

Essex County New Jersey Community Health Needs Assessment 2022



**Essex County Office of Public Health Management
New Jersey
and
the School of Public Affairs and Administration
Rutgers University Newark**

Executive Summary

The purpose of the Community Health Needs Assessment is to identify and prioritize the needs of the Essex County (NJ) community at large through strategic health planning. The report provides comprehensive information about the health status of the county population and what health issues need to be addressed. The specific objectives of the community health needs assessment are provided below.

- Understand key health issues that impact the community;
- Measure the health status and behaviors of Essex County residents;
- Produce evidence for evaluating public health policies, strategies, and programs; and
- Create data driven initiatives to advance health focused on the needs of Essex County residents.

This project began during the summer of 2021 through a public-academic partnership developed between the Essex County Office of Public Health Management and the School of Public Affairs and Administration (SPAA) at Rutgers University-Newark. The two organizations worked together in the development and planning of a public health needs assessment in Essex County, New Jersey. The public health survey was conducted to understand key health issues impacting the health of community members in Essex County during the COVID-19 pandemic. The survey results identify community health needs in the 22 municipalities in Essex County.

Data and Methods

The health assessment survey process formally began in the fall 2022 semester when the Institutional Review Board (IRB) approved the survey and proposal. Shortly thereafter, we introduced the survey to county residents. The data was collected from December 2021 to March 2022. The survey was programmed using Qualtrics, a leading survey software tool that allows its users to create, distribute and analyze online surveys. A number of methods were used to reach out to Essex County residents for their participation into the survey. First, the online survey was promoted on the social media sites of the County Department of Health, as well as the social media sites of the health departments of all municipalities in the county. We sent an email survey invitation to 300,000 county residents on a listserv maintained by the Essex County Department of Health. In addition to using an online survey, we also used Essex County COVID-19 vaccination sites to collect information electronically. Information sheets with a QR code to the online survey were distributed in the 15-minute waiting zone of the three COVID-19 vaccination centers located in Livingston, Newark and West Orange. The survey information sheets along with the QR code were distributed in mobile health clinics operating across the county. Finally, staff members of Essex County Department of Health made four visits to the Division of Family Benefit and Assistance office in Newark to recruit survey respondents. They distributed the information sheets with QR code to residents visiting the office; they provided tablets to those who were

without digital devices; and they handed out paper questionnaires for some of the survey respondents.

A total of 11,127 valid survey responses were collected. 71.91% participants were White, 14.9% were Black, and 13.18% were other racial groups including participants who are of Hispanic/Latino origin, Asian Americans, Pacific Islanders, and Native Americans. Sixty percent of the participants were female.

Key Findings

Top Health Issues in the Community (all respondents)

- Mental health issues (58.54%)
- Aging issues such as Alzheimer's disease (43.43%)
- Cancer (42.14%)
- Obesity and overweight (40.08%)
- Infectious disease such as flu (29.47%)
- Heart disease (24.58%)
- Diabetes (23.49%)

Top Health Issues in 22 Municipalities

- Mental health issues are the top health issue identified by residents of all Essex County municipalities except Essex Fells. The other top health issues in municipalities across Essex County are aging issues, cancer and obesity.

Top Unhealthy Behaviors Impacting the Community (all respondents)

- Lack of exercise (46.62%)
- Poor eating habits (46.36%)
- Angry and violent behavior (38.91%)
- Drug abuse (36.26%)
- Alcohol abuse (33.30%)

Top Unhealthy Behaviors in 22 Municipalities

- The top unhealthy behaviors impacting the community reported by residents of 22 municipalities across Essex County are poor eating habits, angry behavior/violence, lack of exercise, alcohol abuse, and drug abuse.

Top Factors Affecting Personal Wellbeing in the Community (all respondents)

- Lack of exercise (61.47%)
- Poor eating habits (55.32%)
- Angry and violent behavior (37.59%)

- Reckless driving (33.95%)
- Not getting a routine check-up (28.90%)

Top Factors Affecting Personal Wellbeing in 22 Municipalities

- The top unhealthy behaviors impacting the community reported by residents of 22 municipalities are poor eating habits, angry behavior/violence, lack of exercise, alcohol abuse, and drug abuse.

Top Health Services Needed (all respondents)

- Blood pressure (59.48%)
- Obesity/nutrition counseling (57.53%)
- Cholesterol (57.18%)

Limitations

Future data collection efforts should focus on obtaining a more representative sample to better understand the health needs of Essex County residents. There were limitations to obtaining survey respondents due to COVID-19 and the Delta variant surge. The primary data collection location was the three mass-vaccination sites. The survey participants were predominantly those who were getting COVID vaccines. In fact, 99.26% of the respondents had already received at least one COVID-19 vaccination. Hence, this rate is not a true reflection of the vaccination rate in Essex County. According to COVID ActNow website, 91.3% of the county has at least one dose of the vaccine (https://covidactnow.org/us/new_jersey-nj/county/essex_county/?s=36662424).

The data should be interpreted with an understanding that the survey study sample is not necessarily representative of the Essex County population in terms of the demographic makeup. According to 2020 U.S. Census data, the percentages of White residents and African American residents in Essex County were 48.9% and 41.9% respectively, while White respondents and African American respondents in the survey sample were 71.91% and 14.9% respectively, while the remaining 13.18% represents all other racial categories.

Table of Contents

Executive Summary.....	2
Introduction	6
Survey Demographic Information.....	6-8
Important Health Issues in the Community.....	9-18
Unhealthy Behaviors that Impact the Community	18-25
Factors that Affect Personal Wellbeing in Community	26-34
Top Health Services Needed	35-40
COVID and Flu Vaccines.....	41-62
Exercise	63-76
Fruit and Vegetable Consumption.....	77-88
Health Insurance.....	89-100
Medical Conditions and Medical Care.....	101-116
History of Checkup/Wellness Visits.....	117-128
Impact of COVID on Medical Care.....	129-135
Appendix.....	136-170

Introduction

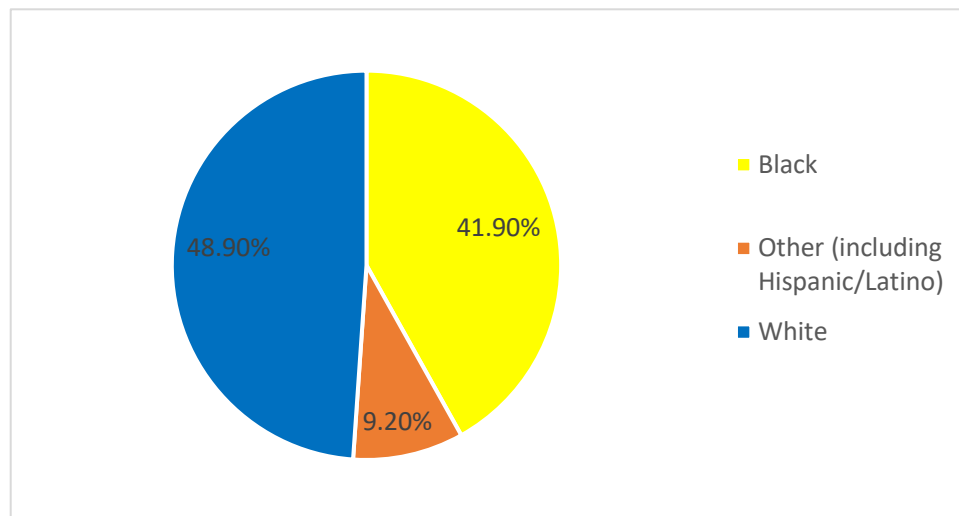
Consistent with previous community health needs assessments, the purpose of this report is to provide an update on health issues in Essex County, NJ. The study had three major objectives: to understand the key health issues that impact the community; measure the health status and behaviors of Essex County residents; produce evidence for evaluating public health policies, strategies, and programs; and to create data driven initiatives to advance health.

The report is organized as follows. Section 1 provides demographic data on survey participants and the Essex County population. Section 2 discusses the important health issues in the community identified by survey participants. Section 3 is a discussion of the unhealthy behaviors impacting the community. Section 4 discusses the important factors that affect personal wellbeing in the community. Section 5 shows the top health services needed by Essex County residents. Section 6 presents data on COVID-19 and flu vaccines. Section 7 and Section 8 provide data on physical exercises and fruit and vegetable consumption behaviors. Section 9 presents data on health insurance. Section 10 presents data on self-reported medical conditions and medical care. Also, this section provides information on the impact of COVID-19 on medical care and check-up/wellness visits.

Section 1: Survey Participants Demographics

Table 1. Racial Demographics of Essex County

	Percent
Black	41.9
Other (including Hispanic/Latino)	9.2
White	48.9
Total	100

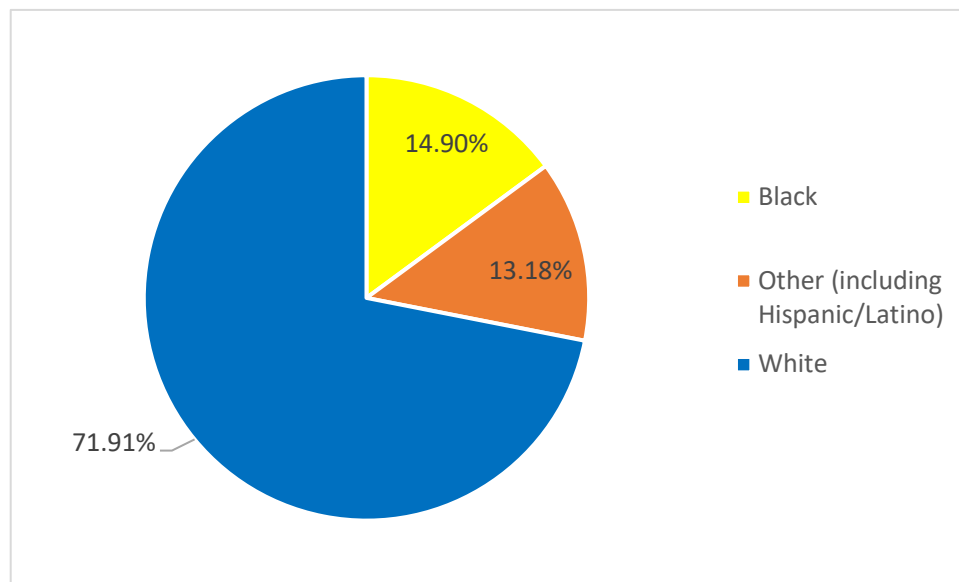


Source: U.S. Census. <https://www.census.gov/quickfacts/fact/table/essexcountynewjersey,US>

Once incomplete surveys were removed from the sample, we had 11,045 total usable surveys. The black population makes up 14.9% (1,646) of the sample, the white population is 71.91% (7,943) and all other racial groups are 13.18% (1,456).

Table 2. Racial Demographics of the Survey

	Freq.	Percent
Black	1,646	14.9
Other (including Hispanic/Latino)	1,456	13.18
White	7,943	71.91
Total	11,045	100



Females make up the majority of the survey respondents at 60.15% (6,669), males are 39.14% (4,339) and others are .71% (79).

Table 3. Surveys by Gender

	Freq.	Percent
Female	6,669	60.15
Male	4,339	39.14
Other (non-binary, other)	79	0.71
Total	11,087	100

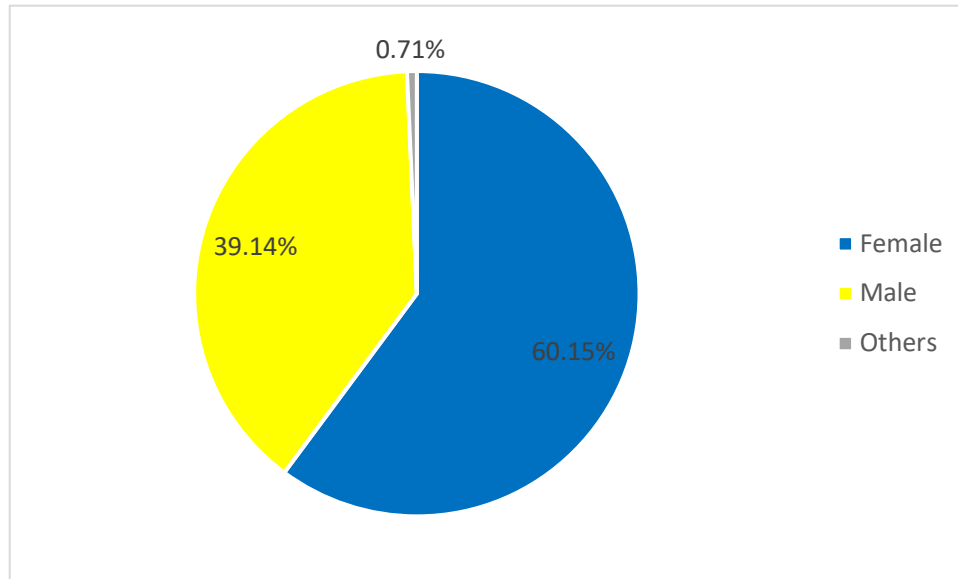
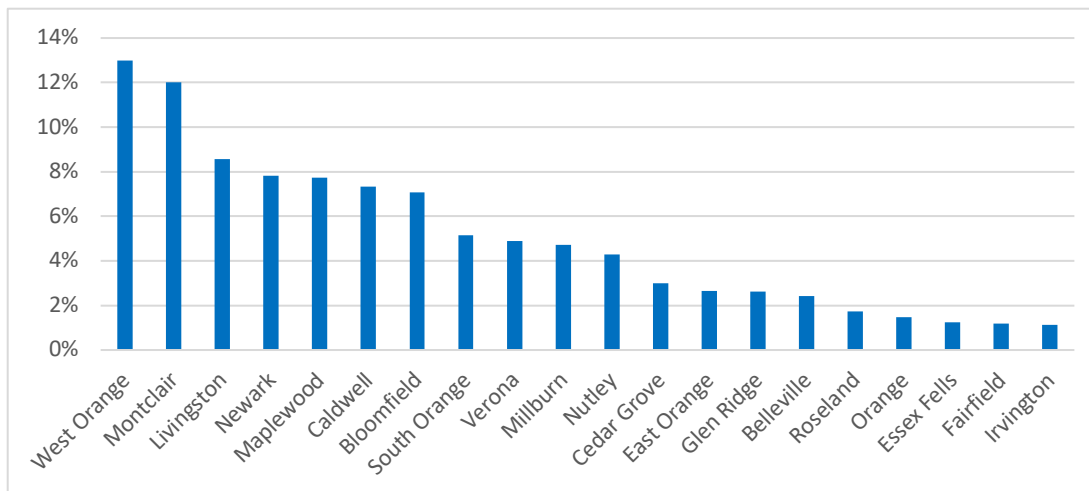


Table 4. Respondents by Cities

<i>City</i>	<i>Freq.</i>	<i>Percent</i>
Belleville	270	2.43%
Bloomfield	786	7.06%
Caldwell	816	7.33%
Cedar Grove	332	2.98%
East Orange	295	2.65%
Essex Fells	139	1.25%
Fairfield	133	1.20%
Glen Ridge	293	2.63%
Irvington	124	1.11%
Livingston	954	8.57%
Maplewood	859	7.72%
Millburn	525	4.72%
Montclair	1,336	12.01%
Newark	869	7.81%
Nutley	478	4.30%
Orange	164	1.47%
Roseland	194	1.74%
South Orange	572	5.14%
Verona	543	4.88%
West Orange	1,445	12.99%
Total	11,127	100

Note: Respondents were classified by zip code. Caldwell includes West Caldwell and North Caldwell, given the same zip code.

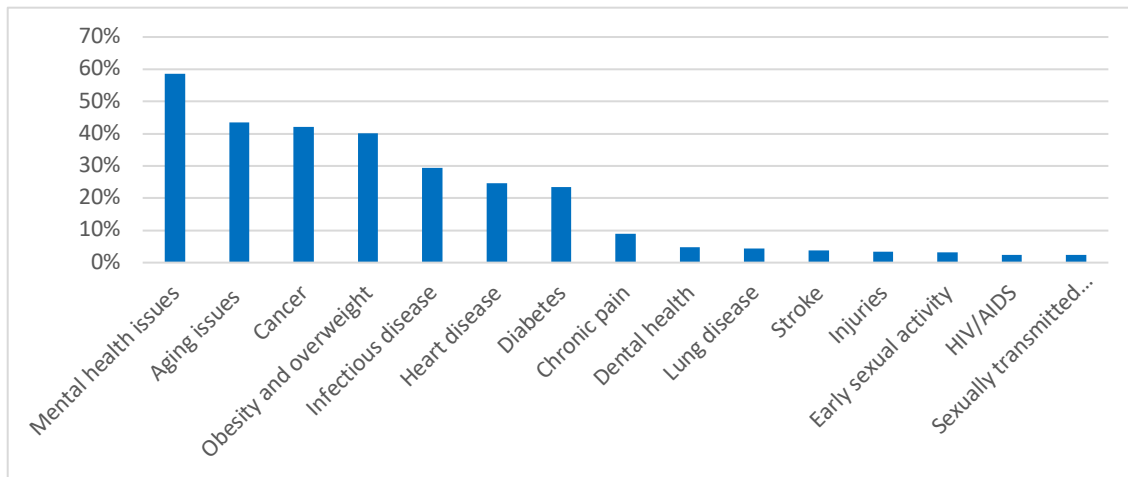


Section 2: Important Health Issues in the Community

The three most important health issues reported by county-wide survey respondents are: mental health issues (58.54%), aging issues such as Alzheimer’s disease (43.43%), and cancer (42.14%). Other concerning health issues include obesity and overweight (40.08%), infectious disease such as flu (29.47%), heart disease (24.58%) and diabetes (23.49%).

Table 5. Health Issues in Community, Total population

	Freq.	Percent out of total respondents (N=11,060)
Mental health issues (such as depression, anxiety, schizophrenia)	6,475	58.54
Aging issues (such as Alzheimer’s disease, hearing loss, memory loss, arthritis, etc.)	4,803	43.43
Cancer	4,661	42.14
Obesity and overweight	4,433	40.08
Infectious disease (such as flu, pneumonia, etc.)	3,259	29.47
Heart disease	2,719	24.58
Diabetes	2,598	23.49
Chronic pain	999	9.03
Dental health (including tooth pain)	530	4.79
Lung disease (such as COPD, asthma, etc.)	488	4.41
Stroke	427	3.86
Injuries	380	3.44
Early sexual activity	359	3.25
HIV/AIDS	258	2.33
Sexually transmitted infections and disease	258	2.33

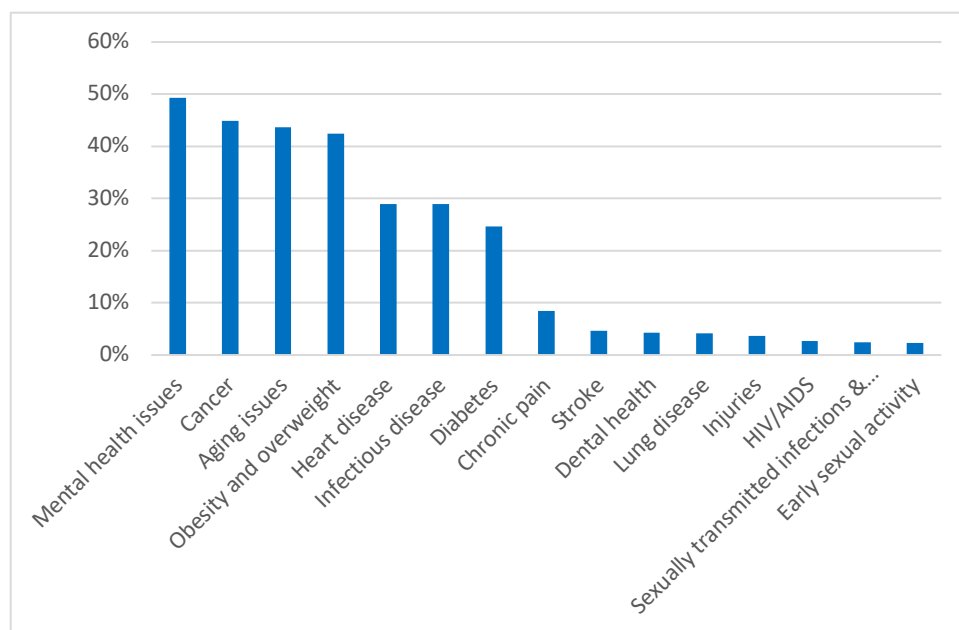


All three gender groups (male, female, and other non-binary respondents) identify mental health, cancer, and aging the three top health issues in community. Notably, 86.08% of those who identify themselves as non-binary or other gender-believe mental health is an important health issue in community, compared to 64.33% female and 49.27% male respondents.

Table 6. Health Issues in Community, Gender

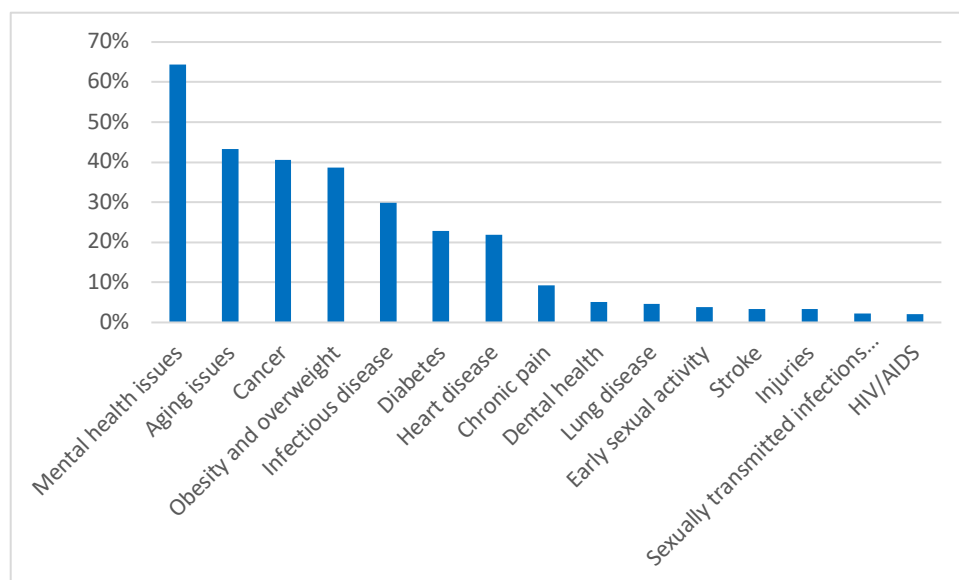
A. Male Participants

	Freq.	Percent out of total respondents (N=4,315)
Mental health issues (such as depression, anxiety, schizophrenia)	2,126	49.27
Cancer	1,935	44.84
Aging issues (such as Alzheimer’s disease, hearing loss, memory loss, arthritis, etc.)	1,885	43.68
Obesity and overweight	1,832	42.46
Heart disease	1,250	28.97
Infectious disease (such as flu, pneumonia, etc.)	1,248	28.92
Diabetes	1,061	24.59
Chronic pain	365	8.46
Stroke	202	4.68
Dental health (including tooth pain)	183	4.24
Lung disease (such as COPD, asthma, etc.)	177	4.1
Injuries	157	3.64
HIV/AIDS	114	2.64
Sexually transmitted infections and disease	103	2.39
Early sexual activity	101	2.34



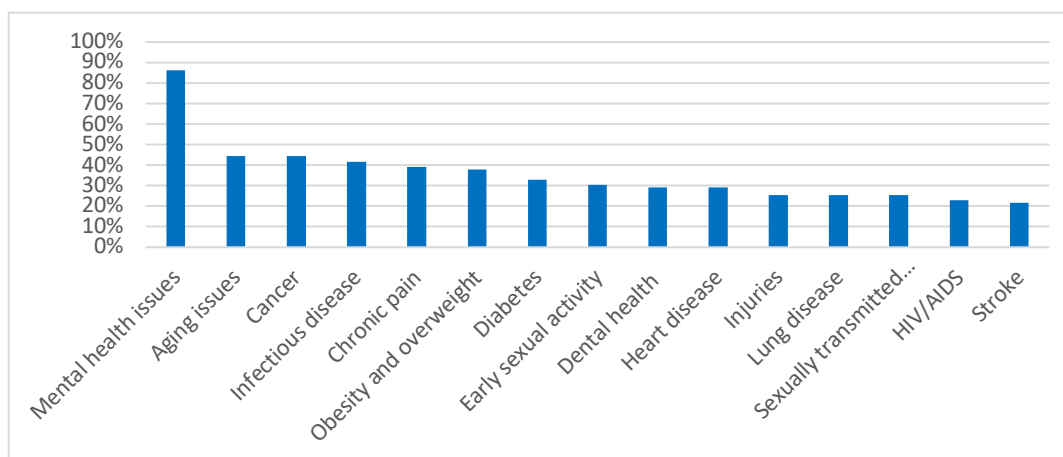
B. Female Participants

	Freq.	Percent out of total respondents (N=6,627)
Mental health issues (such as depression, anxiety, schizophrenia)	4,263	64.33
Aging issues (such as Alzheimer's disease, hearing loss, memory loss, arthritis, etc.)	2,872	43.34
Cancer	2,689	40.58
Obesity and overweight	2,566	38.72
Infectious disease (such as flu, pneumonia, etc.)	1,975	29.8
Diabetes	1,516	22.88
Heart disease	1,450	21.88
Chronic pain	614	9.27
Dental health (including tooth pain)	339	5.12
Lung disease (such as COPD, asthma, etc.)	304	4.59
Early sexual activity	249	3.76
Stroke	221	3.33
Injuries	218	3.29
Sexually transmitted infections and disease	150	2.26
HIV/AIDS	139	2.1



C. Other (non-binary, other) Participants

	Freq.	Percent out of total respondents (N=79)
Mental health issues (such as depression, anxiety, schizophrenia)	68	86.08
Aging issues (such as Alzheimer's disease, hearing loss, memory loss, arthritis, etc.)	35	44.3
Cancer	35	44.3
Infectious disease (such as flu, pneumonia, etc.)	33	41.77
Chronic pain	31	39.24
Obesity and overweight	30	37.97
Diabetes	26	32.91
Early sexual activity	24	30.38
Dental health (including tooth pain)	23	29.11
Heart disease	23	29.11
Injuries	20	25.32
Lung disease (such as COPD, asthma, etc.)	20	25.32
Sexually transmitted infections and disease	20	25.32
HIV/AIDS	18	22.78
Stroke	17	21.52

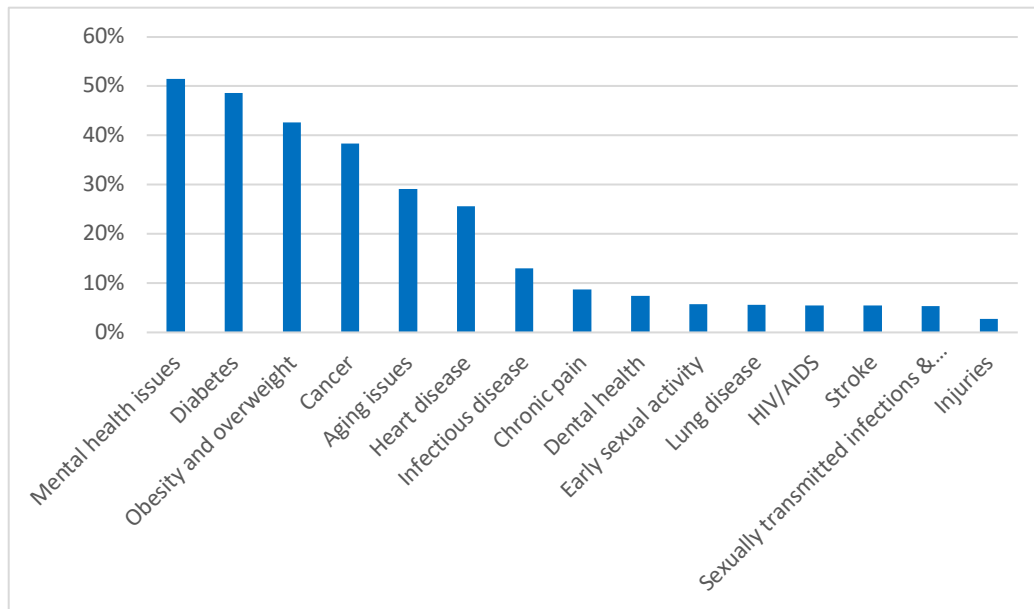


Mental health issues were the top health issue reported by all three racial groups. 51.47% African American, 60.86% White, and 53.86% other residents believe that mental health is the most important health issue in community. It is followed by diabetes, obesity and overweight for African American residents, ageing issues and cancer for White residents, and obesity and overweight and aging issues for all other residents. Diabetes seems to be a health issue more significantly concerning African American residents than other racial groups.

Table 7. Health Issues in Community by Race

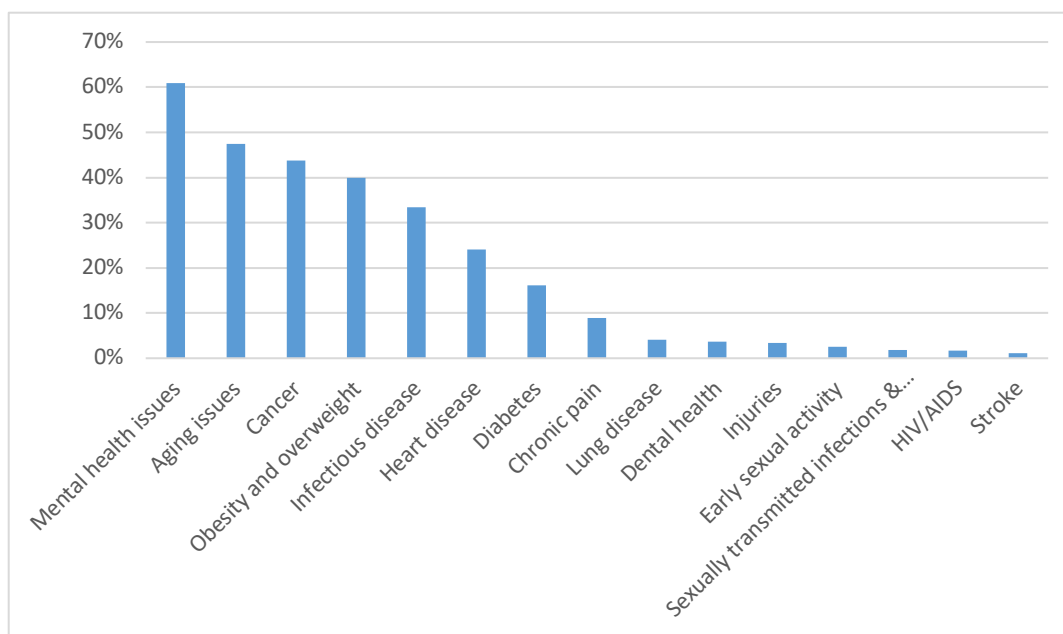
A. Black Participants

	Freq.	Percent out of total respondents (N= 1,632)
Mental health issues (such as depression, anxiety, schizophrenia)	840	51.47
Diabetes	793	48.59
Obesity and overweight	697	42.71
Cancer	627	38.42
Aging issues (such as Alzheimer's disease, hearing loss, memory loss, arthritis, etc.)	475	29.11
Heart disease	419	25.67
Infectious disease (such as flu, pneumonia, etc.)	212	12.99
Chronic pain	143	8.76
Dental health (including tooth pain)	122	7.48
Early sexual activity	93	5.7
Lung disease (such as COPD, asthma, etc.)	92	5.64
HIV/AIDS	90	5.51
Stroke	90	5.51
Sexually transmitted infections and disease	88	5.39
Injuries	45	2.76



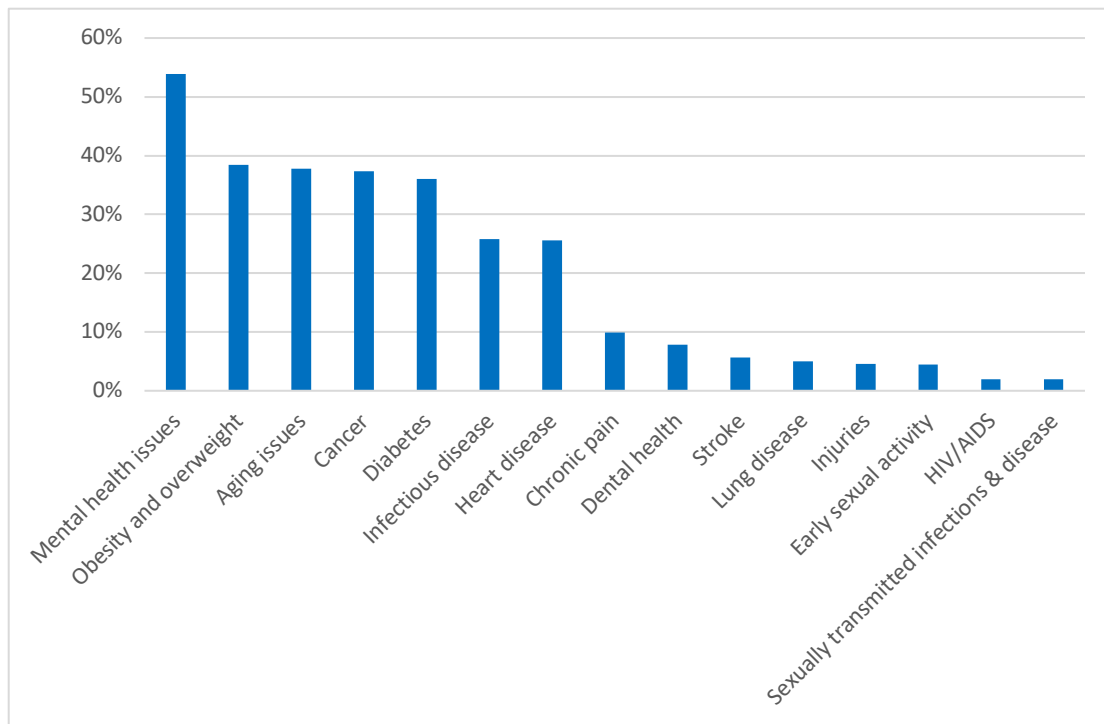
B. White Participants

	Freq.	Percent out of total respondents (N=7,910)
Mental health issues (such as depression, anxiety, schizophrenia)	4,814	60.86
Aging issues (such as Alzheimer's disease, hearing loss, memory loss, arthritis, etc.)	3,748	47.38
Cancer	3,465	43.81
Obesity and overweight	3,155	39.89
Infectious disease (such as flu, pneumonia, etc.)	2,648	33.48
Heart disease	1,907	24.11
Diabetes	1,275	16.12
Chronic pain	707	8.94
Lung disease (such as COPD, asthma, etc.)	322	4.07
Dental health (including tooth pain)	293	3.70
Injuries	266	3.36
Early sexual activity	199	2.52
Sexually transmitted infections and disease	141	1.78
HIV/AIDS	138	1.74
Stroke	90	1.14



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent out of total respondents (N= 1,437)
Mental health issues (such as depression, anxiety, schizophrenia)	774	53.86
Obesity and overweight	552	38.41
Aging issues (such as Alzheimer's disease, hearing loss, memory loss, arthritis, etc.)	542	37.72
Cancer	536	37.3
Diabetes	517	35.98
Infectious disease (such as flu, pneumonia, etc.)	371	25.82
Heart disease	367	25.54
Chronic pain	143	9.95
Dental health (including tooth pain)	112	7.79
Stroke	81	5.64
Lung disease (such as COPD, asthma, etc.)	72	5.01
Injuries	65	4.52
Early sexual activity	64	4.45
HIV/AIDS	28	1.95
Sexually transmitted infections and disease	28	1.95



Mental health issues are the top health issue identified by residents of all Essex County municipalities except Essex Fells. Other concerning health issues in municipalities across Essex County are aging issues, cancer and obesity.

Table 8. Top three Health Issues by Cities in Essex County

<i>Belleville</i> 1. Mental health issues 2. Obesity & overweight 3. Cancer	<i>Bloomfield</i> 1. Mental health issues 2. Aging issues 3. Obesity & overweight	<i>Caldwell</i> 1. Mental health issues 2. Aging issues 3. Cancer
<i>Cedar Grove</i> 1. Cancer 2. Mental health issues 3. Aging issues	<i>East Orange</i> 1. Diabetes 2. Mental health issues 3. Obesity & overweight	<i>Essex Fells</i> 1. Infectious disease 2. Cancer 3. Aging issues
<i>Fairfield</i> 1. Cancer 2. Mental health issues 3. Aging issues	<i>Glen Ridge</i> 1. Mental health issues 2. Aging issues 3. Obesity & overweight	<i>Irvington</i> 1. Diabetes 2. Mental health issues 3. Obesity & overweight

<i>Livingston</i>	<i>Maplewood</i>	<i>Millburn</i>
1. Mental health issues 2. Cancer 3. Aging issues	1. Mental health issues 2. Aging issues 3. Cancer	1. Mental health issues 2. Cancer 3. Aging issues
<i>Montclair</i>	<i>Newark</i>	<i>Nutley</i>
1. Mental health issues 2. Aging issues 3. Cancer	1. Mental health issues 2. Diabetes 3. Obesity & overweight	1. Mental health issues 2. Cancer 3. Aging issues
<i>Orange</i>	<i>Roseland</i>	<i>South Orange</i>
1. Diabetes 2. Mental health issues 3. Obesity & overweight	1. Cancer 2. Mental health issues 3. Aging issues	1. Mental health issues 2. Obesity & overweight 3. Aging issues
<i>Verona</i>	<i>West Orange</i>	
1. Mental health issues 2. Cancer 3. Aging issues	1. Mental health issues 2. Obesity & overweight 3. Aging issues	

Note: Respondents were classified by zip code. Caldwell includes West Caldwell and North Caldwell, given the same zip code.

Section 3: Unhealthy Behaviors that Impact the Community

Essex County residents think that lack of exercise, poor eating habits, and angry/violent behavior are the three top unhealthy behaviors negatively impacting the community. Other unhealthy behaviors noted include drug abuse and alcohol abuse.

