



Community Health Needs Assessment

NORTH MISSISSIPPI MEDICAL CENTER, INC., DBA

NORTH MISSISSIPPI MEDICAL CENTER - TUPELO

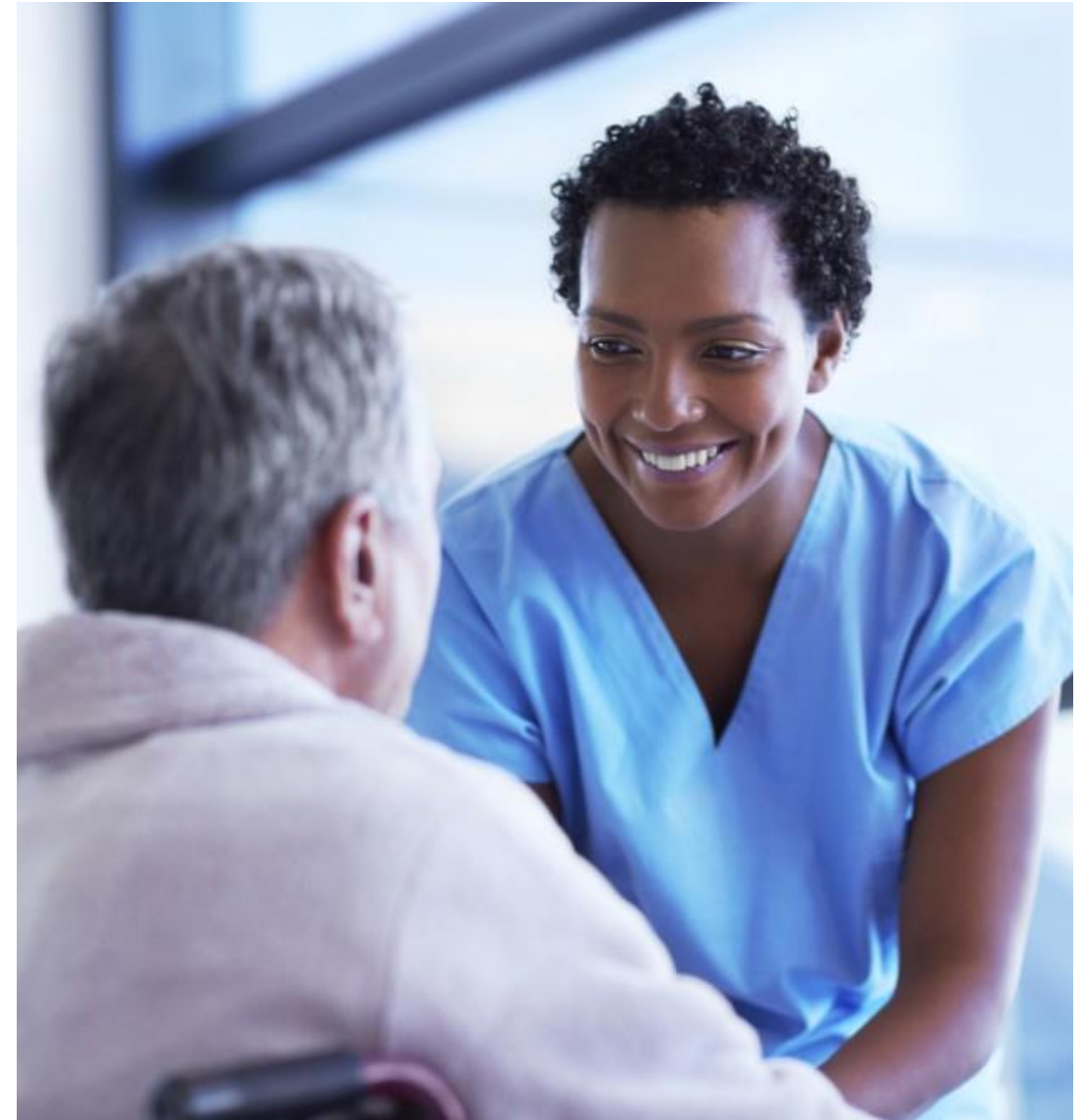
SEPTEMBER 2022



**NORTH MISSISSIPPI
HEALTH SERVICES**

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Executive Summary

Regulatory Requirements of Community Health Needs Assessment (CHNA)

The Patient Protection and Affordable Care Act (PPACA) of 2010 requires tax-exempt hospitals, such as North Mississippi Medical Center, Inc. (NMMC), to conduct a Community Health Needs Assessment (CHNA). The CHNA is the process by which a non-profit hospital evaluates the health needs of the community it serves, e.g., diabetes, heart disease, lung disease, and the service area's overarching resources, e.g., food, housing, poverty, etc. This assessment identifies community strengths, needs, care gaps, assets and opportunities relative to the health of residents.

NMMC is a not-for-profit hospital affiliated with North Mississippi Health Services (NMHS). Because of its tax status, NMMC is required to conduct a CHNA every three years. This includes identifying priorities and implementing strategies that address the needs of those served in the defined market. Each hospital within NMHS conducts a CHNA in order to understand and plan for the current and future health needs of residents and patients in the communities it serves.

This CHNA will help develop strategies that will improve the health of the NMHS system's service area communities by:

- ✓ Identifying chronic health issues and care gaps
- ✓ Recognizing health disparities particularly associated with vulnerable populations
- ✓ Highlighting community resources that are either available, lacking or underutilized
- ✓ Understanding health needs from a population-based perspective
- ✓ Implementing plans to address identified needs



Introduction

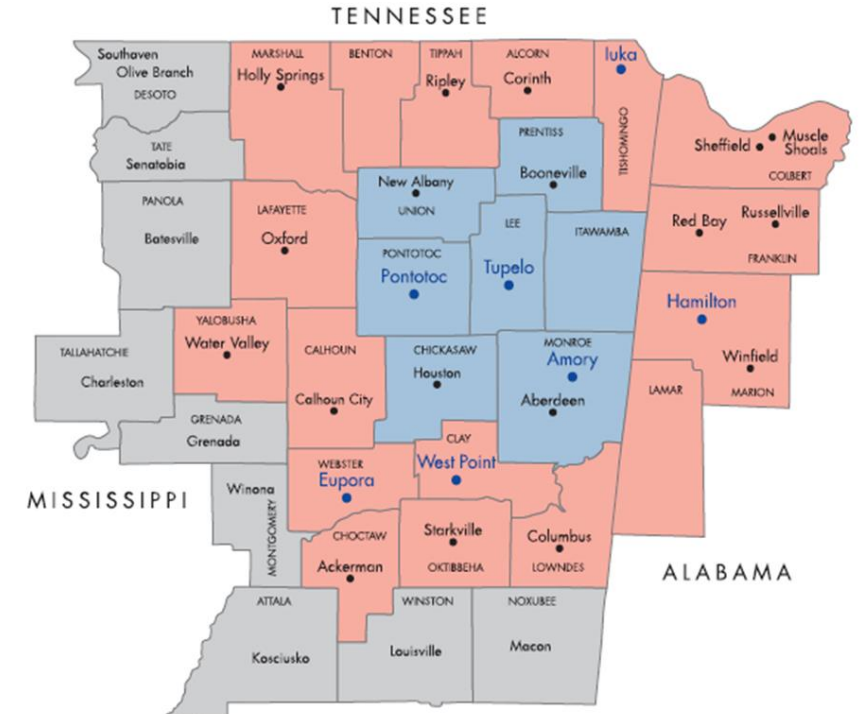
NMMC - Flagship Hospital of North Mississippi Health Services

North Mississippi Health Services (NMHS) is a not-for-profit, integrated health care delivery system serving 24 counties in north Mississippi and northwest Alabama (twenty Mississippi counties and four Alabama counties). The map highlights this area.

NMHS' headquarters is located in Tupelo, MS, the site of its flagship hospital, North Mississippi Medical Center, Inc. The system has five community hospitals with locations in Mississippi (Amory, Eupora, Iuka, Pontotoc and West Point) and one community hospital located in Alabama (Hamilton).

North Mississippi Health Services is dedicated to being the provider of the best patient- and family-centered care. NMHS connects patients and their families with convenient access to care that is cost efficient and of the highest quality. NMHS provides acute, diagnostic, therapeutic and emergency services, with the sole trauma center (Level 2) in our service area, through North Mississippi Medical Center in Tupelo.

NMHS is a 2012 recipient of the prestigious Malcolm Baldrige National Quality Award. North Mississippi Medical Center, Inc. (NMMC) is a 2006 Baldrige Award recipient.



- North Mississippi Health Services
 - North Mississippi Medical Center Eupora
 - North Mississippi Medical Center Gilmore-Amory
 - North Mississippi Medical Center Hamilton
 - North Mississippi Medical Center Iuka
 - North Mississippi Medical Center Pontotoc
 - North Mississippi Medical Center Tupelo
 - North Mississippi Medical Center West Point
- Primary Service Area
■ Secondary Service Area

Introduction

North Mississippi Medical Center, Inc.

North Mississippi Medical Center, Inc., dba North Mississippi Medical Center-Tupelo, a 640-bed regional referral center in Tupelo, holds the distinction of being the largest, private, not-for-profit hospital in Mississippi and the largest non-metropolitan hospital in America. The medical center serves about 730,000 people in 24 counties in north Mississippi, northwest Alabama and portions of Tennessee.

Area residents have access to a medical staff representing more than 50 medical specialties, as well as centers of excellence in cardiac surgery, cardiology, research, neurology, neurosurgery, pulmonology, rehabilitation, cancer treatment, chemical dependency and neonatal programs. In addition, NMMC's Home Health serves patients in 17 counties in north Mississippi and offers many complex and high-tech procedures that can be performed in the home setting.

The hospital is designated as a Level II trauma center by the Mississippi State Department of Health. To receive this designation, facilities must offer a full range of trauma capabilities, including an Emergency Department, a full-service surgical suite, intensive care unit and diagnostic imaging, as well as make a commitment to consistently meet national guidelines or standards in caring for trauma patients. It is one of only three hospitals in Mississippi to receive this designation, and the only one in north Mississippi.

The NMMC hospitalist program has been recognized by The American Journal of Medicine for providing cost-efficient care to hospitalized patients. The program, which began in 1997, employs several internal medicine physicians who work together to provide daytime and nighttime coverage to hospitalized patients who do not have a primary care physician or whose primary care physicians do not have hospital practices.

Source: <http://www.nmhs.net/tupelo/>



Actions Taken Since 2019 CHNA

Priority areas from the previous CHNA:

- Improve Awareness/Access to Health Services
- Obesity/Chronic Disease Management
- Women’s/Children’s Services

COMMUNITY ACTIVITIES 2019

DATE	COMMUNITY ACTIVITY	NUMBER OF PARTICIPANTS
	2019	
2019	Partnered with colleges hosting multiple student interns each year – MS State, University of MS, University of AL, Union University - counselors, social workers, psychology students, NPs; on average, host about 6-8 students each year	6-8 students
April	Sports Physicals	>200
June	MORA Bicycle Ride Water station stop	70 cyclists/25 volunteers
July	Hamilton AL Wellness Fair	>200
August	Senior Baby Boomer (Starkville)	>200
August	Outcomes Conference	>200
August	Bancorp South Wellness Clinic	>100
August	Sports Physicals UMMC Clinic	>100
September	Car show at BNF for Alzheimer’s fund raiser	200 participants/50 volunteers
October	Alzheimer’s walk	200 participants/12 volunteers
October	WTVA Wellness Fair	>200
Oct. 2019 – Sep. 2021	Pre-Admission Visit Class	23
Oct. 2019 – Sep. 2021	Early Pregnancy Class	11
Oct. 2019 – Sep. 2021	Preparation for Birth Class (In-person Class and Hybrid Class)	158
Oct. 2019 – Sep. 2021	Sibling Class	18
Oct. 2019 – Sep. 2021	Infant/Child CPR Class	67

Actions Taken Since 2019 CHNA

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COMMUNITY ACTIVITIES 2019

DATE	COMMUNITY ACTIVITY	NUMBER OF PARTICIPANTS
	2019	
Oct. 2019 – Sep. 2021	Grand-parenting Class	5
Oct. 2019 – Sep. 2021	Breastfeeding Class	72
Oct. 2019 – Sep. 2021	Preparation for C/Section Birth Class	8
Oct. 2019 – Sep. 2020	Valerie Fields, LPC, CEAP has provided 6 Mental Health First Aid Trainings	43
November	Katie Noll, LMSW developed Self-Care Booklet that was disseminated to hospital staff	500
November 23	Jade Davis-Hurt, LPC spoke at Community Health Workshop on taking care of mental health	30
Nov. 2019 – Oct. 2020	DM Prevention Class 26 class sessions	12 participants
Dec. 3, 2019 - Present	Brunson Infusion Clinic	Brunson was covered primarily by APC Fellows



Actions Taken Since 2019 CHNA

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COMMUNITY ACTIVITIES 2020

DATE	COMMUNITY ACTIVITY	NUMBER OF PARTICIPANTS
	2020	
2020	Partnered with colleges hosting multiple student interns each year – MS State, University of MS, University of AL, Union University - counselors, social workers, psychology students, NPs; on average, host about 6-8 students each year	6-8 students
2020	Complete Health Improvement Program (CHIP) (18 Sessions)	26 participants
2020	Toyota COVID Testing Center	65 total (four hour shifts) covered by 16 fellows & over 500 people served
February 14	Russell Chumley, LPC, LMFT spoke with NMMC - APC students on working with Mental Health Patients	15
February 20	Russell Chumley, LPC, LMFT - Hosted NMMC Behavioral Health Center – Mental Health Conference	Close to 200
February 21	Team prepared Mental Health Conference sponsored by Behavioral Health	200
August	Women’s Hospital Virtual Baby Week event (videos by providers, educators, tours of WH, classes, etc.)	194,803 people reached
Oct. 2019 – Sep. 2021	Early Pregnancy Class	11
Oct. 2019 – Sep. 2021	Preparation for Birth Class (In-person Class and Hybrid Class)	158
Oct. 2019 – Sep. 2021	Pre-Admission Visit Class	23
Oct. 2019 – Sep. 2021	Sibling Class	18
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COMMUNITY ACTIVITIES 2020 – 2021

DATE	COMMUNITY ACTIVITY	NUMBER OF PARTICIPANTS
2020		
Oct. 2019 – Sep. 2020	Valerie Fields, LPC, CEAP has provided 6 Mental Health First Aid Trainings	43
Nov. 2019 – Oct. 2020	DM Prevention Class 26 class sessions	12 participants
November	Alzheimer’s walk	200 participants/12 volunteers
Dec. 2020 – Current	Within three weeks of monoclonal antibody treatment for COVID-19 becoming available for use in patients testing positive for COVID, NMHS had established and was treating patients with monoclonal antibody infusion. Monoclonal antibody (mAbs) was identified early on as an effective treatment, Scientific studies showed that high-risk COVID-19 patients treated with monoclonal antibodies had a 70% reduction in relative risk for progression to severe disease and/or hospitalization compared to patients who did not receive monoclonal antibodies.	Over 6,000 doses administered
Dec. 3, 2019 - Current	Brunson Infusion Clinic	Brunson was covered primarily by APC Fellows
2021		
2021	Partnered with colleges hosting multiple student interns each year – MS State, University of MS, University of AL, Union University - counselors, social workers, psychology students, NPs; on average, host about 6-8 students each year	6-8 students
2021	Smithville “Farmacy” Indoor Produce Market Lifestyle Medicine	4 hours with 46 people served
2021	Complete Health Improvement Program (CHIP) (2) classes for 18 sessions each class	Class one had 18 participants over the 18 sessions and class two had 14 participants over the 18 sessions

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COMMUNITY ACTIVITIES 2021

DATE	COMMUNITY ACTIVITY	NUMBER OF PARTICIPANTS
	2021	
2021	Ballard Park: Wellness Event 2-hour event	75 persons attended booth of WWAD
January 29	Russell Chumley, LPC, LMFT – spoke virtually with NMMC APC students on working with Mental Health patients	15
January – September	DM Prevention Class 20 classes from January to September	26 but many participate on various different weeks
February	Vaccine Clinic	
April – November	Return to Screening Initiative for Lung and Breast Cancer – getting the message out that cancer didn’t stop during the pandemic and neither should screenings. Initiative is meant to increase screening rates during Covid and capture potential cancers missed during a time of fear and educate the community and providers on the safety of screening.	Thousands
May – August	Walk with a Doc Events in May (1) June, July (2), and August in Tupelo	Appx 100 persons total over all events
July 9	Sandra Holmes, Ph.D. provided a presentation to NP fellowship on resilience—Emerging Strong 2021	15
July 13	Outpatient Rehabilitation Adaptive Ski Clinic	3
August	Advance Directives/ Crisis Before the Conversation education - Abby Farris	65
August	Virtual Outcomes Conference	
August	Covid Testing Site	
August	Women’s Hospital Virtual Baby Week event	People Reached 66,226
August	New Children’s Clinic Virtual Tour	People Reached 5,200
August	Community Vaccine Program in partnership with New Albany FUMC	9 participants/3 volunteers

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COMMUNITY ACTIVITIES 2021

DATE	COMMUNITY ACTIVITY	NUMBER OF PARTICIPANTS
	2021	
August 24 - Present	Barnes Crossing Testing and COVID Injection Clinic	43 four-hour shifts covered by APC Fellows/Faculty
September	Children’s Clinic Drive Thru Grand Opening	75
September	Community Vaccine Program in partnership with New Albany FUMC	8 participants/3 Volunteers
September 14	Sandra Holmes, Ph.D. presented to hospital leaders Emerging Strong 2021--resilience	30
Oct. 2019 – Sep. 2021	Early Pregnancy Class	11
October	Raising awareness for breast cancer month, screening and early detection. Participated in Itawamba Community College Pink Out Events which included a softball game on Oct 28 th , game attendees were provided information and resources about screening and early detection. Interviews on the ICC Hour radio show and internet broadcast prior to the game also educated the public.	Estimated 500
Oct. 2019 – Sep. 2021	Preparation for Birth Class (In-person Class and Hybrid Class)	158
Oct. 2019 – Sep. 2021	Pre-Admission Visit Class	23
Oct. 2019 – Sep. 2021	Sibling Class	18
Oct. 2019 – Sep. 2021	Infant/Child CPR Class	67
Oct. 2019 – Sep. 2021	Grand-parenting Class	5
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MEDIA ACTIVITIES 2019 - 2020

DATE	COMMUNITY ACTIVITY
	2019
October 23	Russell Chumley, LPC, LMFT represented BH at Facebook Live Care Transition Expo
December	Russell Chumley, LPC, LMFT WTVA interview on holidays and depression
	2020
January	Russell Chumley, LPC, LMFT article for Mud and Magnolias on coping with depression.
March 24	Sandra Holmes, Ph. D, Shared coping information on coping skills during Covid-19 with marketing that was Place on hospital slider, NMMC internet for community, NMMC-ENTV and NMMC Facebook
April	Russell Chumley, LPC, LMFT – Interviewed by Daily Journal on coping with the Pandemic
April 6	Valerie Fields, LPC was interviewed on WTVA regarding Employees in Healthcare and Stress
April 9	Susan Schuh, LPC did a WEBEX for the community on Crisis/Stress Management
April 16	April Kitchens, LMSW Did an article on Budgeting During a Crisis
May 1	Sandra Holmes, Ph.D. provided Community Development Foundation information for HR professionals for coping with employee concerns during the pandemic
May 18	Sandra Holmes, Ph.D. provided Marketing and NMMC Education Mental Health month packet to be used on NMMC Facebook live and NMMC e-news, ENTV
August 25	Sandra Holmes, Ph.D. wrote an article on Self-care — The Ostrich
August 28	Sandra Holmes, Ph.D. wrote an article for Leadership – Self-Care Reminders and Resources
August 31	Sandra Holmes, Ph.D. Provided Marketing with packet on Suicide Prevention Month to be used for community post and at NMMC E-news—Just checking—regarding checking on others during Pandemic
September 8	Phillipa Jones, LCSW Spoke on Dealing with Children During Crisis for United Ways Voices from Home series
December 4	Sandra Holmes, Ph.D. wrote an article on Loneliness that was also used as slider on NMMC intranet for community and employees

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MEDIA ACTIVITIES 2021

DATE	COMMUNITY ACTIVITY
	2021
January 21	Sandra Holmes, Ph.D. had article on Self-Care published in Mud and Magnolias
February	Russell Chumley, LPC, LMFT – NMMC Blog submission on coping with depression
March 18	Phillipa Jones, LCSW wrote an article/blog post Keep Calm and Carry On for helping children with anxiety
April	Russell Chumley, LPC, LMFT – NMMC Blog submission on coping with anxiety
April 21	Sandra Holmes, Ph.D. Shared Mental Health Month packet with Marketing materials used for community and employee post
April	Lateefa Chism, LMSW wrote an article/blog on Self-Care — What it Is and Isn’t
April	Lauren Carter, RN wrote an article/blog Depression You Are Not Alone
April	EAP staff did weekly video clips for the NMMC community and provided information that was shared on the hub
April	Sandra Holmes, Ph.D. provided 2 presentations on Emerging Strong – using Balance to build Resilience
May	Jade Davis-Hurt, LPC – NMMC Blog submission on OCD
August 25	Sandra Holmes, Ph. D. had blog post of previous article Makes Like an Ostrich on Facebook Live NMMC
September 8	April Kitchens, LMSW had blog post of previous article Take a Break and Breath on Facebook Live NMMC
September 21	Sandra Holmes, Ph.D. Upcoming repeat of above
October 7	Sandra Holmes, Ph.D. Upcoming North Mississippi Society of Human Resource Management – Emerging and Resilience

Actions Taken Since 2019 CHNA

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MEDIA ACTIVITIES (YOUTUBE) 2020

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2020		
April 20	COVID-19 is Color Blind	8,293
May 21	COVID-19 is Color Blind – Spanish Version	134
June 25	Dr. Jeremy Blanchard Discusses COVID-19 Prevention	178
July 23	Primary Care after Bariatric Surgery	109
August 21	High Risk Pregnancy	94
August 24	Cesarean Delivery	7,458
August 28	Infant Safety	27
August 28	Childbirth During COVID- 19	94
August 28	Caring for Your Newborn	65
August 28	Breastfeeding	786
August 28	Prenatal Nutrition	26
August 28	First Days with a Newborn	241
August 28	The Golden Hour	39
August 28	Prenatal Exercise	31
August 28	Happy, Health WIC Moms	21
August 28	All About Epidurals	59
August 28	Babies Don’t Come with Instructions	53
August 28	Feeding Your baby	23
August 28	Prenatal Massage2	2,066

MEDIA ACTIVITIES (YOUTUBE) 2020 - 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
August 28	Infant CPR	712
October 7	Emotion, Behavior and Weight Management	57
October 26	NMMC Sleep Disorders Center Home Sleep Study Tutorial	1,823
October 29	Wear a Mask	28
December 29	Who is a Candidate for Weight Loss Surgery	361
December 29	Diabetes and Weight Loss	25
December 29	Nutrition and Weight Loss	17
December 29	Sleep Apnea and Weight Loss	8,224
2021		
January 26	NMMC Diabetes Prevention Program: Introduction	21
March 11	Obesity and Sleep Apnea	44
March 11	NMMC Diabetes Prevention Program: Shop and Cook to Prevent Type 2	35
March 17	NMMC Diabetes Prevention Program: Manage Stress to Prevent Type 2	9
May 12	Vernon Rayford, M.D. Discusses Possible Side Effects after the Vaccine	22
May 12	Pregnancy and the COVID-19 Vaccine	30
June 1	NMMC Hospice Virtual Memorial Service 2021	266
June 2	Are you afraid? What to expect with a routine mammogram	42

Actions Taken Since 2019 CHNA

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MEDIA ACTIVITIES (YOUTUBE) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2021		
June 2	Why It's Important to See your Doctor Every Year with Claire Northington, FNP	43
July 9	EMG/Nerve Conduction Study	613
July 14	Colon Cancer Screening: Colonoscopy vs. Home-Screening Kits	32
July 20	The Importance of sports physicals and child wellness checks	43
August 13	Keep your Heart Healthy	6
August 13	Coping Triggers	4
August 13	When Weight Loss Stalls	5
August 13	Stay Active to Prevent T2	11
August 13	Eat Well Away from Home	5
August 13	Take Charge of Your Thoughts	10
August 13	Get Support	6
August 13	More About T2	13
August 13	Stay Active Away from Home	3
August 13	Take a Fitness Break	4
August 13	Stay Motivated to Prevent T2	5
August 18	More About Carbs	15
August 24	Early Pregnancy	14

MEDIA ACTIVITIES (YOUTUBE) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2021		
August 24	Labor and Delivery	21
August 30	Respiratory Syncytial Virus (RSV)	56
September 9	Prostate Cancer Treatment Options	1
September 9	Prostate Cancer Screening	1
September 9	PSA Screening for Prostate Cancer	3



Actions Taken Since 2019 CHNA

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MEDIA ACTIVITIES (FACEBOOK) 2019 – 2020

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2019		
October 15	Live from the Endovascular lab with Dr. Jason Stacy and Dr. Richard Arriola Discussing Stroke	10K
October 23	Live at the Care Transitions Expo	2.5K
November 13	Live with Dr. Vernon Rayford Discussing Diabetes	2.5K
November 20	Live with Jill Bauer, physical therapist, demonstrating dry needling	3.2K
November 27	Live with Emily Littlejohn Talking about Healthy Holiday Eating	1.9K
December 2	Live with Dr. Benjamin Hinton discussing cutting edge cancer treatment	3K
December 11	Live with Breast Health Specialists Dr. Mary Moss and Dr. Joanna Sadowksa	2.8K
December 18	Kevin Morse Colon Cancer Story	4.9K
December 30	Brett Rakestraw Colon Cancer Story	5.9K
2020		
January 24	Live from North Mississippi Retina Center	3.4K
February 4	Live with Dr. Bobby Tullos talking about the flu	12K
February 19	Dr. Jaime Ungo discusses vaping	14K
February 26	Dr. Stephen Amann and Jaren Earnest discuss colon cancer	8.3K
March 10	Handwashing: Your Best Defense	1.1K
April 10	Q and A with Dr. Jaime Ungo about COVID-19	8.8K

MEDIA ACTIVITIES (FACEBOOK) 2020

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2020		
April 15	Stress and Anxiety During a Global Pandemic	1.3K
April 18	Social Distancing	900
April 20	Stop the Spread of Germs	935
April 23	COVID-19 is Color Blind	4K
April 23	Live with Dr. Terry Pinson discussing weight loss surgery	7.8K
May 1	Keeping Our Community Well and Safe	10.8K
May 6	Live with Dr. Danny Sanders talking about breast cancer treatment during COVID-19	6.4K
May 13	Live with Dr. Will Cauthen discussing weight loss surgery	1.8K
May 15	Matt Laubhan on Staying Healthy Together	8.7K
May 18	Live with Dr. Kalish discussing overactive bladder	6.5K
May 19	Dr. Edward Hill, retired physician and former host of 60 Second Housecall - COVID	7.7K
May 19	NMMC Vein Center with surgeons Dr. Newt Harrison and Dr. Robert McAuley	1.9K
May 20	Will Rambo, senior pastor at The Orchard Tupelo, discusses handwashing and wearing a mask	4K
May 21	COVID-19 is Color Blind – Spanish Version	3.6K
May 22	Let’s Stay Healthy Together - Trent Harmon	3.6K
May 25	Let’s Stay Healthy Together – Jim Johnson	2.3K

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MEDIA ACTIVITIES (FACEBOOK) 2020

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
	2020	
May 26	Kaylin Costello – the two most important things that each of us can do to prevent COVID	5.3K
May 28	Let's Stay Healthy Together – Jason Hayden	3.7K
May 28	Live with Dr. Charles Pigott discussing surgery options	5.9K
May 29	Let's Stay Healthy Together – Robbie Robinson	2.3K
June 1	Let's Stay Healthy Together – Tom Booth	2.2K
June 2	Let's Stay Healthy Together – Dr. Christy Vowell	2.6K
June 3	Reminder about mask wearing	8.7K
June 4	Let's Stay Healthy Together – Zierra and Zell Long	7.5K
June 5	Neal McCoy – Helps Stop the Spread	840
June 9	Live with Abigail Farris discussing advance care planning	6K
June 11	Live with neurosurgeon Dr. Lynn Miller discussing back pain	6.2K
June 16	Live from the Center for Digestive Health discussing acid reflux	3.5K
June 24	Live with Dr. Mary Moss and Dr. Joanna Sadowska discussing health care screening during a pandemic	3.4K
June 24	Let's Stay Together – Paul Thorn	7.5K
June 25	Live with NMHS Chief Medical Officer Dr. Jeremy Blanchard discussing masking	18.7K
June 25	Let's Stay Healthy Together – Matt Laubhan	8.7

MEDIA ACTIVITIES (FACEBOOK) 2020

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
	2020	
June 26	Let's Stay Healthy Together – Pastor Will Rambo	4K
June 27	Let's Stay Healthy Together – Dr. Edward Hill	7.7K
June 28	Let's Stay Healthy Together – Jim Johnson	5.2K
June 29	Let's Stay Healthy Together – Jack Reed	4.9K
June 30	Let's Stay Healthy Together – Robbie Robinson	2.3K
July 1	Let's Stay Healthy Together – Trent Harmon	3.6K
July 2	Let's Stay Healthy Together – Miss Tupelo Kaylin Costello	5.4K
July 3	Let's Stay Healthy Together – Jason Hayden	3.7K
July 4	Let's Stay Healthy Together – Judd Wilson	4.4K
July 8	Live with Dr. Jaime Ungo taking about lung cancer screening	3.4K
July 10	Let's Stay Healthy Together – Dave Gilliland, M.D.	3.6K
July 20	Let's Stay Healthy Together – Dr. Vernon Rayford	3.4K
July 21	Let's Stay Healthy Together – Dr. Ned Miller	5.8K
July 22	Let's Stay Healthy Together – Pastor Lowell Walker	2.1K
August 10	Live at Urologic discussing enlarged prostate	3K
August 12	Does wearing a mask affect your oxygen and CO2 Levels?	5.2K
August 23	Wear A Mask	678
August 24	High Risk Pregnancy	4.4K

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MEDIA ACTIVITIES (FACEBOOK) 2020

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
	2020	
August 24	Prenatal Exercise	2.5K
August 24	Labor and Delivery	6.8K
August 25	What to pack for labor and delivery	6K
August 25	Early Pregnancy	3.2K
August 26	All About Epidurals	4.8K
August 26	The Golden Hour	2.1K
August 27	Feeding Your Baby	1.7K
August 27	Cesarean Delivery	6.1K
August 27	Breastfeeding	2.6K
August 27	First Days with a Newborn	3.7K
August 27	Happy, Healthy WIC Moms	1K
August 27	Caring for a Newborn	2.6K
August 28	Babies Don’t Come with Instructions	2.6K
August 28	Infant Safety	1.3K
August 28	Neonatal Intensive Care Unit	4.5K
August 28	Infant CPR	3.9K
September 15	Do Your Part – How to Mask	727
September 22	Live with Anna Wright and Jonathan Pilgrim discussing the Walk to End Alzheimer’s	2K

MEDIA ACTIVITIES (FACEBOOK) 2020

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
	2020	
September 23	Surviving Sepsis: Angie Everett’s Personal Story	5.1K
September 27	It’s Time to Fight Flu, Mississippi	476
October 7	Live with Dr. Drew Blackstock discussing addiction medicine	3.1K
October 20	Abby Hopkins Shares Her “Why I Walk Story”	873
October 21	Rheumatology Consultants	832
October 21	Walk to End Alzheimer’s Promise Garden	1.6K
October 23	Live with vascular surgeon Dr. Joey Stinson discussing carotid issues	3.5K
October 28	Live with Dr. Bennett McGehee at Women’s Hospital	5.4K
October 29	2020 New Doctors	2.1K
October 29	Wear a Mask	4.3K
November 6	Live with Dr. Eric Webb at Women’s Hospital	2.6K
November 11	Live with Emily Davis discussing postpartum health	1.1K
November 16	Neonatal Therapists	735
November 16	Our NICU Family	4K
November 17	Our NICU Family 2	2.9K
November 18	NICU Graduates	1K
November 18	Neonatal Intensive Care Unit Tour	674
November 18	NICU Transport Team	1.9K

Actions Taken Since 2019 CHNA

Priority areas from the previous CHNA:

- Improve Awareness/Access to Health Services
- Obesity/Chronic Disease Management
- Women's/Children's Services

MEDIA ACTIVITIES (FACEBOOK) 2020 - 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2020		
November 19	Our NICU Family 3	360
November 20	Our NICU Family 4	541
November 23	Live with Dr. Jennifer Kennard at Rheumatology Consultants	2.9K
November 26	Trinise Westbrook Weight loss Success Story	448
December 4	Family Medicine Residency Graduates Serve Small Communities	3.8K
December 7	Justin King Weight loss Success Story	179
December 11	Mask up Tupelo	5.7K
December 17	Live at the first COVID vaccines at NMMC	15.8K
December 17	Live at NMMC with continuing coverage of our first COVID vaccine	9.9K
December 19	NMMC Begins COVID-19 Vaccinations	12.5
December 30	Live with Dr. Vernon Rayford talking about diabetes	3.7K
2021		
January 6	NMHS CEO and CMO Receive COVID-19 Vaccination	1.2K
January 11	Weight Loss Surgery Overview	241
January 11	Nutrition and Weight Loss	88
January 12	Who is a Candidate for Weight Loss Surgery	1.1K
January 12	Freddie Harris Knee Replacement at Surgery Center	3.9K

MEDIA ACTIVITIES (FACEBOOK) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2021		
January 12	Getting Started on Your Journey	344
January 12	NMHS Cleaning Procedures	4.4K
January 13	Your Hospital Stay after Weight Loss Surgery	222
January 13	You're Invited: Virtual RN Open House	1.1K
January 13	Sleep Apnea and Weight Loss	716
January 14	Weight Loss and Emotions	188
January 14	Diabetes and Weight Loss	1.3K
January 15	Heart Disease and Weight Loss	434
January 19	Live at NMMC discussing RN opportunities	3.9K
January 22	Virtual RN Open House	3.5K
January 26	Justin King Weight Loss Success Story	1.9K
February 1	Live with Dr. Barry Bertolet taking about "COVID-19 and Your Heart"	47.9K
February 6	Forever Grateful	4.3K
February 8	Magnifiers for Low Vision	877
February 12	Live with Dr. Richmond McCarty discussing lifestyle medicine	3.8K
February 12	Low Vision: Identifying money	1.4K
February 18	Lighting for Low Vision	789

Actions Taken Since 2019 CHNA

Priority areas from the previous CHNA:

- Improve Awareness/Access to Health Services
- Obesity/Chronic Disease Management
- Women’s/Children’s Services

MEDIA ACTIVITIES (FACEBOOK) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2021		
February 24	Live with Dr. David Talton discussing heart valve disease	4.1K
February 24	Live with Dr. Karthik Prasad discussing atrial fib	3.9K
February 26	Low Vision Rehabilitation	652
February 28	Jim Spruiell Memorial Scholarship	1.1K
March 2	Live with NMMC Cardiac Rehabilitation	3.3K
March 24	Live with Dr. Stephen Armann and Jim Goodwin discussing colon cancer	3.6K
March 31	Regina Weatherall, RN, ICU manager at North Mississippi Medical Center	3.1K
April 3	Dr. Jeremy Blanchard Discusses How the COVID-q9 Vaccine was Developed so Quickly	797
April 3	Live with Dr. Bonnie Basler discussing COVID-19 vaccinations	2.2K
April 8	Pregnancy and the COVID-10 Vaccine	657
April 9	Live with the McLaughlins talking about their NICU experience	2.9K
April 10	Vernon Rayford, M.D. discusses possible side effects after the COVID-19 Vaccine	901
April 17	Justin Brewer, M.D. explains why he took the vaccine for COVID-10	790
April 29	Do Your Part: Get Vaccinated	532
May 1	Is the COVID-19 Vaccine Safe?	556

MEDIA ACTIVITIES (FACEBOOK) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2021		
May 5	“What Do Nurses Do?” by the NMMC Child Care Center	2.3K
May 6	Dr. Jeremy Blanchard discusses why hesitation about the COVID-19 vaccine	594
May 7	Stroke Symptomnology	185
May 14	Stroke Symptomnology	277
May 21	Stroke Symptomnology	205
May 27	Live with Claire Northington, nurse practitioner at Fulton Medical Clinic	3.4K
May 28	Stroke – React – Don’t Regret	189
June 2	Whitney Sparks, FNP – joins us live to speak about routine mammography	3.5K
June 2	NMMC Hospice Virtual Memorial Service	2.8K
June 15	Live: Dr. Curtis Glidewell with New Albany Medical Clinic is discussing steps to control your blood pressure	2.1K
June 22	Diabetic Eye Exams with Dr. Keri Merschman	1.6K
June 23	Men’s Health with Dr. Kenneth Thomas	2.5K
June 29	Live: Dr. Stephen Farmer and Dr. Timothy Posey at Urologic speak about prostate enlargement	1.7K
July 1	Live with Dr. Erik Dukes discussing the importance of sports physicals for your athletes	1.8K

Actions Taken Since 2019 CHNA

Priority areas from the previous CHNA:

- Improve Awareness/Access to Health Services
- Obesity/Chronic Disease Management
- Women's/Children's Services

