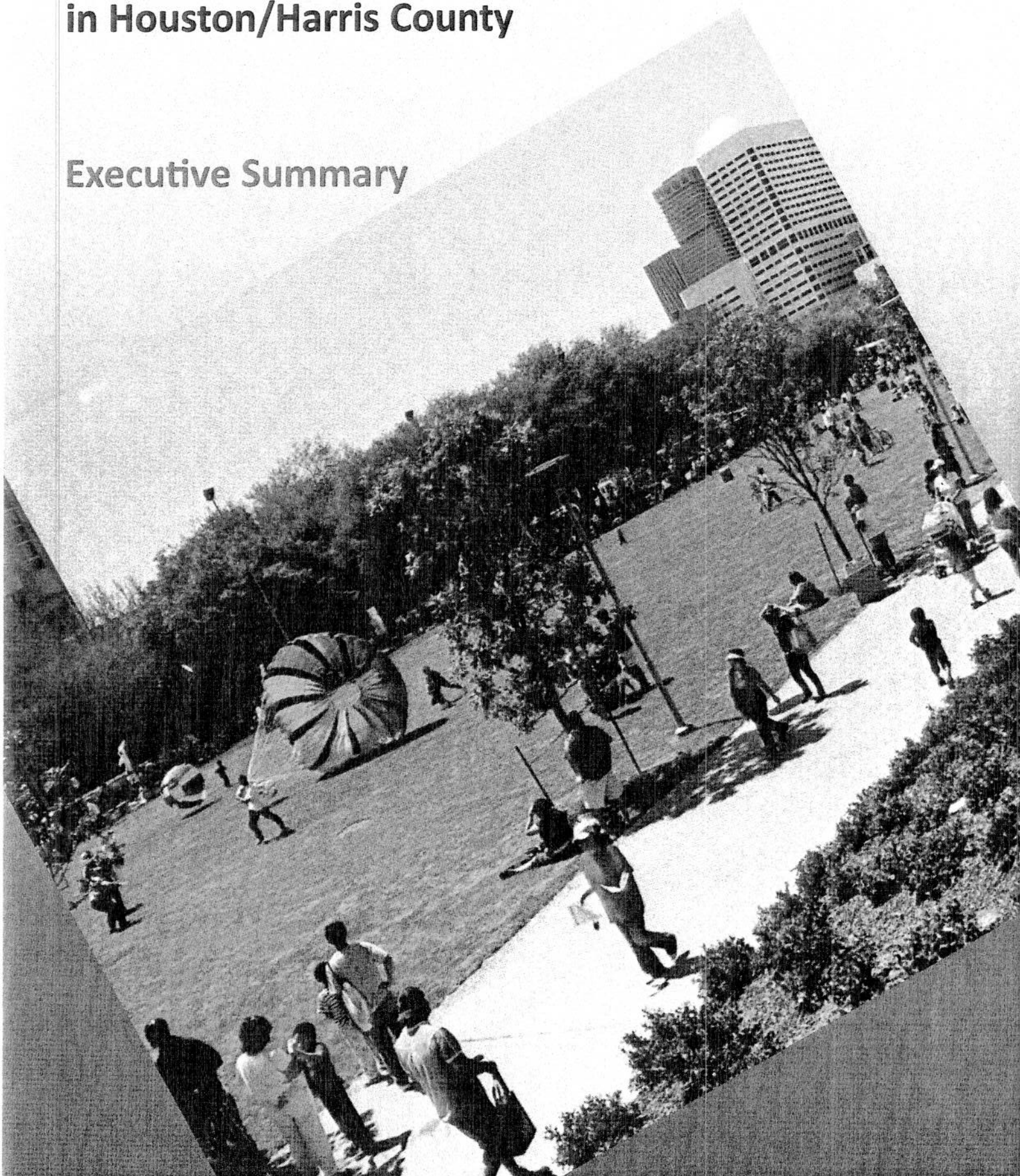


The State of Health in Houston/Harris County

2012

Executive Summary



To the Residents of Houston/Harris County,

The Houston/Harris County State of Health Committee is proud to present the *2012 State of Health Executive Summary*. Similar to the previous version, the *Executive Summary* highlights community health indicators that surfaced from developing the comprehensive State of Health report. The 2012 report is available at www.houstonstateofhealth.org.

In 2012, the State of Health Committee chose to highlight 14 health indicators perceived to reflect the greatest challenges to our community and necessitating collaborative, evidence-based solutions in the wake of changes taking place in the current healthcare environment. These indicators fall into the areas of: Weight, Reproductive Health, Access to Care, Environment, and Chronic and Communicable Disease.

Many exciting initiatives are taking place to address these pressing concerns, some of which were prompted by the 2009 State of Health report. Individuals, as well as public and private organizations large and small are not only rallying around important health issues such as childhood obesity, maternal and infant mortality, and behavioral health, but are also contributing valuable resources to achieve real impact.

The 14 State of Health highlighted indicators serve as “mile-markers” to demonstrate that although much progress has been made in these areas, there is still work to be done. However, we are confident that our community is up to the challenge. As individuals and organizations continue to work together on implementing solutions, Houston/Harris County is taking important steps toward becoming the healthy community we all envision.

