The Orange Health Department has created a 2023-2024 Community Health Assessment (CHA) to collect up-to-date feedback from our town residents. Our goal is to unpack or discover community health issues and evaluate its local health delivery. While your participation is voluntary and **confidential**, all community feedback is valued.

Note: Please only complete this assessment if you are an Orange town resident.

Thank you for your contribution!

Demographic Questions

Please answer the following demographic questions.

Just a reminder, we are asking these questions in order to help us pinpoint which populations in the town of Orange require specific attention. All of this information will remain confidential and will not be used for any other purpose.

1) What is your age?

a. Under 18
b. 18 to 24 years
c. 25 to 34 years
d. 35 to 49 years
e. 50 to 64 years
d. 65 to 74 years
e. 75 to 84 years
f. 85 plus years

2) What is your gender?

a. Male

b. Female

3) What is your ethnicity?

a. White/Caucasian

- b. Hispanic/Latino
- c. African American
- d. Asian/Pacific Islander
- e. Other (please specify):_____

4) How would you describe your education level?

a. Some high school

- b. High School Diploma
- c. College Degree or Higher

d. Other (please specify): _____

5) What is your estimated household income?

a. Less then \$50,000
b. \$50,000 to \$80,000
c. \$80,000 to \$100,000
d. Over \$100,000

General Health Behavior Ouestions

Please answer the following questions regarding health behaviors and practices.

1) I have 5 total servings of fruits and vegetables daily.

- a. Yes
- b. No
- c. Unsure

2) I am physically active at least 2-3 times a week (not job related).

- a. Yes
- b. No

- c. Unsure
- 3) I use tobacco products/vapes.
- a. Yes
- b. No
- c. Unsure

4) I live in a home where I feel physically safe and secure.

a. Yes

b. No (Please contact the Orange Health Dept at (203) 891-4752) for further assistance.)

c. Unsure

Physical Health Questions

Please answer the following questions regarding your physical health. Reminder: all of these answers will remain confidential.

1) In the last 12 months, have you received a flu shot?

- a. Yes
- b. No

2) During your lifetime, has a health professional ever diagnosed you with any of the following? Please check all options that apply.

Dementia High Cholesterol ()Alzheimer's Disease **Type I Diabetes** ()Heart Disease \bigcirc Type II Diabetes O High Blood Pressure \bigcirc Chronic Lung Disease (asthma. emphysema, etc.)

- 5) I consume alcohol more than once daily.
- a. Yes
- b. No
- c. Unsure

6) I would be interested in getting CPR certified.

- a. Yes
- b. No
- c. Unsure
- d. I am already CPR certified.

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Top Community Health Issue Questions

What are the top three community issues that you feel should be addressed? Please select only three options from the list below.

- Age-Related Issues (caregiving, assisted living services, safety)
- Chronic Diseases (cancer, diabetes, heart disease)
- O Dental Care
- Family Planning
- Food and Nutrition (access to food stores, cost of food, healthy food options)
- Healthcare (access to affordable healthcare, insurance, pharmaceuticals)
- O Housing (availability, affordability, safety)
- O Immunizations
- Infectious Disease

- O Mental Health
- Personal Finance and Economy (joblessness, wages, quality of available jobs)
- Physical activity (personal fitness, weight)
- Social Issues (domestic violence, crime, gun violence, intolerance, discrimination)
- Substance Abuse and Misuse (tobacco, alcohol, opioids, treatment)
- Transportation
- Youth and Children Related Issues (childcare, education, bullying, abuse)

Online Habits

Please answer the following questions regarding online habits among children and teens.

1) What do you think is an 2) I believe it is common for 3) I believe it is common for appropriate amount of time for children/teens to speak with children/teens to send children/teens to spend on social strangers online. pictures/selfies of themselves to media? strangers online. a) 2-4 hours a day a) Yes a) Yes b) 4-6 hours a day b) No b) No c) More than 6 hours a day c) Unsure c) Unsure 4) I believe it is common for 5) I think it is important for 6) I believe it important for parents/guardians to speak to their children/teens to consider meeting parents/guardians to monitor their children's online activities. children about the dangers of the with strangers they met online. internet. a) Yes a) Yes b) No b) No a) Yes c) Unsure c) Unsure b) No c) Unsure

Quality of Life Questions

Please answer the following questions regarding the quality of life in the Town of Orange.

Statement	Strongly Agree	Agree	Disagree
I am satisfied with the quality of life in the Orange community.			
I believe Orange is a good place to live.			
There is economic opportunity (jobs, businesses, etc.) in Orange.			
I believe Orange is a good place to raise children.			
There are sufficient recreational activities (playgrounds, hiking			
trails, sports, etc.) in Orange.			
There are volunteer opportunities in Orange.			
I believe Orange is strengthened by its diversity.			
I am satisfied with the services the Orange Public Health			
Department provides.			
I believe I have access to areas where I can take care of my			
physical health in Orange.			
Orange has adequate mental health services for people who need			
them.			
There are networks of support for individuals during times of			
need in the Orange community.			

Additional Comments:

Please use the space below for any additional comments you would like to make. Thank you.

References:

Centers for Public Health Initiatives. (2023). Kansas Community Health Assessment 2023-2024. Wichita State University