

COMMUNITY HEALTH NEEDS
ASSESSMENT

BETHLEHEM HEALTH BUREAU



ABOUT BETHLEHEM

Bethlehem is a city in Northampton and Lehigh Counties in the Lehigh Valley region of eastern Pennsylvania. According to the most recent census figures, the city had a population of 74,982, making it the seventh largest city in Pennsylvania. Bethlehem is nicknamed, "the Christmas City," and is home to over 150 major events and festivals throughout the year.

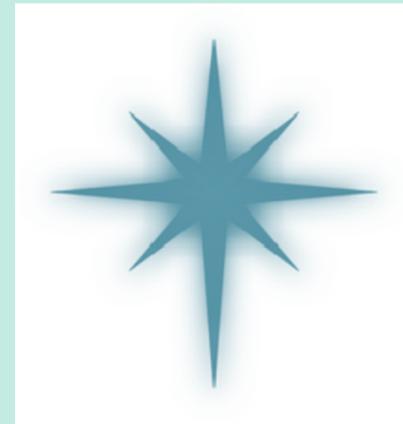
The Bethlehem Health Bureau is an independent municipal health department that operates under the joint leadership of the Board of Health and City of Bethlehem Administration. The Bethlehem Health Bureau strives to perform high quality public health services that protect and promote optimal health and well-being to assure that Bethlehem is a safe and healthy community.

Community assets and resources that were identified during the focus groups include: community events, healthcare systems, educational facilities, arts and cultural institutions, parks and recreation, police department, historic sites, and community based agencies that provide services and opportunities to socialize.



What is a Community Health Needs Assessment?

The purpose of the community health needs assessment is to learn about the community: the health of the population, contributing factors to higher health risks or poorer health outcomes of identified populations, and community resources available that can be mobilized to improve population health.



The Bethlehem Health Bureau utilizes data collected through a local health needs assessment to assure that services and resources are directed toward the City's most critical needs and health priorities.

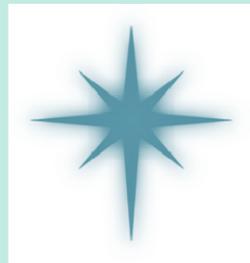
Vision for Bethlehem

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Inclusive Places



Connected Community



Positive Opportunities = Healthy Bethlehem

Community Health Needs Assessment Process

Existing Data

Data was used from existing data sources, including a community health survey that was conducted by St. Luke's University Health Network. The survey is modeled after the Behavioral Risk Factor Surveillance Survey.

Focus Groups

Four focus groups targeting different population groups were held to explore residents' perceptions about key health concerns in Bethlehem.

Stakeholder Input

A group of community partners met three times to identify data to include in the assessment, create a vision for the community, identify issues that will impact the health system in the near future, and establish the health priorities for the next three years based on data collected.

Community Health Needs Assessment Partners

THANK YOU TO OUR PARTNERS WHO
ASSISTED WITH THE COMMUNITY HEALTH
NEEDS ASSESSMENT PROCESS

Rajika Reed	St. Luke's University Health Network
Cathy Coyne	Moravian College
Hollie Gibbons	Cedar Crest College
Sue Wandalowski	Northampton County Human Services
Bill Vogler	Pinebrook Family Answers
Kathy Halkins	Bethlehem Area School District
Hannah Paxton	Neighborhood Health Centers of the Lehigh Valley
Erin Connelly	United Way of the Greater Lehigh Valley
Natalie Bieber	Lehigh Valley Health Network/Bethlehem Health Bureau Board Member
Lora Lesak	Community Services for Children
Emily Folenta	Community Action Committee of the Lehigh Valley
Jill Seitz	Lehigh Valley Planning Commission
Kristen Wenrich	Bethlehem Health Bureau
Sherri PENCHISHEN	Bethlehem Health Bureau
Sue Madeja	Bethlehem Health Bureau
Jessica Lucas	Bethlehem Health Bureau



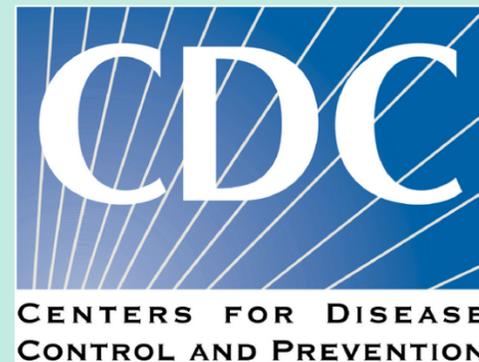
Summary of Findings

Four focus groups were held to obtain some qualitative data around the health needs of Bethlehem residents. The focus groups were held at Moravian Village, Bethlehem Area Public Library, the Hispanic Center and Liberty High School. The themes that emerged from the adult focus groups included the high quality of living that Bethlehem has to offer and the amount of arts and entertainment available. The needs that were common among the adult groups included deficiencies in the transportation system, lack of affordable housing, lack of grocery stores and social isolation. The youth focus group stated that the main health issues impacting the adolescent population include anxiety/depression and vaping.

A forces of change assessment was conducted with key stakeholders to identify the issues that are occurring or might occur that affects the health of the community. The forces of change that were identified include the widening of the income disparity gap, increase in the aging population, lack of an adequate transportation system, access to real-time data, and substandard housing.

Risk factors related to chronic diseases as well as mortality related chronic diseases are still major issues in Bethlehem. Mental health, for both adults and adolescents, continues to pose a significant challenge. Additionally, sexually transmitted disease rates, both nationally and locally, are increasing. Lastly, overdoses related to heroin and opioid use continue to increase.

Data Sources



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Factors that Influence Health



Physical Environment



Lifestyle



Health Care



Social Environment

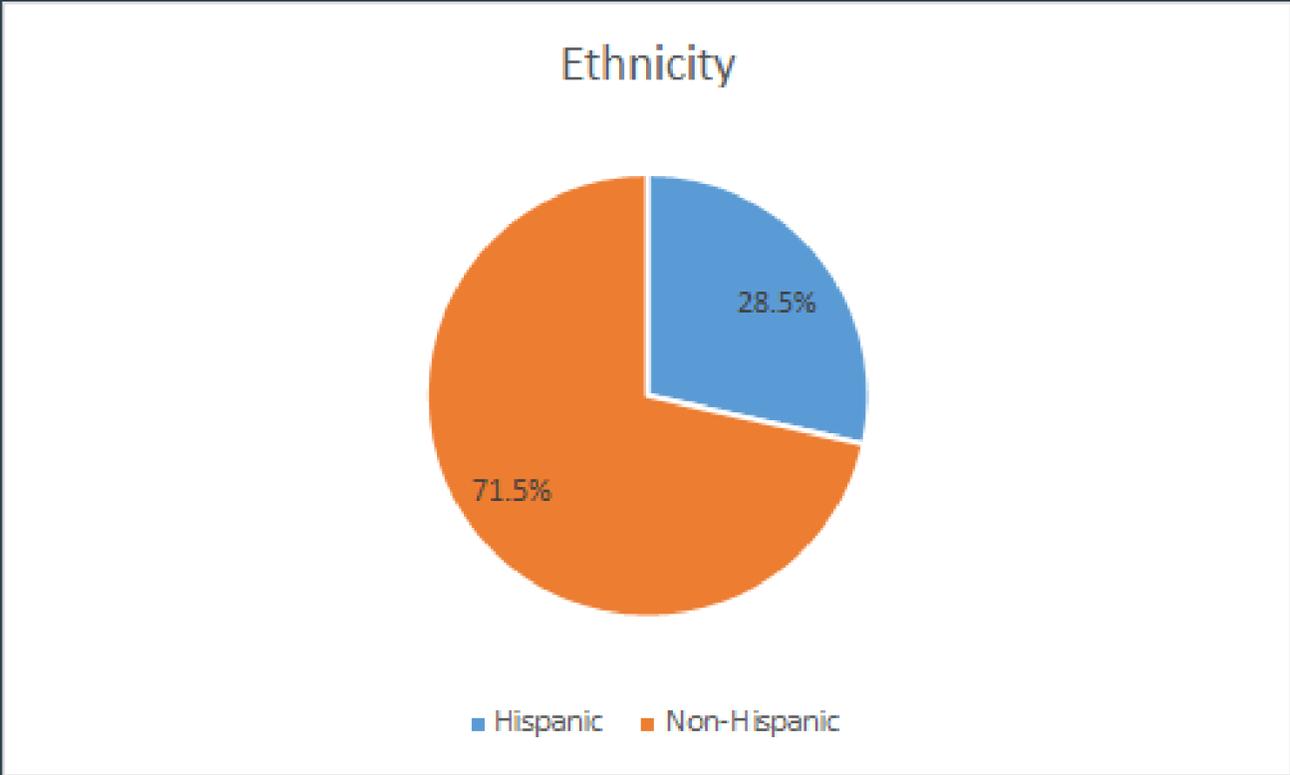
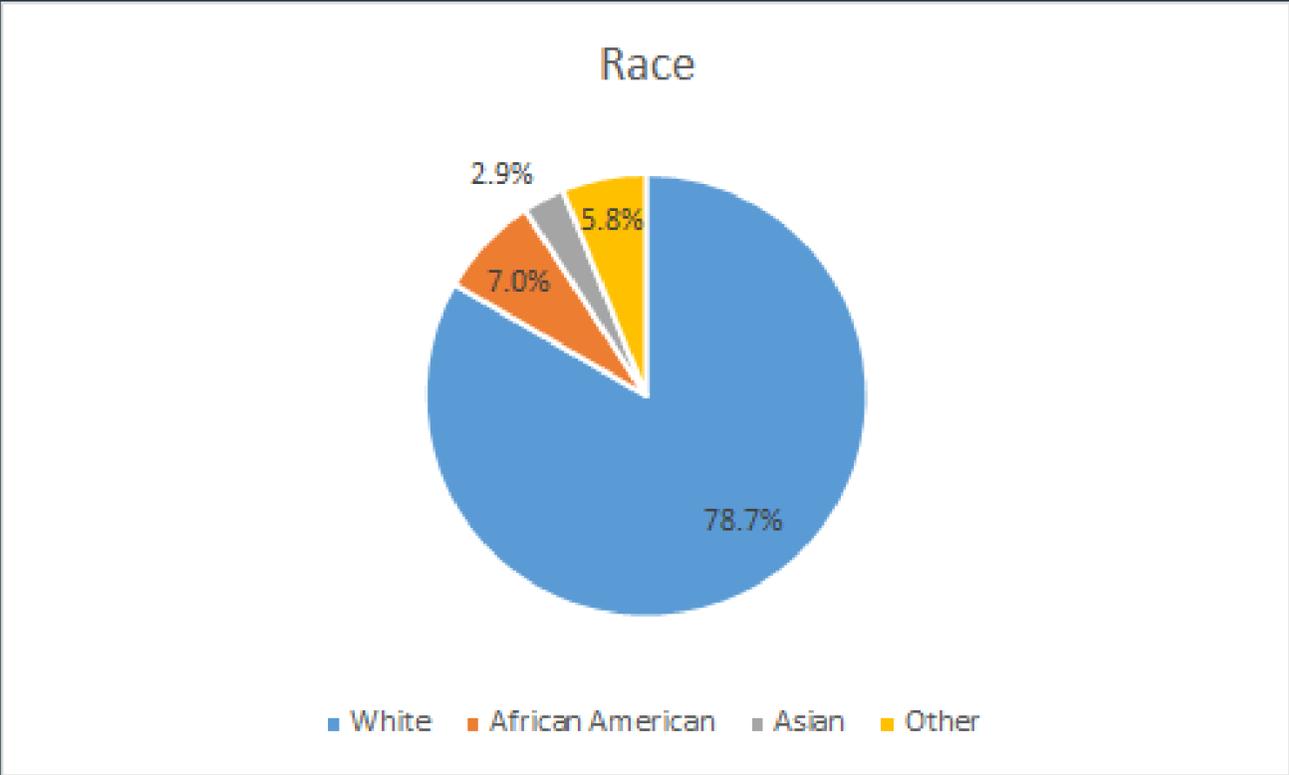


Education



Economics

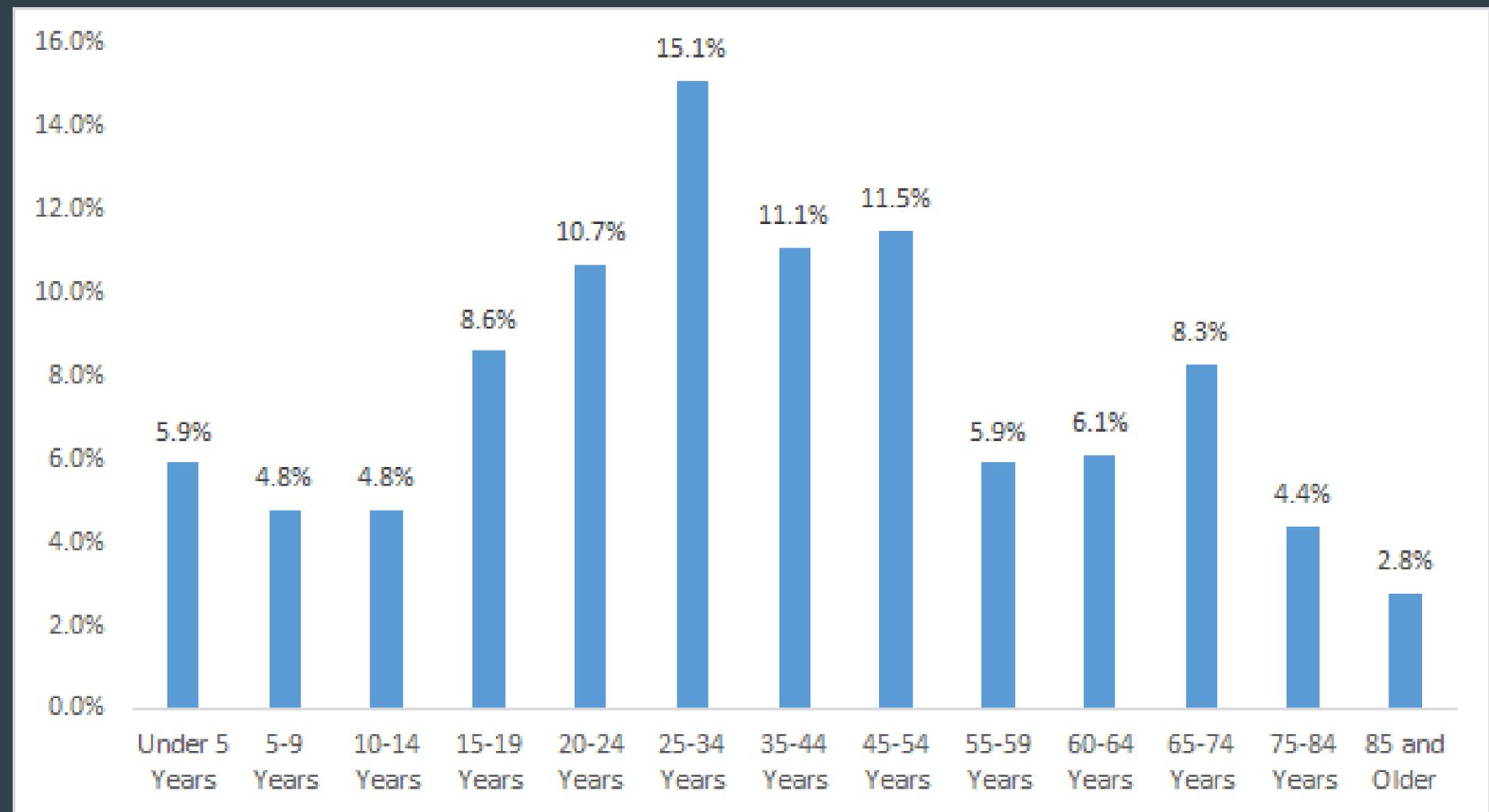
Bethlehem's Population by Race and Ethnicity



Bethlehem's Hispanic population continues to grow, accounting for 28.5% of the City's population.

