Community Health Needs Assessment 2016
Atlantic County, New Jersey
Introduction

As a leading healthcare provider in southeastern New Jersey, AtlantiCare is committed to delivering high-quality care and an outstanding patient experience to the thousands of individuals and families we serve each year. We’re also committed to enriching and improving the well-being of those we are proud to serve.

Beyond the traditional role hospitals play in providing inpatient and outpatient medical care and in helping people stay healthy, AtlantiCare also has the responsibility to identify, understand and meet the diverse healthcare needs of the individuals and families residing in its service area. Beyond these immediate needs, to achieve its vision of building healthy communities, AtlantiCare also has the important role of understanding the root causes of disease and breaking through the barriers that impede health.

For this reason, AtlantiCare’s vision, mission and services are focused on delivering all of the elements necessary to achieve, maintain or return each member of the community to optimal health. These elements include:

- Access to safe, equitable and quality healthcare
- The promotion of healthy lifestyle behaviors
- A commitment to understanding and improving the social determinants that impact one’s health and quality of life.

From the casino district in Atlantic City to the sandy Pine Barrens, small coastal towns and rural farmlands, the communities we serve are as diverse as the people who reside in them. The residents of AtlantiCare’s community represent a broad array of ages, ethnicities and religions; speak a variety of languages; and have unique healthcare needs. Whether serving families with young children, active adults in the prime of life, or older residents facing age-related issues or living with chronic diseases, AtlantiCare strives to provide people-centered care to everyone it serves.

Background

To better understand the highest-priority health concerns and areas of unmet needs among these different populations, AtlantiCare engaged in a comprehensive Community Health Needs Assessment (CHNA) for Atlantic County, New Jersey, in 2015. A previous assessment was conducted in 2012 and published in 2013. The CHNA is required as part of specific provisions in the 2010 Patient Protection and Affordable Care Act for non-profit charitable hospitals. Updated assessments are required every three years.
Research Objective

In addition to health status, AtlantiCare’s CHNA for Atlantic County looked at a number of factors believed to influence health and personal lifestyle behaviors. The results of our assessment, shared in this report, will assist AtlantiCare in its ongoing efforts to improve the health of specific populations residing throughout our service area. In particular, this CHNA will allow AtlantiCare to:

- Respond to identified needs and gaps in services through the development of evidence-based public health and clinical interventions;
- Allocate health and wellness resources for maximum intervention and service efficacy and impact;
- Determine appropriate and realistic targets to improve the health of our collective community; and
- Form partnerships to strategically address the healthcare challenges for maximum impact.

Methodology

This CHNA was conducted following a disciplined approach to collecting, analyzing and using a combination of primary and secondary data sources.

PRIMARY DATA SOURCES

Primary sources included feedback collected through the administration of online and paper surveys in summer 2015 focused on residents’ behaviors and beliefs. Survey promotion was conducted at various community events throughout the county, on AtlantiCare’s website, and via an AtlantiCare email distribution list.

In total, we received 1,092 completed surveys, exceeding the suggested sample size of 1,063. Survey results exceeded a confidence interval of three percent and a confidence level of 95 percent.

In addition to the online and written surveys, AtlantiCare hosted five resident feedback sessions, which assisted in better understanding healthcare perceptions and trends among our target populations. These feedback sessions took place throughout the fall of 2015 and targeted a broad range of income, age, and geographic subgroups to further ensure representation of all populations residing in the county. All the tools utilized to capture primary feedback were implemented through a third-party vendor.

To ensure we collected feedback from a broad representative sample, the following steps were taken:
- Survey responses were collected from every ZIP code in Atlantic County.
- Surveys were administered in both English and Spanish, the top two languages spoken in the area.
- Respondent demographics were monitored to include a broad range of income, race, and education levels.
- Focus groups were held in varying locations, with cohorts differing in age, sex, employment status, and income level.
SECONDARY DATA SOURCES
Secondary data sources included published data from a variety of federal, state, and local agencies. A sampling of sources includes:*  
• 2016 County Health Rankings  
• Healthy People 2020  
• The Centers for Disease Control 2014 Behavioral Risk Factor Surveillance Survey  
• 2016 Atlantic County Youth Risk Behavioral Survey  
• Atlantic County Community Health Improvement Plan 2014-2018  
*Please see the appendix for a full bibliography.

Both primary and secondary data were instrumental in determining the priority order in which the community perceives its needs. Documentation of needs were shared with community leaders working within and outside the discipline of health.

AtlantiCare did not collaborate with any other institutions to complete this CHNA. It did review and take into account other available public health assessments of and household reports on the same population within the same time frame.

Data for this report were pulled together by internal staff at AtlantiCare and also through the use of a third party for primary data and resident feedback. No known data gaps impact the ability of this report to reflect the community’s needs.

This document provides a summary of the findings reflected in the report. It is available for public use. While AtlantiCare maintains hard copies of the report, an electronic version is also available on AtlantiCare’s website at www.atlanticare.org/community.

AtlantiCare intends to analyze the findings and will coordinate with the proper community partners to determine impactful actions to address stated needs and gaps.
Community Description

POPULATION DEMOGRAPHICS

Atlantic County is one of 21 counties in New Jersey. It is located in the southeastern corridor of the state. In 2015, an estimated 274,219 individuals resided in Atlantic County. Between 2010 and 2015, the population size has decreased by 0.1 percent. A retraction in population size during the time frame had been projected by analysts.

