



Community Health Needs Assessment 2024

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Community Health Network Community Health Needs Assessment

Executive Summary

Stephen F. Austin Community Health Center, Inc. (dba) **Community Health Network** (MyCHN) (Center) is a federally qualified health center (FQHC) whose mission is to provide quality care that uplifts, supports, and shapes healthy communities while addressing financial and social barriers.



The vision of MyCHN is to be a leader in providing quality services and programs that enhance the lives of the people in our community.



The values of the Center are quality care at reasonable costs, education to promote healthy living, access to needed care, transparency in all aspects of our operations, competent and empathetic staff, high professional standards and commitment to advances in healthcare.



MyCHN was formed in April of 2008. The Center received its first funding award from the Bureau of Primary Health Care Health Resources Services Administration (BPHC-HRSA) in December 2008. Throughout 2009 the Center established compliance with the 21 BPHC program requirements and the resources to operate effectively as a Federally Qualified Health Center. MyCHN hired the current Chief Medical Officer and Chief Executive Officer in April 2010. Both brought significant leadership experience which is demonstrated in the accelerated growth and innovation MyCHN enjoys today.

MyCHN operates in accordance with national, state and local rules and regulations. These include the By- Laws established by the consumer majority Board of Directors; and healthcare quality standards established by the Centers for Medicare and Medicaid Services, the Bureau of Primary Health Care and the Texas Health and Human Services Commission. MyCHN complies with all guidelines for the Health Resources and Services Administration for Federally Qualified Health Centers, as noted upon completion of the August 2023 HRSA/BPHC Operational Site Visit

MyCHN achieved Commission on Accreditation of Rehabilitation Facilities (**CARF**) Level 3 for three years in July 2023. The Three-Year Accreditation applies to the following programs/services:

- Integrated Behavioral Health Primary Care: Comprehensive Care (Adults)
- Integrated Behavioral Health/Primary Care: Comprehensive Care (Children and Adolescents)
- Opioid Based Treatment: Addictions Pharmacotherapy (Adults)
- Opioid Based Treatment: Addictions Pharmacotherapy (Children and Adolescents)
- Governance Standards Applied

MyCHN applied for the CARF Certification at the Integrated Behavioral Health Primary Care) Women and Children's Clinic; the OBOT (MAT Program) at the MyCHN Adoue, MyCHN Pearland, MyCHN Freeport, MyCHN Bacliff, and MyCHN BCDC locations. MyCHN applied for the Governance Standards Applied for the Organization.

CARF International (<https://carf.org>) is an independent, non-profit accreditor of health and human services. CARF Certification is the only one recognized by the American Society of Addiction Medicine for the assessment, verification, and certification of residential substance use disorder treatment services.

MyCHN seeks to be the medical home for all patients receiving care at any of the in scope¹⁴ service sites and three mobile units. Seven (7) locations are National Committee for Quality Assurance Patient Centered Medical Home (**PCMH**) Transformational accredited:

- Adoue Family Health Center
- Freeport Community Health Center
- Women & Children's Health Center
- MyCHN League City
- Bay Area Family Care
- Pearland Family Health Center
- MyCHN Clute

MyCHN is seeking PCMH designation for the remaining locations this year.

PCMH is a model or philosophy of health care delivery that emphasizes patient-centered, comprehensive, team-based, coordinated, accessibility, and is focused on quality and safety. The "medical home" is not a place, but a philosophy of care that supports patients throughout their healthcare journey, addressing everything from the simplest to the most complex health conditions. The PCMH is a place that should "feel like home" - where patients are treated with respect, dignity, and compassion, fostering strong and trusting relationships with providers and staff. A PCMH site requires a team care model that promotes accessibility, compassion, and transparency, and is a site built on trust and open communication. At the heart of the PCMH model is the commitment to treating patients as partners in their care by actively involving the patient in decision-making and respecting their preferences and values by understanding each patient's unique backgrounds, including social, cultural and emotional needs. Through this approach, patients are empowered to take charge of their health, leading to better outcomes and a higher quality of life.

Each year, HRSA Health Center Program awardees and look-alikes are required to report a core set of information, including data on patient characteristics, the services provided, clinical processes and health outcomes, patients use of services, staffing, costs and revenues as part of a standardized reporting system known as the Uniform Data System (UDS). HRSA awards Community Health Quality Recognition (CHQR) badges recognizing Health Center Program awardees and look-alikes (LALs) that have made notable quality improvement achievements in the areas of access, quality, health equity, health information technology, and social risk health factors screenings for the most recent UDS reporting period.

MyCHN received five Community Health Center Quality Recognition (CHQR) awards in 2024 from HRSA for 2023 activities.¹



For increasing the total number of patients served and the number of patients who receive at least one comprehensive service.



For meeting all criteria to optimize HIT services that advance telehealth, patient engagement, interoperability, and collection of social determinants of health to increase access to care and advance quality of care.



Recognizes health centers that are screening for social risk factors impacting patient health and are increasing access to enabling services.



Recognizes health centers that qualify for the Access Enhancer badge and demonstrate at 10% improvement during the two most recent consecutive UDS reporting years and/or meet specific benchmarks for all racial/ethnic groups served within the most recent USD reporting year.



Designates Patient Center Medical Home Recognized clinic locations

Needs Assessment Data

MyCHN utilizes data from many sources to develop the community health needs assessment. MyCHN incorporated health information from public datasets of Brazoria County developed by the Area Health Education Center – East in conjunction with UTMB, Texas Department of State Health Services, [Texas.Counties.Net](#), Brazosport Regional Health System, and The Episcopal Health Foundation; Census data, Community Health Assessments from community organizations and MyCHN’s patient satisfaction survey information assessing the patient experience.

Community action and organizational strategic action plans will be developed based on the Community Health Network’s Community Health Needs Assessment in conjunction within the scope of PCMH and services of a Federally Qualified Health Center.

Purpose

The community needs assessment was developed to describe the status of the designated population; to identify areas for health improvement; to determine factors that contribute to health issues; to ensure the mission of the organization is extended as it relates to improving the health care needs of the community; to identify areas of focus that exists in the community as they relate to health care and within the scope of services of MyCHN; to ensure the health care needs of individuals in the community are met with the collaboration of other health care providers; to strengthen the continuum of patient care; and to ensure MyCHN adequately identifies and addresses the Social Determinants of Health needs of the patient population as it moves towards to a Value Based Care payment structure.

Organizational Description

MyCHN is a thriving community care provider delivering whole person integrated care in recognition of the patient centric model of health that acknowledges that optimal health is achieved by caring for all aspects of a person, their physical, oral, mental/behavioral and social determinants of health. MyCHN provides whole person care with integrated appointments where one or multiple care teams address patients’ chronic conditions in recognition that one body system impacts another, e.g., diabetes creates emotional stress and often leads to depression. In this situation MyCHN’s primary care and behavioral health care teams both see the patient during the same visit. In other scenarios, the dental, women’s health and behavioral health team will care for a prenatal patient at a whole person care appointment. MyCHN also provides appointments for primary care, oral health and behavioral health services separately. All services are available to anyone in need of health care, including the low-income, uninsured and underinsured with household incomes below 200% poverty level population of Brazoria, Galveston and Southeast Harris Counties and across multiple counties in southeast Texas along the Gulf Coast and the Greater Houston Metro Area.

MyCHN was formed as a private, not-for-profit FQHC in April of 2008 with a single clinic and administrative site. Today MyCHN operates 14 full time health centers: two full-time, full-service clinic locations in Alvin, two in Pearland, two in Lake Jackson, two in Angleton, and a Clute and Freeport location in Brazoria County; a Bacliff and League City location in Galveston County; and a Scarsdale

and Pasadena location in Harris County. MyCHN is in the process of converting its Callaway Admin site to a Service Site to provide primary care and behavioral health (psychotherapy and psychiatry), Medication Assisted Treatment (MAT) and assists with co-occurring mental health and opioid use for patients at the 2,753 sq. ft Callaway location in Alvin, Texas. MyCHN's therapist will provide timely counseling interventions while collaborating with psychiatry for psychotropic medications and consulting with the patient's primary care provider for referral recommendations. MyCHN will integrate MAT services into primary care to treat substance use disorders and MyCHN's Crisis Prevention Program will assist patients experiencing mental health crisis at the new location. MyCHN is partnering with Alvin Police Department to provide services supporting jail diversion. The location will increase access and reduce Social Determinant of Health barriers by offering immediate in-person and virtual care services while improving mental health outcomes for patients, eliminating unnecessary emergency room visits for mental health needs.

MyCHN obtained a new Administrative office located in Pearland which houses a variety of administrative staff: MyCHN's Executive members, the information technology team, medical records, quality and risk management, finance, human resources, and facilities staff.

A new adventure for MyCHN is the expansion of its current clinic site in Clute, Texas. MyCHN applied for a Federally Qualified Incubator Program Grant from the Department of State Health Services to initiate a Capital Improvement construction and equipment project. The project will allow MyCHN to renovate space and expand services at MyCHN's Brazoria County Dream Center location (MyCHN Clute); provide salary support; cover equipment costs to furnish the new exam room and the dental clinic. Renovations are currently in progress. MyCHN has plans to purchase 3 equipment for dental operatories and dental hand pieces with the grant funding. MyCHN's existing clinic provides limited medical, behavioral health and pharmacy services and renovations will transform into a full-service site to provide whole-person healthcare services. MyCHN will incorporate social determinants of health (SDOH) to improve health outcomes and provide comprehensive services. The goal is to expand the medical exam rooms to accommodate community needs. The other goal is to open a dental clinic within the site to service the area in Lake Jackson, Clute and the surrounding areas. The newly added dental services to be offered are preventative exams, oral health and hygiene, endodontics and prosthodontics for all ages. The estimated opening of the renovated site will be at the end of October 2024.

The Center has a Mobile Unit equipped to provide medical, limited oral health; and behavioral health services via telehealth. MyCHN's second Mobile Unit is designated for HIV testing, Pre-exposure prophylaxis (PrEP) Medication and outreach and education services. MyCHN's HIV Patient Navigator team take the Mobile Unit into the community and provide PrEP using telehealth services. The second Mobile Unit is already in scope and is outfitted with a dual use exam table, sink, wheelchair lift, and refrigerator. MyCHN secured the second Mobile Unit through the HRSA FY 2021 3-year American Rescue Health Center Plan Capital Improvement funding.

MyCHN continually strives to extend its reach to serve those in greatest need. MyCHN provides primary medical care at two intermittent locations on a part-time basis at Brazos Place, an inpatient detox center, and the Salvation Army Shelter in Freeport.

MyCHN purchased a 9,593 sq. ft. building in Freeport in 2022. MyCHN plans to renovate the space into a full-service clinic, which will provide a wide range of medical services, behavioral health and oral health services to meet the diverse needs of the community. To finance the renovations and operations, MyCHN is actively pursuing grant funding and organizing fundraisers. The overall goal of this initiative is expansion of healthcare services to the Freeport and surrounding community.

MyCHN employs 18 physicians, 28 mid-level medical providers, 10 dentists, 4 hygienists, 17 therapists, 10 mental health psychiatric nurse practitioners, and contracts with one psychiatrist to ensure whole person care at all sites.

MyCHN serves *all individuals regardless of insurance type* and assists those who are low-income or uninsured with household incomes below 200% poverty level and those who lack access to quality services in their communities. State, federal, and private foundation grants help fund the cost of caring for the uninsured and low-income. MyCHN accepts patients that have Medicaid, Medicare, private insurance or are uninsured that pay full pay, cash pay or qualify for a sliding fee scale. Dedicated staff provide Trauma Informed superior care that is tailored to the needs of the individual, resulting in better clinical outcomes and an improved patient experience.

The MyCHN Pharmacy is staffed with 13 full-time pharmacists, and the “virtual pharmacy” or TelePharmacy is staffed with 17 certified pharmacy technicians and four pharmacy navigators. The pharmacy navigators play an essential role with prescription processing by expediting prescription refills, completing prior authorizations, and ensuring prescription delivery. The Scarsdale Pharmacy Class A pharmacy is URAC Accredited for specialty licenses for mail order and specialty drugs. All MyCHN pharmacies and the Parkwood location offer very reduced priced brand-name medications for registered patients through MyCHN’s participation in the 340 Drug Discount Program. Pharmacy services are a key element of integrated services and play a vital role in whole person care. MyCHN expanded the number of pharmacies it contracts with to ensure patients living throughout its service area have access to needed pharmaceuticals.

MyCHN has five in-house Class A Pharmacies at its Freeport, Scarsdale, Adoue, League City and Silverlake clinic sites, and six Telepharmacies at the Women and Children, Pearland, BCDC, both Angleton sites and Pasadena. MyCHN pharmacies provide brand name prescriptions at a significantly reduced cost for patients. Prescription services are available to registered patients without the expense of a pharmacist using TelePharmacy.

MyCHN provides Telehealth primary medical and behavioral health, including psychiatry and group therapy, to new and established patients. In 2021, the State of Texas approved virtual visits for Medication-Assisted Treatment (MAT) and Intensive Outpatient Program (IOP) services, MyCHN immediately responded and implemented virtual visits to MAT and IOP services to reduce barriers to care. MyCHN provides in-person care while continuing to offer virtual services. Therapists are available at all MyCHN sites to accommodate patient preferences and needs. Patients who lack transportation to appointments continue to seek virtual care options.

Comprehensive service integration is a hallmark of MyCHN's programs. Key departments where service integration occurs are within eligibility and between service departments as mentioned with Whole Person Care. Medication Assisted Treatment is integrated into primary care to treat substance use disorders and prevent opioid overdose. MyCHN integrates screenings for dental care into its electronic health record (EHR) system to assess patient oral health needs in the primary care clinic. MyCHN provides care coordination through its primary care services and within the behavioral health department for Medication Assisted Treatment (MAT) patients and those hospitalized with mental health issues in need of integrated behavioral health care coordination, access to assessment and referral to appropriate mental health services.

MyCHN uses audio, video and telemedicine equipment to provide virtual care for patients off site, and issues Remote Patient Monitoring (RPM) devices and MiFi-enabled tablets so patients may send vitals to MyCHN care coordinators. Whenever abnormal vital signs are received, e.g., oxygen saturation rates, blood pressure, blood sugar, weights and BMIs, the care coordinator follows the approved Standard of Care to respond. Care coordination staff contact patients after the primary care provider (PCP) is notified and may be asked to schedule a virtual visit with their PCP, adjust their medications or diets, schedule an in-office visit, etc. to ensure the patients remain stable and positive outcomes are achieved.

MyCHN's Value-Based Care (VBC) embraces a team-based approach to patient management by monitoring health outcomes against the cost of healthcare. This approach benefits patients, providers, payors, suppliers, and the community. VBC utilizes enabling services such as care coordination to close care gaps and direct patient care to improve health. The result is a payment structure that compensates providers based on actual improvements in health outcomes over time instead of the current fee for service payment for visits. MyCHN's VBC Program is composed of nine elements:

1. Chronic Care Management Care Coordination
2. Remote Patient Monitoring (RPM) With MyVitals
3. Referral Management
4. CPRIT Navigation and Women's Health Management
5. Patient Navigation (ReCare)
6. Medication Assistance Treatment (MAT) Navigation
7. Behavioral Health Integration (BHI) Case Management
8. Transitional Care (hospitalizations)
9. Senior Care Population Management (Medicare/Medicare Advantage Plans)

MyCHN's VBC Remote Patient Monitoring (RPM) program provides extended care opportunities for patients with comorbid medical conditions from in-home connected device monitoring and submission of daily vital sign readings. Patients enrolled in the VBC program are provided with RPM devices, tablets with broadband access. With these devices, patients submit vitals during virtual provider visits through a smart cellular tablet and dispensing digital smart package kit that includes blood pressure cuffs, a glucometer, pulse oximeters, and a scale to collect vitals.

- The RPM coordinator also conducts a 20-minute care coordination visit monthly to discuss care plans, care goals and assist patients with resources as well as monitor the patient's vitals data in real time to assist with immediate anomalies or abnormalities in readings. The care coordinators work closely with the patients' providers to evaluate the patients for fluctuations in vital signs and blood values. The tablets are issued only to patients without broadband access and smart technology at home.
- MyCHN also sends out @Home teams of clinical support staff to patient homes for those patients who are elderly, home bound and/or find it hard to make it to the clinic. The staff also provide RPM devices and tablets and train patients in how to use the devices during the home visits. If a provider visit is necessary, the @Home team contacts the patient's PCP during the home visit. The visits have prevented emergency room visits and hospitalizations for patients with diabetes when ulcers and wounds were identified.

In addition to primary care, patients with mental health issues in need of psychiatric medications are provided digital devices to track vital signs to adjust dosage. Additional mood applications are installed in the tablets dispensed to behavioral health patients to gauge anxiety, depression, and changes in affect. RPM vital sign readings for both medical and behavioral health patients are now incorporated directly into the patient's vital sign section of their patient chart and may be pulled into encounter notes for real time intervention and quality reporting.

MyCHN's primary objective is to enhance patient outcomes. By focusing on improving health outcomes through the dedicated efforts, MyCHN demonstrates the quality of its services to contracted payors, including Medicare ACO's. MyCHN is committed to closing care gaps that can impact overall patient health. This includes conducting essential screenings such as Fall Screens, lab work, vital signs, diabetic foot exams, depression screens (PHQ), and social determinant of health screens (SDOH). In alignment with MyCHN's strategic plan, MyCHN seeks to provide value-based care that meets patients where they are on their healthcare journey. This involves identifying, assessing, and addressing barriers related to social determinants of health, as well as addressing health care gaps and health barriers that may not be completed in the typical 20-minute office visit. By taking a comprehensive approach, MyCHN strives to ensure that every patient receives the holistic care they deserve, ultimately leading to better health outcomes for the community.

MyCHN's newest service is state-of-the-art Dental Implants at its MyCHN Pearland dental office. Dental implant service provides a permanent solution to restore patient smiles and preserve oral health and well-being. This service is cost-effective through MyCHN and will allow patients to receive affordable dental implants while boosting patient confidence and improving quality of life.

MyCHN offers HIV prevention and treatment services, including PrEP (Pre-Exposure prophylaxis) and education. Additionally, MyCHN integrates HIV testing into the primary care setting to encourage patients to receive testing as part of its whole-person integrated care initiative. MyCHN's goal is to prevent new infections and ensure that newly diagnosed individuals with HIV are connected to primary care for effective treatment.

