

Fort Bend County
Health & Human Services
**COMMUNITY
HEALTH
ASSESSMENT**



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Thank you to the Fort Bend County community. The diversity of voices that shared their experiences and informed this community health assessment (CHA) was invaluable. Your collective insights are the compass that guides this important work.

The 2022 Fort Bend County Community Health Assessment (CHA) is a collaborative, engaging, and substantive plan that will guide our collective health planning efforts. We would like to acknowledge the dedication, expertise and leadership of the following agencies, who participated on the CHA Committee.

- Access Health
- City of Sugar Land
- Fort Bend County Behavioral Health Services
- Fort Bend County Judge's Office
- Fort Bend County Public Transportation
- Fort Bend County Sheriff's Office
- Fort Bend Independent School District
- Fort Bend Transformation Church
- Henderson-Wessendorff Foundation
- OakBend Medical Center
- Texana
- The George Foundation
- University of Houston College of Medicine
- UTHealth Houston School of Public Health

We would also like to acknowledge the efforts of the following CHA community partners.

- East Fort Bend Human Needs Ministry
- Fort Bend County Commissioner – Precinct 1 Office
- Fort Bend County Commissioner – Precinct 2 Office
- Fort Bend County Community Development
- Fort Bend County Human Resources
- Fort Bend County Risk Management
- Fort Bend County Road and Bridge
- Fort Bend County Veteran Services Office
- Friendship Community Bible Church
- Fort Bend Regional Council on Substance Abuse
- Greater Houston Community Foundation
- Houston Methodist Hospital – Sugar Land
- Katy ISD
- Methodist Hospital – Sugar Land
- OakBend Medical Center
- Our Lady of Guadalupe Catholic Church
- Pinnacle Senior Center
- St. Marks the Evangelist Catholic Church
- The Fort Bend Church
- Texas State Representative Ron Reynolds
- University of Houston College of Nursing

Fort Bend County Health & Human Services recognizes the tremendous dedication and effort of Carrie Rai, Performance and Innovation Specialist, and Jennifer Stasney, Outreach Communications Specialist, in bringing this endeavor to completion.

INTRODUCTION

On behalf of Fort Bend County Health & Human Services (FBCHHS), I am pleased to introduce this comprehensive assessment of health in Fort Bend County. This achievement is the first such effort by our health department since 2007 and represents the collaborative effort that began with support from our Commissioners Court. Without their collective insight into the need to invest in such an effort with the provision of key personnel and resources, FBCHHS could not have achieved this important goal. In this assessment, FBCHHS evaluates the 10th largest county in Texas with respect to health and provides some guidance on the road to a healthier future. It is no coincidence that this assessment was accomplished as our County expended tremendous efforts in fighting the COVID-19 pandemic. The pandemic highlighted many areas where critical resources were lacking, and partnerships had to be resurrected or formed in order to succeed in keeping our community as healthy as possible during the most challenging health crisis of our lifetime. The pandemic also brought to the forefront, the physical health, mental health and economic struggles of the rapidly evolving community that we call home.

To meet this task, we were led by our skilled performance and innovation specialist who laid the foundation and convened partnerships to collect, analyze, and interpret national, state, and local data; surveyed stakeholders; and gathered and illuminated the voices of our community. Through this collective effort, we have identified five key areas to address in this initial offering. Our intent is to apply our core values of collaboration, innovation, and equity to implement an improvement plan utilizing a collective spirit and action. All recommendations are for County leadership to consider and direct further action. Some recommendations will require minimal action to implement; others will require future planning and investment. Investment in health is inherently personal as we all experience health in unique ways, whether as individuals or within our family units. As a public health physician having worked for almost three decades within the Texas health care system, I am acutely aware of these challenges. Addressing the COVID-19 pandemic as a health care leader for the past three years has provided a poignant and very personal perspective that continues to energize my commitment to providing the opportunity for accessing the best health care Fort Bend County has to offer to all our residents. In the end, strategic investments in prevention will prove to be the ones that reap the longest lasting return.

Let me close by expressing my sincere appreciation to our countless partners who shared in this journey. The impact of your input and feedback has been invaluable. We hope that this report is helpful to you as we share the outcomes of a collaborative effort. The 2022 Community Health Assessment represents the beginning of the journey forward to a healthier Fort Bend County.

Jacquelyn Johnson-Minter, MD, MPH, MBA
Director & Local Health Authority

PURPOSE

What is a Community Health Assessment?

A Community Health Assessment (CHA) refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis. A community health improvement plan is a long-term, systematic effort to address public health problems based on the results of community health assessment activities and the community health improvement process¹.

A community health assessment gives organizations comprehensive information about the community's current health status, needs, and issues. In turn, this information can help with developing a community health improvement plan by justifying how and where resources should be allocated to best meet community needs. Upon completing the CHA, Fort Bend County Health and Human Services (FBCHHS), in collaboration with the community, will develop implementation strategies to address the significant community health needs that are identified in this CHA.

¹CDC. Community Health Assessments & Health Improvement Plans. Retrieved from <https://www.cdc.gov/publichealth-gateway/cha/plan.html>



METHODOLOGY

This section describes the framework and process for the community health assessment (CHA), including how the data were identified, collected and analyzed.

Framework

The Association for Community Health Improvement provides a Community Health Assessment Toolkit² that centers community engagement at its core. Fort Bend County Health & Human Services (FBCHHS) and CHA partners followed this toolkit to guide the CHA process.



² Association for Community Health Improvement. (2017). Community Health Assessment Toolkit. Accessed at www.healthycommunities.org/assesstoolkit

Identify & Engage Stakeholders

The process of collaboration and community engagement began with identifying stakeholders from a variety of sectors within the community and the creation of the following committees and teams:

- CHA Committee
- CHA Sub-Committee
- Data & Analysis Team
- Outreach & Engagement Team

The CHA Committee was comprised of FBCHHS staff representing the divisions and leadership of the health department and representatives from community and system sectors including primary health care, mental health, hospitals, private philanthropy, education, government, social services, faith community, academia, transportation, and public safety. The CHA Committee provided input for and reviewed the methodology, data, analysis, and results of this project.

The CHA Sub-Committee, comprised of a subset of CHA Committee members, was formed as a working group to bring documents, such as the CHA Survey and CHA Key Informant Questions, for review to the larger CHA Committee.

The Data & Analysis Team is made up of FBCHHS staff, including Data Analysts and Epidemiologists. The team collected the secondary data and analyzed the results of the CHA survey.

While the Outreach & Engagement Team was not specifically created for the CHA, this team was critical to engaging the community in the CHA process. The team hosts and attends events with diverse partners assuring the community knows the services FBCHHS provides. During these events, the team promoted the CHA process and distributed the CHA survey.

Collect & Analyze Data

This CHA includes a combination of quantitative demographic and health data as well as qualitative data collected from both primary and secondary sources that reflect the experiences and opinions of community stakeholders. Data has been gathered in four different ways: review of other local community assessments, secondary data, a community survey, and key informant interviews.

Literature Review

Fort Bend County contains many stakeholders who are interested in the health needs of the community, and some have completed their own community health assessments in recent years. These community needs and community health needs assessments have included primary and secondary qualitative and quantitative data. While each assessment has its own focus, each reflects some portion of the Fort Bend County community. The OakBend Medical Center 2018 Community Health Needs Assessment concentrated on nine zip codes within Fort Bend and Wharton Counties.³ The Memorial Hermann Sugar Land Hospital 2019 Community Health Needs Assessment covered Fort Bend, Harris, and Wharton counties.⁴ Houston Methodist Sugar Land Hospital's 2019 Community Health Needs Assessment evaluated Harris and Fort Bend Counties.⁵ The George Foundation conducted a community needs assessment in 2019 with a focus on Fort Bend County nonprofits.⁶ San Jose Clinic, located in Rosenberg, TX, completed a Community Health Needs Assessment in 2020 to understand the needs of Fort Bend County residents that lived in the county during Hurricane Harvey in 2017.⁷

A review of the primary qualitative data collected

³Community Health Needs Assessment 2018. (2018). OakBend Medical Center. Retrieved from [http://oakbendmedcenter.net/wp-content/uploads/2019/03/OakBend%202018%20CHNA%20\(Final%20Version%20for%20Website\).pdf](http://oakbendmedcenter.net/wp-content/uploads/2019/03/OakBend%202018%20CHNA%20(Final%20Version%20for%20Website).pdf)

⁴2019 Community Health Needs Assessment. (June 27, 2019). Memorial Hermann Sugar Land Hospital. Retrieved from https://www.memorialhermann.org/-/media/memorial-hermann/org/files/locations/sugarland_2019community-healthneedsassessment.ashx?la=en&hash=B77CA81235B6983F1CEB0D18D7BE52D0

⁵Community Health Needs Assessment 2019. (2019). Houston Methodist Sugar Land Hospital. Retrieved from https://www.houstonmethodist.org/-/media/pdf/community-benefits/2019-chnas/sugar-land_chna_final_2019.ashx

⁶Community Needs Assessment. (2019). The George Foundation. Retrieved from http://www.thegeorgefoundation.org/media/resources/The_George_Foundation_Community_Needs_Assessment_Final_10.09.19.pdf

⁷San Jose Clinic Community Health Needs Assessment. (June 2019 – January 2020). San Jose Clinic

by these five local community assessments has identified common themes in the health needs of the Fort Bend County community. The most frequently cited and top prioritized health concerns were access to health care, diabetes, chronic disease, mental health, obesity/overweight, and transportation.

Four out of the five assessments identified access to healthcare as the top or a major issue for the community. Access to healthcare included people being uninsured or underinsured, lack of transportation, lack of providers, lack of bilingual providers, insufficient number of providers who accept Medicaid, and an inability to pay out-of-pocket expenses.

Four out of the five community assessments placed mental health as a top community priority. The reasons for this were a lack of adequate mental and behavioral health providers in the area and not enough providers that take Medicaid. According to the San Jose Clinic Community Health Needs Assessment, “more than one in four people had an episode of anxiety or depression within a month. For this reason, as the population of FBC increases, it is likely that the rate of mental illness could see an uptick if socioeconomic health determinants are not adequately addressed”.⁷

Obesity and being overweight, diabetes and chronic disease were identified in several of the local assessments as being items of concern. Obesity issues were linked to poor nutrition, limited access to healthy food options, lack of opportunities for physical activity, poor lifestyle choices and lack of understanding about the causes and consequences of these health issues.

Some of the hospitals in the Fort Bend area are currently in the process of completing updated community health needs assessment; however, at the time of this publication, the results have not been made available. FBCHHS strives to update information as it becomes available.

Review of Secondary Data

CHA secondary data, including the health outcomes and health determinants, were determined based on the Center for Disease Control (CDC)

and Prevention Community Health Assessment for Population Health Improvement: Resource of Frequently Recommended Health Outcomes and Determinants.⁸ This CDC report was a systematic review of CHA guidance and resources and presents the most frequently and recommended health outcomes and determinants across academic and professional organizations. In addition, the CHA Committee added five additional metrics (*see those highlighted in green below*) that reflected the potential needs of the Fort Bend community.

The Community Health Assessment for Population Health Improvement report provides indicators for each of the above metrics along with suggestions as to where to find the information. [Appendix B](#) lists each metric, indicator and the source.

Community Survey

Primary data was collected through the administration of community surveys. Survey questions were selected by the CHA-Sub Committee from a review of possible questions that had been used in validated surveys, such as the Behavioral Risk Factor Surveillance System, and used by other jurisdictions that have completed CHA surveys. The CHA Committee finalized and approved the survey prior to launch. See [Appendix C](#) for a copy of the survey.

The survey was administered from March 21 – June 30, 2022, for a total of 13 weeks. The survey was made available in English, Spanish and Vietnamese and through on-line platforms, over the phone, and in person. Convenience sampling was used to recruit survey participants, using contacts of the CHA Committee members, partner organizations, and by invitations through social media and a press release. The FBCHHS Outreach Team distributed the survey during community events and with targeted communities. The Outreach Team focused on obtaining survey participation from people who were members of vulnerable populations, and groups that did not have access to technology.

During the survey period, the community provided feedback that the survey was long, which deterred some from participating. As a result, the CHA Committee decided to shorten the survey in order to reach as many residents as possible. This resulted in

⁸ U.S. Centers for Disease Control and Prevention. (2013). Community Health Assessment for Population Health Improvement: Resource of Most Frequently Recommended Health Outcomes and Determinants, Atlanta, GA: Office of Surveillance, Epidemiology, and Laboratory Services.

Community Health Assessment for Population Health Improvement: Most Frequently Recommended Health Metrics

Health Outcomes

Mortality

(Leading causes of death)

- Infant Mortality
- Injury-related Mortality
- Motor Vehicle Mortality
- Suicide
- Homicide

Morbidity

- Obesity
- Low Birth-weight
- Hospital Utilization
- Cancer Rates
- Motor Vehicle Injury
- Overall Health Status
- AIDS
- STDs (*chlamydia, gonorrhea, syphilis*)
- Tuberculosis
- **COVID**
- **Mental Health**
- **Diabetes**

Health Determinants

Health Care

(Access & Quality)

- Health Insurance Coverage
- Provider Rates (*PCPs, Dentists*)
- Asthma-related Hospitalization

Health Behaviors

- Tobacco use/ Smoking
- Physical Activity
- Nutrition
- Unsafe Sex
- Alcohol Use
- Seatbelt Use
- Immunizations and Screenings
- **Prenatal Care**

Physical/Built Environment

- Air Quality
- Water Quality
- Housing
- **Food**
- **Transportation**

Social/Community Factors

- Income
- Poverty Level
- Educational Attainment
- Employment Status
- Homelessness
- Domestic Violence & Child Abuse
- Violence & Crime
- Social Capital/ Social Support

the collection of 845 community surveys.

Key Informants Interviews

Key Informant interviews were held with 25 community stakeholders from 22 organizations/entities representing the following sectors and populations: education, substance use, veterans, city and county elected officials, housing, domestic violence, social services, hospitals, private philanthropy, primary health care, mental health, emergency management, youth, immigrants and seniors. Interviews were conducted in a semi-structured format focusing on a core set of questions. See [Appendix C](#) for Key Informant Script and questions. A focus group was held with approximately 40 individuals representing 25 organizations that serve the Richmond Texas area. The group was asked to share their top health concerns for the community along with ways to improve community health. The qualitative data collected through the key informant interviews and focus group were examined for major themes and patterns.

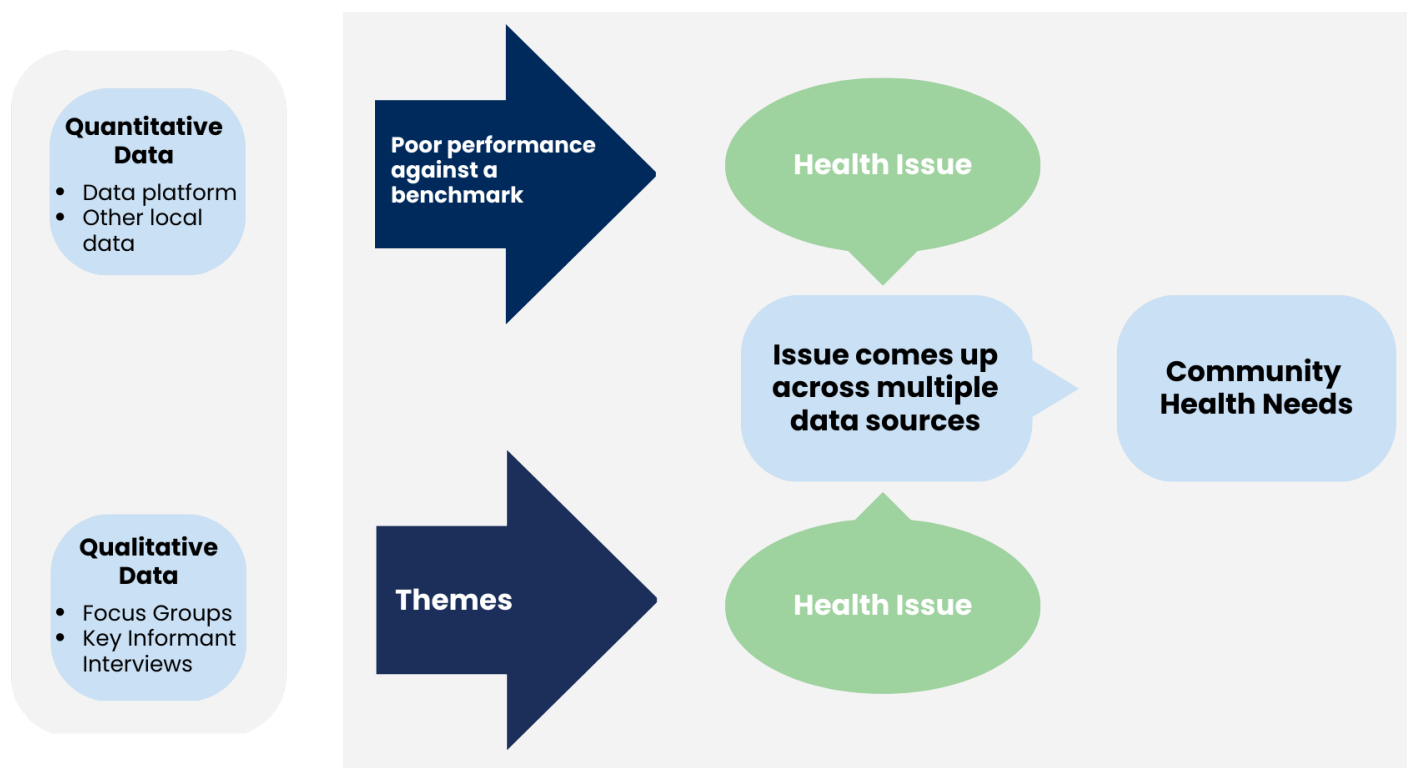
Data Limitations

It is important to note the limitations of the methods and data presented in this CHA. The data, while comprehensive, does not include all

data important to the health of Fort Bend County residents and are limited by the availability of survey respondents. Secondary data were selected based on the CDC report or most frequently recommended health metrics and availability.

The self-report survey data is subject to bias as it relies on individuals to recall information accurately and not to misrepresent information or misinterpret the questions. The community health assessment survey applied convenience sampling method, which is a significant limitation. This survey was not designed to sample respondents through county-wide random or systematic probability methods. Instead, respondents voluntarily filled out web base survey forms, paper or answered telephone surveys. Undeniably, it is non-probability sampling. As a consequence, any attempt to apply the study outcomes for the county-wide population should be limited to avoid unrealistic interpretations or over-generalizations.

In a positive view, this community health assessment survey might overcome this weakness by having early awareness of the issue and applying appropriate strategies in the convenience sampling study design. One of the strategies is to plan targeted outreach to culturally-diverse participants to ensure



Source: Kaiser Permanente National Community Benefit, August 2015.

the responses are presented from diverse ethnic/racial communities with varied socioeconomic backgrounds. Another strategy is to include participants who are residents of different areas across the county. Also, study questionnaires were designed in languages for both major and minority race- ethnicity groups. In many questions, the objectives mostly targeted community and avoid individualized implication. Finally, sample size achieved more than 250% of necessary size for standard community survey that makes it is possible to stratify the final data to subgroups in which statistical principles may apply in full power.

The survey was conducted during the COVID-19 pandemic which created some obstacles for community outreach. Staff constraint and logistic supports are critical issues while the county health and human services has been under demand to learn about community health to have the right actions in the right times to protect and promote health of communities. While limitations are present, they should not compromise the quality of data and study outcomes.

The views provided by the community members during the key informant interviews and focus group may not be representative of all residents in Fort Bend County. While not statistically significant due to non-random sampling methods and sample size, efforts were made to include a wide variety of community participants with a wide range of experiences and perspectives.

Determine Health Priorities

Kaiser Permanente National Community Benefit offers a decision-making criteria and process for the identification and prioritization of health needs. Quantitative data were compared against benchmarks, such as Healthy People targets, the state of Texas, US as a whole or the top 10% performing US counties. Healthy People 2030 is an initiative of the US Department of Health and Human Services that establishes national goals and measurable objectives with 10-year targets to guide evidence-based policies, programs, and other actions to improve the health and well-being of all Americans.⁹

A health issue was identified when there was a poor performance against a benchmark. Health issues were also identified through thematic analysis of qualitative data. Community health need priorities were determined when the same health issue was identified in both the quantitative and qualitative data.

In an effort to measure how well the County is doing compared to nationally established benchmarks, where appropriate, we have indicated whether or not FBC has met or not met the Healthy People 2030 target.

⁹Hubbard, K., Talih, M., Klein, R., Huang, D. (September 2022). Target-Setting Methods in Healthy People 2030. Healthy People Statistical Notes (Number 28).

FINDINGS

Fort Bend Population Overview

According to the Census Bureau tables of 2022, Fort Bend County had an estimated population of 839,706 residents. Of this population an estimated 51% are female and 49% are male.¹⁰ Approximately 31% of residents identified as White (*non-Hispanic*), followed by 25% identifying as Hispanic or Latino, 21.5% as Asian (*non-Hispanic*), and 20.7% as Black or African American.¹⁰ Over a quarter (27.1%) of the county's population is below the age of 18 and 12% is 65 year and over.¹¹

Fort Bend County is the 10th most populous county in Texas and the 78th most populous county in the United States. Between the 2010 and 2020 decennial Census estimates, Fort Bend County grew by 237,404 residents or by 41% in ten years. Fort Bend County has a land area of 861.14 square miles and in 2020 had a population density of 954.81 per square mile.

Of the FBC population, approximately 28.6% of residents are non-U.S. born, with 72.2% of non-U.S. born residents entering the United States prior to 2010.¹¹ The majority of non-U.S. born FBC residents were born in Asia, followed by Latin America.¹¹

An estimated 39.5% of all individuals 5+ years of age speak a language other than English at home. The most common languages spoken other than English in Fort Bend County are Spanish, Other Indo-European languages, and Chinese.¹⁰

Fort Bend County 2021 Population by Race/Ethnicity



Non-Hispanic White

30.2%

Hispanic

25.5%

Non-Hispanic Black

21.9%

Asian

21.6%

Native American & Alaskan Native

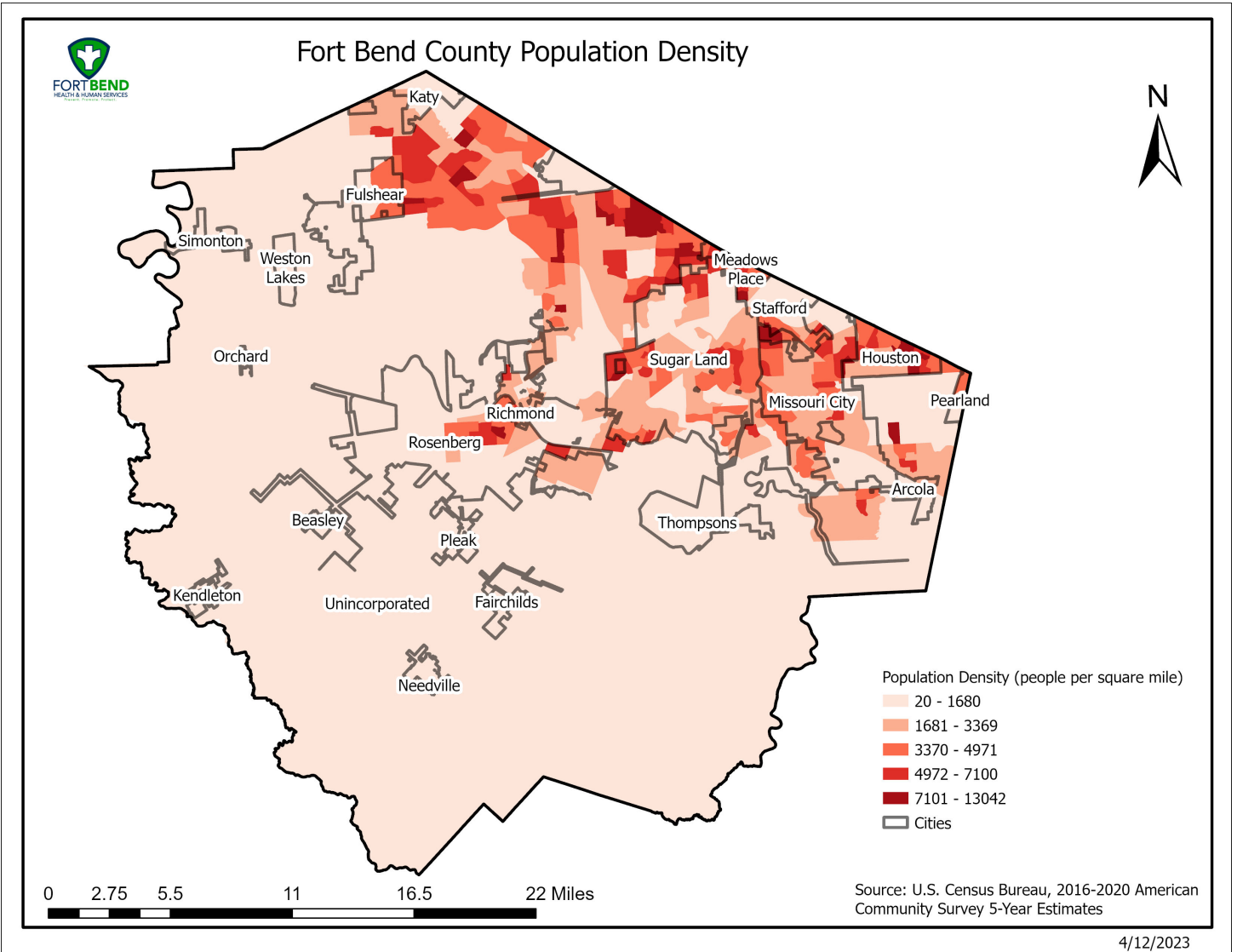
0.6%

Hawaiian Native/Other Pacific Islander

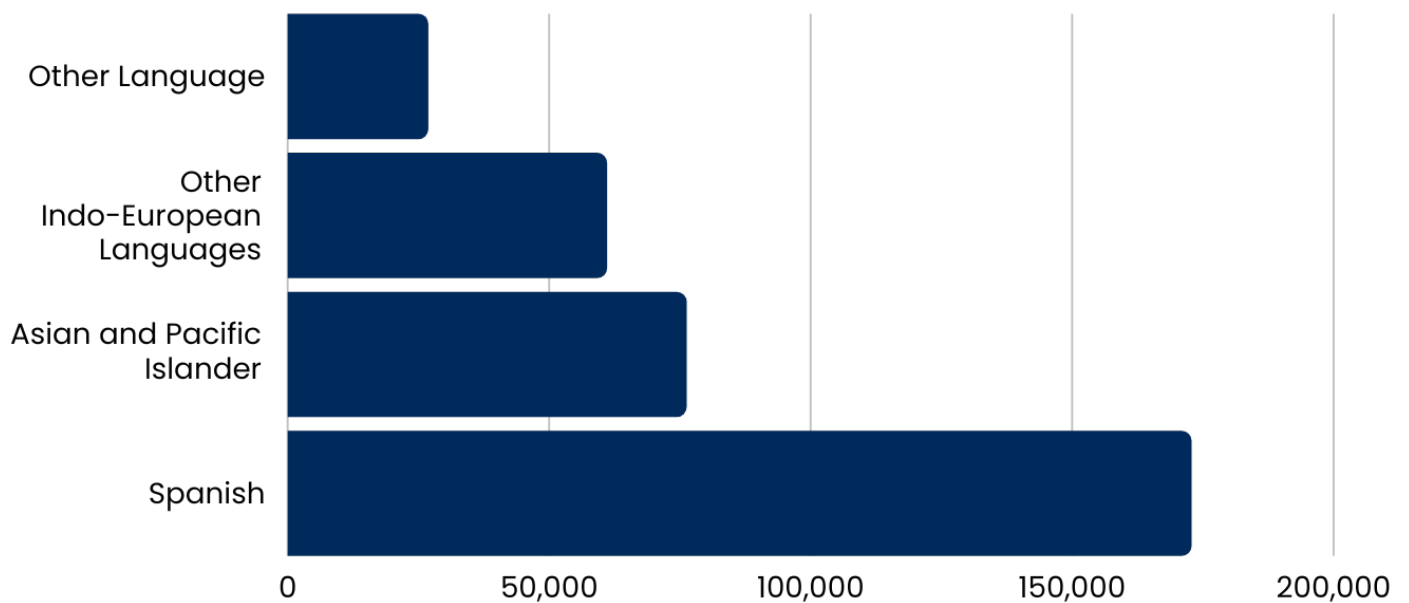
0.1%

¹⁰ "Fort Bend (FBE) County, Texas." n.d. County Health Rankings & Roadmaps. Accessed September 27, 2022. <https://www.countyhealthrankings.org/app/texas/2022/rankings/fort-bend/county/outcomes/overall/snapshot>.

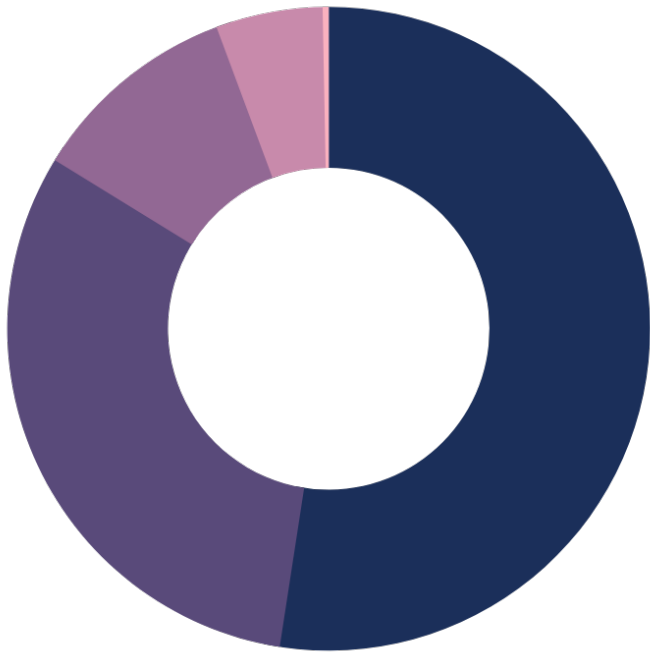
¹¹ Census Bureau Tables. (n.d.). Retrieved February 6, 2023, from <https://data.census.gov/table?g=0500000US48157&y=2020&d=ACS+5-Year+Estimates+Data+Profiles>



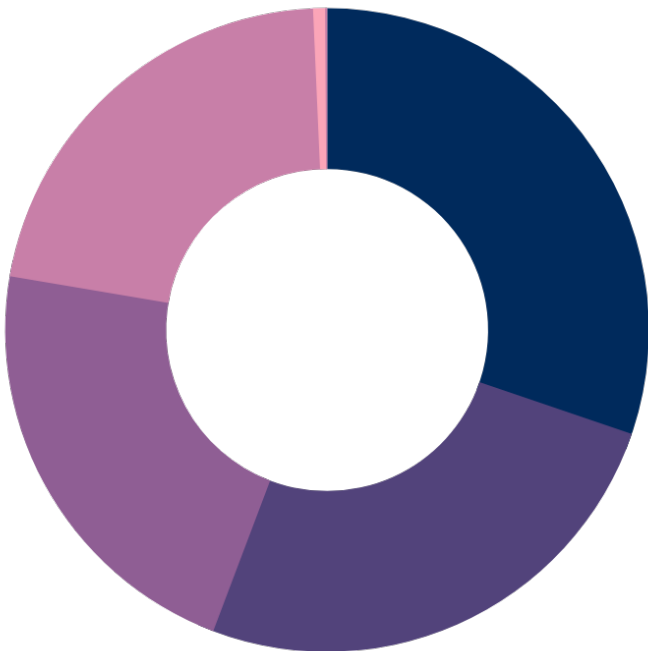
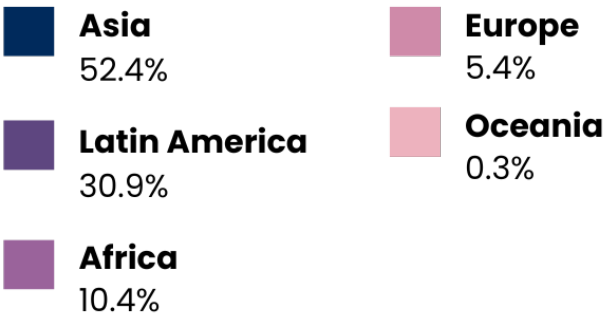
Population that Speaks a Language Other than English



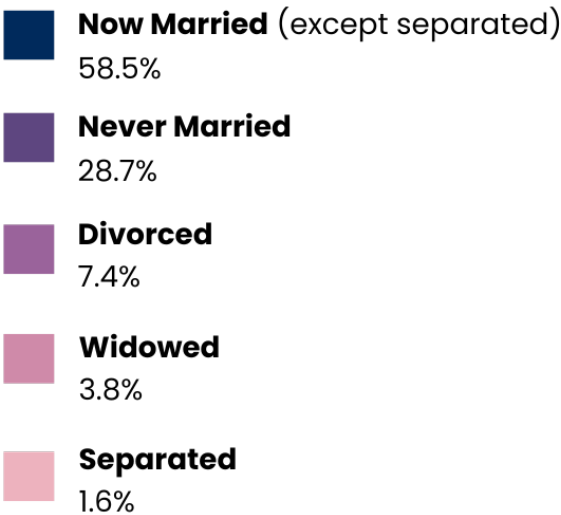
The median household income of Fort Bend County is \$97,200, compared to the statewide median household income of \$60,000 in Texas. The percentage of residents 25+ years of age with a High School Diploma or higher is 90.6% and the percentage with a bachelor’s degree or higher is 46.2%.¹⁰ These figures indicate Fort Bend County residents have achieved higher levels of education, as 83.7% of Texans have attained a high school diploma and 29.9% a bachelor’s degree or higher. Additionally, 7.4% of residents are estimated to live in poverty, compared to 13.4% of all Texans living in poverty.



World Region of Birth of Non-U.S. Born Fort Bend County Residents



Marital Status

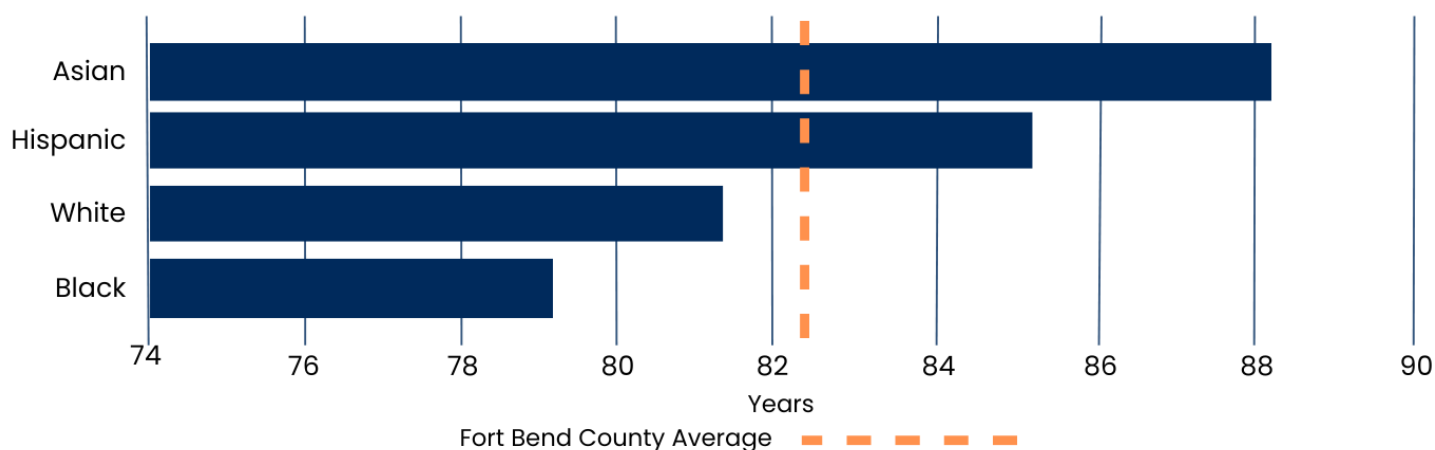


FINDINGS

Health Outcomes

Among all counties in Texas in 2022, Fort Bend County ranks fourth in overall health outcomes, according to an index created by County Health Rankings. Health outcomes are comprised of the mortality and morbidity which contributes to the length and quality of life. The individual factors such as premature death, poor physical and mental health days, and low birthweight are all indicators that help measure health outcomes in our county.

Life Expectancy in Fort Bend County by Race/Ethnicity



Length of Life

Life Expectancy

The average life expectancy in Fort Bend County is 82.3 years. Overall, FBC has a higher average life expectancy than Texas (78.4 years) and the top 10% performing US Counties 80.6 years. However, there are certain populations within Fort Bend County that live longer than others. Asian and Hispanic populations tend to live longer.¹⁰

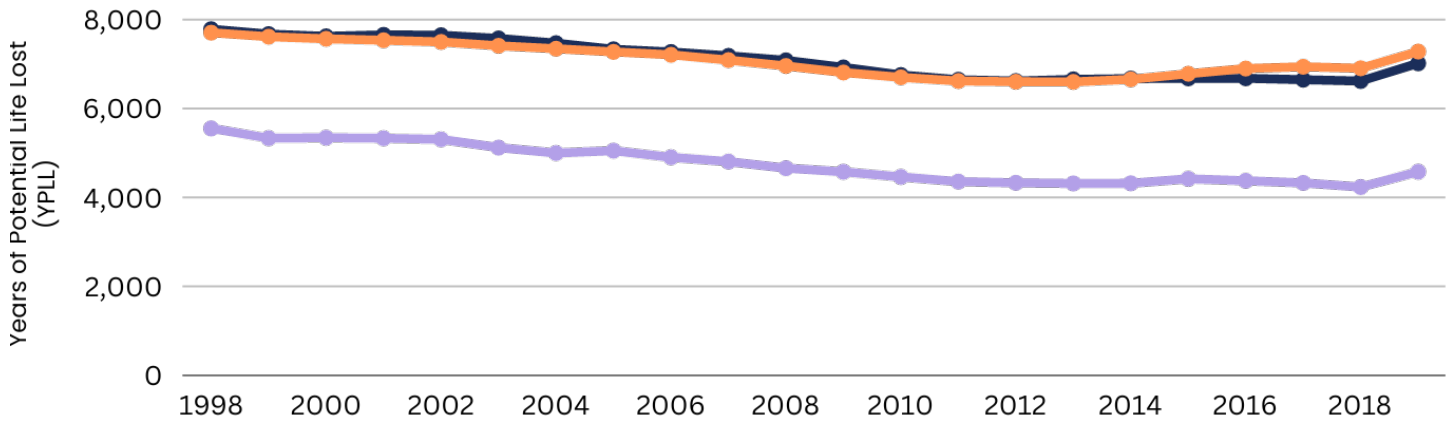
Premature Death

Premature death focuses on deaths that could have been prevented. This is measured by the years of potential life lost before the age of 75 per 100,000 population. Fort Bend experienced a premature death rate of 4,600 per 100k, compared to a rate of 7,000 per 100k in Texas, and 5,600 per 100k among the top 10% of US performing counties. Additionally, the count of premature deaths has been decreasing during the past two decades.¹⁰ The data in the figure below represent a 3-year average around the denoted year. The years of potential life lost increased for 2019 (2018–2020) due to the impact of the COVID-19 pandemic.

As with life expectancy, there are differences among years of potential life lost when looking at different race and ethnicity groups within Fort Bend County. Fort Bend County residents who are Black have the most years of potential life lost. People who are Asian have the least years of potential life lost.¹²

¹² CDC WONDER. (n.d.). Retrieved February 6, 2023, from <https://wonder.cdc.gov/>

Years of Potential Life Lost (YPLL), 1998–2019



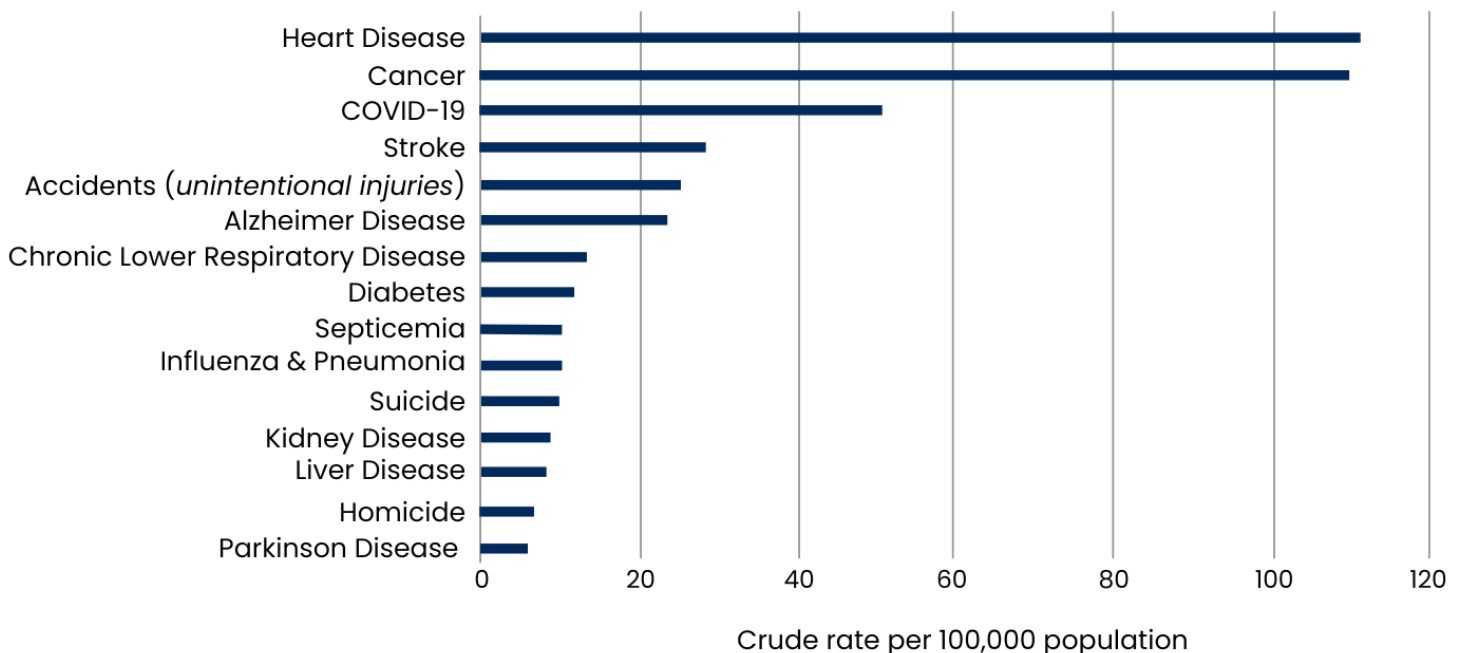
Mortality

Leading Causes of Death

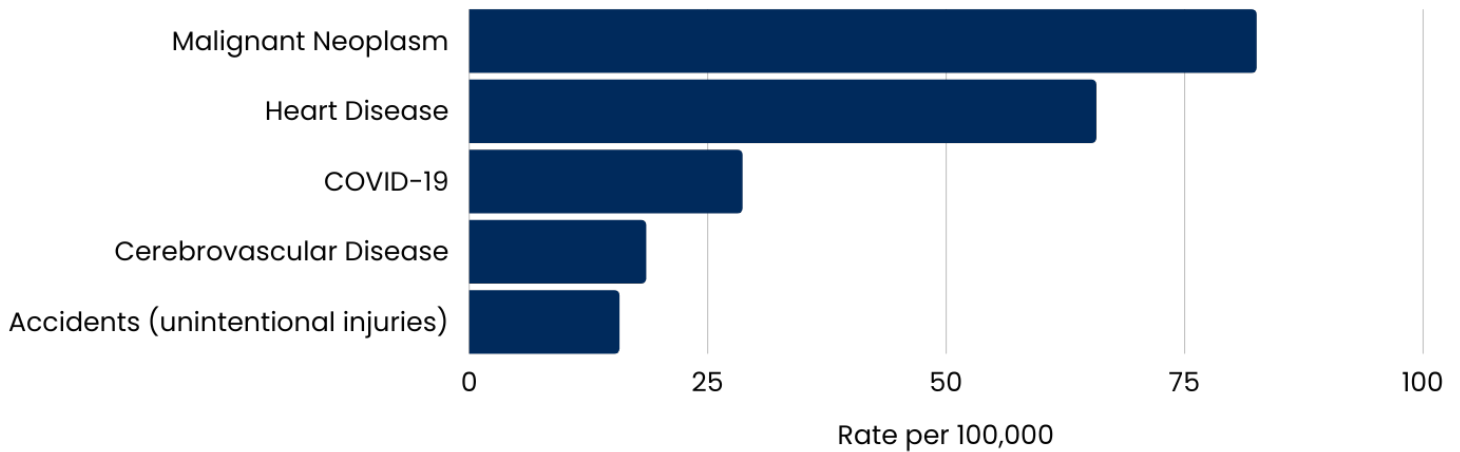
According to the CDC, the five leading causes of death in Fort Bend County in 2020 were heart disease, cancer, COVID-19, cerebrovascular disease or stroke, and accidents or unintentional injuries.¹²

When 2020 cause of death was evaluated by race and ethnicity, heart disease, cancer, and COVID-19 were consistently in the top three leading causes of death. Heart disease was the leading cause of death for white non-Hispanic decedents and black non-Hispanic decedents in Fort Bend County. Among Hispanic residents, the leading cause of death was COVID-19 and among Asian non-Hispanic residents, the leading cause of death was cancer.

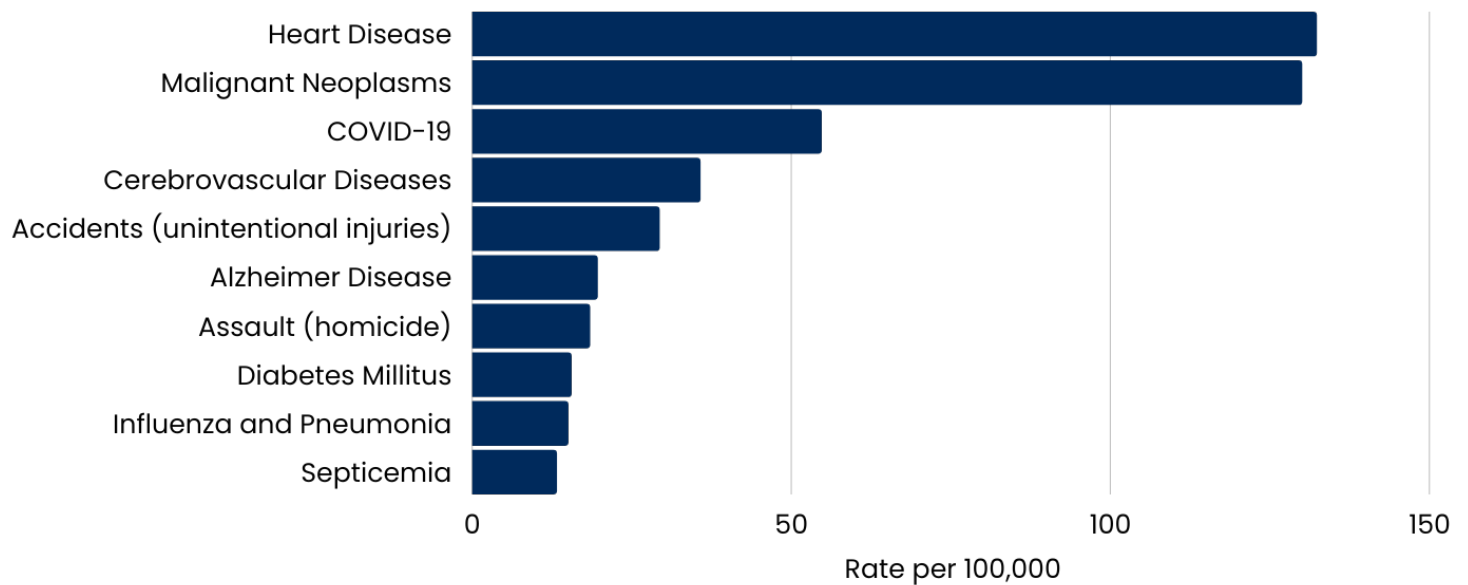
Leading Causes of Death



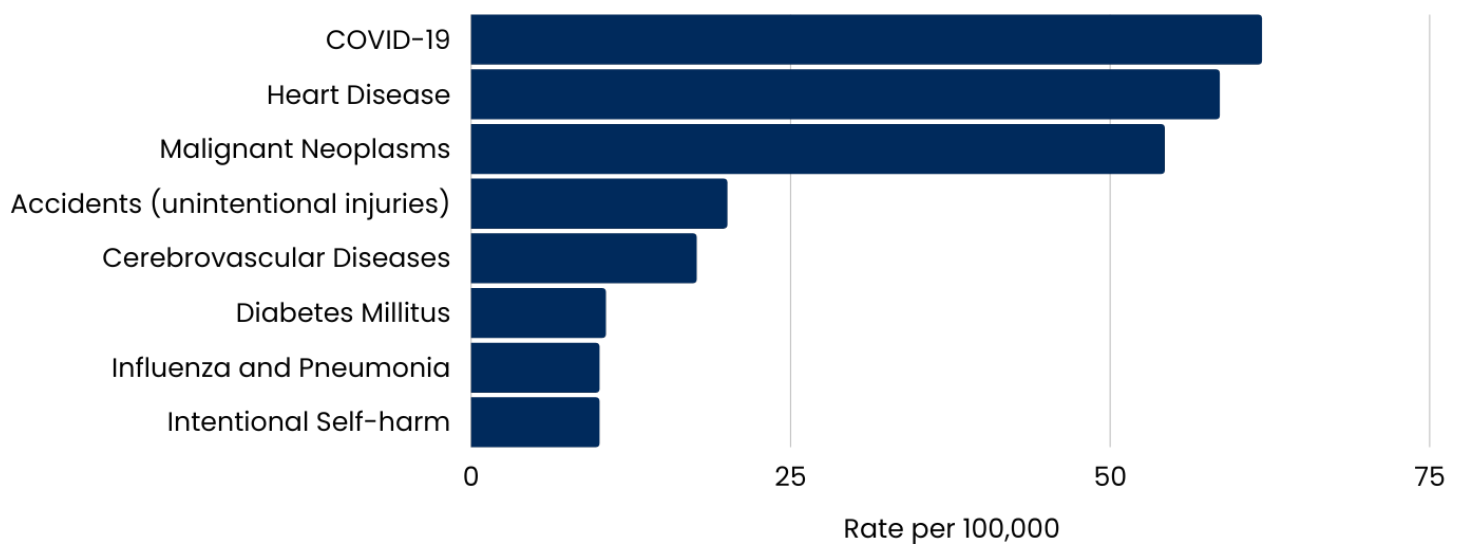
Asian: Mortality Rates by underlying Cause of Death



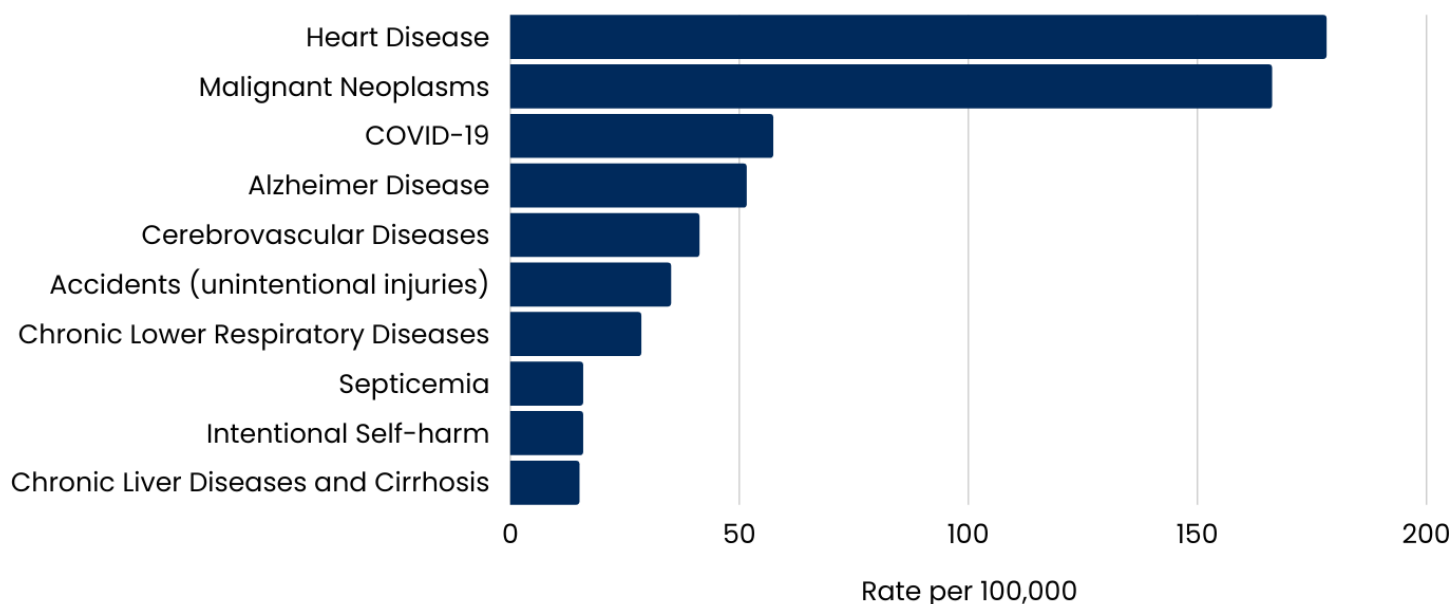
Non-Hispanic Black: Mortality Rates by underlying Cause of Death



Hispanic: Mortality Rates by underlying Cause of Death



Non-Hispanic White: Mortality Rates by underlying Cause of Death



Drug Overdose Deaths

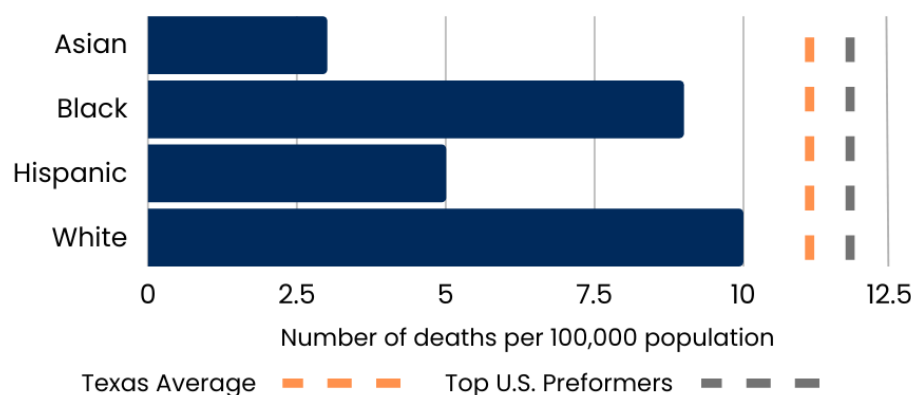
Drug overdose deaths include all manners of death (*accidental, suicide, etc.*) that involve drug poisoning as the primary cause of death. The rate of drug overdose deaths in Fort Bend County is lower than that of Texas and the United States. However, drug overdose deaths have increased significantly in recent years. In 2020, there were 8.2 drug overdose deaths per 100,000 population in Fort Bend County. Previously, the rate of drug overdose deaths was 5.5 per 100,000 population and 5.7 per 100,000 population in 2018 and 2019, respectively. One of the leading health indicators for Healthy People 2030 is to reduce drug overdose deaths.¹³ The current national trend is that the nation is moving in the wrong direction in this area as drug overdose deaths have increased in recent years.¹⁰

Related Healthy People 2030 Objectives

Reduce drug overdose deaths

Target:	20.7 per 100,000
FBC Status:	Met

Drug Overdose Deaths in Fort Bend County, 2018–2020



¹³ Healthy People 2030. (n.d.). Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/drug-and-alcohol-use/reduce-drug-overdosedeadths-su-03>

Child Mortality

Overall, Fort Bend County has relatively low child mortality (*number of deaths among residents under the age of 18 per 100,000 population*) compared to Texas. However, like life expectancy and years of potential life lost, Black Fort Bend County residents have higher rates of child mortality.¹⁰

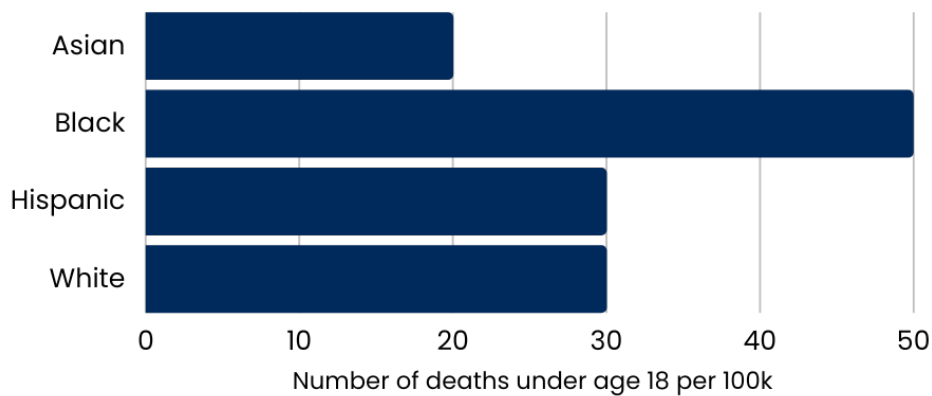
Related Healthy People 2030 Objectives

Reduce the rate of death in children and adolescents aged 1 to 19 years

Target: 18.4 per 100,000

FBC Status: Not met

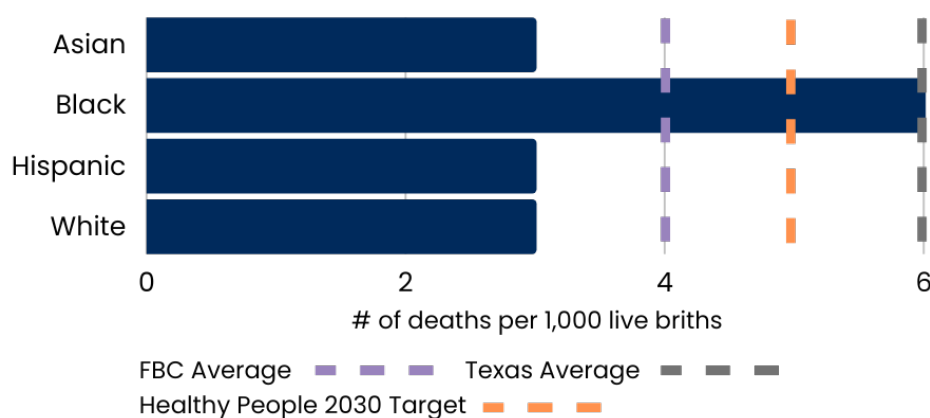
Child Mortality by Race/Ethnicity



Infant Mortality

The average number of infant (*under 1 year of age*) deaths within a year per 1,000 live births in Fort Bend County is four. This number is on par with the top U.S. performing counties and better than Texas as a whole. Similar to life expectancy, premature death, and child mortality, the Black population in Fort Bend County experiences disparate outcomes in this measure.¹⁴ Healthy People 2030 identifies infant deaths as a high priority objective towards improving health and well-being. The reduction of the rate of infant deaths is a leading health indicator with Healthy People 2030 setting the target of 5.0 infant deaths per 1,000 live births.¹⁵

