

DELAWARE HEALTH TRENDS

SEPTEMBER 25, 2023

Division of Public Health
Department of Health and Social Services

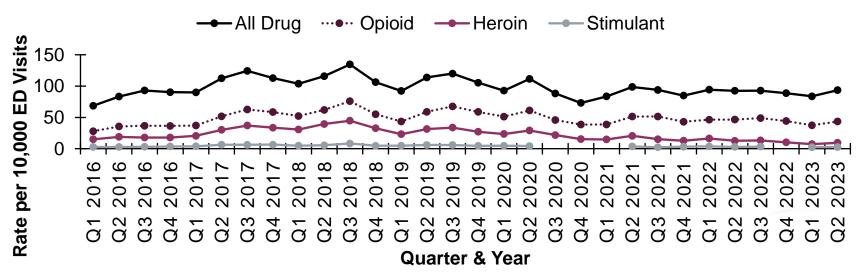


OFFICE OF HEALTH CRISIS RESPONSE

Caroline Judd, MPH
Katie Capelli
Substance Use Disorder Epidemiologist, Office of Health Crisis Response
Division of Public Health
Department of Health and Social Services

REVERSING THE OPIOID CRISIS

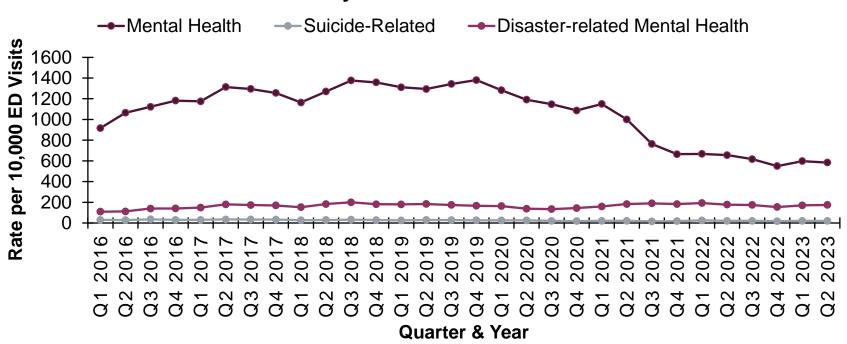
Quarterly suspected non-fatal drug overdose rates, Emergency Department visits, by drug type, Delaware residents, January 2016 to June 2023



Data Sources: Delaware Health and Social Services, Division of Public Health, Delaware Health Statistics Center; Spencer MR, Miniño AM, Warner M. Drug overdose deaths in the United States, 2001–2021. NCHS Data Brief, no 457. Hyattsville, MD: National Center for Health Statistics. 2022. DOI: https://dx.doi.org/10.15620/cdc:122556.

Notes: *Rate for 2022 is preliminary and subject to change. Age-adjusted rates are based on the 2000 US standard population. Population estimates are from the Delaware Population Consortium.

Quarterly suspected mental health visits, Emergency visits, by mental health condition, Delaware residents, January 2016 to June 2023

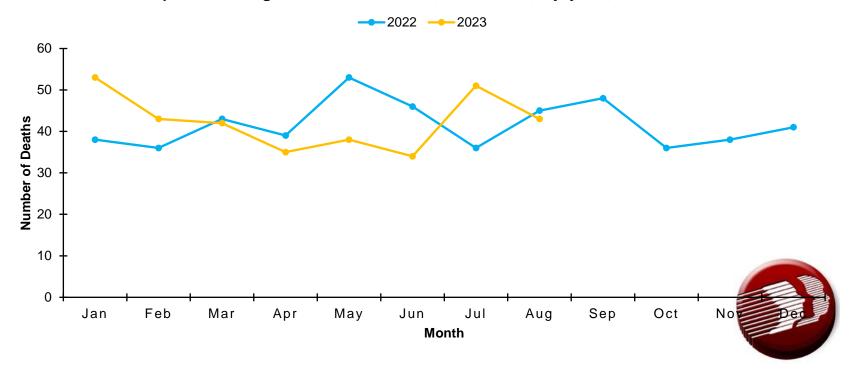


Data source: Delaware Department Health and Social Services, Division of Public, Health Statistics Center and Delaware Electronic Surveillance System for the Early Notification of Community-based Epidemics (DE-ESSENCE).

Notes: Mental health, suicide-related, and disaster-related mental health were defined using syndromic surveillance definitions found in the National Syndromic Surveillance Platform (NSSP) and utilized in the Overdose Data to Action Technical Guidance for the Drug Overdose Surveillance and Epidemiology (DOSE) System, as of August 30, 2022.

OVERDOSE DEATH TRENDS

Suspected Drug Overdose Deaths, Delaware, by year, 2022-2023

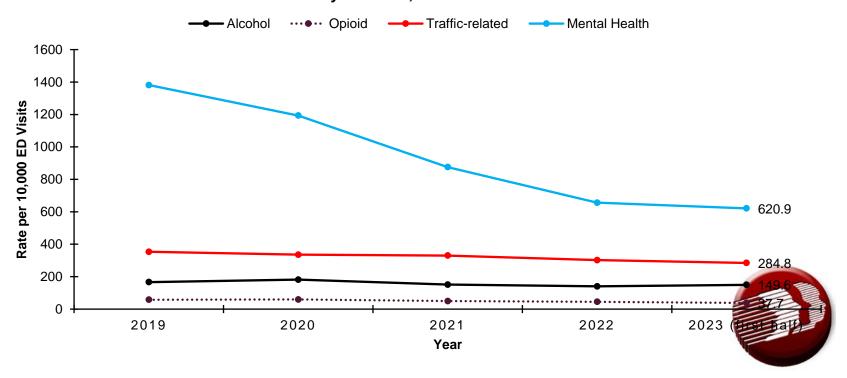


Data source: Delaware Department of Safety and Homeland Security, Division of Forensic Science.

 $A vailable \ at \ My \ Healthy \ Community, \ \underline{https://myhealthycommunity.dhss.delaware.gov/topics/drug-overdose-deaths/locations/state}, \ accessed \ 9.18.2023.$

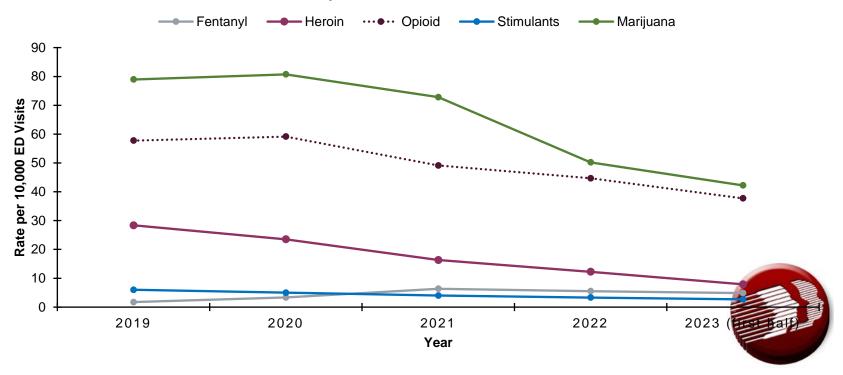
EMERGENCY VISIT TRENDS

Annual emergency department visits, Delaware residents, by suspected syndrome, 2019-2023



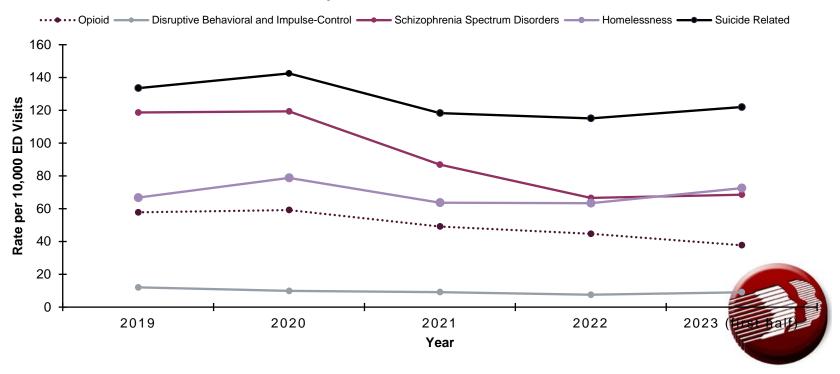
EMERGENCY VISIT TRENDS: DRUG-RELATED

Annual emergency department visits, Delaware residents, by suspected syndrome, 2019-2023



