

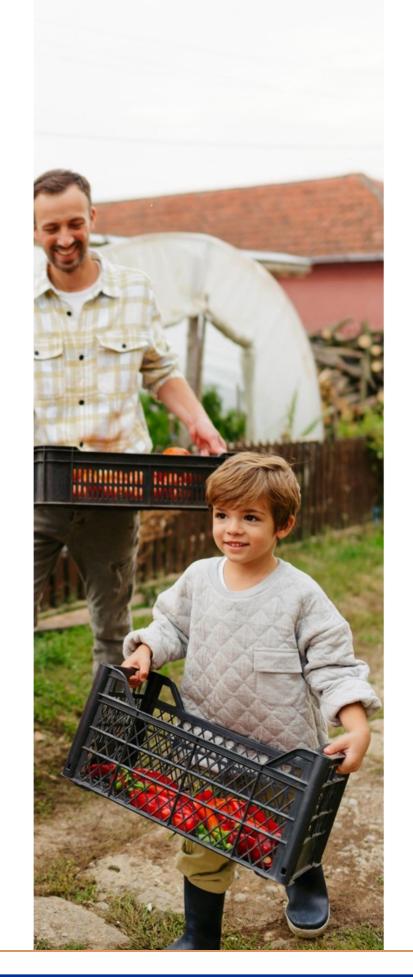
2025-2028





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EXECUTIVE SUMMARY

he *Mohave County Community Health Needs Assessment 2025* was completed through partnership between Kingman Regional Medical Center and the Mohave County Department of Public Health. This assessment aims to identify and describe the health needs of the populous of Mohave County and to identify priorities to address with health programming until 2028.

This Needs Assessment comprises several components gathered through diverse data collection methods between October 1st, 2023 and March 1st, 2025. It includes the following:

- Data collected during a semi-structured interview of 37 key informants working in governmental, public benefit, or healthcare sectors throughout Mohave County.
- Findings from a community survey of 1,474 residents of Mohave County.
- Diagnostic data from hospital admissions at Kingman Regional Medical Center.
- Available reports for causes of death within the county, published in the Arizona Department of Health Services Health Status and Vital Statistics report of 2022.
- Information gained during the completion of 7 community focus groups consisting of 83 community members.

Several themes emerged that represent the major findings of this needs assessment (**Summary Table**). These themes represent areas of concern for the residents, key informants, and health leaders of Mohave County and/or were the predominant diagnosed health issues requiring medical intervention or causing death at higher-than-expected rates for this region's demographic details.

A detailed description of the Mohave County Community Health Needs Assessment methods, process map, and actions to address the identified priorities can be viewed in the Mohave County Community Health Improvement Plan 2025-2028. This document is available to view on the websites for Kingman Regional Medical Center (www.azkrmc.com) and the Mohave County Department of Public Health (www.mohave.gov).









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EXECUTIVE SUMMARY

Key Informant Interviews	Community Survey	Medical Diagnostics	Morbidity and Mortality	Community Focus Groups
Seniors, youth, and the homeless are Mohave County's most vulnerable populations. Mental health, substance use, and poverty are the most important health issues in Mohave County.	The majority of Mohave County residents report being in good health. The three most common personal health challenges among residents are issues related to weight, joint and back pain, and high blood pressure.	The most common points of entry into the healthcare system for Mohave County residents were: symptoms, signs, and abnormal clinical laboratory findings, and factors influencing health status. The most commonly diagnosed	The leading causes of death among residents of Mohave County were cardiovascular disease, cancers, chronic lower respiratory disease, and unintentional injuries.	Focus groups throughout Mohave County identified the following priorities to address: Community programs and resources Education
The defining characteristics of a healthy community are healthcare systems, areas for exercise and recreation, and opportunities for social engagement. Economic stability is the most important social determinant of health. The largest barrier to expanding the health of residents in Mohave County is the lack of robust community infrastructure and health resources.	The three most common community health problems identified by residents include: mental health, aging, and motor vehicle injuries. The most common social barriers to a healthy Mohave County were poverty, a lack of medical providers, and a lack of affordable housing. Mohave County residents expressed difficulty accessing medical care from specialists, mental health providers, and primary care providers.	The most commonly diagnosed diseases for residents of Mohave County were: diseases of the musculoskeletal system and connective tissue, endocrine, nutritional, and metabolic diseases, diseases of the circulatory system, and diseases of the respiratory system. Residents of Mohave County without medical insurance most commonly interfaced with the healthcare system due to injury, poisoning, and diseases of the respiratory system.	The largest disparities between men and women for causes of death were diseases of the heart, chronic lower respiratory diseases, cerebrovascular diseases, and Alzheimer's disease. Residents of Mohave County were less likely to die from diabetes and essential hypertension than the general Arizona population.	 Healthcare access The residents described a need to build systems that work towards: Enhancing pediatric medical care. Education on nutrition and medical insurance processes. Developing community navigation processes for health and social services.

Summary Table. Recurring Themes of Community Health Needs and Concerns.

ACKNOWLEDGEMENTS

he success of the Mohave County CHNA/CHIP shows the collaborative spirit of the many organizations, healthcare systems, and community members who participated in assessments, focus groups, thought leadership, plan development, publicity, and so much more. Together, we created evidence-based methods to achieve lasting positive health changes. This collaboration lays the foundation for better health outcomes and community well-being. We thank everyone for their unwavering dedication to our community's health and look forward to continuing this journey toward a healthier Mohave County.

Organizations That Contributed to the Mohave County CHNA/CHIP

Applied Worldwide
Arizona Complete Health
Arizona Youth Partnership

Arizona@Work
BeConnected Veteran Services
Blayre Agency LLC

Bullhead City Police Department CASA Council Helping Children of Mohave County

Catholic Charities

Cherish Families

Chicanos Por La Causa

City of Bullhead City

City of Kingman

City of Lake Havasu City

Colorado City Unified School District

Community Medical Services

Cornerstone Mission Project

Creek Valley Health Clinic

Culver's (Kingman)

Dolan Springs Community Council

Encompass Health Services

Family Dollar (Dolan Springs)

First Southern Baptist Church of Mohave Valley

First Things First

Healthy Families Program & Parents As Teachers - Child and Family Resources, Inc.

Hickory Recovery Network

Hope & Health Hub

Hospital District Number One of Mohave County

Kingman Area Chamber of Commerce

Kingman Area Food Bank

Kingman Cares

Kingman Family Walk-In Clinic

Kingman Main Street

Kingman Regional Medical Center

Lake Havasu Area Chamber of Commerce

Lake Havasu Now

LGBTQ Awareness Group of Arizona / Bullhead City Pride Center

Linde/PraxAir

Make Bullhead Better

Masada Charter School

Meadview Food Bank

Mohave Community College

Mohave County

Mohave County Board of Health

Mohave County Board of Supervisors

Mohave County Library

Mohave County Probation

Mohave County Sheriff's Office

Mohave County Tobacco Use Prevention Program

Mohave Mental Health

Mohave Substance Treatment, Education, & Prevention Partnership

North Country HealthCare

Overdose to Action (OD2A)

Pancho Villa (Kingman)

River Cities United Way

River Valley Home Health and Hospice

Rivyve Behavioral Health

Rosebird Farms

Senior Enrichment Center of Bullhead City

Southwest Behavioral & Health Services

St. Mary's Hospital & Regional Medical Center

Terros Health

The Boathouse Restaurant (Meadview)

The Society of St. Vincent de Paul

The Views at Lake Havasu

Town of Colorado City

VEN Centers

WestCare Arizona

Western Arizona Regional Medical Center

Western Arizona Vocational Education / Career and Technical Education District

White Hills Community Association, Inc.

Xtreme Body Nutrition

Young Scholars Charter School

Yucca Community Food Pantry

Yucca Elementary School

ACKNOWLEDGEMENTS

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Thank You to the Hosts of the Community Focus Groups for Their Help and Hospitality

Bullhead City: Mohave County Public Library

Colorado City: Cherish Families

Dolan Springs: Dolan Springs Community Council

Kingman: **Mohave County**

Lake Havasu City: The Views Senior Center

Topock/Golden Shores: **Mohave County Senior Center**

White Hills: White Hills Community Association, Inc.



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Special Thanks to the Following Individuals Who Provided Leadership and Guidance

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INTRODUCTION

Purpose

his Community Health Needs Assessment (CHNA) examines the health of individuals, families, and communities within Mohave County, Arizona. The CHNA was produced through a collaborative effort between Kingman Regional Medical Center (KRMC) and the Mohave County Department of Public Health (MCDPH) to describe the emerging and ongoing health needs of Mohave County's residents. Using a mixed-methods approach, this CHNA presents and analyzes both quantitative and qualitative data to determine the public's health status, concerns, and goals for growth. The information contained herein is used to identify opportunities for health improvement initiatives for hospitals and public health entities to undertake.

The report provides a foundation to meet the Internal Revenue Service (IRS) and Affordable Care Act (ACA) requirement for nonprofit hospitals to conduct a CHNA every three years. In accordance with the ACA, this report includes:

- Community-identified priorities
- Community descriptions
- Leading causes of death
- Levels of chronic illness



Image credit: Jacqueline Neff



Image credit: Jacqueline Neff

In addition to the requirements, this report includes quantitative and qualitative information regarding concerns of Mohave County residents and priorities for action such as:



- Access to healthcare and use of services
- Physical activity and nutrition
- Mental and behavioral health
- Violence and injury rates



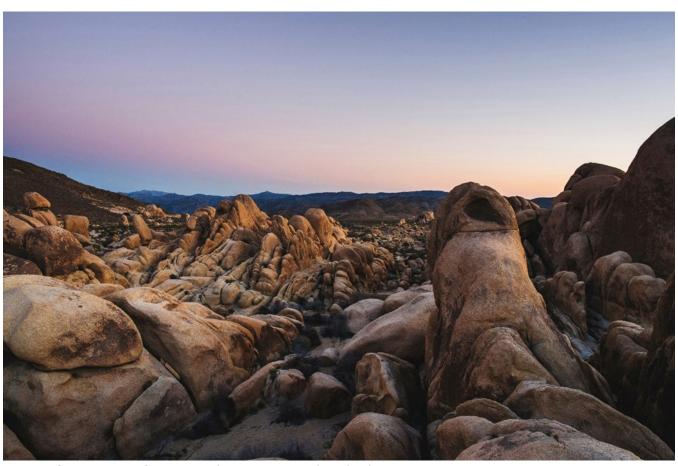


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INTRODUCTION

Understanding Population Health and Public Health

Population health refers to an interdisciplinary approach to identifying factors and outcomes that influence the health status of groups within communities. Population health often relies on non-traditional partnerships between diverse community sectors including public health, industry, academia, healthcare, local government, and others to draw attention to the factors affecting health. Once these community-specific, health-influencing factors have been identified, population health teams find available resources to assist in overcoming them. Population health teams also work to influence healthcare policies and procedures in a way that connects health systems, agencies, and organizations seeking to improve the health of the population served.

No single agency or organization can make measurable improvements in population or public health alone. As such, this is the fifth CHNA produced through partnership



between KRMC and MCDPH. These two contributors work under the guidance of the *Live Well Mohave Initiative*, which strives to promote shared ownership for engaging the population to drive public health interventions.

ublic health seeks to minimize poor health outcomes for a defined population, with a focus on the science and art of preventing disease, prolonging life, and promoting healthy choices. The public health system is comprised of public health departments, healthcare providers, public safety agencies, human service and charity organizations, education and youth development organizations, recreation and arts-related organizations, economic and philanthropic organizations, and environmental agencies. Together, these groups drive activity in the following 10 essential domains for public health:

- 1. Monitoring health status to identify and solve community health problems.
- 2. Diagnosing and investigating health problems and health hazards in the community.
- 3. Informing, educating, and empowering people about health issues.
- 4. Mobilizing community partnerships and actions to identify and solve health problems.
- 5. Developing policies and plans that support individual and community health efforts.
- 6. Enforcing laws and regulations that protect health and ensure safety.
- 7. Linking people to needed personal health services and assuring the provision of healthcare when otherwise unavailable.
- 8. Ensuring competent public and private healthcare workforces.
- 9. Evaluating effectiveness, accessibility, and quality of personal- and population-based health services.
- 10. Researching new insights and innovative solutions to health problems.

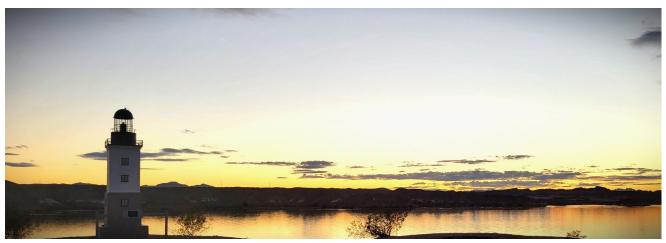


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INTRODUCTION

About the Key Contributors

Kingman Regional Medical Center (KRMC)



KRMC is the largest healthcare provider in northwestern Arizona and the only remaining non-profit hospital in Mohave County. As a 235-bed multi-campus healthcare system, KRMC has more than 1,900 employees, 270 physicians/allied health professionals, and 150 volunteers. KRMC is a full-service healthcare system, comprised of both inpatient and ambulatory services. KRMC is committed to offering a full range of medical services to meet the health and wellness needs of the community. Through its community benefit program, KRMC has a long history of partnering with local agencies and organizations to enhance health and quality of life in Mohave County. This program supports scores of community agencies and initiatives that benefit the health and well-being of Mohave County residents.



Image credit: Jacqueline Neff

Image credit: Jacqueline Neff

Mohave County Department of Public Health (MCDPH) Department of



The Mohave County Department of Public Health serves the residents of Mohave County and employs approximately 90 public health professionals throughout its four divisions of: Administration, Public Health Nursing, Environmental Health, and Nutrition & Health Promotion. MCDPH's stated goals are chronic disease prevention, improving maternal and child health outcomes, building, and strengthening community partnerships, maximizing health tools and resources, and promoting and protecting public health. MCDPH's mission is to promote, protect, and improve the health of Mohave County communities with the vision to have healthy people in healthy communities.



MCDPH and KRMC began working together in 2012 to jointly produce Mohave County's first Community Health Needs Assessment (CHNA), published in 2013. Since then, both entities have continued to lead the Live Well Mohave initiative. As the initiative matured, other community partners joined the effort. Most sectors of the community are represented in the Live Well Mohave initiative, including city and county government, Tribal organizations, healthcare providers, mental health providers, local businesses, charitable organizations, faith-based organizations, and educational organizations.



Image credit: Jacqueline Neff

Impact of Initiatives

he following sections outline the actions taken to improve community health since the last CHNA, as well as the impacts of those actions.

Mental Health

Mohave County continued to support the Mental Health Resource Team (MHRT), which grew to include more than 40 county-wide agencies. The MHRT meets monthly to develop and implement strategies focused on reinforcing the mental health infrastructure of Mohave County. The MHRT focused on delivering community education to enhance the public understanding of mental health and mental health disorders. Some of the core deliverables completed by the MHRT include:

- Launched three networking events for individuals suffering from age related mental health issues and for loved ones stolen by suicide.
- Held six mental health resource fairs for individuals afflicted with chronic mental health concerns.
- Organized and led more than four walks to support individuals with mental
 health concerns.
 - Hosted symposiums for the community to learn about mental health.
 - Provided training for community partners on stigma reduction, providing social support to curtail senior loneliness, and how to identify, persuade, and refer children suffering adverse mental health conditions to appropriate services.



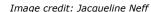
- Mental Health
- Substance Use Disorders
- Social Determinants of Health

mage credit: lacqueline Neff

Kingman Regional Medical Center expanded its integrated behavioral health program by staffing two inpatient nurses to educate hospitalized patients on mental health recovery strategies. KRMC also launched a collaborative care model, staffing three counselors for adults in its primary care clinics and one pediatric mental health counselor in its pediatric clinic. Since August of 2022, the counselors at KRMC have provided more than 2,033 sessions for community members in need of their services. To support the community education initiatives outlined by the MHRT, KRMC hosted six behavioral health educational days with more than 48 hours of dedicated mental health programming for healthcare providers and community benefit agencies.



Image credit: Jacqueline Neff



Substance Use Disorders

Kingman Regional Medical Center (KRMC) took multiple steps to address substance use through its Behavioral Health Initiative. KRMC implemented a screening and referral process for patients hospitalized due to substance use disorder, where these patients receive dedicated education and risk assessments during their hospital stay. KRMC also initiated two support groups to curtail substance use disorder. The first is a "Chronic Pain" support group, which brings together individuals with diagnosed pain to help them explore non-opioid and non-



Image credit: Jacqueline Neff

pharmacological therapies to cope. The second, a "Substance Use" therapy group provides individuals with a history of substance use with group counseling to minimize their use.

Since 2022, more than 450 individuals have received recovery support for their substance use through KRMC's inpatient initiatives. KRMC initiated a *Screening, Brief Intervention, and Referral-to-Treatment* process in its emergency department, where

patients with a history of weekly or daily substance use receive one-on-one consultation with a behavioral health nurse. To mitigate the health impact on patients with substance use in active crisis, KRMC partnered with Terros to launch rapid crisis response and enable patients to receive ongoing care for their addictions. KRMC is a leader in the community, distributing more than 3,000 medication disposal bags and naloxone kits.

The Mohave Substance Treatment Education and Prevention Partnership (MSTEPP), established in 2007, is the primary community-led initiative to address substance use disorders across Mohave County. MSTEPP continues to provide support for numerous substance-use reduction initiatives including:

- Implementing county-wide drug-drop boxes leading to the destruction of thousands of pounds of unused or expired medications.
- Equipping the Kingman Police Department with Naloxone and providing training on its use.
- Locating areas of high substance use through the development of a countywide opioid overdose map.
- Supporting the creation and ongoing operations of the Mohave County Overdose Fatality review team.
- Hosting annual "Walk Away from Drugs" community events.
- Running and managing a successful Quality-of-Life court, which provides access to person-centered judicial systems for first-time drug offenders.
- Engaging the youth of Mohave County with the creation of the MSTEPP Youth Coalition.

Mohave County directly supported the growth of substance use identification, recovery, and treatment centers through its disbursement of Opioid Settlement Funds.

Agencies supported directly by the County include Terros Health, the Jerry Ambrose Veteran's Center, NotMyKid, the Creek Valley Health Clinic, WestCare Arizona, the Arizona Youth Partnership, the Lake Havasu City justice court, Catholic Charities Community Services, Southwest Behavioral Health, the Hushabye Nursery, Kingman Regional Medical Center, and the Mohave Substance Abuse Treatment and Education Prevention Partnership.

Social Determinants of Health

Social Determinants of Health (SDOHs) are non-medical factors that impact the health and longevity of individuals residing within a community. The primary social determinants of health that the Mohave County community stakeholders chose to address from 2022 through 2025 were: access to healthcare, access to social services, and transportation. It was the goal of the community stakeholders to minimize the impact of SDOHs, empowering the residents of Mohave County to make use of the services readily available within the community. In compliance with regulations from the Centers for Medicare and Medicaid Services, Kingman Regional Medical Center started screening all inpatients for SDOHs in January of 2024. Patients with identified needs are referred to KRMC's case management department so those needs may be met though partnership with collaborating community agencies prior to hospital discharge.



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Transportation

Transportation barriers disproportionately affect the most vulnerable groups within a community when they must travel throughout their region to attend necessary medical appointments. KRMC recognizes that as a primarily rural-serving institution, many of its patients may need to travel upwards of 30 miles in one direction to consult with a healthcare provider. To support individuals who experience transportation as a barrier to receiving healthcare, KRMC implemented a courtesy shuttle service in Kingman and Golden Valley to provide rides to patients in need. Throughout 2023, patients in need received a total of 1,351 rides.

To alleviate financial strain during cancer treatment, KRMC received the American Cancer Society Patient Transportation grant, which allows the hospital to provide gas vouchers to patients undergoing active chemotherapy at the WL Nugent Cancer Center. During 2024, this transportation mechanism provided 108 unique patients with 1,808 rides to and from treatment.



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Access to Healthcare

Image

credit: Jacqueline

As the largest healthcare provider in Mohave County Kingman Regional Medical Center (KRMC) made meaningful strides towards improving access to healthcare. To do so, KRMC upgraded its electronic health record to speed up access to scheduling and increase the number of patients seen through its outpatient clinics. KRMC also expanded its options for virtual healthcare. Under this

model, all KRMC medical providers were granted the option to conduct telehealth visits with patients still in their homes.

KRMC made a concerted effort to increase the number of medical providers available at its facilities. To do this, the organization recruited Advanced Practice Providers, including nurse practitioners and physician assis-

tants. KRMC also strengthened its medical residency program by providing training to 36 medical residents in both family medicine and emergency medicine. These medical residents are prioritized when selecting candidates for long-term positions at the hospital. By partnering with Mohave Community College (MCC), KRMC recently launched a Certified Nurse Assistant training program to increase the number of support staff available for managing high patient volumes.

HEPATITIS C ERADICATION INITIATIVE

Kingman Regional Medical Center has launched an initiative to address the incidence of hepatitis C infection in our area.

Mohave County is among the top 5% of U.S. counties for hepatitis C infection rates. With treatments now available that can cure hepatitis C, infection rates should be dropping. However, rates in our area remain largely unchanged – possibly because people aren't getting the treatment they need.

Without intervention, the incidence of undetected hepatitis C infection leaves Mohave County vulnerable to a potential outbreak of the virus. The components of the program include increased testing to identify positive patients, and comprehensive treatment and follow-up care.

Since 2022, KRMC has taken steps to increase the number of specialist physi-

cians practicing within its facilities. As such, multiple specialty physicians were hired, including a board-certified endocrinologist, cardiologist, orthopedic surgeon, and general surgeon. KRMC partnered with Apogee Physicians to ensure that its inpatient units are consistently staffed with qualified hospitalists.



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In addition to its provider recruitment and reten-

tion efforts, KRMC has taken considerable steps towards increasing access to chronic disease care. Through the "Catch it Early" program, KRMC offers free screening mammograms to all Mohave County women. From 2022-2025 more than 15,000 mammograms were delivered through the program detecting more than 100 early-stage breast cancers.

METHODOLOGY

How Data Was Obtained and Process for Consulting With Persons Representing Community Interests

rimary data for the *Mohave County Community Health Needs Assessment* (2025) was obtained from multiple sources to infer the significant health needs and health trends of the region.

This report also utilizes multiple secondary sources of information that come from various governmental and non-profit agencies. The sources provide large-scale quantitative data that is representative of the county or region.

No single agency or organization can make measurable improvements in population or public health alone. As such, this is the fifth Community Health Needs Assessment (CHNA) produced through partnership between Kingman Regional Medical Center (KRMC) and the Mohave County Department of Public Health (MCDPH).

These two contributors work under the guidance of the *Live Well Mohave Coalition*, which strives to promote shared ownership for recruiting the population to drive public health interventions.

Primary Data Sources

- The Live Well Mohave Community Survey (2024)
- Interviews with Key Informants (2024)
- Community Focus Groups (2024)
- Hospital Visit and Admissions Data from Kingman Regional Medical Center (2024)

Secondary Data Sources

- Arizona Department of Health Service (ADHS)
- Arizona Department of Public Safety (AZDPS)
- Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR)
- Health Resources and Services Administration (HRSA)
- Institute for Health Metrics and Evaluation (IHME)
- University of Wisconsin Population Health Institute

How do we determine the health status of our community?

With evidence-based qualitative and quantitative research that values diverse community voices!

VOICES OF OUR COMMUNITY



Community Survey Respondents

- Online & paperbased surveys Conducted between
- Conducted betweer 01/01/2024 and 04/31/2024



Interviews with Key Informants

- 30-minute semistructured interviews
- Conducted between 04/01/2024 and 05/01/2024



Community

- ConversationsFacilitated focus groups
- Roundtable
- discussion approach
 Held between
 o5/01/2024 and
 o6/30/2024



Hospital Visit & Admissions Data

- 1,346,084 Unique individual presentations to KRMC
- Pulled from 01/01/2022 – 12/31/2024

Live Well Mohave: A Community-Driven Effort



COMMUNITY HEALTH
NEEDS ASSESSMENT
(CHNA)

COMMUNITY HEALTH
IMPROVEMENT PLAN
(CHIP)

CHIP WORK GROUP CHIP WORK

CHIP WORK GROUP

PUBLIC HEALTH
PLANNING
(MCDPH)

HOSPITAL
PLANNING
(KRMC)

FRAMEWORK

Process for Identifying and Prioritizing Community Health Needs and Services to Meet Community Health Needs

o ensure a comprehensive approach to community health improvement efforts, Live Well Mohave is guided by the *Mobilizing for Action Through Planning* and *Partnerships (MAPP)* framework, originally developed by the National Association of County and City Health Officials (NACCHO) in 2001.

MAPP 2.0 is a community-driven approach to engaging stakeholders and the public in continuous improvement, with the overarching goal of achieving health equity.

MAPP uses the following practices and foundational principles to advance health equity. The MAPP process begins with the community's available resources, skills, expertise, experiences and individual goals. It is critical to build community partnerships to advance health equity – it cannot be done by one organization alone.

The MAPP framework encourages a collective examination of who is most affected by inequities, their root causes, and the community's strengths and resources to tackle them. The community's voice is central to the stakeholder assessments. The power of partnerships built through the CHNA/CHIP cycles leads the development and application of strategies to address inequity.

MAPP Cycle

A "MAPP cycle" refers to the process of "Mobilizing for Action through Planning and Partnerships"

- Phase I unites many partner organizations and people.
- Phase II includes preparation, application, and analysis of community assessments.
- Phase III centers on developing the community health improvement plan (CHIP) by prioritizing issues and applying and evaluation strategies with community partners.

What is Health Equity?

Health Equity is the opportunity for all to achieve optimal health, ensuring all persons can attain the highest level of health and health care, regardless of income, education, race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, and other factors that would otherwise make obtaining optimal health a challenge.

MOBILIZING FOR ACTION THROUGH PLANNING AND PARTNERSHIP (MAPP)









DEFINITION OF COMMUNITY SERVED

County Communities

he community defined by the Community Health Needs Assessment (CHNA) covers the geographic areas served by both KRMC and MCDPH, which includes all regions within Mohave County, AZ. The CHNA identifies opportunities to improve population well-being as outlined by residents and provides insight to assist hospitals and public health partners to better understand and address community needs and prioritize resource allocation for initiatives and services.

Mohave County is located in northwestern Arizona. Geographically, it is the second largest county in Arizona and the fifth largest county by land area in the

United States, encompassing 13,470 square miles. Arizona shares borders with five states, Mohave County borders three of the five - California, Nevada, and Utah. The Grand Canyon and Colorado River bisect the county into two distinct geographic regions - the Arizona Strip in the north and the Mojave Desert toward the south.



Map of counties counties in Arizona. (Source: https:// com/a/profiles/ViewProfile/10/Mohave+County/)

Arizona County Map

Mohave County is comprised of four incorporated cities:

- Kingman (population estimate 35,334),
- Lake Havasu City (pop. 59,257)
- Bullhead City (pop. 43,302)
- Colorado City (pop. 2,628.)

The region is also home to multiple smaller communities including:

- Beaver Dam
- Chloride
- Dolan Springs
- Fort Mohave
- Golden Shores
- Golden Valley
- Grasshopper Junction
- Hackberry
- Littlefield
- Meadview
- Mohave Valley

- Oatman
- Peach Springs
- Shipley
- Temple Bar
- Topock
- Truxton
- Valentine
- White Hills
- Wikieup
- Willow Beach
- Yucca

Several tribal communities are partially or completely within the borders of the county, including: the Hualapai and Kaibab-Paiute.

DEMOGRAPHICS OF THE COMMUNITY

Population, Population Growth, Age, and Sex

he following sections describe the demographic and socioeconomic characteristics of Mohave County. Demographic characteristics include measures of total population as well as a percent of total population by age, sex, race, and ethnicity. Socioeconomic characteristics includes measures that have been shown to affect health status, such as income, poverty, and education.



Mohave County Population Statistics



The total population of Mohave County is estimated at 223,682 individuals, with a population density of 16.61 individuals per square mile. Most individuals reside within the three largest cities of Lake Havasu City, Bullhead City, and Kingman. Mohave County makes up 3.01% (223,682/7,431,000) of the population residing within the state of Arizona and represents 0.7% of citizens within the United States (223,682/334,900,000) (**Table 1**).

Geographical Region (Name)	Total Population (Individuals)	Land Area (Square Miles)	Population Density (Individuals/mi²)
Mohave County	223,682	13,470	16.61
Arizona	7,431,000	113,998	65.19
United States	334,900,000	3,531,905	94.82

Table 1. Mohave County Total Population and Population Density. (Source: U.S. Census Bureau, American Community Survey, 2023: ACS 1-Year Estimates Subject Tables)

Mohave County Population Growth ຫຼືກໍ່ກັ່ງ



Mohave County saw consistent population growth region wide and among its largest cities (**Table 2.**). The location with that largest percentage growth was Kingman with a population 25.58% greater than in 2010 followed by Lake Havasu City with a growth of 12.69%.

Geographical Region (Name)	Total Population 2010	Total Population 2023	Percent Change from 2010
Mohave County	200,336	223,682	11.65%
Lake Havasu City	52,586	59,257	12.69%
Bullhead City	39,557	43,302	9.47%
Kingman	28,137	35,334	25.58%

Table 2. Mohave County Population Growth from 2010 to 2023. (Source: U.S. Census Bureau, American Community Survey, 2023; 2010: ACS 1-Year Estimates Subject Tables)

Mohave County Age and Sex Demographics



The population of Mohave County is significantly older than the general Arizona population which aligns closely to the median age of the United States (Table 3.). Lake Havasu City has the highest median age of residents while Kingman has the highest density of young residents. Mohave shows a slightly higher density of male residents compared to both Arizona and the United States.

Geographical Region (Name)	Median Age	Percent Male	Percent Female
Mohave County	53.7 <u>+</u> 0.6	51%	49%
Lake Havasu City	54.3 <u>+</u> 1.9	50%	50%
Bullhead City	52.2 <u>+</u> 1.6	52%	48%
Kingman	42.1 <u>+</u> 3.1	50%	50%
Arizona	39.3 <u>+</u> 0.2	50%	50%
United States	39.2 <u>+</u> 0.1	49%	51%

Table 3. Mohave County Median Age and Sex Demographics. (Source: U.S. Census Bureau, American Community Survey, 2023: ACS 1-Year Estimates Subject Tables; ACS 5-Year Estimates Subject Tables)

DEMOGRAPHICS OF THE COMMUNITY

Race, Ethnicity and Economic Demographics

Mohave County Race and Ethnicity Demographics



The community health needs assessment uses a social definition of race and ethnicity rather than a biologic, anthropologic, or genetic definition. Mohave County has a higher density of individuals identifying as white and of two or more races than the populations of Arizona and the United States (**Table 4.**). Mohave County exhibits a lower density of individuals of Hispanic descent than the general Arizona population. Within Mohave County, the highest density of individuals of Hispanic descent resides in Bullhead City.

Race and Ethnicity	Mohave County	Arizona	United States	Lake Havasu City	Bullhead City	Kingman
White	73.9%	52.3%	57.1%	80.0%	67.9%	76.4%
	(165,342)	(3,884,570)	(191,347,650)	(45,830)	(28,244)	(25,261)
Black	1.4%	4.5%	11.8%	0.4%	1.8%	2.0%
	(3,096)	(334,932)	(39,569,312)	(240)	(750)	(660)
Native	0.9%	3.1%	0.5%	0.5%	0.6%	0.7%
	(2,091)	(233,411)	(1,733,272)	(271)	(264)	(219)
Asian	0.9%	3.5%	5.9%	0.8%	1.6%	1.6%
	(1,900)	(259,261)	(19,769,752)	(448)	(684)	(524)
Pacific Is-	0.2%	0.2%	0.2%	0.1%	0.1%	0.0%
lander	(544)	(14,393)	(592,077)	(71)	(26)	(0)
Some Other	0.3%	0.5%	0.6%	0.1%	0.1%	0.1%
Race	(673)	(35,912)	(1,949,065)	(76)	(35)	(19)
Two or More	4.7%	4.3%	4.4%	2.4%	3.5%	2.7%
Races	(10,600)	(322,057)	(14,813,501)	(1,386)	(1,436)	(877)
Hispanic	17.6%	31.6%	19.5%	15.7%	24.4%	16.6%
	(39,436)	(2,346,808)	(65,1400,276)	(8,972)	(10,154)	(5,492)

Table 4. Mohave County Population by Race/Ethnicity. (Source: U.S. Census Bureau, American Community Survey, 2023: ACS 1-Year Estimates Subject Tables; ACS 5-Year Estimates Subject Tables for individual cities)

Mohave County Economic Demographics



Economic and social insecurity are associated with limited access to healthcare and poor health outcomes. A lack of economic mobility limits a populations engagement in healthy behaviors and ability to make choices that support a healthy lifestyle. Residents of Mohave County earn 23.77% less than the general Arizona Population with a median household income of 72.37% compared to the state (**Table 5.**). The lower income of its residents contributes to a 4.5% increase among the number of individuals living in poverty. The greatest gap in economic indicators between residential community and the state occurs in Bullhead City.

Economic Metric	Mohave County	Arizona	United States	Lake Havasu City	Bullhead City	Kingman
Per Capita Income	\$31,477	\$41,290	\$43,313	\$40,951	\$31,654	\$31,806
Median Household Income	\$55,954	\$77,315	\$77,719	\$64,027	\$47,129	\$56,360
Persons Below the Poverty Line	17%	12.5%	12.5%	12.3%	18.9%	13.4%
Travel time to employment	21.1 Minutes	25.7 Minutes	26.8 Minutes	17.8 Minutes	22.6 Minutes	18.3 Minutes

Table 5. Mohave County Population Economic Indicators. (Source: U.S. Census Bureau, American Community Survey, 2023: ACS 1-Year Estimates Subject Tables; ACS 5-Year Estimates Subject Tables for individual cities)



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DEMOGRAPHICS OF THE COMMUNITY

Educational and Veteran Status

Mohave County Educational Demographics



Higher rates of educational attainment generally lead to higher wages and increased economic mobility which in turn contribute to higher rates of health literacy and engagement in healthy behaviors and lifestyles. More Mohave County residents terminated their education without receiving a degree while less residents attained both Bachelor's and post-graduate degrees than the Arizona and United States population (**Table 6.**). The residential community with the highest educational attainment is Lake Havasu City with the largest number of individuals experiencing some college and actualizing a Bachelor's and/or post-graduate degree.

Educational Attainment	Mohave County	Arizona	United States	Lake Havasu City	Bullhead City	Kingman
No Degree	12.4%	10.6%	10.2%	8.6%	15.0%	10.4%
	(21,782)	(547,165)	(23,698,453)	(3,849)	(4,747)	(2,494)
High School	34.9%	23.4%	25.9%	30.8%	37.3%	29.2%
Degree	(61,286)	(1,202,651)	(60,105,924)	(13,864)	(11,828)	(6,979)
Some College	37.0%	32.5%	27.7%	42.0%	35.6%	40.4%
	(64,990)	(1,674,322)	(64,170,652)	(18,892)	(11,291)	(9,649)
Bachelor's	10.5%	20.4%	21.8%	11.1%	7.6%	10.8%
Degree	(18,470)	(1,051,136)	(50,567,878)	(4,970)	(2,404)	(2,588)
Post-graduate	5.1%	13.1%	14.3%	7.5%	4.5%	9.2%
Degree	(8,985)	(674,980)	(33,248,210)	(3,389)	(1,416)	(2,189)

Table 6. Mohave County Population Educational Demographics. (Source: U.S. Census Bureau, American Community Survey, 2023: ACS 1-Year Estimates Subject Tables; ACS 5-Year Estimates Subject Tables for individual cities)



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Mohave County Veteran Status



Mohave County's veteran population is notably larger than that of Arizona (Table 7.) and twice the national average. Lake Havasu City has the largest veteran population when compared to Bullhead City and Kingman. Mohave County veterans are more likely to experience financial hardship and report living in poverty compared to their counterparts at the state and national levels. There are also more disabled veterans living in Mohave County compared to state and national averages. These disparities underscore the need for targeted interventions and resources in Mohave County to address the specific needs of its veteran residents and improve their quality of life.