State of Health 2012 Partners

Stephen L. Williams, M.Ed., M.P.A.

Director

Houston Department

of Health and Human Services

Olivia Dear, M.P.A.

Interim Executive Director

Harris County Healthcare Alliance

Steven Schnee, Ph.D.

Executive Director

Mental Health and Mental

Retardation Authority of Harris County

Patricia G. Bray, Ph.D.

Executive Director

St. Luke's Episcopal Health Charities

Stephen H. Linder, Ph.D.

Associate Director

Institute for Health Policy

University of Texas School of Public Health

Herminia Palacio, M.D., M.P.H.

Executive Director

Harris County Public Health

and Environmental Services

David Lopez, F.A.C.H.E.

President/CEO

Harris Health System

Charles E. Begley, Ph.D.

Co-Director

Center for Health Services Research

University of Texas School of Public Health

David R. Lairson, Ph.D.

Co-Director

Center for Health Services Research

University of Texas School of Public Health

Bob Allen

Director

Harris County Pollution Control

State of Health 2012 Committee

Houston Department of Health and Human Services

Raouf Arafat, Deborah Banerjee,
Faith Foreman, Beverly Nichols.

Harris County Public Health and Environmental Services

Bakeyah Nelson, Rocaille Roberts.

Harris County Healthcare Alliance

Olivia Dear, Michelle Salazar-Martinez,
Karen Love (Former Executive Director).

Harris Health System

June Hanke, Margo Hilliard.

Mental Health and Mental Retardation Authority of Harris County

Scott Hickey, Tuan Nguyen.

St. Luke's Episcopal Health Charities

Philomene Balihe, Sheryl Barmasse, Jeanne Hanks, Linda Highfield, Shweta Shah.

University of Texas School of Public Health

Chuck Begley, Stephen Linder,
Beatrice Sellyn, Patrick Courtney,
Carolyn Bernard.

Harris County Pollution Control

Latrice Babin.

Rice University

Justin Denny.

Children at Risk

Mandi Sheridan.

Center for Houston's Future

Sandra Wegmann.

Baylor College of Medicine

Kim Lopez.

Overview

The US obesity epidemic is increasingly affecting youth; more than nine million children and teens (age 6-19) are considered overweight. With the US youth obesity rate nearly tripling since 1980, 12% of Texas high school students are now considered obese. While youth of all ethnic groups are affected by overweight and obesity, Mexican-American boys (26.8%) and black girls (29.2%) are most likely to be obese. Nutrition plays a critical role in youth obesity, yet many children are not getting appropriate diets.

34% of high school students in Houston are overweight or obese.

Indicators

- Obese adolescents have mortality rates 30% higher than their normal weight peers.
- Projected healthcare costs could exceed \$950 billion by 2030, if overweight persists into adulthood for today's children.
- Overweight adolescents are less likely to earn college degrees and more likely to earn lower wages, resulting in cumulative social and economic disadvantages.
- Overweight and obese youth are more likely to develop type 2 diabetes, hypertension, coronary heart disease, gallbladder disease, osteoarthritis, and many forms of cancer.



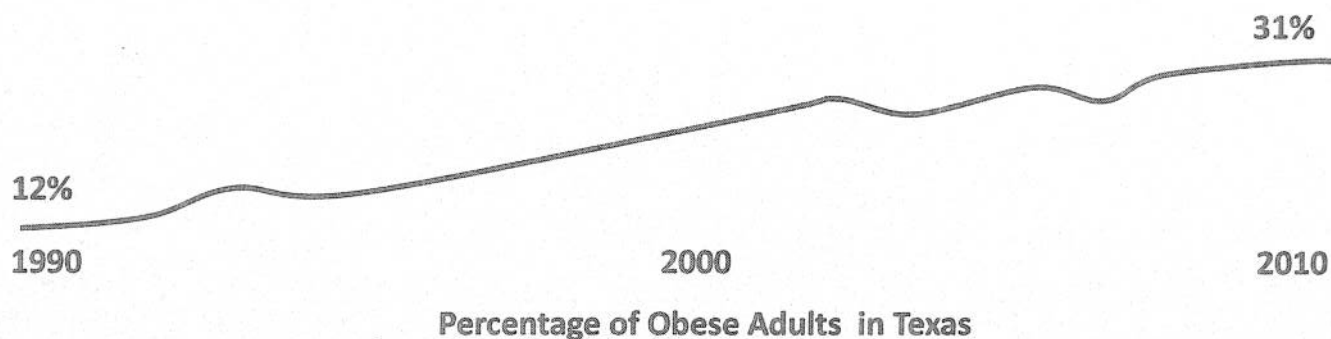
79% of high school students in Texas eat fewer than five servings of fruits and vegetables per day.

Public Health Actions

- Develop plans and programs that support individual and community health efforts through health education and other interventions to improve nutrition and physical activity.
- Inform and educate people about health issues by promoting good nutrition and exercise for Houston/Harris County residents.

