



# 2015 Community Needs Assessment

## Clark County 2015 Final Data – 509 Survey Assessments

Indiana University Center for Survey Research

In 2015, the Clark County Health Department along with Indiana University conducted a community needs assessment designed to identify the health issues of vulnerable populations and the community as a whole in Clark County.

The process included gathering an enormous amount of information regarding demographic, socioeconomic and health statistics, including health care resources and utilization rates. The data was analyzed to identify common issues, determine the size and seriousness of the problems identified, the impact of those issues on vulnerable populations and the importance to the community as a whole.

The findings were compiled into a comprehensive report. With this information, Clark Memorial Hospital is better able align its resources with local organizations and have a greater focus on providing more relevant health screenings, educational events, and community programs for those who need them most.

### Gender

Male 167    Female 341

### Residence Zip Code

43170	1
47106	17
47111	76
47112	1
47119	3
47126	15
47129	84
47130	200
47141	3
47143	17
47147	3
47150	1
47160	1
47162	4
47163	5
47172	72
47177	2
47179	1
47229	1
49130	1

### Number of people living in your household

0	1
1	122
2	208
3	82
4	72
5	13
6	9
8	1

### Children less than 18 years of age living in your household?

0	371
1	56
2	57
3	13
4	3

### Birth Year

1922	1	1961	15
1924	2	1962	9
1927	3	1963	8
1928	1	1964	12
1929	3	1965	9
1930	3	1966	4
1931	3	1967	4
1932	3	1968	6
1933	10	1969	7
1934	2	1970	5
1935	7	1971	11
1936	4	1972	5
1937	5	1973	3
1938	4	1974	4
1939	7	1975	8
1940	4	1976	9
1941	3	1977	5
1942	9	1978	4
1943	10	1979	6
1944	11	1980	7
1945	7	1981	14
1946	8	1982	6
1947	17	1983	5
1948	15	1984	3
1949	14	1985	7
1950	17	1986	3
1951	17	1987	4
1952	12	1988	3
1953	13	1989	5
1954	13	1990	7
1955	14	1991	7
1956	12	1992	2
1957	9	1993	3
1958	9	1994	1
1959	12	1995	1
1960	12		

### County of Residence

Not provided/invalid response	12
Clark	495
County outside of sample area	2

**Ethnicity**

Hispanic, Latino, or Spanish .....	7
White .....	476
Black or African American.....	25
American Indian or .....	11
Alaska Native	
Asian .....	3
Native Hawaiian or	
other Pacific Islander .....	3
Other .....	4

**Overall health in general**

Poor .....	18
Fair .....	65
Good .....	189
Very good .....	190
Excellent .....	47

**Physical health**

Poor .....	21
Fair .....	76
Good .....	195
Very good .....	168
Excellent .....	47

**Mental health**

Poor .....	8
Fair .....	25
Good .....	129
Very good .....	218
Excellent .....	126

**Social well-being**

Poor .....	12
Fair .....	26
Good .....	133
Very good .....	214
Excellent .....	121

**Types of healthcare coverage**

Medicaid.....	45
Medicare .....	175
Private (employer-based, .....	323
self-insured)	
Public (Healthy Indiana Plan, .....	36
Marketplace Obamacare)	

**Last visit with a healthcare provider (nurse, doctor, nurse-practioner, etc.)**

Within the past 6 months.....	280
Within the past year.....	53
Within the past 2 years .....	14
Within the past 5 years .....	10
More than 5 years ago.....	2
Don't remember/unsure .....	5

**Do you have a person you think of as your personal healthcare provider?**

No .....	80
Yes.....	413
Do not know .....	2

**Number of persons receiving any of the following health-related services**

Dental care .....	335
Mental health care.....	48
Drug or alcohol treatment.....	6
Tobacco/smoking cessaation.....	17
Getting prescription .....	408
medication	
Getting immunizations.....	278
such as a flu shot or others	
Care related to birth control .....	49
Prenatal or well-baby .....	27
Women, Infants, and .....	15
Children's(WIC) supported	
services	
Food stamps or SNAP .....	30
Chronic desease care.....	100
such as diabetes or	
heart attack	
Acute care, suh as.....	187
for a cold or ear infection,	
injury, or a fall	
Annual routine physical exam....	338

**58** – Number of people in the past 12 months that needed prescription medicine but did not get it because they couldn't afford it?

