

# Greater Riverdale HOPE Indicators



9.12.19

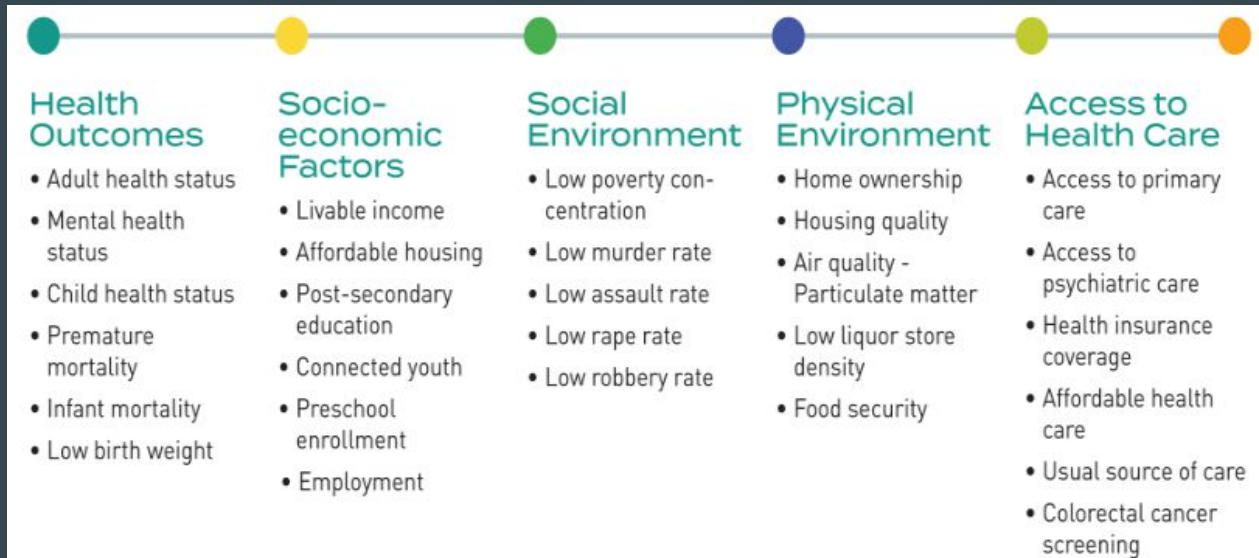
CCMA AmeriCorps VISTAs at CKAR CDC



# Health Opportunity and Equity Initiative (HOPE)

HOPE tracks 28 life course indicators. Data is analyzed by race, ethnicity and socioeconomic status. These measures reflect the systems and policies that affect health equity, highlighting existing disparities and pointing a path forward for improvement. These indicators were chosen as they represent aspects of life that impact health.

HOPE measures offer guidance to policymakers and community leaders on strengths and gaps in opportunity.



National Collaborative for Health Equity. "The Health Opportunity and Equity (HOPE) Initiative." *National Collaborative for Health Equity*, 2019, [www.nationalcollaborative.org/our-programs/hope-initiative-project/](http://www.nationalcollaborative.org/our-programs/hope-initiative-project/).

# HOPE in the Greater Riverdale Place-Based Initiative

HOPE provides definitions of and sources for the measures used, making it replicable at the zipcode level.

- This report represents an effort to compile data for the Greater Riverdale Place-Based Initiative's impact zip code (20737). When data was not available at that level, Prince George's County data was used.
- Prince George's County does not collect data on some indicators, such as child health status. This was indicated when applicable.
- HOPE supplied data on racial and class disparities for all indicators. As comparable data was not collected for Prince George's County, not all disparities are shown in this report.
- DC and Maryland were used to compare data from Prince George's County, due to the proximity of the county to DC and to understand how the county compares to the state.