Table 9. Unhealthy Behavior that Impact the Community, Total population

	Freq.	Percent out of total respondents (N=10,977)
Lack of exercise	5,118	46.62
Poor eating habits	5,089	46.36
Angry behavior/violence	4,271	38.91
Drug abuse	3,980	36.26
Alcohol abuse	3,655	33.3
Reckless driving	2,549	23.22
Not getting a routine check-up	2,429	22.13
Smoking	1,927	17.55
Domestic violence	1,730	15.76
Child abuse	944	8.6
Elder abuse (ie. Physical, emotional, financial, sexual)	538	4.9
Risky sexual behavior	273	2.49

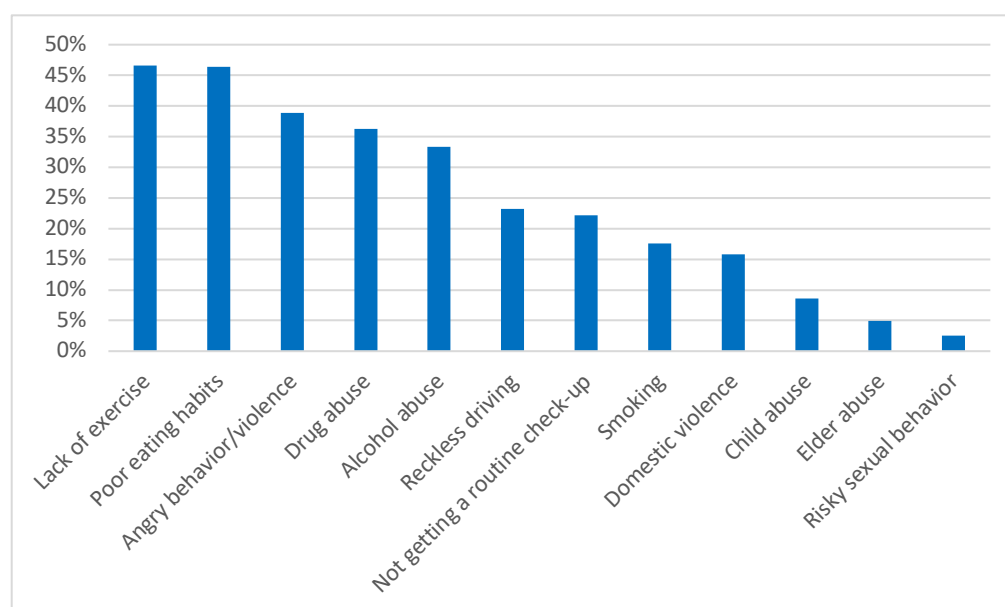
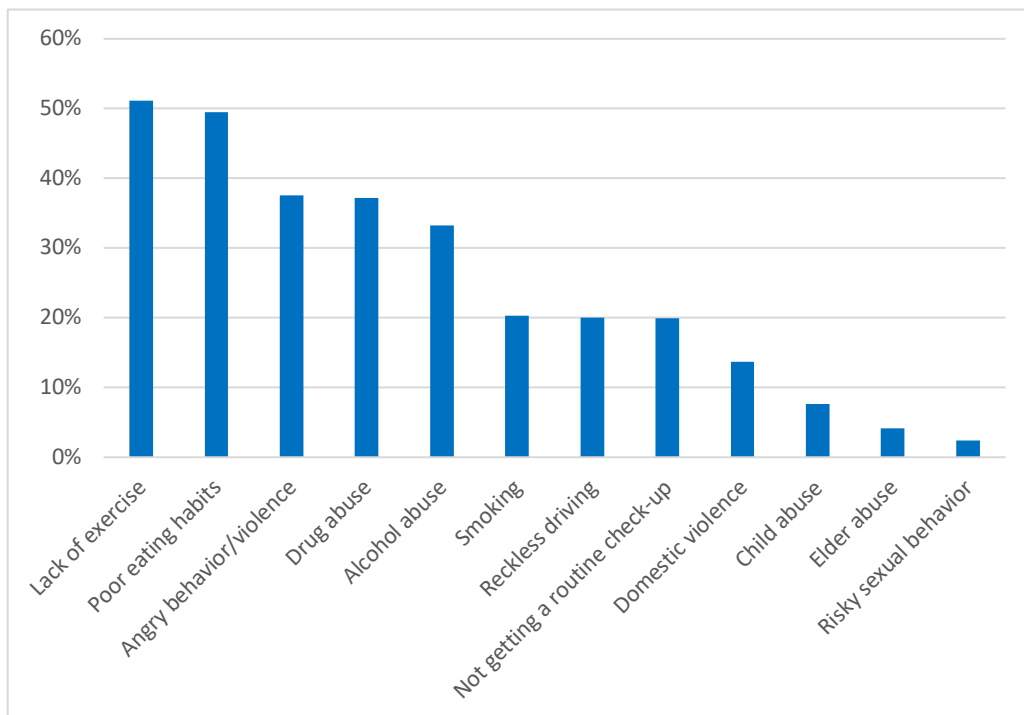


Table 10. Unhealthy Behavior that Impact the Community, Gender

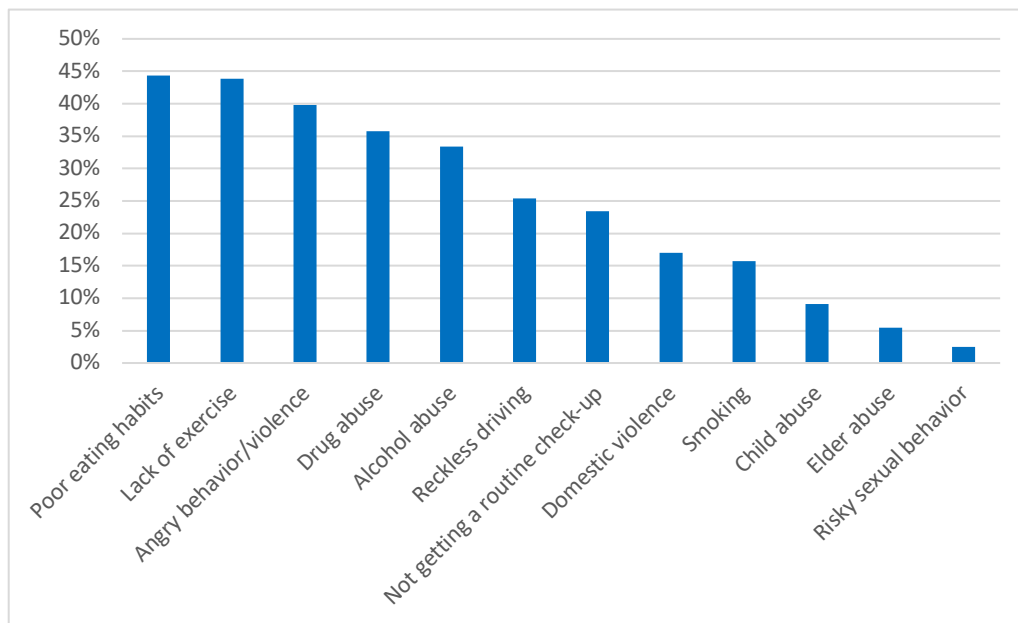
A. Male Participants

	Freq.	Percent out of total respondents (N= 4,282)
Lack of exercise	2,189	51.12
Poor eating habits	2,117	49.44
Angry behavior/ violence	1,607	37.53
Drug abuse	1,594	37.23
Alcohol abuse	1,422	33.21
Smoking	868	20.27
Reckless driving	858	20.04
Not getting a routine check-up	855	19.97
Domestic violence	587	13.71
Child abuse	327	7.64
Elder abuse (ie. Physical, emotional, financial, sexual)	177	4.13
Risky sexual behavior	104	2.43



B. Female Participants

	Freq.	Percent out of total respondents (N= 6,578)
Poor eating habits	2,919	44.38
Lack of exercise	2,886	43.87
Angry behavior/ violence	2,618	39.8
Drug abuse	2,352	35.76
Alcohol abuse	2,199	33.43
Reckless driving	1,669	25.37
Not getting a routine check-up	1,541	23.43
Domestic violence	1,116	16.97
Smoking	1,036	15.75
Child abuse	600	9.12
Elder abuse (ie. Physical, emotional, financial, sexual)	356	5.41
Risky sexual behavior	161	2.45



C. Others (non-binary, other) Participants

	Freq.	Percent out of total respondents (N= 79)
Poor eating habits	42	53.16
Alcohol abuse	39	49.37
Not getting a routine check-up	37	46.84
Angry behavior/ violence	36	45.57
Domestic violence	36	45.57
Drug abuse	34	43.04
Lack of exercise	33	41.77
Reckless driving	28	35.44
Smoking	28	35.44
Child abuse	25	31.65
Risky sexual behavior	21	26.58
Elder abuse (ie. Physical, emotional, financial, sexual)	19	24.05

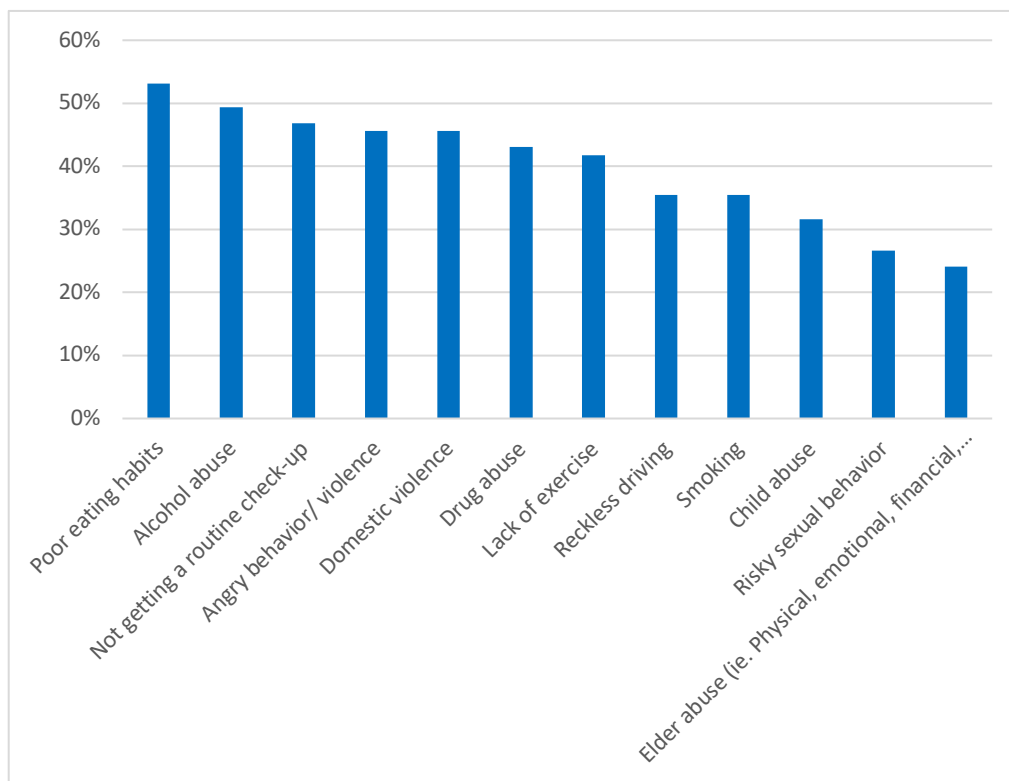
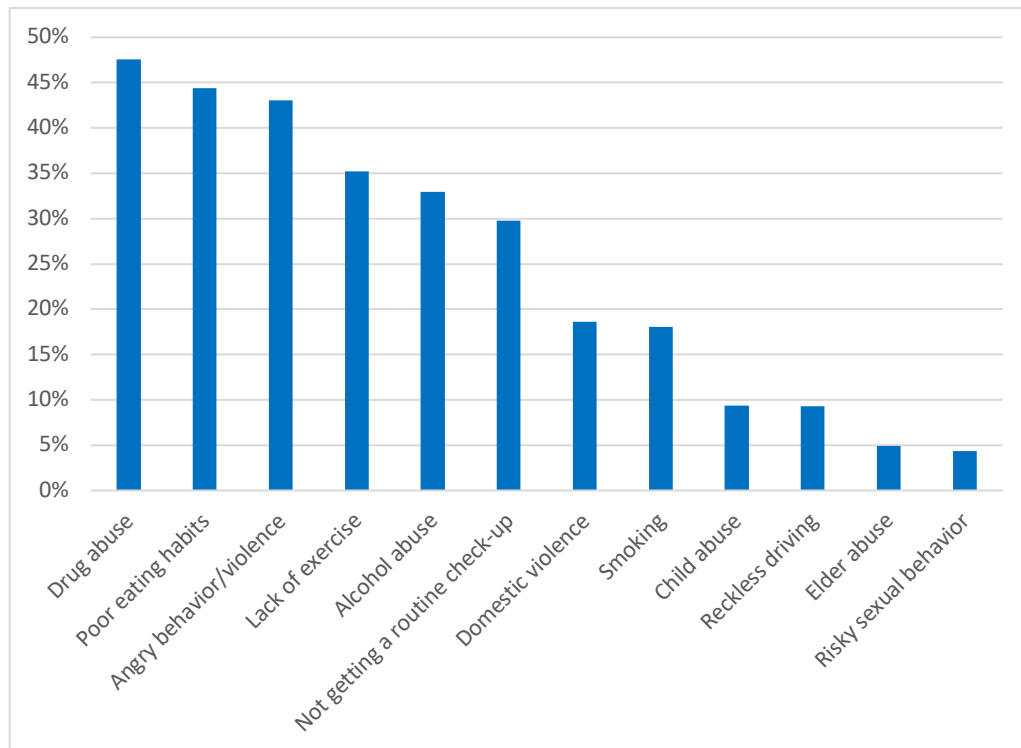


Table 11. Unhealthy Behavior that Impact the Community, Race

For African American residents, the top unhealthy behavior that impacts the community is drug abuse, followed by poor eating habits and angry behavior/violence. The unhealthy behavior concerning white and other residents is lack of exercise.

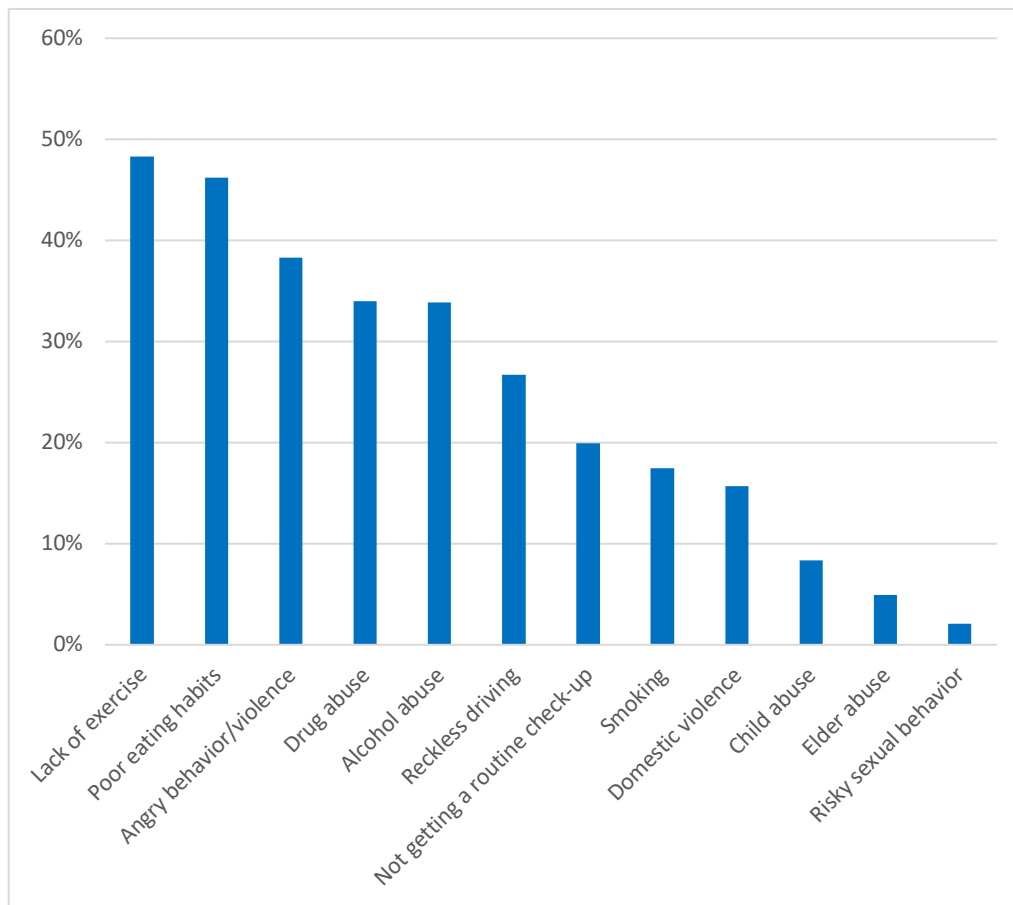
A. Black Participants

	Freq.	Percent out of total respondents (N= 1,620)
Drug abuse	771	47.59
Poor eating habits	719	44.38
Angry behavior/ violence	697	43.02
Lack of exercise	570	35.19
Alcohol abuse	534	32.96
Not getting a routine check-up	482	29.75
Domestic violence	302	18.64
Smoking	292	18.02
Child abuse	152	9.38
Reckless driving	150	9.26
Elder abuse (ie. Physical, emotional, financial, sexual)	79	4.88
Risky sexual behavior	70	4.32



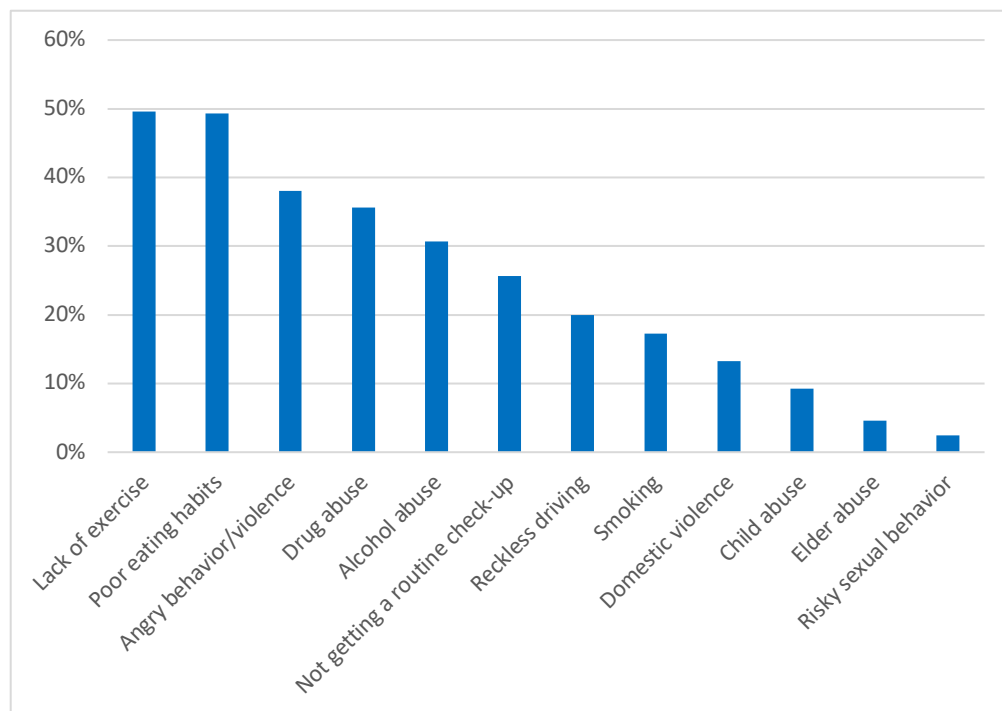
B. White Participants

	Freq.	Percent out of total respondents (N= 7,850)
Lack of exercise	3,789	48.27
Poor eating habits	3,625	46.18
Angry behavior/violence	3,004	38.27
Drug abuse	2,670	34.01
Alcohol abuse	2,660	33.89
Reckless driving	2,099	26.74
Not getting a routine check-up	1,565	19.94
Smoking	1,372	17.48
Domestic violence	1,232	15.69
Child abuse	656	8.36
Elder abuse (ie. Physical, emotional, financial, sexual)	387	4.93
Risky sexual behavior	166	2.11



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent out of total respondents (N= 1,429)
Lack of exercise	708	49.55
Poor eating habits	704	49.27
Angry behavior/violence	543	38
Drug abuse	509	35.62
Alcohol abuse	438	30.65
Not getting a routine check-up	366	25.61
Reckless driving	285	19.94
Smoking	247	17.28
Domestic violence	190	13.3
Child abuse	132	9.24
Elder abuse (ie. Physical, emotional, financial, sexual)	65	4.55
Risky sexual behavior	35	2.45



Unhealthy behaviors impacting the community reported by residents of 22 municipalities across Essex County are poor eating habits, angry behavior/violence, lack of exercise, alcohol abuse, and drug abuse.

Table 12. Top three Unhealthy Behavior that Impact the Community, Essex County

<i>Belleville</i>	<i>Bloomfield</i>	<i>Caldwell</i>
1. Drug abuse 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Angry behavior/violence 3. Poor eating habits	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence
<i>Cedar Grove</i>	<i>East Orange</i>	<i>Essex Fells</i>
1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Drug abuse 2. Angry behavior/violence 3. Alcohol abuse	1. Alcohol abuse 2. Angry behavior/violence 3. Lack of exercise
<i>Fairfield</i>	<i>Glen Ridge</i>	<i>Irvington</i>
1. Drug abuse 2. Angry behavior/violence 3. Alcohol abuse	1. Lack of exercise 2. Poor eating habits 3. Alcohol abuse	1. Drug abuse 2. Angry behavior/violence 3. Alcohol abuse
<i>Livingston</i>	<i>Maplewood</i>	<i>Millburn</i>
1. Lack of exercise 2. Poor eating habits 3. Drug abuse	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Poor eating habits 2. Lack of exercise 3. Alcohol abuse
<i>Montclair</i>	<i>Newark</i>	<i>Nutley</i>
1. Lack of exercise 2. Poor eating habits 3. Alcohol abuse	1. Drug abuse 2. Angry behavior/violence 3. Alcohol abuse	1. Lack of exercise 2. Angry behavior/violence 3. Poor eating habits
<i>Orange</i>	<i>Roseland</i>	<i>South Orange</i>
1. Drug abuse 2. Angry behavior/violence 3. Poor eating habits	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Poor eating habits 2. Lack of exercise 3. Angry behavior/violence
<i>Verona</i>	<i>West Orange</i>	
1. Lack of exercise 2. Poor eating habits 3. Alcohol abuse	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	

Note: Respondents were classified by zip code. Caldwell includes West Caldwell and North Caldwell, given the same zip code.

Section 4: Factors that Affect Personal Wellbeing in Community

Essex County residents identify lack of exercise, poor eating habits, and angry and violent behavior as the top three factors that affect personal wellbeing and the top three unhealthy behaviors that impact the community. In addition, reckless driving and not getting a routine check-up are identified as other factors that affect personal wellbeing in the community. The perceived factors affecting personal wellbeing do not vary based on gender.

Table 13. Factors that Affect Personal Wellbeing in Community, Total population

	Freq.	Percent out of total respondents (N= 10,414)
Angry behavior/ violence	3,915	37.59
Alcohol abuse	1,981	19.02
Child abuse	351	3.37
Domestic violence	606	5.82
Drug abuse	1,842	17.69
Elder abuse (ie. Physical, emotional, financial, sexual)	526	5.05
Lack of exercise	6,402	61.47
Not getting a routine check-up	3,010	28.90
Poor eating habits	5,761	55.32
Reckless driving	3,536	33.95
Risky sexual behavior	255	2.45
Smoking	1,313	12.61

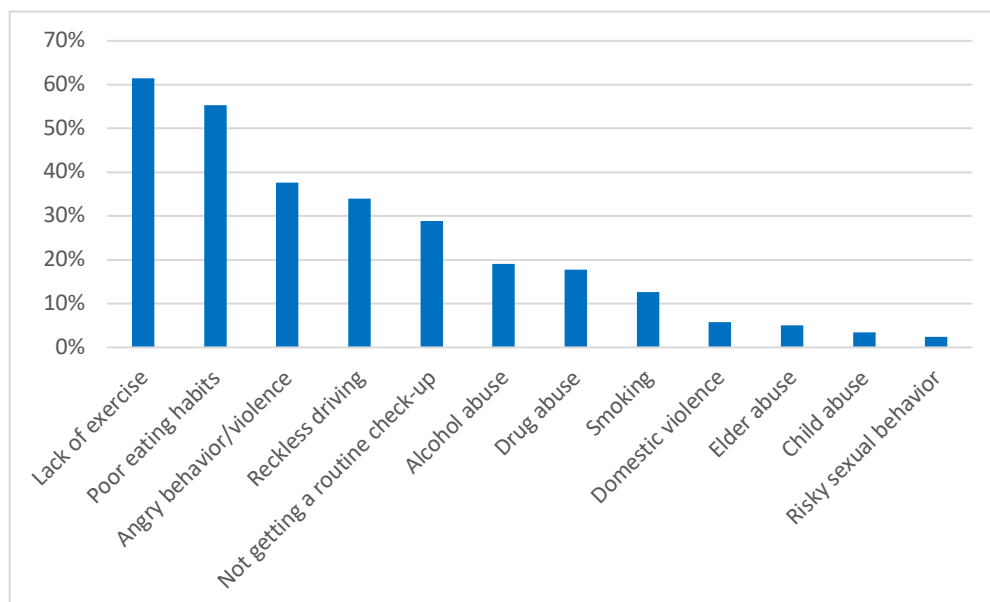
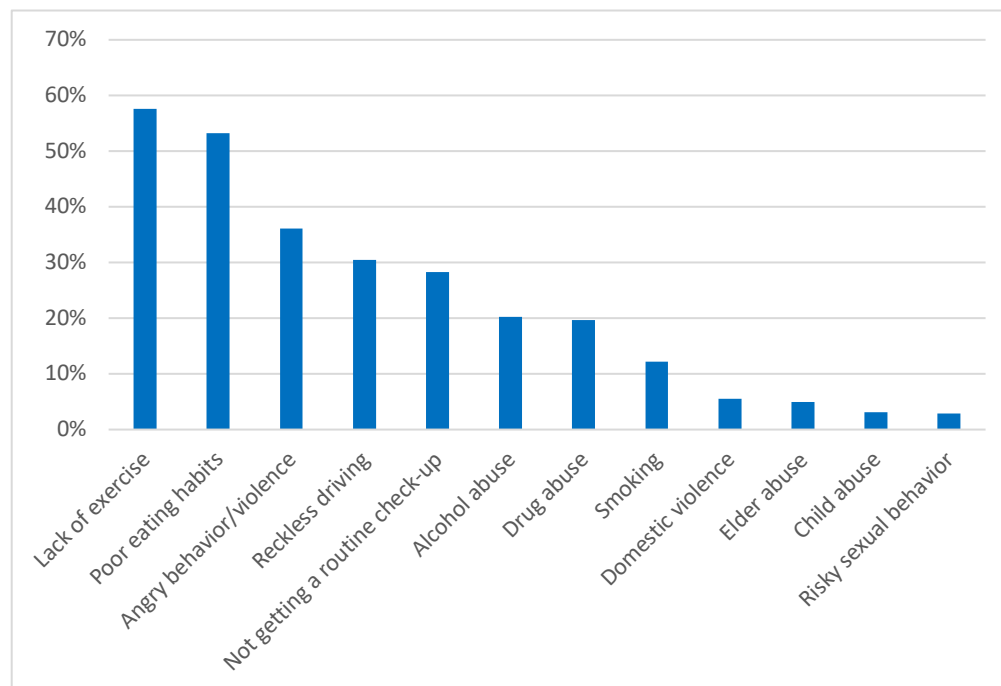


Table 14. Factors that Affect Personal Wellbeing in Community, Gender

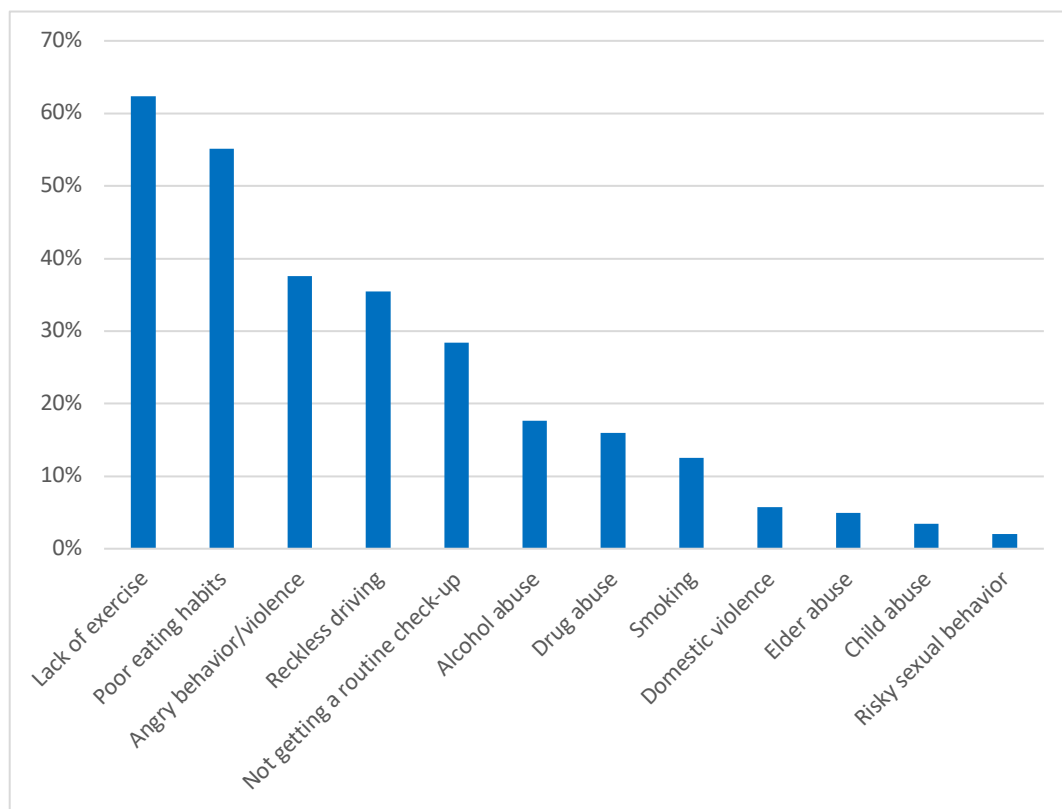
A. Male Participants

	Freq.	Percent out of total respondents (N= 4,282)
Angry behavior/ violence	1,547	36.13
Alcohol abuse	868	20.27
Child abuse	132	3.08
Domestic violence	239	5.58
Drug abuse	841	19.64
Elder abuse (ie. Physical, emotional, financial, sexual)	214	5.00
Lack of exercise	2,467	57.61
Not getting a routine check-up	1,211	28.28
Poor eating habits	2,282	53.29
Reckless driving	1,306	30.50
Risky sexual behavior	123	2.87
Smoking	523	12.21



B. Female Participants

	Freq.	Percent out of total respondents (N= 6,197)
Angry behavior/ violence	2,329	37.58
Alcohol abuse	1,094	17.65
Child abuse	212	3.42
Domestic violence	355	5.73
Drug abuse	987	15.93
Elder abuse (ie. Physical, emotional, financial, sexual)	308	4.97
Lack of exercise	3,867	62.40
Not getting a routine check-up	1,759	28.38
Poor eating habits	3,417	55.14
Reckless driving	2,199	35.48
Risky sexual behavior	127	2.05
Smoking	777	12.54



C. Other (non-binary, other) Participants

	Freq.	Percent out of total respondents (N=74)
Lack of exercise	53	71.62
Poor eating habits	49	66.22
Not getting a routine check-up	42	56.76
Reckless driving	33	44.59
Alcohol abuse	26	35.14
Drug abuse	23	31.08
Domestic violence	22	29.73
Smoking	22	29.73
Child abuse	19	25.68
Elder abuse (ie. Physical, emotional, financial, sexual)	19	25.68
Risky sexual behavior	19	25.68
Angry behavior/violence	16	21.62

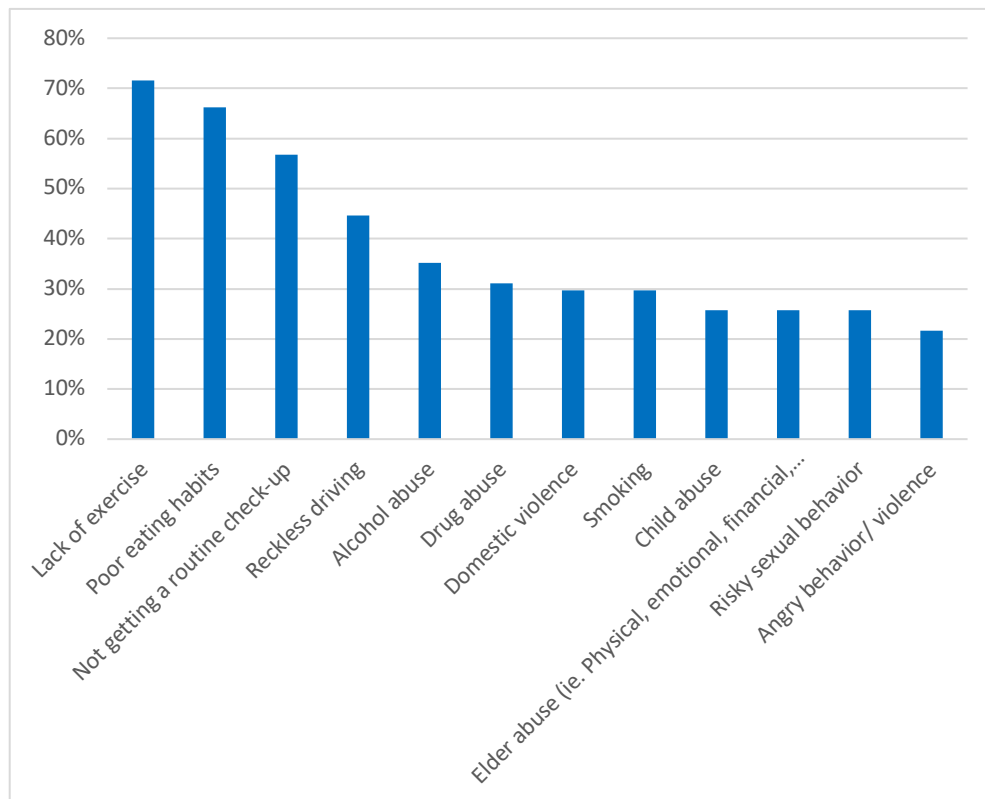
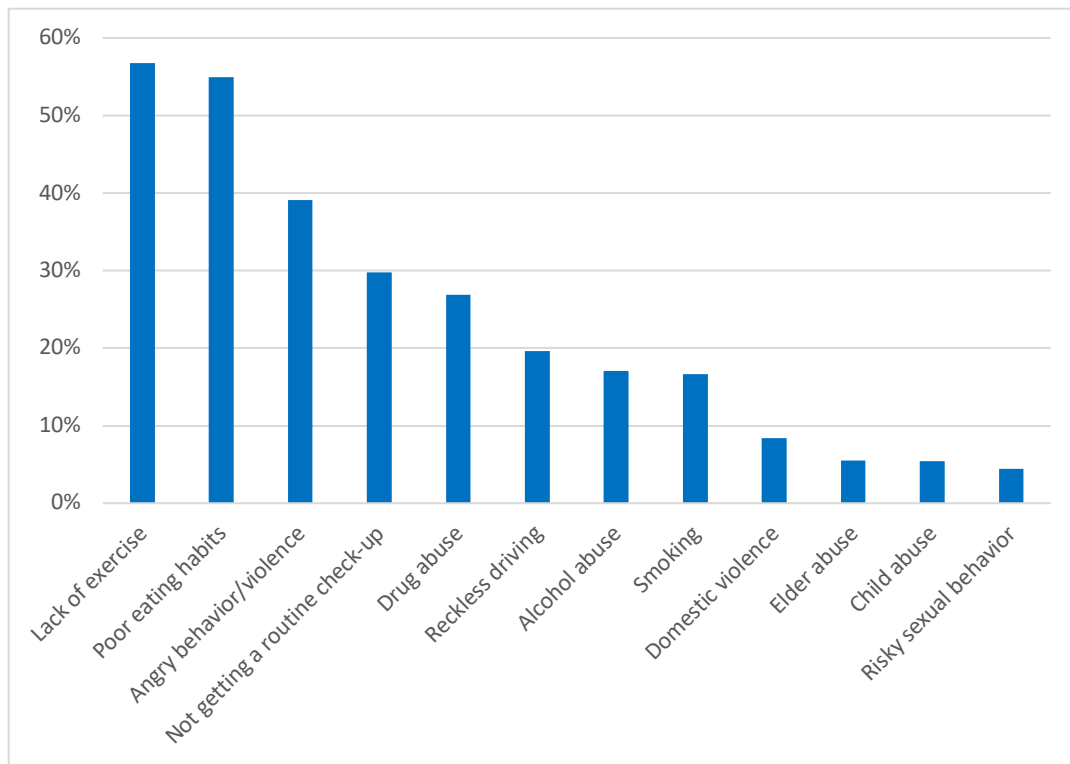


Table 15. Factors that Affect Personal Wellbeing in Community by Race

The most notable point from all racial groups in the sample is the consistency in the top three factors that affect personal wellbeing.

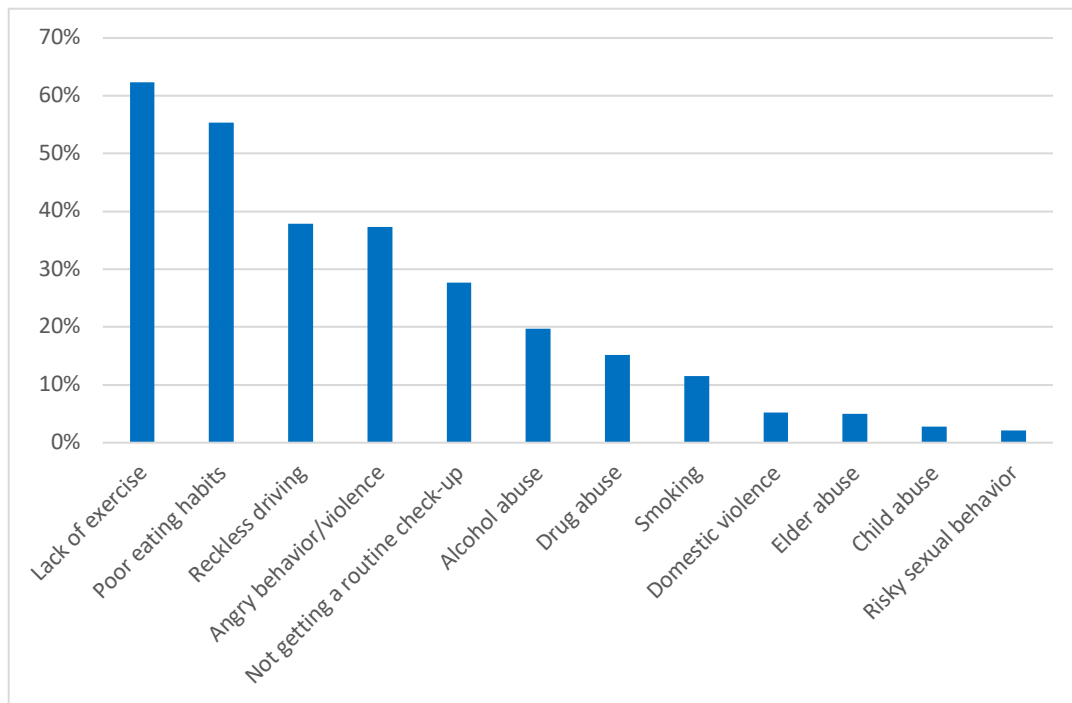
A. Black Participants

	Freq.	Percent out of total respondents (N= 1,579)
Lack of exercise	896	56.74
Poor eating habits	868	54.97
Angry behavior/violence	618	39.14
Not getting a routine check-up	470	29.77
Drug abuse	424	26.85
Reckless driving	310	19.63
Alcohol abuse	269	17.04
Smoking	263	16.66
Domestic violence	133	8.42
Elder abuse (ie. Physical, emotional, financial, sexual)	87	5.51
Child abuse	86	5.45
Risky sexual behavior	70	4.43



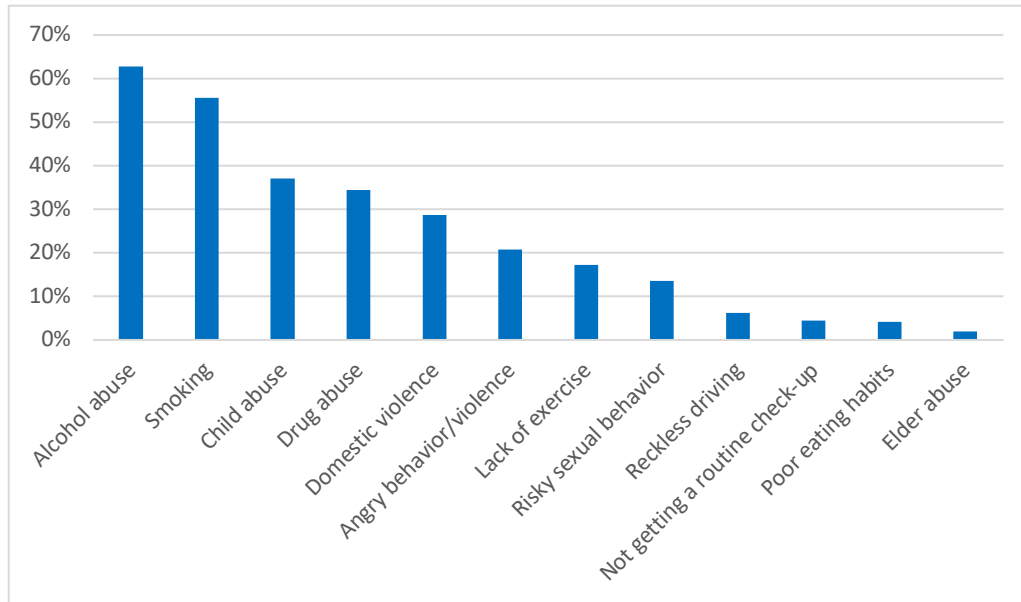
B. White Participants

	Freq.	Percent out of total respondents (N= 7,380)
Lack of exercise	4,598	62.3
Poor eating habits	4,085	55.35
Reckless driving	2,798	37.91
Angry behavior/violence	2,758	37.37
Not getting a routine check-up	2,046	27.72
Alcohol abuse	1,455	19.72
Drug abuse	1,120	15.18
Smoking	847	11.48
Domestic violence	386	5.23
Elder abuse (ie. Physical, emotional, financial, sexual)	372	5.04
Child abuse	206	2.79
Risky sexual behavior	158	2.14



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent out of total respondents (N=1,384)
Lack of exercise	869	62.79
Poor eating habits	770	55.64
Angry behavior/violence	513	37.07
Not getting a routine check-up	476	34.39
Reckless driving	398	28.76
Drug abuse	287	20.74
Alcohol abuse	238	17.2
Smoking	188	13.58
Domestic violence	85	6.14
Elder abuse (ie. Physical, emotional, financial, sexual)	62	4.48
Child abuse	57	4.12
Risky sexual behavior	27	1.95



Lack of exercise, poor eating habits, and angry behavior/violence are consistently identified by residents of all 22 municipalities as the top three factors affecting personal wellbeing.