**How would you rate the following in terms of whether they have an influence on your ability to be healthy?**

**Access to health insurance coverage**

Makes it easier for me to be .....	393
healthy	
Does not have any influence .....	77
on my health	
Makes it more difficult for me .....	17
to be healthy	
Does not exist in my .....	2
community	

**Availability of transportation**

Makes it easier for me to be .....	318
healthy	
Does not have any influence .....	144
on my health	
Makes it more difficult for me .....	11
to be healthy	
Does not exist in my .....	15
community	

**Ease of scheduling a healthcare appointment**

Makes it easier for me to be .....	357
healthy	
Does not have any influence .....	95
on my health	
Makes it more difficult for me .....	31
to be healthy	
Does not exist in my .....	3
community	

**Access to parks, trails, or outdoor areas**

Makes it easier for me to be .....	284
healthy	
Does not have any influence .....	184
on my health	
Makes it more difficult for me .....	8
to be healthy	
Does not exist in my .....	9
community	

**Access to community recreation centers**

Makes it easier for me to be .....	180
healthy	
Does not have any influence .....	278
on my health	
Makes it more difficult for me .....	4
to be healthy	
Does not exist in my .....	22
community	

**Access to public libraries**

Makes it easier for me to be healthy	.... 172
Does not have any influence on my health	.. 309
Makes it more difficult for me to be healthy	..... 5
Does not exist in my community	..... 4

**Access to churches or faith-based organizations**

Makes it easier for me to be healthy	.... 243
Does not have any influence on my health	.. 239
Makes it more difficult for me to be healthy	..... 1
Does not exist in my community	..... 5

**Access to doctors in my community**

Makes it easier for me to be healthy	.... 382
Does not have any influence on my health	.... 79
Makes it more difficult for me to be healthy	.... 17
Does not exist in my community	..... 13

**Availability of fresh fruits and vegetables at stores, community gardens, or markets**

Makes it easier for me to be healthy	.... 408
Does not have any influence on my health	.... 65
Makes it more difficult for me to be healthy	..... 8
Does not exist in my community	8

**Access to workplace wellness or employee wellness**

Makes it easier for me to be healthy	.... 206
Does not have any influence on my health	.. 242
Makes it more difficult for me to be healthy	..... 6
Does not exist in my community	..... 29

**Availability of family support services, such as those related to domestic or relationship violence or family social services**

Makes it easier for me to be healthy	.... 120
Does not have any influence on my health	.. 337
Makes it more difficult for me to be healthy	..... 3
Does not exist in my community	..... 21

**Please indicate whether you have engaged in any of the following behaviors within the past 12 month:**

**I try to lose weight.**

Yes, within the past 30 days	..... 171
Yes, within the past 6 months	..... 74
Yes, within the past 12 months	... 77
No, not within the past 12 months	..... 162
Do not know	..... 4

**I try to maintain/keep a healthy weight.**

Yes, within the past 30 days	..... 215
Yes, within the past 6 months	..... 59
Yes, within the past 12 months	.. 140
No, not within the past 12 months	..... 65
Do not know	..... 5

**I smoke or used tobacco products daily or most days of the week.**

Yes, within the past 30 days	..... 66
Yes, within the past 6 months	..... 7
Yes, within the past 12 months	... 20
No, not within the past 12 months	..... 381
Do not know	..... 5

**I smoke vapor/e-cigarettes daily or most days of the week.**

Yes, within the past 30 days	..... 22
Yes, within the past 6 months	..... 8
Yes, within the past 12 months	... 16
No, not within the past 12 months	..... 427
Do not know	..... 8

**I am physically active daily or most days of the week.**

Yes, within the past 30 days	..... 237
Yes, within the past 6 months	..... 62
Yes, within the past 12 months	.. 119
No, not within the past 12 months	..... 65
Do not know	..... 4

