



Community Health Needs Assessment 2022

Lewis County, WV

Stonewall Jackson Memorial Hospital/ Lewis County Health Department Community Health Needs Assessment 2022

Table of Contents

Executive Summary	Page 3
PHASE I	Page 4
Lewis County Health Rankings	Page 5-6
Lewis County Demographics	Page 7
Lewis County Education	Page 8
West Virginia Demographics/Causes of WV Deaths	Page 8
Polysubstance Abuse in WV	Page 9
WV Behavioral Risk Factors	Page 9-12
Other WV Health Highlights	Page 13
PHASE II	
Survey Results	Page 13-31
PHASE III	
Focus Group	Page 32-34
Strategies	Page 34-36

for Mon Health Stonewall Jackson Memorial Hospital and Lewis County Health Department's Community Health Needs Assessment

Two leading Lewis County-based healthcare organizations have completed a community health needs assessment (CHNA) that began with a healthcare needs survey in the winter of 2022. The Mon Health Stonewall Jackson Hospital Communications Department designed the CHNA in three phases – a compilation of federal, state, and local information and statistics, followed by an online survey, and concluding with focus groups. The report concludes with current strategies for the issues.

Mon Health Stonewall Jackson Memorial Hospital (SJMH) and the Lewis County Health Department (LCHD) conducted the assessment to identify and prioritize community health needs that each organization can use to better serve their Lewis County, West Virginia regional service area.

Mon Health SJMH is a 70-bed, not-for-profit, acute care hospital. The facility has specialists on staff, including orthopedic surgeons, obstetrician/gynecologist, pulmonologist, urologist, internists, general surgeon, cardiologists, as well as family practitioners.

The mission of the Lewis County Health Department is "to protect, promote, and maintain the health of the entire population of Lewis County." This is accomplished by providing a healthier and safer environment, promoting healthier lifestyles, and providing services (i.e., immunizations, pediatric services, etc.) which will improve the health of citizens of the county, resulting in less illness, better overall health, and greater longevity of life. The Department employs a nurse and a sanitarian, as well as support staff.

Based on information provided by the Robert Wood Johnson Community Roadmap, Lewis County ranks 37th in health outcomes of 55 counties in West Virginia for 2022 and 35th in Health Factors. Health outcomes represent how healthy a county is right now. The Factors reflect the physical and mental well-being of residents through measures representing the length and quality of life typically experienced in the community. Health factors represent things that, if modified, can improve length and quality of life. They are predictors of how healthy our communities can be in the future. The four health factor areas in the model include Health Behaviors, Clinical Care, Social & Economic Factors, and Physical Environment.

Other data suggests that in general West Virginians have poorer health in several areas including higher rates of obesity, cancer, diabetes, high blood pressure, and asthma to name a few. Another problem indicator is the CDC's Adverse Childhood Experience (ACEs) score for West Virginia, which is high, indicating one's statistical chance of suffering from a range of psychological and medical problems like chronic depression, cancer, or coronary heart disease.

The online survey in 2022 found that the overwhelming concerns of area residents were: drug usage, obesity, mental health, heart disease, and diabetes in this order. In the 2013 CHNA, the major concern was obesity, but as the drug epidemic has flourished, the major concern for people is drug abuse.

Suggestions in the third component of the CHNA are gathered from a focus group held in May 2022 with community leaders to discuss health issues identified in the surveys and research. This information indicates that SJMH and the Lewis County Health Department have spent many years providing health education and screenings for our citizens. Both entities have been involved in efforts to combat obesity and lack of physical activity. However, combatting drug abuse is a more difficult area to attack. The focus group meeting

determined some very positive ongoing projects in the county and brought forth some positive suggestions, which will be considered. The section also explains how the CHNA will be distributed to the public.

Phase One Information on Lewis County and WV Residents

Lewis County History and Geography

Located in North Central West Virginia, Lewis County has a total area of 390 square miles, of which 382 is land and 8 square miles is water. The county was created from part of Harrison County by an act of the Virginia General Assembly on December 18, 1816. (Wikipedia, 2012)

The county was named in honor of Colonel Charles Lewis (1733-1774), who was killed at the Battle of Point Pleasant in 1774. One of the first acts of the newly formed West Virginia state legislature was to change the name of the recently completed Trans-Allegheny Lunatic Asylum, in Weston, to the West Virginia Hospital for the Insane. It began operations in 1864 with nine patients. Later renamed Weston State Hospital, it continued to provide care for the mentally impaired until the old building closed in 1994. The William R. Sharpe Hospital was built as the modern replacement facility for services.

Mon Health Stonewall Jackson Memorial Hospital and the Lewis County Health Department are both located within the city limits of Weston, WV. The Community Health Needs Assessment represents residents from this community.

First Phase

The first step was the gathering of quantitative information with data provided by a variety of resources such as the Robert Wood Johnson Communities Roadmap, State of WV, CDC, and Census Bureau.

"County Health Rankings & Roadmaps-2022"

L	Lewis County Error Margin		WV	National Benchmark*	Trend	Rank (of 55)
Health Outcomes						35
Mortality						
Premature death	12,900	10,600- 15,200	10,800	5,400		
Quality of Life						
Poor or fair health	25%	22-28%	24%	14%		
Poor physical health days	5.6	5.1-6.2	5.3	3.4		
Poor mental health days	6.1	5.7-6.6	5.8	3.8		
Low birth weight	10%	8-12%	9%	6.0%		
Health Factors						35
Health Behaviors						45
Adult smoking	27%	24-31%	27%	16%		
Adult obesity	43%	36-50%	38%	26%		
Food environment index	7.7		6.9	8.7		
Physical inactivity	36%	29-43%	28%	19%		
Access to exercise opportunities	41%		59%	91%		
Excessive drinking	15%	14-16%	14%	15%		
Alcohol-impaired drinking death	15%	7-25%	25%	11%		
Sexually transmitted infections	172.6		198.2	161.2		
Teen birth rate	42	34-49	31	12		
Clinical Care						30
Uninsured	7%	6-9%	8%	6%		
Primary care physicians	1,460:1		1,280:1	1,030:1		
Dentists**	3,180:1		1,760:1	1,210:1		
Mental Health Providers	570:1		730;1	270:1		