MEDIA ACTIVITIES (FACEBOOK) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2021		
July 7	Live with Dr. Lakeisha Chism discussing colon cancer screening: colonoscopy vs. home tests	3.1K
July 12	EMG/Nerve Conduction Study	737
July 13	Live with Dr. Keith Krist at West point Children's Clinic discussing well-child visits/childhood immunizations	2.4K
July 20	Sports Physicals	2K Views
July 28	Live with pharmacist James Taylor at the NMMC Family Medicine Residency	2.7K
July 29	Walk with a Doc	293
July 29	Live: Dr. Crosswhite discusses how to make your wishes known	3.6K
August 2	Relationship Matters	1.3K
August 2	Live: Dr. Bonnie Basler discusses lung cancer screening	1.1K
August 6	Help our Home Team: NMMC Tupelo President David Wilson and Health Care Foundation of North Mississippi	2.8K
August 10	Live with registered dietitian Emily Littlejohn at the NMMC Wellness Center	1.4K
August 16	The North Mississippi Coalition for COVID-10 Vaccination	19.1K
August 17	You're Worth A Shot: Barry Bertolet, M.D.	12.5K
August 18	You're Worth A Shot: Trice W. Sumner, DDS	3.3K
August 21	You're Worth A Shot: Barry Bertolet, M.D.	1.1K
August 22	You're Worth A Shot: C.K. White, M.D.	2.1K

MEDIA ACTIVITIES (FACEBOOK) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
2021		
August 22	You're Worth A Shot: C.K. White, M.D.	2.1K
August 23	You're Worth A Shot: Jeremy Blanchard, M.D.	6.3K
August 24	You're Worth A Shot: Terry Pinson, M.D.	3.6K
August 25	NMHS Clinics Open New COVID-19 Testing Site	958
August 25	Update from Dr. Jeremy Blanchard, Chief Medical Officer, North Mississippi Services	9K
August 31	You're Worth A Shot: Dr. Joe Johnsey	2.5K
August 31	Respiratory Syncytial Virus (RSV)	2.2K
September 1	All About Epidurals	793
September 2	Labor and Delivery Tour	1.3K
September 2	First Days with a Newborn	3.2K
September 2	You're Worth A Shot: Dr. Hoat Hoang	5K
September 3	What Connected Feels Like	3.3K
September 3	Neonatal Intensive Care Unit	780
September 3	Cesarean Delivery	1.4K
September 6	You're Worth A Shot: Dr. Jennifer Thomson-Davis	1.6K
September 7	You're Worth A Shot: Eric Lewis, M.D.	3.5K
September 8	You're Worth A Shot: Vernon Rayford, M.D.	1.2K
September 9	Prostate Cancer Screening	745
September 15	PSA Screening for Prostate Cancer	323
September 22	Saturday Morning Sports Injury Clinic – Dr. Bryan Fagan	510

Actions Taken Since 2019 CHNA

Priority areas from the previous CHNA:

- Improve Awareness/Access to Health Services
- Obesity/Chronic Disease Management
- Women's/Children's Services

MEDIA ACTIVITIES (NMHS WEBSITE) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
	2021	
January 12	Sciatica: The Burning Truth about Leg Pain	154
January 12	High Blood Pressure: The Silent Killer	38
January 15	Questions to Ask Your Doctor	31
January 15	Healthy for Good in the New Year	31
January 19	Chronic Pain: Is it in Your Head?	35
January 22	Life Hacks to Prevent Sudden Cardiac Death	55
January 25	For Childbirth, Choose Hospital Over Home	38
February 2	Your Turn: Please Get the Vaccine	83
February 5	Would I Benefit from a Sleep Study?	56
February 5	Time to Say Goodbye to Your Gallbladder?	32
February 5	Finding relief from Uterine Fibroids	109
February 5	Cold, Dark Days of Winter	38
February 5	Babies Don't Come with Instructions	104
February 8	Which Test When?	27
February 8	Social Determinants of Health	110
February 8	Coming Back from COVID-19	76
February 10	How to Set Attainable Goals	47
February 11	Is Mastectomy the Best Option for Breast Cancer?	83
February 11	COVID-19 and Your Heart	210

MEDIA ACTIVITIES (NMHS WEBSITE) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
	2021	
February 15	Winter Driving Tips	100
February 16	Keeping you Safe and Well	184
March 18	Heart Health and the Impact on Chronic Wounds	63
March 19	The Brain Matters	55
March 23	The Importance of Childhood Vaccines	39
March 24	Helping a Child with Anxiety During COVID-19	140
April 6	COVID-19 vaccination: What You Need to Know	116
April 7	Tornado Awareness: The Real Spin on Weather	42
April 29	Depression: You Are Not Alone	75
May 3	My provider has ordered an EMG/NCS test. Now what?	368
May 6	Issues Linger for COVID-19 Long-Haulers	122
May 11	Self-Care: What It Is and Isn't	126
May 18	I So Have OCD	64
May 19	What Happens After a Stroke?	46
May 31	Why It's Important to See Your Doctor Every Year	86
May 31	Can Weight Loss Surgery Do My Heart Good?	66
June 2	What to Expect with A Routine Mammogram	85
June 10	Keep it Healthy when Eating Out	44
June 10	Don't Give Carbs a Bad Rap	60

Actions Taken Since 2019 CHNA

Priority areas from the previous CHNA:

- Improve Awareness/Access to Health Services
- Obesity/Chronic Disease Management
- Women's/Children's Services

MEDIA ACTIVITIES (NMHS WEBSITE) 2021

PUBLISHED DATE	COMMUNITY ACTIVITY	NUMBER OF VIEWS
	2021	
June 11	The Hard-to-Swallow Truth	81
June 11	Controlling Your Blood Pressure	87
July 15	RSV: The New Old Kid on the Block	174
July 23	Colon Cancer Screening: Colonoscopy vs. Home Screening	63
July 26	Monoclonal Antibodies Infuse Hope for Those with COVID-19	127
August 24	COVID-10 'Magic Pill' Can Be Toxic	332
August 25	Caution: Baby on Board	95
August 26	Packing Your Hospital Bag Before It's Time	186
August 26	How to Know When It's Time	91
August 26	Eating for Two	55
August 26	Early Pregnancy: What to Expect	54
August 26	Caring for Your Newborn	81
August 27	Pregnancy Exercise for a Fit Pregnancy	38
August 27	Is Your Infant Safe	31
August 27	How to Perform Infant CPR and Rescue Breathing	32
September 8	Take a Break and Take a Breath	46
September 10	Coping with Loss	43



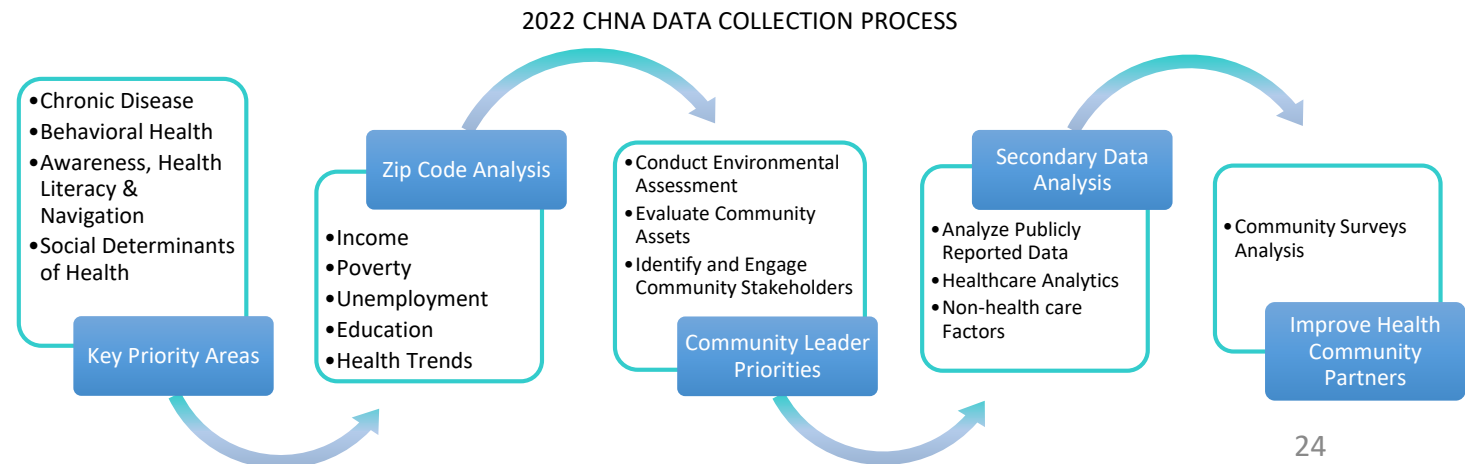
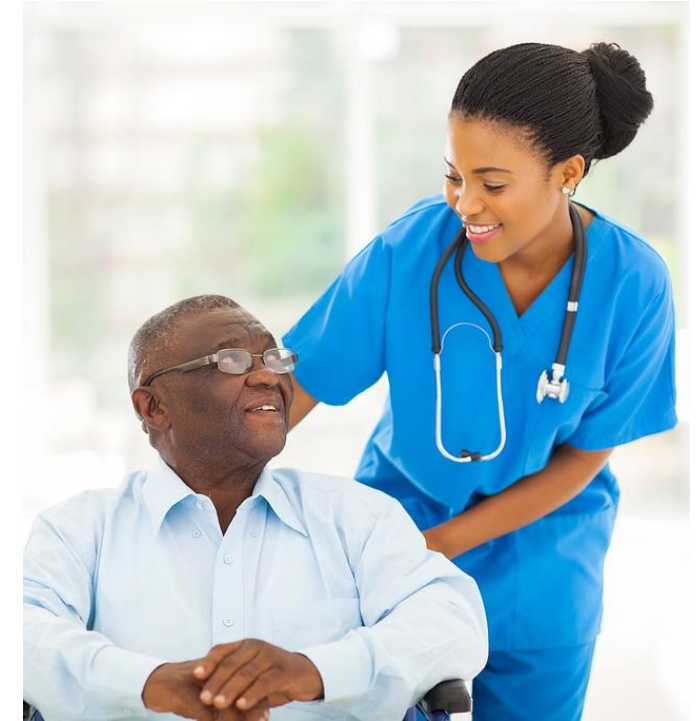
Methodology

Overview

Federal regulations allow us to define the communities we serve based on the relevant facts and circumstances including the geographic locations served by our facilities. Our overall service area includes 20 Mississippi counties and four Alabama counties. This CHNA was compiled/assembled by the Strategy Department of North Mississippi Health Services (NMHS). Significant data from the below secondary sources were gathered, assessed, evaluated and analyzed with demographic and health indicators cited as appropriate:

- U.S. Census Bureau
- County Health Rankings
- CDC
- County Health Departments

Input from the community was received via informant interviews, standardized electronic surveys from key organizations/stakeholders, healthcare advocates/leaders, and interested community partners residing in the service areas served by North Mississippi Medical Center-Tupelo and the health system (see Appendix). Additionally, Improve Health community partners participated.



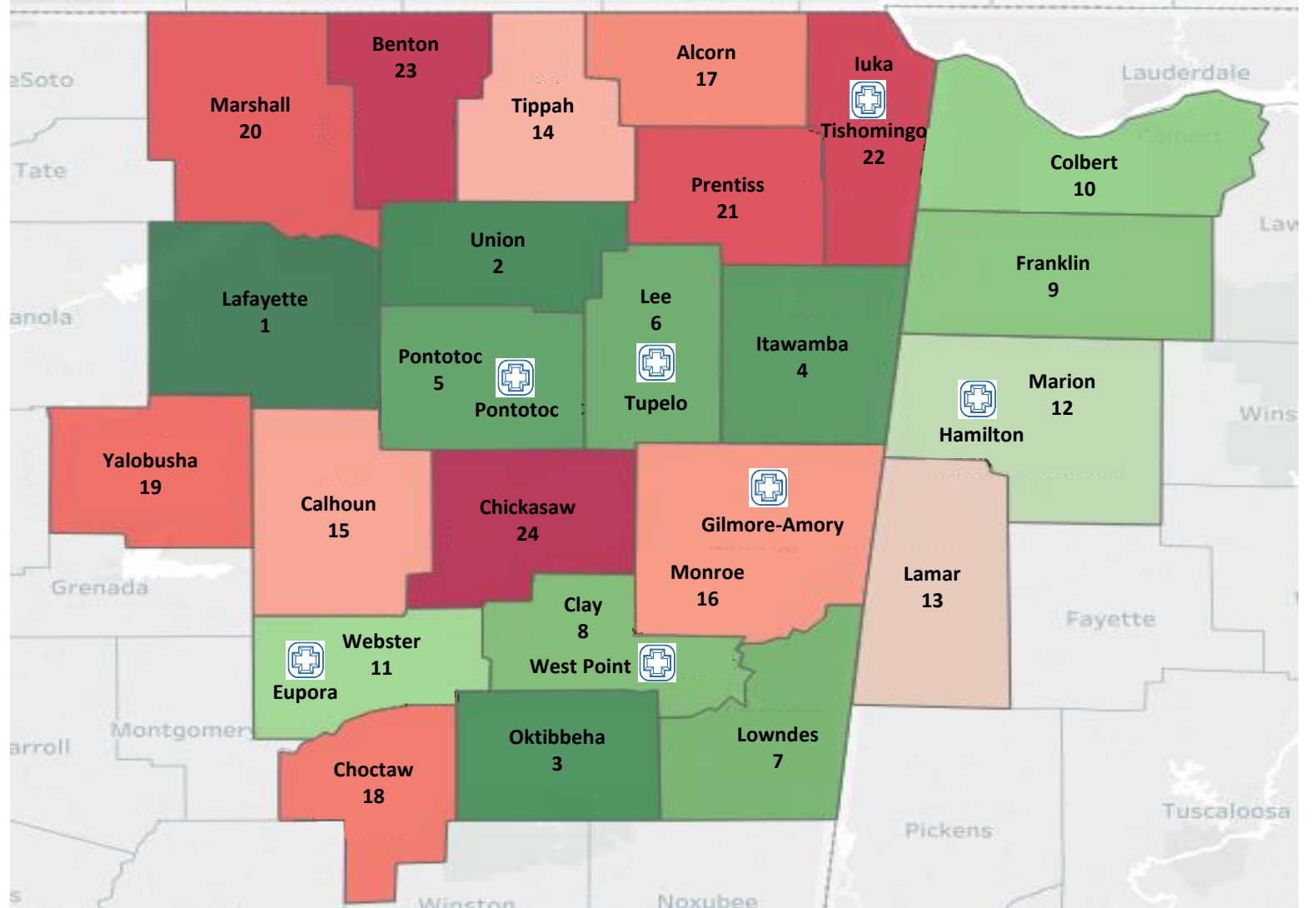
Service Area and Communities Served by North Mississippi Medical Center, Inc.

Ranking of Health Outcomes for the NMMC Service Area (The county with a ranking of #1 is considered the healthiest.)

Health Outcomes represent how healthy a county is relative to other counties. This category reflects the physical and mental well-being of residents within a community through measures that represent the length of life and quality of life.

County	Rank
Alcorn	17
Benton	23
Calhoun	15
Chickasaw	24
Choctaw	18
Clay	8
Colbert	10
Franklin	9
Itawamba	4
Lafayette	1
Lamar	13
Lee	6
Lowndes	7
Marion	12
Marshall	20
Monroe	16
Oktibbeha	3
Pontotoc	5
Prentiss	21
Tippah	14
Tishomingo	22
Union	2
Webster	11
Yalobusha	19

Source: Adapted from the University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021.
<https://www.countyhealthrankings.org/>



Service Area and Communities Served by North Mississippi Medical Center, Inc.

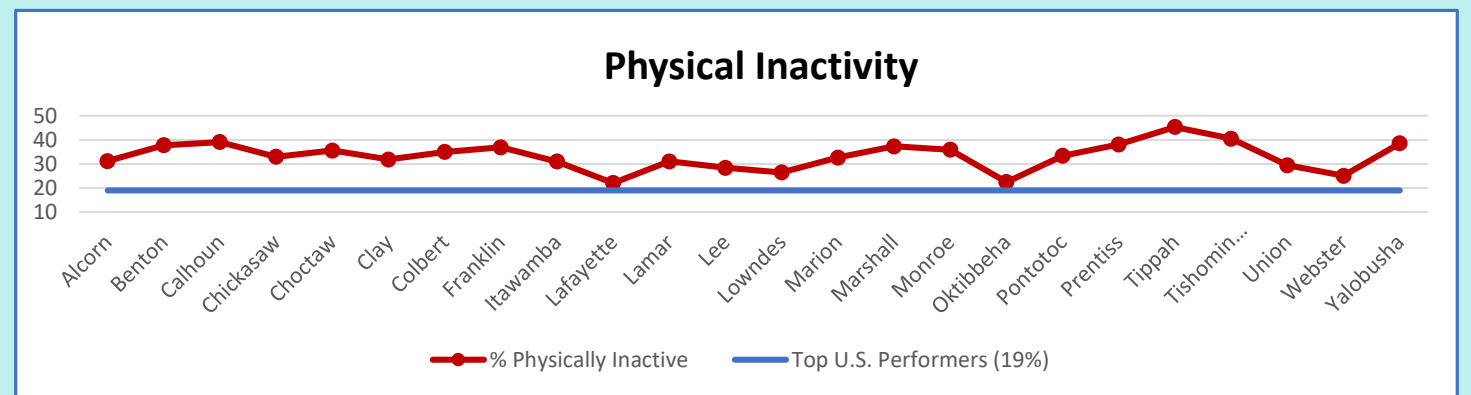
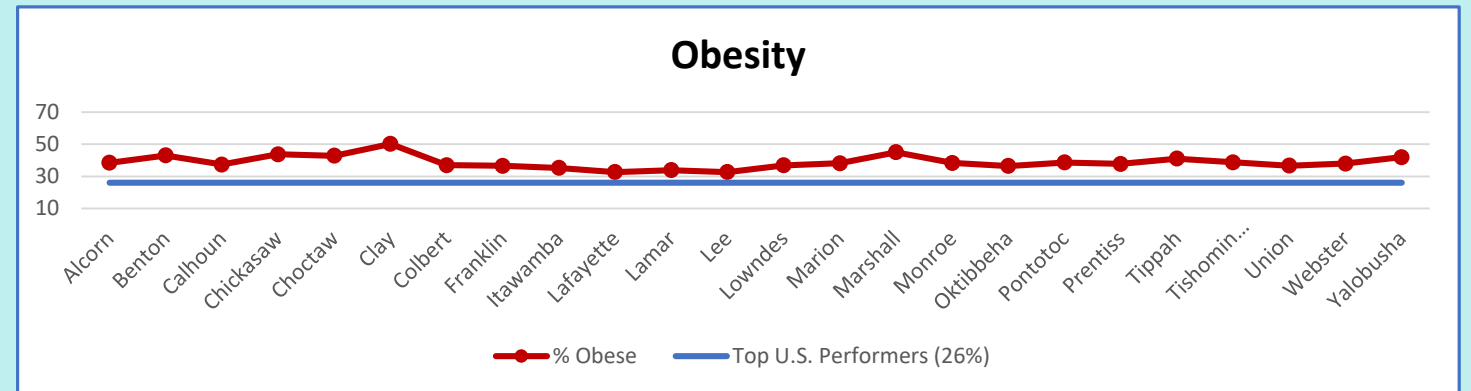
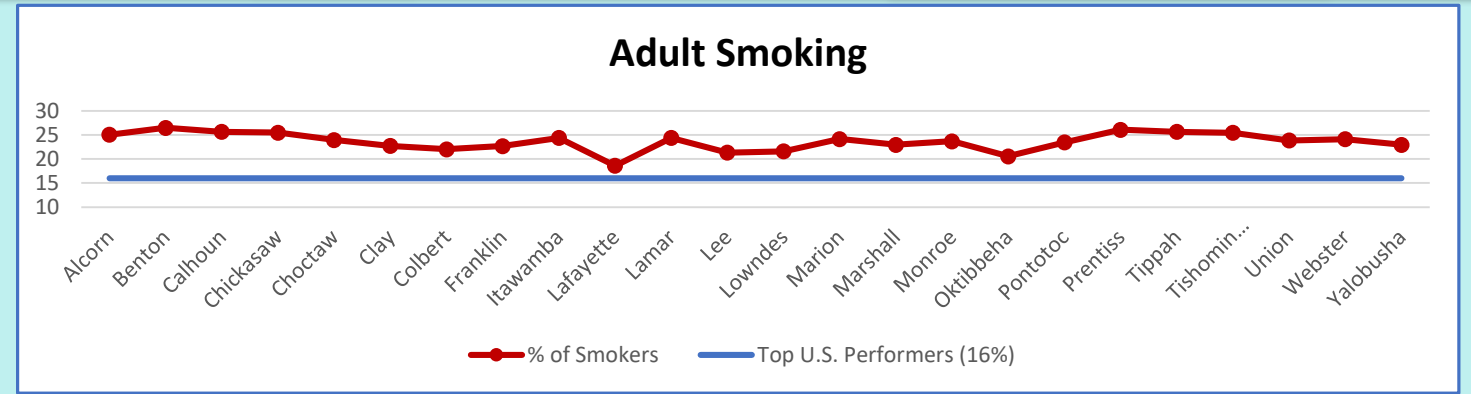
Health Behaviors in NMMC and NMHS Service Area

According to the CDC (Centers for Disease Control and Prevention), obesity, smoking, diet and physical inactivity are common causes of heart disease.

Ways to prevent heart disease and reduce the risk of cancer include choosing healthy foods and drinks, maintaining a healthy weight, getting regular physical activity, and not smoking.

The charts to the right show the percentage of three common causes of heart disease by each of the 24 counties in the NMHS service area.

All counties rank above the top U.S. Performers. The highest rates are 26% (Benton, Calhoun, Prentiss, and Tiptah) for smokers, 50% (Clay) for obesity, and 45% (Tiptah) for physical inactivity.



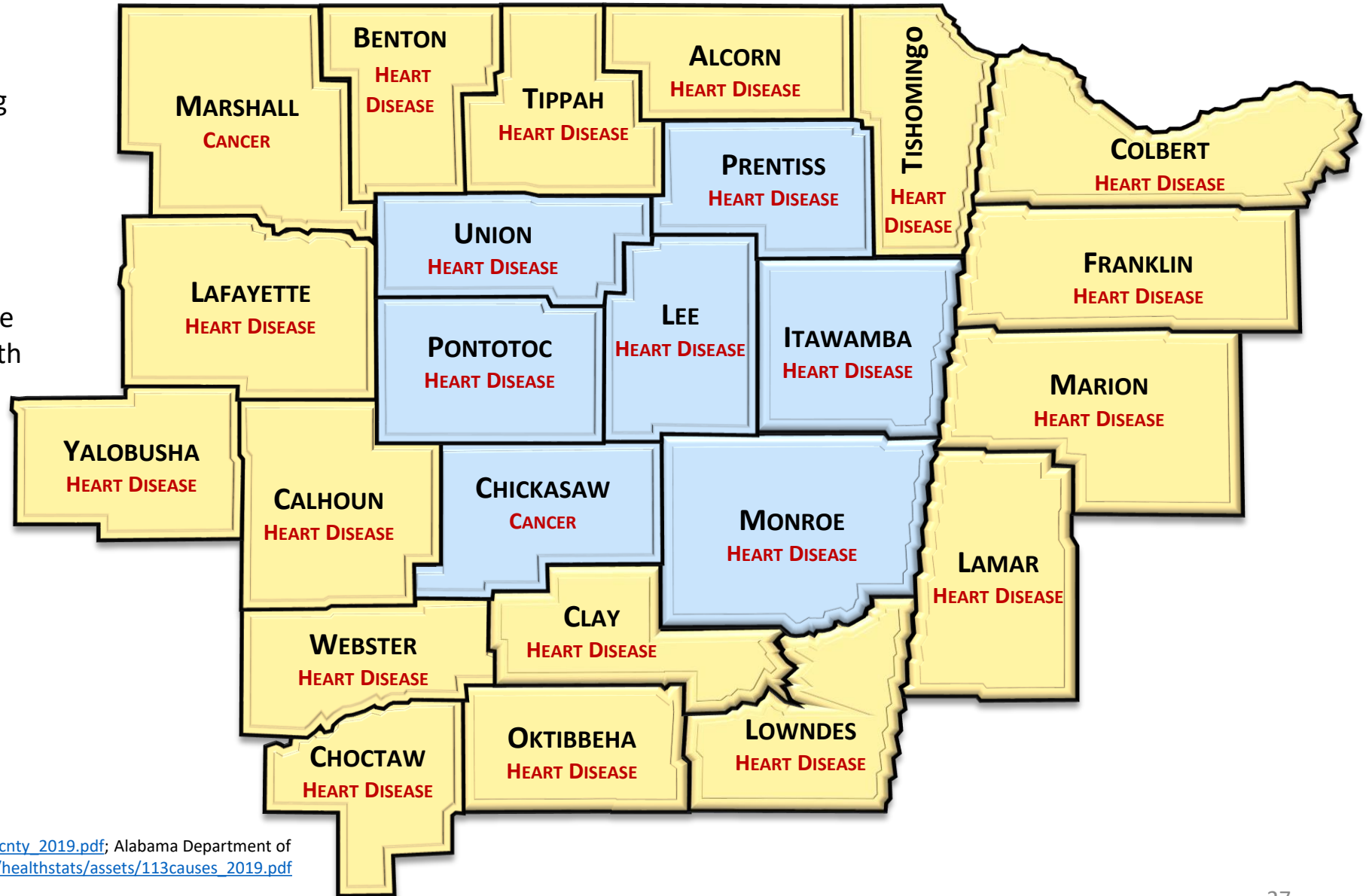
Sources: County Health Rankings, <https://www.countyhealthrankings.org/>; CDC, [Centers for Disease Control and Prevention \(cdc.gov\)](https://www.cdc.gov/)

Service Area and Communities Served by North Mississippi Medical Center, Inc.

Top Causes of Death

Cardiovascular disease, including heart disease and stroke, is the leading cause of death in Mississippi and Alabama.

Within the 24 counties in the NMHS service area, heart disease is the leading cause of death, with the exception of Marshall and Chickasaw (cancer).



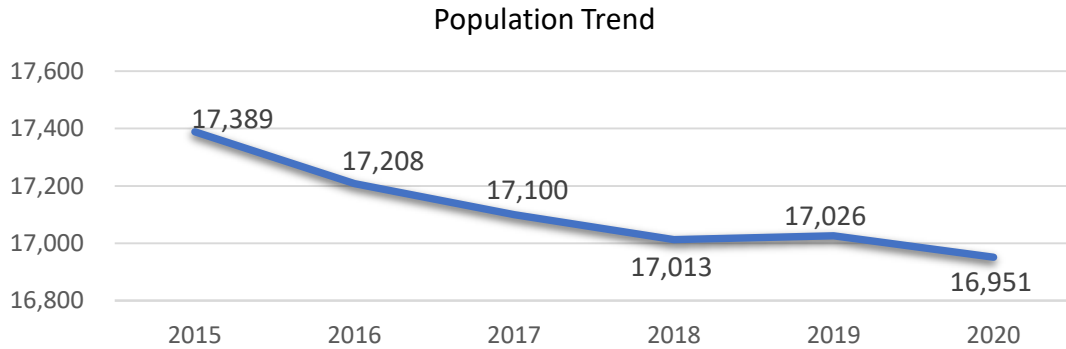
Sources: Mississippi Department of Health, https://msdh.ms.gov/phs/2019/Summary/dthsumm_cnty_2019.pdf; Alabama Department of Public Health, https://www.alabamapublichealth.gov/healthstats/assets/113causes_2019.pdf

Demographics

Chickasaw County

Population

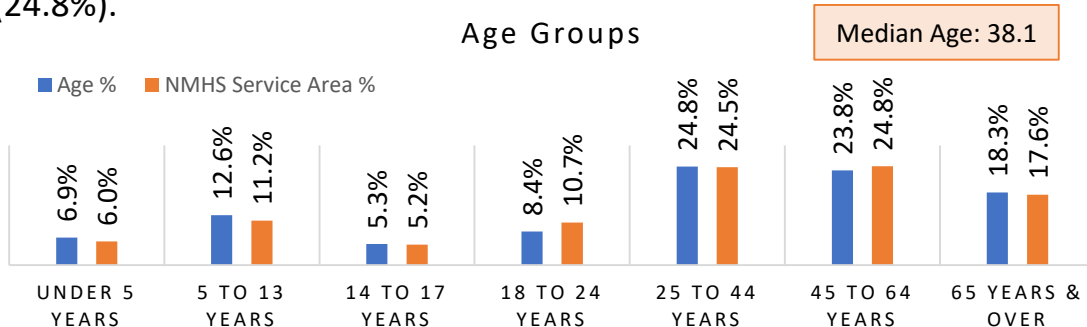
According to the U.S. Census Bureau, the population in Chickasaw County decreased from 2015 to 2020.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Age

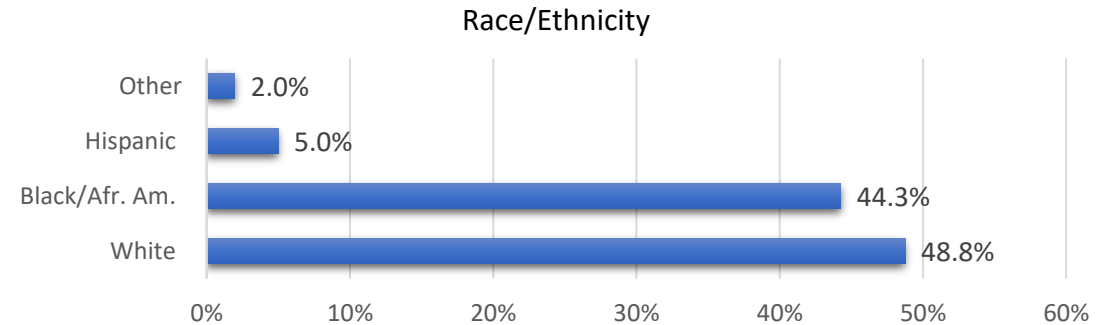
Chickasaw County has a higher percentage of residents age 25 to 44 years (24.8%).



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Race/Ethnicity

The racial composition of the population in Chickasaw County is shown below. Other includes Asian, American Indian & Alaska Native, Native Hawaiian & Other Pacific Islander, Native Hawaiian & Other Pacific Islander, and 2 or More Races.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Ratio of Population to Providers

In Chickasaw County, mental health providers maintain the largest ratio compared to primary care physicians and dentists. Ratios represent the number of individuals served by one provider.

Primary care physicians include non-federal M.D.'s and D.O.'s under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

Primary Care Physicians	1,908:1
Dentists	3,421:1
Mental Health Providers	4,276:1

Sources: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>; U.S. Census Bureau. <https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>

People per square mile 34.1

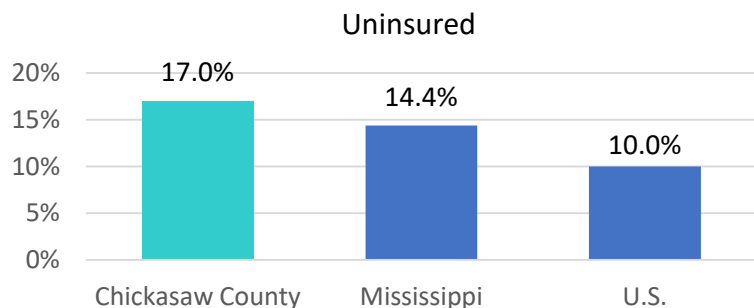
Demographics

Chickasaw County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Uninsured

The percentage of population under age 65 without health insurance in Chickasaw County is 17%, which is higher than the state of Mississippi and the U.S.

The lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security.

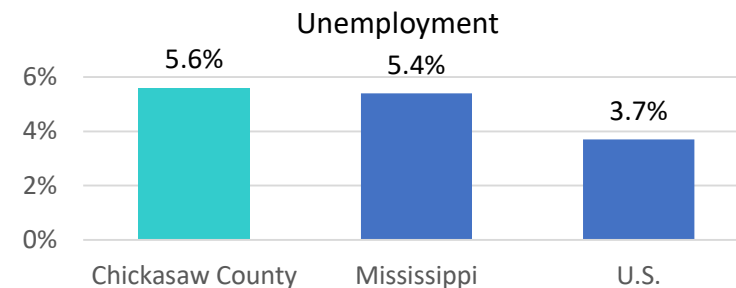


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Unemployment

Chickasaw County has a higher percentage of unemployment (5.6%) than the state of Mississippi and the U.S.

Unemployment has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, leading to an increased risk for disease or mortality, especially suicide.

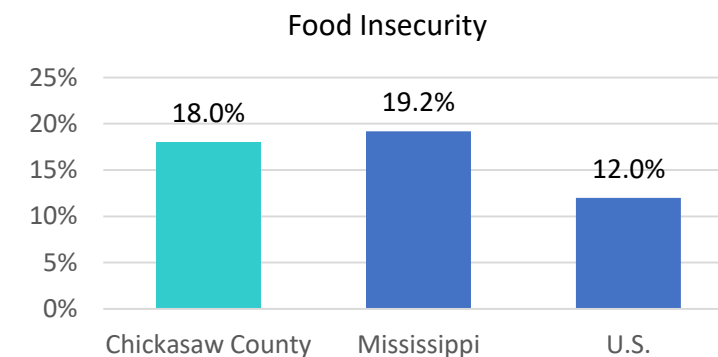


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Food Insecurity

Chickasaw County has a lower food insecurity rate (18.0%) than Mississippi.

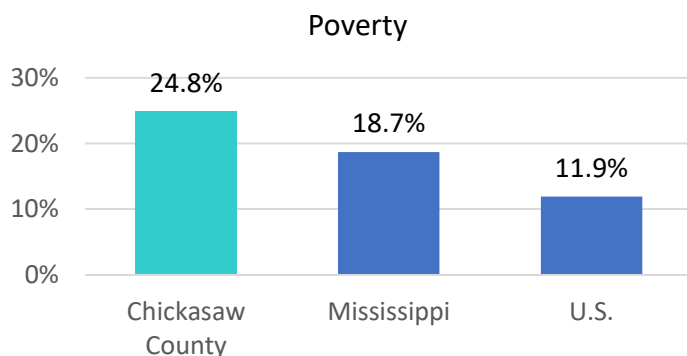
Lacking consistent access to food is related to negative health outcomes such as weight-gain and premature mortality.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Poverty

Chickasaw County has a higher percentage of poverty (24.8%) than the state of Mississippi and the U.S.

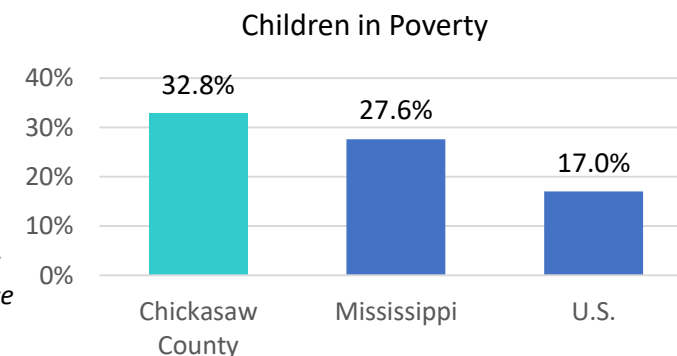


Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

Children in Poverty

The percentage of children in poverty in Chickasaw County is higher (32.8%) compared to the state of Mississippi and the U.S.

While impacts from poverty are present at all ages, children in poverty may experience lasting effects on academic achievement, health, and income into adulthood.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

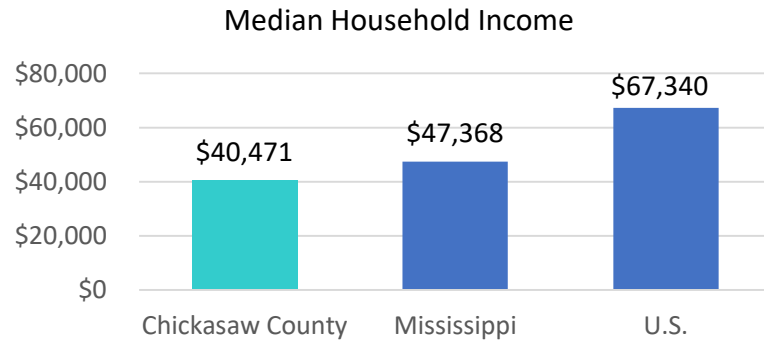
Demographics

Chickasaw County – Social Determinants of Health (conditions in which people are born, grow live, work, and age)

Income

The median household income in Chickasaw County is \$40,471, which is lower than the state of Mississippi and the U.S.

Median household income is an indicator of income and poverty, which can compromise physical and mental health.



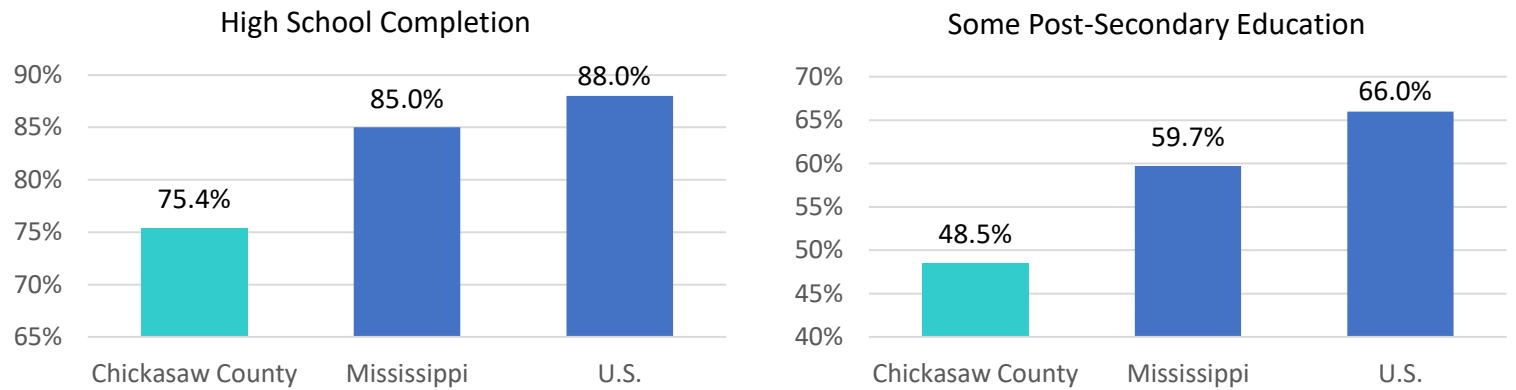
Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>



Education

The percentage of adults age 25 and over with a high school diploma or equivalent in Chickasaw County is 75.4%. The percentage of adults ages 25-44 with some post-secondary education (enrollment in vocational/technical schools, junior colleges, or four-year colleges) is 48.5%.

