



**CHNA Executive
Summary**



**About our
Community**



**Key Health
Indicators**



Community Input



**Prioritized Health
Needs**



King's Daughters Ohio 2025 CHNA

Established in February 2013, King's Daughters Ohio, located in Portsmouth, is a free-standing, 10-bed hospital specializing in surgical care, urgent care, outpatient diagnostics, treatment services, primary care, and select medical specialties. Prior to the opening of the Ohio hospital, King's Daughters Family Care Center, established in 2007, provided primary care services in Portsmouth, with additional access to rotating specialist physicians.

While Scioto County is the primary service area, it also serves patients in Jackson, Pike and Lawrence counties in Ohio and Greenup and Lewis counties in Kentucky.

King's Daughters Ohio provides an array of programs to promote health and wellness in Scioto County and surrounding areas, including free and reduced-cost screening programs focusing on heart health, vascular health, cancer, stroke prevention, and bone and joint health. We offer programs to educate and reduce health risk factors including healthy nutrition; and food insecurity.

As a healthcare organization, King's Daughters Ohio recognizes it has a duty not only to the people and communities of today, but also the people of tomorrow. In fulfillment of this, King's Daughters Ohio focuses on strategic planning to better meet current and future needs; technological advancement; and support of primary, secondary, and post-secondary education.

Our triennial Community Health Needs Assessment (CHNA) and CHNA Implementation Plan provide us with the opportunity to better understand the changing landscape of health, work with community leaders, and design and implement programs to address identified needs in alignment with the Mission, capabilities and resources of King's Daughters Ohio. For the purposes of the 2025 CHNA, we defined the King's Daughters Ohio community as Scioto County, Ohio. This county represents the majority of King's Daughters Ohio discharges each year.

The 2025 CHNA was developed through collaboration with Southern Ohio Medical Center, the Scioto County Health Department, and the Portsmouth City Health Department. In addition, 30 medical professionals serving Scioto County participated in a provider survey conducted by King's Daughters Ohio.

Secondary data was assessed including:

- Demographics (population, age, sex, race)
- Socioeconomic indicators (household income, poverty, unemployment, educational attainment)
- Key health indicators

King's Daughters Ohio 2025 CHNA

Information gathered in the above steps was reviewed and analyzed to identify health issues in the community.

The process identified the following health issues which are listed in alphabetical order:

- Access to health services/navigating healthcare services
- Chronic health conditions
- Dental care
- Food insecurity/lack of healthy nutrition
- Lack of affordable housing
- Mental health and depression
- Obesity
- Physical inactivity
- Poverty
- Preventive care (access/utilization)
- Smoking/vaping
- Substance abuse
- Teen pregnancy
- Transportation
- Unintentional injury

As part of the CHNA Implementation Plan, King's Daughters Ohio will identify areas within these priorities where it can effectively focus resources to achieve significant change.

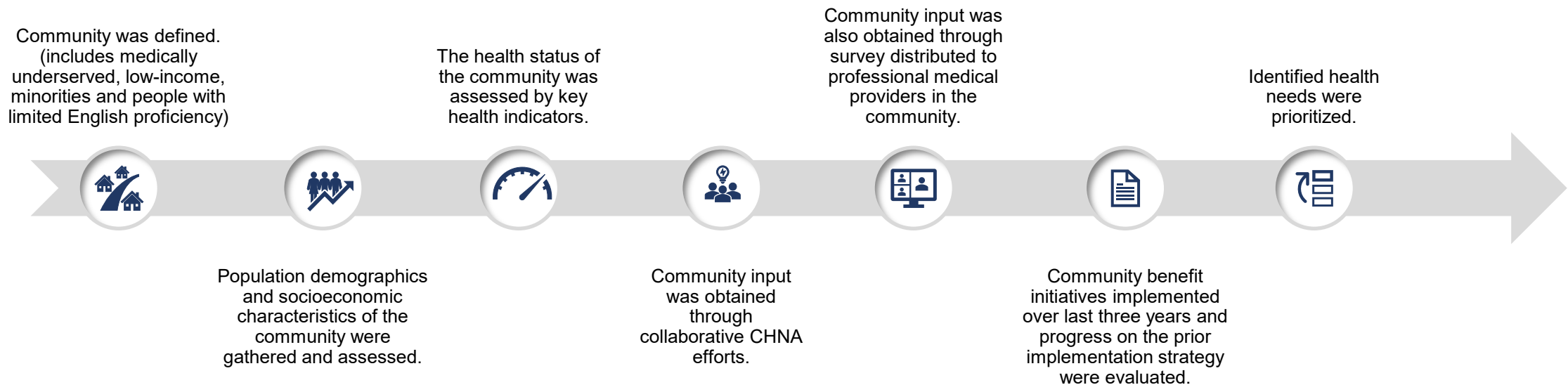


How the Assessment was Conducted

King's Daughters Ohio conducted a community health needs assessment (CHNA) to support its mission responding to the needs in the community it serves, to fulfill the requirements established by the Patient Protection and Affordable Care Act of 2010, and to comply with federal tax-exemption requirements. The goals were to:

- ✓ Identify and prioritize health issues in King's Daughters' service area, particularly for vulnerable and under-represented populations.
- ✓ Ensure that programs and services closely match the priorities and needs of the community.
- ✓ Strategically address those needs to improve the health of the communities served by King's Daughters.

Based on current literature and other guidance from the U.S. Department of the Treasury, the following steps were conducted as part of King's Daughters' CHNA:



How the Assessment was Conducted

The community health needs assessment KDOH supports the organization's mission *"To provide community healthcare services. To care. To serve. To heal."* This community health needs assessment was made possible because of the commitment toward addressing the health needs in the community. Many individuals across the organization devoted time and resources to the completion of this assessment.

KDOH would like to thank members of the 2025 CHNA Committee who provided leadership and oversight of the CHNA process and reporting.

- Sara Marks, President/CEO
- Stacy Patrick, Vice President, Clinical & Procedural Operations
- Candice Tackett, Administrator, King's Daughters Ohio
- Brad Blankenship, Coordinator Community Wellness, Dietician
- Abby Murphy, Administrative Assistant King's Daughters Ohio
- Elaine Corbitt, Executive Director, Communications/Community Engagement
- Scott Hill, Executive Director, Community Engagement
- Diva Justice, Director, Community Health

This community health needs assessment has been facilitated by Crowe LLP ("Crowe"). Crowe is one of the largest public accounting, consulting, and technology firms in the U.S. Crowe has significant healthcare experience including providing services to hundreds of large healthcare organizations across the country. For more information about Crowe's healthcare expertise visit www.crowe.com/industries/healthcare.

Written comments regarding the health needs that have been identified in the current community health needs assessment (CHNA) should be directed to:

Candice Tackett

Administrator

Candice.Tackett@King's Daughters.kdhs.us

Our Mission: To Care. To Serve. To Heal.

Our Vision: World-Class Care In Our Communities

Our Core Values:



iCARE - Innovation • Compassion • Accountability • Respect • Excellence

General Description of King's Daughters Medical Center Ohio

Located in Portsmouth, Ohio, King's Daughters Ohio (Portsmouth Hospital Corporation) provides a comfortable, small-hospital environment with access to technology and specialists normally found only at larger institutions.

Serving as a healthcare choice for residents of Portsmouth, Scioto County and surrounding areas, King's Daughters Ohio (KDOH) provides services ranging from primary care to surgical services; inpatient care to outpatient diagnostics; from specialty care to urgent care. King's Daughters Medical Center Ohio provides access to the following healthcare services:

- Primary care
- Urgent Care Services available 24/7/365
- Specialist physicians in heart and vascular; orthopedics; digestive health; general surgery; neurology (epileptologist); surgical breast oncology; plastic & reconstructive surgery; urology; ENT, general surgery, GYN, psychiatry, pain and spine
- Inpatient services
- Surgical care – urology, orthopedics, GI, ENT, GYN, general surgery, pain and spine
- Imaging services, including MRI, CT, nuclear medicine, 3D mammography, x-ray, and general and vascular ultrasound
- Cardiac diagnostic
- Pulmonary diagnostics
- Nutrition counseling
- Diabetic consults
- Social work
- Lab services
- Sleep lab
- Imaging- MRI, Nuclear Med, Ultrasound, CT, x-ray, mammography
- Respiratory – PFT
- EMG, EMU
- Addiction treatment outpatient and inpatient



Community Overview



Demographic Data

King's Daughters patients collectively come from a large geographic area. For purposes of this report, the community served by King's Daughters is Scioto County, Ohio. Between July 1, 2023 and June 30, 2024, 66% of King's Daughters' inpatient discharges originated from patients residing in Scioto County. To understand the profile of King's Daughters Ohio CHNA community, demographic and health indicator data were analyzed for the population within the defined service area.

The CHNA community has a total population of 73,118 according to the U.S. Census Bureau American Community Survey 2019-2023 5-year estimates. The percentage of population by combined race and ethnicity is made up of 91.6% Non-Hispanic White; 2.4% Non-Hispanic Black; 1.5% Hispanic or Latino; 3.5% Non-Hispanic Multiple Races; and 1% Non-Hispanic some other race. The demographic makeup of the CHNA community is shown below. The following socioeconomic indicators have significantly unfavorable rates for the CHNA community compared to state and national rates.

- Educational attainment is significantly lower for the CHNA community with 18% of people over the age of 25 obtaining a bachelor's degree or higher compared to 35% for the U.S. and 31% for the State of Ohio.
- The labor force participation rate is significantly lower than state and national rates.
- The percentage of persons with disability is significantly higher than the state and national rates of 14% (Ohio) and 13%, respectively.



\$81,789

Average Family
Income

U.S. \$130,215
OH: \$115,826

18%

People 25+ with a
Bachelor's Degree
or Higher



U.S. 35%
OH: 31%



22.4%

of people are living
in poverty (15,618
persons)

U.S. 12.4%
OH: 13.2%

8.4%

Adults age 18-64 without
Health Insurance Coverage
(3,461 persons)



U.S. 11.2%
OH: 8.1%



50%

Population 16+ in
Civilian Labor Force

U.S. 64%
OH: 63%

22%

15,494 persons with a
disability



U.S. 13%
OH: 14%

America's Health Rankings - Ohio

America's Health Rankings evaluates a comprehensive set of health, environmental and socioeconomic data to illuminate both health challenges and successes; determine national and state health benchmarks; and enable stakeholders to take action to improve health. Annually, state-by-state analysis are prepared. Among the 50 states, Ohio ranks 40th for health behaviors and 43rd for health outcomes.

Below are highlights from Ohio's 2023 report.

Measures

		State Rank	State Value	U.S. Value
Behaviors		40	-0.651	
Nutrition and Physical Activity	Exercise (% of adults)	35	20.9%	23.0%
	Fruit and Vegetable Consumption (% of adults)	25	7.3%	7.4%
	Physical Inactivity (% of adults)	35	25.1%	23.4%
Sexual Health	Chlamydia (Cases per 100,000 population)	25	479.8	495.5
	High-Risk HIV Behaviors (% of adults)	44	7.0%	5.7%
	Teen Births (Births per 1,000 females ages 15-19)	31	15.5	13.9
Sleep Health	Insufficient Sleep (% of adults)	42	38.5%	35.5%
Tobacco Use	Smoking (% of adults)	45	17.1%	14.0%
Health Outcomes		43	-0.494	
Behavioral Health	Drug Deaths (Deaths per 100,000 population)*	44	46.7	32.1
	Excessive Drinking (% of adults)	37	19.5%	18.4%
	Frequent Mental Distress (% of adults)	46	18.3%	15.9%
	Non-medical Drug Use (% of adults)	27	14.6%	15.9%
Mortality	Premature Death (Years lost before age 75 per 100,000 population)	38	11,012	9,478
	Premature Death Racial Disparity (Ratio)	25	1.5	1.6
Physical Health	Frequent Physical Distress (% of adults)	38	13.9%	12.4%
	Low Birth Weight (% of live births)	29	8.7%	8.5%
	Low Birth Weight Racial Disparity (Ratio)	24	2.0	2.1
	Multiple Chronic Conditions (% of adults)	43	14.6%	11.2%
	Obesity (% of adults)	44	38.1%	33.6%

Strengths

- High prevalence of high school completion
- Low uninsured rate

Challenges

- High prevalence of multiple chronic conditions
- High prevalence of frequent mental distress
- High prevalence of cigarette smoking

Access to Services



Limited access to care presents barriers to good health. The supply and accessibility of facilities and physicians affect access. As shown below, Scioto County has far more mental health providers compared to national and state levels. However, for primary care and dental health, Scioto County has 50% less than national and state levels.

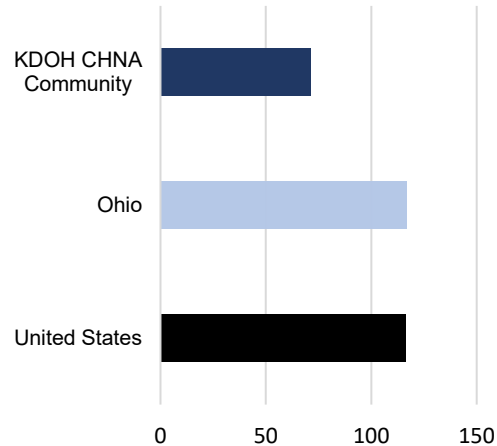
The chart to the right reports the percentage of population that is living in a geographic area designated as a “Health Professional Shortage Area” (HPSA). Within the CHNA community, there are 32,304 people living in a HPSA. This represents approximately 42% of the total population.

Population Living in a Health Professional Shortage Area			
	Total Population (ACS 2019 5-Year Estimates)	Population Living in an Area Affected by a HPSA	Percentage of Population Living in an Area Affected by a HPSA
KDOH CHNA Community	76,040	32,304	42.48%
Ohio	11,655,397	1,839,506	15.78%
United States	324,697,795	72,230,619	22.25%

53

Primary Care Providers

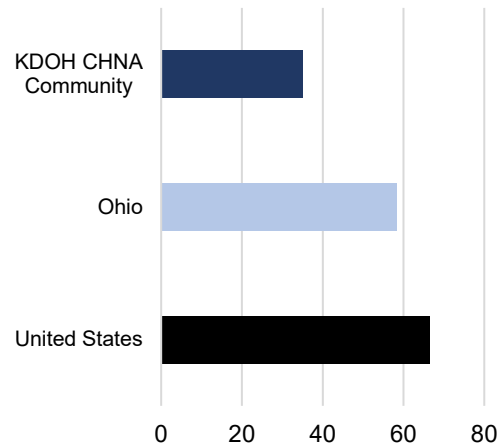
Rate per 100,000 Population



26

Dental Health Providers

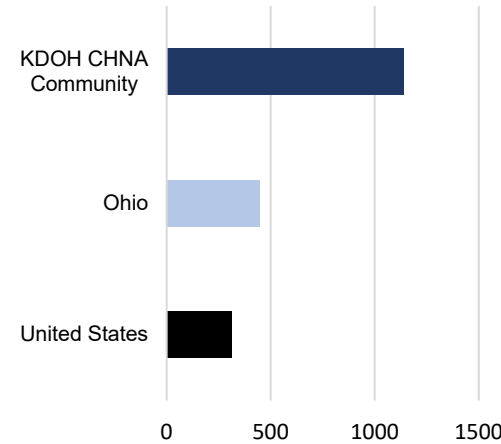
Rate per 100,000 Population



842

Mental Health Providers

Rate per 100,000 Population



76.3% of adults over age 18 had a routine checkup in the past year. *

**Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System- 2022.*

Clinical Preventive Services

Rates of morbidity, mortality, and emergency hospitalizations can be reduced if community residents access services such as health screenings, routine tests, and vaccinations. Prevention indicators can call attention to a lack of access or knowledge regarding one or more health issues and can inform program interventions.

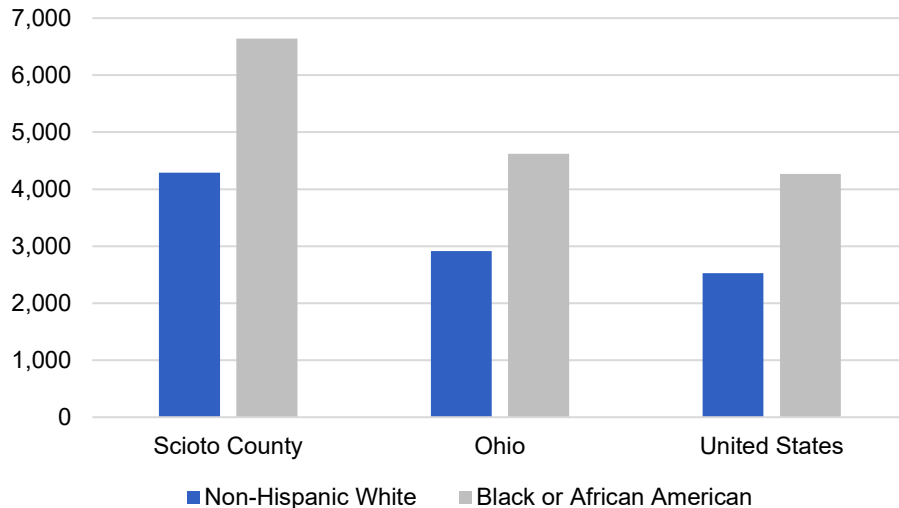


34.1% of women 65+ in the community are up-to-date with core preventative services compared to the national benchmark of 37.4%.

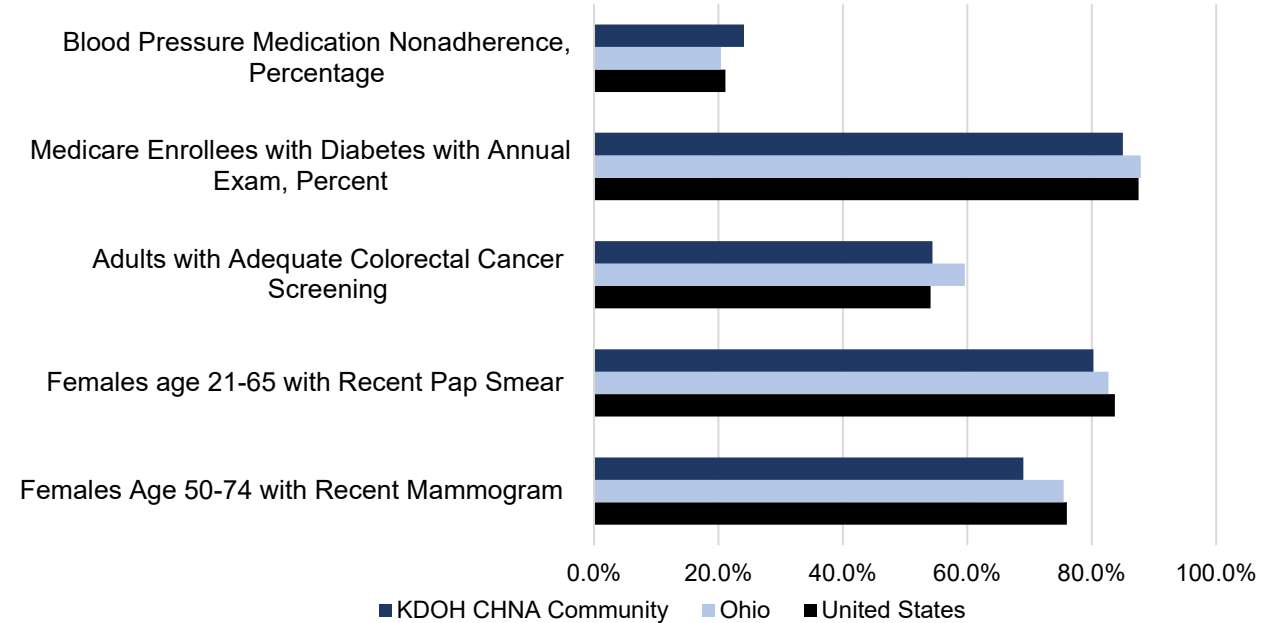


39.1% of men 65+ in the community are up-to-date with core preventative services compared to the national benchmark of 44.0%.