Veteran Status	Mohave County	Arizona	United States	Lake Havasu City	Bull- head City	King- man
Veteran	12.2%	7.5%	6.1%	14.4%	11.6%	12.1%
	(22,933)	(434,487)	(15,813,955)	(7,001)	(4,142)	(3,226)
Female	11.9%	11.0%	10.9%	8.5%	11.7%	13%
	(2,725)	(47,871)	(1,720,712)	(593)	(485)	(418)
Male	88.1%	89%	89.1%	91.5%	88.3%	87%
	(20,208)	(386,616)	(14,093,243)	(6,408)	(3,657)	(2,808)
Income in the past 12 months below poverty level	10.7% (2,425)	7.7% (32,939)	7.6% (1,188,646)	10.7% (749)	8.8% (359)	7.8% (244)
With any disability	44.8%	32.1%	30.9%	36.9%	40.4%	38.9%
	(10,110)	(137,578)	(4,814,838)	(2,575)	(1,658)	(1,222)

Table 7. Mohave County Population Veteran Status. The veteran population is given as a percent of the civilian population aged 18 years and older. (Source: U.S. Census Bureau, American Community Survey, 2023: ACS 1-Year Estimates Subject Tables; ACS 5-Year Estimates Subject Tables for individual cities)



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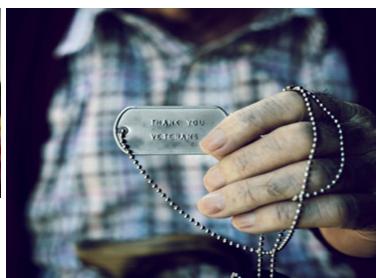


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EXISTING HEALTHCARE FACILITIES AND HEALTH RESOURCES IN MOHAVE COUNTY

Acute Care Hospitals

An acute care hospital is a facility where individuals can be treated for a brief and/or severe episode of illness, immediately following an accident or trauma, to recover from a surgery, or for ongoing care and management of a chronic illness. There are 5 acute care hospitals serving the residents of Mohave County (**Figure 2**).

Kingman Regional Medical Center (H1)

Kingman Regional Medical Center (KRMC) is a non-profit 235-bed acute care hospital located in Kingman, Arizona. KRMC provides a full range of health and wellness services, including advanced medical programs in cardiology, cancer, rehabilitation, wound care, home health, and hospice care. KRMC is an Accreditation Council for Graduate Medical Education (ACGME) accredited teaching hospital offering emergency medicine and family medicine residency programs in affiliation with the Midwestern University of Arizona's College of Osteopathic Medicine (AZCOM). KRMC's emergency department is a state-certified Cardiac Arrest Center and Level IV Trauma Center.

Western Arizona Regional Medical Center (H2)

Western Arizona Regional Medical Center (WARMC) is a 139-bed acute care facility located in Bullhead City, Arizona. WARMC's services include an intensive care unit, inpatient and outpatient care, diagnostic imaging, and emergency medical services. WARMC also offers surgical and wound care through its free-standing surgery center and wound care clinic.

Havasu Regional Medical Center (H3)

Havasu Regional Medical Center (HRMC) is a 181-bed acute care facility located in Lake Havasu City, Arizona. Staffed by more than 100 physicians and allied health professionals, HRMC provides both inpatient and outpatient services with capabilities to refer patients regionally to specialists within most major disciplines. HRMC's emergency department is a state-certified Level IV Trauma Center.

Valley View Medical Center (H4)

Valley View Medical Center (VVMC) is a 90-bed acute care facility located in Fort Mohave, Arizona. It offers a full complement of referral services across the community and region for most major medical specialties. VVMC's has a 16-bed emergency department that operates 24-hours a day. VVMC also provides surgical services and modern diagnostic imaging

Exceptional Community Hospital (H5)

Exceptional Community Hospital (ECH) is a Center for Improvement in Healthcare Quality accredited hospital located in Bullhead City, Arizona. ECH offers a full service emergency department, inpatient hospitalist care, and onsite laboratory, radiology, and imaging services.

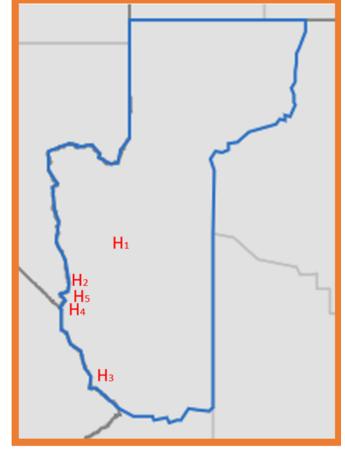


Figure 2. Location of Acute Care Hospitals in Mohave County.

PHYSICIAN PRACTICE COVERAGE IN MOHAVE COUNTY

Physician practices include the number of licensed physicians through the American Medical Association (AMA) or the American Osteopathic Association (AOA) practicing within Mohave County. Mohave County is identified as a medically underserved area for primary care by the Health Resources and Services Administration (HRSA). In part due to its rural geography, Mohave County struggles to recruit and retain licensed physicians across specializations. As of 2024, Mohave County has fewer physicians than recommended in the fields of Psychiatry, Pediatrics, Family Practice, Obstetrics and Gynecology, General Surgery, Ophthalmology, Pathology, Gastroenterology, Otolaryngology, Allergy and Immunology, Endocrinology, Infectious Disease, Rheumatology, Orthopedic Surgery, Pulmonology, and Urology (Table 7.). Limited physician densities for both primary points of care and specialties contributes a healthcare system where patients in need of services require lengthy wait times and large travel distances to receive the services they require.



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Ratios. Recommended Ratio's were collated from profesve count for Mohave County in 2024 was compiled from Health Services (ADHS). * indicates physician counts in

	Physicians per 100,000 Recommended Ratio [Average (Range)]	Mohave County Ratio (2024)
Psychiatry	13.81 (5.73 - 23.2)	2.72
Pediatrics	13.2 (7.0 – 17.2)	6.34
Family Practice*	30.04 (22.5 – 40.5)	24.45
Ob/Gyn	11.85 (9.9 - 14.1)	6.34
General Surgery	11.24 (6.01 - 15.5)	6.79
Ophthalmology	5.46 (4.71 - 7.5)	1.36
Pathology	6.13 (5.2 - 6.7)	2.26
Gastroenterology	3.08 (1.7 - 4.4)	0.91
Otolaryngology	3.46 (2.4 - 4.71)	1.81
Allergy Immunology	1.23 (0.8 - 1.72)	0.45
Endocrinology	1.17 (0.7 - 2.0)	0.45
Infectious Disease	1.07 (0.6 - 1.7)	0.45
Rheumatology	1.06 (0.7 - 1.5)	0.45
Orthopedic Surgery	7.1 (5.4 – 9.4)	6.79
Pulmonology	2.08 (1.3 - 4.0)	1.81
Urology	3.37 (2.86 - 4.3)	3.17
Radiology	10.43 (10.2 - 12.2)	12.23
Neurology	3.12 (1.79 - 5.1)	4.98
Hematology/Oncology	1.08 (no range provided)	3.62
Nephrology	1.31 (0.73 - 2.5)	4.08
Cardiology	5.56 (3.2 - 8.8)	8.6
Dermatology	3.03 (2.1 – 4.0)	6.79
Anesthesiology	12.7 (9.1-15.0)	17.21
Internal Medicine	27.78 (17.6-42.7)	41.66
Emergency Medicine*	8.27 (3.0-12.34)	23.1

HEALTH PROFESSIONAL SHORTAGES

he U.S. Health Resources and Services Administration (HRSA) designates Health Professional Shortage Areas (HPSAs). HPSAs can be geographic areas, populations, or facilities. These areas have a shortage of primary, mental, or dental health services.

Health Professional Shortage for Mental Health

A lack of access to mental health services can have significant health consequences for the individuals within a region. Insufficient mental health coverage directly contributes to social problems, poor quality of life, unemployment and homelessness, and progression of psychological disorders. Large swaths of Mohave County are designated as Mental Health Professional Shortage areas (Table 8.). To quantify the lack of coverage, the HRSA assigns a HPSA score between 0 and 26 with 26 being an area of greatest need. Mohave County would benefit from recruiting and retaining at least seven additional mental health providers.

Mohave County Location	Designation Type	FTE Short- age	HPSA Score	Designation Date
Hualapai Tribe	High Needs Geo- graphic	0.10	15	09/08/2021
Peach Springs	Indian Health Ser- vice	-	14	09/10/2021
Colorado City	High Needs Geo- graphic	0.68	19	09/09/2021
Golden Valley	High Needs Geo- graphic	0.78	16	09/09/2021
Lake Havasu City	Low Income Popu- lation	1.24	17	01/18/2022
Bullhead City	Low Income Population	1.64	17	10/04/2021
Kingman	High Needs Geo- graphic	2.97	18	09/08/2021

Table 8. Mohave County Mental Health Professional Shortage Statistics. (Source: https:// data.hrsa.gov/tools/shortage-area/hpsa-find).

Health Professional Shortage for Primary Care

A lack of access to primary care services can have significant health consequences for the individuals within a region. Insufficient primary care coverage directly contributes to missed diagnoses, delays in receiving healthcare, and poor health outcomes. Large swaths of Mohave County are designated as Primary Care Professional Shortage areas (**Table 9**.). To quantify the lack of coverage, the HRSA assigns a HPSA score between zero and 26 with 26 being an area of greatest need. Mohave County would benefit from recruiting and retaining at least 31 additional primary care providers.

Mohave County Location	Designation Type	FTE Short- age	HPSA Score	Most Recent Up- date
Lake Havasu City	Low Income Population	3.20	14	09/07/2021
Peach Springs	Indian Health Service	-	19	09/10/2021
Hualapai Tribe	High Needs Geo- graphic	0.48	13	09/08/2021
Bullhead City	Low Income Population	5.81	15	09/07/2021
Kingman	Geographic	17.02	17	09/08/2021
Golden Valley	Geographic	2.46	17	09/07/2021
Colorado City	Geographic	2.92	18	09/09/2021

Table 9. Mohave County Primary Care Health Professional Shortage Statistics. (Source: https://data.hrsa.gov/tools/shortage-area/hpsa-find). [Designation Type identifies an area, population, or facility experiencing a shortage of health care services.





HEALTH PROFESSIONAL SHORTAGES

Health Professional Shortage for Dental Health

A lack of access to dental healthcare can have significant health consequences for the individuals unable to receive services. Insufficient dental coverage directly contributes to oral health problems such as tooth loss, cavities, or gum disease. Large swaths of Mohave County are designated as Dental Health Professional Shortage areas (**Table 10**.). To quantify the lack of coverage, the HRSA assigns a HPSA score between zero and 26 with 26 being an area of greatest need. Mohave County would benefit from recruiting and retaining at least 17 additional dental health providers.

Mohave County Location	Designation Type	FTE Short- age	HPSA Score	Designation Date
Peach Springs	Indian Health Service	1	22	09/10/2021
Colorado City	High Needs Geo- graphic	0.16	10	09/09/2021
Hualapai Tribe	High Needs Geo- graphic	0.36	13	09/11/2022
Golden Valley	Low Income Popu- lation	1.51	17	09/11/2022
Kingman	Low Income Popu- lation	4.00	17	09/08/2021
Lake Havasu City	Low Income Popu- lation	4.64	15	09/08/2021
Bullhead City	Low Income Population	6.41	17	10/04/2021

Table 10. Mohave County Dental Health Professional Shortage Statistics. (Source: https://data.hrsa.gov/tools/shortage-area/hpsa-find).





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HEALTH SNAPSHOT OF MOHAVE COUNTY

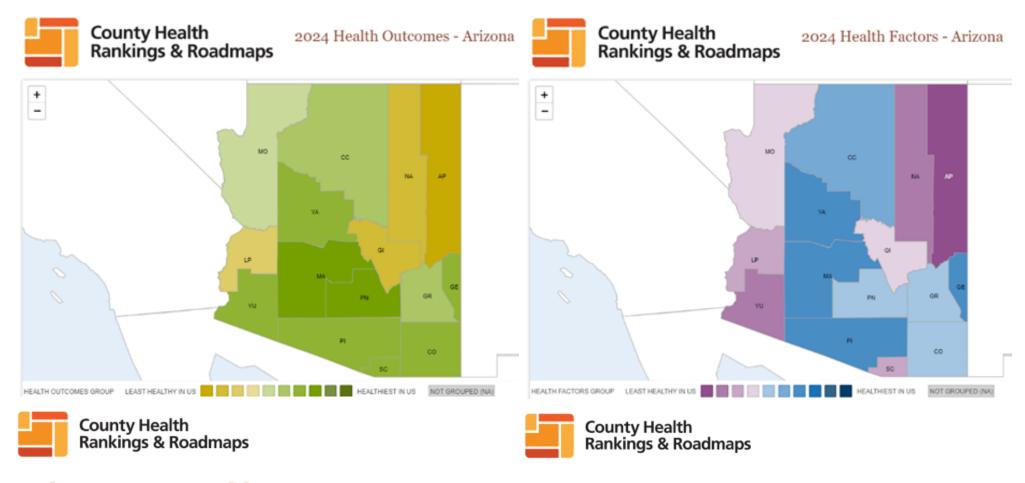
ealth snapshots use measures of health outcomes and health factors to understand a county's current health and identify areas of strength or opportunities for health improvement. The 2024 University of Wisconsin Population Health Institute County Health Rankings & Roadmaps (CHR&R) provides a health snapshot of Mohave County.

The maps (Figure 3.) indicate how Mohave County fares relative to other counties in Arizona. Counties with similar health are in the same shade of color. Mohave County is most similar in health outcomes to Graham County and most similar in health factors to Gila County. In the bottom two graphics, each county in Arizona is represented by a dot, placed on a continuum from least healthy to healthiest in the nation. These graphics indicate how Mohave County fares relative to other counties in the state and the nation. They also allow you to see how Arizona counties fare on a national continuum of health.

The overall health rankings of Mohave County are as follows:

In Health Outcomes: Mohave County ranks
11th out of the 15 Arizona counties.

In Health Factors: Mohave County ranks 9th out of the 15 Arizona counties.



Mohave County Health Outcomes - 2024

Mohave County Health Factors - 2024



Figure 3. Health Outcomes (left) and Health Factors (right) range among counties in Arizona. (Bottom left, right) Each dot represents a county in Arizona, placed on a continuum from least healthy to healthiest in the country. Counties are placed at their weighted z-score for Health Outcomes/ Health Factors. Mohave County is faring about the same as the average county in Arizona for Health Outcomes, and slightly worse than the average county in the nation. Mohave County is faring about the same as the average county in Arizona for Health Factors, and worse than the average county in the nation. (Source: University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2024. www.countyhealthrankings.org)

Health Outcomes

Outcomes represent how healthy a county is right now. They reflect the physical and mental well-being of residents through measures representing the length and quality of life typically experienced in the community. Mohave County is faring about the same as the average county in Arizona for Health Outcomes and slightly worse than the average county in the nation (**Figure 3**).

Length of Life

•Premature Death (years of potential life lost before age 75)

Quality of Life

- •Self-Reported Health Status
- •Percent of Low Birthweight Newborns

Health Factors

Factors represent community conditions that, if modified, can improve length and quality of life. These four health factor areas are predictors of how healthy our communities can be in the future. Mohave County is faring about the same as the average county in Arizona for Health Factors, and worse than the average county in the nation (Figure 3).

Health Behaviors

- •Tobacco Use
- •Diet & Exercise
- Alcohol & Drug Use
- Sexual Activity

Clinical Care

•Access to Care •Quality of Care

Social and Economic Factors

- Education
- •Employment & Income
- Family & Social Support
- Community Safety

Physical Environment

- •Air & Water Quality
- Housing & Transit



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Health Indicators Related to Birth and Death

Length of life is the time between birth and death. We investigate length of life among population groups to help us understand differences in health outcomes. In Mohave County, the average life expectancy is 73.8 years. Premature death, or deaths that might have been prevented, are higher in Mohave County than the state or nationwide. The data reveal where differences exist in some of the leading causes of death in the United States, and which health factors should be addressed to improve length of life. Mohave County experiences a higher number of firearm deaths and car accidents compared to both Arizona and the United States as a whole.

Health Indicators Related to Birth and Death	Mohave County	Arizona	United States
Life Expectancy Years	73.8	77.5	77.6
Low Birthweight Percentage of live births with low birthweight (< 2,500 grams).	7%	8%	8%
Teen Births Number of births per 1,000 female population ages 15-19.	24	19	17
Mortality Deaths per 100,000	979.16	758.28	783.42
Premature Death Years of potential life lost to death of people under age 75, per 100,000 people	12,200	8,900	8,000
Child Mortality Number of deaths among residents under age 20 per 100,000 population	60	60	50
Infant Mortality Number of infant deaths (under age 1) per 1,000 births	6	5	6
Drug Overdose Deaths Number of drug poisoning deaths per 100,000 population.	26	33	27
Firearms Deaths Number of deaths due to firearms per 100,000 population.	28	17	13
Motor Vehicle Crash Deaths Number of motor vehicle crash deaths per 100,000 population.	20	14	12
Alcohol-Impaired Driving Deaths Percentage of driving deaths with alcohol involvement.	21%	21%	26%

Table 11. Health indicators related to birth and death in Mohave County compared to Arizona and the nation. (Source: University of Wisconsin Population Health Institute. Institute For Health Metrics and Evaluation)

Health Indicators Related to Quality of Life

In addition to measuring how long people live in Mohave County, it is important to include measures of how well people live. Self reported health status is a general measure of health-related quality of life in a population. Eighteen percent of Mohave County adults reported that they consider themselves in fair or poor health, similar to state and national values. Measuring health-related quality of life helps characterize the experience of people with disabilities and those who are experiencing more chronic, and likely severe, health issues. The percentage of people in Mohave County who are considered disabled is significantly greater than the average disability rate across the entire state or whole country. Twenty-four and half percent have a disability, which is defined as a health condition lasting three months or longer that limits normal daily activities (self-care, work, school, etc.). Mohave County is among the top 5% of U.S. counties for hepatitis C infection rates. The infection rate is at 211 per 100,000 people. With treatments now available that can cure hepatitis C, infection rates should be dropping. However, rates in our area remain largely unchanged - possibly because people aren't getting the treatment they need.

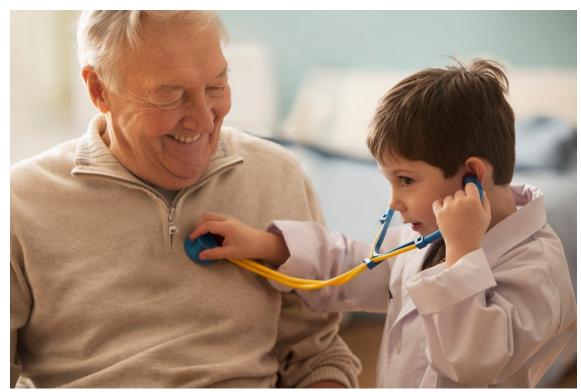


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Health Indicators Related to Quality of Life	Mohave County	Arizona	United States
Poor or Fair Health Percentage of adults reporting fair or poor health	18%	16%	14%
Poor Physical Health Days Average number of physically unhealthy days reported in past 30 days (age-adjusted)	4.3	3.5	3.3
Frequent Physical Distress Percentage of adults reporting 14 or more days of poor physical health per month (age-adjusted).	13%	11%	10%
Poor Mental Health Days Average number of mentally unhealthy days reported in past 30 days (age-adjusted)	5.8	4.9	4.8
Frequent Mental Distress Percentage of adults reporting 14 or more days of poor mental health per month (age-adjusted).	18%	16%	15%
Disability Percentage of civilian noninstitutionalized population with a disability (hearing, vision, cognitive, ambulatory, self-care, or independent living).	24.5%	14.0%	13.6%
HIV Prevalence Number of people aged 13 years and older living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population.	153	296	382
Hepatitis C Prevalence Estimated rate of people living with Hepatitis C per 100,000 population.	211	94	40

Table 12. Health indicators related to quality of life in Mohave County compared to Arizona and the nation. (Source: ADHS. Hep Free AZ. University of Wisconsin Population Health Institute. U.S. Census Bureau.)

Health Behaviors

Health behaviors are health-related practices that can improve the health of individuals or community members. Health behaviors are determined by the choices available in the places where people live, learn, work, and play. Not everyone has the money, access, and privilege needed to make healthy choices. Physical activity reduces the risk of various health issues, including type 2 diabetes and cardiovascular diseases, regardless of obesity. However, only 56% of Mohave County's population has access to physical activity facilities, which is lower than state and national averages.

Health Behaviors	Mohave County	Arizona	United States
Access to Exercise Opportunities Percentage of population with adequate access to locations for physical activity.	56%	85%	84%
Adult Smoking Percentage of adults who are current smokers (ageadjusted).	20%	14%	15%
Excessive Drinking Percentage of adults reporting binge or heavy drinking (age-adjusted).	15%	19%	18%
Insufficient Sleep Percentage of adults who report fewer than 7 hours of sleep on average (age-adjusted).	38%	34%	33%
Preventable Hospital Stays Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.	1997	1962	2681
Mammography Screening Percentage of female Medicare enrollees ages 65-74 who received an annual mammography screening.	39%	41%	43%
Flu Vaccinations Percentage of fee-for-service (FFS) Medicare enrollees who had an annual flu vaccination.	33%	43%	46%
Sexually Transmitted Infections: Chlamydia Number of newly diagnosed chlamydia cases per 100,000 population.	203	551	495
Sexually Transmitted Infections: Gonorrhea Number of newly diagnosed gonorrhea cases per 100,000 population.	80	223	194
Sexually Transmitted Infections: Syphilis Number of newly diagnosed syphilis cases per 100,000 population.	12	50	35

Table 13. Health behaviors in Mohave County compared to Arizona and the nation. (Source: ADHS. University of Wisconsin Population Health Institute.)

Health Indicators Related to Access to Care

Having access to affordable and high-quality healthcare is crucial for maintaining physical, social, and mental well-being. Health insurance plays a vital role in allowing individuals and families to obtain necessary primary care, consult with specialists, and receive emergency medical services. In Mohave County, there is a higher proportion of individuals without health insurance (14.1%) compared to both the state level and the national average. This discrepancy highlights a significant issue in access to healthcare services within this region. It is also necessary for providers to offer affordable care, be available to treat patients, and be in relatively close proximity to patients.

9.5%
11%
5.4%
4.3%

Table 14. Health indicators related to access to care in Mohave County compared to Arizona and the nation. (Source: U.S. Census Bureau.)



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Health Indicators Related to Physical Environment

The physical environment is where individuals live, learn, work and play. People interact with their physical environment through the air they breathe, the water they drink, and the homes in which they live. Clean air and safe water are necessary for good health. Mohave County experiences lower levels of air pollution compared to the national average.

Stable affordable housing can provide a safe environment for families to live, learn, and grow. However, housing is often a family's largest expense. Thirteen percent of Mohave County households spend half or more of their household income on housing. High rent or mortgage payments can force difficult choices between essentials like utilities, food, transportation, or medical care.



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Health Indicators Related to Physical Environment	Mohave County	Arizona	United States
Geography Population per square mile.	16.0	62.9	93.8
Air Pollution – Particulate Matter Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5).	5.1	4.8	7.4
Drinking Water Violations Indicator of the presence of health-related drinking water violations. 'Yes' indicates the presence of a violation, 'No' indicates no violation.	Yes	N/A	N/A
Broadband Access Percentage of households with broadband internet connection.	85%	89%	88%
Homeownership Percentage of owner-occupied housing units.	73%	66%	65%
Severe Housing Problems Percentage of households with at least one of four housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.	15%	17%	17%
Housing Cost Burden Percentage of households that spend 50% or more of their household income on housing.	13%	13%	14%
Overcrowding Percentage of households with more than 1.01 persons per room.	3.2%	4.4%	3.4%
Complete Kitchen Facilities Percentage of households lacking complete kitchens facilities (a sink with piped water, a range or cookstove, and a refrigerator).	0.8%	0.9%	0.8%
Complete Plumbing Facilities Percentage of households lacking complete plumbing facilities (hot and cold piped water, a flush toilet, and a bathtub or shower).	0.7%	0.7%	0.9%

Table 15. Health indicators related to physical environment in Mohave County compared to Arizona and the nation. (Source: University of Wisconsin Population Health Institute. U.S. Census Bureau.)

Health Indicators Related to Transportation

Transportation connects people to each other and to the places where they live, learn, work and play. Transit options include walking, biking, public transit, carpooling, or driving alone. The transportation choices that communities and individuals make have important impacts on health via active living, air quality, and traffic crashes. Around 5.1% of Mohave County households are without a vehicle, which is consistent with the state average and lower than the national figure. A significant portion of employees drive to their workplaces (84.5%), experiencing a commute time that is relatively brief compared to the average commute in Arizona or even across the entire United States. Figure 4 shows a breakdown of how the Mohave County workforce commutes to work compared to Arizona and nationwide. The majority drive alone to work.

Commuters who use public transit tend to engage in more physical activity, such as walking to and from transit stations. Mohave County has three transportation options open to the general public. These options are the Bullhead Area Transit System (BATS), Kingman Area Regional Transit (KART), and Lake Havasu City Transit (LHCT).



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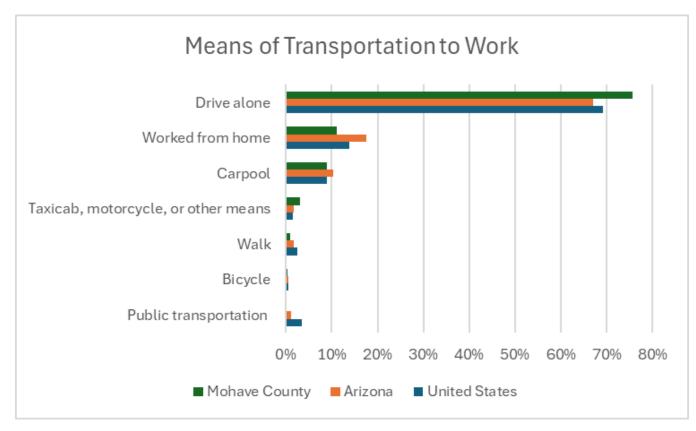


Figure 4. Means of Transportation to Work in Mohave County for workers over age 16. (Source: U.S. Census Bureau)

Health Indicators Related to Transportation	Mohave Coun- ty	Arizona	United States
No Vehicle Available Percent of occupied housing units with no vehicle available.	5.1%	5.6%	8.4%
Traffic Volume Average traffic volume per meter of major roadways in the county.	43	184	108
Drive to Work Percentage of workers who drive to work via car, truck, or van.	84.5%	77.3%	78.2%
Long Commute Percentage of workers who commute more than 30 minutes.	16.9%	36.9%	37.9%

Table 16. Health Indicators related transportation in Mohave County compared to Arizona and the nation. (Source: University of Wisconsin Population Health Institute. U.S. Census Bureau)

Food & Nutrition

The environments where we live, learn, work, and play impact our access to healthy food and opportunities for engaging in physical exercise. These environmental factors, combined with our genetic makeup and lifestyle choices, play a crucial role in determining our overall health status and our risk of being overweight and obese. The presence of grocery stores offering fresh produce enhances access to healthier food options. However, residing in areas known as "food deserts" where fresh nutritious food is scarce, can lead to poor dietary habits. The food environment index in Mohave County is slightly worse than that of Arizona as a whole and national trends. In Mohave County, about 36% of the population is considered obese, reflecting similar obesity statistics seen in Arizona and across the nation. Addressing obesity in Mohave County may require community-wide efforts, including educational programs about nutrition and fitness, improved access to healthy foods, and initiatives to promote active living.

Food & Nutrition	Mohave County	Arizona	United States
Adult Obesity Percentage of the adult population (age 18 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m2 (age-adjusted).	36%	32%	34%
Adult Diabetes Percentage of adults aged 20 and above with diagnosed diabetes (age-adjusted).	10%	10%	9%
Food Environmental Index Index of factors that contribute to a healthy food environment, from zero (worst) to 10 (best).	6.0	6.9	7.7
Limited Access to Healthy Foods Percentage of population who are low-income and do not live close to a grocery store.	19%	9%	6%
Food Insecurity Percentage of population who lack adequate access to food.	14%	10%	10%

Table 17. Food and nutrition in Mohave County compared to Arizona and the nation. (Source: University of Wisconsin Population Health Institute.)





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Health Indicators Related to Social & Economic Factors

Social and economic factors such as social support, income, and community safety affect how well and how long we live. The choices that are available in a community are impacted by social and economic factors. In addition to supporting economic security for families, access to high-quality childcare contributes positively to a child's health and development.

In Mohave County, Arizona, the average household spent 30% of its income on childcare for two children. There are 58 licensed childcare facilities in Mohave County, with a total licensed capacity of 4,134. Facilities are located in Beaver Dam (1), Bullhead City (13), Colorado City (2), Dolan Springs (1), Fort Mohave (3), Golden Valley (1), Kingman (17), Lake Havasu (18), Mohave Valley (1), and Topock (1). (Source: ADHS Child Care Facilities Licensing).

Income can come from jobs, investments, government assistance programs or retirement plans. Income allows families and individuals to purchase health insurance and medical care but also provides options for healthy lifestyle choices. Mohave County has a higher percentage of households (54%) receiving social security income than Arizona and nationwide. Communities that have been cut off from investments or who have experienced discrimination have fewer social and economic opportunities. These gaps disproportionately affect minorities and people living in rural areas.



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Health Indicators Related to Social & Economic Factors	Mohave County	Arizona	United States
Social Associations Number of membership associations per 10,000 population.	5.3	5.6	9.1
Child Care Cost Burden Childcare costs for a household with two children as a percent of median household income.	30%	31%	27%
School Funding Adequacy The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district.	-\$8,895	-\$2,728	\$634
Children Eligible for Free or Reduced-price Lunch Percentage of children enrolled in public schools that are eligible for free or reduced-price lunch.	38%	33%	51%
Food Stamps / Supplemental Nutrition Assistance Program (SNAP) Percentage of households receiving food stamps/SNAP.	12.2%	10.1%	12.2%
Social Security Income Percentage of households receiving social security income.	54%	33.9%	31.3%
Supplemental Security Income (SSI) Percentage of households receiving SSI.	5.8%	4.1%	5%
Cash Public Assistance Income Percentage of households receiving cash public assistance income.	2.0%	1.7%	2.4%
Gender Pay Gap Ratio of women's median earnings to men's median earnings for all full-time, year-round workers, presented as "cents on the dollar."	0.82	0.84	0.81
Residential Segregation Index of dissimilarity where higher values indicate greater residential segregation between Black and white county residents.	61	50	63

Table 18. Health indicators related to social and economic factors in Mohave County compared to Arizona and the nation. (Source: University of Wisconsin Population Health Institute. U.S. Census Bureau.)

Adverse Childhood Events (ACEs)

ACEs are potentially traumatic childhood events such as abuse, neglect, or household dysfunction. These events can have long-lasting negative effects on a person's well being. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood. Figure 5 depicts emergency department visits for four potential ACEs (childhood abuse and neglect, sexual violence, firearm injury, and homelessness) for Arizona residents under the age of 18. Mohave County has a lower rate (26.1) than Arizona (37.0), but the number of visits has increased since 2023.



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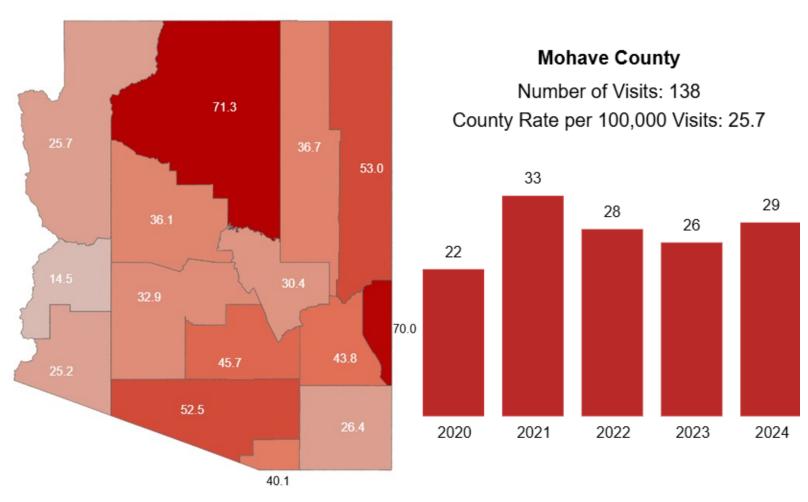


Figure 5. (Left) Hospital visits related to Adverse Childhood Experiences (ACEs). Rate per 100,000 visits in Arizona from 2020-2024. (Right) Breakdown by year. (Source: ADHS ACEs Dashboard)

Social Vulnerability Index

The Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Diseases Registry (ATDSR) have developed a Social Vulnerability Index (SVI) from U.S. Census data at the county level to estimate places in greatest need before, during, and after an emergency. It examines socioeconomic status, household characteristics, racial & ethnic minority status, and housing type & transportation. The Arizona Social Vulnerability Index (AZSVI) partnered with the CDC and maintains the SVI data at the census tract level. It incorporates Arizona-specific conditions such as heat vulnerability, lack of tree coverage, and water cost. The overall SVI score ranges from zero (lowest vulnerability, lightest color) to one (highest vulnerability, darkest color).

