Be Healthy & Thrive

Holmes County
Community Health Needs Assessment

Florida Department of Health in Holmes County

Letter from the Florida Department of Health in Holmes County

Community Partners,

In 2023, the Florida Department of Health in Holmes County launched a major initiative to understand the health needs of the community and develop programs and policies to address these needs. This process included conducting a Community Health Needs Assessment (CHNA) to provide a portrait of the community's health and developing a Community Health Improvement Plan (CHIP) to identify areas of action. This collaborative, participatory community health needs assessment-community health improvement plan process has several overarching goals, including:

1. Complete a comprehensive CHNA that will identify Holmes County's strengths and challenges in providing a healthy environment for all residents and workers.
2. Develop a CHIP that will serve as a blueprint for improving the health of the county over the next three years.
3. Engage partners, organizations, and individuals in creating a vision for a healthy Holmes County and making that vision a reality in the strengthening of the Healthy Holmes Task Force (HHTF).

The 2023-2028 CHNA highlights recurring barriers to health and priority issues that need to be addressed. This document presents the findings of the County's CHNA, which examined the health status of Holmes County and explored the health-related challenges, experiences, and priorities of residents within the social context of their community.

Thank you to our community partners for participating and providing valuable insights to improve public health across the county collaboratively.

Sincerely,

Traci Corbin

Traci Corbin, Administrator
Florida Department of Health in Holmes County

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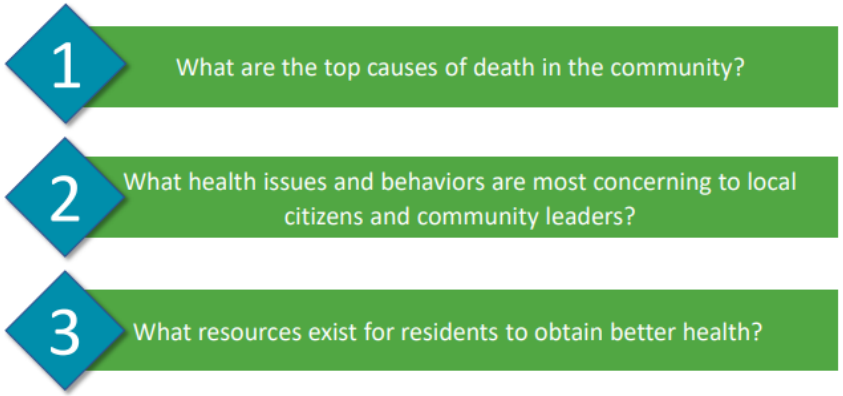
Executive Summary

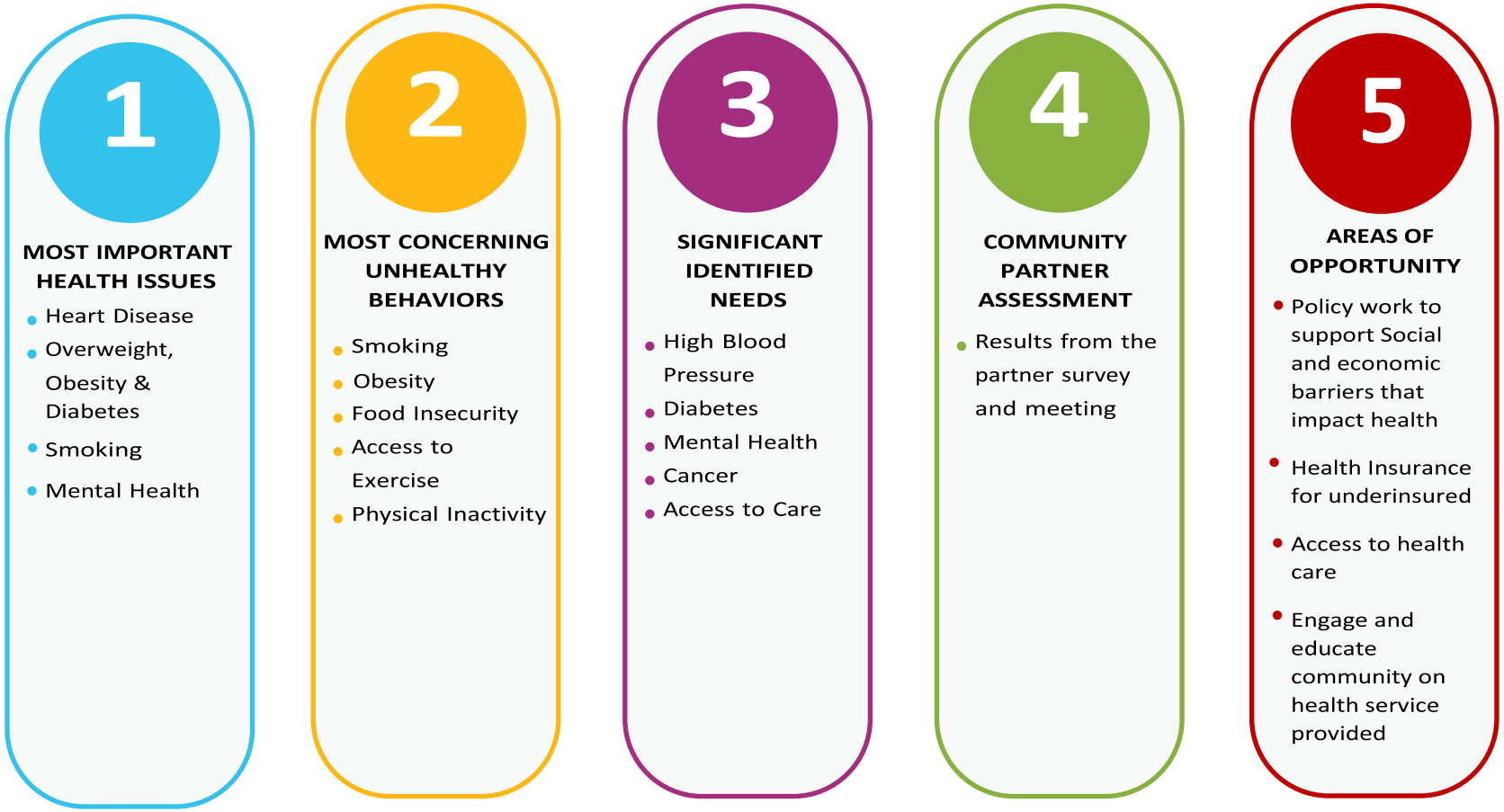
In 2023, the Healthy Holmes Task Force (HHTF) worked to promote healthy living and collaborated with community partners and residents to encourage healthy lifestyle choices. This collaboration engaged key stakeholders throughout the County and worked to apply the following principles:

- Provide a common agenda.
- Establish shared measurements and foster beneficial activities.
- Encourage continued communication.
- Build strong community support across multiple sectors including health, business, education, faith, non-profit, government, and civic partners. The COVID-19 pandemic impacted our community and world in ways we never anticipated.

The Community Health Needs Assessment (CHNA) provides the first goal of this process, which examines the current health status of Holmes County residents and explores the local health-related challenges, experiences, and priorities within the social context of their community. The CHNA utilizes a participatory, collaborative approach to look at health in its broadest context, specifically the larger social and economic factors that have an impact on health as well as how these characteristics disproportionately affect certain populations. The CHNA methods include the Mobilizing for Action through Planning & Partnerships (MAPP) 2.0 process which was utilized to conduct the CHNA. The MAPP 2.0 process addresses community engagement including action and impact.
The Florida Department of Health in Holmes County (DOH-Holmes) partners recognized our community has never needed a coordinated approach to community health improvements more, therefore the team continued to work diligently using virtual platforms to move the work forward. The pandemic highlighted health barriers and called for the community to collectively work on Holmes County's health as a whole. Every five years, community organizations in Holmes County work on a two-step process to understand and respond to health barriers within our community. The first phase of this process involves identifying local health concerns and resources through a Community Health Needs Assessment (CHNA). The second phase, which will launch in early 2024, will outline the actions that the community will take to improve the health of residents. An overview of the Community Health Improvement Plan (CHIP) is provided in the Next Steps section. A CHNA examines the health of community residents and answers the questions:



The CHNA is a year-long, community-wide undertaking. Health, business, social service, education, faith organizations, and other community partners across Holmes County provided guidance and input by serving on a CHNA Team. Community residents participated through online and paper surveys. Community stakeholders were engaged through collection of feedback and comments from presentations of the findings. The culmination of this first phase is the publication and distribution of this 2023 CHNA report.