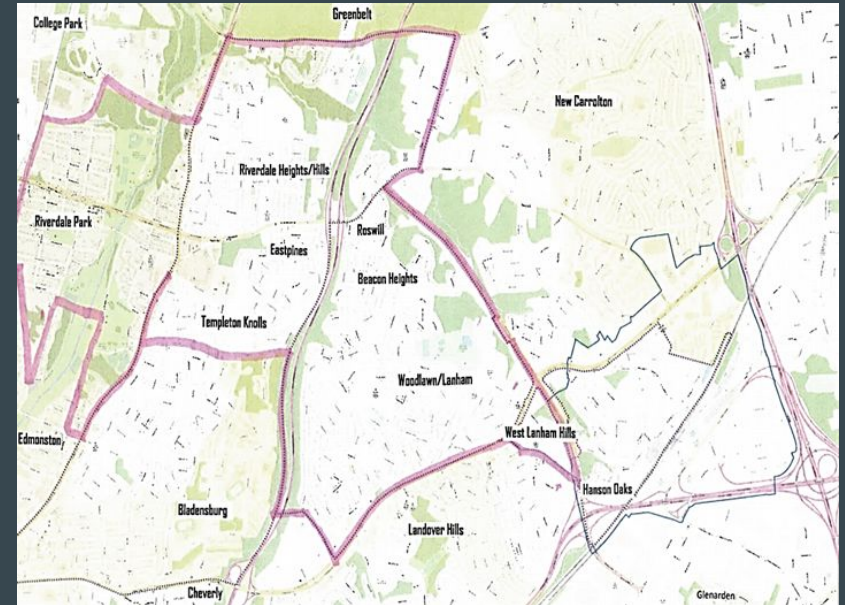
*This report aims to establish a baseline measure of health for Greater Riverdale. These indicators can be used to monitor the progress of the Place-Based Initiative over time and highlight areas of particular need. The report also reveals gaps in research that should be assessed in the future, in order to deepen understanding of health inequities.*

# Demographics of Greater Riverdale in 2017

Total Population: 36,510 people in 9,705 households

- 34% Black, 9% White, 3% Asian, 51% Hispanic, 1% American Indian, 2% Multiracial
- 44% Foreign Born and 13% Limited English Speaking
- Median Age: 33
- 57% of 10,226 Housing Units are Owner-Occupied
- Median Household Income: \$66,842
- 11% of people are below the Poverty Line