Overview

US obesity rates continue to climb, and more than 72 million people (34% of US adults over age 20) are now obese. In the Houston area, 65.8% of surveyed adults are overweight (BMI of 25.0-29.9) or obese (BMI of 30.0 or above) compared to 64.3% nationally. Data on overweight and obesity rates reflect gender and racial/ethnic disparities; 74.3% of males (versus 56.8% of females) and 77.8 % of Hispanics (versus 71.7% and 62.5% of blacks and whites respectively) are overweight or obese. Adults ages 18-29 are less likely to be obese.



Indicators

- Being overweight or obese increases the risk of diseases and conditions such as hypertension, type 2 diabetes, dyslipidemia, coronary heart disease, stroke, gallbladder disease, osteoarthritis, sleep apnea, respiratory problems, and several cancers.
- The direct costs of inactivity and obesity amount to an estimated \$147 billion per year (9.4% of total US health care expenditures).
- Projections indicate that 51% of the US adult population could be obese by 2030, with accompanying health care expenditures of \$860- \$956 billion.
- Texas obesity rates have risen from below 20% in 1998 to 31% in 2010.

\$147 billion/
per year
**direct costs of inactivity
and obesity in the U.S.**

Public Health Actions

- Inform, educate, and empower people about health issues through community health education regarding the importance of healthy diet and physical activity.
- Develop policies and plans to promote environments where all residents have access to good nutrition and opportunities for physical activity.

Physical Activity

Weigh

Physical Activity

Overview

Lack of physical activity, combined with poor nutrition, puts individuals at risk for a number of health problems including obesity, heart disease, diabetes, and cancer. Houston-area men (46.9%) and women (44.6%) have similar rates of physical activity defined as aerobic physical activity of at least moderate intensity for at least 150 minutes/week or 75 minutes/week of vigorous intensity or an equivalent combination. However, there are disparities in activity based on levels of education and income. College graduates (51.8%), those with income of \$50,000 or more (50.9%), and adults aged 65+ (74.6%) are the most physically active.

60% of Harris County 8th graders view more than two hours of television per day

Indicators

- 26.4% of surveyed Houston-Baytown-Sugar Land MSA adults reported participating in no leisure-time physical activity during the past month.
- Only 18% of surveyed Harris County 4th graders reported at least 30 minutes of moderate physical activity on five or more days per week.
- Estimated direct medical costs related to physical inactivity were \$76 billion annually.



CDC and the American College of Sports Medicine recommend that adults should participate in moderate to vigorous physical activity for at least 30 minutes on most days of the week.

Public Health Actions

- Inform, educate, and empower people to understand the importance of physical activity and incorporate it in their lives.
- Monitor health status by tracking lifestyle and activity trends among residents and providing reports to the community.

Adolescent Pregnancy

Reproductive Health

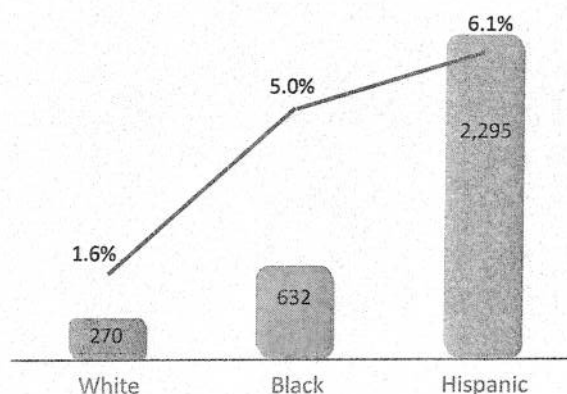
Overview

Adolescent pregnancy poses increased risk in numerous areas. Teenage mothers are less likely to receive adequate prenatal care or gain adequate weight during pregnancy. They are more likely to smoke during pregnancy, and their babies are at greater risk for premature birth, low birth weight, disability, and mortality during the first year of life. There is significant disparity in teen pregnancy rates by ethnicity. Hispanic mothers comprised 70.8% of all teen births in Harris County.

4.5%

of all births in Harris County were to mothers age 17 or younger.

Births to Mothers 17 and Younger
Harris County, 2008



Indicators

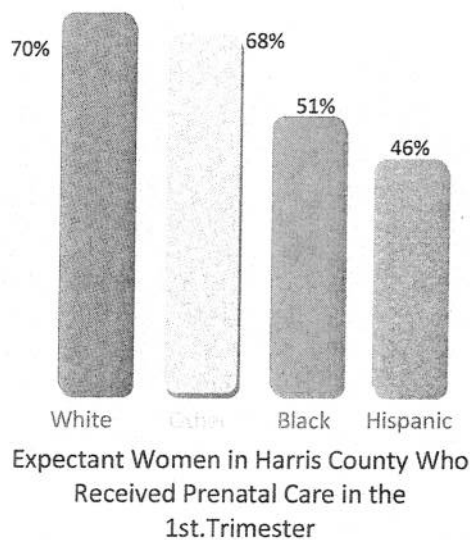
- Harris County teen birth rates have declined since the 1990's.
- The Harris County pregnancy rate for teenage girls (age 13-17) is 27.8 per 1,000.
- The Harris County pregnancy rate for females age 15-17 is 42.1 per 1,000.
- Adolescent pregnancies in Texas cost at least \$1.2 billion in 2008.