Better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive.

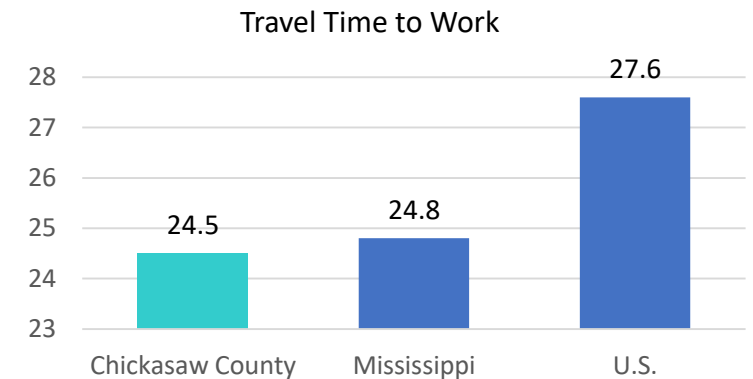


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Mean Travel Time to Work

The average one-way commute in the United States reached a new high of 27.6 minutes. Chickasaw County has a lower mean time of 24.5 minutes.

Source: U.S. Census Bureau. <https://data.census.gov/cedsci/table?q=DP03&g=0500000US28017&tid=ACSDP5Y2019.DP03>



Demographics

Chickasaw County – Health Rankings

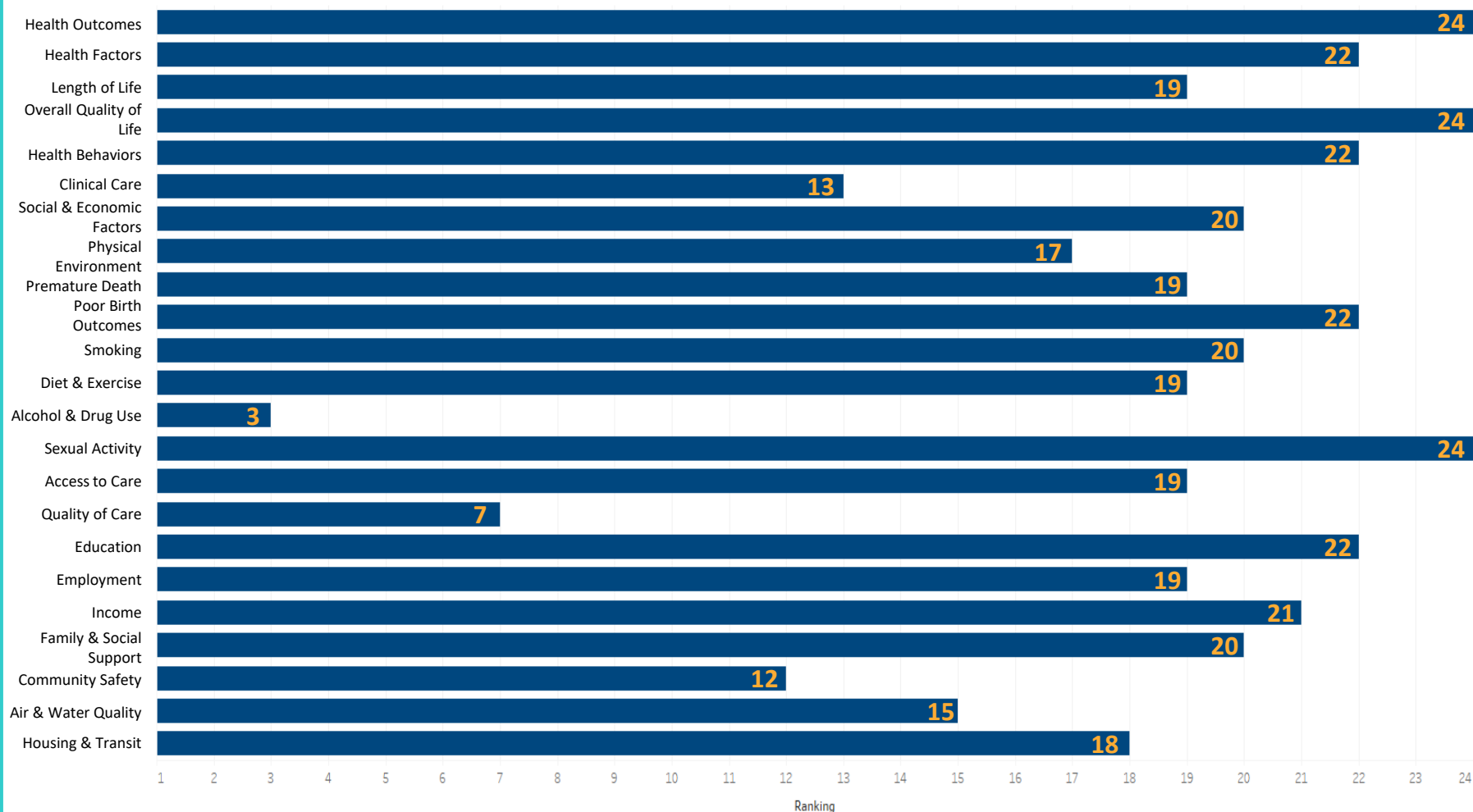
The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

By ranking the health of nearly every county, the County Health Rankings help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors).

The graph displays how health outcomes and factors in Chickasaw County rank in comparison to the 24 counties in NMHS' service area.

Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Chickasaw County Health Outcomes and Factors



Source: Adapted from the University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>
 Note: Each category ranked from 1 to 24 based on the number of NMHS counties, i.e., continuum from most healthy (1) to least healthy (24)

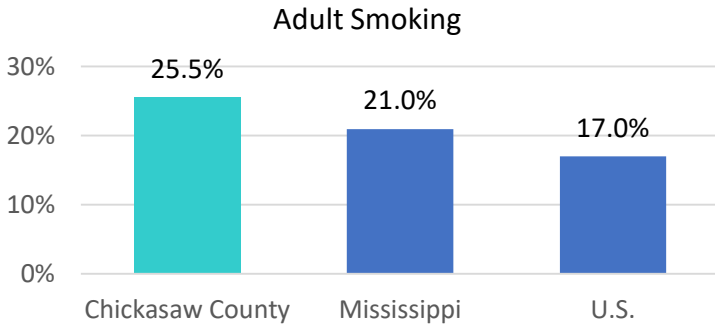
Demographics

Chickasaw County – Health Behaviors and Factors

Adult Smoking

Chickasaw County has a higher percentage of smokers (25.5%) than the state of Mississippi and the U.S.

Cigarette smoking can cause various cancers, cardiovascular disease, respiratory conditions, low birthweights, and other adverse health outcomes.

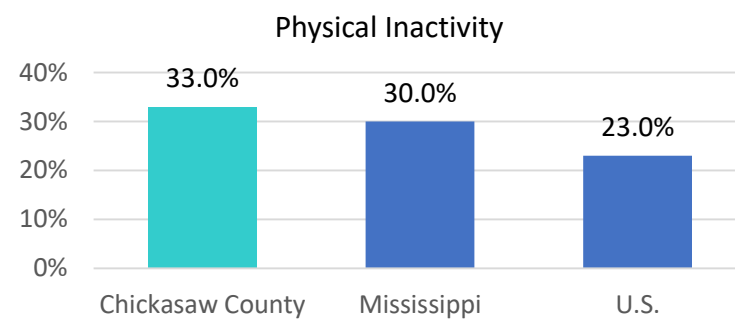


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Physical Inactivity

Chickasaw County has a higher percentage of adults age 20 and over with physical inactivity (33.0%) than the state of Mississippi and the U.S.

Physical inactivity has been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, and cardiovascular disease.

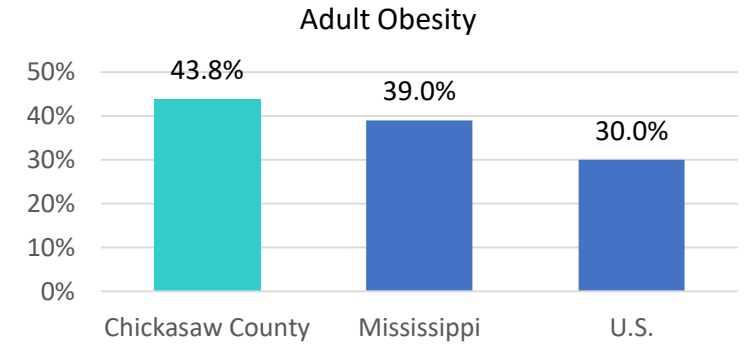


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Adult Obesity

The percentage of adults age 20 and over with a body mass index (BMI) greater than or equal to 30 in Chickasaw County is 43.8%.

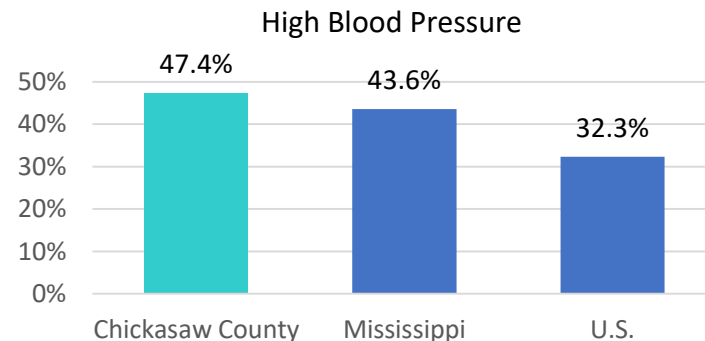
Obesity increases the risk for coronary heart disease, type 2 diabetes, cancer, hypertension, sleep apnea, and stroke.



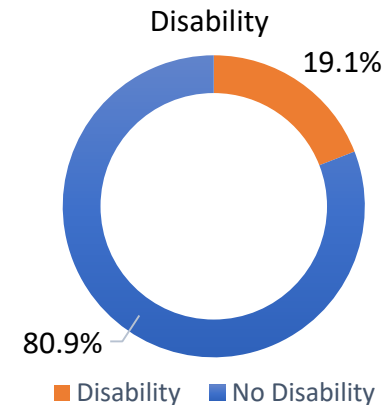
Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Hypertension

According to the CDC, the estimated prevalence of high blood pressure among adults aged 18 years and older is 47.4% in Chickasaw County which is higher than the state of Mississippi and the U.S.



Source: Centers for Disease Control and Prevention. <https://experience.arcgis.com/experience/22c7182a162d45788dd52a2362f8ed65>; BRFSS Prevalence & Trends Data: [Explore by Location | DPH | CDC](https://www.cdc.gov/brfss/)



Disability

The percentage of people living with disabilities is highest in the South. Chickasaw County's rate is 19.1%.

Adults living with disabilities are more likely to be obese, smoke, have heart disease, and diabetes.

Sources: U. S. Census Bureau. <https://data.census.gov/cedsci/>; CDC, [Disability Impacts All of Us Infographic | CDC](https://www.cdc.gov/ncbddd/disabilityandhealth/diagnoses.html)

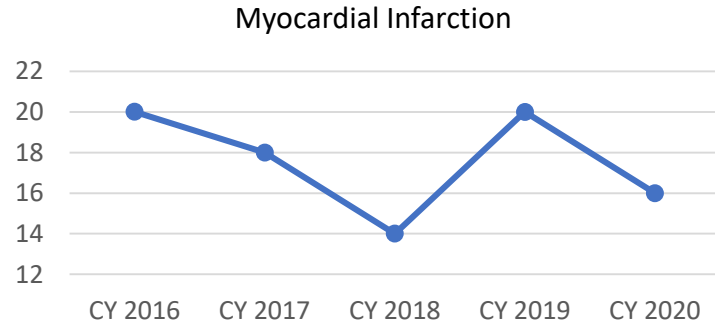
Demographics

Chickasaw County – Chronic Diseases

Myocardial Infarction (Heart Attack)

According to Dimensions, a Mississippi Hospital Association (MHA) program, heart attacks decreased in Chickasaw County from 2016 – 2018.

Heart disease is the #1 cause of death in Mississippi.

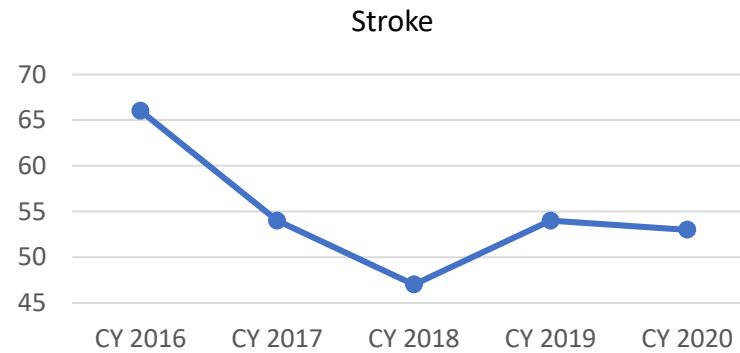


Source: Mississippi Department of Health, [Heart Health - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/HeartHealth)

Stroke

Strokes decreased in Chickasaw County from 2016 to 2018.

Stroke is one of the top five causes of death in Mississippi.

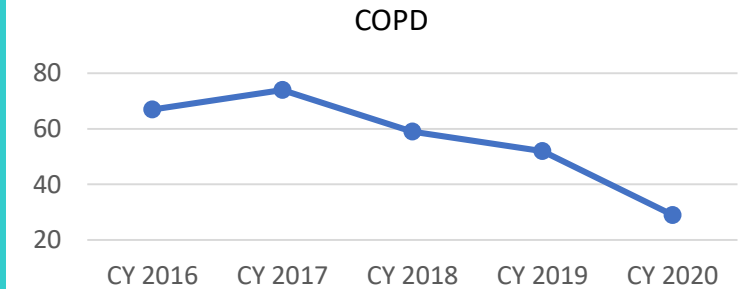


Source: Mississippi Department of Health, [Stroke Prevention - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/StrokePrevention)

COPD (Chronic Obstructive Pulmonary Disease)

COPD decreased in Chickasaw County from 2017 to 2020.

It is estimated that more than 140,000 Mississippians are currently diagnosed with COPD.

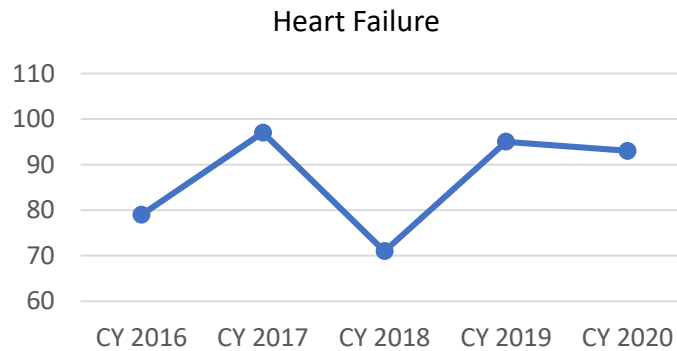


Source: Mississippi Department of Health, [Chronic Obstructive Pulmonary Disease \(COPD\) - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/COPD)

Heart Failure

Heart failures increased in Chickasaw County in 2017 and 2019.

Lifestyle factors that increase the risk of heart attack and stroke can also contribute to heart failure.



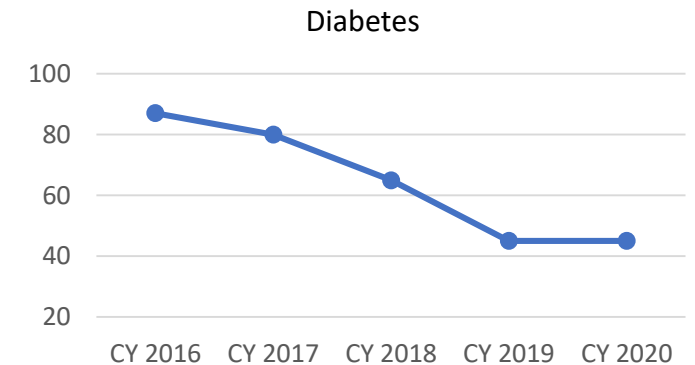
Source: AHA, [Causes and Risks for Heart Failure | American Heart Association](https://www.heart.org)

Source: Mississippi Hospital Association, Dimensions, 2016 - 2020. Reports for graphs published October 2021.

Diabetes

Diabetes decreased in Chickasaw County from 2016 to 2020.

Moderate diet and exercise that result in 5 to 7 percent weight loss can delay and possibly prevent type 2 diabetes.



Source: Mississippi Department of Health, [https://msdh.ms.gov/msdhsite/ static/43,0,296.html](https://msdh.ms.gov/msdhsite/static/43,0,296.html)

Demographics

Chickasaw County

Causes of Death

In Chickasaw County, cancer is the top cause of death with a rate of 321.6 deaths per 100,000 population.

Cancer, or malignant neoplasms, is the second leading cause of death in the state of Mississippi.

CAUSE	2019 RATE*
MALIGNANT NEOPLASMS (CANCER)	321.6
HEART DISEASE	280.7
EMPHYSEMA & OTHER CHRONIC LOWER RESP. DISEASES / ACCIDENTS	76.0
ALZHEIMER'S DISEASE	70.2
CEREBROVASCULAR DISEASE (STROKE)	35.1
INFLUENZA & PNEUMONIA	29.2
NEPHRITIS, NEPHROTIC SYNDROME & NEPHROSIS	29.2
DIABETES MELLITUS	29.2
CHRONIC LIVER DISEASE & CIRRHOSIS	17.5
HOMICIDE	17.5
SEPTICEMIA	17.5
CONGENITAL MALFORMATIONS & CHROM. ABNORMALITIES	11.7
PNEUMONITIS DUE TO SOLIDS & LIQUIDS	11.7
PARKINSON'S DISEASE	11.7
HYPERTENSION/HYPERTENSIVE RENAL DISEASE	11.7
SUICIDE	5.8
MATERNAL CAUSES (PER 1,000 LIVE BIRTHS)	413.2

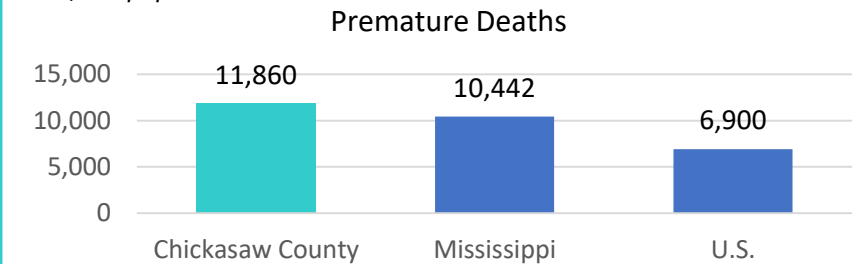
*Rate is the number of deaths per 100,000 population.

Source: [Mississippi State Department of Health - Home \(ms.gov\)](https://www.ms.gov)

Premature Deaths

Chickasaw County has a higher number of premature deaths (11,860) compared to the state of Mississippi and the U.S.

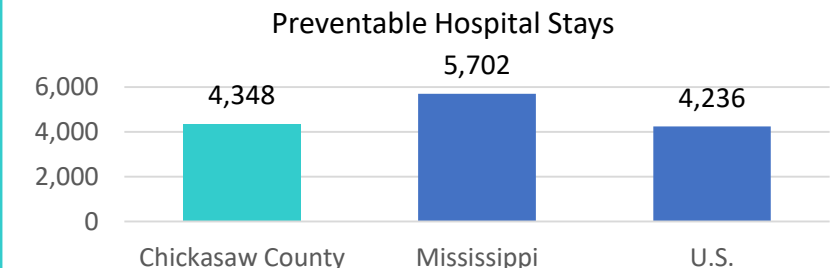
Premature death is the years of potential life lost before age 75 per 100,000 population.



Preventable Hospital Stays

Chickasaw County has a lower number of preventable hospital stays (4,348) compared to the state of Mississippi.

Preventable hospital stay is the rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.



Source: County Health Rankings & Roadmaps 2021.

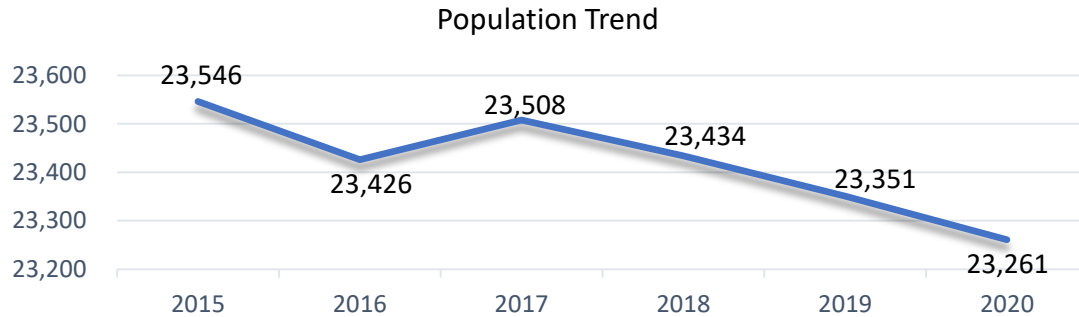
<https://www.countyhealthrankings.org/>

Demographics

Itawamba County

Population

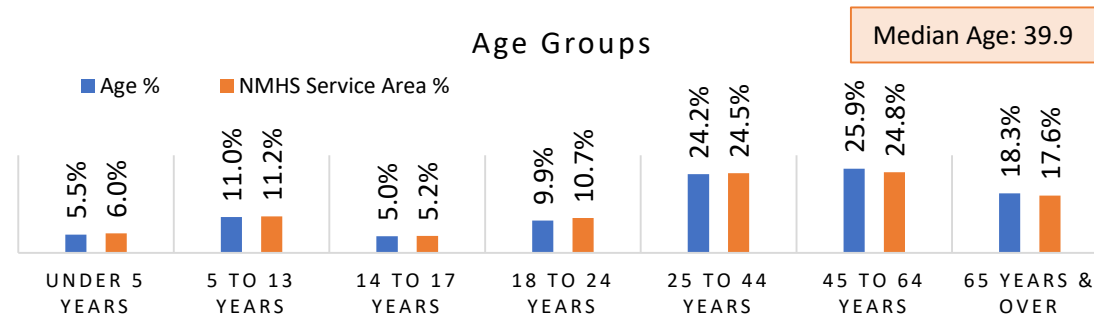
According to the U.S. Census Bureau, the population in Itawamba County decreased from 2017 to 2020.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Age

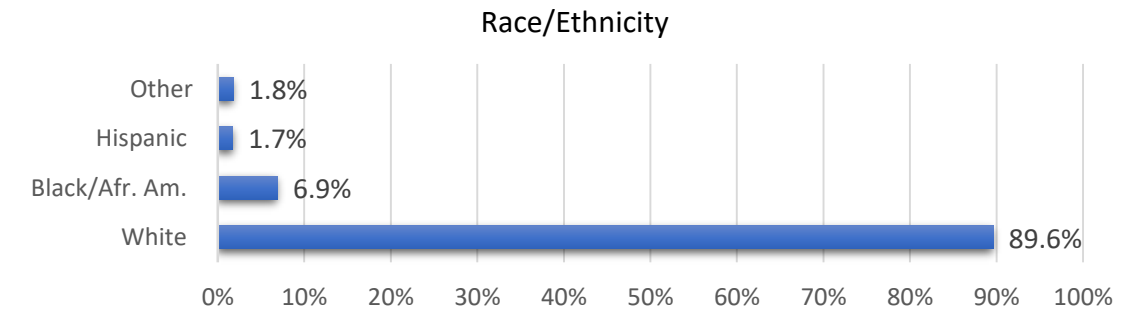
Itawamba County has a higher percentage of residents age 45 to 64 years (25.9%).



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Race/Ethnicity

The racial composition of the population in Itawamba County is shown below. Other includes Asian, American Indian & Alaska Native, Native Hawaiian & Other Pacific Islander, Native Hawaiian & Other Pacific Islander, and 2 or More Races.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Ratio of Population to Providers

In Itawamba County, primary care physicians maintain the largest ratio compared to mental health providers and dentists. Ratios represent the number of individuals served by one provider.

Primary care physicians include non-federal M.D.'s and D.O.'s under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

Primary Care Physicians	5,879:1
Dentists	5,848:1
Mental Health Providers	5,848:1

Sources: County Health Rankings & Roadmaps 2021.

<https://www.countyhealthrankings.org/>; U.S. Census Bureau. <https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>

People per square mile 44.8

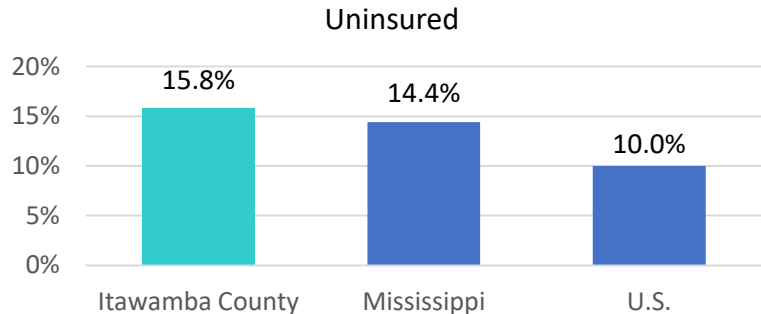
Demographics

Itawamba County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Uninsured

The percentage of population under age 65 without health insurance in Itawamba County is 15.8%, which is higher than the state of Mississippi and the U.S.

The lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security.

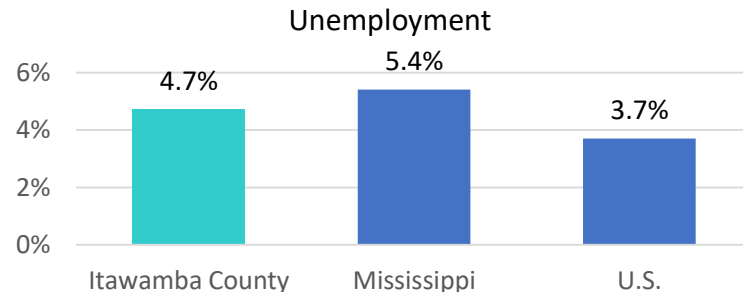


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Unemployment

Itawamba County has a lower percentage of unemployment (4.7%) than the state of Mississippi.

Unemployment has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, leading to an increased risk for disease or mortality, especially suicide.

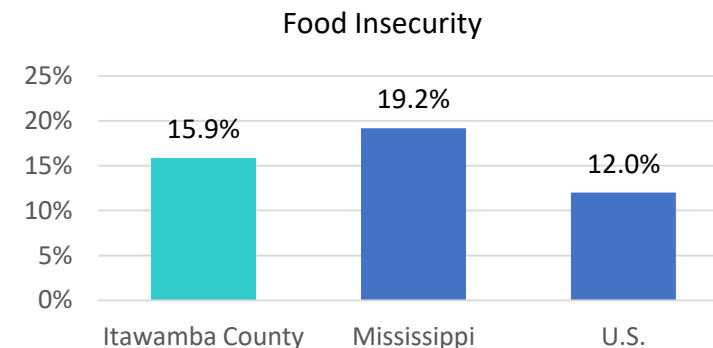


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Food Insecurity

Itawamba County has a lower food insecurity rate (15.9%) than Mississippi.

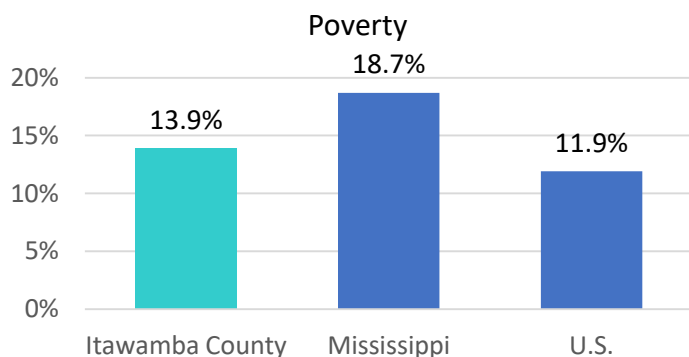
Lacking consistent access to food is related to negative health outcomes such as weight-gain and premature mortality.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Poverty

Itawamba County has a lower percentage of poverty (13.9%) than the state of Mississippi.

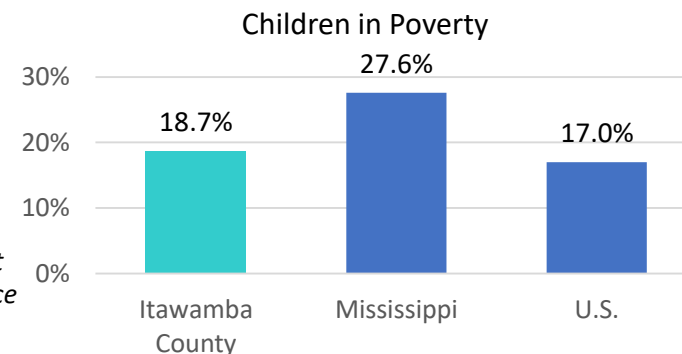


Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

Children in Poverty

The percentage of children in poverty in Itawamba County is lower (18.7%) than the state of Mississippi.

While impacts from poverty are present at all ages, children in poverty may experience lasting effects on academic achievement, health, and income into adulthood.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

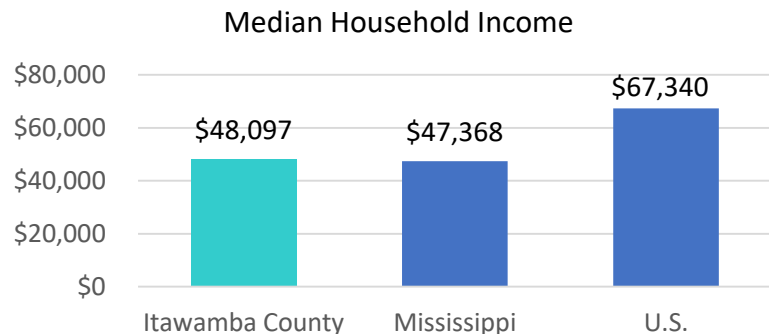
Demographics

Itawamba County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Income

The median household income in Itawamba County is \$48,097, which is higher than the state of Mississippi.

Median household income is an indicator of income and poverty, which can compromise physical and mental health.



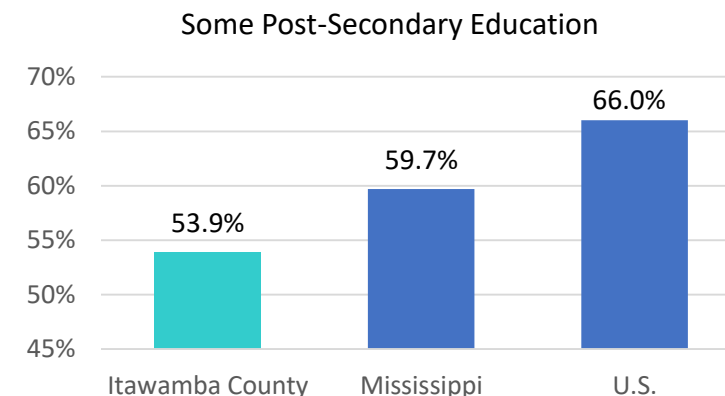
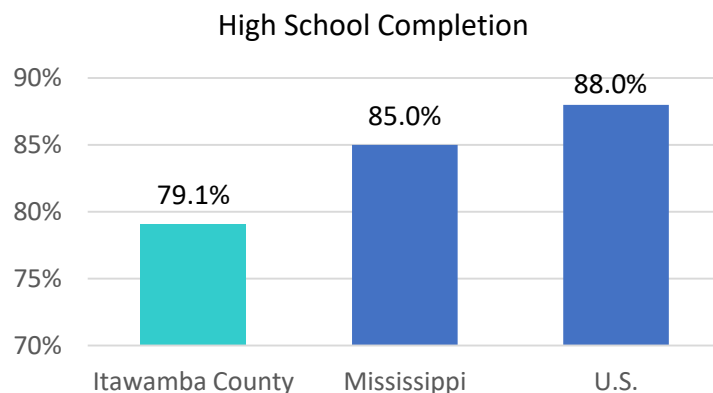
Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>



Education

The percentage of adults age 25 and over with a high school diploma or equivalent in Itawamba County is 79.1%. The percentage of adults ages 25-44 with some post-secondary education (enrollment in vocational/technical schools, junior colleges, or four-year colleges) is 53.9%.

Better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive.

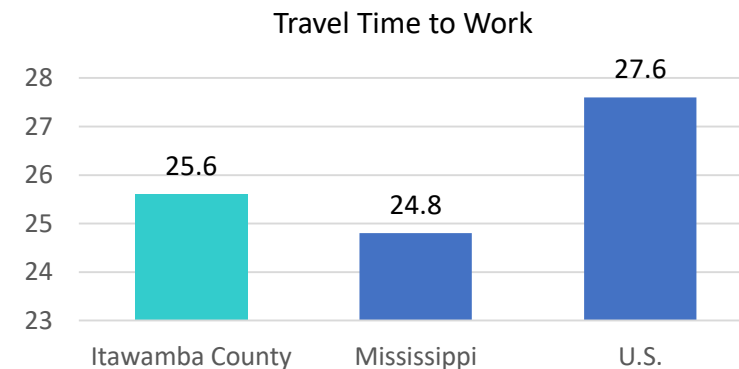


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Mean Travel Time to Work

The average one-way commute in the United States came to a new high of 27.6 minutes in 2019. Itawamba County has a lower mean time of 25.6.

Source: U.S. Census Bureau. <https://data.census.gov/cedsci/table?q=DP03&g=0500000US28017&tid=ACSDP5Y2019.DP03>



Demographics

Itawamba County – Health Rankings

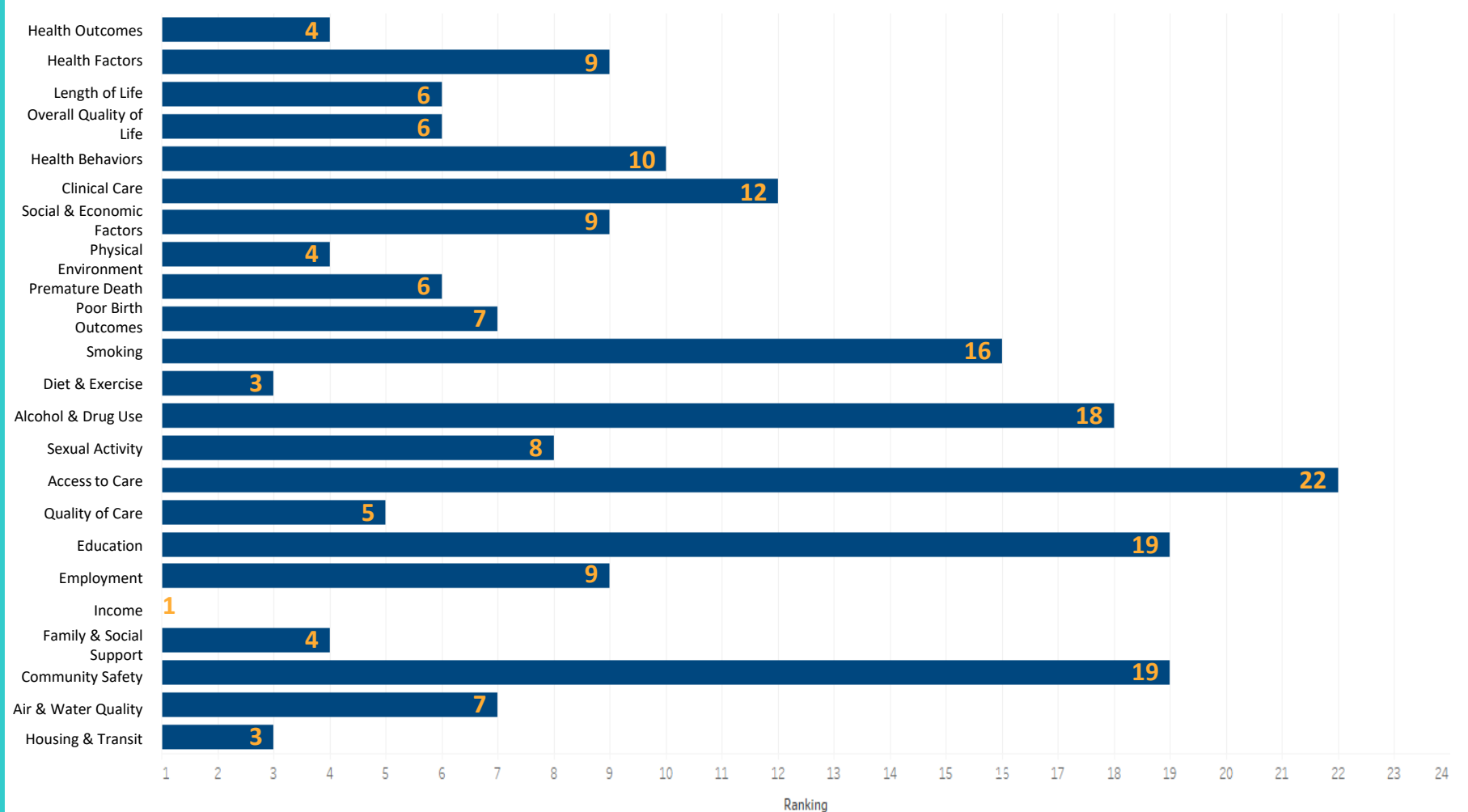
The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

By ranking the health of nearly every county, the County Health Rankings help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors).

