



2023 Community Health Needs Assessment





About Mon Health Marion Neighborhood Hospital

Mon Health Marion Neighborhood Hospital, located in White Hall, Marion County, West Virginia, officially opened its doors to the community on December 14, 2021. The hospital is committed to improving access to vital healthcare services and strives to increase the community's access to personalized care, when and where they need it. A small-format hospital, Mon Health Marion Neighborhood Hospital offers the most common procedures on site and can provide telemedicine or higher-level care from the Mon Health full-service hospital in Morgantown.

Our goal is to offer the quality of care we would expect and demand for our own families. Streamlined admitting procedures, highly qualified physicians and medical specialists at every level of care, and the latest diagnostic equipment are just a few of the distinctions we offer.

Mon Health Marion Neighborhood Hospital is an active community partner and committed to addressing residents' top health concerns both within and outside our hospital walls. In 2023, the hospital started the White Hall Wellness Series to provide periodic events to promote healthy living. The hospital supports Marion County Healthy Grandfamilies, a series of free discussion groups to provide information and resources to grandparents who are raising one or more grandchildren. Other activities by the hospital include free or discounted health screenings and community education, including a 2023 DUI simulation in partnership with EMS.

In support of our commitment to community health and the well-being of the residents of Marion County, Mon Health Marion Neighborhood Hospital conducted a Community Health Needs Assessment (CHNA) in 2023. The CHNA allows us to better understand the health and wellness concerns for our community and will be used to guide local health improvement efforts.

The 2023 CHNA is the first assessment conducted by Mon Health Marion Neighborhood Hospital and will be repeated every three years in accordance with IRS Tax Code 501(r) requirements for not-for-profit hospitals, and as set forth by the Patient Protection and Affordable Care Act (PPACA).

We invite our community partners to learn more about the CHNA and opportunities for collaboration to address identified health needs. Please visit our website to learn more: <https://monhealthmarion.com>.



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2023 CHNA Background

Mon Health Marion Neighborhood Hospital undertook a CHNA in 2023 to illuminate unique community health strengths and opportunities to inform health improvement planning. Understanding changes in population demographics, socioeconomics, and health status is critical to plan for changes in healthcare, economic opportunity, social services, transportation, and other essential infrastructure elements.

The CHNA effort fostered a common understanding of the resources and challenges facing Marion County residents. Leveraging the collective and individual strengths across each community entity, Mon Health Marion Neighborhood Hospital is working toward a healthier, more equitable community for all.

CHNA Leadership

The 2023 CHNA was overseen by a Planning Committee of representatives from Mon Health. These individuals served as liaisons to their organizations and the communities served by their entities.

CHNA Planning Committee

Kevin Gessler, Chief Administrative Officer and Vice President, Mon Health

Shelley Graham, Budget & Decision Support Analyst, Mon Health

Rick Scherich, Vice President of Finance, Mon Health

Our Research Partner



Mon Health Marion Neighborhood Hospital contracted with *Build Community* to conduct the CHNA. *Build Community* is a woman-owned business that specializes in conducting stakeholder research to illuminate disparities and underlying inequities and transform data into practical and impactful strategies to advance health and social equity. Our interdisciplinary team of researchers and planners have worked with hundreds of health and human service providers and their partners to reimagine policies and achieve measurable impact. Learn more about our work at buildcommunity.com.



2023 CHNA Research Methods

The 2023 CHNA was conducted in line with the IRS Tax Code 501(r) requirements to conduct a CHNA every three years as set forth by the Patient Protection and Affordable Care Act. The 2023 CHNA included quantitative and qualitative research methods to determine health trends and disparities in Marion County, West Virginia.

Through a comprehensive review of statistical health indicators and community stakeholder feedback, a profile of priority areas was determined. These findings will guide healthcare services and health improvement efforts, as well as serve as a community resource for grantmaking and advocacy, and to support the many programs provided by health and social service partners.

Secondary Data Analysis

Secondary data, including demographic, socioeconomic, and public health indicators, were analyzed for Marion County to measure key data trends and priority health issues, and to assess emerging health needs. Data were compared to state and national benchmarks and Healthy People 2030 (HP2030) goals, as available, to assess areas of strength and opportunity. Healthy People 2030 is a national initiative establishing 10-year goals for improving the health of all Americans.

All reported demographic and socioeconomic data were provided by the US Census Bureau, American Community Survey, unless otherwise noted. Public health data were compiled from a variety of sources like the West Virginia Department of Health, the Centers for Disease Control and Prevention (CDC), and the Health Resources and Services Administration, among other sources. A comprehensive list of data sources can be found in Appendix A.

The most recently available data at the time of publication is used throughout the report. Reported data typically lag behind “real time.” It is important to consider community feedback to better understand health and socioeconomic disparities and to identify emerging health trends.

Primary Research and Community Engagement

In 2022, Mon Health partnered with WVU Medicine Ruby Memorial Hospital and the Monongalia County Health Department to conduct a collaborative needs assessment for their collective service areas, including Marion County. As part of the assessment, the collaborative conducted a public input survey which solicited and received input from diverse community residents.

A total of 1,945 surveys were completed by adult residents from the area, including 403 surveys by Marion County residents. Survey topics included questions about specific health issues, thoughts on overall health of the community, quality of life, access to healthcare and medical needs (including specialist care), risk behaviors and personal choices, experiences during the COVID-19 pandemic, and demographic information including geographic location and income. Results from the survey, including top resident concerns, were included as part of the CHNA.



Building Health Equity: Context for the Creation of this CHNA

Health disparities are the differences in disease burden, access to care, and other factors that impact health outcomes. Health disparities reflect inequities in our community including poverty, access to education, racism, discrimination, and a myriad of socioeconomic and environmental factors.

Health equity, as defined by the Centers for Medicare and Medicaid Services (CMS), is “The attainment of the highest level of health for all people, whereby every person has a fair and just opportunity to attain their optimal health regardless of their race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, preferred language, and geography.” Achieving health equity is key to improving our nation’s overall health and reducing unnecessary healthcare costs.

COVID-19 exacerbated existing disparities within the health and social service systems and exposed long-standing inequities in power and socioeconomic opportunities within our society. The pandemic taught us that we need a more equitable healthcare response. This understanding informed the CHNA process and the development of Community Health Improvement Plans to advance health equity.

Determining Community Health Priorities

In 2023, Mon Health Marion Neighborhood Hospital used statistical data and public input to determine the top health concerns for Marion County residents. The following issues were identified as priorities for the hospital over the next three years. (Listed in alphabetical order)

- ▶ Chronic disease prevention and management
- ▶ Mental health
- ▶ Substance use disorder

These priorities are consistent with regional needs and among neighboring Mon Health service areas. Aligning priorities across the Mon Health system leverages the collective and individual strengths across each institution to share resources and generate response toward common goals for community health improvement.

In developing its Community Health Improvement Plan, Mon Health Marion Neighborhood Hospital sought to identify strategies that reflect the unique needs of the Marion County community, and to guide local efforts and collaboration with community partners. The hospital is committed to strategies that target underlying disparities in social drivers of health, looking beyond the healthcare system to build healthier communities for all people now and in the future.



Approval and Adoption of CHNA

The 2023 CHNA was conducted in a timeline to comply with IRS Tax Code 501(r) requirements to conduct a CHNA and develop a corresponding Community Health Improvement Plan (CHIP) every three years as set forth by the Patient Protection and Affordable Care Act. The research findings and plan will be used to guide community benefit initiatives for Mon Health Marion Neighborhood Hospital and engage local partners to collectively address identified health needs.

Mon Health Marion Neighborhood Hospital is committed to advancing initiatives and community collaboration to support the issues identified through the CHNA. The 2023 CHNA report was presented to the Board of Directors and approved in December 2023.

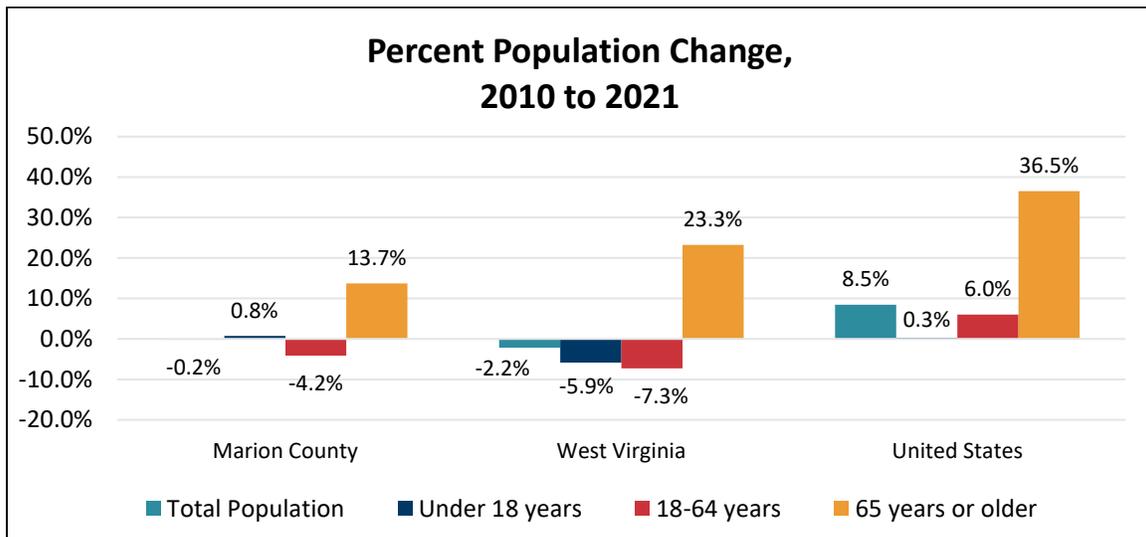
Following the Board's approval, the CHNA report was made available to the public via the hospital's website at <https://monhealthmarion.com>.



Executive Summary of CHNA Findings

Demographic Trends

Marion County is a predominantly rural community in northern West Virginia’s Mountaineer Country. Approximately 56,000 people live in Marion County, a slight 0.2% decline from 2010. Population declines occurred largely among working age adults; the proportion of older adults aged 65+ continued to increase and comprises nearly 20% of residents. In the short term, this population trend may result in the need for more supportive services for aging residents. Over the long term, efforts to attract and retain younger people will help build a healthier Marion County in the future.



Source: US Census Bureau, American Community Survey

Marion County is an aging community, but children comprise 20% of residents, reinforcing the potential for upstream, preventive action. Critical to these upstream efforts is addressing social drivers of health barriers that have historically disproportionately affected children. For example, 21% of Marion County children experience poverty compared to 15% of all county residents and 17% of children nationwide.

Marion County is a majority white community, but consistent with state and national trends, people of color are the only growing populations. This shift is occurring slowly with the white population as a proportion of the total population decreasing approximately 2 percentage points over the last 10 years. Available public health data demonstrate wide disparities affecting people of color, particularly Black residents. Across Marion County and all of West Virginia, Black people live an average of 2-4 years less than their white counterparts, a disparity that is reflective of underlying health and social inequities.

2018-2020 Overall Life Expectancy and Life Expectancy by Race

	Overall Life Expectancy	Black	White
Marion County	75.6	71.4	75.7
West Virginia	74.3	71.8	74.2

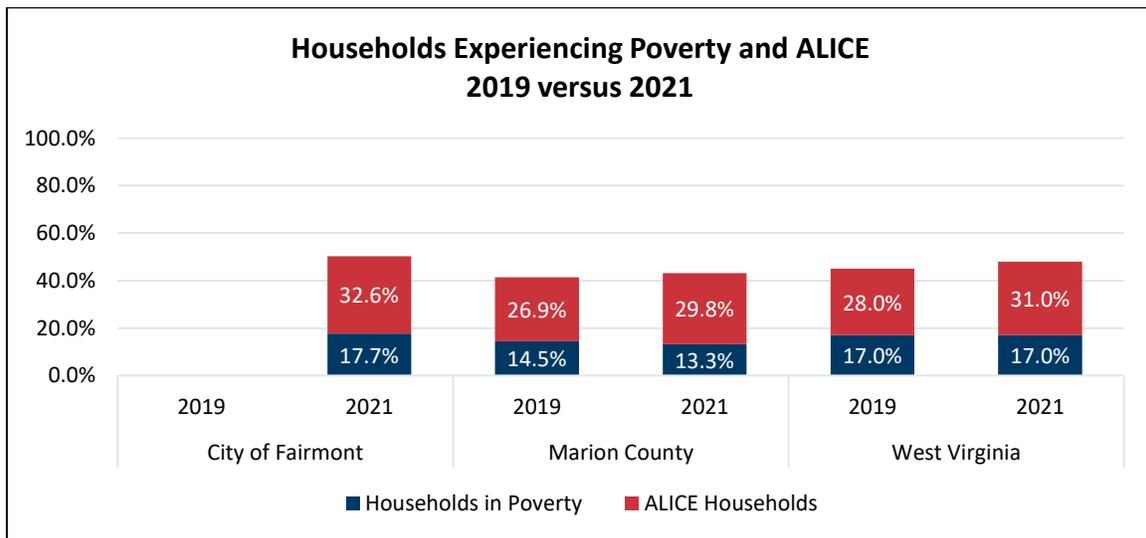
Source: National Vital Statistics System



Social Drivers of Health (SDoH) Opportunities

West Virginia residents, including Marion County residents, have historically experienced more negative SDoH than their peers nationally, including lower incomes, lower educational attainment, and fewer community resources. The CHNA used several indexes to illustrate the impact of SDoH and identify targeted areas of opportunity within Marion County. Following is a summary of findings from the CHNA.

The Asset Limited Income Constrained Employed (ALICE) index captures the percentage of households whose income is above the federal poverty level but below the threshold necessary to meet basic needs, such as food or healthcare. In 2021, 30% of Marion County households were ALICE—a 3-point increase from 2019. When combined with poverty measures, 43% of households in Marion County and 50% of households in the City of Fairmont were either income constrained or already below the poverty level.



Source: United for ALICE *Data for the City of Fairmont are not reported for 2019.

The Health Resources and Services Administration Unmet Need Score (UNS) is a measure of access to primary and preventive services based on disparities in health status and SDoH. Scores range from 0 (least) to 100 (most) unmet need. Marion County's overall UNS of 59 indicates average unmet need, but there is a nearly 35-point range between the lowest and highest UNS in the county when analyzed by zip code. Community-level differences include disparities in health insurance, poverty, and education, among others. The table below illustrates SDoH factors for zip codes with the highest UNS in the county.

2017-2021 Social Drivers of Health for Marion County Zip Codes with UNS >60 out of 100

Zip Code	Population in Poverty	Children in Poverty	No High School Diploma	No Health Insurance	UNS Score
26591, Worthington	5.4%	4.9%	14.1%	34.1%	71.59
26582, Mannington	18.1%	23.6%	16.7%	7.5%	66.56
26587, Rachel	21.8%	37.8%	12.2%	3.6%	61.00
26572, Four States	66.2%	88.4%	37.6%	0.0%	60.57
26574, Grant Town	12.7%	10.9%	16.9%	6.2%	60.48
Marion County	14.6%	21.0%	8.8%	6.8%	59.00

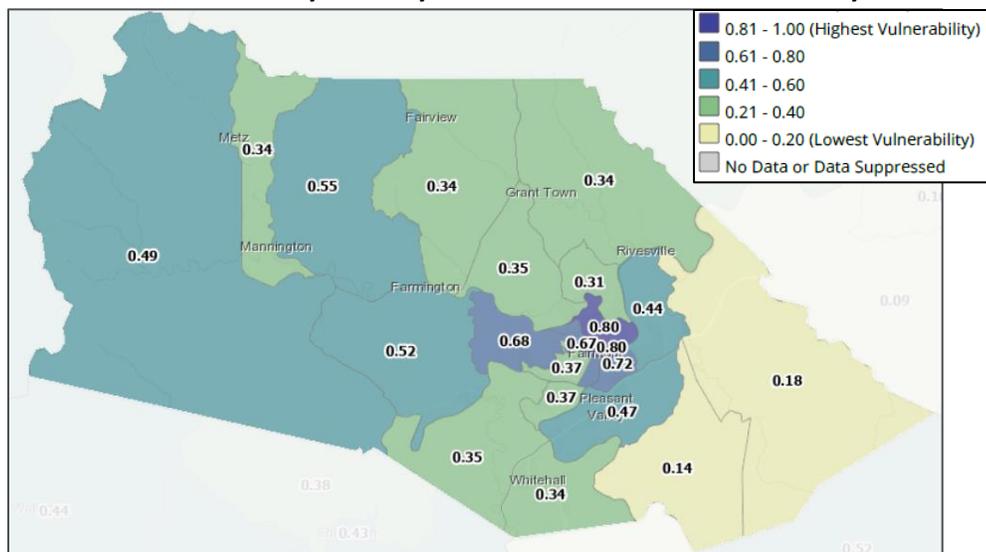
Source: US Census Bureau, American Community Survey



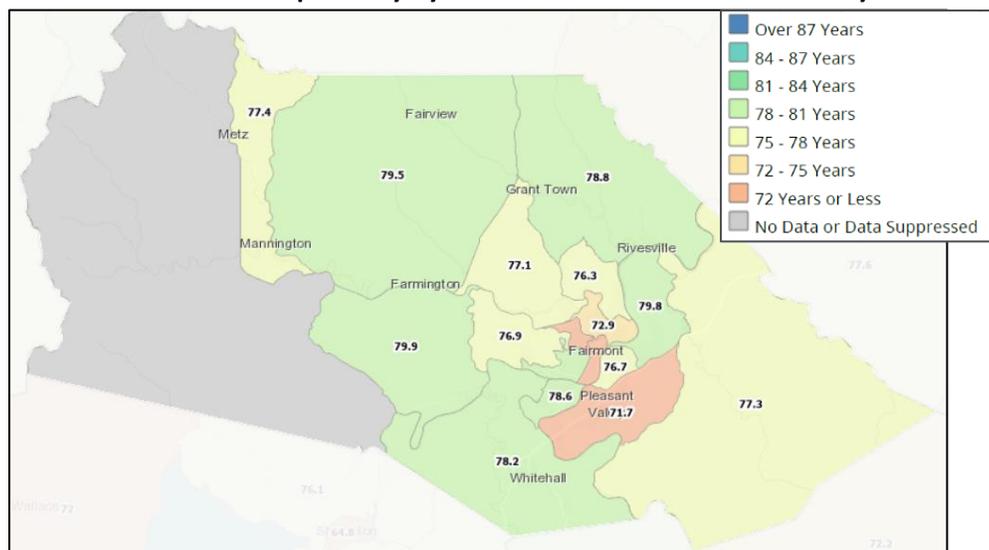
Within Marion County, there are notable disparities in Worthington zip code 26591, where 34% of all residents and 63% of children aged 18 or younger do not have health insurance. This trend appears to have started in 2020 and may reflect pandemic-related factors. Areas in the western portion of the county, including Mannington, Rachel, and Four States experience higher concentrations of poverty. In Four States (a former coal town) two-thirds of all residents and nearly 90% of children experience poverty. The population of Four States is small, estimated at 491 people in 2021.

The CDC's Social Vulnerability Index (SVI) provides a deeper analysis of SDoH, scoring census tracts on a scale from 0.0 (low) to 1.0 (high) vulnerability to factors like poverty, transportation, and housing. The SVI demonstrates vulnerability within the City of Fairmont that is also associated with disparities in life expectancy. Fairmont residents may live fewer than 68 years, a 12-year difference from bordering areas.

Social Vulnerability Index by Census Tract within Marion County



2010-2015 Life Expectancy by Census Tract within Marion County



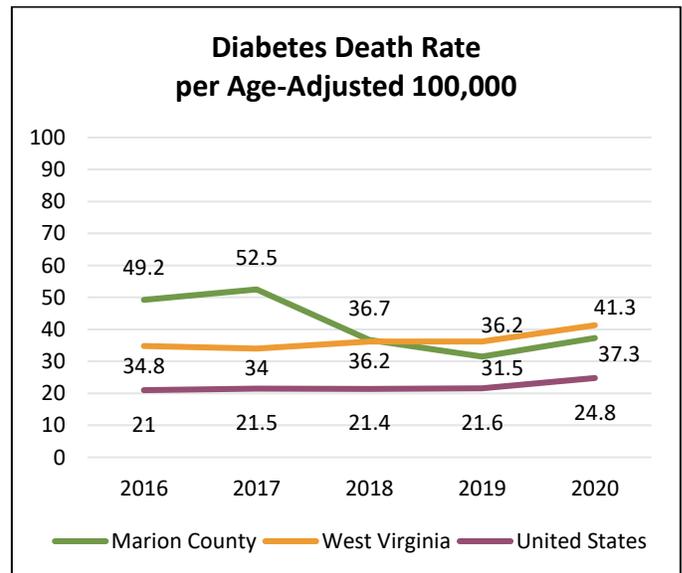
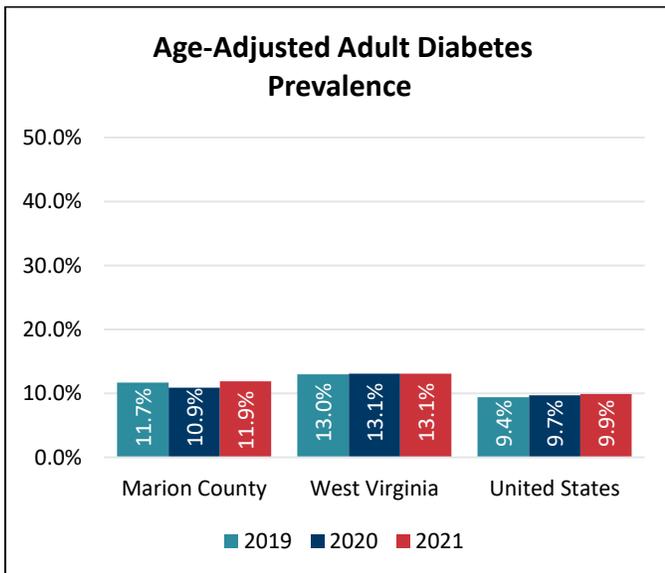
Priority Health Needs



The top health concerns for Marion County residents include chronic disease prevention and management, mental health, and substance use disorder. These findings are supported by both statistical data and community feedback as collected from the public input survey in 2022.

West Virginia and Marion County residents have historically experienced a higher burden of chronic disease than their peers nationally. Approximately 12%-13% of Marion County and West Virginia adults have diabetes compared to 10% nationally, and death rates due to diabetes are 10-20 points higher than the nation. The Marion County heart disease death rate declined in recent years, but it is 40% higher than the national rate. Both incidence and death from cancer are higher in Marion County than the nation, and death rates have trended up in recent years. Approximately 1 in 5 Marion County and West Virginia adults smoke and 1 in 10 adults have been diagnosed with asthma and/or COPD. Higher smoking rates are also seen among pregnant people, negatively affecting pregnancy and birth outcomes.

These findings demonstrate an opportunity to improve availability and access for chronic disease prevention services, as well as screenings and treatment to better identify and treat conditions at an earlier stage. Health improvement efforts should also consider the need for affordable primary care services. While most Marion County residents have health insurance, the county has fewer primary care providers than the state and nation and is a Health Professional Shortage Area for individuals with low income. Approximately 58% of respondents to the public input survey identified “cost of healthcare and/or medications” as a top quality of life and environment concern.

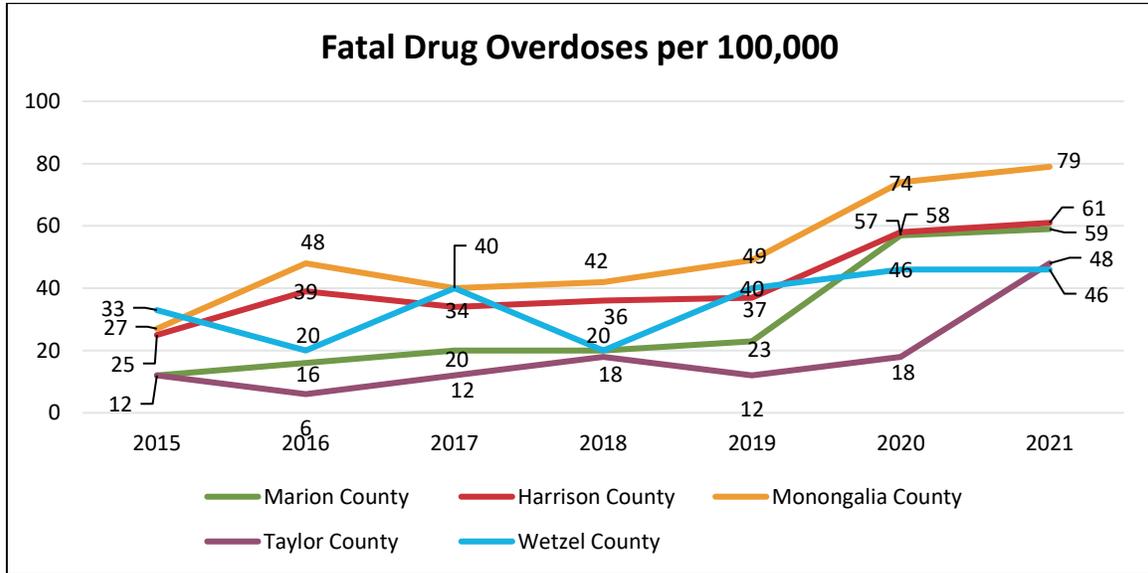


Source: Centers for Disease Control and Prevention

Mental health and substance use disorders were growing concerns before the pandemic and were generally exacerbated by the experience. Consistent with West Virginia overall, Marion County adults are more likely to experience chronic poor mental health and/or depression than their peers nationwide and have more deaths due to suicide. The county has fewer mental health providers and is a Health Professional Shortage Area for individuals with low income, limiting access to needed services.



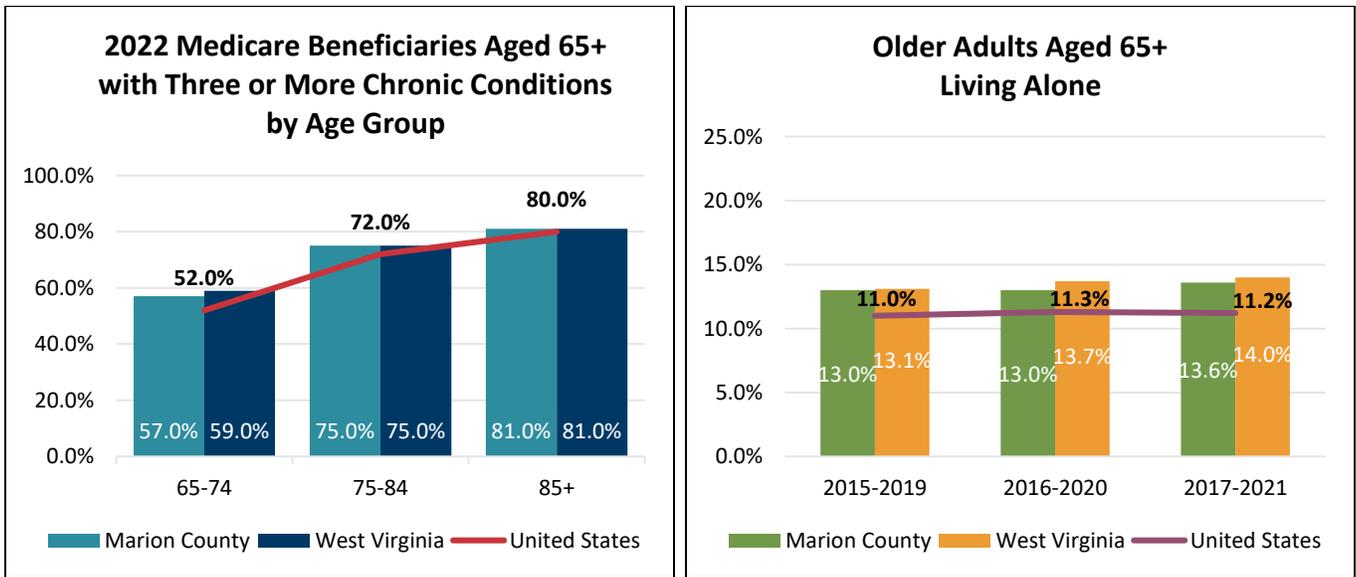
West Virginia was deeply affected by the opioid crisis and had the highest age-adjusted rate of opioid overdose deaths in the country. Compared to other West Virginia counties in the region, Marion County had the second lowest fatal overdose death rate from 2015 to 2019, but the death rate spiked in 2020 and 2021. The death rate had been increasing steadily even before the pandemic.