HOUSEHOLD INCOME AND SOCIOECONOMIC INFORMATION

Housing

Atlantic County had an estimated 127,865 total housing units in 2015. The county’s home ownership rate is 67.7 percent. This statistic has slightly declined since 2010. On average, 2.65 persons reside in each household, and 87.7 percent of residents have lived in the same house for longer than a year.

The median home value in Atlantic County is $230,200. This number is significantly reduced from our 2013 CHNA, when the median value was listed at slightly below $265,000. This number is also well under New Jersey’s median home value of $292,500.

Median selected monthly homeowner costs, including a mortgage, are $1,943. Without a mortgage, monthly housing costs equate to $822. The median gross rent across Atlantic County is estimated to be $1,043.
Income
The median household income for families with children is $48,103 in Atlantic County. This is under the median household income of $85,248 for the state of New Jersey. The per capita personal income is $27,411. The percentage of residents living at or below the poverty level within the county has increased since 2010 to 15.1 percent. Included in this statistic are the 27 percent of children who live in poverty within the county, an increase of seven percent since 2013. This statistic ranks Atlantic County 18th among the 21 counties in New Jersey for the number of children living in poverty.

Employment Status
In 2014, 57 percent of the Atlantic County population reported being employed and 11 percent were unemployed. Thirty-two percent of the population indicated they were retired. High rates of unemployment are often linked to the volatility of the tourism industry and fluctuations in the hospitality business given the seasonality of our region.

Education
According to our research, 84.7 percent of Atlantic County residents have graduated from high school or the equivalent; however, only 24.4 percent of residents have earned a bachelor’s degree or higher.

ETHNICITY, RACE AND LANGUAGE

- 71.1 percent of the Atlantic County population are white.
- 18.7 percent of persons report a Hispanic or Latino origin.
- 17.1 percent are black.
- 8.5 percent are Asian.
- 2.5 percent report two or more races.
- 0.7 percent are American Indian/Alaskan Native.

Asian and Latino are the only ethnicities or races that grew since 2010. All others declined.

In Atlantic County, 16.5 percent of individuals are foreign born, and 26.5 percent of households speak a language other than English at home. This number has increased since 2010. The most common language spoken other than English is Spanish.

Cell Phone Ownership
An overwhelming majority (94.6 percent) of Atlantic County residents indicated they own a cell phone.
Advance Healthcare Directives

One in three Atlantic County residents indicates having either a living will or a medical power of attorney in place to make their treatment wishes known should they become unable to make their own healthcare decisions. This statistic, when looked at by age, increases to 44 percent of those age 50 years and older, the target population for when conversations about advance healthcare directives usually begin to occur.

Findings

ACCESS TO CARE AND HEALTH STATUS

Hospital and Physician Supply

Atlantic County is home to two hospitals: AtlantiCare Regional Medical Center, which has two campuses, located in Pomona and Atlantic City, and Shore Medical Center, which is located in Somers Point. AtlantiCare also maintains a Satellite Emergency Department in Hammonton, New Jersey.

In addition, Atlantic County is home to Bacharach Institute for Rehabilitation, located in Pomona, which is the county’s only rehabilitation hospital.

AtlantiCare and Southern Jersey Family Medical Centers, Inc. operate four federally qualified health centers in Atlantic County. These centers are located in Hammonton, Pleasantville, and Atlantic City (two). In addition, the Atlantic County Division of Public Health and the Atlantic City Department of Health maintain some clinic services. These are located in Northfield and Atlantic City, respectively.

Primary Care Provider and Utilization

It is recommended for optimal and continuous medical care that people should seek advice from their primary care provider. Healthy People 2020 calls for 83.9 percent of the U.S. population to have an identified primary care provider. According to our CHNA survey results, here is how Atlantic County compares:

- 90 percent of survey respondents indicated they had one person they considered their primary care provider. Women were more likely to have one primary care provider, at a rate of 91.1 percent, compared to men at 85.3 percent.

- 98.6 percent of the population reported visiting a doctor for a routine exam within the past three years. Again, women are more likely to have a routine physical, at 96.7 percent, compared to 94.8 of men.

- 5.2 percent of the population said they hadn’t visited a doctor in more than three years.

Access to primary care is still an issue in Atlantic County, which has 209 primary care physicians. This creates a primary care provider ratio of 1,320:1. This ratio is under or over the state ratio of 1,170:1 and well behind the top decile national performers at 1,040:1 individuals to one primary care provider.
Emergency Care and Urgent Care
In addition to visiting a primary care provider, county respondents reported seeking care at both the emergency room and/or urgent care settings. Overall, 31.2 percent reported having visited an emergency room within the past year. Men were more likely to visit the emergency room, at 33.6 percent, versus 30.6 percent of women. For those who indicated visiting the emergency room, 41.8 percent reported making more than one visit.

Overall, 50.8 percent of survey respondents reported receiving care from an urgent care center in the past 12 months. Those ages 18 to 49 are more likely (58.2 percent) to visit an urgent care setting, compared with respondents age 50 and over (44.3 percent). Women (51.8 percent) are also more likely to visit urgent care settings than are men (46.9 percent). Of those who reported making an urgent care visit, more than half (54.9 percent) made more than one visit within the past 12 months.

Beyond going to a doctor's office, emergency room, or urgent care center, 2.4 percent of the population reported seeking care at a public health clinic or other clinics within the region.