Social & Economic	c Factors			31
Mammography Testing	36%	39%	51%	
Flu vaccines	41%	42%	55%	
Preventable hospital stays	6,501	5,748	2,565	

High school graduation**	88%	86-91%	87%	94%	
Some college	45%	38-52%	56%	73%	
Unemployment	6.2%		4.9%	2.6%	
Children in poverty	28%	20-36%	21%	10%	
Income inequality	5.1	4.1-6.1	5.0	3.7	
Children in single-parent households	26%	17-35%	25%	14%	
Social associations	10.6		13.0	18.2	
Violent crime rate	79		330	63	
Injury deaths	114	92139	124	59	
Physical Environment					15
Daily fine particulate matter	7.3		7.8	5.2	
Drinking water violations	No				
Severe housing problems	11%	9-14%	11%	9%	
Driving alone to work	80%	77-83%	82%	72%	
Long commute-driving alone	43%	36-50%	33%	16%	

Explanation of Information

The first entry for the County Health Ratings - premature death - is based on life lost before age 75 per 100,000 population. The Lewis County rate is almost twice the national average for premature death, which sets the tone for the rest of the statistics. Other entries are self-explanatory until the reader finds the percentage for mammography screening. These numbers are based on individuals who are Medicare-insured but do not take advantage of those screenings. The statistic for mammography is poor, with only 36% of eligible Lewis County women taking advantage of the screening. The trend for children in poverty in the county has risen as much as the state and national averages, but is higher than either of those at almost 28% of our children living in poverty.

Lewis County Age, Health Providers and Cost, Income - 2022

Demographics	Lewis	WV
Population	15,805	1,784,787
% below 18 years of age	21.2%	20.0%
% 65 and older	21.1%	20.9%
% Non-Hispanic African American	.7%	3.5%
% American Indian and Alaskan Native	.3%	.3%
% Asian	.5%	.9%
% Native Hawaiian/Other Pacific Islander	0%	0%
% Hispanic	1.3 %	1.8%
% Non-Hispanic white	96.2%	91.8%
% not proficient in English	0%	0%
% Females	50%	50.5%
% Rural	69.0%	51.3%
Healthcare Providers		
Mental health providers	530:1	670:1
Uninsured adults	10%	10%
Uninsured children	3%	3%
Other Factors	'	'
Median household income	\$53,500	\$49,200
Children eligible for free lunch	58%	52%
Homicide rate		5

Education in Lewis County, WV

The Lewis County statistics are below and were obtained from https://www.towncharts.com/West-Virginia/Education/Lewis-County-WV-Education-data.html. Education has an impact on many health factors such as smoking, obesity, etc.

No Schooling	1%
Less than High School	12.3%
High School or GED	47.9%
Some College or Associates Degree	23.5%
Bachelor Degree or higher	15.7%

The Lewis County Board of Education provides four elementary schools, and a high school. There is also a Catholic grade school in Weston.

West Virginia Demographics

According to 2021 US Census Bureau estimates, West Virginia is comprised of 49.5% males and 50.5 females. Twenty percent of the population is over age 65; 20.1% is under age 18, and 5.2% are children under 5 years. West Virginia has a primarily white population (93.5%) with the remaining residents Black or African-American (3.6%), Asian (0.8%), or another race (2.2%). Eighty-seven percent of West Virginia residents have attained a high school education or above. Twenty-one percent of persons age 25 years+ have a bachelor's degree or higher. Life expectancy is 74.5 years, one of the lowest in the country

According to the CDC Leading Causes of Death in West Virginia are:

- 1. Heart Disease
- 2. Cancer
- 3. Accidents
- 4. Chronic Lower Respiratory Diseases
- 5. COVID-19
- 6. Diabetes
- 7. Stroke
- 8. Alzheimer's Disease
- 9. Kidney Disease
- 10. Influenza/Pneumonia

WV Polysubstance Abuse

Over 270 responses to our survey conducted for this Community Assessment, noted drug addiction is the most pressing problem facing both Gilmer and Lewis County. Though the southern part of the state has seen the worst of this epidemic, every county has had serious issues with it.

In 2020, according to the CDC, West Virginia had the most deaths per 100,000 people at 81.4, the next closest was Kentucky with 49.2 deaths per 100,000 people. No state has been as profoundly affected by the substance use epidemic as West Virginia. For several years, West Virginia has led the nation in age-adjusted drug overdose death rates. From 2014 to 2017, the drug overdose death rate in West Virginia increased from a rate of 35.5 per 100,000 to 57.8 per 100,000, far exceeding any other state in the nation. The substance use epidemic in West Virginia also increases other related health risks such as infectious diseases, liver disease and Neonatal Abstinence Syndrome (a condition in which babies withdraw from opioids they were exposed to during pregnancy). Substance use, particularly intravenous drug use, increases the risk of infectious diseases including hepatitis, human immunodeficiency virus (HIV), and endocarditis (infection of the heart valves).

