

Monmouth County Department of Public Health 2024 Community Health Needs Assessment *Executive Summary*



Prepared by:



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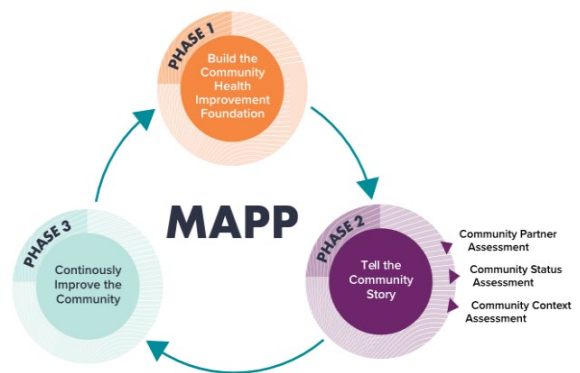
Executive Summary of CHA Findings

What is the purpose of this report?

- To develop an accurate snapshot of demographic, social, economic, environmental, and health indicators that impact the quality of life for all people throughout Monmouth County.
- To demonstrate the impact of Social Determinants of Health (SDoH), identify disparities in outcomes, and illuminate pathways for improvement and increased health equity.
- To make local data available to inform community health improvement efforts.

How was this accomplished?

The 2023-2024 CHA was a collaborative effort through the Health Improvement Coalition of Monmouth County (HICMC), comprised of the health departments in Monmouth County, New Jersey and community-based organizations. The methods included quantitative and qualitative research to determine health trends and disparities across Monmouth County communities. The research methods align with Mobilizing for Action through Planning and Partnerships (MAPP) 2.0, created by National Association of County and City Health Officials (NACCHO). A key component of MAPP 2.0 is the integration of health equity in all aspects of the research, planning, and implementation. Through a comprehensive view of statistics and community stakeholder feedback, health priority areas were determined. A summary of these findings is included here. The full report can be found at <https://www.visitmonmouth.com/Page.aspx?Id=1932>.

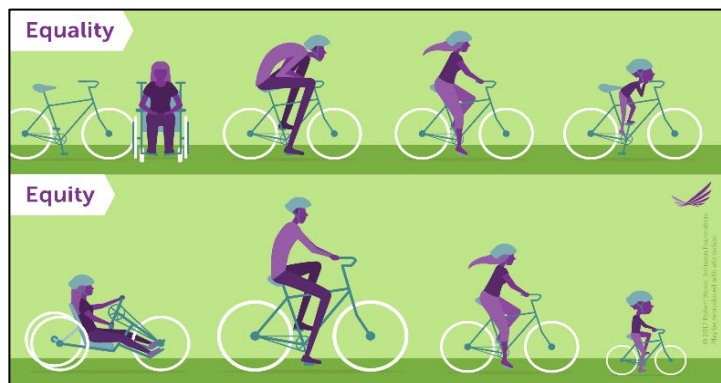


What data sources and methods were used?

- A mix of local, regional, state, and national datasets including NJSHAD, CDC Wonder, American Community Survey (ACS), and others were used to create a statistical profile.
- Key Informant Interviews, a Key Stakeholder Survey, and Focus Groups conducted in English and Spanish were used to gather qualitative data.

What is an Equity of Opportunity Approach?

- Strive towards equitable outcomes for all by naming and challenging structural and institutional inequities
- Leverage collaboration
- Change processes and policies to reimagine equitable delivery of services
- Focus on upstream – or root causes of – disparities in health outcomes
- Emphasize collaborative effort in building community resilience
- Review internal processes to identify opportunities to remove barriers and unconscious biases



Source: Robert Wood Johnson Foundation





The Health Improvement Coalition of Monmouth County (HICMC)

The Health Improvement Coalition of Monmouth County (HICMC) began in 2005 as dozens of community agencies, organizations, and concerned citizens convened to articulate a shared vision for the residents of Monmouth County and improve the health and quality of life. Since 2005, the HICMC partners worked together to complete comprehensive Community Health Assessment (CHA) and a Community Health Improvement Plan (CHIP) for Monmouth County every five years.



In 2024, the HICMC - formally comprised of Monmouth County Health Department, Colts Neck Health Department, Freehold Area Health Department, Jersey Shore Regional Health Commission, Long Branch Health Department, Middletown Health Department - collaborated to create this Community Health Assessment (CHA) in alignment with Public Health Practice Standards for Local Boards of Health.



CHA Advisory Committee

The Community Health Assessment (CHA) process has been a collaborative effort facilitated by 35th Street Consulting and the HICMC partners. The CHA sought to illuminate unique community health strengths and challenges and to inform the development of a Community Health Improvement Plan (CHIP) to achieve optimal health for all. The following individuals from the HICMC met bi-monthly throughout the process to review progress and offer insight to ensure a robust, collaborative report.

- Michael Balka, Jersey Shore Regional Health Commission
- Enrico Cabredo, Monmouth County Health Department
- Richard DeBenedetto, Middletown Health Department
- Tom Frank, Colts Neck Health Department
- Kelsey Grenus, Freehold Area Health Department
- Margy Jahn, Freehold Area Health Department
- Michael Kowal, Long Branch Health Department
- Stacy Krause, Middletown Health Department
- Christopher Merkel, Monmouth County Health Department
- Brett Nance, Freehold Area Health Department

Research Partner:





Where is Monmouth County? What makes it unique?

Monmouth County is located on the central east coast of the state of New Jersey. It is known for its desirable beaches and coastal communities – with a large uptick in short and longer-term visitors in the summer months – but is also home to a variety of geographies throughout its interior. As a result of its proximity to New York City, Monmouth County attracts many commuter families as well as New Americans who may land initially in New York City but look to settle elsewhere. Founded in 1683, Monmouth County boasts 53 distinct municipalities. Monmouth County is known as both a hub of boating and fishing, as well as home to some of the largest names in technology and telecommunications.