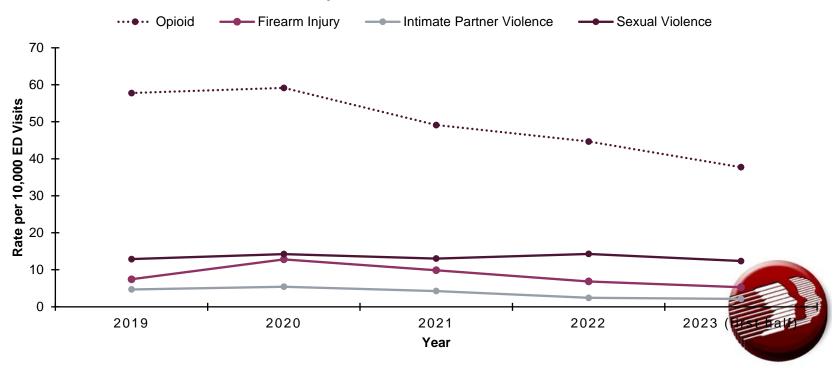
EMERGENCY VISIT TRENDS: MENTAL HEALTH

Annual emergency department visits, Delaware residents, by suspected syndrome, 2019-2023



EMERGENCY VISIT TRENDS: VIOLENCE

Annual emergency department visits, Delaware residents, by suspected syndrome, 2019-2023





HEALTH PROMOTION AND DISEASE PREVENTION

Helen Arthur, MHA
Section Chief, Health Promotion and Disease Prevention
Division of Public Health
Department of Health and Social Services

HEALTH PROMOTION & DISEASE PREVENTION DATA TRENDS

Chronic Disease (Delaware and U.S)

Smoking/Vaping Data

Diabetes and Prediabetes Data

Physical Activity & Nutrition Data

Big Four (4) Cancers Data
(Breast, Lung, Colorectal and Prostate)

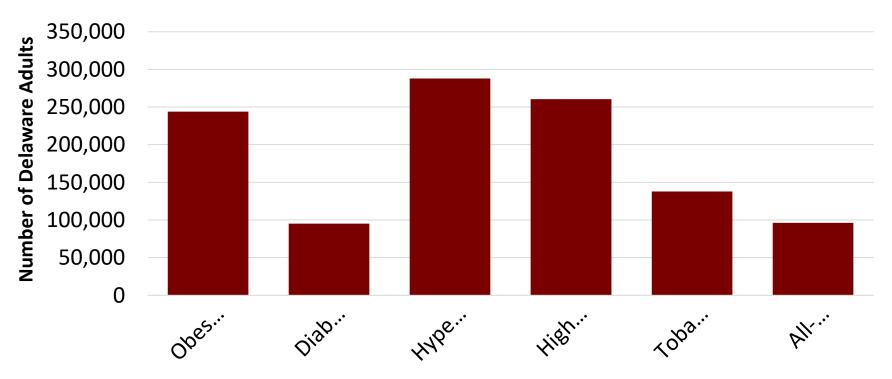






CHRONIC DISEASES

Number of Delaware Adults by Selected Chronic Disease



Chronic Diseases Data Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 2021 *Cancer Data Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Cancer Registry, 2022

QUALITY BENCHMARK FOR TOBACCO USE











13.4

%

of adults smoke cigarettes 18.3

%

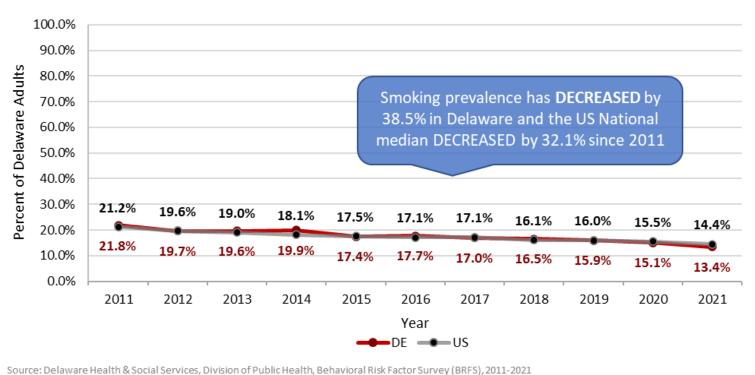
of high school youth currently 1,400

adults die from smokingrelated illnesses each year \$532

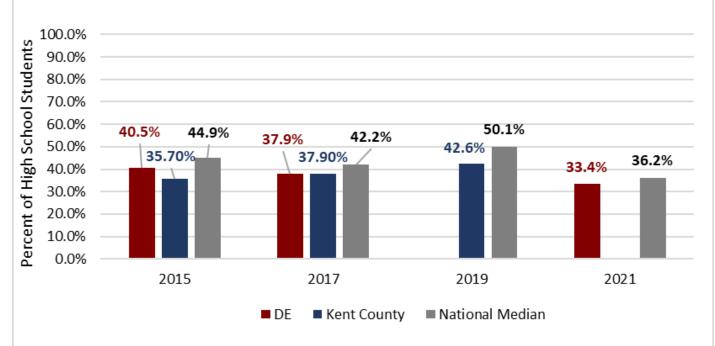
M

was spent on healthcare due to smoking in 2009

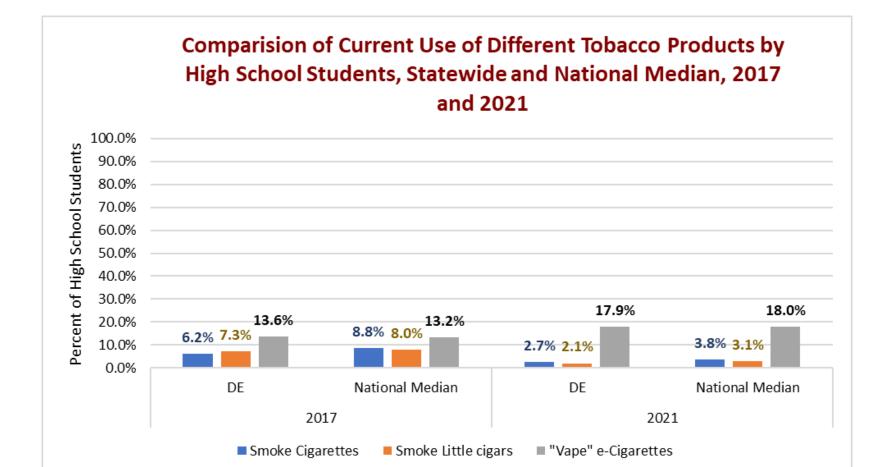




High School Students who EVER Used Electronic Vapor Products, 2015-2021

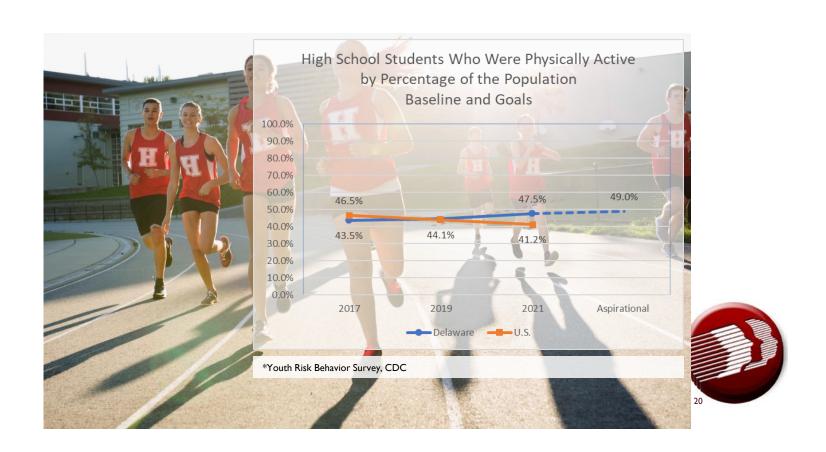


Source: Delaware Health & Social Services, Division of Public Health, Youth Risk Behavior Survey (YRBSS), 1999-2021