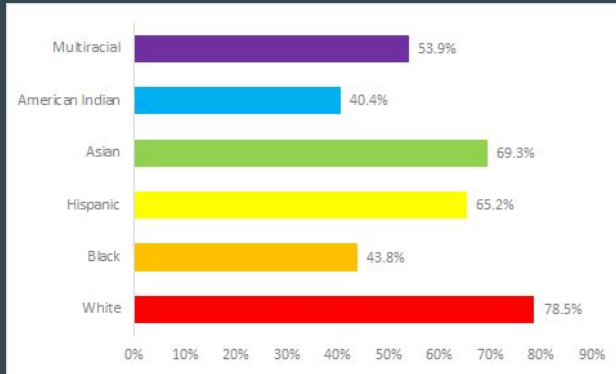
Map of  
Greater  
Riverdale



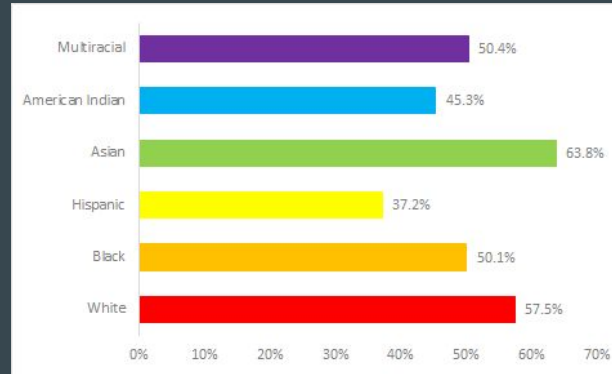
# Health Outcomes

## Adult Health Status (Portion of adults reporting excellent or very good health.)

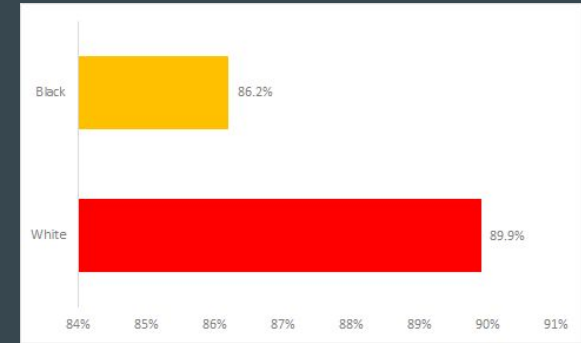
DC: 58.8%



MD: 54.2%



Prince George's: 83.8%



## Child Health Status (Portion of children in excellent or very good health, as reported by parents.)

DC: 81.4%

MD: 87%

Prince George's: NO DATA

# Health Outcomes

**Mental Health Status** (Portion of adults reporting 14 days or more of poor mental health in the past 30 days.)

DC: **10%**

MD: **9.8%**

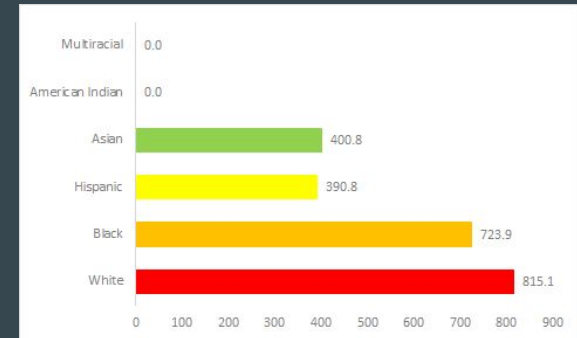
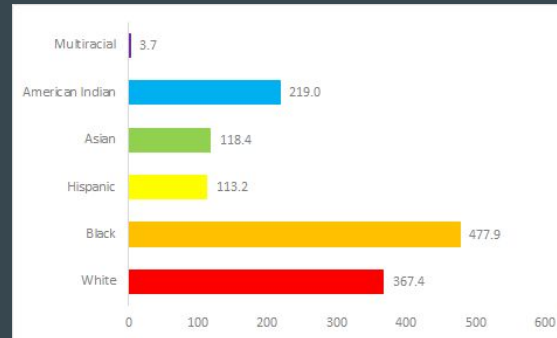
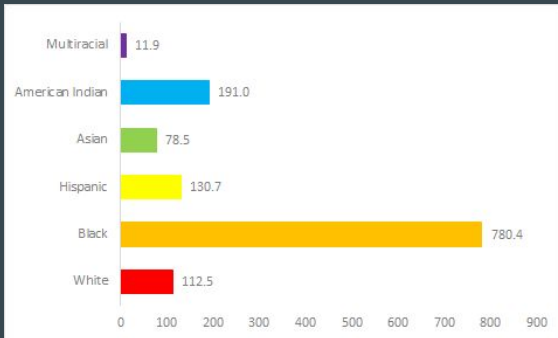
Prince George's: **9.4%**

**Premature Mortality** (Number of annual deaths due to any cause per 100,000 population, aged 25-64.)

DC: **408.2**

MD: **361.1**

Prince George's: **720.3**



Data Source: Save the Children's 2015 State of the World's Mothers report for DC's Infant Mortality, NVSS 2006-10 for MD's and 2017 Prince George's County Health Department for Prince George's. NVSS 2006-10 for Low Birth Weight in DC and MD, Prince George's Health Department in 2017 for Prince George's.

# Health Outcomes

**Infant Mortality** (Number of infants who die before their 1st birthday per 1,000 live births.)

DC: **7.9**

MD: **7.6**

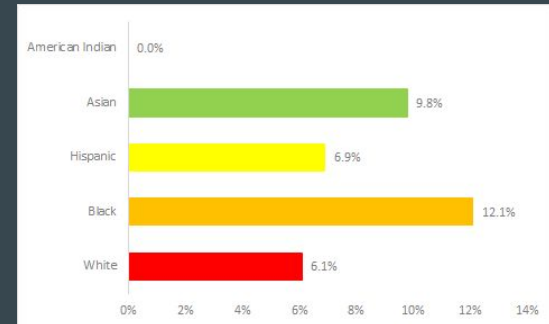
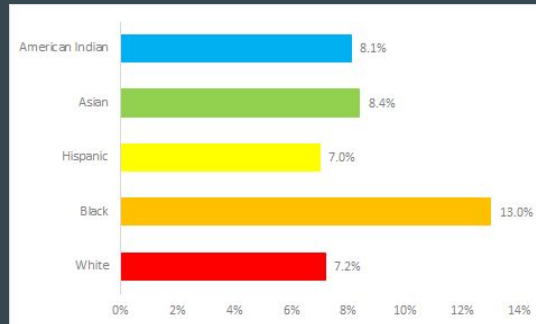
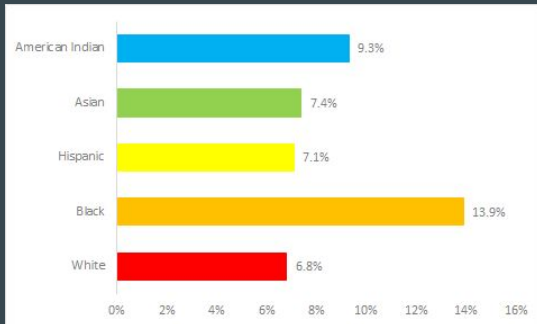
Prince George's: **8.2**

