized by the number of housing units in the area without access to a vehicle and that are more than 0.5 mile from one of these stores.*¹⁰
- **Low-income (LI) Census Tracts:** *When the tract's poverty rate is 20% or greater, the tract's median family income is less than or equal to 80% of the State-wide median family income, or the tract is in a metropolitan area and has a median family income less than or equal to 80% of the metropolitan area's median family income.*¹⁰

Non-family Household: Census definition used to describe a living situation consisting of either a one-person household or a situation where the householder exclusively shares a home with people to whom they are not related, such as living with roommates or residing in a group home.¹¹

Rates: To make the number of events between groups more easily comparable, many numbers in this assessment are presented as rates per a population of 100, 1,000, or 100,000. These are calculated by taking a number of events/cases and dividing it by the population in question. For example, a Case Rate by Age Group per 1,000 would be calculated using the following formula:

- $(\text{Cases in Age Group Y} / \# \text{ of People in Age Group Y}) \times 1000$

Recall bias: Type of survey bias that affects findings when survey participants fail to remember distant memories accurately and, therefore, incorrectly describe those memories.

Recency bias: Type of survey bias that happens when two distinct events occur an equal number of times, but respondents overestimate occurrence number for the more recent event.

Response bias: Type of survey bias that transpires when participants underplay their negative traits and over-represent positive ones.

Methodology

The methodology section explains the collection, analyses, and limitations of primary and secondary data for the 2023 Community Health Assessment (CHA) for Eastern Jackson County (EJC) performed by Jackson County Public Health (JCPH). The CHA uses a variety of data sources including primary surveys, the U.S. Census Bureau, and other health organizations' data. Survey development was informed by InCoLab Innovators Network members, a group of engaged community leaders identified using Mobilizing for Action through Planning and Partnerships (MAPP) 2.0's Stakeholder and Power Analysis. The CHA itself is an integral component of MAPP 2.0's Phase 2 – Tell the Community Story, incorporating both a CHA Survey sent to community members and a Community Partner Assessment (CPA) Survey sent to local partner organizations.

This report aims to address a multitude of factors affecting the EJC community, including economic stability, housing insecurity, transportation factors, environmental risks, healthcare and health resource availability, quality of life, COVID-19's impact, mental and behavioral health, maternal and child health, causes of mortality, communicable disease, and the social determinants of health. Sections covering these topics describe the issue and its context within public health using relevant statistics.

PRIMARY DATA COLLECTION

Community Health Assessment Survey

The 2023 Community Health Assessment (CHA) Survey for Eastern Jackson County (EJC) was distributed to 22,407 randomly selected households within the 20 ZIP Codes of JCPH's jurisdiction by the Jackson County Geographic Information Systems (GIS) Department. ZIP Code boundaries were chosen, as opposed to city boundaries, in order to capture unincorporated areas within EJC. However, this method resulted in the inclusion of a small number of residents of Independence and Kansas City. As such, city-specific CHA Survey results from Independence and Kansas City are not fully representative of these cities. ZIP Codes 64030, 64054, 64063, 64070, 64075, 64133, and 64138 received a 5% or 10% oversample based on their deviation from the 2017 survey's average response rate. The CHA Survey distribution was comprised of three phases:

Jackson County Community Health Assessment
ADDRESS: [MAIL MERGE] // USER ID: [MAIL MERGE]

Please take a few minutes to fill out this survey. Once completed, please return via the enclosed envelope. This information will be used to better understand the experiences and needs of Eastern Jackson County residents and inform the distribution of programs and resources. This information will not be linked to individual survey respondents or reported to other local, state, or federal agencies. If you don't feel comfortable answering a question, you can select "Prefer not to say" or skip the question. For completing this survey, you will receive a \$10 gift card in the mail while supplies last. Completed surveys will also be entered into a drawing to win one of twenty \$50 gift cards. To take this survey online or learn more, visit jacobd.org/survey. Please return or submit your completed survey by April 12, 2023. Thank you for your contributions to your community!

Para realizar esta encuesta en español, visite jacobd.org/survey.

Section I: My Health
In this section, community members are asked to answer questions about their own health and their experiences related to individual and family health. Please make your selection by completely filling in the box.

How would you rate your general overall health?
Please check one.
☐ Poor ☐ Fair ☐ Good ☐ Very Good ☐ Excellent

In the past 30 days, how often have you felt emotionally "out of sorts," such as stressed, anxious, or depressed?
Please check one.
☐ 0 days ☐ 1-4 days ☐ 5-9 days ☐ 10-14 days ☐ 15-20 days ☐ 21-30 days

Between 2020 and today, have you or your household been evicted or forced to move out of a residence?
Please check all that apply.
☐ Yes, my household was evicted. ☐ Yes, my household had to move due to housing costs.
☐ No, but I am worried about losing my housing in the future. ☐ No, this has not been a challenge for my household. ☐ Other: _____

How safe do you currently feel in your home?
Please check one.
☐ Very Safe ☐ Safe ☐ Somewhat Safe ☐ Not Safe ☐ Very Not Safe

PHASE 1:

- 22,407 postcards were sent to randomly selected households.
- Residents were given the option to complete the survey digitally in English or Spanish.

PHASE 2:

- Paper surveys were distributed to households that did not previously complete a digital survey.
- Paper surveys were available in English with a Spanish notation directing residents to contact the department for additional translation services.

PHASE 3:

- Households that did not previously submit a digital or paper version of the survey were mailed a final postcard.

PRIMARY DATA COLLECTION (CONTINUED)

Online surveys were collected and stored via Survey123, an ArcGIS product. Mailed surveys were hand-entered by JCPH staff into Survey123. Surveys were assessed for fraudulent submissions by assessing duplication (IP address and mailing address) and fraudulent submissions were excluded from response totals and analyses.

Out of the 22,407 households that received the survey, 1,572 households completed the survey, giving the 2023 CHA Survey a 7% response rate. While this response rate was a 2% decrease from the 2017 CHA Survey, the number of completed responses used for analysis increased due to an increase of total sent surveys. Of the surveys received, 632 were completed online while 940 were mailed to JCPH.

Community Partner Assessment Survey

The 2023 CPA Survey was developed by JCPH and InCoLab Innovators Network members and distributed to partner organizations active in EJC using Jotform, a digital survey tool. The purpose of the CPA Survey is to understand the partners' work, strategic priorities, and communities they serve. CPA Survey results supplemented secondary source demographic information about language usage and needs within EJC. Additionally, the information was used to create a more complete picture of organizations and resources in EJC.

CITY	RESPONSE RATE
Blue Springs	7.8%
Buckner	6.1%
Grain Valley	7.0%
Grandview	5.6%
Greenwood	5.4%
Independence	5.9%
Kansas City	6.9%

CHA Survey Response Rate, 2023

*The cities with the highest response rates were **Unity Village (25%)**, **Raytown (8.9%)**, and **Lee's Summit (8.3%)**.*



*Across all surveyed cities, the CHA Survey had a **7%** response rate.*



***22,407 CHA survey postcards** were sent to randomly selected households.*



CITY	RESPONSE RATE
Lake Lotawana	5.6%
Lake Tapawingo	0.0%
Lee's Summit	8.3%
Levasy	4.3%
Lone Jack	5.7%
Oak Grove	6.7%
Raytown	8.9%
Sibley	6.0%
Sugar Creek	5.6%
Unity Village	25.0%

SECONDARY DATA COLLECTION

Secondary data used in this assessment was extracted from a variety of sources including the U.S. Census Bureau's American Community Surveys (ACS), Centers for Disease Control and Prevention (CDC), Missouri Information for Community Assessment (MICA), Missouri Highway Patrol Statistic Center, Environmental Protection Agency (EPA), PolicyMap, the Missouri Coalition for Roadway Safety, and more. A full list of data sources is available in the References section.

ANALYSIS

Primary and secondary data were analyzed with R Studio Software, IBM's Statistical Packages for Social Sciences (SPSS), ArcGIS Online, and Microsoft Excel. Types of analyses included calculations of descriptive statistics (count, percentage, mean, median, etc.), and calculation of rates to compare outcomes between specific populations of different sizes. When a value is describing EJC in its entirety, EJC is calculated using Census Tract boundaries so that unincorporated areas are included.

LIMITATIONS

Although the Community Health Assessment is intended to be as accurate as possible, certain limitations must be acknowledged for both primary survey data and complementary data sources. JCPH is committed to promoting health equity for all regardless of race, ethnicity, age, gender, sexual orientation, religion, income, education, home ownership, marital status, family size, health and/or disability status. We recognize that incomplete data is itself a health equity gap.



Primary Survey Data

In the CHA Survey, not all survey questions needed to be completed for inclusion in the survey results. Respondents were required to answer at least one question, which sometimes resulted in a “missing” category for certain questions during analysis. Unclear paper survey responses, such as checking multiple boxes for a single-answer question, were treated as “missing” to prevent assuming the original intent. For city-specific analysis, if a city had over 5% “missing” responses, those values were excluded, and percentages were recalculated using the available city data. Some survey data at more detailed geographic or demographic levels were suppressed partially or entirely to comply with the JCPH confidentiality rule which requires at least five points of data for any given result to protect privacy.

What does “data suppression” mean?
When the number of events or cases is too small to protect confidentiality or to use reliably in calculations, data is excluded — or “suppressed.”



In the CPA Survey, any instances of “missing responses” within each question were omitted from the analysis. Subsequently, the results were reevaluated using the available total respondents as the denominator. If a question allowed for multiple responses (“Select all that apply”), total responses for each answer option were tallied and then expressed as a percentage of CPA Survey respondents. For open-ended questions, such as an organization’s priority geographic service area and priority populations, answers were recoded and categorized into specific themes or categories, and expressed in percentages of respondents for each theme.

The CHA Survey serves as an estimate of the status of EJC residents, but given that the CHA Survey was offered in only English and Spanish for both the paper and online survey formats, it is likely that populations of people in EJC were not reached if they primarily spoke a different language. Additionally, since an address was required to receive a paper or digital copy of the CHA Survey, individuals that are currently experiencing homelessness in EJC were not reached. When analyzing the results from the CHA Survey, a much larger proportion of the respondents were over age 65 than under age 65. A greater proportion of respondents to the CHA Survey were female than any other category.

Additionally, self-reported surveys can suffer recall, recency, and response bias. These biases may cause data to not accurately represent the population as a whole.

Secondary Data

There are several limitations when utilizing secondary data. Secondary data sources for specific subgroups were often either not available or had to be suppressed due to low response rates, which is essential to protect individual confidentiality. Moreover, some data sources use broad categories (e.g., binary male/female gender) that did not fully capture community diversity. Both limitations underscore potential health equity gaps and hindered exploration of certain issues due to data suppression. In addition, some data sources are not always timely in reporting their findings, resulting in some outdated secondary data in relation to primary data.


Additionally, the Census Bureau updates boundaries, such as Census Tracts, every 10 years. Thus, 2020 Census Tract boundaries differ from 2011-2019 Census Tract boundaries. Some data sources have transitioned to 2020 boundaries while others are still using 2011-2019 boundaries. This can lead to variations in EJC county boundaries across different data sources and years. Similarly, EJC data are unique since EJC is a geographic piece of Jackson County that excludes Kansas City, Missouri and Independence, Missouri. County-level data may sometimes present a skewed perspective on health outcomes or other characteristics, as it is the combination of Eastern Jackson County, Independence, and Kansas City information. To ensure an accurate representation of EJC’s population in the CHA, JCPH prioritizes using geographic data specific to EJC’s boundaries whenever feasible. If data was unavailable in smaller geographic units, county-level data or a combination of EJC and Independence data was used.

For more specific information about the geographic definition of EJC, please view the Demographics section on page 18.



PART ONE —

Social & Structural Determinants of Health



*“The air we breathe, the
food we eat, the water
we drink, and the places
where we live, work, and
play all have an impact
on our health.”*

THE CDC
NCEH DIVISION OF ENVIRONMENTAL
HEALTH SCIENCE & PRACTICE

Demographics

WHAT IS IT?

Demographics are important statistics that help describe a population and have been found to influence health status and outcomes. These factors include but are not limited to age, race, ethnicity, sex, income level, educational attainment, and employment status.

WHY IS IT IMPORTANT?

Understanding the composition of a community is important for identifying the health concerns and needs of a population. Gathering demographic data allows public health professionals to better determine health disparities within a population and can help in the planning of health strategy needed to best serve all members of the community.

KEY FINDINGS

- *Between 2015 and 2020, the population of Eastern Jackson County (EJC) increased by approximately 10,000 individuals (3.9%).¹²*
- *The 2020 US Census Bureau identified Lee's Summit as the only urban community located within EJC. All other cities in EJC are considered to be suburban communities.¹³*
- *The majority of EJC population falls within the 25-64 year old age group (72%).¹²*
- *The proportion of males (48%) and females (52%) within EJC is nearly the same.¹²*



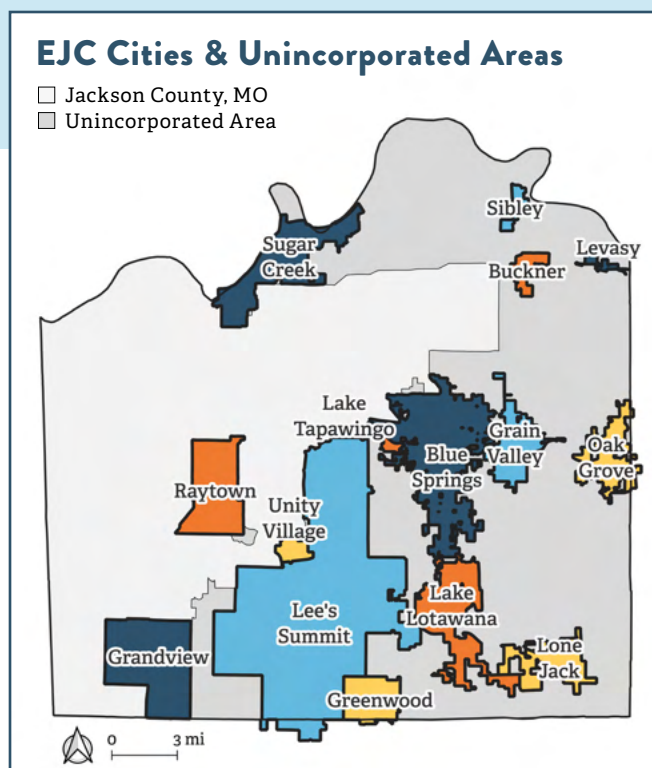


Figure 1: Eastern Jackson County Cities and Unincorporated Areas, 2020.

Source: U.S. Census Bureau, Jackson County Public Health.

Eastern Jackson County

BOUNDARIES

This report assesses the unique jurisdiction of Jackson County Public Health, also referred to as Eastern Jackson County (EJC).

EJC is a section of Jackson County, Missouri that includes 15 cities and unincorporated areas, 20 ZIP Codes, and 73 Census Tracts. This jurisdiction excludes Kansas City, MO and Independence, MO, as they fall under the jurisdiction of their respective health departments. As of 2020, Jackson County was home to a population of 700,733 residents, of which 269,342 resided in EJC.^{12,14}

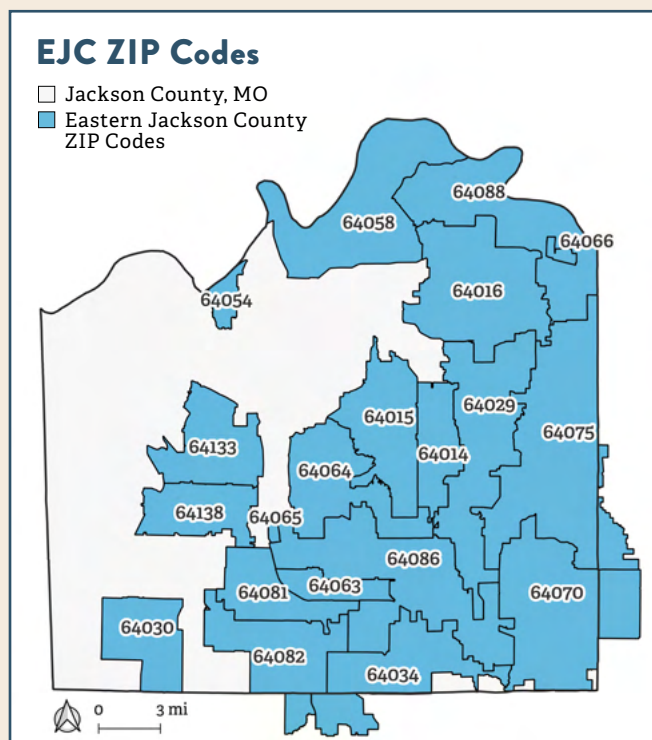


Figure 2: Eastern Jackson County ZIP Codes, 2020.

Source: U.S. Census Bureau, Jackson County Public Health.

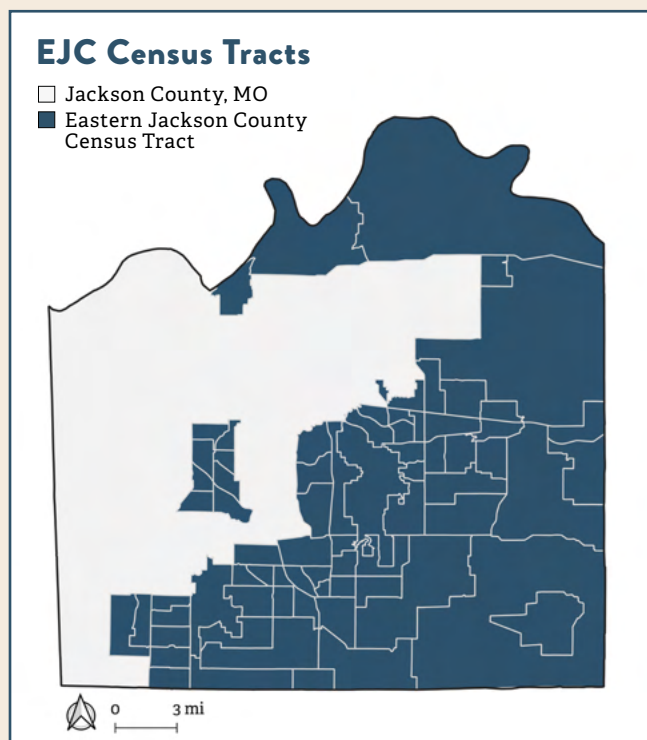


Figure 3: Eastern Jackson County Census Tracts, 2020.

Source: U.S. Census Bureau, Jackson County Public Health.

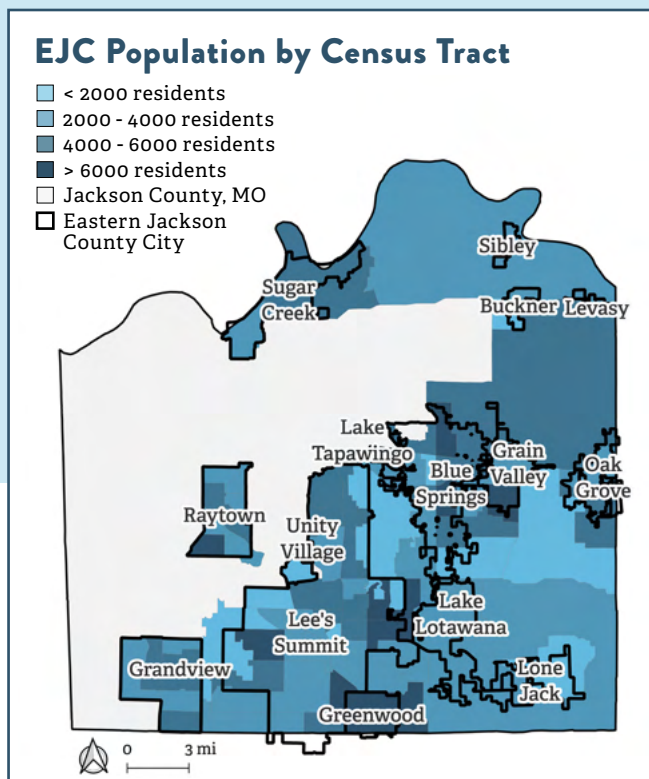


Figure 4: Eastern Jackson County Population by Census Tract, 2020.

Source: US Census Bureau; Decennial Demographic Profile, 2020.

LANDSCAPE

Based on EJC communities' proximity to Kansas City, much of the region is considered part of the larger Kansas City metropolitan area. The U.S. Census Bureau identified Lee's Summit as the only urban community in EJC due to population size and density.¹³ Along with several suburban areas, the U.S. Department of Agriculture has identified Buckner, Levasy, Lone Jack, Oak Grove, and Sibley as rural communities.¹³

POPULATION & GROWTH

Based on the 2020 Census, 52% of EJC residents identified as female and 48% identified as male. When Census respondents identified their race, nearly 80% of EJC residents identified themselves as White, 12% as Black, and 6% as Hispanic/Latino/a/x. Approximately 4% of EJC residents identified as Bi-racial or Multi-racial. Asian residents make up about 1.5% of the EJC population, <1% are American Indian or Alaskan Native, and <1% are Native Hawaiian or Pacific Islander. Additionally, 2% of individuals identified as another race which was not available on the Census survey.¹²



POPULATION IN EJC BY CITY, 2020

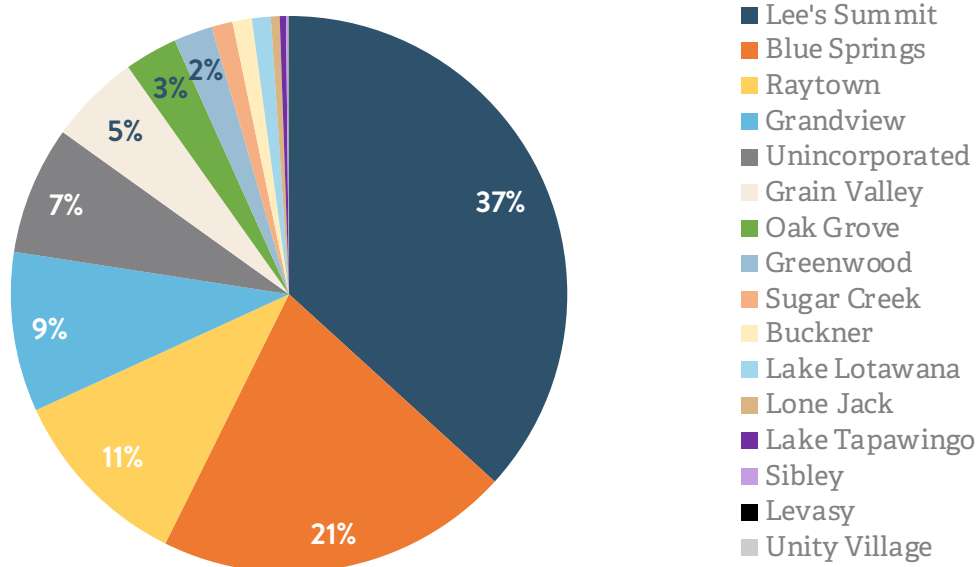
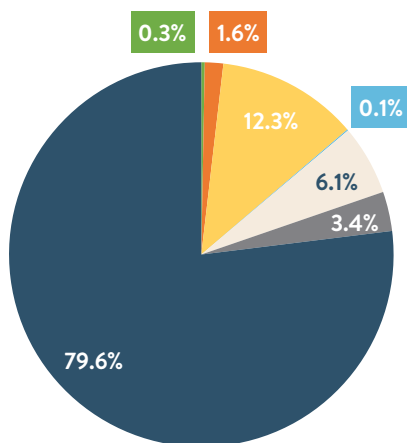


Figure 5: Eastern Jackson County Population Breakdown by City, 2020.

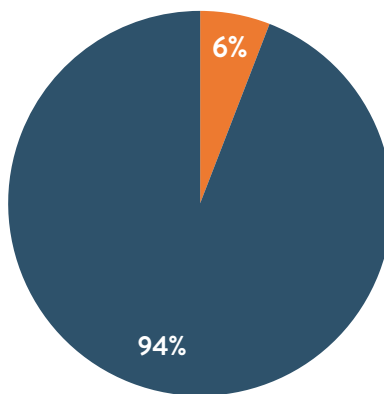
Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

RACE IN EJC, 2020



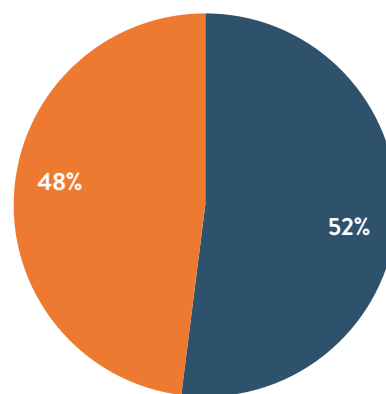
American Indian and Alaskan Native
 Asian
 Black
 Native Hawaiian and Pacific Islander
 Other
 Two or More
 White

ETHNICITY IN EJC, 2020



Hispanic or Latino
 Not Hispanic or Latino

GENDER IN EJC, 2020



Man
 Woman

Figure 6 (left): Eastern Jackson County Race Demographics, 2020.

Figure 7 (center): Eastern Jackson County Ethnicity Demographics, 2020.

Figure 8 (right): Eastern Jackson County Gender Demographics, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

POPULATION DISTRIBUTION IN EJC, 2020

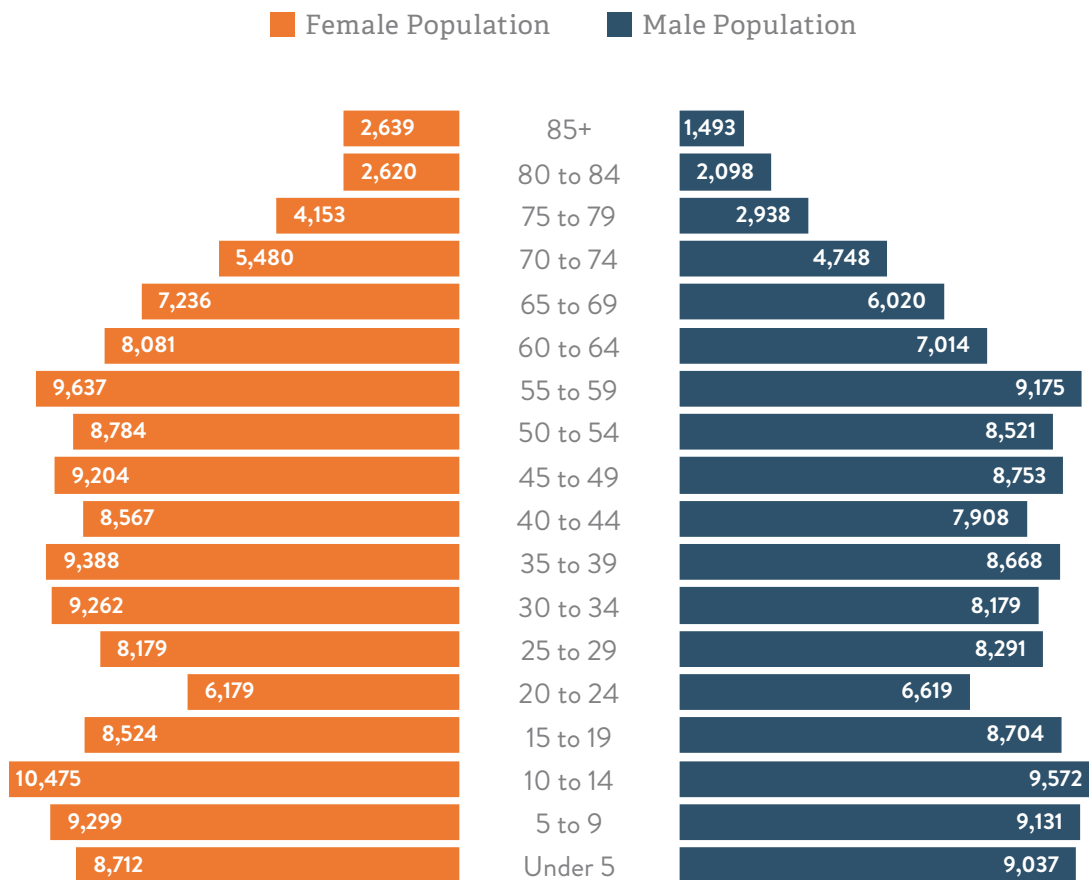


Figure 9: Eastern Jackson County Population Pyramid by Age and Sex, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

POPULATION & GROWTH (CONTINUED)

Between 2010 and 2015, the population of EJC experienced a growth of just under 12,000 people (4.8%). Similarly, in the subsequent period from 2015 to 2020, the population grew by approximately 10,000 individuals (3.9%) as indicated in **Figure 10**.¹² Cities within EJC mostly increased in population size during this period, although six cities slightly decreased (Figure 11). Most residents that move to EJC come from neighboring counties in Missouri or move from one EJC community to another.¹²

POPULATION GROWTH IN EJC, 2015-2020

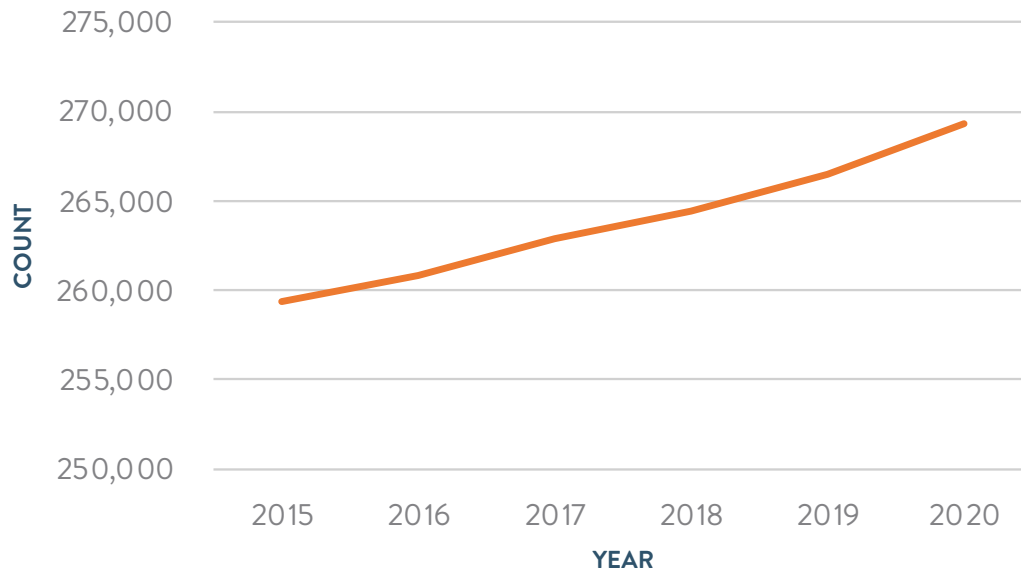


Figure 10: Eastern Jackson County Population Growth, 2015-2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2015-2020.

POPULATION TRENDS BY CITY IN EJC, 2015-2020

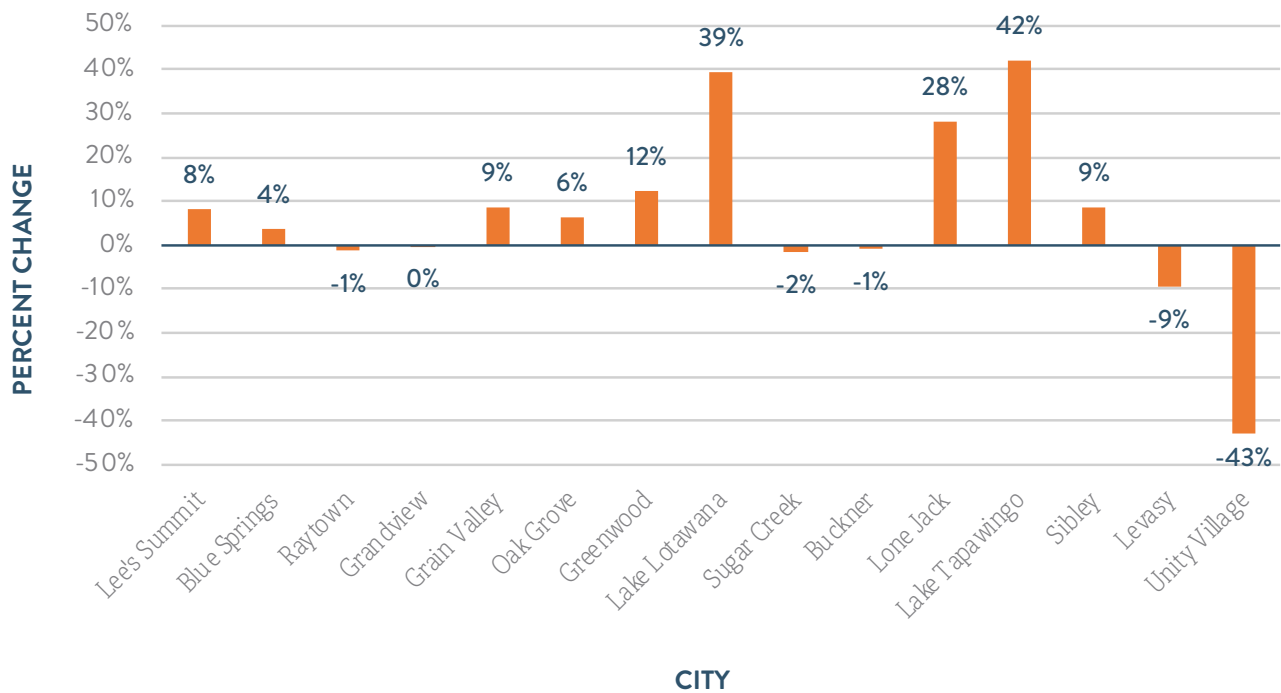


Figure 11: Eastern Jackson County Population Trends by City, 2015-2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2015-2020.

A Closer Look at EJC Cities

HOUSEHOLDS

Based upon 2020 Census data, there are 103,671 households in Eastern Jackson County, with most households made up of two or three residents. Of those households, 53% are married couples, 31% are non-families (such as roommates or group homes), 12% are single female households with children, and 4% are single male households with children.

Within family groups of single heads of household with children, women are three times more likely to be a single caregiver of children compared to men (females: 76 per 100 single head households; males: 23 per 100 single head households) in EJC. However, this data indicates that there are similar distributions of the age of children across single female and single male households.

Throughout EJC, 71% of all households own their homes and 29% rent.¹²

For more in-depth information about EJC residents' housing statuses, costs, and habitability concerns, see the **Economic Stability** section on page 44.

HOUSEHOLD TYPES IN EJC, 2020

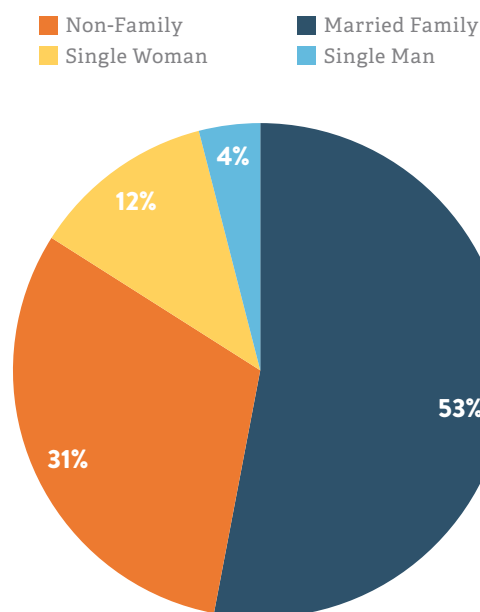


Figure 13: Eastern Jackson County Household Types, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

TOTAL HOUSEHOLDS BY CITY, 2020

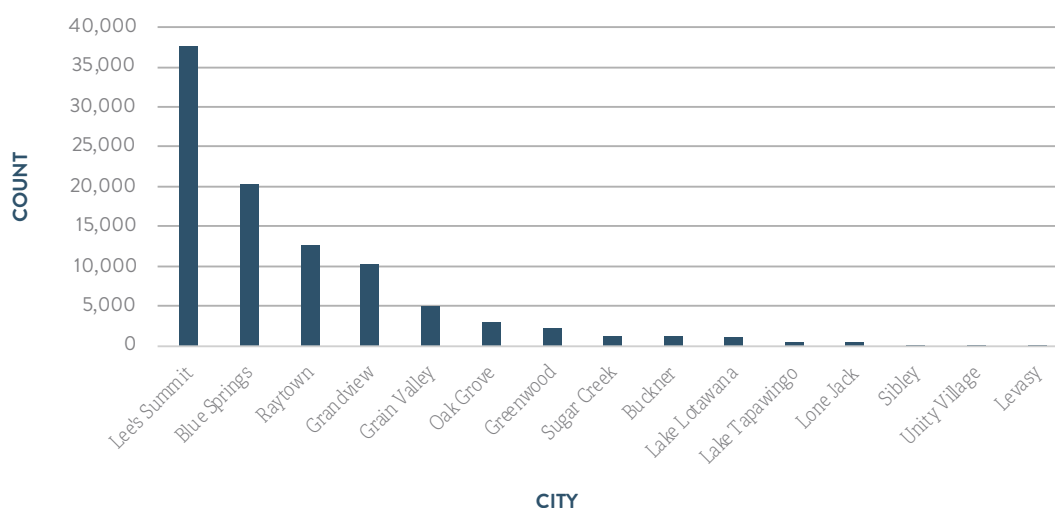


Figure 12: Eastern Jackson County Household Numbers by City, 2020.

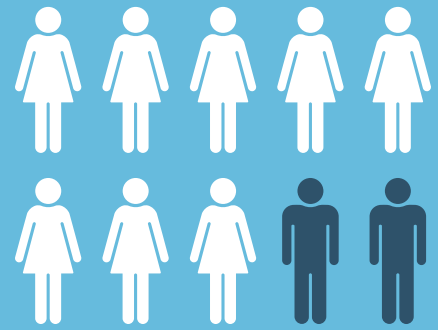
Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

DISABILITY

Census data estimates that 27,337 (approximately 1 in 10) EJC residents are currently living with a disability, including hearing or vision impairments, ambulatory or mobility challenges, cognitive disabilities, and other conditions that make it difficult to live independently or care for oneself.¹²

The National Disability Rights Network and the U.S. Census Bureau have found historically low census participation rates for people with disabilities, which suggests that “the disability community is at a greater risk of being undercounted.”¹⁵ For more information on individuals with disabilities in EJC, see the **Disability section on page 30.**

DID YOU KNOW?



8 out of 10 single-parent households in EJC have a woman as the caregiver.



LANGUAGE

About 94% of households in EJC speak only English at home and 6% of EJC residents, approximately 16,000 people, speak a language other than English at home. Of those 16,000 people, half speak Spanish at home, about 3,000 speak a different Indo-European language, another 3,000 residents speak an Asian or Pacific Island language, and about 2,000 speak a language not represented in the other categories.¹⁶

In April 2023, JCPH conducted a Community Partner Assessment (CPA) survey to better understand the functions, capabilities, and collaborative capacities of organizations serving Jackson County. Language access was one of the key capabilities assessed by the survey.

Among the organizations represented in the responses, 36% reported providing specific services and/or engagement activities for non-native English speakers. Additionally, 44% of respondents indicated that their organization hires staff or interpreters who speak the language(s) of their priority populations, and 22% indicated that members of their leadership team speak the language(s) of their priority populations. Most organizations reported that they have multilingual staff who are able to communicate with clients and community members in their primary languages, provide materials in languages other than English, and have on-site or responsive interpretation services available. Only 27% of responding organizations indicated that they always or sometimes have the ability to host community events in languages other than English.

Organizations also reported their capacity to provide access options in 18 additional languages. An organization's capacity could include one of the following options: having staff who speak the language, material available in the language, or meetings/events available in the language.

The most common language indicated in the responses, besides English, was Spanish, with 78% of respondents reporting they had some capacity to provide resources in this language. The next most frequently answered language capacity was American Sign Language (29% of organizations), followed by Arabic (16%) and Somali (15%). The remaining languages were within the capacity of less than 11% of responding organization.

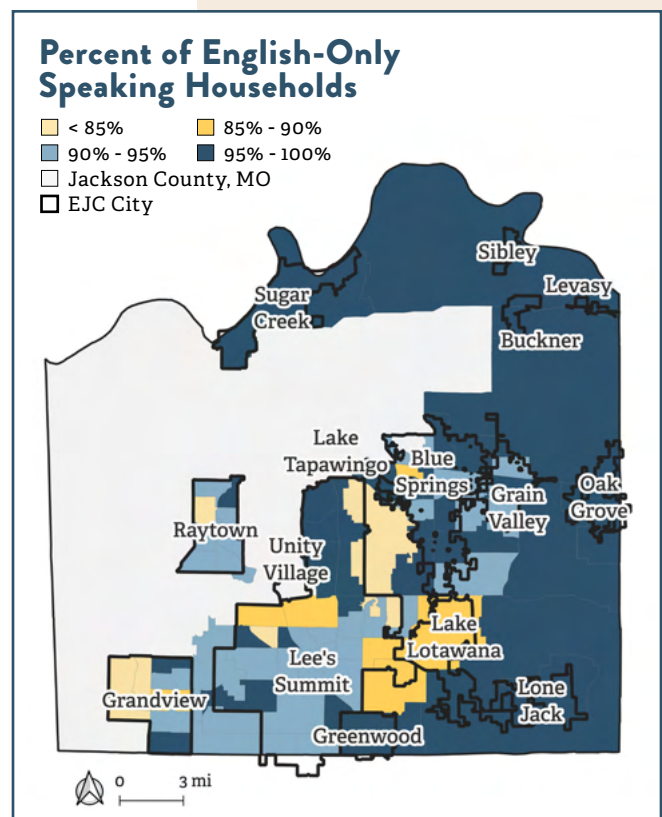


Figure 14: Eastern Jackson County English-Only Speaking Households by Census Tract, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.



SEXUAL ORIENTATION

Based on the survey data collected from those who completed the CHA Survey, 88.7% of Eastern Jackson County residents identified their sexual orientation as straight. The next largest group (1.4%) identified as bisexual or pansexual.

Currently, data on sexual orientation at the local, state, or federal level is limited. However, while this CHA is unable to make comparisons of EJC specifically for sexual orientation, data at the national level does exist. In 2021, the U.S. Census Bureau began collecting sexual orientation data using the Household Pulse Survey. Respondents of this survey identified as 88.3% straight, 4.4% bisexual, 3.3% gay or lesbian, 1.9% “something else”, and 2.1% “I don’t know.” These national rates follow the trends observed in EJC.¹⁷

It is important to note that during the time that the CHA Survey was distributed (March and April 2023), there were many high-profile bills being debated in the Missouri legislature specifically targeting the LGBTQ+ community, including two that were eventually signed into law restricting access to gender-affirming healthcare and school sports participation for transgender youth.

The political climate at the time may have contributed to an increase in the number of survey recipients who declined to identify their sexual orientation or gender identity on the survey or declined to participate in the survey process entirely.

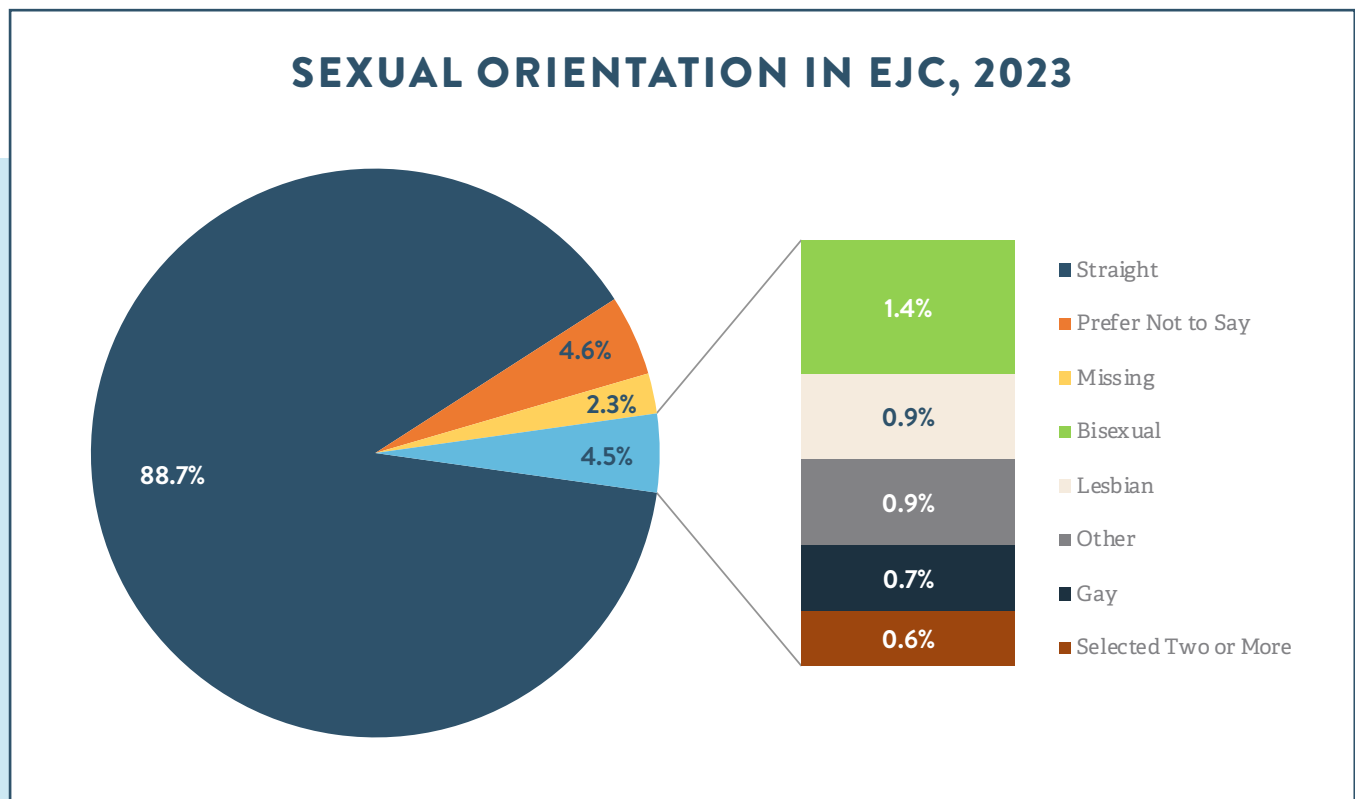


Figure 15: Eastern Jackson County Sexual Orientation Demographics, 2023.

Source: Jackson County Public Health; 2023 CHA Survey.

EDUCATIONAL ATTAINMENT

According to the 2020 US Census, 55% of EJC residents have completed some college or hold an associate's or bachelor's degree and 12% have completed a graduate degree. The US Census also reports 27% of EJC resident's educational attainment as having obtained a high school (HS) diploma or a GED.¹



EDUCATIONAL ATTAINMENT IN EJC, 2020

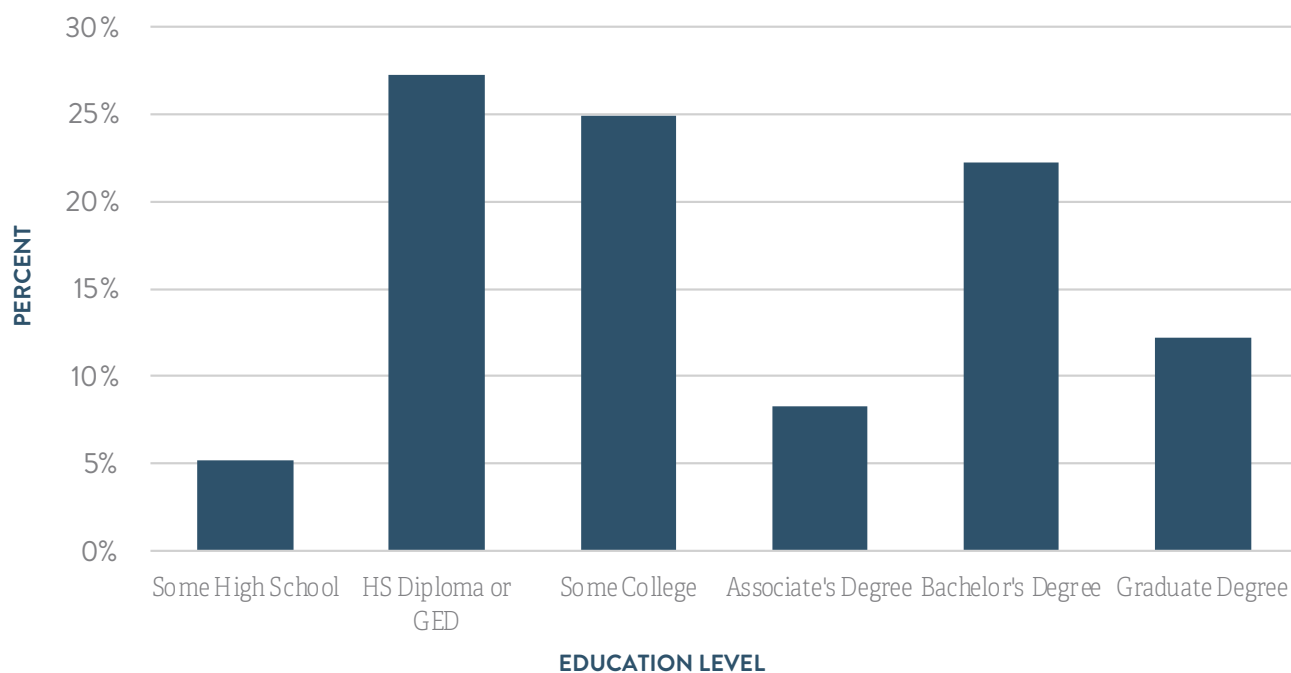


Figure 16: Eastern Jackson County Educational Attainment, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.



Disability

WHAT IS IT?

A disability is a physical, developmental, or psychological condition that can make participation in or completion of certain activities, which may seem easy to someone without a disability, more difficult. Disabilities affect how an individual interacts with the world around them, including through vision, movement, hearing, and learning.

WHY IS IT IMPORTANT?

People living with disabilities are more susceptible to preventable health conditions that can lead to a decreased quality of life and poorer overall health. People living with disabilities are also often subjected to ableism, a type of discrimination against people with disabilities. Not only does this affect one's mental health, but it has also been built into the systems that exist around us in healthcare, infrastructure, education, and more. These problems create inequity that persists throughout all communities, including Eastern Jackson County (EJC), and can impact the day-to-day lives of people with disabilities both visible and invisible.



KEY FINDINGS

- *Approximately one in ten Eastern Jackson County (EJC) residents report living with one or more disabilities, the majority found among those aged 75 years and older.¹²*
- *One in two disabled people have an ambulatory disability and one in three disabled people cannot live independently in EJC.¹²*
- *Nearly one in four veterans living in EJC have disabilities, which is two times higher than the rate for civilian EJC residents.¹²*
- *Compared to their non-disabled counterparts, men with disabilities experience a median income difference of almost \$13,000 per year, while women with disabilities face a more pronounced wage gap of \$21,000 per year.¹²*

DEMOGRAPHICS

In Eastern Jackson County (EJC), just over one in ten individuals (11%) has a disability. Of individuals with disabilities, nearly 50% have an ambulatory disability and more than a third have a cognitive or independent living difficulty disability.¹²

The U.S. Census defines types of disabilities as:¹⁸

- **Ambulatory Difficulty:** Having serious difficulty walking or climbing stairs
- **Cognitive Difficulty:** Because of a physical, mental, or emotional problem, having difficulty remembering, concentrating, or making decisions
- **Independent Living Difficulty:** Because of a physical, mental, or emotional problem, having difficulty doing errands alone such as visiting a doctor's office or shopping
- **Hearing Difficulty:** Deaf or having serious difficulty hearing
- **Vision Difficulty:** Blind or having serious difficulty seeing, even when wearing glasses
- **Self-care Difficulty:** Having difficulty bathing or dressing

In EJC, American Indian or Alaskan Native and Native Hawaiian or Pacific Islander residents report living with one or more disabilities at higher rates than any other racial or ethnic group. This fact, combined with the systemic barriers that can prevent people of racial or ethnic minoritized groups from accessing services and care, contribute to health inequity in our communities that must be accounted for when evaluating access to resources in EJC. Older residents are also more likely to live with disabilities, including nearly 45% of individuals 75 years and older within EJC.¹²

Some EJC cities have a larger percentage of people with disabilities compared to the EJC average. More than 15% of Sugar Creek, Grandview, Raytown, Lake Tapawingo, and Oak Grove residents are individuals with disabilities.¹²

Military service increases the chances of an individual becoming injured, resulting in service-connected disabilities. In EJC, veterans make up 8% of the total population. However, the percentage of veterans with disabilities (23%) is nearly double that of adult civilian EJC residents (14%). Buckner, Lake Tapawingo, Raytown, and Sugar Creek have the highest percentages of veterans with disabilities.¹²



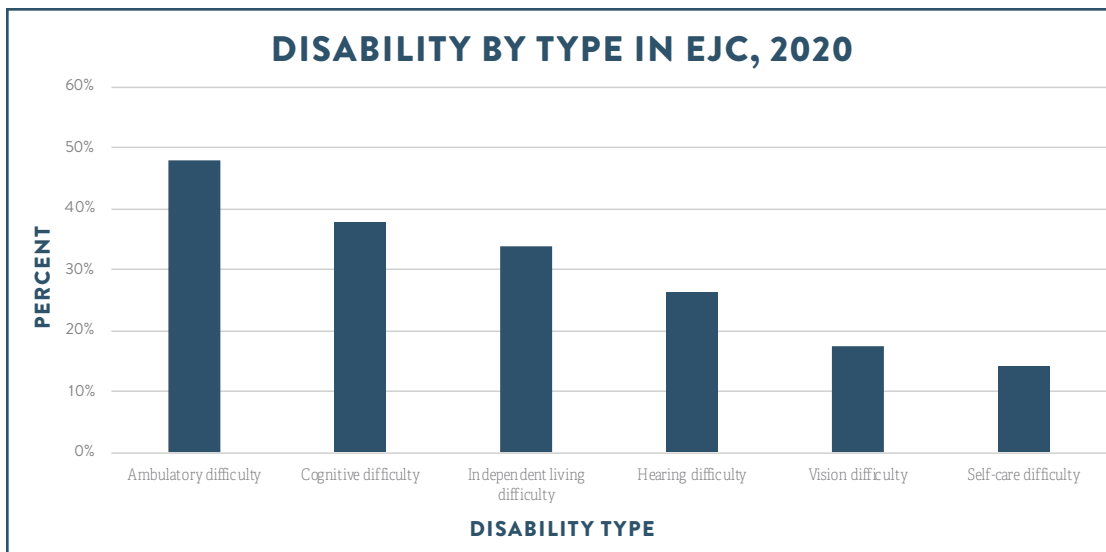


Figure 17: Eastern Jackson County Population with a Disability by Type, 2020.

Source: US Census Bureau; American Community Survey (ACS), 2020.

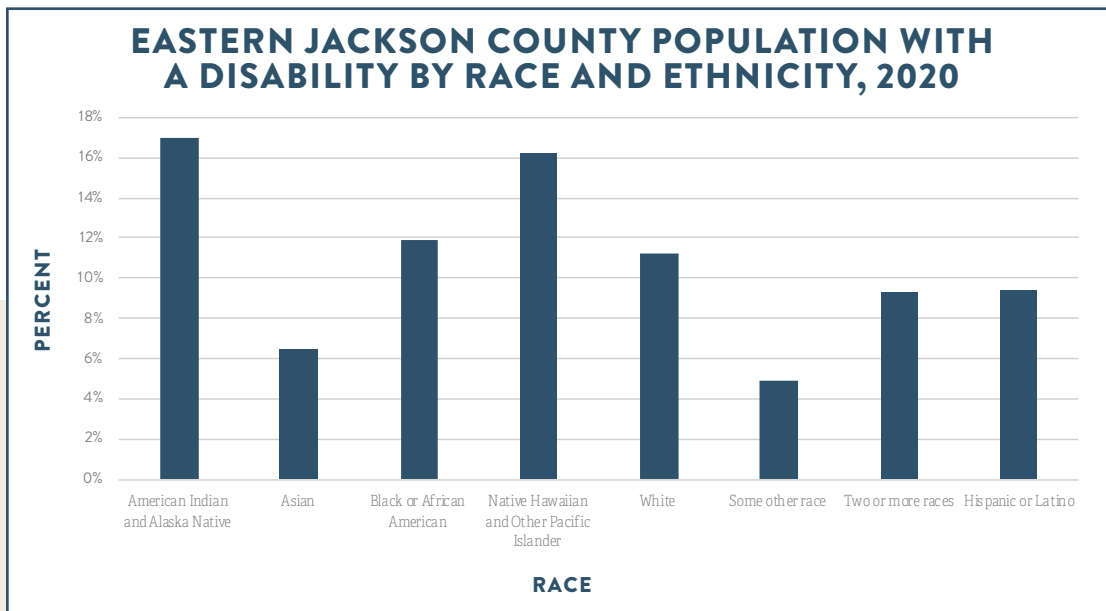


Figure 18: Eastern Jackson County Population with a Disability by Race and Ethnicity, 2020.

Source: US Census Bureau; American Community Survey (ACS), 2020.

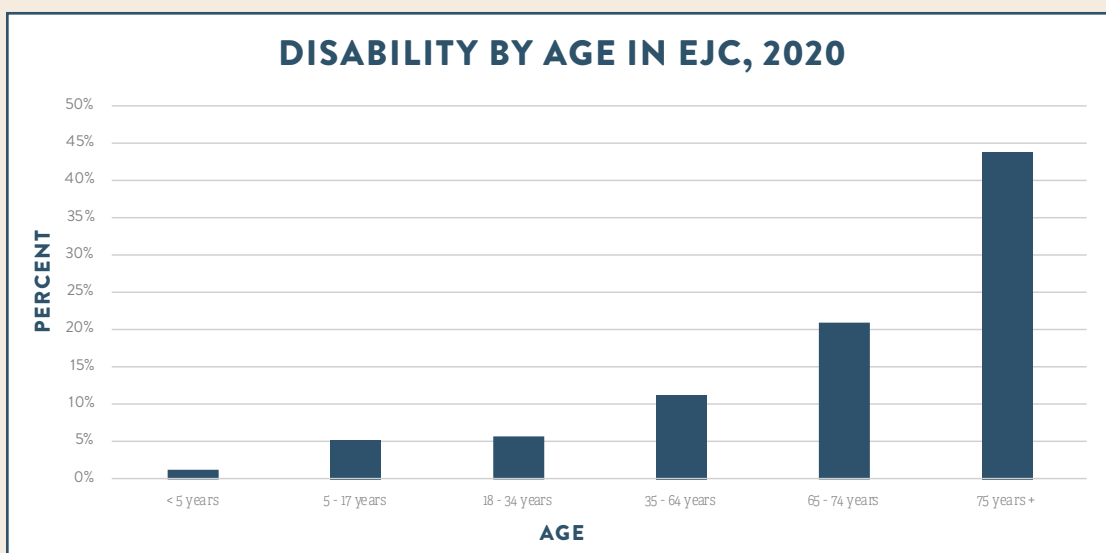


Figure 19: Eastern Jackson County Population with a Disability by Age, 2020.

Source: US Census Bureau; American Community Survey (ACS), 2020.

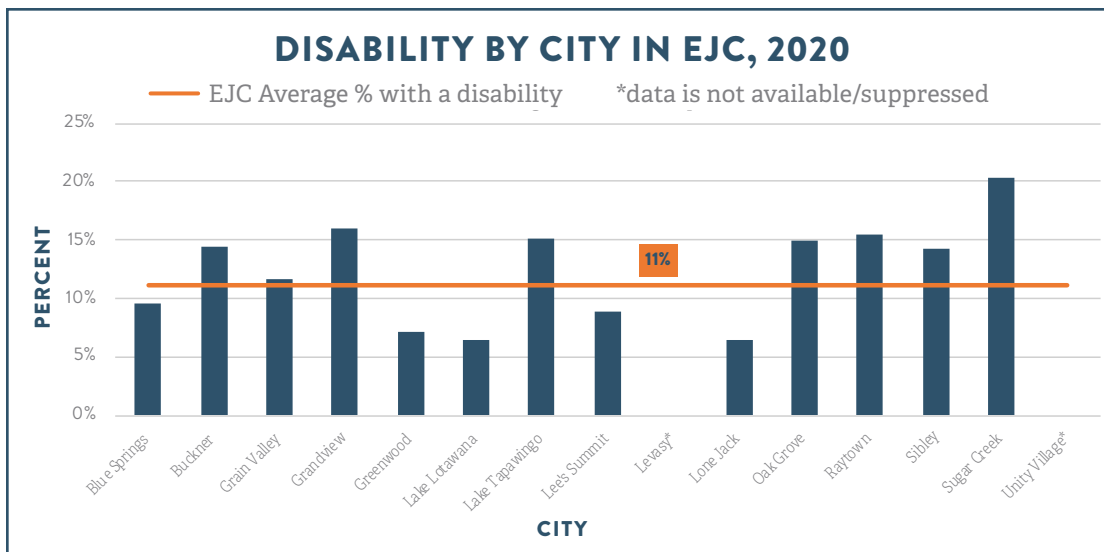


Figure 20: Eastern Jackson County Population with a Disability by City, 2020.

Source: US Census Bureau; American Community Survey (ACS), 2020.

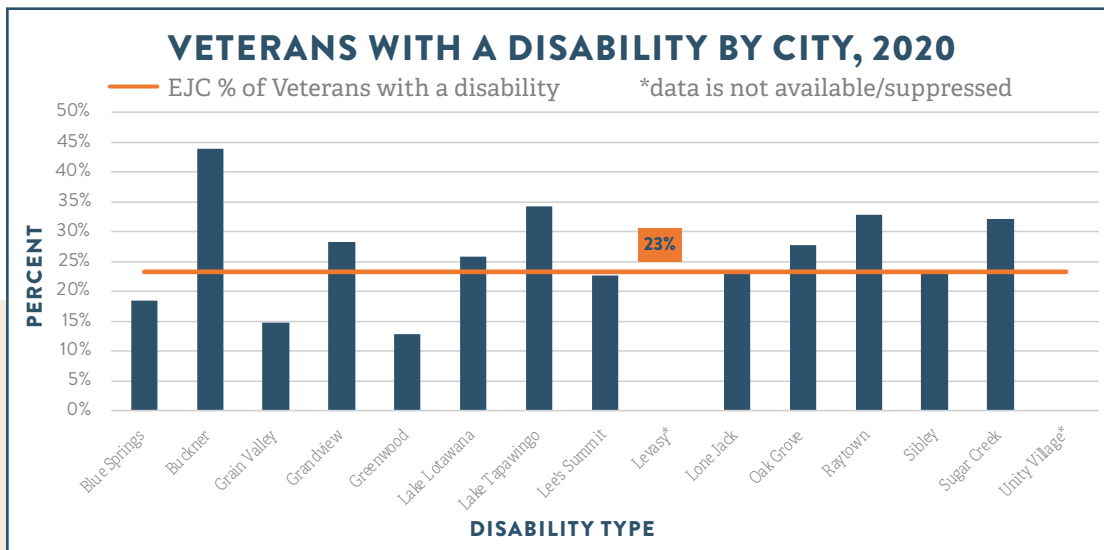


Figure 21: Eastern Jackson County Veteran Population with a Disability by City, 2020.

Source: US Census Bureau; American Community Survey (ACS), 2020.

EMPLOYMENT

While some individuals with disabilities are unable to work, others may choose to or want to work for financial or social reasons. Regardless of the reason, ensuring that people with disabilities have employment opportunities and earn a fair wage is necessary for an equitable community. In EJC, 84% of non-disabled individuals are employed compared to 45% of those who are disabled and employed.¹²

Unemployment, the percentage of those seeking a job but not currently placed in a job, was comparable in 2020 between people with and without disabilities in EJC.¹² This indicates that people with disabilities who want to participate in the workforce are working and those who do not or cannot, are not currently working. In EJC, unemployment rates among those who have a disability and those who do not are very similar at 4% and 3%, respectively. It is also reported that 52% of disabled individuals are not in the work force.¹²

For those who are employed in EJC, people with disabilities made on average \$6,000 less through their annual median earnings than people without disabilities. This disparity is made wider when considering gender. Although

people of all genders with disabilities had lower median earnings than their counterparts without disabilities, men with disabilities had median earnings of \$12,618.91 more than women with disabilities in 2020.¹² While some of these differences may be explained by hours worked or industries of employment, without equitable wages, people living with disabilities may face additional barriers to good health and well-being.

In Missouri, some individuals with disabilities are employed in sheltered workshops. Sheltered workshops were designed as a stepping-stone to the mainstream workforce for people with disabilities. However, between 2017 and 2022, only 2.3% of the 6,000 people employed at sheltered workshops in Missouri went on to join the workforce.¹⁹ These workshops are able to pay employees with disabilities less than minimum wage, with some earning less than two dollars an hour. The average earnings for these workers across the state of Missouri was less than \$4 an hour.¹⁹ While we lack the data to pinpoint exactly where people in EJC may be employed in sheltered workshops, they do exist in Jackson County and employment in sheltered workshops may contribute to the disparity in earnings between people with disabilities and people without disabilities in EJC.²⁰

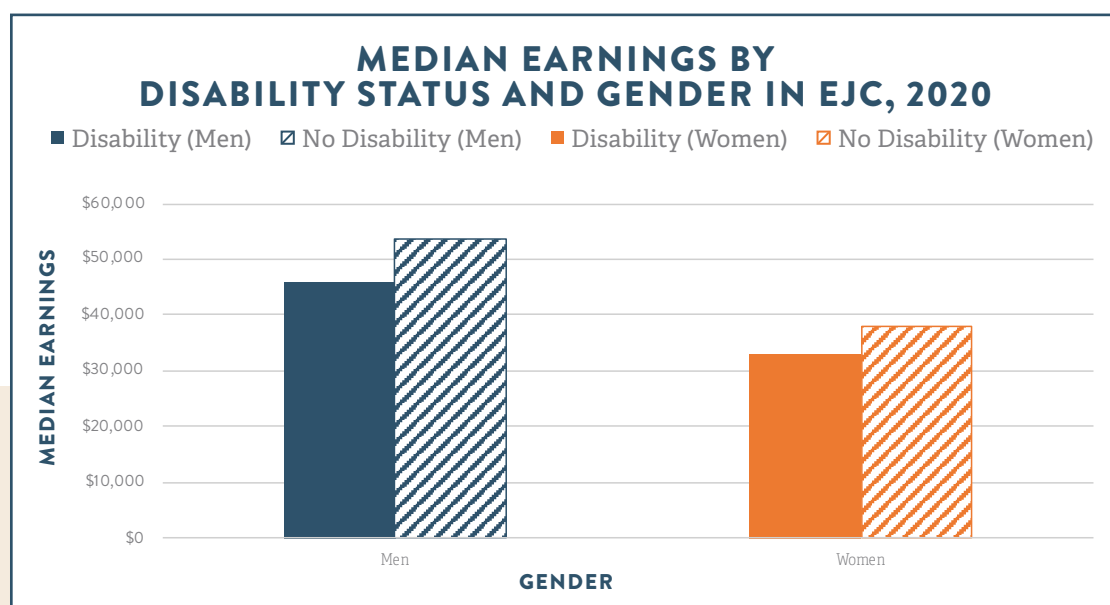


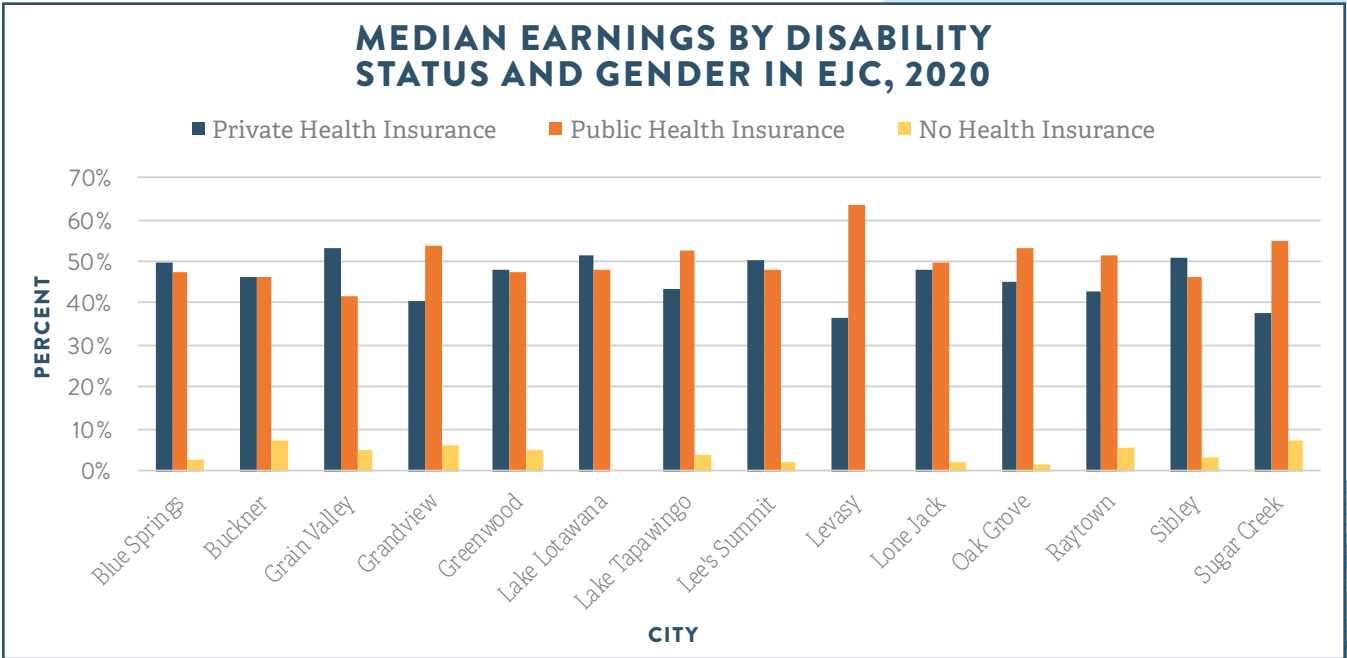
Figure 22: Eastern Jackson County Median Earnings by Disability Status and Gender, 2020.