Source: West Virginia Department of Health & Human Resources Office of Drug Control Policy

Priority Populations

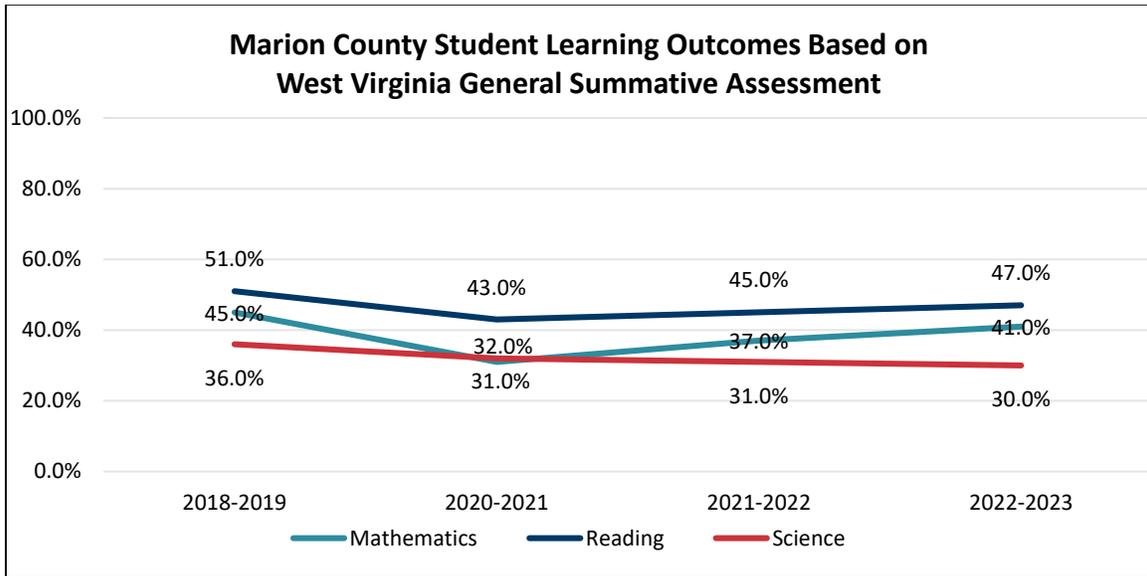
The growth of the older adult population will challenge Marion County to provide adequate support for aging residents. Approximately 60%-80% of Medicare beneficiaries aged 65+ residing in the county have three or more chronic conditions. Nearly 14% of older adults live alone, potentially impeding wellness efforts. Many older adults have fixed incomes, limiting their ability to afford out-of-pocket services.



Source: Centers for Medicare & Medicaid Services & US Census Bureau, American Community Survey



The COVID-19 pandemic had a lasting impact on many children and youth, affecting their development and mental well-being. Findings from the West Virginia General Summative Assessment (WVGSA) show that between the 2018-2019 and 2020-2021 school years, the percentage of Marion County students in grades 3-8 proficient in reading and math fell 8-14 percentage points. Learning outcomes started to improve during the 2021-2022 school year but have not returned to pre-pandemic levels.



Source: West Virginia Department of Education

*Proficiency data are not reported for the 2019-2020 school year.

Available statewide data show that West Virginia students have historically reported poorer mental health than their peers nationwide, and this trend was exacerbated from 2019 to 2021. Notably, the proportion of West Virginia students feeling consistently sad or hopeless increased more than 10 points from 2019 to 2021, encompassing nearly half of students (47.5%). More than 12% of West Virginia high school students reported an attempted suicide in 2021 compared to the national average of 10%.

The executive summary findings reflect the top trends, health concerns, and emerging issues for Marion County residents as identified through the CHNA process. A full summary of CHNA data findings, with state and national comparisons, follows.



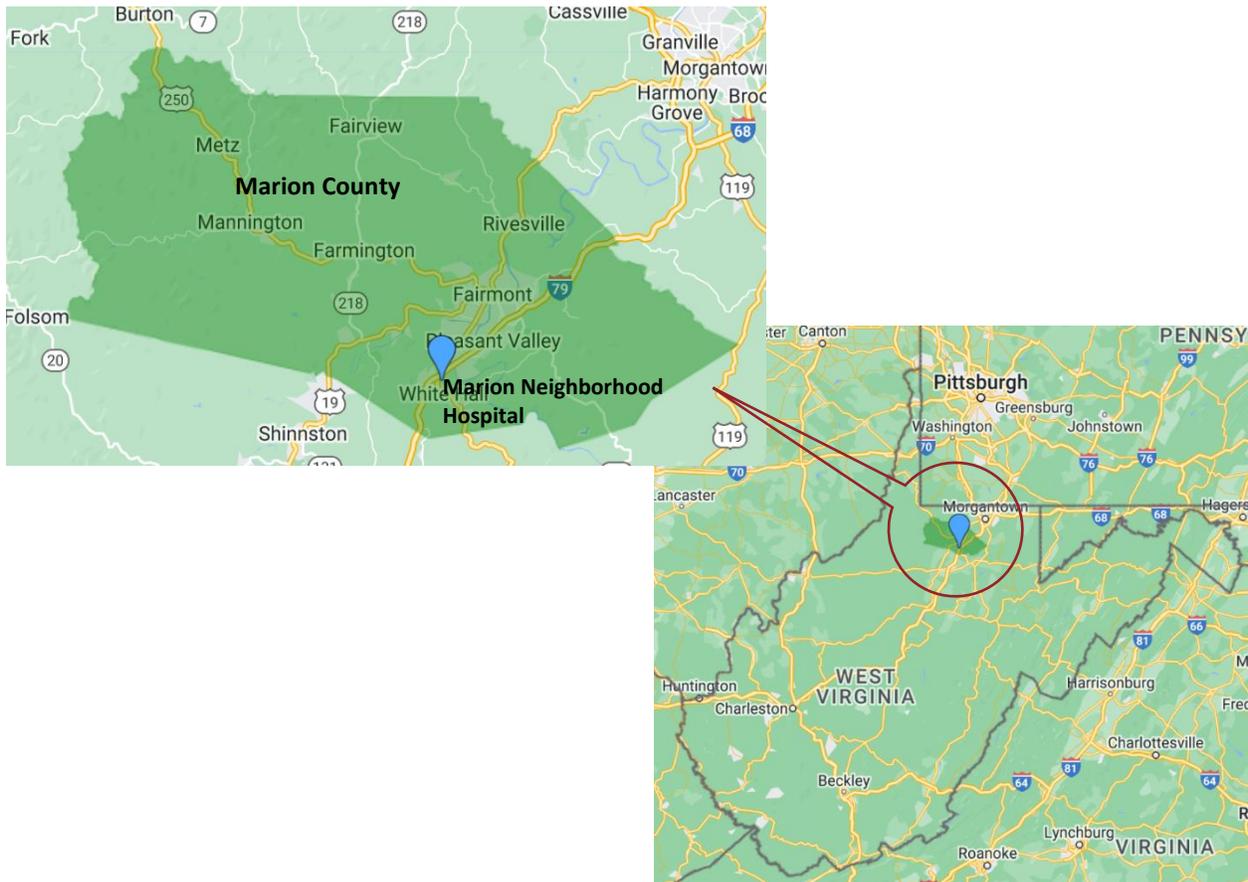
Mon Health Marion Neighborhood Hospital Service Area

Marion Neighborhood Hospital is part of the Mon Health System serving patients and their families in North Central West Virginia. In 2022, Mon Health System and Charleston Area Medical Center (CAMC) combined to create a single healthcare system called Vandalia Health. The two systems operate a combined 17 hospitals and are working together to enhance and maintain healthcare for patients in the small rural communities throughout West Virginia.

Marion Neighborhood Hospital is located in White Hall in Marion County. Marion County is located two hours north of the state capital of Charleston and 30 minutes south of Morgantown. The county is home to approximately 56,000 people.

Marion County has a long history in coal production and other fossil fuels. Recent large investments in the I-79 Technology Park just south of Fairmont have brought new jobs and a modern focus to the local economy. As of 2022, the largest employers were, respectively, the county school system, Fairmont State University, FirstEnergy Service, Marion County Coal Resources, and Walmart. Marion County is part of West Virginia's Mountaineer Country and is home to rich Appalachian views, abundant wildlife, and outdoor adventure.

Mon Health Marion Neighborhood Hospital Service Area

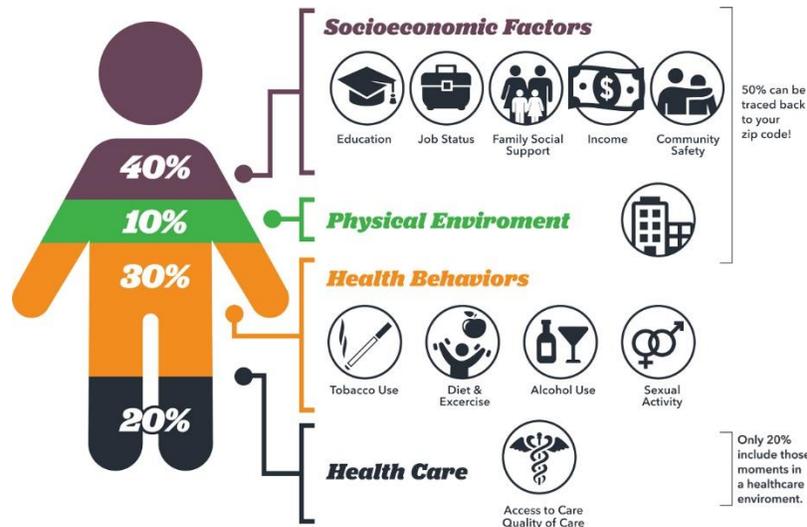




Social Drivers of Health

Where we live impacts choices available to us

While health improvement efforts have historically targeted health behaviors and clinical care, at least 50% of a person's health profile is influenced by socioeconomic factors. Known as the social drivers of health (SDoH), these are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health risks and outcomes. Addressing SDOH is essential to achieving health equity.



Infographic Credit: Neighborhood Outreach Access to Health

Healthy People 2030, the CDC's national benchmark for health, recognizes SDOH as central to its framework, naming "social and physical environments that promote good health for all" as one of the four overarching goals for the decade. Healthy People 2030 outlines five key areas of SDOH: economic stability, education access and quality, healthcare access and quality, neighborhood and built environment, and social and community context.

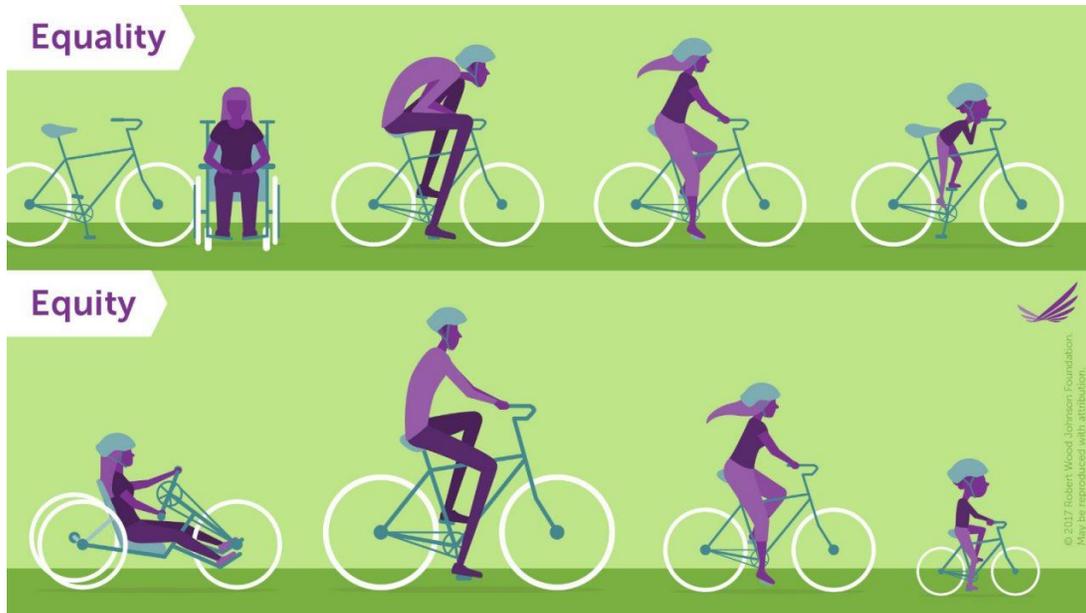


Infographic Credit: CDC



Health Equity

Addressing SDoH is a primary approach to achieving *health equity*. **Health equity can be simply defined as “a fair and just opportunity for every person to be as healthy as possible.”** To achieve health equity, we need to look beyond the healthcare system to dismantle systematic inequities born through racism and discrimination like power and wealth distribution, education attainment, job opportunities, housing, and safe environments, to build a healthier community for all people now and in the future.



A host of indexes are available to illustrate the potential for inequities at the community-level based on SDoH. A description of each index is provided below followed by data visualizations of each tool that show how well Marion County fares compared to state and national benchmarks.

- ▶ **Health Resources and Services Administration Unmet Need Score (UNS):** The UNS provides a zip code-based index of unmet need for primary and preventive healthcare services based on both social drivers of health and reported health status.
- ▶ **Social Vulnerability Index (SVI):** The SVI has historically been used by public health officials and local planners to better prepare for and respond to emergency events like hurricanes, disease outbreaks, or exposure to dangerous chemicals. The SVI identifies census tract-level liability to these events based on factors like poverty, lack of transportation, and overcrowded housing.
- ▶ **Asset Limited Income Constrained Employed (ALICE):** The ALICE index measures the minimum income level required for survival for an average sized household, based on localized cost of living. The index captures the percent of households whose income is above the federal poverty level, but below the threshold necessary to meet all basic needs.
- ▶ **Living Wage Calculator:** The Living Wage Calculator estimates the local wage rate that one full-time worker requires to cover the costs of their family’s basic needs where they live while still being self-sufficient.



Unmet Need Score and Social Vulnerability Index

The Unmet Needs Score (UNS) evaluates an area’s unmet need for primary and preventive healthcare services (at the zip-code level) and helps in allocation of resources across areas of highest unmet need. The UNS is calculated by leveraging publicly available data that depict a community’s social, economic, and health status. It denotes the relative disparities in population health status, as well as the upstream and downstream determinants that lead to health disparities.

The UNS is a weighted sum of 28 measures that are either health determinants or measures of health status, so that comparisons can be made across areas nationwide. The aggregate UNS values range from 0 to 100, where 0 would indicate the least need and 100 the greatest need.

There is a nearly 35-point range between the lowest and highest UNS in Marion County, demonstrating community-level differences in unmet need. The following table provides a snapshot of some key indicators that are used to create the weighted scale of the UNS.

**2017-2021 Social Drivers of Health for Marion County Zip Codes
in Descending order by Unmet Need Score**

Zip Code*	Total Population	Population in Poverty	Children in Poverty	No High School Diploma	No Health Insurance	UNS Score
26591, Worthington	1,891	5.4%	4.9%	14.1%	34.1%	71.59
26582, Mannington	3,898	18.1%	23.6%	16.7%	7.5%	66.56
26587, Rachel	335	21.8%	37.8%	12.2%	3.6%	61.00
26572, Four States	491	66.2%	88.4%	37.6%	0.0%	60.57
26574, Grant Town	417	12.7%	10.9%	16.9%	6.2%	60.48
26554, Fairmont	41,914	14.9%	21.3%	7.6%	6.3%	58.16
26588, Rivesville	3,091	6.4%	2.4%	10.8%	6.3%	56.66
26570, Fairview	3,183	12.3%	13.9%	13.0%	6.8%	54.85
26571, Farmington	1,723	12.9%	24.4%	6.2%	3.6%	51.53
26585, Metz	588	18.5%	42.1%	2.8%	1.0%	49.10
26559, Barrackville	1,568	8.2%	9.4%	6.4%	3.1%	43.53
26576, Idamay	791	1.0%	0.0%	2.4%	0.0%	36.72
Marion County	56,256	14.6%	21.0%	8.8%	6.8%	59.00
West Virginia	1,801,049	16.9%	22.4%	11.9%	6.4%	NA

Source: US Census Bureau, American Community Survey

*The following zip codes are excluded due to small population counts: 26560, Baxter (150); 26563, Carolina (277); and 26586, Montana Mines (58).

Marion County’s overall UNS of 59 indicates average unmet need. When analyzed by zip code, Worthington, 26591 has the highest unmet need in the county due in large part to the high proportion of residents without health insurance. **Approximately 34% of residents in Worthington do not have health insurance, and children and youth under 19 years comprise approximately two-thirds of these individuals.** This finding presents an opportunity for further exploration of community barriers for health insurance, as well as education regarding subsidized child health insurance options. In other Marion County communities with higher unmet need, poverty, particularly affecting children, and lower educational attainment are driving factors.



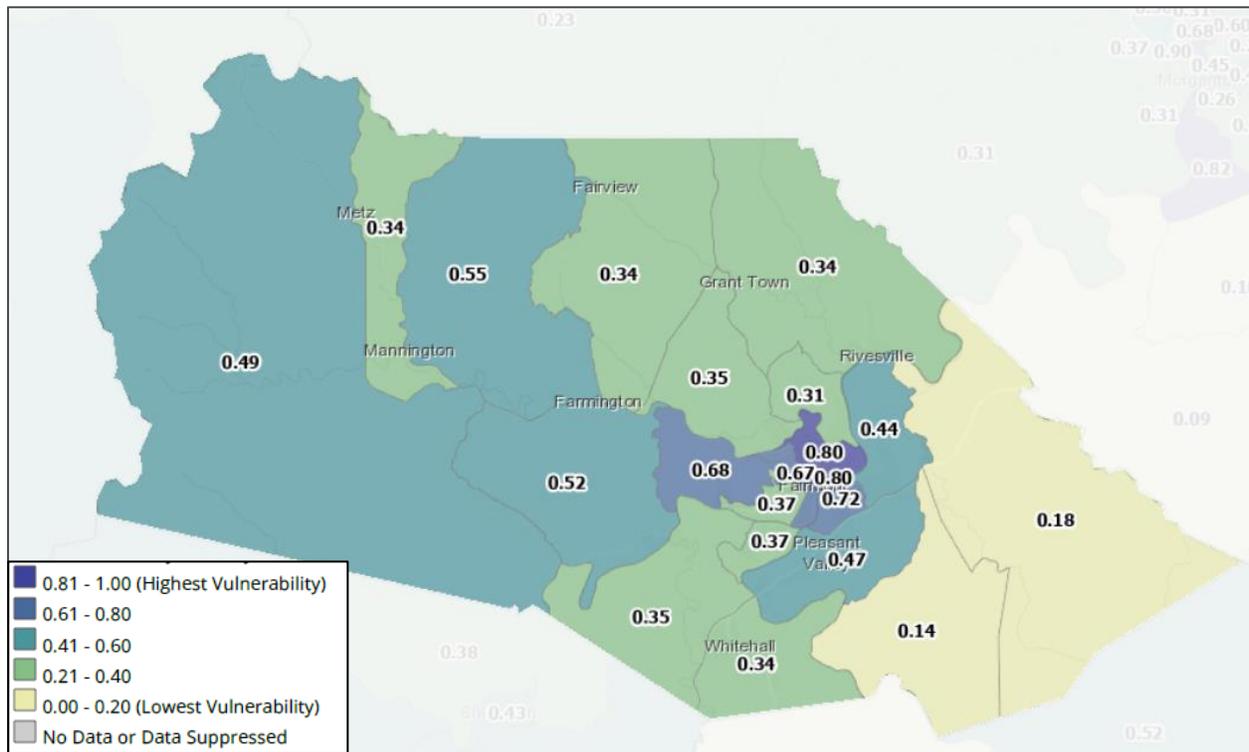
Social factors like economics, education, and access to healthcare account for 50% of our well-being and directly impact how long we live and our quality of life. The following map depicts a census tract-level assessment of social risk, based on the Social Vulnerability Index (SVI).

The City of Fairmont displays the highest SVI values between 0.60 to 0.80 out of a maximum value of 1.0. This finding suggests more negative social risk factors like poverty, lack of access to transportation, and overcrowded housing. Fairmont is the most population dense area within Marion County; approximately 75% of the county population resides in Fairmont. The disparity in vulnerability between city census tracts and neighboring communities is notable.

Social vulnerability refers to the potential negative effects on communities caused by external stresses on human health. Such stresses include natural or human-caused disasters, or disease outbreaks. Reducing social vulnerability can decrease both human suffering and economic loss.

The CDC/ATSDR Social Vulnerability Index (CDC/ATSDR SVI) uses 16 U.S. census variables to help local officials identify communities that may need support before, during, or after disasters. <https://www.atsdr.cdc.gov/placeandhealth/svi/index.html>

Social Vulnerability Index by Census Tract within Marion County



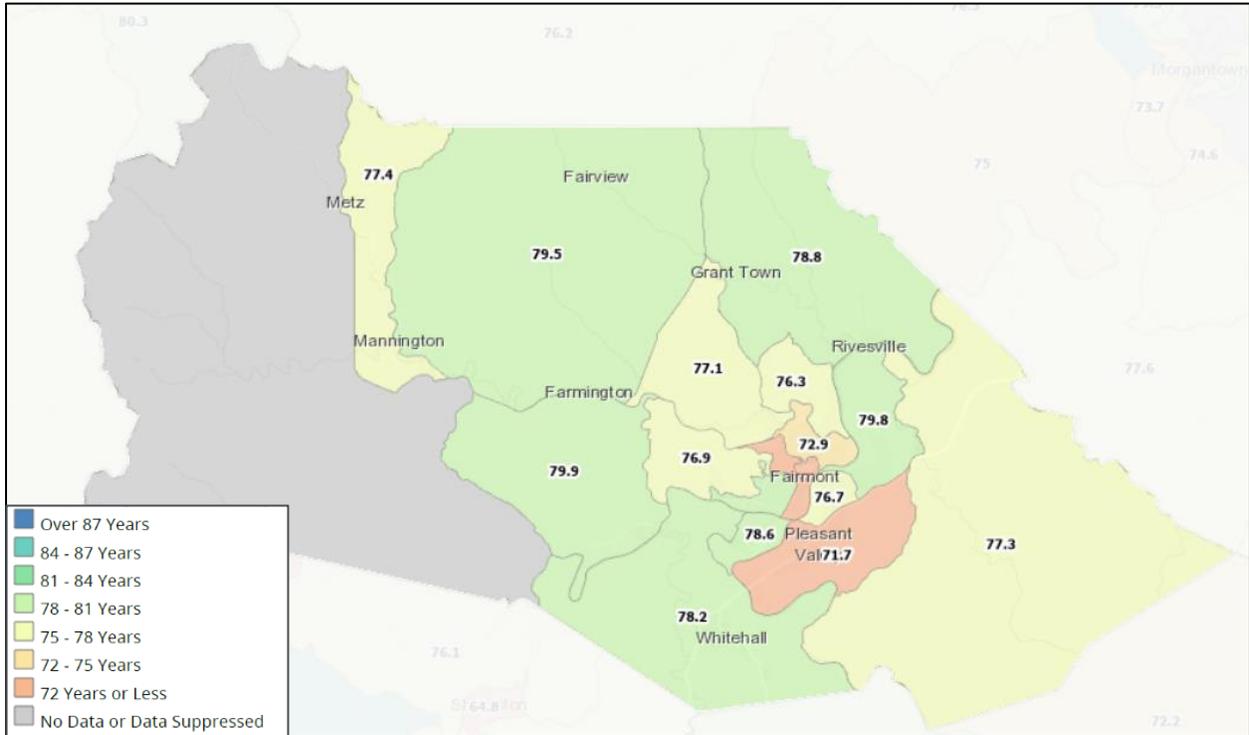
Source: Centers for Disease Control and Prevention & Center for Applied Research and Engagement Systems

Life expectancy reflects the average age at death in a community. Because it is an average, when community members die at a young or early age due to disease, injury, or accidents, the community average life expectancy falls. When public health interventions prevent disease, injury, or accidents, life expectancy increases. Marion County has an overall life expectancy of 75.6 years, one year higher than the state benchmark, but average life expectancy varies widely across the county. **There is a stark 12-year difference between areas with lowest and highest life expectancy in the county, 67.9 years**



versus 79.9 years. Areas of lower life expectancy are largely concentrated in the City of Fairmont and neighboring Pleasant Valley.

2010-2015 Life Expectancy by Census Tract within Marion County



Source: Centers for Disease Control and Prevention & Center for Applied Research and Engagement Systems

Average life expectancy may also vary by population group. Across Marion County and all of West Virginia, Black residents live an average of 2-4 years less than their white counterparts living in the same community. This disparity is reflective of underlying health and social inequities.

2018-2020 Life Expectancy by Race

	Overall Life Expectancy	Black	White
Marion County	75.6	71.4	75.7
West Virginia	74.3	71.8	74.2

Source: National Vital Statistics System

Note: Asian and Latinx data is not available for Marion County due to low population counts.

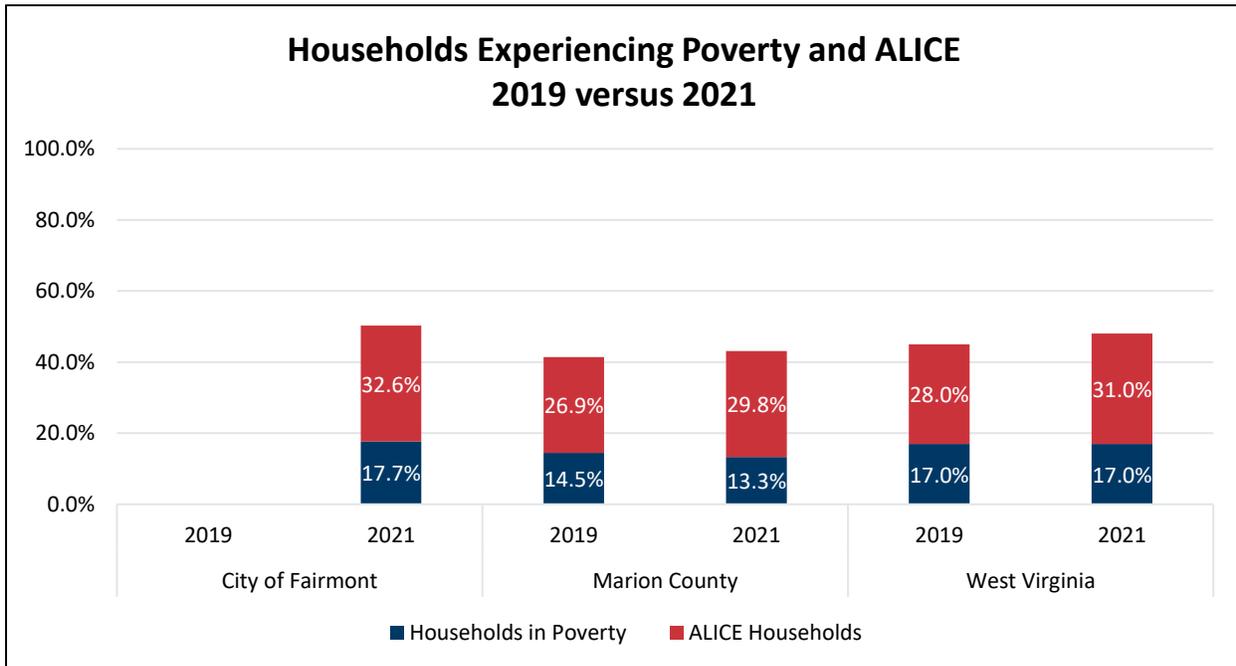


Asset Limited Income Constrained Employed (ALICE) and Living Wage Calculator

The ALICE index captures the percentage of working households whose income is above the federal poverty level but below the threshold necessary to meet basic needs based on localized cost of living and average household sizes. ALICE measures the proportion of households who are employed, struggle to meet basic needs, and are a paycheck or two away from not being able to meet their basic needs such as food, clothing, utilities, or healthcare.

In 2021, nearly 1 in 3 households in Marion County met the ALICE threshold. **When combined with poverty measures, more than 40% of households in Marion County and 50% of households in the City of Fairmont were either a paycheck away from not being able to meet their financial needs or already below the poverty level.**

The proportion of Marion County households who meet ALICE criteria is slightly lower than the state overall. However, consistent with statewide trends, the proportion of ALICE households has increased while the proportion of households in poverty has slowly declined.



Source: United for ALICE

*Data for the City of Fairmont are not reported for 2019.

The living wage is the hourly rate that a worker must earn to provide adequate food, housing, and other necessities for his or herself and their family based on the local cost of living. The state minimum wage applies to all workers, regardless of their family size or age. The following table shows the hourly rates needed to earn a living wage or to meet the definition of poverty based on different family sizes and cost of living in Marion County, and the West Virginia minimum wage for comparison.