Preventable Hospitalization Rate by Race and Ethnicity



Preventive Services



Preventable hospitalizations include hospital admissions among Medicare beneficiaries for one or more of the following conditions: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infection.

- The rate for preventable hospitalizations in the CHNA Community is unfavorable to state and national rates (4,332 per 100,000 population for the CHNA Community compared to 3,033 and 2,666 for Ohio and National benchmarks, respectively).
- Preventable hospitalizations are significantly higher for African American residents compared to Non-Hispanic White.


[Access to Services](#)
[Clinical Preventive Services](#)
[Health Outcomes & Mortality](#)
[Injury & Violence](#)
[Maternal, Infant & Child Care](#)
[Mental Health](#)
[Nutrition, Physical Activity & Obesity](#)
[Physical Environment](#)
[Substance Use Disorder](#)

Health Outcomes & Mortality

King's Daughters Ohio's community has a significant number of adults who have been diagnosed with chronic illnesses. The prevalence of chronic diseases in the community is consistent with state rates and unfavorable to national percentages. Over 39% of the population, 22,318 adults, have high blood pressure.

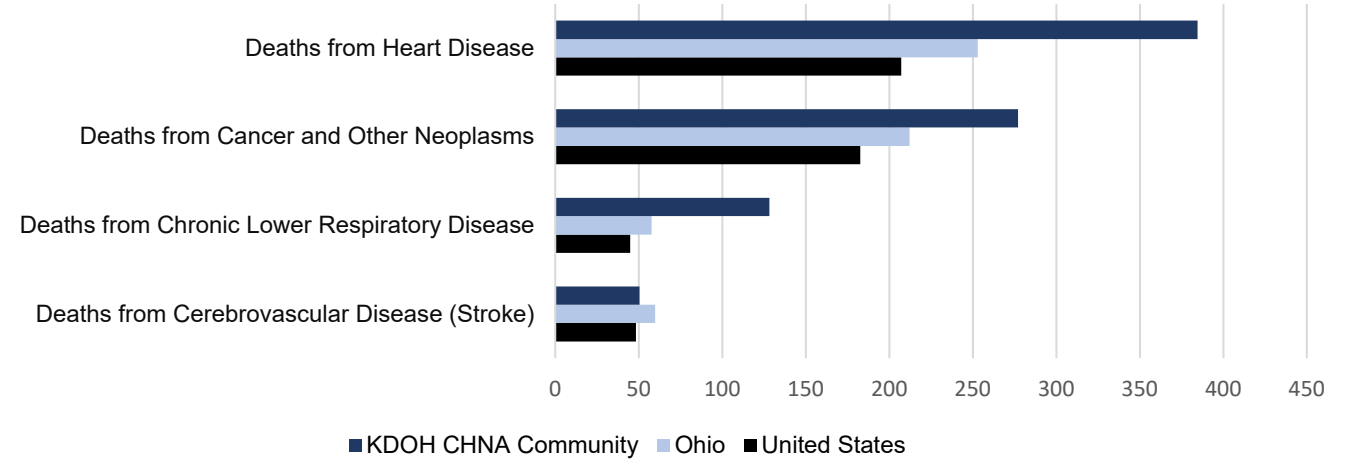
Coronary heart disease, cancer, lung disease and stroke are leading causes of death in the United States. Adjusted death rates for the community are unfavorable to state and national rates with deaths from heart disease, cancer and respiratory disease being significantly higher than national rates. Males have higher rates for deaths from heart disease and cancer compared to females.

22% of the population age 65+ have poor dental health which means they have lost all of their natural teeth because of tooth decay or gum disease.

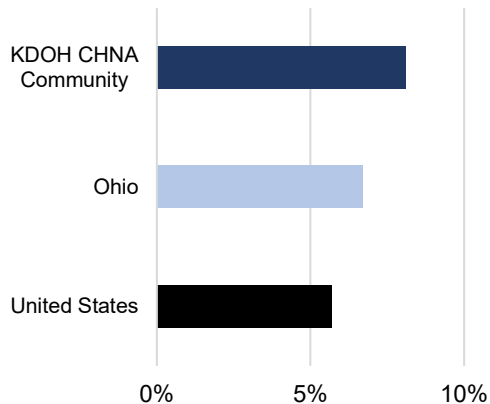
 [Data Tables](#)

Leading Causes of Death

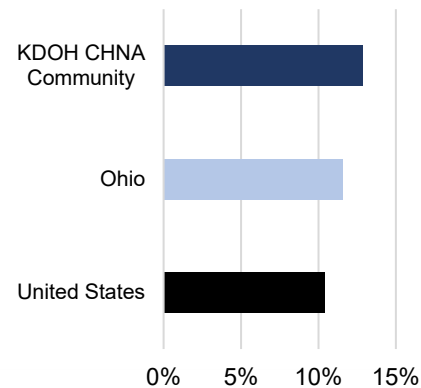
(Crude Death Rate -Per 100,000 Population)



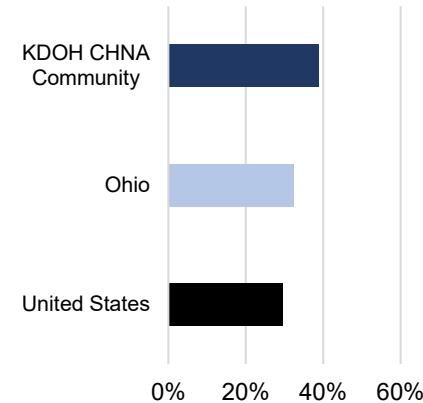
4,635
Adults Diagnosed with
Coronary Heart Disease
Age-Adjusted Percentage



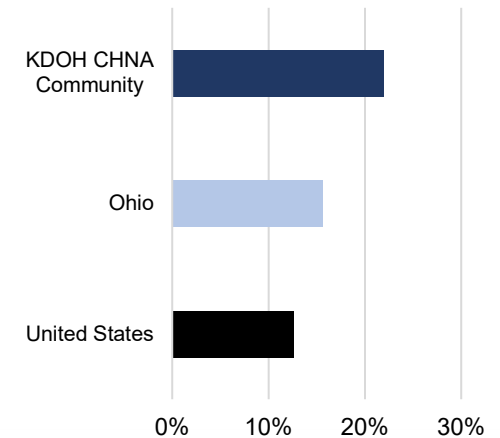
7,382
Adults with Diagnosed
Diabetes
Age-Adjusted Percentage



22,318
Adults with High Blood
Pressure
Age-Adjusted Percentage



Adults Age 65+ with Poor
Dental Health
Age-Adjusted Percentage



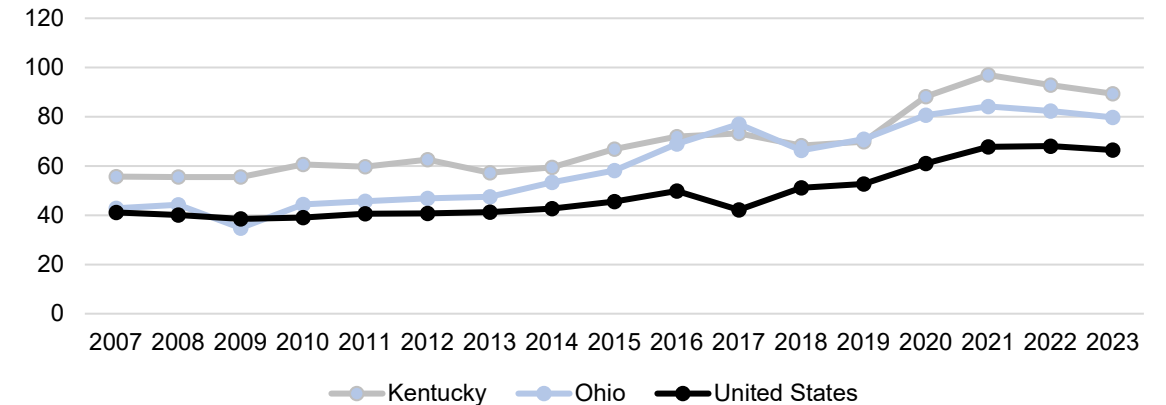
Injury and Violence

Crime rates are very different in the CHNA Community, depending upon the crime. Property crime is higher in Scioto County than national and state rates, whereas violent crime is 50% less than national rates. Mortality from unintentional injuries is double the national and state rates.

The five-year average rate of death due to unintentional injury (accident) for the King's Daughters Ohio CHNA community is more than double the national average rate. This indicator is relevant because accidents are a leading cause of death in the United States. Deaths due to unintentional injury significantly increased starting in 2019 but have trended downward in the last few years.

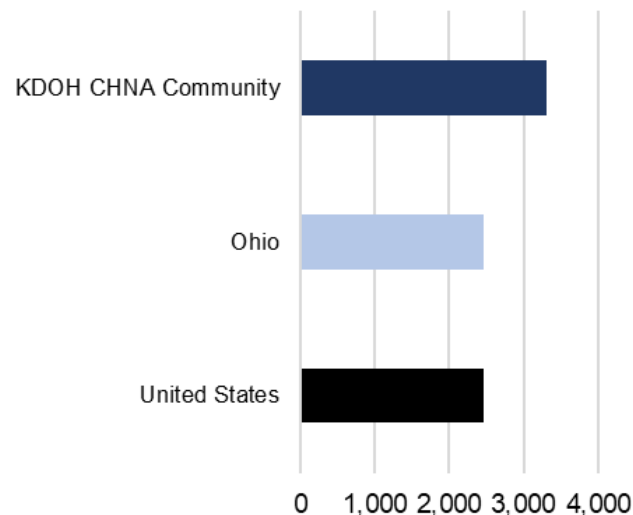
 [Data Tables](#)

Unintentional Injury (Accident) Mortality, Crude Rate (Per 100,000 Pop.), Yearly Trend



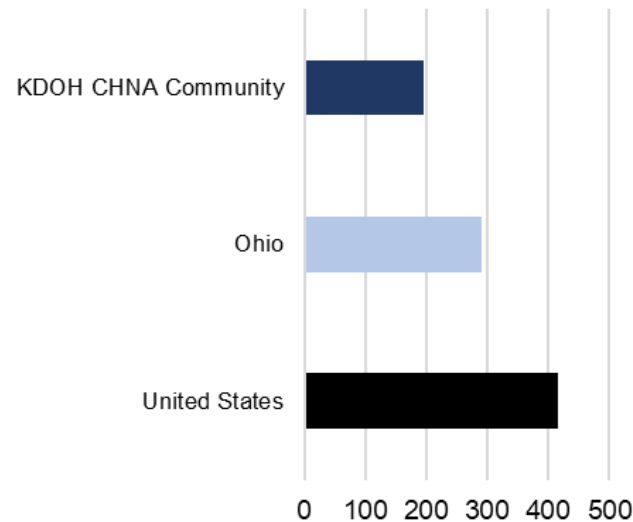
Property Crime, Annual Rate

Rate per 100,000 Population



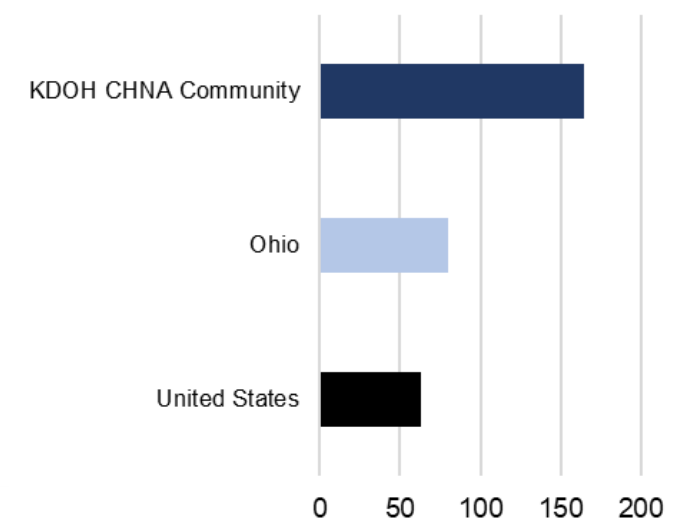
Violent Crimes, Annual Rate

Rate per 100,000 Population



Mortality - Unintentional Injury

Rate per 100,000 Population



Maternal, Infant and Child Health

Engaging in prenatal care decreases the likelihood of maternal and infant health risks such as low birth weight. Rates for low birth weight are comparable to state and national rates.

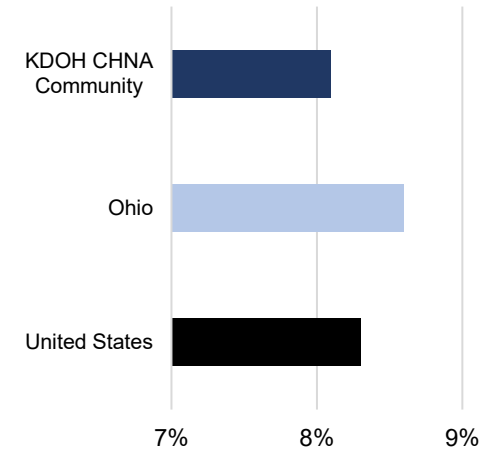
In the report area, of the 15,875 total female population age 15-19, the 7-year average teen birth rate is 30.9 per 1,000, which is nearly double the rate of the United States of 16.6.

20% of women giving birth in the CHNA community had no prenatal care in the first trimester of pregnancy, which is comparable to national and state percentages.

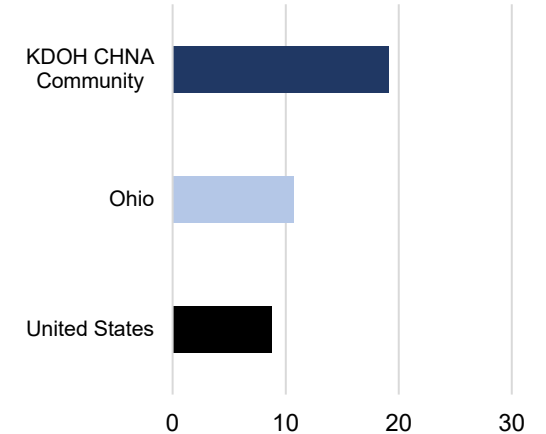
Approximately 20% of women giving birth in the CHNA community smoked during pregnancy, which is double the state percentage and 4x greater than the national percentage.

 [Data Tables](#)

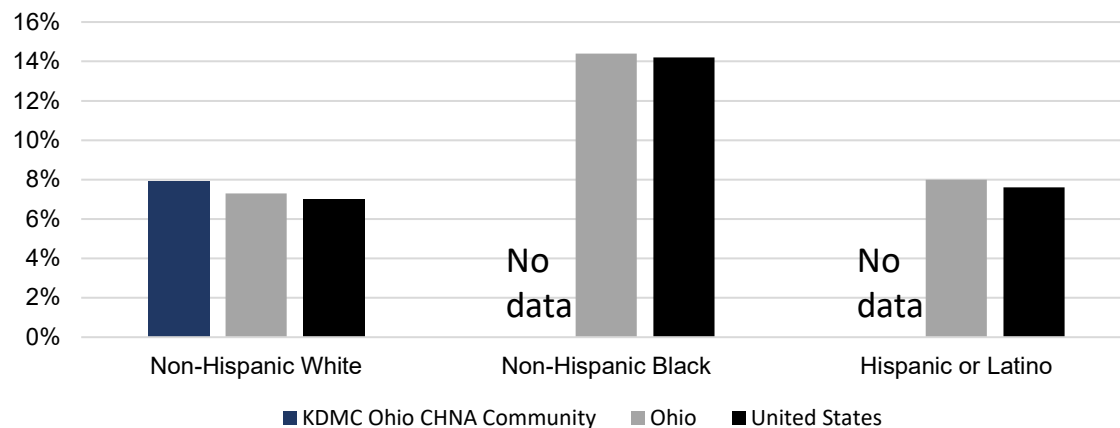
Low Birth Weight
Percentage (2016-2022 Average)



Teen Births
Rate per 1,000 Female Population



Low Birth Weight, Percent by Race / Ethnicity



Women giving birth in the King's Daughters Ohio CHNA Community receiving prenatal care in the 1st Trimester.

King's Daughters CHNA Community **80.2%**

Ohio 77.9%
United States 77.6%



Women giving birth in the King's Daughters Ohio CHNA Community smoked during pregnancy.

King's Daughters CHNA Community **20.1%**

Ohio 9.6%
United States 4.6%

Mental Health

According to the National Alliance on Mental Illness, 478,000 adults in Ohio have a serious mental illness and approximately 113,000 youth have depression.

The map to the right reports the percentage of adults (ages 18 years and older) in the CHNA community reporting 14 days or more of poor mental health per month by zip code. In the CHNA community, it is estimated that approximately 16,750 adults have frequent mental distress. Zip codes with the highest rates of poor mental health are 45662, 45663 and 45652.

 [Data Tables](#)

Mental Health in Ohio

Source: nami.org/advocacy/state-fact-sheets



1 in 20 U.S. adults experience serious mental illness each year.

In Ohio, **478,000 adults** have a **serious mental illness**.



1 in 6 U.S. youth aged 6–17 experience a **mental health disorder** each year.

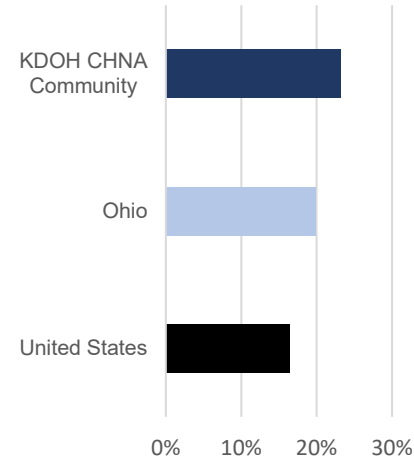
113,000 Ohioans age 12–17 have depression.