Public Health Actions

- Advocate for reproductive health care services and comprehensive sexuality education.
- Assure the provision of health care when otherwise unavailable through case management services such as home visits, prenatal education, breastfeeding promotion, referral assistance, and parenting skills.
- Mobilize partnerships to solve health problems through programs to provide family support and education during the child's early years.

Overview

Adequate prenatal care (including regular health check-ups and education regarding nutrition, proper physical activity, the birthing process, and infant parenting skills) is crucial to ensuring the health of mothers and babies. Inadequate prenatal care has been linked to poor pregnancy outcomes such as premature birth, low birth weight, infant death, and maternal death. Rates of Harris County females receiving prenatal care in their first trimester are decreasing. Nearly half of Harris County pregnant women do not receive care in the first trimester, though racial disparity exists in these statistics with a much greater percentage of white women (compared to black and Hispanic) receiving early prenatal care.



Only 46% of Hispanic women and 51% of black women receive early prenatal care.



Indicators

- 46% of Harris County pregnant women received late or no prenatal care.
- Cost or lack of insurance is the most common reason for lack of prenatal care.
- Only 54% of Harris County mothers begin prenatal care in the first trimester.

Public Health Actions

- Provide prenatal care to low income women and link women to prenatal services in the community.
- Educate women about prenatal health, postpartum and infant care, vaccinations, and the availability of Medicaid and CHIP resources.
- Provide food vouchers for low-income mothers and young children through the WIC Nutrition Program (funded by the US Department of Agriculture and the TDSHS).
- Promote contraception and abstinence to prevent unwanted pregnancies.

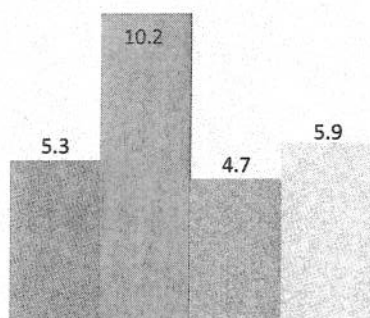
Infant/Maternal Mortality

Reproductive Health

Overview

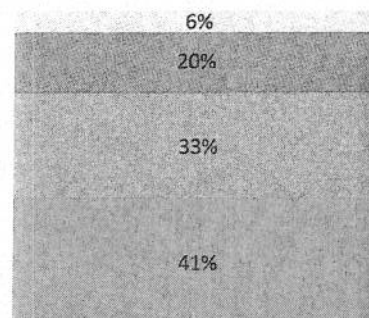
While pregnancy related deaths are rare, they are increasing in the US and Harris County. Maternal mortality risk is increased by factors such as obesity, hypertension, preexisting cardiac and renal disease, diabetes, asthma, cesarean section, lack of prenatal care, advanced maternal age, and multiparity (such as twins or triplets). Significant racial disparity exists with approximately 80% of all maternal deaths occurring in minority women. The US infant mortality rate has stabilized but remains one of the highest of any industrialized nation. Risk factors for increased infant mortality include inadequate prenatal care, short intervals between pregnancies, socioeconomic stressors, poor health of mothers, premature birth, and unavoidable genetic defects.

Infant Mortality



Infant Mortality Rates in Harris County, 2007
(deaths per 1,000 live births)

Maternal Mortality



Percent of Maternal Deaths by Race/Ethnicity
Harris County 1999-2008

Indicators

- In 2008, there were 27 maternal deaths in Harris County.
- Harris County's maternal mortality rate was 17.3 per 100,000 live births from 2005-2007.
- Mothers over age 35 accounted for 28.9% of the deaths.
- The US infant mortality rate is 6.8 deaths per 1,000 live births. In Harris County, the infant mortality rate is 6.2 per 1,000 live births.
- Harris County blacks have the highest infant mortality rate with 10.2 deaths per 1,000 live births.

Public Health Actions

- Monitor health rates and advocate for improved assessment methods such as the Maternal Mortality Review Board to identify causes and make recommendations to prevent maternal morbidity and mortality.
- Promote healthy practices and educate women on risk factors for increased morbidity and mortality.
- Mobilize community partnerships and action to improve maternal and infant health.
- Monitor health status to identify and solve community health problems by tracking infant mortality rates.
- Serve as a safety net when services are otherwise unavailable.

Insurance Access

Access to Care

Overview

Texas has the highest rate of uninsured persons in the nation; one in four Texans lack health insurance. Houston and Harris County have higher rates of uninsured persons than Texas. Lack of insurance increases risk of postponing or going without needed medical care. Pronounced racial and ethnic disparities exist and are especially apparent among the more than 50% of Hispanics who are uninsured. The most frequent reason cited for lack of insurance is inability to afford coverage. Some residents are eligible for Medicaid and CHIP, and awareness of these programs is increasing.

