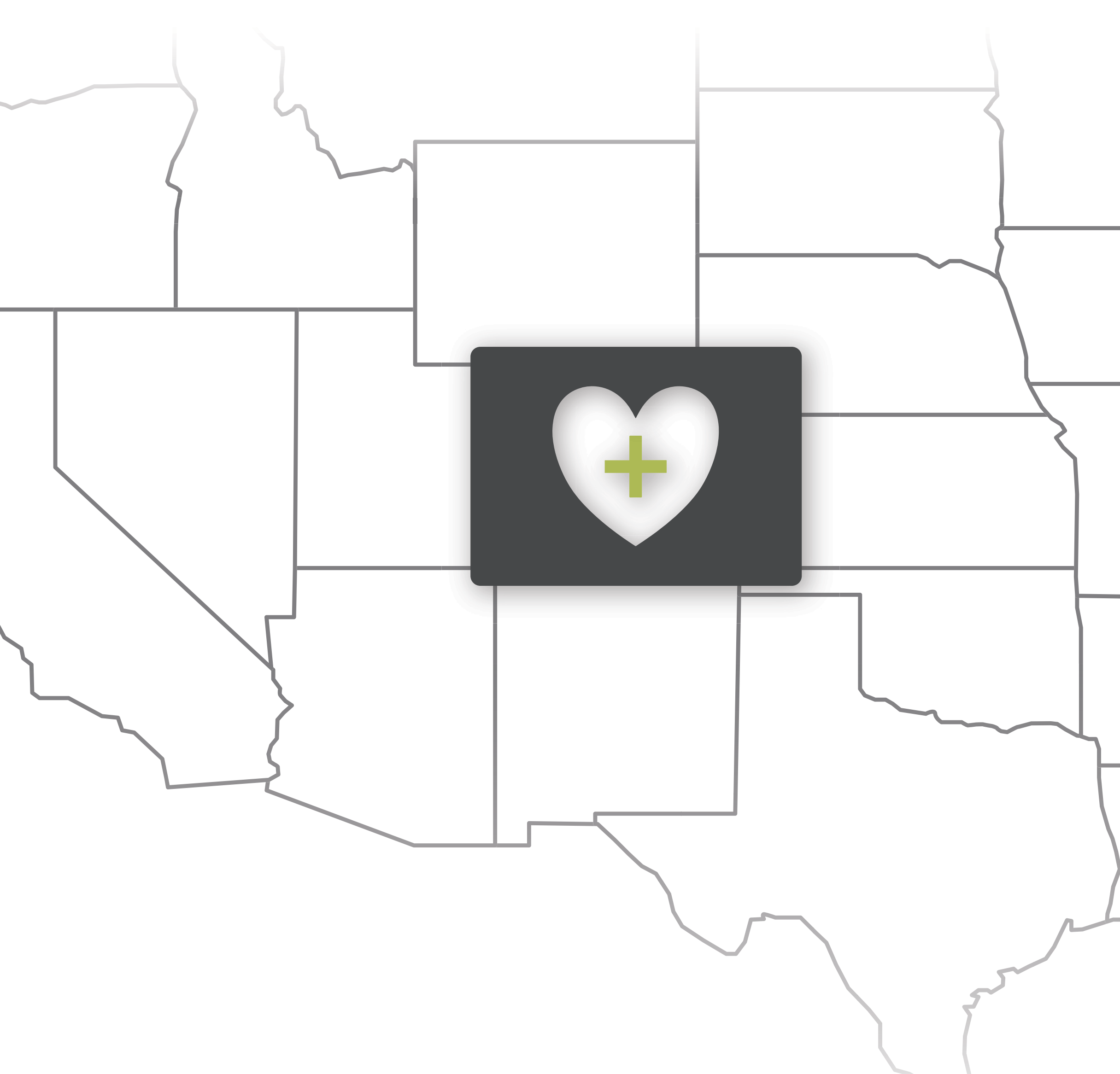


# Health Equity in COLORADO

Social factors such as race, education, income, housing and transportation can have a major impact on a person's ability to live a healthy life and play a powerful, fundamental role in health outcomes and health equity for individuals and entire communities. In fact, studies have found that **up to 80% of a person's health is related to social factors that are often out of their control and systemic in nature.**

CIVHC's Health Equity Analysis shows the relationship between key social factors and access and use of health care services that can impact a person's health. Communities can use this information to identify areas to focus health equity efforts.



## STATEWIDE Insights and Findings

Social factors in this analysis:

- Were **strongly related** to higher potentially preventable **Emergency Department visits**.
- Were **strongly related** to adults not receiving **preventive health care**.
- Did not impact** children and adolescents receiving **preventive health care**.
- Did not impact** total **cost of health care services**.
- Were **moderately to weakly related** to **follow-up care** after visiting the ED for a mental health need.

## STATEWIDE Relationship Table

- Strong
- Moderate
- Weak

### Social Factors

### Health Care Measures

- Access to Care: Children & Adolescents
- Access to Care: Adults
- Follow-Up After ED Visit for Mental Health
- Cost of Care per Person per Year
- Potentially Preventable ED Visits

	Income	Education	Employment	Housing/Transportation	Race/Ethnicity/Language
Access to Care: Children & Adolescents	● Weak	● Weak	● Weak	● Weak	● Weak
Access to Care: Adults	● Strong	● Strong	● Moderate	● Strong	● Strong
Follow-Up After ED Visit for Mental Health	● Moderate	● Weak	● Weak	● Moderate	● Weak
Cost of Care per Person per Year	● Weak	● Weak	● Weak	● Weak	● Weak
Potentially Preventable ED Visits	● Strong	● Strong	● Strong	● Strong	● Strong



## RURAL vs. URBAN Insights and Findings

In **Urban neighborhoods**, all social factors in this analysis were strongly related to higher potentially preventable Emergency Department visits. However, in **Rural neighborhoods** only income and education were strongly correlated to higher potentially preventable Emergency Department visits.