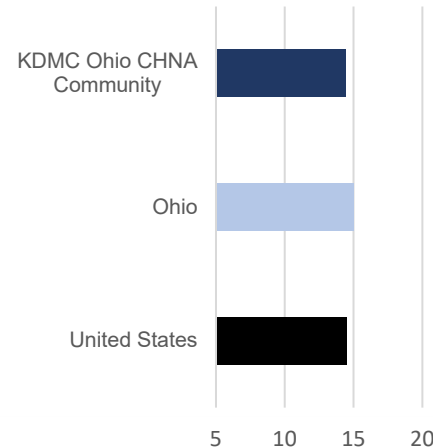
Ohioans are over **3x more likely to be forced out-of-network** for mental health care than for primary health care — making it more difficult to find care and less affordable due to higher out-of-pocket costs.

2,385,144 people in Ohio live in a community that **does not have enough mental health professionals**.

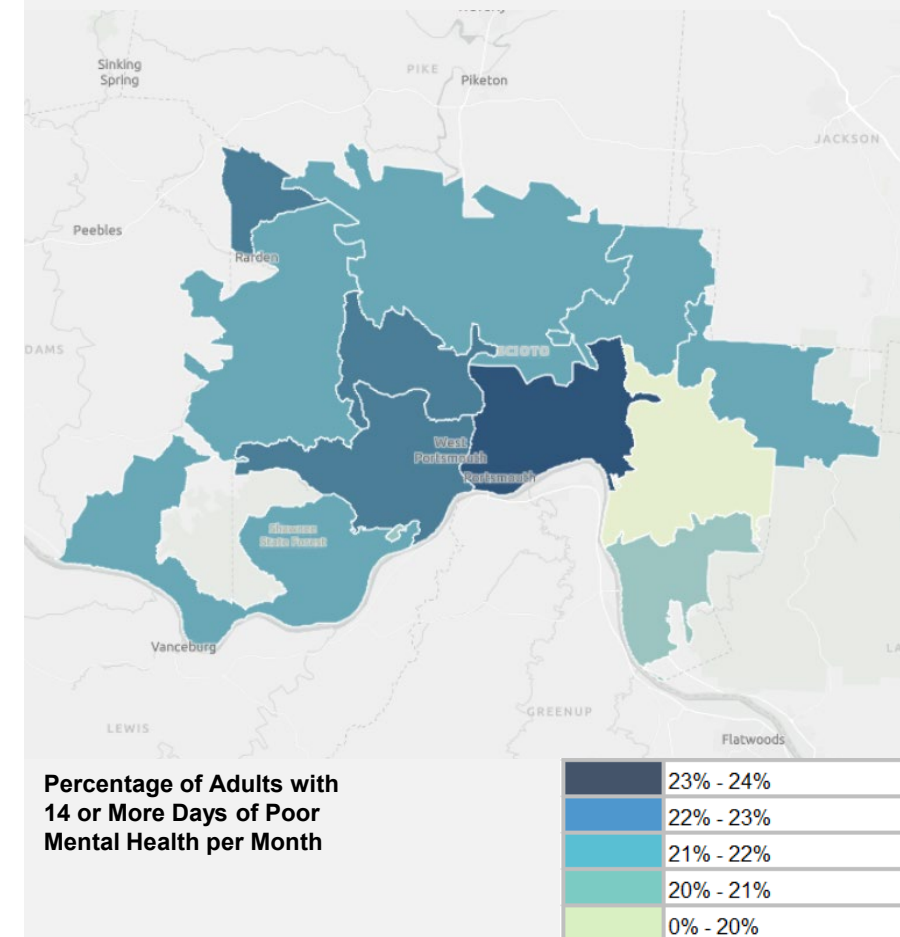
Adults with Poor Mental Health Age Adjusted Rate



Mortality-Suicide Crude Rate per 100,000 Population



Frequent Mental Distress by Zip Code




Nutrition, Physical Activity and Obesity

Healthy diets and physical activity contribute to healthy lifestyles and overall well-being. These factors are relevant because current behaviors are determinants of future health and well-being and these indicators may be linked to significant health issues, such as obesity and poor cardiovascular health.

- Over 20% of the population (15,430 persons) live with food insecurity in the CHNA community. The rate of food insecurity is higher for children and is 27% which is approximately 4,270 children in the CHNA community.
- Approximately 25,000 persons, or 46% of adults, are obese in the CHNA community. Obesity rates have increased by 100% over the last 15 years.
- 28.7% of adults, age 20 and older, self-report no active leisure time physical activity. This is significantly higher than the national rate of 19.5%.
- Approximately 47% of public-school students in the CHNA Community are eligible for free or reduced-price lunch program, which is lower than the U.S. rate of 54%.

The map to the right reports the percentage of the low-income population with low food access. Low food access is defined as living more than 1 mile (urban) or 10 miles (rural) from the nearest supermarket or large grocery store. The low-income population with low food access in the community is estimated to be 2,595 persons with the following zip codes reporting the highest percentages of low-income population with low food access: 45694, 45663, and 45662.

 Data Tables

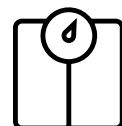
15,430

Food Insecure Population



25,862

Adults with BMI>30 (Obese)

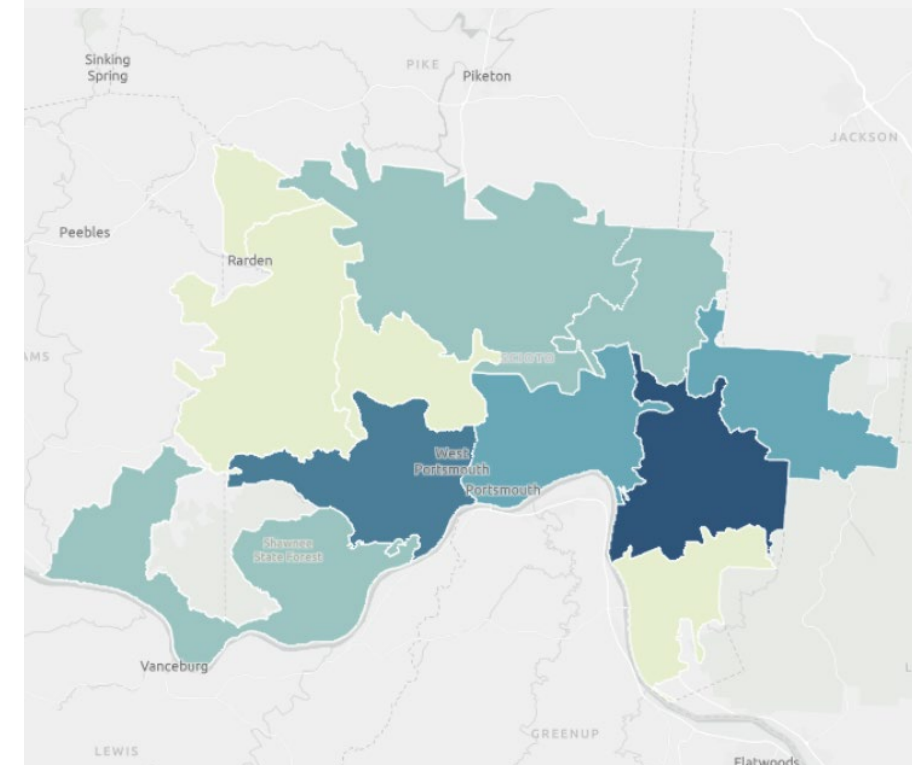


2,745






Students Eligible for Free or Reduced- Price Lunch



Population with Limited Food Access, Low Income Percent by Zip Code



Percentage of Low Income Population with Low Food Access

	16% - 26%
	6% - 16%
	1% - 6%
	0% - 1%
	0% - 0%

Physical Environment

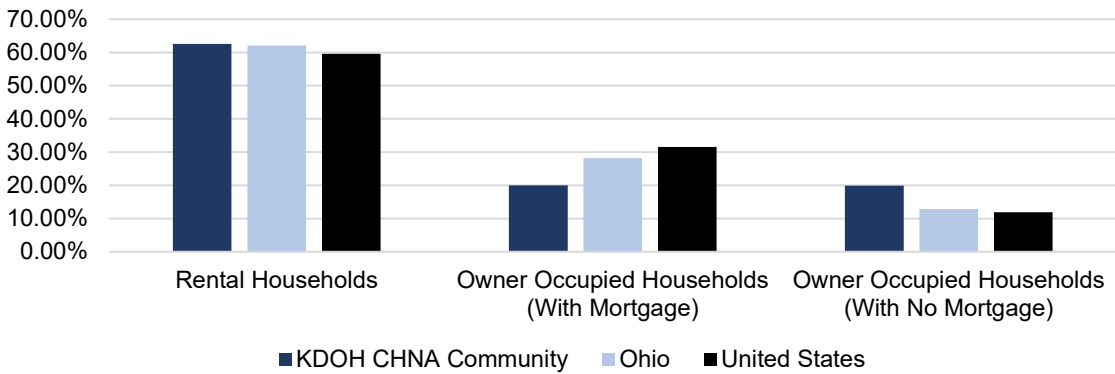
The structure of housing and families and the condition and quality of housing units and residential neighborhoods are important because housing issues like overcrowding and affordability have been linked to multiple health outcomes, including infectious disease, injuries, and mental disorders.

Within the community, 6,515 households, or 22.75%, have housing costs that are 30% or more of the total household income and are classified as “cost-burdened households.”

A large number of seniors in the community, age 65+, live alone. This is important because older adults who live alone may have challenges accessing basic needs, including health needs.

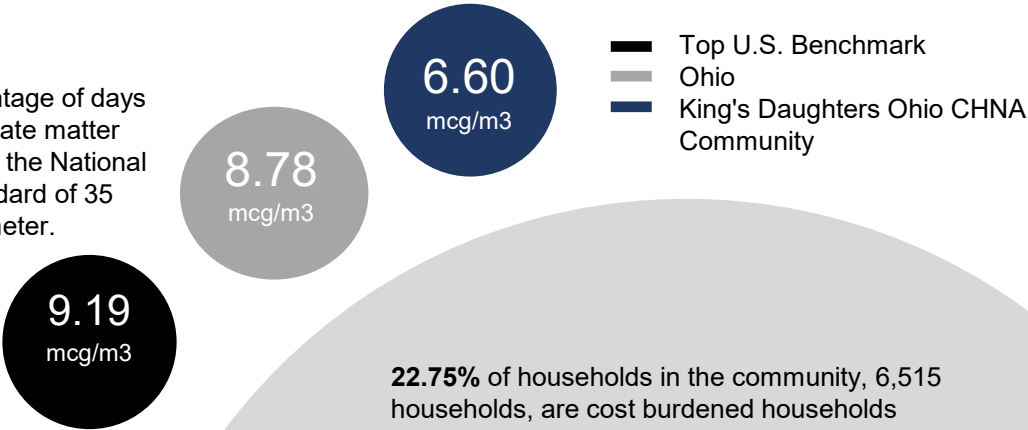

Data Tables

Severely Cost-Burdened Households



Air Pollution-Fine Particulate Matter

Air pollution is the percentage of days per year with fine particulate matter 2.5 (PM2.5) levels above the National Ambient Air Quality Standard of 35 micrograms pers cubic meter.



22.75% of households in the community, 6,515 households, are cost burdened households meaning housing costs exceed 30% of household income. 3,053 households have housing costs that exceed 50% of household income.

It is estimated that 15.4% of households (4,399 households) within the community have no or slow internet.

24.7% housing units have one or more substandard conditions.

4,490 Seniors (age 65+) live alone.



Substance Use Disorder

The percentage of adults in the CHNA community who currently smoke is 23.6% and is unfavorable to state and national benchmarks. This indicator is relevant because tobacco use is linked to leading causes of death, such as cancer and cardiovascular disease.

Counties in the Appalachian region of the eastern United States have been disproportionately impacted by the epidemic of addiction. The death rate for opioid overdoses in Appalachian counties is 75% higher than non-Appalachian counties. The death rate for opioid overdoses in the CHNA community is more than triple the national and state rates.

Deaths of despair include deaths due to intentional self-harm (suicide), alcohol-related disease, and drug overdose. The rate for deaths of despair is almost three times the national rate.

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Data Tables

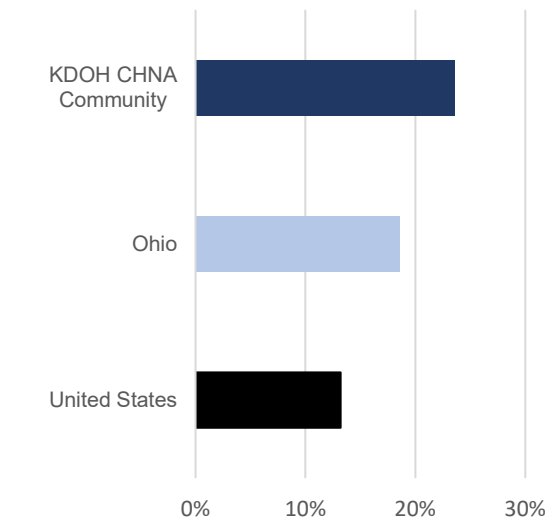
Behavioral Health Barometer

2021-2022 National Survey on Drug Use - Youth Substance Abuse

	2021-2022		2017-2019	
	Ohio	United States	Ohio	United States
Cigarette Use Among youth Aged 12-17	1.82%	1.45%	3.76%	2.50%
Marijuana Use among Youth Aged 12-17	6.96%	6.25%	6.45%	7.02%
Alcohol Use among Youth Aged 12-17	7.60%	7.03%	9.63%	9.19%
Illicit Drug Use among Youth Aged 12-17	8.32%	7.44%	8.01%	8.37%

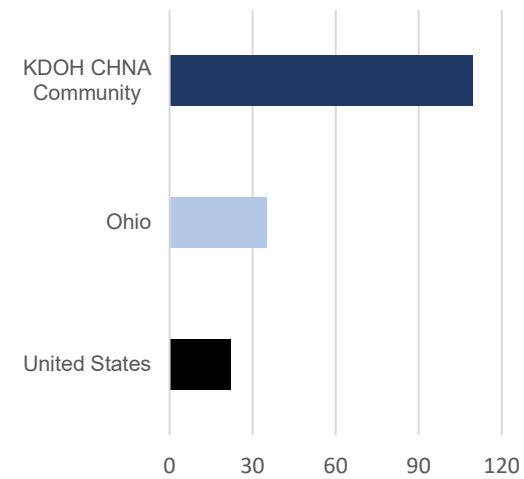
Adult Current Smokers

Percentage (Crude)



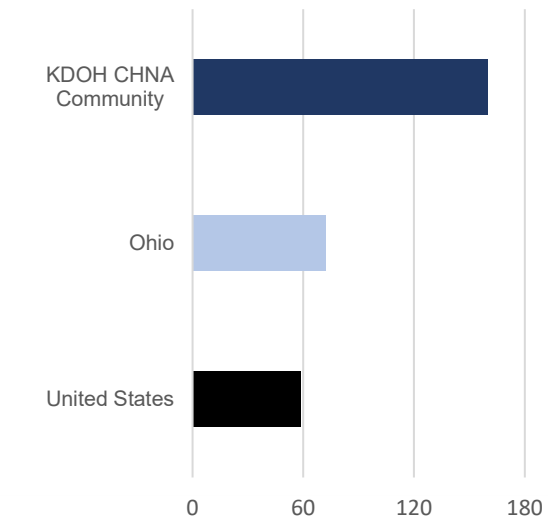
Mortality-Opioid Overdose

Rate per 100,000 Population (Crude)



Deaths of Despair

Rate per 100,000 Population (Crude)



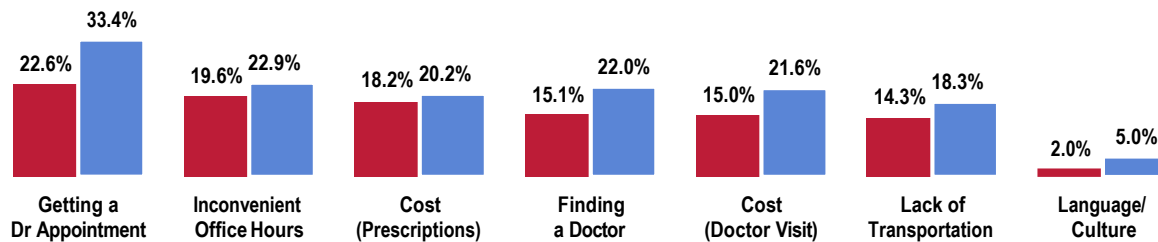
Findings from 2024 Collaborative CHNA

KDOH obtained input through collaborative CHNA efforts of Southern Ohio Medical Center, Scioto County Health Department and Portsmouth City Health Department. This collaborative CHNA's defined CHNA community included Scioto, Adams, Jackson, Lawrence and Pike Counties in Ohio and Lewis and Greenup Counties in Kentucky.

The CHNA was conducted by PRC and finalized in September 2024. Primary input was obtained through an online key informant survey as well as a community survey. The community survey had a total of 808 total respondents, with 549 individual respondents representing Scioto County. The findings on the following pages are from the health survey conducted as part of the collaborative CHNA broken out for Scioto County only.