Access to Care
A majority (67.8 percent) of survey respondents reported they are always able to access care when needed. Another 26.6 percent reported they usually can access care when necessary. A small number (4.8 percent) indicated they sometimes have access, and 0.9 percent reported seldom or never having access to care when needed.

When surveyed about reasons for being unable to access care, the following reasons were provided.

<table>
<thead>
<tr>
<th>Reasons for Not Being Able to Access Care</th>
<th>Frequency of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>No available appointments</td>
<td>44 percent</td>
</tr>
<tr>
<td>Can't afford co-pays or other costs</td>
<td>34 percent</td>
</tr>
<tr>
<td>Can't take time off from work/Medical appointment times are inconvenient</td>
<td>31 percent</td>
</tr>
<tr>
<td>Can't afford the medications prescribed</td>
<td>19 percent</td>
</tr>
<tr>
<td>No transportation available</td>
<td>15 percent</td>
</tr>
<tr>
<td>Can't find a primary care provider</td>
<td>13 percent</td>
</tr>
<tr>
<td>Don't know how to find a doctor</td>
<td>10 percent</td>
</tr>
<tr>
<td>No specialists in my community for my condition</td>
<td>10 percent</td>
</tr>
<tr>
<td>No one to care for my children during appointments</td>
<td>6 percent</td>
</tr>
<tr>
<td>Afraid of what they might find</td>
<td>5 percent</td>
</tr>
<tr>
<td>Doctors that don’t speak my language</td>
<td>2 percent</td>
</tr>
<tr>
<td>Other</td>
<td>16 percent</td>
</tr>
</tbody>
</table>

Two common write-ins for this question under the ‘Other’ category were: “too much paperwork” and the system being “too complicated.”
Health Insurance

In 2013, 82 percent of the population under age 65 indicated having health insurance coverage; thus, approximately 18 percent of the population at the time of our previous CHNA were uninsured. For our 2015 CHNA, estimates suggest the number of uninsured individuals has dropped to approximately 15 percent of the population. The Healthy People 2020 goal for health insurance coverage is 100 percent of the population.

Of those 82 percent with insurance coverage who were surveyed, the following breakout describes the source of their coverage.

<table>
<thead>
<tr>
<th>Type of Coverage</th>
<th>Percent of Those with Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial insurance provided by employer</td>
<td>75.8 percent</td>
</tr>
<tr>
<td>Government-issue insurance</td>
<td>15.2 percent</td>
</tr>
<tr>
<td>Commercial insurance offered through the Affordable Care Act (i.e., the federal health insurance exchange)</td>
<td>2.4 percent</td>
</tr>
<tr>
<td>Self-paid commercial insurance not offered through an employer or the federal marketplace</td>
<td>0.9 percent</td>
</tr>
<tr>
<td>Other</td>
<td>5.7 percent</td>
</tr>
</tbody>
</table>

Health Status and Productive Days

Self-reported health status is a general indicator of the overall quality of health of a population. There is strong evidence linking self-reported health status and mortality.

According to our 2015 community health needs assessment:

- 56 percent of Atlantic County residents reported their health status to be excellent or very good.
- 17 percent indicated a fair or poor health status, which is slightly higher than the state rate of 16 percent.
- 27 percent indicated their health good.

Overall health is a combination of one’s physical health and one’s mental health. The number of mentally unhealthy days (days when an individual is unable to be productive due to poor mental health status) and the number of physically unhealthy days (days when one’s physical health impacts his or her ability to be productive) are indicators used to assist in determining one’s quality of life.

In Atlantic County, residents report an average of 3.7 mentally unhealthy days in a 30-day period. This is slightly above the state average of 3.4 days, and well above the national average of 2.8 days. In addition, 3.7 in a 30-day period is also the number of physically unhealthy days that residents report. In comparison, the state average is 3.2 and the national average is 2.9.
Average Life Expectancy and Leading Causes of Death

The average life expectancy is 75 years of age. The rate of years of potential life lost in Atlantic County in 2014 was 7,800. This rate is higher than the state’s, 5,500, and considerably higher than the top performers in the nation, 5,200. Atlantic County ranks 18th among the 21 counties in New Jersey for premature death.

The leading causes of death for adults in Atlantic County are heart disease and cancer. These are consistent with state and national leading causes of death.

<table>
<thead>
<tr>
<th>Leading Cause of Death</th>
<th>Percentage of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart disease</td>
<td>27.3 percent</td>
</tr>
<tr>
<td>Cancer</td>
<td>23.5 percent</td>
</tr>
</tbody>
</table>

Preventive Screenings

Research demonstrates that participation in preventive health screenings and medicine is an effective tool for maintaining good health. While Atlantic County’s participation rates remain under the Healthy People 2020 goals, 2015 participation rates have risen steadily since our last CHNA in 2013.

Screening Services/Preventive Care Received in the Past 24 Months

- Blood Pressure: 86% (2015 Participation Rates), 92.6% (Healthy People 2020 Goals)
- Cholesterol Screening: 75% (2015 Participation Rates), 82.1% (Healthy People 2020 Goals)
- Annual Seasonal Influenza Vaccination: 66% (2015 Participation Rates), 70% (Healthy People 2020 Goals)
Cancer-Related Screenings

According to data collected and analyzed for this report:

• 45 percent of age-appropriate women received a mammogram, fewer than the Healthy People 2020 target of 81 percent of the population.