What is a Community Health Needs Assessment (CHNA)?

The CHNA is an ongoing process of collection, assembly, analysis, and distribution of information on the health needs of the community. Our community's CHNA and process was facilitated by Ascendant Healthcare Partners, and data was comprised from the Florida Department of Health in Holmes County, healthcare providers, area health coalitions, faith-based organizations, educational institutions, social services, nonprofit organizations, and other valuable partners.

The mission for this project was to support and promote initiatives that address identified priority health challenges. The data collected for the CHNA includes both residents' insights and statistics concerning health status, community health needs, gaps, challenges, and assets. This report will be shared with key stakeholders and the community with the goal of mobilizing community members towards building a healthier community.

The report was written to compile indicators including demographic, socioeconomic, and health behaviors that could potentially impact health outcomes in Holmes County. By implementing policies, aligning programs, and utilizing resources targeting health factors, improved community health can be achieved. Members of HHTF remain committed to collaboration and advancement of the health of Holmes County. Together we can identify the health issues and formulate priority areas, while producing an ongoing comprehensive strategic approach to community health improvement.

The following pages provide insight to demographic, social, economic, and environmental factors that impact health. We encourage individuals and organizations to use this information to make Holmes County a healthier place to live, work, and play.

Special Consideration - COVID-19

In late 2019, the virus SARS-CoV-2 was identified and led to the COVID-19 pandemic. The virus spread quickly and claimed lives globally. Quarantine and restricted movement led to isolation that impacted mental health at a community level. The response taxed resources, front-line caregivers, and those in healthcare. COVID-19 increased public awareness of the importance of health prioritization and the impact of health decisions on long-term quality of life.

Healthy Holmes Task Force

HHTF is a transformative initiative created to unite and align resources to reduce health barriers and improve outcomes of residents of Holmes County. HHTF works by engaging healthcare providers, area health coalitions, faith-based organizations, educational institutions, social services, and nonprofit organization across the County to identify priorities; establish shared measurements; foster reinforcing activities; and encourage continued communication. The HHTF conducts a needs assessment every five years to evaluate progress and direct actions toward meeting the vision of Holmes County residents. We would like to recognize the 2023 HHTF for their contributions to a collective impact effort and participation in this CHNA:

2023 Healthy Holmes Task Force

- Florida Department of Health in Holmes County
- Doctors Memorial Hospital
- Tri-County Community Council
- Holmes County Emergency Medical Services
- University of Florida/IFAS Extension Holmes County
- Veteran's Health Administration
- Chipola Healthy Start
- Department of Children & Families
- Holmes Council on Aging
- Holmes County Public Library
- Bonifay Nursing and Rehab Center
- Doorways of NWFL
- United Way of Northwest Florida

Vision

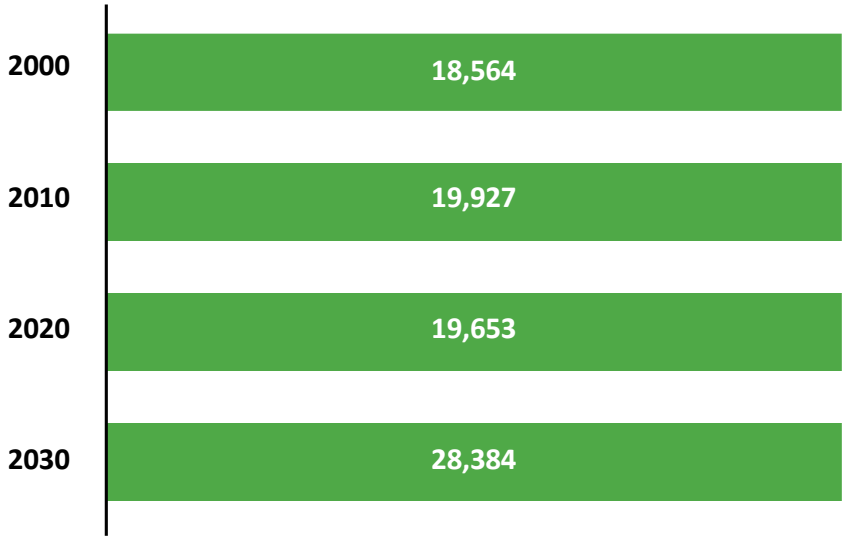
For all citizens to obtain the highest health and access to resources, and quality of life for all.

Community Profile

Holmes County is located in the northwestern part of the State of Florida, in the Panhandle. In 2023, Holmes County has a population of 19,653 people with a median age of 42.4 and a median household income of $41,809, with over 25% living below the poverty line.

While each county and city or town has its own unique characteristics, the surrounding counties to Holmes County are intertwined. It is common for residents from one county to commute to and from another county for jobs, entertainment, education, and health care. These neighboring counties include Holmes, Jackson, Walton, and Bay Counties. This assessment covers Holmes County, individual partners may serve in multiple counties and/or communities.

Holmes County



Sources: US Census Bureau 2000, 2010, 2020, 2029; US Census Bureau ACS 5-year 2018-2022

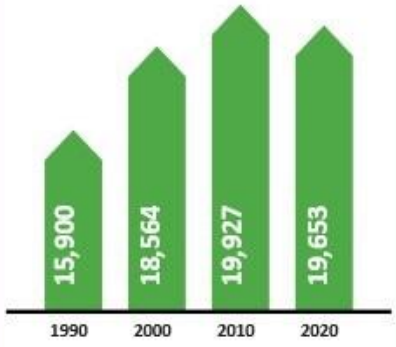
Holmes County, Florida is rural (outside of urban cores of 10,000 or more population). Holmes County has a racial and ethnic composition, age, demographics, income, educational attainment, and occupation which distinguish this community from other Florida communities. All these factors collectively impact the health of County residents. This CHNA report is intended to present who we are as a community, including the influence of socioeconomic and demographic variables on our health. The following demographics are presented to provide a profile of the County:

POPULATION

2020 Population

18,564

1990-2020 Growth



Source: USAFACTS.org

RACE, ETHNICITY, VETERANS

White

(Not Hispanic or Latino)

88% HOLMES

68% FLORIDA

Black

(Not Hispanic or Latino)

7% HOLMES

16% FLORIDA

Hispanic or Latino

3% HOLMES

26% FLORIDA

Asian

(Not Hispanic or Latino)