Infant Mortality by Race/Ethnicity



¹⁴ Healthy People 2030. (n.d.). Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/infants/reduce-rate-infant-deaths-mich-02>

¹⁵ Healthy People 2030. (n.d.). Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/injury-prevention/reduce-deaths-motor-vehiclecrashes-ivp-06>

Motor Vehicle Crash Deaths

Healthy People 2030 has set a national target of 10.1 motor vehicle deaths per 100,000 population.¹⁰ This is a measure where Fort Bend County has met the benchmark not only as a county but also for populations of different races and ethnicities.¹⁰

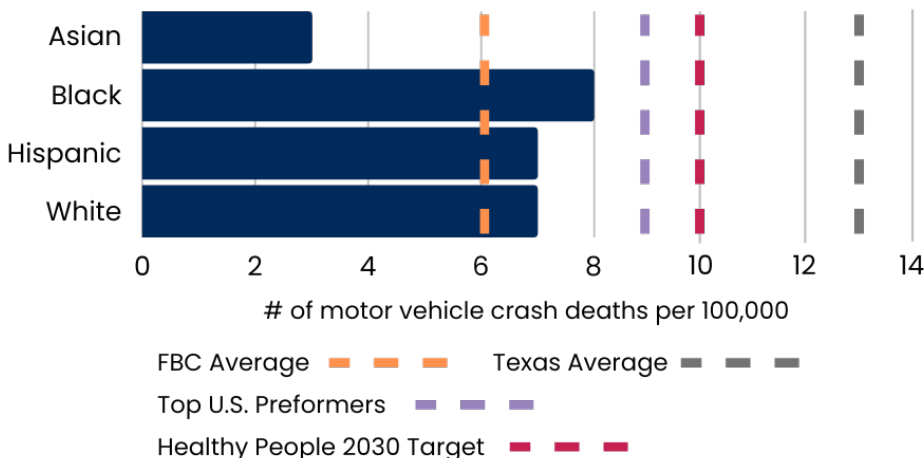
Related Healthy People 2030 Objectives

Reduce deaths from motor vehicle crashes

Target: 10.1 per 100,000

FBC Status: Met

Motor Vehicle Crash Deaths by Race/Ethnicity



Alcohol-Impaired Driving Deaths

Driving impaired by alcohol is a main cause of traffic related deaths in the United States. Twenty-eight percent of driving deaths in Fort Bend County have alcohol involvement. This percentage is higher than the alcohol-related deaths in Texas (25%) and significantly higher than alcohol related deaths in the top performing counties (10%).¹⁰ Over the past decade, unfortunately there has been not significant overall change in the Fort Bend County numbers.¹⁶ Healthy People 2030 has a goal to decrease the percentage of motor vehicle deaths involved with alcohol by using effective interventions including sobriety checkpoints, mass media campaigns, and laws that revoke or suspend the licenses of people convicted of drunk driving.¹⁰

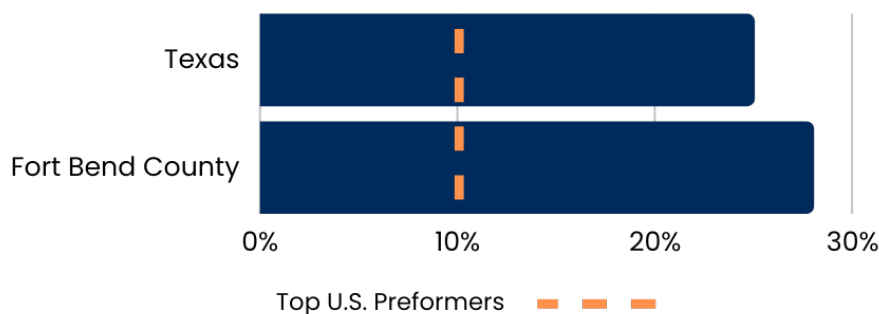
Related Healthy People 2030 Objectives

Reduce the proportion of motor vehicle crash deaths that involve a drunk driver

Target: 28.3%

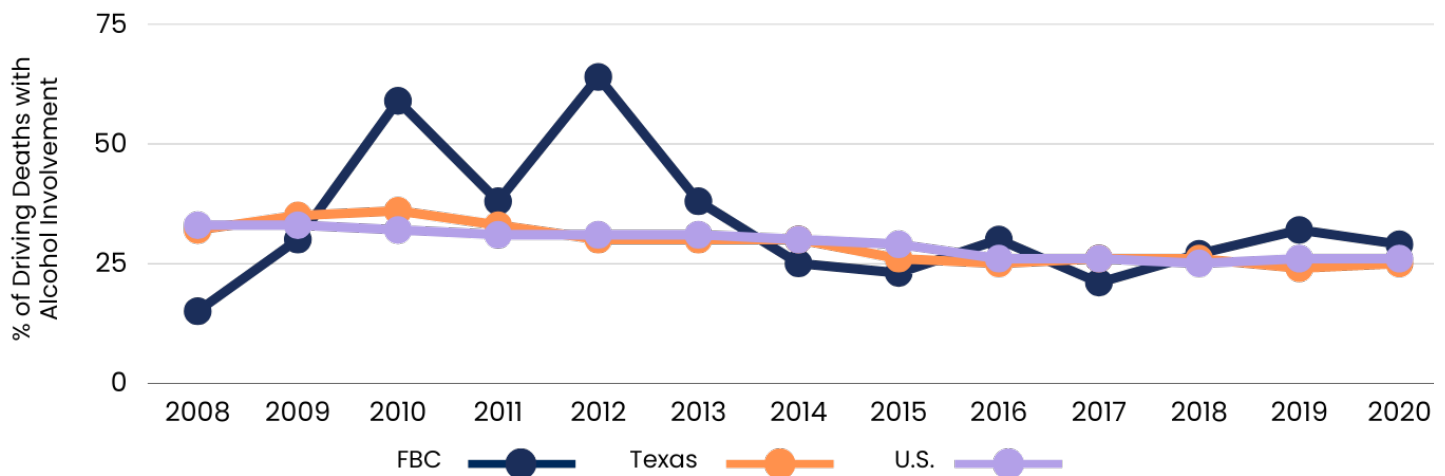
FBC Status: Met

Percentage of Driving Deaths with Alcohol Involvement, 2020



¹⁶ Reduce the proportion of motor vehicle crash deaths that involve a drunk driver – SU-11. (n.d) Healthy People. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/drug-and-alcohol-use/reduce-proportion-motor-vehicle-crash-deaths-involve-drunk-driver-su-11>

Alcohol-Impaired Driving Deaths by Year, 2018–2020



Suicide

In 2020, suicide was the 11th leading cause of death in Fort Bend County, and between 2016 and 2020 the rate averaged at 10.0 deaths per 100,000. The FBC rate is below the Healthy People’s 2030’s target of 12.8 deaths per 100,000. However, there are disparities among race/ethnicities in the county. Fort Bend County’s rate was more than twice as high among the White population, with 17 deaths due to suicide per 100,000, compared to Hispanic (8.0), Black (6.0), and Asian (6.0) populations.¹⁰ Men disproportionately die by suicide when compared to women in FBC.¹⁷

Related Healthy People 2030 Objectives

Reduce the suicide rate

Target: 12.8 per 100,000

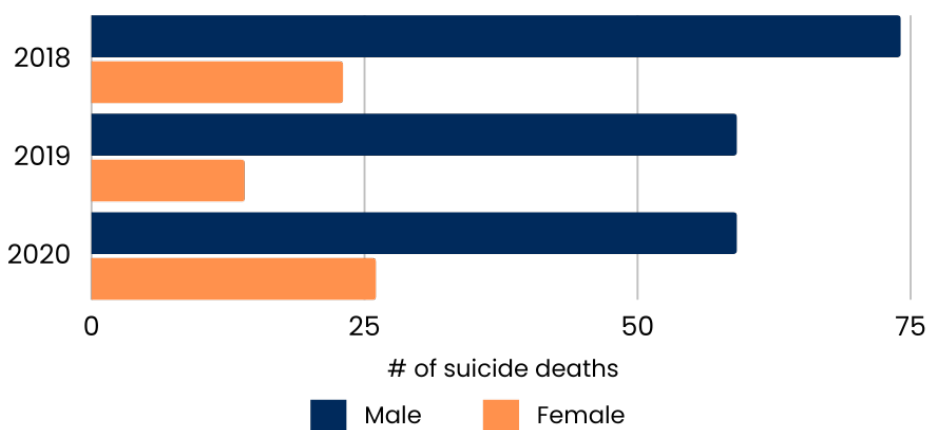
FBC Status: Met

Reduce suicide attempts by adolescents

Target: 20.7 per 100,00

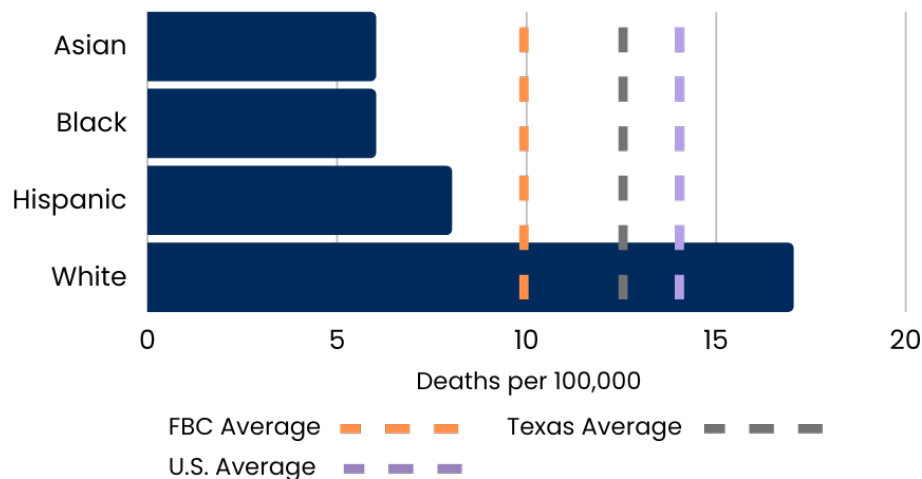
FBC Status: Not measured

Suicide Deaths by Gender in Fort Bend County, 2018–2020

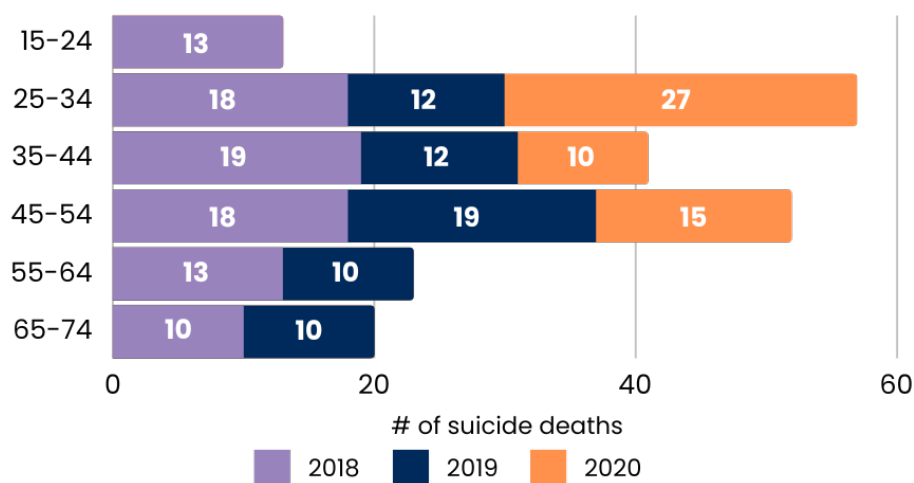


¹⁷ Healthy People 2030. (n.d.) Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/violence-prevention/reduce-homicides-ivp-09>

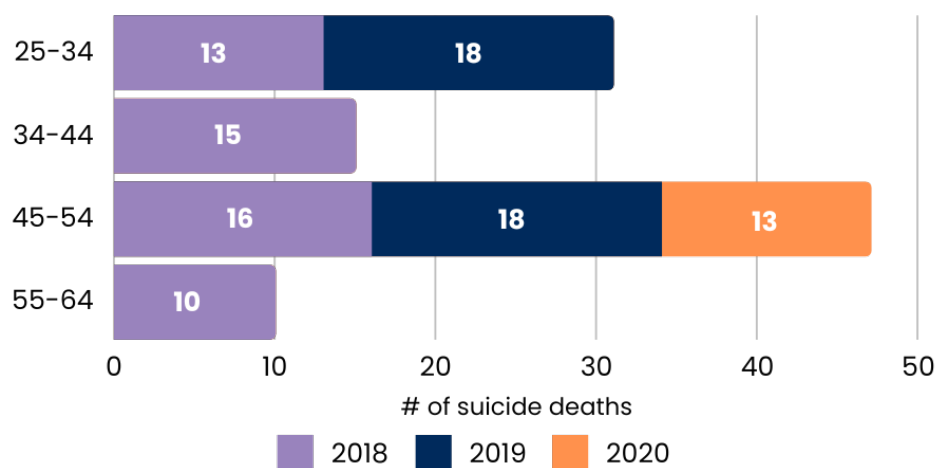
Suicides in Fort Bend County by Race/Ethnicity, 2016-2020



Suicide by Age Group in Fort Bend County, 2018-2020



Male Suicides in Fort Bend County, 2018-2020



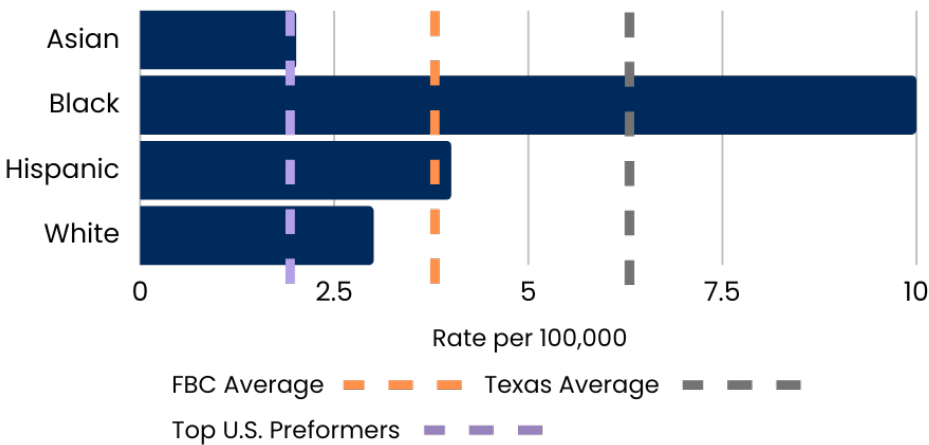
Homicide

Between 2014 and 2020, there were 4.0 homicides per 100,000 population in Fort Bend County, a rate lower than Texas’ but two times greater than the rate of Top U.S. Performers. For the general population, Fort Bend County’s homicide rate is lower in comparison with Healthy People 2030’s target of 5.5 homicides per 100,000.¹⁰ However, the rate breakdown by race reveals greater concerns. The rate of Black homicides per 100,000 is significantly higher at 10.0, with Hispanic (4.0), White (3.0), and Asian (2.0) population similar or lower than the overall county population.¹⁸

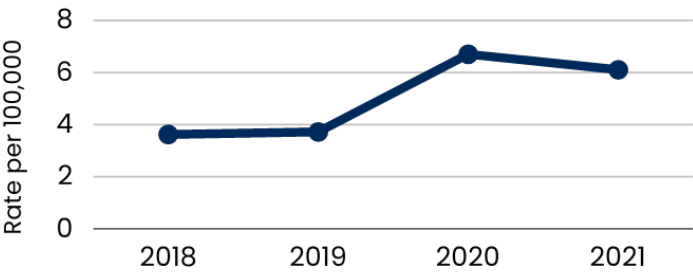
In 2020, homicide was the 14th leading cause of death in Fort Bend County (6.7 per 100,000 population). This was lower than the homicide rate for Texas and the United States. However, the homicide rate in FBC has increased in recent years from 3.6 per 100,000 population in 2018 and 3.7 per 100,000 population in 2019 to 6.7per 100,000 in 2020 and 6.1 per 100,000 in 2021.

Related Healthy People 2030 Objectives	
Reduce homicides	
Target:	5.5 per 100,000
FBC Status:	Met

Homicides in Fort Bend County, 2014–2020



Homicide Rates in Fort Bend County, 2020



Homicide Rates, 2020

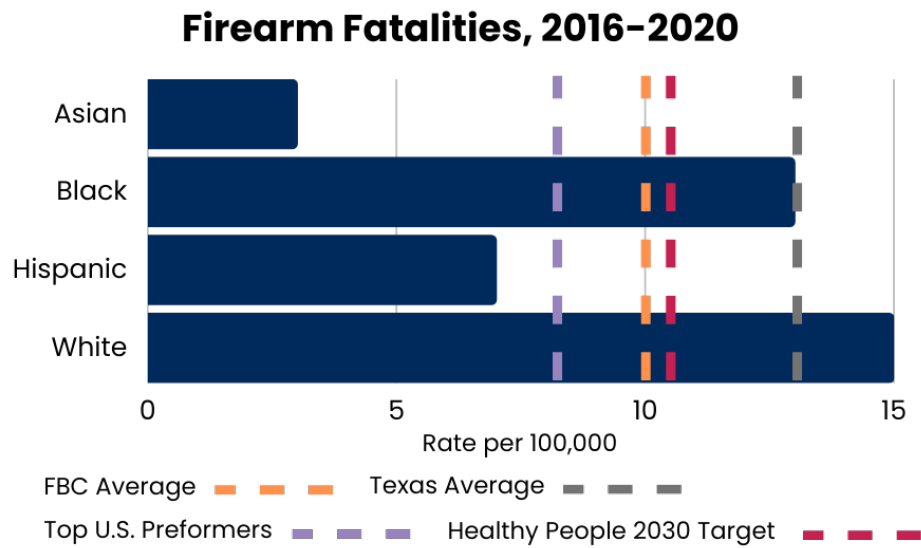


¹⁸ Kegler, S.R., Simon, T.R., Zwald, M.L., Chen, M.S., Mercy, J.A., Jones, C.M., Mercado-Crespo, M.C., Blair, J.M., Stone, D.M., Ottley, P.G., Dills, J. (2022). Vital Signs: Changes in Firearm Homicides and Suicide Rates –United States, 2019–2020. Morbidity and Mortality Weekly Report, May 13, 2022. Vol 17. No.19

Firearm Fatalities

Nation-wide in 2020, 53% of all suicides and 79% of all homicides involved firearms. According to the CDC, firearm homicides rates are consistently highest among males, adolescents and young adults, and Black or African American and American Indian or Alaskan Native persons.¹⁰ Between 2016 and 2020, there were 10.0 deaths due to firearms per 100,000 population in Fort Bend County. The county does not follow the national trend in that firearm fatalities are greater in the FBC white population.¹⁹

Related Healthy People 2030 Objectives	
Reduce firearm-related deaths	
Target:	10.7 per 100,000
FBC Status:	Met



Morbidity

Additionally, Fort Bend County residents reported having, on average, fewer days where they experienced poor physical health and days they experienced poor mental health, compared to the state of Texas as a whole and the top 10% of U.S. performing counties.

Adult Obesity

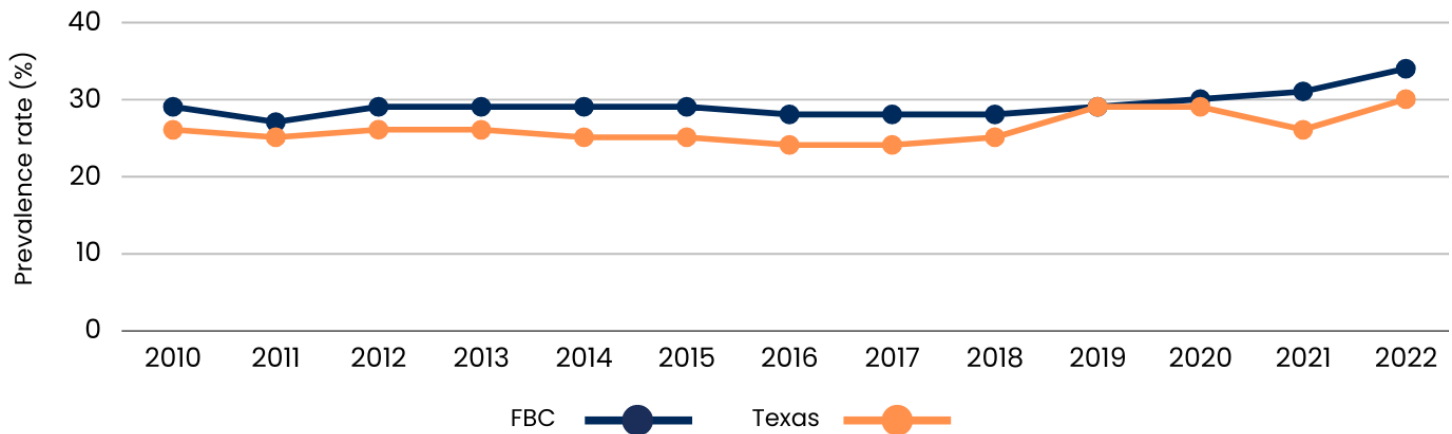
From the Center of Disease Control (CDC) Adult Obesity Facts data, Fort Bend has a prevalence rate of 30.0% compared to the 41.9% prevalence rate of obesity in the United States and 35.8% within the state of Texas in 2019–2020.²⁰ While as a community, FBC has a obesity rate that is less than the U.S. population overall, one-third of residents are obese. Obesity related conditions are the leading cause of preventable and premature death. This includes, but is not limited to, heart disease, stroke, diabetes (Type 2), and specific cancers. Over the last decade there has been a slight increase over time of the percentage of adults who are obese in Fort Bend County and Texas.¹⁰

Related Healthy People 2030 Objectives	
Reduce the proportion of adults with obesity	
Target:	36.0%
FBC Status:	Met

¹⁹ Adult Obesity Prevalence Maps. (July 15, 2022). Centers for Disease Control and Prevention. <https://www.cdc.gov/obesity/data/prevalence-maps.html#overall>

²⁰ Texas Ranking Data. (2022). County Health Rankings. <https://www.countyhealthrankings.org/app/texas/2022/downloads>

Adult Obesity (age 18 and over), 2010–2022



Primary data collected through the community survey identifies obesity as the top health issue for Fort Bend County residents. One in four (25%) survey participants selected obesity as one of their top three health issues. In addition, 40% and 39% of survey participants are concerned with poor eating habits and lack of exercise, respectively. Next to mental health and access to care, key informants identified obesity followed by diabetes and heart issues as the top health concerns in the community.

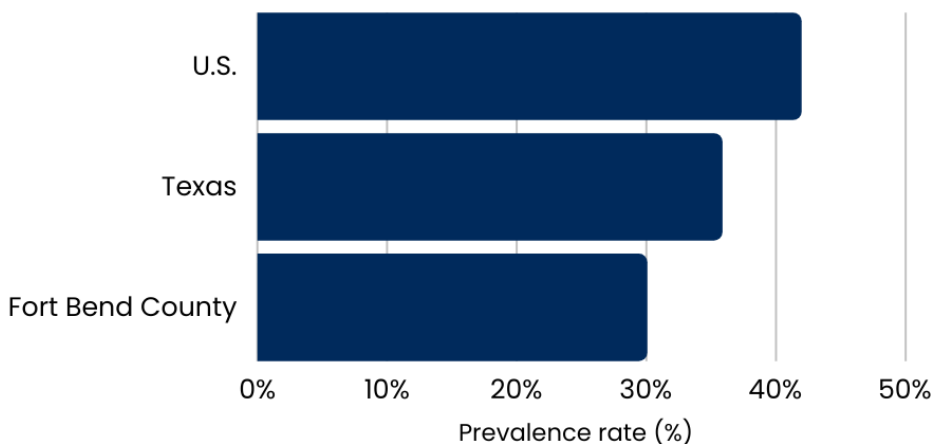
Related Healthy People 2030 Objectives

Increase the proportion of health care visits by adults with obesity that include counseling on weight loss, nutrition, or physical activity

Target: 32.6%

FBC Status: Not measured

Prevalence Rate of Self-Reported Obesity in adults (aged over 18), 2019–2020

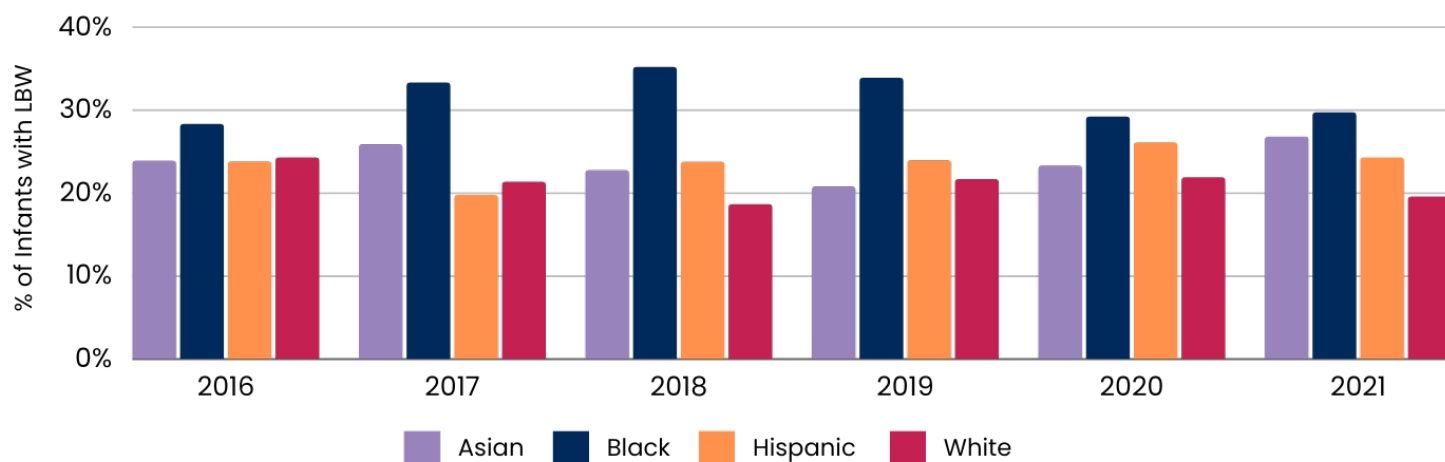


Low Birth-weight

Low birth-weight (LBW) is the percent of live births with the infant's birthweight less than 2500 grams (5.5 pounds). LBW is an important public health indicator that can be used to assess maternal health, nutrition, healthcare delivery, and poverty. Infants born with low birthweight have approximately 20 times greater chance of dying than those with normal birthweight. Infants who survive are more likely to experience physical and developmental health problems.²¹

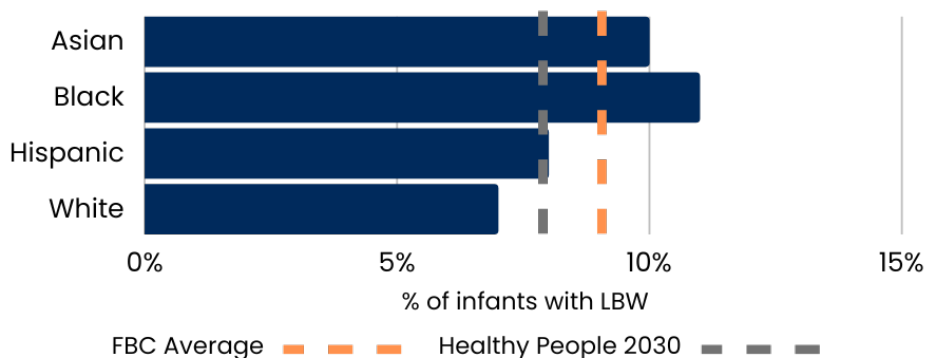
²¹ Healthy People 2020: Maternal, Infant, and Child Health. (February 6, 2022). Office of Disease Prevention and Health Promotion. <https://www.healthypeople.gov/2020/data-search/Search-the-Data?nid=4903>

Percentage of Low Birth-weights (LBW) in FBC by Race/Ethnicity, 2016–2020



Healthy People 2030 set the target of 9.4% of live births with infants with LBW.²² According to the County Health Rankings, Fort Bend County is meeting this target as 9.0% of live births between 2014–2020 have LBW but not for Blacks and Asians.²³ When comparing LBW across race and ethnicity groups within FBC, there are noteworthy differences. Babies with LBW are more common among the Black and Asian populations compared to births of Hispanic and White populations.²⁴

Low Birth-weight (LBW) by Race/Ethnicity



Hospital Utilization

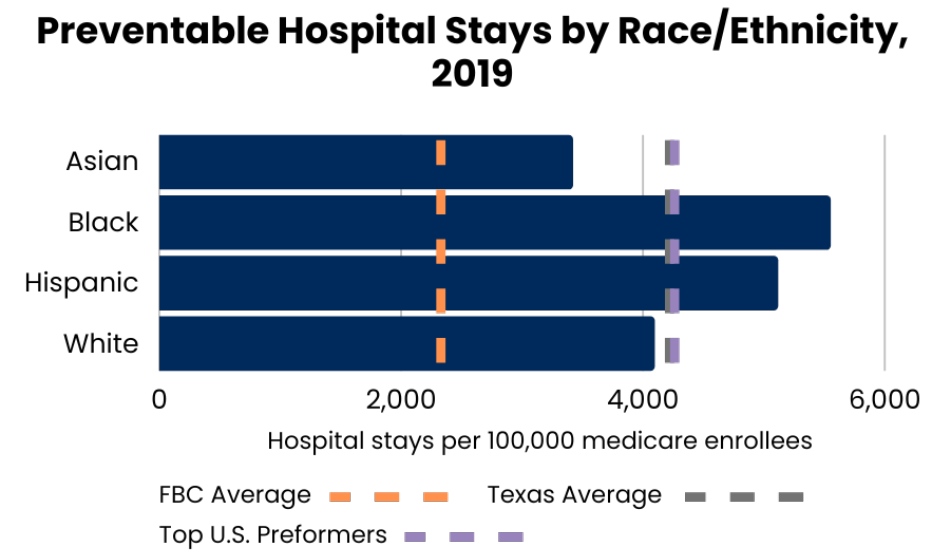
Preventable Hospital Stays are defined as hospitalization for ambulatory-care sensitive conditions and diagnoses usually treatable in outpatient settings. This measure can suggest that quality outpatient care was not accessible. This measure may also represent a tendency to overuse emergency rooms and urgent care as a main source of care.¹⁰

²² Low Birthweight Births (by race/ethnicity) in Fort Bend). (2022). Kids Count Data Center <https://datacenter.kidscount.org/data/tables/8980-low-birthweight-births-byraceethnicity?loc=45&loc=5#detailed/5/6593/false/37,871,870,573,869,36/2159,2160,2157,4940/17937,17936>

²³ Low Birthweight. (n.d.). County Health Rankings & Roadmaps. Retrieved February 6, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-outcomes/quality-of-life/low-birthweight>

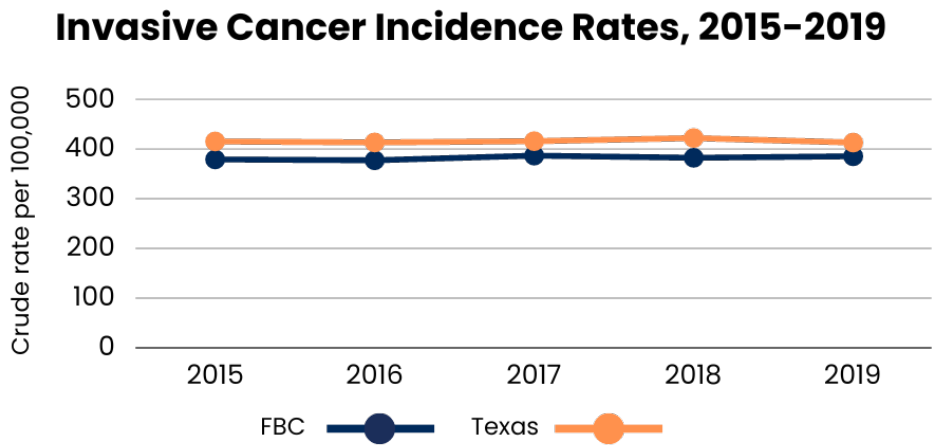
²⁴ Preventable Hospital Stays. (n.d.). County Health Rankings & Roadmaps. Retrieved February 6, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/clinical-care/quality-of-care/preventable-hospital-stays>

In 2019, there were 4,339 preventable hospital stays per 100,000 Medicare enrollees in Fort Bend County, which is more than Texas (4255) and almost double that of Top U.S. Performers (2233). Black and Hispanic FBC residents have more preventable hospital stays than other populations.²⁵



Cancer

The National Cancer Institute defines cancer as “a disease in which some of the body’s cells grow uncontrollably and spread to other parts of the body.” Invasive cancer describes when the cancerous cells have spread beyond site where it first developed and growing into surrounding, healthy tissues.²⁶ Cancer is the second leading cause of death in Fort Bend County and in the United States. Healthy People 2030 has 16 objectives related to cancer all working towards the goal of reducing new cases of cancer and cancer-related illness, disability, and death.²⁷



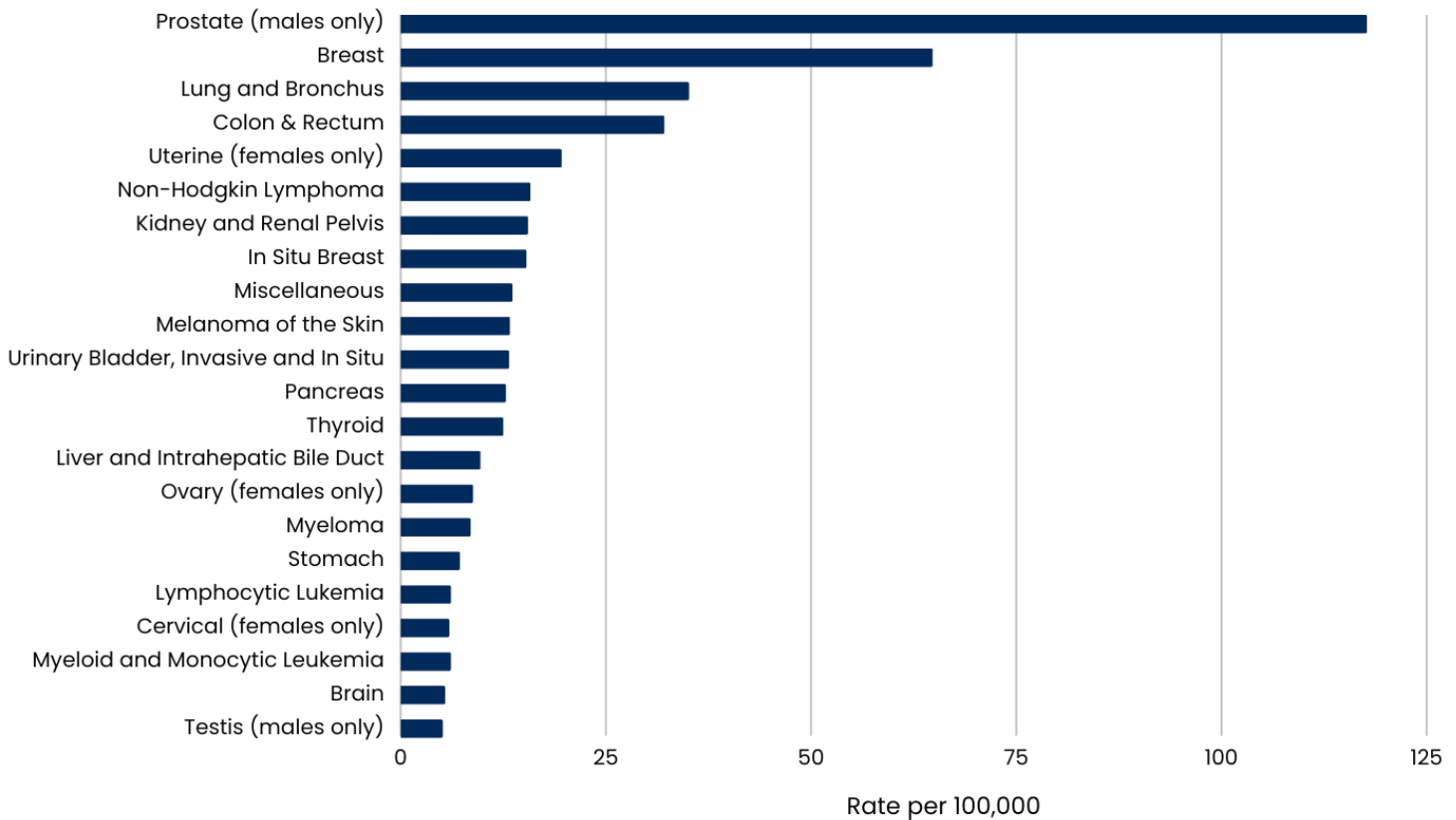
Related Healthy People 2030 Objectives	
Reduce the overall death rate	
Target:	122.7 per 100,000
FBC Status:	Met
Reduce the lung cancer death rate	
Target:	25.1 per 100,000
FBC Status:	Met
Reduce the female breast cancer death rate	
Target:	15.3 per 100,000
FBC Status:	Met

²⁵ Comprehensive Cancer Information—NCI (nciglobal,ncienterprise). (1980, January 1). [CgvHomeLanding].<https://www.cancer.gov/>

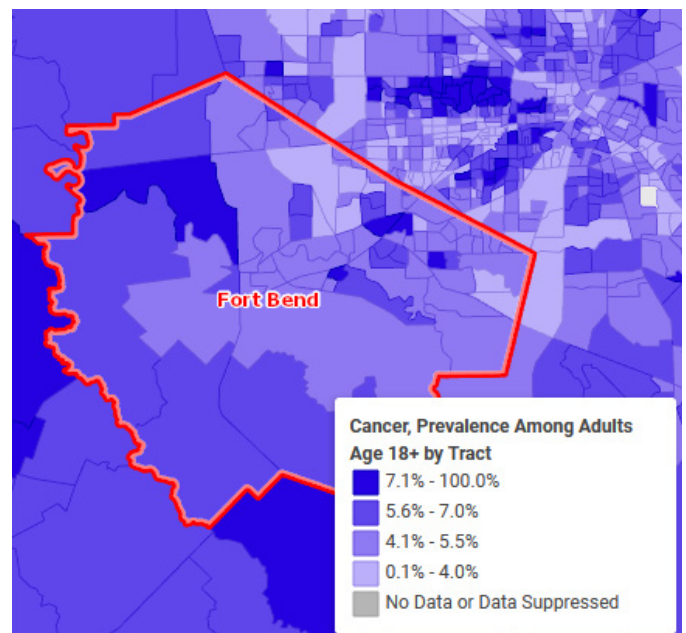
²⁶ Cancer. (2021). Healthy People 2030. <https://health.gov/healthypeople/objectives-and-data/browseobjectives/cancer>

²⁷ Cancer-Rates.info | Texas. (n.d.). Retrieved September 20, 2022, from <https://www.cancer-rates.info/tx/>

Invasive Cancer Incidence Rates in Fort Bend County, 2015–2019



The most recent 5-year trend (2015–2019) for FBC indicates that the incidence of invasive cancer has remained steady with a slight increase in 2019 yet remains lower than Texas.²⁶ Invasive prostate and breast cancer have the highest incidence rate in the community.²⁸ In Fort Bend County, American Indian and White populations have the highest incidence rates of invasive cancer which differs from Texas where the White and Black populations have the highest rates. Males have a higher incidence rate of invasive cancer than females in both Fort Bend County and Texas.²⁹ The map shows the distribution of cancer prevalence among adults (18+) by census tract. Although most of the census tracts have a prevalence of 0.1% – 4.0%, there are tracts that have a prevalence of 7.0% or greater.³⁰



²⁸ State Cancer Profiles. (n.d.) NIH: National Cancer Institute. <https://statecancerprofiles.cancer.gov/incidencerates/index.php?stateFIPS=48&areatype=county&cancer=001&race=00&sex=0&age=001&stage=999&year=0&type=incd&sortVariableName=rate&sortOrder=default&output=0#results>

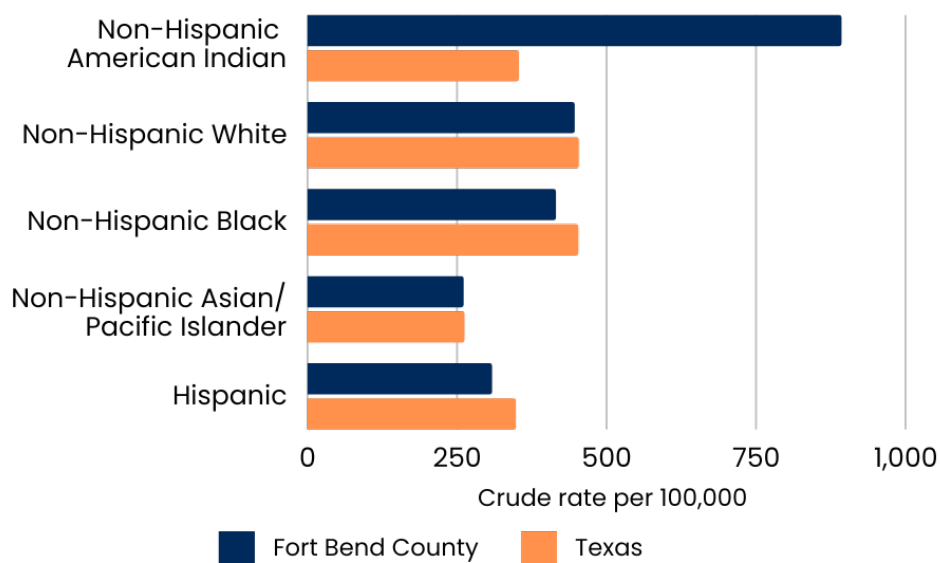
²⁹ Get a Health Equity Report Card for Your Area! – Salud America. (n.d.). Retrieved August 12, 2022, from <https://salud-america.org/health-equity-report-card/?geoid=05000US48157&year=0&type=incd&sortVariableName=rate&sortOrder=default&output=0#results>

³⁰ Cancer-Rates.info | Texas. (n.d.). Retrieved September 20, 2022, from <https://www.cancer-rates.info/tx/>

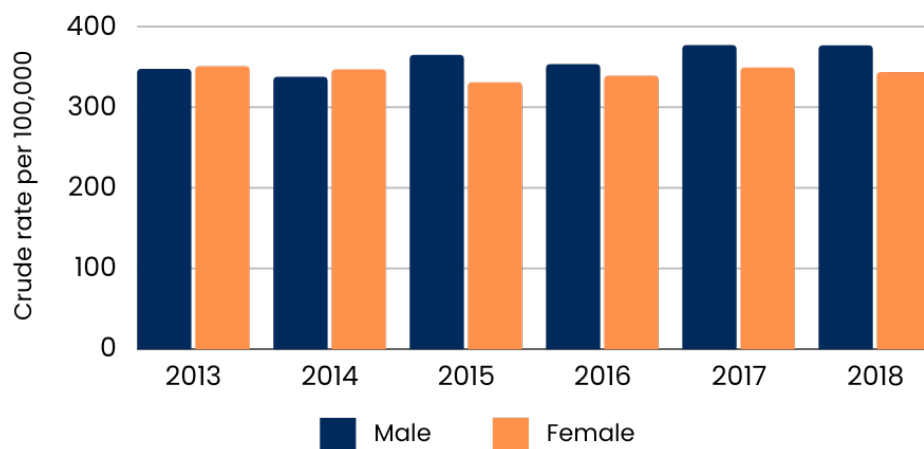
Mortality rates due to cancer have been decreasing in both Texas and Fort Bend County. The county had a slight increase in 2019.²⁹ Although prostate and breast cancer have the highest incidence rates, lung and bronchus and colon and rectum have the highest mortality rates in the county.²⁹ In Fort County and Texas, the White and Black populations have the highest mortality rates. In Fort Bend County, the rate for the Black population is much lower.³⁰

Related Healthy People 2030 Objectives	
Reduce the colorectal cancer death rate	
Target:	8.9 per 100,000
FBC Status:	Not met
Reduce the prostate cancer death rate	
Target:	16.9 per 100,000
FBC Status:	Met

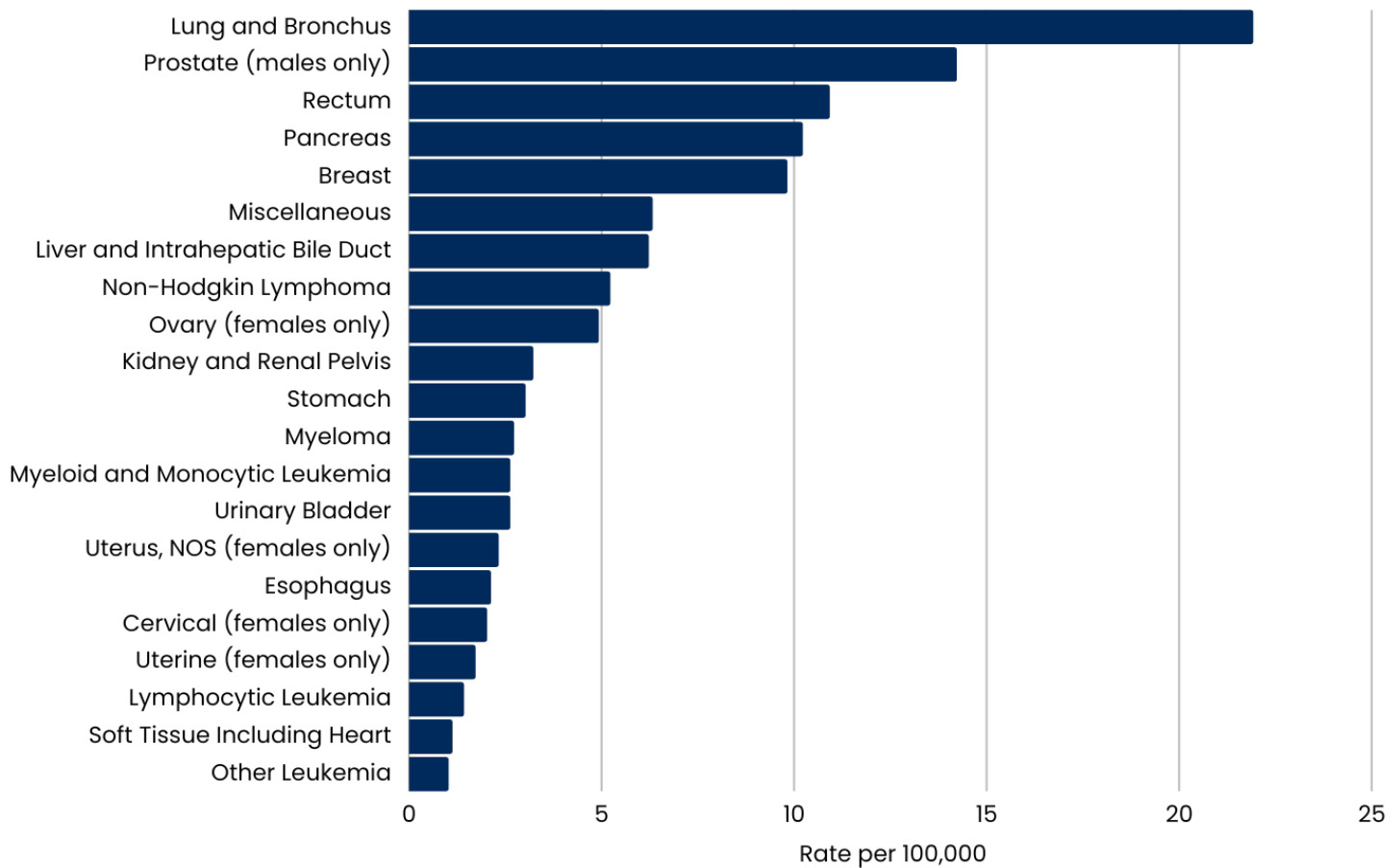
Invasive Cancer Incidence Rates by Race/Ethnicity, 2015–2019



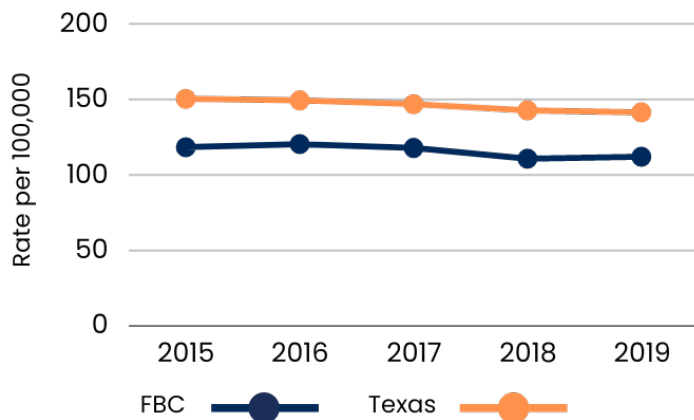
Invasive Cancer Incidence Rates in Fort Bend County by Sex, 2013–2018



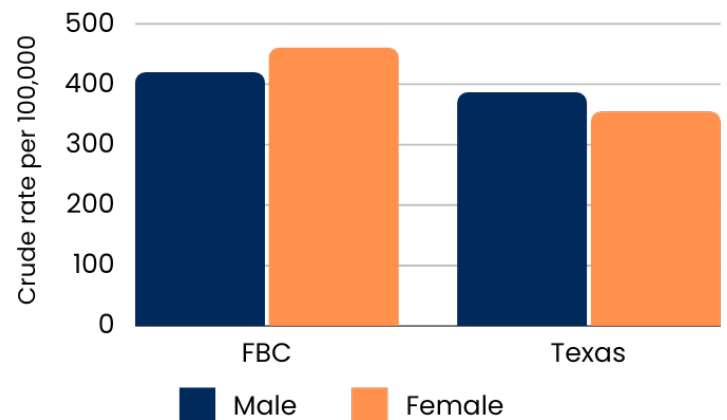
Invasive Cancer Mortality Rates by Cancer Site, 2015–2019



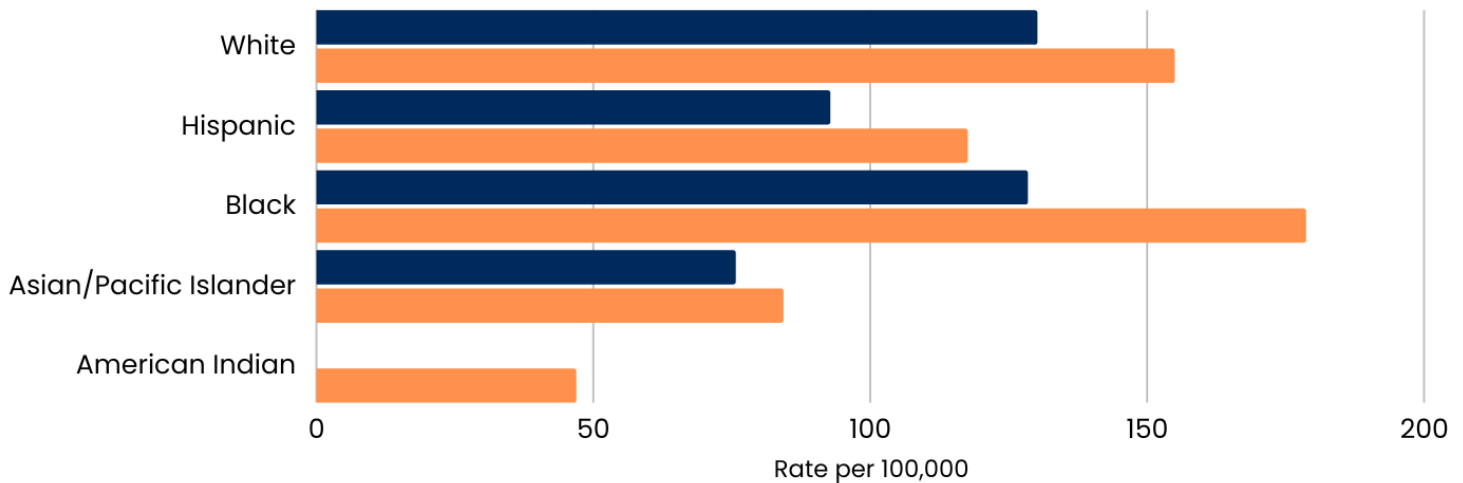
Invasive Cancer Mortality Rates, 2015–2019



Invasive Cancer Incidence Rates by Sex, 2015–2019



Cancer Mortality Rates by Race/Ethnicity, 2015–2019



*The rate for "American Indian" in Fort Bend County is suppressed since less than 16 cases were reported.

Motor Vehicle Injury

According to the CDC, motor vehicle–related injuries send more than 2.3 million people to hospital emergency departments each year. Many of these injuries can be prevented by increasing seat–belt use, decreasing impaired driving and improving vehicle safety in work settings.³¹

Twenty nine percent of all 2021 motor vehicle accidents in FBC lead to injuries. These injuries included 55 fatalities, 304 suspected serious injuries, 1,221 suspected minor injuries, 2,011 possible injuries, and 1,145 unknown injuries.³²

Overall Health Status

Key informants were asked key informants how they would rate the overall health status of the residents of Fort Bend County on a scale of one to five with one being poor and five being very healthy. Many Key Informants had difficulty answering this question because, as they explained, there are two populations in Fort Bend County: the haves and the have-nots. The "haves" are people with insurance and higher socio-economic status. The haves are considered relatively healthy. The "have-nots" are people without insurance or of low socio-economic status and are reported by our key informants to have poorer health. One interviewee stated that 80% of the county residents are insured and are in "great shape because having insurance means you have all your health needs met". The rest of the population is uninsured or have unmet health needs "so the rate would be one or zero if that number was included in the scale. Uninsured people have shorter life expectancies, chronic conditions that are not maintained, comorbidities, obesity, diabetes, alcoholism, etc."

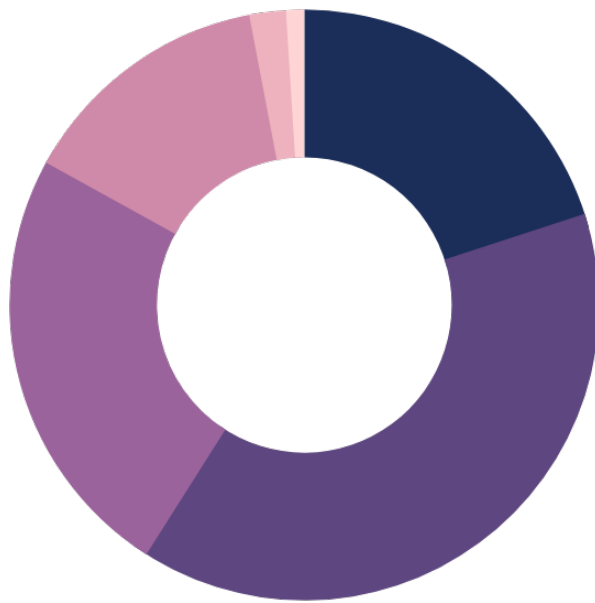
Survey respondents were asked about their general health. The majority (83%) stated that their health was good, very good or excellent.

Related Healthy People 2030 Objectives

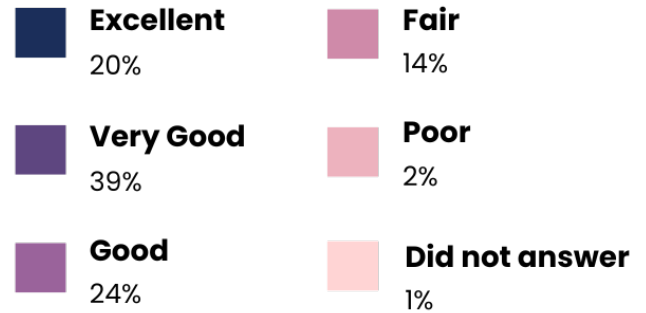
Reduce deaths from motor vehicle crashes	
Target:	10.1 per 100,000
FBC Status:	Not measured
Reduce the rate of motor vehicle crashes due to drowsy driving	
Target:	2.2 per 100,000
FBC Status:	Not measured

³¹ Motor Vehicle Injuries. (2017). Centers for Disease Control and Prevention. <https://www.cdc.gov/winnablebattles/report/motor.html>

³² Crashes and Injuries by County 2021. (2022). Texas Department of Transportation



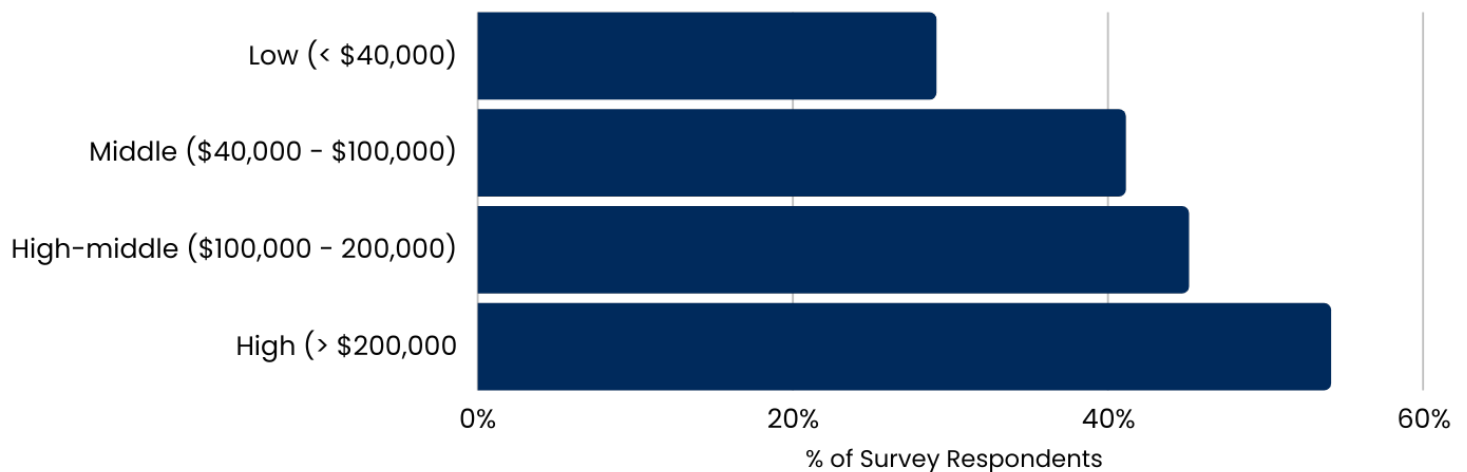
Health of CHA Survey Respondents



The observation by key informants that people in Fort Bend without insurance or at lower income levels have poorer health was confirmed by the CHA survey data. Only 29% of people with a low annual household income (*less than \$40,000*) reported having very good health compared to 41%, 45% and 54% of people with middle (\$40,000–\$100,000), high-middle (\$100,000–\$200,000) and high (*over \$200,000*) annual household income. Only 30% of survey respondents without any health insurance reported having very good health compared to 45% of respondents with private health insurance.

