



2019 DURHAM COUNTY COMMUNITY HEALTH ASSESSMENT SURVEY

Hispanic or Latino Neighborhood Sample Results

ABSTRACT

Aggregated results from the 2019 Durham County Community Health Assessment Survey among Hispanic and Latino residents are presented for each question.



Public Health

Executive Summary

The Partnership for a Healthy Durham, Durham County Department of Public Health and Duke Health would like to thank the residents of Durham County for participating in the 2019 Community Health Assessment survey. Collecting the data and analysis of the results are not possible without the honest conversations and the engagement of the community.

Purpose of the Community Health Assessment Survey

The Community Health Assessment survey is done door-to-door every three years jointly with the Partnership for a Healthy Durham, Durham County Department of Public Health and Duke Health. The partners choose to conduct door-to-door surveys because:

- Find out directly from the community what issues/factors impact their health
- Gives us the opportunity to talk to the people we serve
- Collect data at County level that can't get from other sources
- Reach populations we may not through other survey methods
- Improved response rates



The survey is the first step in the Community Health Assessment process. This report details the findings of the 2019 Community Health Assessment Survey Hispanic or Latino neighborhood sample.

Survey Development

The survey development process was led by the epidemiologist with the Durham County Department of Public Health and involved many partners and community members. The Hispanic or Latino sample survey team reviewed the 2016 survey, considered community feedback, looked for gaps in existing data to determine which questions to remove or add. The group provided suggestions for questions, responses and language edits to improve the translation and appropriateness of the survey. The survey was then reviewed, tested and finalized.

See page 4 of the 2019 Durham County Community Health Assessment report for the Hispanic or Latino sample for details on survey development.

Sampling Methods

The survey sample was drawn from Durham County census blocks with at least 50% or more Hispanic or Latino residents according to 2010 census data. Randomly selected residential address within each census block were picked as starting points. The sample size was 235 with the goal of reaching an 80% survey completion rate of 188 surveys.

See page 3 of the 2019 Durham County Community Health Assessment report for the Hispanic or Latino neighborhood sample.

Survey Administration

Volunteers from the Partnership for a Healthy Durham, local colleges and universities, community organizations in the Triangle area and the Durham County Department of Public Health conducted the surveys. It took 57 volunteers over 38 survey days between May and September 2019 to finish the survey. Volunteers were trained and sent in pairs to neighborhoods throughout Durham to collect data. To be eligible for this survey, respondents had to identify as Hispanic or Latino. Surveys were done mainly in Spanish and in English when the survey participant did not speak Spanish.

See page 4 of the 2019 Durham County Community Health Assessment report for the county wide sample for details on survey administration.

Results

There were 188 surveys completed in the county wide sample for a response rate of 80%. The results for the sample cannot be generalized to the entire Hispanic or Latino population in Durham. The results can only be applied those who participated in the survey.

Many themes emerged in the results of the Hispanic or Latino. Those themes are:

- Health outcomes in many areas were worse for the Hispanic or Latino survey respondents, particularly income, home ownership, food security and access to care
- Structural racism and immigration status are causes of health disparities for this population
- Issues are linked; for example, housing issues are also access to care and food insecurity issues
- Top ways to better support communities such as increased police response to crime, access to care, more health programming and health education, education system improvements and stronger communication and outreach to community could also address some issues that impact quality of life and top health concerns
- Majority of residents feel safe where they live in Durham

For the first time, the 2019 Community Health Assessment survey asked what people, places and things made Durham a good place to live. Results for the Hispanic or Latino neighborhood survey are below.



2019 Durham County Health Opinion Survey Results – Hispanic or Latino Neighborhood Sample

Please direct questions to:

Marissa Mortiboy, MPH

Partnership for a Healthy Durham Coordinator, Durham County Department of Public Health

919-560-7833

mmortiboy@dconc.gov

Introduction and Methods

Survey Development

Creating the Survey

The Durham County Department of Public Health (DCoDPH) convened a development team to prioritize what questions to include in the 2019 Hispanic or Latino neighborhood sample survey. The team included representatives from El Futuro, El Centro Hispano, Immaculate Conception Catholic Church, InStepp, Duke University, and the DCoDPH. The survey development team met three times.

The team began by reviewing the survey questionnaire from 2016. Questions with low response rates were considered for removal first. Then the group reviewed the remaining questions. The development team discussed how data from the previous survey had been used by groups who requested specific questions during the 2016 survey. If data from questions that were requested by a specific group in the 2016 survey had not been used, those questions were considered for removal.

Gaps in the survey based on information needed for newly formed groups, like the Partnership for a Healthy Durham Health and Housing committee, were discussed. The group also considered questions and answer choices that were needed in order to create a more culturally appropriate survey. After the group identified topic areas where more information was needed, validated questions were reviewed and considered for addition to the survey when available.

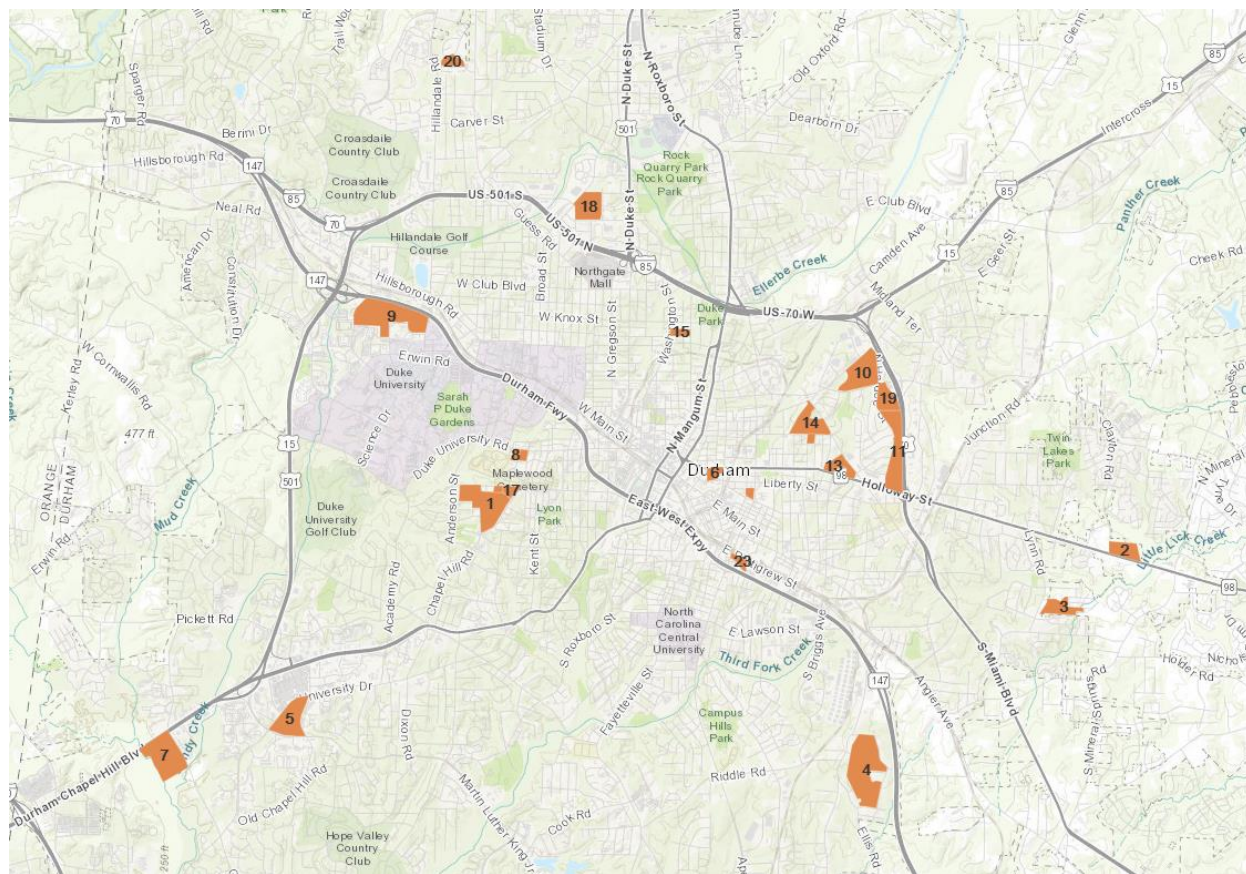
The group reviewed all the questions that were suggested for removal and addition to the survey. They voted on what to keep and eliminate. Then the group reviewed the entire survey and provided suggestions for language edits to improve the translation and appropriateness of the survey. Lastly, the survey was reviewed in its entirety by the team, tested in a pilot, and finalized.

Sampling Methods

This survey was drawn using a two-stage cluster sample. This methodology involves randomly selecting census blocks in Durham County where there are at least 50% or more Hispanic or Latino residents according to the 2010 census data. Then a set of interview start points located at specific residential addresses within each census block included in the sample were randomly selected. Census blocks were selected with probability proportionate to population size, which means that census blocks with large populations had a higher chance of being selected into the sample compared to census blocks with small populations. Only census blocks in Durham County where there were at least 50% or more Hispanic or Latino residents were eligible to be selected into the sample.

Twenty-three census blocks and 235 households were included in the sample. A map showing the location of the selected census blocks is displayed below in Figure 1.

Figure 1. Clusters Included in the Hispanic or Latino Sample



Survey Administration

Volunteers were recruited from the Partnership for a Healthy Durham; colleges, universities, and community organizations in the Triangle; and DCoDPH. A total of 57 volunteers helped with the Hispanic or Latino sample over the course of 38 survey days. The survey began in May and was finished in September of 2019.

Two in person trainings were provided for volunteers in May and an online training was available on demand. The training covered survey best practices, survey methods, safety, cultural sensitivity, and hands-on practice giving the survey and recording answers.

Surveys were administered primarily in Spanish and occasionally in English when the survey participant did not speak Spanish. Volunteers were sent out to survey in teams of two and were asked to start at houses that were randomly selected. If no one answered the door at the address that was randomly selected or if the person who answered the door was not eligible to take the survey or did not want to take the survey, the teams were asked to go to the next closest house in the survey area. The teams continued going to the next closest house until a survey was completed. Then, the volunteer teams continued to the next randomly selected house to complete the next interview. This method is described in more detail in the Center for Disease Control and Prevention (CDC) [CASPER guide](#) (1).



Survey Benefits and Limitations

There are benefits and limitations with conducting a door-to-door survey. They are as follows:

Benefits:

- Quality of collected data
- Improved response rates
- Hear directly from residents about issues that impact their health
- Reach the Hispanic or Latino community members who may have been missed using other survey methods

Limitations:

- U.S. Census data to determine sample from 2010
- Interviewer bias
- Self-reported data
- Time and resources needed to collect data

Eligibility Criteria

People must have met the following four criteria to take the survey:

- Be 18 years or older
- Live in the household being surveyed
- Identify as Latino or Hispanic (speaking Spanish was not required)
- Be willing to take the survey

2019 Durham County Health Opinion Survey Results – Hispanic or Latino Neighborhood Sample

Data Analysis.

Analysis was completed in SAS 9.4. Data were weighted to account for the sampling methods. The CDC CASPER method was used to calculate weights adjusting for the design. The CASPER weighting method accounts for the total number of households in the sampling frame, the number of households in the census block, and the number of interviews collected in each census block.

Confidence intervals are provided for all results and should be used when interpreting data. The confidence intervals represent the range of values that contain the true value in 95% of repeated samples.

Results

There were 188 completed surveys in the Hispanic or Latino sample. The survey response rate was 80%. Demographic characteristics of survey participants are presented in Table 1 below.

Table 1. Demographic Characteristics of Survey Respondents

	CHA Survey Estimate (95% confidence interval)
Median Age	42 (41.9, 43.1)
Gender	
Man	32.7% (23.2, 42.0)
Woman	65.6% (56.1, 74.9)
Non-binary	.7% (0, 1.9)
Refused	1.1% (0, 2.7)
Education	
Less than 9 th grade	31.3% (23.3, 39.1)
9-12 th grade, no diploma	21.5% (14.1, 28.8)
High school graduate or equivalent	24.7% (17.4, 31.8)
Some college, no degree	12.4% (3.3, 21.4)
Associate's degree	2.7% (.2, 5.2)
Bachelor's degree	6.3% (1.2, 11.3)
Graduate or professional degree	.5% (0, 1.2)
Employment Status	
Disabled	1.2% (0, 2.6)
Employed full-time	40.1% (30.6, 49.6)
Employed part-time	20.3% (12.7, 27.8)
Homemaker	23.8% (16.9, 30.7)
Retired	1.1% (0, 3.3)
Self-employed	5.8% (2.2, 9.2)
Student	3.6% (.7, 6.4)
Unemployed	8.8% (3.9, 13.6)

Table 1, above, illustrates that the median age among survey participants was 42. Women were overrepresented in the sample.

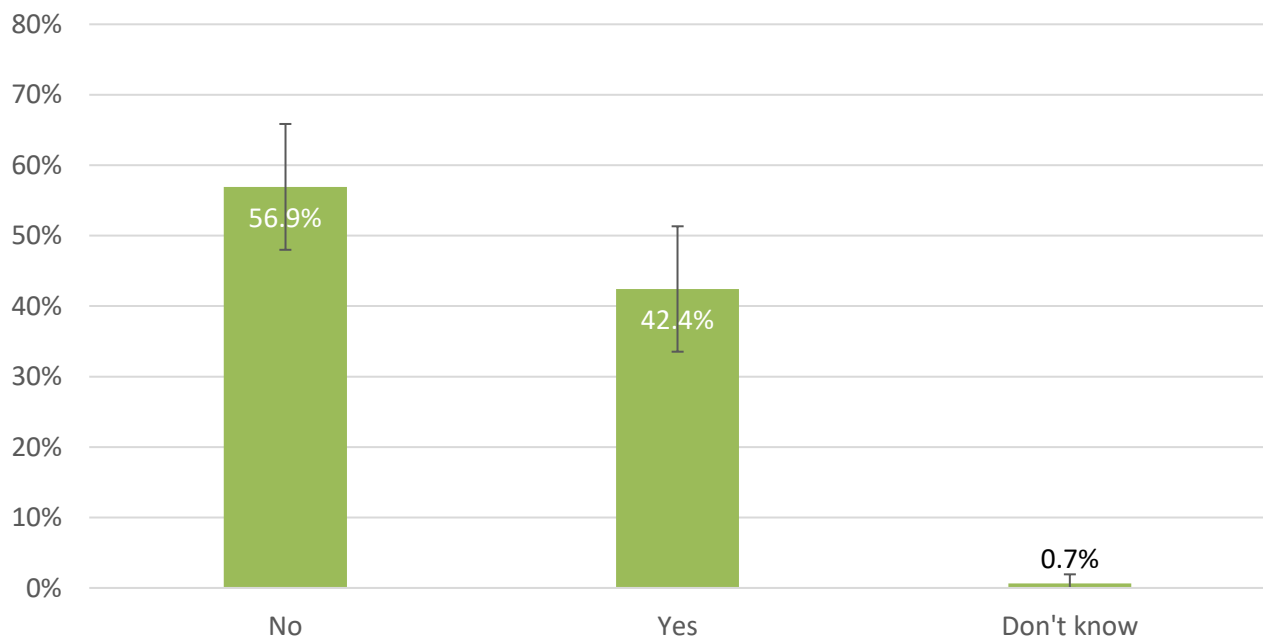
Since the Hispanic and Latino sample was selected among neighborhoods with at least 50% or more Hispanic and Latino residents, the results can only be extrapolated to Hispanics and Latinos living in neighborhoods with high proportions of Hispanics and Latinos. The results cannot be generalized to all Hispanics and Latinos living in Durham County.

Questions are grouped by the following topic areas:

Access to Healthcare: Questions 1-9.....	Page 7
Personal Health: Questions 10-18.....	Page 12
Discrimination: Questions 19-21.....	Page 18
Physical Activity: Questions 22-25.....	Page 20
Diet and Food Access: Questions 26-30.....	Page 22
Tobacco Use: Questions 31-35.....	Page 25
Household: Questions 36-42.....	Page 29
Community Improvement: Questions 43-46.....	Page 33
Emergency Preparedness: Questions 47-48.....	Page 37
Demographics: Questions 49-57.....	Page 38

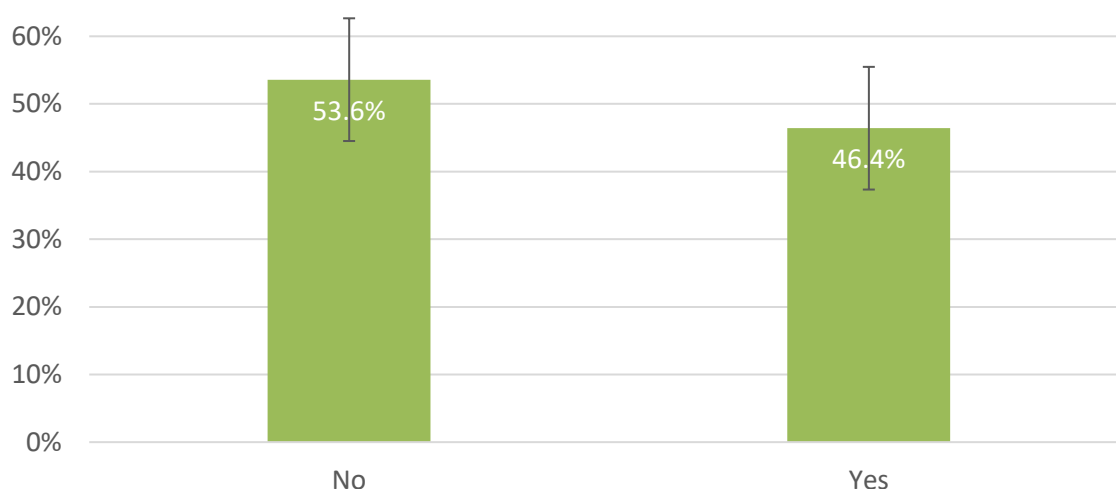
Access to Healthcare

1. Do you have one person you think of as a personal doctor or health care provider?



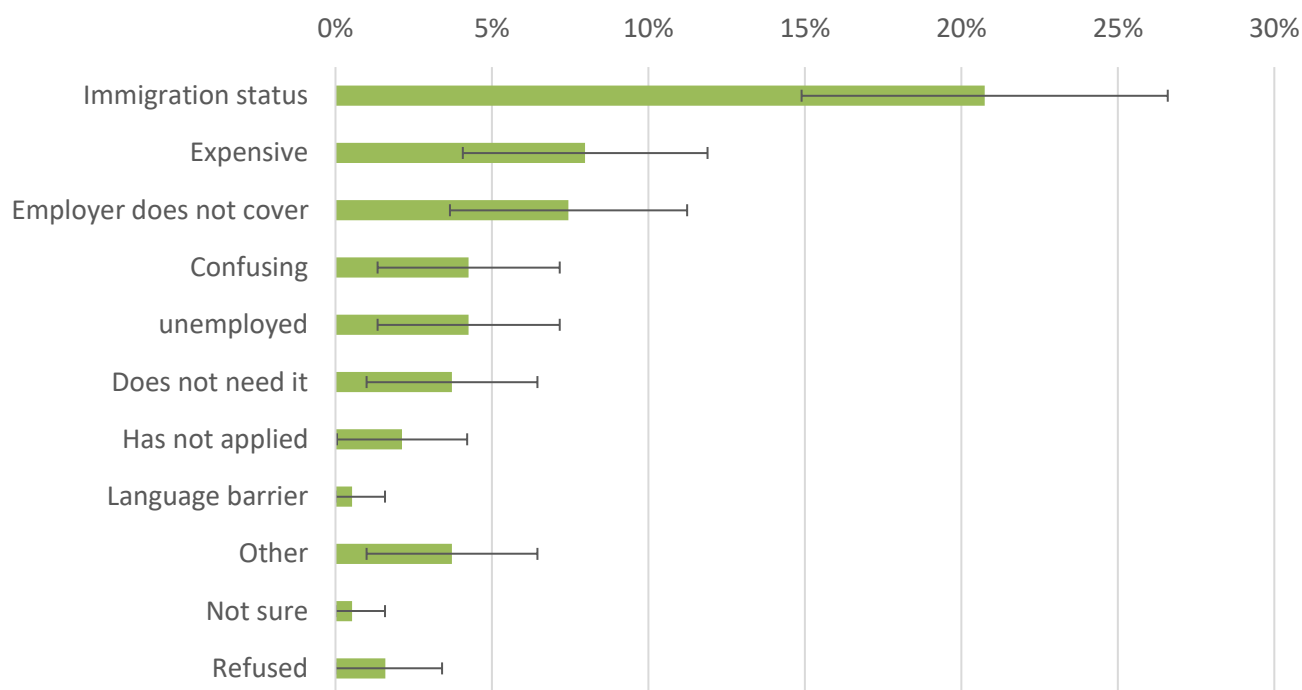
Interpretation: Most residents (56.9%) surveyed did not have someone they consider to be their personal doctor.