Source: U.S. Census 2013-17

Bethlehem's Population by Age

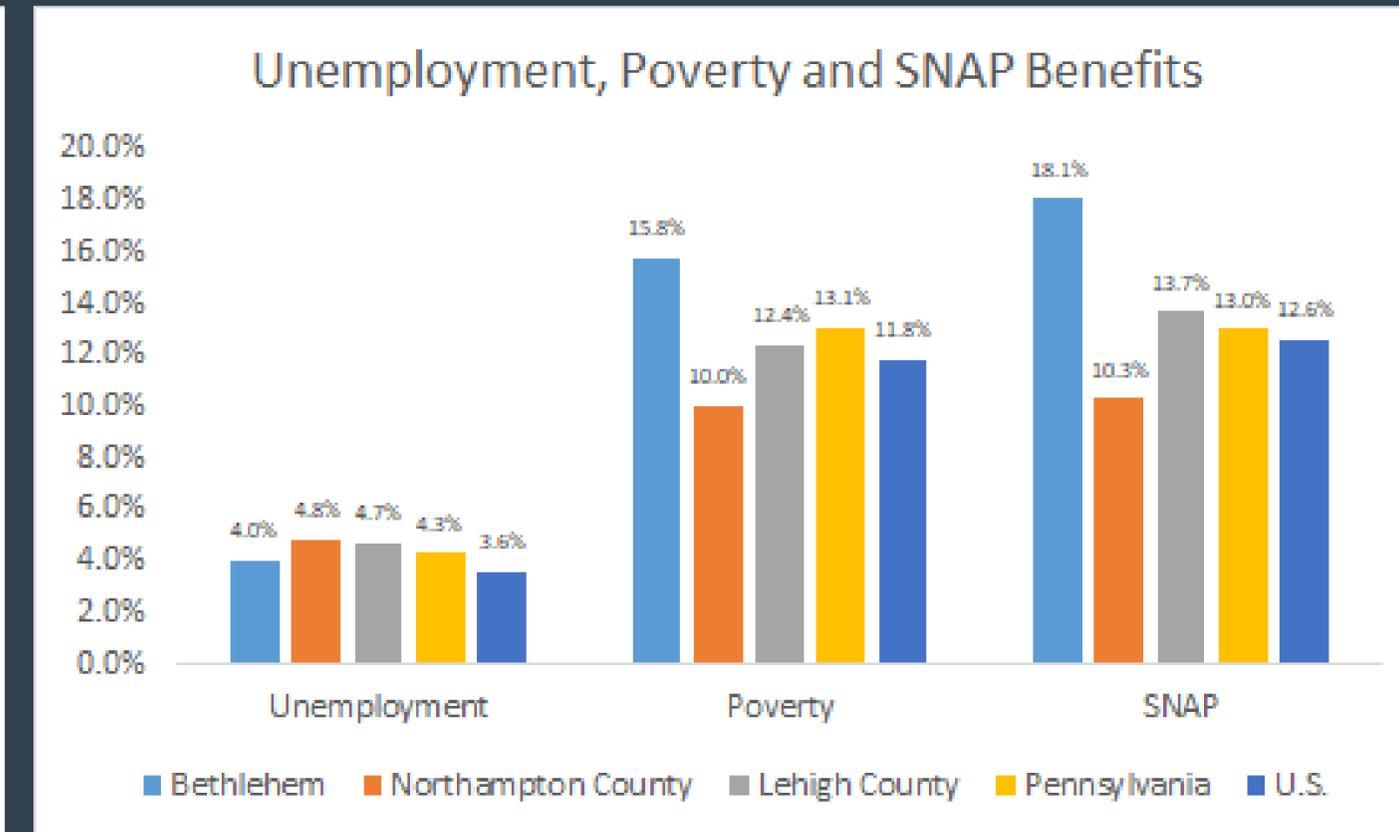
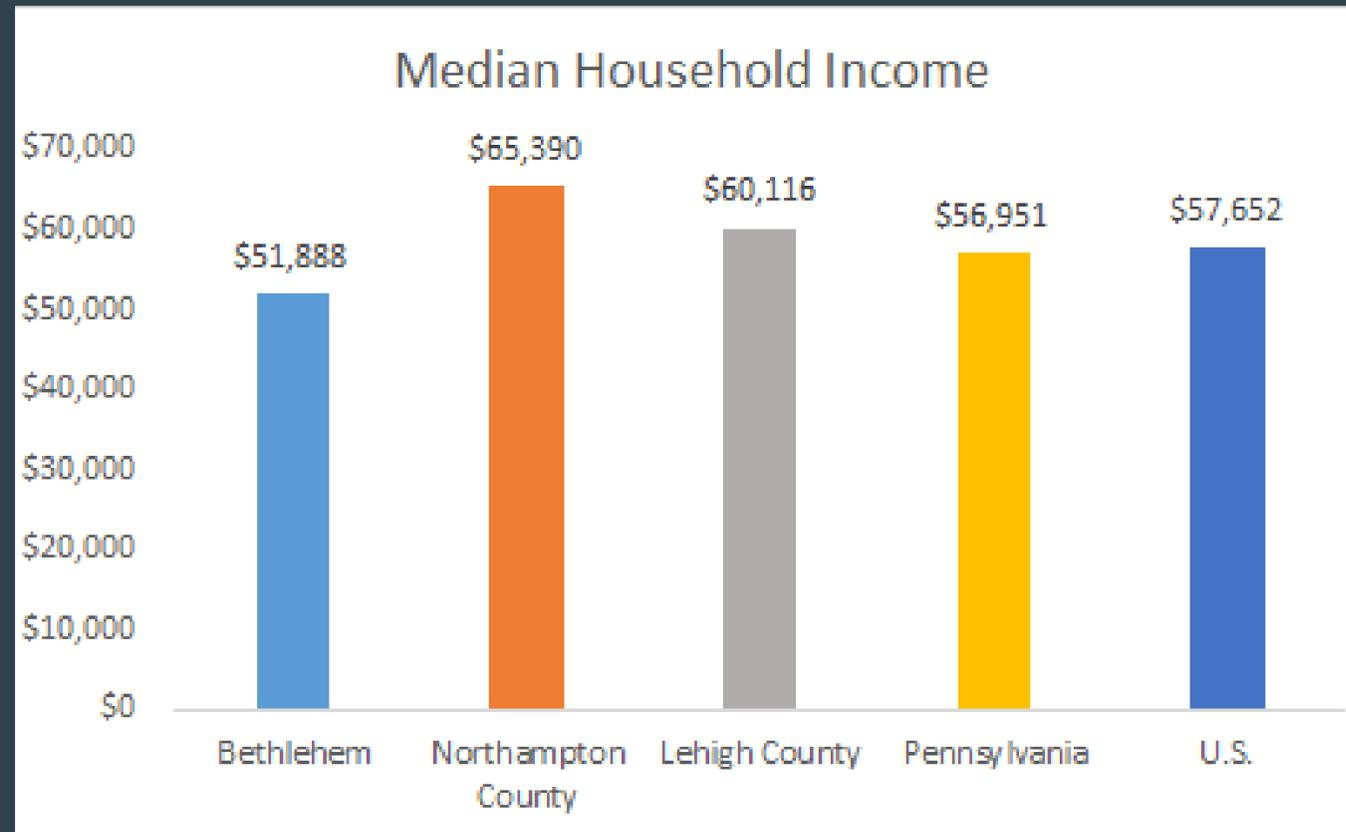


Bethlehem has an aging population, with 27.5% of its residents aged 55 and older. This underscores the importance of ensuring that services are available to meet the needs of this population.

Social Determinants of Health

Bethlehem residents earn less than the county, state and national averages and 15.8% of the population is below the federal poverty level, which is higher than the county, state and national levels but lower than the last community health needs assessment.

POVERTY

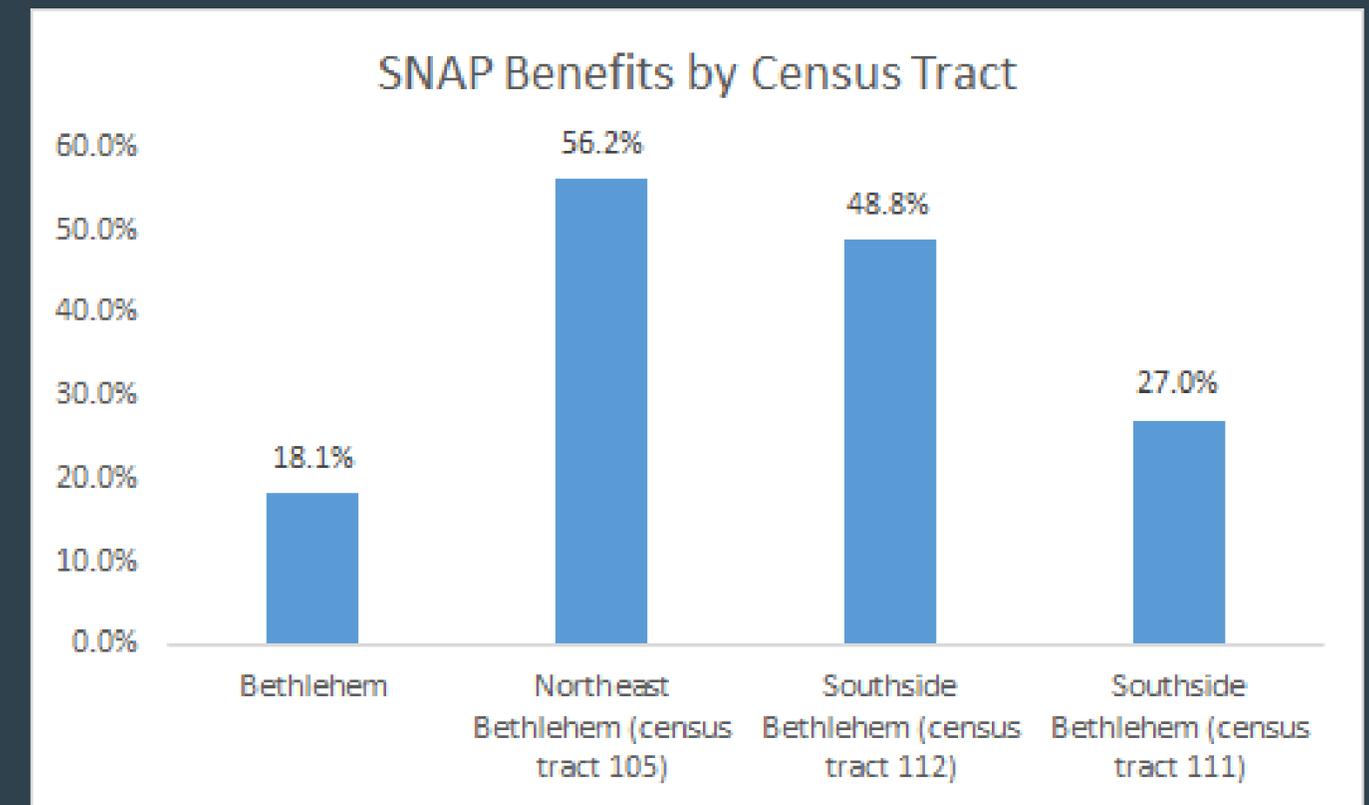
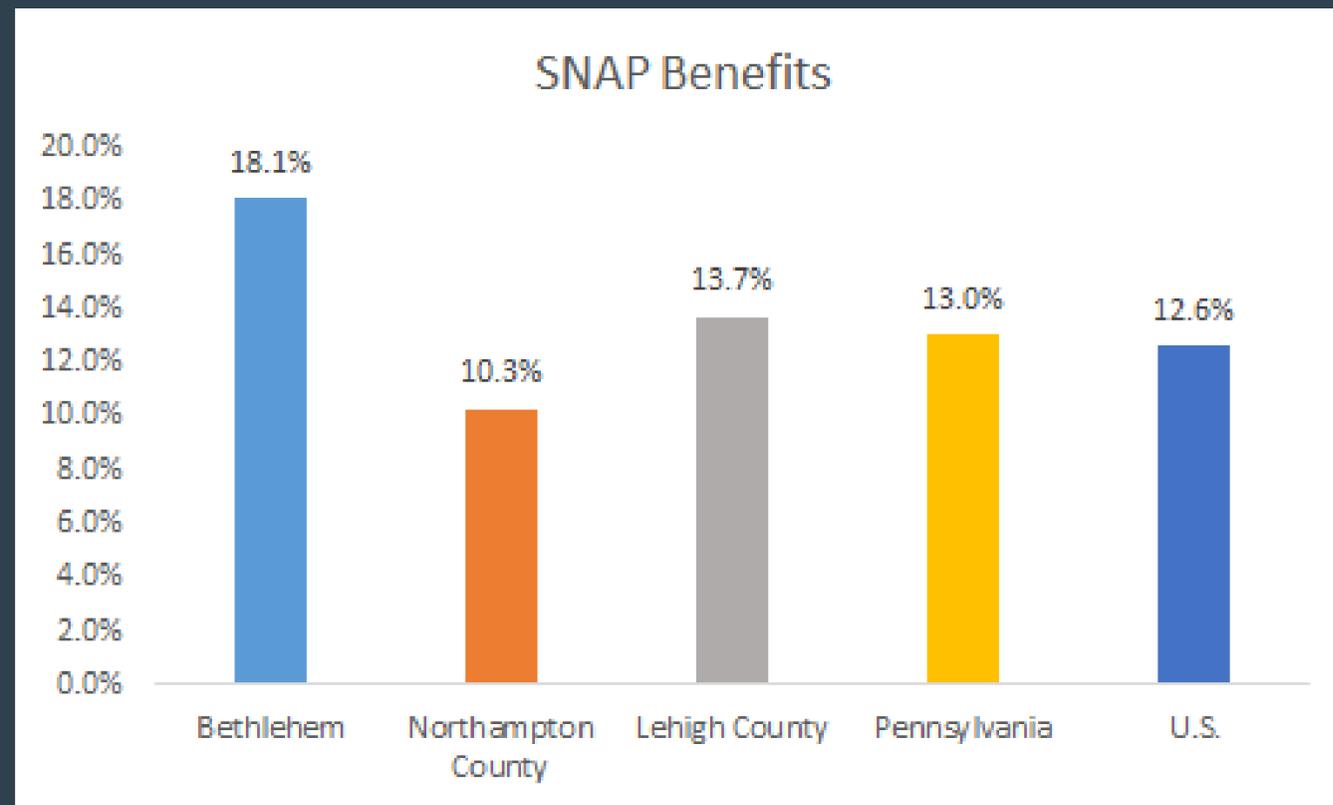


Social Determinants of Health



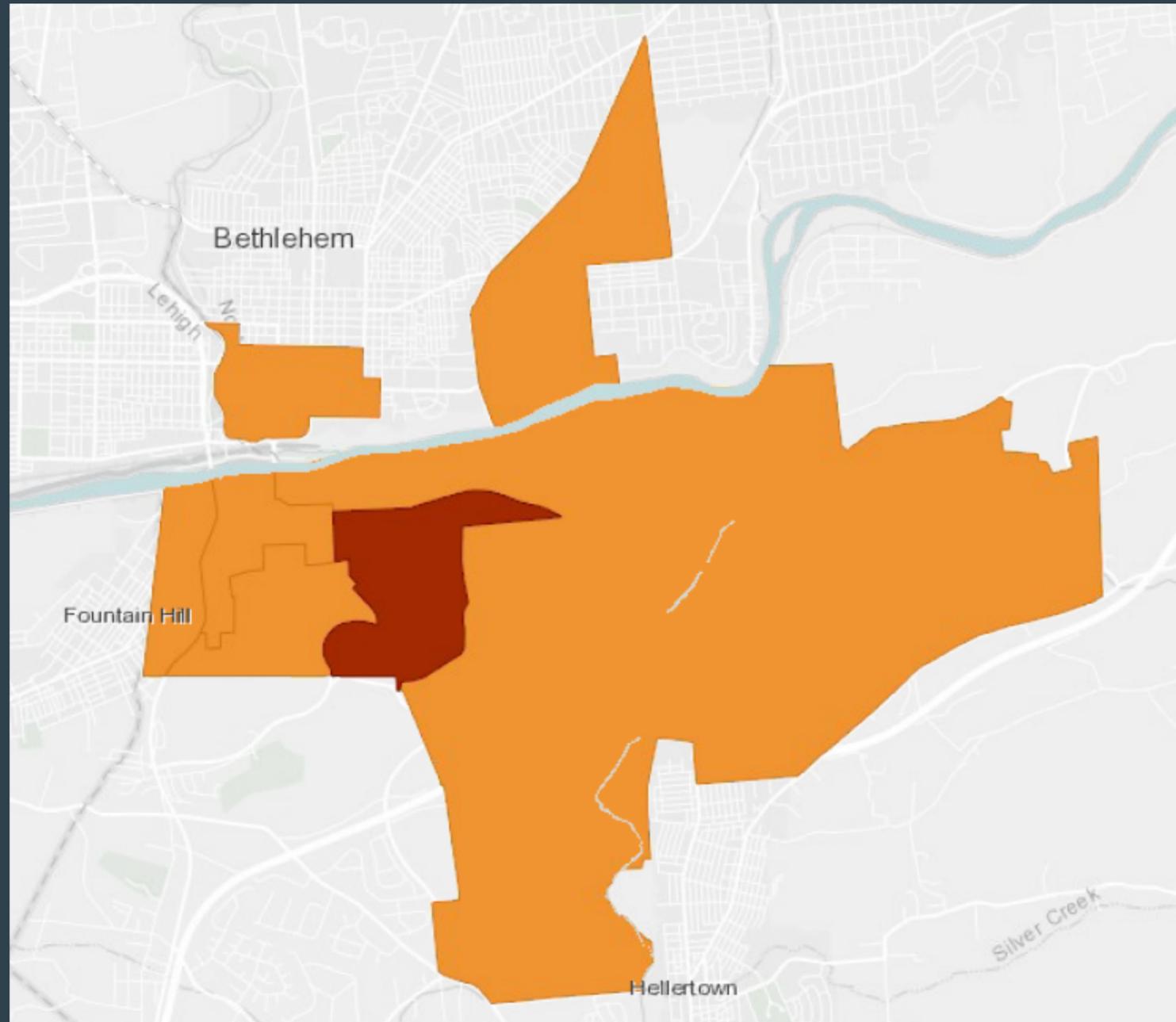
Overall, Bethlehem has 18.1% of households participating in SNAP but certain census tracts have a significant percentage of residents receiving SNAP benefits.

