

2022 Putnam County Community Priority Poll Report

Putnam County Department of Health

PURPOSE AND METHODS

The Putnam County Department of Health (PCDOH) conducted the Community Priority Poll (CPP) to assess county residents’ opinions on health priorities and where resources should be focused to improve quality of life. The CPP is one component of the 2022 Putnam County Community Health Assessment (CHA), a comprehensive review of determinants of health, resources, and health issues that informs the development of the county’s Community Health Improvement Plan (CHIP).

In contrast to a long-form community health survey also administered in the spring of 2022 as a component of the CHA, the CPP was intentionally designed to be a quick, easy way for residents to provide topline feedback, and thus did not collect demographic data. The CPP was administered online via social media (Facebook and Instagram), and by paper ballot during community engagement activities between June 27- July 17, 2022. Engagement activity locations included a Putnam County Department of Health (PCDOH) vaccine clinic, two food pantries, and an outdoor festival. The poll was available in English and Spanish and consisted of two questions, each with ten potential answers (Appendix). Participants were instructed to choose a single answer for each question by selecting the letter or number that correlated with the given answer. Ballots or social media posts with greater than one answer selected were excluded. Responses were tallied, and counts and proportions were calculated, using Microsoft Excel.

ELIGIBILITY AND RESPONSE

Respondents included followers of PCDOH social media accounts and attendees at engagement activities who were screened for the county of residency prior to participation. Overall, there were 135 responses for question one and 133 responses for question two.

TABLE 1: COMMUNITY PRIORITY POLL RESPONSES BY ADMINISTRATION SITE

Site	Facebook	Instagram	Social Media Total	Vaccine Clinic	Food Pantries	Festival	Total
Count of Responses	5	4	9	12	51	63	135

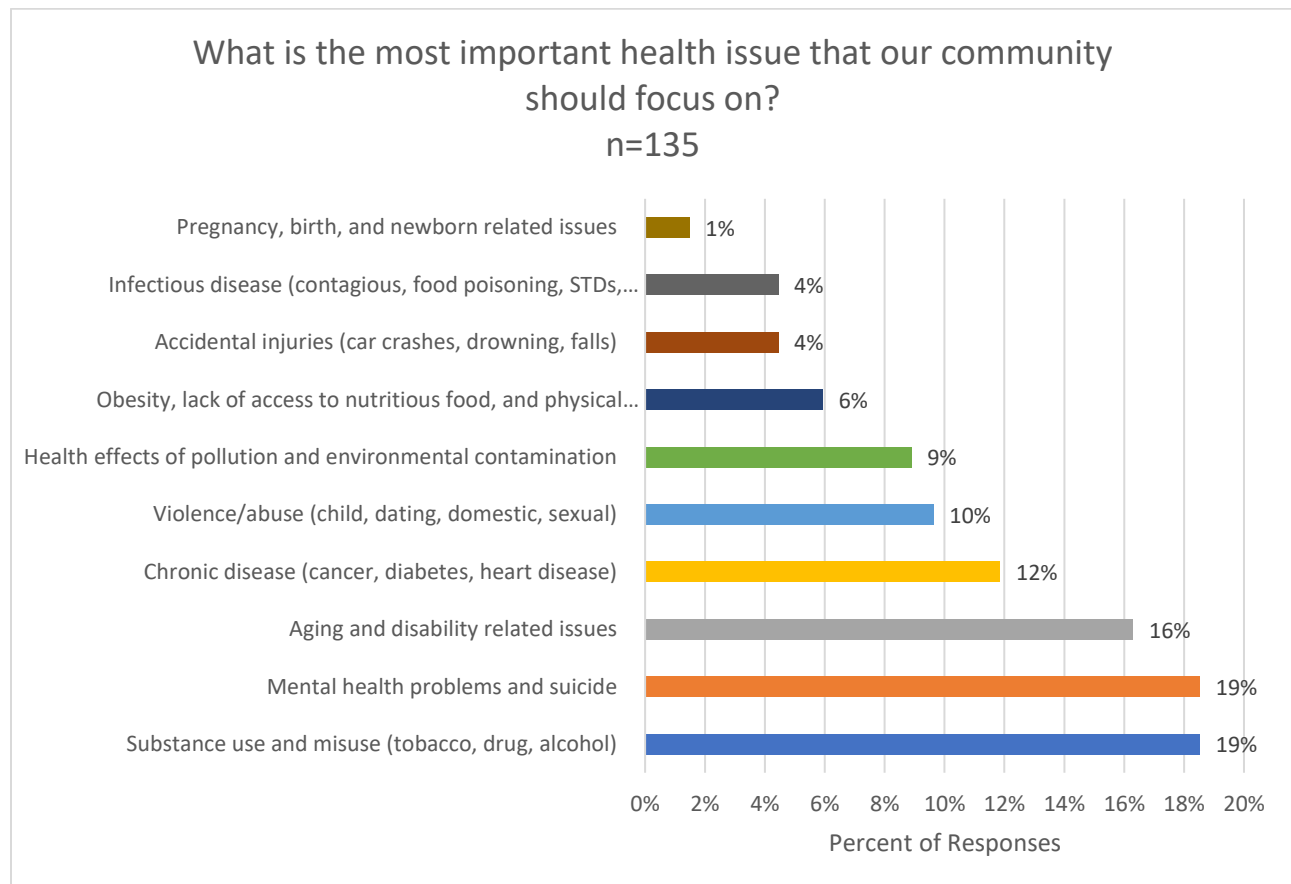
Although demographics were not collected, it should be noted that 47% of responses were collected at locations (PCDOH vaccine clinic, food pantries) that typically serve low-income residents who are frequently Spanish speaking. The majority of respondents from the vaccine clinic and food pantries took the poll in Spanish (57%), whereas on social media and at the festival, 98.6% of respondents

