

# Community Health Needs Assessment Report, 2021-2024







**COMMUNITY HEALTH NEEDS ASSESSMENT REPORT, 2021-2024**

December 2021

# Contents

---

- Executive Summary, 2021..... 5
- Recommendations for Action, December 2021 ..... 6
- Overview ..... 8
- Requirements and Purpose of a CHNA..... 9
- Process..... 9
- Data Sources ..... 11
- Recommended Health Priorities, York County Community Forum, 2021..... 12
- Community Themes & Strengths Survey Results ..... 13
- Population & Demographics ..... 15
- Health Priorities ..... 16
- Mental Health..... 16
- Substance Use, Misuse and Use Disorders ..... 19
- Youth Health (Maine Integrated Youth Health Survey Selected Results, 2009-2019) ..... 21
- Access to Care, Social Determinants of Health and Health Status ..... 23
- Group Discussion Notes..... 25
- Youth Discussion Group, Mental Health and Substance Use ..... 26
- Mental Health Assets in Your Community..... 26
- Mental Health Needs in Your Community..... 26
- Substance Use Prevention and Treatment Assets..... 27
- Substance Use Prevention and Treatment Needs..... 28
- Law Enforcement Partners Discussion Group, Mental Health and Substance Use..... 28
- Community Resources ..... 29

# Executive Summary, 2021

---

York Hospital and partners completed a local Community Health Needs Assessment in December 2021 to inform community health efforts for the coming three years. Community members of southern York County, York Hospital staff, the York Hospital Futures Committee and a network of community partners identified three priority health issues of concern in the local service area:

- 1. Mental Health**
- 2. Substance Misuse**
- 3. Access to Care**

These priorities were chosen through a process that examined data from state and county sources as well as local data including an online York Hospital Community Themes and Strengths Survey, local forums, discussion groups and one-on-one key informant interviews.



Dr. Christine Munroe, MAT Medical Director at the York Hospital Recovery Center, demonstrates how to administer Narcan to local donors with York Hospital President and CEO, Dr. Patrick Taylor.

In choosing priorities, the following criteria was considered:

- Data showing significant problem(s) compared to past and/or to the state numbers;
- Gaps in existing services and efforts;
- Concern for issue demonstrated by community members and collaborating partners; and,
- Capacity at York Hospital and among partners to implement actions resulting in measurable outcomes.

Priorities and strategic directions were brought to the York Hospital Futures Committee and then approved by the York Hospital Board at its December 2, 2021 meeting.

The data and priorities included in this report will be included with the Hospital's Strategic Plan for the coming years. This report, any updates and plans will continue to be posted at <https://www.yorkhospital.com/990-chna/>.

For more information on this report, process, and plan or to share your feedback, contact Sally Manninen, Community Health Director at (207)351-2655 or [smanninen@yorkhospital.com](mailto:smanninen@yorkhospital.com).

# Recommendations for Action, December 2021

---

## Priority Health Issue: Mental Health

<b>1. Increase access to mental health services and supports in Southern York County.</b>	
<b>Strategy</b>	<b>Activities</b>
Advocate for more mental health services and options for inpatient treatment.	Convene providers and hospitals to advocate at state level.
Increase access to mental health services and improve collaboration, especially helping youth and young adults.	Convene Sweetser, NAMI Maine and local Behavioral Health Specialists to assess and share resources.
Build capacity of YH providers to provide support for each other and their patients.	Monthly Mental Health First Aid and Leadership trainings provided to YH staff on supporting good mental health.
Build capacity of families and professionals to understand mental health and provide support and access to appropriate services.	Sponsor Family to Family Mental Health Series
	Coordinate Mental Health First Aid and related Teen Mental Health First Aid trainings with Sweetser and NAMI for communities, parents and schools.

## Priority Health Issue: Substance Use and Misuse

<b>2. Increase substance use disorder prevention, intervention and addiction services for those at highest risk including youth, young adults and underserved/uninsured.</b>	
<b>Strategy</b>	<b>Activities</b>
Increase capacity to provide medication assisted treatment through the YH Recovery Center.	Encourage more providers to administer medication assisted treatment. Write for funding through state and federal grants to hire and train staff.
Support Choose To Be Healthy Coalition (CTBH) in preventing youth substance use disorders and promoting good mental health with evidence based strategies.	Support local community health coalition, CTBH Assist coalition in getting more funding.
Provide regular community education	Hold YH Lunch n Learns on topics related to substance use and misuse.

**Priority Health Issue: Access to Care**

<b>3. Increase and Improve Access to Care</b>	
<b>Strategy</b>	<b>Activities</b>
Increase proportion of patients with a usual primary care provider.	Create system for follow up appointments with a PCP after all specialty or emergency care visits.
Increase proportion of patients with online access to electronic medical records and appointment information.	Assess barriers to accessing electronic portal at YH.
Increase proportion of patients that receive evidence based preventive care.	Initiate system of follow up education to all screenings including behavioral health.

This draft plan will be reviewed in January-March with an action plan(s) to be developed using the following criteria:

- Capacity to implement (resources, training, people);
- Staff and community member buy in;
- Potential for sustainability;
- Reach and evidence for strategies;
- Ability to address disparities; and, needs identified by community.



York Hospital Chief Medical Officer, Dr. Jennifer Cutts; Chief Financial Officer, Robin LaBonte; former Board Chair Wendy Cote; York Hospital President & CEO Dr. Patrick Taylor; and, current Board Chair, Dan Morrison.

# Overview

---

In the last two years, 2020 and 2021, York Hospital in collaboration with community state and federal partners, has worked to improve public safety and health impacted by the unprecedented pandemic caused by the COVID-19 virus. While all hospitals have felt loss and been stretched beyond capacity at times, York Hospital has assisted in making Maine one of the highest vaccinated states in the country.

The hospital also saw many changes including staff taking on added responsibilities and a new CEO coming on board in 2021.

Through it all, York Hospital has remained resilient and continues its 100+ year history of collaborating with and listening to the communities it serves to improve the health of those living in Southern York County with this, its 2021 Community Health Needs Assessment.

As a nonprofit hospital, York Hospital strives to provide high quality health services for all. Every three years as part of its federal requirements as a non-profit and to provide services that best meet community needs, York Hospital conducts a Community Health

Needs Assessment (CHNA).

Compiled here are local, county and state health data and community member input about the health issues of greatest concern. The Hospital and its partners will use this information to identify priority health issues, develop plans to address them and monitor progress

York Hospital thanks its community partners, the Choose to Be Healthy Coalition and the York Hospital Community Health Team, for helping to engage diverse community stakeholders in the assessment process and in compiling this report.



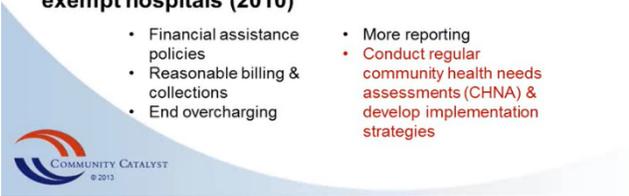
# Requirements and Purpose of a CHNA

A CHNA Assessment, Plan and Reports are part of a federal IRS requirement for *all* non-profit hospitals. However, York Hospital also views the process and its products as an important collaboration with outcomes ensuring that community benefits meet the needs of its neighbors and reflect the collective health priorities and vision.