Source: US Census Bureau; American Community Survey (ACS), 2020.

HEALTH INSURANCE

People with disabilities often have greater and potentially more complex medical needs than individuals without disabilities. As a result, having health insurance is imperative for economic stability and well-being. While 7% of all EJC residents are uninsured, fewer than 4% of individuals with disabilities were uninsured in 2020. Of the people with disabilities that were insured, about half held private health insurance (47.1%) and half had public insurance (49.3%).¹²

Figure 23: Eastern Jackson County Disability and Insurance Type (Private, Public, or None) by City, 2020.
Source: US Census Bureau; American Community Survey (ACS), 2020.



Education

WHAT IS IT?

This section explores a variety of topics surrounding the status of the education system within Eastern Jackson County (EJC). These topics include public school enrollment numbers, educational attainment among residents, and graduation and dropout rates. Other factors influencing one's education such as rates of free/reduced lunch prices and the cost of childcare are also addressed.

WHY IS IT IMPORTANT?

Education can lay the foundation for future opportunities and lead to positive health outcomes. It has been found that adults with a higher level of educational attainment live “healthier and longer lives” when compared to adults with less education.²¹

KEY FINDINGS

- *EJC residents aged 25+ in Levasy, Sibley, and Sugar Creek are less likely to have graduated high school compared to adults in other EJC communities.¹²*
- *Nearly half of the total survey population (44.34%) identified high quality public schools as a significant strength in their community.*
- *EJC school districts achieved a graduation rate of 92.4%, surpassing the national graduation rate of 91.1% in 2021.^{22,23}*
- *Among EJC School Districts, Grandview and Raytown both experience lower graduation rates and higher enrollment in free/reduced lunch programs compared to rates within EJC and across Missouri. They also have the highest dropout rates among EJC communities.^{22,24,25}*
- *50.7% of EJC communities live in a childcare desert lacking access to licensed providers.⁸*
- *17.4% of EJC communities live in a childcare desert lacking access to both licensed and unlicensed providers.⁸*

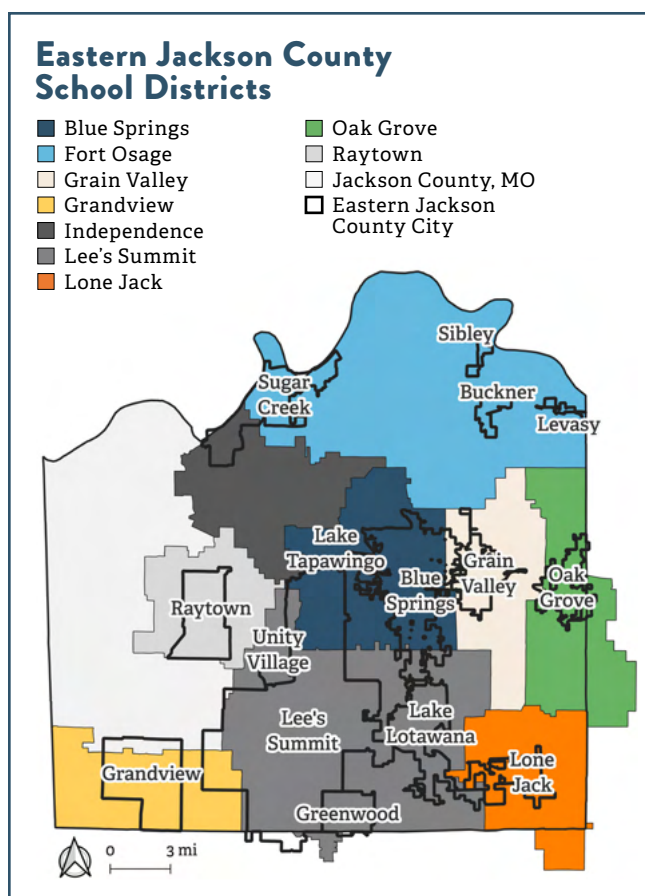


SCHOOL DISTRICTS

In Eastern Jackson County (EJC), 56,530 students between Pre-K and 12th grade were enrolled in public schools for the 2021-2022 school year in the following eight school districts: Blue Springs R-IV, Fort Osage R-1, Grain Valley R-5, Grandview C-4, Lee's Summit R-VII, Lone Jack C-6, Oak Grove R-VI, and Raytown C-2. The Independence 30 school district, which includes both Independence and Sugar Creek, had 14,604 students enrolled. In the 2019-2020 school year, 99.12% of EJC youth attended a public school, while 0.88% attended a private institution.²³

Figure 24: Eastern Jackson County School Districts, 2022.

Source: Missouri Department of Elementary and Secondary Education (MDESE)



ENROLLMENT BY SCHOOL DISTRICT, 2021-22 SCHOOL YEAR		
DISTRICT	PRE-K ENROLLMENT	K-12 ENROLLMENT
Blue Springs R-IV	179	14,621
Fort Osage R-1	116	4,693
Grain Valley R-V	91	4,467
Grandview C-4	131	3,636
Lee's Summit R-VII	300	17,541
Lone Jack C-6	65	703
Oak Grove R-VI	55	1,891
Raytown C-2	284	7,757
Independence 30	824	13,780

Table 1: Eastern Jackson County and Independence, MO Attendance in School Districts, 2021-2022.

Source: Missouri Department of Elementary and Secondary Education; Missouri Comprehensive Data System, 2021-2022

EDUCATIONAL ATTAINMENT

EDUCATIONAL ATTAINMENT BY CITY IN EJC, 2020				
CITY	LESS THAN HIGH SCHOOL GRADUATE	HIGH SCHOOL GRADUATE OR HIGHER	BACHELOR'S DEGREE OR HIGHER	GRADUATE OR PROFESSIONAL DEGREE
Blue Springs	4%	96%	34%	11%
Buckner	12%	88%	22%	2%
Grain Valley	7%	94%	24%	8%
Grandview	10%	90%	21%	7%
Greenwood	3%	98%	31%	10%
Independence	10%	90%	20%	7%
Lake Lotawana	2%	98%	62%	21%
Lake Tapawingo	1%	99%	39%	16%
Lee's Summit	3%	97%	48%	18%
Levasy	51%	49%	13%	8%
Lone Jack	2%	98%	33%	13%
Oak Grove	10%	90%	17%	5%
Raytown	7%	93%	22%	7%
Sibley	20%	80%	12%	0%
Sugar Creek	17%	83%	10%	1%
Unity Village	6%	94%	61%	24%

Table 2: Eastern Jackson County Educational Attainment by City, 2020 U.S. Census

Source: U.S. Census Bureau; 2020 American Community Survey (ACS), 2020

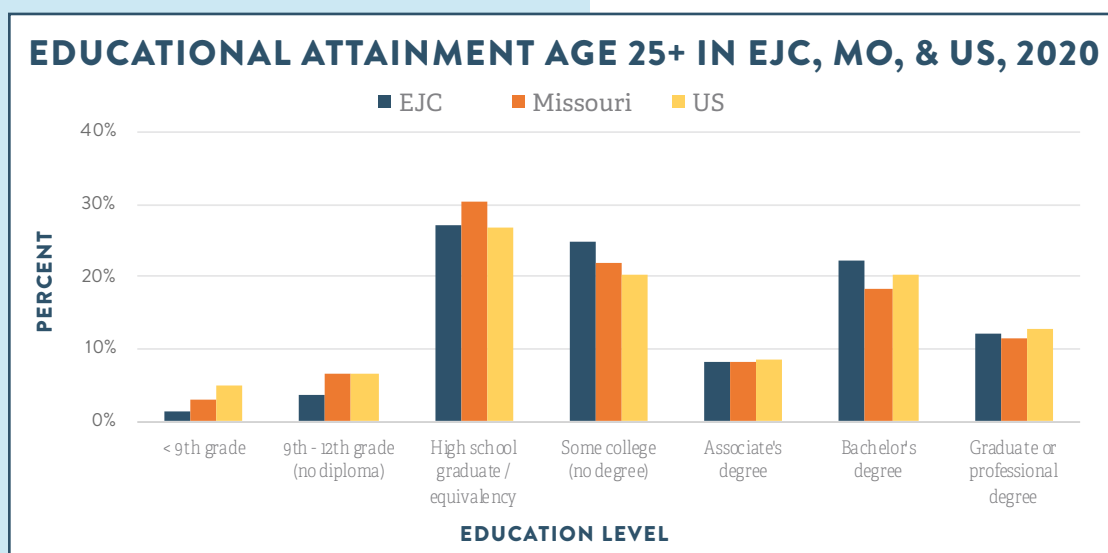


Figure 25: Eastern Jackson County, Missouri, and US Educational Attainment for 25+ Population, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

EDUCATIONAL ATTAINMENT (CONT'D)

Across the United States as of 2020, 89% of adults over the age of 25 have completed high school education or higher, compared to 91% in Missouri and 95% of Eastern Jackson County (EJC).¹² When looking at educational attainment by EJC cities, adults aged 25+ in Levasy, Sibley, and Sugar Creek are less likely to have graduated high school (less than 85%) than adults in other EJC communities (more than 85%). In Lake Lotawana and Unity Village, over 60% of adults additionally have a bachelor's degree or higher.

GRADUATION RATES

In the United States, graduation rates increased from 87.6% in 2011 to 91.1% in 2021.²² As of the 2021-22 school year, the Missouri graduation rate was slightly higher than the national average at 89.8%. EJC school districts had an average adjusted cohort graduation rate of 92.4%, while the Independence school district had a graduation rate of 93.9%.²³



4-YEAR GRADUATION RATE BY SCHOOL DISTRICT AND SCHOOL YEAR, 2019-2020 TO 2021-2022

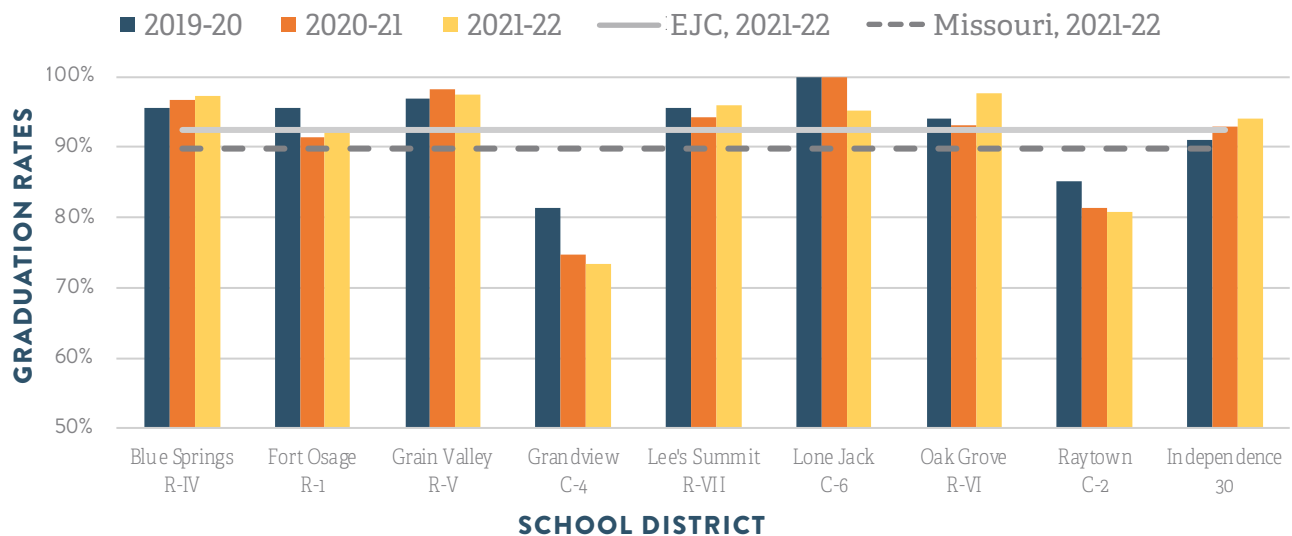


Figure 26: Eastern Jackson County Graduation Rate by School District, 2020-2022.

Source: Missouri Department of Elementary and Secondary Education.

FREE / REDUCED PRICE LUNCH

The National School Lunch Program (NSLP) is a federal program that provides income-eligible students with free or reduced-price lunch (FRPL). The FRPL eligibility percentage at a school can be used as an estimate for the concentration of low-income students within that school. If schools have greater than 75% of students meeting eligibility criteria for FRPL, this implies a high-poverty school. If schools have less than 25% of students meeting eligibility criteria for FRPL, this implies a low-poverty school. Across the US in 2019, 24% of students attending public high schools were enrolled at high-poverty

schools, and 20% were enrolled at low-poverty schools.²⁴ During the 2021-22 school year, 42% of Missouri students were eligible for FRPL. Within EJC, the percentage of students enrolled to receive FRPL has decreased over the last 5 years across most districts. In the 2021-22 school year, five school districts within EJC had FRPL eligibility percentages below both the state percentage and the low-poverty indicator of 25%: Blue Springs R-IV, Grain Valley R-V, Lee's Summit R-VII, Lone Jack C-6, and Oak Grove R-VI. Four school districts had higher percentages of FRPL eligibility: Fort Osage R-I, Grandview C-4, Raytown C-2, and Independence 30.²³

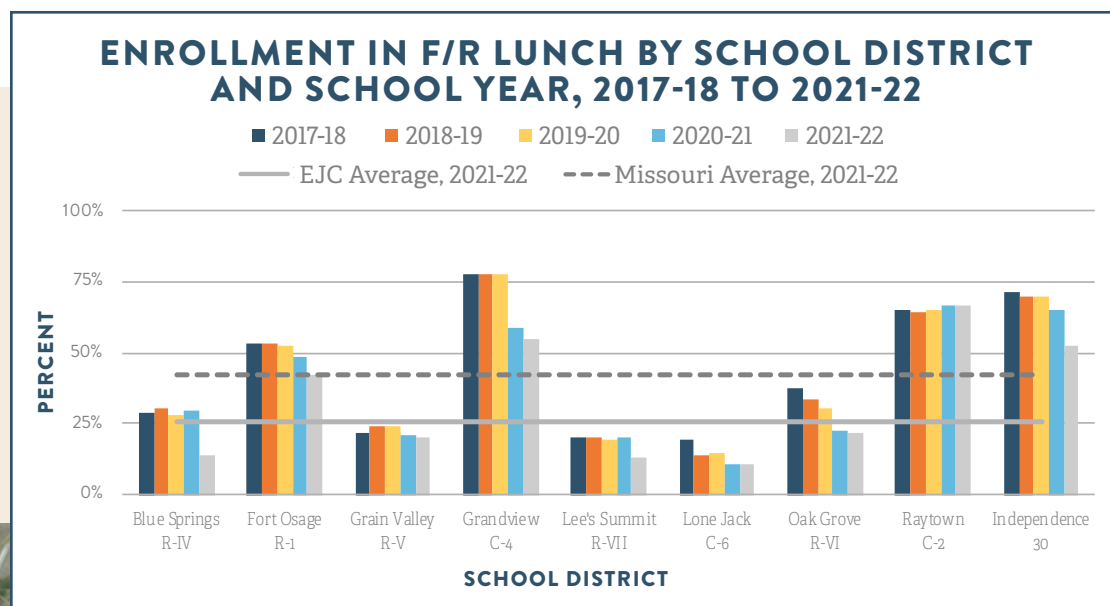
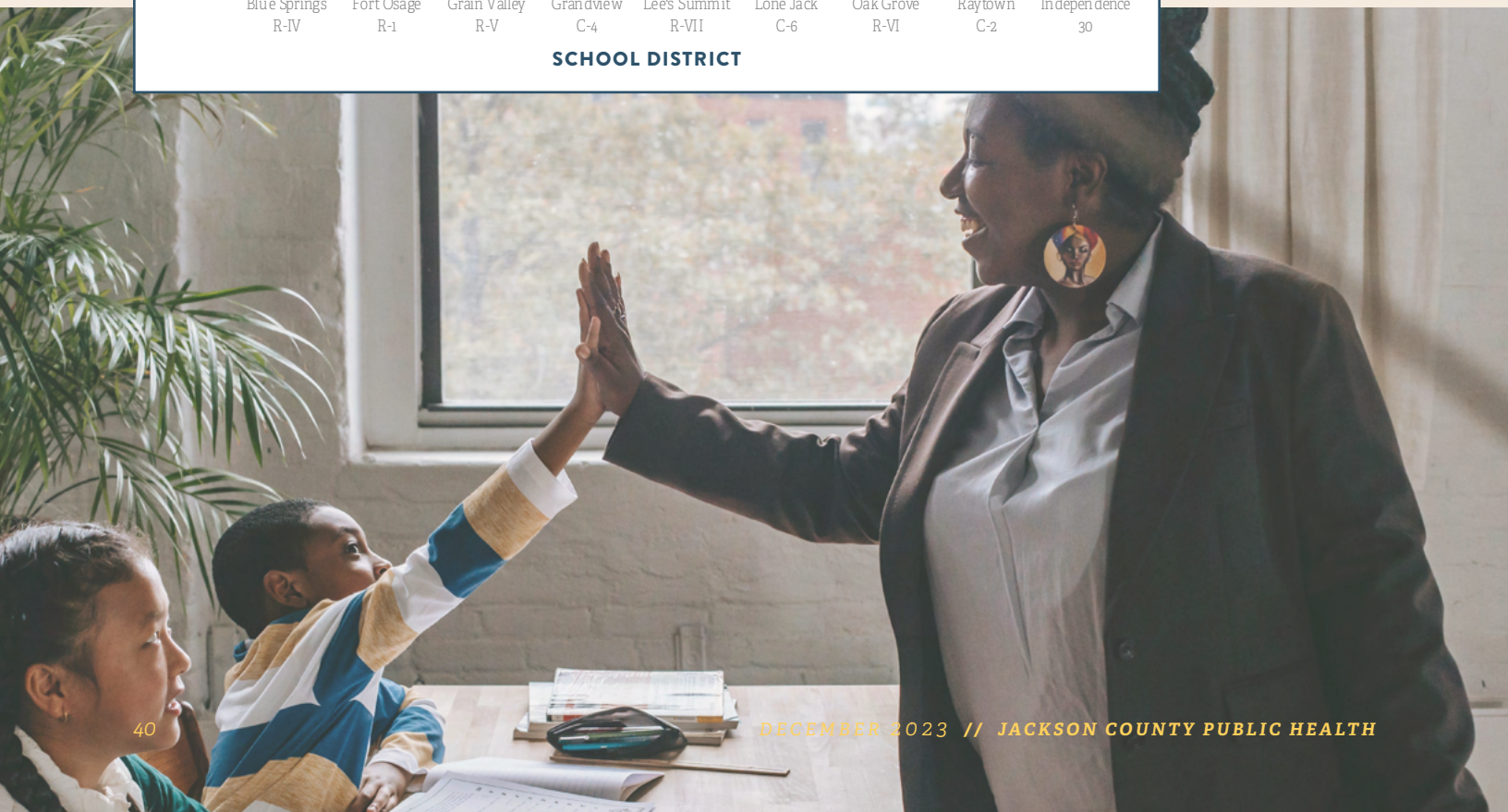


Figure 27: Eastern Jackson County Student's Enrolled in Free/Reduced Lunch, 2017-2018 to 2021-2022 School Years.

Source: Missouri Department of Elementary and Secondary Education.



DROPOUT RATES

Across the United States in 2020, student dropout rates were at 5.3%, with 2 million 16- to 24-year-olds neither enrolled in high school nor holding a high school equivalency diploma.²⁵ As of the 2021-22 school year, the dropout rate was 1.9% in Missouri.²⁶ Dropout rates for most school districts have stayed consistent over the last 5 school years. The exceptions are Grandview, Raytown, and Independence, where dropout rates greatly increased in the 2021-22 school year.²³

In the CHA Survey, EJC residents were asked to identify if high-quality public schools were a significant, moderate, slight, or not a strength in

their community. Of respondents, 67% identified high-quality public schools as a significant or moderate strength in their communities. Roughly 6% reported that high-quality public schools were not a strength and these responses varied by community. Respondents living in Lone Jack (11%), Grandview (10%), Raytown (9%), and Sugar Creek (9%) were most likely to select “Not a Strength” when asked about the public schools in their community. Respondents from Lee’s Summit (2%), Blue Springs (2%), and Grain Valley (1%) were least likely to select “Not a Strength” when asked about the public schools in their community.

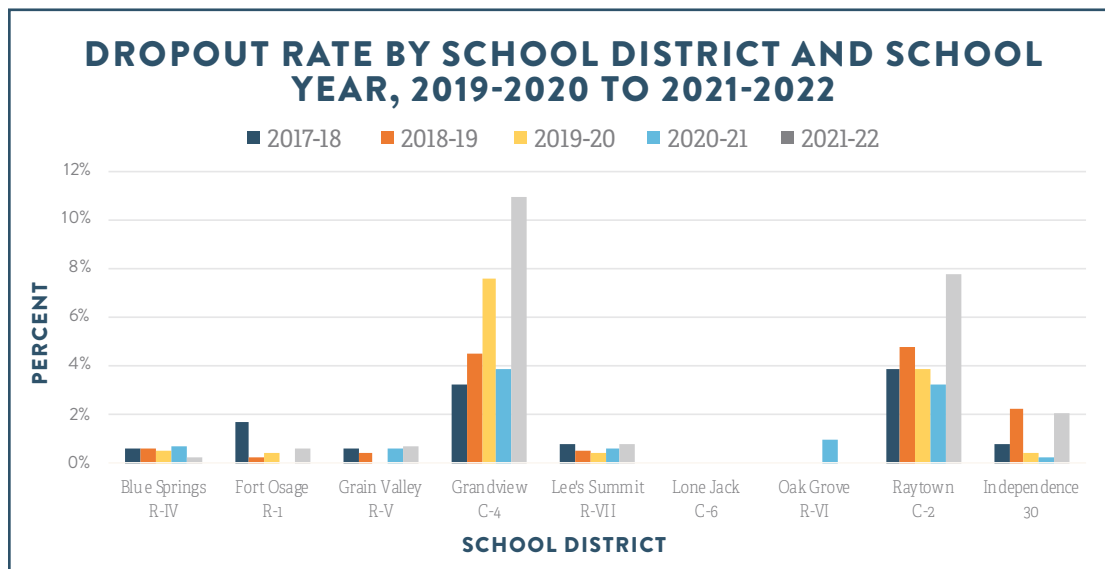


Figure 28: Eastern Jackson County Dropout Rate by School District, 2017-2018 to 2021-2022 School Years.

Source: Missouri Department of Elementary and Secondary Education.

To protect privacy, some information is suppressed and unavailable for certain districts.

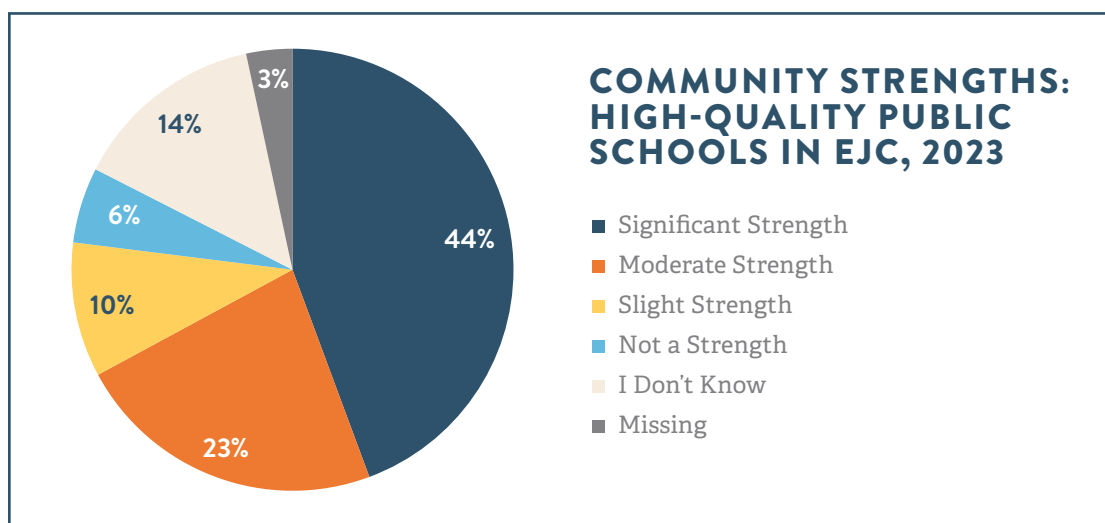


Figure 29: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: Strength in High-Quality Public Schools.

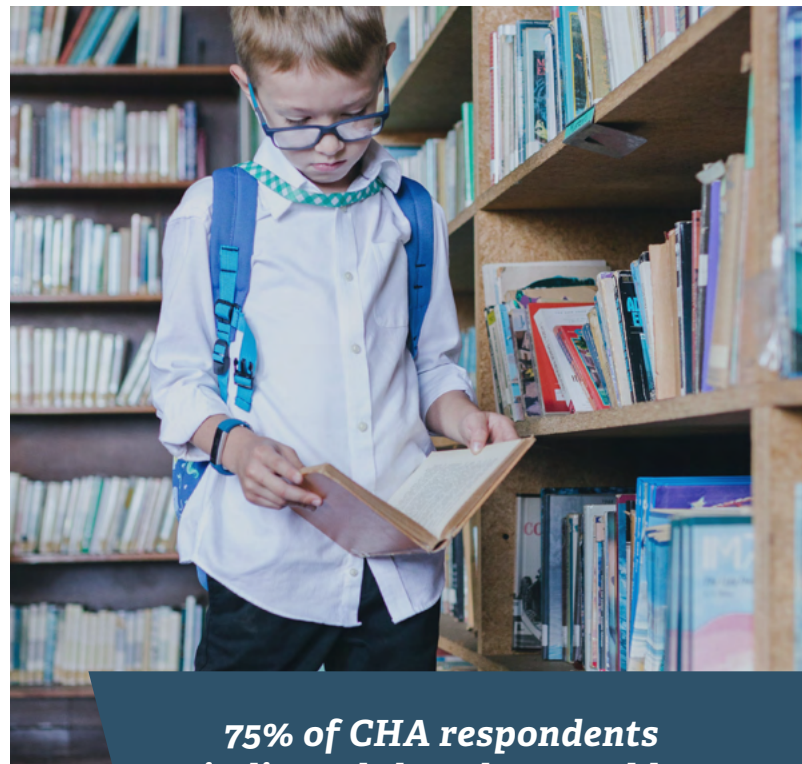
Source: Jackson County Public Health; 2023 CHA Survey.

CHILDCARE

Childcare services provide an opportunity for early socialization and learning development in children while allowing parents to remain in the workforce if desired. Quality childcare that is both affordable and accessible is a necessity for household stability.²⁷ Unfortunately, many parents struggle to afford childcare, a necessity for maintaining employment, and as a result parents are often forced to reduce work hours and face further financial difficulty.

The U.S. Department of Labor's Women's Bureau tracks the increasing costs of childcare around the country and EJC has followed the national trend. Between 2015 and 2018, the median cost of one week of full-time infant care in a daycare facility increased by 34% in EJC, from \$139.03 to \$210.72. Similarly, the median cost of daycare center care for toddlers increased by more than 50%, and daycare for school-aged children nearly doubled. Home-based daycare prices maintained lower median costs but increased at the same rates. During that period, median household income in Jackson County only increased by 11%. Earnings for single-parent households increased at a slower rate. To be truly affordable, the U.S. Department of Labor estimates that a family should spend no more than 7% of their monthly income on childcare.²⁸ However, adjusting for inflation to 2022, Jackson County families may be spending 16% of their annual household income (median family income is \$68,568) on infant care and 9-12% of their income on care for toddlers, preschoolers, and school-aged children per child.²⁹ When wages cannot keep up with the increasing costs of childcare, families may be priced out of quality childcare services. One in three CHA Survey respondents in Sugar Creek, Sibley, Lake Lotawana, and Buckner reported accessing affordable and high-quality childcare was a significant or moderate problem in their communities. Black (35%) and Hispanic/Latino (35%) respondents were more likely to report accessing childcare was a challenge than White respondents (27%).

Affordability becomes a moot point when there is no childcare available in a community. A childcare desert occurs when a community's



75% of CHA respondents indicated that they would support Universal Pre-K.

number of children under age five is more than triple the available space in licensed childcare centers. A total childcare desert occurs when there is more than triple the demand for all state-registered childcare providers in an area (including licensed and license-exempt providers).⁸ For example, if there are four children under age five in a community for every one space in a licensed daycare, that community may be a childcare desert.

In EJC, more than 50% of the population lives in a childcare desert lacking access to licensed providers, and 17.4% of the population lives in a total childcare desert, as of 2022. Pre-kindergarten programs can help to alleviate some childcare needs. While many EJC school districts do offer Pre-K for children three to four years of age, these classrooms prioritize enrollment of children that test below school readiness, which may limit general enrollment. Three out of four CHA Survey respondents indicated that they would support universal Pre-K policies. Only 7% of respondents reported that they would not support such policies.

COMMUNITY CONCERNS: ACCESS TO AFFORDABLE, HIGH-QUALITY CHILDCARE BY CITY, 2023

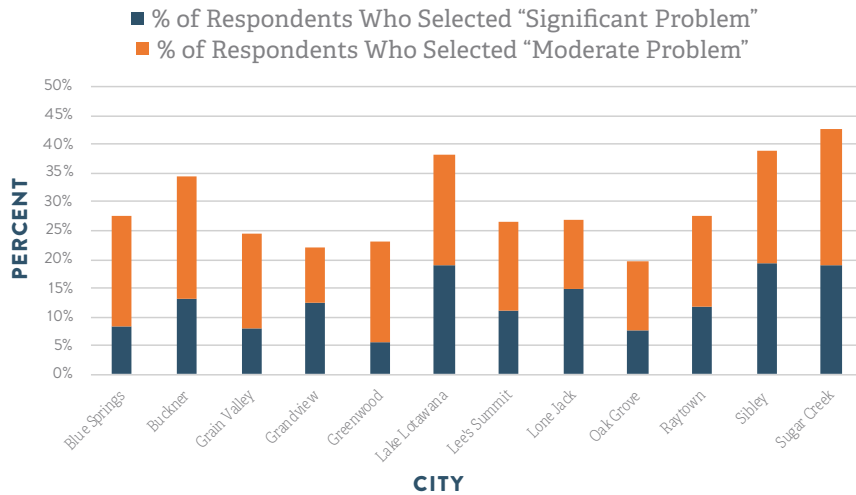


Figure 30: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses by City: Community Concerns about Access to Affordable, High-Quality Childcare.

Source: Jackson County Public Health; 2023 CHA Survey.

EJC CHILDCARE DESERT DESIGNATIONS BY CITY, 2023

CITY	STATUS
Blue Springs	Licensed childcare desert
Buckner	Total childcare desert
Grain Valley	Adequate childcare options
Grandview	Licensed childcare desert
Greenwood	Total childcare desert
Lake Lotawana	Licensed childcare desert
Lake Tapawingo	Adequate childcare options
Lee's Summit	Adequate childcare options
Levasy	Adequate childcare options
Lone Jack	Total childcare desert
Oak Grove	Adequate childcare options
Raytown	Total childcare desert
Sibley	Total childcare desert
Sugar Creek	Total childcare desert
Unity Village	Adequate childcare options

Table 3: Eastern Jackson County Child Care Desert Designations by City, 2022.

Source: Missouri Department of Health and Senior Services; Jackson County Public Health.

17.4% of EJC's population lives in a total childcare desert, as of 2022

Economic Stability

WHAT IS IT?

According to The Network for Public Health Law, “economic stability means that people have the resources essential to a healthy life”. Factors affecting “economic stability include affordable housing; employment that provides a living wage; things that support employment, like worker protections, paid sick leave, and childcare; and access to reliable transportation.”³⁰

WHY IS IT IMPORTANT?

Economic stability is a key social determinant of health, meaning that individuals living in safe, healthy homes and earning a living wage are more likely to have longer, healthier lives than individuals who may be experiencing poverty, living in unstable or unsafe housing, or struggling to make ends meet. People experiencing economic instability have a higher likelihood of partaking in health risk behaviors, suffering from chronic illnesses, and facing a premature death.

KEY FINDINGS

Income & Poverty

- Approximately 7% of Eastern Jackson County (EJC) residents live below the poverty level.¹²
- The poverty rate for White residents is below the average EJC poverty rate, while all other racial groups experience poverty rates higher than the average rate of EJC.¹²
- Around 9% of children under 18 in EJC live in poverty – more than one-third of the total population live in poverty.¹²
- One in five Community Health Assessment (CHA) Survey respondents reported concerns about paying bills or providing food for their household in the past year.

Housing

- 42% of renters and 20% of homeowners in EJC are cost burdened, spending more than 30% of their household income on housing costs.¹²
- White and Asian residents are more likely to own a home in EJC compared to Black, Indigenous, and Native Hawaiian and Pacific Islander residents, who are more likely to be renters.¹²
- About 10% of EJC CHA Survey respondents expressed concern about potential eviction and housing insecurity.

Transportation

- One in two CHA respondents identified public transportation as a significant or moderate problem within their community.
- Grandview and Sugar Creek have the lowest rates of households with at least one vehicle.¹²
- Within EJC, there are only four bus routes, originating from Blue Springs, Lee's Summit, and Raytown.

Income & Poverty

Income shapes many areas of our lives, including where we live, the stability of our living arrangements, conditions within our homes, the schools we attend, the recreational opportunities we pursue, the food we eat, and so much more. Studies demonstrate that Americans at all income levels, including residents of Eastern Jackson County (EJC), are less healthy than those with incomes higher than their own. Furthermore, the greater one's income, the lower the likelihood of disease and premature death.

According to the 2020 Census, the average median income in EJC is \$78,265. Approximately one-third (31.7%) of EJC residents have a median income below \$50,000, 33.8% have an income in the \$50,000- \$99,999 range, and 34.5% have a median income of over \$100,000. In 2020, cities within EJC with the highest median income were Lake Lotawana, Lone Jack, and Lee's Summit, all of which had above- average median household incomes for EJC.¹²

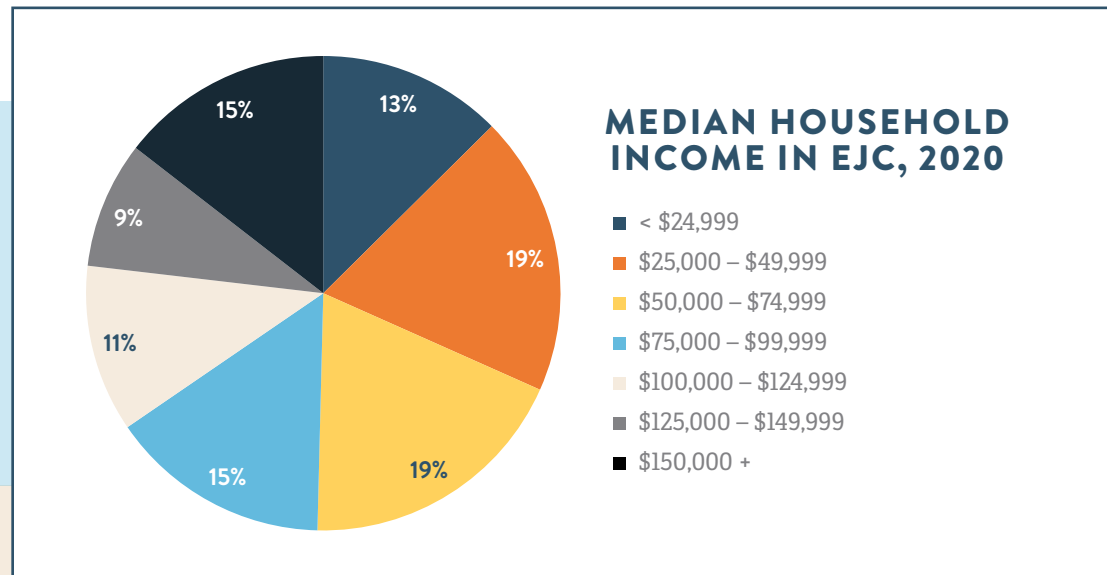


Figure 31: Eastern Jackson County Median Household Income, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

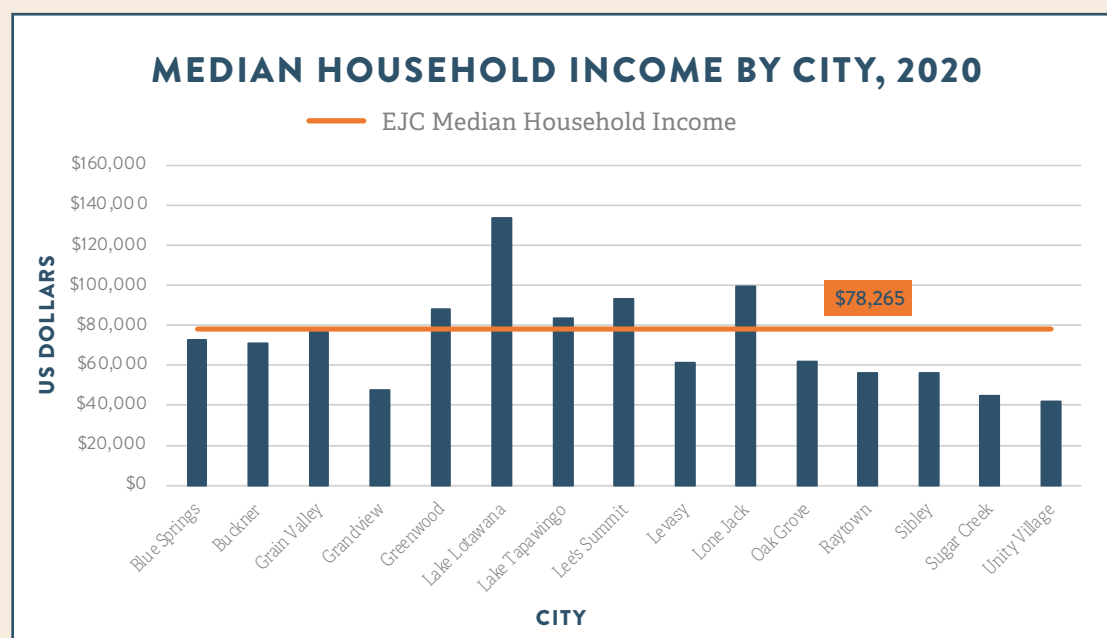


Figure 32. Eastern Jackson County (EJC) Median Household Income by City and Overall EJC, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

INCOME

In EJC, the connection between health status and income was observed in responses from the Community Health Assessment (CHA) Survey, as residents making over \$50,000 were more likely to report “Excellent” or “Very Good” health than those making under \$50,000.

Seventeen percent of CHA Survey respondents worried about running out of food prior to having more money, while 19% had to choose between buying groceries or paying another bill at least once within the past 12 months. About 1 in 5 respondents had some concern with paying bills or providing food for their household in the past 12 months.

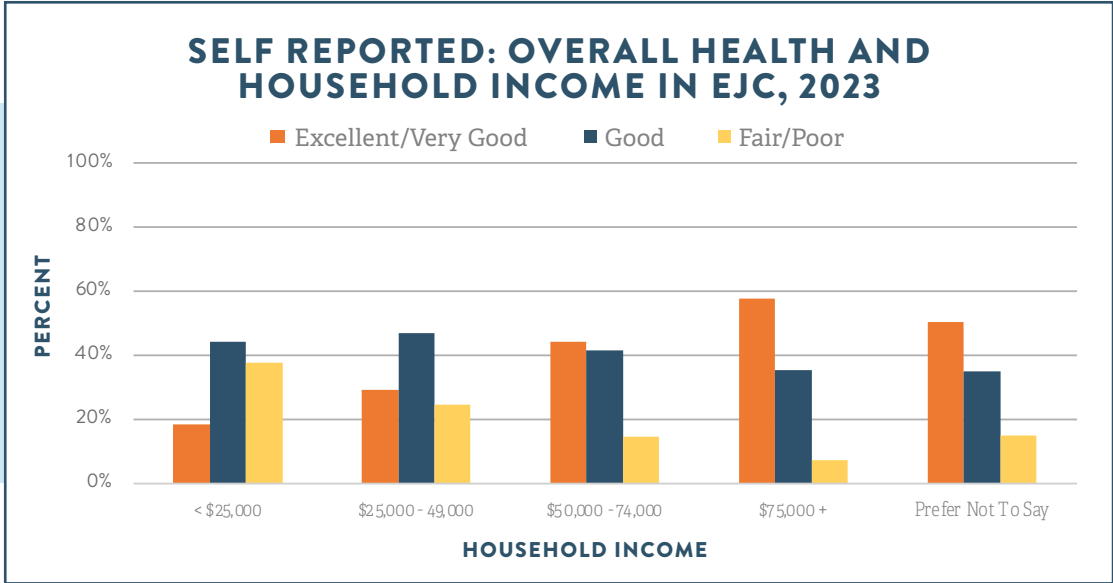


Figure 33: Eastern Jackson County Self-Reported General Health Status by Annual Household Income, 2023.

Source: Jackson County Public Health; 2023 CHA Survey.

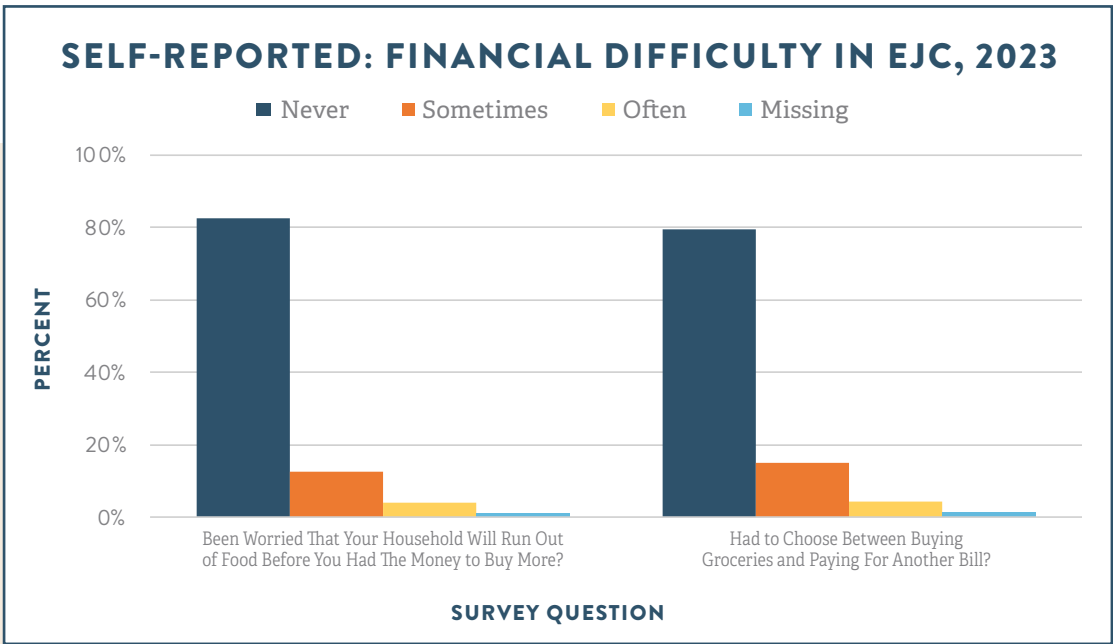


Figure 34: Eastern Jackson County Self-Reported Financial Burdens: Food and Groceries, 2023.

Source: Jackson County Public Health; 2023 CHA Survey.

PEOPLE WITH LOWER INCOMES LIVE SHORTER LIVES

While American retirees at age 65 are living longer, the amount by which they live longer is different when looking at earnings.

In the United States, males with earnings in the 50-100th percentile have a life expectancy of 6 years longer than those with earnings in the bottom half percentile.³¹ In EJC, 6 ZIP Codes have shorter life expectancies than the US and Missouri average (79 years) and above-average percentages of people living in poverty. Alternatively, there are seven ZIP Codes with longer life expectancies than the state and national average and below-average percentages of people living in poverty. Four EJC ZIP Codes have unexpected relationships between life expectancy and income - longer life expectancy with high poverty or shorter life expectancy with lower poverty.^{12,32}

Forty percent of CHA Survey respondents reported low-paying jobs are a “significant” or “moderate” concern in their communities. More than half of respondents living in Sibley, Sugar Creek, and Buckner indicated that low-paying jobs were a significant or moderate problem in their communities.

LIFE EXPECTANCY AND POVERTY

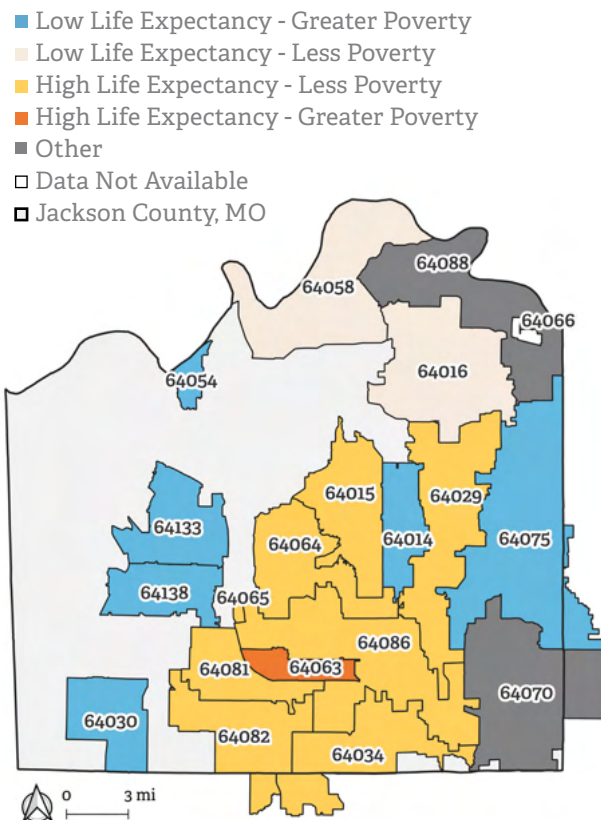


Figure 35: Eastern Jackson County Life Expectancy and Poverty Relationship by ZIP Code, 2020.

Source: US Census Bureau; American Community Survey (ACS); Missouri Department of Health and Senior Services (MDHSS).

COMMUNITY CONCERN: LOW-PAYING JOBS BY CITY, 2023

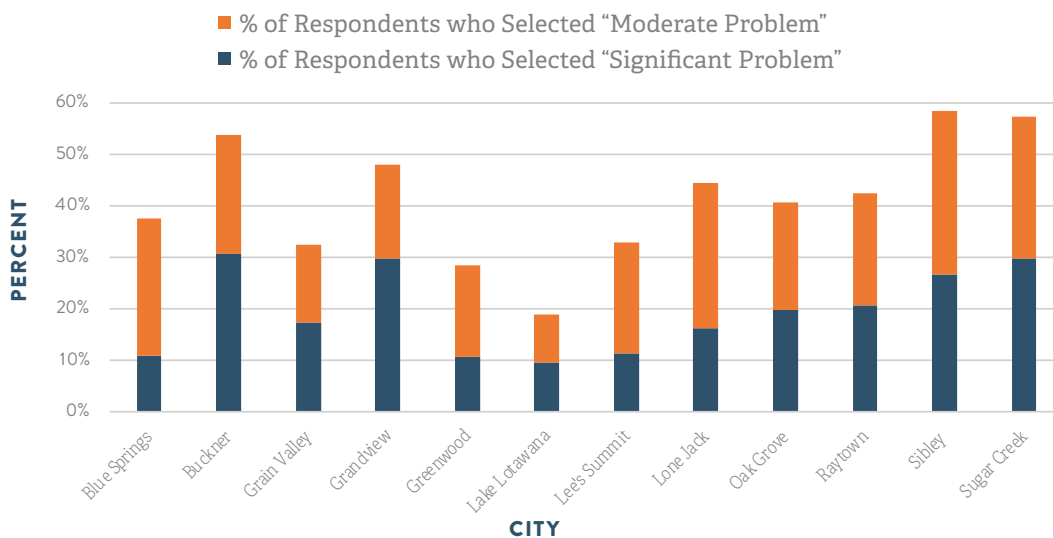


Figure 36: Eastern Jackson County Community Concerns Regarding Low-Paying Jobs by City, 2023.

Source: Jackson County Public Health; 2023 CHA Survey.

POVERTY

In the United States, poverty is measured using a set federal threshold. Individuals are considered impoverished if they make below \$12,880 individually, or \$26,500 for a family of four, per the 2021 adjustment.³³ Individuals living in poverty across the lifespan are at an increased risk of serious health issues, including mental health conditions, chronic disease, lower life expectancy, and early mortality. In 2020, the US poverty rate increased to 11.4% following five consecutive years of decline. According to the U.S. Census Bureau, 13% of Missourians live below the poverty line, nearly twice as high as the poverty rate in EJC (7%).³⁴ From 2015-2020, the EJC population living in poverty steadily decreased.

Growing up or living in an area with concentrated poverty creates additional barriers to economic mobility. Geographic concentrations of poverty in EJC by census tract are shown in Figure 37. Poverty rates in EJC also differ for people who identify as American Indian and Alaska Native (9%), Asian (8%), Black (12%), Hispanic or Latino (10%), Native Hawaiian and Pacific Islander (16%), White (6%), other race not specified (12%), or two or more races (8%). Only White EJC residents have an average poverty level below the EJC average of 7%, a trend also reflected in national data. Those who live in regions that are more rural, or are individuals with disabilities, often face higher poverty rates.

Individuals who experience poverty are less likely to have access to crucial resources needed to live their healthiest lives. Poverty can also affect the ability to achieve higher educational

attainment, further contributing to a cycle of instability.³³

A 2016 research study showed men and women whose income place them in the top one percent of earners are expected to live 14.6 and 10.1 years longer, respectively, compared to men and women whose income places them in the bottom one percent.³⁵ The effects of poverty on an individual's overall health are substantial and those health issues can follow them for the rest of their lives.

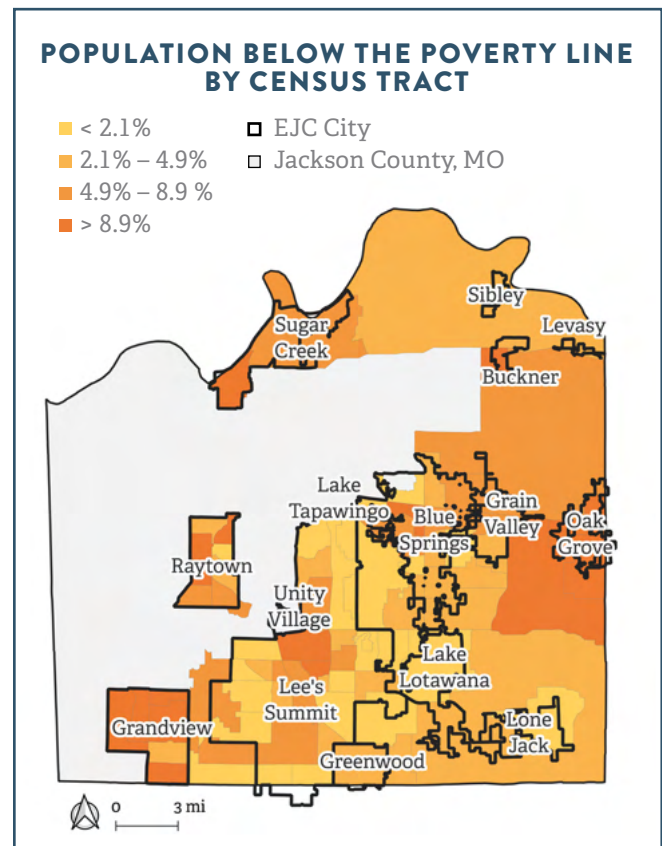


Figure 38: Eastern Jackson County Percent Living Below the Poverty Line by Census Tract, 2020.

Source: US Census Bureau; American Community Survey (ACS).

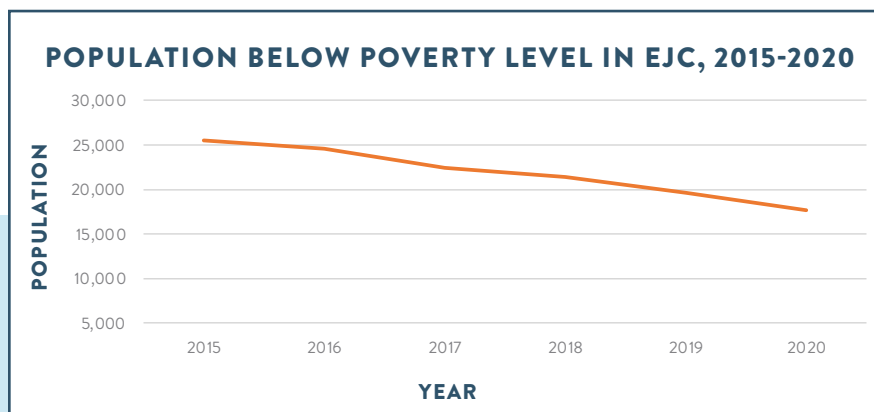


Figure 37: Eastern Jackson County Population below Poverty Level, 2015-2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2015-2020.

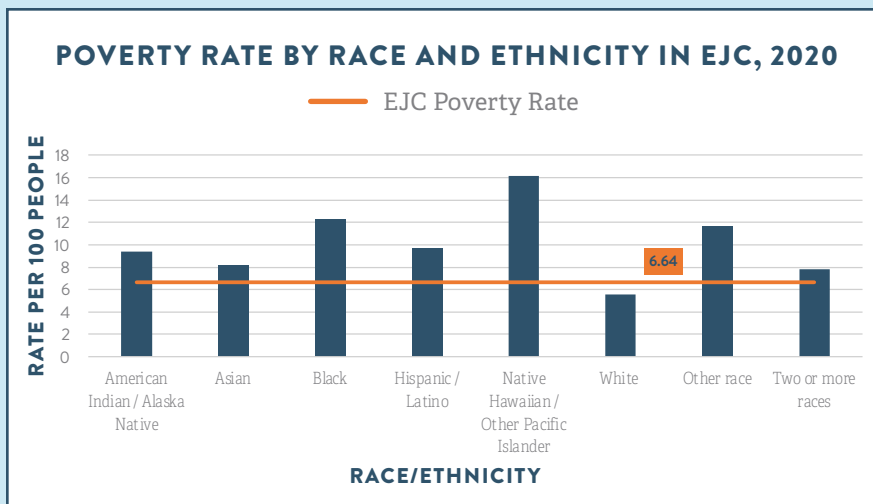


Figure 39: Eastern Jackson County Poverty Rate per 100 People by Race, 2020

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

CHILDHOOD POVERTY

Unfortunately, in the United States, it is estimated that 1 in 6 children live in poverty and of those children, 73% are children of marginalized racial or ethnic groups. According to the U.S. Census Bureau, approximately 9% of children under 18 years old in EJC experience poverty and account for over one-third of all people living in poverty.¹²

Childhood poverty is associated with developmental delays, toxic stress, chronic illness, and nutritional deficits. It is important for children to receive all the resources possible to help with growth and development, resources that impoverished children are not obtaining. It has been found that children who are born into low-income households experience higher cortisol levels associated with the stressors of poverty during gestation, which can result in slower childhood development.

It is estimated that 6.4% of children who are born into poverty will spend their entire lives in poverty. Children growing up in poverty are in general more likely to experience poverty as adults, furthering the generational cycle of poverty.³⁶

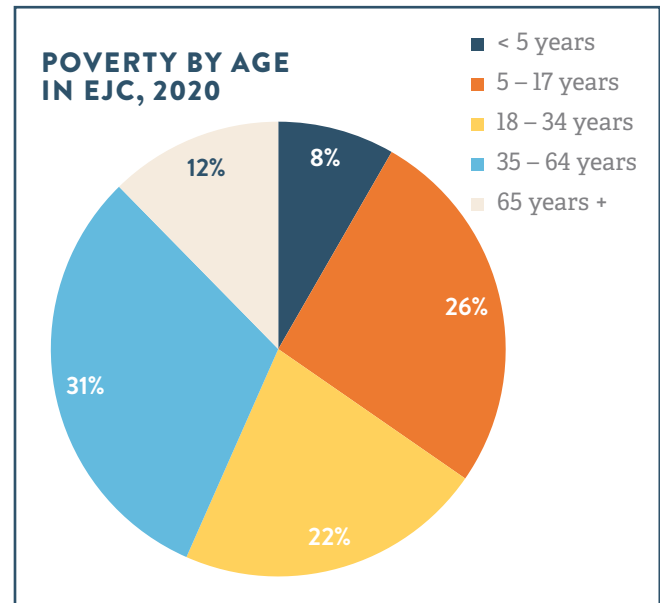


Figure 40: Eastern Jackson County Poverty by Age, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

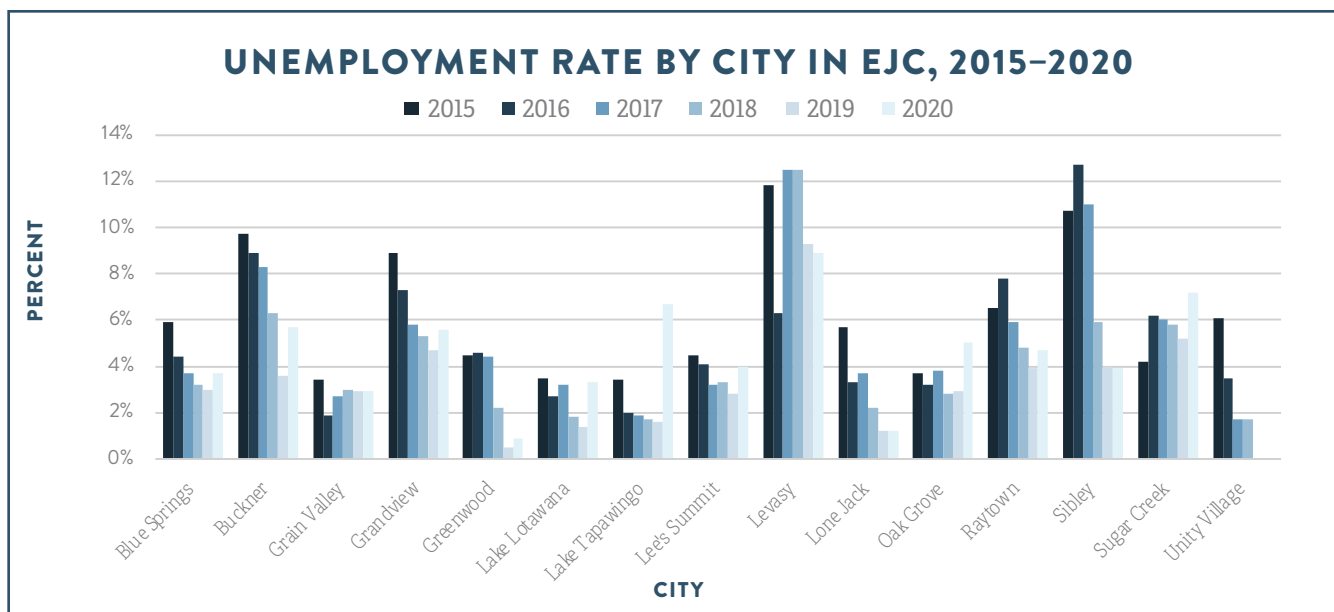


Figure 41: Eastern Jackson County Unemployment Rate by City, 2015-2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2015-2020.

UNEMPLOYMENT & EARNING POTENTIAL

Prior to 2020, rates of unemployment in the United States had been on a steady decline since January 2010. In April 2020, the United States watched unemployment rates nearly quadruple due to the mass layoffs and cuts companies made due to the pandemic. As of July 2023, unemployment rates have almost dropped back to pre-pandemic rates.³⁷

In 2020, unemployment rates were highest in Levasy, Sugar Creek, and Lake Tapawingo and lowest in Greenwood, Lone Jack, and Grain Valley. Taking a closer look, rates of unemployment varied by census tract and ranged from as low as 0.7% to as high as 14% for census tracts with measurable amounts of unemployment in 2020. Between 2015 and 2019, unemployment rates trended downward for all cities except Sugar Creek, which saw a 1% increase in unemployment. However, unemployment rates then increased between 2019 and 2020 for almost all cities in EJC, with the exceptions of Levasy and Sibley.¹²

Unemployment can cause many negative health outcomes both physically and mentally. Individuals who are unemployed often state that they experience depression and anxiety, and generally suffer at higher rates than employed persons from stress-related conditions like high blood pressure, stroke, heart attack, heart disease, and arthritis.³⁸

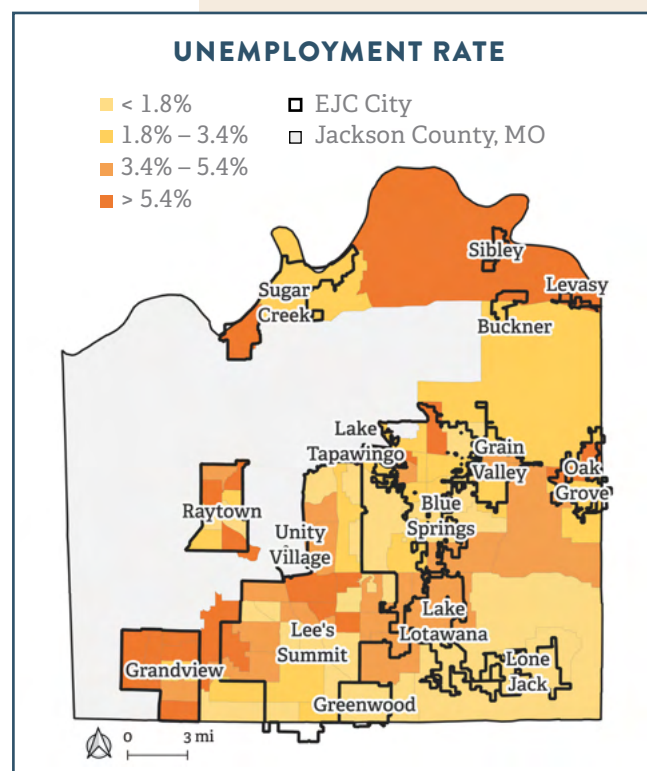


Figure 42: Eastern Jackson County Unemployment Rates by Census Tract, 2020.

Source: US Census Bureau; American Community Survey (ACS).

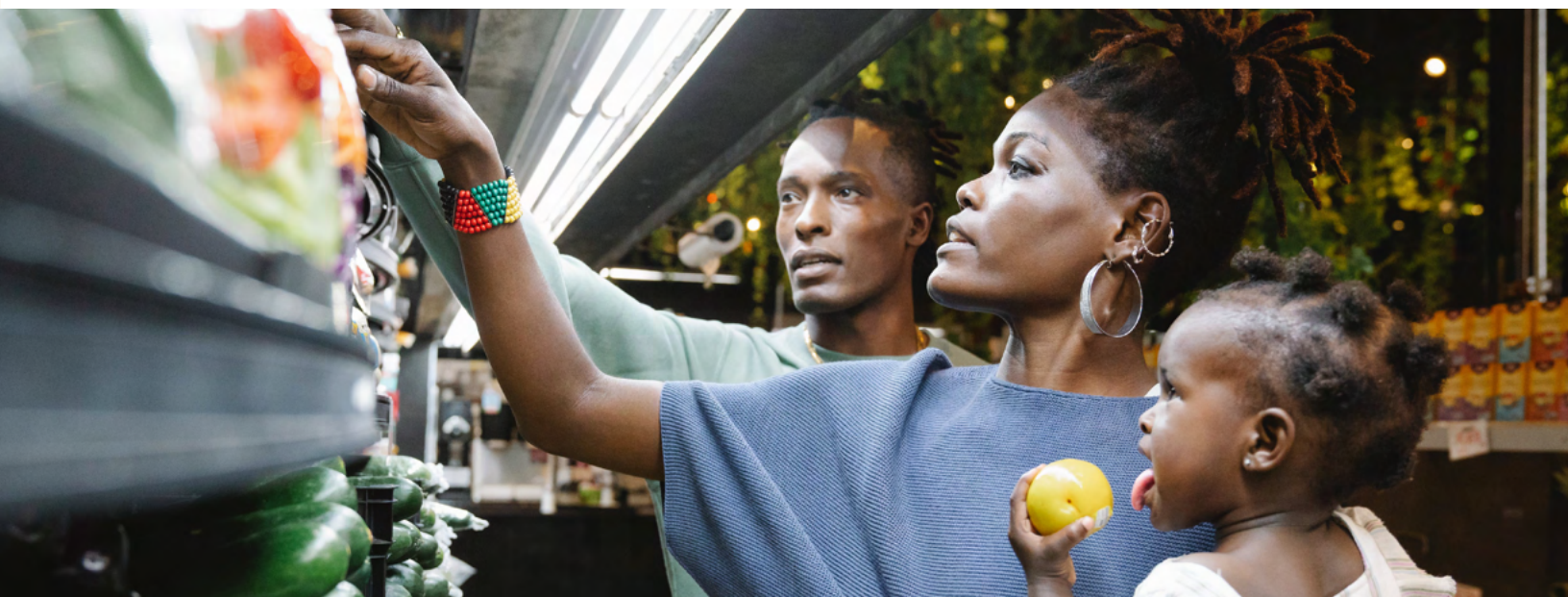
COST OF LIVING

Beginning January 1, 2023, Missouri's state minimum wage increased from \$11.15 per hour to \$12.00 per hour as a result of the passage of Proposition B in 2018. This increase may not apply to certain employers, including retail and service businesses whose gross annual income is less than \$500,000. While the state minimum wage outpaces the federal minimum wage (\$7.35 per hour), the Massachusetts Institute of Technology (MIT) Living Wage Calculator estimates that a single adult without children living in Jackson County would need to earn at least \$17.19 per hour (approximately \$33,000 annually) to afford basic expenses. The MIT Living Wage Calculator also estimates that a household with two working adults and two children would need to earn \$95,082 annually to afford the additional costs associated with housing, food, medical expenses, childcare, transportation and other basic needs.³⁹

Four times each year, the Council for Community and Economic Research releases updates to their Cost-of-Living Index (COLI). The COLI measures the relative cost of living in each state or metropolitan area in the United States based on the changing prices of housing, utilities, groceries, transportation, healthcare, and "miscellaneous goods and services." Each state

and region's cost of living is described in relation to the national average. For example, COLI lists the United States' cost of living as 100.0 (average) on the index and Missouri's overall state cost of living as 90.1, indicating that Missouri tends to have a lower-than-average cost of living. However, the Kansas City metropolitan region has the highest cost of living in the state and higher average costs for housing and utilities than any other city in Missouri. Housing costs in the Kansas City region are higher than the national average and closer to the cost of housing in states like Delaware, Virginia, or New Hampshire than the rest of Missouri.⁴⁰

Another way to understand changes in the cost of living is through the Consumer Price Index (CPI), a measurement used by the U.S. Bureau of Labor Statistics to track the changes in prices paid by consumers for goods and services, such as groceries and energy. From December 2021 to December 2022, food prices increased by 10.4% nationwide, with the biggest increases on cereals and bakery products, such as bread (16.1% increase), and dairy products (15.3% increase). Utility costs also increased, accounting for the growing gas (19.3% increase) and electric (14.3% increase) bills that EJC households receive.⁴¹



Housing

Housing refers to the apartments, houses, residential shelters, congregate living centers, or group homes where individuals and families live, sleep, and spend their time. More people are learning and working from home now than prior to the COVID-19 pandemic, reinforcing the importance of the home in all aspects of life.