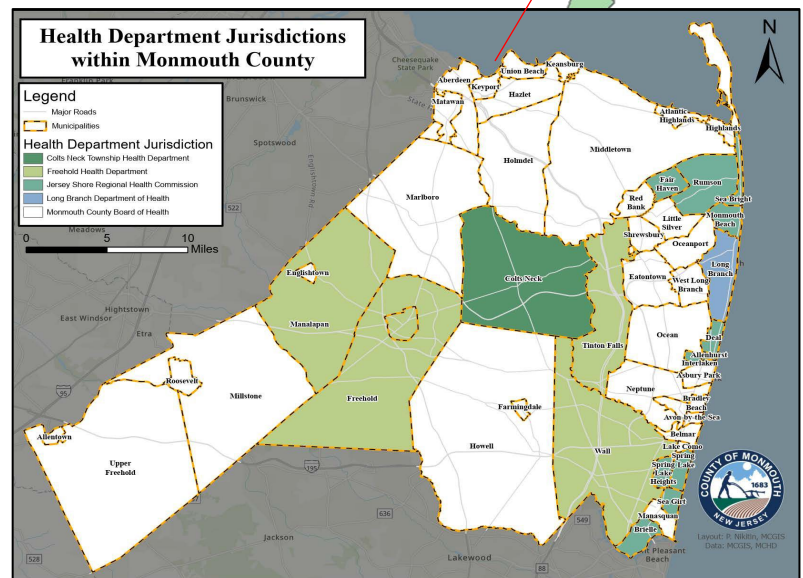


What is the Monmouth County Health Department?

The Monmouth County Health Department (MCHD) is one of six health departments in Monmouth County. 26 of Monmouth County’s 53 municipalities participate in the Monmouth County Board of Health System. The Monmouth County Board of Health, established in 1978, is composed of 9 citizen members who are appointed by the Monmouth County Board of Chosen Commissioners.

Christopher P. Merkel, M.P.H., is the Public Health Coordinator and Health Officer, and **Susan M. Kiley**, is the Commissioner Liaison to the Monmouth County Board of Health.

The Monmouth County Health Department is vital to the overall health and well-being of Monmouth County residents. In the time since the onset of the COVID-19 pandemic, residents have grown in their understanding of who public health is and the services they offer. Monmouth County Health Department has been proactive and strategic in its partnerships, particularly with the development and implementation of Monmouth County ACTS (Assisting Community Through Services) Hubs, lending a public health perspective to teams working to actively engage resident needs, including Early Childhood Success, Housing and Homelessness, Positive Youth Development, Behavioral Health, Successful Aging, and Financial Empowerment.



Monmouth County Health Department Mission Statement:
To empower residents of Monmouth County to achieve an optimal quality of environment and health.

Monmouth County Health Department Vision:
To stand at the forefront of public health, to identify health disparities and forge innovative health solutions, and to advocate for, protect and improve our community and environment.





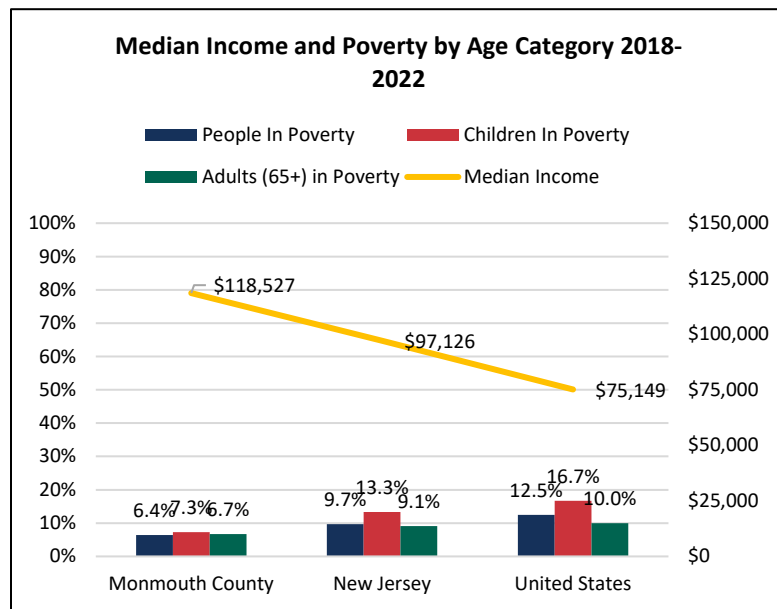
Who Lives in Monmouth County?

The population of Monmouth County has increased marginally since 2010. The age distribution of the population in Monmouth County is similar to the US and slightly younger than New Jersey. 1 in 5 people in Monmouth County are 18 or younger. Demographics like age, race, language, education, and income play a big role in health. Disparities we can see in health outcomes between groups of people are often due to barriers to access based on race, language, or other factors.