## Process

York Hospital undertook its current community health needs assessment (CHNA) in the fall of 2021 to identify the health needs of those living in the hospital’s service area. While undertaking its local CHNA, YH and its partners also participated in the Maine state wide Shared CHNA and the York County Public Health District process. When completed, there will be a CHNA for the state (2022), York County (2022) and York Hospital which will reflect similarities and differences, perhaps overlap, and hopefully inform each other. **We will incorporate any additional info from those sources in 2022 and resubmit our amended CHNA so that York Hospital can be on the same schedule as York County and the state.** This assessment includes the hospital area of Southern York County Maine towns of Berwick, Eliot, Kittery, Lebanon, North Berwick, Ogunquit,

- **Tax exemption is source of the federal legal standard**
  - IRS and Treasury Department develop guidance and handle oversight
  - IRS has defined “community benefit” through guidance for tax-exempt hospitals (1969 Revenue Ruling): does the hospital promote the health of a class of persons broad enough to benefit the community?
- **Tax-exempt hospitals must report their community benefits annually to IRS on Form 990, Schedule H**
- **Affordable Care Act added new requirements for tax-exempt hospitals (2010)**
  - Financial assistance policies
  - Reasonable billing & collections
  - End overcharging
  - More reporting
  - **Conduct regular community health needs assessments (CHNA) & develop implementation strategies**



South Berwick, Wells, York and Sanford.

York Hospital is the fiscal agent and partners with the Choose to Be Healthy Coalition (CTBH), a community health coalition housed at the hospital whose staff make up its Community Health Team. CTBH assists in engaging the community in the health assessment process. CTBH has a membership purposefully comprised of those representing diverse community sectors from all of its communities including representatives of education, law enforcement, behavioral health care, social service agencies, municipalities, business, etc. The involvement of these perspectives is necessary to engage in successful health improvement initiatives.

Guiding the process was the perspective that much of what influences health outcomes happens outside of the health care system. These social factors include poverty, level of education, behavioral health status, age, and social connectedness, among others. Members of CTBH represent populations in the hospital

service area with disparate health outcomes including those with low-incomes, the elderly, youth and those with substance use and mental health disorders. Additionally, elements of the National Association of City and County Health Officials' (NACCHO) community health planning process were used in 2015 and 2018 to help community stakeholders identify a Vision for a Healthy Community and a list of Community Values, and a Community Themes & Strengths Survey was conducted in those years and in 2021.

The COVID-19 Pandemic has affected every aspect of our community health and of the work at York Hospital. Questions relating to the pandemic and its effect on individual and community health were added to the survey for 2021.

## York Public Health District

To help coordinate the county and local CHNA, the York Hospital Director of Community Health participates on the York County CHNA planning committee and the York District Public Health Council. The Council is responsible for drafting and implementing its own Public Health Improvement Plan.

In addition, a York County Community Health Forum was held on September 27, 2021 with over sixty public health professionals, community members, and decision makers who reviewed the most current county and state data, discussed local health concerns and

Community Health Director, Sally Manninen, coordinated the CHNA process and compiled the 2021 Report with assistance from Charity Neal, RN Executive Director; Dr. Patrick Taylor, York Hospital President & CEO; and Robin LaBonte, Chief Financial Officer.

helped prioritize health issues going forward as a county and as collaborating agencies, coalitions and hospitals. Notes and charts from that forum are included in this report.

## Community Engagement



Dr. Patrick Taylor, CEO of York Hospital, meeting with members of the York Town Council.

The Choose To Be Healthy Coalition Advisory Board and other coalition members, including youth, provided community input as well through remote meetings and discussion groups. The Advisory Board is made up of community members who live or work in all of the surrounding communities and represent social services, schools, mental health treatment, law enforcement, the court system, healthcare, faith community, businesses, and parents.

Additionally, the group reviewed and considered demographic, socioeconomic, disease incidence, and health behavior data to help York Hospital identify needs specific to mental health and substance use as well as access to those preventative and treatment services.

# Data Sources

---

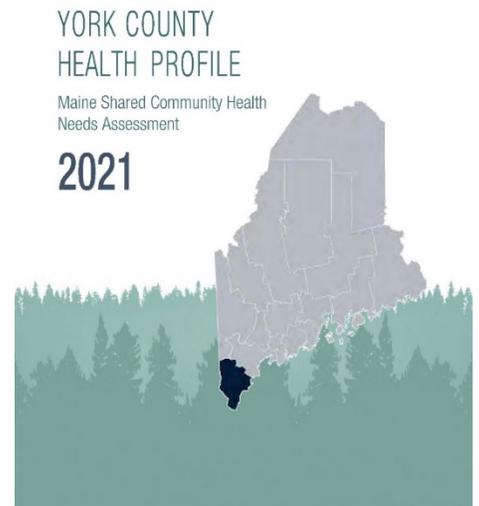
The quantitative data in this report primarily comes from the 2021 York County Health Profile and includes multiple secondary sources including the US Census, the Maine Behavioral Risk Factor Surveillance System, the Maine Integrated Youth Health Survey, and several State of Maine departments. The complete reports and data sources for this report are found at [www.maine.gov/dhhs/mecdc/phdata/MaineCHNA/documents](http://www.maine.gov/dhhs/mecdc/phdata/MaineCHNA/documents).

York County and local area data used in this CHNA include:

- Demographic and socio-economic factors
- Health care access
- Health status
- Disease incidence and prevalence
- Health behaviors and risk factors

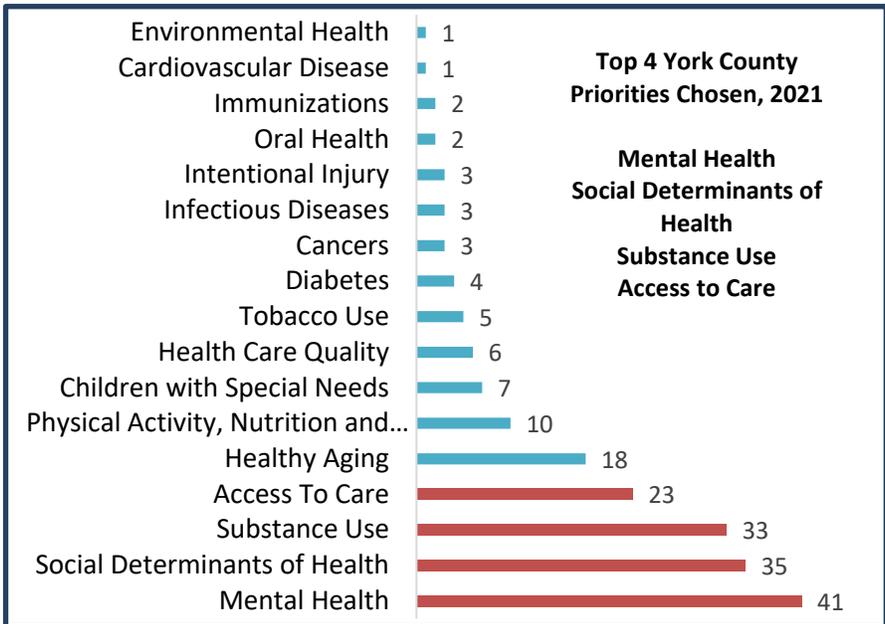
Qualitative data was compiled from:

- A York County Community Health Forum;
- A Community Themes & Strengths online survey;
- Group discussions with hospital staff, YH Futures Committee and community members; and,
- Key informant interviews with stakeholders.