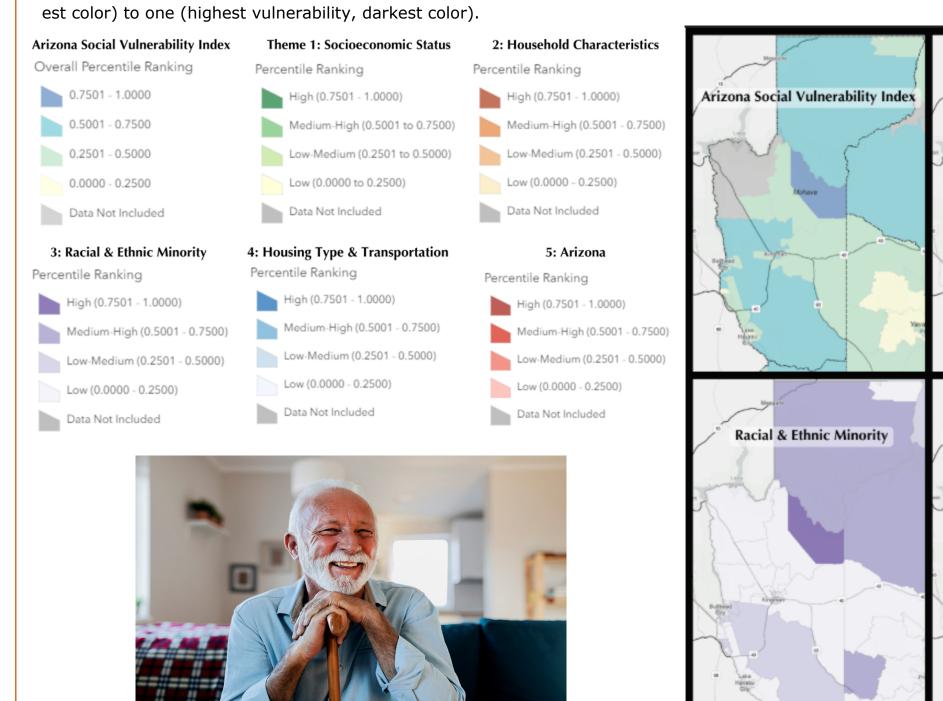
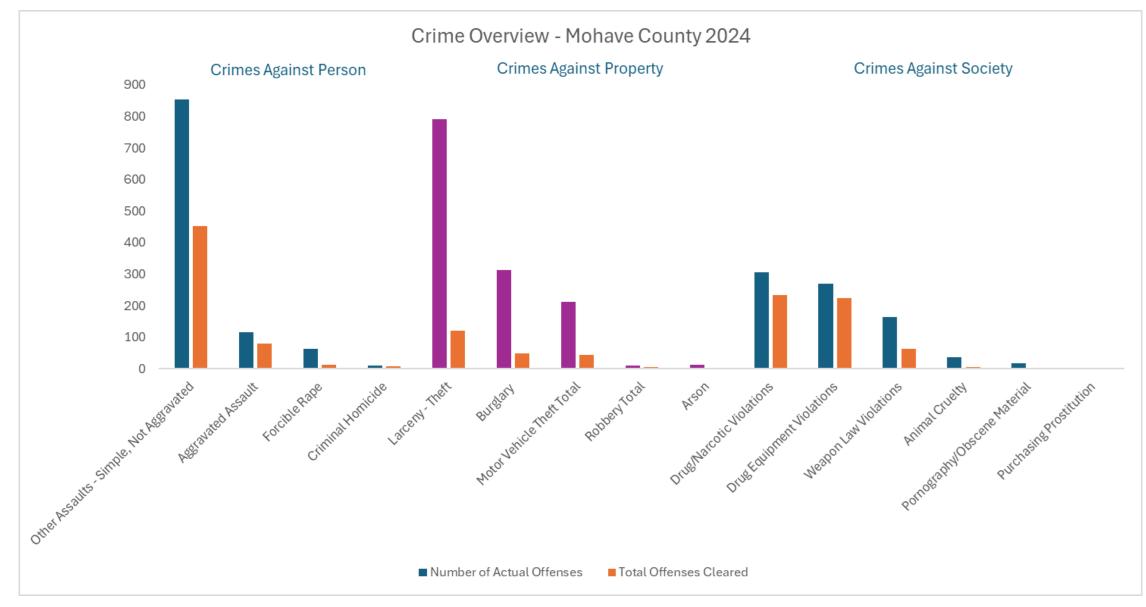


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Socioeconomic Status **Household Characteristics** Housing Type & Transportation Arizona

Crime Overview

Community safety reflects not only violent acts in neighborhoods and homes, but also injuries caused unintentionally through accidents. Accidents and violence affect health and quality of life in the short and long-term, for those both directly and indirectly affected, and living in unsafe neighborhoods can impact health in a multitude of ways. Two thousand four hundred and twenty-nine crimes were committed in 2024, with a clearance rate of 33.51%. An offense is cleared when it is resolved through arrest or exceptional means.



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Figure 7. 2023 Crime Overview in Mohave County. (Source: Arizona Department of Public Safety, FBI National Incident-Based Reporting system (NIBRS)).

STAKEHOLDER INPUT

THE LIVE WELL MOHAVE COMMUNITY SURVEY (2024)

he Mohave County Department of Public Health, Kingman Regional Medical Center, and Midwestern University's Arizona College of Osteopathic Medicine jointly developed a public health survey (Appendix 2) to obtain community insights and feedback for the creation of this community health needs assessment. The survey consisted of 50 questions subdivided into the four

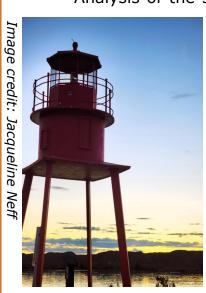


sessment. The sur-livided into the four

following sections: participant demographics, participant health status, quality of life, and community health. Participants were permitted to select multiple response options when appropriate for the question.

The survey was made available to community members via both an online and in-paper version between January 01, 2024, and April 31, 2024. The survey was open to all residents of Mohave County and marketed on the websites of KRMC and the MCDPH. Paper versions were available at community health fairs occurring during the data collection period and on site in KRMC, MCDPH offices and on the mobile health unit, in rural community centers, county libraries, doctor offices, behavioral health clinics, shelters, businesses, and at the Kingman Area Chamber of Commerce.

Analysis of the survey responses were conducted between August 1, 2024,



and October 31, 2024, and consisted of a descriptive analysis of the frequency of different responses in total and by participant's primary location. Questions that permitted multiple responses were assessed as a volume of the total number of responses provided, e.g. up to 4,422 for questions that permitted three responses. Incomplete surveys had their omitted questions removed from the survey results on an item-by-item basis as to retain the maximum amount of participant responses in the data guiding this community health needs assessment.

A total of 1,474 residents of Mohave County completed the survey during the data collection timeframe.

Most participants identified:

Kingman (49.8%, 734/1474) as their primary residential location followed by rural areas (24.6%, 363/1474), Bullhead City (11.6%, 171/1474), and Lake Havasu City (10.9%, 161/1474), with 3.1% (45/1474) of respondents choosing to not identify their primary residence location.

Primary Residential Location of Survey Participants

• Kingman 49.8%



Bullhead City 11.6%



• Rural Areas 24.6%



• Lake Havasu City 10.9%



THE LIVE WELL MOHAVE COMMUNITY SURVEY RESULTS

Demographics of Respondents

total of 1,474 Mohave County residents completed the Live Well Mohave Community Survey. A full report of the data gathered during the survey can be found in Appendix 6. Most (22.8%, 336/1474) respondents were between 55 and 64 years of age, identify as female (79.7%, 1175/1474), and descend from Caucasian heritage (86.6%, 1276/1474). Most respondents have attended some college (34.1%, 502/1474), reside in a household consisting of two individuals (45.0%, 664/1474) with a household income between \$25,000 to \$49,000 (19.9%, 293/1474).

Survey respondents represent an older subpopulation than the residents of Mohave County and Arizona (Figure 1A) with a slightly higher rate of degree attainment (Figure 1B). The sample of individuals making their voices heard provide an equitable cross section of household income compared to the Mohave County and Arizona General Population (Figure 8).

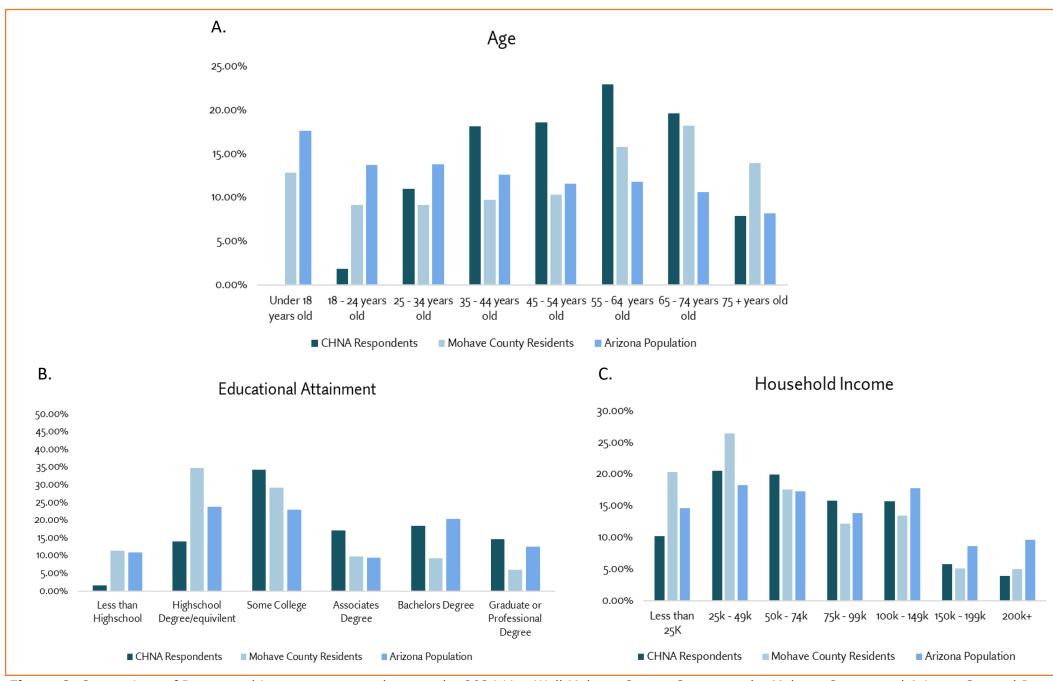


Figure 8. Comparison of Demographics among respondents to the 2024 Live Well Mohave County Survey to the Mohave County and Arizona General Populations.

Personal Health Challenges

Survey respondents were asked to rate their **overall health** on a scale of poor, fair, good, very good, or excellent. Most respondents rated their health as "good" (41.7%, 614/1474) followed by "very good" (29.2%, 431/1474) then "fair" (18.1%, 266/1474). The rate of responses was non-uniform across location of primary residence with Bullhead City residents most frequently reporting their health as "very good" (33.9%, 58/171) (**Table 19.**).

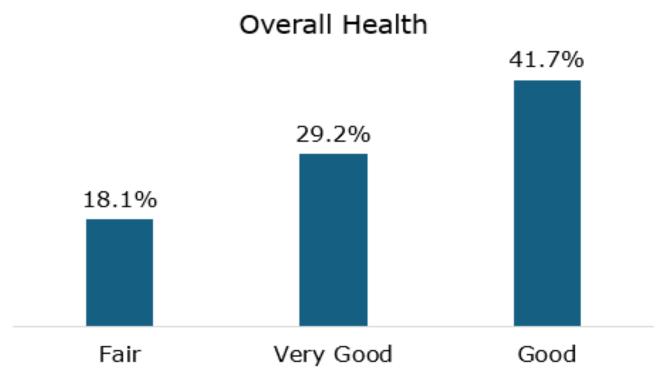


Figure 9. Live Well Mohave Community Survey respondents rating of their overall health.





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	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Lake Havasu City (N = 161)	Rural (N = 363)	Unreport- ed Loca- tion (N = 45)
Poor	04.07%	03.95%	06.43%	00.62%	04.13%	08.89%
	(60/1474)	(29/734)	(11/171)	(1/161)	(15/363)	(4/45)
Fair	18.05%	16.89%	23.98%	13.66%	20.66%	08.89%
	(266/1474)	(124/734)	(41/171)	(22/161)	(75/363)	(4/45)
Good	41.66%	44.28%	28.65%	38.51%	44.90%	33.33%
	(614/1474)	(325/734)	(49/171)	(62/161)	(163/363)	(15/45)
Very	29.24%	28.75%	33.92%	37.89%	24.24%	28.89%
Good	(431/1474)	(211/734)	(58/171)	(61/161)	(88/363)	(13/45)
Excellent	06.51%	06.13%	06.43%	09.32%	05.79%	08.89%
	(96/1474)	(45/734)	(11/171)	(15/161)	(21/363)	(4/45)
No An-	00.47%	00.00%	00.58%	00.00%	00.28%	11.11%
swer	(7/1474)	(0/734)	(1/171)	(0/161)	(1/363)	(5/45)

Table 19. Ratings of Personal Health among the Live Well Mohave Community Survey Respondents by Primary Residence Location.

Independent of their response to their personal health status, most of survey respondents (95.5%, 1407/1474) identified a distinct personal health challenge. Survey respondents were able to select up to three personal health challenges when responding to this question, as such the results are presented as a percentage of total responses (N=4422). The most common personal health challenge across Mohave County was weight related issues, such as being overweight or obese (13.3%, 587/4422). The second most common response was joint pain (10.8%, 479/4422) and/or back pain (9.4%, 416/4422). The third most common response was high blood pressure (8.5%, 377/4422). The rate of response for each personal health challenge did not vary by primary residence location, with individuals throughout Kingman, Bullhead City, Lake Havasu City, and Mohave County's rural areas showing similar response frequencies (Figure 10.)

Personal Health Challenges

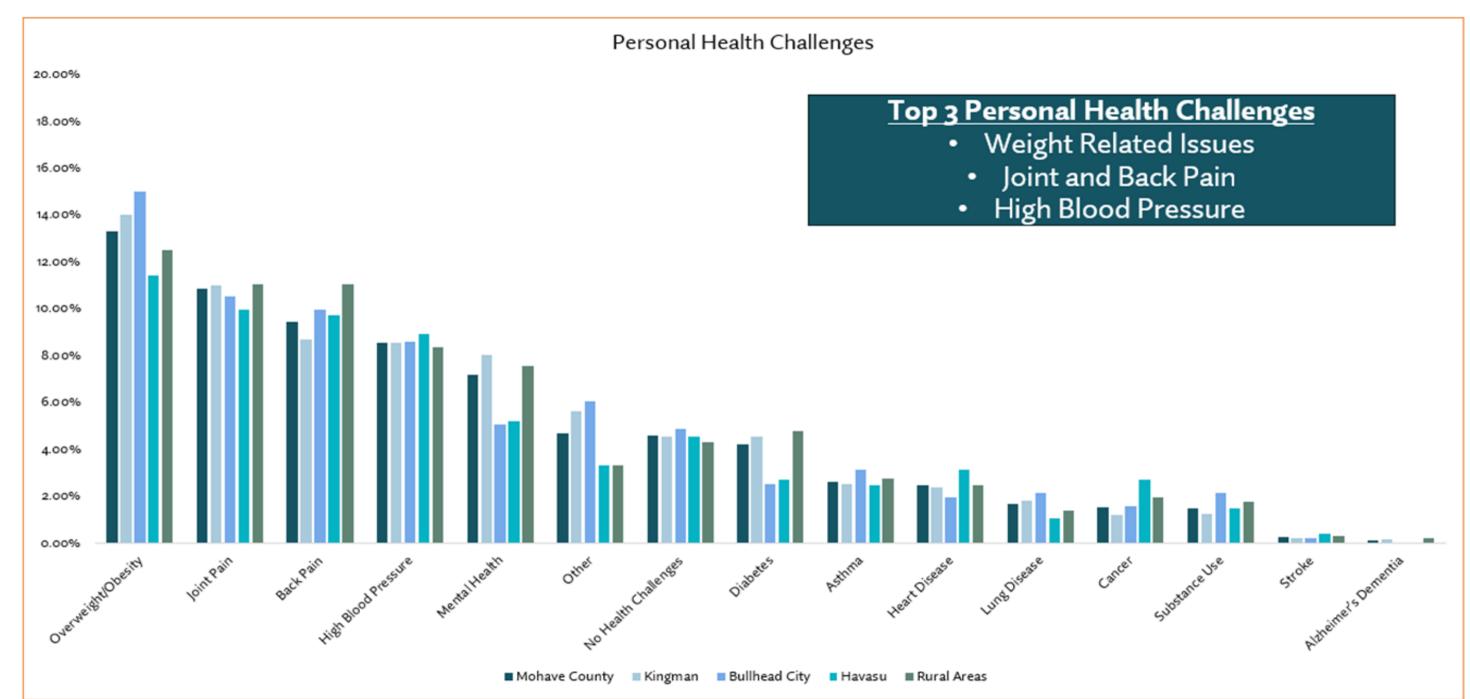


Figure 10. Personal Health Challenges of Respondents to the Live Well Mohave Community Survey 2024 by Primary Residence Location.

Community Health Issues

Survey respondents were asked to rate the overall health of their community on a scale of very unhealthy, unhealthy, somewhat healthy, healthy, and very healthy. Most respondents rated their communities as "somewhat healthy" (39.7%, 585/1474), followed by "unhealthy" (32.0%, 472/1474), then "healthy" (12.1%, 179/1474). Respondents from Lake Havasu City indicated a more frequent belief that their community was "healthy" compared to the remainder of Mohave County (30.4% vs. 12.1%).

Overall Community Health

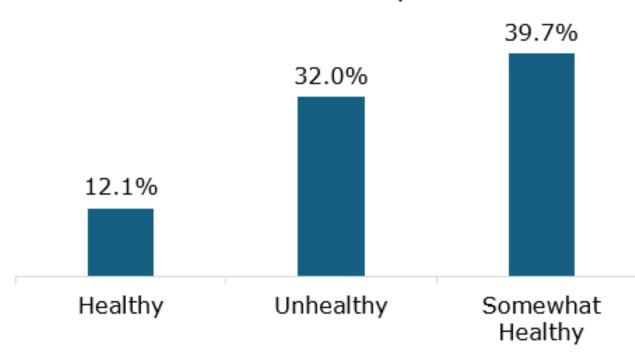


Figure 10. Live Well Mohave Community Survey respondents rating of their community's health.

	Mohave County	Kingman	Bullhead City	Lake Havasu City	Rural Are- as	Unreport- ed Loca- tion
Very Unhealthy	10.65%	13.35%	10.53%	03.73%	08.82%	06.67%
	(157/1474)	(98/734)	(18/171)	(6/161)	(32/363)	(3/45)
Unhealthy	32.02%	38.15%	33.33%	06.83%	31.13%	24.44%
	(472/1474)	(280/734)	(57/171)	(11/161)	(113/363)	(11/45)
Somewhat	39.69%	36.78%	40.94%	47.20%	42.42%	33.33%
Healthy	(585/1474)	(270/734)	(70/171)	(76/161)	(154/363)	(15/45)
Healthy	12.14%	07.90%	11.70%	30.43%	12.12%	17.78%
	(179/1474)	(58/734)	(20/171)	(49/161)	(44/363)	(8/45)
Very Healthy	02.65%	01.63%	02.34%	08.70%	02.20%	02.22%
	(39/1474)	(12/734)	(4/171)	(14/161)	(8/363)	(1/45)
No Answer	02.85%	02.18%	01.17%	03.11%	03.31%	15.56%
	(42/1474)	(16/734)	(2/171)	(5/161)	(12/363)	(7/45)

Table 20. Ratings of the overall health of the community among respondents to the Live Well Mohave community survey (2024) by primary residence location.

Independent of the respondents' rating of their community's health, participants were asked to identify three health problems that their community's faced. These selections represent the respondents' perceptions towards challenges faced by their community. It is important to note that these results may not align with their self-identified personal health problems. The most selected community health problem across Mohave County were mental health (19.5%, 864/4422), followed by aging problems (13.2%, 582/4422), then motor vehicle crash injuries (7.5%, 331/4422). Lake Havasu City showed a slightly different order for these top three community health problems with aging problems ranking first, followed by mental health, and heart disease and stroke taking the third spot (Figure 11).



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Community Health Problems of Mohave County

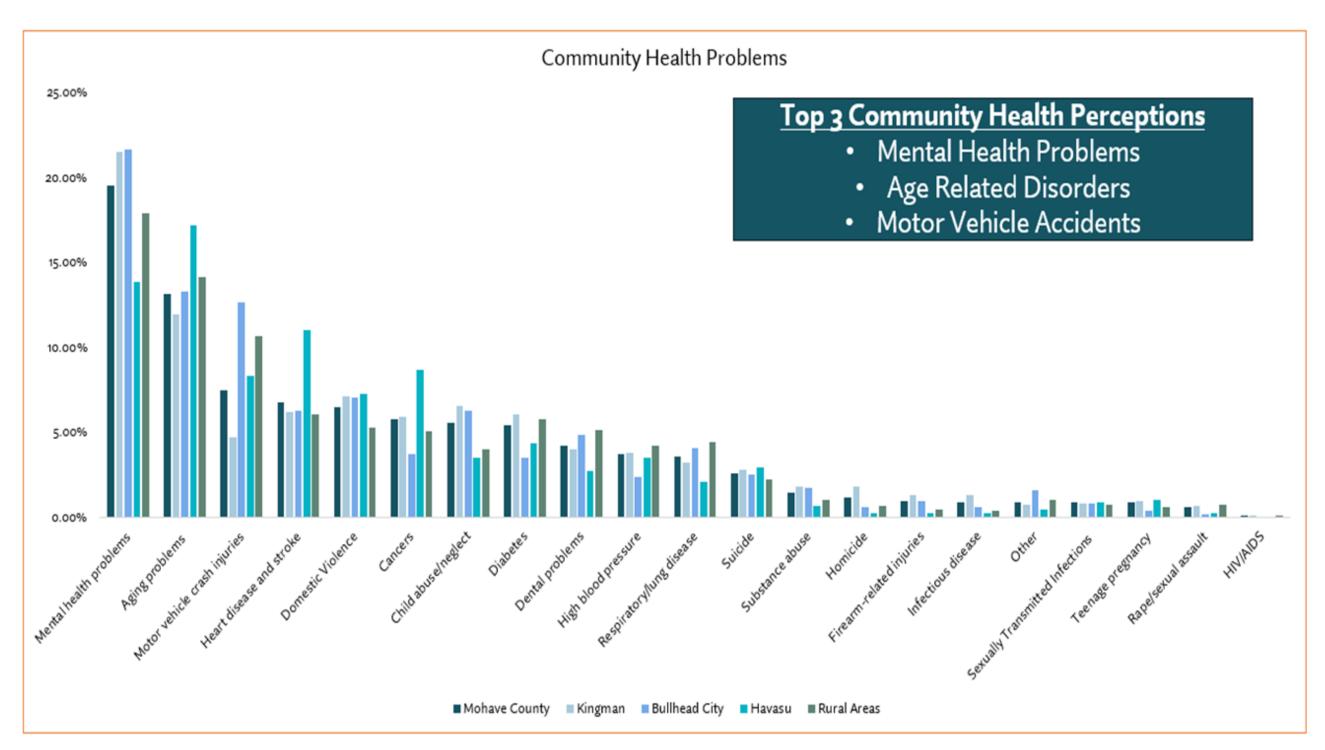


Figure 11. Perceptions of Community Health Problems among Respondents to the Live Well Mohave Community Survey 2024 by Primary Residence

Social Determinants of Health

Survey respondents were asked to identify three physical, social, and economic circumstances that they believed were most responsible for the health issues identified within their communities. The responses to this question were geared to identify social determinants of health, which act as a barrier for the residents of Mohave County when trying to live their healthiest life. The most common social barriers to health identified by the residents of Mohave County were, poverty (13.7%, 604/4422), followed by a lack of medical providers (13.5%, 598/4422), then a lack of affordable housing (12.6%, 555/4422).

These county-wide barriers were uniform for individuals with the primary residence locations of Kingman and Bullhead City, however individuals residing in Havasu and the rural parts of Mohave County identified a different order of social barriers. Respondents from Lake Havasu City identified a lack of affordable housing (21.5%, 104/483) as the primary barrier, followed by health care costs (13.5%, 65/483), then a lack of providers (13.0%, 63/483). Individuals residing in rural areas identified a lack of healthcare providers as the primary barrier (14.4%, 157/1089), followed by poverty (14.1%, 154/1089), then health care costs (10.2%, 111/1089) (Figure 12.).

To identify, which social barriers could be removed for the most impact, respondents were asked to choose the three most important factors that they believed would improve quality of life throughout their communities. The three most common responses aligned to the identified community health barriers with 18.3% (808/4422) of responses indicating a desire for more healthcare providers, 18.2% (806/4422) indicating a need for good jobs and a healthy economy, and 16.8% (742/4422) of responses indicating a need for affordable housing. The disaggregation by primary residence location can be found in **Table 21.**

	Mohave County	Kingman	Bullhead City	Havasu	Rural Are- as	Unreport- ed Loca- tion
No Response	04.64% (205/4422)	02.72% (60/2202)	02.92% (15/513)	06.21% (30/483)	07.07% (77/1089)	17.04% (23/135)
Affordable Housing	16.78% (742/4422)	16.98% (374/2202)	16.18% (83/513)	23.60% (114/483)	13.68% (149/1089)	16.30% (22/135)
Clean Environ- ment & Clean Water	03.39% (150/4422)	02.77% (61/2202)	02.53% (13/513)	02.28% (11/483)	05.51% (60/1089)	03.70% (5/135)
Good Jobs & Healthy Econo- my	18.23% (806/4422)	19.07% (420/2202)	17.93% (92/513)	17.60% (85/483)	17.81% (194/1089)	11.11% (15/135)
Good Place to Raise Children	04.27% (189/4422)	04.63% (102/2202)	05.07% (26/513)	04.55% (22/483)	03.31% (36/1089)	02.22% (3/135)
Good Schools	10.04% (444/4422)	10.54% (232/2202)	11.89% (61/513)	09.73% (47/483)	08.45% (92/1089)	08.89% (12/135)
Increased Law Enforcement	06.15% (272/4422)	06.04% (133/2202)	05.65% (29/513)	03.93% (19/483)	07.35% (80/1089)	08.15% (11/135)
Low Crime/ Safe Neighbor- hoods	07.80% (345/4422)	08.67% (191/2202)	09.16% (47/513)	06.42% (31/483)	06.43% (70/1089)	04.44% (6/135)
More diagnostic centers	01.74% (77/4422)	01.54% (34/2202)	01.36% (7/513)	01.86% (9/483)	02.11% (23/1089)	02.96% (4/135)
More healthcare pro- viders	18.27% (808/4422)	18.44% (406/2202)	18.71% (96/513)	16.36% (79/483)	18.82% (205/1089)	16.30% (22/135)
Treatment fa- cilities for chronic health conditions	07.24% (320/4422)	07.13% (157/2202)	06.82% (35/513)	06.00% (29/483)	07.99% (87/1089)	08.89% (12/135)
Other	01.45% (64/4422)	01.45% (32/2202)	01.75% (9/513)	01.45% (7/483)	01.47% (16/1089)	00.00% (0/135)

Table 21. Ratings of the Important Factors to Improve Quality of Life among Respondents to the Live Well Mohave community survey (2024) by primary residence location.

Social Determinants of Health

Survey respondents were then asked to elaborate on the social determinants of health pertaining to food security. Across Mohave County, 61.2% (902/1474) of respondents indicated that they had enough food of the kinds of food they wanted to eat, while 27.4% (404/1474) indicated having enough food but not of the kinds of food they desired to eat. Of concern though was the remaining 11.4% of respondents who indicated that they sometimes or often did not have enough food to eat.

Respondents were also questioned regarding how far they were required to travel to receive healthcare. Most (57.3%, 845/1474) respondents reported only needing to travel between zero and 10 miles. However, a smaller group (21.1%, 311/1474) reported needing to travel greater than 30 miles to receive healthcare with 11.4% (169/1474) needing to travel greater than 60 miles.

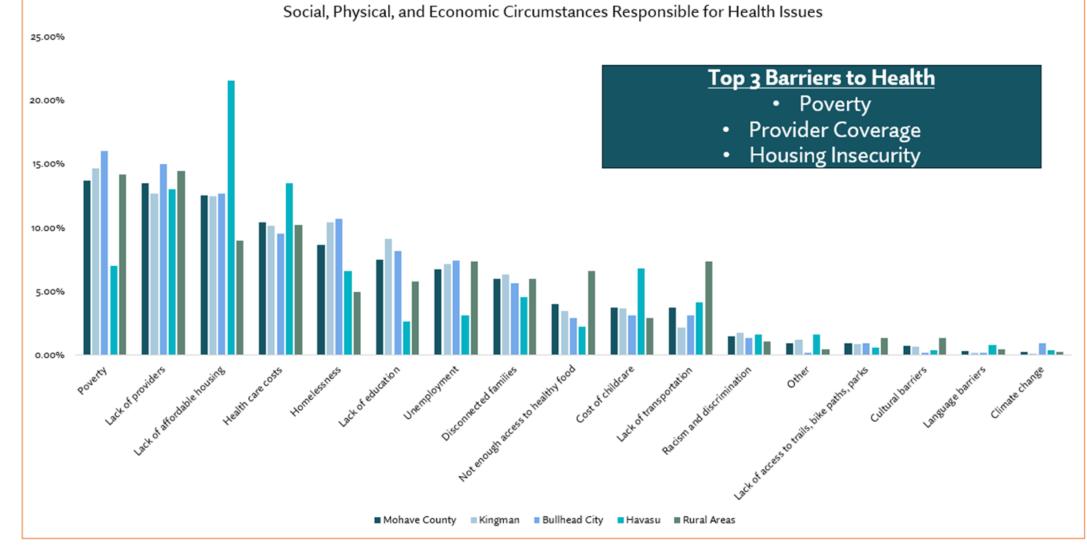


Figure 12. Social Determinants of Health as Barriers to a Healthy Life among Respondents to the Live Well Mohave Community Survey 2024









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Access to Healthcare

To establish if the residents of Mohave County struggle to access health services in a timely manner, they were asked to indicate if they were able to use different health services in their community when needed. A high number of respondents indicated an inability to access healthcare services, with the most frequent inability attributed to accessing specialist medical care (43.4%, 639/1474), followed by mental health care (33.2%, 489/1474), primary care (26.3%, 388/1474), dental care (21.2%, 313/1474), the emergency department (14.9%, 220/1474), and urgent care facilities (13.4%, 198/1474). The patterns of access were relatively stable across the respondents' primary residence locations, however the magnitude varied meaningfully with respondents from Bullhead City and the rural areas of Mohave County having a higher frequency of inaccessibility to health services.

Individuals then selected a reason to explain why the health services were inaccessible by answering the question "If you are not able to use the services of a health provider in your community when you need them, tell us why". Across Mohave County, the most common reason cited for inaccessibility of medical specialist was due to a lack of specialists (36.9%, 358/970) throughout the region. The same primary barrier of 'no services available' extended to urgent care access (47.5%, 123/259). For primary care, respondents indicated that the providers had limited availability with many of them not accepting new patients (42.9%, 327/762), holding appointments that did not fit the schedules of respondents (13.7%, 106/772), or having a wait time that participants believed were too long (10.9%, 83/762). Respondents cited an inability to financially afford utilizing dental care (31.5%, 150/476) services. Finally, most individuals who report an inaccessibility of emergency (22.0%, 60/273) and mental health (16.0%, 101/631) care attribute this to discomfort using the services. The full list of selected reasons can be found in **Table 22**.

	Specialist Medical (N = 970)	Primary Care (N = 772)	Dental Care (N = 476)	Mental Health Care (N = 631)	Emergen- cy Care (N = 273)	Urgent Care (N = 259)
None in my Area	36.9%	17.1%	14.1%	15.4%	24.2%	47.5%
	(358/970)	(132/772)	(67/476)	(97/631)	(66/273)	(123/259)
Cannot Afford it	7.5%	8.0%	31.5%	12.5%	16.1%	10.0%
	(73/970)	(62/772)	(150/476)	(79/631)	(44/273)	(26/259)
No Health Insurance	3.1%	4.0%	16.1%	4.3%	5.1%	5.4%
	(30/970)	(31/772)	(77/476)	(27/631)	(14/273)	(14/259)
Cannot Take Time off	1.3%	6.0%	3.4%	2.9%	1.5%	1.5%
Work	(13/970)	(46/772)	(16/476)	(18/631)	(4/273)	(4/259)
Not Applicable	4.6%	0.6%	2.5%	7.6%	8.1%	5.0%
	(45/970)	(5/772)	(12/476)	(48/631)	(22/273)	(13/259)
I do not feel comforta- ble using this service in my community	11.1% (108/970)	8.4% (65/772)	5.9% (28/476)	16.0% (101/631)	22.0% (60/273)	5.0% (13/259)
I do not know if this is available in my area	4.8%	1.8%	2.9%	5.5%	3.3%	6.9%
	(47/970)	(14/772)	(14/476)	(35/631)	(9/273)	(18/259)
They do not accept my health insurance	4.3%	6.1%	9.0%	13.5%	2.2%	9.3%
	(42/970)	(47/772)	(43/476)	(85/631)	(6/273)	(24/259)
Appointment times do not fit my schedule	5.8%	13.7%	5.7%	6.0%	1.1%	3.5%
	(56/970)	(106/772)	(27/476)	(38/631)	(3/273)	(9/259)
Provider is not accept-	11.8%	20.2%	5.0%	10.3%	1.1%	1.9%
ing new patients	(114/970)	(156/772)	(24/476)	(65/631)	(3/273)	(5/259)
Other	3.7%	3.2%	2.3%	4.1%	15.4%	6.2%
	(36/970)	(25/772)	(11/476)	(26/631)	(42/273)	(16/259)
Wait times are too long to get an ap- pointment	4.9% (48/970)	10.8% (83/772)	1.5% (7/476)	1.9% (12/631)	0.0% (0/273)	0.0% (0/259)

Table 22. Responses selected to describe the reasons why they were unable to access healthcare



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Most Frequently Visited Locations to Receive Health Services in Mohave County

The current services available have helped 70.6% (1041/1474) of respondents get a routine health check up in the previous year, with only 9.4% (138/1474) of respondents having gone four or more years since their last assessment by a medical provider. When in need of information, most (45.7%, 674/1474) respondents report being able to consult with a healthcare professional or receive their information from an internet search (44.4%, 655/1474). When in need of direct services, most of Mohave County's residents utilize doctor's offices (49.2%, 725/1474) (**Table 23**). To best expand the health system, respondents were asked about what three medical specialties they would like to have in the community. The most desired specialties were Cardiology (13.6%, 600/4422), Mental Health (11.6%, 511/4422), and Obstetrics and Gynecology (9.4%, 417/4422).

Most Desired Specialities

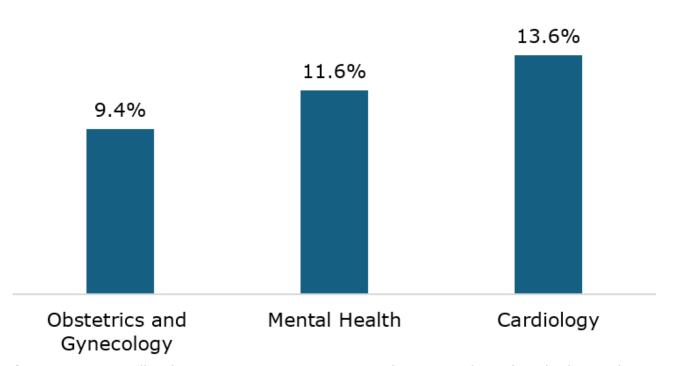


Figure 13. Live Well Mohave Community Survey respondents most desired medical specialties.

	Mohave County	Kingman	Bullhead City	Havasu	Rural Ar- eas	Unreported Location
Clinic or health center	10.65%	08.86%	08.77%	06.21%	17.08%	11.11%
	(157/1474)	(65/734)	(15/171)	(10/161)	(62/363)	(5/45)
Doctor's office	49.19%	48.91%	44.44%	63.35%	45.45%	51.11%
	(725/1474)	(359/734)	(76/171)	(102/161)	(165/363)	(23/45)
Emergency de-	04.00%	02.59%	08.19%	01.86%	06.34%	00.00%
partment	(59/1474)	(19/734)	(14/171)	(3/161)	(23/363)	(0/45)
Hospital outpatient department	01.15%	00.82%	01.17%	01.86%	01.10%	04.44%
	(17/1474)	(6/734)	(2/171)	(3/161)	(4/363)	(2/45)
I do not go to one place most often	09.09%	08.99%	12.28%	07.45%	09.09%	04.44%
	(134/1474)	(66/734)	(21/171)	(12/161)	(33/363)	(2/45)
NULL	02.71%	02.45%	01.17%	04.97%	01.65%	13.33%
	(40/1474)	(18/734)	(2/171)	(8/161)	(6/363)	(6/45)
Other	00.75%	00.82%	01.17%	00.00%	00.83%	00.00%
	(11/1474)	(6/734)	(2/171)	(0/161)	(3/363)	(0/45)
Telehealth	01.83%	03.27%	01.17%	00.62%	00.00%	00.00%
	(27/1474)	(24/734)	(2/171)	(1/161)	(0/363)	(0/45)
Urgent Care	20.62%	23.30%	21.64%	13.66%	18.46%	15.56%
	(304/1474)	(171/734)	(37/171)	(22/161)	(67/363)	(7/45)

Table 23. Ratings of the Important Factors to Improve Quality of Life among Respondents to the Live Well Mohave community survey (2024) by primary residence location.



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INTERVIEWS WITH KEY INFORMANTS

Interview Information

total of 44 key informants representing different sectors of Mohave County expressed interest in a semi-structured interview to be conducted by a member of the 2025 CHNA team between January 01, 2024, and January 31, 2024. These informants included officials from city and county government, healthcare providers, mental health providers, and leaders from



local businesses, charitable organizations, educational institutions, community service organizations, and faith-based organizations. Each interview was conducted in-private and scheduled at the convenience of the interviewee. Individuals providing an interview were assured of their anonymity.