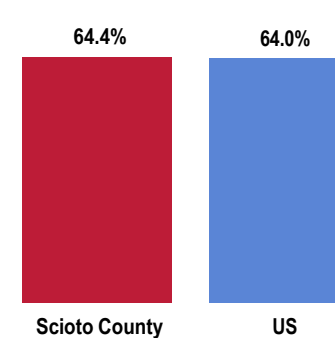
Barriers to Access Have Prevented Medical Care in the Past Year

■ Scioto County ■ US

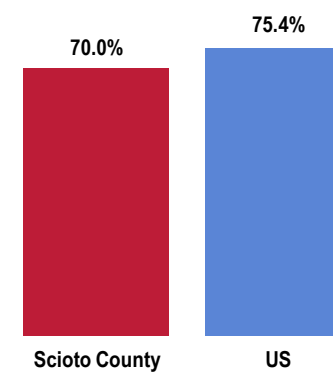


In addition, 16.6% of adults have skipped doses or stretched a needed prescription in the past year in

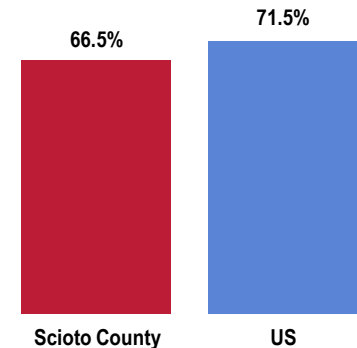
Breast Cancer Screening (Women 50-74) Healthy People 2030 = 80.5% or Higher



Cervical Cancer Screening (Women 21-65) Healthy People 2030 = 84.3% or Higher



Colorectal Cancer Screening (Adults 45-75) Healthy People 2030 = 74.4% or Higher

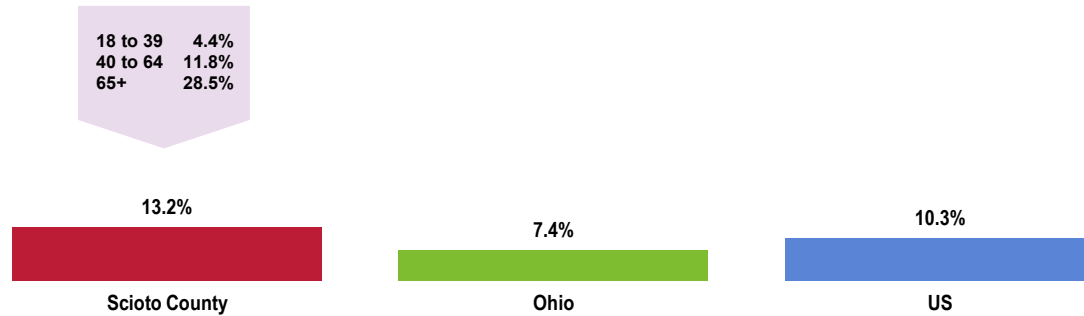


Sources: 2024 PRC Community Health Survey, PRC, Inc. [Items 6-13]

Sources: 2024 PRC Community Health Survey, PRC, Inc. [Items 101-103]

Findings from 2024 Collaborative CHNA-Scioto County Data

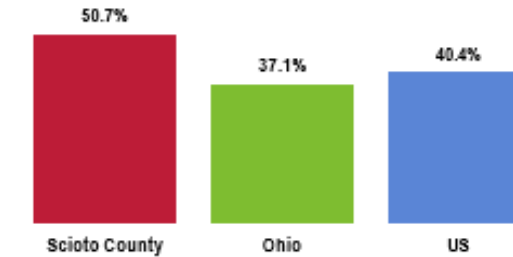
Prevalence of Heart Disease



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 221]

Prevalence of High Blood Pressure

Healthy People 2030 = 42.6% or Lower

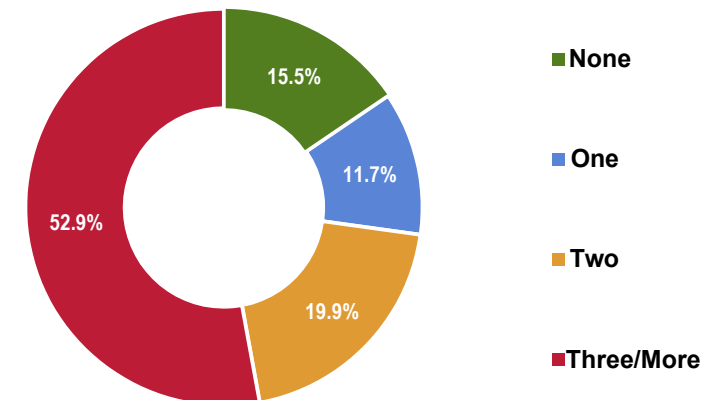


Sources: 2024 PRC Community Health Survey, PRC, Inc. [Items 29-30]

Prevalence of High Blood Cholesterol

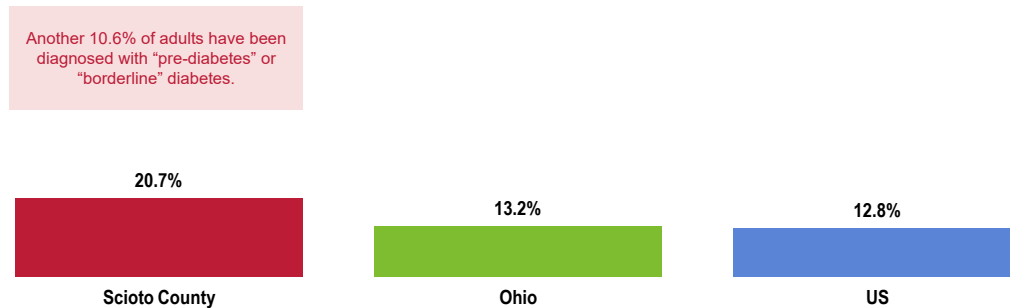


Number of Current Chronic Conditions (Scioto County, 2024)



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 107]

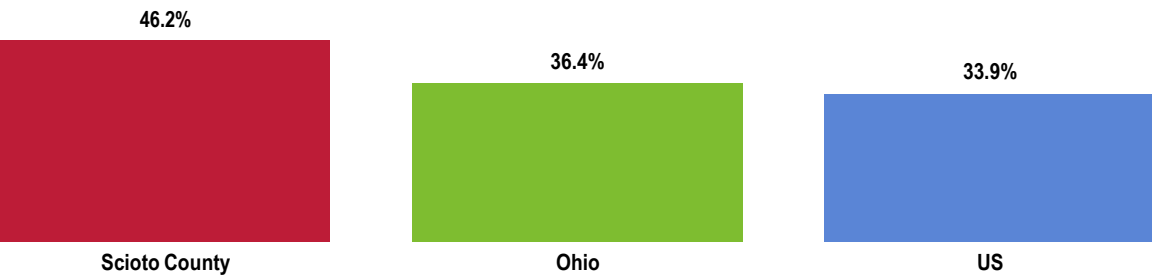
Prevalence of Diabetes



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 106]

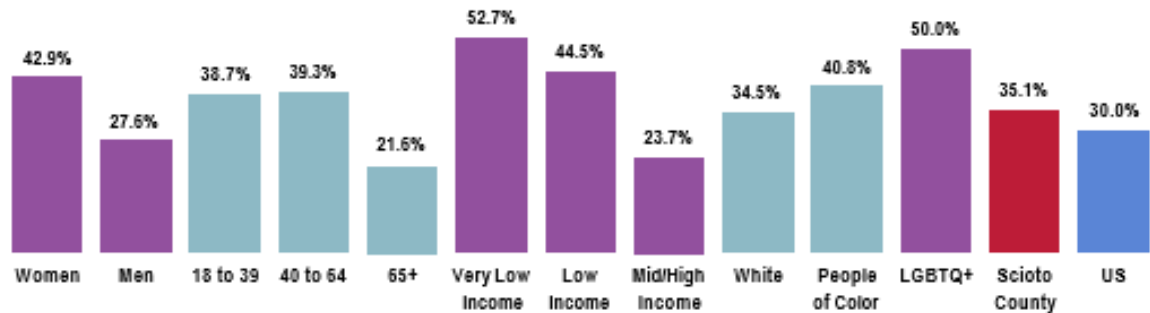
Findings from 2024 Collaborative CHNA-Scioto County Data

Prevalence of Obesity
Healthy People 2030 = 36.0% or Lower



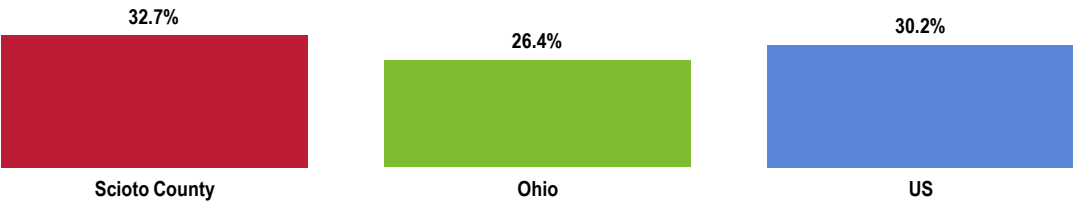
Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 112]

Find It “Very” or “Somewhat”
Difficult to Buy Affordable Fresh Produce
(Scioto County, 2024)



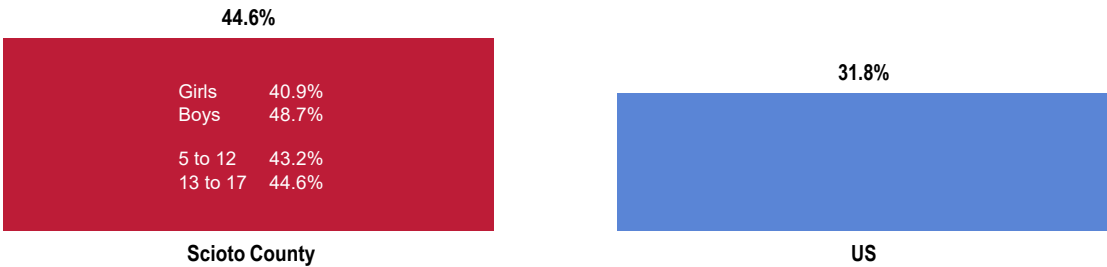
Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 66]

No Leisure-Time Physical Activity in the Past Month
Healthy People 2030 = 21.8% or Lower



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 69]

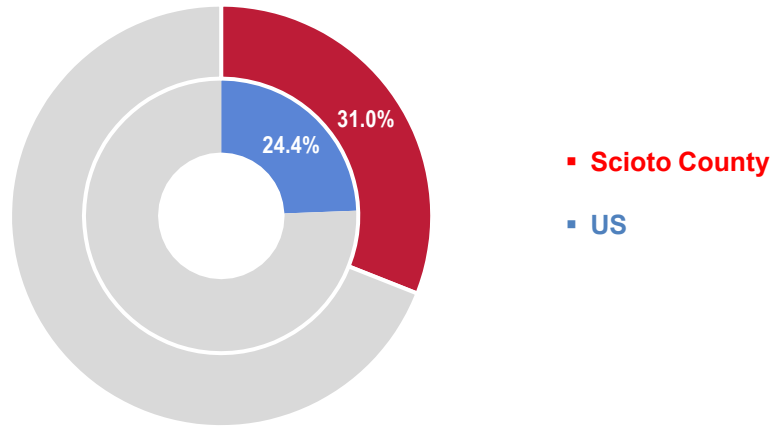
Prevalence of Overweight in Children
(Children 5-17)



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 113]

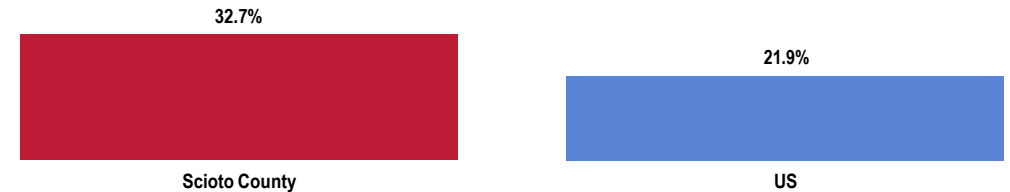
Findings from 2024 Collaborative CHNA-Scioto County Data

Experience “Fair” or “Poor” Mental Health



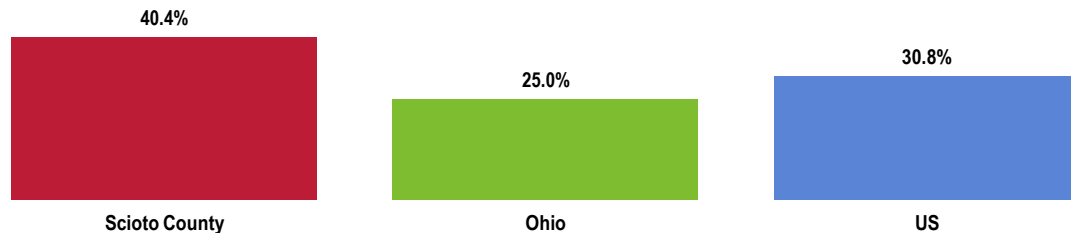
Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 77]

Currently Receiving Mental Health Treatment



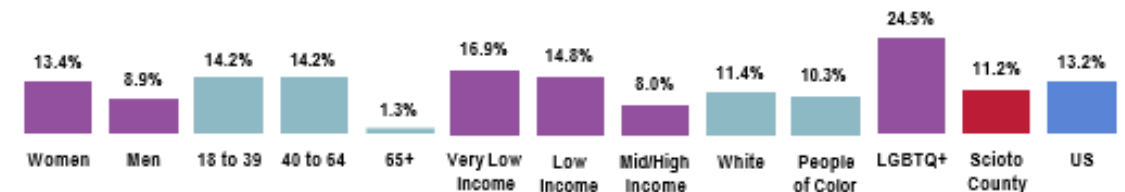
Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 81]

Have Been Diagnosed With a Depressive Disorder



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 80]

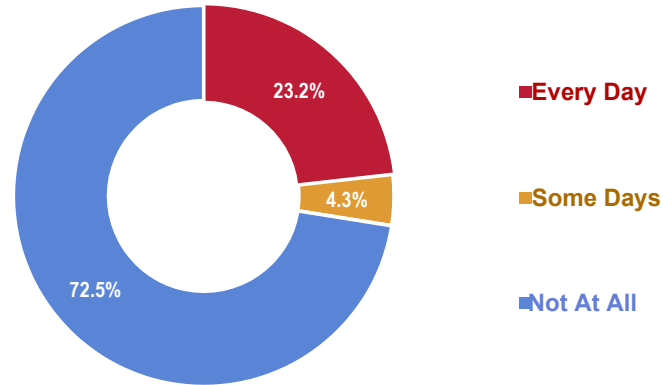
Unable to Get Mental Health Services When Needed in the Past Year (Scioto County, 2024)



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 82]

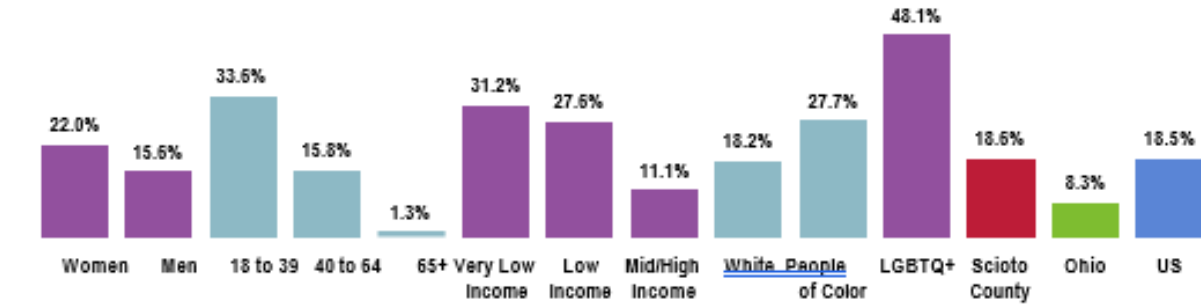
Findings from 2024 Collaborative CHNA-Scioto County Data

Prevalence of Cigarette Smoking
(Scioto County, 2024)



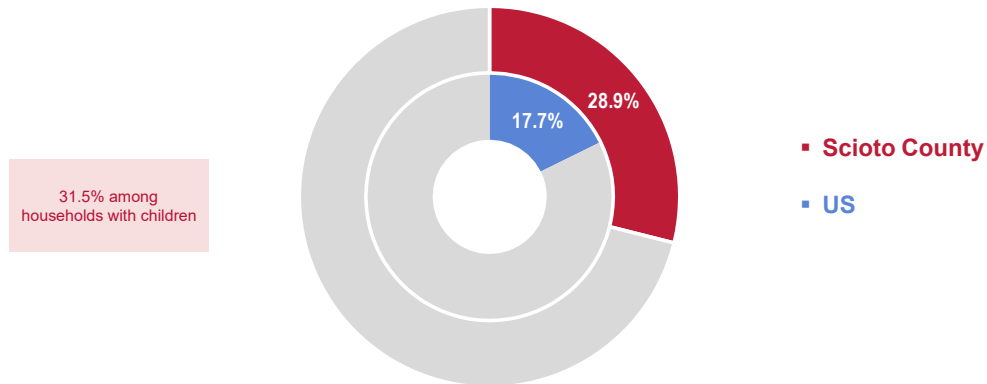
Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 34]

Currently Use Vaping Products
(Scioto County, 2024)



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Item 36]

Member of Household Smokes at Home



Sources: 2024 PRC Community Health Survey, PRC, Inc. [Items 35, 114]

Community Survey

 [Link to Community Survey Summary](#)

In conjunction with the 2024 collaborative CHNA, KDOH partnered with the Scioto County Health Department and Portsmouth City Health Department to conduct a community survey. The survey was conducted during September, October, and November 2024. A link to the survey was distributed via e-mail, social media and word of mouth to the community-at-large. A total of 81 surveys were completed. Additional survey findings are available in the Appendices.

Most Important Factors for a Healthy Community

Access to Healthcare

Community Support
and UnityHealthy Lifestyle
Resources

Transportation

Mental Health Support

Biggest Health Problems in the Community

Drug
Abuse/Addiction

Obesity

Cancer

Lack of Availability
of Mental Health
Care

Heart Disease

In the past 12 months, when you needed to see a doctor, but couldn't because of?

Cost of Healthcare

Transportation

No Sick Leave

Lack of Child Care

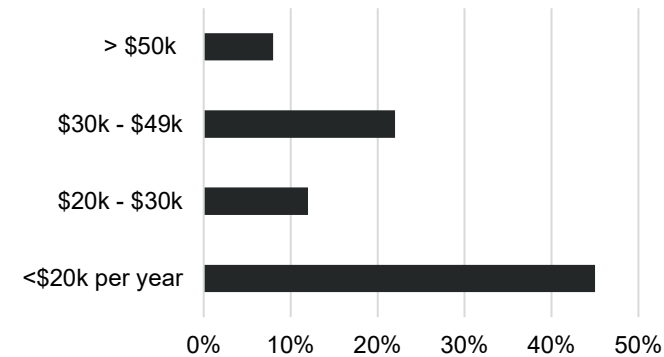
Community Survey

Community Resources and Health Behaviors – Key Findings

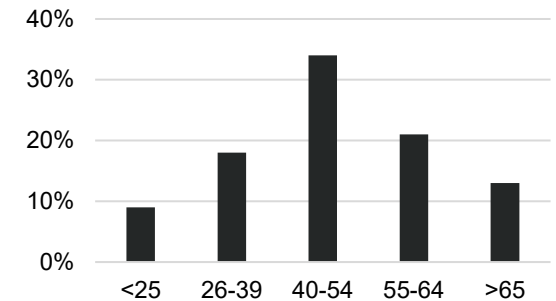
- Only **33%** of the respondents eat five fruits and vegetables each day. Slightly more, **37%**, exercise at least 30 minutes a day, five days a week.
- 6%** of the survey respondents indicated transportation to and from doctor appointments is challenging, a large decrease from the prior survey
- 41%** of respondents report smoking and **36%** of them have tried to quit smoking in the past 12 months
- 22%** of respondents consumed alcohol in the past 30 days and **22%** of them had 4 or more drinks during one occasion
- When was the last time you had a routine check-up?
 - 30.8%** reported Within 1 month
 - 27.7 %** reported 1-6 Months
 - 15.4%** reported 6-12 Months
 - 26.1%** reported Over 1 year

Demographics of Survey Respondents

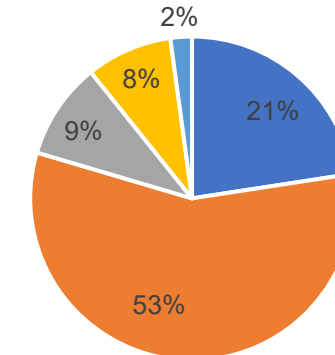
Income of Survey Respondents



Age of Survey Respondents



Education of Survey Respondents



■ No high school ■ High School / GED ■ Associate Degree
■ Bachelor Degree ■ Masters and above



[Link to Community Survey Summary](#)

Professional Provider Survey



King's Daughters Ohio obtained input from 30 medical professionals, including primary care providers, case managers, social workers, and advanced practice registered nurses through a survey conducted in March 2025. A summary of findings from the survey is provided on the following pages.