The graph displays how health outcomes and factors in Itawamba County rank in comparison to the 24 counties in NMHS' service area.

Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Itawamba County Health Outcomes and Factors



Source: Adapted from the University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>
 Note: Each category ranked from 1 to 24 based on the number of NMHS counties, i.e., continuum from most healthy (1) to least healthy (24)

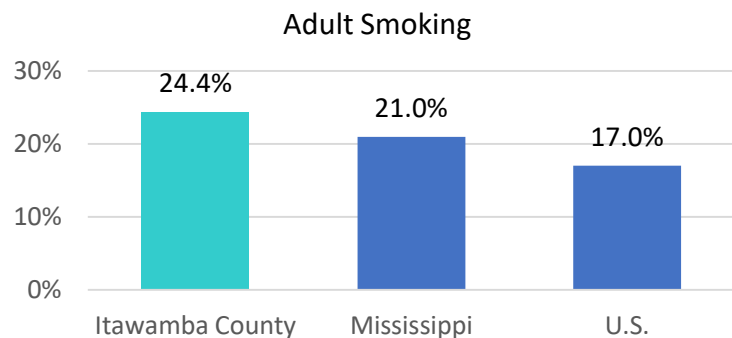
Demographics

Itawamba County – Health Behaviors and Factors

Adult Smoking

Itawamba County has a higher percentage of smokers (24.4%) than the state of Mississippi and the U.S.

Cigarette smoking can cause various cancers, cardiovascular disease, respiratory conditions, low birthweights, and other adverse health outcomes.

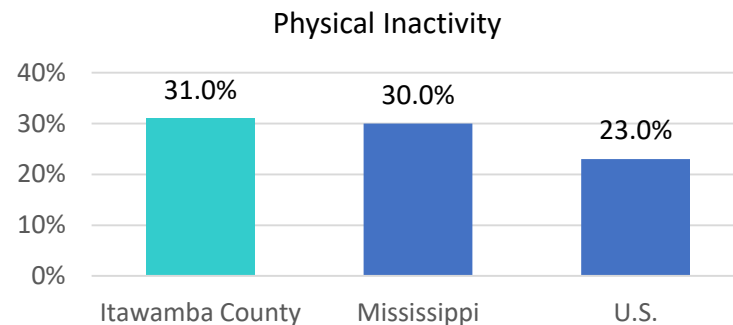


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Physical Inactivity

Itawamba County has a higher percentage of adults age 20 and over with physical inactivity (31.0%) than the state of Mississippi and the U.S.

Physical inactivity has been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, and cardiovascular disease.

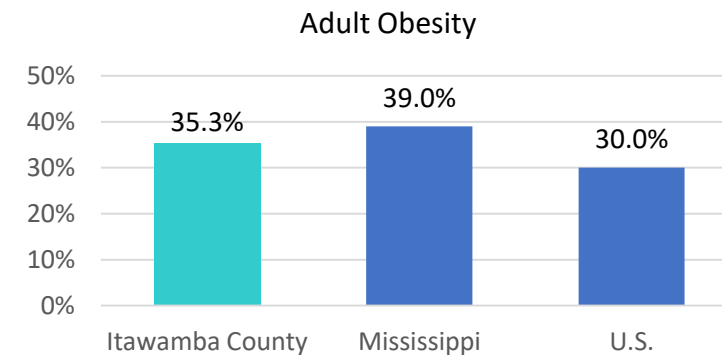


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Adult Obesity

The percentage of adults age 20 and over with a body mass index (BMI) greater than or equal to 30 in Itawamba County is 35.3%.

Obesity increases the risk for coronary heart disease, type 2 diabetes, cancer, hypertension, sleep apnea, and stroke.

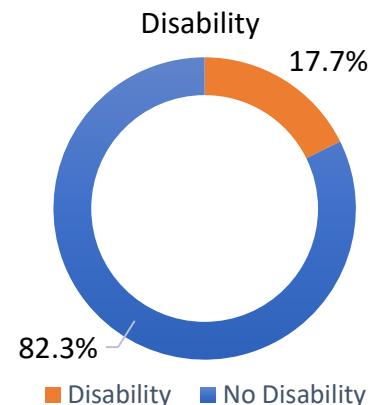
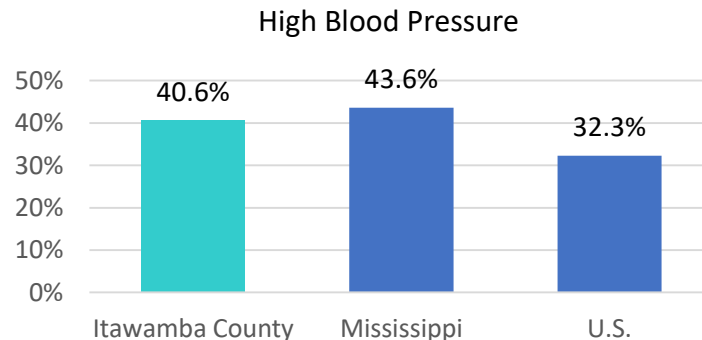


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Hypertension

According to the CDC, the estimated prevalence of high blood pressure among adults is 40.6% in Itawamba County which is lower than the state of Mississippi.

Source: Centers for Disease Control and Prevention. <https://experience.arcgis.com/experience/22c7182a162d45788dd52a2362f8ed65>; <https://www.cdc.gov/brfss/brfssprevalence/index.html>



Disability

The percentage of people living with disabilities is highest in the South. Itawamba County's rate is 17.7%.

Adults living with disabilities are more likely to be obese, smoke, have heart disease, and diabetes.

Sources: U. S. Census Bureau. <https://data.census.gov/cedsci/>; CDC, [Disability Impacts All of Us Infographic | CDC](https://www.cdc.gov/brfss/brfssprevalence/index.html)

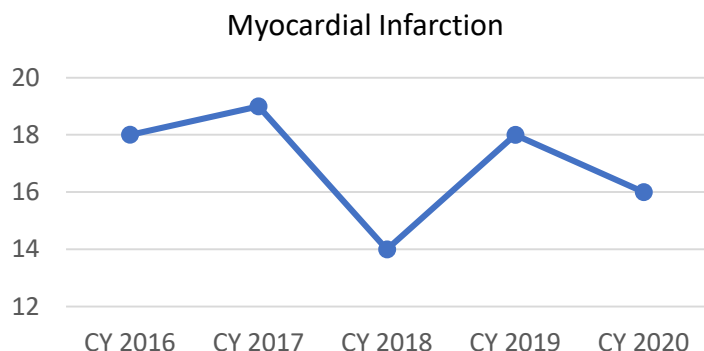
Demographics

Itawamba County – Chronic Diseases

Myocardial Infarction (Heart Attack)

According to Dimensions, a Mississippi Hospital Association (MHA) program, heart attacks increased in Itawamba County in 2017 and 2019.

Heart disease is the #1 cause of death in Mississippi.

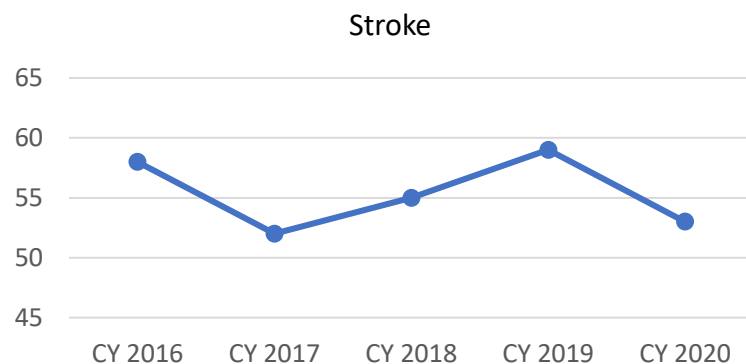


Source: Mississippi Department of Health, [Heart Health - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/heart-health)

Stroke

Strokes increased in Itawamba County from 2017 to 2019.

Stroke is one of the top five causes of death in Mississippi.

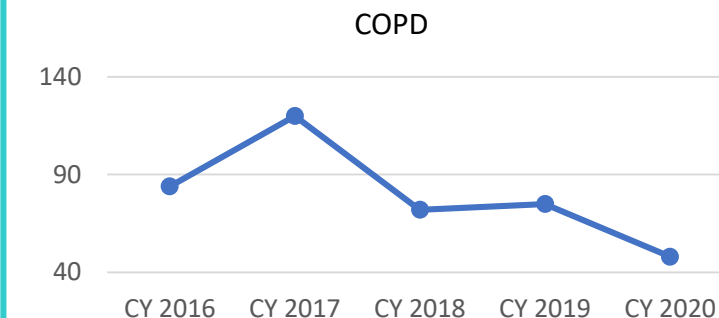


Source: Mississippi Department of Health, [Stroke Prevention - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/stroke-prevention)

COPD (Chronic Obstructive Pulmonary Disease)

COPD increased in Itawamba County in 2017 and 2019.

It is estimated that more than 140,000 Mississippians are currently diagnosed with COPD.

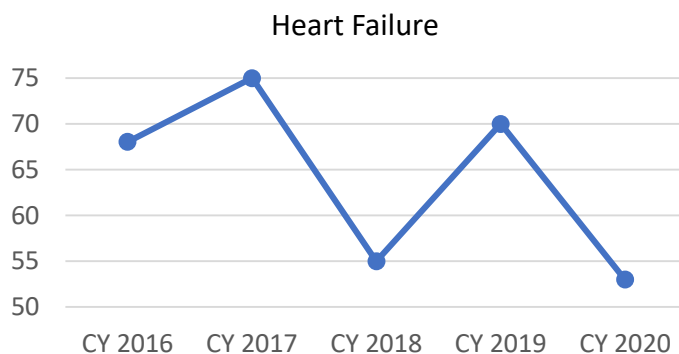


Source: Mississippi Department of Health, [Chronic Obstructive Pulmonary Disease \(COPD\) - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/chronic-obstructive-pulmonary-disease)

Heart Failure

Heart failures increased in Itawamba County in 2017 and 2019.

Lifestyle factors that increase the risk of heart attack and stroke can also contribute to heart failure.



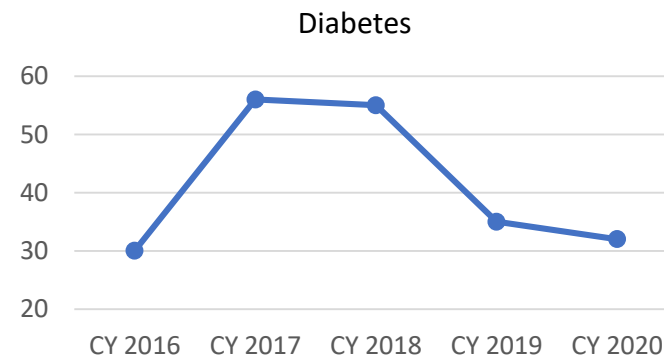
Source: AHA, [Causes and Risks for Heart Failure | American Heart Association](https://www.heart.org/health-topics/heart-failure)

Source: Mississippi Hospital Association, Dimensions, 2016 - 2020. Reports for graphs published October 2021.

Diabetes

Diabetes decreased in Itawamba County from 2017 to 2020.

Moderate diet and exercise that result in 5 to 7 percent weight loss can delay and possibly prevent type 2 diabetes.



Source: Mississippi Department of Health, https://msdh.ms.gov/msdhsite/_static/43,0,296.html

Demographics

Itawamba County

Causes of Death

In Itawamba County, heart disease is the top cause of death with a rate of 401.9 deaths per 100,000 population.

(Heart disease is the leading cause of death in the state of Mississippi.)

CAUSE	2019 RATE*
HEART DISEASE	401.9
MALIGNANT NEOPLASMS (CANCER)	209.5
ALZHEIMER'S DISEASE	115.4
ACCIDENTS	102.6
CEREBROVASCULAR DISEASE (STROKE)	59.9
NEPHRITIS, NEPHROTIC SYNDROME AND NEPHROSIS (KIDNEY DISEASE)	47.0
EMPHYSEMA & OTHER CHRONIC LOWER RESPIRATORY DISEASE	47.0
INFLUENZA & PNEUMONIA	38.5
SUICIDE	25.7
SEPTICEMIA	25.7
CHRONIC LIVER DISEASE & CIRRHOSIS	21.4
DIABETES MELLITUS	21.4
PNEUMONITIS DUE TO SOLIDS & LIQUIDS	17.1
HYPERTENSION/HYPERTENSIVE RENAL DISEASE	12.8
PARKINSON'S DISEASE	12.8

*Rate is the number of deaths per 100,000 population.

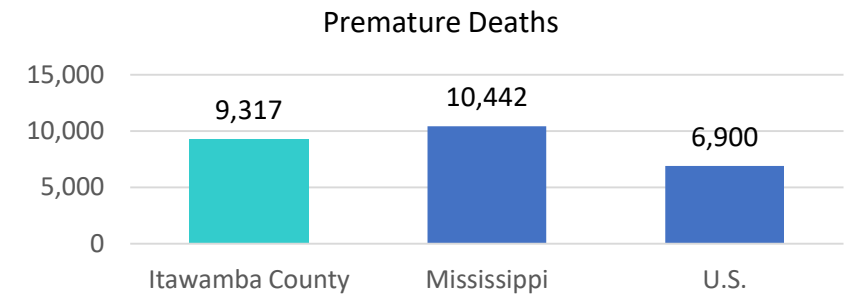
Other Diseases & Conditions with a rate of 8.6 & below included: Congenital Malformations & Chrom. Abnormalities, Malnutrition/Nutritional Deficiency, Complications Medical/Surgical Care, Homicide, Maternal Causes, Cholelithiasis/Gallbladder Disorder, Aortic Aneurysm & Dissection, In Situ, Benign & Unspecified Neoplasms, and Viral Hepatitis.

Source: [Mississippi State Department of Health - Home \(ms.gov\)](https://www.ms.gov)

Premature Deaths

Itawamba County has a lower number of premature deaths (9,317) than the state of Mississippi.

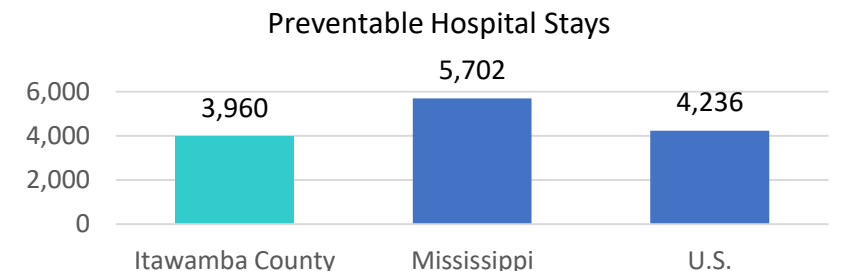
Premature death is the years of potential life lost before age 75 per 100,000 population.



Preventable Hospital Stays

Itawamba County has a lower number of preventable hospital stays (3,960) than the state of Mississippi and the U.S.

Preventable hospital stay is the rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.



Source: County Health Rankings & Roadmaps 2021.

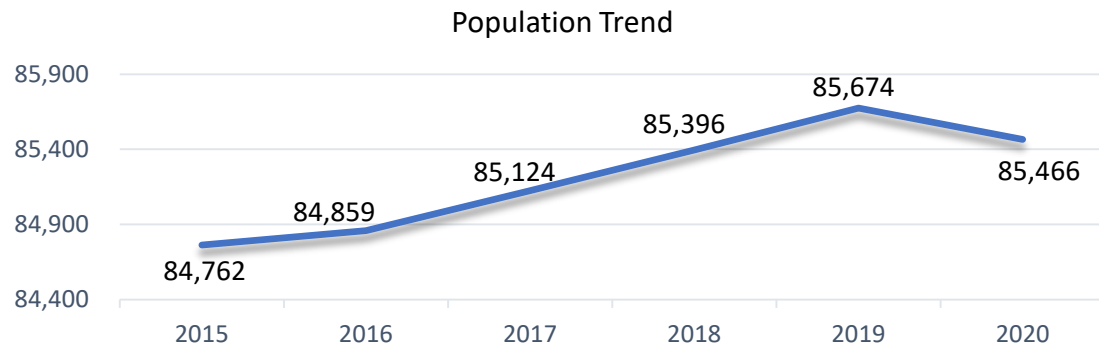
<https://www.countyhealthrankings.org/>

Demographics

Lee County

Population

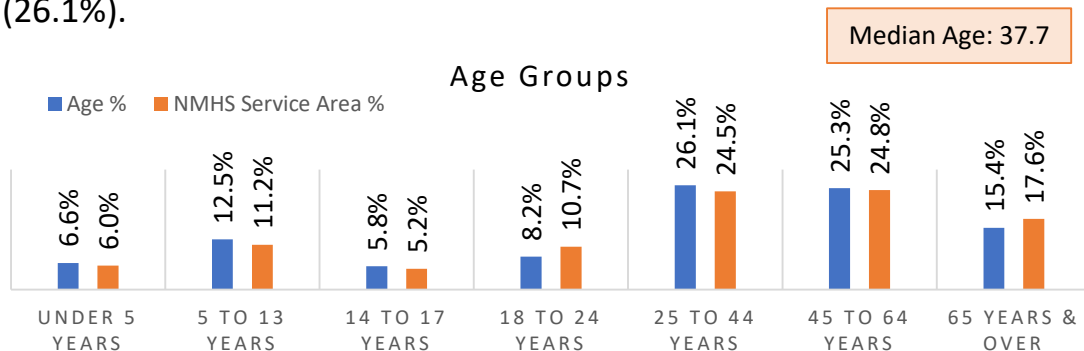
According to the U.S. Census Bureau, the population in Lee County increased from 2015 to 2019.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Age

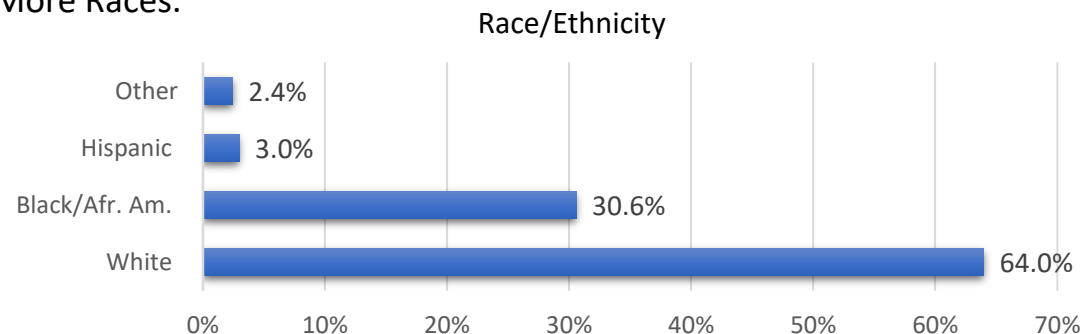
Lee County has a higher percentage of residents age 25 to 44 years (26.1%).



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Race/Ethnicity

The racial composition of the population in Lee County is shown below. Other includes Asian, American Indian & Alaska Native, Native Hawaiian & Other Pacific Islander, Native Hawaiian & Other Pacific Islander, and 2 or More Races.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Ratio of Population to Providers

In Lee County, dentists maintain the largest ratio compared to mental health providers and primary care physicians. Ratios represent the number of individuals served by one provider.

Primary care physicians include non-federal M.D.'s and D.O.'s under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

Primary Care Physicians	991:1
Dentists	1,448:1
Mental Health Providers	173:1
People per square mile	21.8

Sources: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>; U.S. Census Bureau. <https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>

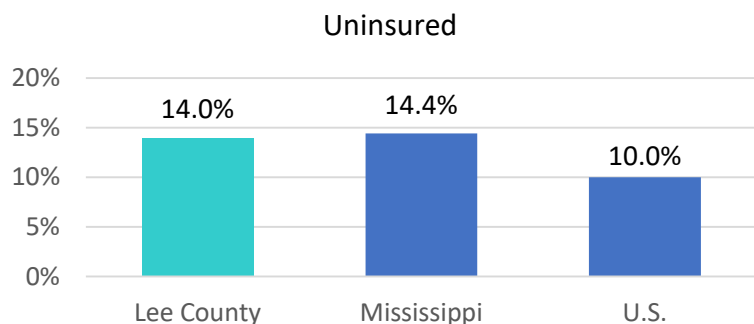
Demographics

Lee County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Uninsured

The percentage of population under age 65 without health insurance in Lee County is 14.0%, which is lower than the state of Mississippi.

The lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security.

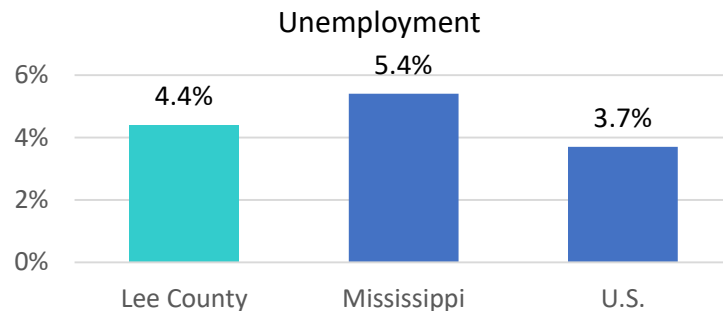


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Unemployment

Lee County has a lower percentage of unemployment (4.4%) than the state of Mississippi.

Unemployment has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, leading to an increased risk for disease or mortality, especially suicide.

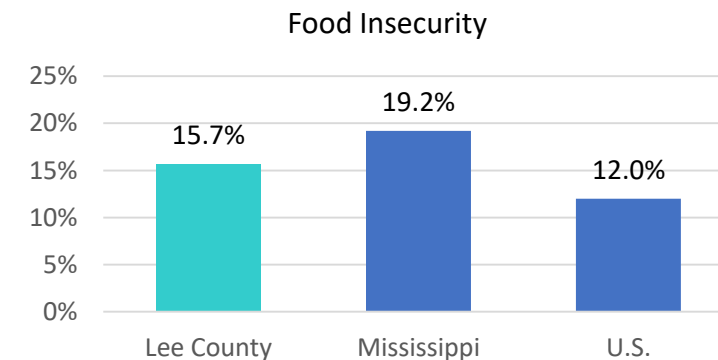


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Food Insecurity

Lee County has a lower food insecurity rate (15.7%) than the state of Mississippi.

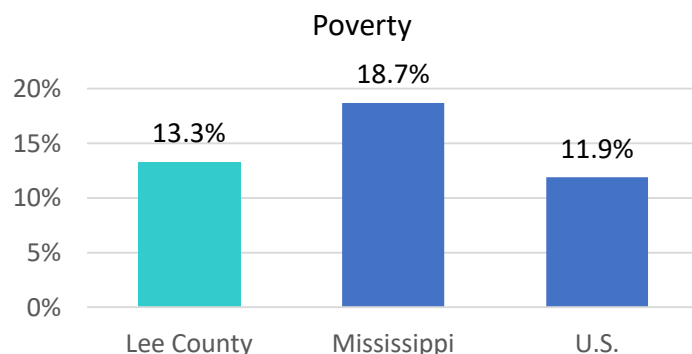
Lacking consistent access to food is related to negative health outcomes such as weight-gain and premature mortality.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Poverty

Lee County has a lower percentage of poverty (13.3%) than the state of Mississippi.

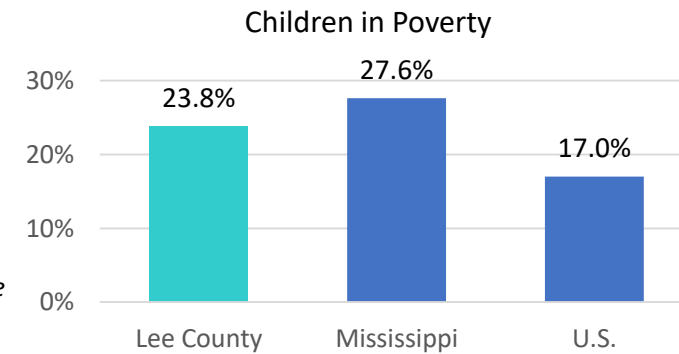


Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

Children in Poverty

The percentage of children in poverty in Lee County is lower (23.8%) than the state of Mississippi.

While impacts from poverty are present at all ages, children in poverty may experience lasting effects on academic achievement, health, and income into adulthood.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

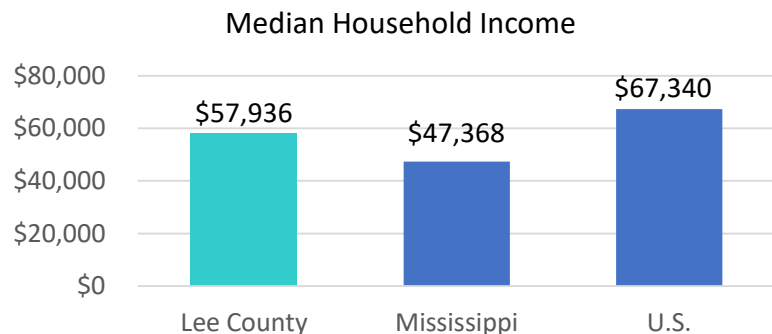
Demographics

Lee County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Income

The median household income in Lee County is \$57,936, which is higher than the state of Mississippi.

Median household income is an indicator of income and poverty, which can compromise physical and mental health.



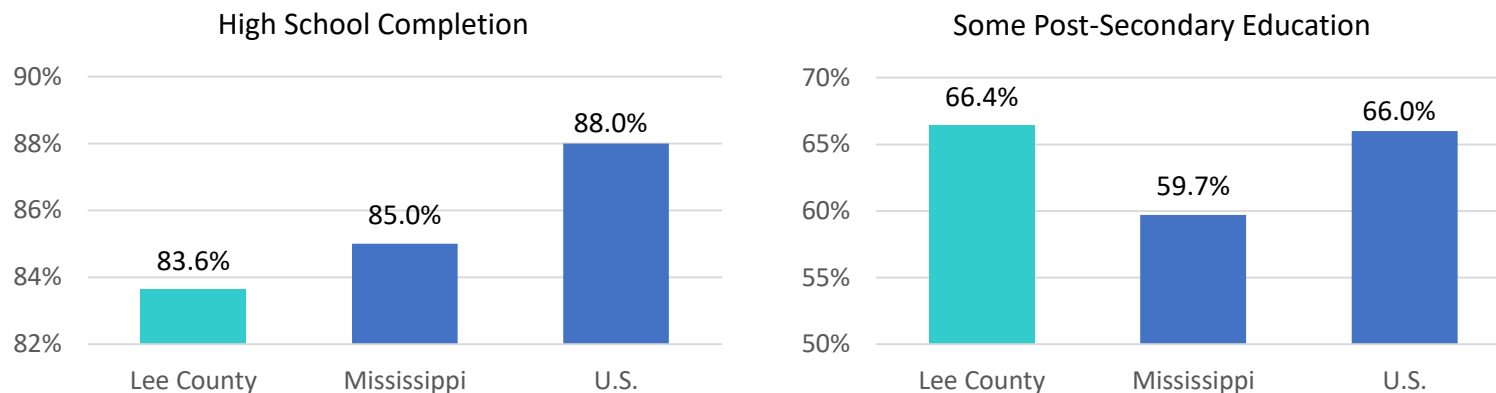
Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>



Education

The percentage of adults age 25 and over with a high school diploma or equivalent in Lee County is 83.6%. The percentage of adults ages 25-44 with some post-secondary education (enrollment in vocational/technical schools, junior colleges, or four-year colleges) is 66.4%.

Better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive.

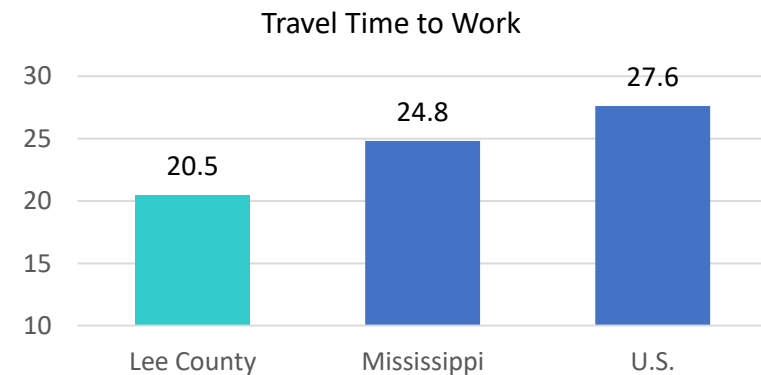


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Mean Travel Time to Work

The average one-way commute in the United States reached a new high of 27.6 minutes in 2019. Lee County has a lower mean time of 20.5 minutes.

Source: U.S. Census Bureau. <https://data.census.gov/cedsci/table?q=DP03&g=0500000US28017&tid=ACSDP5Y2019.DP03>



Demographics

Lee County – Health Rankings

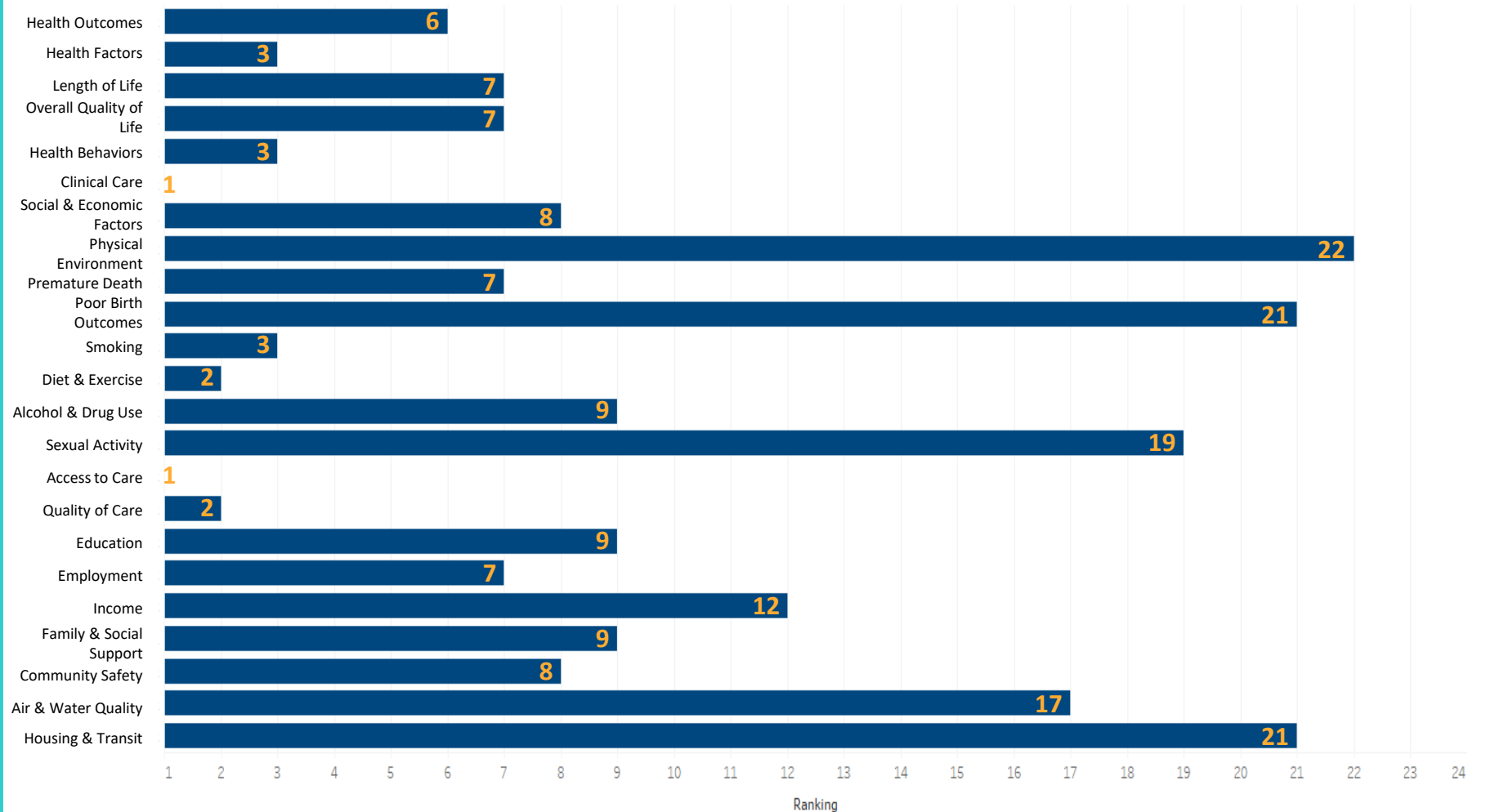
The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

By ranking the health of nearly every county, the County Health Rankings help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors).

The graph displays how health outcomes and factors in Lee County rank in comparison to the 24 counties in NMHS' service area.

Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Lee County Health Outcomes and Factors



Source: Adapted from the University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>
 Note: Each category ranked from 1 to 24 based on the number of NMHS counties, i.e., continuum from most healthy (1) to least healthy (24)

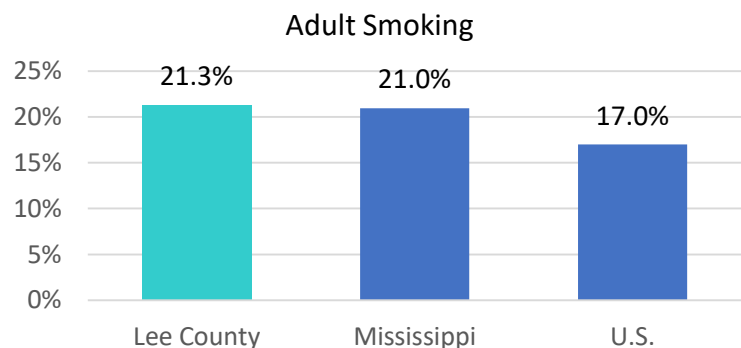
Demographics

Lee County – Health Behaviors and Factors

Adult Smoking

Lee County has a higher percentage of smokers (21.3%) than the state of Mississippi and the U.S.

Cigarette smoking can cause various cancers, cardiovascular disease, respiratory conditions, low birthweights, and other adverse health outcomes.

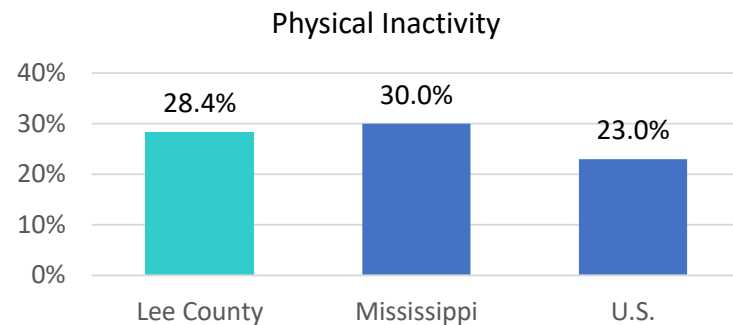


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Physical Inactivity

Lee County has a lower percentage of adults age 20 and over with physical inactivity (28.4%) than the state of Mississippi.

Physical inactivity has been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, and cardiovascular disease.

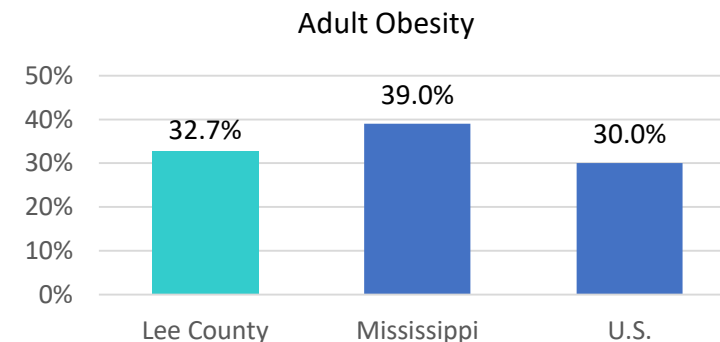


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Adult Obesity

The percentage of adults age 20 and over with a body mass index (BMI) greater than or equal to 30 in Lee County is 32.7%.

Obesity increases the risk for coronary heart disease, type 2 diabetes, cancer, hypertension, sleep apnea, and stroke.

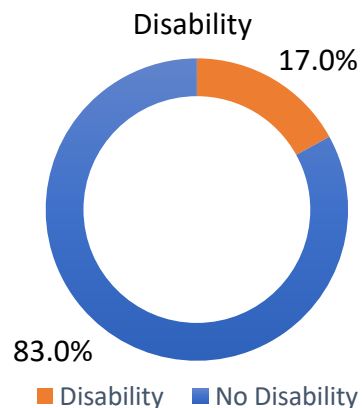
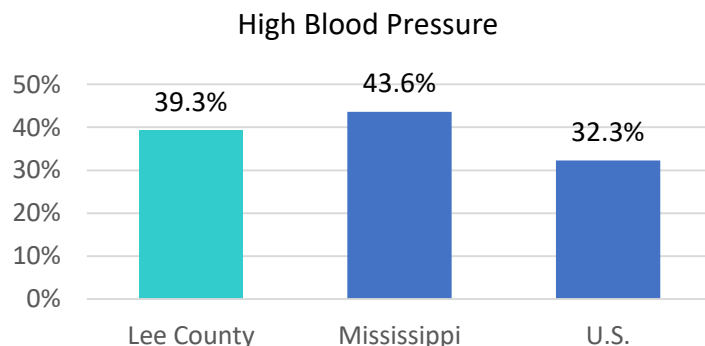


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Hypertension

According to the CDC, the estimated prevalence of high blood pressure among adults aged 18 years and older is 39.3% in Lee County which is lower than the state of Mississippi.