1% HOLMES

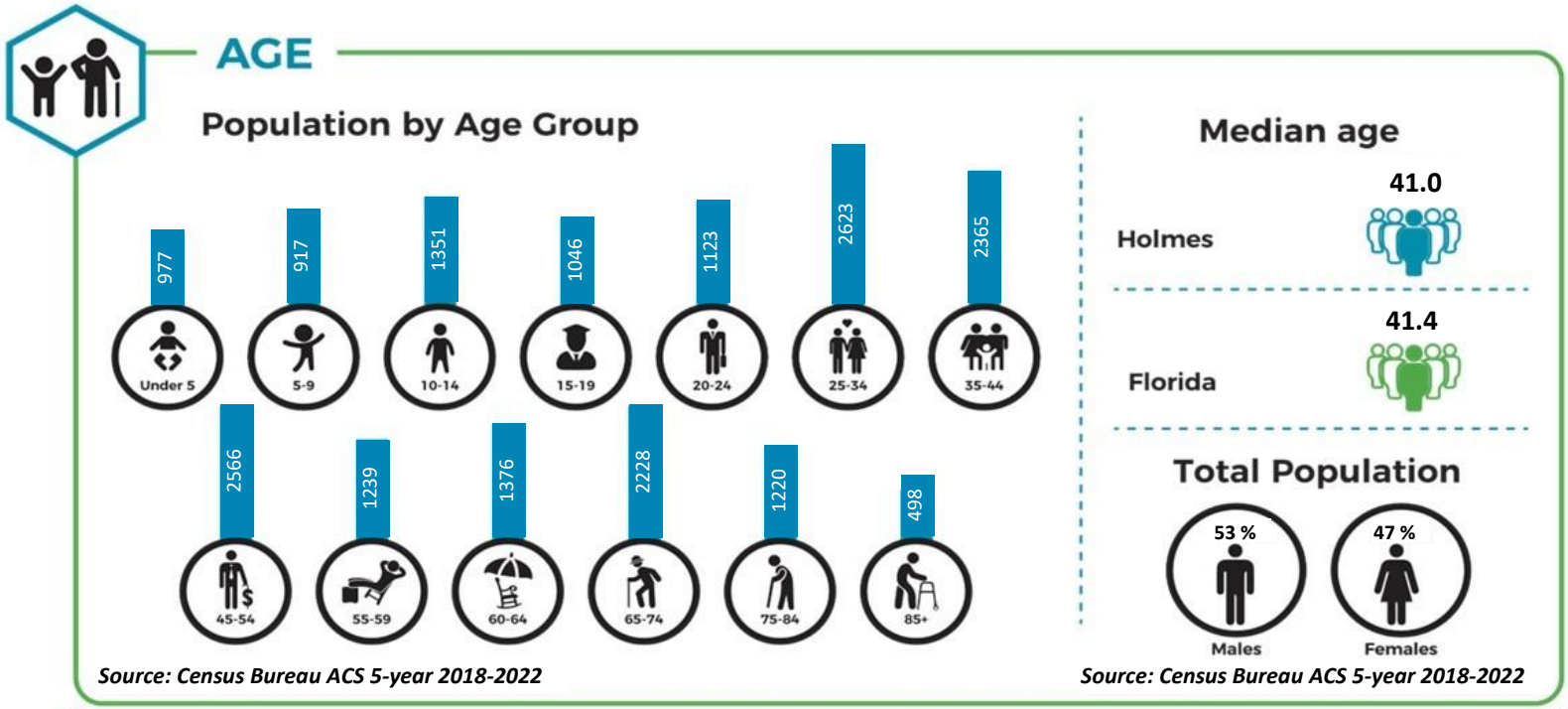
3% FLORIDA

VETERANS

Veterans

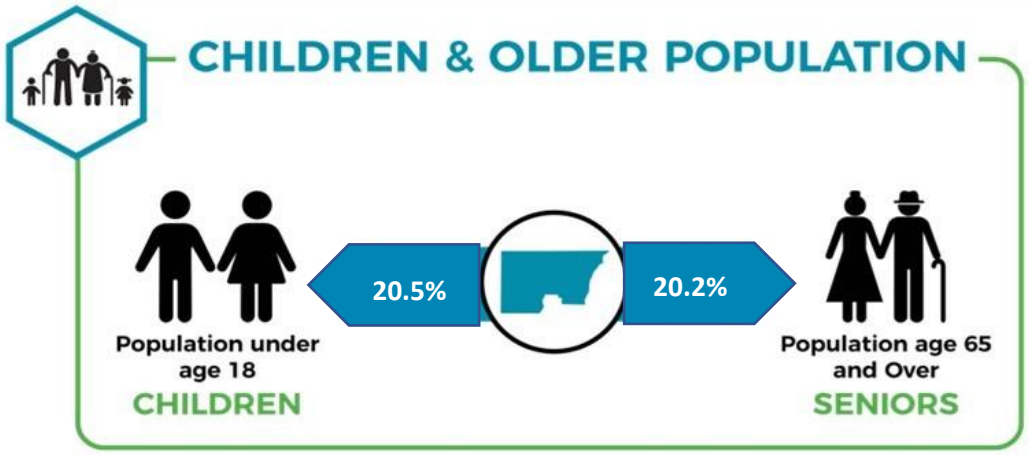
11.2% of residents are Veteran

Source: Census Bureau ACS 5-year 2018-2022



Source: Census Bureau ACS 5-year 2018-2022

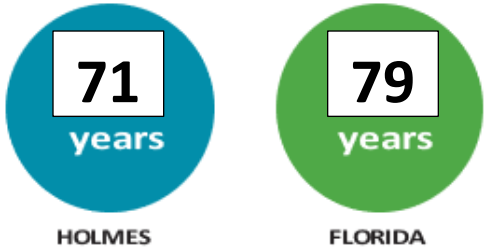
Source: Census Bureau ACS 5-year 2018-2022



Source: Census Bureau ACS 5-year 2018-2022

LIFE EXPECTANCY

Life Expectancy at Birth



HOLMES FLORIDA

Source: FLHealthCHARTS 2021

INCOME

$ 55,802

MEDIAN FAMILY INCOME

20 %

PERSONS IN POVERTY

Source: Census Bureau ACS 5-year 2018-2022

EMPLOYMENT

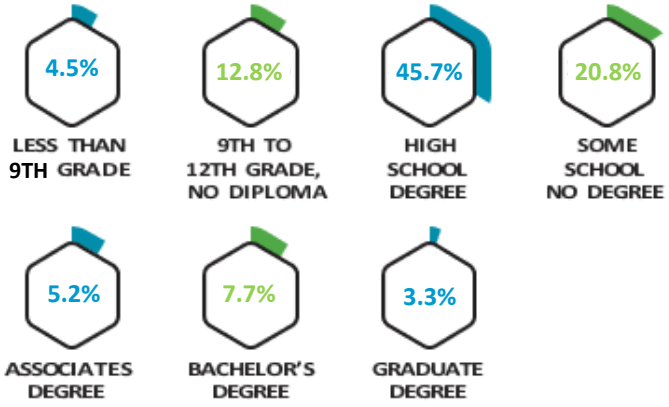
Employment Status based on the Civilian Labor Force 16 years and older

EMPLOYED 46.7%

UNEMPLOYED 2.3%

Source: Census Bureau ACS 5-year 2018-2022

EDUCATION



Source: Census Bureau ACS 5-year 2018-2022

POVERTY

FAMILIES BELOW POVERTY

14.8%

HOLMES

9.3%

FLORIDA

Source: FLHealthCHARTS 2021

HOLMES COUNTY CHILDREN LIVING IN POVERTY

16.7%

Below Poverty Family with Children Ages 0-17

31.4%

Below Poverty Family with Children Under 5

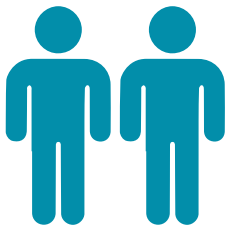
Source: FLHealthCHARTS 2021

TOTAL FAMILIES BELOW POVERTY BY RACE (BLACK/WHITE)

HOLMES

13.8%

WHITE



46.2%

BLACK

FLORIDA

7.5%

WHITE

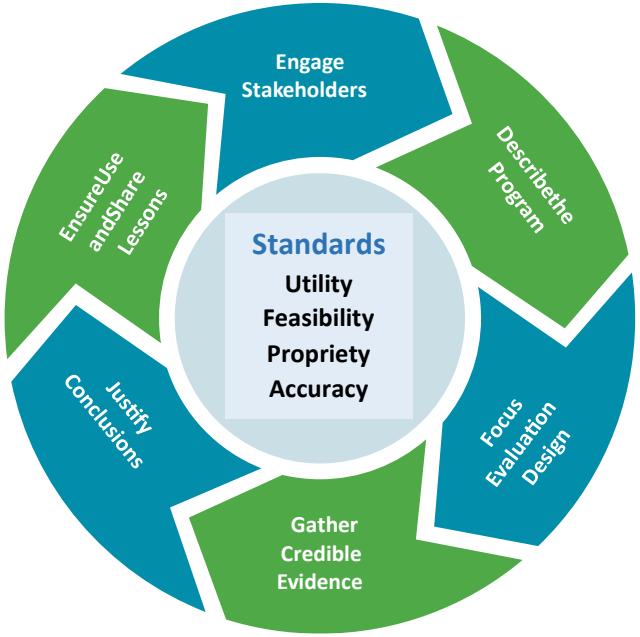
16.8%

BLACK

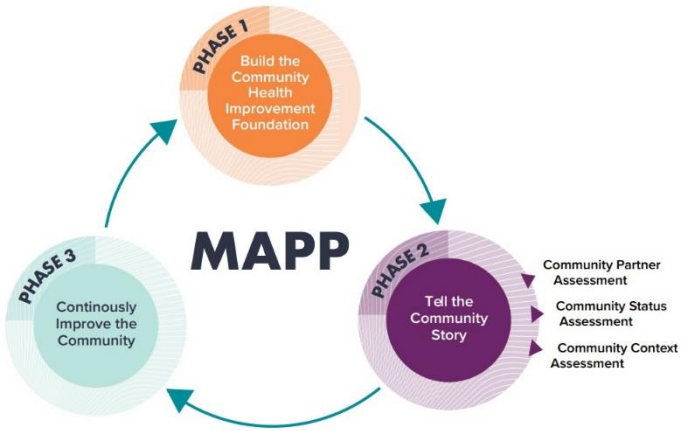
Source: FLHealthCHARTS 2021

Methodology

Many health and community organizations in our area are required by accrediting bodies or regulatory agencies to conduct CHNAs. For example, to retain accreditation, the Florida Department of Health must assess health status within each county every five years, while the Internal Revenue Service requires not-for-profit hospitals to identify and address community health needs every three years.