2. During the past 12 months, was there any time you did not have any health insurance or coverage?



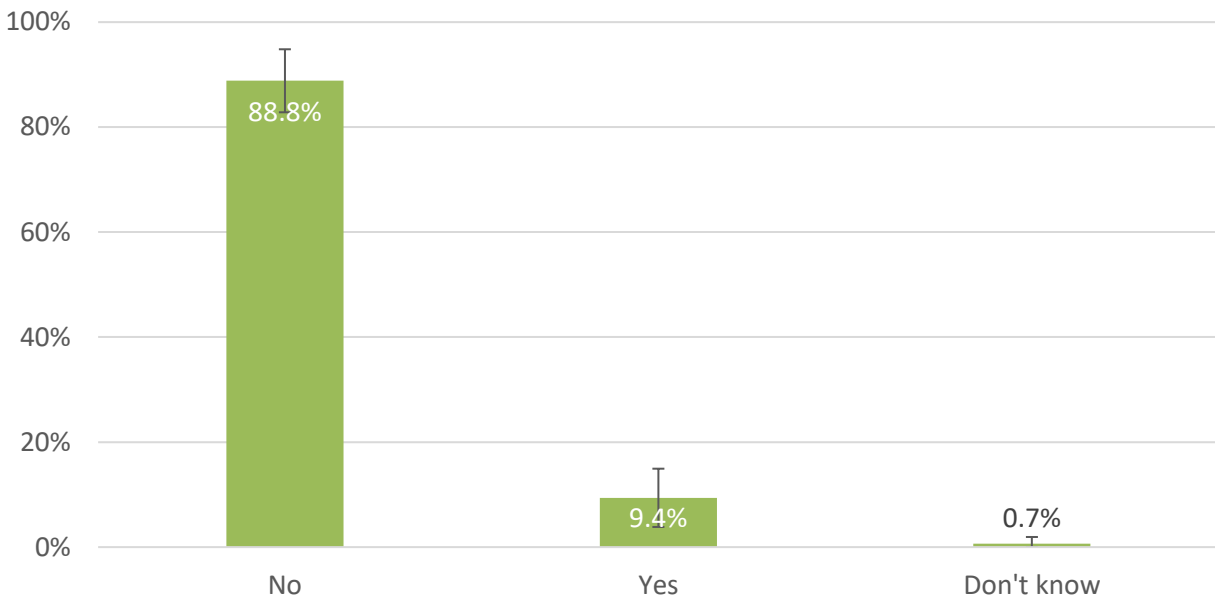
Interpretation: Most Hispanic or Latino residents surveyed (53.6%) had breaks in coverage during the past 12 months. Nearly half of residents had health insurance without any breaks during that 12-month period.

3. Since you said “yes”, what prevented you from having health insurance or coverage?



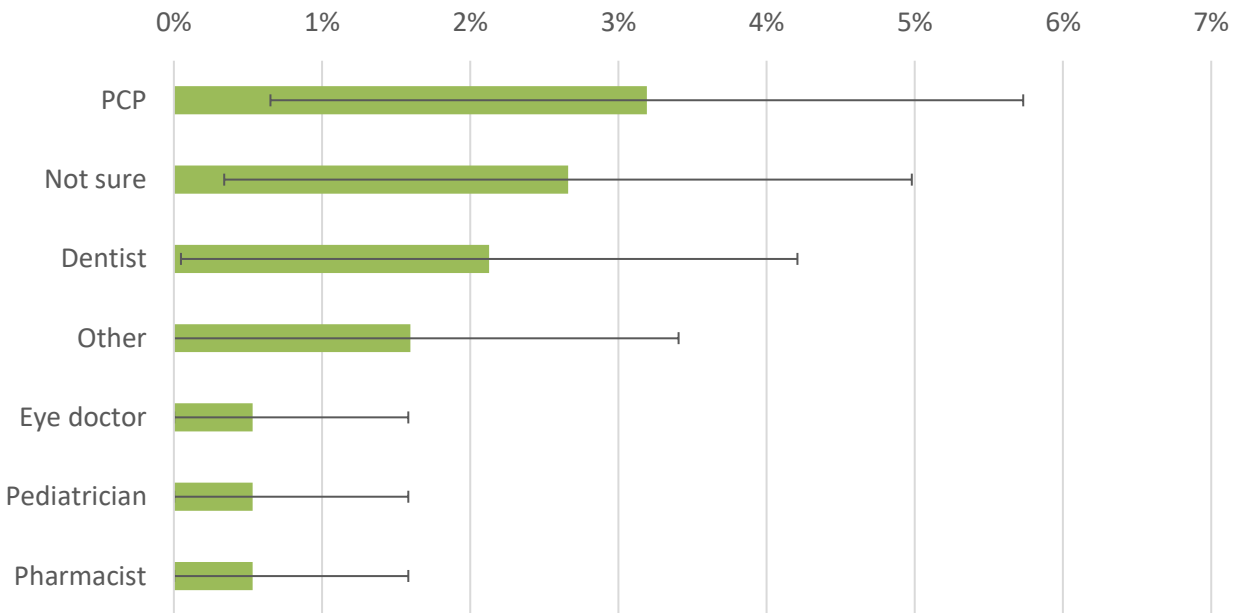
Interpretation: Note that this question was only answered by people who indicated that they were uninsured at some point during the past 12 months (n=100). Among residents who did not have health insurance at some point during the past 12 months, immigration status was the biggest factor in getting insurance.

4. In the past 12 months, did you have a problem getting the health care you needed for you or for someone in your household from any type of health care provider, dentist, or pharmacy?



Interpretation: Most Hispanic or Latino residents surveyed (88.8%) did not have a problem accessing health care in the past year.

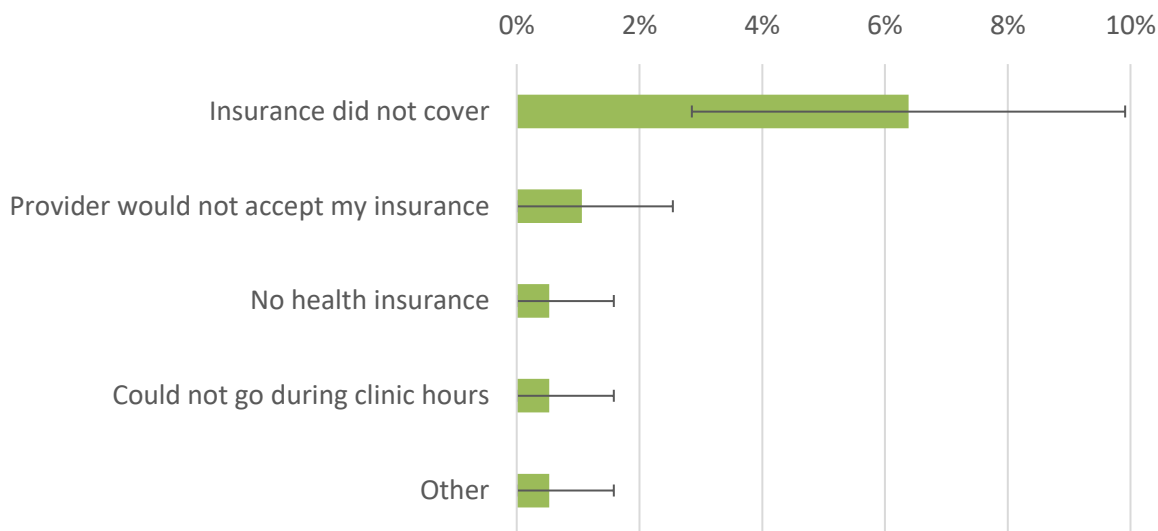
5. Since you said “yes”, what type of provider did you or someone in your household have trouble getting health care from?



Interpretation: Note that this question was only answered by people who indicated they had a problem getting the health care they needed for themselves or someone in their family during the past 12

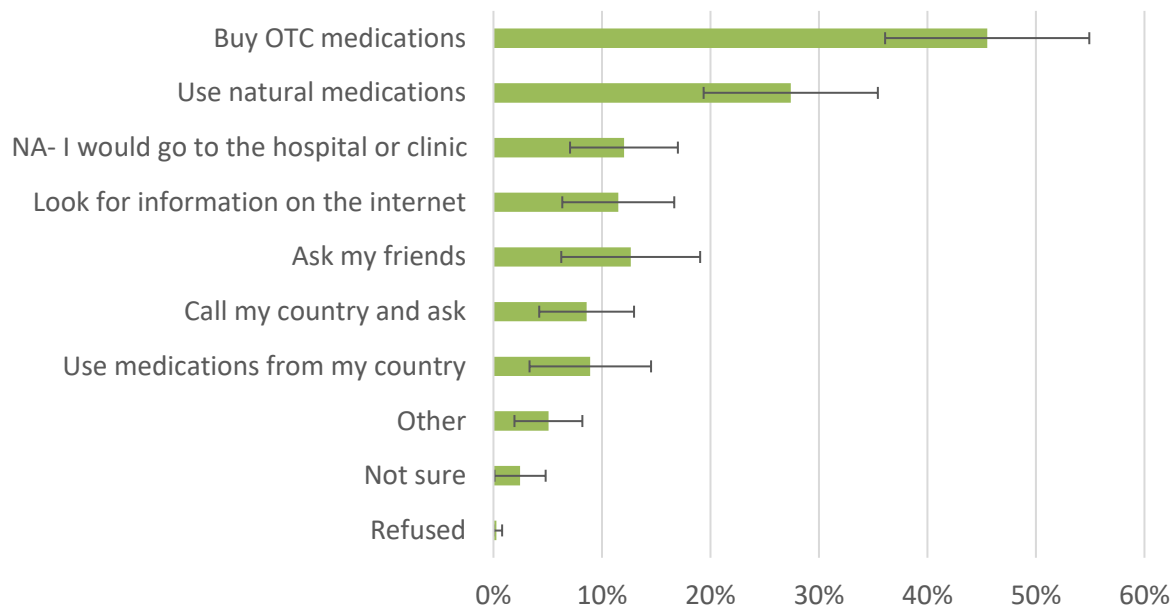
months (n=18). Primary care providers and dentist were the top two care providers people had trouble accessing during the past year in Durham County.

6. What was the problem that prevented you or someone in your household from getting the necessary health care?



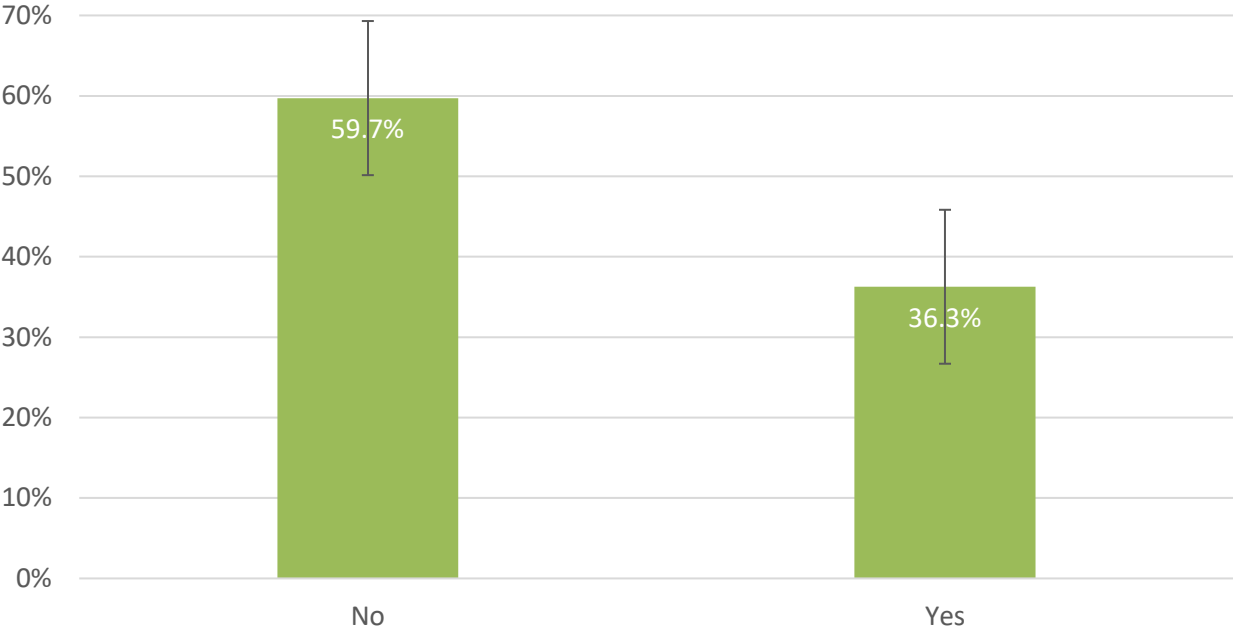
Interpretation: Note that this question was only answered by people who indicated that they had a problem getting the health care they needed for themselves or someone in their family during the last 12 months (n=18). Insurance did not cover and provider would not accept my insurance were the top two reasons people had trouble accessing healthcare in the past year in Durham County.

7. When you are sick and you don't go to the clinic or hospital, what do you do to feel better?



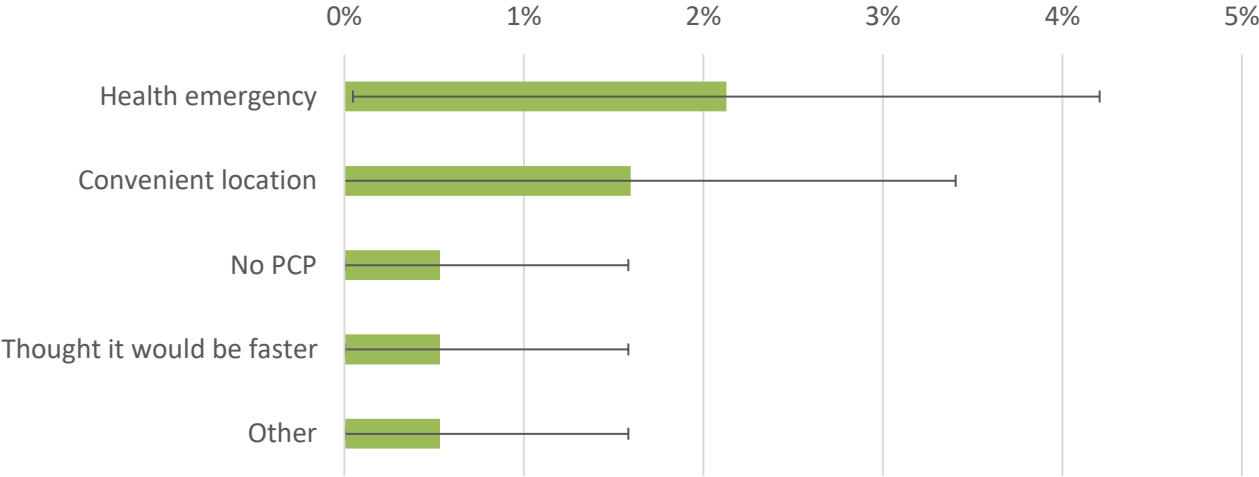
Interpretation: Hispanic or Latino residents who don't go to the clinic or hospital bought over the counter medications (45.5%) and used natural medications (27.4%) as the top two ways to feel better.

8. In the past 12 months, have you or someone in your family gone to the emergency room?



Interpretation: Most Hispanic or Latino residents surveyed (59.7%) or someone in their family had not gone to the emergency room in the past 12 months.

9. Did you go the emergency room for any of the following reasons? Please tell me if any of these are the reasons.

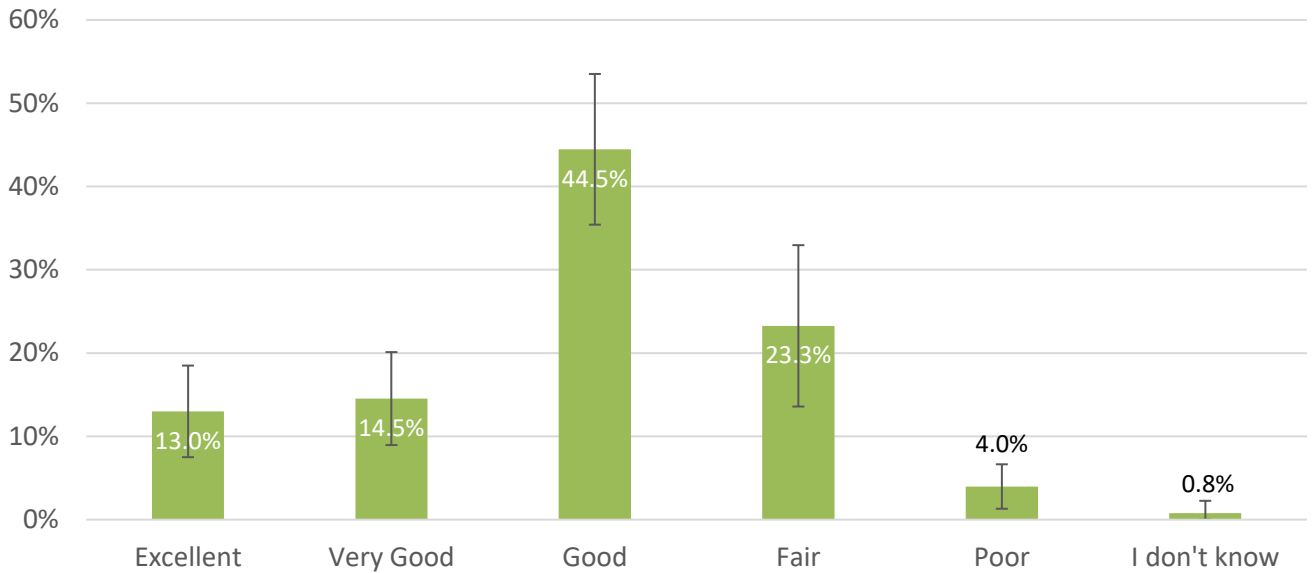


Interpretation: Note that this question was only answered by people who themselves or someone in their family had gone to the emergency room during the last 12 months (n=66). Health emergency and convenient location were the top two reasons for going to the emergency room.