**Low Birth Weight** (Portion of infants weighing less than 2,500 grams at birth.)

DC: **10.7%**

MD: **9.2%**

Prince George's: **9.8%**



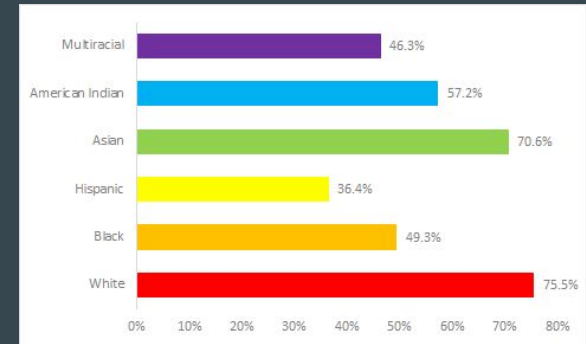
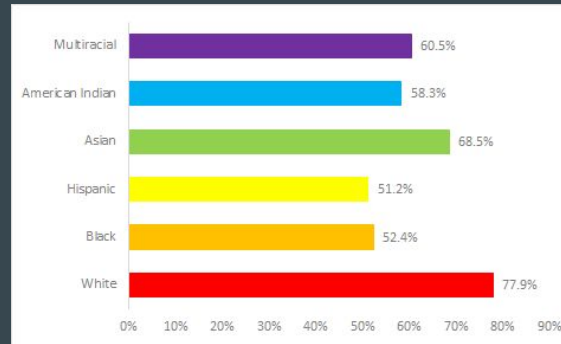
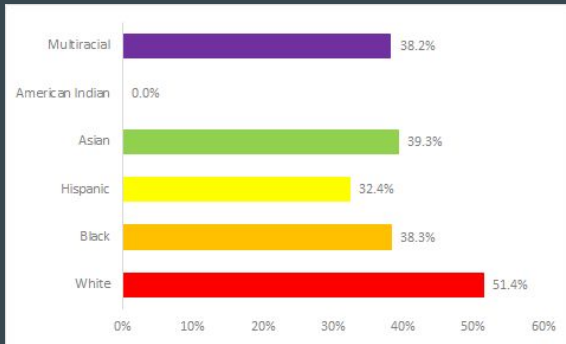
# Physical Environment

## Home Ownership (Portion living in owner-occupied homes.)

DC: **43.2%**

MD: **68.3%**

Greater Riverdale: **57%**



## Housing Quality (Complete kitchen and complete plumbing.)

DC: **79.8%**

MD: **84.3%**

Greater Riverdale: **98.6%**

However, **12%** of housing units in Greater Riverdale are overcrowded.



# Physical Environment

**Air Quality** (Average daily fine particulate matter, or PM<sub>2.5</sub>, in micrograms per cubic meter.)

DC: **12.65**

MD: **12.54**

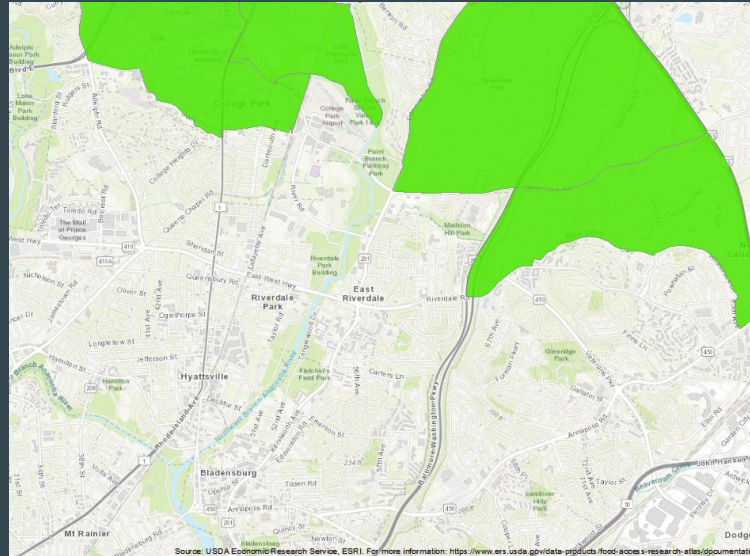
Prince George's: **12.59**

**Food Security** (Portion of people living in a census tract not designated as a food desert. Food deserts are defined as being both low income and having low access to food.)