In 2015, the Centers for Disease Control and Prevention (CDC) recommended communities adopt a "unified community health improvement framework supporting multiple stakeholders." The CDC's approach encourages hospitals, health departments and other community organizations to work together to identify and address community health needs. This collaborative approach was embraced by HHTF for the 2023 CHNA. To achieve a unified community health improvement framework, a methodology was adopted that would meet the accrediting and/or regulatory requirements of all participants. This methodology incorporated components from leading health industry experts into a cohesive process that participating organizations embraced. The methodology for the 2023 CHNA process was based on processes recommended by the National Association of City and County Health Officials' (NACCHO) Mobilizing for Action through Planning and Partnership (MAPP) 2.0 strategic planning model.



Graphic courtesy of NACCHO MAPP 2.0 User's Handbook

The MAPP 2.0 process highlights three phases to address authentic community engagement, sustained partner engagement, and action and impact. The three phases are Community Partner Assessment, Community Status Assessment, and Community Context Assessment.

Facilitated by public health leaders, this framework helps communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP 2.0 is not an agency-focused assessment process; rather, it is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems.

The CHNA provides the first goal of this process, which examines the current health status of Holmes County residents and explores the health-related challenges, experiences, and priorities within the social context of their community.

This CHNA provides local-level health-related data about Holmes County. The CHNA utilizes a participatory, collaborative approach to look at health in its broadest context, specifically the larger social and economic factors that have an impact on health as well as how these characteristics disproportionately affect certain populations.

After facing a pandemic that challenged our community, the CHNA played a very critical role. Through collective impact, our CHNA members, organizations, and stakeholders were able to identify health priorities.

Community Status Assessment

Community Health Framework

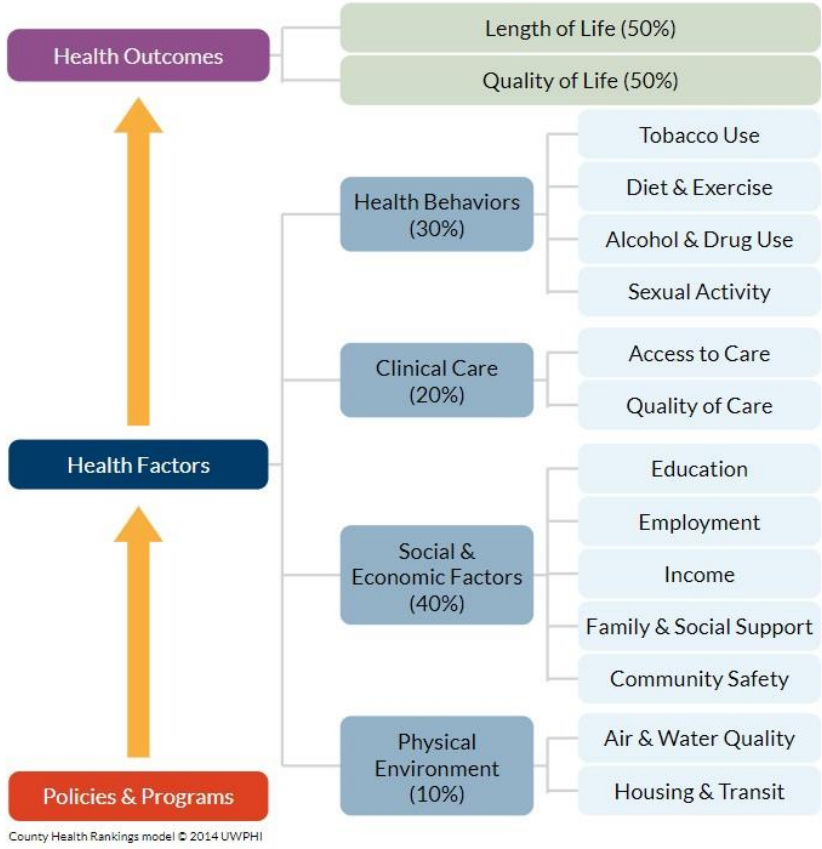
Health is more than just the absence of illness or disease. Health is influenced by many other factors including healthcare services, treatment, and medications, but also by our physical environment, by social and economic factors, and by our own behaviors. Factors such as education level, neighborhood safety, air quality, available housing, poverty, and employment can have a positive or negative impact on health. The environmental factors of where we live, work, and play are known as Social Determinants of Health.

To assess Social Determinants of Health, quality of health care, and health behaviors, the County Health Rankings and Roadmaps were developed by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute (UWPHI). The framework illustrates the strong influence that Health Factors and Health Outcomes have on illness and death.

Health Factors are the things that can be modified to improve the length and quality of life.

Health Outcomes represent the overall health of a county, reflecting the physical and mental well-being of residents measured by length and quality of life. Health Outcomes are indicators of trends that contribute to the health within a community.

Policies and Programs can improve Health Factors, and thus lead to lower rates of disease and better Health Outcomes.



County Health Rankings

The County Health Rankings are based on a model of population health that emphasizes the factors that, if improved, can help make communities a healthier place to live, learn, work and play. HHTF has adopted the County Health Rankings framework. This CHNA looks at causes of death, disease, and disability and then determines the Health Outcomes root causes. Contributing Health Factors are then identified that impact Health Outcomes. Health Outcomes and Health Factors provide a snapshot of community health status.

According to the County Health Rankings,

Holmes county is ranked 62 out of all 67 Florida counties making it among the least healthy.

1	Collier	13	Broward	25	Charlotte	37	Hernando	49	Highlands	61	Jackson
2	St. Johns	14	Manatee	26	Sumter	38	Gilchrist	50	Jefferson	**62**	**Holmes**
3	Seminole	15	Hillsborough	27	Wakulla	39	Calhoun	51	Escambia	63	Dixie
4	Monroe	16	Okaloosa	28	Brevard	40	Volusia	52	Glades	64	Gadsden
5	Martin	17	Pinellas	29	Polk	41	Lafayette	53	Marion	65	Madison
6	Miami-Dade	18	Walton	30	Nassau	42	Gulf	54	Levy	66	Putnam
7	Orange	19	Santa Rosa	31	Alachua	43	Hendry	55	Citrus	67	Union
8	Osceola	20	Flagler	32	Liberty	44	Bay	56	Taylor		
9	Palm Beach	21	Clay	33	Pasco	45	Baker	57	Columbia		
10	Indian River	22	Lake	34	Hardee	46	Duval	58	Bradford		
11	Lee	23	St. Lucie	35	Franklin	47	Suwannee	59	Washington		
12	Sarasota	24	Leon	36	DeSoto	48	Okeechobee	60	Hamilton		