Total Population 2010-2022

	Total Population 2010	Total Population 2022
Monmouth County	628,112	643,064
New Jersey	8,721,577	9,249,063
United States	303,965,272	331,097,593

Source: US Census Bureau, American Community Survey

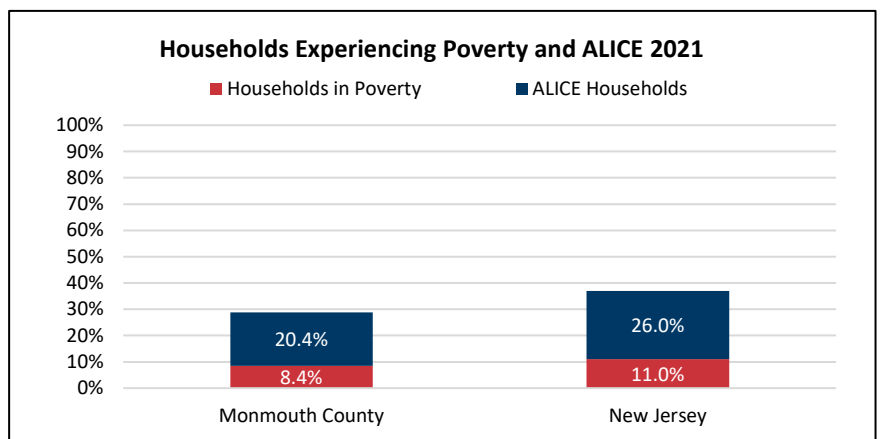


Source: US Census Bureau, American Community Survey

According to the Centers for Disease Control (CDC), 40% of our health status is determined by socioeconomic factors. This is because our income sets how much money we have to meet basic needs like housing, food, and health care.

Monmouth County is relatively high-income; the median income is 22% higher than the median income across New Jersey, but there are disparities across communities.

While there is a relatively low proportion of Monmouth County residents who live below the federal poverty level, roughly 1 in 5 households do not have the financial resources to make ends meet despite having a job, also known as ALICE.



Source: United for ALICE

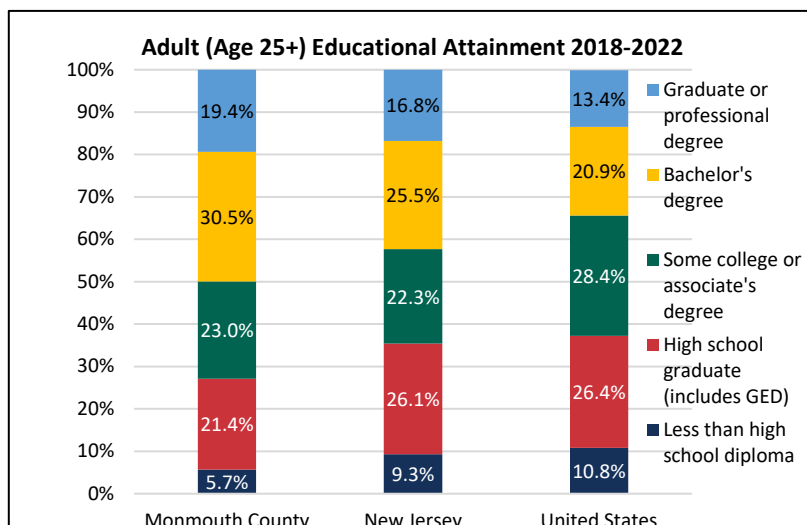




Education and Young People

Higher levels of education and income are associated with better health and social outcomes. This is in part, because higher levels of education can lead to higher paid jobs and jobs with benefits, such as health insurance. Supporting families with continuing education and helping kids be successful in school are investments in healthy communities. Half of adults in Monmouth County have completed a Bachelor’s degree or higher, more than adults across New Jersey (42%), and significantly more than adults nationwide (34%). However, there is *not* equal opportunity across Monmouth County.

“The segregation of resources, economic resources, those are some of the major issues and that’s why I continue to stay involved.”



Source: US Census Bureau, American Community Survey

High School graduation rates across Monmouth County are higher than the statewide rate. Monmouth County did not experience the COVID-19-era drop-off that many other communities across the state experienced.

Very few teens and young adults are not in school and not working. While these are positive findings, the qualitative research suggests that young people are struggling emotionally.

“When I was in school, it was reading, writing, and arithmetic. Now it's reading, writing, arithmetic, and mental health. Mental health is probably number one now because kids, for whatever reason – some people blame it on the pandemic and some people blame it on social media – whatever the blame is, many children have issues with mental health.”

High School Graduation Rate by Monmouth County School District

	2019	2020	2021	2022
Allentown High School	97.2	92.7	96.0	96.0
Asbury Park High School	75.8*	82.1*	79.3*	84.8
Henry Hudson Regional High School	97.7	100.0^	95.2	94.0
Keansburg High School	87.9	87.7	83.0	79.4
Keyport High School	93.5	90.1	94.7	91.5
Manasquan High School	93.8	91.7	94.2	96.0
Matawan Regional High School	94.8	91.0	90.5	86.2
Middletown High School North	93.9	92.7	94.7	93.5
Middletown High School South	95.7	97.7	96.0	96.8
Monmouth County Vocational School District	98.6^	97.0	98.4^	99.5^
Neptune High School	79.6	84.7	81.1	76.2*
Ocean Township High School	94.4	94.2	90.5	94.6
Raritan High School	97.6	96.6	95.2	94.7
Red Bank Regional High School	92.1	94.3	95.5	92.9
Rumson-Fair Haven Regional High School	96.6	97.9	97.6	98.1
Monmouth County	95.4	95.3	95.5	95.3
New Jersey	90.6	91.0	90.6	90.9