POVERTY



Social Determinants of Health

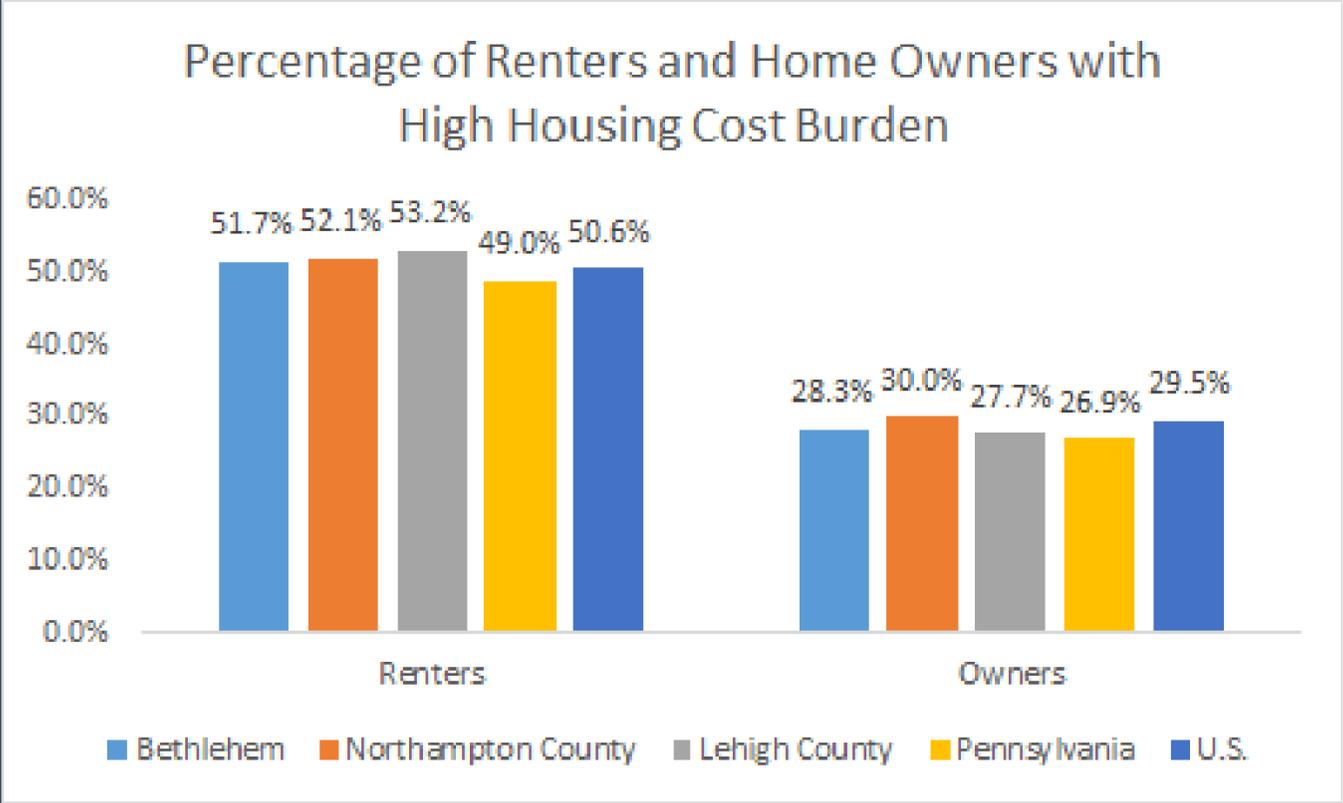
POVERTY: VULNERABLE POPULATIONS FOOTPRINT



The area of the map highlighted in red displays the area in Bethlehem in which more than 20% of the population is below the poverty level.

Social Determinants of Health

HOUSING



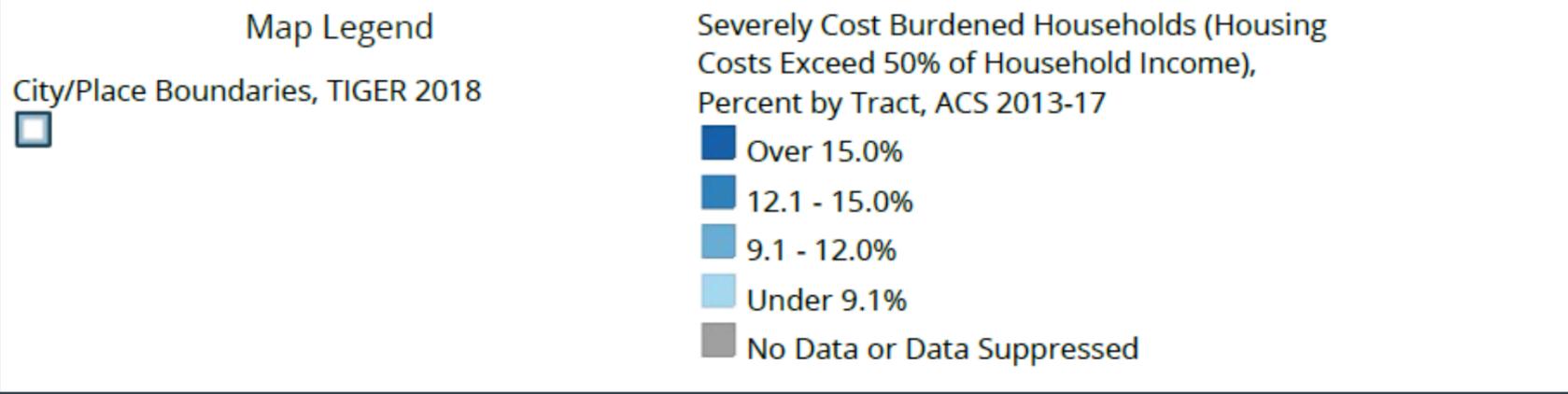
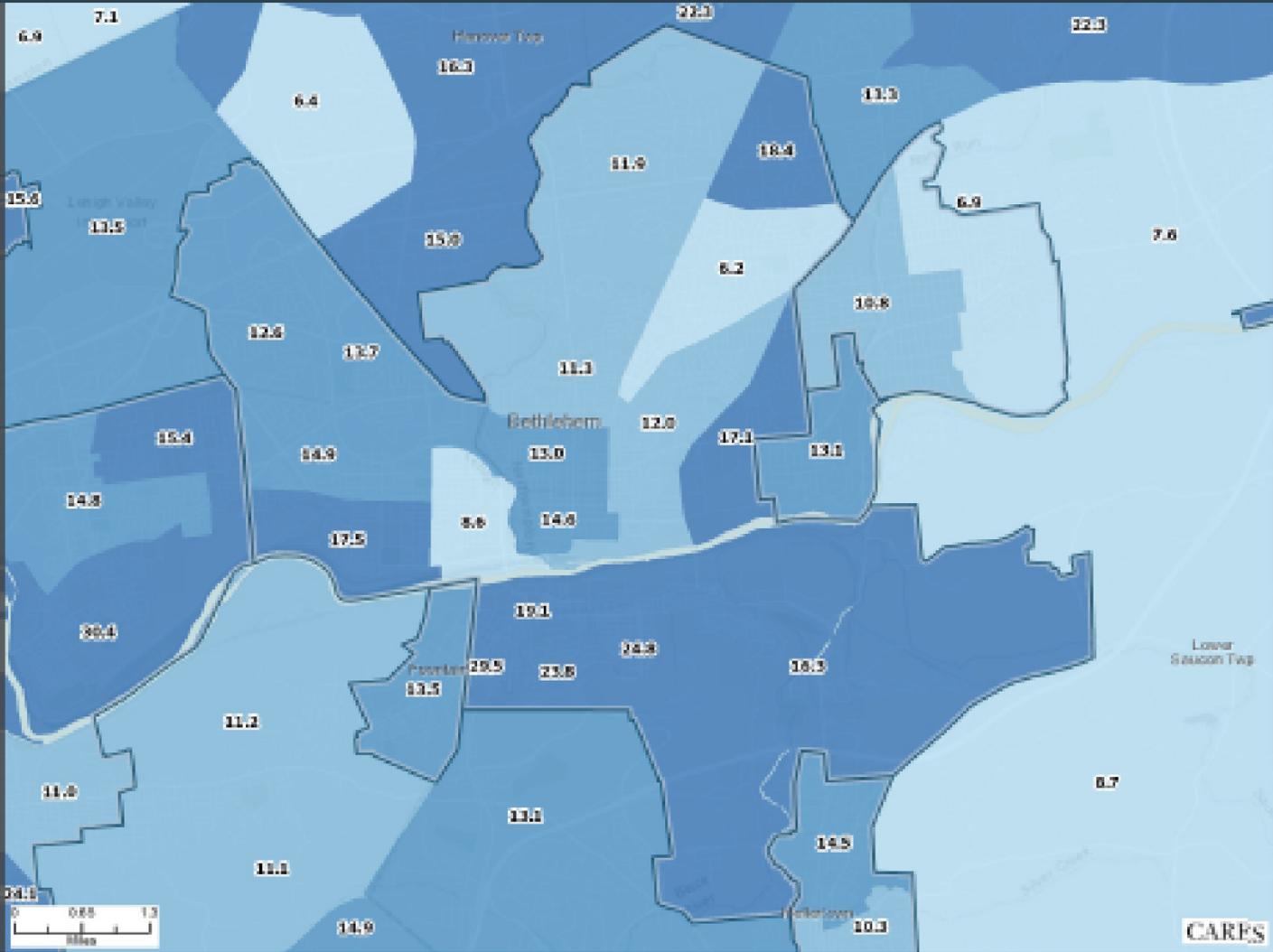
Census Tract	Median Family Income	Cost Burdened Households (2012-16)
Northeast Bethlehem (census tract 105)	\$22,008	45.51%
Southside Bethlehem (census tract 112)	\$27,548	59.22%
Southside Bethlehem (census tract 111)	\$29,375	46%

The U.S. Department of Housing and Urban Development (HUD) considers any household paying more than 30% of their monthly income towards housing as "cost burdened." Being cost burdened means these households may have difficulty paying for necessities such as food, clothing, transportation and medical care.

Source: U.S. Census 2013-17

Social Determinants of Health

HOUSING

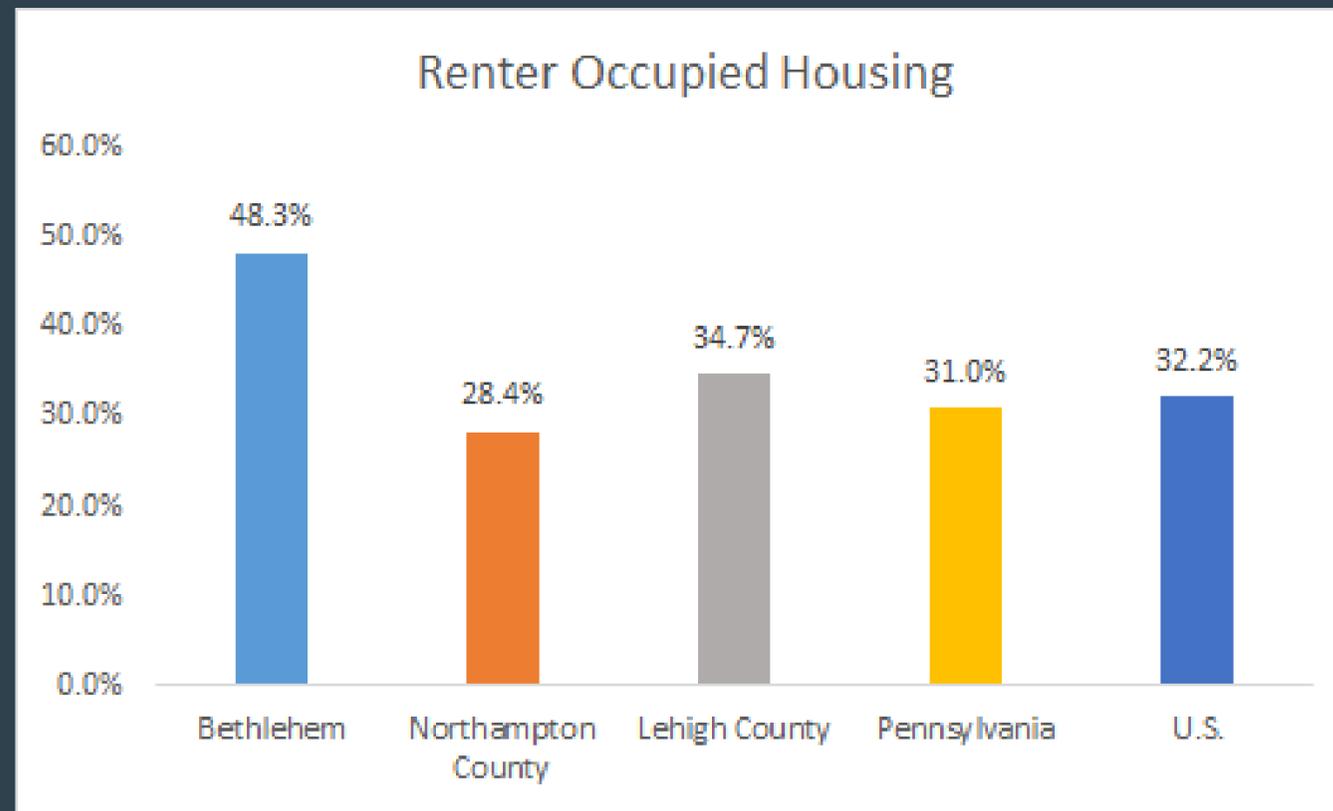


This map displays the percentage of households that are severely housing cost burdened (paying more than 50% of income for housing) by census tract.

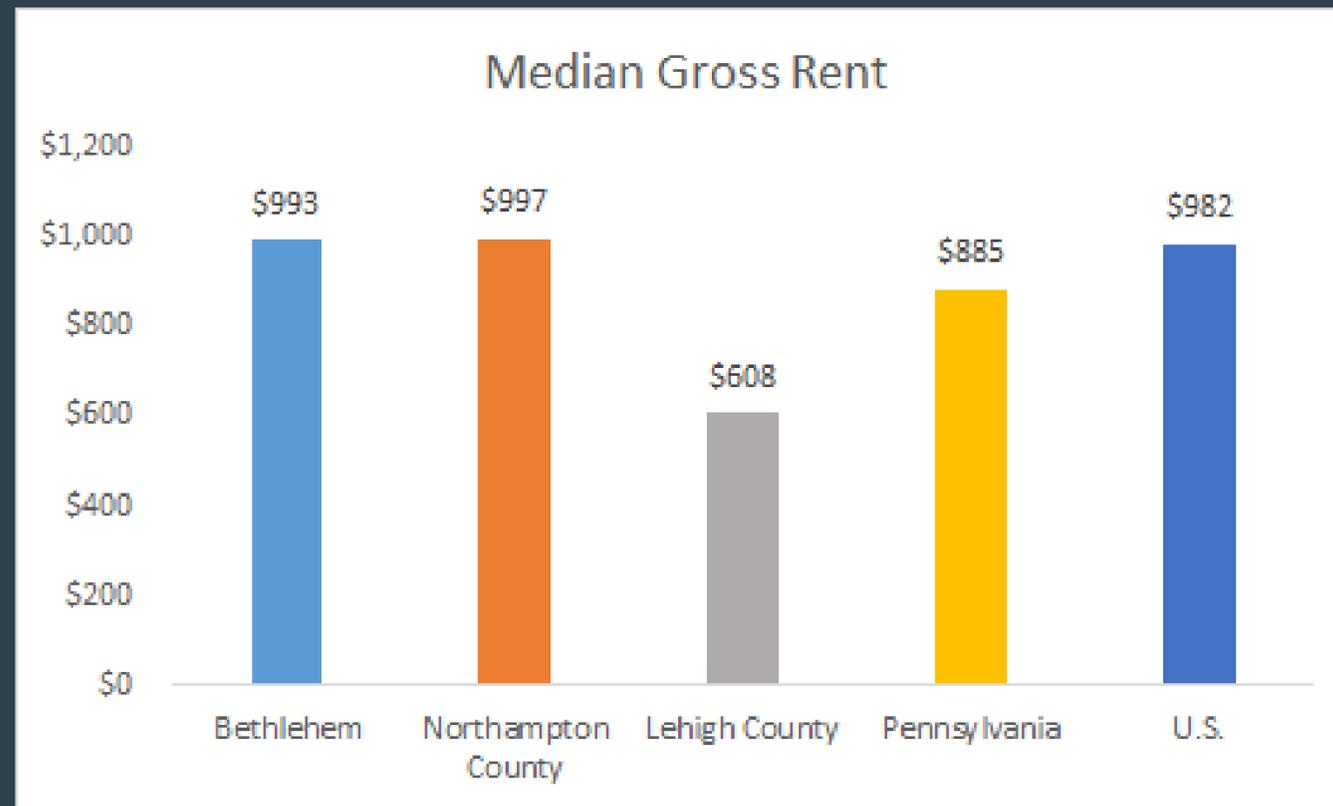
Source: U.S. Census 2013-17

Social Determinants of Health

HOUSING



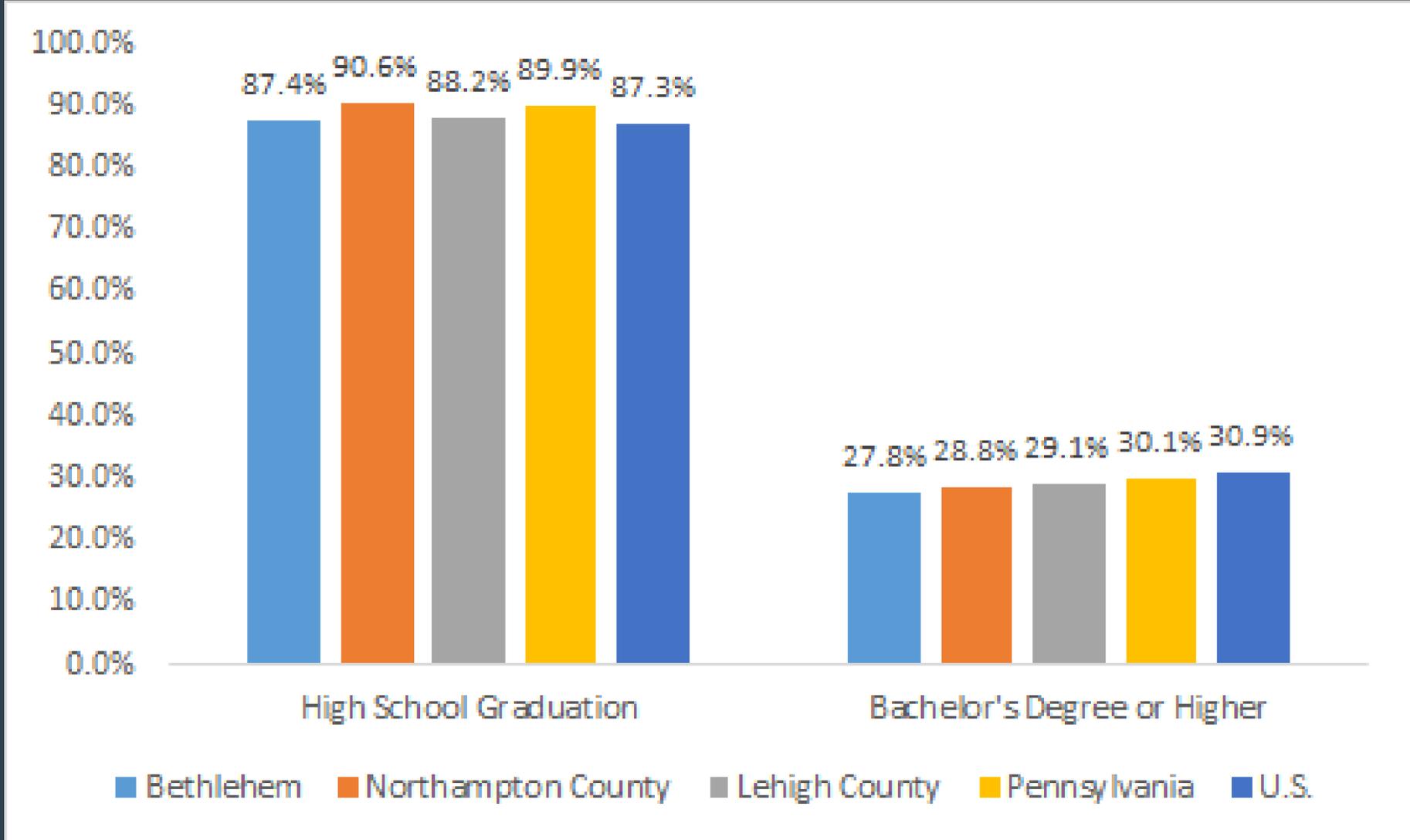
Almost half of Bethlehem's population lives in rental housing, which is much higher than the county, state and U.S.