Source: County Health Rankings & Roadmaps 2023

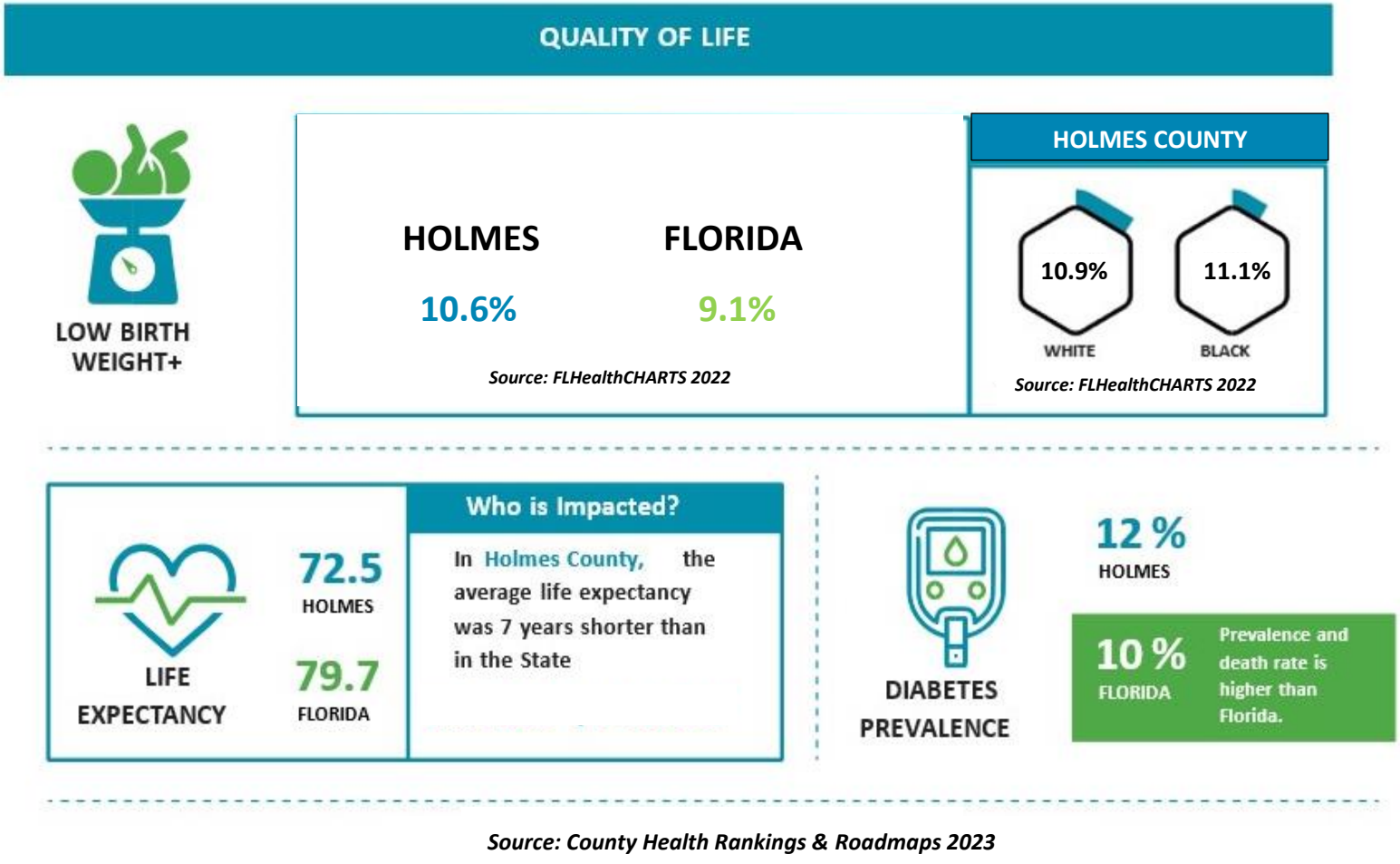
Leading Causes of Death

Holmes County's 2023 leading causes of death are 1) Heart Disease, 2) Cancer, and 3) Chronic Lower Respiratory Disease

	HOLMES COUNTY	FLORIDA
1	Heart Disease	Heart Disease
2	Cancer	Cancer
4	Chronic Lower Respiratory Disease	Unintentional Injury
4	Unintentional Injury	Stroke
5	COVID-19	COVID-19
6	Stroke	Chronic Lower Respiratory Disease
7	Alzheimer's disease	Diabetes
8	Diabetes	Alzheimer's Disease
9	Septicemia	Chronic Liver Disease and Cirrhosis
10	Nephritis, Nephrotic Syndrome and Nephrosis	Nephritis, Nephrotic Syndrome and Nephrosis

Source: FLHealthCHARTS 2022

Quality of Life



Source: County Health Rankings & Roadmaps 2023

Health Behaviors

ADULT SMOKING

HOLMES	FLORIDA
27 %	16 %

ADULT OBESITY

HOLMES	FLORIDA
37 %	28 %

SEXUALLY TRANSMITTED DISEASES*

HOLMES	FLORIDA
433.3	465

* Number of new cases of chlamydia that were diagnosed per 100,000 people.