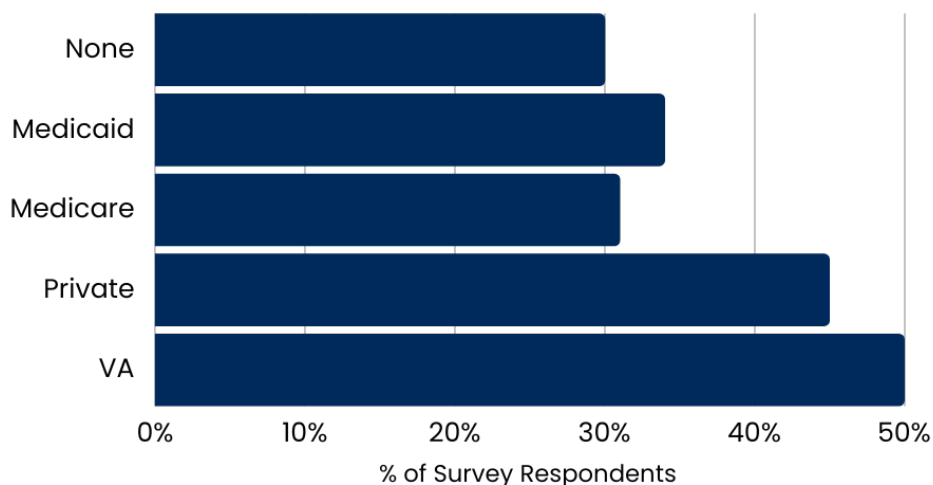
Physical health plays a major role in the overall quality of life. 16% of Fort Bend County adults report fair or poor health and 10% report 14 or more days of poor physical health per month, according to the County Health Rankings. In 2019, residents reported that they had an average of 3.1 physically unhealthy days in a 30-day period (*County Health Rankings*).

% of Survey Respondents that Reported having Very Good Health by Annual Household Income



Our CHA survey asked participants to answer, “In the past 30 days, how many days was your physical health not good (*includes physical illness and injury*)?”. 33% indicated that their physical health was not good one to five days and 5% indicated six or more days. In addition, of the people who answered the question, 18% of survey participants reported that their poor physical health kept them from doing their usual activities for one to five days, and 9% reported six or more days.

% of Survey Respondents that Reported having Very Good Health by Type of Health Insurance



Sexually Transmitted Infections

Sexually Transmitted Infections (STIs) are associated with increased risk of certain diseases and conditions including cervical cancer, infertility, and premature death.¹⁰ Fort Bend County ranks better than Texas overall, however, the county does not rank in the top 10 performing U.S. counties.³³

Chlamydia is the most common bacterially sexually transmitted infection in the United States and is one of the major causes of tubal infertility, ectopic pregnancy, pelvic inflammatory disease, and chronic pelvic pain.³³ Over the past decade, rates of new chlamydia infections have been increasing in Fort Bend County.³⁴

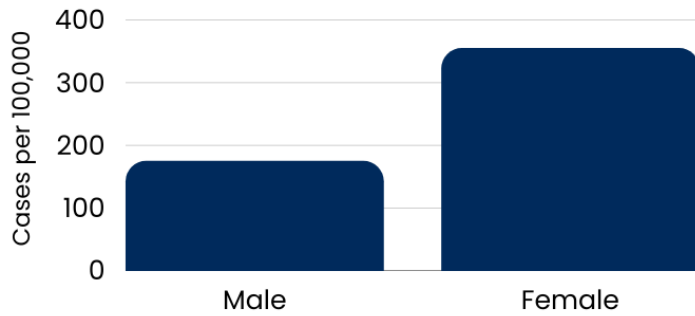
In 2020, females had twice the number of chlamydia infections than men.³⁵ Healthy People 2030 has a specific goal to addresses chlamydia by wanting to increase the proportion of sexually active female adolescents

³³ Genuis SJ, Genuis SK. Managing the sexually transmitted disease pandemic: A time for reevaluation. *American Journal of Obstetrics & Gynecology*. 2004; 191:1103–1112

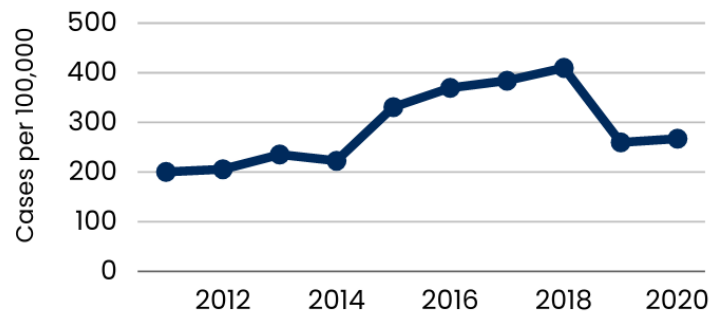
³⁴ National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus. (2021). Centers for Disease Control and Prevention. <https://www.cdc.gov/nchhstp/atlas/index.htm>

³⁵ Increase the proportion of sexually active female adolescents and young women who get screened for chlamydia—STI01—Healthy People 2030 | health.gov. (n.d.). Retrieved February 6, 2023, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/sexually-transmitted-infections/increase-proportion-sexually-active-female-adolescents-and-young-women-who-get-screened-chlamydia-sti-01>

Chlamydia Cases in Fort Bend County, 2020



Fort Bend County Chlamydia Cases Over Time, 2011–2020



and young women who get screened for chlamydia.³⁶ Rates of chlamydia are higher in people who identify as Black or African American than other races.³⁵

Similar to the Chlamydia trend, Gonorrhea rates have increased over the last 10 years in the community.³⁷ As a nation, rates of gonorrhea have increased by 111% since 2009.³⁵ However, unlike Chlamydia, gonorrhea is more prevalent in males in Fort Bend County.³⁸ Healthy People 2030 is attempting to reduce gonorrhea rates by targeting male adolescents and young men.³⁵

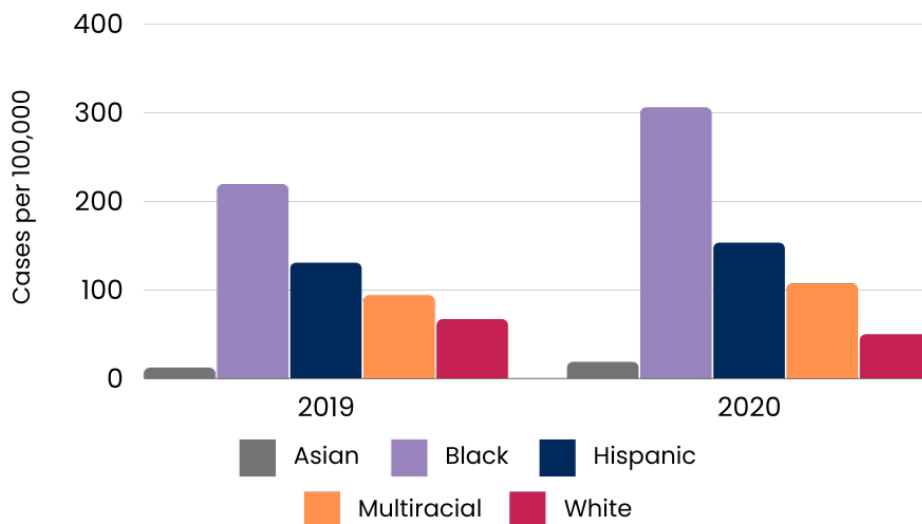
Related Healthy People 2030 Objectives

Reduce gonorrhea rates in male adolescents and young men

Target: 471.2 per 100,000

FBC Status: Not met

Chlamydia Cases by Race/Ethnicity, 2019–2020

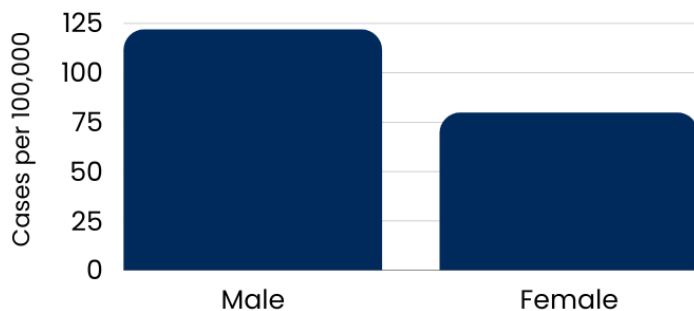


³⁶ National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus. (2021). Centers for Disease Control and Prevention. <https://www.cdc.gov/nchstp/atlas/index.htm>

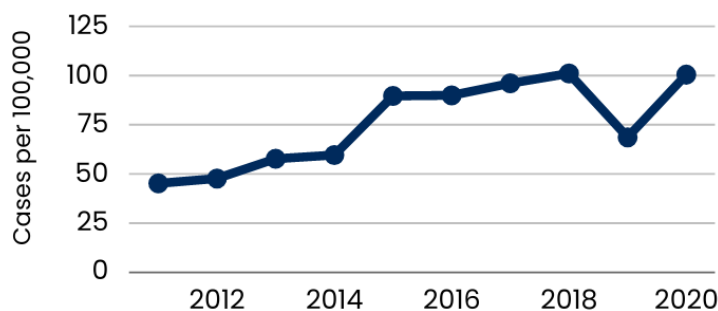
³⁷ Sexually Transmitted Disease Surveillance 2020. (2022). Centers for Disease Control and Prevention

³⁸ Increase the proportion of sexually active female adolescents and young women who get screened for chlamydia—STI01—Healthy People 2030 | health.gov. (n.d.). Retrieved February 6, 2023, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/sexually-transmitted-infections/increase-proportion-sexually-active-female-adolescents-and-young-women-who-get-screened-chlamydia-sti-01>

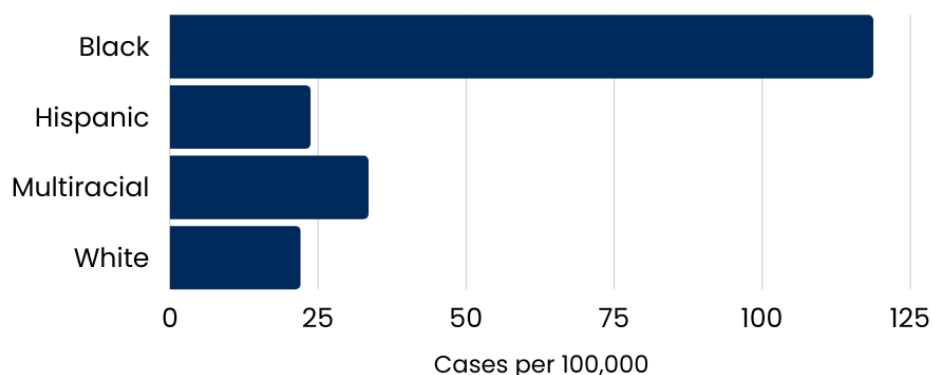
Gonorrhea Cases in Fort Bend County, 2020



Fort Bend County Gonorrhea Cases Over Time



Gonorrhea Cases by Race/Ethnicity, 2019



The most recent available data indicates that, like chlamydia, there are disparities in the rates of gonorrhea among different race and ethnicities.³⁵ Syphilis rates are also increasing in Fort Bend County. As with gonorrhea, rates of syphilis are higher in males and people who identify as Black or African American than other populations.³⁶

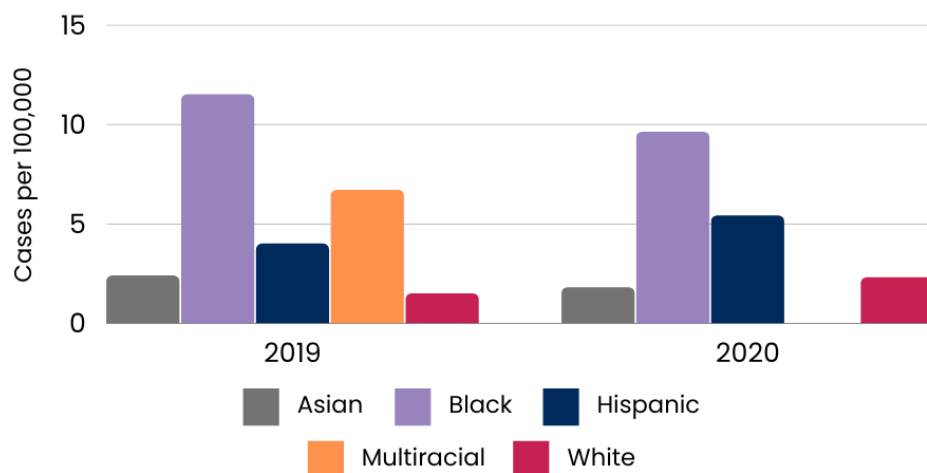
Related Healthy People 2030 Objectives

Reduce the syphilis rate in females

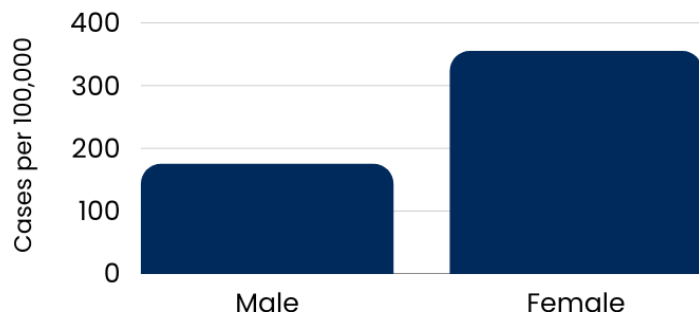
Target: 4.6 per 100,000

FBC Status: Met

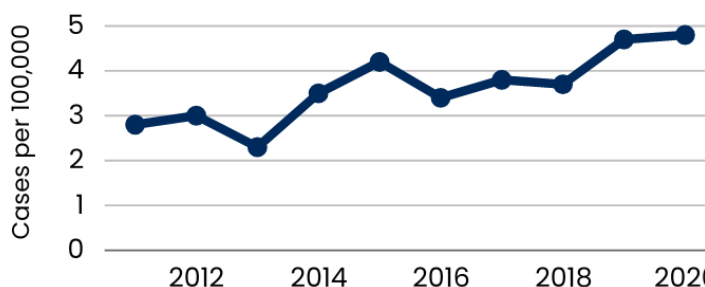
Syphilis Cases by Race/Ethnicity, 2019–2020



Syphilis Cases in Fort Bend County, 2020



Fort Bend County Syphilis Cases Over Time



HIV

The prevalence of Human Immunodeficiency Virus (*HIV*), a virus if left untreated that can lead to acquired immunodeficiency syndrome (*AIDS*), can act as an indicator of unsafe drug use, unprotected sex, lack of HIV treatment, or a lack of HIV prevention medication in communities.³⁹ Due to advances in treatment that help people live longer, the number of people living with HIV (*HIV Prevalence*) has increased.^{40,35} The rates of new HIV diagnoses are going down at the national, state, and local levels.³⁵ In Fort Bend, there are disparities in the rates of new HIV diagnoses when comparing men to women as well as race and ethnicities.⁴¹

Related Healthy People 2030 Objectives

Reduce the number of new HIV infections

Target: 3,000 persons

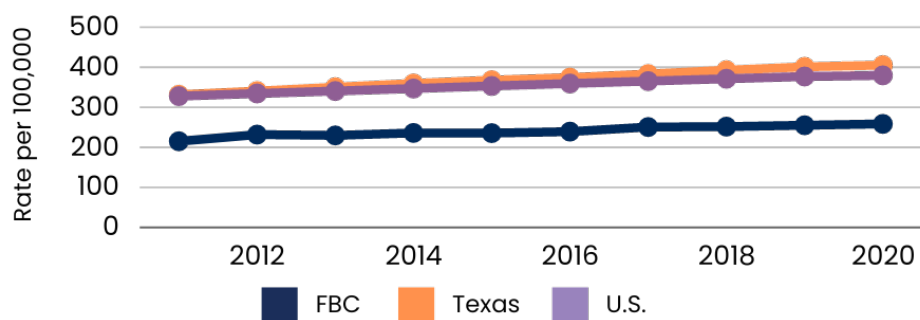
FBC Status: Not measured

Reduce the number of new HIV diagnoses

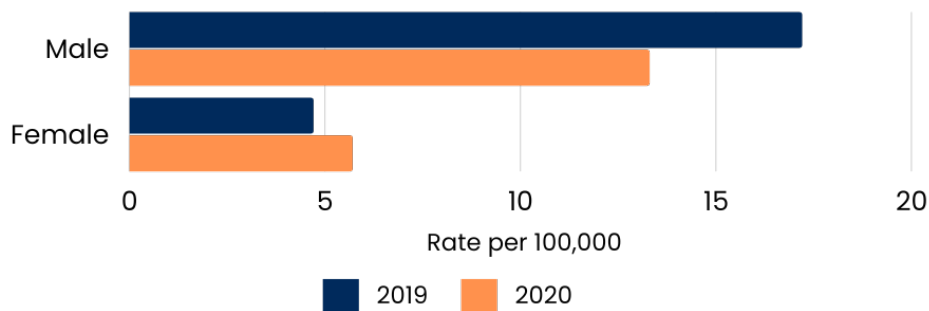
Target: 3,835 persons

FBC Status: Not measured

HIV Prevalence over Time, 2011-2020



Rate of New HIV Diagnoses by Sex, 2019-2020

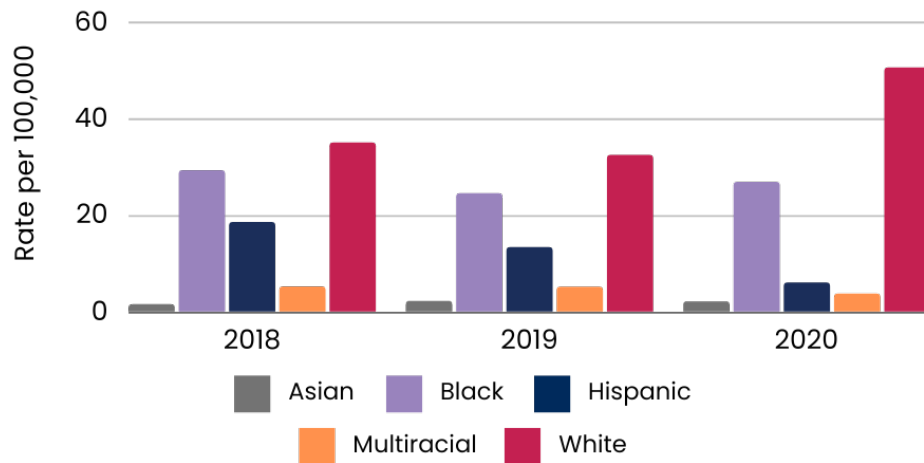


³⁹ HIV Prevalence*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 6, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-outcomes/quality-of-life/hiv-prevalence>

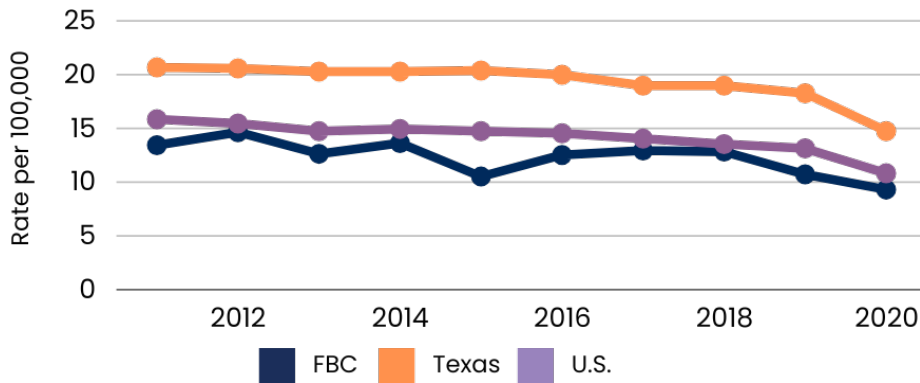
⁴⁰ Today's HIV/AIDS Epidemic. (August 2016). CDC Fact Sheet

⁴¹ CDCTB. (2022, March 17). Tuberculosis (TB) in the United States. Centers for Disease Control and Prevention. <https://www.cdc.gov/tb/default.htm>

Rate of New HIV Diagnoses by Race/Ethnicity in Fort Bend County, 2018–2020



Rate of New HIV Diagnoses by Year, 2011–2020



Tuberculosis

Tuberculosis (TB) is caused by a bacterium that usually attacks the lungs but can attack any other organ. Latent TB infection (LTBI) and TB disease are two TB related conditions.⁴¹ Without treatment, 10% of people with LTBI will develop TB disease which can be fatal.⁴¹ In people with diabetes, this risk of TB infection progressing to TB disease is 30 % over a life time.

While the rates of Tuberculosis (TB) have been decreasing over the past 10 years in Fort Bend, the county has higher rates of the disease per 100,000 population when compared to Texas and the US. To meet the Healthy People 2030 goal of 1.4 cases new cases of confirmed cases of TB per 100,000 population, Fort Bend needs to decrease the rates by over half.⁴²

Related Healthy People 2030 Objectives

Reduce tuberculosis cases

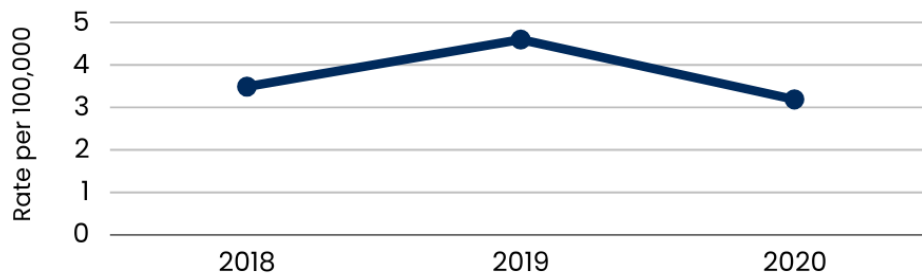
Target: 1.4 per 100,000

FBC Status: Not met

⁴¹ CDCTB. (2022, March 17). Tuberculosis (TB) in the United States. Centers for Disease Control and Prevention. <https://www.cdc.gov/tb/default.htm>

⁴² Reduce tuberculosis cases—IID17—Healthy People 2030 | health.gov. (n.d.). Retrieved February 6, 2023, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/infectious-disease/reduce-tuberculosis-cases-iid-17>

Tuberculosis Rates per Year, 2018–2020

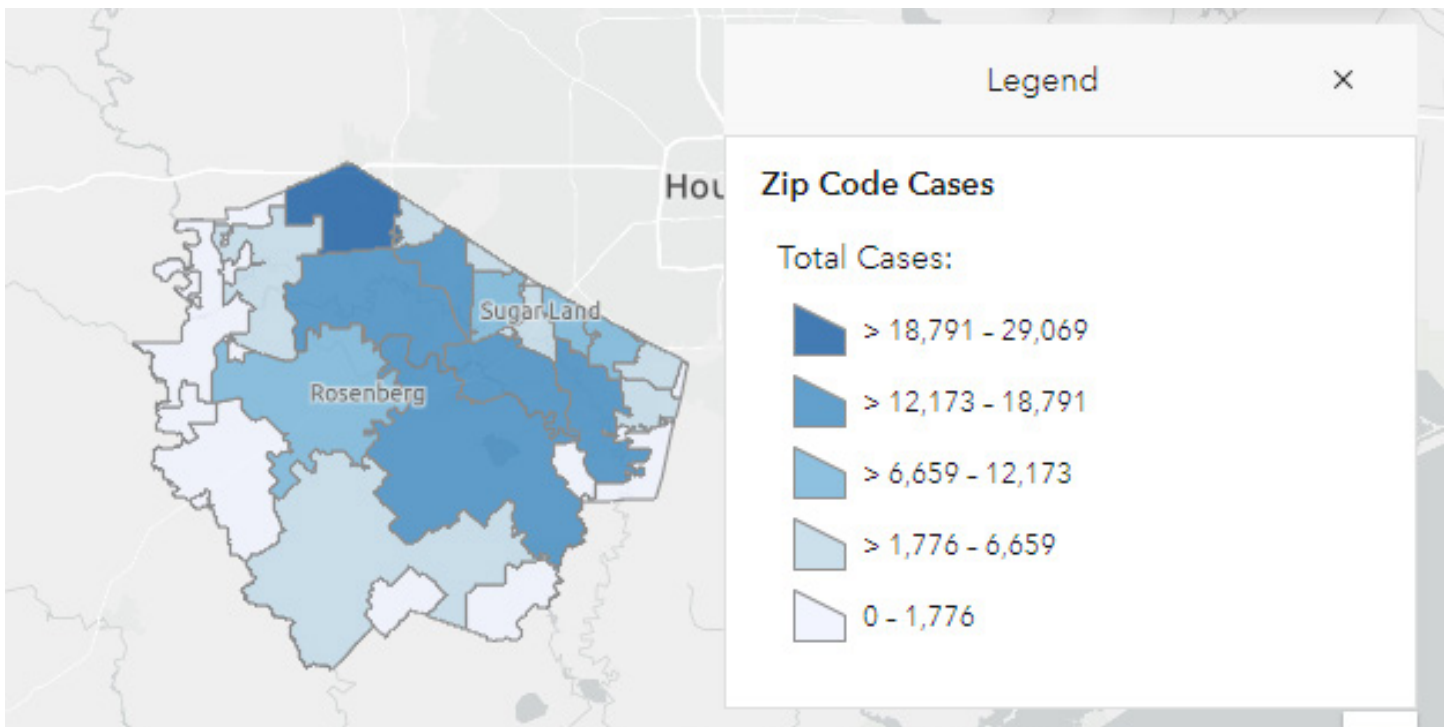


COVID-19

COVID-19 is a contagious, respiratory disease caused by SARS-CoV-2 first discovered in 2019.⁴³ Fort Bend County confirmed its first positive COVID-19 case on March 4, 2020. Since then, there have been over 190,000 confirmed cases and over 1,200 deaths.⁴⁴

The total number of COVID-19 cases vary by zip code. The northern part of the county, specifically zip code 77494, has the highest number of total cases compared to the more rural parts of the county.⁴⁵

More female residents compared to males have been infected by COVID-19. In contrast, males have a higher cumulative mortality rate compared to females. Residents who identify as “Other” have a higher cumulative rate of COVID-19 cases compared to other race/ethnicities.



⁴³ CDC. (2020, February 11). COVID-19 and Your Health. Centers for Disease Control and Prevention. <https://www.cdc.gov/coronavirus/2019-ncov/your-health/about-covid-19/basics-covid-19.html>

⁴⁴ COVID-19 Fort Bend County Response Hub. (n.d.). Retrieved January 31, 2023, from <https://fort-bend-covid-19-response-fbc-hhs.hub.arcgis.com/>

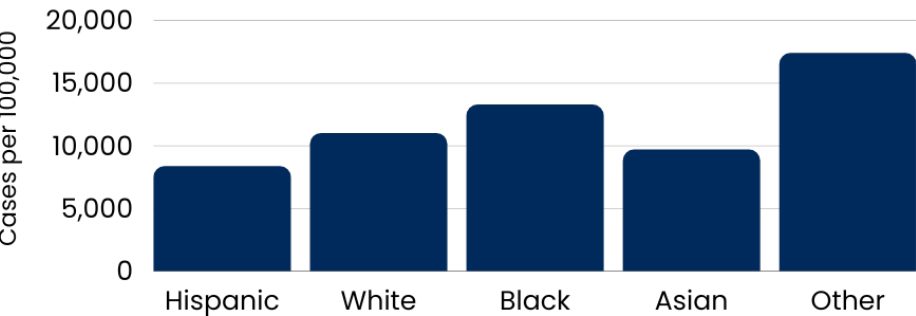
⁴⁵ Case Maps. (n.d.). Retrieved September 20, 2022, from <https://fort-bend-covid-19-response-fbc-hhs.hub.arcgis.com/pages/case-maps>

These distributions are unique to Fort Bend County as the Hispanic populations has the highest rate (after the American Indian/Alaskan Native population which is not accounted for in FBC) of COVID-19 cases nationally and in Texas.⁴⁶

The mortality rate for the White population is higher than that of the other races/ethnicities which differs from the Hispanic population having the highest (after the American Indian/Alaskan Native population which is not accounted for in FBC) mortality rate nationally and in Texas.⁴⁷ The 20–29 age group has the highest cumulative rate of cases, while the 70+ age group has the highest cumulative mortality rate. This trend is consistent with national and state data.

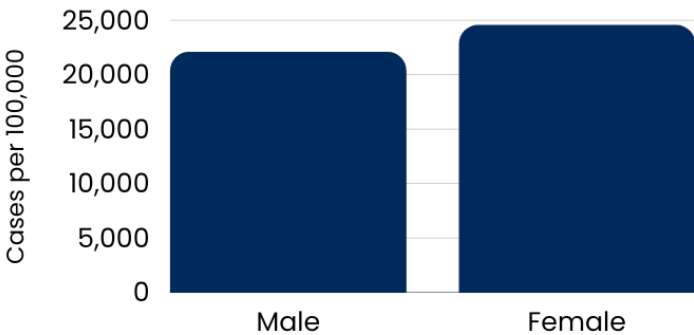
Cumulative Rates of Cases by Race/Ethnicity in Fort Bend County

Updated September 7, 2022



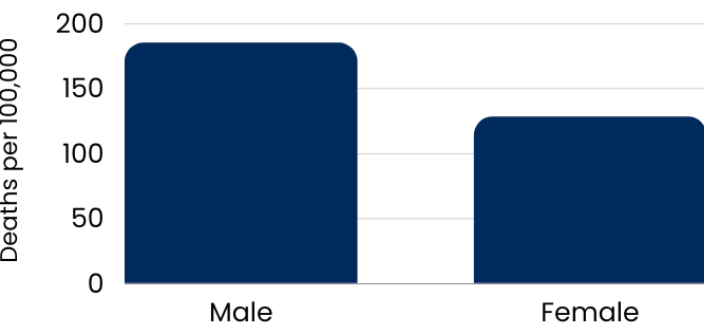
Cumulative Rates of Cases by Sex in Fort Bend County

Updated September 7, 2022



Cumulative Mortality Rates by Sex in Fort Bend County

Updated September 7, 2022

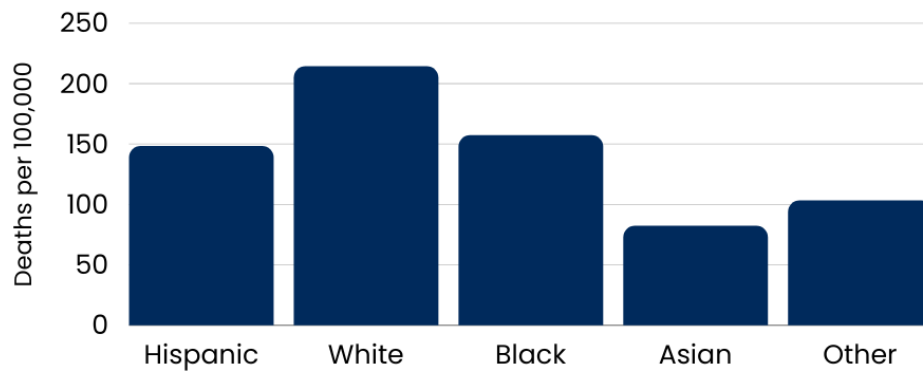


⁴⁶ 2022. (2022, August 22). COVID-19 Cases and Deaths by Race/Ethnicity: Current Data and Changes Over Time. KFF. <https://www.kff.org/coronavirus-covid-19/issue-brief/covid-19-cases-and-deaths-by-race-ethnicity-current-data-and-changes-over-time/>

⁴⁷ COVID-19—Cases. (n.d.). Retrieved September 21, 2022, from <https://www.arcgis.com/apps/dashboards/45e18cba105c478697c76acbbf86a6bc>

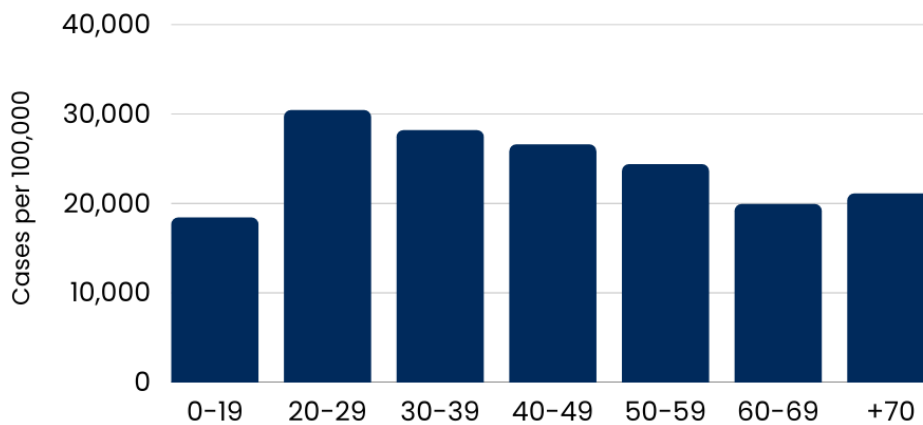
Cumulative Mortality Rates by Race/Ethnicity in Fort Bend County

Updated September 7, 2022



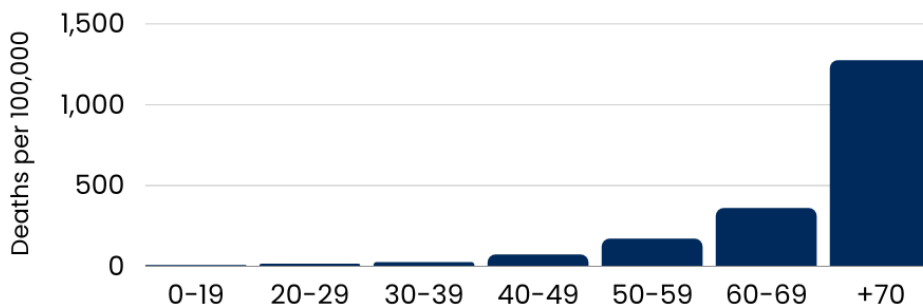
Cumulative Rates of Cases by Age Group in Fort Bend County

Updated September 7, 2022



Mortality Rates of Cases by Age Group in Fort Bend County

Updated September 7, 2022



Mental Health

Mental health is an important component of overall health and well-being and it is closely connected to physical health, and is part of the continuum between physical and emotional health. Mental health issues, such as depression and anxiety can affect one's ability to take part in healthy behaviors.

Secondary data from the County Health Rankings indicate that the mental health of Fort Bend residents is similar to the mental health of Texans overall and to the top U.S. performing counties. Fort Bend County residents report an average of 3.6 mentally unhealthy days per month. This number is slightly lower than what residents throughout Texas (3.9 days) and the top U.S. performers (4.0 days) report. The County Health Rankings also states that 11% of Fort Bend County adults report 14 or more days of poor mental health per month. 12% and 13% of adults in Texas and the top U.S. performing counties, respectively, report 14 or more days of poor mental health per month.¹⁰

Primary data collected through our local survey shows that mental health is a significant concern for the Fort Bend community. 24% of survey respondents stated that their mental health was not good one to five days out of the past 30 days and 13% indicated that their mental health was not good six days or more out of the past 30 days.

There are disparities those respondents that reported poor mental health (6–30 days of not good mental health). More people who are non-Hispanic white report having poor mental health than other race/ethnicities. This may correlate with the suicide rates of populations in the County, as people who are white have significantly higher rates of suicide (see section on Suicide). However, research^{48,49} has found and key

Related Healthy People 2030 Objectives

Increase the proportion of children with mental health problems who get treated

Target: 79.3%

FBC Status: Not measured

Increase the proportion of adults with serious mental illness who get treatment

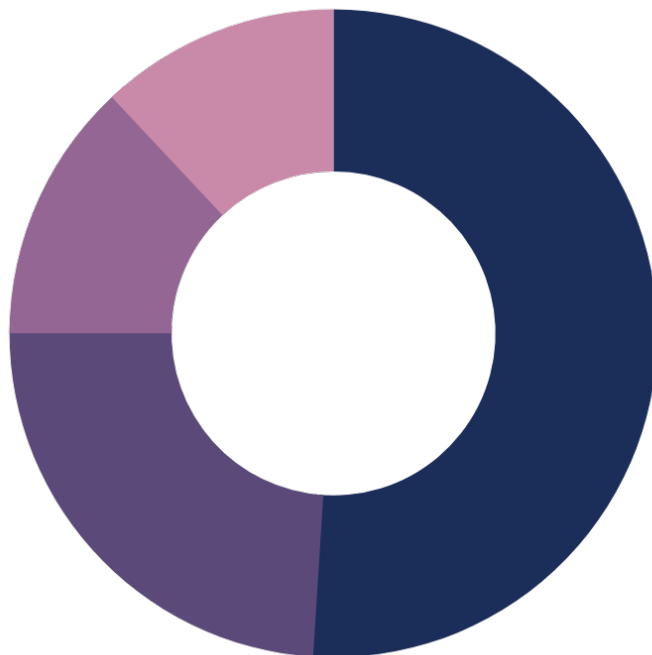
Target: 68.8%

FBC Status: Not measured

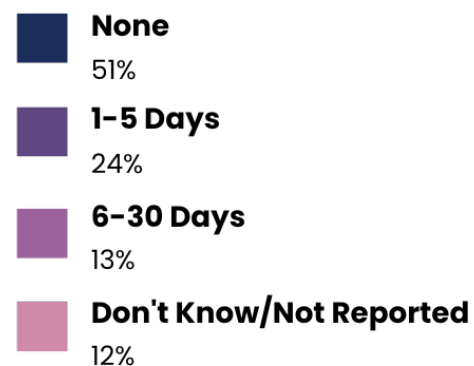
Increase the proportion of adolescents with depression who get treatment

Target: 46.4%

FBC Status: Not measured



Amount of "Not Good" Mental Health Days in the Last 30 Days

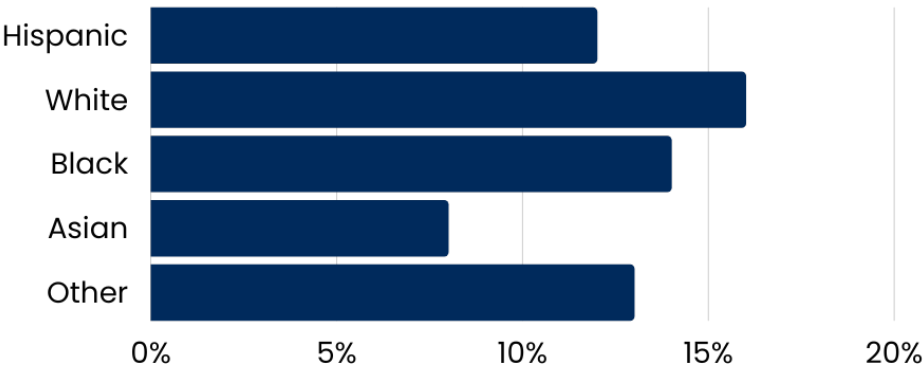


⁴⁸ Abdullah, T., Brown, T.L. (2011). Mental illness stigma and ethnocultural beliefs, values, and norms: an integrative review. *Clinical Psychology Review*, 31: 934–948.

⁴⁹ Carpenter-Song, E., Chu, E., Drake, R.E., Ritsema, M., Smith, B., Alverson, H. (2010). Ethno-cultural variations in the experience and meaning of mental illness and treatment: implications for access and utilization. *Transcultural Psychiatry*, 47(2): 224–251.

informants have shared that different populations and cultures perceive mental health in various ways, which impacts the reporting of and the seeking of help for mental health concerns. Key Informant interviewees discussed stigma, particularly in minority and religiously conservative communities, as a barrier to acknowledging, identifying, and seeking services for mental health related concerns. As a result, mental health

Mental Health: 6-30 Days of "Not Good" Mental Health in Last 30 Days by Race/Ethnicity



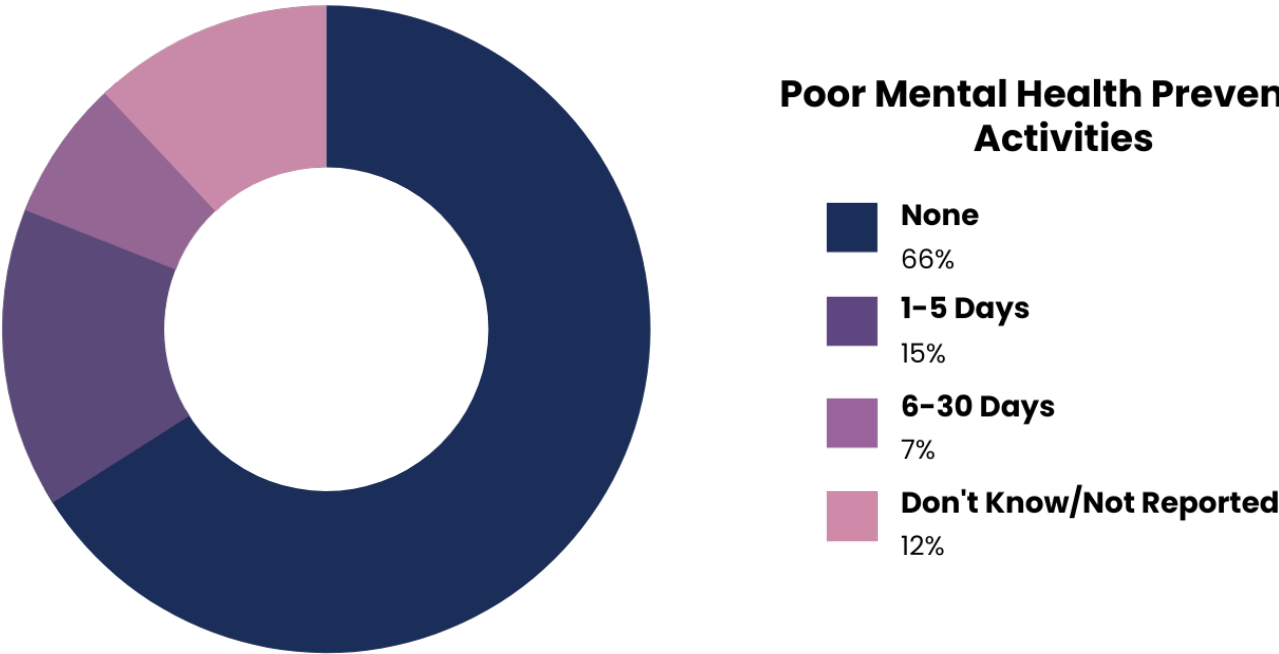
issues may be under reported in minority groups. Survey participants that were asked “in the past 30 days, for how many days did poor mental health keep you from doing your usual activities, such as self-care, work, or recreation?”. 15% said one to five days and 7% said six or more days.

Respondents were asked how much of a problem mental health issues, such as depression and anxiety, have been in their household during the past 12 months. Almost half (46%) indicated that mental health was at least a minor problem.

Mental health was the second most common health concern for survey respondents with almost one in five (19%) selecting it as one of their top three health concerns for their community. 14% of survey

Related Healthy People 2030 Objectives	
Increase the proportion of people with substance use and mental health disorders who get treatment for both	
Target:	8.2%
FBC Status:	Not measured
Increase the proportion of children and adolescents who get preventive mental health care in school	
Target:	Developmental Objective
FBC Status:	Not measured

Poor Mental Health Prevented Activities



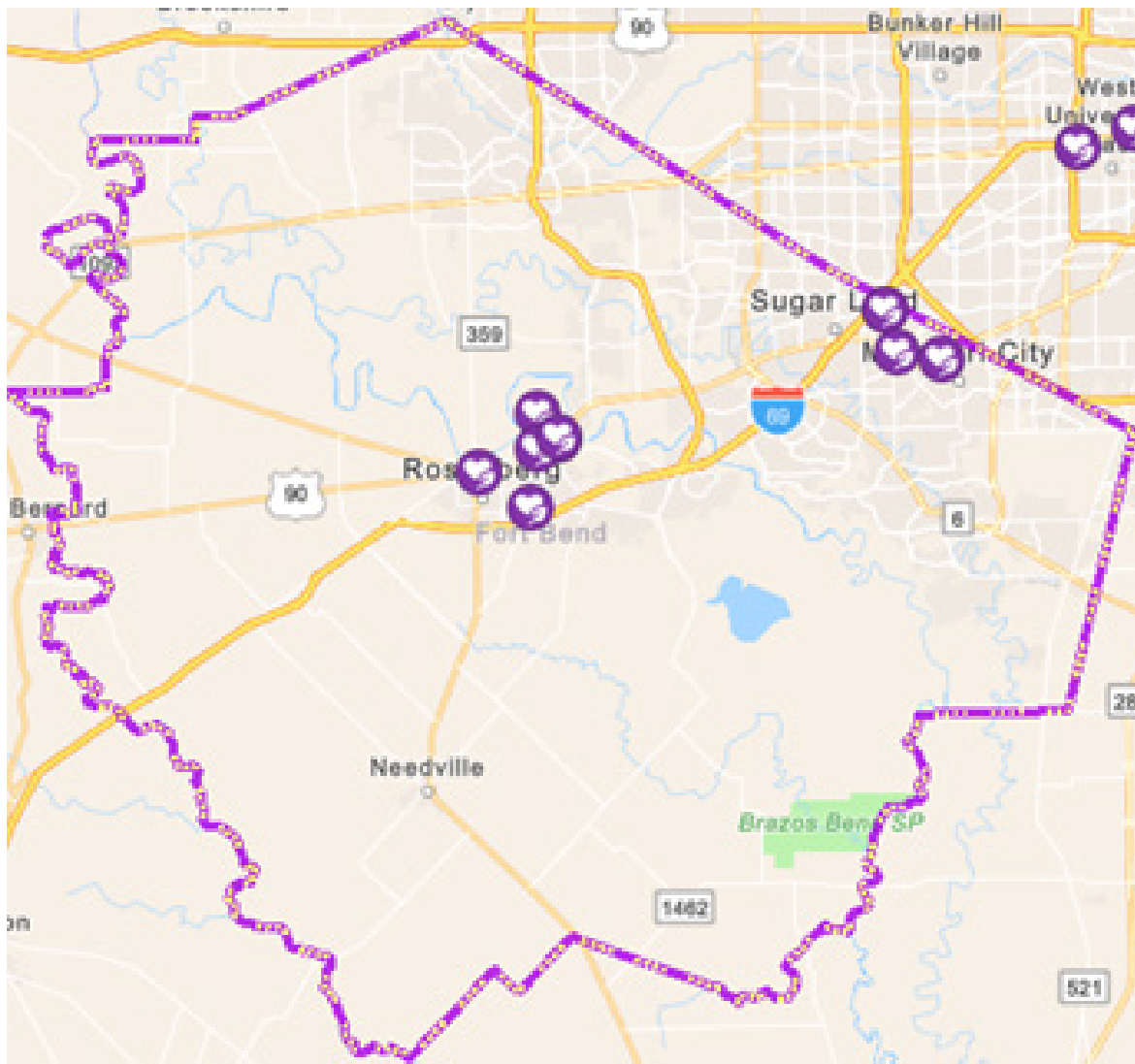
participants indicated that they or a family member could not access mental health services in the past year when they needed it.

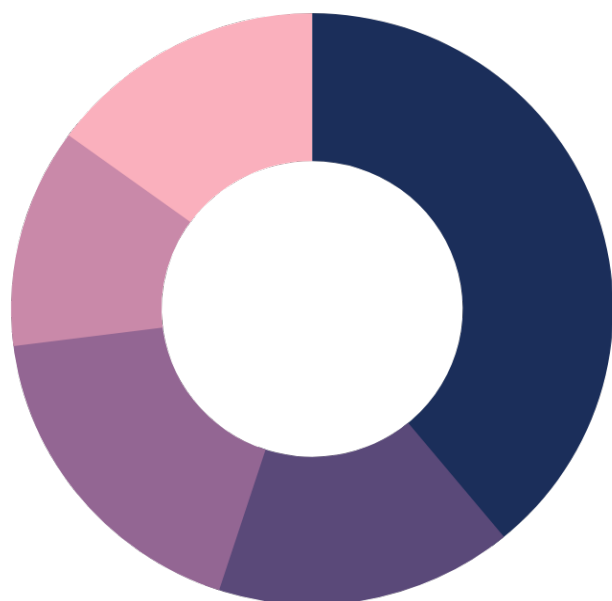
13.7% of survey respondents stated that there was a time in the in the past year that they or a family member needed mental health services but could not get it. The top reasons for this were that they could not afford to pay for services (33.6%), wait times for an appointment were too long (26.7%) and the providers could not accommodate their schedule (15.5%).

One in three (32.4%) survey respondents indicated that in relation to health and quality of life, mental health services are missing in the community. Qualitative data also highlighted mental health issues in the community. Mental health was the top cited concern amongst key informant interviewees.

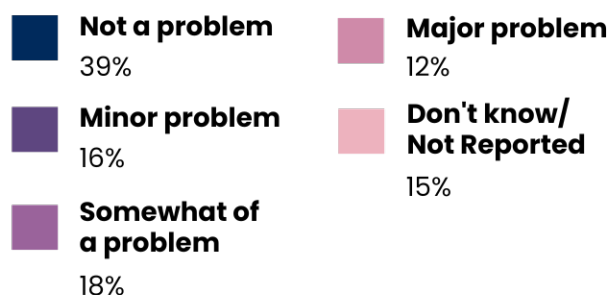
Forty-six percent of survey respondents stated that mental health education is needed in the community. Interviewees mentioned that more collaboration and coordination between partners and services, less operating in silos, and the strengthening of relationships to create a seamless continuum of services across the healthcare systems from outpatient services to hospital services will help address mental health in the community. Key Informants suggested increasing mental health services including recruiting more mental health providers, creating more comprehensive case management mental health services, and expanding mental health crisis response teams such as Community Intervention Teams and Assertive Community Treatment Teams.

The map below indicates where mental health services can be found in the community.





How much Mental Health has been a Problem for Households in the Past 12 months



Diabetes

Poorly controlled or untreated diabetes can lead to poor quality of life due to foot or leg amputations, vision loss, and kidney damage.⁵⁰ Healthy People 2030 has a goal of reducing the burden of diabetes and improving the quality of life for all people who have or are at risk for diabetes. Diabetes is the eighth leading cause of death in Fort Bend County. Fort Bend residents who are Black or African American have higher rates of death due to diabetes compared to residents who are white or Hispanic.¹² While Fort Bend County has a diabetes prevalence that is slightly lower than the state of Texas, top US performing counties have a prevalence rate that is 3% lower.¹⁰

Based on the CHA survey, diabetes is the third top health issue for Fort Bend County residents with 16% of respondents indicating that it was a concern. Diabetes was also mentioned by key informants to be in their top four health concerns.

Related Healthy People 2030 Objectives

Reduce the number of diabetes cases diagnosed yearly

Target: 79.4.8 per 1,000

FBC Status: Not measured

Increase the proportion of people with diabetes who get formal diabetes education

Target: 55.2%

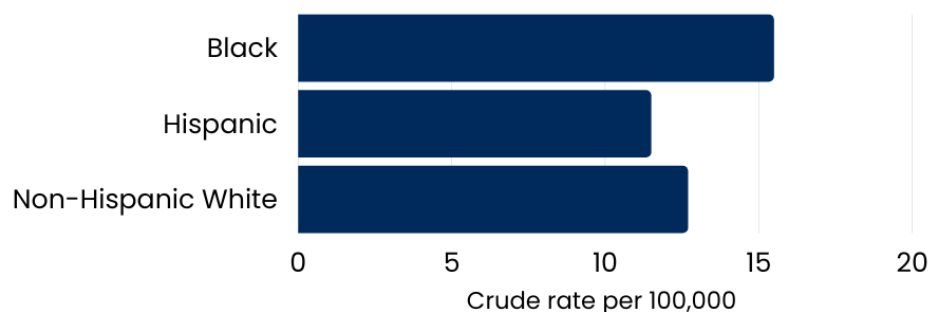
FBC Status: Not measured

Reduce the rate of death from any cause in adults with diabetes

Target: 13.7 per 1,000

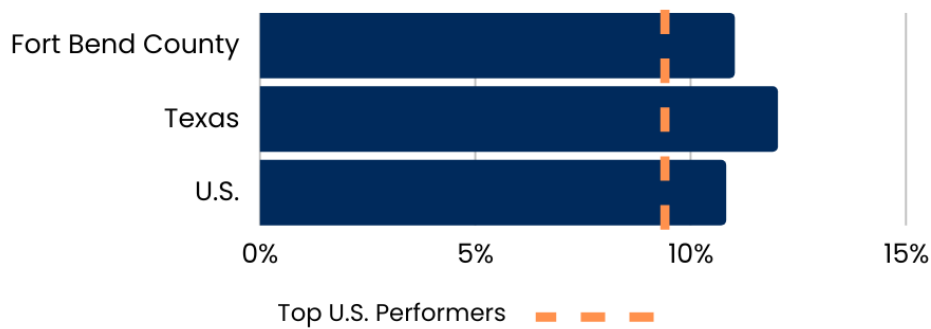
FBC Status: Not met

Deaths Caused by Diabetes in Fort Bend County by Race/Ethnicity, 2020

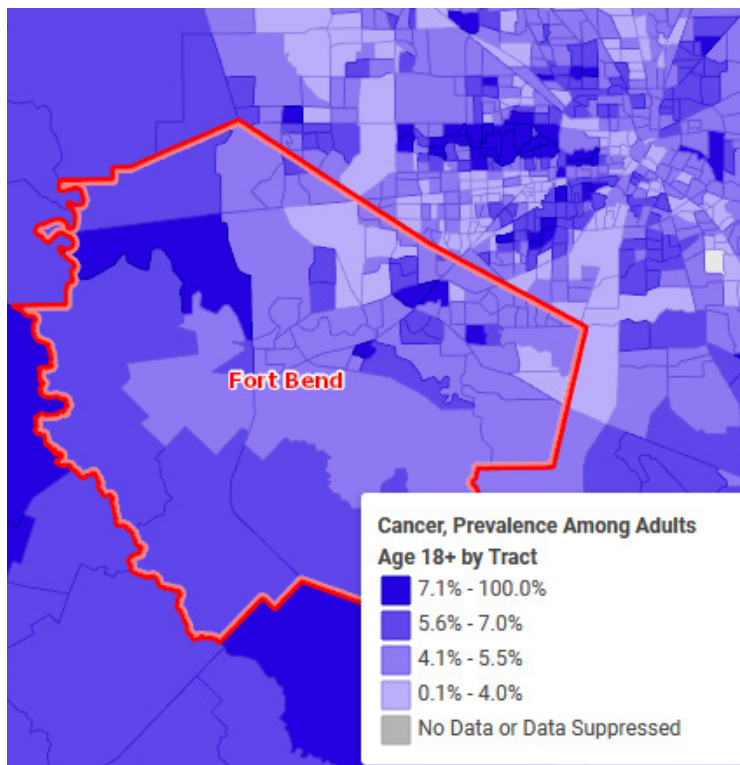


⁵⁰ Healthy People 2030. (2022). Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/diabetes>

Diabetes Prevalence in Adults Aged 20 and Over, 2019



The map below shows the prevalence of diabetes among adults aged 18 and over by census tract. There are tracts in the county where the prevalence is under 8.1% which is right at the level of Top U.S. Performers. In contrast, the eastern tract, middle and northeastern tract of the county have a prevalence over 13.0%.



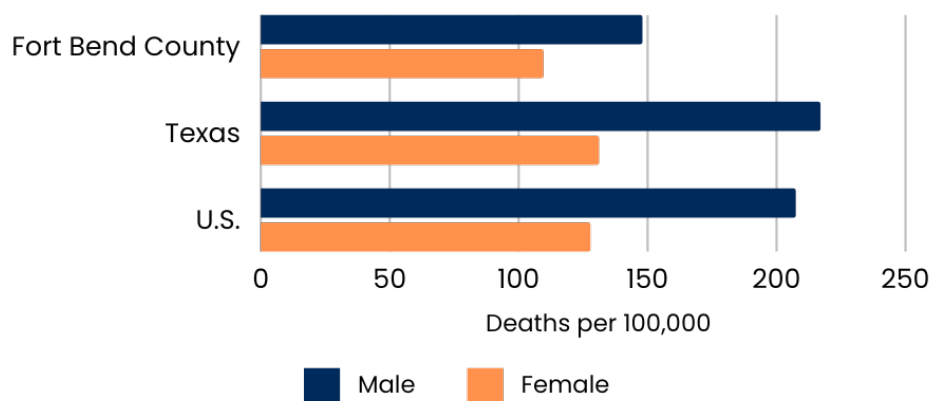
Heart Disease

Healthy People 2030 aims to improve cardiovascular health and reduce deaths from heart disease and stroke.⁵¹ Heart disease and stroke can result in poor quality of life, disability, and death. Though both diseases are common, they can often be prevented by controlling risk factors like high blood pressure and high cholesterol through treatment.

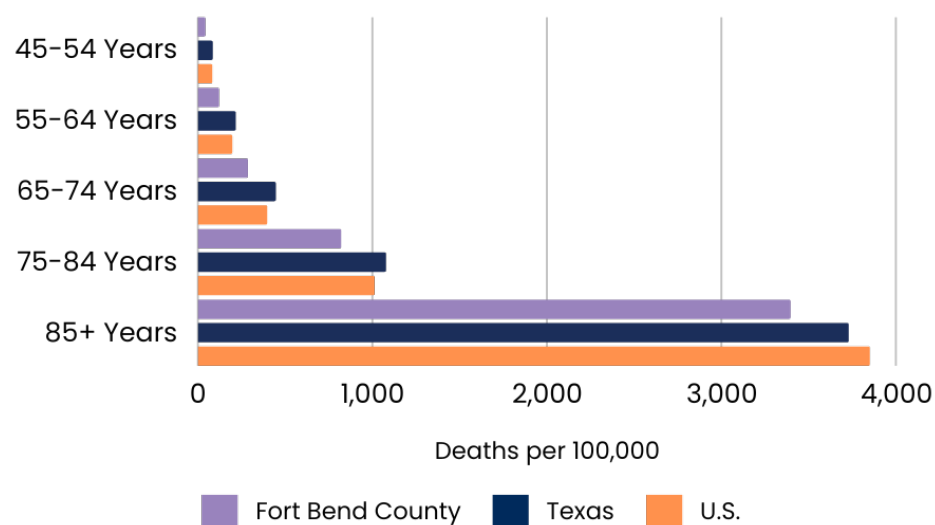
⁵¹ Healthy People 2030. (2022). Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/heart-disease-and-stroke>

While Heart Disease has been on a decline over the past three decades, diseases of the heart are the leading cause of death in Fort Bend County. Stroke is the fourth leading cause of death in the county.