Each focus group mentioned the need for affordable housing. Some noted that the gentrification of some areas in Bethlehem was making it more difficult to find affordable and quality housing.

Social Determinants of Health

EDUCATION



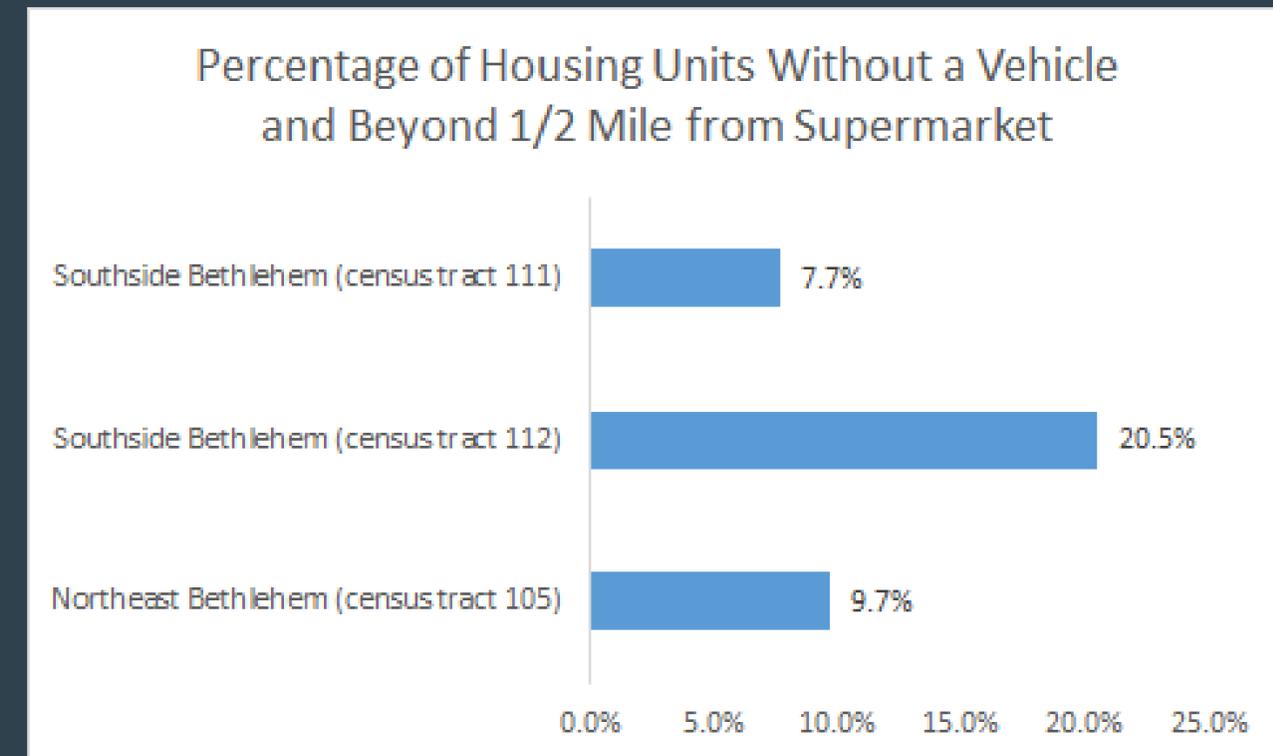
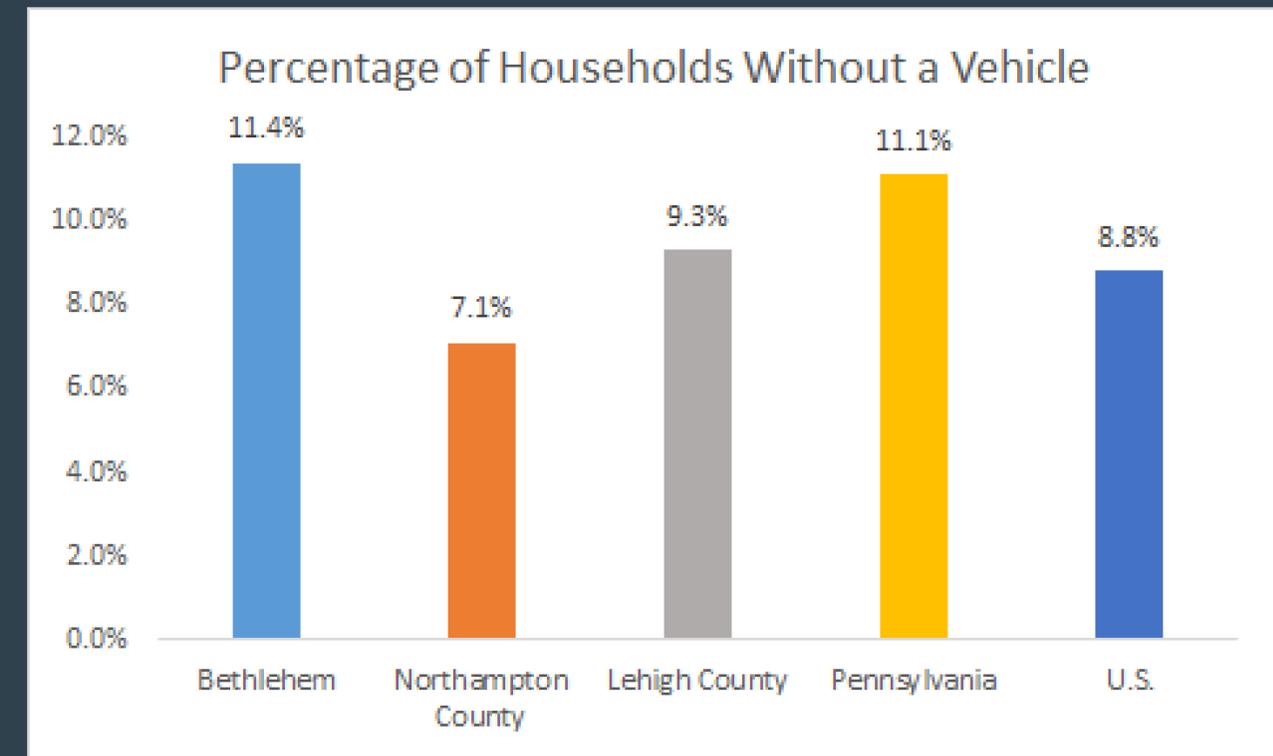
Education is an important social determinant of health and directly impacts other factors that contribute to health such as housing and employment. Bethlehem, both counties, Pennsylvania and the U.S. all achieved the goal set by Healthy People 2020 for high school graduation rates (87%).

Source U.S. Census 2013-17

Social Determinants of Health

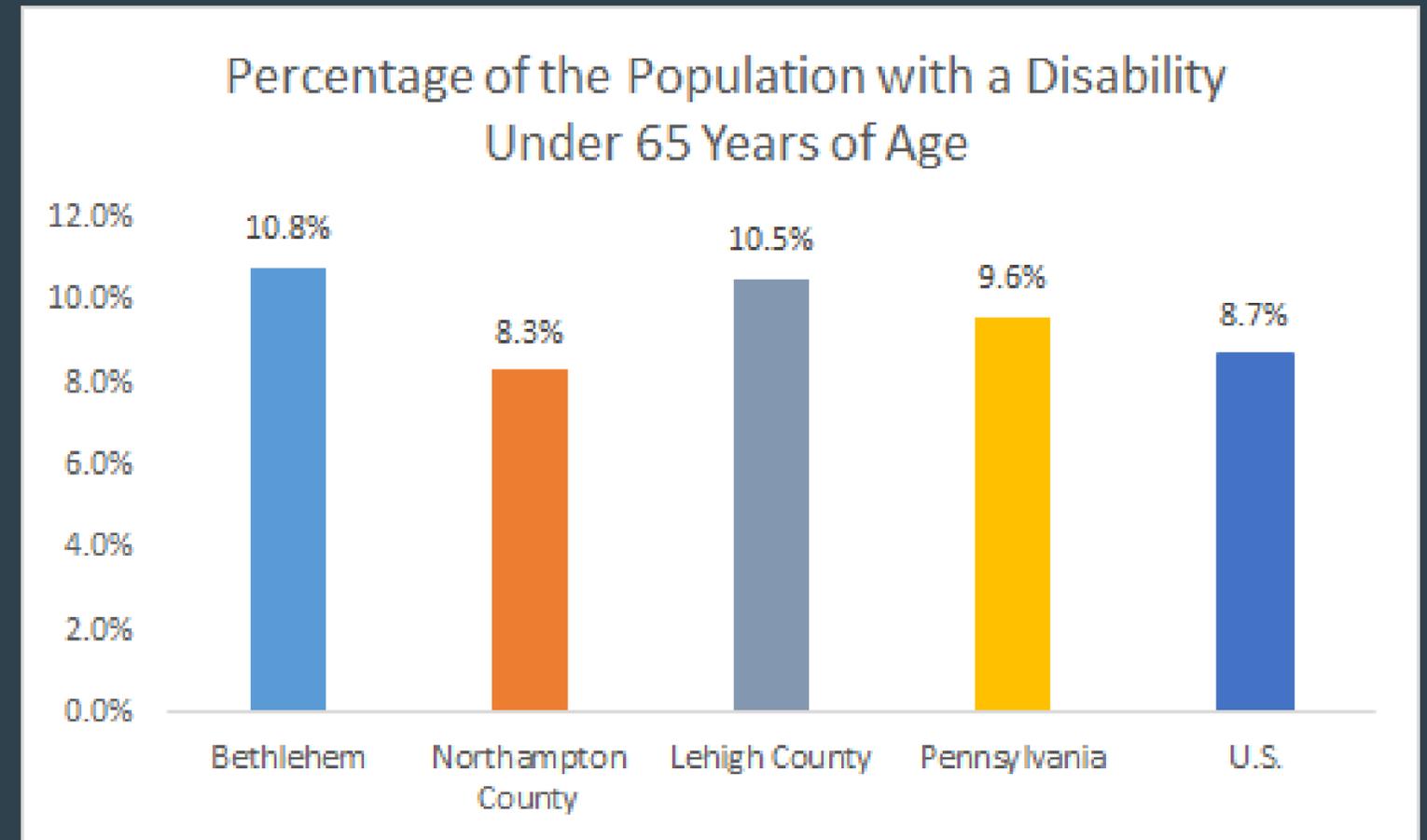
TRANSPORTATION

Transportation plays a critical role in access to vital needs and services such as food and medical care. Individuals are less likely to access needed services when they face transportation difficulties. The public transportation system was noted as a deficiency among focus group participants. Lack of grocery stores in Bethlehem was also discussed as a gap.



Social Determinants of Health

DISABILITIES





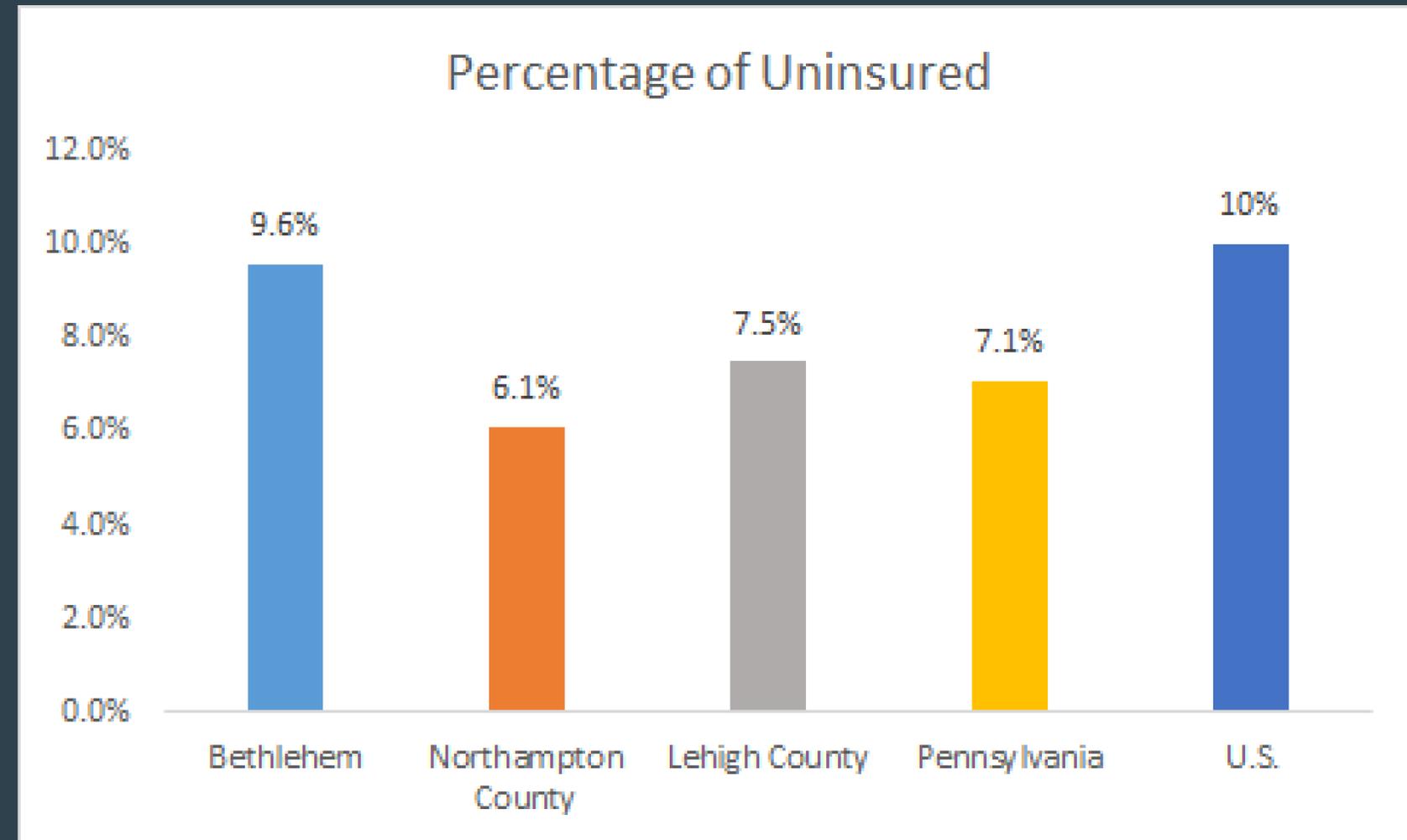
Violent crime offenses include murder, aggravated assault, robbery and forcible rape.

Bethlehem had 376.31 violent crimes per 100,000 population, compared to an average of 513.5 across Dashboard cities in 2017.

Source: Uniform Crime Reporting, FBI and City of Bethlehem Police Department

Social Determinants of Health

INSURANCE



Lack of health insurance poses a significant barrier to accessing health care. It is important to note that, for comparative purposes, the data used for the uninsured was from the Census from 2013-17. When looking at data that was recently collected through St. Luke's University Health Network, the Bethlehem uninsured rate was 4%.

Causes of Death

Causes of Death	Bethlehem	Northampton			
		County	Lehigh County	PA	US
Heart Disease	198.5	148.7	150.3	176.3	165
Cancer	187.7	162.5	156.3	165.9	152.5
Non-Transport	52.7	39.2	41.1	44.4	NA
Stroke	38.8	28.8	30	37	37.6
Chronic Lower Respiratory Disease (CLRD)	34.1	30	31.6	37.6	40.9
Diabetes	26.8	23.6	20.8	21.5	21.5
Alzheimer's	24.3	16.2	25.4	20	31
Influenza/Pneumonia	15	11.6	10.5	14.8	14.3
Nephritis	14.5	12.3	13	16	13
Suicide	14.3	16.2	15.1	14	14
Septicemia	13.1	10.1	12.8	13.4	NA
Motor Vehicle Accidents	6.7	7.6	7.8	9.5	11.4

Bethlehem still struggles with deaths due to chronic diseases. Bethlehem is above the county, state and national rates for deaths due to heart disease, cancer, non-transport accidents, stroke, and diabetes.