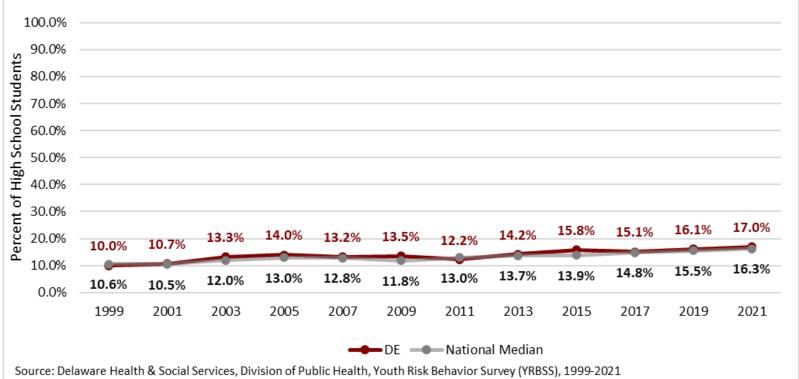


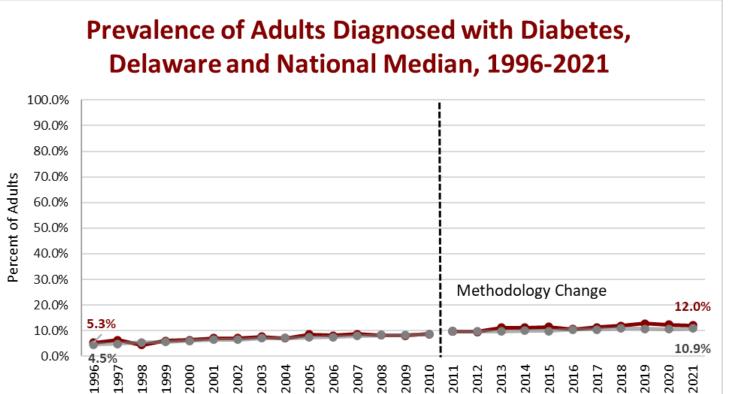
Source: Delaware Health & Social Services, Division of Public Health, Youth Risk Behavior Survey (YRBSS), 2017 & 2021

QUALITY BENCHMARK FOR HIGH SCHOOL STUDENTS WHO WERE PHYSICALLY ACTIVE



High School Students Who Are Obese, DE and National Median, 1999-2021





Year
National Median

Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 1995-2021

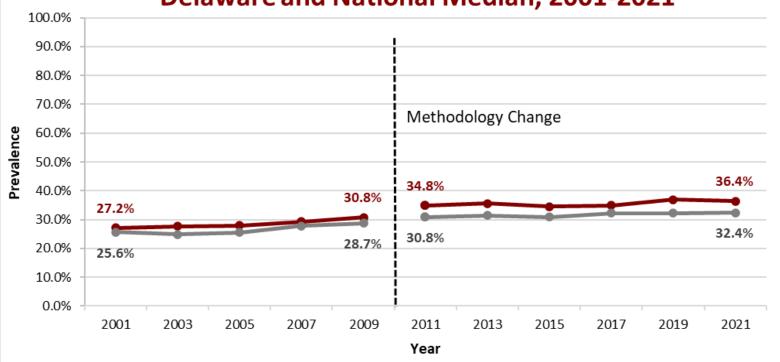
◆DE

DIABETES BY OBESITY/OVERWEIGHT

- **Obesity:** 18.7 percent of obese Delaware adults have diabetes, compared to 3.5 percent of normal weight Delaware adults.
- **Overweight:** 12.6 percent of overweight Delaware adults have diabetes, compared to 3.5 percent of normal weight Delaware adults.







Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 2001-2021

COVID-19 AND CHRONIC DISEASE

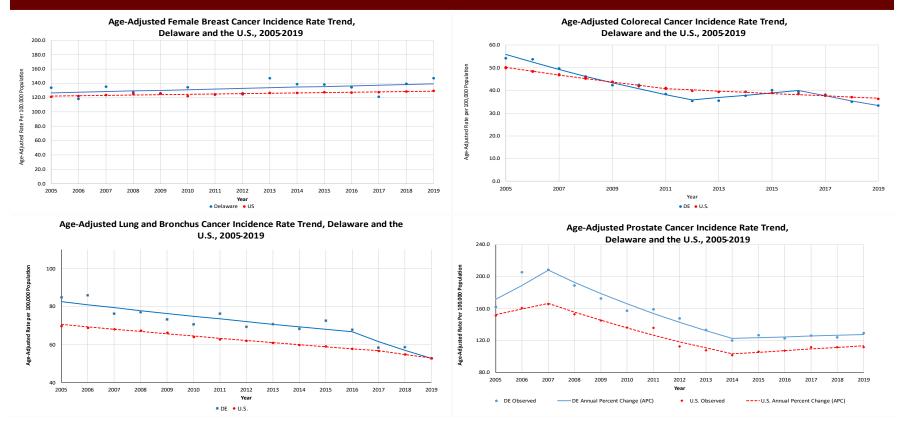
- Linked to increased severe illness and negative outcomes:
 - OBESITY
 - PREDIABETES
 - DIABETES
 - HYPERTENSION
- COVID-19 Illness is also linked to new onset diabetes
 - Could affect diabetes prevalence estimates in the upcoming years





CANCER SCREENING

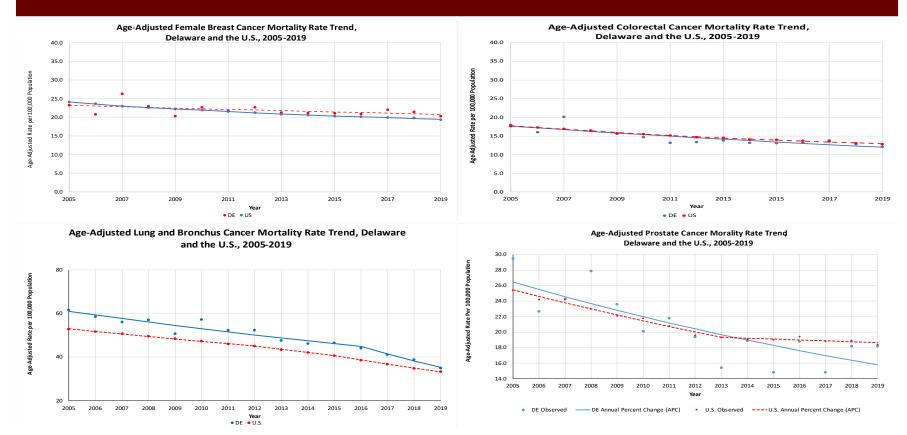
"BIG 4" Cancer Age-Adjusted Incidence Rate Trends



Source (U.S.): Delaware Department of Health and Social Services, Division of Public Health, Delaware Cancer Registry, 2005-2019

Source (U.S.): National Program of Cancer Registries and Surveillance, Epidemiology, and End Results Program SEER*Stat Database: U.S. Cancer Statistics 2001–2019 Public Use Research Database, 2021 submission Rates are per 100,000 of population age-adjusted to the 2000 U.S. standard population.

"BIG 4" Cancer Age-Adjusted Mortality Rate Trends



Source (U.S.): Delaware Department of Health and Social Services, Division of Public Health, Delaware Cancer Registry, 2005-2019

Source (U.S.): National Program of Cancer Registries and Surveillance, Epidemiology, and End Results Program SEER*Stat Database: U.S. Cancer Statistics 2001–2019 Public Use Research Database, 2021 submission Rates are per 100,000 of population age-adjusted to the 2000 U.S. standard population.