**I get 7 or more hours of sleep daily or on most days of the week.**

Yes, within the past 30 days	..... 222
Yes, within the past 6 months	..... 37
Yes, within the past 12 months	.. 117
No, not within the past 12 months	..... 102
Do not know	..... 7

**I eat home-cooked meals daily or on most days of the week.**

Yes, within the past 30 days	..... 258
Yes, within the past 6 months	..... 38
Yes, within the past 12 months	.. 131
No, not within the past 12 months	..... 56
Do not know	..... 3

**I eat fruits and vegetables with most of my meals daily or on most days of the week.**

Yes, within the past 30 days	..... 259
Yes, within the past 6 months	..... 48
Yes, within the past 12 months	.. 124
No, not within the past 12 months	..... 54
Do not know	..... 8

**I consume sugar-sweetened drinks daily or on most days of the week.**

Yes, within the past 30 days	..... 139
Yes, within the past 6 months	..... 43
Yes, within the past 12 months	... 75
No, not within the past 12 months	..... 227
Do not know	..... 6

**I drink at least 2 or more alcoholic drinks daily or most days of the week (alcohol is beer, wine, and/or liquor).**

Yes, within the past 30 days	..... 45
Yes, within the past 6 months	..... 26
Yes, within the past 12 months	... 28
No, not within the past 12 months	..... 384
Do not know	..... 6

**I use medication from a prescription that is not my own.**

Yes, within the past 30 days	..... 5
Yes, within the past 6 months	..... 6
Yes, within the past 12 months	..... 3
No, not within the past 12 months	..... 464
Do not know	..... 8

**I sought medical services at an emergency room.**

Yes, within the past 30 days	..... 19
Yes, within the past 6 months	..... 27
Yes, within the past 12 months	... 52
No, not within the past 12 months	..... 387
Do not know	..... 4

**I sought medical care at an urgent care clinic.**

Yes, within the past 30 days .....	24
Yes, within the past 6 months .....	49
Yes, within the past 12 months ...	73
No, not within the past 12 months .....	334
Do not know .....	7

**I participated in cancer screening.**

Yes, within the past 30 days .....	33
Yes, within the past 6 months .....	40
Yes, within the past 12 months ...	76
No, not within the past 12 months .....	328
Do not know .....	9

**I was injured from a fall.**

Yes, within the past 30 days .....	16
Yes, within the past 6 months .....	14
Yes, within the past 12 months ...	32
No, not within the past 12 months .....	413
Do not know .....	8

**I met with social groups or friends in the community.**

Yes, within the past 30 days .....	214
Yes, within the past 6 months .....	33
Yes, within the past 12 months ...	58
No, not within the past 12 months .....	176
Do not know .....	6

**I engage in unprotected sex.**

Yes, within the past 30 days .....	73
Yes, within the past 6 months .....	10
Yes, within the past 12 months ...	20
No, not within the past 12 months .....	368
Do not know .....	10

**I share needles with another person for medications or drugs.**

No, not within the past 12 months .....	473
Do not know .....	9

**I have sexual activity with another person while under the influence of alcohol.**

Yes, within the past 30 days .....	19
Yes, within the past 6 months .....	5
Yes, within the past 12 months ...	11
No, not within the past 12 months .....	437
Do not know .....	8

**I received a flu shot.**

Yes, within the past 30 days .....	35
Yes, within the past 6 months .....	52
Yes, within the past 12 months .....	202
No, not within the past 12 months .....	198
Do not know .....	3

**I received vaccines other than a flu shot.**

Yes, within the past 30 days .....	22
Yes, within the past 6 months .....	30
Yes, within the past 12 months ...	68
No, not within the past 12 months .....	355
Do not know .....	10