The results of the Living Wage Calculator reinforce that, in general, wages and typical annual salaries have not kept up with expenses of daily living. **Typical annual salaries for all occupational areas, except**

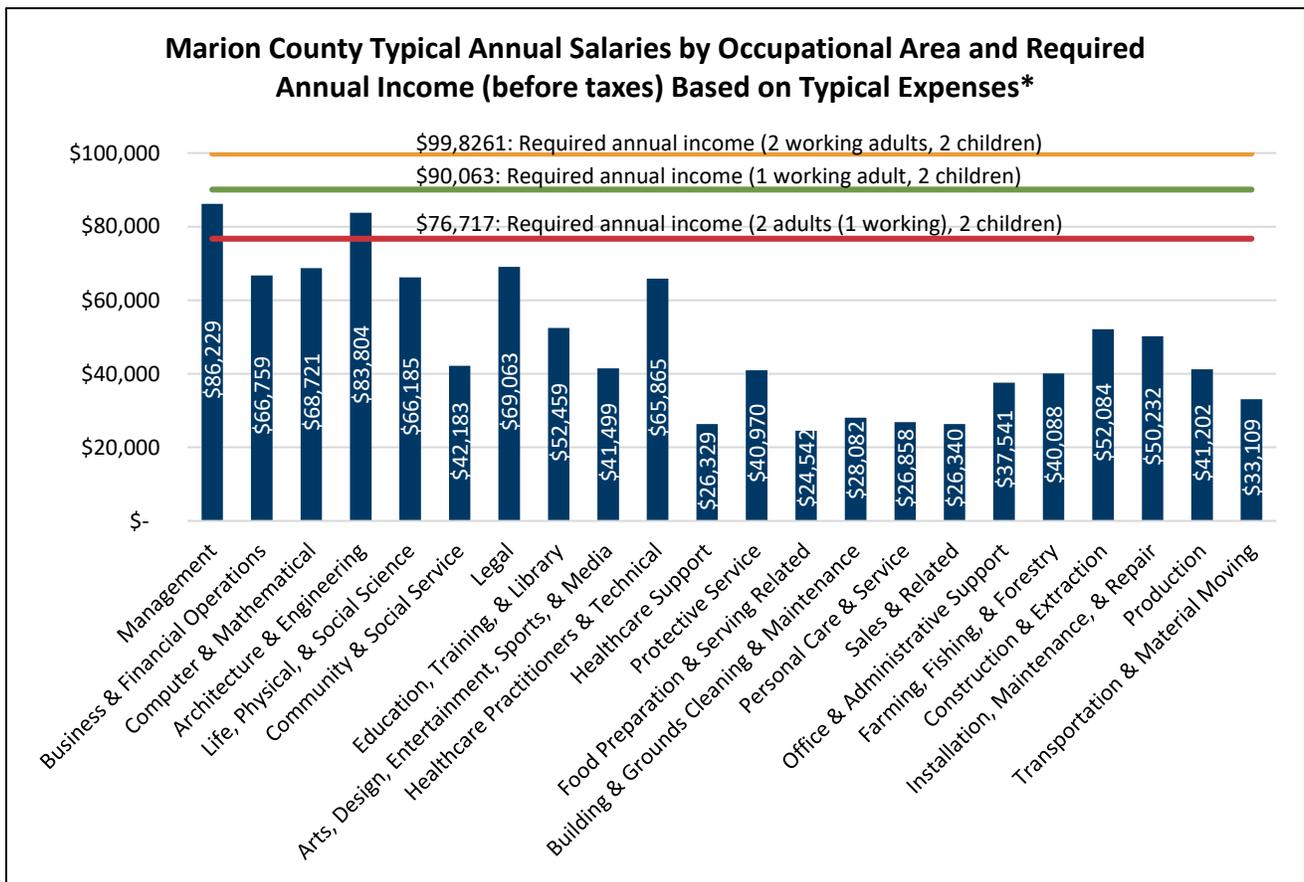


management, architecture, and engineering, do not meet the required annual income to support a household.

Living Wage Calculation Scenarios for Marion County Based on 1 or 2 Working Adults and 2 Children

	1 Working Adult, 2 Children	2 Adults (1 working), 2 Children	2 Working Adults, 2 Children
Living wage	\$43.30	\$36.88	\$24.00
Poverty wage	\$11.07	\$13.34	\$6.67
Minimum wage	\$8.75	\$8.75	\$8.75

Source: Living Wage Calculator



Source: Living Wage Calculator

*Typical expenses include food, childcare, medical, housing, transportation, civic, other. Required annual income reflects per working adult, single or in a family.



Demographics: Who Lives in Marion County?

Our Community and Residents

Consistent with West Virginia overall, Marion County is an aging community. **Nearly 20% of Marion County residents are aged 65 or over, and the older adult population has grown more than 13% since 2010. In contrast, the youth population grew 0.8% since 2010.**

The overall population of Marion County is slowly declining. As this population decline happens, we see an increase in the proportion of older adults and a decrease in the proportion of younger adults. This suggests that more younger adults and young families may be moving out of the Marion County area than are moving in, while most older adults are choosing to stay.

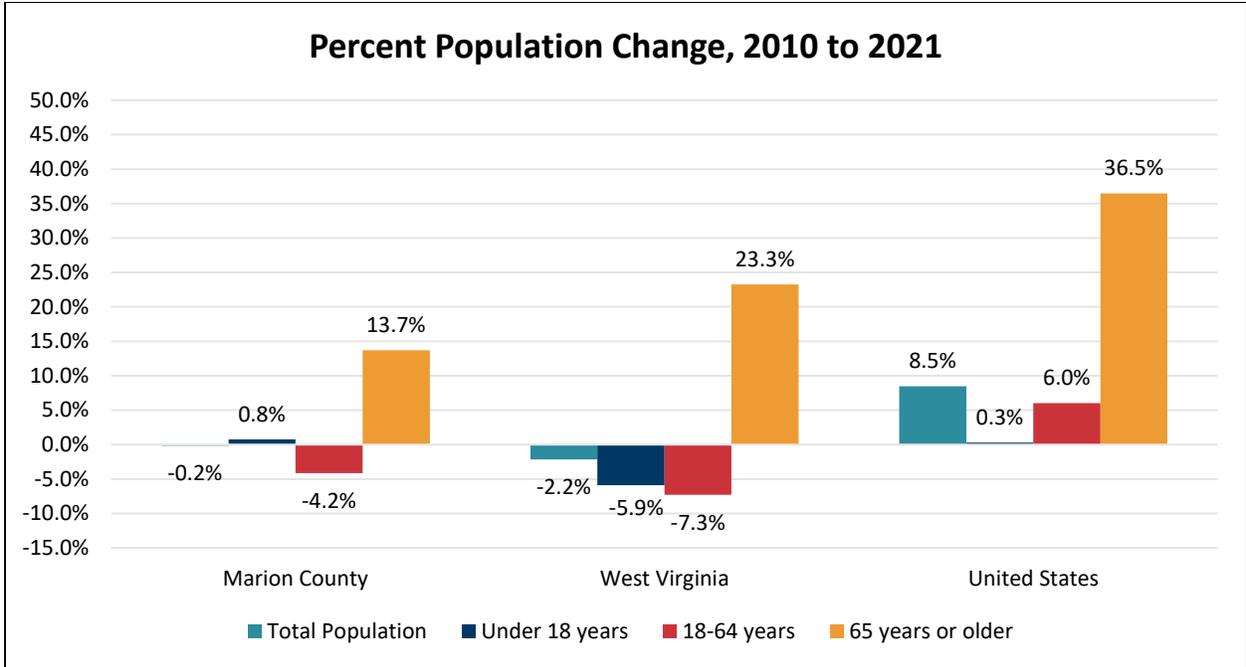
In the short term, the increase in the proportion of older adults will likely result in the need for more supportive services for aging residents. Providing these services may be challenged by the higher proportion of older adults choosing to live in more rural areas of the county (see map below). Over the long term, to ensure Marion County remains a thriving community for all people, efforts to understand how to attract and retain younger, working aged people will help build a healthier community in the future.

While Marion County is aging, approximately 1 in 5 residents are children under the age of 18. This finding reinforces the potential impact of upstream, preventative initiatives in this community.

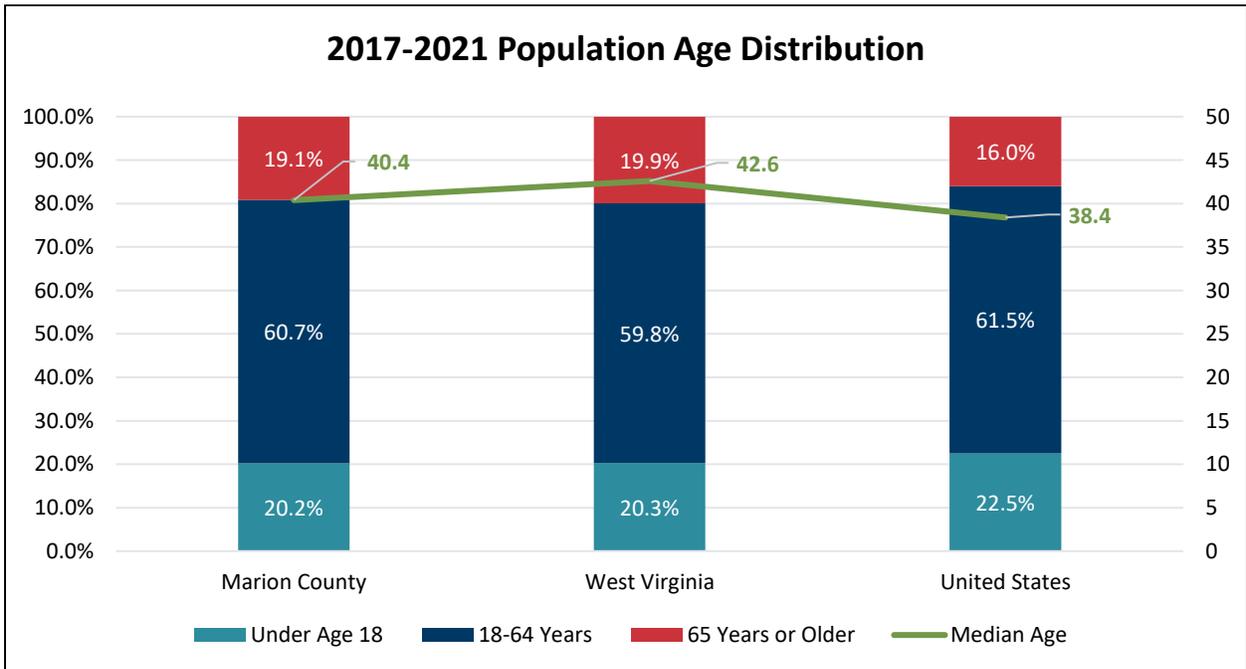
Total Population by Year

	Total Population 2010	Total Population 2021
Marion County	56,356	56,256
West Virginia	1,840,802	1,801,049
United States	303,965,272	329,725,481

Source: US Census Bureau, American Community Survey



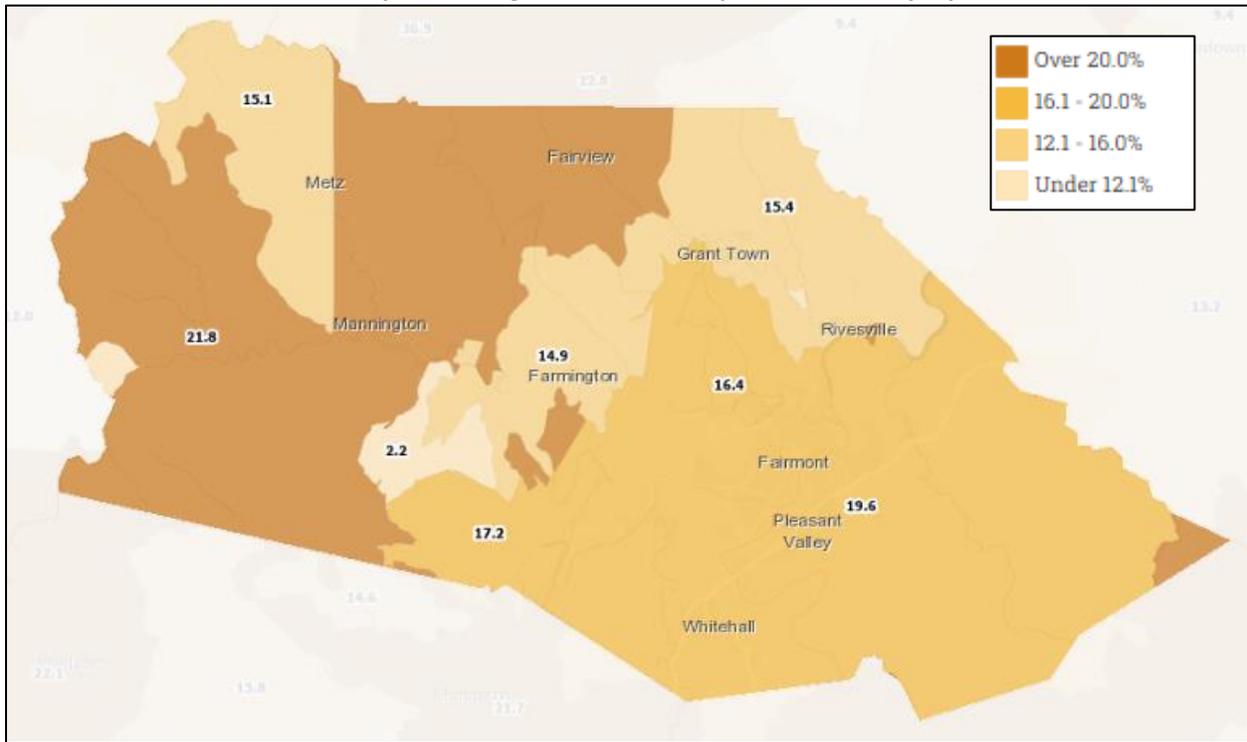
Source: US Census Bureau, American Community Survey



Source: US Census Bureau, American Community Survey



2017-2021 Population Aged 65 or Older by Marion County Zip Code



Source: US Census Bureau, American Community Survey & Center for Applied Research and Engagement Systems

West Virginia, including Marion County, is a majority white population, even more so than the nation overall. Approximately 93% of county residents identify as white compared to 68% nationwide.

Consistent with state and national trends, population diversity is increasing within Marion County. This demographic shift is occurring slowly with the white population as a proportion of the total population decreasing approximately 2 percentage points over the last 10 years.

2017-2021 Population by Race*

	Asian	Black or African American	White	Other Race	Two or More Races
Marion County	0.3%	3.1%	93.0%	0.7%	2.7%
West Virginia	0.8%	3.4%	92.1%	0.5%	3.1%
United States	5.7%	12.6%	68.2%	5.6%	7.0%

Source: US Census Bureau, American Community Survey

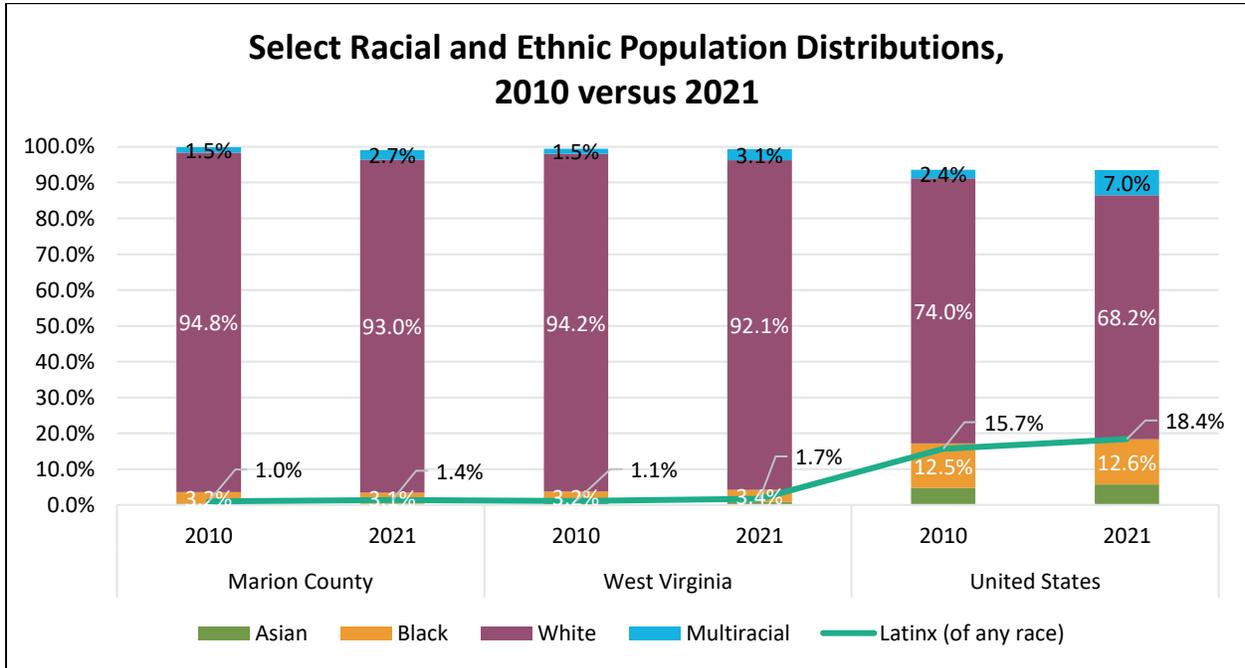
*Note: Alaska Native and Hawaiian/Pacific Islander were not included because of low numbers in Marion County and West Virginia.



2017-2021 Population by Ethnicity

	Latinx origin (any race)
Marion County	1.4%
West Virginia	1.7%
United States	18.4%

Source: US Census Bureau, American Community Survey



Source: US Census Bureau, American Community Survey

2017-2021 Birthplace, Citizenship Status, Language Spoken at Home

	US citizen, born in the US	Speak Primary Language Other Than English
Marion County	98.6%	2.0%
West Virginia	97.8%	2.5%
United States	84.7%	21.7%

Source: US Census Bureau, American Community Survey



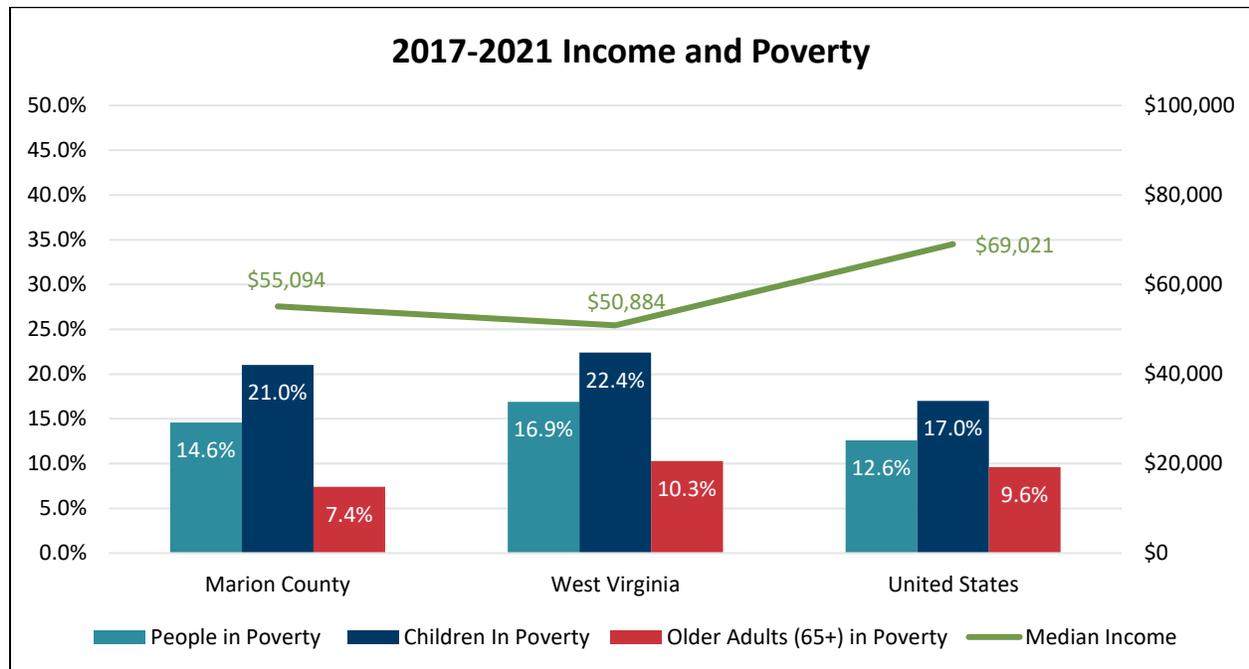
Income and Work

The median income in Marion County is slightly higher than the statewide median and both are lower than the national median. **Consistent with having lower incomes, approximately 15%-17% of all people and more than 20% of children in Marion County and West Virginia are experiencing poverty. The proportion of individuals experiencing poverty has slowly declined but continues to exceed national averages.** It is worth noting, as an aging community, that fewer older adults in Marion County experience poverty compared to their peers statewide and nationally.

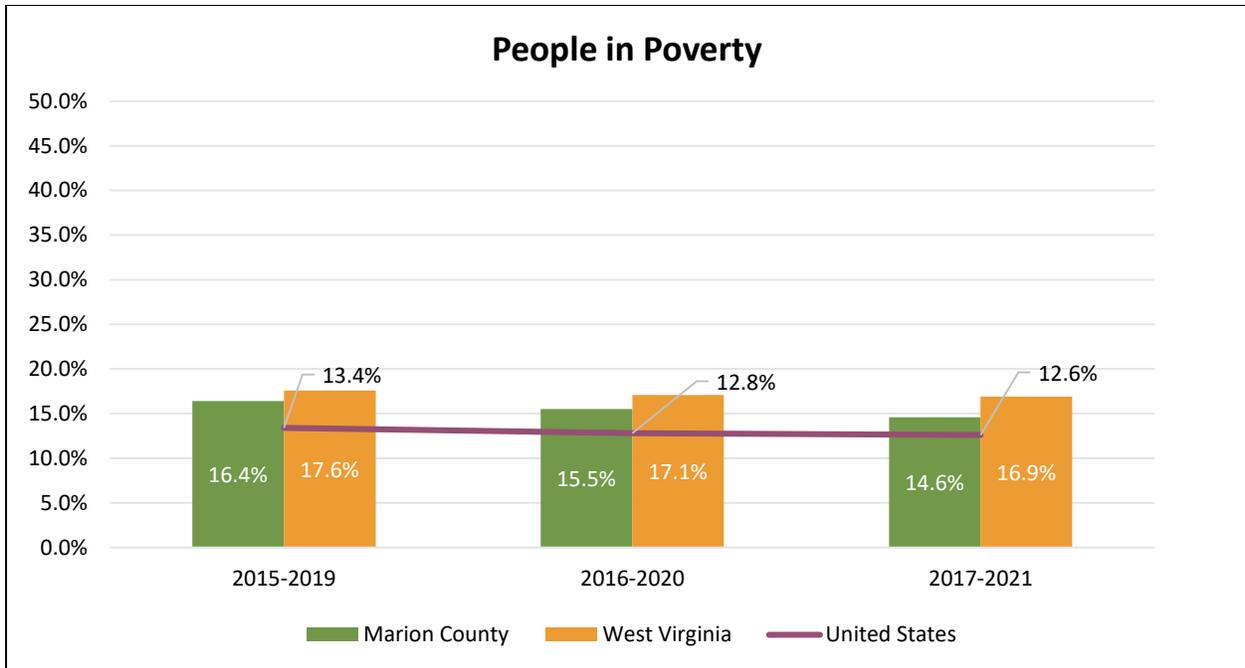
When analyzed by zip code, it is evident that poverty is not experienced equally across Marion County. Poverty is more heavily concentrated in the western portion of the county. **In Four States, a former coal town, two-thirds of all residents and nearly 90% of children experience poverty.** The population of Four States is small, estimated at 491 people in 2021.

Income inequality can have broad health impacts, including increased risk of disease and mortality. Inequalities in a community can also accentuate differences in social class and status and contribute to a loss of trust, social support, and a sense of community for all residents.

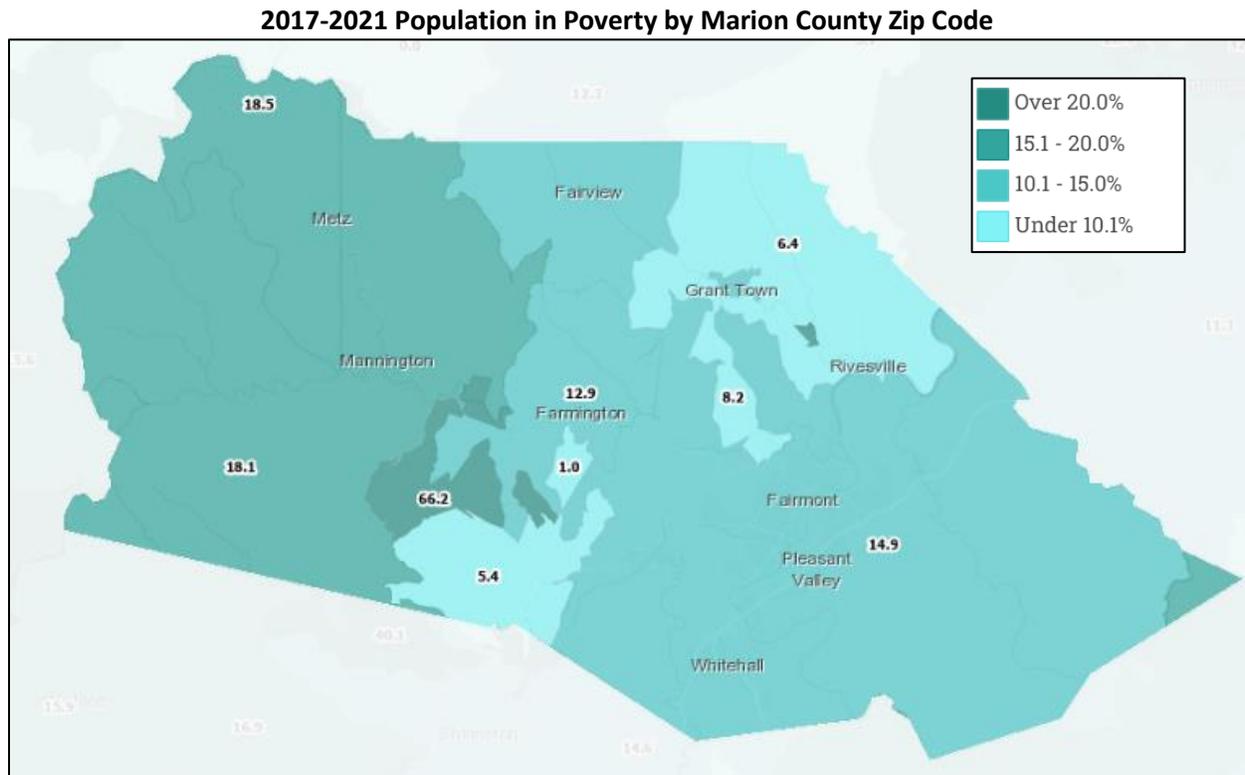
Income inequality is measured as the ratio of household income at the 80th percentile to household income at the 20th percentile. **In Marion County, 20% of households have an income of \$105,927 or higher (80th percentile) and 20% of households have an income of \$23,388 or lower (20th percentile). When these two values are divided, the result is an income ratio of 4.5, meaning households with higher incomes have incomes 4.5 times that of households with lower incomes.**



Source: US Census Bureau, American Community Survey



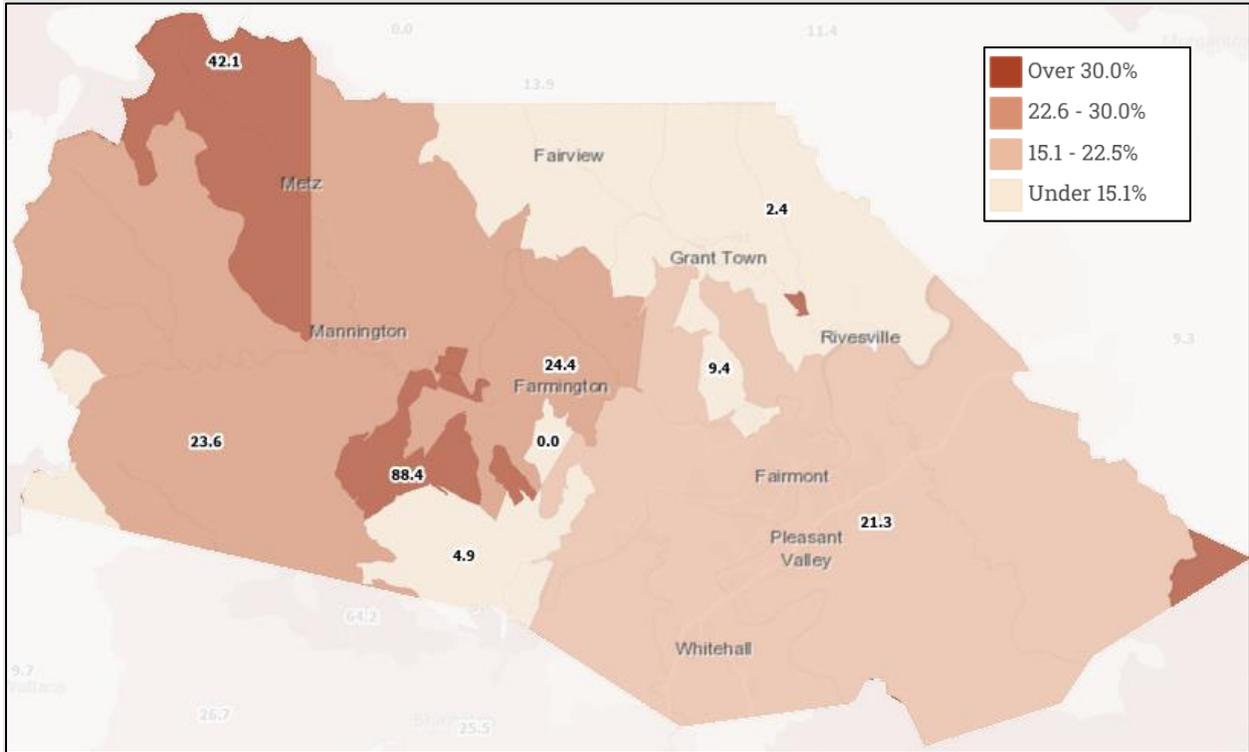
Source: US Census Bureau, American Community Survey



Source: US Census Bureau, American Community Survey & Center for Applied Research and Engagement Systems



2017-2021 Children in Poverty by Marion County Zip Code



Source: US Census Bureau, American Community Survey & Center for Applied Research and Engagement Systems

2017-2021 Income Inequality

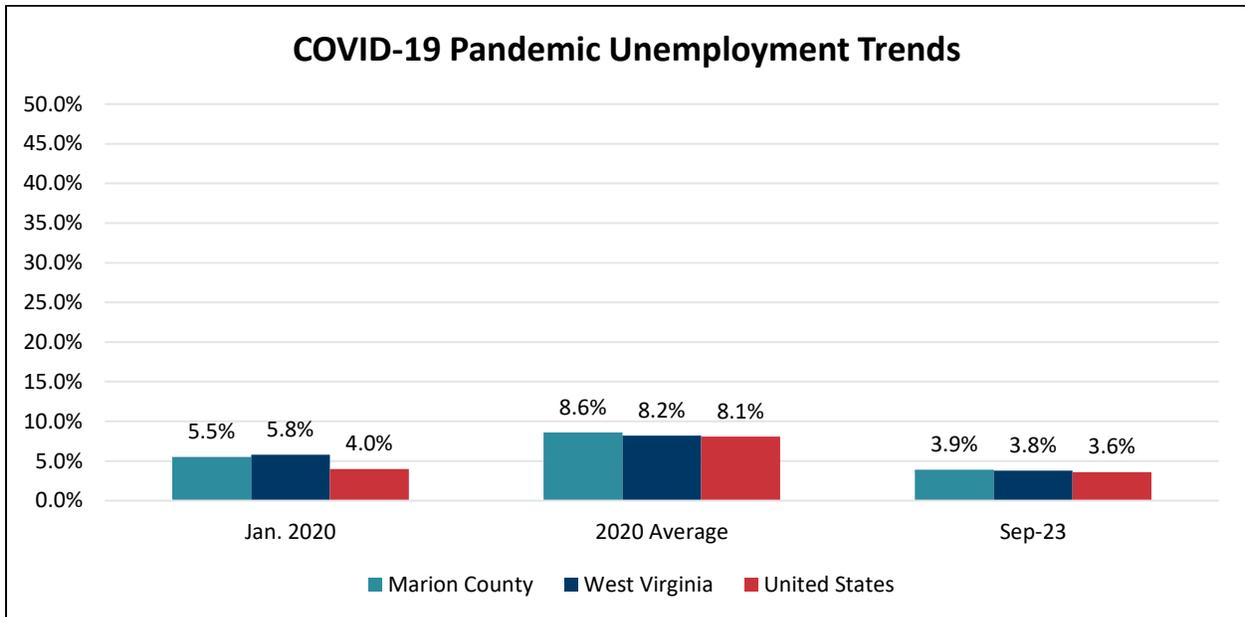
	80th Percentile Household Income (highest)	20th Percentile Household Income (lowest)	Ratio of Highest to Lowest Incomes
Marion County	\$105,927	\$23,388	4.5
West Virginia	\$103,134	\$20,369	5.1

Source: US Census Bureau, American Community Survey & County Health Rankings



In the early months of the COVID-19 crisis, tens of millions of people lost their jobs, and by the end of 2020, average unemployment for the US was approximately double what it was at the beginning of the year. Unemployment also increased in Marion County, at a similar rate to statewide and national numbers.