LUNG CANCER SCREENING ELIGIBILITY

Among Current or Former Delaware Smokers Ages 55-80:

17% - 22%

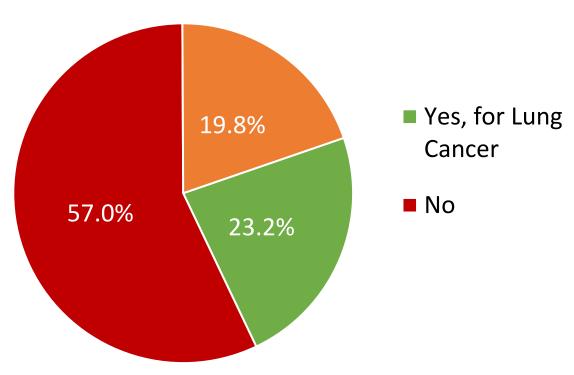
Among Delaware Adults Ages 55-80:

8% - 11%

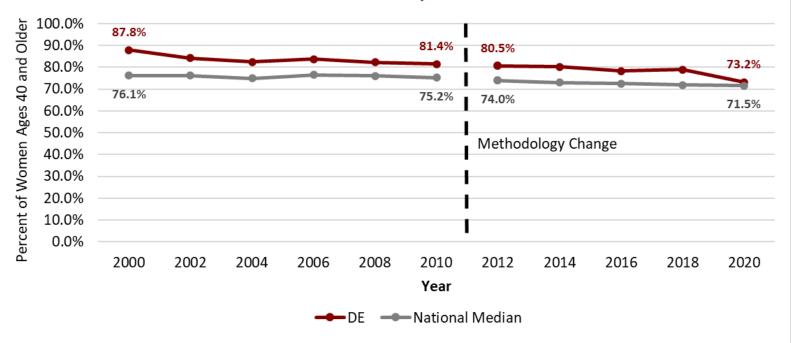
Among Total Delaware Population:

4% - 6%

LUNG CANCER SCREENING AMONG ELIGIBLE DELAWARE ADULTS

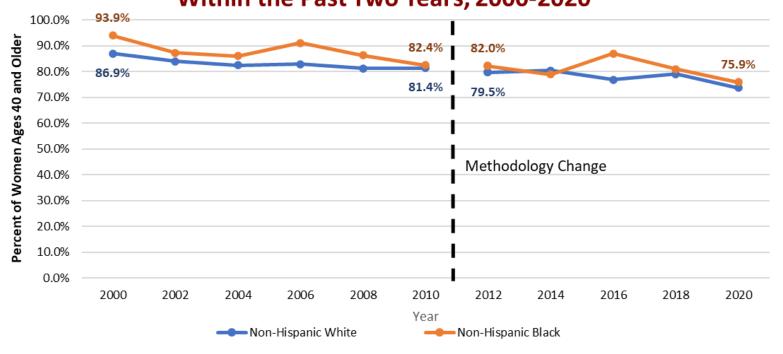






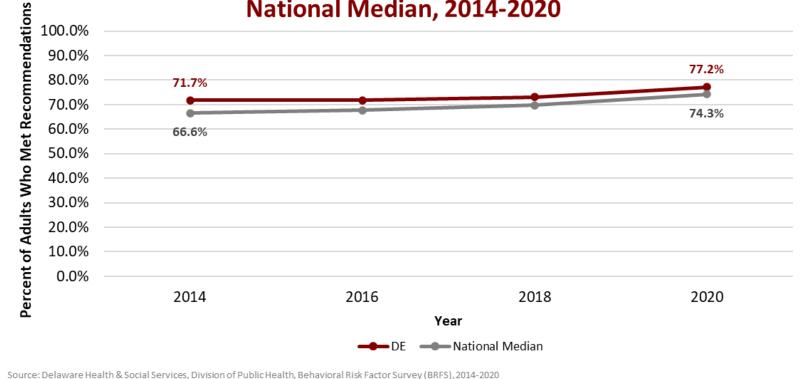
Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 2000-2020

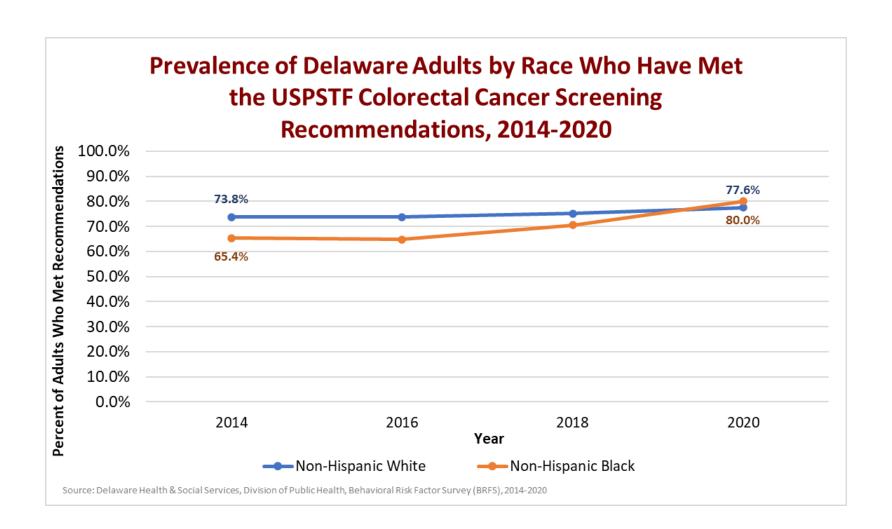




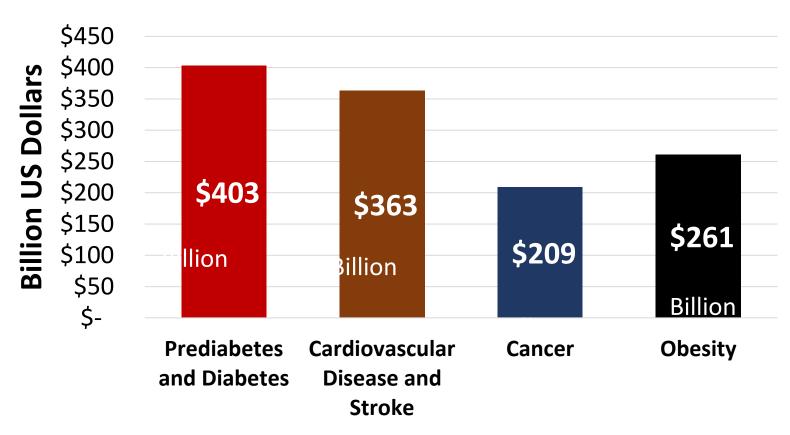
Source: Delaware Health & Social Services, Division of Public Health, Behavioral Risk Factor Survey (BRFS), 2000-2020

Percent of Adults Ages 50-74 who Met USPSTF Colorectal Cancer Screening Recommendations, Delaware and National Median, 2014-2020





NATIONAL CHRONIC DISEASE AND OBESITY COSTS ESTIMATES





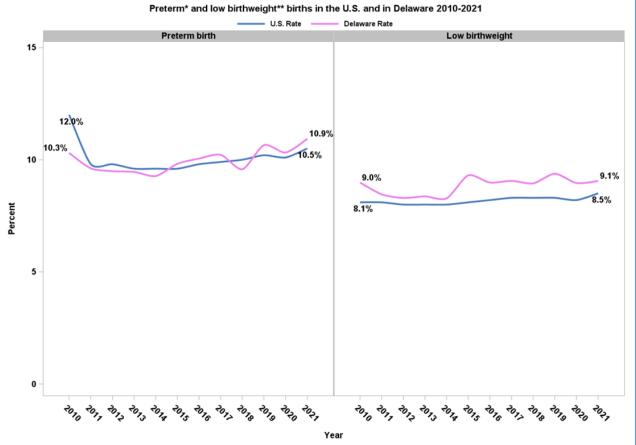
THANK YOU! QUESTION?