*Common responses grouped together from the "other" or free text category

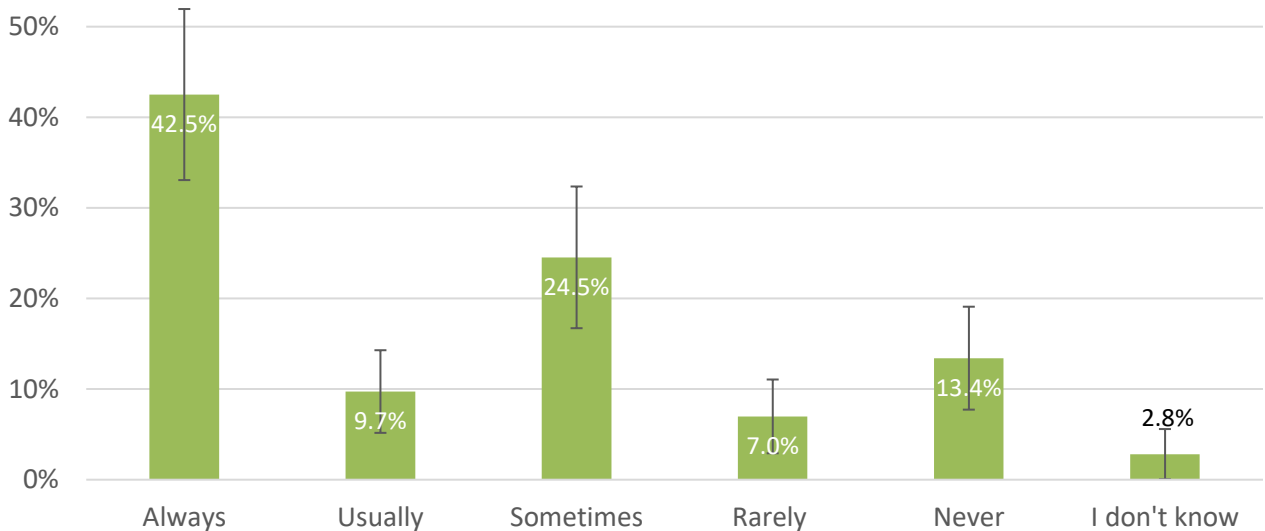
Personal Health

10. Would you say, in general, your health is excellent, very good, good, fair or poor?



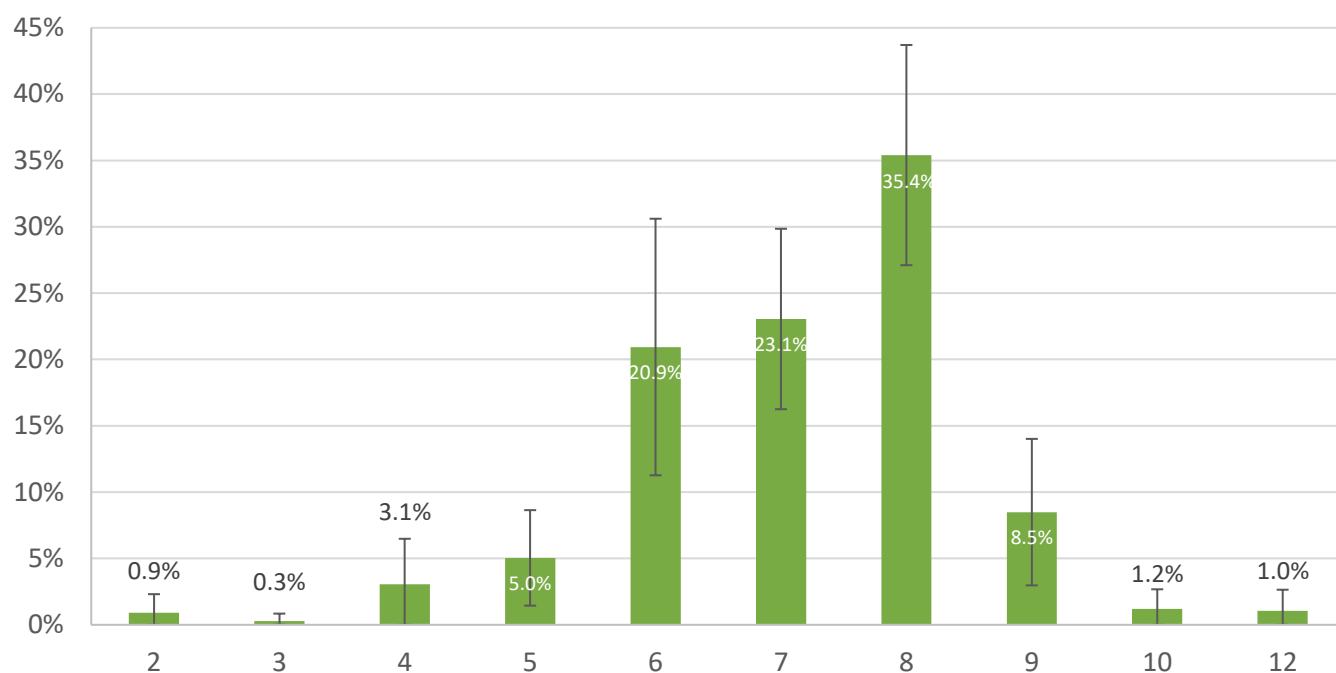
Interpretation: Most Hispanic or Latino residents surveyed (72%) reported having, good, very good or excellent health.

11. How often do you get the social and emotional support you need? Would you say always, usually, sometimes, rarely, or never?



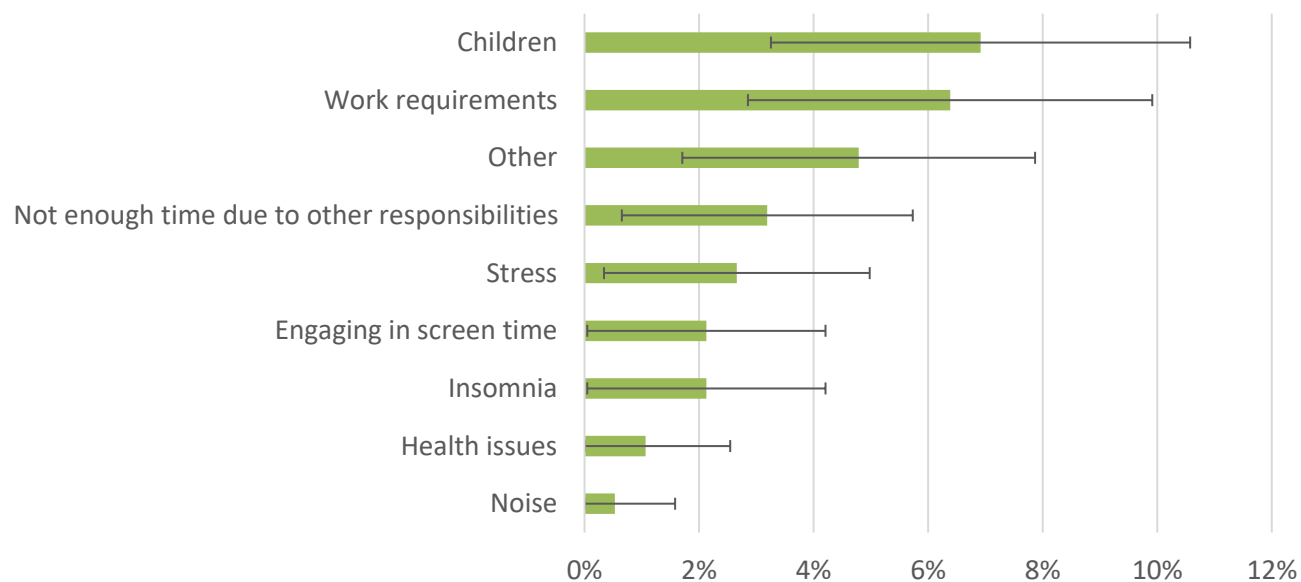
Interpretation: Over half of residents surveyed (52.2%) reported getting the social and emotional support they needed always or usually.

12. On average, how many hours of sleep do you get in a 24-hour period?



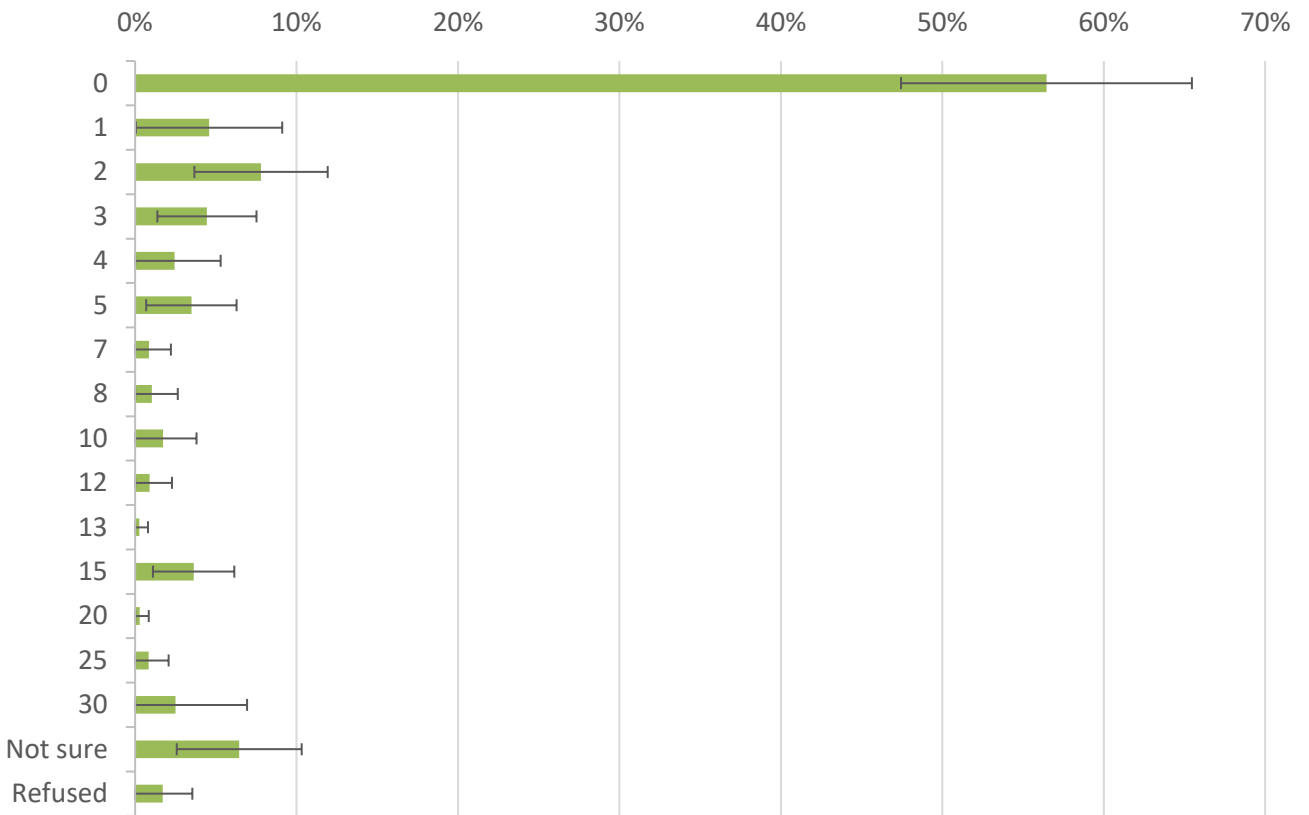
Interpretation: Most residents surveyed, 69.2% reported getting at least 7 hours of sleep during a 24-hour period.

13. What keeps you from getting at least 7 hours of sleep a night?



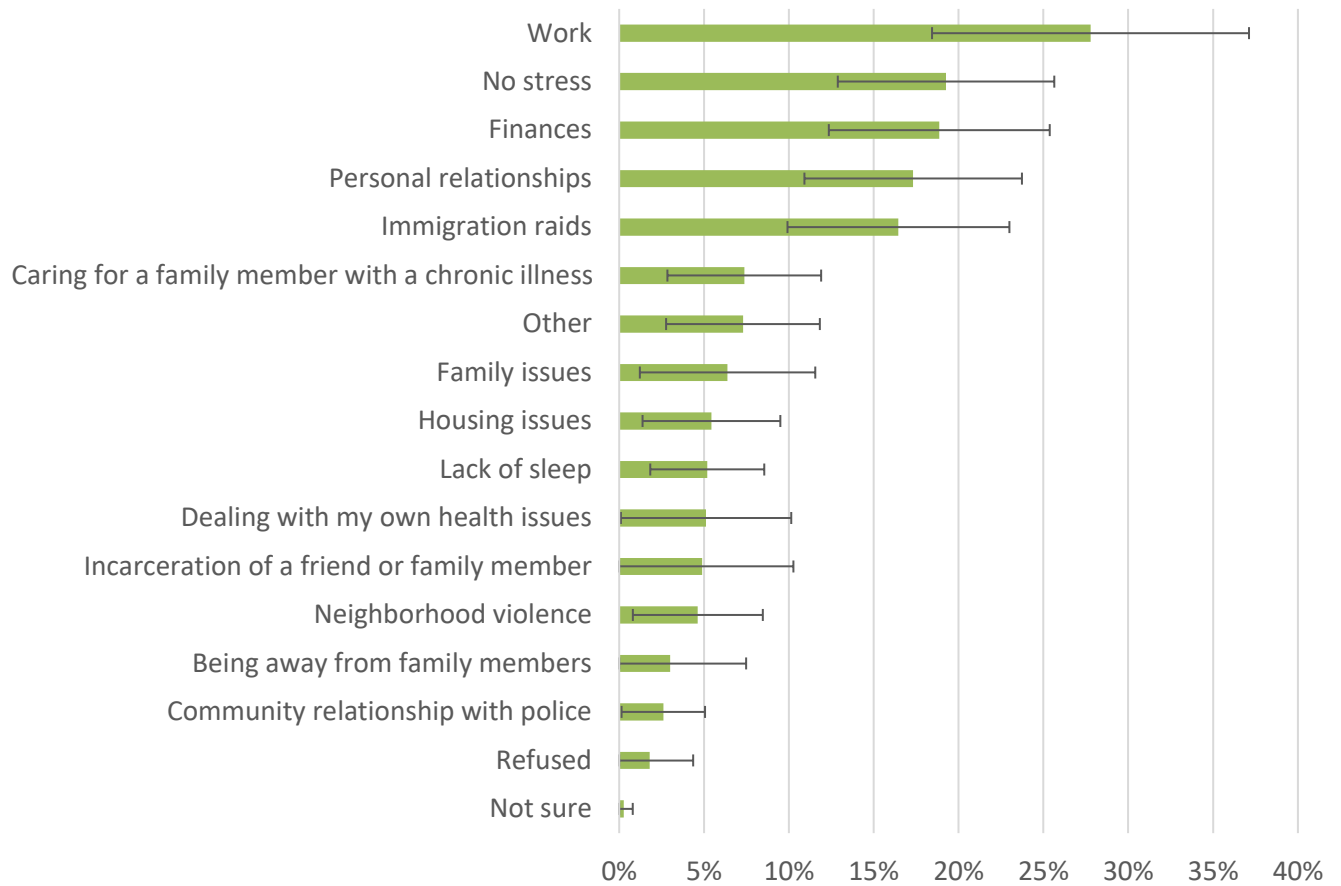
Interpretation: Note, this question was only answered by people who indicated that they got less than 7 hours of sleep in a 24-hour period on average (n=49). Children and work requirements were the top two reasons cited for not getting 7 hours or more of sleep during a 24-hour period.

14. Now thinking about your mental health, which includes stress, depression and problems with emotions, for how many days during the past 30 days was your mental health not good?



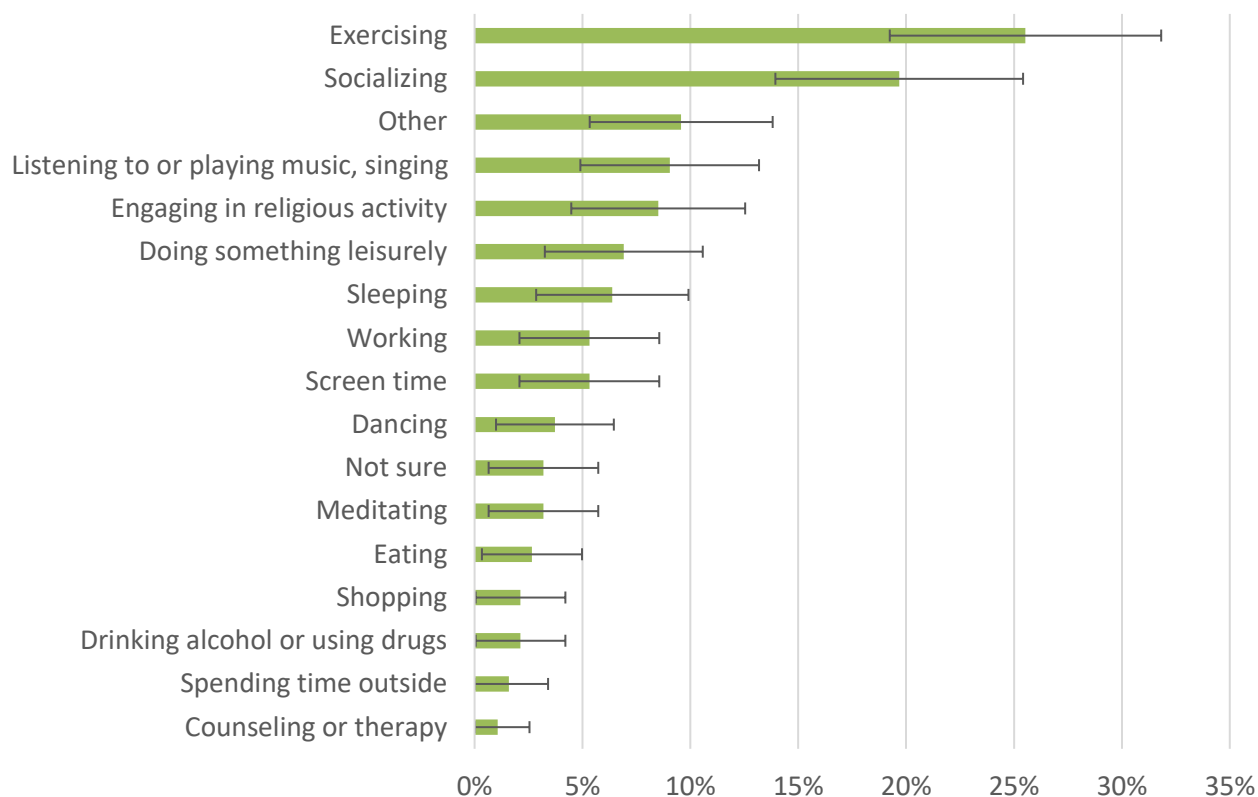
Interpretation: Most Hispanic or Latino residents surveyed reported that they did not experience poor mental health for any days (56.4%) or only for 1-2 days (12.3%) during the past 30 days. However, 11.1% of respondents reported that they experienced problems with their mental health 8 or more days out of the last 30.

15. What are the primary causes of your stress?



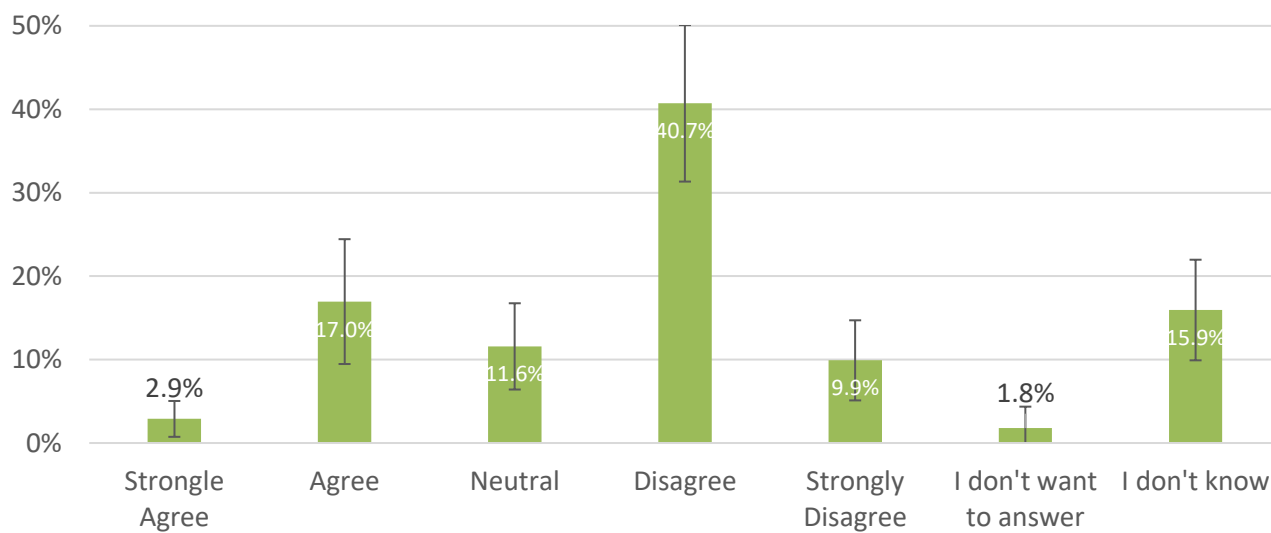
Interpretation: Work, finances, personal relationships, immigration raids and caring for a family member with a chronic illness were the top contributors to stress among participants.