Source: County Health Rankings & Roadmaps 2023

DRUG OVERDOSE*

20 HOLMES	27 FLORIDA

* Number of drug poisoning deaths per 100,000 population

TEEN BIRTHS*

45 HOLMES	18 FLORIDA

* There were 45 teen births per 1,000 females ages 15-19

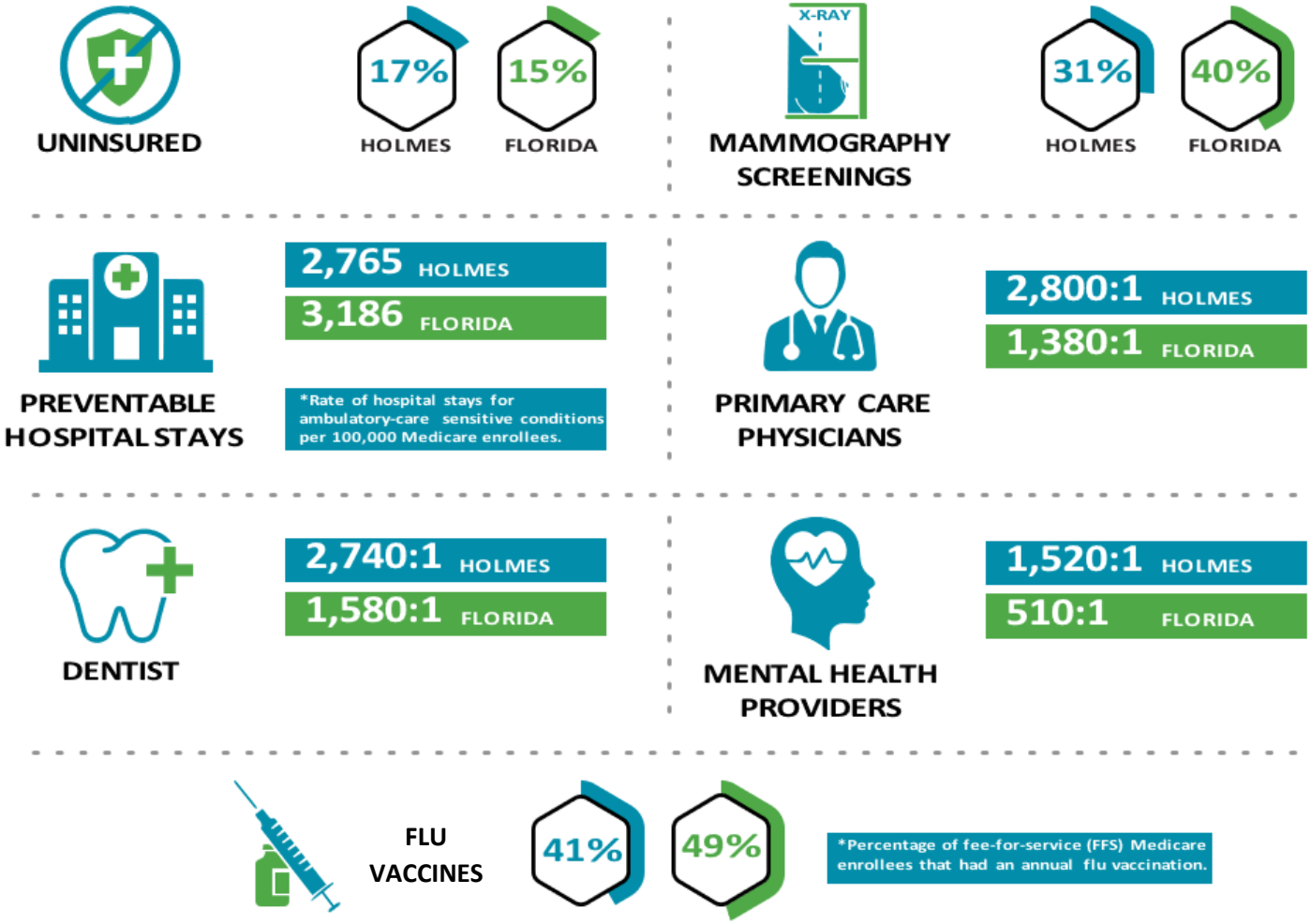
FOOD INSECURITY

16% HOLMES	11% FLORIDA

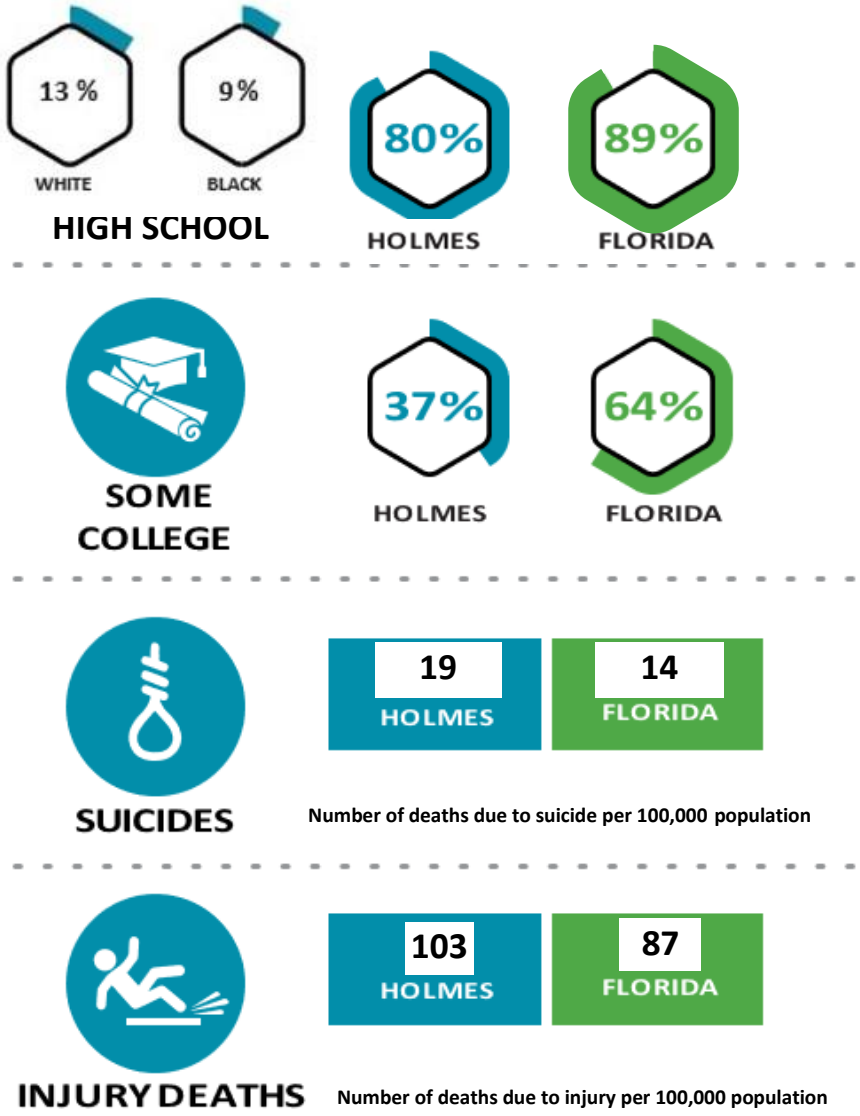
ACCESS TO EXERCISE OPPORTUNITIES

19% HOLMES	88% FLORIDA

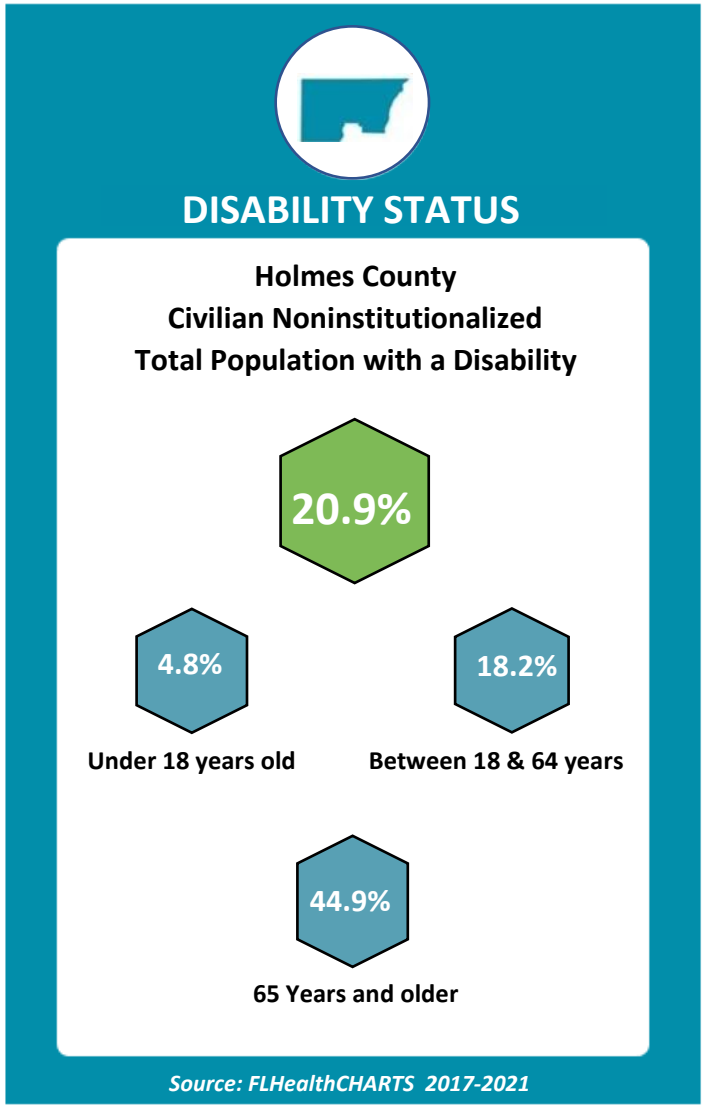
Source: County Health Rankings & Roadmaps 2023



Source: County Health Rankings & Roadmaps 2023



Source: County Health Rankings & Roadmaps 2023

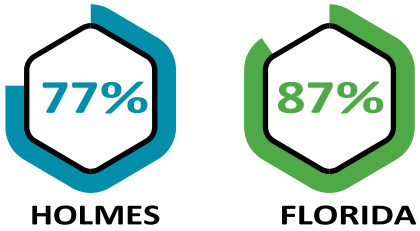


Source: FLHealthCHARTS 2017-2021

AIR POLLUTION MATTER

8.6	7.8
HOLMES	FLORIDA

* Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)



BROADBAND ACCESS

23% of homes within the County do not have broadband internet access.

Source: County Health Rankings & Roadmaps 2023

Community Perceptions and Themes

CHNA

Data analysis for the CHNA was performed to evaluate quality of life and design solutions that focus on population health. HHTF is tasked with aligning resources within the community to help improve health outcomes for Holmes residents. Two versions of the CHNA were administered – the Community Status Assessment and the Community Partner Survey.

Data Analysis Sources & Methodology

The primary data source for this CHNA was the Health Survey distributed to Holmes County Residents during the Spring of 2023. The survey items were reviewed by the CHNA committee. The result of the effort was a 21-item survey that was distributed in electronic and paper format. A total of 157 community members participated in the Resident Survey.

Data Collection and Weighting

Holmes' data is based on the participants zip code. The zip code information provides area officials and stakeholders with information to inform their decision making and policy work. The results reflect the needs of Holmes County.

Graphic courtesy of NACCHO MAPP 2.0 User's Handbook

Community Status Assessment

The Community Status Assessments were available in digital format and in hard copy. The link to the survey was shared through agencies and organizations. Hard copies of the survey were provided at various rural sites and civic meetings throughout Holmes County.