MyCHN offers affordable in-house Imaging and Ultrasound exams. These essential diagnostic services are accessible to MyCHN uninsured and insured patients. Patients are referred to and scheduled immediately after their provider's visit to receive convenient examinations. MyCHN recognizes timely and accurate imaging is crucial for effective diagnosis and treatment and these services reduce financial barriers that often prevent patients from obtaining necessary tests. MyCHN imaging services include various types of plain x-rays and ultrasound examinations which are essential for diagnosing a variety of conditions, from pregnancy to identifying fractures and internal issues. The in-house imaging services are offered at a lower cost so patients can receive the imaging they need without the burden of excessive out-of-pocket expenses.

MyCHN increased access to new and established patients in response to the demand for virtual care in 2021 and 2022. Some of the enhancements were to its patient portal to with streamlined patient registration to connect patients with their medical provider through virtual technology while social distancing. MyCHN continues technology enhancements today, partnering with its partners to develop a Phone App for Androids and Apple that soft launched in Summer 2022. The MyCHN Phone App provides easy access for patients to schedule virtual, in person and on demand appointments, review test results and vaccine records, request medication refills, view provider profiles, and connect to patient (RPM) devices. MyCHN continues to develop the phone app with plans to provide virtual visits, patient engagement, screens and the ability to chat with staff in the next release. The new patient engagement application is in development and is slated for release within the next several months.

MyCHN seeks constantly to increase access to care with virtual and in-person services, increasing the number of visits and persons served each year through whole person care.

MyCHN's behavioral health department array of therapy and psychiatry including substance use, group therapy and screening, brief intervention and referral to therapy (SBIRT) services has experienced tremendous growth throughout 2022-2023. MyCHN has integrated Patient Center Medical Home guidelines into behavioral health along with value-based outcomes such as keeping patients out of hospitals, emergency room visits and the criminal justice system by utilizing its Crisis Prevention team. MyCHN provides an annual data report to the Health Resources and Services Administration. In September 2022, MyCHN was successfully awarded a 5-year planning grant to become the second Federally Qualified Health Center (FQHC) Certified Community Behavioral Health Clinic Planning Grants (CCBHC) in Texas. The planning grant prepares MyCHN to apply for certification through the State of Texas to apply for certification as a CCBHC. One of the goals is to improve access to care and reduce unnecessary emergency room visits. The grant allowed MyCHN to hire qualified mental health providers (QMHP) to screen patients into the most appropriate care. The QMHP's work closely with MyCHN's Crisis Prevention program, developed in 2022. The Crisis Prevention program assists patients experiencing mental health crisis.

MyCHN is in year 3 of the grant and all of the 9 core services are in place, and the organization waits for the State of Texas to open the certification process to new CCBHC sites. As a CCBHC, facilities must provide (insert the 9 core services): 1) Crisis mental health services including 24 hour mobile crisis

teams, emergency crisis intervention services and crisis stabilization; 2) Screening, assessment and diagnosis, including risk assessment; 3) Patient centered treatment planning, including risk assessment and crisis planning; 4) Outpatient mental health and substance use services; 5) Outpatient clinic primary care screening and monitoring of key health indicators and health risk; 6) Targeted case management; 7) Psychiatric rehabilitation services; 8) Peer Support and counselor services and family supports; and 9) Intensive community based mental health care for members of the armed forces and veterans.

MyCHN Specialty Services:

Comprehensive, Compassionate, Specialized Care for the Community

MyCHN's launched its new Cardiology service to provide comprehensive heart care to the community. Cardiology services include diagnosis and management of hypertension, coronary artery disease, hypertensive heart disease, congestive heart failure, pulmonary hypertension and more. Patients also receive screenings and prevention services for specific heart diseases, initial diagnostic evaluations for cardiovascular symptoms, and chronic follow-up care for complex cardiovascular issues.

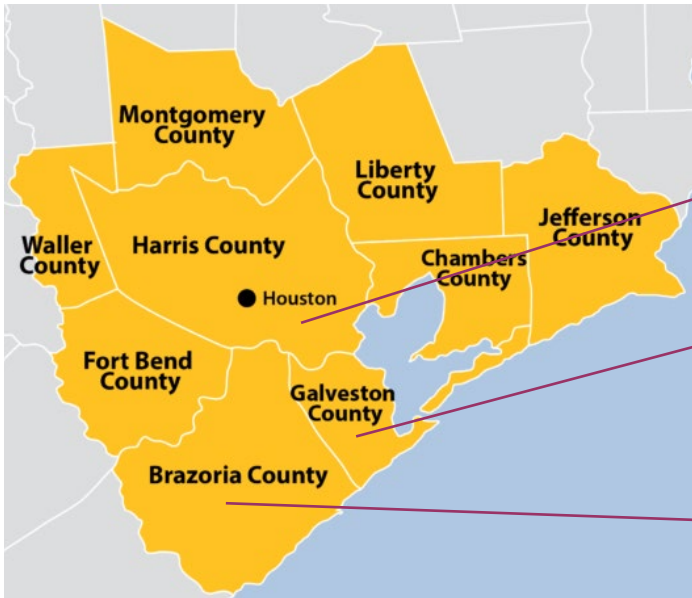
MyCHN also launched a new Gastroenterology (GI) service line to provide care for digestive conditions. The new GI service line offers registered patients a wide array of services, including the management and treatment of acid reflux, GERD, irritable bowel syndrome (IBS), inflammatory bowel disease (IBD), liver and pancreatic disorders, and digestive tract disorders. Patients also have access to colon health screens and cancer screenings.


MyCHN offers comprehensive Infusion services specifically tailored for Hematology and Oncology services at the Scarsdale clinic site. These services are provided by a team of specialized providers who are dedicated to delivering high-quality consultation, follow-up and treatment for MyCHN uninsured and insured patients. MyCHN collaborated with Dr. Asit Choksi, MD, a private practicing oncologist, to enable MyCHN to provide a range of critical services such as diagnostic testing, infusion treatment, patient observation, IV hydration and allergic reaction management. The addition to this service is beneficial for uninsured patients to access affordable and necessary oncology services. The initiative not only supports patients managing their cancer diagnosis but also creates a supportive environment where patients can receive the care they need without the burden of financial strain while navigating the challenges of cancer treatment. MyCHN Primary Care Providers are also providing infusion services for a variety of conditions.

MyCHN provides Podiatry services at the Scarsdale location for patients. Patients with diabetes and other foot issues utilize the services of the contracted provider such that services are expanding to another day and location. MyCHN integrated Wound Care into primary care at the Scarsdale and Freeport locations. Wound care services are available for patients with deep lacerations, patients with diabetes, abrasions and chronic wound care that do not heal on their own. MyCHN plans to expand wound care services by adding skin grafting in the near future.

MyCHN plans to integrate more specialty care services such as Rheumatology into its primary care clinics. MyCHN's mission is to improve health outcomes with new and advanced specialty service lines by providing a variety of healthcare options for all individuals in our community.

MyCHN Locations:



 Established Sites

 2024-2025 Anticipated Sites

-  MyCHN Pasadena
-  Scarsdale Family Health Center
-  Bay Area Family Care
-  MyCHN League City
-  Adoue Family Health Center
-  Freeport Community Health Center
-  Lake Jackson Family Care (inside Brazos Mall)
-  MyCHN Angleton (Angleton Internal Medicine & Primary Care)
-  MyCHN Clute (Brazoria County Dream Center)
-  MyCHN Lake Jackson
-  MyCHN Silverlake
-  MyCHN Technology Drive
-  Pearland Family Health Center
-  Women & Children's Health Center
-  Medical Mobile Unit (MMU)
-  New Freeport Site (2025)



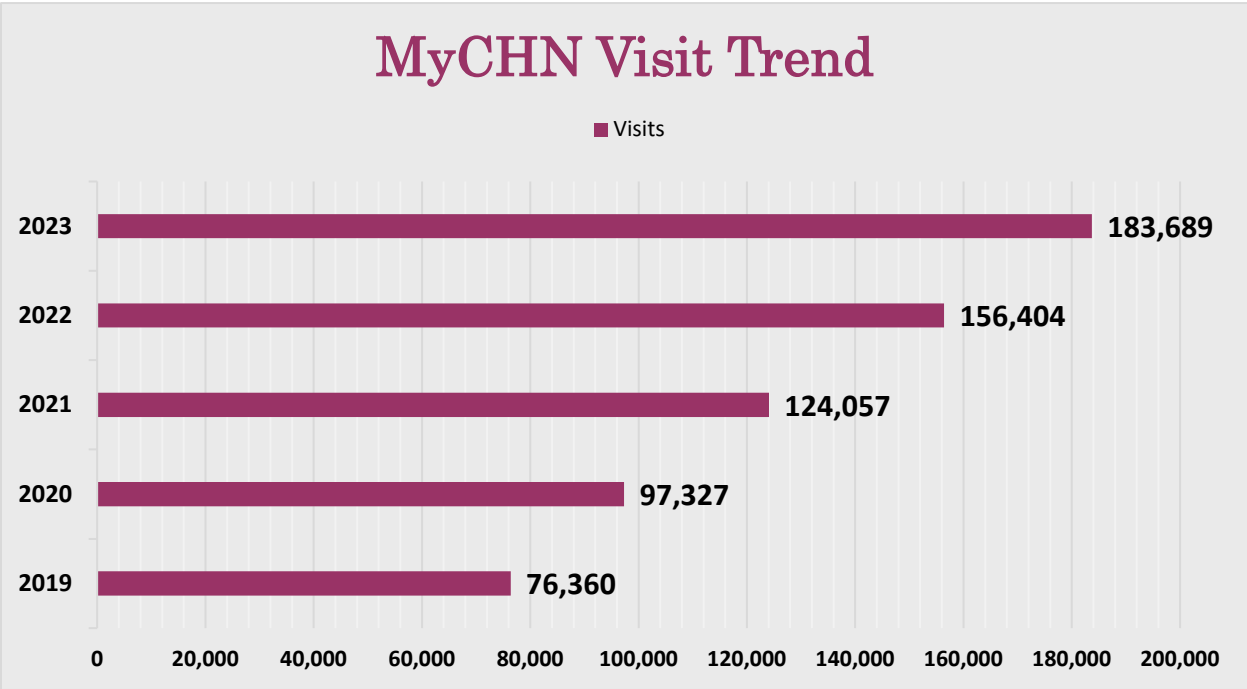
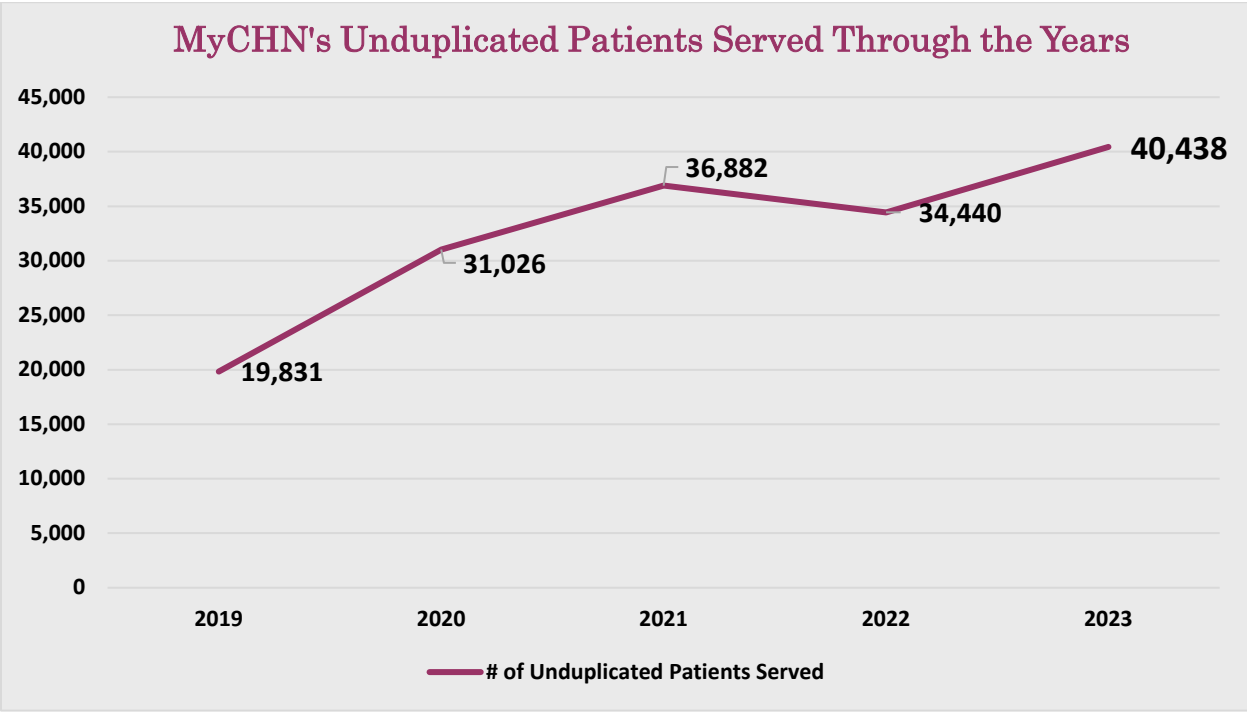
The data charts and graphs below demonstrate exponential growth in all departments over the last few years.

This chart represents the actual % of patients per service category for MyCHN from 2019 – 2023.

Services	2019		2020		2021		2022		2023	
	#	%	#	%	#	%	#	%	#	%
Medical	15,699	79.16%	26,926	86.79%	27,814	75.41%	27,000	78.40%	29,444	72.81%
Dental	5,608	28.28%	4,441	14.31%	4,661	12.63%	8,048	23.37%	10,896	26.94%
Mental Health	2,705	13.64%	3,611	11.64%	4,706	12.76%	6,175	17.93%	8,101	20.03%
Substance Use Disorder	94	0.47%	297	0.96%	548	1.49%	1,721	5.00%	2,654	6.56%
TOTAL NUMBER OF PATIENTS	19,831		31,026		36,882		34,440		40,438	

Income Status	2019		2020		2021		2022		2023	
	#	%	#	%	#	%	#	%	#	%
Income Status (# and % of patients with known income)										
Patients at or Below 200% FLP Guideline	17,532	96.24%	26,667	95.15%	26,359	94.83%	24,056	93.63%	27,200	95.28%
Patients at or Below 100% FLP Guideline	14,720	80.80%	25,574	80.54%	21,720	78.14%	20,090	78.20%	23,027	80.66%
Total Patients with Known Income (Denominator)	18,217		28,027		27,795		25,692		28,548	

MyCHN's Health Center Program Uniform Data System (UDS) Data Overview²



In 2022, MyCHN provided 108,455 in-person visits and 47,949 virtual visits, a grand total of 156,404 visits.

MyCHN increased its visits by 15% in 2023 by providing 130,766 in-person visits and 52,923 medical and behavioral health virtual visits, culminating in a grand total of 183,689 visits.

Community Health Network Services



Services provided by Community Health Network (MyCHN) include, but are not limited to the following:



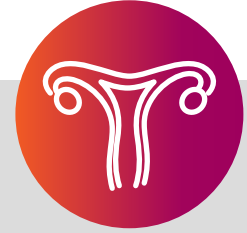
Whole Person Care Services

- *Primary Health
- *Dental Health
- *Behavioral Health
- *Pharmacy



Primary and Family Medicine

- *Remote Patient Monitoring
- *@Home Care
- *Patient & Family Education
- *Acute, Preventive & Chronic Care



Women's Health

- *Prenatal Care
- *OB Delivery Services
- *Well Woman Care
- *Cervical Screens
- *Breast Screens
- *Contraceptives



Pediatric Care

- *Newborn Care
- *Well Child Exams
- *Immunizations
- *Pediatric Dental
- *Acute Care



Medication-Assisted Treatment (MAT) Program

- * Detoxification & Maintenance



Dental Care

- *Preventative:
 - Exams
 - Oral Health
 - Hygiene
- *Endodontics
- *Prosthodontics
- *Pediatric Sedation



Counseling

- *Individual Therapy
- *Therapy Support Groups
- *Group Therapy
- Transportation
- *Crisis Program



Psychiatry

- *Medication Management
- *Substance Use Treatment Service



Pharmacy Services

- *Class A
- *Telepharmacy
- *URAC Specialty
- *URAC Mail Order



Social Determinants of Health (SDOH)

- *Food Insecurity Screenings
- *Prepare Screens/Referrals
- *BrazCo Resource Network
- *Food for Change - Food Rx Program



Care Coordination/Navigation

- *Chronic Care Management
- *Pediatric Care Coordination
- *CPRIT Navigation
- *Senior Medicaid/Medicare Advantage



Insurance Enrollment

- *HHSC Community Partner Program
- *Medicaid, SNAP, TANF Application Assistance
- *My Concierge Program



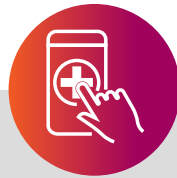
Eligibility

- *Financial Screenings -State/Federal funding programs



After Hours Coverage

- * Continuity of Care



Virtual Care for Medical and Behavioral Health



Student Health Services

- * Medical Students
- *Medical Residents
- *BH Students



Health Information Exchange

- *Greater Houston Health Connect



Health in the Home Services

- *Care Gap Closure
- *Virtual Care



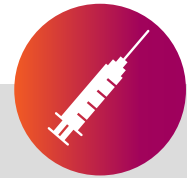
Outreach and Enrollment

- *Community Partnerships
- *Referral to Care



Advances in Health Research

- *Clinical Trials



Immtrac Bidirectional Interface

- *VFC Children
- *Texas Adult Safety Net



HIV Testing

- *HIV Treatment
- *PrEP Prescribing
- *Patient Education



Radiology

- *Ultrasound Services
- *X-Ray Imaging



Technology Development

- *Phone App
- *Remote Patient Monitoring
- *CRM



Specialty Services

- *Podiatry/Wound Care
- *Oncology
- *Infusion Services
- *Cardiology
- *Gastroenterology
- *Rheumatology



Certified Community Behavioral Health Clinic (CCBHC)

- *Screening, Assessment & Diagnosis
- *Primary Care Screening & Monitoring
- *Patient-Centered Treatment Planning
- *Outpatient MH SUD (Brazos Place)
- *Targeted Case Management (GCC)
- *Crisis Services
- *Peer Support
- *Psychiatry Rehab (GCC)



Commission on Accreditation of Rehabilitation Facilities (CARF) Level 3

- *Integrated Behavioral Health Primary Care: Comprehensive Care (Adults, Children & Adolescents)
- *Opioid Based Treatment: Addictions Pharmacotherapy (Adults, Children & Adolescents)
- *Governance Standards Applied

Service Area

Geography:

MyCHN currently provides services and programs to residents of Brazoria, Galveston and Southeast Harris County, Texas. Brazoria County borders the Gulf of Mexico on the southeast, and the City of Houston on the northwest. Brazoria also shares borders with Harris, Matagorda, Fort Bend, Wharton and Galveston Counties.