Housing is a key indicator for health, wealth, and quality of life. When housing is safe and affordable, it can improve the health and well-being of individuals, families, and communities.⁴² However, when households struggle to access affordable housing and are forced to spend more than one-third of their income on housing costs, they are less able to afford quality healthcare, nutritious food, effective transportation, telephone service, and other necessities.

When housing options are low-cost but expose residents to environmental risks like mold and mildew, malfunctioning utilities or appliances, and other safety hazards, individuals have to decide between keeping their families housed and protecting their health and well-being – a choice no EJC family should be forced to make.

HOMEOWNERSHIP

For many families, homeownership is a step closer to the American dream and a key opportunity to build wealth, as well as a way to control monthly housing costs. In EJC, 71% of households own their home and 29% are renters.

Across all of EJC, White and Asian residents are more likely to own their homes than their Black, Hispanic/Latino, and Native Hawaiian/Pacific Islander neighbors. Seventy-six percent of White EJC residents own their homes, compared to 74% of Asian residents, 54.5% of Hispanic/Latino residents, 45% of Black residents, and 20% of Native Hawaiian/Pacific Islander residents.¹²

In every EJC city other than Grandview, more than half of residents own their homes. However, in communities such as Blue Springs, Lee's Summit, and Raytown, White individuals have a



considerably higher rate of owning their homes than their Black, Hispanic/Latino, American Indian/Alaskan Native, and Native Hawaiian and Pacific Islander neighbors. There are clear racial and ethnic disparities in homeownership in EJC.¹²



A DEEPER DIVE:

How Structural Conditions Create Disproportionate Opportunity

Research shows that “homeownership is the chief vehicle for wealth accumulation for most Americans and especially those at the lower end of the income spectrum who have few opportunities for alternative investment.”⁴³ Over the previous century, policies have supported some families in purchasing homes and building wealth and created barriers for others.

Most Jackson County residents are likely familiar with J.C. Nichols, the real estate developer who famously built the Country Club Plaza in Kansas City. Nichols’ housing developments throughout the region came with strict racial restrictions and covenants designed to separate White residents and Black residents. However, Nichols’ influence extended far beyond the Plaza.

As historian G.S. Griffin reports, “Nichols was a giant, one of the most powerful men in the real estate world. He worked with President Franklin Roosevelt to design the Federal Housing Administration (FHA), which ensured government-backed home loans and subsidies were denied to black neighborhoods as a matter of federal policy.”⁴⁴ In the 1930s, the FHA was also providing subsidies and financial incentives to other real estate developers who followed Nichols’ example and “were mass-producing entire subdivisions for whites – with the requirement that none of the homes be sold to African-Americans.”⁴⁵

In addition, the Home Owners’ Loan Corporation (HOLC), also established during the New Deal era, notoriously created maps that rated neighborhoods’ abilities to be insured for home loans based on the racial and economic makeup of the area. The lowest rated neighborhoods, outlined in red, indicated where Black residents lived and were used to actively disinvest in Black and Hispanic/Latino communities. “Redlining” has become shorthand for many types of

race-based exclusionary tactics in real estate and homeownership – from racial steering by real estate agents, to racial covenants in many suburbs and developments. The practice of redlining intentionally segregated Black and White neighborhoods in Kansas City, Independence, Raytown, and communities around the nation.

Over the previous century, policies have supported some families in purchasing homes and building wealth, and created barriers for others.

The passage of the G.I. Bill in 1948 established an unprecedented set of economic programs that helped thousands of returning service members go to college, start small businesses, and buy homes with low interest rates and down payment waivers after World War II. Unfortunately, many Black veterans were systematically denied mortgage insurance and home loans.⁴⁶ Historian Ira Katznelson wrote “By 1984, when G.I. Bill mortgages had mainly matured, the median white household had a net worth of \$39,135; the comparable figure for black households was only \$3,397, or just 9 percent of white holdings. Most of this difference was accounted for by the absence of homeownership.”⁴⁷

Beyond income inequality, institutional racism and discrimination have contributed to differences in asset and wealth accumulation for women and people of color. These practices all impact the development of generational wealth, in both money and assets like real estate and stock. This creates an advantage for privileged families to accumulate wealth faster than others.

HOUSING COSTS OUTPACE EARNINGS

For both renters and homeowners, housing costs can pose a financial challenge. A household that spends more than 30% of its gross income on housing costs is considered cost-burdened.¹² Cost-burdened households are less able to afford necessities like groceries, childcare, and health resources or save money for the future. For cost-burdened renters, limited savings may inhibit their ability to purchase a home in the future. On average, 15.3% of US homeowner households were cost-burdened in 2020. While Missouri homeowners tend to experience cost-burden at a lower rate (12.7%), 17.6% of EJC households with mortgages spend 30% or more on housing costs.¹²

In EJC, Lake Tapawingo has the highest rate of households with mortgages that spend 30% or more on housing costs, followed by Sugar Creek and Grandview. Forty-two percent of all renters spend more than 30% of their household income on housing costs alone. Most renters in Sugar Creek (55%) and nearly half of renting households in Grandview (49%), Lee's Summit (46%), Raytown, (45%), Oak Grove (45%), and Buckner (44%) are cost-burdened, or spend more than 30% of their household income on housing. In the United States, the number of cost-burdened renters increased by more than 1 million between 2019 and 2021. In 2021, more than half of the 21.6 million cost-burdened renting households in the country were spending more

than 50% of their income on housing costs.⁴⁸

New data from the U.S. Census Bureau's Household Pulse Survey shows that, compared to their heterosexual and cisgender neighbors, LGBTQ+ adults around the country were less confident in their ability to afford the next month's housing costs. Between July 2021 and May 2022, LGBTQ+ adults ages 40-54 expressed the greatest level of concern about their ability to make their upcoming rent or mortgage payments.⁴⁹ Household Pulse Survey responses also indicate that approximately 40% of people with disabilities expressed concern about their ability to afford the next month's housing costs. Black and Hispanic/Latino renters with disabilities were disproportionately impacted by economic and housing instability.⁵⁰ A 2020 study also found that among low- and middle-income senior citizens, housing cost burden played the most significant role in moving to a nursing home. Researchers reported that "self-rated health, physical capacity, and mental health were weaker predictors of nursing home moves for [cost-burdened] renters ... Research suggests that access to affordable housing is a significant barrier to reducing unnecessary nursing home admissions."⁵¹

In 2020, the average median housing value in EJC was \$195,933, the highest in the previous decade. While housing values in most EJC cities have increased from 2010 to 2020, Sugar Creek

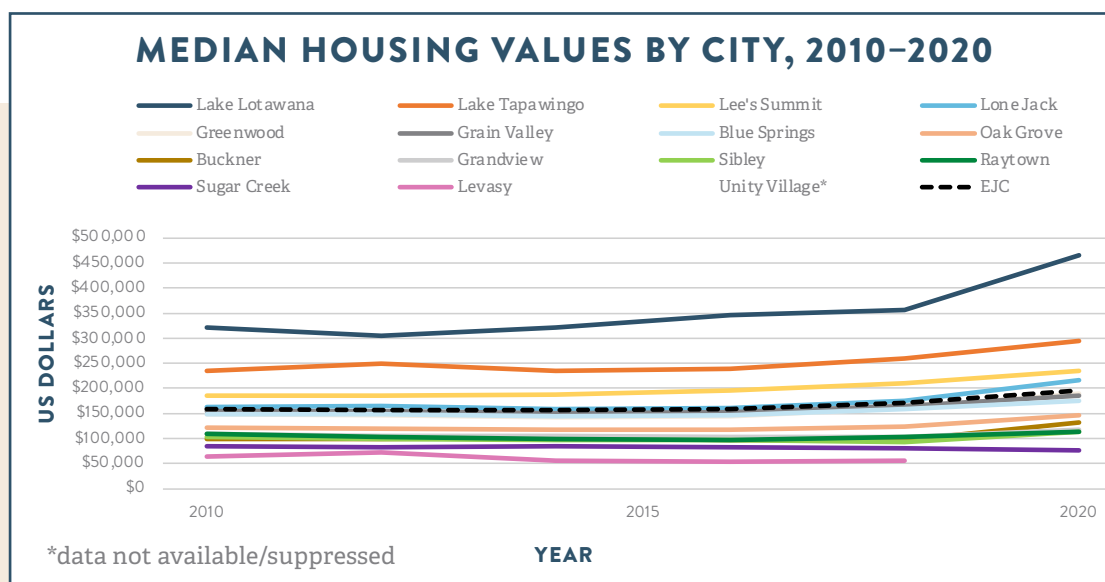


Figure 43: Eastern Jackson County Median Housing Values by City, 2010-2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

is the only city to have declining housing values – a decrease of 8%. Housing values in Lake Lotawana, in contrast, have increased by 45%.

Increases in housing values can be good for homeowners when they are able to sell their homes for more than they paid or access additional home equity. However, for first-time homebuyers, drastic increases can make home ownership difficult or even unattainable without proportional increases in wages. According to the National Low Income Housing Coalition, the average Jackson County resident would need to earn more than \$22.00 per hour or work 62 hours per week at the current minimum wage (\$12.00

per hour) to afford a two-bedroom rental home at fair market rate.⁵²

Forty-two percent of CHA Survey respondents – the same proportion of EJC renters spending more than one-third of their income on rent - indicated that affordable housing is a significant or moderate issue in their communities. Specifically, over half of the respondents from Lake Lotawana, Greenwood, and Sibley indicated that affordable housing is a significant or moderate issue in their communities. While the vast majority of Lake Lotawana, Greenwood, and Sibley residents own their homes, this may indicate limited access to rental housing in these smaller communities.

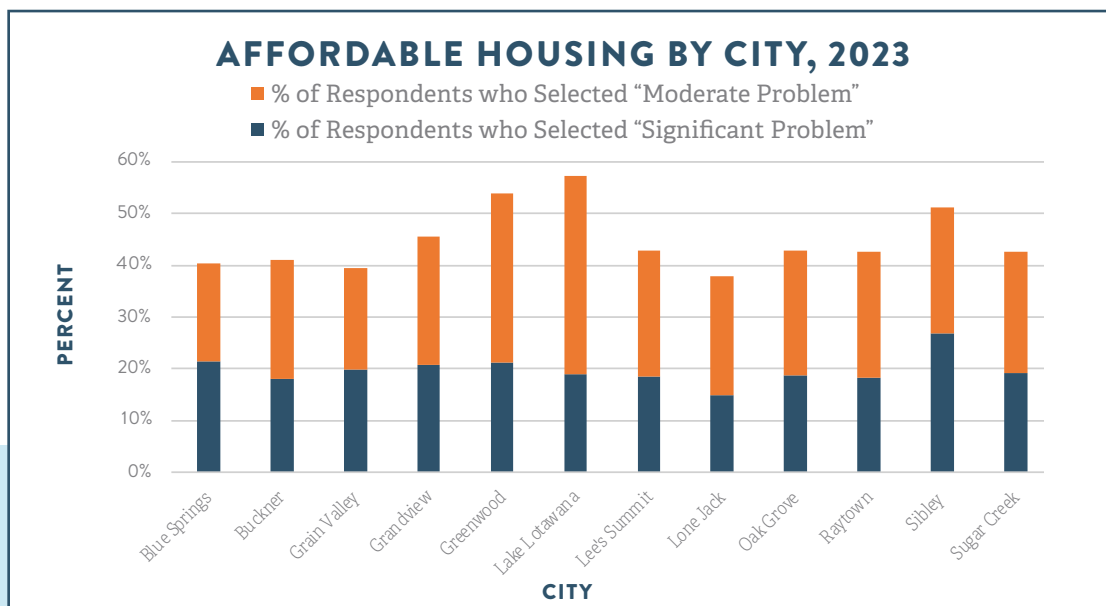


Figure 44: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Housing by City.

Source: Jackson County Public Health; 2023 CHA Survey.

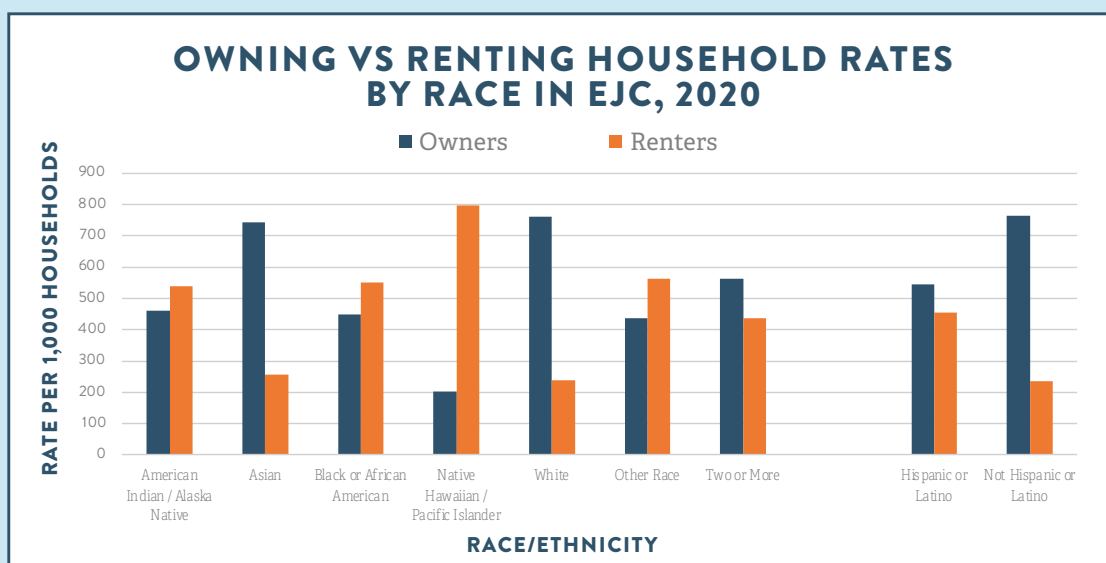


Figure 45: Eastern Jackson County Rates per 1,000 Households of Owning vs. Renting by Race and Ethnicity, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

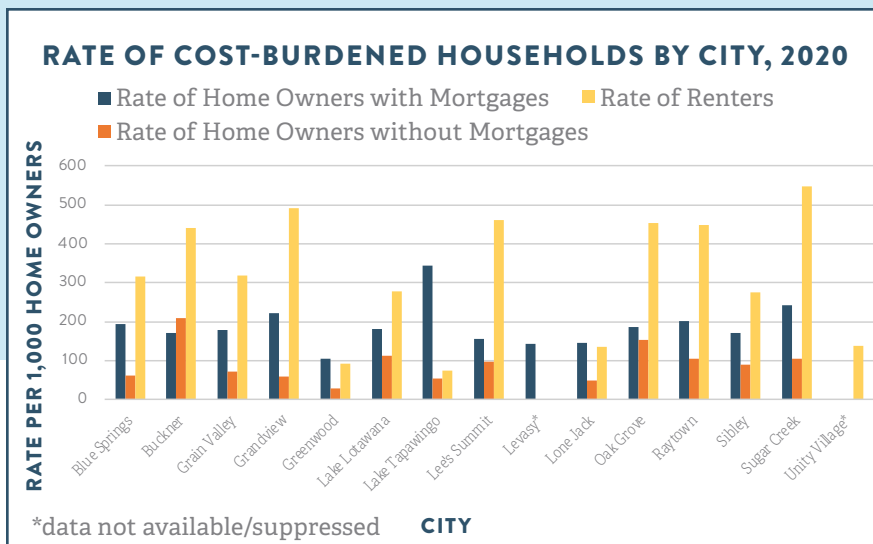


Figure 46: Eastern Jackson County Rates per 1,000 of Cost-Burdened Households by City, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

HOUSING CONDITIONS

For some households, finding an affordable place to stay is just the first step. Both renter and homeowner households often face health and safety issues at home, some of which can make a residence uninhabitable.

Figure 47 shows the most common housing issues reported by CHA Survey respondents. Over one third of CHA Survey respondents reported at least one issue with their current housing conditions. The top three housing issues reported were non-existent or non-working carbon monoxide detectors, mold or mildew, and chipped or peeling paint. These issues can contribute to health and safety issues, including falls, carbon monoxide poisoning, and exposure to insects, rodents, and the elements.

Mold and water leaks can contribute to health issues, including allergies, asthma attacks, and respiratory irritation according to the U.S. Environmental Protection Agency.⁵³

A 2021 report published by the U.S. Department of Housing and Urban Development (HUD) found that approximately 34.6 million homes nationwide contain lead-based paint – 89% of which were constructed prior to 1978, when lead-based paint was banned.⁵⁴ The HUD report also found an increased prevalence of lead-based paint in homes in the Northeast and Midwest United States. While peeling paint may be an aesthetic annoyance in newer homes, chipped paint in older homes could contribute to lead exposure. Lead exposure in early childhood is known to cause cognitive impairment.⁵⁵

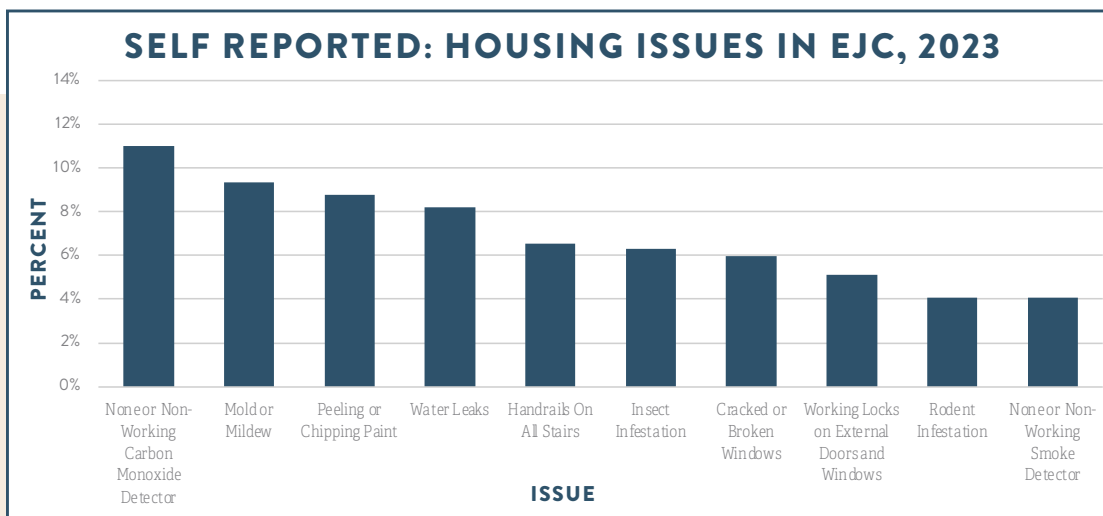


Figure 47: Eastern Jackson County Types of Housing Issues, 2023

Source: Jackson County Public Health; 2023 CHA Survey

HOUSING CONDITIONS (CONTINUED)

In EJC, older homes are clustered in certain communities. Sugar Creek has the oldest median housing age in Jackson County. The average residence in Sugar Creek was constructed in 1950. With the exception of Lake Lotawana, EJC cities with older median housing ages tend to correspond with lower median household incomes.

In addition to the physical and mental health impacts of living in a poorly maintained or unsafe residence, accumulated code violations, retaliatory eviction, or bank foreclosure due to financial burden can force residents out of their homes.

HOUSING INSECURITY

Housing insecurity occurs when individuals or families make frequent moves, struggle to afford housing expenses, or live in crowded housing spaces. Housing insecurity may be driven by housing or rental affordability and availability within a community. Individuals and families who are housing-insecure may stay with a friend or relative, in temporary housing such as a shelter or motel, “couch surf” from place to place, or sleep in a vehicle, tent, or outside.

Evictions can play a critical role in housing insecurity. Between 2020 and 2022, many EJC communities saw increased evictions. In 2020, Grandview and Lone Jack had the highest eviction rates in EJC, with more than 100 additional evictions filed in Grandview alone from 2021 to 2022. Evictions increased in Grandview, Lee’s

“...low income families may be more likely to live in older homes and homes with greater risks that can impact health outcomes ... Additionally, limited finances may result in a lack of housing maintenance, which can lead to poor housing conditions inside the home (e.g. damaged appliances, exposed nails, or peeling paint) as well as outside the home (e.g. damage to stair and windows).”⁵⁶

U.S. DEPARTMENT OF
HEALTH & HUMAN SERVICES
HEALTHY PEOPLE 2030 REPORT

Summit, Oak Grove, and Raytown from 2020 to 2022. While only 2% of CHA Survey respondents reported that they were evicted or had to move due to housing costs, nearly 10% of respondents expressed concern about losing their housing in the future. Matthew Desmond, author of *Evicted: Poverty and Profit in the American City*, writes that “Eviction is a cause, not just a condition, of poverty.”⁵⁷ After experiencing eviction, it often becomes more difficult for tenants to access high-quality, affordable housing and many households are forced to accept sub-standard rental housing that may come with health and safety hazards.

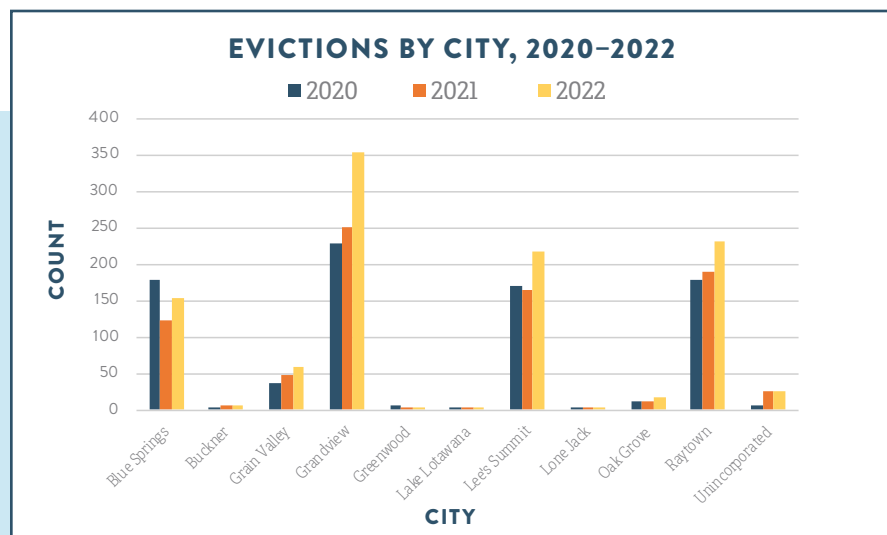


Figure 48: Eastern Jackson County Eviction by City, 2020- 2022.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020. All rates are calculated using ACS 5-year population estimates.

Data was not available for Lake Tapawingo, Levasy, Sibley, Sugar Creek, or Unity Village.

HOUSING INSECURITY (CONTINUED)

The percentage of residents who moved within the county in the past year is often used as a proxy to identify “informal evictions.” Formal evictions are filed by landlords or property management companies at the county courthouse after providing written notice to the tenant regarding a lease violation, such as non-payment of rent. In some jurisdictions, including Minneapolis, Cleveland, Louisville, and Kansas City, tenants facing eviction can access no-cost legal representation in eviction court. The formal eviction process can take between 1 to 3 months. However, informal evictions happen outside of the courtroom and often take the form of pressure or coercion from a landlord to vacate the property, waiving fees or even paying tenants to move out, or refusing to make repairs to improve the residence’s habitability.⁵⁸ While informal evictions may not show up on a tenant’s background check, they can create significant barriers to safe, affordable housing. Evictions of all types increase risk of homelessness, emergency room utilization, rates of maternal depression, and suicidality.⁵⁹

Between 2017 and 2021, approximately 9% of Jackson County residents moved within the county in the past year.⁶⁰ However, households

clustered in southeast Blue Springs, western Lee’s Summit bordering Kansas City, and southeast Grandview were more than twice as likely as their neighbors to report moving within Jackson County in the previous year.

Each January, the Greater Kansas City Coalition to End Homelessness conducts a Point in Time Homeless Count using volunteers and outreach workers to count individuals on a given night who are sleeping outside in Jackson County. In January 2022, the Point in Time (PIT) data identified 1582 individuals experiencing homelessness. Data from 2020-2022 shows an 11% decline in the number of individuals experiencing homelessness in Jackson County. However, the Point in Time Count is unable to capture information about individuals sleeping in cars, couch surfing, in shelters, or staying in motels and may not include critical data about those experiences.⁶¹

In 2020, a shelter space inventory was completed for the Kansas City metropolitan region. There were 867 total emergency shelter beds in Jackson County, with an average occupancy rate of 65% during the Point in Time count. Of the 220 shelter beds available in Jackson County for survivors of intimate partner violence and their children, 158 were occupied during the count (GKCCEH).

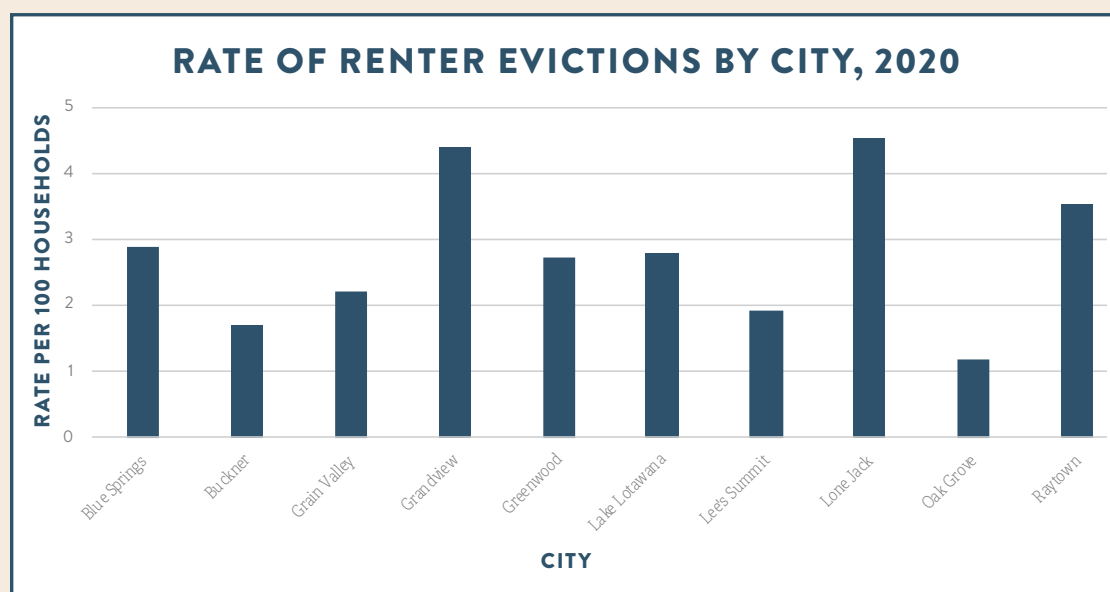


Figure 49: Eastern Jackson County Eviction by City, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020. Rates are calculated using ACS 5-year housing estimates.

****data was not available for Lake Tapawingo, Levasy, Sibley, Sugar Creek, or Unity Village**

PEOPLE EXPERIENCING HOMELESSNESS IN GREATER KANSAS CITY AREA & JACKSON COUNTY, 2020-2022

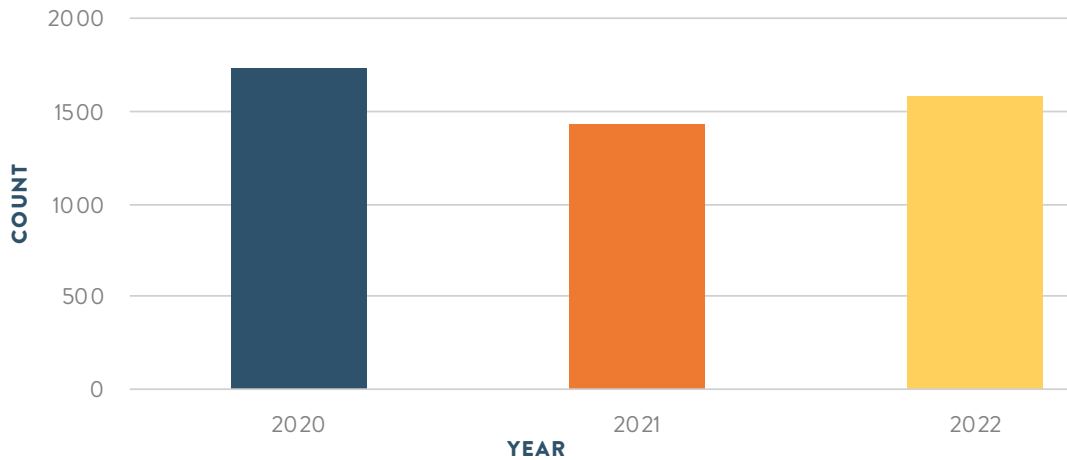


Figure 50:
Greater Kansas
City Area &
Jackson County
Population
Experiencing
Homelessness,
2020-2022.

Source: Greater
Kansas City
Coalition to End
Homelessness;
Point-In-Time
Count, 2020-2022.

It is important to note that a majority of shelter beds available in Jackson County were in Kansas City, with a small number in Independence. Few emergency shelter beds are located in EJC.

Although there is little data available about the impact of housing insecurity on people with disabilities in EJC, national data shows that approximately half of individuals seeking support at homeless shelters are living with one or more disability.⁵⁰

Additionally, Missouri's Department of Elementary and Secondary Education provides annual reports about the number of students experiencing homelessness in each school district in the state. During the 2019 – 2020 school year, 1,802 (2.5%) students in EJC public schools experienced homelessness. This number decreased in following years, from 773 (1.1%) during the 2020-21 school year to 514 (0.7%) during the 2021-22 school year. The Fort Osage R-1 school district reported that 7% of their students were experiencing homelessness. While districts like Grandview C-4 and Raytown C-2 saw substantial decreases in the number of homeless students, several districts had increased numbers of students experiencing homelessness between 2017 and 2020. Homeless student populations increased in three EJC school districts: Blue Springs R-IV, Lee's Summit R-VII, and Oak Grove R-VI.²³



Transportation

Another important factor influencing economic stability is access to reliable transportation. The ability to safely and effectively move within the community provides access to necessary services and resources and, ultimately, helps people feel more connected to their surroundings. Safe, reliable transportation includes functional sidewalks, trails, and bike lanes, as well as personal vehicles and mass transit. Multi-modal transportation can support a healthier lifestyle by increasing physical activity and mobility and decreasing traffic injuries and air pollution.⁶² Equitable access to transportation means access to employment opportunities, health care, childcare, school, nutritious food, and other necessities.

VEHICLE ACCESS

In EJC 96% of households have access to one or more vehicles, leaving 4% without a personal vehicle.¹² Grandview and Sugar Creek have the lowest rates of households without personal vehicles compared to other EJC cities. One in 10 CHA Survey respondents indicated that they did not have access to reliable transportation at some point in the past 12 months.

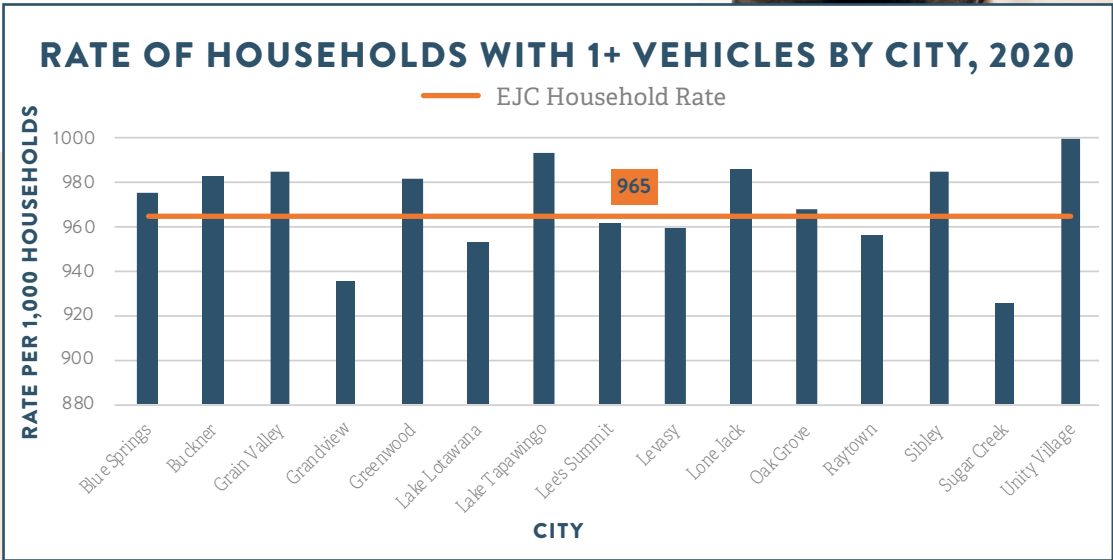


Figure 51: Eastern Jackson County Households with One or more Vehicle per 1,000 people by City, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020

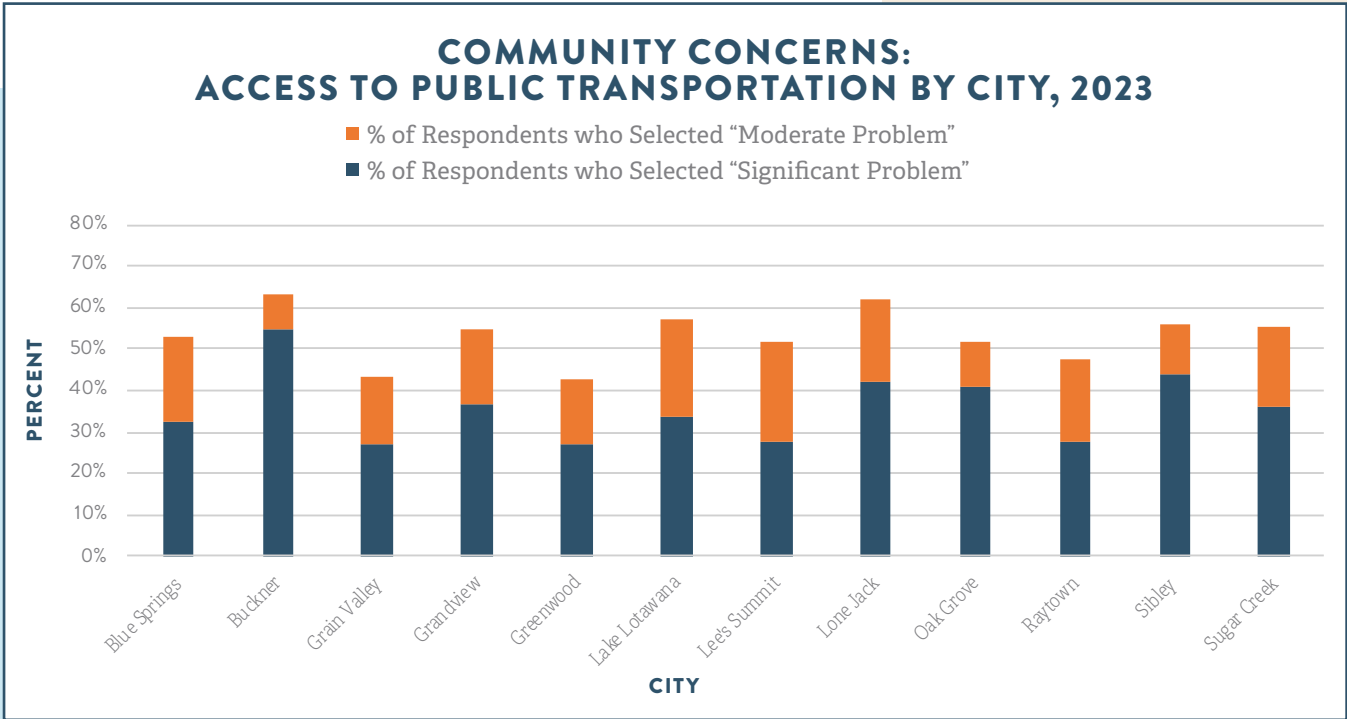
PUBLIC TRANSPORTATION

Whether out of preference or necessity, individuals without cars must rely on other forms of transportation, such as public transportation, rideshares, biking, or walking. In EJC, there are four bus routes originating in Blue Springs, Lee's Summit, and Raytown. The Blue Springs and Lee's Summit routes provide transportation to and from downtown Kansas City during commuter traffic hours. The Raytown Flex allows riders to request to be picked up and taken to a destination within its service area. However, these bus lines do not cover all of EJC, leaving many without any way of utilizing public transport. More than half (51%) of CHA Survey respondents identified public transportation as a significant or moderate problem in their communities. Respondents in Buckner, Lone Jack, and Lake Lotawana were most likely to report that access to public transportation was a significant or moderate problem.

There is little available data about transportation designed to meet the needs of people with disabilities in EJC. While there are publicly available services for people with disabilities, such as OATS and RideKC Freedom, these lines do incur a cost, have restrictions on destinations, have limited days of operation, and/or do not operate for extended hours of the day. This can limit the ease with which a person with a disability can engage with their community, attend necessary appointments, or ensure employment if they are not able to drive or do not have a personal vehicle.

Figure 52: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Access to Public Transportation by City

Source: Jackson County Public Health; 2023 CHA Survey.



ROADWAY INFRASTRUCTURE

With limited bus lines available in EJC, and no other public transportation options, residents without vehicles must rely on rideshares or other forms of active transportation like walking and biking. However, heavy traffic can limit opportunities for walking and can be a safety hazard. Residents of high traffic areas are often exposed to more noise and air pollution. The Environmental Protection Agency (EPA) provides data on road network density and walkability to help communities understand and plan for infrastructure to ensure everyone has access to safe, multimodal transportation. Multimodal roadways are accessible by multiple types of transit including pedestrian and vehicle. In EJC, they are mainly located within the major cities.

It is also important, no matter the roadway type, that roads and bridges are functional and safe for communities to be as accessible as possible. Unfortunately, at least 1 in 4 CHA Survey respondents in Sibley, Buckner, Raytown, and Greenwood reported that safe, well-maintained roads and bridges were a concern in their communities.

WALKABILITY

Developed by the EPA, The National Walkability Index (NWI) “identifies areas with mixtures of land use and transportation infrastructure that may encourage walking as a mode of transportation”.⁶³ Communities are measured at a level smaller than a census tract called a block group. Factors such as intersection density, distance to the nearest transit stop, employment diversity, and housing diversity are considered to determine walkability ratings. In EJC, areas within Raytown and Grandview have ratings that are considered “Most Walkable.” An “Above Average Walkability” rating is assigned to 16% of block groups throughout EJC. Finally, 14% of block groups fall into the “Least Walkable” category.⁶³

Interestingly, more than 1 in 3 CHA Survey respondents in Raytown, Lake Lotawana, Grandview, Sugar Creek, Buckner, and Sibley stated that walkability in their communities was a significant or moderate problem. Although Raytown and Grandview have NWI scores indicating greater walkability, people who currently live in the communities may disagree.

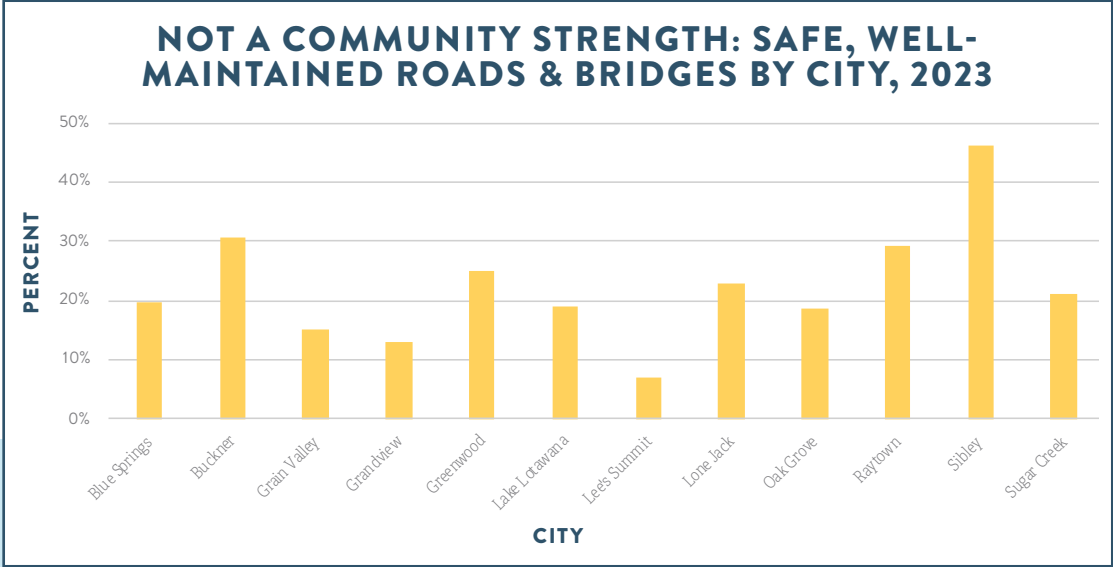


Figure 53: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: Well-Maintained Roads and Bridges as ‘Not a Strength’ by City.

Source: Jackson County Public Health; 2023 CHA Survey.



Figure 54: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Walkable Communities by City.

Source: Jackson County Public Health; 2023 CHA Survey.

WALKABILITY AND SAFETY

Even when infrastructure exists to support walkability, perceptions of safety significantly impact residents' interest in walking as a mode of transportation. Ten percent of CHA Survey respondents indicated that they did not feel safe walking in their neighborhood. Residents of Grandview, Raytown, Oak Grove, Sugar Creek, and Sibley were most likely to report that they did not feel safe walking around their neighborhood.



TRANSPORTATION AND SAFETY

Transportation also impacts safety, including the condition of sidewalks, bikeways, roads and bridges, pedestrian crossings, lighting and signage, and traffic speeds and controls. In 2020, pedestrian injuries fell from 2019, which is attributed to reduced activity during COVID-19 peak months. However, injuries picked up during 2021 and are largely back to pre-COVID-19 levels. Vehicular deaths decreased from 2019 to 2020, increased from 2020 to 2021, and have fallen to pre-2020 levels in 2022. Lee's Summit has the highest number of vehicular deaths during this three-year period, with a majority involving unseat belted or substance impaired individuals. To note, these vehicular deaths occurred in Lee's Summit and are not necessarily all from residents of Lee's Summit or EJC.⁶⁴

More than half of CHA Survey respondents from Lee's Summit, Blue Springs, Grandview, Raytown, and Greenwood indicated distracted driving was a significant or moderate problem in their communities. All cities had at least 4 in 10 respondents report that distracted driving was a significant or moderate problem in their communities.

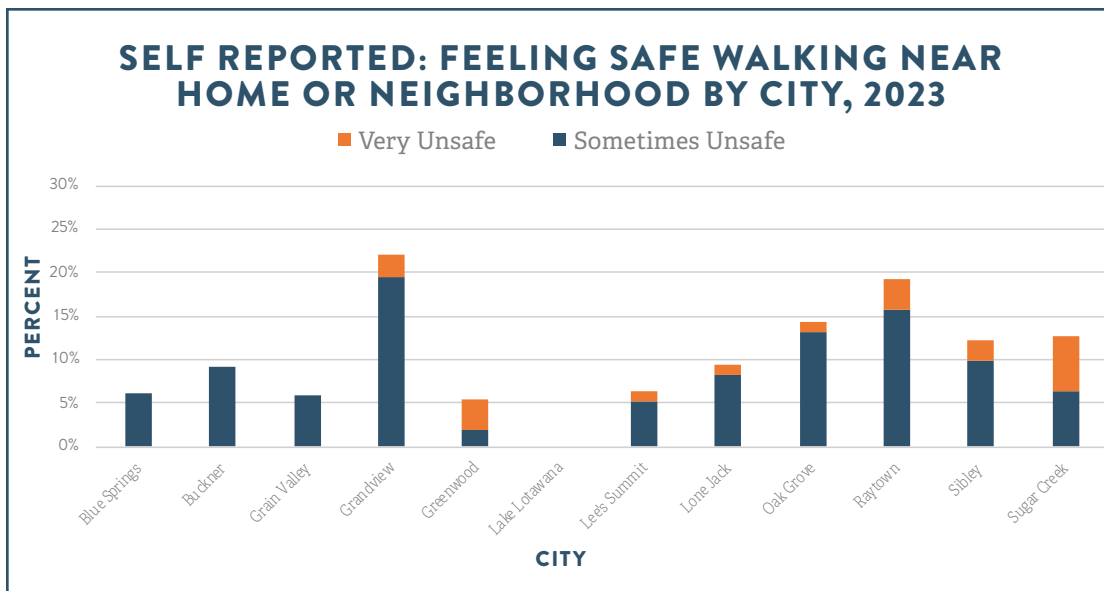


Figure 55: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: Feeling unsafe walking within neighborhood or near your home by city.

Source: Jackson County Public Health; 2023 CHA Survey.

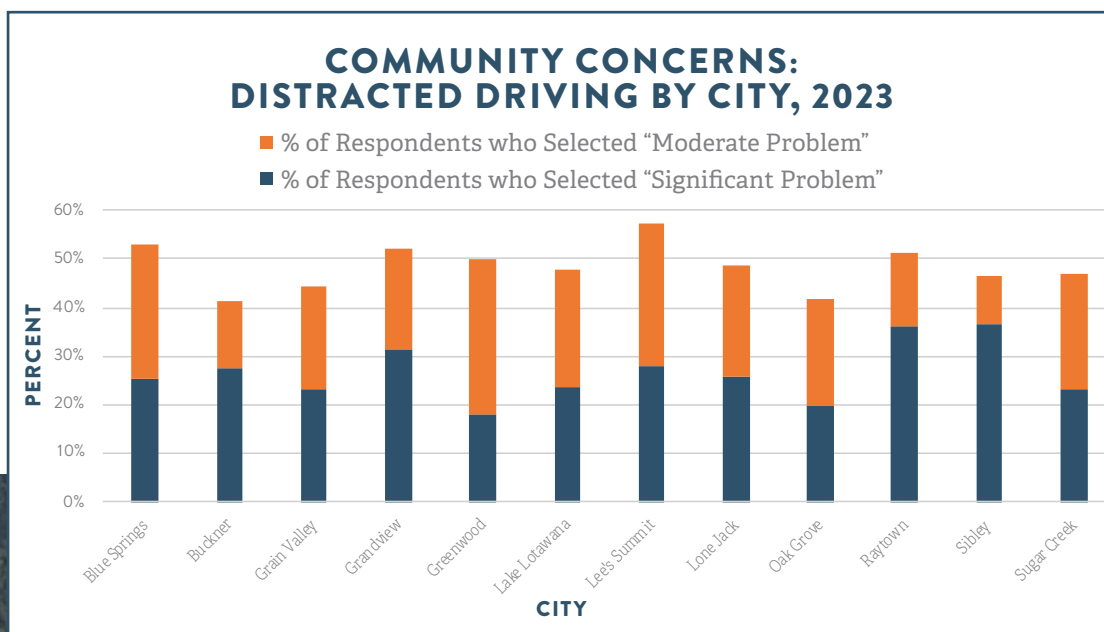


Figure 56: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Distracted Driving by City.

Source: Jackson County Public Health; 2023 CHA Survey.



Health Resources & Availability

WHAT IS IT?

According to the National Academies of Sciences, Engineering, and Medicine, access to health care is defined as “timely use of personal health services to achieve the best possible health outcomes.”⁶⁵

WHY IS IT IMPORTANT?

Insurance coverage, transportation, and availability of health care resources can make it easier or more difficult to access health services. Limited access to these resources disproportionately affects vulnerable populations, such as children, seniors, and low-income families. Access to healthy food can boost immunity, decrease risk for chronic illness, support healthy pregnancies, and is essential for childhood growth and development.

KEY FINDINGS

- *In EJC, 7.32% of residents lack health insurance. The uninsured rate is particularly high among individuals aged 19-34, those who identify as Black, Hispanic or Latino/a/x, Native Hawaiian and Pacific Islander, two or more races, or another race and people living in poverty.*¹²
- *Raytown, Sugar Creek, and Buckner all have the third highest rates of uninsured residents at 13% followed by Grandview at 16%. Levasy has the highest rate of uninsured residents within EJC at 28%.*¹²
- *Around 23% of Jackson County residents using public water sources (approximately 186,976 people) use non-fluorinated water.*⁶⁶
- *One in three respondents from the cities of Grandview, Sibley, Lone Jack, Sugar Creek, and Lake Lotawana, indicated that access to fresh and nutritious food was a significant or moderate problem in their communities.*



HEALTH INSURANCE AND ACCESS TO CARE

Access to physical and oral healthcare is an important element of personal and community health. Health insurance coverage is the key factor influencing one's ability to access healthcare. Access to both timely and quality care provides individuals and community members with the resources they need to prevent, manage, and control their health conditions. Individuals without insurance often will face higher costs for health care services and are more likely to experience a delay in receiving necessary care. People without insurance are less likely to have a primary care provider and they are less likely to be financially able to afford essential health care services such as cancer screenings and life-saving medications.⁶⁷

In the United States, approximately 91% of people have health insurance coverage.⁶⁸ Similarly, in 2020, approximately 92% of EJC residents were insured.¹² Often, full-time employees purchase private insurance through their employer. Across the country, more than half of people under age 65 are covered by private insurance. For those who are not able to purchase insurance through their employer, the Affordable Care Act established state and federal Health Insurance Marketplaces to connect individuals with private insurance providers.⁶⁹

For those who meet income and other eligibility requirements, public health insurance is available through Medicaid (MO HealthNet), the Children's Health Insurance Program (CHIP), and other specialized programs, such as MO HealthNet for Pregnant Women.⁶⁹ The CDC estimates that 27.8% of individuals under the age of 65 have public insurance. Once an individual turns 65, they are eligible for federal health insurance coverage through Medicare. Although Medicare or a combination of private and public insurance covers most EJC residents over the age of 65, around 3% of individuals in this age group are without health insurance coverage.¹²

In EJC, the largest age group without insurance is those 19 to 34 years of age. Many within this age group are unemployed or underemployed,

have low-paying jobs, have jobs that do not offer health insurance, or have other expenses that prevent them from purchasing health insurance.⁷⁰

Populations including people identifying as Black, Hispanic or Latino/a/x, Native Hawaiian and Pacific Islander, two or more races, or another race, people with a lower level of educational attainment, and people with lower incomes - all populations who already experience worse health outcomes - are disproportionately uninsured or underinsured.⁶⁵ A breakdown of insurance coverage by race and ethnicity and median household income for EJC can be seen in **Figure 58** and **Figure 59**.

Rates of health insurance coverage also vary between cities in EJC. On average, approximately 8% of EJC residents are uninsured. However, nearly 1 in 3 Levasy residents (28%) do not have insurance. Residents of Grandview (16%), Raytown (13%), Sugar Creek (13%), and Buckner (13%) are also less likely to have insurance coverage.

Access to healthcare contributes to healthy development in children, as well as fostering academic success, leading to a higher likelihood of completion of high school, attending college, earning higher wages, and growing into a healthy adult. Unfortunately, children in Missouri are less likely to be insured than the average American child.⁷¹

While 4.2% of U.S. children under the age of 18 are uninsured, the Children's Health Care Report Card found that 5.9% of Missouri children do not have health insurance.^{71,72} This lack of care early in their lives can cause negative health outcomes later in life. Uninsured children and adults are less likely to access routine health care than those who are insured. Lack of access or delayed care can contribute to a multitude of short and long-term health related issues at all ages.⁷²

Independent of health insurance, there are several other barriers to accessing adequate healthcare services. Barriers include availability of appointments, transportation, time it takes to be seen by a provider, and insurance acceptance.⁷³

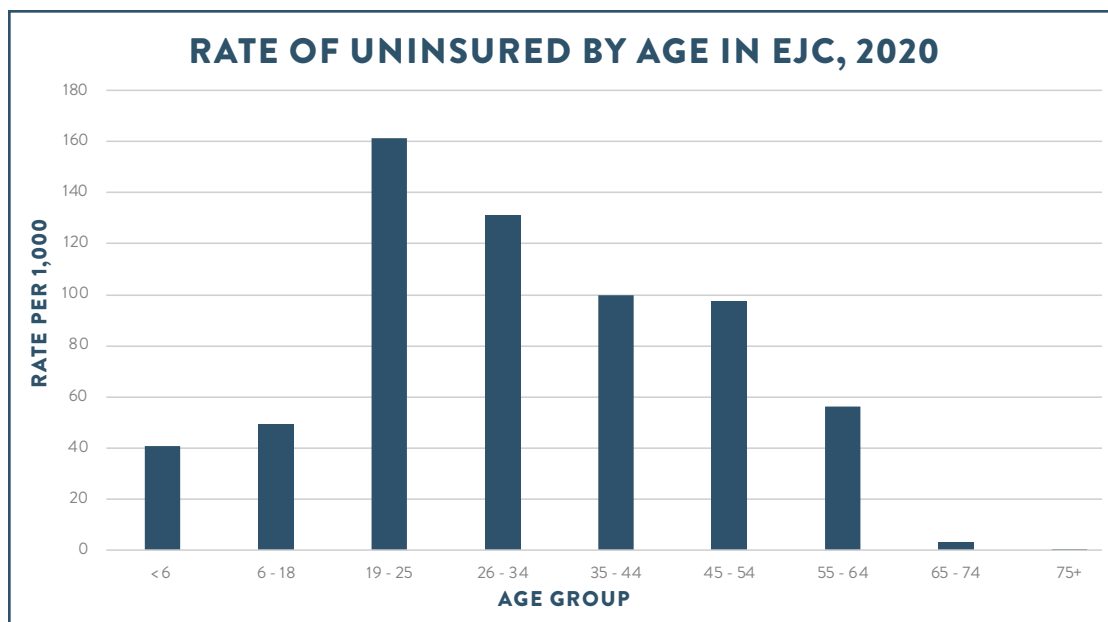


Figure 57: Eastern Jackson County Uninsured Rate per 1,000 people by Age, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

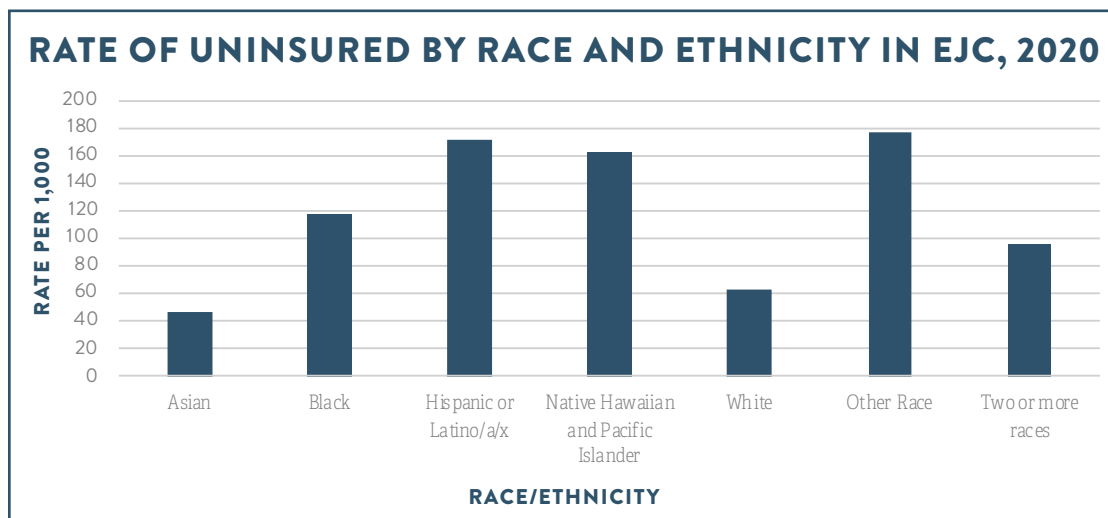


Figure 58: Eastern Jackson County Uninsured Rate per 1,000 people by Race and Ethnicity, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

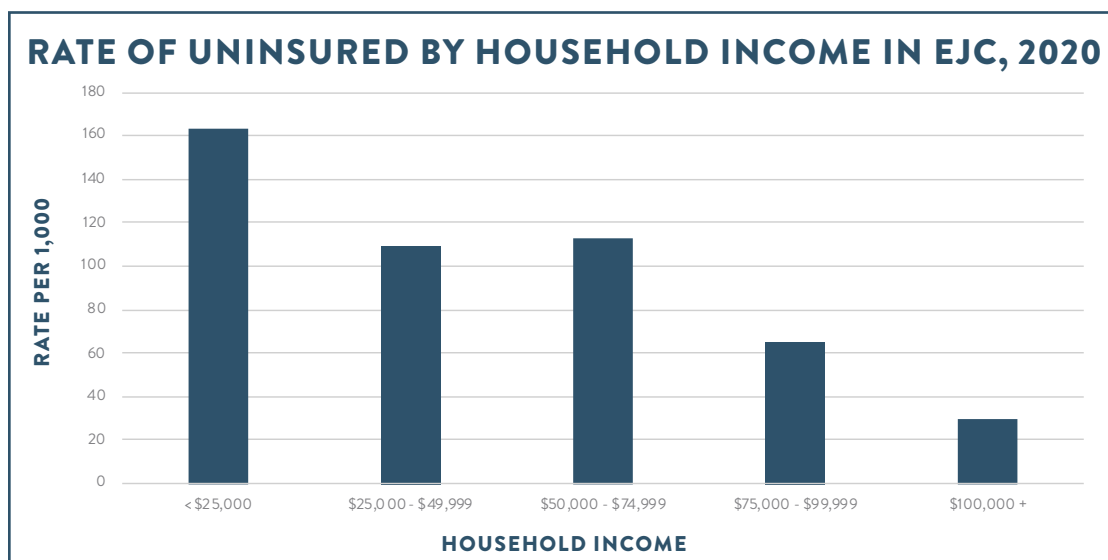


Figure 59: Eastern Jackson County Uninsured Rate per 1,000 people by Household Income, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

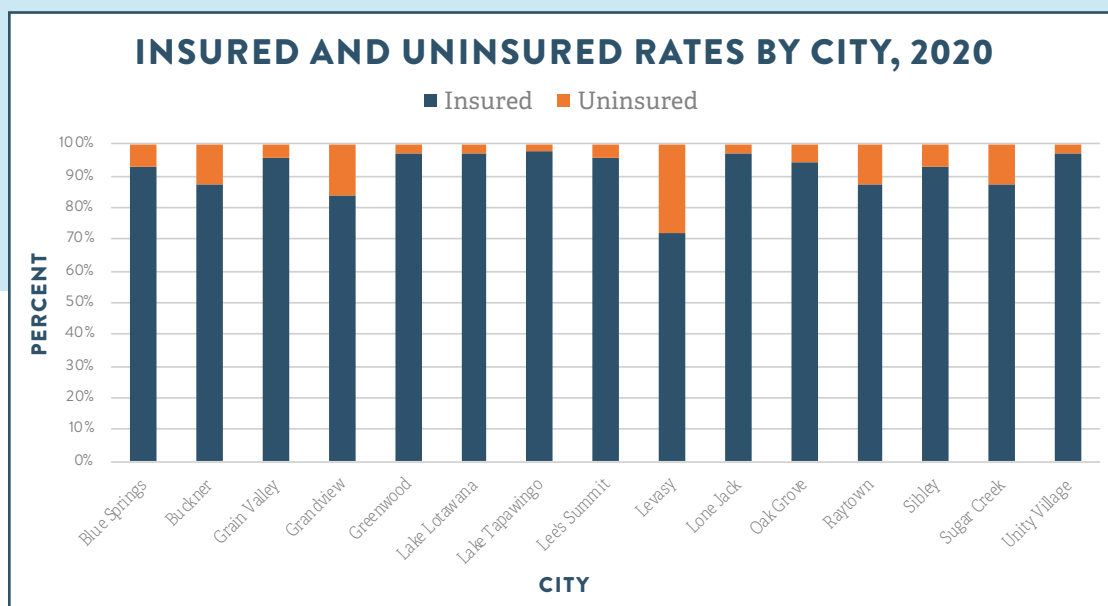


Figure 60: Eastern Jackson County Insured and Uninsured Rates by City, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS), 2020.

HEALTH INSURANCE & ACCESS TO CARE (CONTINUED)

When surveying EJC on the affordability of healthcare in their communities, over 2 in 5 respondents from the cities Sibley, Sugar Creek, Grandview, Buckner, Lone Jack, Oak Grove, and Raytown stated that healthcare affordability is a significant or moderate problem in their communities.

Even for those with health insurance coverage, an insurance policy does not always mean affordability. In 2019, average annual out-of-pocket expenses for residents in EJC were \$1,025/person for medical care, \$211/person for dental care, and \$186 for pharmacy costs.^{74,75} Nearly 30% of CHA Survey respondents avoided seeking medical care due to cost in the last 12 months and 22% avoided filling or refilling a prescription due to potential cost. This equates to 1 in 4 CHA Survey respondents avoiding or delaying care due to cost.

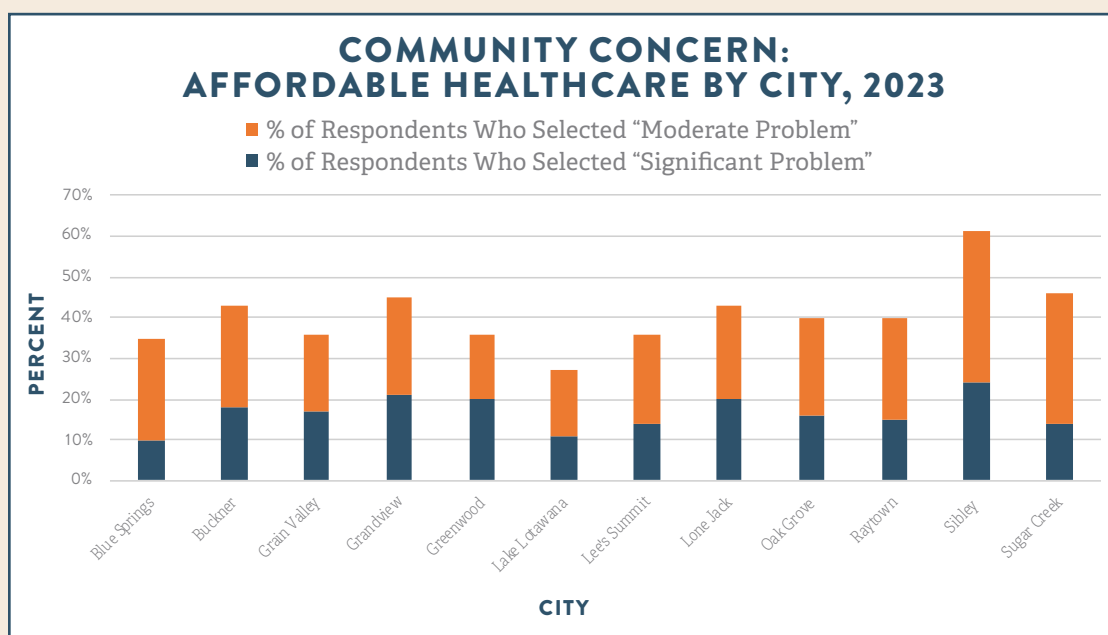


Figure 61: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Affordable Healthcare by City.

Source: Jackson County Public Health; 2023 CHA Survey.

SELF REPORTED: FINANCIAL DIFFICULTY IN EJC, 2023

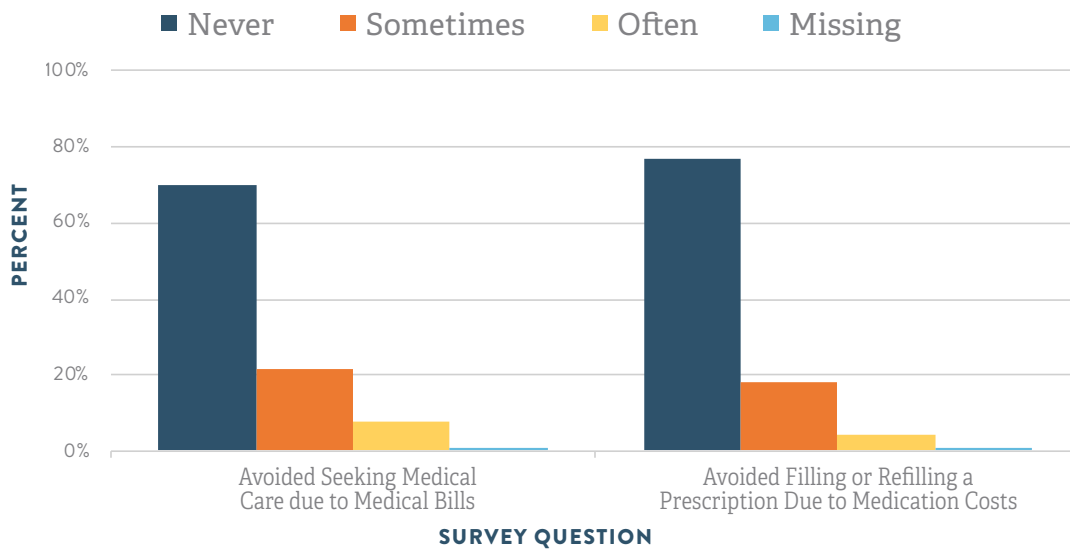


Figure 62: Eastern Jackson County Self-Reported Financial Burdens: Medical Costs, 2023.

Source: Jackson County Public Health; 2023 CHA Survey.