Nationally, West Virginia ranks first for rates of hepatitis B and hepatitis C, both of which can lead to severe liver disease. Risk factors for hepatitis also increase the risk for infection with HIV. The Centers for Disease Control and Prevention has identified 220 counties in the U.S. as "at risk" for HIV and/or hepatitis C outbreaks resulting from the substance use epidemic. West Virginia counties alone make up 28 (14%) of the nation's 220 top "at-risk" counties, and in recent years the state has seen HIV clusters emerge. If undiagnosed or untreated, HIV can lead to a range of infections and other health complications. Yet, linked into ongoing care, most individuals with HIV can now lead long and healthy lives. In addition, new preventive measures such as pre-exposure prophylaxis (HIV PrEP) are now available for those at risk.

https://dhhr.wv.gov/office-of-drug-control-policy/news/Documents/FINAL%20-%20West%20Virginia%20202_2022%20Council%20Substance%20Use%20Plan_January%2020,%202020%20(as%20filed).pdf

West Virginia Behavioral Risk Factors-2018

Health Status

- West Virginia ranked 2nd highest nationally in the prevalence of general health of adults as either fair or poor.
- More than one-fourth of West Virginia adults (26.3%) considered their health to be either fair or poor.
- Fair or poor health was most common among groups of adults aged 55-64, those with less than a high school education, and those who have an annual household income of less than \$15,000.
- The prevalence of fair or poor health was highest in Boone, Fayette, Lincoln, Logan, McDowell, Mercer, Mingo, and Wyoming counties.
- West Virginia ranked 1st highest in the nation for the prevalence of poor physical health, poor mental health, and activity limitations due to poor physical or mental health.

Health Care Access

- The prevalence of no health care coverage among West Virginia adults aged 18-64 was at an all-time low of 9.3%, compared to 14.1% nationally.
- The prevalence of no health care coverage among those aged 18-64 was highest in Barbour and Logan counties.

- Nearly half of West Virginia adults have private insurance (45.1%), followed by Medicare (24.3%) and Medicaid (15.9%).
- Nearly one-fifth of all adults do not have a personal doctor or health care provider (19.5%).
- Approximately 14.6% of West Virginia adults could not afford needed medical care in the past year.
- More than one-fifth of West Virginia adults did not have a routine checkup in the past year (21.4%).

Weight Status

- The prevalence of obesity in West Virginia was 37.7%, which was 1st highest in the nation.
- The prevalence of obesity was significantly higher in Fayette, Logan, and McDowell counties than in the rest of the state.
- More than two-thirds (70.9%) of West Virginia adults were overweight or obese, the 2nd highest in the U.S.
- The prevalence of overweight or obese was highest among men, those aged 45-54, those with a high school education, and those with an annual household income of \$50,000-\$74,999.

Physical Activity

- More than one-fourth of West Virginia adults (28.5%) did not participate in leisure-time physical activity or exercise, which ranked West Virginia 11th highest in the nation.
- The prevalence of physical inactivity was significantly higher among females than males.
- Physical inactivity was highest among those aged 65 and older, those with less than a high school education, and those with annual household income of less than \$15,000.
- The prevalence of physical inactivity was significantly higher in Grant, Logan, McDowell, Mercer, Mingo, Webster, and Wyoming counties than the rest of the state.

Sugar-Sweetened Beverages

- More than one-fourth of West Virginia adults (28.8%) consume soda or pop on a daily basis.
- The prevalence of daily soda or pop consumption was highest among men, those aged 25-34, and those with less than a high school education.
- Nearly one in five West Virginia adults (19.1%) consume sugar-added beverages on a daily basis.
- The prevalence of daily consumption of sugar-added beverages was highest among males, those aged 18-24, and those with a high school education or less.
- Approximately 39.2% of West Virginia adults consume either soda, pop, or a sugaradded beverage on a daily basis.

Menu Labeling

- Nearly half of West Virginia adults (47.2%) use calorie information provided on menus.
- The prevalence of using calorie information on menus was highest among women, college graduates, and those with an annual household income of \$75,000 or more.

Cardiovascular Disease

- West Virginia ranked 1st highest in the nation in the prevalence of heart attack (7.5%) and coronary heart disease (8.0%).
- West Virginia ranked the 7th highest in the nation in the prevalence of stroke (4.4%).
- The overall cardiovascular disease prevalence was 1st highest in the nation at 14.6%.

- The prevalence of cardiovascular disease was highest among men, those aged 65 and older, those with less than a high school education, and those with an annual household income less than \$15,000.
- The prevalence of cardiovascular disease was significantly higher in Grant, Logan, McDowell, Mingo, and Wyoming counties than the state as a whole.
- More than half of West Virginia adults (50.8%) are currently watching or reducing their sodium intake.

Cancer

- Approximately 7.4% of West Virginia adults had ever had skin cancer and 8.1% had ever had some other type of cancer.
- About 1 in 7 West Virginia adults had been diagnosed with cancer, but were still living (14.0%), which ranked West Virginia the 3rd highest for overall cancer prevalence.
- Cancer prevalence was highest among adults aged 65 and older and those with an annual household income of \$25,000-\$34,999.
- Among cancer survivors, 35.4% received a written summary of all cancer treatments and 4.9% participated in a clinical trial.
- Among cancer survivors, 63.9% received instructions about routine cancer check-ups after treatment and 76.2% of those were written instructions.

Cancer Screening

- The prevalence of "had a mammogram in the past 2 years" among women aged 50-74 was 77.8%, similar to the U.S. prevalence.
- The prevalence of had a Pap test in the past 3 years among women aged 21-65 was 79.5%, similar to the U.S. prevalence.
- Among West Virginia men aged 40 and older, 52.9% discussed the advantages of the prostate specific antigen (PSA) test with a doctor, 31.8% discussed the disadvantages of the PSA test with a doctor, 52.5% had a doctor who recommended having the PSA test, and 42.7% had a PSA test in the past 2 years.
- Among adults aged 50-75, 10.0% had a Fecal Occult Blood Test (FOBT) test in the past year and 16.8% had a FOBT test in the past 3 years.
- Among adults aged 50-75, 63.3% had a colonoscopy in the past 10 years, similar to the U.S. prevalence.
- More than two-thirds of West Virginia adults aged 50-75 had at least one of the recommended colorectal cancer screenings (67.0%), which was similar to the U.S. prevalence.