16. How do you deal with stress?



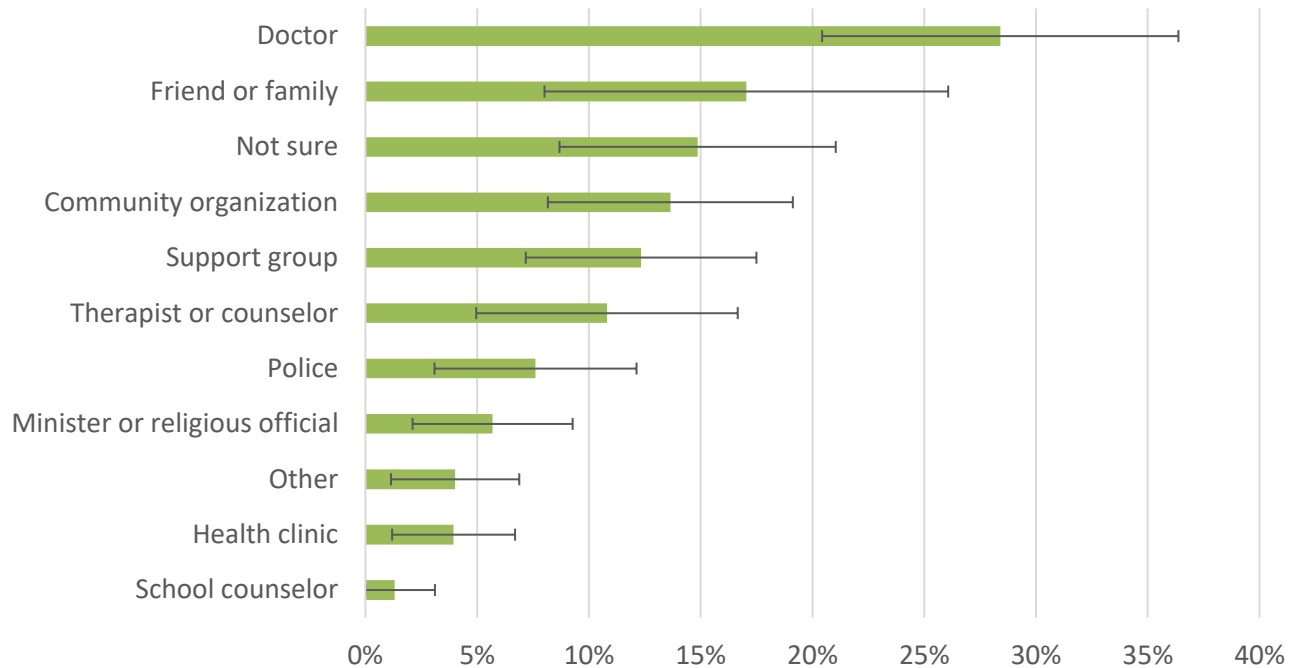
Interpretation: Note that this question was only answered by people who experience some sort of stress (n=148). Exercising, socializing, listening to or playing music and singing were the most common responses participants gave when explaining how they deal with stress.

17. To what extent do you agree or disagree with the statement that people in your community would think less of a person who has a mental health problem?



Interpretation: Among respondents, 19.9% said they agreed or strongly agreed that their community would think less of a person with a mental health problem 11.6% were neutral and 50.6% said they disagreed or strongly disagreed that their community would think less of a person with a mental health issue.

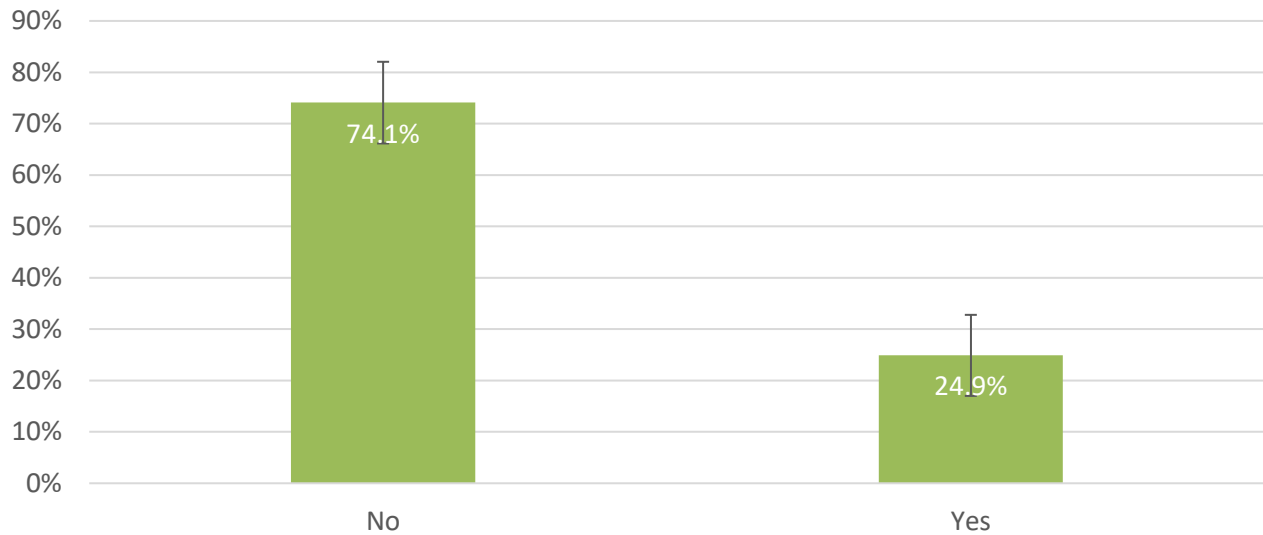
18. If you or a friend or family member needed counseling for a mental health or a drug or alcohol use problem, who would you tell them to call or talk to?



Interpretation: The most common referral sources for a mental health, drug or alcohol use problem cited among survey participants was a doctor, followed by friend or family, community organization, support group and then a therapist or counselor.

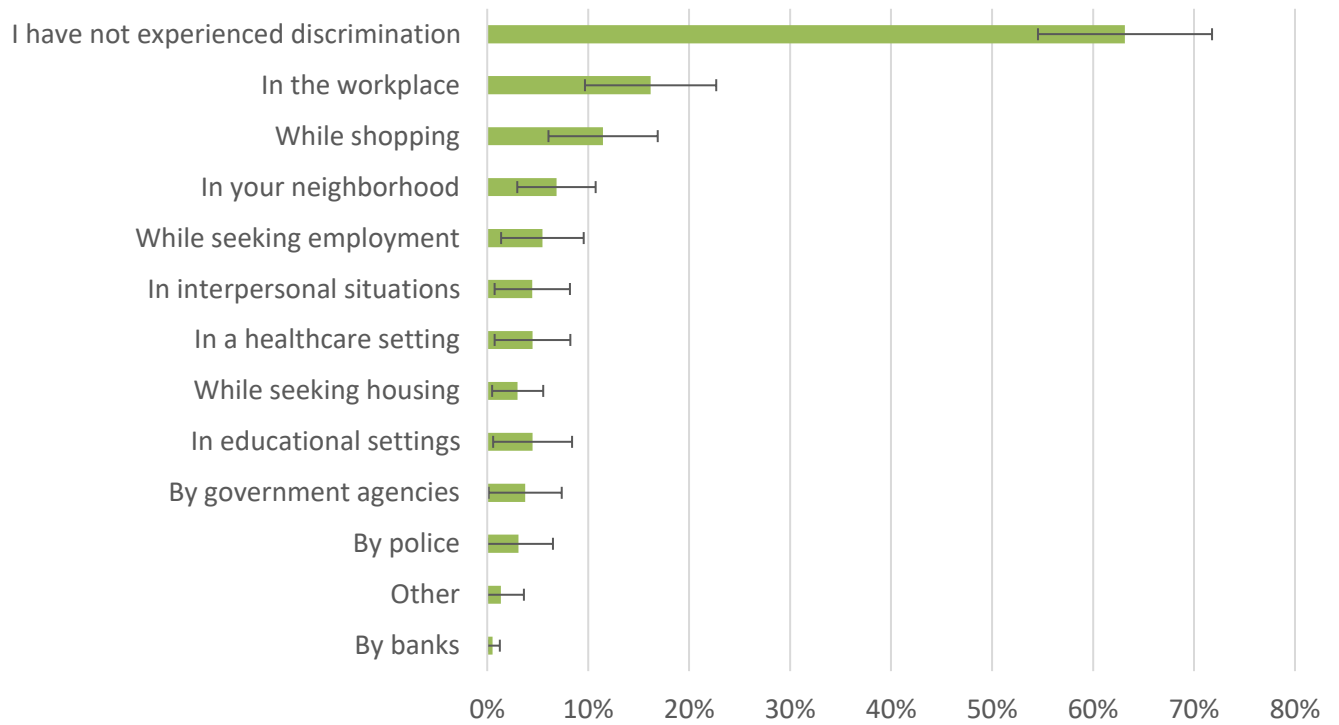
Discrimination

19. During the past 12 months, have you felt upset as a result of how you were treated based on your race or ethnic background, for example angry, sad, or frustrated? (Choose one.)



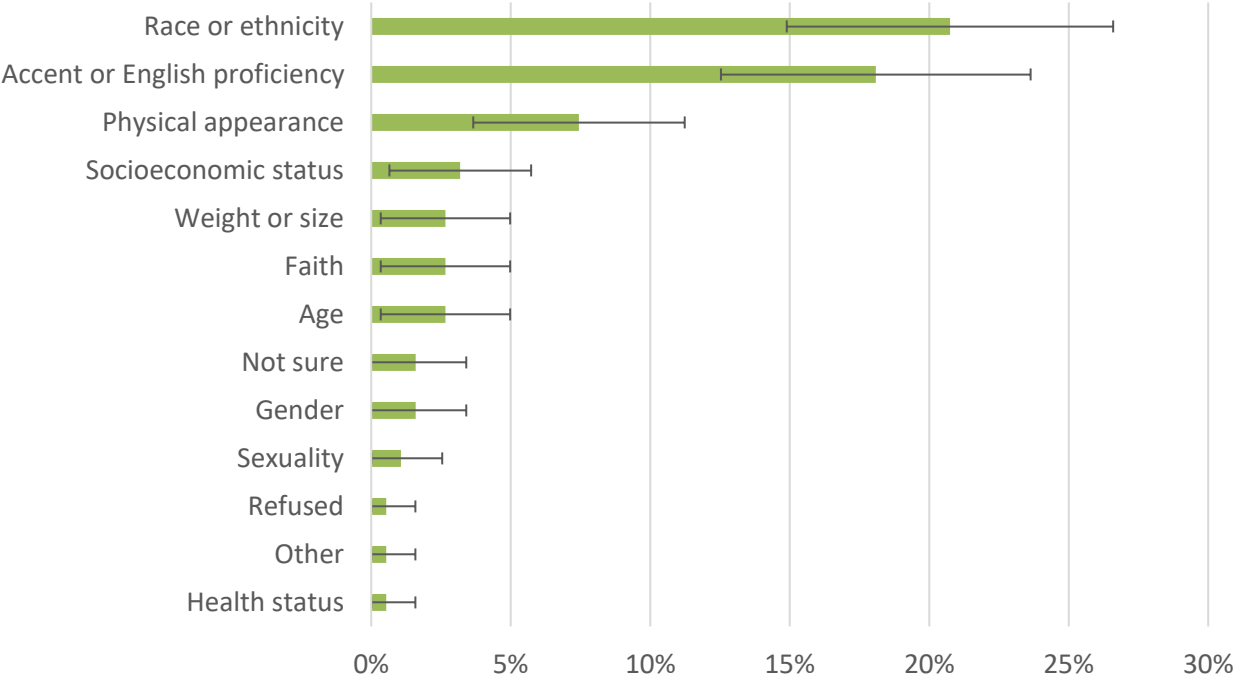
Interpretation: Overall most Hispanic or Latino residents surveyed (74.1%) reported that they had not been upset in the past 12 months based on how they were treated because of their race or ethnic background.

20. In the past 12 months, have you experienced discrimination in the following situations?



Interpretation: Nearly two-thirds of respondents (63.1%) said they had not experienced discrimination in the past 12 months. Of those who did experience discrimination, the most commonly reported places where discrimination occurred were in the workplace, while shopping and in their neighborhood.

21. Discrimination can happen because of many reasons. I'm going to read a list of possible sources of discrimination. Please tell me which of these reasons you think may have contributed to the discrimination you experienced in the last 12 months.

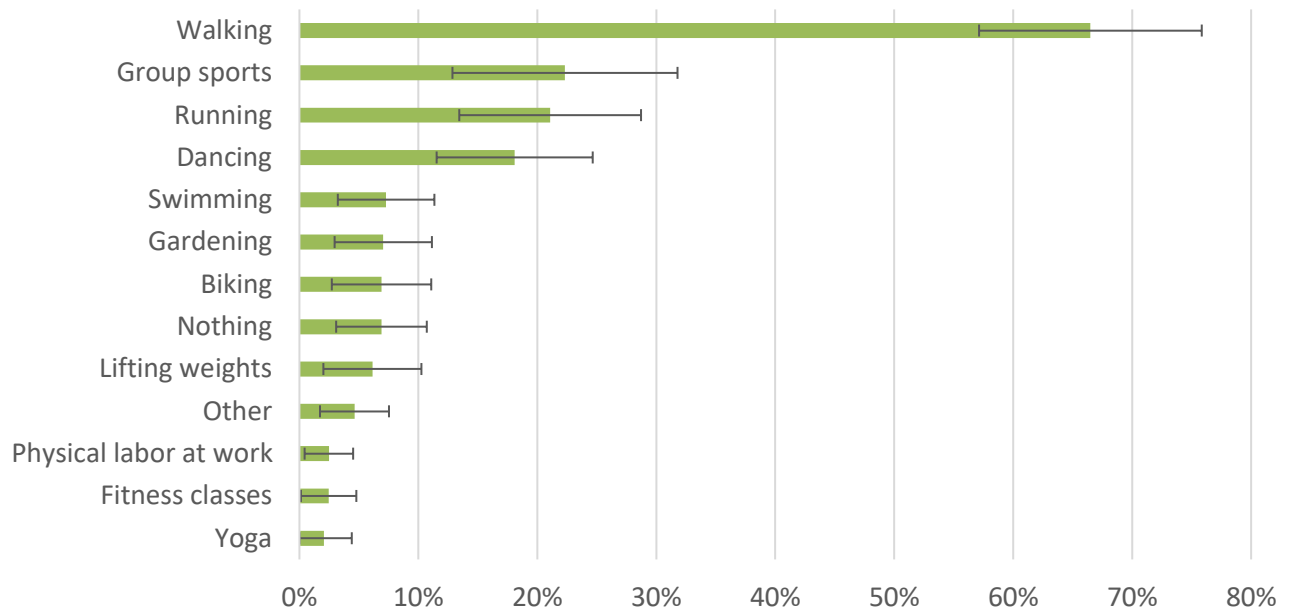


Interpretation: Note that this question was only answered by people who indicated that they had experienced discrimination during the past 12 months (n=74). Discrimination based on race or ethnicity, accent or English proficiency, physical appearance, socioeconomic status and weight or size were the most commonly noted reasons for being discriminated against.

*Common responses grouped together from the "other" or free text category

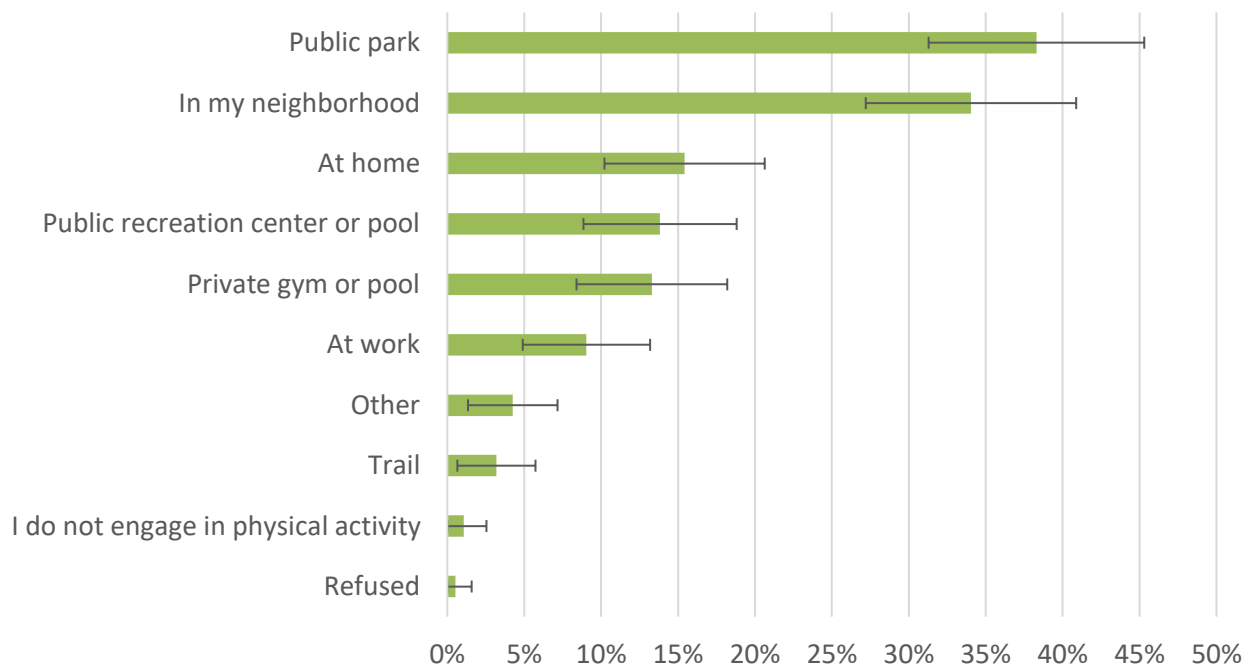
Physical Activity

22. What types of physical activity do you usually do?



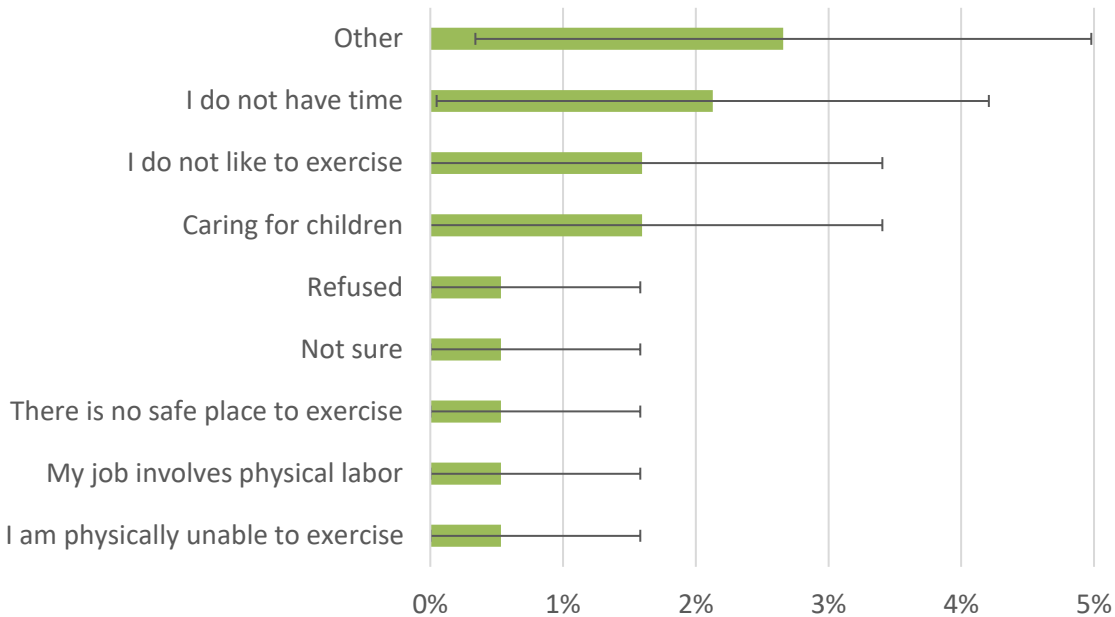
Interpretation: Walking, group sports and running were the most common types of physical activity reported by Durham residents.