Per the 2023 Texas Association of Counties, Brazoria County is exceptionally large in area with 1,363.3 square miles of land ranking it the 14th largest and most populated county in the State of Texas with 398,938 individuals. It is less dense with a 292.63 population per square mile than its nearby neighbors.³ Galveston County, in comparison, is much smaller in size with 379.3 square miles of land and a population of 361,744 (953.71 population per square mile).⁴ Harris County with 1,707 square miles of land is the 1st largest and most populated county in Texas. It is extremely population dense with 2,832.5 individuals per square mile (population of 4,835,125).⁵ MyCHN primarily services in Southeast Harris County, the area has a total population of 96,329 in an area of 75.4 sq. miles for a population density of 1,277.6.⁶

The Texas Tribune reports Texas counties lead the U.S. in population growth. Six of the ten fastest-growing counties in the U.S. from 2022 to 2023 are located in Texas, according to recent U.S. Census Bureau estimates. Population growth in the southern U.S. is largely driven by relocations from other regions, with counties in the South experiencing an overall increase in growth compared to the previous year. According to Lauren Bowers, Chief of the Census Bureau's Population Estimates Branch, "domestic migration patterns are changing, and the impact on the counties is especially evident." Texas also dominates the list of counties with the highest population increases, claiming eight out of the ten top counties. Harris County led the way by adding 53,788 residents, making it the fastest-growing county in the nation and pushing its population close to 5 million, making it the third most populous county in the U.S. Additionally, Harris County experienced significant gains from international migration. Texas's four largest metro areas—Dallas-Fort Worth, Houston, San Antonio, and Austin—ranked among the top ten in terms of population growth. The greater Dallas area saw the most significant increase, adding 152,598 residents and exceeding a total population of 8 million, while the greater Houston area gained 139,789 residents, bringing its population to over 7.5 million. According to estimates from the Texas Demographic Center, nearly 70% of Texas residents live in these four metro areas. This growth in major Texas counties contributed to the state's overall population increase of nearly half a million in 2023, the largest in the country.⁷

The largest city in Brazoria County is Pearland with a population of 127,736.⁸ Pearland is within 15 miles of downtown Houston and is considered, by most, a Houston suburb. The remainder of Brazoria County has less populated cities and vast areas that are rural; with some areas designated medically underserved and economically disparate. The largest city in Galveston County is League City with a population of 118,740.⁹ League City is 23 miles southeast of Houston and the same distance northwest of Galveston (city). The largest city in Harris County is Houston, considered the County Seat with a population of 2,314,157.¹⁰

Population:

According to the 2022 1-Year U.S. Census American Community Survey (ACS), an estimated 388,181 people live within **Brazoria County**. The ACS 2018-2022 5-year estimate demonstrates a population estimate of 374,600 for Brazoria County. Ethnically, 31.9% (119,553) of the population is Hispanic; racially 58.4% (218,834) of the population is White, 15.2% (57,108) is African American, 7.1% (26,591) is Asian, 0.5% (1,920) is American Indian & Alaska Native, 0.0% (61) is Native Hawaiian & Other Pacific Islander and 18.7% (70,086) is other or multiracial. The population is young with a median average age of 36.3, 50.7% of the county is male and 49.3 % is female.¹¹ Brazoria County has 16,693 Veterans.¹²

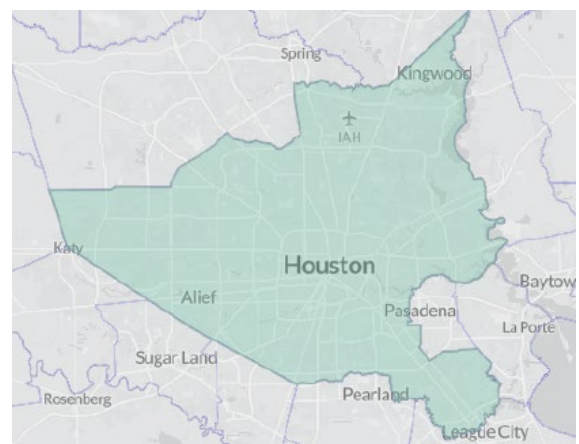
Per the 2022 1-Year U.S. Census, ACS, an estimated 357,117 people live within **Galveston County**. The ACS 2018-2022 5-year estimate demonstrates a population estimate of 350,801 for Galveston County. Ethnically, 25.9% (90,909) of the population is Hispanic; racially 68.0% (238,656) of the population are White, 12.3% (43,035) is African American, 3.4% (11,781) is Asian, 0.3% (1,149) is American Indian & Alaska Native, 0.2% (628) is Native Hawaiian & Other Pacific Islander and 15.8% (55,552) is other or multiracial. The population is young with a median average age of 38.1, 49.5% of the county is male and 50.5% is female.¹³ Galveston County has 21,385 Veterans.¹⁴

Per the 2022 1-Year U.S. Census, ACS, an estimated 4,780,913 people live within **Harris County**. The ACS 2018-2022 5-year estimate demonstrated a population estimate of 4,726,177 for Harris County. Ethnically, 43.9% (2,076,103) of the population is Hispanic; racially 46.0% (2,175,175) of the population is White, 18.9% (893,393) is African American, 7.1% (336,946), 0.7% (33,169) is American Indian & Alaska Native, 0.1% (3,161) is Native Hawaiian & Other Pacific Islander, and 27.2% (1,287,332) is other or multiracial. The population is young with a median average age of 34.1, 49.9% of the county is male and 49.9% is female. Harris County has 152,961 Veterans.

While Harris County is large, MyCHN's serves patients from three Census County Division's (CCD) in Harris County **Houston CCD, Pasadena CCD and Southeast Harris CCD**.¹⁵ Per the Census, a Census County Division (CCD) is a statistical subdivision of a county in the United States, primarily used by the U.S. Census Bureau. CCDs are created to facilitate the collection and analysis of demographic data. CCDs help in providing detailed demographic information at a more granular level than whole counties, making it easier for researchers, policymakers, and planners to understand and address local needs.¹⁶

- **Houston CCD:** (Webster, Scarsdale, Hobby area)

The ACS 2018-2022 5-year estimate demonstrates a population estimate of 3,458,465. Ethnically, 46.2% (1,597,914) of the population is Hispanic; racially 42.3% (1,461,880) of the population are White, 20.5% (707,945) is African American, 7.3% (253,778) is Asian, 0.7% (24,095) is American Indian & Alaska Native, 0.1% (2,423) is Native Hawaiian & Other Pacific Islander and 29.2% (1,008,344) is other or multiracial. The population is young with a median average age of 33.9,

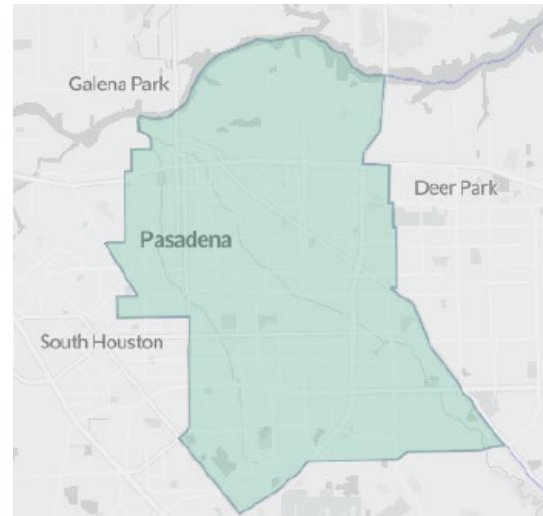


50.0% of the county is male and 50.0% is female.

Houston CCD has 100,078 Veterans.

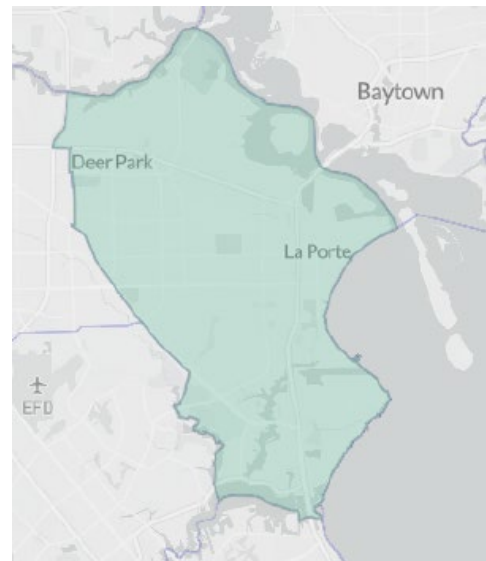
- **Pasadena CCD:**

The ACS 2018-2022 5-year estimate demonstrates a population estimate of 144,189. Ethnically, 74.7% (107,646) of the population is Hispanic; racially 61.5% (88,712) of the population are White, 3.0% (4,254) is African American, 1.1% (1,597) is Asian, 1.1% (1,576) is American Indian & Alaska Native, 0.0% (16) is Native Hawaiian & Other Pacific Islander and 33.3% (48,034) is other or multiracial. The population is young with a median average age of 32.0, 49.5% of the county is male and 50.5% is female. Pasadena CCD has 3,770 Veterans.



- **Southeast Harris CCD: Deer Park & La Porte area**

The ACS 2018-2022 5-year estimate demonstrates a population estimate of 96,329. Ethnically, 34.9% (33,593) of the population is Hispanic; racially 73.4% (70,743) of the population are White, 4.7% (4,541) is African American, 2.2% (2,131) is Asian, 1.3% (1,250) is American Indian & Alaska Native, 0.0% (0) is Native Hawaiian & Other Pacific Islander and 18.3% (17,664) is other or multiracial. The population is young with a median average age of 37.3, 49.8% of the county is male and 50.2% is female. Southeast Harris CCD has 5,888 Veterans.



The three Counties and Texas are aging, with Galveston demonstrating the largest growth in the 65+ age group and a younger population (0-17 years) than the State or Harris and Brazoria County¹⁷. Within Harris County, The Southeast CCD demonstrates the largest growth in the 65+ age group, and both Southeast CCD and Houston CCD demonstrate a younger population, 0-17 than Pasadena CCD.

2022 ACS 5-Year County Breakdown by Age¹⁸

	0 – 17 Years	18 – 64 Years	65+ Years	85+ Years
TEXAS	25%	62%	12%	1%
Brazoria County	26%	62%	11%	1%

Galveston County	24%	61%	13%	2%
Harris County	26%	63%	10%	1%
• Houston CCD	25%	64%	10%	1%
• Pasadena CCD	29%	60%	10%	1%
• Southeast CCD	25%	60%	14%	1%

Economy:

The 2022 ACS 5-Year Survey results show 17.6% of the Texas population is uninsured. The same survey data demonstrates the percentage of uninsured in Brazoria County is 13.4% (48,384 individuals); Galveston County is 13.8% (47,715) and Harris County is 21.2% (997,287). The data reflects that Adults are uninsured at higher rates than children with Harris County adult residents at 31.3% compared to Brazoria at 19.5% and Galveston County at 19.1% versus Texas at 25.5% uninsured adults.

- The CCD data indicates that the percentage of uninsured individuals in the Houston CCD is 23.1% (792,550 individuals), the Pasadena CCD is 27.8% (39,811 individuals), and Southeast Harris is 14.7% (14,128 individuals). Additionally, adults are uninsured at higher rates than children, with Pasadena CCD adult residents at 42.2%, compared to 33.8% in Houston CCD and 21.1% in Southeast Harris CCD.¹⁹

Children living in poverty in Texas is 19.3% compared to Brazoria County at 8.9%, Galveston County 13.7% and Harris County 23.2%. The data reflects that Black or African American and Hispanics have higher poverty rates; Harris County being the highest 20.0% (Hispanic) and 20.4% (Black or African American) compared to Brazoria County at 10.3% (Hispanic) and 6.9% (Black or African American) and Galveston County at 15.0% (Hispanic) and 19.4% (Black or African American) versus Texas at 18.9% (Hispanic) and 18.8% (Black or African American).

- The CCD data indicates that the percentage of children living in poverty is 30.3% in Pasadena CCD, compared to Houston CCD at 26.1% and Southeast Harris CCD at 11.2%. Additionally, Black or African American and Hispanic populations experience higher poverty rates, with Houston CCD having the highest Hispanic poverty rate at 21.4%, followed by Pasadena CCD at 20.3% and Southeast Harris CCD at 10.4%.
- For Black or African American residents, Pasadena CCD has the highest poverty rate at 43.5%, compared to 21.8% in Houston CCD and 13.6% in Southeast Harris CCD.²⁰

Children from families with household incomes below 130% federal income level qualify for the National School and Lunch Programs for Texas and receive free meals. Children from families with household incomes between 130% and 150% federal poverty level qualify for reduced price meals. Participants must register through their school districts to qualify. The percentage of children eligible for the free or reduced breakfast and lunch program in Brazoria County is 52%, Galveston County is 51% compared to Harris County at 70% and the State at 61% (Community Health Rankings 2024).

Income:

- Pearland, the largest city in Brazoria County, has a median income of \$108,454, however Manvel has the highest median household income level in the county of \$126,498. The remainder of the county has a much lower median income level of \$38,750; the median income for Brazoria County is \$86,083.
- League City, the largest city in Galveston County, has a median income of \$119,948 while the remainder of the county has a median income level of \$75,656; the median income for Galveston County is \$75,565.
- Houston, the largest city in Harris County, has a median income of \$62,637. However, the Clear Lake/Houston area has the highest median household income level of \$158,958; the medium income for Harris County is \$88,700.²¹ In Harris County, the Southeast Harris CCD has a higher median income of \$88,700 compared to Houston CCD with \$66,347 and Pasadena CCD at \$60,785 median income.

Note: The zip codes used for the Harris County Median Household Income table are zip codes MyCHN’s patient majority reside in.

Median Household Income:

Brazoria County

Zip Code	City	\$ Dollars
77511	Alvin	\$74,466
77515	Angleton	\$84,443
77422	Brazoria	\$68,937
77531	Clute	\$69,676
77430	Damon	\$106,094
77534	Danbury	\$100,094
77541	Freeport	\$55,237
77515	Holiday Lakes	\$41,500
77566	Lake Jackson	\$91,806
77577	Liverpool	\$61,006
77578	Manvel	\$126,498
77541	Oyster Creek	\$38,750
77581	Pearland	\$105,053
77584	Pearland	\$112,994
77531	Richwood	\$75,500
77583	Rosharon	\$110,852
77541	Surfside Beach	\$86,544
77480	Sweeny	\$76,445
77486	West Columbia	\$88,809

Galveston County

Zip Code	City	\$ Dollars
77518	Bacliff	\$52,246
77539	Dickinson	\$83,707
77546	Friendswood	\$117,118
77550	Galveston	\$47,366
77551	Galveston	\$56,620
77554	Galveston	\$86,912
77563	Hitchcock	\$77,917
77565	Kemah	\$81,921
77568	La Marque	\$63,806
77573	League City	\$119,948
77650	Port Bolivar	\$61,211
77539	San Leon	\$83,707
77510	Santa Fe	\$92,344
77517	Santa Fe	\$81,618
77590	Texas City	\$57,293
77591	Texas City	\$62,135

Southeast Harris County

Zip Code	City	\$ Dollars
77059	Clear Lake/Houston	\$158,958
77536	Deer Park	\$90,468
77571	La Porte	\$80,778
77058	Nassau Bay/Clear Lake	\$63,267
77502	Pasadena	\$58,714
77504	Pasadena	\$52,620
77505	Pasadena	\$90,917
77506	Pasadena	\$51,810
77507	Pasadena	\$70,406
77586	Seabrook	\$105,076
77017	Southeast Houston	\$53,236
77034	Southeast Houston	\$56,772
77047	Southeast Houston	\$70,666
77048	Southeast Houston	\$45,714
77061	Southeast Houston	\$42,039
77062	Southeast Houston	\$103,477
77075	Southeast Houston	\$71,609
77087	Southeast Houston	\$50,918
77089	Southeast Houston	\$83,648
77051	Sunny Side	\$38,694
77598	Webster	\$56,551

Workforce:

The Texas Workforce Commission reports that the Texas labor market set a new record in August adding 78,000 new jobs and marking eight consecutive months of growth for Texas’ civilian labor force. Leisure and Hospitality added 15,500 new jobs, Professional and Business Service added 12,700 new jobs and Trade, Transportation and Utilities added 9,600 jobs. Additionally, Construction saw an increase of 8,300 jobs in August, demonstrating a 4.4 percent growth over the year.²²

Workforce Solutions – Unemployment Rate Statistics for the Texas Gulf Coast Region²³

	Latest Month: July 2024			1-Month Ago: June 2024			1-Year Ago: July 2023		
	Employment	Unemployment	Rate	Employment	Unemployment	Rate	Employment	Unemployment	Rate
Brazoria	186,152	9,799	5.0	186,001	9,540	4.9	181,864	9,002	4.7
Galveston	170,892	8,501	4.7	170,739	8,477	4.7	166,788	7,971	4.6
Harris	2,370,517	122,241	4.9	2,368,125	120,678	4.8	2,310,670	109,632	4.5
TEXAS	14,776,132	677,962	4.4	14,738,168	699,900	4.5	14,486,077	638,794	4.2

In Texas, the overall Employment/Population Rate stands at 61.3%. Within the three MyCHN service area counties, Harris County leads with the highest employment rate at 63.0% compared to Brazoria County at 60.3% and Galveston County at 60.2%. In comparison, the unemployment rate in Texas is 5.2%, with Brazoria County displaying the lowest unemployment rate at 4.6% and Harris County displaying a high unemployment rate of 6.4%.

- Within Harris County, the three County Census Divisions (CCD) displays Houston CCD with the highest employment rate at 62.9% compared to Southeast CCD Harris at 61.3% and Pasadena CCD at 59.0%. In comparison, Pasadena CCD experiences the highest unemployment rate at 9.0%.

Occupational characteristics for the three Counties compared to Texas demonstrate a higher percentage of individuals in Brazoria County work in construction (10.9%). Galveston County has a high percentage of the population in the arts, entertainment and recreation, and accommodation and food services industry at 9.4% compared to Texas at 8.7%. Tourism is a significant part of the Galveston budget, accounting for 50% of the 2021 of the Galveston County General Fund.²⁴ The same data reveals a higher percentage of individuals in Galveston County (25.3%) work in the health care industry compared to Texas at 21.5%, likely as a result of University of Texas Medical Branch and Government Workers.