• 55 percent of Atlantic County women had a Pap smear within the past three years, well below the Healthy People target of 93 percent of women who fall within the most recent screening guidelines.

• 22 percent of Atlantic County men have been screened for prostate cancer (PSA test), well below the New Jersey average of 58.2 percent for men 40 years and older.

• 40 percent of Atlantic County residents had a colonoscopy or sigmoidoscopy to screen for colorectal cancer, below the state average of 60 percent of age-appropriate individuals.

Chronic Diseases

Chronic diseases, such as heart disease and diabetes, are the leading causes of death and disability in the United States. People living with a chronic disease can often suffer from some type of major limitation in daily living and experience diminished quality of life. Although they are the most common and costly health problems, chronic diseases are also the most preventable. Lifestyle factors, such as smoking, diet, and activity, can impact chronic disease risk.

Chronic Diseases Diagnosed in Atlantic County

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Percentage of Population Reporting a Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>High blood pressure</td>
<td>48 percent</td>
</tr>
<tr>
<td>High cholesterol</td>
<td>40 percent</td>
</tr>
<tr>
<td>Overweight/obesity</td>
<td>36 percent</td>
</tr>
<tr>
<td>Arthritis</td>
<td>22 percent</td>
</tr>
<tr>
<td>Diabetes/Prediabetes</td>
<td>21 percent</td>
</tr>
<tr>
<td>Cancer</td>
<td>21 percent</td>
</tr>
<tr>
<td>Asthma</td>
<td>19 percent</td>
</tr>
<tr>
<td>Depression or other mental health diagnosis</td>
<td>18 percent</td>
</tr>
<tr>
<td>Heart disease</td>
<td>10 percent</td>
</tr>
<tr>
<td>Other</td>
<td>27 percent</td>
</tr>
</tbody>
</table>
Cardiovascular Disease

With respect to cardiovascular health, the following percentages of Atlantic County residents reported having the related cardiovascular conditions.

![Bar chart showing percentages of cardiovascular conditions in Atlantic County.]

- 48% have hypertension (elevated blood pressure).
- 40% have elevated cholesterol.
- 10% have angina or coronary heart disease.
- 3% have had a stroke.

Cancer

Of individuals surveyed, 21 percent reported having been diagnosed with cancer. Of those diagnosed, 57 percent percent of people diagnosed with cancer reported having received a diagnosis other than skin cancer. Forty three percent reported having been diagnosed with skin cancer. The four most common type of cancer for residents of Atlantic County are lung, prostate, breast, and colorectal.

Diabetes

Twelve percent of Atlantic County residents reported being diagnosed with diabetes. This is the highest prevalence rate in the state and is shared with Cumberland and Essex counties. However, while the prevalence of diabetes is high, diabetic monitoring is improving within Atlantic County.

Diabetic monitoring is defined as those 65 and older, as a subset of the population, with a diabetes diagnosis who receive HbA1c blood level monitoring. Atlantic County shares the state average of 84 percent receiving monitoring, slightly below top-performing communities, which are at 90 percent.

Avoidable Admissions

Avoidable admissions are hospital admissions that could have been avoided if the acute or chronic conditions causing the admission were prevented or better managed. A high number of avoidable admissions signals an outpatient treatment and disease-management infrastructure inadequate to meet community health needs. Quality measures outlined in the Affordable Care Act are the driving forces behind improvements in this area. With 62 preventable hospital stays in total for ambulatory-care-sensitive conditions per 1,000 Medicare enrollees, avoidable admission rates in Atlantic County are higher than the statewide rate of 55 per 1,000 enrollees and significantly worse than top-decile levels of 38 admissions. This rate, however, has improved since the 2013 assessment, when 76 avoidable admissions per 1,000 enrollees were made.
WOMEN’S AND INFANT HEALTH

Pregnancy and Birth Statistics

Atlantic County is ranked 16th among 21 counties for the percentage of women who receive early prenatal care. This is up from a ranking of 20th out of 21 counties in our previous report three years ago. This improved ranking came from an increase to 74 percent of pregnant women in Atlantic County receiving prenatal care versus the 65 percent previously reported. The Healthy People 2020 target for this is 77.9 percent of women seeking care within the first trimester.

In addition:

- Nine percent of all county births were by girls between 10 and 19 years of age, slightly higher than the state rate of 5 percent.
- Atlantic County ranked 19th among all 21 counties for its rate of teenage pregnancies.
- Atlantic County ranked 20th in the state for infant mortality, with 0.11 percent of all live births resulting in death. This ranking is higher than both the New Jersey average for infant deaths, 0.5 percent, and the Healthy People 2020 target of 0.6 percent.
- Nine percent of all live births in Atlantic County were of babies with low birth weight. In comparison, the average for the state of New Jersey is eight percent.

ALCOHOL AND TOBACCO USE

Alcohol Use

Excessive drinking is the third leading cause of lifestyle-related death in the United States. Excessive drinking is defined as either participating in binge drinking activities; consuming more than four drinks (women) or five drinks (men) on a given occasion within a 30-day period; or participating in heavy drinking of more than one drink per day consistently for women or two drinks per day for men. Excessive drinking is linked to increased frequency of heart disease and heart attacks, increased sexually transmitted diseases, sudden infant death syndrome, suicide, violent behaviors, and other adverse health outcomes.