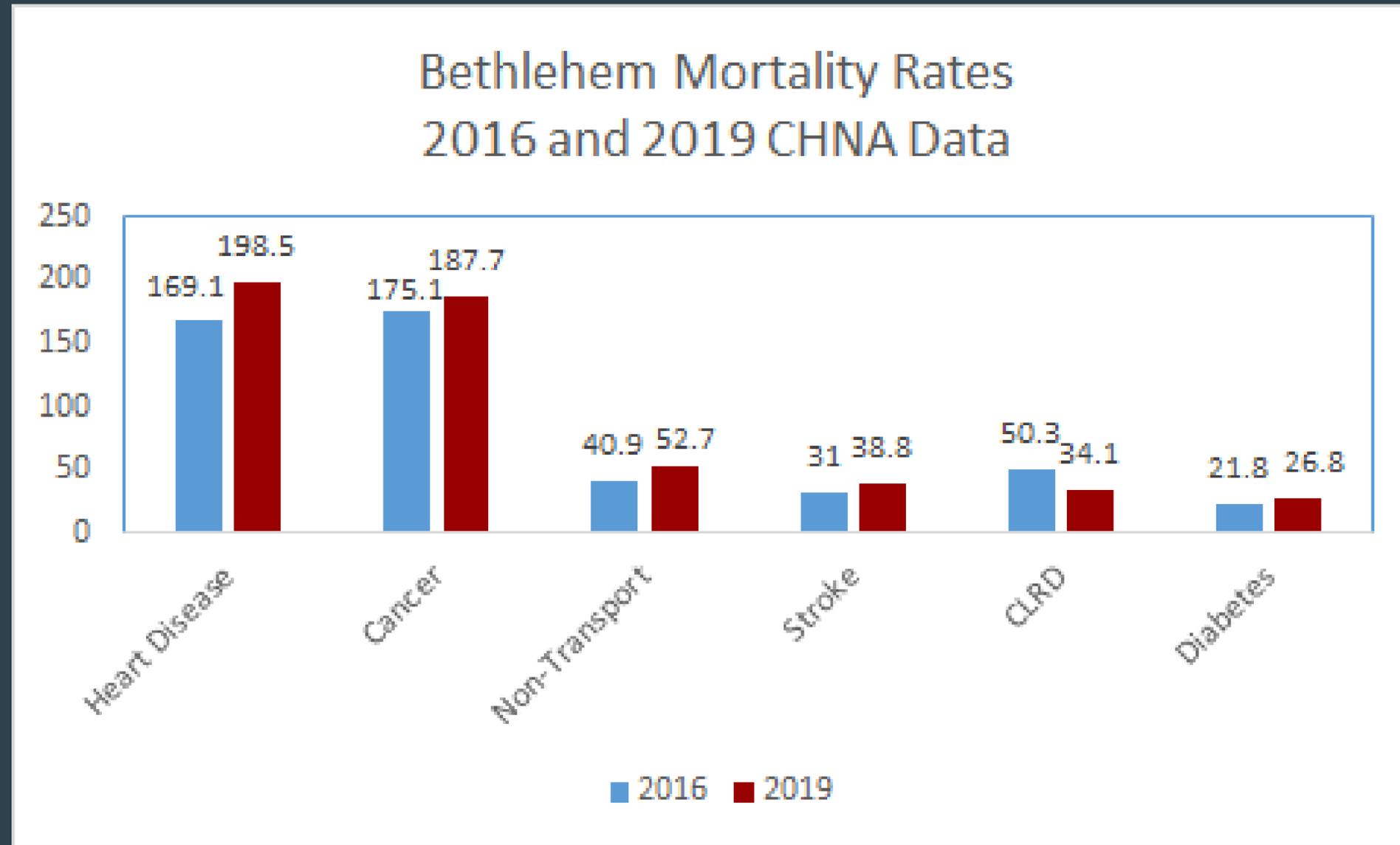
Source: Pennsylvania Department of Health and CDC 2013-17

Age adjusted rates per 100,000

NA: Data Not Available for the same time period

*Suicide data is also included in the non-transport accident deaths

Causes of Death



Death rates from heart disease, cancer, non-transport accidents, stroke and diabetes increased from the last community health needs assessment.

Source: Pennsylvania Department of Health and CDC 2013-17

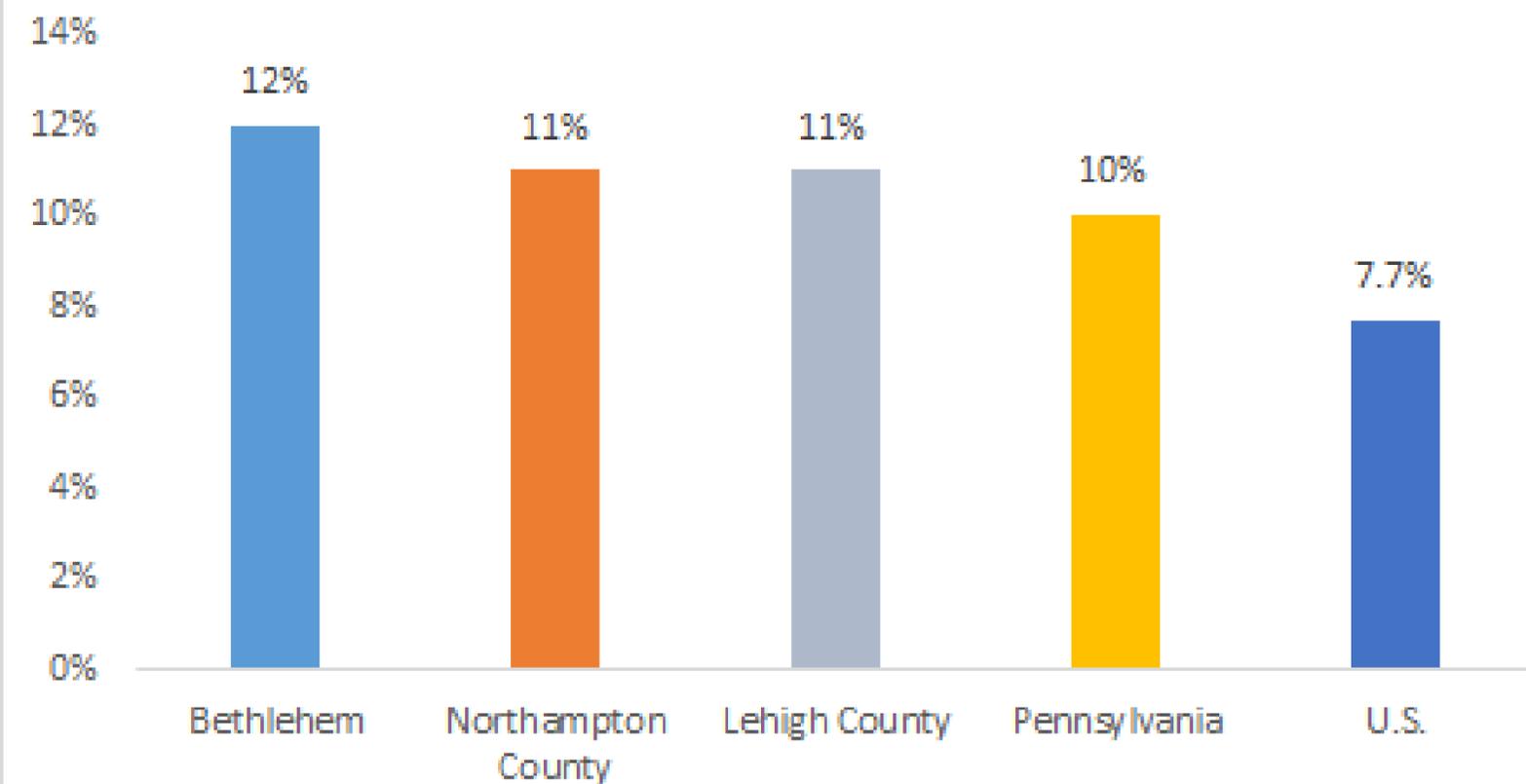
Age adjusted rates per 100,000

NA: Data Not Available for the same time period

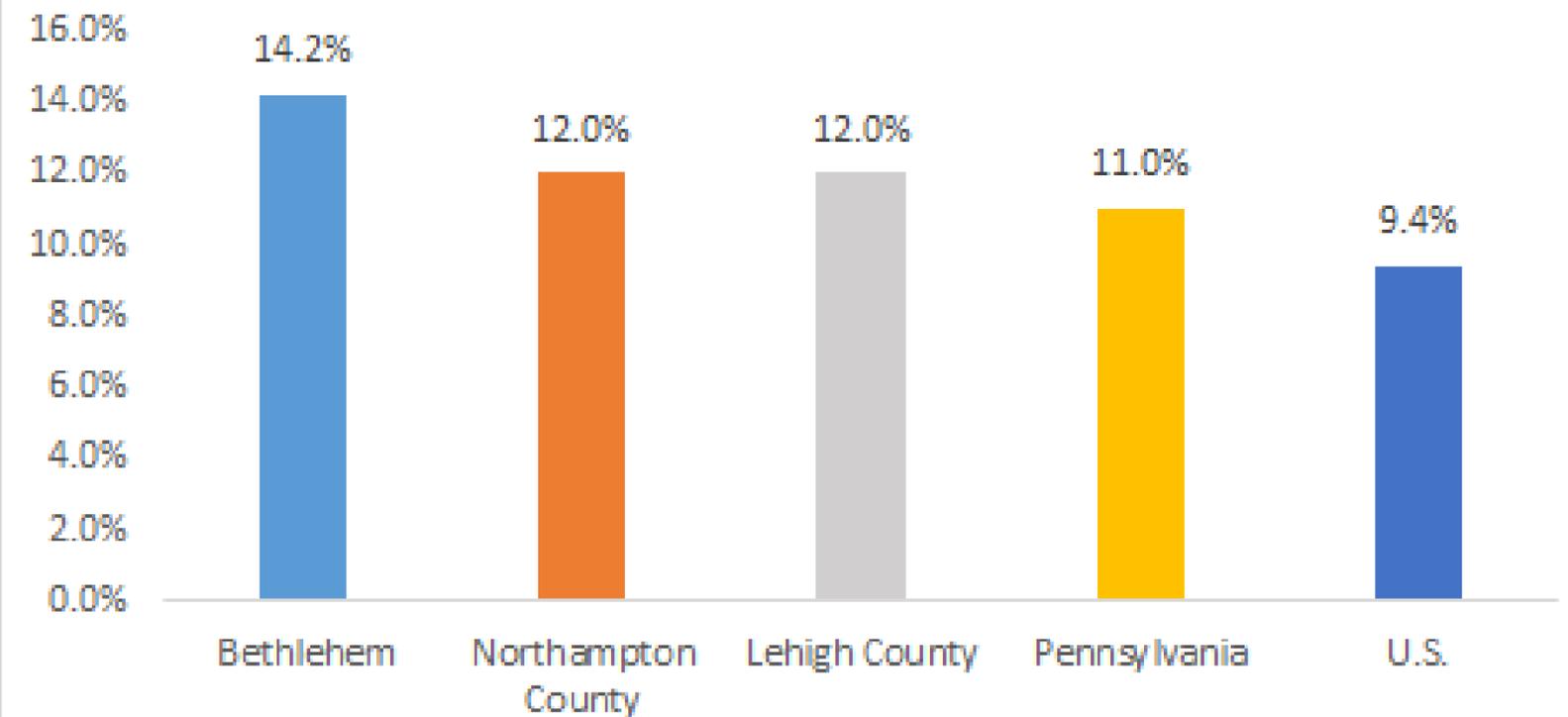
*Suicide data is also included in the non-transport accident deaths

Chronic Diseases

Percentage of Population Diagnosed with Asthma



Percentage of Population Diagnosed with Diabetes



Bethlehem has a higher prevalence of diabetes and asthma than the county, state and national averages, however, the percentage of residents reporting these diseases has decreased since the last community health needs assessment.

Communicable Diseases

Communicable Disease	Bethlehem	Northampton			
		County	Lehigh County	PA	US
Chlamydia	453.7	365.8	453.1	434.6	528.8
Gonorrhea	85.9	91.7	81.4	111.1	171.9
Syphilis	12.3	2.3	2.8	5.7	9.5
HIV	6.59	5.9	8.2	8.4	NA

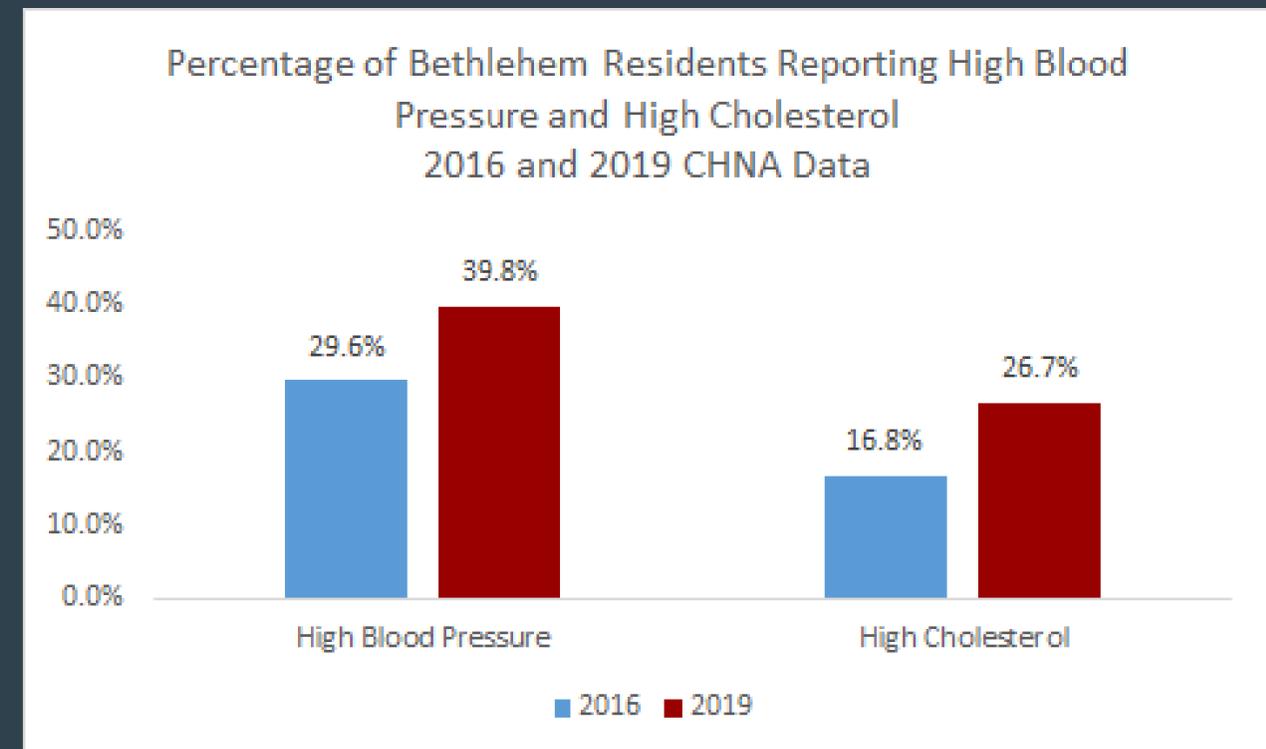
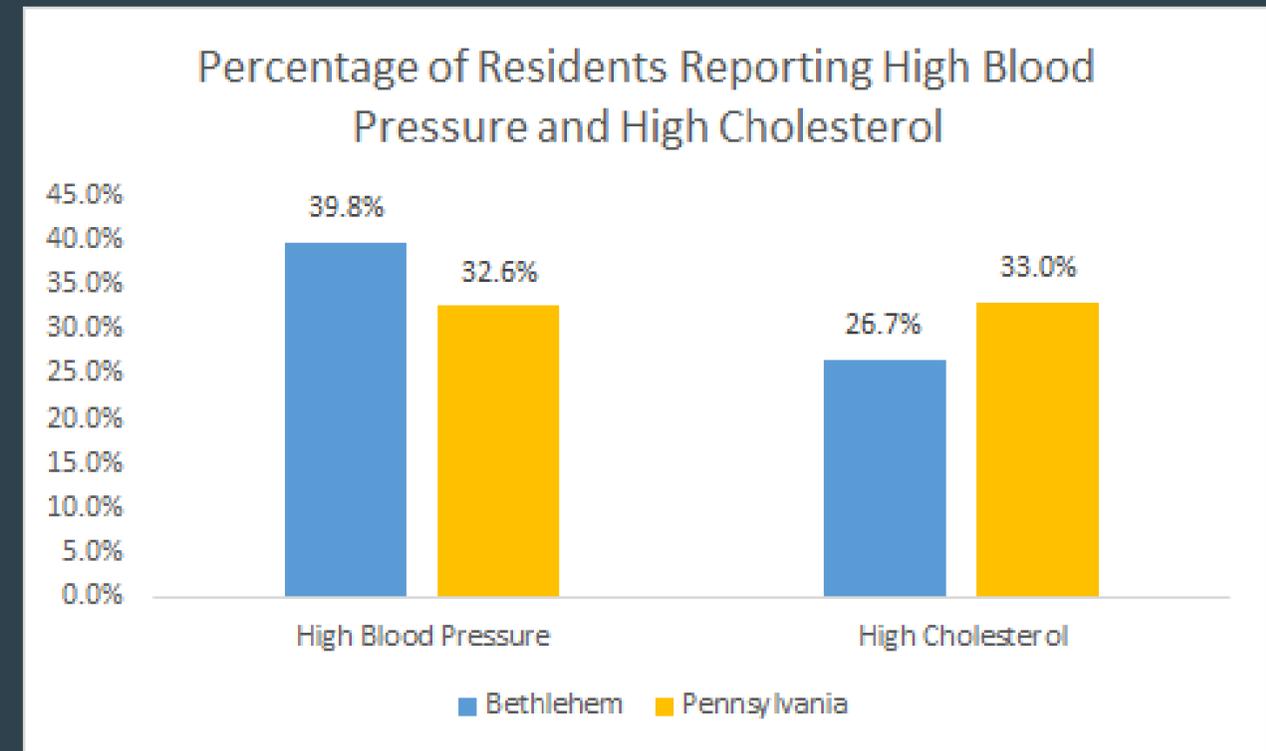
According to the CDC, combined cases of syphilis, gonorrhea, and chlamydia reached an all-time high in the United States in 2018. Data suggests that multiple factors are contributing to the overall increase, including drug use, stigma, decreased condom use among vulnerable groups, and cuts to STD programs at the state and local level. In Bethlehem, chlamydia increased almost 3% and gonorrhea increased by 28% from the last community health needs assessment.