28%

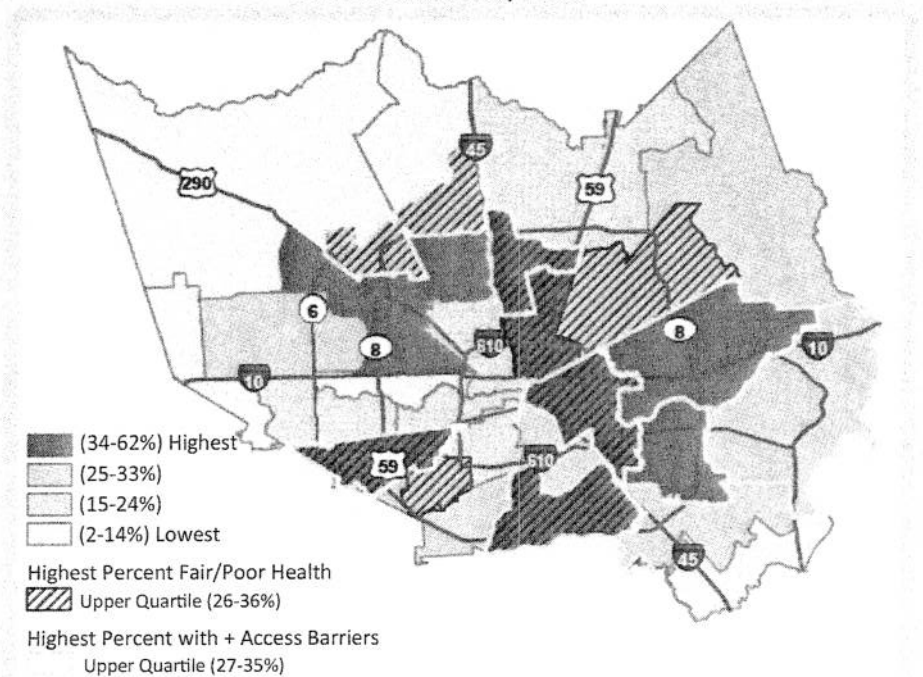
of Harris County residents are uninsured.

\$30 billion

Annual US healthcare costs for the uninsured

Infant/Maternal Mortality

Uninsured Adults, 2010



Indicators

- 54% of parents without insurance report taking their children to a doctor on a regular basis
- 50% of uninsured Harris County children are eligible for CHIP or Medicaid but are not enrolled.

Public Health Actions

- Provide the public with information regarding insurance availability and utilization.
- Provide assistance for eligible residents who seek access to CHIP, Medicaid, and other health resources.
- Support efforts and develop policies to expand health care coverage and expand public safety net services.

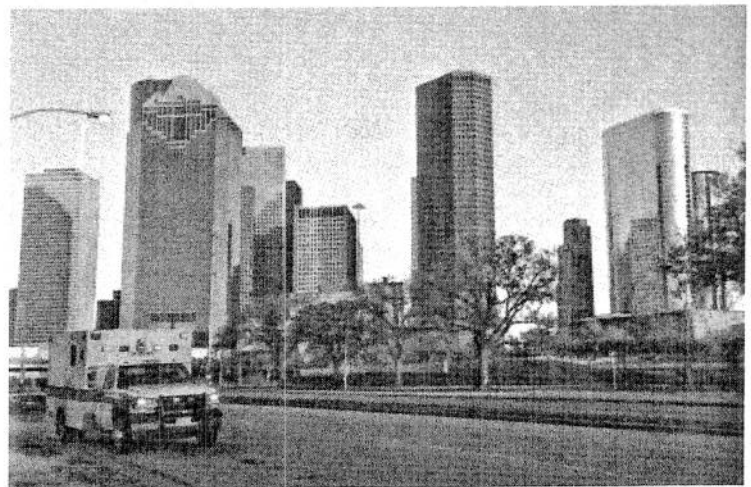
Behavioral Health ER Access

Access to Ca

Overview

Persons with behavioral health problems often lack access to community-based behavioral health resources and seek treatment at emergency rooms. These visits are primarily for medical problems but also involve simple (one diagnosis) and complex (multiple diagnoses) behavioral problems. ER staff often lack the training to treat behavioral health problems.

45% of persons with complex behavioral needs are uninsured in Harris County.



Indicators

- Nearly 45% of persons with complex behavioral needs are uninsured in Harris County.
- Males made up more than half of all complex visits in 2008.
- Persons enrolled in Medicare accounted for 32.2% of medical/behavioral ER visits in 2009.

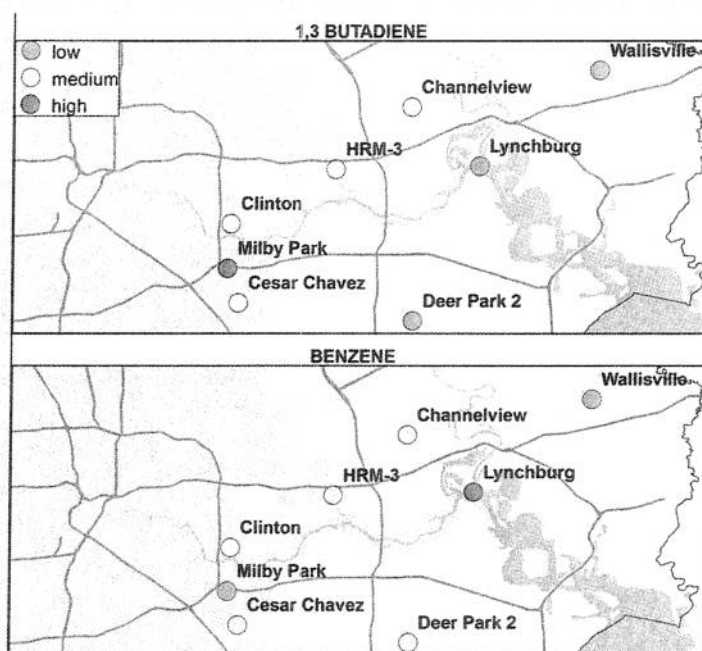
Public Health Actions

- Work with community partnerships and state legislators to expand access to and funding for outpatient mental health services, especially for the uninsured.
- Expand access to crisis intervention services.
- Find ways to coordinate medical and behavioral treatment services.