Most Prevalent Patient Health Concerns

Providers were asked to identify the five highest health concerns in their population. The health concerns listed below are the top health concerns.

Cancer

Adult
obesity/overweight

Diabetes

Chronic Pain

Substance Abuse –
illegal drugs

High Blood Pressure

Depression

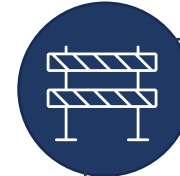
Aging Concerns

Mental health conditions
(other than depression)



Community Services that Need Strengthening

- Behavioral health services
- Homeless services
- Dental care/oral health services
- Cancer services
- Health care services for uninsured and underinsured



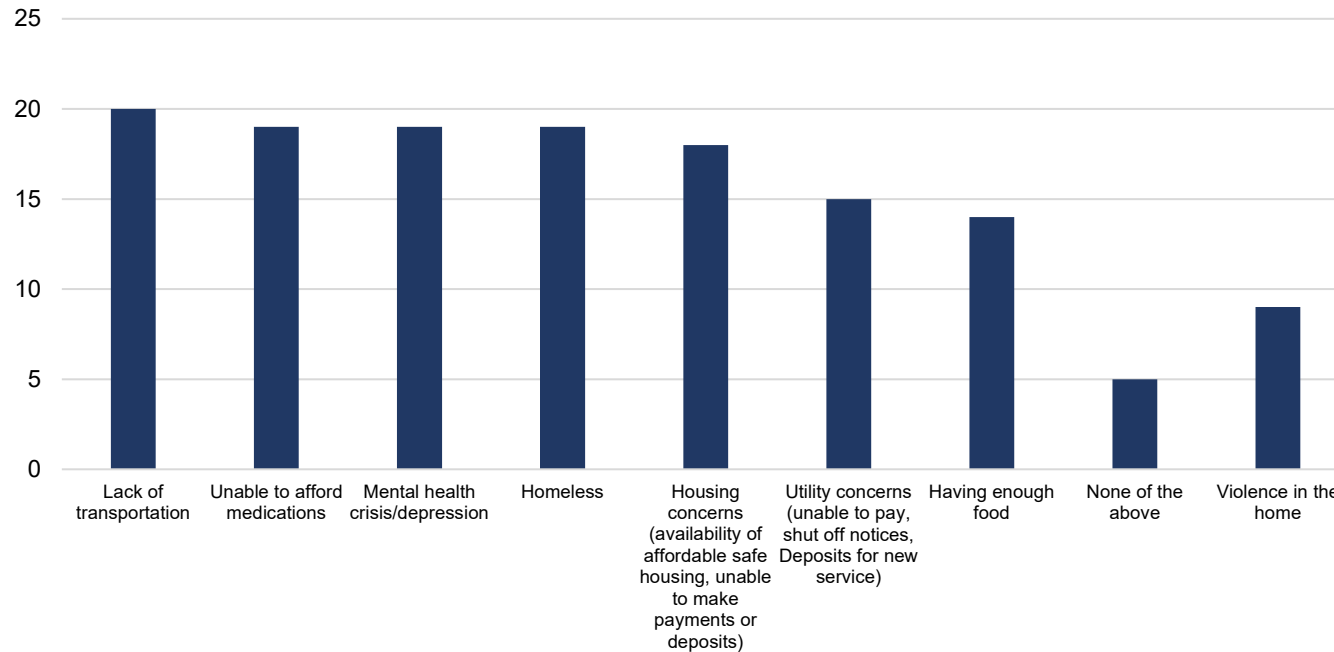
Most Common Barriers to Seeking Health Services

- Transportation
- Cost of insurance/co-pays
- Too expensive
- Lack of inadequate coverage with health insurance
- Mobility issues (use a wheelchair, scooter, walker)

Professional Provider Survey

Social Determinants of Health

Patient Expressed or Implied Concerns



“Transportation remains one of the biggest barriers to patient care. We have some resources, but not enough for this area.”

“SDOH Social Determinates of Health, all those things that tie directly into healthcare but cause if those basic needs are not met, Patient healthcare will continue to decline. “

What should KDOH Address over the next three to five years?

Providers were asked to recommend the most important issue that KDOH should address over the next three to five years.

Mental Health

- Most frequently mentioned concern
- Tied closely with substance use, homelessness, aging, and violence in healthcare settings.
- Need for screening, early intervention, treatment access, and workplace safety support.

Social Determinants of Health (SDOH)

- Homelessness, food insecurity, lack of insurance, and economic instability are major barriers to health
- Underserved populations, such as veterans, require targeted support
- Emphasis on integrating social support with healthcare delivery.

Substance Abuse

- Strongly connected to mental health issues, violence, homelessness, and lack of family/social support
- Need for prevention, treatment services, and community safety measures



Evaluation of the Impact of Actions Taken Since the Last CHNA

Chronic Conditions				
Initiatives/Programs	Goals/Impact	FY 23	FY 24	FY 25 YTD
Cancer				
Increase awareness for breast cancer screening for those at-risk and encourage mammography screening.	Increase KDOH screening mammograms by 2% annually. FY 2022 baseline 1,336.	1,428	1,709	11,180
Increase awareness for colon cancer screening for those over 45 years of age.	Increase colon cancer education by 2% annually. Benchmark 230 adults served.	1) Shawnee State university 58 2) Fall into health fair 110 3) Portsmouth family care- 17 4) Green elem-64 5) Portsmouth east- 27 6) Portsmouth elem- 111 7) Portsmouth west 97 8) CAO Baby shower 170 Total 654	1) CAO Baby Shower: 98 2) National night out: 41 3) Kawinis: 25 Total: 164	TBD
Preventive Care				
Initiatives/Programs	Goals/Impact	FY 23	FY 24	FY 25 YTD
Physical Activity/Wellness				
Provides community education on healthy eating and educational programs focused on healthy lifestyles and wellness.	Four events annually related to physical activity with children. Set benchmark 2023, establish 2024 metric in FY 2023.	1)Salvation Army-30 2) Fall into health 110 3)Piketon Plant- 153 4)Senior Health Fair- 114 5)Kids Mobile Market- 110 6)CAO Baby Shower- 98	1) National night out 98 2) Scioto co Health fair 988 3) Portsmouth block party-104 4) CAO Baby Shower	1) Kick off caravan 2) 14th st community center 3) Portsmouth east 4) Portsmouth Elementary
Provides community education on healthy eating and educational programs focused on healthy lifestyles and wellness.	Six health screening activities related to blood pressure, cholesterol, blood sugar, nutrition and nicotine education. Set benchmark 2023, establish 2024 metric in FY 2023.	1) HH Block Party 2) LC Manufacturing 3) KDOH - 4) CAO 5) Piketon 6) Wheelersburg	1) HH Block Party 2) Piketon A plant 3) 14th st community center 4) CAO 5) Salvation 6) Rotary	1) HH Block Party 2) Lucasville Library 3) Bristol Village 4) Senior Center 5) 6)

Evaluation of the Impact of Actions Taken Since the Last CHNA

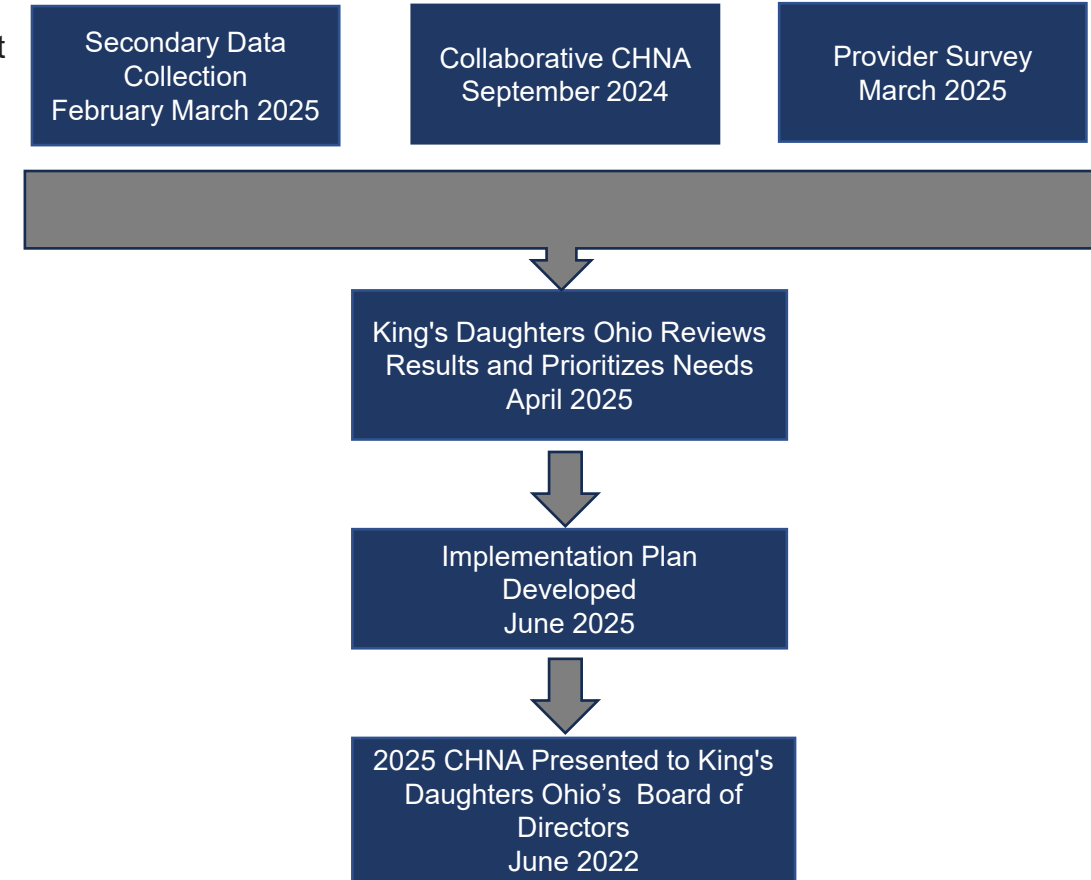
Preventive Care				
Initiatives/Programs	Goals/Impact	FY 23	FY 24	FY 25 YTD
Nutrition				
Provides community education on healthy eating and educational programs focused on nutrition.	<u>Three Mobile Market events</u> in local schools or community groups focusing on education and healthy choices.	1)KMM- NNO 2)Senior HF 3) KMM-Notre Dame 4) KMM Portsmouth West	1) 14th street community center 2) Notre Dame 3) Portsmouth West	1) Portsmouth East 2) Portsmouth elementary 3) 14th Stree community center
Provides community education on healthy eating and educational programs focused on nutrition.	<u>Four events</u> (two focused on seniors) annually related to healthy eating and educational programs focused on healthy lifestyles. Set benchmark 2023, establish 2024 metric in FY 2023.	1)KMM- NNO, 2)Senior HF, 6 days 3)SC Fair= 8 4) KMM Notre Dame	1) Community Baby Shower 2) SC Fair 3) Salvation Army 4) Concord nsg Home	1) 14 th street community center Health fair 2) Bristol Village 3) Senior Center
Mental Health				
Provide community education regarding the Suicide Prevention Hotline and mental health awareness.	Promote suicide prevention during four events annually.	1) NNO 2) SC Fair 6 days -1,590 people served 3) MSC Safety Fair 4) CAO Baby Shower	1) Portsmouth Parade-info passed out 2) concord Nurseing- 50 3) KDOH 4) Science Fair	1) Bristol Village 2) 14th St community center 3) Lucasville Trade Days 4) KDOH
Partner with KDHS to publish on social media platforms.	Track number of posts, likes and shares on social media platforms.	20 Post - Reached 41,057, Reactions 2,480, Likes 599	Post- 16 Reached-69,900 Reactions 1,892 Likes 539	Posts 7 Reached 57,413 Reactions 2,019 Likes 388

Prioritization of Identified Health Needs


Primary and secondary data were gathered and compiled from September 2024 to March 2025. Based on the information gathered through the CHNA process, the following summary list of needs was identified. Identified health needs are listed in alphabetical order.

- Access to health services/navigating healthcare services
- Chronic health conditions
- Dental care
- Food insecurity/lack of healthy nutrition
- Lack of affordable housing
- Mental health and depression
- Obesity
- Physical inactivity
- Poverty
- Preventive care
- Smoking/vaping
- Substance abuse
- Teen pregnancy
- Transportation
- Unintentional injury

Based on the information gathered through this Community Health Needs Assessment and the prioritization process described above, KDOH chose the needs below to address over the next three years.



Appendix A

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Population by Age & Gender

	Age 0-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+	Total	Male	Female
King's Daughters Ohio CHNA Community – Scioto County, OH	15,893	6,292	9,384	8,883	9,333	9,804	13,529	73,118	36,234	36,884
State / National Benchmark										
Ohio	2,610,179	1,046,523	1,550,140	1,459,379	1,429,147	1,581,635	2,103,043	11,780,046	5,809,077	5,970,969
United States	73,645,238	30,307,641	45,497,632	43,492,887	40,847,713	42,626,382	55,970,047	332,387,540	164,545,087	167,842,453

	Age 0-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+	Total	Male	Female
King's Daughters Ohio CHNA Community – Scioto County, OH	21.7%	8.6%	12.8%	12.1%	12.8%	13.4%	18.5%	100.0%	49.6%	50.4%
State / National Benchmark										
Ohio	22.2%	8.9%	13.2%	12.4%	12.1%	13.4%	17.8%	100.0%	49.3%	50.7%
United States	22.2%	9.1%	13.7%	13.1%	12.3%	12.8%	16.8%	100.0%	49.5%	50.5%

Data Source: US Census Bureau, American Community Survey. 2019-23. Source geography: Tract

Population by Race and Ethnicity

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	Non-Hispanic/ Latino	Hispanic/ Latino	Total
King's Daughters Ohio CHNA Community – Scioto County, OH	72,025	1,093	73,118
State / National Benchmark			
Ohio	11,242,487	537,559	11,780,046
United States	269,255,951	63,131,589	332,387,540

White	Black	Asian	Other Race	Multiple Races	Total
68,092	1,786	364	290	2,586	73,118
9,167,192	1,446,466	288,117	207,897	670,374	11,780,046
210,875,446	41,070,890	19,352,659	25,494,824	35,593,721	332,387,540

	Non-Hispanic/ Latino	Hispanic/ Latino	Total
King's Daughters Ohio CHNA Community – Scioto County, OH	98.5%	1.5%	100.0%
State / National Benchmark			
Ohio	95.4%	4.6%	100.0%
United States	81.0%	19.0%	100.0%

White	Black	Asian	Other Race	Multiple Races	Total
93.1%	2.4%	0.5%	0.4%	3.5%	100.0%
77.8%	12.3%	2.4%	1.8%	5.7%	100.0%
63.4%	12.4%	5.8%	7.7%	10.7%	100.0%

Data Source: US Census Bureau, American Community Survey. 2019-23. Source geography: Tract

Household Income and Poverty

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Average Family Income

This indicator reports average family income based on the latest 5-year American Community Survey estimates. A family household is any housing unit in which the householder is living with one or more individuals related to him or her by birth, marriage, or adoption. Family income includes the incomes of all family members age 15 and older.

Children Eligible for Free/Reduced Price Lunch

Free or reduced price lunches are served to qualifying students in families with income between under 185 percent (reduced price) or under 130% (free lunch) of the US federal poverty threshold as part of the federal National School Lunch Program (NSLP).

	Population Below 100% FPL	Percentage of Population Below 100% FPL	Percentage of Population under Age 18 in Poverty	Average Family Income	Percentage of Children Eligible for Free/Reduced Price Lunch
King's Daughters Ohio CHNA Community – Scioto County, OH	15,618	22.37%	28.82%	\$81,789	46.90%
State / National Benchmark					
Ohio	1,519,610	13.24%	17.98%	\$115,826	34.50%
United States	40,390,045	12.44%	16.32%	\$130,215	53.50%

Data Source: US Census Bureau, American Community Survey. 2019-23. Source geography: Tract

Free/Reduced Lunch Data Source: National Center for Education Statistics, NCES – Common Core Data. 2022-2023.

Uninsured Adults

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Uninsured Population

This indicator reports the percentage of adults age 18 to 64 without health insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

	Total Population (For Whom Insurance Status is Determined)	Uninsured Population	Uninsured Population, Percent
King's Daughters Ohio CHNA Community – Scioto County, OH	41,009	3,461	8.4%
State / National Benchmark			
Ohio	6,878,056	558,057	8.1%
United States	197,858,423	22,237,154	11.2%

Data Source: US Census Bureau, Small Area Health Insurance Estimates. 2022. Source geography: County

Population with a Disability


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Population with Any Disability
This indicator reports the percentage of the total civilian non-institutionalized population with a disability. This indicator is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers.

	Population with a Disability	Total Population (For Whom Disability Status Is Determined)	Percentage of Population with a Disability
King's Daughters Ohio CHNA Community – Scioto County, OH	15,494	70,519	22.0%
State / National Benchmark			
Ohio	1,646,041	11,612,784	14.2%
United States	42,703,063	327,425,278	13.0%

Data Source: US Census Bureau, American Community Survey. 2019-23. Source geography: Tract

Educational Attainment

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Education

Education metrics can be used to describe variation in population access, proficiency, and attainment throughout the education system, from access to pre-kindergarten through advanced degree attainment. These indicators are important because education is closely tied to health outcomes and economic opportunity.

	Total Population Age 25+	Population Age 25+ with No High School Diploma	Population Age 25+ with No High School Diploma, Percent	Population Age 25+ with Bachelor's Degree or Higher, Percent
King's Daughters Ohio CHNA Community – Scioto County, OH	50,933	5,761	11.3%	18.0%
State / National Benchmark				
Ohio	8,123,344	680,554	8.4%	31.0%
United States	228,434,661	24,230,217	10.6%	35.0%

Data Source: US Census Bureau, American Community Survey. 2019-23. Source geography: Tract

Areas Affected by a Health Professional Shortage Area (HPSA)


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Areas Affected by a Health Professional Shortage Area
This indicator reports the percentage of the population that is living in a geographic area designated as a "Health Professional Shortage Area" (HPSA), defined as having a shortage of primary medical care, dental or mental health professionals. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

	Population Living in an Area Affected by a HPSA	Total Population (5 year estimate)	Percentage of Population Living in an Area Affected by a HPSA
King's Daughters Ohio CHNA Community – Scioto County, OH	32,304	76,040	42.5%
State / National Benchmark			
Ohio	1,839,506	11,655,397	15.8%
United States	72,230,619	324,697,795	22.3%

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, HRSA - Health Professional Shortage Areas Database. 2024. Source geography: HPSA

Access to Healthcare Services

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	Dental Care		Mental Care		Primary Care	
	Providers per 100,000 Population	Dental Health Providers	Providers per 100,000 Population	Mental Health Providers	Providers per 100,000 Population	Primary Care Providers
King's Daughters Ohio CHNA Community – Scioto County, OH	35.13	26	1,137.71	842	71.61	53
State / National Benchmark						
Ohio	58.27	6,875	445.97	52,622	117.01	13,807
United States	66.47	222,511	312.48	1,045,976	116.28	389,218

Dental Care Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). 2024. Source geography: Address

Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). Accessed via County Health Rankings. December 2024. Source geography: County

Dental Care

This indicator reports the number of oral healthcare providers with a CMS National Provider Identifier (NPI). Providers included in this summary are those who list "dentist," "general practice dentist," or "pediatric dentistry" as their primary practice classification, regardless of sub-specialty. Data are from the latest Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) downloadable file.