Unemployment has since declined from 2020 and returned to pre-pandemic levels. However, the long-term impact of this experience should continue to be monitored and considered with other socioeconomic findings.

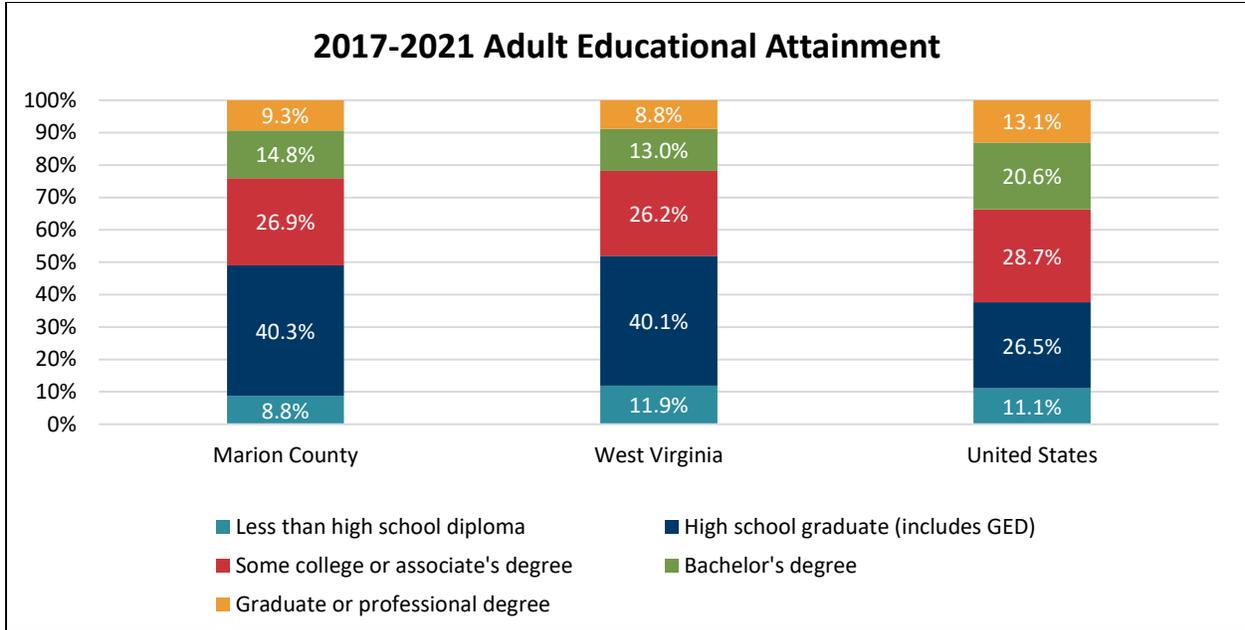


Source: US Bureau of Labor Statistics

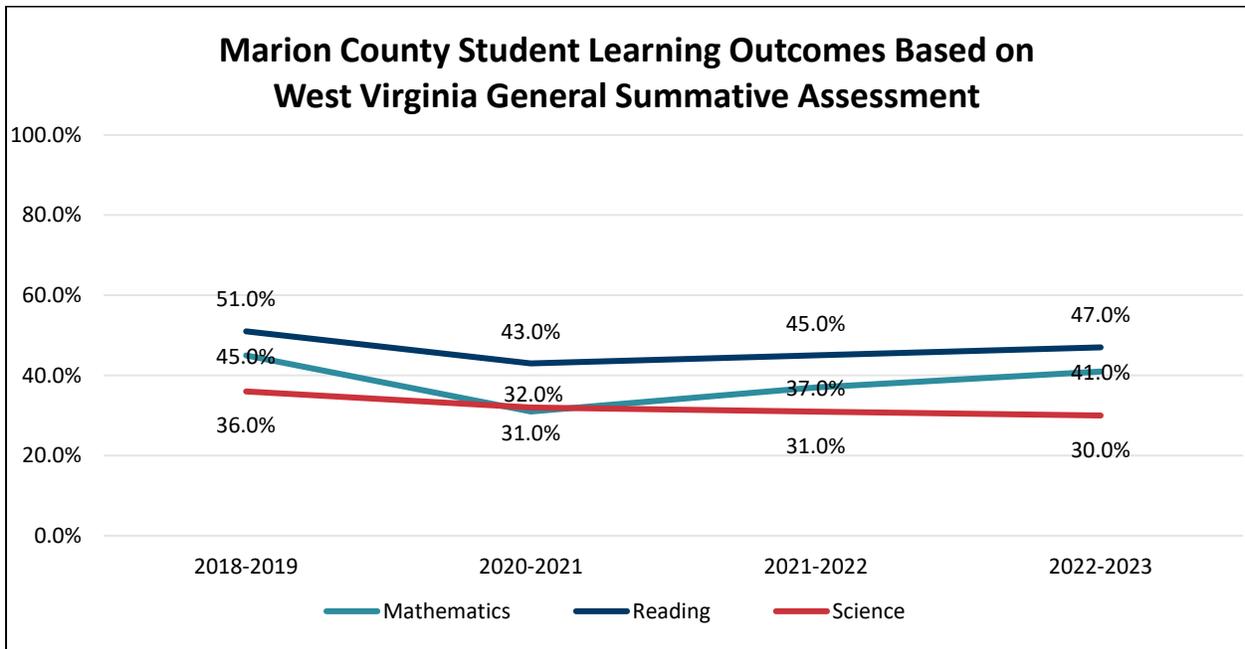
Education

High school graduation is one of the strongest predictors of longevity and economic stability. Across Marion County, more than 90% of adults graduated high school and nearly 25% attained a bachelor's or graduate degree, generally mirroring statewide trends.

The COVID-19 pandemic disrupted education for many students and negatively affected learning outcomes. The West Virginia General Summative Assessment (WVGSA) for students in grades 3-8 is an online test given toward the end of the school year to measure student performance on the state's content standards, which provide guidelines for what students should know and be able to do at each grade level. **Between the 2018-2019 and 2020-2021 school years, the percentage of students proficient in reading and math fell 8 and 14 percentage points, respectively.** Learning outcomes started to improve during the 2021-2022 school year but have not returned to pre-pandemic levels. It is worth noting that proficiency in science continued to steadily decline, even after the pandemic.



Source: US Census Bureau, American Community Survey



Source: West Virginia Department of Education

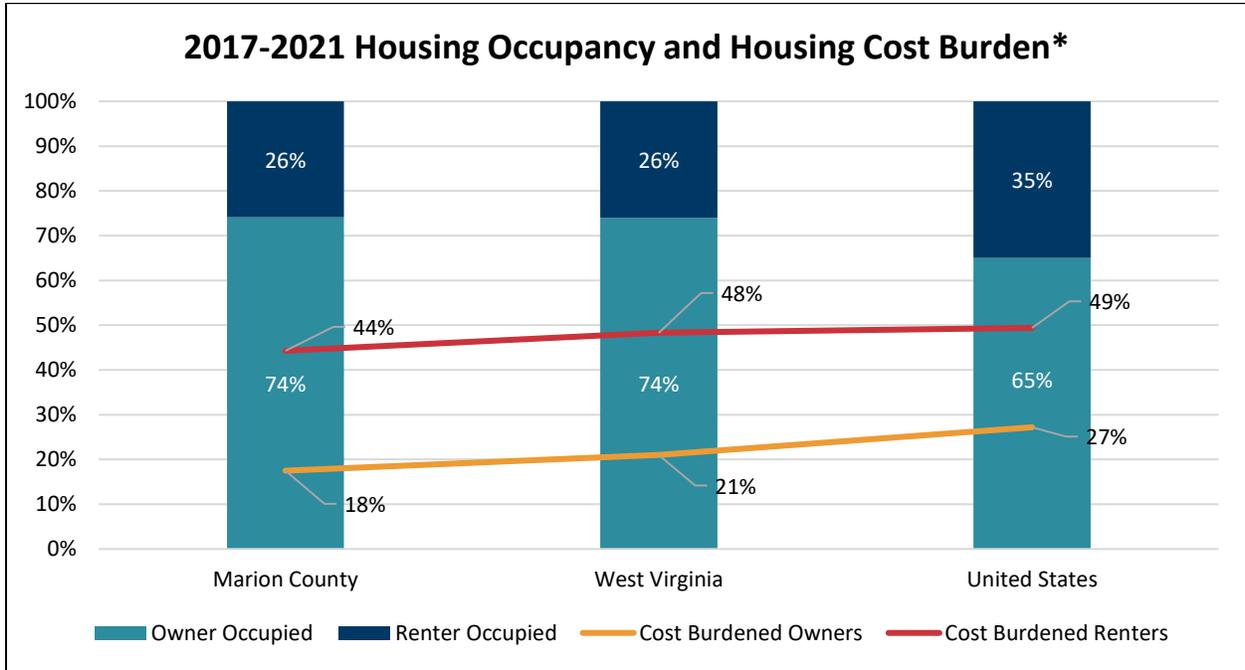
*Proficiency data are not reported for the 2019-2020 school year.

Our Homes and Where We Live

Housing is often the largest single monthly expense for households and should represent no more than 30% of a household’s monthly income. When households spend more than 30% of their income on housing, they are considered housing cost burdened and fewer resources are available for other necessities like food, transportation, and childcare.

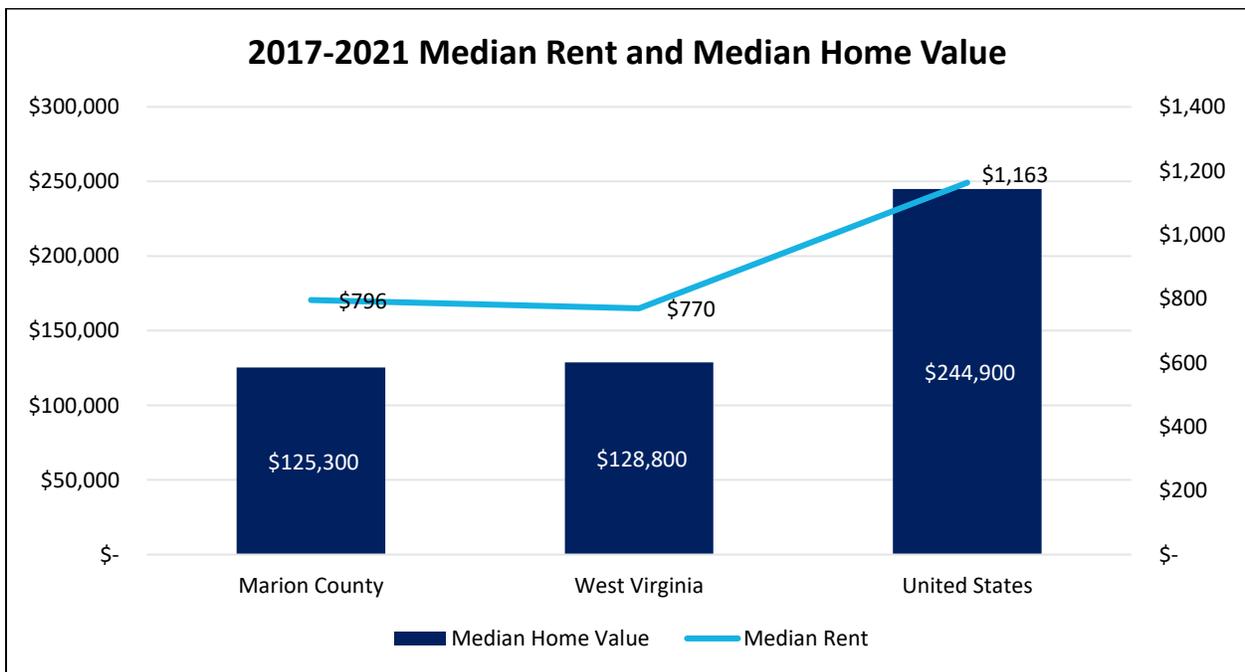


Consistent with West Virginia trends overall, people who live in Marion County are more likely to own their home (74%) when compared to the national average (65%). **Housing is generally more affordable in the county with fewer owners or renters paying more than 30% of their income on housing, although 44% of renters are considered housing cost burdened.**



Source: US Census Bureau, American Community Survey

*Defined as spending 30% or more of household income on rent or mortgage expenses.



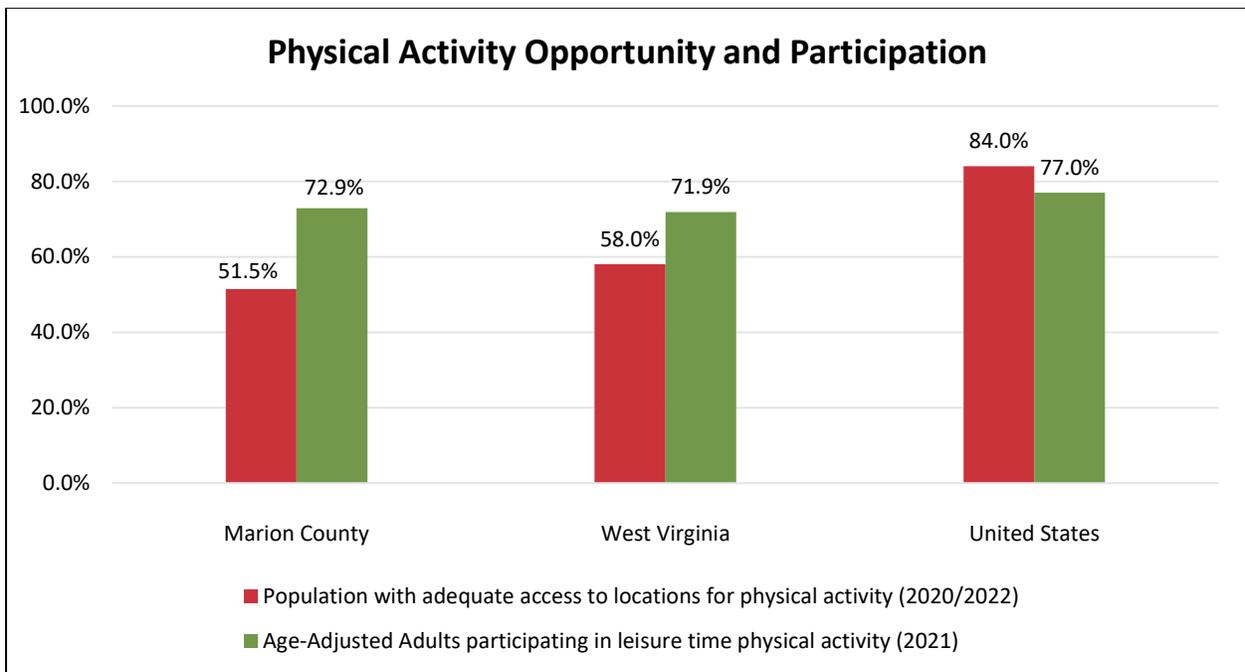
Source: US Census Bureau, American Community Survey



Neighborhood and Built Environment

In addition to the resources available in communities, the physical environment and infrastructure of neighborhoods impacts health. The availability of well-maintained roads and safe sidewalks as well as access to recreation, stores, banks, and other amenities are important components for healthy living.

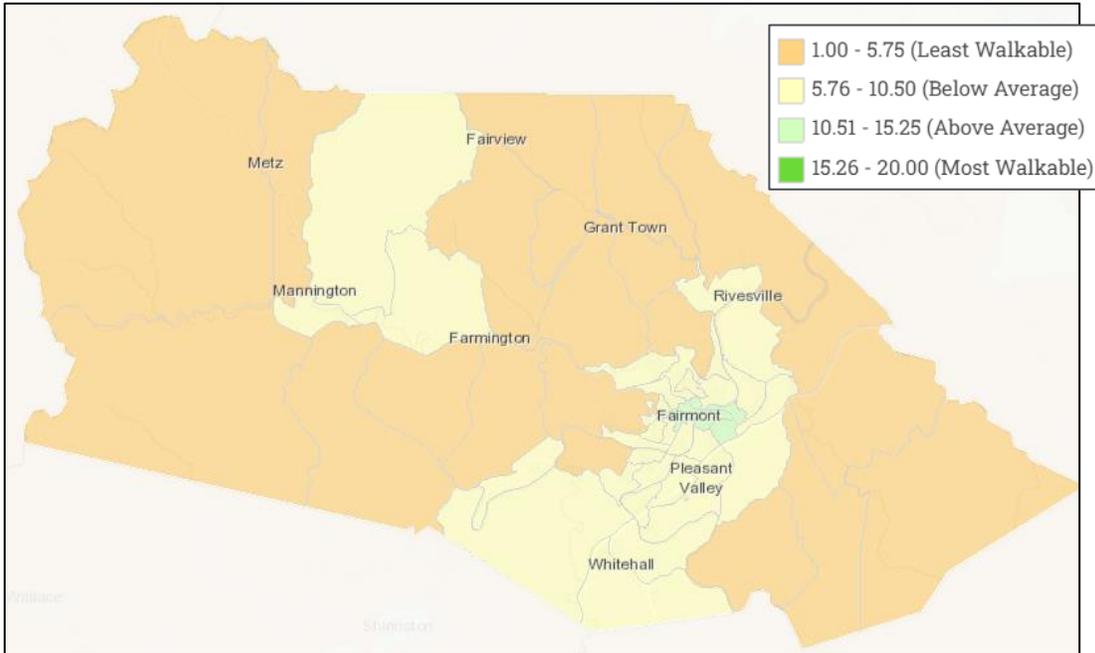
Outside of Fairmont, Marion County is generally a rural community with fewer resources to promote physical activity (recreation facilities, walkable neighborhoods, etc.). **Despite these barriers, 73% of Marion County adults self-report participating in leisure time physical activity, a similar proportion as the state overall. This finding may reflect access to the community’s natural recreation opportunities.**



Source: ArcGIS Business Analyst and Living Atlas of the World; YMCA; US Census Bureau; & Centers for Disease Control and Prevention



2021 National Walkability Index by Marion County Census Block Group



Source: Environmental Protection Agency & Center for Applied Research and Engagement Systems

Food insecurity is defined as not having reliable access to a sufficient amount of nutritious, affordable food. Food insecurity is associated with both disparities in built environment, such as food deserts, and socioeconomic barriers, like lower household income and poverty. Food insecurity can ultimately affect overall health status, contributing to a higher prevalence of disease and poorer disease outcomes.

Across Marion County in 2021, 10.6% of residents were estimated to be food insecure. The percentage of children who experienced food insecurity was higher at 13.9%, but this percentage declined more rapidly in recent years than the percentage of all residents. **From 2020 to 2021, the proportion of children with food insecurity fell 5 percentage points. This finding offers the hopeful implication that more children are being reached with the services they need, and that programs like universal access to no-cost breakfast and lunch at school (available to all Marion County students) are having an impact.**

Food Insecurity

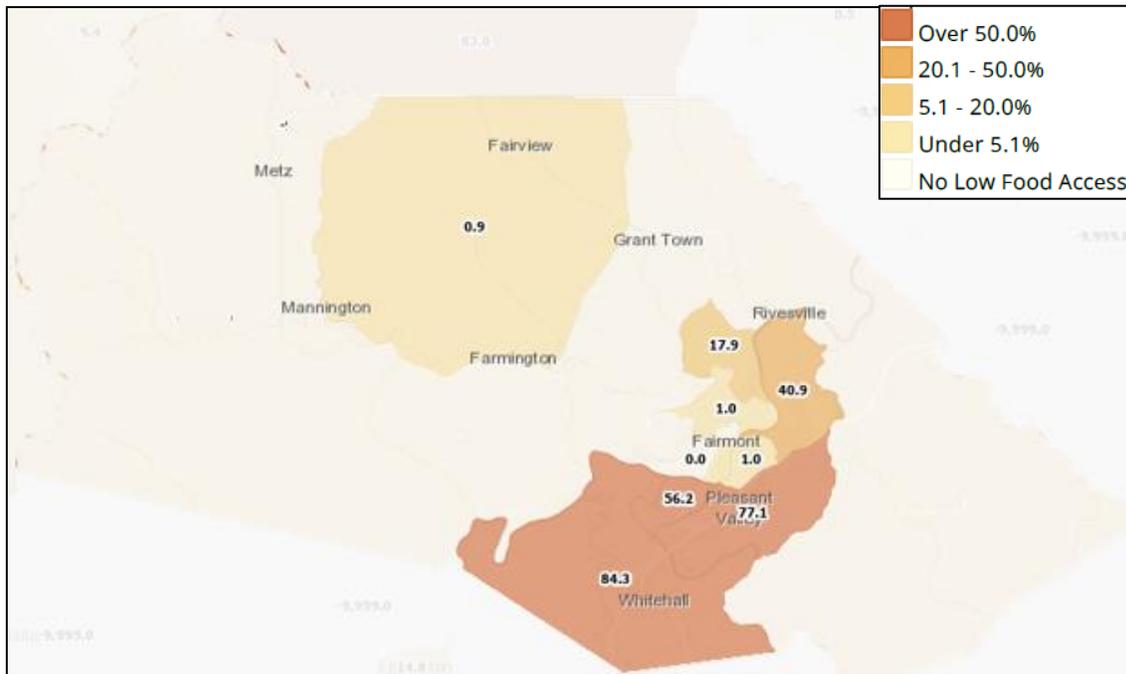
	Marion County	West Virginia	United States
Food Insecure Residents			
2021	10.6%	11.7%	10.4%
2020	12.3%	12.0%	11.8%
2019	12.2%	13.5%	10.9%
Food Insecure Children			
2021	13.9%	14.0%	12.8%
2020	19.3%	17.3%	16.1%
2019	18.5%	18.6%	14.6%

Source: Feeding America & USDA Food Environment Atlas



While overall food insecurity has declined, it is worth noting disparities in food access for individuals with low incomes. **In the southeast portion of the county, including Whitehall and Pleasant Valley, as much as 56%-84% of the population is both low income and does not live close to a grocery store.** This lack of local community access, as well as resources to seek services in other communities, negatively affects overall health and well-being.

2019 Percentage of Population with Limited Food Access and Low Income by Census Tract



Source: US Department of Agriculture & Center for Applied Research and Engagement Systems

During the pandemic, we were able to use technology to bring services to people in their homes, but not uniformly. We need to bridge the digital divide within communities to effectively reach all residents.