23. Where do you usually exercise or go to do physical activity?



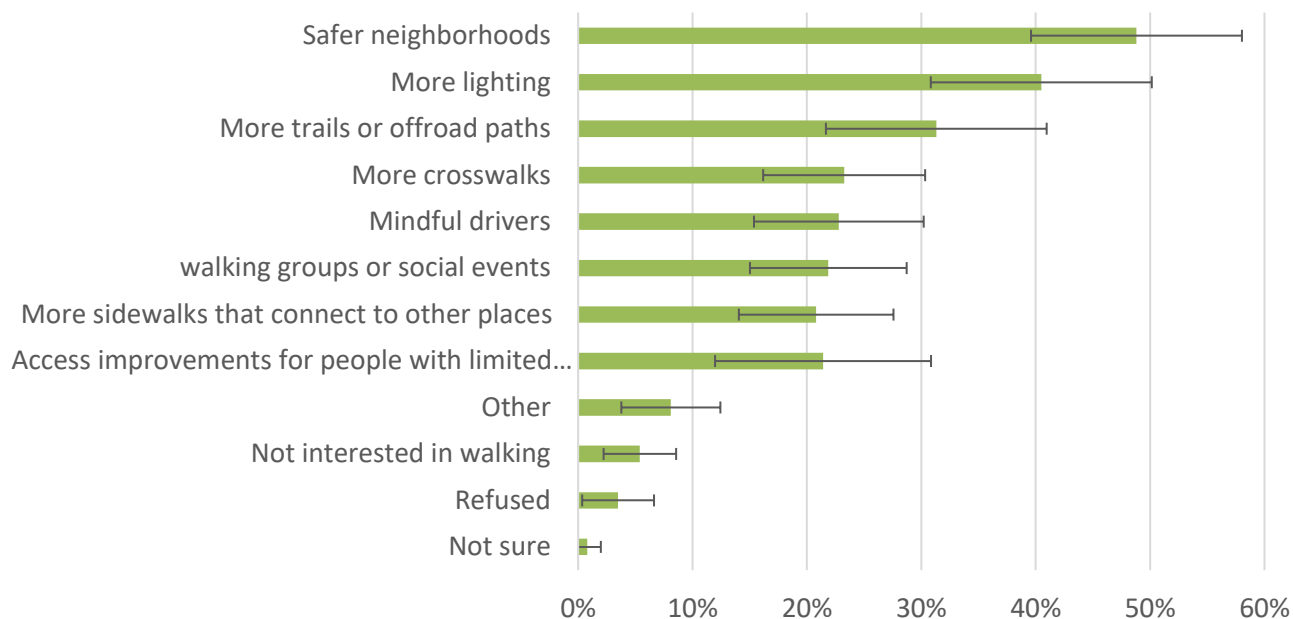
Interpretation: Note that this question was only answered by people who indicated that they engage in physical activity (n=173). Most Hispanic or Latino residents surveyed reported exercising in a public park (38.2%), in their neighborhood (34%) or at home (15.4%)

24. Since you responded that you don't exercise, what are the reasons you don't exercise during a normal week? You can tell me as many reasons as you'd like to.



Interpretation: Please note that only people who responded they do not engage in physical activity answered this question (n=15). Not having time was the most common reason people were not physically active, followed by not liking exercise, caring for children and not having a safe place to exercise.

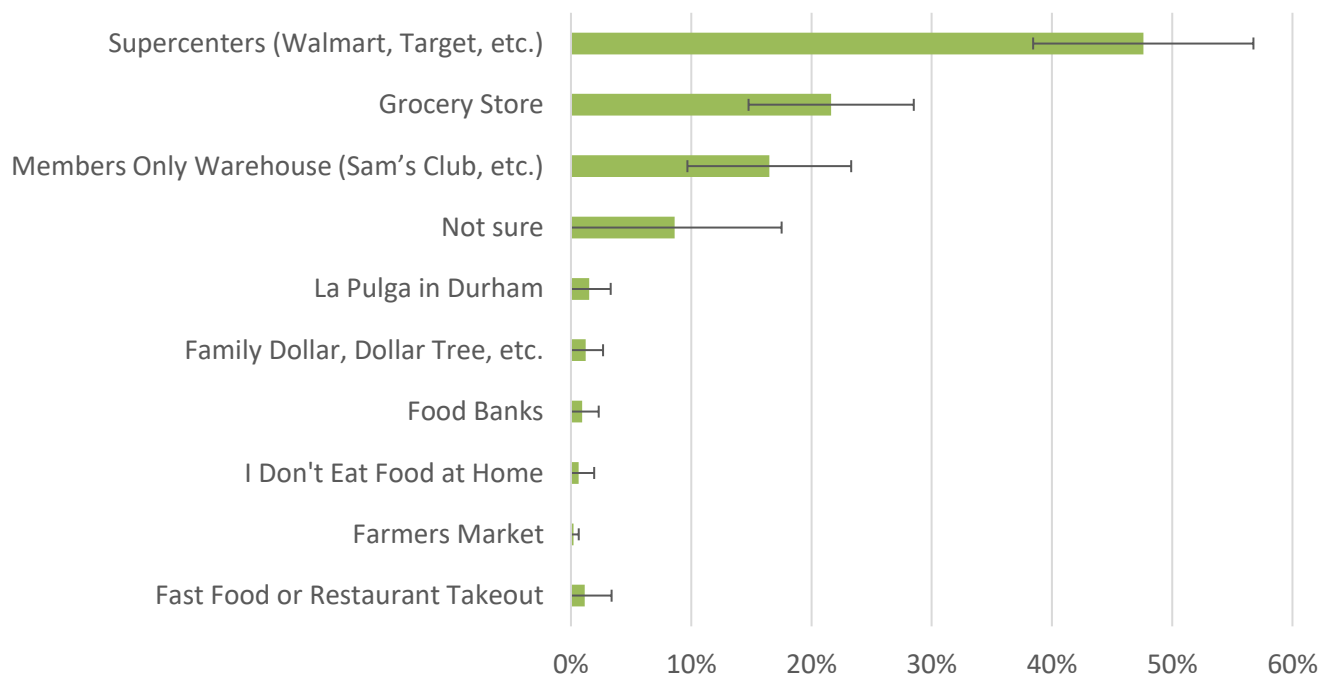
25. Whether you currently walk or not, would any of the following make you want to walk more? This includes for fun, for exercise, to get to a destination, etc.



Interpretation: The most common improvements that would motivate residents to walk more are safer neighborhoods, more lighting, more trails or off-road paths and more crosswalks.

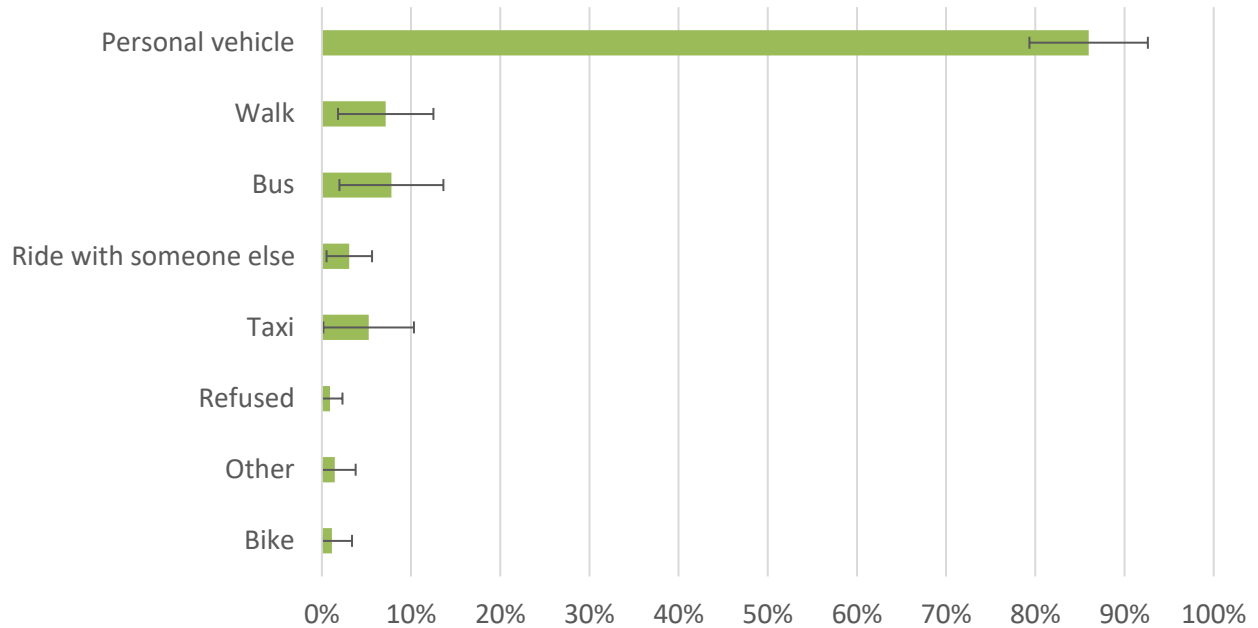
Diet and Food Access

26. Where do you get most of the food you eat at home?



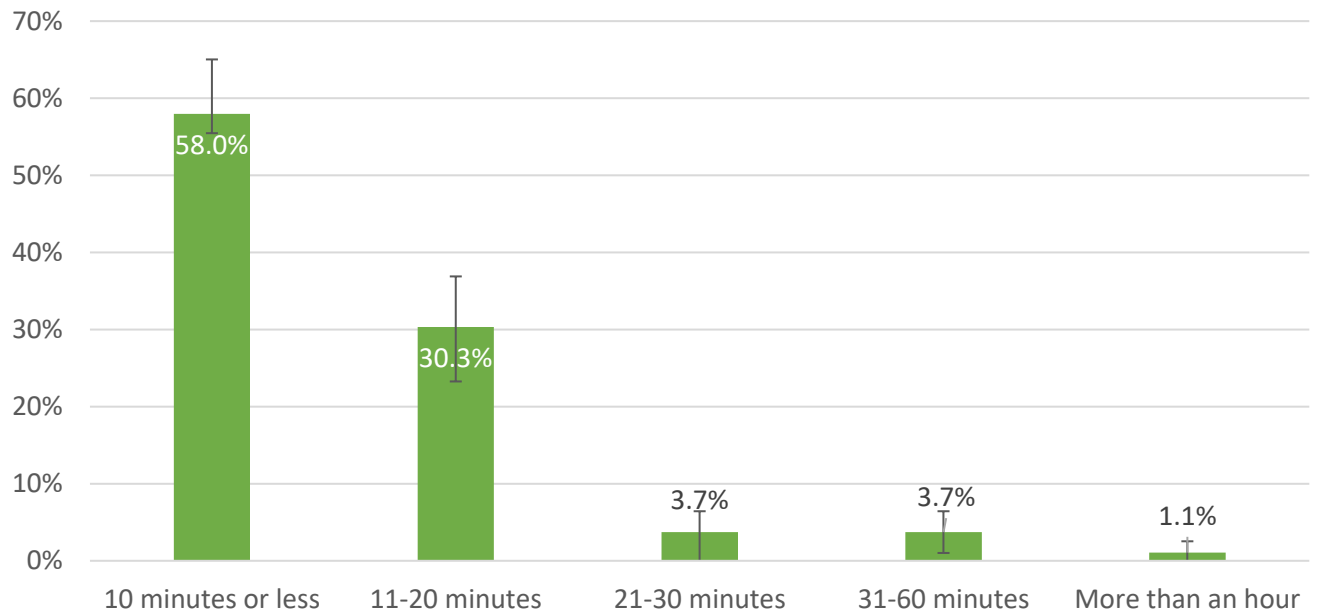
Interpretation: Nearly half of Latino and Hispanic residents (47.5%) surveyed reported getting most of the food they eat at home from a supercenter such as Walmart or Target. About 1% bought most of their food from Family Dollar or Dollar Tree.

27. How do you usually get there?



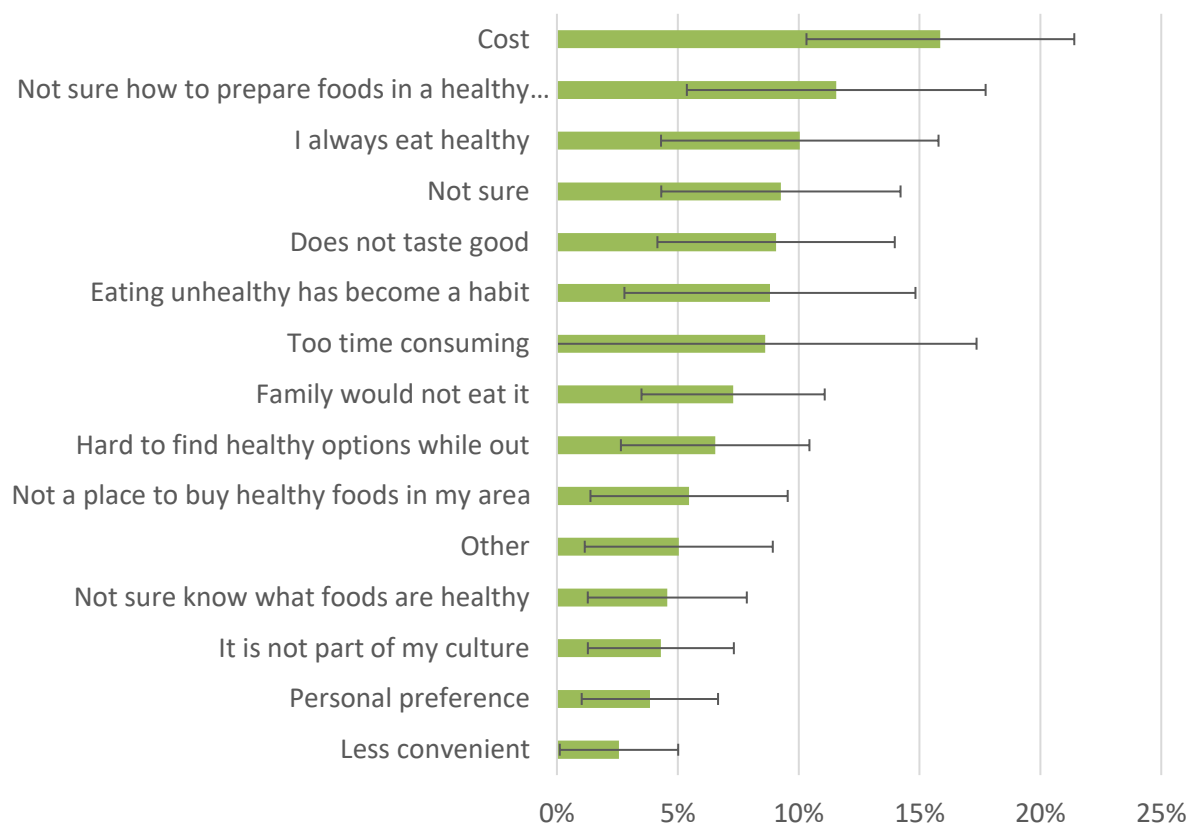
Interpretation: Most people (85.9%) drove a personal vehicle to buy the food they ate at home. However, 7.7% indicated they used the bus to buy food and 4.4% walked.

28. About how long does it take you to get there? Please only include the time it takes you to get there from your home, one way.



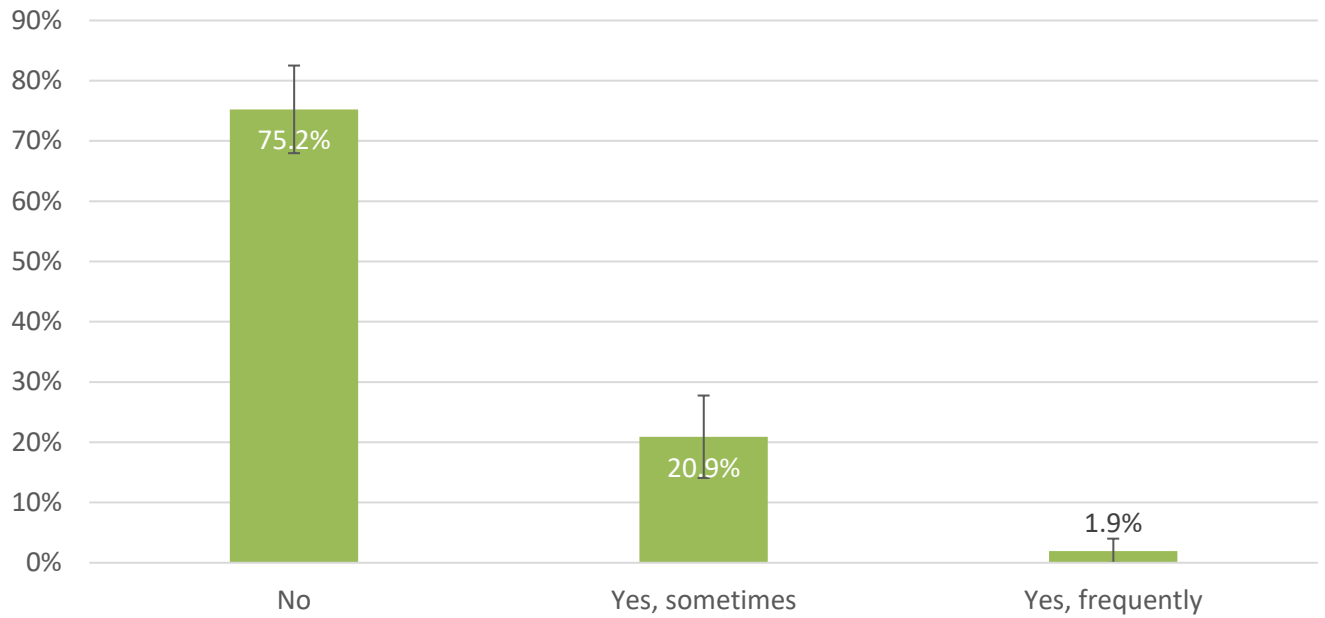
Interpretation: For most Hispanic or Latino residents (58%), it takes less than 10 minutes to get to the place where they buy most of their food they eat at home. About 8% of people spent more than 20 minutes getting to the place where they bought most of their food.

29. Most of us don't eat healthy all the time. When you aren't eating a healthy diet, what do you think makes it hard for you to eat healthy?



Interpretation: The number one reason cited among Hispanic or Latino residents for not eating healthy was the cost, followed by not sure how to prepare meals in a healthy way and healthy food does not taste good. Separately, 10% reported always eating healthy.

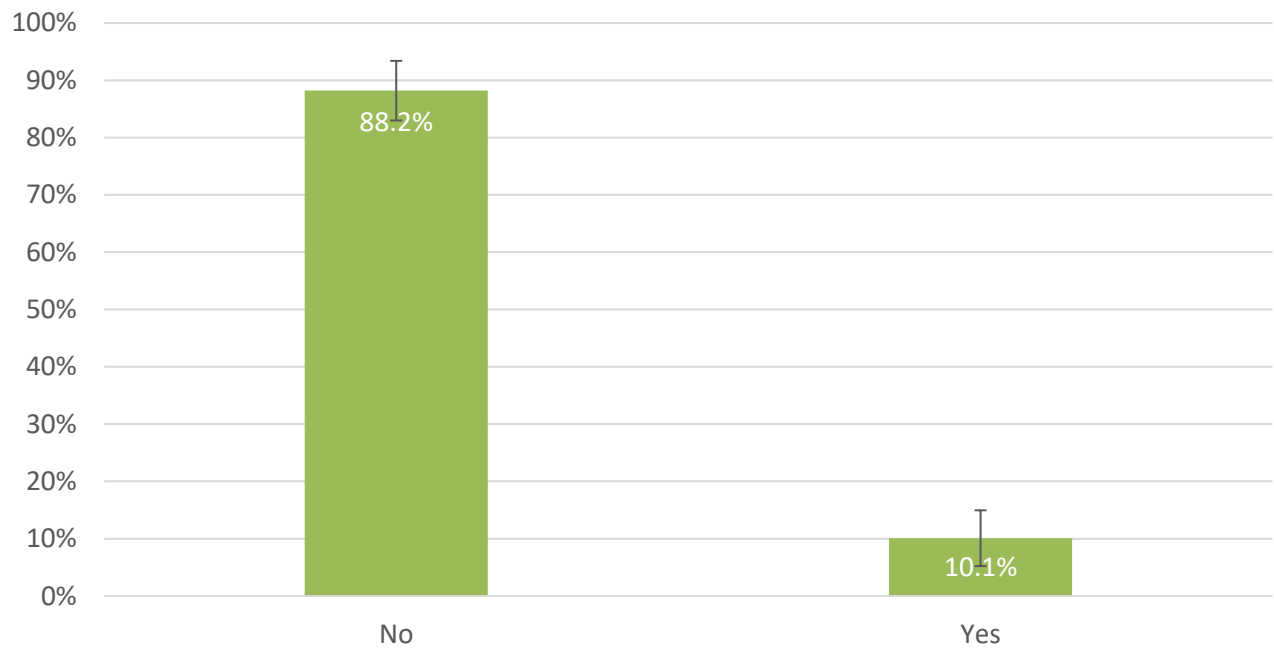
30. In the last 12 months, did you ever cut the size of your meals or skip meals because there wasn't enough money for food?



