



# Atascosa Health Center, Inc. (AHC) Community Health Needs Assessment (CHNA) 2014-2015

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## History and Significance

AHC is a nonprofit, Federally Qualified Health Center (FQHC), with 6 rural clinics in Atascosa, Karnes, Live Oak, McMullen, and Wilson Counties. AHC services include: family medicine, cancer and prevention screenings, and oral and behavioral health care.

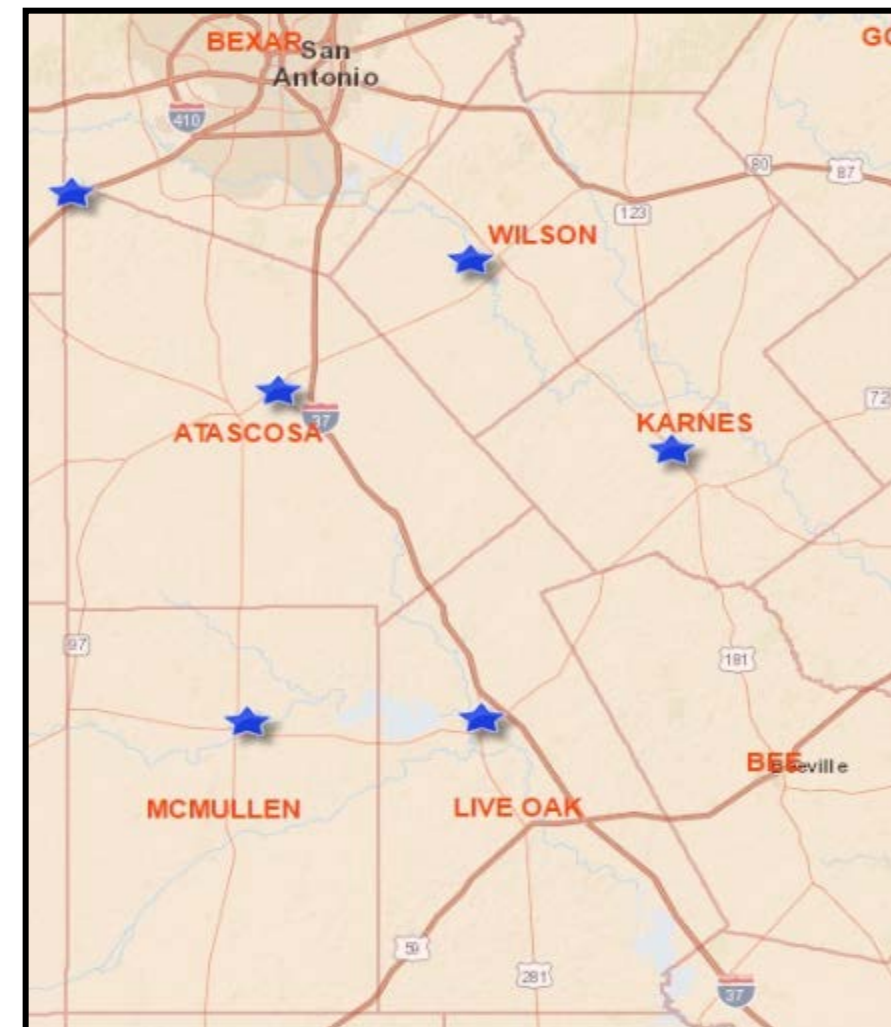
AHC accepts government-funded insurance and most private insurance, providing a sliding scale fee for uninsured or underinsured low-income families in the area surrounding our six clinics.

Community Health Needs Assessments (CHNAs) assist in understanding the overall health and well-being of a group of people with shared characteristics or residing in a demographic area. The AHC CHNA is the second partnership project between AHC and the University Of Texas School Of Public Health San Antonio Regional Campus (SPH-SARC) since 2013.

## Methods

The AHC staff and SPH-SARC students and professors collected data using the following methods:

- Secondary data from such sources as the U.S. Census, TX Department of State Health Services, etc.
- Community stakeholder focus groups conducted in four counties, but including residents (n=40) from five counties served
- AHC patient interviews (n=96) conducted in the four primary care clinics and dental facilities open in 2014
- Community stakeholder key informant interviews (n=12)



**Figure 1. AHC 5-County Service Area & Clinics**

**Table 1. Perceived Community Health Concerns for Respondents' Counties**

Health Concern	N (%)
Diabetes	39 (21)
Cancer	27 (14)
Obesity	20 (11)
High Blood Pressure	14 (7)
Add Types of Services Offered	14 (7)
Substance Abuse	12 (6)
Respiratory Illness	9 (5)
Heart Disease	8 (4)
Insurance & Payment Issues	7 (4)
Mental Health	5 (3)
Health & Wellness	5 (3)
Other*	28 (15)

\*Includes teen pregnancy, HIV, children's health, violence, strokes, high cholesterol, falls, etc.

**Table 2. Health Conditions with Potential for Community Health Interventions from BRFSS participants (≥ 18 years of age) in the 5-county area reported in percent (%)<sup>1</sup>**

	Male	Female	Total
At risk for overweight or obese (BMI ≥ 25)	73.8	63.4	67.7
Smoke every day or some days & have smoked ≥ 100 cigarettes in their lifetime	28.1	28.8	28.5
>2 drinks per day (man) or >1 drink per day (female) in the past 30 days-at risk for poor health outcomes	18.4	5.5	11.0
Have not participated in physical activities or exercise (other than work related)	34.5	32.3	33.2
Have not had, in past year, a seasonal flu vaccine	73.8	70.0	71.6
Have not had a pneumonia shot	*	71.9	72.4
Have had >5 days of poor mental health including stress, depression, & problems with emotions, within the last 30 days	10.5	20.7	16.5

\*There were less than 50 males responding

## Findings

- The 2014 population in the 5-county area totaled 121,978
- 3 counties are majority Hispanic (>51.0%) and one county is 9% African American
- 4 counties have household incomes below the TX median income (\$52,576)
- The area exceeds the TX age adjusted rate (per 100,000) for the following causes of death: heart disease, accidents, cerebrovascular diseases, Alzheimer's disease, chronic liver disease and cirrhosis, influenza and pneumonia, and intentional self-harm

## Conclusions

- Primary needs for programs and services identified by AHC stakeholders and patients :
  - Access to primary, specialty, and behavioral health care
  - More accessible prevention programs focused on smoking cessation, organized exercise and healthy cooking/nutrition
  - Strengthening collaborations and service coordination among existing safety net services and hospitals
  - Creating new partnerships with institutions such SPH-SARC, UTHSCSA, Am. Cancer Society, UHS Safe Kids Coalition, etc. could be beneficial to the AHC service area.

## References

1. Puga E. Personal communication. Health Information and Resources Branch. Texas Department of State Health Services. Received by: Martin MK, 2015.