The interview consisted of seven questions aimed to probe the interviewee on their views about the health status of Mohave County (Appendix 3). Individuals were asked to define healthy communities, discuss the most important health issues in Mohave County, talk about social determinants of health, identify barriers to health in Mohave County, and reflect on the most vulnerable populations which may benefit from targeted health interventions. Interviewees were permitted an open response period after the questions to provide additional insight to the interviewer. Each interview lasted approximately 30 minutes.



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All interviews were audio recorded with permission from the interviewee then transcribed into text. A content analysis was then conducted by grouping content into words, concepts, and themes to identify patterns present in the text. The analysis was conducted by an individual trained in qualitative analysis and supervised by the CHNA workgroup.

COMMUNITY FOCUS GROUPS

Focus Group Information

Seven community focus group discussions took place across Mohave County between June 1, 2024, and August 31, 2024. The purpose of the focus groups was to gain a deeper understanding of Mohave County residents' perceptions of the factors that affect their health and well-being.

Focus groups were held in Lake Havasu City, Bullhead City, Kingman, Dolan Springs, White Hills, Topock, and Colorado City. Focus groups contained six to 23 participants per session, for a total sample size of 83 (n=83). Participants were recruited through newspaper articles, local newsletters, social media, and flyers distributed within each city at local hot-spots, libraries, and on the MCDPH mobile unit. The focus group discussions lasted approximately two hours.

To protect the identities of focus group participants, the findings have been compiled and are reported collectively. Categories were derived based on concepts from interview questions and included general community assets and challenges related to health, personal health worries, access to health-care services, health equity perceptions, and lived experiences. Discussions were primarily analyzed to find shared perceptions and experiences throughout the county. The emerging themes discussed within the focus groups are reported as part of the data collection for this needs assessment.



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Key Informant Participation

The CHNA work group emailed 204 Mohave County residents employed in the sectors indicated in **Table 24**, to gauge their interest in providing a key informant interview to the Live Well Mohave team. The email contained a link to an online survey, to which 21.6% (44/204) responded agreeing to participate in the key informant interview. Of these individuals, 84% (37/44) were scheduled and interviewed **(Table 25).**

Types of Groups and Organizations Represented by Key Informants				
City Government	Faith-Based Organizations			
County Government	Healthcare			
Charitable Organizations	Local Businesses			
Community Service Organizations	Mental Health			
Educational Institutions	The Public			

 Table 24. Key Informant Participation by Organization



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Online Survey and In-person Interview Response Rates				
Key Informant Online Survey	22% (44/204)			
Key Informant In-Person Interviews	84% (37/44)			

Table 25. Key Informant Survey and Interview Response Rates

Most Vulnerable Populations

Key informants were asked to identify "which individuals or groups are the most vulnerable" in their community in regard to health issues. Across informants, a total of 59 mentions of groups were made, describing 11 unique population categories. The most commonly mentioned vulnerable groups were seniors (30.5%, 18/59), youth and teens (15.3%, 9/59), and the homeless (11.9%, 7/59). The remainder of the responses are illustrated in Figure 14.

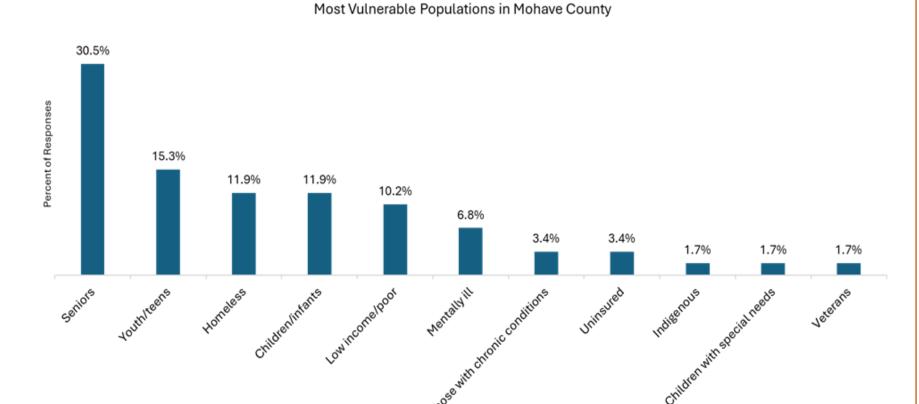


Figure 14. The most vulnerable populations in Mohave County as identified through Key Informant interviews following thematic grouping and analysis.

Most Important Health Issues

Key informants were asked to identify the "Most Important Health Issues" in the communities they served. They mentioned a total of 117 health issues, grouping into 15 unique categories in the informants' responses; the most common were: mental health issues (15.4%, 18/117), substance use disorders (12.0%, 14/117), and poverty/homelessness (9.4%, 11/117). The remainder of the responses were identified as indices for the categories illustrated in **Figure 15.**

Most Important Health Issues in Mohave County

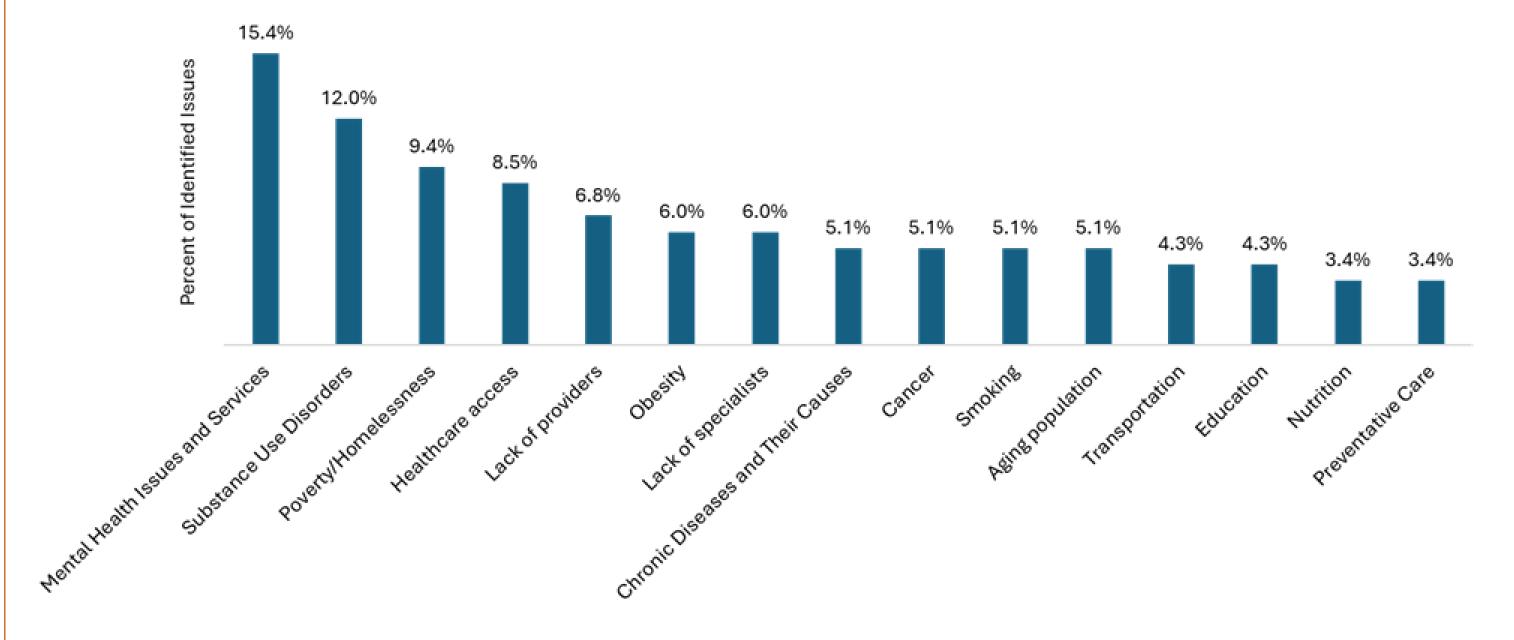
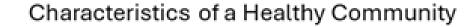


Figure 15. The most important health issues in Mohave County as identified through Key Informant interviews following thematic grouping and analysis.

Characteristics of a Healthy Community

Key informants were asked to define characteristics of a healthy community. They mentioned 79 characteristics during the interviews, with the most common referring to the strength of the healthcare system (31.6%, 25/79), the availability of outdoor areas for exercise and recreation (26.6%, 21/79), and opportunities for social engagement (21.5%, 17/79). The remainder of the categories identified as characteristics of a healthy community are shown in **Figure 16.**



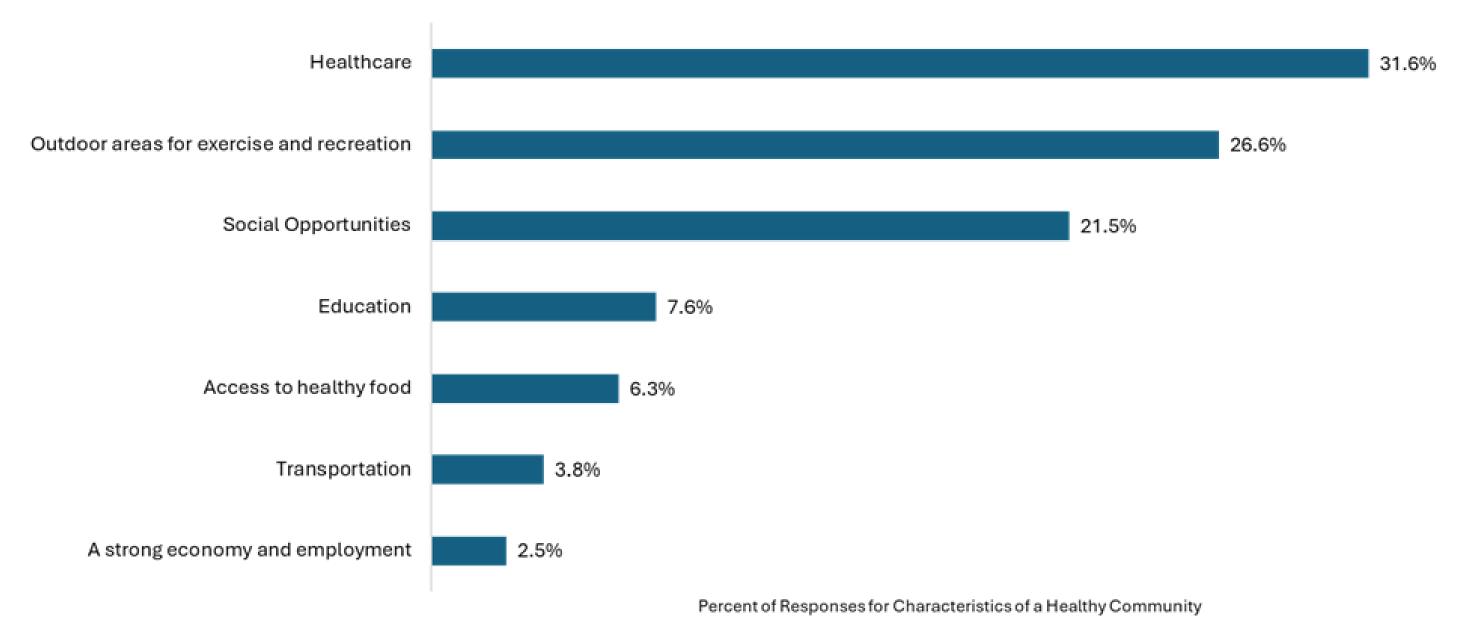


Figure 16. Characteristics of a healthy community as identified through Key Informant interviews following thematic grouping and analysis.

Social Determinants of Health

Key Informants were asked to identify which, if any, social determinants of health they believed were important issues throughout their communities. Interviewees made 145 references to social determinants of health across their responses, with the top three mentioned being economic stability (23.5%, 34/145), the strength of the neighborhood and physical environment (22.1%, 32/145), and the strength of the healthcare system (18.6%, 27/145). The remaining percent of responses can be viewed in **Figure 17**.

Most Important Social Determinants of Health in Mohave County

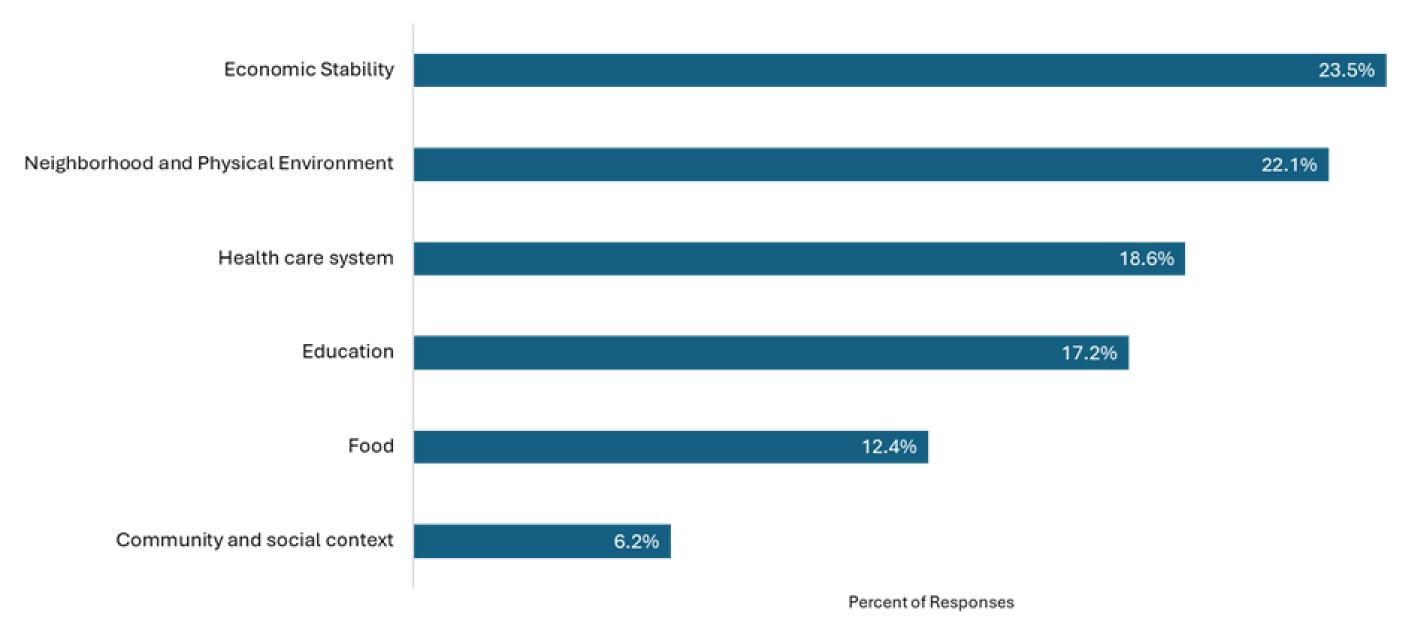


Figure 17. Most important Social Determinants of Health as identified through Key Informant interviews following thematic grouping and analysis.

Barriers to Having a Healthy Community

Key informants were asked to identify any barriers to having a healthy community they believe existed throughout Mohave County. Interviewees made 146 mentions of barriers present throughout the region. The most frequently mentioned theme was the infrastructure, community design, or available resources throughout the region (23.3%, 34/146). The second most common response was the strength of the healthcare system (15.8%, 23/146). The third most common response was the strength of the education system (12.3%, 18/146). The remaining responses are shown in **Figure 18**.

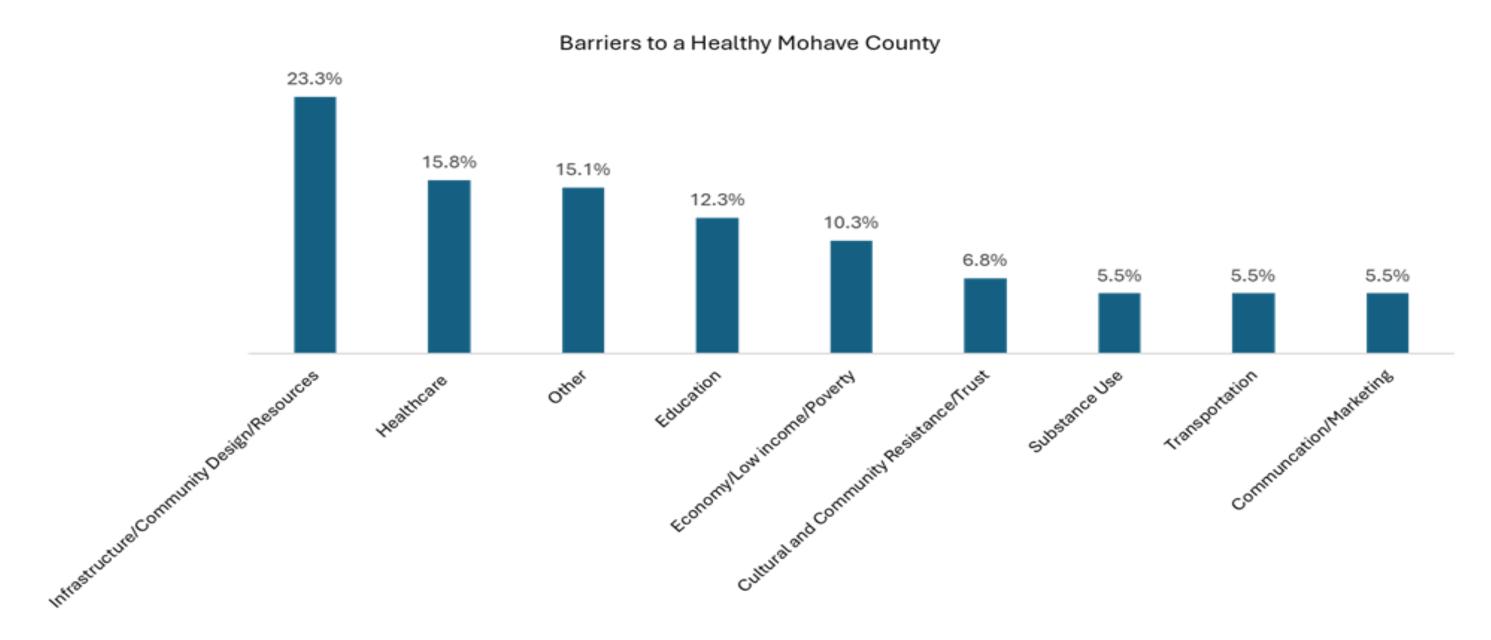


Figure 18. Barriers to Having a Healthy Mohave County as identified through Key Informant interviews following thematic grouping and analysis.

Focus Group Participation

Table 26 contains a listing of Mohave County community resident groups that contributed input to the Community Health Needs Assessment. The table describes the location of the focus group, the total number of participants, and demographic information for focus group members.

City	Location	Number of Par- ticipants	Demographic Information
Bullhead City	Mohave County Public Li- brary	12	Community members of Bullhead City; education; media; peace officers; so- cial work
Colorado City	Cherish Families Building	7	Community members of Colorado City; healthcare professionals; social ser- vices
Dolan Springs	Dolan Springs Community Center	7	Community members of Dolan Springs; volunteers
Kingman	Mohave County Main Cam- pus	23	Community members of Kingman; be- havioral health; medically related fields; social services
Lake Havasu City	The Views Senior Center	21	Community members of Lake Havasu City; government; seniors; social ser- vices
Topock - Golden Shores	Mohave County Senior Center	6	Community members of Topock and Golden Shores; retirees
White Hills	White Hills Community Center	7	Community members of White Hills; retirees; working professionals

Table 26. Focus Group Participation by Location

Focus Group Themes

This section summarizes key themes provided by participants around the three major areas of inquiry explored (Healthy Community Design, Access to Care, and Equity). The findings summarized below are combined across all focus groups.



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Healthy Community Design—General Community

Participants were able to identify many strengths and resources they valued in their communities. When asked what their community offers that makes it easier to stay healthy, responses were most commonly related to:

- Access to Community Programs and Services
- Outdoor Recreation
- Social Connections and Sense of Community

Community members noted that access to spaces for activities and events was important (especially for youth and seniors). They highlighted spaces like colleges, community centers, churches, dance facilities, gyms, and senior centers. Regarding services, participants remarked on the importance of convenient and available community resources. These included: an aquatic center, community health fairs, farmers markets, fresh vegetable and farm stands, health clinics, libraries, the mobile health unit, mobile labs, and public transportation.

Residents treasure their beautiful scenery and nature and love to access it as a way to stay healthy. They emphasized spaces like bike paths, lakes, parks, splash pads, trails systems, and walking trails. They also highlighted organized outdoor activities such as a community running club, hiking groups, and organized sports.

Specific people and organizations were seen as community assets as well. The participants expressed a deep sense of pride in their local communities and a strong commitment to engaging with them. They wished for more individuals to volunteer to help sustain community events and activities. Specific organizations mentioned included the Clothes Closet, Community Health Foundation, First Friday organizers, Mohave County Library system, MCDPH mobile health unit, St. Mary's Food Bank, and support groups such as Narcotics Anonymous (NA) and Alcoholics Anonymous (AA).

General Community Design Challenges and Concerns

Focus groups were asked to identify what is missing in the community that makes it harder to be healthy. Participants noted challenges, issues, and unmet needs that fell into the following categories:

- Environmental Safety
- Healthcare Access, Quality, and Cost
- Healthy Food Options and Nutritional Education
- Limited Recreational Opportunities for Youth
- Social Support and Isolation
- Transportation and Geographical Isolation

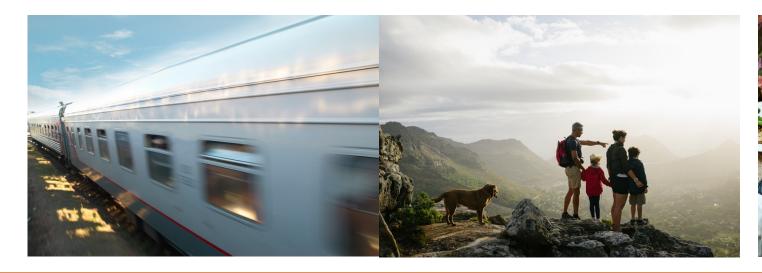
Residents expressed concern over environmental factors such as the heat, floods, monsoons — and in two rural areas, concerns of wild animals (coyotes, dogs) created a deterrence to partaking in healthy outdoor activities.

Related to health, participants felt their communities had a lack of access to dental, medical, pediatric, and specialty care. The range of needs include: elder care, home health, hospital discharge planning, medication delivery, obstetrician-gynecologists, palliative care, preventative care, telehealth, and treatment facilities. Many shared difficulties with scheduling medical appointments, providers that do not accept their insurance, and inconvenience of making a lengthy drive to the closest city with medical facilities.

Participants also wanted access to healthier food and nutrition information. Some highlighted the overabundance of fast-food options and the lack of access to affordable, nutritious food. Several participants shared that they used to buy fresh produce at the 99 Cents Only store, but its closure created a barrier to accessing affordable healthy options. Residents expressed a desire to learn and receive nutrition education—particularly recipes from food bank staples and how to maintain health through nutrition rather than medical care only.

Residents also worried about early childhood education and youth activities, citing a need for more space at Boys and Girls clubs, childcare centers, recreation centers, gyms with exercise programs for all ages, splash pads, and the general lack of youth-friendly spaces for young people to engage with their peers and communities.

Also discussed was the need for evening and weekend activities for working adults. There were common concerns noted across the focus groups centered around the lack of access to information and education, available community resources, and participation in community planning and events. Participants noted a need for greater access to affordable transportation and suggested telehealth to assist residents in accessing healthcare. These issues were particularly relevant for those who have to travel long distances for service or have difficulty driving (elderly, disabled, homebound).





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Resiliency

Community members were asked what worries them most about their health. Concerns mainly fell within the general theme areas of:

- Aging
- Environmental Safety
- Healthcare Access, Quality, and Cost
- Insurance Cost, Coverage, and Education

Personal health concerns centered around aging, anxiety, high blood pressure, inactivity, sleep quality, stress, and weight management.

Residents were concerned about disruptive environmental factors such as the heat, floods, monsoons, wild animals (coyotes, dogs), and youth riding motor-bikes.

Access to healthcare emerged as a recurrent issue. Participants expressed concerns over the availability of local medical services, particularly when it came to specialists. They also worried that we are overloading our urgent care and emergency rooms due to long wait times for doctors. Attendees encountered hurdles in accessing available healthcare services due to insurance, cost, and environmental barriers. Once in the healthcare setting, participants feared being misdiagnosed, receiving the wrong medications or over-medicating, or receiving what they felt was a "no-service" visit.

Participants noted opportunities for education around diagnoses, healthy food choices, insurance coverage, and medication. A few examples included educating the public on services covered by telehealth or urgent care, as knowing the differences would help save them money, stress, and time.



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Social Cohesion

Focus groups were asked whether they felt a lack of connection and meaningful relationships. Responses were well-balanced, some participants said they were lonely sometimes, some hardly ever, while others felt lonely quite often. Some noted that they did not have time or opportunity to feel lonely. There was discussion about how living in a rural area highlighted feelings of isolation, but moving is not an option due to rising housing and living costs. They were most concerned about the effects of social isolation on:

- ◆ Elderly
- Geographically Isolated
- Newcomers



Access to Care—General, Specialty, & Mental Health Services

General themes arose regarding how participants access healthcare services. Residents stated that they get healthcare information online, through healthcare professionals, or via telehealth. Aspects that make accessing healthcare easier or harder fell into the categories of:

- High Provider Turnover, Provider Availability
- Insurance
- Patient-Provider Communication
- Transportation and Geographic Isolation

Provider availability was a recurrent topic. For non-urgent health needs and regular check-ups, some participants described easy access and low-cost services to residents. Others delayed or missed their appointments, while some opted for the emergency room or urgent care due to long wait times. Also not having consistent medical providers is a point of contention and residents are frustrated because they are constantly starting over with someone new. Every focus group described challenges to accessing specialty care. Travel seems to be the norm for anyone needing specialty care, with respondents often traveling out of Mohave County (Flagstaff; Phoenix; Prescott) or out-of-state (Las Vegas, NV; St. George, UT). Others omitted specialty medical care if they could not get their needs met nearby.

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Eligibility restrictions, insurance barriers, and costly co-pay charges were also cited. Residents in each city bordering a state line expressed frustrations and barriers with the providers that are closest to them as they are out-of-state providers and therefore do not accept Arizona state aid causing disparities amongst those who are required to travel greater distances to remain within network for state insurance.

Participants wanted better communication and greater coordination across providers. They expressed concerns about not having sufficient time during appointments with their healthcare providers and being told by the doctors that they can choose two items to discuss before they are hurried out the door.

When it comes to behavioral health, the responses were quite different. With limited or nonexistent offices in some areas, participants reach out to an expanding variety of behavioral health options. Resources mentioned included 9-8-8, Cherish Families, Creek Valley, crisis hotlines, employee assistance lines, Encompass, Mohave Mental Health, and Southwest Behavioral Health. Many people rely on friends, family, pastors, programs through work, social spaces such as bars and community centers, support groups, or telehealth.

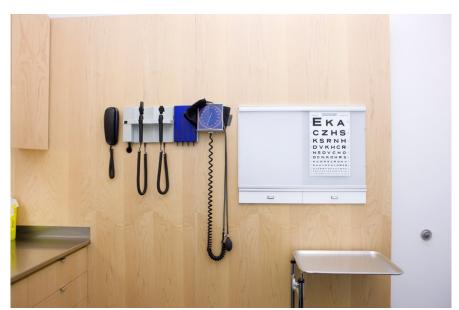


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Insurance

AHCCCS, particularly Health Choice Arizona, was the most common insurance discussed. When asked about insurance coverage and what makes it easier or harder to utilize health care services and coverage available under their plan, responses were most commonly related to:

- Education and Navigation
- High Premiums and Copays
- Provider Does Not Accept My Insurance

Participants see an educational opportunity for understanding and navigating insurance policies. With coverage options constantly changing and all of the "red tape," residents are struggling to understand their options.

Insurance was described as a "double-edged sword" and as both a hinderance and a benefit. Some residents remarked that they had fantastic coverage and could use it anywhere. Insurance could also be a barrier due to high premiums and co-pays. Participants expressed frustration with finding providers that accepted their insurance, appointment availability, and scheduling around work hours. Some go without medical care or prefer to go to urgent care over a general practitioner due to insurance barriers and wait times.



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Equity

Who Is Not Thriving?

When asked who in the community might not want to, or not be able to use community resources, residents were concerned about people who (are):

Disabled

Distrustful of Government

Elderly

Homebound

Homeless, Unhoused

Lack Internet, Phone Services

Lack Transportation

Living with Mental Illness

Reentering Society After Incarceration

Youth



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Health System Perceptions and Understanding

One goal of these listening sessions was to determine what individuals want their healthcare providers and organizations to understand to better support their health needs. Participants told numerous stories relating to their experiences with the healthcare system. Almost all focus groups highlighted the necessity to improve patient-provider relationships, citing lack of shared decision making, negative experiences or fears, and need for better communication and greater coordination across providers. Participants provided suggestions, hopes, and ideas that fell into the following categories:

- Fostering Empathy and Compassion
- Education and Navigation Opportunities

Focus group participants wish healthcare providers and organizations knew how difficult it is to get to the appointments. They noted feeling frustrated, overlooked, shamed, undermined, and treated as though they're "on a conveyor belt, constantly being pushed down the line." Participants consistently emphasized the need for increased empathy and understanding from medical professionals.

Many expressed desires for educational opportunities, increased health literacy, and health-related resources. Topics include medication, mental health, nutrition and healthy food options, reproductive health, sexually transmitted diseases and infections, substance use, women's health, and navigating the healthcare system. It was also proposed that healthcare professionals embrace training in areas like bias awareness, handling substance use issues, and stigma reduction.



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Focus Group Priorities

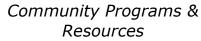
Table 27 reviews the top three health concerns from the community focus groups. Factors most consistently selected as vital priorities based on severity, feasibility, potential impact, and equity were related to:

- Community Programs & Resources
- Education
- Healthcare Access

Location	Top 3 Health Related Concerns			
Bullhead City	Insurance Barrier Re- moval	Nutrition and Educa- tion Support	Pediatric Care	
Colorado City	Recreation Centers	School Based Behav- ioral Health	Specialty Healthcare Services	
Dolan Springs	Community Engage- ment	Community Services	Transportation	
Kingman Juvenile Services		KRMC Link to Local Resources	Medical Navigation Services	
Lake Havasu City	Lake Havasu City County Wide Medical Coalition		Stigma Training	
Topock, Golden Shores	Nutrition Education and Foodbank Recipes	Resource Information	Rideshare Programs	
White Hills	Internet	Meals on Wheels	Transportation	

Table 27. Focus Group Priorities by Location







Education



Healthcare Access

o best estimate the burden of disease impacting the residents of Mohave County, KRMC collected a sample of healthcare diagnostic data. The sample consisted of 1,346,084 unique presentations to KRMC for medical care from January 1, 2022 through December 31, 2024.

To minimize the chance of patient identification, the data was de-identified by the KRMC Office of Research and Sponsored Programs before delivery to the commu-

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nity health needs assessment team. The data set consisted of point of entry to the healthcare facility (e.g. emergency department, primary care office), patient residence, patient demographics, service date and time, discharge location, and admission diagnosis. Analysis of this data consisted of reporting the frequency of diagnostic categories by the International Classification of Diseases, 10th Revi-

sion codes (ICD-10) endorsed by the World Health Organization.

For simplicity, this assessment reports the frequency of diagnosis by classification (e.g., Musculoskeletal, Respiratory, Endocrine) for individuals broken down by

year.



Secondary Sources of Data

This report utilizes multiple secondary sources of information that come from various governmental and non-profit agencies. The sources provide large-scale quantitative data representative of the county or region. These sources include:

- Arizona Department of Health Services (ADHS), Social Vulnerability Index (SVI). Data from 2024.
- ADHS, Population Health and Vital Statistics. Data from 2023.
- Arizona Department of Public Safety (AZDPS), Arizona Crime Statistics, Crime Overview Mohave County. Data from 2024.
- Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR) SVI. Data from 2024.
- University of Wisconsin Population Health Institute, County Health Rankings & Roadmaps 2024. Data from 2019-2023.
- U.S. Census Bureau, American Community Survey (ACS), 1-Year Estimates. Data from 2023.
- U.S. Census Bureau, ACS, 3-Year Estimates. Data from 2011-2013.
- U.S. Census Bureau, ACS, 5-Year Estimates. Data from 2017-2023.



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Leading Causes of Death

The annual mortality burden for Mohave County is defined from death certificate data provided to the National Center for Health Statistics National Vital Statistics System. These statistics provide an annual estimate of the leading causes of death within restricted geographic populations. The most recent reliable data for Mohave County was published in the Arizona Health Status and Vital Statistics Report of 2022. The information below describes the major causes of death among residents of Mohave County compared against the State of Arizona.

The most common causes of death in Mohave County were: cardiovascular disease, cancers (malignant neoplasms), and accidents through unintentional injuries. Deaths in Mohave County were more likely to occur due to cardiovascular diseases, chronic lower respiratory diseases, and intentional self-harm than the general Arizona population. Residents of the area were, however, less likely to expire due to diabetes and essential hypertension (Table 28). When comparing the rates of death between men and women, the largest disparities were among diseases of the heart, chronic lower respiratory disease, cerebrovascular disease, accidental injuries, and Alzheimer's disease.

