
**RHP 17 REGIONAL
HEALTH ASSESSMENT
2013**

**SUPPLEMENTAL REPORT:
BRAZOS COUNTY**

PREPARED BY:

CENTER FOR COMMUNITY HEALTH DEVELOPMENT

TEXAS A&M HEALTH SCIENCE CENTER

SCHOOL OF RURAL PUBLIC HEALTH

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INTRODUCTION

The 2013 Regional Health Assessment, conducted by the Center for Community Health Development (CCHD) at the Texas A&M Health Science Center School of Rural Public Health (SRPH), covers the nine-county region of south-central Texas consisting of Brazos, Burleson, Grimes, Leon, Madison, Montgomery, Robertson, Walker, and Washington Counties. The *Executive Report* provides comprehensive descriptions of methodology, as well as regional findings. The supplemental reports are intended to provide specific regional and county-level data.

This report presents the health status assessment findings for Brazos County. Most data and comparisons given will be compared to the Brazos Valley region (the seven counties comprising the Brazos Valley), the state, or the nation. For specific regional-level data, please refer to the regional *Executive Report*. Unless otherwise noted, the data presented are for Brazos County respondents.

FINDINGS

Community Discussion Groups

Ten community discussion groups (CDGs) were conducted in Brazos County with 218 total participants. Those participating represented the diversity of the county's population; attendees were 32.7 percent male and 67.3 percent female, and 51.4 percent White/Caucasian, 16.9 percent Black/African American, and 30.6 percent Hispanic/Latino. These discussion groups were conducted from February to July 2013. Four audiences were targeted to attend these open meetings to provide a forum for community members to discuss various issues, challenges, and resources in their community related to health: key community leaders, health care providers, social service providers, and the general public (i.e. residents) of Brazos County. These meetings served to gain perspective on the health status of the community and to provide context for analysis of the survey data. The discussion groups also allowed access to sectors of the population that are underrepresented in the household survey. Discussion groups were held at several donated locations throughout Brazos County, including:

- Brazos Valley Council of Governments,
- College Station Medical Center,
- St. Joseph Regional Health Center,
- Scott & White Clinic,
- Washington Chapel Baptist Church,
- Santa Teresa Catholic Church,
- SOS Ministries,
- The Lincoln Center, and
- Clara B. Mounce Public Library.

Community

Brazos County residents described their community as a great place to raise a family with a friendly and supportive environment. Residents said the area is diverse, with growing population of both younger and older adults. This growth provides a strong volunteer base for civic activities and enhances the community’s philanthropic efforts. However, discussion group participants also said that growth has brought challenges such as a lack of adequate services for the older adult population and an increasing disconnect between younger and older generations.

Community discussion group participants said the county’s stable economy has buffered the economic downturn felt in other areas of the country. The stable economy is largely due to local employers like Texas A&M University, Brazos County, the cities of Bryan and College Station, and local school districts. The strong economy is also related to the county’s central location and close proximity to larger cities of Houston, Austin, Dallas, and San Antonio, which offer resources to the community. Local residents also said the university influences the unique character of the community through its strong sense of tradition related to school activities.

Community Issues & Challenges

Several community issues were brought up in the community discussion groups—some pertaining to community context and others regarding issues and challenges facing residents.

Residents mentioned social issues such as poverty, economic disparities, racial tension, lack of education, lack of access to care for illegal immigrants, underemployment, and lack of minority leadership as concerns. Residents perceived these issues as contributors to an increase in substance abuse, specifically among young males. In addition to social concerns, residents cited a lack of vocational training as a community issue. While opportunities to go to an institute of higher learning, like Blinn Junior College and Texas A&M, are abundant, residents struggled to find options for technical training in fields like information technology.

Although some residents praised collaboration efforts between Bryan and College Station, many viewed the lack of partnership between the cities as problematic. They suggested finding

a way to repair relationships among different leadership groups within the community as a step towards a stronger alliance. In all of the discussion groups, inadequate communication was mentioned as an issue that needed to be addressed. Participants said that Brazos County residents, specifically Hispanic residents, did not know where or how to access resources and reliable information. They stated that more outreach and information should be targeted to the Hispanic community. Infrastructure was also cited as a concern for many residents; the main issues hinged on a lack of affordable housing, community expansion efforts, and a lack of economic development in aging areas of the county.

In the regional assessments conducted in 2002, 2006, and 2010, transportation was mentioned more than any other issue. Similarly, this year lack of public transportation was also raised in discussion groups. Community members said that the public transportation was neither reliable nor affordable to local residents.

In addition, many discussion group attendees were apprehensive about the lack of access to affordable health care. These concerns centered on eligibility for health care coverage, adequate care for the elderly population, access to affordable primary and specialty care, the need for behavioral health facilities and specialists, and limited social services. Chronic diseases related to obesity such as diabetes and high blood pressure, specifically among children, were also mentioned frequently by residents. These illnesses were attributed to unhealthy diets due to a lack of affordable, healthy food and healthy school lunch options.

Resources

Although several issues within the community were recognized, community discussion group participants identified many resources within the area as well. Brazos County serves as the hub for most health and human services in the region, with numerous organizations and programs available. Health care organizations that served the uninsured or medically indigent population were cited as a resource. Social service organizations and programs that provided assistance in transportation and senior nutrition were also recognized as a resource in the community. Both faith-based organizations, including local churches, and community-based organizations were mentioned as assets to local residents for offering community education activities like English as a Second Language instruction, computer classes, and technical trainings. In addition, participants highlighted numerous recreational and arts-focused activities as valuable to the community.

An overwhelming majority of discussion group participants identified local civic organizations such as the Lion's Club, Concerned Black Men, and parent teacher organizations to be resources within the community. Texas A&M University and its transportation services were also documented assets. Both economic and youth development activities were seen to be resources, as well as local schools and media. Lastly, residents identified human capital in the form of local volunteers and volunteer-based organizations to be valuable resources within the community.

Household Survey

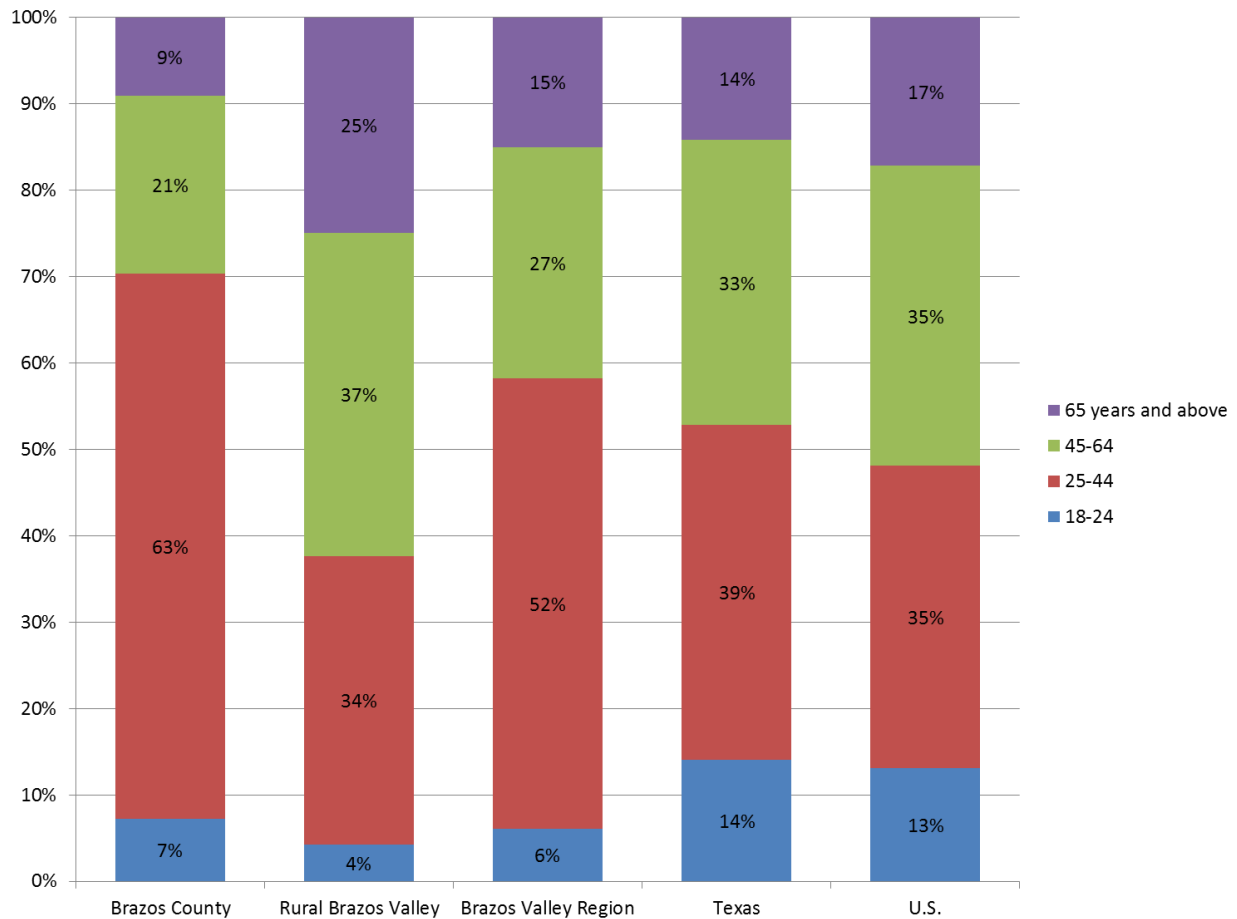
The household survey was developed and pilot tested by the Survey Committee (see Regional Report for more details). As typical in survey research, those who actually responded to the survey disproportionately represented older residents, Caucasians, and those more educated and affluent. To balance some of this bias, the analysis for this report was performed on scientifically weighted data by weighting the responses to match the age and gender distribution by county based on current Census estimates. Even with the weighting, however, we also know by comparison to Census estimates that the current sample under-represents low-income residents. This should be considered when interpreting the results; the survey analysis likely indicates a more positive reflection of the community than actually exists. Regardless, the data provides us a useful snapshot of what residents are currently experiencing. This survey was used to collect comprehensive information regarding factors affecting health status from a random sample of RHP 17 residents, with 1,622 surveys completed in Brazos County. What follows are the results from those Brazos County surveys.