Health Behaviors



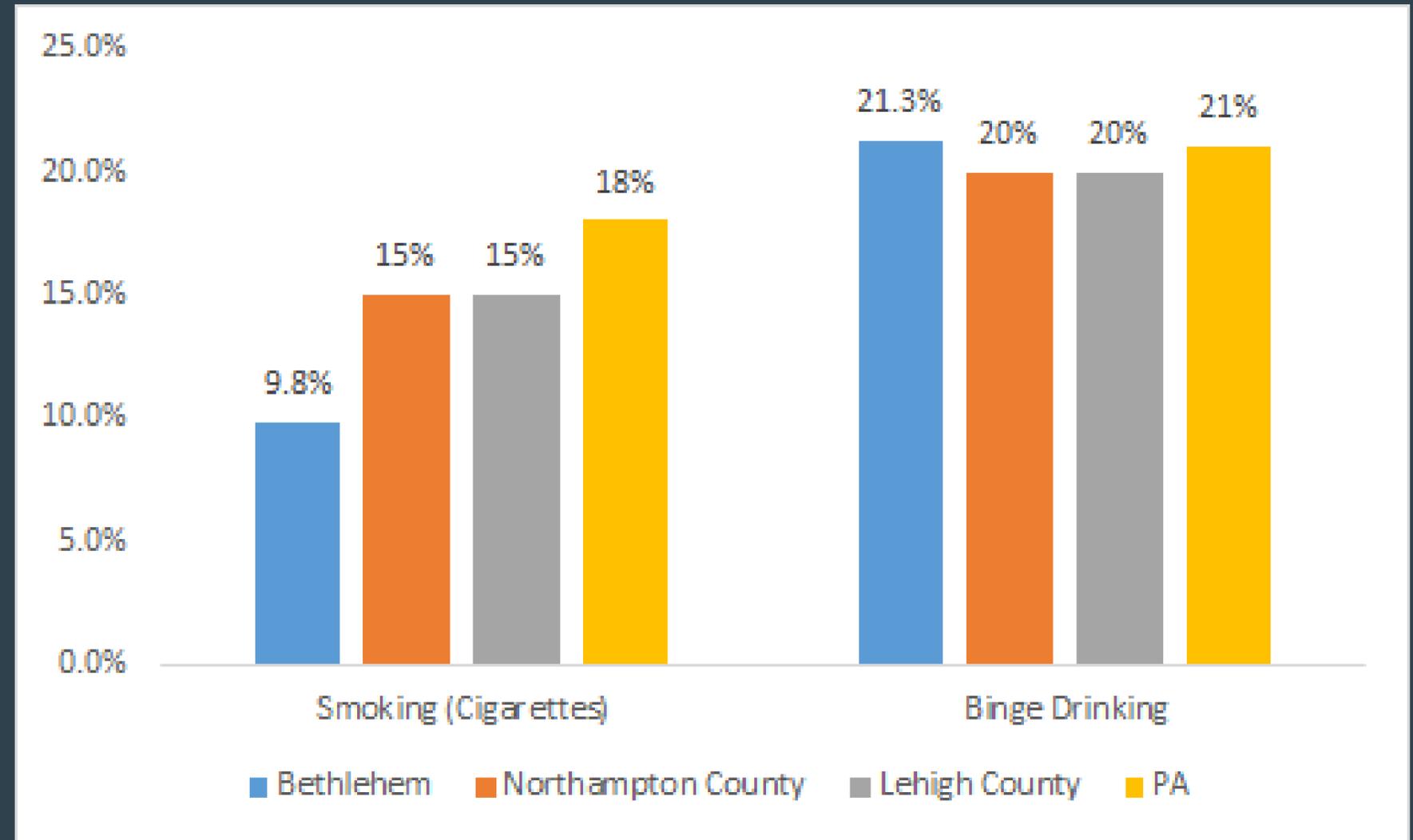
When it comes to heart health, cholesterol and blood pressure numbers count. High cholesterol, especially when combined with high blood pressure, is a major risk factor for heart disease, heart attacks and stroke. Bethlehem residents reported increased numbers of high blood pressure and high cholesterol compared to the last community health needs assessment.

Source: St. Luke's University Health Network 2019



Health Behaviors

SMOKING AND ALCOHOL



Cigarette smoking rates continue to decrease both nationally and locally. A total of 17% of residents reported smoking cigarettes during the last community health needs assessment compared to 9.8% currently. Unfortunately, e-cigarette use is increasing, especially among younger populations.

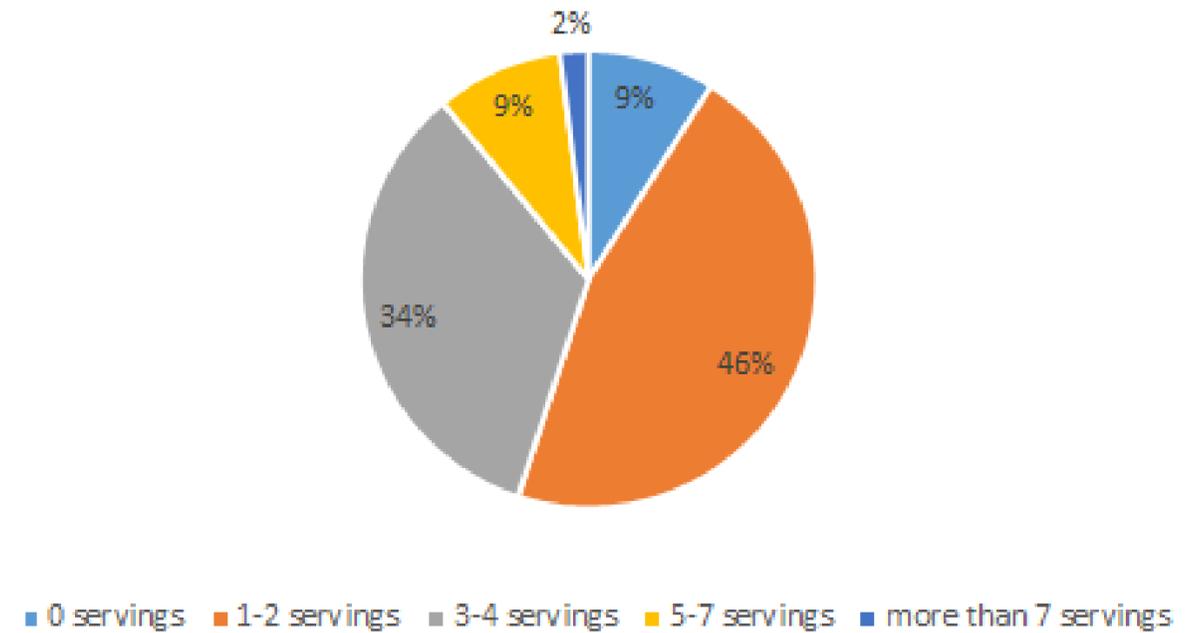


Health Behaviors

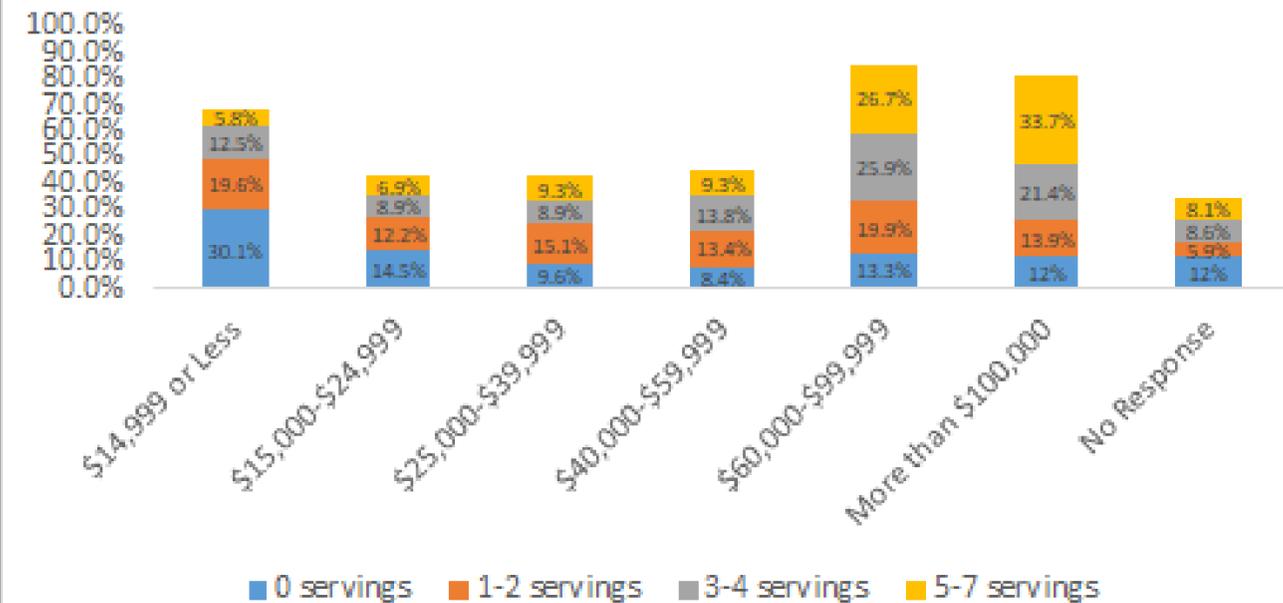
NUTRITION

Results from this community health needs assessment are comparable to the last community health needs assessment in which 11% of survey respondents reported eating 5 or more servings of fruits and vegetables daily.

Daily Servings of Fruits and Vegetables



Fruit and Vegetable Consumption by Household Income

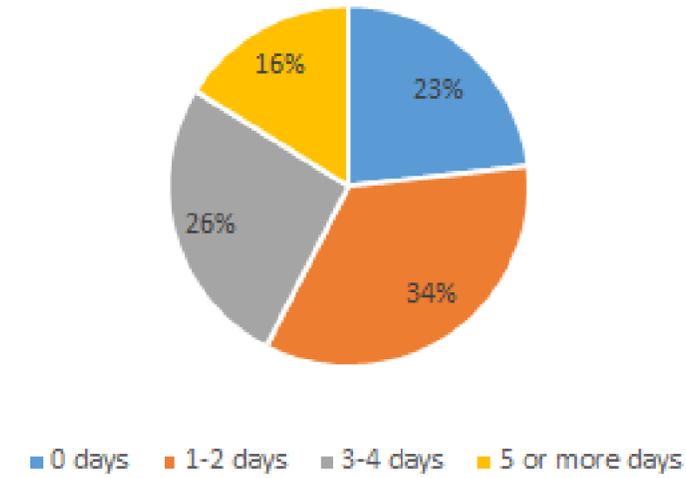




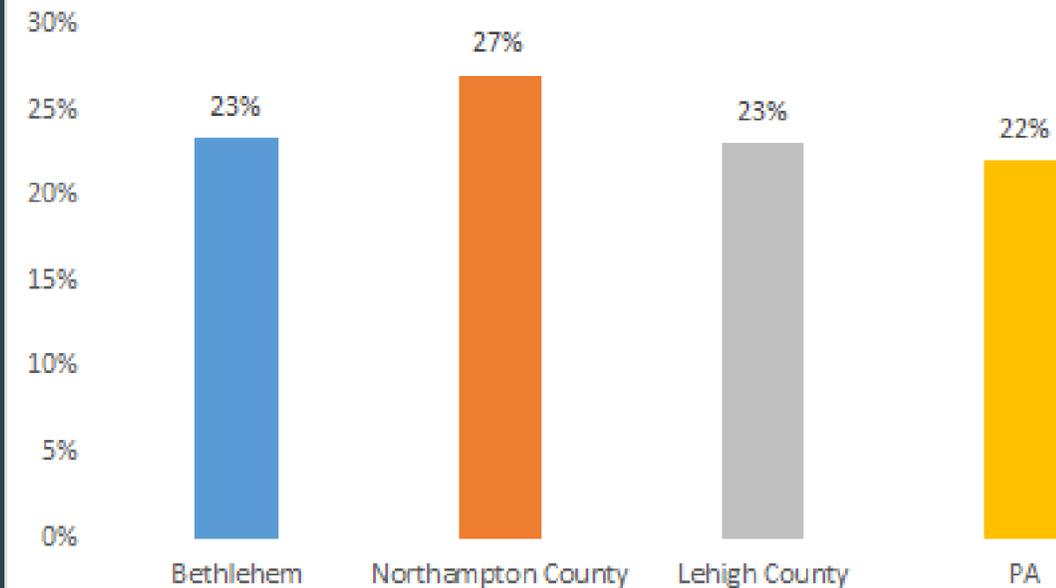
Health Behaviors

PHYSICAL ACTIVITY

Percentage of Bethlehem Residents Engaging in Physical Activity



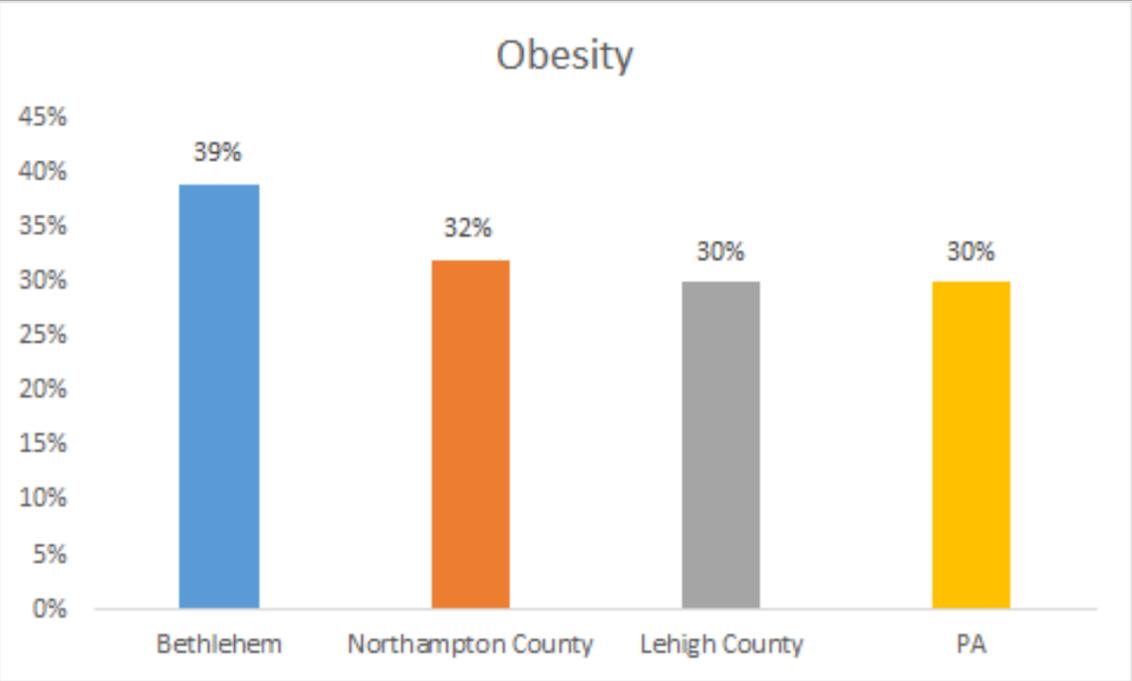
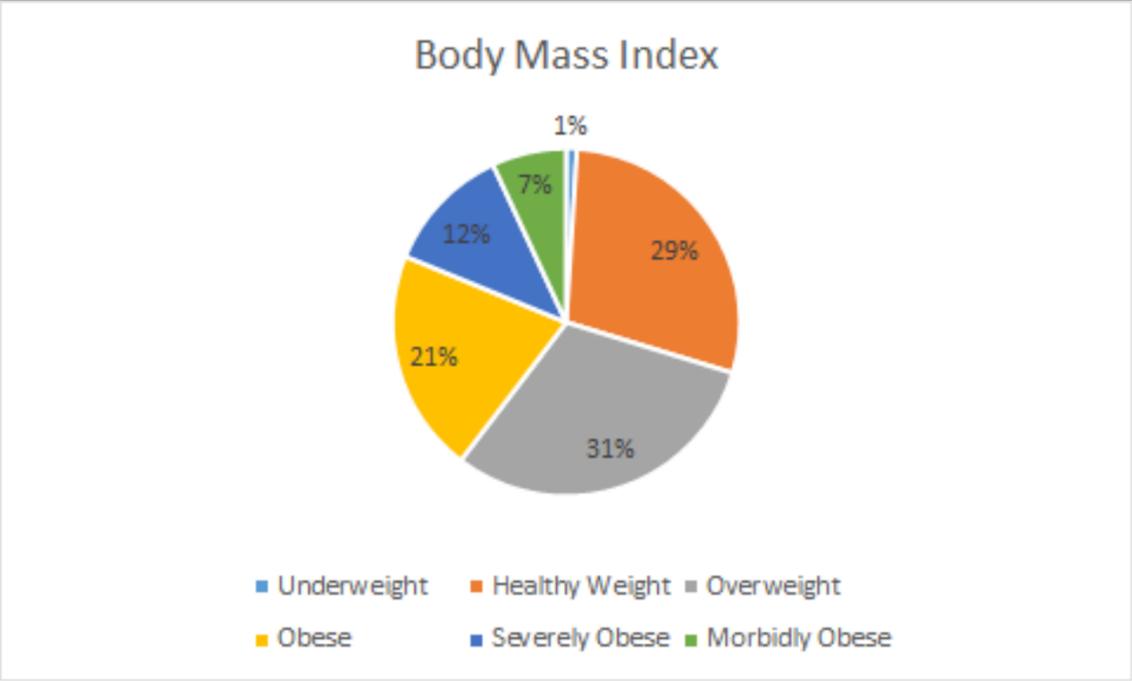
Physical Inactivity



Lack of physical activity is a major contributor to obesity and many chronic conditions. Almost a quarter of Bethlehem's residents reported no days of exercise per week. This figure remains unchanged from the last community health needs assessment.