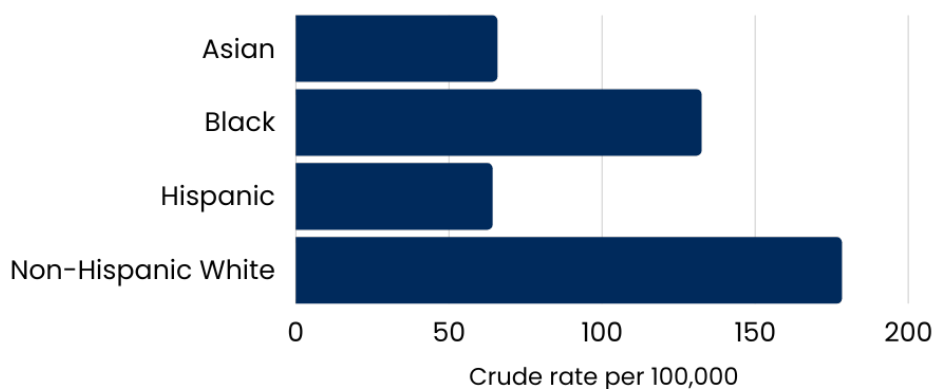
Heart Disease Deaths by Sex, 2018



Heart Disease Deaths by Age, 2018



Heart Disease Deaths in Fort Bend County by Race/Ethnicity, 2020



Related Healthy People 2030 Objectives

Improve cardiovascular health in adults

Target: 3.5 mean cardiovascular score

FBC Status: Not measured

Reduce coronary heart disease deaths

Target: 71.1 per 100,000

FBC Status: Not met

Reduce Stroke deaths

Target: 33.4 per 100,000

FBC Status: Not measured

Reduce the proportion of adults with high blood pressure

Target: 42.6%

FBC Status: Not measured

Increase control of high blood pressure in adults

Target: 18.9%

FBC Status: Not measured

Reduce cholesterol in adults

Target: 186.4 mg/dL

FBC Status: Not measured

Increase cholesterol treatments in adults

Target: 54.9%

FBC Status: Not measured

Increase aspirin use for secondary prevention of atherosclerotic cardiovascular disease

Target: 69.7%

FBC Status: Not measured

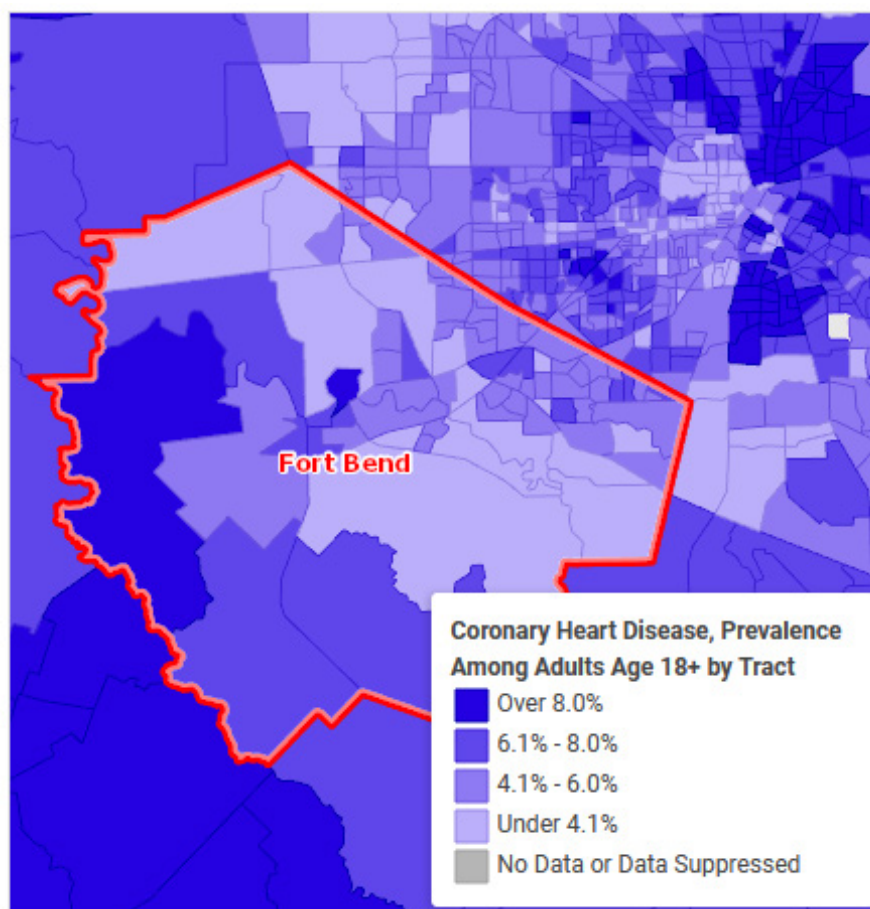
Heart Disease deaths reflect similar to prevalence with less deaths in females for Fort Bend County, Texas, and the United States (*from lowest to greatest*). Males having a higher prevalence is resulting in higher death rates within all populations per 100,000. A population of 109.55 women and 147.89 men in Fort Bend County per 100,000 were heart disease deaths in 2018.⁵²

Older age is associated with heart disease, with older Fort Bend County residents having higher rates of death. Fort Bend County, although not far from, does have lower heart disease death rates compared to Texas and the US in 2018.

People who are Black/African American have the highest deaths due to heart disease in Fort Bend County compared to other race/ethnicity groups. Data for people who are American Indian/Alaskan Native where not available for Fort Bend but have the lowest death rates in Texas compared to other races in Texas.

Heart Disease was the fifth most commonly cited health issue by survey respondents and key informants. 14.8% of survey respondents identified heart disease as a health concern.

The map below shows the prevalence of coronary heart disease among adults aged 18 and over by census tract. Although most census tracts have a prevalence under 4.1%, the eastern tract of the county has double the prevalence (*over 8.0%*).



⁵² LiveStories (source limitation due to inability to confirm via CDC Wonder)

FINDINGS

Health Determinants

Health determinants are factors that can determine our health outcomes. These factors include our built environment -- where we live, work, and play. It is also considered the circumstances shaped by the distribution of money, power, and resources at global, national, and local levels.⁵³

Health Care

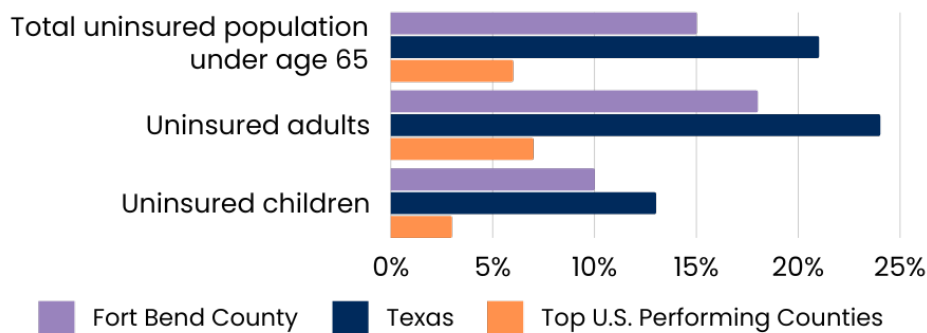
Access to quality and affordable healthcare is important to the health and well-being of individuals and communities. There are many organizations in FBC that help residents access healthcare. Key Informants highlighted AccessHealth as well as Texana, Meals on Wheels, AgriLife, PINNACLE Senior Center, and Attack Poverty, to name a few. According to one interviewee, "For a community without a public hospital system, we do a remarkable job providing resources to the community, uninsured community in Fort Bend....But we can do more".

Health Insurance Coverage

According to the Healthy People 2030, a person's ability to access health care and services has a major effect on every aspect of their health. When an individual has access to health services, it prevents disease and disability, increases overall quality of life, reduces the likelihood of premature death, leads to an increase in health expectancy, and leads to earlier detection of illnesses or health conditions.⁵⁴ Adults who are uninsured are less likely to receive preventative services for chronic conditions. Like adults, children who are uninsured also forego preventative services that track developmental milestones, dental care, and immunizations.⁵⁴

Related Healthy People 2030 Objectives	
Increase the proportion of people with health insurance	
Target:	92.4%
FBC Status:	Not met
Increase the proportion of people with dental insurance	
Target:	75%
FBC Status:	Not measured
Increase the proportion of people with prescription drug insurance	
Target:	89%
FBC Status:	Not measured

Uninsured Population



⁵³ CDC. (2022, December 8). Social Determinants of Health. Centers for Disease Control and Prevention. <https://www.cdc.gov/about/sdoh/index.html>

⁵⁴ Health Care Access and Quality—Healthy People 2030 | health.gov. (n.d.). Retrieved February 9, 2023, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality>

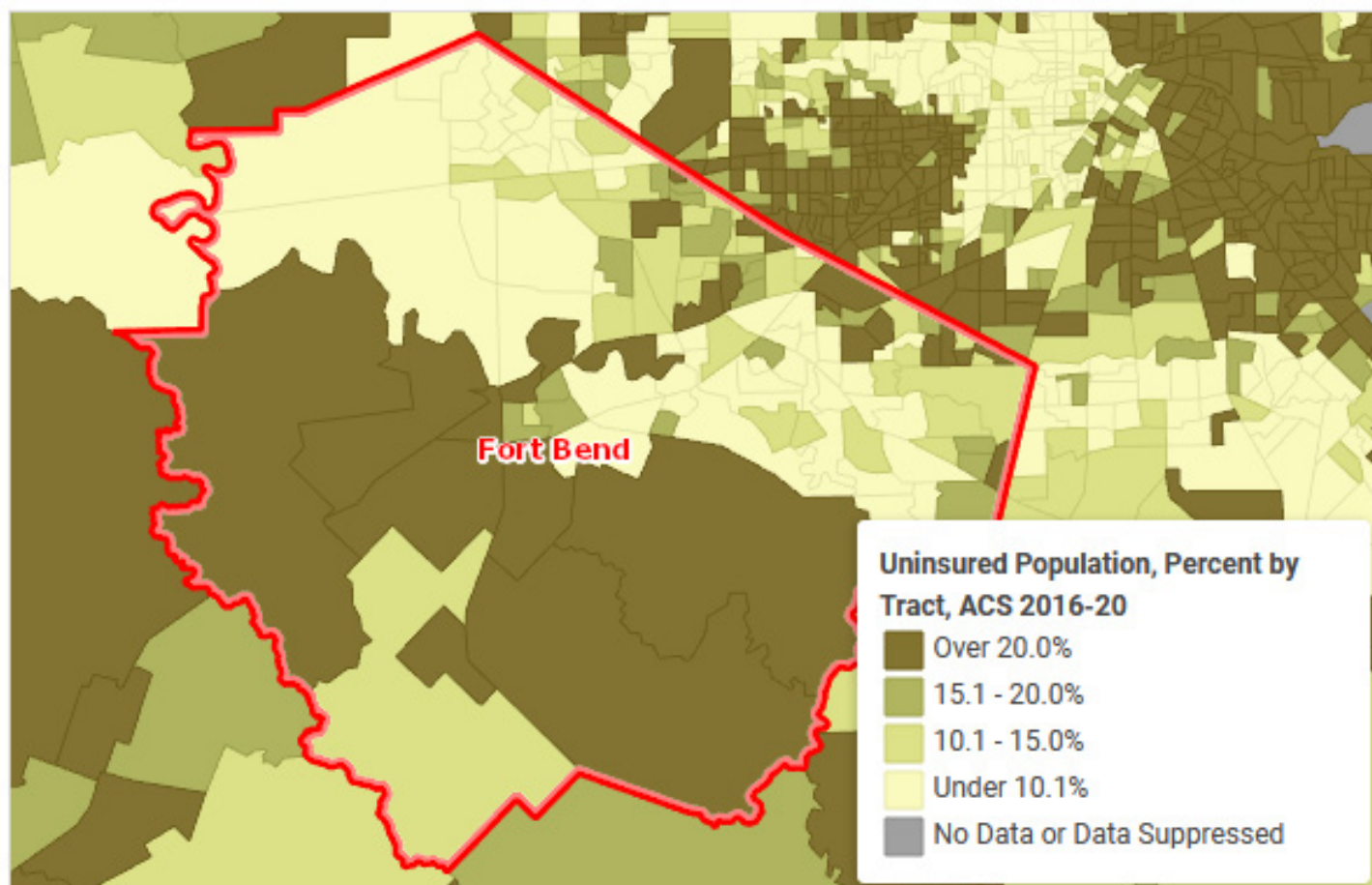
In Fort Bend County, in 2019 there were a total of 86, 838 (18%) uninsured adults and 22, 621 (10%) uninsured children. Compared to the top performing US counties, Fort Bend County has a rate of uninsured that is higher. However, trend data from the past decade demonstrates that the percentage of the population that is uninsured (*including adults and children*) in the community is decreasing.¹⁰

There are areas in the county where there are more people who are uninsured compared to other areas. The city of Houston that is in Fort Bend, north Richmond, and the more rural areas of the county have rates of over 20% of the population without health insurance. These are also the same areas that Key Informants identified as having poorer health.

CHA survey respondents identified that the top two barriers to accessing healthcare includes the inability to pay out of pocket and the lack of health insurance. Twenty-two percent of survey respondents, they or a family member, needed medical care in the past year but was unable to receive it. The top reason was because they did not have health insurance.

Almost half (45%) of survey respondents indicated that the top missing services in the community are free or low-cost dental and medical services. Twenty-three percent (22.7%) of key informants spoke about the cost of health care as a challenge for residents by having

Related Healthy People 2030 Objectives	
Reduce the proportion of people who can't get medical care when they need it	
Target:	3.3%
FBC Status:	Not met
Reduce the proportion of people who can't get the dental care they need when they need it	
Target:	4.1%
FBC Status:	Not measured
Reduce the proportion of people who can't get prescription medicines when they need them	
Target:	3%
FBC Status:	Not measured



competing priorities that forces them to choose between meeting their basic needs, such as paying for housing or food, or health care. “Everything is a tradeoff. If you have to pay \$100 to go to a doctor or to an emergency clinic, that’s \$100 you are not buying groceries, and in this day, 1 tank of gas”.

While 31.8% of Key informant interviewees mentioned a lack of health insurance as a barrier to accessing health care services, they also identified the FQHC’s and other clinics, such as AccessHealth, Christ Clinic, Hope Clinic, and San Jose Clinic, that offer low-cost or services to people without insurance as a strength for the county. Over a quarter (27%) of interviewees spoke about the need to increase the number of services, such as indigent care services, AccessHealth offices, and treatment for people with substance use issues, available for people who do not have health insurance. Key Informants said there is not enough services for people who are uninsured and that more FQHC’s are needed but strong partnerships and collaborations among service providers help. “We do have strong partnerships. Everyone tries to work together. Local foundations like the George Foundation tries to bring people together. That is a strength. Our local Henderson-Wessendorff Foundation, we work with. They focus on strong collaboration and maximizing resources”.

If you were unable to get medical care in the past year when you needed it, why?	
Responses	% of Respondents
I didn't have health insurance	37.4%
I couldn't afford to pay my co-pay or deductible	32.1%
Too long to wait for an appointment	27.8%
No availability	17.6%
No availability to accommodate my schedule	17.1%
The doctor or clinic refused to take my insurance or Medicaid	13.4%
I didn't have any way to get to get to the doctor	8.0%
No or unreliable childcare	8.0%
Fear	7.0%

If you were unable to get medical care in the past year when you needed it, why?	
Responses	% of Respondents
Language barriers	2.1%
I didn't know how to find a doctor	1.6%

Provider Rates

Availability of health care providers to patients has been recognized as one of the top barriers to meeting health care needs within the U.S.⁵⁵ When the supply of care providers is low, it limits an individual's ability to get the care they need which, unfortunately, may contribute to negative health outcomes.⁵⁶ For example, in more rural areas, there may be fewer care providers than in those urban areas, thus creating additional challenges for rural residents when it comes to receiving healthcare services. Therefore, it is important to assess the availability of care providers to ensure that needs of all residents are being met.

According to County Health Rankings, in 2019, Fort Bend County had a total of 688 Primary Care Physicians (PCPs). PCPs are defined as physicians who provide the first contact for a person with an undiagnosed health condition and continuing care for various medical conditions. During the 2019 report year, there were 1,180 residents to every one primary care physician in the county. This ratio is lower than some neighboring counties in our region. Typically, the lower the physician-to-patient ratio, the more likely that patient outcomes are better because there are more available providers that can provide health services for these individuals without delay to health service.

In addition to primary care physicians, it is important to assess the availability of dentists, mental health providers, and other primary care professionals (*such as nurse practitioners and physician assistants*) since health is not solely addressed by doctors. Fort Bend County falls short in all of these three provider rates compared to Texas and the top US performing counties, indicating the need to increase the number medical professionals in the community.¹⁰

Primary Care Physicians		
Fort Bend County	Texas	Top U.S. Performing Counties
1,180:1	1630:1	1,010:1

⁵⁵ Texas Physician Supply and Demand Projections. (n.d.). 52.

⁵⁶ Access to Health Services - Healthy People 2030 | health.gov. (n.d.). Health.gov. Retrieved March 13, 2023, from <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/access-health-services#cit20>

Dentists		
Fort Bend County	Texas	Top U.S. Performing Counties
1,800:1	1660:1	1,210:1

Mental Health Providers		
Fort Bend County	Texas	Top U.S. Performing Counties
1,210:1	760:1	250:1

Other Primary Care Providers		
Fort Bend County	Texas	Top U.S. Performing Counties
1,290:1	1,050:1	580:1

Twenty-three percent (22.7%) of key informants identified Fort Bend County as having a lack of medical specialists as a barrier. This means that residents have to travel to outside of the area to places like Harris County for services, experience long wait-times, or go without.

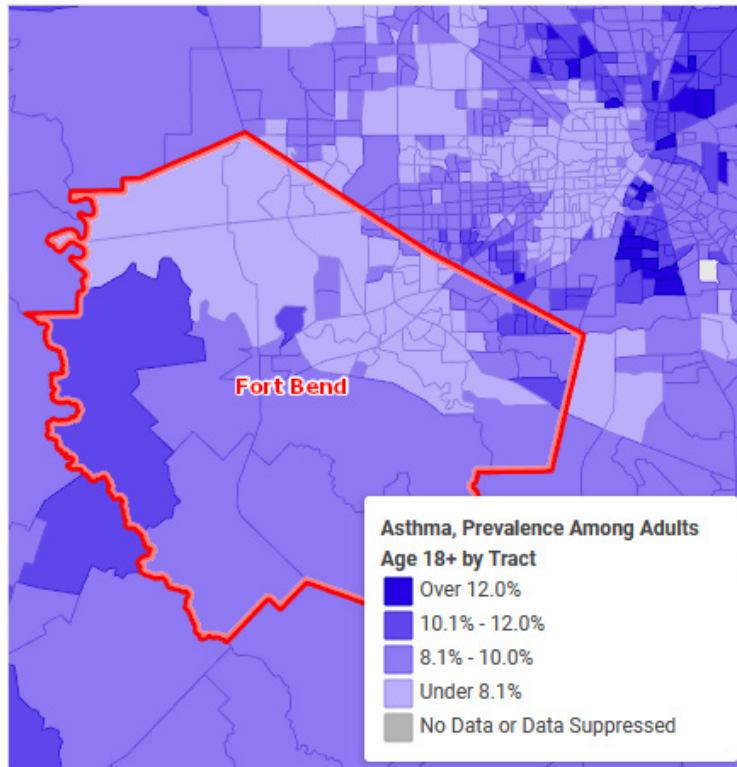
Without the adequate availability of health care providers, Fort Bend County residents will struggle to access services, particularly those community members with Medicaid, Medicare, or without health insurance.

Asthma-Related Hospitalizations

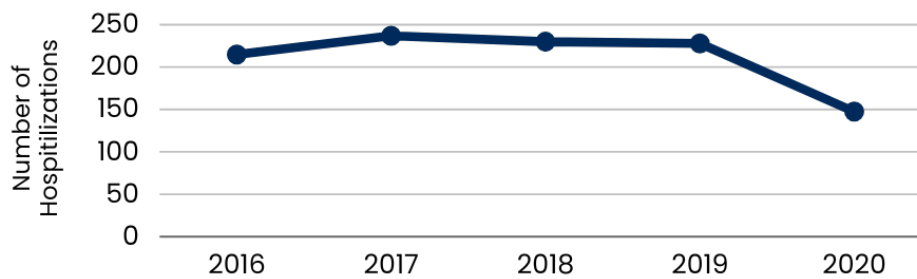
Asthma and other respiratory diseases contribute to pre-mature death, cardiovascular disease, cancer, and substantial health care costs.⁵⁷ The prevalence of asthma among adults (18+) varies from under 8.1% to 10.1 – 12.0% in some census tracts in the county. Asthma-related hospitalizations have decreased in the county over the past few years. There are differences among populations in the average length of time that people spend in hospital for asthma-related conditions. People who are Black and live in Fort Bend County spend, on average, slightly more time in hospital compared to people who are white or Hispanic.⁵⁸

⁵⁷ Respiratory Disease—Healthy People 2030 | health.gov. (n.d.). Retrieved February 7, 2023, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/respiratory-disease>

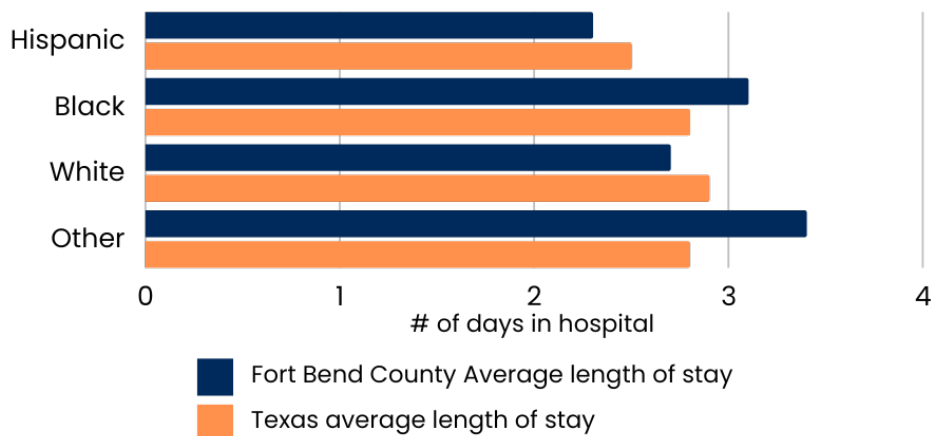
⁵⁸ DSHS Texas Health Care Information Collection (THCIC). <https://healthdata.dshs.texas.gov/dashboard/hospitals/inpatient-use>



Asthma-Related Hospitalizations in Fort Bend County



Average Length of Asthma-Related Hospital Stays by Race/Ethnicity Chart, 2020



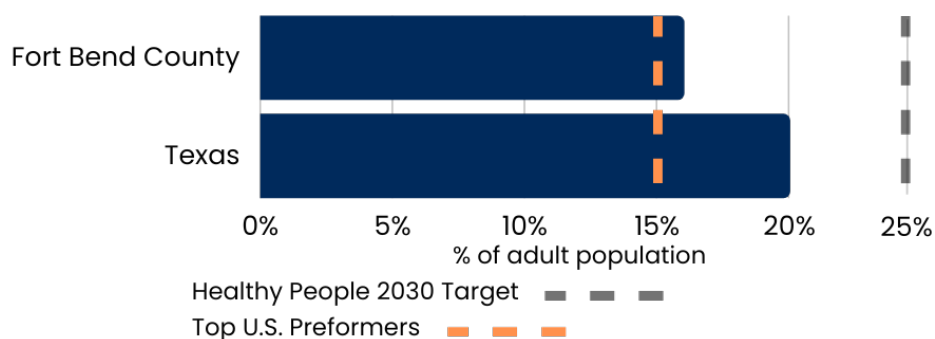
Health Behaviors

Health behaviors are actions that individuals take that affect their well-being. These are actions that could positively or negatively impact your health status. Factors that improve the likelihood of health include exercise and seat belt usage, while factors like excessive drinking and smoking can decrease the likelihood of an individual experiencing positive health outcomes.

Alcohol Use

Excessive drinking, including binge drinking, can lead to poor health outcomes including alcohol poisoning, hypertension, acute myocardial infarction, sexually transmitted infections, unintended pregnancy, fetal alcohol syndrome, sudden infant death syndrome, suicide, interpersonal violence, and motor vehicle crashes.⁵⁹

Excessive Drinking (Binge or Heavy Drinking) in the Past 30 Days, 2019



Related Healthy People 2030 Objectives

Reduce the proportion of people aged 21 years and over who engaged in binge drinking in the past month

Target: 25.4%

FBC Status: Met

Reduce the proportion of people who had alcohol use disorder in the past year

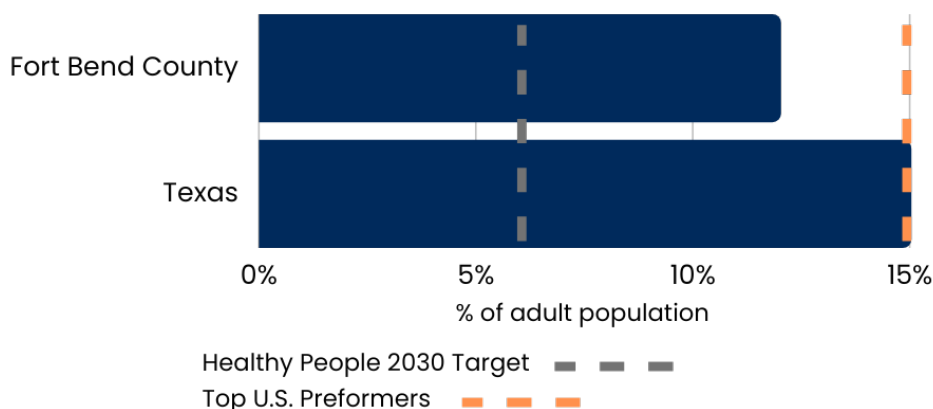
Target: 3.9%

FBC Status: Not measured

Tobacco Use

Smoking causes cancer and premature death. Overall, Fort Bend County has relatively low adult smoking rates (12%). However, Healthy People 2030 has set a target to decrease smoking in adults to 6.1% of the population.⁶⁰

Adult Smoking, 2019



Related Healthy People 2030 Objectives

Reduce current cigarette smoking in adults

Target: 6.1%

FBC Status: Not met

Reduce current cigarette smoking in adolescents

Target: 3.4%

FBC Status: Not measured

Reduce current use of smokeless tobacco products among adolescents

Target: 2.3%

FBC Status: Not measured

⁵⁹ Centers for Disease Control and Prevention. Sociodemographic differences in binge drinking among adults—14 states, 2004. Morbidity and Mortality Weekly Reports. 2009; 58:301–304.

⁶⁰ Reduce current cigarette smoking in adults—TU02—Healthy People 2030 | health.gov. (n.d.). Retrieved February 7, 2023, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/tobacco-use/reduce-current-cigarette-smoking-adults-tu-02>

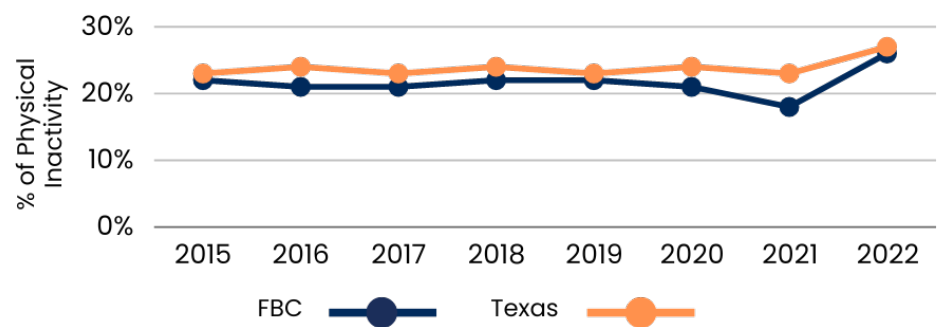
Physical Activity

Physical activity can help prevent disease, disability, injury, and premature death. When performed routinely, exercise has been shown to lower symptoms of depression, reduce risk of chronic disease and premature death, and delay age-related cognitive decline.⁶¹ The Physical Activity Guidelines for Americans lays out how much physical activity children, adolescents, and adults need to get health benefits.⁶² Although most people do not get the recommended amount of physical activity, it can be especially hard for older adults and people with chronic diseases or disabilities.⁶³

Studies have shown that physical activity plays a role in diseases such as coronary heart disease, stroke, cancer at multiple sites, type 2 diabetes, obesity, hypertension, and osteoporosis. Fort Bend’s percentage of physical inactivity, defined as no leisure-time physical activity, has been lower than Texas over the past 8 years. In 2021, there was the greatest decrease of physical inactivity, but it increased by 8% in 2022.¹⁰

Related Healthy People 2030 Objectives	
Increase the proportion of adults who get advice to quit smoking from a health care provider	
Target:	66.6%
FBC Status:	Not met
Increase the national average tax on cigarettes	
Target:	2.60 USD
FBC Status:	Not measured

Percentage of Physical Inactivity, 2015-2022



The built environment plays a significant role in encouraging physical activity. Access to exercise opportunities measures the percentage of individuals in a county who live reasonably close to parks or recreational facilities.¹⁰ Individuals are considered to have access to exercise opportunities if they reside in a census block that is within a half mile of a park or reside in a census block within one mile (*urban*) or three miles (*rural*) of a recreational facility. Compared to Texas and the U.S. Top Performing counties, Fort Bend County has a greater percentage of individuals living reasonably close to a location for physical activity (*parks or recreational facilities*). The map below shows the parks and community centers maintained by the County’s Parks and Recreation department.⁶⁴

⁶¹ Physical Inactivity. (n.d.). County Health Rankings & Roadmaps. Retrieved February 7, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/health-behaviors/diet-and-exercise/physical-inactivity>

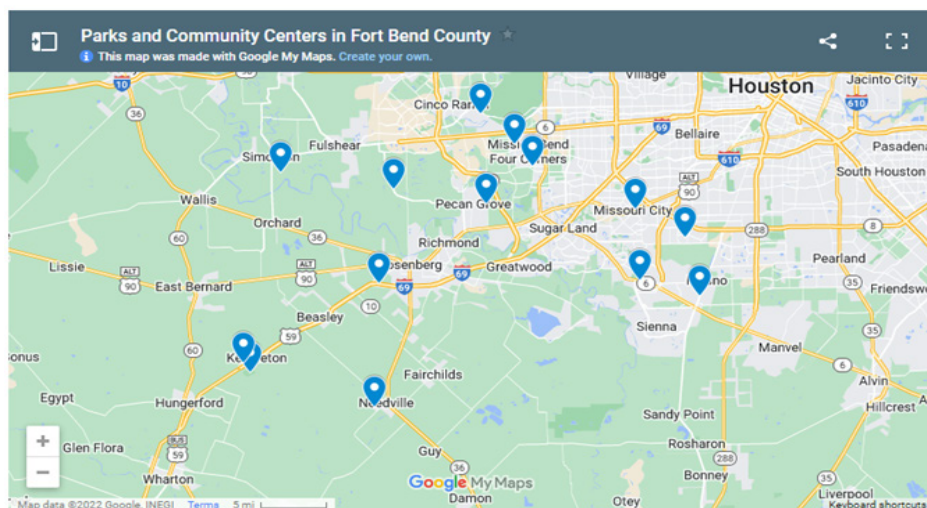
⁶² Physical Activity Guidelines for Americans, 2nd edition. (n.d.).

⁶³ Physical Activity—Healthy People 2030 | health.gov. (n.d.). Retrieved August 22, 2022, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/physical-activity>

⁶⁴ Parks and Community Centers in Fort Bend County. (n.d.). Google My Maps. Retrieved September 30, 2022, from <https://www.google.com/maps/d/viewer?mid=1QzwT5wd6srOf7shzHJfx2DgUizpeW1tp>

Access to exercise opportunities is higher in Fort Bend than in Texas. There was a decrease in access in 2018 by 10%, then an increase in access in 2019 by 8% in Fort Bend.

Thirty-six percent (36.4%) of Key Informant interviewees said that community centers and free places to exercise are missing in Fort Bend County. The PINNACLE Senior's Center was highlighted as an excellent community resource; however, it is not accessible to many residents because the location is on the far east side of the county. 18.2% of Key Informants mentioned that there were not enough parks for residents to access in order to address health. There are challenges to maintaining healthy lifestyles because in some areas there are limited safe, walkable areas.



Related Healthy People 2030 Objectives

Reduce the proportion of adults who do no physical activity in their free time

Target: 21.2%

FBC Status: Not met

Increase the proportion of adults who do enough aerobic physical activity for substantial health benefits

Target: 59.2%

FBC Status: Not met

Increase the proportion of adults who do enough aerobic physical activity for extensive health benefits

Target: 42.3%

FBC Status: Not met

Increase the proportion of adults who do enough muscle-strengthening activity

Target: 32.1%

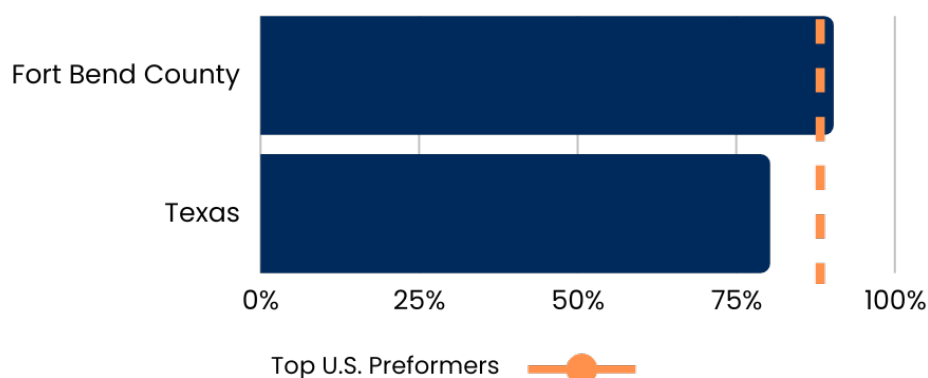
FBC Status: Not measured

Increase the proportion of adults who do enough aerobic and muscle-strengthening activity

Target: 28.4%

FBC Status: Not measured

Access to Exercise Opportunities, 2010 and 2021

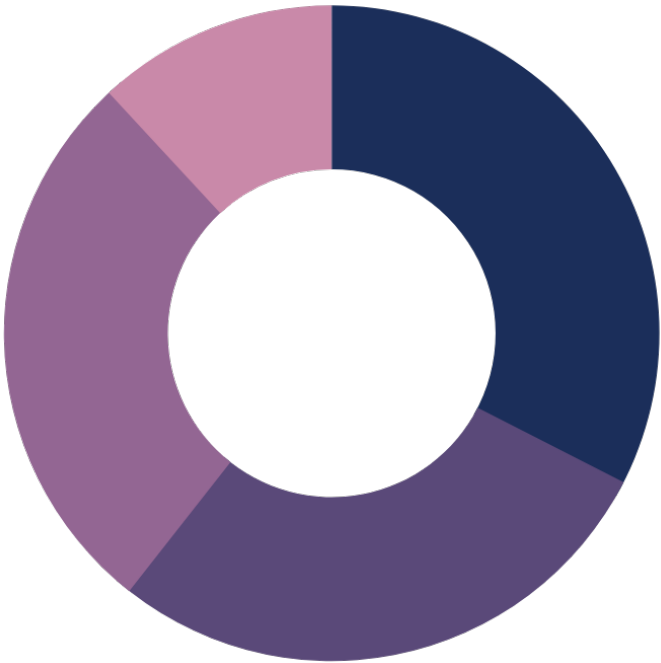
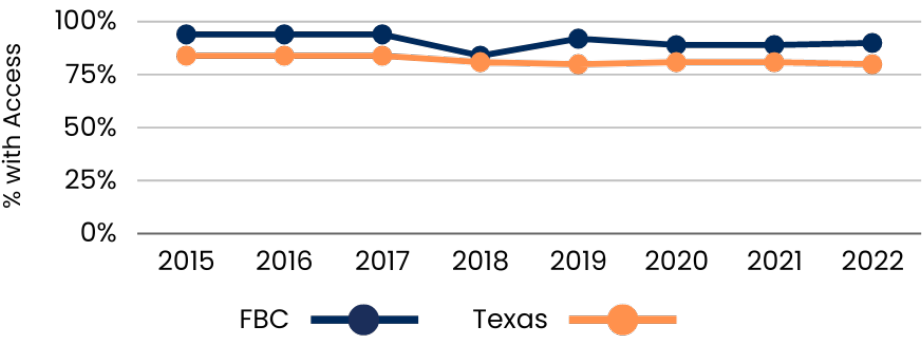


Thirty-nine percent (39.1%) of survey respondents identified “lack of exercise” as the most concerning unhealthy behavior in their community. At least 60% of survey respondents are not meeting the current Physical Activity Guidelines for Americans of at least 150 minutes of moderate-intensity aerobic activity. Healthy People 2030 has set target percentages related to physical activity which have also not been met.

Thirty-six percent (36.4%) of interviewees suggested that increasing outdoor safety and accessibility will improve health and quality of life. These suggestions included connecting the different parks within the

county with a trail system and adding sidewalks and streetlights. One Key Informant spoke about how the recent improvements and additional sidewalks and streetlights in the North Richmond area has increased children playing outside and people walking.

Percentage with Access to Exercise Opportunities, 2015–2022



In the last week, how many times did you participate in deliberate exercise, (such as jogging, walking, golf, weightlifting, fitness classes) that lasted for at least 30 minutes or more?

- 1 to 2 days 32.5%
- 3 to 5 days 29.7%
- More than 5 days 7.7%
- None 3.3%

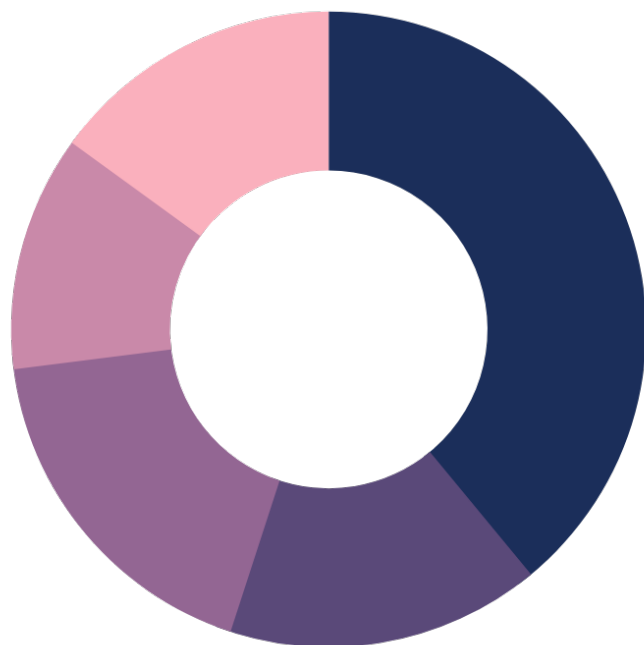
Nutrition and Diet

Healthy People 2030 has set objectives focused on helping people get the recommended amounts of healthy foods and nutrients to reduce the risk for chronic diseases and achieve and maintain good health throughout all stages of the lifespan.⁶⁵ Depending on age and sex, the CDC recommends that adults eat 1.5 –2 cups of fruit and 2–3 cup of vegetables per day.⁶⁶ Roughly only eight percent (7.7%) of survey respondents reported having enough servings of fruits and/or vegetables a day.

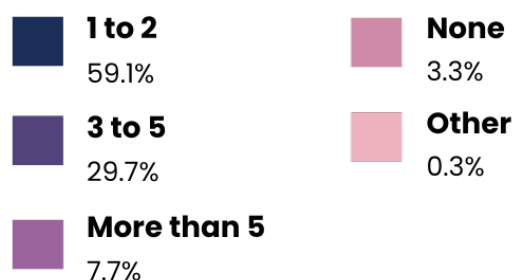
Related Healthy People 2030 Objectives	
Increase fruit consumption by people aged 2 years and over	
Target:	0.56 cup equivalents per 1,000 calories
FBC Status:	Not measured

⁶⁵ Nutrition and Healthy Eating—Healthy People 2030 | health.gov. (n.d.). Retrieved February 7, 2023, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/nutrition-and-healthy-eating>

⁶⁶ Dietary Guidelines for Americans, 2020–2025. (n.d.). 164.



On a typical day, how many servings of fruits and/or vegetables do you have?



The most common theme amongst Key Informants about challenges faced by the community to maintain healthy lifestyles was related to healthy food including access to healthy food and education about what healthy foods to eat. Key Informants shared that there are places in the County where there are food deserts or the only place to buy food is at a Dollar General. In addition, there is a lack of understanding about what foods are healthy to eat and even when people are aware of healthy food choices, options for healthy food is more expensive than unhealthy foods such as fast food. 41.5% of survey respondents indicated that nutrition, physical activity and wellness health education are needed in the community. Over one quarter (27%) of interviewees suggested improving access to healthy food, having more community gardens, or offering healthy cooking classes.

Unsafe Sex

One way to measure rates of unsafe sex is to look at the rates of babies born to teenage mothers. Babies born to teenaged mothers are more likely to be premature, have low birth weight, and have an increased risk of infant mortality.⁶⁷ Having a baby may also impact teen mothers' health and education and job opportunities. Healthy People 2030 has set a target of reducing teen pregnancies to 31.4 pregnancies per 1,000.

From 2016 and 2020, the teen birth rate in Fort Bend County has been lower than in Texas and the United States. There has been an overall general decrease in births to teenaged mothers, however there was a slight increase in 2020. In 2020, the birth rate in Fort Bend County was 8.19 per 1,000.⁶⁸

Related Healthy People 2030 Objectives

Increase vegetable consumption by people aged 2 years and older

Target: 0.84 cup equivalents per 1,000 calories

FBC Status: Not measured

Increase consumption of dark green vegetables, red and orange vegetables, and beans and peas by people aged 2 years and over

Target: 0.33 cup equivalents per 1,000 calories

FBC Status: Not measured

Increase whole grain consumption by people aged 2 years and over

Target: 0.62 oz. equivalents per 1,000 calories

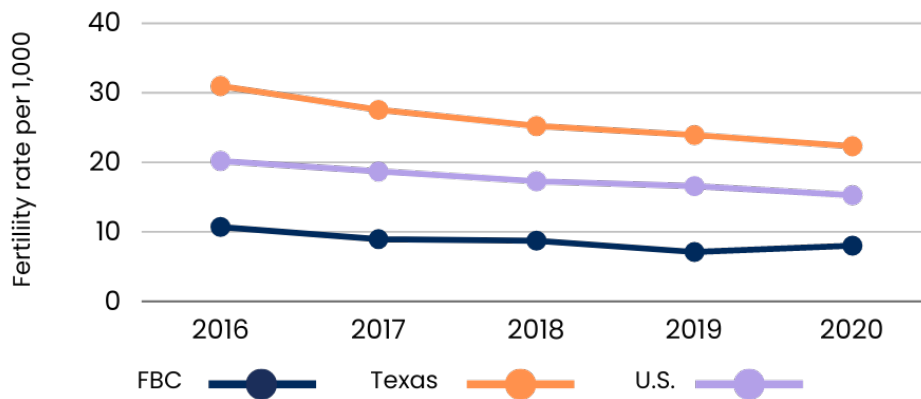
FBC Status: Not measured

⁶⁷ Reduce pregnancies in adolescents—FP-03—Healthy People 2030 | health.gov. (n.d.). Retrieved July 26, 2022, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/family-planning/reduce-pregnancies-adolescents-fp-03>

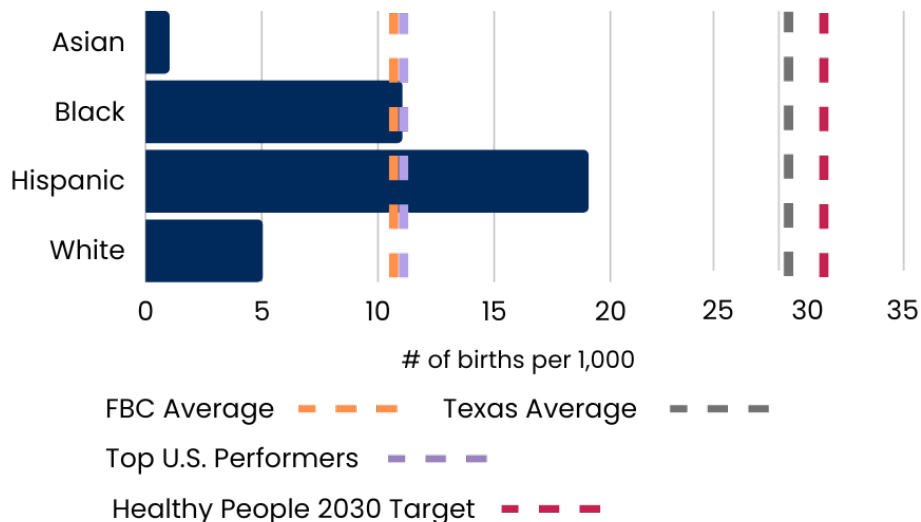
⁶⁸ Natality Information. (n.d.). Retrieved February 6, 2023, from <https://wonder.cdc.gov/natality.html>

While Fort Bend overall is performing very well, there are much higher rates of Hispanic and Black babies born to teenaged mothers than from the White and Asian populations.¹⁰

Teen Birth Fertility Rate per 1,000 population, 2016–2020



Number of births per 1,000 female population ages 15–19 in Fort Bend County by Race/Ethnicity, 2014–2020



Related Healthy People 2030 Objectives

Reduce pregnancies in adolescents

Target: 31.4 per 1,000

FBC Status: Met

Increase the proportion of adolescent females at risk for unintended pregnancy who use effective birth control

Target: 70.1%

FBC Status: Not measured

Increase the proportion of adolescent males who used a condom the last time they had sex

Target: 81.3%

FBC Status: Not measured

Increase the proportion of adolescents who use birth control the first time they have sex

Target: 91.6%

FBC Status: Not measured

Increase the proportion of adolescents who get formal sex education before age 18 years

Target: 59.1%

FBC Status: Not measured

Seatbelt Use

Seatbelt use is the most effective method for reducing injuries and death caused by a motor vehicle crash. The Seat Belts Use Act of 1999 requires that the driver and passengers of private and public motor vehicles wear or use seat belt devices while inside a vehicle.⁶⁹

Most of Fort Bend County residents reported using a seatbelt. Adult females (98.1%) reported a slightly higher seatbelt use compared to males (93.1%).⁷⁰

Related Healthy People 2030 Objectives

Reduce the proportion of deaths of car passengers who weren't buckled in

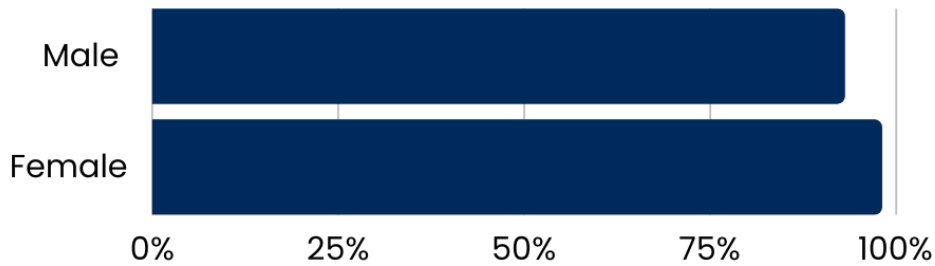
Target: 41.9%

FBC Status: Not measured

⁶⁹ Seat Belts Use Act of 1999 | Republic Act. (n.d.). Retrieved September 19, 2022, from <https://republicact.com/docs/statute/974/ra-8750-seat-belts-use-act-1999>

⁷⁰ Texas Behavioral Risk Factor Surveillance System (BRFSS), 2016, 2018, & 2020

Seatbelt Use by Sex in Fort Bend County, BRFSS, 2016–2020



Immunizations and Screenings

Both immunizations and health screenings can improve health outcomes. Immunizations help to eliminate the spread of vaccine preventable diseases. Screenings help to detect and treat health issues early.

Immunizations

Childhood immunization opt-out rate

The majority of students attending a child-care facility, public school, or private school have received childhood vaccines. Overall, Fort Bend has relatively low rates of students who have been allowed an exemption from immunizations for reasons of conscience (*conscious exemption*).

Fort Bend County school districts have a conscientious exemption rate ranging from 0.09% to 1.2%. Needville ISD has the highest rate followed by Fort Bend ISD, Stafford MSD, and Lamar CISD.⁷¹ In the 2018 – 2019 school year, Fort Bend County saw an increase of conscientious exemptions for students in kindergarten and 7th grade.

Related Healthy People 2030 Objectives

Maintain the vaccination coverage level of 2 doses of the MMR vaccine for children in Kindergarten

Target: 95.0%

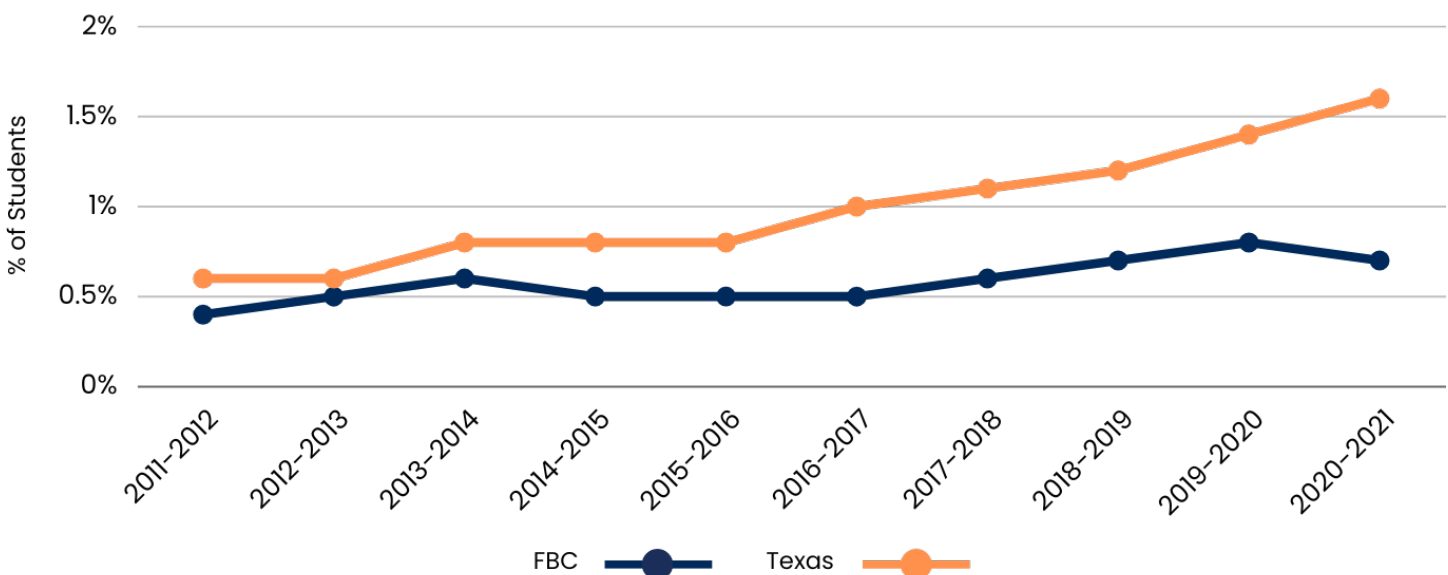
FBC Status: Met

Maintain the elimination of measles, rubella, congenital rubella syndrome, and polio

Target: 0 endemic cases

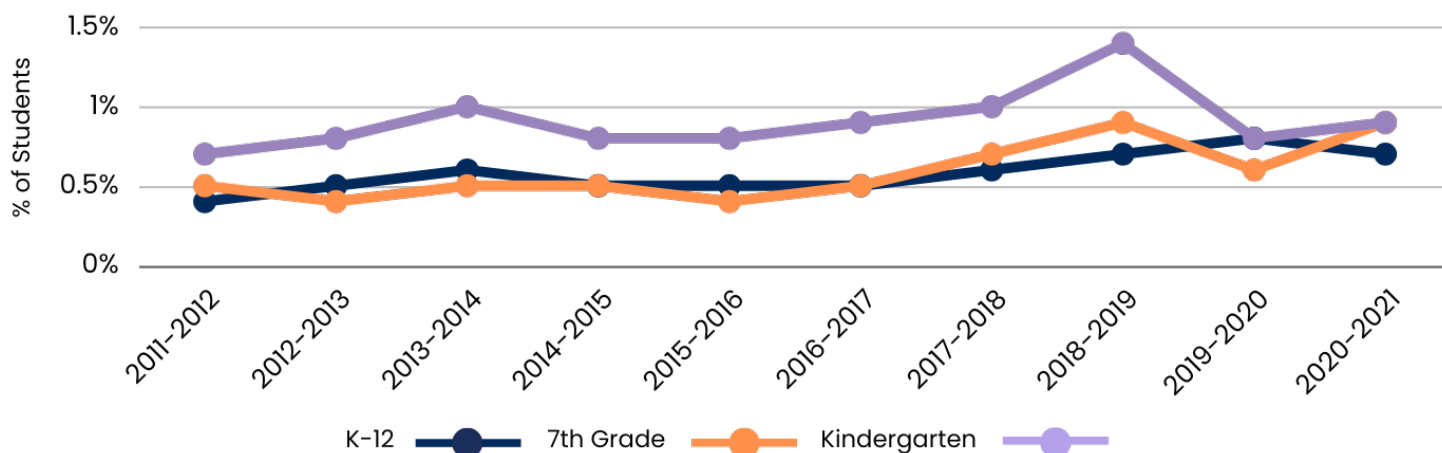
FBC Status: Met

K-12 Conscious Exemptions, County vs. State

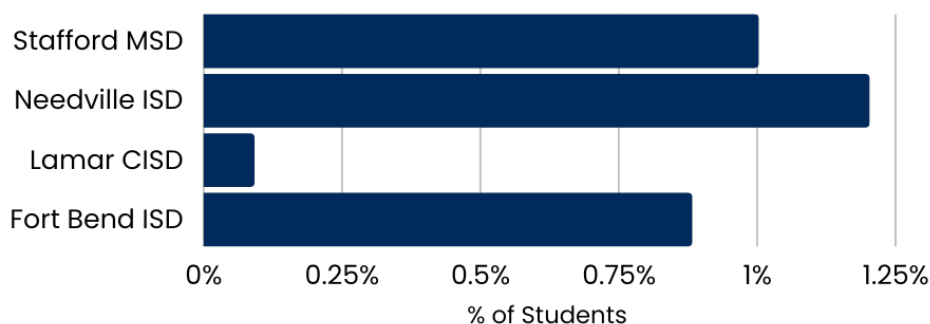


⁷¹ Conscientious Exemptions Data – Vaccination Coverage Levels. (2022). Texas Department of State Health Services. <https://www.dshs.texas.gov/immunize/coverage/Conscientious-Exemptions-Data.shtm>

Conscientious Exemptions by Grade Level in Fort Bend County



Filed Conscientious Exemptions in Fort Bend County by School District, 2020-2021

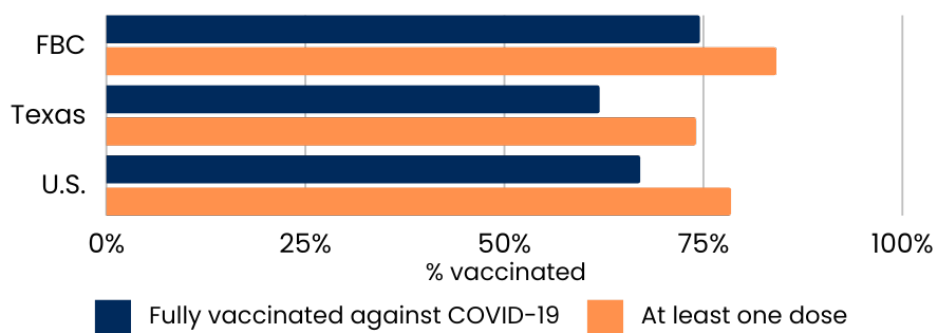


COVID vaccination

Vaccination is a critical prevention measure against the COVID-19 pandemic. As of September 19, 2022, there are four vaccines available in the U.S, including an updated bivalent booster.⁷² People who are fully vaccinated (1 dose or 2 doses depending on the vaccine) have lower risk of severe illness, hospitalization, and death from COVID-19.⁷²

COVID-19 Vaccination Rates

Updated September 7, 2022



⁷² CDC. (2020, February 11). COVID-19 Vaccination. Centers for Disease Control and Prevention. <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/overview-COVID-19-vaccines.html>

Fort Bend County has a higher vaccination rate (74.5%) of individuals that are fully vaccinated (1 dose or doses, depending on the vaccination) compared to Texas (61.9%) and the U.S. (67.0%). The county also has a higher rate of individuals with at least one dose compared to Texas (74.0%) and the U.S. (78.4%).

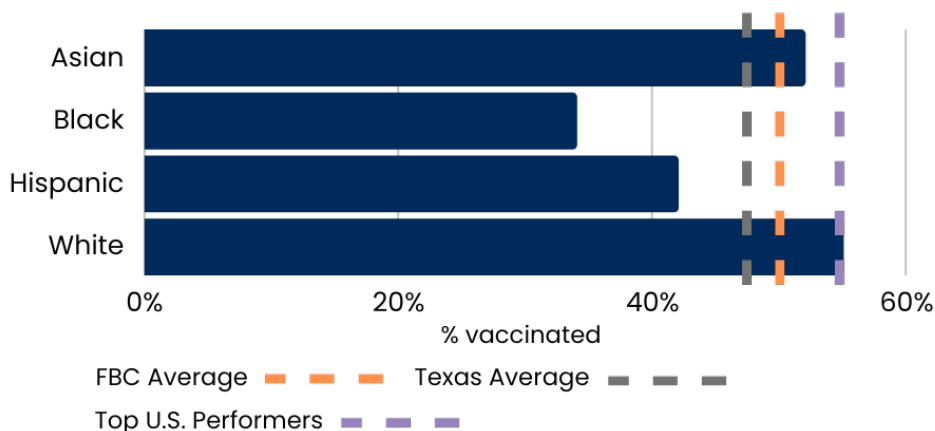
Flu vaccination rate

Healthy People 2030's target is to have 70% of people vaccinated against seasonal influenza. Although millions of people get the flu every year, the flu vaccine can prevent days lost to sickness and complications.⁷³

In Fort Bend County, 50% of fee-for-service (FFS) Medicare enrollees had an annual flu vaccination, performing better than Texas (46%) but not quite as well as Top U.S. Performers (55%). Overall, Fort Bend County is getting better for this measure with a general increase between 2012 and 2019.¹⁰ When looking at flu vaccinations in the county by race/ethnicity, a lesser percentage of Black Medicare enrollees (34.0%) received the vaccination in 2019.

Related Healthy People 2030 Objectives	
Increase the proportion of people who get the flu vaccine every year	
Target:	70.0%
FBC Status:	Not met

Flu Vaccinations Among Medicare Enrollees by Race/Ethnicity in Fort Bend County, 2019



Preventative Screenings

Identifying breast cancer early can help prevent breast cancer deaths in women. The current recommendation is for women ages 50 – 74 to get a mammogram every 2 years or earlier depending on family history. Healthy People 2030's target is for 80.5% of women to get a breast cancer screening (*mammography*) within two years.⁷⁴

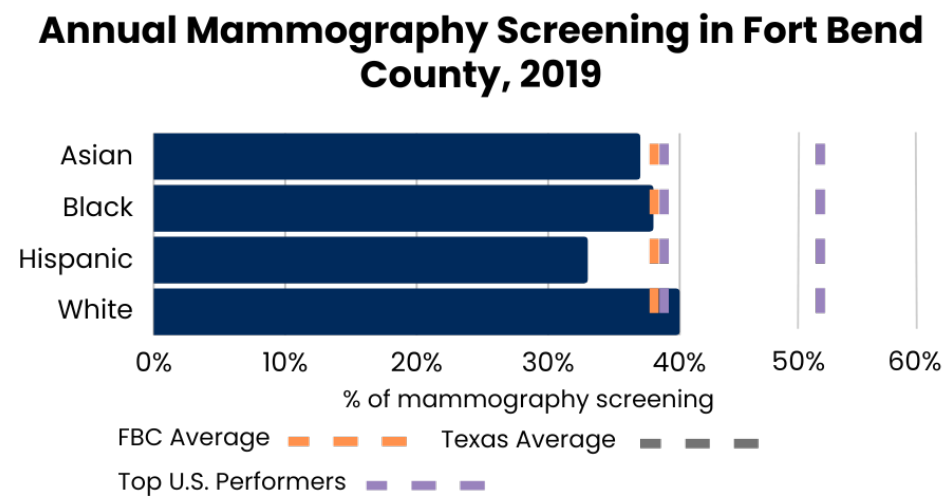
In Fort Bend County, 38% of female Medicare enrollees ages 65–74 received an annual mammography screening in 2019, compared to 39% in Texas and 52% in Top U.S. Performers. Overall, the county is improving in this measure, with a general increase between 2012 and

Related Healthy People 2030 Objectives	
Increase the proportion of females who get screened for breast cancer	
Target:	80.5%
FBC Status:	Not met

⁷³ Increase the proportion of people who get the flu vaccine every year—IID 09—Healthy People 2030 | health.gov. (n.d.). Retrieved August 22, 2022, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/vaccination/increase-proportion-people-who-get-flu-vaccine-every-year-iid-09>

⁷⁴ Increase the proportion of females who get screened for breast cancer—C-05—Healthy People 2030 | health.gov. (n.d.). Retrieved July 26, 2022, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/cancer/increase-proportion-females-who-get-screened-breast-cancer-c-05>

2019.¹⁰ However, there are disparities among different race and ethnicity groups. Hispanic women have the lowest percentage of mammography screenings (33%) compared to Asian, Black, and White women.