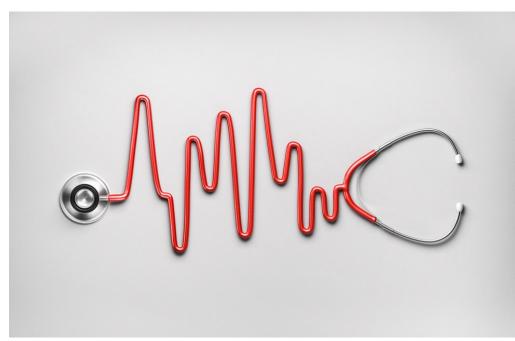


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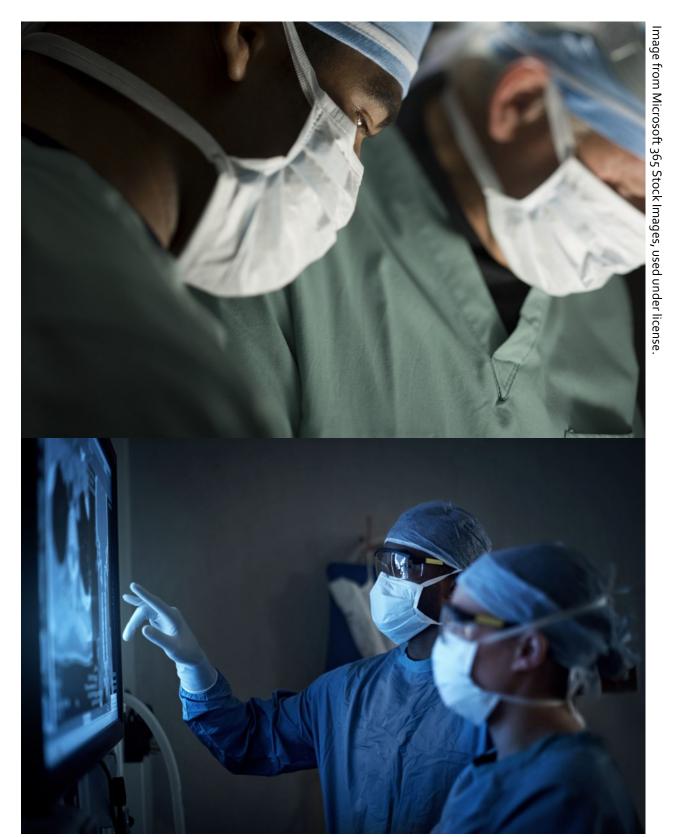


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Leading Causes of Death

	Arizona Caus- es of Death (Percent of All Causes)	Mohave County Causes of Death (Percent of All Causes)	Mohave County Males Causes of Death (Percent of All Causes)	Mohave County Fe- males Causes of Death (Percent of All Causes)
Total, All Causes	784.3	994.9	1,187.0	800.0
Cardiovascular Dis-	199.7	265.5	315.2	217.0
ease	(25.5%)	(26.7%)	(26.6%)	(27.1%)
Diseases of Heart	148.2	208.0	263.6	154.2
	(18.9%)	(20.9%)	(22.2%)	(19.3%)
Coronary Heart Dis-	103.9	159.5	205.8	114.9
ease	(13.2%)	(16.0%)	(17.3%)	(14.4%)
Malignant Neoplasms	133.1	168.1	203.0	134.1
	(17.0%)	(16.9%)	(17.1%)	(16.8%)
Lung Cancer	24.3	39.1	41.6	36.6
	(3.1%)	(3.9%)	(3.5%)	(4.6%)
Colorectal Cancer	12.6	14.8	17.8	11.8
	(1.6%)	(1.5%)	(1.5%)	(1.5%)
Breast Cancer	10.1	11.6	0.0	22.7
	(1.3%)	(1.2%)	(0.0%)	(2.8%)
Prostate Cancer	7.5	10.1	20.7	0.0
	(1.0%)	(1.0%)	(1.7%)	(0.0%)
Skin Cancer	2.2	2.4	3.9	1.0
	(0.3%)	(0.2%)	(0.3%)	(0.1%)
Cervical Cancer	1.2	0.2	0.0	0.5
	(0.2%)	(<0.1%)	(0.0%)	(0.1%)
Accident (Unintentional Inju- ry)	74.8 (9.5%)	94.0 (9.4%)	122.9 (10.4%)	63.6 (8.0%)
Accidental Poisoning	35.6	33.3	39.5	26.1
	(4.5%)	(3.3%)	(3.3%)	(3.3%)
Motor Vehicle Acci-	17.5	23.5	29.8	17.1
dent	(2.2%)	(2.4%)	(2.5%)	(2.1%)
Accidental Fall	12.0	9.2	10.5	7.7
	(1.5%)	(1.5%)	(0.9%)	(1.0%)
Accidental Drowning	1.7	4.4	7.4	1.2
	(0.2%)	(0.4%)	(0.6%)	(0.2%)
COVID-19	47.5	62.2	76.0	49.1
	(6.1%)	(6.3%)	(6.4%)	(6.1%)
Chronic Lower Res-	35.3	57.0	52.2	61.5
piratory Disease	(4.5%)	(5.7%)	(4.4%)	(7.7%)
Cerebrovascular Dis-	34.5	42.9	36.9	48.7
ease	(4.4%)	(4.3%)	(3.1%)	(6.1%)

	Arizona Caus- es of Death (Percent of All Causes)	Mohave County Causes of Death (Percent of All Causes)	Mohave County Males Causes of Death (Percent of All Causes)	Mohave County Fe- males Causes of Death (Percent of All Causes)
Alzheimer's Disease	28.5	32.4	22.8	41.2
	(3.6%)	(3.3%)	(1.9%)	(5.2%)
Diabetes	25.1	18.5	27.3	9.7
	(3.2%)	(1.9%)	(2.3%)	(1.2%)
Intentional Self-harm (Suicide)	20.5	51.4	84.7	15.8
	(2.6%)	(5.2%)	(7.1%)	(2.0%)
Chronic Liver Disease and Cirrhosis	17.4	29.2	37.5	20.9
	(2.2%)	(2.9%)	(3.2%)	(2.6%)
Essential Hyperten- sion and Hyperten- sive Renal Disease	11.3 (1.4%)	8.4 (0.8%)	7.2 (0.6%)	9.4 (1.2%)
Influenza and Pneu-	10.0	12.1	16.6	7.6
monia	(1.3%)	(1.2%)	(1.4%)	(1.0%)
Parkinson's Disease	10.0	6.7	9.4	4.0
	(1.3%)	(0.7%)	(0.8%)	(0.5%)
Assault (Homicide)	9.0	10.2	17.9	2.1
	(1.1%)	(1.0%)	(1.5%)	(0.3%)
Nephritis	8.5	13.8	11.4	16.1
	(1.1%)	(1.4%)	(1.0%)	(2.0%)
Septicemia	5.5	4.9	6.7	3.0
	(0.7%)	(0.5%)	(0.6%)	(0.4%)

Table 28. Age-Adjusted Mortality Rates for Leading Causes of Mortality. (Source: ADHS Health Status and Vital Statistics 2022).



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Healthcare Diagnostic Data

Kingman Regional Medical Center saw a 7.7% increase in the number of visits to its facilities for healthcare services from 435,150 visits during 2022 to 468,845 visits during 2024. To identify the primary health conditions requiring healthcare intervention, each visit is affiliated with a diagnostic code using the International Classification of Diseases, Tenth Revision (ICD-10). Throughout 2024, the two most common reasons individuals integrated with KRMC's healthcare facilities were:

- ◆ Symptoms, Signs, and Abnormal Clinical Laboratory Findings, Not Elsewhere Classified (18.9%, 88,726/468,845)
- Factors Influencing Health Status and Contact with Health Services (15.1%, 70,985/468,845)

These visits are made up of cases where no formal diagnosis can be determined, the patient is receiving standard interventions for laboratory testing and diagnostic assays, or the root cause of the visit is due to a patient's socioeconomic status. Among individuals with a clear diagnosis at the time of or resulting from their visit, the most common reasons individuals integrated with the healthcare system were diseases of the:

- Musculoskeletal system and connective tissue (14.8%, 69,352/468,845)
- Endocrine, nutritional, and metabolic diseases (9.2%, 42,946/468,845)
- Diseases of the circulatory system (7.3%, 34,253/468,845)
- Diseases of the respiratory system (5.4%, 25,061/468,845)







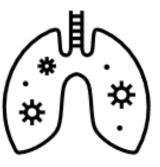




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Healthcare Diagnostic Data

	2022	2022	2024
	2022 (N = 435,150)	2023 (N = 442,089)	2024 (N = 468,845)
A00 – B99 Certain Infectious and Parasitic Diseases	1.1% (4,632/435,150)	1.3% (5,738/442,089)	0.8% (3,767/468,845)
C00 - D49 Neoplasms	3.2% (13,917/435,150)	3.9% (16,941/442,089)	4.3% (19,959/468,845)
D50 – D89 Diseases of the Blood and Blood -Forming Organs	1.5% (6,605/435,150)	1.8% (7,849/442,089)	1.7% (8,044/468,845)
E00 – E89 Endocrine, Nutritional and Meta- bolic Diseases	7.7% (33,391/435,150)	8.6% (37,824/442,089)	9.2% (42,946/468,845)
F01 - F99 Mental, Behavioral and Neuro- developmental Disorders	2.0% (8,675/435,150)	2.0% (9,004/442,089)	1.9% (8,711/468,845)
G00 - G99 Diseases of the Nervous System	4.8% (20,865/435,150)	4.2% (18,556/442,089)	4.0% (18,722/468,845)
H00 - H59 Diseases of the Eye and Adnexa	0.5% (1,947/435,150)	0.5% (2,014/442,089)	0.4% (1,949/468,845)
H60 - H95 Diseases of the Ear and Mastoid Process	1.2% (5,035/435,150)	1.0% (4,220/442,089)	0.9% (4,037/468,845)
I00 – I99 Diseases of the Circulatory Sys- tem	7.8% (34,065/435,150)	7.2% (31,949/442,089)	7.3% (34,253/468,845)
J00 – J99 Disease of the Respiratory Sys- tem	6.0% (26,155/435,150)	5.8% (25,793/442,089)	5.4% (25,061/468,845)
K00 - K95 Diseases of the Digestive Sys- tem	3.7% (16,232/435,150)	4.0% (17,525/442,089)	4.6% (21,688/468,845)
L00 – L99 Diseases of the Skin and Subcu- taneous Tissue	1.2% (5,395/435,150)	1.4% (6,097/442,089)	1.5% (6,833/468,845)

	2022 (N = 435 150)	2023 (N = 442.080)	2024 (N = 468.84E)
M00 M00	(N = 435,150)	(N = 442,089)	(N = 468,845)
M00 – M99 Diseases of the Musculoskele- tal System and Connective Tissue	14.9% (64,763/435,150)	14.5% (64,140/442,089)	14.8% (69,352/468,845)
N00 - N99 Diseases of the Genitourinary System	4.5% (19,746/435,150)	4.5% (19,652/442,089)	4.0% (18,719/468,845)
O00-O9A Pregnancy, Childbirth, and the Puerperium	0.6% (2,738/435,150)	0.8% (3,400/442,089)	1.0% (4,436/468,845)
P00 – P96 Certain Conditions Originat- ing in the Perinatal Period	0.1% (360/435,150)	0.1% (339/442,089)	0.1% (289/468,845)
Q00 – Q99 Congenital Malformations, Deformations, and Chromoso- mal Abnormalities	0.1% (396/435,150)	0.1% (402/442,089)	0.1% (418/468,845)
R00 – R99 Symptoms, Signs, and Abnor- mal Clinical Laboratory Find- ings, Not Elsewhere Classified	18.9% (82,226/435,150)	19.5% (85,988/442,089)	18.9% (88,726/468,845)
S00 – T88 Injury, Poisoning, and Certain other Consequences of Exter- nal Causes	4.1% (17,994/435,150)	4.0% (17,645/442,089)	4.0% (18,808/468,845)
U00 – U85 Codes for Special Purposes	0.6% (2,796/435,150)	0.1% (622/442,089)	0.1% (398/468,845)
V00 - Y99 External Causes of Morbidity	0.1% (537/435,150)	0.2% (742/442,089)	0.2% (744/468,845)
Z00 – Z99 Factors Influencing Health Status and Contact with Health Services	15.3% (66,680/435,150)	14.9% (65,649/442,089)	15.1% (70,985/468,845)

Table 29. Healthcare Utilization Diagnostic Data. Diagnostic ICD-10 codes use frequency over the prior three years.

PRIMARY AND CHRONIC DISEASE NEEDS AND OTHER HEALTH ISSUES

Health Issues of Uninsured Persons

To gain insight into the health concerns of individuals with limited resources throughout Mohave County, we investigated the diagnostic frequency of individuals with differing insurance types who used health services at Kingman Regional Medical Center (Table 30). Out of a sample of 481,863 presentations for health services to KRMC, only 2.7% (12,907/481,863) were from individuals without documented health insurance. This indicates an under-utilization of health services among individuals without insurance. Among those with no insurance, the greatest increase in the frequency of healthcare utilization were for the diagnostic categories of symptoms, signs, and abnormal clinical laboratory findings not elsewhere classified (4.83% increase, 24.5% vs 19.7%), injury, poisoning, and certain other consequences of external causes (3.18% increase, 7.7% vs 4.5%), and diseases of the respiratory system (2.76% increase, 9.2% vs, 6.4%). Inversely, individuals without health insurance were less likely to utilize healthcare services for: diseases of the musculoskeletal system and connective tissue (4.92% decrease, 9.0% vs 13.9%); endocrine, nutritional, and metabolic diseases (4.36% decrease, 3.0% vs 7.4%); and diseases of the nervous system (2.85% decrease, 0.8% vs 3.7%).



Table 30. Healthcare Utilization Diagnostic Data. Diagnostic ICD-10 nsurance classification.

	Medicare/	No Insurance	Private Insurance
	Medicaid	(N = 12,907)	(N = 265,161)
	(N = 203,768)		
A00 - B99	0.65%	1.13%	0.89%
Certain Infectious and Parasitic Diseases	(1327/203,768)	(146/12,907)	(2,367/265,161)
C00 - D49	5.67%	1.05%	3.16%
Neoplasms	(11,560/203,768)	(135/12,907)	(8,391/265,161)
D50 – D89 Diseases of the Blood and Blood-Forming Organs	1.89%	0.57%	1.56%
	(3.856/203,768)	(73/12,907)	(4,135/265,161)
E00 – E89 Endocrine, Nutritional and Metabolic Diseas- es	11.45% (23,323/203,768)	3.01% (388/12,907)	7.36% (19,526/265,161)
F01 - F99 Mental, Behavioral and Neurodevelopmental Disorders	1.33% (2,711/203,768)	2.27% (293/12,907)	2.28% (6,035/265,161)
G00 – G99	4.43%	0.83%	3.68%
Diseases of the Nervous System	(9,030/203,768)	(107/12,907)	(9,764/265,161)
H00 – H59	0.22%	0.97%	0.53%
Diseases of the Eye and Adnexa	(445/203,768)	(125/12,907)	(1,394/265,161)
H60 – H95 Diseases of the Ear and Mastoid Process	0.64%	2.74%	0.93%
	(1,297/203,768)	(354/12,907)	(2,459/265,161)
I00 – I99	10.72%	2.71%	4.71%
Diseases of the Circulatory System	(21,846/203,768)	(350/12,907)	(12,491/265,161)
J00 - J99	3.78%	9.17%	6.40%
Disease of the Respiratory System	(7,698/203,768)	(1,183/12,907)	(16,980/265,161)
K00 – K95	4.15%	3.78%	4.89%
Diseases of the Digestive System	(8,463/203,768)	(488/12,907)	(12,963/265,161)
L00 - L99 Diseases of the Skin and Subcutaneous Tissue	1.25%	1.87%	1.53%
	(2,554/203,768)	(241/12,907)	(4,061/265,161)
M00 - M99 Diseases of the Musculoskeletal System and Connective Tissue	15.67%	9.00%	13.92%
	(31,993/203,768)	(1,161/12,907)	(36,901/265,161)
N00 - N99	3.94%	3.06%	3.89%
Diseases of the Genitourinary System	(8,026/203,768)	(395/12,907)	(10,309/265,161)
O00-O9A Pregnancy, Childbirth, and the Puerperium	0.01%	1.63%	1.61%
	(12/203,768)	(210/12,907)	(4,267/265,161)
P00 - P96 Certain Conditions Originating in the Perina- tal Period	0.00% (0/203,768)	0.15% (19/12,907)	0.10% (273/265,161)
Q00 – Q99 Congenital Malformations, Deformations, and Chromosomal Abnormalities	0.05% (95/203,768)	0.02% (2/12,907)	0.12% (331/265,161)
R00 – R99 Symptoms, Signs, and Abnormal Clinical La- boratory Findings, Not Elsewhere Classified	17.08% (34,804/203,768)	24.52% (3,165/12,907)	19.69% (52,213/265,161)
S00 – T88	2.95%	7.72%	4.54%
Injury, Poisoning, and Certain other Consequences of External Causes	(6,005/203,768)	(997/12,907)	(12,045/265,161)
U00 - U85	0.08%	0.18%	0.09%
Codes for Special Purposes	(155/203,768)	(23/12,907)	(244/265,161)
V00 - Y99	0.13%	0.44%	0.16%
External Causes of Morbidity	(255/203,768)	(57/12,907)	(433/265,161)
Z00 – Z99 Factors Influencing Health Status and Contact with Health Services	12.16%	14.88%	16.97%
	(24,785/203,768)	(1,920/12,907)	(44,990/265,161)

PRIMARY AND CHRONIC DISEASE NEEDS AND OTHER HEALTH ISSUES

Health Concerns of Low-Income Persons

To gain insight into the primary health concerns of low-income individuals residing within Mohave County, this community health needs assessment presents the five most frequent top health challenges identified in the community survey by income level (Table 31). For the purposes of this disaggregation, low income is defined as households earning less than \$50,000 annually, middle income is defined as households earning between the \$50,000 and \$99,999, and high income is defined as households earning more than \$100,000. Across income categories, the most common responses were very similar, with joint and back pain being the most frequent health challenge reported by our low-, middle-, and high-income respondents, followed by issues related to weight, like being overweight or having obesity. The third most common response is where our low-income population separates from the middle- and high-income populations, with high blood pressure being identified as the third most common health challenge, in contrast to having no health concerns.

Low-Income	Middle-Income	High-Income
(N = 439)	(N = 511)	(N = 365)
Joint and Back Pain	Joint and Back Pain	Joint and Back Pain
(26.0%, 114/439)	(23.1%, 118/511)	(19.2%, 70/365)
Overweight and Obesity (14.8%, 65/439)	Overweight and Obesity (21.5%, 110/511)	Overweight and Obesity (18.9%, 69/365)
High Blood Pressure	No Health Concerns	No Health Concerns
(10.7%, 47/439)	(11.2%, 57/511)	(17.3%, 63/365)
Mental Health	High Blood Pressure	High Blood Pressure
(9.8%, 43/439)	(10.4%, 53/511)	(11.5%, 42/365)
Diabetes	Mental Health	Mental Health
(9.6%, 42/439)	(10.2%, 52/511)	(9.9%, 36/365)

Table 31. Top Three Health Concerns among individuals with Low, Middle, and High income as self-reported in the 2024 Community Health Survey. Survey participants who chose to not answer the question on household income and/or are retired are excluded from this table.



Health Concerns of Minority Groups

To gain insight into the primary health concerns of minority groups residing within Mohave County, this community health needs assessment presents the five most frequent top health challenges identified in the community survey by minority or majority racial status (Table 32). No meaningful differences were detected among the rates of response for the primary health challenges faced between minority and majority groups.

Minority Respondents	Majority Respondents
(N = 156)	(N = 1276)
Joint and Back Pain	Joint and Back Pain
(23.1%, 36/156)	(23.8%, 304/1276)
Overweight and Obesity	Overweight and Obesity
(17.3%, 27/156)	(18.0%, 230/1276)
No Health Challenges	High Blood Pressure
(12.8%, 20/156)	(11.8%, 151/1276)
Mental Health	No Health Challenges
(12.2%, 19/156)	(11.2%, 143/1276)
High Blood Pressure	Mental Health
(8.3%, 13/156)	(9.1%, 116/1276)

Table 32. Top Three Health Concerns among individuals from minority and majority racial backgrounds as self-reported in the 2024 Community Health Survey. Survey participants who chose to not answer the question on household income and/or are retired are excluded from this table.



KEY FINDINGS AND NEXT STEPS

Significant Health Needs of the Community

The 2025-2028 Mohave County CHNA set out to gain a more comprehensive picture of health issues facing Mohave County residents. The following key findings were identified:

Key Informant	Community	Medical	Morbidity and Mortality	Community Focus Groups
Interviews	Survey	Diagnostics		
Seniors, youth, and the homeless are Mohave County's most vulnerable populations. Mental health, substance use, and poverty are the most important health issues in Mohave County.	The majority of Mohave County residents report being in good health. The three most common personal health challenges among residents are issues related to weight, joint and back pain, and high blood pressure.	The most common points of entry into the healthcare system for Mohave County residents were: symptoms, signs, and abnormal clinical laboratory findings, and factors influencing health status.	The leading causes of death among residents of Mohave County were cardiovascular disease, cancers, chronic lower respiratory disease, and unintentional injuries.	Focus groups through Mohave County identified the following priorities to address: Community programs and resources
The defining characteristics of a healthy community are healthcare systems, areas for exercise and recreation, and opportunities for social engagement. Economic stability is the most important social determinant of health. The largest barrier to expanding the health of residents in Mohave County is the robustness of community infrastructure and health resources.	The three most common community health problems identified by residents include: mental health, aging, and motor vehicle injuries. The most common social barriers to a healthy Mohave County were poverty, a lack of medical providers, and a lack of affordable housing. Mohave County residents expressed difficulty accessing medical care from specialists, mental health providers, and primary care providers.	The most commonly diagnosed diseases for residents of Mohave County were: diseases of the musculoskeletal system and connective tissue, endocrine, nutritional, and metabolic diseases, diseases of the circulatory system, and diseases of the respiratory system. Residents of Mohave County without medical insurance most commonly interfaced with the healthcare system due to injury, poisoning, and diseases of the respiratory system.	The largest disparities between men and women for causes of death were diseases of the heart, chronic lower respiratory diseases, cerebrovascular diseases, and Alzheimer's disease. Residents of Mohave County were less likely to expire due to diabetes and essential hypertension than the general Arizona population.	 Education Healthcare access The residents described a need to build systems that work towards: Enhancing pediatric medical care. Education on nutrition and medical insurance processes. Developing community navigation processes for health and social services.

As part of continuously improving the community, the CHNA report is instrumental in crafting a Community Health Improvement Plan (CHIP). The Mohave County CHIP is designed to be a collaborative and community-driven endeavor that focuses on prioritizing strategies to tackle the identified health needs and challenges. By leveraging the county's existing strengths, resources, and outreach capabilities, community members are empowered to form strategic partnerships and implement evidence-based programs that can lead to sustainable improvements in public health. By fostering a culture of health and wellness, Mohave County hopes to not only improve individual health outcomes but also to build a healthier, more resilient community that is better equipped to address future health challenges.

Appendix 1 - Community Health Assets

The following tables (**Table 1-12**) are a list of Mohave County's community health assets as identified by the Mohave County Community Health Needs Assessment team. It is not intended to be a comprehensive resource guide as the location and number of health assets changes regularly as the region grows and matures. This table does provide a good estimate of the resources available in each community comprising Mohave County.

Beaver Dam Health Assets				
Name	Organization Type	Address	Website	
Canyonlands Healthcare	Community Health Center	3272 E Rio Virgin Rd, Littlefield, AZ 86432	www.canyonlandschc.org	
MCDPH Environmental Health	Public Health Agency	700 N. Hwy 91 (Rotating Coverage)	www.mohave.gov	

Table 1. Health Assets in Beaver Dam, Arizona.

Bullhead City Health Assets				
Name	Organization Type	Address	Website	
Western Arizona Regional Medical Center	Hospital	2735 Silver Creek Rd., Bullhead City, AZ,86442	www.warmc.com	
Valley View Medical Center	Hospital	5330 AZ-95, Fort Mo- have, AZ, 86426	www.valleyviewmedic alcenter.net	
Exceptional Community Hospital	Hospital	2365 AZ-95, Bullhead City, AZ, 86442	www.ehc24.com	
Vista Health	Community Health Center	5653 AZ-95 A, Fort Mo- have, AZ 86426	www.vistahealthmd.c om/	
North Country Healthcare	Community Health Center	2585 Miracle Mile #116, Bullhead City, AZ, 86442	www.northcountryhea lthcare.org	
Mohave County Depart- ment of Public Health	Public Health Agency	1222 Hancock Rd. Bull- head City, AZ 86442	www.mohave.gov	
Mohave Mental Health	Mental Health Agency	1145 Marina Blvd., Bullhead City, Az, 86442	www.mmhc-inc.org	
Southwest Behavioral Health	Mental Health Agency	2580 AZ-95, Bullhead city, Az, 86442	www.sbhservices.org	
MIKID	Mental Health Agency	810 Gemstone #3, Bullhead City, AZ, 86442	www.mikid.org	

Bullhead City Health Assets				
Name	Organization Type	Address	Website	
Talas Harbor	Mental Health Agency	831 Landon Dr., Bullhead City, AZ, 86429	www.talasharborbullheadcity.c om	
Rivyve Behavioral Health Treatment Center	Mental Health Agency	2150 Silver Creek Rd, Bull- head City, AZ, 86442	www.rivyve.com	
River Cities United Way	Social Services Agency	1155 Hancock Rd., Bullhead City, AZ, 86442	www.rivercitiesunitedway.org	
Bullhead Christian Center dba Praise Chapel	Social Services Agency	590 Hancock Rd., Bullhead City, AZ, 86442	www.praisechapelbullhead.org	
Arizona Department of Economic Security	Social Services Agency	2601 AZ-95, Bullhead City, AZ, 86442	www.des.az.gov	
The Salvation Army	Social Services Agency	1491 Palma Rd., Bullhead City, Az, 86442	www.bullheadcity.salvationar my.org	
St. Vincent de Paul	Social Services Agency	780 Mariana Blvd., Bullhead City, AZ, 86442	www.stvincentdepaul.net	
The River Fund	Social Services Agency	1341 Hancock Rd, Bullhead City, AZ, 86442	www.riverfundinc.com	
Catholic Charities	Social Services Agency	1594 N. Oatman Rd, Bullhead City, Az, 86442	www.catholiccharitiesaz.org	
Bullhead City Library	Public Library	1170 Hancock Rd Bullhead City, AZ 86442	www.mohavecountylibrary.us/	

Table 2. Health Assets in Bullhead City, Arizona.

Chloride Health Assets				
Name	Organization Type	Address	Website	
MCDPH Mobile Health Unit	Public Health Agency	2nd St & Elkhart Ave, Chloride AZ 86431 (Rotating Coverage)	www.mohave.gov	
Chloride Community Library	Public Library	4901 Pay Roll Ave, Chloride, AZ 86431	www.mohavecountylibrary.us/	

Table 3. Health Assets in Chloride, Arizona.

Appendix 1 - Community Health Assets

Colorado City Health Assets				
Name	Organization Type	Address	Website	
St. George Region- al Hospital	Hospital	1380 E Medical Center Dr, St. George, UT 84790	https:// intermountainhealthcare.org/ locations/st-george-regional- hospital	
Creek Valley Health Clinic	Federally Qualified Health Center	20 S Colvin St., Colorado City, AZ, 86021	www.creekvalleyhc.com	
Heritage Midwifery	Health Services	1065 N. Hildale St. #941 Hildale, UT. 84784	heritagecpm@gmail.com	
Hometown Wellness	Health Services	1070 Hildale St. Hildale, UT. 84784	www.hometown-wellness.com	
Mohave County Department of Public Health	Public Health Agency	2096 S. Hwy 389, Colora- do City, AZ 86021	www.mohave.gov	
Coconino County WIC	Public Health Agency	55 Central Street, Colora- do City, AZ, 86021	www.mohave.gov	
Encompass Health Services	Mental Health Agency	50 Township Ave, Colora- do City, AZ, 86021	www.encompass-az.org	
Cherish Families	Social Services Agency	208 W Township Ave, Colorado City, AZ, 86021	www.cherishfamilies.org	
Healthy Families Program & Parents As Teachers Child and Family Resources, Inc.	Children and Family Services	60 Township Ave. Colorado City, AZ 86021	www.childfamilyresources.org/ healthy-families/	

 Table 4. Health Assets in Colorado City, Arizona.

	Dolan Springs Health Assets				
Name	Organization Type	Address	Website		
St. Vincent de Paul Society	Social Services (Food Pantry)	7141 11th St, Dolan Springs, AZ 86441	www.stvincentdepaul.net/news/ hope-dolan-springs		
MCDPH Mobile Health Unit	Public Health Agency	7141 11th St, Dolan Springs, AZ 86441 (Rotating Coverage)	www.mohave.gov		
Dolan Springs Community Library	Public Library	16140 Pierce Ferry Road Dolan Springs, AZ 86441	www.mohavecountylibrary.us/		

 Table 5. Health Assets in Dolan Springs, Arizona.

Golden Shores / Topock Health Assets				
Name	Organization Type	Address	Website	
MCDPH Mobile Health Unit	Public Health Agency	13136 Golden Shores Pkwy Topock, AZ 86436 (Rotating Coverage)	www.mohave.gov	
Golden Shores Community Bap- tist Church	Social Services (Food Pantry)	5084 E Cibola Dr Topock, AZ 86436	www.azmn.org	
Golden Shores Volunteer Fire Department	Fire Department	12950 Oatman Highway Topock, AZ 86436	www.goldenshoresvolunteerfiredepart ment.com	
Golden Shores/ Topock Commu- nity Library	Public Library	13136 Golden Shores Pkwy. Top- ock, AZ 86436	www.mohavecountylibrary.us/	
Golden Shores Senior Center / Community Cen- ter	Community Center	13136 Golden Shores Parkway, Topock, AZ 86406	https://seniorcenter.us/sc/ gold- en shores senior center topock az	

Table 6. Health Assets in Golden Shores / Topock, Arizona.



Appendix 1 - Community Health Assets

	Kingman Health Assets			
Name	Organiza- tion Type	Address	Website	
Kingman Regional Medical Center	Hospital	3269 Stockton Hill Rd, Kingman, AZ, 86409	www.azkrmc.com	
Veterans Affairs	Community Health Center	2668 Hualapai Mountain Road, Kingman, AZ, 86401	www.prescott.va.gov	
North Country Healthcare	Community Health Center	1510 N. Stockton Hill Rd., Kingman, AZ, 86401	www.northcountryhealthcare.org	
Mohave County Department of Public Health	Public Health Agency	700 W. Beale St, Kingman, AZ, 86401	www.mohave.gov	
Southwest Behavioral Health Clinic	Mental Health Agency	2215 Hualapai Mountain Rd, King- man, AZ, 86401	www.sbhservices.org	
Southwest Behav- ioral Crisis Unit	Mental Health Agency	1301 West Beale Street, Kingman, AZ, 86401	www.sbhservices.org	
Complete Joy Behavioral Health	Mental Health Agency	1711 Stockton Hill Rd, Kingman, AZ, 86401	www.completejoybehavioralhealth.co <u>m</u>	
Terros Health	Mental Health Agency	3531 N Moore St Unit #4, Kingman, AZ, 86409	www.terroshealth.org	
Sonoran Prevention Works	Mental Health Agency	3505 Western Ave Ste B, Kingman, AZ, 86409	www.spwaz.org	
Hickory Treatment Center	Mental Health Agency	1031 Detroit Ave, Kingman, AZ, 86401	www.hickorytreatmentcenters.com	
Community Medical Services	Mental Health Agency	1115 Stockton Hill Road, Kingman, AZ, 86401	www.communitymedicalservices.org	
Arizona Depart- ment of Economic Security	Social Ser- vices Agency	301 Pine Street, Kingman, AZ, 86401	<u>www.des.az.gov</u>	
United Way of Kingman	Social Ser- vices Agency	2203 Hualapai Mountain Road, Kingman, AZ, 86401	www.rivercitiesunitedway.org	

Kingman Health Assets				
Name	Organiza- tion Type	Address	Website	
Kingman Cancer Care Unit	Social Ser- vices Agency	P.O. Box 3014, Kingman, AZ, 86402	www.kingmancancercareunit.com	
The Salvation Army	Social Ser- vices Agency	3309 East Beale Street, Kingman, AZ, 86402	www.usw.salvationarmy.org	
Cornerstone Mission	Social Ser- vices Agency	3049 Sycamore Ave., Kingman, AZ, 86409	www.cornerstonemissionaz.org	
Kingman Aid to Abused People	Social Ser- vices Agency	1770 Airway Ave., Kingman, AZ, 86401	www.mykaap.com	
St. Vincent de Paul Society Kingman	Social Ser- vices Agency	218 Beale St., King- man, AZ, 86401	www.svdpkingman.org	
Kingman Area Food Bank	Social Ser- vices Agency	2930 E. Butler Ave., Kingman, AZ, 86409	www.kingmanareafoodbank.org	
Western Council of Governments	Social Ser- vices Agency	208 N. 4 th Street, Kingman, AZ, 86401	www.wacog.com	
Jerry Ambrose Veterans Council	Social Ser- vices Agency	315 E. Oak St., Kingman, AZ, 86401	www.javc.org	
Arizona Youth Part- nership	Social Ser- vices Agency	2701 E. Andy Devine Ave, King- man, AZ, 86401	www.azyp.org	
Arizona at Work	Social Ser- vices Agency	2400 Airway Ave, Kingman, Az, 86409	www.arizonaatwork.com	
Hope for the City Food Bank	Social Ser- vices Agency	1850 Gates Ave., Kingman, AZ, 86401	www.firstfoodbank.org	
Mohave County Community Services	Social Ser- vices Agency	700 W. Beale St., Kingman, AZ, 86401	www.mohavecounty.us	
Katheryn Heidenreich Adult Center	Social Ser- vices Agency	1776 Airway Ave, Kingman, AZ, 86409	www.kingmansdultcenter.com	
Community Legal Services	Social Ser- vices Agency	2701 E. Andy Devine Ave., K8ing- man, AZ, 86401	www.clsaz.org	
Kingman Library	Public Library	3269 N Burbank St, Kingman, AZ 86409	www.mohavecountylibrary.us/	

Table 7. Health Assets in Kingman, Arizona.

Appendix 1 - Community Health Assets

Lake Havasu City Health Assets			
Name	Organiza- tion Type	Address	Website
Lake Havasu City Regional Medical Center	Hospital	101 Civic Center Ln, Lake Havasu City, AZ, 86403	www.havasuregional.com
North Country Healthcare	Community Health Center	2090 Smoketree Ave. N., Lake Havasu City, AZ, 86043	www.northcountryhealthcare.org
Cornerstone Fam- ily Healthcare	Community Health Center	2082 Mesquite Ave., Lake Havasu City, AZ, 86403	www.cornerstonefamilyhealthcare.co m
Mohave County Department of Public Health	Public Health Agency	2001 College Dr., Lake Havasu City, AZ, 86403	www.mohave.gov
Mohave Mental Health Clinic	Mental Health Agency	2187 Swanson Ave., Lake Havasu City, AZ, 86403	www.mmhc-inc.org
Southwest Be- havioral Health	Mental Health Agency	1845 McCulloch Blvd N, Lake Havasu City, AZ, 86403	www.sbhservices.org
First Things First	Children and Family Ser- vices	1940 Mesquite Ave, Suite E, Lake Havasu City, AZ 86403	www.FirstThingsFirst.org
Arizona Depart- ment of Economic Security	Social Ser- vices Agency	228 London Bridge Rd., Lake Havasu City, AZ, 86403	www.des.az.gov
The Salvation Ar- my	Social Ser- vices Agency	2049 Swanson Ave., Lake Havasu City, AZ, 86403	www.usw.salvationarmy.org
St. Vincent de Paul Food Distri- bution	Social Ser- vices Agency	1841 W. Acoma Blvd., Lake Havasu City, AZ, 86403	www.stvincentdepaul.net
United Way of Lake Havasu	Social Ser- vices Agency	145 N. Lake Havasu Ave., Lake Havasu City, AZ, 86403	www.rivercitiesunitedway.org
Lake Havasu City Library	Public Library	1770 McCulloch Blvd N, Lake Havasu City, AZ 86403	www.mohavecountylibrary.us/

Table 8. Health Assets in Lake Havasu City Arizona.

Meadview Health Assets			
Name	Organization Type	Address	Website
MCDPH Mobile Health Unit	Public Health Agency	247 Meadview Blvd, Meadview, AZ 86444 (Rotating Coverage)	www.mohave.gov
Meadview Civic Association	Community Center	247 Meadview Blvd, Meadview, AZ 86444	http://www.mca-az.com/
Meadview Community Library	Public Library	149 E. Meadview Blvd. Meadview, AZ 86444-0187	www.mohavecountylibrary.us/

Table 9. Health Assets in Meadview, Arizona.

White Hills Health Assets				
Name	Organization Type	Website		
MCDPH Mobile Health Unit	Public Health Agency	8599 White Hills Rd, White Hills, AZ 86445 (Rotating Coverage)	www.mohave.gov	
White Hills Com- munity Associa- tion, Inc	Community Center	8599 White Hills Rd, White Hills, AZ 86445	https://www.facebook.com/people/ White-Hills-Community-Association- Inc/61555130818806/	

Table 10. Health Assets in White Hills, Arizona.

Wikieup Health Assets			
Name	Organization Type	Address	Website
MCDPH Mobile Health Unit	Public Health Agency	18170 US-93, Wikieup, AZ 85360 (Rotating Coverage)	www.mohave.gov

 Table 11. Health Assets in Wikieup, Arizona.

Yucca Health Assets				
Name	Organization Type	Address	Website	
MCDPH Mobile Health Unit	Public Health Agency	12349 Frontage Rd, Yucca, AZ 86438 (Rotating Coverage)	www.mohave.gov	
Yucca Fire Dis- trict Station 1	Fire Department	12349 Frontage Rd, Yucca, AZ 86438	https://5280fire.com/home/other- states-fire-apparatus-stations/ arizona/yucca-fire-department/	

Table 12. Health Assets in Yucca, Arizona.