In Atlantic County, 18 percent of adults reported participating in drinking practices that would be labeled excessive. This compares with 17 percent of adults in New Jersey and 12 percent across the nation.

One specific adverse outcome attributed to excessive drinking is alcohol-related motor vehicle accidents. Many of these lead to death. In Atlantic County, 26 percent of all motor vehicle accident-related deaths were attributed to alcohol.

Tobacco Use

Smoking rates in Atlantic County are higher than the New Jersey smoking rate of 15 percent. Nineteen percent of residents reported they currently smoke. Cigarettes are by far the most frequently used form of tobacco for those who use. The vast majority (93.4 percent) of all tobacco users reported using cigarettes, while 2.6 percent reported using either chewing tobacco or other types of smokeless tobacco.
HEALTHY BEHAVIORS

Physical Activity

The 2008 Physical Activity Guidelines for Americans call for adults to participate in at least 150 minutes of physical activity during any given week to maintain a healthy weight. In Atlantic County, 74 percent of community members reported participating in some sort of physical activity during a 30-day period, while 26 percent of the population didn’t participate in any form of physical activity during the same time frame.

Contributing to this is that 10 percent of Atlantic County residents don’t have adequate access to places where they can participate in physical activity. Adequate areas of physical activity are either parks or recreation facilities (i.e., gyms, community pools, dance studios, etc.). This percentage is five percentage points higher than that of the state but is comparable with the national average of nine percent of Americans who lack adequate access to a recreational facility.

Nutrition and Access to Healthy Food

The U.S. Department of Agriculture recommends at least five servings of fruits and vegetables per day for Americans, while some experts argue that seven to nine servings should be the recommendation. This federal guideline promotes a diet rich in produce to help ensure people receive the vitamins and minerals necessary to maintain wellness and a healthy weight.

In Atlantic County:

- 20 percent of the population reported eating three to five servings of fruits per day.
- 34 percent reported eating three to five servings of vegetables per day.
- 5 percent reported not eating any fruits and vegetables in a given day.

Having limited access to healthy foods impacts one’s ability to enjoy the many benefits that a diet rich in fruits and vegetables can yield. Atlantic County’s food environment index is 6.7. This index score is much lower than that of the state and the nation, which are at 8.3 and 8.2, respectively. The food environment index is a score that takes into account both food insecurity and the percentage of the population who have limited access to healthy foods.
Obesity
Lack of physical activity and healthy eating habits, combined with lack of environmental support to facilitate physical activity and healthy eating, greatly contribute to 27 percent of the Atlantic County adult population being considered obese. This is slightly above the state and national averages of 25 percent.

Driving and Seat Belt Usage
• 93 percent of Atlantic County residents reported always wearing a seat belt to prevent automobile fatalities.
• 77 percent of residents report driving alone to work and not carpooling.
• Of residents who drive to work alone, 28 percent report a long commute to work. A long commute is defined as more than 30 minutes.

Safe Sex Practices and Sexually Transmitted Infections
Sexually transmitted infections (STIs) result from lack of participation in safe-sex practices. Recently the incidence of STIs nationally has been on the rise to unprecedented levels. STIs are associated with a significantly increased risk of morbidity and mortality. This includes increased risk of cervical cancer, involuntary infertility and, in extreme cases, premature death. Evidence also suggests that STIs place a high economic burden on society.

Incidence of chlamydia is used as an indicator to gauge how widespread STIs are. Chlamydia is selected because it is the most common bacterial STI. In Atlantic County, per 100,000 residents, there are 463 diagnosed cases, higher than the average rate of 319.6.

In New Jersey alone, there were 37,657 diagnosed bacterial STI cases in 2014 (the most recent data year). This is a 27.1 percent increase since 2009 across the entire state.
HEALTH INFORMATION

Residents of Atlantic County turn to multiple sources for information on health and healthcare. Although a doctor or other health professional is the main source of information across all age groups, the internet also serves as an information source. Social networks also play a large role in distributing health information.

<table>
<thead>
<tr>
<th>Top Five Sources of Health Information by Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-49 years</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
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<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
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<td>5</td>
</tr>
</tbody>
</table>

Health-Related Topics of Greater Interest

Residents of Atlantic County shared the following topics for which they feel they need more information, or have a strong interest in learning about:

<table>
<thead>
<tr>
<th>Top 8 Health-Related Topics of Greater Interest</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
</tbody>
</table>
COMMUNITY HEALTH PERCEPTIONS

In addition to community members being surveyed about their participation in certain behaviors, they also were asked to provide their perceptions and/or opinions regarding health priorities in our community and interventions they would like to see implemented. This information is helpful as AtlantiCare and other community agencies determine responses and actions to address stated needs.

Most Important Elements for a Healthy Community

Residents were asked to rank by priority factors that contribute to a healthy community. The feedback received in priority order is summarized below.

<table>
<thead>
<tr>
<th>Top 5 Elements for a Healthy Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Low crime/Safe neighborhoods</td>
</tr>
<tr>
<td>2 Good jobs/Healthy economy</td>
</tr>
<tr>
<td>3 Access to healthcare</td>
</tr>
<tr>
<td>4 Good schools</td>
</tr>
<tr>
<td>5 Clean environment</td>
</tr>
</tbody>
</table>

Additional items included but not in the top five factors were affordable housing, care for the elderly and public transportation systems.