Table 16. Factors that Affect Personal Wellbeing in Community, Essex County

<i>Belleville</i>	<i>Bloomfield</i>	<i>Caldwell</i>
1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence
<i>Cedar Grove</i>	<i>East Orange</i>	<i>Essex Fells</i>
1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Angry behavior/violence 2. Domestic violence 3. Poor eating habits
<i>Fairfield</i>	<i>Glen Ridge</i>	<i>Irvington</i>
1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Angry behavior/violence 2. Poor eating habits 3. Lack of exercise
<i>Livingston</i>	<i>Maplewood</i>	<i>Millburn</i>
1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence

<i>Montclair</i>	<i>Newark</i>	<i>Nutley</i>
1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Angry behavior/violence 3. Poor eating habits	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence
<i>Orange</i>	<i>Roseland</i>	<i>South Orange</i>
1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence
<i>Verona</i>	<i>West Orange</i>	
1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	1. Lack of exercise 2. Poor eating habits 3. Angry behavior/violence	

Note: Respondents were classified by zip code. Caldwell includes West Caldwell and North Caldwell, given the same zip code.

Section 5: Top Health Services Needed

Blood pressure, cholesterol, and obesity/nutrition counseling are the top three health services needed in the community by all respondents. Other health services needed in the community include skin cancer and diabetes services.

Table 17. Top Health Services That Are Needed, Total population

	Freq.	Percent out of total respondents (N=10,219)
Blood pressure	6,078	59.48
Obesity/ nutrition counseling	5,879	57.53
Cholesterol	5,843	57.18
Skin cancer	4,804	47.01
Diabetes/ pre-diabetes	4,523	44.26
Asthma	1,140	11.16

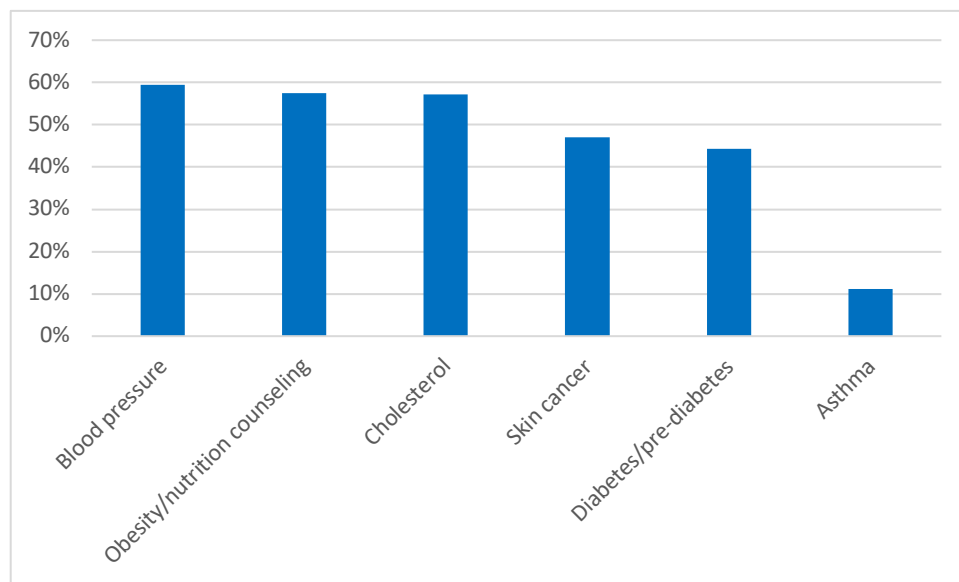
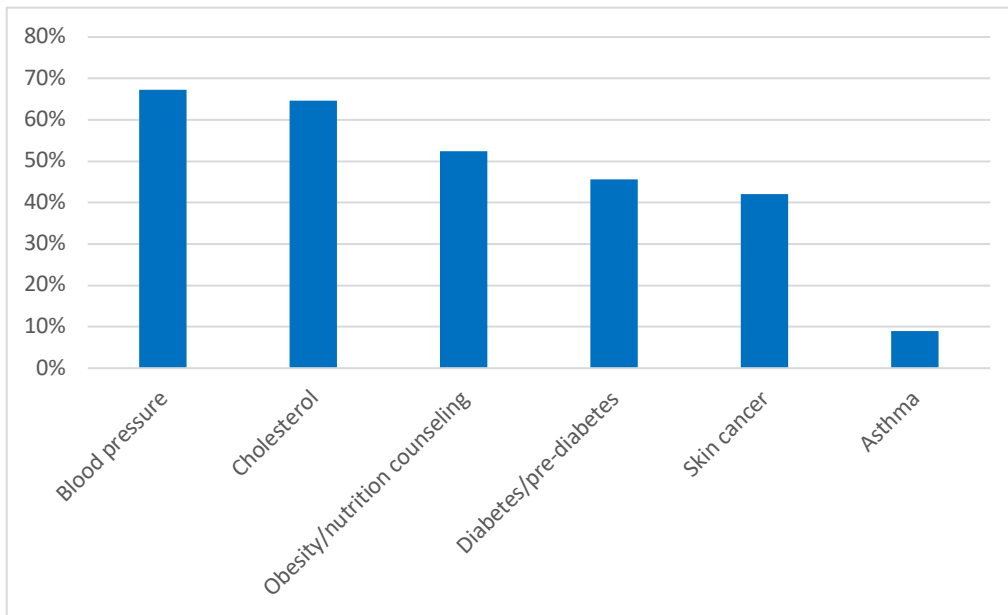


Table 18. Top Health Services That Are Needed, Gender

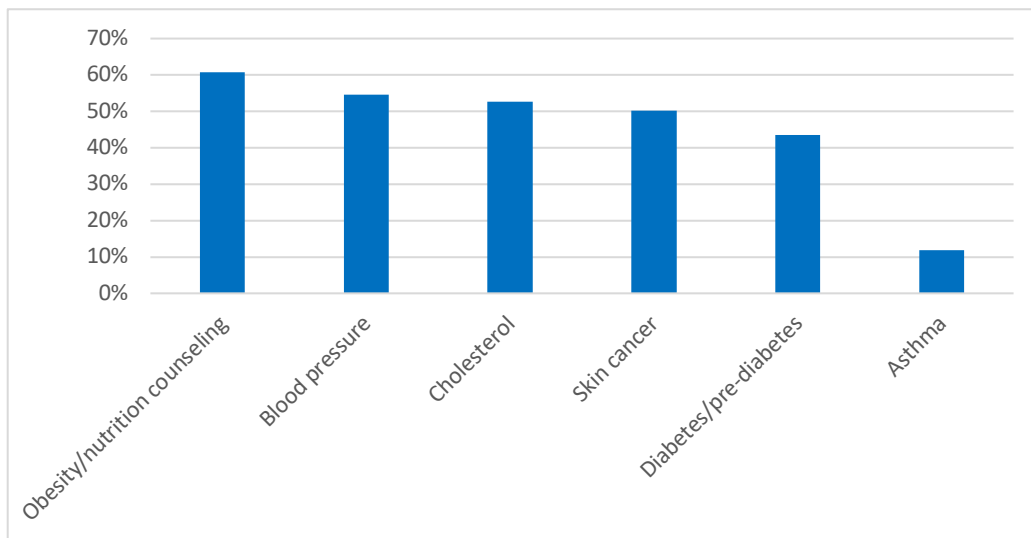
A. Male Participants

	Freq.	Percent out of total respondents (N=3,997)
Blood pressure	2,685	67.18
Cholesterol	2,581	64.57
Obesity/ nutrition counseling	2,097	52.46
Diabetes/ pre-diabetes	1,822	45.58
Skin cancer	1,678	41.98
Asthma	359	8.98



B. Female Participants

	Freq.	Percent out of total respondents (N=6,116)
Obesity/ nutrition counseling	3,719	60.81
Blood pressure	3,336	54.55
Cholesterol	3,215	52.57
Skin cancer	3,074	50.26
Diabetes/ pre-diabetes	2,662	43.53
Asthma	726	11.87



C. Other (non-binary, other) Participants

	Freq.	Percent out of total respondents (N=71)
Blood pressure	41	56.94
Cholesterol	39	54.17
Diabetes/ pre-diabetes	38	52.78
Skin cancer	37	51.39
Asthma	29	40.28
Obesity/ nutrition counseling	15	20.83

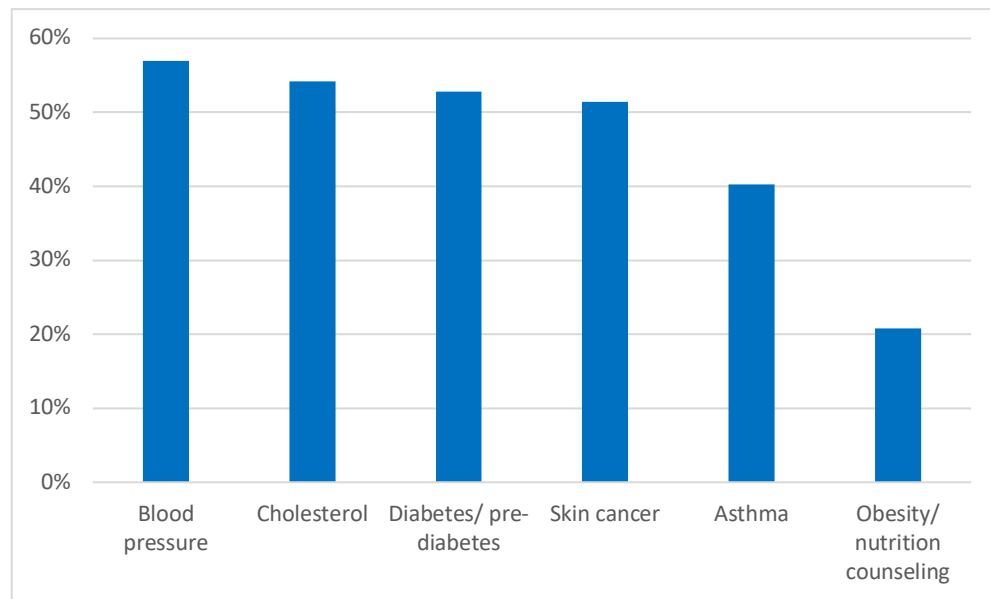
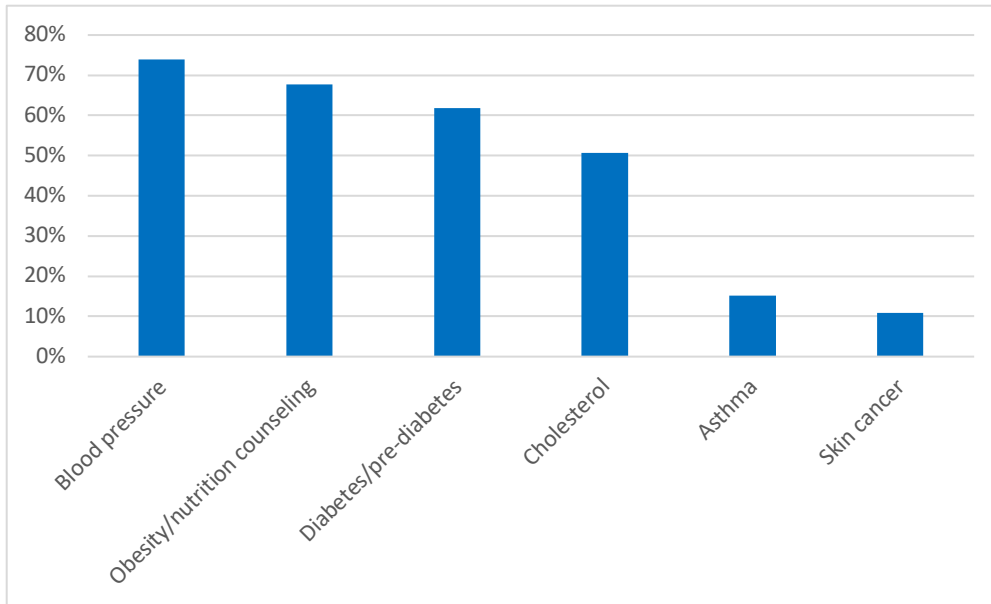


Table 19. Top Health Services That Are Needed, Race

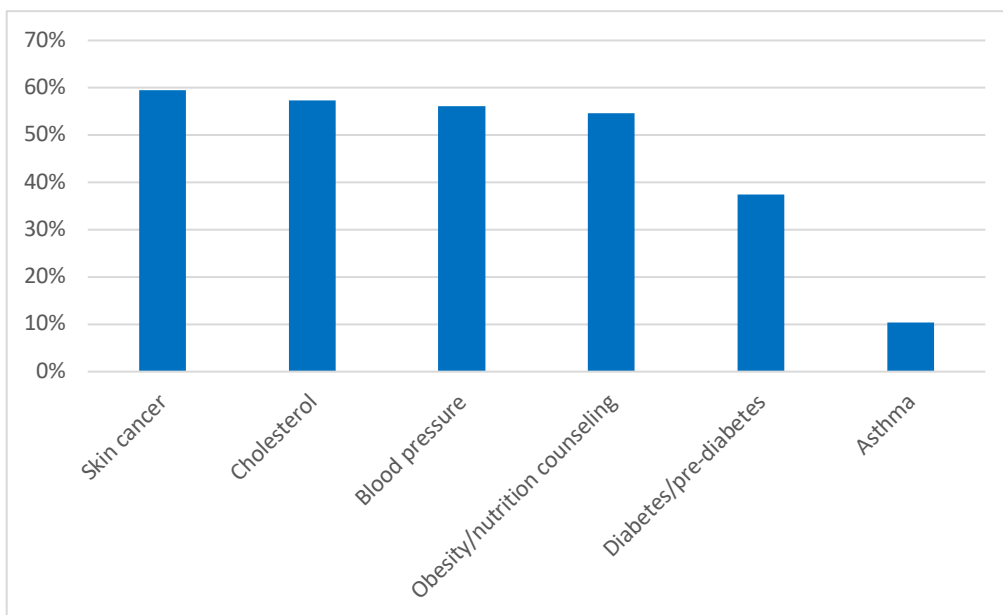
A. Black Participants

	Freq.	Percent out of total respondents (N=1,557)
Blood pressure	1,150	73.86
Obesity/ nutrition counseling	1,055	67.76
Diabetes/ pre-diabetes	962	61.79
Cholesterol	789	50.67
Asthma	236	15.16
Skin cancer	169	10.85



B. White Participants

	Freq.	Percent out of total respondents (N=7,248)
Skin cancer	4,309	59.45
Cholesterol	4,154	57.31
Blood pressure	4,069	56.14
Obesity/ nutrition counseling	3,957	54.59
Diabetes/ pre-diabetes	2,718	37.5
Asthma	749	10.33



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent out of total respondents (N=1,348)
Cholesterol	863	64.02
Obesity/ nutrition counseling	835	61.94
Diabetes/ pre-diabetes	823	61.05
Blood pressure	815	60.46
Skin cancer	288	21.36
Asthma	147	10.91

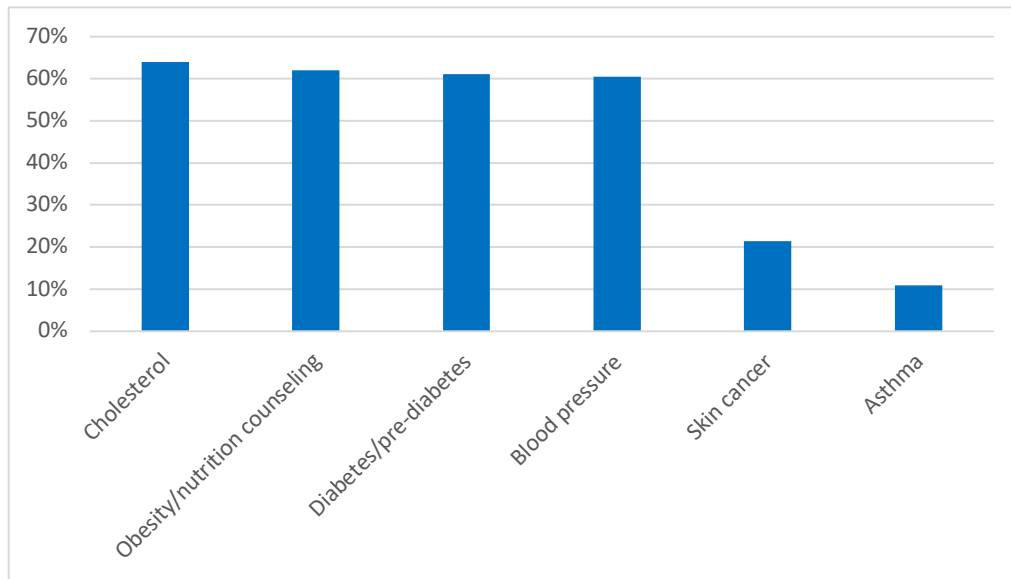
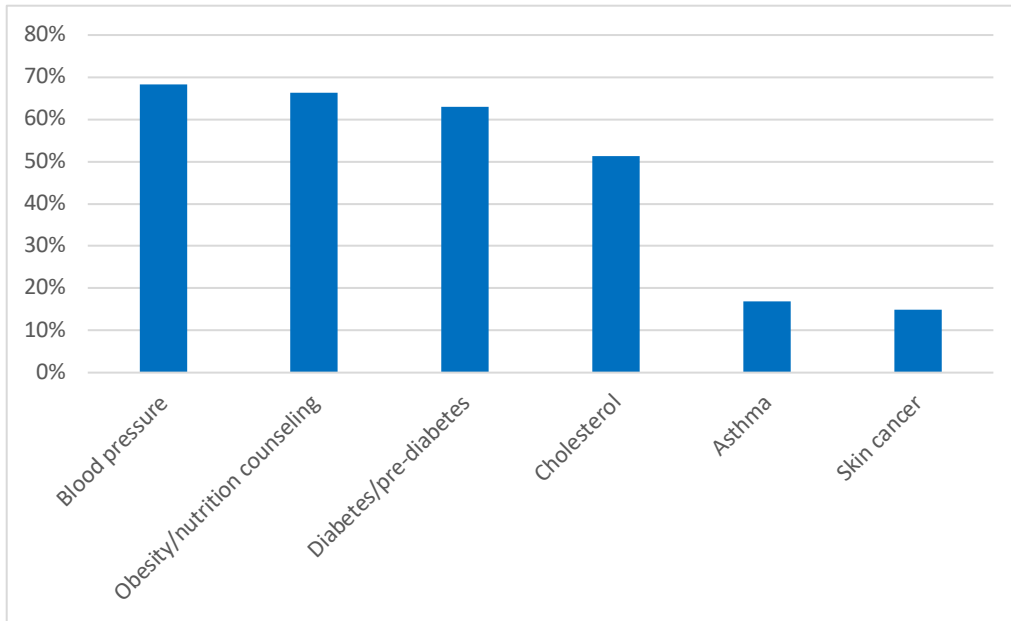


Table 20. Top Health Services That Are Needed, Location

A. Newark

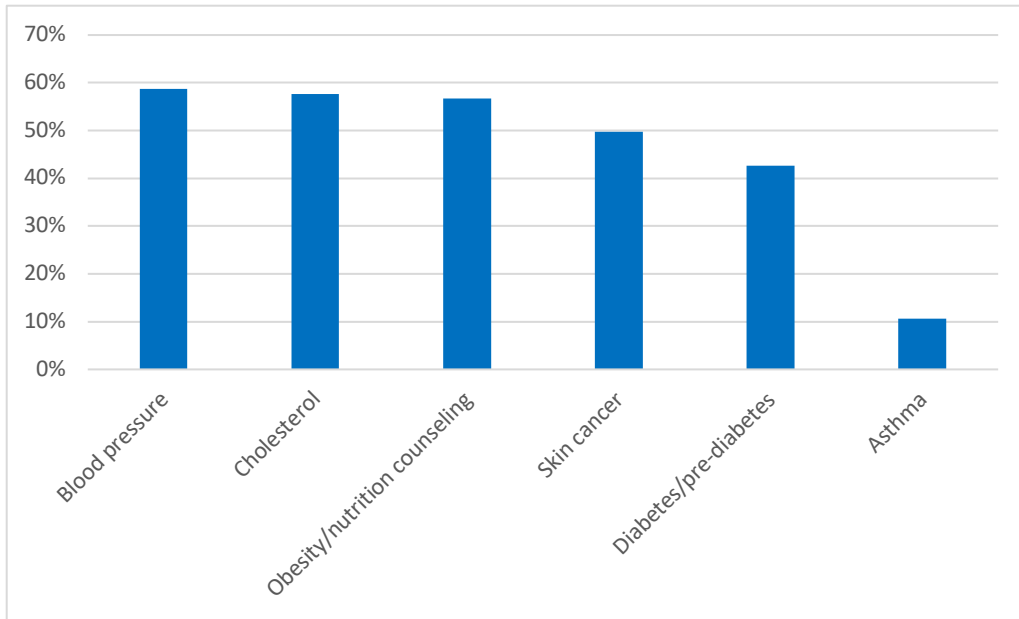
	Freq.	Percent out of total respondents (N=3,997)
Blood pressure	559	68.34
Obesity/ nutrition counseling	542	66.26
Diabetes/ pre-diabetes	515	62.96
Cholesterol	420	51.34
Asthma	138	16.87
Skin cancer	122	14.91



The top three health services needed by Newark residents are blood pressure, obesity/nutrition counseling, and diabetes. In addition, cholesterol service is also highly needed by Newark residents. For other cities, blood pressure, cholesterol, and obesity are the top three health services needed, followed by skin cancer service.

B. Other cities

	Freq.	Percent out of total respondents (N=9,401)
Blood pressure	5,519	58.71
Cholesterol	5,423	57.69
Obesity/ nutrition counseling	5,337	56.77
Skin cancer	4,682	49.8
Diabetes/ pre-diabetes	4,008	42.63
Asthma	1,002	10.66



Section 6: COVID-19 and Flu Vaccines

The majority of the survey respondents received COVID-19 vaccines; this is consistent across all gender and racial groups. In fact, 11,031 or 99.26% of all participants had at least one vaccination.

Table 21. Prevalence of COVID-19 Vaccine, Total population

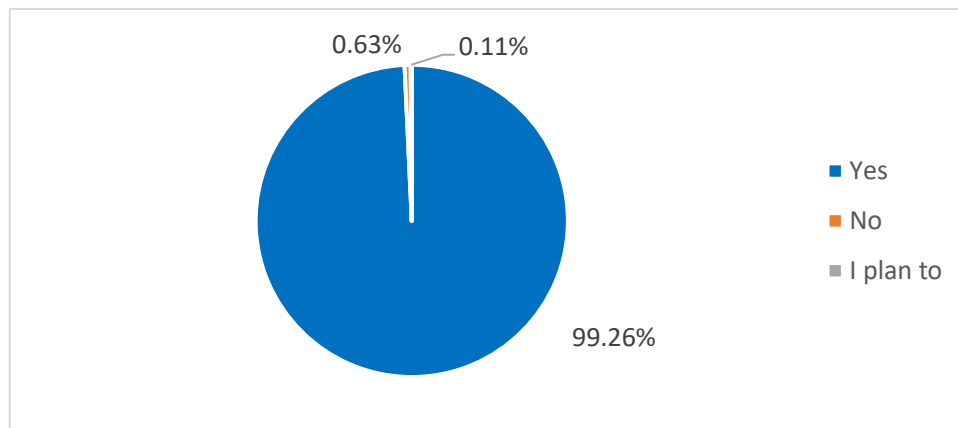
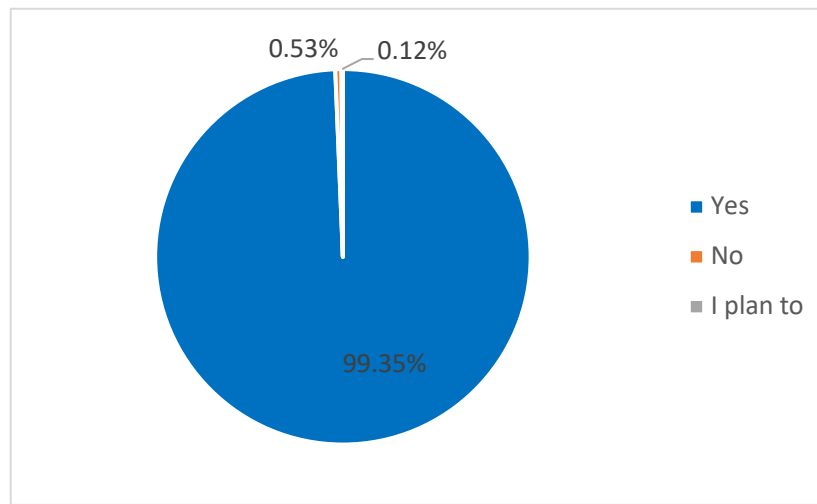


Table 22. Prevalence of COVID-19 Vaccine, Gender

A. Male Participants

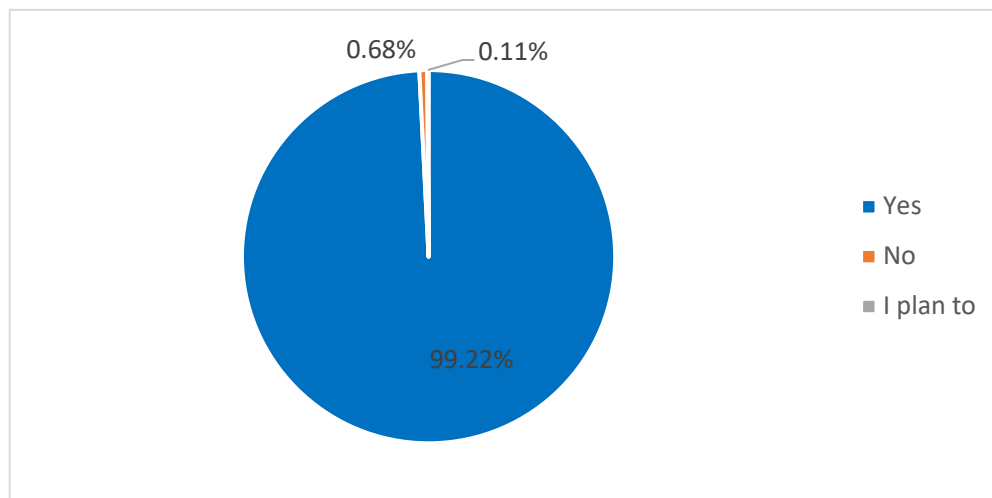
	Freq.	Percent
Yes	4,306	99.35
No	23	0.53
I plan to	5	0.12

Total	4,334	100
-------	-------	-----



B. Female Participants

	Freq.	Percent
Yes	6,610	99.22
No	45	0.68
I plan to	7	0.11
Total	6,662	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Yes	75	97.44
No	2	2.56

I plan to	0	0
Total	78	100

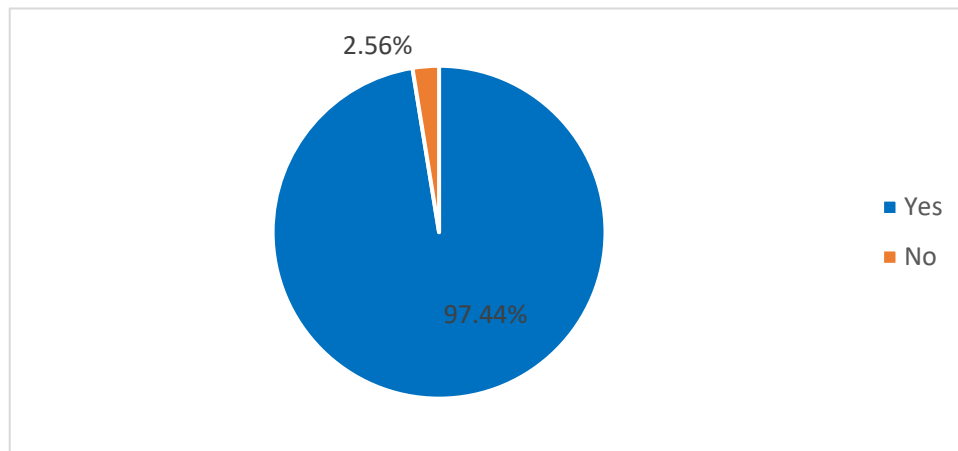
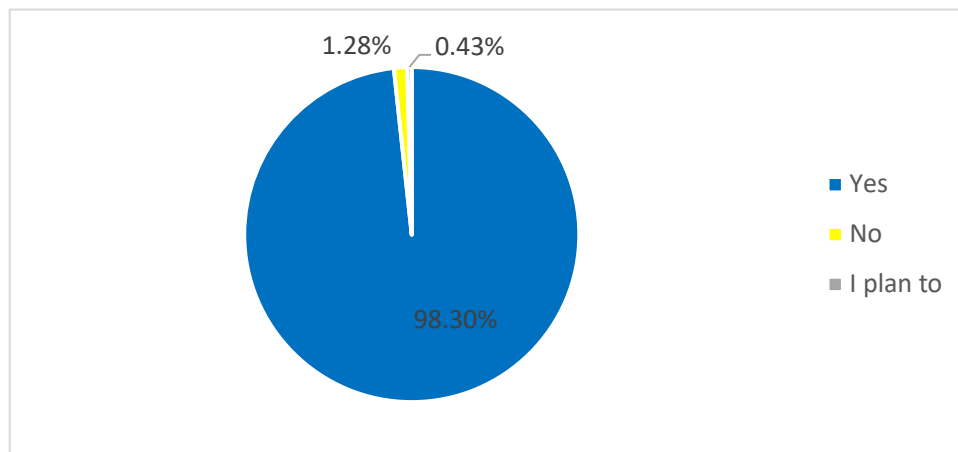


Table 23. Prevalence of COVID-19 Vaccine, Race

A. Black Participants

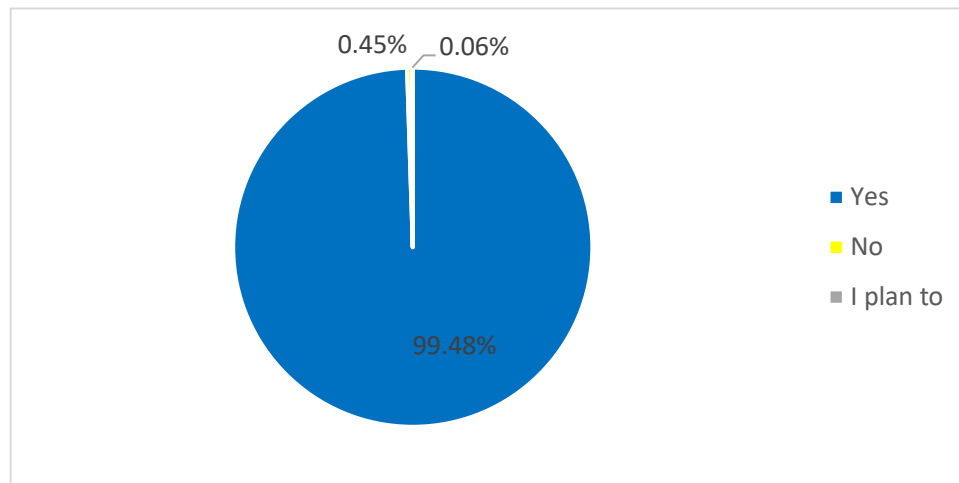
	Freq.	Percent
Yes	1,615	98.3
No	21	1.28
I plan to	7	0.43
Total	1,643	100



B. White Participants

	Freq.	Percent
Yes	7,896	99.48
No	36	0.45

I plan to	5	0.06
Total	7,937	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Yes	1,442	99.24
No	11	0.76
I plan to	0	0
Total	1,453	100

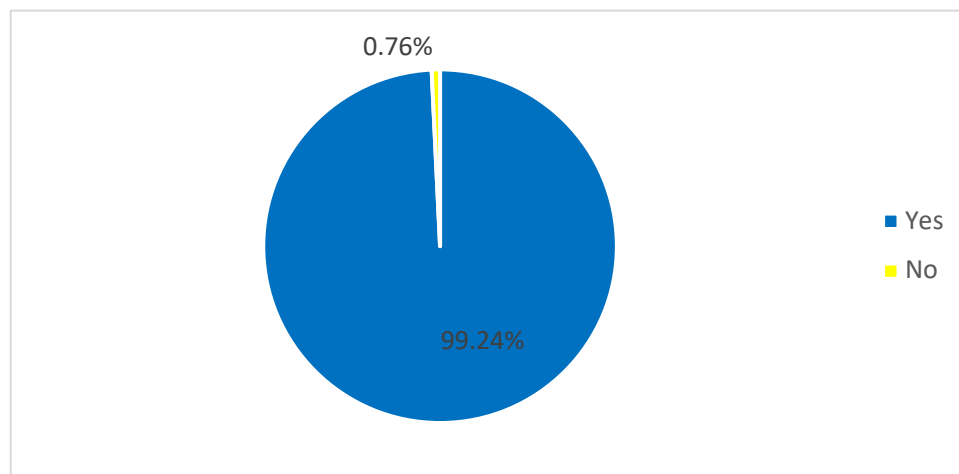
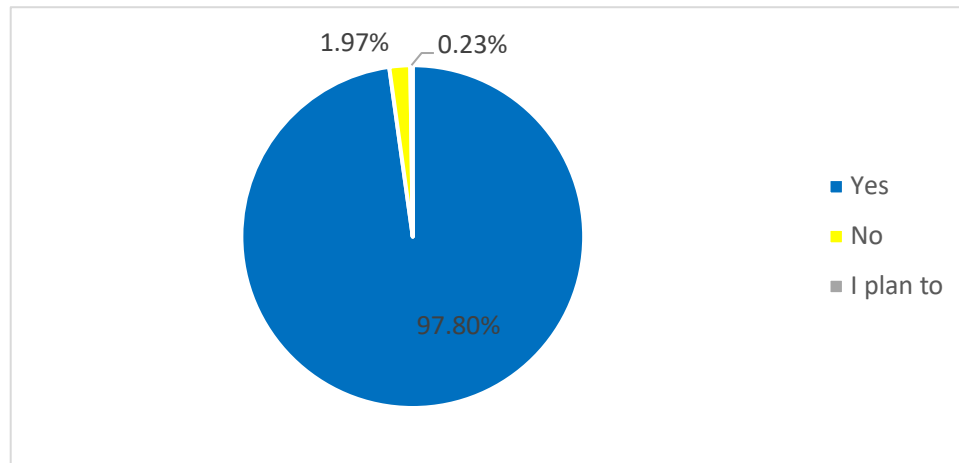


Table 24. Prevalence of COVID-19 Vaccine, Location

A. Newark

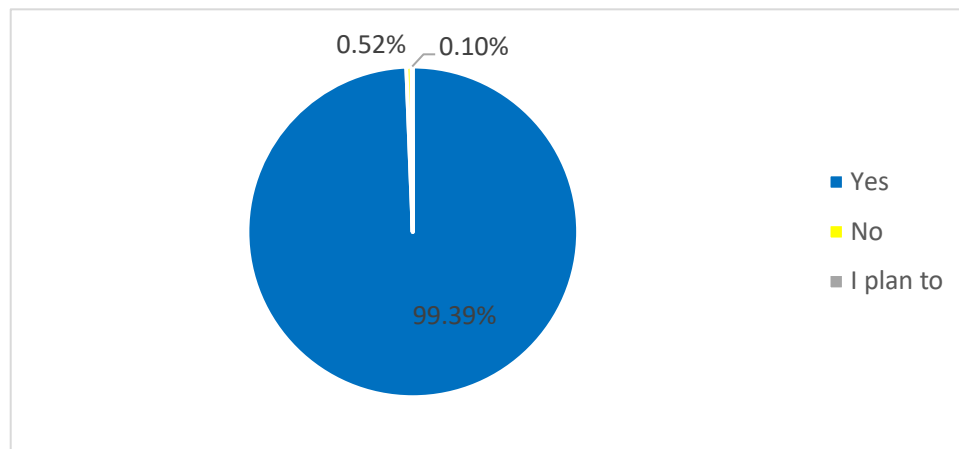
	Freq.	Percent
Yes	843	97.8

No	17	1.97
I plan to	2	0.23
Total	862	100



B. Other Cities

	Freq.	Percent
Yes	10,188	99.39
No	53	0.52
I plan to	10	0.1
Total	10,251	100



Reasons for not getting the COVID-19 Vaccine

Nearly half of the residents, and significantly more male than female residents did not specify the reasons for not getting COVID-19 vaccine. Others cited fear and lack of relevant research as the main reason.

Availability to the vaccine is not a significant reason for not getting vaccinated. That is, only two persons indicated that the availability of the vaccine was their reason for not getting the vaccine.