took the poll in English. Given the comparatively low poverty rates in Putnam County,¹ it can be assumed that both low-income and predominantly Spanish-speaking residents are over-represented in the poll.

RESULTS

In question 1, respondents were asked to choose the most important health issue from a list to assess their opinion on the prioritization of health issues in the community.

FIGURE 1

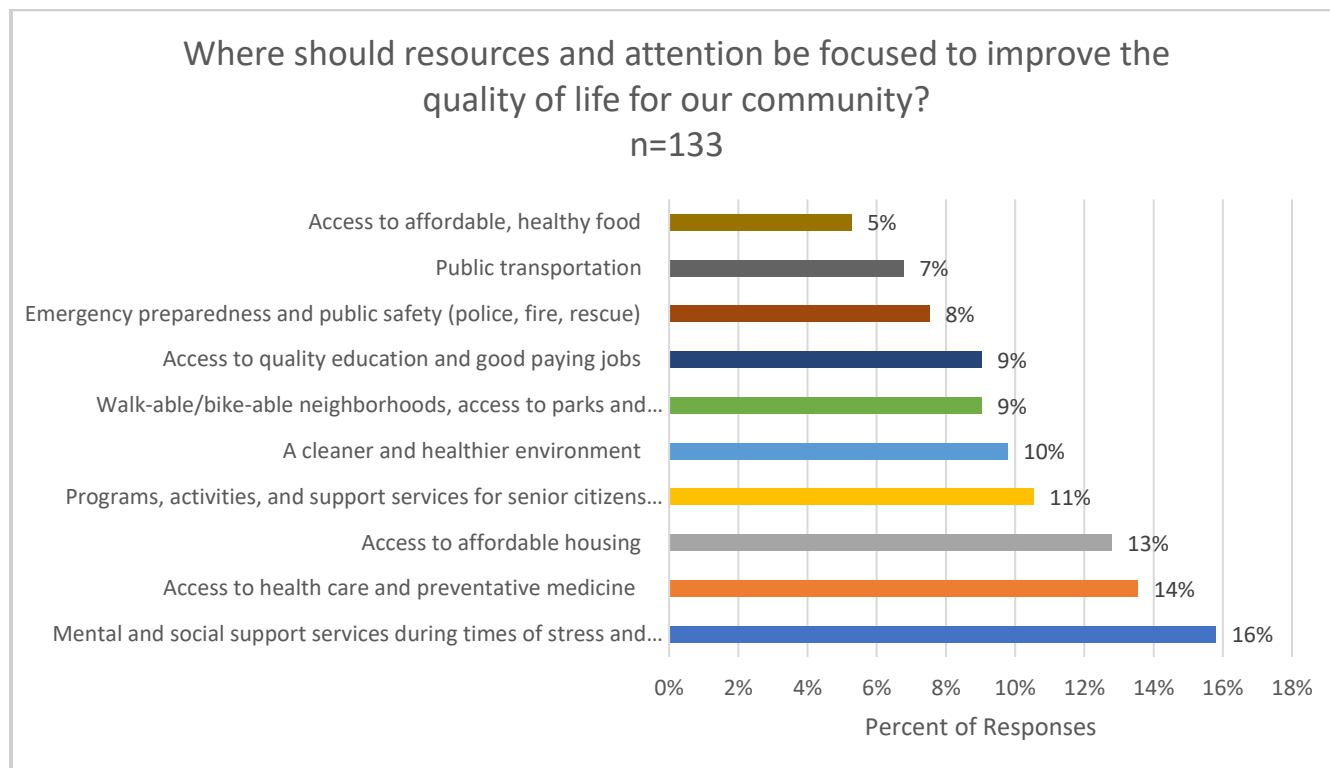


Substance use and misuse (tobacco, drug, alcohol) and mental health problems, and suicide were the top two choices with 25 responses each. Response totals were tallied by the administration site to further examine differences between responses received at locations that typically serve low-income residents (PCDOH vaccine clinic, food pantries) and other locations (social media and festivals). The top two choices amongst respondents from the vaccine clinic and the food pantries were substance use and misuse (17 responses, 27%) and mental health problems and suicide (11 responses, 17%). The top two choices amongst respondents from social media and the festival were mental health problems and suicide (14 responses, 19%) and aging and disability issues (13 responses, 18%).