Risky Behaviors

Much as the factors listed above contribute to the perception of a healthy community, the presence of certain risky behaviors detracts from one’s positive perception of a healthy community. Atlantic County residents stated the following risky behaviors are detriments to our community that need to be addressed. They are listed in the order of priority provided by the respondents:

<table>
<thead>
<tr>
<th>Top 5 Risky Behaviors</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Drug abuse</td>
</tr>
<tr>
<td>2 Alcohol abuse/Drunk driving</td>
</tr>
<tr>
<td>3 Unsecured firearms</td>
</tr>
<tr>
<td>4 Unhealthy eating practices</td>
</tr>
<tr>
<td>5 Unsupervised children/Child neglect and abuse</td>
</tr>
</tbody>
</table>

Additional items mentioned as detrimental include careless/distracted driving, unsafe sex, tobacco use and school dropout rates/low education levels.
Greatest Health Problems
In addition to risky behaviors, residents were asked to rank what they perceived to be the greatest health problems facing our community. Below are the top five concerns Atlantic County residents indicated as the most important health problems to be addressed:

<table>
<thead>
<tr>
<th>Top 5 Health Problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Obesity</td>
</tr>
<tr>
<td>2 Drug and alcohol abuse</td>
</tr>
<tr>
<td>3 Cancer</td>
</tr>
<tr>
<td>4 Heart disease and stroke</td>
</tr>
<tr>
<td>5 Stress</td>
</tr>
</tbody>
</table>

Barriers to Making Healthy Lifestyle Choices
There are a number of barriers that impede healthy lifestyles. Many of these can be a result of environmental factors, cultural norms, or current policies or system practices. Below are the barriers indicated by Atlantic County residents as preventing their participation in healthy lifestyles, listed in the order in which they are perceived to have the strongest impact.

<table>
<thead>
<tr>
<th>Top 5 Barriers to Making Healthy Lifestyle Choices</th>
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</thead>
<tbody>
<tr>
<td>1 Cost of maintaining a healthy lifestyle</td>
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<tr>
<td>2 Lack of time/Too busy</td>
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<tr>
<td>3 Lack of motivation</td>
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<tr>
<td>4 Lack of knowledge of services available</td>
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<tr>
<td>5 Limited access to healthy food or fresh food</td>
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</tbody>
</table>

Health Interventions
Residents also responded with health interventions they would be interested in seeing in the community. Below are survey participants’ top five responses:

<table>
<thead>
<tr>
<th>Top 5 Health Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Incentives to encourage a healthier lifestyle</td>
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<tr>
<td>2 Community gardens/Farm markets</td>
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<tr>
<td>3 Organized exercise opportunities/Walking programs</td>
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<tr>
<td>4 Health fairs/Community festivals and events</td>
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<tr>
<td>5 Healthy cooking demonstrations</td>
</tr>
</tbody>
</table>

Additional interventions mentioned include programming and care for the elderly, smoke-free outdoor areas, and weight loss and other support groups.
ADOLESCENT HEALTH

Regarding general health for Atlantic County students:

• 55.5 percent of Atlantic County students indicated their health status is very good or excellent.
• 10.8 percent of students indicated a health status of fair or poor.

Atlantic County is fortunate to have a health department that invests in a youth risk behavior study every five years. Here are a few findings and themes from the 2016 Atlantic County Youth Risk Behavior Surveillance System.

Vehicle and Bike Safety

• When it comes to safety, Atlantic County youth reported bicycle helmet and seat belt use in proportions consistent with the previous years’ studies and the national results. Females, both nationally and in Atlantic County, are more likely than males to wear a seat belt.

• Atlantic County youth are significantly less likely than those across the nation to text or email while driving (20.1 percent and 36.7 percent, respectively).

• The percentage of youth from Atlantic County who rode in a car with a driver who had been drinking (15.6 percent) was significantly below the 2010 and 2004 county and national results.

Violence

• In general, Atlantic County youth are equally or less likely than youth nationwide to carry weapons or engage in violent behavior. Current-year measures of carrying guns and other weapons were significantly lower than in the 2010 Atlantic County study and the national data.

• The percentage of students who were threatened or injured with a weapon on school property and the percentage of students in a physical fight in the past 12 months are both significantly lower than the 2010 and 2004 county and national results.

• 11 percent of youth who have dated within the past year reported that the person they were dating had physically hurt them on purpose.

Suicide/Mental Health

• Approximately 10 percent of Atlantic County students had made a plan in the past 12 months for how they would attempt suicide. The proportion of Atlantic County students who reported having attempted suicide in the past 12 months is 7.6 percent. Of those who report having attempted suicide, the proportion whose suicide attempt led to an injury, poisoning, or overdose that had to be treated by a doctor or nurse (17 percent) is also similar to the 2010 and 2004 Atlantic County data but significantly lower than 2013 national data (33.2 percent).
Tobacco, Alcohol and Drug Use

- Approximately 37 percent of Atlantic County youth reported having tried an electronic vapor product. Contrasting this with the 19 percent of students who have ever tried a cigarette is striking. The majority (61.1 percent) of Atlantic County youth believe electronic vapor products are less harmful to their health than smoking cigarettes.

- Significantly fewer Atlantic County students have had at least one drink of alcohol in their lifetime (50.9 percent) compared with the national figure (62.9 percent) and with previous Atlantic County studies. Atlantic County youth were less likely to engage in binge drinking at least once in the previous 30 days (11.8 percent) compared with the national rate (18.7 percent) and have shown significant improvement over previous studies.