Diabetes

- More than 1 in 10 West Virginia adults had diabetes (15.0%), which ranked West Virginia the 2nd highest nationally.
- The prevalence of diabetes was highest among those aged 65 and older, those with less than a high school education, and those with an annual household income of less than \$15,000.
- Among West Virginia adults with diabetes, 24.3% had 2 or more A1C test in the past year and 48.0% have taken a diabetes self-management class.
- Approximately 11.0% of West Virginia adults had pre-diabetes.
- The prevalence of borderline or pre-diabetes was highest among those aged 65 and older and those with less than a high school education.

Diabetes Testing

• Among West Virginia adults who do not have diabetes, 62.9% have had a diabetes test in the past 3 years.

• The prevalence of had a diabetes test in the past 3 years was highest among those aged 65 and older, college graduates, and those with an annual income of \$25,000-\$34,999.

Arthritis

- More than 1 in 3 West Virginia adults had arthritis (38.9%), which ranked West Virginia 1st highest in the nation.
- Arthritis prevalence was highest among those aged 65 and older, those with less than a high school education, and those with an annual household income of less than \$15,000.

Comorbidities

- Approximately 1 in 6 West Virginia adults (17.3%) were both obese and had arthritis.
- About 1 in 6 West Virginia adults (14.8%) had arthritis and did not exercise.
- About 1 in 8 West Virginia adults (12.9%) were obese and did not exercise.
- About 1 in 11 West Virginia adults (9.2%) were obese and had diabetes.
- Approximately 1 in 20 West Virginia adults (5.3%) had both cardiovascular disease and diabetes
- About 1 in 11 West Virginia adults (8.7%) were current smokers who had depression.

Respiratory Diseases

- Approximately 16.2% of West Virginia adults have ever been diagnosed with asthma and 11.8% of West Virginia adults currently had asthma.
- Women had significantly higher prevalence of both lifetime and current asthma than men.
- The prevalence of both lifetime asthma and current asthma was highest among those
 with less than a high school education and those with an annual household income of
 less than \$15,000.
- The prevalence of current asthma was significantly higher in Harrison and McDowell counties than the rest of the state.
- The prevalence of chronic obstructive pulmonary disease or COPD in West Virginia was 13.9%, which was 1st highest in the nation.
- The prevalence of COPD was highest among adults aged 55-64, those with less than a high school education, and those with an annual household income of less than \$15,000.
- The prevalence of COPD was significantly higher in Fayette, Lincoln, Logan, McDowell, Mercer, and Mingo counties than the rest of the state.

Tobacco Use

- Nearly one-fourth of adults (24.8%) currently smoke cigarettes every day or some days, which ranked West Virginia the 2nd highest nationally.
- The prevalence of current smoking was highest among those aged 25-34, those with less than a high school education, and those with an annual household income of less than \$15,000.
- Approximately 54.7% of current smokers had tried to quit smoking in the past year, which was the 46th highest (equating to 9th lowest) in the nation.
- West Virginia ranked the 2nd highest in the nation in the prevalence of smokeless tobacco use (8.5%) among adults.
- The prevalence of respondents who currently use e-cigarettes was 4.7%, similar to the U.S. prevalence, and was highest among adults aged 18-24.

Other Highlights of West Virginia's State of Health

The 2020 America's Health Rankings from the United Health Foundation found West Virginia to be unhealthiest state in the country. Other findings include:

Strengths

- Low prevalence of excessive drinking
- Low prevalence of high-risk HIV behaviors
- Low percentage of severe housing problems

Challenges

- High prevalence of multiple chronic conditions
- High prevalence of insufficient sleep
- High prevalence of cigarette smoking

Highlights

- Chlamydia increased 58% from 198.2 to 313.0 cases per 100,000 population between 2018 and 2019
- Adults who avoided care due to cost decreased 26% from 14.9% to 11.1% between 2018 and 2020
- Frequent mental distress decreased 15% from 20.6% to 17.5% of adults between 2019 and 2020

Source: CDC, HRSA and Trust for America's Health, 2019-2020 CDC WONDER, Multiple Cause of Death Files, 2019 CDC, Behavioral Risk Factor Surveillance System, 2020

Phase Two Surveying

The second step of the Community Health Needs Assessment was to conduct a survey on health issues with public input leading the way. An online company, Survey Monkey, was used for an electronic survey. The survey was created by the Mon Health SJMH Marketing Department using samples from other health care agencies. There were 38 questions included in the survey, with emphasis on the public's health concerns.

Procedure for Local Survey Collection

Two hundred and seventy people participated in the survey during the winter/spring of 2022. The SJMH Communications Department promoted the survey in the local newspaper with news stories, on the local radio station, on Facebook, and through email invitations. The majority of the respondents were female at 84.91% (225) with 15.09% male (40). The majority were married at 71.45% (192); single 20% (53), 5.66% widow(er) (15), and 1.89% (5) were living together. The questions were approved by both the Gilmer and Lewis County Health Departments. The health questions began with Question 5 and follow.

Q5 Please list the top three health problems in this area, naming the most pressing problem first.