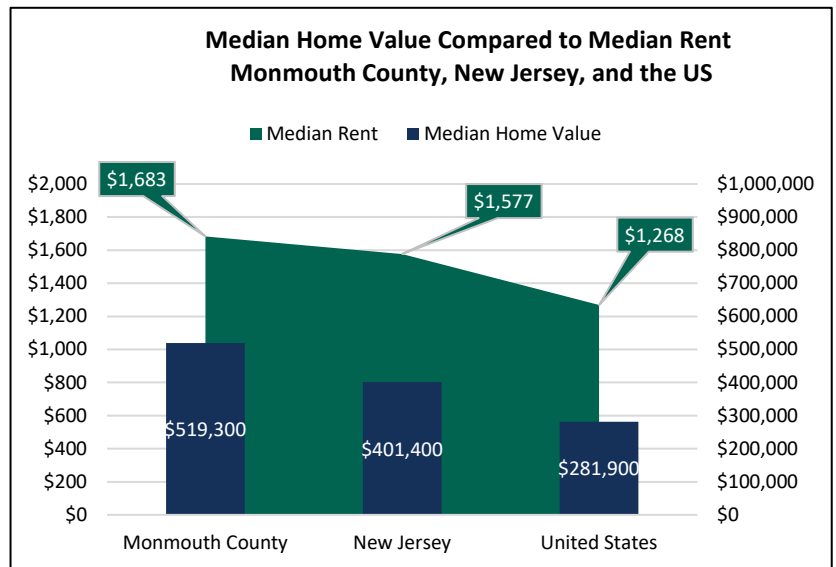
Source: New Jersey Department of Education, School Performance *indicates the smallest proportion ^indicates the largest proportion





Our Homes and Where We Live

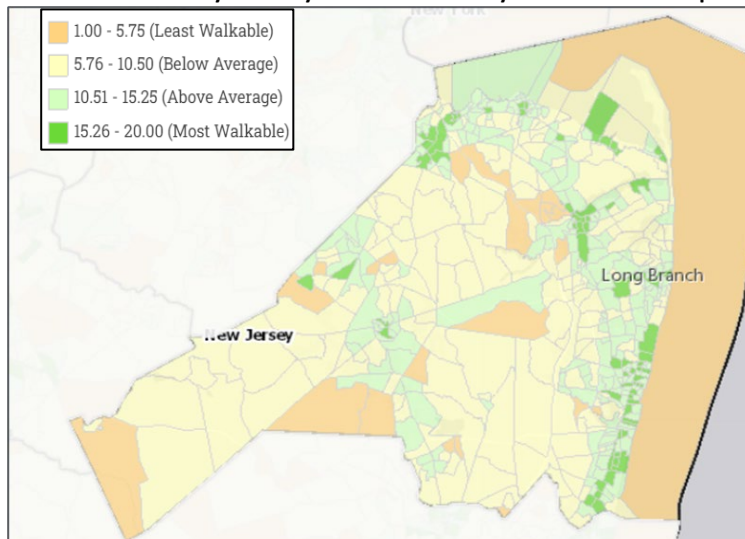
Monmouth County is an expensive place to live. 52.3% of renters and 30.9% of homeowners pay more than 30% of their income towards housing; this is referred to as being cost-burdened, meaning that residents may not have sufficient disposable funds to cover other basic needs. Even as 75.6% of Monmouth County residents are homeowners, a proportion far higher than across the state and nation, those individuals may have difficulty keeping up with needed home repairs, especially given the relatively older age of the average home in Monmouth County. It also makes it difficult for renters – a growing proportion of residents – to save up to buy a home.



Source: US Census Bureau, American Community Survey, 2018-2022

Neighborhood and Built Environment

National Walkability Index by Monmouth County Census Block Group 2021



Source: Environmental Protection Agency & Center for Applied Research and Engagement Systems

Most of Monmouth County meets the EPA’s criteria for “Least Walkable,” meaning that cars are required in most parts of the county to meet basic needs; this contributes to barriers to activities, employment opportunities, supportive services, and healthy food options.

Many community residents, community service providers and key leaders expressed great interest in both increasing safe and affordable access to recreational green spaces such as bike lanes, as well as concern about the impact of climate change on their communities and homes.

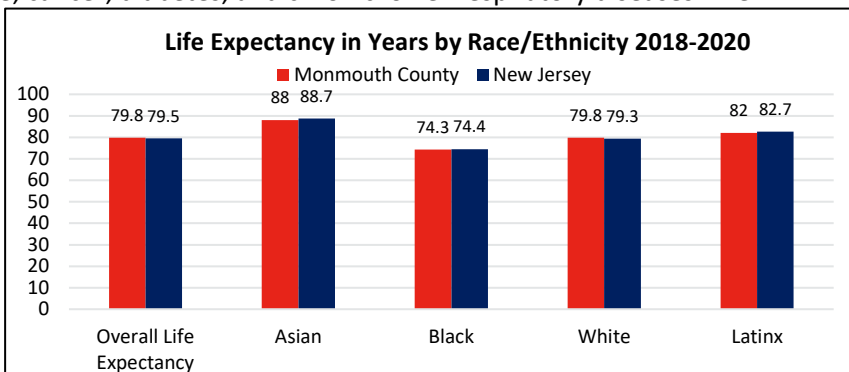
As a senior, there’s no transportation for the things I want to do or at the times I want to do them. My husband is on dialysis and if he has to be there at 7am, the medical transport doesn’t even start until 9am; also Manalapan is mostly white and wealthy and there’s not a lot of equal opportunity for other families; most of what I do is through the church...not everyone wants to go to the doctor, they want to go shopping or to socialize with a friend, but the only transportation available is for doctors appointments...”