# Recommended Health Priorities, York County Community Forum, 2021

On September 27, 2021 a community forum was held via Zoom due to public health and safety recommendations for the on-going COVID-19 pandemic. The forum was coordinated by the York District Public Health Council, state Maine CHNA staff, and the John Snow Institute evaluators who compiled and presented the data. The York District



Public Health Council includes staff from both local hospitals, Southern Maine Healthcare and York Hospital, the three local community health coalitions (Partners for Healthier Communities, Coastal Healthy Communities and Choose To Be Healthy), hospital community health departments, the Southern Maine Alliance on Aging, and the state Public Health Liaison. Quantitative data from the York County Health Profile was presented, discussed and priorities chosen by over 60 participants representing diverse community sectors including the medically underserved and low income population, higher education, health care, law enforcement, public health, local and state government, funding agencies, and community members.

The group picked the top health priorities through an anonymous electronic voting system. After voting, people broke into random smaller groups to rank their top four priorities and discuss the known assets and needs for each of the health topics. The large group was brought back together and the top four priorities compiled and shared. The notes from these discussions will be included in the final York County Report in 2022.

# Community Themes & Strengths Survey Results

A Community Themes & Strengths Assessment was conducted via Survey Monkey and promoted by York Hospital and the Choose To Be Healthy Coalition through a variety of electronic and traditional media. An ad in the Weekly Sentinel newspaper ran for 4 weeks promoting the link to the survey.



The survey was completed by 101 residents of the ten towns comprising the York Hospital service area: Berwick, Eliot, Kittery, Lebanon, North Berwick, Ogunquit, Sanford, South Berwick, Wells, and York. The survey results shown in the following charts highlight top findings regarding health issues, contributing health behaviors, and factors for a healthy community for both 2018 and 2021. The survey in 2021 also included several new questions about the impact of the COVID-19 pandemic and how people get their health information.

## Survey Respondents, 2018 and 2021

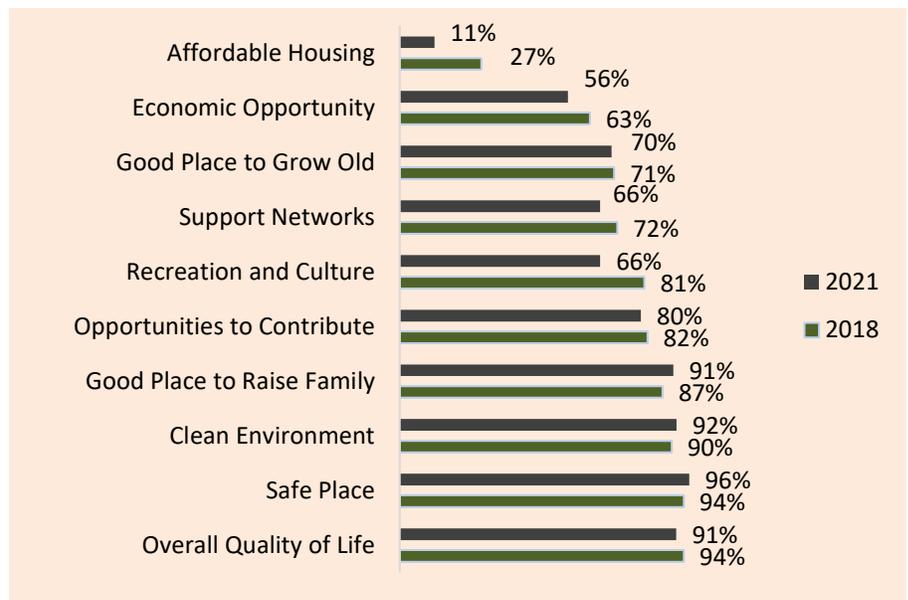
Demographics	2018	2021
Respondents	383	101
Male	19%	11%
Female	81%	88%
York Resident	28%	48%
Age 40-54	31%	31%
Age 55-64	20%	17%
Children under 21 living at home	42%	45%
Elders dependent on them for care	12%	21%
Employment status (full time)	50%	55%
Household income between \$100,000-\$149,999	NA	28%

Indicator	2018	2021
Describe themselves as healthy or very healthy	NA	95%
Satisfied with access to care	75%	64%
Ever sought service you could not find in area? "Yes"	34%	45%
Top 3 sought services not found in area	Mental Health	Pediatric
	Surgery	Mental Health
	Pediatrics	Substance Use
Top 3 places where respondents get their health information	NA	Doctors/Nurses
		Websites
		TV/Newspapers/Magazines

COVID-19 Pandemic	2021
Current health the same as before start of pandemic	63%
Current health worse than before start of pandemic	19%
Current financial status the same as before start of pandemic	73%
Current financial status worse than before start of pandemic	15%
Lost hours or wages but not their job	20%
Top three things negatively impacted by pandemic	Social Life
	Mental Health
	Family
Rate addressing infectious diseases more important since pandemic	64%

“As we emerge from the pandemic, the overall impact on health is becoming apparent, but not well measured in many of our standard data sources. For instance, data on those who experience mental health conditions due to anxiety of getting infected by COVID-19, the isolation, job loss, and other stressors of managing day-to-day routines during a pandemic may not be evident in the currently available data. We do know many had to put off getting care for health conditions, such as treatment for cardiovascular disease or getting screened for cancers. We may well see the effects of the pandemic from exposure, deferred care, stress, and interruptions in education for years to come, but many of the impacts will not be evident in any data collected and reported even in 2021.” – York County Health Profile, 2021

The list to the right reflects how survey respondents rated the assets in their communities in 2018 and 2021. The asset ratings reflect that people in southern York County feel positive about their community health and were similar from 2018 to 2021. However, the perception of housing, economy and recreation as assets in their community vary considerably. While the samples are not the same size, nor were they chosen randomly, it is interesting to consider the possible reasons for different responses.



#### Top 5 Health Concerns and Risk Factors, 2021 Survey Results:

- |                        |                                   |
|------------------------|-----------------------------------|
| 1. Mental Health       | 1. Lack of mental health services |
| 2. Drug Abuse          | 2. Drug and alcohol use           |
| 3. Obesity             | 3. Poor weight management         |
| 4. Infectious Diseases | 4. Hunger, food insecurity        |
| 5. Aging Problems      | 5. Lack of social services        |

# Population & Demographics

<p>YORK COUNTY POPULATION</p> <p><b>204,316</b></p>
<p>STATE OF MAINE POPULATION</p> <p><b>1,344,212</b></p>

	YORK	MAINE
Median household income	\$67,830	\$58,924
Unemployment rate	5.4%	5.4%
Individuals living in poverty	7.4%	10.9%
Children living in poverty	9.9%	13.8%
65+ living alone	26.6%	29.9%

	YORK COUNTY	
	PERCENT	NUMBER
American Indian/Alaskan Native	0.4%	903
Asian	1.3%	2,580
Black/African American	0.9%	1,778
Hispanic	1.7%	3,507
Some other race	0.2%	456
Two or more races	1.7%	3,403
White	95.5%	195,143

(York County Health Profile, 2021)

The table at right shows York Hospital’s immediate service area of ten towns in southern York County with a little over 90,000 people. The data is from the US Census, 2019 estimates at [www.census.gov](http://www.census.gov).