Asthma Depression good heart problems dental Drug use alcohol problems

Mental Illness high blood pressure Obesity Heart COPD transportation

Covid Child Drug addiction diabetic Lack abuse

Drug abuse Cardiac diabetes Diabetes High Blood

Cancer Obesity diabetes heart Obesity health care

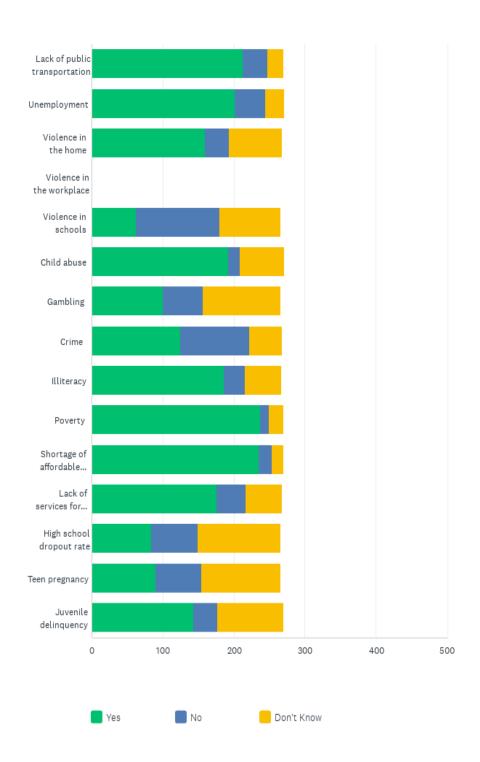
mental health mental Drugs know

heart disease patients Obesity Diabetes issues

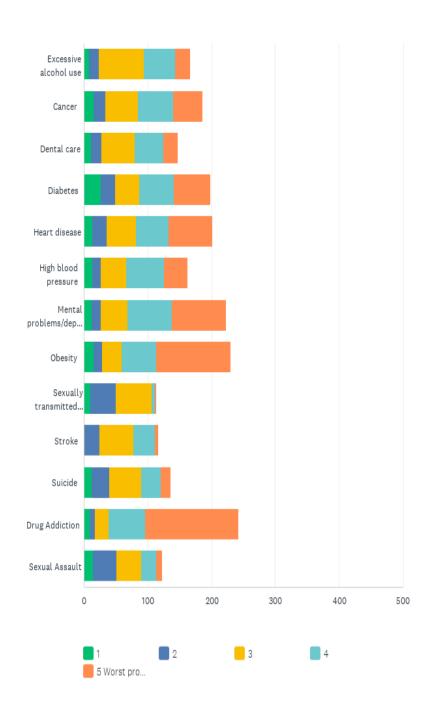
Addiction Medical health dental care Obesity heart disease

Arthritis Diabetes Heart Disease people Substance Abuse Anxiety hypertension options disease Nutrition care primary care addiction obesity addiction obesity heart substance use

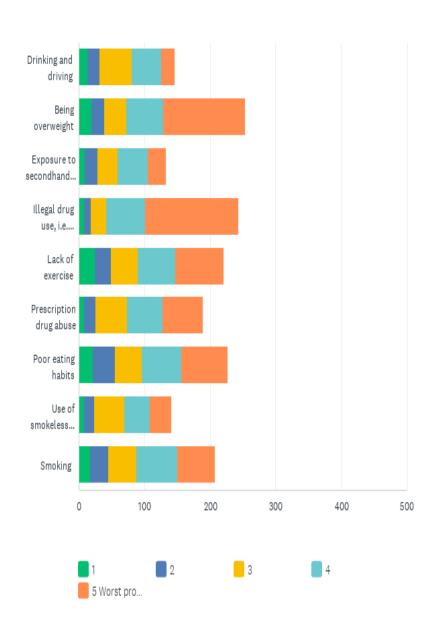
Q6 Please tell whether you believe the topics listed below are problems in this area?



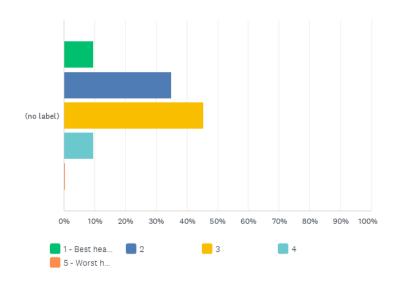
Q7 Below are some common health problems. Please rate on a scale from 1 to 5, with 5 being the worst problem in this area. You should mark only 5 items.



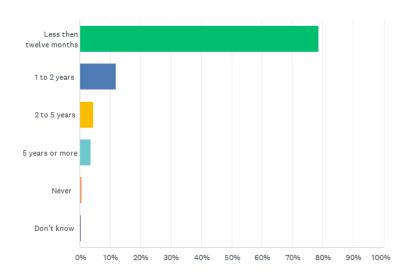
Q8 Below are various types of behavior that could affect one's health. Please rate the behavior on a scale of 1 to 5, with 5 being the biggest problem for this area. You should only have five items marked.



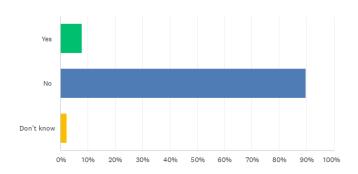
Q9 Rate your health from 1 to 5, with five being the worst health.



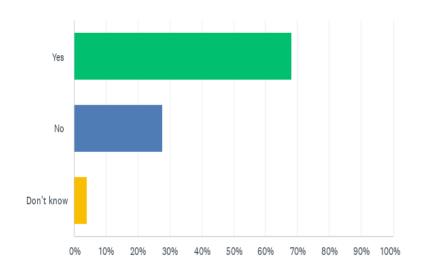
Q10 How long has it been since you visited a doctor for a routine checkup? (A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.)



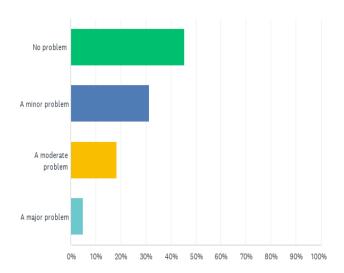
Q11 Do you have healthcare coverage through the Affordable Care Act (Obama Care)?



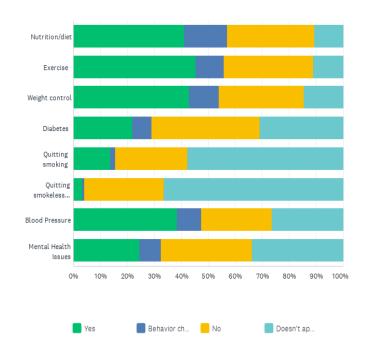
Q12 Do you consider your healthcare coverage "affordable" for your family?