MD: **91.9%**

**Greater Riverdale:**

Green census tracts  
are food deserts.



# Access to Health Care

***Access to Primary Care*** (Population to primary care physician ratio should be more than 50 to 100,000.)

**DC:** 70.2 providers per 100,000 people in 2012

**MD:** 50.2 providers per 100,000 people in 2012

**Prince George's:** 54 providers per 100,000 people in 2016

***Access to Psychiatric Care*** (Population to psychiatrist ratio should be more than 3 to 100,000.)

**DC:** 50.1 providers per 100,000 in 2018

**MD:** 20.4 providers per 100,000 in 2018

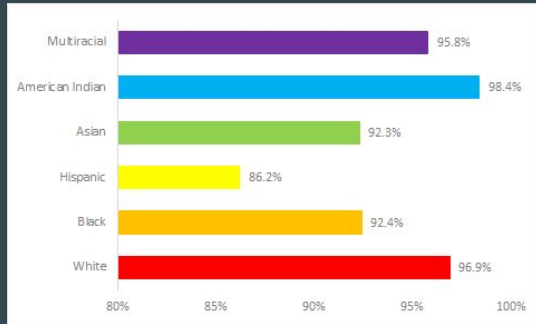
**Prince George's:** NO DATA

Data Source: ACS 2010-14 for DC and MD, ACS 2017 for ZIP Code 20737 for Health Insurance Coverage. BRFSS 2012-14 for DC and MD Affordable Health Care. Prince George's Department of Health for Prince George's Affordable Health Care in 2017.