EJC Providers and Health Resources, 2023

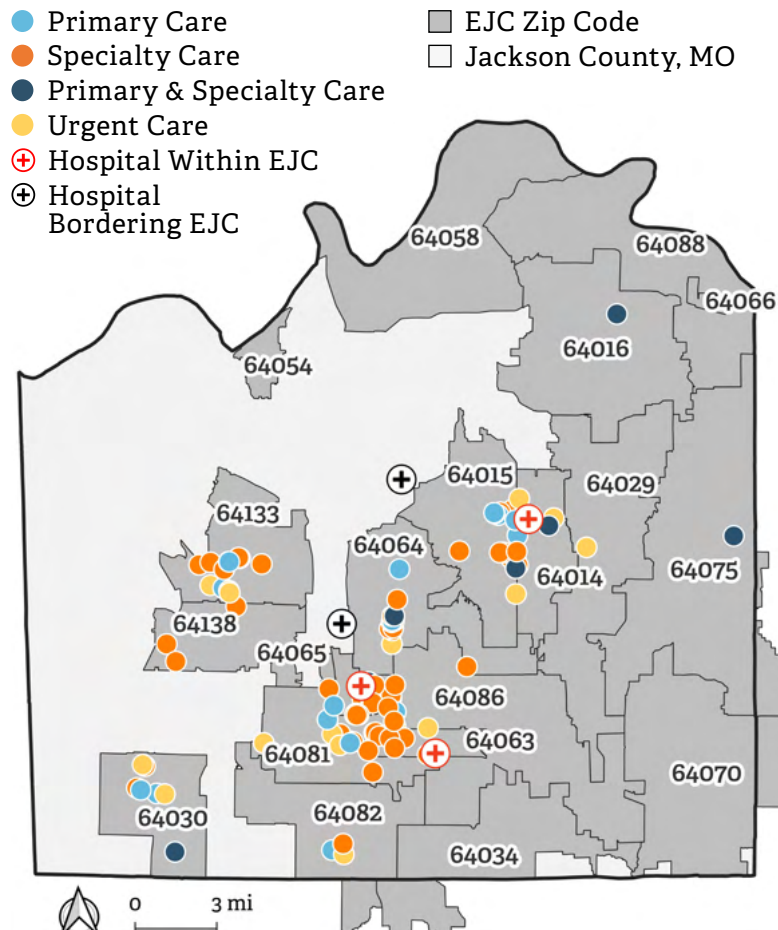


Figure 63: Eastern Jackson County Providers and Health Resources, 2023.

Source: Jackson County Public Health (JCPH).

Oral Health

Fewer people in the US have dental insurance than medical insurance, and dental insurance is often lost when individuals retire. This results in approximately one-third of Americans receiving irregular, inadequate, or no dental care. Beyond the challenges of accessing dental care, many people do not prioritize visiting a dentist and choose other health care needs instead.⁷⁶ About half of all American children do not receive regular dental care because of social, economic, and geographic obstacles. It is no surprise that people covered by dental insurance are more likely to receive oral health care. Poor oral health is linked to a multitude of health problems, some of which are preventable with proper care. Preventative dental care visits are crucial to help identify oral health-related diseases, injuries, and nutrition problems.⁷⁷

At least 1 in 3 CHA Survey respondents in Buckner, Sugar Creek, Lake Lotawana, Sibley, and Raytown indicated that dental health is a significant or moderate problem in their communities.

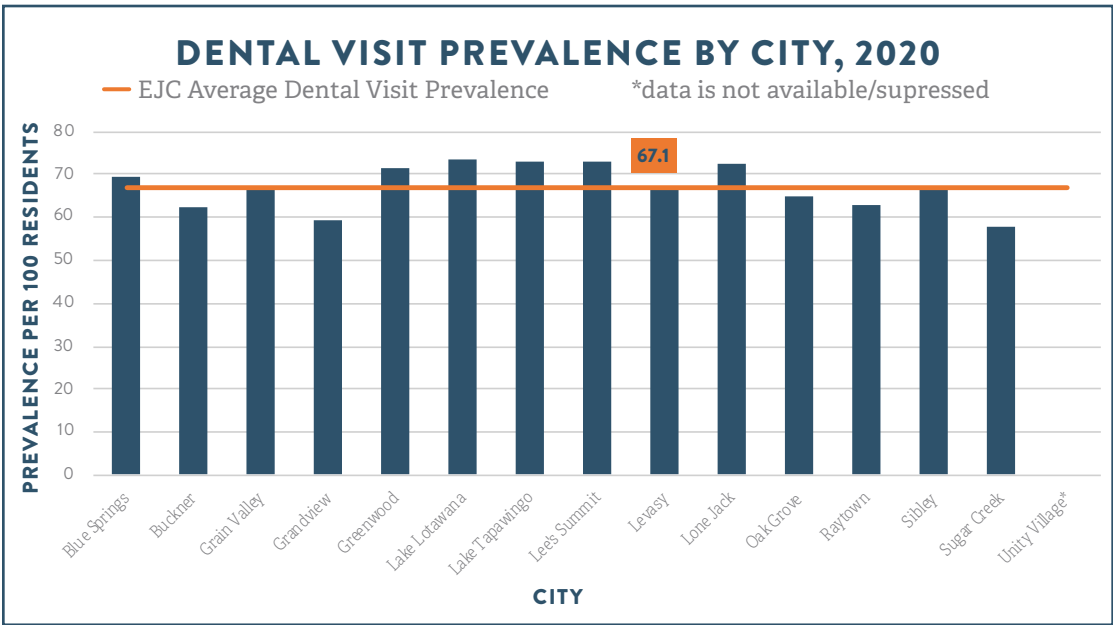


Figure 64: Eastern Jackson County Dental Visit Prevalence by City, 2020.

Source: Centers for Disease Control and Prevention, National Center for Chronic Disease and Health Promotion, Division of Population Health, 2020.

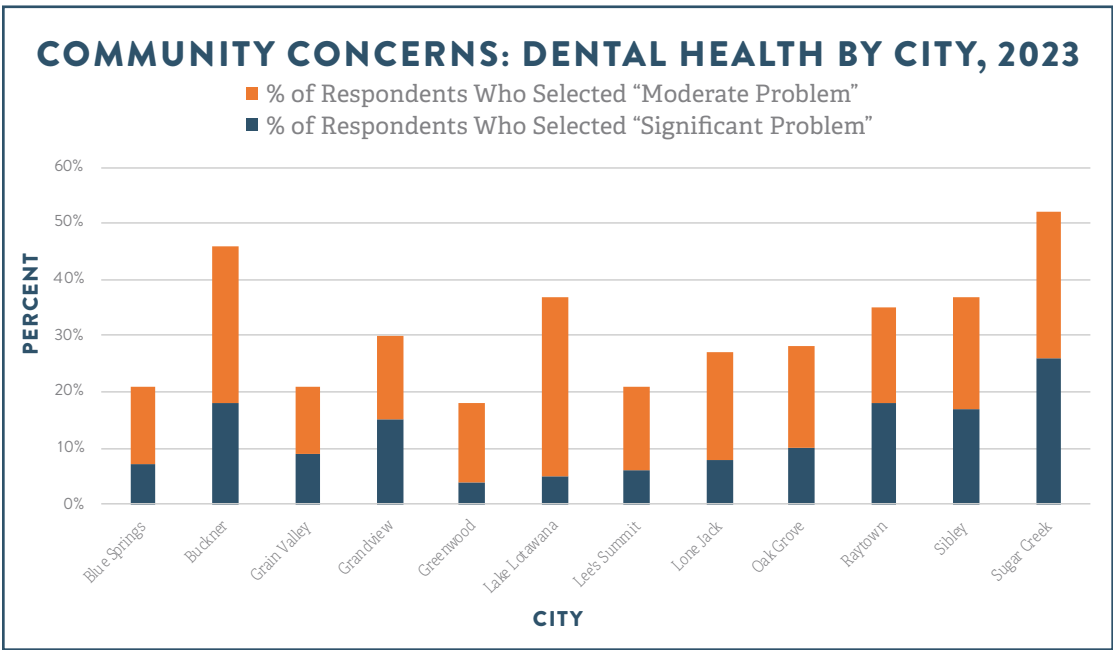


Figure 65: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: ‘Significant’ or ‘Moderate’ Problems with Dental Care by City.

Source: Jackson County Public Health; 2023 CHA Survey.

ORAL HEALTH AND WATER QUALITY

Water quality affects both a community's drinking and recreational water. In an unsafe water supply, infectious agents and hazardous chemicals are the primary health concerns. The EPA's Ambient Water Quality Criteria for the Protection of Human Health establishes health and safety criteria for 94 pollutants, identifying how much of a chemical can be present in water before it negatively impacts human health. Individual exposure to these chemicals might vary by the amount of water or fish consumed or a person's body weight, in addition to other bioaccumulation and toxicity factors.⁷⁸ In Missouri, the Environmental Public Health Tracking Program and Department of Natural Resources work together to monitor water quality across the state and address violations that may occur. In 2021, zero drinking water violations occurred in the 15 communities of EJC.⁷⁹

Fluoridation of community water is recommended by the U.S. Department of Health and Human Services due to the evidence that it strengthens the enamel surface of teeth and protects against their decay. As of 2018, 73% of the U.S. population was using a fluoridated community water system.⁸⁰ Research indicates that consuming fluoridated water reduces cavities in both adults and children by 25%. Within Jackson County as a whole, only 6 of 22 water systems are sufficiently fluoridated to the recommended level of 7 mg/L of fluoride. These primarily serve the Kansas City area and the communities of Blue Springs, Raytown, and Lee's Summit, providing fluoridated water to an estimated 626,738 people. Systems without the recommended fluoride level serve an estimated 186,976 people (23%) in Jackson County that live in both EJC and Independence.⁶⁶

ORAL HEALTH AND CHILDREN

Dental caries (tooth decay/cavities) remain the most prevalent chronic disease in children, even though it is largely preventable. While rates of dental caries have decreased over the past four decades, inequities still exist.⁸¹ Although water fluoridation helps reduce cavities, other techniques have been found to be even more successful in reducing oral health issues among children. One evidence-based method is the use of dental sealants, which have been found to prevent 80% of cavities in the first two years after application and 50% of cavities for up to four years. While the success of these sealants is well documented, sealants are an expensive service without insurance and are therefore less attainable for families who are uninsured or face financial burdens. It's estimated that 60% of children aged 6-11 years do not receive dental sealants. Children from low-income households are about 15% less likely to get dental sealants and twice as likely to have untreated cavities compared with children from higher-income households.¹² While the upfront cost of dental sealants can be a steep price to pay, the lifetime cost of oral health is reduced by this childhood procedure. In Missouri during the 2018-2019 school year, approximately 54.8% of third grade students had at least one cavity and 28.5% of their tooth decay went untreated. The rate for

If 7 million children from low-income households received dental sealants, national savings on dental treatments could be upwards of \$300 million.⁸²

dental sealants in third grade students was only 29.7%, lower than the national average of 42%. Increasing rates of dental sealants in young children could help reduce rates of oral health issues experienced later in life.⁸³

ORAL HEALTH AND AGING

In adults, maintaining an oral health preventative care regimen is vital for optimal health, especially as individuals age. Poor oral health care can cause infections associated with other diseases. Certain conditions, like diabetes, can negatively impact oral health. High blood sugar due to diabetes can weaken white blood cells which usually help to fight infections. Oral diseases have also been linked to serious health problems, such as heart disease and stroke, both of which are more prevalent in older age groups. In 2018, only 61.7% of adults in Missouri had their teeth cleaned within the last 12 months, which is about 7% lower than the national rate. Additionally, 42.8% of Missouri adults older than 65 had lost 6 or more teeth, 8% higher than the national rate, and 18.8% of those adults had experienced a complete tooth loss. Increasing dental health insurance coverage supports regular visits to the dentist and reduces the health burdens of oral health-related diseases.⁸⁴

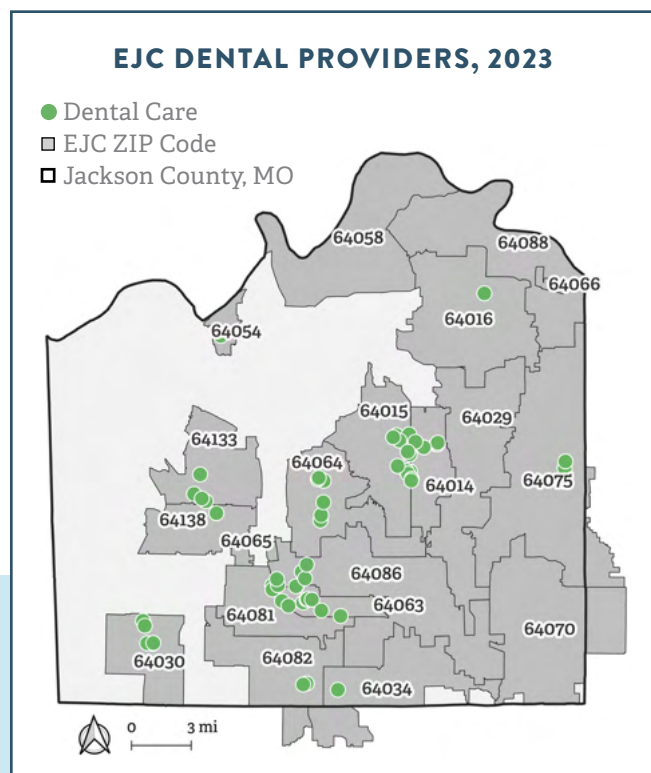


Figure 66: Eastern Jackson County Dental Providers, 2023.

Source: Jackson County Public Health (JCPH).

ORAL HEALTH AND PREGNANCY

Pregnancy is a crucial time to receive routine oral health care. Changing hormones during pregnancy have the potential to make birthing persons more prone to periodontal (gum) disease and cavities. Poor oral health during pregnancy can have negative health impacts on both the birthing person and the baby. It is estimated that 60-75% of pregnant people have gingivitis, an early stage of periodontal disease. Untreated, gingivitis can cause bone damage and infected gums. Periodontal disease has been associated with preterm birth and low birth weight. Just like prenatal care, oral care is very important throughout pregnancy due to the long-lasting effects of poor oral health.⁸³

In 2018, Missouri's Pregnancy Risk Assessment Monitoring System (PRAMS) reported that 26.7% of Missouri women surveyed required a dental care visit during their most recent pregnancy, but only 16.2% visited a dentist about their oral health problem. PRAMS data also shows that although 86.7% of pregnant women reported understanding the importance of oral care during pregnancy, only 46.8% reported having talked with a dental or other health care worker about their oral health. When exploring why women did not visit a dentist during pregnancy, more than 1 in 4 reported that their biggest barrier was not being able to find a dentist who would accept Medicaid patients.⁸³

Food Access

GROCERY STORE ACCESS

Access to healthy food is an essential resource for individual and community health. A balanced nutritional diet is vital to ensuring individuals are getting the proper nutrients needed for functioning and energy. The U.S. Department of Agriculture's (USDA) Food Access Research Atlas (FARA) provides a "glimpse into a neighborhood or community's access to food stores that offer a variety of healthy and affordable food".⁸⁵ Each census tract, a geographical sub-section of a city with approximately 4,000 residents each, is designated as a low-income (LI), low-access (LA), or both (LILA) area. In a LI area the poverty rate is 20% or greater, the median family income is less than or equal to 80% the statewide median family income, or the tract is covering a metro area in which the median family income is less than or equal to 80% of the metro's median family income. A LA area has at least 30% of residents who do not have access to a vehicle and live more than half a mile from a grocery store

or supermarket in urban areas or 10 miles from a grocery store/supermarket in rural areas.⁸⁵

Figure 67 shows LILA-designated areas in EJC. More urban communities, such as Raytown and Grandview, tend to have more LILA-designated areas, but they are not the only communities with these pockets of food access difficulty.⁸⁵ Limited access to nutritious food can lead to poor health outcomes, including heart disease, Type 2 Diabetes, and obesity, ultimately impacting quality of life. Often, lack of access to healthier foods is observed within low-income communities, as demonstrated by FARA, and communities of color.⁸⁶ Increased access to stores with fresh fruits and vegetables, among other health resources, in each community would have positive impacts on individual and community health.

At least 1 in 3 CHA Survey respondents in Grandview, Sibley, Lone Jack, Sugar Creek, and Lake Lotawana reported that access to fresh and nutritious food was a significant or moderate problem in their communities.

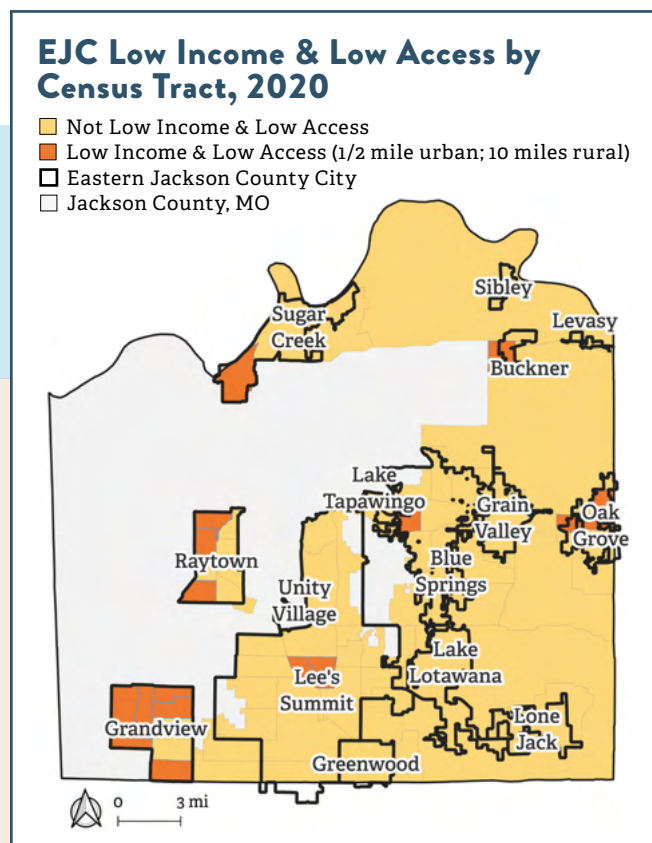


Figure 67: Eastern Jackson County Low Income and Low Access by Census Tract, 2020.

Source: US Department of Agriculture (USDA); Food Access Research Atlas (FARA).

COMMUNITY CONCERNS: ACCESS TO FRESH AND NUTRITIOUS FOOD BY CITY, 2023

■ % of Respondents Who Selected "Significant Problem"
■ % of Respondents Who Selected "Moderate Problem"

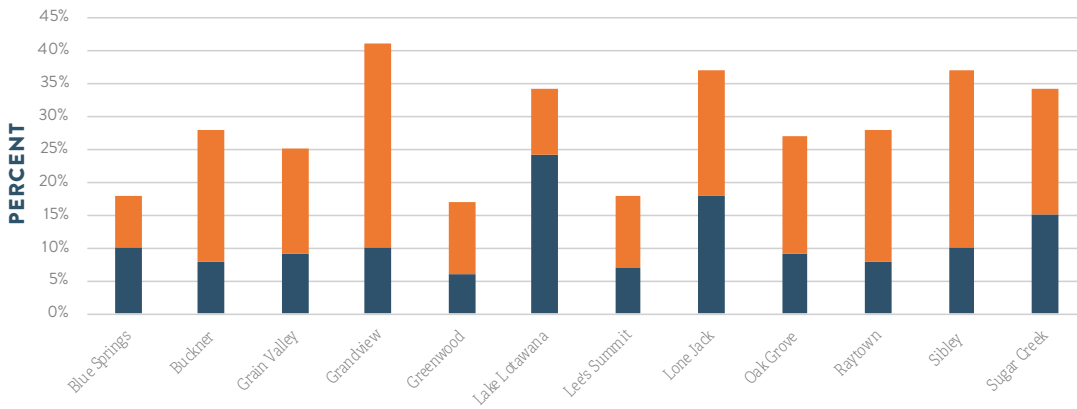


Figure 68: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Access to Fresh and Nutritious Food by City.

Source: Jackson County Public Health; 2023 CHA Survey.

Environmental Risks

WHAT IS IT?

Environmental health is a branch of public health that focuses on the relationship between human health and the surrounding environment. This includes naturally occurring and human-made surroundings and their components, all of which can impact the health of a community.

WHY IS IT IMPORTANT?

Health outcomes can be directly affected by air quality, water quality, changes in climate, toxic chemical exposures, and food safety and quality. Furthermore, exposure to these environmental factors is dependent upon location and lifestyle, resulting in disproportionately high environmental risks for some individuals or communities.

KEY FINDINGS

- *Between 2018 and 2022, average annual Particulate Matter (PM_{2.5}) levels in Jackson County have been recorded at safe levels.*
- *In 2020, both in-patient and out-patient asthma ER visits in Eastern Jackson County (EJC) decreased significantly, by 41% and 29% respectively.*
- *About 45% of houses in EJC were built pre-1979, posing a higher risk of lead exposure to homeowners.*
- *Only 1.5% of Jackson County residences were tested for Radon between 2003 and 2021. 43.7% of those tests had results above the recommended level.*



Longview Lake,
Lee's Summit

ENVIRONMENTAL JUSTICE INDEX

Environmental Justice is defined as “the fair treatment and meaningful involvement of all people, regardless of race, color, national origin, or income, to develop, implement, and enforce environmental laws, regulations, and policies.”^{87,88}

The Centers for Disease Control and Prevention (CDC) developed the Environmental Justice Index (EJI) as a combination of 36 health, environmental, and social factors that characterize a census tract and are ranked against other tracts nationally. EJI scores are based upon the combined total of those factors within three modules: Health Vulnerability, Environmental Burden, and Social Vulnerability. A higher score on the 0-1 percentile ranking scale means that a census tract is more vulnerable and more burdened by risk factors.^{87,88} Within Eastern Jackson County (EJC), EJI scores range from 0.01 to 0.79. Sugar Creek, Sibley, Raytown, Grandview, Oak Grove, and parts of Lee’s Summit had higher scores, indicating more vulnerability within these communities and a higher likelihood of being burdened by risk factors.

Table 4: Overall Environmental Justice Rank

Source: Centers for Disease Control and Prevention: ATSDR, 2022.

OVERALL ENVIRONMENTAL JUSTICE RANK	Social Vulnerability	Racial/Ethnic Minority Status	Minority Status
		Socioeconomic Status	Poverty
			No High School Diploma
			Unemployment
			Housing Tenure
			Housing Burdened Lower-Income Households
			Lack of Health Insurance
			Lack of Broadband Access
		Household Characteristics	Age 65 and Older
			Age 17 and Younger
			Civilian with a Disability
			Speaks English "Less than Well"
		Housing Type	Group Quarters
			Mobile Homes
	Environmental Burden	Air Pollution	Ozone
			PM2.5
			Diesel Particulate Matter
			Air Toxics Cancer Risk
		Potentially Hazardous & Toxic Sites	National Priority List Sites
			Toxic Release Inventory Sites
			Treatment, Storage, and Disposal Sites
			Risk Management Plan Sites
			Coal Mines
			Lead Mines
		Built Environment	Recreational Parks
			Houses Build Pre-1980
			Walkability
		Transportation Infrastructure	High-Volume Roads
			Railways
			Airports
		Water Pollution	Impaired Surface Water
	Health Vulnerability	Pre-existing Chronic Disease Burden	Asthma
			Cancer
			High Blood Pressure
			Diabetes
			Poor Mental Health

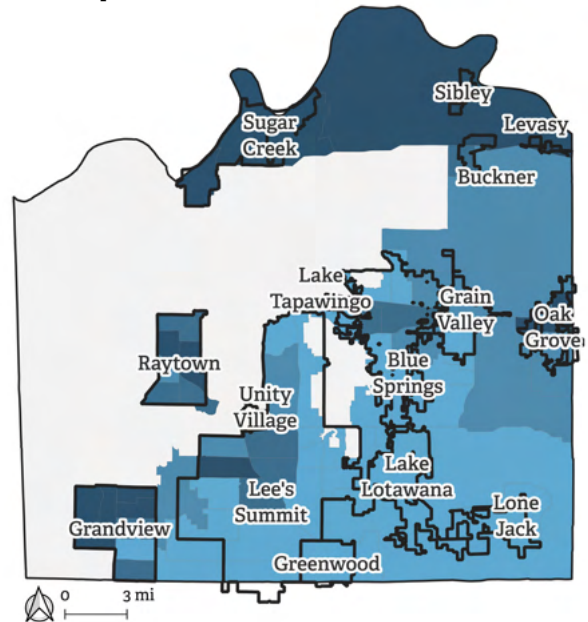
ENVIRONMENTAL JUSTICE INDEX (CONTINUED)

Figure 69: Eastern Jackson County and the Environmental Justice Index by Census Tract, 2014-2021.

Source: Centers for Disease Control and Prevention (CDC).

Environmental Justice Index

- 0 - 0.09
- 0.09 - 0.24
- 0.24 - 0.47
- 0.47 - 0.79
- Jackson County, MO
- EJC City



AIR POLLUTION

Ambient air quality is a major concern when it comes to environmental justice and long-term health outcomes. The Environmental Protection Agency (EPA) specifically regulates levels of six air pollutants that can cause harm to the health of humans and the environment, which include: carbon monoxide, lead, nitrogen dioxide, ozone, particulate matter (PM), and sulfur dioxide.⁸⁹ When air quality is bad, sensitive groups are at higher risk for harmful health effects. These include children, elderly individuals, and people with chronic health conditions like asthma, allergies, coronary obstructive pulmonary disease (COPD) and other lung diseases, heart disease, high blood pressure, and diabetes.^{90,91}

In 2015, the EPA established the current national ozone level standard as 70 parts per billion (ppb) averaged over an 8-hour period. The Air Quality Index (AQI), released concurrently, provides a color-coded scale to indicate health warnings associated with each pollutant level.⁸⁹

Although there are no ozone monitoring stations located within Jackson County itself, the Mid-America Regional Council (MARC) collects ozone data in the surrounding counties within the Air Quality Maintenance Area for the Greater Kansas City Region. A total of 5 air monitors in the counties of Clay, Platte, Wyandotte, and Johnson were monitored from 3/1/2021-10/31/2021 and detected fewer than 3% of days as “Unhealthy for Sensitive Groups.”⁹²

AIR QUALITY CATEGORY	AQI VALUE RANGE	DAYS IN 2021 OZONE MONITORING PERIOD	2015 8-HOUR OZONE (PPB)
Good (Green)	0-50	192	0-54
Moderate (Yellow)	51-100	46	55-70
Unhealthy for Sensitive Groups (Orange)	101-150	7	71-85
Unhealthy (Red)	151-200	0	86-105
Very Unhealthy (Purple)	201-300	0	106-200
Hazardous (Maroon)	301-500	0	>200

Table 5: Standards and Ozone Air Quality in Greater KC Region, MARC, 2021.

Within Jackson County, there are two air pollution monitors maintained by the Missouri Department of Natural Resources (DNR). DNR monitors particulate matter (PM) that is smaller than 2.5 micrometers in diameter, known as PM_{2.5}. PM_{2.5} is associated with respiratory and cardiac health risks, particularly because its small size allows it into almost all areas of the human body. The EPA has established the safe 24-hour average limit to be 12 micrograms per cubic meter (µg/m³). Between 2018 and 2022, average annual PM_{2.5} levels in Jackson County have been recorded at safe levels.

However, when surveying EJC on community perception for air and water quality, one in four CHA Survey respondents from Sugar Creek, and Grandview indicated that air and water quality were a significant or moderate problem. One in five respondents in Sibley, Raytown, and Lake Lotawana reported the same concerns.

Table 6a & 6b: AQI Standards for PM_{2.5} Air Quality and Jackson County PM_{2.5} Averages, 2018-2022. **Source:** MO DNR.

AIR QUALITY INDEX CATEGORY	2015 24-HOUR PM _{2.5} (µg/m ³)	YEAR	TROOST MONITOR: PM _{2.5} AVERAGE	BLUE RIDGE / I-70 MONITOR PM _{2.5} AVERAGE
Good (Green)	0–12	2018	7.5	8.2
Moderate (Yellow)	12.1–35.4	2019	6.8	7.6
Unhealthy for Sensitive Groups (Orange)	35.5–55.4	2020	6.8	7.6
Unhealthy (Red)	55.5–150.4	2021	7.7	8.6
Very Unhealthy (Purple)	150.5–250.4	2022	6.9	7.5
Hazardous (Maroon)	250.5–500			

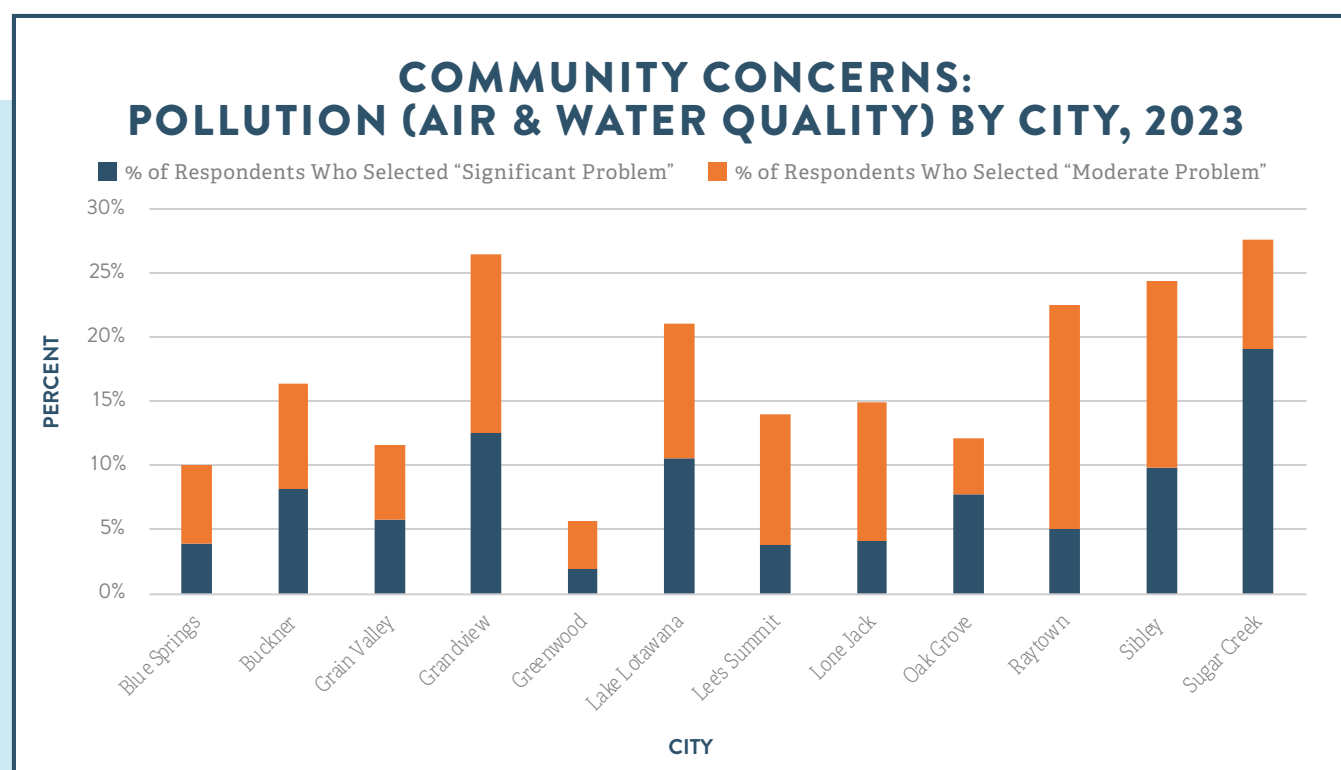


Figure 70: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Pollution (Air and Water Quality) by City. **Source:** Jackson County Public Health; 2023 CHA Survey.



Lake Vista Trail,
Blue Springs



67% of EJC is covered by trees and plants.



Every year, EJC vegetation captures the CO₂ equivalent of **82,000 cars** running (409,590 tons of CO₂).



In a single year, EJC trees and plants reduce potential runoff by over **42,000 gallons**.

ASTHMA

Asthma is a medical condition characterized by the narrowing of airways, causing breathing difficulty. Individuals with asthma are more sensitive to the inflammatory effects of airborne pollutants or smoke. As of 2020, 5.8% of children and 8.4% of adults in the US live with asthma.⁹³

In EJC, asthma-related Emergency Room (ER) visits decreased from 2019 to 2020. In-patient ER visits decreased by 41% in EJC, while out-patient ER visits decreased by 29%.⁹⁴ Monitoring future trend data may help determine whether this decrease was related to behavioral changes related to the COVID-19 pandemic.

TREE COVERAGE

Greenspace in a community is associated with health benefits, whether it takes the form of natural forest or a tree-lined urban street.⁹⁵ The beneficial effects of tree coverage include decreased air pollution, decreased local temperature due to both shade and CO₂ absorption, increased recreational enjoyment, and the overall reduction of climate change effects.

While there is no recommended percentage of tree canopy for a city, routine measurement with tools like iTree Canopy can allow local communities to monitor their tree coverage and its estimated benefits.⁹⁶ As of 2022, EJC had 67% of its land covered by trees or other vegetation. Trees also reduce and filter runoff, the excess water on a ground surface from heavy rains or snowmelt that can lead to flooding.⁹⁷ In a single year, EJC trees and plants reduced potential runoff by over 42,000 gallons. The annual CO₂ captured by EJC vegetation also offsets emissions from the annual equivalent of nearly 82,000 cars being driven (409,590 tons of CO₂).⁹⁶

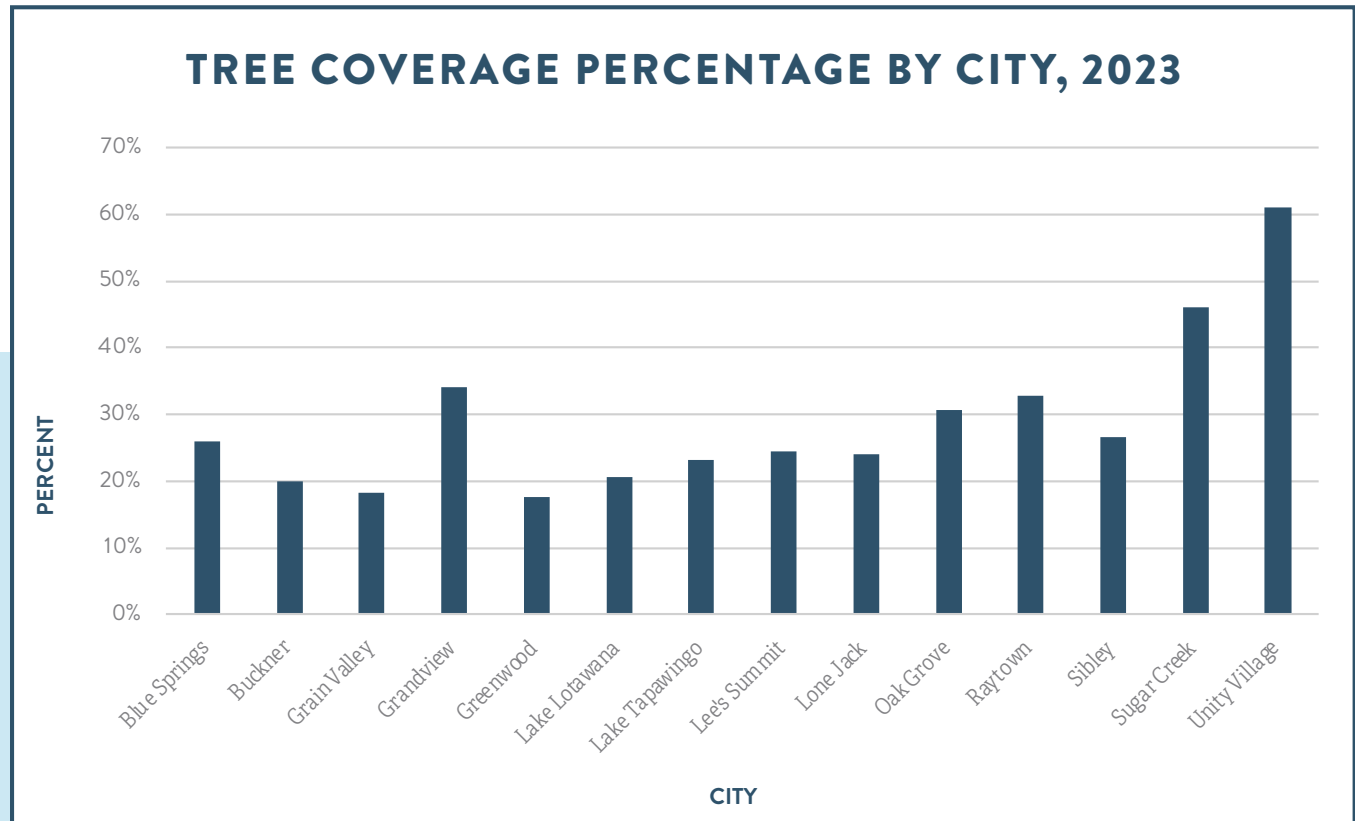


Figure 71: Eastern Jackson County Tree Coverage Percentage by City, 2022

Source: iTree Canopy, 2022.



PARK ACRES

Parks and recreational areas promote healthier lifestyles by providing a space for physical activities like sports, hiking, swimming, and more. According to the National Recreation and Park Association (NRPA), park and recreational agencies in the US typically offer 10.8 acres of parkland per 1,000 residents in a community.⁹⁸

There are about 115 parks in EJC, most of which are in Lee's Summit. While there is greenspace within every city of EJC, three communities do not have any parks recognized by the ParkServe mapping tool: Levasy, Lake Lotawana, and Unity Village.⁹⁹ At least 1 in 4 respondents from Sibley, Buckner, Grandview, Raytown, Lone Jack, and Oak Grove indicated that parks and access to outdoor activities were a significant or moderate problem in their communities.

For more information about environmental initiatives involving parks, see the **Policy Scan Section** on **page 152**.

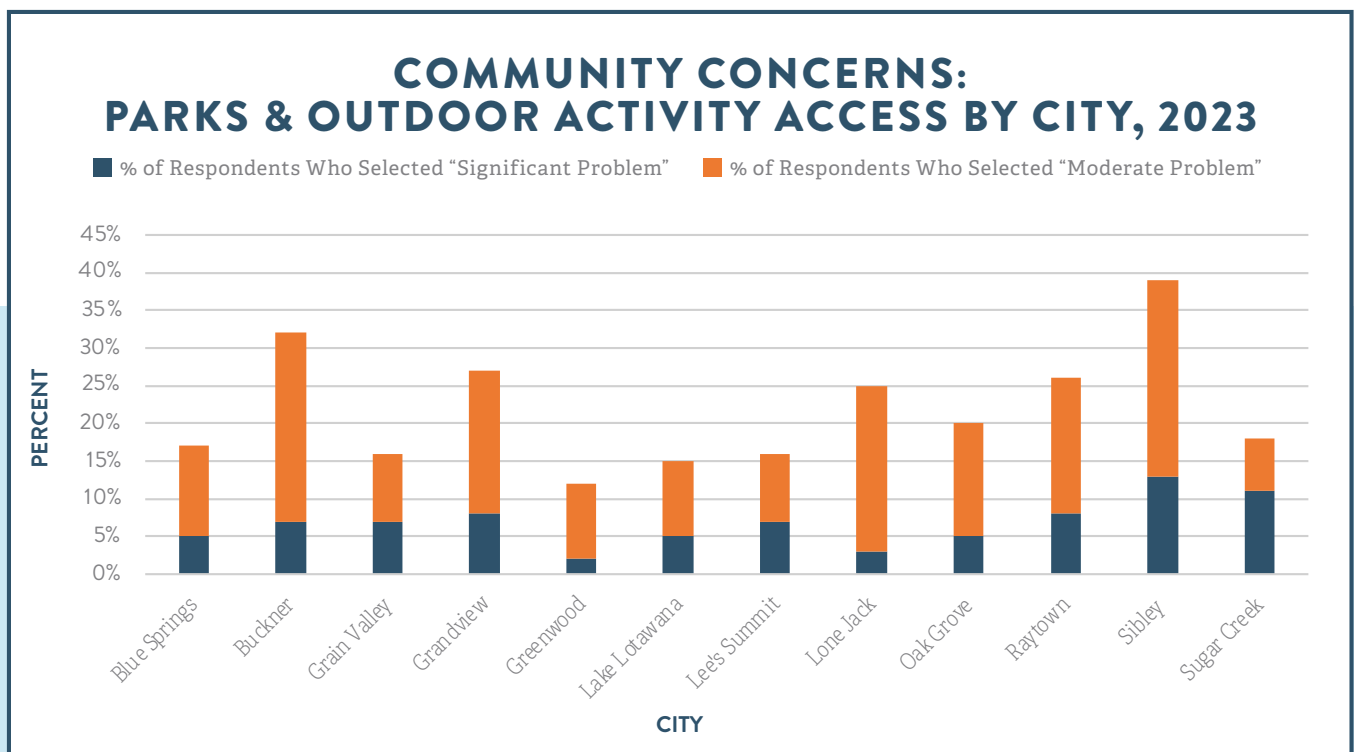


Figure 72: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Access to Parks and Outdoor Activities by City.

Source: Jackson County Public Health; 2023 CHA Survey

CLIMATE TRENDS

Changes to climate can impact human health by altering the intensity and frequency of health risks, such as extreme weather and exposure to seasonal illnesses. New health problems may also develop in regions that experience new climate trends.

As seasonal temperature ranges shift, transmission of vector-borne diseases like Lyme disease and West Nile Virus can occur in new geographic areas. The health effects of extreme temperatures or weather events can also pose an increased risk to health. How vulnerable a person is to climate change-related hazards is dependent on an individual's personal exposure to increased hazards (ie. working outdoors increases exposure to extreme heat or cold events), sensitivity (ie. having asthma increases sensitivity to air pollution and smoke), and adaptive capacity (ie. socioeconomic status can impact a person's response options to environmental hazards).¹⁰⁰

In Jackson County, temperatures are expected to increase across all months in the next 50 years and beyond. The predictive models used to calculate this are Representative Carbon Pathway (RCP) 8.5, shown in red in **Figure 75**, and RCP 4.5, shown in blue. RCP 8.5 (**Figure 73**) projects temperatures through the year 2100 based upon continued increases in global emissions of heat-trapping gases. RCP 4.5 (**Figure 74**) predicts temperatures based upon global emissions of heat-trapping gases ceasing by the year 2040 and then being substantially reduced through 2100.¹⁰¹ Even with drastic declines in emissions of heat-trapping gases, these predictions suggest significant temperature increases in the region. These temperature increases may alter the range of disease-carrying insects and change the frequency and location of severe weather events.

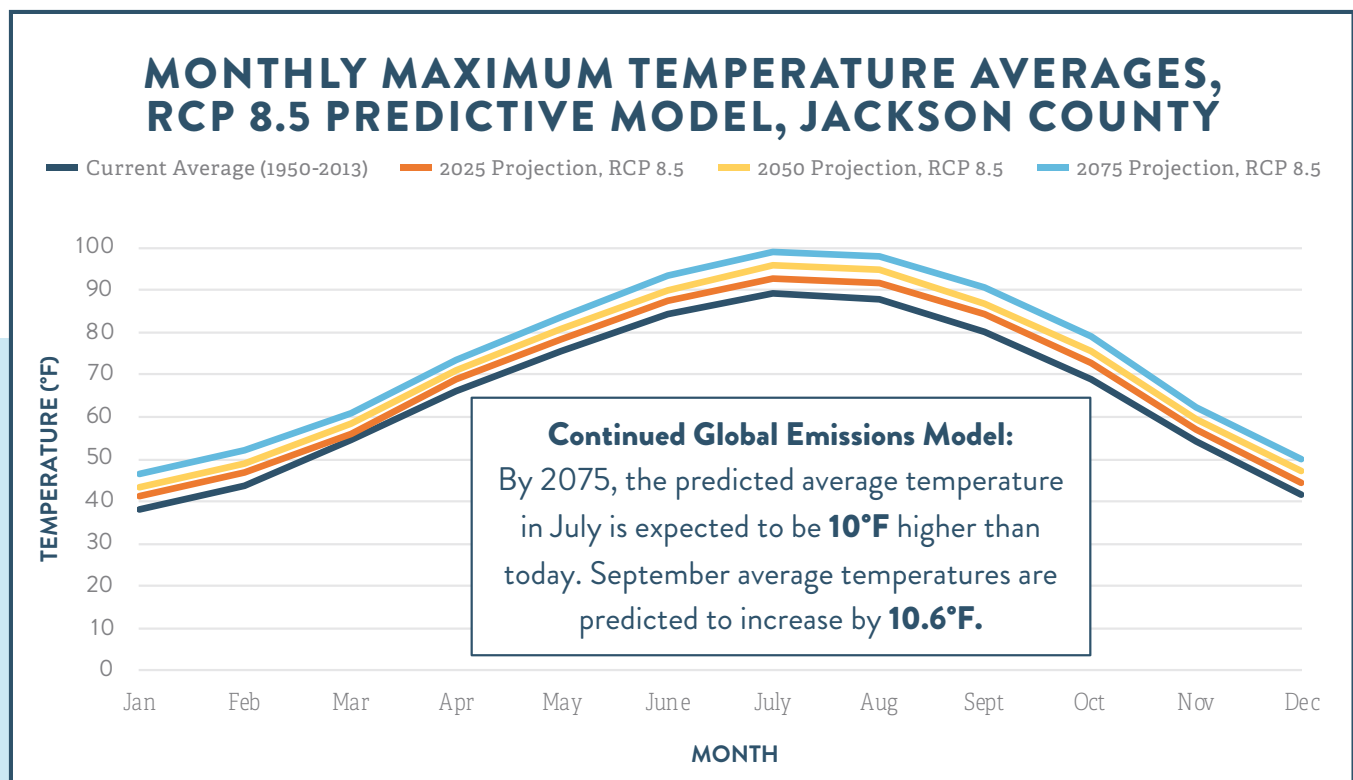


Figure 73: Jackson County Average Monthly Temperature Projections: RCP 8.5 Predictive Model (continued global emissions), 2022.

Source: NOAA Climate Explorer

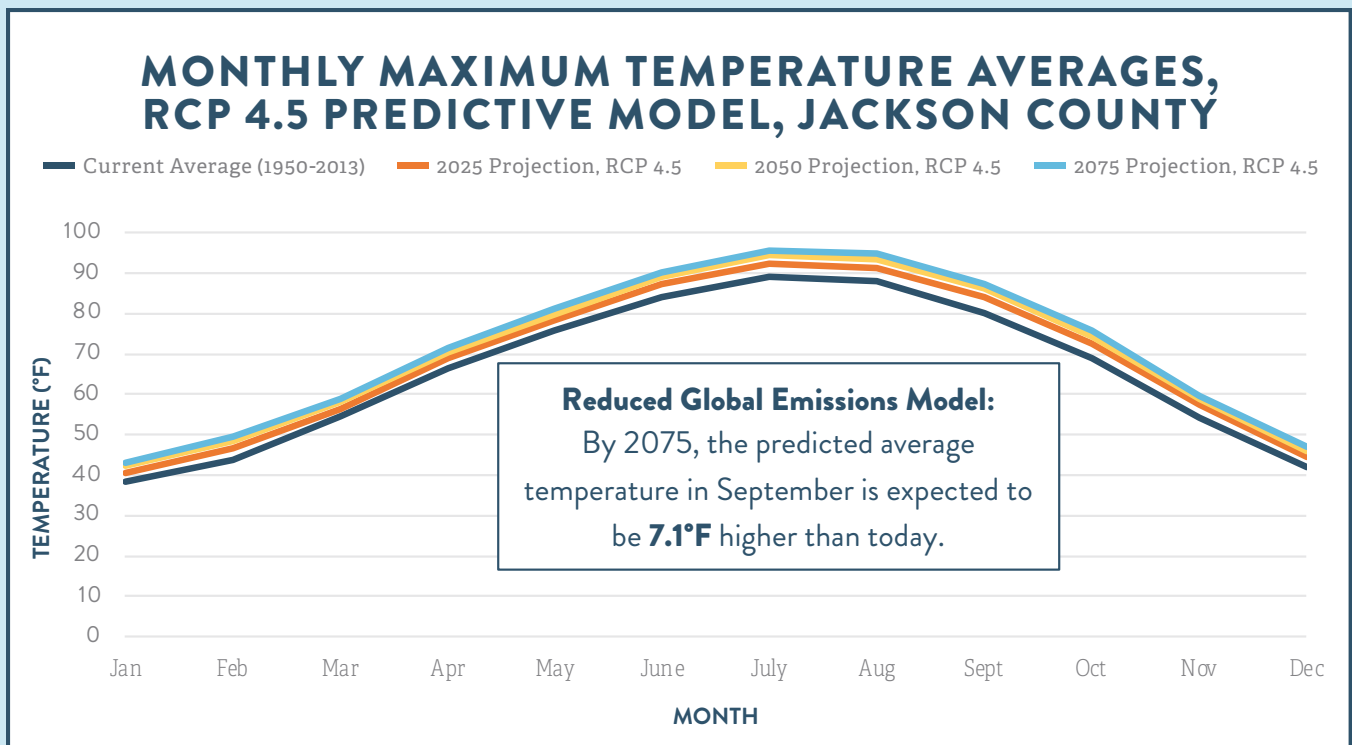


Figure 74: Jackson County Average Monthly Temperature Projections: RCP 4.5 Predictive Model (reduced global emissions), 2022.

Source: NOAA Climate Explorer

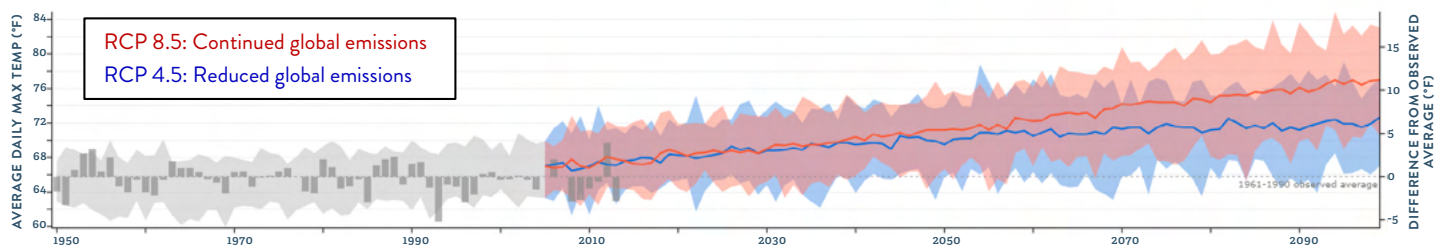


Figure 75: Jackson County Temperature Projections: RCP 4.5 & 8.5 Predictive Model, 2022.

Source: NOAA Climate Explorer

CLIMATE TRENDS (CONTINUED)

As the climates of Missouri, Jackson County, and specifically Eastern Jackson County, change in the coming years, it will be important to monitor the health effects that result from fluctuating temperatures. In EJC, heat stress-related ER visits decreased from 2019 to 2020. In-patient ER visits decreased by 29% in EJC, while out-patient ER visits decreased by 13%.¹⁶ Monitoring future trend data may help determine whether this decrease was related to behavioral changes related to the COVID-19 pandemic.

Chemical Exposures

LEAD

Lead exposure has decreased since the United States banned lead in paint in the late 1970s but continues to cause health problems today. In children, lead poisoning can damage the nervous system and brain, cause developmental problems, and negatively impact a child's learning, hearing, and speech.⁵⁵

LEAD (CONTINUED)

Living in a home built prior to 1978-79 can increase the risk of lead exposure but is not its sole source. Other potential routes include soil dust contaminated with leaded gasoline or industrial pollution, drinking water transported through lead pipes that are not protected properly against corrosion, or lead in consumer products like plastics, toys from prior to the U.S. lead ban or produced in foreign countries, and some jewelry.¹⁰³

Within EJC, 44.6% of housing units were built in 1979 or earlier.¹² Cities like Sugar Creek, Grandview, Raytown, and Buckner have some of the highest rates of houses built prior to 1979 compared to other cities within EJC, increasing residents' risks of lead exposure from their homes.

Lead can cause serious health problems that will affect individuals for the rest of their lives. MDHSS recommends that all children between 6 and 72 months of age have their blood lead levels (BLLs) tested. The CDC's blood lead reference value (BLRV) used to identify the 97.5th BLL percentile of children under 5 was updated recently to 3.5 micrograms per deciliter ($\mu\text{g}/\text{dL}$) from its previous value of 5 $\mu\text{g}/\text{dL}$, which is still used to stratify MDHSS data. Children with a BLL in the 5-10 $\mu\text{g}/\text{dL}$ range are recommended for follow-up environmental risk assessment in their homes, while those with a BLL of >10 $\mu\text{g}/\text{dL}$ are additionally provided case management by the MDHSS Childhood Lead Poisoning Prevention Program.¹⁰⁴

In 2019, blood lead testing showed that of the 78,770 children tested, there were 2,175 children in Missouri under 5 years old with BLLs between 5 and 10 $\mu\text{g}/\text{dL}$, while 425 children had BLLs above 10 $\mu\text{g}/\text{dL}$. Within the ZIP codes of EJC, 4,002 children total had their BLL tested. Of that total, 42 children were in the 5-10 $\mu\text{g}/\text{dL}$ and 7 had a BLL above 10 $\mu\text{g}/\text{dL}$.¹⁰⁵

Figure 76 (below): Eastern Jackson County Percent of Housing Units Built In or Before 1979 by ZIP Code, 2020.

Source: U.S. Census Bureau; American Community Survey (ACS).

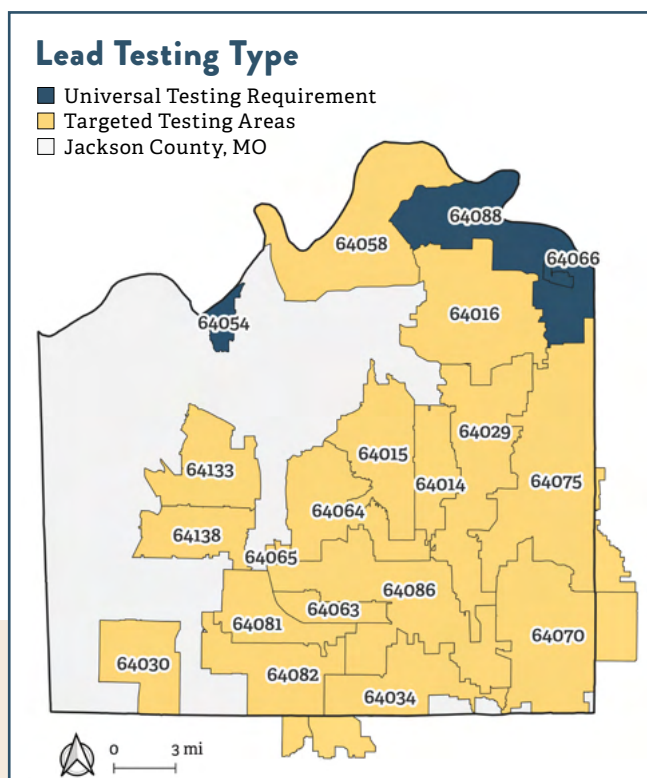
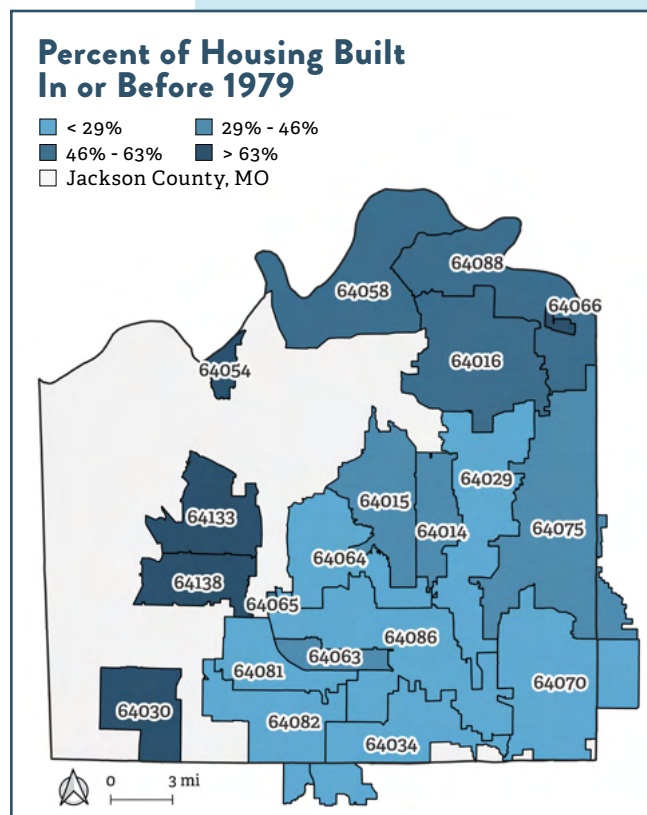


Figure 77 (right): Eastern Jackson County Lead Blood Level Testing Requirements by ZIP Code, 2015.

Source: Missouri Department of Health and Senior Services (MDHSS); Jackson County Annual Childhood Lead Testing Area

RADON

Radon is an odorless, tasteless gas originating from the breakdown of uranium in soil. This radioactive element is known to be a carcinogen and the second leading cause of lung cancer in the United States. As radon can accumulate inside homes, testing the radon concentration at local residences is an important preventative action.¹⁰⁶ On average, an American home has an indoor radon concentration of 1.3 pCi/L. Mitigation action is strongly recommended if levels exceed 4.0 pCi/L and moderately recommended if levels are in the 2-4 pCi/L range.¹⁰⁷

Between 2003 and 2021, only 1.47% of Jackson County residences were tested for radon. Of these tests, 43.7% had results above 4.0 pCi/L of radon.¹⁰⁵ Free radon tests can be provided to Missouri residents upon request from the Department of Health and Human Services. Visit their website, health.mo.gov/radon, for more information.

HAZARDOUS WASTE SITES

Living in close proximity to hazardous waste sites can lead to increased risk of chemical exposures. EPA Brownfield sites are properties that have potentially hazardous chemical or pollutant contamination that must be evaluated, and often cleaned up, before site usage. This may happen at the local or state level. At the state level, a site may be designated as a Voluntary Clean-up Program (VCP) when a developer determines a use for the property and must complete remediation in order to meet state safety guidelines. EPA Superfund Sites are properties where hazardous material mismanagement is addressed and cleaned up by the federal government and responsible private parties.¹⁰⁸

There are 40 hazardous waste locations within the ZIP Codes of EJC and 33 adjacent to EJC within Independence ZIP Codes.¹⁰⁹

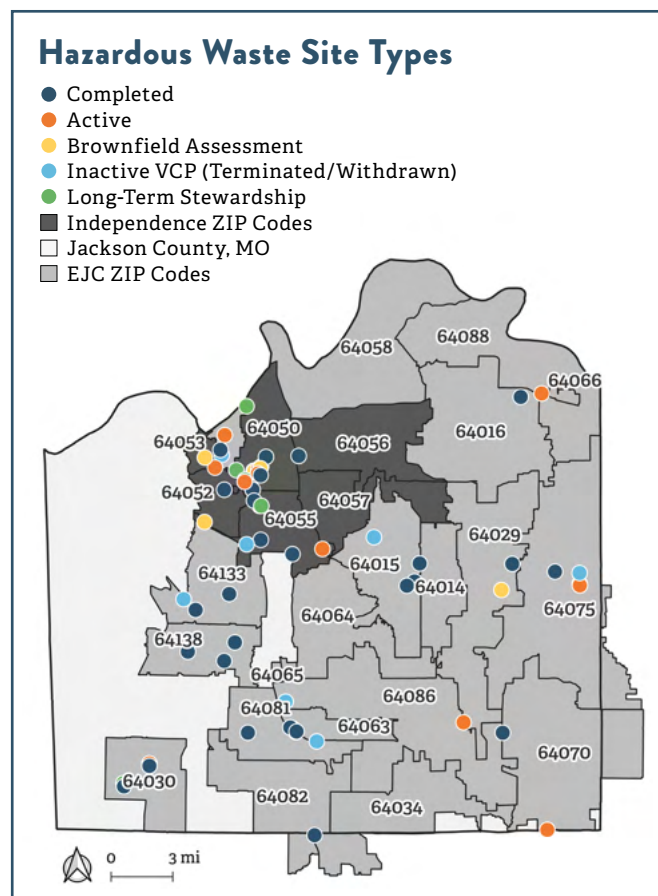


Figure 78: Eastern Jackson County and Independence, Missouri Hazardous Waste Sites by ZIP Code, 2020.

Source: Missouri Department of Natural Resources (MDNR); Environmental Site Tracking and Research Tool (E-Start).



HAZARDOUS WASTE SITES (CONTINUED)

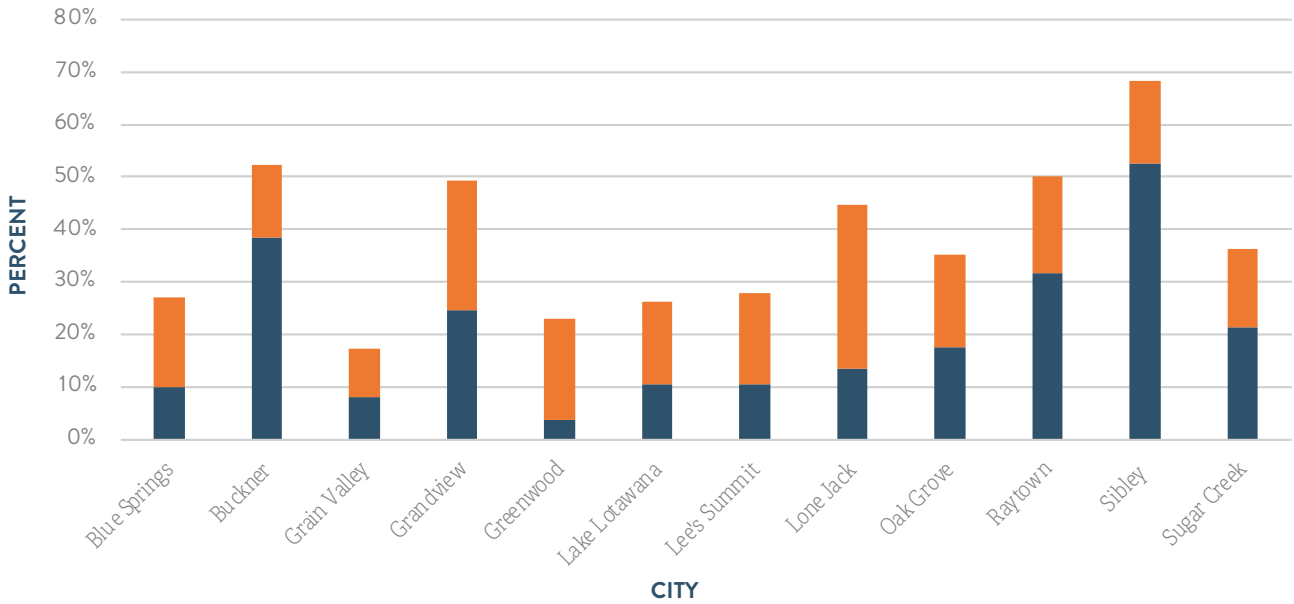
While the CHA Survey did not specifically ask about hazardous waste sites, close to half of respondents in Sibley, Buckner, Raytown, and Grandview indicated illegal dumping was a significant or moderate problem in their communities.

Figure 79: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Illegal Dumping by City.

Source: Jackson County Public Health; 2023 CHA Survey.

COMMUNITY CONCERNS: ILLEGAL DUMPING BY CITY, 2023

■ % of Respondents Who Selected "Significant Problem" ■ % of Respondents Who Selected "Moderate Problem"



Community Connection & Quality of Life

WHAT IS IT?

Social and community context and connection are key social determinants of health. Positive relationships and interactions with neighbors, coworkers, friends, relatives, and others can contribute to a sense of psychological safety and belonging. Being involved and taking pride in one's community can have an effect on the entire region.

WHY IS IT IMPORTANT?

Quality of life can be a direct indicator of health status within a community. Those living a healthier life are more likely to report having a higher quality of life compared to others.

KEY FINDINGS

- *Eight in ten Community Health Assessment (CHA) Survey respondents in Eastern Jackson County (EJC) agreed or strongly agreed that they were satisfied with their overall quality of life.*
- *Lone Jack and Sibley residents are nearly twice as likely, and residents of Oak Grove and Raytown are almost three times as likely to lack internet connectivity.¹¹⁰*
- *One in two EJC residents in the CHA Survey identified firearm and gun violence as a problem.*
- *Firearms were reported in 83% of homicides in EJC.¹¹¹*



COMMUNITY VOICE

In the Community Health Assessment (CHA) Survey, respondents were asked to assess their communities in a number of ways. Approximately 8 out of 10 respondents agreed or strongly agreed that their communities were a good place to raise children and that they were satisfied with their overall quality of life. More than half of respondents believed that their communities were also good places to grow older, offered adequate housing and employment options, and reported that they believed people had pride in and a sense of shared responsibility for their community.

However, nearly 1 in 4 CHA Survey respondents disagreed or strongly disagreed that there were

adequate housing options, and 1 in 5 disagreed or strongly disagreed that there were jobs available in their communities. More than 1 in 5 respondents also reported that they did not have support in their community if they needed help or assistance during times of stress.

CHA Survey respondents were also asked to rate a list of potential community strengths using the options “Not a Strength,” “Slight Strength,” “Moderate Strength,” “Significant Strength,” or “I don’t know.” They were given the same options when asked to rate a list of potential concerns about their community of residence. Survey respondents identified the following as the top ten strengths and concerns of their communities.



Figure 80: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: ‘Significant’ or ‘Moderate’ Agreement with Community Satisfaction Statements.

Source: Jackson County Public Health; 2023 CHA Survey.

COMMUNITY VOICE (CONTINUED)

TOP 10 STRENGTHS OF COMMUNITIES IN EJC	TOP 10 CONCERNS OF COMMUNITIES IN EJC
Healthy environment (clean air and water)	Distracted driving
Good place to raise kids	Access to public transportation
Walkable neighborhoods and public areas	Access to affordable housing
Fresh, nutritious food is easy to access	Low-paying jobs
High-quality public schools	Access to affordable healthcare
Effective emergency preparedness & response	Illegal dumping
Strong religious and spiritual communities	Gun violence
Healthcare is affordable and accessible	Alcohol/drug use
Activities for children and families	Violence and other crime
Inclusive and welcoming of all people	Mental health (including suicide and mental illness)

Table 8 (left): Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Strengths within Respondent's Community.

Table 9 (right): Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Concerns within Respondent's Community.

Source (both): Jackson County Public Health; 2023 CHA Survey.

INTERNET CONNECTIVITY

Internet connectivity is an additional resource necessary for a healthy community. Internet access means access to work, school, social networks, key resources, and basic information. Home internet access has become as standard as telephone service. During the peak of the COVID-19 pandemic, home internet access became essential as children attended school virtually, many residents worked remotely for the first time, and events, religious services, and other gatherings moved to online platforms. While nearly 89% of EJC residents have home

internet access, more than 113 in every 1,000 residents do not have reliable internet access.^{110,112} Lone Jack and Sibley residents are nearly twice as likely, and residents of Oak Grove and Raytown are almost three times as likely to lack internet connectivity as their neighbors in other EJC communities. As more resources, jobs, and educational opportunities move to virtual platforms, internet access becomes a significant barrier for under-connected communities. Feeling disconnected and isolated from the larger community can have major impacts on physical and mental health.

SAFETY

Feeling safe in your home, neighborhood, and community is a key factor in one’s quality of life and can help lead to better health outcomes. Safety can be measured in many ways. Community members may feel concerned about violence and crime occurring in their communities. As shown in Figure 81, 81.55% of CHA Survey respondents reported feeling very safe or usually safe in their communities. Only 7.51% of residents reported feeling sometimes unsafe or very unsafe.