MATERNAL AND CHILD HEALTH

Leah Woodall, MPH Section Chief, Family Health Systems

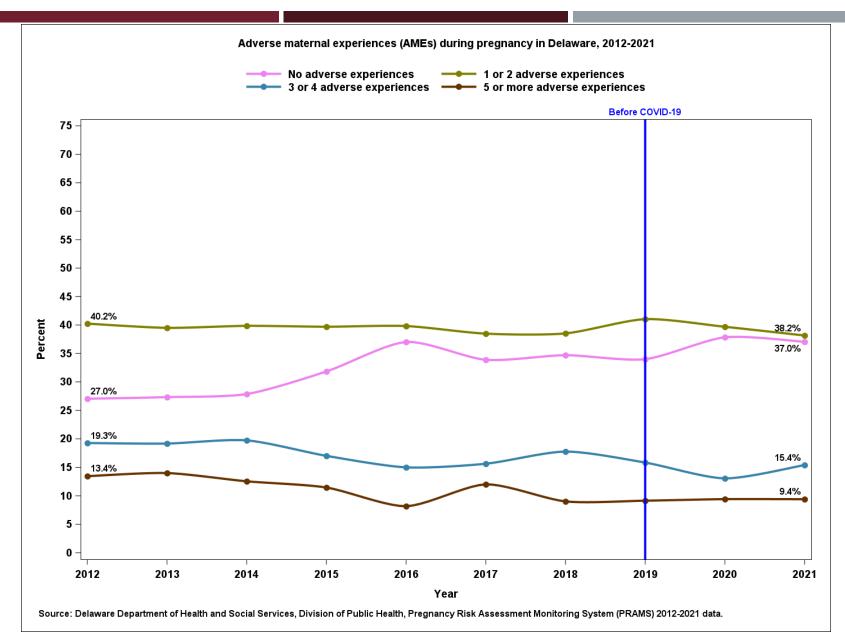
Presenting on her behalf: Christina Farmer, Director, Community Health Promotions Division of Public Health Department of Health and Social Services

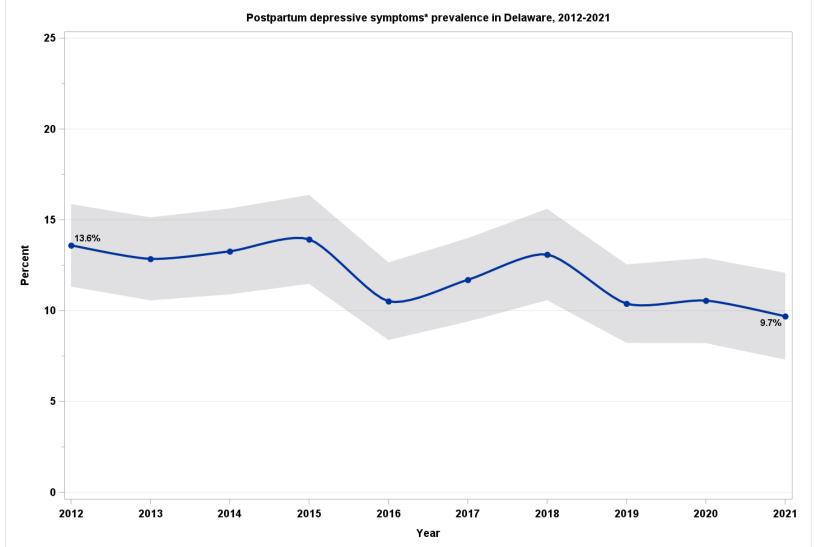


Delaware's preterm births (<37 weeks gestation) and low birth weight (<2,500 grams or 5lbs 8oz.) rates is higher than the U.S. rates.

^{*}Preterm is defined as infants born <37 weeks of gestation

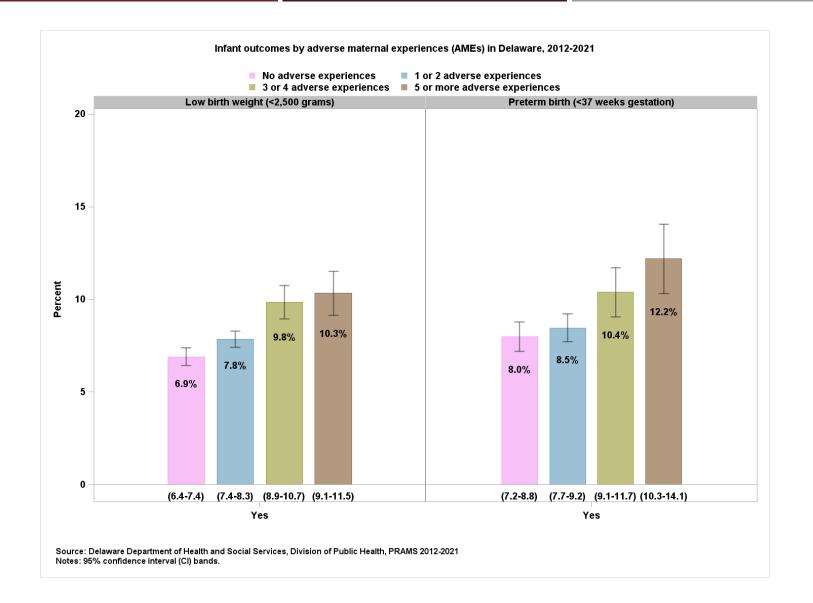
^{**}Lowbirth weight is defined as infants born <2,500 grams or 5lbs 8oz.



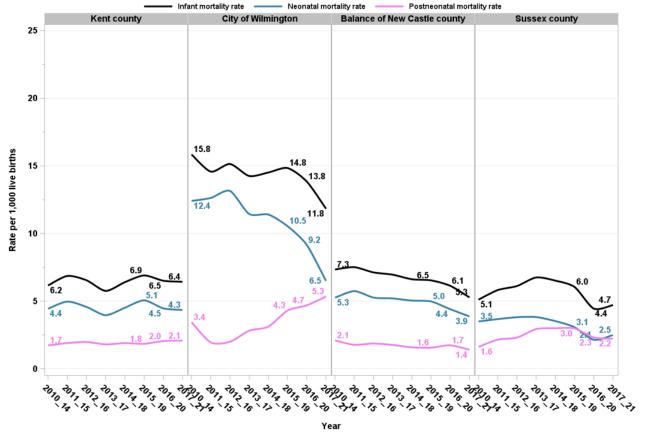


Source: Delaware Department of Health and Social Services, Division of Public Health, PRAMS 2012-2020 Notes: 95% confidence interval (CI) bands.

^{*}Since your new baby was born, how often have you felt down, depressed, or hopeless? response options: a) always; b) often; c) sometimes; d) rarely; and never.
*Since your new baby was born, how often have you had little interest or little pleasure in doing things? response options: a) always; b) often; c) sometimes; d) rarely; and never.

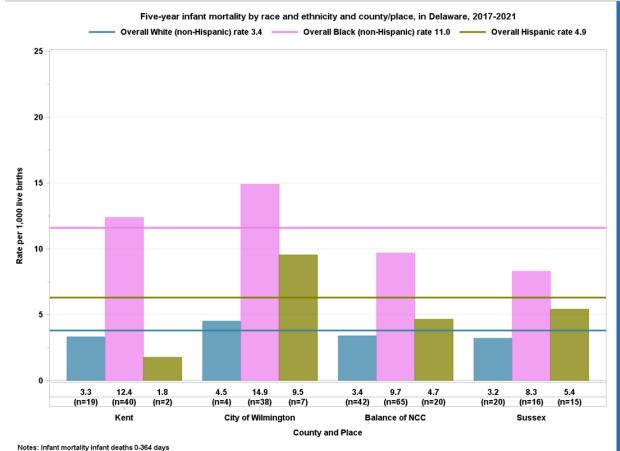






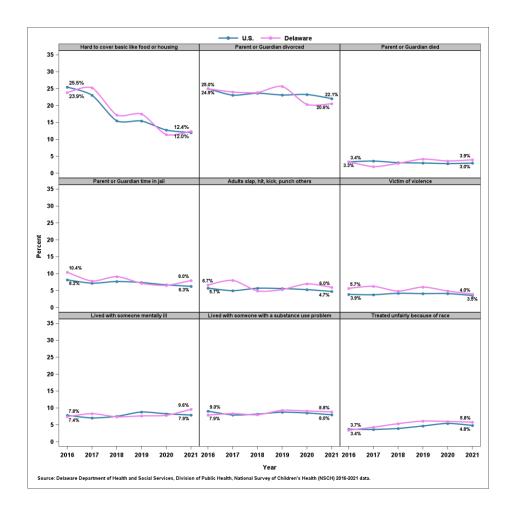
- 5-year IMR in the city of Wilmington decreased by 25%
- 5-year neonatal mortality rate in the city of Wilmington decreased by 48%;
- Yet the 5-year postneonatal mortality rate in the city of Wilmington increased by 56%!