Demographics

Age and Gender

The mean age of survey respondents from Brazos County was 40.5 years. Compared to the region, Brazos County has a younger population than the rural Brazos Valley counties, the Brazos Valley region, Texas, and the U.S., which can in part be attributed to the student body at Texas A&M University and Blinn College's Bryan Campus. Figure 1 illustrates the age distribution for Brazos County compared to the rural Brazos Valley counties, the Brazos Valley region, Texas, and the U.S.

Figure 1. Age distribution in Brazos County, rural Brazos Valley counties, Brazos Valley region, Texas, and U.S.¹

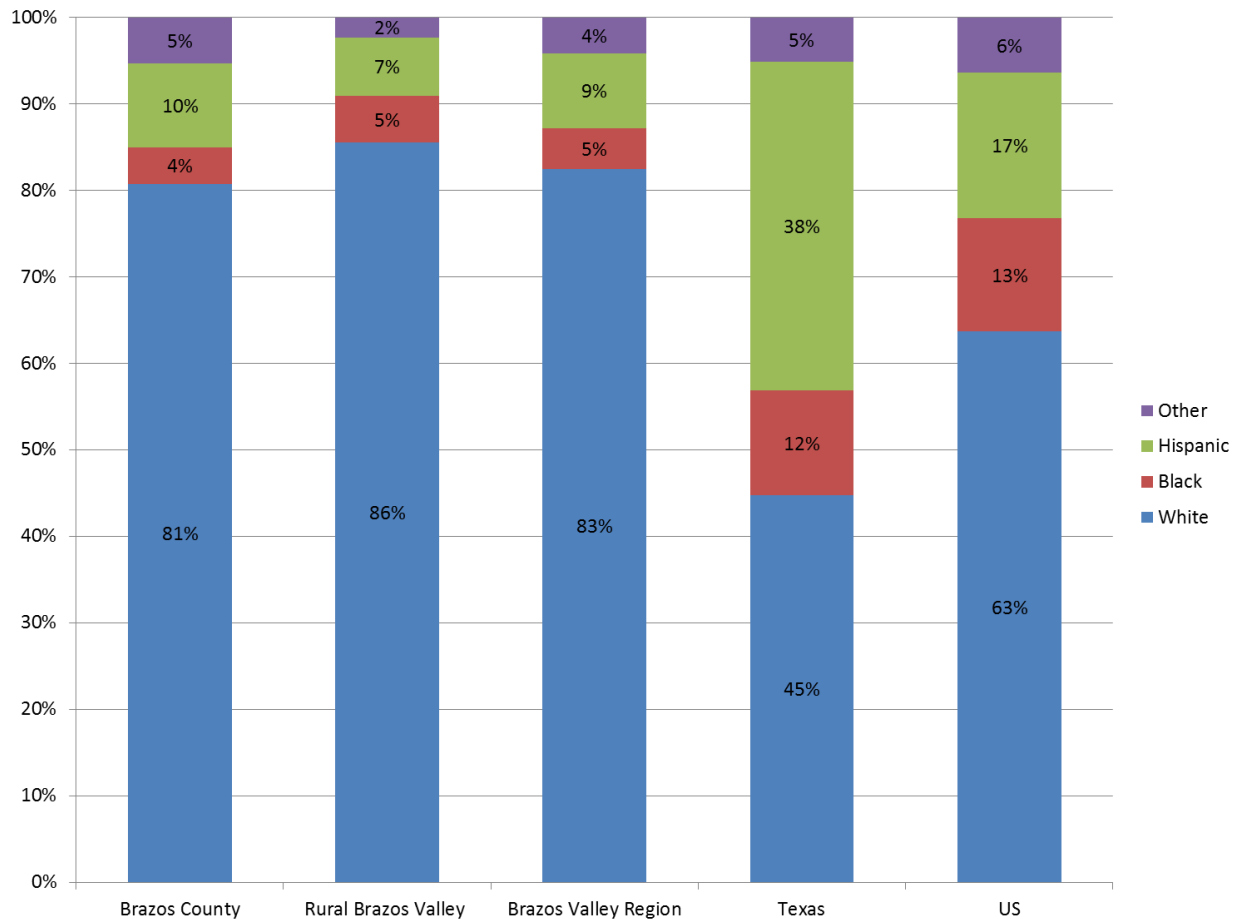


Race and Ethnicity

Survey respondents were asked to indicate the racial or ethnic group they felt best described them. A majority of Brazos County survey respondents identified themselves as White/Caucasian (80.7%), 4.3 percent indicated Black/African American, and 9.7 percent Hispanic/Latino. Comparing these figures to 2011 Census estimates indicates that minority groups are underrepresented in this survey sample. Other respondents identified themselves as Asian or Pacific Islander, Native American, and as more than one race. Because of these relatively small numbers, these last three categories were combined into a single group called “All Other Races” for the purpose of analysis (total of 5.3%); this label will be used throughout the report. Figure 2 shows the racial/ethnic distribution of Brazos County survey respondents.

¹ <http://quickfacts.census.gov/qfd/states/48000.html>

Figure 2. Racial/ethnic distribution of survey respondents in Brazos County, rural Brazos Valley counties, Brazos Valley region, Texas, and U.S.²



Marital Status

The majority of Brazos County survey respondents reported being married (72.1%); 16.1 percent reported their marital status as single (never married); 5.4 percent reported being separated or divorced; 2.4 percent were widowed; and 4.1 percent indicated they were unmarried, living with a partner. In comparison, 49.6 percent of Texas residents and 48.3 percent of U.S. residents are married; one-third (31.4% in Texas and 32.5% in the U.S.) of residents are single, while 13.7 percent of Texas residents and 13.2 percent of U.S. residents are separated or divorced. The remaining proportion of residents in Texas and the U.S. are widowed (5.2% and 6% respectively).

Household Composition

The mean household size for Brazos County survey participants was 3.3 persons. The average household size is 2.8 persons for Texas and 2.6 persons for the U.S. Among respondents, 57.4 percent reported having children under 18 years of age living in their household. Statewide,

² <http://quickfacts.census.gov/qfd/states/48000.html>

61.1 percent of households do not have children, and nationally, 64.4 percent of households are childless.