YH Service Area Towns	Pop.
Berwick	7,872
Eliot	6,717
Kittery	9,846
Lebanon	6,469
North Berwick	4,714
Ogunquit	1,577
Sanford	21,982
South Berwick	7,524
Wells	11,314
York	13,723
<b>Totals</b>	<b>91,738</b>

# Health Priorities

The following describes the most current data available for the top three priority areas as chosen by the hospital’s CHNA process: Mental Health, Substance Use and Access to Care. More complete data with detailed references, and statistical info including year and source of data is found in the York County Health Profile, 2021 at [www.maine.gov/dhhs/mecdc/phdata/MaineCHNA/documents](http://www.maine.gov/dhhs/mecdc/phdata/MaineCHNA/documents).

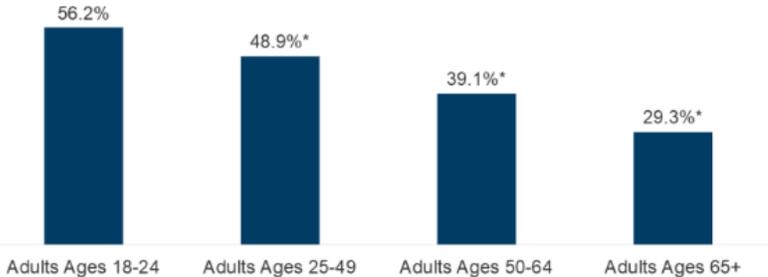
## Mental Health

The isolation, stress and illness brought on by the Covid-19 pandemic have exposed what professionals have known or experienced in the past decade or more: Maine has too few mental health services and high rates of poor mental health and low rates of treatment that are not improving.



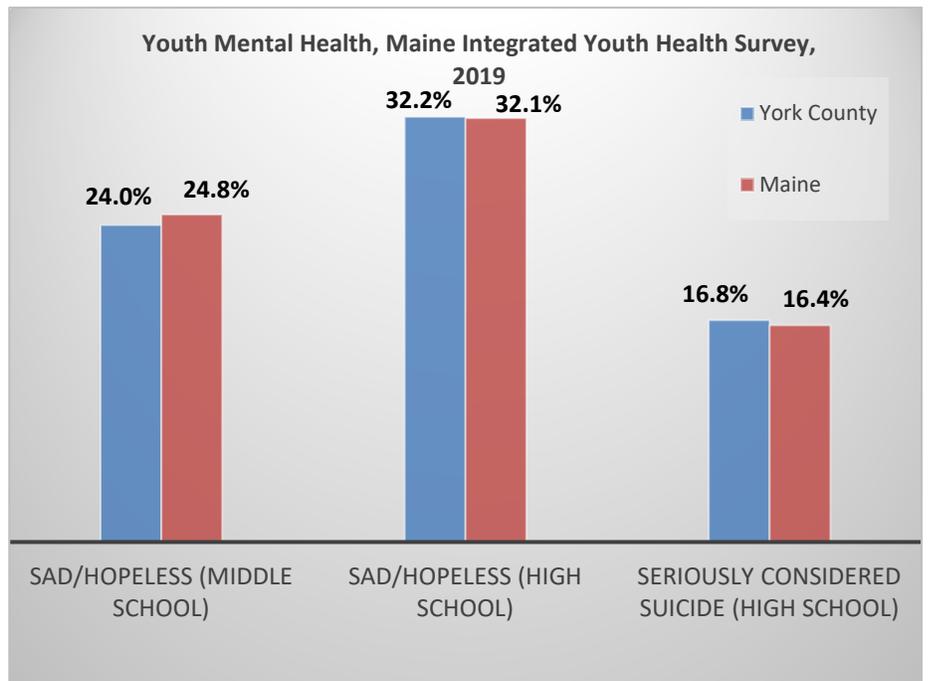
York Hospital and the community partners of the Choose To Be Healthy Coalition have prioritized educating staff and other caring adults to recognize mental health issues, know how to respond and where to get appropriate resources.

Share of Adults Reporting Symptoms of Anxiety and/or Depressive Disorder During the COVID-19 Pandemic, by Age



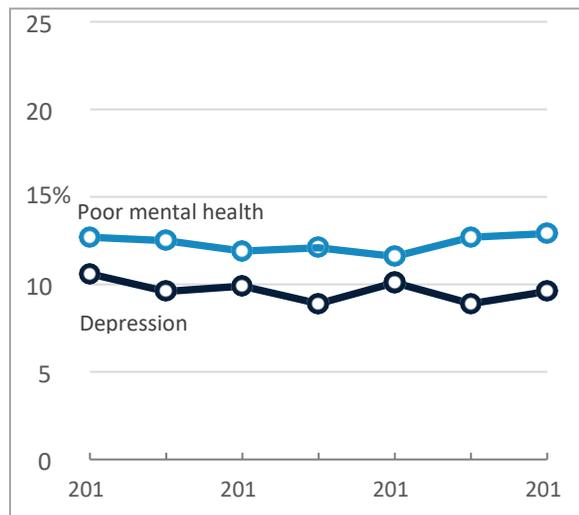
The chart at left from the Kaiser Family Foundation research shows the effects of the pandemic on mental health with young adults suffering the most.

The York County youth rate of depression has been and continues to be significantly higher than the rest of Maine. Many schools have prioritized “connections over content” this past year due to an increase in mental health issues exacerbated if not caused by the isolation and anxiety of the pandemic and reduced capacity of staff. Coalitions like CTBH have supported these efforts as well as provided awareness and education opportunities

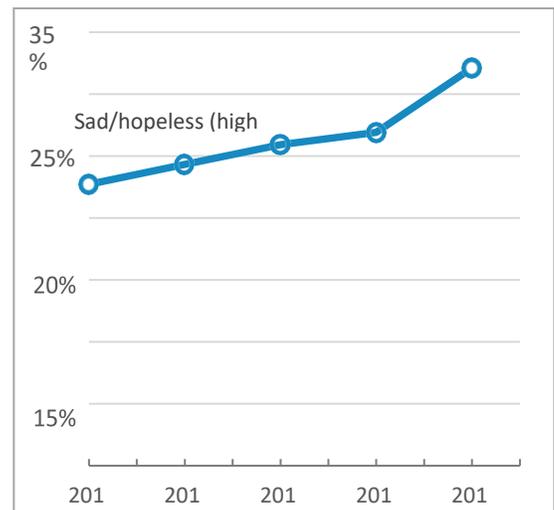


for parents and youth while helping train more professionals and parents through nationally recognized trainings like Mental Health First Aid and Psychological First Aid.