**In your opinion, how would you rate your community's overall health?**

Poor .....	38
Fair .....	148
Good .....	239
Very good .....	62
Excellent .....	5

**What do you think are the FIVE most important health issues affecting your community?**

**Basic needs: food, shelter, safety, transportation, access to primary health care**

Not selected .....	247
Selected .....	258

**Injuries: gun-related, car accidents, 4-wheeler accidents, falls**

Not selected .....	450
Selected .....	55

**Substance use: tobacco, alcohol, meth, heroin, marijuana, stimulants, prescription drugs**

Not selected .....	115
Selected .....	390

**Violence: suicide, homicide, rape, sexual assault, domestic violence**

Not selected .....	379
Selected .....	126

**Child abuse/safety: child abuse, child neglect**

Not selected .....	376
Selected .....	129

**Chronic diseases: diabetes, cancer, heart disease, stroke, COPD, high blood pressure, high cholesterol**

Not selected .....	155
Selected .....	350

**Infections disease/infections: HIV, chlamydia, TB, Hep C, food poisoning**

Not selected .....	389
Selected .....	116

**Well-baby: prenatal, antenatal care, teenage pregnancy, unintended pregnancy, unplanned pregnancy**

Not selected .....	454
Selected .....	51

**Obesity: eating unhealthy foods, lack of healthy food**

Not selected .....	141
Selected .....	364

**Lack of exercise: physical inactivity, access to walking trails, parks, sidewalks, recreational centers, bike lanes**

Not selected .....	248
Selected .....	257

**Mental/behavioral health: depression, stress, anxiety**

Not selected .....	284
Selected .....	221

**When thinking about how your county, city, or town allocated resources (staff or programs), how important is it to you that resources are allocated to each item below?**

**Clean outdoor air**

Not at all important .....	10
Not very important .....	19
Somewhat important .....	82
Very important .....	382

**Clean indoor air**

Not at all important .....	9
Not very important .....	23
Somewhat important .....	100
Very important .....	357

**Safe drinking water**

Not at all important .....	4
Not very important .....	4
Somewhat important .....	25
Very important .....	462

**Clean recreational water**

Not at all important .....	6
Not very important .....	21
Somewhat important .....	123
Very important .....	338

**Recycling programs**

Not at all important .....	16
Not very important .....	44
Somewhat important .....	178
Very important .....	255

**Access to healthy or fresh foods**

Not at all important ..... 8  
 Not very important ..... 9  
 Somewhat important ..... 72  
 Very important..... 405

**Available and accessible mental health care**

Not at all important ..... 6  
 Not very important ..... 25  
 Somewhat important ..... 129  
 Very important..... 330

**Teenage pregnancy prevention**

Not at all important ..... 12  
 Not very important ..... 30  
 Somewhat important ..... 140  
 Very important..... 306

**Domestic violence prevention**

Not at all important ..... 8  
 Not very important ..... 15  
 Somewhat important ..... 124  
 Very important..... 345

**Child abuse prevention**

Not at all important ..... 7  
 Not very important ..... 10  
 Somewhat important ..... 86  
 Very important..... 389

**Youth violence prevention**

Not at all important ..... 5  
 Not very important ..... 14  
 Somewhat important ..... 107  
 Very important..... 362

**Illegal prescription drug use prevention**

Not at all important ..... 5  
 Not very important ..... 24  
 Somewhat important ..... 84  
 Very important..... 377

**Tobacco use prevention**

Not at all important ..... 15  
 Not very important ..... 52  
 Somewhat important ..... 169  
 Very important..... 252

**Drug use or addiction services**

Not at all important ..... 7  
 Not very important ..... 21  
 Somewhat important ..... 99  
 Very important..... 363

**Impaired driving prevention**

Not at all important ..... 7  
 Not very important ..... 25  
 Somewhat important ..... 98  
 Very important..... 359

**Meth and heroin use prevention programs**

Not at all important ..... 9  
 Not very important ..... 30  
 Somewhat important ..... 117  
 Very important..... 334

**Access to health care**

Not at all important ..... 4  
 Not very important ..... 8  
 Somewhat important ..... 74  
 Very important..... 406

**Access to birth control**

Not at all important ..... 18  
 Not very important ..... 40  
 Somewhat important ..... 142  
 Very important..... 289

**Access to safe recreational opportunities**

Not at all important ..... 10  
 Not very important ..... 40  
 Somewhat important ..... 184  
 Very important..... 256

**Pest management**

Not at all important ..... 11  
 Not very important ..... 54  
 Somewhat important ..... 224  
 Very important..... 197