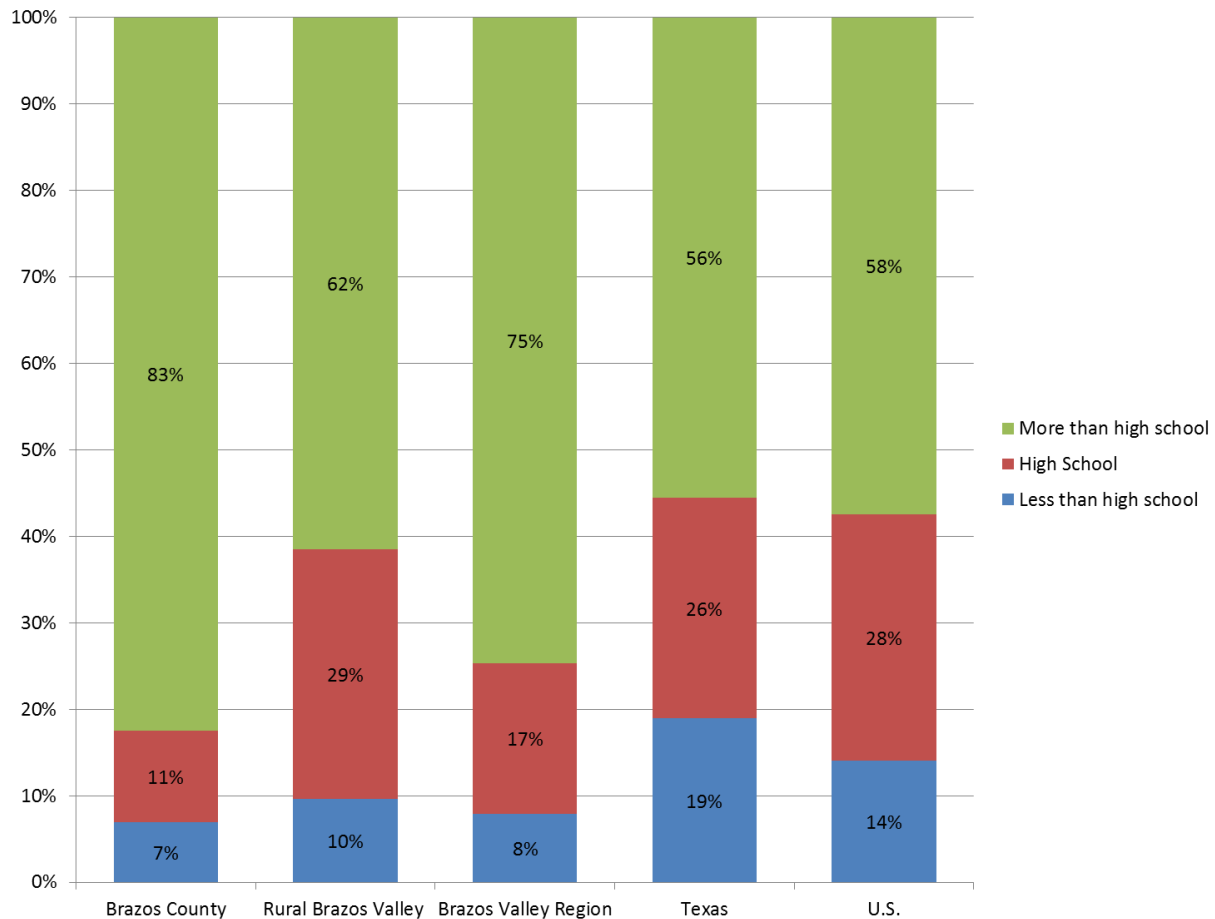
The survey also asked respondents how many people in their household earned wages that contributed to their household income. In response, 6.5 percent reported that **no one** living in the household was contributing to the household income. Half of respondents said that one person contributed all of the household income (50.5%), 37.3 percent said two people contributed to the household income, and 3.5 percent said three people contributed.

Education

Education is an important social factor that influences health status. The mean years of education attained for survey respondents in Brazos County is 15.2, the equivalent of a high school diploma plus over three years of college. Given the emphasis on education in Brazos County, it is not surprising that the vast majority of residents have continued their education past high school. Among Brazos County survey participants, 6.9 percent reported not completing high school, while 10.6 percent received their high school diploma, and 82.5 percent proceeded to complete at least some college credit. In comparison, 19.6 percent of Texans over the age of 25 did not complete high school, and nationally, this figure is 14.6 percent³. Figure 3 presents a comparison of educational attainment for Brazos County compared to the rural Brazos Valley counties, the Brazos Valley region, Texas, and the U.S.

³ <http://quickfacts.census.gov/qfd/states/48000.html>

Figure 3. Educational attainment of survey respondents in Brazos County, rural Brazos Valley counties, Brazos Valley region, Texas, and U.S.⁴



Employment

Among Brazos County survey respondents, 65.9 percent reported they were currently employed. Of those who were employed, the vast majority said they only had one employer (91.4%), but 5.8 percent said they had two employers, and another 2.7 percent reported three or more employers.

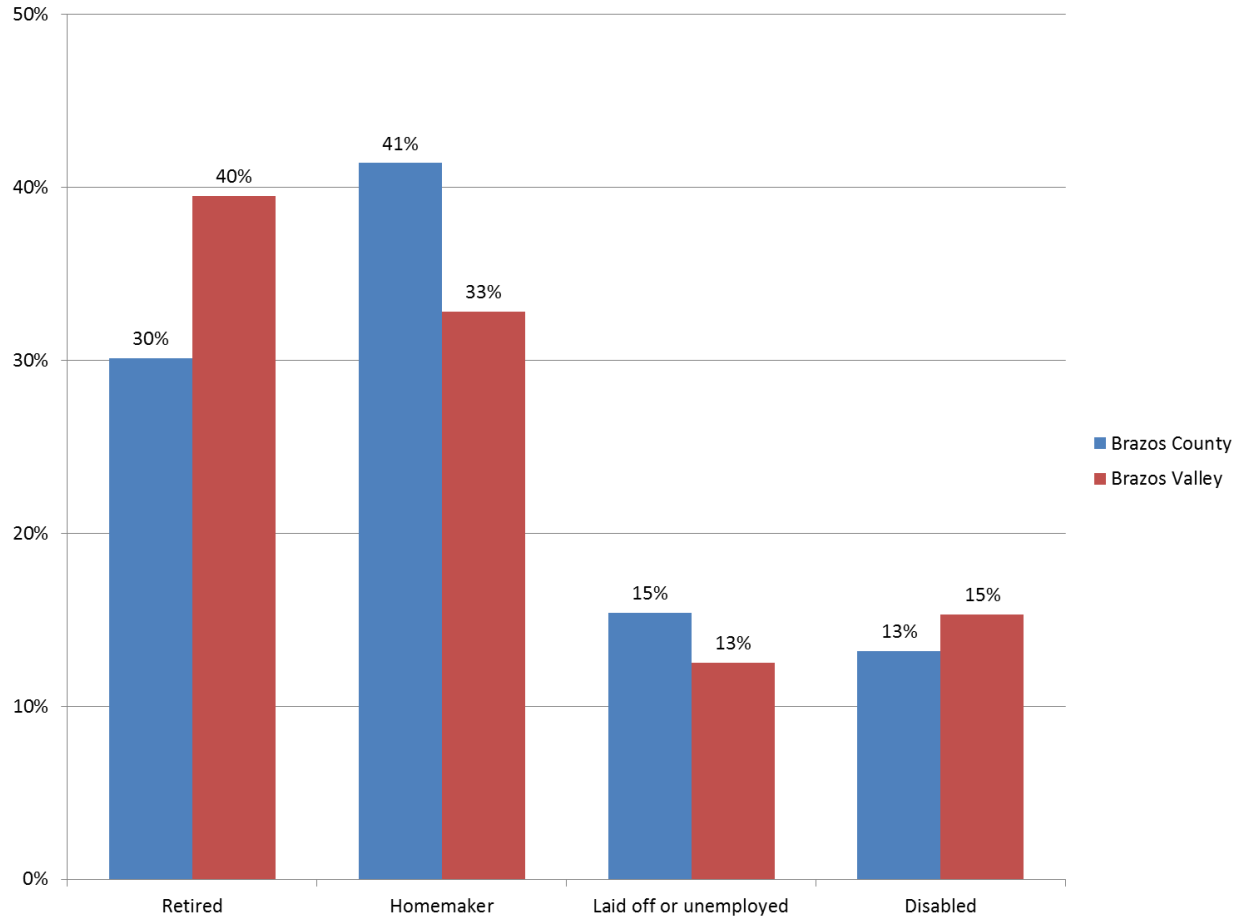
According to the U.S. Bureau of Labor Statistics, the unemployment rate for the State of Texas was 6.5 percent in May 2013. Locally, the Texas Workforce Commission reports that the unemployment rate for Bryan/College Station in May 2013 was 5.6 percent. May 2013 rates were used to provide a more accurate comparison to the survey data, collected between February and July.

Of survey participants who reported that they were not employed, 37.9 percent were retired, 34.6 percent were full-time homemakers, 15.8 percent indicated they were disabled and

⁴ <http://quickfacts.census.gov/qfd/states/48000.html>

unable to work, and 11.7 percent were laid off or unemployed. Figure 4 illustrates the responses of Brazos County residents who were not currently employed.

