

2022 Community Health Needs

Assessment

Colette M Barrow, MPA, PhD

*Executive Director
Community and Population Health*



University
HOSPITAL

Newark, NJ



MISSION | VISION

OUR MISSION: *As New Jersey's public academic health center, University Hospital is committed to providing exceptional care to every patient, every time.*

OUR VISION: *Partnering with our communities, University Hospital improves health for generations to come.*

Community Health Needs Assessment: What & Why?

The CHNA helps UH identify the community's healthcare needs, evaluate the hospital's program effectiveness, and identify effective strategies for designing health and supportive care.

The CHNA takes a deep dive into the factors influencing health problems in the community.

SOCIAL DETERMINANTS OF HEALTH FRAMEWORK



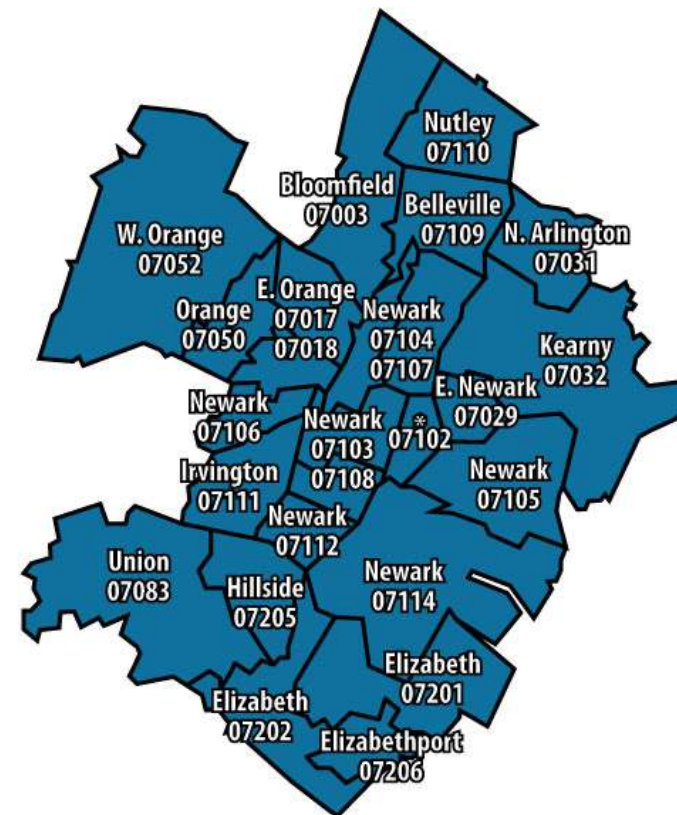
Overarching Questions

Throughout the Community Health Needs Assessment, four core questions guided the research:

- 1. What are the **key characteristics** of the communities served by University Hospital?*
- 2. What is the **health status** of those communities?*
- 3. How might **community characteristics** impact health status?*
- 4. How can what we learned **drive programming** at University Hospital?*

University Hospital Service Areas: Primary Service Area

The **27-zip code** area from
where **80% of those**
hospitalized at University
Hospital live.