Harris County has a high percentage in production, transportation and material moving at 13.5% compared to Texas at 12.9%. There is also a higher percentage of individuals who work in natural resources, construction and maintenance in Brazoria County at 11.5% and Harris County at 11.4% compared to Galveston County at 8.3%.

- The Houston CCD area has a higher proportion of individuals working in the professional, management and administrative and waste management area (13.9%) compared to Southeast Harris CCD (11.2%) and Pasadena CCD (9.0%).
- The Pasadena CCD has a higher percentage of individuals in the natural resources, construction and maintenance at 20.4% compared to Houston CCD (11.9%) and Southeast Harris CCD (10.8%). In addition, Pasadena CCD has a higher percentage in production, transportation and material moving industry at 18.0% and Construction at a 16.4% rate.
 - Pasadena is home to all types of businesses including those in the oil and gas, maritime, aerospace, heavy industrial, service, retail, and technology industries. With a booming economy and growing population, there is plenty of room for growth in Pasadena.²⁵

*This data highlights the regional disparities in employment and unemployment within the state of Texas and MyCHN service areas.²⁶

Industry	Texas	Brazoria County	Galveston County	Harris County	Houston CCD	Pasadena CCD	SE Harris CCD
Employment/Population Rate %:	61.3%	60.3%	60.2%	63.0%	62.9%	59.0%	61.3%
Unemployed Rate %:	5.2%	4.6%	5.9%	6.4%	6.4%	9.0%	5.0%
Agriculture, forestry, fishing and hunting, and mining	2.6%	1.8%	1.8%	2.8%	2.6%	1.4%	1.5%
Arts, entertainment, and recreation, and accommodation and food services	8.7%	6.8%	9.4%	8.7%	9.1%	7.6%	9.2%
Construction	8.7%	10.9%	7.4%	10.6%	11.1%	16.4%	9.5%
Educational services, and health care and social assistance	21.5%	24.5%	25.3%	19.7%	19.6%	18.1%	19.9%
Finance and insurance, and real estate and rental and leasing	6.9%	5.8%	6.2%	6.0%	5.9%	4.2%	4.9%
Government Workers	13.7%	15.8%	18.5%	11.0%	10.4%	12.6%	14.2%
Natural resources, construction, and maintenance	10.4%	11.5%	8.3%	11.4%	11.9%	20.4%	10.8%
Production, transportation, and material moving	12.9%	12.5%	12.6%	13.5%	13.6%	18.0%	15.1%
Professional, scientific, and management, and administrative and waste management services	12.2%	11.1%	11.4%	13.3%	13.9%	9.0%	11.2%
Self-employed in own not incorporated business workers	6.9%	5.7%	5.5%	6.6%	6.7%	6.7%	5.3%
Retail Trade	11.3%	8.7%	10.0%	10.6%	10.4%	12.9%	8.8%
Transportation and warehousing, and utilities	6.4%	5.8%	5.4%	7.0%	6.9%	6.5%	8.3%
Wholesale Trade	2.6%	2.1%	2.0%	3.0%	2.8%	2.9%	2.0%

2022, 5-Year American Community Survey (ACS)



Social and Environmental Factors

Many factors attribute to good health, and it is increasingly recognized that individuals may be impacted by:

- their social and economic environment (social determinants of health),
- their physical environment, and
- their individual characteristics and behaviors

Other factors impacting health include:

- Culture – Customs and traditions, and the beliefs of the family and community all affect health.
- Education – low education levels are linked with poor health, more stress and lower self-confidence.
- Employment and working conditions – people in employment are healthier, particularly those who have more control over their working conditions.
- Gender – Men and women suffer from different types of diseases at different ages.
- Genetics – Inheritance plays a part in determining lifespan, healthiness, and the likelihood of developing certain illnesses.
- Health services – Access and use of services that prevent and treat disease influences health.
- Income and social status – higher income and social status are linked to better health. The greater the gap between the richest and poorest people, the greater the differences in health.
- Personal behavior and coping skills – balanced eating, keeping active, smoking, drinking, and how we deal with life's stresses and challenges all affect health.
- Physical environment – safe water and clean air, healthy workplaces, safe houses, communities and roads all contribute to good health.
- Social support networks – greater support from families, friends, and communities is linked to better health.

The data demonstrates disparities for living conditions related within all three counties, Brazoria, Galveston and Harris County, impacting the physical environment.

- Air quality is one area in which disparities exist. The average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) particles for Texas is 8.6 while Harris County is 10.7, Brazoria County is 10.5 and Galveston County is 7.9.²⁷
- Drinking water violations exist in Brazoria and Harris County; Galveston County indicates no water violation.²⁸
- Severe housing problems defined as the presence of overcrowding, high housing costs, or lack of kitchen or plumbing facilities also negatively impact individuals' health outcomes.
 - The percentage of individuals in Texas experiencing severe housing problems is 17%; Harris County's percent is 20%, Galveston County is 16% and Brazoria County is 12%.²⁹

Broadband Access: Access to reliable, high-speed broadband is crucial for education, employment, health care and economic development. Broadband is essential for telehealth and accessing government programs and helps to reduce social isolation by allowing social media access, especially in older adults. Broadband Access measures access at any speed, however not all broadband is fast enough to meet the needs of all households due to rural areas. Barriers to internet access are due to cost and insufficient infrastructure.

Per the 2024 County Health Rankings (CHR) defines the Texas rate for Broadband access, as the percentage of households with broadband internet connection, is 88% (9,274,077 households). In Brazoria County, the broadband access percentage is 92% (116,644 households); Galveston County is 91% (123,320 households) and Harris County is 90% (1,519,653 households).³⁰

Educational Attainment: Refers to the highest level of education an individual has completed. This is distinct from the level of schooling that an individual is attending. The percentage of individuals that attain a high school degree in the service area is 87% (Brazoria Co. 89%; Galveston Co. 90%; and Harris Co. 82%), which is greater than the Texas State rate of 85% of adults (age 25 or older) who had a high school degree or equivalent, such as a GED. The percentage of adults (age 25-44) in the service area that attend some college is 66.0% (Brazoria Co. 67%; Galveston Co. 68%; Harris Co. 63%). This number is greater than the Texas State rate of individuals attaining some level of college education (64%).³¹

Race & Hispanic or Latino Origin by Educational Attainment ³²	Brazoria County	Galveston County	Harris County	Houston CCD	Pasadena CCD	SE Harris CCD
White alone, not Hispanic or Latino	Pop.: 117,144	Pop.: 140,770	Pop.: 972,292	Pop.: 624,405	Pop.: 23,470	Pop.: 38,948
High school graduate or higher	94.3%	95.3%	96.2%	96.6%	90.6%	94.6%
Bachelor's degree or higher	32.6%	39.0%	50.7%	56.4%	23.7%	30.1%
Black or African American, alone	Pop.: 37,351	Pop.: 28,067	Pop.: 572,406	Pop.: 459,408	Pop.: 2,626	Pop.: 3,044
High school graduate or higher	94.3%	88.1%	91.4%	90.6%	86.6%	92.1%
Bachelor's degree or higher	36.2%	26.2%	29.1%	28.0%	10.5%	40.8%
Hispanic or Latino Origin	Pop.: 68,210	Pop.: 52,974	Pop.: 1,183,029	Pop.: 919,509	Pop.: 58,031	Pop.: 18,411
High school graduate or higher	75.2%	75.7%	64.7%	62.2%	61.6%	80.8%
Bachelor's degree or higher	17.7%	18.8%	15.8%	15.3%	7.8%	14.5%
Asian, alone	Pop.: 18,141	Pop.: 8,404	Pop.: 242,092	Pop.: 186,348	Pop.: 1,299	Pop.: 1,392
High school graduate or higher	91.3%	89.6%	85.7%	85.4%	86.9%	85.1%
Bachelor's degree or higher	64.1%	61.4%	54.3%	54.7%	52.0%	49.1%

- The U.S. Census 2022 ACS 5-Year survey shows Harris County with the highest percentage of 96.2% for the non-Hispanic, White population who obtained a high school degree or higher; and Brazoria County demonstrating the highest percentage of 64.1% for the Asian population who obtained a bachelor's degree or higher.
- Within Harris County, the data for the three CCD's display the Houston CCD with both the highest percentage of 96.6% for the non-Hispanic, White population who obtained a high school degree or higher and 56.4% who obtained a bachelor's degree or higher.

People with higher levels of education are more likely to be healthier and live longer compared to less educated individuals. In addition, people who are more educated experience less anxiety and depression, have fewer functional limitations, and are less likely to have serious health conditions such as diabetes, cardiovascular disease, or asthma.

- An individual's ability to achieve healthier health outcomes is tied to their ability to comprehend medical instructions as well as obtaining higher paying positions with health benefits that provide access to primary care, specialty and hospital care. Additionally, to being prepared for better jobs, people with more education are more likely to learn about healthy behaviors.

Studies have found that more education contributes to longer life expectancy, better health, and a reduction in risky behavior. Studies are further finding that education may also provide the skills to analyze information and tackle difficult problems – exactly the skills that are needed to navigate the complexities of the health system and access medical care for chronic conditions. A higher level of education also translates into higher income and greater financial stability, both of which correlate with better health.

- People who experience poor health from an early age may be unable to engage in education to the same degree as those with better health. Poor health not only results from lower educational attainment, but it can also cause educational setbacks. Individuals with less education are less likely to advocate for themselves and their families and are less likely to communicate effectively with health providers.³³

Food Insecurity: is defined by the United States Department of Agriculture (USDA) as the lack of access, at times, to enough food for an active, healthy life. Limited access to healthy food measures the proportion of the population who are both living in poverty and do not live close to a grocery store. Living close to a grocery store is defined differently in metro and non-metro counties; in metro counties, it means living less than 1 mile from a grocery store, in non-metro counties, less than 10 miles. This measure comes from the USDA Food Environment Atlas, a resource which assembles statistics on food environment indicators to stimulate research on the determinants of food choices and diet quality.

- 8% (2,099,608) of Texans have limited access to healthy foods; Galveston County is 9% (25,207); Brazoria County is 7% (20,853); while Harris County is 6% (236,351). The 2024 County Health Rankings used data from 2019 for this measure.³⁴

Food Deserts are defined as parts of the county lacking access to grocery stores, farmer's markets and food pantries with access to fresh fruits, vegetables and other healthy foods. Residents in food deserts tend to rely on fast food stores and high calorie, fatty, processed foods for their main diet, a trend that contributes to obesity.

Brazoria County <i>Average Meal Cost: \$3.62</i>			Galveston County <i>Average Meal Cost: \$3.70</i>			Harris County <i>Average Meal Cost: \$3.70</i>			TEXAS <i>Average Meal Cost: \$3.45</i>		
Food Insecure Population			Food Insecure Population			Food Insecure Population			Food Insecure Population		
All Ages:	Children <18:		All Ages:	Children <18:		All Ages:	Children <18:		All Ages:	Children <18:	
48,140	17,530		53,140	17,740		776,960	307,770		4,919,210	1,697,870	
Food Insecurity Rate			Food Insecurity Rate			Food Insecurity Rate			Food Insecurity Rate		
All Ages:	Children <18:		All Ages:	Children <18:		All Ages:	Children <18:		All Ages:	Children <18:	
12.9%	18.1%		15.1%	21.2%		16.4%	24.8%		16.4%	22.8%	
By Race			By Race			By Race			By Race		
Black	Hispanic	White	Black	Hispanic	White	Black	Hispanic	White	Black	Hispanic	White
1318.0%	18.0%	9.0%	29.0%	21.0%	10.0%	31.0%	23.0%	10.0%	28.0%	23.0%	10.0%

Food Insecurity 2022 Data: The graph displays the Food Insecure Population and Food Insecurity Rate for all 3 Counties including Texas by All Ages, Children and Race.

- The Map the Meal Gap 2022 by Feeding America addresses food insecurities throughout the nation. The report highlights the disparities in food access across different regions, demographics, and socioeconomic groups. The report includes data on the prevalence of food insecurity and the estimated number of individuals affected and financial resources needed to address these gaps. This year’s release focuses on the extent and variation in local food insecurity levels in the U.S. in 2022. The Map the Meal Gap states, “food insecurity levels differ greatly according to race and ethnicity, and it’s influenced by multiple factors including poverty, unemployment and lack of household assets, all which are disproportionately experienced by communities of color.”
- ❖ Between the three MyCHN service area counties, Harris County has the highest number of food insecure persons at 776,960 and 307,770 food insecure children.
- ❖ The Feeding American *Map the Meal Gap* study reveals Texas now leads the nation in food insecurity, surpassing California. Local food bank officials say Texas is grappling with a food insecurity rate of 16.4%, a significant increase from 2021 (13.7%).³⁵

Food Stamps/SNAP (Supplemental Nutrition Assistance Program): is defined as a government program, which provides monthly benefit allotments based on household income and size, that helps low-income, or no income people buy essential foods they need for healthier lives. According to the Population Reference Bureau (PBR) during the COVID-19 pandemic, changes in public assistance significantly improved food security for many Americans, especially SNAP households and families with children. Emergency financial assistance increased SNAP benefits from March 2020 to February 2023 boosting food security and lifting 45.4 million people out of poverty in 2021. However, by 2022, as these supports expired, food security declined sharply due to the end of pandemic benefits, withdrawal of SNAP support in 17 states, and rising food prices causing an increase food insecurity.³⁶

The ACS 2022 5-Year (2018 – 2022) data highlights significant disparities in Food Stamps/SNAP participation among households with disabilities and those living at or below the poverty level across Texas and MyCHN service area counties.³⁷

- Racial and ethnic disparities data demonstrate rates in Texas and focus on the three MyCHN Counties and Census County Divisions for the number of households receiving Food Stamps/SNAP assistance and living with one or more disabilities.
 - Brazoria shows a higher percentage of White (36.9%) recipients compared to the Texas average (22.8).
 - In Galveston, the distribution of race among SNAP recipients is more balanced, with similar proportions of Black/African American (32.1%), White (33.4%) households, and a significant Hispanic population at 30.1%.
 - Harris County a predominant number of Hispanic (45.9%) recipients, followed by Black/African American (35.3% households).
 - Within Harris County, in Pasadena CCD, there's an overwhelming majority of Hispanic (75.9%) recipients, reflecting a strong community presence. In Southeast Harris CCD, White (49.0%) households are the majority, showcasing a different demographic makeup compared to other parts of Harris County.

Households receiving Food Stamps/SNAP				
Race and Hispanic Origin of Householder		White	Black or African American	Hispanic or Latino
	Texas	22.8% (275,336)	22.2% (268,869)	50.5% (611,021)
	Brazoria	36.9% (3,625)	19.8% (1,946)	33.8% (3,321)
	Galveston	33.4% (4,780)	32.1% (4,589)	30.1% (4,308)
	Harris	12.1% (27,148)	35.3% (79,202)	45.9% (103,057)
	• Houston CCD	9.3% (16,574)	37.5% (66,992)	46.6% (83,259)
	• Pasadena CCD	16.7% (1,506)	4.7% (423)	75.9% (6,857)
	• SE Harris CCD	49.0% (1,239)	7.9% (200)	40.1% (1,015)

- In Texas, there are 2,597,719 households with one or more people with a disability. Between MyCHN counties, Harris County has 366,922 households with a disability; 37.9% (85,102) receive Food Stamps/SNAP while 19.2% (281,820) do not receive food assistance. In comparison, Galveston County has 36,883 households with a disability, 46.6% (6,659) receive assistance while 25.0% (30,224) do not receive assistance; Brazoria County has 27,400 households with a disability, 41.0% (4,031) receive Food Stamps/SNAP and 19.9% (23,369) do not receive assistance.
 - Within Harris County, Houston CCD (266,852), 36.7% receive Food Stamps/SNAP and 19.2% do not receive assistance; Pasadena CCD (13,325) at 43.5% receive Food Stamps/SNAP and 25.1% do not; and Southeast Harris CCD (9,571) at 44.0% of households with a disability receive Food Stamps/SNAP and 26.2% do not receive food assistance.

	Total	Households receiving Food Stamps/SNAP	Households NOT receiving Food Stamps/SNAP
Disability: With one or more people with a disability	Texas, pop. 2,597,719	42.6% (515,448)	22.4% (2,082,271)
	Brazoria, pop. 27,400	41.0% (4,031)	19.9% (23,369)
	Galveston, pop. 36,883	46.6% (6,659)	25.0% (30,224)
	Harris, pop. 366,922	37.9% (85,102)	19.2% (281,820)
	• Houston CCD, pop. 266,852	36.7% (65,579)	18.6% (201,273)
	• Pasadena CCD, pop. 13,325	43.5% (3,929)	25.1% (9,396)
	• SE Harris CCD, pop. 9,571	44.0% (1,114)	26.2% (8,457)

- In addition, households At or Below the Poverty Level, the overall rate in Texas is 43.8% (529,893) of households with one or more people with a disability who receive Food Stamps/SNAP; in comparison, Harris County demonstrates the highest at 41.9% (93,956) of households with a disability receiving assistance and Brazoria showing lower rates at 28.2% (2,773). Within the three CCDs in Harris County, Southeast Harris CCD is the highest at 44.0% (1,114) and Pasadena CCD demonstrates the lowest at 40.3% (3,642) households receiving Food Stamps/SNAP. This data indicates that a substantial portion of households in Harris County are relying on Food Stamps/SNAP to meet their nutritional needs, suggesting that economic conditions in the area may be particularly challenging for those with disabilities.

This data underscores the critical need for targeted interventions to support vulnerable populations, particularly those with disabilities and those living in poverty, while addressing racial and ethnic inequalities in access to food assistance programs. This discrepancy may point to varying local economic factors, community resources, or awareness of available assistance programs, highlighting the need for tailored outreach and support in different counties. While individuals may receive SNAP benefits, some may run out of food close to the end of the month and these individuals’ resort to food banks to supplement the food shortage in the household. Food banks such as the Houston Food Bank Community Assistance Program (CAP) provides assistance to people applying for SNAP benefits.