Source: Centers for Disease Control and Prevention. <https://experience.arcgis.com/experience/22c7182a162d45788dd52a2362f8ed65>; <https://www.cdc.gov/brfss/brfssprevalence/index.html>



Disability

The percentage of people living with disabilities is highest in the South. Lee County's rate is 17.0%.

Adults living with disabilities are more likely to be obese, smoke, have heart disease, and diabetes.

Sources: U. S. Census Bureau. <https://data.census.gov/cedsci/>; CDC, [Disability Impacts All of Us Infographic | CDC](#)

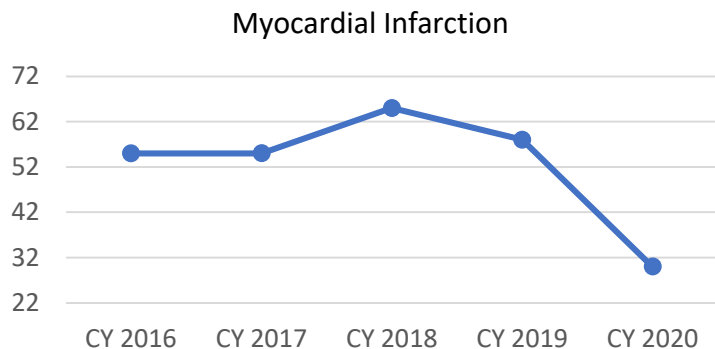
Demographics

Lee County – Chronic Diseases

Myocardial Infarction (Heart Attack)

According to Dimensions, a Mississippi Hospital Association (MHA) program, heart attacks decreased in Lee County from 2018 to 2020.

Heart disease is the #1 cause of death in Mississippi.

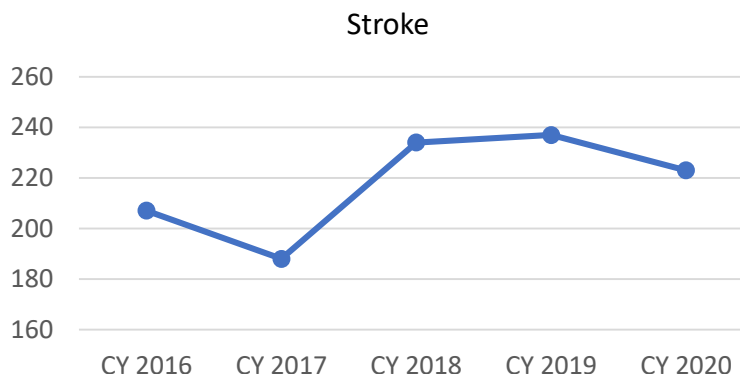


Source: Mississippi Department of Health, [Heart Health - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/heart-health)

Stroke

Strokes decreased in Lee County in 2017 and 2020.

Stroke is one of the top five causes of death in Mississippi.

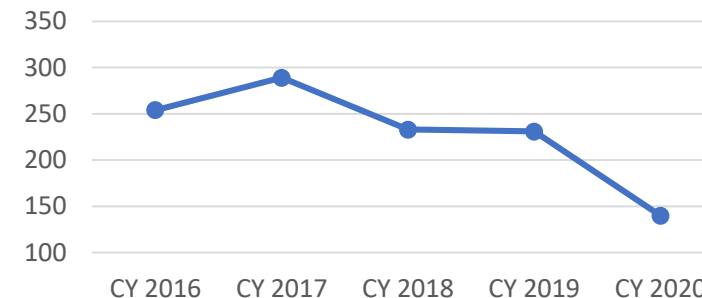


Source: Mississippi Department of Health, [Stroke Prevention - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/stroke-prevention)

COPD (Chronic Obstructive Pulmonary Disease)

COPD decreased in Lee County from 2017 to 2020.

It is estimated that more than 140,000 Mississippians are currently diagnosed with COPD.

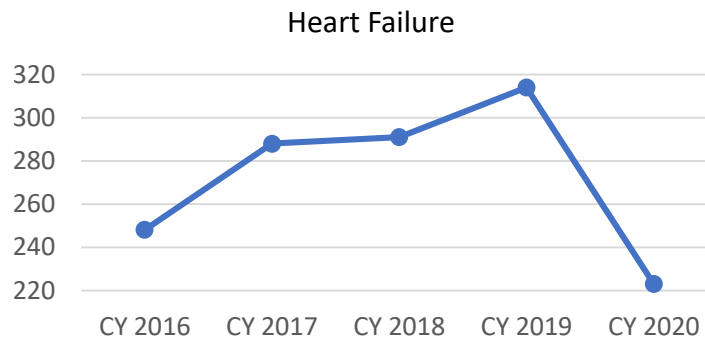


Source: Mississippi Department of Health, [Chronic Obstructive Pulmonary Disease \(COPD\) - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/chronic-obstructive-pulmonary-disease)

Heart Failure

Heart failures increased in Lee County from 2016 to 2019.

Lifestyle factors that increase the risk of heart attack and stroke can also contribute to heart failure.



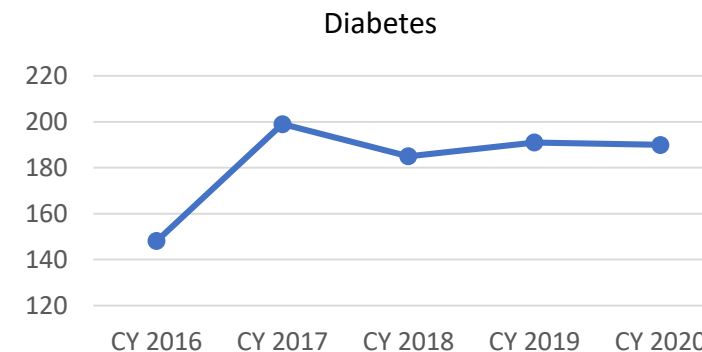
Source: AHA, [Causes and Risks for Heart Failure | American Heart Association](https://www.heart.org)

Source: Mississippi Hospital Association, Dimensions, 2016 - 2020. Reports for graphs published October 2021.

Diabetes

Diabetes increased in Lee County in 2017.

Moderate diet and exercise that result in 5 to 7 percent weight loss can delay and possibly prevent type 2 diabetes.



Source: Mississippi Department of Health, [https://msdh.ms.gov/msdhsite/ static/43,0,296.html](https://msdh.ms.gov/msdhsite/static/43,0,296.html)

Demographics

Lee County

Causes of Death

In Lee County, heart disease is the top cause of death with a rate of 229.4 deaths per 100,000 population.

(Heart disease is the leading cause of death in the state of Mississippi.)

CAUSE	2019 RATE*
HEART DISEASE	229.4
MALIGNANT NEOPLASMS (CANCER)	217.7
EMPHYSEMA & OTHER CHRONIC LOWER RESPIRATORY DISEASES	79.6
ALZHEIMER'S DISEASE	71.4
ACCIDENTS	66.7
CEREBROVASCULAR DISEASE (STROKE)	64.4
CHRONIC LIVER DISEASE & CIRRHOSIS	30.4
INFLUENZA & PNEUMONIA	28.1
NEPHRITIS, NEPHROTIC SYNDROME AND NEPHROSIS (KIDNEY DISEASE)	24.6
HYPERTENSION/HYPERTENSIVE RENAL DISEASE	24.6
DIABETES MELLITUS	22.2
SEPTICEMIA	11.7
HOMICIDE	10.5
SUICIDE	10.5
CONGENITAL MALFORMATIONS & CHROM. ABNORMALITIES	9.4
PARKINSON'S DISEASE	9.4

*Rate is the number of deaths per 100,000 population.

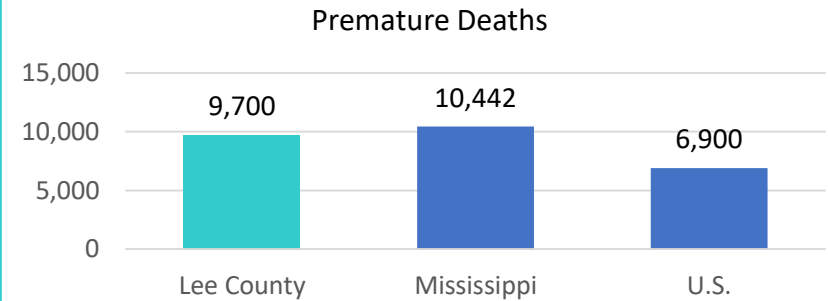
Other causes of death with a rate of 7.0 & below included: Pneumonitis due to Solids & Liquids, Conditions Originating in the Perinatal Period (per 1,000 live births), In Situ, Benign & Unspecified Neoplasms, Complications Medical/Surgical Care, Aortic Aneurysm & Dissection, Peptic Ulcer, Pneumoconiosis & Chemical Effects, Anemias, HIV Disease, Viral Hepatitis, & Maternal Causes (per 100,000 live births).

Source: [Mississippi State Department of Health - Home \(ms.gov\)](https://www.ms.gov)

Premature Deaths

Lee County has a lower number of premature deaths (9,700) than the state of Mississippi.

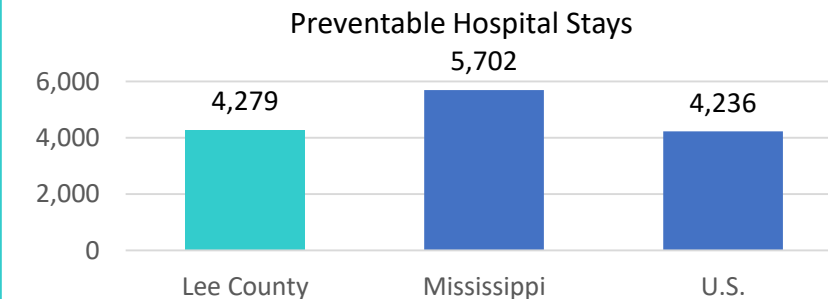
Premature death is the years of potential life lost before age 75 per 100,000 population.



Preventable Hospital Stays

Lee County has a lower number of preventable hospital stays (4,279) than the state of Mississippi.

Preventable hospital stay is the rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.



Source: County Health Rankings & Roadmaps 2021.

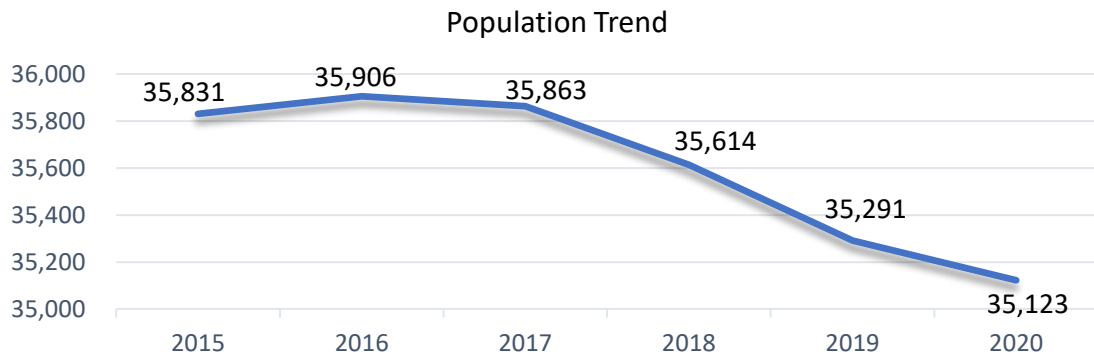
<https://www.countyhealthrankings.org/>

Demographics

Monroe County

Population

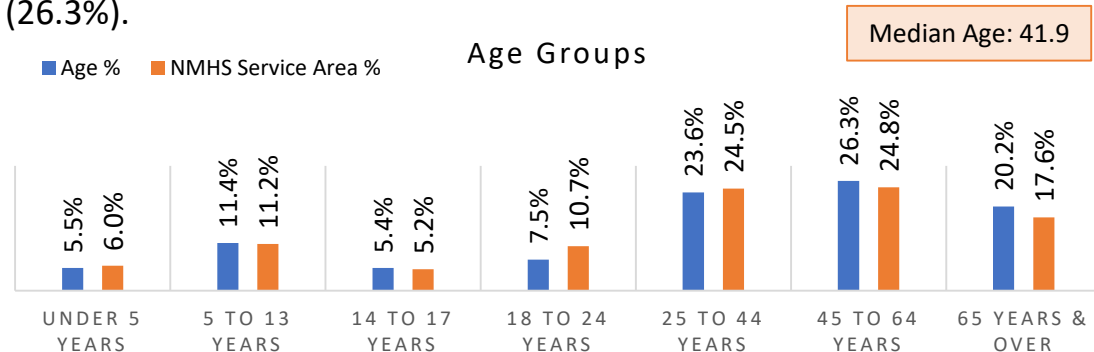
According to the U.S. Census Bureau, the population in Monroe County decreased from 2016 to 2020.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Age

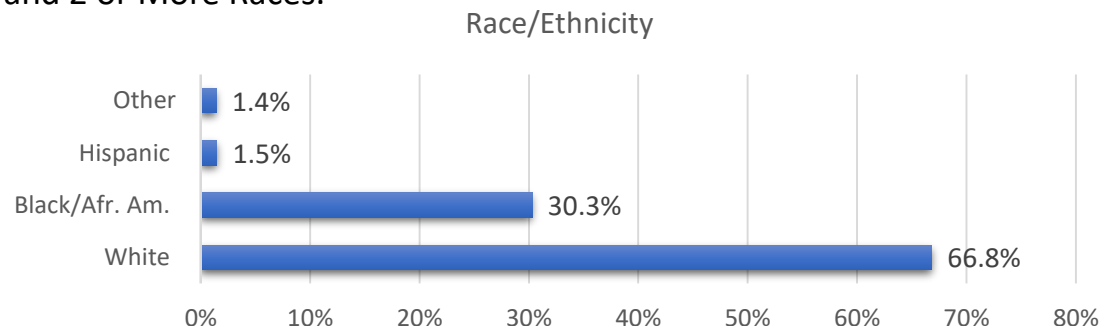
Monroe County has a higher percentage of residents age 45 to 64 years (26.3%).



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Race/Ethnicity

The racial composition of the population in Monroe County is shown below. Other includes Asian, American Indian & Alaska Native, Native Hawaiian & Other Pacific Islander, Native Hawaiian & Other Pacific Islander, and 2 or More Races.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Ratio of Population to Providers

In Monroe County, mental health providers maintain the largest ratio compared to primary care physicians and dentists. These ratios represent the number of individuals served by one provider.

Primary care physicians include non-federal M.D.'s and D.O.'s under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

Sources: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>; U.S. Census Bureau. <https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>

Primary Care Physicians	2,092:1
Dentists	2,712:1
Mental Health Providers	8,813:1
People per square mile	44.7

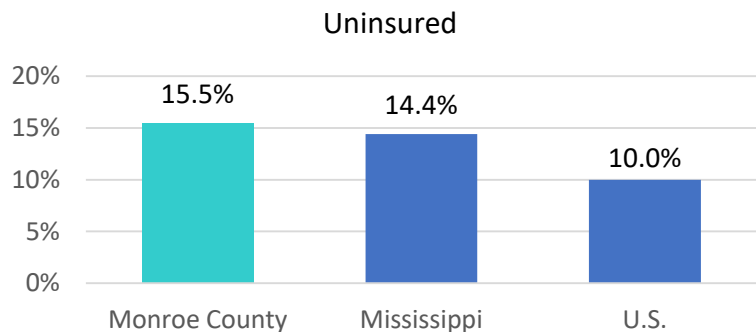
Demographics

Monroe County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Uninsured

The percentage of population under age 65 without health insurance in Monroe County is 15.5%, which is higher than the state of Mississippi and the U.S.

The lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security.

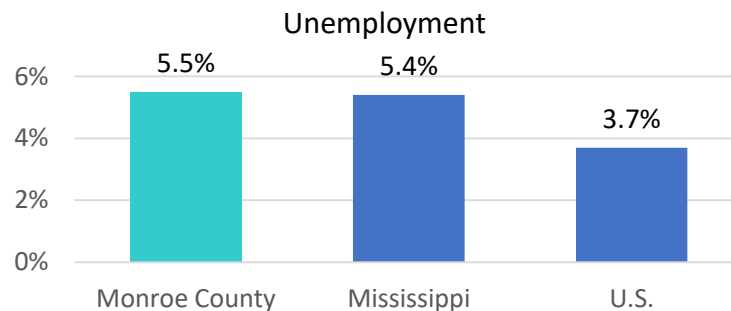


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Unemployment

Monroe County has a higher percentage of unemployment (5.5%) than the state of Mississippi and the U.S.

Unemployment has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, leading to an increased risk for disease or mortality, especially suicide.

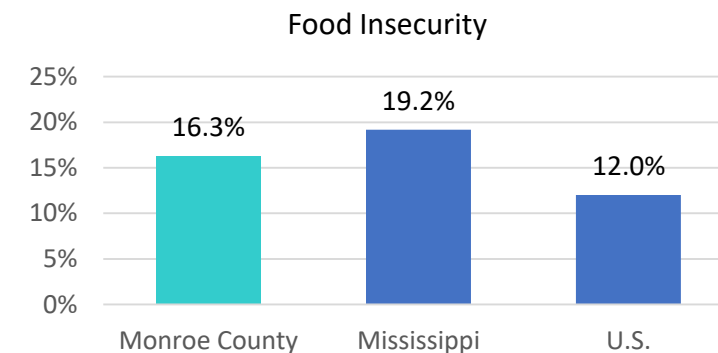


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Food Insecurity

Monroe County has a lower food insecurity rate (16.3%) than the state of Mississippi.

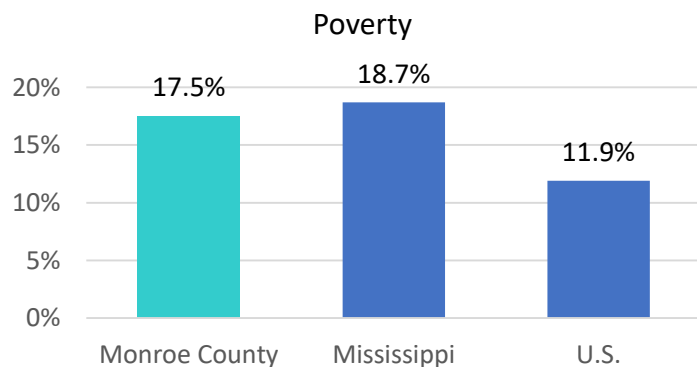
Lacking consistent access to food is related to negative health outcomes such as weight-gain and premature mortality.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Poverty

Monroe County has a lower percentage of poverty (17.5%) than the state of Mississippi.

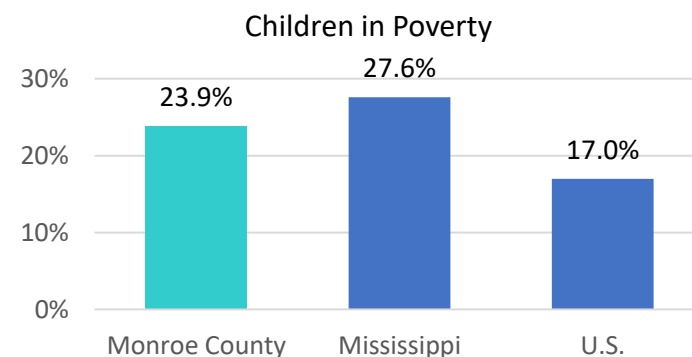


Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

Children in Poverty

The percentage of children in poverty in Monroe County is lower (23.9%) than the state of Mississippi.

While impacts from poverty are present at all ages, children in poverty may experience lasting effects on academic achievement, health, and income into adulthood.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

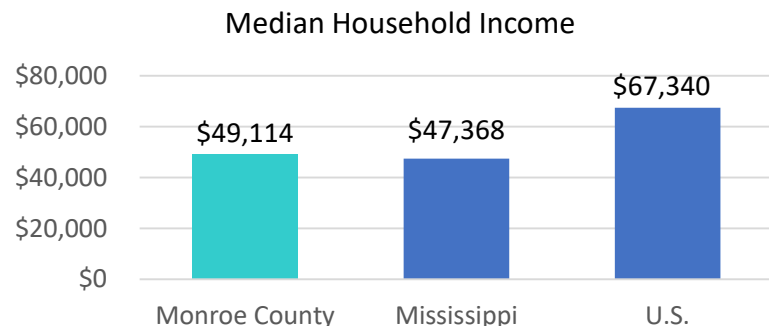
Demographics

Monroe County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Income

The median household income in Monroe County is \$49,114, which is higher than the state of Mississippi.

Median household income is an indicator of income and poverty, which can compromise physical and mental health.

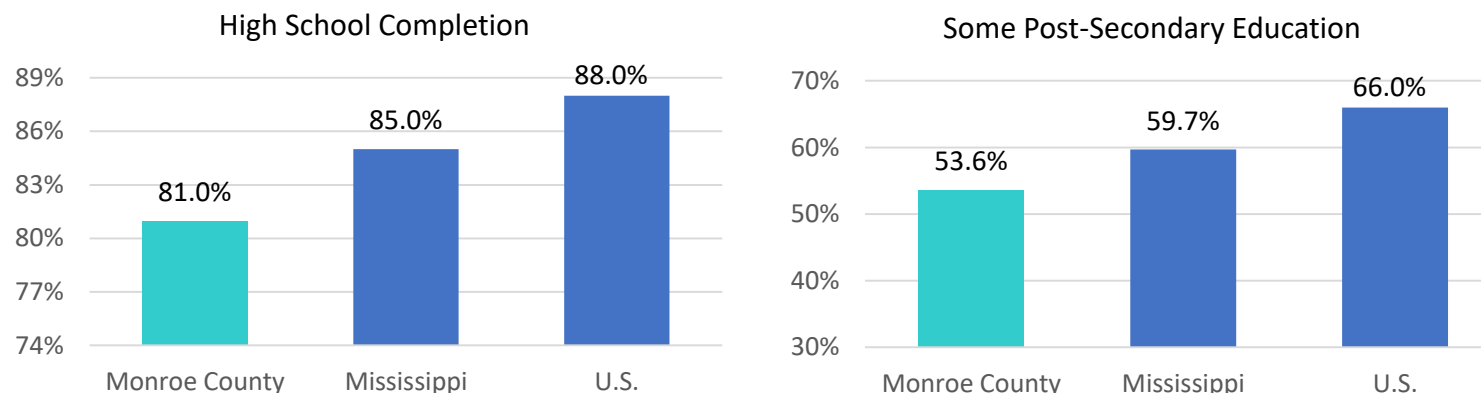


Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>



Education

The percentage of adults age 25 and over with a high school diploma or equivalent in Monroe County is 81.0%. The percentage of adults ages 25-44 with some post-secondary education (enrollment in vocational/technical schools, junior colleges, or four-year colleges) is 53.6%. Better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive.

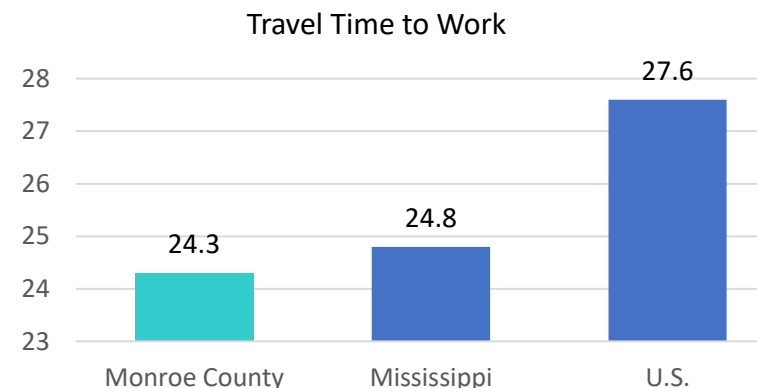


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Mean Travel Time to Work

The average one-way commute in the United States reached a new high of 27.6 minutes in 2019. Monroe County had a lower mean time of 24.3 minutes.

Source: U.S. Census Bureau. <https://data.census.gov/cedsci/table?q=DP03&g=0500000US28017&tid=ACSDP5Y2019.DP03>



Demographics

Monroe County – Health Rankings

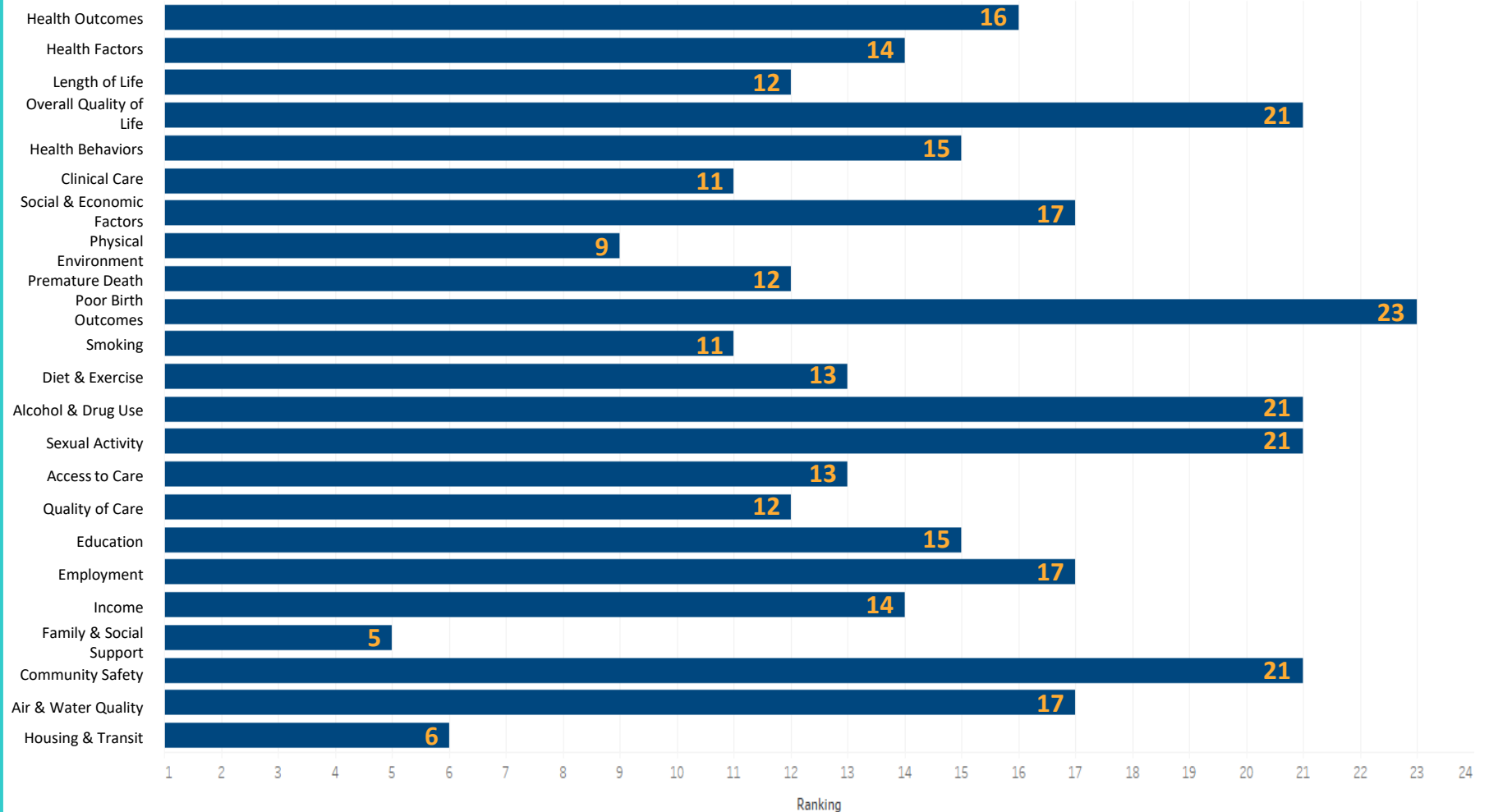
The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

By ranking the health of nearly every county, the County Health Rankings help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors).

The graph displays how health outcomes and factors in Monroe County rank in comparison to the 24 counties in NMHS' service area.

Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Monroe County Health Outcomes and Factors



Source: Adapted from the University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>
 Note: Each category ranked from 1 to 24 based on the number of NMHS counties, i.e., continuum from most healthy (1) to least healthy (24)

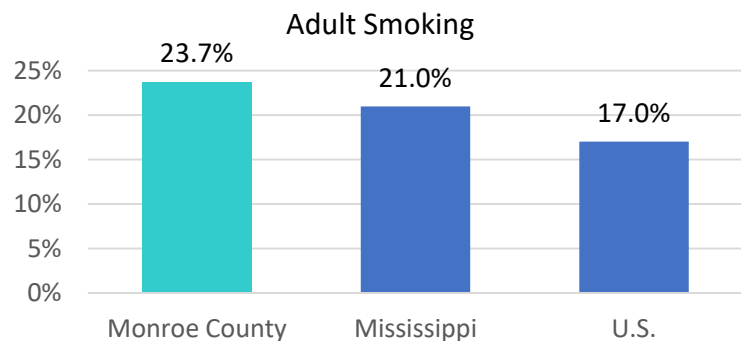
Demographics

Monroe County – Health Behaviors and Factors

Adult Smoking

Monroe County has a higher percentage of smokers (23.7%) than the state of Mississippi and the U.S.

Cigarette smoking can cause various cancers, cardiovascular disease, respiratory conditions, low birthweights, and other adverse health outcomes.

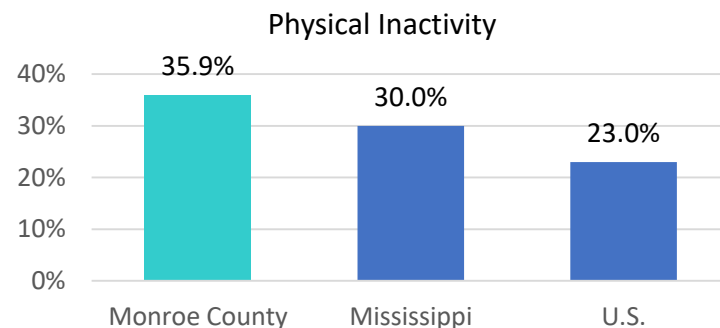


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Physical Inactivity

Monroe County has a higher percentage of adults age 20 and over with physical inactivity (35.9%) than the U.S. and the state of Mississippi.

Physical inactivity has been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, and cardiovascular disease.

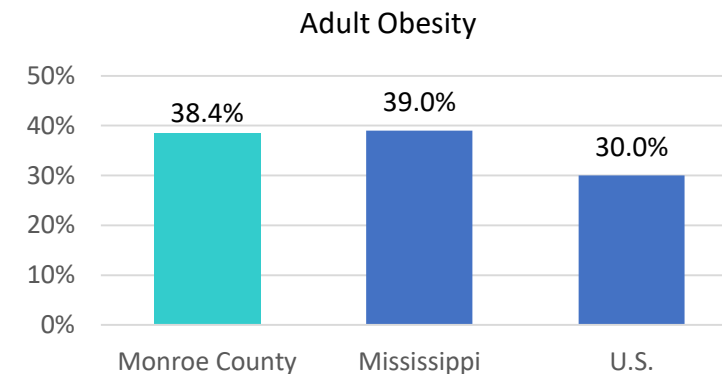


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Adult Obesity

The percentage of adults age 20 and over with a body mass index (BMI) greater than or equal to 30 in Monroe County is 38.4%.

Obesity increases the risk for coronary heart disease, type 2 diabetes, cancer, hypertension, sleep apnea, and stroke.

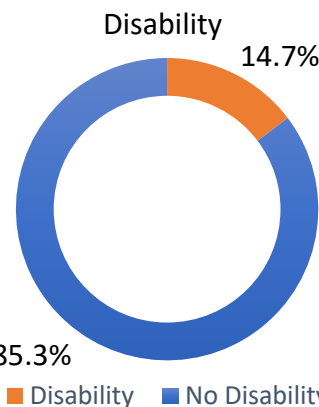
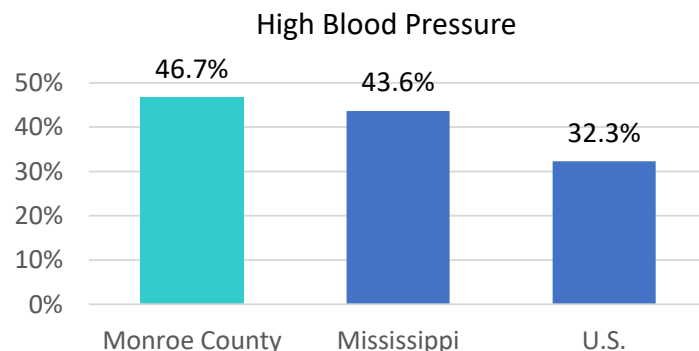


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Hypertension

According to the CDC, the estimated prevalence of high blood pressure among adults aged 18 years and older is 46.7% in Monroe County which is higher than the state of Mississippi and the U.S.

Source: Centers for Disease Control and Prevention. <https://experience.arcgis.com/experience/22c7182a162d45788dd52a2362f8ed65>; <https://www.cdc.gov/brfss/brfssprevalence/index.html>



Disability

The percentage of people living with disabilities is highest in the South. Monroe County's rate is 14.7%.

Adults living with disabilities are more likely to be obese, smoke, have heart disease, and diabetes.

Sources: U. S. Census Bureau. <https://data.census.gov/cedsci/>; CDC, [Disability Impacts All of Us Infographic | CDC](#)

Demographics

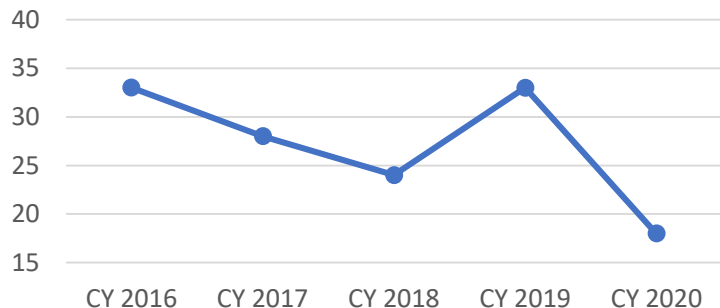
Monroe County – Chronic Diseases

Myocardial Infarction (Heart Attack)

According to Dimensions, a Mississippi Hospital Association (MHA) program, heart attacks decreased in Monroe County from 2016 to 2018.

Heart disease is the #1 cause of death in Mississippi.

Myocardial Infarction



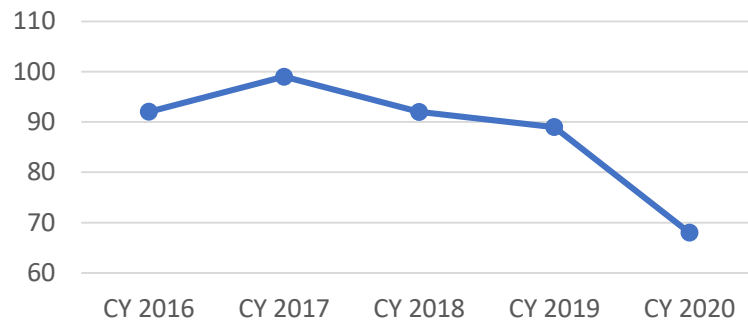
Source: Mississippi Department of Health, [Heart Health - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/Health/Heart-Health)

Stroke

Strokes decreased in Monroe County from 2017 to 2020.

Stroke is one of the top five causes of death in Mississippi.

Stroke



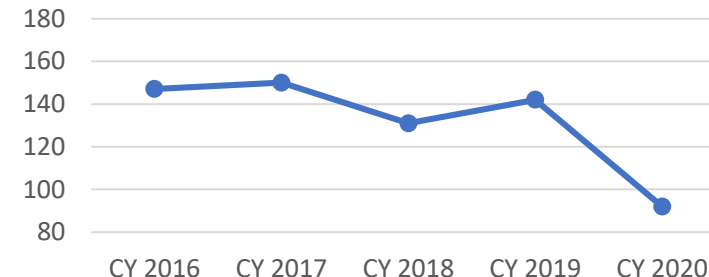
Source: Mississippi Department of Health, [Stroke Prevention - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/Health/Stroke-Prevention)

COPD (Chronic Obstructive Pulmonary Disease)

COPD decreased in Monroe County in 2018 and 2020.

It is estimated that more than 140,000 Mississippians are currently diagnosed with COPD.

COPD



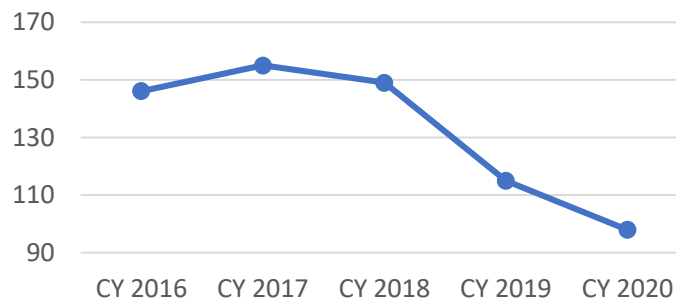
Source: Mississippi Department of Health, [Chronic Obstructive Pulmonary Disease \(COPD\) - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/Health/Chronic-Obstructive-Pulmonary-Disease)

Heart Failure

Heart failures decreased in Monroe County from 2017 to 2020.