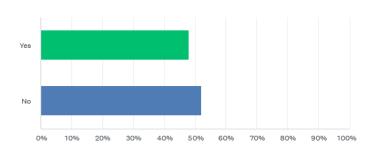
Q13 Because of financial considerations, has getting adequate care for you and your family been:



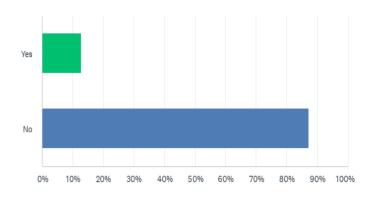
Q14 During the last three years, if your doctor or other health professional talked to you about any of the following please mark "yes", and please check those in which your doctor's comments actually changed your behavior.



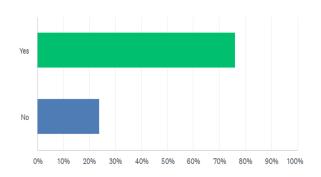
Q15 Do you or any family member suffer from mental health issues?



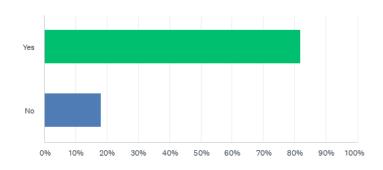
Q16 Do you believe there is adequate help for those who suffer from mental health issues?



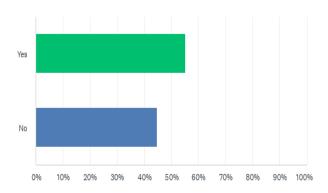
Q17 Do you visit a dentist regularly (at least once a year)?



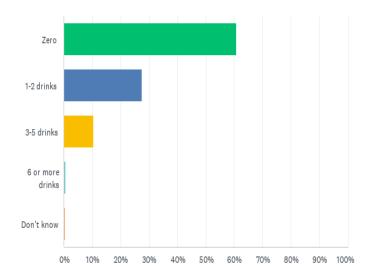
Q18 Do members of your household visit the dentist regularly?



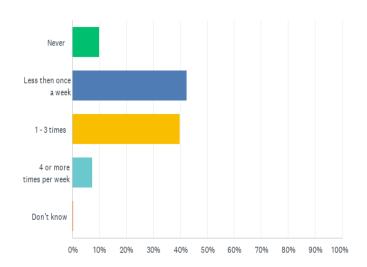
Q19 If you are employed, does your company have a health or wellness program that encourages healthy lifestyle choices?



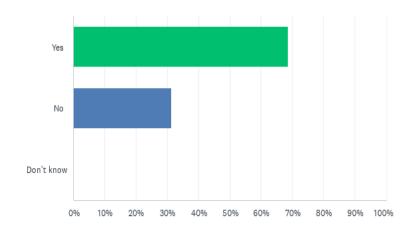
Q20 On an average day, about how many sodas (Coke, Pepsi, etc.) or sweetened drinks such as Gatorade, Red Bull, or Sunny Delight, do you drink? Do not include diet sodas or sugar-free drinks. Please count a 12-oz. as one drink.



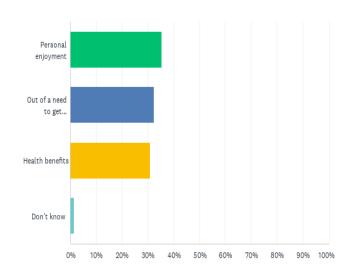
Q21 During an average week, how many times do you eat any food, including meals and snacks, from a fast food restaurant, like McDonalds, Taco Bell, Kentucky Fried Chicken or other similar places?



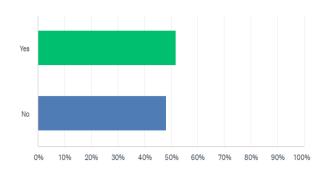
Q22 During the past month, did you participate in any leisure time or recreational activities such as walking, biking, gardening, or golf?



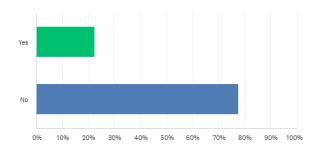
Q23 When you walk, is it normally for:



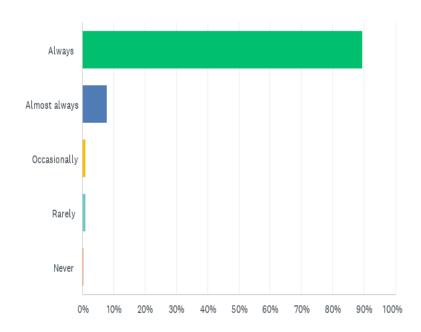
Q24 Have you volunteered in your community in the past 12 months?



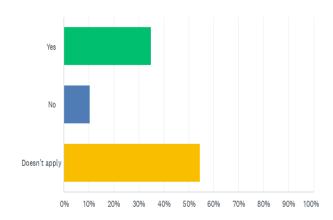
Q25 Do you want to volunteer in your community, but unsure how?



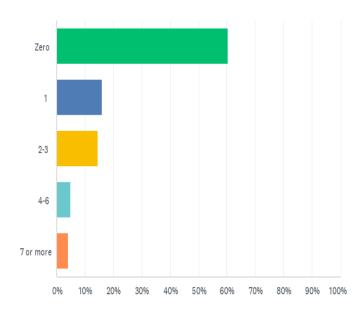
Q26 How often do members of your family use a seatbelt when riding in a car?



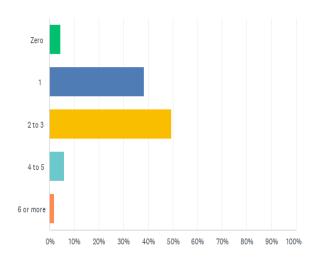
Q27 When riding a bicycle or ATV, do your children wear safety helmets?