Overview

Air pollution contributes to health conditions such as respiratory illnesses and cancer. The air pollutants of most concern in Houston are: ozone, fine particulates, 1,3-butadiene, and benzene. The Houston area has exceeded the EPA NAAQS standard for ozone levels. The Port of Houston and the associated chemical/refining industrial complex continue to emit hazardous pollutants such as 1,3-Butadiene and Benzene (both known as carcinogens) though levels of both pollutants have been decreasing since 2007.

Excessive ozone days in the Houston area have been increasing since 2008; EPA designated Houston as a severe non-attainment area in 2011.



2011 measures of concentrations of 1,3 butadiene and benzene in eastern Harris County

Indicators

- The past five years have shown statistically significant decreases of fine particulate matter concentrations in the ship channel area.
- In industrial areas, long term exposure to air pollution increases cancer risk by a factor of 1,000.

Public Health Actions

- Research new insights and innovative solutions to fight identified pollutant risks.
- Mobilize partnerships for actions such as settlement agreements between local government and industry to reduce emissions.
- Educate residents to reduce emissions through methods such as carpooling, use of electric yard equipment, and natural gas fireplaces.
- Enforce laws and compliance with regulations, and monitor air contaminants.

Overview

Asthma is a chronic lung disease that affects both children and adults. Methods to reduce occurrence of asthma attacks include taking prescribed medication and avoiding asthma triggers. Women, blacks, whites, and persons aged 45-64 are more likely to report asthma. Asthma is one of the most chronically diagnosed diseases in children, contributing significantly to school absenteeism.

Asthma is the third leading cause of hospital admissions for children under 15.



96,000 Children and 186,000 Adults
in Harris County have been diagnosed with asthma.

Indicators

- An estimated 96,000 children and 186,000 adults in Harris County have been diagnosed with asthma.
- The percentage of local adults reporting current asthma has decreased from 8.2% in 2005 to 5.1% in 2010.
- Texas inpatient hospitalization charges associated with asthma exceeded \$446 million in 2007.

Public Health Actions

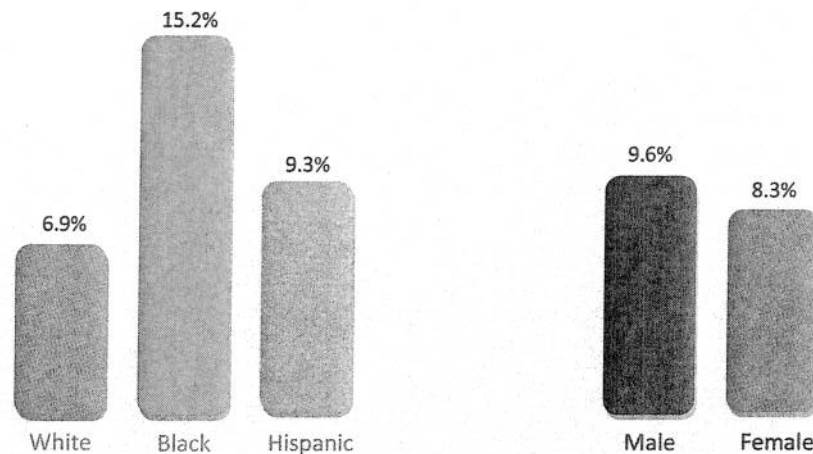
- Monitor health status and disease prevalence to provide data for health planning.
- Inform, educate, and empower people about asthma through publications, trainings, and other media.
- Link people to needed personal health services through referrals.

Diabetes

Chronic and Communicable Diseases

Overview

Diabetes affects an estimated 25 million Americans. Health complications from diabetes include: heart disease, stroke, high blood pressure, blindness, kidney failure, nervous system damage, amputations, and dental disease. The disease is the fifth leading cause of death in Harris County.



Harris County Diabetes Prevalence 2010

Indicators

- Texas estimated diabetes expenses totaled over \$12 billion in 2006.
- CDC estimates that up to one third of Americans will have diabetes by 2050.
- 8.9% of Houston-area adults have been diagnosed with diabetes.

\$12 billion estimated diabetes expenses in Texas in 2006

Public Health Actions

- Monitor health and mortality of diabetics to identify and solve this community problem.
- Inform people about the importance of healthy behaviors and lifestyle.
- Educate diabetics and others about improving risk factors related to diabetes and chronic disease self management.
- Link people to needed health assessments and referrals for treatment.