Interpretation: About one-fifth of Hispanic or Latino residents (22.8%) skipped meals or cut the size of their meal because they didn't have enough money to buy food.

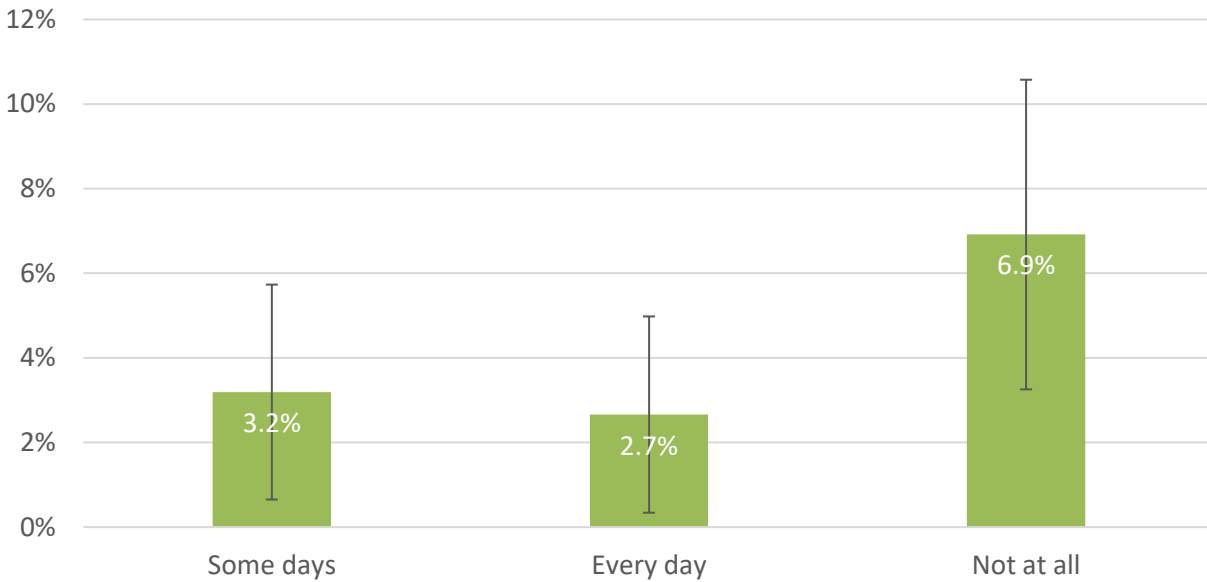
Tobacco Use

31. Have you smoked at least 100 cigarettes in your entire life?



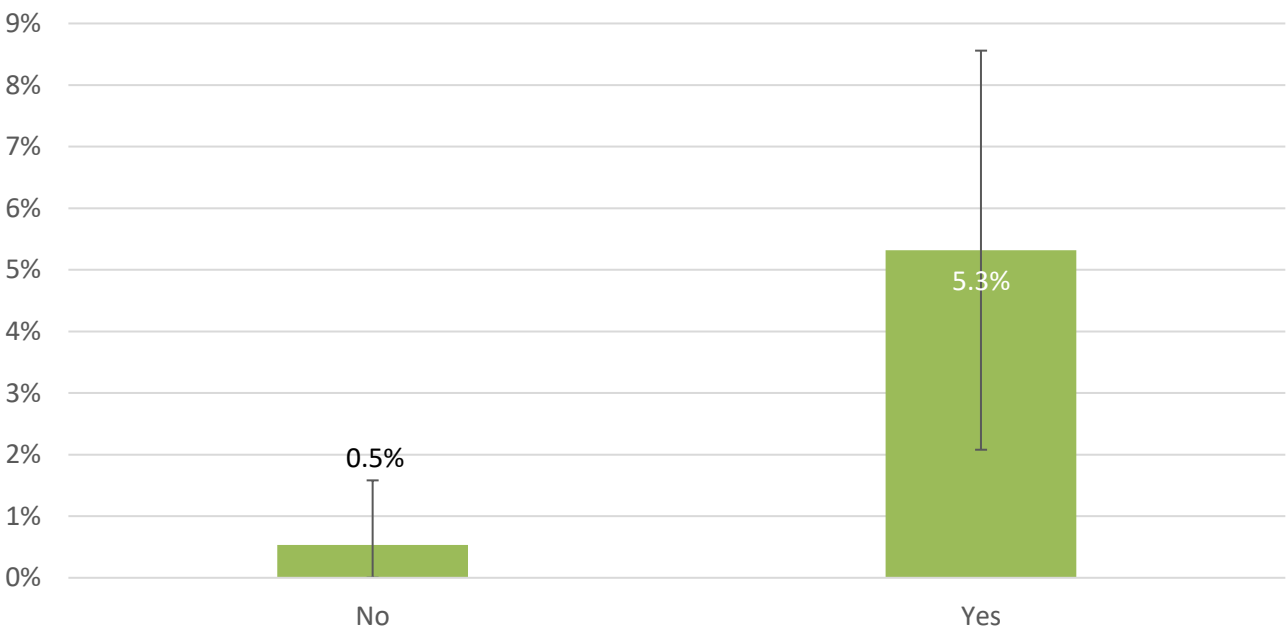
Interpretation: Most Hispanic or Latino residents (88.2%) have not smoked at least 100 cigarettes during their lifetime.

32. Do you NOW smoke cigarettes every day, some days, or not at all?



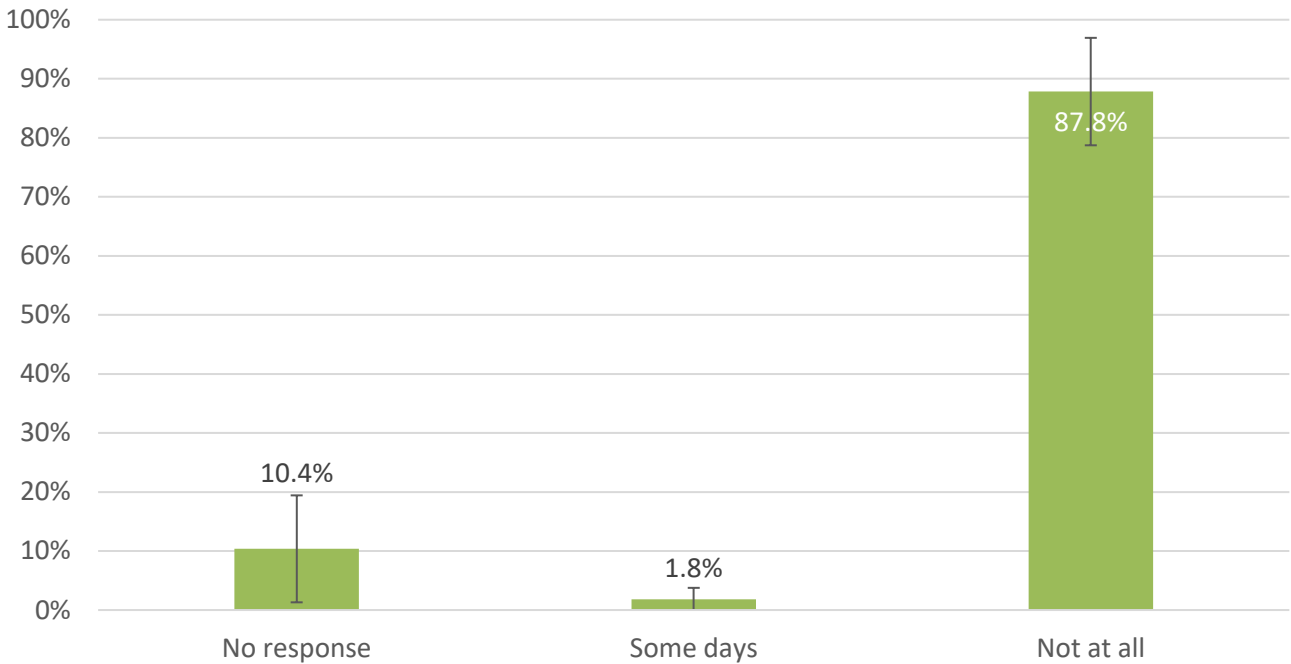
Interpretation: Please note that only people who responded that they had smoked at least 100 cigarettes during their lifetime answered this question (n=23). Most people who had smoked at least 100 cigarettes during their lifetime did not use e-cigarettes at all.

33. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?



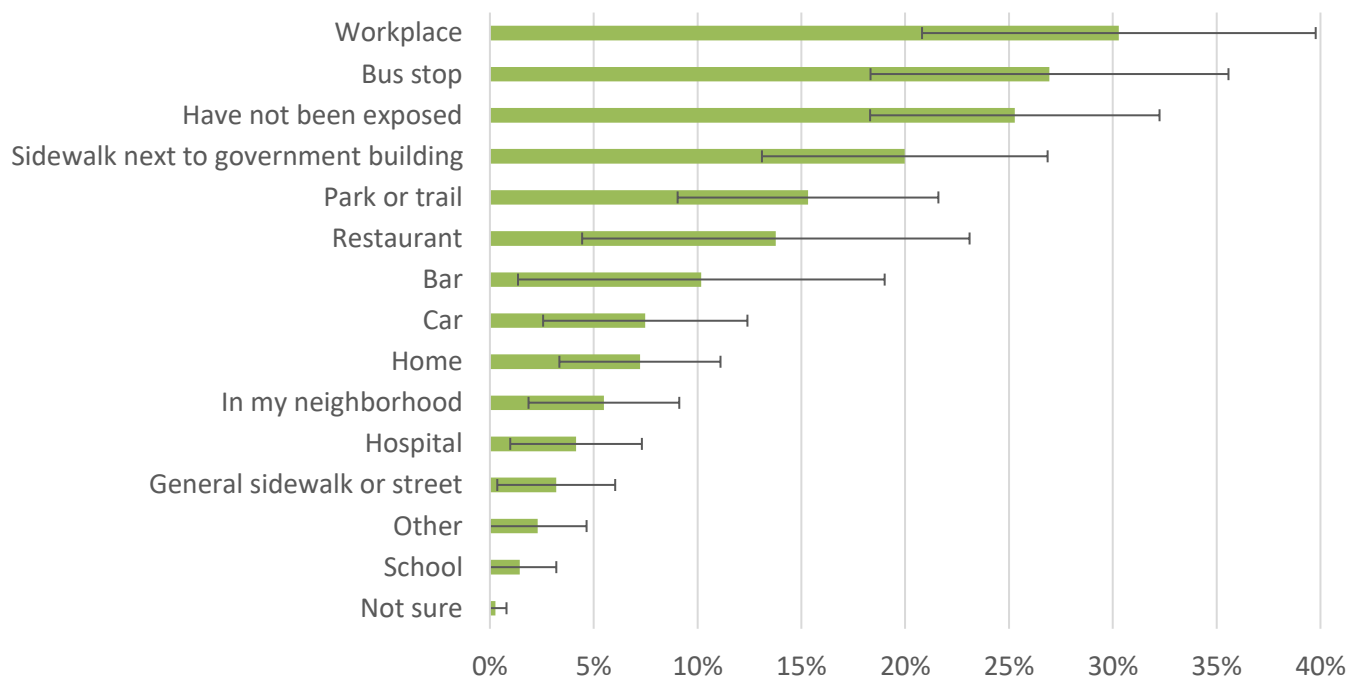
Interpretation: Please note that only people who responded that they had smoked at least 100 cigarettes during their lifetime and that they were currently smoking cigarettes every day or some days at the time of the survey answered this question (n=11) Among all respondents, 5.3% attempted to quit smoking for at least one day during the past year.

34. Do you NOW use e-cigarettes every day, some days, or not at all?



Interpretation: Most Hispanic or Latino residents (87.8%) surveyed do not use e-cigarettes at all. About 2% used e-cigarettes some days. No one reported using e-cigarettes daily.

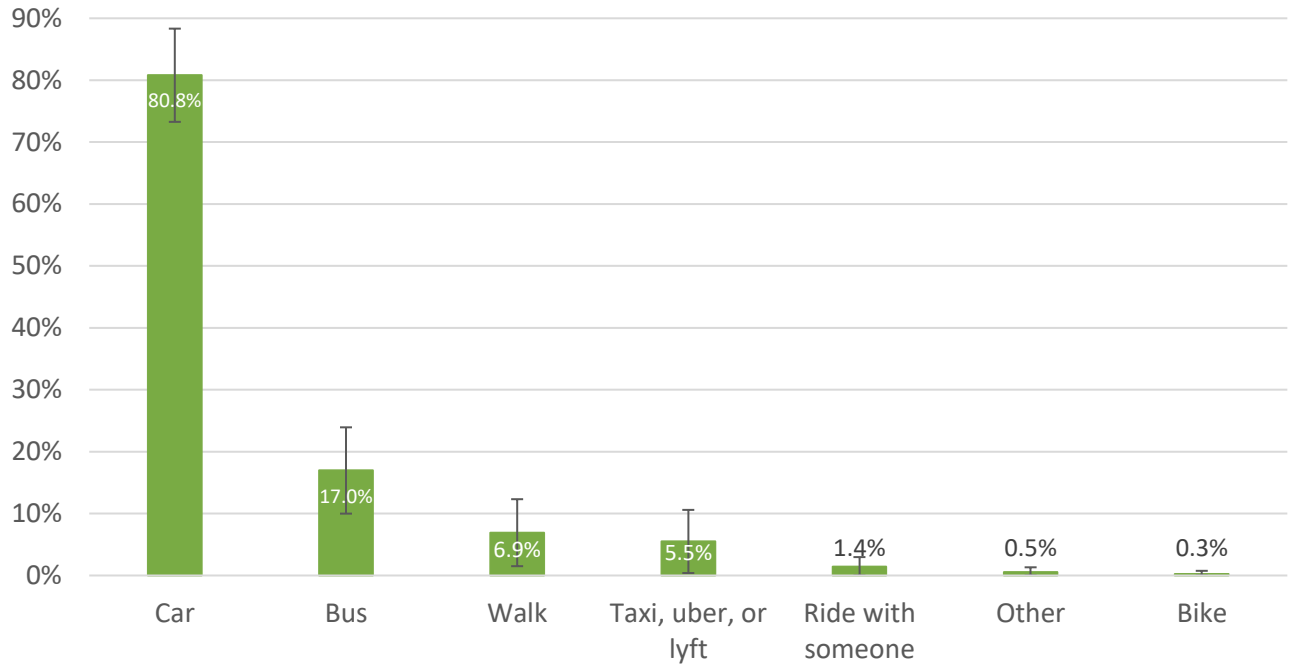
35. Have you been exposed to secondhand smoke in Durham County in the past year at any of these places:



Interpretation: Twenty-five percent of residents surveyed said they had not been exposed to secondhand smoke in Durham County in the past year. Of those who had been exposed to secondhand smoke, workplace, bus stop, sidewalk next to government building, park or trail and restaurants were the most commonly noted places where the exposure occurred.

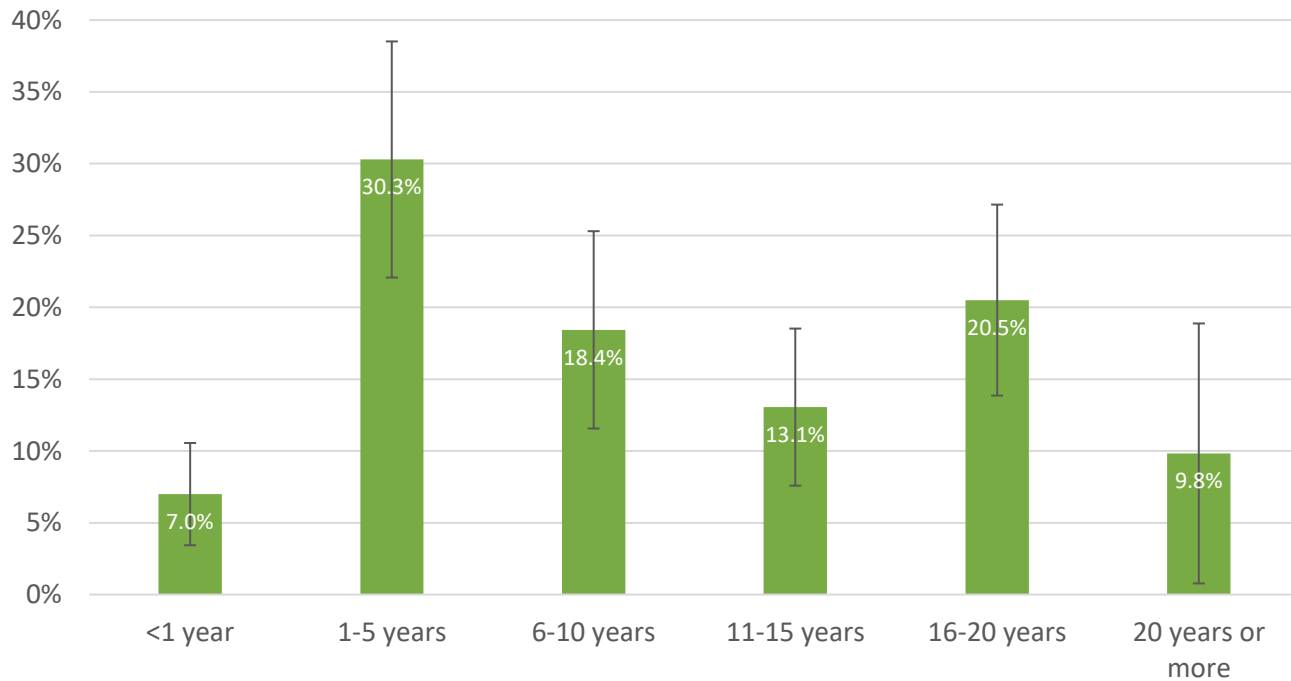
Household

36. In a typical week, what kinds of transportation do you use the most?



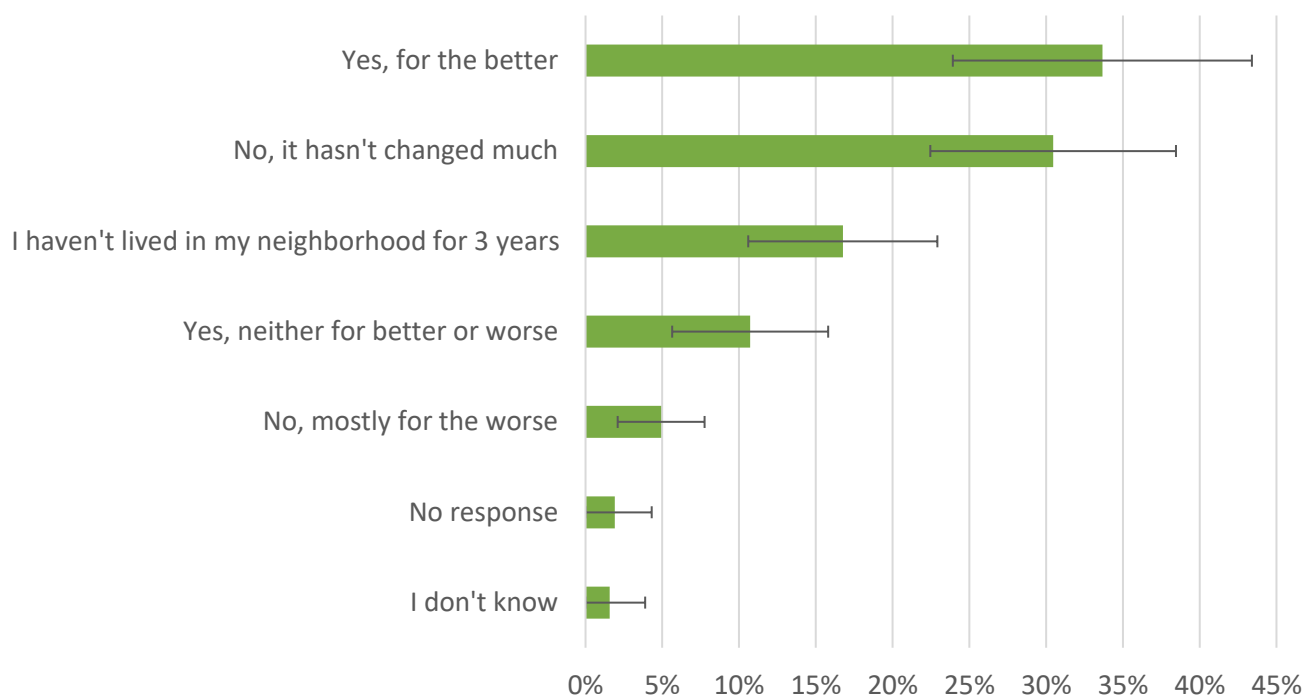
Interpretation: In a typical week, most Hispanic or Latino residents surveyed (80.8%) use a car to get around.