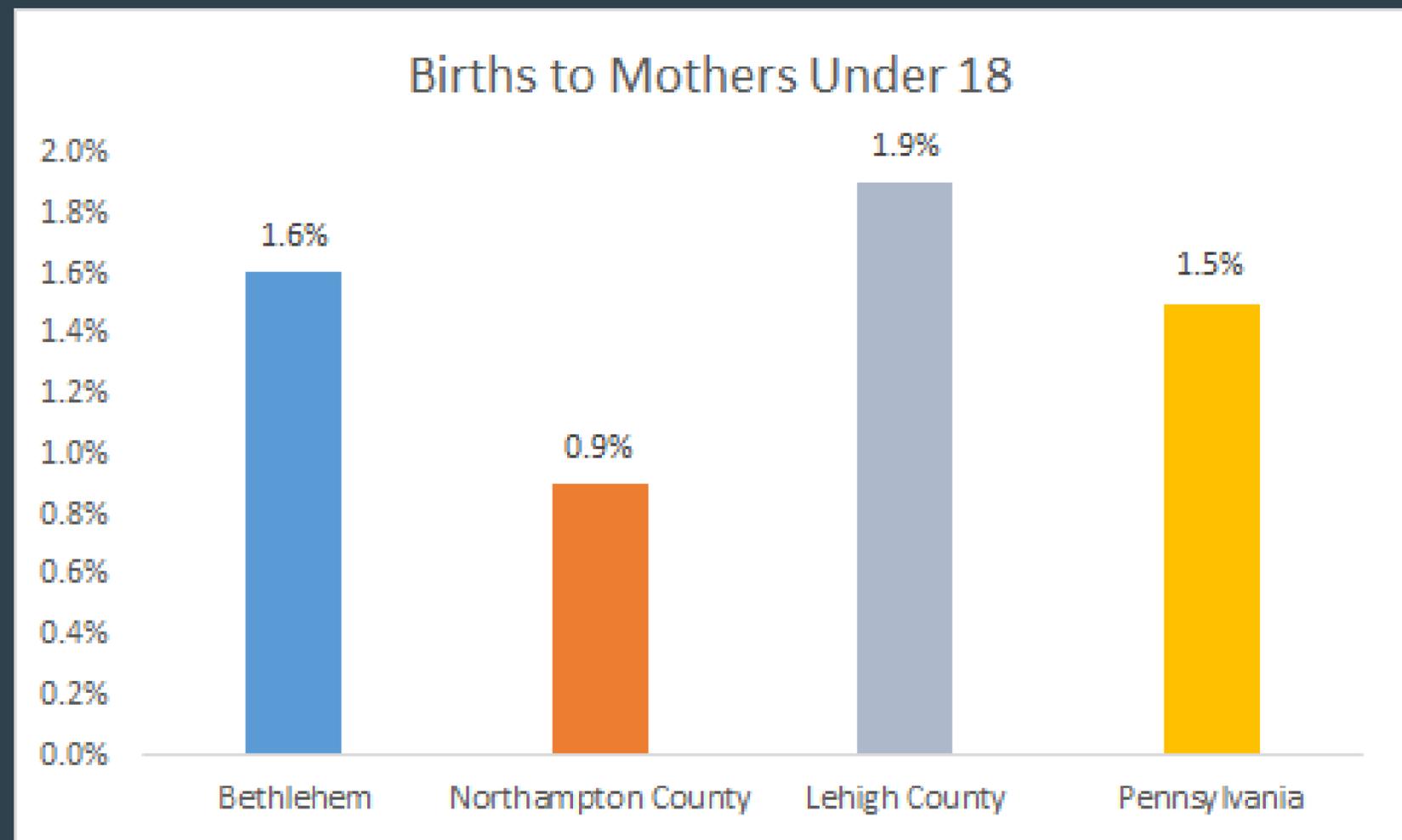
Health Behaviors

BODY MASS INDEX



Obesity related conditions include heart disease, stroke, diabetes and certain types of cancers that are some of the leading causes of preventable, premature death. Bethlehem is still above the county and state average but has decreased from 40.4% to 39.2% from the last community health needs assessment.

Maternal and Child Health

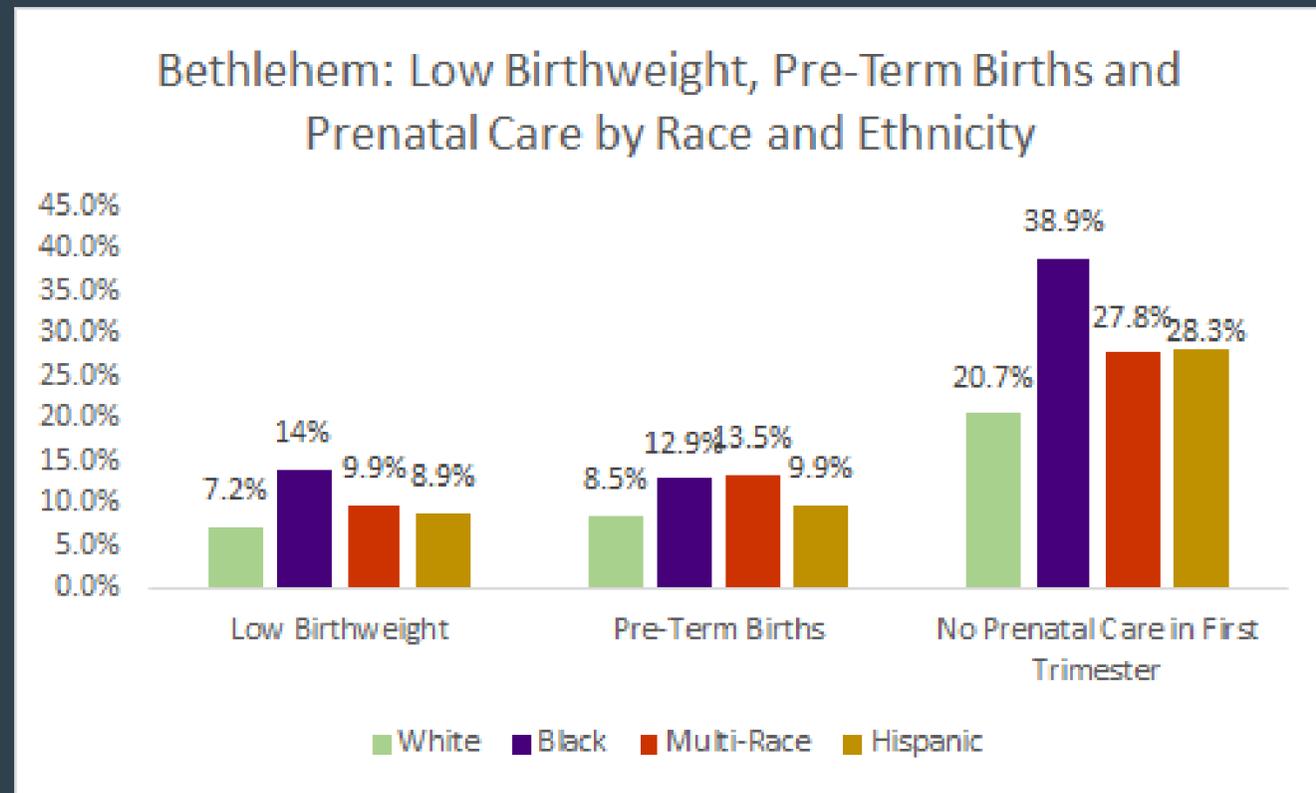
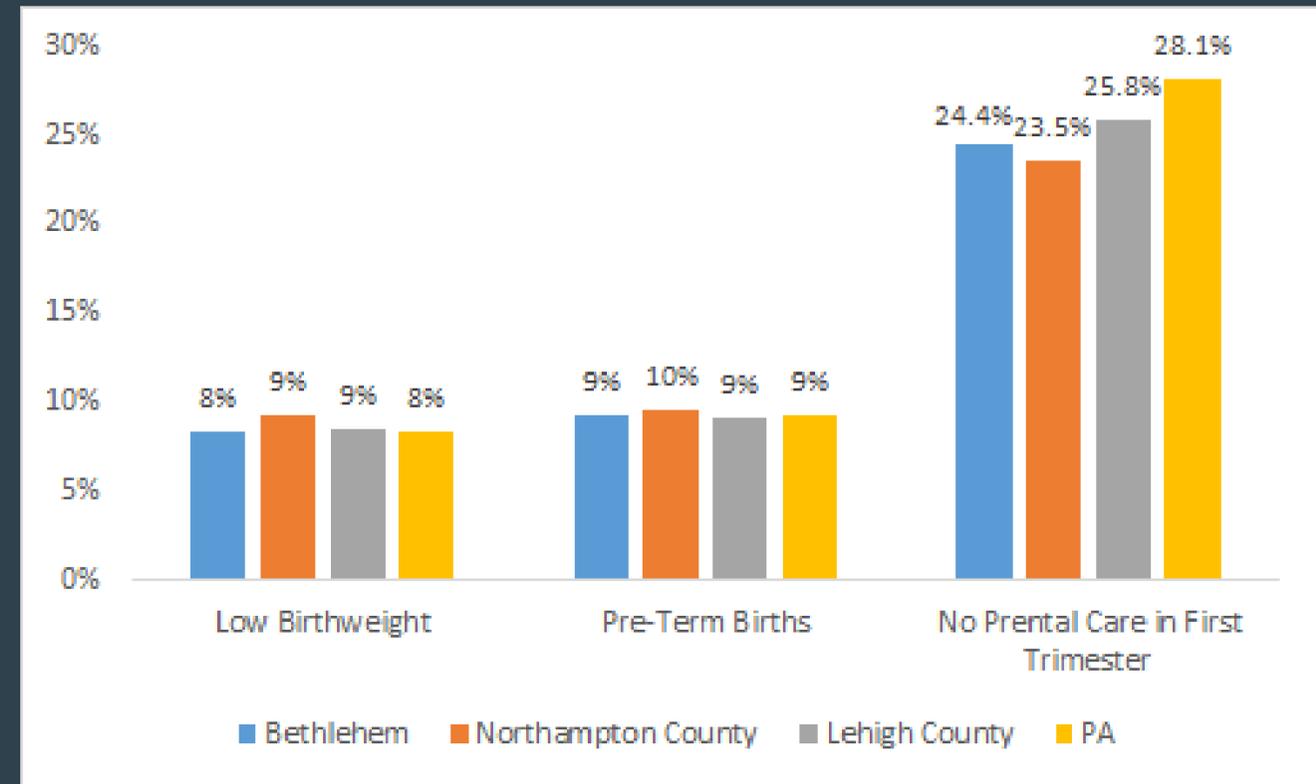


Source: Pennsylvania Department of Health 2016



Maternal and Child Health

Maternal and child health disparities exist among certain racial and ethnic populations. Blacks, Hispanics and those who identify as multi-race, all have higher percentages of low birthweight, pre-term births, and no prenatal care in the first trimester.



37.5% of Bethlehem survey respondents reported having at least 1 poor mental health day in the past month.

11.7% of Bethlehem survey respondents stated that they had have received a mental health diagnosis. In addition, according to focus group participants, social isolation and lack of social interaction was the single most commonly identified factor affecting the health or potential health of members of the community.

Substance Abuse

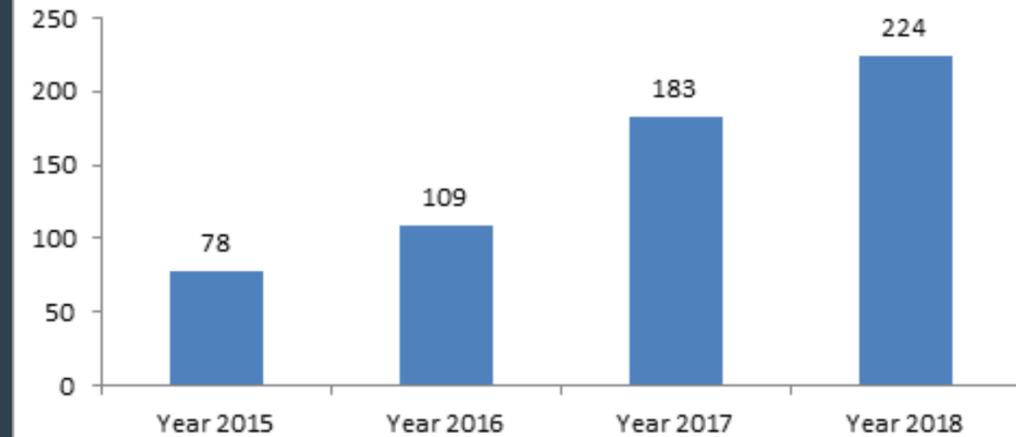


Opioid Deaths

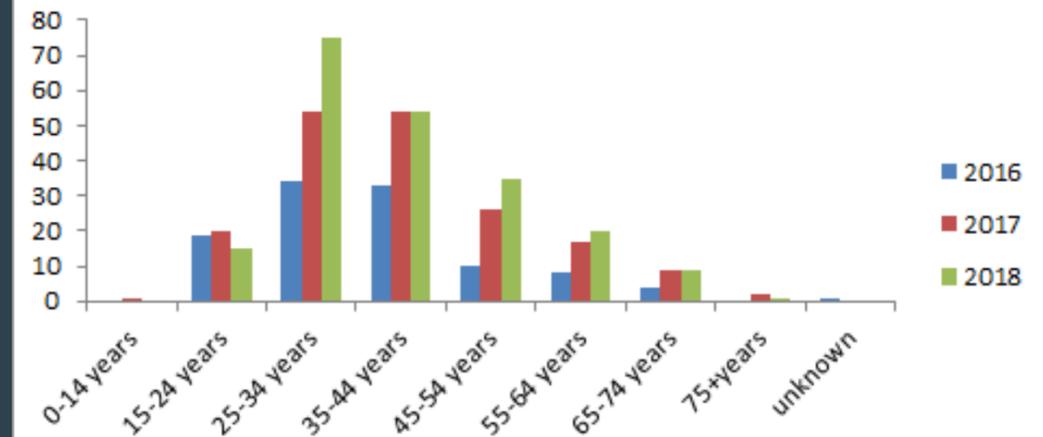
The rate of opioid deaths in Bethlehem from 2015-17 was 19.7 per 100,000 as compared to 15 per 100,000 across Dashboard Cities.

Source: City of Bethlehem EMS

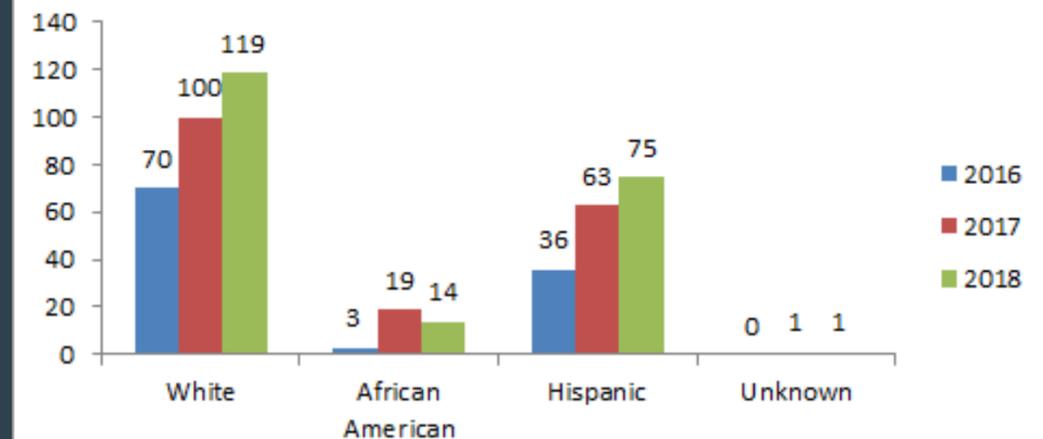
City of Bethlehem Overdoses 2015-2018



City of Bethlehem Overdoses by Age Group



City of Bethlehem Overdoses by Race and Ethnicity



Preventive Care

■ **FLU VACCINE**

72% of Bethlehem survey respondents reported receiving a flu shot in 2018. This is an increase from 66.6% from the last community health needs assessment.

■ **DENTAL CARE**

74.6% of Bethlehem survey respondents reported visiting their dentist in 2018. This is an increase from 66.7% from the last community health needs assessment.

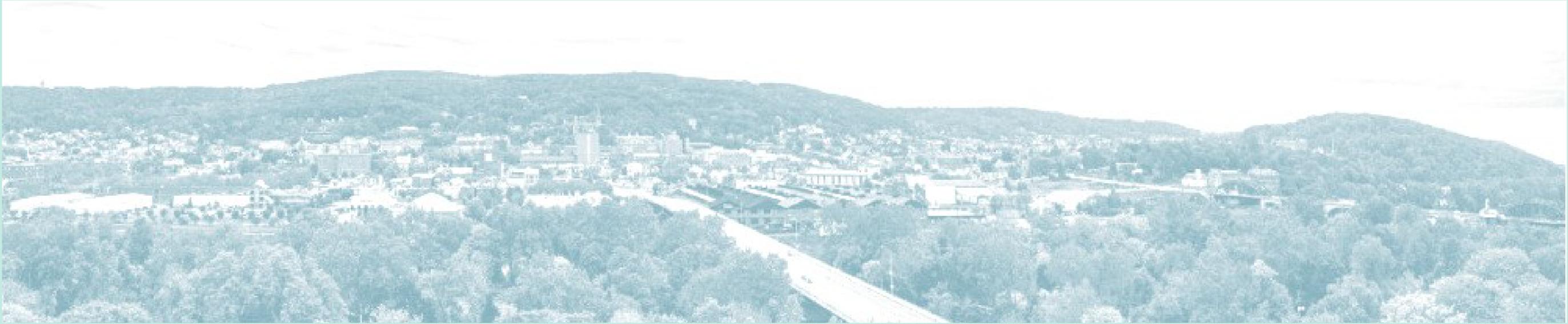
■ **MAMMOGRAM**

84% of Bethlehem survey respondents reported receiving a mammogram in 2018. This is an increase from 75.1% from the last community health needs assessment.