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center, 2010-2021.
Notes: Infant mortality infant deaths 0-364 days, neonatal mortality infant deaths 0-27 days, postneonatal mortality infant deaths 28-364 days



Irrespective of the place of residence, the 5-year Black (non-Hispanic) IMR was:

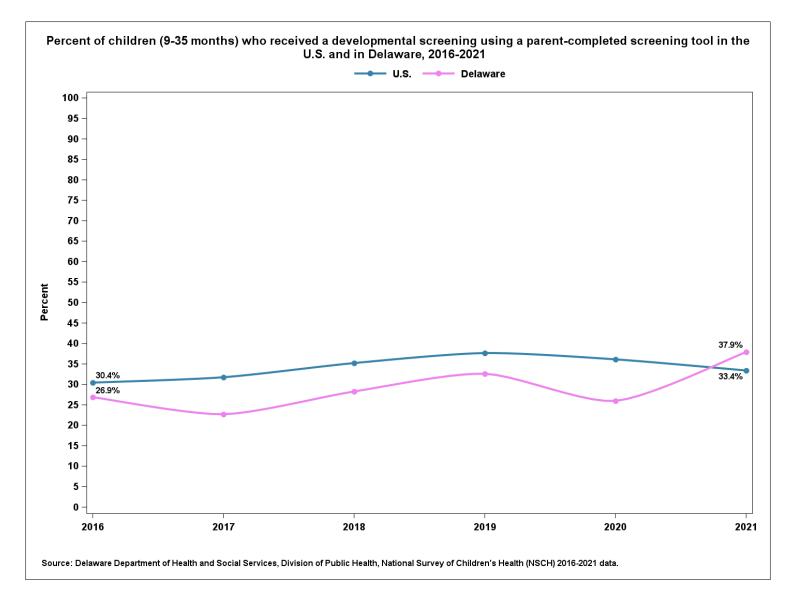
- 3.8 times of White (non-Hispanic) rate in Kent County;
- 3.3 times of White (non-Hispanic) rate in City of Wilmington;
- 2.9 times of White (non-Hispanic) rate in Balance of New Castle County; and
- 2.6 times of White (non-Hispanic) in Sussex County

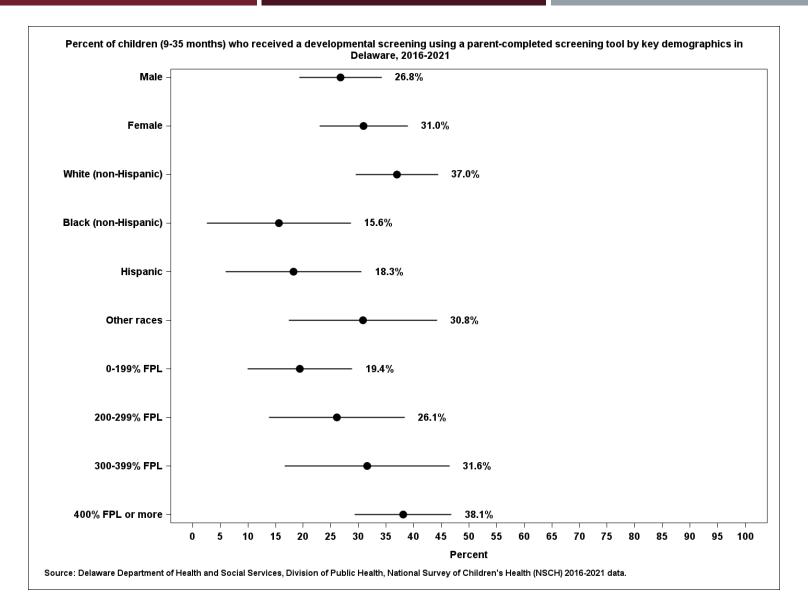


In 2021, the percentage of children with following individual adverse childhood experiences (ACEs) was higher as compared to the U.S.

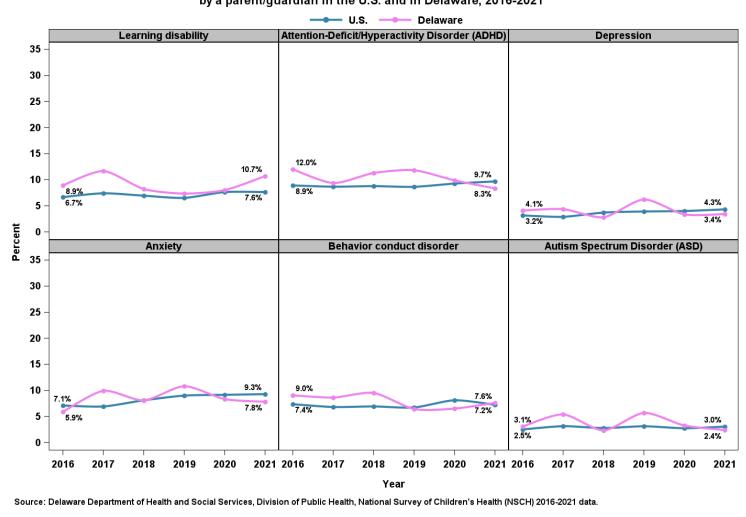
- Parent/Guardian died
- Parent/Guardian in jail
- Witnessed adults slap, hit, punch others
- · Victim of violence
- Lived with someone with mental illness
- Lived with someone with a substance use problem
- Treated unfairly because of race

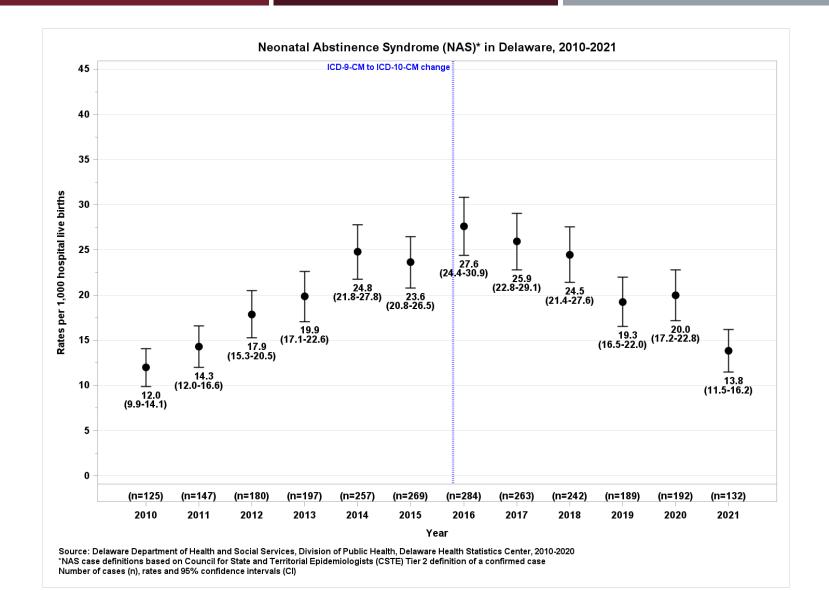
Adverse childhood experiences (ACEs) composite measure as reported by a parent/guardian by key demographics in Delaware, 2016-2021 Two or more ACEs Unexposed One ACE Age 0-5 years **→** 72.1% ◆ 17.3% ◆ 10.6% Age 6-11 years **→** 56.4% ◆ 23.0% **→ 20.6%** Age 12-17 years ◆ 43.8% **→ 28.1%** → 28.2% Male -**◆** 56.5% 23.6% **◆ 20.0%** Female ◆ 57.9% ◆ 22.2% 19.9% White (non-Hispanic) **◆** 64.5% 20.4% 15.1% Black (non-Hispanic) **→** 45.4% **→ 26.0**% **→ 28.6**% Hispanic -**─** 53.5% **→** 26.2% **→** 20.3% Other races -**→** 56.0% **→ 22.5**% **→ 21.6%** 0-199% FPL **→ 42.1**% **→ 26.0**% **→** 31.9% 200-299% FPL **→** 54.1% **→ 24.2**% **→ 21.7**% 300-399% FPL **←** 61.4% **→ 23.9**% → 14.6% 400% FPL or more -**◆** 75.6% ◆ 17.9% 6.5% 0 15 30 45 60 75 90 15 30 45 60 75 90 0 15 30 45 60 75 90 Percent Source: Delaware Department of Health and Social Services, Division of Public Health, National Survey of Children's Health (NSCH) 2016-2021 data.