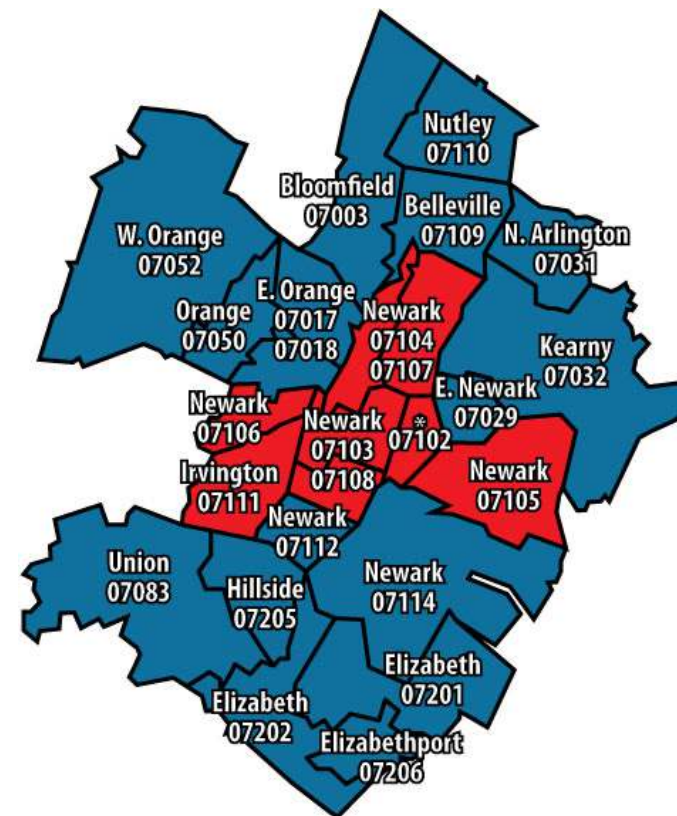


Source: Sg2 Healthcare Analytics – Market Demographics. Note: 07101 is a Post Office and resides in 07102.

University Hospital Service Areas: Core Service Area

*The **9-zip code*** area surrounding University Hospital where **50% of those hospitalized at UH live.***

**8 Newark zip codes and 1 Irvington zip code*



Source: Sg2 Healthcare Analytics – Market Demographics. Note: 07101 is a Post Office and resides in 07102.

Major Causes of Death—Essex & NJ | 2020

#	NJ'S MAJOR CAUSES OF DEATH	NJ
	Count	95,995
1	Heart Disease	19,716
2	COVID-19	16,495
3	Cancer (malignant neoplasms)	15,564
4	Other than 28 Major Causes	15,390
5	Unintentional injuries	4,777
6	Stroke (cerebrovascular diseases)	3,726
7	Chronic lower respiratory diseases (CLRD)	2,942
8	Alzheimer's disease	2,673
9	Diabetes mellitus	2,442
10	Septicemia	2,060

13 Hypertension

#	NJ'S MAJOR CAUSES OF DEATH	ESSEX
	Count	8,802
1	COVID-19	2,059
2	Heart Disease	1,595
3	Other than 28 Major Causes	1,431
4	Cancer (malignant neoplasms)	1,100
5	Unintentional injuries	458
6	Stroke (cerebrovascular diseases)	302
7	Diabetes mellitus	295
8	Chronic Lower Respiratory Diseases (CLRD)	211
9	Septicemia	210
10	Alzheimer's disease	180

14 Hypertension

#	NJ'S MAJOR CAUSES OF DEATH	NEWARK
	Count	3,068
1	COVID-19	753
2	Other than 28 Major Causes	523
3	Heart Disease	511
4	Cancer (malignant neoplasms)	330
5	Unintentional injuries	243
6	Diabetes mellitus	135
7	Stroke (cerebrovascular diseases)	95
8	Septicemia	77
9	Chronic Lower Respiratory Diseases (CLRD)	64
10	Essential hypertension and hypertensive renal disease	62

Source: New Jersey State Health Assessment Data (2020).

COMMUNITY HEALTH STATISTICS

12,200/
100K

CORONARY HEART DISEASE

New Jersey—3,300 per 100,000 | Essex County—6,000 per 100,000 |
Primary Service Area—4,583.4 per 100,000 | **Newark—12,200 per 100,000**

35,00/
100K

HYPERTENSION

New Jersey—30,200 per 100,000 | Essex County—31,400 per 100,000 |
Primary Service Area—30,332.6 per 100,000 | **Newark—35,000 per 100,000**

36%

OBESITY

New Jersey—27% of adults | Essex County—29% of adults
Primary Service Area—27.84% | **Newark—36% of adults**

16,400/
100K

DIABETES

New Jersey—9,600 per 100,000 | Essex County—11,200 per 100,000
Primary Service Area—11,231.3 per 100,000 | **Newark—16,400 per 100,000**

6,734/
100K

KIDNEY DISEASE

New Jersey—2,800 per 100,000 | Essex County—5,800 per 100,000 |
Primary Service Area—6,734 per 100,000 | Newark—1,700 per 100,000

Source: New Jersey State Health Assessment Data (2018, 2019, 2020) | City Health Dashboard/County Health Rankings (2019)