Feeling safe in the home is essential for overall well-being. While the majority of CHA Survey respondents indicated that they are not physically abused, verbally abused, or

threatened, interpersonal violence can be hard to measure using paper or digital surveys. Approximately 10% of respondents indicated that they are sometimes insulted, called names, talked down to, or yelled at by someone, including a family member or romantic partner, and 5% reported “sometimes” experiencing threats of violence. EJC is served by Hope House, an agency providing shelter and services for survivors of domestic and sexual violence. In 2022, Hope House reported providing shelter to 266 survivors and their children, as well as placing more than 100 others in emergency hotel stays. In addition, Hope House provided counseling services to more than 500 survivors and children in EJC.¹¹³

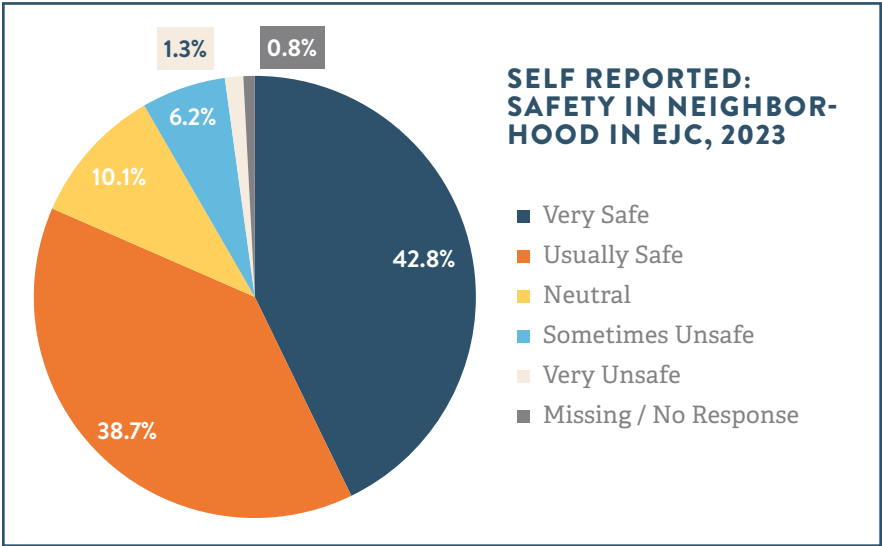


Figure 81: Eastern Jackson County Neighborhood Safety, 2023.
Source: Jackson County Public Health; 2023 CHA Survey.

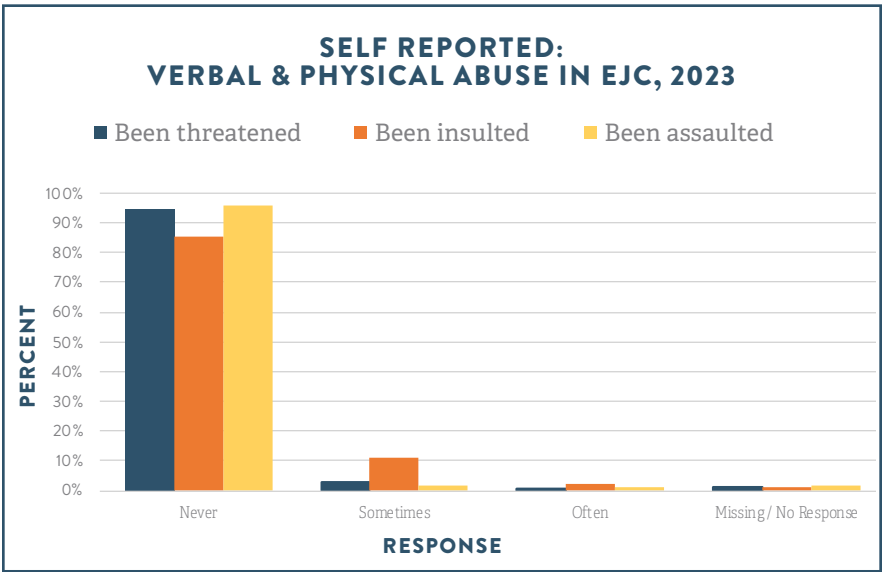


Figure 82: Eastern Jackson County Self-Reported Verbal and Physical Abuse, 2023.
Source: Jackson County Public Health; 2023 CHA Survey.

SAFETY (CONTINUED)

In 2021, there were 1,698 arrests for violent offenses and 2,698 drug-related offense arrests by EJC law enforcement agencies. Between 2017 and 2022, 136 lives were lost to homicide in EJC, including 28 deaths in 2022. While homicides appeared to decline in EJC in 2019, deaths have increased since 2020. Law enforcement

data indicates that firearms were used in 83% of homicides investigated in EJC.¹¹⁴ Rates of homicide also vary by age and sex. In EJC, rates of homicide are higher among men in all age groups. When looking at total rates of homicide (including both males and females) the 15 to 24 age group has the highest rate of homicide, and these rates decrease, as the age groups get older.¹¹⁵

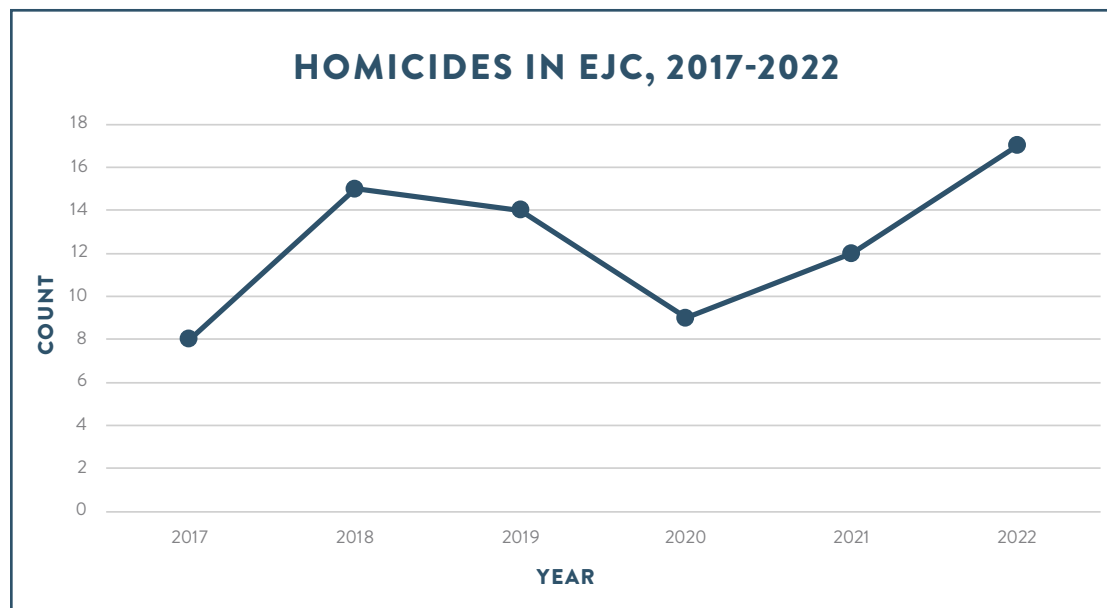


Figure 83. Eastern Jackson County Number of Homicides, 2017-2022.

Source: Missouri State Highway Patrol Criminal Justice Information, 2017-2022.

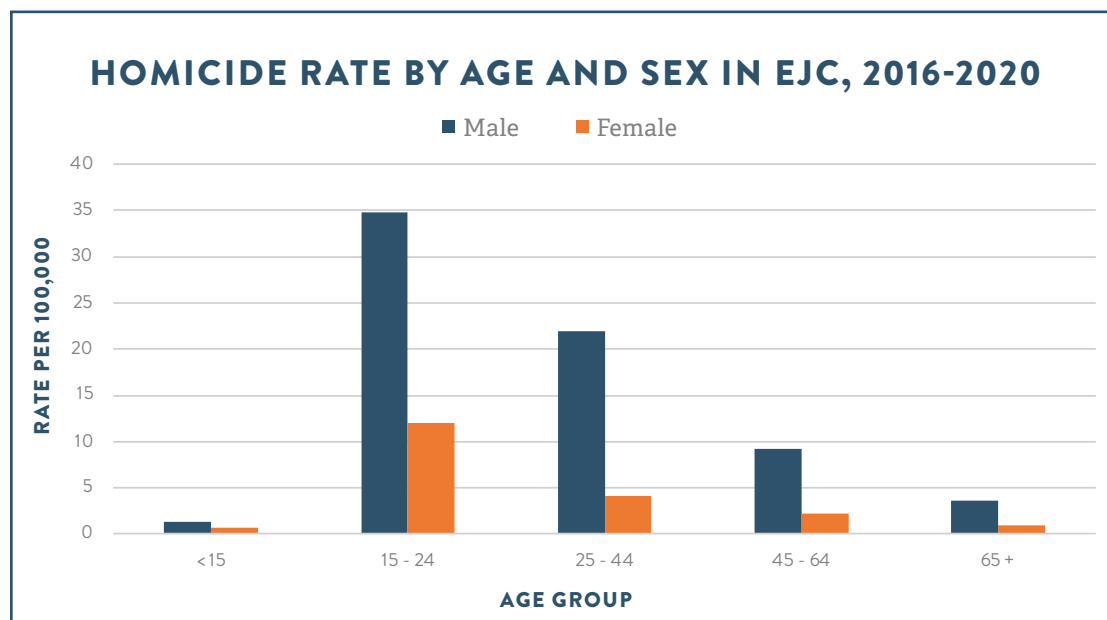


Figure 84. Eastern Jackson County Homicide Rate per 100,000 residents by Age and Sex, 2016-2020.

Source: MDHSS MOPHIMS Death MICA, 2016-2020.

SAFETY (CONTINUED)

Nearly or above 50% of respondents to the CHA Survey from Raytown, Grandview, and Sugar Creek indicated that firearm and gun violence are a significant or moderate problem within their community. When asked if violence and other crime were a problem in the community, the same cities had nearly or over 50% indication that violence and other crimes were a significant or moderate problem within their community.



COMMUNITY CONCERNS: FIREARMS AND GUN VIOLENCE BY CITY, 2023

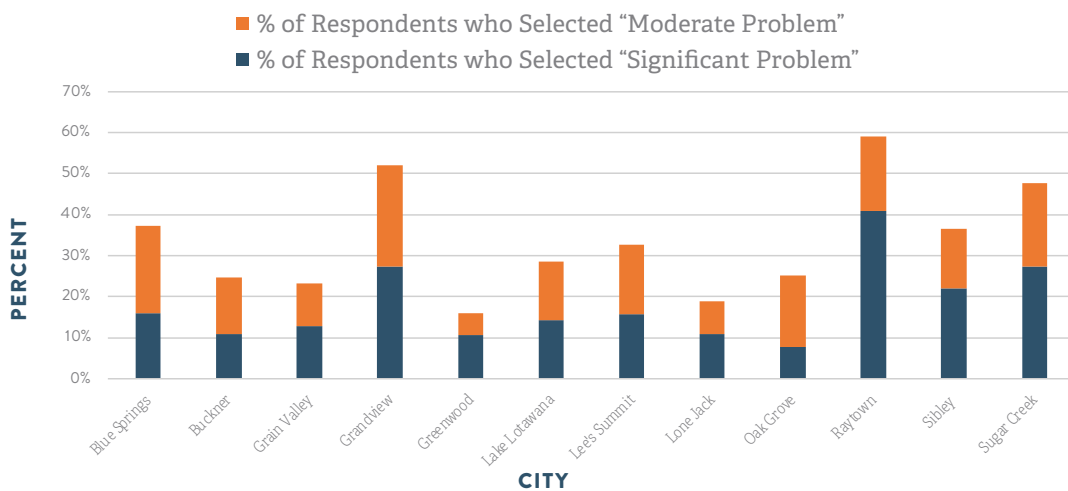


Figure 85: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Firearms and Gun Violence within Community by City.

Source: Jackson County Public Health; 2023 CHA Survey.

COMMUNITY CONCERNS: VIOLENCE AND OTHER CRIME BY CITY, 2023

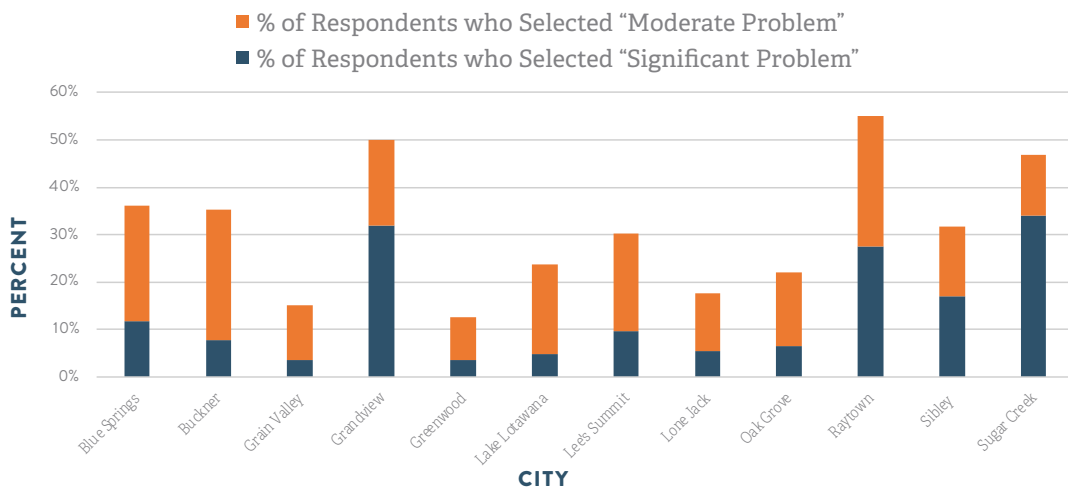


Figure 86: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Violence and other Crime within Community by City.

Source: Jackson County Public Health; 2023 CHA Survey.

SOCIAL VULNERABILITY INDEX

The CDC's Social Vulnerability Index (SVI) uses information from the U.S. Census to assess a community's level of risk during a public health emergency, like a natural disaster or disease outbreak, by analyzing 15 key socioeconomic factors. These factors include:¹¹⁶

- **Socioeconomic status** – How many households in this community are living in poverty? What is each household's annual income? How many households have adults who are currently unemployed? How many households have adult residents who do not have a high school diploma?
- **Household composition and disability** – How many households have residents over the age of 65 or under 17? How many are single parent households? How many households have residents with disabilities?
- **Race/ethnicity and language** – How many households have members belonging to a historically marginalized racial or ethnic group? How many households have members who have limited English skills?
- **Housing or transportation status** – How many households are living in multi-unit structures, such as apartment complexes, mobile homes, crowded residences, or group living quarters, like a group home? How many households do not own a vehicle?

Communities with higher levels of social vulnerability may struggle to recover from emergencies and natural disasters due to lack of financial resources, transportation and mobility challenges, and connectedness to other parts of the region. While the SVI cannot predict specific health outcomes and conditions the community faces, it can provide valuable information about the challenges that make it vulnerable in emergency situations. Social Vulnerability scores range from 0 (lowest vulnerability) to 1 (highest vulnerability) and are scored in relation to other communities.¹¹⁶ For example, compared to other counties in Missouri, Jackson County has an overall Social Vulnerability score of 0.72. This indicates a “medium to high level of vulnerability” and means that 72% of other

counties in Missouri are less vulnerable than Jackson County. At the census tract level, an SVI value of 0.64 showcases that 64% of census tracts in Missouri are less vulnerable than the identified census tract, and that 36% of census tracts in Missouri are more vulnerable.¹¹⁷

Based on data from the 2020 Census, EJC communities with the highest levels of Social Vulnerability include: northwestern Raytown, south of 53rd Street and 350 Highway; Grandview, west of 71 Highway; and Lee's Summit, south of Colbern Road and north of Chipman Road, between 350 Highway and 291 Highway.¹¹⁸

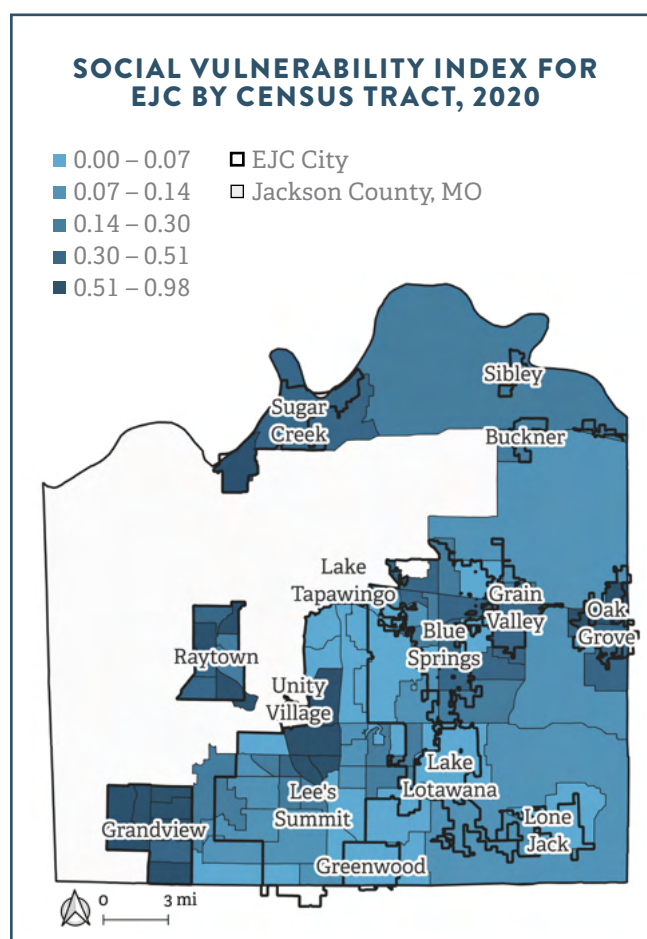


Figure 87. Eastern Jackson County and the Social Vulnerability Index by Census Tract, 2020.

Source: Centers for Disease Control and Prevention; Agency for Toxic Substances and Disease Registry (ATSDR).



COVID-19

WHAT IS IT?

SARS-CoV-2, also referred to as COVID-19, is a virus that emerged in late 2019 and quickly became a global pandemic. In the United States alone, over one million people lost their lives during the COVID-19 pandemic.

WHY IS IT IMPORTANT?

Those suffering from prior health conditions, such as diabetes, asthma, lung disease, or who were immunocompromised are at a higher risk of becoming very sick if they contract COVID-19. The COVID-19 pandemic also highlighted areas of inequity in healthcare and across other systems such as education, criminal justice, financial systems and many more.¹¹⁹

KEY FINDINGS

- *As of December 31, 2022, in Eastern Jackson County (EJC), there were 61,683 confirmed COVID-19 cases, with 82,154 confirmed and probable cases when combined. There were also 881 COVID-19 related deaths reported in EJC.*¹²⁰
- *COVID-19 case rates were highest among people identifying as Native Hawaiian and Pacific Islander or a race not listed in the Census, followed by people identifying as Black or American Indian and Alaskan Native.*¹²¹
- *The age group with the largest total number of COVID-19 cases was 25-44 years.*¹²¹
- *The age group with the highest number of COVID-19 related hospitalization and deaths was among those 65 years and older.*¹²¹
- *In Jackson County, nearly 91% of the population aged 65 years and older completed their primary series of the COVID-19 vaccination by the end of 2022.*¹²²
- *Approximately half of Community Health Assessment (CHA) Survey respondents self-reported that they had tested positive for COVID-19.*
- *Nearly two in three of those who reported having a positive test experienced mild to moderate symptoms.*

COVID-19 DISPARITIES

It is widely recognized that COVID-19 affected races and ethnicities differently across the United States with structural racism and discrimination substantially influencing morbidity and mortality.^{123,124} Like many health issues, severity of COVID-19 was partially dependent on the existence of preexisting conditions, comorbidities, and structural inequities facing communities of color. This is evident seeing that Black and Hispanic/Latino individuals were significantly more likely to die from COVID-19 complications.¹²⁴ This recognition has sparked curiosity and advocacy about why severity, morbidity, and mortality of COVID-19 was strikingly disproportionate.

When looking at case rates by race in Eastern Jackson County (EJC), people who identified as a race not listed on the Census and Native Hawaiian and Pacific Islander had the highest rates of COVID-19 in EJC. While it was a smaller disparity, people who identified as Black or African American and American Indian experienced higher case rates than those who identified as White, Asian or two or more races. People who identified as Hispanic/Latino had a slightly higher case rate than people who did not identify as Hispanic/Latino.¹²¹ People who identify as races or ethnicities from historically marginalized populations were also more likely to be deemed essential workers during the COVID-19 pandemic and therefore exposed at higher rates, contributing toward disproportionate case rates.¹²³ Similarly, members of the LGBTQ+ community are often employed in hospitality and retail settings, contributing to a disproportionate impact.¹²⁵

Access to healthcare also played a major role in the ability to provide equitable treatment to individuals. Hispanic/Latino Americans were 3 times more likely to be uninsured and Black Americans were 1.7 times more likely to be uninsured than White Americans.¹²⁶ Limited access to healthcare left some groups, often people with historically marginalized identities, at higher risk than others, including being unable to get treatment for COVID-19 or access to vaccinations.



Cases

TOTAL CASES

The first COVID-19 case in EJC was identified on February 6, 2020. As of December 30, 2022, there were 61,683 confirmed cases, 82,154 confirmed and probable cases combined (number used for total cases), and 881 COVID-19-related deaths in EJC. Cases reached their highest peak during

the winter of 2021-22. Since the start of 2023, COVID-19 cases, hospitalizations, and deaths have steadily decreased. An individual could be infected with COVID-19 multiple times during the 2020 to 2022 period and each time would be recorded as a new case. Thus, case rates represent total COVID-19 cases and not necessarily a total number of individual people.¹²¹

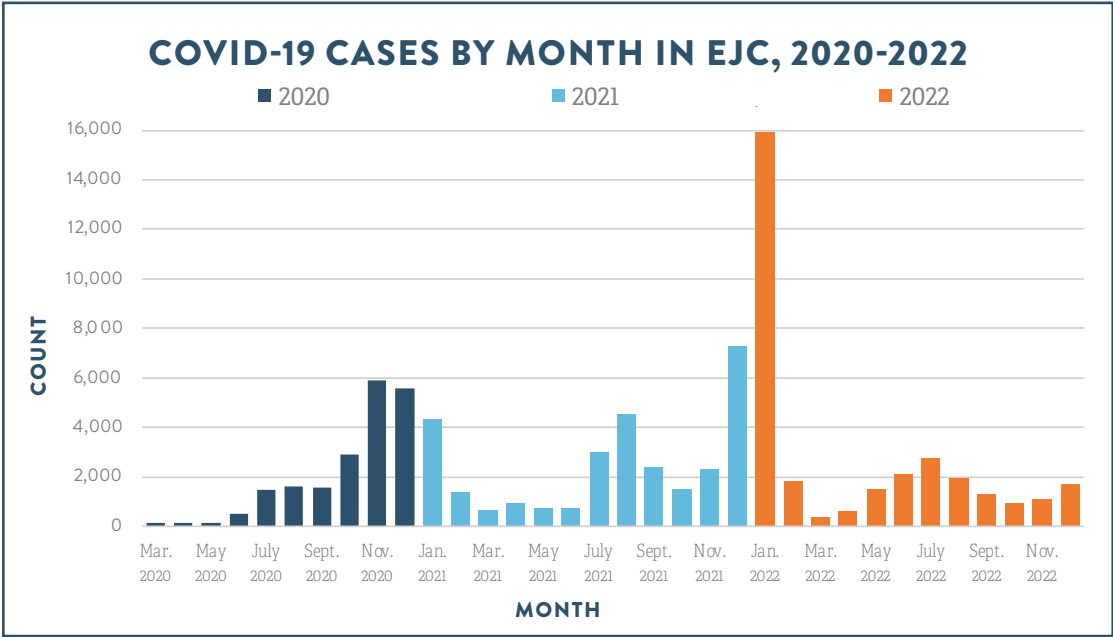


Figure 88: Eastern Jackson County COVID-19 Cases by Month, 2020-2022.

Source: Missouri Department of Health and Senior Services (MDHSS) EpiTrax, 2023.

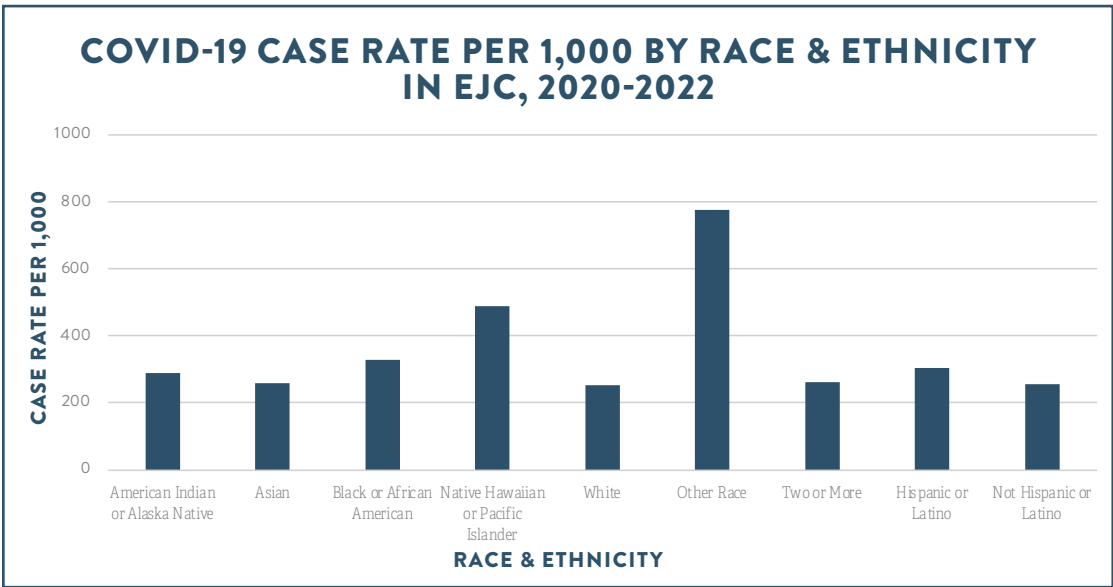


Figure 89: Eastern Jackson County COVID-19 Case Rates per 1,000 population by Race and Ethnicity, 2020-2022.

Source: MDHSS EpiTrax, 2023.

CASES BY AGE

In EJC, the largest COVID-19 case rates occurred in the 20-24 age group (458 cases per 1,000 people within the age group) and in those 85 years or older (425 cases per 1,000 people within the age group). These high case rates indicate that although more people between ages 25-44 tested positive for COVID-19 overall, individuals ages 20-24 or older than 85 years old were more likely

to test positive for COVID-19 than people in other age groups.¹²¹

These age groups faced elevated risk due to their increased likelihood to live in a group setting. People aged 85 and older are more likely to live in group care settings, such as long-term care facilities, and people aged 20-24 are more likely to live in communal settings, such as dormitories or a shared home with roommates.¹²¹

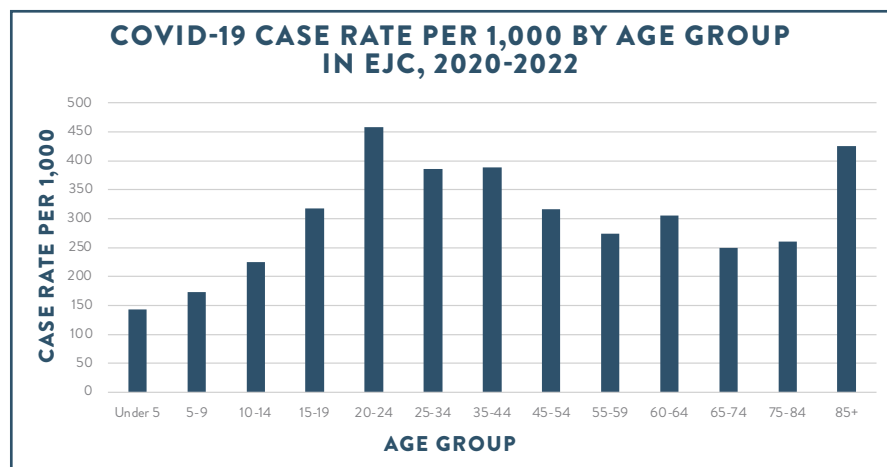


Figure 90: Eastern Jackson County COVID-19 Case Rates per 1,000 population by Age Group, 2020-2022.

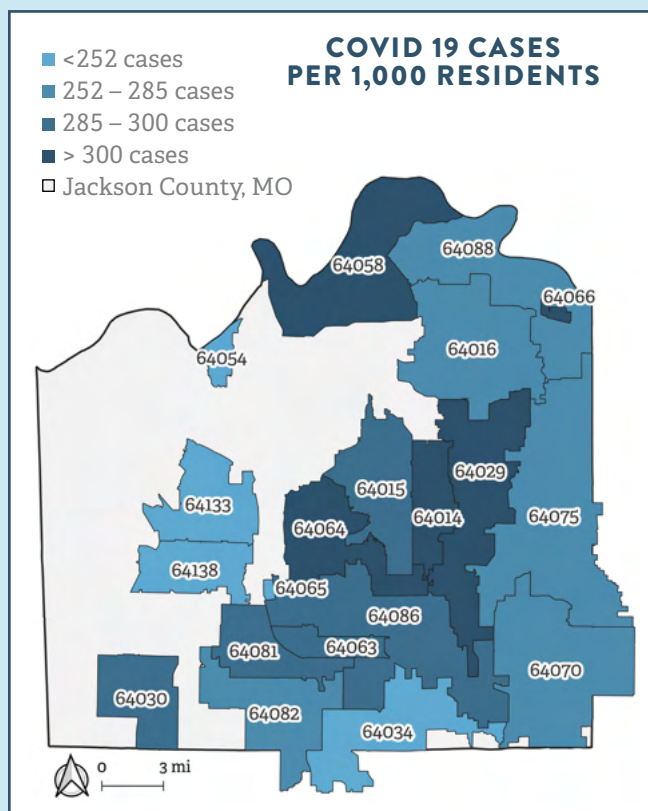
Source: MDHSS EpiTrax, 2023.

CASES BY LOCATION

COVID-19 impacted areas of EJC differently. When breaking down the jurisdiction by ZIP Code, the ZIP Codes 64066, 64014, 64029, 64064, 64015, and 64030 all had a COVID-19 case rate above 300 per 1,000 population. The cities represented either partially or fully by these ZIP Codes are Levasy, Blue Springs, Grain Valley, Lee's Summit, Lake Tapawingo, and Grandview. ZIP Codes 64133 and 64138, which encompass Raytown, had the lowest case rate for COVID-19 with under 200 cases per 1,000 population.¹²¹

Figure 91. Eastern Jackson County COVID-19 Case Rates per 1,000 Residents by ZIP Code, 2020-2022.

Source: MDHSS EpiTrax, 2023.



HOSPITALIZATIONS

In EJC, the percentage of cases that resulted in hospitalization followed national case trends throughout the pandemic. They were especially high in March of 2020, when reliable testing methods were still being developed. Throughout the duration of the pandemic in EJC, August 2021, December 2021, and January 2022 had the most hospitalizations due to COVID-19.¹²¹ Due to variations in hospital reporting throughout the pandemic, only general hospitalization trends are reported in this section.

Individuals that identified as Native Hawaiian or Pacific Islander or as White were more likely to have a COVID-19-related hospitalization than individuals of other races. This may indicate that cases were more severe in people who identified as these races, resulting in a hospitalization, or it could mean that people who identified as

other races avoided hospital care when they had COVID-19 for other reasons. People who did not identify as Hispanic/Latino became hospitalized more frequently due to COVID-19 than Hispanic/Latino individuals. Differences in healthcare access could be another factor affecting differences in hospitalization rates, but evidence to draw a correlation between these factors is currently lacking.¹²¹

In general, as age increased, the percent of COVID-19 cases that resulted in hospitalization increased as well. The highest rates were observed in those aged 75 and older, with nearly a tenth of individuals that tested positive for COVID-19 becoming hospitalized. This suggests that comorbidities found in higher rates in older populations more frequently required higher levels of care when treating COVID-19.¹²¹



Deaths

TOTAL DEATHS

In total, there were 881 COVID-19-related deaths in EJC between 2020 and 2022. The fatality rate followed case total trends throughout the pandemic and peaked similarly to cases during the winter of 2021-2022. Throughout the duration of the pandemic, January 2022 had the most deaths due to COVID-19, followed by November of 2020. When comparing by year, 2021 (377) had the most recorded deaths attributed to COVID-19, followed by 2022 (254) and 2020 (250).¹²¹

DEATHS BY RACE AND ETHNICITY

People who identified as Native Hawaiian or Pacific Islander or identified as a race not listed on the Census had the highest rates of death due to COVID-19 in EJC. People who identified as two or more races or as American Indian or Alaskan Native experienced the lowest mortality risk compared to other race groups in EJC.¹²¹ Additionally, EJC residents who identified as Hispanic or Latino had higher rates of COVID-19-related deaths than people who did not identify as Hispanic or Latino.

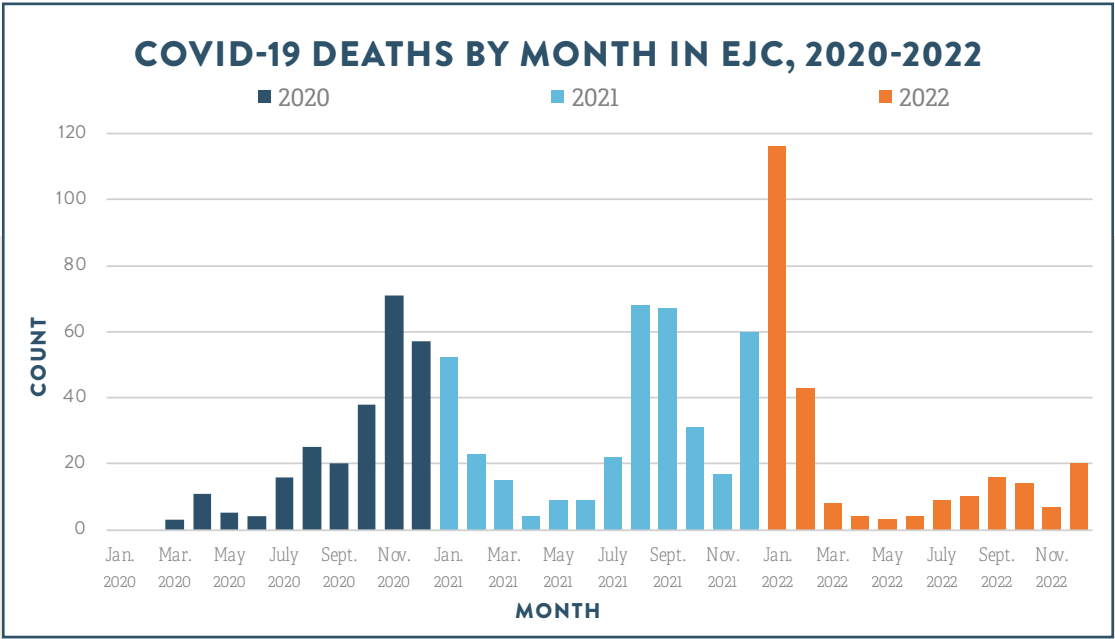


Figure 92: Eastern Jackson County COVID-19 Deaths by Month, 2020-2022.

Source: MDHSS EpiTrax, 2023.

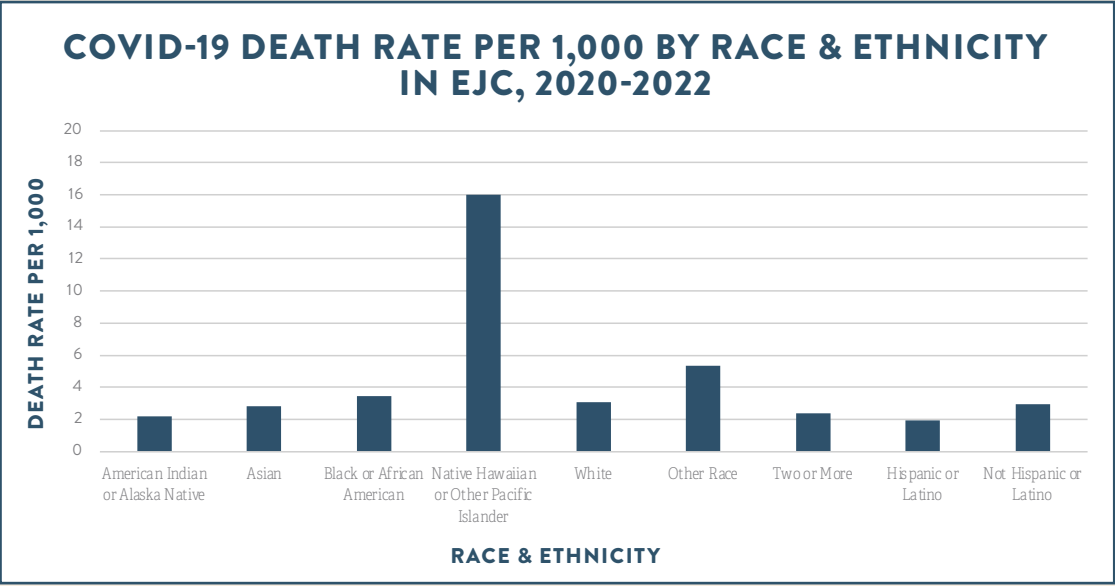


Figure 93: Eastern Jackson County COVID-19 Deaths per 1,000 Residents by Race and Ethnicity, 2020-2022.

Source: MDHSS EpiTrax, 2023.

DEATHS BY AGE

The mortality rate for COVID-19 was significantly higher for those 75 years and older when compared to all other age groups. While people ages 75 and older were less likely to test positive for COVID-19 than those 25-34, individuals 75 years and older were more likely to experience severe morbidity and mortality. Following the hospitalization trend, as age groups increased, so did the mortality rate.¹²¹

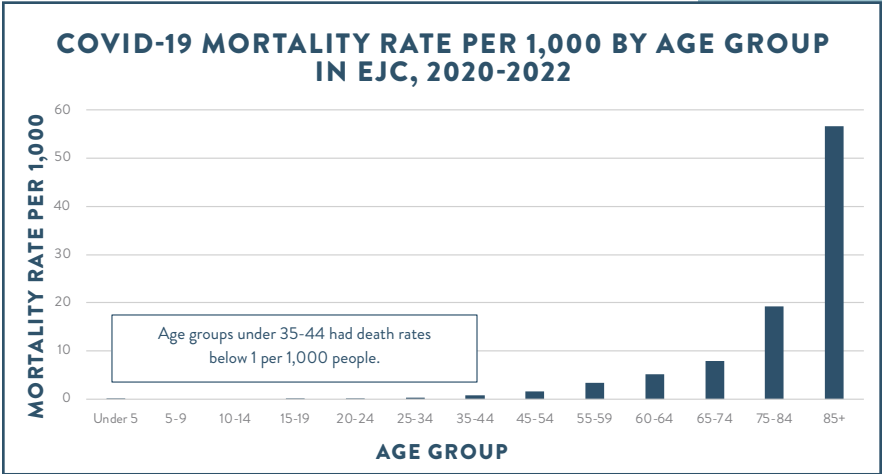


Figure 94: Eastern Jackson County COVID-19 Mortality Rate per 1,000 Residents by Age Group, 2020-2022.
Source: MDHSS EpiTrax, 2023.

VACCINATIONS

In January of 2021, residents of EJC began receiving COVID-19 vaccinations. These vaccines can provide an immune response against the COVID-19 virus and help reduce the chance of severe illness, hospitalization, and death.¹²⁷ As of October 12, 2022, nearly 58% of EJC residents had completed the primary COVID-19 vaccine series, with the highest vaccination rates seen in individuals ages 85 and older.¹²⁰ In Jackson County, overall, 60.6% of residents were vaccinated by December 31, 2022. This was higher than the Missouri percentage of 58.8%, but lower than the US percentage of 69%.¹²²

As bivalent COVID-19 boosters became available in late 2022, vaccination coverage continued increasing as each age group became eligible for the next stage of vaccination. Bivalent boosters increase immune response to variants of the COVID-19 virus, such as Omicron, and will continue to protect against future variants.¹²²

JACKSON COUNTY, MO VACCINATION RATES	
	TOTAL POPULATION N(%)
At least one dose	523,122 (74.4%)
Completed primary series	424,471 (60.6%)

Table 10: Jackson County Total Population Vaccination Rates, 2022.

Source: CDC COVID-19 Data Tracker, Jackson County View. *CDC Vaccination Data as of December 31, 2022

COMMUNITY HEALTH ASSESSMENT SURVEY

The Community Health Assessment (CHA) Survey asked respondents about their experiences with COVID-19. At the time of survey completion in April 2023, 745 (48%) of respondents reported testing positive for COVID-19 or were told by a healthcare provider that they had COVID-19. Nearly half of those individuals reported having moderate symptoms and one in four Sugar Creek residents in particular reported having severe COVID-19 symptoms. Of those 745 respondents in EJC that tested positive for COVID-19, 205 (28%) experienced symptoms that lasted three or more months. Of those who had COVID-19 and symptoms that lasted three or more months, 94 (46%) had long-term symptoms which reduced their ability to complete current daily activities compared to prior to having COVID-19. Respondents from Grain Valley, Greenwood, Lee's Summit, Lone Jack, Oak Grove, and Sibley all had at least 50% of respondents test positive at some point for COVID-19.

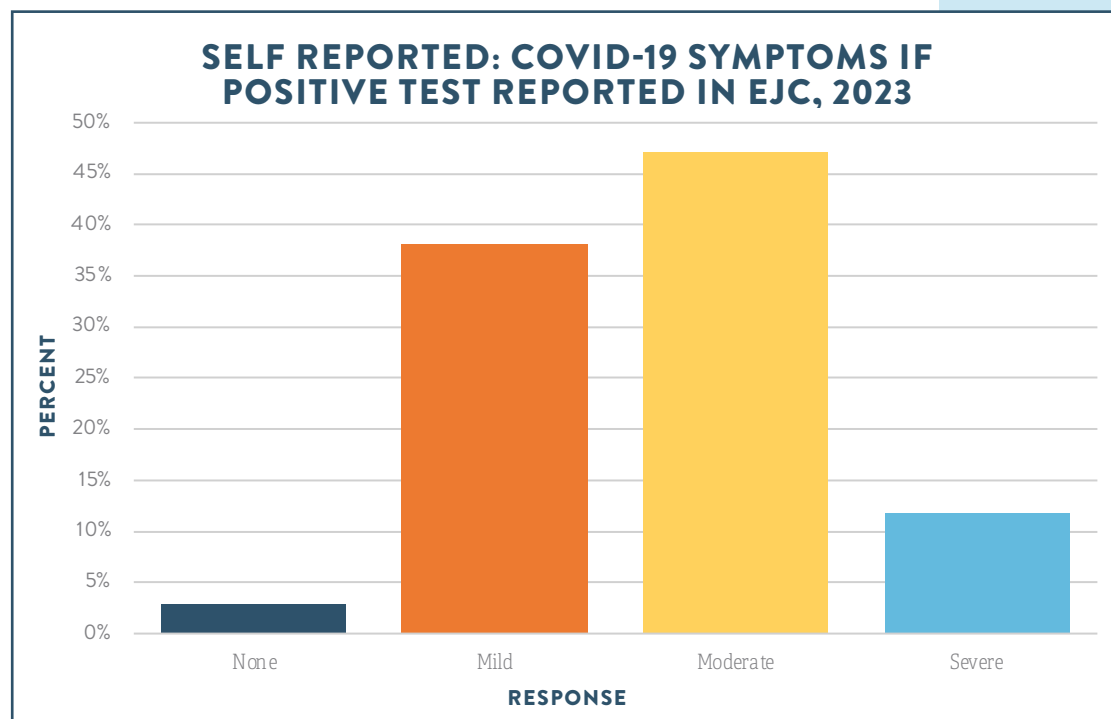



Figure 95: Eastern Jackson County Self-Reported COVID-19 Symptoms if Positive Test Reported, 2023.

Source: Jackson County Public Health; 2023 CHA Survey.

PART TWO —

Health Behaviors, Outcomes, & Trends



“Health behaviors are health-related practices, such as diet and exercise, that can improve or damage the health of individuals or community members. Health behaviors are determined by the choices available in the places where people live, learn, work, and play.”

COUNTY HEALTH RANKINGS & ROADMAPS
“HEALTH BEHAVIORS,” 2023

Mental and Behavioral Health

WHAT IS IT?

Mental health includes “our emotional, psychological, and social well-being,” which impacts attitudes, behaviors, choices, and relationships with others. Mental illness refers to a diagnosed condition that “affects a person’s thinking, feeling or mood. Such conditions may affect someone’s ability to relate to others and function daily.”¹³⁵ Mental illnesses, also called mental health conditions, can include diagnoses such as mood disorders, anxiety disorders, post-traumatic stress disorder, and eating disorders.

WHY IS IT IMPORTANT?

Mental health impacts all areas of an individual’s life since mental health involves psychological, emotional, and social well-being. Given that mental health can be affected by biological factors, environment or life experiences, and/or family history, it is no surprise that one in five adults have at least one mental health condition in a year in the United States.¹³⁵

KEY FINDINGS

- *One in four individuals in Eastern Jackson County (EJC) are estimated to experience depression.*¹²⁸
- *The prevalence of depression by city saw higher rates in Buckner (27.8 per 100), Grain Valley (26.5), Oak Grove (26.75) and Sugar Creek (27.1) compared to the average EJC prevalence.*¹²⁸
- *Three in five Community Health Assessment (CHA) Survey respondents experienced at least one day where they felt stressed, anxious, or depressed within the last 30 days.*
- *Suicide-related Emergency Room visits by EJC residents increased by 73.7% from 2018 to 2022.*¹³⁷
- *From 2016 to 2020, opioid non-fatal overdoses in EJC increased by 26%.*¹²⁹
- *From 2018 to 2021, opioid deaths doubled from 18 to 36 in EJC.*¹²⁹
- *In 2020, about one in three emergency room visits related to suicide were among individuals aged 10 to 19, with females being twice as likely to have a suicide-related ER visit.*¹³⁷
- *Prevalence of physical inactivity and sleeping less than 7 hours per night was highest in ZIP Codes corresponding to the cities of Raytown and Grandview in 2020.*¹²⁸
- *In 2020, prevalence of smoking was found to be 23.3% or higher in 50% of ZIP Codes within the EJC jurisdiction.*¹²⁸
- *In 2020, residents in the following ZIP Codes in EJC reported binge drinking at the highest frequency: 64014 (Blue Springs), 64029 (Grain Valley and Blue Springs), and 64086 (Lee’s Summit, Lake Lotawana, Lone Jack, and Unity Village).*¹²⁸



MENTAL HEALTH STATUS

One method of assessing individual mental health status is through self-reporting, or asking individuals to share their personal experiences. The 2023 Community Health Assessment (CHA) Survey asked respondents to report the number of poor mental health days, characterized by stress, anxiety, depression, or feeling “emotionally out of sorts,” that they experienced in the previous 30 days. Sixty-four percent of CHA Survey respondents in Eastern Jackson County (EJC) reported experiencing at least one poor mental health day in the previous month. Of these respondents, 1 in 5 reported a week or more of poor mental health symptoms and 16% indicated 11 or more poor mental health days. On average, Missourians in 2021 reported experiencing 4.6 poor mental health days per month.¹³⁰ When the number of poor mental health days are high, it may indicate that individuals are facing adverse life experiences, which can contribute to negative health outcomes.

Younger survey respondents were more likely than older respondents to report an above-average number of poor mental health days in the previous 30 days. About two-thirds of survey respondents 17-34 years old, and nearly

half of respondents ages 35-44, reported three or more poor mental health days in the last month. Each subsequent age group was less likely to experience three or more poor mental health days: 45% of 45-54 year olds; 39% of 55-64 year olds; 24% of both 65-74 year olds and 75-84 year olds; and 17% of respondents aged 85 and older. This pattern suggests generational differences in experiences and reporting of mental health status.

Although the CHA Survey was not distributed to people younger than 18, EJC middle and high school students regularly participate in the biennial Missouri Student Survey. In the 2021-2022 school year, more than three thousand Jackson County students completed the Missouri Student Survey. Of the Jackson County young people who took the Student Survey, more than 1 in 4 reported being “very sad” often or always in the past month. Sixteen percent of students reported “feeling hopeless” about their future – an increase from 13.2% in 2020. One in four students reported “disruptions in eating”, compared to 1 in 5 in 2020. More than a third of students reported “sleeping a lot more or a lot less than usual”, felt “grouchy, irritable, or in a bad mood”, and “had difficulty concentrating on schoolwork often or always in the previous

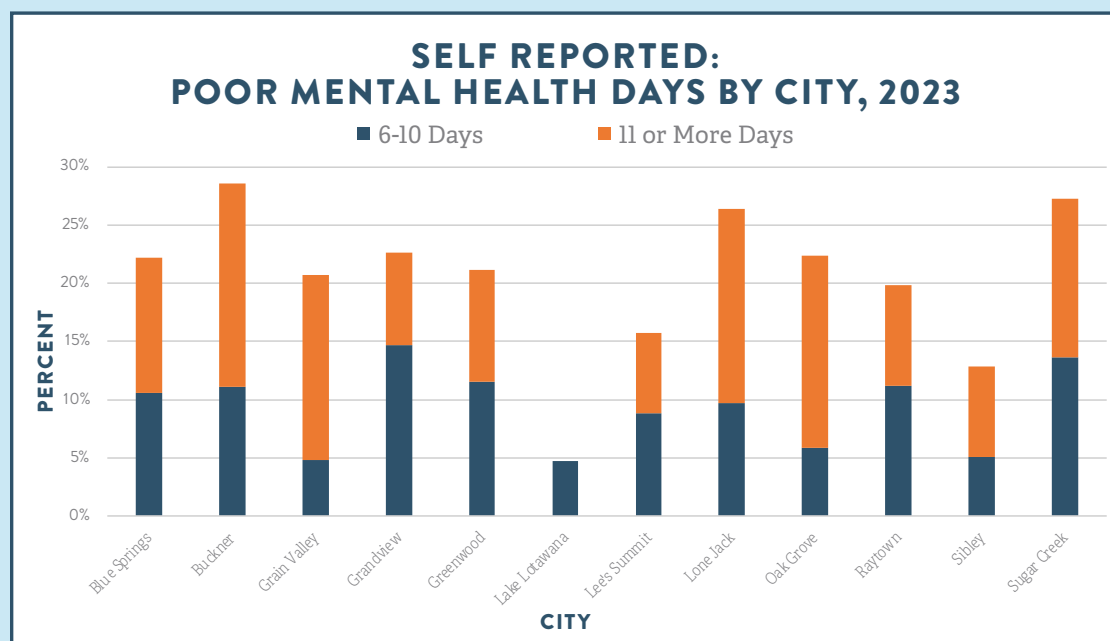


Figure 96: Eastern Jackson County Self-Reported Poor Mental Health Days by City, 2023.

Source: Jackson County Public Health; 2023 CHA Survey.

month". The 2022 Missouri Student Survey also saw increases in the percentages of Jackson County young people who had seriously considered suicide (11.9%, compared to 9.9% in 2020), planned suicide (9%, compared to 7.9% in 2020), and had a suicide attempt (6%, compared to 4.9% in 2020).¹³¹

Of CHA Survey respondents, about 67% of respondents ages 17-34 and nearly 50% of respondents ages 35-44 reported three or more poor mental health days in the last month.

Mental health status can also be assessed through data from secondary sources, such as hospitals, service providers, and state and local agencies. In 2021, the Missouri Department of Mental Health (DMH) reported that more than 13,000 Jackson County residents received mental health services through a DMH-funded program.¹³² In Jackson County, these programs include University Health Behavioral Health, Swope Health Services, ReDiscover Mental Health, and Comprehensive Mental Health Services.¹³³ These agencies provide mental health services, substance use disorder treatment, and other services to community members, regardless of their ability to pay. In 2021, ReDiscover, the largest community mental health center in the region, reported serving 11,872 individuals in treatment programs, including 1,487 individuals treated for substance use disorders, across 20 locations in the region.¹³⁴

ANXIETY AND DEPRESSION

In the United States, it is estimated that about 1 in 5 adults experienced a mental health condition, and about 1 in 20 adults experienced a severe mental health condition in 2021.¹³⁵ Anxiety disorders, such as generalized anxiety disorder and post-traumatic stress disorder, are the most diagnosed mental health conditions among U.S. adults.¹³⁵ Even without a formal diagnosis, individuals can often recognize changes in their patterns of thinking and emotions. According to the U.S. Census Bureau's Household Pulse Survey, between 2020 and 2023, approximately 30% of Missouri adults reported experiencing anxiety symptoms, such as feeling nervous, anxious, or on edge, or not being able to stop or control worrying in the previous week.¹³⁶ If untreated or unsupported, individuals experiencing these symptoms can feel overwhelmed and develop additional physical and mental health symptoms.

After anxiety disorders, major depressive disorder and depressive episodes are the next most common mental health conditions in the United States. Nearly 1 in 10 U.S. adults are estimated to have depression, and 1 in 6 will experience a depressive episode at some point in their lives.¹³⁵ Locally, the Centers for Disease Control and Prevention (CDC) data estimates that about 1 in 4 individuals in EJC have experienced depression.¹²⁸ Grandview had the lowest estimated prevalence of depression (23%) and Buckner had the highest estimated prevalence of depression (28%). While depression is treatable for most, without access to comprehensive and culturally relevant resources, depression will continue to negatively impact the EJC community. Depression can affect a person's ability to work, home life, community, and education by altering moods and experiences. When depression symptoms affect eating and sleeping patterns, self-care, and other daily needs, there can be physical health outcomes as well.

MENTAL HEALTH-RELATED HOSPITAL VISITS

Unfortunately, not all residents experiencing depression symptoms or other mental health conditions have access to timely, quality, and culturally responsive services or know where to turn when their symptoms become overwhelming. Due to challenges accessing other services or the urgency of the condition, some EJC residents seek treatment and support for mental health conditions at hospital emergency rooms. Between 2017 and 2022, an average of 1,431 EJC residents visited an emergency room (ER) for mental health conditions each year. Of these visits, 48% of patients reported experiencing depression, 20% came to the ER or were brought in after experiencing psychosis, and approximately 12% were seeking support for suicidal thoughts or ideation.¹³⁷

Residents of specific ZIP Codes may be more likely to seek mental health care at the emergency room. While hospital ERs are not the only, or primary, setting in which individuals can receive mental health treatment, tracking hospital setting mental health diagnoses can provide insight to where mental health services are needed due to population needs. From 2019-2021, individuals residing in the 64054 ZIP Code (Sugar Creek) were most likely to seek mental health care in a hospital setting, followed by their neighbors residing in 64058 (Sugar Creek, northern Independence, Atherton, River Bend) and 64088 (Sibley and Levasy). For residents in these ZIP Codes, there is a higher likelihood of limited internet and personal vehicle access, which can contribute to challenges in accessing community-based mental health services or other resources. Even with access to internet service and personal transportation, few community-based mental health services are near these northern and more rural EJC communities. In contrast, residents of 64070 (Lone Jack), 64034 (Greenwood and Lake

Winnebago), and 64082 (southern Lee's Summit) were least likely to seek mental health treatment at the emergency room.¹³⁷

It is important to recognize that not all individuals with mental health conditions experience suicidal ideation, and that most people who report suicidal ideation are temporarily experiencing extreme distress and do not attempt suicide. Communities with higher rates of mental health conditions and decreased access to services are at increased risk of losing residents to preventable suicide deaths. Between 2018 and 2022, EJC residents had more than 4,000 suicide-related ER visits. These visits have increased every year since 2018, with a significant uptick between 2019 and 2020.¹³⁷

In 2020, 1 in 3 individuals making suicide-related ER visits in EJC were between the ages of 10 and 19. More than half were younger than 30. During the peak of the COVID-19 pandemic, this trend was reflected around the country. The American Psychological Association reported that between March 2020 and October 2020, mental health-related ER visits increased 24% for young people ages 5-11 and 31% for those ages 12-17, compared to the previous year.¹³⁸ Nationally, LGBTQ+ youths reported even higher rates of suicidal ideation and emotional distress in 2020. The Trevor Project's 2020 National Survey on LGBTQ Youth Mental Health found that 40% of LGBTQ+ youth and more than half of transgender and non-binary youth surveyed reported seriously considering suicide in the past year.¹³⁹

Similar to general mental health-related ER visits, residents living in the 64054 and 64058 (Sugar Creek) ZIP Codes and the 64133 ZIP Code of Raytown were most likely to have a suicide-related ER visit in 2020. Unfortunately, between 2016 and 2022, 253 lives were lost to suicide in EJC. Improving awareness of which community members most need resources can prevent future deaths and suffering.¹³⁷

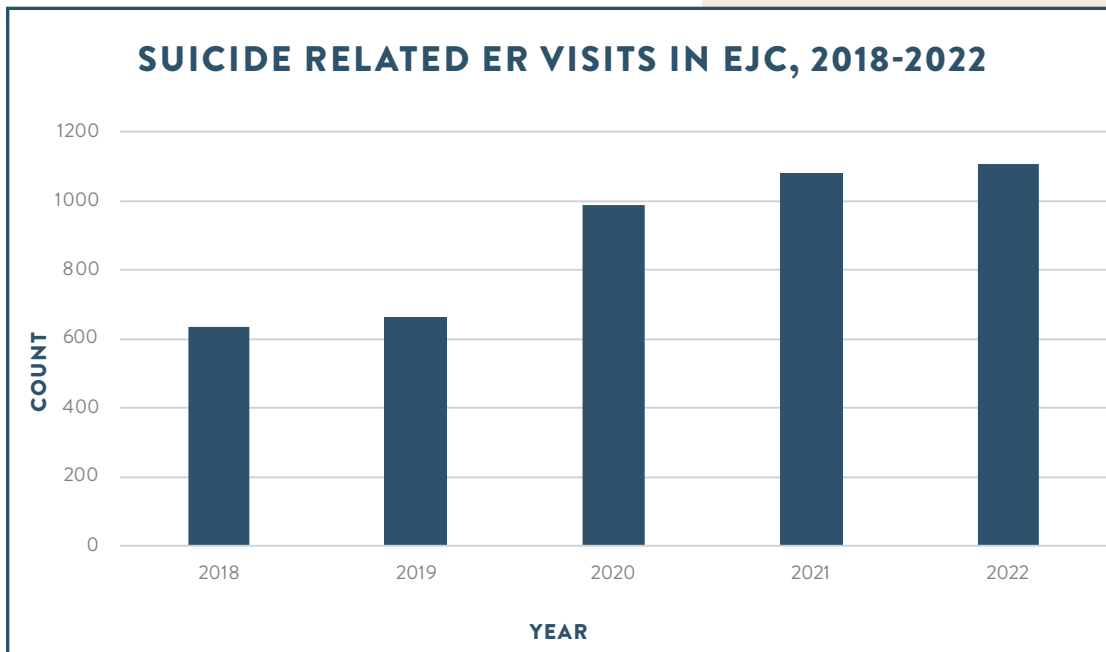


Figure 97. Eastern Jackson County Suicide-Related Emergency Room Visits, 2018-2022.

Source: Missouri ESSENCE.

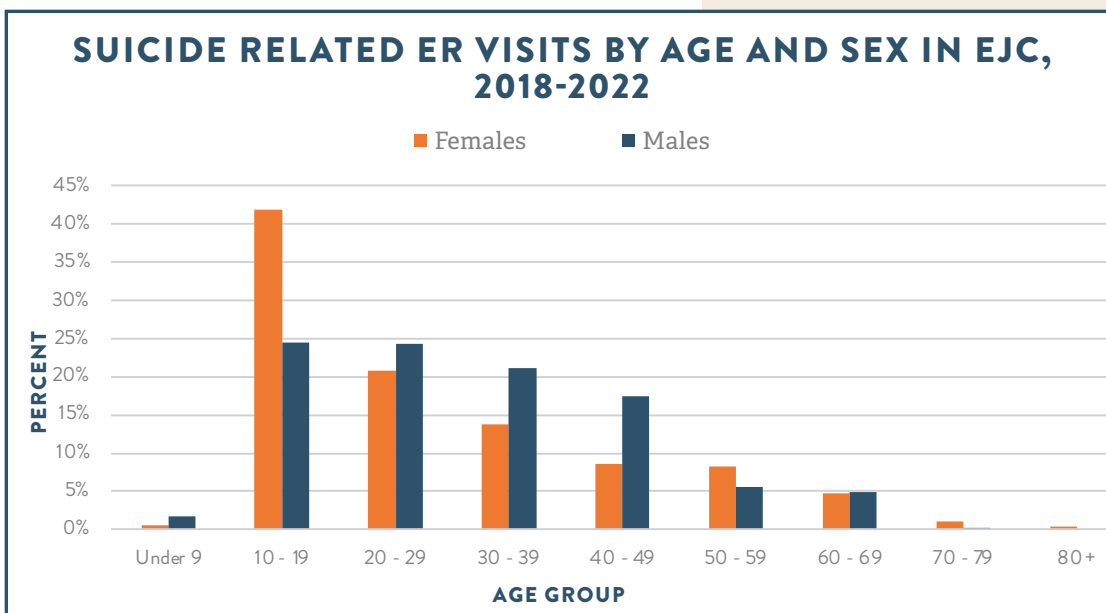


Figure 98. Eastern Jackson County Suicide-Related Emergency Room Visits by Age and Sex, 2018-2022.

Source: Missouri ESSENCE.

DISCRIMINATION, STIGMA & MENTAL HEALTH

Stigma can create barriers to healing for all community members, although mental health stigma often compounds the stigma and discrimination experienced by historically marginalized racial and ethnic groups, people with disabilities, and members of the LGBTQ+ community; this presents additional obstacles to accessing timely, quality, and culturally responsive care. A recent study from the American Psychiatric Association found that more than 1 in 3 people in the U.S. are concerned that they will experience retaliation or other consequences in the workplace for seeking mental health treatment.¹⁴⁰ Although “reported prevalence estimates of certain mental disorders, substance use, or substance use disorders are not generally higher among racial and ethnic minority groups,” systemic and social-cultural barriers can often prevent historically marginalized racial and ethnic groups from accessing mental health services.¹⁴⁰

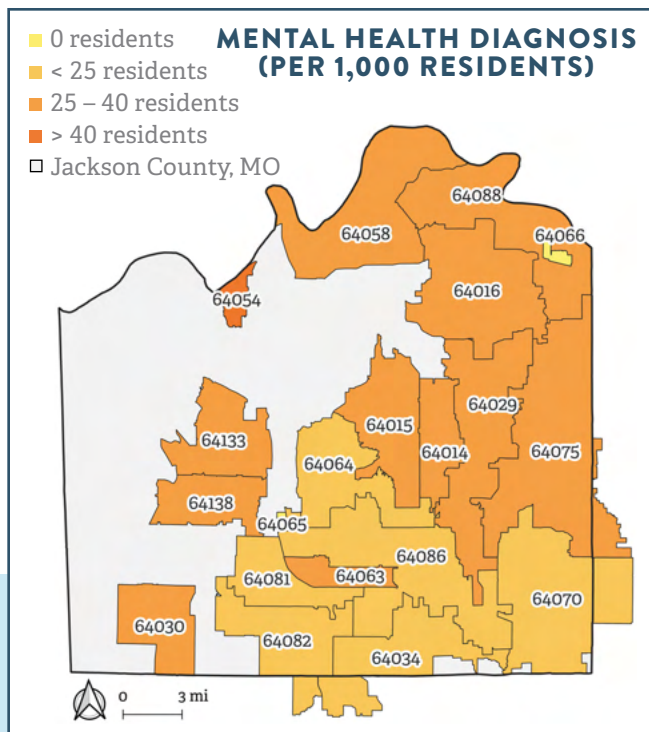
CHA Survey response data also shows that while Black respondents were slightly less likely than White respondents to report experiencing three or more poor mental health days in the previous month, Hispanic/Latino respondents were more likely to report three or more poor mental health days. Thirty-two percent of Black respondents, 38% of White respondents, and 41% of Hispanic/Latino respondents indicated that they had experienced more than three poor mental health days recently, although White respondents were most likely to report having 11 or more poor mental health days (11%). A study conducted during the peak of the COVID-19 pandemic found that Hispanic/Latino adults reported a “higher prevalence of psychosocial stress” than adults of other races and ethnicities did.¹⁴⁰ A 2019 report examining the role of stigma and racial discrimination in mental health care access stated that

“Nationally representative research comparing mental health care utilization among White, Black and [Hispanic/Latino] individuals indicates that Black and [Hispanic/Latino] individuals are not at higher risk of developing mental health problems, but suffer

significantly longer from mood and anxiety disorders when compared with White individuals. Furthermore, research indicates that Black individuals are less likely to receive mental health care services, even when controlling for other demographic and income variables, and psychiatric diagnosis and comorbidities, when compared with White and [Hispanic/Latino] individuals. Furthermore, [Hispanic/Latino] individuals are about half as likely to see mental health professionals compared with White individuals. In addition, Asian American individuals with a lifetime prevalence of substance-use, mood or anxiety disorders were least likely to receive mental health care services in outpatient, inpatient, or emergency settings, when compared with White, Black and [Hispanic/Latino] individuals.”¹⁴⁰

Research has also found that limited English proficiency, speaking English with an accent, and experiencing “major” racial discrimination in other systems including housing, employment, social services, banking, and criminal justice, significantly contribute to underutilization of mental health services for historically marginalized racial and ethnic groups and immigrants across the country.^{140–142} Researchers have also theorized that historically marginalized racial and ethnic groups who underutilize mainstream mental health services, despite the presence of mental health condition symptoms, may do so in part to avoid the “double stigma” associated with their race or ethnicity, as well as the status of a person seeking mental health support.¹⁴³

The 2021-2022 National Surveys on Drug Use and Health, conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA), found that lesbian, gay, and bisexual individuals were more likely than heterosexual or straight individuals to experience moderate and severe mental health symptoms, including major depressive episodes or suicidal ideation. SAMHSA’s report suggests that “stressors that are unique to people who identify as lesbian, gay, bisexual, transgender, queer, or intersex (LGBTQI+)” may influence the increased rates of mental health conditions and substance use among the LGBTQI+ community.¹⁴⁴



In response to the 2023 CHA Survey, EJC residents overwhelmingly identified mental health as a concern in their communities. In fact, in more than 70% of the cities surveyed, 1 in 3 respondents indicated that mental health is a moderate or significant issue. Sugar Creek respondents were most likely to identify mental health as a challenge.

Figure 99. Eastern Jackson County Mental Health Diagnosis in Hospital Settings (per 1,000 residents) by ZIP Code, 2019-2021.

Source: exploreMOhealth.

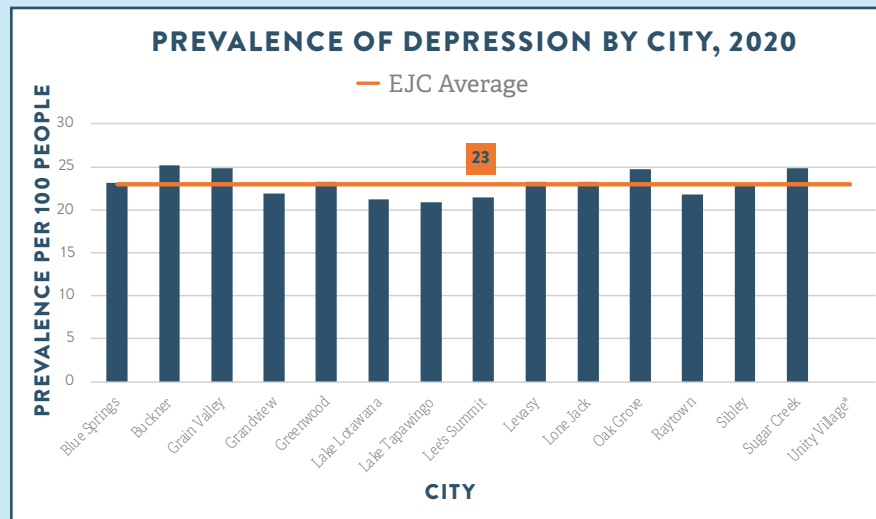


Figure 100. Eastern Jackson County Prevalence of Depression by City, 2020.

Source: Center for Disease Control and Prevention (CDC) PLACES, 2020.

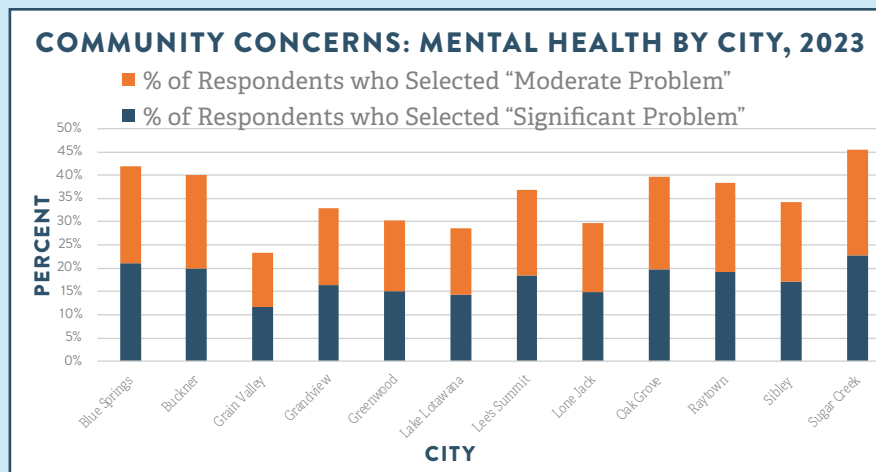


Figure 101: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems for Mental Health within the Community by City.