Lifestyle factors that increase the risk of heart attack and stroke can also contribute to heart failure.

Heart Failure



Source: AHA, [Causes and Risks for Heart Failure | American Heart Association](https://www.heart.org/en/health-topics/heart-failure)

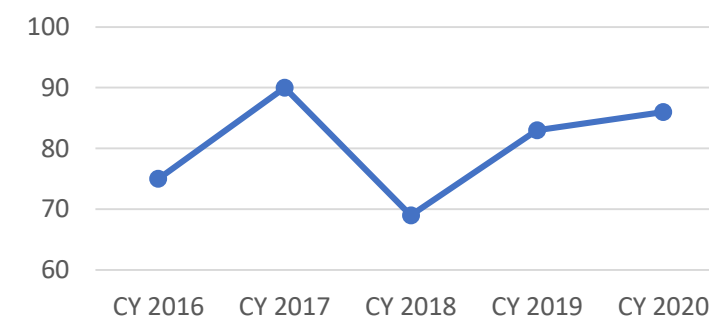
Source: Mississippi Hospital Association, Dimensions, 2016 - 2020. Reports for graphs published October 2021.

Diabetes

Diabetes increased in Monroe County from 2018 to 2020.

Moderate diet and exercise that result in 5 to 7 percent weight loss can delay and possibly prevent type 2 diabetes.

Diabetes



Source: Mississippi Department of Health, https://msdh.ms.gov/msdhsite/_static/43,0,296.html

Demographics

Monroe County

Causes of Death

In Monroe County, heart disease is the top cause of death with a rate of 283.7 deaths per 100,000 population.

Heart disease is the leading cause of death in the state of Mississippi.

CAUSE	2019 RATE*
HEART DISEASE	283.7
MALIGNANT NEOPLASMS (CANCER)	263.8
ALZHEIMER'S DISEASE	99.3
CEREBROVASCULAR DISEASE (STROKE)	93.6
ACCIDENTS	87.9
EMPHYSEMA & OTHER CHRONIC LOWER RESPIRATORY DISEASES	73.8
DIABETES MELLITUS	51.1
INFLUENZA & PNEUMONIA	28.4
NEPHRITIS, NEPHROTIC SYNDROME & NEPHROSIS	25.5
SUICIDE	22.7
CHRONIC LIVER DISEASE & CIRRHOSIS	19.9
PNEUMONITIS DUE TO SOLIDS & LIQUIDS	19.9
PARKINSON'S DISEASE	17.0
HYPERTENSION/HYPERTENSIVE RENAL DISEASE	14.2
HOMICIDE	11.3
IN SITU, BENIGN & UNSPECIFIED NEOPLASMS	11.3

*Rate is the number of deaths per 100,000 population.

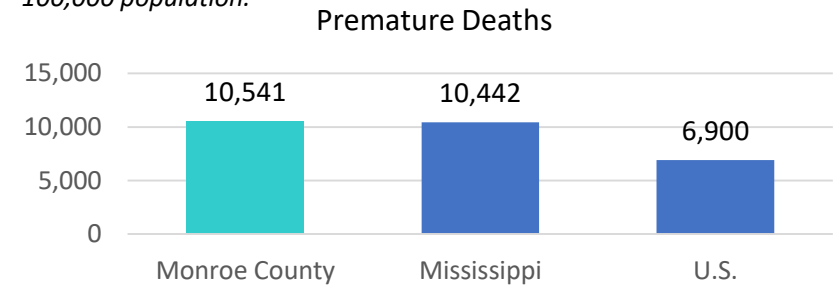
Other Diseases & Conditions with a rate of 8.5 & below include: Septicemia, Aortic Aneurysm & Dissection, Anemias, Malnutrition/Nutritional Deficiency, Viral Hepatitis, Congenital Malformations & Chrom. Abnormalities, Conditions Originating in the Perinatal Period (per 1,000 live births), & Maternal Causes (per 100,000 live births).

Source: [Mississippi State Department of Health - Home \(ms.gov\)](https://www.ms.gov)

Premature Deaths

Monroe County has a higher number of premature deaths (10,541) compared to the U.S. and the state of Mississippi.

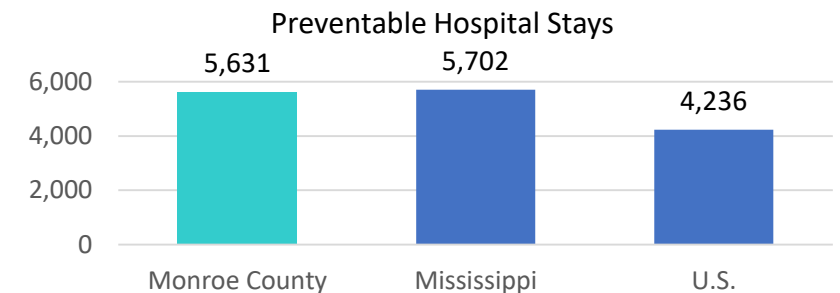
Premature death is the years of potential life lost before age 75 per 100,000 population.



Preventable Hospital Stays

Monroe County has a lower number of preventable hospital stays (5,631) than the state of Mississippi.

Preventable hospital stay is the rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.



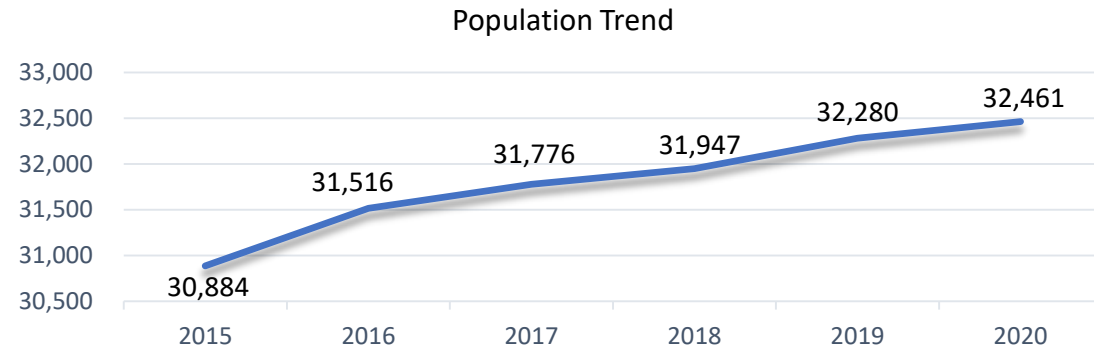
Source: County Health Rankings & Roadmaps 2021.
<https://www.countyhealthrankings.org/>

Demographics

Pontotoc County

Population

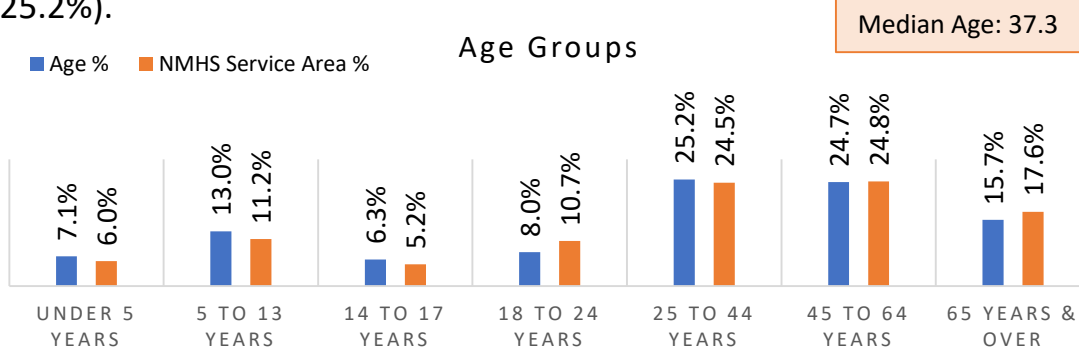
According to the U.S. Census Bureau, the population in Pontotoc County increased from 2015 to 2020.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Age

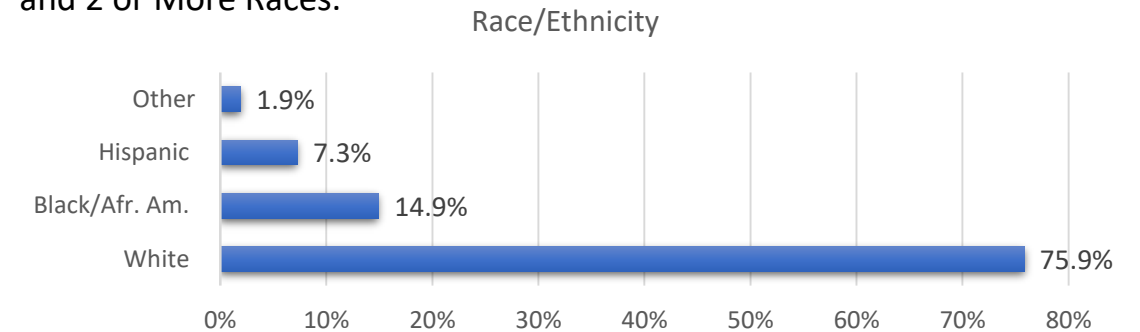
Pontotoc County has a higher percentage of residents age 25 to 44 years (25.2%).



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Race/Ethnicity

The racial composition of the population in Pontotoc County is shown below. Other includes Asian, American Indian & Alaska Native, Native Hawaiian & Other Pacific Islander, Native Hawaiian & Other Pacific Islander, and 2 or More Races.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Ratio of Population to Providers

In Pontotoc County, dentists maintain the largest ratio compared to mental health providers and primary care physicians. These ratios represent the number of individuals served by one provider.

Primary care physicians include non-federal M.D.'s and D.O.'s under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

Primary Care Physicians	5,306:1
Dentists	6,435:1
Mental Health Providers	2,475:1
People per square mile	62.6

Sources: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>; U.S. Census Bureau. <https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>

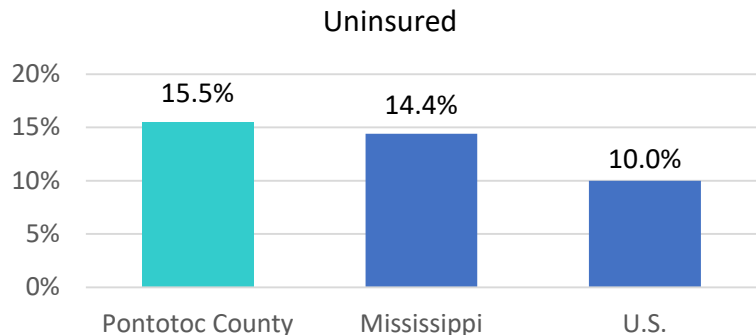
Demographics

Pontotoc County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Uninsured

The percentage of population under age 65 without health insurance in Pontotoc County is 15.5%, which is higher than the state of Mississippi and the U.S.

The lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security.

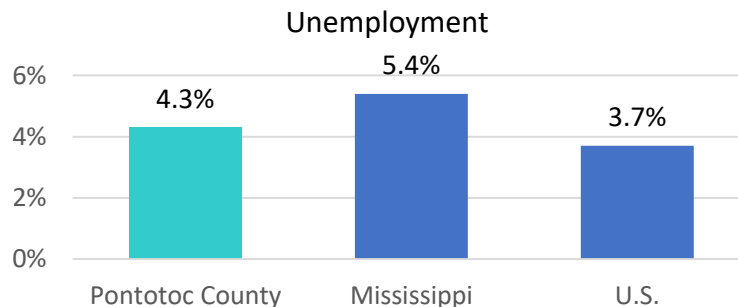


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Unemployment

Pontotoc County has a lower percentage of unemployment (4.3%) than the state of Mississippi.

Unemployment has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, leading to an increased risk for disease or mortality, especially suicide.

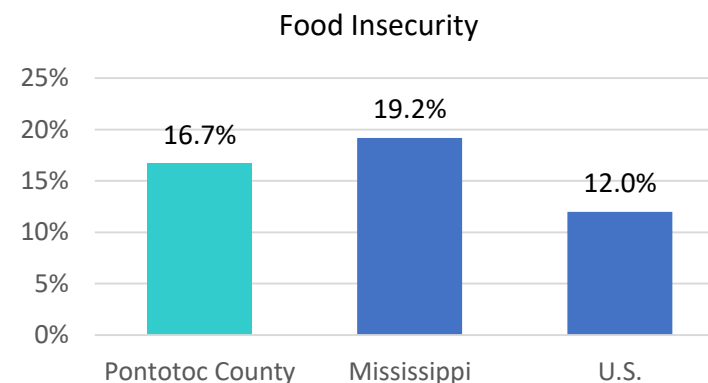


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Food Insecurity

Pontotoc County has a lower food insecurity rate (16.7%) than the state of Mississippi.

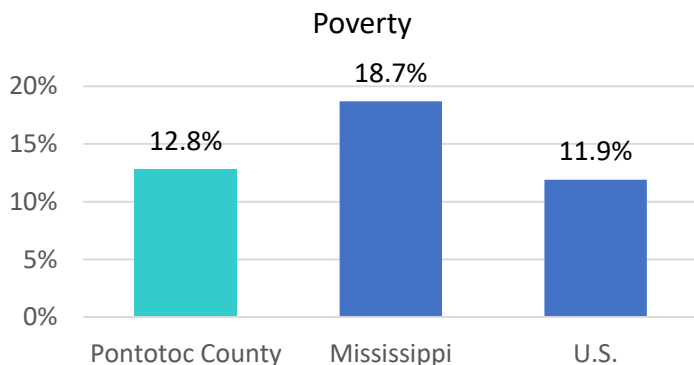
Lacking consistent access to food is related to negative health outcomes such as weight-gain and premature mortality.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Poverty

Pontotoc County has a lower percentage of poverty (12.8%) than the state of Mississippi.

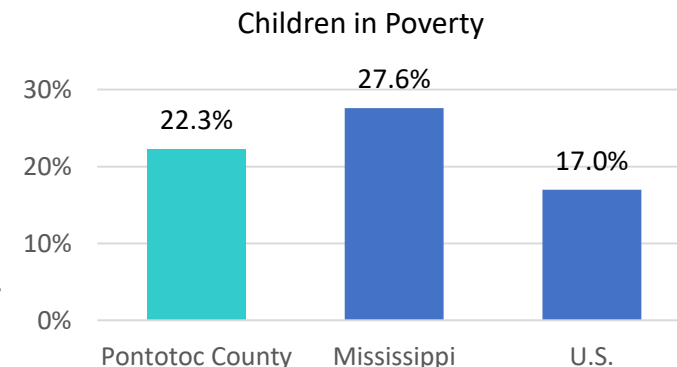


Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

Children in Poverty

The percentage of children in poverty in Pontotoc County is lower (22.3%) than the state of Mississippi.

While impacts from poverty are present at all ages, children in poverty may experience lasting effects on academic achievement, health, and income into adulthood.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Demographics

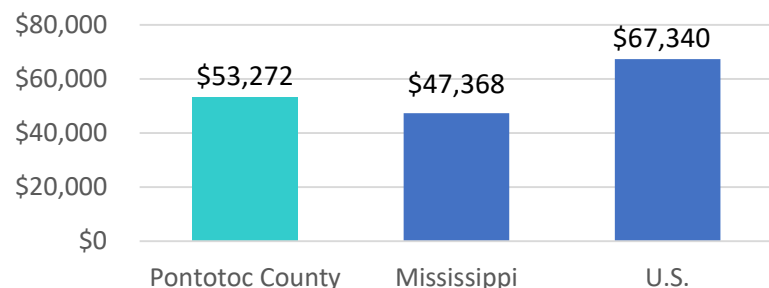
Pontotoc County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Income

The median household income in Pontotoc County is \$53,272, which is higher than the state of Mississippi.

Median household income is an indicator of income and poverty, which can compromise physical and mental health.

Median Household Income



Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

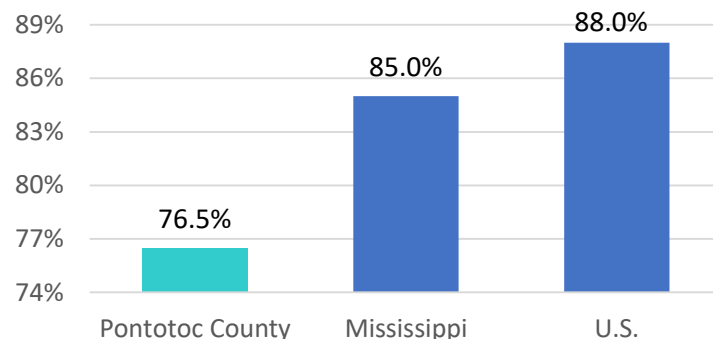


Education

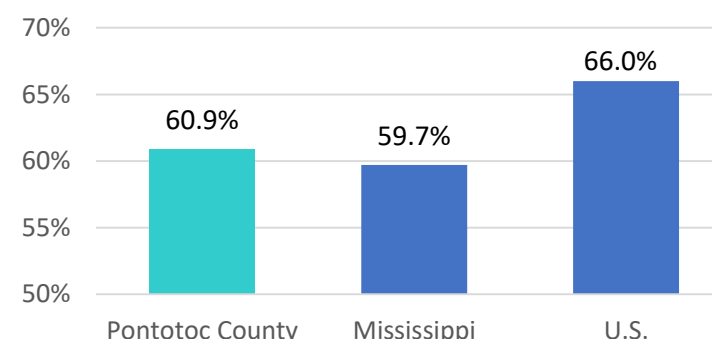
The percentage of adults age 25 and over with a high school diploma or equivalent in Pontotoc County is 76.5%. The percentage of adults ages 25-44 with some post-secondary education (enrollment in vocational/technical schools, junior colleges, or four-year colleges) is 60.9%.

Better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive.

High School Completion



Some Post-Secondary Education



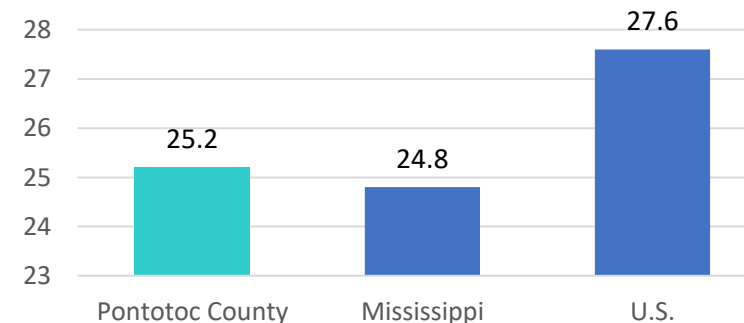
Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Mean Travel Time to Work

The average one-way commute in the United States reached a new high of 27.6 minutes in 2019. Pontotoc County has a lower mean time of 25.2 minutes.

Source: U.S. Census Bureau. <https://data.census.gov/cedsci/table?q=DP03&g=0500000US28017&tid=ACSDP5Y2019.DP03>

Travel Time to Work



Demographics

Pontotoc County – Health Rankings

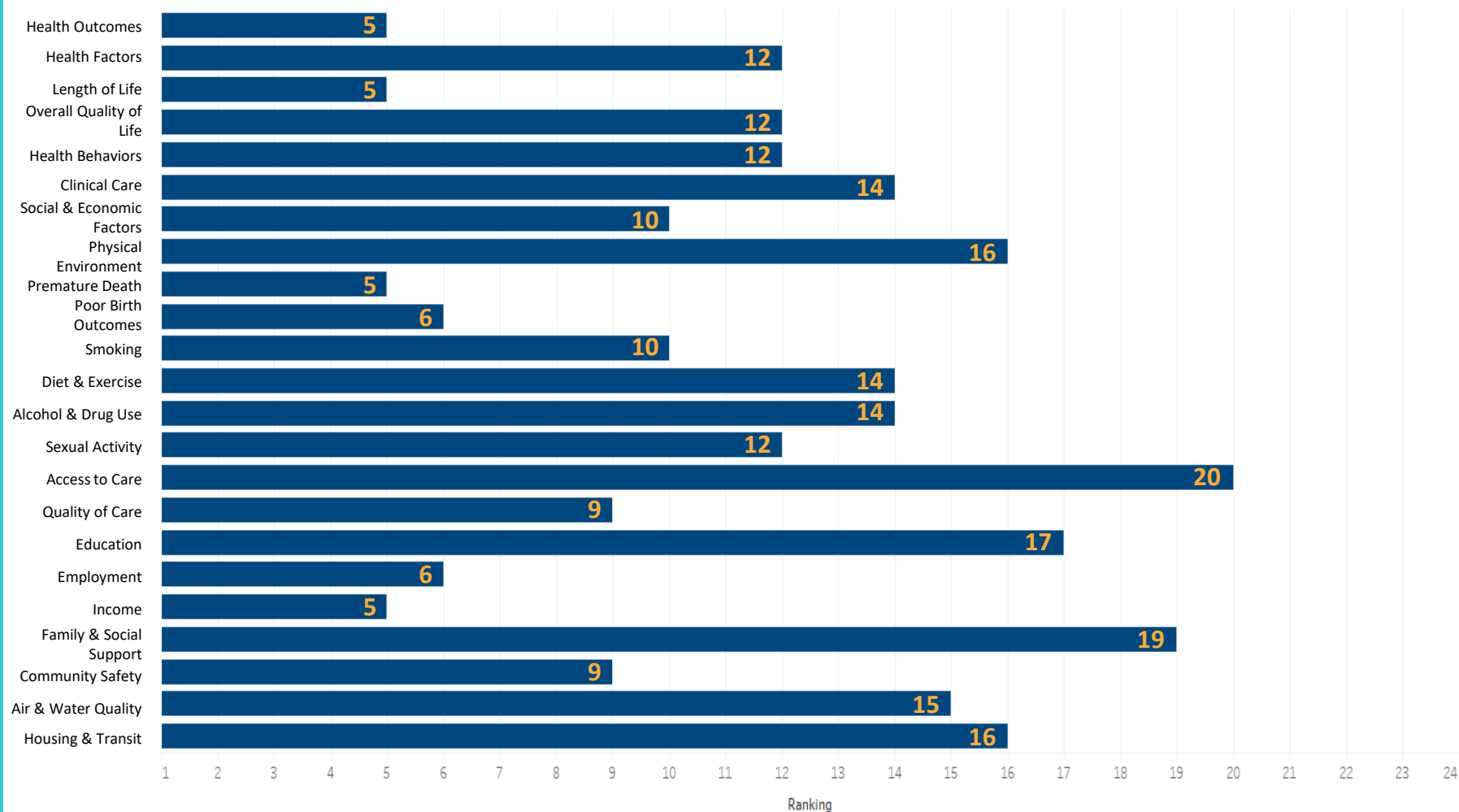
The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

By ranking the health of nearly every county, the County Health Rankings help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors).

The graph displays how health outcomes and factors in Pontotoc County rank in comparison to the 24 counties in NMHS' service area.

Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Pontotoc County Health Outcomes and Factors



Source: Adapted from the University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>
 Note: Each category ranked from 1 to 24 based on the number of NMHS counties, i.e., continuum from most healthy (1) to least healthy (24)

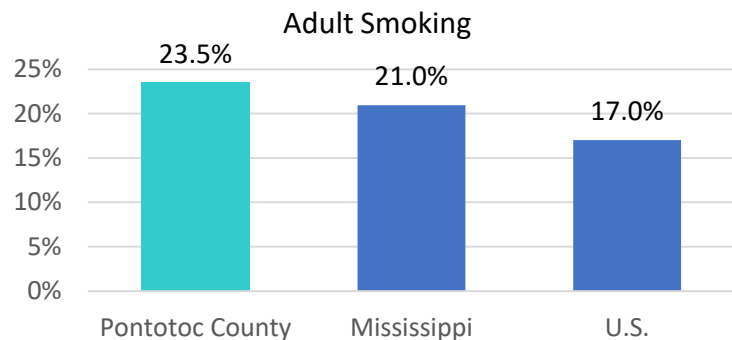
Demographics

Pontotoc County – Health Behaviors and Factors

Adult Smoking

Pontotoc County has a higher percentage of smokers (23.5%) than the state of Mississippi and the U.S.

Cigarette smoking can cause various cancers, cardiovascular disease, respiratory conditions, low birthweights, and other adverse health outcomes.

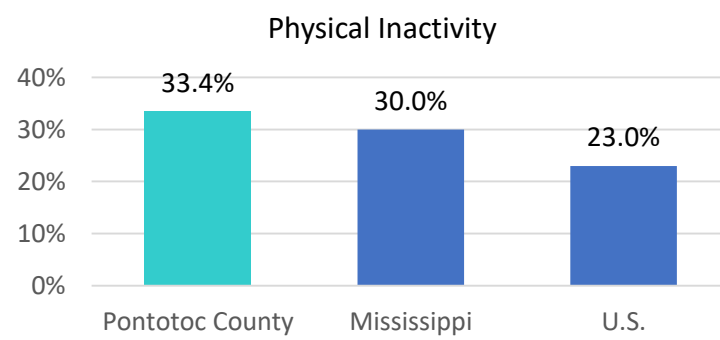


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Physical Inactivity

Pontotoc County has a higher percentage of adults age 20 and over with physical inactivity (33.4%) than the U.S. and the state of Mississippi.

Physical inactivity have been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, and cardiovascular disease.

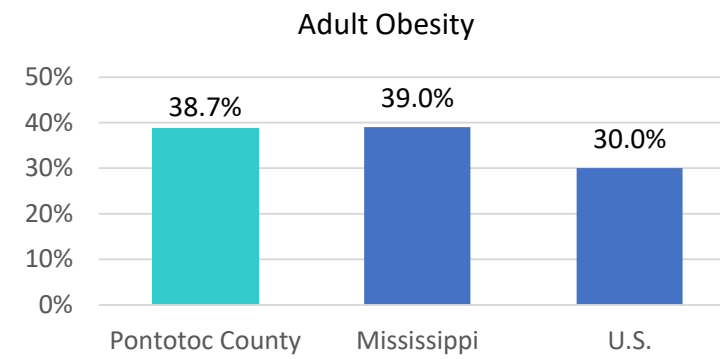


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Adult Obesity

The percentage of adults age 20 and over with a body mass index (BMI) greater than or equal to 30 in Pontotoc County is 38.7%.

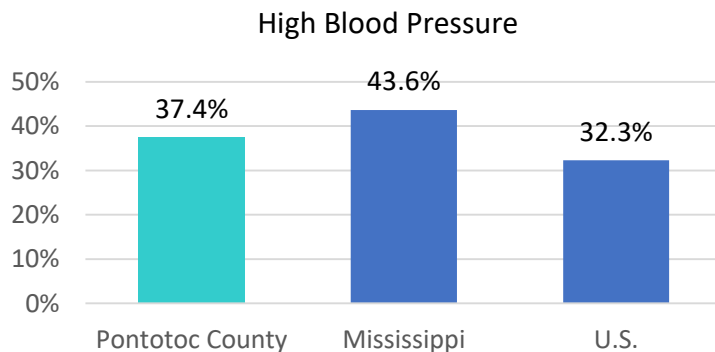
Obesity increases the risk for coronary heart disease, type 2 diabetes, cancer, hypertension, sleep apnea, and stroke.



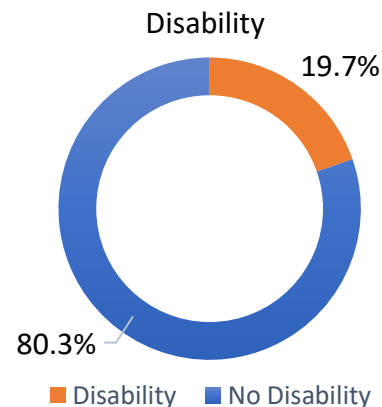
Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Hypertension

According to the CDC, the estimated prevalence of high blood pressure among adults aged 18 years and older is 37.4% in Pontotoc County which is lower than the state of Mississippi.



Source: Centers for Disease Control and Prevention. <https://experience.arcgis.com/experience/22c7182a162d45788dd52a2362f8ed65>



Disability

The percentage of people living with disabilities is highest in the South. Pontotoc County's rate is 19.7%.

Adults living with disabilities are more likely to be obese, smoke, have heart disease, and diabetes.

Sources: U. S. Census Bureau. <https://data.census.gov/cedsci/>; CDC, [Disability Impacts All of Us Infographic | CDC](#)

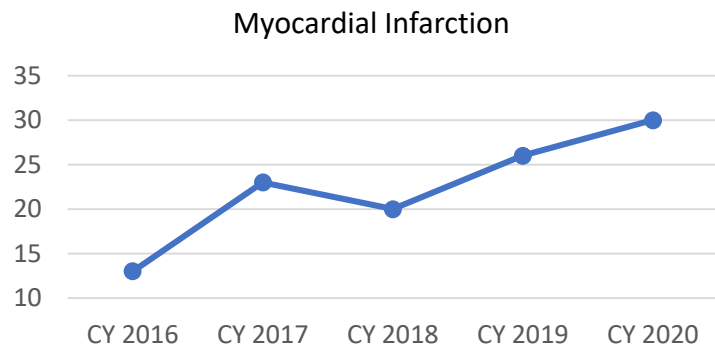
Demographics

Pontotoc County – Chronic Diseases

Myocardial Infarction (Heart Attack)

According to Dimensions, a Mississippi Hospital Association (MHA) program, heart attacks increased in Pontotoc County from 2018 to 2020.

Heart disease is the #1 cause of death in Mississippi.

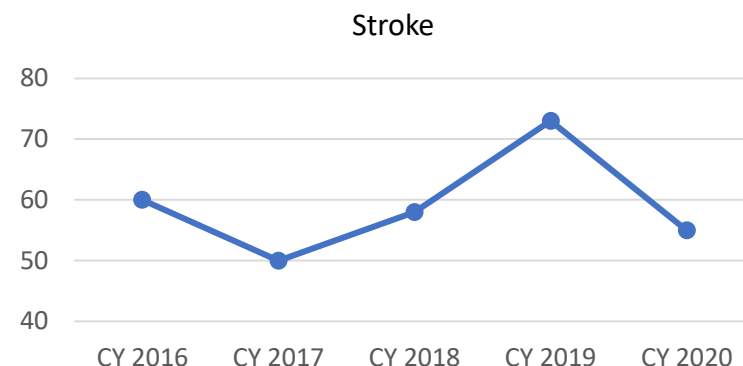


Source: Mississippi Department of Health, [Heart Health - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/heart-health)

Stroke

Strokes increased in Pontotoc County from 2017 to 2019.

Stroke is one of the top five causes of death in Mississippi.

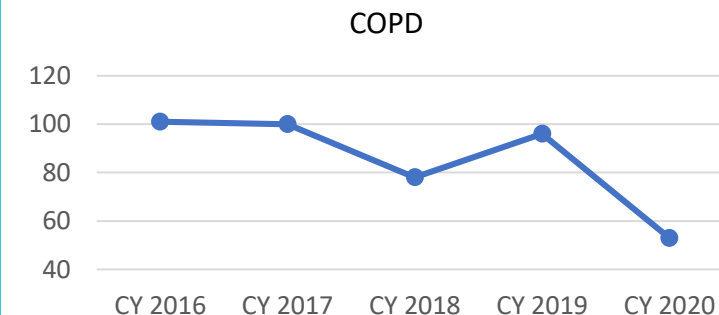


Source: Mississippi Department of Health, [Stroke Prevention - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/stroke-prevention)

COPD (Chronic Obstructive Pulmonary Disease)

COPD decreased in Pontotoc County from 2016 to 2018.

It is estimated that more than 140,000 Mississippians are currently diagnosed with COPD.

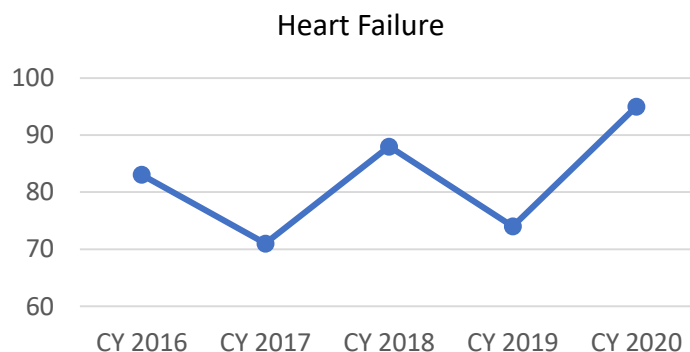


Source: Mississippi Department of Health, [Chronic Obstructive Pulmonary Disease \(COPD\) - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/health/chronic-obstructive-pulmonary-disease)

Heart Failure

Heart failures decreased in Pontotoc County in 2017 and 2019.

Lifestyle factors that increase the risk of heart attack and stroke can also contribute to heart failure.



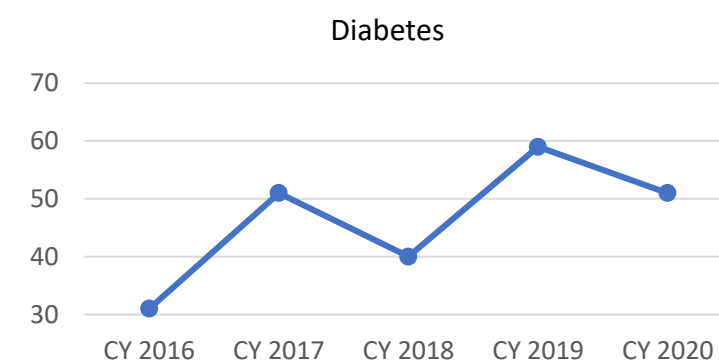
Source: AHA, [Causes and Risks for Heart Failure | American Heart Association](https://www.heart.org/health-topics/heart-failure)

Source: Mississippi Hospital Association, Dimensions, 2016 - 2020. Reports for graphs published October 2021.

Diabetes

Diabetes increased in Pontotoc County in 2017 and 2019.

Moderate diet and exercise that result in 5 to 7 percent weight loss can delay and possibly prevent type 2 diabetes.



Source: Mississippi Department of Health, https://msdh.ms.gov/msdhsite/_static/43,0,296.html

Demographics

Pontotoc County

Causes of Death

In Pontotoc County, heart disease is the top cause of death with a rate of 205.1 deaths per 100,000 population.

Heart disease is the leading cause of death in the state of Mississippi.

CAUSE	2019 RATE*
HEART DISEASE	205.1
MALIGNANT NEOPLASMS (CANCER)	180.3
EMPHYSEMA & OTHER CHRONIC LOWER RESPIRATORY DISEASES	124.3
ACCIDENTS	62.2
ALZHEIMER'S DISEASE	62.2
CEREBROVASCULAR DISEASE (STROKE)	46.6
CHRONIC LIVER DISEASE & CIRRHOSIS	28.0
DIABETES MELLITUS	28.0
SUICIDE	15.5
PNEUMONITIS DUE TO SOLIDS & LIQUIDS	15.5
SEPTICEMIA	12.4
INFLUENZA & PNEUMONIA	9.3
PARKINSON'S DISEASE	9.3
CONGENITAL MALFORMATIONS & CHROM. ABNORMALITIES	6.2
HYPERTENSION/HYPERTENSIVE RENAL DISEASE	6.2
ANEMIAS	6.2

*Rate is the number of deaths per 100,000 population.

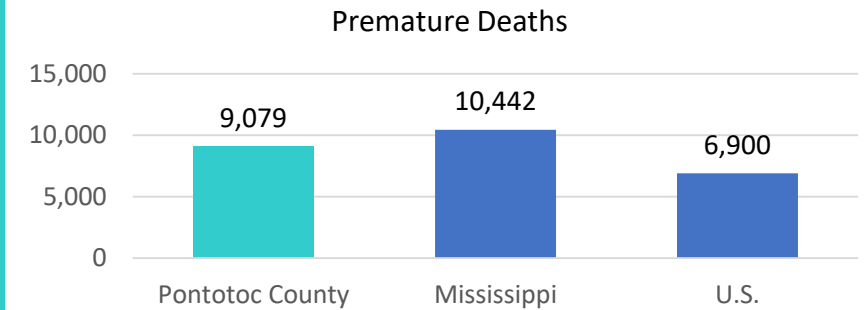
Other causes of death with a rate of 3.1 & below included: Complications Medical/Surgical Care, Homicide, Conditions Originating in the Perinatal Period, Nephritis, Nephrotic Syndrome & Nephrosis, Cholelithiasis/Gallbladder Disorder, Hernia, Aortic Aneurysm & Dissection, & In Situ, Benign & Unspecified Neoplasms.

Source: [Mississippi State Department of Health - Home \(ms.gov\)](https://www.ms.gov)

Premature Deaths

Pontotoc County has a lower number of premature deaths (9,079) than the state of Mississippi.

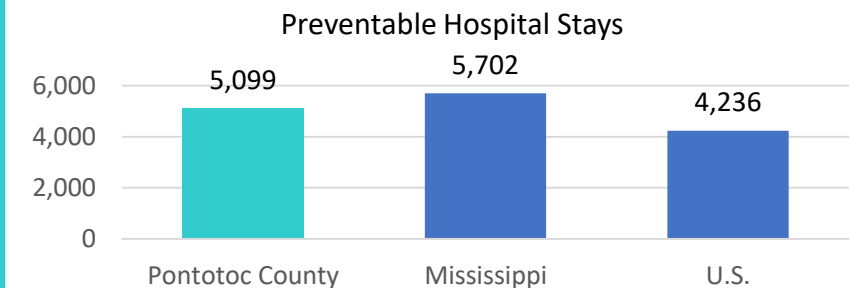
Premature death is the years of potential life lost before age 75 per 100,000 population.