Residents of Marion County generally have better computer and internet access than the state overall, although both geographies fall below national averages. **Broadband internet access is more readily accessible in the more urban, eastern portion of the county. In western portions of the county, the proportion of households with broadband drops to as low as 72% in Mannington.**

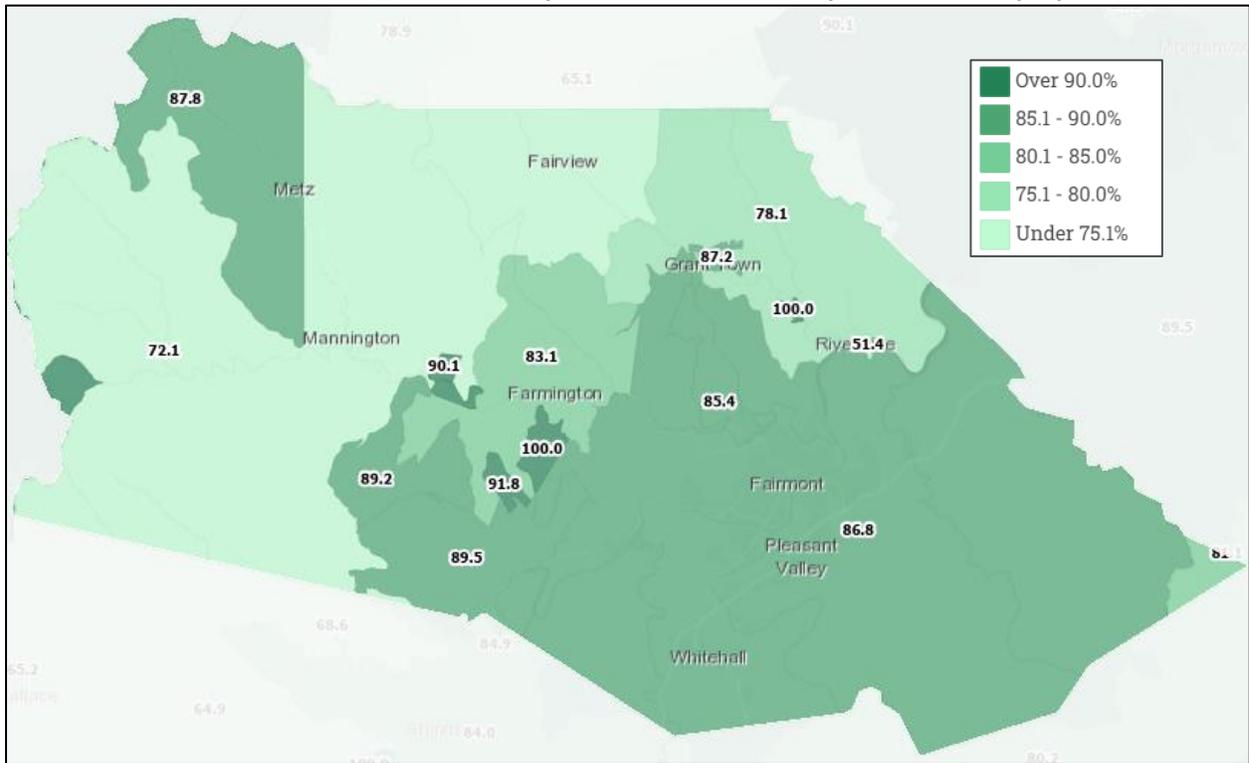
2017-2021 Households by Digital Access

	With Computer Access			With Internet Access	
	Computer Device	Desktop / Laptop	Smartphone	Internet Subscription	Broadband Internet
Marion County	90.0%	70.8%	79.5%	85.4%	85.3%
West Virginia	87.6%	68.9%	76.4%	81.1%	80.8%
United States	93.1%	78.9%	86.5%	87.2%	87.0%

Source: US Census Bureau, American Community Survey



2017-2021 Households with any Broadband Internet by Marion County Zip Code



Source: US Census Bureau, American Community Survey & Center for Applied Research and Engagement Systems

The pandemic contributed to a nationwide shortage of childcare workers. A New York Times article published in October 2022 reported, “There are 100,000 fewer child-care workers than there were before the coronavirus pandemic, according to the Bureau of Labor Statistics.” The shortage of workers has resulted in both fewer childcare options and higher costs for care. **While Marion County has more childcare options than the state overall, childcare costs are similarly high. Marion County residents with small children may spend more than one-third of their income on just childcare.**

Childcare Availability and Affordability

	Number of childcare centers per 1,000 population under 5 years old	Childcare costs for a household with two children as a percent of median household income
Marion County	6.1	35.8%
West Virginia	3.8	35.5%
United States	7.0	27.0%

Source: Homeland Infrastructure Foundation-Level Data, 2010-2022 & The Living Wage Calculator, Small Area Income and Poverty Estimates, 2022 & 2021

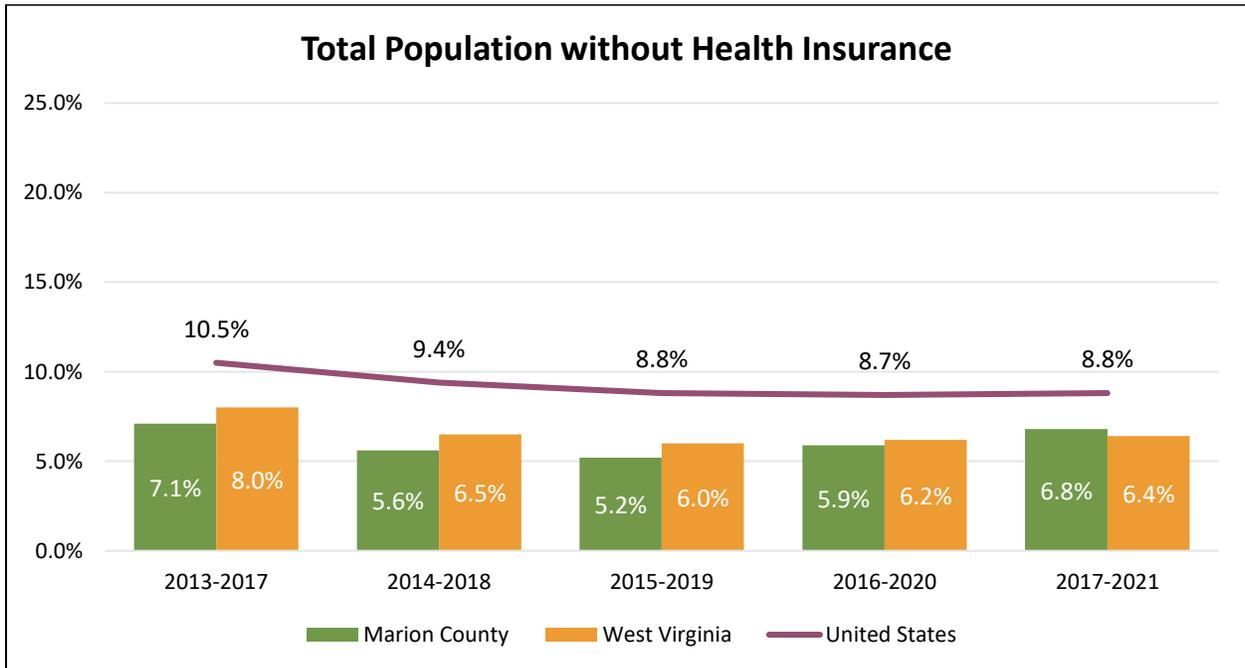


Our Health Status as a Community

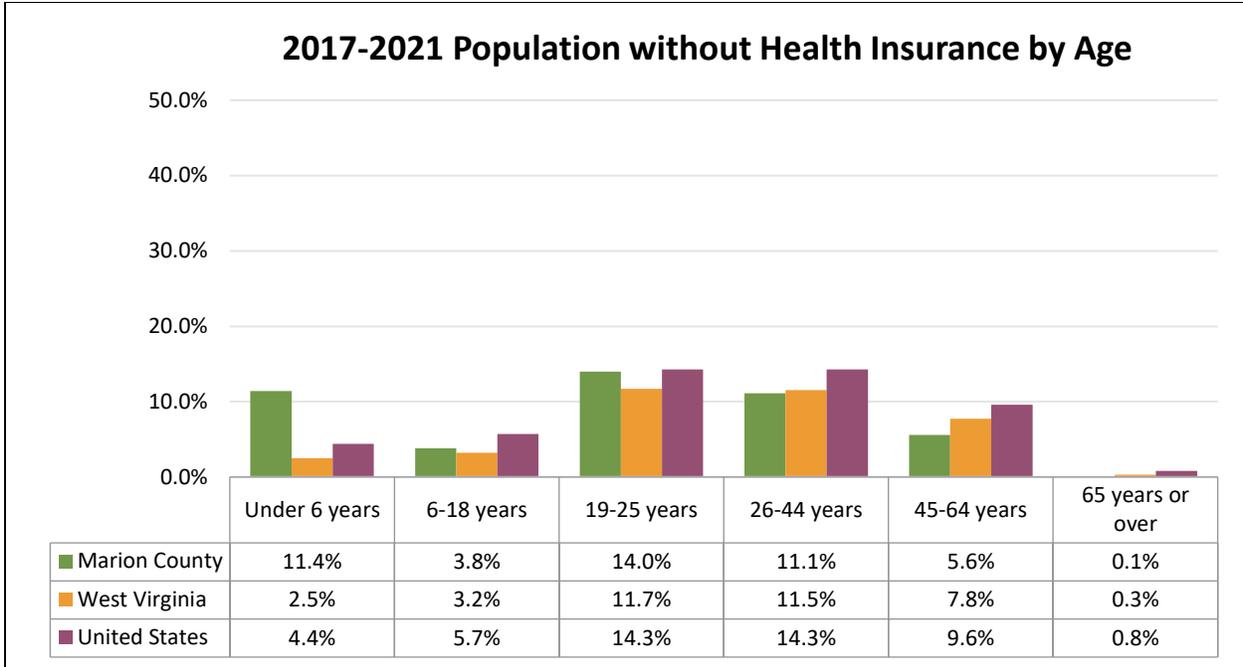
Access to Care

Lack of health insurance is a barrier to accessing healthcare. Without health insurance, residents face high costs for care when they need it and are less likely to receive preventive care. Preventive care, such as well visits and screenings, can detect small problems that can be treated more easily and effectively than if treatment is delayed.

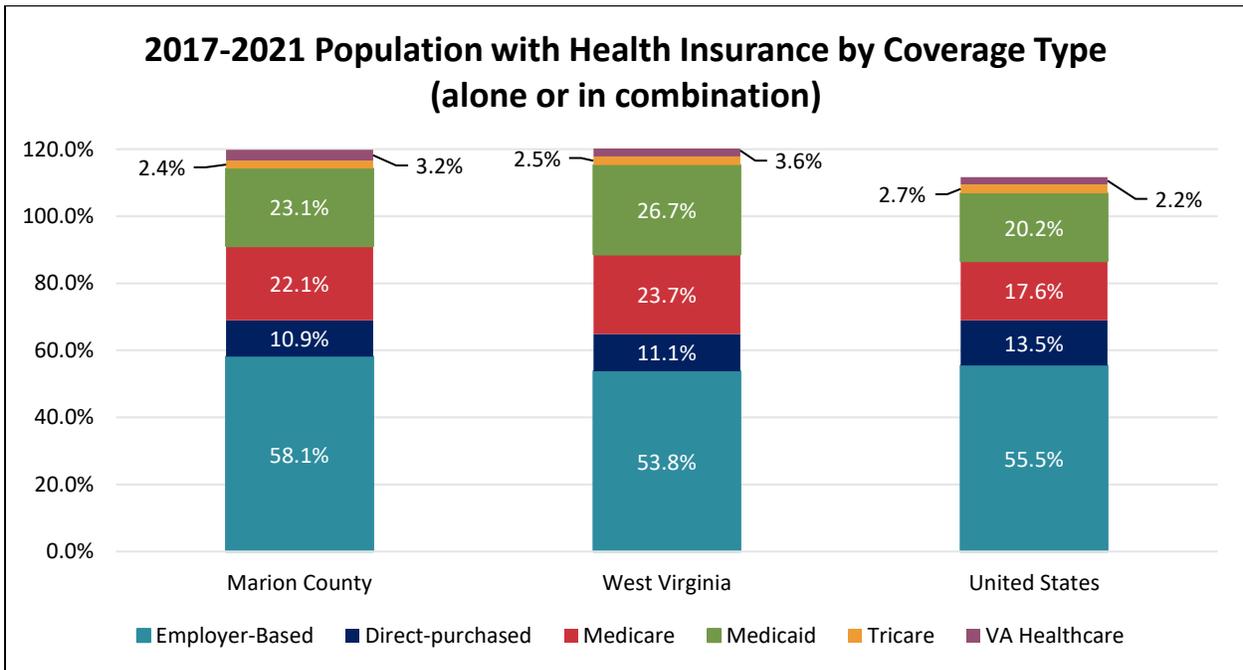
While most Marion County residents have health insurance, there is a relatively high percentage of children under 6 years who are uninsured, and this percentage doubled from 2020 (5.7%) to 2021 (11.4%). As identified in earlier findings, this trend is driven almost exclusively by events in Worthington zip code 26591. Approximately 34% of residents in Worthington, 26591 do not have health insurance, including nearly 75% of children (n=287) under age 6. This disparity appears to reflect a recent trend starting in 2020 and is worth exploring for potential pandemic-related factors and opportunity for education regarding subsidized health insurance options.



Source: US Census Bureau, American Community Survey



Source: US Census Bureau, American Community Survey



Source: US Census Bureau, American Community Survey

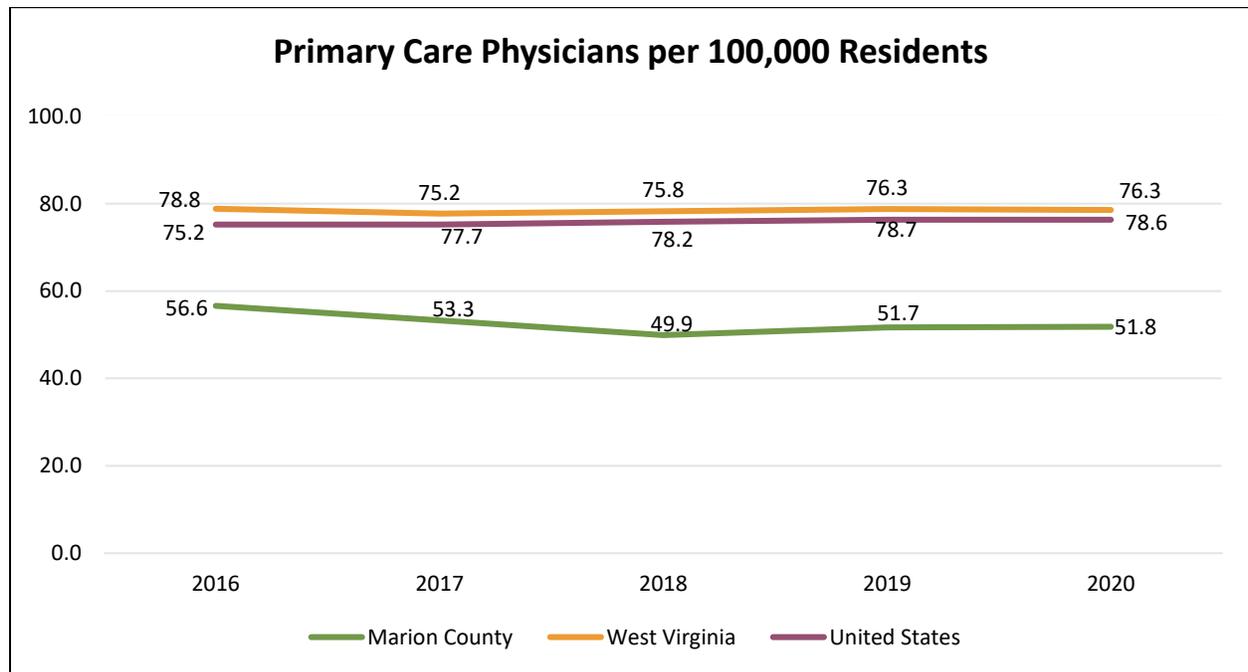


Having health insurance does not ensure access to healthcare when it is needed. Many other factors—like affordability, transportation, language, provider availability, and trust—keep people from receiving the care they need. It is important to continue to seek feedback on residents’ experiences of these factors and their impact on people’s ability to receive high quality and timely care.

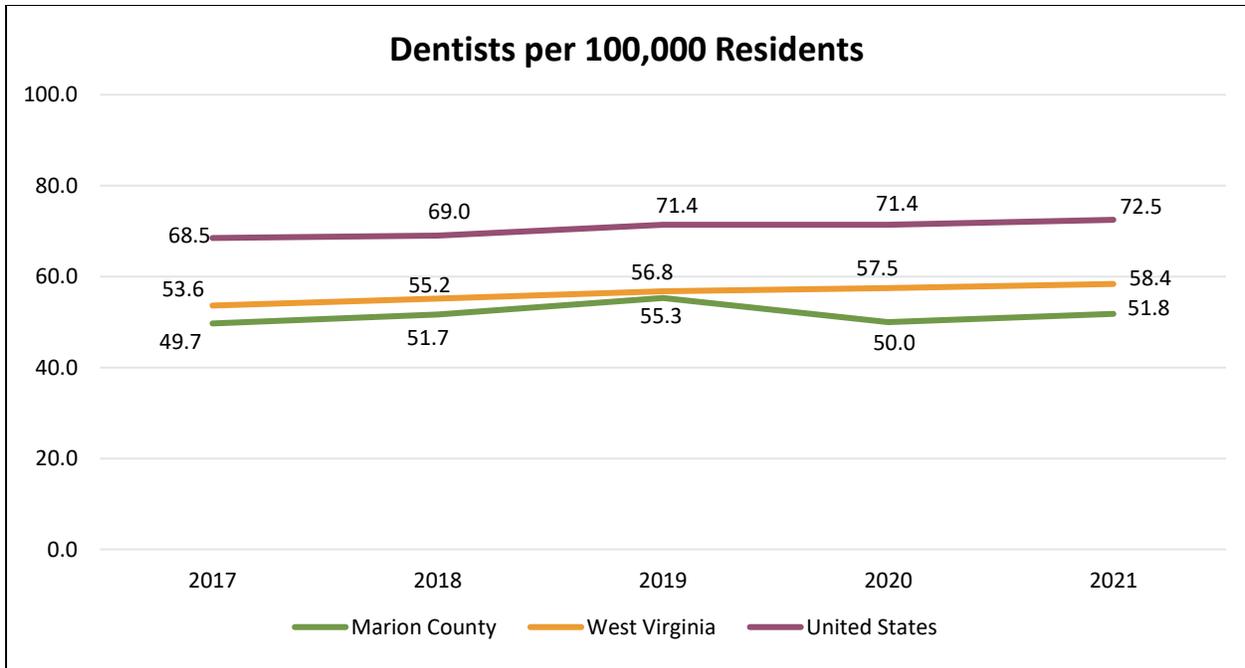
There is an opportunity to grow primary and preventive care services within Marion County. The county has fewer primary care and dental providers than the state and nation and is a Health Professional Shortage Area (HPSA) for these services for individuals with low income.

Despite a lack of doctors, adult residents of Marion County are more likely to report preventive visits within the last year than their peers across the state and nation. When analyzed by zip code, the proportion of adults receiving preventive visits is generally consistent across the county, despite differences in socioeconomics.

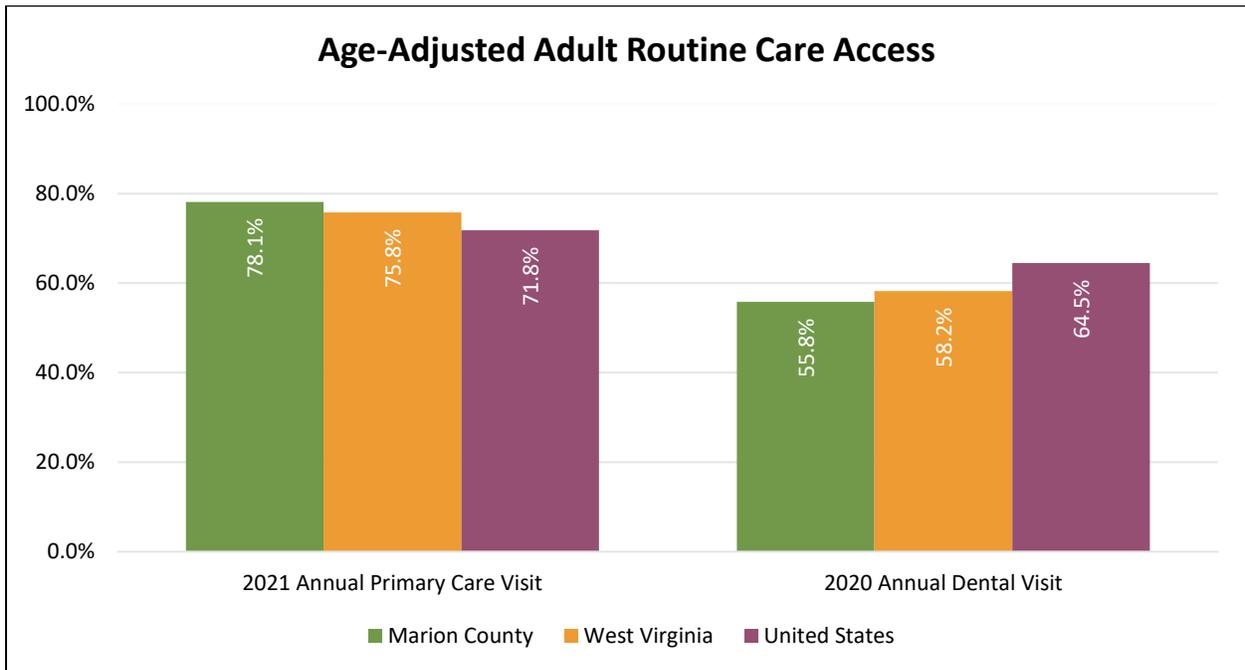
West Virginia, including Marion County, has fewer dental providers than the nation overall. This factor, combined with historically lower dental insurance coverage for residents, has contributed to fewer people receiving regular preventive care. In 2020, fewer than 56% of Marion County adults had a routine dental visit compared to 64.5% of adults nationally. When analyzed by zip code, residents of the western portion of the county are less likely to receive dental services than other county residents. **A new state law that took effect in 2021 offers dental benefits for adults aged 21 or older who are enrolled in West Virginia Medicaid, which may improve future dental access and oral health.**



Source: Health Resources & Services Administration



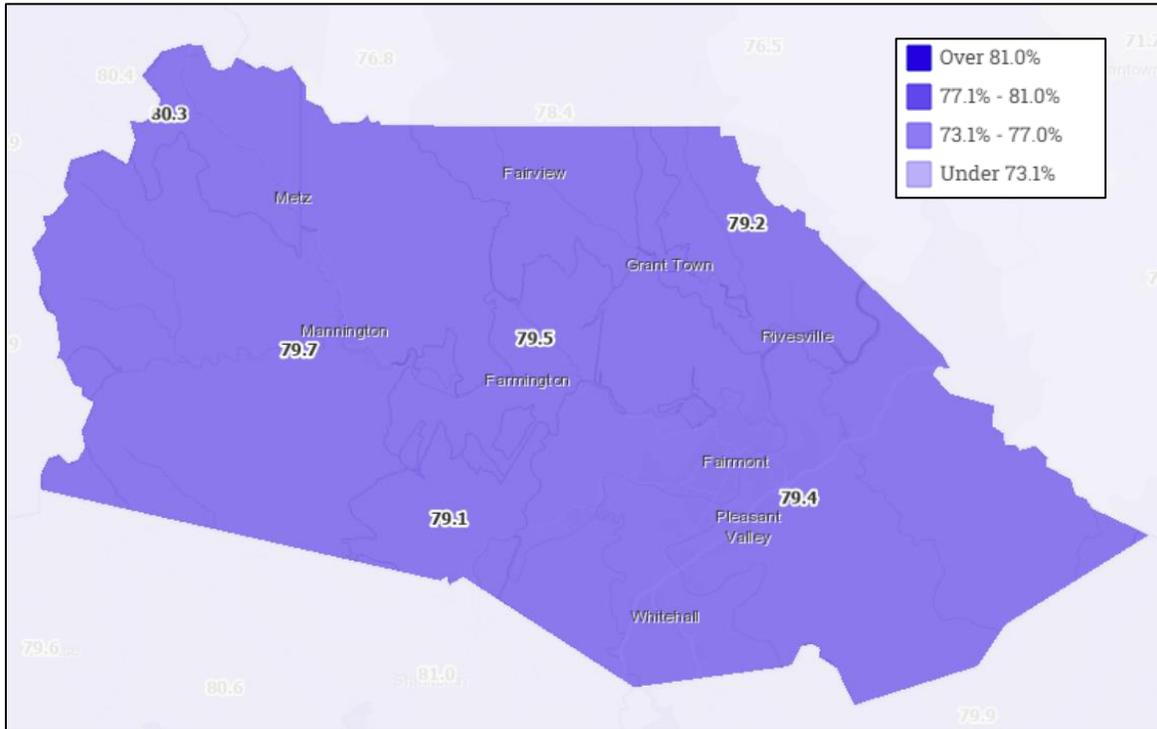
Source: Health Resources & Services Administration



Source: Centers for Disease Control and Prevention

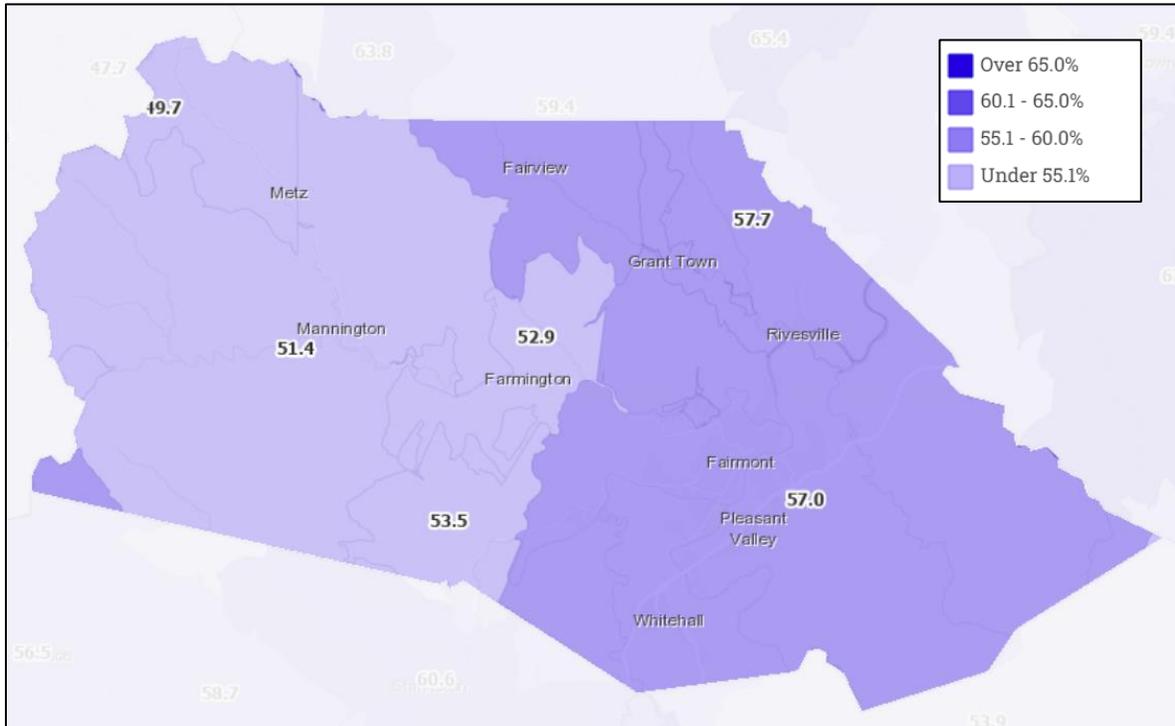


2021 Adults with a Primary Care Visit Within the Past Year by Marion County Zip Code



Source: Centers for Disease Control and Prevention & Center for Applied Research and Engagement Systems

2020 Adults with a Dental Care Visit Within the Past Year by Marion County Zip Code



Source: Centers for Disease Control and Prevention & Center for Applied Research and Engagement Systems



Health Risk Factors and Chronic Disease

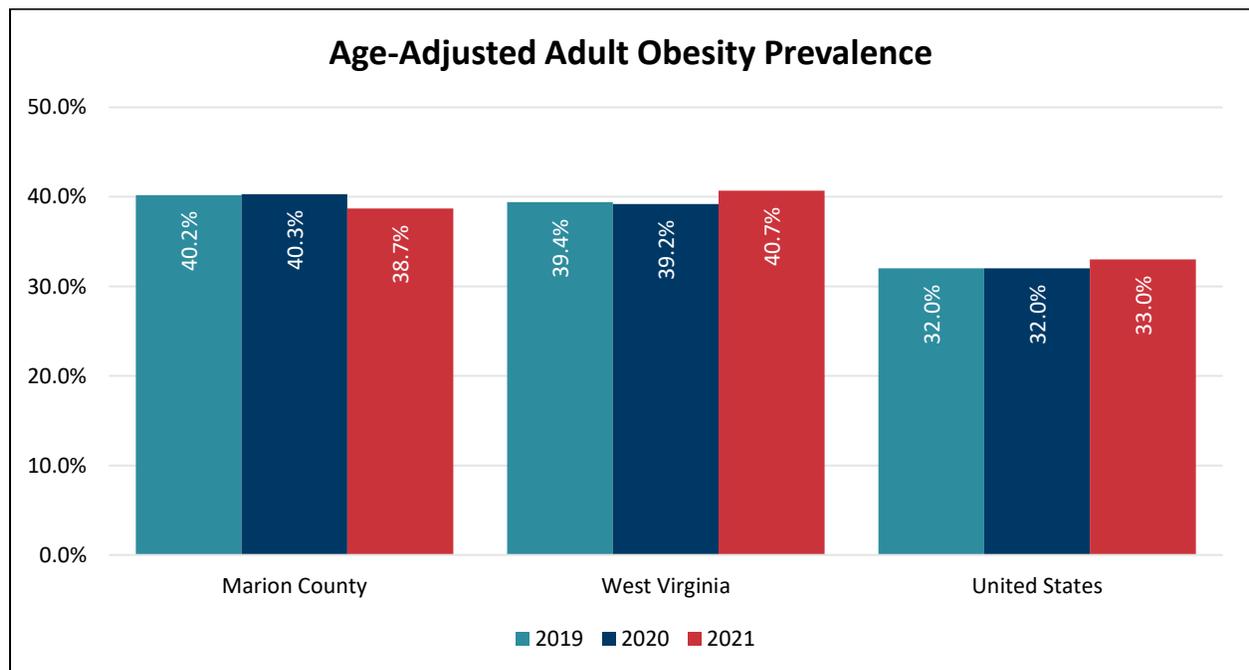
Prior to COVID-19, the leading causes of death for US residents were chronic diseases. **West Virginia and Marion County residents have historically experienced more chronic disease and higher death rates due to these conditions than their peers nationally.**

Type 2 diabetes is a largely preventable condition and the most expensive chronic condition in the US. Approximately \$1 out of every \$4 in US healthcare costs is spent on diabetes care. While Marion County adults have a slightly lower prevalence of diabetes (12%) than the state (13%), both areas exceed the nation (10%). Diabetes death rates follow similar trends, exceeding the national rate by 10-20 points.

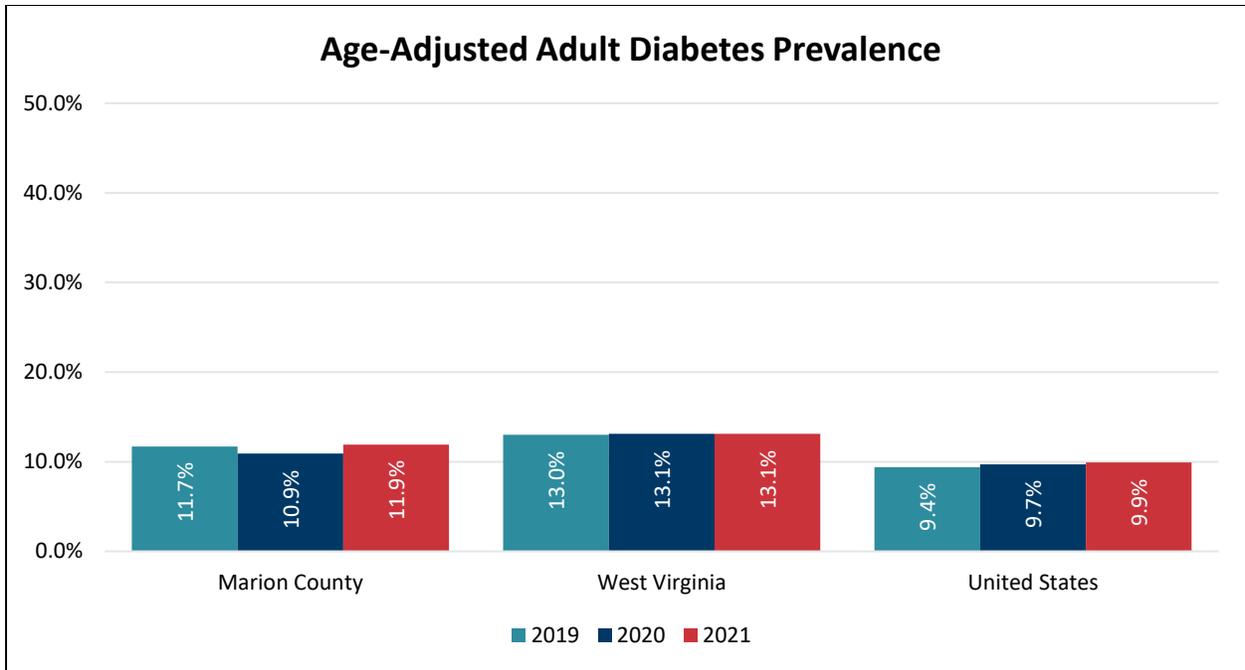
Heart disease is consistently a leading cause of death nationwide. Heart disease risk factor findings, as well as historical heart disease death rate trends, indicate a higher burden of disease among Marion County residents and potential barriers to care. The Marion County heart disease death rate exceeds the statewide rate and is approximately 40% higher than the national rate.