Source: Jackson County Public Health; 2023 CHA Survey.

Health Risk Behaviors

According to the World Health Organization (WHO), a health risk behavior is defined as “a factor that raises probability of adverse health outcomes.” These types of “health-related lifestyle factors” can contribute to chronic diseases and result in other negative health outcomes.¹⁴⁵ CDC PLACES includes the following factors when measuring and presenting Health Risk Behaviors within the United States: Physical Inactivity, Sleeping Less than 7 Hours, Binge Drinking, and Current Smoking.¹²⁸

PHYSICAL INACTIVITY

Physical inactivity can lead to an increased risk of chronic diseases, such as cancer and Type 2 diabetes, obesity, and higher prevalence of mental health diagnoses. Physical inactivity is exacerbated when communities do not have safe, accessible places for walking or exercising. Within EJC, the prevalence of physical inactivity was highest in ZIP Codes 64133 & 64138 (Raytown) and 64030 (Grandview).¹²⁸

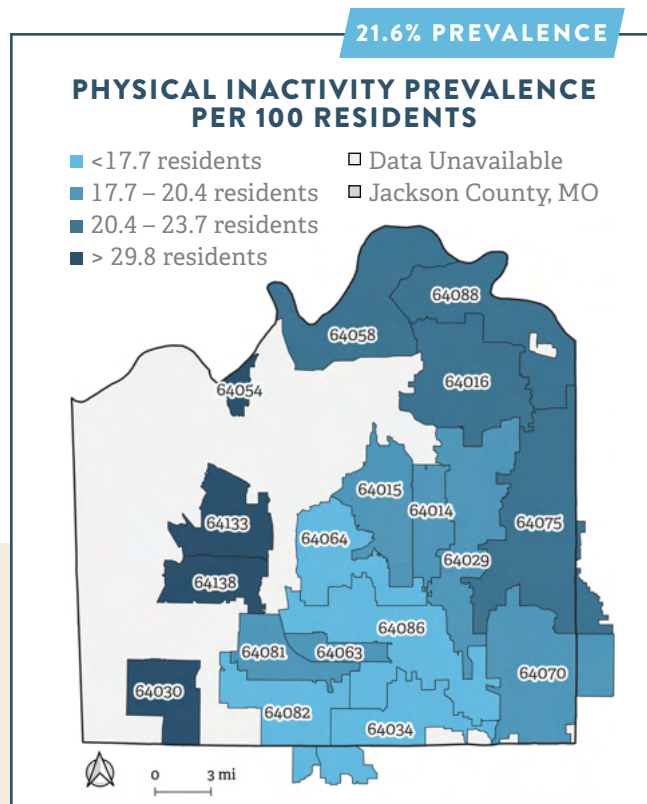
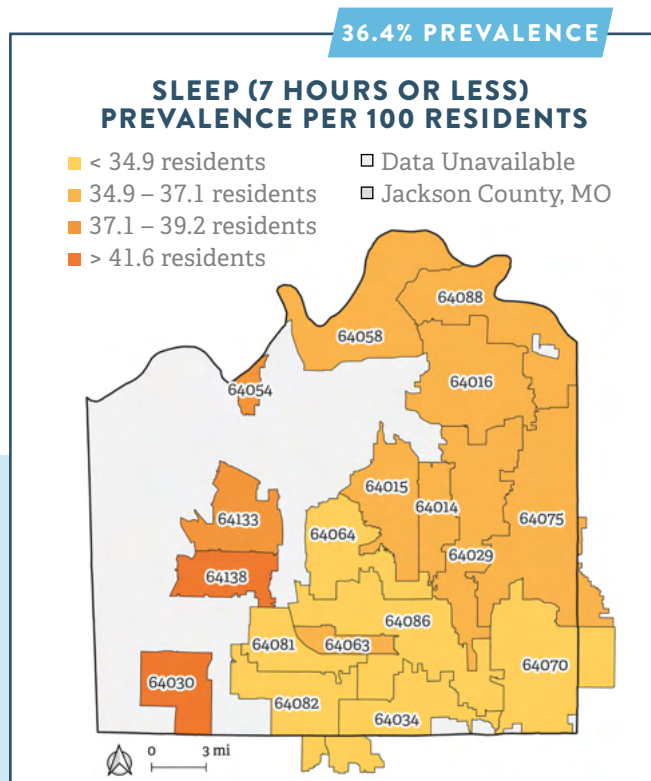


Figure 102. Eastern Jackson County Prevalence (per 100 residents) of Physical Inactivity by ZIP Code, 2020.

Source: CDC PLACES.



SLEEP

Research indicates that sleeping for less than 7 hours per night can contribute to health outcomes like heart disease, high blood pressure, diabetes, depression, and disabilities. Within EJC, sleeping less than 7 hours per night was highest in ZIP Codes 64138 (Raytown) and 64030 (Grandview). Poor sleeping habits can be compounded by noise pollution, working more than one job, and alternative work schedules.¹²⁸

Figure 103. Eastern Jackson County Prevalence (per 100 residents) of Less than 7 Hours of Sleep per night by ZIP Code, 2020

Source: CDC PLACES.

Substance Use

Everyone has a relationship with substances – chemicals or naturally occurring materials that alter an individual’s physical sensations, thinking, or behavior. Substance use refers to the consumption or usage of legal substances (such as alcohol, tobacco products, and cannabis), illicit drugs, and controlled prescription or over-the-counter medications. Substance use exists on a spectrum with abstinence, choosing not to use a specific substance, on one end and chaotic use on the other. Chaotic use refers to a pattern of unsafe substance use that contributes to increased risk of injury, illness, overdose, and even premature death.¹⁴⁶



TOBACCO USE & SMOKING

Smoking and tobacco use is one of the more socially acceptable forms of substance use. Smoking can contribute to negative health impacts for smokers, as well nonsmokers. Research indicates that smoking can contribute to lung and other cancers, cardiovascular disease, stroke, and respiratory illnesses.²⁰ Smokeless tobacco products, such as chewing tobacco, dip, and snus, can cause mouth cancers and gum disease.¹⁴⁸

Research has shown that secondhand tobacco smoke increases risk of disease and premature death among nonsmokers. There is evidence that implementing smoke-free policies helps improve health outcomes in communities.¹⁴⁹ In 2000, the state of Missouri passed the Missouri Clean Indoor Air Law to reduce exposure to secondhand smoke. This law prohibits smoking in public places, with an exception for the proprietor of a business to designate specific smoking areas.¹⁵⁰ In EJC, 8 of 15 communities have established ordinances to prohibit indoor smoking in public spaces in order to reduce secondhand smoke exposure.

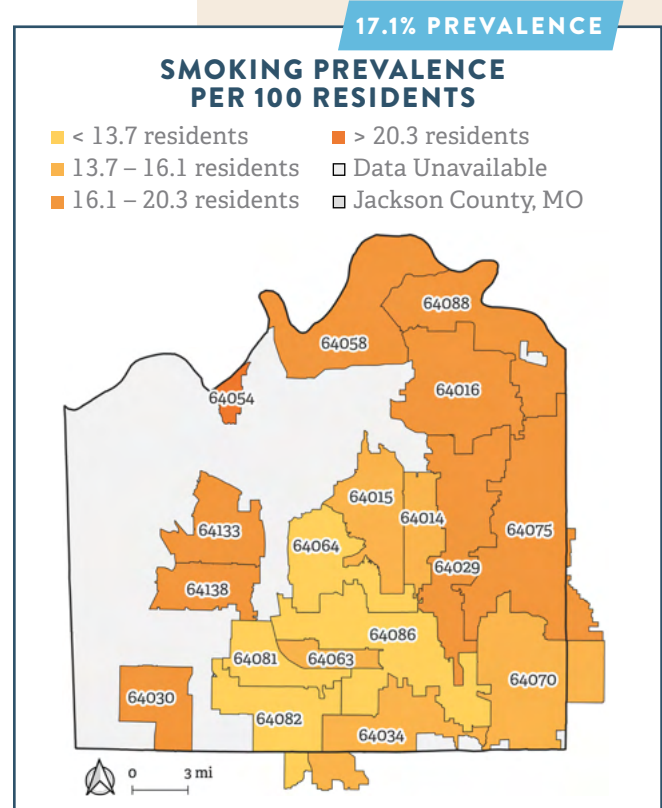


Figure 104. Eastern Jackson County Prevalence (per 100 residents) of Smoking by ZIP Code, 2020.

Source: CDC PLACES.

TOBACCO USE & SMOKING (CONT'D)

According to CDC PLACES data, in 2020, smoking prevalence in EJC was highest within the following ZIP Codes: 64054 & 64058 (Sugar Creek), 64088 (Sibley and Levasy), 64016 (Buckner), 64029 (Grain Valley and Blue Springs), 64075 (Oak Grove), 64133 & 64318 (Raytown), and 64030 (Grandview). Increased smoking prevalence in these communities would also suggest that there is increased secondhand smoke exposure to these residents. CDC data also shows that Grandview and Sugar Creek have the highest prevalence of asthma in EJC.¹²⁸ Nearly half of CHA Survey respondents living in Buckner and 45% of Sugar Creek respondents reported that tobacco use was a moderate or significant problem in their communities. The city of Buckner does not currently have a local indoor smoking ordinance in addition to the state Clean Indoor Air Law, and while Sugar Creek prohibits smoking in public places, it is still allowed in designated areas and some public businesses.

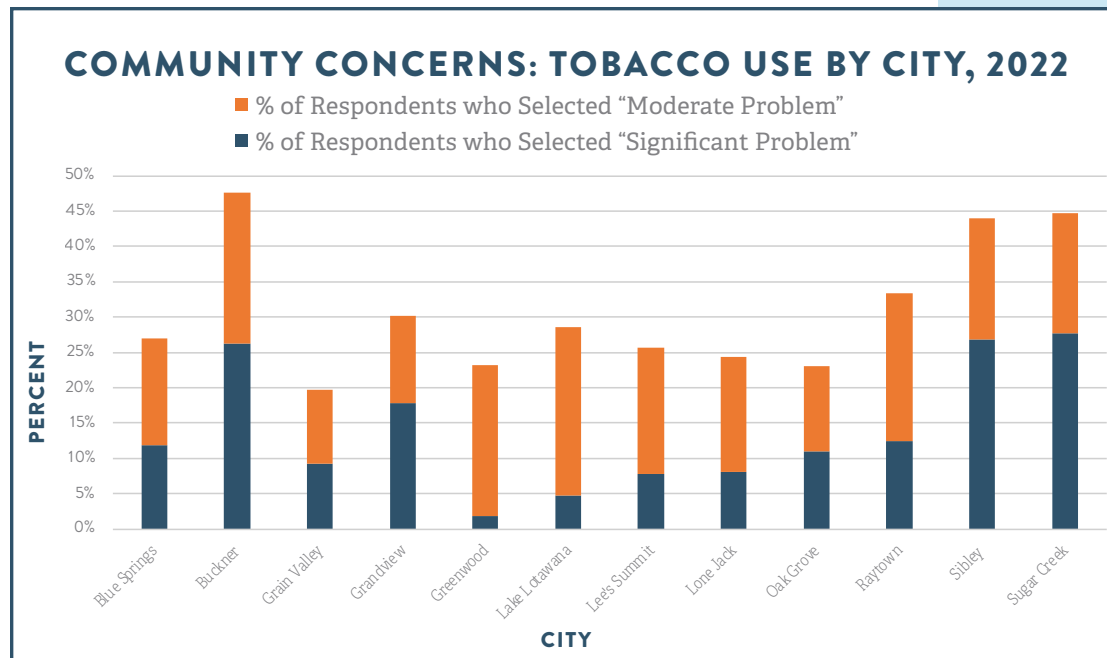


Figure 105:
Eastern Jackson
County 2023
Community
Health
Assessment (CHA)
Survey Responses:
'Significant'
or 'Moderate'
Problems
with Tobacco
Use within
Community by
City.

Source: Jackson
County Public
Health; 2023 CHA
Survey.

ALCOHOL USE & BINGE DRINKING

Alcohol is another legal substance whose consumption is often socially acceptable. Adults over the age of 21 can purchase alcohol in grocery stores, liquor stores, and convenience stores. While many adults consume alcohol safely, binge drinking can pose serious health concerns. According to the CDC, binge drinking is the most common pattern of excessive alcohol use in the country. Binge drinking is a pattern of behavior in which an individual consumes five or more drinks on one occasion for men or four or more drinks for women. In 2020, residents in the following ZIP Codes in EJC reported binge-drinking behaviors at the highest frequency: 64014 (Blue Springs), 64029 (Grain Valley and Blue Springs), and 64086 (Lee's Summit, Lake Lotawana, Lone Jack, and Unity Village). This finding aligns with national trends that binge drinking is most common among men, White individuals, and adults in higher income households.¹⁵¹

According to the 2022 Missouri Student Survey, 9.6% of Jackson County middle and high school students surveyed reported drinking alcohol

in the previous 30 days.¹³¹ Although this was an increase from 7.2% in 2020, underage drinking in Jackson County is much lower than the Missouri state average of 14.9% of students. Unfortunately, more students (15%) reported riding in a car with a driver who had consumed alcohol in the previous month, and 41% of students reported that they believed it would be “very easy” or “sort of easy” to get alcohol if they wanted to. Twenty percent of students surveyed reported that they believed that their peers would think someone was “pretty cool” or “very cool” if they consumed alcohol – significantly higher than the number of students who actually reported consuming alcohol.¹³¹

When completing the CHA Survey, many EJC residents reported that they believe that drug and alcohol use is a concern in their community. More than half of Buckner respondents identified drug and alcohol use as a moderate or significant problem – higher than in any other community. In more than half of the cities surveyed, 2 in 5 respondents reported that drug and alcohol use was a concern within their community.

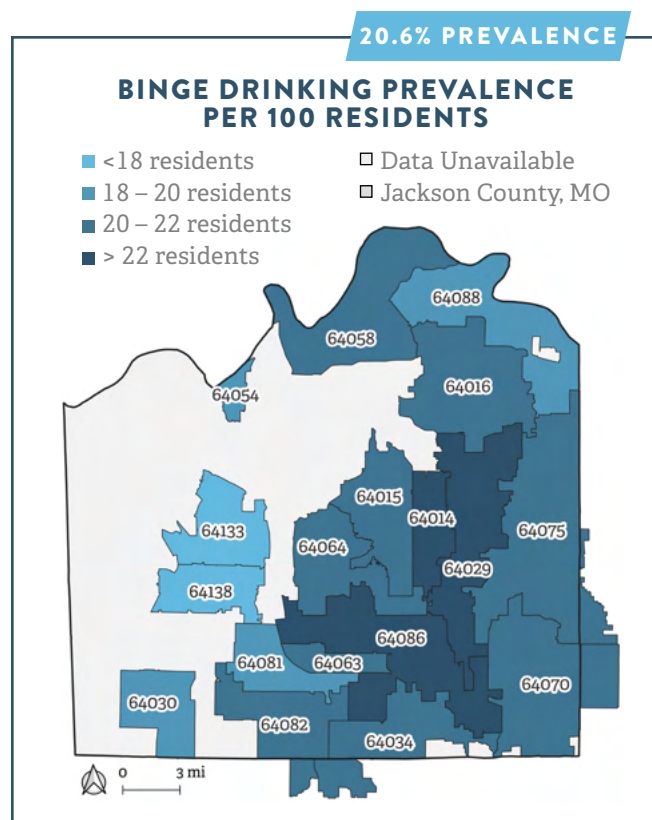


Figure 106. Eastern Jackson County Prevalence (per 100 residents) of Binge Drinking by ZIP Codes, 2020.

Source: CDC PLACES.

OPIOID USE

Opioids are a class of drugs that include natural and human-made imitations of opium, such as prescription pain medications like oxycodone, morphine, and fentanyl, as well as illicit substances like heroin. Fentanyl, a very powerful prescription pain medicine, has been one of the leading causes of overdose nationwide as it is widely available, inexpensive, and highly concentrated. Opioids are powerful chemicals that can temporarily relieve severe pain, but can also cause dangerous health risks when used unsafely. High doses of opioids can slow down breathing and heart rate. In severe cases, this can lead to overdose, which can be fatal.

Between 2016 and 2020, there were 298 non-fatal overdoses in EJC that lead to emergency room visits – and likely many more people who did not seek immediate medical attention. During this period, three EJC ZIP Codes had the highest rate of non-fatal overdoses: 64015 (Blue Springs), 64029 (Blue Springs/Grain Valley), and 64063 (Lee's Summit).¹³⁷ Even non-fatal overdoses can contribute to poor health outcomes. A 2019 report found that respiratory and neurological

complications often occur after a non-fatal overdose when an individual's breathing may have stopped or slowed enough to limit their oxygen intake. These long-term effects can lead to poorer quality of life due to depressive symptoms and "the likelihood of poorer social and vocational outcomes".¹⁵² Fortunately, opioid overdoses can be temporarily reversed effectively using naloxone, an opioid antagonist medication that attaches itself to the opioid receptors in the brain to end an overdose and restart breathing. Naloxone is commonly known by the brand name, Narcan, and is now available for over-the-counter purchase and free at JCPH.

Unfortunately, many opioid overdoses are fatal. In 2020, these preventable overdoses were the leading cause of death in the state of Missouri among adults ages 18-44.¹²⁹ The Jackson County Drug Task Force reported in 2022 that most opioids confiscated by law enforcement in Jackson County contained fentanyl. In EJC between 2015 and 2021, opioid overdose deaths clustered in specific ZIP Codes: there were 23 opioid overdose deaths in the 64133 ZIP Code (Raytown), 22 overdose deaths in 64014 (Blue Springs/Grain Valley area), and 17 overdose deaths in the 64030 (Grandview) and 64063 (Lee's Summit) ZIP Codes. By population, there were disproportionately high rates of overdose deaths in Oak Grove, Lone Jack, Grain Valley, and Sugar Creek. These deaths have continued to increase each year since 2018.¹⁵³

For more information or to request a Narcan overdose prevention kit, visit jcph.org/opioids.

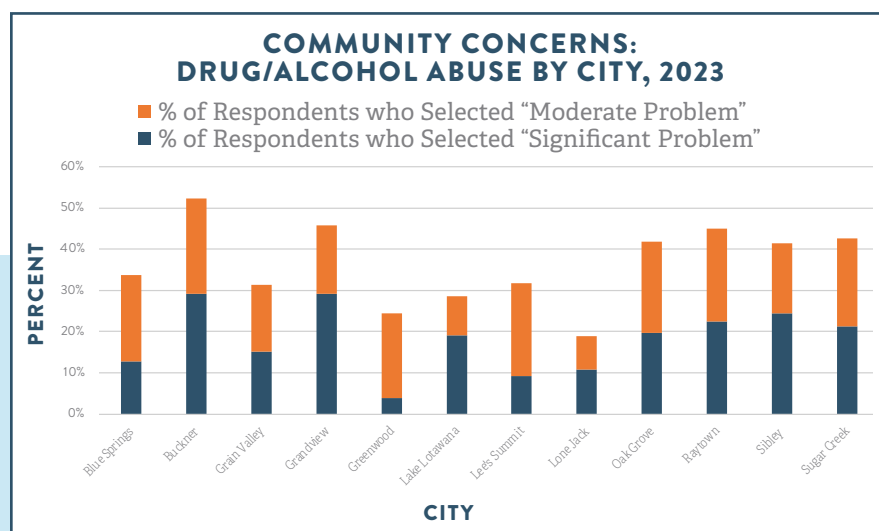


Figure 107: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses: 'Significant' or 'Moderate' Problems with Drug/Alcohol Use within Community by City.

Source: Jackson County Public Health; 2023 CHA Survey.

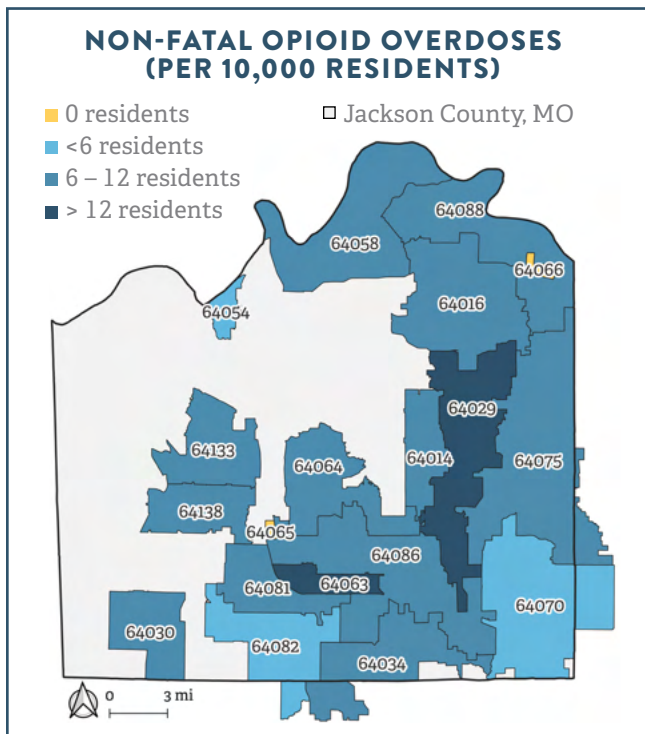


Figure 108. Eastern Jackson County Prevalence (per 10,000 residents) of Non-Fatal Opioid Overdoses by ZIP Codes, 2016-2020.

Prevalence was calculated by taking the total number of opioid non-fatal overdoses from 2016-2020, dividing by the ZIP Code population in 2018, and multiplying by 10,000.

Source: Missouri Department of Health and Senior Services (MDHSS).

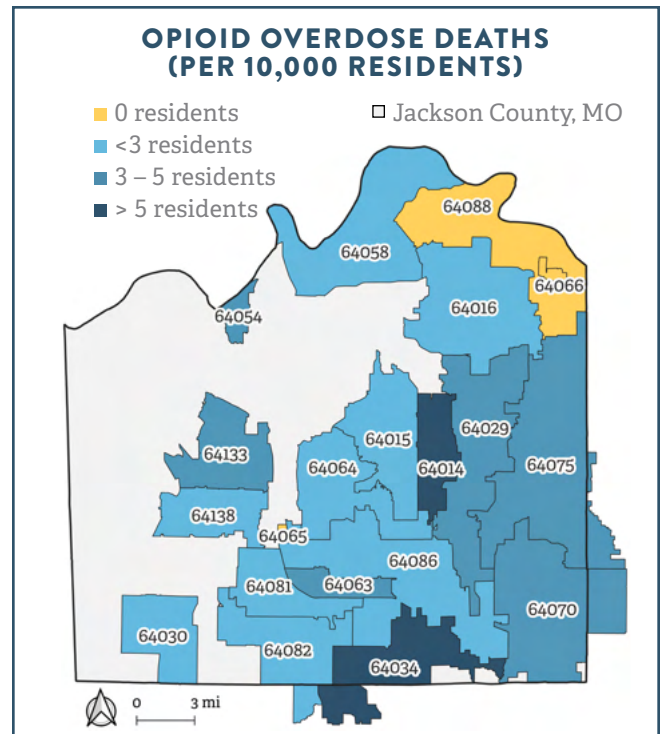


Figure 109. Eastern Jackson County Prevalence (per 10,000 residents) of Opioid Overdose Deaths by ZIP Code, 2017-2021.

Prevalence was calculated by taking the total number of opioid overdoses deaths from 2017-2020, dividing by the ZIP Code population average between 2018 and 2019, and multiplying by 10,000.

Source: Missouri Department of Health and Senior Services (MDHSS).

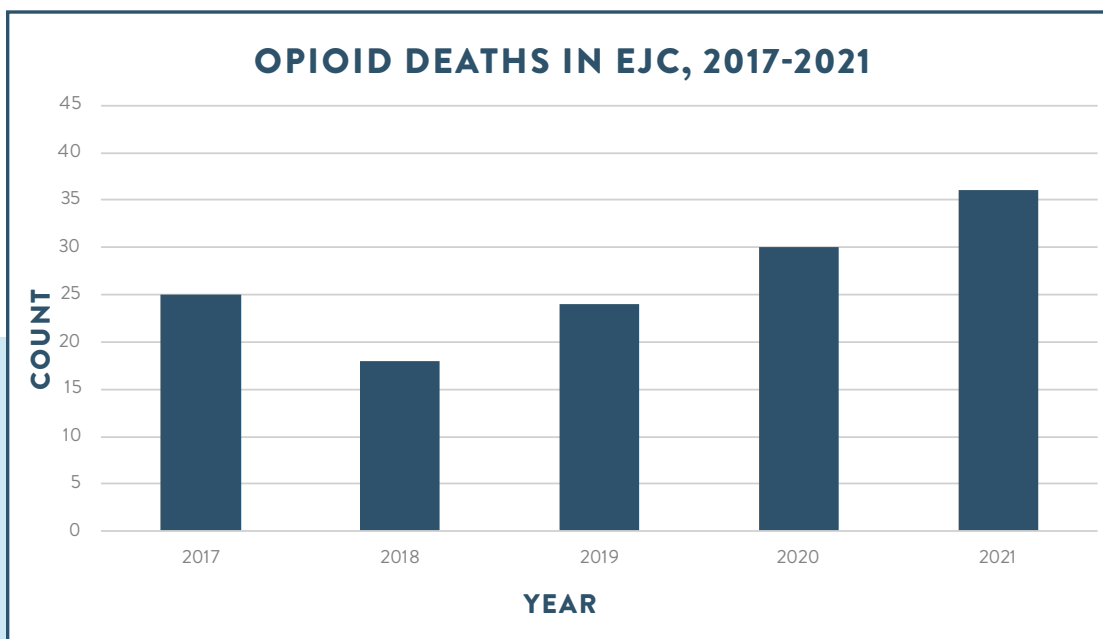


Figure 110: Eastern Jackson County Opioid Deaths, 2017-2021.

Source: MDHSS; Opioid Deaths, 2017-2021.

Maternal, Child, and Infant Health

WHAT IS IT?

Maternal, Child, and Infant health addresses health related issues among pregnant persons, infants, and children. Many factors, including the social determinants of health, impact the health and well-being of the preconception, prenatal, and postpartum population. This discipline of health addresses multifaceted aspects of reproductive health, prenatal care, safe childbirth, and early childhood development, recognizing that a strong foundation during these formative stages profoundly influences the health trajectory of individuals and communities.

WHY IS IT IMPORTANT?

The Office of the Assistant Secretary for Health states that, “Improving the well-being of mothers [pregnant persons], infants, and children is an important public health goal for the United States. Their well-being determines the health of the next generation and can impact future public health challenges for families, communities, and the health care system.”¹⁵⁴

See “Additional Terms” on page 10 for the definition of live births.

KEY FINDINGS

- *Prenatal care inadequacy rates double when looking at rates among Black birthing people compared to White birthing people in 2020.*¹⁵⁵
- *Approximately one in five Community Health Assessment (CHA) Survey respondents in the cities of Sugar Creek, Grandview, and Sibley reported that teen pregnancy was a significant or moderate problem within their community.*
- *The infant mortality rate in Eastern Jackson County (EJC) in 2020 was 4.1 deaths per 1,000 live births, which is lower than the national rate of 5.4 deaths per 1,000 live births.*^{155,156}
- *Approximately one in four CHA Survey respondents in the cities of Lake Lotawana and Sugar Creek identified that maternal and child health were a significant or moderate problem within their community.*
- *Over the last 3 years, the average childhood immunization rate decreased across all grade levels in Jackson County school districts.*¹⁵⁷

PRENATAL CARE

Prenatal care refers to the medical care and support provided to a pregnant person during pregnancy. The primary goal of prenatal care is to promote the well-being of the pregnant person and support a healthy pregnancy. Prenatal care typically consists of regular check-ups with a healthcare provider, ultrasound scans, diagnostic tests, prenatal vitamin recommendations, fetal monitoring, immunizations, education, and counseling. Comprehensive prenatal care promotes a healthy pregnancy, can detect health or developmental issues early on, and advocate for safe labor and delivery.¹⁵⁸

The American Congress of Obstetricians and Gynecologists recommend beginning prenatal care during the first three months of pregnancy. Regular prenatal care for a low-risk pregnancy typically includes a provider appointment every four weeks until 28 weeks gestation, then every two weeks until 36 weeks gestation, then weekly until delivery. When a pregnant person is not able to or does not begin prenatal care until later in pregnancy, their care may be considered “inadequate.” As a measure, prenatal care inadequacy shows how many pregnant people did not start receiving prenatal care during their first three months of pregnancy and were unable to attend the majority of their necessary prenatal appoint-

ments. Barriers to accessing care can include lack of reliable transportation, inability to take time away from work, proximity to care, lack of available appointments, unawareness of pregnancy, and lack of quality health insurance.¹⁵⁹

When pregnant people do not receive adequate prenatal care, it can lead to delayed diagnosis of potential health issues for both parent and child, which can cause harm or even death. Since 2015, rates of prenatal care inadequacy in Eastern Jackson County (EJC) have decreased, but racial disparity emerges when examining the rates by race. In 2020, prenatal care inadequacy impacted 170 people per 1,000 live births. However, since 2015 rates of prenatal care inadequacies for White pregnant people have decreased while prenatal care inadequacies for Black pregnant people have increased. In 2020, 13% of White birthing people experienced prenatal care inadequacy, compared to 30% of Black birthing people in EJC. In 2020, the rate of Black birthing persons receiving inadequate prenatal care was twice as high as that of White birthing persons.¹⁵⁵ This racial discrepancy mirrors the 2021 national trends in the United States, where Black birthing persons experienced a higher percentage of inadequate prenatal care (21.9%) compared to their White counterparts (11%).¹⁶⁰

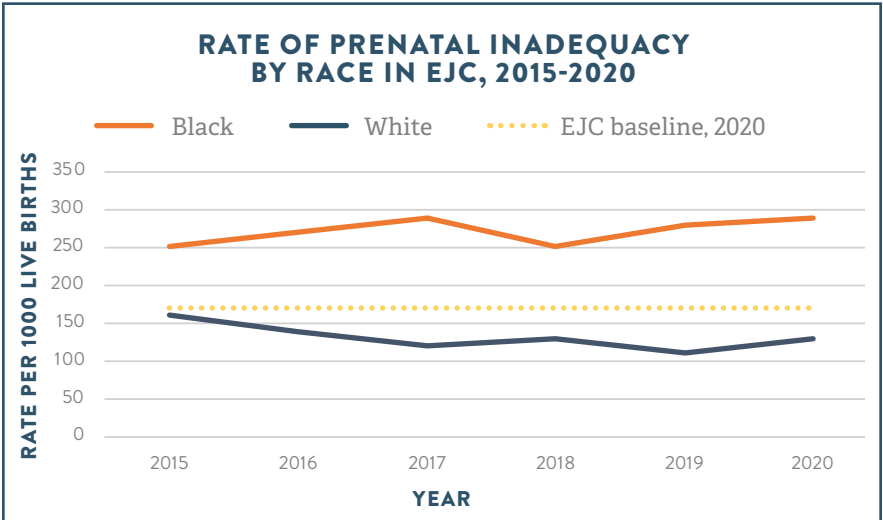


Figure 111. Eastern Jackson County Rate of Prenatal Inadequacy per 1,000 Live Births by Race, 2015-2020.

Source: MDHSS MOPHIMS Data MICA, Birth MICA 2015-2020. Rates are precalculated by MOPHIMS Data MICA for the geography defined.

HEALTH RISKS DURING PREGNANCY

During pregnancy, smoking and excessive weight gain can contribute to health risks and complications. Pregnant people who smoke are at increased risk of preterm delivery, which can contribute to health challenges and infant mortality in extreme cases.¹⁶¹ Additionally, surpassing the recommended weight gain during pregnancy has been linked to the birth of larger infants which can result in delivery complications, a higher likelihood of cesarean delivery, and an increased risk of childhood obesity.¹⁶²

In 2020, pregnant individuals in EJC were less likely than those in Missouri to smoke while pregnant. In EJC, White pregnant people were more likely to smoke during pregnancy than Black pregnant people, while Non-Hispanic/Latino pregnant people were more likely to smoke during pregnancy than Hispanic/Latino pregnant people.

Health Impacts

Smoking while Pregnant:

- Preterm birth
- Low birthweight
- Sudden infant death syndrome (SIDS)
- Respiratory problems

Excess Weight while Pregnant:

- Miscarriage
- Gestational diabetes
- Preeclampsia
- Childhood asthma
- Childhood obesity

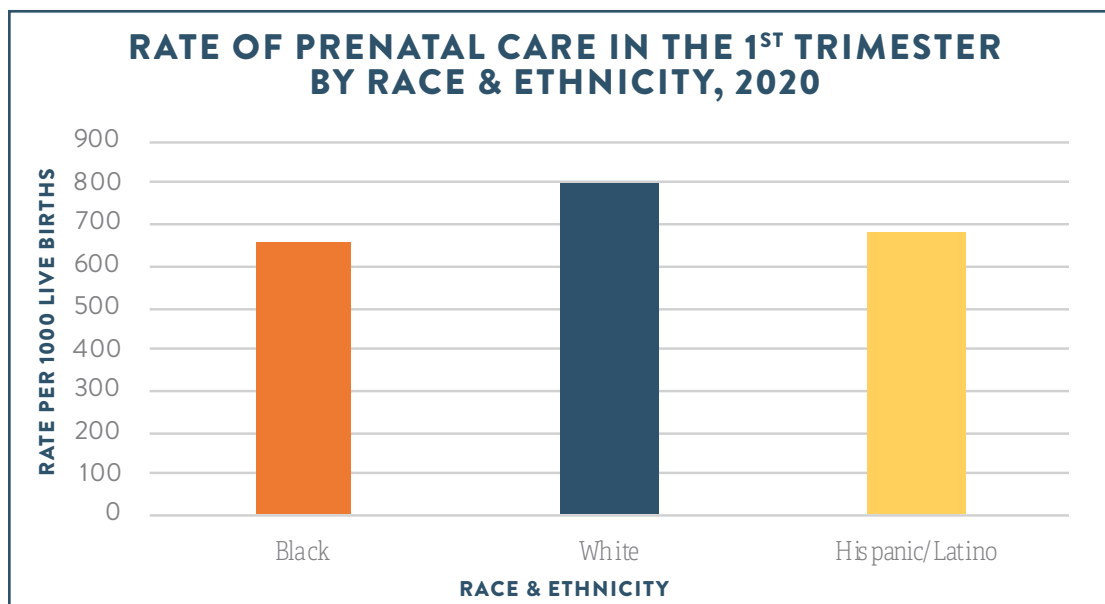


Figure 112. Eastern Jackson County Rate of Prenatal Care during the 1st Trimester per 1,000 Live Births by Race and Ethnicity, 2020.

Rates are precalculated by MOPHIMS Data MICA for the geography defined.

Source: MDHSS MOPHIMS Data MICA, Birth MICA 2020.

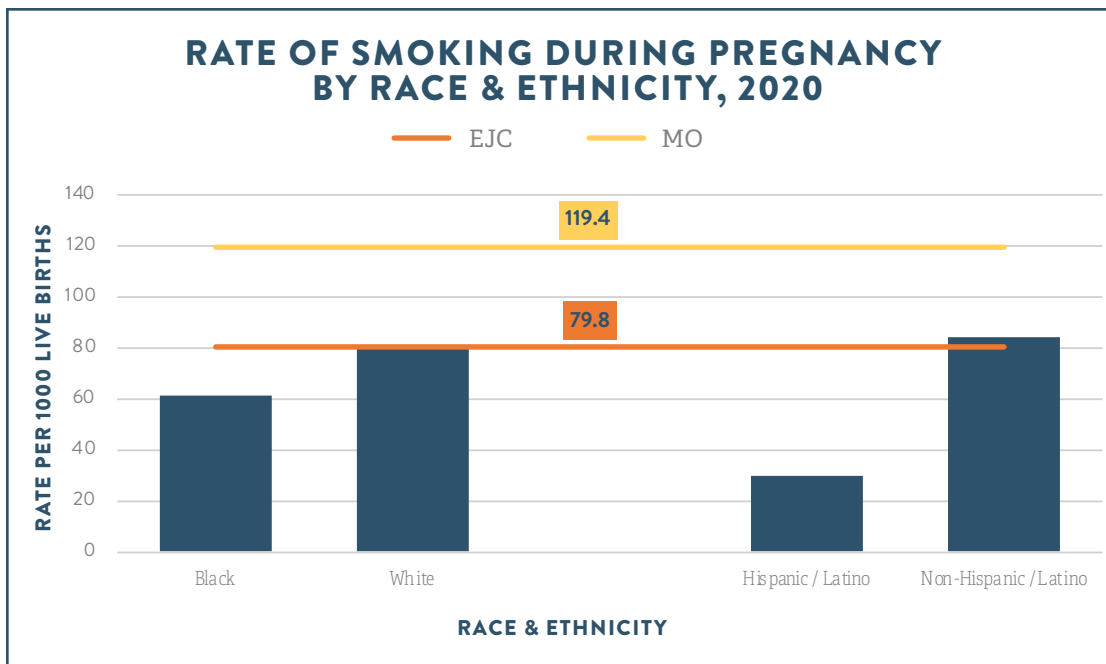


Figure 113: Eastern Jackson County and Missouri Rate of Smoking During Pregnancy per 1,000 Live Births by Race and Ethnicity.

Rates are precalculated by MOPHIMS Data MICA for the geography defined.

Source: MDHSS MOPHIMS Data MICA, Birth MICA 2020.

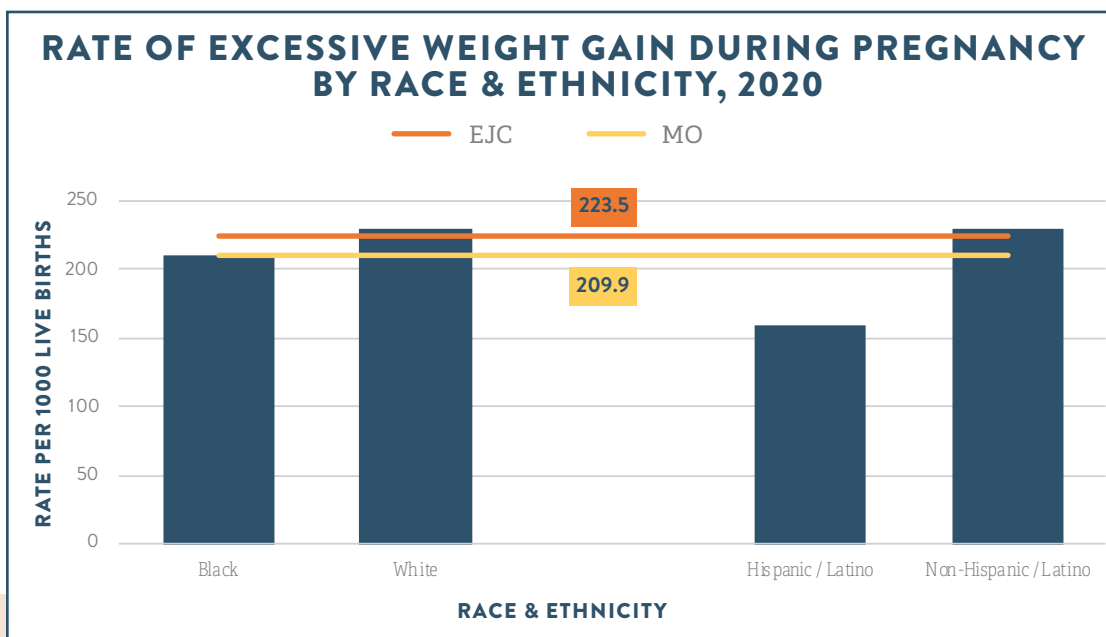


Figure 114: Eastern Jackson County and Missouri Rate of Excessive Weight Gain During Pregnancy per 1,000 Live Births by Race and Ethnicity.

Rates are precalculated by MOPHIMS Data MICA for the geography defined.

Source: MDHSS MOPHIMS Data MICA, Birth MICA 2020.

BIRTH RATES

In EJC, the fertility rate from 2016-2020 was 58.15 live births per 1,000 potential childbearing residents (ages 15-44). A total of 15,583 individuals were pregnant or gave birth during this time period. Most of those births were to birthing people between the ages of 20 and 34. Looking specifically at the teenage (ages 15-19) birth rate in EJC from 2016-2020, a rate of 16 births per 1,000 teenage birthing persons was observed.¹⁶³ This is lower than the Missouri teen birth rate

of 21 births per 1,000 teenage birthing persons. Teenage pregnancy puts the individual at higher risk for negative birth outcomes, such as preterm delivery, or low birth weight, and puts the infant at a higher risk of death.¹⁶⁴

Overall, at least 1 in 5 respondents to the Community Health Assessment (CHA) survey from Sugar Creek, Grandview, and Sibley reported that teen pregnancy was a significant or moderate problem.

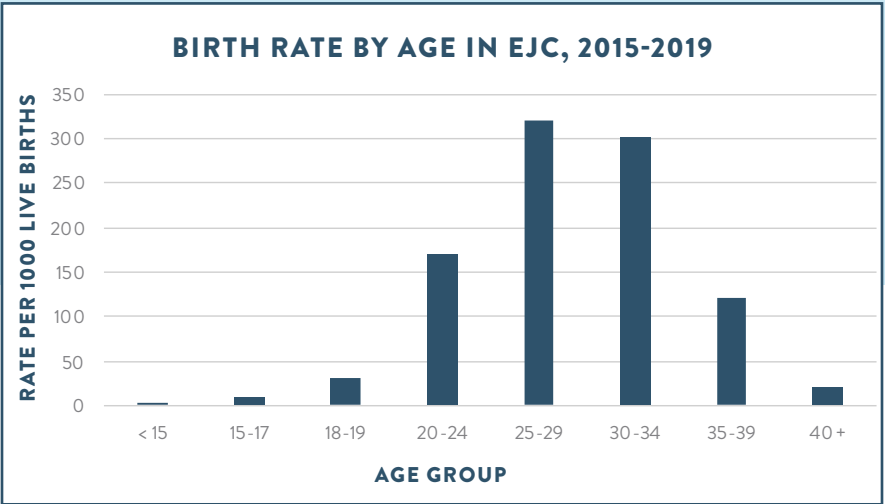


Figure 115. Eastern Jackson County Birth Rate per 1,000 Live Births, 2015-2019.

Rates are precalculated by MOPHIMS Community Data Profiles for the geography defined.

Source: MDHSS MOPHIMS Community Data Profiles, Women's Reproductive Health 2015-2019.

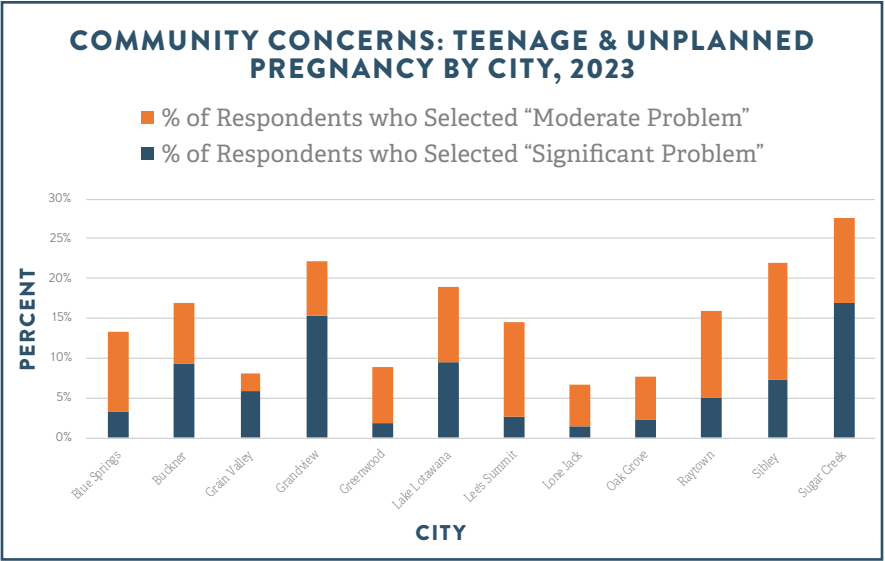


Figure 116: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses by City: 'Significant' or 'Moderate' Problems with Teenage and Unplanned Pregnancy within the Community.

Source: Jackson County Public Health; 2023 CHA Survey.

POSTPARTUM HEALTH & COMPLICATIONS

Typically, for a low-risk birth, an individual who has given birth is seen by their healthcare provider at six weeks and one year postpartum. Since there is little interaction with their provider, and the new parent now has a new baby to care for, health issues during this time are often underdiagnosed. The weeks following childbirth represent a crucial phase for both the birthing person and their infant, laying the foundation for their long-term health and well-being.¹⁶⁵

The Missouri Department of Health and Senior Services conducts an annual Pregnancy-Associated Mortality Review (PAMR) to better understand links between prenatal and postpartum care and maternal mortality. The most recent PAMR report revealed that, from 2017 to 2019, the pregnancy-related mortality rate in Missouri was 25.2 deaths per 100,000 live births compared to the national average of 17.3 deaths per 100,000 live births. Most of these pregnancy-related deaths occurred between those 6 weeks to 1-year postpartum follow-up appointments. The pregnancy-associated mortality rate was three times higher for Black birthing persons and twice as high for people over the age of 40. Additionally, 75% of pregnancy-related deaths in Missouri were considered preventable.¹⁶⁶ See the full PAMR report at health.mo.gov/data/pamr/.

INFANT MORTALITY & HEALTH OUTCOMES

Infant mortality is defined as a death of an infant before their first birthday. The infant mortality rate is an important marker of the overall health of a society. In 2020, the infant mortality rate in the United States was 5.4 deaths per 1,000 live births.¹⁵⁶ The infant mortality rate observed within EJC in 2020 was lower with a rate of 4.1 deaths per 1,000 live births.¹¹⁵ Understanding the risks and causes of infant mortality can help communities prevent infant and child death.¹⁵⁶ In EJC, infants died at a rate four times higher than children of all other ages with an observed rate of four deaths per 1,000 infants, as indicated in Figure 117.¹¹⁵ Causes of infant deaths vary, but the most reported causes of death are birth defects, sudden infant death syndrome (SIDS), maternal complications from pregnancy, and preterm/premature birth or a low birth weight.¹⁵⁶ Figure 118 shows the rate of infant death for each of these factors in Missouri.

Preterm births & low birth weight can...

- *Reduce the ability to fight infections*
- *Increase breathing problems*
- *Increase neurological issues*
- *Increase risk of SIDS*
- *Increase neonatal mortality and morbidity*
- *Reduce growth*
- *Reduce cognitive development*

In EJC, approximately 10% of live births were considered preterm, meaning the infant was born earlier than 37 weeks gestation. When looking at rates by race and ethnicity, Black and Hispanic/Latino pregnant people were more likely to have a preterm birth. In 2020, out of 100 live births, 10 White birthing persons, 12 Black birthing persons, and 11 Hispanic/Latino birthing persons had a preterm birth. Within EJC in 2020, 10 out of 1,000 live births resulted in a low birth weight baby.¹⁵⁵



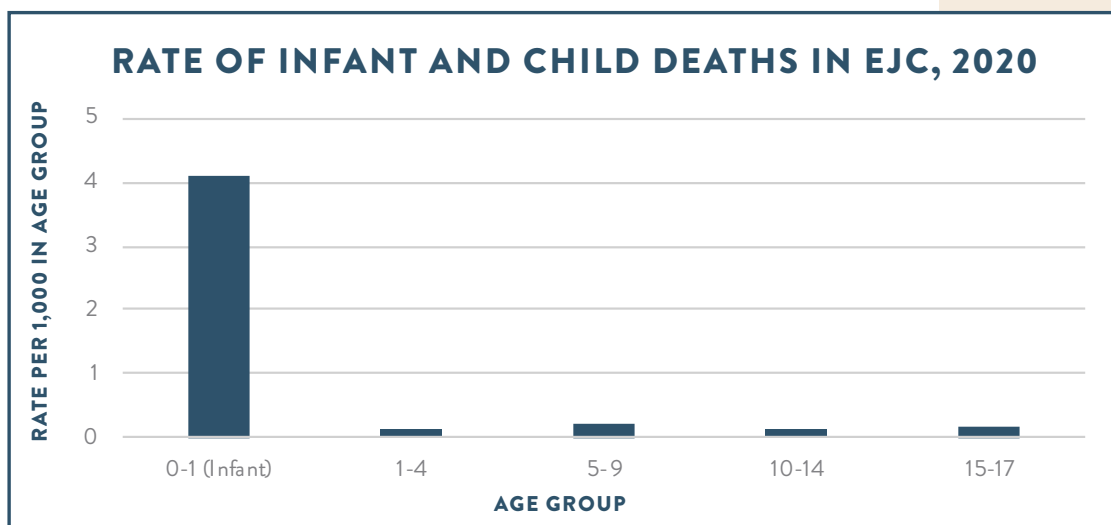


Figure 117. Eastern Jackson County Infant and Child Death Rate per 1,000 Live Births by Age Group, 2020-2021.

Source: Missouri Department of Health and Senior Services (MDHSS).

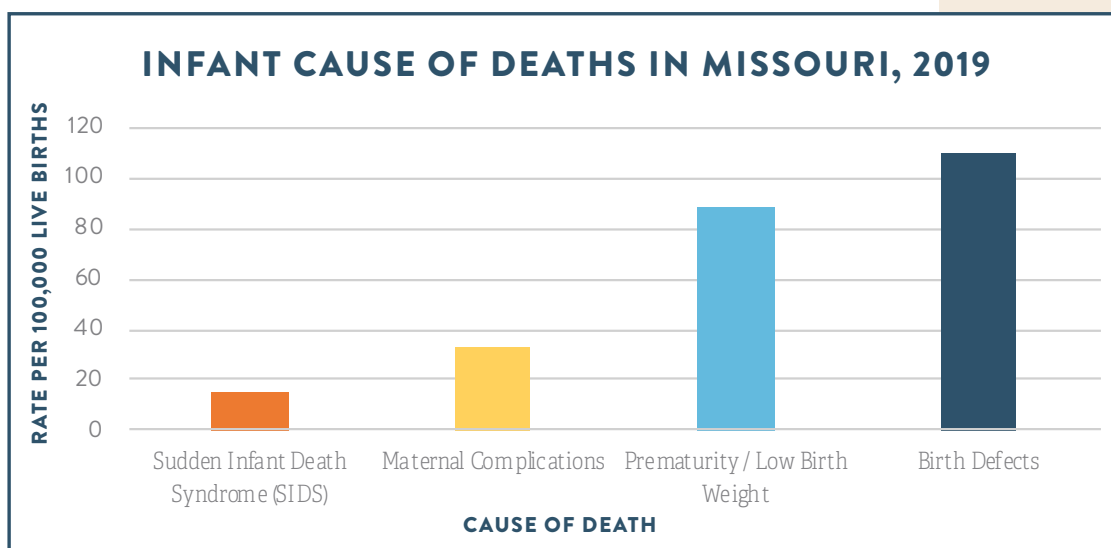


Figure 118. Missouri Infant Cause of Deaths per 100,000 Live Births by Types, 2019.

Source: March of Dimes, 2023.

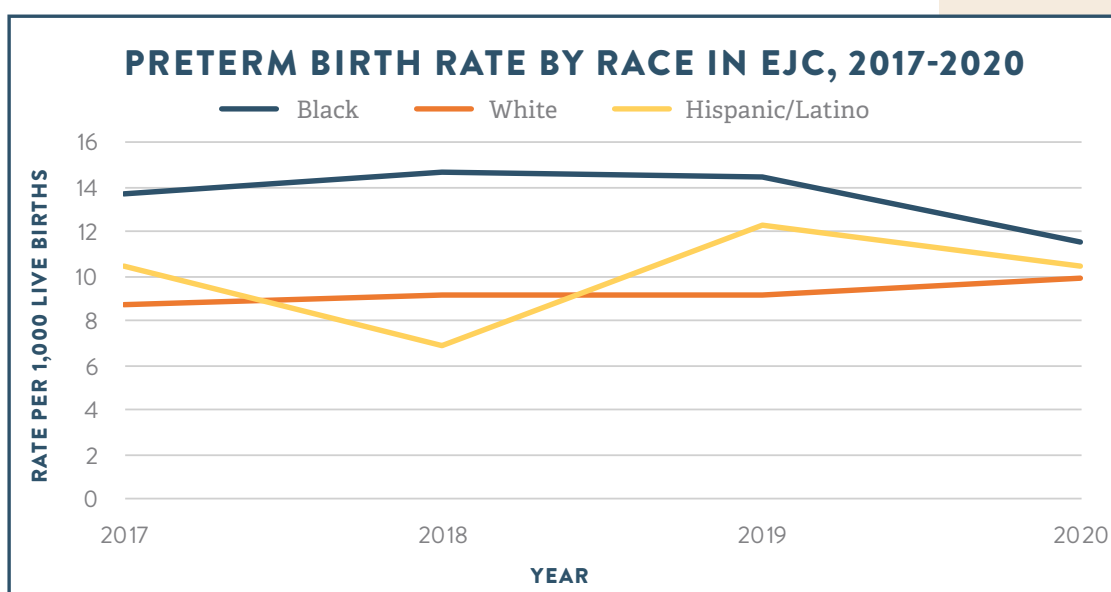


Figure 119. Eastern Jackson County Preterm Birth Rate per 1,000 Live Births by Race, 2017-2020.

Rates are precalculated by MOPHIMS Data MICA for the geography defined.

Source: MDHSS MOPHIMS Data MICA, Birth MICA 2017-2020.

INFANT MORTALITY & HEALTH OUTCOMES (CONTINUED)

Infant mortality can be further classified into two age distinctions following birth: the neonatal and post neonatal periods. The neonatal period refers to the time following birth up to 27 days and the post neonatal period is from 28 days following birth up to 1 year of age. In Missouri, 63.7% of infant deaths in 2019 occurred within the neonatal period and 36.2% occurred during the post neonatal period.¹⁵⁶ A comparison

of infant death rate by age (neonatal and post neonatal periods) between Missouri and Jackson County can be viewed in Figure 120. Looking at death among both infants and children within EJC, all age groups saw an increase in deaths from 2020 to 2021.¹¹⁵

Nearly 1 in 4 CHA Survey respondents from Lake Lotawana and Sugar Creek identified that maternal and infant health were a significant or moderate problem within their communities.

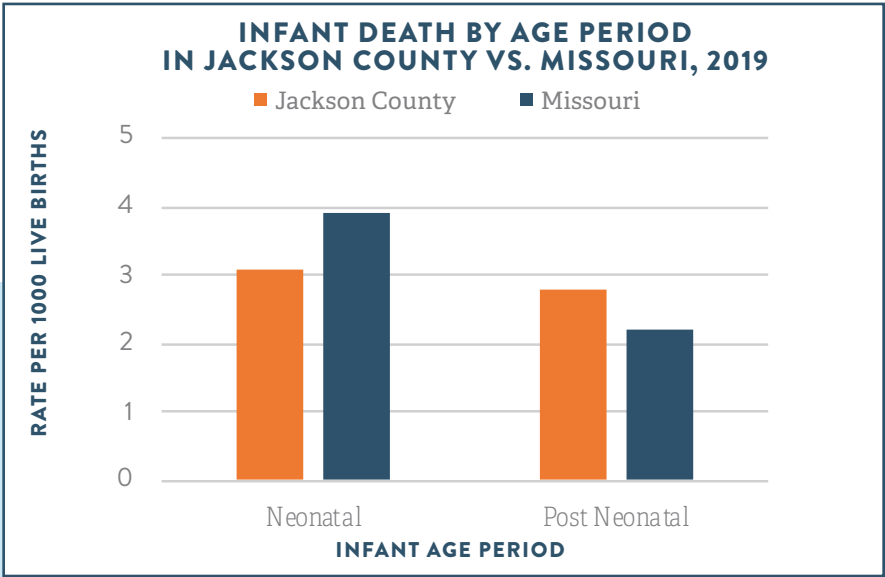


Figure 120: Infant Death by Age Period in Jackson County vs. Missouri, 2019.

Source: March of Dimes, Peristats.

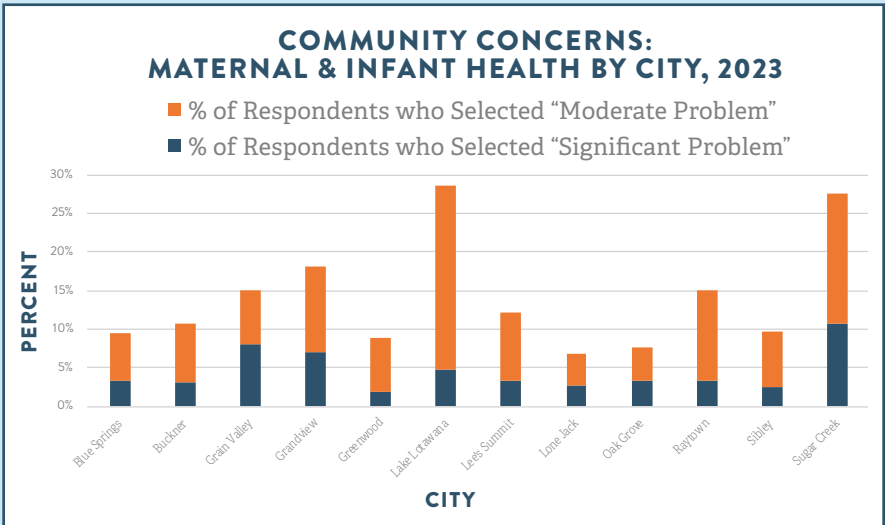


Figure 121: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses by City: 'Significant' or 'Moderate' Problems for Maternal and Infant Health within the Community.

Source: Jackson County Public Health; 2023 CHA Survey.

SCHOOL AGED VACCINATIONS

Vaccines assume a vital role in safeguarding health by offering protection against severe and potentially life-threatening diseases. Each vaccine operates through distinct mechanisms, yet the ultimate goal remains consistent: to teach the body's immune system to fight harmful germs. Though it may take a few weeks for the immune response to develop after vaccination, the resulting protection can endure for a lifetime.¹⁶⁷

To attend public schools in Missouri, children are required to receive a total of six required vaccinations (five of them before Kindergarten) and one additional booster (Figure 122). Over the last three school years, across all grade levels, the percentage of children in EJC who are fully vaccinated has decreased. This trend is the same at the county level, though EJC children are fully vaccinated at a higher percentage compared to Jackson County overall (Figure 123).¹⁵⁷

Data also indicate that when following the same grade-level cohort across multiple years, fully vaccinated percentages stay relatively the same. In previous years, for most vaccinations, children in EJC met a 97% fully vaccinated status when entering first or second grade. For the 2021-2022 school year, instead of reaching that benchmark in first or second grade, the 97% benchmark was not reached until third grade. Out of all vaccines for the 2021-2022 school year, the vaccine for Varicella (chickenpox) had the lowest average percentage for fully vaccinated status, reaching 96.5% across all grades. Overall full vaccination percentage for Hepatitis B was the highest, reaching 97.3% across all grades.¹⁵⁷



Vaccine requirements for Missouri Schools

KINDERGARTEN – 7TH GRADE

DTap/DTP/DT	(Diphtheria, Tetanus, Pertussis)
Hep B	(Hepatitis B)
IPV	(Polio)
MMR	(Measles, Mumps, Rubella)
VAR	(Varicella/Chickenpox)

8TH – 12TH GRADE*

MCV/ Meningococcal Conjugate	(Meningitis)
Tdap booster	(Diphtheria, Tetanus, Pertussis)

***includes K-7 requirements**

STUDENTS FULLY VACCINATED BY GRADE & VACCINATION IN EJC, 2021-2022

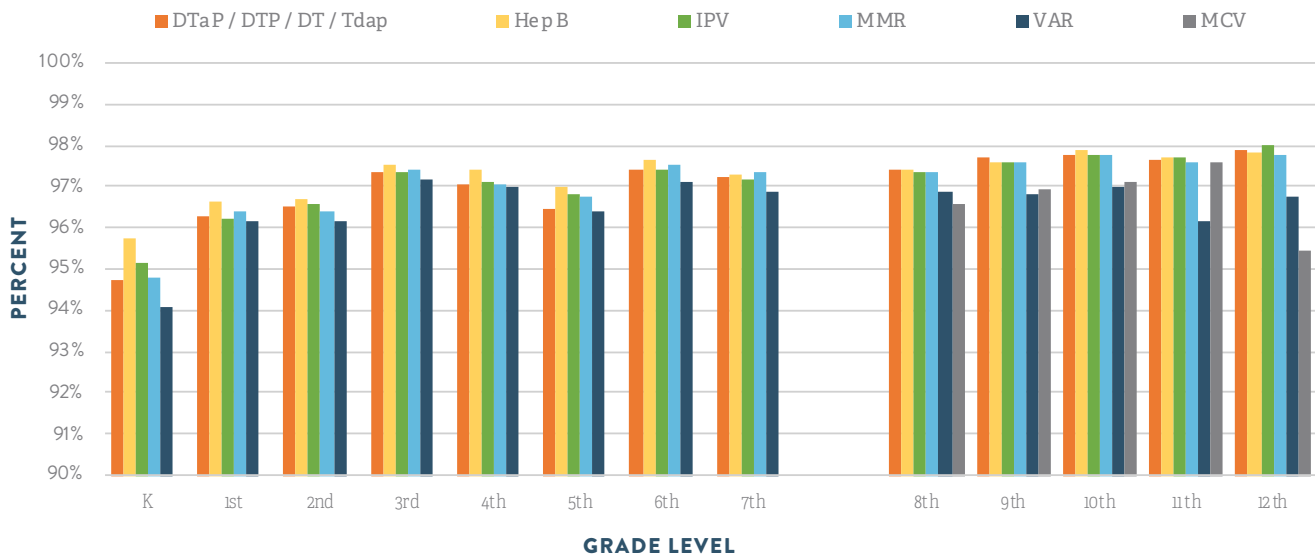


Figure 122: Eastern Jackson County Rates of Fully Vaccinated Students by Grade and Vaccination Type, 2021-2022.

Data covers an estimated 90-95% of the child population in EJC, and does not include Fort Osage R-I school district vaccination data.

Source: MDHSS; Bureau of Immunizations, School Year 2021-2022.

STUDENTS FULLY VACCINATED BY LOCATION, VACCINATION & SCHOOL YEAR, 2020-2021 TO 2021-2022

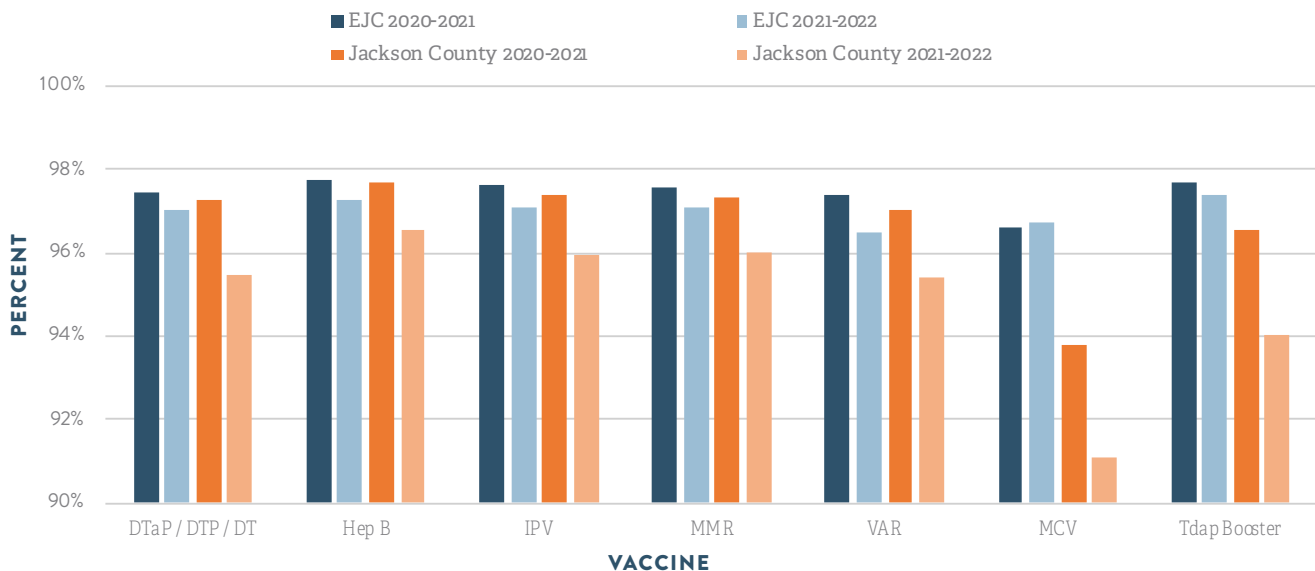


Figure 123: Eastern Jackson County and Jackson County Rates of Vaccinated Students by Vaccination Type, School Years 2020-2021 and 2021-2022.

Data covers an estimated 90-95% of the child population in EJC, and does not include Fort Osage R-I school district vaccination data.

Source: MDHSS; Bureau of Immunizations, School Years 2019-2020 to 2021-2022.

Communicable Disease

WHAT IS IT?

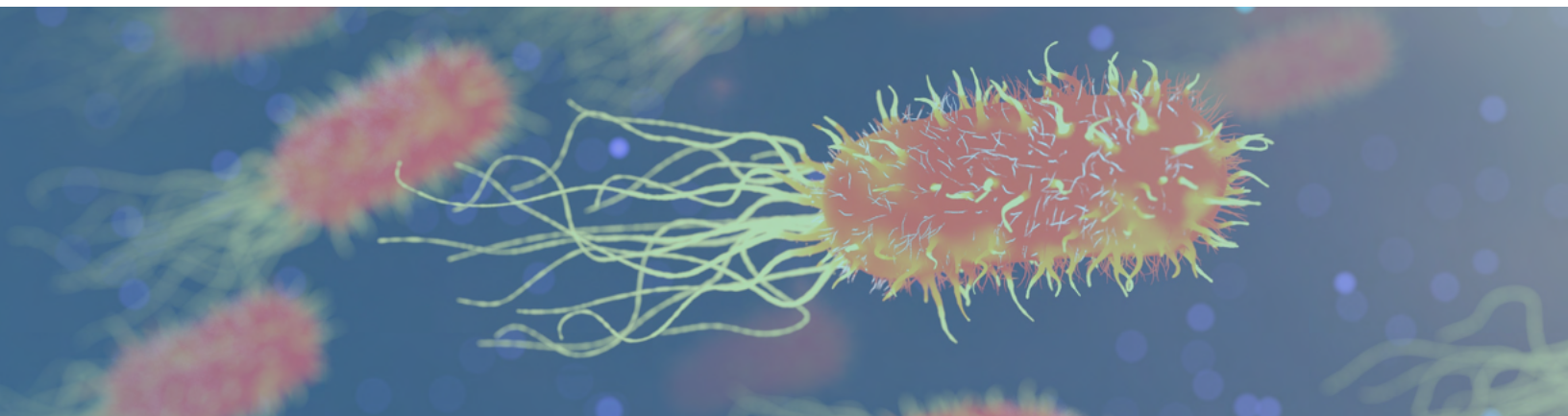
A communicable disease is an illness that spreads from one person to another through a variety of methods including contact with blood or bodily fluids, breathing in an airborne virus, or by being bitten by an insect. Unlike chronic illnesses, such as asthma or diabetes, communicable diseases can be contagious if transmission is not prevented.¹⁶⁸

WHY IS IT IMPORTANT?