Figure 4. Percentage of responses regarding work situation if not currently employed

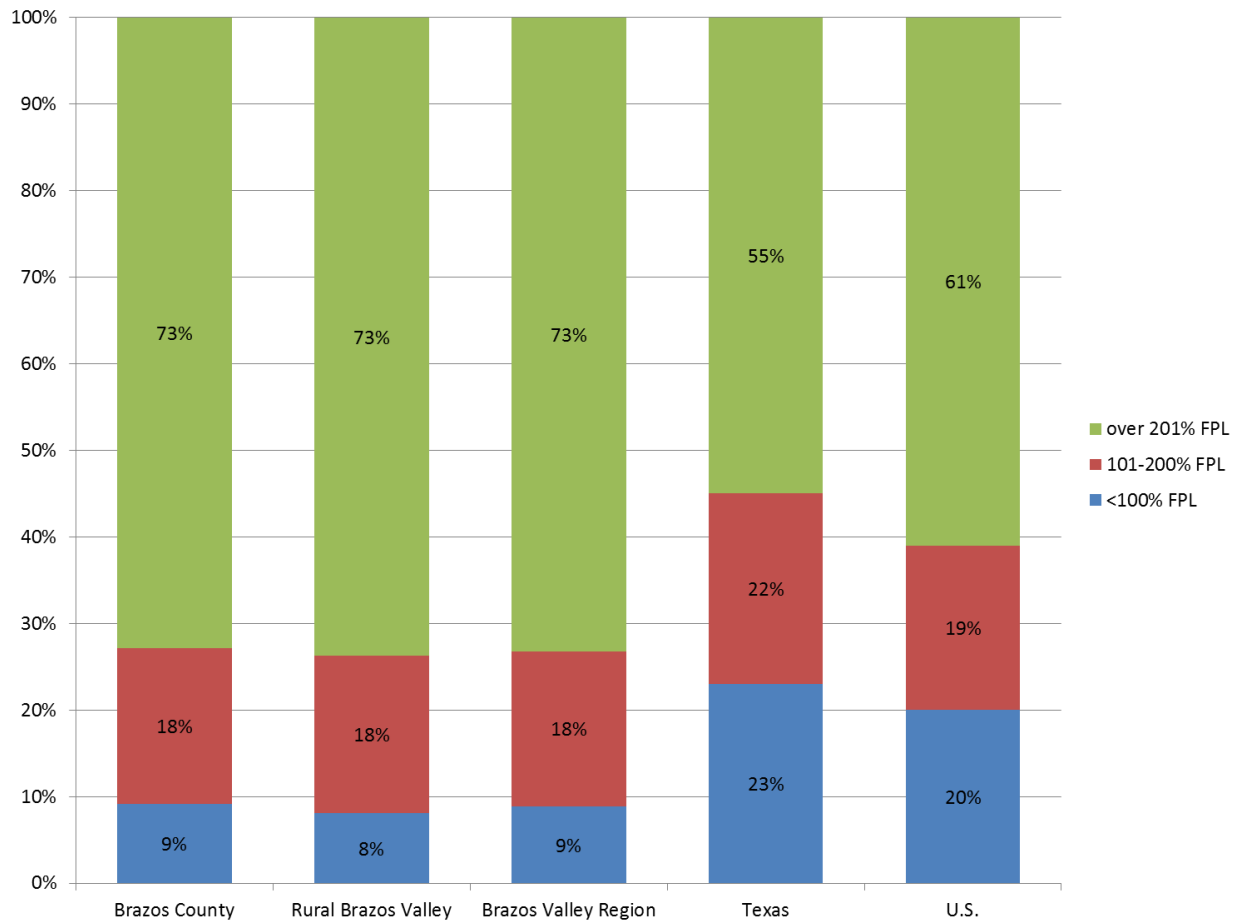


Household Income

Among survey respondents in Brazos County, the median household income was \$70,000 for 2012, which is higher than census estimates for Texas (\$50,920) and the US (\$52,762). This is not unusual for a sample survey, as low-income residents are often less likely to be reached or to agree to complete a survey.

The Federal Poverty Guidelines set the federal poverty level (FPL) for 2012 at \$23,050 for a family of four. Among the survey respondents, 9.2 percent reported incomes at or below FPL, with another 17.6 percent between 101 and 200 percent FPL, which is generally considered low-income. The rate of poverty and low income in Brazos County is slightly lower than the U.S. rates (20% and 19% respectively). The rate of poverty is slightly higher in Brazos County compared to the rural Brazos Valley counties, but the figures for low-income are similar. Figure 5 compares the poverty status for Brazos County survey respondents compared to the rural Brazos Valley counties, the Brazos Valley region, Texas, and the U.S.

Figure 5. Poverty status for survey respondents in Brazos County, rural Brazos Valley counties, Brazos Valley region, Texas, and U.S.⁵



Military Service

With a growing number of veterans and their unique health needs, the Survey Committee thought it wise to ask about military service. Among Brazos County survey respondents, 10.3 percent reported ever having served in any branch of the United States Armed Forces, while 11.0 percent of these identified themselves as currently serving active duty in the military. Of Brazos County residents who reported having served in the U.S. Armed Forces, 63.4 percent reported serving in an active duty war zone. There are 1,618,413 veterans in Texas, representing approximately six percent of the population.

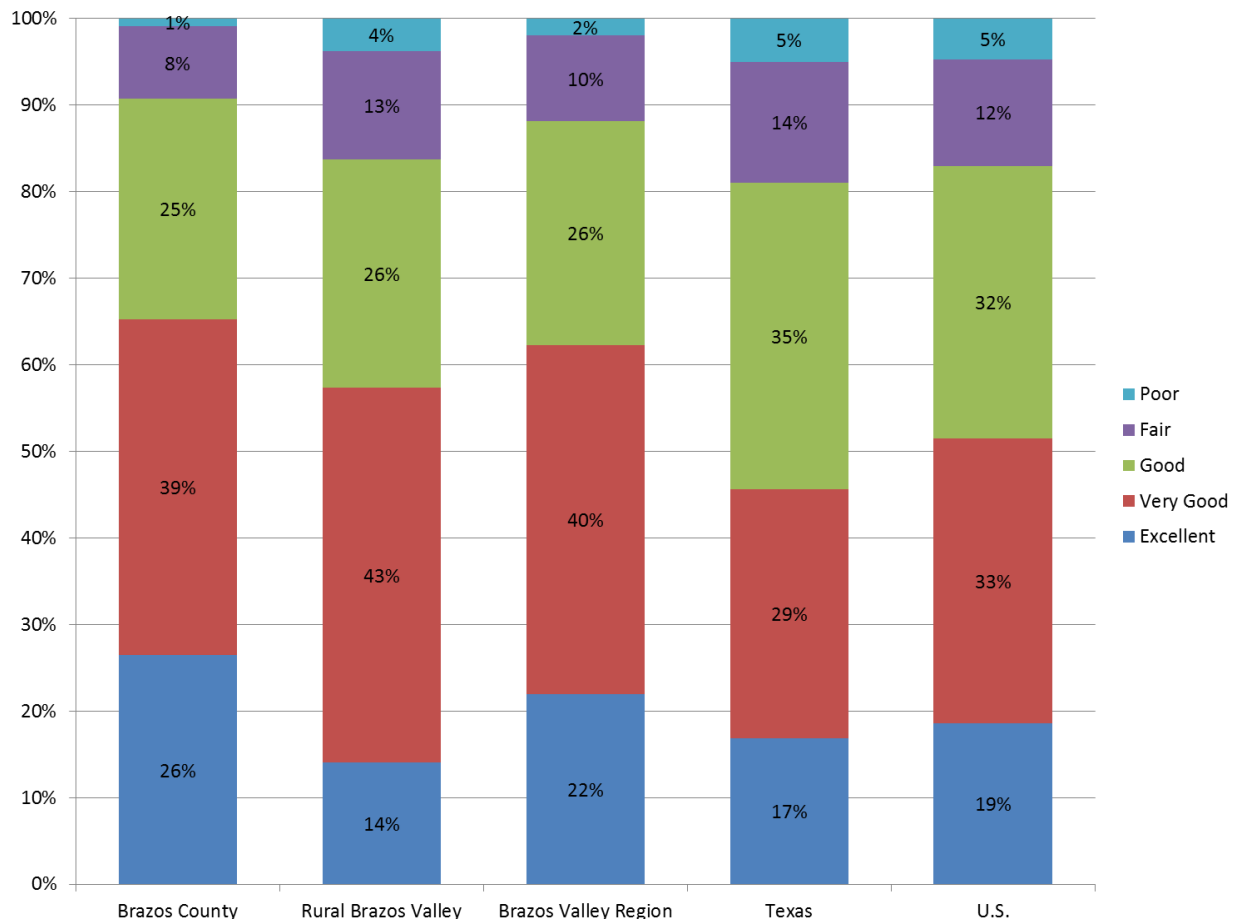
⁵ <http://quickfacts.census.gov/qfd/states/48000.html>

Health Status

The first four questions in the survey are taken from the Health Related Quality of Life scale developed and tested by the Centers for Disease Control and Prevention (CDC). These are simple, but powerful indicators of functional health status and its impact on daily life.

The first question simply asked respondents to rate their health; the possible responses were *excellent*, *very good*, *good*, *fair*, and *poor*. In Brazos County, 26.4 percent of respondents indicated their health was *excellent*, and 38.8 percent said their health was *very good*. In contrast, 8.4 percent indicated their health was *fair*, and 0.9 percent said their health was *poor*. In comparison to the 2010 health assessment, the proportion reporting their health as *excellent* or *very good* increased from 49 percent to 65.2 percent. The 2010 numbers for *fair* and *poor* also decreased slightly from 2010. Figure 6 compares self-reported health status for Brazos County with the rural Brazos Valley counties, the Brazos Valley region, Texas, and the U.S.