Life Expectancy, Chronic Disease and Quality of Life

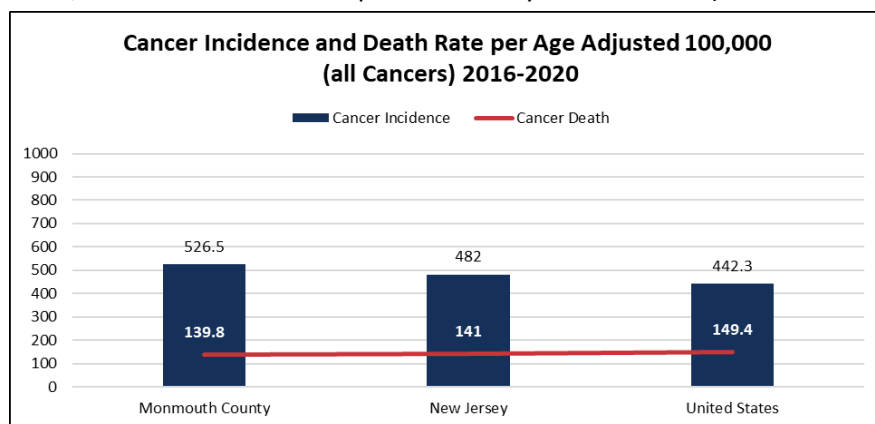
The leading causes of death among all populations in the US and in Monmouth County continue to be chronic diseases such as heart disease, cancer, diabetes, and chronic lower respiratory diseases. Life expectancy is considered an overall measure of health and social equity within a community. Housing quality and affordability, environmental conditions, employment, education, transportation, food security, and experiences of racism and other discrimination, all impact quality and length of life.



Source: National Vital Statistics System

Overall life expectancy in Monmouth County is similar to New Jersey; however, not everyone lives a long life.

There is a 14-year difference in life expectancy by race in Monmouth County (74.3 years for Black/African Americans compared to 88.0 years for Asians).

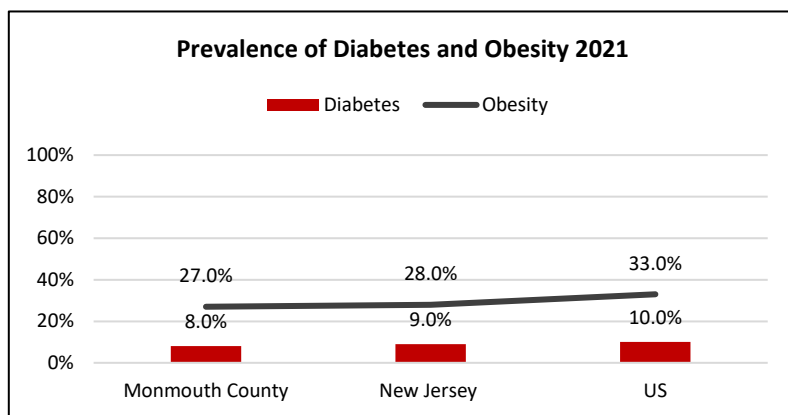


Source: Centers for Disease Control and Prevention

Monmouth County has a greater incidence but a *lower* death rate from all cancers than New Jersey or the US. This suggests that cancers are *being identified early and treated effectively*.

"You go the doctor and they're like 'don't be stressed'...my stress [around housing/finances] causes my diabetes to [act up]; my pills don't work; I'm trying to be strong because I don't want my kids to be afraid."

Did you know? Obesity and being overweight are risk factors for chronic diseases such as heart disease, diabetes, and cancer, and can lead to a decreased quality of life. Many factors contribute to the prevalence of obesity, including the presence of adverse childhood experiences (ACEs), access to affordable healthy foods, time, knowledge, and access to appropriate cooking spaces, and exercise opportunities, among other factors.



Source: Centers for Disease Control and Prevention

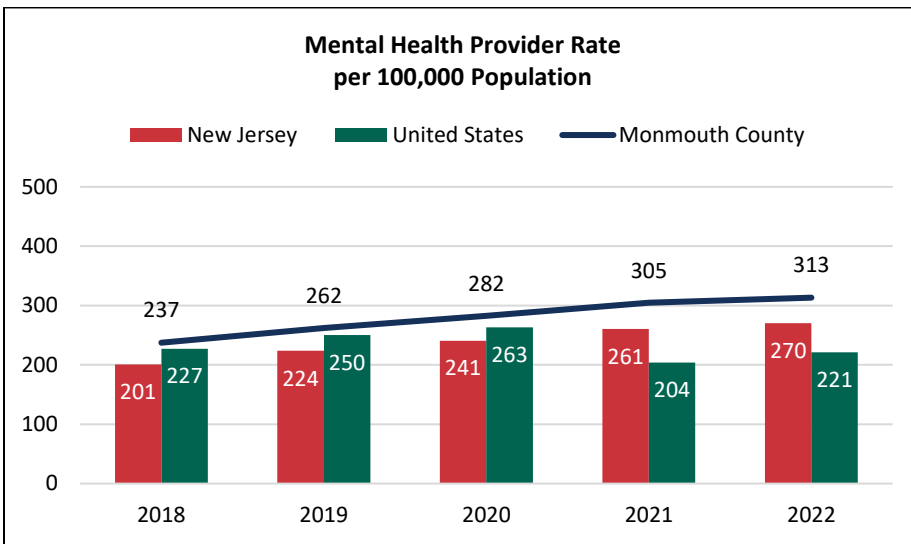




Mental Health and Substance Use:

Mental and behavioral disorders span a wide range of diagnoses, including anxiety, depression, and personality disorders. These disorders are not created by alcohol drugs, but they may co-occur with, or be made worse by, substance use. Substance Use Disorder (SUD) is a diagnosable disease that affects a person’s brain and behaviors. SUD can be a cause of and outcome from Adverse Childhood Experiences (ACEs), and can increase the risk of negative social, economic, and health outcomes. Interventions that build resilience and prevent trauma at the community level should be used to address SUD, ACEs and mental health concerns.

There are more mental health providers per capita in Monmouth County compared to New Jersey and the nation, and the rates are increasing; however, the demand for care remains high.