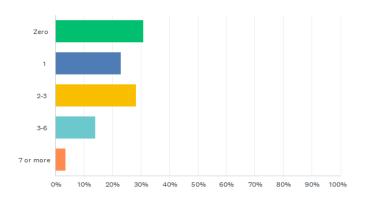
Q28 If you drink, how many drinks of alcoholic beverages do you have in a typical week? (A drink is one beer, or one cocktail)



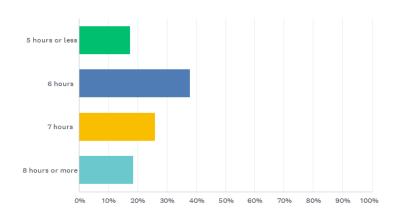
Q29 How many servings of fresh fruit or vegetables do you consume in a day? (a serving is a 1/2 cup)



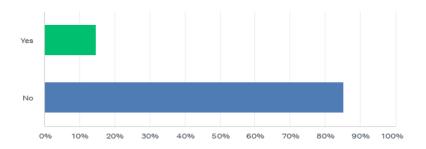
Q30 How many times a week do you engage in at least 30 minutes of strenuous physical activity?



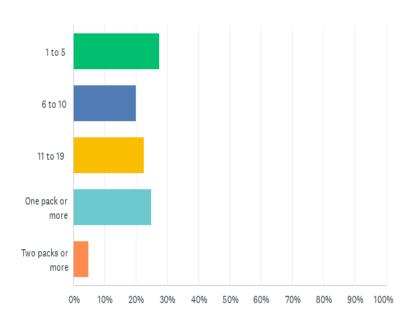
Q31 How many hours of sleep do you get each night?



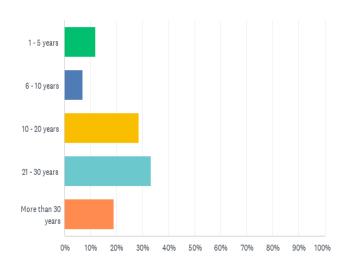
Q32 Do you currently smoke?



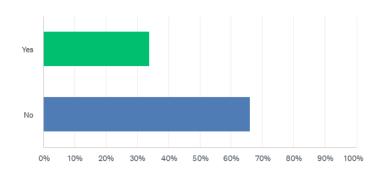
Q33 If you still smoke, on average, how many cigarettes do you smoke a day?



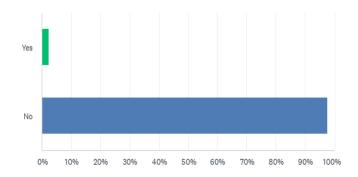
Q34 If you smoke, how many years have you smoked?



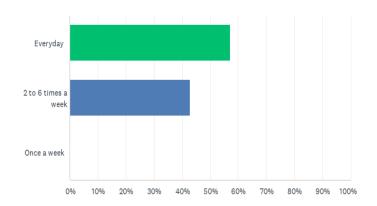
Q35 Have you smoked in the past, but have quit?



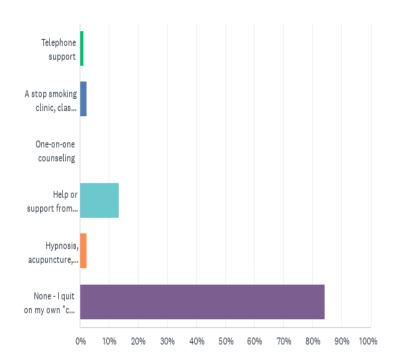
Q36 Do you use smokeless tobacco? If "yes", please answer the next question.



Q37 If you use smokeless tobacco, how often do you use it?



Q38 If you indicated that you once smoked, but quit. Thinking back to when you quit, which of the following did you find most helpful? (Check as many as apply)



As well highlighting the top five health concerns, there were other interesting results from the survey. A majority of respondents had been to a doctor in the past year. Around 30% of respondents considered healthcare as unaffordable with 5% considering the cost as a major problem. About half noted a mental health issue in their family and almost 90% saying there was not adequate help for those with mental health problems. Many of the other questions indicated a healthier than average group of respondents who had a low smoking rate (15%); eating healthy; staying away from sugary drinks, and rarely eating at fast food restaurants.

Phase Three Focus Group Concerns and Suggestions

The information for the Lewis County and Gilmer County Community Assessments began in the winter of 2022 and ended in May 2022, with the implementation of a Survey Monkey survey. Over 270 residents participated. This was the first phase of the Assessment. In May 2022, a staff member from Mon Health Stonewall Jackson Memorial Hospital coordinated focus groups in each county. Each of the focus group members were provided the Survey Monkey results and two other national surveys on West Virginia health statistics. This assessment is the fourth one created by SJMH in cooperation with the Lewis County Health Department. This is the second that SJMH cooperated with the Gilmer County Health Department in creating an assessment for that County.

2022 Community Assessment Focus Group May 18, 2022 Lewis County Senior Center

Nine city and county representatives were present to discuss the top three survey results of Drug Addiction, Obesity, and Mental Health. The following is a synopsis of the meeting.

ADDICTION CONCERNS

- Direct link between substance usage and mental health
- Abuse of the insurance system for treatment of addicted patients...is this another broken system?
- Lack of hope for people here
- Kids don't care
- Lack of staffing for local Department of Health and Human Resources
- Vaping among students, both CBD/THC is a problem
- Many children living with a grandparent, but is that a good solution? Some participants felt that the grandparents had failed their own children...will they be doing the same to their grandchildren?
- There is an increase of STDs in the school system
- Child neglect is an issue
- Unfair to police departments to handle social worker situations
- With so many substitute teachers it is tough to provide a drug curriculum
- No school administrators live in the county

- There is a great homeless problem 160 homeless assessments done by the FRN. The community doesn't know how many homeless people there actually are here.
- The Adverse Childhood Experience (ACEs) score for West Virginia is high indicating one's statistical chance of suffering from a range of psychological and medical problems like chronic depression, cancer, or coronary heart disease.