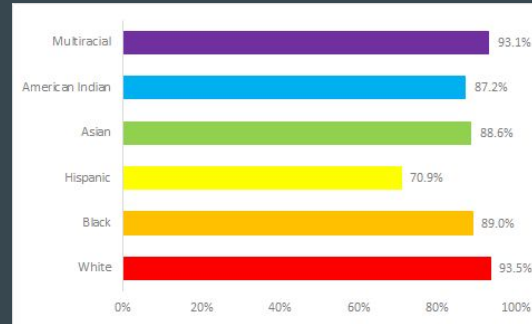
# Access to Health Care

## *Health Insurance Coverage* (Portion of people under 65 with any kind of health insurance.)

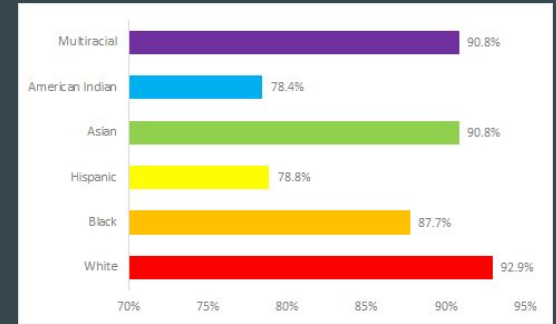
DC: **93.5%**



MD: **89.6%**



Greater Riverdale: **73.4%**



## *Affordable Health Care* (Portion of adults reporting they did not delay or forgo care due to cost in the last year.)

DC: **89.8%**

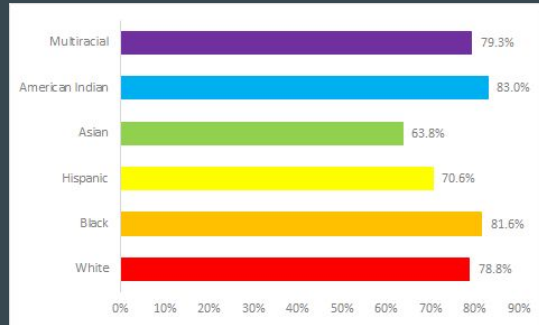
MD: **88.3%**

Prince George's: **86.3%**

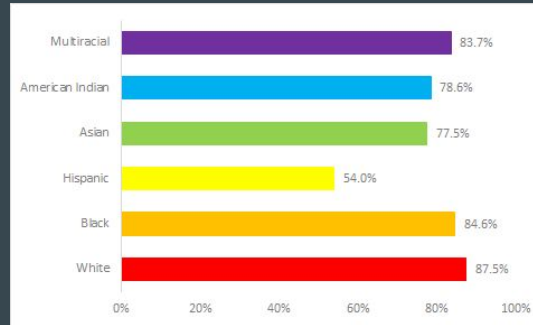
# Access to Health Care

**Usual Source of Care** (For DC and MD: portion of adults who have someone they consider their personal health care provider. For Prince George's: portion of adults who had a routine checkup within the last 2 years.)

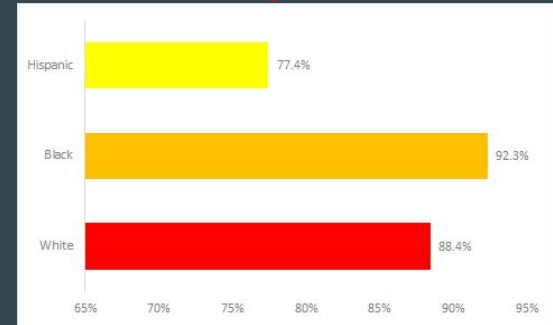
**DC: 78.8%**



**MD: 83.6%**



**Prince George's: MISSING**



**Colorectal Cancer Screening** (Portion of adults age 50-75 receiving recommended colorectal cancer screenings.)

**DC: 72.6%**

**MD: 73.4%**

**Prince George's: 74.7%**

# Socioeconomic Factors

**Livable Income** (Portion of households with income greater than 200% Federal Poverty Line.)

DC: **74%**

MD: **81%**

Greater Riverdale: **60%**

**Affordable Housing** (Portion of households spending less than 30% of income on housing expenses.)

DC: **63%**

MD: **65.9%**

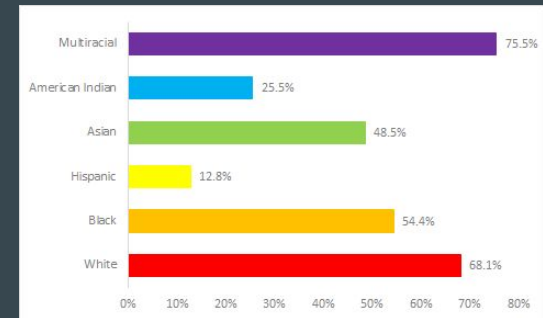
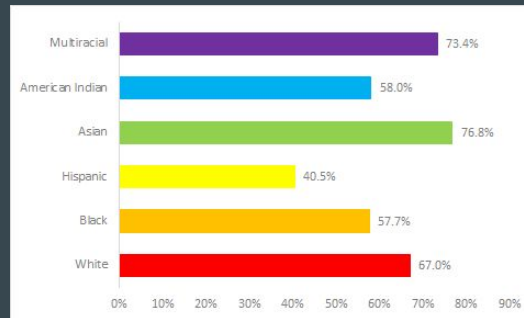
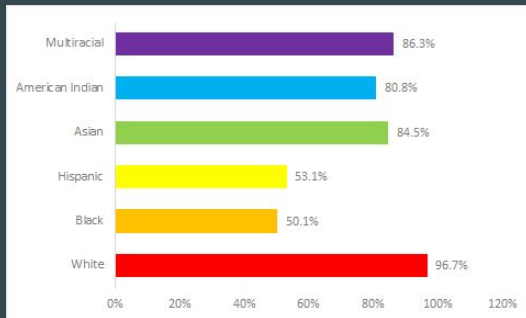
Greater Riverdale: **56.5%**

**Post-Secondary Education** (Portion of adults 25+ with at least some college.)

DC: **64.8%**

MD: **63.1%**

Greater Riverdale: **38.7%**



Data Source: Measure of America 2013 "Halve the Gap" for DC Metro Connected Youth, ACS 2010-14 for MD Connected Youth, ACS 2017 analysis for 20737. ACS 2011-14 for Preschool and Employment MD and DC, ACS 2017 for 20737.