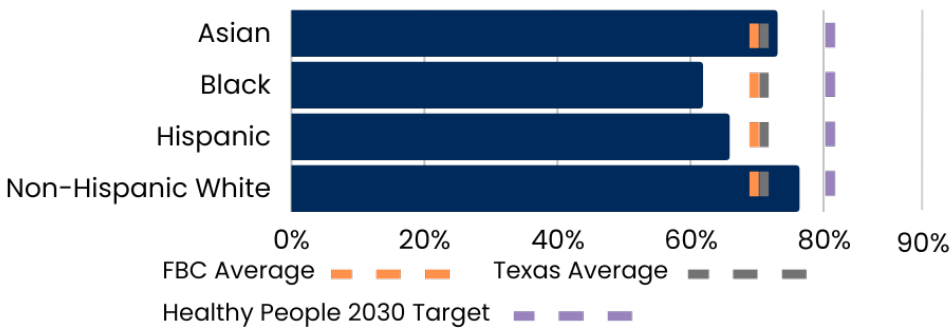
Prenatal Care

Healthy People 2030 has the goal of preventing pregnancy complications and maternal deaths and improve women’s health before, during and after pregnancy. Pre-pregnancy and prenatal care can help reduce maternal mortality, increase the success of having a healthy baby and decrease risks of the infant having long-term health issues.

The latest data show that Fort Bend County has a three times greater percentage of births to women receiving late or no prenatal care (30%) compared to Texas (10%) and five times greater percentage than the US (6%). Yet, between 2013 and 2018, there has been a general decrease.⁷⁵

Related Healthy People 2030 Objectives	
Increase the proportion of pregnant women who receive early and adequate prenatal care	
Target:	80.5%
FBC Status:	Not met

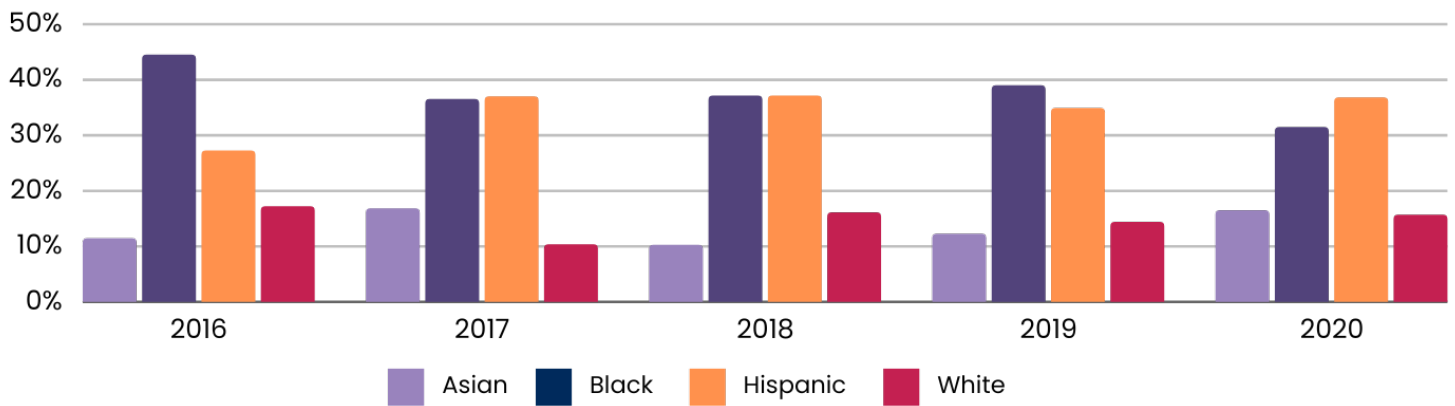
Percentage of Women in Fort Bend County who Received Early Prenatal Care, 2020



Women who are Black have a higher percentage of receiving late or no prenatal care followed by Hispanic, Asian, multiracial, and other races, and White women in both Texas and the County. Healthy People 2030 has

⁷⁵ Births to women receiving late or no prenatal care | KIDS COUNT Data Center. (n.d.). Retrieved September 30, 2022, from <https://datacenter.kidscount.org/data/tables/3200-births-to-women-receiving-late-or-no-prenatal-care?loc=45&loct=5>

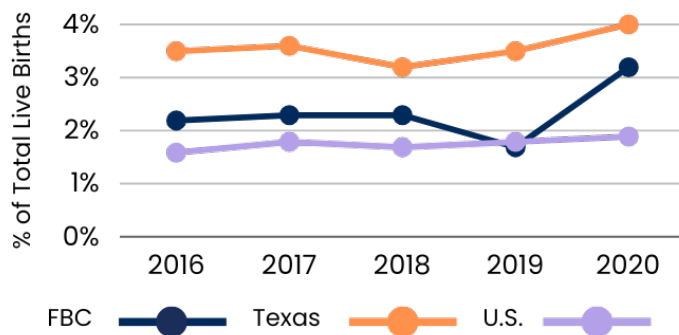
% of Total Births who had no Prenatal Care by Race/Ethnicity in Fort Bend County



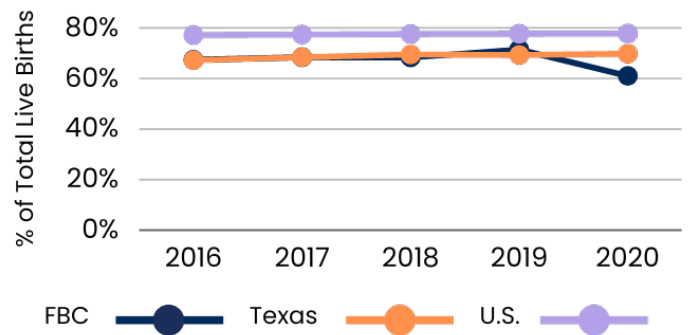
the goal on increasing the proportional of pregnant women who received early and adequate prenatal care.⁷⁶

Of particular note in Fort Bend is the increase between 2019 and 2020 of births not receiving any prenatal care. This data is also aligned with a 10% decrease in the number of women receiving early (*first trimester*) prenatal care in Fort Bend County between 2019 to 2020.^{77,12}

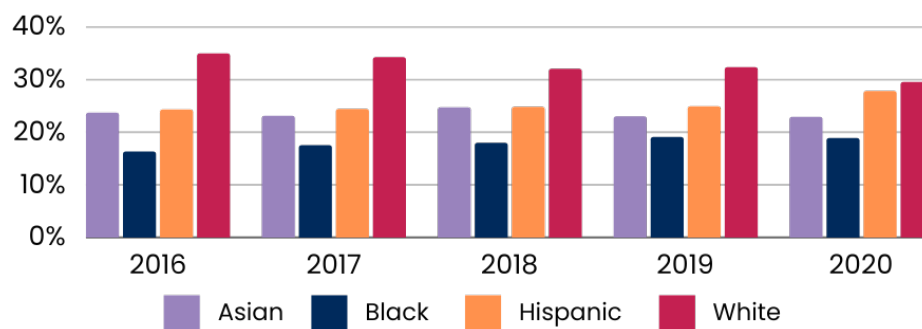
No Prenatal Care, 2016-2020



Early Prenatal Care, 2016-2020



% of Total Birth who had Early Prenatal Care by Race/ Ethnicity in Fort Bend County

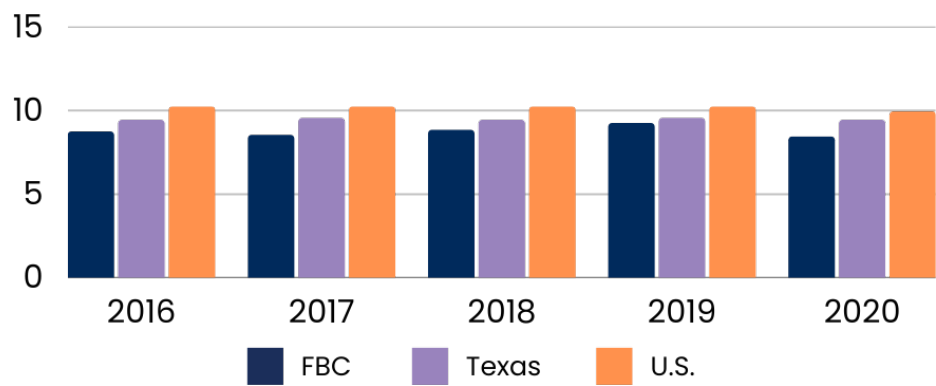


⁷⁶ Healthy People 2030. (2022). Office of Disease Prevention and Health Promotion. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/pregnancy-and-childbirth/increase-proportion-pregnant-women-who-receive-early-and-adequate-prenatal-care-mich-08>

⁷⁷ Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System.

The average number of prenatal visits for babies born to teenaged mothers have fluctuated slightly over the past five years. Unfortunately, pregnant teens in Fort Bend have accessed prenatal care at a lower rate, compared to pregnant teens in Texas and the US.¹²

Average Number of Prenatal Visits Among Teen Births (Ages 15–19), 2016–2020

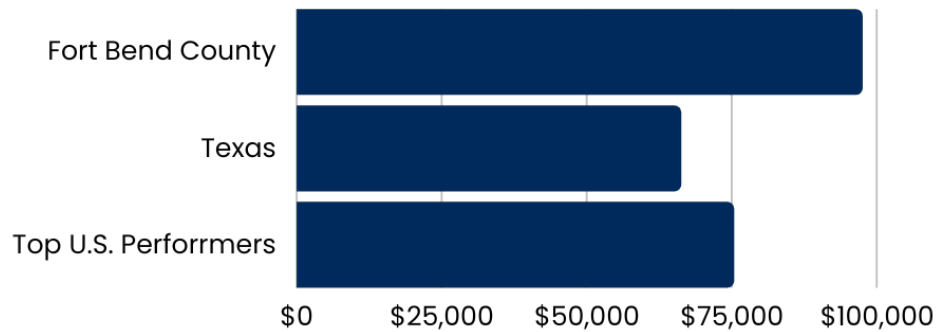


Social, Community, and Economic Factors

Income

In 2020, the median household income in Fort Bend County was \$97,200, which is about \$30,000 greater than that of Texas (\$66,000) and about \$20,000 greater than that of Top US Performers (\$75,100). The household median income in Fort Bend County ranged from \$75,200 to \$128,000, a difference of \$52,800. The American Indian and Alaska Native population had the highest median income (\$128,000) followed by the Asian (\$120,000), White (\$119,300), Black (\$80,300) and Hispanic (\$75,200) population.¹⁰ People who are Black or Hispanic living in Fort Bend County make about 20–25% less than the population as a whole.

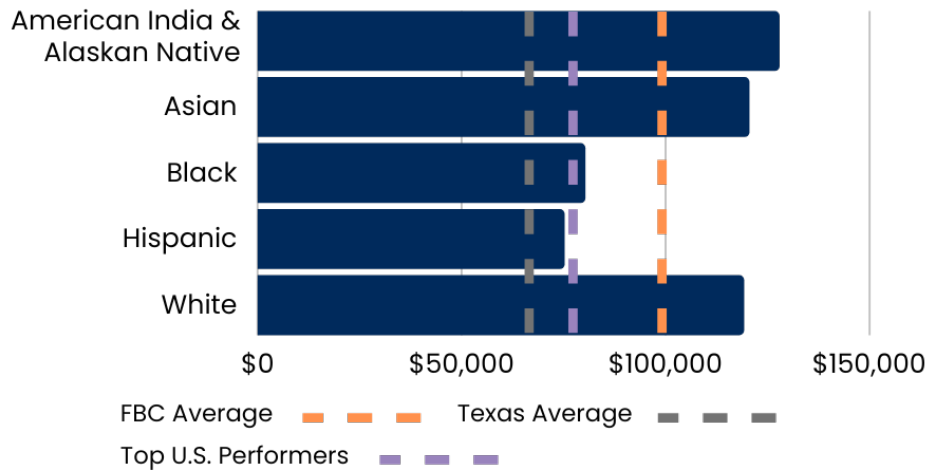
Median Household Income, 2020



Income inequality is defined as the ratio of household income at the 80th percentile to income at the 20th percentile. A higher inequality ratio indicates greater division between the top and bottom ends of the income spectrum. In Fort Bend County, the ratio is 4.0 which is less than Texas (4.8) and greater than the Top U.S. Performers (3.7). Income inequality has a strong causal connection to health, independent of the income of individuals. Communities with a greater income inequality can experience a loss of social connectedness, as well as decreases in trust, social support, and a sense of community for all residents.⁷⁸

⁷⁸ Income Inequality. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/income/income-inequality>

Median Household Income by Race/Ethnicity in Fort Bend County, 2020



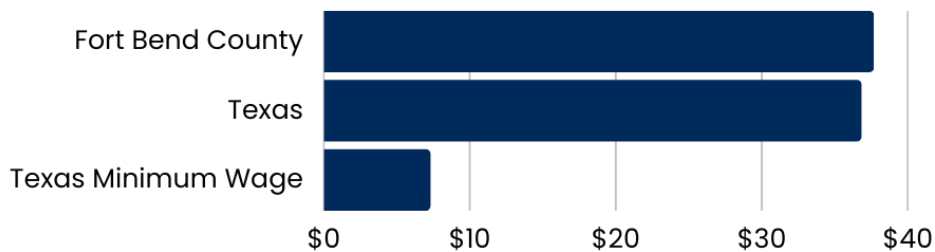
The gender pay gap refers to the ratio of women’s median earnings to men’s median earnings for all full-time, year-round workers, presented as “cents on the dollar.” Unequal pay by gender can impact health and well-being. Women who earn less than their male counterparts are more likely to suffer from mental health issues.⁷⁹ According to the American Community Survey (ACS) 5-year estimates, the gender pay gap in Fort Bend County is 0.75. This ratio is less than Texas’ (0.80) and the Top US Performers (0.90). This means that Fort Bend County is behind in this area.

Ratio of Women's Median Earning to Men's Earning: Cents on the Dollar, 2016–2020



Living wage is defined as the hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children. In 2021, a household (*one adult and two children*) in Fort Bend County would need to earn \$37.62.¹⁰ This is less than the living wage for Texas (\$36.77) and about 5 times greater than the current minimum wage of \$7.25.

Living Wage vs. Minimum Wage



⁷⁹ Gender Pay Gap*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/income/gender-pay-gap>

Income Inequality		
Fort Bend County	Texas	Top U.S. Performers
4.0	4.8	3.7

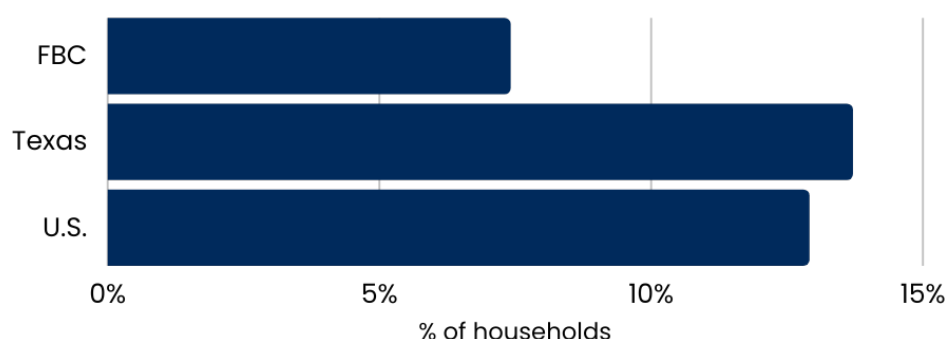
Ratio of household income at the 80th percentile to income at the 20th percentile, 2016–2020.

Poverty Level

Households

Five-year estimates have identified that 7.4% of Fort Bend County households have income below the poverty level.¹¹

Income Below Poverty Level, ACS 2015–2019



Related Healthy People 2030 Objectives

Reduce the proportion of people living in poverty

Target: 8.0%

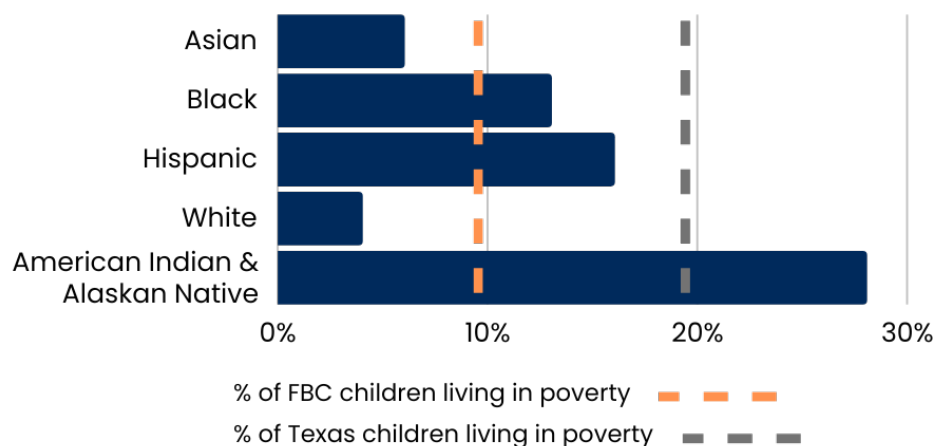
FBC Status: Met

Children in Poverty

Children living in low-income households have an increased risk of injury as a result of unsafe environments and are susceptible to more frequent and severe chronic conditions and their complications, such as asthma, obesity, diabetes, ADHD, behavior disorders, and anxiety, than children living in high income households.⁸⁰ The rates of child poverty have slightly decreased nationally, state-wide, and locally over the past two decades. In 2020, 9% of Fort Bend County children lived in poverty. This number is the same as the top U.S. performing counties and is much better than Texas overall, which is at 19%. However, there are significant disparities between race and ethnicity groups. American Indian and Alaskan Native children in FBC have seven times the rate of poverty compared to white FBC children. Hispanic and Black FBC children have three and four times the rate of poverty, respectively, compared to white children.¹⁰

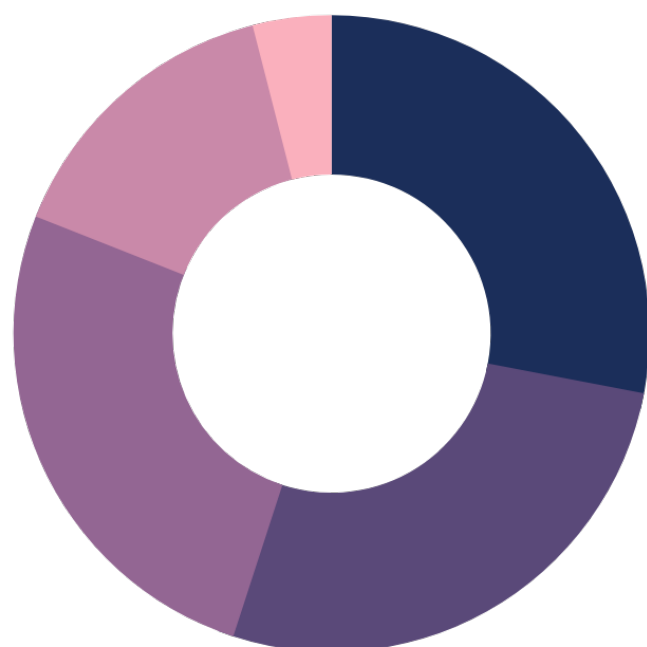
⁸⁰ Children in Poverty. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/income/children-in-poverty>

% of FBC Children Living in Poverty by Race/Ethnicity

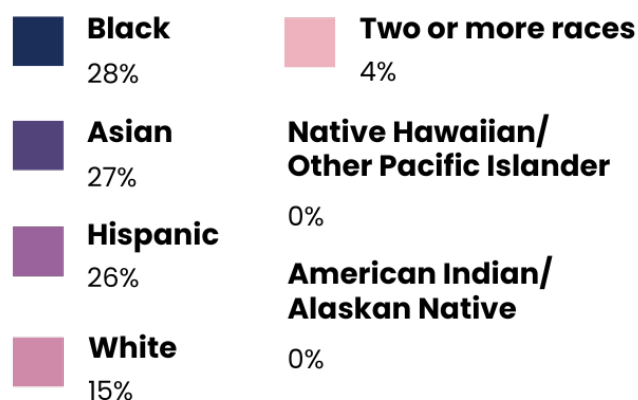


Education Attainment

Within the Fort Bend County jurisdiction are five Independent School Districts (ISDs), Fort Bend ISD (FBISD), Katy ISD, Lamar Consolidated ISD (LCISD), Needville ISD (NISD), and Stafford Municipal School District (SMSD).⁸¹ From 2016 to 2021, all school districts saw overall growth in student enrollment with the exception of SMSD, which had a decrease of 6.7%. LCISD had the highest increase in enrollment from 2016 to 2021 with an overall increase of 18.5%.⁸² When assessing the enrollment of Pre-Kindergarten students between the 2019–2021 school year, the enrollment decreased by 16.2%. This may have been an effect of the beginning of the COVID-19 pandemic where majority of schools

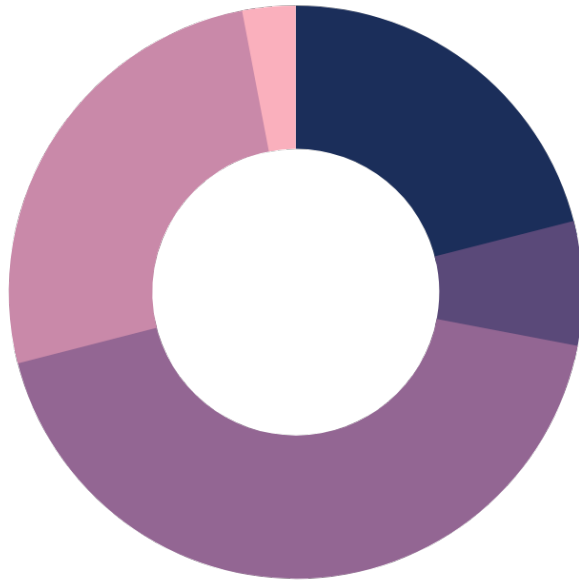


FBISD Enrollment by Race/Ethnicity, 2020–2021 School Year

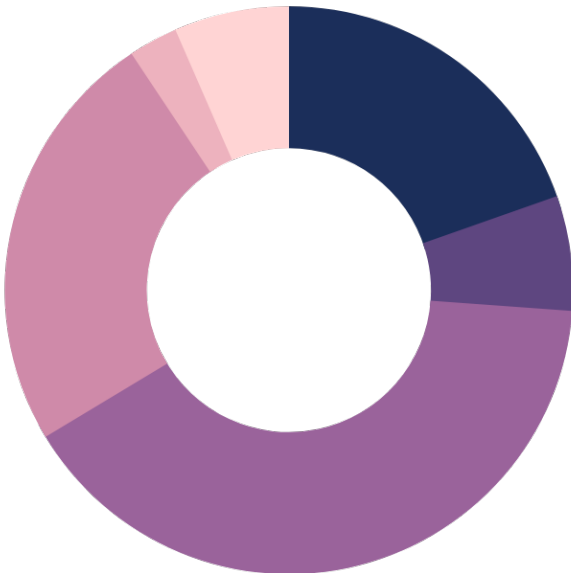
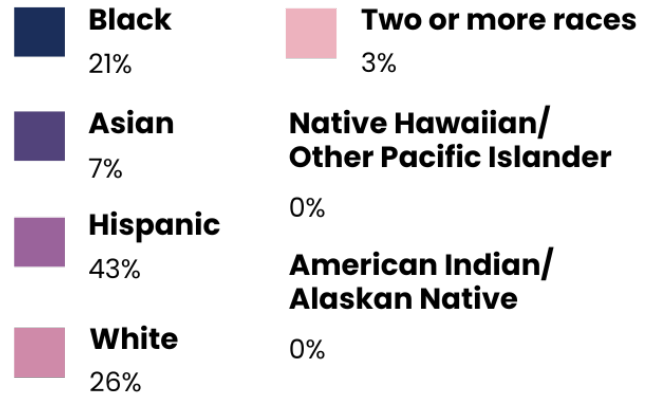


⁸¹ Texas Education Agency—Student Enrollment Reports. (n.d.). Retrieved February 8, 2023, from <https://rptsvr1.tea.texas.gov/adhocrpt/adste.html>

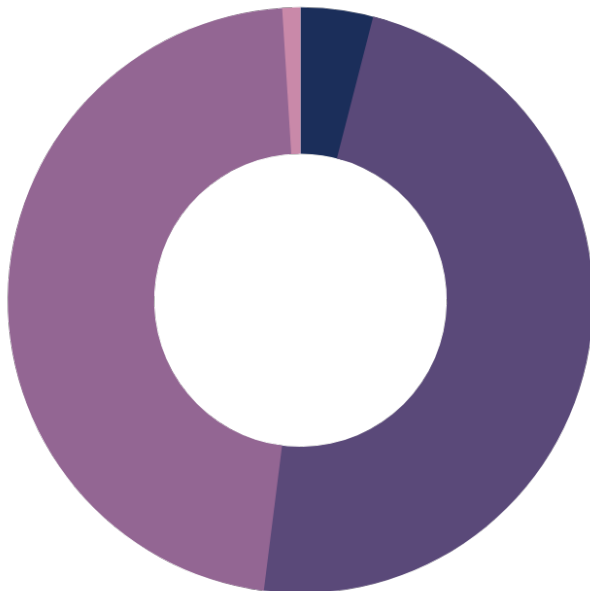
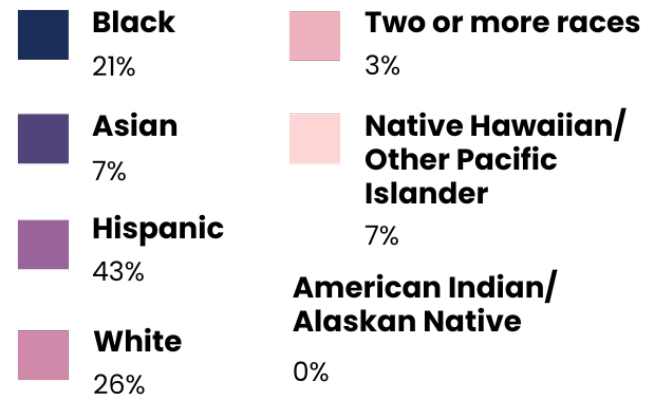
⁸² PEIMS Student Enrollment Data for 2016–2021. (2007–2020). Texas Education Agency



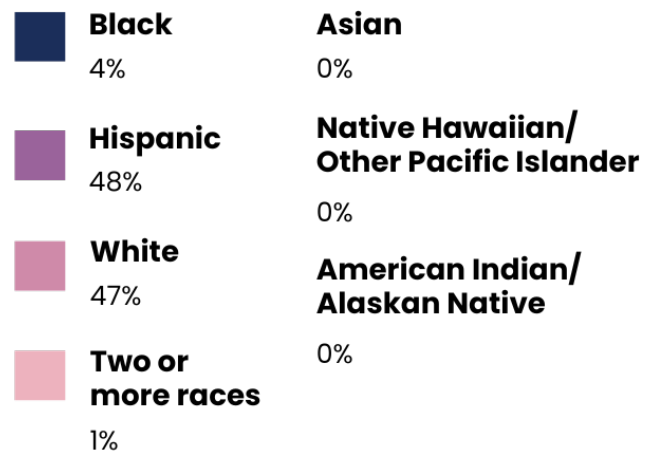
**LCISD Enrollment by Race/Ethnicity,
2020-2021 School Year**



**KISD Enrollment by Race/Ethnicity,
2020-2021 School Year**



**NISD Enrollment by Race/Ethnicity,
2020-2021 School Year**



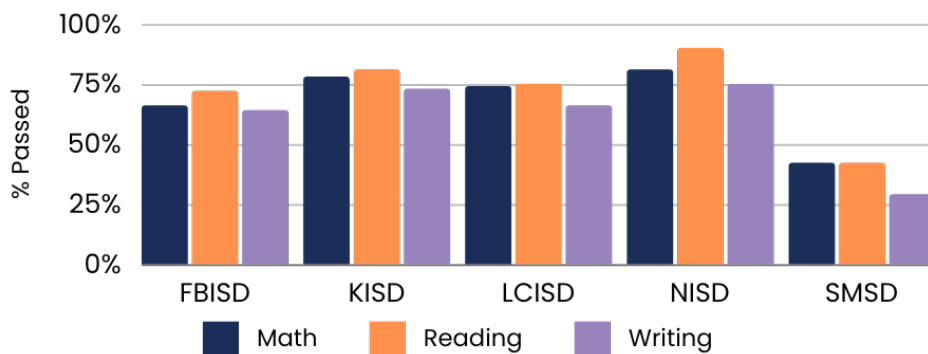
were closed for some time and a few had remote options for students. Despite the decrease between 2019 and 2021, the overall enrollment of Pre-Kindergarten students in Fort Bend County in the last 5 years (2016 to 2021) increased by 14.7%.⁸² Each school district has a unique race/ethnicity breakdown.

Standardized Test Scores

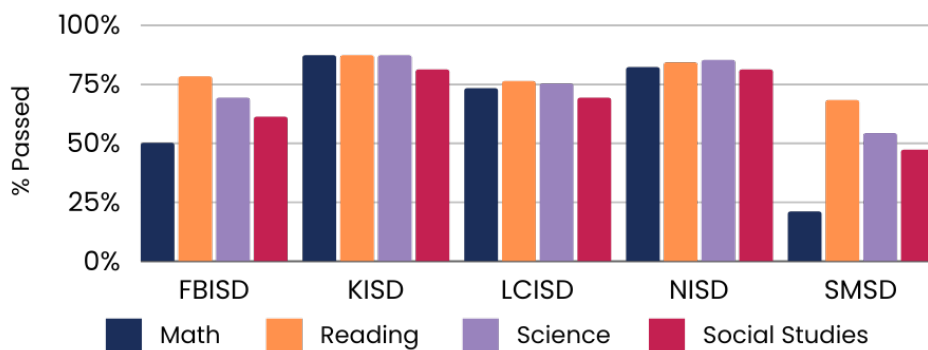
Research shows that strong academic performance at all grade levels is associated with healthy behaviors and better health outcomes through increased educational opportunities and employment.^{83,84} Healthy People 2030 has 4 objectives related to school achievement and stander.

Although nearly all Fort Bend County school districts surpassed the Healthy People 2030 targets for grade 4 and 8, 2021 STAAR Subject Test data demonstrate that within the county there are differences in the school districts on standardized test scores. SMSD had the lowest pass rates in comparison other school districts across all subject tests and grades.⁸⁵

% of Grade 4 Students who Passed STAAR Subject Tests by School District, 2021



% of Grade 8 Students who Passed STAAR Subject Tests by School District, 2021



Related Healthy People 2030 Objectives

Increase the proportion of 4th-graders with reading skills at or above the proficient level

Target: 41.5%

FBC Status: Met

Increase the proportion of 4th-graders with math skills at or above the proficient level

Target: 43.1%

FBC Status: Met except for SMSD

Increase the proportion of 8th-graders with reading skills at or above the proficient level

Target: Research phase- no target set yet

FBC Status: -

Increase the proportion of 8th-graders with math skills at or above the proficient level

Target: Research phase- no target set yet

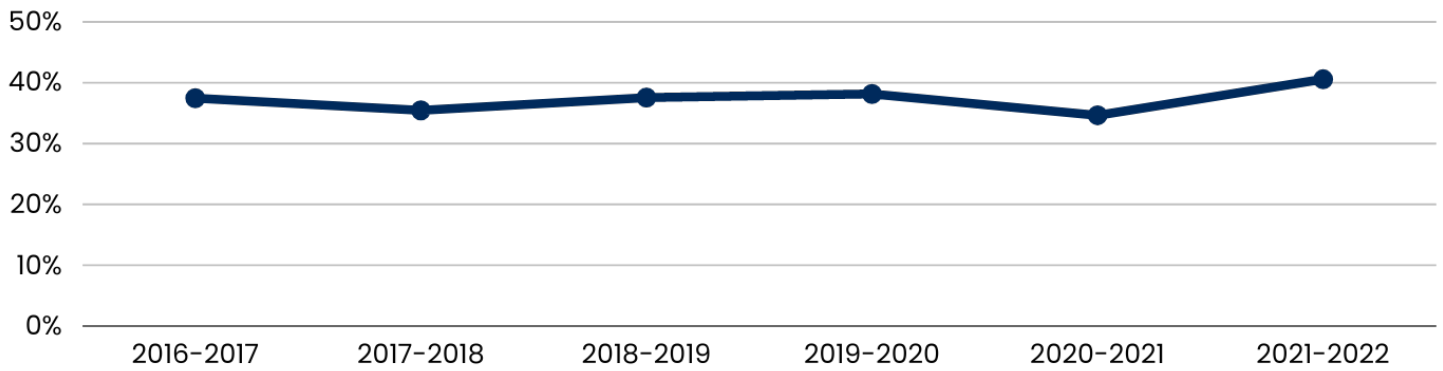
FBC Status: -

⁸³ Increase the proportion of 4th-graders with reading skills at or above the proficient level—AH 05—Healthy People 2030 | health.gov. (n.d.). Retrieved September 30, 2022, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/schools/increase-proportion-4th-graders-reading-skills-or-above-proficient-level-ah-05>

⁸⁴ Math Scores*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/education/math-scores>

⁸⁵ Program: STAAR 3–8, Report: Standard Summary. (2020) Data Interaction for Texas Student Assessments.

% of Economically Disadvantaged Students in Fort Bend County, 2016–2022



Economically Disadvantaged Students

According to the Texas Education Agency (TEA), economically disadvantaged students are students who qualify for free or reduced-price meals under the National School Lunch and Child Nutrition Program. In order to qualify for this program, family income should be below 130% (*free*) or between 130 and 185% (*reduced price meals*) of the Federal poverty level (*varies by family size*).⁸⁶

Research shows that children who are economically disadvantaged are more likely than students from wealthier backgrounds to have lower test scores, and they are at higher risk of dropping out of school. For some children, the effects of poverty on education present unique challenges in breaking the cycle of generational poverty.⁸⁷

The total number of students who are economically disadvantaged in Fort Bend County has steadily increased. From the 2016–2017 school year to the 2020–2021 school year, there has been a 27% increase. During the 2020–2021 school year, SMSD had the highest percent of economically disadvantaged students enrolled in their school at 70%, followed by LCISD (50%), and FBISD (42%).⁸⁸

At-Risk Students

From 2016 to 2021 there has been a slight increase (1%) in students identified as “at-risk” in Fort Bend County. To meet the definition of “at-risk” a student is said to meet a series of criteria that may lead to dropping out of school. These criteria include unsatisfactory performance on readiness tests or assessment instruments, not meeting average equivalent of a 70/100 in curriculum, placed in alternative education facilities, been expelled, on parole or probation, and history of previously dropping out amongst others.⁸⁹ School districts across the county have had various rates of at-risk students over the past several years.⁸⁸

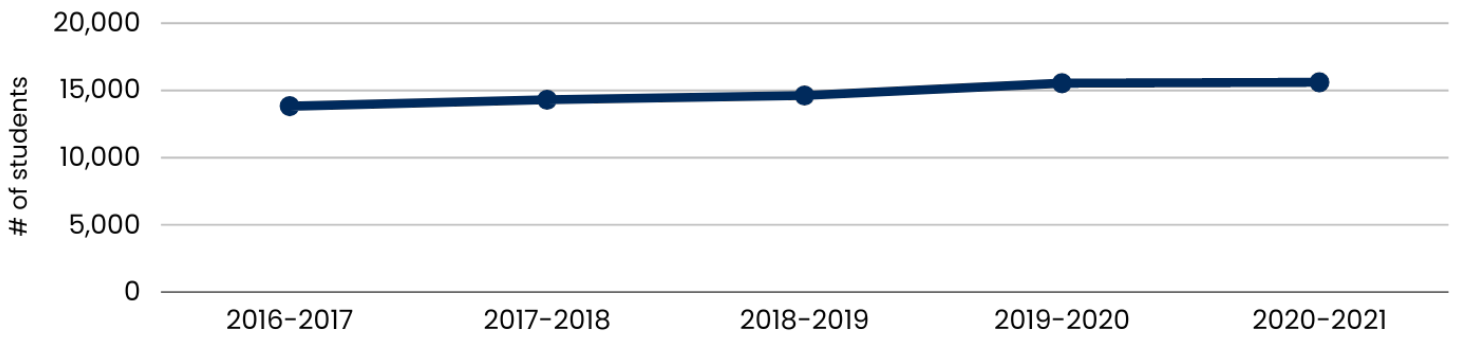
⁸⁶ Income Eligibility Guidelines | Food and Nutrition Service. (n.d.). Retrieved September 30, 2022, from <https://www.fns.usda.gov/cn/income-eligibility-guidelines>

⁸⁷ The Effects of Poverty on Education in the United States. (n.d.). Retrieved September 30, 2022, from https://www.childfund.org/Poverty-and-Education-in-the-US/?no_redirect=true

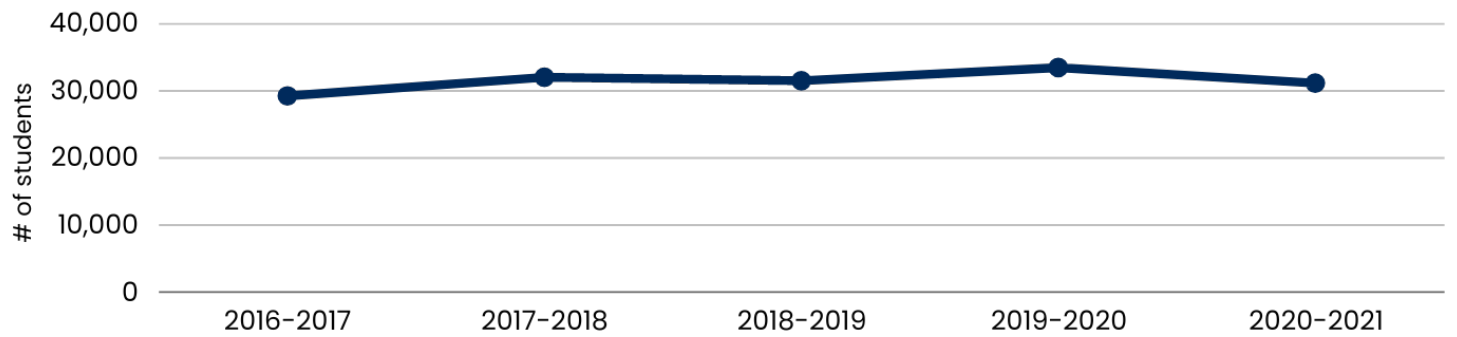
⁸⁸ Student Program and Special Populations Report. (2022). Texas Education Agency. <https://rptsvr1.tea.texas.gov/adhocrpt/adspr.html>

⁸⁹ Agency, T. E. (2020, January 15). Glossary of Acronyms. Texas Education Agency. <https://tea.texas.gov/about-tea/glossary-of-acronyms>

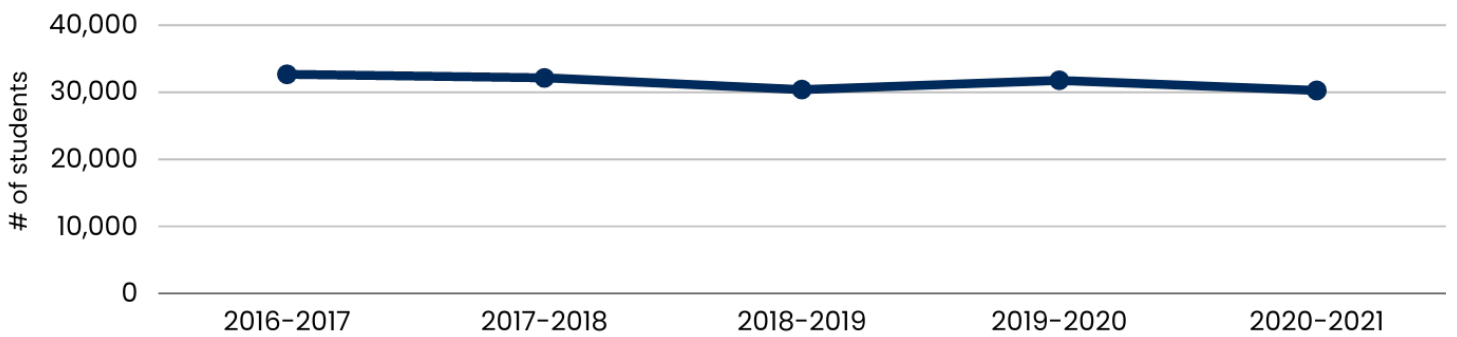
Lamar CISD At-Risk Student Population, 2016–2021



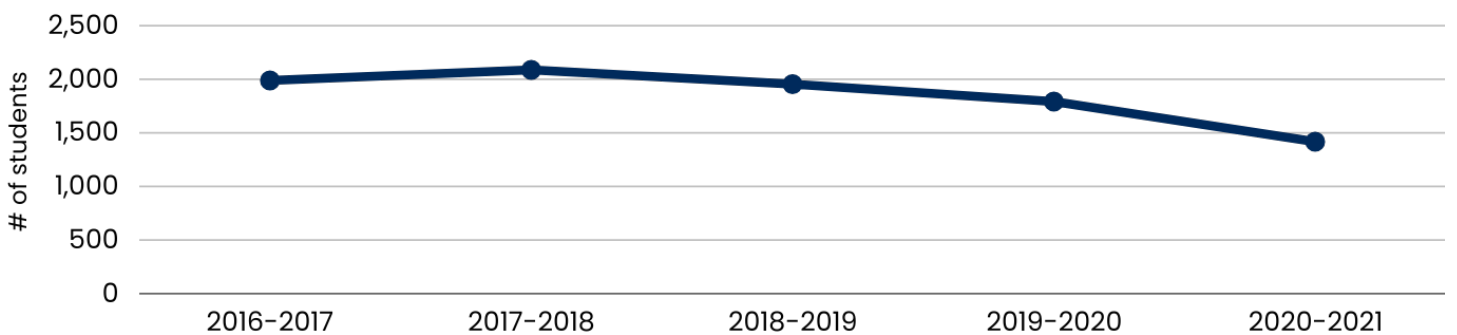
Katy ISD At-Risk Student Population, 2016–2021



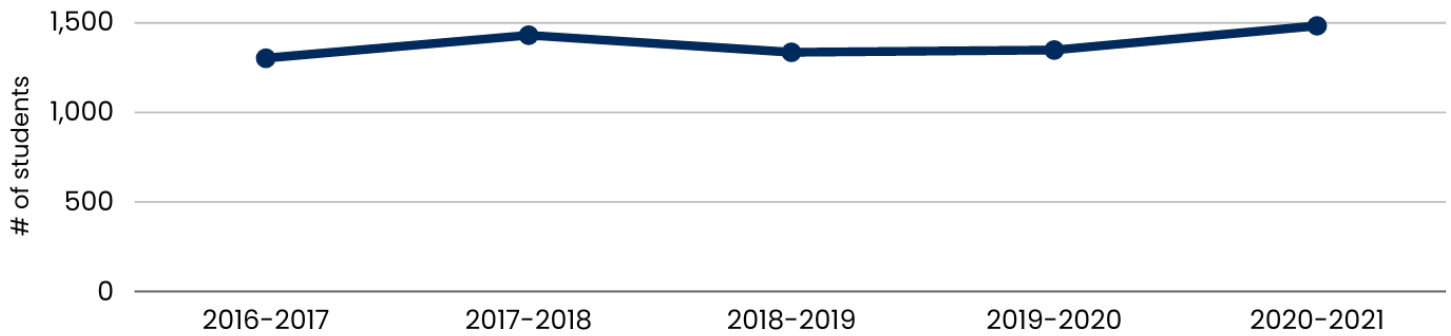
Fort Bend ISD At-Risk Student Population, 2016–2021



Stafford MSD At-Risk Student Population, 2016–2021



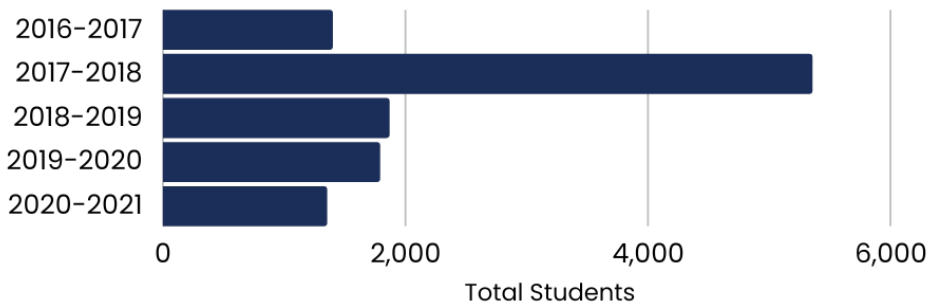
Needville ISD At-Risk Student Population, 2016–2021



Students Experiencing Homelessness

From 2016 to 2021 there was a 3.3% decrease in the overall students experiencing homelessness population in Fort Bend County, with a sharp increase in the 2017–2018 school year likely due to Hurricane Harvey.⁸⁸ A student is considered homeless if they lack a fixed, regular, and adequate nighttime residence.⁹⁰

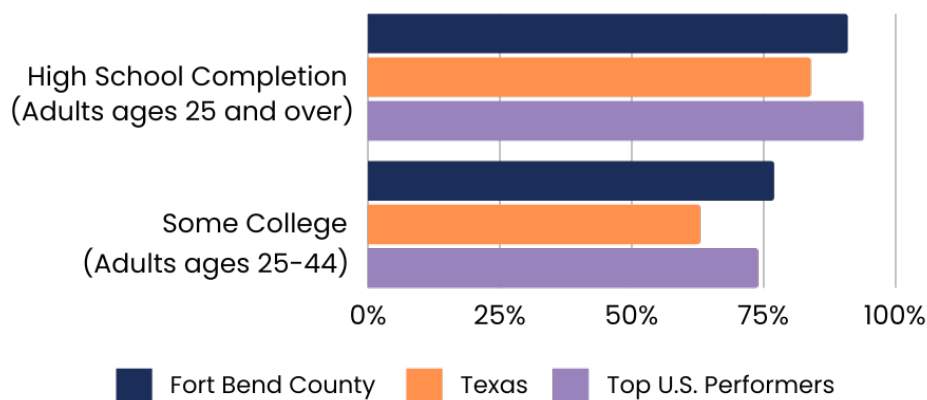
Students Experiencing Homelessness in Fort Bend County, 2016–2021



Educational Attainment

Residents of Fort Bend County have attained relatively high levels of education compared to Texas and the top 10% performing counties in the country.¹⁰

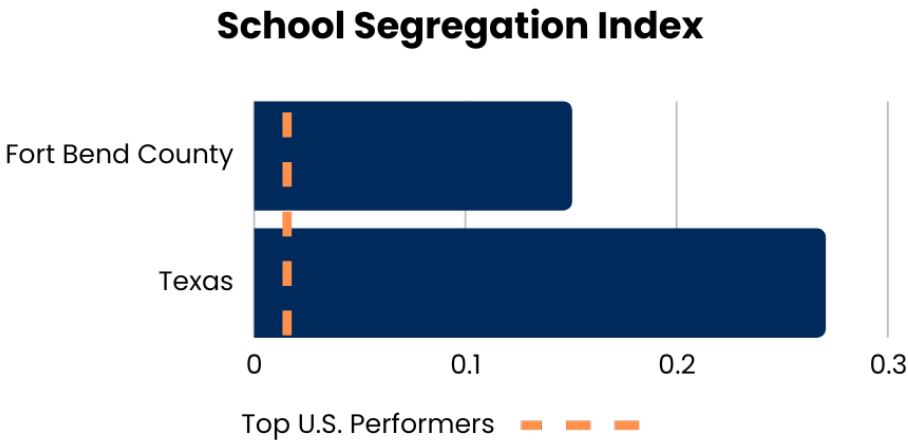
Educational Attainment



⁹⁰ McKinney-Vento Definition – National Center for Homeless Education. (n.d.). Retrieved February 8, 2023, from <https://nche.ed.gov/mckinney-vento-definition/>

School Segregation

The School Segregation Index shows the extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. The index ranges from 0 to 1 with lower values representing a school composition that approximates race and ethnicity distributions in the student populations within the county, and higher values representing more segregation.⁹¹

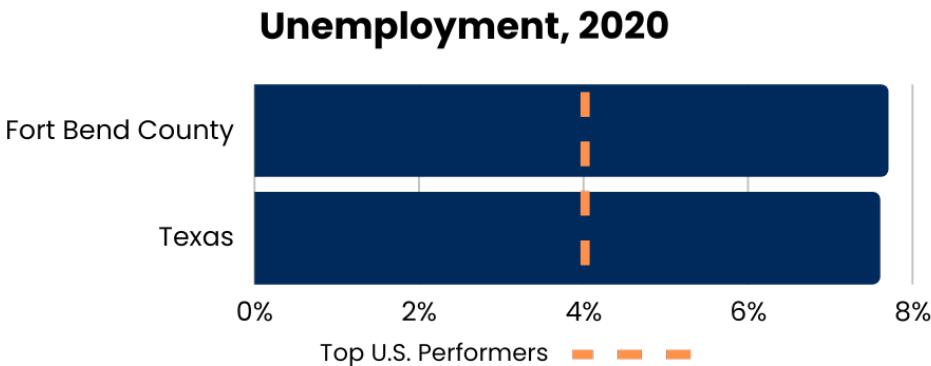


Fort Bend County’s index is about half of Texas’ at 0.15 but almost 7 times greater than the Top U.S. Performers (0.02). Studies show that racial/ethnic segregation in schools is negatively associated with achievement, college success, long-term employment, and income for students of color. School segregation leads to racial gaps in the identification of students who would benefit from special education, perpetuating racial gaps into adulthood.⁹² Including this measure highlights the importance of education as a social and economic factor that ultimately affects health outcomes.

Employment

In 2020, Fort Bend County had a 7.7% unemployment rate, a rate higher than Texas (7.6%) and that of Top U.S. Performers (4.0%). Between 2002 and 2020, the unemployment rate in the County has ranged from 3% to 9%.¹⁰ The unemployment rate peaked in 2020, at 9%, which is likely due to the COVID-19 pandemic.

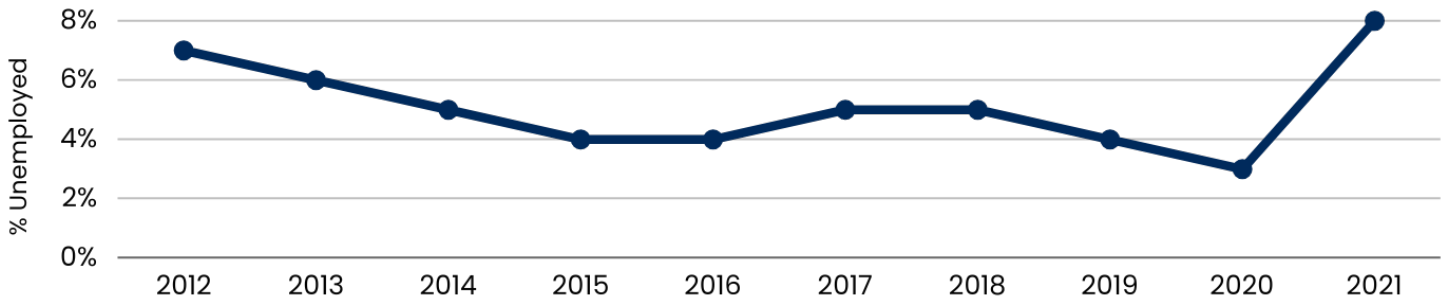
Related Healthy People 2030 Objectives	
Increase employment in working-age people	
Target:	75.0%
FBC Status:	Met
Increase the proportion of children living with at least 1 parent who works full time	
Target:	85.1%
FBC Status:	Not measured



⁹¹ School Segregation*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/education/school-segregation>

⁹² Elder, T. E., Figlio, D. N., Imberman, S. A., & Persico, C. L. (2019). School Segregation and Racial Gaps in Special Education Identification (Working Paper No. 25829). National Bureau of Economic Research. <https://doi.org/10.3386/w25829>

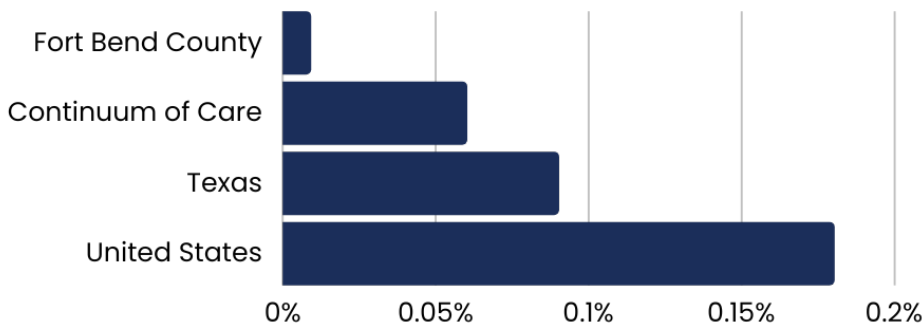
Unemployment Rate in Fort Bend County, 2012–2021



Homelessness

According to The Way Home Continuum of Care 2020 Point-In-Time Homeless Count and The 2020 Annual Homeless Assessment Report to Congress, on a given night Fort Bend has 20 times fewer the number of people experiencing homelessness (0.009%) when compared to the overall national homeless population (0.18%). Even locally Fort Bend is doing better at addressing homelessness since, Texas, is doing better than the national homeless population with half the number of homeless per 10,000 people (0.09%) and the local Continuum of Care, which includes cities of Houston, Pasadena and Conroe, and Fort Bend, Montgomery, and Harris Counties, have even less people experiencing homeless (0.06%).

Percent of Population Experiencing Homelessness



Domestic Violence and Child Abuse

Family Violence Incidents

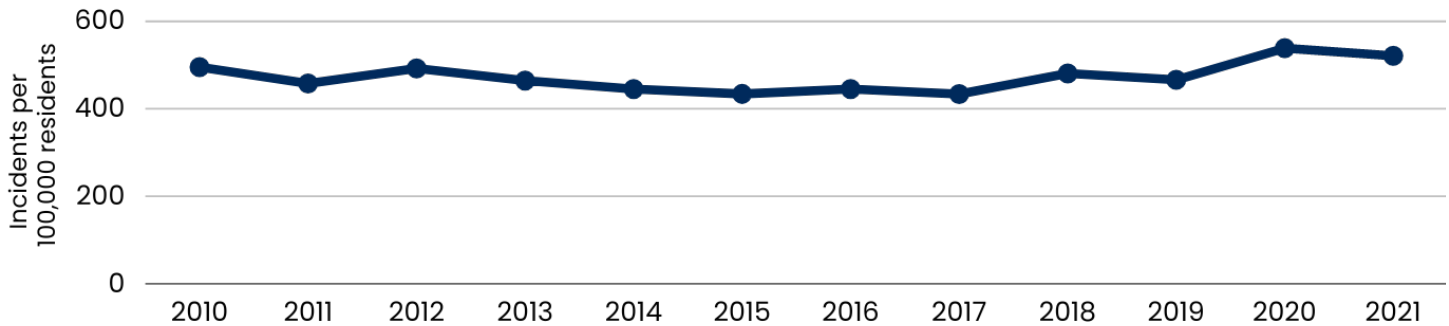
Between 2010 and 2021, family violence incidents increased in Fort Bend County. In 2020, County reported the highest rate of family violence incidents with a 15% increase from the previous year. This increase could be due to the COVID-19 pandemic which magnified stressors in already violent households and/or relationships which increased the frequency and/or severity of domestic violence.⁹³

⁹³ A deep dive into domestic violence in Texas and across the Houston region. (n.d.). Understanding Houston. Retrieved August 1, 2022, from <https://www.understandinghouston.org/blog/domestic-violence-in-texas-and-across-the-houston-region>

Family Violence Related Deaths

Between 2010 and 2021, Fort Bend County saw an increase in family violence deaths. In 2019, family violence related deaths doubled from the previous year and peaked in 2020 with 14 deaths.

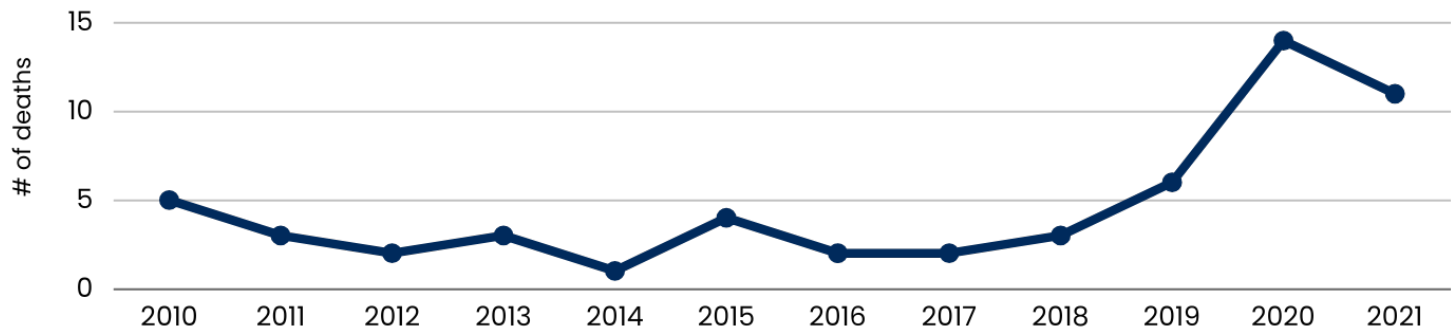
Family Violence Incidents in Fort Bend County, 2010–2021



Foster Care

Between 2011 and 2020, Fort Bend County saw an increase in children (ages 0–17) in foster care. In 2016, there was an increase in children in foster care in Fort Bend County (1.4) and Texas (6.7). The rate has remained steady since then.⁹⁴

Family Violence Related Deaths in Fort Bend County, 2010–2021



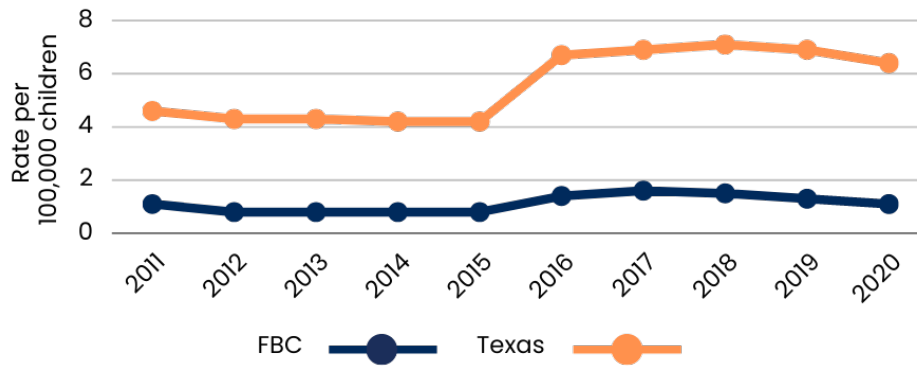
Victims of Child Abuse

Fort Bend County saw an increase in victims of child abuse (ages 0–17) in between 2015 and 2017, but rates have decreased since then. The trend in the County is opposite of Texas' which has seen an increase since 2016 after experiencing the lowest rate that year (8.1).⁹⁵ Respondents of the Community Health Assessment Survey recognized that education about family violence, human trafficking and child abuse is needed in the county.