Table 25. Reasons for not getting the COVID-19 Vaccine, Total population

	Freq.	Percent
Fear	20	28.99
Lack of research	13	18.84
Availability	2	2.9
Other	34	49.28
Total	69	100

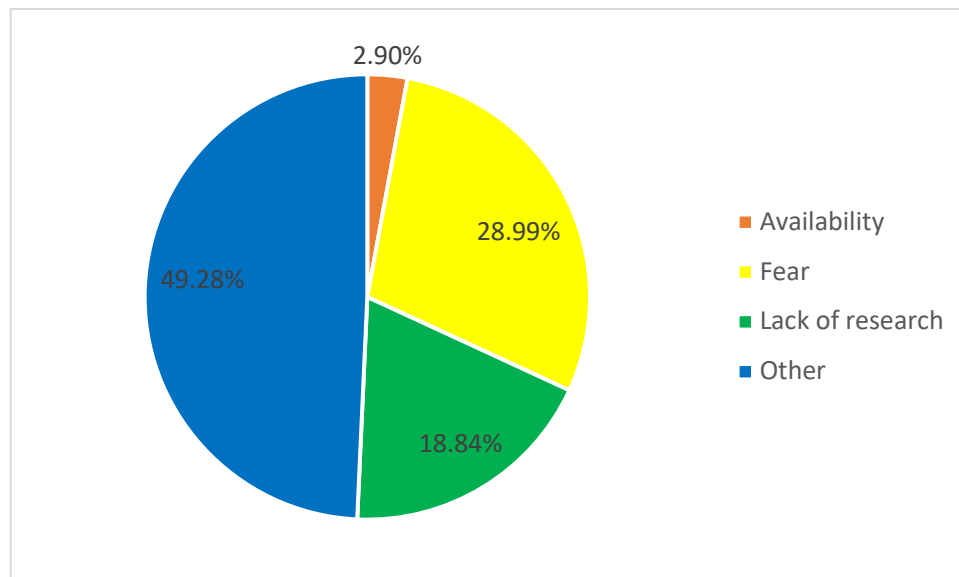
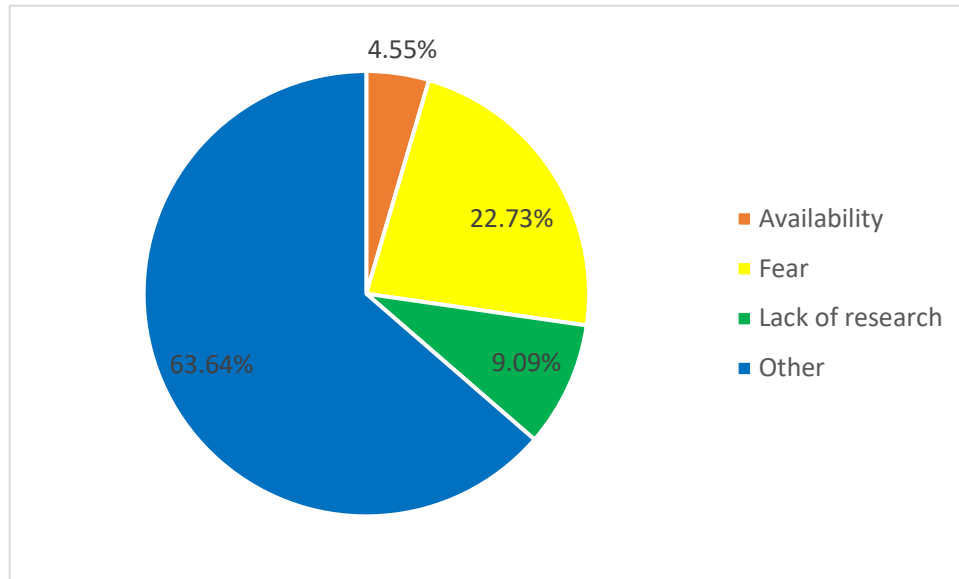


Table 26. Reasons for not getting the COVID-19 Vaccine, Gender

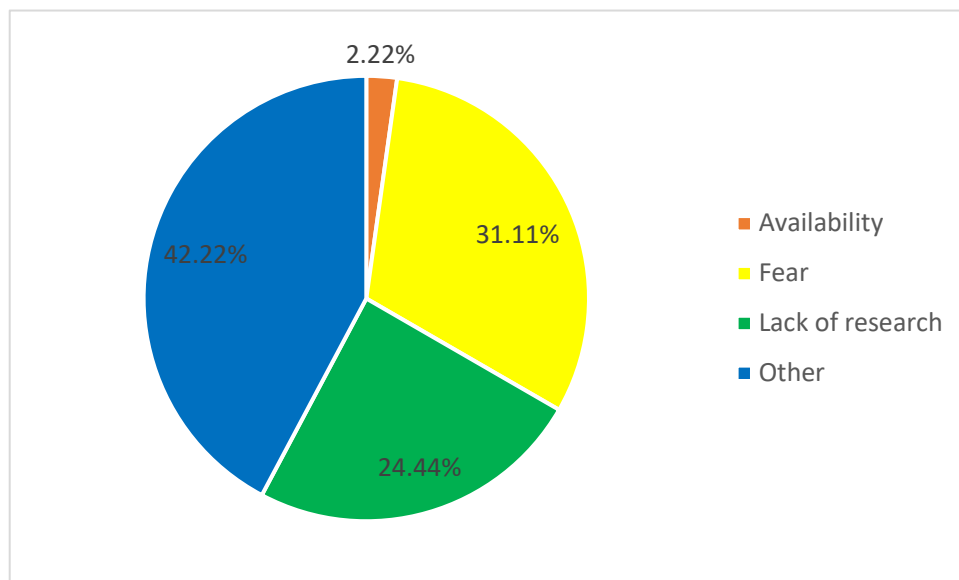
A. Male

	Freq.	Percent
Fear	5	22.73
Lack of research	2	9.09
Availability	1	4.55
Other	14	63.64
Total	22	100



B. Female

	Freq.	Percent
Fear	14	31.11
Lack of research	11	24.44
Availability	1	2.22
Other	19	42.22
Total	45	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Fear	1	50
Availability	0	0
Lack of research	0	0
Other	1	50
Total	2	100

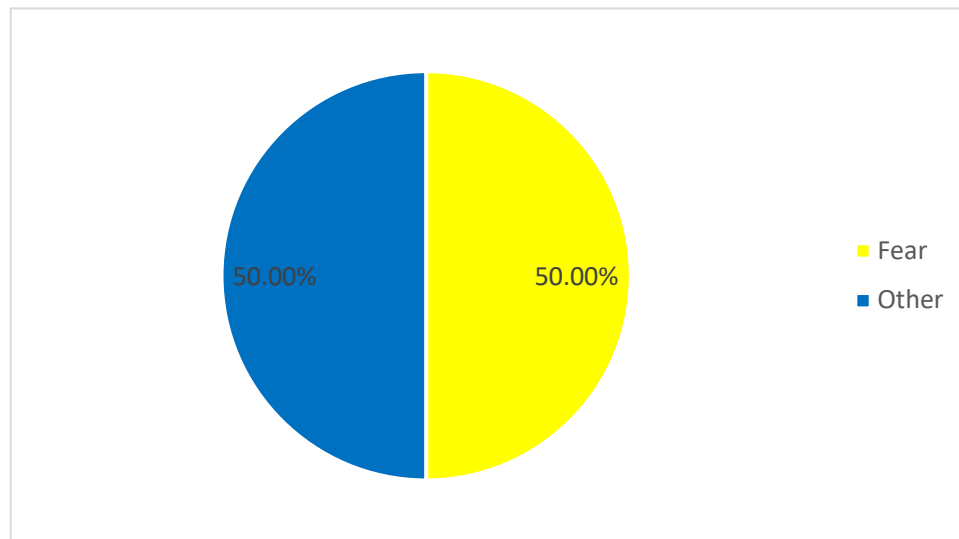
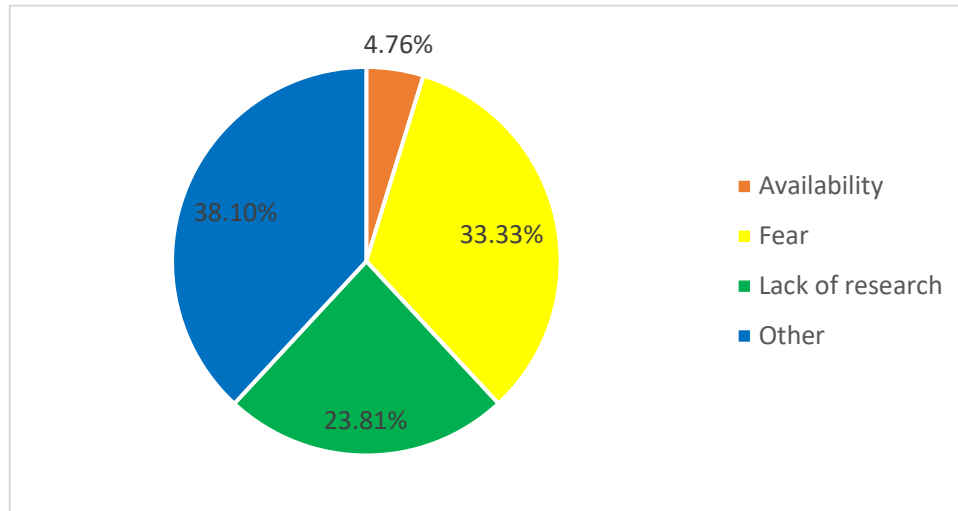


Table 27. Reasons for not getting the COVID-19 Vaccine, Race

A. Black

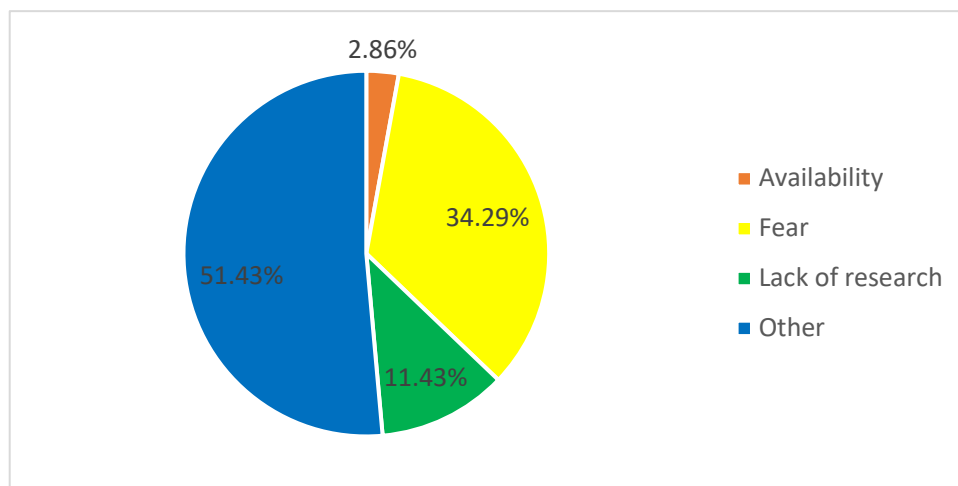
	Freq.	Percent
Fear	7	33.33
Lack of research	5	23.81
Availability	1	4.76
Other	8	38.1
Total	21	100



African American residents are more likely than other racial groups to cite lack of research as a reason for not getting the COVID-19 vaccine. (Only 1 respondent noted availability).

B. White

	Freq.	Percent
Fear	12	34.29
Lack of research	4	11.43
Availability	1	2.86
Other	18	51.43
Total	35	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Lack of research	3	27.27

Fear	1	9.09
Availability	0	0
Other	7	63.64
Total	11	100

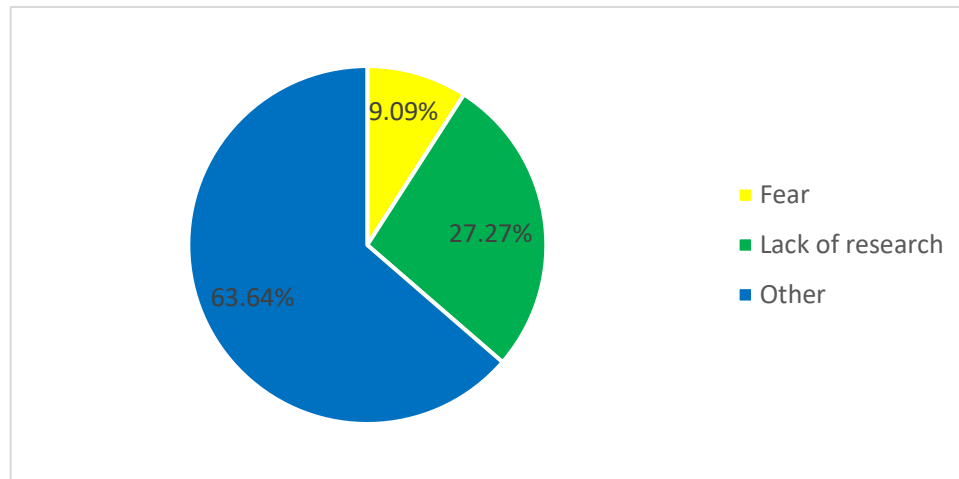
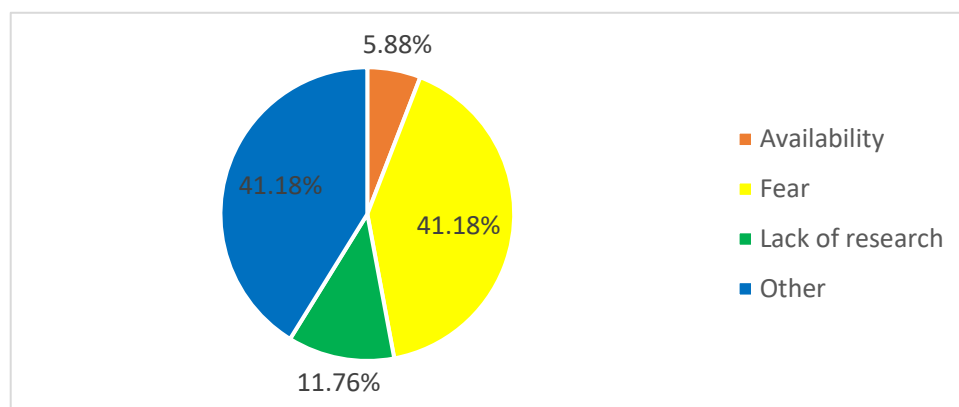


Table 28. Reasons for not getting the COVID-19 Vaccine, Location

A. Newark Participants

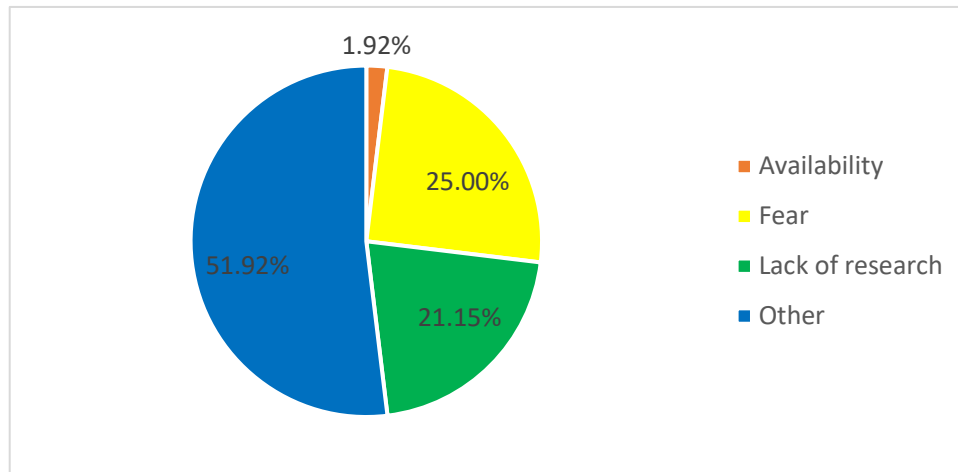
	Freq.	Percent
Fear	7	41.18
Lack of research	2	11.76
Availability	1	5.88
Other	7	41.18
Total	17	100



B. Other Cities

	Freq.	Percent
Fear	13	25

Lack of research	11	21.15
Availability	1	1.92
Other	27	51.92
Total	52	100



Annual COVID-19 Vaccine

Majority of residents report that they are either very likely or somewhat likely to get the COVID-19 annual vaccine once available. This is consistent across all three gender groups.

Table 29. Likelihood of getting the COVID-19 Annual Vaccine, Total population

	Freq.	Percent
Very likely	8,638	77.82
Somewhat likely	1,861	16.77
Not likely at all	601	5.41
Total	11,100	100

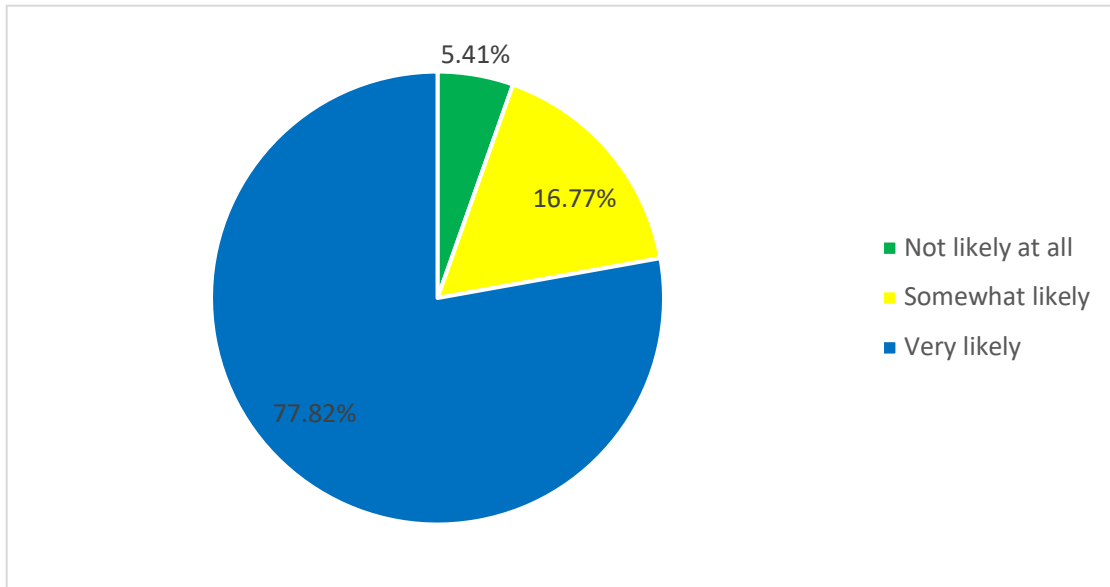
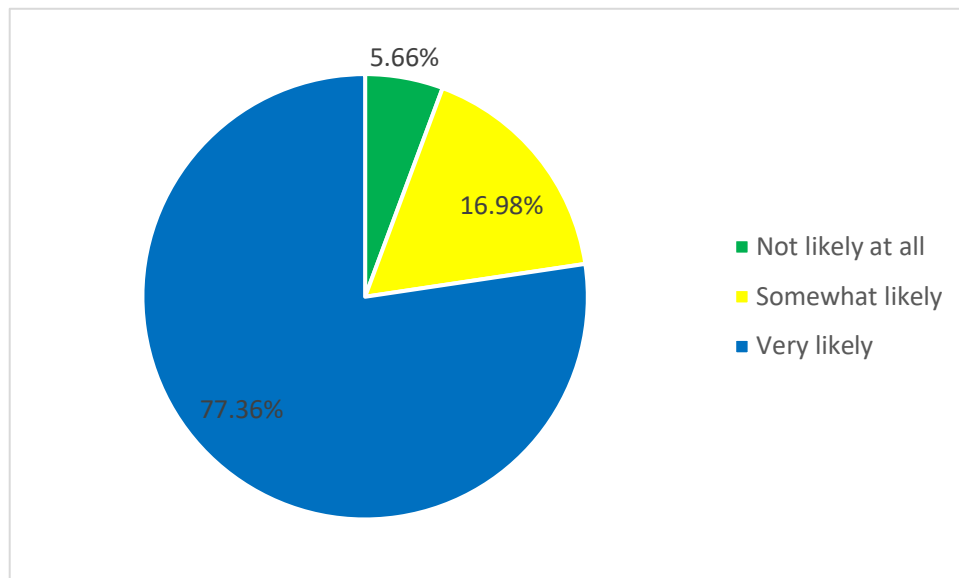


Table 30. Likelihood of getting the COVID-19 Annual Vaccine, Gender

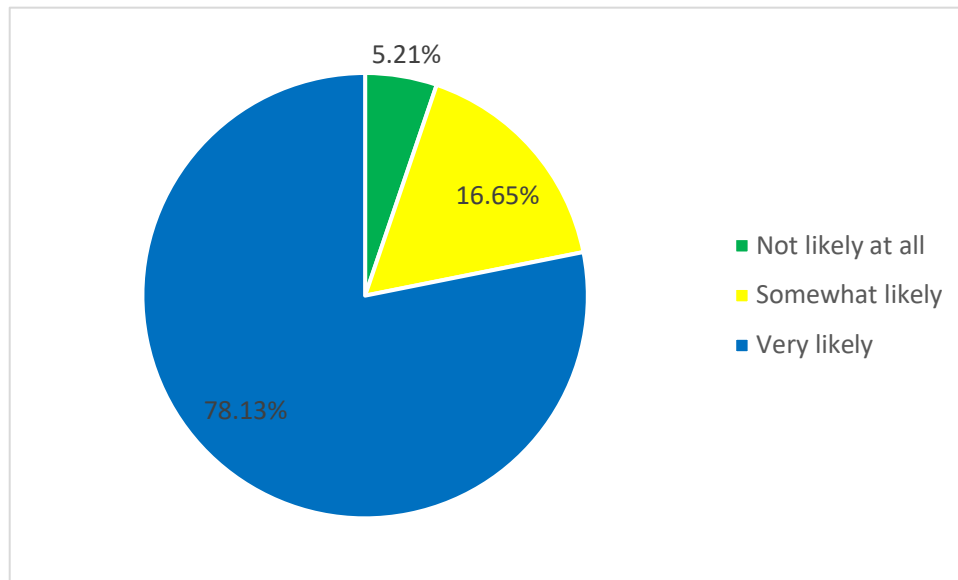
A. Male

	Freq.	Percent
Very likely	3,348	77.36
Somewhat likely	735	16.98
Not likely at all	245	5.66
Total	4,328	100



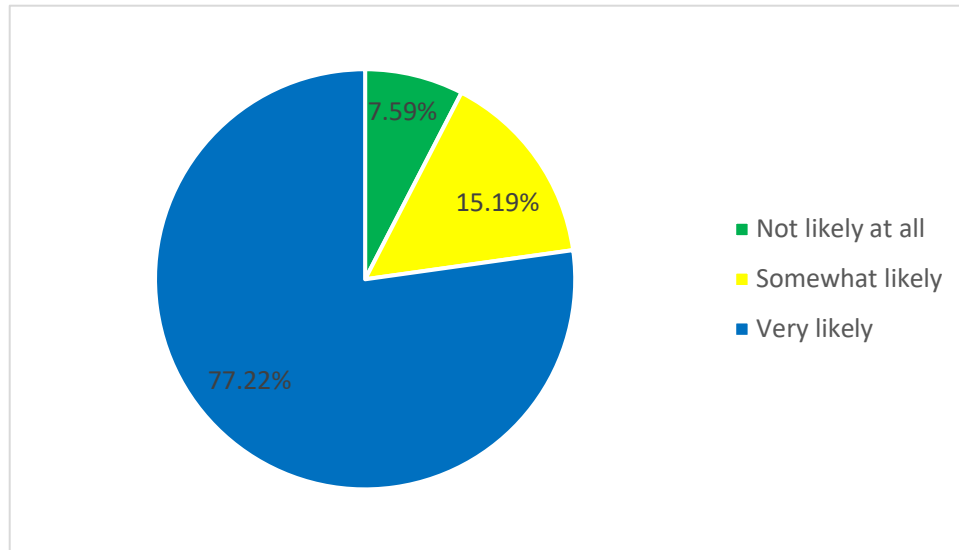
B. Female

	Freq.	Percent
Very likely	5,199	78.13
Somewhat likely	1108	16.65
Not likely at all	347	5.21
Total	6,654	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Very likely	61	77.22
Somewhat likely	12	15.19
Not likely at all	6	7.59
Total	79	100

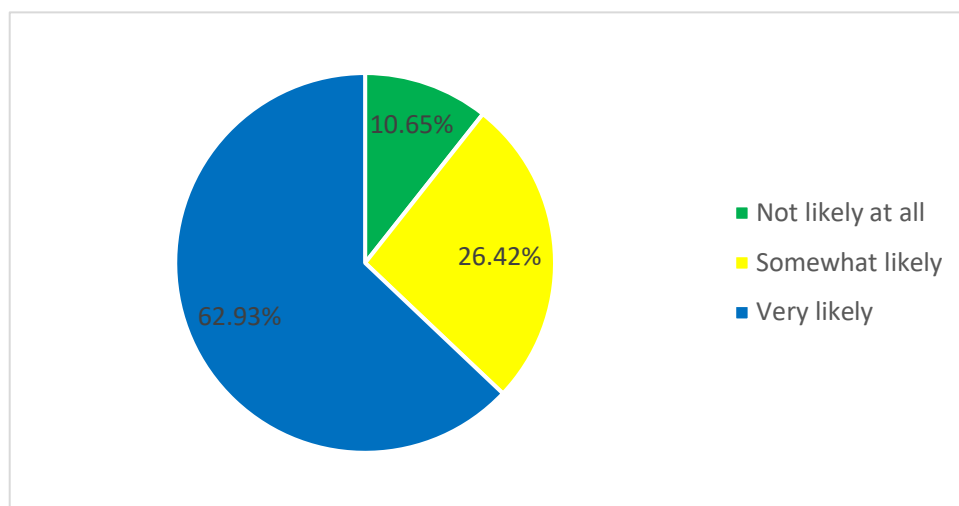


The majority of residents report that they are either very likely or somewhat likely to get the COVID-19 annual vaccine once available. This is consistent across all three racial/ethnic groups.

Table 31. Likelihood of getting the COVID-19 Annual Vaccine, Race

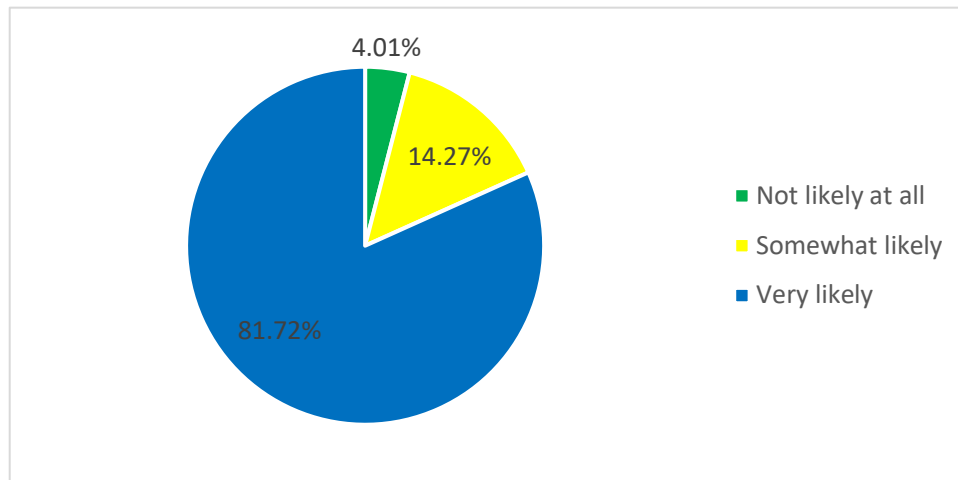
A. Black

	Freq.	Percent
Very likely	1,034	62.93
Somewhat likely	434	26.42
Not likely at all	175	10.65
Total	1,643	100



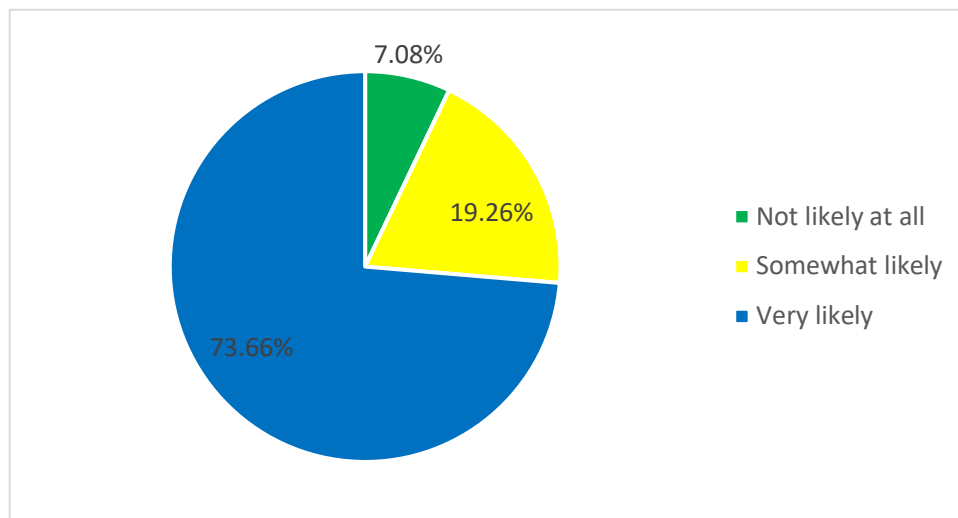
B. White

	Freq.	Percent
Very likely	6,478	81.72
Somewhat likely	1,131	14.27
Not likely at all	318	4.01
Total	7,927	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Very likely	1,071	73.66
Somewhat likely	280	19.26
Not likely at all	103	7.08
Total	1,454	100

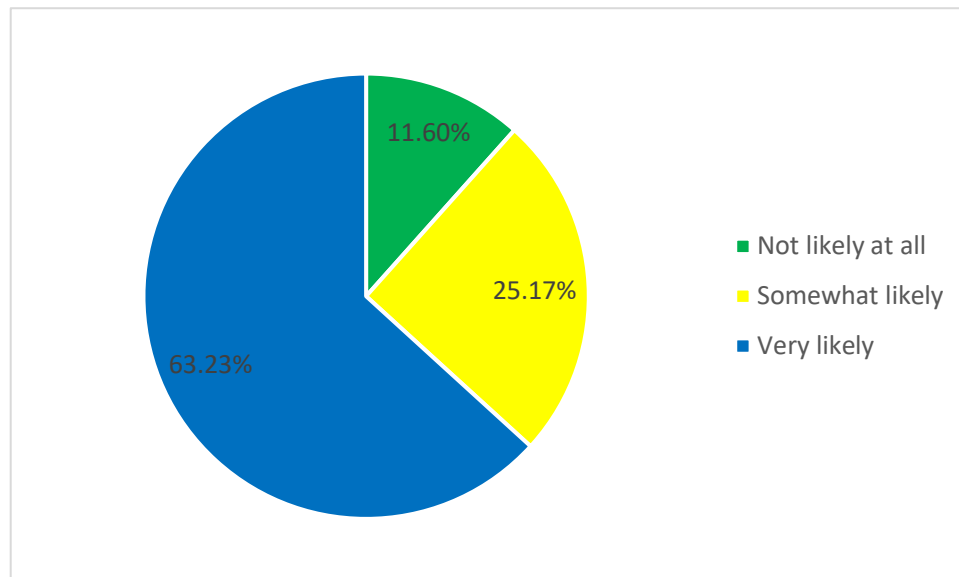


A greater percentage of Newark residents than residents of other municipalities indicate that they are not likely to get the COVID-19 annual vaccine.

Table 32. Likelihood of getting the COVID-19 Annual Vaccine, Location

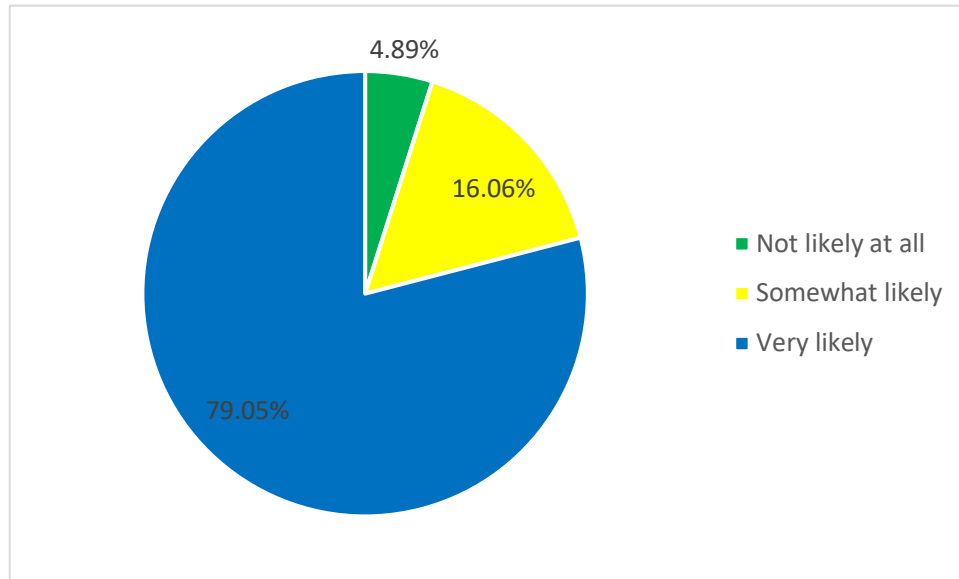
A. Newark

	Freq.	Percent
Very likely	545	63.23
Somewhat likely	217	25.17
Not likely at all	100	11.6
Total	862	100



B. Other Cities

	Freq.	Percent
Very likely	8,093	79.05
Somewhat likely	1644	16.06
Not likely at all	501	4.89
Total	10,238	100



FLU Vaccine

Approximately two thirds of residents got a FLU vaccine within the past year, but this percentage is visibly smaller in the other gender group. More white residents received a FLU vaccine during the past year, compared to black and other racial groups. Similarly, only half of Newark residents received a FLU vaccine within the last year compared to 70% of residents in all other cities in Essex County.

Table 33. Prevalence of FLU Vaccine, Total population

	Freq.	Percent
Within the last year	7,651	68.84
1-2 years	1,388	12.49
3-5 years	469	4.22
5 or more years	578	5.2
I have never had a flu shot	1,028	9.25
Total	11,114	100

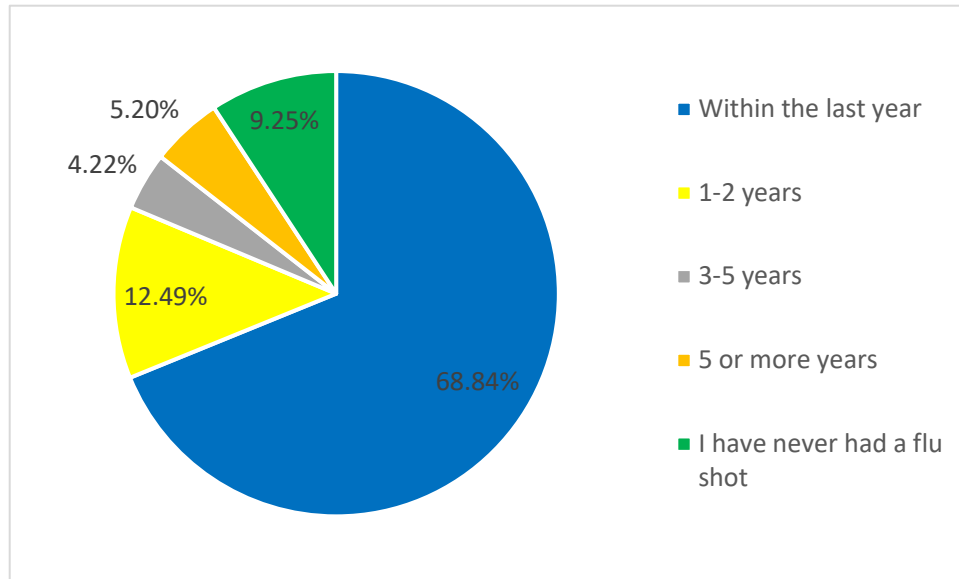
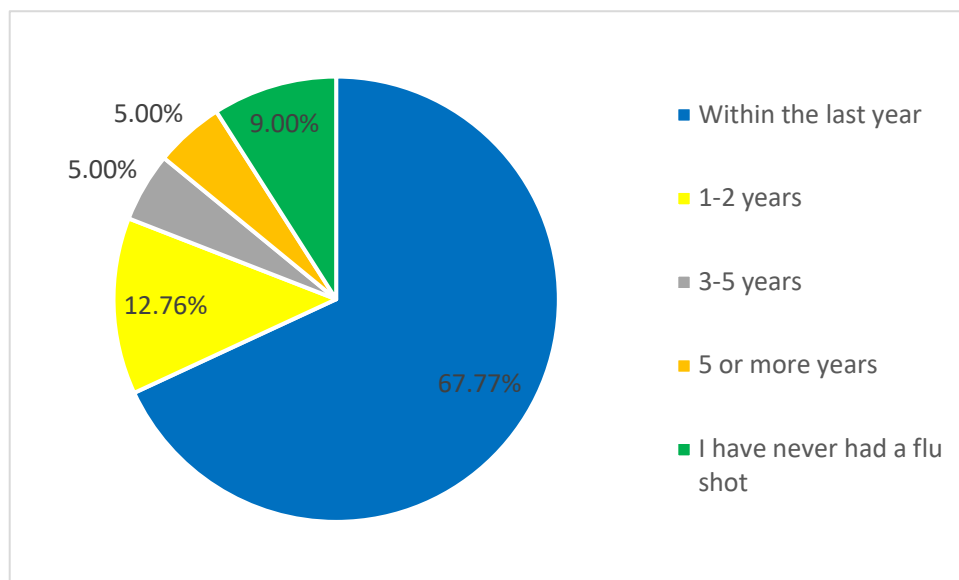


Table 34. Prevalence of FLU Vaccine, Gender

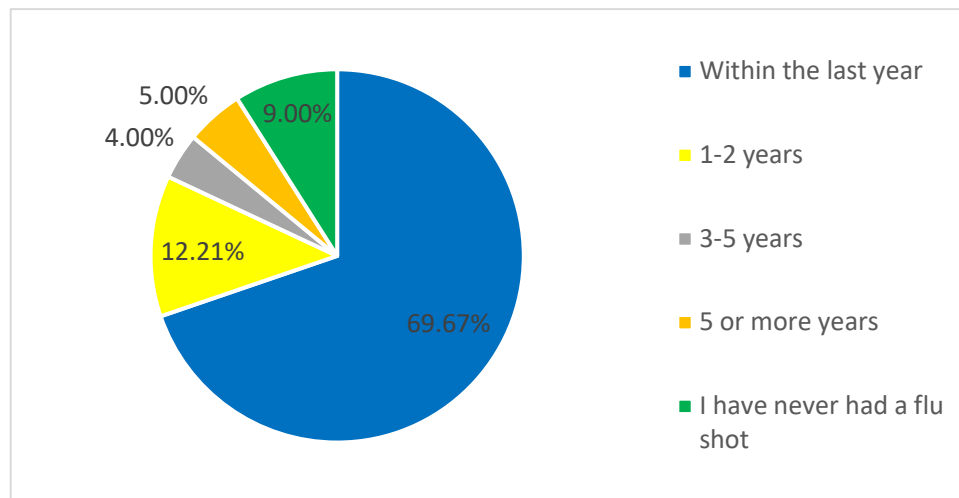
A. Male

	Freq.	Percent
Within the last year	2,938	67.77
1-2 years	553	12.76
3-5 years	212	5
5 or more years	229	5
I have never had a flu shot	403	9
Total	4,335	100



B. Female

	Freq.	Percent
Within the last year	4,641	69.67
1-2 years	813	12.21
3-5 years	253	4
5 or more years	341	5
I have never had a flu shot	613	9
Total	6,661	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Within the last year	45	56.96
1-2 years	17	21.52
3-5 years	4	5.06
5 or more years	5	6.33
I have never had a flu shot	8	10.13
Total	79	100

