



## **Community Health Needs Assessment**

Established in 1966, ChangePoint Integrated Health is a private, non-profit comprehensive community mental health center. Located in rural northeastern Arizona, the primary service area today includes all off-reservation Navajo County, Arizona, including the population hubs of Winslow, Holbrook, Show Low, Snowflake-Taylor, Heber-Overgaard, and smaller communities of Sun Valley, Woodruff, Joseph City, Linden, etc. Eligible individuals living in other service areas, including the Indian Reservation may, by their own choice, seek and obtain services from ChangePoint.

A 2016 report based on findings from the Robert Wood Johnson Foundation and University of Wisconsin study ranks the Overall Health Outcomes for residents of Navajo county at **12** out of 15 (countyhealthrankings.org). This study looks at a variety of measures that affect the future health of communities and ranks each county in all 50 states. The purpose of reviewing this data is to support agencies such as ChangePoint in identifying areas within our population that would assist in promoting health initiatives by increasing the awareness of risk factors. The specific factors involved in reaching the overall ranking which reflects the needs of this community are reflected in the low ranking in the following areas of life (1=most favorable):

Length of Life (premature death) =**13**

Quality of Life (physical health/mental health/birthweight) =**13**

Health Factors (smoking/obesity/physical inactivity/access to exercise/excessive drinking/alcohol-impaired driving/sexually transmitted infections/teen births) =**9**

Clinical Care (uninsured/pcp's/dentists/mental health providers/preventable hospitalization/diabetic monitoring/mammography screening) =**10**

Social & Economic Factors (HS graduation/college enrollments/unemployment/children in poverty/single-parent households/social associations/violent crimes/injury deaths) =**14**

Physical Environment (air pollution-particulates/drinking water violations/severe housing shortages/driving alone to work-long commutes) =**3**

To address the overall needs of our community, ChangePoint has worked in collaboration with Summit Healthcare Regional Medical Center since February 2013 as part of a community needs health initiative. Findings from their surveys reflected that the six highest areas of unmet needs were: mental health services, substance abuse treatment,

obesity treatment, specialty physicians, services for uninsured, Alzheimer's disease & other dementia. The outcomes of this initiative have focused on increasing the access to our services at ChangePoint (intakes, psychiatric crisis services) and working toward an integrated or co-located clinic involving telepsychiatry.

The need to address chronic disease management in a coordinated effort is seen in the lack of compliance with treatment and prevention guidelines:

34% high cholesterol	county ranking=5
21% high blood pressure	county ranking=1
13% asthma	county ranking=5
11% diabetes	county ranking=10
4% heart attack	county ranking=4 (tie)
4% stroke	county ranking=8
43% blood sugar tests (diabetics)	county ranking=14

Table 1 shows the population estimates for Off-Reservation Navajo County, the primary service area for ChangePoint.

Table 2 shows that utilization of alcohol and other drugs by 10<sup>th</sup> and 12<sup>th</sup> graders in Navajo county parallels or exceeds that of state-wide 12<sup>th</sup> graders, regarding usage of chewing tobacco, marijuana, Rx pain relievers, and over-the-counter drugs to get high. Use of these substances by youth is risk for future drug, alcohol and mental health problems, especially for youth who begin their use at younger ages, and support the need for local behavioral health services.

From 2003 through 2013, suicide rates on Navajo County have been consistently higher than the state average, shown in Table 3. Again, such data supports the need for the availability of local behavioral health services.

### **Population Served**

Table 4 presents the number of unduplicated customers served in the ChangePoint system for Fiscal Years 2010-2011, 2011-2012, 2012-2013 and 2013-2014. Most individuals served fall into one of four state-designated behavioral health treatment populations (Serious Mentally Ill, Children, Mental Health, Alcohol and Drug—see Table 5). The treatment populations are subdivided by funding source (Title 19 and Non-Title 19), which may dictate the amount and type of behavioral health services available. Fewer

individuals are served in the developmental disability program than the behavioral health program, a function of funding and community need. Gender and age-breakdowns are presented in Tables 6 and 7, respectively.