More than 1 in 5 Marion County adults report smoking and approximately 1 in 10 adults have been diagnosed with asthma and/or COPD. The Marion County chronic lower respiratory disease (CLRD) death rate is similar to the state overall and both exceed the national rate.

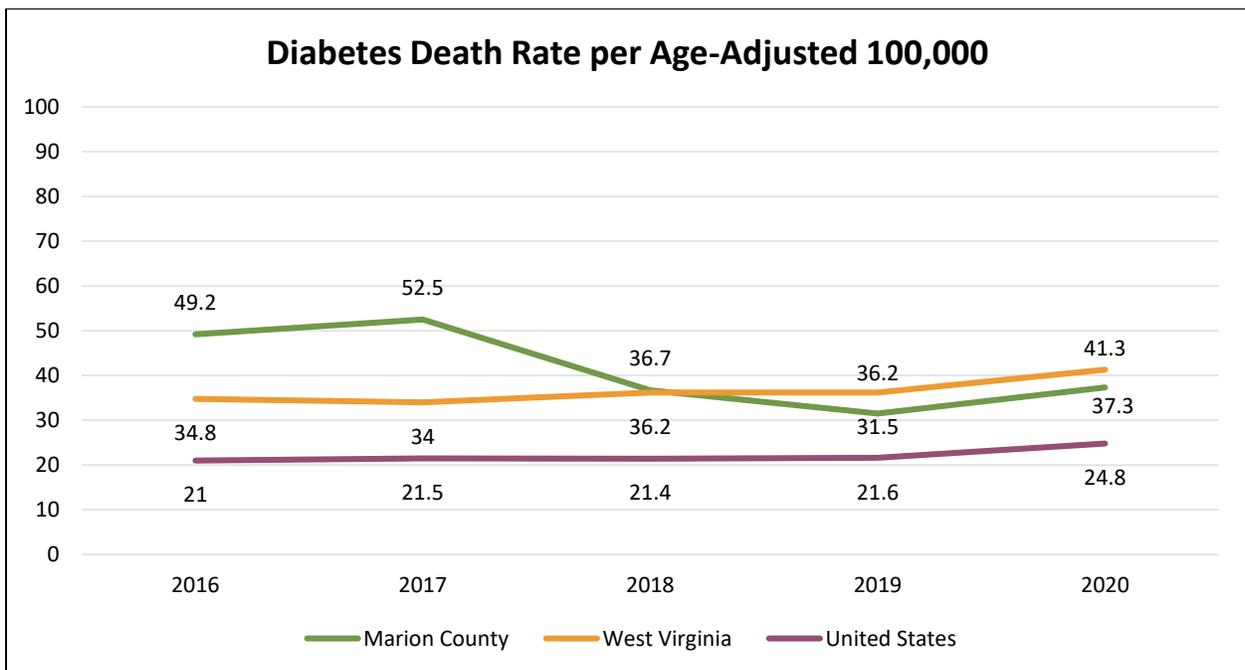
Many forms of cancer respond well to treatment if identified in an early stage. Both incidence and death from cancers are higher in Marion County than the nation and death rates have trended up in recent years. This suggests there is an opportunity to increase access and availability to cancer screenings to better identify and treat the condition at an earlier stage. Consistent with having higher smoking rates, lung cancer is the top cause of cancer death in Marion County.



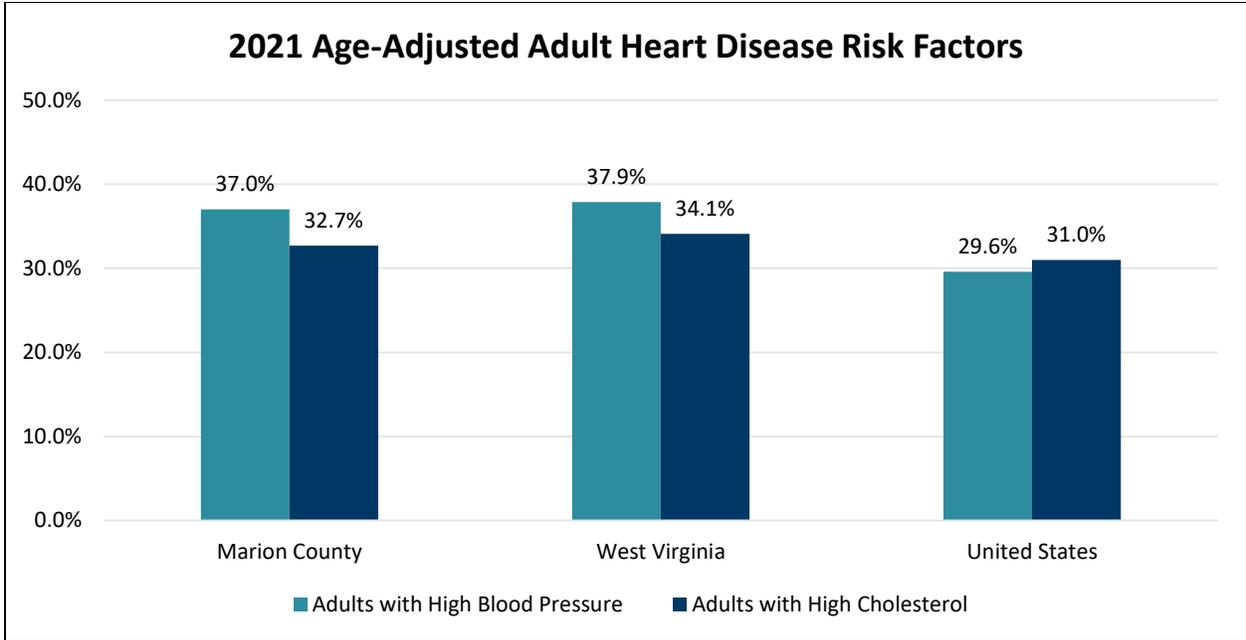
Source: Centers for Disease Control and Prevention



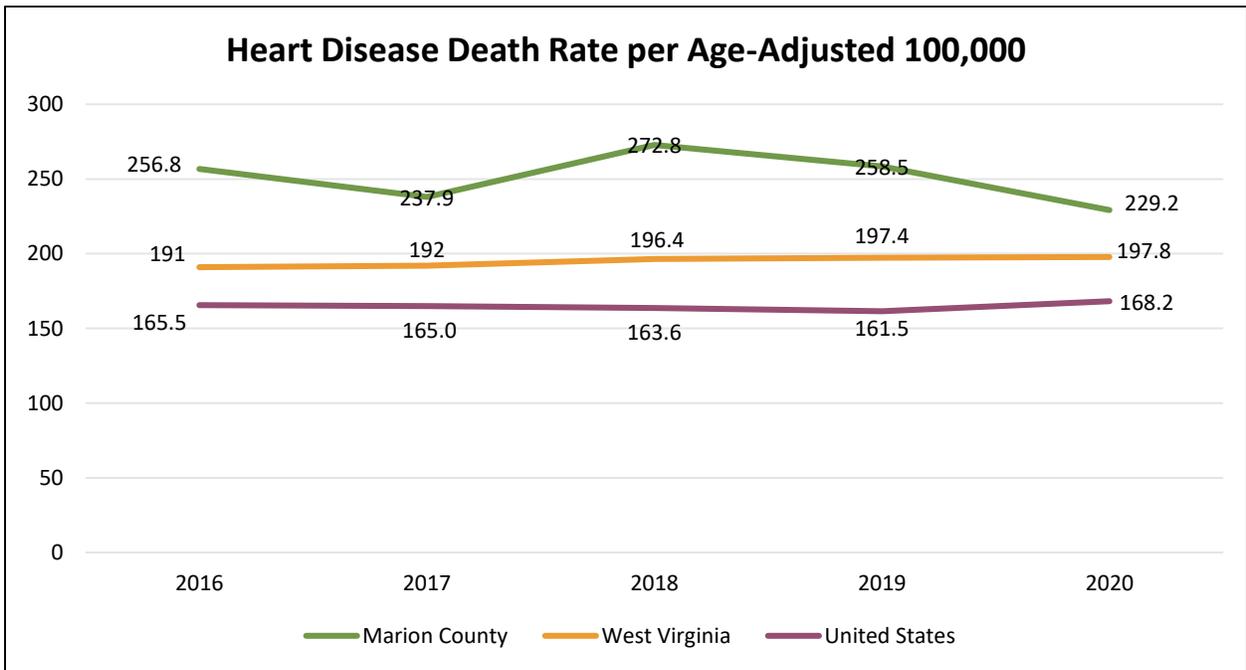
Source: Centers for Disease Control and Prevention



Source: Centers for Disease Control and Prevention



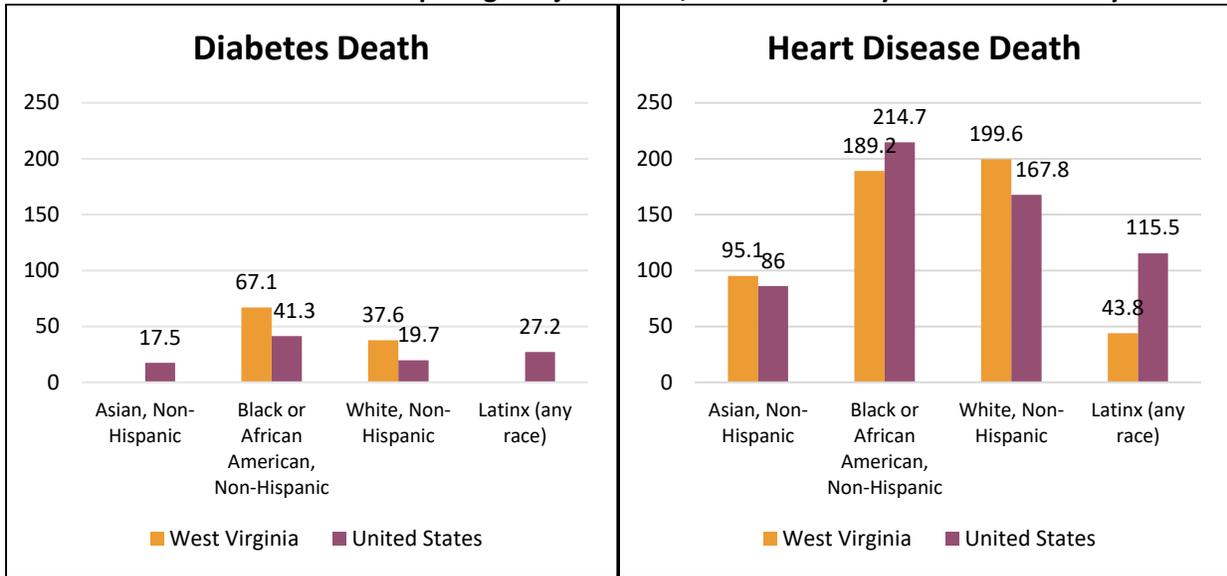
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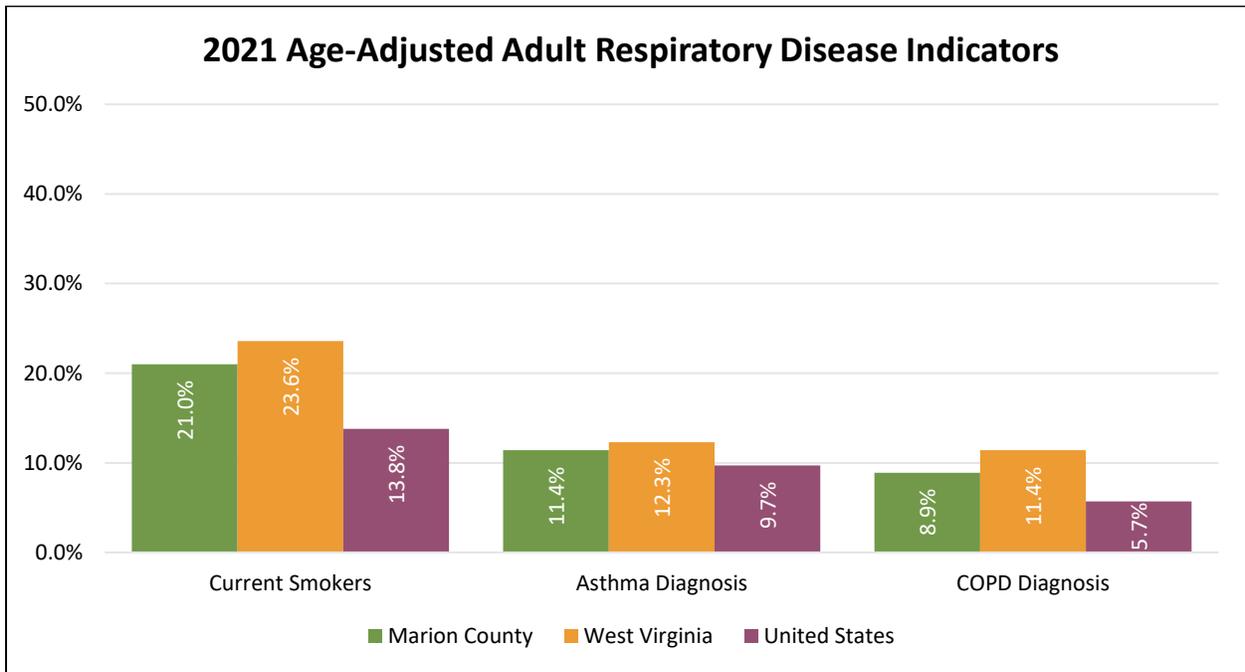
Source: Centers for Disease Control and Prevention



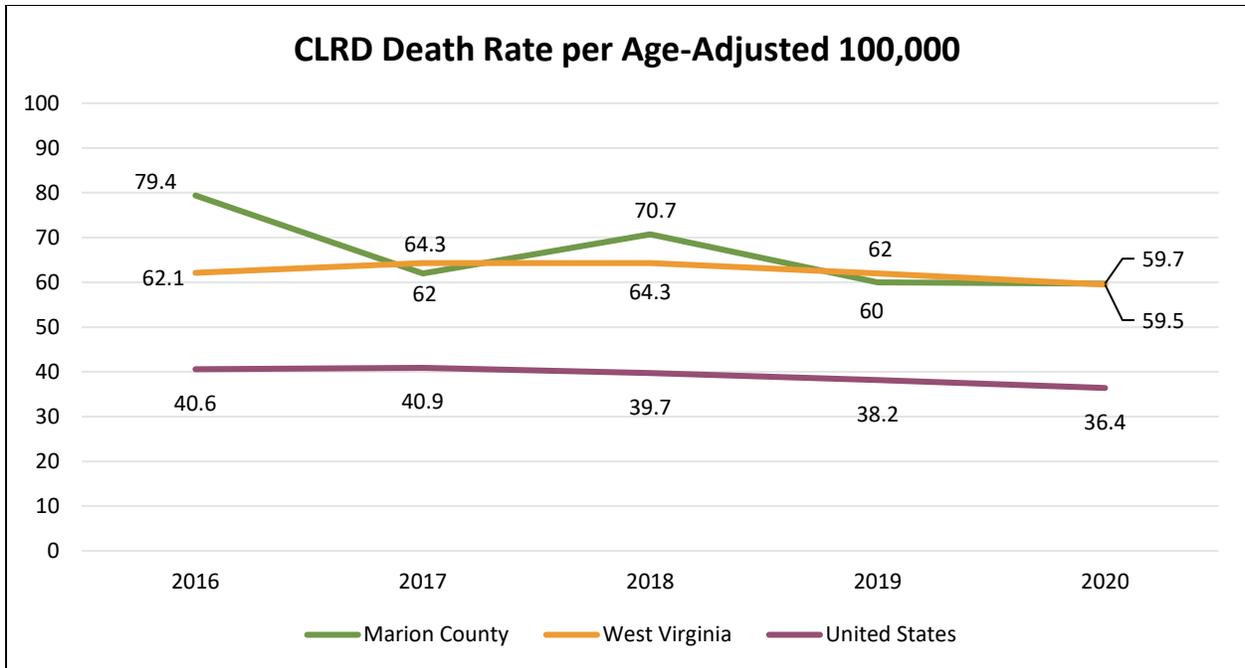
2018-2020 Death Rates per Age-Adjusted 100,000 Residents by Race and Ethnicity



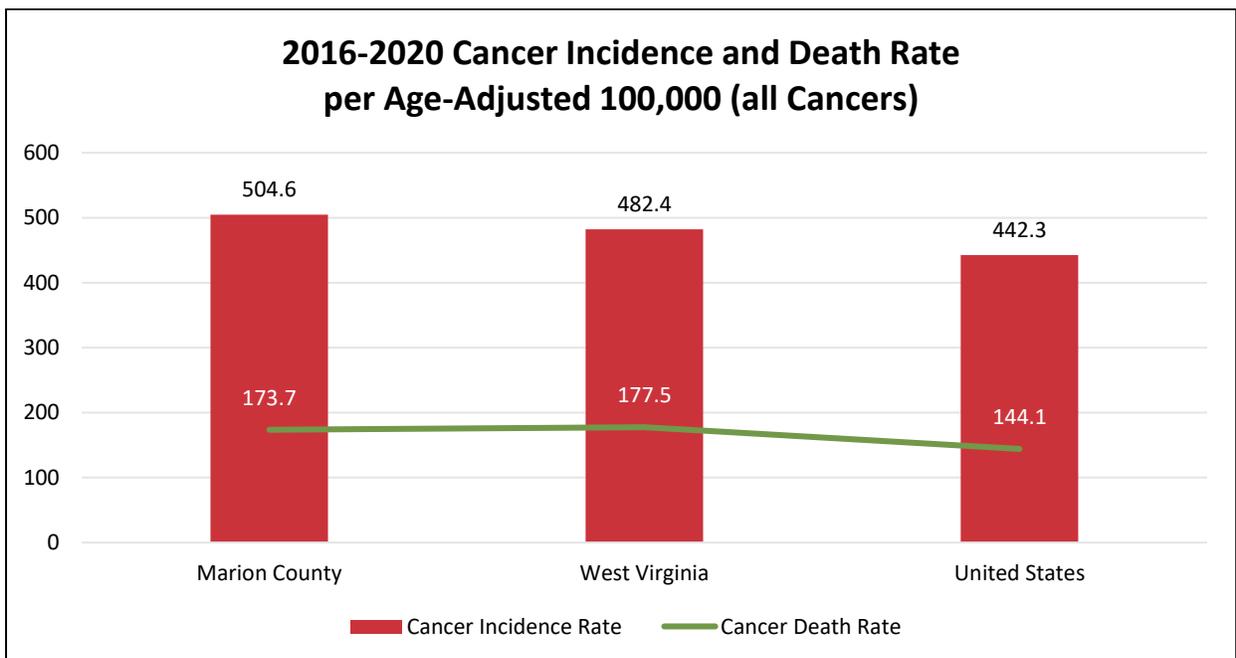
Source: Centers for Disease Control and Prevention
 Note: Data are provided as available.



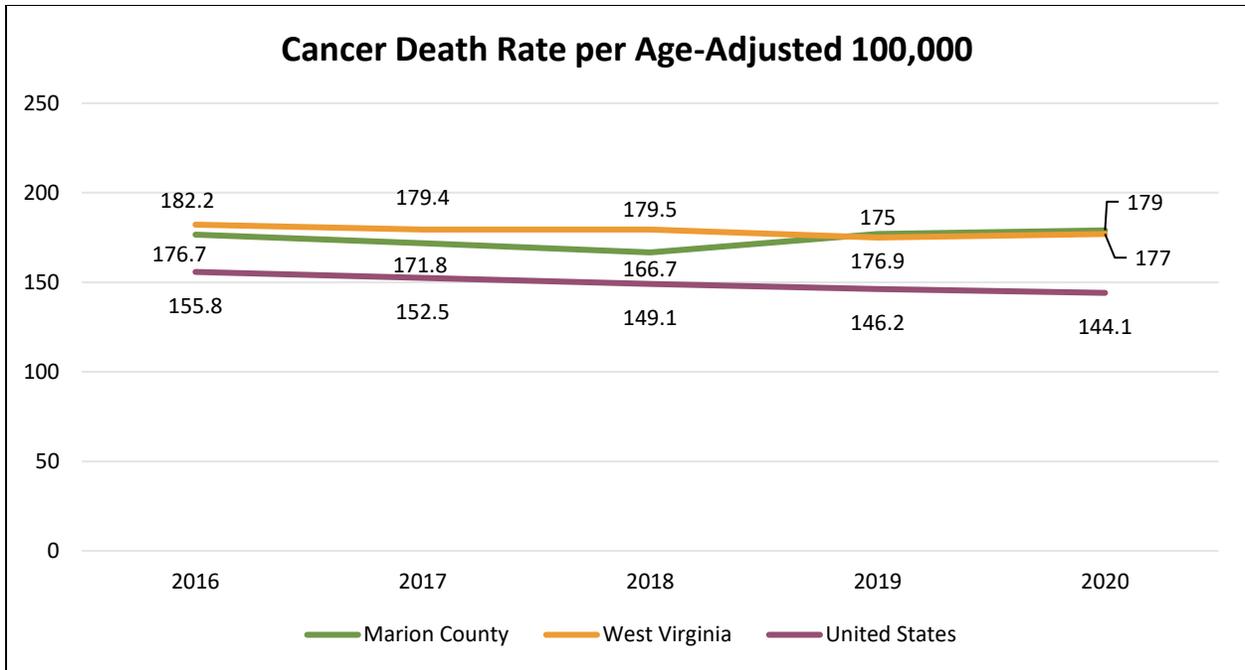
Source: Centers for Disease Control and Prevention



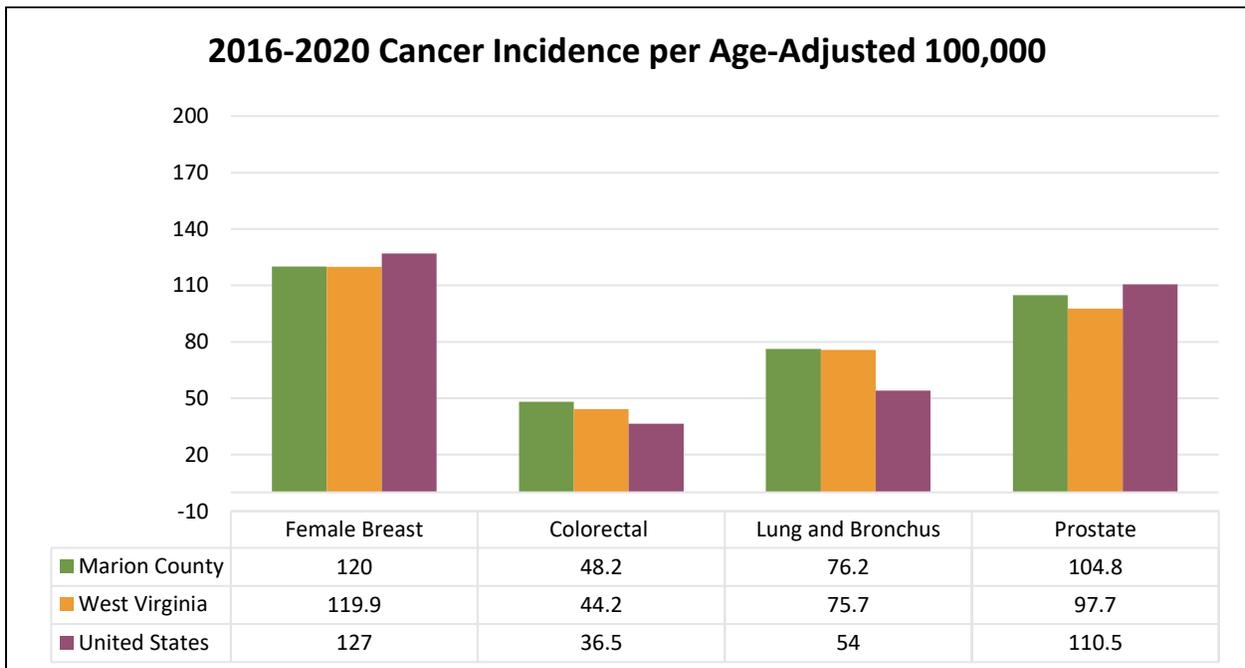
Source: Centers for Disease Control and Prevention



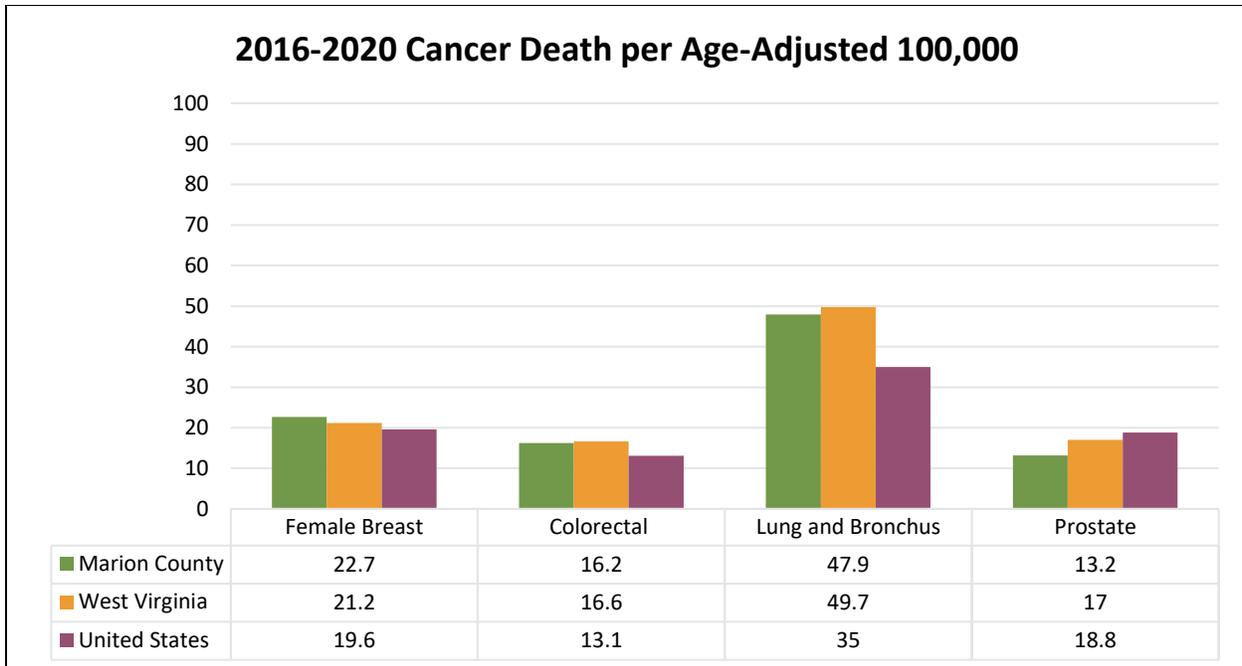
Source: West Virginia Department of Health and Human Resources & Centers for Disease Control and Prevention



Source: Centers for Disease Control and Prevention



Source: West Virginia Department of Health and Human Resources & Centers for Disease Control and Prevention



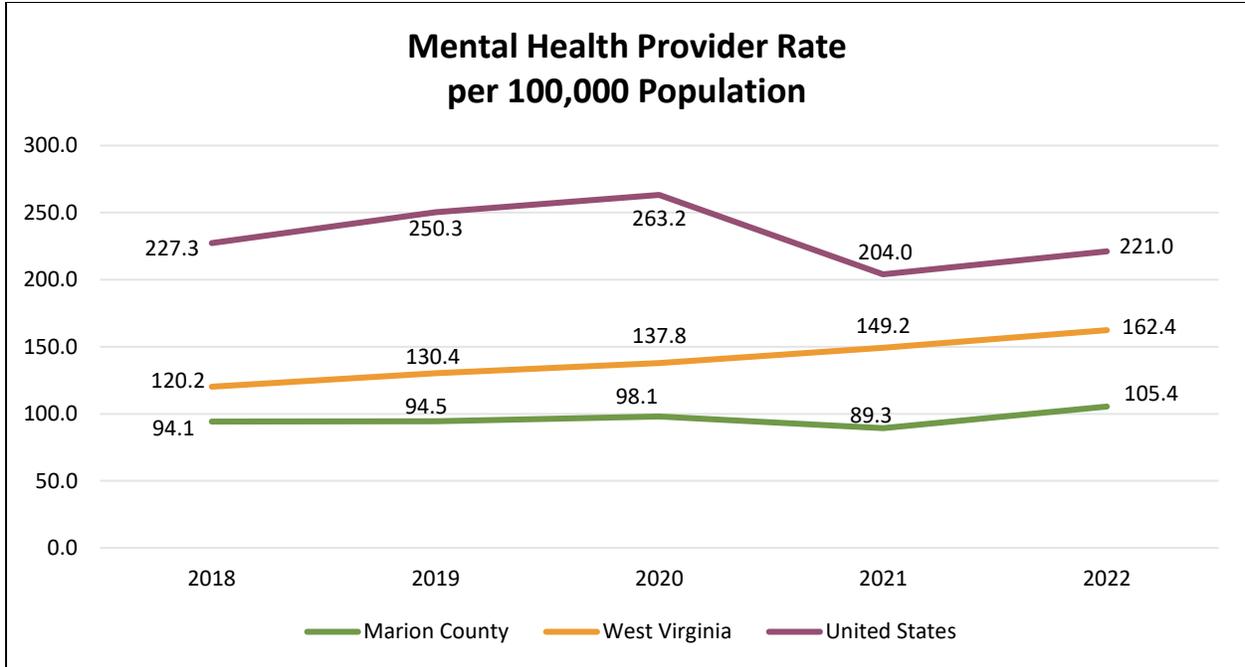
Source: Centers for Disease Control and Prevention

Mental Health and Substance Use Disorder

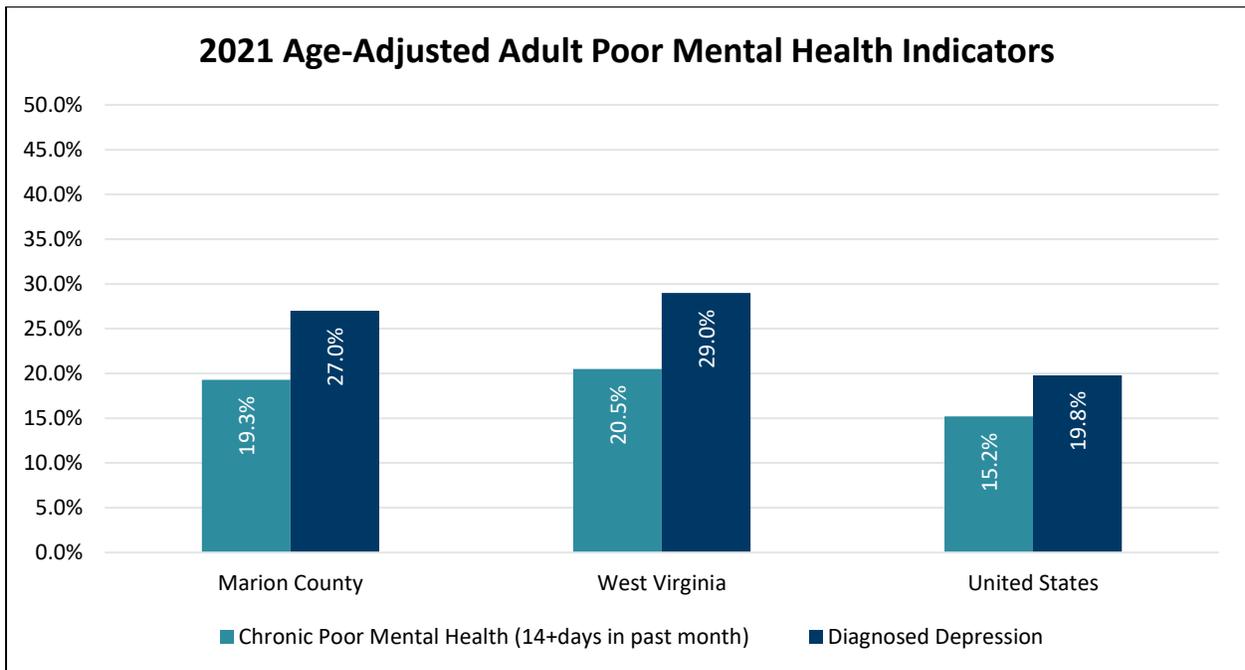
Mental health concerns like depression and anxiety can be linked to social drivers like income, employment, and environment, and can pose risks of physical health problems by complicating an individual’s ability to keep up other aspects of their healthcare and well-being.

