

Health Equity in the Outdoors

National Benchmark 2018-

- Percentage of the Population living in a Rural Area: 23%
- Average Income (median): \$61,937
- Percent population under 5: 6.4%
- Percent population over 65: 15.2%
- Obese Adults over 20: 36.5%
- Respondents with no physical activity past 30 day: 24.89%

Vermont-

- Percentage of the Population living in a Rural Area: 61%
- Average Income (median): \$60,076
- Percent population under 5: 4.7%
- Percent population over 65: 20%
- Obese Adults over 20: 25%
- Respondents with no physical activity past 30 day: 20%

Brattleboro Memorial Hospital:

- Percentage of the Population living in a Rural Area: 95%
- Average Income (median): \$50,917
- Percent population under 5: 4.4%
- Percent population over 65: 22.0%
- Obese Adults over 20: 25%
- Respondents with no physical activity past 30 day: 18%

Health Issues & Conditions:

- Diabetes, Obesity, Weight Management
- Mental Health (Stress, Anxiety, Depression)
- Substance Abuse
- Healthy Aging
- Dental Health
- Smoking/Tobacco Use
- Heart Disease (Hypertension, High Cholesterol)

Barriers to Achieving Good Health:

- Financial Constraints
- Lack of Education/Knowledge
- Transportation Limitations

Relationship to Health Equity:

The high rates of obesity among minority populations mainly exists within urban areas with a lack of resources, one of which being access to safe outdoor recreation spaces. Obesity is an increasingly prevalent issue within the United States, and while Caucasian children have an obesity rate of 14.1%, both Hispanic and Black populations have rates much higher. Hispanic children have an obesity rate of 25.8% and Black children 22%. The rates of obesity are not only disproportionate among races, but also among socioeconomic status. Obesity prevalence drops to 10.9% within the highest income group and ranges between 18.9-19.9% among middle and low income groups. Statistically minorities have higher rates of obesity due to the many factors surrounding their health and socioeconomic status. The analysis of the needs of communities across Northern New England brings to light the disparities that are occurring, focusing on how they relate towards an individual's relationship with the outdoors.

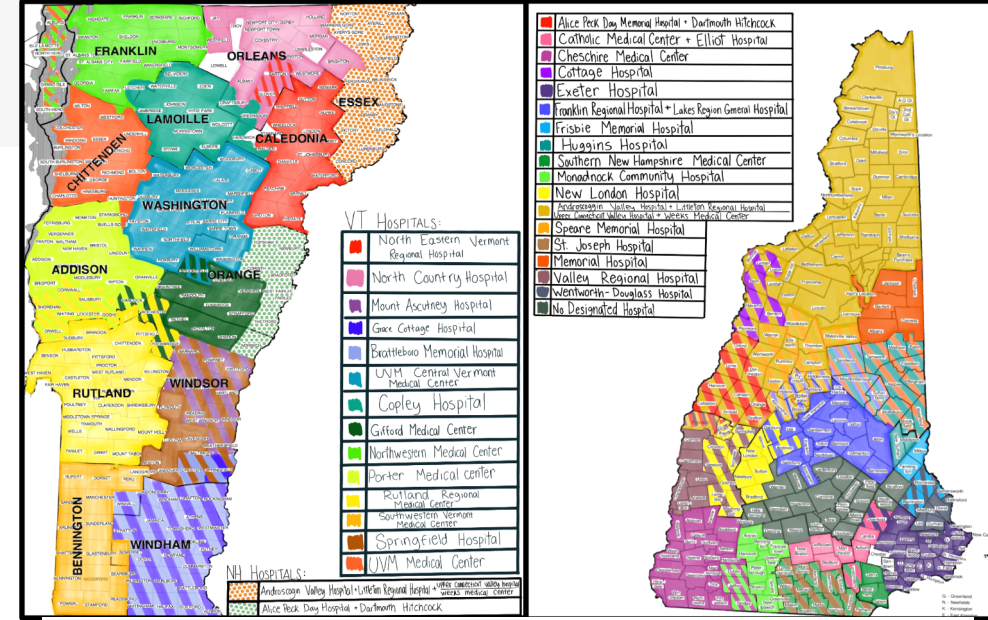
Application to the Trust for Public Lands:

The main role within the internship centered around the analysis of the Community Health Needs Assessments (CHNA). The analysis was done for every non-profit hospital within Vermont, New Hampshire, and Maine. Non-profit hospitals are required to complete a CHNA every 3 years to maintain their tax-exempt status. These reports provide a description of the service area and of the primary health issues and conditions that the hospital plans to address. Assessing these reports every three years shows the benefit of the hospital to the community and provides a summary of the population served. Using this information allows for an accurate portrayal of the community and the disparities within the county and/or state.

The information assembled from this research allows for the Northern New England branch of the Trust for Public Land to have accurate and accessible information about the communities that they are serving. These summaries can be used to identify underserved communities that could benefit from access to public lands and a partnership with the Trust for Public Lands. The reports additionally serve as a resource for meetings with current or potential donors to display the communities needs.

State	Hospital	Health Issues	Obesity %	Inactivity %	Avg. Income \$	% < 5	% > 65	% Rural
National	AVERAGE		36.5	25.89	61,937	6.4	15.2	23%
Vermont	AVERAGE		25	20	60,076	4.7	20	61
Vermont	Brattleboro Memorial Hospital	Diabetes, Obesity, Weight	25	18	50,917	4.4	22	95
Vermont	Central Vermont Medical Center	Substance Use Disorders	25	18	58,611	4.4	22	95
Vermont	Copley Hospital	Preventative care	33.7	20	53,086	5.1	6.7	100
Vermont	Gifford Hospital	Obesity	28	24	55,183	4.5	19.2	95
Vermont	Grace Cottage Family Health and Hospital	Diabetes/Obesity/Weight	25	18	50,917	4.4	22	68.2

Grace Simmons, University of Vermont. New England Public Health Training Center, Health Equity Final Project.



The above graphics were created as a tool for identifying the appropriate community health needs assessments. A town of interested can be located on the map and use the color coding to find the associated hospital(s) that serve that town.

Once the hospital has been Identified, a document with summaries and relevant statistics can be viewed. This document (as shown on the far left) first summarizes some of the service area's demographics. These include: Percentage of Population living in a Rural Area, Average (median) Income, Percent of the Population under age 5, Percent of the Population over age 65, Percent of obese adults, and the Percent of adults with no physical activity within the last 30 days. The document also provides a summary of the primary health issues and conditions for that service area, and when applicable, the barriers faced in improving health. In addition there is a digital link to the full CHNA, so the full report can be read more in depth. The information from each service is also available in Microsoft Excel (as shown below) to allow for easier sorting of the service areas and analysis of health status.