The HHTF included more diverse respondents to the Community Status Assessment by partnering with organizations such as the Holmes County Library and faith-based organizations to assist with survey distribution.

The top four most important health issues identified were heart disease, overweight/obesity and diabetes, smoking, and mental health. These were followed by high blood pressure, cancer, and access to healthcare.

Recognized areas of opportunity in Holmes County are policy work to support social and economic barriers that impact health, health insurance for the underinsured, access to health care and engaging and educating the community on health services provided.

The following areas highlight the community response to the Community Status Assessment.

- Community Health
- Health Issues
- Behaviors of Concern
- Difficult to Find Care for Problems Acquiring Care

The following sections highlight the responses for key areas of the Community Status Assessment.

Perceived Community Health

Question: I think my County is a healthy place in which to live, work, or spend time?
The majority of respondents (67.4%) noted that they Agree or Strongly Agree that their county is a healthy place to live, work or spend time.

Perceived Important Health Issues

Question: What are the social and economic issues that affect health in my County?
The respondents selected affordable healthy housing, living wage, food insecurity, and unemployment as the main issues that affect health in their County.

Question: What are the environmental health and safety issues in my County?
Most respondents believed that the top safety issues were air quality, housing condition, and drinking water quality.

Behaviors of Concern

The top five most concerning unhealthy behaviors identified in Holmes County were smoking, obesity, food insecurity, and access to exercise and physical inactivity.

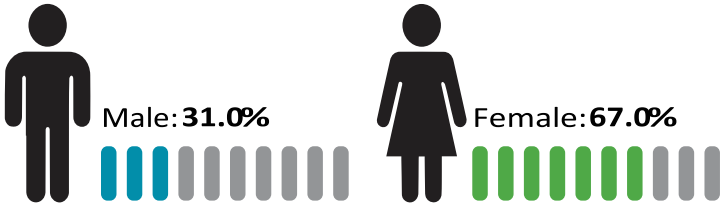
Problems Acquiring Care

Question: In the past 2 years, which of the following issues have made it difficult or prevented you from getting medical, dental, or mental health services for you or your family?

Respondents indicated cost of prescriptions and co-pays are the top reason residents did not obtain healthcare. In addition, extended wait times, lack of health insurance, and lack of a primary medical provider were also indicated. The availability issues in Holmes County included the lack of medical specialties, dental services, and mental health services.

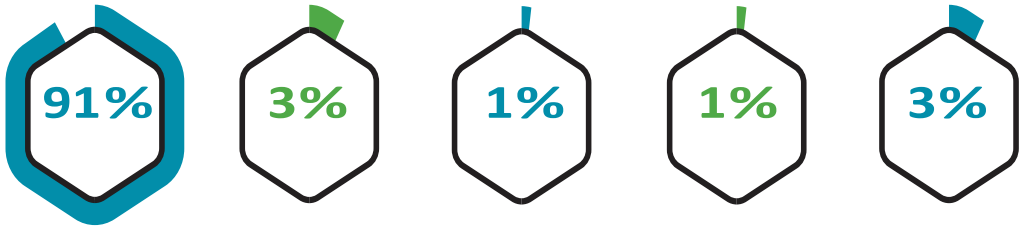
RESPONDENT DEMOGRAPHICS

GENDER



Non-binary / third gender **1%** | Prefer not to say.**1%**

RACE/ETHNICITY



WHITE

HISPANIC

BLACK/ AFRICAN AMERICAN

ASIAN

AMERICAN INDICAN

OTHER

NEVER ATTENDED SCHOOL OR ONLY ATTENDED KINDERGARTEN

GRADES 1-8 ELEMENTARY

GRADES 9-11 SOME HIGH SCHOOL

GRADE 12 HIGH SCHOOL GRADUATE OR GED

COLLEGE 1 YEAR TO 3 YEARS

COLLEGE GRADUATE OR MORE THAN 4 YEARS

Community Partners Assessment

The Community Partners Assessment (CPA) is an assessment process that allows community partners involved in MAPP to access:

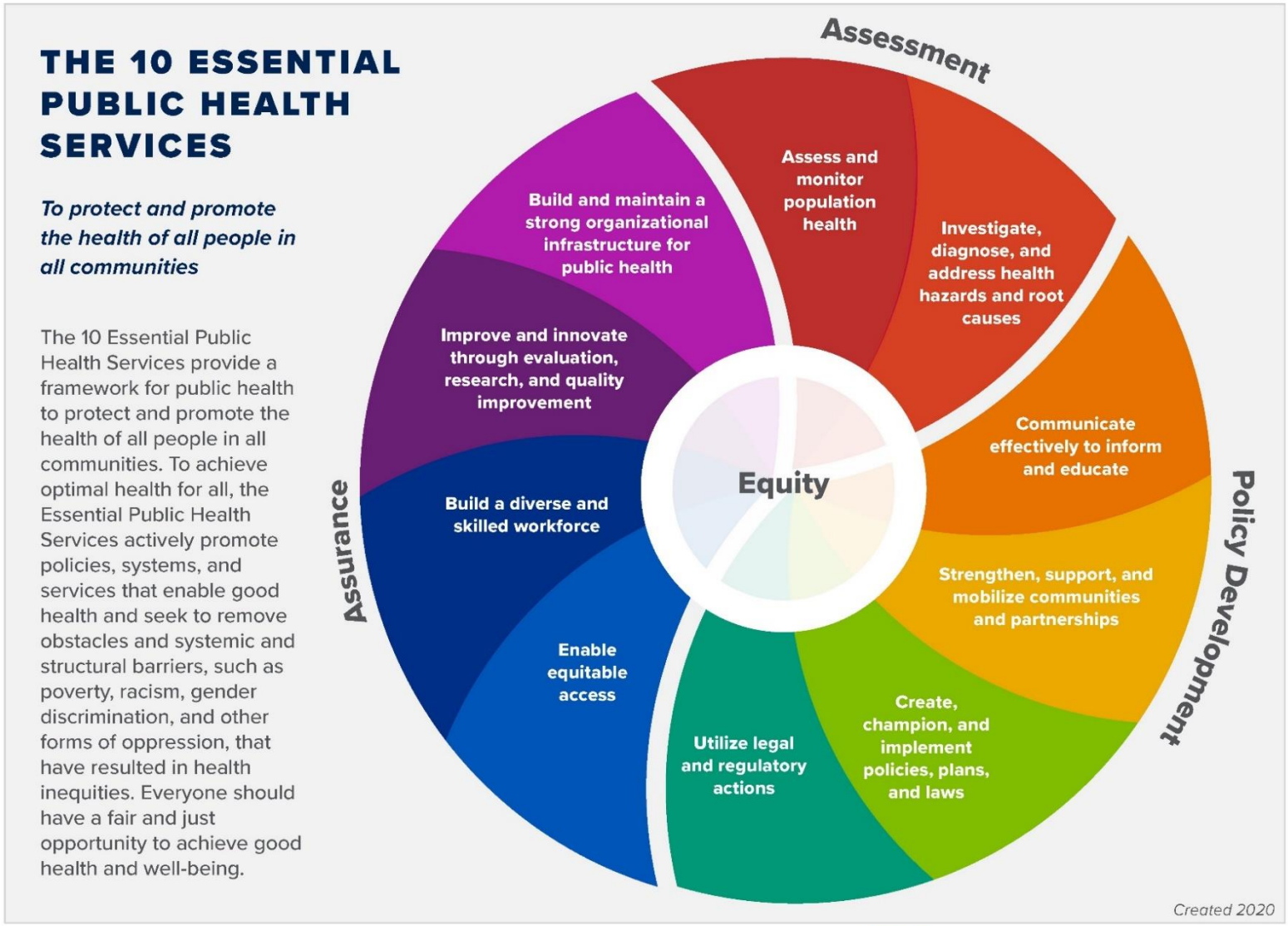
1. Individual systems, processes, and capacities
2. Collective capacity as a network/across all community partners to address health inequities

Holmes County's CPA survey emphasizes alignment with the essential public health services. To achieve equity, the Essential Public Health Services (EPHS), see chart on following page, actively promote policies, systems, and overall community conditions that enable optimal health for all.