Appendix 2 - Community Survey

Mohave Community Health Needs Assessment Kingman Regional Medical Center (KRMC) and the Mohave County Department of Public Health (MCDPH)

Kingman Regional Medical Center (KRMC) and the Mohave County Department of Public Health (MCDPH are conducting a Community Health Needs Assessment (CHNA) survey to learn more about health and quality of life in Mohave County. The results of this survey will help organizations address the county's major health and community concerns. Participation in the survey is voluntary, and your answers will be treated with complete confidentiality. The information you give us cannot be linked to you in any way. Thank you for participating in our survey. Your feedback is important.

Part 1: Demographics

Please answer the following questions so we can see how different types of people feel about local health issues.
t will be used for demographic purposes only. Keep in mind you will NOT be identified in any way with your
answers.

1. Zip code where	you live:		
	describe yourself as?	•	
(Check all that apply Female Male	_		Prefer not to answer Other
☐ Transgender	r		Other
3. What is your age		_	45-54 55-64
O 18-24		_	65-74
25-34		_	75 or older
○ 35-44			
following questic are not races. Are No, not of F Yes (Mexica	e you of Hispanic, Latino dispanic, Latino or Spanish o	question o, or Spa origin	nnaire, Hispanic origins
	best describe yourself?		
White/CaucBlack or AfriAmerican In Native	asian ican American		Asian/Pacific Islander Two or More Races Other:
6. What is the higher	est level of school you h	nave con	npleted or the highest
degree you have			
Less than aHigh schoolGED)Associate's	high school degree degree or equivalent (e.g., Degree	0	Bachelor's degree Master's degree Doctoral degree Professional degree
 Some colleg 	ge, but no degree		
7. How many people	le reside in your housel	nold (Inc	luding yourself)?
O 1 O 2 O 3 O 4	○ 5 ○ 6 ○ 7 ○ 8		9 10+

8. What is your household income?		
(Please include money received form all sources: i.e. jobs, social se assistance, retirement income, etc.)	curity	y, public
Less than \$25,00 \$25,000-\$49,999 \$50,000-\$74,999 \$75,000-\$99,999 \$100,000-\$124,999	000	\$125,000-\$149,999 \$150,000-174,999 \$175,000-\$199,999 \$200,000+ Do not know
9. How do you pay for your health care (including medica health treatments)?	tion	s, dental and
(Check all that apply) Health insurance purchased on my own or by family member I do not use healthcare services Medicaid/AHCSS Health insurance purchased/provided through employer Indian Health Services Medicare		Travel to a different country to afford health care Use free clinics Use my own money (out of pocket) Veterans Administration Other:
10. How did you hear about this survey?		
(Check one (1)) Community Meeting/Health Fair Newspaper Mail Grocery Store/Shopping Mall	000	Personal Contact Workplace Church Newsletter Other:
Part 2: Health Status		
The following questions ask about your health and your opinion on healthcare 11. From the list below, please select the community in which live in more than one community, please select the one lived for the greatest number of weeks in the year 2023 OKINGMAN	in v	vhich you
ODolan Springs OLake Havasu City OColorado City OCedar Hills/Centennial Park/Chloride/ Meadview/Peach Springs OMohave Valley	0000	Hackberry Topock Golden Valley Fort Mohave Bullhead City Other:
12. How would you describe your overall health?		
(Check one (1)) Excellent Very good Good Fair Poor		

Appendix 2 - Community Survey

13. Please select the to (Check three (3)) Diabetes Overweight/Obesity Back Pain Joint Pain Lung Disease (chron I do not have any he Cancer 14. In general, are you a when needed? (Check	ic bronchitis, COPD) ealth challenges able to use each of t	Stroke Mental Healt Alzheimer's/ Asthma Heart Diseas High Blood I Alcohol over Other:	Dementia e Pressure ruse/Tobacco use/Drug Addiction
	Yes	No	Not Applicable
Primary Care Provider (Doctor, Nurse Practitioner, Physician Assistant)		0	
Dentist, Dental Hygienist			
Mental Healthcare Provider (Therapist, psychologist, psychiatrist)			
Urgent Care			
Emergency Department			
Specialist Doctor (Heart doctor, cancer doctor, diabetes doctor, etc)		0	
community when you No specialists in my Cannot afford it No health insurance Cannot take time of Not applicable I do not feel comfor service in my comm I do not know if this	urse practitioner, phy ou need them, tell us area f table using this unity is available in my area o use the services of ommunity when you area f table using this	ysician assistant in s why. (Check all that in a control of a Dentist, Denticut of a part of a p	n your at apply) they do not accept my health issurance ppointment times do not fit my chedule rovider is not accepting new atients ther:

17. If you are not able to use the services of a <i>Menta</i>	l He	<u>althcare</u>
Provider (therapist, psychologist, psychiatrist) in	your	•
community when you need them, tell us why.		I do not know if this is available
(Check all that apply)		in my area
☐ No specialists in my area		They do not accept my health
☐ Cannot afford it		insurance
☐ No health insurance		Appointment times do not fit my
☐ Cannot take time off		schedule
☐ Not applicable		Provider is not accepting new
 I do not feel comfortable using this 	_	patients
service in my community	Ш	Other:
If you are not able to use the services of a <u>Special</u>	ılist L	<u>Doctor</u>
(Heart doctor, cancer doctor, diabetes doctor, etc	c.) in y	your
community when you need them, tell us why. (Ch	eck all	that apply)
☐ No specialists in my area		I do not know if this is available in my
☐ Cannot afford it		area
☐ No health insurance		They do not accept my health insurance
☐ Cannot take time off		Appointment times do not fit my
☐ Not applicable		schedule
 I do not feel comfortable using this 		Provider is not accepting new patients
service in my community		Other:
19. If you are not able to use the services of an <u>Urge</u>		
community when you need them, tell us why. (Ch	eck all	that apply)
☐ No specialists in my area		I do not know if this is available in
☐ Cannot afford it		my area
☐ No health insurance		They do not accept my health
☐ Cannot take time off	_	insurance
☐ Not applicable	Ш	Appointment times do not fit my
☐ I do not feel comfortable using this service		schedule
in my community	ш	Provider is not accepting new patients
- In my community		Other:
20. If we want able to we the serious of an Franci		
20. If you are not able to use the services of an Emer		
your community when you need them, tell us wh	y. (Che	eck all that apply.)
 I do not feel comfortable using this service 		I do not know if this is available in
in my community		my area
☐ Cannot take time off		They do not accept my health
☐ Not applicable		insurance
☐ Cannot afford it		Appointment times do not fit my schedule
☐ No specialists in my area		Provider is not accepting new
□ No health insurance		patients
- No Health Historice		Other:
24 14/1-1		
21. Which of the following best describes the place v	vnere	you most often
go when you need medical care? (Check one (1))	0	Urgent Care
O I do not go to one place most often	0	Clinic or health center
Emergency department	0	Doctor's office
Hospital outpatient department	0	Other:

Appendix 2 - Community Survey

	How long has it been since y routine health check up? (Che > < 1 year > 1-3 years		Ο.	orovider for a 4-6 years More than 6 years Never I do not know
	How far (one way) do you type needs? (Check one (1)) Less than 10 miles 10-30 miles 30-60 miles More than 60 miles	pically have to travel fo	or re	outine health care
24.	Thinking about your health a	nd your community's	hea	lth, what <u>three</u>
	medical specialty providers	are most important	to	have in your
25.	Community? (Check three (3)) Gastroenterology (stomach/inter Oncology (cancer specialty) Dermatology (skin care specialty) Pulmonology (lung specialty) Endocrinology (diabetes and howard pediatrics (Children/adolescent Pain Management (pain care specialty) Urology (urinary tract/male rep Which of the following diagnosmmunity? (Check all that apple Rehabilitation centers (physical prosthetic services) Imaging (Mammograms, x-rays) Pharmacy	ormone specialty) care specialty) pecialty) roductive specialty) ostic centers can you y) therapy and	acco	specialty) Cardiology (heart specialty) Mental Health (emotional care specialty) Obstetrics/Gynecology (Wome care specialty) Neurology (brain/nervous syste specialty)
26	If you have a question about	your health, where do	yo	u most often go for
	answers? (Check one (1)) Healthcare Professional (doctor assistant, dentist) Workplace resources (occupationsite nurse, etc.) Internet		0	Health fairs, lectures, or other public health events Books/magazines Family or Friend Other:
27.	On a monthly basis, do you h such as food, clothing and ho	ousing?	о ра	y for essentials
28.	On a monthly basis, do you respenses (e.g. doctor bills. monthly basis, do you respenses (e.g. doctor bills. months)	edications. etc.)?	o pa	
	_ Aiways	Sometimes		O Never

		Very Easy	Somewhat Easy	Somewhat Difficult	Very Difficult	Does not exist near
	32. Please indicate h			-)
Part 3:	Quality of Life				Other:	
	☐ Opioids (Codein Percocet, etc.)	e, rentally, mor	prime, Diladdid,		locker room, et	_
		ous oxide, huffing				
	Klonopin, etc.)	, valium, Ativan,				
						olytics/Hypnotics
	Alcohol				Marijuana	
	☐ No substance us	e				, Shrooms, etc.)
	☐ Tobacco product			_	Hallucinogens	
	31. In the last 30 da	ys, which sub	stances have	you used?	Check all that a	pplies)
	O Never					
	Hardly ever					
	O Some of the time					
	Every dayMost of the time					
	(Check one (1))					
	30. During the past	30 days, how	often have	you felt isola	ited from oth	ners?
	O 16 or more days				unia v	_0
	O 11-15 days					
	0 6-10 days					
	 0 days 1-5 days 					
	anxious? (Check o	ne (1))				
	29. During the past :		many days h	ave you felt	worried, tens	se or
	29. During the past	30 days, how	many days h	ave vou felt	worried tens	se or

	Very Easy	Somewhat Easy	Somewhat Difficult	Very Difficult	Does not exist near me
Parks or playground					
Supermarkets or grocery stores					
Exercise or wellness class					
Farmer's Markets/ Farm Stands					
Primary Care Provider (Doctor, nurse practitioner, physician assistance)		0			
Specialist doctor (Heart doctor, cancer doctor, diabetes doctor, etc.)					
Mental Health Services					
Urgent Care					
Emergency Department					

Appendix 2 - Community Survey

33. How many days in the past week have you been physically active for 30							
minutes or more? (e.g. brisk walking, exercise) (Check one (1))							
O times							
O 1-2 times							
3-5 times							
O 6 or more				-1-12			
34. Which of these sta		est describes	your househ	old in the las	st		
12 months: (Check on		22/10/2006					
We had enough of			to eat.				
We often did not hWe had enough but							
We nad enough but We sometimes did			ood we want.				
35. If you or your neig			ase fresh frui	ts and			
vegetables near you		•					
_	ii nome, i	low easy is ti	ils for your (Ci	neck one (1))			
O Very easy							
O Somewhat easy	r.cc I.						
O Neither easy nor							
 Somewhat difficu 	ilt						
O Very difficult							
 No option near m 		100					
36. Where do you get	most of y	our food? (Ch	eck one (1))				
Food pantry			○ Fa	st food restaur	ant		
Sit down restaurant Convenience store							
Senior Center Grocery store							
37. When shopping for groceries, what matters most to you? (Check three (3))							
☐ Cost of food ☐ Quality of food							
Cost of food				_			
☐ Food that is healthy	y		□ F	ood that my far	mily will like		
	y		□ Fe	ood that my far nd eat			
Food that is healthy		my home	☐ Fe	ood that my far nd eat oupons, promo	otions, or		
☐ Food that is healthy ☐ Taste of food	will last in I	my home	☐ Fe	ood that my far nd eat	otions, or		
☐ Food that is healthy ☐ Taste of food ☐ How long the food ☐ Food that I grew u	will last in i	135-04 (117) 25-125	□ Fo an □ C d	ood that my far nd eat oupons, promo iscounted food	otions, or		
☐ Food that is healthy ☐ Taste of food ☐ How long the food ☐ Food that I grew up 38. Thinking about th	will last in i p eating e neighbo	orhood that y	☐ For all ☐ Cod do d	ood that my far nd eat oupons, promo iscounted food ase indicate	otions, or		
☐ Food that is healthy ☐ Taste of food ☐ How long the food ☐ Food that I grew u	will last in i p eating e neighbo or disagree	orhood that y	□ For all □ C d ou live in, ple lowing staten	ood that my far nd eat oupons, promo iscounted food ase indicate	how		
☐ Food that is healthy ☐ Taste of food ☐ How long the food ☐ Food that I grew up 38. Thinking about th	will last in operating eneighbor disagree	orhood that y e with the fol	☐ For all ☐ Cod do d	ood that my far nd eat oupons, promo iscounted food ase indicate nent.	how Strongly		
☐ Food that is healthy ☐ Taste of food ☐ How long the food ☐ Food that I grew up 38. Thinking about th	will last in i p eating e neighbo or disagree	orhood that y	☐ For all ☐ C ☐ d ☐ C ☐ d ☐ C ☐ D ☐ D ☐ D ☐ D ☐ D ☐ D ☐ D ☐ D ☐ D	ood that my far nd eat oupons, promo iscounted food ase indicate	how		
☐ Food that is healthy ☐ Taste of food ☐ How long the food ☐ Food that I grew up 38. Thinking about th	will last in in p eating e neighbour or disagree Strongly Disagree	orhood that y e with the fol Disagree	ou live in, ple lowing statem Neither Agree nor Disagree	ood that my far nd eat oupons, promo iscounted food ase indicate nent.	how Strongly		
Food that is healthy Taste of food How long the food Food that I grew up 38. Thinking about the much you agree of	will last in operating eneighbor disagree	orhood that y e with the fol	ou live in, ple lowing statem Neither Agree nor	ood that my far nd eat oupons, promo iscounted food ase indicate nent.	how Strongly		
Food that is healthy Taste of food How long the food Food that I grew up 38. Thinking about the much you agree of	will last in in p eating e neighbour or disagree Strongly Disagree	orhood that y e with the fol Disagree	ou live in, ple lowing statem Neither Agree nor Disagree	ood that my far nd eat oupons, promo iscounted food ase indicate nent.	how Strongly Agree		
Food that is healthy Taste of food How long the food Food that I grew up 38. Thinking about the much you agree of	will last in in peating eneighbor disagree Strongly Disagree	orhood that y e with the fol Disagree	ou live in, ple lowing statem Neither Agree nor Disagree	ood that my far nd eat oupons, promo iscounted food asse indicate nent. Agree	how Strongly Agree		
Food that is healthy Taste of food How long the food Food that I grew u 38. Thinking about th much you agree of People in this neighborhood generally get along with each other People in this neighborhood share the	will last in in p eating e neighbour or disagree Strongly Disagree	orhood that y e with the fol Disagree	ou live in, ple lowing statem Neither Agree nor Disagree	ood that my far nd eat oupons, promo iscounted food ase indicate nent.	how Strongly Agree		
Food that is healthy Taste of food How long the food Food that I grew up 38. Thinking about the much you agree of People in this neighborhood generally get along with each other People in this neighborhood share the same values	will last in in peating eneighbor disagree Strongly Disagree	orhood that y e with the fol Disagree	ou live in, ple lowing statem Neither Agree nor Disagree	ood that my far nd eat oupons, promo iscounted food asse indicate nent. Agree	how Strongly Agree		
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39. In your neighborhood, are the following items a big problem, somewhat of a problem, or no problem at all?

	Big Problem	Somewhat of a Problem	Not a Problem	Not Applicable
Job opportunities				
Stealing/theft				
Quality of schools				
High food prices				
Selling or using drugs				
Litter/Trash/Graffiti				
Safety of my neighborhood				
Housing costs/Housing conditions				
Transportation				

Appendix 2 - Community Survey

40. Quality of Life Questions (Check the associated box that you agree with)

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I am satisfied quality of life community					
This is a good community to raise children in					
This is a good community to grow old in					
There is economic opportunity in the community					
The community is a safe place to live in					
There are networks of support for individuals and families					
All residents feel that they – individually and collectively- collectively can make the community a better place to live					
There is enough number of health and social services in the community				0	
I am satisfied with the healthcare system in our community				0	
All individuals and groups have the opportunity to contribute to and participate in the community's quality of life					

Part 4: Community Health

The following questions ask for your opinion on what your community needs.

41. From the list below, <u>select three issues you feel are most important to the health of the community</u>.

Please read the entire list before selecting. If there is an item that is not on

	read the entire list before selecting. If the			
	t but you feel is one of your top three issue			
issue"	and enter it in the box. Each "other" item v	vill	coun	t as one of your
	choices. (Check three (3))			
	Chronic diseases such as cancer, diabetes, asthma		Δir w	rater, the environment
	Mental/emotional health issues such as dementia,	H		ing, homelessness
	depression, suicide			motor vehicle accidents, other
	Transportation		injuri	es
	Violent crime, including domestic violence, child		Safe	places for walking, biking,
	abuse		exerc	
	Infectious diseases such as flu, sexually	_		ation, schools
	transmitted diseases, or Covid-19		•	alty medical care tance use disorders, including
	Nutrition/healthy food options			ol, drugs, tobacco addictions
	Social connection/sense of community			al/oral health issues
	Teen pregnancy		Othe	r:
	Job opportunities, income, poverty			
	Racism or discrimination based on age, sex, race, s	exu	al orie	ntation
	Crime other than violent crime, such as theft, litter	ing,	graffit	i, noise
	Obesity			
42. H	low would you rate the overall health of o	ur c	omm	unity?
0	Very unhealthy			
0	Unhealthy			
0	Somewhat healthy			
0	Very healthy			
0	Healthy			
43. V	What are the greatest strengths of your co	omn	nu <u>ni</u> t	y? (Select all that apply)
_	Clean environments and streets			Access to public libraries and
	Access to healthcare facilities			community centers
	Access to parks and recreation sites			Access to safe walking and biking routes
	Low crime/safe neighborhoods			Other:
44. In	the following list, what do you think are the	thre		
	nealth problems" in our community? (Thos			
	eatest impact on overall community health.)			
	HIV/AIDS			Heart disease and stroke
	Firearm-related injury			Domestic Violence
_	High blood pressure			Respiratory/lung disease Dental problems
	Infant death		_	Child abuse/neglect
	Rape/sexual assault		_	Infectious disease (e.g., hepatitis, TB, etc.)
_	Mental health problems			Aging problems (e.g., arthritis,
	Sexually Transmitted Infections (STIs/STDs)		_	hearing/vision loss, etc.)
	Teenage pregnancy			Motor vehicle crash injuries
	J- F3			Cancers

Appendix 2 - Community Survey

45. In the following list, what do you think are the th	ree most important
"risky behaviors" in our community? (Those beh	naviors which have the
greatest impact on overall community health.)	☐ Poor eating habits
(Check three (3))	Unsecured firearms
☐ Not using seat belts/child safety seats	
☐ Alcohol abuse	☐ Drug abuse ☐ Not using birth control
☐ Being overweight	☐ Dropping out of school
☐ Lack of exercise	Racism
☐ Tobacco use	☐ Lack of maternity care
☐ Not getting "shots" to prevent disease	☐ Unsafe sex
	Other:
46. What do you think are the three physical, socia	
circumstances that are most responsible for hea	alth issues in our
community? (Check three (3))	☐ Unemployment
☐ Poverty	☐ Climate change
 Lack of providers (medical, mental, dental, 	 Lack of access to trails, bike paths,
specialty providers)	parks
☐ Not enough access to healthy food	Racism and discrimination
	 Lack of transportation
Lack of affordable housing	☐ Cost of childcare
☐ Disconnected families	 Lack of education
☐ Health care costs	 Language barriers
☐ Other:	 Cultural barriers
	☐ Homelessness
47. Please choose the three most important factors	s that you think will
improve the quality of life in your community.	☐ Good place to raise children
(Check three (3))	☐ More healthcare providers (primary care
	providers, specialty, mental health)
Good jobs and healthy economy	☐ Clean environment & Clean water
☐ More treatment facilities for chronic health conditions	☐ More diagnostic centers
Affordable housing	 Low crime/safe neighborhoods
Good schools	Other:
☐ Increased law enforcement	h - L - l ! 4b -
48. What resources would help reduce drug and alcol	nol abuse in the
community? (Check two (2)).	
☐ In-patient treatment facilities	☐ Events about substance use disorders
☐ Police involvement	(SUD) Support from employers
☐ Mental health resources	☐ Non-addictive medications
☐ Support groups	☐ Other:
☐ Programs for youth	
☐ Education about resources	
	ave to improve health
49. What recommendations or suggestions do you ha	•
and quality of life in the community? (Please use the	e space on the back)

50. What else would you like to tell us about health and wellness in the community that we have not already asked?



Thank you for completing the survey! The Live Well Mohave partnership is making plans for health and health care in the community. **Use the above QR code or complete the form at**https://forms.office.com/r/KXLqmYFMgX to enter for a chance to Win \$25!

All members of the community are invited to participate. If you would like to receive an email about the process - including the results of this survey - send us an email at **cha@azkrmc.org**

Also, you can participate by checking in on the website, Twitter and/or Facebook. Website: www.mohave.gov Facebook: https://www.facebook.com/MohaveHealthInfo

Appendix 3 - Key Informant Questionnaire

Introduction

Interviewer to review the following:

Request permission to record. Recording will be destroyed when final report is issued.

Interviewer's name and background working with KRMC and Mohave County Public Health.

This is part of the community health needs assessment and community health improvement plan.

Interview will be 30 minutes, unless you would like to go longer.

This interview will be part of a larger report. Although you may be quoted in the report that quote will not be specifically attributed to you.

Feel free to share your opinions and if there's anything you don't want to answer that's fine, just let me know and we'll move along to the next question

Sometimes I'll ask you about "the community." Let's define community as the community that your organization serves. Or you can define as you normally would.

And when I say "healthy" I mean anything that comes to mind for you - it doesn't have to be limited to medical issues.

Do you have any questions before we start?

Interview Questions

When I say a healthy community, what does that mean to you? What would that look like ideally? (Probe: What are the characteristics of a healthy community?)

What would you say are the most important health issues in the community you serve? (Probe: What else?)

[Interviewer: After Question 2 is exhausted, probe for social determinants of health if not already mentioned.] In public health we often talk about social determinants of health. These are factors outside of the health care system, for example, being homeless or access to clean water and so on. Are there any of these that you haven't mentioned that you feel are important issues in your community?

What are the barriers to having a healthy community? What is getting in the way of having the ideal healthy community?

In your community, which individuals or groups are the most vulnerable when it comes to health issues? (Probe: Why do you say that?)

You have mentioned a, b, and c [from questions 2 and 3] as important health issues.

Let's take the first one. What do you think that we, as a community, in Mohave County can do to address this issue and how do you see your organization contributing?

Let's take the second one ...

Let's take the third one ...

What else would you like to tell me that I might not have asked?

Appendix 4 - Focus Group Discussion Guide

Introduction	Hello, my name is [] and I work with []. Kingman Regional Medical Center and the Mohave County Department of Public Health have partnered with many community organizations to understand what impacts your health and wellbeing here in your community. A big piece of this project is to understand your opinions, needs and wants when it comes to your health from community members like you. Have any of you ever participated in a Focus Group or heard of a Focus Group? There are no right or wrong answers. This conversation is about what you think and about your experiences. When we talk in a group like this, it allows for people to agree or disagree depending on their personal beliefs or experiences. This is a good thing, so it is important that we respect each other and any differences.
Overview of Focus Group Goals	The goal of today's conversation is to understand the strengths and needs of the community when it comes to health, knowing that healthcare influences our health, but also that where we live, work, and play all have an impact on our health and wellbeing. Another goal is to identify ways healthcare and community organizations might do a better job addressing those health issues that are most important to you. The results will be written in the 2025 Community Health Needs Assessment. Healthcare and community organizations will then use this report to create a plan for improving health. The hospital and health department will continue to do this assessment and planning every 3 years so you might hear about it again in the future. The hope is that by looking at health data and talking more with residents like this, we can work better together and improve our services.
Informed Consent	We won't be asking very sensitive questions today, but you don't have to share anything that you don't feel comfortable sharing. We will not include your any personal identifying information in any of the final reports. This is my assistant []. We will also be taking notes as a reminder for us of things that were mentioned that are the most important to the group. Feel free to get up to use the restroom or attend to anything you need to. But I ask that you refrain from using your phones in the group. We are scheduled to be together for no more than 2 hours today. Are there any questions or concerns before we begin? Wonderful – let's get started.
I. Icebreaker and Introductions	Let's start by having you share your first name and how long you have been living here in the community. (When I say community, I am referring to the town that you live in.) Possible Probes: • Tell me more about [X]?
Healthy Community Design	
II. General Community	What does the community offer, or what in the community, makes it easier for you to stay healthy or to keep yourself healthy? Possible Probes: Tell me more about [X]? What about [X] makes it easier? What does a healthy community look like to you?
III. General Community Design Challenges / Concerns	What is missing in the community that is making it harder for you to be healthy and live your best life? Possible Probes: • When you say [X], why do you feel that is important? • What could be done to help you overcome [X]?
IV. Resiliency	What worries you the most about your health? Possible Probes: • What do you do to overcome these worries? • What makes you feel confident in meeting your health needs?
V. Social Cohesion	How often do you feel lonely? Possible Probes: • What do you do when you get lonely? • What is the most effective at making you feel less lonely?

Appendix 4 - Focus Group Discussion Guide

Access to Care	
VI. Understanding where health services are accessed:	Tell me about where you go when you need a general check-up or have non-urgent health needs? Possible Probes: Why did you decide to go to [X]? What has the greatest influence over where you decide to go for your general health needs?
VII. Specialty Services	Tell me about where you go when you have a specific or special health care need (For example, if you needed to see a specialist for a heart condition, or to see someone to manage diabetes for you or a family member.) Possible Probes: Tell me about what specialty services you need for you or a family member that have been hard to access. What about [X] makes it [easier or challenging]? What kind of health care services do you wish that you had available here in your community that you do not have?
VIII. Mental Health	Let's transition to mental health care, also sometimes referred to as behavioral health. Tell me about where you would go for support if you needed someone to talk to or where you would go for help if you were frequently feeling anxious or depressed? Possible Probes: • How would you find out about mental health services that are available in the community? • What makes it harder for you to access behavioral or mental health services in the area and why?
IX. Insurance Coverage	Let's now transition into insurance coverage. For those that have insurance coverage, what makes it easier or harder for you to utilize the health care services and coverage available under your plan? Possible Probes: For those with insurance coverage, how do you find out about what is or is not covered under your plan? For those with insurance coverage, what would you like to see covered or made available under your plan and why? If you don't have health insurance coverage, what barriers are impacting your ability to get covered?
Equity	1
X. Who's Not Thriving	Who in the community might not want to or not be able to use [A, B, and C] to [do X, Y and Z]? Possible Probes: • Are there certain groups of people that seem to be impacted by poor health more than others and if so, why do you think that is? • What do you think community leaders can do differently, if anything, to make your community a community where you will thrive?
Closing Reflections	
XI. Health System Perceptions and Understanding	What do you wish health care providers and organizations knew about you that they don't already know that would help to support you and your health needs better? Possible Probes: What can health care providers do to best connect with you?
XII. Closing Reflections	What didn't we ask you that we should have about your health and wellbeing?
Wrap Up	Thank you so much for taking the time to be here today and sharing your important feedback with us. Your thoughts and opinions are very important. That is it for my questions. As I mentioned at the beginning of our discussion, this information will be compiled into a report for community leaders and stakeholders and will be used to develop a plan to improve the health of the community. If you would like to see the final report it will be available through the hospital and county health department.

Appendix 5 - Glossary of Acronyms, Abbreviations, and Terms

	Alcoholics Anonymous
ACA	Affordable Care Act
ACE	Adverse Childhood Experience
ACGME	Accreditation Council for Graduate Medical Education
AZCOM	Arizona College of Osteopathic Medicine, Midwestern University
ACS	American Community Survey, U.S. Census Bureau
ADHS	Arizona Department of Health Services
AHCCCS	Arizona Health Care Cost Containment System
АМА	American Medical Association
AOA	American Osteopathic Association
ATSDR	Agency for Toxic Substances and Diseases Registry
AZDPS	Arizona Department of Public Safety
AZSVI	Arizona Social Vulnerability Index
BATS	Bullhead Area Transit System
CAT	Cottonwood Area Transit
CDC	Centers for Disease Control
CHIP	Community Health Improvement Plan
CHNA	Community Health Needs Assessment
	County Health Rankings & Roadmaps, University of Wisconsin Population Health Institute
ECH	Exceptional Community Hospital
EPA	Environmental Protection Agency
HPSA	Health Professional Shortage Areas
HRMC	Havasu Regional Medical Center
HRSA	Health Resources and Services Administration
ICD-10	International Classification of Diseases, 10th Revision
IHME	Institute for Health Metrics and Evaluation
IRS	Internal Revenue Service
KART	Kingman Area Regional Transit

KDMC	Vingman Degianal Medical Center
KRMC	Kingman Regional Medical Center
LHCT	Lake Havasu City Transit
MATPP	Mobilizing for Action Through Planning and Partnerships
MCDPH	Mohave County Department of Public Health
мссс	Mohave County Community College
MHRT	Mental Health Resource Team
MSTEPP	Mohave Substance Treatment Education and Prevention Partnership
NA	Narcotics Anonymous
NACCHO	National Association of County and City Health Officials
NCHS	National Center for Health Statistics, CDC
NIBRS	National Incident-Based Reporting System, FBI
NVSS	National Vital Statistics System
SDOH	Social Determinants of Health
SVI	Social Vulnerability Index
VVMC	Valley View Medical Center
WARMC	Western Arizona Regional Medical Center

Education	Mohave County (N = 1467)	Kingman (N = 732)	Bullhead (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)
Highschool degree or equivalent	14.0% (205/1467)	11.6% (85/732)	11.7% (20/171)	11.2% (18/161)	20.1% (73/363)
Some college	34.2% (502/1467)	30.1% (220/732)	35.1% (60/171)	41.6% (67/161)	38.8% (141/363)
Associates	17.0% (251/1467)	19.3% (141/732)	17.0% (29/171)	11.8% (19/161)	15.7% (57/363)
Bachelors	18.4% (271/1467)	21.7% (159/732)	14.6% (25/171)	19.3% (31/161)	13.5% (49/363)
Masters	10.0% (146/1467)	11.5% (84/732)	12.3% (21/171)	11.2% (18/161)	5.5% (20/363)
Professional	2.7% (40/1467)	2.3% (17/732)	5.3% (9/171)	1.9% (3/161)	2.5% (9/363)
Doctorate	2.0% (30/1467)	2.9% (21/732)	1.8% (3/171)	1.9% (3/161)	0.8% (3/363)
Less than Highschool	1.5% (22/1467)	0.7% (5/732)	2.3% (4/171)	1.2% (2/161)	3.0% (11/363)

Table 1. Percentage and count of participants education level.

Age	Mohave County (N = 1468)	Kingman (N = 734)	Bullhead (N = 171)	Havasu (N = 160)	Rural Areas (N = 363)
Under 18	0.1% (2/1468)	0.0% (0/734)	0.6% (1/171)	0.6% (1/160)	0.0% (0/363)
18-24	1.8% (26/1468)	1.1% (8/734)	1.2% (2/171)	2.5% (4/160)	3.3% (12/363)
25-34	11.0% (162/1468)	11.3% (83/734)	13.5% (23/171)	9.4% (15/160)	11.0% (40/363)
35-44	18.1% (265/1468)	21.9% (161/734)	19.3% (33/171)	13.1% (21/160)	12.7% (46/363)
45-54	18.6% (273/1468)	19.9% (146/734)	15.8% (27/171)	15.0% (24/160)	20.1% (73/363)
55-64	22.9% (336/1468)	21.8% (160/734)	23.4% (40/171)	23.1% (37/160)	25.6% (93/363)
65-74	19.6% (288/1468)	17.4% (128/734)	19.9% (34/171)	25.0% (40/160)	20.4% (74/363)
75+	7.9% (116/1468)	6.5% (48/734)	6.4% (11/171)	11.3% (18/160)	6.9% (25/363)

Table 2. Percentage and count of participants age range.

Household Income	Mohave County (N = 1431)	Kingman (N = 715)	Bullhead (N = 167)	Havasu (N = 159)	Rural Areas (N = 352)
Less than 25K	10.2% (146/1431)	6.7% (48/715)	11.4% (19/167)	6.9% (11/159)	18.2% (64/352)
25-49K	20.5% (293/1431)	17.8% (127/715)	19.8% (33/167)	13.8% (22/159)	27.8% (98/352)
50-74K	19.9% (285/1431)	19.9% (142/715)	24.0% (40/167)	16.4% (26/159)	20.5% (72/352)
75-99K	15.8% (226/1431)	18.0% (129/715)	16.8% (28/167)	17.6% (28/159)	10.5% (37/352)
100-124K	11.9% (171/1431)	15.4% (110/715)	8.4% (14/167)	11.9% (19/159)	7.1% (25/352)
125-149K	3.8% (55/1431)	4.8% (34/715)	3.6% (6/167)	3.8% (6/159)	2.6% (9/352)
150-174K	4.2% (60/1431)	5.0% (36/715)	1.8% (3/167)	6.3% (10/159)	3.1% (11/352)
175-200K	1.6% (23/1431)	2.0% (14/715)	1.2% (2/167)	1.9% (3/159)	1.1% (4/352)
200K+	3.9% (52/1431)	3.6% (26/715)	7.8% (13/167)	6.3% (10/159)	2.0% (7/352)
Retired	8.1% (116/1431)	6.9% (49/715)	5.4% (9/167)	15.1% (24/159)	7.1% (25/352)

Table 3. Percentage and count of participants household income.

Sex	Mohave County (N = 1456)	Kingman (N = 727)	Bullhead (N = 170)	Havasu (N = 161)	Rural Areas (N = 359)
Female	80.7% (1175/1456)	78.7% (572/727)	81.8% (129/170)	79.5% (128/161)	85.5% (307/359)
Male	18.8% (274/1456)	20.8% (151/727)	17.1% (29/170)	20.5% (33/161)	14.2% (51/359)
Trans*	0.1% (2/1456)	0.3% (2/727)	0.0% (0/170)	0.0% (0/161)	0.0% (0/359)
No Response	0.3% (5/1456)	0.3% (2/727)	1.2% (2/170)	0.0% (0/161)	0.3% (1/359)

Table 4. Percentage and count of participants sex.

Household Size	Mohave County (N = 1466)	Kingman (N = 733)	Bullhead (N = 171)	Havasu (N = 161)	Rural Areas (N = 361)
1	14.4% (211/1466)	13.5% (99/733)	12.9% (22/171)	11.8% (19/161)	16.6% (60/361)
2	45.3% (664/1466)	44.1% (323/733)	40.4% (69/171)	53.4% (86/161)	46.0% (166/361)
3	15.7% (230/1466)	17.1% (125/733)	17.0% (29/171)	14.3% (23/161)	13.6% (49/361)
4	12.3% (180/1466)	13.9% (102/733)	14.0% (24/171)	8.7% (14/161)	10.2% (37/361)
5	5.9% (86/1466)	5.6% (41/733)	8.8% (15/171)	5.0% (8/161)	5.8% (21/361)
6	3.9% (57/1466)	3.7% (27/733)	4.7% (8/171)	4.3% (7/161)	3.9% (14/361)
7	1.3% (19/1466)	1.1% (8/733)	1.8% (3/171)	1.2% (2/161)	1.7% (6/361)
8	0.5% (7/1466)	0.5% (4/733)	0.6% (1/171)	0.6% (1/161)	0.3% (1/361)
9	0.0% (0/1466)	0.0% (0/733)	0.0% (0/171)	0.0% (0/161)	0.0% (0/361)
10+	0.8% (12/1466)	0.5% (4/733)	0.0% (0/171)	0.6% (1/161)	1.9% (7/361)

 Table 5. Percentage and count of participants household size.

