HEALTH PRIORITIES

COMMUNITY OF CLOVIS

A Background Brief for Forum Participants

HEALTH BEHAVIORS

Every day people make choices that will impact their health. Some of these behaviors, like choosing to take a daily multi-vitamin, can promote health and lead to positive health outcomes. Other behaviors increase a person's risk for negative health outcomes, for example, not wearing a seat belt while driving. Understanding the causes of these daily choices allows healthcare professionals from Presbyterian Healthcare Services (PHS) help communities make good choices and avoid bad ones. [i]

HEALTH PRIORITIES

PHS currently provides healthcare services in nine counties. The organization has worked with its five regional hospitals and their Community Boards of Trustees to conduct community needs assessments and health priorities.

The assessments identified several priorities, three of which are important health behaviors that can be affected by community-based interventions. Therefore the following behaviors are the focus of the community health forums:

- Healthy eating
- Active living
- Tobacco cessation

Healthy eating and active living are inter-related. Choosing to ignore these behaviors contributes to the negative health outcome of being overweight or obese. Although genetics and environment also contribute to obesity, overall, obesity is a result of consuming too many calories and not using enough calories through physical activity. [ii] An adult that is considered overweight or obese increases their risk for developing heart disease, diabetes, cancer, high blood pressure, high cholesterol or high triglycerides, stroke, liver and gallbladder disease, sleep apnea and respiratory problems, osteoarthritis, and gynecological problems (such abnormal menstruation and infertility). Obese children are more likely to be obese as adults and their health problems are more likely to be severe.[iii]

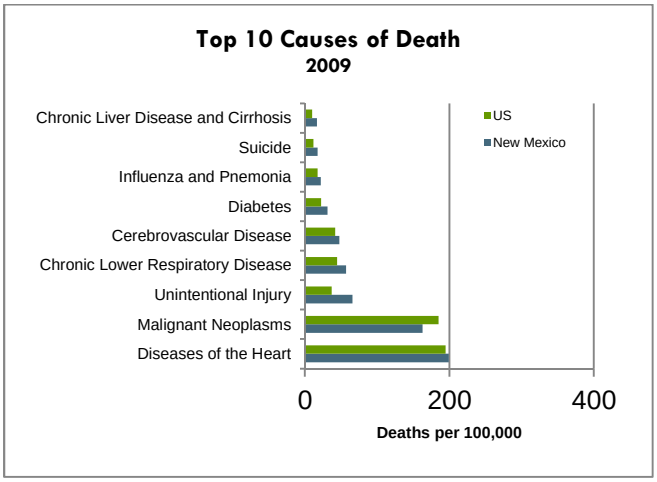
The use of tobacco is also an important health behavior that can be addressed at the community level. Tobacco use increases the risk for cancer, heart disease, and chronic lower respiratory disease. These diseases can lead to significant disability later in life.[iv]

PRESBYTERIAN HEALTHCARE SERVICES COMMUNITY NEEDS ASSESSMENT PROCESS

- June 2011: Chose 12 health topics to assess
- August-September 2011: Invited hospital and enterprise-wide boards to participate in prioritization study:
  - Scored each health topic based on size; seriousness; alignment with PHS purpose, vision, values, strategy and goals; and availability of community resources
  - Ranked each health topic
- February-April 2012: Conduct community health forums to discuss community-based interventions
- December 2012: Research and identify evidence-based intervention options

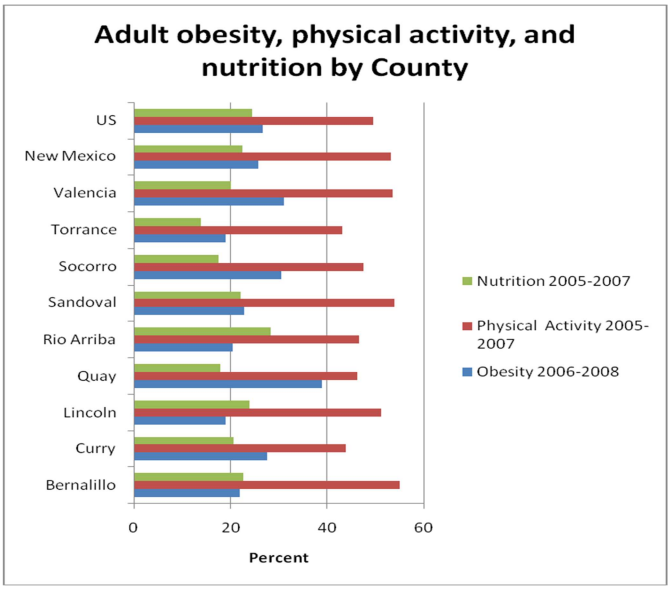
NEW MEXICO HEALTH DATA

In 2010, New Mexico ranked 33rd in the nation in overall health. This ranking trended down from 2009 when New Mexico ranked 31st. The following chart compares percentages of deaths in New Mexico to the US for the top ten causes.[v] As you can see, healthy eating, active living, and tobacco cessation can significantly impact the most prevalent causes of death in New Mexico.