**Access to trails and walking paths**

Not at all important ..... 17  
 Not very important ..... 56  
 Somewhat important ..... 223  
 Very important..... 194

**Affordable housing**

Not at all important ..... 13  
 Not very important ..... 29  
 Somewhat important ..... 152  
 Very important..... 295

**Food availability**

Not at all important ..... 8  
 Not very important ..... 15  
 Somewhat important ..... 99  
 Very important..... 370

**Food safety**

Not at all important ..... 6  
 Not very important ..... 16  
 Somewhat important ..... 87  
 Very important..... 381

**Bike lanes**

Not at all important ..... 64  
 Not very important ..... 134  
 Somewhat important ..... 174  
 Very important..... 118

**Services for aging communities**

Not at all important ..... 7  
 Not very important ..... 24  
 Somewhat important ..... 144  
 Very important..... 317

**Services for the homeless**

Not at all important ..... 16  
 Not very important ..... 25  
 Somewhat important ..... 156  
 Very important..... 294

**Disaster/emergency preparedness/response**

Not at all important 5  
 Not very important 14  
 Somewhat important 123  
 Very important 348

**During the past 12 months, to what extent have the following experiences applied to you personally?**

**I have been able to talk with a healthcare provider in the language with which I am most comfortable.**

Never..... 42  
 Seldom ..... 15  
 Sometimes ..... 67  
 Often ..... 366

**I have felt discriminated against by a healthcare provider because of my race, ethnicity, or culture.**

Never..... 457  
 Seldom ..... 20  
 Sometimes ..... 9  
 Often ..... 7

**I have had negative experiences in healthcare that caused me to lose trust in medical providers.**

Never..... 253  
 Seldom ..... 116  
 Sometimes ..... 102  
 Often ..... 23

**Healthcare providers have communicated with me in a respectful and clear manner.**

Never..... 36  
 Seldom ..... 15  
 Sometimes ..... 85  
 Often ..... 355

**I have felt discriminated against by a healthcare provider because of my medical condition or lifestyle.**

Never.....	408
Seldom.....	45
Sometimes.....	33
Often.....	7

**I have felt discriminated against by a healthcare provider because of my age.**

Never.....	409
Seldom.....	52
Sometimes.....	23
Often.....	8

**Which of the following best describes your participation in social services within your community within the past 12 months?**

**Food pantry**

I did not feel the need for this type of service.....	433
I felt I needed help in this area but did not look for help or ask anyone for help.....	11
I tried to find help in the area but did not know where to turn or could not find help.....	6
I sought and received this type of service.....	37

**Homeless shelter**

I did not feel the need for this type of service.....	479
I felt I needed help in this area but did not look for help or ask anyone for help.....	2
I tried to find help in the area but did not know where to turn or could not find help.....	3
I sought and received this type of service.....	3

**Free or emergency childcare help**

I did not feel the need for this type of service.....	466
I felt I needed help in this area but did not look for help or ask anyone for help.....	9
I tried to find help in the area but did not know where to turn or could not find help.....	6
I sought and received this type of service.....	6

**Domestic abuse services**

I did not feel the need for this type of service.....	478
I felt I needed help in this area but did not look for help or ask anyone for help.....	2
I tried to find help in the area but did not know where to turn or could not find help.....	1
I sought and received this type of service.....	5

**Employment services**

I did not feel the need for this type of service.....	442
I felt I needed help in this area but did not look for help or ask anyone for help.....	19
I tried to find help in the area but did not know where to turn or could not find help.....	8
I sought and received this type of service.....	19

**Prenatal programs and breastfeeding support**

I did not feel the need for this type of service.....	470
I felt I needed help in this area but did not look for help or ask anyone for help.....	4
I tried to find help in the area but did not know where to turn or could not find help.....	1
I sought and received this type of service.....	12

**Mental/behavioral health programs**

I did not feel the need for this type of service.....	436
I felt I needed help in this area but did not look for help or ask anyone for help.....	19
I tried to find help in the area but did not know where to turn or could not find help.....	5
I sought and received this type of service.....	28