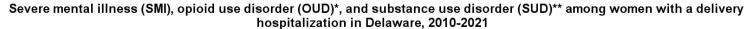


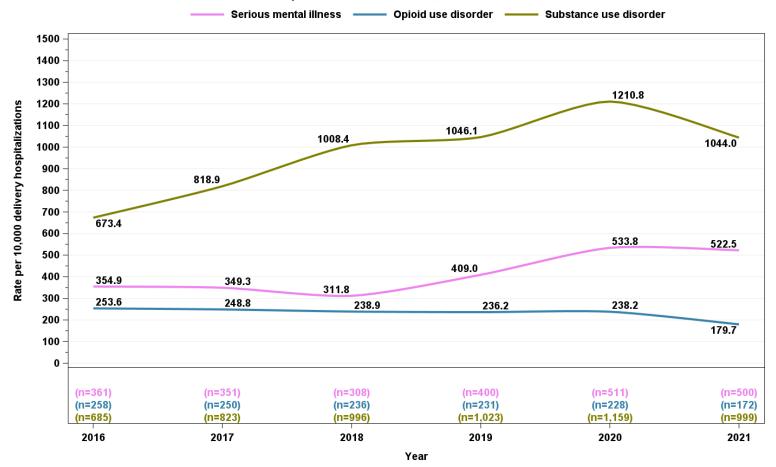


Percent of children (3-17 years) who currently have learning disability, attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD), depression, anxiety, behavior conduct disorder, autism spectrum disorder (ASD) as reported by a parent/guardian in the U.S. and in Delaware, 2016-2021







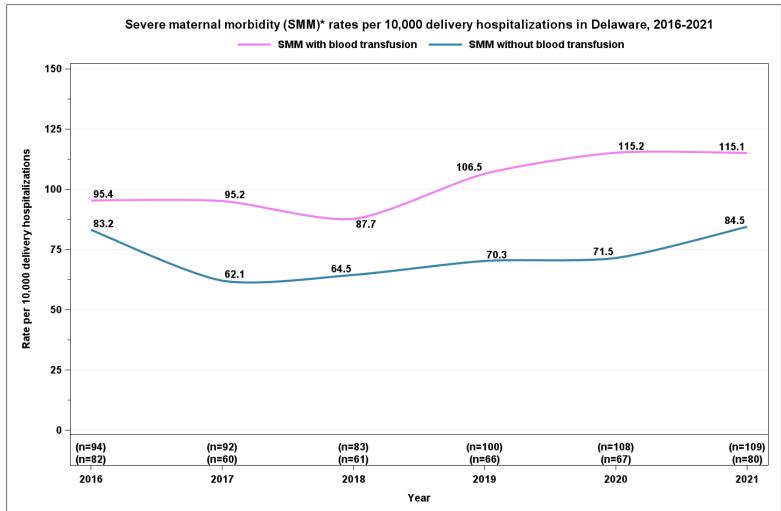


Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center, 2010-2021

Note: Serious mental illness (SMI) is based on Substance Abuse and Mental Health Services Administration (SAMHSA) definition as a mental, behavioral, or emotional disorder resulting in serious functional impairment, which substantially interferes with or limits one or more major life activities

*Based on Hirai et al. JAMA article. See: Hirai AH, Ko JY, Owens PL, Stocks C, Patrick SW. Neonatal Abstinence Syndrome and Maternal Opioid-Related Diagnoses in the US, 2010-2017. JAMA. 2021;325(2):146–155. doi:10.1001/jama.2020.24991

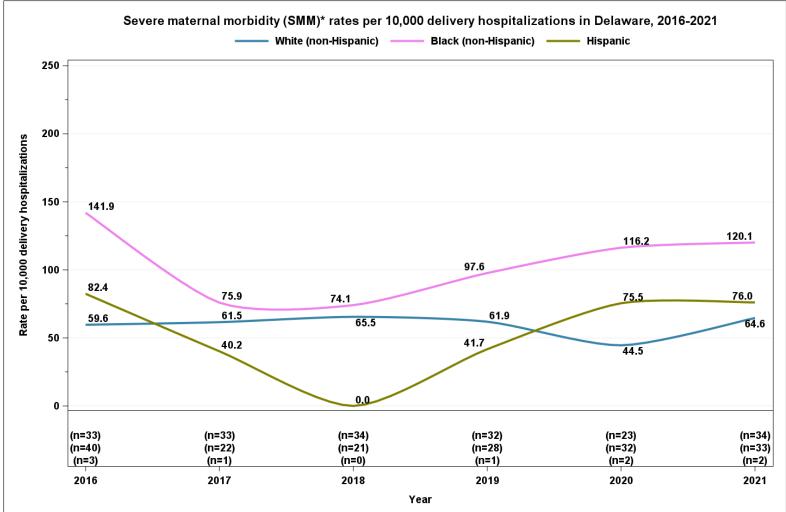
**Based on DSM-V criteria. Includes alcohol use, cannabis use, amphetamine use, cocaine, hallucinogens, sedatives, other drugs, tobacco use, and opioid use disorder



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center, 2010-2021

^{*}Severe maternal morbidity (SMM) CDC criteria and ICD-10CM codes based on Alliance for Innovation on Maternal Health (AIM).

^{*}SMM includes acute myocardial infarction, aneurysm, acute renal failure, adult respiratory distress syndrome amniotic fluid embolism, cardiac arrest/ventricular fibrillation, conversion of cardiac rhythm, disseminated intravascular coagulation, eclampsia, heart failure/arrest during surgery procedure, puerperal cerebovascular disorders, pulmonary edema/acute heart failure, sepsis, severe anethesia complications, shock, sickle cell disease with crisis, air and thrombotic embolism, blood products transfusion, hysterectomy, temporary tracheostomy, and ventillation.



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center, 2010-2021

^{*}Severe maternal morbidity (SMM) CDC criteria and ICD-10CM codes based on Alliance for Innovation on Maternal Health (AIM).

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THANK YOU!



HEALTHY COMMUNITIES DELAWARE INNOVATION FUNDING UPDATE

HEALTHY COMMUNITIES DELAWARE

Network of community and investment partners working to improve health, well-being and equity across Delaware

Backbone Managed as a Public-Private Partnership among:

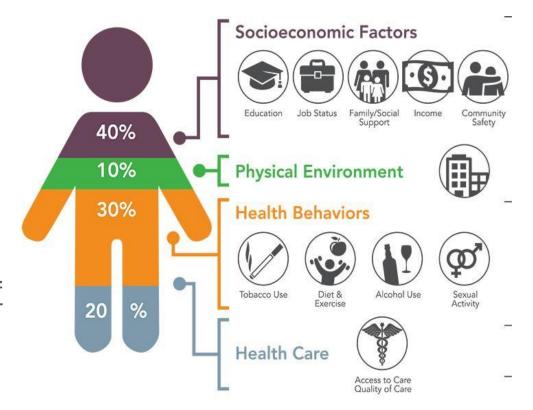
- Delaware Division of Public Health
- Delaware Community Foundation
- University of Delaware Partnership for Healthy Communities

Photo: WestSide, Wilmington. Latin American Community Center.