Table 1

*Population Estimates for Off-Reservation Navajo County*

	Under 18 Years of Age	Over 18 Years of Age
Off-Reservation Population	18,972	46,001

Source: Census 2010 Demographic Profile Data

Table 2

*Percentage of Student Using Alcohol and Other Drugs in Past 30 Days*

		Grade 10		Grade 12		12 <sup>th</sup> Grade State	
		2012	2014	2012	2014	2012	2014
Alcohol	More than just a few sips	23.0	20.3	30.5	30.1	43.5	40.6
Chewing Tobacco	Smokeless tobacco	8.2	10.5	10.7	17.3	6.6	10.4
Marijuana	Used Marijuana	13.1	15.1	16.7	15.5	22.5	22.9
Methamphetamines	Used Methamphetamines	0.3	1.0	.4	.3	.5	.4
Rx Pain Relievers	Such as OxyContin w/o script	6.6	4.7	9.4	4.4	7.9	5.5
Over the Counter	Used to get high	5.5	3.0	6.0	3.0	4.3	3.4
Cigarettes	Smoked cigarettes	11.2	13.4	18.1	15.3	21.0	15.7

Source: 2014 Arizona Youth Survey, Navajo County

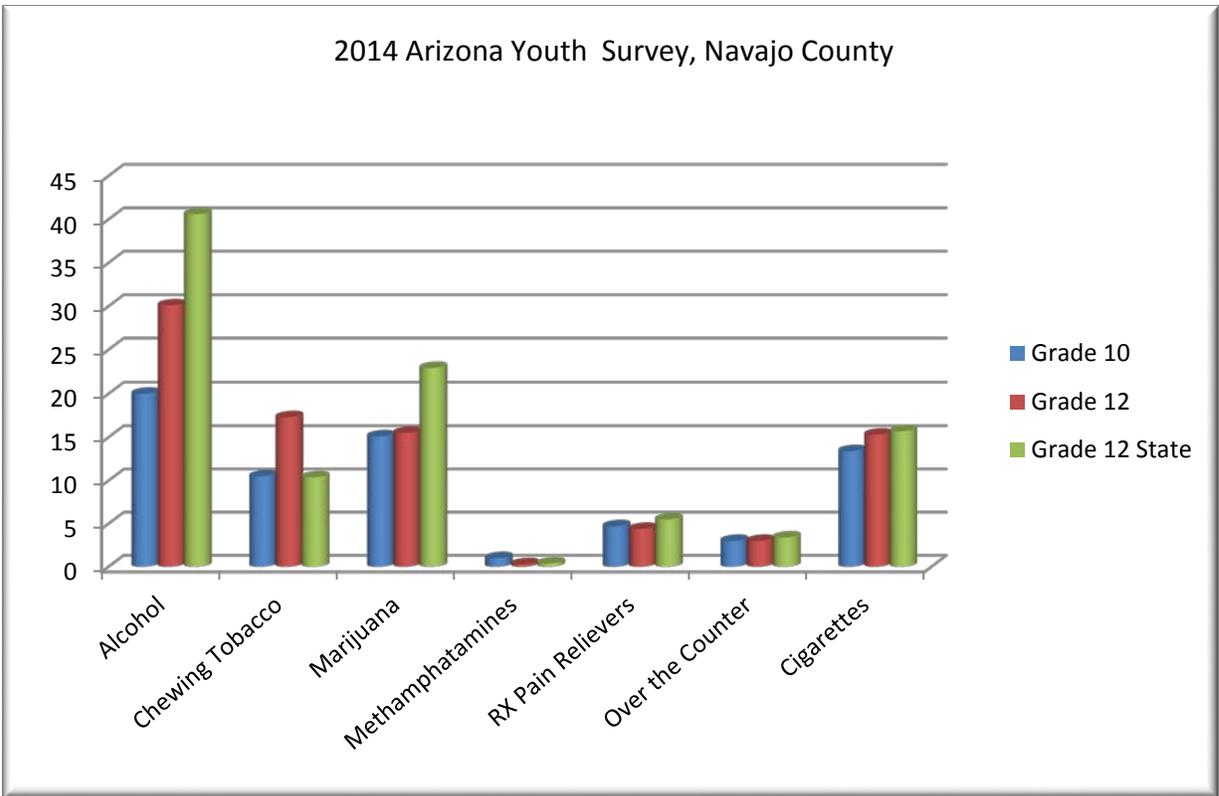


Table 3

*Navajo County Suicide Rates Vs. State Suicide Rates, per 100,000 Population*

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<i>County</i>	28.9	19.5	21.8	24.9	15.6	12.2	19.9	30.7	30.8	30.6	33.2
<i>State</i>	14.3	14.6	15.1	15.2	15.3	14.8	16.1	16.7	14.5	16.5	16.2

Source: Suicide Mortality Rates By County of Residence, Arizona Residents, 2003-2013

Navajo County Suicide Rates vs. State Rates  
per 100,00 Population