¹ U.S Census, *Small Area Income and Poverty Estimates*, 2020, <https://www.census.gov/data-tools/demo/saipe/#/>

In question 2 respondents were asked to choose from a list of focus areas and assess their opinion on the prioritization of community resources:

FIGURE 2



Mental and social support services during times of stress and crisis were the top choice with 21 responses. Access to healthcare and preventive medicine (18 responses) and access to affordable housing (17 responses) were the second and third highest choices. Response totals were tallied by the administration site to further examine differences between responses received at locations that typically serve low-income residents (PCDOH vaccine clinic, food pantries) and other locations (social media and festivals). The top two choices amongst respondents from the vaccine clinic and the food pantries were mental and social support (12 responses, 19%) and access to affordable housing (11 responses, 17%). The top three choices amongst respondents from social media and the festival were walkable and bikeable neighborhoods (11 responses, 16%), and a tie between access to health care and preventive medicine and mental and social support services (both 9 responses, 13%).

DISCUSSION

Overall, respondents showed a preference for prioritization of health issues related to mental health and substance misuse, with the alignment of prioritization of resources for mental and social support services. Differences in preference were detected based on survey administration location that may be associated with underlying differences in income level and primary language of those typically served by the PCDOH vaccine clinic and area food pantries. These findings will be presented to community health partners participating in the community health improvement planning

process alongside the results of a large-scale community health survey, and health data compiled from secondary sources.

Low response rate and skewed response distribution is the main limitation of the CPP as an assessment of resident opinion. Social media did not prove to be an effective means to collect responses. The polling functions integrated into social media platforms were not utilized because they did not allow for enough response options. Instead, followers were presented with questions in the format of a “story” and asked to provide answers in a text box. This methodology produced low engagement and required a pivot to administration via paper ballot. PCDOH should continue to explore social media options to better assess resident opinions. Community health improvement planners should consider the results of the CPP with the understanding that the small sample is not generalizable to the population as a whole.

APPENDIX 1

COMMUNITY PRIORITY POLL INSTRUMENT

ENGLISH VERSION

Question 1. What is the most important HEALTH ISSUE that our community should focus on? Circle one answer.

1. Accidental injuries (car crashes, drowning, falls)
2. Aging and disability-related issues
3. Health effects of pollution and environmental contamination
4. Chronic disease (cancer, diabetes, heart disease)
5. Substance use and misuse (tobacco, drug, alcohol)
6. Pregnancy, birth, and newborn-related issues
7. Infectious disease (contagious, food poisoning, STDs, diseases spread by ticks and mosquitoes)
8. Violence/abuse (child, dating, domestic, sexual)
9. Mental health problems and suicide
10. Obesity, lack of access to nutritious food, and physical inactivity

Question 2. Where should resources and attention be focused to IMPROVE THE QUALITY OF LIFE for our community? Circle one answer.

1. A cleaner and healthier environment
2. Access to affordable, healthy food
3. Access to affordable housing
4. Access to health care and preventative medicine
5. Walk-able/bike-able neighborhoods, access to parks and recreation
6. Emergency preparedness and public safety (police, fire, rescue)
7. Public transportation
8. Access to quality education and good-paying jobs
9. Programs, activities, and support services for senior citizens and youth
10. Mental and social support services during times of stress and crisis

APPENDIX 2

SPANISH VERSION

Pregunta 1. ¿Cuáles son los PROBLEMAS DE SALUD más importantes en los que nuestra comunidad debería enfocarse? Encierra en un círculo una respuesta.

1. Lesiones accidentales (choques automovilísticos, ahogamiento, caídas)
2. Cuestiones relacionadas con el envejecimiento y discapacidad
3. Efectos de la polución en la salud y contaminación ambiental
4. Enfermedades crónicas (cáncer, diabetes, enfermedades cardíacas)
5. Uso y abuso de sustancias (tabaco, drogas, alcohol)
6. Problemas relacionados con el embarazo, el parto y el recién nacido
7. Enfermedades infecciosas (contagiosa, intoxicación por alimentos, enfermedades por transmisión sexual, enfermedades transmitidas por garrapatas y mosquitos)
8. Violencia/abuso (infantil, de pareja, doméstica, sexual)
9. Problemas de salud mental y suicidio
10. Obesidad, falta de acceso a alimentos nutritivos e inactividad física

Pregunta 2. ¿Dónde se deben concentrar los recursos y la atención para MEJORAR LA CALIDAD DE VIDA de nuestra comunidad? Encierre en un círculo una respuesta.

1. Un medio ambiente más limpio y saludable
2. Acceso a alimentos saludables y asequibles
3. Acceso a vivienda asequible
4. Acceso a cuidado de la salud y medicina preventiva
5. Vecindarios aptos para caminar/andar en bicicleta, acceso a parques y recreación
6. Preparación para emergencias y seguridad pública (policía, bomberos, rescate)
7. Transportación pública
8. Acceso a educación de calidad y empleos bien remunerados
9. Programas, actividades y servicios de apoyo para adultos mayores y jóvenes
10. Servicios de apoyo mental y social en tiempos de estrés y crisis