Social service and healthcare agencies are consistently reporting difficulty hiring and retaining mental health providers since COVID-19, a problem that is especially exacerbated in more rural communities. Marion County has fewer mental health providers than the state and nation, and the entire county is a HPSA for individuals with low income.

There is a need for mental health providers in Marion County as community residents suffer disproportionately poor mental health. Consistent with West Virginia overall and exceeding national averages, 1 in 5 Marion County adults report having chronically poor mental health, and 27% report having been diagnosed with depression. The suicide death rate, while lower than the statewide rate, is 20% higher than the national rate. **When analyzed by zip code, the proportion of adults reporting frequent mental distress is consistently high across the county, crossing geographic and socioeconomic boundaries.**



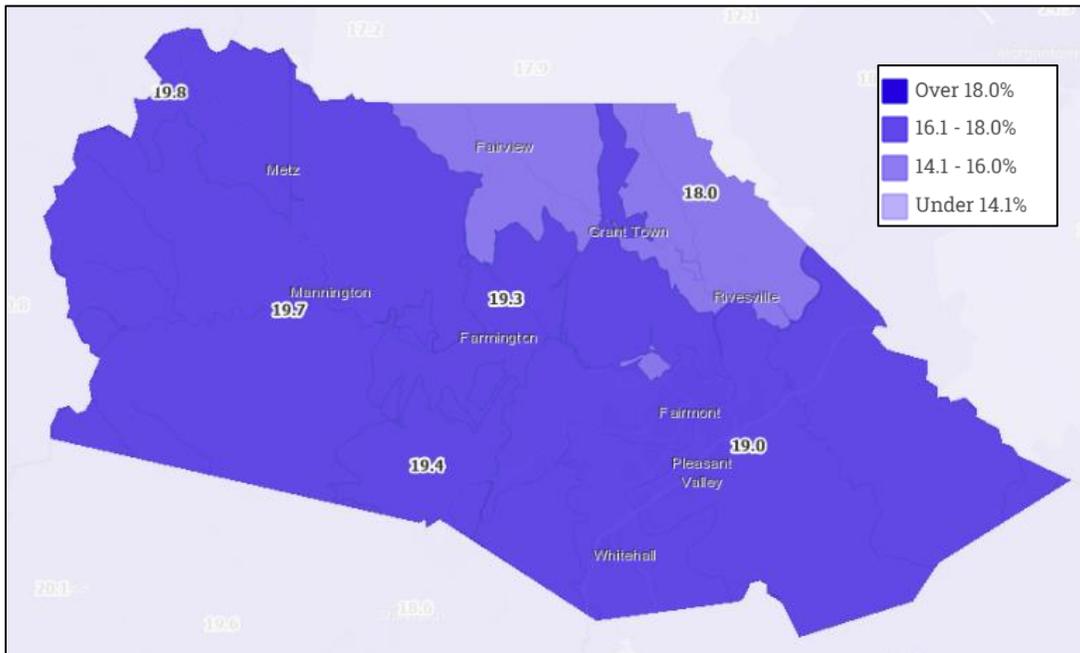
Source: Centers for Medicare and Medicaid Services



Source: Centers for Disease Control and Prevention

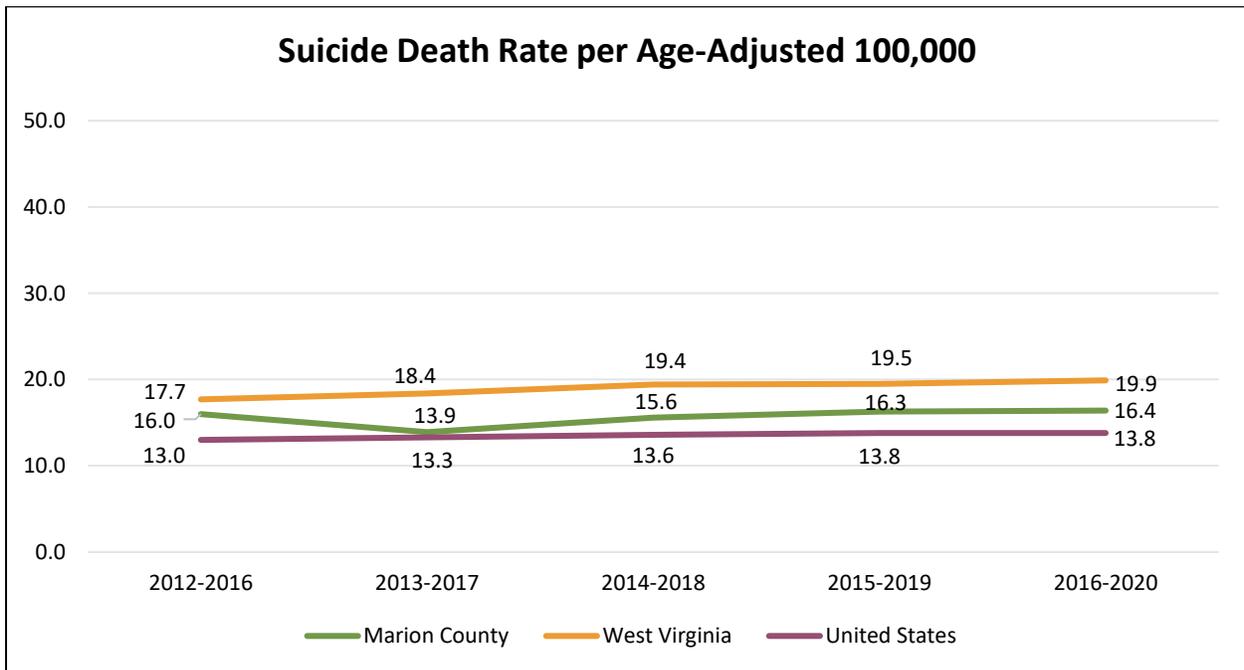


2021 Adults with Chronic Poor Mental Health by Marion County Zip Code



Source: Centers for Disease Control and Prevention & Center for Applied Research and Engagement Systems

Suicide Death Rate per Age-Adjusted 100,000



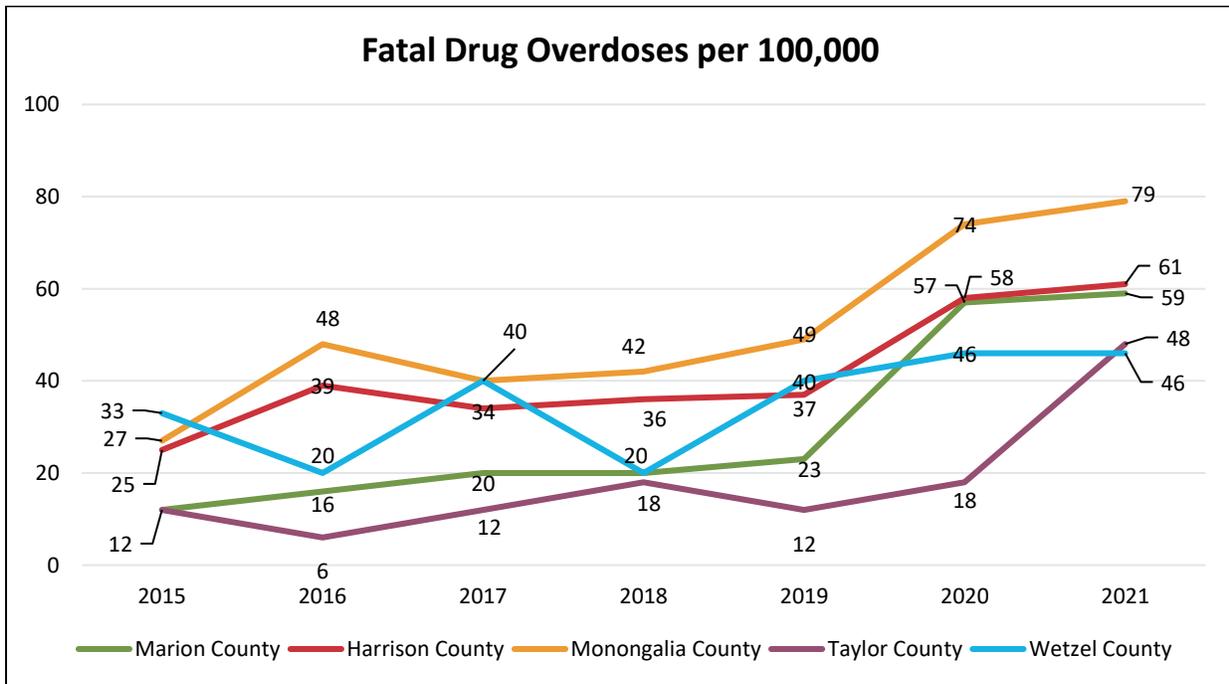
Source: Centers for Disease Control and Prevention

West Virginia was deeply affected by the opioid crisis. A 2019 US Justice Department article stated, “West Virginia is the epicenter of the opioid crisis, with the highest age-adjusted rate of opioid overdose deaths in the country.” The graph below displays fatal overdoses (any drug) occurring in Marion County and surrounding communities in the region since 2015.

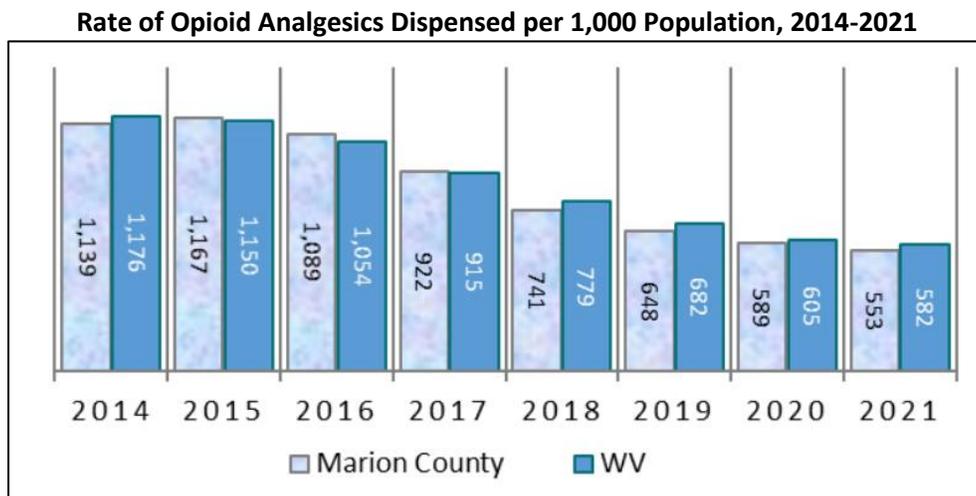


Marion County had the second lowest fatal overdose death rate in the region from 2015 to 2019, but the death rate spiked in 2020 and 2021, likely due in part to pandemic influences. It is worth noting that the death rate had been increasing steadily even before the pandemic. Fentanyl overdoses accounted for 82% of all fatal drug overdoses in Marion County in 2021.

The opioid crisis generally started with increased prescribing of opioids in the 1990s, with prescription opioids comprising the largest proportion of all overdose deaths at this time. Efforts to reduce opioid prescriptions have been successful. **Since 2014, there has been a 53% decrease in opioid prescriptions in West Virginia.** A similar trend is seen in Marion County.



Source: West Virginia Department of Health & Human Resources Office of Drug Control Policy



Source: West Virginia Department of Health and Human Resources



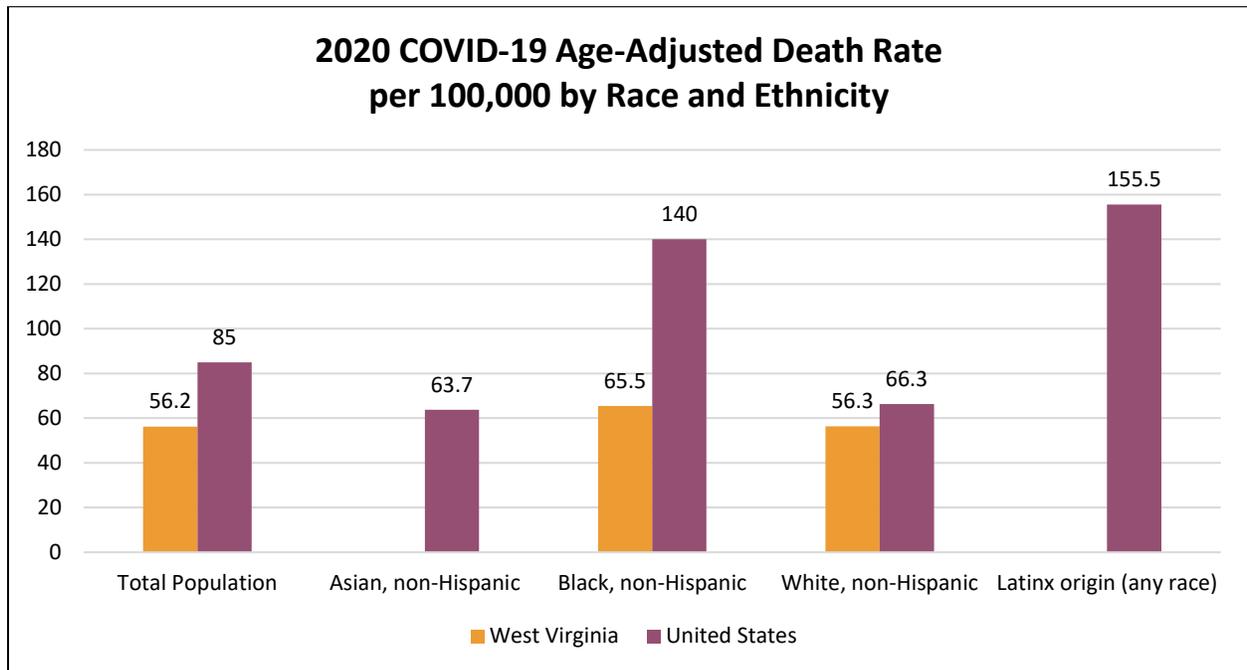
COVID-19

The COVID-19 pandemic both highlighted and deepened socioeconomic and health inequities and exposed disparities within the health and social service systems. The pandemic has not impacted all people equally. Rather, certain structural issues—population density, low income, crowded workplaces, etc.—contribute to higher levels of spread and worse outcomes from COVID-19, and potentially other infectious diseases.

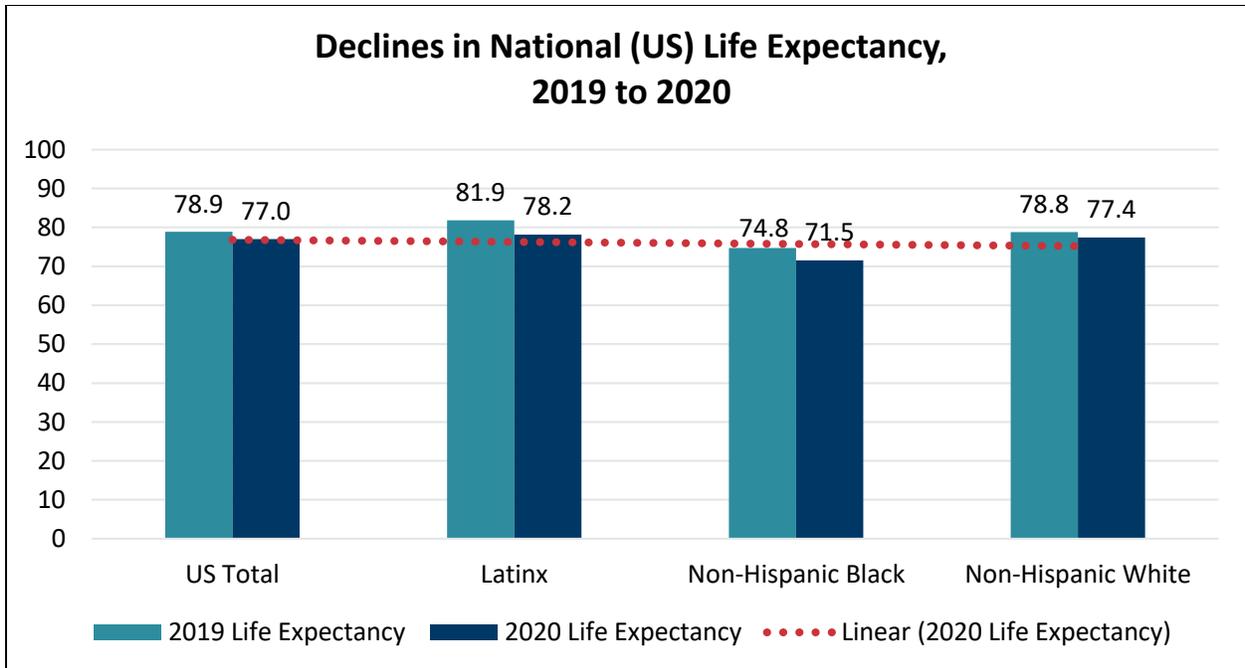
Life expectancy is an overall measure of health and social equity within a community. Structural factors, including housing quality and affordability, environmental conditions, employment, education, transportation, food security, and experience of racism, all play a role in impacting the quality and length of lives. While localized data on the impacts of COVID-19, including overall life expectancy, are not available, statewide and national trends illustrate significant disparities and inequities.

Nationwide in 2020, death due to COVID-19 was experienced by Black and Latinx people at a rate more than double that of any other reported population group. Data for West Virginia are more limited but also demonstrate a higher rate of death for Black people as compared to white people.

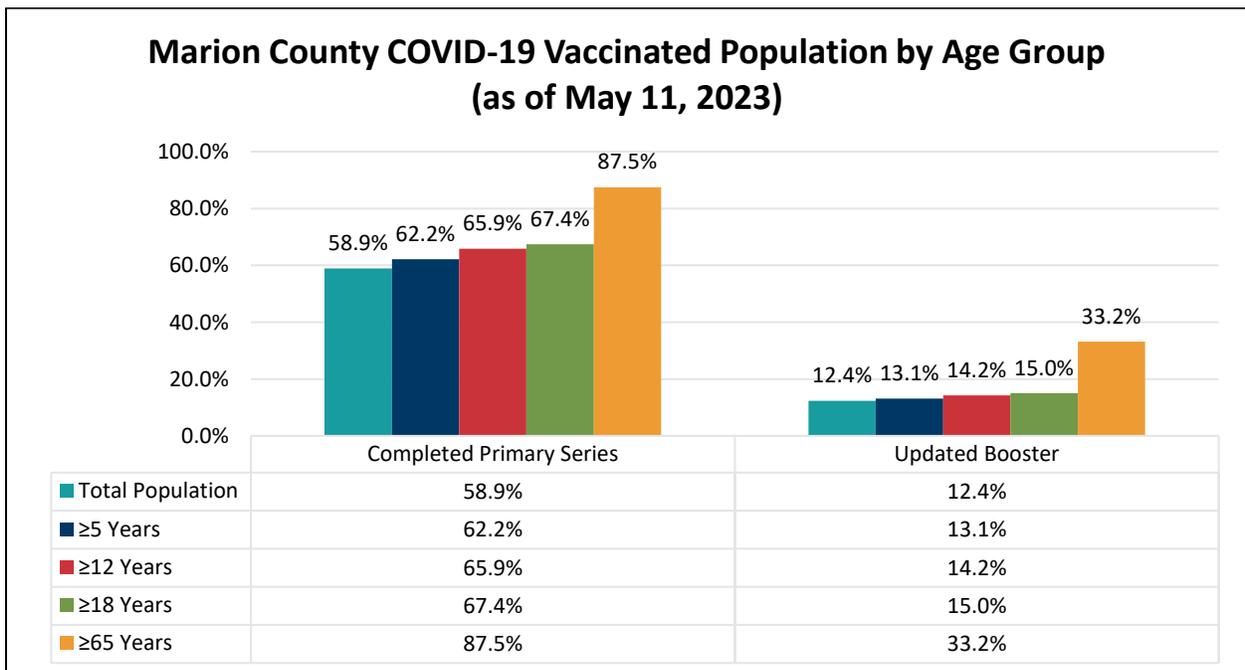
Black and Latinx groups also experienced the largest declines in life expectancy from 2019 to 2020, losing approximately 3-4 years. As of 2020, Black people have the lowest overall life expectancy at 71.5 years, 5.5 years below the average for all citizens, and closer to 6 years below any other single group.



Source: Centers for Disease Control and Prevention
Note: Data are reported for West Virginia as available.



Source: Centers for Disease Control and Prevention



Source: Centers for Disease Control and Prevention



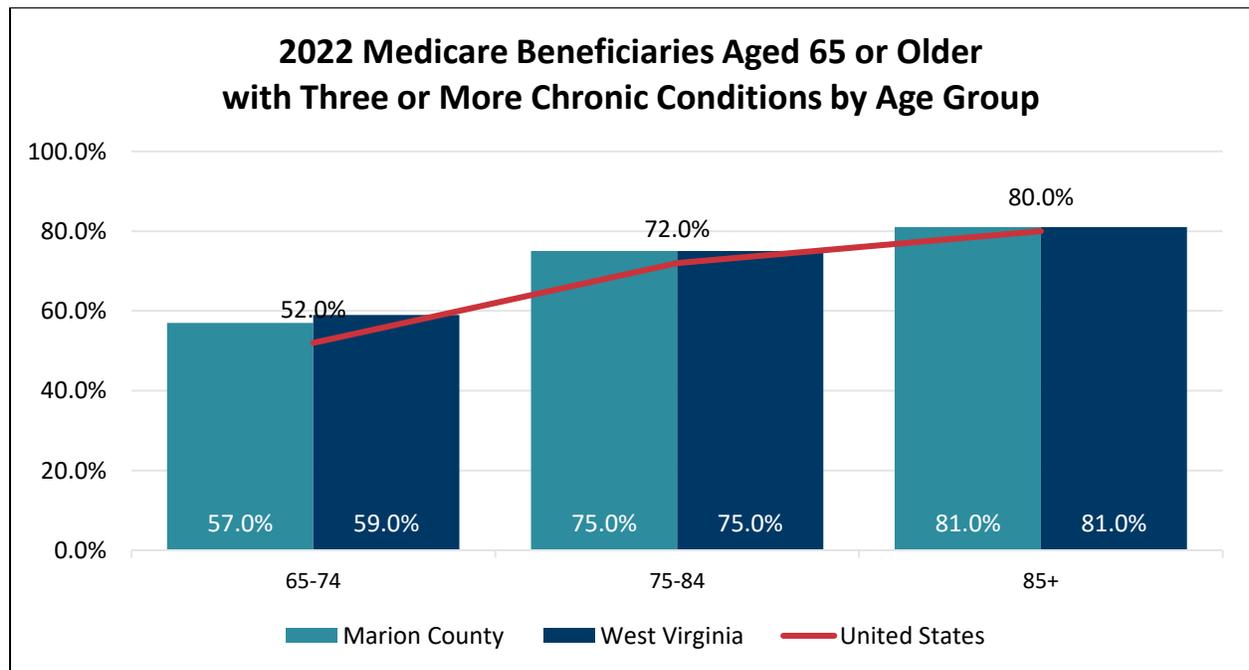
Populations of Special Interest

Aging Population

Older adults are generally considered a population placed at risk due to increased chronic disease prevalence, risk of social isolation, and economic instability, among other factors. Adhering to recommended schedules for preventive care can help reduce the burden of disease, limit healthcare utilization and associated costs, and improve quality of life for older adults.

Nationally, among Medicare beneficiaries aged 65 years or older, the most common chronic conditions are hypertension, high cholesterol, and arthritis. Those trends persist in Marion County, with hypertension and high cholesterol affecting two-thirds or more of Medicare beneficiaries aged 65+, and rheumatoid arthritis affecting more than one-third of beneficiaries.

Healthcare utilization and care costs increase significantly with a higher number of reported chronic diseases, due in part to increased emergency department (ED) visits and hospital readmissions. **Across Marion County in 2022, between 57% and 81% of Medicare beneficiaries reported three or more chronic conditions with higher prevalence among older age groups.** Compounding disease prevalence issues is a higher proportion of older adult residents of Marion County who experience disability and/or live alone, potentially affecting disease management efforts.