Race/Ethnicity	Mohave County (N = 1442)	Kingman (N = 719)	Bullhead (N = 167)	Havasu (N = 158)	Rural Areas (N = 358)
White	88.5% (1276/1442)	88.6% (637/719)	86.8% (145/167)	88.6% (140/158)	88.8% (318/358)
Native	1.7% (25/1442)	1.9% (14/719)	1.2% (2/167)	0.0% (0/158)	2.5% (9/358)
Two or More	5.8% (83/1442)	5.6% (40/719)	7.0% (12/167)	7.0% (11/158)	5.0% (18/358)
Asian	1.5% (21/1442)	2.2% (16/719)	0.6% (1/167)	1.3% (2/158)	0.6% (2/358)
Hispanic	1.0% (14/1442)	0.4% (3/719)	1.8% (3/167)	1.3% (2/158)	1.7% (6/358)
Black	0.9% (13/1442)	0.7% (5/719)	1.8% (3/167)	1.3% (2/158)	0.3% (1/358)
No Response	0.7% (10/1442)	0.6% (4/719)	0.6% (1/167)	0.6% (1/158)	1.1% (4/358)

Table 6. Percentage and count of participants race/ethnicity.

Response Options	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
Poor	4.07% (60/1474)	3.95% (29/734)	6.43% (11/171)	0.62% (1/161)	4.13% (15/363)	8.89% (4/45)
Fair	18.05% (266/1474)	16.89% (124/734)	23.98% (41/171)	13.66% (22/161)	20.66% (75/363)	8.89% (4/45)
Good	41.66% (614/1474)	44.28% (325/734)	28.65% (49/171)	38.51% (62/161)	44.90% (163/363)	33.33% (15/45)
Very Good	29.24% (431/1474)	28.75% (211/734)	33.92% (58/171)	37.89% (61/161)	24.24% (88/363)	28.89% (13/45)
Excellent	6.51% (96/1474)	6.13% (45/734)	6.43% (11/171)	9.32% (15/161)	5.79% (21/363)	8.89% (4/45)
No Answer	0.47% (7/1474)	0.00% (0/734)	0.58% (1/171)	0.00% (0/161)	0.28% (1/363)	11.11% (5/45)

Table 7. Percentage and count of participants when asked "How would you describe your overall health?".

Response Options	Mohave County (N = 4422)	Kingman (N=2202)	Bullhead City (N=513)	Havasu (N=483)	Rural Areas (N=1089)	Unreported Location (N=135)
Alzheimer's Dementia	0.11% (5/4422)	0.14% (3/2202)	0.00% (0/513)	0.00% (0/483)	0.18% (2/1089)	0.00% (0/135)
Asthma	2.58% (114/4422)	2.50% (55/2202)	3.12% (16/513)	2.48% (12/483)	2.75% (30/1089)	0.74% (1/135)
Back Pain	9.41% (416/4422)	8.67% (191/2202)	9.94% (51/513)	9.73% (47/483)	11.02% (120/1089)	5.19% (7/135)
Cancer	1.54% (68/4422)	1.18% (26/2202)	1.56% (8/513)	2.69% (13/483)	1.93% (21/1089)	0.00% (0/135)
Diabetes	4.18% (185/4422)	4.54% (100/2202)	2.53% (13/513)	2.69% (13/483)	4.78% (52/1089)	5.19% (7/135)
Heart Disease	2.44% (108/4422)	2.36% (52/2202)	1.95% (10/513)	3.11% (15/483)	2.48% (27/1089)	2.96% (4/135)
High Blood Pressure	8.53% (377/4422)	8.54% (188/2202)	8.58% (44/513)	8.90% (43/483)	8.36% (91/1089)	8.15% (11/135)
Joint Pain	10.83% (479/4422)	10.99% (242/2202)	10.53% (54/513)	9.94% (48/483)	11.02% (120/1089)	11.11% (15/135)
Lung Disease	1.67% (74/4422)	1.82% (40/2202)	2.14% (11/513)	1.04% (5/483)	1.38% (15/1089)	2.22% (3/135)
Mental Health	7.15% (316/4422)	8.04% (177/2202)	5.07% (26/513)	5.18% (25/483)	7.53% (82/1089)	4.44% (6/135)
No Health Challenges	4.57% (202/4422)	4.54% (100/2202)	4.87% (25/513)	4.55% (22/483)	4.32% (47/1089)	5.93% (8/135)
No Response	27.34% (1209/4422)	25.66% (565/2202)	26.32% (135/513)	33.13% (160/483)	26.45% (288/1089)	45.19% (61/135)
Other	4.68% (207/4422)	5.63% (124/2202)	6.04% (31/513)	3.31% (16/483)	3.31% (36/1089)	0.00% (0/135)
Overweight/Obesity	13.27% (587/4422)	13.99% (308/2202)	15.01% (77/513)	11.39% (55/483)	12.49% (136/1089)	8.15% (11/135)
Stroke	0.25% (11/4422)	0.18% (4/2202)	0.19% (1/513)	0.41% (2/483)	0.28% (3/1089)	0.74% (1/135)
Substance Use	1.45% (64/4422)	0.23% (27/2202)	2.14% (11/513)	1.45% (7/483)	1.74% (19/1089)	0.00% (0/135)

Table 8. Percentage and count for the responses of participants when asked to "Please select the top three health challenges you face". Each participant was permitted 3 selections.

Service	Mohave County (N = 1474)	Kingman (N = 734)	Havasu (N = 161)	Bullhead (N = 171)	Rural Areas (N = 363)	Unreported Location (N = 45)
Primary Care	26.3% (388/1474)	24.4% (179/734)	14.9% (24/161)	34.5% (59/171)	30.9% (112/363)	31.1% (14/45)
Dental Care	21.2% (313/1474)	14.9% (109/734)	14.9% (24/161)	28.1% (48/171)	34.2% (124/363)	17.8% (8/45)
Mental Health Care	33.2% (489/1474)	31.9% (234/734)	27.3% (44/161)	33.9% (58/171)	40.2% (146/363)	15.6% (7/45)
Urgent Care	13.4% (198/1474)	5.9% (43/734)	6.2% (10/161)	20.5% (35/171)	28.7% (104/363)	13.3% (6/45)
Emergency Department	14.9% (220/1474)	9.5% (70/734)	14.3% (23/161)	14.6% (25/171)	26.2% (95/363)	15.6% (7/45)
Specialist Care	43.4% (639/1474)	39.1% (287/734)	33.5% (54/161)	55.0% (94/171)	51.5% (187/363)	37.8% (17/45)

Table 9. Percentage and count of participants who respond No to the question "In general, are you able to use each of these services in your community when needed?".

Response Options	Kingman (N = 377)	Bullhead (N = 139)	Havasu (N = 45)	Rural Areas (N = 201)
No Specialists in my Area	10.6% (40/377)	12.2% (17/139)	11.1% (5/45)	34.8% (70/201)
Cannot Afford it	7.7% (29/377)	7.2% (10/139)	8.9% (4/45)	9.5% (19/201)
No Health Insurance	4.0% (15/377)	3.6% (5/139)	4.4% (2/45)	4.5% (9/201)
Cannot Take Time off Work	5.3% (20/377)	5.0% (7/139)	6.7% (3/45)	3.0% (6/201)
Not Applicable	0.5% (2/377)	0.7% (1/139)	0.0% (0/45)	1.0% (2/201)
I do not feel comfortable using this service in my community	10.1% (38/377)	9.4% (13/139)	13.3% (6/45)	4.0% (8/201)
I do not know if this is available in my area	0.3% (1/377)	1.4% (2/139)	2.2% (1/45)	5.0% (10/201)
They do not accept my health insurance	2.7% (10/377)	17.3% (24/139)	4.4% (2/45)	5.5% (11/201)
Appointment times do not fit my schedule	16.7% (63/377)	13.0% (18/139)	13.3% (6/45)	9.5% (19/201)
Provider is not accepting new patients	21.5% (81/377)	24.5% (34/139)	24.4% (11/45)	14.9% (30/201)
Other	5.0% (19/377)	0.0% (0/139)	4.4% (2/45)	2.0% (4/201)
Wait times are to long to get an appointment	15.7% (59/377)	5.8% (8/139)	6.7% (3/45)	6.5% (13 /201)

Table 10. Percentage and count of responses to "If you are not able to use the services of a **Primary Care Provider** (doctor, nurse practitioner, physician assistant) in your community when you need them, tell us why". Participants were permitted to make as many selections as described by their situation.

Response Options	Kingman (N = 178)	Bullhead (N = 83)	Havasu (N = 35)	Rural Areas (N = 180)
No specialists in my area	1.7% (3/178)	4.8% (4/83)	2.9% (1/35)	32.8% (59/180)
Cannot afford it	36.0% (64/178)	34.9% (29/83)	40.0% (14/35)	23.9% (43/180)
No health insurance	16.3% (29/178)	20.5% (17/83)	34.3% (12/35)	10.6% (19/180)
Cannot take time off	6.2% (11/178)	2.4% (2/83)	2.9% (1/35)	1.1% (2/180)
Not applicable	5.1% (9/178)	0.0% (0/83)	0.0% (0/35)	1.7% (3/180)
I do not feel comfortable using this service in my community	6.7% (12/178)	8.4% (7/83)	2.9% (1/35)	4.4% (8/180)
I do not know if this is available in my area	1.1% (2/178)	1.2% (1/83)	0.0% (0/35)	6.1% (11/180)
They do not accept my health insurance	8.4% (15/178)	9.6% (8/83)	2.9% (1/35)	10.6% (19/180)
Appointment times do not fit my schedule	8.4% (15/178)	8.4% (7/83)	5.7% (2/35)	1.7% (3/180)
Provider is not accepting new patients	3.4% (6/178)	9.6% (8/83)	2.9% (1/35)	5.0% (9/180)
Other	3.4% (6/178)	0.0% (0/83)	2.9% (1/35)	2.2% (4/180)
Appointment wait times are too long	3.4% (6/178)	0.0% (0/83)	2.9% (1/35)	0.0% (0/180)

Table 11. Percentage and count of responses to "If you are not able to use the services of a **Dentist, Dental Hygienist** in your community when you need the, tell us why". Participants were permitted to make as many selections as described by their situation.

Response Options	Kingman (N = 414)	Bullhead (N = 89)	Havasu (N = 67)	Rural Areas (N = 61)
No specialists in my area	14.5% (60/414)	15.7% (14/89)	134% (9/67)	23.0% (14/61)
Cannot afford it	13.0% (54/414)	14.6% (13/89)	11.9% (8/67)	6.6% (4/61)
No health insurance	3.1% (13/414)	2.2% (2/89)	6.0% (4/67)	13.1% (8/61)
Cannot take time off	3.1% (13/414)	2.2% (2/89)	0.0% (0/67)	4.9% (3/61)
Not applicable	7.0% (29/414)	18.0% (16/89)	3.0% (2/67)	1.6% (1/61)
I do not feel comfortable using this service in my community	18.1% (75/414)	18.0% (16/89)	7.5% (5/67)	8.2% (5/61)
I do not know if this is available in my area	5.3% (22/414)	2.2% (2/89)	9.0% (6/67)	8.2% (5/61)
They do not accept my health insurance	12.8% (53/414)	12.4% (11/89)	22.4% (15/67)	9.8% (6/61)
Appointment times do not fit my schedule	7.2% (30/414)	5.6% (5/89)	0.0% (0/67)	4.9% (3/61)
Provider is not accepting new patients	9.2% (38/414)	7.9% (7/89)	19.4% (13/67)	11.5% (7/61)
Other	5.1% (21/414)	0.0% (0/89)	4.5% (3/67)	3.3% (2/61)
Appointment wait times are too long	1.4% (6/414)	1.1% (1/89)	3.0% (2/67)	4.9% (3/61)

Table 12. Percentage and count of responses to, "If you are not able to use the services of a **Mental Healthcare Provider** (Therapist, Psychologist, Psychiatrist) in your community when you need them, tell us why". Participants were permitted to make as many selections as described by their situation.

Response Options	Kingman (N = 470)	Bullhead (N = 167)	Havasu (N = 76)	Rural Areas (N = 260)
No specialists in my area	34.7% (163/470)	32.9% (55/167)	21.1% (16/76)	47.7% (124/260)
Cannot afford it	7.0% (33/470)	8.4% (14/167)	6.6% (5/76)	8.1% (21/260)
No health insurance	2.6% (12/470)	3.0% (5/167)	3.9% (3/76)	3.8% (10/260)
Cannot take time off	2.1% (10/470)	1.8% (3/167)	0.0% (0/76)	1.2% (3/260)
Not applicable	4.9% (23/470)	4.8% (8/167)	2.6% (2/76)	4.6% (12/260)
I do not feel comfortable using this service in my community	10.6% (50/470)	14.4% (24/167)	23.7% (18/76)	6.2% (16/260)
I do not know if this is available in my area	4.3% (20/470)	6.0% (10/167)	3.9% (3/76)	5.4% (14/260)
They do not accept my health insurance	2.1% (10/470)	7.2% (12/167)	9.2% (7/76)	5.0% (13/260)
Appointment times do not fit my schedule	7.7% (36/470)	5.4% (9/167)	5.3% (4/76)	2.7% (7/260)
Provider is not accepting new patients	12.3% (58/470)	12.6% (21/167)	17.1% (13/76)	8.5% (22/260)
Other	3.8% (18/470)	3.0% (5/167)	5.3% (4/76)	3.5% (9/260)
Appointment wait times are too long	7.9% (37/470)	0.6% (1/167)	1.3% (1/76)	3.5% (9/260)

Table 13. Percentage and count of responses to "If you are not able to use the services of a **Specialist Doctor** (Ear doctor, cancer doctor, diabetes doctor, etc.) in your community when you need them, tell us why". Participants were permitted to make as many selections as described by their situation.

Response Options	Kingman (N = 16)	Bullhead (N = 52)	Havasu (N = 8)	Rural Areas (N = 139)
No specialists in my area	6.3% (1/16)	3.8% (2/52)	0.0% (0/8)	50.4% (70/139)
Cannot afford it	25.0% (4/16)	15.4% (8/52)	12.5% (1/8)	9.4% (13/139)
No health insurance	12.5% (2/16)	7.7% (4/52)	12.5% (1/8)	5.0% (7/139)
Cannot take time off	12.5% (2/16)	1.9% (1/52)	0.0% (0/8)	0.7% (1/139)
Not applicable	0.0% (0/16)	7.7% (4/52)	12.5% (1/8)	5.8% (8/139)
I do not feel comfortable using this service in my community	6.3% (1/16)	11.5% (6/52)	0.0% (0/8)	4.3% (6/139)
I do not know if this is available in my area	0.0% (0/16)	5.8% (3/52)	0.0% (0/8)	10.8% (15/139)
They do not accept my health insurance	12.5% (2/16)	23.1% (12/52)	37.5% (3/8)	5.0% (7/139)
Appointment times do not fit my schedule	12.5% (2/16)	9.6% (5/52)	0.0% (0/8)	1.4% (2/139)
Provider is not accepting new patients	0.0% (0/16)	3.8% (2/52)	0.0% (0/8)	2.2% (3/139)
Other	12.5% (2/16)	9.6% (5/52)	25.0% (2/8)	5.0% (7/139)

Table 14. Percentage and count of responses to "If you are not able to use the services of an **Urgent Care** in your community when you need them, tell us why". Participants were permitted to make as many selections as described by their situation.

Response Options	Kingman (N = 91)	Bullhead (N = 38)	Havasu (N = 28)	Rural Areas (N = 116)
I do not feel comfortable using this service in my community	33.0% (30/91)	31.6% (12/38)	42.9% (12/28)	5.2% (6/116)
Cannot take time off	1.1% (1/91)	2.6% (1/38)	0.0% (0/28)	1.7% (2/116)
Not applicable	12.1% (11/91)	2.6% (1/38)	3.6% (1/28)	7.8% (9/116)
Cannot afford it	20.9% (19/91)	28.9% (11/38)	10.7% (3/28)	9.5% (11/116)
No specialists in my area	1.1% (1/91)	7.9% (3/38)	0.0% (0/28)	53.4% (62/116)
No health insurance	4.4% (4/91)	7.9% (3/38)	7.1% (2/28)	4.3% (5/116)
I do not know if this is available in my area	0.0% (0/91)	0.0% (0/38)	0.0% (0/28)	7.8% (9/116)
They do not accept my health insurance	0.0% (0/91)	2.6% (1/38)	7.1% (2/28)	2.6% (3/116)
Appointment times do not fit my schedule	2.2% (2/91)	0.0% (0/38)	3.6% (1/28)	0.0% (0/116)
Provider is not accepting new patients	0.0% (0/91)	2.6% (1/38)	0.0% (0/28)	1.7% (2/116)
Other	25.3% (23/91)	13.2% (5/38)	25.0% (7/28)	6.0% (7/116)

Table 15. Percentage and count of responses to "If you are not able to use the services of an **Emergency Department** in your community when you need them, tell us why". Participants were permitted to make as many selections as described by their situation.

Response Options	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Loca- tion (N = 45)
Clinic or health center	10.65% (157/1474)	8.86% (65/734)	8.77% (15/171)	6.21% (10/161)	17.08% (62/363)	11.11% (5/45)
Doctor's office	49.19% (725/1474)	48.91% (359/734)	44.44% (76/171)	63.35% (102/161)	45.45% (165/363)	51.11% (23/45)
Emergency department	4.00% (59/1474)	2.59% (19/734)	8.19% (14/171)	1.86% (3/161)	6.34% (23/363)	0.00% (0/45)
Hospital outpatient department	1.15% (17/1474)	0.82% (6/734)	1.17% (2/171)	1.86% (3/161)	1.10% (4/363)	4.44% (2/45)
I do not go to one place most often	9.09% (134/1474)	8.99% (66/734)	12.28% (21/171)	7.45% (12/161)	9.09% (33/363)	4.44% (2/45)
No Response	2.71% (40/1474)	2.45% (18/734)	1.17% (2/171)	4.97% (8/161)	1.65% (6/363)	13.33% (6/45)
Other	0.75% (11/1474)	0.82% (6/734)	1.17% (2/171)	0.00% (0/161)	0.83% (3/363)	0.00% (0/45)
Telehealth	1.83% (27/1474)	3.27% (24/734)	1.17% (2/171)	0.62% (1/161)	0.00% (0/363)	0.00% (0/45)
Urgent Care	20.62% (304/1474)	23.30% (171/734)	21.64% (37/171)	13.66% (22/161)	18.46% (67/363)	15.56% (7/45)

Table 16. Percentage and count of responses to "Which of the following best describes the place where you most often go when you need medical care?".

Response Options	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
< 1 year	70.62% (1041/1474)	72.07% (529/734)	67.25% (115/171)	71.43% (115/161)	69.42% (252/363)	66.67% (30/45)
1-3 years	17.37% (256/1474)	15.26% (112/734)	21.05% (36/171)	20.50% (33/161)	19.01% (69/363)	13.33% (6/45)
4-6 years	4.88% (72/1474)	4.77% (35/734)	8.19% (14/171)	1.86% (3/161)	5.51% (20/363)	0.00% (0/45)
More than 6 years	4.48% (66/1474)	4.90% (36/734)	3.51% (6/171)	3.73% (6/161)	4.13% (15/363)	6.67% (3/45)
Did Not Answer	2.65% (39/1474)	3.00% (22/734)	0.00% (0/171)	2.48% (4/161)	1.93% (7/363)	13.33% (6/45)

Table 17. Percentage and count of responses to "How long has it been since you last saw a healthcare provider for a routine health checkup?".

Travel Distance	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
Less than 10 miles	57.33% (845/1474)	70.03% (514/734)	52.05% (89/171)	75.16% (121/161)	26.17% (95/363)	57.78% (26/45)
10-30 miles	20.28% (299/1474)	15.26% (112/734)	23.98% (41/171)	9.32% (15/161)	34.44% (125/363)	13.33% (6/45)
30-60 miles	9.63% (142/1474)	4.50% (33/734)	6.43% (11/171)	1.24% (2/161)	24.79% (90/363)	13.33% (6/45)
More than 60 miles	11.47% (169/1474)	8.99% (66/734)	16.96% (29/171)	13.66% (22/161)	13.77% (50/363)	4.44% (2/45)
Did Not Answer	1.29% (19/1474)	1.23% (9/734)	0.58% (1/171)	0.62% (1/161)	0.83% (3/363)	11.11% (5/45)

Table 18. Percentage and count of responses to "How far (one way) do you typically have to travel for routine health care needs?".

Medical Specialty Providers	Mohave County (N = 4422)	Kingman (N = 2202)	Bullhead City (N = 513)	Havasu (N = 483)	Rural Areas (N = 1089)	Unreported Location (N = 135)
Cardiology (heart specialty)	13.57% (600/4422)	14.26% (314/2202)	11.89% (61/513)	13.25% (64/483)	13.50% (147/1089)	10.37% (14/135)
Dermatology (skin care specialty)	3.82% (169/4422)	3.86% (85/2202)	2.92% (15/513)	5.18% (25/483)	3.49% (38/1089)	4.44% (6/135)
Endocrinology (diabetes and hormone specialty)	6.33% (280/4422)	6.58% (145/2202)	5.46% (28/513)	4.14% (20/483)	7.53% (82/1089)	3.70% (5/135)
Gastroenterology (stomach/intestine/colon specialty)	6.45% (285/4422)	6.81% (150/2202)	7.80% (40/513)	5.38% (26/483)	5.69% (62/1089)	5.19% (7/135)
Mental Health (emotional care specialty)	11.56% (511/4422)	12.26% (270/2202)	9.94% (51/513)	10.97% (53/483)	11.57% (126/1089)	8.15% (11/135)
Neurology (brain/nervous system specialty)	5.27% (233/4422)	5.81% (128/2202)	5.07% (26/513)	5.18% (25/483)	4.32% (47/1089)	5.19% (7/135)
Obstetrics/Gynecology (Women's care specialty)	9.43% (417/4422)	8.36% (184/2202)	13.26% (68/513)	9.52% (46/483)	9.64% (105/1089)	10.37% (14/135)
Oncology (cancer specialty)	6.87% (304/4422)	7.31% (161/2202)	7.02% (36/513)	8.90% (43/483)	5.33% (58/1089)	4.44% (6/135)
Orthopedics (bone and joint specialty)	8.10% (358/4422)	7.90% (174/2202)	7.41% (38/513)	9.11% (44/483)	8.08% (88/1089)	10.37% (14/135)
Pain Management (pain care specialty)	5.74% (254/4422)	4.81% (106/2202)	7.02% (36/513)	4.76% (23/483)	7.35% (80/1089)	6.67% (9/135)
Pediatrics (Children/adolescent care specialty)	8.93% (395/4422)	8.76% (193/2202)	9.75% (50/513)	10.56% (51/483)	8.63% (94/1089)	5.19% (7/135)
Pulmonology (lung specialty)	3.73% (165/4422)	3.91% (86/2202)	4.68% (24/513)	2.07% (10/483)	3.76% (41/1089)	2.96% (4/135)
Urology (urinary tract/male reproductive specialty)	3.93% (174/4422)	4.22% (93/2202)	4.29% (22/513)	5.80% (28/483)	2.39% (26/1089)	3.70% (5/135)
No Answer	6.26% (277/4422)	5.13% (113/2202)	3.51% (18/513)	5.18% (25/483)	8.72% (95/1089)	19.26% (26/135)

Table 19. Percentage and count of responses to "Thinking about your health and your community's health, what **three medical specialty providers are most important** to have in your community?". Each participant was permitted 3 selections.

Diagnostic Center	Mohave County (N = 5896)	Kingman (N = 2936)	Bullhead City (N = 684)	Havasu (N = 644)	Rural Areas (N = 1452)	Unreported Locations (N = 180)
Pharmacy	20.95% (1235/5896)	22.72% (667/2936)	21.49% (147/684)	23.14% (149/644)	16.25% (236/1452)	20.00% (36/180)
Laboratory	20.30% (1197/5896)	22.45% (659/2936)	20.91% (143/684)	22.98% (148/644)	14.67% (213/1452)	18.89% (34/180)
Imaging	18.23% (1075/5896)	21.12% (620/2936)	17.11% (117/684)	20.50% (132/644)	11.98% (174/1452)	17.78% (32/180)
No Answer	25.15% (1483/5896)	18.12% (532/2936)	28.07% (192/684)	16.61% (107/644)	40.91% (594/1452)	32.22% (58/180)
Rehabilitation centers	12.52% (738/5896)	14.48% (425/2936)	10.53% (72/684)	16.15% (104/644)	8.26% (120/1452)	9.44% (17/180)
None of the above	2.27% (134/5896)	0.68% (20/2936)	1.46% (10/684)	0.31% (2/644)	6.89% (100/1452)	1.11% (2/180)

Table 20. Percentage and count of responses to "Which of the following diagnostic centers can you access in your community?". Participants were permitted to make as many selections as described by their situation.

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Loca- tion (N = 45)
No response	1.02% (15/1474)	0.68% (5/734)	0.00% (0/171)	0.62% (1/161)	0.83% (3/363)	13.33% (6/45)
Books/magazines	0.27% (4/1474)	0.41% (3/734)	0.00% (0/171)	0.00% (0/161)	0.28% (1/363)	0.00% (0/45)
Family or Friend	6.04% (89/1474)	6.54% (48/734)	6.43% (11/171)	1.24% (2/161)	7.44% (27/363)	2.22% (1/45)
Health fairs, lectures, or other public health events	0.47% (7/1474)	0.41% (3/734)	2.34% (4/171)	0.00% (0/161)	0.00% (0/363)	0.00% (0/45)
Healthcare Professional (doctor, nurse, physician assistant, dentist)	45.73% (674/1474)	45.50% (334/734)	38.60% (66/171)	55.28% (89/161)	45.73% (166/363)	42.22% (19/45)
Internet	44.44% (655/1474)	43.32% (318/734)	50.29% (86/171)	42.86% (69/161)	44.90% (163/363)	42.22% (19/45)
Other	0.07% (1/1474)	0.14% (1/734)	0.00% (0/171)	0.00% (0/161)	0.00% (0/363)	0.00% (0/45)
Workplace resources (occupational health, onsite nurse, etc.)	1.97% (29/1474)	3.00% (22/734)	2.34% (4/171)	0.00% (0/161)	0.83% (3/363)	0.00% (0/45)

Table 21. Percentage and count of responses to "If you have a question about your health, where do you most often go for answers?".

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
Never	5.50% (81/1474)	5.18% (38/734)	4.68% (8/171)	3.11% (5/161)	7.44% (27/363)	6.67% (3/45)
Sometimes	31.68% (467/1474)	27.66% (203/734)	35.67% (61/171)	28.57% (46/161)	40.22% (146/363)	24.44% (11/45)
Always	62.01% (914/1474)	66.49% (488/734)	59.65% (102/171)	67.70% (109/161)	52.07% (189/363)	57.78% (26/45)
Did Not Answer	0.81% (12/1474)	0.68% (5/734)	0.00% (0/171)	0.62% (1/161)	0.28% (1/363)	11.11% (5/45)

Table 22. Percentage and count of responses to "On a monthly basis, do you have enough money to pay for essentials such as food, clothing and housing?".

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
Never	14.59% (215/1474)	12.40% (91/734)	16.96% (29/171)	11.18% (18/161)	20.39% (74/363)	6.67% (3/45)
Sometimes	41.45% (611/1474)	42.64% (313/734)	45.03% (77/171)	33.54% (54/161)	42.70% (155/363)	26.67% (12/45)
Always	43.15% (636/1474)	44.55% (327/734)	38.01% (65/171)	54.66% (88/161)	36.09% (131/363)	55.56% (25/45)
Did Not Answer	0.81% (12/1474)	0.41% (3/734)	0.00% (0/171)	0.62% (1/161)	0.83% (3/363)	11.11% (5/45)

Table 23. Percentage and count of responses to "On a monthly basis, do you have enough money to pay for health care expenses (e.g. doctor bills, medications, etc.)?".

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
0 days	19.00% (280/1474)	17.98% (132/734)	19.30% (33/171)	21.12% (34/161)	19.56% (71/363)	22.22% (10/45)
1-5 days	31.82% (469/1474)	32.02% (235/734)	27.49% (47/171)	36.02% (58/161)	30.58% (111/363)	40.00% (18/45)
6-10 days	14.45% (213/1474)	13.90% (102/734)	15.20% (26/171)	14.91% (24/161)	15.15% (55/363)	13.33% (6/45)
11-15 days	9.91% (146/1474)	10.08% (74/734)	11.70% (20/171)	6.21% (10/161)	11.29% (41/363)	2.22% (1/45)
16 or more days	24.08% (355/1474)	25.48% (187/734)	26.32% (45/171)	21.74% (35/161)	22.87% (83/363)	11.11% (5/45)
Did Not Answer	0.75% (11/1474)	0.54% (4/734)	0.00% (0/171)	0.00% (0/161)	0.55% (2/363)	11.11% (5/45)

Table 24. Percentage and count of responses to "During the past 30 days, how many days have you felt worried, tense or anxious?"

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
Never	19.00% (280/1474)	17.98% (132/734)	19.30% (33/171)	21.12% (34/161)	19.56% (71/363)	22.22% (10/45)
Hardly Ever	31.82% (469/1474)	32.02% (235/734)	27.49% (47/171)	36.02% (58/161)	30.58% (111/363)	40.00% (18/45)
Some of the time	14.45% (213/1474)	13.90% (102/734)	15.20% (26/171)	14.91% (24/161)	15.15% (55/363)	13.33% (6/45)
Most of the time	9.91% (146/1474)	10.08% (74/734)	11.70% (20/171)	6.21% (10/161)	11.29% (41/363)	2.22% (1/45)
Every Day	24.08% (355/1474)	25.48% (187/734)	26.32% (45/171)	21.74% (35/161)	22.87% (83/363)	11.11% (5/45)
Did Not Answer	0.75% (11/1474)	0.54% (4/734)	0.00% (0/171)	0.00% (0/161)	0.55% (2/363)	11.11% (5/45)

Table 25. Percentage and count of responses to "During the past 30 days, how often have you felt isolated from others?".

Responses	Mohave County (N = 4422)	Kingman (N = 2202)	Bullhead City (N = 513)	Havasu (N = 483)	Rural Areas (N = 1089)	Unreported Loca- tion (N = 135)
No Answer	62.03% (2743/4422)	62.72% (1381/2202)	59.84% (307/513)	62.32% (301/483)	60.61% (660/1089)	69.63% (94/135)
Alcohol	10.11% (447/4422)	9.85% (217/2202)	10.33% (53/513)	12.84% (62/483)	9.64% (105/1089)	7.41% (10/135)
Stimulants	0.36% (16/4422)	0.32% (7/2202)	0.58% (3/513)	0.21% (1/483)	0.46% (5/1089)	0.00% (0/135)
Hallucinogens	0.09% (4/4422)	0.14% (3/2202)	0.00% (0/513)	0.00% (0/483)	0.09% (1/1089)	0.00% (0/135)
Inhalants	0.07% (3/4422)	0.05% (1/2202)	0.00% (0/513)	0.21% (1/483)	0.09% (1/1089)	0.00% (0/135)
Marijuana	3.62% (160/4422)	2.72% (60/2202)	5.46% (28/513)	4.76% (23/483)	4.32% (47/1089)	1.48% (2/135)
No substance use	16.53% (731/4422)	17.08% (376/2202)	16.57% (85/513)	14.91% (72/483)	15.98% (174/1089)	17.78% (24/135)
None	0.11% (5/4422)	0.18% (4/2202)	0.00% (0/513)	0.00% (0/483)	0.09% (1/1089)	0.00% (0/135)
Opioids	1.09% (48/4422)	1.04% (23/2202)	0.78% (4/513)	1.04% (5/483)	1.29% (14/1089)	1.48% (2/135)
Other	0.27% (12/4422)	0.18% (4/2202)	0.39% (2/513)	0.21% (1/483)	0.46% (5/1089)	0.00% (0/135)
Sedatives/Anxiolytics/ Hypnotic	0.93% (41/4422)	0.86% (19/2202)	0.39% (2/513)	0.83% (4/483)	1.38% (15/1089)	0.74% (1/135)
Stimulants	0.47% (21/4422)	0.45% (10/2202)	0.78% (4/513)	0.21% (1/483)	0.55% (6/1089)	0.00% (0/135)
Tobacco products	4.32% (191/4422)	4.41% (97/2202)	4.87% (25/513)	2.48% (12/483)	5.05% (55/1089)	1.48% (2/135)

Table 26. Percentage and count of responses to "In the last 30 days, which substances have you used?". Participants were permitted to make as many selections as described by their situation.

Access to Parks	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	69.20% (1020/1474)	76.70% (563/734)	74.85% (128/171)	84.47% (136/161)	45.18% (164/363)	64.44% (29/45)
Somewhat Easy	15.88% (234/1474)	13.90% (102/734)	17.54% (30/171)	11.18% (18/161)	21.21% (77/363)	15.56% (7/45)
Neither Easy nor Difficult	5.50% (81/1474)	4.50% (33/734)	4.09% (7/171)	3.11% (5/161)	9.92% (36/363)	0.00% (0/45)
Somewhat Difficult	2.31% (34/1474)	1.36% (10/734)	2.92% (5/171)	0.00% (0/161)	4.68% (17/363)	4.44% (2/45)
Very Difficult	5.29% (78/1474)	2.04% (15/734)	0.58% (1/171)	0.62% (1/161)	16.53% (60/363)	2.22% (1/45)
Did Not Answer	1.83% (27/1474)	1.50% (11/734)	0.00% (0/171)	0.62% (1/161)	2.48% (9/363)	13.33% (6/45)

Table 27. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Parks or playground".

Access to Grocery Stores	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	71.71% (1057/1474)	78.61% (577/734)	77.78% (133/171)	89.44% (144/161)	47.93% (174/363)	64.44% (29/45)
Somewhat Easy	14.31% (211/1474)	13.76% (101/734)	16.37% (28/171)	8.07% (13/161)	17.36% (63/363)	13.33% (6/45)
Neither Easy nor Difficult	5.97% (88/1474)	4.77% (35/734)	3.51% (6/171)	1.86% (3/161)	11.85% (43/363)	2.22% (1/45)
Somewhat Difficult	2.31% (34/1474)	1.36% (10/734)	2.34% (4/171)	0.00% (0/161)	5.51% (20/363)	0.00% (0/45)
Very Difficult	4.34% (64/1474)	0.54% (4/734)	0.00% (0/171)	0.00% (/161)	15.70% (57/363)	6.67% (3/45)
Did Not Answer	1.36% (20/1474)	0.95% (7/734)	0.00% (0/171)	0.62% (1/161)	1.65% (6/363)	13.33% (6/45)

Table 28. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Supermarkets or grocery stores".

Access to Exercise and Wellness Class	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	48.51% (715/1474)	57.90% (425/734)	46.20% (79/171)	64.60% (104/161)	23.69% (86/363)	46.67% (21/45)
Somewhat Easy	20.83% (307/1474)	22.21% (163/734)	22.22% (38/171)	21.12% (34/161)	17.91% (65/363)	15.56% (7/45)
Neither Easy nor Diffi- cult	15.47% (228/1474)	12.40% (91/734)	16.37% (28/171)	9.32% (15/161)	24.24% (88/363)	13.33% (6/45)
Somewhat Difficult	5.70% (84/1474)	3.95% (29/734)	11.11% (19/171)	3.11% (5/161)	8.26% (30/363)	2.22% (1/45)
Very Difficult	6.99% (103/1474)	1.63% (12/734)	2.92% (5/171)	0.00% (0/161)	22.87% (83/363)	6.67% (3/45)
Did Not Answer	2.51% (37/1474)	1.91% (14/734)	1.17% (2/171)	1.86% (3/161)	3.03% (11/363)	15.56% (7/45)

Table 29. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Exercise and Wellness Class".

