

**2020-2021 Texas Extension Community Health and Wellness Needs Assessment**

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### **|Introduction**

Health and wellness is an important aspect of a thriving community (Roberts et al., 2016). Plasek et al. (2020) reported that people's lifestyle, combined with low physical activity and improper nutrition, has contributed to disease spread in recent years. However, individuals' awareness of health and nutrition has also become a more prevalent issue in the public mind (Sandmann et al., 2015). According to Graham et al. (2016), education is an essential influence on knowledge, behaviors, and practices of strong communities. Stripling and Ricketts (2016) state a greater knowledge of food and nutrition is required to maintain and improve issues such as global hunger, obesity, food safety, and climate change. Furthermore, the American Association for Agriculture Education's National Research Agenda calls for an emphasis on community health as part of its seven research priorities (Roberts et al., 2016). The sixth of these priorities calls for the facilitation of "Vibrant Resilient Communities" through the nurturing of a healthy human capital (Roberts et al., 2016).

### **Theoretical Framework**

In order for community health and wellness potential to be achieved, a community must first desire for such change to occur. Considerable success has been achieved through the utilization of asset-based community development; particularly through the use of community-based participatory research (CBPR), an approach driven by community members' needs and preferences (Rollins et al., 2020). According to Rollins et al. (2020), CBPR offers a potential solution to health disparities and can create positive, healthfully sustained communities. Mitigation of such health inequalities necessitates a comprehensive understanding of physical and social environments at the individual level, as well as how such environments shape overall health and wellbeing (Salman, 2021). This project's emphasis on understanding the health and wellness needs of Texas residents aligns with its state land grant mission to provide innovative solutions to the improvement and well-being of individuals, families, businesses, and communities (The Texas A&M AgriLife, 2021). This state land grant's strategic plan for the years 2021-2025 includes the development of program strategies to ensure coordination of program evaluation and promotion (The Texas A&M AgriLife, 2021). The purpose of this research was to identify existing community strengths and needs related to health and wellness. The objectives guiding this research study were (a) identify the participants based upon perceived health and wellness assets, needs, and demographic characteristics, and (b) determine relationships between perceived health and wellness assets, needs, and selected demographic characteristics.

### **Methodology**

Cramer's V was utilized in this data set because of its ability to provide rich detail about a given group's responses (McHugh, 2013). Similarly, cross-tabulations, or contingency tables, were chosen for their ability to test the hypotheses of variable contingency and how such variables are correlated (White & Korotayev, 2004). In cases where respondents numbered a total of less than 5 (e.g., in the case of reported gender identities non-binary, and choose not to share), data were combined into other variables in order to create a statistically valid Cramer's V (White & Korotayev, 2004). The population for this study included participants from all counties in Texas during the spring of 2021 ( $n = 18,114$ ). This study used the Qualtrics survey platform and defined the sample through 5 demographic questions (gender, age, education level, race/ethnicity, and income). The survey asked respondents to assess the strength and needs of their communities in the following areas: communities, health and wellness, youth, families, agriculture, and natural resources. An alpha level of .05 was established a priori to test the

statistical hypothesis. The 20-question asset-based Community Assessment used a 4-point Likert-Scale for participant responses (1 = Strength; 2 = Need; 3 = Not Relevant; 4 = Unsure). The Davis (1971) Convention was used to interpret the effect size and correlation strength.

### **Results/Findings**

According to the data, the typical respondent identified as female reported an average age of 55-64, and an income level of \$100,000-\$149,999. The mean respondent identified their race as white, and the data showed that the average education level of the respondents was an Associates degree. According to the U.S. Census Bureau's 2019 American Community Survey (ACS), the average age of the Texas's population was 34.6 years old, the average income level was \$87,000, and the average education level was a high school degree. The predominant reported race of the population was white, and the most reported identified gender was female. Therefore, key differences exist between the average respondents of this study and the average total population (age, education, income). The data collected from the sample population indicated the most frequently reported strength in the area of health and wellness was the school lunch programs and gender crosstabs data ( $n = 5,185$ ). Additional strengths were grocery stores accepting EBT and emergency healthcare facilities. The highest reported need of the health and wellness data was reducing obesity through educational programs and gender ( $n = 6,776$ ). Other identified needs were ensuring safe food handling to prevent illness, strengthening local food systems, ensuring affordable healthy food, helping consumers make healthy food choices, providing physical fitness education, preventing chronic disease, addressing hunger issues, access to healthy food options, addressing mental health, affordable food options, affordable medical clinics, special needs care, and community service for alcohol or drug abuse treatment.

### **Conclusions**

There is an evident national call for the increased allocation of health and wellness resources to be dedicated to population needs (Kaufman et al., 2017). However, the not-so-obvious location for these resources is within each state's Cooperative Extension Service. The survey addressed the current strengths and need perceptions of community individuals. The results from this study determine gaps that exist within the state's community and provide insight to combating these challenges. Of the 20 health and wellness related questions asked, 17 resulted in a perception of need or improvement, specifically those focusing on obesity and mental health. By creating a collaborative relationship between Health Extension and Cooperative Extension Services communities are offered complementary strengths that address unmet and developing needs (Kaufman et al., 2017). Food insecurity plays a role in mental health challenges and cognitive ability (Martinez, 2018), suggesting an area of connection and focus for Agricultural Cooperative Extension Services.

### **Implications/Recommendations/Impact on Profession**

All nominal by nominal variable correlations were low, indicating that the health and wellness variables were independent of the demographic variables. Future research should focus on creating a sample population parallel to the total population with respect to average age, education, and income level of a typical state resident. This data can only draw conclusions respective to the average respondent to the survey, not the state as a whole. Through further study and a more representative sample, community decision-makers will be able to better understand and target the strengths and needs of health and wellness goals within their communities.

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