# Socioeconomic Factors

**Connected Youth** (Portion of young people aged 16-24 enrolled in school or working.)

DC Metro Area: **84.3%**

MD: **93.8%**

Greater Riverdale: **97.7%**

**Preschool Enrollment** (Portion of 3-4 year olds enrolled in school.)

DC: **70.8%**

MD: **49.2%**

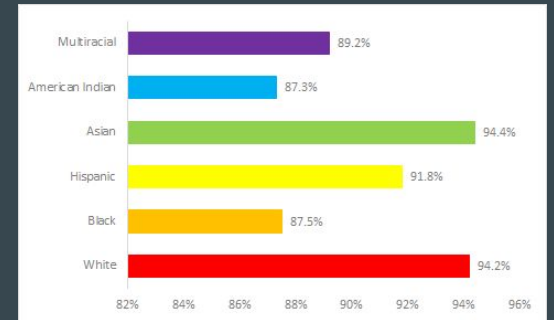
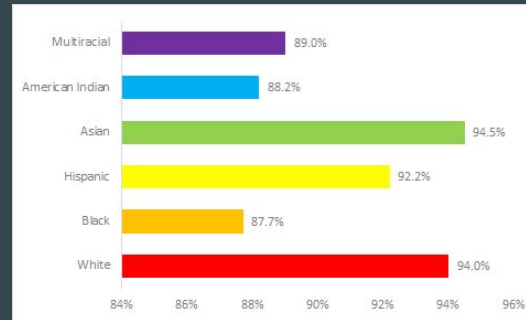
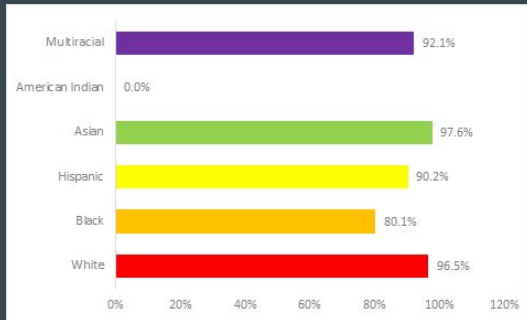
Greater Riverdale: **34.3%**

**Employment** (Portion of labor force that is employed.)

DC: **89.2%**

MD: **91.9%**

Greater Riverdale: **92.9%**



# Social Environment

**Low Murder Rate** (A low murder rate is defined as fewer than **5.1** murders per 100,000 people annually.)

**DC:** 19.2 per 100,000 people in 2016

**MD:** 8.9 per 100,000 people in 2016

**Prince George's:** 8.9 per 100,000 people in 2017

**Riverdale Park:** 0 per 100,000 people in 2016

**NO DATA AVAILABLE FOR GREATER RIVERDALE**

**Low Assault Rate** (A low assault rate is defined as fewer than **283** aggravated assaults per 100,000 people annually.)

**DC:** 554.8 per 100,000 in 2016

**MD:** 263 per 100,000 in 2016

**Prince George's:** 162.5 per 100,000 in 2014

**Riverdale Park:** 393 per 100,000 in 2016

**NO DATA AVAILABLE FOR GREATER RIVERDALE**

# Social Environment

**Low Rape Rate** (A low rape rate is defined as fewer than 36.9 rapes per 100,000 people annually.)

**DC:** 75 per 100,000 people in 2016

**MD:** 30.2 per 100,000 people in 2016

**Prince George's:** 14.2 per 100,000 people in 2017

**Riverdale Park:** 0 per 100,000 people in 2016

**NO DATA AVAILABLE FOR GREATER RIVERDALE**

**Low Robbery Rate** (A low robbery rate is defined as fewer than 52.1 robberies per 100,000 people annually.)

**DC:** 448.3 per 100,000 people in 2016

**MD:** 179.7 per 100,000 people in 2016

**Prince George's:** 136.9 per 100,000 people in 2017

**Riverdale Park:** 352.6 per 100,000 people in 2016

**NO DATA AVAILABLE FOR GREATER RIVERDALE**



# Reasons for HOPE

**OVERALL:** Prince George's outperforms DC and MD on self-reported **adult health** status, **mental health** status, **housing quality** (except for overcrowding), rate of **colorectal cancer** screenings, portion of **connected youth**, and **employment**.