Poor mental health and depression in adults, and percentage of high school students who felt sad/hopeless



\*\*14+ days lost due to poor mental health (adult)  
 ‡ Current symptoms of depression (adult)



† Sad/hopeless for two weeks in a row (high school)

INDICATOR	YORK COUNTY			BENCHMARKS			
	POINT 1	POINT 2	CHANGE	MAINE	+/-	U.S.	+/-
<b>MENTAL HEALTH</b>							
Mental health emergency department rate per 10,000 population	—	2016-2018 <b>152.7</b>	N/A	2016-2018 <b>181.5</b>	—	—	N/A
Depression, current symptoms (adults)	2012-2014 <b>8.9%</b>	2015-2017 <b>9.3%</b>	○	2015-2017 <b>9.5%</b>	○	—	N/A
Depression, lifetime	2012-2014 <b>22.1%</b>	2015-2017 <b>22.8%</b>	○	2015-2017 <b>23.7%</b>	○	2017 <b>19.1%</b>	N/A
Anxiety, lifetime	2012-2014 <b>18.8%</b>	2015-2017 <b>20.1%</b>	○	2015-2017 <b>21.4%</b>	○	—	N/A
Sad/hopeless for two weeks in a row (high school students)	2017 <b>26.5%</b>	2019 <b>32.2%</b>	○	2019 <b>32.1%</b>	○	—	N/A
Sad/hopeless for two weeks in a row (middle school students)	2017 <b>21.6%</b>	2019 <b>24.0%</b>	○	2019 <b>24.8%</b>	○	—	N/A
Seriously considered suicide (high school students)	2017 <b>14.0%</b>	2019 <b>16.8%</b>	○	2019 <b>16.4%</b>	○	—	N/A
Seriously considered suicide (middle school students)	2017 <b>15.9%</b>	2019 <b>18.8%</b>	○	2019 <b>19.8%</b>	○	—	N/A
Chronic disease among persons with depression	—	2011-2017 <b>34.6%</b>	N/A	2011-2017 <b>30.8%</b>	○	—	N/A
Ratio of population to psychiatrists	—	2019 <b>20,812.0</b>	N/A	2019 <b>12,985.0</b>	N/A	—	N/A
Currently receiving outpatient mental health treatment (adults)	2012-2014 <b>17.7%</b>	2015-2017 <b>17.5%</b>	N/A	2015-2017 <b>18.0%</b>	N/A	—	N/A

**CHANGE** shows statistically significant changes in the indicator over time, based on 95% confidence interval.

- ★ Means the health issue or problem is **getting better** over time.
- ! Means the health issue or problem is **getting worse** over time.
- Means the change was not statistically significant.
- N/A Means there is not enough data to make a comparison.

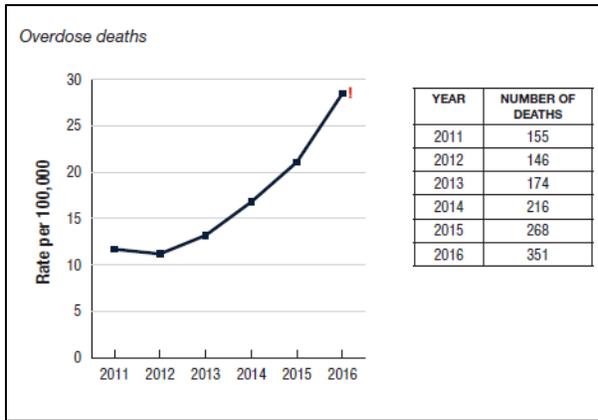
**BENCHMARK** compares York County data to state and national data, based on 95% confidence interval.

- ★ Means York is doing **significantly better** than the state or national average.
- ! Means York County is doing **significantly worse** than the state or national average.
- Means there is no statistically significant difference between the data points.
- N/A Means there is not enough data to make a comparison.

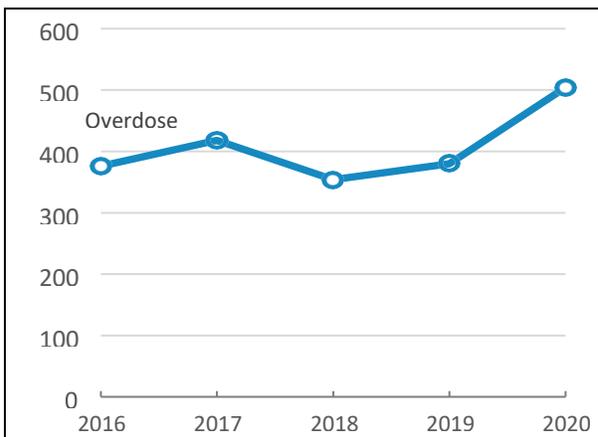
**ADDITIONAL SYMBOLS**

- \* Means results may be statistically unreliable due to small numbers, use caution when interpreting.
- Means data is unavailable because of lack of data or suppressed data due to a small number of respondents.

# Substance Use, Misuse and Use Disorders



As is shown in the two graphs at the left from the 2021 and the 2018 York County Profile, overdose deaths in Maine continue to increase steadily. While these include overdose from all drugs and many involve alcohol, opioids, in particular fentanyl, remain the primary drug causing this fatal trend.

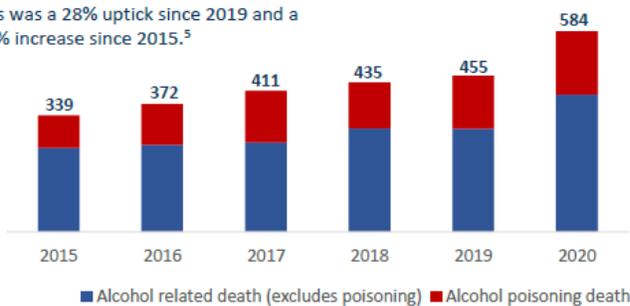


Both 2020 and 2021, years of the Covid pandemic with its attenuating increases in isolation, lack of services, and access to more deadly drugs have certainly been part of this trend. Sustaining connections to peers who are positive and support health are primary motivating factors in recovery that have been made more difficult due to the pandemic.

## MORTALITY

In 2020, based on preliminary data, there were a total of 584 Mainers who died from a cause related to alcohol, this was a 28% uptick since 2019 and a 72% increase since 2015.<sup>5</sup>

Alcohol Related Deaths in Maine: 2015 to 2020



The pandemic also brought looser alcohol sales laws allowing a substantial increase in adult sales and use. Maine alcohol related death rates also increased (Maine SEOW data, 2020).

We know from our school partners that they are seeing more and more severe mental health and behavioral issues than ever before. While mental health and drug use often go together with adolescents, we do not know yet how this has affected our youth drug use. There is anecdotal information that youth drug use, in particular vaping, *has* increased during the pandemic. We will not have better data until the release of the 2021 MIYHS sometime late in 2022.