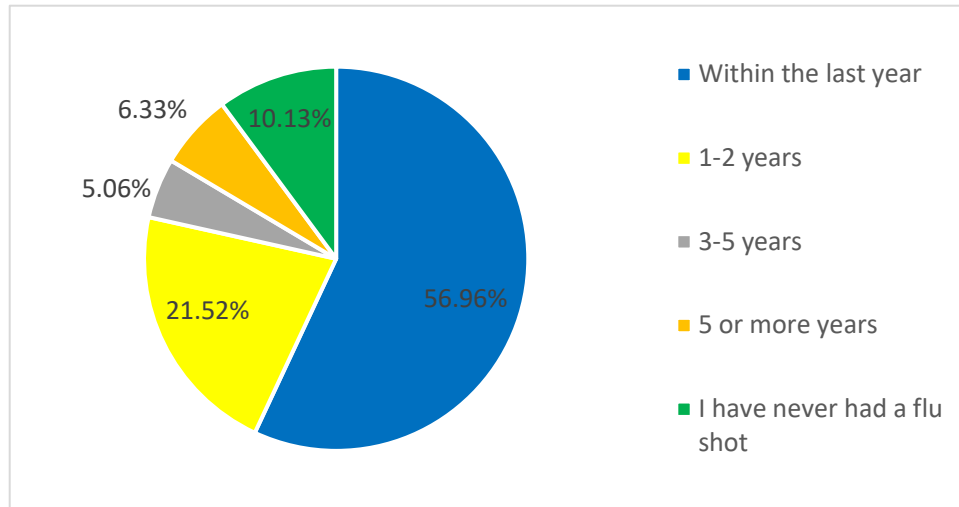
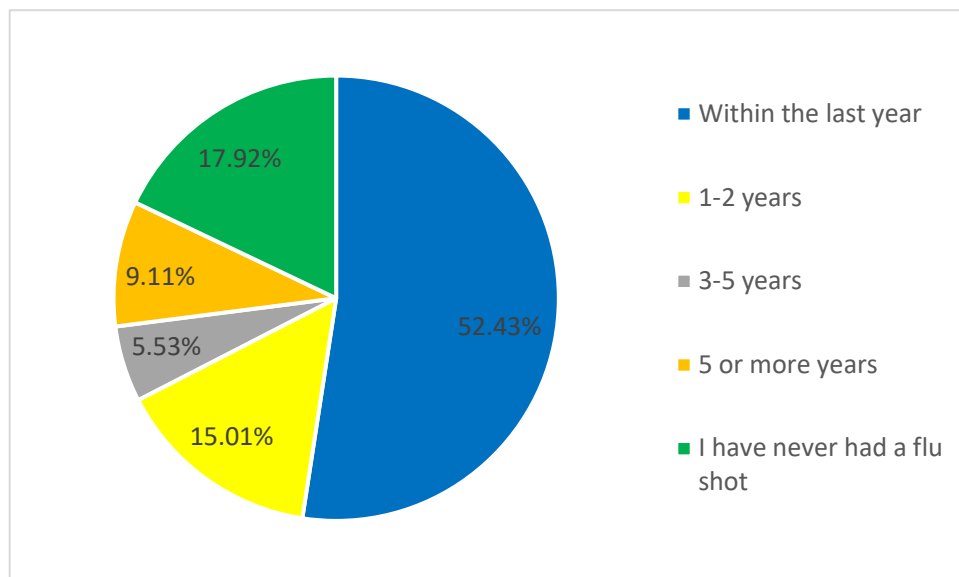


Table 35. Prevalence of FLU Vaccine, Race

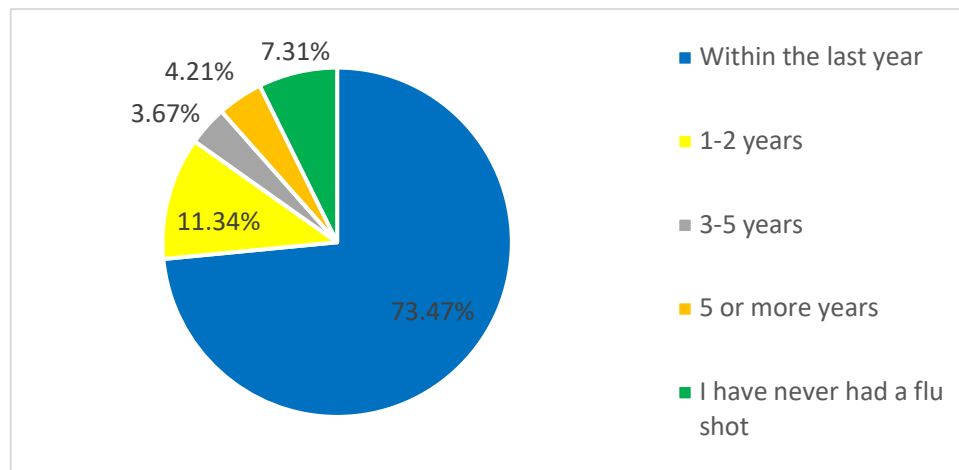
A. Black Participants

	Freq.	Percent
Within the last year	863	52.43
1-2 years	247	15.01
3-5 years	91	5.53
5 or more years	150	9.11
I have never had a flu shot	295	17.92
Total	1,646	100



B. White Participants

	Freq.	Percent
Within the last year	5,830	73.47
1-2 years	900	11.34
3-5 years	291	3.67
5 or more years	334	4.21
I have never had a flu shot	580	7.31
Total	7,935	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Within the last year	901	61.97
1-2 years	231	15.89
3-5 years	85	5.85
5 or more years	90	6.19
I have never had a flu shot	147	10.11
Total	1,454	100

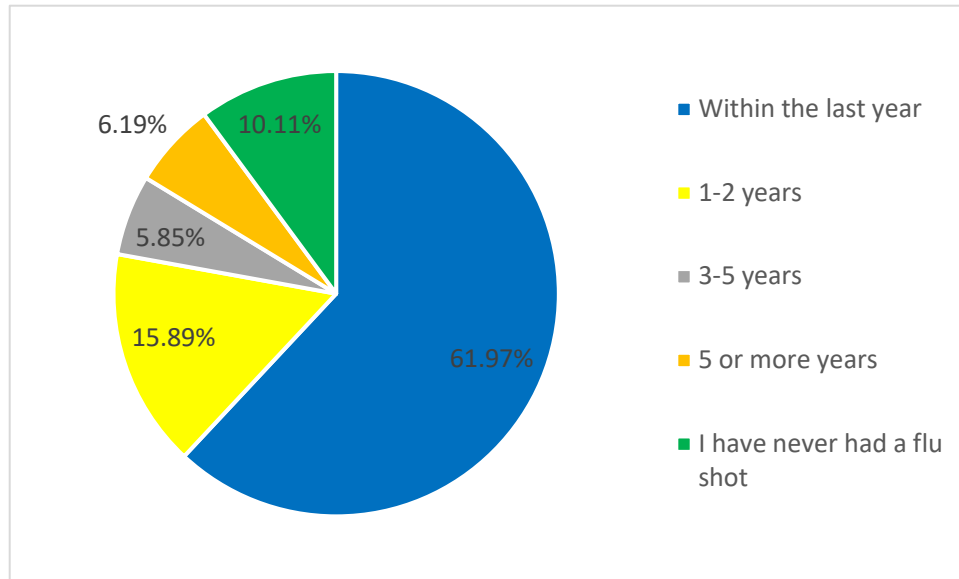
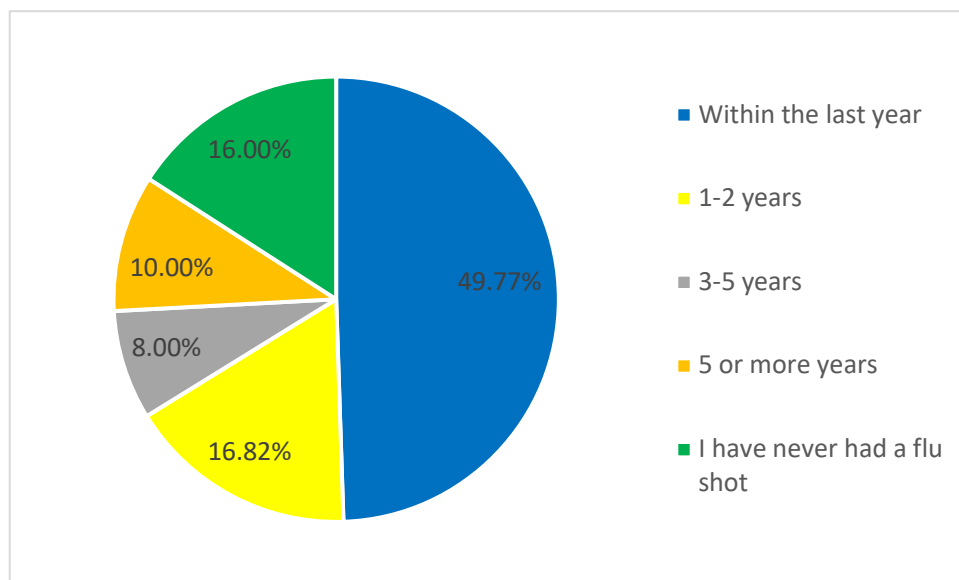


Table 36. Prevalence of FLU Vaccine, Location

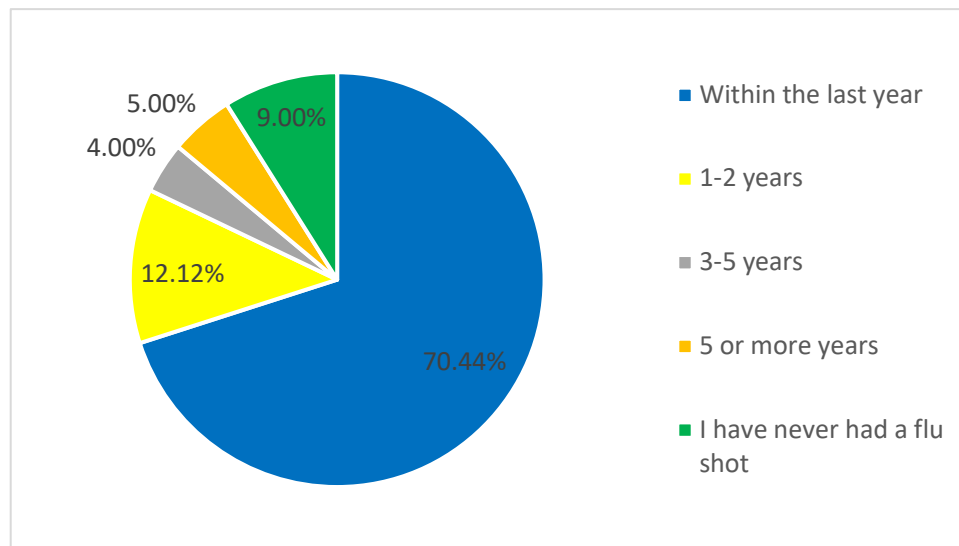
A. Newark

	Freq.	Percent
Within the last year	429	49.77
1-2 years	145	16.82
3-5 years	65	8
5 or more years	89	10
I have never had a flu shot	134	16
Total	862	100



B. Other Cities

	Freq.	Percent
Within the last year	7,222	70.44
1-2 years	1,243	12.12
3-5 years	404	4
5 or more years	489	5
I have never had a flu shot	894	9
Total	10,252	100



Section 7: Exercise

About a quarter of residents do not exercise at all. The percentage is larger within African American and other racial groups. Fewer Newark residents exercise than residents of other cities, and they exercise less frequently.

A. *How often do you exercise in a typical week?*

Table 37. Prevalence of Exercise, Total population

	Freq.	Percent
1-2 times	3,342	30.08
3-4 times	2,784	25.05
5-6 times	1,666	14.99
More than 7 times	405	3.64
Not at all	2,915	26.23
Total	11,112	100

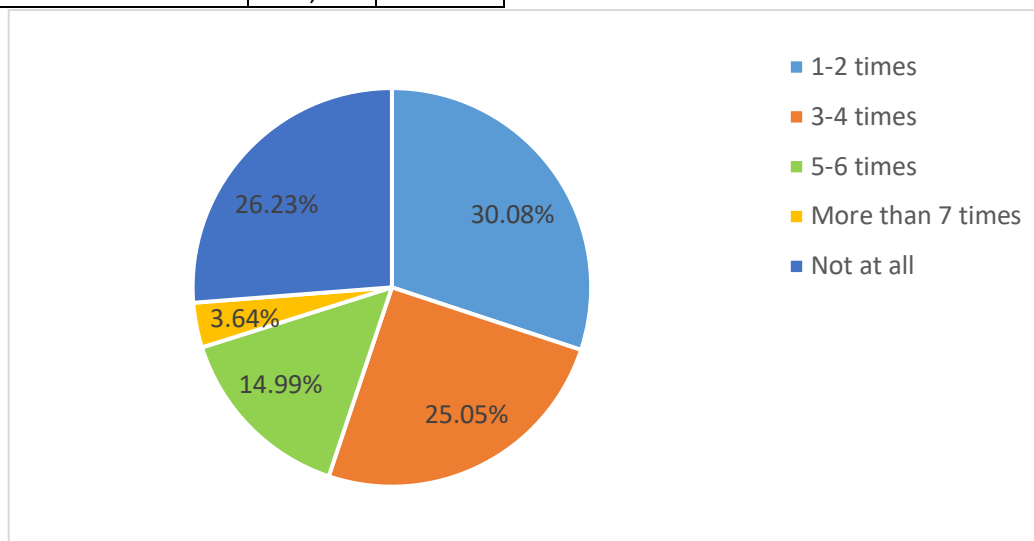
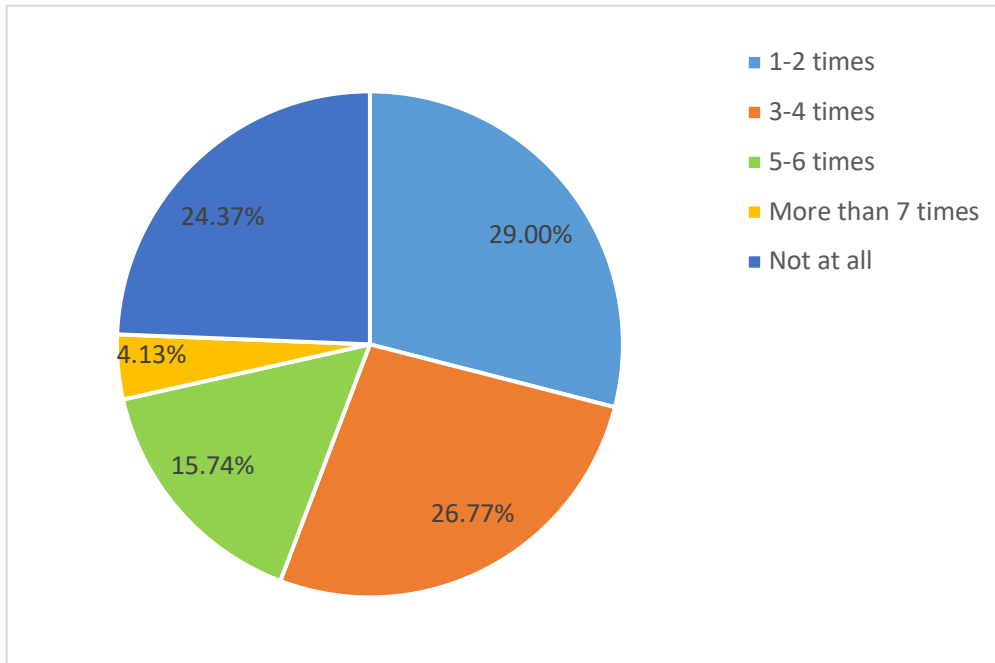


Table 38. Prevalence of Exercise, Gender

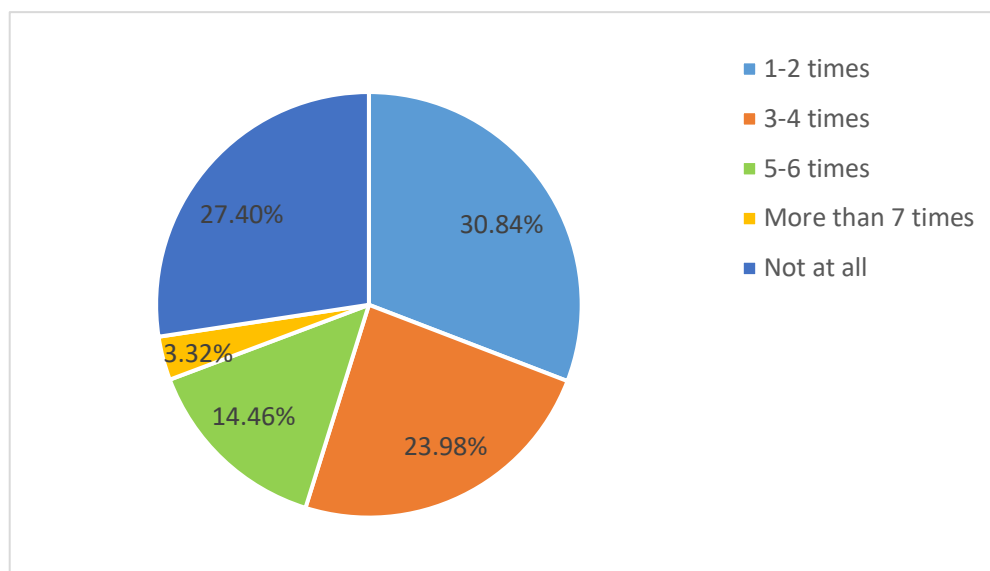
A. *Male Participants*

	Freq.	Percent
1-2 times	1,257	29
3-4 times	1,160	26.77
5-6 times	682	15.74
More than 7 times	179	4.13
Not at all	1,056	24.37
Total	4,334	100



B. Female Participants

	Freq.	Percent
1-2 times	2,054	30.84
3-4 times	1,597	23.98
5-6 times	963	14.46
More than 7 times	221	3.32
Not at all	1,825	27.4
Total	6,660	100



C. Other (non-binary, other) Participants

	Freq.	Percent
1-2 times	22	27.85
3-4 times	16	20.25
5-6 times	14	17.72
More than 7 times	3	3.80
Not at all	24	30.38
Total	79	100

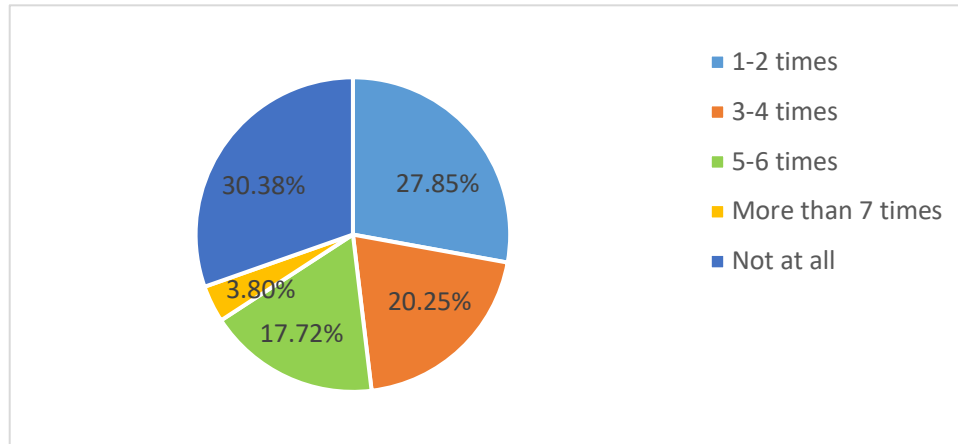
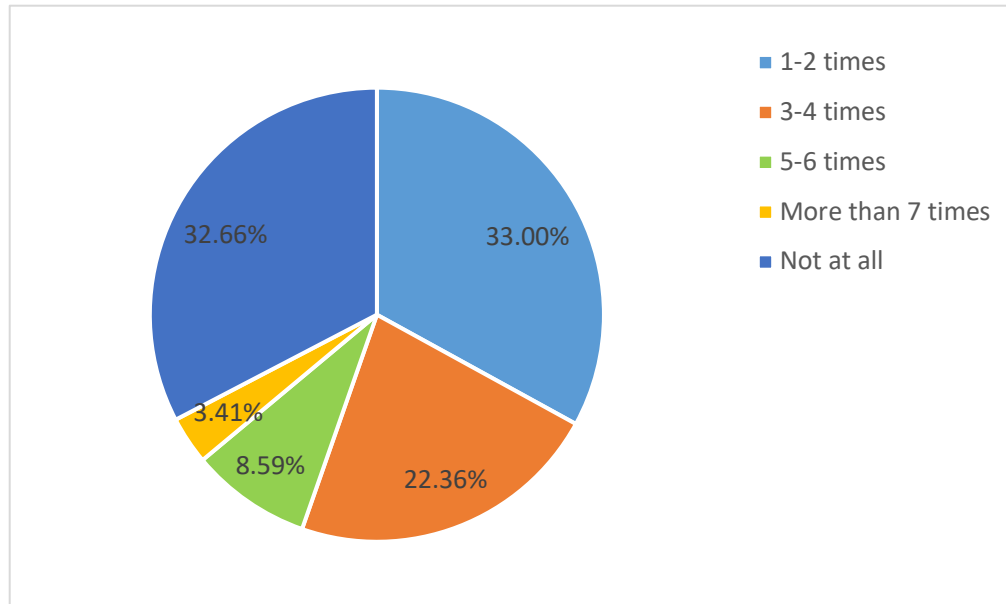


Table 39. Prevalence of Exercise, Race

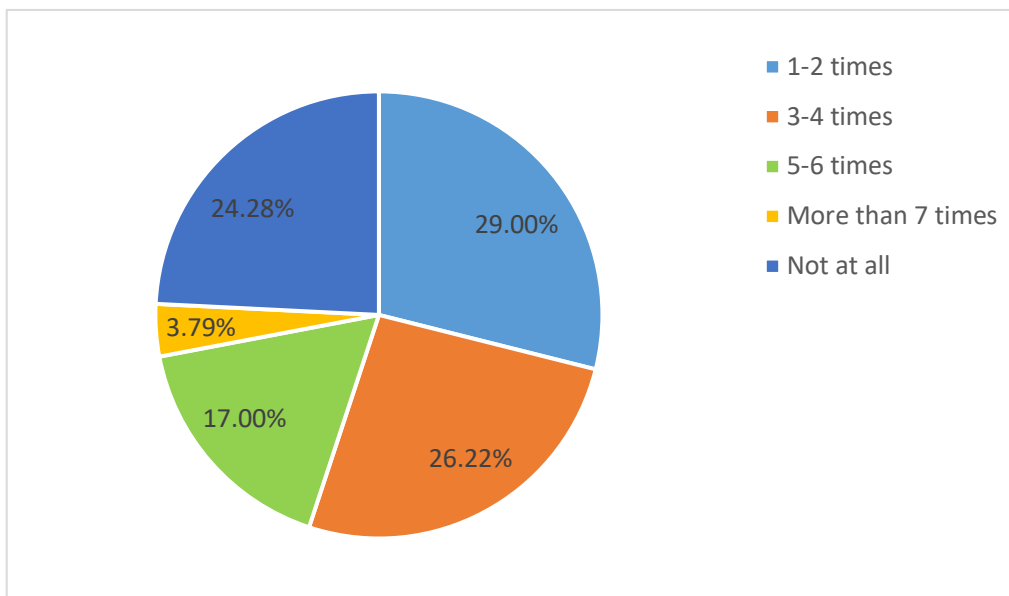
A. Black Participants

	Freq.	Percent
1-2 times	541	33
3-4 times	367	22.36
5-6 times	141	8.59
More than 7 times	56	3.41
Not at all	536	32.66
Total	1,641	100



B. White Participants

	Freq.	Percent
1-2 times	2,301	29
3-4 times	2,081	26.22
5-6 times	1,326	17
More than 7 times	301	3.79
Not at all	1,927	24.28
Total	7,936	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
1-2 times	477	32.76
3-4 times	316	21.7
5-6 times	187	12.84
More than 7 times	43	2.95
Not at all	433	29.74
Total	1,456	100

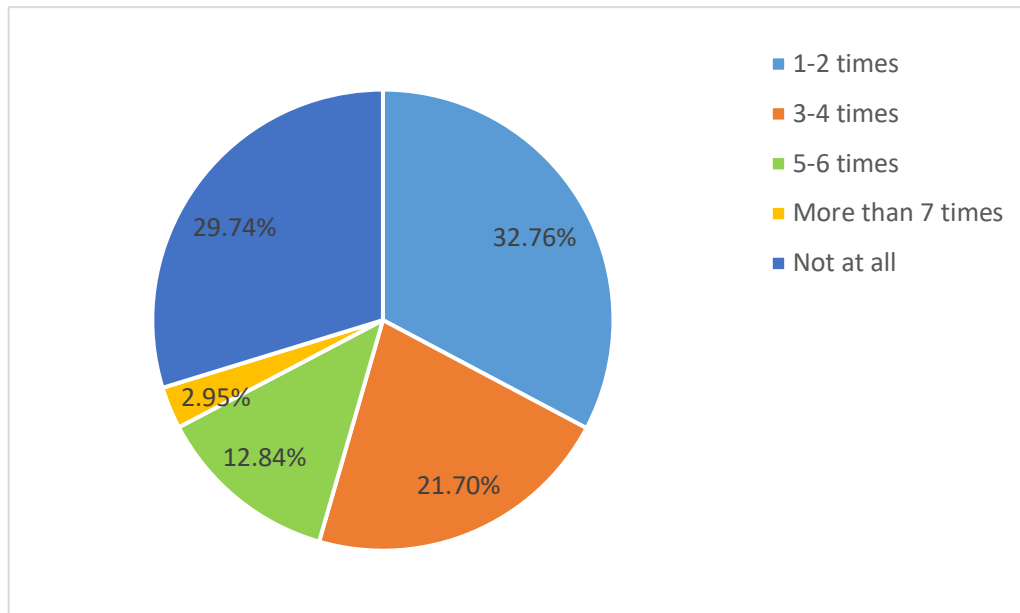
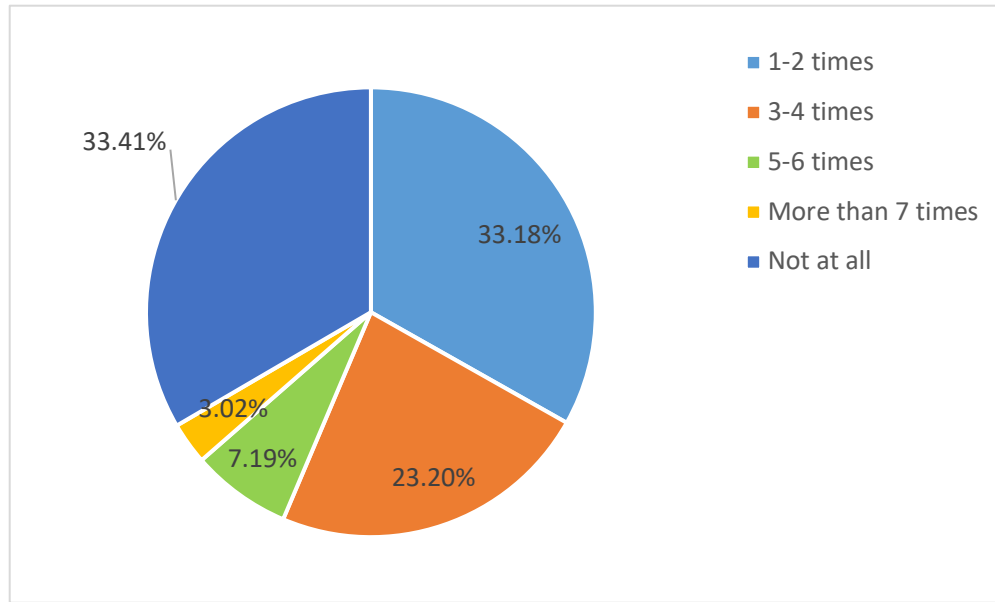


Table 40. Prevalence of Exercise, Location

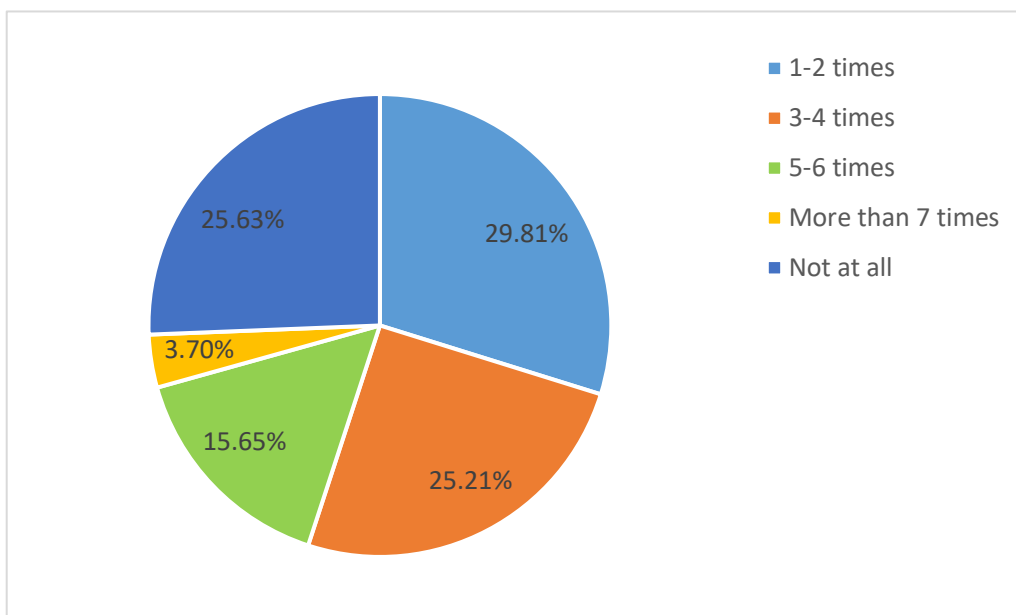
A. Newark

	Freq.	Percent
1-2 times	286	33.18
3-4 times	200	23.2
5-6 times	62	7.19
More than 7 times	26	3.02
Not at all	288	33.41
Total	862	100



B. Other Cities

	Freq.	Percent
1-2 times	3,056	29.81
3-4 times	2,584	25.21
5-6 times	1,604	15.65
More than 7 times	379	3.7
Not at all	2,627	25.63
Total	10,250	100



B. Reason for a Lack of Exercise

The most cited reason by residents as well as all sub-groups for lack of exercise is a lack of motivation.

Table 41. Reasons for a Lack of Exercise, Total population

	Freq.	Percent
I do not have motivation to exercise	1,206	41.56
I do not have time to exercise	624	21.5
I am too tired to exercise	323	11.13
I have a physical disability that makes it difficult to exercise	243	8.37
I do not have childcare while I exercise	76	2.62
Exercise is not important to me	72	2.48
I do not have access to exercise equipment	67	2.31
I cannot afford the fees to exercise	63	2.17
Other	228	7.86
Total	2,902	100

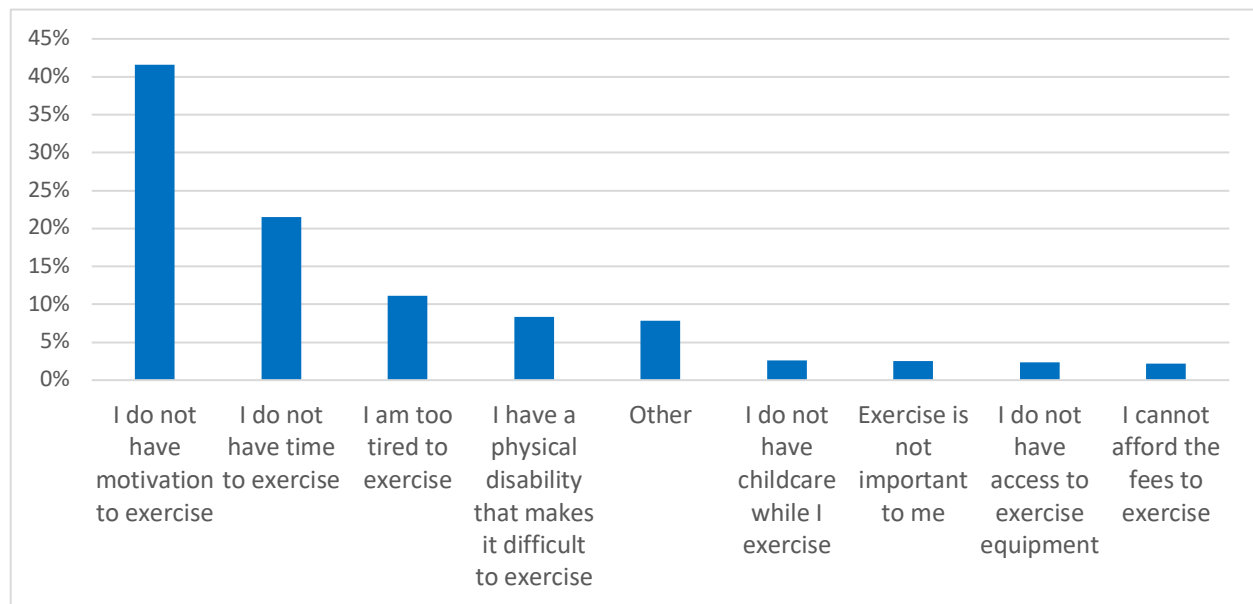
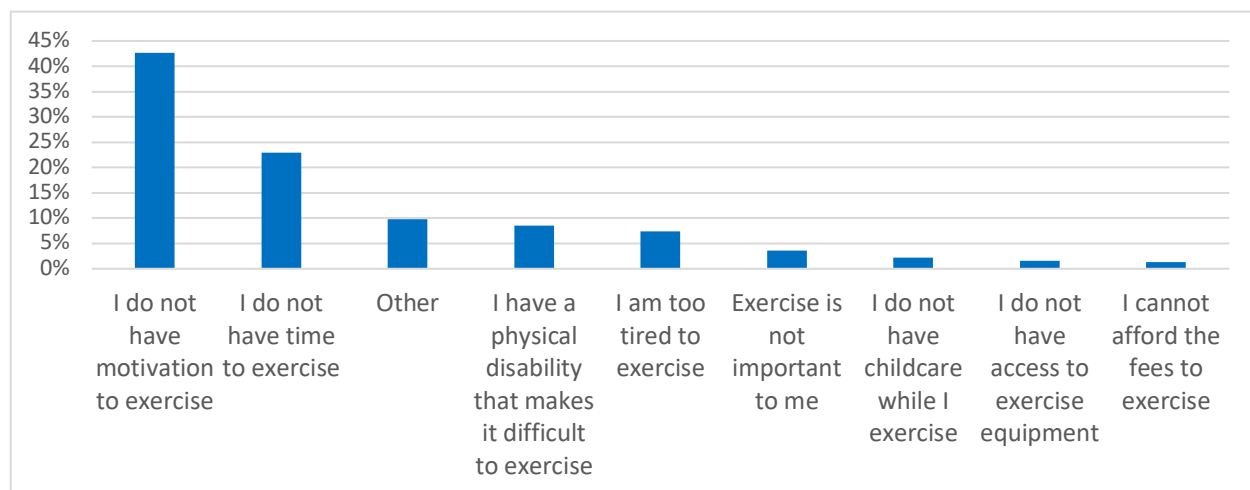


Table 42. Reasons for a Lack of Exercise, Gender

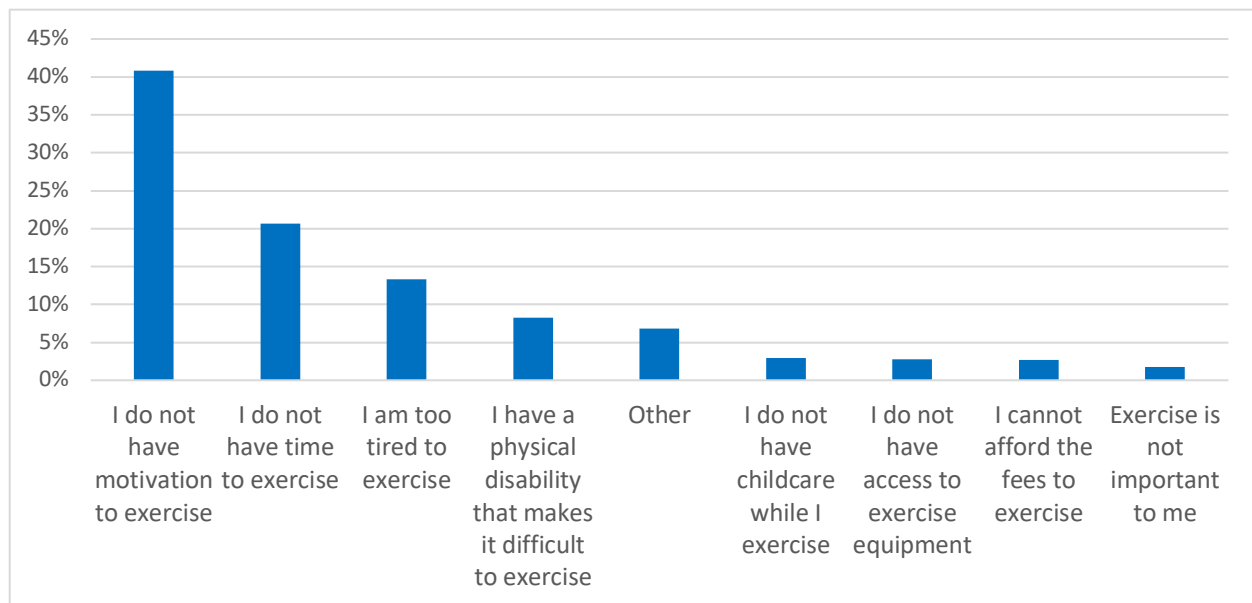
A. Male Participants

	Freq.	Percent
I do not have motivation to exercise	450	42.69
I do not have time to exercise	242	22.96
I have a physical disability that makes it difficult to exercise	90	8.54
I am too tired to exercise	78	7.4
Exercise is not important to me	38	3.61
I do not have childcare while I exercise	23	2.18
I do not have access to exercise equipment	16	1.52
I cannot afford the fees to exercise	14	1.33
Other	103	9.77
Total	1,054	100



B. Female Participants

	Freq.	Percent
I do not have motivation to exercise	741	40.85
I do not have time to exercise	374	20.62
I am too tired to exercise	241	13.29
I have a physical disability that makes it difficult to exercise	150	8.27
I do not have childcare while I exercise	53	2.92
I do not have access to exercise equipment	50	2.76
I cannot afford the fees to exercise	49	2.7
Exercise is not important to me	32	1.76
Other	124	6.84
Total	1,814	100



C. Other (non-binary, other) Participants

	Freq.	Percent
I do not have motivation to exercise	9	37.5
I do not have time to exercise	6	25
I am too tired to exercise	4	16.67
Exercise is not important to me	2	8.33
I have a physical disability that makes it difficult to exercise	2	8.33
I do not have access to exercise equipment	1	4.17
I cannot afford the fees to exercise	0	0
I do not have childcare while I exercise	0	0
Other	0	0
Total	24	100