Housing Insecurity: According to the U.S. Department of Housing and Urban Development, the definition of “housing insecurity” is broad and does not solely describe a loss of lack of housing.³⁸

- About 1 in 8 Texas households spend more than 50% of their income on housing.
- More than 1 in 4 Texas households are low-income and experience problems such as cost burden, lack of kitchen, plumbing or overcrowding.
- 25% higher rates of adults’ experience depression due to housing insecurity.
- Homeowners with missing mortgage payments or those having trouble paying a mortgage experienced depression, feelings of shame, social isolation, and anxiety.³⁹
- **Texas ranks the 6th worst state in the nation for affordable housing for extremely low-income renters.**⁴⁰

Texas Health and Human Services (HSS), Texas Health Steps states young adolescents experiencing housing instability are more prone to a wide variety of physical, emotional, developmental and behavioral effects including the following:⁴¹

<ul style="list-style-type: none"> ▪ Poor child-parent bonding and interactions ▪ Mental health and behavioral problems ▪ Inability to cope with stress ▪ Lack of childcare, role models & social relationships ▪ Poor sleep ▪ Injuries ▪ Elevated blood pressure 	<ul style="list-style-type: none"> ▪ Respiratory conditions ▪ Exposure to infectious disease ▪ Poor school performance ▪ Development delays ▪ Substance use ▪ Adolescent pregnancy
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Per the 2024 County Health Rankings, “Severe Housing Cost Burden in a percentage of households that spend 50% or more of their household income on housing”. As housing costs continue to rise faster than local incomes, many households find it increasingly difficult to secure and maintain adequate shelter. This situation forces them to make tough choices about meeting other essential needs. When a large portion of their paycheck is spent on rent or mortgage payments, it leaves little for doctor visits, nutritious food, utility bills, and dependable transportation to work or school.

- The percentage of individuals in Texas experiencing severe housing cost burden is 14% (1,433,704); Harris County percent is 16% (270,618), Galveston is 15% (20,133) and Brazoria County is 10% (12,810).⁴²

There are different types of housing challenges individuals face such as difficulty finding affordable, safe and/or quality housing, trouble paying rent, spending majority of the household income on rent, having unreliable or inconsistent housing, and overall loss of housing. Other examples include families living in a poorly maintained apartment with mold, poor plumbing and electrical code violations or overcrowding/doubling up where multiple families live in a single-family apartment. Housing insecurity may lead to homelessness unless an intervention occurs.

Homelessness: The Point in Time (PIT) count is an annual HUD-mandated survey of people experiencing homelessness on a single night. The PIT Count demonstrates how homelessness changes over time due to economic conditions, societal factors and policy advancement. The 2024 Annual Point-in-Time (PIT) was conducted on Thursday, January 25th, 2024, across the Texas Balance of State Continuum of Care (TX BoS CoC).⁴³

The 2024 PIT count data was collected for both sheltered and unsheltered individuals.

- Per the 2024 Gulf Coast Homeless Coalition Report for Galveston County there were 358 homeless individuals.⁴⁴
- The 2024 Homeless Coalition of Brazoria County report states a total of 130 homeless individuals were identified in various places and in shelters in Brazoria County such as the Salvation Army of Brazoria County, Boots on the Ground, Warriors Refugee and Brazoria County Women’s Center.⁴⁵

Status	Brazoria County		Galveston County	
	2023	2024	2023	2024
Total Homeless	121	130	306	358
Adults 18+	116	128	248	315
Children (under 18)	5	2	58	43
Veterans	35	39	14	26
Chronically Homeless	25	27	70	87
Serious Mental Illness	31	25	68	97
Substance Use Disorder	21	18	63	66
Adults with HIV/AIDS	1	1	3	15
Adult Survivors of Domestic Violence	14	12	50	46

- ❖ From 2022 to 2023, there has been a 7% increase in homeless individuals in Brazoria County and a 17% increase in Galveston County.
- ❖ The number of homeless children has decreased in both Galveston and Brazoria County since 2023.
- ❖ The PIT Count data reveals individuals experiencing homelessness are also experiencing serious mental illness and/or a substance use disorder in 2024. In Brazoria County, 19% are experiencing a serious mental illness and 14% have a substance use disorder. Galveston County, 27% are experiencing a serious mental illness and 18% have a substance use disorder.
- ❖ The PIT Count data also reveals Chronically Homeless individuals who experienced homelessness for at least a year or repeatedly and who are also struggling with disabling conditions (e.g., chronic, mental illness or substance use problems). 21% are chronically homeless in Brazoria County and 24% in Galveston County.
- ❖ Homeless Adults living with HIV/AIDS in Brazoria County remain stable at one person, however, in Galveston County the number of homeless adults increased by 12 individuals since 2023.

The PIT volunteers conducted a short voluntary survey throughout the Brazoria and Galveston County communities to learn more about people and families experiencing homelessness, what kinds of problems they face and what services they may need.

<ul style="list-style-type: none"> • Have you been told, or do you believe you have a chronic/ongoing health condition that affects your ability to support yourself/family or live independently? 				
Brazoria County			Galveston County	
Yes	25		Yes	123
No	51		No	124
Don't Know	3		Don't Know	2
Refused	3		Refused	4
Data Not Collected	1		Data Not Collected	1
Total	83		Total	254

The graph displays the comparison between both MyCHN service areas.

Per The Coalition for the Homeless of Houston/Harris County’s 2024 PIT Homeless Count & Survey Independent Analysis report, a total of 3,280 people experienced homelessness (Sheltered: 2,173 and Unsheltered: 1,107) in Harris, Fort Bend and Montgomery counties. The official PIT Count was conducted on the night of January 22, 2024, the unsheltered count occurred from January 23rd – 25th with over 450 volunteers.

- In Harris County 2,939 homeless individuals were identified: 1,046 unsheltered and 1,893 sheltered individuals.

Harris County Homeless Data 2024 ⁴⁶		
	Sheltered	Unsheltered
Total Homeless	1,893	1,046
Adults 18+	1,486	1,046
Children (under 18)	407	0
Veterans	162	48
Chronically Homeless	163	301
Adults with Serious Mental Illness	642	370
Substance Use Disorder	556	264
Adults with HIV/AIDS	59	15
Adults Survivors of Domestic Violence	268	53

This data compares to the 2023 Point-in-Time survey for Galveston County in which a total of 306 homeless individuals were identified as living in emergency shelters, transitional shelters, hotel/motel and place not meant for habitation. There was a total of 121 Brazoria County homeless individuals. The Salvation Army Shelter in Freeport and the Women’s Shelter in Angleton and Alvin provide resources for homeless individuals in Brazoria County. There was a total of 2,989 homeless individuals in Harris County: 1,803 sheltered and 1,186 unsheltered. The rise in sheltered individuals is likely due to shelter capacity returning to pre-pandemic levels and the decrease in unsheltered individuals is likely due to The Way Home partners effectively expanding housing access and initiatives.⁴⁷

Human Trafficking: is another Public Health issue in the United States, specifically in Texas.

- The National Human Trafficking Hotline states a third of the calls received are from Texas; in 2020 a total of 987 cases were reported, the second most of any U.S. state (after California); 25% of human trafficking victims are children.
- Texas ranks second in the nation for reported cases.
- Human trafficking is believed to be the highest within the “Texas Triangle that connects the Houston, San Antonio and Dallas-Fort Worth metro areas, as well as in the low Rio Grande Valley.⁴⁸ According to The Administration for Children and Families (ACF) there are many cases where “healthcare is administered at least initially by an unqualified individual hired by the trafficker with little if any regard for the well-being of their “patient” – and even less regard

for disease, infection or contamination control.” **Preventive care is virtually non-existent for these individuals and tends to worsen until they become critical, even life dangerous situations.**

Trafficked individuals also suffer from a variety of conditions such as homelessness, poor hygiene, poor nutrition, physical and psychological abuse, and a lack of quality health care.⁴⁹

Trafficked victims suffer from numerous health issues such as:	
<ul style="list-style-type: none"> ▪ Sexually transmitted diseases, HIV/AIDS, pelvic pain, rectal trauma and urinary difficulties from working in the sex industry. ▪ Pregnancy, results from rape or prostitution. ▪ Infertility from chronic untreated sexually transmitted infections or botched or unsafe abortions. ▪ Infections or mutilations caused by unsanitary and dangerous medical procedures performed by the trafficker’s so called “doctor.” ▪ Bruises, scars and other signs of physical abuse and torture. (Sex-industry victims are often beaten in areas that won’t damage their appearance, like their lower back.) ▪ Cultural shock from finding themselves in a strange country. 	<ul style="list-style-type: none"> ▪ Chronic back, hearing cardiovascular or respiratory problems from endless days toiling in dangerous agriculture, sweat shop or construction conditions. ▪ Weak eyes and other eye problems from working in dimly lit sweatshops. ▪ Malnourishment and serious dental problems. ▪ Infectious diseases like tuberculosis. ▪ Undetected or untreated diseases, such as diabetes or cancer. ▪ Psychological trauma from daily mental abuse and torture, including depression, stress related disorders, disorientation, confusion, phobias and panic attacks. ▪ Feeling helplessness, shame , humiliation, shock, denial or disbelief.

Human trafficking impacts the survivor’s whole person, mentally and physically. Survivors of human trafficking frequently suffer from major psychological effects such as higher levels of depression, post-traumatic stress, anxiety, sexually transmitted infections or diseases, and substance abuse struggles and addiction. Healthcare workers need to be prepared to utilize a trauma-informed approach with all patients.

Intimate Partner Violence (IPV): is a significant public health problem in the United States.

- In 2019, an estimate of 71,637 victims received emergency shelter and services through family violence agencies funded through the Texas Health and Human Services Commission (HHSC).
- The National Coalition Against Domestic Violence (NCADV) states 40.1% of Texas women and 34.9% of men experience intimate partner physical violence, intimate partner rape and/or intimate partner stalking in their lifetimes.⁵⁰
- The Texas Domestic Violence Statistics demonstrate the number of incidents reported in 2019; 2,014 incidents were reported in Brazoria County, 2,703 in Galveston County and 41,300 in Harris County.⁵¹
- The Texas Council on Family Violence states 216 Texans were killed by their intimate partner;

6 were LGBTQ+ victims, 17 were killed during pregnancy or within a year of post-partum and 19 were teen and young adult victims. In Texas, 64 counties experienced domestic violence in 2022, in Harris County there were 46 women and 5 men who lost their lives due to domestic violence.⁵²

IPV has lifelong consequences that lead to injury and can also result in death. Victims of IPV are more likely to report negative mental and physical health outcomes and are more likely to smoke, heavy/binge drinking, contract sexually transmitted infections and HIV, and endorse unhealthy behaviors. The most common physical symptoms IPV victims face are injuries, headaches, insomnia, chronic pain, choking sensations, hyperventilation, gastrointestinal symptoms, neck, back and pelvic pain. Another result of IPV is unplanned pregnancy, pregnancy complications, decreased contraceptive use, abortion and miscarriage.⁵³

Mental health issues are also a result of IPV including depression, post-traumatic stress disorder, low self-esteem and suicidal tendencies. In fact, the American Psychiatric Association states roughly “20% of IPV survivors reported experiencing new onset of psychiatric disorders such as major depressive disorder (MDD), generalized anxiety disorder (GAD), and posttraumatic stress disorder (PTSD) and a wide range of substance use disorders.”⁵⁴ While IPV can be preventable, promoting healthy, respectful, and nonviolent relationships and communities can help reduce the occurrence of IPV to prevent harmful and long-lasting effects.

Language Barriers: in healthcare lead to miscommunication between the medical provider and patient, decrease in quality of healthcare delivery, and adversely impact the relationship between the physician and patient. **Communication between patients and medical providers is essential for effective healthcare provisions.**⁵⁵ A major culprit is the poor utilization of translation or lack of qualified translation services. Many entities rely on family members to translate for the patient. Family and friends are not familiar with medical terms, may leave out essential information to spare the patient or out of their own lack of comfort level with the information being conveyed. Patients that speak a language other than English do not receive the same level of care due to language barriers; patients experience longer hospital stays and are at higher risk of medication errors, inaccurate patient assessment and poor health outcomes than those who speak English. The individuals are unable to advocate for themselves due to language barriers.




The 2022 ACS 5-Year Estimates for Brazoria and Galveston Counties highlight notable differences in language use and English proficiency among populations aged 5 and over.

- In Brazoria County, 72.5% of residents speak only English, while Galveston County has a higher percentage at 79.6%. Spanish speakers consist of a significant portion, with 70,202 in Brazoria and 52,424 in Galveston.
- Although the majority of individuals speak English "very well," the figures vary: 71.0% in Brazoria and 68.9% in Galveston in comparison to 29.0% in Brazoria and 31.1% in Galveston who speak English less than "very well."

- For Asian and Pacific Island languages, Brazoria has 16,827 speakers, with 56.7% reporting proficiency in English. In contrast, Galveston has 7,491 speakers, with a higher proficiency rate of 65.1%.
- In Harris County the total population is 4,393,352, with 55.2% (2,425,001) speaking only English. A total of 1,554,270 residents speak Spanish; 54.3% speak English "very well," while 45.7% do not. For speakers of Asian and Pacific Island languages (201,039), 51.1% speak English "very well" and 48.9% do not.
 - Within Harris County, the three County Census Divisions (CCD) data states Houston CCD has a population of 3,220,930; 51.4% speak English, 38.6% are Spanish speakers and 4.8% speak Asian and Pacific Island languages; Pasadena CCD (132,712 population), 49.9% speak English, 49.0% are Spanish speakers and 0.8% speak Asian and Pacific Island languages; Southeast Harris CCD (90,157 population), 78.8% speak English, 18.5% are Spanish speakers and 1.2% speak Asian and Pacific Island languages.

This data underscores the linguistic diversity and varying levels of English proficiency within MyCHN communities. Individuals in the service area that do not speak English very well or are vulnerable to barriers to quality health care if they do not receive medical translation services 100% of the time within the health care system.

The table below displays the languages spoken at home for each MyCHN service area.⁵⁶

Population 5 years and Over 2022 ACS 5-Year Estimates	Brazoria County Pop. 350,384		Galveston County Pop. 330,121		Harris County Pop. 4,393,352	
	%		%		%	
Speak only English	72.5%	254,086	79.6%	262,861	55.2%	2,425,001
Spanish speakers	70,202		52,424		1,554,270	
Speak English "very well"	71.0%	49,818	68.9%	36,118	54.3%	843,288
Speak English less than "very well"	29.0%	20,384	31.1%	16,306	45.7%	710,982
Asian & Pacific Island Languages	16,827		7,491		201,039	
Speak English "very well"	56.7%	9,547	65.1%	4,880	51.1%	102,753
Speak English less than "very well"	43.3%	7,280	34.9%	2,611	48.9%	98,286
Other Indo-European Languages	6,181		6,312		141,444	
Speak English "very well"	77.2%	4,774	78.6%	4,963	75.8%	107,171
Speak English less than "very well"	22.8%	1,407	21.4%	1,349	24.2%	34,273
Other Languages	3,088		1,033		71,598	
Speak English "very well"	90.1%	2,782	85.6%	884	73.5%	52,639
Speak English less than "very well"	9.9%	306	14.4%	149	26.5%	18,959

Overcoming language barriers in the healthcare industry is critical for healthcare systems that are expanding and experiencing an increase of culturally linguistically diverse populations between both patients and practitioners. While language is a barrier in the community, it is also an opportunity to

improve health equity by educating providers and staff to identify those individuals in need of translation services to help fill the language gap.

Transportation: is a social determinants of health (SDOH) that can impact a person’s ability to access essential services, employment and other opportunities. Transportation is a constant concern as the cost and convenience of visits to the doctor prevent many people on limited budgets from accessing care. Healthcare may be put on the backburner and not be considered essential until a serious illness arises. While the Houston Metro program has a robust public transit system, it is not available for all residents in MyCHN’s service area. Brazoria County does not have a comprehensive transportation system linking each end of the county together. The Gulf Coast Transit District (GCTD) is a Texas political subdivision established under Transportation Code Chapter 458, receiving state funds for transit services. GCTD is limited to the southern and western areas of Brazoria County in Freeport, Lake Jackson, and Clute and does not extend into the southern or eastern area where Angleton, Alvin, and Pearland are located. GCDT offers demand-response services in rural areas, fixed-route services and ADA paratransit in cities such as Lake Jackson and Texas City. GTCD also operates park-and-ride commuter services along Galveston Island, Texas City and League City. Harris County Transit RIDES provides taxi services for seniors and individuals with disabilities in Pearland.⁵⁷ On Galveston Island, Galveston County, the Island Transit provides a 25-mile radius of public steel wheel trolley systems. Island Transit provides connections to the University of Texas Medical Branch system of hospitals and clinics. There is no bus system on the mainland within Galveston County, people who do not own their own transportation rely on ride sharing services to access care, such as Lyft and Uber.⁵⁸

Driving long distances can lead to obesity and is a critical factor in screenings for preventive exams. According to the 2024 CHR survey, 53% (171,722) of workers residing in Brazoria County commute over 30 minutes compared to Harris at 47% (2,239,156), Galveston at 41% (164,431), and Texas at 39%.⁵⁹ Individuals who commute longer than 30 minutes a day are at risk for health disparities such as high blood pressure and obesity, and it’s associated with poorer mental health. When individuals spend significant portions of their day driving, they are less likely to engage in physical activity, leading to weight gain and associated health issues. Addressing the health effects of long commutes is crucial, highlighting the need for preventive health screenings and interventions aimed at reducing the risk factors related to lengthy driving. Strategies such as encouraging physical activity during the day, educating about better eating options and consistent wellness exams could mitigate these risks and improve public health outcomes in areas like Brazoria County.



County Health Rankings

Texas, 254 Counties

Health Outcomes: Health Outcomes provide insight into the average lifespan of individuals in the community and the overall physical and mental health well-being they experience during their lives.

Health Factors: Many elements influence how well and how long people live. Health factors represent aspects that can be improved to promote longer, healthier lives. They are indicators of the future health of communities.

Brazoria County⁶⁰:

- **Health Outcomes:** Brazoria County is faring about the same as the average county in Texas and better than the average county in the nation.
- **Health Factors:** Brazoria County is faring about the same as the average county in Texas and about the same as the average county in the nation.

Galveston County⁶¹:

- **Health Outcomes:** Galveston County is faring worse than the average county in Texas and better than the average county in the nation.
- **Health Factors:** Galveston County is faring about the same as the average county in Texas and about the same as the average county in the nation.

Harris County⁶²:

- **Health Outcomes:** Harris County is faring worse than the average county in Texas and better than the average county in the nation.
- **Health Factors:** Harris County is faring worse than the average county in Texas and worse than the average county in the nation.