SUGGESTED ADDICTION SOLUTIONS:

- Need positive social norming by a positive interaction with law enforcement
- Need curriculum for substance usage prevention
- There is a new program that will place sharps containers throughout the city/county
- Education on drug usage should start in elementary school. The group felt that waiting until middle school was too late.
- Dr. Gorby has opened a Recovery Care Center next to Mon Health Stonewall Jackson Memorial Hospital
- The Saint Joseph Recovery Center out of Parkersburg is open
- There is a Harm Reduction program available at the Lewis County Health Department
- Local psychologist Don Worth provides services.
- There is a weekly addiction treatment bus coming to the Broad Street Church

OBESITY CONCERNS

- Lewis County is a food dessert
- Grocery stores within walking distance are expensive
- Lack of transportation to go to Walmart for many for food shopping
- Local high rises and low-income housing have no transportation to food stores

SUGGECTED OBESITY SOLUTIONS

Promoting the following:

- Farmers Market
- Meals on Wheels
- Family Resource Food Pantry
- Fitness facilities
- Playgrounds
- School-based health center at high school

MENTAL HEALTH CONCERNS

- Close link of addiction and mental health
- Thirteen hospitals in the state to take patients but it will take a policeman a full shift to do an intake – hospitals are still faxing. There might be beds available, but people are using 1980s technology to do an intake. It is a statewide issue. It would be great if hospitals would work a little faster.
- Adding Highland Hospital to outlets would be great
- Sharpe Hospital was held in contempt and must improve the process for intake.
 Deputies and officers are the only ones who must sit through the whole process.
 The whole system is broken.
- Officers are not psychologists...but they have to deal with the threats, etc.
- Prevention Education works
- No role models
- No self-esteem
- Never asked to perform
- Need more self-confidence
- Identify children who would benefit from the variety of programs available
- Need to ask families face to face to participate
- Pandemic made mental health issues worse
- Therapy is expensive, difficult to get children into treatment
- Lewis County's rate of "poor mental health days" is 6.1 while the national benchmark is 3.8 days and there is 1 mental health provider for 570 people compared to the national benchmark of one for 270 people.
- High ACEs score in state. WV ranks 4 on a scale of ten for the ACE program.
 Life expectancy drops by 15 years with a low score.

SUGGESTED MENTAL HEALTH SOLUTIONS

- Psychologist Don Worth has an office in Weston
- Several churches offer grief counseling
- The FRN for mental health referrals

Ongoing Strategies for Health Concerns

Two hundred seventy individuals answered the question on common health problems, answered a scale of one to five, with five as the worst health problem. The top five concerns were:

Drug Addiction (60.83) Obesity (50.43%) Mental Health Issues (38.81%) Heart Disease (34%) Diabetes (29.8%)

The following is a breakdown of the detailed efforts Mon Health SJMH and the Health Departments have currently developed to combat these issues.

Strategies for Combatting Drug Abuse

- Mon Health SJMH has opened a Medical Assistance Treatment (MAT) program for residents, along with the Mon Health System's Recovery Programs at each Mon hospital for substance usage addiction. The local Recovery Program is coordinated by Bruce Gorby, DO.
- The Lewis County Health Department created a Harm Reduction program with support from SJMH.
- SJMH's Emergency Department has adopted the West Virginia Hospital Association Guidelines for Prescribing Opiates.
- Lewis County now has a drug court
- Nursing staff at SJMH is required to complete continuing education on "Drug Diversion Education on Opiates."
- All SJMH pharmacists are required to complete continuing education on "Drug Diversion Education on Opiates" when applying for their licensure.
- All SJMH physicians are registered with the West Virginia Board of Pharmacies.

Strategies for Combatting Mental Health Issues

• Psychologist in the community

Strategies for Combatting Obesity/Promoting Physical Activity

- SJMH has an Adult Fitness program, which is conducted Tuesdays and Thursdays in the morning in the Stonewall Jackson Memorial Hospital Cardiac Rehab Department. This is a very low-cost way to modify risk factors.
- SJMH created a county-wide walking group Pace Yourself Lewis County which has created monthly walk/runs.
- SJMH has created a safe walking path in the parking lot for the Hospital to promote physical activity for employees and the community.
- SJMH has worked to refurbish an old playground, planted an urban orchard, and provided raised gardens for 10 gardeners at the high rise.
- SJMH does not serve pop at activities and provides healthy snacks for a variety of children's events, especially those associated with the Lewis County 4-H program.

Strategies for Combating Cardiac Disease:

 The Cardiac Rehab Department goes to Sharpe Hospital, the second largest employer in the county, for a Healthy Heart Fair every February to promote healthy lifestyle choices, as well as having a Healthy Heart Fair during February at the Hospital.

- The Cardiac Department participates with a local college and federal correction center to provide heart disease education.
- SJMH provides screenings throughout the year for blood pressure, blood glucose, pulse oximetry, etc.

Strategies for Combating Diabetes:

- SJMH conducts three comprehensive blood screenings each year two in the spring and one in the fall. This is done in cooperation with the Weston Rotary Club.
- The Health Departments provide very low-cost screenings for the public during office hours. For example, a customer can receive a blood glucose test, blood pressure, weight, and height screening for free. The nurse director can provide nutritional education for customers.
- SJMH provides free annual blood screenings for the SJMH employees.
- SJMH trained a dietitian and nurse to conduct diabetes education classes

Collaborators on these screenings and strategies:

- American Cancer Society
- Central West Virginia Community Action
- Center for Organ Recovery and Education (CORE)
- Family Resource Network
- · Lewis County Board of Education
- · Lewis County Health Department
- Lewis County Family Resource Network
- · Saint Patrick School/Church
- Sharpe Hospital
- Stonewall Resort
- The HUB
- · Try This Conference
- Weston Rotary Club
- West Virginia Department of Rehabilitation
- West Virginia University Extension Service

Distribution for Community Health Assessment Results:

The Mon Health Stonewall Jackson Memorial Hospital/Lewis County Health Department Community Health Assessment is available to all employees of both organizations. The publication is marketed in the local newspaper, on radio, and through Facebook. The publication is available in physician offices. The publication is posted on the Mon Health Stonewall Jackson Memorial Hospital website – www.stonewalljacksonhospital.com and the Health Department Facebook page. The results are made available at both the Health Departments and SJMH.