Each Essential Health Service was included in the survey using the Model Standards. The 10 Essential Public Health Services (revised 2020) provide a framework for public health to protect and promote the health of all people in all communities. To achieve equity, the Essential Public Health Services (EPHS) actively promote policies, systems, and overall community conditions that enable optimal health for all. The survey provided engagement opportunities regarding organizational impact.

The CPA survey represents each of the 10 essential local public health system services:

- About your organization
- Organizational capacities
- Specific capacities to support the MAPP collaborative.


THE 10 ESSENTIAL PUBLIC HEALTH SERVICES
To protect and promote the health of all people in all communities
The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.
Assessment
Assess and monitor population health
Investigate, diagnose, and address health hazards and root causes
Policy Development
Communicate effectively to inform and educate
Strengthen, support, and mobilize communities and partnerships
Create, champion, and implement policies, plans, and laws
Assurance
Utilize legal and regulatory actions
Enable equitable access
Build a diverse and skilled workforce
Build and maintain a strong organizational infrastructure for public health
Improve and innovate through evaluation, research, and quality improvement
Equity
Created 2020
CDC Centers for Disease Control and Prevention

Community Partner Survey

A total of fourteen Community Partners were surveyed in the online survey. The participants serve these populations, Black/African American (16%), Native American (10%), Hispanic (14%), Asian (9%), Hawaiian (8%), Middle Eastern (9%), and White (15%).

Languages spoken by community partner staff: English, Spanish, Sign Language, French, Chinese, Tagalog, Vietnamese, and Arabic. Most community meetings are held in English and Spanish.

The Partner's goal is to develop the collective capacity of Holmes' network and connect partners to help build capacities in:

- Improve advocacy for mental health illness
- Drug abuse and mental health issues plague our community
- Community awareness of our services
- Our funding - so that we may reach more people
- More networking with other organizations
- Alliance and Coalition-Building
- Expand our partnerships and reach in the communities we serve

Urgent challenges identified:

- Access to healthy food
- Obesity
- Health insurance for the uninsured
- Finding evidence-based methods for rural communities
- Telemedicine and virtual care to improve mental health service delivery
- Lack of reliable internet access and digital divide are barriers to telehealth services

Partner Discussion

The next step was facilitated by Ascendant Healthcare Partners who provided a summary of the survey results to the partners.

Most valuable community resources available to the community.

- Rent, utilities, and housing assistance.
- Senior citizen services and educational information
- Navigators are available to help with selecting a plan on the Healthcare Marketplace connecting more people to affordable healthcare.
- Capability for emergency situations

Organizational Activities – connecting services to people.

- Public health
- Arts and culture
- Businesses and for-profit organizations
- Criminal legal system
- Disability/independent living
- Early childhood development/childcare
- Education
- Community economic development
- Economic security
- Public safety/violence
- Seniors/elder care
- Transportation
- Utilities
- Veterans' issues
- Youth development/leadership
- Environmental justice/climate change
- Faith communities
- Family well-being
- Financial institutions
- Food access and affordability (e.g., food bank)
- Food service/restaurants
- Government accountability
- Healthcare access/utilization
- Housing
- Human services
- Immigration
- Jobs/labor conditions/wages
- Land use planning/development
- Parks, recreation, and open space

Collective areas of improvement identified.

- **Community engagement and partnerships** to improve health outcomes and address health barriers. Partners identified their focus on economic stability, healthcare access and quality, education, neighborhood and built environment, and the need for representation from a diverse range of populations and health concerns. Significant needs identified were providing food for children and improving the uninsured rate through education.
- **Policies** may exclude certain groups, such as the elderly or non-English speakers, from participating in community programs.

Community Context Assessment

Community Context Assessment (CCA) is a qualitative tool to assess and collect data. It collects the insights, expertise, and views of people and communities affected by social systems to improve the functioning and impact of those systems. The CCA moves beyond interventions that rely on perceived community needs to understand a community's strengths, assets, and culture. The CCA centers on people and communities with lived experiences and lived expertise. It focuses on the views, insights, values, cultures, and priorities of those experiencing inequities firsthand. All communities have a vibrancy that must be nurtured and supported in community improvement.

Community partner organizations convened to discuss the results of the Community Resident Survey, health data outcomes, and threats and opportunities for action. The workshop also provided an opportunity for HHTF members to identify the priority areas of focus that have the greatest impact on improving through our work together. Holmes members identified the following:

What strengths and resources does the community have that support health and well-being?

Shared values and collaboration, the community has a strong sense of working together. Opportunities for change include improving access to care, education, and community-wide efforts to promote healthier behaviors.

What forces of change locally, regionally, and globally shape political, economic, and social conditions for community members?

The community acknowledged the significant challenges, including inflation, lack of a living wage, and the failure to expand Medicaid. The importance of tracking the homeless population and students who are facing housing insecurity or homelessness was also highlighted.

What is the community doing to improve health outcomes?

Throughout the discussions, there was a sense of collaboration and willingness to learn from one another to improve the health of the community. Overall, the meeting provided insight into the community's efforts to address the health needs and social issues affecting the community, with a focus on collaboration, education, and community-wide initiatives.

What solutions has the community identified to improve community health?

Initiatives and partnerships aimed at addressing these health issues were discussed, including physical activity programs, food security initiatives, and education and referrals for teen pregnancies and smoking cessation. Mental health services, access to care, and programs to help those who are uninsured were discussed. Addressing health barriers, particularly underserved populations, were highlighted, and the importance of community engagement and education was emphasized.

Conclusions

Through the assessments, respondents and attendees provided insight regarding their vision for a healthier Holmes County. Obesity, mental health, and smoking were identified as areas for improvement. Several participants reported a need to monitor access to healthcare. Other respondents and attendees saw a need to work on health communications and involvement across the various sectors to advance community health.

Key Overarching Themes

Based on social, economic, health data, and a community survey, this assessment report provides an overview of the social and economic environment of Holmes County. In addition, health conditions and behaviors that most affect the County's residents, and the perceptions of strengths and gaps in the current health care and public health environment were noted. Several overarching themes emerged:

• **Engage All Sectors of the Holmes Community to Promote and Educate the Community on Health Equity**. County departments and community organizations were viewed as highly collaborative in their approaches to the county's challenges. Community organizations were engaged and eager to be involved in all aspects of community initiatives.

• **Promote Health for a Lifetime.** County residents have a high obesity and overweight rate (**76.2 %** FL charts 2019) . The partners' desire is to address obesity, ranging from the prenatal period to older adults by focusing on a comprehensive approach to obesity prevention and treatment. The partnerships will align programs and policies to create an effective synergy of efforts to improve health outcomes by addressing obesity within the community.

Identified Priority Health Issues & Behaviors

For the 2023, CHNA priority areas were selected based on the previously identified areas of concern from FDOH-Holmes, community leadership, partner feedback, the Community Resident survey results, and the Community Partner survey results. Collaborative discussion resulted in selecting the following priority health issues and behaviors for Holmes County: Heart Disease, Overweight & Obesity, Diabetes, Smoking, Mental Health, Food Insecurity, Access to Exercise, and Physical Activity.

Next Steps

Following the completion of the CHNA will come the development of the Community Health Improvement Plan (CHIP).

The CHIP is a three-year plan that sets goals for the county public health system. The CHIP is developed and revised through a collaborative process that includes a wide range of stakeholders including local government agencies, health care providers, employers, community groups, schools, nonprofit organizations, and advocacy groups. This planning process fosters shared ownership and responsibility for the plan's implementation and promotes efficient and targeted action to improve the health of all county residents.

The CHIP contains community priorities outlined in the plan. Each priority contains a goal(s) to provide a desired measurable outcome with a specific indicator. Considerations of social determinants of health, causes of higher health risks, negative health outcomes, and health inequities are featured in the plan.

Priority areas addressed in the CHIP seek to reduce causes of health barriers through goals, strategies, and objectives.

The CHIP spotlights the designation of individuals and organizations that have accepted responsibility for implementing strategies.

The CHIP is a "living document" that may expand in scope to reflect changes in the community, as well as changes in systems and support, that address the well-being of the community. The collaborative efforts we have created through CHIP will help improve our impact in Holmes County, where we live, learn, work, and play.