■ **PREVENTIVE CARE**

82% of Bethlehem survey respondents reported visiting their primary care physician in 2018. This is an increase from 69.7% from the last community health needs assessment.

Environmental Health



Air Quality

10.8
(average
daily
concentration of
particulate
matter)

Pre-1979 Housing

81.5%
of Bethlehem
homes are
pre-1979

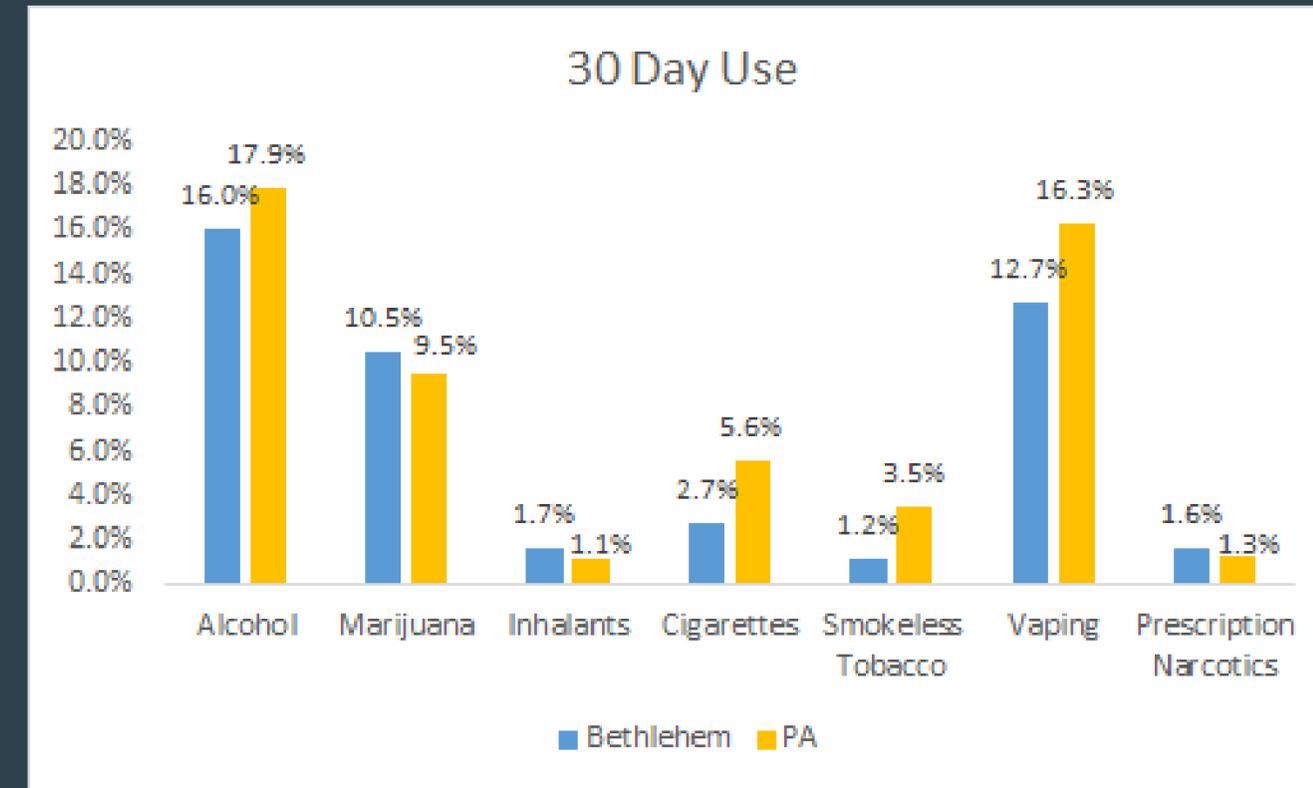
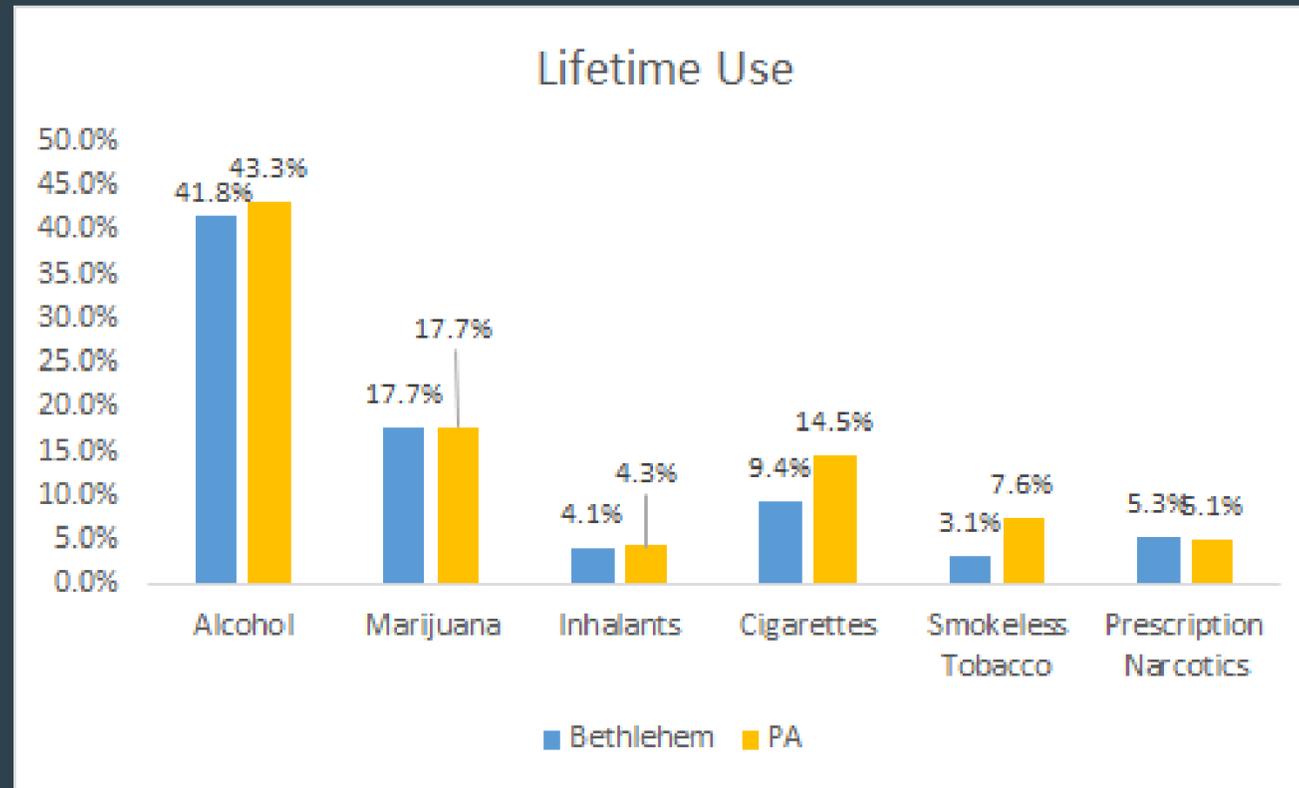
Park Access

76.2%
of Bethlehem's
population lives
within a 10
minute walk of
green space

Food Access

51%
of Bethlehem's
population lives
more than
1/2 mile from
the nearest
supermarket

Adolescent Health

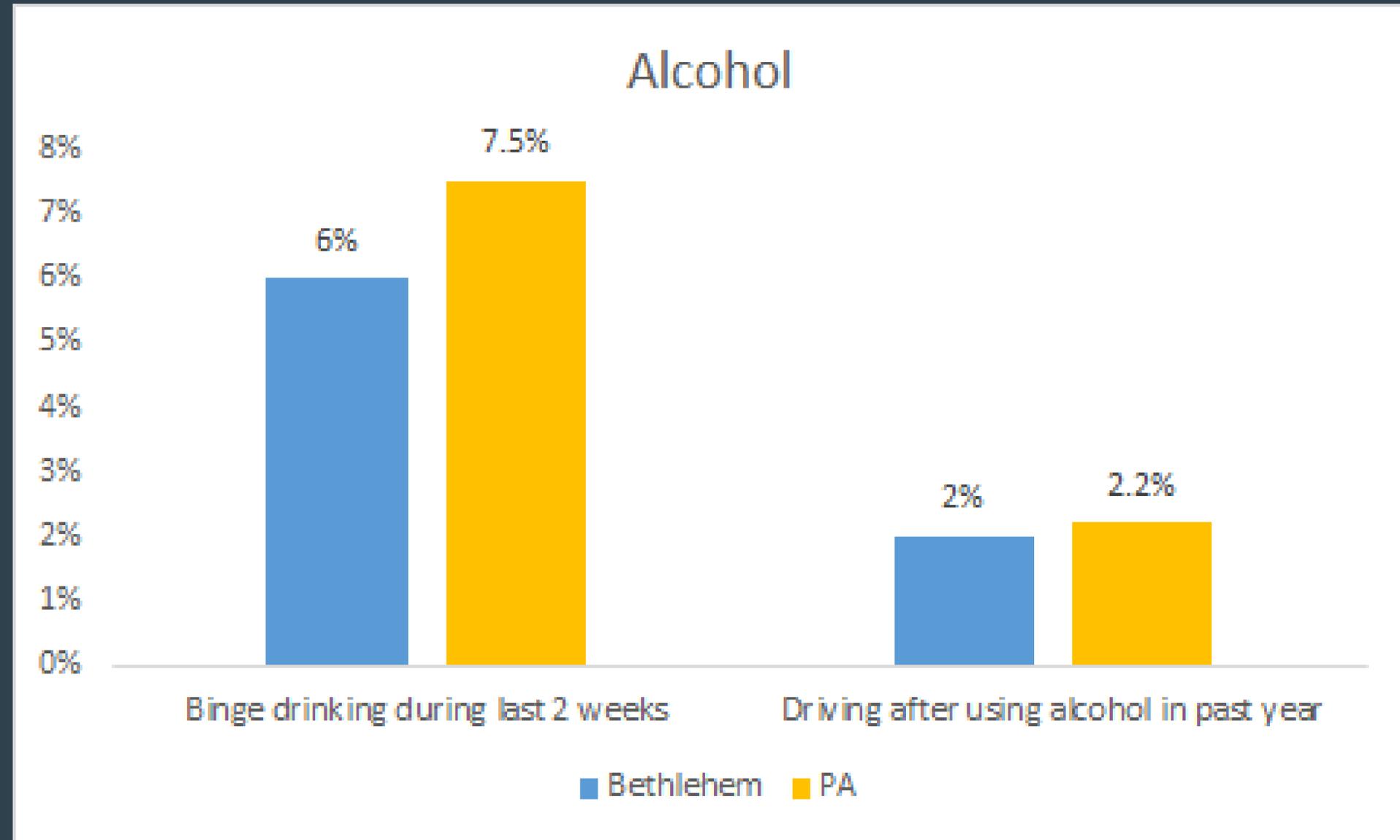


Lifetime reported use of various substances

30 day reported use of various substances

Adolescents from Bethlehem report lower 30 day and lifetime use of cigarettes, smokeless tobacco, vaping and alcohol.

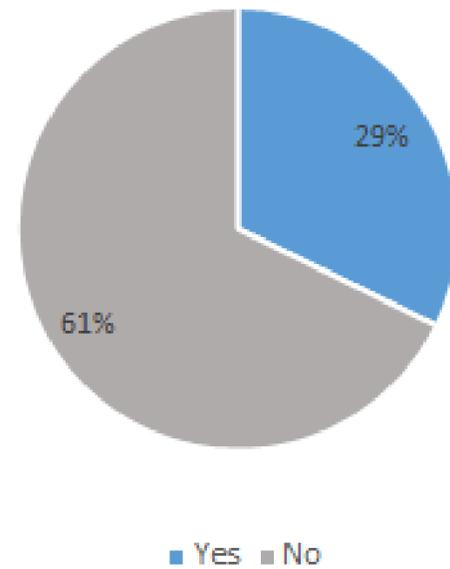
Adolescent Health



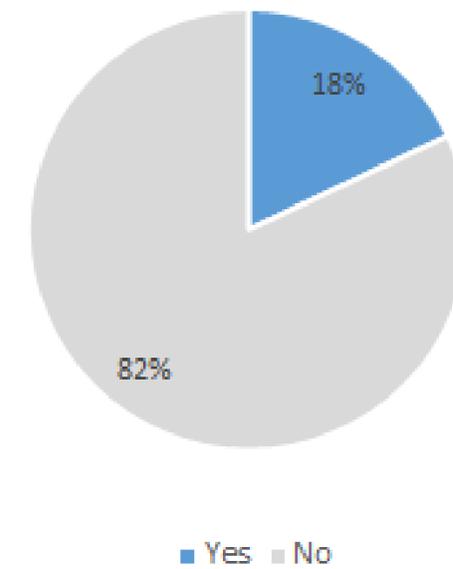
Source: Pennsylvania Youth Survey 2017

Adolescent Health

Students Indicating Bullying in Past 12 Months



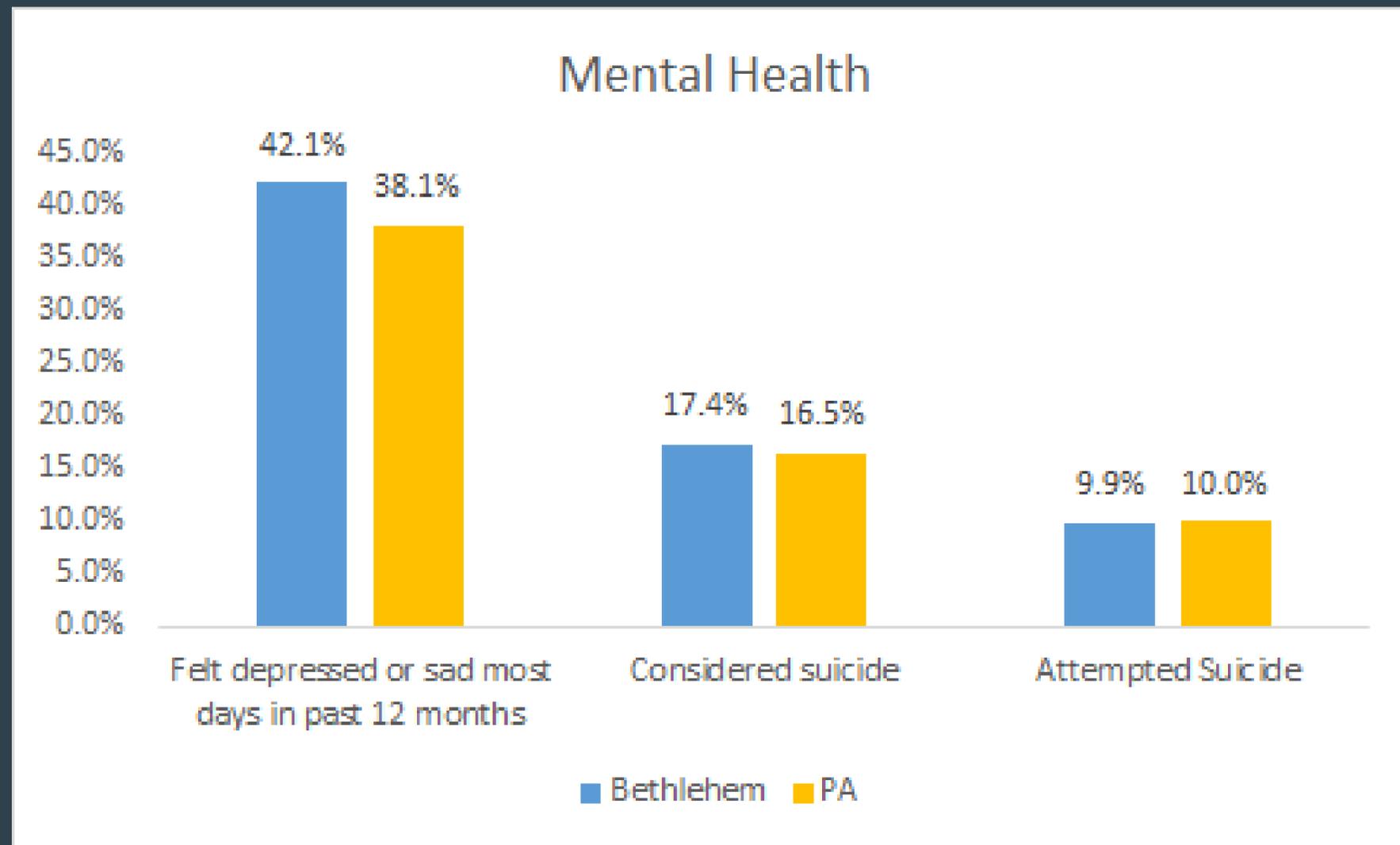
Self harm in past 12 months



Almost 29% of Bethlehem teens surveyed, indicated that they had been bullied in the last 12 months, which is comparable to the State data. The percentage of adolescents reporting self-harm is higher in Bethlehem at 18% compared to the State at 14%.

Source: Pennsylvania Youth Survey 2017

Adolescent Health



Mental health was the primary concern among high school focus group participants. According to the students, the chief mental health issues impacting adolescents are depression and anxiety.

Source: Pennsylvania Youth Survey 2017

Data Trends: 2016 CHNA to 2019 CHNA

Negative Trend	Similar Trend	Positive Trend
<ul style="list-style-type: none">• Heart disease deaths• Cancer deaths• Non-transport accident deaths• Stroke deaths• Diabetes deaths• High blood pressure• High cholesterol• Heroin overdoses• Chlamydia• Gonorrhea• Syphilis• HIV	<ul style="list-style-type: none">• 5 or more servings of fruits and vegetables daily• Physical inactivity• No prenatal care during first trimester• Low birthweight	<ul style="list-style-type: none">• CLRD deaths• Smoking• Disability rates• Asthma• High school graduation rates• Flu vaccine• Poverty• Visited a dentist in past year• Preventive care check up in past year• Mammograms• Obesity• Median household income• Unemployment