Figure 6. Self-reported health status in Brazos County, rural Brazos Valley counties, Brazos Valley region, Texas, and U.S.⁶



⁶ <http://apps.nccd.cdc.gov/brfss/display.asp?cat=HS&yr=2011&qkey=8001&state=UB>

The second question asked how many days of the past 30 days was the respondent's physical health not good. Among Brazos County respondents, the mean number of poor physical health days was 3.2, which is slightly lower than the region (3.6). Nearly one-third of respondents (31.7%) reported between one and five days of poor physical health in the past month. Less than one in 10 respondents (7.7%) indicated more than 10 days of poor physical health. In contrast, 63.3 percent of Texans reported no days of poor physical health, with a 19.5 percent reporting more than five days of poor physical health each month.

Similar to the previous question, the next question asked how many days of the past 30 days was the respondent's mental health not good. Among Brazos County respondents, the mean number of poor mental health days was 4.1, which is slightly higher than the region (3.4). Nearly one-fifth of respondents (19.2%) reported between one and five days of poor mental health in the past month. Alarming, 12.1 percent indicated more than 10 days of poor mental health. In addition, 27.3 percent report having been diagnosed with depression and 24.7 percent with anxiety. The self-reported depression rates are much higher than the 2010 survey rates as well as the overall depression rates for Texas. Among Texans, 66.3 percent reported no days of poor mental health, and 14.4 percent reported experiencing between one and five days of poor mental health. Given the persistent lack of mental health services available in the region, these numbers are cause for concern.

Feelings of anxiety and depression are also important indicators of residents' mental health. Table 1 shows common problems that residents reported bothering them over the past two weeks:

Table 1. Common mental health problems among Brazos County survey respondents

Type of Mental Health Problem	Percentage of Brazos County Respondents Reporting	Percentage of rural Brazos Valley Respondents	Percentage of Brazos Valley Region Respondents
Trouble relaxing	44.9%	36.5%	41.7%
Becoming easily annoyed or irritable	44.2%	39.2%	42.2%
Worrying too much about different things	43.2%	39.1%	41.6%
Feeling nervous, anxious, or on edge	38.7%	34.8%	37.2%
Not able to stop or control worrying	31.1%	30.9%	31.1%
Being so restless that it is hard to sit still	25.4%	20.8%	23.7%
Feeling down, depressed, or hopeless	25.1%	25.2%	25.1%
Little interest or pleasure in doing things	24.7%	27.9%	25.8%
Feeling afraid as if something awful might happen	21.2%	19.1%	19.7%

The fourth question in this set sought to understand the extent to which physical and mental health limited one’s daily activities. It asked respondents how many days of the past 30 days did poor physical or mental health keep them from their usual activities. In Brazos County, the mean number of days in which usual activities were limited by poor physical or mental health was 2.7, which is similar to the regional mean. Almost one in three respondents reported some interruption of their usual activities, with 18.5 indicating between one and five days, 3.5 percent reporting six to 10 days, and 7.2 percent reporting more than 10 days. In comparison, 27.7 percent of Texans reported between one and five days of limited activities and 12.2 percent reported six or more days of limited activities due to poor physical or mental health.

Many residents reported being limited in their activities due to an impairment and/or health problem. Commonly reported issues are listed in Table 2. Participants could identify more than one impairment; therefore, percentages here represent percentages of the total number of *responses* instead of the percentage of respondents who reported the impairment.

Table 2. Major impairments or health problems among Brazos County responses

Major Impairment or Health Problem	Percentage of Brazos County Responses
Depression/anxiety/emotional problems	17.3%
Back or neck problems	14.6%
Arthritis/rheumatism	13.9%
Lung/breathing problem	9.8%
Cardiovascular issues (heart problems, hypertension, high blood pressure)	8.9%
Fractures, bone/joint injury	6.2%
Other impairment/problem	5.6%

The most commonly reported impairment or health problems were related to joint and bone health issues - back or neck problems comprised 14.6 percent of the responses, followed by arthritis/rheumatism (13.9%) and fractures (6.2%). A substantial portion of responses were also related to cardiovascular health (8.9%).

For the given impairments and health problems, the duration of having limited activities varied among survey respondents. Most survey participants (69%) did not experience pain that impacted their daily activities during the past 30 days. Of those who did experience pain that impacted activity during the past 30 days, 20.2 percent reported pain for between one and five days, three percent had pain between six to 10 days, and 7.9 percent reported more than 10 days of pain. One in five participants reported their daily activities were limited for less than one year. Daily activities were reported as limited for one to five years by over one-third of respondents (35.7%). Another 15.1 percent reported limitations for the past six to 10 years and 27.7 percent had limitations to their daily activities for more than 10 years.

In the final question about residents' overall health, respondents listed a of range days in the past month that they got a sufficient amount of sleep and felt very healthy and full of energy. Less than one in five participants (17.8%) reported that they felt as if they had enough rest or sleep every night of the past 30 days. Over one-third (37.2%) reported not feeling rested between one and five days in the past month, 23.4 percent reported the same for between six and 10 days, and 4.4 percent reported not having enough rest or sleep for between 11 and 15 days. Nearly one in five participants (17.2%) reported not feeling rested for at least half of the days for the past month.

Forty-six percent of participants reporting feeling healthy and full of energy for at least 21 days of the past month and one in five participants (19.1%) reported feeling good for 11 to 20 days of the past month. Disturbingly, nearly one-quarter of participants (22%) did not feel very

healthy and full of energy for at least one-third of the month, and an additional 12.7 percent reported never feeling healthy or full of energy.

Risk Factors

Several sets of survey questions asked about health behaviors or characteristics that often place individuals at greater risk of disease or injury. The risk factors of interest are those that individuals can sometimes control or manage to prevent development of related illnesses or complications.

Obesity

Being overweight or obese increases an individual's risk for developing many chronic diseases and other conditions such as depression and chronic pain. The way that overweight and obesity is typically assessed is through the calculation of the body mass index (BMI), which is a simple ratio of weight to height (kg/m^2). This measure does not account for individual variations in bone mass or muscle mass, but is a good general indicator of weight status for the population.

The National Institutes of Health have published the following guidelines:

- Underweight = BMI score < 18.5
- Normal weight = BMI score between 18.5 – 24.9
- Overweight = BMI score between 25 – 29.9
- Obese = BMI score between 30 and 34.9
- Morbidly Obese = BMI score \geq 35

In Brazos County, only 37.1 percent of respondents were assessed to be at a normal weight for their height. Nearly one-half of survey respondents were overweight or obese; one-third were overweight (33.8%), nearly one in seven was obese (13.6%), and alarmingly, the same percentage were morbidly obese. Given the number and types of conditions that are related to obesity, these statistics are cause for concern in this community.

Nutrition

Nutrition is an important aspect of achieving and maintaining a healthy weight and overall health. Accordingly, the survey asked questions about individuals' grocery shopping and eating habits.

In Brazos County, 94.6 percent of residents do their grocery shopping within 10 miles of their community; this is much higher than the 76.8 percent reported in the Brazos Valley. The mean distance Brazos County residents travel to buy groceries is 4.3 miles compared to the regional average of 8.9 miles traveled for groceries.

Concerns about the economy have a pronounced impact on residents' overall nutrition. Across Brazos County, 8.7 percent of respondents said that *sometimes* or *often*, the food they bought did not last and they did not have money to get more, and six percent reported not being able to afford to eat complete meals *sometimes* or *often*. Eight percent reported eating less than they should because there was not enough money for food, while 5.7 percent reported skipping meals because of financial concerns. These rates were similar to the rates reported for the Brazos Valley.

Fewer than five percent (3.8%) of residents reported receiving food from a food pantry or food bank in Brazos County in the past six months, compared to 4.7 percent of residents throughout the Brazos Valley.

Physical Activity

Physical activity is also a key aspect of maintaining a healthy weight and good health. The National Institutes of Health recommend 150 minutes of moderate or 75 minutes of vigorous physical activity each week, in addition to engaging in strengthening exercises twice weekly.

Across Brazos County, only 28.7 percent of respondents meet this recommendation, while 17.2 percent reported they rarely do any physical activity. These rates are similar to the rates found across the Brazos Valley.

The survey also sought to assess Brazos County residents' sedentary time. In a seven day period, respondents' reported sitting an average of 388 minutes (6.5 hours) on *weekdays* and 321 minutes (5.4 hours) on *weekends*. Overall, Brazos County residents reported sitting about 30 minutes more in a week on average compared to the region.

In addition to obesity, nutrition, and physical activity, several other behavioral risk factors are key determinants of subsequent health and safety issues.

Cigarette Smoking

Much better than the State of Texas (19.2%) and the U.S. (19.3%), 10.8 percent of Brazos County survey respondents report being a current smoker, most of whom (96.1%) smoke a pack or less per day. Less than two percent of Brazos County residents reported using other tobacco products, including chewing tobacco, snuff, or dip.