Access to Farmer's Market	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	29.72% (438/1474)	33.92% (249/734)	29.24% (50/171)	33.54% (54/161)	19.28% (70/363)	33.33% (15/45)
Somewhat Easy	25.98% (383/1474)	27.66% (203/734)	28.07% (48/171)	22.98% (37/161)	23.14% (84/363)	24.44% (11/45)
Neither Easy nor Difficult	21.71% (320/1474)	18.66% (137/734)	28.07% (48/171)	24.22% (39/161)	24.52% (89/363)	15.56% (7/45)
Somewhat Difficult	8.48% (125/1474)	7.90% (58/734)	9.94% (17/171)	8.07% (13/161)	9.37% (34/363)	6.67% (3/45)
Very Difficult	10.79% (159/1474)	9.67% (71/734)	2.92% (5/171)	05.59% (9/161)	20.11% (73/363)	2.22% (1/45)
Did Not Answer	3.32% (49/1474)	2.18% (16/734)	1.75% (3/171)	5.59% (9/161)	3.58% (13/363)	17.78% (8/45)

Table 30. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Farmer's Market/Farm Stands".

Access to Primary Care Provider	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	48.30% (712/1474)	51.91% (381/734)	47.95% (82/171)	63.98% (103/161)	34.71% (126/363)	44.44% (20/45)
Somewhat Easy	22.25% (328/1474)	23.30% (171/734)	17.54% (30/171)	19.25% (31/161)	24.24% (88/363)	17.78% (8/45)
Neither Easy nor Difficult	13.84% (204/1474)	12.67% (93/734)	20.47% (35/171)	8.07% (13/161)	16.25% (59/363)	8.89% (4/45)
Somewhat Difficult	7.67% (113/1474)	8.99% (66/734)	9.36% (16/171)	5.59% (9/161)	5.23% (19/363)	6.67% (3/45)
Very Difficult	5.83% (86/1474)	1.63% (12/734)	4.09% (7/171)	1.24% (2/161)	17.36% (63/363)	4.44% (2/45)
Did Not Answer	2.10% (31/1474)	1.50% (11/734)	0.58% (1/171)	1.86% (3/161)	2.20% (8/363)	17.78% (8/45)

Table 31. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Primary Care Provider (Doctor, nurse practitioner, physician assistance)".

Access to Specialist Doctor	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	26.73% (394/1474)	29.84% (219/734)	25.73% (44/171)	40.37% (65/161)	15.70% (57/363)	20.00% (9/45)
Somewhat Easy	19.54% (288/1474)	22.07% (162/734)	18.71% (32/171)	21.12% (34/161)	14.05% (51/363)	20.00% (9/45)
Neither Easy nor Difficult	22.39% (330/1474)	22.75% (167/734)	24.56% (42/171)	19.25% (31/161)	22.87% (83/363)	15.56% (7/45)
Somewhat Difficult	16.89% (249/1474)	17.44% (128/734)	16.37% (28/171)	14.29% (23/161)	17.63% (64/363)	13.33% (6/45)
Very Difficult	12.14% (179/1474)	5.99% (44/734)	14.04% (24/171)	3.11% (5/161)	27.82% (101/363)	11.11% (5/45)
Did Not Answer	2.31% (34/1474)	1.91% (14/734)	0.58% (1/171)	1.86% (3/161)	1.93% (7/363)	20.00% (9/45)

Table 32. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Specialist doctor (Heart doctor, cancer doctor, diabetes doctor, etc.)".

Access to Mental Health Services	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	29.17% (430/1474)	31.47% (231/734)	33.92% (58/171)	40.99% (66/161)	18.18% (66/363)	20.00% (9/45)
Somewhat Easy	17.84% (263/1474)	19.21% (141/734)	16.96% (29/171)	17.39% (28/161)	16.25% (59/363)	13.33% (6/45)
Neither Easy nor Difficult	19.34% (285/1474)	19.35% (142/734)	17.54% (30/171)	17.39% (28/161)	22.04% (80/363)	11.11% (5/45)
Somewhat Difficult	13.23% (195/1474)	14.58% (107/734)	13.45% (23/171)	10.56% (17/161)	11.85% (43/363)	11.11% (5/45)
Very Difficult	11.26% (166/1474)	5.99% (44/734)	8.77% (15/171)	4.97% (8/161)	25.90% (94/363)	11.11% (5/45)
Did Not Answer	9.16% (135/1474)	9.40% (69/734)	9.36% (16/171)	8.70% (14/161)	5.79% (21/363)	33.33% (15/45)

Table 33. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Mental Health Services".

Access to Urgent Care	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	58.48% (862/1474)	68.94% (506/734)	59.06% (101/171)	72.05% (116/161)	31.96% (116/363)	51.11% (23/45)
Somewhat Easy	19.27% (284/1474)	18.80% (138/734)	20.47% (35/171)	18.63% (30/161)	20.39% (74/363)	15.56% (7/45)
Neither Easy nor Difficult	9.50% (140/1474)	6.68% (49/734)	11.11% (19/171)	5.59% (9/161)	16.80% (61/363)	4.44% (2/45)
Somewhat Difficult	3.93% (58/1474)	2.86% (21/734)	5.85% (10/171)	1.86% (3/161)	5.79% (21/363)	6.67% (3/45)
Very Difficult	6.45% (95/1474)	0.54% (4/734)	2.92% (5/171)	0.62% (1/161)	22.59% (82/363)	6.67% (3/45)
No Response	2.37% (35/1474)	2.18% (16/734)	0.58% (1/171)	1.24% (2/161)	2.48% (9/363)	15.56% (7/45)

Table 34. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Urgent Care".

Access to Emergency Department	Mohave County (N=1474)	Kingman (N=734)	Bullhead City (N=171)	Havasu (N=161)	Rural Areas (N=363)	Unreported Location (N=45)
Very Easy	59.97% (884/1474)	67.85% (498/734)	67.84% (116/171)	67.08% (108/161)	38.02% (138/363)	53.33% (24/45)
Somewhat Easy	16.69% (246/1474)	18.26% (134/734)	14.62% (25/171)	13.04% (21/161)	16.25% (59/363)	15.56% (7/45)
Neither Easy nor Difficult	9.36% (138/1474)	6.68% (49/734)	9.94% (17/171)	9.32% (15/161)	15.43% (56/363)	2.22% (1/45)
Somewhat Difficult	4.61% (68/1474)	3.41% (25/734)	4.68% (8/171)	6.83% (11/161)	6.06% (22/363)	4.44% (2/45)
Very Difficult	6.78% (100/1474)	1.23% (9/734)	2.34% (4/171)	1.24% (2/161)	22.59% (82/363)	6.67% (3/45)
No Response	2.58% (38/1474)	2.59% (19/734)	0.58% (1/171)	2.48% (4/161)	1.65% (6/363)	17.78% (8/45)

Table 35. Percentage and count of responses to "Please indicate how easy it would be for you to get to each of these places in your community if you wanted to go there. Emergency Department".

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
0 times	13.91% (205/1474)	14.71% (108/734)	14.62% (25/171)	9.94% (16/161)	13.77% (50/363)	13.33% (6/45)
1-2 times	32.29% (476/1474)	34.20% (251/734)	30.41% (52/171)	26.71% (43/161)	31.96% (116/363)	31.11% (14/45)
3-5 times	34.26% (505/1474)	34.20% (251/734)	30.99% (53/171)	43.48% (70/161)	33.33% (121/363)	22.22% (10/45)
6 or more	18.66% (275/1474)	16.49% (121/734)	23.39% (40/171)	19.88% (32/161)	20.11% (73/363)	20.00% (9/45)
No Response	0.88% (13/1474)	0.41% (3/734)	0.58% (1/171)	0.00% (0/161)	0.83% (3/363)	13.33% (6/45)

Table 36. Percentage and count of responses to "How many days in the past week have you been physically active for 30 minutes or more?".

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
We had enough but not always the kinds of food we want.	27.41% (404/1474)	25.07% (184/734)	30.41% (52/171)	24.22% (39/161)	32.78% (119/363)	22.22% (10/45)
We had enough of the kinds of food we want to eat.	61.19% (902/1474)	63.76% (468/734)	59.06% (101/171)	68.94% (111/161)	53.72% (195/363)	60.00% (27/45)
We often did not have enough to eat.	3.32% (49/1474)	3.13% (23/734)	2.34% (4/171)	1.24% (2/161)	5.23% (19/363)	2.22% (1/45)
We sometimes did not have enough to eat.	7.12% (105/1474)	7.36% (54/734)	08.19% (14/171)	5.59% (9/161)	7.44% (27/363)	2.22% (1/45)
No Response	0.95% (14/1474)	0.68% (5/734)	0.00% (0/171)	0.00% (0/161)	0.83% (3/363)	13.33% (6/45)

Table 37. Percentage and count of responses to "Which of these statements best describes your household in the last 12 months?".

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	(Havasu N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
No option near me	5.63% (83/1474)	3.68% (27/734)	2.92% (5/171)	3.73% (6/161)	12.12% (44/363)	2.22% (1/45)
Very Difficult	6.85% (101/1474)	6.27% (46/734)	8.19% (14/171)	6.21% (10/161)	7.99% (29/363)	4.44% (2/45)
Somewhat Difficult	14.59% (215/1474)	11.85% (87/734)	13.45% (23/171)	9.94% (16/161)	23.42% (85/363)	8.89% (4/45)
Neither Easy nor Difficult	13.09% (193/1474)	12.81% (94/734)	12.87% (22/171)	11.80% (19/161)	14.33% (52/363)	13.33% (6/45)
Somewhat Easy	25.17% (371/1474)	28.20% (207/734)	22.22% (38/171)	18.63% (30/161)	23.69% (86/363)	22.22% (10/45)
Very Easy	33.58% (495/1474)	36.38% (267/734)	39.77% (68/171)	49.69% (80/161)	17.63% (64/363)	35.56% (16/45)
No Response	1.09% (16/1474)	0.82% (6/734)	0.58% (1/171)	0.00% (0/161)	0.83% (3/363)	13.33% (6/45)

Table 38. Percentage and count of responses to "If you or your neighbors wanted to purchase fresh fruits and vegetables near your home, how easy is this for you?"

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
Convenience store	1.36% (20/1474)	0.54% (4/734)	0.58% (1/171)	1.24% (2/161)	3.58% (13/363)	0.00% (0/45)
Fast food restaurant	1.15% (17/1474)	1.23% (9/734)	1.75% (3/171)	1.86% (3/161)	0.28% (1/363)	2.22% (1/45)
Food pantry	3.87% (57/1474)	2.59% (19/734)	2.92% (5/171)	0.62% (1/161)	8.54% (31/363)	2.22% (1/45)
Grocery store	92.47% (1363/1474)	94.69% (695/734)	93.57% (160/171)	96.27% (155/161)	87.05% (316/363)	82.22% (37/45)
Sit down restaurant	0.27% (4/1474)	0.41% (3/734)	0.58% (1/171)	0.00% (0/161)	0.00% (0/363)	0.00% (0/45)
No Response	0.88% (13/1474)	0.54% (4/734)	0.58% (1/171)	0.00% (0/161)	0.55% (2/363)	13.33% (6/45)

Table 39. Percentage and count of responses for "Where do you get most of your food?"

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Responses	Mohave County (N = 4422)	Kingman (N = 2202)	Bullhead City (N = 513)	Havasu (N = 483)	Rural Areas (N = 1089)	Unreported Loca- tion (N = 135)
Cost of food	24.29% (1074/4422)	24.84% (547/2202)	23.98% (123/513)	22.36% (108/483)	24.61% (268/1089)	20.74% (28/135)
Coupons, promotions, or discounted food	7.69% (340/4422)	8.08% (178/2202)	6.63% (34/513)	9.73% (47/483)	6.89% (75/1089)	4.44% (6/135)
Food that I grew up eating	0.81% (36/4422)	0.95% (21/2202)	0.58% (3/513)	0.21% (1/483)	0.83% (9/1089)	1.48% (2/135)
Food that is healthy	16.40% (725/4422)	16.85% (371/2202)	15.20% (78/513)	16.56% (80/483)	16.16% (176/1089)	14.81% (20/135)
Food that my family will like and eat	10.36% (458/4422)	10.35% (228/2202)	10.72% (55/513)	0.97% (53/483)	10.47% (114/1089)	5.93% (8/135)
How long the food will last in my home	6.72% (297/4422)	5.77% (127/2202)	8.58% (44/513)	6.83% (33/483)	7.90% (86/1089)	5.19% (7/135)
Quality of food	18.68% (826/4422)	19.80% (436/2202)	18.52% (95/513)	18.43% (89/483)	17.17% (187/1089)	14.07% (19/135)
Taste of food	4.59% (203/4422)	4.59% (101/2202)	5.07% (26/513)	4.76% (23/483)	4.32% (47/1089)	4.44% (6/135)
No response	10.47% (463/4422)	8.76% (193/2202)	10.72% (55/513)	10.14% (49/483)	11.66% (127/1089)	28.89% (39/135)

Table 40. Percentage and count of responses for "When shopping for groceries, what matters most to you?" Participants were permitted to make as many selections as described by their situation.

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Response Options	Mohave County (N = 4422)	Kingman (N=2202)	Bullhead City (N=513)	Havasu (N=483)	Rural Areas (N=1089)	Unreported Loca- tion (N=135)
No Response	3.21% (142/4422)	2.13% (47/2202)	1.36% (7/513)	4.55% (22/483)	4.32% (47/1089)	14.07% (19/135)
Air, water, the environment	3.57% (158/4422)	2.68% (59/2202)	4.68% (24/513)	3.93% (19/483)	4.50% (49/1089)	5.19% (7/135)
Chronic diseases such as cancer, diabetes, asthma	3.23% (143/4422)	3.27% (72/2202)	3.31% (17/513)	2.69% (13/483)	3.12% (34/1089)	5.19% (7/135)
Crime other than violent crime, such as theft, littering, graffiti, noise	5.43% (240/4422)	5.90% (130/2202)	6.24% (32/513)	3.11% (15/483)	5.42% (59/1089)	2.96% (4/135)
Dental/oral health issues	1.67% (74/4422)	1.00% (22/2202)	2.92% (15/513)	2.69% (13/483)	2.02% (22/1089)	1.48% (2/135)
Education, schools	7.87% (348/4422)	7.58% (167/2202)	10.14% (52/513)	8.70% (42/483)	6.98% (76/1089)	8.15% (11/135)
Falls, motor vehicle accidents, other injuries	1.92% (85/4422)	1.27% (28/2202)	2.14% (11/513)	1.86% (9/483)	3.21% (35/1089)	1.48% (2/135)
Housing, homelessness	10.63% (470/4422)	11.44% (252/2202)	13.06% (67/513)	12.22% (59/483)	6.98% (76/1089)	11.85% (16/135)
Infectious diseases such as flu, sexually transmitted diseases, or Covid-19	0.61% (27/4422)	0.59% (13/2202)	0.78% (4/513)	0.83% (4/483)	0.46% (5/1089)	0.74% (1/135)
Job opportunities, income, pov- erty	13.57% (600/4422)	13.17% (290/2202)	11.70% (60/513)	15.94% (77/483)	14.51% (158/1089)	11.11% (15/135)
Mental/emotional health issues such as dementia, depression, suicide	7.60% (336/4422)	8.13% (179/2202)	6.63% (34/513)	6.42% (31/483)	7.53% (82/1089)	7.41% (10/135)
Not Applicable	0.38% (17/4422)	0.32% (7/2202)	0.39% (2/513)	0.62% (3/483)	0.46% (5/1089)	0.00% (0/135)
Nutrition/healthy food options	4.21% (186/4422)	4.63% (102/2202)	1.95% (10/513)	1.86% (9/483)	5.33% (58/1089)	5.19% (7/135)
Obesity	2.28% (101/4422)	3.00% (66/2202)	1.56% (8/513)	1.66% (8/483)	1.65% (18/1089)	0.74% (1/135)
Other	0.32% (14/4422)	0.27% (6/2202)	0.19% (1/513)	0.62% (3/483)	0.37% (4/1089)	0.00% (0/135)
Racism or discrimination based on age, sex, race, sexual orientation	1.67% (74/4422)	1.95% (43/2202)	1.17% (6/513)	2.07% (10/483)	1.29% (14/1089)	0.74% (1/135)
Safe places for walking, biking, exercise	3.39% (150/4422)	3.68% (81/2202)	2.14% (11/513)	4.14% (20/483)	3.31% (36/1089)	1.48% (2/135)
Social connection/sense of com- munity	2.46% (109/4422)	2.45% (54/2202)	1.75% (9/513)	3.11% (15/483)	2.66% (29/1089)	1.48% (2/135)
Specialty medical care	7.55% (334/4422)	6.86% (151/2202)	9.75% (50/513)	8.90% (43/483)	7.25% (79/1089)	8.15% (11/135)
Substance use disorders, including alcohol, drugs, tobacco addictions	10.54% (466/4422)	12.17% (268/2202)	12.09% (62/513)	6.42% (31/483)	8.91% (97/1089)	5.93% (8/135)
Teen pregnancy	0.25% (11/4422)	0.41% (9/2202)	0.19% (1/513)	0.00% (0/483)	0.09% (1/1089)	0.00% (0/135)
Transportation	3.75% (166/4422)	2.00% (44/2202)	2.73% (14/513)	4.76% (23/483)	7.16% (78/1089)	5.19% (7/135)
Violent crime, including domestic violence, child abuse	3.87% (171/4422)	5.09% (112/2202)	3.12% (16/513)	2.90% (14/483)	2.48% (27/1089)	1.48% (2/135)

Table 41. Percentage and Count for the responses of participants when asked to "Select three issues you feel are most important to the health of the community." Each participant was permitted 3 selections.

Responses	Mohave County (N = 1474)	Kingman (N = 734)	Bullhead City (N = 171)	Havasu (N = 161)	Rural Areas (N = 363)	Unreported Location (N = 45)
Very Unhealthy	10.65% (157/1474)	13.35% (98/734)	10.53% (18/171)	3.73% (6/161)	8.82% (32/363)	6.67% (3/45)
Unhealthy	32.02% (472/1474)	38.15% (280/734)	33.33% (57/171)	6.83% (11/161)	31.13% (113/363)	24.44% (11/45)
Somewhat Healthy	39.69% (585/1474)	36.78% (270/734)	40.94% (70/171)	47.20% (76/161)	42.42% (154/363)	33.33% (15/45)
Healthy	12.14% (179/1474)	7.90% (58/734)	11.70% (20/171)	30.43% (49/161)	12.12% (44/363)	17.78% (8/45)
Very Healthy	2.65% (39/1474)	1.63% (12/734)	2.34% (4/171)	8.70% (14/161)	2.20% (8/363)	2.22% (1/45)
No Answer	2.85% (42/1474)	2.18% (16/734)	1.17% (2/171)	3.11% (5/161)	3.31% (12/363)	15.56% (7/45)

Table 42. Percentage and count of the responses of participants to "How would you rate the overall health of the community?".

Responses	Mohave County (N = 4422)	Kingman (N = 2202)	Bullhead City (N = 513)	Havasu (N = 483)	Rural Areas (N = 1089)	Unreported Location (N = 135)
No Response	43.40% (1919/4422)	43.14% (950/2202)	38.01% (195/513)	24.43% (118/483)	53.90% (587/1089)	51.11% (69/135)
Access to healthcare facilities	5.47% (242/4422)	6.58% (145/2202)	4.48% (23/513)	4.14% (20/483)	4.22% (46/1089)	5.93% (8/135)
Access to parks and recreation sites	17.19% (760/4422)	18.85% (415/2202)	21.83% (112/513)	20.91% (101/483)	10.28% (112/1089)	14.81% (20/135)
Access to public libraries and community centers	12.03% (532/4422)	12.94% (285/2202)	13.65% (70/513)	12.63% (61/483)	9.27% (101/1089)	11.11% (15/135)
Access to safe walking and biking routes	5.40% (239/4422)	5.81% (128/2202)	6.82% (35/513)	6.63% (32/483)	3.76% (41/1089)	2.22% (3/135)
Clean environments and streets	5.97% (264/4422)	4.27% (94/2202)	7.80% (40/513)	12.42% (60/483)	5.60% (61/1089)	6.67% (9/135)
Low crime/safe neighborhoods	7.62% (337/4422)	5.90% (130/2202)	5.26% (27/513)	18.43% (89/483)	7.44% (81/1089)	7.41% (10/135)
None	1.54% (68/4422)	1.18% (26/2202)	1.36% (7/513)	0.21% (1/483)	3.03% (33/1089)	0.74% (1/135)
Other	1.38% (61/4422)	1.32% (29/2202)	0.78% (4/513)	0.21% (1/483)	2.48% (27/1089)	0.00% (0/135)

Table 43. Percentage and count for the responses of participants to "What are the **greatest strengths** of your community?". Each participant was permitted 3 selections.

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Responses	Mohave County (N = 4422)	Kingman (N = 2202)	Bullhead City (N = 513)	Havasu (N = 483)	Rural Areas (N = 1089)	Unreported Location (N = 135)
None	8.30% (367/4422)	6.99% (154/2202)	5.07% (26/513)	10.97% (53/483)	9.64% (105/1089)	21.48% (29/135)
Aging problems	13.16% (582/4422)	11.90% (262/2202)	13.26% (68/513)	17.18% (83/483)	14.14% (154/1089)	11.11% (15/135)
Cancers	5.74% (254/4422)	5.90% (130/2202)	3.70% (19/513)	8.70% (42/483)	5.05% (55/1089)	5.93% (8/135)
Child abuse/neglect	5.52% (244/4422)	6.54% (144/2202)	6.24% (32/513)	3.52% (17/483)	3.95% (43/1089)	5.93% (8/135)
Dental problems	4.18% (185/4422)	4.00% (88/2202)	4.87% (25/513)	2.69% (13/483)	5.14% (56/1089)	2.22% (3/135)
Diabetes	5.43% (240/4422)	6.04% (133/2202)	3.51% (18/513)	4.35% (21/483)	5.79% (63/1089)	3.70% (5/135)
Domestic Violence	6.49% (287/4422)	7.08% (156/2202)	7.02% (36/513)	7.25% (35/483)	5.23% (57/1089)	2.22% (3/135)
Firearm-related injuries	0.90% (40/4422)	1.32% (29/2202)	0.97% (5/513)	0.21% (1/483)	0.46% (5/1089)	0.00% (0/135)
Heart disease and stroke	6.74% (298/4422)	6.18% (136/2202)	6.24% (32/513)	10.97% (53/483)	6.06% (66/1089)	8.15% (11/135)
High blood pressure	3.73% (165/4422)	3.77% (83/2202)	2.34% (12/513)	3.52% (17/483)	4.22% (46/1089)	5.19% (7/135)
HIV/AIDS	0.07% (3/4422)	0.09% (2/2202)	0.00% (0/513)	0.00% (0/483)	0.09% (1/1089)	0.00% (0/135)
Homicide	1.15% (51/4422)	1.77% (39/2202)	0.58% (3/513)	0.21% (1/483)	0.64% (7/1089)	0.74% (1/135)
Infectious disease	0.88% (39/4422)	1.27% (28/2202)	0.58% (3/513)	0.21% (1/483)	0.37% (4/1089)	2.22% (3/135)
Mental health problems	19.54% (864/4422)	21.53% (474/2202)	21.64% (111/513)	13.87% (67/483)	17.91% (195/1089)	12.59% (17/135)
Motor vehicle crash injuries	7.49% (331/4422)	4.72% (104/2202)	12.67% (65/513)	8.28% (40/483)	10.65% (116/1089)	4.44% (6/135)
Other	0.88% (39/4422)	0.73% (16/2202)	1.56% (8/513)	0.41% (2/483)	1.01% (11/1089)	1.48% (2/135)
Rape/sexual assault	0.57% (25/4422)	0.64% (14/2202)	0.19% (1/513)	0.21% (1/483)	0.73% (8/1089)	0.74% (1/135)
Respiratory/lung disease	3.55% (157/4422)	3.22% (71/2202)	4.09% (21/513)	2.07% (10/483)	4.41% (48/1089)	5.19% (7/135)
Sexually Transmitted Infections	0.84% (37/4422)	0.82% (18/2202)	0.78% (4/513)	0.83% (4/483)	0.73% (8/1089)	2.22% (3/135)
Substance abuse	1.40% (62/4422)	1.77% (39/2202)	1.75% (9/513)	0.62% (3/483)	1.01% (11/1089)	0.00% (0/135)
Suicide	2.60% (115/4422)	2.77% (61/2202)	2.53% (13/513)	2.90% (14/483)	2.20% (24/1089)	2.22% (3/135)
Teenage pregnancy	0.84% (37/4422)	0.95% (21/2202)	0.39% (2/513)	1.04% (5/483)	0.55% (6/1089)	2.22% (3/135)

Table 44. Percentage and count for the responses of participants when asked "What do you think are the **three most important** "health problems" in our community?". (Those problems which have the greatest impact on overall community health) Each participant was permitted 3 selections.

Appendix 6 - Community Health Needs Assessment 2024 Data Tables

Responses	Mohave County (N = 4422)	Kingman (N = 2202)	Bullhead City (N = 513)	Havasu (N = 483)	Rural Areas (N = 1089)	Unreported Loca- tion (N = 135)
Alcohol abuse	14.81% (655/4422)	13.90% (306/2202)	14.42% (74/513)	17.81% (86/483)	15.79% (172/1089)	12.59% (17/135)
Being overweight	9.54% (422/4422)	10.81% (238/2202)	7.41% (38/513)	9.11% (44/483)	8.17% (89/1089)	9.63% (13/135)
Dropping out of school	5.56% (246/4422)	5.86% (129/2202)	6.04% (31/513)	3.93% (19/483)	5.88% (64/1089)	2.22% (3/135)
Drug abuse	23.02% (1018/4422)	24.75% (545/2202)	24.17% (124/513)	19.67% (95/483)	21.03% (229/1089)	18.52% (25/135)
Lack of exercise	6.81% (301/4422)	6.54% (144/2202)	6.82% (35/513)	6.63% (32/483)	7.81% (85/1089)	3.70% (5/135)
Lack of maternity care	14.81% (655/4422)	13.90% (306/2202)	14.42% (74/513)	17.81% (86/483)	15.79% (172/1089)	12.59% (17/135)
None	6.67% (295/4422)	5.04% (111/2202)	3.90% (20/513)	8.28% (40/483)	8.36% (91/1089)	24.44% (33/135)
Not getting "shots" to prevent disease	3.46% (153/4422)	3.81% (84/2202)	2.34% (12/513)	5.18% (25/483)	2.57% (28/1089)	2.96% (4/135)
Not using birth control	1.70% (75/4422)	1.73% (38/2202)	1.75% (9/513)	1.24% (6/483)	1.93% (21/1089)	0.74% (1/135)
Not using seat belts/child safety seats	1.85% (82/4422)	1.41% (31/2202)	1.75% (9/513)	1.86% (9/483)	3.03% (33/1089)	0.00% (0/135)
Other	1.15% (51/4422)	1.00% (22/2202)	1.75% (9/513)	1.04% (5/483)	1.29% (14/1089)	0.74% (1/135)
Poor eating habits	10.38% (459/4422)	10.31% (227/2202)	10.14% (52/513)	10.56% (51/483)	10.74% (117/1089)	8.89% (12/135)
Racism	2.67% (118/4422)	3.27% (72/2202)	2.53% (13/513)	2.28% (11/483)	1.74% (19/1089)	2.22% (3/135)
Tobacco use	4.64% (205/4422)	4.45% (98/2202)	5.46% (28/513)	4.76% (23/483)	4.68% (51/1089)	3.70% (5/135)
Unsafe sex	2.51% (111/4422)	2.50% (55/2202)	3.51% (18/513)	2.90% (14/483)	1.65% (18/1089)	4.44% (6/135)
Unsecured firearms	2.94% (130/4422)	3.32% (73/2202)	2.34% (12/513)	2.28% (11/483)	2.57% (28/1089)	4.44% (6/135)

Table 45. Percentage and count for the responses of participants when asked "What do you think are the **three physical, social, and economic circumstances** that are most responsible for health issues in our community?". Each participant was permitted 3 selections.

Appendix 6 - Community Health Needs Assessment 2024 Data Tables

Responses	Mohave County (N = 4422)	Kingman (N = 2202)	Bullhead City (N = 513)	Havasu (N = 483)	Rural Areas (N = 1089)	Unreported Loca- tion (N = 135)
None	4.70% (208/4422)	2.86% (63/2202)	1.75% (9/513)	9.11% (44/483)	6.24% (68/1089)	17.78% (24/135)
Climate change	0.29% (13/4422)	0.14% (3/2202)	0.97% (5/513)	0.41% (2/483)	0.28% (3/1089)	0.00% (0/135)
Cost of childcare	3.75% (166/4422)	3.68% (81/2202)	3.12% (16/513)	6.83% (33/483)	2.94% (32/1089)	2.96% (4/135)
Cultural barriers	0.75% (33/4422)	0.68% (15/2202)	0.19% (1/513)	0.41% (2/483)	1.38% (15/1089)	0.00% (0/135)
Disconnected families	5.99% (265/4422)	6.36% (140/2202)	5.65% (29/513)	4.55% (22/483)	5.97% (65/1089)	6.67% (9/135)
Health care costs	10.45% (462/4422)	10.17% (224/2202)	9.55% (49/513)	13.46% (65/483)	10.19% (111/1089)	9.63% (13/135)
Homelessness	8.62% (381/4422)	10.40% (229/2202)	10.72% (55/513)	6.63% (32/483)	4.96% (54/1089)	8.15% (11/135)
Lack of access to trails, bike paths, parks	0.95% (42/4422)	0.86% (19/2202)	0.97% (5/513)	0.62% (3/483)	1.38% (15/1089)	0.00% (0/135)
Lack of affordable housing	12.55% (555/4422)	12.44% (274/2202)	12.67% (65/513)	21.53% (104/483)	9.00% (98/1089)	10.37% (14/135)
Lack of education	7.46% (330/4422)	9.13% (201/2202)	8.19% (42/513)	2.69% (13/483)	5.79% (63/1089)	8.15% (11/135)
Lack of providers	13.52% (598/4422)	12.67% (279/2202)	15.01% (77/513)	13.04% (63/483)	14.42% (157/1089)	16.30% (22/135)
Lack of transportation	3.73% (165/4422)	2.18% (48/2202)	3.12% (16/513)	4.14% (20/483)	7.35% (80/1089)	0.74% (1/135)
Language barriers	0.32% (14/4422)	0.18% (4/2202)	0.19% (1/513)	0.83% (4/483)	0.46% (5/1089)	0.00% (0/135)
Not enough access to healthy food	4.03% (178/4422)	3.45% (76/2202)	2.92% (15/513)	2.28% (11/483)	6.61% (72/1089)	2.96% (4/135)
Other	0.97% (43/4422)	1.23% (27/2202)	0.19% (1/513)	1.66% (8/483)	0.46% (5/1089)	1.48% (2/135)
Poverty	13.66% (604/4422)	14.67% (323/2202)	15.98% (82/513)	7.04% (34/483)	14.14% (154/1089)	8.15% (11/135)
Racism and discrimination	1.49% (66/4422)	1.77% (39/2202)	1.36% (7/513)	1.66% (8/483)	1.10% (12/1089)	0.00% (0/135)
Unemployment	6.76% (299/4422)	7.13% (157/2202)	7.41% (38/513)	3.11% (15/483)	7.35% (80/1089)	6.67% (9/135)

Table 46. Percentage and count for the responses of participants when asked "What do you think are the **three physical, social, and economic circumstances** that are most responsible for health issues in our community? "Each participant was permitted 3 selections.

Responses	Mohave County (N = 4422)	Kingman (N = 2202)	Bullhead City (N = 513)	Havasu (N = 483)	Rural Areas (N = 1089)	Unreported Loca- tion (N = 135)
Declined to answer	4.64% (205/4422)	2.72% (60/2202)	2.92% (15/513)	6.21% (30/483)	7.07% (77/1089)	17.04% (23/135)
Affordable housing	16.78% (742/4422)	16.98% (374/2202)	16.18% (83/513)	23.60% (114/483)	13.68% (149/1089)	16.30% (22/135)
Clean environment & Clean water	3.39% (150/4422)	2.77% (61/2202)	2.53% (13/513)	2.28% (11/483)	5.51% (60/1089)	3.70% (5/135)
Good jobs and healthy economy	18.23% (806/4422)	19.07% (420/2202)	17.93 (92/513)	17.60% (85/483)	17.81% (194/1089)	11.11% (15/135)
Good place to raise children	4.27% (189/4422)	4.63% (102/2202)	5.07% (26/513)	4.55% (22/483)	3.31% (36/1089)	2.22% (3/135)
Good schools	10.04% (444/4422)	10.54% (232/2202)	11.89% (61/513)	9.73% (47/483)	8.45% (92/1089)	8.89% (12/135)
Increased law enforcement	6.15% (272/4422)	6.04% (133/2202)	5.65% (29/513)	3.93% (19/483)	7.35% (80/1089)	8.15% (11/135)
Low crime/safe neighbor- hoods	7.80% (345/4422)	8.67% (191/2202)	9.16% (74/513)	6.42% (31/483)	6.43% (70/1089)	4.44% (6/135)
More diagnostic centers	1.74% (77/4422)	1.54% (34/2202)	1.36% (7/513)	1.86% (9/483)	2.11% (23/1089)	2.96% (4/135)
More healthcare providers	18.27% (808/4422)	18.44% (406/2202)	18.71% (96/513)	16.36% (79/483)	18.82% (205/1089)	16.30% (22/135)
Treatment facilities for chronic health conditions	7.24% (320/4422)	7.13% (157/2202)	6.82% (35/513)	6.00% (29/483)	7.99% (87/1089)	8.89% (12/135)
Other	1.45% (64/4422)	1.45% (32/2202)	1.75% (9/513)	1.45% (7/483)	1.47% (16/1089)	0.00% (0/135)

Table 47. Percentage and count for responses of participants when asked "Please choose the **three most important** factors that you think will **improve the quality of life** in your community." Each participant was permitted 3 selections.

Appendix 6 - Community Health Needs Assessment 2024 Data Tables

Responses	Mohave County (N = 2948)	Kingman (N = 1468)	Bullhead City (N = 342)	Havasu (N = 322)	Rural Areas (N = 726)	Unreported Lo- cation (N = 90)
None	6.95% (205/2948)	4.50% (66/1468)	4.39% (15/342)	9.32% (30/322)	10.06% (73/726)	23.33% (21/90)
Education about resources	9.67% (285/2948)	9.47% (139/1468)	8.77% (30/342)	11.80% (38/322)	10.06% (73/726)	5.56% (5/90)
Events about substance use disorders	2.58% (76/2948)	2.52% (37/1468)	1.17% (4/342)	2.48% (8/322)	3.17% (23/726)	4.44% (4/90)
In-patient treatment facilities	14.59% (430/2948)	16.89% (248/1468)	16.96% (58/342)	13.35% (43/322)	9.64% (70/726)	12.22% (11/90)
Mental health resources	22.69% (669/2948)	24.25% (356/1468)	23.10% (79/342)	19.25% (62/322)	21.49% (156/726)	17.78% (16/90)
Non-addictive medications	5.43% (160/2948)	4.77% (70/1468)	5.56% (19/342)	3.73% (12/322)	7.58% (55/726)	4.44% (4/90)
Other	1.42% (42/2948)	1.84% (27/1468)	1.17% (4/342)	1.55% (5/322)	0.69% (5/726)	1.11% (1/90)
Police involvement	9.19% (271/2948)	8.65% (127/1468)	8.77% (30/342)	7.45% (24/322)	11.43% (83/726)	7.78% (7/90)
Programs for youth	18.39% (542/2948)	19.28% (283/1468)	21.64% (74/342)	19.25% (62/322)	15.29% (111/726)	13.33% (12/90)
Support from employers	2.24% (66/2948)	2.38% (35/1468)	1.75% (6/342)	2.48% (8/322)	2.07% (15/726)	2.22% (2/90)
Support groups	6.85% (202/2948)	5.45% (80/1468)	6.73% (23/342)	9.32% (30/322)	8.54% (62/726)	7.78% (7/90)

Table 48. Percentage and count for responses of participants when asked "What resources would help reduce drug and alcohol abuse in the community?" Participants were permitted to make as many selections as described by their situation.

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