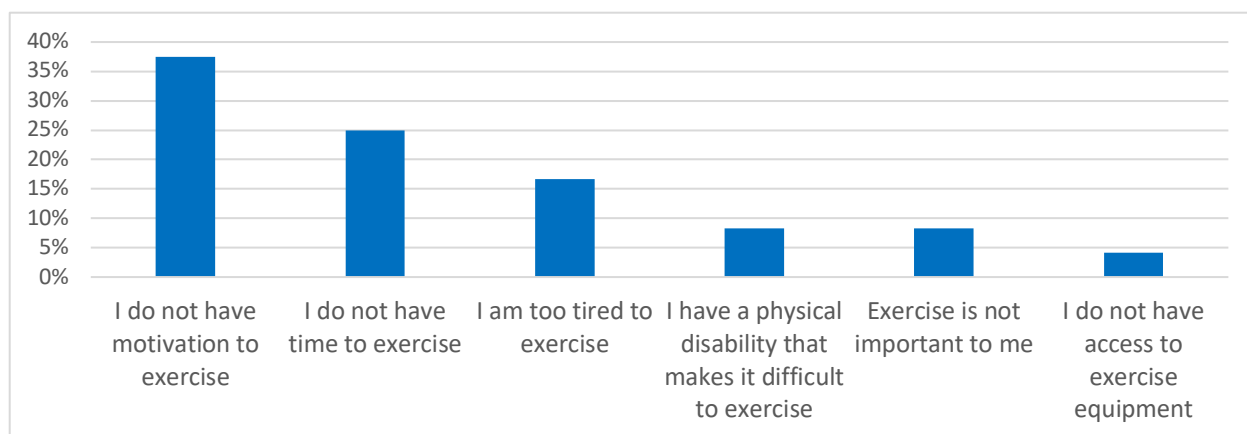
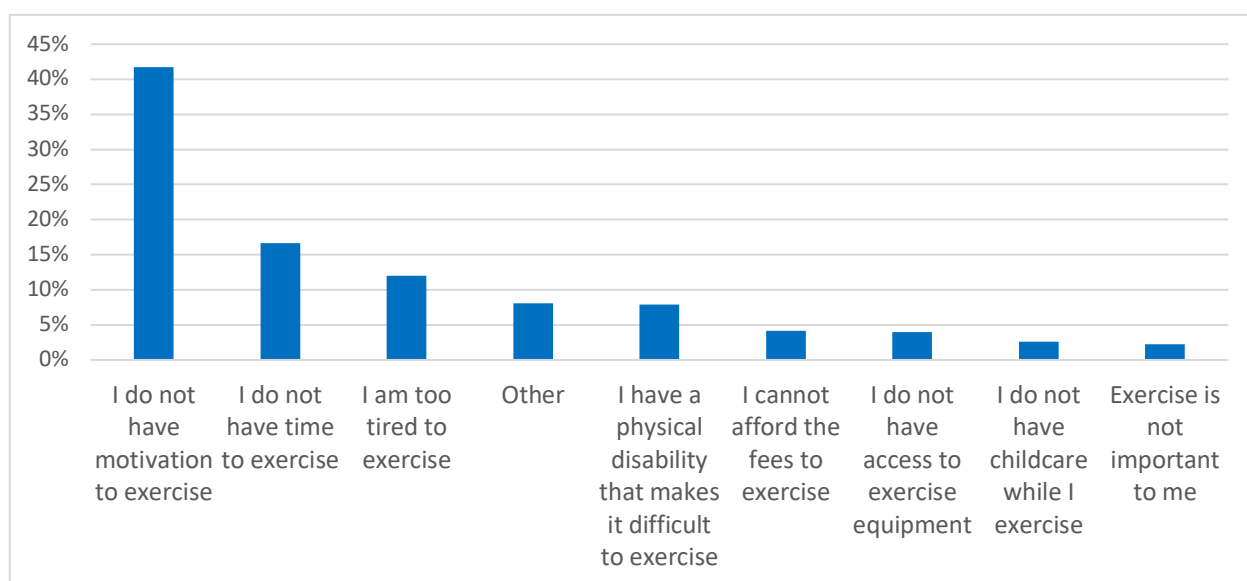


Table 43. Reasons for a Lack of Exercise, Race

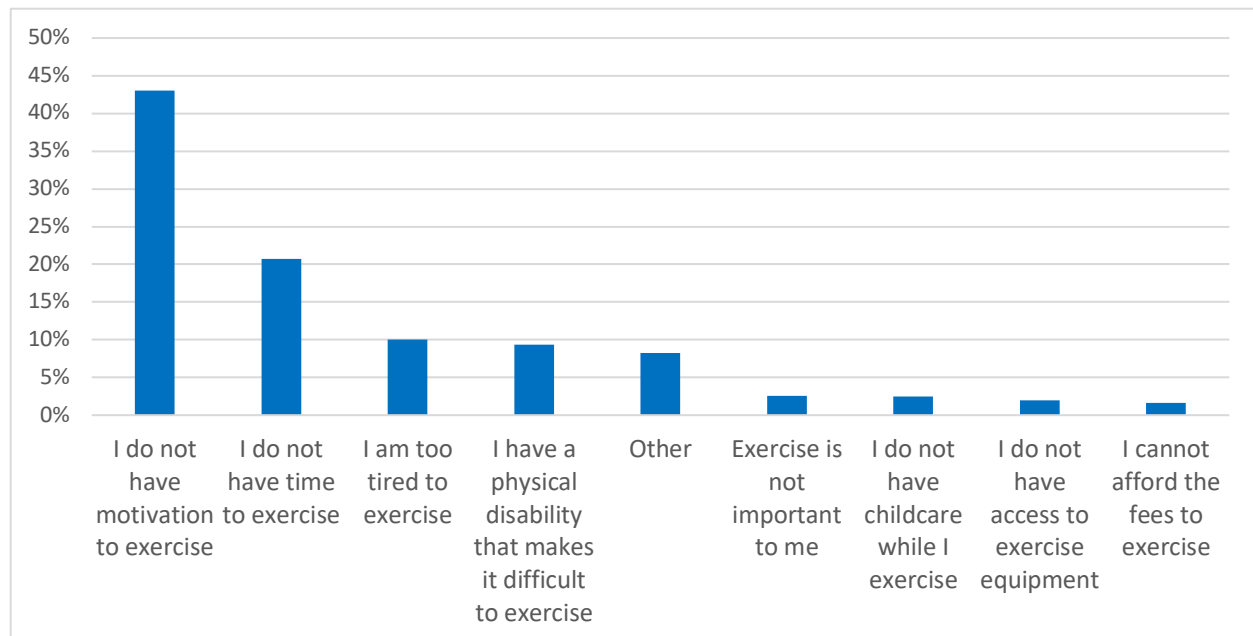
A. Black

	Freq.	Percent
I do not have motivation to exercise	223	41.76
I do not have time to exercise	89	16.67
I am too tired to exercise	65	12
I have a physical disability that makes it difficult to exercise	42	7.87
I do not have access to exercise equipment	24	4
I cannot afford the fees to exercise	22	4.12
I do not have childcare while I exercise	14	2.62
Exercise is not important to me	12	2.25
Other	43	8.05
Total	534	100



B. White

	Freq.	Percent
I do not have motivation to exercise	825	43.01
I do not have time to exercise	398	20.75
I am too tired to exercise	200	10
I have a physical disability that makes it difficult to exercise	180	9.38
Exercise is not important to me	49	2.55
I do not have childcare while I exercise	47	2.45
I cannot afford the fees to exercise	31	1.62
I do not have access to exercise equipment	30	2
Other	158	8.24
Total	1,918	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
I do not have motivation to exercise	154	35.73
I do not have time to exercise	133	30.86
I am too tired to exercise	56	13
I have a physical disability that makes it difficult to exercise	16	3.71
I do not have childcare while I exercise	15	3
I do not have access to exercise equipment	13	3
Exercise is not important to me	11	3
I cannot afford the fees to exercise	9	2.09
Other	24	5.57
Total	431	100

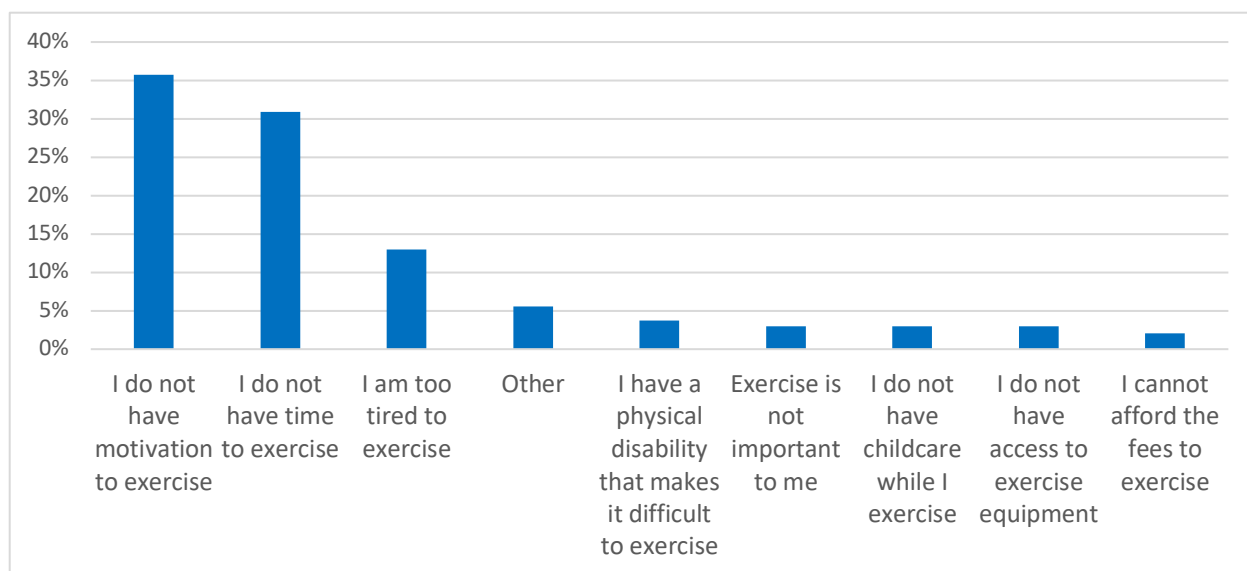
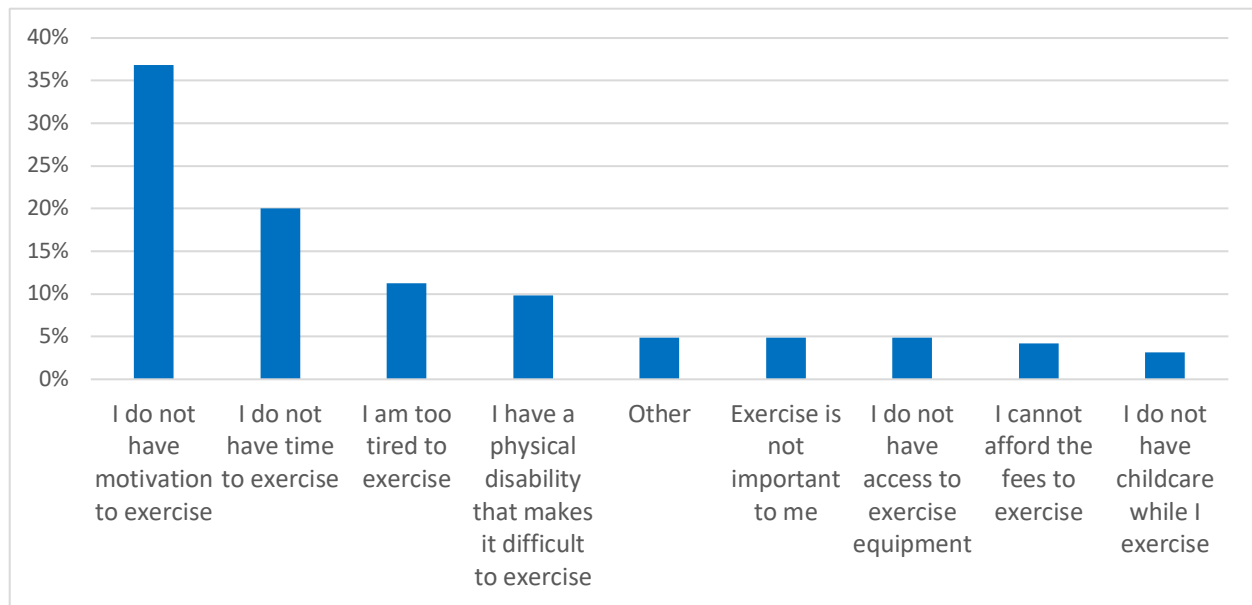


Table 44. Reasons for a Lack of Exercise by Location

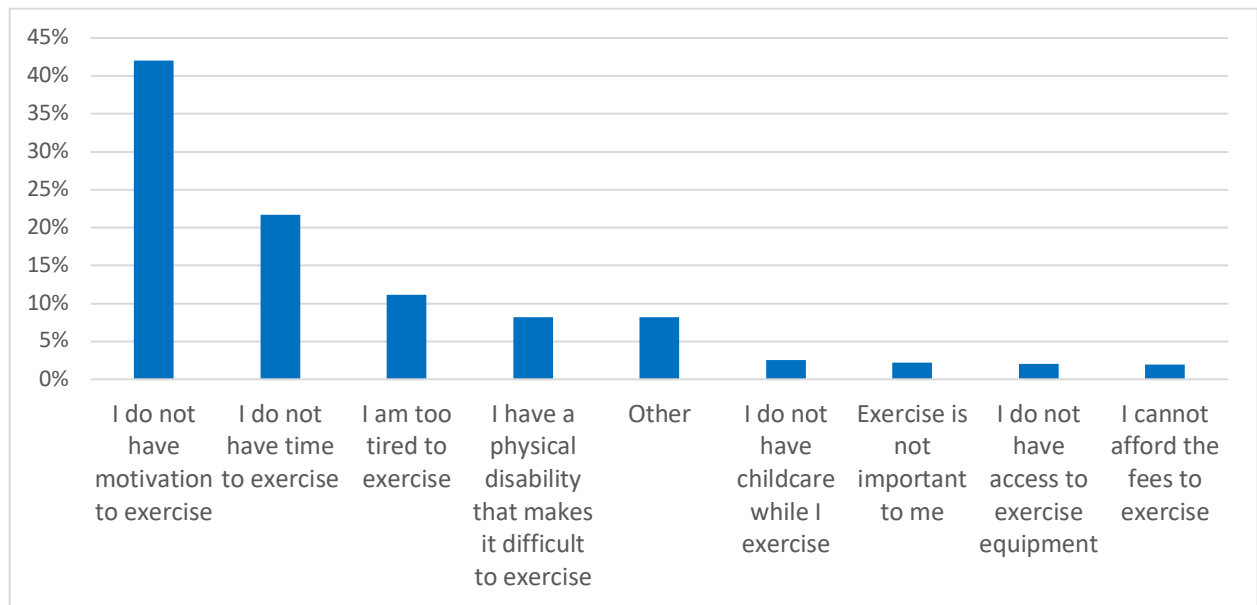
A. Newark Participants

	Freq.	Percent
I do not have motivation to exercise	105	36.84
I do not have time to exercise	57	20
I am too tired to exercise	32	11.23
I have a physical disability that makes it difficult to exercise	28	9.82
Exercise is not important to me	14	4.91
I do not have access to exercise equipment	14	4.91
I cannot afford the fees to exercise	12	4.21
I do not have childcare while I exercise	9	3.16
Other	14	4.91
Total	285	100



B. Other Cities

	Freq.	Percent
I do not have motivation to exercise	1,101	42.07
I do not have time to exercise	567	21.67
I am too tired to exercise	291	11.12
I have a physical disability that makes it difficult to exercise	215	8.22
I do not have childcare while I exercise	67	2.56
Exercise is not important to me	58	2.22
I do not have access to exercise equipment	53	2.03
I cannot afford the fees to exercise	51	1.95
Other	214	8.18
Total	2,617	100



Section 8: Fruit and Vegetable Consumption

More than half of residents consume no more than 2 servings of fruit and vegetable each day. This percentage is higher among males, Black, and Newark residents than female and other gender groups, White and other racial/ethnic groups, and non-Newark residents.

a. Fruit and Vegetable Consumption on a Typical Day

Table 45. Fruit and Vegetable Serving per day, Total population

	Freq.	Percent
1-2 servings	6,060	55
3-4 servings	3,712	33
More than 5 servings	934	8.41
None	405	3.65
Total	11,111	100

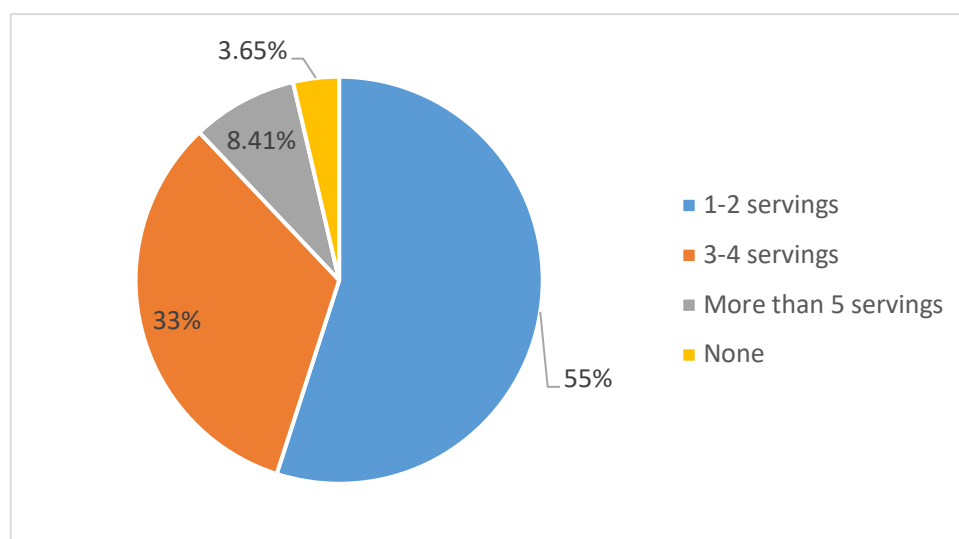
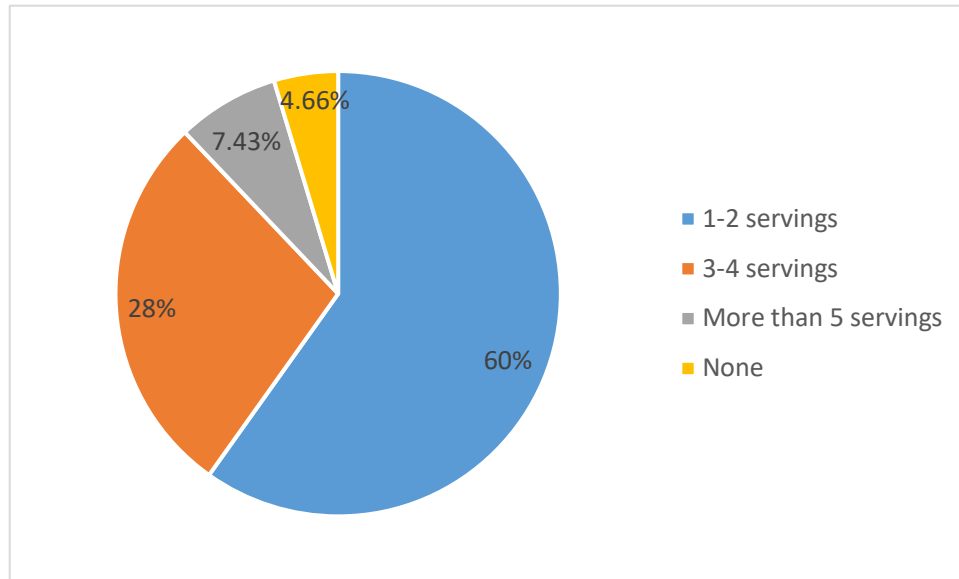


Table 46. Fruit and Vegetable Serving per day, Gender

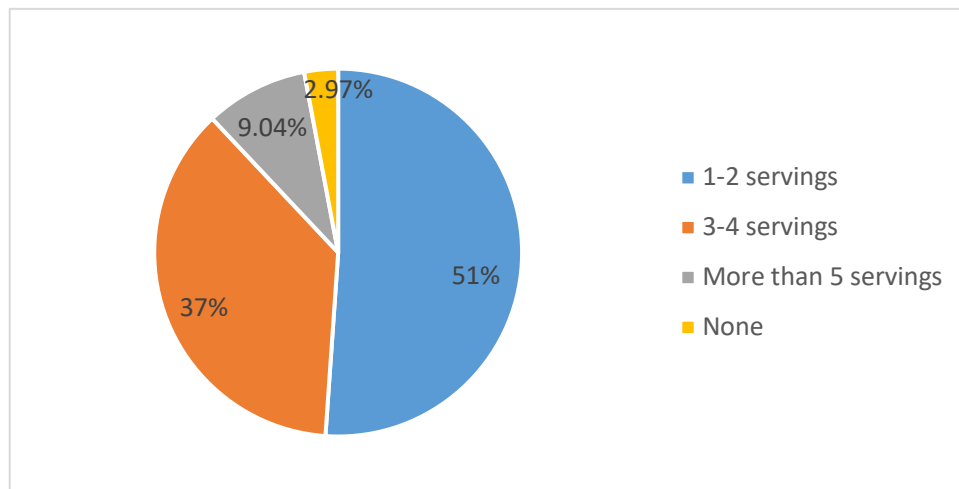
A. Male

	Freq.	Percent
1-2 servings	2,594	59.85
3-4 servings	1,216	28.06
More than 5 servings	322	7.43
None	202	4.66
Total	4,334	100



B. Female

	Freq.	Percent
1-2 servings	3,403	51.1
3-4 servings	2,456	36.88
More than 5 servings	602	9.04
None	198	2.97
Total	6,659	100



C. Other (non-binary, other) Participants

	Freq.	Percent
1-2 servings	45	56.96
3-4 servings	24	30.38
More than 5 servings	7	8.86
None	3	3.80
Total	79	100

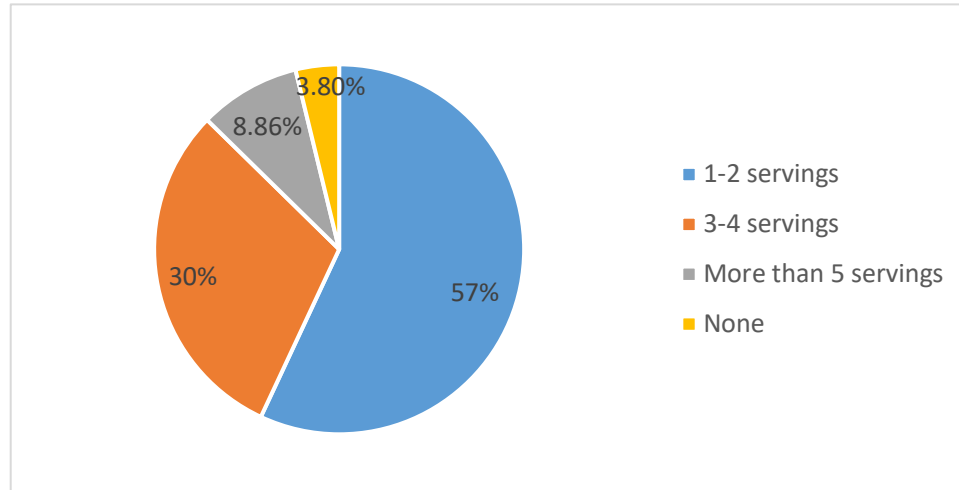
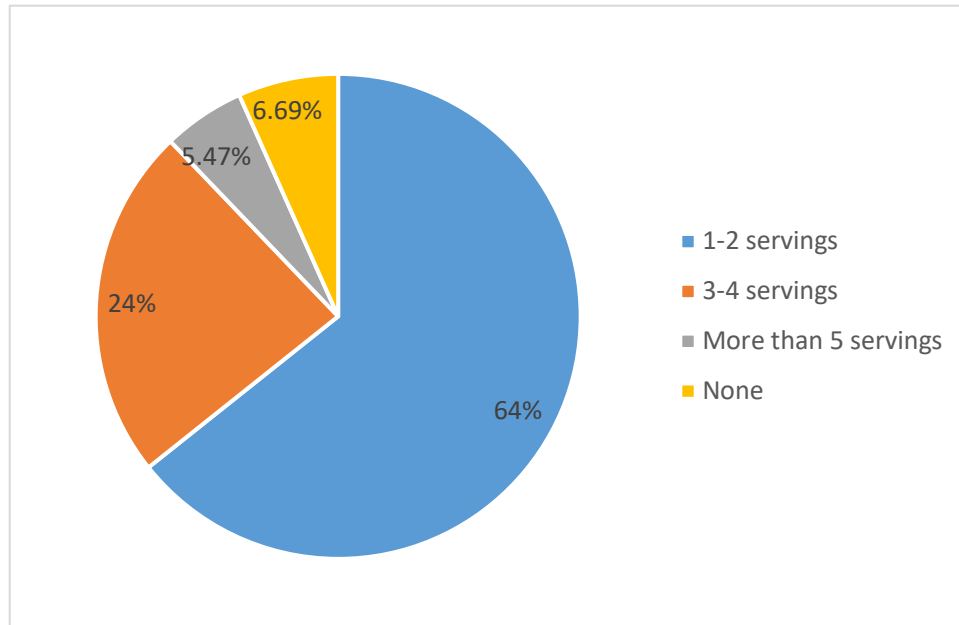


Table 47. Fruit and Vegetable Serving per day, Race

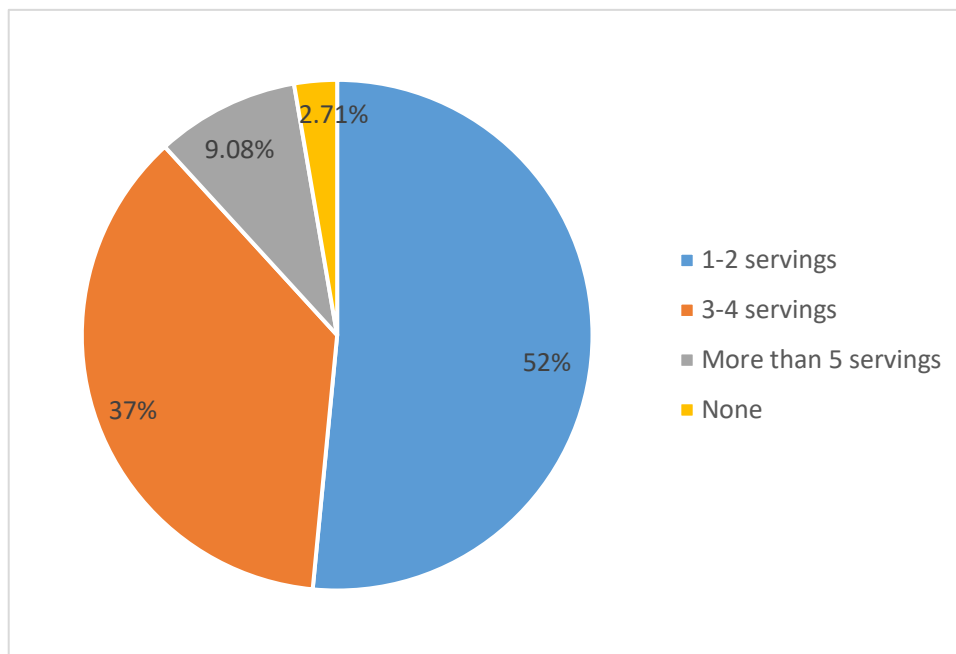
A. Black Participants

	Freq.	Percent
1-2 servings	1,057	64.29
3-4 servings	387	23.54
More than 5 servings	90	5.47
None	110	6.69
Total	1,644	100



B. White Participants

	Freq.	Percent
1-2 servings	4,087	51.53
3-4 servings	2,909	36.68
More than 5 servings	720	9.08
None	215	2.71
Total	7,931	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
1-2 servings	873	59.96
3-4 servings	390	26.79
More than 5 servings	116	7.97
None	77	5.29
Total	1,456	100

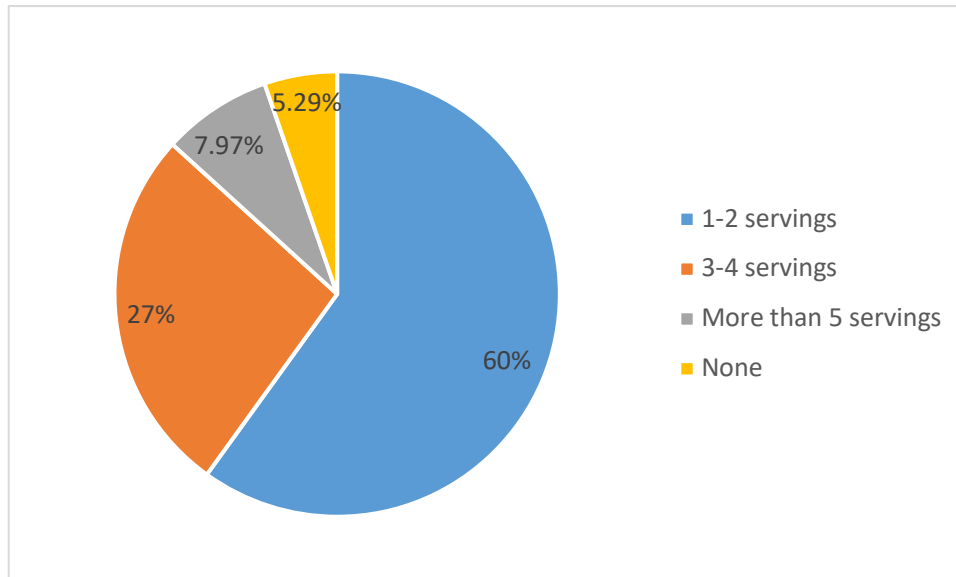
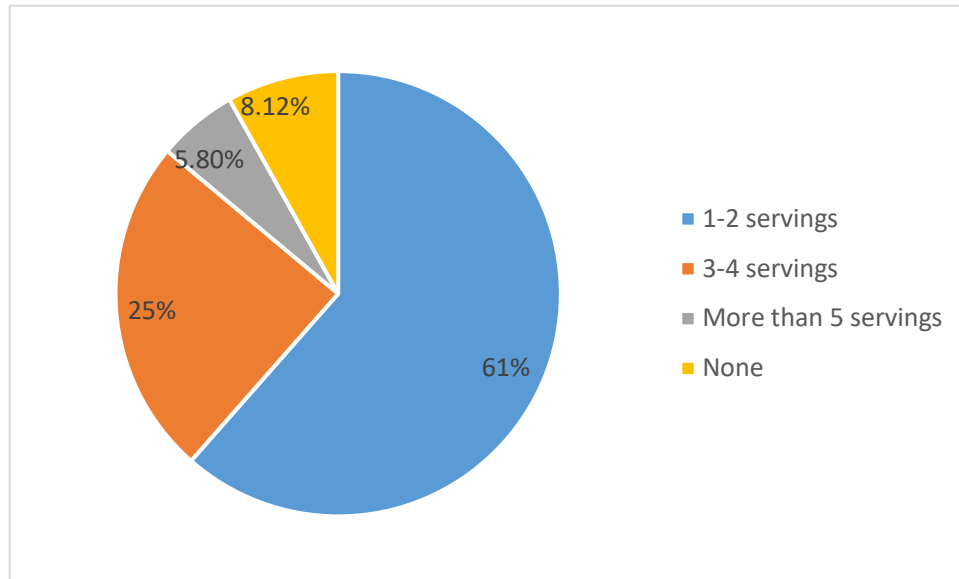


Table 48. Fruit and Vegetable Serving per day, Location

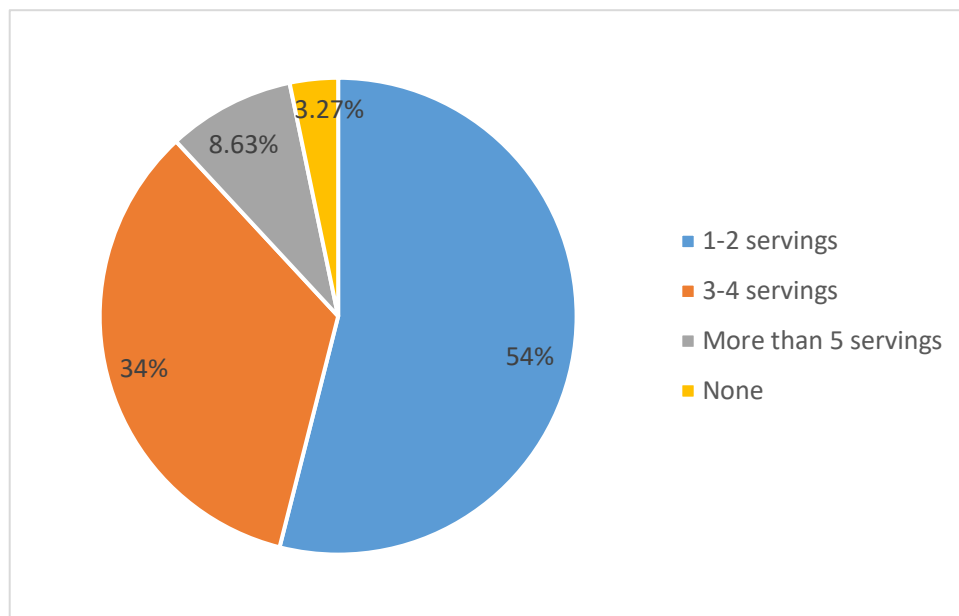
A. Newark Participants

	Freq.	Percent
1-2 servings	530	61.48
3-4 servings	212	24.59
More than 5 servings	50	5.8
None	70	8.12
Total	862	100



B. Other Cities

	Freq.	Percent
1-2 servings	5,530	53.96
3-4 servings	3,500	34.15
More than 5 servings	884	8.63
None	335	3.27
Total	10,249	100



b. Reasons for not eating fruits and vegetables

Table 49. Reasons for not eating fruits and vegetables, Total population

	Freq.	Percent
Prioritize other groceries	222	54.95
Too expensive	52	12.87
Cannot get to supermarket	18	4.46
Other	112	27.72
Total	404	100

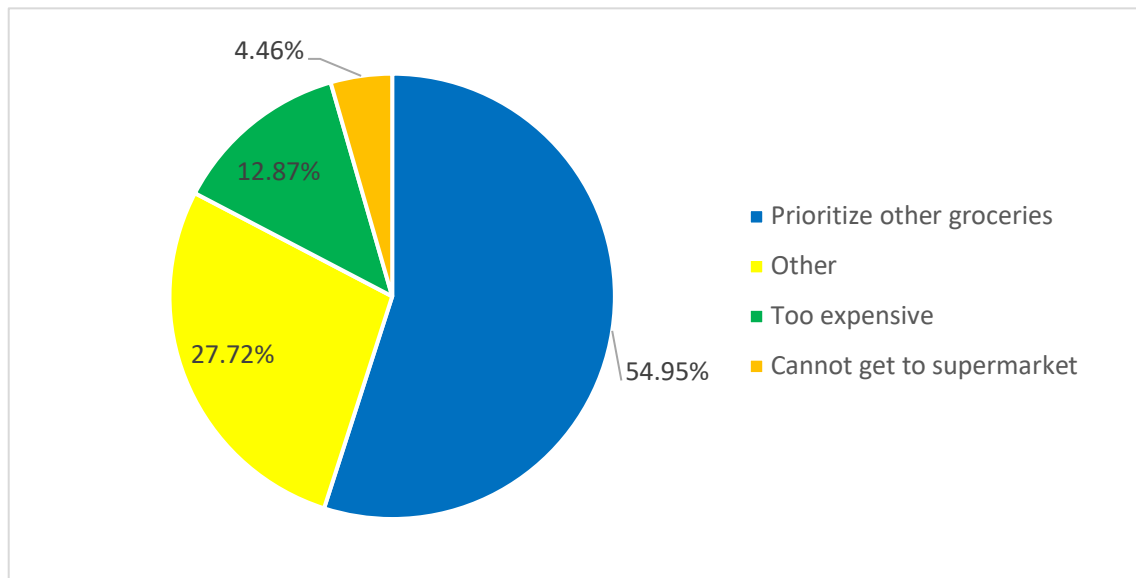
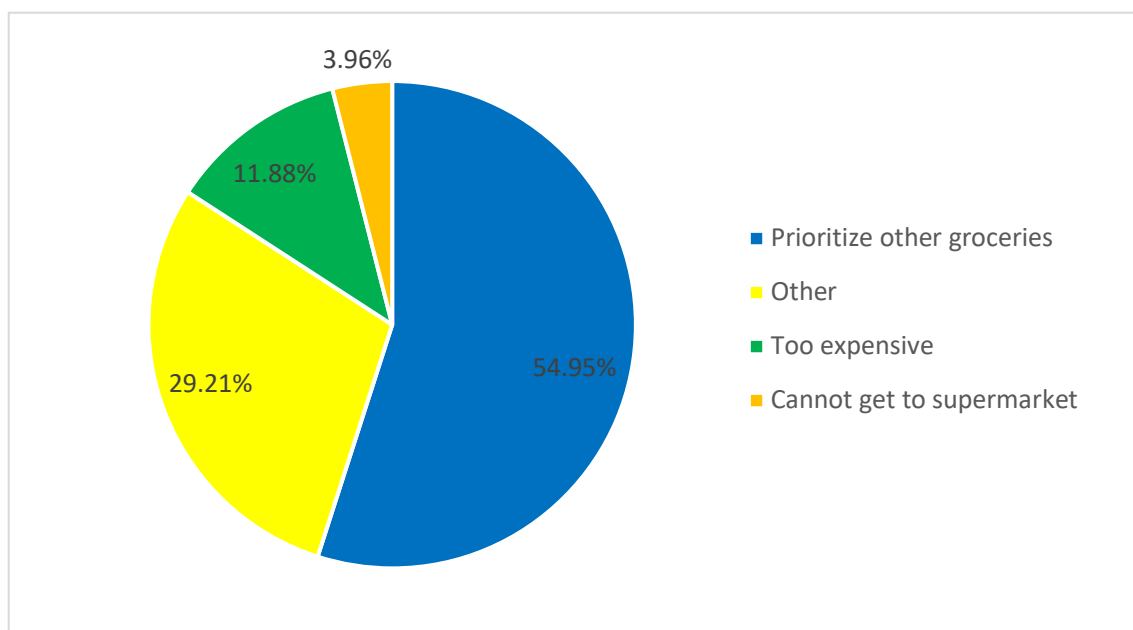


Table 50. Reasons for not eating fruits and vegetables, Gender

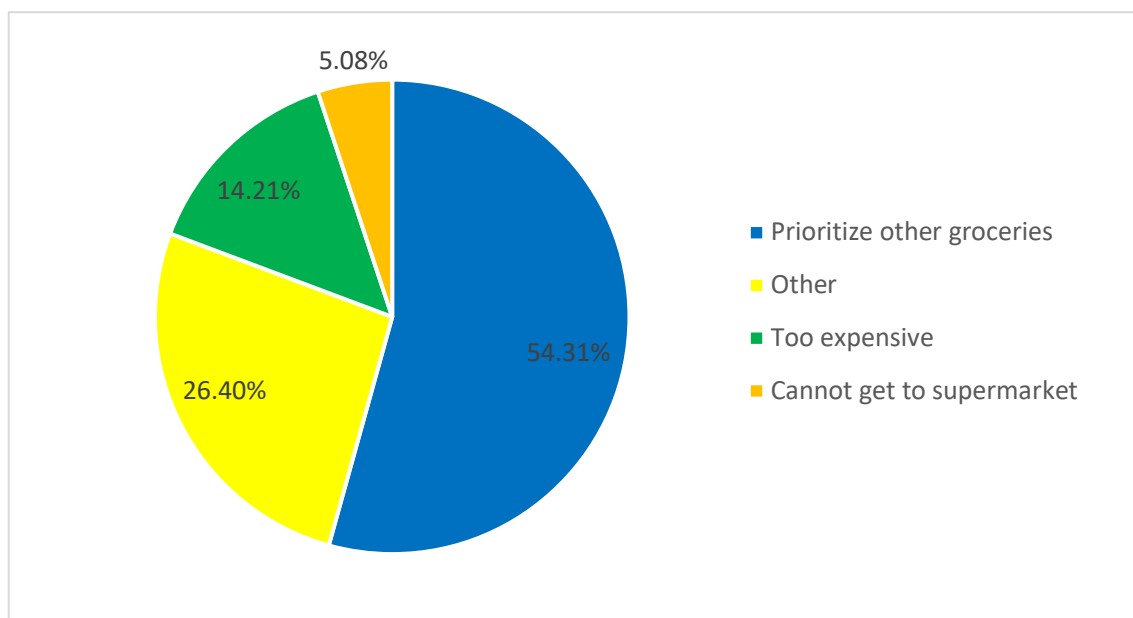
A. Male Participants

	Freq.	Percent
Prioritize other groceries	111	54.95
Too expensive	24	11.88
Cannot get to supermarket	8	3.96
Other	59	29.21
Total	202	100