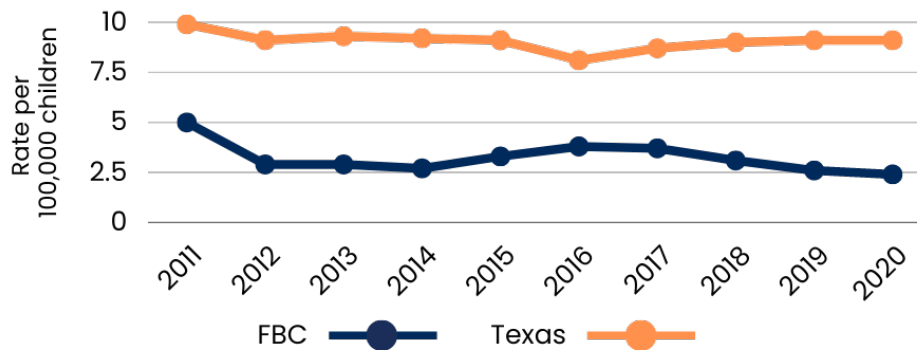
⁹⁴ Children in foster care (age 17 and under) | KIDS COUNT Data Center. (n.d.). Retrieved February 8, 2023, from <https://datacenter.kidscount.org/data/tables/11515-children-in-foster-care-age-17-and-under?loc=45&loct=5>

⁹⁵ Confirmed victims of child abuse | KIDS COUNT Data Center. (n.d.). Retrieved February 8, 2023, from <https://datacenter.kidscount.org/data/tables/3150-confirmed-victims-of-child-abuse?loc=45&loct=5>

Children in Foster Care (ages 0-17), 2011-2020



Victims of Child Abuse (ages 0-17), 2011-2020



Percentage of Survey Respondents to the Question: What health education services are most needed in your community?

Responses	%
Family Violence	26.5%
Human Trafficking	22.8%
Child Abuse	18.2%

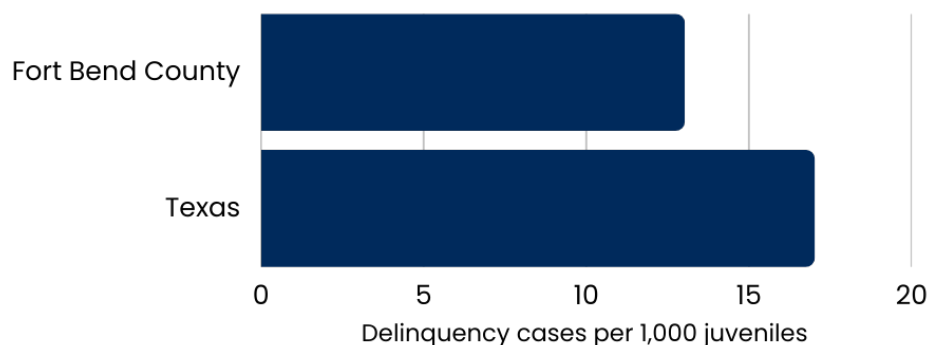
Violence and Crime

Between 2019 and 2020, the crime rate reported by the Fort Bend County Sheriff's Office increased by 3.7%; however the state crime rate decreased by 4.0% over the same time period.⁹⁶ 32.5% of survey respondents selected "Angry behavior/violence" as a concerning unhealthy behavior in their community. In addition, 35.2% of survey respondents indicated that "feeling safe in your home and community" was a problem.

Juvenile Arrests

Young adults and minors enter the juvenile justice system often face difficulty in the educational system, and more likely to have mental health and substance use disorders.⁹⁷ Fort Bend County had less juvenile arrest in 2019 compared to Texas.

Juvenile Arrests, 2019



Social Capital and Social Support

Residential Segregation

The residential segregation index, ranging from 0 (*complete integration*) to 100 (*complete segregation*), refers to the degree to which two or more groups live separately from one another in a particular geographic area.⁹⁸ In this case, we are referring to Black/nonwhite and white residents. The residential segregation index in Fort Bend County is 35 for non-white/White residents and 47 for Black/White residents. Compared to Texas (38, 56), Fort Bend County is doing better, but not by a lot.

Residential segregation is not a thing of the past and may influence both individual and overall community well-being. Residential segregation is a fundamental cause of health disparities—where individuals living in segregated neighborhoods often experience limited access to resources and reduced opportunities, limiting upward mobility.⁹⁸

⁹⁶ Crime in Texas 2020. (n.d.). Texas Department of Public Safety. <https://www.dps.texas.gov/sites/default/files/documents/crimereports/20/2020cit.pdf>

⁹⁷ Reduce the rate of minors and young adults committing violent crimes—AH10—Healthy People 2030 | health.gov. (n.d.). Retrieved August 1, 2022, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/adolescents/reduce-rate-minors-and-young-adults-committing-violent-crimes-ah-10>

⁹⁸ Residential Segregation—Black/White*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/family-and-social-support/residential-segregation-blackwhite>

Residential Segregation Index



Childcare Cost Burden

Childcare cost burden is defined as the childcare costs for a household with two children as a percent of median household income. Fort Bend County, at 16% of total household income, is 2% less than the Top U.S. Performers (18%) and 8% less than Texas (23%) meaning that the county is doing better for this measure.⁹⁹ About a third (28%) of survey respondents indicated that affordable childcare is missing from the community.

It is important to note that difficulty affording childcare is not a problem that is isolated to families with a lower income.⁷⁷ The Department of Health and Human Services considers childcare “affordable” if the expense is less than 7% of the household income, yet the percentage is nowhere near that across the county, state, and country.¹⁰⁰ When there is a higher childcare cost burden, less of the household’s income is available for other expenses. Families with lower incomes might have to choose between childcare and other health promoting activities such as buying healthy food or seeing the doctor. In some families, female guardians leave the paid workforce and stay at home to provide childcare, limiting healthcare and retirement benefits.⁷⁶

Childcare Cost Burden		
Fort Bend County	Texas	Top U.S. Performers
16%	23%	18%

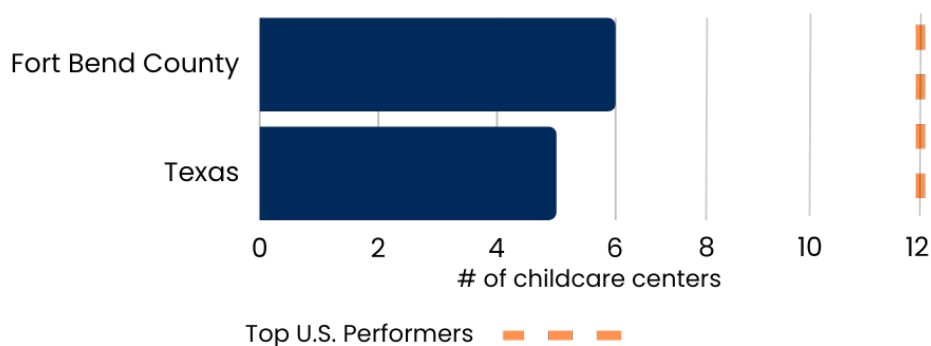
Childcare Cost Burden (%) is the childcare costs for a household with two children as a percent of median household income.

⁹⁹ Child Care Cost Burden*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/family-and-social-support/child-care-cost-burden>

¹⁰⁰ Whitehurst, G. J. “Russ.” (2017, March 9). Why the federal government should subsidize childcare and how to pay for it. Brookings. <https://www.brookings.edu/research/why-the-federal-government-should-subsidize-childcare-and-how-to-pay-for-it/>

The number of childcare centers, one aspect of childcare availability, increases opportunities for both caregivers and children. Caregivers can pursue further education or earn income through paid work, gaining access to healthcare and retirement benefits to support their families and economic security. Access to high-quality, affordable childcare also contributes positively to a child's health and development.¹⁰¹ Fort Bend County has 6 childcare centers per 1,000 population, one more than Texas (5), but two times less than the Top US Performers (12).

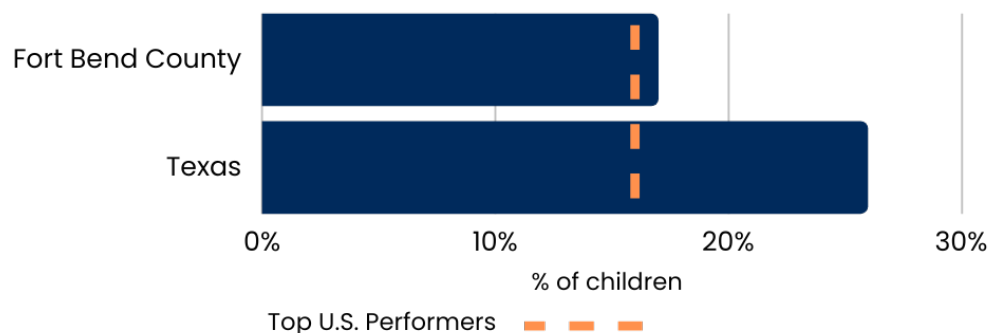
Childcare Centers per 1,000 Population Under 5 Years Old, 2021



Children in single-parent households

The percentage of children in single-parent households in Fort Bend County is 17%, lower than Texas' (26%) and slightly higher than Top U.S. Performers (14%). Children in single-parent households may have less parental support and may be at risk for poor health-related outcomes.¹⁰²

Children in Single-Parent Households, 2016-2020



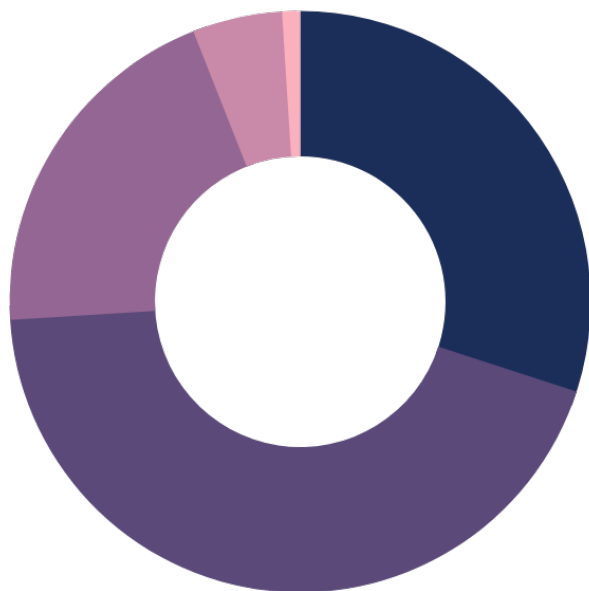
¹⁰¹ Child Care Centers*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/family-and-social-support/child-care-centers>

¹⁰² Children in Single-Parent Households. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/social-economic-factors/family-and-social-support/children-in-single-parent-households>

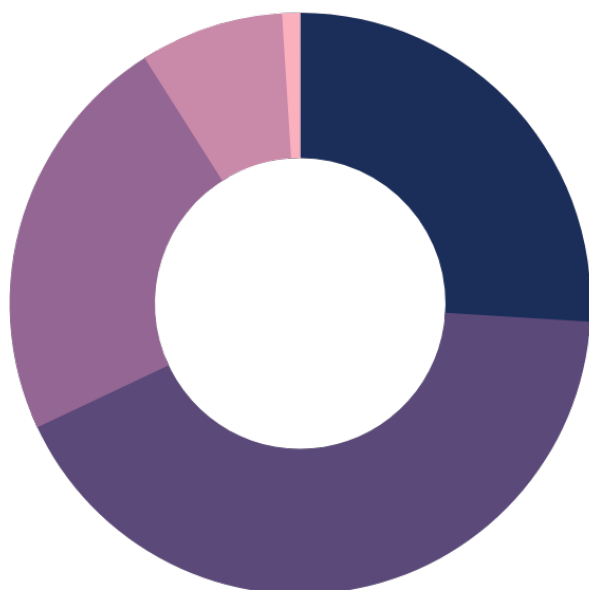
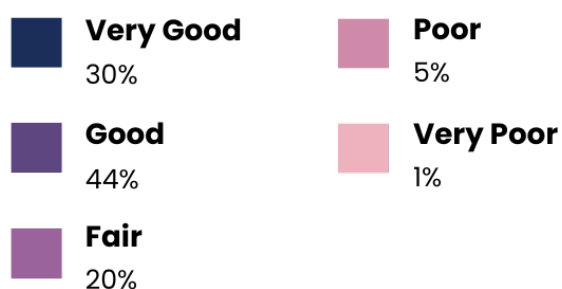
Social Associations

The number of membership associations is an important health indicator since social networks can be a key factor in determining how healthy a community is.¹⁰³ Social networks are specific sources of social support, one of the major influences on health behaviors.¹⁰⁴ Fort Bend County has 4.7 membership associations per 10,000 residents¹⁰, which is well below the top U.S. performing counties.

About half of community survey respondents (44% and 42%, respectively), indicated that their satisfaction with social relationships and activities was “good.” About a third of survey respondents (35%), rated their sense of belonging to their local community as neutral.



In general, how would you rate your satisfaction with your social relationship?

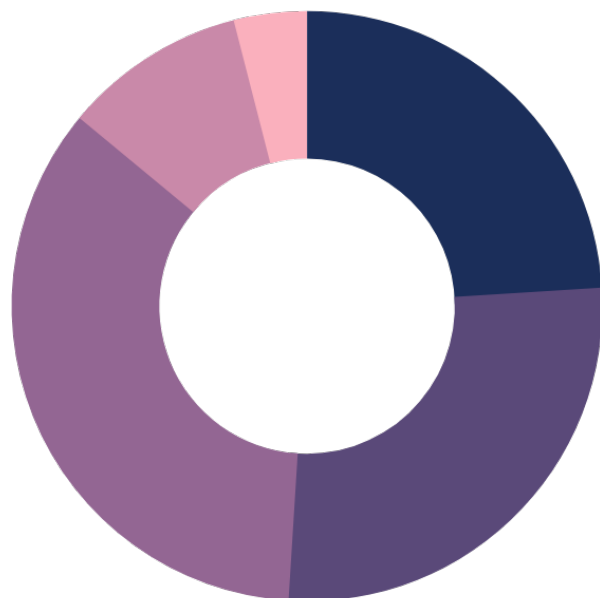


In general, how would you rate your satisfaction with your social activities?

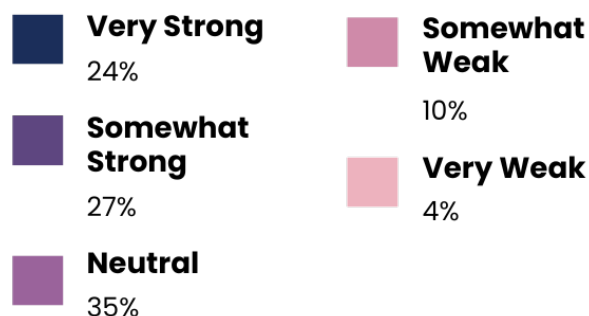


¹⁰³ Chapter 6: Social Networks and Health | Principles of Community Engagement | ATSDR. (2018, December 6). https://www.atsdr.cdc.gov/communityengagement/pce_social_health.html

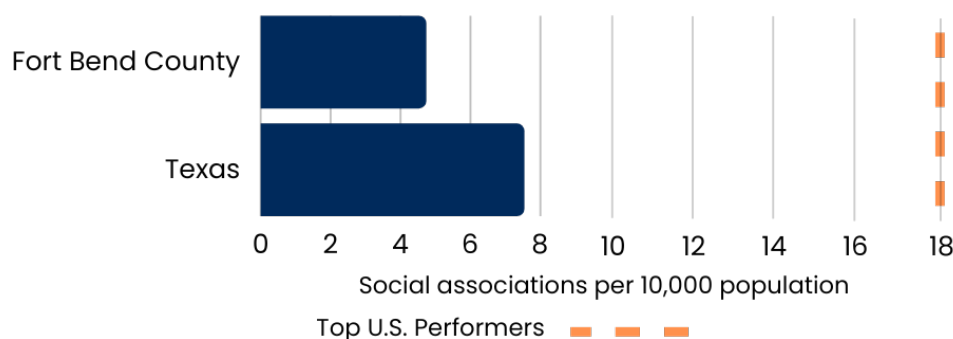
¹⁰⁴ Latkin, C. A., & Knowlton, A. R. (2015). Social Network Assessments and Interventions for Health Behavior Change: A Critical Review. *Behavioral Medicine*, 41(3), 90–97. <https://doi.org/10.1080/08964289.2015.1034645>



How would you rate your sense of belonging to your local community?



Social Associations, 2019



Physical and Built Environment

Where people live, work and play have a major impact on their health and well-being. The quality of the air people breathe, the water they drink and the food they eat all affect health.

Air Quality

Studies have shown that respiratory (e.g., asthma, chronic bronchitis), cardiovascular, and neurodegenerative diseases have been associated with air pollution.¹⁰⁵ Health disparities may also be reinforced by the exposure to particulate matter as racial/ethnic minority populations and those living in poverty are more likely to be exposed.¹⁰⁶ Fort Bend County has more air pollution compared to Texas and top performing counties. However, the air quality in the county has been improving over the past two decades.¹⁰

Related Healthy People 2030 Objectives

Reduce the number of days people are exposed to unhealthy air

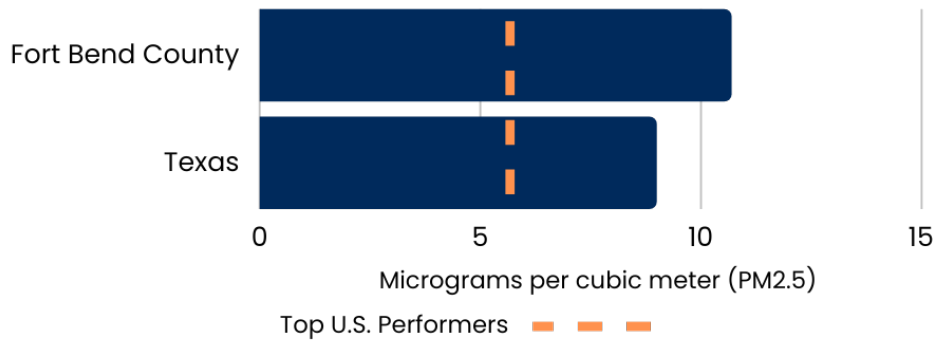
Target: 3,866,365,816 AQI-weighted people days (nationally)

FBC Status: Met

¹⁰⁵ Orru, H., Ebi, K. L., & Forsberg, B. (2017). The Interplay of Climate Change and Air Pollution on Health. Current Environmental Health Reports, 4(4), 504–513. <https://doi.org/10.1007/s40572-017-0168-6>

¹⁰⁶ Air Pollution—Particulate Matter. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/physical-environment/air-and-water-quality/air-pollution-particulate-matter>

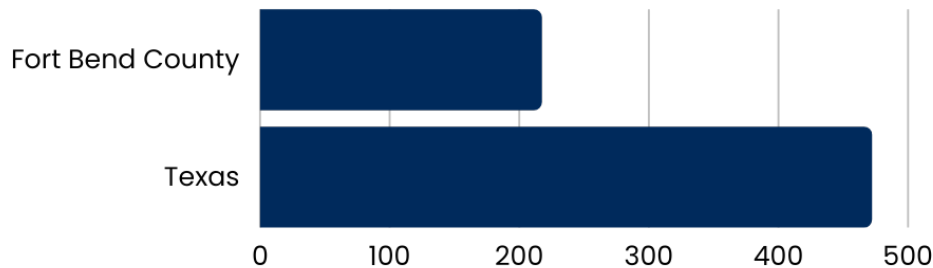
Air Pollution-Particulate Matter, 2018



Traffic Volume

Living near large volumes of traffic exposes residents to ambient noise, toxic gases, and particulate matter. This has been associated with poorer health outcomes including asthma and heart issues.¹⁰⁷ The county has areas that are urban, suburban and rural. Overall, the traffic volume per meter is relatively low.

Average Traffic Volume per Meter, 2019



Water Quality

Unsafe drinking water has been linked to illness, birth defects, lung and skin irritations, cancer, and even death. According to the Environment Protection Agency's Safe Drinking Water Information System, Fort Bend County had no health-related drinking water violations in 2020.¹⁰

Housing

Stable, safe, quality and affordable housing is essential to promoting health and well-being. Owning a home, rather than renting, is associated with better health. In Fort Bend County, the majority of housing units (78%) are owner-occupied, which is very close to the top performing US counties.¹⁰

When households spend a large amount of their income on housing-related expenses, there is less money to pay for other expenses such as transportation, healthy food, or health care. A household is considered to be cost-burdened if they spend over 30% of household income on housing costs. Healthy People 2030 has set a target of reducing the

Related Healthy People 2030 Objectives

Reduce the proportion of families that spend more than 30% of income on housing

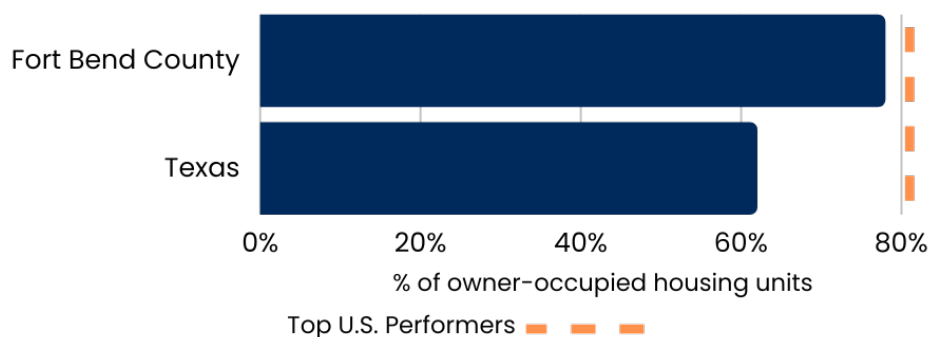
Target: 25.5%

FBC Status: Met

¹⁰⁷ Traffic Volume*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/physical-environment/housing-and-transit/traffic-volume>

proportion of families that spend more than 30% of income on housing to 25.5%.¹⁰⁸ A household is severely cost-burdened if they spend over 50% of household income on housing costs.

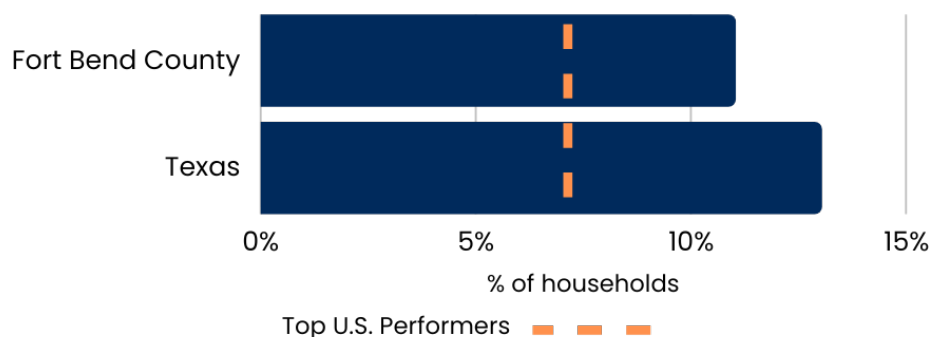
Homeownership, ACS 5-year estimates, 2016–2020



In Fort Bend County, 26.5% of households are housing cost-burdened. While only 22% of county residents rent their homes, almost half (44.2%) of the households that are housing cost-burdened are renters.¹⁰⁹

According to the 2016–2020, American Community Survey (ACS) 5-year estimates, 11% of Fort Bend County households are severely housing cost-burdened. Although it is less than the percentage for Texas households (13%), it is greater than the Top U.S. Performers (7%).

Severe Housing Cost Burden (>50% household income on housing), ACS 5-year estimates, 2016–2020



According to the National Low Income Housing Coalition, a person living in Fort Bend County would have to work 3.2 full-time jobs at minimum wage or make \$23.23 per hour (\$48,320 annually) to pay for a 2-bedroom unit at fair market rent.

¹⁰⁸ Reduce the proportion of families that spend more than 30 percent of income on housing—SDOH04—Healthy People 2030 | health.gov. (n.d.). Retrieved September 30, 2022, from <https://health.gov/healthypeople/objectives-and-data/browse-objectives/housing-and-homes/reduce-proportion-families-spend-more-30-percent-income-housing-sdoh-04>

¹⁰⁹ Get a Health Equity Report Card for Your Area! Salud America! from <https://salud-america.org/health-equity-report-card/?geoid=05000US48157>

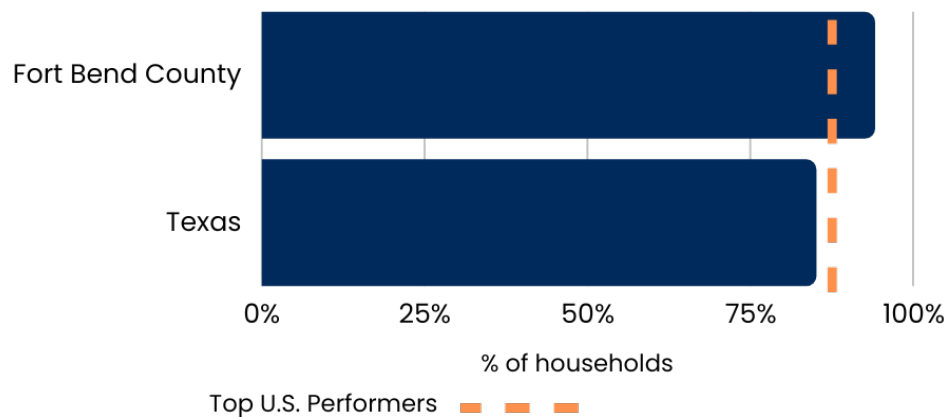
Key Informant interviewees and survey respondents drew attention to the need for affordable housing in the county. Affordable housing was the number one (54.5%) cited missing resource in the community by Key Informants and was identified by one-third (32%) of survey respondents. Missing housing resources included shelters, affordable housing, and housing for specific populations such as people with mental health issues or substance use issues.

Affordability: Fair Market Rent (FMR)	
Cost of 2-bedroom at FMR (2022)	
Fort Bend County	Texas
\$1208	\$1172
Full-time jobs at minimum wage to pay for 2-bedroom at FMR	
Fort Bend County	Texas
3.2	3.1
Dollars per hour to afford 2-bedroom at FMR	
Fort Bend County	Texas
\$23.32	\$22.54
Annual income to afford 2-bedroom at FMR	
Fort Bend County	Texas
\$48,380	\$46,889

Broadband Access

Access to high-speed internet allows for education access, employment opportunities, healthcare services, and social connectedness.¹¹⁰ Fort Bend County's access to broadband is greater than most counties in the state of Texas and Top U.S. Performers.¹⁰ While secondary data indicates that internet access is available to almost everyone, 14% of Key Informants mentioned that access to the internet or smartphones is something that is missing.

Broadband Access, ACS 5-year Estimates, 2016–2020



Related Healthy People 2030 Objectives

Increase the proportion of adults with broadband internet

Target: 60.8%

FBC Status: Met

Food

Access to food, especially healthy food is essential to overall health. There are several indicators for food access including food insecurity, food deserts, measuring access to healthy food, and a food environmental index.

Food Insecurity is related to the percentage of the population who does not have access to a reliable source of food.¹¹¹ The number of people who are food insecure has fluctuated over the past few years with about 80,400 Fort Bend residents in 2020.¹¹² To meet Healthy People 2030's target of 6% of the population, the county will need to reduce the percentage of people who are food insecure by 40%.

Limited access to healthy foods can be measured in several ways. Limited access means that is defined as the percentage of population who are low-income and do not live close to a grocery store. Living close to a grocery store is defined differently in rural and non-rural areas; in rural areas, it means living less than 10 miles from a grocery store; in non-rural areas, less than one mile. Low income is defined as having an

Related Healthy People 2030 Objectives

Reduce household food insecurity and hunger

Target: 6.0%

FBC Status: Not met

Eliminate very low food security in children

Target: 0.0%

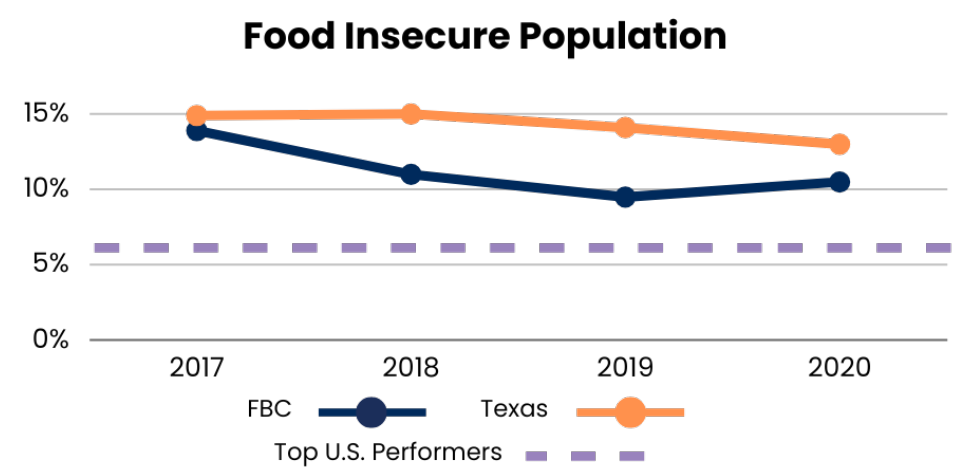
FBC Status: Not met

¹¹⁰ Broadband Access*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/physical-environment/housing-and-transit/broadband-access>

¹¹¹ Food Insecurity*. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/health-behaviors/diet-and-exercise/food-insecurity>

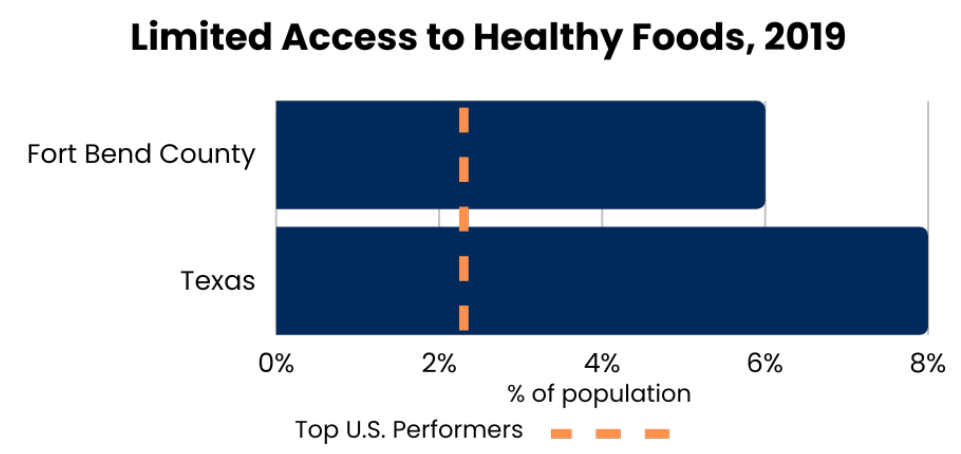
¹¹² Overall (all ages) Hunger & Poverty in Texas | Map the Meal Gap. (n.d.). Retrieved February 8, 2023, from <https://map.feedingamerica.org/county/2018/overall/Texas>

annual family income of less than or equal to 200 percent of the federal poverty threshold for the family size.¹¹³ Grocery stores traditionally provide healthier options than convince stores or smaller grocery stores.



Food deserts are associated with higher rates of obesity and premature death. In Fort Bend County, there are ten census tracts within 7 zip codes that are food deserts, meaning 57,558 people are living in an area that lacks access to affordable fruits, vegetables, whole grains, low-fat milk, and other foods that make the full range of a healthy diet. These areas are located in Rosenberg and north Richmond areas as well as in the Houston City limits of Fort Bend County.¹¹⁴ Key Informants confirmed that there are places in the County where there are food deserts or the only place to buy food is at a low cost discount retailer, such as Family Dollar or Dollar General. In addition, interviewees shared that there is a lack of understanding about what foods are healthy to eat. Even when people are aware of healthy food choices, options for healthy food is more expensive than unhealthy foods such as fast food.

The most common theme amongst Key Informants about challenges faced by the community in maintain healthy lifestyles related to healthy food including access to healthy food and education about what healthy



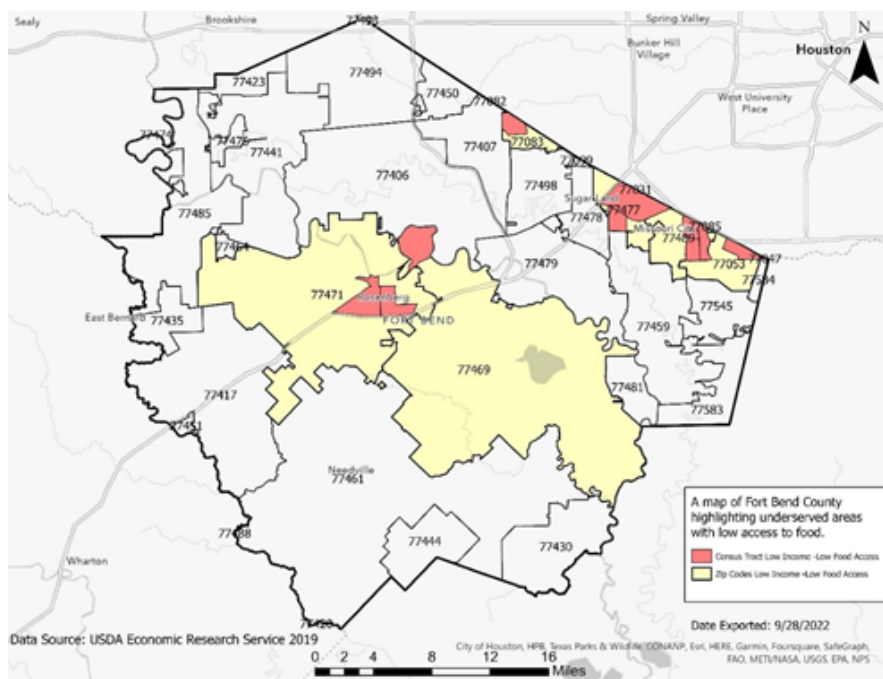
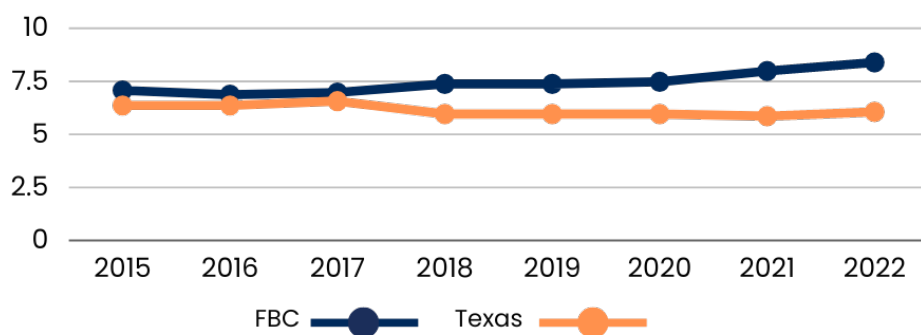
¹¹³ Federal TRIO Programs Current-Year Low-Income Levels. (2022, March 21). [Policy Guidance; Programs; Guides]. US Department of Education (ED). <https://www2.ed.gov/about/offices/list/opec/trio/incomelevels.html>

¹¹⁴ Fort Bend County Engineering GIS/WGS 1984.

foods to eat. Nine percent of survey respondents said that not having basic needs met such as food or shelter keep people in the community from accessing healthcare when they need it. 41% of Key Informants identified access to food, particularly affordable healthy food as missing in the community.

The Food Environment Index ranges from a scale of 0 (*worst*) to 10 (*best*) and equally weights two indicators of the food environment: limited access to healthy foods and food insecurity. Food insecurity estimates the percentage of the population that did not have access to a reliable source of food during the past year.¹¹⁵ The Food Environment Index has improved over the past several years in Fort Bend.

Food Environment Index, 2015–2022



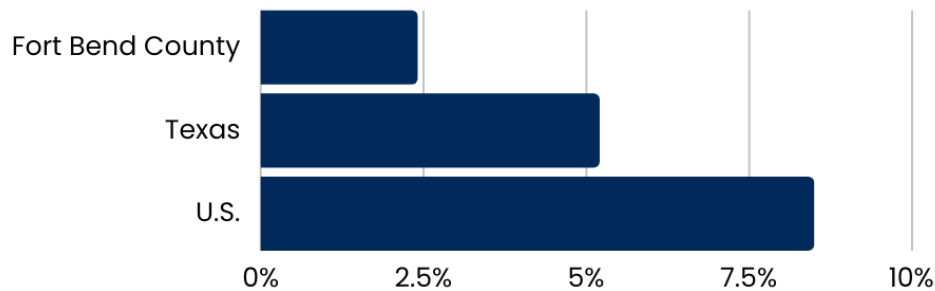
¹¹⁵ Food Environment Index. (n.d.). County Health Rankings & Roadmaps. Retrieved February 8, 2023, from <https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-factors/health-behaviors/diet-and-exercise/food-environment-index>

Transportation

Transportation and health are linked in several areas such as physical activity/obesity, injury levels, air pollution and associated respiratory and heart diseases, social capital and mental health, and social equity.¹¹⁶ Access to affordable and reliable transportation is a key component to connecting to healthcare.

Lack of general transportation can result in missed or delayed health care appointments and limited access to healthy foods.^{117,118} In Fort Bend County, only 2.4% of households do not have a motor vehicle.

Households with no motor vehicle, ACS 5-year estimates, 2016–2020



According to 23.9% of CHA survey respondents and 36.4% of Key Informant interviewees, transportation is a missing resource/service in the community. Transportation is the number one barrier, according to Key Informants, for residents in accessing health care. 72.7% of Key Informants indicated that transportation is a barrier to care and 10.2% of survey respondents indicated “lack of transportation” as a “significant barrier that keep people in the community accessing the healthcare when they need it.

One interviewee gave an example of the transportation challenges: of the public transportation that is available, the bus will pick someone up at their home, which is a benefit, however, the pick-up times are early in the morning and the return times are late in the day. This means that one would need to wait for several hours on either side of their appointment. For example, if one had an appointment at 11am, the bus would schedule to pick them up between 7:30–8:30am but not plan to pick them up from the appointment until 3:00–4:00pm.

24.3% of survey respondents indicated that not being able to afford or access transportation (*to work, school, or health care services*) is a problem (*includes major, somewhat, and minor problem*). This had a direct impact as lack of transportation was the cause of 8.0% of survey respondents

¹¹⁶ CDC - Healthy Places—Transportation and Health. (2017, June 14). <https://www.cdc.gov/healthyplaces/healthtopics/transportation/default.htm>

¹¹⁷ Public Transportation In The US: A Driver Of Health And Equity | Health Affairs Brief. (n.d.). Retrieved September 29, 2022, from <https://www.healthaffairs.org/doi/10.1377/hpb20210630.810356/full/>

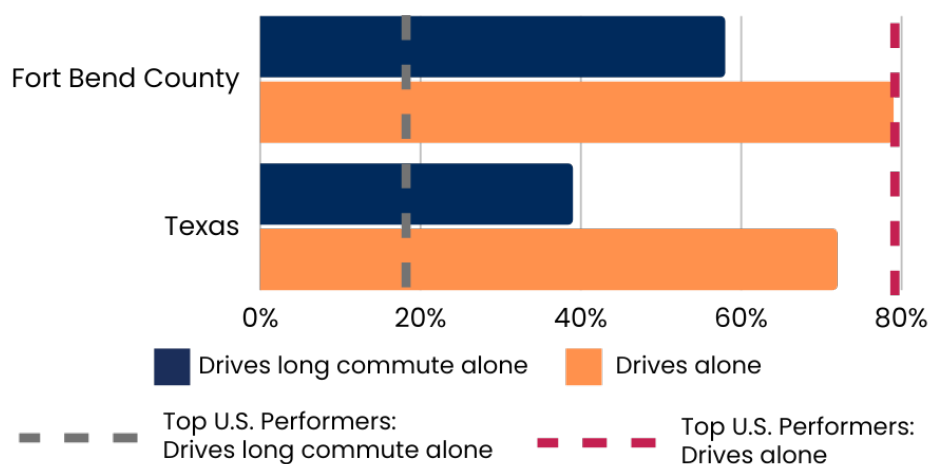
¹¹⁸ CDC - Healthy Places—Healthy Food—Transportation and Food Access. (n.d.). Retrieved September 29, 2022, from <https://www.cdc.gov/healthyplaces/healthtopics/healthyfood/transportation.htm>

not being able to get medical care and 8.6% could not get mental health services when they needed it in the past year.

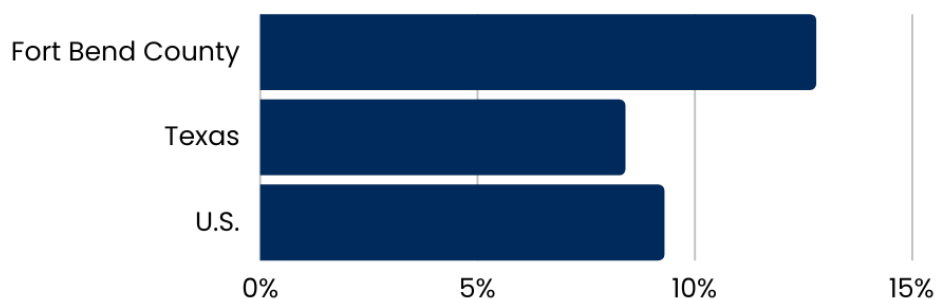
Work Commute

Seventy nine percent of residents who work, drive alone, and more than half (58%) of those have a commute of over 30 minutes. 12.8% of residents commute longer than 60 minutes, which is greater than Texas (8.4%) and the United States (9.3%). For driving alone, Fort Bend County is performing better than Texas and slightly better than the Top U.S. Performers.¹⁰ For driving alone and having a commute longer than 30 minutes, the county is performing better than Texas but not compared to the Top U.S. Performers.

Driving Alone & Long Commute, ACS 5-year Estimates, 2016–2020



Population Commuting over 60 Minutes to Work, ACS 5-year Estimates, 2016–2020



Community Asset: Fort Bend County Transit System

The Fort Bend Transit system provides on demand and commuter services to Fort Bend County residents.¹¹⁹ The on demand service allows residents to schedule trips within the county while the commuter service provides the opportunity to Park and Ride (Fort Bend County Fairgrounds,

¹¹⁹ Services | Fort Bend County. (n.d.). Retrieved October 3, 2022, from <https://www.fortbendcountytexas.gov/government/departments/public-transportation/services>

University of Houston Sugar Land, or AMC Theater First Colony) and be dropped off at one of three locations in Houston: Texas Medical Center, Galleria, and Greenway Plaza. The map below shows the multiple stops in the Texas Medical Center.



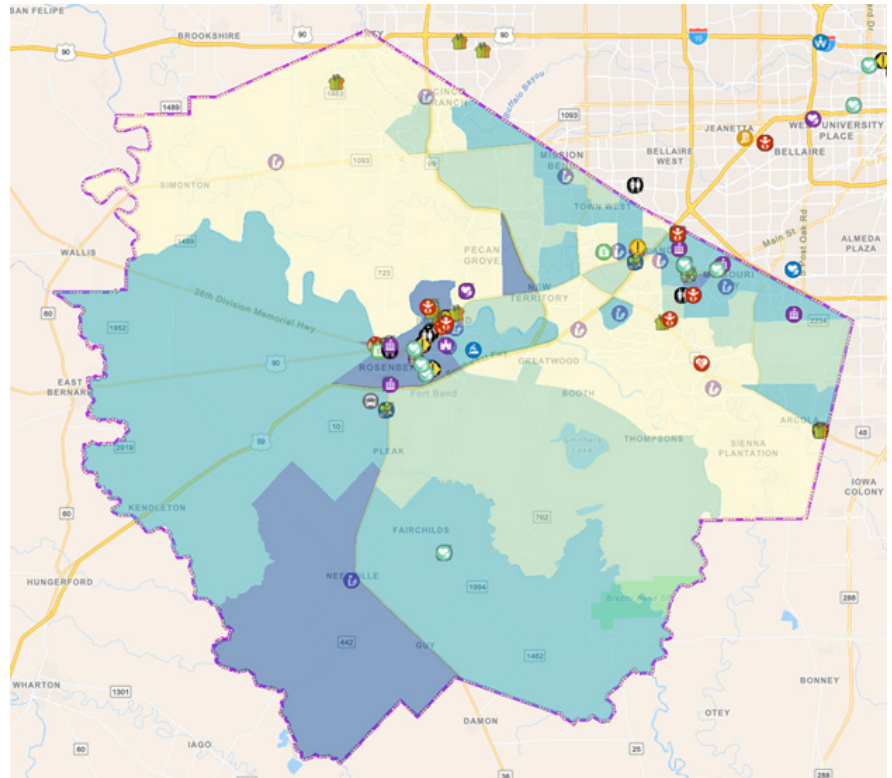
As a whole, the health of Fort Bend County is very good. However, as the data illustrates, there are areas for improvement, and certain populations that have disproportionate health outcomes. Black and Hispanic populations, people with no health insurance, and people with very little income have poorer health. These groups struggle to access services, contributing to disparities.

While there are several areas of improvement, alignment across multiple data sources have indicated a few key health priorities for the community.

COMMUNITY ASSETS NARRATIVE

A community asset (or *community resource*, a very similar term) is defined as anything that can be used to improve the quality of community life.¹²⁰ There are many entities in Fort Bend County that are committed to providing services and resources to our residents. This map, a product of a partnership between FBCHHS and Access Health, has mapped public, private, and non-profit resources for the following categories:

- Child Care
- Clothing
- Counseling
- Dialysis
- Disaster Relief
- Domestic Abuse
- Employment Education
- Family Services
- Food
- Foster Care and Adoption Services
- Home Ownership
- Hope Repair Assistance
- Immigration
- Job Placement
- Law Enforcement
- Legal Assistance
- Medical Services
- Mental Health
- Mentoring
- Rent Assistance
- Senior Services
- Shelter
- Substance Use
- Transportation
- Technology
- Utility Assistance
- Veteran Services
- Youth Services



The interactive version of the map can be accessed via this link: [HHS Community Resource Finder](https://hhs.communityresourcefinder.com) and [SVI \(arcgis.com\)](https://svi.arcgis.com)

¹²⁰ Chapter 3. Assessing Community Needs and Resources | Section 8. Identifying Community Assets and Resources | Main Section | Community Tool Box. (n.d.). Retrieved February 1, 2023, from <https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/identify-community-assets/main>

HEALTH PRIORITIES

Mental Health

- 7% of survey respondents had at least 1 day of poor mental health in the past month
- 46% of survey respondents indicate that mental health had been a problem with their households in the past year
- People who are white have a suicide rate that is higher than other race/ethnicity populations and much higher than the average Fort Bend County rate
- There are 1210 Fort Bend County residents for every mental health provider
- 13.7% of survey respondents stated that in the past year there was a time that they or a family member needed mental health services but could not receive them
 - 33.6% could not afford to pay
 - 26.7% said waiting times were too long
- 32.4% of survey respondents indicated that in relation to health and quality of life, mental health services are missing in the community
- 46% of respondents want mental health education services
- Mental health was the top health concern for key informants

Housing

- 3% of housing in FBC is renter-occupied
- One would need to make \$23.23/per hour (\$48,320 annually) to afford a 2-bedroom unit at fair market rent (FMR) in FBC
- One would need to work 3.2 full-time jobs at minimum wage to afford a 2-bedroom unit at FMR
- 26.5% of FBC households are housing cost-burdened
 - Of these, 44.2% are rental households
- 11% of FBC households are severely housing cost-burdened
- 32% of survey respondents indicated that affordable housing is a resource/service that is missing in the community
- 54.5% of key informant interviewees indicated that housing is a resource/service

that is missing in the community

Obesity

- 30% of Fort Bend County residents are obese
- Obesity was the top health issue identified in the community health assessment (CHA) survey
- 40% of survey respondents are concerned with poor eating habits
- 39% of survey respondents are concerned with a lack of exercise
- Obesity was the third most common health concern cited by Key Informants
- Only 8% of CHA survey respondents are consuming enough fruits and vegetables
- At least 60% of survey respondents are not getting enough exercise

Heart Disease

- Heart disease is the leading cause of death in FBC
- People who are white or Black have at least 2x higher the rate of heart disease compared to people who are Asian or Hispanic
- Heart Disease was the fifth most commonly cited health issue by survey respondents and key informants
- 14% of survey respondents identified heart disease as a health concern

Maternal Health/Prenatal Care

- FBC has higher rates of low birth rates compared to Texas
- FBC is not meeting national benchmarks for low birth weight
- Black and Asian babies have higher rates of low birth weight
- FBC has seen a significant decrease in early prenatal care
- FBC has seen an increase in no prenatal care
- Black and Hispanic women access early prenatal care at lower rates than white and Asian women
- There are higher rates of Black and Hispanic women who do not receive any prenatal care

CONCLUSION

Based on the results of this Community Health Assessment for Fort Bend County's over 800 survey respondents and 25 key informants, the health of Fort Bend County residents compares favorably to Texas and the US. However, as the data illustrates there are areas for improvement and certain populations that have disproportionately poorer health outcomes. Poorer health outcomes in any sector of our population will necessarily affect the overall health of our entire community.

The survey identified several potential areas needing improvement. Alignment in the areas occurred across multiple data sources have pointed to five key areas for which HHS will choose to focus our Community Health Improvement efforts. These priority areas are listed in order of the frequency of mention during stakeholder interviews and survey responses.

- Mental Health
- Housing
- Obesity
- Heart Disease
- Prenatal Care

Improving the health of Fort Bend County in each of these areas will require a collaborative and intentional effort across multiple sectors and involving many partners. As we are publishing this summary report, focus groups have already been convened to begin the work ahead. We invite you to join us in a journey that we are confident will result in a healthier Fort Bend County.

APPENDIX A

CHA Committee

Community Members	
Name	Agency
Palak Jalan	AccessHealth
Sindhu Sathees	AccessHealth
George Patterson	Texana
Joe Freudenberger	Oak Bend Medical Center
Rocaille Roberts	The George Foundation
Julie Gaston	Henderson–Wessendorff Foundation
Dr. Pilar Westbrook	Fort Bend ISD
Shaneka Smith	Judges Office
Shaireen Khawaja	Judges Office
Marcia Otto	UT School of Public Health
Ben King	U of H Humana Institute
David Sincere	Fort Bend Transformation Church

Perri D'Armond	FBC Public Transportation
Chief Mattie Provost	FBC Sheriff's Office
Connie Almeida	FBC Behavioral Health Services
Gabe Lavine	City of Sugarland

FBCHHS Staff Members

Name	Agency
Carrie Rai	Performance & Innovation Specialist
Kaye Reynolds	Special Projects Coordinator
Barbarah Martinez	Clinical Health Services Division Manager
Najat Elsayed	Social Services Division Manager
Jacquelyn Minter	Director
Graig Temple	EMS Chief
Trevor Nolley	Sr. Data Analyst
Nicolette Janoski	Epidemiology Division Manager
Troy Scalco	Environmental Health Director

APPENDIX B

Data Summary

Fort Bend County Health and Human Services Community Health Assessment		
Data Type	Indicator	Data Source
^	Primary Data	
*	Secondary Data	
Fort Bend County Population Overview		
*	Population	U.S. Census Bureau
*	by sex	U.S. Census Bureau
*	by race/ethnicity	U.S. Census Bureau
*	Map of the county	Fort Bend County Engineering GIS/WGS 1984
*	Foreign born population	U.S. Census Bureau, 2016–2020 American Community Survey 5-Year Estimates
*	Population that speaks a language other than English	U.S. Census Bureau, 2016–2020 American Community Survey 5-Year Estimates
*	Marital status	U.S. Census Bureau
*	Median income	County Health Rankings
*	Level of education	County Health Rankings

*	Poverty level	County Health Rankings
Health Outcomes		
Length of Life		
*	Life expectancy	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>
Premature Death		
*	Years of Potential Life Lost	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>
Mortality		
*	Leading causes of death	CDC WONDER
*	<i>by race/ethnicity</i>	<i>CDC WONDER</i>
*	Drug overdose deaths	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>
*	Child mortality	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>
*	Infant mortality	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>

*	Motor vehicle crash deaths	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>
*	Alcohol-impaired driving deaths	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>
*	Suicide	County Health Rankings
*	<i>by race/ethnicity</i>	<i>CDC WONDER</i>
*	<i>by gender</i>	<i>CDC WONDER</i>
*	<i>by age group</i>	<i>CDC WONDER</i>
*	<i>Male suicides by age group</i>	<i>CDC WONDER</i>
*	Homicides	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>
*	<i>by year</i>	<i>CDC WONDER</i>
*	Firearm Fatalities	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>

Morbidity

Obesity

*	<i>Self-reported adult obesity</i>	<i>CDC Adult Obesity Facts</i>
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*	<i>Adult obesity by year</i>	<i>County Health Rankings</i>
^	<i>Community-identified top health issue</i>	<i>FBCHHS CHA Survey</i>
*	Low birthweight	County Health Rankings
*	<i>by race/ethnicity</i>	<i>CDC WONDER</i>
*	<i>by race/ethnicity and year</i>	<i>CDC WONDER</i>

Hospital utilization

*	Preventable hospital stays	County Health Rankings
*	<i>by race/ethnicity</i>	<i>County Health Rankings</i>

Cancer

*	Invasive cancer incidence	Texas Cancer Registry
	<i>by year</i>	
*	<i>by cancer site</i>	<i>Texas Cancer Registry</i>
*	<i>by race/ethnicity</i>	<i>Texas Cancer Registry</i>
*	<i>by sex</i>	<i>Texas Cancer Registry</i>
*	<i>by census tract (map)</i>	<i>Salud America!</i>
*	Cancer mortality	Texas Cancer Registry
	<i>by year</i>	

*	<i>by cancer site</i>	<i>Texas Cancer Registry</i>
*	<i>by race/ethnicity</i>	<i>Texas Cancer Registry</i>
*	<i>by race/ethnicity and year</i>	<i>CDC WONDER</i>
*	Motor Vehicle Injury	Texas Department of Transportation

Overall Health Status

^	Self-reported health status	FBCHHS CHA Survey
^	"Very good" self-reported health status by household income	FBCHHS CHA Survey
^	"Very good" self-reported health status by health insurance type	FBCHHS CHA Survey

Sexually Transmitted Infections (STIs)

*	Chlamydia cases over time	National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus
	<i>by sex</i>	<i>Texas Department of State Health Services</i>
*	<i>by race/ethnicity</i>	<i>Texas Department of State Health Services</i>
*	Gonorrhea cases over time	National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus
*	<i>by sex</i>	<i>Texas Department of State Health Services</i>
*	<i>by race/ethnicity</i>	<i>Texas Department of State Health Services</i>
*	Syphilis cases over time	National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus

*	<i>by sex</i>	<i>Texas Department of State Health Services</i>
*	<i>by race/ethnicity</i>	<i>Texas Department of State Health Services</i>
*	People living with HIV over time	National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus
*	New HIV diagnoses over time	National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus
*	<i>by sex</i>	<i>National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus</i>
*	<i>by race/ethnicity</i>	<i>National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus</i>
*	Tuberculosis rates per year	National Center for HIV, Viral Hepatitis, STD, and TB Prevention Atlas Plus

COVID-19

*	Case rates	COVID-19 Fort Bend County Response
*	<i>by zip code</i>	<i>COVID-19 Fort Bend County Response</i>
*	<i>by sex</i>	<i>COVID-19 Fort Bend County Response</i>
*	<i>by race/ethnicity</i>	<i>COVID-19 Fort Bend County Response</i>
*	<i>by age group</i>	<i>COVID-19 Fort Bend County Response</i>
*	Mortality rates	COVID-19 Fort Bend County Response
*	<i>by sex</i>	<i>COVID-19 Fort Bend County Response</i>
*	<i>by race/ethnicity</i>	<i>COVID-19 Fort Bend County Response</i>

*	<i>by age group</i>	<i>COVID-19 Fort Bend County Response</i>
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Mental Health

*	Mentally unhealthy days per month	County Health Rankings
*	Poor mental health days per month	County Health Rankings
^	Days with not good mental health in the past 30 days	FBCHHS CHA Survey
^	<i>by race/ethnicity</i>	<i>FBCHHS CHA Survey</i>
^	Poor mental health prevented activities	FBCHHS CHA Survey
^	Mental health as a problem for households in the past year	FBCHHS CHA Survey
^	Community-identified top health concern	FBCHHS CHA Survey
^	Mental health care access barriers	FBCHHS CHA Survey
^	Missing health service	FBCHHS CHA Survey
^	Education services needed	FBCHHS CHA Survey
*	Community Assets: Mental health services	

Diabetes

*	Deaths caused by Diabetes	CDC WONDER
*	Prevalence in adults aged 20 and over	County Health Rankings

*	Community identified top health concern	KI Interview, FBCHHS CHA Survey
*	Map of diabetes prevalence among adults 18+	Salud America!

Heart Diseases

*	Deaths by race/ethnicity	CDC WONDER
*	Heart disease deaths by sex	LiveStories
*	Heart disease deaths by age	LiveStories
^	Community identified top health concern	FBCHHS CHA Survey
*	Prevalence of coronary heart disease by census tract	Salud America!