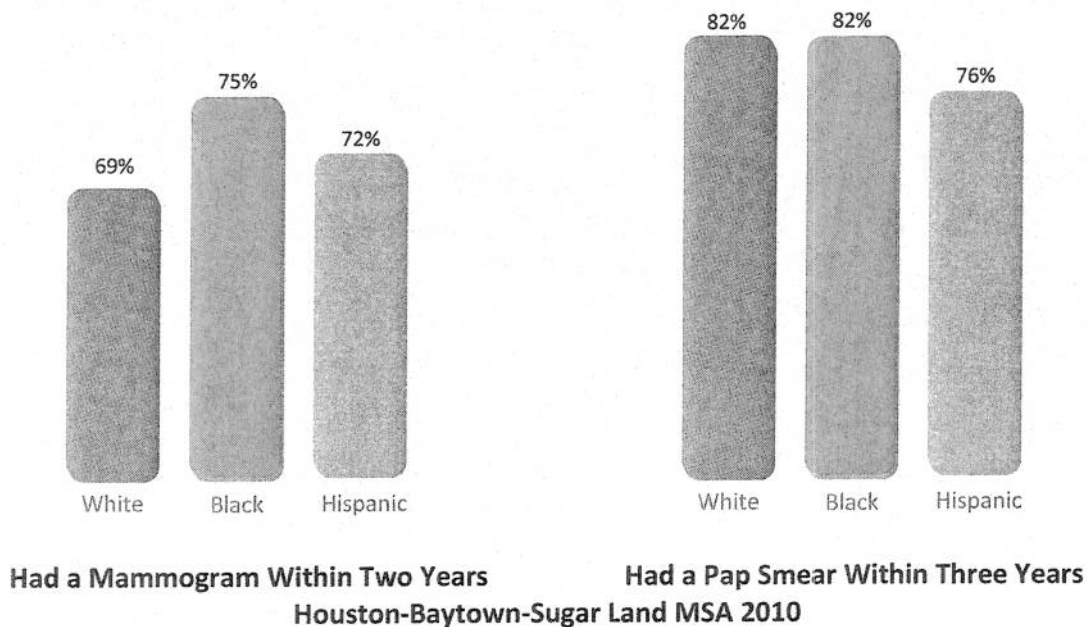
Overview

Cancer is the second leading cause of death in the United States and Texas. Despite advances in treatment, death rates from all types of cancer have remained consistent, accounting for approximately 4,800 deaths per year in Harris County. Blacks had the highest rates of cancer in Harris County, while Asians had the lowest rates. Many cancer deaths can be prevented through lifestyle changes such as better nutrition, exercise, and avoiding tobacco.



Indicators

- Between 2006 and 2008, 40,699 new cases of cancer were diagnosed in Harris County.
- Texas ranks 38th of the 50 states in cancer incidences.
- Texas estimated total cancer expenditures for 2007 were \$21.9 billion.



Public Health Actions

- Inform, educate, and empower people to develop techniques to prevent or manage the symptoms of cancers.
- Link people to needed personal health services through referrals for cancer screening.
- Mobilize partnerships with public health organizations, universities, medical centers, and other groups to address concerns such as racial disparities in cancer rates.

Heart Disease/Stroke

Chronic and Communicable Diseases

Overview

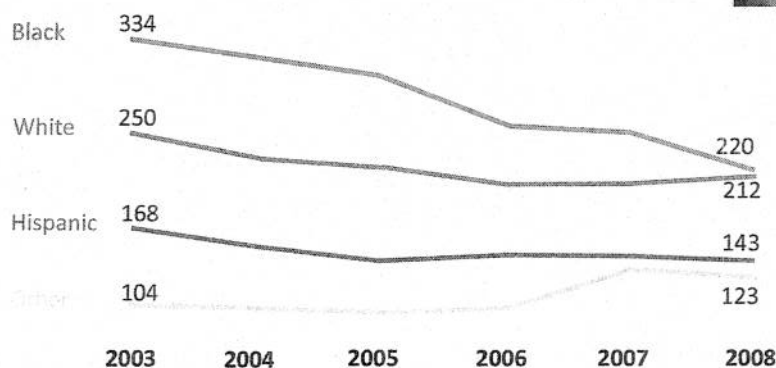
Heart disease is the leading cause of death in both the US and Houston/Harris County. The CDC estimates that one in four Americans has some form of cardiovascular disease (heart disease and stroke combined). The disease shows racial and ethnic disparity; locally, 9.0% of black adults have been diagnosed with heart disease, compared to 2.5% of Hispanics.

Indicators

- 5.1% of Houston-area adults have been diagnosed with some form of heart disease.
- 72.5% of Houston-area adults have had their cholesterol checked in the past five years.
- 27.8% of Houston-area adults have been diagnosed with high blood pressure.
- Texas 2007 hospitalization costs for cardiovascular disease exceeded \$11 billion.