B. Female Participants

	Freq.	Percent
Prioritize other groceries	107	54.31
Too expensive	28	14.21
Cannot get to supermarket	10	5.08
Other	52	26.4
Total	197	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Prioritize other groceries	3	100
Too expensive	0	0
Cannot get to supermarket	0	0
Other	0	0
Total	3	100

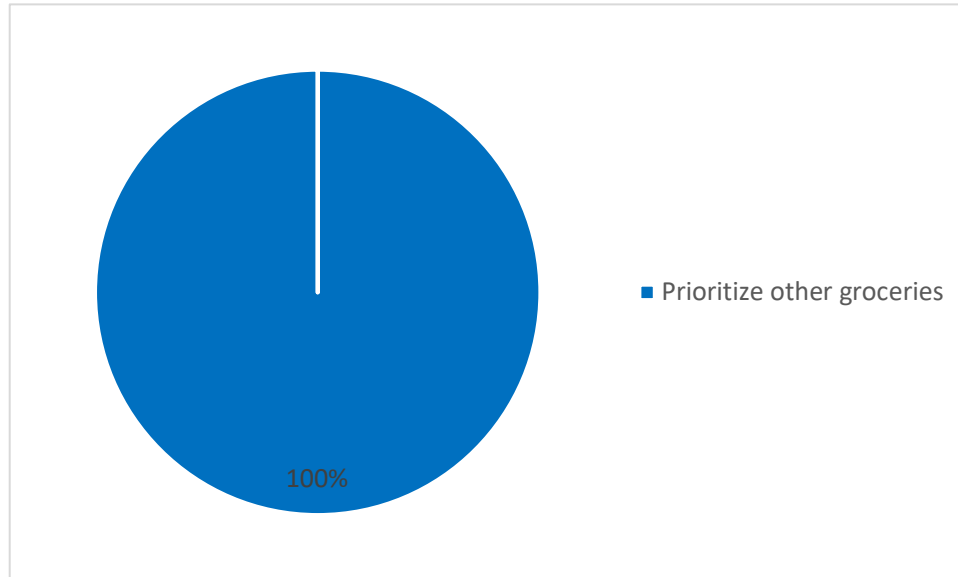
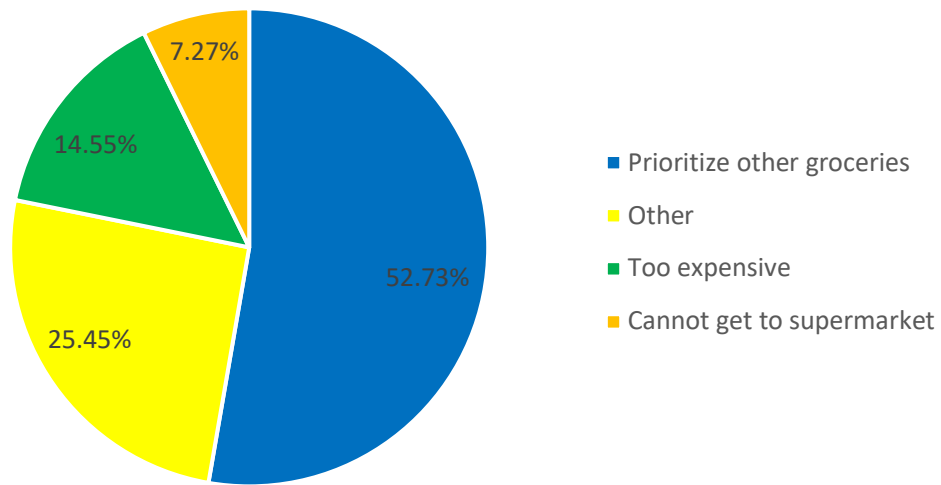


Table 51. Reasons for not eating fruits and vegetables, Race

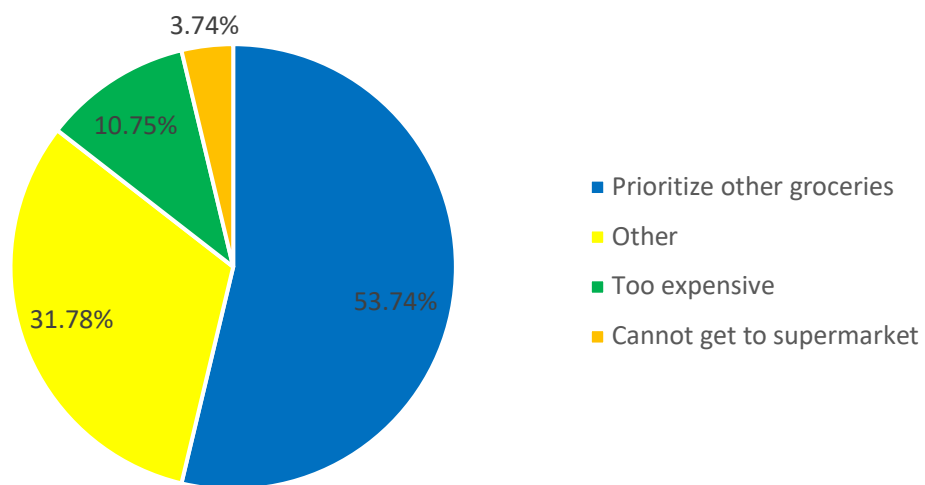
A. Black Participants

	Freq.	Percent
Prioritize other groceries	58	52.73
Too expensive	16	14.55
Cannot get to supermarket	8	7.27
Other	28	25.45
Total	110	100



B. White Participants

	Freq.	Percent
Prioritize other groceries	115	53.74
Too expensive	23	10.75
Cannot get to supermarket	8	3.74
Other	68	31.78
Total	214	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Prioritize other groceries	48	62.34
Too expensive	11	14.29
Cannot get to supermarket	2	3
Other	16	20.78
Total	77	100

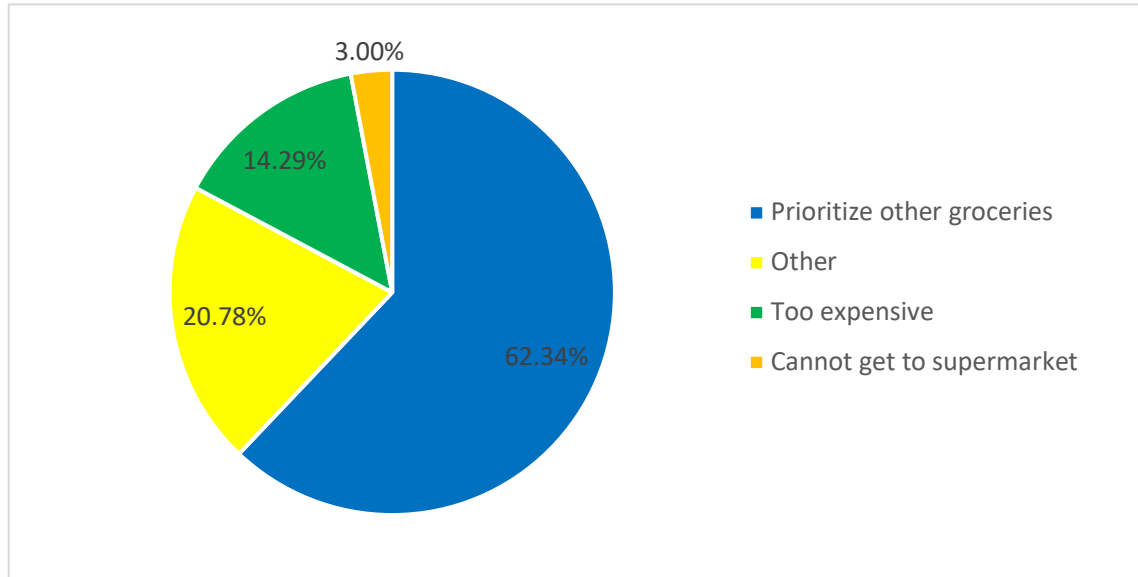
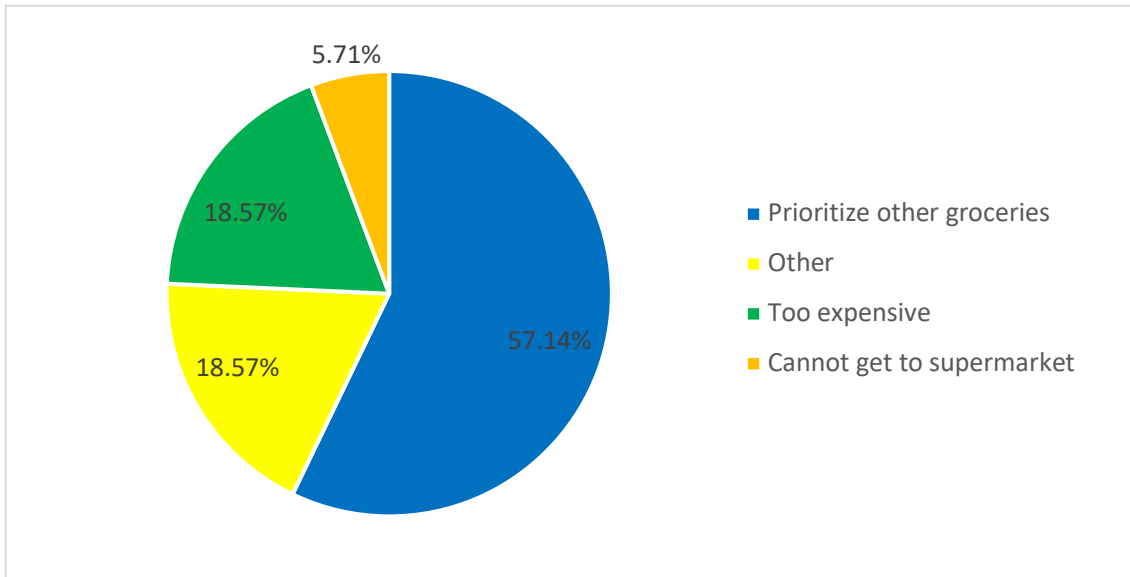


Table 52. Reasons for not eating fruits and vegetables, Location

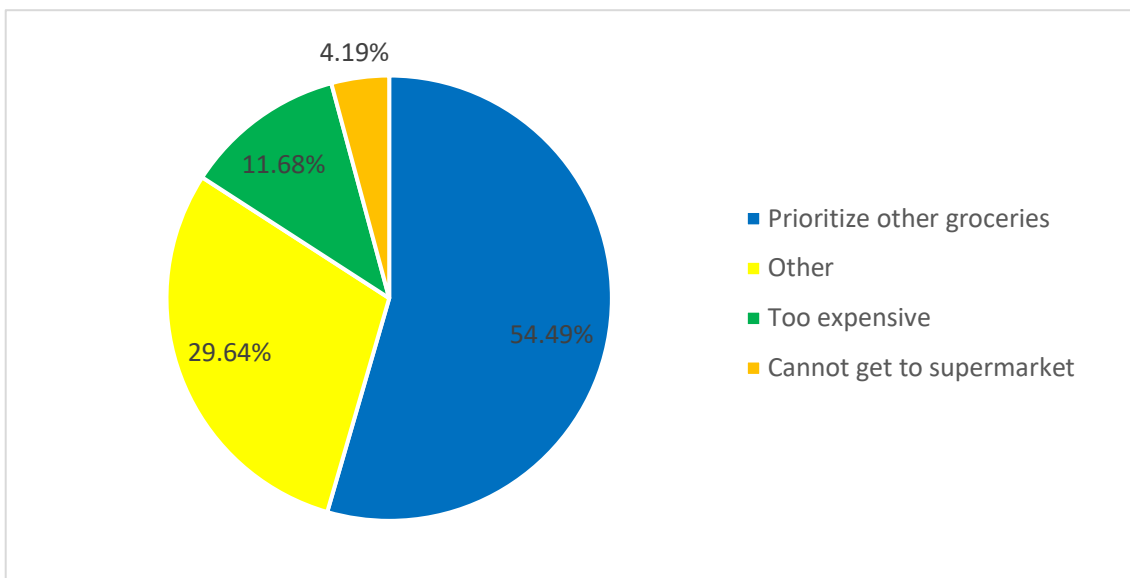
A. Newark Participants

	Freq.	Percent
Prioritize other groceries	40	57.14
Too expensive	13	18.57
Cannot get to supermarket	4	5.71
Other	13	18.57
Total	70	100



B. Other Cities

	Freq.	Percent
Prioritize other groceries	182	54.49
Too expensive	39	11.68
Cannot get to supermarket	14	4.19
Other	99	29.64
Total	334	100



Section 9: Health Insurance

While approximately 70% of residents have private/commercial health insurance, only about half of Newark residents have private/commercial health insurance. More Black residents and Newark residents rely on Medicaid than other racial/ethnic groups and residents of all other cities in Essex County.

a. Health Insurance Coverage

Table 53. Type of Insurance Coverage, Total population

	Freq.	Percent
Private/ Commercial	7,618	68.54
Medicare	2,541	22.86
Medicaid	434	3.9
Obamacare	321	2.89
No insurance	200	1.8
Total	11,114	100

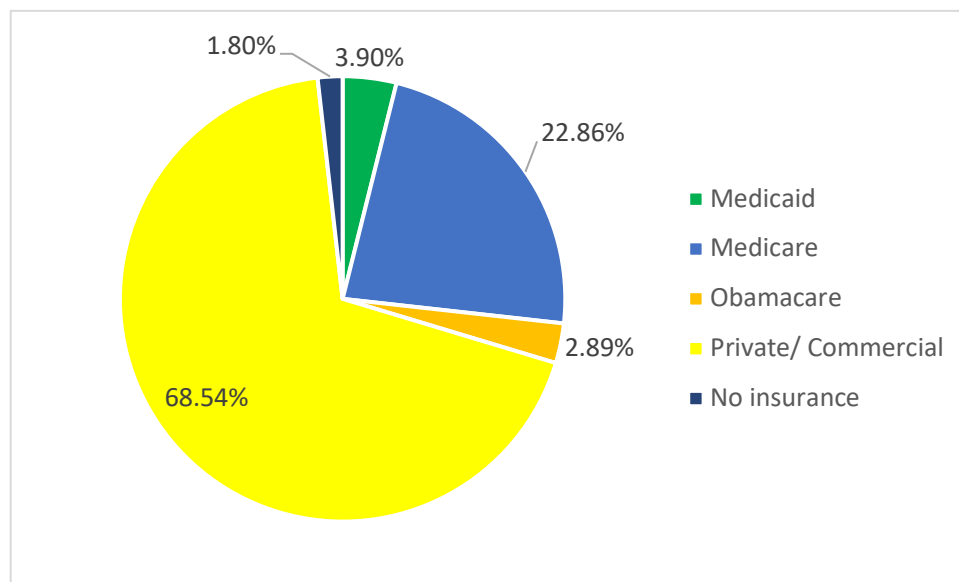
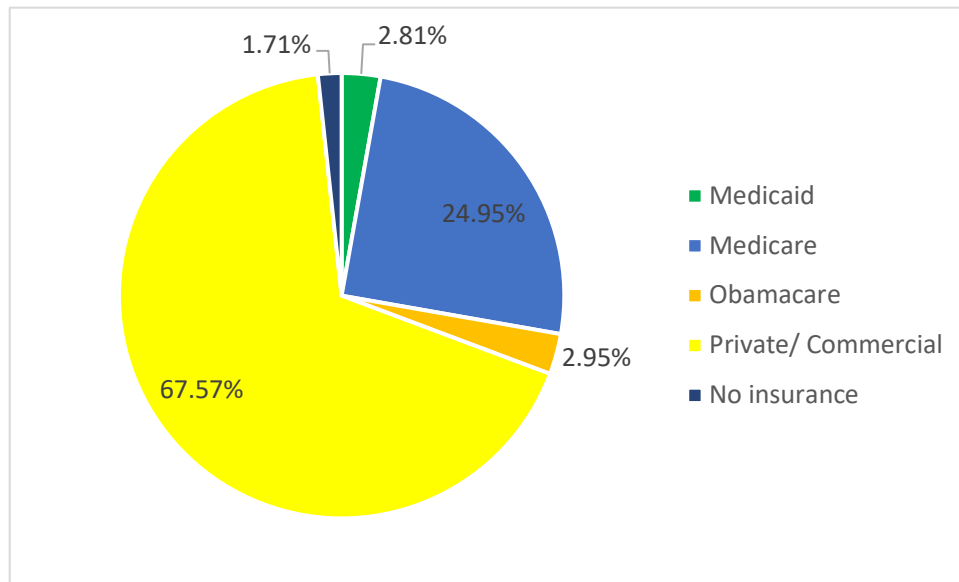


Table 54. Type of Insurance Coverage, Gender

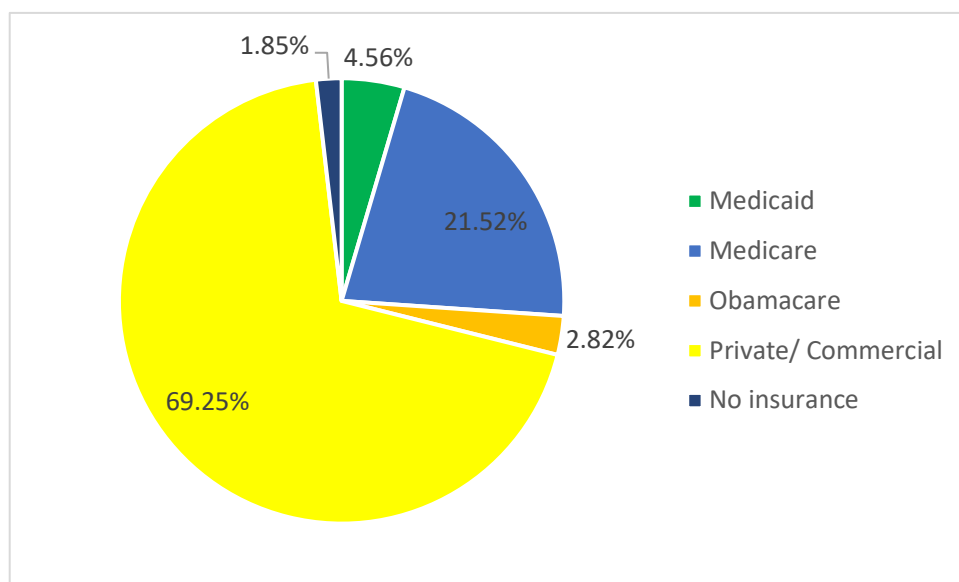
A. Male Participants

	Freq.	Percent
Private/ Commercial	2,930	67.57
Medicare	1,082	24.95
Obamacare	128	2.95
Medicaid	122	2.81
No insurance	74	1.71
Total	4,336	100



B. Female Participants

	Freq.	Percent
Private/ Commercial	4,612	69.25
Medicare	1,433	21.52
Medicaid	304	4.56
Obamacare	188	2.82
No insurance	123	1.85
Total	6,660	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Private/ Commercial	57	72.15
Medicaid	6	7.59
Medicare	5	11.39
Obamacare	4	5.06
No insurance	3	3.80
Total	79	100

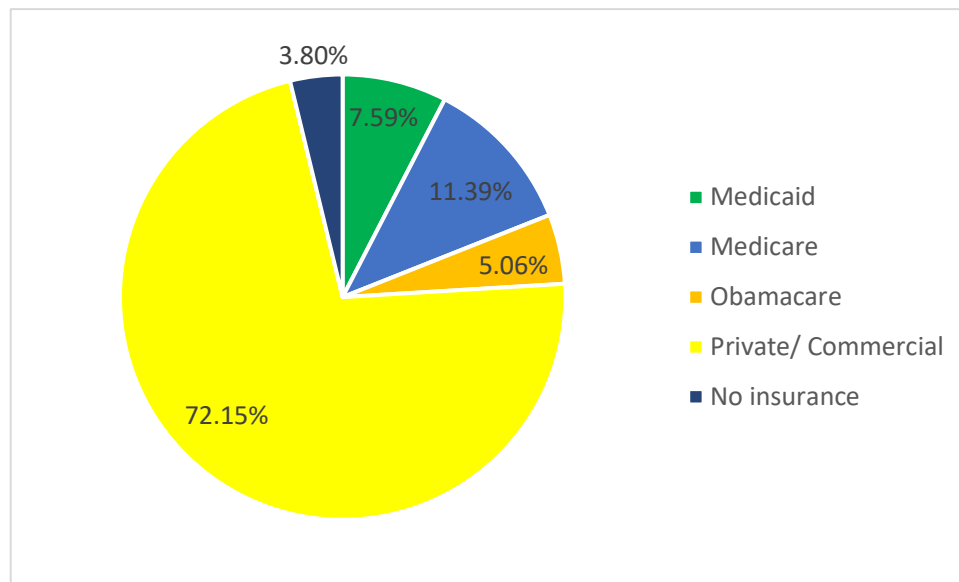
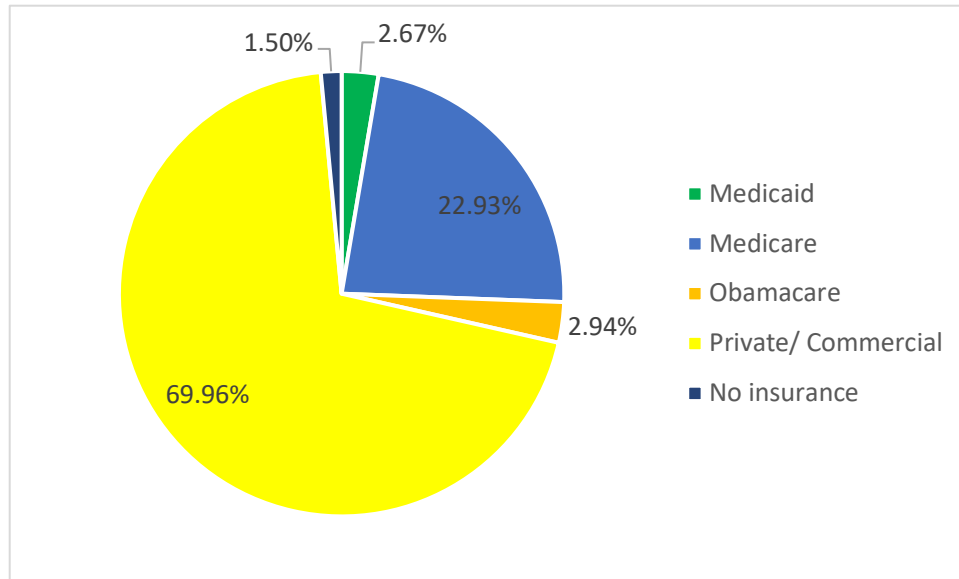


Table 55. Type of Insurance Coverage, Race

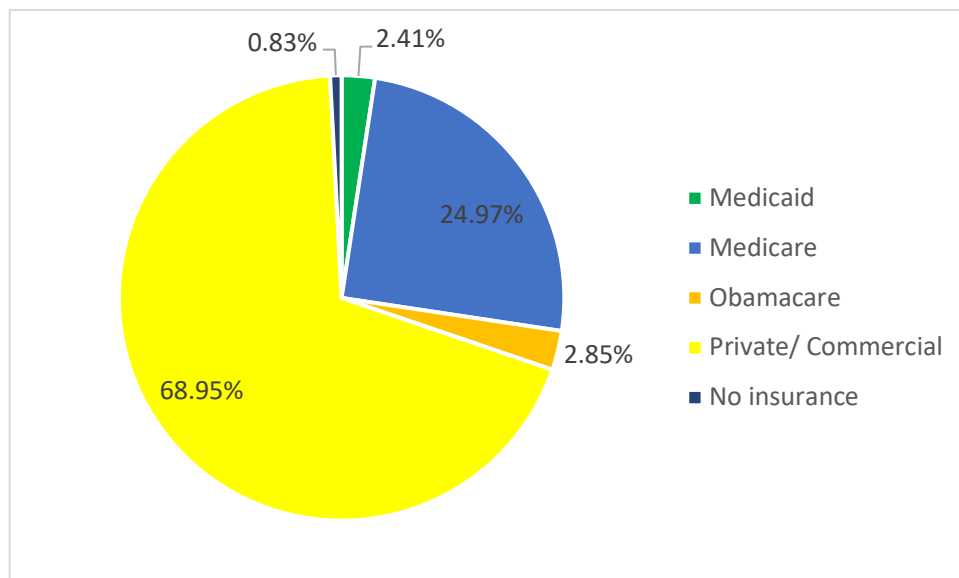
A. Black Participants

	Freq.	Percent
Private/ Commercial	1,054	64.11
Medicare	316	19.22
Medicaid	153	9.31
Obamacare	48	2.92
No insurance	73	4.44
Total	1,644	100



B. White Participants

	Freq.	Percent
Private/ Commercial	5,471	68.95
Medicare	1,981	24.97
Obamacare	226	2.85
Medicaid	191	2.41
No insurance	66	0.83
Total	7,935	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Private/ Commercial	1,039	71.46
Medicare	219	15.06
Medicaid	89	6.12
Obamacare	46	3.16
No insurance	61	4.2
Total	1,454	100

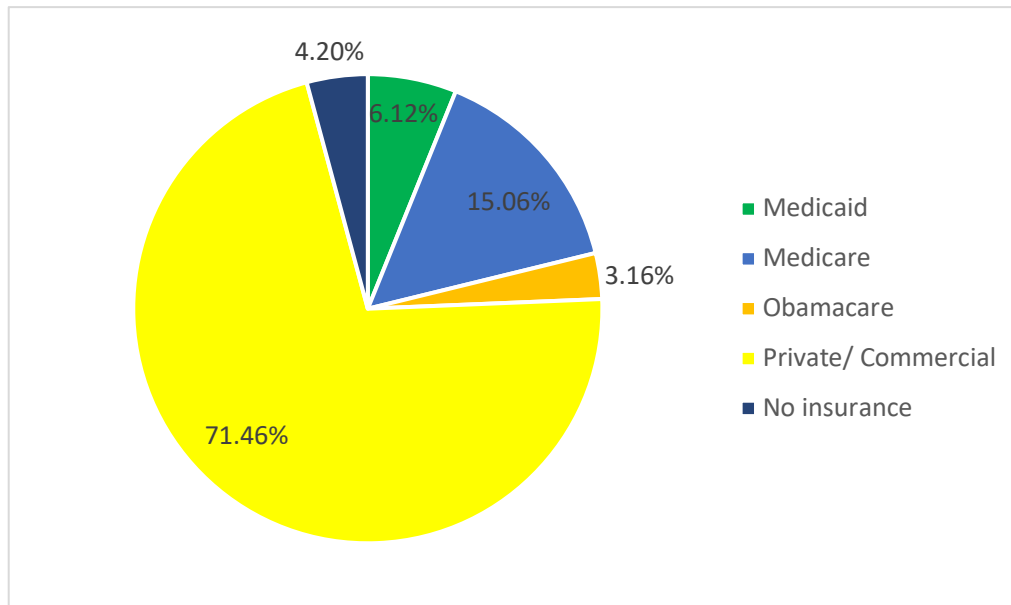
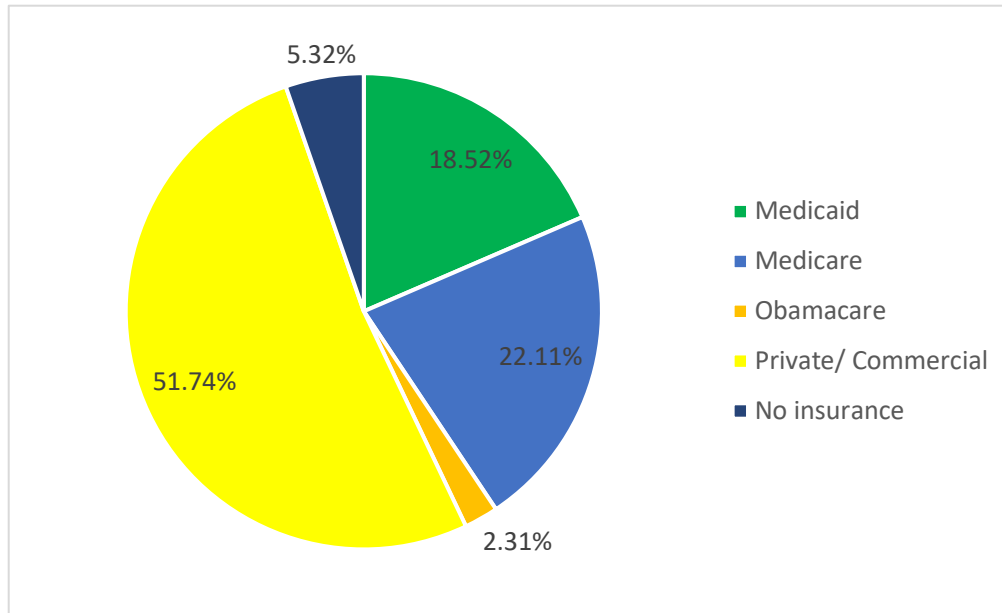


Table 56. Type of Insurance Coverage, Location

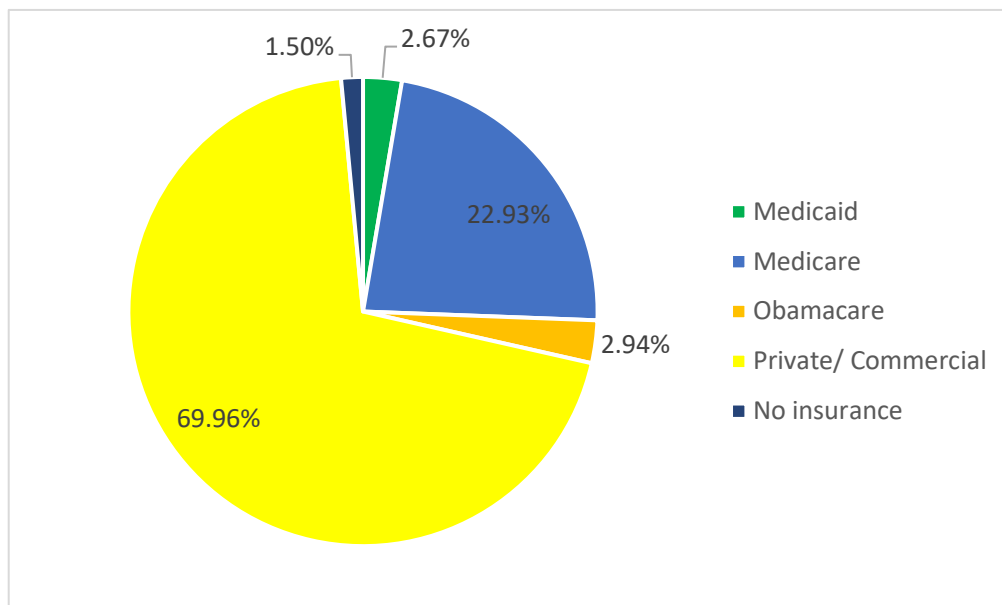
A. Newark Participants

	Freq.	Percent
Private/ Commercial	447	51.74
Medicare	191	22.11
Medicaid	160	18.52
Obamacare	20	2.31
No insurance	46	5.32
Total	864	100



B. Other Cities

	Freq.	Percent
Private/ Commercial	7,171	69.96
Medicare	2,350	22.93
Obamacare	301	2.94
Medicaid	274	2.67
No insurance	154	1.5
Total	10,250	100



b. Reasons for not having Medical Insurance

More than 70% of Essex County residents reported not having health insurance due to affordability. This is consistent across all gender, racial/ethnic groups, and cities.

Table 57. Reasons for not having Insurance, Total population

	Freq.	Percent
I cannot afford health insurance	146	73.37
I do not know how to get health insurance	18	9.05
I do not need health insurance	5	2.51
Other	30	15.08
Total	199	100

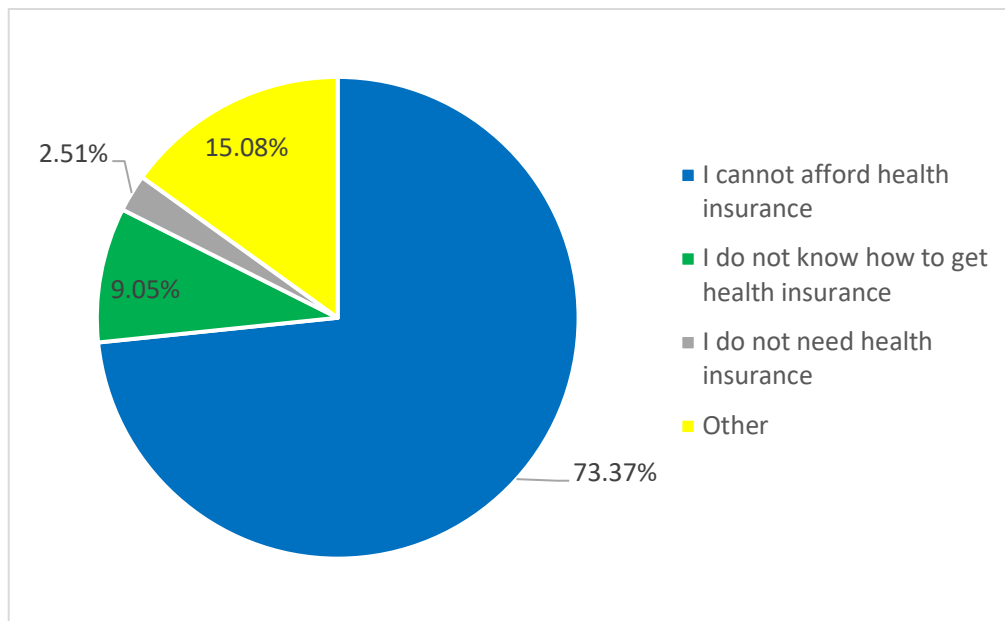
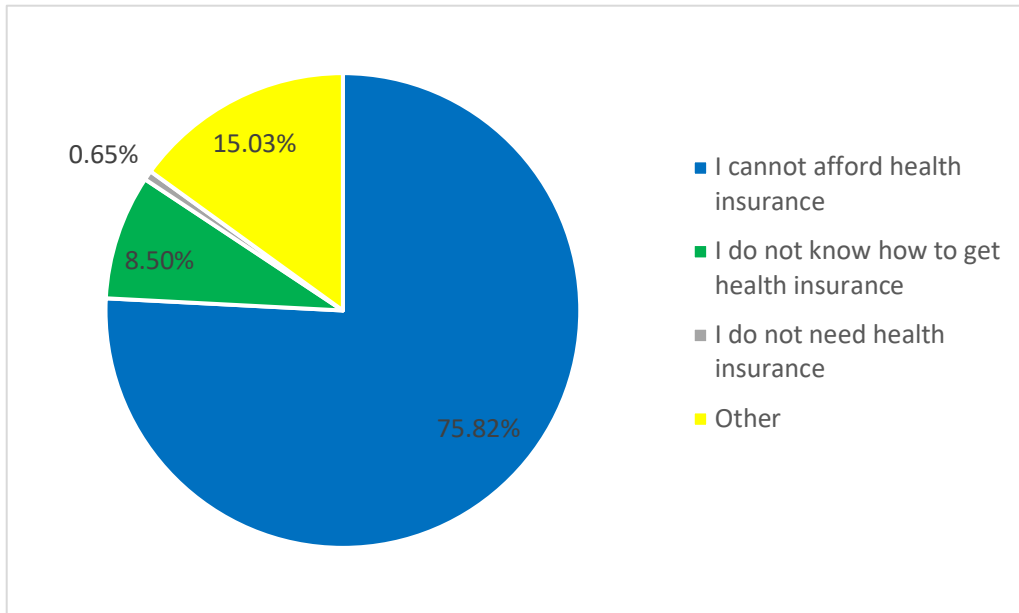


Table 58. Reasons for not having Insurance, Gender

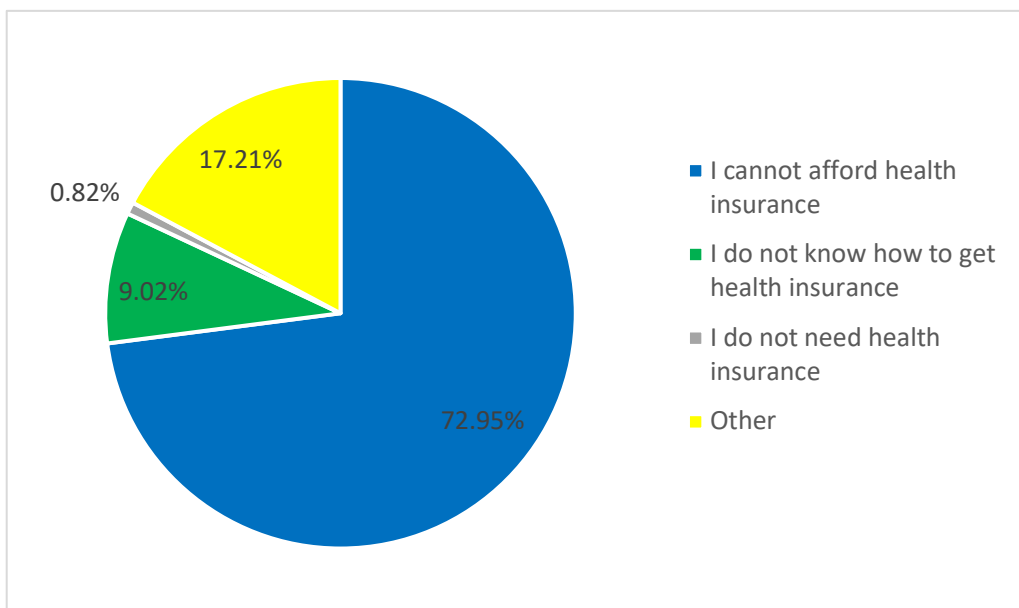
A. Male Participants

	Freq.	Percent
I cannot afford health insurance	54	72.97
I do not know how to get health insurance	7	9.46
I do not need health insurance	4	5.41
Other	9	12.16
Total	74	100



B. Female Participants

	Freq.	Percent
I cannot afford health insurance	89	72.95
I do not know how to get health insurance	11	9.02
I do not need health insurance	1	0.82
Other	21	17.21
Total	122	100



C. Other (non-binary, other) Participants

	Freq.	Percent
I cannot afford health insurance	1	33.33
I do not need health insurance	1	33.33
I do not know how to get health insurance	0	0
Other	1	33.33
Total	3	100