**Rural transit and/or city bus**

I did not feel the need for this type of service.....	450
I felt I needed help in this area but did not look for help or ask anyone for help.....	9
I tried to find help in the area but did not know where to turn or could not find help.....	13
I sought and received this type of service.....	16

**Walk-in clinic**

I did not feel the need for this type of service.....	385
I felt I needed help in this area but did not look for help or ask anyone for help.....	17
I tried to find help in the area but did not know where to turn or could not find help.....	13
I sought and received this type of service.....	74

**Township trustee assistance**

I did not feel the need for this type of service.....	444
I felt I needed help in this area but did not look for help or ask anyone for help.....	11
I tried to find help in the area but did not know where to turn or could not find help.....	16
I sought and received this type of service.....	16

**Financial help, utility bills, etc.**

I did not feel the need for this type of service.....	422
I felt I needed help in this area but did not look for help or ask anyone for help.....	23
I tried to find help in the area but did not know where to turn or could not find help.....	20
I sought and received this type of service.....	21

**Legal help**

I did not feel the need for this type of service.....	437
I felt I needed help in this area but did not look for help or ask anyone for help.....	14
I tried to find help in the area but did not know where to turn or could not find help.....	16
I sought and received this type of service.....	20

**STI/STD testing, treatment, prevention**

I did not feel the need for this type of service.....	471
I felt I needed help in this area but did not look for help or ask anyone for help.....	2
I tried to find help in the area but did not know where to turn or could not find help.....	4
I sought and received this type of service.....	11

**Help finding health insurance**

I did not feel the need for this type of service. ....423  
 I felt I needed help in this area but did not look for help or ask anyone for help. ....20  
 I tried to find help in the area but did not know where to turn or could not find help. ....21  
 I sought and received this type of service. ....24

**Substance abuse services**

I did not feel the need for this type of service. ....473  
 I felt I needed help in this area but did not look for help or ask anyone for help. ....2  
 I tried to find help in the area but did not know where to turn or could not find help. ....4  
 I sought and received this type of service. ....7

**Considering all sources, which of the following best describes your total household income before taxes for 2014?**

Less than \$15,000 .....56  
 \$15,000-\$24,999 .....60  
 \$25,000-\$34,999 .....55  
 \$35,000-\$49,999 .....64  
 \$50,000-\$74,999 .....93  
 \$75,000-\$99,999 .....67  
 \$100,000-\$149,999 .....64  
 \$150,000 or more.....22

**Which of the following best describes your current employment status?**

Unable to work.....31  
 Retired.....156  
 Student.....5  
 Homemaker.....25  
 Out of work for less than 1 year ...8  
 Out of work for 1 year or more.....5  
 Self-employed.....28  
 Employed for wages .....238

**Which of the following best describes the highest level of education you completed?**

Some high school .....23  
 High School diploma or GED recipient.....134  
 Some college .....118  
 Associate degree .....55  
 Bachelor's degree .....80  
 Graduate or professional degree or beyond.....78  
 Other .....5

**More specifically, which of the following best describes the highest level of education you completed?**

7th Grade .....1  
 9th Grade .....1  
 Apprenticeship Program.....1  
 Beauty School .....1  
 Business College 2 Years .....1  
 Certificate Diploma from College .....1  
 Had to leave school at 11th Grade .....1  
 Masters .....1  
 Military Schools and Employer Schools.....1  
 One Class from Bachelors Degree .....1  
 Pre K.....1  
 Retired RN .....1  
 Some Trade School.....1  
 Vocational School .....1  
 Will be getting Associates Degree at end of year.....1

**How frequently have you used the following websites and search methods on a cell phone (smartphone) to seek health-related information in the past 12 months?**

**Google, Bing, Yahoo**  
 Never .....143  
 Seldom .....26  
 Sometimes .....105  
 Often .....192

**Facebook**  
 Never .....272  
 Seldom .....40  
 Sometimes .....53  
 Often .....98

**Medical sites (Medline, American Cancer Society, WebMD etc.)**

Never .....201  
 Seldom .....61  
 Sometimes .....126  
 Often .....74

**Blogs**

Never .....364  
 Seldom .....50  
 Sometimes .....35  
 Often .....9

**Twitter**

Never .....415  
 Seldom .....21  
 Sometimes .....11  
 Often .....10

**Other**

Never .....288  
 Seldom .....23  
 Sometimes .....35  
 Often .....18  
 Total .....364

**I do not own or have access to a smartphone/cellphone .....148**

**Mode of survey completion**

Paper .....418  
 Web .....91

## How this report was prepared.

This report was prepared by the Indiana University Center for Survey Research. The IU School of Public Health contracted with the Center for Survey Research to assist a group of Indiana counties with their community health needs assessment in Spring/Summer 2015.