Substance Use and Abuse

When asked about their alcohol consumption habits, almost half of Brazos County survey respondents (45.3%) reported that they do not drink alcohol in a typical week. Over one-third said that they normally consume one to five alcoholic drinks in a week (37.1%). Six percent of respondents reported having driven after drinking at least two drinks in the past month.

In the past 30 days (3.1%) and in the past year (4.5%), few Brazos County residents reported using prescription medications for nonmedical reasons or not as prescribed. Reported rates of consumption of marijuana and other illegal drugs were less than one percent across the county in the past 30 days.

Chronic Diseases and Conditions

Survey respondents were asked to report if they had ever been diagnosed with a list of chronic diseases/condition by a health care provider. The six most frequently reported conditions for Brazos County survey respondents were:

1) Hypertension (high blood pressure)	29.5%
2) Depression	27.3%
3) Obesity/Overweight	26.8%
4) High Cholesterol	26.3%
5) Anxiety	24.7%
6) Asthma	19.6%

Only 26.8 percent of respondents reported being told by a health care professional that they were overweight or obese, yet when calculating BMI from reported heights and weights of respondents who had not been diagnosed as such, 48.4 percent of respondents are overweight or obese. Over one-third of undiagnosed respondents were overweight (37.2%), 9.5 percent were obese, and 1.7 percent were morbidly obese. This raises serious concern regarding doctor-patient communication with respect to health weight, overweight and obesity.

Of the nine counties, Brazos County reported the lowest rates of a number of chronic diseases common among older adults, including congestive heart failure, high cholesterol, stroke, diabetes, and arthritis. This is not surprising given the smaller proportion of older adults in Brazos County compared to the rural counties. However, Brazos County had the highest rate of asthma in the region.

Table 3 provides the rates of several commonly reported chronic conditions, with comparisons to the region and the U.S.

Table 3. Chronic condition rates for Brazos County, Brazos Valley, and U.S.

Disease/Condition	Brazos County	Brazos Valley	U.S. ^{7,8,9}
Anxiety	24.7%	23.7%	17%
Arthritis/Rheumatism	14.6%	19.9%	22%
Asthma	19.6%	17.3%	13%
Cancer (all kinds)	4.8%	6.0%	8%
Congestive Heart Failure	1.9%	2.9%	2%
Depression	27.3%	24.6%	12%
Diabetes (type 2)	5.4%	8.4%	9%
Emphysema/COPD	4.2%	5.5%	2%
High Cholesterol	26.3%	30.3%	13%
Hypertension	29.5%	33.9%	24%
Overweight/ Obesity ¹⁰	61.0%	64.5%	62%
Stroke	1.2%	1.8%	3%

The survey asked residents if their health care providers had ever referred them to a chronic disease management programs. The majority of respondents (93.2%) said no, and only 8.6 percent reported attending a program to prevent or manage a chronic illness.

Preventive Screenings

The survey also collected information regarding individuals' participation in recommended preventive screenings. Figure 7 summarizes information regarding those who meet general preventive health guidelines.

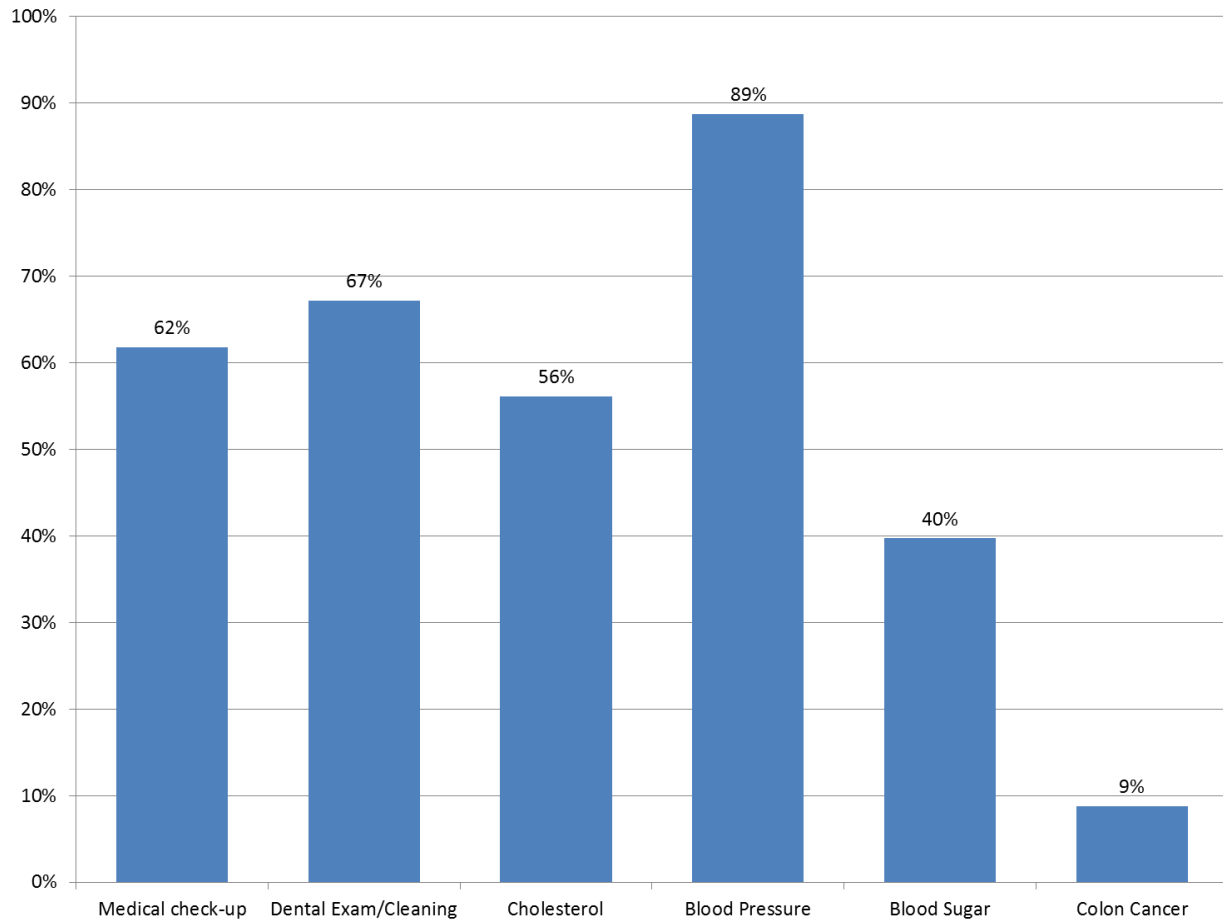
⁷ http://www.cdc.gov/nchs/data/series/sr_10/sr10_242.pdf.

⁸ <http://www.cdc.gov/nchs/data/databriefs/db92.pdf>

⁹ http://apps.nccd.cdc.gov/NCVDSS_DTM/LocationSummary.aspx?state=United+States

¹⁰ Overweight/obesity percentages reported in Table 3 are calculated from reported height and weight of survey participants NOT the percentage who reported being diagnosed by a health care professional.

Figure 7. Percent of survey respondents meeting preventive guidelines in Brazos County



For women, a test for cervical cancer (“Pap test”) is recommended every three years beginning at 21 years of age. In Brazos County, 56.2 percent of women report having had a Pap test in the past year, and 27.4 percent indicated their last Pap test between one and three years ago. Less than one in 10 women (7.5%) report having had their last Pap test more than five years ago. Among survey respondents 40 years of age and older, 66.2 percent report having had a mammogram in the past year.

Health Insurance

The *Healthy People 2020* goal for health insurance was that by 2020, every resident would have some type of health insurance. The 2010 Patient Protection and Affordable Care Act¹¹ was intended to advance this goal, but currently, many residents are still uninsured. Eighteen percent of Americans under the age of 65 lack health insurance¹², and Texas ranks last among the 50 states in access to care, with a 24 percent overall uninsurance rate¹³.