Preventable Hospital Stays

Pontotoc County has a lower number of preventable hospital stays (5,099) than the state of Mississippi.

Preventable hospital stay is the rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.



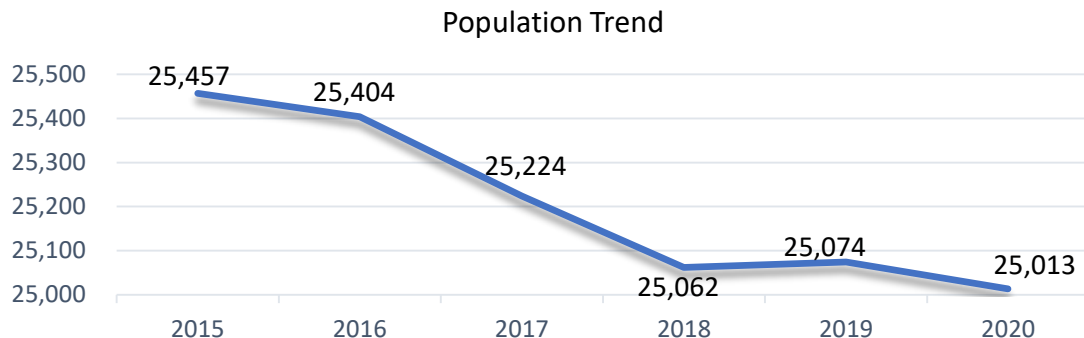
Source: County Health Rankings & Roadmaps 2021.
<https://www.countyhealthrankings.org/>

Demographics

Prentiss County

Population

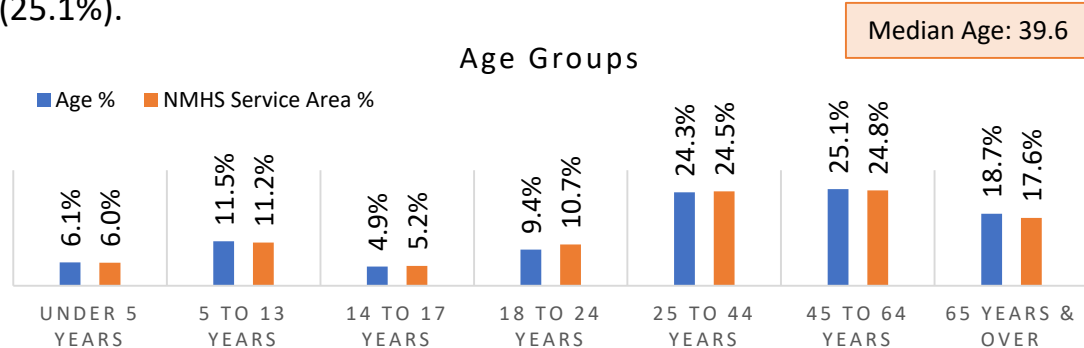
According to the U.S. Census Bureau, the population in Prentiss County decreased from 2015 to 2020.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Age

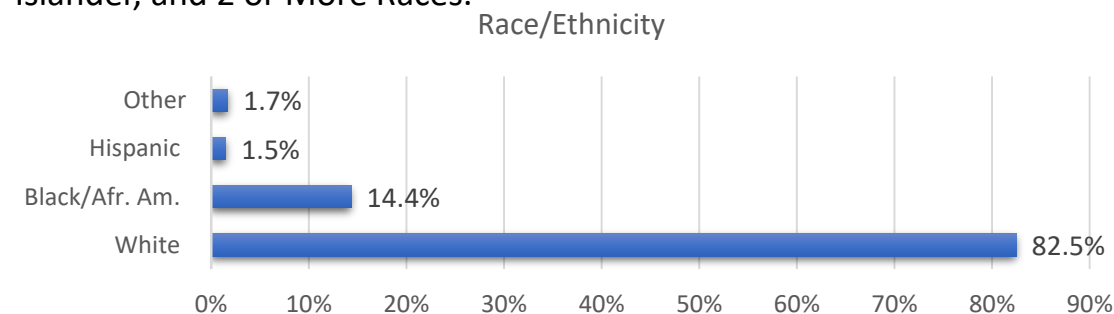
Prentiss County has a higher percentage of residents age 45 to 64 years (25.1%).



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Race/Ethnicity

The racial composition of the population in Prentiss County is shown below. Other includes Asian, American Indian & Alaska Native, Native Hawaiian & Other Pacific Islander, Native Hawaiian & Other Pacific Islander, and 2 or More Races.



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Ratio of Population to Providers

In Prentiss County, primary care physicians maintain the largest ratio compared to mental health providers and dentists. Ratios represent the number of individuals served by one provider.

Primary care physicians include non-federal M.D.'s and D.O.'s under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

Sources: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>; U.S. Census Bureau. <https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>

Primary Care Physicians	2,532:1
Dentists	2,284:1
Mental Health Providers	931:1
People per square mile	60.3

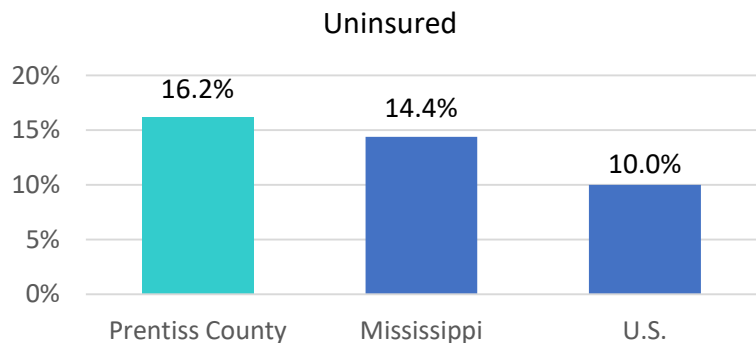
Demographics

Prentiss County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Uninsured

The percentage of population under age 65 without health insurance in Prentiss County, is 16.2%, which is higher than the state of Mississippi and the U.S.

The lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security.

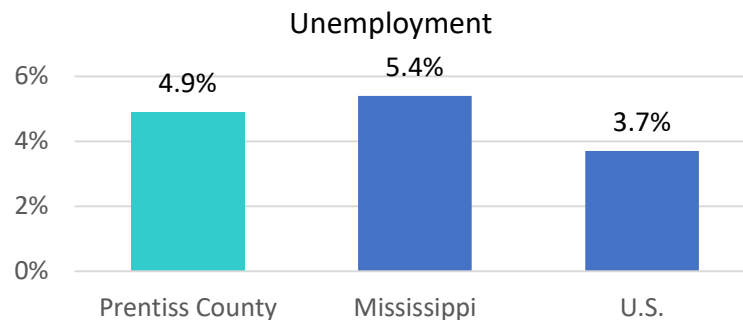


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Unemployment

Prentiss County has a lower percentage of unemployment (4.4%) than the state of Mississippi.

Unemployment has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, leading to an increased risk for disease or mortality, especially suicide.

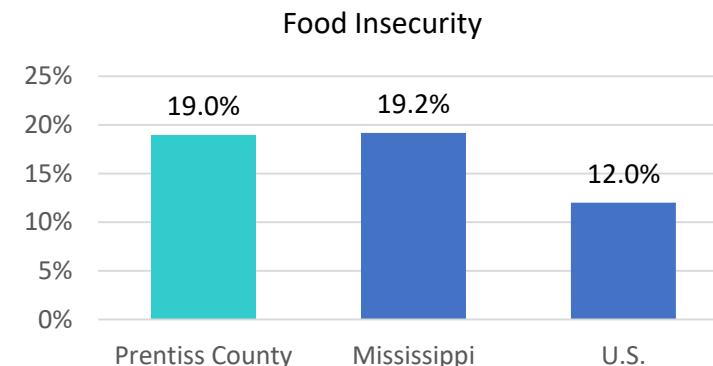


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Food Insecurity

Prentiss County has a lower food insecurity rate (19.0%) than the state of Mississippi.

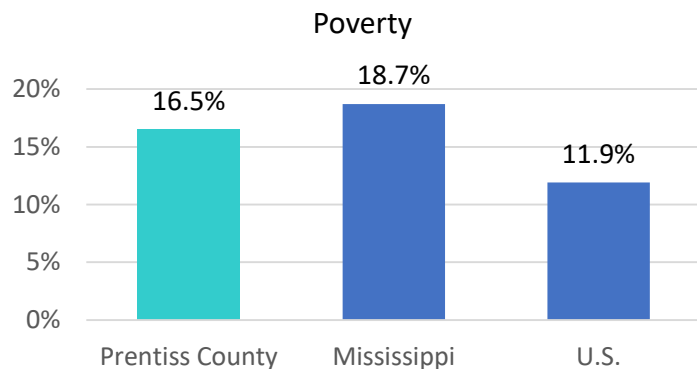
Lacking consistent access to food is related to negative health outcomes such as weight-gain and premature mortality.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Poverty

Prentiss County has a lower percentage of poverty (16.5%) than the state of Mississippi.

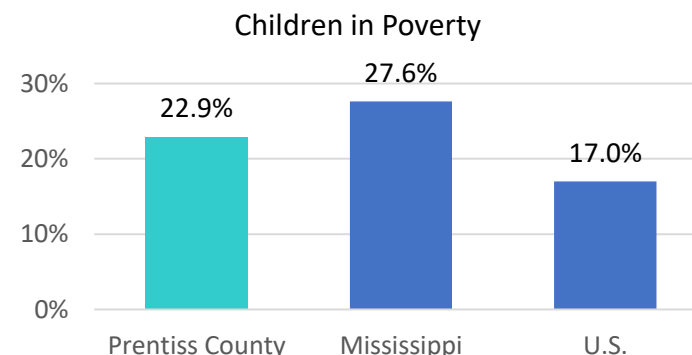


Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

Children in Poverty

The percentage of children in poverty in Prentiss County is lower (22.9%) than the state of Mississippi.

While impacts from poverty are present at all ages, children in poverty may experience lasting effects on academic achievement, health, and income into adulthood.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Demographics

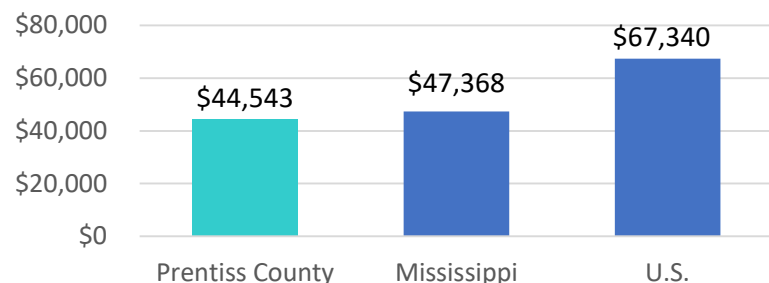
Prentiss County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Income

The median household income in Prentiss County is \$44,543, which is lower than the state of Mississippi and the U.S.

Median household income is an indicator of income and poverty, which can compromise physical and mental health.

Median Household Income



Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

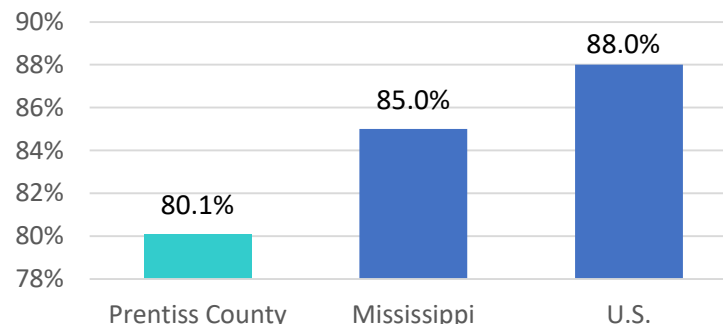


Education

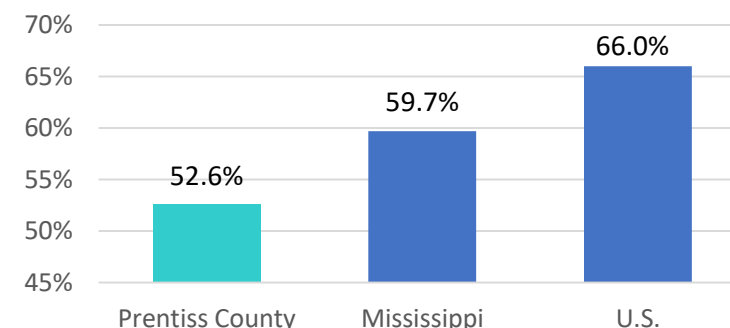
The percentage of adults age 25 and over with a high school diploma or equivalent in Prentiss County is 80.1%. The percentage of adults ages 25-44 with some post-secondary education (enrollment in vocational/technical schools, junior colleges, or four-year colleges) is 52.6%.

Better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive.

High School Completion



Some Post-Secondary Education



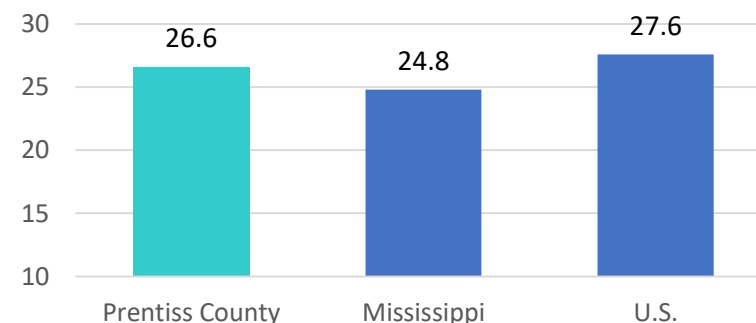
Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Mean Travel Time to Work

The average one-way commute in the United States reached a new high of 27.6 minutes in 2019. Prentiss County has a lower mean time of 26.6 minutes.

Source: U.S. Census Bureau. <https://data.census.gov/cedsci/table?q=DP03&g=0500000US28017&tid=ACSDP5Y2019.DP03>

Travel Time to Work



Demographics

Prentiss County – Health Rankings

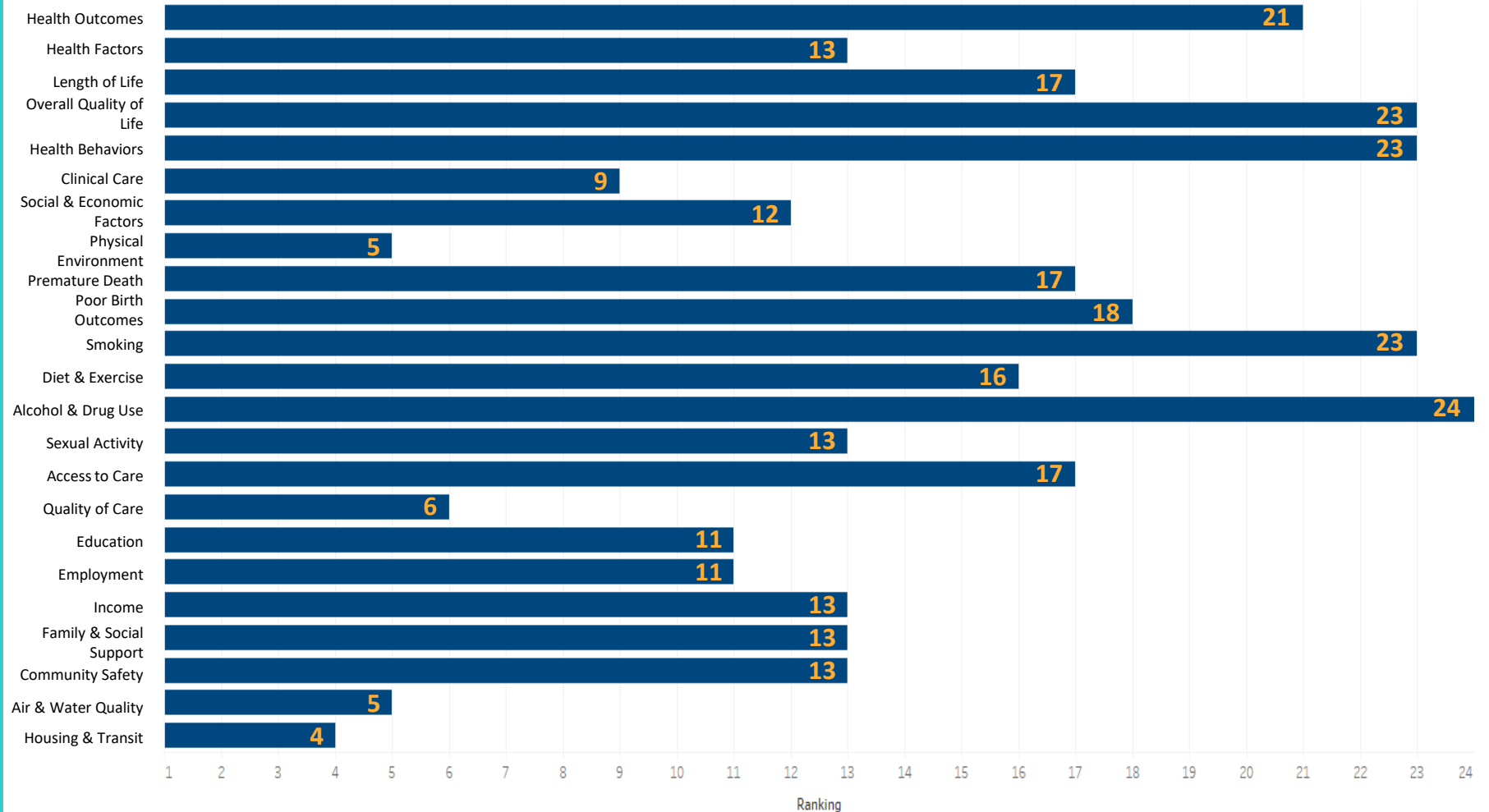
The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

By ranking the health of nearly every county, the County Health Rankings help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors).

The graph displays how health outcomes and factors in Prentiss County rank in comparison to the 24 counties in NMHS' service area.

Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Prentiss County Health Outcomes and Factors



Source: Adapted from the University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>
 Note: Each category ranked from 1 to 24 based on the number of NMHS counties, i.e., continuum from most healthy (1) to least healthy (24)

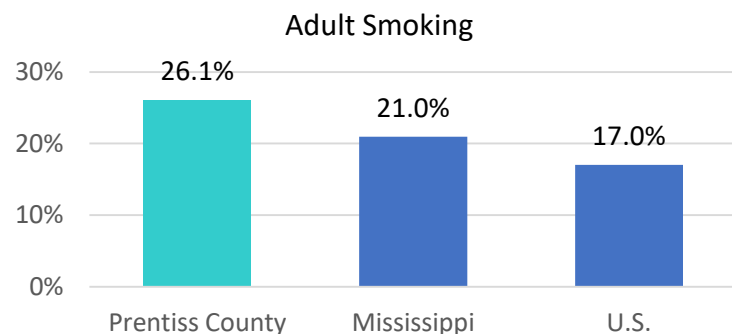
Demographics

Prentiss County – Health Behaviors and Factors

Adult Smoking

Prentiss County has a higher percentage of smokers (26.1%) than the state of Mississippi and the U.S.

Cigarette smoking can cause various cancers, cardiovascular disease, respiratory conditions, low birthweights, and other adverse health outcomes.

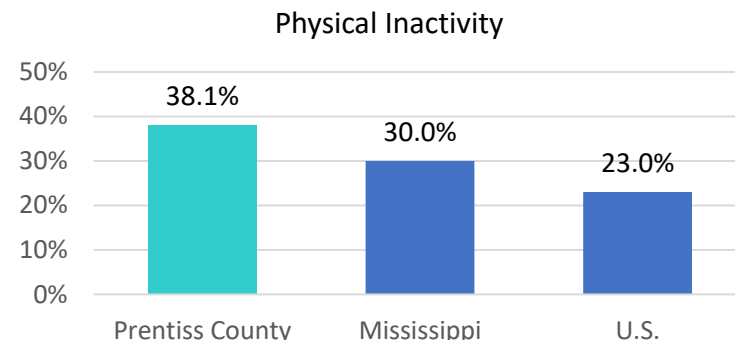


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Physical Inactivity

Prentiss County has a higher percentage of adults age 20 and over with physical inactivity (38.1%) than the U.S. and the state of Mississippi.

Physical inactivity has been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, and cardiovascular disease.

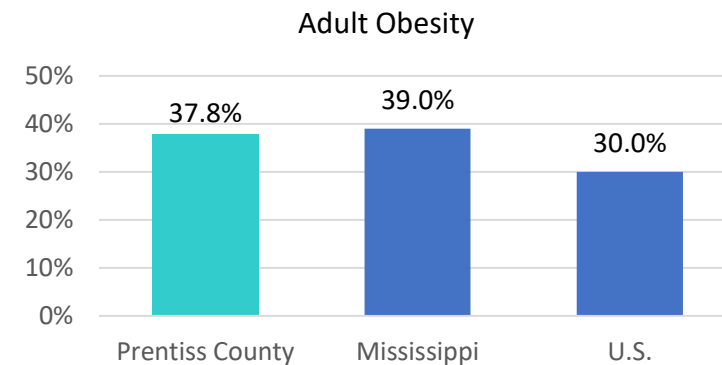


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Adult Obesity

The percentage of adults age 20 and over with a body mass index (BMI) greater than or equal to 30 in Prentiss County is 37.8%.

Obesity increases the risk for coronary heart disease, type 2 diabetes, cancer, hypertension, sleep apnea, and stroke.

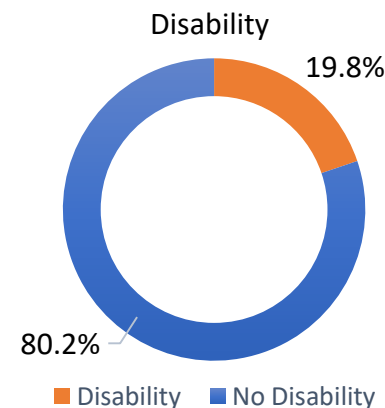
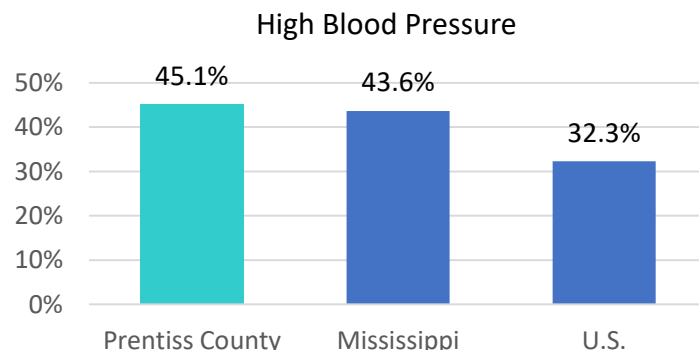


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Hypertension

According to the CDC, the estimated prevalence of high blood pressure among adults aged 18 years and older is 45.1% in Prentiss County which is higher than the state of Mississippi and the U.S.

Source: Centers for Disease Control and Prevention. <https://experience.arcgis.com/experience/22c7182a162d45788dd52a2362f8ed65>; <https://www.cdc.gov/brfss/brfssprevalence/index.html>



Disability

The percentage of people living with disabilities is highest in the South. Prentiss County's rate is 19.8%.

Adults living with disabilities are more likely to be obese, smoke, have heart disease, and diabetes.

Sources: U. S. Census Bureau. <https://data.census.gov/cedsci/>; CDC, [Disability Impacts All of Us Infographic | CDC](#)

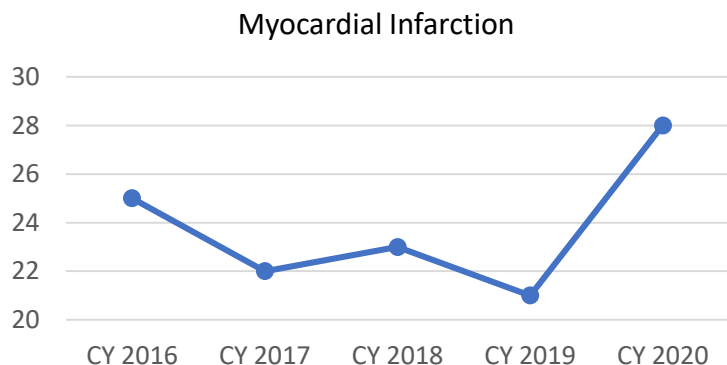
Demographics

Prentiss County – Chronic Diseases

Myocardial Infarction (Heart Attack)

According to Dimensions, a Mississippi Hospital Association (MHA) program, heart attacks decreased in Prentiss County in 2017 and 2019.

Heart disease is the #1 cause of death in Mississippi.

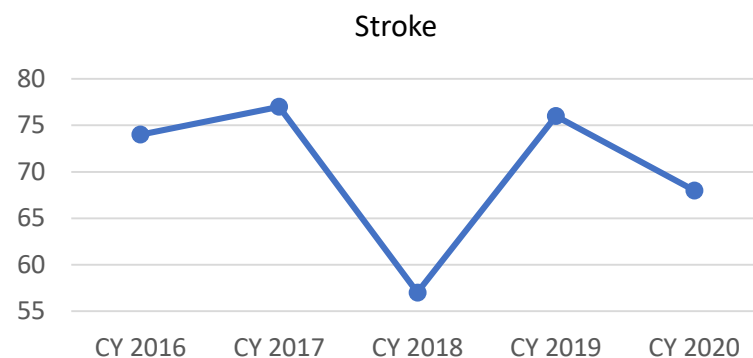


Source: Mississippi Department of Health, [Heart Health - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/HeartHealth)

Stroke

Strokes increased in Prentiss County in 2017 and 2019.

Stroke is one of the top five causes of death in Mississippi.

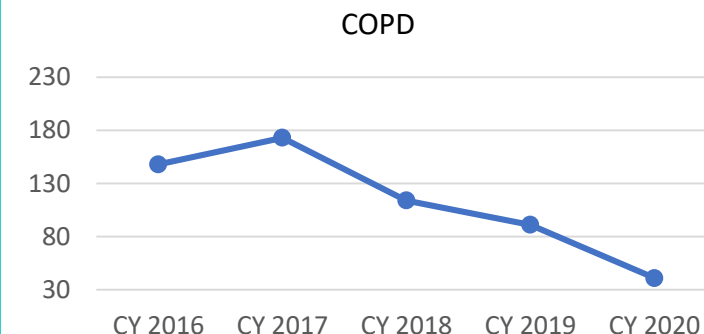


Source: Mississippi Department of Health, [Stroke Prevention - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/StrokePrevention)

COPD (Chronic Obstructive Pulmonary Disease)

COPD decreased in Prentiss County from 2017 to 2020.

It is estimated that more than 140,000 Mississippians are currently diagnosed with COPD.

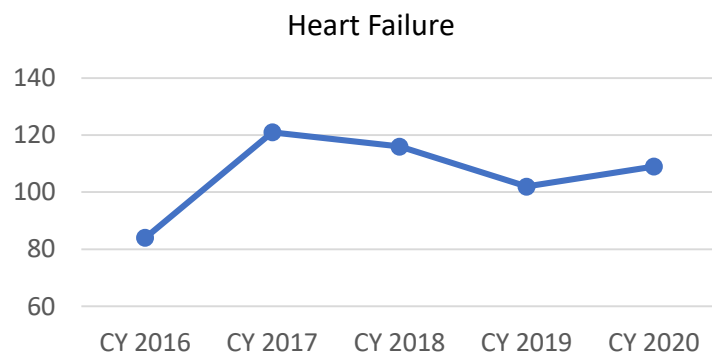


Source: Mississippi Department of Health, [Chronic Obstructive Pulmonary Disease \(COPD\) - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/ChronicObstructivePulmonaryDisease)

Heart Failure

Heart failures decreased in Prentiss County from 2017 to 2019.

All of the lifestyle factors that increase your risk of heart attack and stroke can also contribute to heart failure.



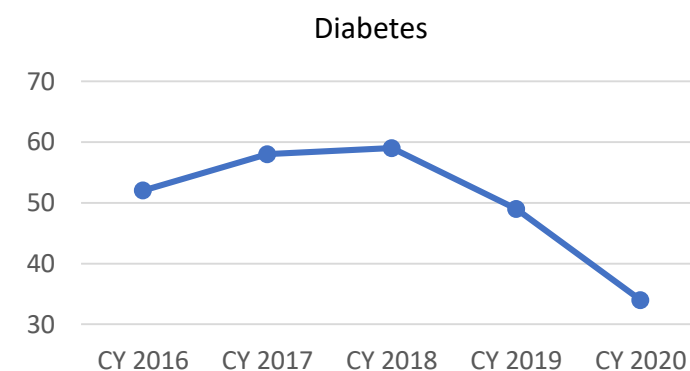
Source: AHA, [Causes and Risks for Heart Failure | American Heart Association](https://www.heart.org)

Source: Mississippi Hospital Association, Dimensions, 2016 - 2020. Reports for graphs published October 2021.

Diabetes

Diabetes decreased in Prentiss County from 2018 to 2020.

Moderate diet and exercise that results in 5 to 7 percent weight loss can delay and possibly prevent type 2 diabetes.



Source: Mississippi Department of Health, https://msdh.ms.gov/msdhsite/_static/43,0,296.html

Demographics

Prentiss County

Causes of Death

In Prentiss County, heart disease is the top cause of death with a rate of 370.1 deaths per 100,000 population.

Heart disease is the leading cause of death in the state of Mississippi.

CAUSE	2019 RATE*
HEART DISEASE	370.1
MALIGNANT NEOPLASMS (CANCER)	282.6
EMPHYSEMA & OTHER CHRONIC LOWER RESPIRATORY DISEASES	103.5
ACCIDENTS	75.6
ALZHEIMER'S DISEASE	63.7
CEREBROVASCULAR DISEASE (STROKE)	47.8
NEPHRITIS, NEPHROTIC SYNDROME & NEPHROSIS (KIDNEY DISEASE)	23.9
PNEUMONITIS DUE TO SOLIDS & LIQUIDS	19.9
SEPTICEMIA	15.9
HOMICIDE / SUICIDE	11.9
INFLUENZA & PNEUMONIA	11.9
CONGENITAL MALFORMATIONS & CHROMOSOME ABNORMALITIES	8.0
HYPERTENSION/HYPERTENSIVE RENAL DISEASE	8.0
DIABETES MELLITUS	8.0
CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (PER 1,000 LIVE BIRTHS)	7.1

*Rate is the number of deaths per 100,000 population.

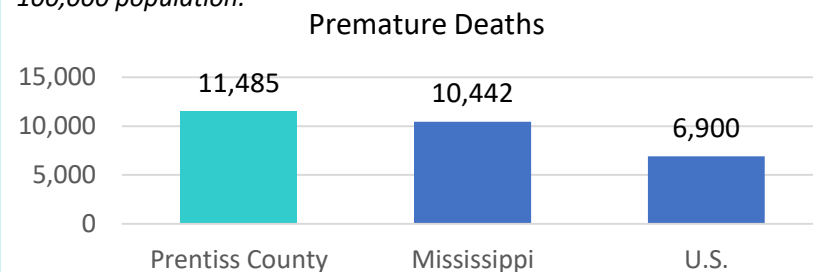
Other causes of death with a rate of 4.0 & below included: Chronic Liver Disease & Cirrhosis, Aortic Aneurysm & Dissection, Atherosclerosis, Parkinson's Disease, & In Situ, Benign & Unspecified Neoplasms.

Source: [Mississippi State Department of Health - Home \(ms.gov\)](https://www.ms.gov)

Premature Deaths

Prentiss County has a higher number of premature deaths (11,485) compared to the U.S. and the state of Mississippi.

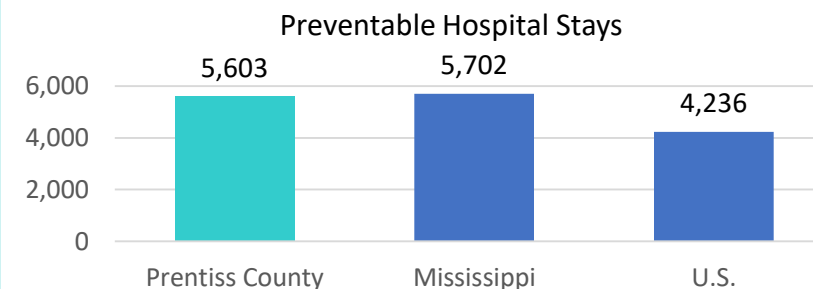
Premature death is the years of potential life lost before age 75 per 100,000 population.



Preventable Hospital Stays

Prentiss County has a lower number of preventable hospital stays (5,603) than the state of Mississippi.

Preventable hospital stay is the rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.



Source: County Health Rankings & Roadmaps 2021.
<https://www.countyhealthrankings.org/>

Demographics

Union County

Population

According to the U.S. Census Bureau, the population in Union County increased from 2016 to 2020.

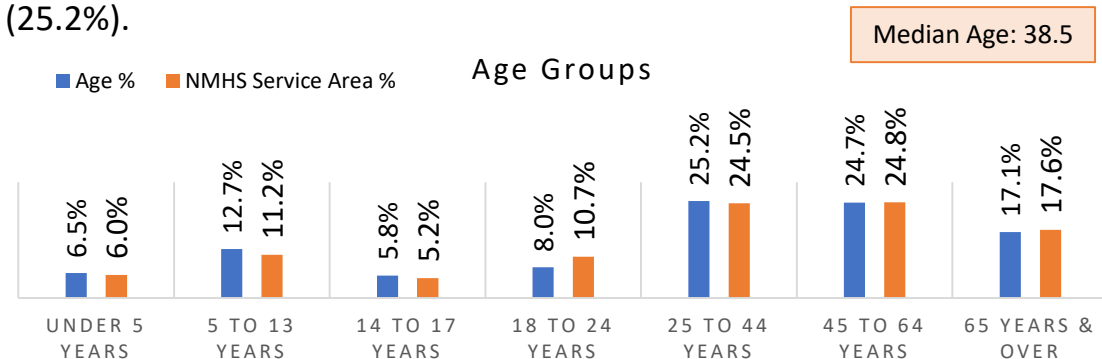
Population Trend



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Age

Union County has a higher percentage of residents age 25 to 44 years (25.2%).

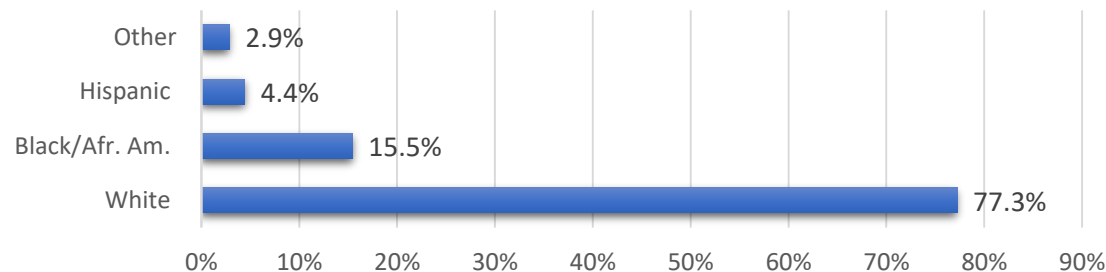


Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Race/Ethnicity

The racial composition of the population in Union County is shown below. Other includes Asian, American Indian & Alaska Native, Native Hawaiian & Other Pacific Islander, Native Hawaiian & Other Pacific Islander, and 2 or More Races.

Race/Ethnicity



Source: U.S. Census Bureau, Population Division; <https://www.census.gov/programs-surveys/popest/technical-documentation/research/evaluation-estimates/2020-evaluation-estimates/2010s-county-detail.html>

Ratio of Population to Providers

In Union County, mental health providers maintain the largest ratio compared to primary care physicians and dentists. Ratios represent the number of individuals served by one provider.

Primary care physicians include non-federal M.D.'s and D.O.'s under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

Primary Care Physicians	2,043:1
Dentists	2,620:1
Mental Health Providers	4,803:1
People per square mile	66.8

Sources: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>; U.S. Census Bureau. <https://www.census.gov/library/visualizations/interactive/2020-population-and-housing-state-data.html>

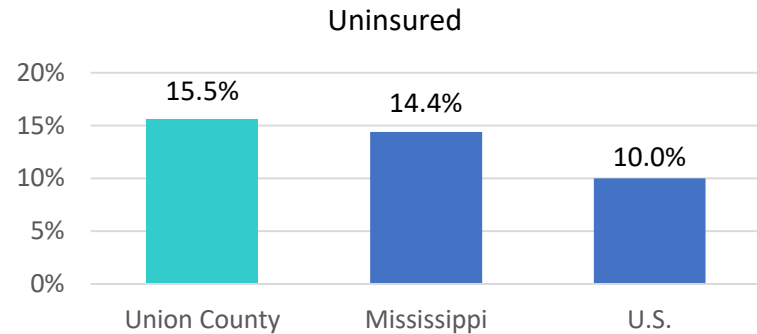
Demographics

Union County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Uninsured

The percentage of population under age 65 without health insurance in Union County, is 15.5%, which is higher than the state of Mississippi and the U.S.

The lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security.

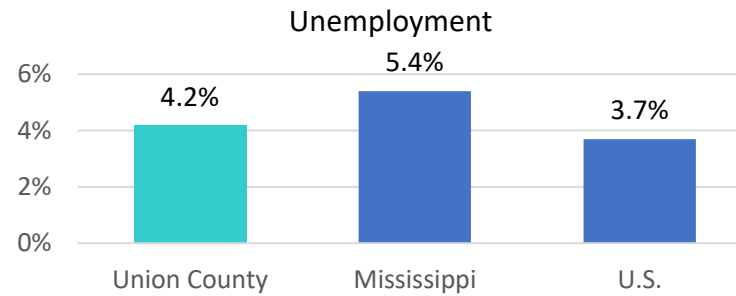


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Unemployment

Union County has a lower percentage of unemployment (4.2%) than the state of Mississippi.