	YORK COUNTY			BENCHMARKS			
INDICATOR	POINT 1	POINT 2	CHANGE	MAINE	+/-	U.S.	+/-
<b>SUBSTANCE USE</b>							
Overdose deaths per 100,000 population	2019 27.5	2020 35.4	○	2020 37.3	○	2019 21.5	N/A
Drug-induced deaths per 100,000 population	2007-2011 12.8	2015-2019 35.2	!	2015-2019 29.5	!	2019 22.8	N/A
Alcohol-induced deaths per 100,000 population	2007-2011 6.7	2015-2019 10.9	!	2015-2019 11.6	○	2019 10.4	N/A
Alcohol-impaired driving deaths per 100,000 population	2018 3.4	2019 1.4	N/A	2019 3.8	N/A	2019 3.1	N/A
Drug-affected infant reports per 1,000 births	2017 40.7	2018-2019 41.0	○	2018-2019 73.7	★	—	N/A
Chronic heavy drinking (adults)	2012-2014 8.2%	2015-2017 9.5%	○	2015-2017 8.5%	○	2017 6.2%	N/A
Binge drinking (adults)	2012-2014 17.9%	2015-2017 18.7%	○	2015-2017 17.9%	○	2017 17.4%	N/A
Past-30-day marijuana use (adults)	2013-2016 10.0%	2017 13.4%	○	2017 16.3%	○	—	N/A
Past-30-day misuse of prescription drugs (adult)	2012-2016 1.1%	2013-2017 0.8%*	N/A	2013-2017 1.0%	○	—	N/A
Past-30-day alcohol use (high school students)	2017 23.4%	2019 24.0%	○	2019 22.9%	○	—	N/A
Past-30-day alcohol use (middle school students)	2017 3.3%	2019 3.5%	○	2019 4.0%	○	—	N/A
Binge drinking (high school students)	2017 32.1%	2019 31.2%	○	2019 32.7%	○	—	N/A
Binge drinking (middle school students)	2017 0.9%	2019 1.1%	○	2019 1.3%	○	—	N/A
Past-30-day marijuana use (high school students)	2017 18.4%	2019 21.7%	○	2019 22.1%	○	—	N/A
Past-30-day marijuana use (middle school students)	2017 3.1%	2019 3.3%	○	2019 4.1%	○	—	N/A
Past-30-day misuse of prescription drugs (high school students)	2017 6.1%	2019 4.9%	○	2019 5.0%	○	—	N/A
Past-30-day misuse of prescription drugs (middle school students)	2017 1.4%	2019 2.7%	○	2019 3.0%	○	—	N/A
Narcotic doses dispensed per capita by retail pharmacies	2019 11.1%	2020 10.5%	N/A	2020 12.1%	N/A	—	N/A
Overdose emergency medical service responses per 10,000 population	2019 70.5	2020 72.9	○	2020 76.7	○	—	N/A
Opiate poisoning emergency department rate per 10,000 population	—	2016-2018 12.1	N/A	2016-2018 9.9	!	—	N/A
Opiate poisoning hospitalizations per 10,000 population	—	2016-2018 1.3	N/A	2016-2018 1.4	○	—	N/A

# Youth Health (Maine Integrated Youth Health Survey Selected Results, 2009-2019)

The MIYHS was conducted in November of 2021. Results will be available in 2022.

Percentage of York County High School students who:	'09	'11	'13	'15	'17	2019	ME 2019
<b>Tobacco Use</b>							
Smoked cigarettes in the past 30 days	18%	16%	12%	10%	9%	6%	7%
Think obtaining cigarettes is easy or very easy	72%	68%	61%	57%	53%	48%	50%
Think daily tobacco use is not harmful (1+ packs/day)	11%	10%	9%	9%	12%	11%	11%
Learned about dangers of tobacco past year	NA	43%	45%	45%	42%	NA	43%
<b>Alcohol Use</b>							
Had at least one drink of alcohol, past 30 days	32%	29%	27%	25%	23%	24%	23%
Had 5 or more drinks of alcohol in a row, past 30 days (binge drinking) of those who said yes to past 30 day drinking	NA	NA	NA	NA	32%	32%	31%
Think obtaining alcohol is easy or very easy	71%	69%	66%	64%	63%	60%	61%
Think 5 or more drinks in a row 2+times a week is <i>not</i> harmful	24%	20%	18%	17%	18%	18%	18%
<b>Marijuana Use</b>							
Used marijuana at least once in lifetime	39%	38%	NA	36%	31%	36%	36%
Used marijuana one or more times, past 30 days	24%	24%	23%	21%	18%	22%	22%
Think parents would <i>not</i> think their marijuana use is wrong	15%	15%	15%	17%	19%	19%	20%
Think obtaining marijuana is easy or very easy	61%	61%	57%	56%	51%	51%	53%
Think "regular" marijuana use is <i>not</i> harmful ("regular" changed to 1 or 2 X week in 2015)	40%	45%	52%	60%	65%	67%	67%

Percentage of York County High School students who:	'09	'11	'13	'15	'17	2019	ME 2019
<b>Use of Other Substances</b>							
Used a vapor product, past 30 days	NA	NA	NA	NA	17%	29%	29%
Used a vapor product, with nicotine	NA	NA	NA	NA	28%	57%	56%
Used a vapor product, with marijuana	NA	NA	NA	NA	NA	13%	13%
Sniffed glue, breathed contents of spray cans, or inhaled paints or sprays to get high, at least once in lifetime	14%	12%	9%	7%	7%	7%	7%
Used a prescription drug without a doctor's prescription one or more times, past 30 days	10%	8%	7%	6%	6%	5%	5%
<b>Safety and Protective Factors</b>							
Offered, given or sold illegal drugs on school property, past 12 months	23%	26%	23%	21%	19%	21%	23%
Bullied on school property, past 12 months	24%	27%	27%	23%	21%	23%	23%
Rode in car driven by someone who had been drinking, past 30 days	19%	17%	15%	14%	15%	13%	14%
Rode in car driven by someone using illegal drugs (including marijuana), past 30 days	26%	24%	21%	17%	17%	17%	16%
Think they would <i>not</i> get caught drinking by parents	60%	58%	52%	49%	49%	50%	50%
Think they would <i>not</i> get caught drinking by police	87%	86%	84%	82%	81%	81%	83%
Have 1 or more teacher that cares and supports them	77%	79%	81%	79%	82%	80%	81%
<b>Depression and Suicide</b>							
In the past 12 months, felt so sad or hopeless almost every day for 2 weeks or more in a row	23%	24%	25%	25%	27%	32%	32%
Seriously considered attempting suicide, past 12 months	14%	14%	16%	15%	14%	17%	16%

## Access to Care, Social Determinants of Health and Health Status

According to Healthy People 2030, many people in the United States don't get the health care services they need. Healthy People 2030 strategies focus on improving health by helping people get timely, high-quality health care services. About 1 in 10 people in the United States don't have health insurance (Healthy People 2030, [www.health.gov/healthypeople](http://www.health.gov/healthypeople)).

In York County, approximately 8-9% do not have insurance. We know that people without insurance are less likely to have a primary care provider, and may not be able to afford the health care services and medications they need. York Hospital will continue to expand strategies through its Health Care Help Center and Quality Improvement to increase insurance coverage rates of its patients, critical for making sure more people get important health care services, like preventive care and treatment for chronic illnesses. The Hospital will also continue to offer free transportation and financial support, and prescription drug assistance.