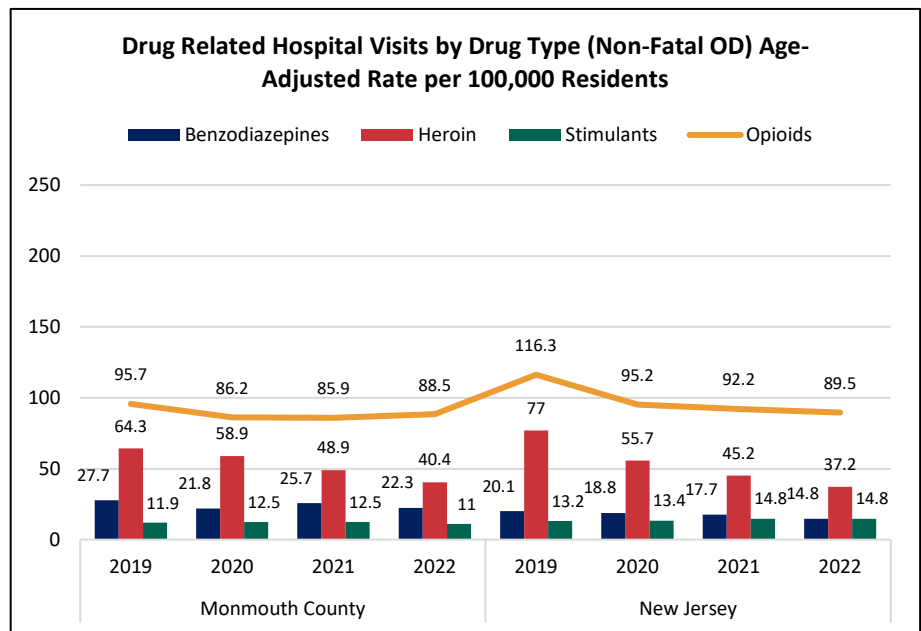
“You could find them 20 [new] counselors and probably within a few months [your schedules would] probably be filled already.”

“In 40 years this is the worst I’ve seen for hiring... pushing for staff to go back in the field meant a lot of people left for places where they could stay remote.”

Source: Centers for Medicare and Medicaid Services

Drug related non-fatal emergency department visits are generally decreasing for all substances across Monmouth County, but rates are decreasing much more slowly than elsewhere in New Jersey, with a comparatively much smaller difference in rates from 2019 to 2022 for all categories of substances except stimulants.

Opiates, including heroin, are still the most common source of substance use-related emergency department visits.



Source: New Jersey Department of Health, Population Health





In Your Words – Qualitative Research Findings

Representatives from community agencies and local leaders, as well as 31 diverse residents from throughout Monmouth County, participated in interviews, surveys, and focus groups, in English and Spanish. These individuals shared their ideas and perspectives about the strengths, needs, and opportunities for improving the health and quality of life for all people in Monmouth County. The following themes emerged from those conversations.

Community Strengths

- ▶ Monmouth County is a resource-rich place.
- ▶ Growing collaboration across community agencies, such as through participation in Monmouth ACTS and the Hubs, is increasingly effective in meeting the diverse needs of Monmouth County residents.
- ▶ Monmouth County is geographically diverse and becoming more culturally diverse every day.
- ▶ In recent years, innovative messaging, education, and outreach strategies that have been employed across Monmouth County have had measurable, positive impact in reaching broader, new audiences. There is an opportunity to apply these strategies in new contexts to increase equitable access to information and resources.

Community Needs

- ▶ Monmouth County is an expensive place to live. The high cost of housing drives financial, social and emotional insecurity, negatively impacting physical and mental wellness and community stability.
- ▶ Most communities require the use of a car, and public transportation is limited. This creates barriers to resources for healthy living, employment, and improvements in overall quality of life.
- ▶ There are staffing shortages across healthcare and social service agencies, limiting the availability of needed resources for healthy living.
- ▶ Young people are still struggling to recover from the negative impacts of isolation, learning loss, and other factors from the height of the COVID-19 pandemic period.
- ▶ While efforts are being made, resources to meet the specific needs of immigrant/migrant communities, racial and ethnic minority groups, LGBTQ+ residents, and older adults exceed demand.
- ▶ Most service providers indicated that from their perspective, mental health and substance use are the biggest barriers to success for the people they serve

Community Opportunities

- ▶ Community agencies across Monmouth County have excelled in initiating partnerships and laying the groundwork to create a uniquely robust and coordinated safety net across the county. This creates the opportunity to increase collaboration towards policy change to improve systems level barriers to more effective and equitable care countywide.
- ▶ Many new grassroots partners, particularly faith-based institutions, were effective in connecting people who needed help with partners providing care and are interested in continuing to build trust and partnerships.
- ▶ Schools and other education partners across Monmouth County have built trust with families and the communities they serve. The coordination of safety net services and streamlining of accessing services can engage education partners in new ways to reach vulnerable populations and build community connections.
- ▶ Most community leaders and agencies acknowledged that creative, community-based initiatives are making progress towards creating greater opportunity and healthier living for all, but there is still work to be done.