Unemployment has been shown to lead to an increase in unhealthy behaviors related to alcohol and tobacco consumption, diet, exercise, and other health-related behaviors, leading to an increased risk for disease or mortality, especially suicide.

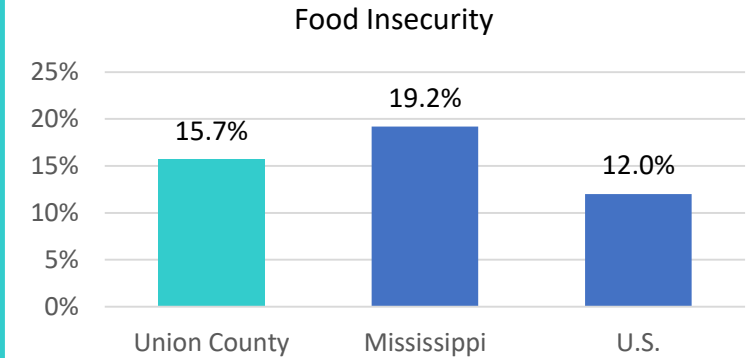


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Food Insecurity

Union County has a lower food insecurity rate (15.7%) than Mississippi.

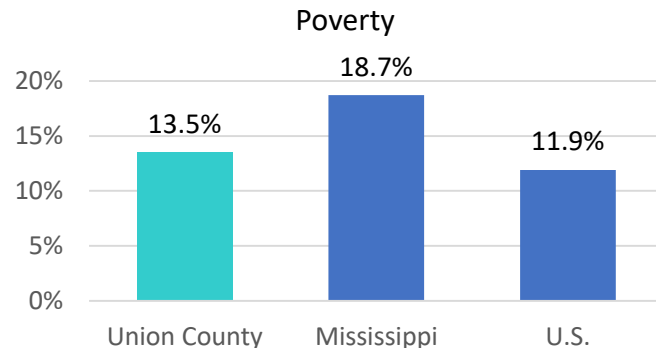
Lacking consistent access to food is related to negative health outcomes such as weight-gain and premature mortality.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Poverty

Union County has a lower percentage of poverty (13.5%) than the state of Mississippi.

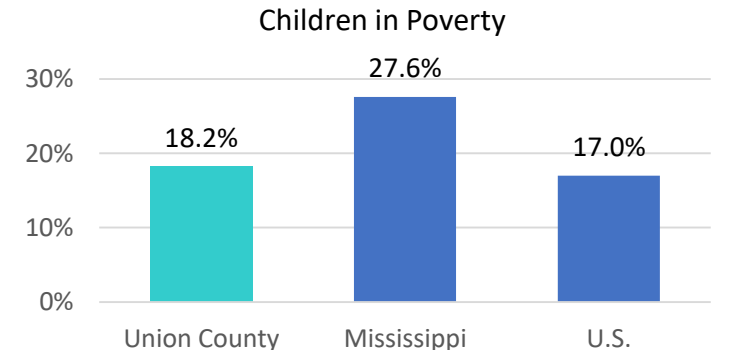


Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>

Children in Poverty

The percentage of children in poverty in Union County is lower (18.2%) than the state of Mississippi.

While impacts from poverty are present at all ages, children in poverty may experience lasting effects on academic achievement, health, and income into adulthood.



Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

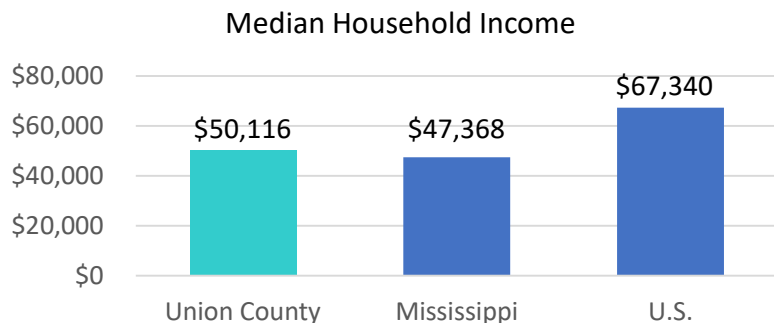
Demographics

Union County – Social Determinants of Health (conditions in which people are born, grow, live, work, and age)

Income

The median household income in Union County is \$50,116, which is higher than the state of Mississippi.

Median household income is an indicator of income and poverty, which can compromise physical and mental health.



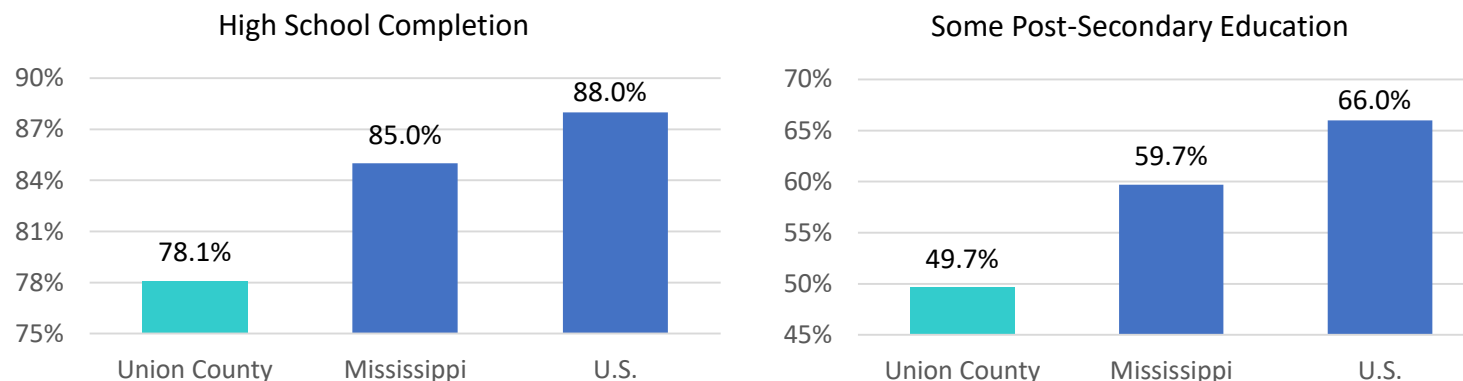
Source: U.S. Census Bureau. <https://www.census.gov/topics/income-poverty/poverty/data/data-tools.html>



Education

The percentage of adults age 25 and over with a high school diploma or equivalent in Union County is 78.1%. The percentage of adults ages 25-44 with some post-secondary education (enrollment in vocational/technical schools, junior colleges, or four-year colleges) is 49.7%.

Better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive.

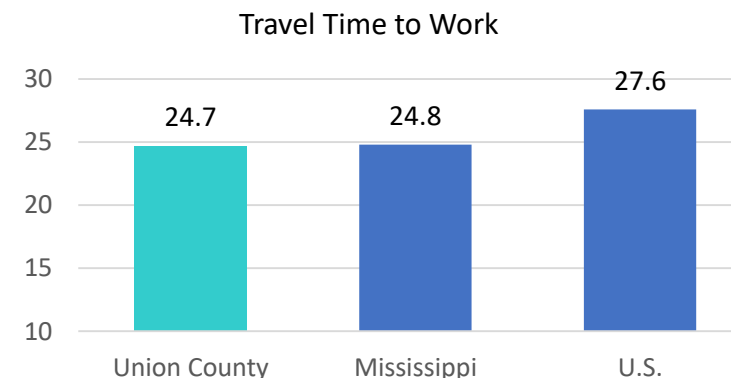


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Mean Travel Time to Work

The average one-way commute in the United States reached new high of 27.6 minutes in 2019. Union County has a lower mean time of 24.7 minutes.

Source: U.S. Census Bureau. <https://data.census.gov/cedsci/table?q=DPO3&g=0500000US28017&tid=ACSDP5Y2019.DPO3>



Demographics

Union County – Health Rankings

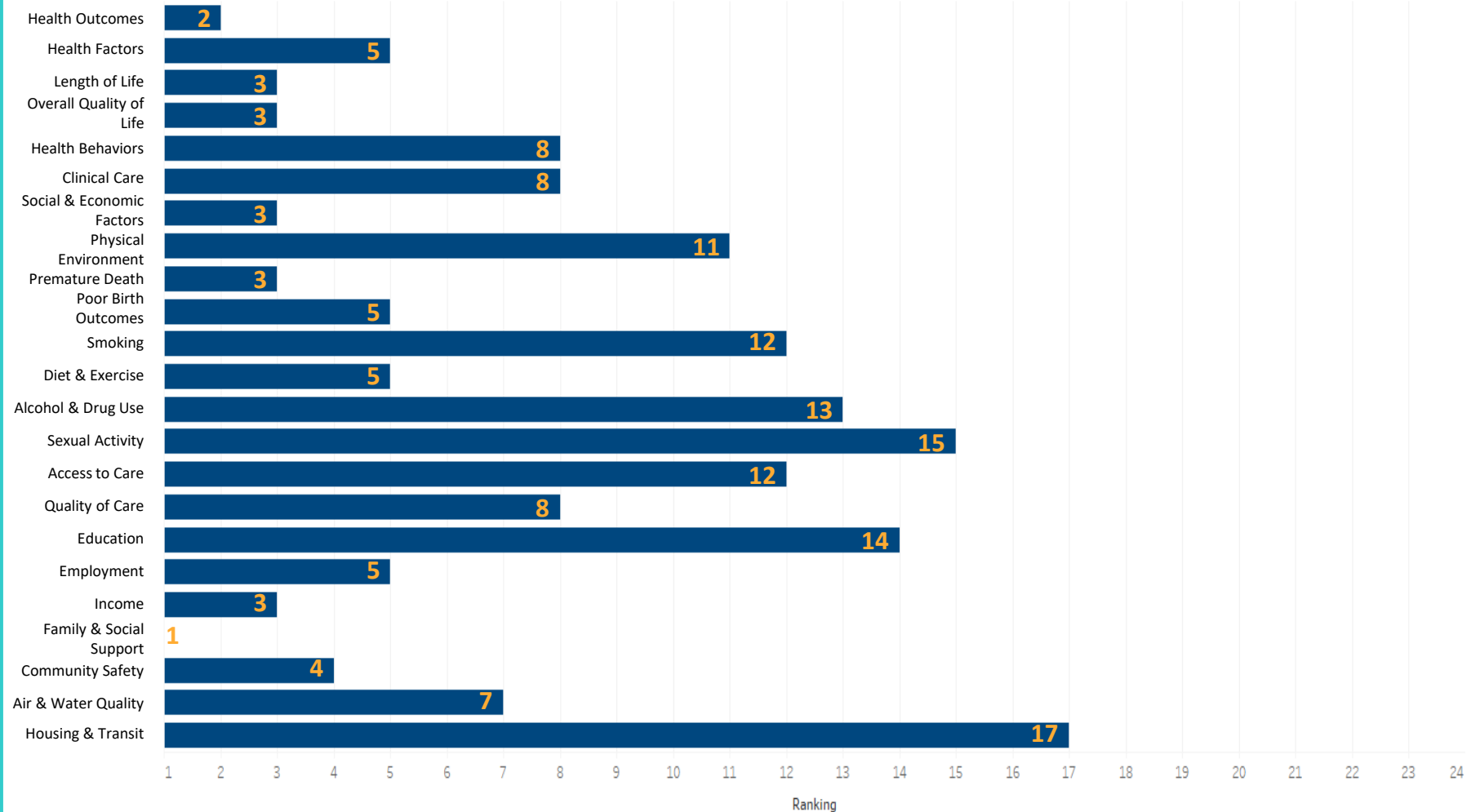
The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

By ranking the health of nearly every county, the County Health Rankings help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors).

The graph displays how health outcomes and factors in Union County rank in comparison to the 24 counties in NMHS' service area.

Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Union County Health Outcomes and Factors



Source: Adapted from the University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>
 Note: Each category ranked from 1 to 24 based on the number of NMHS counties, i.e., continuum from most healthy (1) to least healthy (24)

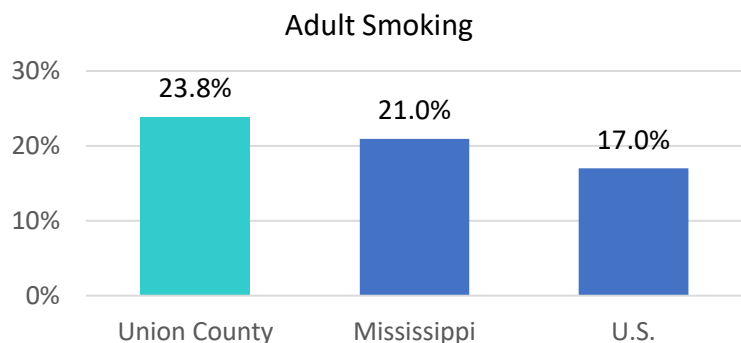
Demographics

Union County – Health Behaviors and Factors

Adult Smoking

Union County has a higher percentage of smokers (23.8%) than the state of Mississippi and the U.S.

Cigarette smoking can cause various cancers, cardiovascular disease, respiratory conditions, low birthweights, and other adverse health outcomes.

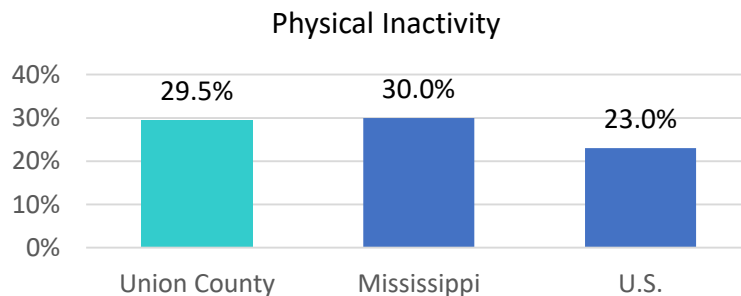


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Physical Inactivity

Union County has a lower percentage of adults age 20 and over with physical inactivity (29.5%) than the state of Mississippi.

Physical inactivity have been related to several disease conditions such as type 2 diabetes, cancer, stroke, hypertension, and cardiovascular disease.

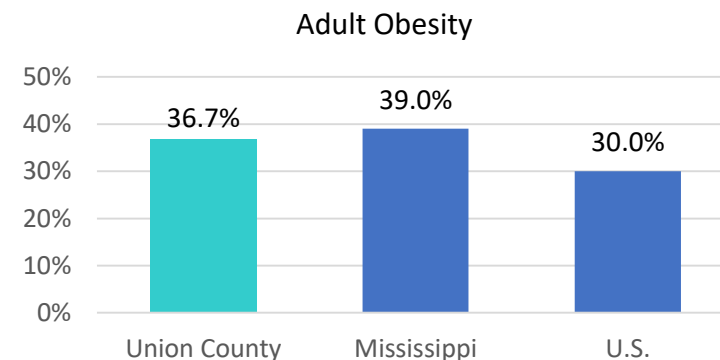


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Adult Obesity

The percentage of adults age 20 and over with a body mass index (BMI) greater than or equal to 30 in Union County is 36.7%.

Obesity increases the risk for coronary heart disease, type 2 diabetes, cancer, hypertension, sleep apnea, and stroke.

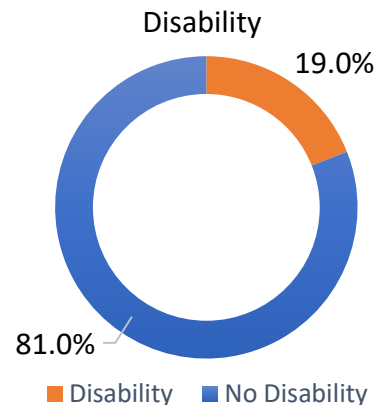
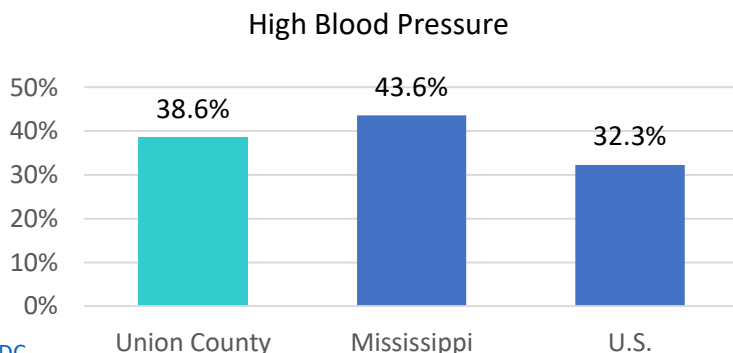


Source: County Health Rankings & Roadmaps 2021. <https://www.countyhealthrankings.org/>

Hypertension

According to the CDC, the estimated prevalence of high blood pressure among adults aged 18 years and older is 38.6% in Union County which is lower than the state of Mississippi.

Source: Centers for Disease Control and Prevention. <https://experience.arcgis.com/experience/22c7182a162d45788dd52a2362f8ed65>; <https://www.cdc.gov/brfss/brfssprevalence/index.html>



Disability

The percentage of people living with disabilities is highest in the South. Union County's rate is 19.0%.

Adults living with disabilities are more likely to be obese, smoke, have heart disease, and diabetes.

Sources: U. S. Census Bureau. <https://data.census.gov/cedsci/>; CDC, [Disability Impacts All of Us Infographic | CDC](#)

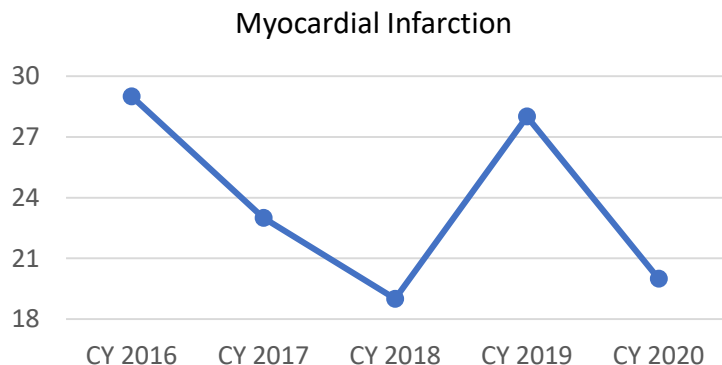
Demographics

Union County – Chronic Diseases

Myocardial Infarction (Heart Attack)

According to Dimensions, a Mississippi Hospital Association (MHA) program, heart attacks decreased in Union County from 2016 to 2018.

Heart disease is the #1 cause of death in Mississippi.

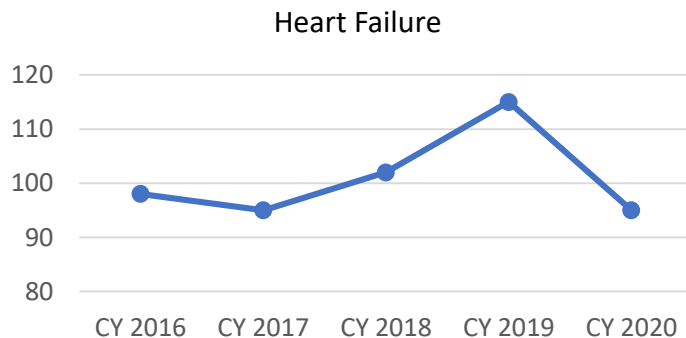


Source: Mississippi Department of Health, [Heart Health - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/Health/Heart-Health)

Heart Failure

Heart failures increased in Union County from 2017 to 2019.

Lifestyle factors that increase the risk of heart attack and stroke can also contribute to heart failure.



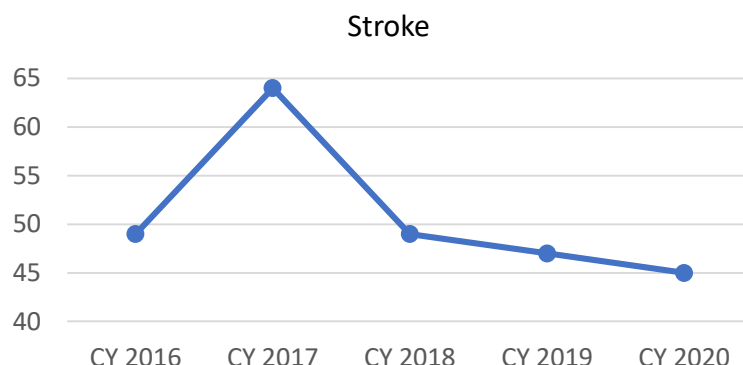
Source: AHA, [Causes and Risks for Heart Failure | American Heart Association](https://www.heart.org/health-topics/heart-failure)

Source: Mississippi Hospital Association, Dimensions, 2016 - 2020. Reports for graphs published October 2021.

Stroke

Strokes increased in Union County in 2017.

Stroke is one of the top five causes of death in Mississippi.



Source: Mississippi Department of Health, [Stroke Prevention - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/Health/Stroke-Prevention)

Diabetes

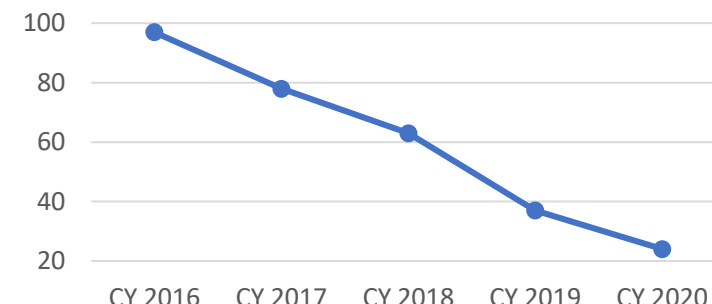
Diabetes increased in Union County from 2016 to 2018.

Moderate diet and exercise that result in 5 to 7 percent weight loss can delay and possibly prevent type 2 diabetes.

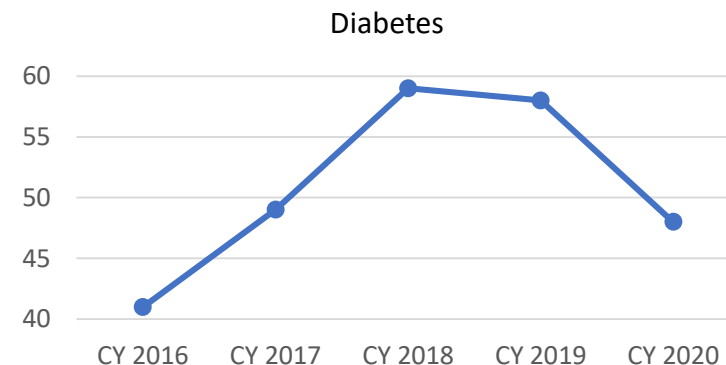
COPD (Chronic Obstructive Pulmonary Disease)

COPD decreased in Union County from 2016 to 2020.

It is estimated that more than 140,000 Mississippians are currently diagnosed with COPD.



Source: Mississippi Department of Health, [Chronic Obstructive Pulmonary Disease \(COPD\) - Mississippi State Department of Health \(ms.gov\)](https://www.ms.gov/Health/Chronic-Obstructive-Pulmonary-Disease)



Source: Mississippi Department of Health, https://msdh.ms.gov/msdhsite/_static/43,0,296.html

Demographics

Union County

Causes of Death

In Union County, heart disease is the top cause of death with a rate of 284.6 deaths per 100,000 population.

Heart disease is the leading cause of death in the state of Mississippi.

CAUSE	2019 RATE*
HEART DISEASE	284.6
MALIGNANT NEOPLASMS (CANCER)	260.3
EMPHYSEMA & OTHER CHRONIC LOWER RESPIRATORY DISEASES	79.8
CEREBROVASCULAR DISEASE (STROKE)	76.3
ACCIDENTS	65.9
SUICIDE	24.3
ALZHEIMER'S DISEASE	24.3
DIABETES MELLITUS	20.8
SEPTICEMIA	20.8
NEPHRITIS, NEPHROTIC SYNDROME & NEPHROSIS	13.9
CHRONIC LIVER DISEASE & CIRRHOSIS	13.9
INFLUENZA & PNEUMONIA	10.4
PARKINSON'S DISEASE	10.4
IN SITU, BENIGN & UNSPECIFIED NEOPLASMS	6.9

*Rate is the number of deaths per 100,000 population.

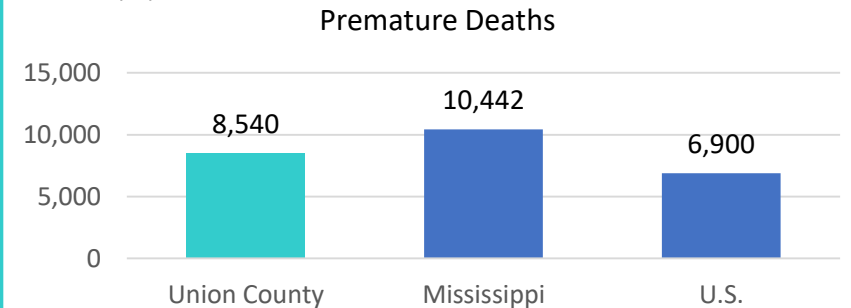
Other Diseases & Conditions with a rate of 3.5 & below included: Pneumonitis due to Solids & Liquids, Hypertension/Hypertensive Renal Disease, Viral Hepatitis, & Conditions Originating in the Perinatal Period (per 1,000 live births).

Source: [Mississippi State Department of Health - Home \(ms.gov\)](https://www.ms.gov)

Premature Deaths

Union County has a lower number of premature deaths (8,540) than the state of Mississippi.

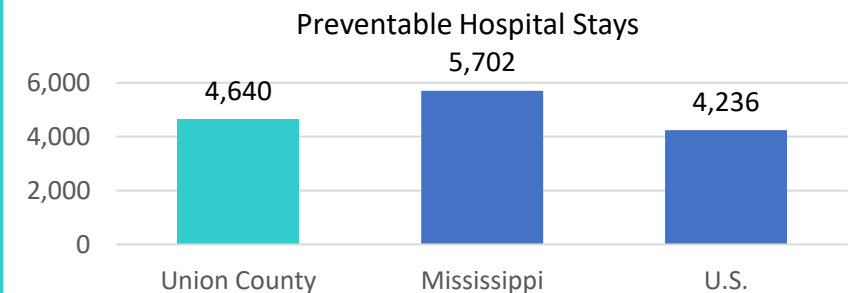
Premature death is the years of potential life lost before age 75 per 100,000 population.



Preventable Hospital Stays

Union County has a lower number of preventable hospital stays (4,640) than the state of Mississippi.

Preventable hospital stay is the rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.



Source: County Health Rankings & Roadmaps 2021.

<https://www.countyhealthrankings.org/>

Community Health Needs Survey Tool and Results



Community Health Needs Survey

In addition to collecting social and demographic data from secondary sources, additional input was solicited from community residents who represent broadly diverse interests of the service area ranging from nonprofit community volunteers to retired educators, bankers and private business leaders (Appendix).

The Strategy Team of NMHS developed an electronic SWOT (strengths, weaknesses, opportunities, threats) survey format to collect community feedback, managed the collection process specifically designed to gather the perspectives of various community leaders' experiences and their knowledge of the service area.

The hospital leadership recruited potential community stakeholders and electronic invitations were sent to residents who expressed an interest in participating in the SWOT. Of those who agreed to participate in the Tupelo Service Area SWOT, 64.8% completed the survey and a summary of their prioritized results are shown on the following pages.

- ✓ Healthcare resources readily available to you
- ✓ Healthcare resources not available to you
- ✓ Unmet needs you would like to see addressed
- ✓ Serious health challenges to you/your family



Community Health Needs Assessment

1. In your community, what healthcare resources are readily available to you/your family or other residents?
2. In your community, what healthcare resources are not available to you/your family or other residents?
3. In your community, what are some unmet healthcare needs that you would like to see addressed?
4. In your community, what serious health challenges are you/your family or other residents facing?

Community Health Needs Survey Tool and Results

Survey Results: In your community, what healthcare resources are readily available to you/your family or other residents?

- ✓ Easily accessible urgent care, after hours and other diverse clinic offerings
- ✓ Hospitals/health systems in the service area
- ✓ Community health services/education and related service offerings
- ✓ Physicians including specialists and various disease-specific providers
- ✓ Pharmacies/Medication, health food supplement stores, local produce markets
- ✓ Wellness centers, gyms, walking tracks
- ✓ Mental health - therapist, behavioral
- ✓ Fully staffed emergency rooms and related service offerings
- ✓ Rehab/PT and services for the blind
- ✓ Nursing homes/long-short term care



Community Health Needs Survey Tool and Results

Survey Results: In your community, what healthcare resources are not available to you/your family or other residents?

- ✓ Specialties, specialists, e.g., burn center, experimental treatments/procedures, holistic/alternative medicines, dermatology, transplants, diverse offerings across the lifespan particularly the elderly including rheumatology, orthopedic and specialized clinical procedures for men and women
- ✓ Resources for the economically disadvantaged, affordable services for all residents particularly the vulnerable populations (from pediatrics to geriatrics) and assistance with COVID-19
- ✓ Available health care professionals (nursing/staff shortages) and service including after hours pharmacy
- ✓ Affordable specialists, clinics, physicians and availability of health services 24-7 (including internet access)
- ✓ Mental health services/providers and assistance for addiction related treatments
- ✓ Support groups/Education/Preventive care across the lifespan from adolescents to parenting classes



Community Health Needs Survey Tool and Results

Survey Results: In your community, what are some unmet healthcare needs that you would like to see addressed?

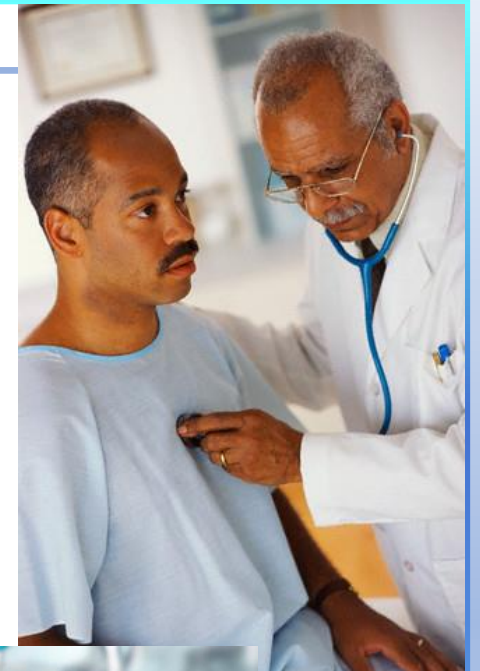
- ✓ Increase access to health services, healthcare navigation/mobility, health literacy, emotional support, ease of appointment scheduling, drive thru telemedicine services and ancillary services for family health
- ✓ Specialists/Specialty services including sleep studies, reproductive health, diabetic care and non-traditional service offerings that promote improved health
- ✓ Affordable and accessible mental health for diverse ages and multifaceted treatment needs and lifestyle choices
- ✓ Health education/prevention that includes self-care, various services that improve overall healthy living
- ✓ Resources for the economically disadvantaged and related ancillary service offerings that includes vision and dental
- ✓ Comprehensive services for the elderly that includes daycare and related offerings
- ✓ Clinics and clinical services for the homeless that includes after hours options
- ✓ Service offerings related to COVID-19
- ✓ Need for professionals in service area



Community Health Needs Survey Tool and Results

Survey Results: In your community, what serious health challenges are you/your family or other residents facing?

- ✓ COVID-19 and related health risks
- ✓ Chronic disease/illnesses particularly hypertension, stroke, cancer-emotional stressors and related
- ✓ Increase access to health resources/services and improved patient care/service offerings
- ✓ Staff/hospital bed shortage
- ✓ Obesity and other unhealthy lifestyle choices
- ✓ Education including nutrition, diet and exercise, lifestyle risks and choices
- ✓ Specialty care including children vision care, healthcare travel services, urology, transplants
- ✓ Mental health and related issues
- ✓ Affordable healthcare/prescriptions/cost of care
- ✓ Diabetes
- ✓ Provider appointments – scheduling and long wait times
- ✓ Overall health status risks associated with Mississippi



Implementation Strategies

Listening and Learning to Improve

NMHS as the parent corporation of North Mississippi Medical Center-Tupelo routinely uses diverse methods to capture the voice of those they serve in the 24 rural counties in northeast Mississippi and northwest Alabama. A SWOT analysis was designed to identify the service area's perceived strengths, weaknesses, opportunities and threats. The Strategy Team of NMHS developed the survey questions (methodology referenced on page 24). The elicited responses helped NMHS validate health-related needs and community opportunities.

The SWOT along with data from various publicly available sources, e.g., regional/local organizations and agencies assisted NMHS in systematically identifying its strategic priorities. The below methods were also used to glean needs and preferences of service area residents:

- ✓ Satisfaction surveys
- ✓ Discharge phone calls
- ✓ Face time with community leaders
- ✓ Social media
- ✓ Community outlets/organizations
- ✓ Board and employee participation
- ✓ Research



Implementation Strategies

NMHS Strategic Priorities for 2022

North Mississippi Health Services' mission is to improve the health of our patients, families and the communities we serve. Where we are born, live, work and age affect a wide range of health risks and outcomes. According to the County Health Rankings Model, social determinants of health have an influence on length and quality of life. We are connecting with partners in our region to address these needs.

These partners will help us identify community resources. Our goal is that in every stage of life, our patients and families can expect good health outcomes regardless of their social conditions.

Our community goal is to reduce preventable disease, illness and injury. We are also interested in improving social and behavioral factors that have a negative effect on the health of the people of our region.



Implementation Strategies

Improve Health Goals and Plans

Increase Access to Preventive Service

- Expand virtual/telehealth offerings
- Collaborate to explore transportation needs
- Initiate innovative listen-to-learn community sessions
- Utilize partners to assist those with limited or no insurance
- Increase affordable after-hours care
- Improve access to specialty care

Increase Physical Activity and Promote Exercise as Medicine

- Partner with local wellness centers and gyms
- Develop partnerships with local parks/recreation facilities
- Utilize exercise "prescriptions"
- Organize walking clubs
- Promote corporate wellness programs
- Identify community resources, e.g., trails, walking tracks, etc.

Develop a Nutritionally Aware Community Culture

- Screen for and create access to nutritious foods
- Develop culturally-appropriate educational programs
- Develop community coalitions to provide fresh food/promote community gardens
- Teach food preservation skills
- Utilize established networks to promote nutrition

Develop Partnerships with Public Entities

- Public health -- state and regional offices
- Education Institutions -- early childhood, primary, secondary and post-secondary
- Government -- state, regional and local

Implementation Strategies

Implementation Activities and Recognitions

- Continue emphasis on chronic disease management
- Implement an Improve Health initiative reinforced by community partnerships with a five-year end goal designed to decrease obesity, increase physical activity and reduce smoking in service area
- Continue focus on heart related disease – recognized as 50 Top Cardiovascular Hospitals by IBM Watson Health; also, Platinum Award for Action/Chest Pain; Myocardial Infarction winner; American Heart Association GoldPlus Get With The Guidelines®– Stroke Quality Achievement Award and Stroke Honor Roll Elite Award, 2021
- Enhance obesity awareness - offered a free year-long diabetes prevention program for individuals struggling with obesity, have or have had gestational diabetes or pre-disposed to diabetes through family history
- Continuous focus on women/children’s services – received the Baby-Friendly Designation in 2020
- Opened a Neuroscience Institute, i.e., a regional destination for comprehensive, innovative care for a wide range of brain, spine and neurological disorders
- Nationally recognized with a grade of A – Leapfrog Hospital Safety Grade



Appendix

A – Local, Mississippi, Alabama, and United States Data Assessment

Alabama Department of Public Health. https://www.alabamapublichealth.gov/healthstats/assets/113causes_2019.pdf

American Heart Association (AHA). <https://www.heart.org/>

Centers for Disease Control and Prevention (CDC). [Centers for Disease Control and Prevention \(cdc.gov\)](https://www.cdc.gov/)

County Health Rankings & Roadmaps, 2021. <https://www.countyhealthrankings.org/>

Mississippi Department of Health. https://msdh.ms.gov/phs/2019/Summary/dthsumm_cnty_2019.pdf

Mississippi Hospital Association, Dimensions, 2016 - 2020. <https://dimensions.mhanet.org/Account/Login>

National Institute of Standards and Technology. <https://www.nist.gov/baldrige/north-mississippi-health-services>

North Mississippi Health Services. [North Mississippi Medical Center-Tupelo \(nmhs.net\)](https://www.nmhs.net/)

United States Census Bureau. [Census.gov](https://www.census.gov/)

Appendix

B – Community Survey Participants

Organization Description/Leader Affiliation	Broad Interest of Community
Adrenaline Fitness – community partner	Health and fitness
American Cancer Society – community partner	Voluntary health organization
City of Tupelo – community partner	Local government official
Community Development Foundation – community partner	Community and economic development
CREATE Foundation – community partner	Support for regional development; charitable giving – general/diverse
Family Resource Center – community partner	Services for families – diverse/general
Good Samaritan Health Services – community partner	Services for families – diverse/general
Fuel – community partner	Holistic health
Mississippi State University – community partner	Educational institution
North Mississippi Medical Center Diabetes Prevention Program – community partner	Healthcare knowledge – diverse/general
North Mississippi Medical Center Tupelo Wellness Center	Health and fitness
Parkgate Pregnancy Clinic – community partner	Services for pregnant women
Tupelo Housing Authority – community partner	Public housing
United Way of Northeast Mississippi – community partner	Health, education and financial stability of residents – diverse/general