Health Determinants

Health Care (Access & Quality)

Health insurance coverage

*	Uninsured adults and children	County Health Rankings
*	Uninsured population by census tract	Salud America!
^	Barriers to accessing healthcare	FBCHHS CHA Survey
^	Missing health service	FBCHHS CHA Survey
^	Cost of health care as a challenge	KI Interview
^	Community assets: FQHC's and other clinics	County Health Rankings

*	Provider rates	County Health Rankings
^	<i>Lack of medical specialists as a barrier</i>	<i>KI Interview</i>

Asthma

*	Asthma prevalence among adults by census tract	Salud America!
*	Asthma-related hospitalizations	DSHS Texas Health Care Information Collection
*	<i>by race/ethnicity</i>	<i>DSHS Texas Health Care Information Collection</i>

Health Behaviors

Alcohol Use

*	Excessive Drinking	County Health Rankings
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Tobacco Use

*	Adult smoking	County Health Rankings
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Physical Activity

*	Physical Inactivity	County Health Rankings
*	Community Assets: Parks & community centers	Fort Bend County Parks and Recreation
*	Access to exercise opportunities	County Health Rankings
*	<i>by year</i>	County Health Rankings

Nutrition & Diet

^	Servings of fruits/and or vegetables per day	FBCHHS CHA Survey
^	Nutrition, physical activity and wellness-Education	FBCHHS CHA Survey

Sexual Activity

*	Teen birth fertility rate	CDC Wonder: Natality Information
*	Teen births by race/ethnicity	County Health Rankings

Seatbelt Use

	<i>by sex</i>	<i>Texas Behavioral Risk Factor Surveillance System</i>
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Immunizations & Screenings

*	County vs. state childhood immunization opt-out rate	2020-2021 Annual Survey of Immunization Status
*	Childhood immunization opt-out rate by school district	2020-2021 Annual Survey of Immunization Status
*	Childhood immunization opt-out rate by grade level	2020-2021 Annual Survey of Immunization Status
*	COVID-19 vaccination rate	COVID-19 Fort Bend County Response
*	Flu vaccination rate among Medicare enrollees	County Health Rankings

Preventative Screenings

*	Mammography Screenings	County Health Rankings
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Prenatal Screenings

*	Early prenatal care	CDC WONDER
*	No prenatal care	CDC WONDER
*	Prenatal visits among teen births	CDC WONDER
*	Preterm births	CDC WONDER

Social, Community, and Economic Factors

Income

*	Median household income	County Health Rankings
*	Median household income by race/ethnicity	County Health Rankings
*	Income inequality	County Health Rankings
*	Gender pay gap	County Health Rankings
*	Living wage vs. minimum wage	County Health Rankings

Poverty Level

*	Income below poverty level	American Community Survey 5-year estimates
*	Children in poverty	County Health Rankings
*	by race/ethnicity	County Health Rankings

Education

*	Enrollment by school district	Texas Education Agency
*	Standardized test scores	Data Interaction for Texas Student Assessments
*	Economically disadvantaged students	Texas Education Agency
*	<i>by school district</i>	<i>Texas Education Agency</i>
*	At-risk students	Texas Education Agency
*	<i>by school district</i>	<i>Texas Education Agency</i>
*	Students experiencing homelessness	Texas Education Agency
*	Educational attainment	County Health Rankings
*	School segregation	County Health Rankings

Employment

*	Unemployment	County Health Rankings
*	<i>by year</i>	<i>County Health Rankings</i>

Homelessness

*	Population experiencing homelessness	The Way Home Continuum of Care 2020 Point-In-Time Homeless Count & Survey Independent Analysis
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Domestic Violence & Child Abuse

*	Family violence incidents trend	Understanding Houston
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*	Family violence related deaths	Understanding Houston
*	Children in foster care	Kids COUNT
*	Victims of child abuse	Kids COUNT
*	Health education services needed	FBCHHS CHA Survey

Violence & Crime

*	Violent Crime	FBI Crime Data Explorer
^	Concerning unhealthy behavior: Angry behavior/violence	FBCHHS CHA Survey
^	Hosusehold issue: Feeling safe in your home and community	FBCHHS CHA Survey
*	Juvenile Arrests	County Health Rankings

Social Capital & Social Support

*	Residential segregation	County Health Rankings
*	Childcare cost burden	County Health Rankings
*	Childcare centers	County Health Rankings
*	Children in single-parent households	County Health Rankings
*	Social associations	County Health Rankings
^	Satisfaction with social activities	FBCHHS CHA Survey
^	Satisfaction with social relationships	FBCHHS CHA Survey

^	Sense of belonging to the local community	FBCHHS CHA Survey
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Physical & Built Environment

*	Air pollution- particulate matter	County Health Rankings
*	Water quality	County Health Rankings

Housing

*	Homeownership	County Health Rankings
*	Housing cost-burdened	County Health Rankings
*	Severely housing cost-burdened	Salud America! Health Equity Report Card
*	National Low Income Housing Coalition	County Health Rankings
^	Missing resource: Affordable housing	FBCHHS CHA Survey, KI interview
*	Broadband access	County Health Rankings

Food

*	Food insecure population	Feeding America
*	Map of food deserts in the county	United States Department of Agriculture
*	Limited access to healthy foods	County Health Rankings
*	Food environment index	County Health Rankings
	Community Assets: Map of food assistance programs	

Transportation

*	Households with no motor vehicle	American Community Survey 5-year estimates
^	Missing resource/service: Transportation	FBCHHS CHA Survey, KI interview
^	Transportation as an issue/barrier to care	FBCHHS CHA Survey, KI interview
^	Household issue: Not able to afford or access transportation	FBCHHS CHA Survey
*	Driving alone to work and long commute	County Health Rankings
*	Population commuting over 60 minutes	Salud America! Health Equity Report Card
*	Traffic volume	County Health Rankings
*	Community Asset: Fort Bend County Transit System	Fort Bend County

APPENDIX C

CHA Survey Report

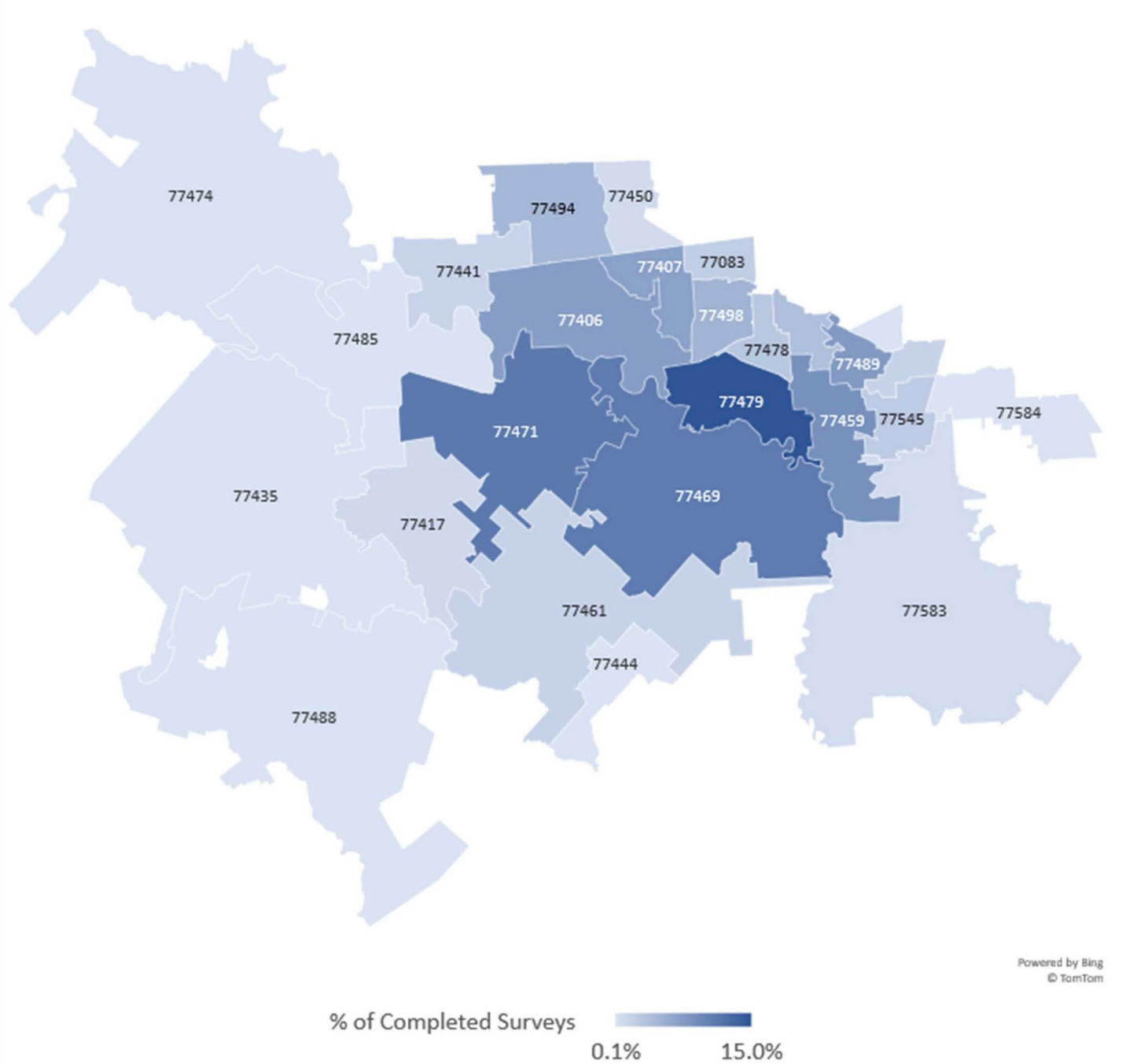
Demographics

Zip Code

Zip Code	Count	Percentage
77479	127	15.0%
77471	94	11.1%
77469	92	10.9%
77459	73	8.6%
77489	65	7.7%
77406	62	7.3%
77407	60	7.1%
77498	43	5.1%
77494	39	4.6%
77477	33	3.9%
77478	25	3.0%
77545	22	2.6%
77083	20	2.4%

Zip Code	Count	Percentage
77053	15	1.8%
77461	15	1.8%
77441	14	1.7%
77451	10	1.2%
77450	8	0.9%
77583	7	0.8%
77417	5	0.6%
77464	4	0.5%
77085	2	0.2%
77474	2	0.2%
77435	1	0.1%
77444	1	0.1%
77481	1	0.1%
77485	1	0.1%
77488	1	0.1%
77584	1	0.1%
None	2	0.2%

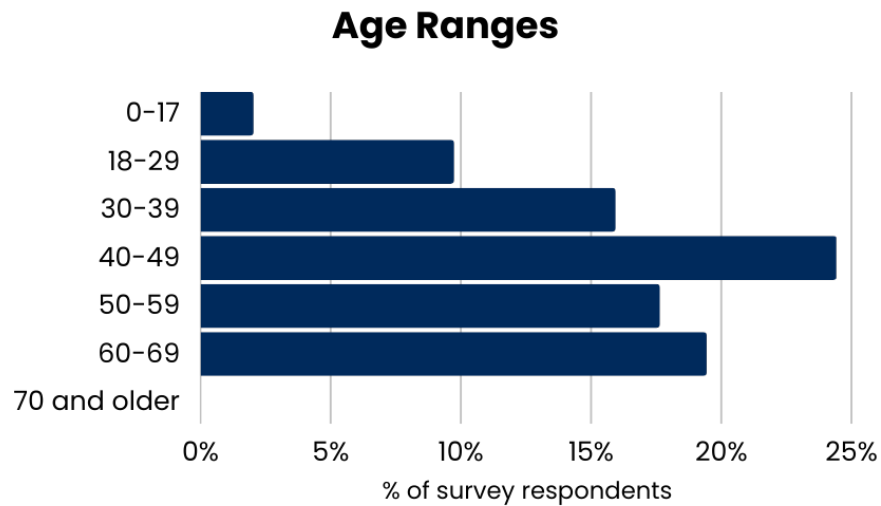
Survey Completion Across Fort Bend County



Age Ranges
What age range do you fall under?

Age Range	Count	Percentage
0 -17	17	2.0%
18 -29	82	9.7%

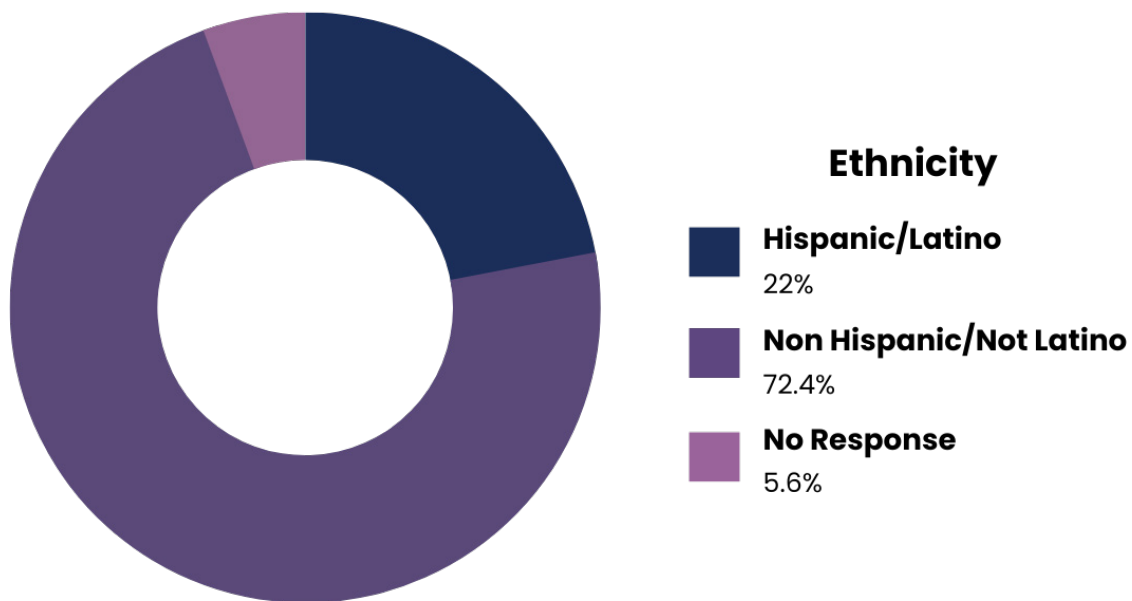
Age Range	Count	Percentage
30-39	134	15.9%
40-49	206	24.4%
50-59	149	17.6%
60-69	164	19.4%
70 or older	93	11.0%



Note: 0-17 year olds needed permission to complete the survey

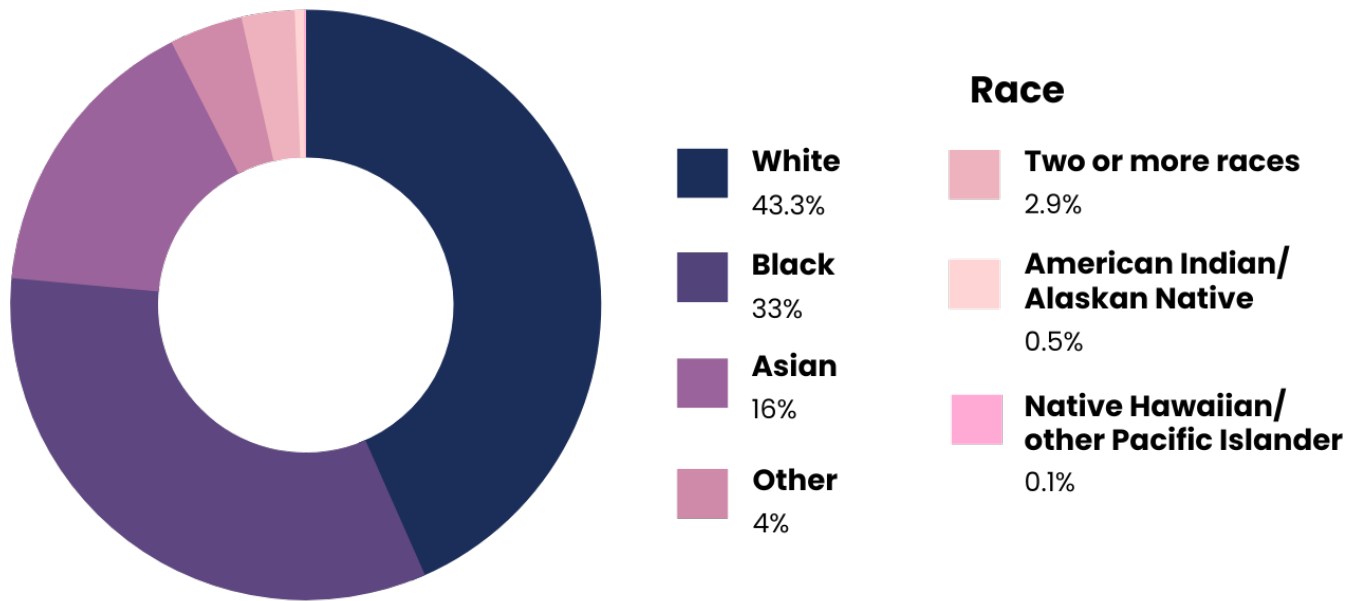
Ethnicity

Ethnicity	Count	Percentage
Hispanic/Latino	186	22.0%
Non Hispanic/Not Latino	612	72.4%
No Response	47	5.6%



Race

Race	Count	Percentage
White	354	41.9%
Black or African American	269	31.8%
Asian	130	15.4%
Other (please specify)	33	3.9%
Two or more races	24	2.8%
American Indian and Alaskan Native	4	0.5%
Native Hawaiian and other Pacific Islander	1	0.1%
No Response	30	3.6%



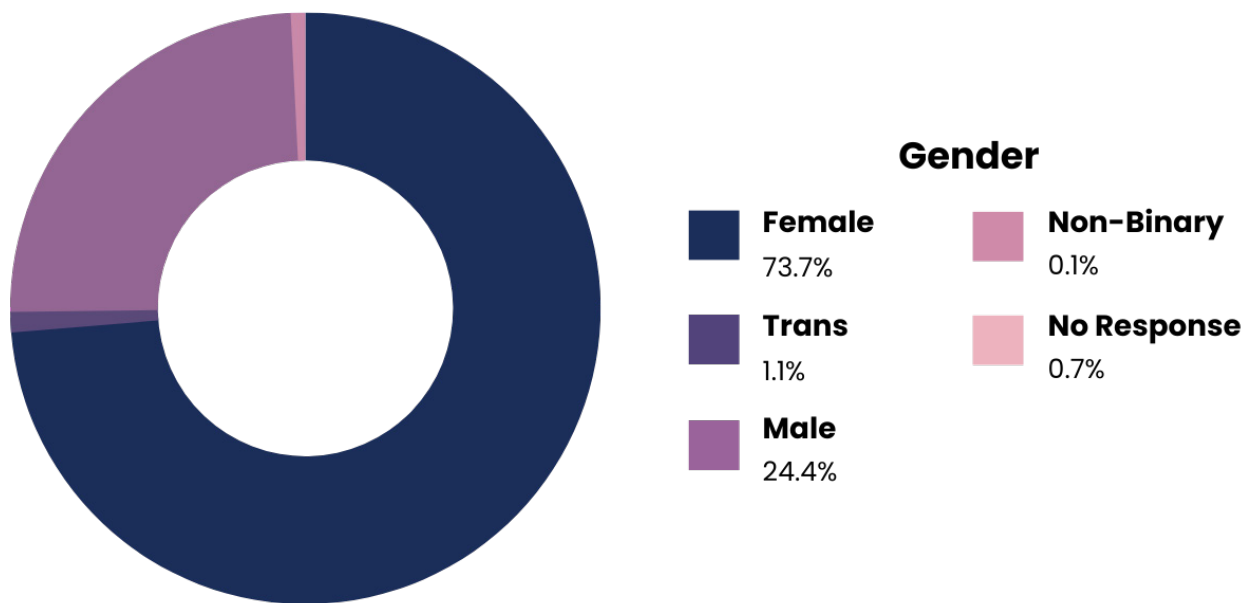
"Other" Responses	
Response	Count
Did not specify	1
Hispanic	5
Human	1
India	1
Latino	3
Mexican	1
Mexican American	1
Mexico	1
Middle East	1

"Other" Responses	
Response	Count
Middle Eastern	1
Mixed	1
Negro	1
Not applicable	1
Other	2
South Asian	3
West Indian	1

Gender

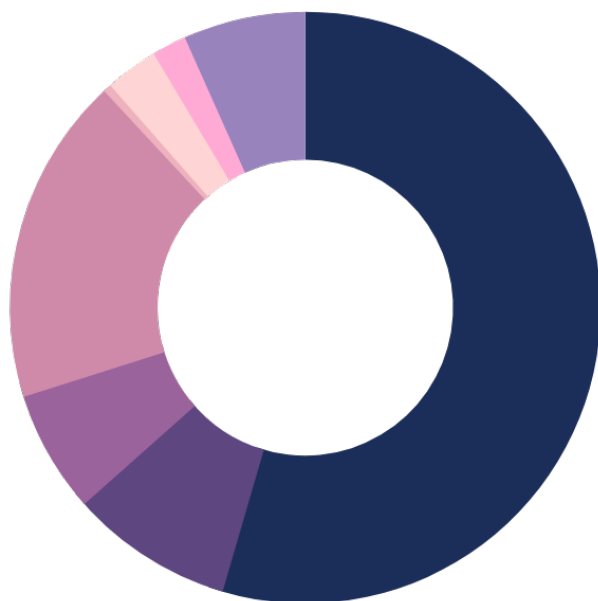
Gender. Choose all that apply.

Gender	Count	Percentage
Female	623	73.7%
Trans	9	1.1%
Male	206	24.4%
Non-Binary	1	0.1%
No response	6	0.7%

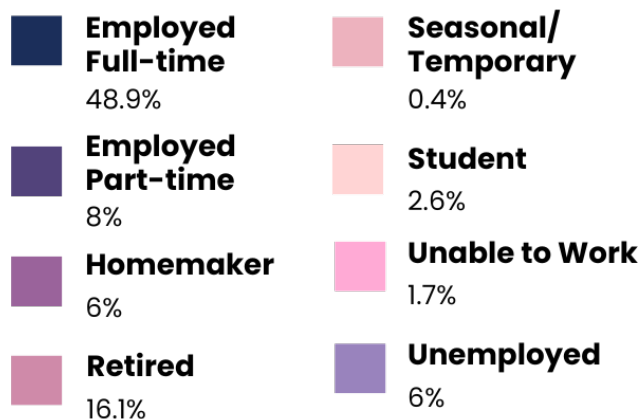


Job Status

Job Status	Count	Percentage
No response	87	10.3%
Employed Full-time	413	48.9%
Employed Part-time	68	8.0%
Homemaker	51	6.0%
Retired	136	16.1%
Seasonal/Temporary	3	0.4%
Student	22	2.6%
Unable to work	14	1.7%
Unemployed	51	6.0%



Job Status

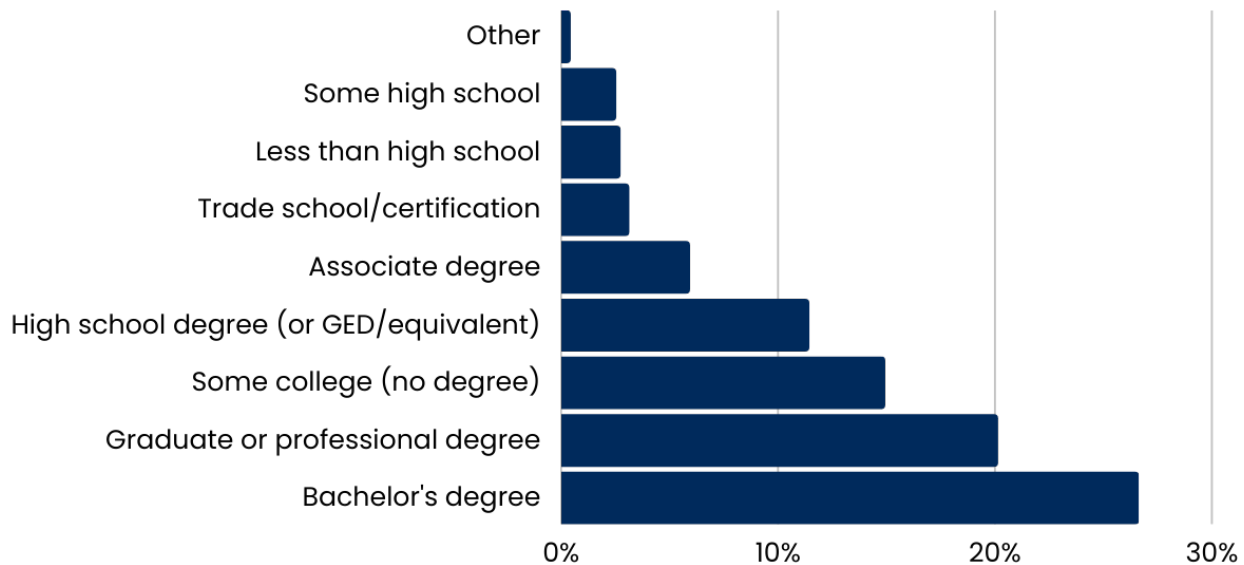


Highest Level of Education

What is your highest level of education?

Education Level	Count	Percentage
Less than high school	23	2.7%
Some high school	21	2.5%
High school degree (or GED/equivalent)	96	11.4%
Some college (no degree)	126	14.9%
Trade school/certification	26	3.1%
Associate degree	50	5.9%
Bachelor's degree	225	26.6%
Graduate or professional degree	170	20.1%
Other	3	0.4%

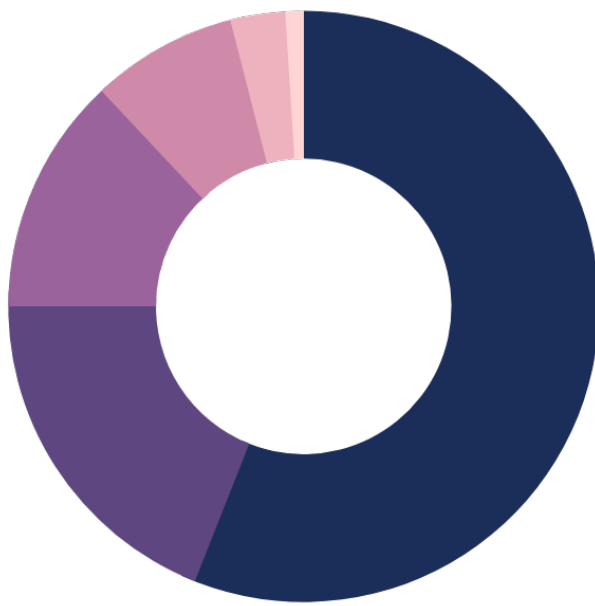
Highest Level of Education



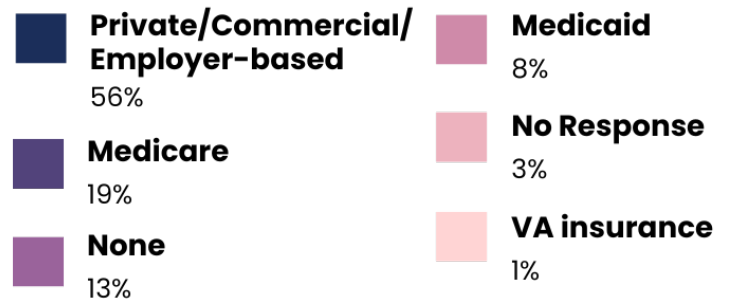
Type of Health Insurance

What type of health insurance do you have?

Type of Insurance	Count	Percentage
Private/Commercial/Employer-based	477	56.4%
Medicare	158	18.7%
None	106	12.5%
Medicaid	65	7.7%
No Response	27	3.2%
VA insurance	12	1.4%



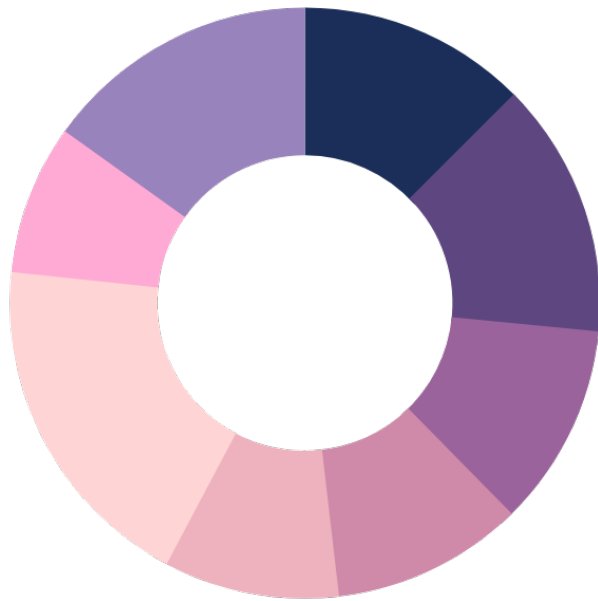
Type of Health Insurance



Household Income

What was your total household income last year, before taxes?

Household Income	Count	Percentage
< 20,000	106	12.5%
20,001 - 40,000	118	14.0%
40,001 - 60,000	94	11.1%
60,001 - 80,000	89	10.5%
80,001 - 100,000	81	9.6%
100,001 - 200,000	160	18.9%
> 200,001	69	8.2%
No response	128	15.1%



Household Income

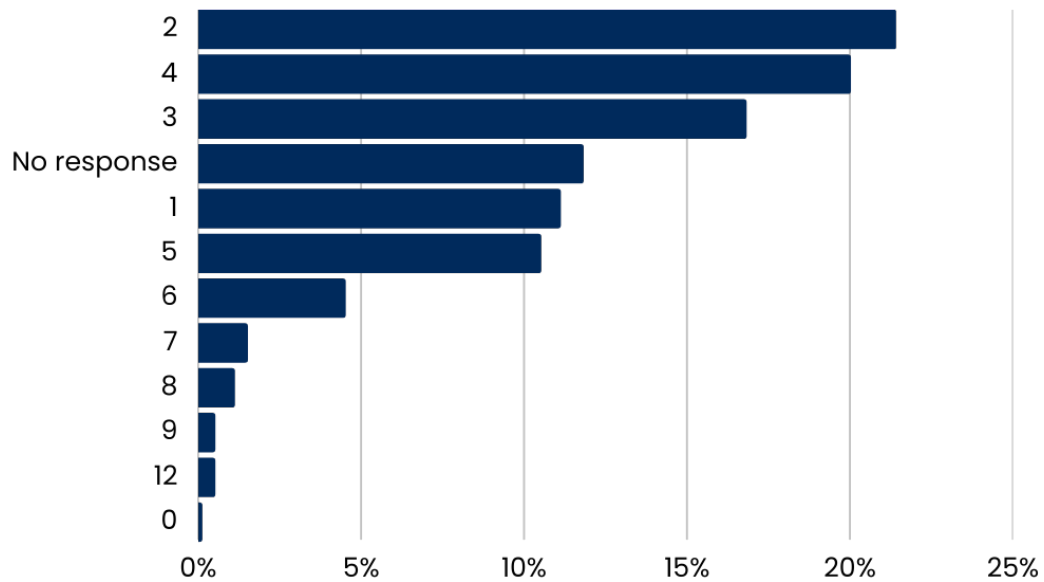
< 20,000 12.5%	80,001 – 100,000 9.6%
20,001 – 40,000 14%	100,001 – 200,000 18.9%
40,001 – 60,000 11.1%	> 200,001 8.2%
60,001 – 80,000 10.5%	No response 15.1%

Household Size

Including yourself, how many people are in your household?

Household Size	Count	Percentage
0	1	0.1%
1	94	11.1%
2	181	21.4%
3	142	16.8%
4	169	20.0%
5	89	10.5%
6	38	4.5%
7	13	1.5%
8	9	1.1%

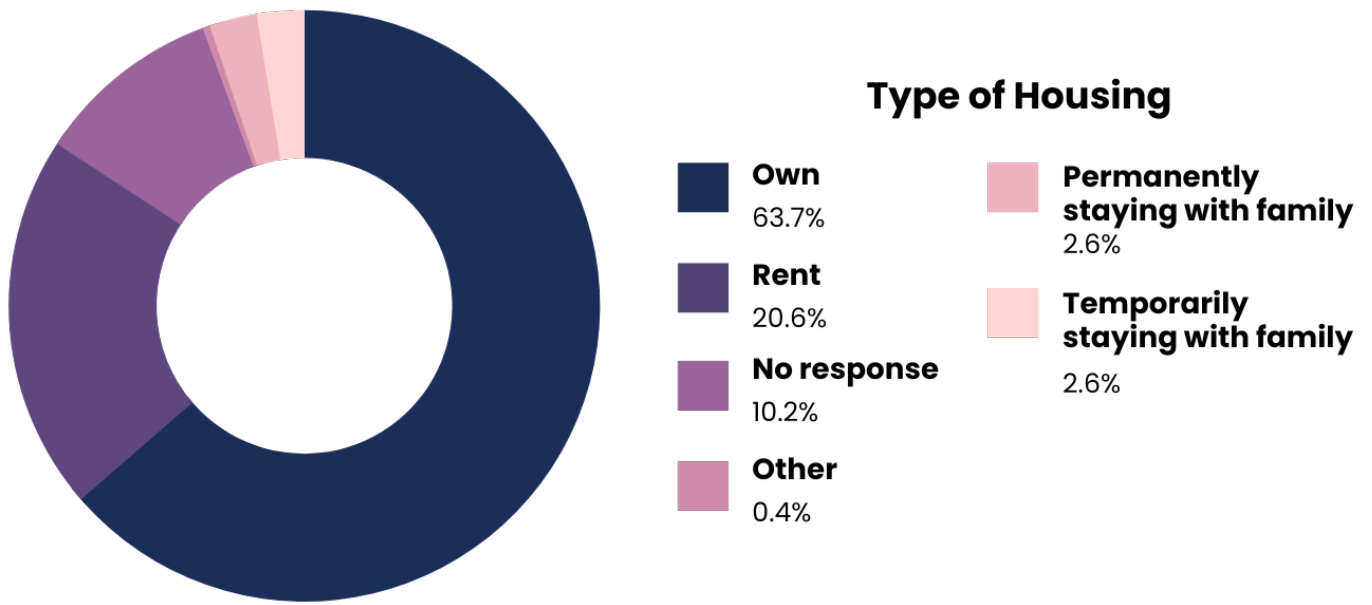
Household Size



Type of Housing

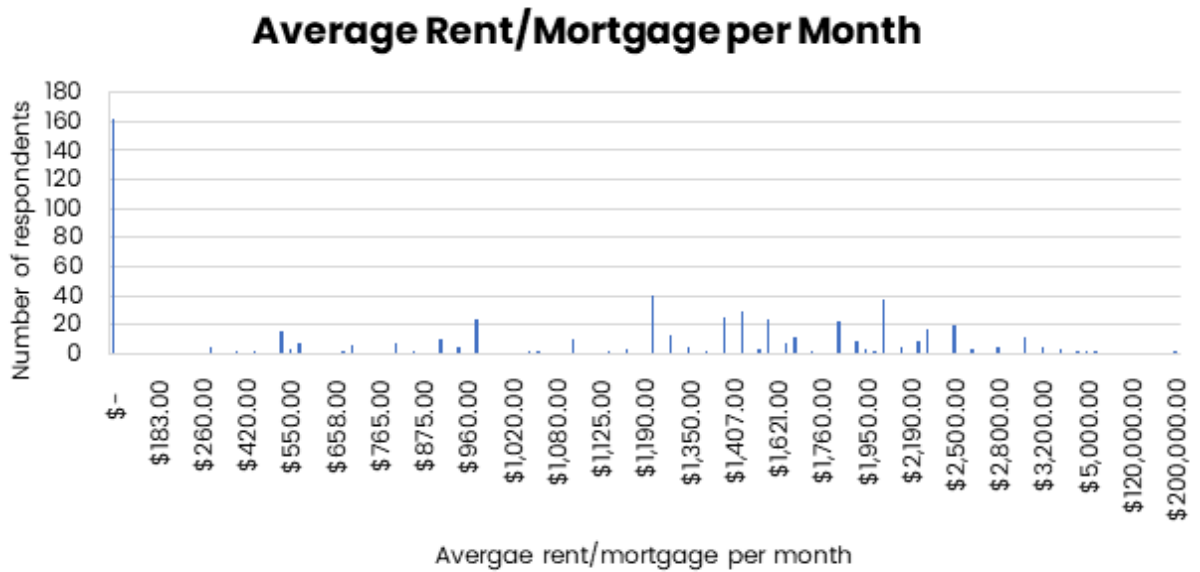
What type of housing do you live in?

Type of Housing	Count	Percentage
Own	538	63.7%
Rent	174	20.6%
No response	86	10.2%
Permanently staying with family	22	2.6%
Temporarily staying with family	22	2.6%
Other	3	0.4%



Average rent/mortgage per month

On Average, how much do you spend on rent/mortgage per month?

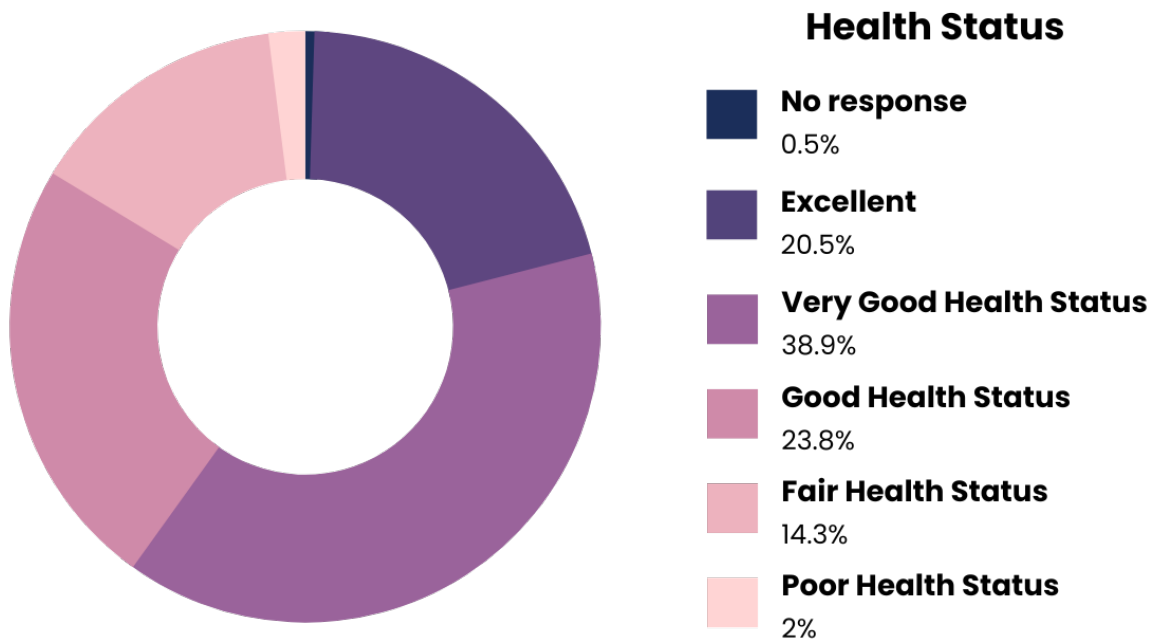


Overall Health

Self-Reported Health Status

Would you say that, in general, your health is:

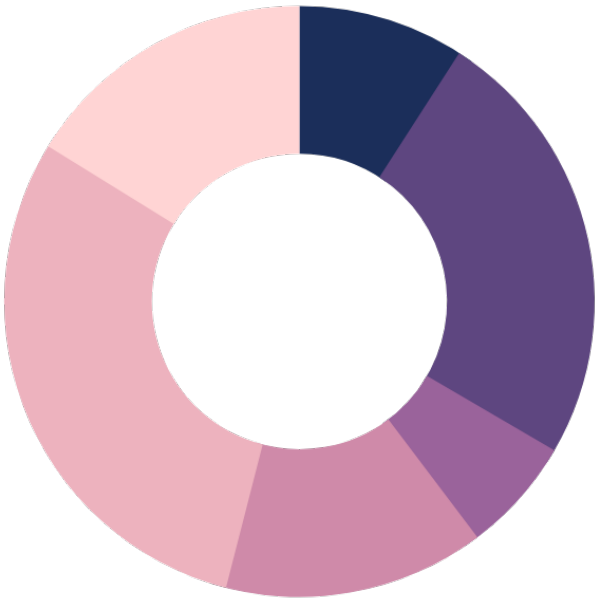
Health Status	Count	Percentage
No response	4	0.5%
Excellent health status	173	20.5%
Fair health status	121	14.3%
Good health status	201	23.8%
Poor health status	17	2.0%
Very good health status	329	38.9%



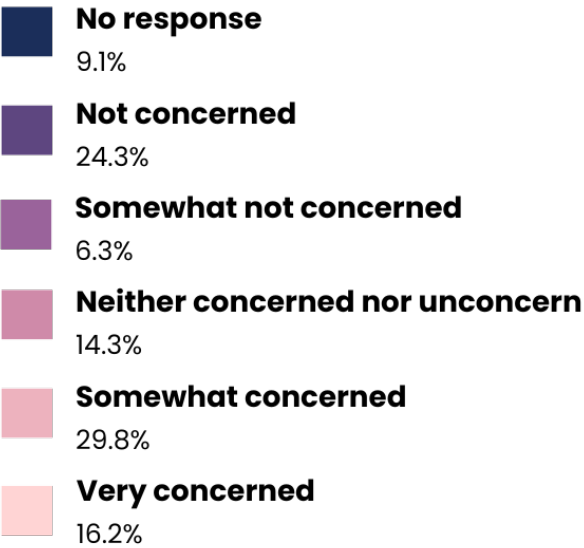
Concern about a child’s or family member’s health

In the past 30 days, how concerned have you been about your child’s or another family member’s health?

Health Status	Count	Percentage
No response	77	9.1%
Neither concerned nor unconcern	121	14.3%
Not concerned	205	24.3%
Somewhat concerned	252	29.8%
Somewhat not concerned	53	6.3%
Very concerned	137	16.2%



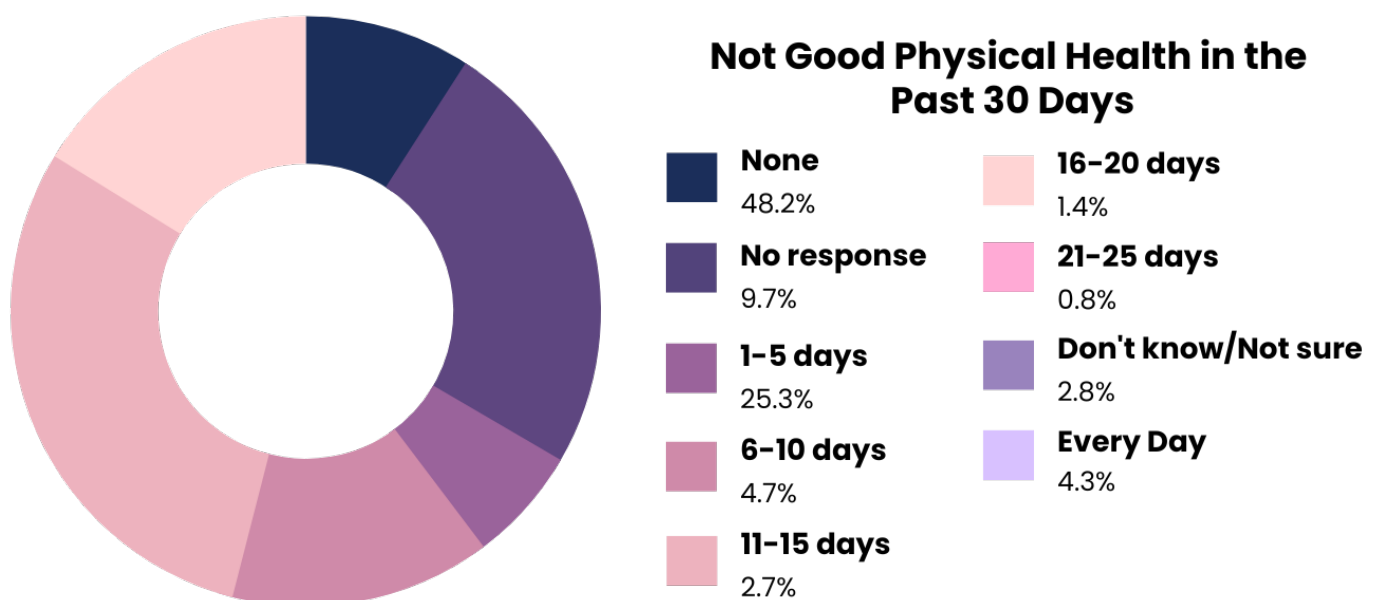
Concern for Child's or Family Member's Health



Not good physical health in the past 30 days

In the past 30 days, how many days was your physical health not good (includes physical illness and injury)?

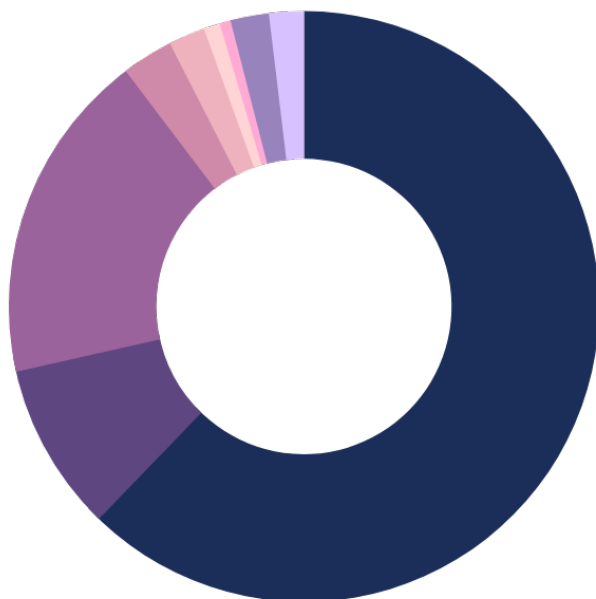
Not Good Physical Health Days	Count	Percentage
1-5 days	214	25.3%
6-10 days	40	4.7%
11-15 days	23	2.7%
16-20 days	12	1.4%
21-25 days	7	0.8%
Every day	24	2.8%
Don't know/Not sure	36	4.3%
None	407	48.2%



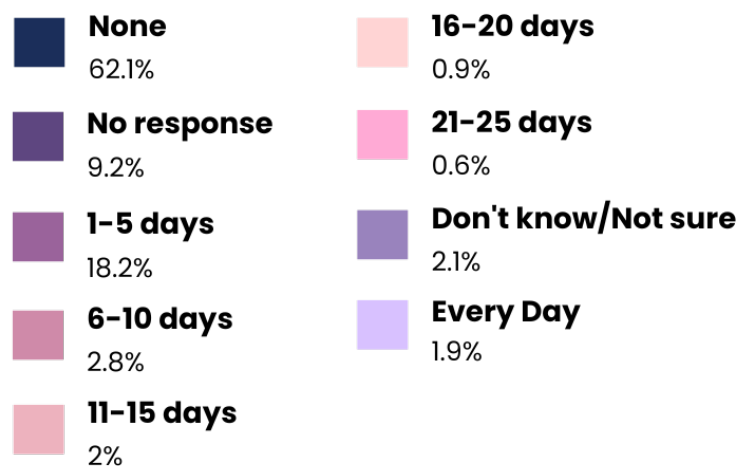
Poor physical health interfering with usual activities in the past 30 days

In the past 30 days, for how many days did poor physical health keep you from doing your usual activities, such as self-care, work, or recreation?

Poor Physical Health Days	Count	Percentage
1-5 days	154	18.2%
6-10 days	24	2.8%
11-15 days	17	2.0%
16-20 days	8	0.9%
21-25 days	5	0.6%
Every day	16	1.9%
Don't know/Not sure	18	2.1%
None	525	62.1%
No response	78	9.2%



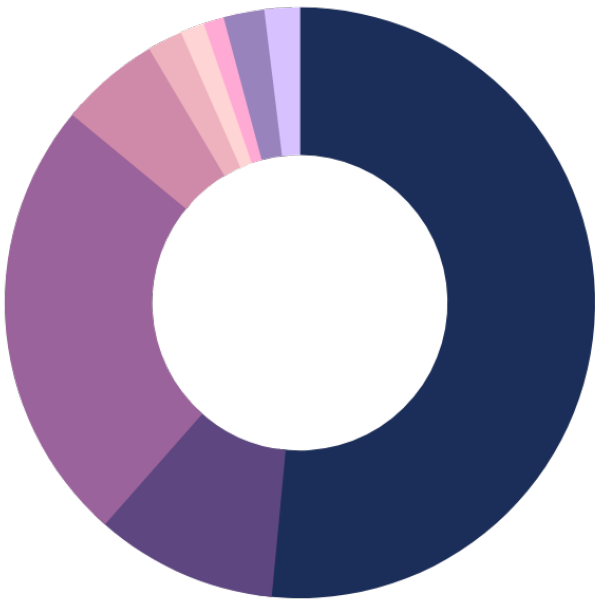
Poor Physical Health in the Past 30 Days



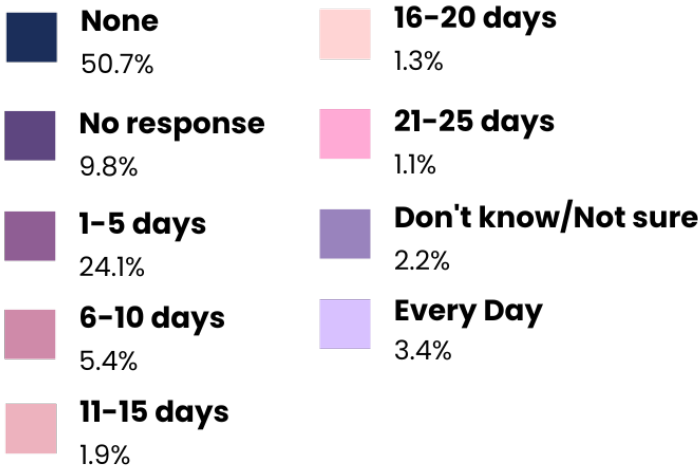
Not good mental health in the past 30 days

In the past 30 days, how many days was your mental health not good (includes stress, depression, and problems with emotions)?

Not Good Mental Health Days	Count	Percentage
1-5 days	204	24.1%
6-10 days	46	5.4%
11-15 days	16	1.9%
16-20 days	11	1.3%
21-25 days	9	1.1%
Every day	29	3.4%
Don't know/Not sure	19	2.2%
None	428	50.7%
No response	83	9.8%



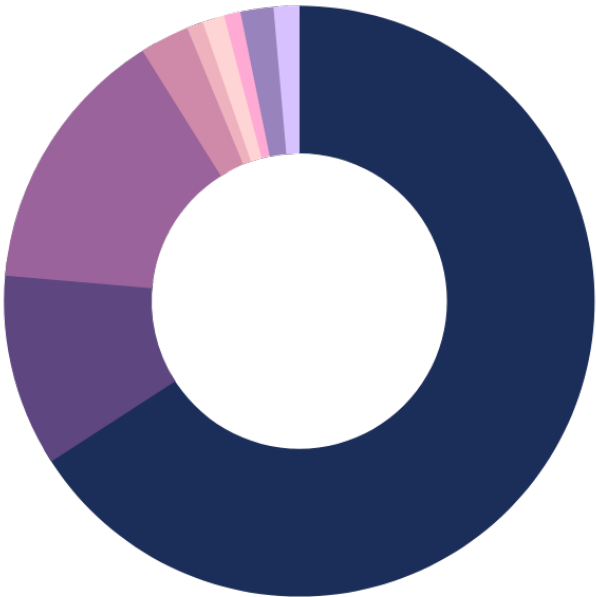
Not Good Mental Health in the Past 30 Days



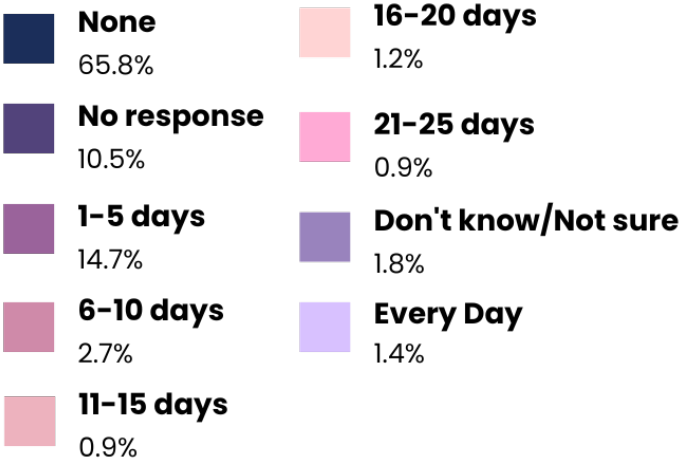
Poor mental health interfering with usual activities

In the past 30 days, for how many days did poor mental health keep you from doing your usual activities, such as self-care, work, or recreation?

Poor Mental Health Days	Count	Percentage
1-5 days	124	14.7%
6-10 days	23	2.7%
11-15 days	8	0.9%
16-20 days	10	1.2%
21-25 days	8	0.9%
Every day	12	1.4%
Don't know/Not sure	15	1.8%
None	556	65.8%
No response	89	10.5%



Poor Mental Health in the Past 30 Days



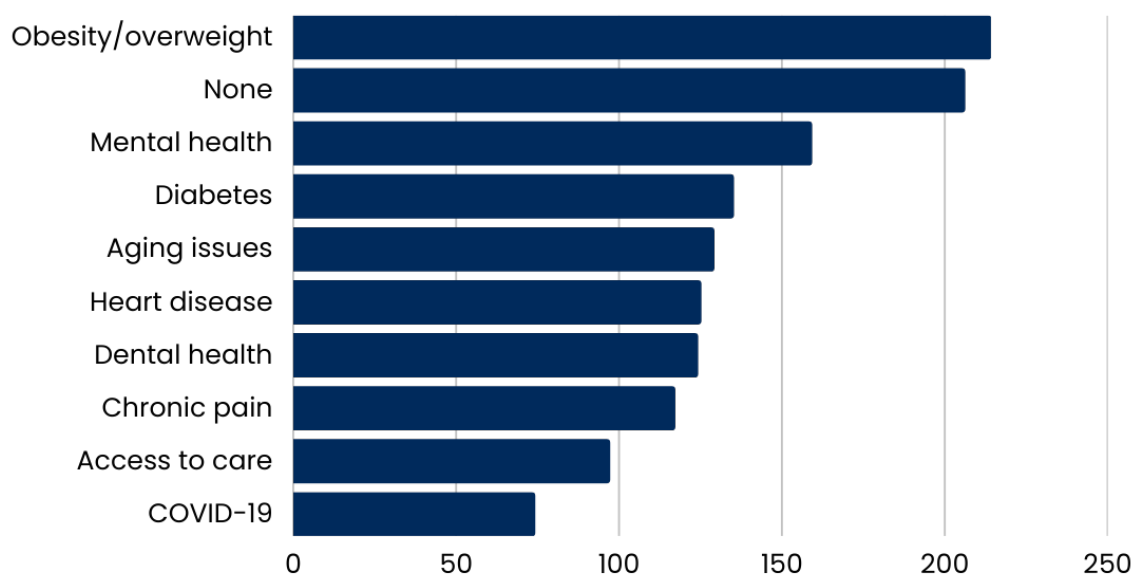
Top 3 Health Issues

What are your top 3 health issues? Choose up to 3.

Top 3 Health Issues Responses	Count	Percentage
Obesity/overweight	214	25.3%
None	206	24.4%
Mental health	159	18.8%
Diabetes	135	16.0%
Aging issues, such as Alzheimer's disease, hearing loss, memory loss or arthritis	129	15.3%
Heart disease	125	14.8%
Dental health	124	14.7%
Chronic pain	117	13.8%
Access to care	97	11.5%
COVID-19	74	8.8%
Respiratory diseases (Asthma, COPD, etc.)	50	5.9%
Other	46	5.4%
Injuries	44	5.2%
Cancer	39	4.6%

Top 3 Health Issues Responses	Count	Percentage
Tobacco	14	1.7%
Maternal infant health	13	1.5%
Gastrointestinal	11	1.3%
Stroke	10	1.2%
Allergy/immune system	10	1.2%
Drug/alcohol abuse	9	1.1%
Thyroid disease	9	1.1%
Vision	4	0.5%
Sexually transmitted diseases	3	0.4%
Kidney disease	3	0.4%

Top 10 Health Issues

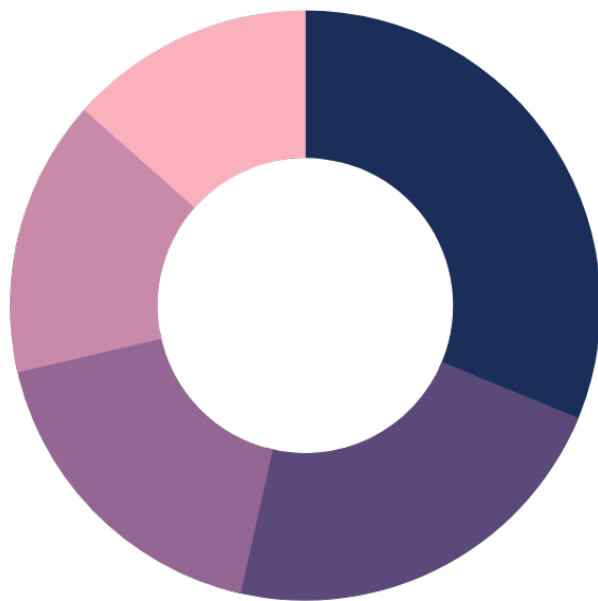


Access to Health

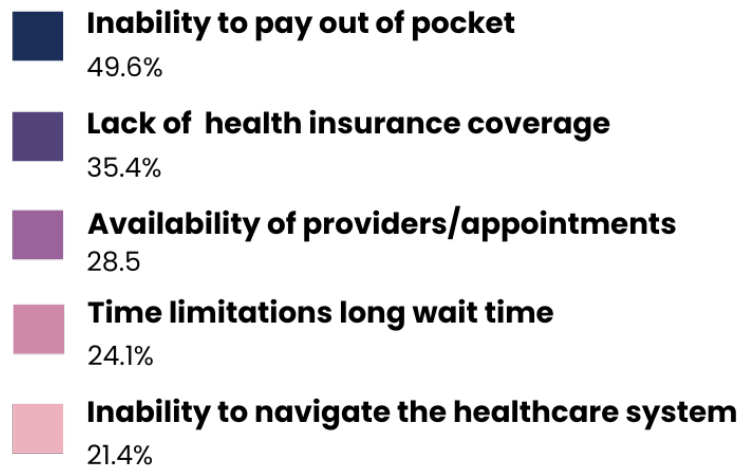
Barriers to accessing healthcare

What are the 3 most significant barriers that keep you from accessing healthcare when you need it? Choose up to 3.

Barriers to Accessing Health	Count	Percentage
Inability to pay out of pocket	419	49.6%
Lack of health insurance coverage	299	35.4%
Availability of providers/appointments	241	28.5%
Time limitations long wait time	204	24.1%
Inability to navigate the healthcare system	181	21.4%
None/no barriers	181	21.4%
Lack of transportation	86	10.2%
Basic needs not met (food/shelter)	80	9.5%
Lack of trust	61	7.2%
Language/cultural barriers	48	5.7%
Lack of childcare	44	5.2%
Immigration barriers	27	3.2%
Other	6	0.7%

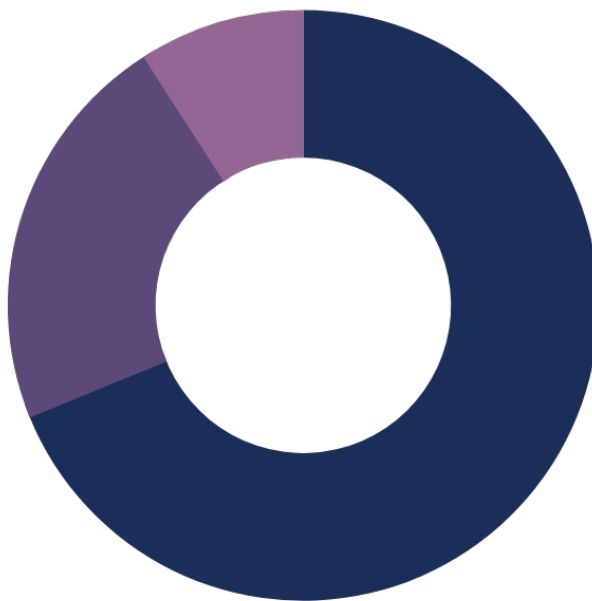


Top 5 Significant Barriers from Accessing Healthcare

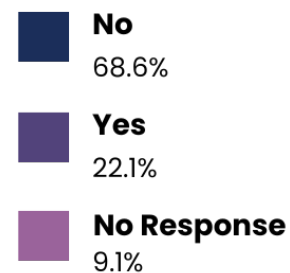


Access to Medical Care

In the last year, was there a time when you or a family member needed medical care but were not able to get it?