Mental Care

This indicator reports the number of mental health providers in the report area as a rate per 100,000 total area population. Mental health providers include psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental healthcare. Data from the 2024 Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) downloadable file are used in the 2024 County Health Rankings.

Primary Care

This indicator reports the number of primary care physicians per 100,000 population. Doctors classified as "primary care physicians" by the AMA include General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians aged 75 and over and physicians practicing sub-specialties within the listed specialties are excluded. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

Preventive Services – Core Preventable Services

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	Percentage of Males age 65+ Up to Date on Core Preventative Services, Age- Adjusted	Percentage of Females age 65+ Up to Date on Core Preventive Services, Age- Adjusted
King's Daughters Ohio CHNA Community – Scioto County, OH	39.1%	34.1%
State / National Benchmark		
Ohio	43.2%	38.3%
United States	44.0%	37.4%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2020. Source geography: Tract

Male Preventive Services

This indicator reports the percentage of males age 65 years and older who report that they are up to date on a core set of clinical preventive services. Services include: an influenza vaccination in the past year; a PPV ever; and either a fecal occult blood test (FOBT) within the past year, a sigmoidoscopy within the past 5 years and a FOBT within the past 3 years, or a colonoscopy within the past 10 years.

Female Preventive Services

This indicator reports the percentage of females age 65 years and older who report that they are up to date on a core set of clinical preventive services. Services include: an influenza vaccination in the past year; a pneumococcal vaccination (PPV) ever; either a fecal occult blood test (FOBT) within the past year, a sigmoidoscopy within the past 5 years and a FOBT within the past 3 years, or a colonoscopy within the previous 10 years; and a mammogram in the past 2 years.

Preventive Services – Blood Pressure, Diabetes, and Preventable Hospitalizations

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	Blood Pressure Medication Nonadherence	Medicare Enrollees with Diabetes with Annual Exam	Preventable Hospitalizations per 100,000 Beneficiaries
King's Daughters Ohio CHNA Community – Scioto County, OH	24.1%	85.0%	4,332
State / National Benchmark			
Ohio	20.4%	87.9%	3,033
United States	21.1%	87.5%	2,666

Blood Pressure Medication Nonadherence Data Source: Centers for Disease Control and Prevention, CDC - Atlas of Heart Disease and Stroke 2019-2021. Source geography: County

Diabetes Annual Exam Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2019. Source geography: County

Preventable Hospitalizations Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool. 2022. Source geography: County

Blood Pressure

This indicator reports the number and percentage of Medicare beneficiaries not adhering to blood pressure medication schedules. Nonadherence is defined having medication coverage days at less than 80%.

Diabetes Annual Exam

This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Preventable Hospitalizations

This indicator reports the preventable hospitalization rate among Medicare beneficiaries for the latest reporting period. Preventable hospitalizations include hospital admissions for one or more of the following conditions: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infection. Rates are presented per 100,000 beneficiaries.

Preventive Services – Cancer Screenings

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	Adults with Adequate Colorectal Cancer Screening, Age-Adjusted	Females age 21-65 with Recent Pap Smear, Age- Adjusted	Females Age 50-74 with Recent Mammogram, Age-Adjusted
King's Daughters Ohio CHNA Community – Scioto County, OH	54.4%	80.3%	69.0%
State / National Benchmark			
Ohio	59.6%	82.7%	75.5%
United States	54.1%	83.7%	76.0%

Colorectal Cancer Screening Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022.

Pap Smear Screening Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2020.

Mammogram Screening Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022.

Colorectal Cancer Screening

This indicator reports the percentage of adults with adequate colorectal cancer screening.


Pap Smear Screening

This indicator reports the percentage of females age 21–65 years who report having had a Papanicolaou (Pap) smear within the previous 3 years.

Mammogram Screening

This indicator reports the percentage of females age 50-74 years who report having had a mammogram within the previous 2 years.

Health Outcomes and Mortality – Cancer Incidence Rates

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Cancer Incidence Rates

These indicators report the age adjusted incidence rate (cases per 100,000 population per year) of individuals with cancer adjusted to 2000 U.S. standard population age groups (Under Age 1, 1-4, 5-9, ..., 80-84, 85 and older).

	Breast Cancer Incidence Rate (Per 100,000 Population)	Colorectal Cancer Incidence Rate (Per 100,000 Population)	Lung Cancer Incidence Rate (Per 100,000 Population)	Prostate Cancer Incidence Rate (Per 100,000 Population)
King's Daughters Ohio CHNA Community – Scioto County, OH	99.8	37.6	88.6	91.8
State / National Benchmark				
Ohio	129.5	39.1	64.7	114.1
United States	127.0	36.5	54.0	110.5

Data Source: State Cancer Profiles. 2016-20. Source geography: County

Health Outcomes and Mortality – Chronic Conditions

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	Percentage of Adults with Diagnosed Diabetes, Age-Adjusted	Percentage of Adults Ever Diagnosed with Coronary Heart Disease, Age-Adjusted	Percentage of Adults with High Blood Pressure, Age-Adjusted
King's Daughters Ohio CHNA Community – Scioto County, OH	12.9%	8.1%	39.0%
State / National Benchmark			
Ohio	11.6%	6.7%	32.4%
United States	10.4%	5.7%	29.6%

Coronary Heart Disease and Diabetes Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022. Source geography: County

High Blood Pressure Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2021.

Diabetes

This indicator reports the number and percentage of adults age 18 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Coronary Heart Disease

This indicator reports the percentage of adults age 18 and older who report ever having been told by a doctor, nurse, or other health professional that they had angina or coronary heart disease.

High Blood Pressure

This indicator reports the percentage of adults age 18 who report ever having been told by a doctor, nurse, or other health professional that they have high blood pressure. Women who were told high blood pressure only during pregnancy and those who were told they had borderline hypertension were not included.

Health Outcomes and Mortality – Mortality

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Cancer Deaths

This indicator reports the 2019-2023 five-year average rate of death due to malignant neoplasm (cancer) per 100,000 population.

Heart Disease Deaths

This indicator reports the 2019-2023 five-year average rate of death due to heart disease (ICD10 Codes 120-125) per 100,000 population.


Lung Disease Deaths

This indicator reports the 2019-2023 five-year average rate of death due to chronic lower respiratory disease per 100,000 population.

	Cancer Death Rate (Per 100,000 Population), Crude	Heart Disease Death Rate (Per 100,000 Population), Crude	Lung Disease Death Rate (Per 100,000 Population), Crude	Stroke Death Rate (Per 100,000 Population), Crude
King's Daughters Ohio CHNA Community – Scioto County, OH	277.0	384.6	128.3	50.4
State / National Benchmark				
Ohio	212.2	253.0	57.7	59.9
United States	182.7	207.2	44.9	48.3

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2019-2023. Source geography: County

Injury and Violence – Mortality – Unintentional Injury

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Death due to Unintentional Injury (Accident)

This indicator reports the 2019-2023 five-year average rate of death due to unintentional injury (accident) per 100,000 population..

	Unintentional Injury Death Rate (Per 100,000 Population), Crude	Five Year Total Deaths, 2019-2023 Total
King's Daughters Ohio CHNA Community – Scioto County, OH	164.5	604
State / National Benchmark		
Ohio	79.6	46,715
United States	63.3	1,048,667

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2019-2023.
Source geography: County

Injury and Violence – Violent Crime and Property Crime

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Violent Crime

Violent crime includes homicide, rape, robbery, and aggravated assault.

Property Crime

This indicator reports the rate of property crime offenses reported by law enforcement per 100,000 residents. Property crimes include burglary, larceny-theft, motor vehicle theft, and arson. This indicator is relevant because it assesses community safety.

	Violent Crimes, Annual Rate (Per 100,000 Pop.)	Violent Crimes, 3-year Total	Property Crimes, Annual Rate (Per 100,000 Pop.)	Property Crimes, Annual Average
King's Daughters Ohio CHNA Community – Scioto County, OH	195.4	447	3,310.7	2,515
State / National Benchmark				
Ohio	290.7	102,280	2,453.8	284,730
United States	416.0	4,579,031	2,466.1	7,915,583

Property Crime Data Source: Federal Bureau of Investigation, FBI Uniform Crime Reports. Additional analysis by the National Archive of Criminal Justice Data. Accessed via the Inter-university Consortium for Political and Social Research. 2014 & 2016. Source geography: County

Violent Crime Data Source: Federal Bureau of Investigation, FBI Uniform Crime Reports. Additional analysis by the National Archive of Criminal Justice Data. Accessed via the Inter-university Consortium for Political and Social Research. 2015-2017. Source geography: County

Maternal, Infant, and Child Care – Infant Deaths, Low Weight Births, Birth Care

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	Infant Deaths per 1,000 Live Births	Low Birthweight Births, Percentage	Births with Late/No Care, Percentage	Births to Women Smoking During Pregnancy, Percentage
King's Daughters Ohio CHNA Community – Scioto County, OH	9.5	8.1%	No data	20.1%
State / National Benchmark				
Ohio	7.1	8.6%	6.1%	9.6%
United States	5.7	8.3%	6.1%	4.6%

Infant Deaths Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2015-2021. Source geography: County

Low Birthweight Births Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2016-2022. Source geography: County

Births with Late/No Care Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. Centers for Disease Control and Prevention, Wide-Ranging Online Data for Epidemiologic Research. 2017-19. Source geography: County

Births to Women Smoking During Pregnancy Data Source: Health Resources & Services Administration, HRSA – Maternal and Child Health Bureau. 2020-2022.

Infant Deaths

This indicator reports information about infant mortality, which is defined as the number of all infant deaths (within 1 year) per 1,000 live births.

Low Birthweight Births

This indicator reports the percentage of live births where the infant weighed less than 2,500 grams (approximately 5 lbs., 8 oz.). These data are reported for a 7-year aggregated time period.

Births with Late/No Care

This indicator reports the percentage of women who did not obtain prenatal care until the 7th month (or later) of pregnancy or who didn't have any prenatal care, as of all who gave birth during the three-year period from 2017 to 2019. This indicator is relevant because engaging in prenatal care decreases the likelihood of maternal and infant health risks. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Smoking During Pregnancy

This indicator reports estimated percentage of live births where maternal cigarette smoking was reported during any trimester of pregnancy between 2020 and 2022.

Mental Health – Adult Mental Health

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	Average Poor Mental Health Days per Month	Suicide Rate (Per 100,000 Population), Crude
King's Daughters Ohio CHNA Community – Scioto County, OH	5.7	14.4
State / National Benchmark		
Ohio	5.5	15.0
United States	4.9	14.5

Poor Mental Health Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via County Health Rankings. 2021. Source geography: Tract

Suicide Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2019-2023. Source geography: County


Poor Mental Health

This indicator reports the average number of self-reported mentally unhealthy days in past 30 days among adults.

Suicides

This indicator reports the 2019-2023 five-year average rate of death due to intentional self-harm (suicide) per 100,000 population.

Nutrition, Physical Inactivity Obesity – Food Environment


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Food Deserts

This indicator reports the number of neighborhoods in the report area that are within food deserts. The USDA Food Access Research Atlas defines a food desert as any neighborhood that lacks healthy food sources due to income level, distance to supermarkets, or vehicle access.

Low Food Access

This indicator reports the percentage of the population with low food access. Low food access is defined as living more than 1 mile (urban) or 10 miles (rural) from the nearest supermarket, supercenter, or large grocery store.

SNAP Authorized Retailers

This indicator reports the number of SNAP-authorized food stores as a rate per 10,000 population. SNAP-authorized stores include grocery stores as well as supercenters, specialty food stores, and convenience stores that are authorized to accept SNAP (Supplemental Nutrition Assistance Program) benefits.

		Food Desert		Low Food Access		SNAP Authorized Retailers	
	Total Population (2010)	Food Desert Population	Food Desert Population, Percent	Population with Low Food Access	Population with Low Food Access, Percent	Total SNAP-Authorized Retailers	SNAP-Authorized Retailers per 10,000 Population
King's Daughters Ohio CHNA Community – Scioto County, OH		6,059	7.6%	5,828	7.3%	90	12.31
State / National Benchmark							
Ohio	11,536,504	1,504,341	13.0%	2,899,354	25.1%	9,992	8.48
United States	308,745,538	39,074,974	12.7%	68,611,398	22.2%	264,826	7.89

Food Desert and Low Food Access Data Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2019. Source geography: Tract

SNAP Authorized Retailers Data Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. Additional data analysis by CARES. 2025. Source geography: Tract

Nutrition, Physical Inactivity Obesity – Obesity and Physical Activity

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	Population Age 20+
King's Daughters Ohio CHNA Community – Scioto County, OH	55,620
State / National Benchmark	
Ohio	8,876,498
United States	232,759,569

Obesity		Physical Activity	
Adults with BMI > 30.0	Adults with BMI > 30.0, Percent	Adults with No Leisure Time Physical Activity	Adults with No Leisure Time Physical Activity, Percent
25,862	46.5%	16,964	28.7%
3,123,262	35.2%	2,066,232	22.1%
70,168,831	30.1%	47,072,403	19.5%

Obesity Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2021. Source geography: County

Physical Activity Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2021. Source geography: County

Obesity

This indicator reports the number and percentage of adults aged 20 and older self-report having a Body Mass Index (BMI) greater than 30.0 (obese). Body mass index (weight [kg]/height [m]²) was derived from self-report of height and weight. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Physical Activity

This indicator is based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

Physical Environment – Cost Burdened Households

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Cost Burdened Households

This indicator reports the percentage of the households where housing costs are 30% or more total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels.

	Cost Burdened Households (30%)	Total Households	Percentage of Cost Burdened Households
King's Daughters Ohio CHNA Community – Scioto County, OH	6,515	28,637	22.8%
State / National Benchmark			
Ohio	1,158,956	4,829,571	24.0%
United States	37,330,839	127,482,865	29.3%

Data Source: US Census Bureau, American Community Survey. 2019-23. Source geography: Tract

Physical Environment – Housing

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	Percentage of Households with No or Slow Internet	Percentage of Substandard Housing Conditions
King's Daughters Ohio CHNA Community – Scioto County, OH	15.4%	24.7%
State / National Benchmark		
Ohio	11.2%	25.6%
United States	10.3%	32.0%

Internet Access Data Source: US Census Bureau, American Community Survey. 2019-23 Source geography: Tract

Substandard Housing Data Source: US Census Bureau, American Community Survey. 2019-23. Source geography: Tract

Internet Access

This indicator reports the percentage of households who either use dial-up as their only way of internet connection or have internet access but don't pay for the service, or have no internet access in their home, based on the 2019-2023 American Community Survey estimates.

Substandard Housing

This indicator reports the percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30%, and 5) gross rent as a percentage of household income greater than 30%. Selected conditions provide information in assessing the quality of the housing inventory and its occupants. This data is used to easily identify homes where the quality of living and housing can be considered substandard.

Substance Use Disorder – Adult Alcohol and Tobacco Use

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	Percentage of Adults Binge Drinking in the Past 30 Days, Age-Adjusted	Percentage of Adult Current Smokers, Age-Adjusted
King's Daughters Ohio CHNA Community – Scioto County, OH	17.7%	23.6%
State / National Benchmark		
Ohio	19.6%	18.6%
United States	18.0%	13.2%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022. Source geography: Tract


Adult Alcohol Use

This indicator reports the percentage of adults age 18 and older who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days.

Adult Tobacco Use

This indicator reports the percentage of adults age 18 and older who report having smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days.

Substance Use Disorder – Opioid Overdose

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Opioid Overdose
This indicator reports the 2019-2023 five-year average rate of death due to opioid drug overdose per 100,000 population. Rates are summarized for report areas from county level data, only where data is available. This indicator is relevant because opioid drug overdose is the leading cause of injury deaths in the United States, and they have increased dramatically in recent years.

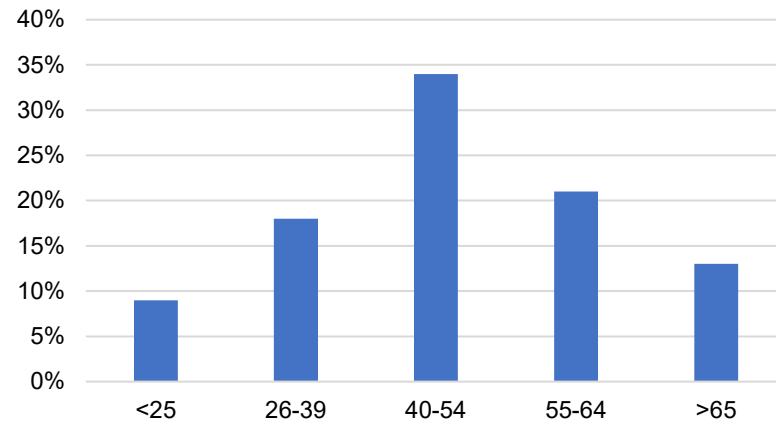
	Crude Death Rate (Per 100,000 Population)	Five Year Total Deaths, 2019-2023 Total
King's Daughters Ohio CHNA Community – Scioto County, OH	109.5	402
State / National Benchmark		
Ohio	35.1	20,623
United States	22.0	364,717

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System.
Accessed via CDC WONDER. 2019-2023. Source geography: County

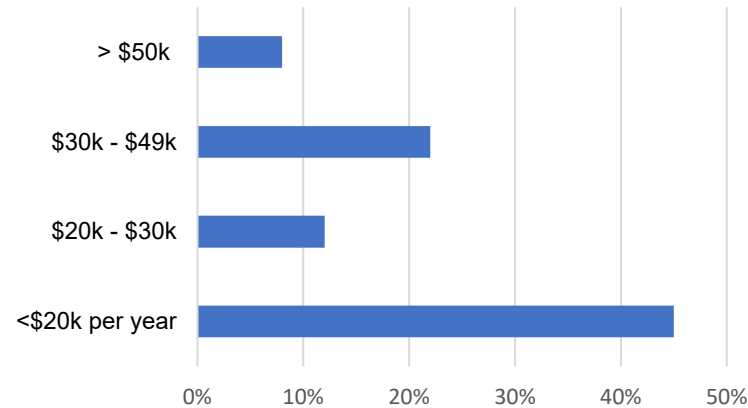
Appendix B – Community Survey Summary

In order to develop a broad understanding of community health needs, King's Daughters conducted a community survey from September 17, 2024 to November 11, 2024. The survey was available in English and Spanish and a link to the survey was distributed via e-mail, social media and word of mouth to the community at-large. A total of 81 surveys were completed. The majority of respondents made less than \$20k per year, were in the 40-54 age range, and had a high school or GED equivalent education level.

