



## **Executive Summary:** **2009 Community Health Survey**

The Baltimore City Health Department conducted its first Community Health Survey during the Spring of 2009. The telephone-based survey reached a representative sample of over 1,100 Baltimore residents, and included both landline and cell phone users. The goals of the survey were to assess residents' health status and health needs, to identify gaps in access to health services, and assess residents' perceptions/attitudes related to current programmatic and policy issues. Results of the survey will be used to inform program and policy planning and development, as well as to guide future community health assessment.

BCHD's Community Health Survey is unique in that all of the questions included were determined by BCHD and other local health bodies, thus allowing for a more customized and targeted assessment of health topics most relevant to the City, as opposed to the one-size-fits-all approach standard to similar national surveys (like the Behavioral Risk Factor Surveillance Survey conducted by the Centers for Disease Control and Prevention). For example, this is the first citywide and representative survey to ask Baltimore residents how often they read nutritional labels and what they look for when reading them. The survey also assesses residents' exposure to violence, and is the first citywide health survey to assess residents' exposure to mice, rats, and roaches at in their homes. In addition, BCHD's Community Health Survey includes a larger sample size compared to similar national surveys conducted among Baltimore residents, thus making it possible to obtain results and estimates with more precision than other surveys permit.

The results of this survey provide a snapshot of health in Baltimore City, ranging from diabetes and hypertension prevalence, to perceptions of neighborhood safety and mental health needs, revealing stark differences between respondents of different socioeconomic, racial/ethnic, gender, and age groups. More than anything, however, the results of this survey demonstrate the profound impact that educational attainment and income have on health.

The largest observed differences in health indicators are almost universally seen between respondents with different levels of education and income, two major social determinants of health. The social determinants of health are the health promoting and enhancing resources and opportunities needed in order to live a long and healthy life, and include things like access to education and economic opportunities, healthy food and healthy housing, and safe neighborhoods. Higher levels of education and income grant people greater access to and control over these health supporting resources. Those of lower income and education are exposed to more health threats and have fewer health supporting resources and opportunities, and consequently are much more likely to be in poorer health. The results of this survey make this unequivocally clear in Baltimore: the higher your education and income, the healthier you are.

Simply put, the social determinants of health are the conditions in which we live, work, learn, and play, and It is well recognized that these social determinants are mostly responsible for health inequities. Efforts to improve health in the City must engage the underlying conditions that determine whether or not people will have a fair chance at being healthy. This means taking action on the social determinants of health. Future Community Health Surveys will be used to further guide such action.

**The following are major findings from each of the survey's eight core sections:**

### **Demographics:**

- 29% of all respondents reported having a bachelor's degree (BA) or higher.
  - **White respondents were 3 times more likely than Black respondents to report having a BA or higher.**
  - **White respondents were 3 times more likely than Black respondents to report to be in the highest income group**

### **General Health Status:**

- **Those of the lowest income group were 4 times more likely than those of the highest income group to report being in 'fair' or 'poor' health.**

### **Healthy Homes and Communities:**

- 10% of all respondents reported feeling that their neighborhood is 'very dangerous'.
  - **Those of the lowest income group were 14 times more likely than those of the highest income group to report their neighborhood as 'very dangerous'.**
- 19% of all respondents reported witnessing someone get beat up, stabbed, or shot in the last 12 months.
  - **Those with less than a BA were 3 times more likely than those with a BA or higher to report witnessing someone get beat up, stabbed, or shot in the last 12 months.**
- 53% of respondents reported not having a CO detector.
  - **Those of the lowest income group were half as likely to report having a CO detector, compared to those of the highest income group**
- 37% of respondents reported seeing signs of mice or rats in their homes, while 16% reported seeing signs of roaches.
  - **Those of the lowest income group were 3.6 times more likely than those of the highest income group to report seeing signs of roaches**

### **Food and Energy Security:**

- 23% of all respondents reported concerns about having enough food, while 33% reported having had trouble paying their heating bills.
  - **Those of the lowest income group were almost 6 times more likely than those of the highest income group to report concerns about having enough food, and 3 times more likely to report having trouble paying their heating bills.**

### **Health Behaviors:**

#### *Diet/Nutrition*

- **Those of the lowest income group were 12 times more likely than those of the highest income group to report expense as a barrier to healthy eating.**
- **73% of respondents reported reading nutritional labels 'always' (30%) or 'sometimes' (43%).**
  - **Only 55% of respondents who reported having high blood pressure reported checking for salt.**

#### *Smoking*

- 28% of respondents reported being current smokers.
  - **Those of the lowest income group were 2.4 times more likely than those of the highest income group to report being current smokers.**

### *Drug/Alcohol Abuse*

- 7% of all respondents reported that someone in their household had a drug problem, while 6% reported an alcohol problem.
  - **Among respondents who reported someone in their household having a drug/alcohol problem, over 30% said they didn't know who to contact for help.**

### *Maternal and Child Health*

- **Among households with children under 5, just 57% of respondents correctly identified that babies younger than 12 months should be put to sleep on their backs**

### *Chronic Health Conditions:*

#### *Obesity, Diabetes, and Hypertension*

- 34% of respondents reported being obese (by report of height and weight), 14% reported having diabetes, and 36% reported having hypertension.
  - **Compared to those of the highest income group, those of the lowest income group were 2.4 times more likely to report being obese, 3.7 times more likely to report having diabetes, and 2 times more likely to report having hypertension.**

#### *Asthma*

- 28% of respondents reported that someone in their household has asthma.
  - **Those of the lowest income group were over 2 times more likely than those in the highest income group to report that someone in their household has asthma.**
- **Among households that have someone with asthma living in them, 22% have roaches, 39% have mice/rats, and 33% have a current smoker—all of which are major asthma triggers.**

### *Health Care:*

- 17% of respondents reported being uninsured, with men 74% more likely than women to report so.
  - **Those of the lowest income group were 3.8 times more likely than those of the highest income group to report being uninsured.**
- **Among respondents *with insurance*, those of the lowest income group were 25 times more likely than those of the highest income group to report having had unmet health care needs in the last 12 months.**

### *Mental Health Care:*

- **14% of all respondents reported needing mental health care in the previous 12 months. Among this 14%, 23% reported having had unmet mental health care needs in the last 12 months.**
- **Black respondents were 4 times more likely than Whites to report having had unmet mental health care needs in the last 12 months.**
- 7% of respondents reported feeling socially isolated (by response to a 3-item scale).
  - **Those of the lowest income level were 12.5 times more likely than those of highest income level to report feeling socially isolated.**