Needed Medical Care but not able to get it



Access to Healthcare	Count	Percentage
No	581	68.8%
Yes	187	22.1%
No Response	77	9.1%

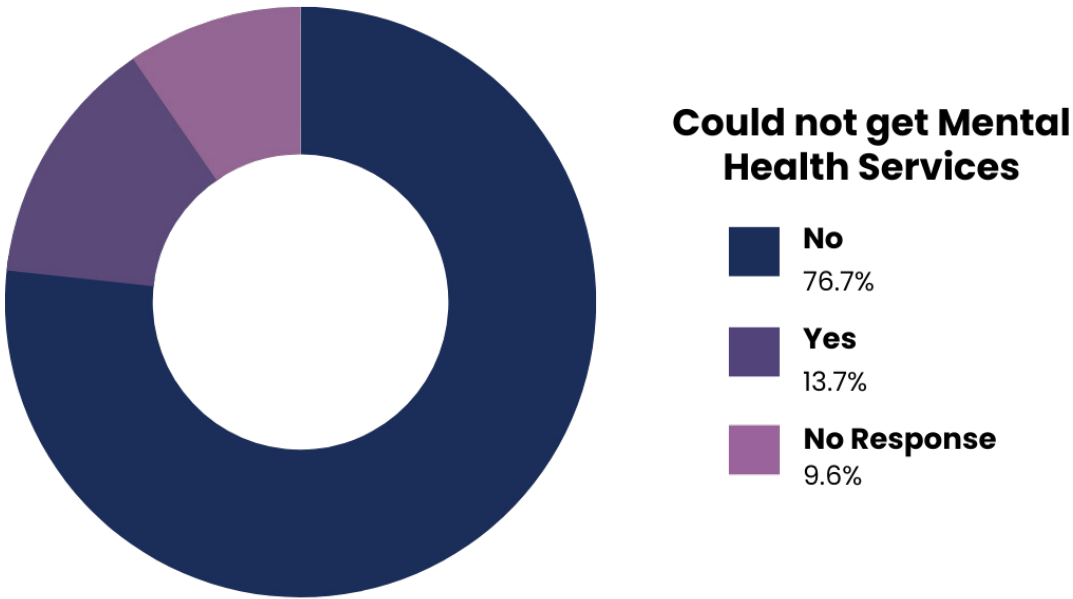
If you answered “yes” to the previous question, why weren’t you able to get medical care? Choose all that apply.

Responses	Count	Percentage
I didn't have health insurance	70	37.4%
I couldn't afford to pay my co-pay	60	32.1%
Too long to wait for appointment	52	27.8%
No availability	33	17.6%
No ability to accommodate schedule	32	17.1%
The doctor or clinic refused to...	25	13.4%
I didn't have any way to get to...	15	8.0%
No or unreliable childcare	15	8.0%
Fear	13	7.0%
Other	12	6.4%
Language Barriers	4	2.1%
I didn't know how to find a doctor	3	1.6%

Access to Medical Care

In the last year, was there a time when you or a family member needed medical care but were not able to get it?

Access to Mental Health Services	Count	Percentage
No	648	76.7%
Yes	116	13.7%
No Response	81	9.6%



If you answered “yes” to the previous question, why weren’t you able to get medical care? Choose all that apply.

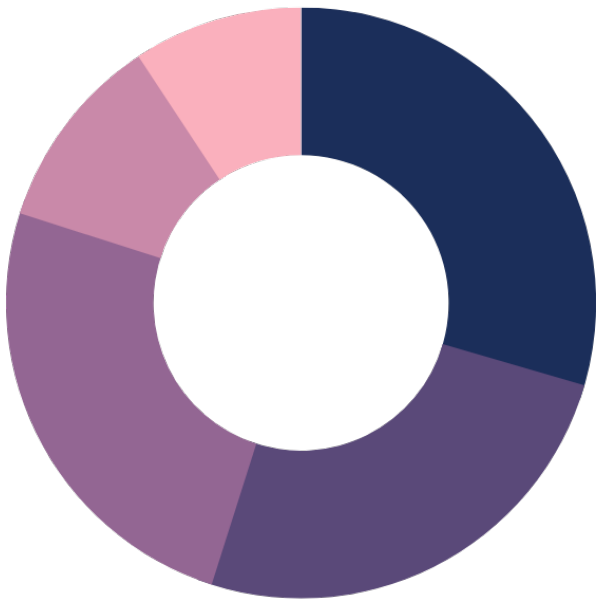
Response	Count	Percentage
I couldn't afford to pay my co-pay	39	33.6%
I didn't have insurance	37	31.9%

Response	Count	Percentage
Too long to wait for an appointment	31	26.7%
No availability	24	20.7%
No ability to accommodate schedule (e.g. could not afford to take time off work or no after hours or weekend appointments)	18	15.5%
No or unreliable childcare	16	13.8%
The service provider refused to take my insurance or Medicaid	15	12.9%
I didn't know how to find a service provider	13	11.2%
Embarssament	12	10.3%
Fear	12	10.3%
I didn't have any way to get to a service provder	10	8.6%
Other	6	5.2%
Language Barriers	2	1.7%

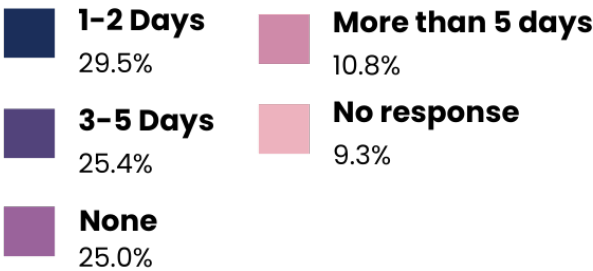
Deliberate Exercise

In the last week, how many times did you participate in deliberate exercise, (such as, jogging, walking, golf, weightlifting, fitness classes) that lasted for at least 30 minutes or more?

Days of Deliberate Exercise	Count	Percentage
1-2 Days	249	29.5%
3-5 Days	215	25.4%
None	211	25.0%
More than 5 days	91	10.8%
No response	79	9.3%



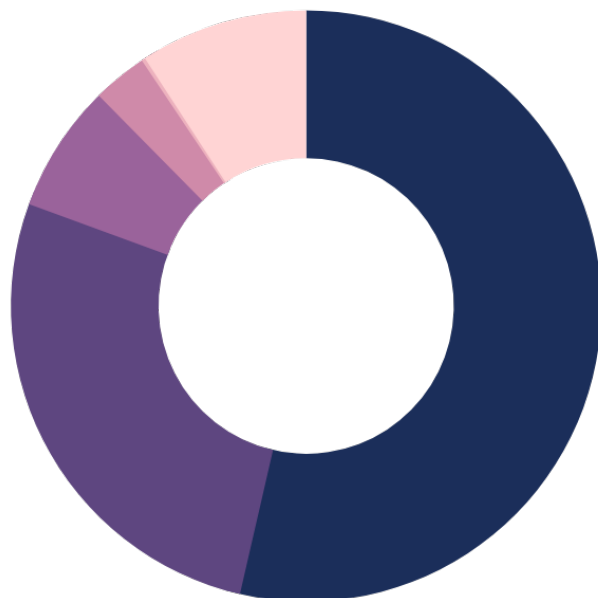
Deliberate exercise that lasted 30 minutes or more in the last week



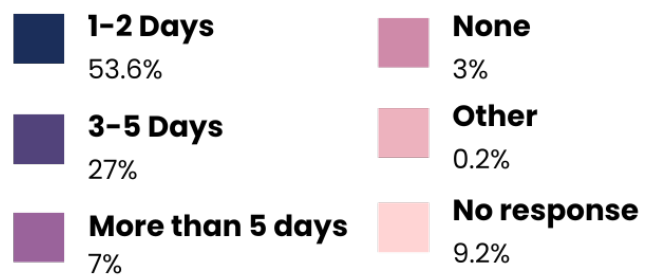
Nutrition- Fruits & Vegetable Consumption

On a typical day, how many servings of fruits and/or vegetables do you have?

Servings	Count	Percentage
1-2 Days	453	53.6%
3-5 Days	228	27%
More than 5 days	59	7.0%
None	25	3.0%
Other	2	0.2%
No response	78	9.2%



Fruits & Vegetable Servings Consumption per Day



Access to Health

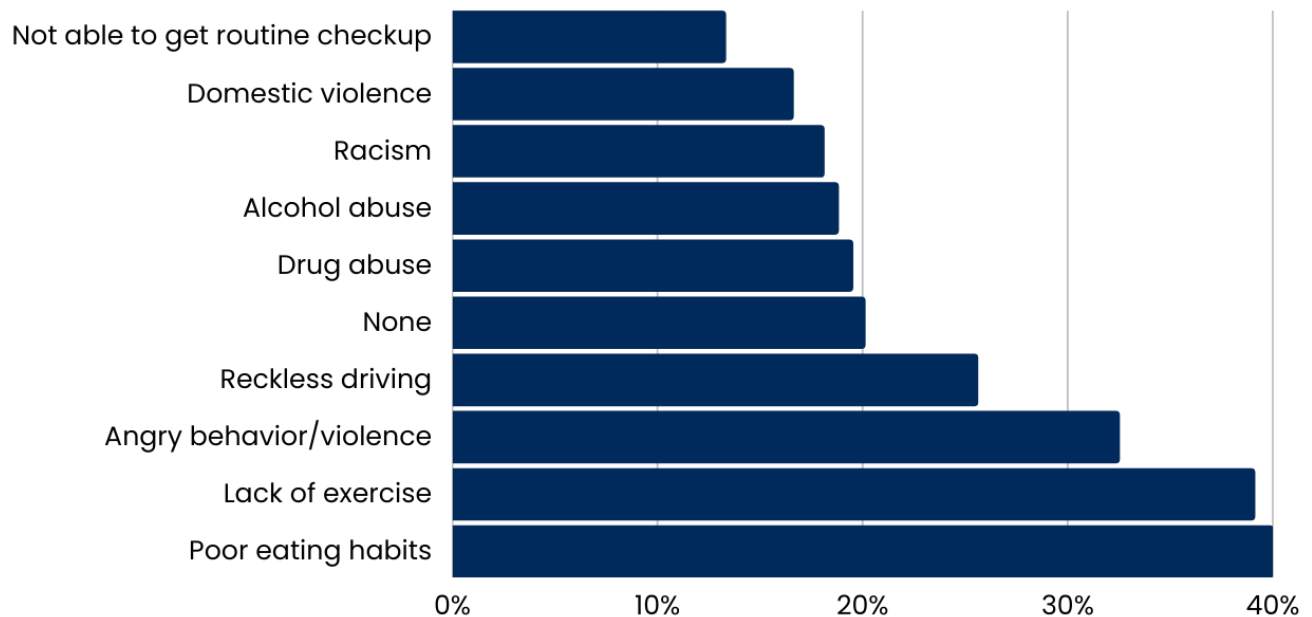
Barriers to accessing healthcare

What are the 3 most significant barriers that keep you from accessing healthcare when you need it? Choose up to 3.

Responses	Count	Percentage
Poor eating habits	338	40.0%
Lack of exercise	330	39.1%
Angry behaviors/violence	275	32.5%
Reckless driving	216	25.6%
None	170	20.1%
Drug abuse	165	19.5%
Alcohol Abuse	159	18.8%
Racism	153	18.1%
Domestic Violence	140	16.6%
Not being able to get routine checkup	112	13.3%
Smoking	112	13.3%
Vaping	85	10.1%
Child abuse	76	9.0%
Elder abuse (physical, emotional, fianancial, sexual)	52	6.2%

Responses	Count	Percentage
Risk sexual behavior	41	4.9%
Other	16	1.9%
Don't Know+	0	0.7

Top 10 Concerning Unhealthy Behaviors in the Community



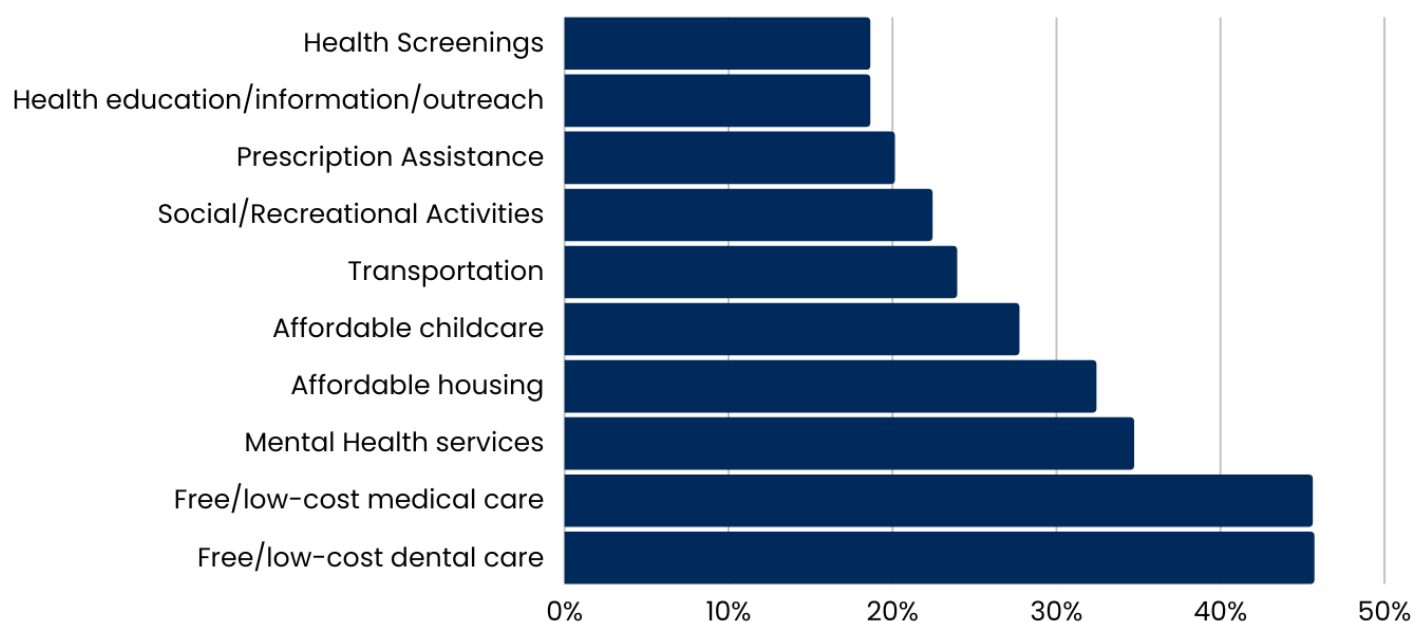
Missing Resources or Services in the Community

*In relation to health and quality of life, what resources or services do you think are missing in the community?
Check all that apply.*

Responses	Count	Percentage
Free/low cost dental care	386	45.7%
Free/low cost medical care	385	45.6%
Mental health services	293	34.7%

Responses	Count	Percentage
Affordable housing	274	32.4%
Affordable childcare	234	27.7%
Transportation	202	23.9%
Social/recreational activities	189	22.4%
Prescription assistance	170	20.1%
Health education/information/outreach	157	18.6%
Health screenings	157	18.6%
Primary care providers	146	17.3%
Drug and alcohol abuse services	111	13.1%
None	104	2.3%
Bilingual Services	103	12.2%
Medical specialist	103	12.2%
Other	9	1.1%
Elder assistance and community	7	0.8%
Healthy Food	4	0.5%
Don't Know	2	0.2%
Walkability	2	0.2%

Top 10 Resources/Services Missing from the Community



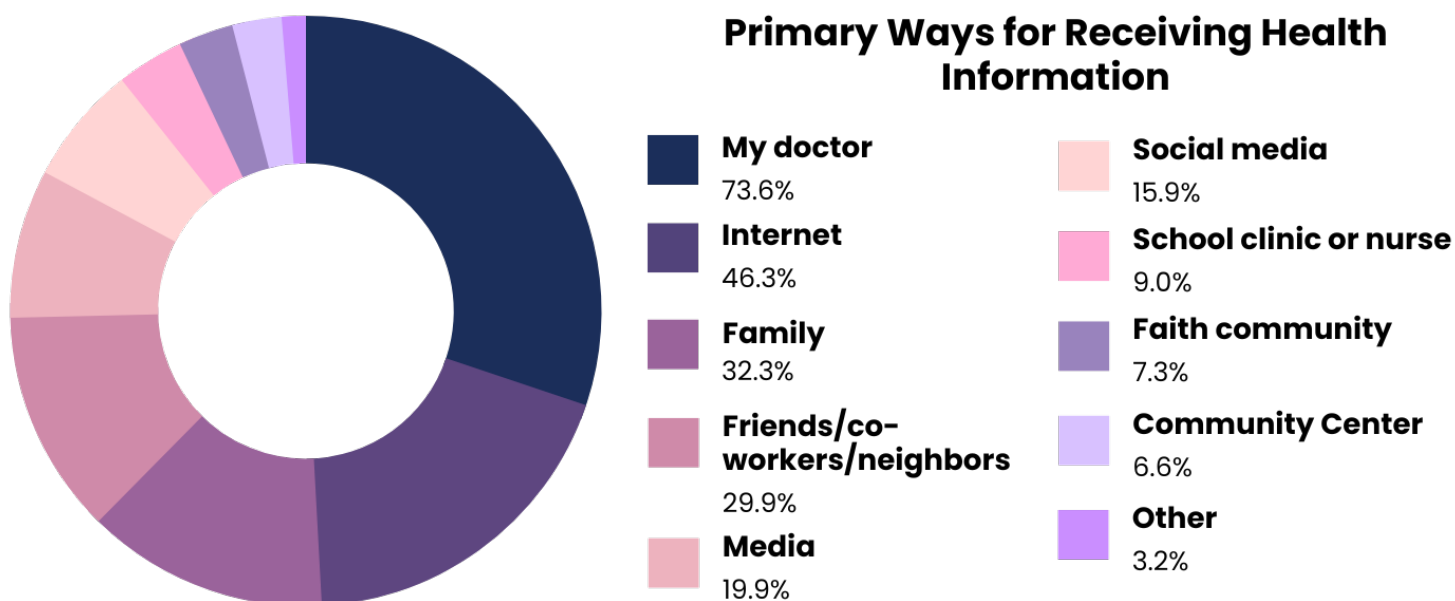
Community Services

Primary Ways to Receive Health Information

What are your primary ways for receiving health information? Choose 3.

Responses	Count	Percentage
My doctor (doctor's office, local clinic)	622	73.6%
Internet	391	46.3%
Family	273	32.3%
Friends/co-workers/neighbors	253	29.9%
Media (radio/TV, magazines, etc.)	160	18.9%
Social media	134	15.9%
School clinic or nurse	76	9.0%

Responses	Count	Percentage
Faith community	62	7.3%
Community center	56	6.6%
Other	27	3.2%



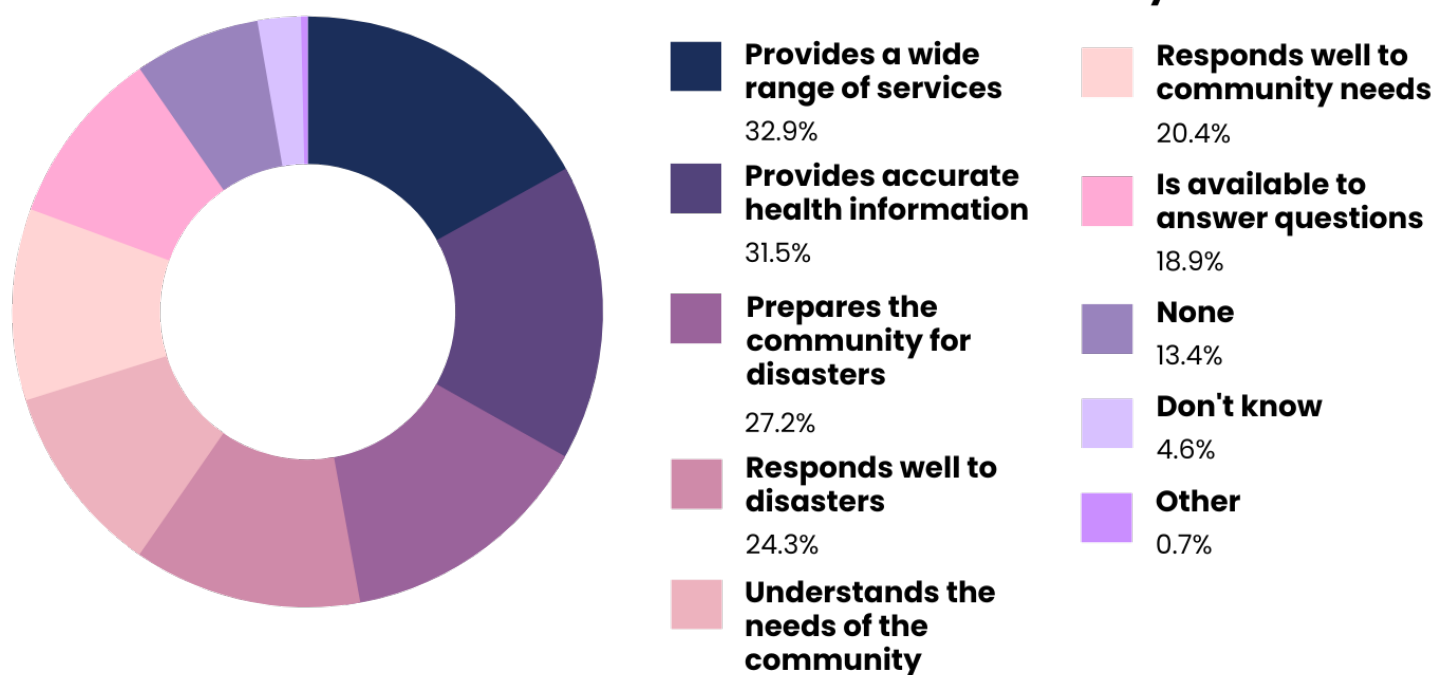
Missing Resources or Services in the Community

In relation to health and quality of life, what resources or services do you think are missing in the community? Check all that apply.

Responses	Count	Percentage
Provides a wide range of services	278	32.9%
Provides accurate health information	266	31.5%

Responses	Count	Percentage
Prepares the community for disasters	230	27.2%
Responds well to disasters	205	24.3%
Understands the needs of the community	172	20.4%
Responds well to community needs	172	20.4%
Is available to answer questions	160	18.9%
None	113	13.4%
Don't know	39	4.6%
Other	6	0.7%

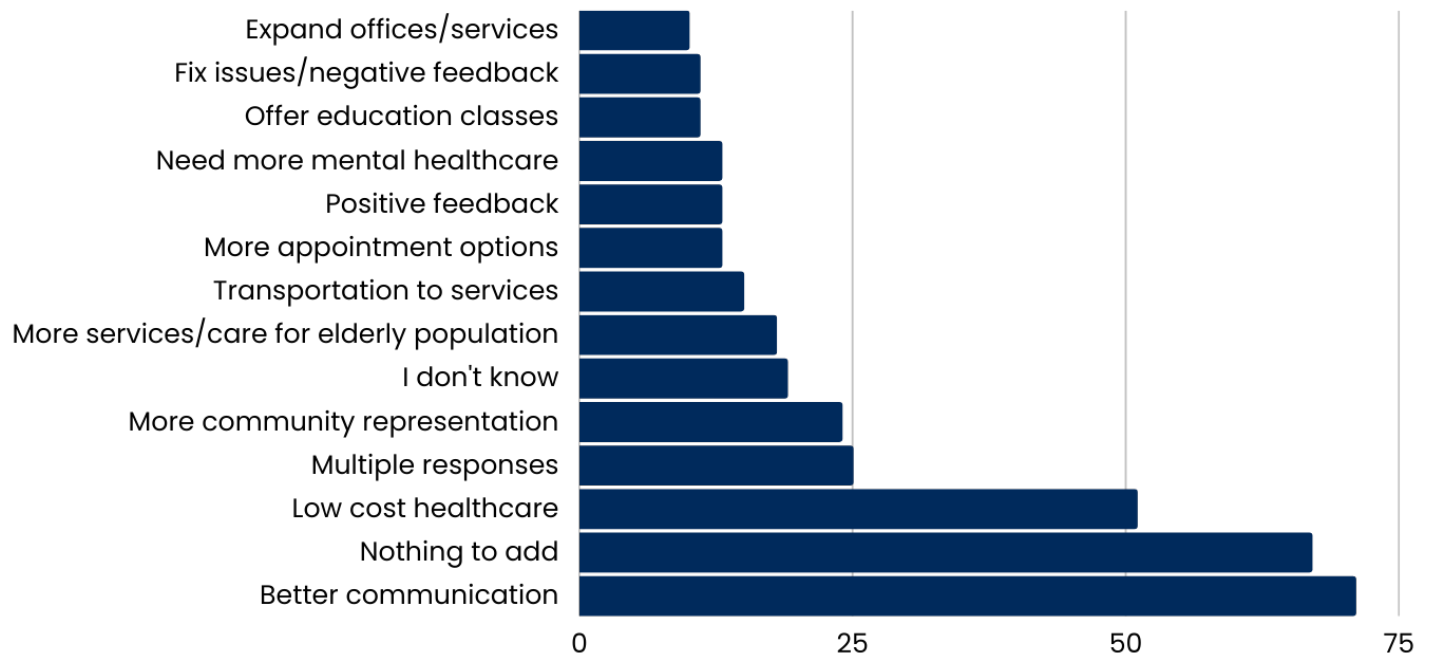
Servicing the Health Needs of the Community



Improving Fort Bend County Health & Human Services

Please describe what Fort Bend County Health and Human Services can do to better serve the health and wellness needs of the community.

Open Response Themes



Needed Health Education in the Community

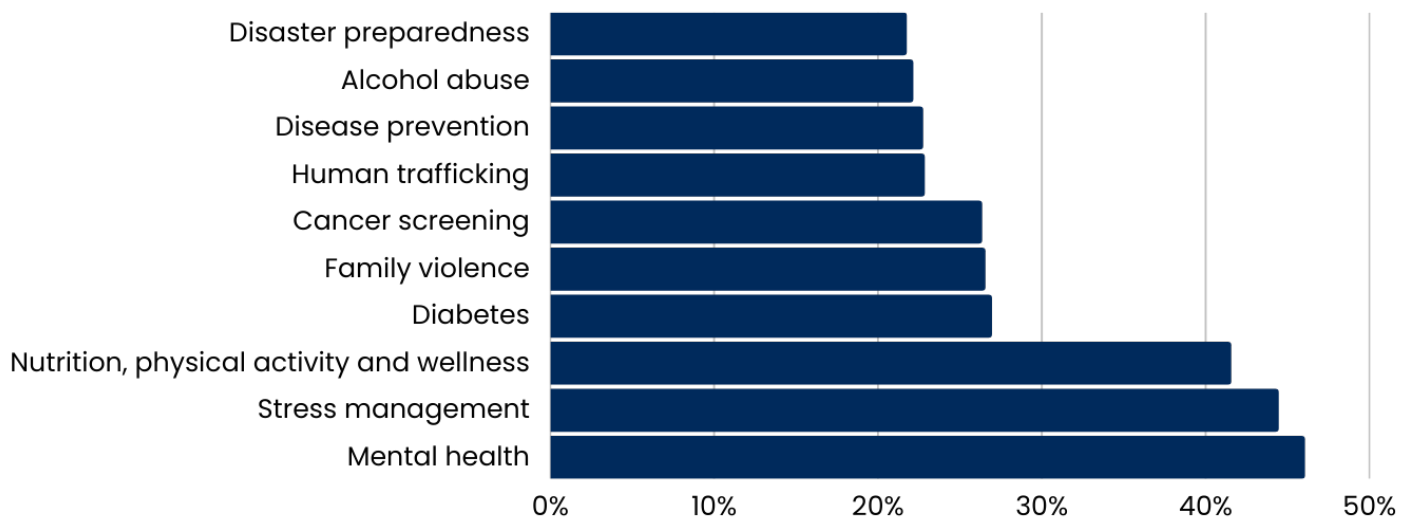
What HEALTH EDUCATION services are most needed in your community? Choose all that apply.

Responses	Count	Percentage
Mental health	389	46.0%
Stress management	375	44.4%
Nutrition, physical activity and wellness	351	41.5%
Diabetes	227	26.9%
Family violence	224	26.5%
Cancer screening	222	26.3%

Responses	Count	Percentage
Human trafficking	193	22.8%
Disease prevention	192	22.7%
Alcohol abuse	187	22.1%
Disaster preparedness	183	21.7%
Drug abuse	171	20.2%
Alzheimer's disease	160	18.9%
Child abuse	154	18.2%
COVID-19	138	16.3%
Smoking cessation and or prevention	133	15.7%
Maternal/infant health	119	14.1%
Sexually transmitted diseases	106	12.5%
Asthma	78	9.2%
None	78	9.2%
HIV/AIDS	72	8.5%
Other	17	2.0%

Responses	Count	Percentage
Don't know	10	1.2%
Elder health	4	0.5%
Heart disease	2	0.2%

Top 10 Needed Health Education Services



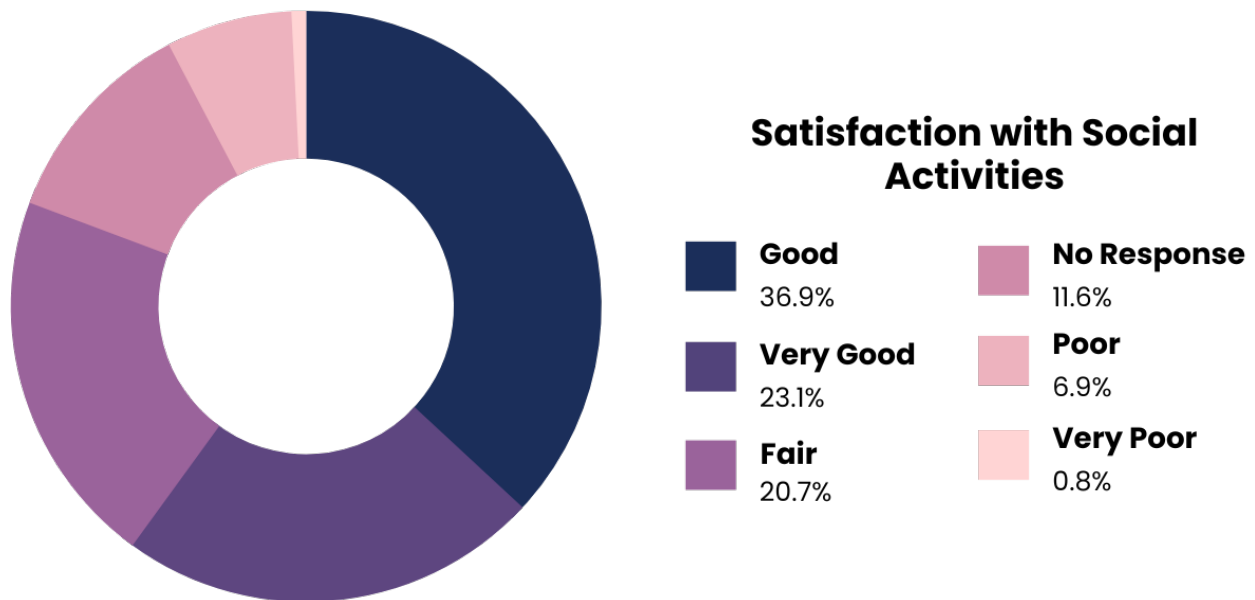
Social Support

Satisfaction with Social Activities

In general, how would you rate your satisfaction with your social activities?

Satisfaction with Social Activities	Count	Percentage
Good	312	36.9%
Very Good	195	23.1%
Fair	175	20.7%
No Response	98	11.6%

Satisfaction with Social Activities	Count	Percentage
Poor	58	6.9%
Very Poor	7	0.8%

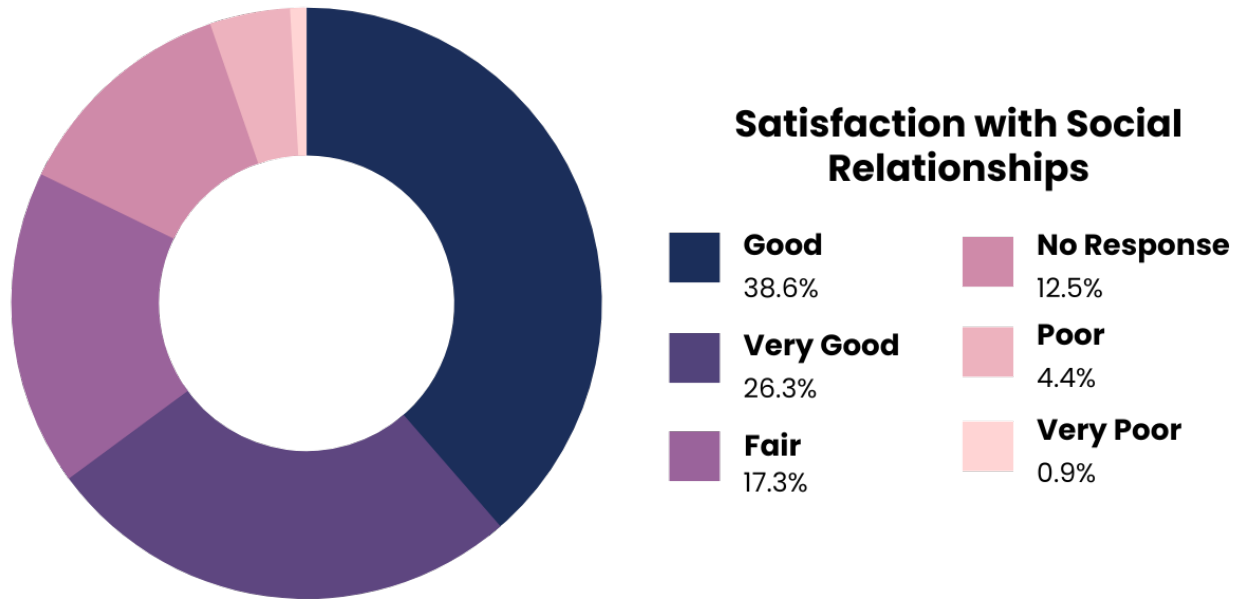


Satisfaction with Social Relationships

In general, how would you rate your satisfaction with your social relationships?

Satisfaction with Social Relationships	Count	Percentage
Good	326	38.6%
Very Good	222	26.3%
Fair	146	17.3%
No Response	106	12.5%

Satisfaction with Social Relationships	Count	Percentage
Poor	37	4.4%
Very Poor	8	0.9%

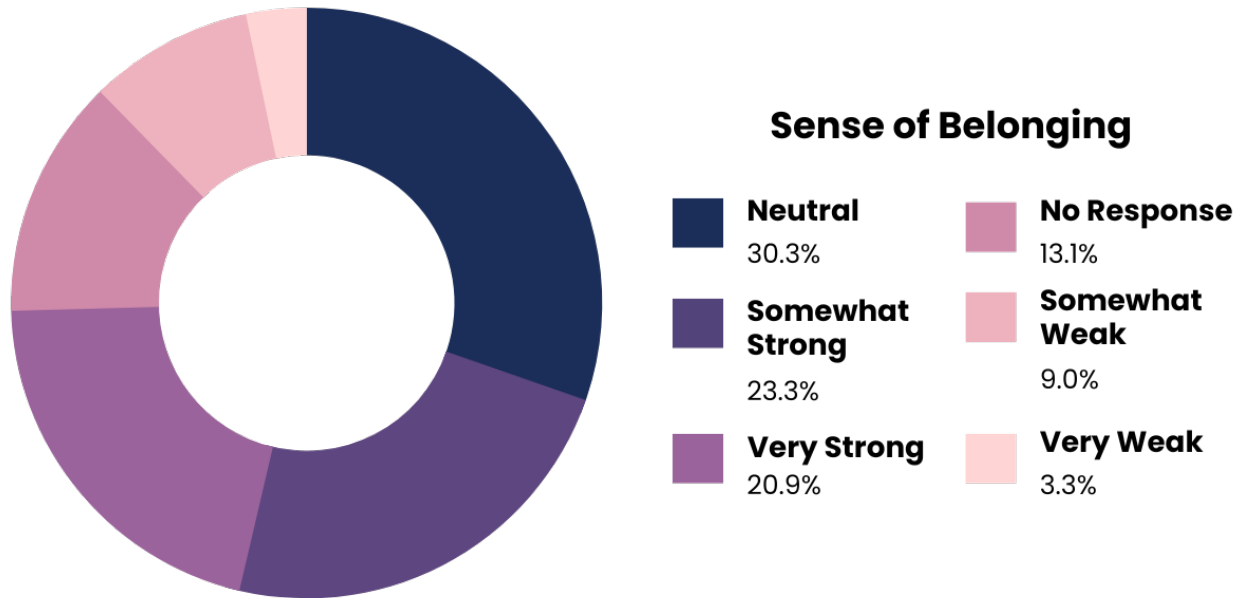


Sense of Belonging

How would you rate your sense of belonging to your local community?

Sense of Belonging	Count	Percentage
Neutral	256	30.3%
Somewhat Strong	197	23.3%
Very Strong	177	20.9%
No Response	111	13.1%

Sense of Belonging	Count	Percentage
Somewhat Weak	76	9.0%
Very Weak	28	3.3%



Household Issues

Some of the following may have been a problem for you or someone in your household. If it has been a problem in your household during the past 12 months, please tell us how much of a problem it has been, (check one on each line).

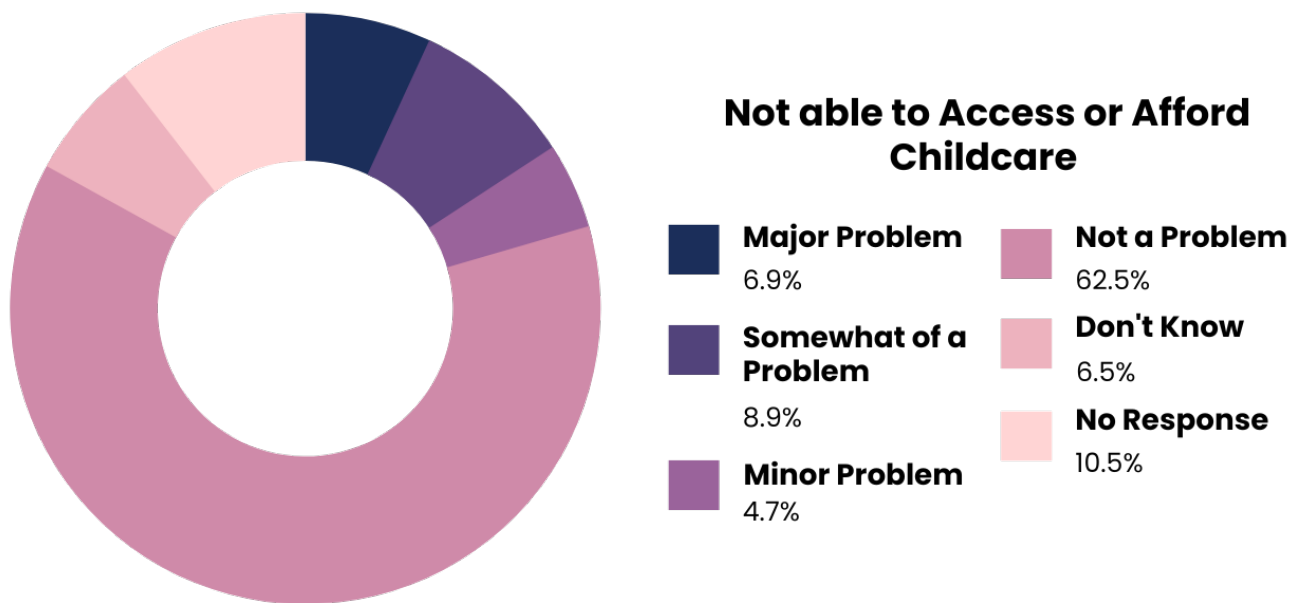
The following table was presented in the paper version of the survey:

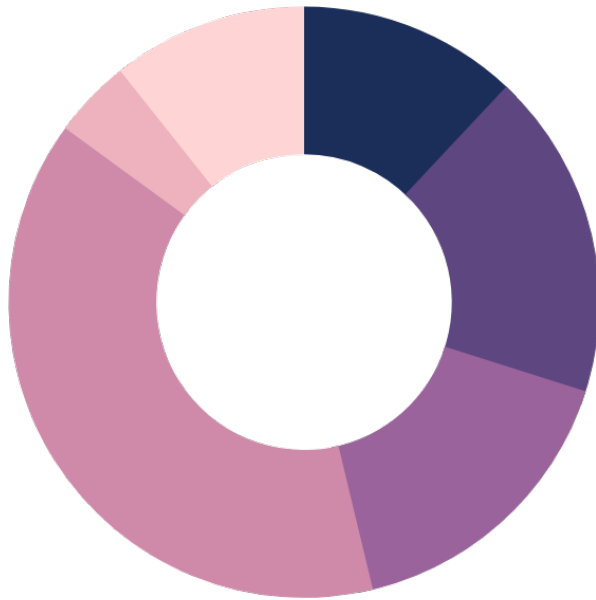
	Major Problem	Somewhat of a problem	Minor Problem	Not a Problem	Don't Know
Not able to access or afford childcare					
Mental health issues, such as depression or anxiety					

	Major Problem	Somewhat of a problem	Minor Problem	Not a Problem	Don't Know
Not having enough money for food					
Not able to afford or access transportation (to work, school, or healthcare services)					
Not able to afford housing					
Feeling safe in you home and community					

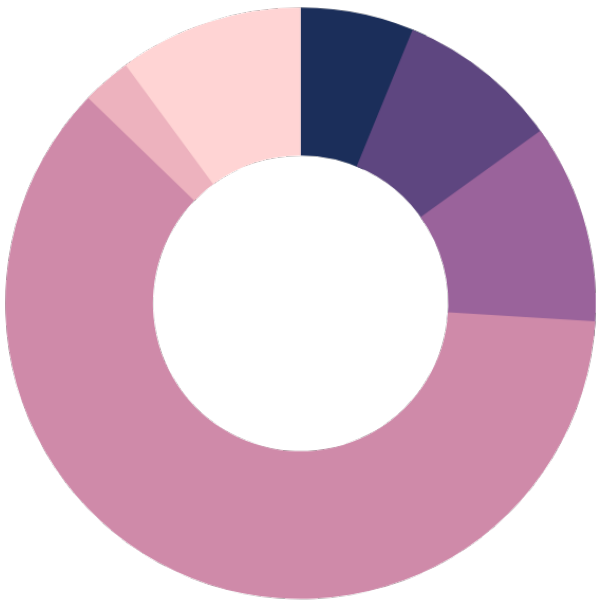
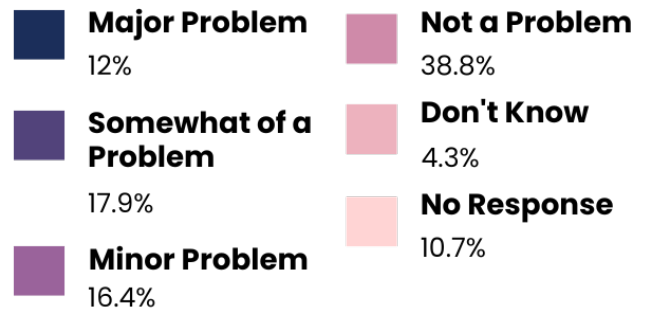
Counts						
	Major problem	Somewhat of a problem	Minor Problem	Not a problem	Don't know	No response
Childcare	58	75	40	528	55	89
Mental Health Issues	101	151	139	328	36	90
Food	52	75	92	518	36	85
Transportation	51	54	78	535	34	93
Housing	60	72	75	519	23	96
Community Safety	37	75	155	473	18	87

Percentages						
	Major problem	Somewhat of a problem	Minor Problem	Not a problem	Don't know	No response
Childcare	6.9%	8.9%	4.7%	62.5%	6.5%	10.5%
Mental Health Issues	12.0%	17.9%	16.4%	38.8%	4.3%	10.7%
Food	6.2%	8.9%	10.9%	61.3%	2.7%	10.1%
Transportation	6.0%	6.4%	9.2%	63.3%	4.0%	11.0%
Housing	7.1%	8.5%	8.9%	61.4%	2.7%	11.4%
Community Safety	4.4%	8.9%	18.3%	56.0%	2.1%	10.3%

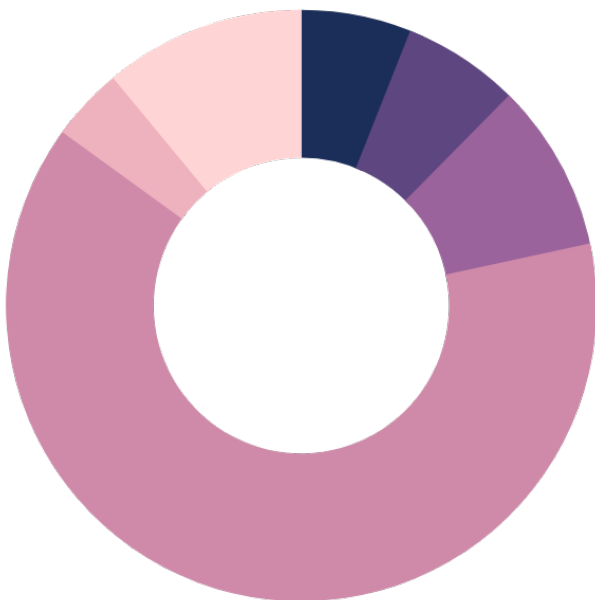
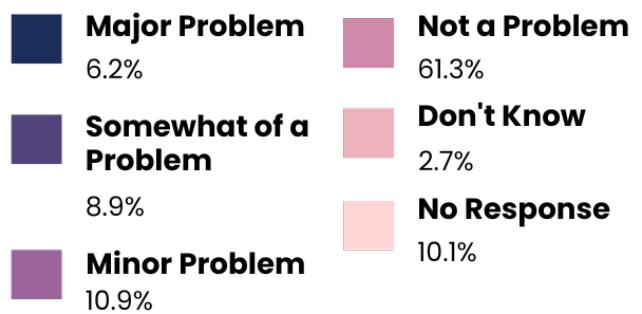




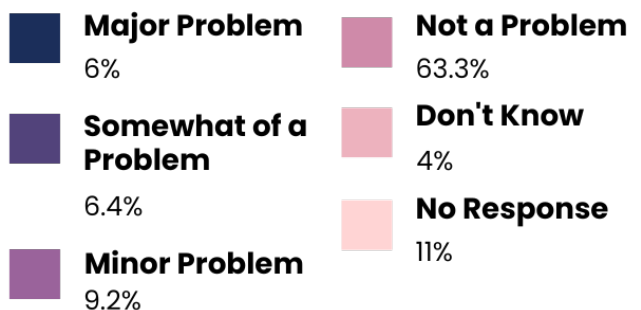
Mental health issues, such as depression or anxiety

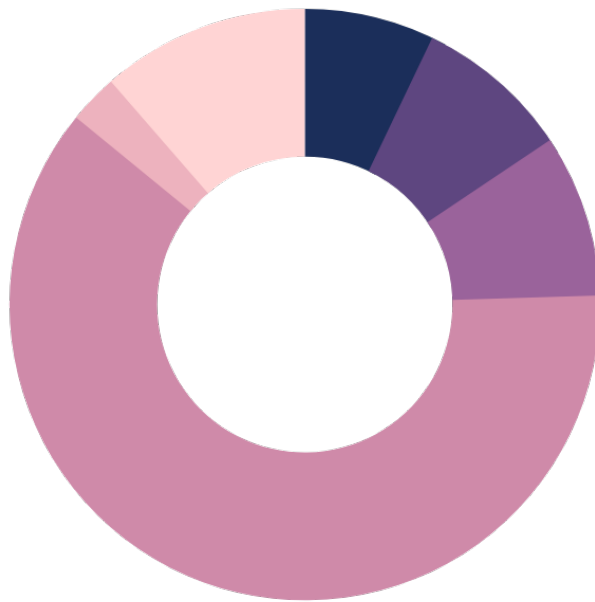


Not having enough money for food

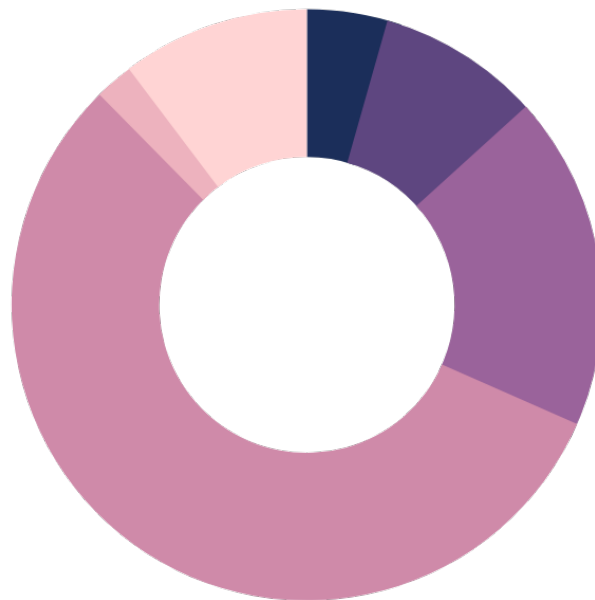
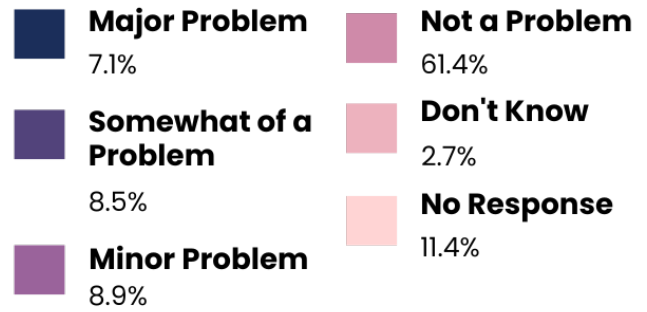


Not able to afford or access transportation (to work, school, or health care services)

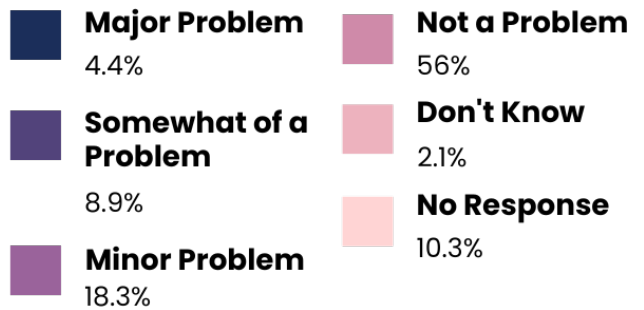




Not able to afford housing



Feeling safe in your home and community



APPENDIX D

Key Informant Interview Guidelines and Questions

INTRODUCTION (to be read by the interviewer)

Good morning/afternoon/evening [NAME OF INFORMANT]. My name is [NAME OF INTERVIEWER], and I am with Fort Bend County Health and Human Services, the local public health department for Fort Bend County. My colleague [NAME OF NOTE TAKER] is also on the line. Thank you for speaking with us today.

I am going to read the required introduction information. It is a little lengthy but important prior to beginning the questions.

As we mentioned in our interview invitation, Fort Bend County Health and Human Services is coordinating an interview initiative to for a community health assessment.

The mission of Fort Bend County Health & Human Services (HHS) is to promote and protect the health and well-being of the residents of Fort Bend County through community engagement, disease prevention and intervention, public health emergency preparedness and response, and helping to assure the equitable provision of basic human needs.

The purpose of this interview is to gain a greater understanding of the health status and wellbeing of residents in Fort Bend County and determine how these health needs are currently being addressed.

Interviews like this one are being conducted with about 20 other stakeholders from a range of sectors such as government, healthcare, business, and community service organizations. We are also interviewing community leaders with specific experience working with priority populations such as women, children, people of color, and people with disabilities to name a few.

We are interested in gathering feedback on the needs of the Fort Bend community and the populations you work with as a leader in your community. The health department welcomes your critical feedback and suggestions for health improvement activities in the future. Your honesty during today's interview is encouraged and appreciated.

You have been identified as an individual with valuable knowledge and opinions regarding community health needs, and we appreciate your willingness to participate in this interview. This interview should take less than an hour to complete.

With your permission, we'd like to record this interview. This helps us look for themes across interviews with multiple people. After all the interviews are completed, Fort Bend County Health and Human Services will use the information in preparing our community health assessment. We will keep your interview recording confidential and accessible only to the team that is preparing the community health assessment report.

In our report, we will want to express voices from the community. If you are willing, we would like to ask your permission to include quotes you may have. The quotes may be presented anonymously, presented with your name and organization, or presented with only the sector you represent. Would you be willing to share quotes in the report? If so, which option would you like to choose?

RECORD RESPONSE FROM INTERVIEWEE:

- Anonymous
- Name and organization
- Sector

Thank you. We will note your choice.

IF THE RESPONDENT IS UNSURE AT THE TIME OF THE INTERVIEW:

Ok, please feel free to think it over and we will follow up with you for your decision before we use any specific quotes.

Do you have any questions before we begin?

BEGIN RECORDING THE INTERVIEW

INTERVIEW QUESTIONNAIRE (55 MINUTES)

NOTES TO INTERVIEWER:

- Interview questions may be added or tailored to meet the specific position/role of the interviewee
- Questions in the interview questionnaire are intended to serve as a guide, not a script

BACKGROUND (5 MINUTES)

1. Please tell me a little bit about your role at your organization/agency
 - a. Has your organization/agency ever partnered with Fort Bend County Health and Human Services or any of its divisions in this shared community health assessment before? If so, probe into what capacity/program
2. How would you describe the community you represent/the community your organization serves/the Fort Bend County population at large? What are some of its defining characteristics in terms of demographics? E.g. age, gender, race, ethnicity, socio-economic status, geography.
 - a. INTERVIEWER: ESTABLISH WHAT THE INFORMANT CONSIDERS THE COMMUNITY TO BE FROM THEIR PERSPECTIVE

COMMUNITY ISSUES (20 MINUTES)

I'm going to ask you some questions about your community.

NOTES TO INTERVIEWER:

- Vary the label of 'community' based on the informant's background and how they describe the community.
3. Thinking about the status of the community today, how would you rate the overall health status of the residents on a scale of 1 to 5 with 1 being poor and 5 being very healthy?
 - a. Why did you give that answer?
 4. If you had to pick your top 3 health concerns in the community, what would they be? Access to care, aging, cancer, chronic pain, COVID, dental health, diabetes, heart disease, injuries, maternal/infant health, mental health, obesity, respiratory diseases, STDs, stroke, drug/alcohol abuse, tobacco. PROBE IN-DEPTH BASED ON INFORMANT AREA OF EXPERTISE
 - a. Who do you consider to be the populations in the community most vulnerable or at risk for these conditions/issues? IF NOT YET MENTIONED, PROBE SPECIFICALLY ON PRIORITY POPULATION RELEVANT TO THE INFORMANT'S EXPERTISE:
 - i. What do you think are the most pressing health concerns in the community for [PRIORITY POPULATION]? Focus on the most vulnerable.
 - b. IF NOT YET DISCUSSED: Of the top three issues you mentioned, which would you rank as your top issue? How do you see this issue affecting community members' daily lives and their health? PROBE IN-DEPTH IN SPECIFIC FOCUS AREAS; MAY ASK ABOUT ONE ISSUE AT TIME AND FOCUS ON PERSON'S AREA OF EXPERTISE.
 5. From your experience, what are residents' biggest barriers to addressing the top 3 health issues you identified?
 - a. PROBE: Social determinants of health? If someone does not know what SDOH means, provide this definition: Social determinants of health are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life and risks. SDOH can be grouped into 5 domains: Economic Stability, Education Access and Quality, Health Care Access and Quality, Neighbourhood and Build Environment, Social and Community Context (Healthy People 2030).
 - b. PROBE: Barriers to accessing medical care?
 - c. PROBE: Barriers to accessing preventive services or programs?

IMPROVING THE HEALTH OF THE COMMUNITY/RESIDENTS (10 MINUTES)

6. Earlier in this interview, you mentioned [TOP ISSUE] as being your top health priority for area residents. What do you think needs to be done to address [TOP ISSUE HERE]?
- What do you think Fort Bend County Health and Human Services can do to address this issue?
 - Do you have any suggestions about how Fort Bend County Health and Human Services can be creative or work outside their traditional role to address this issue and improve community health?
 - What kinds of opportunities are currently out there that can be seized upon to address these issues? For example, are there some “low hanging fruit” – current collaborations or initiatives that can be strengthened or expanded?

FOCUS AREA: HEALTHY LIVING (5 MINUTES)

The next set of questions are about healthy living and quality of life in your community.

- In relation to health and quality of life, what resources or services do you think are missing in the community?
- What challenges do people in the community face in trying to maintain healthy lifestyles (such as exercising, or eating healthy, food insecurity, safety, mental health or trying to manage chronic conditions like diabetes or heart disease)? Dig deep and give examples.
- In your opinion, what is being done well in the community in terms of health and quality of life?
- What recommendations or suggestions do you have to improve health and quality of life in the community?

ACCESS TO HEALTH CARE AND PUBLIC HEALTH/PREVENTION SERVICES (15 MINUTES)

This next section is about access to health care, public health and social services in your community.

- I'd like to ask you about access to health care and social services in your community.
 - What do you see as the strengths of the health care services and social services in your community?
 - What do you see as its limitations?
- What challenges do residents in your community face in accessing health care services and social services? PROBE IN DEPTH FOR BARRIERS TO CARE: INSURANCE ISSUES, LANGUAGE BARRIERS, ACCESS TO HEALTH INFORMATION/HEALTH LITERACY, LACK OF TRANSPORTION, CHILD CARE, ETC.
 - What do you think needs to happen in the community to help residents overcome or address these challenges?
- What programs, services, or policies are you aware of in the community that address access to health care and social services?
 - In your opinion, how effective have these programs, services, or policies been at addressing the health needs of residents?
 - What program, services, or policies are currently not available that you think should be?

VISION FOR THE COMMUNITY (5 MINUTES)

- Fort Bend County Health and Human Services will be planning for their Community Health Improvement Plan, in collaboration with key stakeholders and the community, to improve the health of the county and residents they serve. What advice do you have for the FBCHHS group developing the plan to address the top health needs you've mentioned?

CLOSING (5 MINUTES)

- Thank you so much for your time. That's it for my questions. Is there anything else that you would like to mention that we didn't discuss today?

If you have any questions, please feel free to reach out to Carrie Rai, Performance & Innovation Specialist FBCHHS who is coordinating the community health assessment effort. Thank you again. Have a good morning/afternoon.

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