- With regard to drug use, 28.4 percent of Atlantic County students indicate having tried marijuana and 15.2 percent have used marijuana in the previous 30 days. In addition, 2.3 percent of students report having used cocaine; 5.9 percent have inhaled glue or aerosols; 2.6 percent have used ecstasy; 1.4 percent have used methamphetamines; and 1.1 percent took steroids without a prescription. The proportion of students who have tried heroin is 1.8 percent. In addition, 9.5 percent of Atlantic County students have taken a prescription drug without a doctor’s prescription.

- More than one-quarter (26.2 percent) of Atlantic County youth reported being offered, sold or given an illegal drug on school property in the past 12 months. This is higher than the national average of 22 percent.

Sexual Activity

- Overall, 32.4 percent of Atlantic County students have had sexual intercourse. This is lower than the national average of 41 percent. Of those who are sexually active, 54.5 percent reported using a condom the last time they had sexual intercourse. This statistic has significantly decreased from previous Atlantic County studies (67.8 percent in 2010) and is far below the national statistic of 64.4 percent.

- Condoms are the most common method of birth control used by Atlantic County students. There has been a strikingly significant rise in the number of Atlantic County students who are sexually active who reported not using any pregnancy protection method the last time they had sexual intercourse: 19.6 percent versus the 2010 Atlantic County study rate of 8.3 percent.

- Approximately 42 percent of Atlantic County students have never participated in sexting and do not know anyone who does. In addition, 30.9 percent say they don’t participate but know plenty of kids who do, and 16.5 percent have actively participated by sending sext images.
Body Weight and Healthy Behaviors

- Students’ BMI categories were reported as follows: healthy weight, 67.8 percent; underweight, 2.3 percent; overweight, 18.6 percent; and obese, 11.4 percent. Over half of students indicated they would describe their body weight as the “right weight.”

- Exercise was the most reported strategy for attempting to lose weight (52.6 percent), followed by eating less food, calories, or fat (26.6 percent). Reports of less healthy weight-loss strategies such as fasting, diet pills, and vomiting or taking laxatives were minimal and significantly reduced from previous years’ results, though more evident in females than males.

Diet and Nutrition

Atlantic County students were asked about their consumption of fruits and vegetables and other foods in the previous week. They reported the following:

- 12.9 percent drank an energy drink in the previous week.
- 62.4 percent drank soda.
- 71.5 percent drank milk.

In addition, female Atlantic County students were more likely to eat fruit, green salads, and other vegetables, while males were more likely to drink soda, energy drinks, and sports drinks. Just over half of Atlantic County youth reported eating breakfast five to seven times in the previous week.

Physical Activity

The majority (75.9 percent) of Atlantic County students report being physically active for a total of 60 minutes on at least one of the previous seven days, well below the national rate of 85.6 percent. In addition, 62.6 percent of Atlantic County students are significantly more likely to have played on a sports team in the past year and 88.4 percent attended a physical education class at least once in an average school week.

Provider Access

Approximately 90 percent of Atlantic County students have seen a doctor or primary care provider in the previous year. In addition, 78 percent of Atlantic County students have been to a dentist during that time period.

Sleep

Only 24.1 percent of Atlantic County students get eight hours or more of sleep.

Extracurricular Activities

Percentages of Atlantic County students who, in the past year, participated in an extracurricular school activity (80.6 percent), had a part-time job (26 percent), or did volunteer work in the community (61 percent).
DATA SOURCES

The following sources of demographic and public health data were used in the compilation of this report:

- 2015 Community Health Needs Survey, AtlantiCare; Survey Administrator: ab+c Creative Intelligence
- 2015 Community Health Perceptions Focus Groups, AtlantiCare; Administrator: ab+c Creative Intelligence
- 2013-2014 Behavioral Risk Factor Surveillance Survey; New Jersey Department of Health and Human Services
- 2014 Leading Causes of Death for New Jersey, New Jersey State Health Assessment Data, New Jersey Department of Health
- 2016 County Health Rankings, University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation
- 2016 Atlantic County, New Jersey Kids Count Data, Annie E. Casey Foundation, published by Advocates for Children in New Jersey
- 2016 Atlantic County Youth Risk Factor Surveillance Survey, Atlantic County Department of Public Health; Survey Administrator: Holleran Consulting
- 2013 Cancer Incidence and Mortality in New Jersey, New Jersey Department of Health
- Healthy People 2020, U.S. Department of Health and Human Services
- 2008 Physical Activity Guidelines for Americans, U.S. Department of Health and Human Services
- 2010 Quick Facts, Atlantic County, New Jersey, United States Census Bureau
ATLANTIC COUNTY SERVICES

CLINICS, HOSPITALS AND MEDICAL CENTERS

AtlantiCare Regional Medical Center
(888) 569-1000
www.atlanticare.org

Shore Medical Center
Somers Point (609) 653-3500
www.shoremedicalcenter.org

Atlantic County Division of Public Health
Northfield (609) 645-5933

Southern Jersey Family Medical Centers, Inc.
Hammonton (609) 567-0200
Pleasantville (609) 383-0880
Atlantic City (609) 572-0000
www.sjfmc.org

Child Federation of Atlantic County
Pleasantville (609) 272-1711

John H. Cronin Dental Center
Northfield (609) 645-5814

Spanish Community Center
3900 Ventnor Avenue, Atlantic City
(609) 345-1249
303 Sumner Street, Landisville
(856) 697-2967

FAMILY SUCCESS CENTERS

Family Success Centers provide a comprehensive range of services and information and referral, including mental health, medical and dental, employment services, addiction counseling, economic and housing assistance, recreation, and additional programs designed to assist children and families in need.