Special factors of concern include the following for Brazoria, Galveston and Harris County based off the 2024 County Health Rankings:

Brazoria County	Galveston County	Harris County
<ul style="list-style-type: none"> ▪ Adult Smoking ▪ Adult obesity ▪ Air pollution – particulate matter ▪ Alcohol-impaired driving deaths ▪ Drinking Water Violations ▪ Insufficient Sleep ▪ Long commute ▪ Mammography Screening ▪ Mental health providers ▪ Physical inactivity ▪ Preventable hospital stays ▪ Unemployment ▪ Uninsured 	<ul style="list-style-type: none"> ▪ Adult obesity ▪ Adult smoking ▪ Alcohol-impaired driving deaths ▪ Dentist (access to) ▪ Drug overdose deaths ▪ Firearm Fatalities ▪ Homicides ▪ Income inequality ▪ Juvenile arrests ▪ Poor mental health days ▪ Premature Age-Adjusted Mortality ▪ Preventable hospital stays ▪ Suicides ▪ Unemployment 	<ul style="list-style-type: none"> ▪ Adult obesity ▪ Adult smoking ▪ Air pollution – particulate matter ▪ Alcohol-impaired driving deaths ▪ Children in poverty ▪ HIV Prevalence ▪ Mammography Screenings ▪ Primary Care Physicians ▪ Preventable Hospital Stays ▪ Severe housing problems ▪ Sexually transmitted infections ▪ Unemployment ▪ Uninsured

Behavioral Health continues to be a significant need in Brazoria, Galveston and Harris Counties. The number of mental health providers in both Brazoria and Galveston counties is steadily increasing, indicating a growing recognition of the importance of mental health care. However, despite the increase in available providers, the demand for behavioral health services is escalating even more rapidly. Gulf Coast Centers is the Mental Health Authority for both Counties. While UTMB and the Veterans Administration Outpatient Clinic employs mental health providers, only MyCHN and Gulf Coast Center provide behavioral health services full-time in Galveston County to the underserved population.

MyCHN's service area of Brazoria, Galveston and Hariss Countis is a health provider shortage area (HPSA) according to the Health Resources Services Administration. The HPSA scores range from range from 0 to 26 where the higher the score, the greater the priority; Brazoria County's HPSA score is 18.⁶³

According to the County Health Rankings (CHR) Survey 2024, Brazoria County has a higher ratio of individuals per mental health providers (940:1) compared to the State of Texas (640:1). This higher ratio indicates that access to mental health care may be more limited and potentially lead to longer wait times or difficulty obtaining services. In 2023, Brazoria County had fewer mental health providers (361) with 1,050 individuals per mental health provider. Per the 2024 CHR, Brazoria County has 412 mental health providers serving the community.

The data below demonstrates the need for interventions in MyCHN's service area.

- The ratio of mental health providers to individuals in Texas is 640:1 compared to the ratio for Brazoria County (940:1), Galveston (690:1) and Harris (610:1).
- Alcohol-impaired driving rates are notably high in all counties, with Galveston County at 35%, Brazoria at 33% and Harris at 31% compared to Texas at 25%. These rates indicate the urgent need for interventions to reduce alcohol-related incidents on the road.
- The drug overdose mortality rate in Galveston County is higher at 21 deaths per 100,000 compared to Harris at 18 and Brazoria at 14 deaths. These rates align with Texas (14) and reflect the ongoing challenges of substance abuse in the region, particularly in Galveston County.
- The rate of death by suicide for residents of Galveston County is 16.0 per 100,000; the Brazoria County rate is 15.0 per 100,000; and the Harris County rate of death by suicide per 11.0 per 100,000 compared to the State of Texas' rate at 14. The racial breakdowns reveal disparities in the number of deaths, emphasizing the need for targeted mental health initiatives.
- Firearm fatality rates demonstrate Galveston County with a higher rate of 17 per 100,000, following Harris at 15; Brazoria and Texas rates are aligned at 13 deaths per 100,000.

Substance use issues contribute to the demand for behavioral health services.

	Brazoria County	Galveston County	Harris County	TEXAS
Mental Health Providers	940:1 (412 providers)	690:1 (514 providers)	610:1 (7,796 providers)	640:1 (47,060 providers)
Alcohol Impaired Rate	33%	35%	31%	25%
% of driving deaths with alcohol involvement.	*Out of 215 Driving deaths, 70 were Alcohol-Impaired driving deaths	*Out of 194 Driving deaths, 67 were Alcohol-Impaired driving deaths	*Out of 2,336 Driving deaths, 728 were Alcohol-Impaired driving deaths	4,874 Alcohol-Impaired driving deaths
Drug Overdose Mortality Rate	14	21	18	14
# of drug poisoning deaths per 100,000 population. Races Identified:	# of Deaths: 160 Hispanic: 8 Asian: 0 Black: 11 White: 21	# of Deaths: 221 Hispanic: 10 Asian: 0 Black: 23 White: 28	# of Deaths: 2,577 Hispanic: 9 Asian: 5 Black: 27 White: 30	Total: 12,292
Suicide Deaths	15	16	11	14
# of deaths due to suicide per 100,000 population (age-adjusted) Races Identified:	# of Deaths: 271 Hispanic: 11 Asian: 0 Black: 9 White: 21	# of Deaths: 277 Hispanic: 8 Asian: 0 Black: 8 White: 21	# of Deaths: 2,570 Hispanic: 6 Asian: 8 Black: 8 White: 19	Total: 19,694
Firearm Fatalities Rate	13	17	15	13
# of deaths due to firearms per 100,000 population. Races Identified:	# of Deaths: 243 Hispanic: 8 Asian: 0 Black: 13 White: 18	# of Deaths: 298 Hispanic: 9 Asian: 0 Black: 29 White: 20	# of Deaths: 3,505 Hispanic: 10 Asian: 6 Black: 30 White: 16	Total: 19,478

*Mental health providers are defined as psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, mental health providers that treat alcohol and other drug abuse, and advanced practice nurses specializing in mental health care.

The statistics reveal significant health challenges across Brazoria, Galveston and Harris Counties. The high rates of alcohol-impaired driving, substance abuse, and suicide paired with the number of mental health providers indicate a critical need for community-based interventions and support systems. In addition, there remains a significant gap between the number of mental health providers and the needs of the population. This disparity can lead to unmet needs, with individuals struggling to access timely care, ultimately impacting overall community well-being. Addressing this gap is crucial for improving mental health outcomes and ensuring that all residents have access to the support they need.



BRAZORIA, GALVESTON AND HARRIS COUNTY HEALTH RANKINGS 2024⁶⁴

<i>Rank of 244</i>	Brazoria County	Error Margin	Galveston County	Error Margin	Harris County	Error Margin	Top U.S. Performers	TEXAS
Health Outcomes								
Length of Life								
Premature Death	7,200	6,900 – 7,500	8,600	8,300 – 9,000	7,700	7,600 – 7,800	8,000	7,900
Quality of Life								
Poor or Fair Health	17%	15 – 19%	16%	14 – 19%	20%	17 – 23%	14%	18%
Poor Physical Health Days	3.6	2.9 – 4.3	3.5	2.8 – 4.2	3.4	2.8 – 4.1	3.3	3.3
Poor Mental Health Days	4.6	3.9 – 5.3	4.9	3.9 – 5.8	5.2	4.5 – 5.9	4.6	4.8
Low Birthweight	8%	8 – 9%	9%	8 – 9%	9%	9 – 9%	8%	8%
Additional Health Outcomes (not included in summary)								
Frequent Mental Distress	15%	13 – 17%	16%	14 – 18%	16%	14 – 18 %	15%	14%
Diabetes Prevalence	11%	10 – 13%	10%	9 – 12%	12%	11 – 14%	10%	11%
HIV Prevalence	303		384		724		382	415
Health Factors								
Health Behaviors								
Adult Smoking	14%	11– 17%	14%	11 – 17%	16%	13 – 18%	15%	13%
Adult Obesity	38%	33 – 43%	34%	28 – 42%	37%	32 – 41%	34%	36%
Food Environment Index	7.9		7.2		7.3		7.7	5.9
Physical Inactivity	25%	22 – 29%	24%	20 – 29%	28%	24 – 32%	23%	25%
Access to Exercise Opportunities	76%		85%		90%		84%	82%
Excessive Drinking	20%	17 – 23%	19%	15 – 22%	20%	17 – 23%	18%	18%
Alcohol-Impaired Driving Deaths	33%	29 – 36%	35%	31 – 38%	31%	30 – 32%	26%	25%
Sexually Transmitted Infections	383.7		405.8		620.2		495.5	506.8

	Brazoria County	Error Margin	Galveston County	Error Margin	Harris County	Error Margin	Top U.S. Performers	TEXAS
Teen Births	18	17 – 19	18	17 – 19	24	24 – 25	17	24
<i>Additional Health Behaviors (not included in summary)</i>								
Food Insecurity	11%		13%		14%		10%	14%
Limited Access to Healthy Foods	7%		9%		6%		6%	8%
Drug Overdose Deaths	14	12 – 16	21	18 – 24	18	17 – 19	27	14
Clinical Care								
Uninsured	16%	14 – 17%	16%	15 – 18%	24%	23 – 24%	10%	20%
Primary Care Physicians	1,530:1		1,420:1		1,720:1		1,330:1	1,660:1
Dentists	1,700:1		1,930:1		1,340:1		1,360:1	1,590:1
Mental Health Providers	940:1		690:1		610:1		320:1	640:1
Preventable Hospital Stays	3,725		4,265		3,047		2,681	2,933
Mammography Screening	33%		39%		36%		43%	39%
Flu Vaccinations	41%		44%		45%		46%	43%
Social & Economic Factors								
High School Completion	89%	88 – 90%	90%	89 – 90%	82%	82 – 82%	89%	85%
Some College	67%	64 – 70%	68%	65 – 71%	63%	62 – 64%	68%	64%
Unemployment	4.5%		4.4%		4.2%		3.7%	3.9%
Children in Poverty	13%	9 – 16%	15%	11 – 19%	25%	23 – 26%	16%	19%
Income Inequality	4.1	4.0 – 4.3%	5.1	4.8 – 5.5	4.9	4.8 – 5.0	4.9	4.8
Children in Single-Parent Households	20%	18 – 23%	23%	21 – 25%	27%	27 – 28%	25%	26%
Social Associations	6.9%		6.6		5.5		9.1	7.4
Injury Deaths	59	56 – 63	75	70 – 79	65	64 – 66	80	63
<i>Additional Social & Economic Factors (not included in summary)</i>								
Suicides	15	13 – 16	16	14 – 18	11	11 – 11	14	14

	Brazoria County	Error Margin	Galveston County	Error Margin	Harris County	Error Margin	Top U.S. Performers	TEXAS
Firearm Fatalities	13	11 – 15	17	15 – 19	15	14 – 15	13	13
Juvenile Arrests	13		15		11			10
Physical Environment								
Air Pollution – Particulate Matter	10.5		7.9		10.7		7.4	8.6
Drinking Water Violations	Yes		No		Yes			
Severe Housing Problems	12%	11 – 13%	16%	15 – 17%	20%	20 – 21%	17%	17%
Driving Alone to Work	82%	81 – 83%	79%	78 – 81%	74%	74 – 75%	72%	75%
Long Commute – Driving Alone	53%	51 – 55%	41%	39 – 43%	47%	46 – 48%	36%	39%
Additional Social & Economic Factors (not included in summary)								
Severe Housing Cost Burden	10%	9 – 11%	15%	14 – 17	16%	16 – 17%	14%	14%
Broadband Access	92%	91 – 93%	91%	90 – 92%	90%	89 – 90%	88%	88%

2024 County Health Rankings



Medical Infrastructure

In addition to direct care services, MyCHN has highly integrated support services including outreach and enrollment, continuous quality improvement, peer review, risk management and patient-centered medical home. Administration and fiscal management are part of the organizational infrastructure.

There are three major hospitals within **Brazoria County**⁶⁵:

1. St. Luke's Health – Brazosport Hospital, located in Lake Jackson is a 154-bed patient tower, Level III Trauma Center, offering comprehensive acute and emergency healthcare including bariatric, cancer, cardiac, family medicine, wound care, home healthcare, surgical service, neurology and rehabilitation services.
2. Sweeny Community Hospital located in the city of Sweeny, is a 20-bed, Level IV Trauma Center, critical access facility providing acute care, family medicine, general surgery, assisted living, specialty care, physical therapy and wound care.
3. The UTMB Health Angleton Danbury Campus hospital is an acute care hospital, established in 1969 and the first trauma designated facility in Brazoria County. The hospital has been part of the University of Texas Medical Branch System since 2014. In addition to an emergency room, the hospital offers diagnostic imaging, outpatient surgery, a cardiopulmonary clinical lab, rehabilitation, physical therapy and other services.

Additional hospitals and emergency rooms located in Brazoria County include the:

- HCA Houston ER 24/7 – Alvin is located two miles from MyCHN's Adoue Family Health Center. HCA Houston ER 24/7 is a department of HCA Healthcare Clear Lake serving the Alvin community. The full-service emergency room provides care for acute injuries and illnesses.
- HCA Houston Pearland – a 49-bed acute care hospital equipped with a Level IV Trauma Center, an accredited Chest Pain Center with Primary PCI and a certified Primary Stroke Center. HCA Houston Pearland also provides emergency, diagnostic imaging, oncology, women's care, surgery and cardiology.
- Memorial Hermann Pearland Hospital is situated at Highway 288, South Freeway, next to large Kelsey-Seybold Clinic. Memorial Hermann Pearland currently has 64 inpatient beds and offers medical, surgical, intensive care and cardiac care.

The Brazoria County Health Department offers five locations in the cities of Alvin, Angleton, Brazoria, Lake Jackson and Pearland, Texas to provide public health services and holds indigent clinics in Alvin and Angleton. The University of Texas Medical Branch in Galveston operates a women's health and a primary and specialty care clinic in Angleton, a primary care and specialty care clinic and an Urgent Care in Alvin and a women's health clinic in Pearland. Mental health services are provided through Gulf Coast MHMR which serves Brazoria and Galveston Counties.

Per the 2024 County Health Rankings, Brazoria County has 248 primary care physicians throughout the service area.⁶⁶

Access to inpatient and emergency services in Galveston and Harris Counties is significantly improved over Brazoria County with the increased number of hospitals and urgent care facilities.

Galveston County is served by three large hospitals, the health department, another FQHC, a Veteran Administration clinic and a variety of general medical clinics.⁶⁷

1. The largest hospital system in Galveston County is the University of Texas Medical Branch (UTMB), an academic health system with over 11,000 employees. UTMB is composed of multiple hospitals and a myriad of general and specialty clinics, and surgical centers located throughout Galveston and Brazoria County.

a. The UTMB Health Galveston Campus consists of:

i. The John Sealy Hospital, as of April 2016 several areas of the John Sealy Hospital have moved to the new Jennie Sealy Hospital; however, John Sealy continues to house the Mother & Baby and Labor Delivery Units, the Children's Hospital, Pediatric Surgery, the Sleep Lab, and various other services.⁶⁸

ii. The Jennie Sealy Hospital, a 12 floor, 765,000 square feet, 310 bed facility with 60 ICU rooms, 10 family waiting rooms, 20 operating suites, and 28-day operating rooms. The Jennie Sealy Hospital now houses the Blocker Burn Clinic and In-Patient Unit.

iii. The UTMB Galveston Campus has five community health clinics: Dermatology, Family Medicine, Pediatric Primary Care, Pediatric Psychology & Mental Health and an Urgent Care clinic.

iv. The UTMB Galveston Emergency Room is a Level 1 Trauma Center, certified by the American College of Surgeons.

b. The UTMB Health League City Campus Hospital was League City's first hospital, with inpatient and outpatient care, medical and surgical specialties, expanded-hours urgent care and 24-hour emergency department. In 2020, an additional tower was added to house the medical-surgical unit, intensive care unit, sterile processing department, laboratory, blood bank, pharmacy and many other services.

i. The League City Campus consists of various primary and specialty care with comprehensive healthcare services such as orthopedics, sports medicine and rehabilitation, cardiac care, cancer care, GI care and advanced imaging and laboratory services.

2. The Shriners Hospitals for Children, a 30-bed non-profit pediatric burn hospital, research and teaching center located on the campus of the UTMB has consolidated their world-renowned, pediatric specialty healthcare services into one location in Galveston, Texas.

- Shriners Children's Texas provides comprehensive orthopedic and burn care treatment, as well as correction of cleft lip and palate to all children, regardless of their family's ability to pay.

- The hospital features: an intensive care unit with 15 acute beds and a reconstruction and plastic surgery unit with 15 beds along with 3 operating rooms; and on-site tissue bank, advanced orthopedic and cleft palate imaging, highly specialized physical rehabilitation team including a motion analysis lab. The hospital is verified as a burn center by the American Burn Association and accredited by the Joint Commission on Accreditation of Healthcare Organizations.
3. The HCA Houston Healthcare Mainland is a campus of HCA Houston Healthcare Clear Lake. Located in Texas City, the 222-bed acute facility is equipped with a Level III Trauma Center, an accredited Chest Pain Center with Primary PCI and a certified Primary Stroke Center. The HCA Houston Healthcare Mainland offers an emergency room, Heart and Vascular, Surgery services, women’s services, orthopedics, senior program for behavioral health, wound and care, center for sleep disorders.

Additional healthcare providers located in Galveston County include the:

- Coastal Health & Wellness is an FQHC with clinics in Texas City and Galveston providing medical and dental, laboratory, x-ray, and County-Indigent services for individuals of Galveston County on a sliding fee for service basis.
- Galveston VA Outpatient Clinic provides Primary Care services, behavioral health and women’s health, mental Tele-Med, and Prosthetic and rehabilitation services.
- St. Vincent Hope Clinic and CHRISTUS Point of Light, providing general medicine, mental health, immunizations and other services.
- Finally, The Gulf Coast Center located in Galveston and Texas City provide services for adult, adolescent and child mental health, substance abuse recovery, intellectual and development disabilities.

The Galveston County Health Department manages the Women, Infant and Children (WIC) program for Galveston County, the County Indigent Health Program, provides immunizations for a fee of \$13/one immunization; \$24/two or more per visit; and currently oversees management of the Coastal Health & Wellness federally qualified health center.⁶⁹ The health department has three locations: Texas City, Galveston Clinic, and Dickinson.

Per the 2024 County Health Rankings, Galveston County has 250 primary care physicians throughout the service area.

MyCHN serves the entire **Southeast Harris County and has two clinic sites within the county; MyCHN Scarsdale Family Health Center and MyCHN Pasadena.** MyCHN Pasadena is 7.5 miles or 12 minutes away from MyCHN’s Scarsdale Family Health Center. Between both MyCHN service sites there are various healthcare providers, hospitals, and emergency rooms in the area.

- Memorial Hermann Southeast Hospital offers a broad range of specialty services such as emergency and trauma, cardiac, women’s health, wound care, inpatient rehabilitation, surgery, and an imaging center. The Memorial Hermann Southeast Hospital is located three blocks from

MyCHN's 77089 service area clinic. The full-service hospital also provides newborn delivery services.