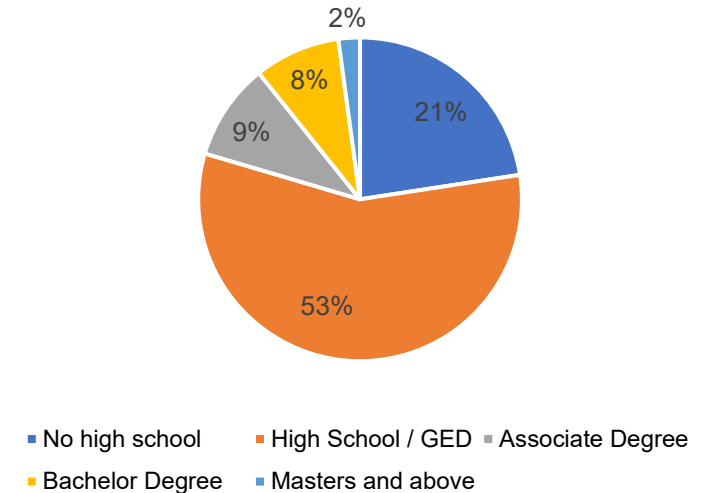
Age of Survey Respondents



Income of Survey Respondents



Education of Survey Respondents



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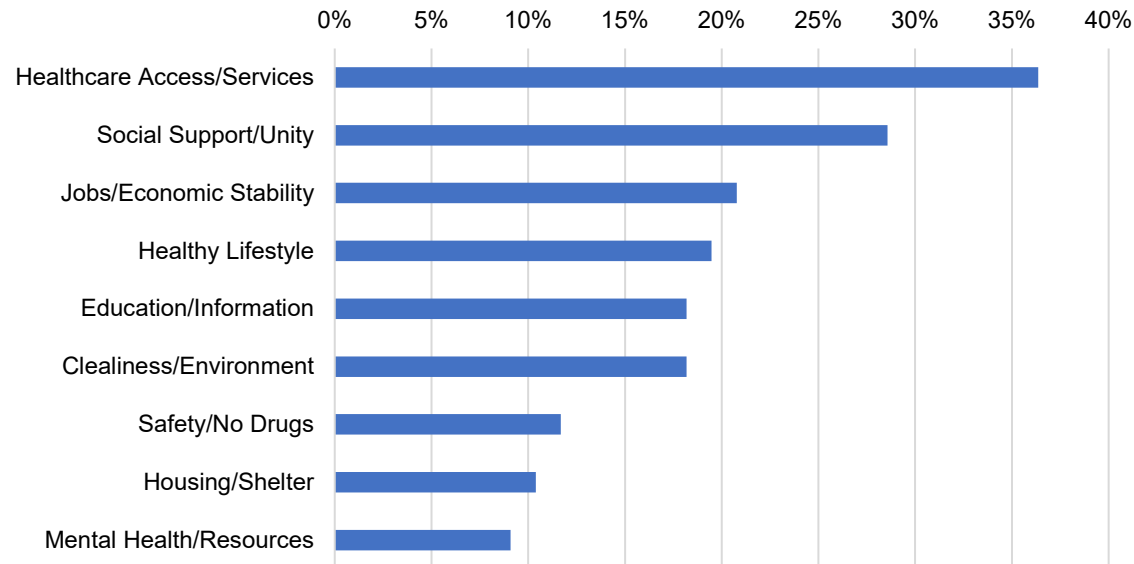
Appendix B – Community Survey Summary

The survey asked the following questions:

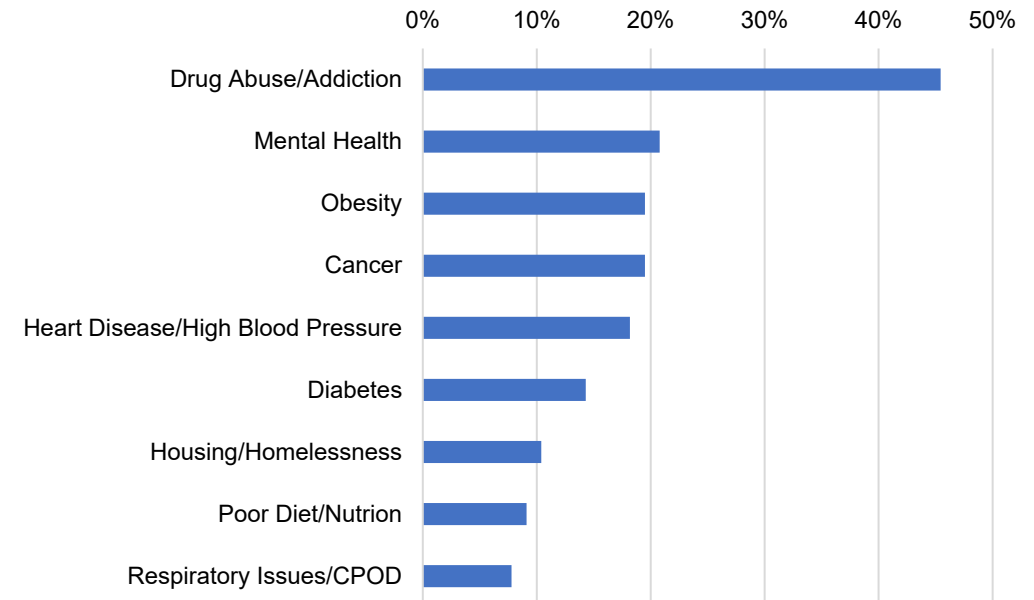
- What are the 3 most important factors for a healthy community?
- What are the 3 biggest health problems in our community?

The survey provided open ended responses. Below is a summary of the responses.

What are the 3 most important factors for a healthy community?



What are the 3 biggest health problems in our community?



Appendix B – Community Survey Summary

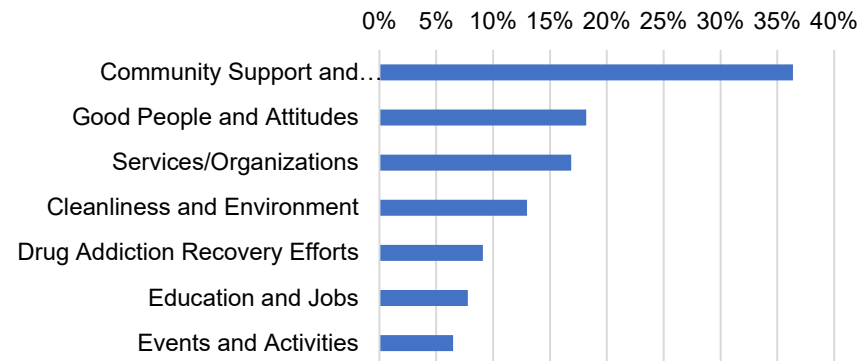
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The survey asked the following questions:

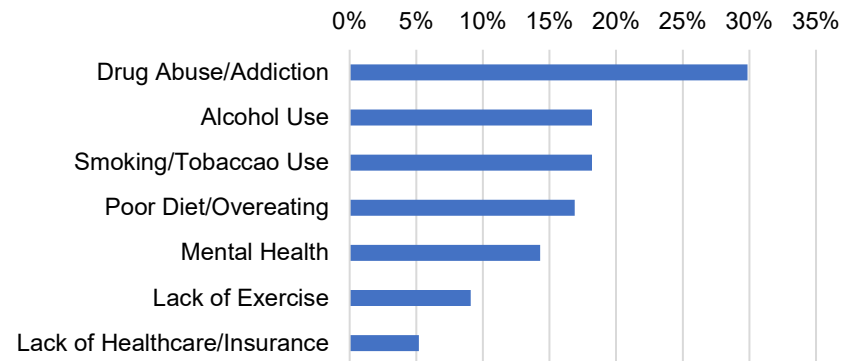
- What makes you proud of your community?
- What behaviors have the most negative impact on health?
- During the past 30 days, how many days did poor health keep you from doing your usual activities?

The survey provided open ended responses. Below is a summary of the responses.

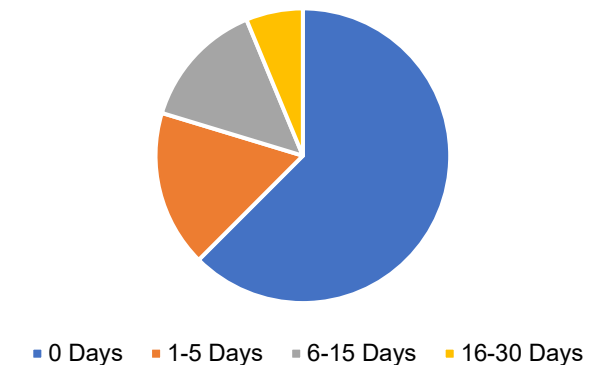
What makes you proud of your community?



What behaviors have the most negative impact on health?



During the past 30 days, how many days did poor health keep you from doing your usual activities?



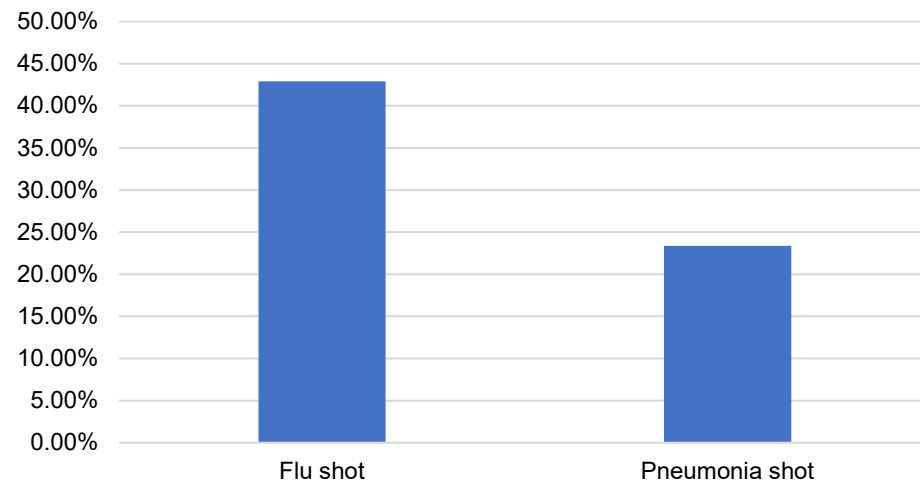
Appendix B – Community Survey Summary

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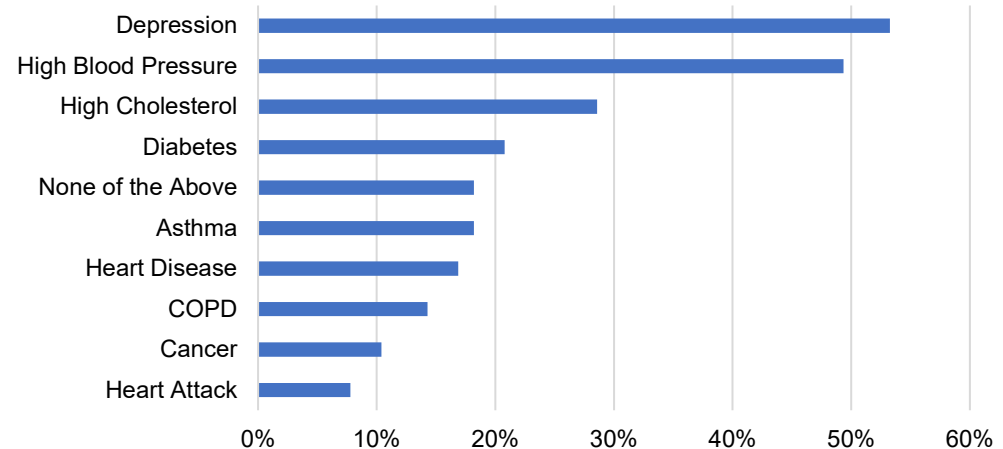
The survey asked several questions on preventive care and medical conditions. Regarding preventive measures for flu and pneumonia, less than 45% of respondents indicated they had received a flu shot in the past 12 months and less than 25% received a pneumonia shot in the past 12 months.

Respondents were asked to identify any medical conditions they had been told they had by a medical professional. Over 50% of respondents indicated they had been told they had depression and approximately 50% had been told they had high blood pressure.

In the past 12 months, have you received?



Has a healthcare professional ever told you that you had?



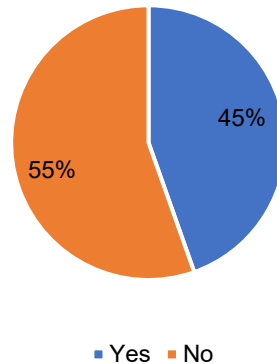
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Appendix B – Community Survey Summary

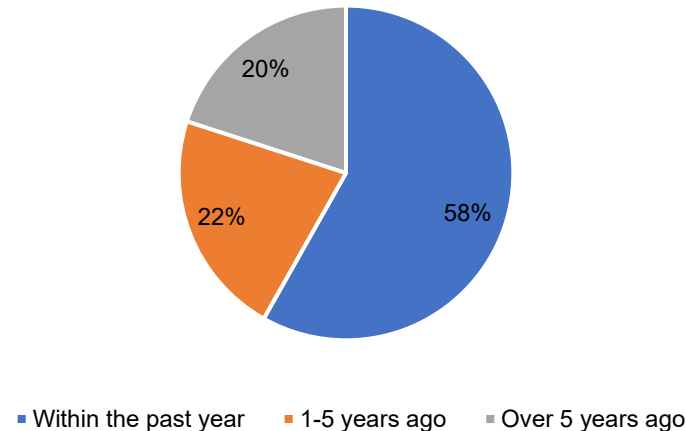
The survey asked the following questions regarding dental care. Below are a summary of the findings:

- 55% of respondents indicated they had dental insurance for at least part of their dental care.
- While 58% of the respondents indicated they had visited a dentist or dental clinic in the past year, 20% indicated it had been over 5 years since they had seen a dentist.

Do you currently have health insurance coverage for at least part of your dental care?



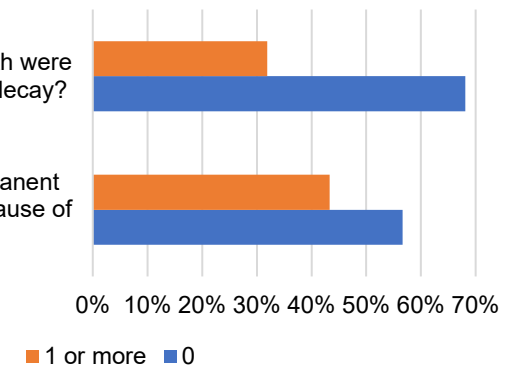
How long since you last visited a dentist or dental clinic?



Teeth lost - baby teeth and permanent teeth

How many of your baby teeth were removed because of tooth decay?

How many of your permanent teeth have been lost because of tooth decay?

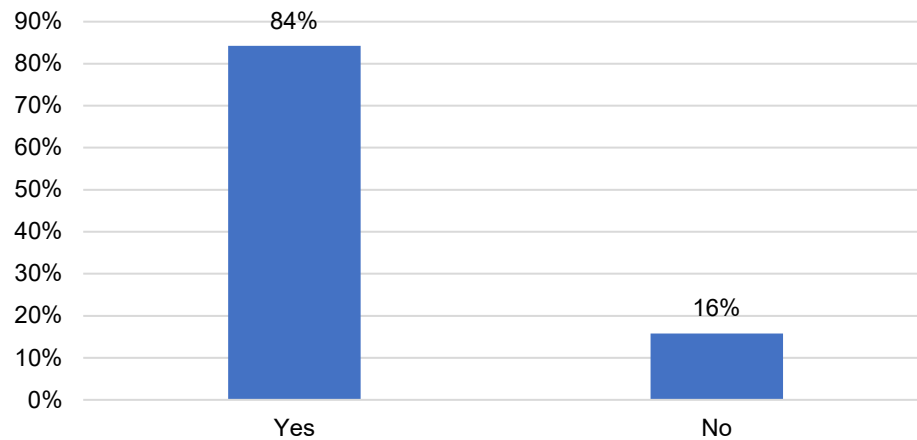


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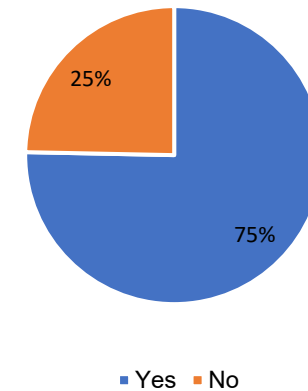
Appendix B – Community Survey Summary

The community survey indicated that 84% of respondents had some kind of health care insurance. In addition, a high percentage of respondents, 75% indicated they have someone they think of as their personal health care provider.

Do you have any kind of health care coverage?



Do you have someone you think of as your personal health care providers?



Appendix C – Professional Provider Survey

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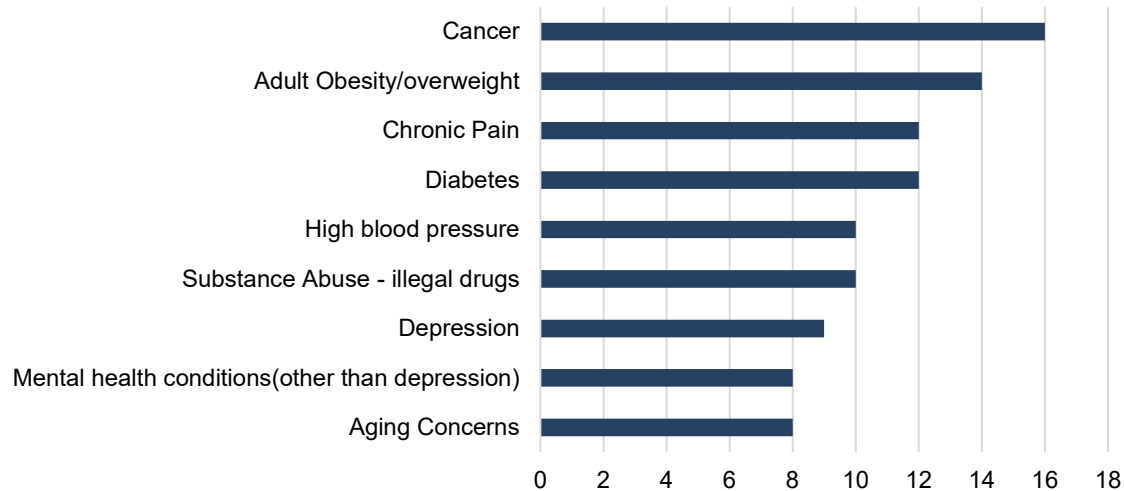
The survey asked the following two questions:

- What are the most prevalent patient health concerns in your scope of work?
- Are there community services that need strengthening?