INDICATOR	YORK COUNTY			BENCHMARKS			
	POINT 1	POINT 2	CHANGE	MAINE	+/-	U.S.	+/-
<b>DEMOGRAPHICS</b>							
Veterans	2007-2011 13.3%	2015-2019 10.2%	N/A	2015-2019 9.6%	N/A	2019 6.9%	N/A
Gay, lesbian and bisexual (high school students)	2017 10.7%	2019 12.5%	N/A	2019 12.4%	N/A	—	N/A
Gay, lesbian and bisexual (adults)	—	2011-2015 & 2017 3.6%	N/A	2011-2015 & 2017 3.5%	N/A	—	N/A
Transgender youth (high school students)	—	2019 1.5%	N/A	2019 1.6%	N/A	—	N/A
Persons with a disability	2009-2011 12.9%	2015-2019 15.0%	!	2015-2019 16.0%	★	2019 12.7%	N/A
<b>SOCIAL DETERMINANTS OF HEALTH</b>							
Individuals living in poverty	2009-2011 8.8%	2015-2019 7.4%	○	2015-2019 11.8%	★	2019 12.3%	N/A
Children living in poverty	2018 10.5%	2019 9.9%	○	2019 13.8%	★	2019 16.8%	★
Children eligible for free or reduced lunch	2020 32.3%	2021 28.8%	N/A	2021 38.2%	N/A	2017 15.6%	N/A
Median household income	2007-2011 \$56,552	2015-2019 \$67,830	★	2015-2019 \$57,918	★	2019 \$65,712	N/A
Unemployment	2018 3.0%	2020 5.4%	N/A	2020 5.4%	N/A	2020 8.1%	N/A
High school student graduation	2019 89.8%	2020 90.5%	N/A	2020 87.4%	N/A	2019 87.1%	N/A
People living in rural areas	—	2019 53.9%	N/A	2019 66.2%	N/A	—	N/A
Access to broadband	2015 99.2%	2017 99.3%	N/A	2017 88.6%	N/A	2017 90.4%	N/A
No vehicle for the household	2007-2011 1.3%	2015-2019 1.8%	○	2015-2019 2.1%	○	2019 4.3%	N/A

INDICATOR	YORK COUNTY			BENCHMARKS			
	POINT 1	POINT 2	CHANGE	MAINE	+/-	U.S.	+/-
Persons 65 years and older living alone	2007-2011 44.4%	2015-2019 26.6%	N/A	2015-2019 29.0%	N/A	2019 26.6%	N/A
Households that spend more than 50% of income toward housing	—	2015-2019 12.3%	N/A	2015-2019 12.0%	○	—	N/A
Housing insecure (high school students)	2017 3.3%	2019 3.0%	○	2019 3.3%	○	—	N/A
Adverse childhood experiences (high school students)	—	2019 21.1%	N/A	2019 21.3%	○	—	N/A
Associate's degree or higher among those age 25 and older	2007-2011 37.6%	2015-2019 43.0%	N/A	2015-2019 41.9%	N/A	2019 41.7%	N/A
Commute of greater than 30 minutes driving alone	—	2015-2019 41.9%	N/A	2015-2019 32.9%	N/A	2019 37.9%	N/A
<b>GENERAL HEALTH STATUS</b>							
Fair or poor health (self-rated)	2011-2013 13.4%	2015-2017 17.6%	!	2015-2017 16.2%	○	2018 17.3%	N/A
14 or more days lost due to poor physical health	2012-2014 11.6%	2015-2017 12.7%	○	2015-2017 12.8%	○	2017 12.3%	N/A
14 or more days lost due to poor mental health	2012-2014 12.0%	2015-2017 13.1%	○	2015-2017 12.4%	○	2017 12.4%	N/A
Three or more chronic conditions	2012-2014 12.9%	2015-2017 15.7%	○	2015-2017 15.6%	○	—	N/A
<b>OVERALL MORTALITY</b>							
Overall death rate per 100,000 population	2007-2011 691.9	2015-2019 726.8	!	2015-2019 764.9	★	2019 715.2	N/A
Rate of years of potential life lost per 100,000 population	2012-2014 5,815.4	2016-2018 7,166.9	!	2016-2018 7,009.9	○	2016-2018 6,900.0	N/A
Life expectancy	—	2017-2019 79.2	N/A	2017-2019 78.7	○	2018 78.7	N/A
<b>ACCESS</b>							
Uninsured	2009-2011 9.1%	2015-2019 6.7%	★	2015-2019 7.9%	★	2019 9.2%	N/A
MaineCare enrollment (all ages)	2019 18.7%	2020 22.0%	N/A	2020 29.1%	N/A	2020 24.1%	N/A
MaineCare enrollment (ages 0-19)	2019 30.5%	2020 34.7%	N/A	2020 43.8%	N/A	—	N/A
Ratio of population to primary care physicians	—	2019 1,704.0	N/A	2019 1,332.0	N/A	—	N/A
Usual primary care provider (adults)	2012-2014 90.4%	2015-2017 90.4%	○	2015-2017 87.9%	★	2017 76.8%	N/A
Primary care visit to any primary care provider past year	2012-2014 72.5%	2015-2017 73.1%	○	2015-2017 72.0%	○	2017 70.4%	N/A
Cost barriers to health care	2011-2013 11.3%	2015-2017 8.6%	○	2015-2017 10.6%	○	2016 12.0%	N/A
Primary care visits more than 30 miles from the patient's home	—	2019 18.8%	N/A	2019 20.0%	N/A	—	N/A

# Group Discussion Notes

- York County Forum
- CTBH Coalition Advisory Board
- Regional Law Enforcement Group
- Youth Focus Group (students from York High School TIDALWAVSE Group)

The following are notes from several discussions with community partners about health priorities and the needs and assets that exist for each. Because of the pandemic, discussions were held via zoom using an electronic tool to allow ease of expression. While the Forum discussion reflects thoughts about all health priorities, the others focused on substance use and mental health.

## York County CHNA Forum

### Resources/Assets +

Healthy aging - we have two new programs in the area that address healthy aging at the hospitals + 1	Mental Health - Inpatient, PHP IOP IMAT ACT TEAM, Outpatient Services + 0
mental health: the use of the internet to get in touch with mental health professionals when you cannot get to appointment on your own + 0	YCCAC - York County Transport is a program that provides 1 free ride (to/from) any medical/related appt. per month for all adults + 0
Hopefully pandemic has made everyone more fluent with remote healthcare access + 0	Existing agencies to provide education, information, and access to services and supports & Community groups + 0
Coalitions that have funding to so SUD prevention There are 3 currently there should be more and more funding + 0	Covid relief funds + 0
Experienced people and programs who help older people like Diane Gerry at Sanford Housing Candice Simeoni Investigator of Elder Crime + 1	our local law enforcement offices and town offices are growing their efforts to support community needs in many areas + 3

### Gaps/Barriers +

Mental Health (41); Social Determinants of Health (35); Substance Abuse (33); Access to Care (23); Older Adult + (Health/Healthy Aging (18) + 3	mental health-limited psychiatrist and therapists + 3
Lack of treatment for youth mental health and addiction + 5	mental health - education on different levels of care + 3
SUD and alcohol use - rapid access for MAT + 2	Access to care - education about non-ER options for free or low-cost care (all services) + 2
lack of access to detox for SUD + 2	Transportation to access all areas to access healthcare, MH, SUD treatment, education + 2
Lack of data of older population to address the real issues of isolation and ultimately cognitive decline as well as vulnerability + 2	Cost and Availability of Housing + 4