37. How long have you lived in Durham County?



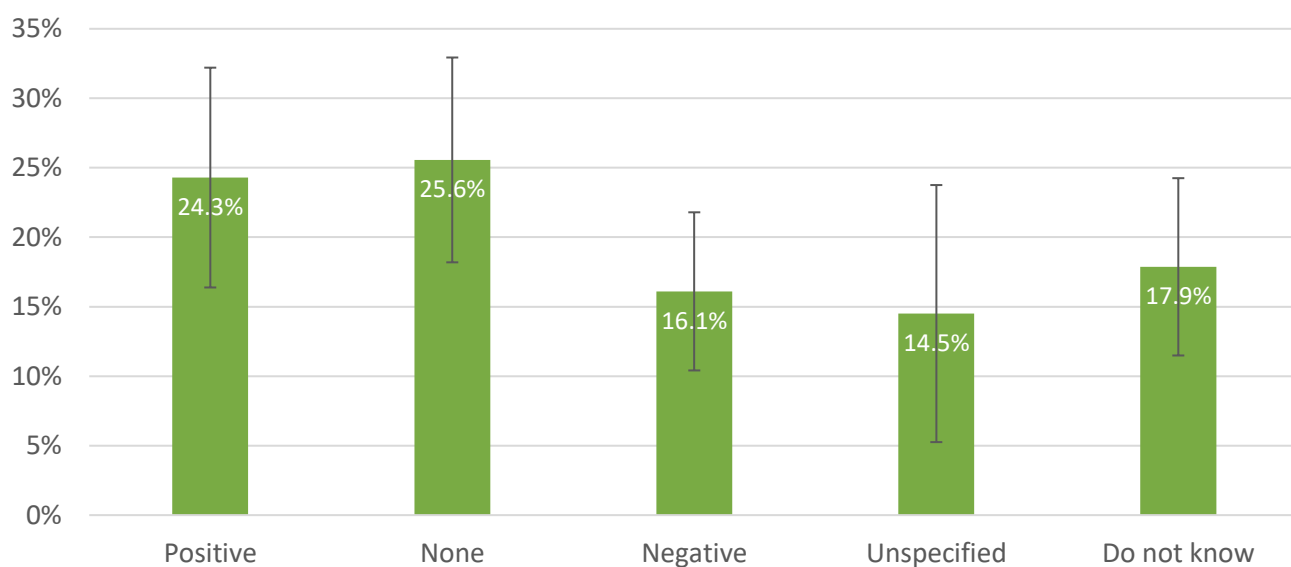
Interpretation: Most Hispanic or Latino residents surveyed (55.7%) had lived in Durham for 10 years or less.

38. Has your neighborhood changed over the past three years?



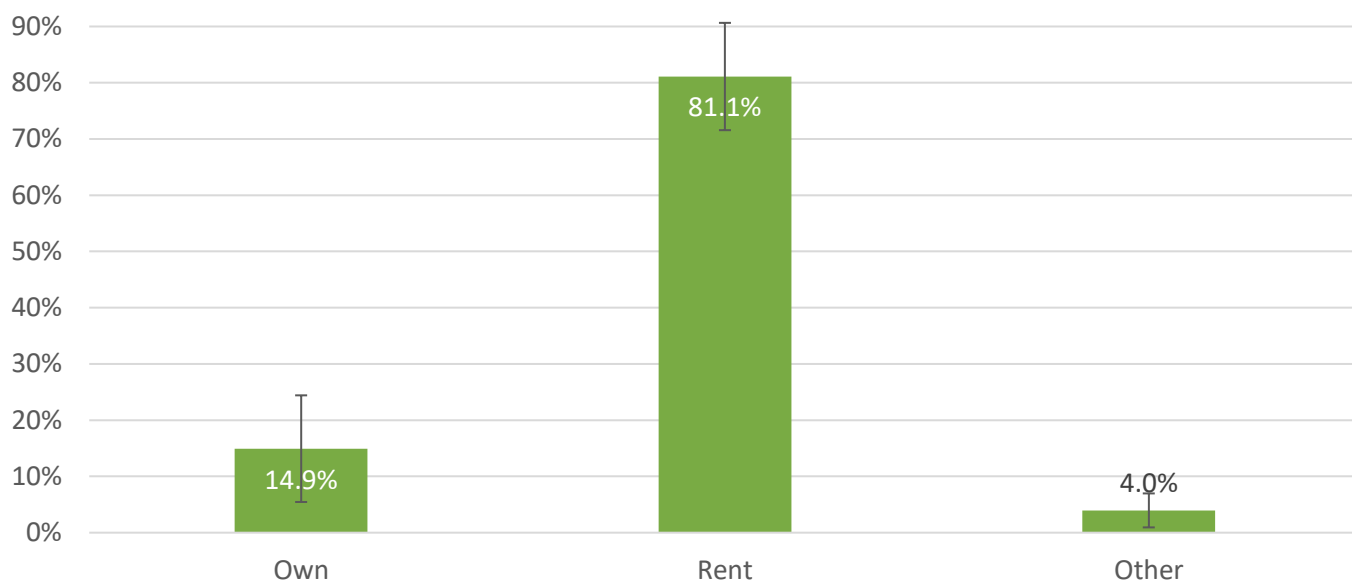
Interpretation: Few respondents (4.9%) felt their neighborhoods had changed for the worse in the past three years. About one-third of residents (33.6%) surveyed felt their neighborhoods had changed for the better in the past three years.

39. How do you think your current housing impacts your health?



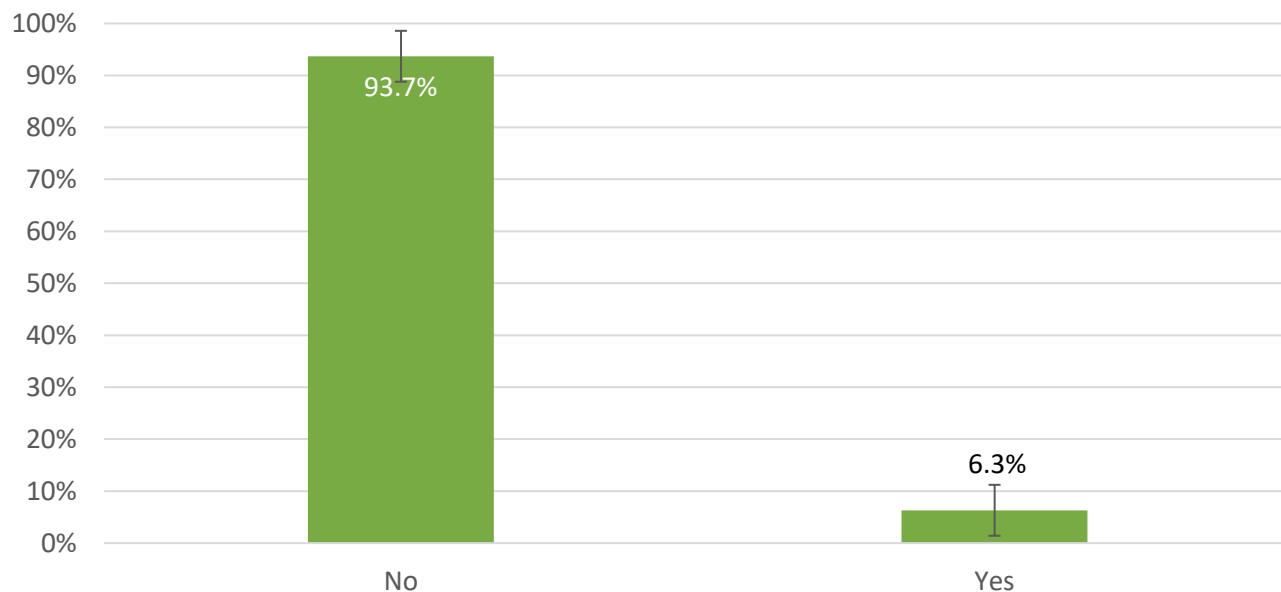
Interpretation: More than one-third of residents (40.4%) seemed to be aware of how housing affected their health, with 24.3% reporting that housing had a positive effect on their health and 16.1% responding that housing had a negative effect on their health. However, 25.6% percent of residents were unaware of any affect housing had on their health. Responses from 14.5% of residents were not specific enough to be categorized and as a result were put in the “unspecified” category.

40. Do you own or rent your home?



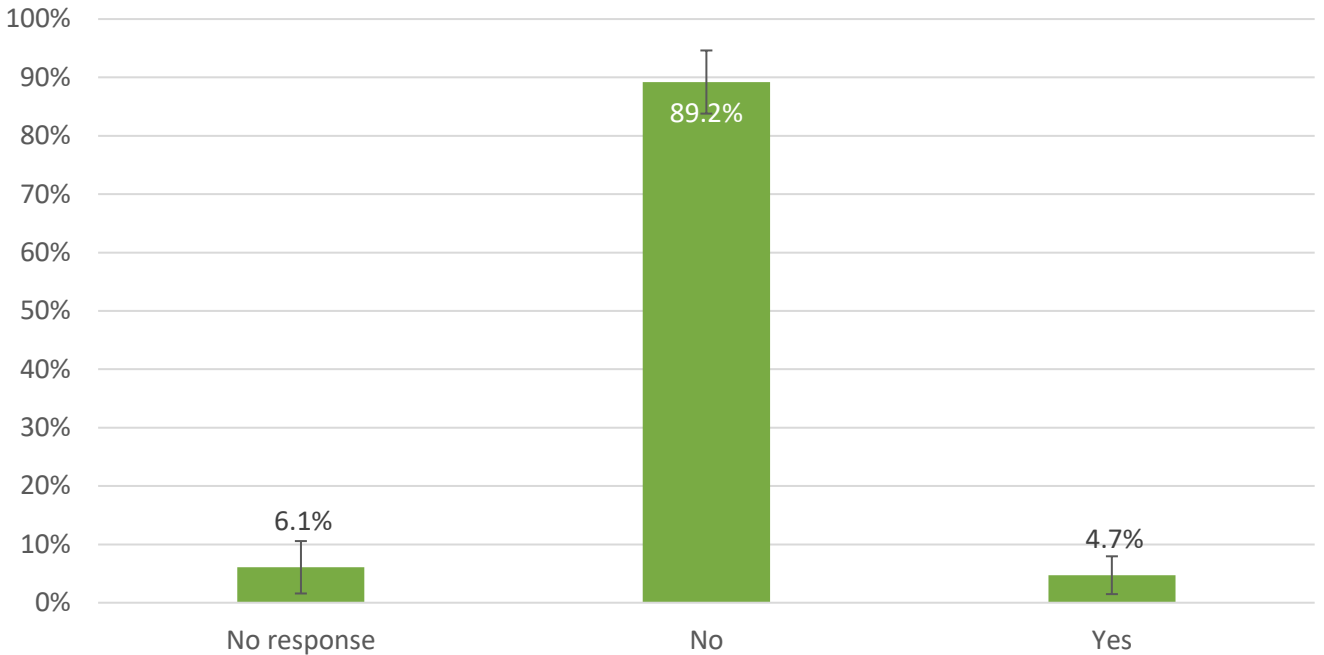
Interpretation: Most Hispanic or Latino residents surveyed (81.1%) did not own their own home.

41. Have you or someone in your household been evicted or displaced while living in Durham County in the past three years?



Interpretation: Among residents surveyed, 6.3% had been evicted or displaced while living in Durham the past three years or had a household member who had been.

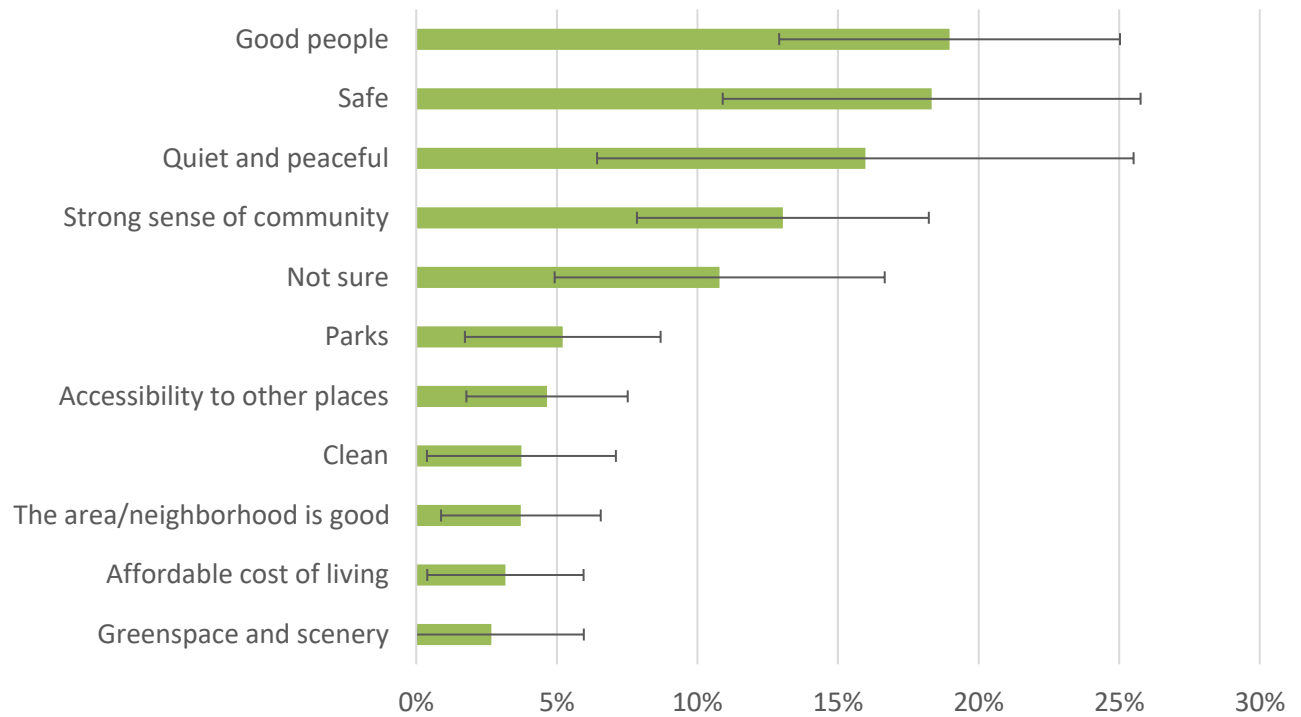
42. Is it difficult to communicate with someone in your house because they prefer speaking another language?



Interpretation: Most Hispanic or Latino residents surveyed (89.2%) reported that they did not have difficulty communicating with someone in their household who preferred to speak another language.