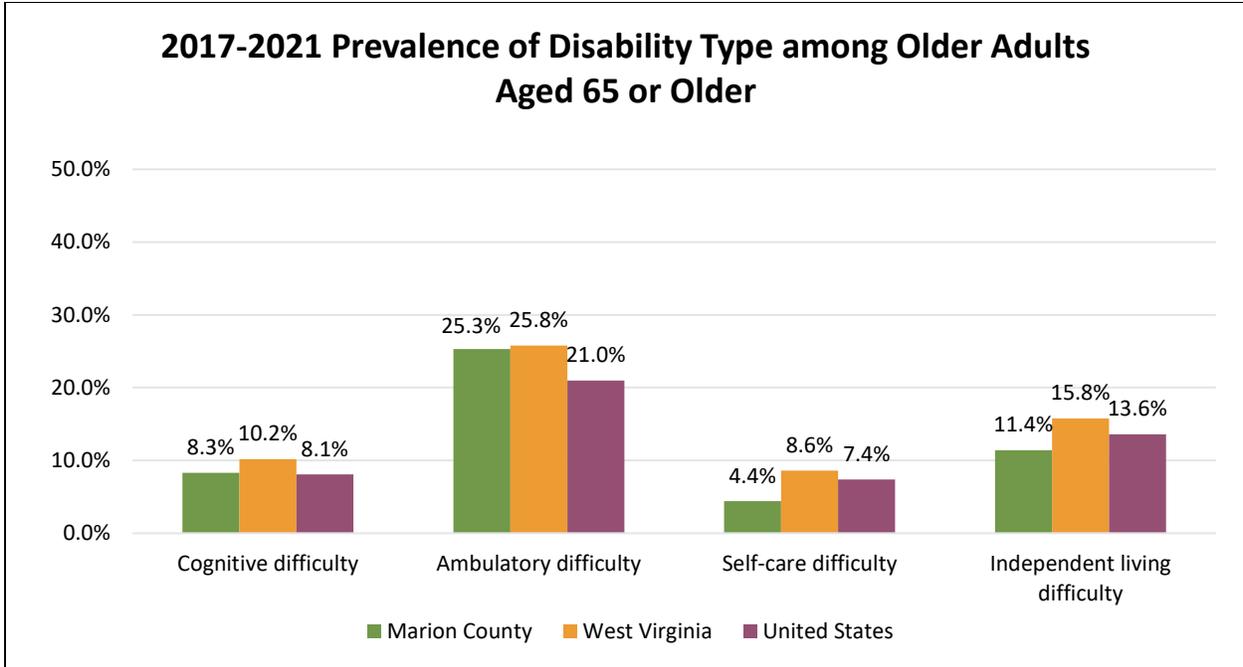
Source: Centers for Medicare & Medicaid Services



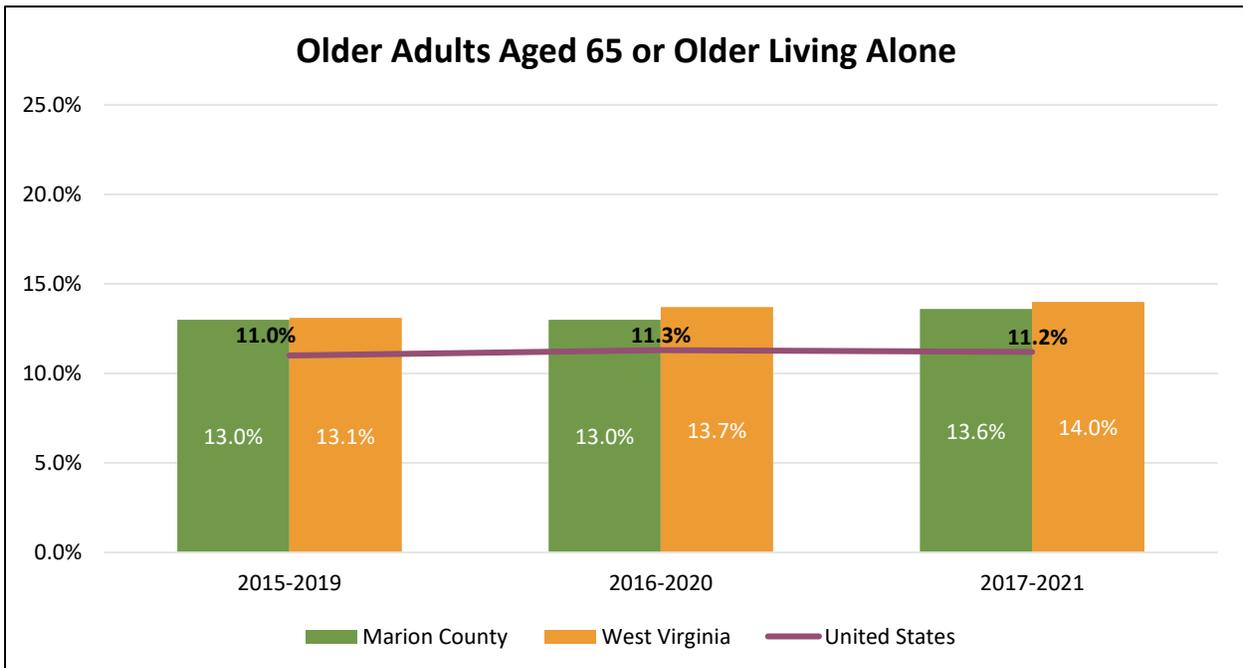
2022 Select Chronic Conditions among Medicare Beneficiaries

Aged 65-74 Years	Marion County	West Virginia	United States
Alzheimer's disease, related disorders, senile dementia	3%	3%	2%
Depression	18%	18%	15%
Diabetes	26%	29%	23%
High cholesterol	61%	63%	59%
Hypertension	61%	64%	58%
Obesity	23%	25%	21%
Rheumatoid arthritis	36%	34%	30%
Aged 75-84 Years	Marion County	West Virginia	United States
Alzheimer's disease, related disorders, senile dementia	9%	9%	9%
Depression	18%	19%	18%
Diabetes	31%	33%	29%
High cholesterol	74%	74%	73%
Hypertension	78%	79%	76%
Obesity	20%	22%	20%
Rheumatoid arthritis	47%	44%	40%
Aged 85 Years or Older	Marion County	West Virginia	United States
Alzheimer's disease, related disorders, senile dementia	26%	25%	25%
Depression	21%	22%	22%
Diabetes	28%	29%	27%
High cholesterol	70%	70%	70%
Hypertension	84%	85%	84%
Obesity	11%	12%	11%
Rheumatoid arthritis	51%	49%	46%

Source: Centers for Medicare & Medicaid Services



Source: US Census Bureau, American Community Survey



Source: US Census Bureau, American Community Survey



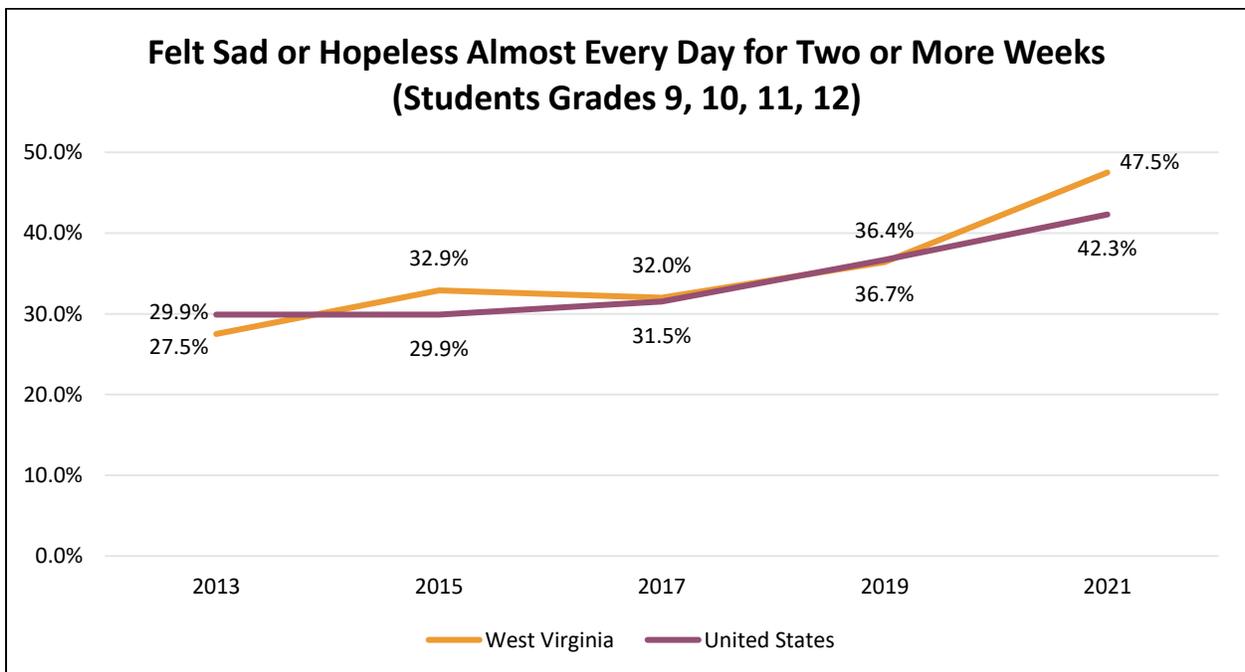
Youth

The Youth Risk Behavior Surveillance System (YRBSS) measures health-related behaviors and experiences that can lead to poor health outcomes for youth now and as adults. The survey is conducted every other odd year among students in grades 9 through 12. Results help monitor health trends, identify emerging issues, and plan and evaluate programs that can help improve adolescent health.

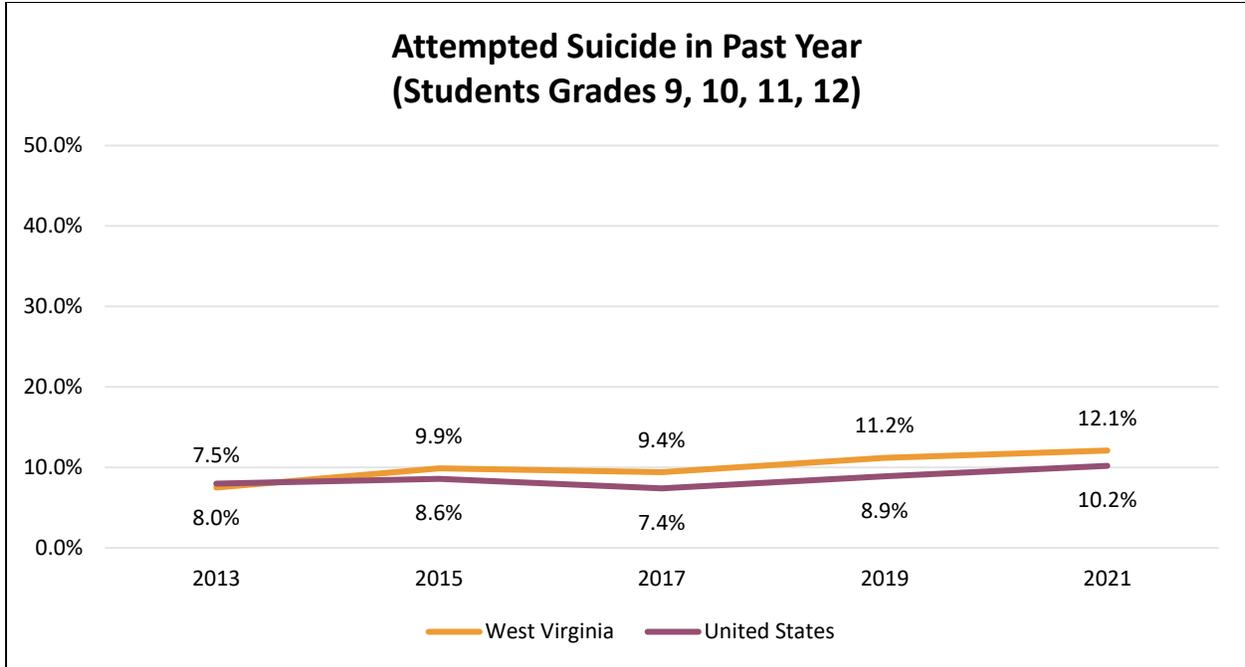
The YRBSS measures diverse youth health behaviors and conditions and related experiences. The following survey results reflect key emerging needs for West Virginia youth, including mental health and substance use. Results are reported statewide based on availability.

West Virginia students have historically reported poorer mental health than their peers nationwide, including chronic poor mental health and more suicide attempts. **In 2021, more than 12% of West Virginia high school students reported an attempted suicide, an increase from 7.5% in 2013.**

Suicide attempts among youth may be due in part to consistent feelings of sadness or hopelessness. **The proportion of West Virginia students feeling consistently sad or hopeless increased 20 points from 2013 to 2021, from 27.5% to 47.5%.**

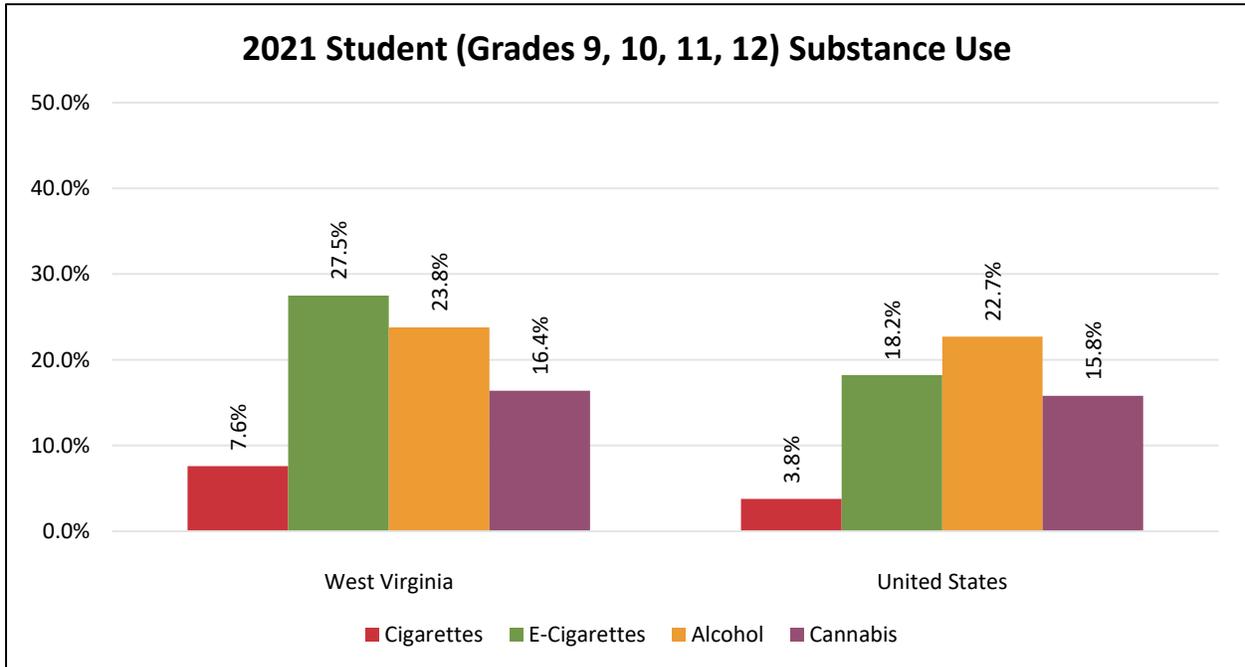


Source: Centers for Disease Control and Prevention

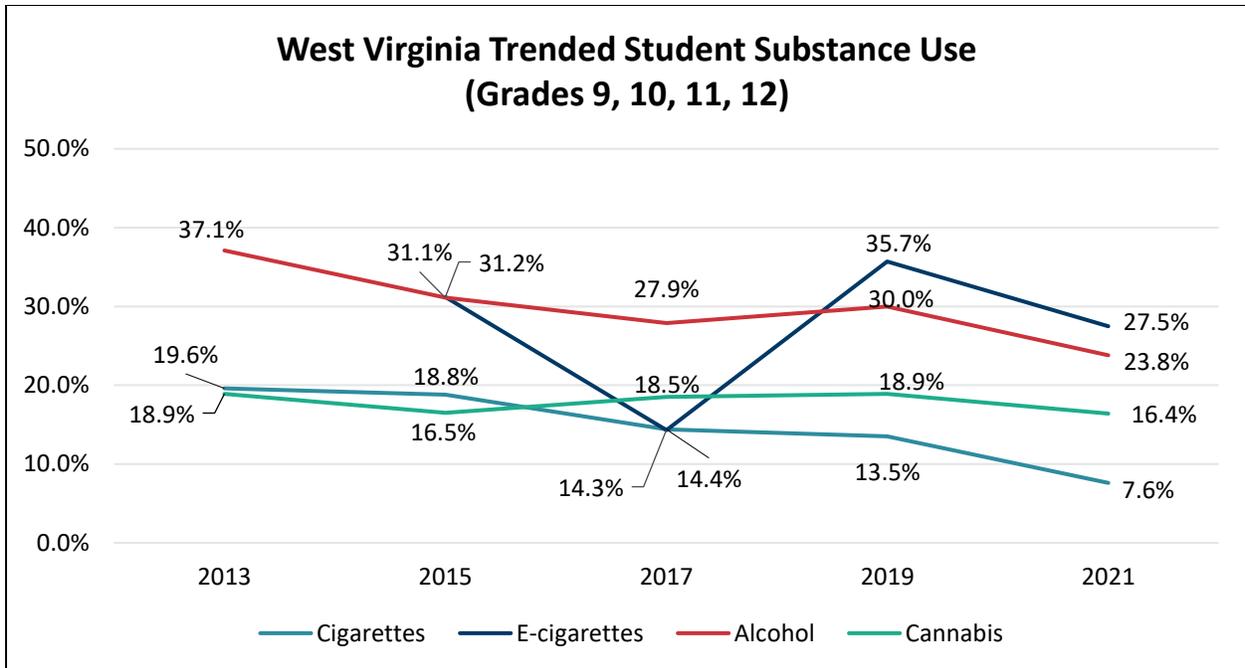


Source: Centers for Disease Control and Prevention

West Virginia high school students generally report higher use of substances, including traditional cigarettes, e-cigarettes, alcohol, and cannabis, than their peers across the nation. However, overall use of these substances has generally declined. **The proportion of West Virginia high school students using traditional cigarettes and/or alcohol declined 12-13 percentage points from 2013 to 2021.** Reported substance use showed a marked decline from 2019 to 2021, potentially reflecting pandemic influences.



Source: Centers for Disease Control and Prevention



Source: Centers for Disease Control and Prevention

Pregnancy, Birth, and Babies

Having a healthy pregnancy is the best way to have a healthy birth. According to the March of Dimes, infants born to mothers who have not received prenatal care have an infant death rate five times the rate of infants born to mothers accessing prenatal care starting in the first trimester of pregnancy.

Marion County generally does well to facilitate access to early, first trimester prenatal care, and the county has fewer teen births and low birth weight births than the state overall. There is an opportunity to improve rates of smoking during pregnancy. Smoking prevalence among adults in the county and state is higher than across the rest of the nation, a trend that continues among pregnant people. **Within Marion County and West Virginia overall, 20%-21% of people reportedly continued to smoke during pregnancy, compared to only 5.5% nationwide.**

Black birthing people and babies have the worst outcomes across the state and nation compared to any other racial group. These outcomes include lower access to prenatal care, more low birth weight births, and higher infant and maternal death rates. While more local data on these outcomes are not available, and the local Black population is small, it would be remiss not to note these trends and learn from efforts in other places to reduce these disparities.

2020 All Births and Birth Rate per 1,000 Population

	Count	Birth Rate per 1,000
Marion County	557	10.0
West Virginia	17,327	9.7
United States	3,613,647	11.0

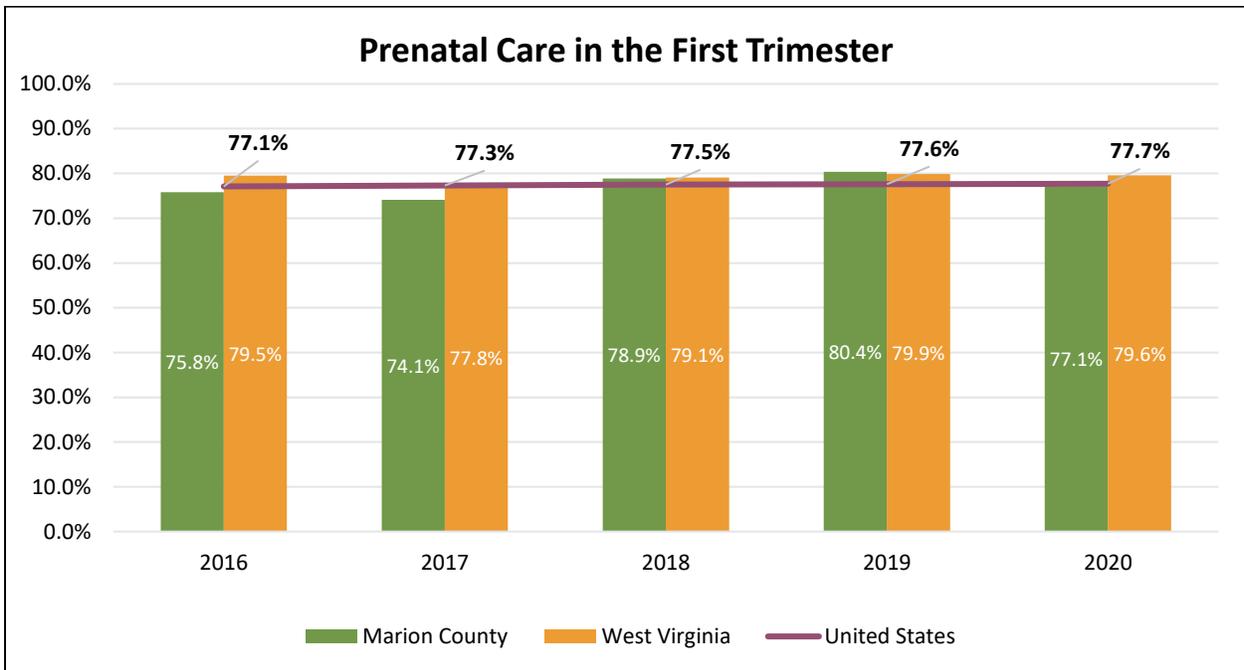
Source: West Virginia Department of Health and Human Resources & Centers for Disease Control and Prevention



2020 Maternal and Infant Health Indicators

	Teen (15-19) Births	First Trimester Prenatal Care	Low Birth Weight Births	Tobacco Use during Pregnancy
Marion County	3.9%	77.1%	8.4%	20.3%
West Virginia	6.6%	79.6%	9.3%	21.3%
Black/African American	NA	69.2%	15.4%	NA
White	NA	80.3%	9.0%	NA
United States	4.4%	77.7%	8.2%	5.5%
Black/African American	6.4%	68.4%	14.1%	4.5%
White	3.0%	82.8%	6.8%	8.1%
HP2030 Goal	NA	80.5%	NA	4.3%

Source: West Virginia Department of Health and Human Resources & Centers for Disease Control and Prevention

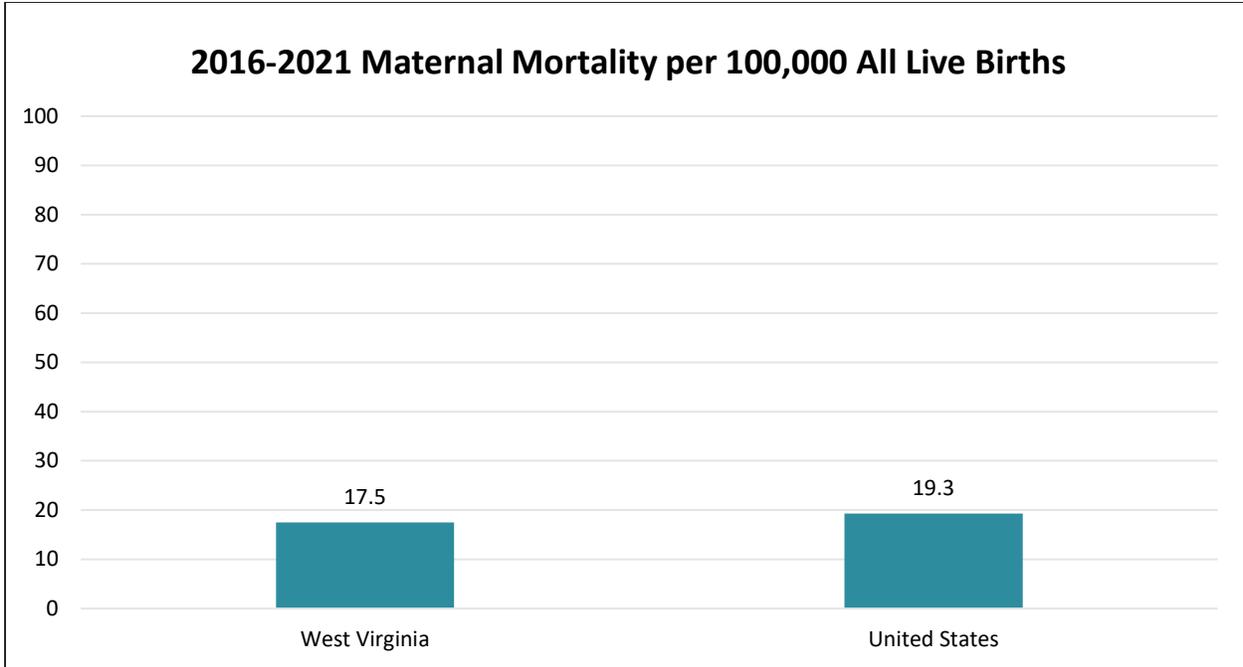


Source: West Virginia Department of Health and Human Resources & Centers for Disease Control and Prevention

2020 Infant Death per 1,000 Live Births

	Infant Deaths
Marion County	NA
West Virginia	7.6
HP2030 Goal	5.0

Source: West Virginia Department of Health and Human Resources



Source: America's Health Rankings

Research findings from secondary data analysis were compared to public input survey findings to compare perceptions to statistical data and contextualize data trends and contributing factors for identified health needs.



Public Input Survey

Mon Health partnered with West Virginia University's Office of Health Affairs (WVU OHA) to complete a public input survey in 2022. The survey captured feedback from residents of Marion and Monongalia counties. Survey topics included questions about specific health issues, thoughts on overall health of the community, quality of life, access to healthcare and medical needs (including specialist care), risky behaviors and personal choices, experiences during the COVID-19 pandemic, and demographic information including geographic location and income.

Data was collected anonymously from residents aged 18 or older. The survey was disseminated via a web-based platform. Collection efforts included reaching residents via social media and with assistance from the hospital's marketing team. Mon Health Medical Center also used their electronic medical record messaging platform to target patients by zip code and increase survey response.

The survey was not intended to be a representative, scientific sample of residents of Marion and Monongalia counties, but rather a convenience mechanism to solicit the community's perception of health needs. Survey responses were anonymous, and respondents could skip any question(s) they chose. A total of 1,945 surveys were completed by adult residents from the area, including 403 surveys by Marion County residents. Survey limitations included disproportionately low representation from males, from the lower-income population of these counties, and from non-white community members.

Survey Results

The following tables show the top identified concerns by all survey participants and Marion County resident survey participants for the categories of health and disease, quality of life and environment, and risky behaviors and personal choice.

Identified health issues were largely consistent across participant groups with substance use and disorder by far the top identified concern by all survey participants (60%) and Marion County participants (65%). When analyzed by participant demographics, substance use and disorder was also the top identified health concern regardless of gender, race, income, or household type. Other consistent top concerns were adult obesity and mental health.

Topics related to quality of life and environment also shared a common theme with the cost of healthcare and medications seen as the top concern by more than half of all survey participants and Marion County survey participants. Other top concerns for Marion County participants were poverty and limited or no health insurance coverage.

Identified concerns related to personal choice and risky behaviors mirrored the above themes. Drug use, excessive alcohol use, lack of exercise, unhealthy eating choices, and child abuse and neglect were top concerns for survey participants.



When asked for open-ended suggestions to address these issues, those who took the survey provided the following themed responses (*Note: responses reflect all survey participants*):

- Access to care: including specialty care, wait times, and quality of care
- Substance use: rehabilitation facilities, support groups, education
- Physical activity: fitness space and programs, exercise-based social activities, active outdoor activities, increased walkability of infrastructure
- Cost of healthcare
- Nutrition-related topics: healthier restaurant and grocery store options, food assistance programs, nutrition education programs and classes

Public Input Survey – Health & Disease Feedback

Top Concerns	Percentage of All Survey Responses	Percentage of Marion County Resident Survey Responses
Drug and/or alcohol use	60%	65% (1)
Obesity	46%	44% (2)
Mental health problems	36%	34% (3)
Diabetes	24%	24% (5)
Cancers	22%	22% (6)
Aging problems	21%	29% (4)

Public Input Survey – Quality of Life and Environment Feedback

Top Concerns	Percentage of All Survey Responses	Percentage of Marion County Resident Survey Responses
Cost of healthcare and/or medications	61%	58% (1)
Lack of health insurance or limited coverage	30%	29% (3)
Limited affordable/quality housing	27%	18% (6)
Poverty	26%	35% (2)
Homelessness	22%	21% (5)
Limited organized activities for children and teens	18%	23% (4)

Public Input Survey – Risky Behavior and Personal Choice Feedback (*all respondents*)

Top Concerns	Percentage of All Survey Responses	Percentage of Marion County Resident Survey Responses
Drug use	65%	69% (1)
Excessive alcohol use	37%	31% (3)
Lack of exercise	33%	33% (2)
Unhealthy eating choices	27%	29% (4)
Child abuse and neglect	23%	31% (3)



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Appendix B: Community Partner Meeting Attendees

- ▶ Shelley Graham, Preston Memorial Hospital
- ▶ David Hartley, West Virginia University Extension 4-H Youth Development
- ▶ Tammy Laney, Food for Preston
- ▶ Richelle Layman, Preston County Family Resource Network
- ▶ Kim Liston, Preston Memorial Hospital
- ▶ Kristen Logsdon, Buckwheat Express
- ▶ Stephanie Martin, Preston High School MA Instructor
- ▶ Amanda McCleary, Preston High School CNA Instructor/Preston Memorial Hospital Nurse Supervisor
- ▶ Brittany Reed, Preston County Schools After School Explorers
- ▶ Kim Riley, West Virginia Caring Hospice
- ▶ Grace Sypolt, North Central West Virginia Community Action
- ▶ Barb Thorn, Preston County Starting Points
- ▶ Jeannie Welch, Preston County Health Department
- ▶ Janie White, Preston County Senior Citizens/Buckwheat Express