In **Rural neighborhoods**, only income was strongly related to adults not receiving preventive health care as opposed to **Urban neighborhoods** where all social factors except employment were strongly related.

## DENVER COUNTY

Neighborhoods with Fewer Obstacles to Health Equity vs. Areas with More Obstacles to Health Equity

### ELYRIA SWANSEA NEIGHBORHOOD

- 6,977** (population 2022)
- 20%** living below the poverty line
- 29%** of residents had a potentially preventable ED visit

### HIGHLANDS NEIGHBORHOOD

- 10,285** (population 2022)
- 6%** living below the poverty line
- 1%** of residents had a potentially preventable ED visit

### SUNNYSIDE NEIGHBORHOOD

- 10,048** (population 2022)
- 27%** living below the poverty line
- 18%** of residents had a potentially preventable ED visit

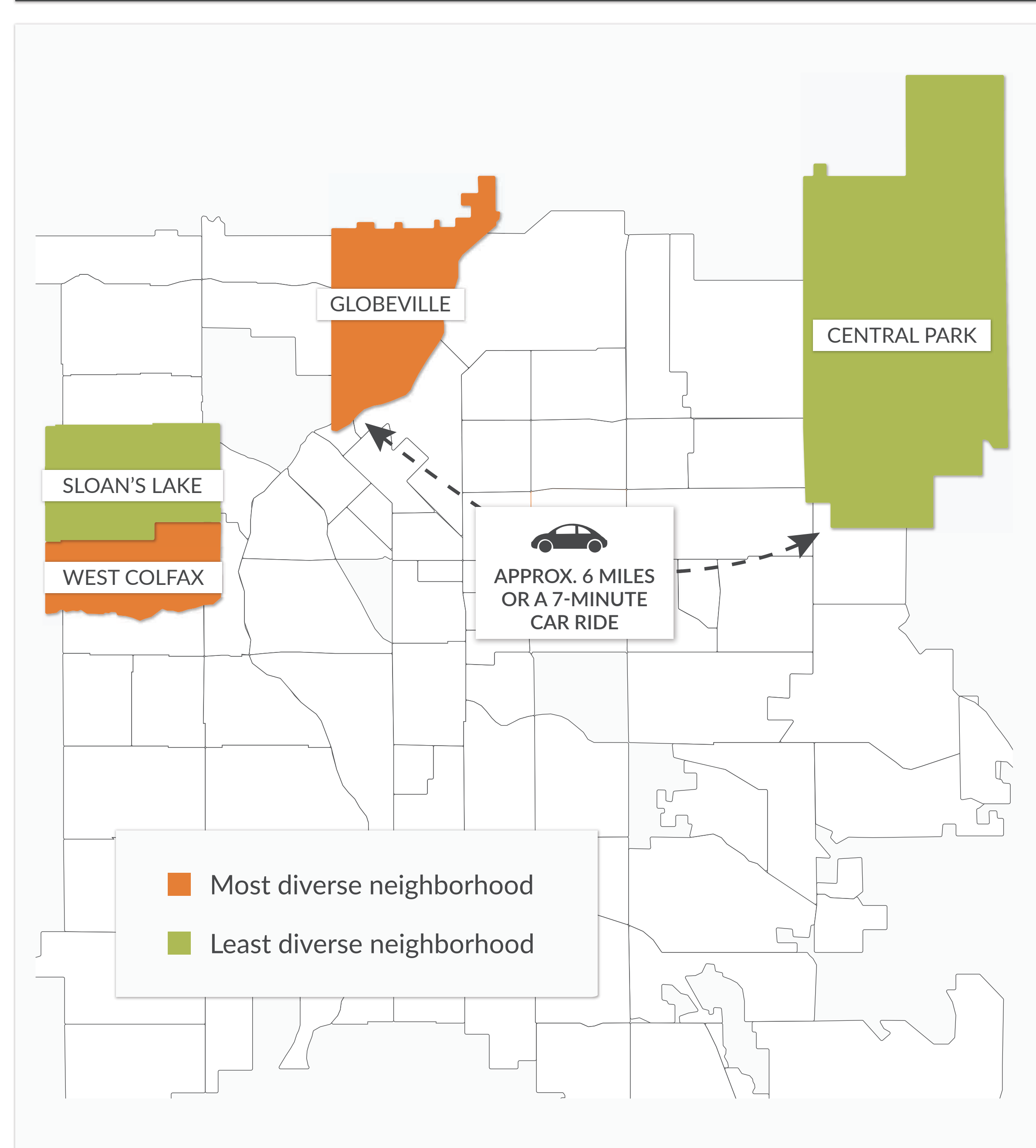
### CHERRY CREEK NEIGHBORHOOD

- 8,061** (population 2022)
- 6%** living below the poverty line
- 1%** of residents had a potentially preventable ED visit

In neighborhoods with **lower incomes**, more people use the ED for potentially preventable needs.



In neighborhoods with **more diverse populations**, fewer adults access preventive care.



### GLOBEVILLE NEIGHBORHOOD

- 15,349** (population 2022)
- Most Diverse**
- 57%** of adults did not receive preventive care

### SLOAN'S LAKE NEIGHBORHOOD

- 8,211** (population 2022)
- Least Diverse**
- 27%** of adults did not receive preventive care

### WEST COLFAX NEIGHBORHOOD

- 33,853** (population 2022)
- Most Diverse**
- 47%** of adults did not receive preventive care

### CENTRAL PARK NEIGHBORHOOD

- 30,000** (population 2022)
- Less Diverse**
- 23%** of adults did not receive preventive care