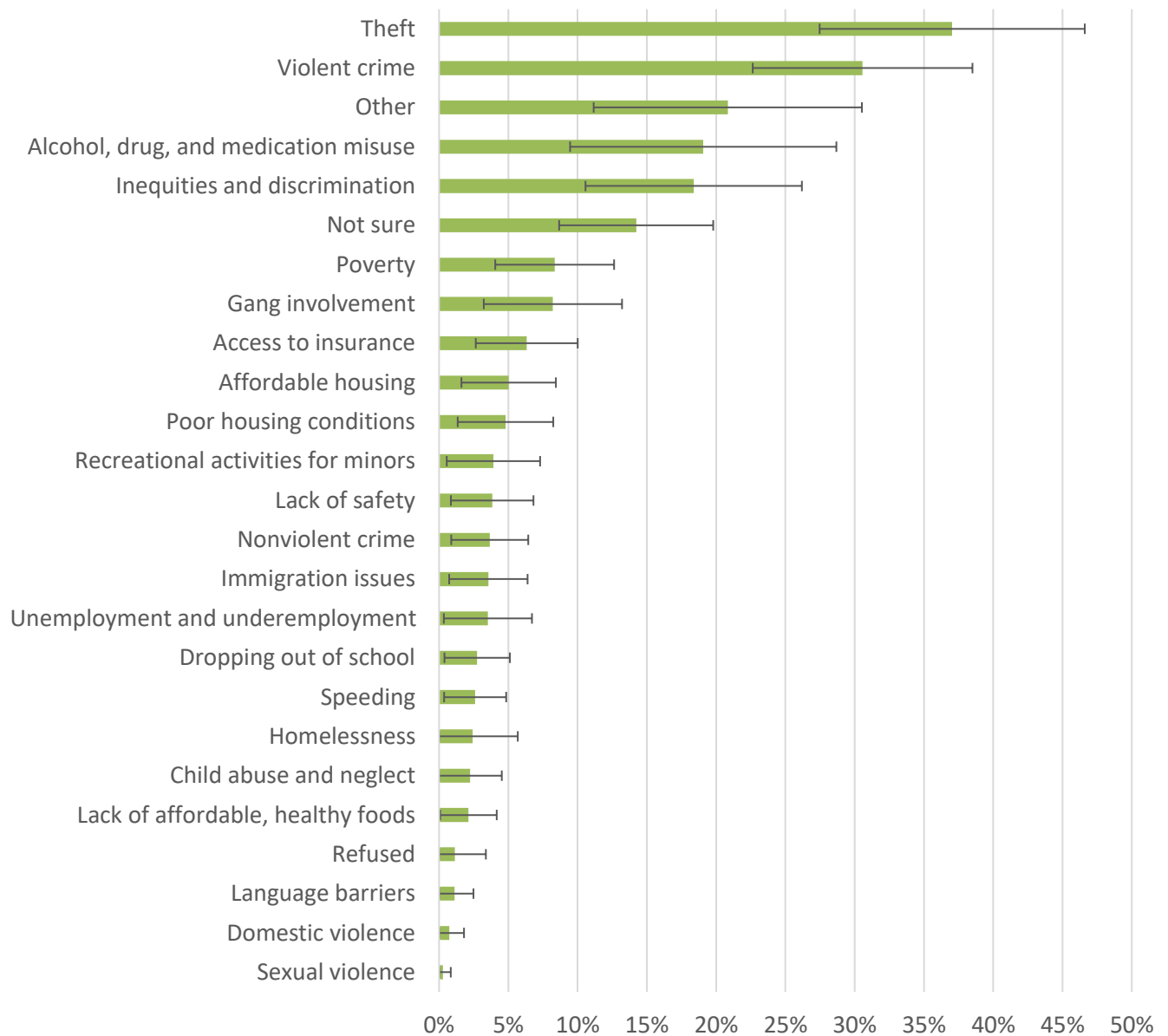
Community Improvement

43. What people, places, or things make your neighborhood a good place to live?



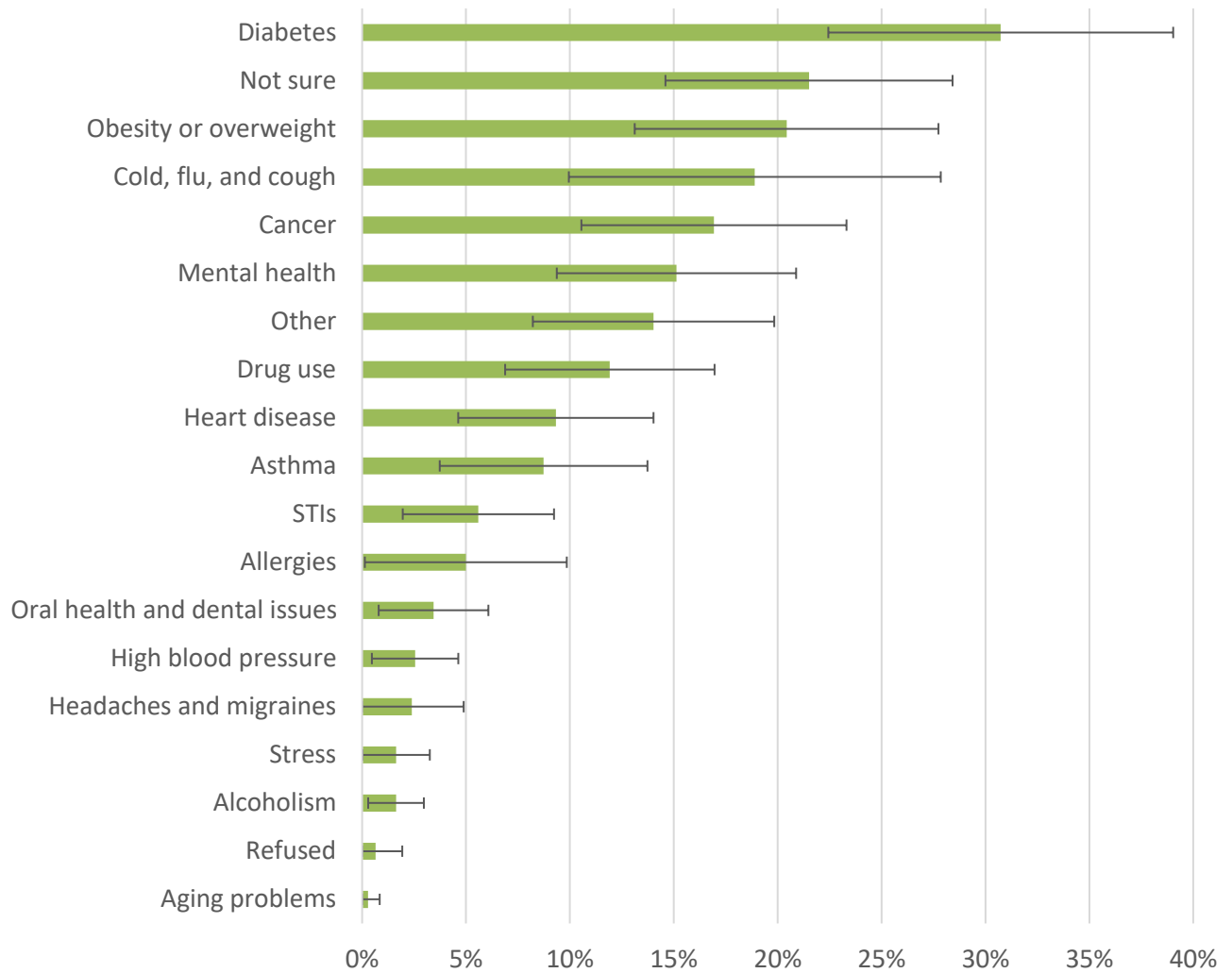
Interpretation: Among the people, places, or things that make neighborhoods in Durham a good place to live, good people were noted most often followed by safeness, quiet and peaceful, strong sense of community and parks.

44. What issues have the greatest effect on quality of life for you personally or your community in Durham County?



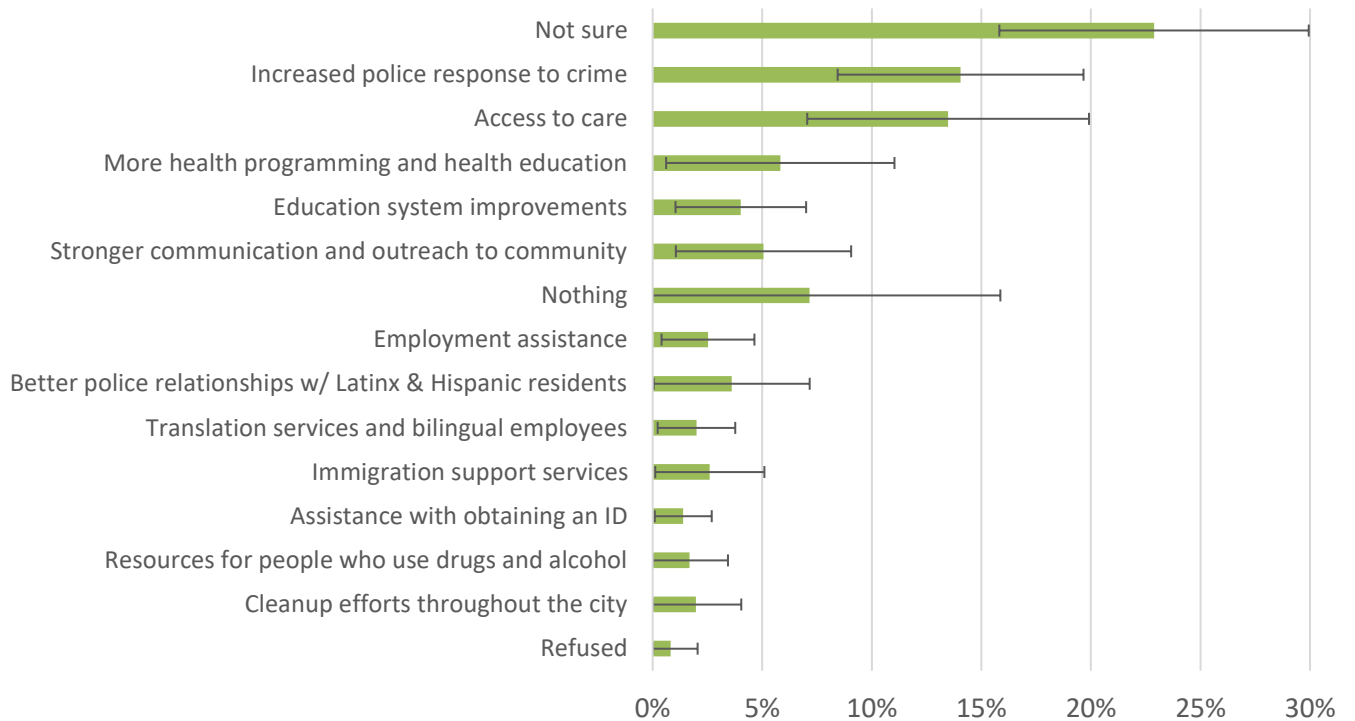
Interpretation: Theft, violent crime, alcohol, drug and medication misuse, inequities and discrimination and poverty were the five issues most commonly named as having the greatest effect on quality of life by Hispanic or Latino residents surveyed.

45. What are the most important health problems, that is, diseases or conditions, in Durham County?



Interpretation: Diabetes, obesity or overweight, cold, flu and cough, cancer and mental health were the top five health concerns noted among Hispanic or Latino residents surveyed.

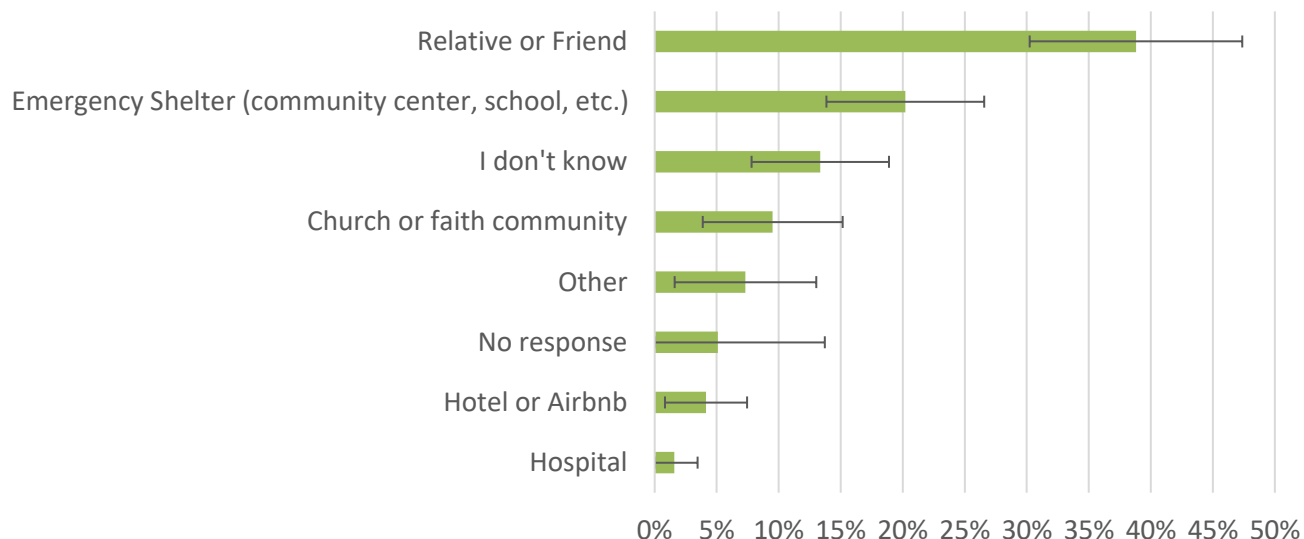
46. What could be done in Durham to support you and your community?



Interpretation: Residents indicated that top issues that could be addressed to better support their communities are increased police response to crime, access to care, more health programming and health education, education system improvements and stronger communication and outreach to the community.

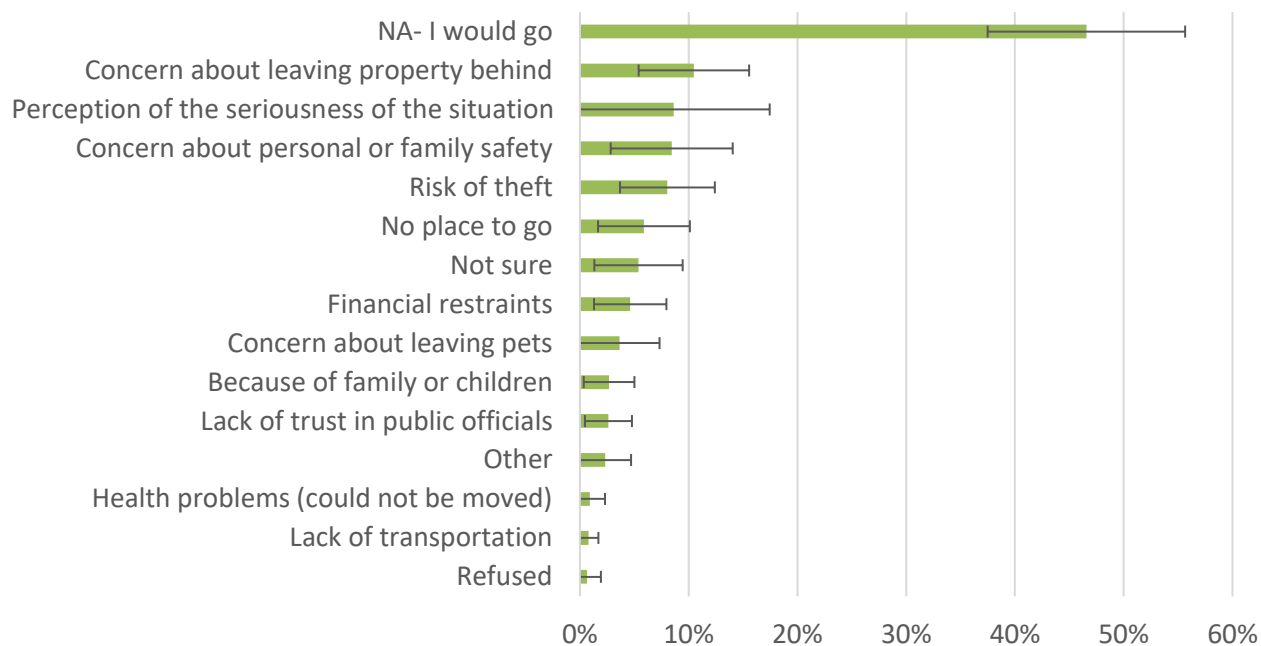
Emergency Preparedness

47. If you couldn't remain in your home, where would you go in a community-wide emergency?



Interpretation: Staying with a relative or friend was the most commonly reported place residents indicated they would go during a community wide emergency with 38.8% of Hispanic or Latino residents indicating that location. Emergency locations were the next most common response with 20.2% of residents indicating they would stay there. However, 13.3% of residents indicated they did not know where they would stay in an emergency.

48. What would be the main reasons you might not evacuate or leave your home if asked to do so?

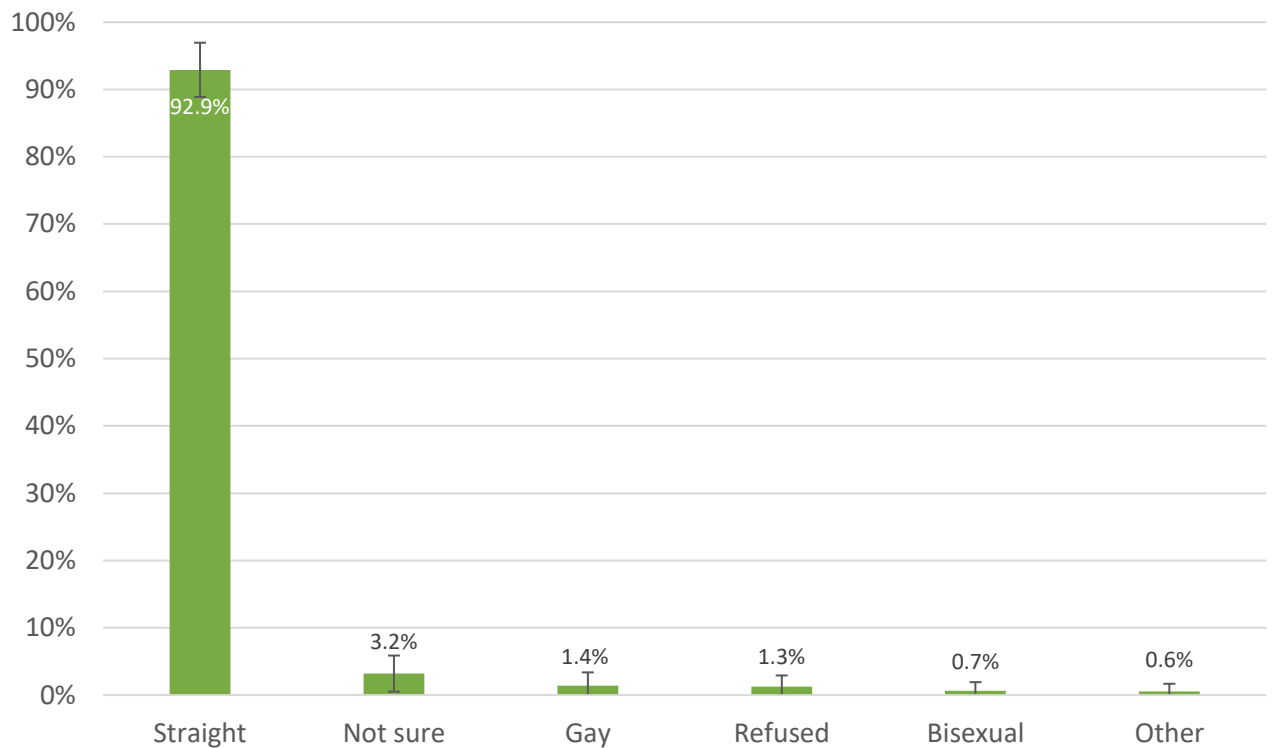


Interpretation: Concern about leaving property behind was the number one reason residents cited as a why they would not evacuate their homes if asked to do so. The next most common responses were perception of the seriousness of the situation, concern about personal or family safety, risk of theft or no place to go. It should be noted that 46.6% of respondents indicated that there would be no reason they would not leave their homes if asked to do so during an emergency.

Demographic Data

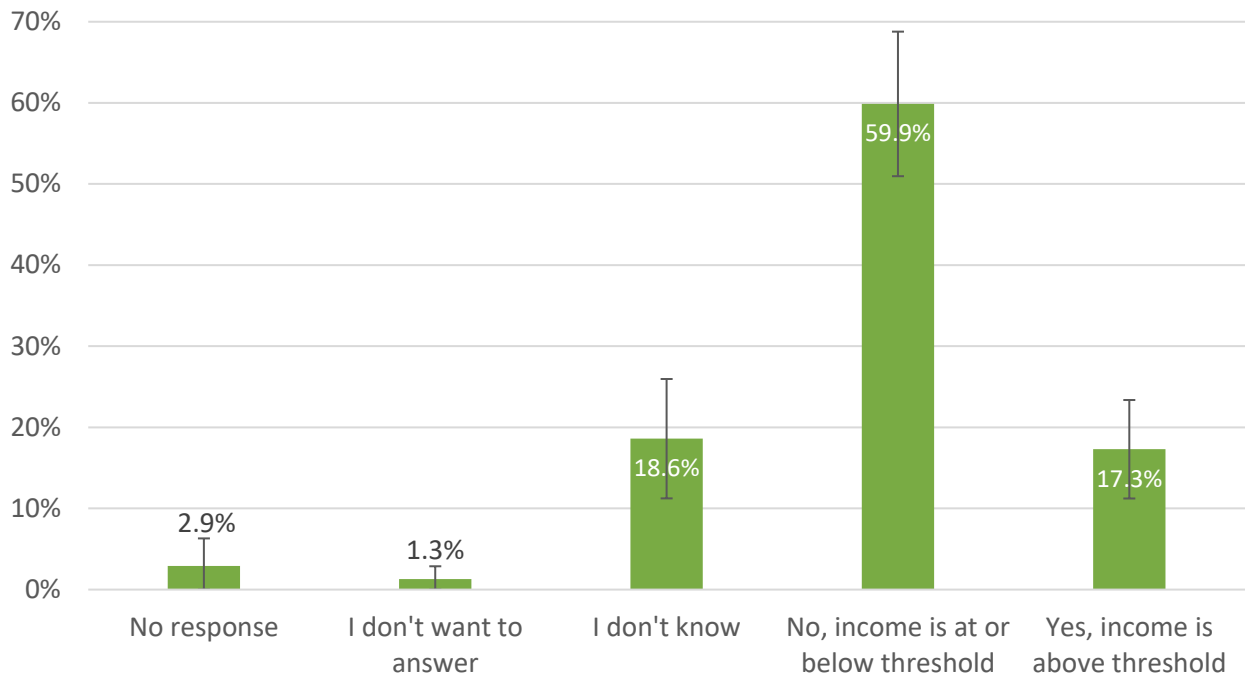
Note: Demographic data from the tables at the beginning of the document are not shown below.

1. How would you describe your sexual orientation?



Interpretation: Among survey respondents, 92.9% were heterosexual or straight and 2.7% were gay, bisexual or another sexual orientation. A little more than 3% of respondents answered that they were not sure of their sexual orientation.

2. Percent of survey respondents with an annual household income below and above the 200% poverty level.



Interpretation: Most residents (59.9%) had incomes below 200% of the Federal Poverty Level (FPL). Nearly one-fifth (17.3%) of residents had incomes above the FPL.

References

1. **Schnall, Amy Helene, Nakata, Nicole and Bayleyegn, Tesfaye.** Community Assessment for Public Health Emergency Response Toolkit. *Centers for Disease Control and Prevention.* [Online] 2019. https://www.cdc.gov/nceh/hsb/disaster/casper/docs/CASPER-toolkit-3_508.pdf.