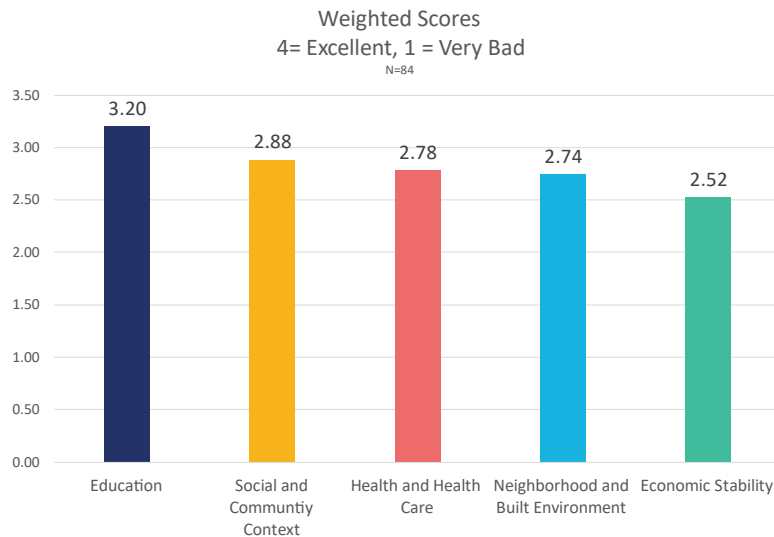




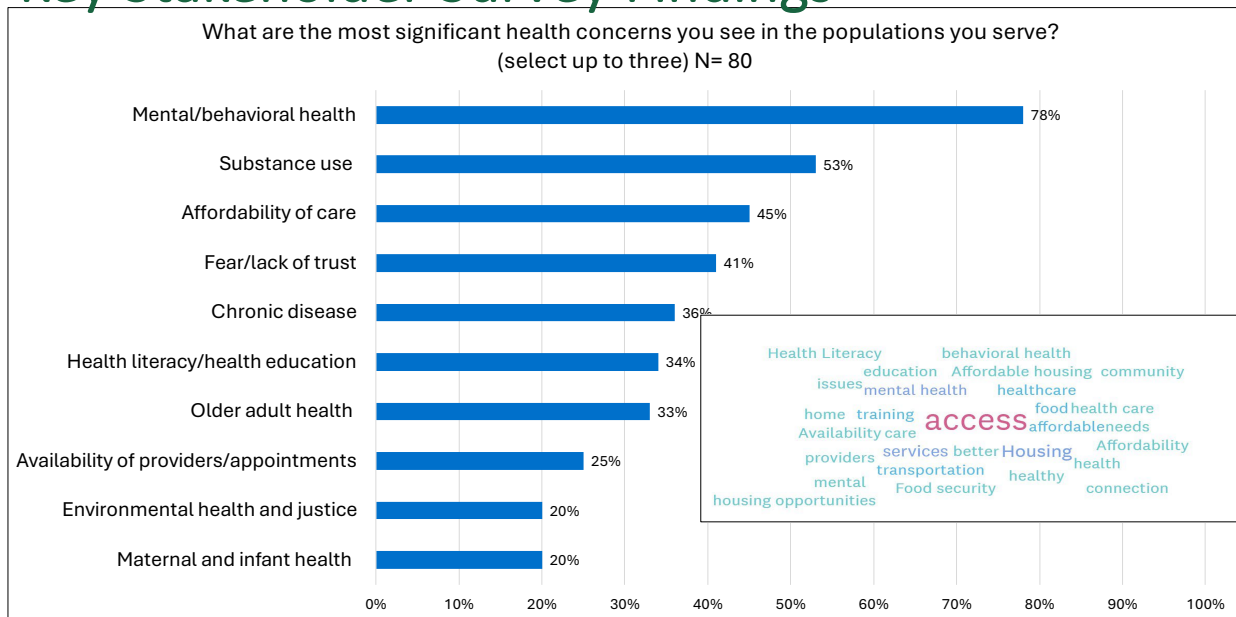
In all, 122 key stakeholders across various sectors, including healthcare, education, social services, policy, and others, completed the survey.



Thinking of Monmouth County as a whole, RATE the following Social Drivers of Health Dimensions on a scale of 1-4 (n=84)