COMMUNITY HEALTH STATISTICS

31,500/
100K

ASTHMA

New Jersey—8,400 per 100,000 | Essex County—5,700 per 100,000 | Primary Service Area—7,347 per 100,000 | **Newark—31,500 per 100,000**

16,300/
100K

COPD

New Jersey—5,200 per 100,000 | Essex County—5,100 per 100,000 | Primary Service Area—5,058 per 100,000 | **Newark—16,300 per 100,000**

5.6/
1K

INFANT MORTALITY

New Jersey—4.3 per 1,000 | **Essex County—5.6 per 1,000** | Primary Service Area—N/A | **Newark—5.6 per 1,000**

1,200/
100K

HIV/AIDS & STDs

New Jersey—508 per 100,000 | Essex County—1,452 per 100,000 | **Primary Service Area—1,200.5 per 100,000** | Newark—N/A

38,300/
100K

PHYSICAL INACTIVITY

New Jersey—27,000 per 100,000 | Essex County—29,000 per 100,000 | Primary Service Area—28,199.9 per 1000,000 | **Newark—38,300 per 100,000**

19.1/
100K

FEMALE BREAST CANCER

New Jersey—22.1 per 100,000 | Essex County—18.5 per 100,000 | **Primary Service Area—19.1 per 100,000** | Newark—N/A

Source: New Jersey State Health Assessment Data (2018, 2019, 2020) | City Health Dashboard/County Health Rankings (2019)

LIFESTYLE & ENVIRONMENTAL IMPACTS

21.9%

SMOKING

New Jersey—13.0% | Essex County—16.0%
Primary Service Area—15.6% | **Newark—21.9%**

17%

EXCESSIVE DRINKING

New Jersey—16.0% | Essex County—17.0%
Primary Service Area—17.08% | Newark—15.8%

15%

FOOD INSECURITY

New Jersey—10.0% | Essex County—16.0%
Primary Service Area—13.85% | **Newark—14.83%**

18%

FREQUENT MENTAL DISTRESS

New Jersey—11.0% | Essex County—14.0%
Primary Service Area—13.58% | **Newark—17.9%**

17%

FREQUENT PHYSICAL DISTRESS

New Jersey—11.0% | Essex County—13.0%
Primary Service Area—12.6% | **Newark—16.7%**