Egg Harbor Township Family Success Center
Family Service Association
3050 Spruce Avenue, Egg Harbor Township
(609) 569-0376
www/fsasj.org

Hammonton Family Center
AtlantiCare Behavioral Health
310 Bellevue Avenue, Hammonton
(609) 567-2900
www.atlanticare.org

Oceanside Family Success Center
Robins’ Nest
609 Arctic Avenue, Atlantic City
(609) 236-8800
www.robinsnestinc.org

New Day Family Success Center
Family Services Association
622-624 S. New York Road
Galloway, NJ 08205
(609)-652-0230
SUBSTANCE ABUSE INFORMATION, COUNSELING AND TREATMENT

OUTPATIENT TREATMENT AND COUNSELING
Mental health and substance abuse counseling and recovery services for individuals and families

AtlantiCare Behavioral Health
(609) 646-9159
www.atlanticare.org

Family Service Association
Egg Harbor Township (609) 569-0239
Absecon (609) 652-1600
www.fsasj.org

Alcoholics Anonymous
Worldwide (800) 604-4357
www.aa.org

Narcotics Anonymous
Worldwide (800) 992-0401
www.na.org

RESIDENTIAL INPATIENT TREATMENT
Alcohol and drug addiction treatment, detox and recovery services for men, women and teens

John Brooks Recovery Center
Atlantic City (609) 345-4035
www.jbrcnj.org

Lighthouse Recovery Center
Mays Landing and Ventnor Locations (800) 852-8851
www.lhrecovery.com

SERVICES FOR YOUTH AND FAMILIES
To report suspected child abuse or neglect, please call 1 (877) NJ Abuse (652-2873).

Atlantic County Department of Family and Community Development is an umbrella organization dedicated to the well-being of all citizens of the county. This department strives to coordinate its efforts with those of state and city officials, as well as with other social service organizations. It attempts to solve the problems of Temporary Assistance to Needy Families (TANF), food stamps and medical assistance recipients and also assists with issues pertaining to housing and emergency assistance.

(609) 345-6700 x 2701

AtlantiCare Behavioral Health
Child and Adolescent Services
(609) 646-9159
www.atlanticare.org

The Alcove Center for Grieving Children
Activity-based bereavement peer support groups for children and families who have lost a loved one
Northfield (609) 484-1133
www.thealcove.org

Atlantic County Juvenile Family Crisis Unit
Assists families who are experiencing difficulties managing the behavior of children aged 10 to 17
Northfield (609) 645-5862
www.aclink.org/intergenerational

Jewish Family Service (JFS)
A multi-service family counseling agency
Margate (609) 822-1108
www.jfsatlantic.org

Parents Anonymous
Free community-based peer support groups
(800) THE-KIDS
www.pa-of-nj.org
Atlantic Cape Family Support Organization
A family-run, county-based organization that provides direct family-to-family peer support, education, advocacy and other services to family members of children with emotional and behavioral problems
950 Tilton Road, Suite 108
Northfield, NJ 08225
(609) 485-0575
Fax: (609) 485-0467
Perform Care/Contracted Systems Admin.
Assessment and referral to a full range of treatment and support services for children with emotional and behavioral issues
(877) 652-7624
Children's Mobile Response
Rehabilitative interventions for youth to defuse and resolve an immediate behavioral crisis
Statewide (877) 652-7624
Family Service Association (FSA)
Multi-service agency provides family counseling, children's partial care and case management services
Egg Harbor Township (609) 569-0239
Absecon (609) 652-1600
www.fsasj.org
Mental Health Association (MHA)
Advocacy, education and support services
Galloway (609) 652-3800
www.mhaac.info
Youth Advocate Program (YAP)
MERGE academic, employment and mentoring services for males aged 14 to 24
(609) 345-7333
Atlantic Cape Family Support Organization
Assistance for families who have children with emotional and behavioral issues
(609) 485-0575
www.acfamsupport.org

SCHOOL-BASED YOUTH SERVICES
Atlantic City High School
AtlantiCare Behavioral Health
(609) 345-8336
Buena Regional High School
AtlantiCare Behavioral Health
(856) 697-2400 x 8233
Cleary Middle School
AtlantiCare Behavioral Health
(856) 697-2400 x 8483
Egg Harbor Township High School
Family Service Association
(609) 653-0100 x 2680
Oakcrest High School
AtlantiCare Behavioral Health
(609) 909-2677
1 - AtlantiCare Regional Medical Center, Satellite Emergency Department, Hammonton
2 - AtlantiCare Regional Medical Center, Pomona
3 - AtlantiCare Regional Medical Center, Atlantic City and AtlantiCare HealthPlex, Atlantic City
4 - Bacharach Institute for Rehabilitation, Pomona
5 - Shore Medical Center, Somers Point
6 - Southern Jersey Family Medical Centers, Inc., Hammonton
7 - Southern Jersey Family Medical Centers, Inc., Pleasantville
8 - Southern Jersey Family Medical Centers, Inc., Atlantic City
9 - Atlantic County Division of Public Health, Northfield