Communities matter for our well-being

80% of our health is influenced by factors outside of the healthcare system



Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014).

VITAL CONDITIONS/SDOH FOR WELL-BEING AND EQUITY

What makes a healthy, safe and vibrant community of opportunity?

Community Vital Conditions/SDOH:

What all people need all the time to thrive and reach our full potential.

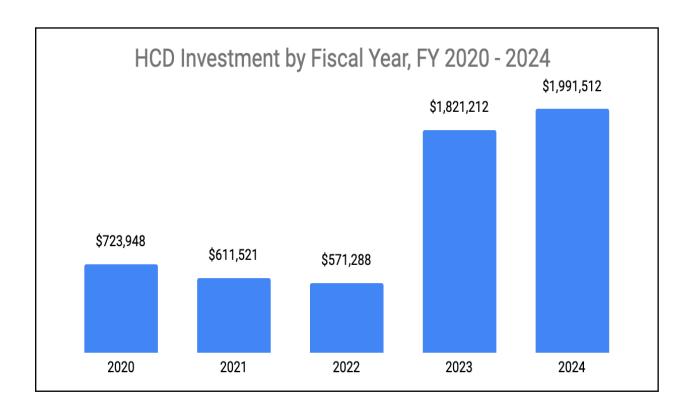
HCD partners with communities to accelerate improvements in vital conditions/SDOH.



VITAL CONDITIONS

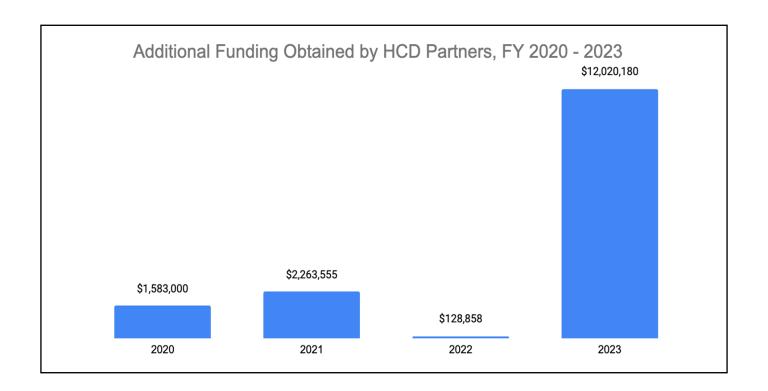
INVESTMENT IN HCD COMMUNITIES: FY20 - FY24

Since FY 2020, HCD has facilitated the **investment of over \$5.7 million** in grants and contracts to advance the vital conditions/social determinants of health **in 14 HCD partner communities via 21 community-based partner organizations**.



ADDITIONAL FUNDING OBTAINED BY HCD PARTNERS: FY20 - FY23

Since FY 2020, HCD partners obtained **over \$15.9 million in additional funding** from other sources that **increases the impact of HCD investments**.



ALIGNMENT FOR SUSTAINED INVESTMENT

HCD invests in the community-based infrastructure needed for equitable change.

- **14** geographic communities
- **21** community-based partners
- 6 investment partners





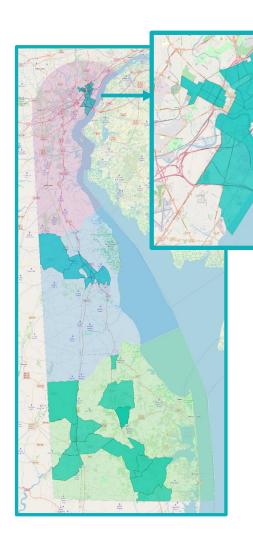












HCD COMMUNITY PARTNERS

KENT COUNTY

Cheswold/Lenape Census District Greenbridge CDC

Dover NCALL

Central Delaware Habitat for Humanity

SUSSEX COUNTY

Ellendale/New Hope Rd. SERCAP

Georgetown

The Springboard Collaborative

Seaford

Seaford Community of Hope

Bridgeville

Town of Bridgeville Cornerstone Community Center

 ${\bf Georgetown,\,Bridgeville,\,Seaford,\,Milford}$

La Esperanza

NEW CASTLE COUNTY

West Side, Wilmington

Be Ready CDC Cornerstone West CDC

Latin American Community Center

Eastside, Wilmington

Central Baptist CDC

Habitat for Humanity of New Castle County

Northeast, Wilmington

Collaborate Northeast

Habitat for Humanity of New Castle County

West Center City, Wilmington

Wilmington Alliance

Southbridge, Wilmington

Southbridge CDC

South Wilmington Planning Network

Northwest, Wilmington

Jefferson Street Center

Rt. 9 Corridor, New Castle

Rt. 9 Master Plan Monitoring Committee

New Castle Prevention Coalition

COLLECTIVE COMMUNITY TRANSFORMATION PROGRESS FY 2020 - 2023

Assessments & Action Plans

- 5 comprehensive community assessments and 3 action plans
- 4 housing plans and 3 assessments
- 1 child care center plan
- 1 healthy food access assessment and plan
- 2 park/playground plans and 1 assessment
- 3 vacant lot plans and 1 assessment
- 1 commercial property assessment
- 6 COVID assessments and action plans

Implementation Activities

- 13 community gardens maintained and 6 new gardens created
- 6 units of affordable housing created
- 50 units of transitional housing created/renovated
- 170 minor home repair services
- Critical home repairs to 35 homes
- 2 new child care centers created
- 1 new farmers market
- 3 parks/playgrounds revitalized
- 5 vacant lots revitalized
- 2 commercial spaces created/renovated
- 27 works of community art installed/maintained
- 2 community spaces created
- 18 individuals received resident leadership training

HCD Support and Funding Enables Partners to Build their Capacity for Community Transformation

Quotes from HCD Community Partners

100% of Partners reported that HCD funding and support have built their capacity to advance their community's vision and plan.

- "Continued resource sharing education, contacts, and general support are a huge help to smaller organizations trying to create large-scale change. And it's incredibly valuable - and unique to HCD. We've worked with many grant organizations and have never had this kind of support!"
- "HCD has guided many of our most productive partnership relationships and connections. This has led to incredibly innovative work in both concept and practice."
- "HCD's workshops, monthly meetings, and educational/networking events are gold for our multifaceted organization."
- "HCD offers a great set of supports to community development organizations across Delaware and has filled a void by systematically working to strengthen the sector."

West Side Revitalization Plan (2012-2022)

EXAMPLE: WEST SIDE, WILMINGTON BE READY COMMUNITY DEVELOPMENT CORPORATION

Year I (July '20 – June '21)	Year 2 (July '21 – June '22)	Year 3 (July '22– June '23)
Increased capacity to support community change I staff member employed	Increased capacity to support community change 2 staff members employed	Increased capacity to support community change 3 staff members employed
Increased affordable housing 6 units of affordable housing units developed and fully occupied (Phase I Development) Planning documents completed (Phase II Development)		Increased affordable housing 12 units of affordable housing units developed (Phase II Development Project) 9 units of transitional housing units renovated
Increased economic development 16,000 sq ft of commercial space complete (Phase I Development Project) I commercial lease signed with small business incubator		Increased economic development 4,250 sq. ft. of commercial space (Phase II Development Project)
	Increased civic muscle & leadership Supported civic association	Increased civic muscle & leadership Formal civic association leadership structure established and increased resident membership







THANK YOU!

We thank the Health Fund Advisory Council for its investments to improve health equity in Delaware, and hope that you will continue to invest in HCD and our partner communities.

We are working together to create healthy, safe and vibrant communities across Delaware, so that ALL people have the opportunity to thrive.