- MyCHN partners with the Memorial Hermann Hospital System and Houston Methodist Hospital to develop collaborations to reduce unnecessary emergency room and inpatient admissions. The hospital case workers may refer Medicaid and uninsured individuals and those without a medical home to MyCHN for primary care services in lieu of caring for non-emergency conditions within the emergency room setting.
- MyCHN contracts with two area obstetricians to extend antepartum, prenatal, and postpartum care and delivery services within *My CHN Prenatal Program*. Dr. Maximos Bassem and Dr. Kingsley Asumugha cares for all prenatal patients at the MyCHN's Women and Children clinic locations at the Victory Lakes, Pearland, Alvin and Scarsdale sites, and then provide delivery services at the Clear Lake Regional Hospital (Dr. Maximos) or the Memorial Hermann SouthEast Hospital (Dr. Asumugha).
- HCA Houston Healthcare Southeast, a 350-bed full service acute care hospital, with a Level III Trauma Center, an accredited Chest Pain Center, Level III neonatal intensive care unit (NICU) and certified Primary Stroke Center by the Joint Commission. The HCA Houston Healthcare Southeast hospital provides medical, surgical and diagnostic services, women's health, weight loss surgery, cardiac and many other services. The HCA Houston Healthcare Southeast Hospital is located 3.7 miles or 9 minutes from MyCHN Pasadena at 6243 Fairmont Parkway, Suite 204 in Pasadena, Texas 77505.
- Legacy Community Health is a full-service healthcare system with over 50 clinic locations and the largest federally qualified health center in Texas. The Legacy Community Health – Deer Park Clinic provides family medicine, women's health, prenatal and mental health services.
- Pasadena Health Center offers a wide range of services including family medicine, women's health, pediatrics, senior care, dental, counseling services, pharmacy, lab and imaging services.

The Harris County Public Health manages several services and programs throughout the Harris County such as the Women, Infant and Children's (WIC) program, immunization program and the Health and Wellness Clinic locations in Humble and the Pasadena Southeast area. The Harris County Public Health Southeast Clinic provides a variety of low-cost medical and preventive health services; physical exams, immunizations, chronic screenings and treatment, HIV screenings, women's health, mammography referrals, nutritional counseling, family planning services, a Refugee Health Screening program and dental services.⁷⁰

Per the 2024 County Health Rankings, Harris County has 2,754 primary care physicians throughout the service area.



Health Disparities and Concerns

While most health measures within the service area, such as socioeconomic, births and communicable diseases are either in line or better than rates within Texas, each county has a number of mortality measures that are higher than the State as demonstrated in the table below:

CDC Wonder Mortality Data/County Ranking⁷¹

Underlying Cause of Death, 2018 – 2022, Single Race Results	Brazoria County Pop. 388,181		Galveston County Pop. 357,117		Harris County Pop. 4,780,913		TEXAS Pop. 30,029,572	
<i>Crude Rate Per 100,000</i>	<i>Rate</i>	<i>Deaths</i>	<i>Rate</i>	<i>Deaths</i>	<i>Rate</i>	<i>Deaths</i>	<i>Rate</i>	<i>Deaths</i>
Child Mortality Rate (2018-2020 Per 1,000)	5.18	25	5.93	23	5.22	345	5.72	2,228
Malignant Neoplasms (C00-C97)	148.9	578	169.7	606	120.1	5,743	144.5	43,403
Breast Cancer (C50)	11.3	44	9.8	35	10.1	485	10.5	3,161
Colon Cancer (C18-C21)	13.4	52	14.6	52	12.7	609	14.5	4,359
Lung Cancer (C33-C34)	25.5	99	33.3	119	21.5	1,029	27.5	8,270
Prostate Cancer (C61)	8.8	34	9.0	32	6.4	306	7.4	2,232
Essential Hypertension (HTN) & HTN Renal Disease (I10, I12, I15)	Unreliable	16	8.7	31	7.1	340	8.5	2,567
Chronic Liver Disease and Cirrhosis (K70, K73-K74)	12.1	47	19.9	71	13.1	624	16.9	5,079
Alcohol Liver Disease (K70)	Unreliable	17	6.7	24	5.8	275	7.3	2,191
Septicemia (A40-A41)	9.5	37	21.0	75	12.5	600	11.9	3,586
Diseases of the Heart (I00-I09, I11, I13, I20-I51)	165.4	642	217.6	777	135.6	6,482	168.7	50,672
Ischemic Heart Disease (I20-I125)	78.8	306	73.6	263	73.3	3,506	89.2	26,779
Heart Failure (I50)	28.9	112	31.6	113	17.2	822	20.6	6,192
Cerebrovascular Disease (Stroke) (I60-I69)	35.0	136	44.8	160	34.8	1,662	40.7	12,225
Influenza and Pneumonia (J09-J18)	10.8	42	10.9	39	8.7	414	10.1	3,025
Kidney Disease (N17-N19)	16.2	63	24.4	87	14.0	670	15.6	4,675
Nutritional Deficiencies (E40-E64)	8.5	33	9.5	34	4.9	232	5.7	1,706
Diabetes Mellitus (E10-E14)	16.7	65	20.7	74	20.4	976	26.2	7,853
Chronic Lower Respiratory Diseases (J40-J47)	34.0	132	31.6	113	19.9	922	33.3	10,014
Other Chronic Lower Respiratory Diseases (COPD & Asthma) (J44, J47)	30.7	119	29.7	106	17.5	839	30.9	9,293
Motor Vehicle Accidents (V02-V04, V09.0, V09.2, V12-V14, V19.0- V19.2, V19.4-V19.6, V20-V79, V80.3-V80.5, V81.0-V81.1, V82.0- V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2)	15.5	60	15.4	55	14.2	678	15.3	4,584
Falls (W00-W19)	6.4	25	9.0	32	9.1	435	8.9	2,675
Intentional self-harm (suicide) (*U03, X60-X84, Y87.0)	16.2	63	17.1	61	13.1	627	14.5	4,368
Intentional self-harm (suicide) by discharge of firearms (X72-X74)	8.8	34	10.9	39	7.7	368	8.8	2,644
Intentional self-harm (suicide) by other and unspecified means and their sequelae (*U03, X60-X71, X75-X84, Y87.0)	7.5	29	6.2	22	5.4	259	1.5	455
Assault (homicide) (*U01-*U02, X85-Y09, Y87.1)	Unreliable	17	8.1	29	13.0	622	7.6	2,281
Assault (homicide) by discharge of firearms (*U01.4, X93-X95)	Unreliable	12	7.3	26	11.0	524	6.1	1,826
COVID-19 (U07.1)	33.7	131	41.7	149	32.3	1,542	48.5	14,573
HIV disease (B20-B24)	Unreliable	13	2.3	40	3.2	751	1.8	2,689

* Rates are marked as Unreliable when the death count is less than 20.

Cancer Statistics

Common cancers among women include breast, cervical, endometrial, ovarian, lung, colorectal, and skin cancers. Breast cancer is the most predominant neoplasm among women and is the second leading cause of cancer-related deaths in the United States, following lung cancer. Regular screenings, including annual mammograms, play a crucial role in early detection by increasing the chances of successful treatment and reducing the likelihood of cancer spreading. For men, the most common cancers include prostate, colorectal, testicular, bladder and skin cancers. Prostate cancer is one of the leading cancers diagnoses in men and can often be symptomatic in its early stages.

The American Cancer Society estimates 147,910 new cases in 2024 in Texas with 44,360 deaths; the Texas mortality rate is 143.6 which is lower than the National mortality rate (2017-2021) at 147.5. Texas new case estimates for 2024 reveal Breast Cancer with the highest new cases at 23,290 following Prostate at 20,790 new cases, lung and bronchus at 14,430, colorectum at 12,260, kidney and renal pelvis at 7,650 and non-Hodgkin lymphoma at 5,760 new cases.⁷² Colorectal cancer rates are on the rise for the younger population. In 2023, the American Cancer Society (ACS) reported 20% of diagnoses in 2019 were under 55, which has doubled since 1995. Colorectal cancer has moved from being the 4th leading cause of cancer death in both men and women under 50 two decades ago to first in men and second in women (breast cancer being first).

Statistics below from the Center for Diseases (CDC), U.S. Cancer Statistics demonstrate the significant impact of cancer across MyCHN's service area in Brazoria, Galveston and Harris Counties. Statistics reveal incidence and mortality cases among different racial and ethnic groups.⁷³

In **Brazoria County**, from 2017-2021, there were 8,233 new cancer cases, with 4,389 cases classified as male and 3,844 as female, resulting in an incidence rate of 445 cancer cases reported per 100,000 people. The majority of new cancer cases were among White individuals (5,431), followed by Hispanics (1,356) and Black/African American (1,086); the majority of cases were of White Males (2,960). From 2018 – 2022, there were 2,789 cancer-related deaths: a mortality rate of 154 deaths per 100,000.

- Breast Cancer (2017-2021)
1,177 new cases of female breast cancer were reported with an incident rate of 112 cases per 100,000 women. 698 new cases were reported among White women compared to Hispanic (224) and Black African/American (189). Between 2018-2022, there were 199 breast cancer deaths, resulting in a mortality rate of 20 deaths per 100,000 women.
- Colorectal Cancer (2017-2021)
732 new cases were reported for Colorectal cancer, with an incident rate of 40 cases per 100,000 individuals; 423 new cases were male, and 309 were female. New cases were reported higher among White individuals at 454 compared to Hispanic (136) and Black/African American (113). Most new cases were of White Male individuals (259). Between 2018-2022, there were 248 colorectal cancer deaths, resulting in a mortality rate of 13 deaths per 100,000.

- Lung Cancer (2017-2021)
979 new cases were reported for Lung cancer, with an incident rate of 55 cases per 100,000 individuals; 533 new cases were male, and 466 were female. New cases were reported higher among White individuals at 779 compared to Black/African American (93) and Hispanic (79). The majority of new cases were of White Male individuals (420). Between 2018-2022, there were 613 lung cancer deaths, resulting in a mortality rate of 34 deaths per 100,000.
- Cervical Cancer (2017-2021)
85 new cases were reported for Cervical cancer, with an incident rate of 9 cases per 100,000 women. New cases by race & ethnicity demonstrate White Female with 49 new cases compared to Hispanic females at 29, other racial data is not represented. From 2018-2022, there were 28 cervical cancer deaths, resulting in a mortality rate of 3 deaths per 100,000 women.
- Ovarian Cancer (2017-2021)
90 new cases were reported for Ovarian cancer, with an incident rate of 10 cases per 100,000 women. New cases by race & ethnicity demonstrate White Female with 60 new cases, other racial data is not represented. From 2018-2022, there were 49 ovarian cancer deaths, resulting in a mortality rate of 5 deaths per 100,000 women.
- Prostate Cancer (2017-2021)
1,154 new cases were reported for Prostate cancer, with an incident rate of 125 cases per 100,000 men. New cases by race & ethnicity demonstrate White Males with the highest new cases at 715 compared to Black/African American males (246) and Hispanic males (151). From 2018-2022, there were 135 prostate cancer deaths, resulting in a mortality rate of 19 deaths per 100,000 men.

In **Galveston County** from 2017-2021, there were 9,089 new cancer cases with 4,849 cases classified as male and 4,240 as female, with an incidence rate of 454 cancer cases per 100,000 people. Like Brazoria County, White individuals composed the largest group with 6,458 cases in Galveston County, followed by Black/African American (1,234) and Hispanics (1,178); majority of new cases were also of White Male individuals (3,517). A total of 3,222 cancer deaths occurred from 2018-2022: a mortality rate of 161 deaths per 100,000.

- Breast Cancer (2017-2021)
1,331 new cases of female breast cancer were reported with an incident rate of 129 cases per 100,000 women. 912 new cases were reported amount White women compared to Black African/American (198) and Hispanic (183). Between 2018-2022, there were 196 breast cancer deaths, resulting in a mortality rate of 18 deaths per 100,000 women.
- Colorectal Cancer (2017-2021)
813 new cases were reported for Colorectal cancer with an incident rate of 40 cases per 100,000 individuals; 466 new cases were male and 347 were female. New cases were reported higher among White individuals at 539 compared to Hispanic (126) and Black/African American (121). Most new cases were of White Male individuals (306). Between 2018-2022, there were 287 colorectal cancer deaths, resulting in a mortality rate of 15 deaths per 100,000.

- Lung Cancer (2017-2021)
1,193 new cases were reported for Lung cancer with an incident rate of 59 cases per 100,000 individuals; 628 new cases were male, and 565 were female. New cases were reported higher among White individuals at 937 compared to Black/African American (157) and Hispanic (82). Most new cases were of White Male individuals (497) following White females (440). Between 2018-2022, there were 761 lung cancer deaths, resulting in a mortality rate of 37 deaths per 100,000.
- Cervical Cancer (2017-2021)
90 new cases were reported for Cervical cancer, with an incident rate of 10 cases per 100,000 women. New cases by race & ethnicity demonstrate White Female with 52 new cases compared to Hispanic females at 19, other racial data is not represented. From 2018-2022, there were 33 cervical cancer deaths, resulting in a mortality rate of 4 deaths per 100,000 women.
- Ovarian Cancer (2017-2021)
101 new cases were reported for Ovarian cancer, with an incident rate of 10 cases per 100,000 women. New cases by race & ethnicity demonstrate White Female with 62 new cases and Hispanic Female at 24, other racial data is not represented. From 2018-2022, there were 65 ovarian cancer deaths, resulting in a mortality rate of 6 deaths per 100,000 women.
- Prostate Cancer (2017-2021)
1,060 new cases were reported for Prostate cancer, with an incident rate of 104 cases per 100,000 men. New cases by race & ethnicity demonstrate White Males with the highest new cases at 729 compared to Black/African American males (186) and Hispanic males (122). From 2018-2022, there were 159 prostate cancer deaths, resulting in a mortality rate of 20 deaths per 100,000 men.

Harris County had the highest cancer statistics, recording 88,043 new cases (44,619 cases classified as male and 43,424 as female) from 2017-2021, resulting in an incidence rate of 404 cancer cases per 100,000 people. White individuals represented the largest demographic, with 40,915 new cases, followed by Hispanics (22,034) and Black/African American (19,199); majority of new cases were also of White Male individuals (21,717). The county also reported 28,387 cancer-related deaths from 2018 to 2022, leading to a mortality rate of 135 deaths per 100,000.

- Breast Cancer (2017-2021)
13,651 new cases of female breast cancer were reported with an incident rate of 117 cases per 100,000 women. 6,089 new cases were reported amount White women compared to Hispanic (3,484) and Black African/American (3,050). Between 2018-2022, there were 2,356 breast cancer deaths, resulting in a mortality rate of 20 per 100,000 women.
- Colorectal Cancer (2017-2021)
8,018 new cases were reported for Colorectal cancer with an incident rate of 37 cases per 100,000 individuals; 4,386 new cases were male and 3,632 were female. New cases were reported higher among White individuals at 3,285 compared to Hispanic (2,195) and Black/African American (1,949). The majority of new cases were of White Male individuals (1,808). Between 2018-2022, there were 2,816 colorectal cancer deaths, resulting in a mortality rate of 13 deaths per 100,000.

- Lung Cancer (2017-2021)
8,756 new cases were reported for Lung cancer with an incident rate of 42 cases per 100,000 individuals; 4,755 new cases were male and 4,001 were female. New cases were reported higher among White individuals at 4,740 compared to Black/African American (2,225) and Hispanic (1,195). The majority of new cases were of White Male individuals (2,507) and White Female (2,233). Between 2018-2022, there were 5,273 lung cancer deaths, resulting in a mortality rate of 25 deaths per 100,000.
- Cervical Cancer (2017-2021)
1,114 new cases were reported for Cervical cancer, with an incident rate of 10 cases per 100,000 women. New cases by race & ethnicity demonstrate Hispanic females with the highest number of new cases at 537 compared to White females (277), Black/African American (236), and Asian & Pacific Islander (56); other racial data is not represented. From 2018-2022, there were 308 cervical cancer deaths, resulting in a mortality rate of 3 deaths per 100,000 women.
- Ovarian Cancer (2017-2021)
1,280 new cases were reported for Ovarian cancer, with an incident rate of 11 cases per 100,000 women. New cases by race & ethnicity demonstrate White Females with the highest number of new cases at 511 compared to Hispanic (411), Black/African American (249), and Asian & Pacific Islander (99); other racial data is not represented. From 2018-2022, there were 708 ovarian cancer deaths, resulting in a mortality rate of 6 deaths per 100,000 women.
- Prostate Cancer (2017-2021)
11,609 new cases were reported for Prostate cancer, with an incident rate of 112 cases per 100,000 men. New cases by race & ethnicity demonstrate White Males with the highest new cases at 5,445 compared to Black/African American males (3,329) and Hispanic males (2,157). From 2018-2022, there were 1,474 prostate cancer deaths, resulting in a mortality rate of 19 deaths per 100,000 men.

Awareness of these common cancers and the importance of regular screenings can lead to earlier diagnosis, improved treatment options, and, ultimately, better outcomes for both men and women. Education about risk factors, preventative measures and the importance of timely wellness exams is essential in the fight against cancer.

MyCHN screens for colon, breast, and cervical cancer as part of routine services and offers cancer treatment services through its specialty program.



Community Health Needs Identified

Based on the community health needs assessment conducted, MyCHN identifies the following community health needs as primary areas of concerns for the service area.

1. Lack of access to affordable and easily accessible health resources including primary care and mental health services, especially for low-income and uninsured individuals.
2. Lifestyle issues – e.g., obesity, alcohol and substance use exacerbate chronic health conditions and require professional intervention (weight counseling, intervention, referrals to Medication Assistance Treatment, inpatient and outpatient detoxification programs) to mitigate the impact to chronic health conditions, e.g., diabetes, hypertension, congestive heart failure, and other chronic conditions.
3. Survey results indicate a significant percentage of community members have diabetes, hypertension, heart disease, obesity, HIV, kidney, and cancer and require quality whole-person care to achieve positive health outcomes.
4. There is a continuous need for targeted, enabling services to assist individuals who cannot financially afford their medications, utilities, healthy and accessible food, and reliable transportation.
5. Housing Insecurity is a significant concern in Texas. Affordable housing for the lowest income earner is of significant concern and may lead to homelessness unless addressed.
6. Interventions to address mental illness and health disparities are critical.
 - Suicide rates illustrate the continued demand for services per the mortality rate. Galveston is 16.0 per 100,000, Brazoria County is 15.0, and Harris County is 11.0 versus the State of Texas' rate at 14.
 - The overdose death rate involving various opioids such as prescription opioids, heroin, and synthetic opioids (fentanyl) and those individuals experiencing alcohol use disorder proves the need for intervention. (Per 100,000 people the drug overdose rate is 21 for Galveston, 18 for Harris, and 14 for Brazoria County versus 14 for Texas).
 - Homeless individuals experience severe mental illness in substance use disorders and the number of homeless individuals in Brazoria and Galveston counties increased from 2023 to 2024. With 19% in Brazoria County, 27% in Galveston County experiencing a severe mental illness, 14% in Brazoria County, and 18% in Galveston County experiencing substance use disorders.