Communicable or infectious diseases spread from one person or animal to another, but transmission can be reduced by interventions like vaccinations. Some diseases may spread more easily between certain demographic groups, such as school-aged children, or during particular seasons, such as zoonotic and vector-borne (insect) disease during summer months and airborne respiratory illness during winter months. Tracking communicable disease trends allows health professionals and public health agencies to create disease prevention and control methods to best protect the communities they serve. Having these methods in place will help ensure the overall health and well-being of the community at large.

KEY FINDINGS

- *From 2017 to 2022, there was a 58% increase in both acute and chronic Hepatitis B viral infection cases, making it the most notable increase among vaccine-preventable diseases within Eastern Jackson County (EJC).*
- *Between 2017 and 2021, Chlamydia has been the most prevalent sexually transmitted infection (STI) in EJC, followed by Gonorrhea and Syphilis.*
- *Diagnosed cases of Ehrlichiosis, a tick-borne illness, have increased threefold from 2017–2022, while other zoonotic diseases, such as Rocky Mountain Spotted Fever and Tularemia, have decreased.*



VACCINE-PREVENTABLE DISEASES

Vaccine-preventable diseases are infections that could be reduced or prevented with a vaccination, which boosts the body's immune response to a specific infection. Unfortunately, approximately 42,000 adults and 300 children die annually in the United States from diseases with vaccines available.¹² There are many common disease vaccines in the US that can protect children and adults from diseases such as Varicella/Chickenpox, Hepatitis A (Hep A), Hepatitis B (HBV), or Influenza. Case rates for vaccine-preventable disease in Eastern Jackson County (EJC) from 2017-2022 can be seen in Figure 124.¹² In 2022, the most commonly vaccine-preventable diseases were Chronic HBV (31 cases), Acute HBV (26 cases), and Hep A (18 cases), while there were under five cases reported each for Pertussis and Varicella. There were no reported cases of Mumps in EJC in 2022.

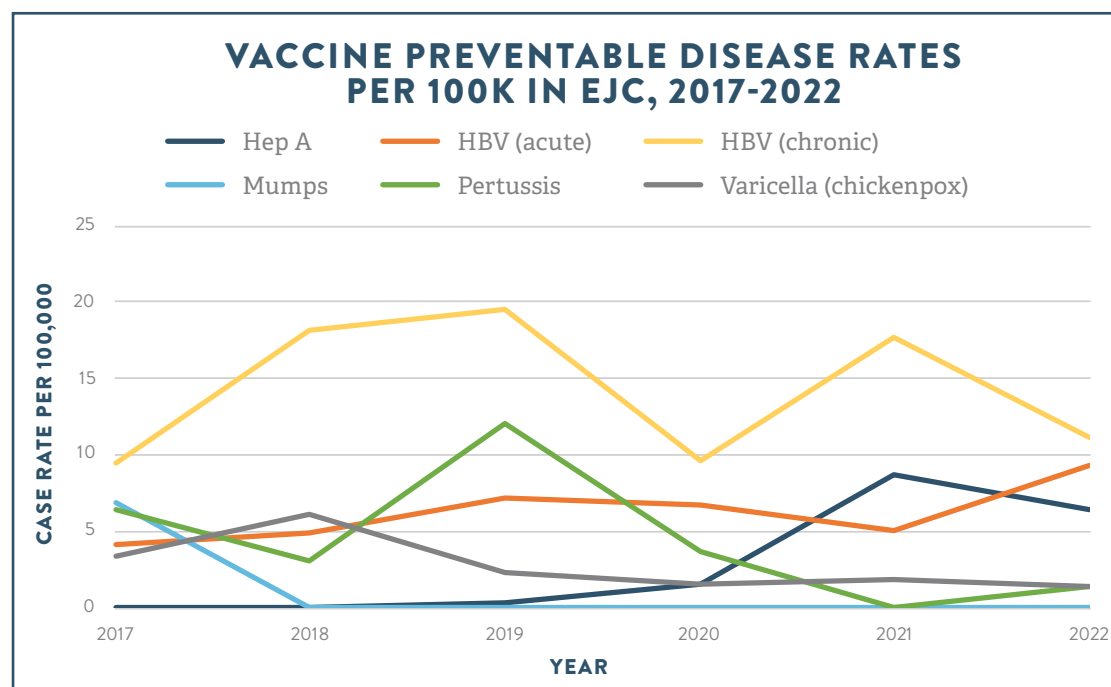


Figure 124:
Eastern Jackson
County Case
Rate per 100,000
Population
of Vaccine-
Preventable
Diseases by Type,
2017-2022.

Source: Jackson
County Public
Health; U.S.
Census Bureau;
American
Community
Survey (ACS),
2020.

RESPIRATORY ILLNESS

Some respiratory illnesses that affect EJC include Influenza (flu), Respiratory Syncytial Virus (RSV), and COVID-19. Respiratory illnesses are caused by viruses that infect the nose, throat, and lungs and pose particularly high risk to vulnerable populations.¹¹⁹ Although flu cases decreased sharply during the peak of the COVID-19 pandemic, case numbers appear to have returned to normal levels with 6,343 recorded flu cases for the 2022-2023 season.¹² For additional COVID-19 data, see the **COVID-19 section on page 96**.

GASTROINTESTINAL ILLNESS

Intestinal-related or gastrointestinal (GI) illnesses may be transmitted via contaminated water or food, or through direct contact with infected objects, persons, or animals. Food contamination is responsible for 48 million cases of GI illness in the United States every year, along with 128,000 hospitalizations and 3,000 deaths.¹⁶⁹ In EJC, Campylobacteriosis and Salmonellosis (Salmonella) have consistently been the top two reported illnesses in the past six years. In 2022, there were 42 reported cases of Campylobacteriosis, 27 cases of Salmonella, and under twenty cases each of Shigellosis, Cryptosporidiosis, and Giardiasis in EJC. Since GI illnesses are typically fast acting and resolving, many people do not get tested even when they have symptoms. This means that GI illnesses are likely underreported and true prevalence may be higher than testing indicates.¹⁶⁹

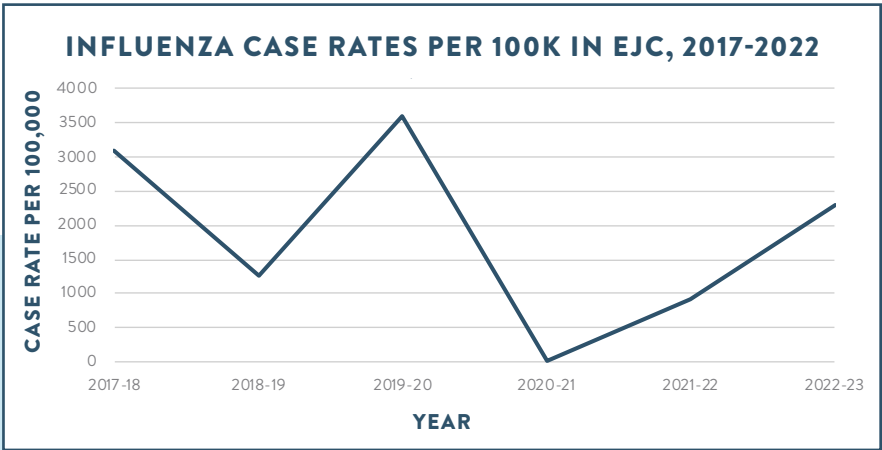


Figure 125: Eastern Jackson County Case Rate per 100,000 Population of Influenza during Flu Season, 2017-2018 to 2022-2023.

Source: Jackson County Public Health; U.S. Census Bureau; American Community Survey (ACS), 2020.

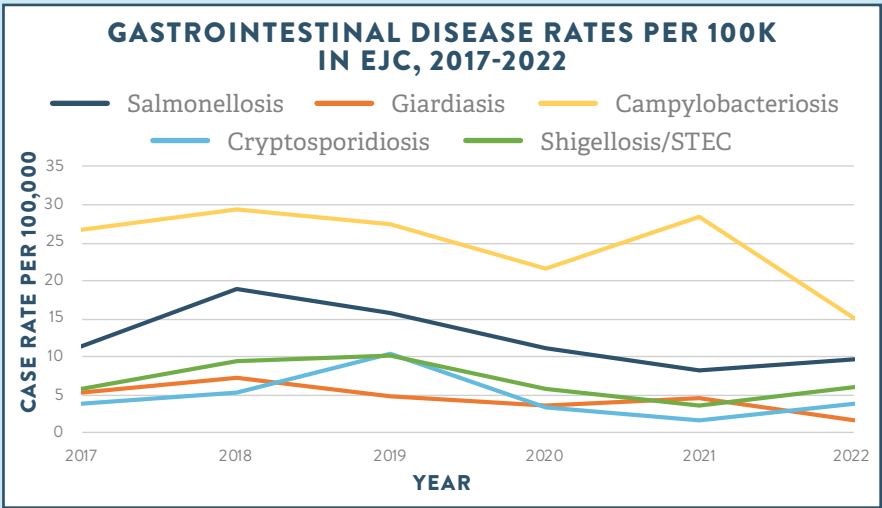


Figure 126: Eastern Jackson County Case Rate per 100,000 Population of Gastrointestinal Diseases by Type, 2017-2022.

Source: Jackson County Public Health; U.S. Census Bureau; American Community Survey (ACS), 2020.

TUBERCULOSIS

Tuberculosis (TB) is a bacterial disease that primarily affects the lungs and can be spread through the air through coughing and sneezing. TB can be latent, inactive in a person's body and causing no symptoms, or active, which is symptomatic and can be transmitted to others.

Up to 13 million people in the US are estimated to live with latent TB infections, whereas in 2021 there were only 7,882 recorded active cases of TB in the nation, or a national average of 2.2 cases per 100,000 persons. Missouri's average was lower than the national average, with 1.2 active cases per 100,000 people.¹⁷⁰

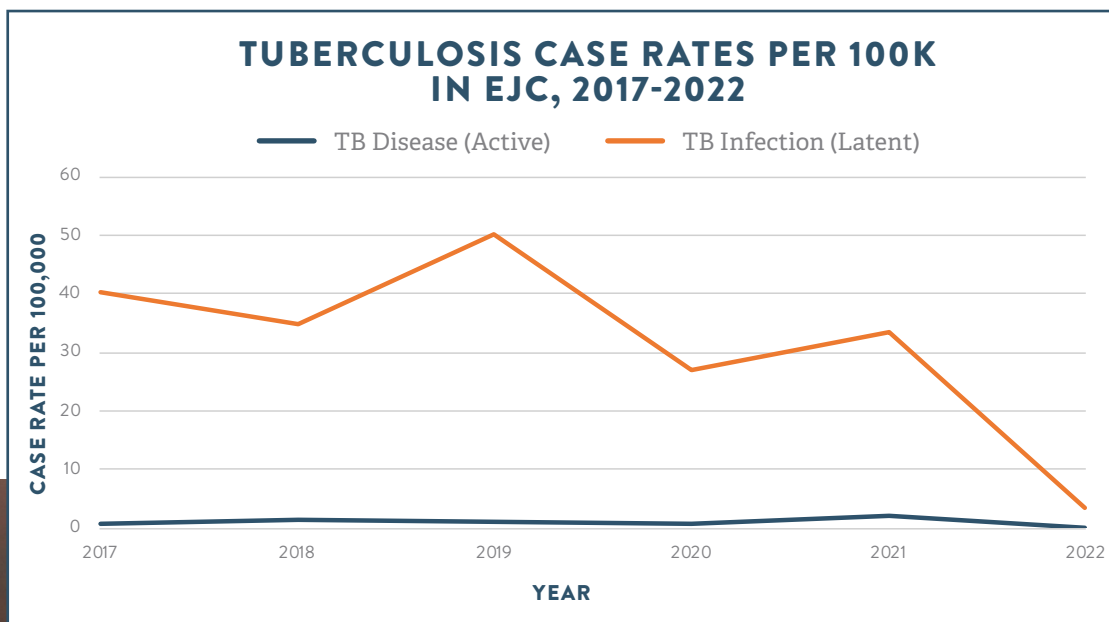
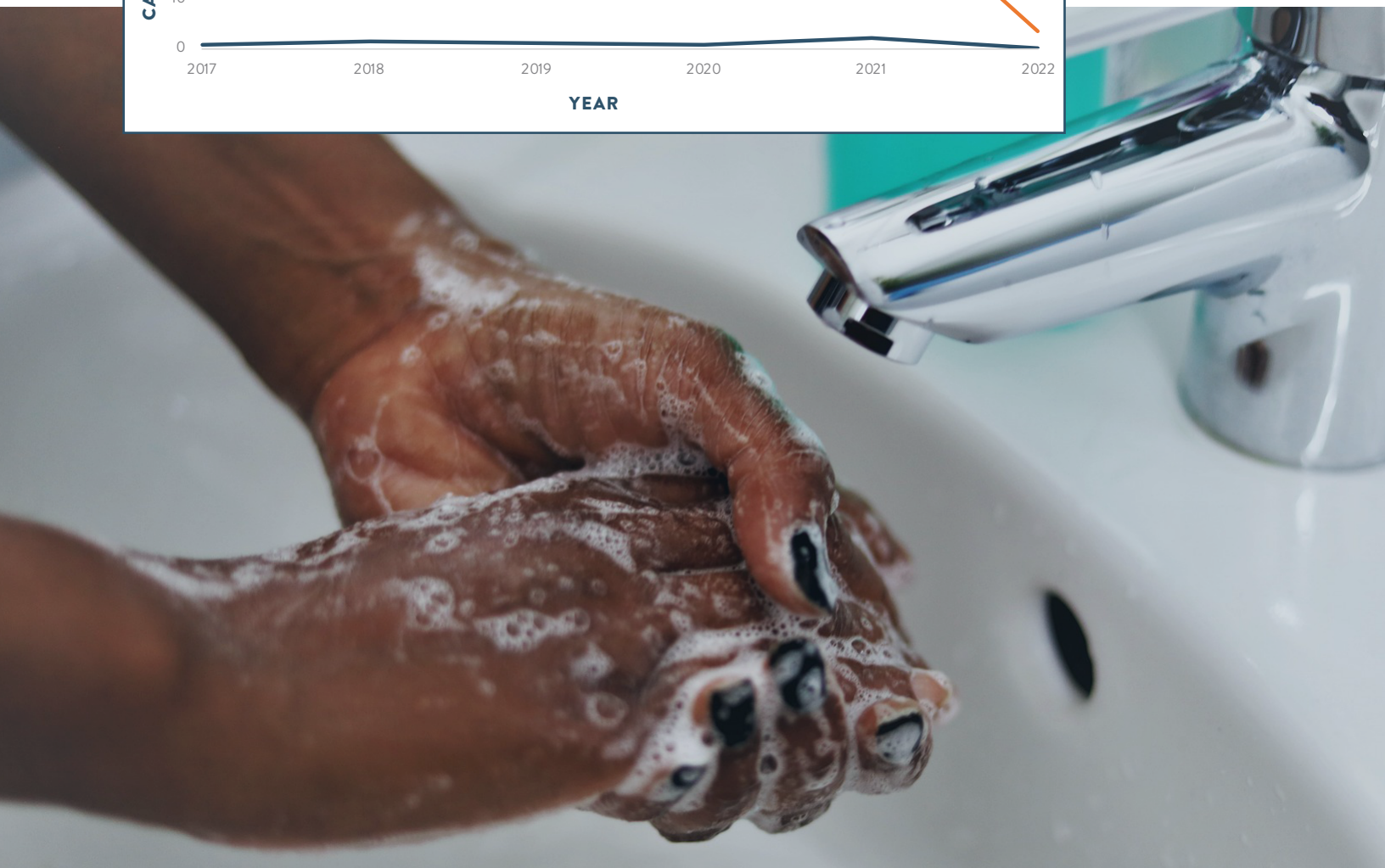


Figure 127: Eastern Jackson County Case Rate per 100,000 People of Active and Latent Tuberculosis, 2017-2022.

Source: Jackson County Public Health; U.S. Census Bureau; American Community Survey (ACS), 2020.



SEXUALLY TRANSMITTED INFECTIONS

Sexually transmitted infections (STIs) can be passed from person to person via bodily fluids and vaginal, oral, anal, or other sexual contact. Although these infections can affect people of all ages, over half of the 26 million new STI infections that occur annually are in people ages 15-24.¹⁷¹ In EJC, Chlamydia and Gonorrhea are the two most prevalent STIs. Gonorrhea and Chlamydia are both common in younger people and often present with no symptoms, which can make them easy to unknowingly transmit to a partner. These STIs can cause dangerous implications during pregnancy or present fertility challenges, so regular testing is critical for anyone who is sexually active.¹⁷² In 2021, there were 1,823 reported cases of Chlamydia, 767 reported cases of Gonorrhea, and 108 reported cases of Syphilis in EJC.

According to the U.S. Department of Health and Human Services, STIs can lead to severe health complications including Pelvic Inflammatory Disease, HIV, some cancers and chronic reproductive issues if left untreated. Preventative screening is the most effective way to catch STIs early and stop their spread.¹⁷¹

MPOX

Mpox (formerly Monkeypox) was declared a national Public Health Emergency on August 4, 2022. A virus transmitted primarily through intimate or sexual contact, Mpox is spread via contact with skin lesions and not through contact with surfaces or objects touched by an infected individual.¹⁷⁹ There were eight total confirmed and probable cases of Mpox recorded in EJC in 2022. A vaccine became available in fall of 2022 to prevent the spread of Mpox. The CDC recommends JYNNEOS, the two-dose Mpox vaccine, for individuals at higher risk of infection or complications listed on their vaccine page, and for individuals whose healthcare provider recommends the vaccine.¹⁸⁰

HIV/AIDS

Human immunodeficiency virus (HIV) is a virus typically transmitted via sexual contact, sharing of needles or syringes, as well as mother-to-child transmission. Testing is the only way to know if a person has contracted HIV.¹⁷³ Acquired Immunodeficiency Syndrome (AIDS) occurs in advanced stages when HIV has gone untreated and causes immune system suppression. This often puts a person with AIDS at greater risk for an Opportunistic Infection (an OI). An OI is an illness that typically would not be life threatening but is harder on the body of a person whose immune system has been suppressed and can become very dangerous.¹⁷³ In 2019, there were approximately 12.6 new HIV infections per 100,000 people in the US, which was an 8% decrease from 2015.¹⁷⁴ In the combined area of EJC and Independence, rates of new HIV cases per 100,000 increased from 2.3 to 5.3 between 2020 and 2022. From 2017 to 2022, the number of people living with both HIV and AIDS has increased each year.¹⁷⁵

Innovations in treatment allow people with HIV to lower their viral load to the point that the virus becomes undetectable and, therefore, untransmittable. Treatment can be expensive, which can create barriers to access. Because of these barriers to equitable prevention and treatment, HIV disproportionately affects historically marginalized communities, namely Black Americans and members of the LGBTQ+ community.¹⁷⁶ Pre-exposure prophylaxis (PrEP) is available as a daily medication or a bi-monthly injection that significantly decreases the risk of HIV transmission through sexual contact or injection drug use. PrEP can decrease chances of contracting HIV from sexual contact by about 99% and from injection drug use by at least 74%.¹⁷⁷ Post-exposure prophylaxis (PEP) medication can prevent transmission for individuals who may have been exposed to HIV up to 72 hours prior and is designed for emergencies only.¹⁷⁸

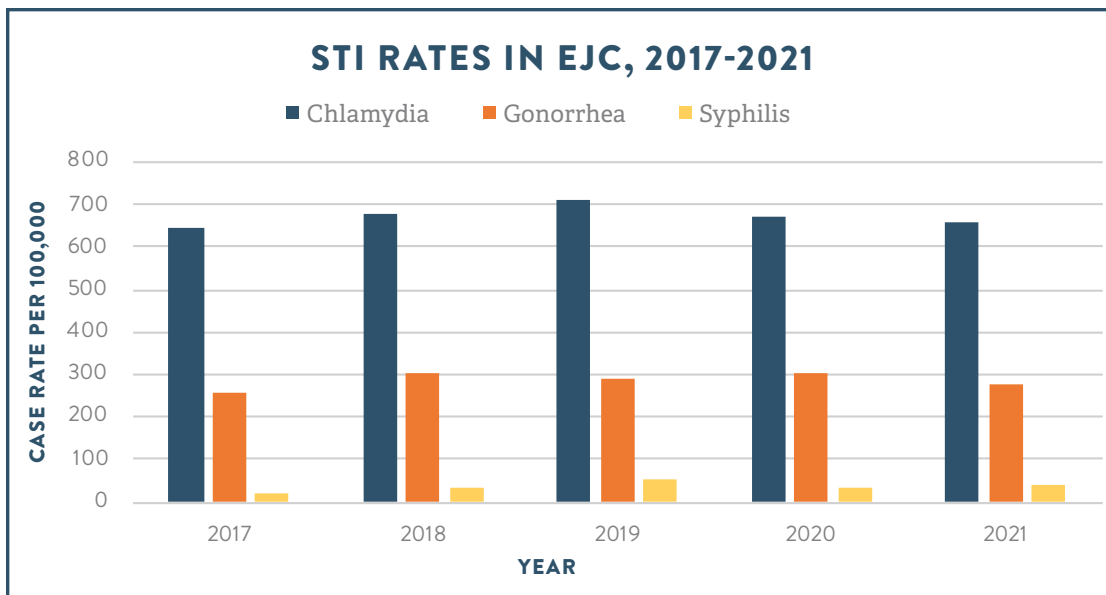


Figure 128: Eastern Jackson County Case Rate per 100,000 Population of Sexually Transmitted Infections by Type, 2017-2021.

Source: Missouri Department of Health and Senior Services; U.S. Census Bureau; American Community Survey (ACS), 2020.

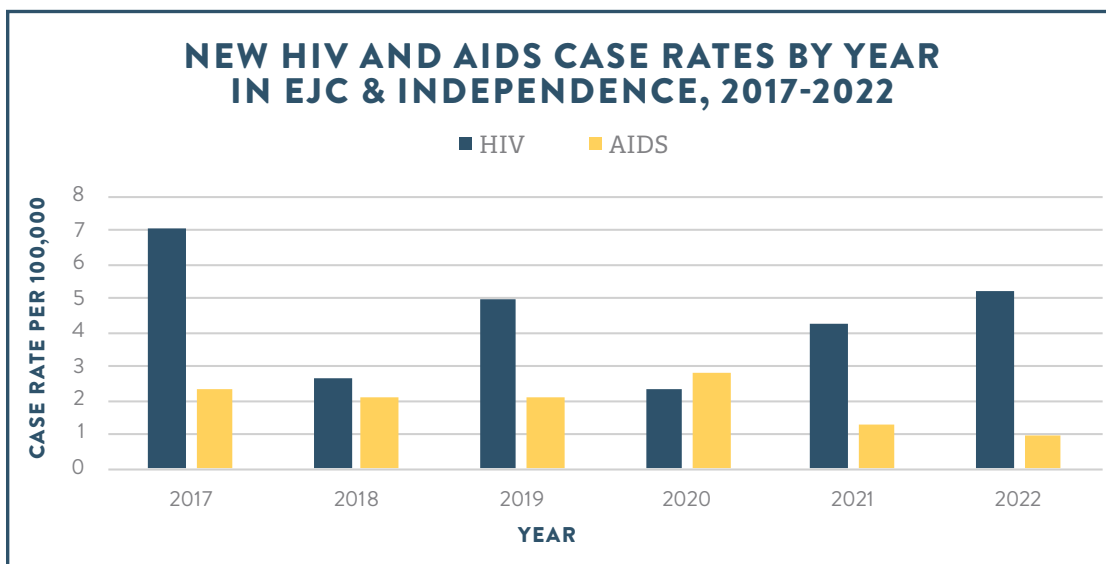


Figure 129: Eastern Jackson County and Independence Case Rate per 100,000 Population of New HIV and AIDS Cases by Year, 2017-2022.

Source: Missouri Department of Health and Senior Services; Office of Epidemiology.



ZOONOTIC DISEASES

Zoonotic diseases are caused by infectious agents that spread from animals to humans. This may occur via direct contact with an infected animal, indirect contact with a surface or substance of an infected animal's environment, or the consumption of food or water that was contaminated by animal feces. Vector-borne diseases are those specifically transferred by insects, such as mosquitos, fleas, or ticks.¹⁸¹ The two most common zoonotic diseases in EJC across the past six years have been Ehrlichiosis and Rocky Mountain Spotted Fever, both of which are primarily spread through tick bites.

The Rabies virus infects the central nervous system and is typically transmitted via a bite from a rabies-infected animal. More than 90% of rabid animal cases occur in wild animals, but there is also a risk of pets or livestock becoming infected. Only about 1-3 cases of rabies in humans are reported per year in the US, but approximately 60,000 people receive Rabies Post Exposure Prophylaxis (RPEP) in response to an animal bite or scratch.¹⁸² RPEP is a series of vaccination doses administered following probable rabies exposure, generally when the animal bite or scratch came from an animal of unknown rabies vaccination status.¹⁸²

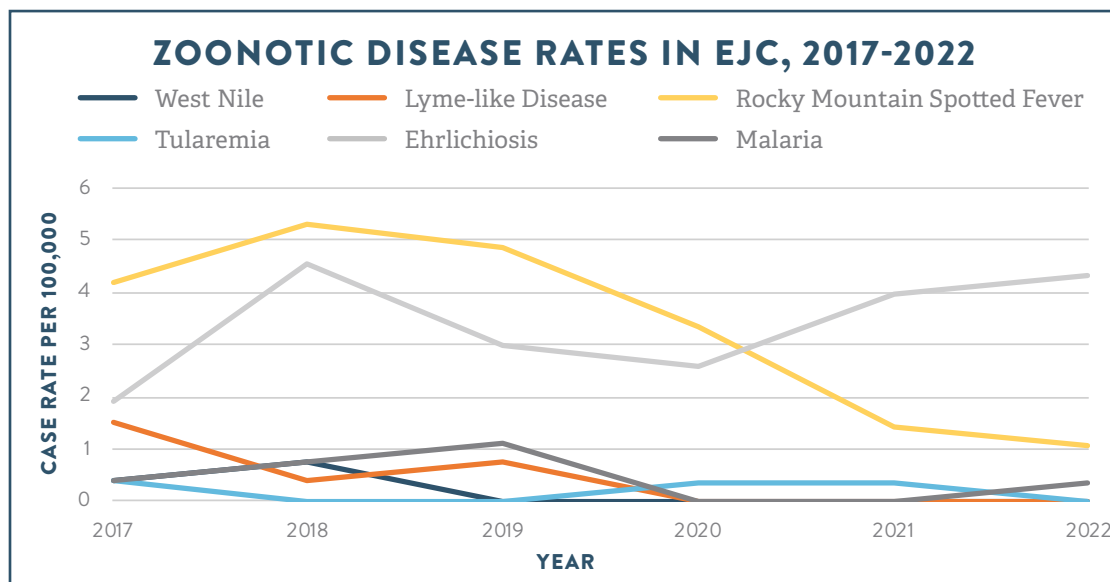


Figure 130: Eastern Jackson County Case Rate per 100,000 Population of Zoonotic Diseases by Type, 2017-2022.

Source: Jackson County Public Health; U.S. Census Bureau; American Community Survey (ACS), 2020.

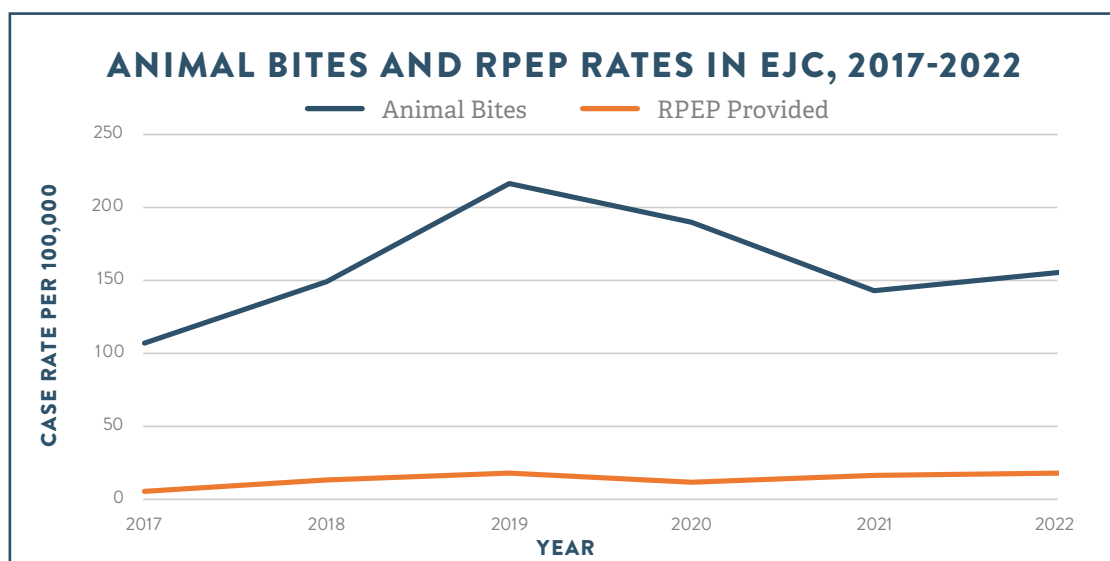
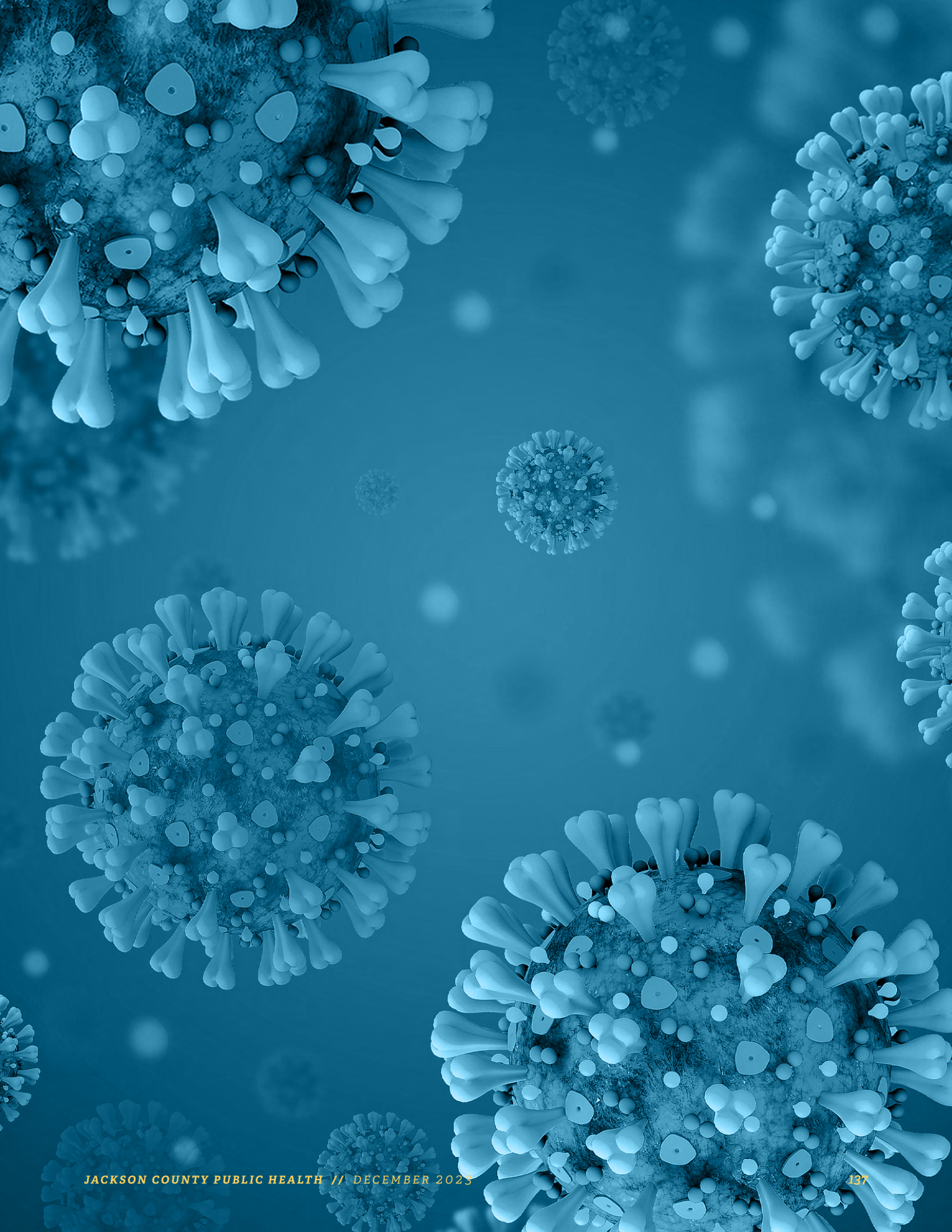


Figure 131: Eastern Jackson County Case Rate per 100,000 Population Animal Bites and Rabies Post Exposure Prophylaxis (RPEP), 2017-2022.

Source: Jackson County Public Health; U.S. Census Bureau; American Community Survey (ACS), 2020.



Life Expectancy

WHAT IS IT?

Life expectancy is one of the best indicators to measure the health and well-being of a community. Life expectancy is the “average number of years that a person can expect to live in ‘full health’ by taking into account years lived in less than full health due to disease and injury.”¹⁸³

WHY IS IT IMPORTANT?

Understanding how accidental injury and chronic illness impact Eastern Jackson County (EJC) communities and contribute to premature death lays the foundation for interventions that can enhance health and safety. This information can then go on to inform health professionals of the main issues relating to mortality within the community.

KEY FINDINGS

- *Between 2011 and 2020, estimated life expectancy for EJC residents was 78.5 years, which is higher than the average life expectancy in 2020 in Missouri (75.3 years) and in the United States (77 years).*³²
- *ZIP Codes 64086 and 64054 are located approximately 10 miles apart and have a difference in life expectancy of 13.4 years.*³²
- *ZIP Codes 64082 and 64030 are located approximately 1 mile apart and have a difference in life expectancy of 7 years.*³²
- *The top five causes of death in EJC in 2020 were heart disease, cancer, COVID-19, accidents (unintentional injury), and stroke (cerebrovascular disease).*¹¹⁵
- *Prevalence of obesity was highest in the ZIP Codes corresponding to the cities of Sugar Creek, Raytown, and Grandview.*



LIFE EXPECTANCY

The most recent estimates of life expectancy show that Eastern Jackson County (EJC) residents are expected to live longer than the average Missourian and the average American. However, life expectancy varies across EJC ZIP codes. While living only 10 miles apart, residents of the 64086 ZIP Code (Lee's Summit, Lake Lotawana, some of Lone Jack) have a life expectancy at birth of 13.4 years more than residents of the 64054 ZIP Code (Sugar Creek). People ages 65-69 in the ZIP Code with the highest life expectancy (64086) can expect to live

seven years longer than residents ages 65-69 in the lowest life expectancy ZIP Code (64054).³²

Life expectancy data from the Missouri Department of Health and Senior Services (MDHSS) is only available by race for Black and White residents. Overall, life expectancy at birth from 2011-2020 was higher for White individuals and for females in EJC. Compared to surrounding communities, the average EJC resident has a longer life expectancy than residents of Independence or Kansas City, but a shorter life expectancy than residents of Clay County and Platte County.¹¹⁵

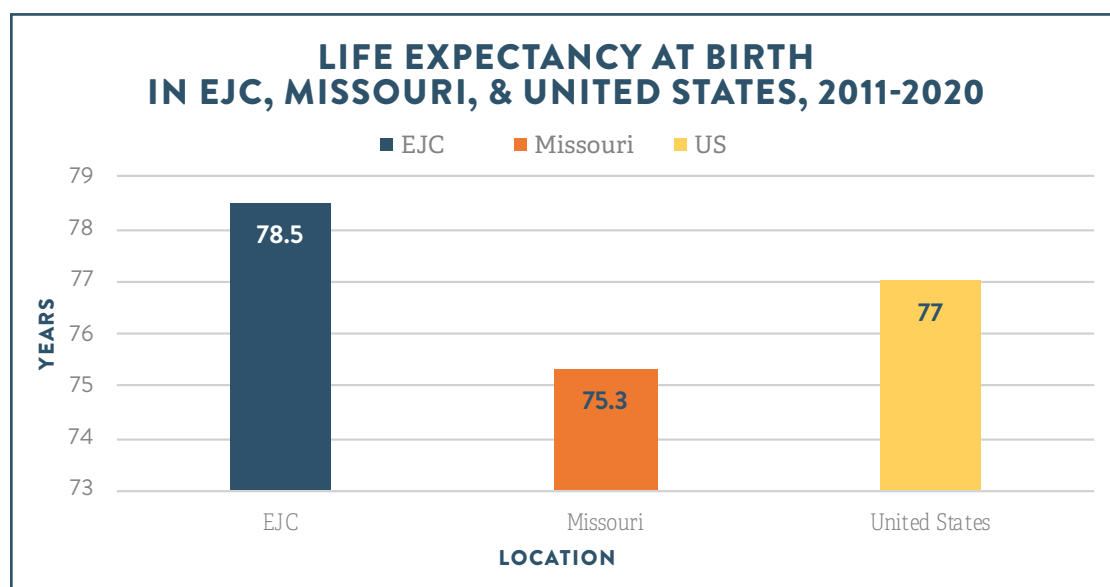


Figure 132. Eastern Jackson County, Missouri, and United States Life Expectancy at Birth, 2011-2020.

Source: Missouri Department of Health and Senior Services (MDHSS).

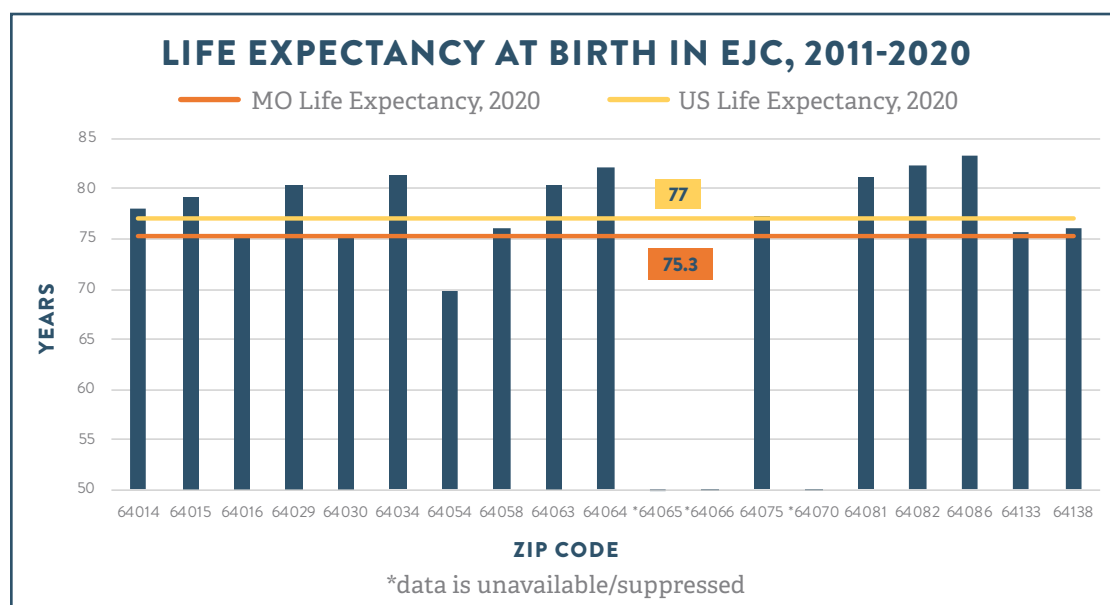


Figure 133. Eastern Jackson County Life Expectancy by ZIP Code compared to Missouri and United States Life Expectancy, 2011-2020.

Source: Missouri Department of Health and Senior Services (MDHSS).

LIFE EXPECTANCY BY LOCATION, SEX, AND RACE, 2011-2020

	TOTAL	MALE	FEMALE	WHITE	BLACK
Jackson County	77.1	74.1	80.1	78.5	73.5
Eastern Jackson County	78.5	76.2	80.8	N/A	N/A
Clay County	79.4	77.2	81.5	79.5	78.2
Platte County	80.3	78	82.7	80.4	77.9
Independence	75.9	73.1	78.5	N/A	N/A
Kansas City	77.3	74	80.5	79.2	73.7

Table 11. Eastern Jackson County Life Expectancy by Location, Sex, and Race, 2011-2020.

Source: Missouri Department of Health and Senior Services (MDHSS).

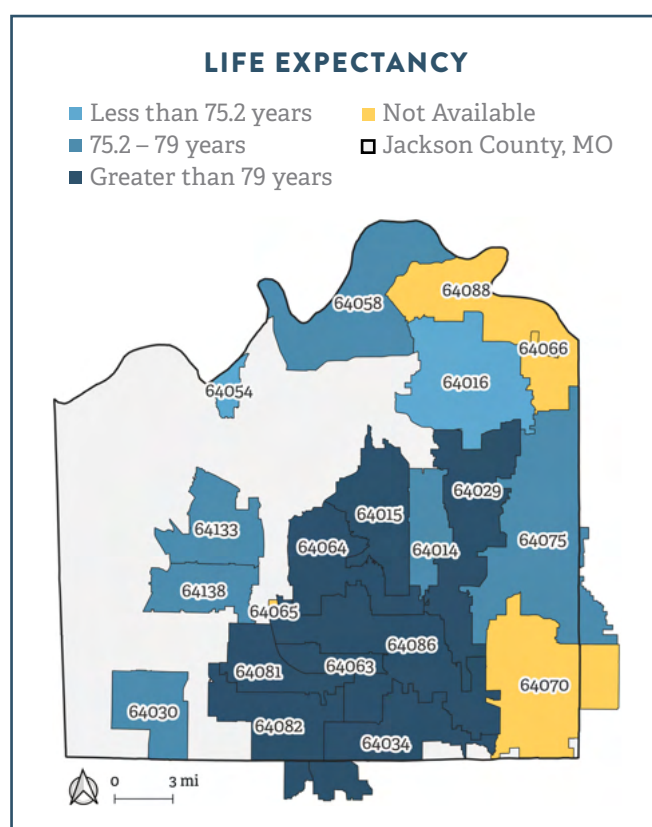


Figure 134. Eastern Jackson County Life Expectancy by ZIP Code, 2011-2020.

Source: Missouri Department of Health and Senior Services (MDHSS).

YEARS OF POTENTIAL LIFE LOST

Years of potential life lost (YPLL) is one way public health officials measure premature mortality, or early death within a community or group of people. This type of measure recognizes that when death occurs at a younger age, more future years of productivity have been lost compared to death occurring at an older age. This value is calculated using the predetermined standard age within the United States, which is 75 years. For example, when an infant dies at age one, they lost 74 years of potential life. An individual whose death occurred at age 50 would have lost 25 years of potential life. Death occurring in younger individuals results in a higher total YPLL. To determine the total years of potential life lost within a group of individuals or a community, all individual YPLL are added together. In 2020, the total years of potential life lost in EJC was 17,559.5 YPLL. This total can also be calculated as a rate by dividing the total YPLL by the total population of the group or community. In 2020, EJC had 6,289 YPLL per 100,000 people.³²

Causes of Death

LEADING CAUSES OF DEATH OVERALL

There were 11,203 deaths in EJC between 2016 and 2020. Between 2016 and 2019, there were an average of 2,165 deaths per year. However, in 2020, there was an approximately 3% increase in deaths (381 more deaths) compared to the average from previous years. The top five causes of death remained stable between 2016 and 2020, shown in **Table 12**. When looking specifically at 2020, COVID-19 was ranked as the third leading cause of death, with a rate of 70.45 deaths per 100,000 EJC residents (**Table 13**).¹¹⁵

LEADING CAUSES OF DEATH BY SEX

The leading cause of death for males in EJC is heart disease. Compared to females, rates of heart disease are 1.2 times higher in males. The second and third leading cause of death in males in EJC are cancer and accidents, respectively.¹¹⁵

In contrast, the leading cause of death for females in EJC is cancer. The second and third leading cause of death in females in EJC are heart disease and chronic lower respiratory diseases, such as chronic obstructive pulmonary disease (COPD) and emphysema.¹¹⁵

When looking closer into heart disease and cancer deaths for males and females, heart failure, other forms of heart disease, and other forms of chronic ischemic heart disease are the top contributors to heart disease death. For cancer deaths, cancers of the trachea, bronchus, and lungs, or neoplasms are in the top contributors for males and females. Males also specifically have prostate cancer as a main contributor while females specifically have breast cancer as a main contributor.¹¹⁵

More than 1 in 4 Community Health Assessment (CHA) Survey respondents from Sugar Creek, Lake Lotawana, Sibley, Grandview, Independence, Raytown, and Lee's Summit reported that cancer was a significant or moderate problem in their communities.

TOP CAUSES OF DEATH IN EJC, 2016-2020

RANK	CAUSE OF DEATH	RATE
1	Heart Disease	178.57
2	Cancer	175.51
3	Chronic lower respiratory diseases	47.48
4	Accidents (unintentional injuries)	47.03
5	Stroke (cerebrovascular diseases)	39.64

Table 12: Eastern Jackson County Top Five Causes of Death per 100,000 residents, 2016-2020.

Source: DHSS - MOPHIMS - Death MICA.

Death rates are annualized per 100,000 residents and are age adjusted to the U.S. 2000 standard population.

TOP CAUSES OF DEATH IN EJC, 2020

RANK	CAUSE OF DEATH	RATE
1	Heart Disease	189.33
2	Cancer	161.08
3	COVID-19	70.45
4	Accidents (unintentional injuries)	56.51
5	Stroke (cerebrovascular diseases)	45.86

Table 13: Eastern Jackson County Top Five Causes of Death per 100,000 residents, 2020.

Source: DHSS - MOPHIMS - Death MICA.

Death rates are annualized per 100,000 residents and are age adjusted to the U.S. 2000 standard population.

LEADING CAUSES OF DEATH AMONG MALES AND FEMALES IN EJC, 2016-2020					
MALE			FEMALE		
RANK	CAUSE OF DEATH	CRUDE RATE	RANK	CAUSE OF DEATH	CRUDE RATE
1	Heart Disease	196.70	1	Cancer	168.80
2	Cancer	182.66	2	Heart Disease	161.57
3	COVID-19	57.39	3	Chronic lower respiratory disease	51.35
4	Accidents (unintentional injuries)	43.35	4	Stroke (cerebrovascular diseases)	48.17
5	Stroke (cerebrovascular diseases)	30.55	5	Accidents (unintentional injuries)	37.32

Table 14: Eastern Jackson County Top Five Causes of Death for Males and Females per 100,000 residents, 2016-2020.

Source: DHSS - MOPHIMS - Death MICA.

Death rates are annualized per 100,000 residents and are age adjusted to the U.S. 2000 standard population.

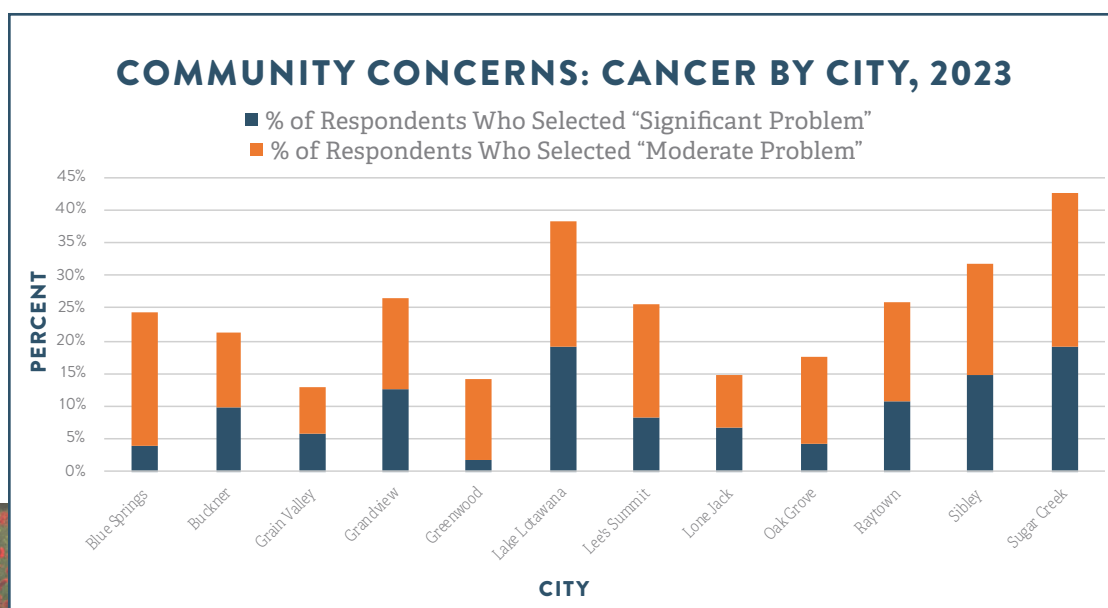


Figure 135: Eastern Jackson County 2023 Community Health Assessment (CHA) Survey Responses by City: 'Significant' or 'Moderate' Problems with Cancer within the Community.

Source: Jackson County Public Health; 2023 CHA Survey.

LEADING CAUSES OF DEATH BY RACE AND ETHNICITY

Mortality data from MDHSS is only available by race for Black and White residents of EJC. When looking at leading causes of death by race, heart disease and cancer are the top causes of death for both Black and White residents. Stroke and accidents also appear in the top five leading causes for death for Black and White individuals, though at different rates. However, chronic lower respiratory disease is only a leading cause of death among White individuals and homicide is only a leading cause of death among

Black individuals. Homicide is not a leading cause of death for EJC overall, which indicates that homicide disproportionately affects Black residents of EJC.¹¹⁵

Kidney disease and suicides are within the leading causes of death for Hispanic/Latino individuals in EJC, but do not appear in EJC's overall leading causes of death, nor in White or Black individuals' leading causes of death. Hispanic/Latino EJC residents are dying from kidney disease and suicide at disproportionate rates.¹¹⁵

CAUSE OF DEATH PER 100,000 BY RACE, 2016-2020				
	WHITE		BLACK	
RANK	CAUSE	RATE	CAUSE	RATE
1	Heart Disease	199.94	Heart Disease	160.95
2	Cancer	198.80	Cancer	139.12
3	Chronic Lower Respiratory Disease	55.12	Stroke	44.92
4	Accidents	50.94	Accidents	43.04
5	Stroke	42.86	Homicide	38.68

Table 15: Eastern Jackson County Top Five Causes of Death by Race and Ethnicity per 100,000 residents, 2016-2020.

Source: DHSS - MOPHIMS - Death MICA.

Death rates are annualized per 100,000 residents and are age adjusted to the U.S. 2000 standard population.

CAUSE OF DEATH PER 100,000 BY ETHNICITY, 2016-2020				
	NON-HISPANIC		HISPANIC*	
RANK	CAUSE	RATE	CAUSE	RATE
1	Heart Disease	190.92	Cancer	41.04
2	Cancer	187.61	Heart Disease	36.79
3	Chronic Lower Respiratory Disease	50.90	Accidents	35.38
4	Accidents	48.64	Kidney Disease	19.81
5	Stroke	42.50	Suicide	15.57

Table 16: Eastern Jackson County Top Five Causes of Death by Ethnicity per 100,000 residents, 2016-2020.

Source: DHSS - MOPHIMS - Death MICA.

Death rates are annualized per 100,000 residents & age adjusted to the US 2000 standard population.

*Data by ethnicity should be used with caution; Hispanic origin is underreported on Missouri death certificates.

LEADING CAUSES OF DEATH BY AGE

When looking at the leading causes of death by age, children under 1 year of age are most likely to die from conditions that originated during the perinatal period, accidents/unintentional injuries, and congenital abnormalities. While children and youths between the ages of 1-17 have comparatively low death rates, the top three causes of death include accidents/unintentional injury, suicide, and homicide. For people ages 18 to 24 years old and 25 to 44 years

old, accidents and suicide are similarly frequent causes of deaths. People ages 25 to 64 experience similar leading causes of death, including cancer and heart disease, while individuals ages 65 and older also die from chronic lower respiratory diseases. However, people ages 45 to 64 die more frequently from accidents and suicide compared to people ages 65 and older, who die more frequently from stroke and Alzheimer's disease in EJC. Rates of suicide remain fairly constant amongst ages 18 to 64.¹¹⁵

MAIN CAUSES OF DEATH PER 100,000 BY AGE, 2016-2020												
RANK	<1 YR	RATE	1-17 YRS	RATE	18-24 YRS	RATE	25-44 YRS	RATE	45-64 YRS	RATE	65+ YRS	RATE
1	Conditions originating in the perinatal period	256.69	Accidents	4.8	Accidents	43.13	Accidents	43.17	Cancer	182.25	Heart Disease	1031.83
2	Congenital anomalies	96.26	Suicide	3.9	Homicide	32.34	Suicide	25.63	Heart Disease	119.15	Cancer	890.17
3	Accidents	83.42	Homicide	2.70	Suicide	25.88	Cancer	17	Accidents	44.61	Chronic Lower Respiratory	287.6
4			Other Diseases /conditions	2.4	Other Diseases /conditions	7.55	Heart Disease	14.84	Chronic Lower Respiratory	28.17	Stroke	248.43
5					Cancer/ Heart Disease*	5.39	Homicide	12.68	Suicide	26.41	Alzheimer's Disease	170.63

Table 17: Eastern Jackson County Top Five Causes of Death by Age per 100,000 residents, 2016-2020.

Source: DHSS - MOPHIMS - Death MICA.

Death rates are annualized per 100,000 residents and are age adjusted to the U.S. 2000 standard population.

*Cancer and Heart Disease have the same rate per 100,000 residents within this age group and therefore are both ranked 5th.

ACCIDENTS AND UNINTENTIONAL INJURIES

From 2016-2020, 630 EJC residents died due to unintentional injuries. In 2020 alone, there were 154 accidental/unintentional injury deaths, the highest number in the past five years.¹¹⁵ The main contributors to this increase were falls, accidental poisonings, and exposure to noxious substances, including opioids and other illegal drugs, legal drugs taken accidentally or at the wrong dosage, and unanticipated effects from legal drugs for medical or non-medical related reasons.^{184,115}



CAUSE OF DEATH BY ACCIDENTS AND UNINTENTIONAL INJURY, 2016-2020					
MALE			FEMALE		
RANK	CAUSE OF DEATH	RATE	RANK	CAUSE OF DEATH	RATE
1	Accidental Poisoning and exposure to noxious substances	17.9	1	Falls	14.46
2	Motor Vehicle Accidents	16.04	2	Accidental Poisoning and exposure to noxious substances	9.84
3	Falls	12.5	3	Motor Vehicle Accidents	5.64
4	Other/unspecific non-transportation accidents	6.94	4	Other/unspecific non-transportation accidents	5.21
5	Accidental drowning and submersion	1.54*	5	Accidental drowning and submersion	1.01*

Table 18: Eastern Jackson County Top Five Causes of Death by Accidental or Unintentional Injury by Sex per 100,000 residents, 2016-2020.

Source: DHSS - MOPHIMS - Death MICA.

Death rates are annualized per 100,000 residents and are age adjusted to the U.S. 2000 standard population.

*Rate is unreliable and should be used with caution; numerator less than 20.

CHRONIC ILLNESS AND DISEASE

According to the CDC, chronic diseases are “conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both,” such as cancers and heart disease – two of the leading causes of death in the United States.¹⁸⁵ Behaviors such as tobacco use, secondhand smoke exposure, poor nutrition, physical inactivity, and excessive alcohol use can contribute to chronic disease. It is estimated that in the US, six in ten adults have a chronic disease.¹⁸⁵

The top three most prevalent chronic illnesses in EJC are arthritis (1 in 4 people), diabetes (1 in 10 people), and asthma (1 in 10 people). Prevalence

for arthritis was highest in Lake Tapawingo, Sugar Creek, and Levasy. Prevalence for diabetes and asthma was highest in Sugar Creek, Grandview, and Raytown.¹²⁸

Other chronic illnesses which are prevalent in EJC communities include chronic obstructive pulmonary disease, or COPD (7.15 per 100 people), cancer (6.91 per 100 people), heart disease (5.63 per 100 people), and stroke (2.87 per 100 people).¹²⁸

Over one-third of CHA Survey respondents from Sugar Creek, Buckner, Lake Lotawana, Raytown, and Grandview saw chronic illnesses as a significant or moderate problem in their communities. Most of these cities also had higher prevalence of chronic disease.¹²⁸

CITIES WITH HIGHEST PREVALENCE (PER 100 RESIDENTS) OF OTHER CHRONIC CONDITIONS, 2020							
COPD		CANCER		HEART DISEASE		STROKE	
Sugar Creek	10.5	Lake Tapawingo	9.8	Sugar Creek	7.6	Sugar Creek	3.8
Levasy	8.3	Levasy	8	Lake Tapawingo	7.4	Raytown	3.7
Raytown	8.2	Lake Lotawana	7.7	Levasy	6.8	Grandview	3.4

Table 19. Eastern Jackson County Cities with Highest Prevalence per 100 residents of Other Chronic Conditions, 2020.

Source: Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease and Health Promotion, Division of Population Health.

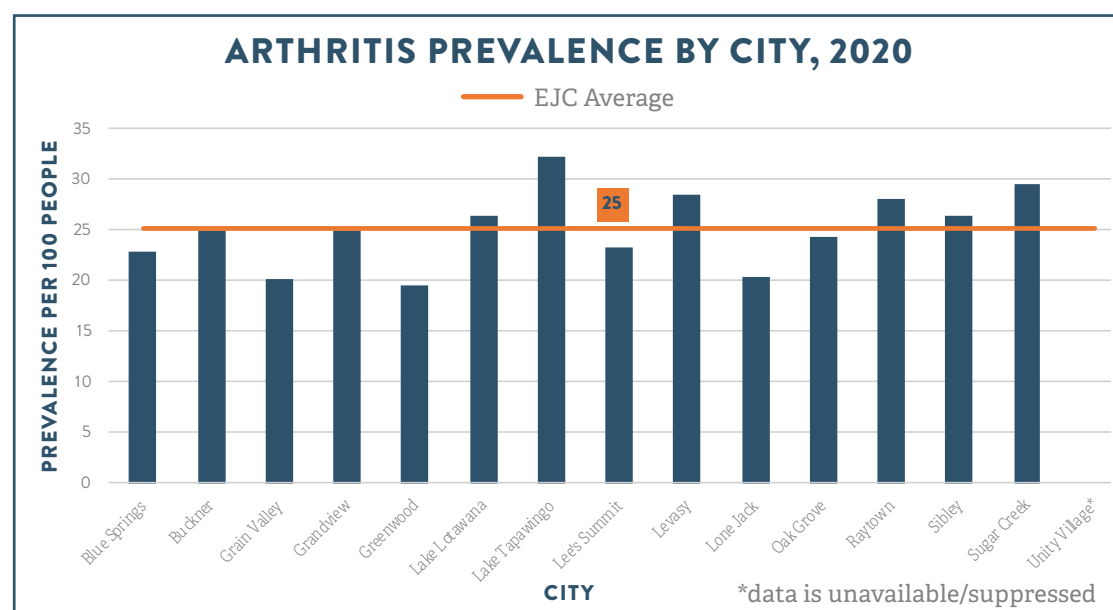


Figure 136. Eastern Jackson County Arthritis Prevalence by City, 2020.

Source: CDC; PLACES, 2020.

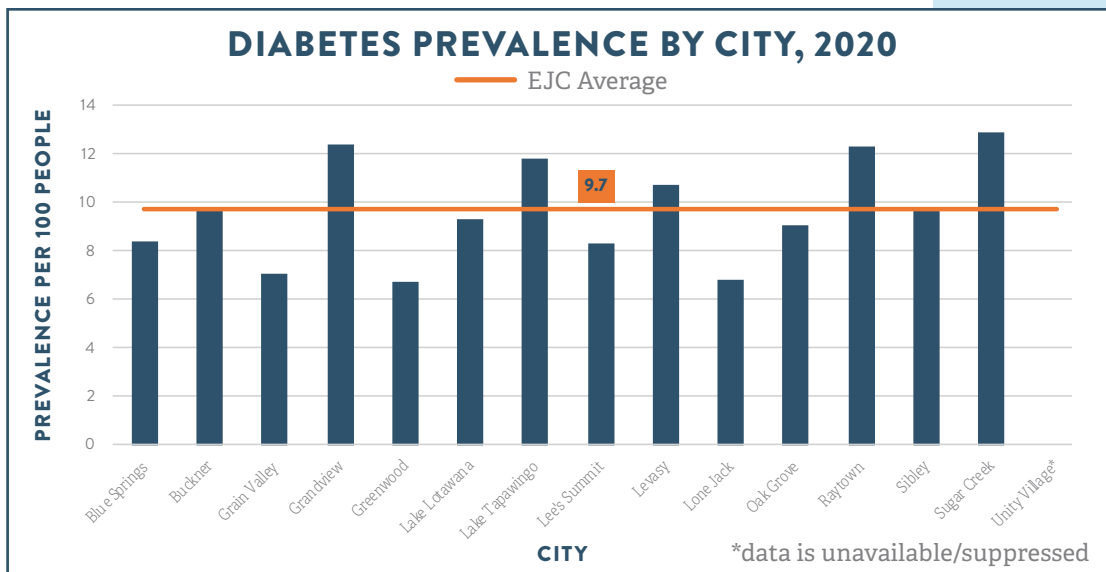


Figure 137.
Eastern Jackson
County Diabetes
Prevalence by
City, 2020.

Source: CDC;
PLACES, 2020.

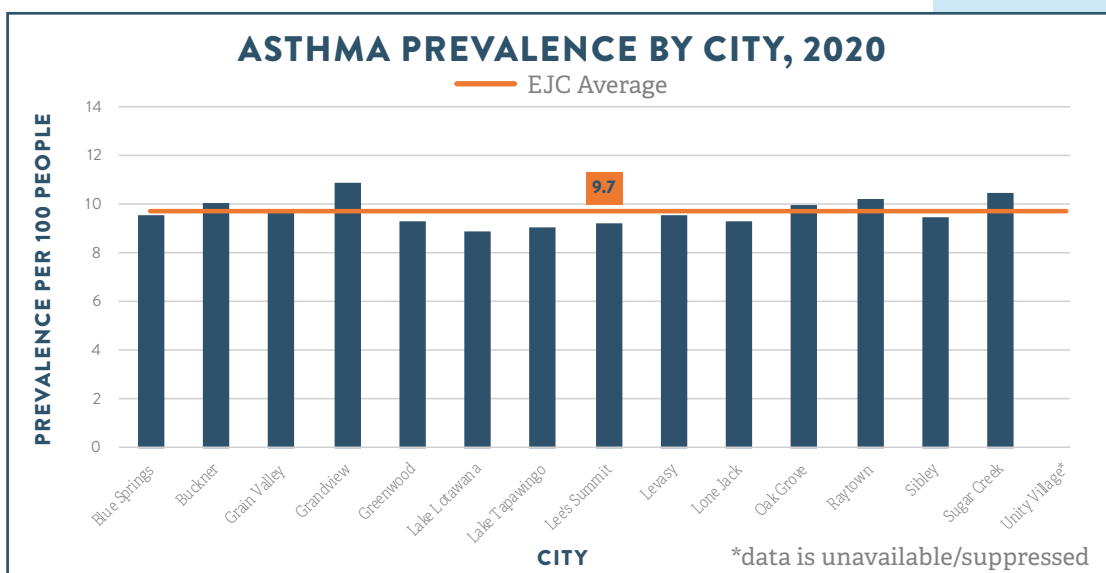


Figure 138.
Eastern Jackson
County Asthma
Prevalence by
City, 2020.

Source: CDC;
PLACES, 2020.

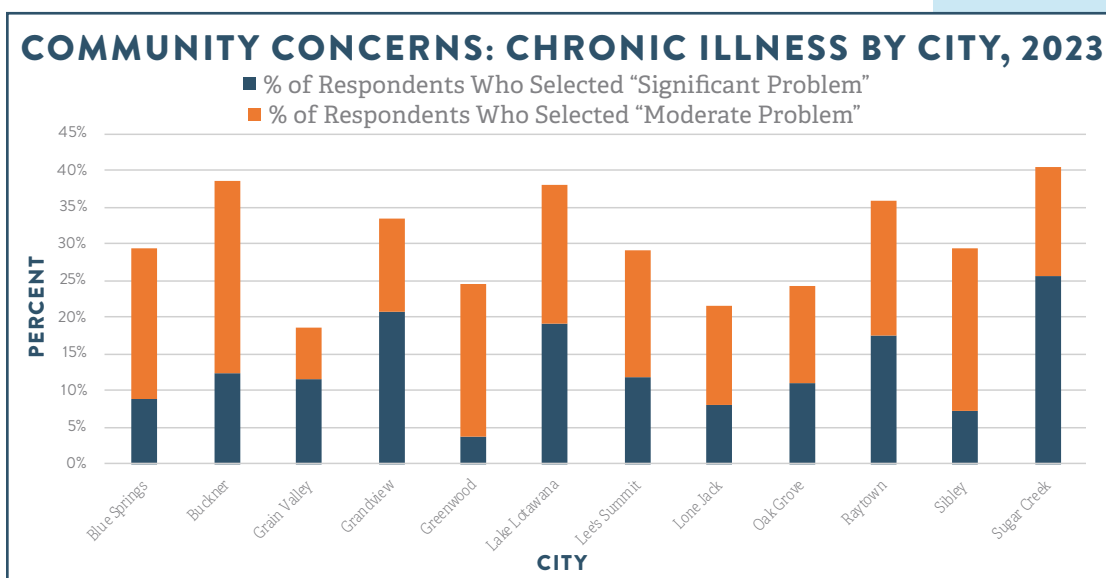


Figure 139:
Eastern Jackson
County 2023
Community
Health
Assessment
(CHA) Survey
Responses by
City: 'Significant'
or 'Moderate'
Problems with
Chronic Illness by
City.

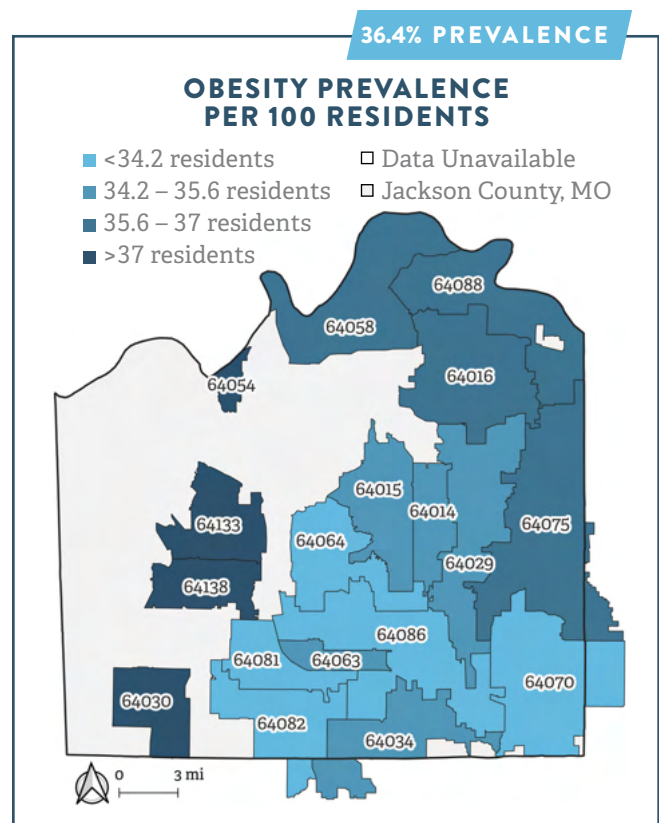
Source: Jackson
County Public
Health; 2023 CHA
Survey

OBESITY

Obesity is a very common and serious chronic disease in both adults and children that continues to increase within the United States. Obesity can lead to Type 2 diabetes, heart disease, certain cancers, and other chronic diseases and illnesses. Some behavioral factors influencing rates of obesity include a lack of physical activity and poor diets.¹⁸⁶ Improving rates of physical activity and healthier diets can be impacted by the resources available within a community such as access to parks or other safe outdoor areas and access to nutritional food sources.¹⁸⁷ Within EJC, a higher prevalence of obesity was observed in the following ZIP Codes: 64054 (Sugar Creek), 64133 & 64138 (Raytown), and 64030 (Grandview).¹²⁸

Figure 140. Eastern Jackson County
Prevalence (per 100 residents) of
Obesity by ZIP Code, 2020.