### Summary Overview

Indiana University School of Public Health (SPH), in partnership with a cooperative group of six Indiana counties, including representatives from the IU Health system, contracted with the Center for Survey Research (CSR) to conduct a survey about health needs and attitudes. The planning for the survey, to provide data for the counties as part of a larger community health needs assessment, began in fall 2014. Goals of the project were for IU Health to fulfill a biannual assessment requirement and the county health departments to take steps toward accreditation.

The survey was developed by the CSR and SPH with input from county representatives. The survey was launched on July 8, 2015 and data collection concluded on September 11, 2015. Sampled households in Clark, Dubois, Jackson, Lawrence, Madison, and Monroe counties were contacted and asked to complete the online survey or a paper questionnaire. The overall response rate was 29.8%.

### Data Collection Methodology

#### Sample Design

The target population for the 2015 Indiana Community Health Needs Assessment Survey consisted of noninstitutionalized adult residents, aged 18 years or older, in the six participating Indiana counties: Clark, Dubois, Jackson, Lawrence, Madison, and Monroe. The sample was randomly drawn from an address-based sampling frame of each county, consisting of residential, non-business addresses, excluding P.O. boxes, seasonal/vacation, vacant, only way to get mail and throwback, and drop-off point addresses; rural addresses were included in the frame. At the household level, participants in the study were randomized by a respondent-selection that selected the adult with the most recent birthday to complete the survey.

Sample lists of 2,000 records per county were purchased from Marketing Systems Group who assured the CSR of the coverage for the target population. The lists included postal address, FIPS code (county designator), and appended demographic information for the head of household regarding income, marital status, home ownership status, and education. Upon receipt of the sample, it was stored in a secure database created and maintained by the CSR and was reviewed and corrected for any clerical errors.

#### Research Design

CSR proposed and implemented an embedded experimental design for the 2015 Indiana Community Health Needs Assessment Survey that tested the efficiency of an online administration of the survey, in view of possible repeat administration, against the expected response rate gains of a postal mail administration.

### Questionnaire and Recruitment Design

Questionnaire development for the 2015 Indiana Community Health Needs Assessment Survey occurred over a period of two and a half months (early April through mid-June 2015). Development consisted of CSR reviewing and providing extensive suggested alterations to the original draft provided by SPH and meeting and collaborating closely with SPH and representatives from the counties and IU Health, who made final decisions with regard to the questionnaire.

The final questionnaire included 146 items covering health topics such as health and quality of life and access to health care, type of health insurance, health behaviors, views on personal and community health, and opinions on the most important health challenges facing the respondent's community.

The online version of the questionnaire was programmed using the CSR's native ColdFusion-based web survey tool and rigorously tested. A mobile-compatible version was also produced.

The questionnaire was also formatted for printing, and CSR contracted with Scantron Corporation to print 17,000 copies for mailing to county residents. The paper questionnaire was an eight-page booklet stapled in the center.

Both the web and paper surveys included specific directions as to how to select the adult in the household who is to complete the survey.

CSR developed six letters for the two experimental groups: a pre-letter, two invitations, and three follow-ups. SPH provided input and final approval of the letters.

### Data Collection

The field period for the Community Health Needs Assessment Survey was July 10, 2015 through September 11, 2015. All sampled addresses were included in the data collection.

### Final Disposition and Response Rates

Final dispositions for all cases were classified according to the American Association for Public Opinion Research's (AAPOR) *Standard Definitions: Final Dispositions of Case Codes and Outcome Rates for Surveys, 8th edition*.