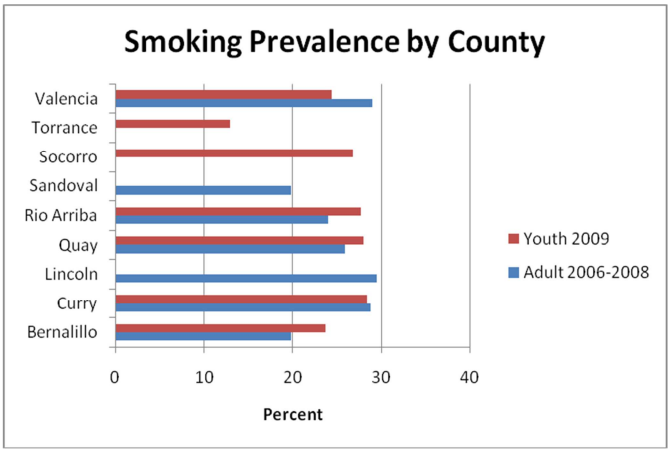
Source: New Mexico's indicator-based information system and the 2009 National Vital Statistics Report

New Mexico spends $324 million each year for preventative, diagnostic, and treatment services for obesity and related chronic diseases. Lost productivity and absenteeism from work is also a cost associated with obesity.[vi]



Source: New Mexico indicator-based information system.

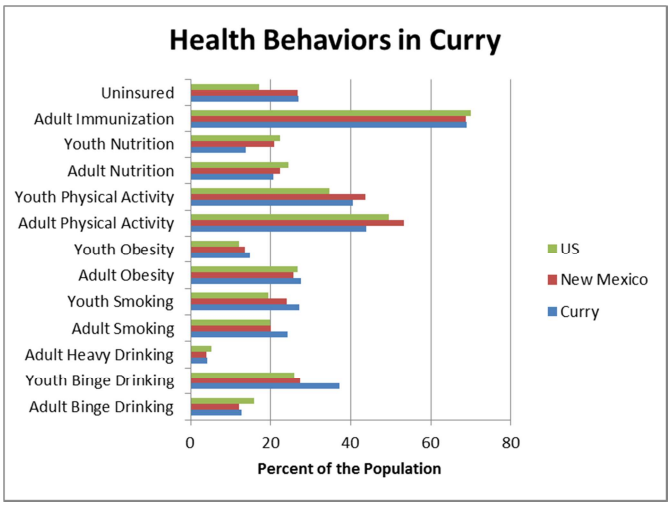
The cost of tobacco use is $928 million each year for the state. This cost includes both direct medical costs and indirect costs such as lost productivity.[vii]



Source: New Mexico indicator based information system.

CURRY COUNTY - CLOVIS HEALTH BEHAVIORS

The mean community needs index (CNI) [viii] score for Curry County is 3.6 indicating a high level of community need. The top five causes of death in the county are heart disease, cancer, chronic lower respiratory disease, cerebrovascular disease, and Alzheimer's disease. Based on county health rankings, Curry County ranks 24th in diet and exercise and 25th in smoking prevalence out of 33 counties. 27.6% of adults are obese and 14.8% of youth are obese. The smoking prevalence is 24.2% of adults and 27.6% of youth.[ix]



Source: New Mexico's indicator-based information system and New Mexico Substance Abuse Epidemiology Profile. Dates vary from 2003-2009.

OVERARCHING HEALTH ISSUES

Health communications and health information technology are overarching health issues because they affect all levels of health from health behaviors to health outcomes. If community members are unable to understand why a certain behavior is positive or negative they cannot make the appropriate change that could improve their health. Studies have shown that people with low health literacy receive fewer preventative services and use expensive health services (such as the emergency room) more often.[x]

Health information technology is the use of resources such as the internet to help patients and doctors manage care and assist decision-making. Potential uses of technology are electronic medical records, safety checks to ensure patients are receiving correct care, and the ability to communicate through email and websites.[xi]

HEALTH FORUM QUESTIONS

Although the three priority health behaviors are common throughout the PHS service regions, each community can be unique when implementing strategies for addressing these priorities. Forum participants will address the following:

- Knowing this community, what is preventing healthier lifestyles?
- What can members of this community do to support tobacco cessation, healthier eating and more active lifestyles?
- Knowing this community, what are the three most viable ideas?

ABOUT THIS PROJECT

This brief was produced for the Presbyterian Healthcare Services *Community Health Forums*, facilitated by New Mexico First. The seven forums will focus on community-based ideas that will impact health behaviors of community members.

ENDNOTES

[i] Kathy Davis, Sally Ironside, and Jennifer Reid, *2011 PHS Needs Assessment Health Issues Briefs*, page 9.
[ii] Ibid, page 15.
[iii] Ibid, page 19.
[iv] Ibid, page 21.
[v] *20ll/2012 Health Status in New Mexico: Presbyterian Healthcare Services' Health Assessment*, slide 3.
[vi] Kathy Davis, Sally Ironside, and Jennifer Reid, *2011 PHS Needs Assessment Health Issues Briefs*, page 19.
[vii] Ibid, page 26.
[viii] The CNI is a tool created by Catholic Healthcare West to measure community need. Scores above 4 are considered problematic in overcoming socio-economic factors that contribute negatively to health.
[ix] *20ll/2012 Health Status in New Mexico: Presbyterian Healthcare Services' Health Assessment*, slide 10.
[x] Kathy Davis, Sally Ironside, and Jennifer Reid, *2011 PHS Needs Assessment Health Issues Briefs*, page 3.
[xi] Ibid, page 3.