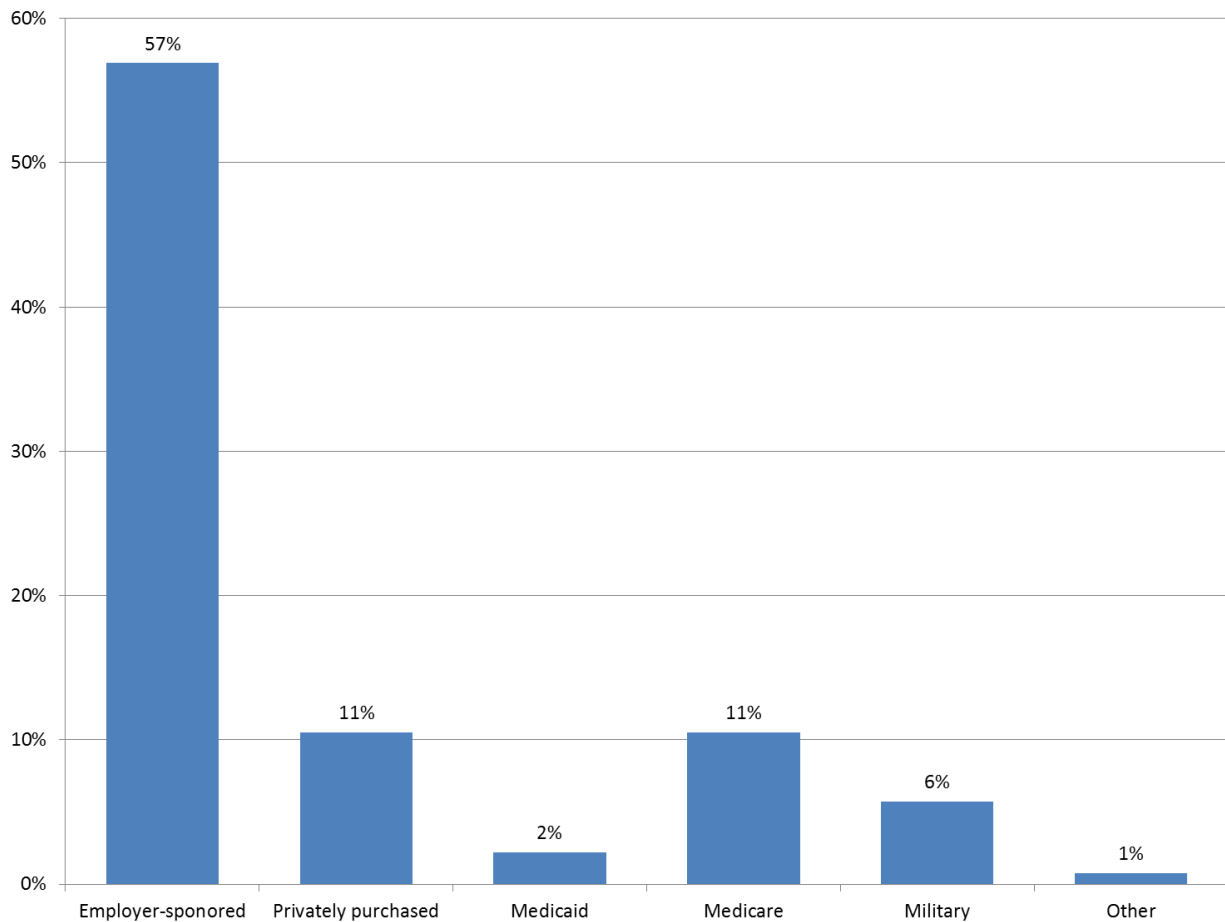
¹¹ *Patient Protection and Affordable Care Act* (HR 3590) signed into law on March 22, 2010

¹² <http://kff.org/state-category/health-coverage-uninsured/>

¹³ <http://kff.org/other/state-indicator/total-population/>

The survey question “What type of health insurance do you have?” allowed for multiple response options to be selected. Eleven percent of Brazos County respondents indicated that they did not have health insurance of any kind, a slightly higher rate than the region overall. Almost one-fifth (17.5%) indicated that they had been uninsured at least one month in the past three years. Figure 8 displays the types of health insurance coverage in Brazos County.

Figure 8. Health insurance coverage in Brazos County¹⁴



As illustrated in Figure 8, 56.9 percent of survey respondents reported being covered by a health insurance plan through a current or former employer or union. Relatively small proportions of the population report other sources of coverage.

Health Resources and Medical Home

Issues with access to health care go deeper than whether one is covered by health insurance or not. The availability of providers and services and the ability to get to those services also

¹⁴ Note that the percentages add up to more than 100 percent because some individuals are covered by more than one plan.

influence access. In Brazos County, 46.3 percent of respondents rated their access to health care as excellent, in comparison to 36.9 percent of rural Brazos Valley respondents.

Outpatient Care

The majority of Brazos County survey respondents (68.9%) reported having a provider they considered their regular health care provider. Although some did not indicate having a regular health care provider, 74.4 percent reported a private doctor’s office or clinic as the place where they usually go for medical care. For outpatient care, 4.1 percent said they visited a community health center, three percent said an urgent care clinic, 2.2 percent said a Veterans Affairs clinic, and less than one percent named the emergency room of a hospital as a place they usually go for medical care. Of those respondents without insurance, the percent with a medical home dropped to 47.4 percent, and those with a regular health care provider dropped to 21.8 percent. Nationwide, 53 percent of uninsured adults had no usual source of care¹⁵.

Health Care Utilization

During the past 12 months, Brazos County residents accessed a range of venues for their health care. A majority of residents (81.7%) reported using a doctor’s office or clinic for their health care. In the same time frame, 17.1 percent of respondents reported visiting a hospital emergency room for their own medical care. The most common reason given for visiting an emergency room was having an injury or being very sick (13.6%).

The survey also asked about residents’ health literacy and preparation for medical visits. Among Brazos County respondents, 28.2 percent *fairly often, very often, or always* prepare a list of questions for their health care provider. Most residents appear to communicate well with their health care providers, asking questions about medications and treatment, and discussing personal problems (see Table 4).

Table 4. Communication with health care providers among Brazos County respondents

Behavior	Never/ Almost Never	Sometimes	Fairly Often/ Very Often/ Always
Ask questions about medications	15.0%	14.9%	70.2%
Ask questions about treatment	10.2%	19.5%	70.3%
Discuss personal problems	19.3%	22.0%	58.5%
Prepare a list of questions for health care provider	42.9%	28.8%	28.2%

¹⁵ <http://kff.org/health-reform/fact-sheet/the-uninsured-and-the-difference-health-insurance/>

Delayed Care

With numerous barriers that inhibit access to care, the survey asked respondents about occasions in which they delay seeking the care they need. Specified reasons for delaying care included cost, not being able to miss work, and not having transportation. The most common reason given for delaying care among Brazos County respondents was cost. In Brazos County, close to half of respondents (44.2%) report delaying seeing their health care provider, and 39.2 percent put off obtaining dental care. Less than one in 10 respondents (8.7%) indicated that they had experienced times when they had to choose between buying food, paying rent or bills, and paying for medications.

Caregiving

Many residents in Brazos County act as caregivers, providing regular care or assistance to a friend or family member at home who has a long-term health problem or disability. During the past month, 8.8 percent of residents in Brazos County reported providing care for at least one person. This is the lowest percentage of caregivers in the Brazos Valley, where the regional average is 11.9 percent.

The majority of the people being cared for were aged 65 or older (52%); 26.4 percent of respondents reported caring for someone between the ages of 18 and 64, and 21.7 percent of respondents reported caregiving for a child between the ages of one and 17. Across the county, 38.4 percent reported caring for a parent or spouse's parent. Other relationships between caregiver and charge reported included caring for a child (20.2%), spouse (15.8%), and non-relative (9.6%).

The survey also asked caregivers how many hours they provided care weekly, how long they had provided care, the areas in which the person they provide care for most requires help, and how much difficulty they faced in caregiving. Most caregivers reported providing care between one and two days of care (80.8%) per week while 5.9 percent reported providing care between three and six days a week. Twelve percent of respondents cared for someone seven days per week. Two-thirds of participants had cared for someone for less than five years (40.8% reported one to five years; 26.8% reported less than one year). Less than five percent of caregivers reported caring for someone for more than 20 years. Caregivers most commonly reported the individual they cared for as needing assistance in taking care of themselves (34.1%) with respect to activities of daily living (for example, bathing, eating, and getting dressed), with mobility (17.9%), and because of learning, memory or confusion problems (13.9%). This was true across the Brazos Valley as well.

Across the county, survey participants reported on caregiving's impact on personal finances, time, family, work, relationships, creating stress and health problems. Table 5 displays the reported impact of caregiving on the life of Brazos County resident caregivers.