**COMPARED TO DC:** Prince George's County does better on **low birth weight infants**, **homeownership**, and **air quality** than DC, although not MD overall.

**COMPARED TO MD:** Prince George's County has better **access to primary care** than MD, although not DC.

**DISPARITIES:** There was a **smaller racial disparity in premature mortality** between white and black Prince Georgians than in either DC or MD. In Prince George's, the highest rate of premature mortality is among whites. Similarly, there was a **smaller racial disparity in usual source of care** in Prince George's between blacks and whites, as compared to MD. More black Prince Georgians had a usual source of care than whites.

# Opportunities to Improve

**MISSING:** **Gaps** in the data available for Prince George's County and **missing data** at the zip code level highlight research opportunities that will enhance our understanding of health on a local level.

**COMPARED TO DC AND MD:** Prince George's has a significantly worse rate of **premature mortality, infant mortality, health insurance coverage, affordable health care, livable income, affordable housing, post-secondary education, and preschool** enrollment than DC & MD.

**DISPARITIES:** There is a large racial disparity in **adult health** between black and white Prince Georgians (data is not available for other groups). The disparity in **homeownership** in Riverdale between whites and Hispanics, and whites and blacks is worse than the overall MD rate. There is a larger disparity in **health insurance coverage** in Riverdale between Hispanics and whites as compared to DC, and a larger disparity in coverage between blacks and whites as compared to both DC and MD. There is an extreme disparity in **post-secondary education** between Hispanics and whites in Riverdale, worse than in both DC and MD. The disparity between blacks and whites in **employment** in Riverdale is worse than in MD overall, but not worse compared to DC.

# Sources

“Estimating the Distribution of the U.S. Psychiatric Subspecialist Workforce” in 2018 for Access to Psychiatric Care. in DC and MD.

2014 CDC Area Health Resource Files for DC and MD, Prince George’s County Health Department in 2016 for Access to Primary Care. University of Michigan School of Public Health’s

ACS 2010-14 for DC and MD, ACS 2017 for ZIP Code 20737 for Health Insurance Coverage. BRFSS 2012-14 for DC and MD Affordable Health Care. Prince George’s Department of Health for Prince George’s Affordable Health Care in 2017.

BRFSS 2012-14 for DC and MD Adult Health Status Prince George’s County Health Department for Adult Health Status in 2017. NSCH 2011-12 for DC and MD child health status.

BRFSS 2012-14 for DC and MD Mental Health Status Prince George’s County Health Department for Mental Health Status in 2016. NVSS 2010-14 for Premature Mortality in DC and MD. Prince George’s County Health Department 2016 Community Health Needs Assessment for Premature Mortality in Prince George’s.

BRFSS 2012-14 for DC and MD Usual Source of Care and Colorectal Cancer Screening. Prince George’s County Health Department 2016 Community Health Needs Assessment for Usual Source of Care.

CDC WONDER 2011 for Air Quality. USDA ERS for Food Security, 2019 for Prince George’s and 2015 for DC and MD.

CS 2010-14 for DC and MD, ACS 2017 for ZIP Code 20737

DC Metropolitan Police Department Crime Statistics and Maryland Governor’s Office Crime Statistics.

Kaiser Family Foundation analysis of ACS 2017 for Livable Income DC and MD, Enterprise Dashboard for Livable Income Greater Riverdale. ACS 2010-14 for DC and MD Housing and Education, ACS 2017 analysis for 20737.

Measure of America 2013 “Halve the Gap” for DC Metro Connected Youth, ACS 2010-14 for MD Connected Youth, ACS 2017 analysis for 20737. ACS 2011-14 for Preschool and Employment MD and DC, ACS 2017 for 20737.

National Collaborative for Health Equity. “The Health Opportunity and Equity (HOPE) Initiative.” National Collaborative for Health Equity, 2019, [www.nationalcollaborative.org/our-programs/hope-initiative-project/](http://www.nationalcollaborative.org/our-programs/hope-initiative-project/).

Save the Children’s 2015 State of the World’s Mothers report for DC’s Infant Mortality, NVSS 2006-10 for MD’s and 2017 Prince George’s County Health Department for Prince George’s. NVSS 2006-10 for Low Birth Weight in DC and MD, Prince George’s Health Department in 2017 for Prince George’s.