Heart Disease/Stroke



Heart Disease Mortality Rate, Harris County 2003-2008 (Rate per 100,000 Population)

Public Health Actions

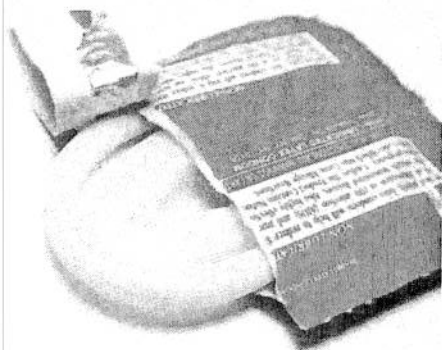
- Mobilize community partnerships to improve health awareness and status through collaboration.
- Link people to personal health service programs to provide low income, under-insured, or uninsured residents with knowledge, skills, and opportunities to delay and control cardiovascular and other chronic diseases.
- Link people with a primary care clinic and establish a medical home.
- Inform, educate, and empower people about cardiovascular disease, the signs and symptoms of heart disease and stroke, and when to call 911.

Overview

In Houston/Harris County from 2005 to 2010, reported gonorrhea cases increased 40% and reported Chlamydia cases increased 91%. The occurrence of a Sexually Transmitted Disease (STD) is an indicator of unprotected sexual activity. Unprotected sexual activity has been shown to contribute to unintended pregnancy and HIV transmission. Left untreated, STDs can lead to infertility, cancer or death. Many STDs are asymptomatic and as a result go untreated, further increasing the likelihood of transmitting the infection.

Indicators

- Since 2007, the rate of new syphilis cases has declined in Houston/Harris County, although it is still more than twice as high as in year 2000. In 2010, the rate of new gonorrhea in Harris County was 148.9 per 100,000, compared to 124 per 100,000 in Texas.
- Blacks are disproportionately affected by gonorrhea compared to Hispanics and whites. In Houston for 2010, the infection rate among the black population was 556.6 cases/100,000, compared to 47.4 for Hispanics and 34.5 for whites.
- The 2010 Chlamydia infection rate In Houston/Harris County for all ages was 510.3 cases per 100,000.



Primary and secondary syphilis infection rate (2010):

Houston/Harris County: 6.4 per 100,000 population

Texas: 4.9 per 100,000 population

U.S.: 4.5 per 100,000 population

Healthy People 2020 goal: 1.4 per 100,000 population

Public Health Actions

- Inform and educate people about the risks of unprotected sex and the adverse outcomes associated with STDs.
- Provide care where otherwise not available for persons at risk for STDs, including education, counseling, testing, case management, and clinical services.
- Develop and support policies and plans and mobilize community partnerships to support community health efforts to decrease STDs.

About the Harris County Healthcare Alliance

An independent nonprofit corporation since 2006, the Harris County Healthcare Alliance serves as a catalyst for improving the healthcare system of Houston/Harris County. The Alliance has attracted more than 40 members who work together to achieve results not possible working separately. Membership in the Alliance is open to any public or private healthcare or healthcare-related organization that supports the Alliance vision of a comprehensive, coordinated system that meets the healthcare needs of its residents.

Funding to support the Houston/Harris County State of Health document development and website is provided by the Harris County Healthcare Alliance.

Asian American Health Coalition dba The HOPE Clinic

Baylor College of Medicine

Bee Busy Wellness Center

Casa El Buen Samaritano

Center for Houston's Future

Central Care Community Health Center

Christ Clinic

CHRISTUS Health Gulf Coast

City of Houston Department of Health and Human Services

Coalition of Behavioral Health Services

Covenant House Texas

Doctors for Change

El Centro De Corazon

Fort Bend Regional Council on Substance Abuse, Inc.

Gateway to Care

Good Neighbor Health Care Center

Greater Houston Healthconnect

Greater Houston Partnership

Harmony House, Inc.

Harris Health System

Harris County Medical Society

Harris County Public Health and Environmental Services

Healthcare for the Homeless - Houston

Houston Area Community Services, Inc. (HACS)

Houston Community Health Center, Inc.

Houston Shifa Services Foundation, Inc.

Houston Wellness Association

Ibn Sina Foundation - Community Clinics

Interfaith Community Clinic

Legacy Community Health Services

Mental Health America of Greater Houston

MHMRA of Harris County

Motherland, Inc.

Network of Behavioral Health Providers

One Voice

Planned Parenthood Gulf Coast

San Jose Clinic

Shalom Health Ministry

Spring Branch Community Health Center

St. Vincent's House

Texas Children's Hospital

The Hope Village

The Immunization Partnership

The Methodist Health System

The Rose

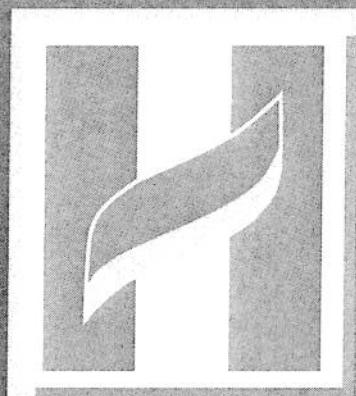
The University of Texas Health Science Center

The University of Texas M.D. Anderson Cancer Center

TOMAGWA Healthcare Ministries

United Way of Greater Houston

Unlimited Visions Aftercare, Inc.



Harris County
Healthcare Alliance

1310 Prairie Street
Suite 1080
Houston, Texas 77002

Tel: (713) 368-3285
Fax: (713) 368-3938
www.hchalliance.org