Key Stakeholder Survey Findings

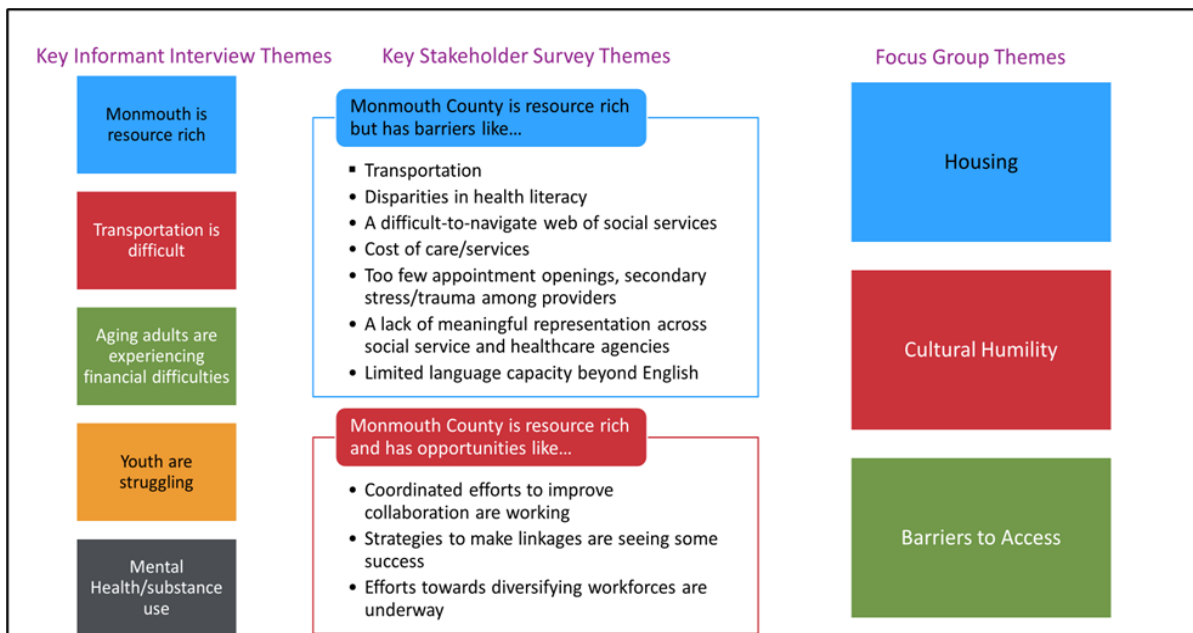


Thirty-one Monmouth County residents participated in six diverse focus groups. The compositions of the groups were decided to better understand the experience of specific needs that rose to the surface in both the quantitative and qualitative research, *or* because the population groups selected are often overlooked in data collection and community-wide planning. Community partners who had been involved in the interview and survey processes were identified and leveraged for assistance with recruiting focus group participants, as well as, when needed, offering their space to host the focus group meetings.

Focus Group Findings (n=6, 31 participants)

 <h3 style="text-align: center;">Housing</h3> <p>Housing (in)security impacts ability to “choose” health</p> <p>Seniors facing housing insecurity for the first time in their lives</p> <p>Nearly impossible to hold landlords accountable</p> <p>Homeowners unable to afford repairs</p> <p><i>“Everything they’re building, it’s not for ‘us’”</i></p>	 <h3 style="text-align: center;">Cultural Humility</h3> <p>Black residents expressed general feelings of unwelcome</p> <p>Spanish-speaking residents cited Freehold as a safe haven, but shared that the rest of the county is difficult access and acclimate to</p> <p>LGBTQIA residents expressed relative safety, BUT have few providers who provide safe, welcoming care</p>	 <h3 style="text-align: center;">Access</h3> <p>Transportation is a barrier in all aspects of life</p> <p>Dependence on trusted community members for information, advice, referrals</p> <p>Referral pathways are confusing for all</p> <p>Hospitals are unwelcoming spaces</p> <p>Cultural humility in care could be improved</p>
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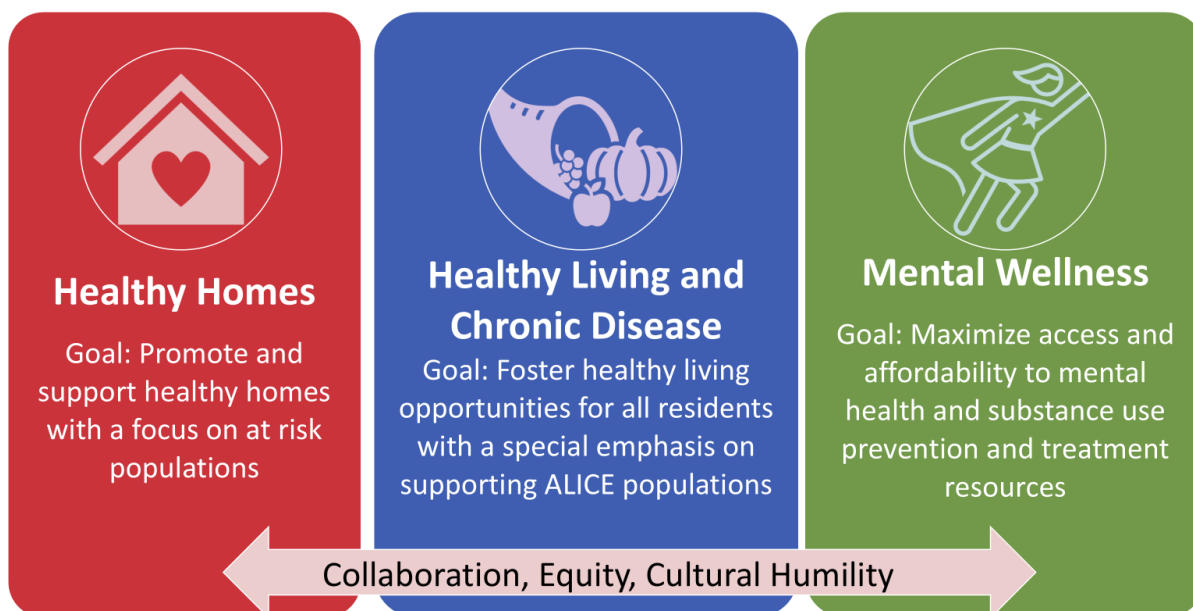
In summary



Determining Community Health Priorities

On June 27, 2024, the HICMC, including the Monmouth County Health Department, hosted a Community Forum at CentraState Healthcare System Campus in Freehold Township, where the findings from this CHA report were first shared with partners. The in-person forum was attended by 60 community partners. Following the formal presentation, facilitated breakout sessions, including all participants, discussed the CHA findings, the priority areas for action, and initial recommendations. From this process, the following specific health needs were confirmed as priorities and will be the focus of the 2024-2028 CHIP:

2024 HICMC CHIP Priorities



In developing its CHIP, Monmouth County Health Department and its partners sought to enhance making connections between community partners, families and individuals as a key strategy underlying all of the priority areas. By leveraging public health's cross-cutting and multidisciplinary roles across all of Monmouth County, the Health Department is committed to seeking opportunities to serve as a convener and connector of resources and people to target underlying disparities in social drivers of health that contribute to priority area issues. This strategy is consistent with an upstream health promotion approach to build healthier communities for all people now and in the future.

Approval and Adoption of CHA

Monmouth County Health Department reviewed and approved the CHA report and the priority areas on [date]. Following approval, the report was made available to the public via the Monmouth County Health Department website at <https://www.visitmonmouth.com/Page.aspx?Id=1932>. For more information, feedback, or comments, please email [email address].