## CTBH Advisory Ideaz Board: Mental Health and Substance Use

### Assets/Resources +

Choose to be Healthy! + 4	Sweetser grant to provide free trainings + 0
Coming together as a group to see where we can collaborate/making sure there isn't over lap + 1	many individuals in community passionate about this work + 0
We have all this specialized and technical knowledge. + 0	

### Gaps/Needs +

lack of "normal" teen Socialization + 4	How to have healthy conversations about SA MH + 0
counseling services + 1	not working with or seeing one another outside of Advisory Board Meetings + 1
Challenging to engage youth + 0	strategies for reaching parents to share prevention information + 0
Networking during a pandemic is challenging + 0	

### Other? Questions? +

Research based participation recruitment/retention strategies + 1	Media literacy a gap in our youth and schools etc + 0
Is there an opportunity for us to be more aggressive with educating school districts? + 0	Can we pull together district superintendents to help get some buy-in from the schools? + 0

# Youth Discussion Group, Mental Health and Substance Use

---

Youth from the TIDALWAVSE Leadership and Sober Friends groups from York High School participated in this discussion in November of 2021. We thank them for their expertise and thoughtful comments. We acknowledge that they do not represent all youth in our area.

## Mental Health *Assets* in Your Community

- Having opportunities and events to get involved in the community and interact with people.
- If I am being completely honest I'm not sure about the entirety of resources for mental health in our community. I am only aware of the Yellow Tulip Project, and our counselors available at the high school.
- An asset that we have in our community around mental health is the members of student services.
- We have a varied, versatile crew of mental health professionals within our schools!
- Resources available for all, mostly students, for people to go when needing assistance or someone to talk to. Our community has a large variety of health resources, hospitals, and doctor offices in the community that is available for assistance.
- An asset we have in our community that we have for mental health is the student services along with the help lines.
- We have a variety of mental health providers/therapists that can help people improve their mental health. Another asset we have in our community is the multitude of groups and organizations that people can connect with. Through those organizations, people can form friendships with others and those connections are beneficial to mental health.
- I think that there is lots of great support from the teachers at YHS, most are very understanding of the challenges that many are dealing with right now. Our school counselors are also great resources who truly care about the students' well-being.

## Mental Health *Needs* in Your Community

- I think we need more options for people to reach out for help, not just general support groups. We need more individualized support or options for people with mental health struggles.
- I think we need more affordable options for mental health care. Our community has the impression of being very wealthy. And although there is a lot of wealth, there are people in every community that are not wealthy and they are often overlooked, which is why I think that we need to put more resources into providing affordable mental health care for our community.
- Because I am only aware of resources within our school community, I would say that we

need more community based mental health resources available to all age groups and people

- A need we have in our community around mental health is more resources.
- We need other faculty members in our school to partake in training around mental illness/ health, as well as how to align themselves with the counselors/ other professionals - to achieve comprehensive student achievement
- I think we need greater recognition of mental health in our community and greater awareness/acknowledgment of it. Anyone of any background can be affected by negative mental health, and I think we as a community need to recognize it as a greater issue in society.
- Something we need is more discussion over it but casually so it is not awkward
- I think that it would be great to have more educational programs especially geared towards the older generations for awareness about mental health. I think that some people have trouble understanding the struggles many face in regards to their mental health.

“Anyone, of any background, can be affected by negative mental health; and, I think we, as a community, need to recognize it as a greater issue in society.” ~ York teen

## Substance Use Prevention and Treatment Assets

- Groups like Tidalwvse and Soberfriends that provide support, not just for teenagers.
- Again, I am only really aware of the resources within the school system. Tidalwvse and Soberfriends are the most prominent resources and groups.
- An asset we have that addresses substance use prevention is Tidalwvse.
- We have several prominent groups that are dedicated to raising awareness and supporting healthy, chemical-free lifestyles.
- There are resources at the hospital and doctors' office exhibiting the negative influences of substance use, such as in the form of infographics. Also, programs offered to assist people who were affected by substance abuse. Additionally, programs like Tidalwvse in our schools that advocate against substance use, and administrators who can help students affected by this.
- Something good we have for substance abuse prevention is the student services and Mrs. Damiano.
- Tidalwvse and Soberfriends! I think that Substance Use prevention is most important for younger ages like high school students because that is when most people are first exposed to substance use. Tidalwvse members show young people that it is cool and healthy to live a substance-free lifestyle and provide them with opportunities to have fun all while promoting substance-free practices.
- I'm a bit biased but I think that Tidalwvse is something beneficial that we have in our community that really makes an impact on substance use prevention.

# Substance Use Prevention and Treatment Needs

- I think we need to make it more known that people in our town who we think wouldn't struggle, do struggle. It needs to become more understood in our community and we need to be more accepting and caring of people with substance abuse struggles.
- We need more communal resources and groups that connect a wide variety of people that don't exclude based on age.
- A need we have in our community around substance use prevention is that middle schoolers really need to be talked to about substance use.
- We need professionals like Ms. Hatch to be better understood for their capabilities and expertise, not as the ones imposing punishment.
- I think that a possible need is more treatment resources for high schoolers who are already using substances in a way that is shame free and that encourages students to get the help they need.
- A program or organization outside of the schools and hospitals that offer rehabilitation and resources helping those affected by substance use themselves or by those around them. Although there are many online ads that show the consequences of using, I think there needs to be greater awareness publicly in our community and public places.
- And something we need is more discussion around it because I can't remember the last time we even talked about it as a high school.
- I think we need more recognition that substance use is a prominent problem in our community. The stigmatization and ignoring of the issue of substance use does nothing to help solve the problem. If we can make people feel comfortable enough to come forward and talk about their substance use, that will allow us to have a more productive conversation and work towards improving the problems around substance use.

## Law Enforcement Partners Discussion Group, Mental Health and Substance Use

<b>Gaps/Barriers/Needs</b>
Access to resources
Limited/no beds for youth in crisis. Spending days/weeks in emergency room waiting.
Cultural awareness providers
Coordination with school health classes, and/or parent info groups
Lack of intensive outpatient treatment for youth/ split funding
Need to increase the amount of available mental health providers in our areas
<b>Assets/Resources</b>
SRO Coordinator in our area to help coordinate training on Mental Health and SUD prevention
Coalition that fosters collaboration with community partners

# Community Resources

---

- Teen Text Line 1-515-TEXT – for youth peer support
- Call 211 or go to [211maine.org](http://211maine.org) for most Maine resources
- For local therapists – go to [www.psychologytoday.com](http://www.psychologytoday.com) to search your area
- Maine Department of Education SEL4ME <https://sel4me.maine.gov/> for parent resources, webinars and classroom lessons
- Partnership to End Addiction <http://www.drugfree.org>
- Choose to Be Healthy Coalition [www.ctbh.org](http://www.ctbh.org)
- Northern New England Poison Control 800-222-1222 24/7
- The Recovery Center at York Hospital 351-2118
- Maine Crisis Line 1-888-568-1112
- National Suicide Prevention Lifeline 1-800-273-talk (8255)
- York Hospital Healthcare Help Center 207-351-2345
- York Hospital Recovery Center 207-351-2118