Table 5. Reported difficulties associated with caregiving

Difficulties associated with caregiving	A lot	Some	A little
Affects family relationships	24.8%	20.1%	55.1%
Creates/aggravates health problems	22.4%	14.7%	62.9%
Creates stress	30.0%	22.1%	47.9%
Financial burden	25.3%	19.6%	55.1%
Interferes with work	30.6%	17.1%	52.2%
Not enough time for family	16.9%	17.9%	65.1%
Not enough time for self	22.3%	28.5%	49.2%
Other difficulty	18.1%	20.4%	61.5%

Transportation

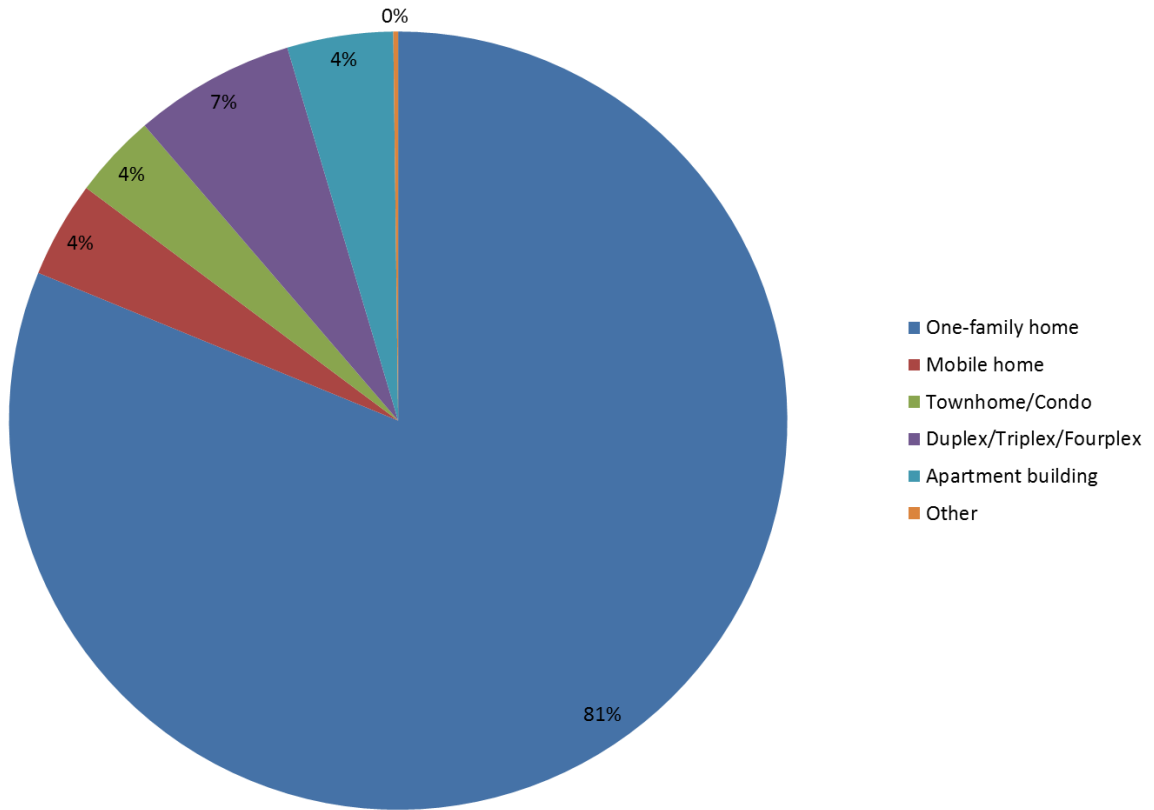
Transportation continues to pose a formidable challenge for all segments of the population and can be a significant barrier when it comes to accessing health care and related services. This issue was mentioned in every community discussion group, regardless of community sector represented.

Given that the vast majority of Brazos Valley health resources are headquartered in Brazos County, the travel times and distances for Brazos County residents are substantially less than their rural counterparts. Among Brazos County survey respondents, the median travel distance to medical care was five miles, and median travel time was 10 minutes. For dental care, the median distance was also five miles, and travel time was 10 minutes. To fill a prescription, the median distance was three miles, and travel time was 10 minutes.

Housing

For the first time, the 2013 survey asked residents about the condition of their housing. Brazos County respondents reported primarily living in a one-family home (81.2%), with less than fifteen percent combined living in a duplex, triplex, or four-plex (6.7%), an apartment building with more than four units (4.4%), or a townhome or condominium (3.5%). Figure 9 illustrates the housing situation for Brazos County survey respondents.

Figure 9. Type of housing in Brazos County



Residents reported their buildings' estimated ages as well as how long they had lived there. Most residents (40.4%) lived in a building built since 2000. Additionally, the condition of respondents' homes varied. Over one-quarter of residents (26.4%) reported living in a building constructed prior to 1980, and almost half of residents (42.8%) have lived in their current home for less than 10 years. When asked if their residence had experienced a severe problem in the past 12 months, survey respondents listed a range of issues as shown in Table 6. Across the county, the most reported problem with residents' homes was related to plumbing, heating/cooling, or electricity (going more than 24 hours without service).

Table 6. Severe housing problems reported in Brazos County

Housing problems	Percentage of Brazos County Respondents
Plumbing, heating/cooling, electricity	20.2%
Roof problems (such as holes, leaks, or sagging)	12.4%
Broken plaster or peeling paint (interior)	10.6%
Mice, rats, or cockroaches	8.7%
Mold	5.7%
Holes in the floor	2.7%
Broken windows	2.4%

Community Services

Discussion regarding the health of a community should never be limited to only medical services or health insurance. Numerous social and community issues impact health, and various organizations exist in the community to address these issues.

The current survey included a set of questions asking about individuals' need for and utilization of a broad range of services with response options of *did not need*, *needed and used*, and *needed but did not use*. Although the survey did not gather information on the reasons why people did not get the services they needed, information about needs is still useful.

The top five community services needed (this included *needed and used* and *needed but did not use*) as reported by survey respondents were:

- 1) Care of a medical specialist (39.2%),
- 2) Mental health services (13.4%)
- 3) Work-related or employment services including job training (13.2%),
- 4) Financial assistance or welfare (11.6%)
- 5) Affordable after school or summer day programs for children (9.6%), tied with
5) Financial assistance for auto, appliance, or home repair; or weatherization (9.6%)

While identifying needs is important, examining gaps in service delivery when people do not get the needed services is also critical. These data offer a snapshot of the top 10 categories of unmet needs in Brazos County. Table 7 summarizes the data of those who needed a service but could not get it.

Table 7. Unmet needs in Brazos County

Service Category	Percent Who Needed and <u>DID NOT</u> Get
Child care services (such as assistance with payments for child care or child care subsidy)	72.6%
Utility assistance	69.4%
Food, meal, and nutrition services	68.8%
Literacy training, GED, or English as a second language courses	59.6%
Financial assistance for auto, appliance, or home repair; or weatherization	53.5%
Information and referral services (such as 211)	53.2%
Affordable after school or summer day programs for children	53.2%
Services for children with emotional problems or delinquent behavior	48.4%
Respite care	47.1%
Work-related or employment services	41.6%

Community Characteristics

Specific community characteristics can influence perceptions of safety and the likelihood for community members to engage in activities outside their home. Brazos County respondents varied in their perception in how closely their fellow community members shared their values. Two-thirds (67.1%) of Brazos County respondents felt that their community had shared values. Brazos County residents reported comparatively high levels of trust among fellow community members, with only 15.6 percent saying you can't be too careful in dealing with other people, compared to 22.5 percent of respondents in the rural Brazos Valley counties. Table 8 summarizes these perceived characteristics of Brazos County, listing the percentage of respondents who reported *agree* or *strongly agree* with each statement.

Table 8. Brazos County community characteristics

Community Characteristics	Percentage of Brazos County Respondents
People are willing to help their neighbors	87.5%
Most people can be trusted in the community	84.4%
Neighbors would help someone who fell	81.8%
Many people are physically active in local neighborhoods	81.3%
This is a close knit community	67.9%
Problems in neighborhoods make it hard to go outside and walk	16.7%
People are concerned they will be a victim of crime if they walk/bike in their neighborhood	6.5%

Community Issues

Survey respondents were asked to rate the severity of a list of community issues, on a scale ranging from *not at all a problem* to a *very serious problem*. In Brazos County, the top 10 issues rated as a *serious problem* or a *very serious problem* were as follows:

- 1) Illegal drug use (30.7%)
- 2) Alcohol abuse (29.3%)
- 3) Poor or inconvenient public transportation (27.4%)
- 4) Risky youth behaviors (such as alcohol use, drug use, truancy, etc.) (26.9%)
- 5) Teen pregnancy (24.4%)
- 6) School drop-out (22.6%)
- 7) Poverty (22%)
- 8) Lack of jobs for unskilled workers (18.5%)
- 9) Unemployment (18.3%)
- 10) Access to affordable healthy food (15.9%)

Community Advice

Community discussion group participants were asked to offer advice for anyone attempting to address issues in Brazos County. The following recommendations were offered in most of the discussions:

- **Build relationships within the community.** Get involved in activities and learn the history of the county. Establish trust with residents and do not try to segregate the two cities, Bryan and College Station.
- **Have a clear purpose.** Set a goal, follow-up with people, and relay results.
- **Communicate with everyone from the beginning.** Disseminate information through channels like the internet, TV, radio, newspaper, local organizations, and word of mouth. Make sure to get information to disadvantaged populations, like the elderly.
- **Plan for sustainability.** Leverage resources to benefit both the cities of Bryan and College Station.

Regional analysis yielded a set of key findings that are presented in the regional Executive Report. It is important to understand that the data contained in this supplemental report should be considered as a whole; that is, the statistics should be interpreted with the insights offered by the community discussion groups. These reports are intended to be utilized for planning and resource development to benefit all members of the community.