Recommendations / Areas of Focus

Recommendations for 2024-2025 are to facilitate whole person care to all sites to improve outcomes and increase the availability of quality preventive services for adults, women of childbearing age and children. Efforts to address survivors of human trafficking and intimate partner violence is also needed to tend to the health concerns of these individuals. MyCHN will implement the patient centered medical home application at the remaining eligible sites to ensure coordinated care, and significant effort will be made toward preventive care, emphasizing depression and anxiety screens, social determinants of health and other preventive screens, child and adult immunizations including the Covid-19 vaccine, HPV Vaccines, and the integration of care coordination and social supports using medical and behavioral health case management.

MyCHN will continue building community partnerships to increase access to specialized health services (cardiology, podiatry, nephrology, ophthalmology, endocrinology, etc.) available to patients within MyCHN's clinic settings as well as within the community. These initiatives will improve the Center's ability to provide value-based care focused on improving the patient's health. Other associated enterprises include a focus on interventions based on the social determinants of health and looking for value-based funding opportunities and revenue streams through public and private funding.

The Center will enhance the provision of primary care services to the western portion of Brazoria County, Southeast Harris County, Galveston County and adjacent areas of high need. Options include remote patient monitoring, virtual care, transportation from these communities to existing sites, and taking care into the home to close care gaps. The western portion of Brazoria County is the most rural and underserved population within Brazoria County. Galveston County, despite the strong medical infrastructure, includes a designated Rural area with significant behavioral health and medical needs.

MyCHN recognizes the demand for dental care remains a high priority issue for the low-income population. MyCHN expanded its specialty dental care by bringing digital lab services in-house to improve access to prosthodontic services (crowns, dentures and partials). New initiatives in oral health include expanding the use of Teledentistry to clinic locations and within patient homes; and implementing implant services.

MyCHN initiated ultrasound services in 2023 and is moving forward with mobile X-ray services. Mammography and MRI are slated for the next expansion.

The Center will continue to expand substance abuse services, counseling and psychiatric services in Alvin, Pearland, League City, Clute, Freeport, Lake Jackson and the Scarsdale at the clinic locations by collaborating with social service organizations, schools, and through service expansion into existing facilities. The demand for behavioral health services increases each year and MyCHN's approach to providing these services requires innovation. Integration of medical management of behavioral health into primary care remains the primary directive. The Center integrated PCMH into behavioral health along with value-based outcomes such as keeping patients out of hospitals, emergency rooms and the criminal justice system.

A recommendation is to hire more bilingual providers to match them to patients with shared backgrounds of the patient population MyCHN serves.

The Center will continue to expand eligibility services to assist people enrolling in Medicaid, Medicare, SNAP, CHIP and the Health Insurance Exchange (Marketplace Place) at all clinic locations and when feasible at community locations. Community Partner Program services are stressed at all clinic locations primarily serving women and children who are eligible for Medicaid and CHIP at larger numbers in Texas. Center eligibility staff will attempt to meet with all insured patients at least annually to ensure they are getting the most from their private or public insurance. With an updated 2022 Memorandum of Agreement with Texas Health and Human Services, MyCHN may now track application status for individuals' Medicaid and CHIP applications and may assist with password resets.

MyCHN will continue to work with the MD Anderson-University of Texas Medical Center, University of Houston Clear Lake, University of Houston Central Campus, Texas A&M AgriLife, the Houston Food Bank Food for Change, Houston Methodist Network to Care, Harvest for the Hungry, and Living Plate collaborations and other organizations in efforts to provide support and specialty services that have a beneficial impact on patient outcomes related to chronic diseases (diabetes, hypertension and hyperlipidemia, asthma, etc.) and cancer prevention. These partnerships allow MyCHN to provide extended no cost services to patients and result in better outcomes. Opportunities exist to expand collaborations with new organizations into new communities in need of care.

MyCHN will continue to reach out to Senior Centers, Assisted Living Complexes, Group Homes and area organizations that serve the senior population to expand services to patients on Medicare. Further, Seniors 65 and older are being challenged to access to primary health care due to a high rate of primary care doctors retiring or no longer accepting Medicare plans, and many face financial challenges that can be alleviated in part through Center services. Primary Care Provider and care coordination efforts to improve quality outcomes of the traditional Medicare population is the principal method that reduces Medicare costs.

MyCHN's Outreach and Eligibility team will continue to work with small local businesses to expand access to care for employees who do not receive employer sponsored healthcare. These individuals will have an opportunity to receive care at MyCHN sites either through programs, sliding fee scales, through private insurance, through the ACA and through MyCHN's subscription service, MyConcierge Access. MyConcierge Access is a monthly subscription service MyCHN offers through a phone app. MyConcierge Access offers primary care acute and chronic care, prescription medications, birth control services, laboratory services, cancer screenings, diabetes screenings, and more.

MyCHN will seek collaborations with organizations such as Head Start, WIC and senior service organizations and others to ensure low-income individuals have access to primary care, general dentistry and behavioral healthcare services. MyCHN is collaborating with the School Districts in all three counties to streamline processes and reduce barriers to students in need of service through a memorandum of understanding.

MyCHN will continue to expand the use of telehealth psychiatry and telemedicine services to increase access to care at remote locations and to special populations through collaborations. Telemedicine extends care to these special populations for acute issues that most frequently send patients to the emergency room.

MyCHN will continue to deploy the mobile clinics to provide medical, dental, and behavioral health services and utilize transportation vans for pharmacy deliveries to individuals in MyCHN's service area to provide care to individuals who lack transportation services. MyCHN will continue to invest resources to address Social Determinants of Health (SDOH) needs for the patient population to improve health outcomes within its service area. The @Home team will assess patients' SDOH needs while closing care gaps. The @Home team will refer identified needs through the BrazCo Resource Network to community partners.

MyCHN will maintain its collaboration with the United Way of Brazoria County to support The BrazCo Resource Network in Brazoria County and seek partnerships with other community partners in Galveston and Harris County. The BrazCo Resource Network utilizes a SDOH web-based platform to facilitate coordination and collaboration through a network of social service and health providers.⁷⁴

The BrazCo Resource Network is a platform for the 55 plus social service organizations, Brazoria County government, and school districts to refer clients who have SDOH needs. Clients consent for their contact information to be shared. The PRAPARE SDOH screen is built into the network, and participating agencies screen the client for needs. The system identifies the client's needs and provides a list of organizations that offer services to fill the need. The agency selects the service and agency to fill the need, and a referral is sent electronically. The agency may accept or deny the referral (with reason) and is responsible for contacting the patient. The response is tracked, and the referral is complete upon successful appointment set up with the patient or resource provided. MyCHN monitors referral reports from the network to identify the greatest needs for MyCHN's patients and uses this information to build additional collaborations and seek grant funding to address specific issues. MyCHN is tracking need and referral outcome information and seeks to increase the number of screens completed, extrapolate SDOH needs from the provider encounter documentation and is capturing SDOH outcomes using ICD-10 codes. future.

MyCHN will continue to pursue opportunities to serve the service area according to needs identified and the organizational strategic plan.

Be it resolved that the Board of Directors of Community Health Network approves the 2024 Community Needs Assessment.

The resolution is effective on the _____ day of _____, 2024.

Signed _____

Gerald Roznovsky, Board Chair

Sources:

- ¹ <https://data.hrsa.gov/tools/data-reporting/program-data?grantNum=H80CS11255>
- ² <https://data.hrsa.gov/tools/data-reporting/program-data?grantNum=H80CS11255>
- ³ <https://txcip.org/tac/census/profile.php?FIPS=48039>
- ⁴ <https://txcip.org/tac/census/profile.php?FIPS=48167>
- ⁵ <https://txcip.org/tac/census/profile.php?FIPS=48201>
- ⁶ <https://censusreporter.org/profiles/06000US4820193645-southeast-harris-ccd-harris-county-tx/>
- ⁷ <https://www.texastribune.org/2024/03/14/texas-counties-rapid-population-growth/>
- ⁸ <https://www.census.gov/quickfacts/fact/table/pearlandcitytexas/PST045223>
- ⁹ <https://www.leaguecitytx.gov/3879/League-City-At-A-Glance>
- ¹⁰ <https://www.census.gov/quickfacts/houstoncitytexas>
- ¹¹ <https://data.census.gov/table/ACSDP1Y2023.DP05?q=brazoria%20county,%20texas>
- ¹² <https://data.census.gov/table/ACSDT1Y2023.B21001?q=veterans%20brazoria%20county,%20texas>
- ¹³ <https://data.census.gov/table/ACSDP5Y2022.DP05?q=galveston%20county,%20texas>
- ¹⁴ <https://data.census.gov/table/ACSDT5Y2022.B21001?q=veterans%20galveston%20county,%20texas>
- ¹⁵ https://data.census.gov/table/ACSDP5Y2022.DP05?q=DP05&g=040XX00US48_050XX00US48039,48167,48201_060XX00US4820191835,4820192975,4820193645
- ¹⁶ <https://www.federalregister.gov/documents/2018/11/13/2018-24566/census-county-divisions-ccds-and-equivalent-entities-for-the-2020-census-final-criteria>
- ¹⁷ <https://data.census.gov/table/ACSST5Y2022.S0101?q=Galveston%20County%20Age>
- ¹⁸ <https://data.census.gov/table/ACSST5Y2022.S0101?q=Texas%20Age>
- ¹⁹ https://data.census.gov/table?q=Brazoria%20County%20Uninsured&g=040XX00US48_050XX00US48167,48201_060XX00US4820191835,4820192975,4820193645
- ²⁰ https://data.census.gov/table/ACSST5Y2022.S1701?q=Brazoria%20County%20Poverty&g=040XX00US48_050XX00US48167,48201_060XX00US4820191835,4820192975,4820193645
- ²¹ <https://data.census.gov/table/ACSST5Y2022.S1901?q=77511%20Median%20Household%20Income&g=860XX00US77422,77430,77480,77486,77515,77531,77534,77541,77566,77577,77578,77581,77583,77584>
- ²² <https://www.twc.texas.gov/news/texas-job-growth-surges-78000-jobs-added-august#:~:text=Texas%20seasonally%20adjusted%20total%20nonfarm.rate%20by%200.7%20percentage%20points>
- ²³ <https://www.wrksolutions.com/Documents/Employer/LMI/unemploymentrates/Houston-LAUS.pdf>
- ²⁴ https://www.galvnews.com/business/free/tourism-numbers-for-2021-show-strong-recovery/article_039d438f-e5c4-599f-9aa2-614202fcc450.html
- ²⁵ <https://www.pasadenachamber.org/about-pasadena>
- ²⁶ https://data.census.gov/table/ACSDP1Y2023.DP03?q=Brazoria%20County%20Employment&g=040XX00US48_050XX00US48167,48201_060XX00US4820191835,4820192975,4820193645
- ²⁷ <https://www.countyhealthrankings.org/health-data/texas?measure=Air+Pollution+-+Particulate+Matter&tab=1&year=2024>
- ²⁸ <https://www.countyhealthrankings.org/health-data/texas?measure=Drinking+Water+Violations&tab=1&year=2024>
- ²⁹ <https://www.countyhealthrankings.org/health-data/texas?measure=Severe+Housing+Problems&tab=1&year=2024>
- ³⁰ <https://www.countyhealthrankings.org/health-data/health-factors/physical-environment/housing-and-transit/broadband-access?state=48&tab=1&year=2024>
- ³¹ <https://www.countyhealthrankings.org/health-data/texas?measure=Social+%26+Economic+Factors&year=2024>
- ³² https://data.census.gov/table/ACSST5Y2022.S1501?t=Educational%20Attainment&g=040XX00US48_050XX00US48039,48167,48201_060XX00US4820191835,4820192975,4820193645
- ³³ <https://societyhealth.vcu.edu/work/the-projects/why-education-matters-to-health-exploring-the-causes.html#gsc.tab=0>
- ³⁴ https://www.countyhealthrankings.org/health-data/texas?measure=Limited+Access+to+Healthy+Foods*&year=2024&tab=1
- ³⁵ <https://map.feedingamerica.org/county/2022/overall/texas>
- ³⁶ <https://www.prb.org/articles/a-shift-in-hunger-u-s-food-policy-and-what-we-learned-from-the-pandemic/>
- ³⁷ https://data.census.gov/table/ACSST5Y2022.S2201?t=Income%20and%20Poverty&g=040XX00US48_050XX00US48039,48167,48201_060XX00US4820191835,4820192975,4820193645
- ³⁸ <https://www.edquity.co/blog/housing-insecurity-definition-understanding-student-homelessness#:~:text=According%20to%20the%20U.S.%20Department,and%20overall%20loss%20of%20housing>
- ³⁹ <https://housingmatters.urban.org/articles/how-does-housing-stability-affect-mental-health#:~:text=This%20is%20true%20for%20renters,%2C%20social%20isolation%2C%20and%20anxiety>
- ⁴⁰ <https://taahp.org/gap-report-texas-ranks-the-6th-worst-state-in-the-nation-for-affordable-housing/#:~:text=The%20absolute%20shortage%20ranges%20from,face%20the%20most%20housing%20shortages>
- ⁴¹ <https://www.txhealthsteps.com/static/courses/housing-instability/sections/section-1-5.html>
- ⁴² <https://www.countyhealthrankings.org/health-data/health-factors/physical-environment/housing-and-transit/severe-housing-cost-burden?state=48&year=2024&tab=1#map-anchor>
- ⁴³ <https://www.thn.org/texas-balance-state-continuum-care/data/pit-count-and-hic/>

-
- 44 <https://www.thn.org/wp-content/uploads/2024/05/Final-Galveston-2024-PIT-Report.pdf>
 - 45 <https://www.thn.org/wp-content/uploads/2024/05/Final-Brazoria-2024-PIT-Report.pdf>
 - 46 https://irp.cdn-website.com/2d521d2c/files/uploaded/Homeless_Count_2024_final.pdf
 - 47 <https://www.cfthhouston.org/2024-pit-count->
[results#:~:text=Houston%2C%20Texas%20\(June%2018%2C,%2C%20and%20Montgomery%20counties%2C%20Texas.](https://www.cfthhouston.org/2024-pit-count-#~:text=Houston%2C%20Texas%20(June%2018%2C,%2C%20and%20Montgomery%20counties%2C%20Texas.)
 - 48 <https://upbring.org/6-truths-about-human-trafficking-in-texas/>
 - 49 https://www.acf.hhs.gov/sites/default/files/documents/orr/health_problems_seen_in_traffick_victims.pdf
 - 50 <https://assets.speakcdn.com/assets/2497/texas-2021101912193436.pdf>
 - 51 <https://www.houstondomesticviolencedefense.com/texas-domestic-violence-statistics-by-county/>
 - 52 https://tcfv.org/wp-content/uploads/Fact-Sheet-English_v3.pdf
 - 53 <https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html>
 - 54 <https://www.psychiatry.org/psychiatrists/diversity/education/intimate-partner->
[violence#:~:text=Physical%20Health%20Effects%20of%20IPV&text=The%20most%20common%20physical%20symptoms,%2C%20back%2C%20and%20pelvic%20pain.&text=IPV%20can%20also%20result%20in,for%20the%20mother%20and%20child](https://www.psychiatry.org/psychiatrists/diversity/education/intimate-partner-violence#:~:text=Physical%20Health%20Effects%20of%20IPV&text=The%20most%20common%20physical%20symptoms,%2C%20back%2C%20and%20pelvic%20pain.&text=IPV%20can%20also%20result%20in,for%20the%20mother%20and%20child)
 - 55 <https://www.mylanguageconnection.com/language-barriers-in-healthcare/>
 - 56 https://data.census.gov/table/ACSST5Y2022.S1601?t=Language%20Spoken%20at%20Home&g=040XX00US48_050XX00US48039,48167,48201_060XX00US4820191835,4820192975,4820193645
 - 57 <https://www.texasransitdashboard.com/wp-content/themes/txtransit/data/PDFs/UR04.pdf>
 - 58 <https://www.galvestontx.gov/393/Transportation>
 - 59 <https://www.countyhealthrankings.org/health-data/health-factors/physical-environment/housing-and-transit/long-commute-driving-alone?state=48&year=2024&tab=1#map-anchor>
 - 60 <https://www.countyhealthrankings.org/health-data/texas/brazoria?year=2024>
 - 61 <https://www.countyhealthrankings.org/health-data/texas/galveston?year=2024>
 - 62 <https://www.countyhealthrankings.org/health-data/texas/harris?year=2024>
 - 63 <https://data.hrsa.gov/tools/shortage-area/hpsa-find>
 - 64 <https://www.countyhealthrankings.org/health-data/compare-counties?compareCounties=48039%2C48167%2C48201%2C48000&year=2024>
 - 65 <http://www.brazoriacounty.org/resources/Hospitals.html#:~:text=Brazosport%20Memorial%20Hospital,-Brazosport%20Memorial%20Hospital&text=As%20a%20non%2Dprofit%20hospital,the%20residents%20of%20Brazoria%20C>
[ounty](http://www.brazoriacounty.org/resources/Hospitals.html#:~:text=Brazosport%20Memorial%20Hospital,-Brazosport%20Memorial%20Hospital&text=As%20a%20non%2Dprofit%20hospital,the%20residents%20of%20Brazoria%20C)
 - 66 <https://www.countyhealthrankings.org/health-data/health-factors/clinical-care/access-to-care/primary-care-physicians?state=48&tab=1&year=2024>
 - 67 <https://www.healthgrades.com/hospital-directory/tx-texas/galveston>
 - 68 <https://www.utmbhealth.com/locations/hospitals-campus/galveston-campus/hospitals-services/john-sealy-hospital/history>
 - 69 <https://www.gchd.org/about-us/community-health-services/immunization-services>
 - 70 <https://publichealth.harriscountytexas.gov/About>
 - 71 <https://wonder.cdc.gov/Deaths-by-Underlying-Cause.html>
 - 72 <https://cancerstatisticscenter.cancer.org/states/texas>
 - 73 <https://gis.cdc.gov/Cancer/USCS/#/StateCountyTerritory/>
 - 74 <https://brazconetwork.org/>