Source: CDC PLACES.





PART THREE —

Community Policies & Assets



“Our neighborhood really looks out for one another. After surgery, our neighbors checked on us daily and brought us food. Once when my neighbor was hospitalized, we all took turns caring for her lawn. We are a strong community.”

EJC COMMUNITY MEMBER
2023 COMMUNITY HEALTH ASSESSMENT SURVEY,
EASTERN JACKSON COUNTY

Policy Scan

WHAT IS IT?

This section provides a baseline overview of the extent to which municipalities in Eastern Jackson County (EJC) have adopted specific policies. By establishing this baseline, it becomes a valuable tool for driving health policy transformation within communities while also providing insights into the overall state of public health and legal protections for community health. This scan addresses critical policies that each municipality – to some extent – could adopt, including affordable housing, Complete Streets, earned sick leave, eco-friendly purchasing, flavored tobacco restrictions, accessible greenspace, healthy procurement, healthy rental housing, accessible pre-K, legal support for renters, safer alcohol sales, and smoke-free indoor air.

WHY IS IT IMPORTANT?

These policies center public health and range from starting points – such as adopting tactics to increase greenspaces as part of citywide strategic planning documents – to fully developed municipal programs or departments – like establishing legal support for renters, also known as right to counsel. These policies can significantly improve the health of EJC communities. Policies can improve community health by reducing or eliminating unhealthy conditions and addressing the root causes of health disparities and inequity.

KEY FINDINGS

- *No jurisdictions have policies for earned sick leave (which is preempted by state law), flavored tobacco restrictions, high-quality and accessible pre-kindergarten education, or legal support for renters facing eviction.*¹⁸⁸⁻¹⁹¹
- *Overall, CHA Survey respondents showed the highest support for Complete Streets policies (79.6%), rental health and safety requirements (77.2%), and accessible pre-kindergarten education (74.3%).*^{190,192,193}
- *Blue Springs, Grandview, and Lee's Summit have Complete Streets or similar policies in place. However, 79.6% of Community Health Assessment (CHA) Survey respondents supported Complete Streets policies. Respondents from Blue Springs, Grain Valley, Grandview, Lee's Summit, and Raytown showed over 80% support.*¹⁹²
- *Some municipalities have initiatives in place to address these community health issues, but lack formal policies stipulated in ordinances.*

Affordable Housing

WHAT IS IT?

Cities with affordable housing trusts invest in dedicated funds for preserving, maintaining, and building affordable housing for everyone.¹⁹⁴

WHY IS IT IMPORTANT?

About 42% of renters in Eastern Jackson County (EJC) are cost-burdened – meaning they spend more than 30 percent of their income on housing.¹⁹⁵ Affordable housing works to reduce costs associated with rent by providing municipal investments in safe and affordable housing. These policies can also update homes to make them more energy efficient.¹⁹⁶

Table 20: Eastern Jackson County Policy Scan: Affordable Housing.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

*Lee's Summit has a housing authority.¹⁹⁴

AFFORDABLE HOUSING POLICIES IN EJC	
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?
Blue Springs	NO
Buckner	NO
Grain Valley	NO
Grandview	NO
Greenwood	NO
Lake Lotawana	NO
Lee's Summit	NO*
Lone Jack	NO
Oak Grove	NO
Raytown	NO
Sugar Creek	NO
Jackson County	NO



Complete Streets

WHAT IS IT?

Complete Streets accommodate many forms of transportation – walking, biking, public transportation, and cars – while ensuring the safety of pedestrians, bicyclists, and commuters. These policies focus on street lighting, landscaping, sidewalk quality and coverage, traffic calming measures, and connectivity of pedestrian walkways, bike lanes, and crosswalks.¹⁹²

COMPLETE STREETS POLICIES IN EJC		
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	YES	81.3%
Buckner	NO	70.8%
Grain Valley	NO	83.3%
Grandview	YES	83.1%
Greenwood	NO	72.4%
Lake Lotawana	NO	66.7%
Lee's Summit	YES	84.7%
Lone Jack	NO	73.0%
Oak Grove	NO	76.9%
Raytown	NO*	80.0%
Sugar Creek	NO	78.7%
Jackson County	NO	79.6%

WHY IS IT IMPORTANT?

Too many people experience tragedy on our streets and roads because many are not built to serve the different purposes for which people use them. Complete Streets provide benefits for all by making streets more walkable and bikeable. They help connect communities with increased accessibility, and they work to ensure safe and convenient forms of transportation. These policies can prevent chronic disease by increasing physical activity, reducing and preventing motor-vehicle-related injuries, and improving environmental health.¹⁹²

Table 21: Eastern Jackson County Policy Scan and City Support: Complete Streets.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

*Raytown does not have a formal policy, but has done some work with Mid-America Regional Council (MARC). MARC is a nonprofit organization that encompasses both city and county governments as well as the metropolitan planning organization for the bistate Kansas City Region^{209,210}

Earned Sick Leave

WHAT IS IT?

Earned sick leave ordinances require employers to allow employees to accrue and use dedicated paid time off for illness or injury for themselves, or to take care of children or parents. Employees can use this dedicated paid leave for time to stay home when sick or to see a doctor without concern for lost wages or job loss.¹⁸⁸

WHY IS IT IMPORTANT?

Earned sick leave policies reduce the spread of potentially contagious illness, which can decrease workplace productivity. Earned sick leave policies also promote employment and employee protections, income stability, and save money in health costs.¹⁸⁸

PREEMPTION

The state of Missouri preempts municipalities, or political subdivisions, from requiring employers to provide a set minimum wage or employee benefits – which under state statute includes sick leave.²⁰⁹

Preemption is where the state does not allow local governments to adopt certain policies for their city or town. Since Missouri preempts these policies, it is the responsibility of the state government to adopt earned sick leave at the state level.

EARNED SICK LEAVE POLICIES IN EJC		
CITY ^{197–208}	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	NO <i>Preempted by Missouri State Law</i>	68.9%
Buckner		69.2%
Grain Valley		61.9%
Grandview		70.1%
Greenwood		62.5%
Lake Lotawana		66.7%
Lee’s Summit		71.5%
Lone Jack		62.2%
Oak Grove		62.6%
Raytown		64.2%
Sugar Creek		70.2%
Jackson County		67.7%

Table 22: Eastern Jackson County Policy Scan and City Support: Earned Sick Leave.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

Eco-Friendly Purchasing

WHAT IS IT?

Eco-friendly purchasing policies help to reduce or end the purchasing of products with toxic chemicals for city buildings. Cities can lead the way by reducing the amount of toxic chemical-laden products in municipal buildings.²¹¹

WHY IS IT IMPORTANT?

People spend much of their days inside and toxic chemicals pose short-term and long-term health problems. Health care costs from daily exposure to chemicals exceeds \$340 billion.²¹¹

Table 23: Eastern Jackson County Policy Scan and City Support: Eco-Friendly Purchasing.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

* Raytown has an ordinance requiring a comprehensive purchasing manual, which may or may not encourage or incentivize eco-friendly purchasing.

ECO-FRIENDLY PURCHASING POLICIES IN EJC		
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	NO	71.5%
Buckner	NO	67.7%
Grain Valley	NO	59.5%
Grandview	NO	74.0%
Greenwood	NO	71.4%
Lake Lotawana	NO	71.4%
Lee's Summit	NO	76.7%
Lone Jack	NO	67.6%
Oak Grove	NO	70.3%
Raytown	NO*	69.2%
Sugar Creek	NO	78.7%
Jackson County	YES	71.6%

Flavored Tobacco Restrictions

WHAT IS IT?

E-cigarette and tobacco companies target young people by marketing flavored vape pods and tobacco products. Flavored tobacco restrictions limit which flavored tobacco products can be sold.²

WHY IS IT IMPORTANT?

Young people disproportionately use flavored tobacco products, and they are often the entry point into smoking. Smoking poses dangerous health risks, particularly to young people. These policies reduce disease and save money by reducing health conditions associated with tobacco use.¹⁸⁹

Table 24: Eastern Jackson County Policy Scan and City Support: Flavored Tobacco Restrictions.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

FLAVORED TOBACCO RESTRICTION POLICIES IN EJC		
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	NO	53.9%
Buckner	NO	47.7%
Grain Valley	NO	50.0%
Grandview	NO	50.6%
Greenwood	NO	50.0%
Lake Lotawana	NO	42.9%
Lee's Summit	NO	61.4%
Lone Jack	NO	50.0%
Oak Grove	NO	42.9%
Raytown	NO	48.3%
Sugar Creek	NO	40.4%
Jackson County	NO	52.9%

Greenspace

WHAT IS IT?

Greenspace policies work to ensure access to open spaces including walking trails and public parks.²¹²

WHY IS IT IMPORTANT?

Neighborhoods without greenspace experience hotter temperatures, and people without access to open spaces have fewer opportunities for physical activity. These policies can make climate resistant spaces and help reduce health problems from lack of physical activity.²¹²

Table 25: Eastern Jackson County Policy Scan and City Support: Greenspace.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

*Blue Springs has denoted a plan for increased greenspace in strategic planning documents but does not have a formal ordinance.¹⁹⁷

**Lee's Summit Parks and Recreation department has a goal of providing park access within a ½ mile of every residence in their Master Plan.²⁶

GREENSPACE POLICIES IN EJC		
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	NO*	66.8%
Buckner	NO	61.5%
Grain Valley	NO	66.7%
Grandview	NO	71.4%
Greenwood	NO	60.7%
Lake Lotawana	NO	42.9%
Lee's Summit	NO**	70.9%
Lone Jack	NO	44.6%
Oak Grove	NO	51.6%
Raytown	NO	61.7%
Sugar Creek	NO	78.7%
Jackson County	NO	64.0%

Healthy Procurement

WHAT IS IT?

Healthy food procurement policies require cities to ensure that all food sold or served on city property meets basic national health standards.²¹⁴

WHY IS IT IMPORTANT?

Local government is often one of the largest employers in a community. Additionally, municipal buildings and spaces are often hubs where people gather. Healthy food standards in cafeterias and vending machines ensure people have access to healthy food choices. These policies decrease the amount of unhealthy food purchased.²¹⁴

Table 26: Eastern Jackson County Policy Scan and City Support: Healthy Procurement.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

* Raytown has an ordinance requiring a comprehensive purchasing manual, which may or may not encourage or incentivize healthy food procurement.

HEALTHY PROCUREMENT POLICIES IN EJC	
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?
Blue Springs	NO
Buckner	NO
Grain Valley	NO
Grandview	NO
Greenwood	NO
Lake Lotawana	NO
Lee's Summit	NO
Lone Jack	NO
Oak Grove	NO
Raytown	NO*
Sugar Creek	NO
Jackson County	NO

Healthy Rental Housing

WHAT IS IT?

Healthy rental policies ensure minimum safety standards and provide avenues for tenants to have recourse when their landlords do not meet these safety standards. Healthy rental policies may include provisions for the inspection of rental homes and licensing standards for listing rental homes.¹⁹³

WHY IS IT IMPORTANT?

Because most renters live in older homes than homeowners, tenants are more likely to have issues with plumbing and heating. Healthy rental policies ensure that people have a safe environment to live in and reduce the health risks associated with dangerous rental units.¹⁹³

HEALTHY RENTAL HOUSING POLICIES IN EJC		
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	NO	79.3%
Buckner	YES*	81.5%
Grain Valley	NO	70.2%
Grandview	YES*	79.2%
Greenwood	NO**	78.6%
Lake Lotawana	NO	71.4%
Lee's Summit	NO	80.7%
Lone Jack	NO	77.0%
Oak Grove	NO	75.8%
Raytown	YES*	70.0%
Sugar Creek	YES*	78.7%
Jackson County	NO	77.2%

Table 27: Eastern Jackson County Policy Scan and City Support: Healthy Rental Housing.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

*Buckner, Grandview, Raytown, and Sugar Creek all require inspections before rental units can receive a permit/certificate and require a routine inspection. Cities can take this a step further by allowing tenants to request an inspection.

**Greenwood sets minimum safety standards for all rental units but does not require routine inspections.

Accessible Pre-K

WHAT IS IT?

Accessible pre-kindergarten, or pre-K, provides early education experiences to all families within a jurisdiction, regardless of their ability to pay. Quality early education ensures adequate teacher to student ratios, teacher qualifications, and continuous improvement systems. The National Institute for Early Education Research established a list of ten benchmarks to assess quality pre-K programs.²¹⁵

WHY IS IT IMPORTANT?

Accessible pre-K has been proven to improve school readiness and academic achievement, while helping to eliminate the achievement gap between low-income and high-income children. Children in preschool are also more likely to visit the doctor, receive appropriate immunizations, and receive dental care.¹⁹⁰

ACCESSIBLE PRE-K POLICIES IN EJC		
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	NO	79.3%
Buckner	NO	76.9%
Grain Valley	NO	71.4%
Grandview	NO	75.3%
Greenwood	NO	73.2%
Lake Lotawana	NO	71.4%
Lee's Summit	NO	77.5%
Lone Jack	NO	79.7%
Oak Grove	NO	69.2%
Raytown	NO	70.0%
Sugar Creek	NO	70.2%
Jackson County	NO	74.9%

Table 28: Eastern Jackson County Policy Scan and City Support: Accessible Pre-K.
Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023



Legal Support for Renters

WHAT IS IT?

Legal support for renter programs (sometimes called Right to Counsel programs) ensure that tenants have access to legal representation during eviction proceedings.^{216,217}

WHY IS IT IMPORTANT?

These policies guarantee that landlords and courts follow relevant procedures when attempting to evict someone from their home by guaranteeing that a tenant has the necessary legal support. Nationally, 81% of landlords have legal representation in eviction hearings, while only 3% of tenants have a lawyer. These policies reduce homelessness and ensure stability for families and children. Housing stability is vital to mental health of parents and children.¹⁹¹

Table 29: Eastern Jackson County Policy Scan and City Support: Legal Support for Renters.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

LEGAL SUPPORT FOR RENTERS IN EJC		
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	NO	55.4%
Buckner	NO	47.7%
Grain Valley	NO	40.5%
Grandview	NO	62.3%
Greenwood	NO	46.4%
Lake Lotawana	NO	33.3%
Lee's Summit	NO	54.6%
Lone Jack	NO	39.2%
Oak Grove	NO	42.9%
Raytown	NO	53.3%
Sugar Creek	NO	68.1%
Jackson County	NO	51.5%



Safer Alcohol Sales

WHAT IS IT?

Safer alcohol sales policies can range from licensing to zoning changes – in which cities can specify the number, density, and location of alcohol outlets in a given area.²¹⁸

WHY IS IT IMPORTANT?

Research has shown that neighborhoods with high concentrations of alcohol outlets are linked to heavy drinking and higher rates of negative consequences such as violence, alcohol-impaired driving, neighborhood disruption, and public nuisance. Reducing the density of alcohol outlets can lead to safer communities with fewer drinking-related crimes, accidents, and underage drinking.²¹⁸

SAFE ALCOHOL SALES POLICIES IN EJC		
CITY ^{197–208}	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	YES	45.6%
Buckner	YES	36.9%
Grain Valley	YES	33.3%
Grandview	YES	41.6%
Greenwood	YES*	37.5%
Lake Lotawana	YES	42.9%
Lee's Summit	YES	45.4%
Lone Jack	YES	35.1%
Oak Grove	YES	37.4%
Raytown	YES	55.0%
Sugar Creek	YES	44.7%
Jackson County	NO	44.1%

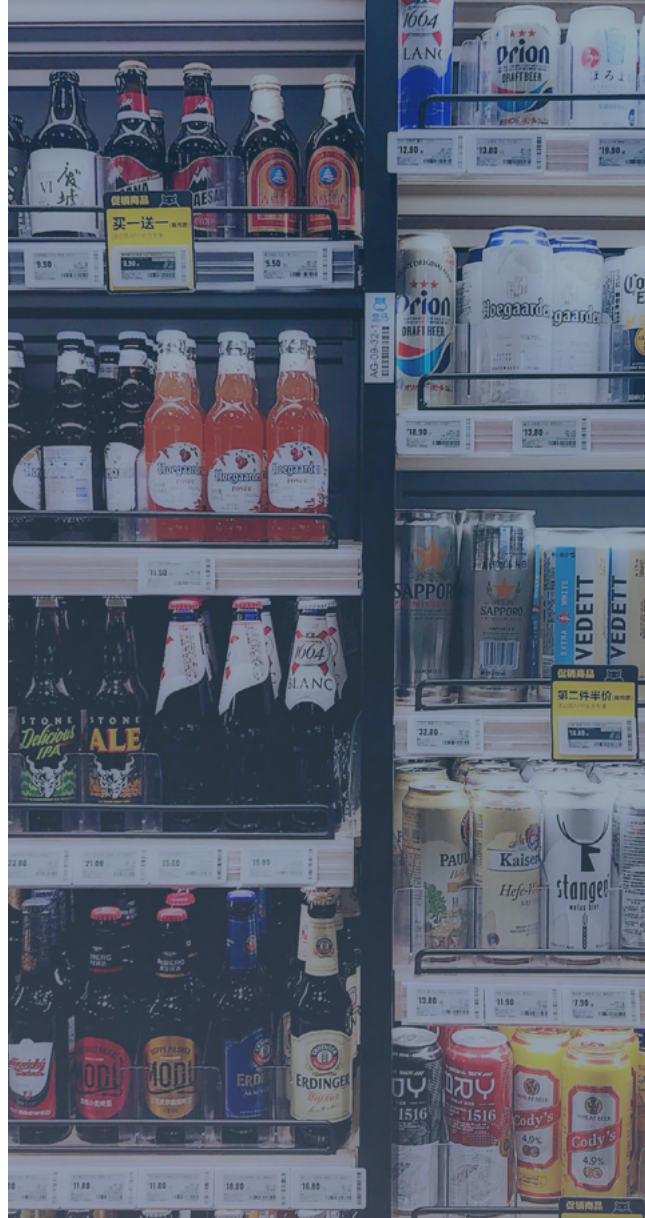


Table 30: Eastern Jackson County Policy Scan and City Support: Safer Alcohol Sales.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

All EJC cities have restrictions on alcohol retail licenses being issued near a church or school; the minimum allowed distance between a retailer and a church/school varies by city. Some cities also restrict the sale of alcohol on Sundays.

*Greenwood also gives the Director of Liquor Control the discretion to consider the density of other alcohol licenses in the area when considering a new application.

Smoke-Free Indoor Air

WHAT IS IT?

Smoke-free indoor air policies prohibit smoking in indoor spaces and designated public areas. With the passage of recreational marijuana in Missouri, cities may choose to include marijuana in their smoke-free indoor air policies.²¹⁹

WHY IS IT IMPORTANT?

Smoke-free indoor air policies are essential to protect non-smokers from the harmful side effects of secondhand smoke, while simultaneously reducing smokers’ consumption of tobacco.³² According to the CDC, smoke-free policies do not harm businesses, and in some cases may even improve revenues.²²⁰

SMOKE-FREE INDOOR AIR POLICIES IN EJC		
CITY ¹⁹⁷⁻²⁰⁸	POLICY IN PLACE?	CITY SUPPORT
Blue Springs	YES	74.1%
Buckner	NO	58.5%
Grain Valley	NO*	63.1%
Grandview	YES	58.4%
Greenwood	NO**	58.9%
Lake Lotawana	NO	81.0%
Lee’s Summit	YES	77.7%
Lone Jack	NO**	70.3%
Oak Grove	NO**	65.9%
Raytown	NO	65.0%
Sugar Creek	NO**	63.8%
Jackson County	NO	69.5%



Table 31: Eastern Jackson County Policy Scan and City Support: Smoke-Free Indoor Policy.

Source: Jackson County Public Health, Community Health Assessment (CHA) Survey, 2023

*Grain Valley only prohibits smoking in city buildings.

**Greenwood, Lone Jack, Oak Grove, and Sugar Creek all prohibit smoking in some public spaces, but allow smoking in designated areas and in certain public businesses.



Community Resources

COMMUNITY RESOURCES

This community resource list was compiled to direct community members to available services relevant to problems identified through the Community Health Assessment (CHA), and additionally to highlight the profound quantity of assets in Eastern Jackson County (EJC) communities. Staff began by referring to organizations JCPH had previously worked with or is currently working with as a part of Community Health Improvement Process (CHIP) efforts. After that, a broader review was conducted to record additional community resources available to EJC residents.

988 NATIONAL SUICIDE & CRISIS LIFELINE

988lifeline.org

988 is the national suicide prevention and crisis support lifeline. Youth and adults in the U.S. can call or text 988 24-hours a day for support from a trained crisis specialist. Services are available in English and Spanish.

CENTER FOR HUMAN SERVICES

chs-mo.org

Center for Human Services serves people with disabilities in Jackson County with employment services and service coordination.

CHARLIE'S HOUSE

charlieshouse.org

Charlie's House provides resources and education to families and service providers to prevent household injuries.

CHILDREN'S MERCY HOSPITAL

childrensmercy.org

Children's Mercy Hospital is the regional leader in infant and child healthcare, providing world-class specialized pediatric care.

CLIMATE ACTION KC

climateactionkc.com

Climate Action KC serves the Kansas City region with the goal of supporting elected officials, businesses and individuals to achieve a net zero greenhouse gas emissions community. As an advocacy group, they also work on developing legislative platforms across the state line and connecting people across the metro area.

COMMUNITY ASSISTANCE COUNCIL

cackc.org

CAC provides services ranging from meals and hygiene supplies to rent assistance and vital documents to Jackson County residents.

**COMPREHENSIVE MENTAL
HEALTH SERVICES**

thecmhs.com

Comprehensive Mental Health Services offers a range of mental health services and substance use disorder treatment to youth and adults throughout Jackson County.

COREY'S NETWORK

coreysnetwork.org

Corey's Network works to support surviving victims of homicide with wrap-around resources and counseling.

EITAS

eitas.org

Eitas serves people with developmental disabilities by providing economic opportunities, transportation, case management, and community trainings.

FIRST CALL

firstcallkc.org

First Call provides 24/7 crisis support for people who use drugs and people in recovery from substance use disorder, as well as programming and support services, free Naloxone, and prevention education for youth.

GILDA'S HOUSE

gildasclubkc.org

Gilda's House Kansas City is a local affiliate of the Cancer Support Network and provides support groups, individual counseling, and community for anyone impacted by cancer, including people who have been diagnosed with cancer, their families, children/youth, and healthcare professionals.

HARVESTERS

harvesters.org

Harvesters provides food assistance to Jackson County families in need. They can also assist with SNAP (food stamp) applications.

**HEARTLAND CENTER FOR
JOBS & FREEDOM**

jobsandfreedom.org

Heartland Center for Jobs & Freedom is a non-profit legal center that provides legal resources to renters and low-wage workers in Jackson County.

HEARTLAND TREE ALLIANCE

bridgingthegap.org

Heartland Tree Alliance (HTA) recognizes the power a healthy tree canopy holds for our greater Kansas City communities. HTA is working to not only plant trees in our communities, but also advocate for the infrastructure to support our community forest.

HOPE HOUSE

hopehouse.net

Hope House provides emergency shelter, counseling, and legal services to survivors of domestic violence and their children.

JACKSON COUNTY COMBAT
jacksoncountycombat.com

Jackson County COMBAT is the anti-crime tax serving Jackson County communities and funding a wide variety of programs to cut down on violence and crime.

JACKSON COUNTY PARKS
marc.org/regional-trails-bikeways-map

Across EJC, there are plentiful safe and accessible greenspaces and parks. The Mid America Regional Council has collected a map of parks and trails in the metro, including locations in EJC.

JACKSON COUNTY PUBLIC HEALTH
jcph.org

JCPH offers low-cost STI testing and treatment to Jackson County residents, as well as low-cost/free vaccinations against communicable diseases.

KANSAS CITY MUTUAL AID
linktr.ee/kcmutualaid

KCMA operates a platform that connects Jackson County residents in need of financial or materials support with donors in the community.

KC CARE HEALTH CENTER
kccare.org

KC CARE Health Center offers a variety of health services to the communities they serve, including communicable disease testing and treatment, and HIV treatment services using an innovative whole-person care model.

KC COMMON GOOD
kccommongood.org

KC Common Good works to address the root causes of violence and gun violence in the greater Kansas City area.

KC DIGITAL DRIVE
kcdigitaldrive.org

KC Digital Drive is establishing equity in broadband connectivity and reducing environmental impact across the Greater KC region including EJC.

KC HEALTHY KIDS
kchealthykids.org

KC Healthy Kids works to protect the health of children in the Kansas City area by providing food, mental health services, and youth advocates.

KC SCHOLARS
kcscholars.org

KC Scholars provides scholarships to Jackson County students to ensure they have equitable access to higher education.

KC TENANTS
kctenants.org

KC Tenants offers support and resources to renters in Jackson County.

LION HOUSE
lionhousekc.org

Lion House is a resource that offers a rapid re-housing program for members of the LGBTQ+ community.

MARC HEAD START
marcheadstart.org

The MARC Head Start program advances children's early education by offering wrap-around support and education before kindergarten.

**METROPOLITAN
ORGANIZATION TO
COUNTER SEXUAL ASSAULT
(MOCSA)**
mocsa.org

MOCSA provides counseling, legal services and advocacy, and crisis intervention for survivors of sexual assault or abuse, as well as prevention education to Jackson County schools.

**MID-AMERICA REGIONAL
COUNCIL AIR QUALITY
FORUM**
marc.org

The MARC Air Quality Forum is a group of decision makers and stakeholders across the region that tackle issues of air quality policy that affects our communities.

**MISSOURI CHILD CARE
SUBSIDY PROGRAM**
dss.mo.gov

The state of Missouri can provide financial assistance for childcare costs for eligible families.

MO HEALTHNET
mydss.mo.gov

MO HealthNet is Missouri's Medicaid program that also works with other programs across the state to bring affordable health care to community members.

NALOXONE AT JCPH
jcph.org

Naloxone kits are available at no cost from JCPH. Naloxone is a life-saving, over-the-counter medication that can reverse an opioid overdose.

NURTURE KC
nurturekc.org

Nurture KC is a community collaborative that is dedicated to reducing infant and maternal mortality while also improving family health. They have several programs that serve pregnant individuals and children up to 18 months old.

OUTLAW MUTUAL AID
outlawmutualaid.com

The Merry Outlaw began operating a mutual aid fund, Outlaw Mutual Aid, during the COVID-19 pandemic that connects individuals in need of direct financial assistance with donors in the community.

**PLANNED PARENTHOOD
HEALTH CENTER**

plannedparenthood.org

Planned Parenthood Health Center in Independence provides clinical services including family planning, testing for pregnancy and STIs, and other resources for people in EJC at a low cost.

**REDISCOVER MENTAL
HEALTH**

rediscovermh.org

ReDiscover Mental Health provides a wide range of mental health services and substance use disorder treatment to youth and adults throughout Jackson County, including the Show Me Zero Youth Suicide prevention initiative.

RIDEKC

ridekc.org

RideKC is the regional public transportation agency that operates bus lines, light rail, and microtransit services in the bi-state metropolitan area.

**SAMUEL U. RODGERS
HEALTH CENTER**

samrogers.org

Samuel U. Rodgers Health Center provides health care and dental services to residents of Jackson County regardless of their insurance status.

SAVE INC

saveinckc.org

Save INC. is an organization in Jackson County that offers emergency assistance and voucher programs to those experiencing housing insecurity.

**SHOW ME HEALTHY WOMEN
AT JCPH**

jcph.org

Show Me Healthy Women is a statewide program that supports breast and cervical cancer screenings for uninsured women ages 35-64.

**THE KANSAS CITY PHYSICAL
ACTIVITY PLAN**

kcphysicalactivityplan.org

The KCPA follows guidelines of the National Physical Activity Plan to ensure a more physically active and healthier Kansas City.

THE WHOLE PERSON

thewholeperson.org

The Whole Person serves people with disabilities in Jackson County by connecting them with necessary services, and advocates for accessibility and opportunity for people with disabilities.

**UNITED WAY OF GREATER
KANSAS CITY**

unitedwaygkc.org

United Way of Greater Kansas City's 211 resource directory connects Jackson County residents with a variety of resources, including rent, utility, and food assistance.

**UNIVERSITY HEALTH
BEHAVIORAL HEALTH –
LAKEWOOD COUNSELING**

universityhealthkc.org

University Health Behavioral Health – Lakewood provides outpatient counseling services to children and adults in Eastern Jackson County.

**UNIVERSITY HEALTH
DENTAL CLINIC –
LAKEWOOD**

universityhealthkc.org

University Health Dental Clinic at Lakewood Medical Center provides preventative dental care, as well as specialized services and emergency dental care.

**UNIVERSITY HEALTH
LAKEWOOD MEDICAL
CENTER**

universityhealthkc.org

University Health Lakewood Medical Center serves the Eastern Jackson County community with healthcare services ranging from primary care and family medicine to specialty and emergency care.

Acknowledgements & References

***Thank you** to all community partners, community members, organizations, and JCPH staff who contributed to this Community Health Assessment.*

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American Heart Association

American Medical Response (AMR)

BikeWalkKC

Blue Springs Police Department

Children's Services Fund of Jackson County

Central Jackson County EMS

Child Abuse Prevention Association (CAPA)

Children's Mercy Hospital

City of Grandview

City of Lee's Summit

City of Sugar Creek

Community Services League

Comprehensive Mental Health Services

Cornerstones of Care

Culture Journey LLC

Drumm Center for Children

Eitas

Faiths of Raytown

Full Employment Council

Giving the Basics

Grandview C-4 School District

Grandview Emergency Assistance Program

Greater Lee's Summit Health Care Foundation

Guadalupe Centers

Habitat for Humanity KC

Happy Bottoms

Harvesters

Heartland Center for Jobs & Freedom

Hillcrest Transitional Housing

Hope House

Hope Network of Raytown

Independence Housing Authority

Independence School District Family Services

Journey to New Life

Kanbe's Markets

Kansas City Chamber of Commerce

Kansas City Community Gardens

Kansas City Indian Center

Kansas City Medical Society Foundation

Latinx Education Collaborative

Lee's Summit Christian Church

Lee's Summit R-7 Head Start Program

Lee's Summit R-7 School District

Mattie Rhodes Center

Metropolitan Community College

Metropolitan Organization to Counter Sexual Assault (MOCSA)

Mid-America Regional Council (MARC)

Mid-Continent Public Library

Misión Alcance

Missouri Department of Social Services

MORE2

Nurture KC

Oak Grove School District

One Spirit United Methodist Church

Pet Resource Center

Preferred Family Healthcare

Raytown Fire & EMS

REACH Healthcare Foundation

Reconciliation Services

reStart

River of Refuge

St. Luke's East Hospital

Steppingstones / Every Child's Hope

Sunrise Movement KC

Swope Health

University of Missouri Extension

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Whole Parent Foundation

The Whole Person

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2023 Community Health Assessment (CHA) Survey

SECTION I: MY HEALTH

In this section, community members were asked to answer questions about their own health and their experiences related to individual and family health.

1. How would you rate your general overall health?

RESPONSES	COUNT	PERCENT
Poor	29	2%
Fair	212	13%
Good	595	38%
Very Good	543	35%
Excellent	143	9%
Missing	50	3%

2. In the past 30 days, how often have you felt emotionally “out of sorts,” such as stressed, anxious, or depressed?

RESPONSES	COUNT	PERCENT
0 days	500	32%
1-2 days	453	29%
3-5 days	264	17%
6-10 days	138	9%
11+ days	155	10%
Missing	62	4%

3. Between 2020 and today, have you or your household been evicted or forced to move out of a residence? Please choose all that apply.

RESPONSES	COUNT	PERCENT
Yes, my household was evicted.	6	0.5%
Yes, my household had to move due to housing costs.	21	1%
No, but I am worried about losing my housing in the future.	141	9%
No, this has not been a challenge for my household.	1344	85%
Other / Multiple Responses Selected	38	2%
Missing	22	1%

4. Think about the place where you live. Do you have problems with any of the following? Please choose all that apply.

**Responses reported in tables below exclude “None” and “Missing” responses.*

RESPONSES	COUNT	PERCENT
1-2 Issues	337	21%
3-4 Issues	125	8%
5-6 Issues	53	3%
7+ Issues	20	1%

RESPONSES	TOTAL COUNT
Missing or Non-Working CO Detector	138
Mold or Mildew	117
Peeling or Chipping Paint	110
Water Leaks	103
Handrails on All Stairs	82
Insect Infestation	79
Cracked or Broken Windows	75
Exterior Locks	64
Rodent Infestation	51

4. (continued) Think about the place where you live. Do you have problems with any of the following? Please choose all that apply.

**Responses reported in tables below exclude "None" and "Missing" responses.*

RESPONSES	TOTAL COUNT
Missing or Non-Working Smoke Detectors	51
Interior Locks	47
Guardrails on Balconies and Porches	44
Bedroom With No Windows	42
Address Not Visible From Street	40
Other	38
Inadequate Heat	30
Lead Paint or Pipes	28
Missing or Non-Working Oven	27
Missing or Non-Working Lights	25
Non-Working Sink, Toilet, or Shower	24
Retaliation from Landlord or Property Manager	20
Exposed Electrical Wires	15
Missing or Non-Working Hot Water	6

5. In the past 12 months, have you ever...

a. Avoided seeking medical care for yourself or a family member due to concern about medical bills?

RESPONSES	COUNT	PERCENT
Often	125	8%
Sometimes	335	21%
Never	1098	70%
Missing	14	1%

b. Avoided filling or refilling a prescription due to concerns about the cost of medications?

RESPONSES	COUNT	PERCENT
Often	65	4%
Sometimes	286	18%
Never	1209	77%
Missing	12	1%

c. Been worried that you or your household would run out of food before you had the money to buy more?

RESPONSES	COUNT	PERCENT
Often	64	4%
Sometimes	197	13%
Never	1294	83%
Missing	17	1%

d. Had to choose between buying groceries and paying another bill, such as utilities, medical bills, or gas/ transportation?

RESPONSES	COUNT	PERCENT
Often	67	4%
Sometimes	237	15%
Never	1249	79%
Missing	19	1%

e. Had to skip or miss medical appointments, meetings, work, or getting things needed for daily living due to a lack of reliable transportation?

RESPONSES	COUNT	PERCENT
Often	36	2%
Sometimes	135	9%
Never	1385	88%
Missing	16	1%

6. How safe do you currently feel in your neighborhood?

RESPONSES	COUNT	PERCENT
Very unsafe	21	1%
Sometimes unsafe	97	6%
Neutral	159	10%
Usually safe	609	39%
Very safe	673	43%
Missing	13	1%

7. How safe do you currently feel walking near your home or in your neighborhood?

RESPONSES	COUNT	PERCENT
Very unsafe	25	2%
Sometimes unsafe	143	9%
Neutral	164	10%
Usually safe	543	35%
Very safe	679	43%
Missing	18	1%

8. If you chose “Very unsafe” or “Sometimes unsafe” above, what makes you feel unsafe walking near your home or in your neighborhood? Please choose all that apply.

**Responses reported in tables below exclude “None” and “Missing” responses.*

RESPONSES	COUNT
1-2 Issues	90
3-4 Issues	62
5-6 Issues	11

RESPONSES	COUNT
Fear of violence	87
No sidewalks	72

8. (continued) If you chose “Very unsafe” or “Sometimes unsafe” above, what makes you feel unsafe walking near your home or in your neighborhood? Please choose all that apply.

**Responses reported in tables below exclude “None” and “Missing” responses.*

RESPONSES	COUNT
Loose animals	66
Traffic	64
Outdoor lighting in poor condition	31
No outdoor lighting	30
Sidewalks in poor condition	25
Other	25

9. How often does anyone, including a family member or romantic partner..

a. Threaten to hurt you?

RESPONSES	COUNT	PERCENT
Often	12	1%
Sometimes	47	3%
Never	1492	95%
Missing	21	1%

b. Insult you, call you names, talk down to you, or yell at you?

RESPONSES	COUNT	PERCENT
Often	32	2%
Sometimes	177	11%
Never	1341	85%
Missing	22	1%

c. Physically hurt you?

RESPONSES	COUNT	PERCENT
Often	16	1%
Sometimes	23	1%
Never	1507	96%
Missing	26	2%

10. Have you ever tested positive for COVID-19 using a rapid point-of-care test, self-test, or laboratory test, or been told by a doctor or healthcare provider that you have or had COVID-19?

RESPONSES	COUNT	PERCENT
Yes	745	47%
No	778	49%
I don't know	26	2%
Missing	23	1%

11. If you tested positive for COVID-19, how would you describe your symptoms when they were at their worst?

RESPONSES	COUNT	PERCENT
No symptoms	21	3%
Mild symptoms	282	38%
Moderate symptoms	349	47%
Severe symptoms	87	12%
Missing	<5	<1%

12. If you tested positive for COVID-19, did you have any symptoms lasting 3 months or longer that have you did not have prior to having COVID-19?

RESPONSES	COUNT	PERCENT
Yes	205	13%
No	520	33%
Not Applicable	17	1%
Missing	830	53%

13. If you experienced any of these symptoms, have any long- term symptoms reduced your ability to carry out daily activities, compared to your ability before having COVID-19?

RESPONSES	COUNT	PERCENT
Yes	94	6%
No	109	7%
Not Applicable	<5	<1%
Missing	1368	87%

SECTION II: MY COMMUNITY

Where is your community located? A community is where you work, live, and play, including your neighborhood and the city that you live in. It could also be where you spend most of your time with your family, neighbors, or where your clients live.

14. What are the top strengths of your community?

The table below lists common community strengths that have proven to be impactful to health. Please review all of the following possible strengths listed below and indicate whether you feel each item is a strength of your community or not.

POSSIBLE COMMUNITY STRENGTHS	NOT A STRENGTH	SLIGHT STRENGTH	MODERATE STRENGTH	SIGNIFICANT STRENGTH	I DON'T KNOW	MISSING
Activities for Children & Families	7%	12%	27%	35%	15%	3%
Affordable Housing	18%	18%	28%	14%	18%	3%
Arts & Cultural Events	17%	16%	27%	22%	15%	3%
Effective Emergency Preparedness & Response	5%	10%	26%	41%	15%	4%
Effective Public Transportation	42%	13%	13%	9%	20%	3%
Enrichment Opportunities for Youth	13%	14%	22%	19%	27%	4%
Fresh, Nutritious Food is Easy to Access	9%	12%	25%	43%	8%	3%
Good Place to Raise Kids	4%	9%	24%	51%	8%	3%
Healthcare is Affordable & Accessible	11%	13%	28%	34%	10%	3%
Healthy Environment (Clean Air & Water)	4%	8%	25%	54%	6%	3%
High-Paying Jobs	18%	15%	28%	14%	22%	3%
High-Quality & Affordable Childcare	13%	15%	16%	10%	43%	3%
High-Quality Public Schools	6%	10%	23%	44%	14%	3%
Inclusive & Welcoming of All People	7%	16%	30%	28%	15%	3%
Low Rates of Adult Disease & Death	5%	7%	17%	17%	51%	3%
Low Rates of Child Abuse & Neglect	6%	6%	13%	1%	55%	3%
Low Rates of Infant & Maternal Deaths	4%	4%	12%	17%	60%	3%
Low Rates of Violence & Other Crime	12%	14%	28%	24%	19%	3%
Mental Health Services are Easy to Access	16%	11%	18%	14%	38%	3%

POSSIBLE COMMUNITY STRENGTHS	NOT A STRENGTH	SLIGHT STRENGTH	MODERATE STRENGTH	SIGNIFICANT STRENGTH	I DON'T KNOW	MISSING
Safe, Well-Maintained Roads & Bridges	19%	20%	32%	20%	6%	3%
Social Services & Resources are Easy to Access	13%	12%	20%	13%	38%	3%
Strong Local Economy	9%	16%	32%	25%	16%	3%
Strong Religious & Spiritual Communities	3%	9%	27%	37%	20%	3%
Walkable Neighborhoods & Public Areas	10%	12%	30%	39%	6%	3%
Other (write in):	2%	<1%	2%	2%	12%	83%

15. What are the top concerns in your community?

The tables below list common community concerns that have been shown to be impactful to health.

POSSIBLE COMMUNITY CONCERNS	NOT A PROBLEM	SLIGHT PROBLEM	MODERATE PROBLEM	SIGNIFICANT PROBLEM	I DON'T KNOW	MISSING
Access to Affordable, High-Quality Childcare	9%	12%	16%	12%	48%	4%
Access to Affordable Healthcare	18%	19%	23%	15%	20%	4%
Access to Public Transportation	10%	15%	20%	31%	21%	3%
Access to Fresh, Nutritious Food	44%	18%	15%	9%	9%	4%
Affordable Housing	11%	23%	23%	19%	21%	4%
Alcohol/Drug Use	11%	14%	20%	16%	36%	3%
Cancer	9%	10%	15%	8%	54%	4%
Chronic Illness (Diabetes, Heart Disease, etc.)	9%	11%	17%	14%	46%	4%
Dental Health	20%	14%	17%	10%	35%	4%
Distracted Driving	10%	15%	23%	28%	20%	4%
Firearms & Gun Violence	18%	20%	17%	20%	23%	3%
Low-Paying Jobs	9%	19%	23%	17%	29%	3%
Illegal Dumping	13%	22%	17%	20%	26%	3%
Infectious Disease (RSV, COVID-19, STDs, etc.)	14%	17%	13%	7%	46%	4%

POSSIBLE COMMUNITY CONCERNS	NOT A PROBLEM	SLIGHT PROBLEM	MODERATE PROBLEM	SIGNIFICANT PROBLEM	I DON'T KNOW	MISSING
Maternal & Infant Health	13%	12%	9%	4%	59%	4%
Mental Health (Including Suicide & Mental Illness)	9%	14%	17%	14%	42%	4%
Parks & Access to Outdoor Activities	51%	17%	14%	7%	7%	3%
Pollution (Air & Water Quality)	45%	19%	11%	6%	16%	4%
Public Education	45%	16%	15%	7%	14%	4%
Racism & Inequity	21%	23%	19%	11%	23%	3%
Teenage & Unplanned Pregnancy	9%	14%	10%	6%	58%	3%
Tobacco Use	12%	17%	17%	12%	39%	4%
Violence & Other Crime	14%	27%	20%	15%	20%	4%
Walkable Communities	38%	22%	17%	10%	9%	3%
Other (write in):	4%	2%	4%	3%	14%	72%

16. Please rate your level of agreement with the following statements about your community.

COMMUNITY STATEMENTS	STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE	I DON'T KNOW	MISSING
I am satisfied with the quality of life in my city.	2%	11%	53%	29%	3%	2%
There are a good number of health and social services in my city.	5%	18%	34%	16%	24%	2%
My city is a good place to grow older.	3%	11%	48%	29%	5%	2%
My city is a safe place to live and raise children.	3%	9%	50%	30%	6%	2%
I have enough housing choices to fit my needs in my city.	7%	17%	38%	22%	14%	2%
If I need help or assistance during times of stress, there is support in my city.	7%	14%	29%	14%	34%	2%
People who live in my city have a sense of pride and shared responsibility for our community.	6%	16%	43%	22%	11%	2%
There are jobs available in my city.	6%	15%	38%	15%	24%	2%

17. Do you support the following policies?

The following policies have been shown to contribute to important health benefits. This list has been compiled by CityHealth and focuses on polices that prevent health problems.

POTENTIAL POLICIES	YES	NO	I DON'T KNOW	MISSING
Ensuring that everyone — including pedestrians, bicyclists, wheelchair users, motorists, and people who use public transportation — is able to safely use streets, regardless of their age or ability.	80%	7%	11%	2%
Requirement for employers to offer accrued Paid Time Off from work for employees working 20 hours or more per week to rest and recover from illnesses or injuries.	68%	9%	21%	2%
Requirement for the city government to prioritize using sustainable practices when purchasing items and services, such as avoiding harmful chemicals or pollutants.	72%	7%	19%	2%
Prohibiting the sale of all flavored tobacco products.	53%	21%	24%	2%
Ensuring park access for all residents within a 10-minute walk of their homes.	64%	15%	18%	3%
Increasing the number of trees in the community.	63%	14%	20%	3%
Ensuring that rental housing meets basic health and safety requirements.	77%	6%	14%	3%
Ensuring high-quality, affordable preschool/pre-kindergarten programs are available to all residents.	75%	7%	15%	3%
Providing no-cost legal representation to all eligible tenants/renters when facing eviction.	52%	19%	27%	2%
Placing limitations on alcohol sales, including locations and number of stores selling alcohol.	44%	30%	23%	2%
Placing smoking and vaping limitations on indoor and outdoor public spaces, such as parks, ballfields, restaurants, and bars.	70%	15%	14%	2%

SECTION III: DEMOGRAPHICS

In this section, community members were asked to answer questions that describe themselves and their households. This information will be used to better understand the experiences and needs of Eastern Jackson County residents.

18. How many people are currently in your household, including yourself?

NUMBER OF PEOPLE IN HOUSEHOLD	0	1	2	3	4	5	MISSING
Children under age 18	38%	11%	10%	3%	1%	<1%	37%

NUMBER OF PEOPLE IN HOUSEHOLD	0	1	2	3	4	5	MISSING
Adults between 19 to 64	15%	19%	33%	8%	3%	1%	21%

NUMBER OF PEOPLE IN HOUSEHOLD	0	1	2	3	MISSING
Adults over 65	29%	27%	20%	1%	22%

19. What is the main language spoken in your household?

RESPONSES	COUNT	PERCENT
English	1518	97%
Spanish	12	1%
Other	10	1%
Missing	32	2%

20. What is your age?

RESPONSES	COUNT	PERCENT
17-24 Years	23	2%
25-34 Years	141	10%
35-44 Years	187	13%
45-54 Years	196	14%
55-64 Years	290	20%
65-74 Years	368	26%

20. (continued) What is your age?

RESPONSES	COUNT	PERCENT
75+ Years	230	16%
Missing	137	10%

21. What is your race/ethnicity? Please choose all that apply.

RESPONSES	COUNT	PERCENT
Asian	181	1%
Bi-Racial or Multi-Racial	55	3%
Black	108	7%
Native American	12	1%
Pacific Islander	<5	<1%
White	1251	80%
Other	36	2%
Prefer Not to Say	61	4%
Missing	29	2%

22. What is your sexual orientation? Please choose all that apply.

RESPONSES	COUNT	PERCENT
Straight / heterosexual	1394	89%
Gay	11	1%
Lesbian	14	1%
Bisexual or pansexual	22	1%
Prefer not to say	72	5%
Other	14	1%
Selected two or more	9	1%
Missing	36	2%

23. What is your gender? Please choose all that apply.

RESPONSES	COUNT	PERCENT
Female	980	62%
Male	486	31%
Non-Binary or Gender Non-conforming	10	1%
Female and Male	17	1%
Other	<1	<1%
Prefer Not to Say	44	3%
Missing	32	2%

24. What is your current employment status? Please choose all that apply.

RESPONSES	COUNT	PERCENT
Full Time	611	39%
Part Time	132	8%
Hold Multiple Types of Jobs	45	3%
Seeking	23	1%
Non Seeking	46	3%
Retired	619	39%
Student	12	1%
Other	58	4%
Missing	26	2%

25. In the past 12 months, what was the yearly combined income of all members of your household before taxes?

RESPONSES	COUNT	PERCENT
Less than \$10,000	38	2%
\$10,000-\$14,999	27	2%
\$15,000-\$24,999	90	6%
\$25,000-\$34,999	106	7%
\$35,000-\$49,999	158	10%
\$50,000-\$64,999	162	10%
\$65,000-\$74,999	112	7%
\$75,000-\$99,999	183	12%
\$100,000 or more	372	24%
Prefer Not to Answer	282	18%
Missing	42	3%

26. What is the highest level of education you have completed?

RESPONSES	COUNT	PERCENT
Some High School	27	2%
High School Graduate or GED/HISET	246	16%
Some College	306	20%
Vocational Degree or License	91	6%
Associate's Degree	126	8%
Bachelor's Degree	422	27%
Master's or Other Post-Secondary	306	20%
Other	20	1%
Missing	28	2%

2023 Community Partner Assessment (CPA) Survey

PART I: ABOUT YOUR ORGANIZATION

This set of questions asks about your organization's work, strategic priorities, and the communities that you serve. This information will be used to create a fuller picture of organizations and resources in Eastern Jackson County. Results will only be shared in aggregate and no individual responses will be identified or shared.

1. Which of the following best describe(s) your organization? Select all that apply.

ORGANIZATION TYPE	PERCENT
City government agency	3%
County government agency	2%
Healthcare	14%
Public safety	2%
K-12 or higher education	14%
Grassroots community organizing group	8%
Social services provider	42%
Neighborhood association	2%
Foundation or philanthropic organization	8%
For-profit organization or private business	8%
Faith-based organization	8%
Other:	25%

2. What is your organization's priority geographic service area?

PRIORITY GEOGRAPHIC SERVICE AREAS	COUNT	PERCENT
EJC	4	7%
Kansas City	4	7%
Jackson County	5	9%
KC Metro	29	52%
Specific EJC City	8	14%
School District	3	5%
State of Missouri	3	5%
Not bound to Geographical Area	3	5%

3. What racial/ethnic populations does your organization work with? Select all that apply.

RACE AND ETHNICITY SERVED BY ORGANIZATION	COUNT	PERCENT
All people, regardless of race and/or ethnicity	57	97%
Asian / Asian American	10	17%
Black / African American	11	19%
Latinx / Hispanic	13	22%
Native American or Alaskan Native	10	17%
White / Caucasian	12	20%
Pacific Islander or Native Hawaiian	9	15%

4. Who are your organization's priority populations?

PRIORITY GEOGRAPHIC POPULATION	COUNT	PERCENT
Demographic-specific	11	19%
Socioeconomic-specific	22	37%
Disability- and/or Mental Health-specific	7	12%
Children/Student-specific	17	29%
All citizens	11	19%
Others:	2	3%

5. How much does your organization focus on each of the following Social Determinants of Health?

ORGANIZATION FOCUSED AREA	A LOT	A LITTLE	NOT AT ALL	UNSURE
Economic Stability: The connection between people's financial resources (income, cost of living, and socioeconomic status) and their health. This includes issues such as poverty, employment, food security, and housing stability.	68%	27%	3%	2%
Education Access & Services: The connection between education to health and well-being. This includes issues such as graduating from high school, education attainment in general, language and literacy, and early childhood education and development.	46%	39%	15%	2%
Healthcare Access & Quality: The connection between people's access to and understanding of health services and their own health. This includes issues such as access to healthcare, access to primary care, health insurance coverage, and health literacy.	49%	36%	15%	0%
Neighborhood & Built Environment: The connection between where a person lives (their housing, neighborhood, and environment) and their health and well-being. This includes topics like quality of housing, access to transportation, availability of healthy food, air and water quality, and public safety.	49%	34%	12%	5%
Social & Community Context: The connection between characteristics of the contexts within which people live, learn, work, and play, and their health and well-being. This includes topics like cohesion within a community, civic participation, discrimination, conditions in the workplace, violence, and incarceration.	50%	29%	17%	3%

6. Which of the following categories does your organization work on/with? (Check all that apply)

CATEGORIES FOCUSED BY ORGANIZATION	COUNT	PERCENT
Adverse childhood experiences (ACEs)	21	36%
Arts and culture	9	15%
Businesses and for-profit organizations	5	8%
Cancer prevention or resources	5	8%
Chronic disease (e.g. asthma, diabetes, cardiovascular disease)	17	29%
Community economic development	12	20%
Criminal legal system	6	10%
Currently incarcerated individuals	3	5%
Disability services and/or independent living	13	22%
Early childhood education and/or childcare	14	24%
Education	21	36%
Economic security	18	31%
Environmental justice and/or climate change	8	14%
Faith communities	6	10%
Family well-being	29	49%
Financial institutions (e.g. banks, credit unions)	6	10%
Food access and affordability	27	46%
Gender equity and/or discrimination	8	14%
Government accountability	4	7%
Healthcare access and utilization	23	39%
Health equity	25	42%
Health insurance, Medicare, and Medicaid	23	39%
Housing and homelessness	27	46%
Human services	20	34%
Immigration	4	7%

CATEGORIES FOCUSED BY ORGANIZATION	COUNT	PERCENT
Immunizations and preventative health screenings	14	24%
Infectious disease	3	5%
Jobs, labor conditions, wages, and income	17	29%
Land use planning and development	8	14%
LGBTQIA+ equity and resources	9	15%
Legal services	7	12%
Maternal and infant health	13	22%
Mental and behavioral health	26	44%
Parks, recreation, and open space	5	8%
Physical activity and active transportation	14	24%
Public health	15	25%
Public safety and/or violence	10	17%
Racial justice and equity	14	24%
Reentry services	5	8%
Senior services and elder care	13	22%
Sexual and reproductive health	7	12%
Substance use treatment and prevention services	15	25%
Transportation	15	25%
Utilities	13	22%
Veterans' issues	2	3%
Violence prevention	9	15%
Youth development and leadership	18	31%
Other	7	12%

7. How often does your organization utilize the following strategies to achieve goals?

ORGANIZATION'S STRATEGIES	REGULARLY (MONTHLY OR MORE OFTEN)	OCCASIONAL- LY (QUARTERLY OR 2-3 TIMES PER YEAR)	INFREQUENTLY (ONCE A YEAR OR LESS)	NOT AT ALL	UNSURE/I DON'T KNOW
Research & Policy Analysis: Gathering and analyzing data to create credibility and inform policies, projects, programs, or coalitions.	40%	34%	17%	5%	3%
Social & Health Services: Providing services that reach clients and meet their needs (including clinical and healthcare services).	75%	14%	2%	5%	4%
Organizing (e.g. Community or Labor): Involving people in efforts to change their circumstances by changing the underlying structures, decision-making processes, policies, and priorities that produce inequities.	36%	24%	16%	17%	7%
Communications: Messaging that resonates with communities, connects them to an issue, or inspires them to act.	55%	26%	9%	5%	5%
Leadership Development: Equipping leaders with the skills, knowledge, and experiences to play a greater role within their organization or movement.	40%	30%	16%	11%	4%
Legal Services: Using legal resources, including impact litigation and legal defense, to reach outcomes that further long-term goals.	11%	18%	27%	34%	11%
Policy Advocacy & Grassroots Lobbying: Targeting public officials either by speaking to them or mobilizing constituents to influence legislative or executive policy decisions.	28%	24%	26%	14%	9%
Alliance & Coalition-Building: Building collaboration among groups with shared values and interest.	45%	36%	9%	9%	2%
Arts & Culture: Nurturing the multiple skills of an individual through the arts and encouraging connection through shared experiences.	13%	20%	23%	41%	4%
Campaigns: Using organized actions that address a specific purpose, policy, or change.	17%	29%	28%	21%	5%
Healing: Addressing personal and community trauma and how they connect to larger social and economic inequalities.	33%	19%	25%	16%	7%

ORGANIZATION'S STRATEGIES	REGULARLY (MONTHLY OR MORE OFTEN)	OCCASIONAL- LY (QUARTERLY OR 2-3 TIMES PER YEAR)	INFREQUENTLY (ONCE A YEAR OR LESS)	NOT AT ALL	UNSURE/ DON'T KNOW
Inside-Outside Strategies: Coordinating support from organizations on the “outside” with a team of like-minded policymakers on the “inside” of the system to achieve common goals.	21%	26%	26%	16%	11%
Integrated Voter Engagement: Connecting organizing and voter engagement strategies to build a strong base over multiple election cycles.	7%	9%	27%	46%	11%
Movement Building: Scaling up from single organizations and issues to long-term initiatives, perspectives, and narratives that seek to change systems.	19%	30%	19%	23%	9%
Narrative Change: Harnessing arts and expression to replace dominant assumptions about a community or issue with dignified narratives and values.	7%	27%	16%	34%	16%

8. How frequently does your organization complete the following types of assessments?

TYPE OF ASSESSMENT	MONTH- LY OR MORE OFTEN	QUAR- TERLY	2-3 TIMES PER YEAR	ONCE A YEAR OR LESS	NOT AT ALL	UNSURE/ I DON'T KNOW
Community needs assessment	12%	5%	5%	41%	22%	14%
Community strengths/assets assessment	7%	10%	10%	29%	26%	17%
Client/priority population needs assessment	25%	7%	14%	31%	14%	10%
Client/priority population strengths/ assets assessment	17%	7%	16%	28%	19%	14%
Program evaluation(s)	33%	19%	19%	16%	7%	7%

9. How does your organization collect data? Select all that apply.

DATA COLLECTION METHODS	COUNT	PERCENT
Surveys	44	75%
Focus groups	27	46%
Interviews	29	49%
Client satisfaction or feedback forms	40	68%
PhotoVoice, videos, or other participatory research methods	4	7%
Notes from community meetings	27	46%
Secondary data sources (e.g. U.S. Census, CDC)	31	53%
Electronic health records	17	29%
Internal databases or other tracking systems	39	66%
Door count and/or number of clients served	30	51%
Website and/or social media analytics	29	49%
Other:	4	7%

10. What types of data does your organization collect? Select all that apply.

TYPES OF DATA COLLECTED BY ORGANIZATION	COUNT	PERCENT
Demographic information about clients or members	54	92%
Access and utilization data about services provided and to whom	47	80%
Evaluation, performance management, or quality improvement information about services and programs	41	69%
Data about health and/or mental health status	35	59%
Data about health behaviors	20	34%
Data about community conditions and social determinants of health (e.g. housing, education, food security and access)	37	63%
Data about systems of power, privilege, and oppression	13	22%
We don't collect data	0	0%
Other:	2	3%

11. Which of the following community engagement methods does your organization utilize? Select all that apply.

METHODS OF COMMUNITY ENGAGEMENT	COUNT	PERCENT
Advocacy	38	64%
Billboards, PSAs, or other mass media communications	24	41%
Client satisfaction or feedback forms	43	73%
Community advisory councils, boards, or committees	40	68%
Community forums or events	33	56%
Community organizing	19	32%
Community-driven planning	18	31%
Fact sheets	27	46%
Focus groups	23	39%
Memorandums of understanding (MOUs) with other organization	38	64%
Participatory action research	6	10%
Participatory budgeting	5	8%
Presentations or Workshops	36	61%
Social media	49	83%
Surveys or polling	29	49%

12. What types of communications do your organization utilize? Select all that apply.

METHODS OF COMMUNICATION	COUNT	PERCENT
App-based communication or messaging	22	37%
Culturally-specific outreach in languages other than English	24	41%
Data dashboards	22	37%
External newsletters to the public	39	66%
Internal newsletters to staff	34	58%
Mailings to clients and community members	32	54%

METHODS OF COMMUNICATION	COUNT	PERCENT
Ongoing and active relationships with local journalists and earned media organizations	30	51%
Paid ads or PSAs	17	29%
Press releases or press conferences	31	53%
Social media outreach	57	97%
Texting campaigns or other communications	19	32%
Other:	2	3%

13. What are your organization's top 3 priorities for participating in a community health improvement partnership? Please select up to 3 choices.

TOP 3 PRIORITIES	COUNT	PERCENT
To deliver programs effectively and efficiently, and avoid duplicating efforts	35	59%
To pool resources	6	10%
To share data	2	3%
To increase communication and break down silos	16	27%
To plan and launch community-wide initiatives	14	24%
To develop and use political power to gain services or other benefits for the community	6	10%
To make connections with potential funders	5	8%
To make connections with decision-makers	4	7%
To build connections with communities with lived experience	8	14%
To improve lines of communication between communities and government decision-makers	6	10%
To create long-term, permanent social change	27	46%
To dismantle systemic racism	6	10%
To address social inequities and health disparities	29	49%
Others:	2	3%

PART II: INTERNAL CAPACITY & STRATEGY

This set of questions asks about your organization's work, strategic priorities, and the communities that you serve. This information will be used to create a fuller picture of organizations and resources in Eastern Jackson County. Results will only be shared in aggregate and no individual responses will be identified or shared.

14. What does your organization do to reach, engage, and work with your clientele or priority population? Select all that apply.

ORGANIZATION'S ENGAGING ACTIVITIES	COUNT	PERCENT
We hire staff from demographic groups that mirror our priority population(s)	39	66%
We have leadership who speak the language(s) of our priority population(s)	13	22%
We hire staff or interpreters who speak the language(s) of our priority population(s)	26	44%
We have board or advisory group members that mirror our priority population(s)	29	49%
The organization is physically located in neighborhood(s) of our priority population(s)	33	56%
We support leadership development in our priority population(s)	26	44%
The organization receives many clients from our priority population(s)	36	61%
The organization works closely with community organizations/groups from our priority population(s)	39	66%
The organization has conducted extensive outreach to our priority population(s)	23	39%
We do not engage in specific activities/efforts to reach a priority population	6	10%
Other:	1	2%

15. Does your organization offer services to or engage in specific outreach or engagement activities for the following populations?

POPULATION	NO, WE DO NOT PROVIDE SPECIFIC SERVICES/ ENGAGEMENT ACTIVITIES FOR THIS POPULATION.	SOMEWHAT - WE PROVIDE GENERAL SERVICES AND MEMBERS OF THIS POPULATION CAN ACCESS THEM.	UNSURE/I DON'T KNOW.	YES, WE PROVIDE SPECIFIC SERVICES/ ENGAGEMENT ACTIVITIES FOR THIS POPULATION.
Non-native English speakers	21%	43%	0%	36%
Immigrants	20%	46%	4%	30%
Refugees	27%	44%	7%	22%
Asylum seekers	38%	36%	11%	15%
Persons without documentation/legal status	25%	42%	11%	22%
LGBTQIA+ community	18%	48%	5%	29%
Persons with disabilities	16%	43%	2%	39%

16. Indicate your organization's level of capacity for each language access statement.

ORGANIZATION'S LEVEL OF CAPACITY FOR EACH LANGUAGE ACCESS STATEMENT	ALWAYS	NOT AT ALL	RARELY	SOME-TIMES
My organization has bilingual or multi-lingual staff who are able to communicate with clients/ community members in their primary language.	33%	12%	12%	42%
My organization has publicly available materials in languages other than English.	34%	18%	11%	38%
My organization hosts community events in languages other than English.	13%	50%	23%	14%
My organization has on-site or responsive interpretation services available for clients whose primary language is not English.	32%	29%	11%	29%

17. Please indicate your organization's capacity as it relates to the language access options below.

An organization's capacity could include one of the following options: having staff who speak the language, material available in the language, or meetings/events available in the language.

LANGUAGE	ORGANIZATION'S LANGUAGE CAPACITY
American Sign Language	29%
Arabic	16%
Bosnian	5%
Burmese	11%
Chinese	9%
Farsi	9%
French	13%
Haitian Creole	5%
Korean	5%
Punjabi	5%
Russian	5%
Samoan	4%
Somali	15%
Spanish	78%
Swahili	9%
Tagalog	4%
Urdu	5%
Vietnamese	7%

18. When your organization hosts community meetings or events, which of the following resources are offered to participants/community members? Select all that apply.

RESOURCES	COUNT	PERCENT
Accessible materials for low literacy and/or disabled community members	21	36%
Childcare	11	19%
Food or snacks	35	59%
Interpretation in languages other than English, including American Sign Language	16	27%
Stipends or gift cards for participation	17	29%
Transportation or transportation vouchers	11	19%
Virtual participation options	29	49%
Not applicable	12	20%
Other:	2	3%

19. Please review the following statements and indicate your organization's current status.

ORGANIZATION'S CURRENT STATUS	YES	WORKING TOWARD THIS	NO	UNSURE/I DON'T KNOW
We have at least one staff member dedicated to addressing diversity, equity, and inclusion internally in our organization.	53%	26%	19%	2%
We have at least one staff member dedicated to addressing diversity, equity, and inclusion externally in our community.	41%	28%	24%	7%
Advancing equity and/or addressing inequities is included in all or most staff job requirements.	48%	34%	5%	12%
All of our staff receive training addressing diversity, equity, and inclusion, and/or advancing equity and addressing inequities.	71%	22%	7%	0%

20. To what extent do the staff and board of your organization reflect the demographic of the community you serve?

STAFF TYPE	ALL	SOME	NONE	UNSURE/I DON'T KNOW
Program ("front line") Staff	36%	63%	0%	2%
Management	21%	71%	4%	4%
Leadership	20%	70%	5%	5%
Board of Directors	16%	73%	2%	9%

21. Indicate your level of the agreement with the following statements regarding your organization's current capacity.

ORGANIZATION'S CURRENT CAPACITY	STRONGLY AGREE	AGREE	NEUTRAL	DISAGREE	STRONGLY DISAGREE
My organization has sufficient staffing/personnel to meet the needs of the community.	12%	29%	21%	31%	7%
My organization has sufficient training and technical assistance resources to meet the needs of the community.	21%	43%	19%	12%	5%
My organization has sufficient allocated funding to complete projects and provide services that meet the needs of the community.	12%	31%	24%	29%	3%
My organization has sufficient unallocated/general funding to complete projects and provide services that meet the needs of the community.	7%	19%	28%	40%	5%
My organization has sufficient technology and equipment to meet the needs of the community.	10%	45%	21%	19%	5%
My organization has the partnerships and collaboration we need to meet the needs of the community.	14%	41%	29%	16%	0%
Additional partnerships and collaboration would improve my organization's capacity to meet the needs of the community.	50%	40%	5%	5%	0%

22. Please review the following activities and indicate the extent to which your organization engages in these practices.

ORGANIZATION'S ENGAGING ACTIVITIES	REGULARLY (MONTHLY OR MORE OFTEN)	OCCASION- ALLY (QUAR- TERLY OR 2-3 TIMES PER YR)	INFREQUENT- LY (ONCE A YEAR OR LESS)	NOT AT ALL	UNSURE// DON'T KNOW
Assessment: My organization conducts assessments of living and working conditions and community needs and assets.	16%	17%	43%	14%	10%
Investigation of Hazards: My organization investigates, diagnoses, and addresses health and safety problems and hazards affecting the population.	14%	18%	23%	30%	16%
Communication & Education: My organization works to communicate effectively to inform and educate people about health or well-being, factors that influence well-being, and how to improve it.	48%	22%	14%	10%	5%
Community Engagement & Partnerships: My organization works to strengthen, support, and mobilize communities and partnerships to improve community health and well-being.	61%	25%	7%	4%	4%
Policies, Plans & Laws: My organization works to create, champion, and apply policies, plans, and laws that impact community health and well-being.	33%	30%	21%	12%	4%
Legal & Regulatory Authority: My organization has legal or regulatory authority to protect community health and well-being, and uses legal and regulatory actions to improve and protect the public's health and well-being.	4%	9%	26%	44%	18%
Access to Care: My organization provides healthcare and/or social services to individuals or works to ensure equitable access and an effective system of care and services.	41%	12%	16%	26%	5%
Workforce: My organization supports workforce development and can help build and support a diverse, skilled workforce.	40%	30%	14%	14%	2%
Evaluation & Research: My organization conducts evaluation, research, and continuous quality improvement and can help improve or innovate functions.	28%	38%	24%	9%	2%
Organizational Infrastructure: My organization is helping build and maintain a strong organizational infrastructure for health and well-being.	47%	28%	14%	3%	9%

ABOUT THE 2023 CHA

At Jackson County Public Health, we recognize that good health goes beyond healthcare and individual choices. To better understand what is impacting the health of our region, we conducted a community health assessment, which included surveying more than a thousand households about their health and well-being, as well as the health, strengths, and challenges of their communities.

In this report, we are proud to present a snapshot of our findings. These results will be used to guide future initiatives to improve public health and well-being in Eastern Jackson County, as well as to convene and collaborate with local partners and community members on community health improvement efforts.

jcph.org

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