35/
100K

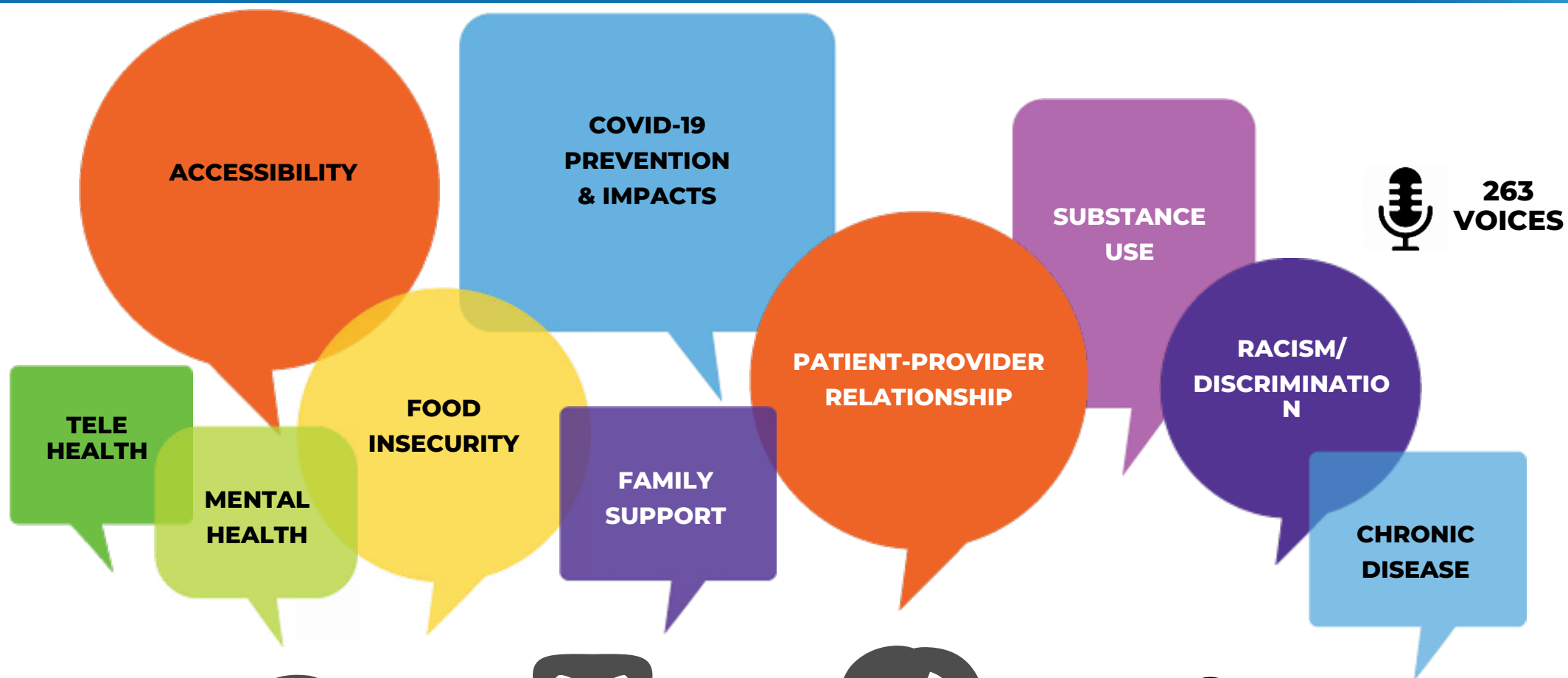
DRUG OVERDOSE DEATHS

New Jersey—31.0 per 100,000 | Essex County—37.0 per 100,000
Primary Service Area—32.6 per 100,000 | **Newark—34.8 per 100,000**

COMMUNITY CONVERSATIONS



TOP 10 IDENTIFIED THEMES



TOP 10 IDENTIFIED THEMES

ACCESSIBILITY

1,103

This theme focuses on health insurance, disjointed services, poor continuity of care, and the need for support in navigating health care and social service systems (e.g., case workers, patient navigators).

FAMILY SUPPORT

857

Participants shared that support programs for families and youth have been adversely impacted by the pandemic. Participants expressed the need for additional services and programming.

MENTAL HEALTH

845

Mental health was mentioned in almost every community conversation and key informant interview. Conditions like depression, anxiety, and PTSD that were present before the pandemic seemed to worsen during the last two years.

COVID-19 PREVENTION & IMPACT

647

Participants talked about the challenges in encouraging some residents to take prevention measures such as not wanting to wear masks, hesitancy about getting tested and getting vaccinated, et al.

PATIENT/PROVIDER RELATIONSHIP

642

Build rapport, establish trust, communicate, and help to alleviate fear with their patients are key in getting patients to seek health care services and follow-up. Respect of cultural differences and non-discriminatory care is also essential.



263
VOICES

TOP 10 IDENTIFIED THEMES

RACISM/ DISCRIMINATION

610

The discussion centered around differential treatment in community due to race, ethnicity and immigration status. Racism and discrimination is experienced in the way residents are treated by the police, fellow residents, as well as healthcare providers.

FOOD INSECURITY

581

The predominance of fast-food chains in Newark provides easy access to unhealthy foods. With minimal affordable healthy-eating options in Newark, fast-food is a low-cost convenient food option for residents.

TELEHEALTH

530

The pandemic created an opportunity to increase the availability of telehealth services. While telehealth increases access for certain people in the community, it creates less access for others.

SUBSTANCE USE

369

A significant barrier in addressing this issue is access to treatment programs for those battling substance abuse disorders. The excessive number of liquor stores in Greater Newark was also mentioned as an enabling factor and a gateway to other drugs.

CHRONIC DISEASE

353

The prevalence of chronic illnesses (e.g., diabetes, cancer, HIV, asthma, high blood pressure, tuberculosis), combined with high COVID-19 rates in Greater Newark, have placed stress upon a community also dealing with socioeconomic disparities.



**263
VOICES**

Next Steps

**COMMUNITY STAKEHOLDER
MEETINGS**

**PRIORITIZE
KEY FINDINGS**

**TURN IDENTIFIED ISSUES
INTO ACTION ITEMS**