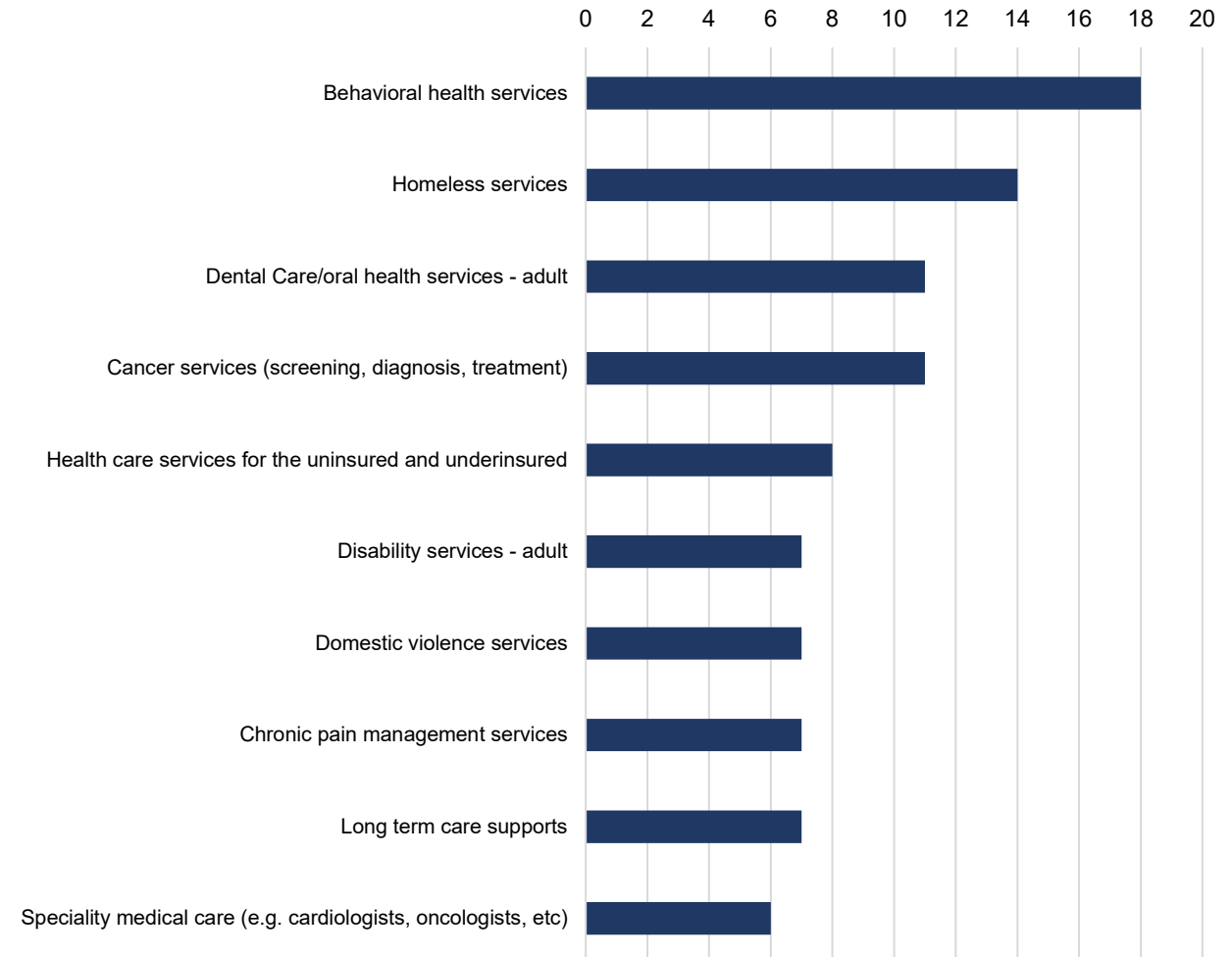
The survey provided predetermined responses that could be selected from the list. Graphs on this page provide a summary of the top responses.

Cancer, adult obesity, chronic pain and diabetes are the most prevalent health concerns indicated by the providers. In addition, providers indicated that behavioral health services, homeless services, dental care and cancer services needed strengthening.

Most Prevalent Health Concerns per Provider



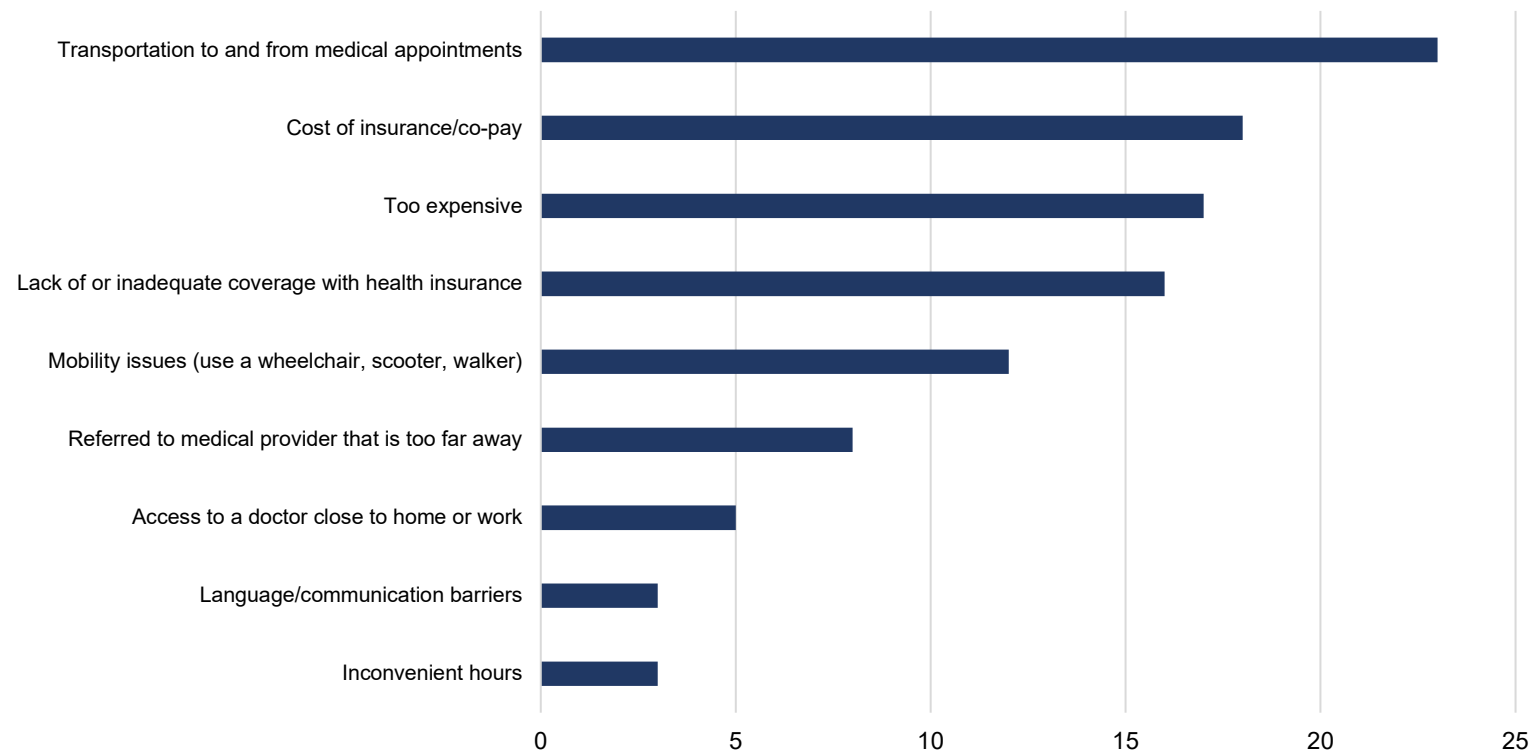
Top Community Services That Need Strengthening




Appendix C – Professional Provider Survey

The survey asked the respondents to identify their most common barriers to seeking health services. Respondents indicated that transportation to and from medical appointments, cost of insurance and co-pays were the most common barriers to seeking health services.


Patient's Common Barriers to Seeking Health Services



Appendix D – Summary of Key Findings

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Identified Health Need	Secondary Data	Community Health Survey conducted by Health Departments	2024 Collaborative CHNA - Scioto County	Professional Provider Survey
Access to Health Services/Navigating Healthcare Services	<ul style="list-style-type: none"> The rate for primary care providers and dental health providers is significantly less in the CHNA Community compared to state and national benchmarks. 	<ul style="list-style-type: none"> Access to healthcare was rated the most important factor for a healthy community. 	<ul style="list-style-type: none"> Area of opportunity identified through the CHNA. (ER utilization, ratings of local healthcare). 22.6% of participants have challenges with getting a Dr. appointment. 	<ul style="list-style-type: none"> Lack of adequate health insurance coverage and cost of insurance were two of the most common barriers to seeking health services.
Chronic Health Conditions	<ul style="list-style-type: none"> The rates of death from heart disease, cancer and lower respiratory diseases are significantly higher for the CHNA Community compared to state and national benchmarks. Approximately 7,382 persons have been diagnosed with diabetes in the CHNA Community. Over 22,000 persons in the CHNA community have high blood pressure. 	<ul style="list-style-type: none"> Cancer and heart disease were noted as two of the biggest health problems in the community. 	<ul style="list-style-type: none"> Area of opportunity identified through the CHNA. (Cancer prevalence, Diabetes prevalence, Multiple Chronic Conditions, Chronic Pain, Heart Disease and Stroke, Respiratory Disease) 52.9% of PRC survey participants have three or more chronic conditions. 	<ul style="list-style-type: none"> Cancer was the most prevalent patient health concern. Diabetes was one of the top five prevalent patient health concerns. Chronic pain was one of the top five prevalent patient health concerns. High blood pressure was one of the top prevalent patient health concerns. Recommended as a focus area for UK KD to address over the next three to five years.
Dental Care			<ul style="list-style-type: none"> Regular dental care 	<ul style="list-style-type: none"> Dental care/oral health services were noted as a community service that needs strengthening.
Food Insecurity/Lack of Healthy Nutrition	<ul style="list-style-type: none"> Over 20% of the population (15,430 persons) live with food insecurity in the CHNA community. 		<ul style="list-style-type: none"> 35.1% of PRC survey participants find it very difficult or somewhat difficult to buy affordable fresh produce. 	
Lack of Affordable Housing	<ul style="list-style-type: none"> 22.75% of households in the community, 6,515 households, are cost burdened households meaning housing costs exceed 30% of household income. 			<ul style="list-style-type: none"> Homeless services were noted as a community service that needs strengthening.
Mental Health and Depression	<ul style="list-style-type: none"> Ohio ranks 46th in frequent mental distress in 2023 America's Health Rankings. 23.2% of adults report frequent mental distress in the CHNA Community. 	<ul style="list-style-type: none"> Mental health support was rated one of the most important factors for a healthy community. Lack of availability of mental health care was noted as one of the biggest health problems in the community. 	<ul style="list-style-type: none"> Area of opportunity identified through the CHNA. ("Fair/Poor" Mental Health, Diagnosed Depression). 31% of PRC survey participants experience "fair" or "poor" mental health compared to 24.4% for the U.S. 70.4% of PRC survey participants have been diagnosed with a depressive disorder. 	<ul style="list-style-type: none"> Behavioral health services were noted as a community service that needs strengthening. Recommended as a focus area for KD-Ohio to address over the next three to five years.
Obesity	<ul style="list-style-type: none"> Ohio ranks 44th in 2023 America's Health Rankings for adult obesity. Approximately 25,000 persons, or 46% of adults, are obese in the CHNA community 	<ul style="list-style-type: none"> Obesity was noted as one of the biggest health problems in the community. 	<ul style="list-style-type: none"> Overweight and Obesity (adults and children) 46.2% of PRC survey participants were obese. 44.6% of children in PRC survey were obese. 	<ul style="list-style-type: none"> One of the top five prevalent patient health concerns.

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Appendix D – Summary of Key Findings

Identified Health Need	Secondary Data	Community Health Survey conducted by Health Departments	2024 Collaborative CHNA - Scioto County	Professional Provider Survey
Physical Inactivity	<ul style="list-style-type: none"> •28.7% of adults, age 20 and older, self-report no active leisure time physical activity. This is significantly higher than the national rate of 19.5%. 		<ul style="list-style-type: none"> •Meeting physical activity guidelines (adults and children) 	
Poverty	<ul style="list-style-type: none"> •22.37% of the population lives below 100% of the federal poverty level compared to 13.24% for Ohio and 12.44% for the United States. •28.82% of children under age 18 live in poverty in the CHNA Community. 			
Preventive Care	<ul style="list-style-type: none"> •The rate for preventable hospitalizations in the CHNA Community is unfavorable to state and national rates (4,332 per 100,000 population for the CHNA Community compared to 3,033 and 2,666 for Ohio and National benchmarks, respectively). 	<ul style="list-style-type: none"> •Healthy lifestyle resources was rated one of the most important factors for a healthy community. 		
Smoking/Vaping	<ul style="list-style-type: none"> •Ohio ranks 45th in 2023 America's Health Rankings for adult smoking. •20.1% of women giving birth in the CHNA Community smoked during pregnancy, compared to 9.6% for Ohio and 4.6% for the United States. •The percentage of adults in the CHNA Community who currently smoke is 23.6% and is unfavorable to state and national rates. 	<ul style="list-style-type: none"> •41% of the survey respondents reported smoking. 	<ul style="list-style-type: none"> •Cigarette smoking in the home. •23.2% of PRC survey participants reported smoking every day. •28.9% of PRC survey participants live in a household where a member smokes. •PRC 2024 survey reports 18.6% of participants currently use vaping products compared to 8.3% for Ohio and 18.5% for the U.S. 	
Substance Abuse	<ul style="list-style-type: none"> •Ohio ranks 44th in drug related deaths in 2023 America's Health Rankings. •The rate of deaths from opioid overdose is more than triple the state and national rates. 	<ul style="list-style-type: none"> •Drug abuse/addiction was noted as the biggest health problem in the community. 		<ul style="list-style-type: none"> •Substance abuse/illegal drugs was one of the top prevalent patient health concerns. •Recommended as a focus area for UK KD to address over the next three to five years.
Teen Pregnancy	<ul style="list-style-type: none"> •The teen birth rate for the CHNA Community is 30.9% compared to 16.6% for the United States. 			
Transportation		<ul style="list-style-type: none"> •Transportation was rated one of the most important factors for a healthy community. 		<ul style="list-style-type: none"> • The biggest barrier to seeking health services.
Unintentional Injury	<ul style="list-style-type: none"> •The rate for unintentional injuries in the CHNA Community is triple the national rate and double the rate for Ohio. 			

Appendix E – Community Resources

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Access to Health Care Services

- King's Daughters Ohio
- Scioto County Health Department
- Scioto County Veterans Service Office
- Southern Ohio Medical Center
- Southern Ohio Medical Center School Based

Cancer

- American Cancer Society
- Community Action Organization of Scioto County
- King's Daughters Ohio
- King's Daughters Portsmouth Cancer Care Associates
- Portsmouth City Health Department
- Scioto Cancer Center
- Scioto County Health Department
- Southern Ohio Medical Center
- Southern Ohio Medical Center Cancer Center

Diabetes

- Compass Community Health
- King's Daughters Ohio
- Ohio State University Extension
- Scioto County Health Department
- SNAP-Ed OSU Extension Scioto County
- Southern Ohio Medical Center

Disabling Conditions

- Community Action Organization of Scioto County
- King's Daughter's Ohio
- Ohio Department of Disabilities
- Opportunities for Ohioans with Disabilities
- Scioto County Senior Center
- Shawnee Mental Health
- Southern Ohio Medical Center
- USSA Adult Day Center
- YMCA


Heart Disease & Stroke

- Community Action Organization of Scioto County
- King's Daughters Ohio
- Scioto County Health Department
- Southern Ohio Medical Center

Infant Health & Family Planning

- Help Me Grow Ohio Department of Children and Youth
- Scioto County Family and Children First
- Council

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Injury & Violence

- Community Action Organization of Scioto County
- Scioto County Sheriff's Office
- Shawnee Family Health Center
- The Counseling Center

Mental Health

- ADAMHS Board
- Scioto Co. Homeless Shelter
- Shawnee Counseling
- Shawnee Family Health Center
- Shawnee Mental Health
- Scioto-Paint Valley Mental Health
- Southern Ohio Medical Center
- The Counseling Center

Nutrition, Physical Activity & Weight

- 14th Street Community Center
- Community Action Organization of Scioto County
- Connex
- Keeney's Kitchen
- King's Daughter's Ohio
- Ohio State University Extension
- Scioto County Parks and Recreation
- Potter's House Ministry
- PSKC
- Scioto County Health Department
- Scioto County Public Library - Portsmouth
- Scioto County Senior Center
- Shawnee Family Health Center
- SNAP-Ed OSU Extension Scioto County
- Southern Ohio Medical Center
- Women, Infants and Children
- YMCA


Oral Health

- Valley View Health Care Center of Portsmouth

Respiratory Diseases

- King's Daughter's Ohio
- Scioto County Health Department
- Southern Ohio Medical Center
- Cancer

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Social Determinants of Health

- 14th Street Community Center
- ADAMHS Board
- Adult Basic Education Programs
- CareSource
- City of Portsmouth Fair Housing
- Community Action Organization of Scioto County
- HUD
- King's Daughter's Ohio
- Portsmouth Inner City Development
- Portsmouth Metropolitan Housing Authority
- Salvation Army
- Scioto County Career Technical Center
- Scioto County Department of Jobs and Family Services
- Scioto County Homeless Shelter
- Scioto County Jobs and Family Services
- Shawnee Family Health Center
- Southern Ohio Medical Center
- YMCA

Sexual Health

- Scioto County Health Department

Substance Use

- AA/NA
- ADAMHS Board
- Ascend
- CareSource
- Community Action Organization of Scioto County
- Compass Community Health
- HopeSource Treatment
- King's Daughters Ohio
- Scioto County Drug Court
- Scioto County Health Department
- Scioto County Law Enforcement
- Scioto-Paint Valley Mental Health
- Shawnee Mental Health
- Shawnee Recovery
- Southern Ohio Medical Center
- Stepping Stones Treatment

Tobacco Use

- Compass Community Health
- King's Daughters Ohio
- Scioto County Health Department

Limitations and Information Gaps

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As with all data collection efforts, there are several limitations related to the assessment's research methods that should be acknowledged. Years of the most current data available differ by data source. In some instances, 2024 may be the most current year available for data, while 2014 may be the most current year for other sources. Likewise, survey data based on self-reports, such as the Behavioral Risk Factor Surveillance Survey (BRFSS), should be interpreted with particular caution. In some instances, respondents may over or under report behaviors and illnesses based on fear of social stigma or misunderstanding the question being asked.

In addition, respondents may be prone to recall bias – that is, they may attempt to answer accurately, but they remember incorrectly. In some surveys, reporting and recall bias may differ according to a risk factor or health outcome of interest. Despite these limitations, most of the self-report surveys analyzed in this CHNA benefit from large sample sizes and repeated administrations, enabling comparison over time. Similarly, while the qualitative data collected for this study provide valuable insights, results are not statistically representative of a larger population due to nonrandom recruiting techniques and a small sample size. Data were collected at one point in time and among a limited number of individuals.

Therefore, findings, while directional and descriptive, should not be interpreted as definitive.