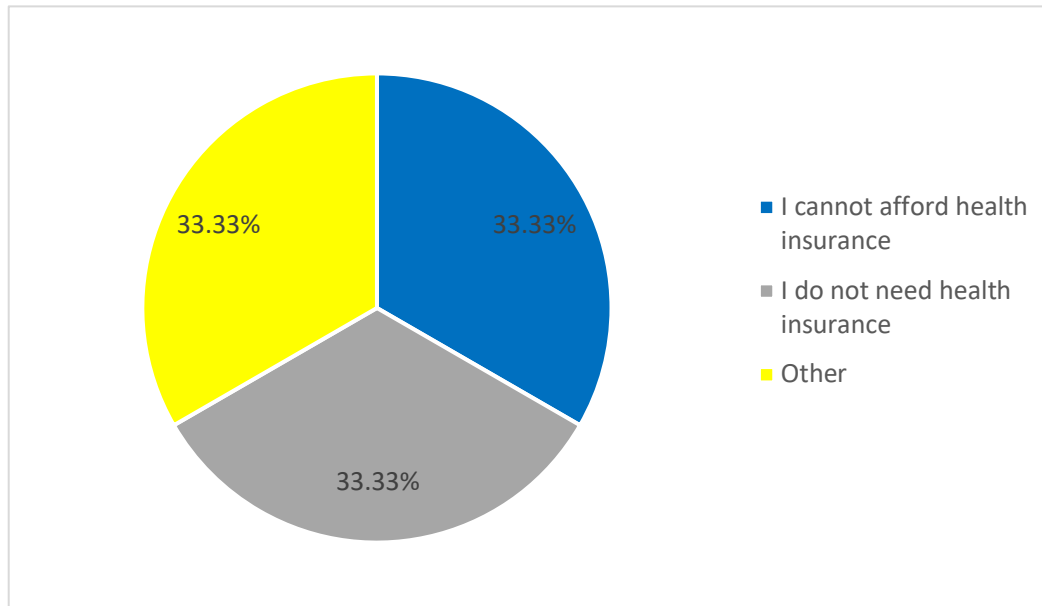
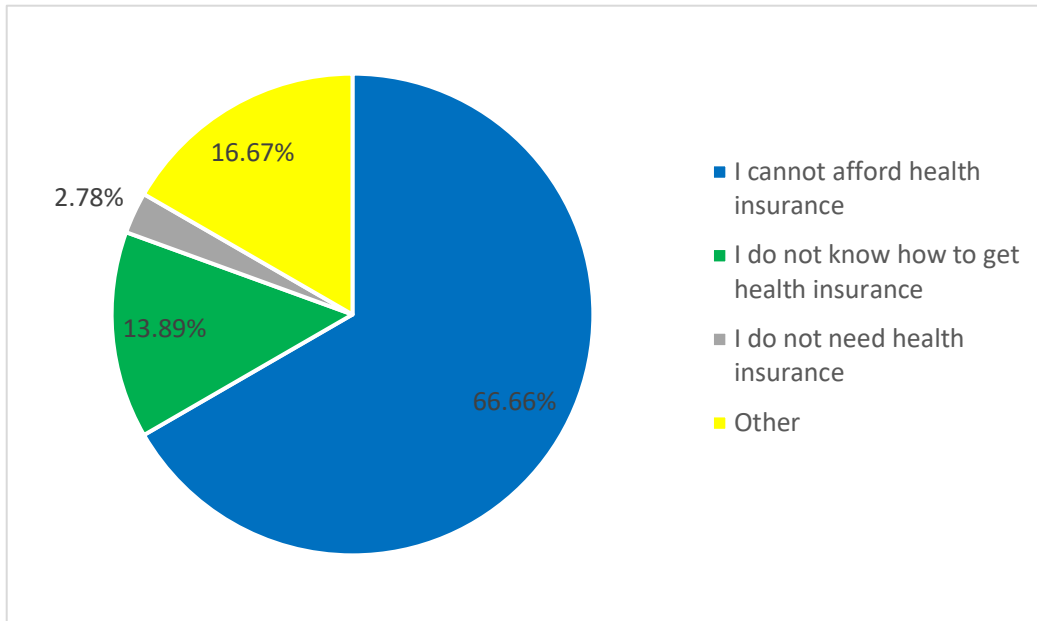


Table 59. Reasons for not having Insurance, Race

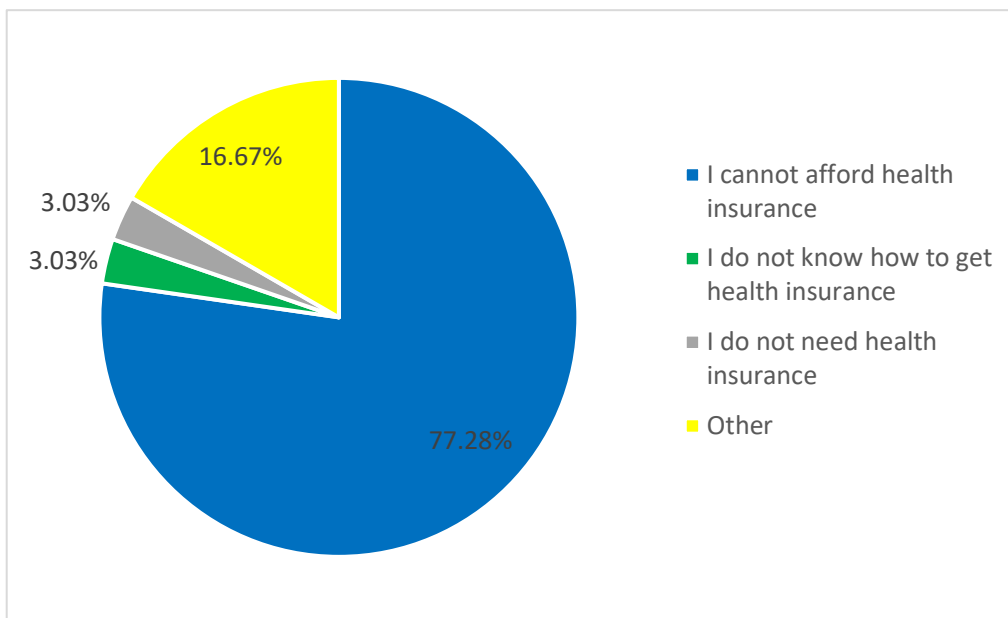
A. Black Participants

	Freq.	Percent
I cannot afford health insurance	48	66.66
I do not know how to get health insurance	10	13.89
I do not need health insurance	2	2.78
Other	12	16.67
Total	72	100



B. White Participants

	Freq.	Percent
I cannot afford health insurance	51	77.28
I do not know how to get health insurance	2	3.03
I do not need health insurance	2	3.03
Other	11	16.67
Total	66	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
I cannot afford health insurance	47	77.05
I do not know how to get health insurance	6	9.84
I do not need health insurance	1	2
Other	7	11.48
Total	61	100

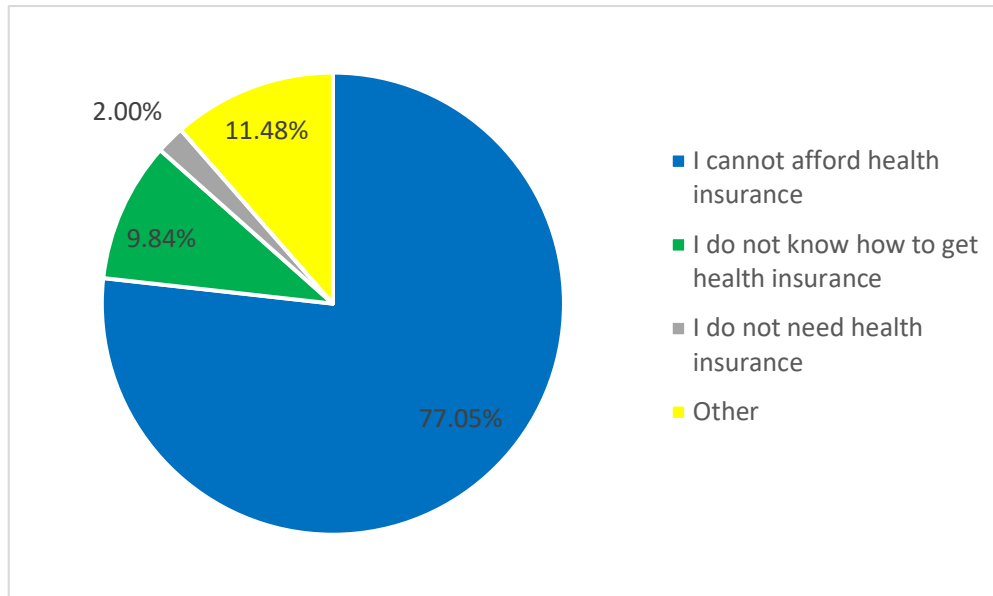
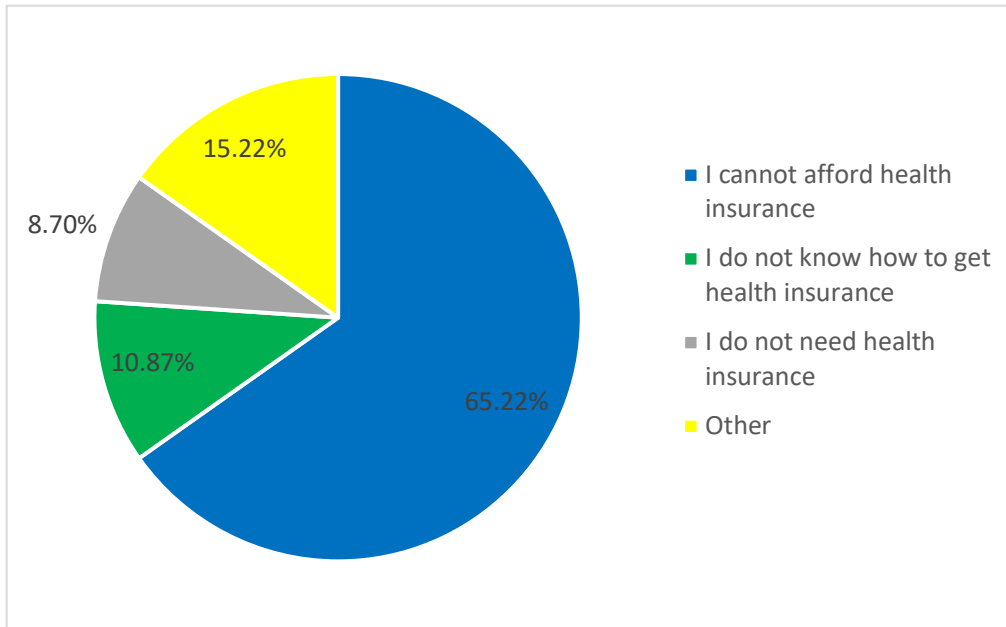


Table 60. Reasons for not having Insurance, Location

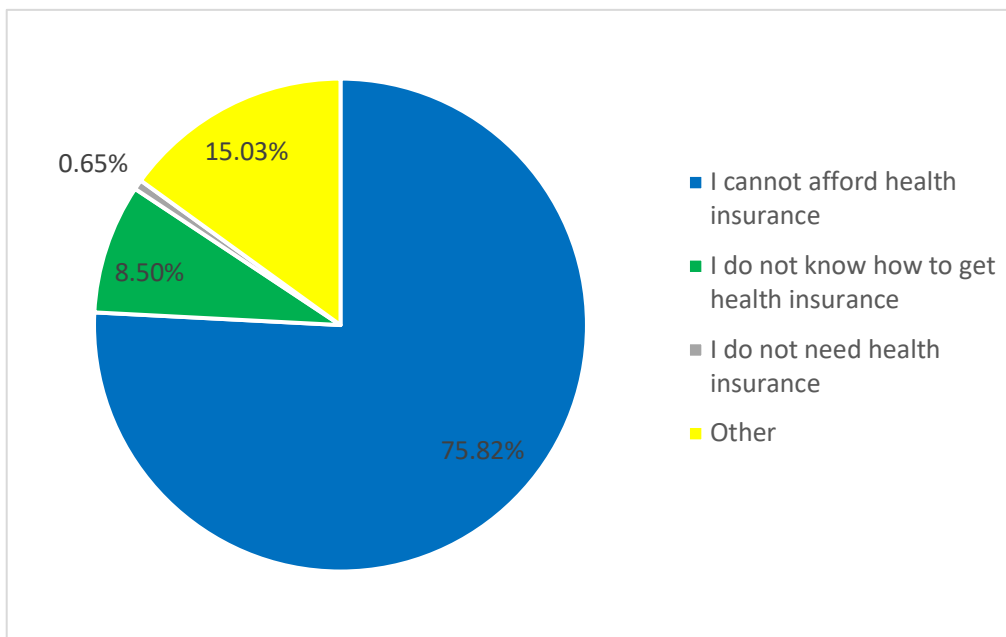
A. Newark

	Freq.	Percent
I cannot afford health insurance	30	65.22
I do not know how to get health insurance	5	10.87
I do not need health insurance	4	8.7
Other	7	15.22
Total	46	100



B. Other Cities

	Freq.	Percent
I cannot afford health insurance	116	75.82
I do not know how to get health insurance	13	8.5
I do not need health insurance	1	0.65
Other	23	15.03
Total	153	100



Section 10: Medical Conditions and Medical Care

Consistent with the top health issues in community, high blood pressure, high cholesterol, obesity, and diabetes are among the medical conditions most reported by Essex County residents. Notably, a significantly higher percentage of African Americans (60.33%) report having high blood pressure, as compared to other racial groups (39.70% for White and 40.86% for other). Likewise, more Newark residents (54.88%) report having high blood pressure than residents of all other cities in the county (42.24%).

10.1. Types of Medical Conditions

Table 61. Medical Conditions by Total Population

	Freq.	Percent out of total respondents (N=7,399)
High blood pressure	3,207	43.34
High cholesterol	3,061	41.37
Obesity	2,001	27.04
Arthritis	1,659	22.42
Diabetes/ pre-diabetes	1,592	21.52
Asthma	1,240	16.76
Cancer	1,093	14.77
Hearing-difficulty	905	12.23
Heart disease	743	10.04
Loss of vision	522	7.06
Stroke	183	2.47
COPD	173	2.34
Lung disease	120	1.62

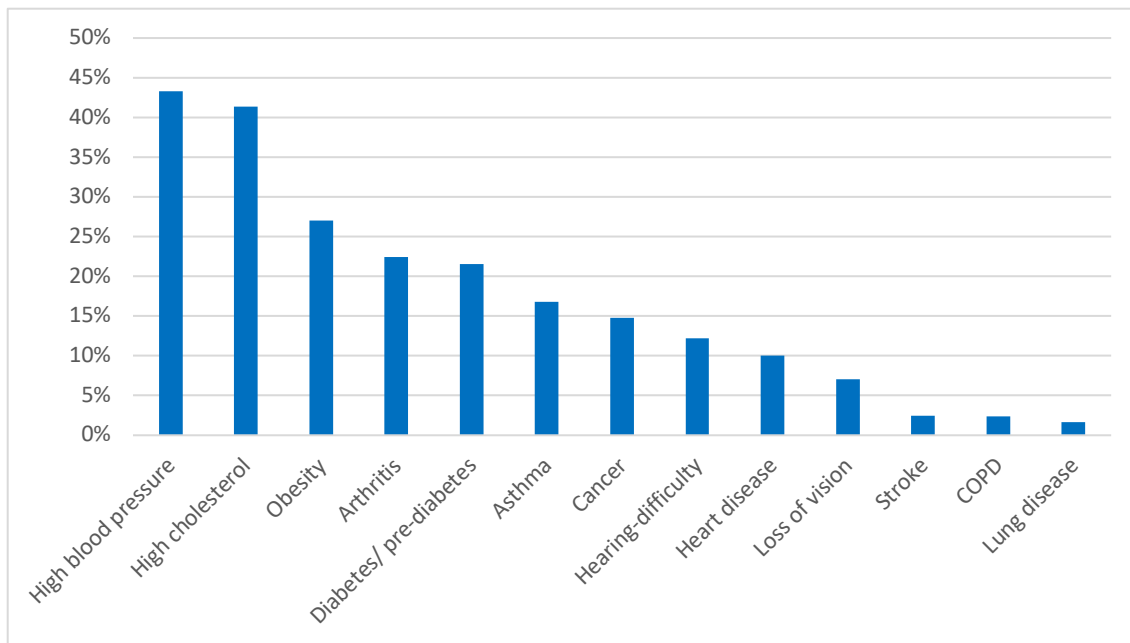
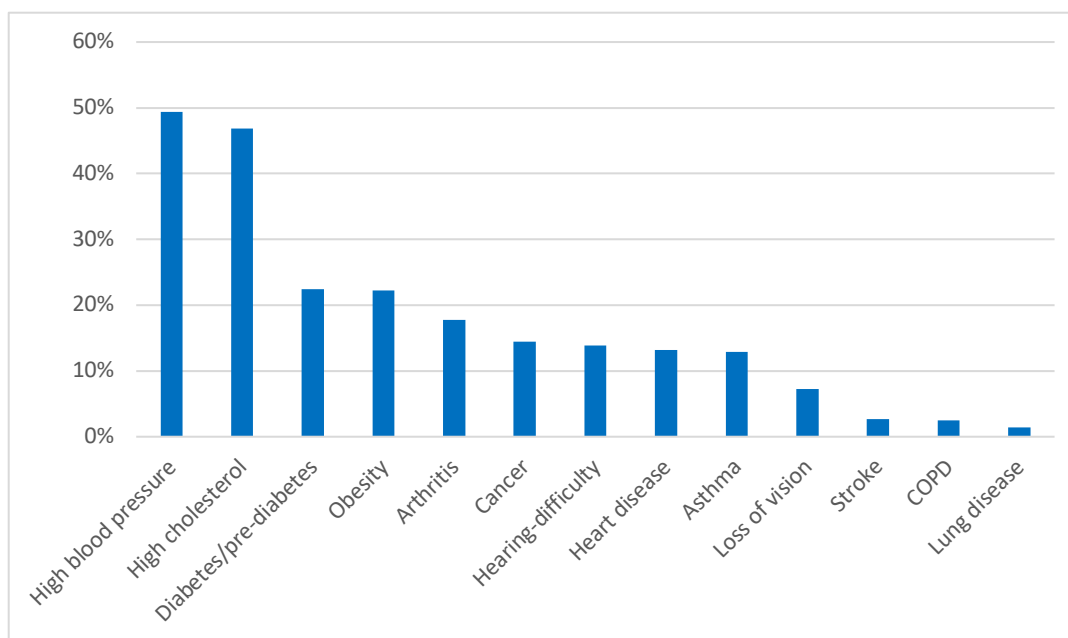


Table 62. Medical Conditions, Gender

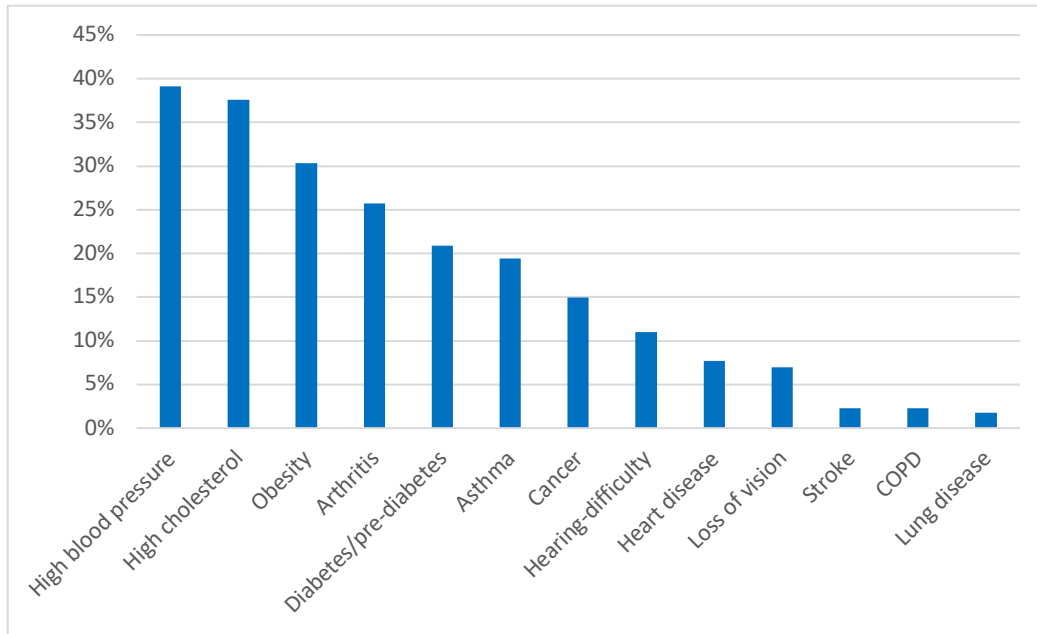
A. Male

	Freq.	Percent out of total respondents (N=3,048)
High blood pressure	1,505	49.38
High cholesterol	1,427	46.82
Diabetes/ pre-diabetes	682	22.38
Obesity	678	22.24
Arthritis	540	17.72
Cancer	439	14.4
Hearing-difficulty	423	13.88
Heart disease	402	13.19
Asthma	393	12.89
Loss of vision	220	7.22
Stroke	82	2.69
COPD	75	2.46
Lung disease	43	1.41



B. Female

	Freq.	Percent out of total respondents (N=4,281)
High blood pressure	1,676	39.15
High cholesterol	1,610	37.61
Obesity	1,298	30.32
Arthritis	1,101	25.72
Diabetes/ pre-diabetes	895	20.91
Asthma	831	19.41
Cancer	640	14.95
Hearing-difficulty	469	10.96
Heart disease	329	7.69
Loss of vision	298	6.96
Stroke	97	2.27
COPD	96	2.24
Lung disease	74	1.73



C. Other (non-binary, other) Participants

	Freq.	Percent out of total respondents (N=39)
Obesity	20	51.28
Asthma	19	48.72
High cholesterol	17	43.59
High blood pressure	15	38.46
Diabetes/ pre-diabetes	15	38.46
Cancer	14	35.9
Arthritis	13	33.33
Heart disease	12	30.77
Stroke	10	25.64
Hearing-difficulty	10	25.64
Loss of vision	10	25.64
Lung disease	9	23.08
COPD	8	20.51

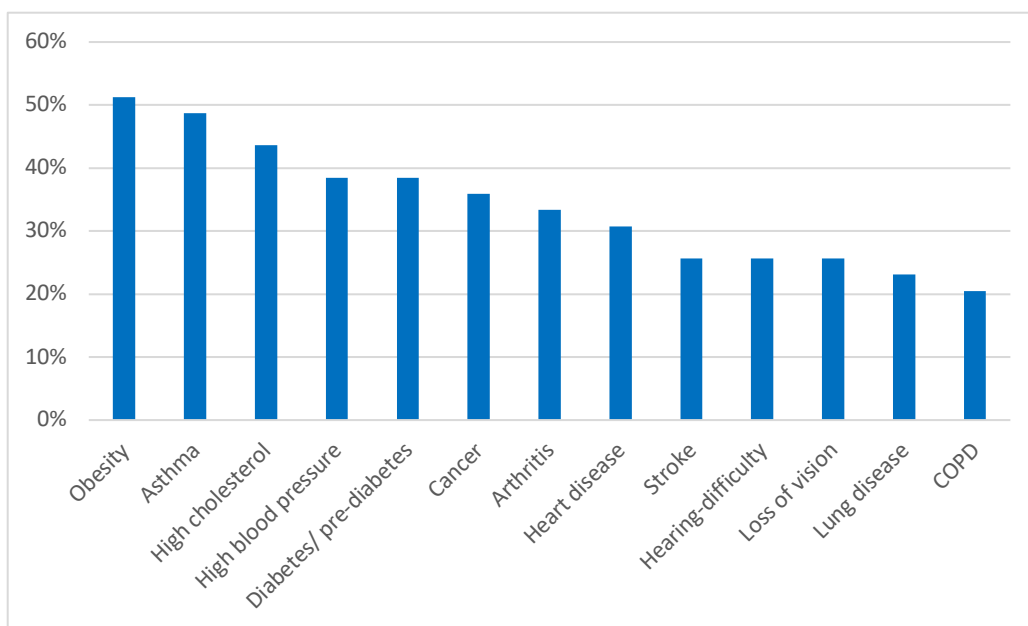
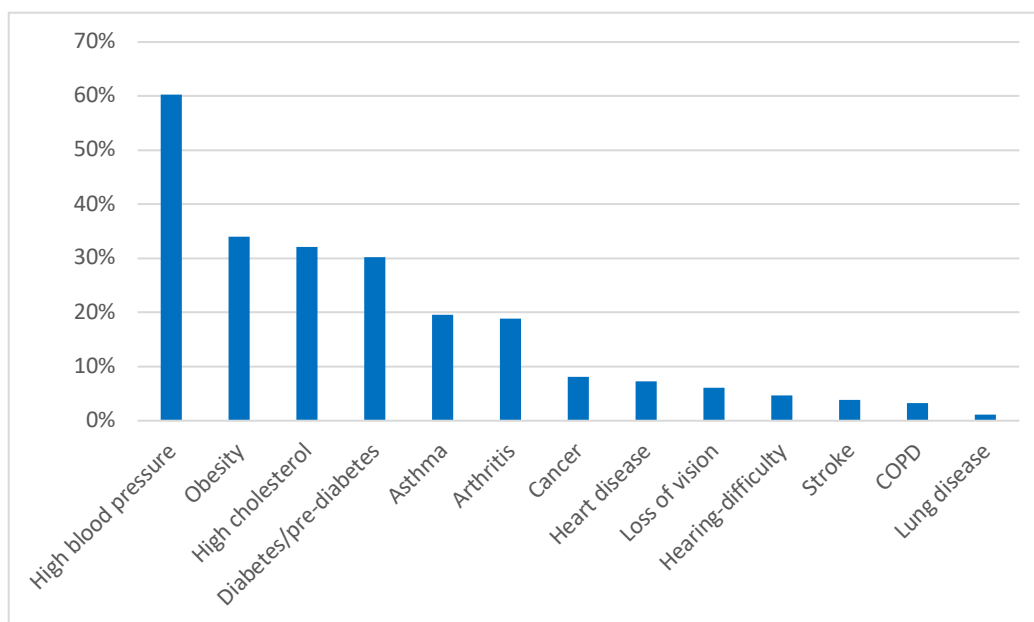


Table 63. Medical Conditions by Race

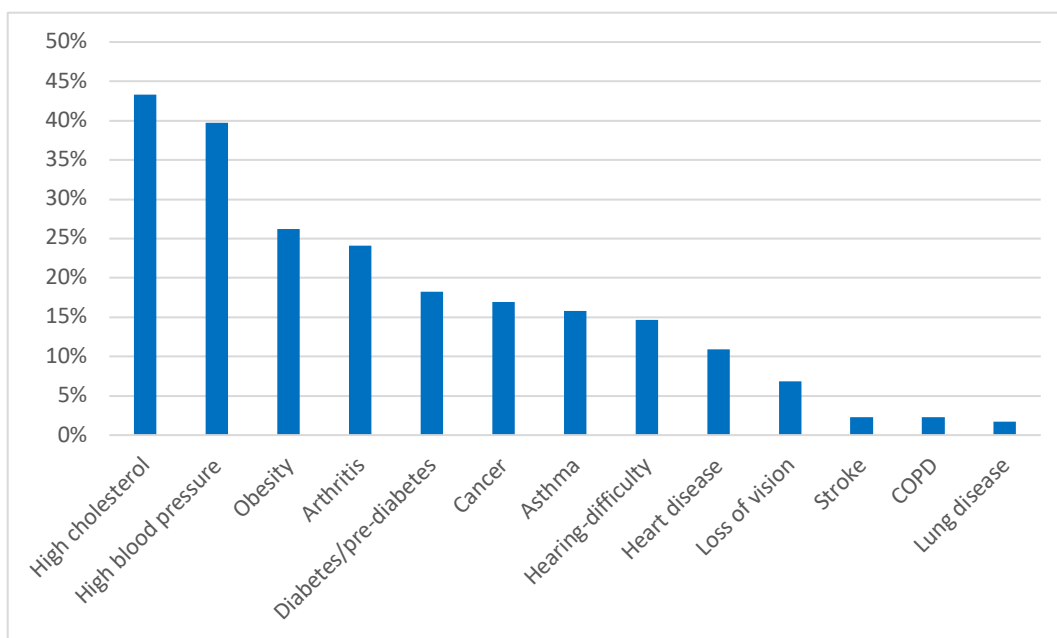
A. Black Participants

	Freq.	Percent out of total respondents (N=1,205)
High blood pressure	727	60.33
Obesity	410	34.02
High cholesterol	387	32.12
Diabetes/ pre-diabetes	364	30.21
Asthma	236	19.59
Arthritis	228	18.92
Cancer	98	8.13
Heart disease	88	7.3
Loss of vision	74	6.14
Hearing-difficulty	56	4.65
Stroke	46	3.82
COPD	39	3.24
Lung disease	14	1.16



B. White Participants

	Freq.	Percent out of total respondents (N=5,259)
High cholesterol	2,282	43.31
High blood pressure	2,093	39.72
Obesity	1,381	26.21
Arthritis	1,271	24.12
Diabetes/ pre-diabetes	959	18.2
Cancer	894	16.97
Asthma	833	15.81
Hearing-difficulty	771	14.63
Heart disease	577	10.95
Loss of vision	361	6.85
Stroke	120	2.28
COPD	120	2.28
Lung disease	89	1.69



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent out of total respondents (N=881)
High cholesterol	370	42
High blood pressure	360	40.86
Diabetes/ pre-diabetes	262	29.74
Obesity	201	22.81
Asthma	161	18.27
Arthritis	141	16
Cancer	88	9.99
Loss of vision	81	9.19
Heart disease	70	7.95
Hearing-difficulty	68	7.72
Stroke	17	1.93
Lung disease	17	1.93
COPD	12	1.36

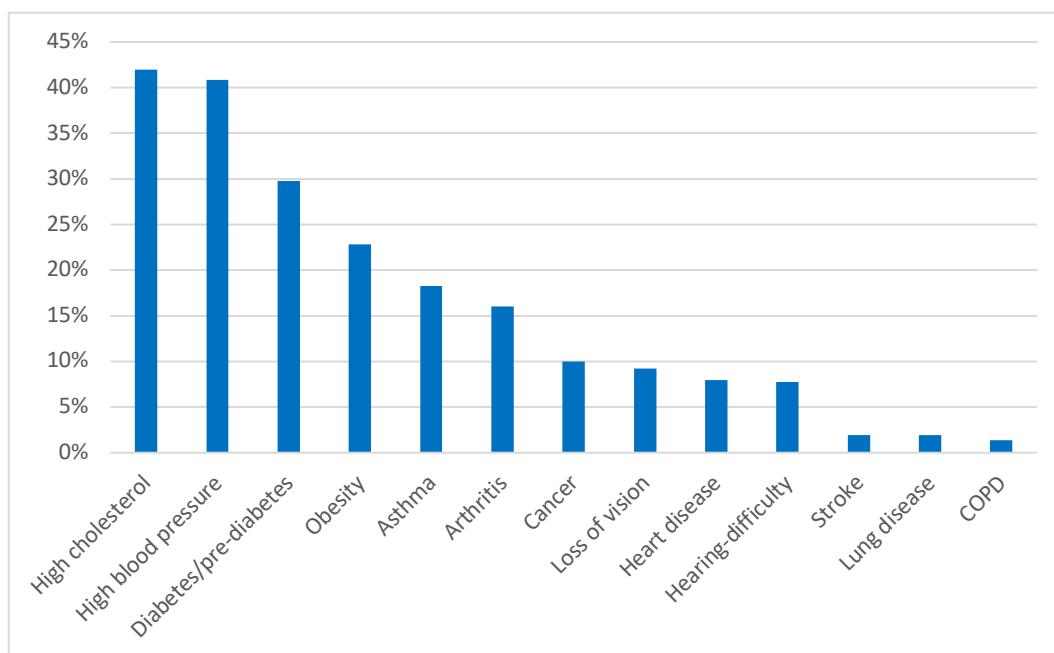
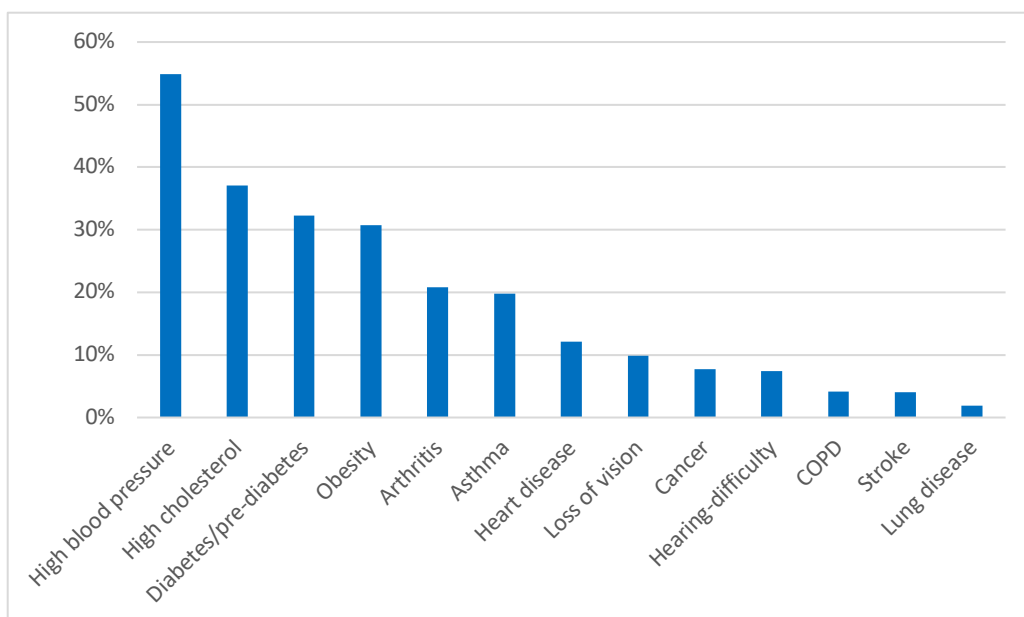


Table 64. Medical Conditions by Location

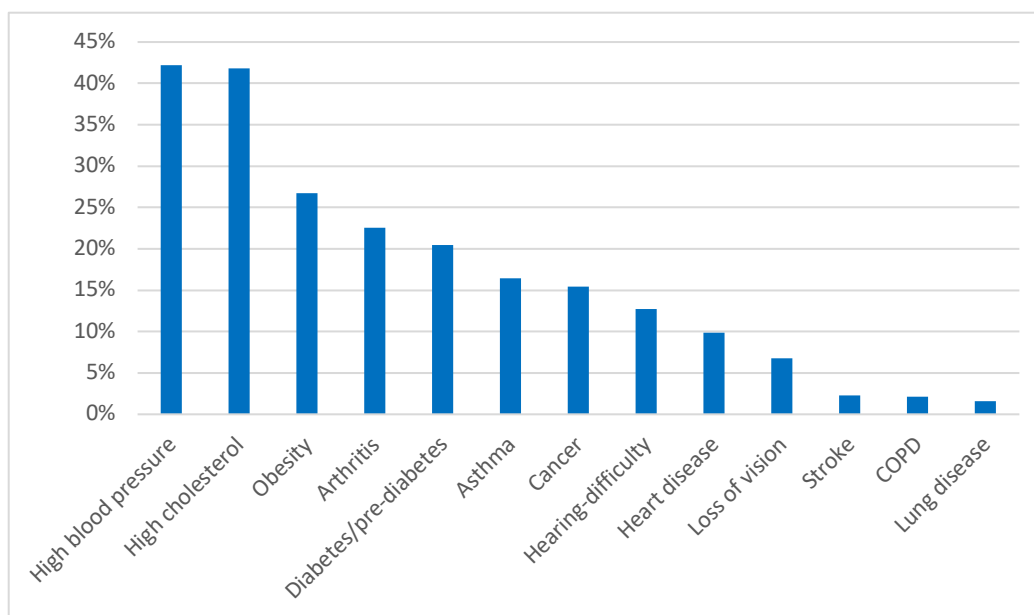
A. Newark

	Freq.	Percent out of total respondents (N=645)
High blood pressure	354	54.88
High cholesterol	239	37.05
Diabetes/ pre-diabetes	208	32.25
Obesity	198	30.7
Arthritis	134	20.78
Asthma	128	19.84
Heart disease	78	12.09
Loss of vision	64	9.92
Cancer	50	7.75
Hearing-difficulty	48	7.44
COPD	27	4.19
Stroke	26	4.03
Lung disease	12	1.86



B. Other Cities

	Freq.	Percent out of total respondents (N=6,754)
High blood pressure	2,853	42.24
High cholesterol	2,822	41.78
Obesity	1,803	26.7
Arthritis	1,525	22.58
Diabetes/ pre-diabetes	1,384	20.49
Asthma	1,112	16.46
Cancer	1,043	15.44
Hearing-difficulty	857	12.69
Heart disease	665	9.85
Loss of vision	458	6.78
Stroke	157	2.32
COPD	146	2.16
Lung disease	108	1.6



10.2. Source of Medical Care

While only 1.7% Essex County residents seek medical care from emergency departments, more residents seek medical care from a Doctor's office or urgent care center. However, more Newark residents seek medical care from emergency departments (8.41%), as compared to 1.13% of other cities.

Table 65. Location for Medical Care by Total population

	Freq.	Percent
Doctor's office	8,574	77.33
Urgent care	1,697	15.3
Emergency Departments	188	1.7
Health Department	40	0.36
I do not seek medical attention	452	4.08
Other	137	1.24
Total	11,088	100

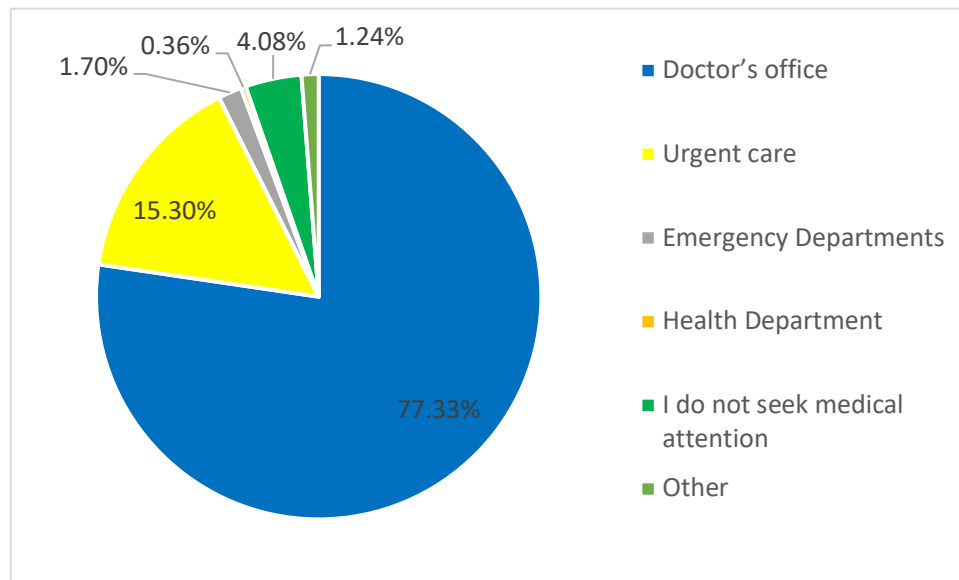
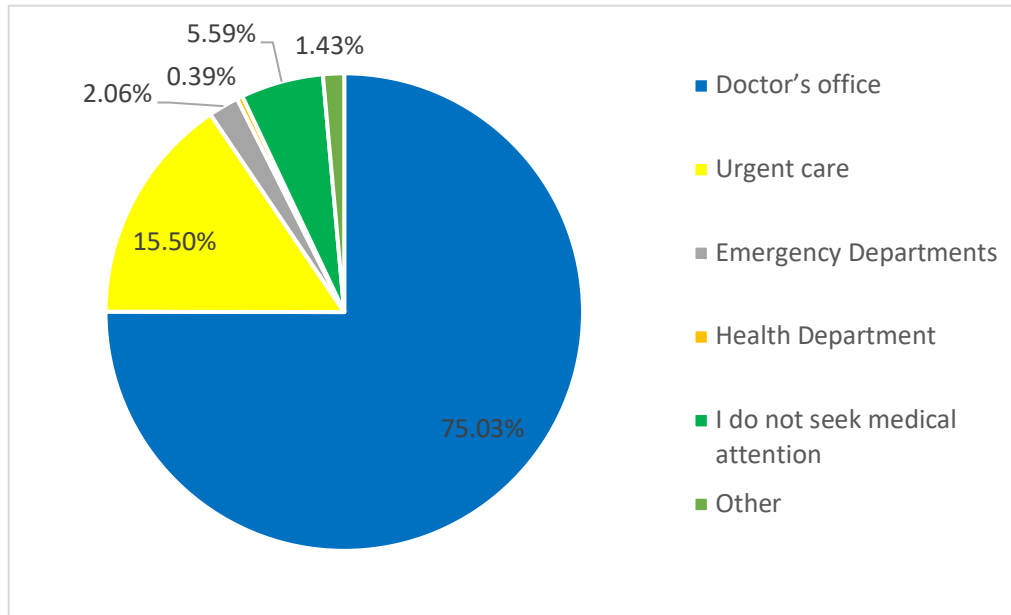


Table 66. Location for Medical Care by Gender

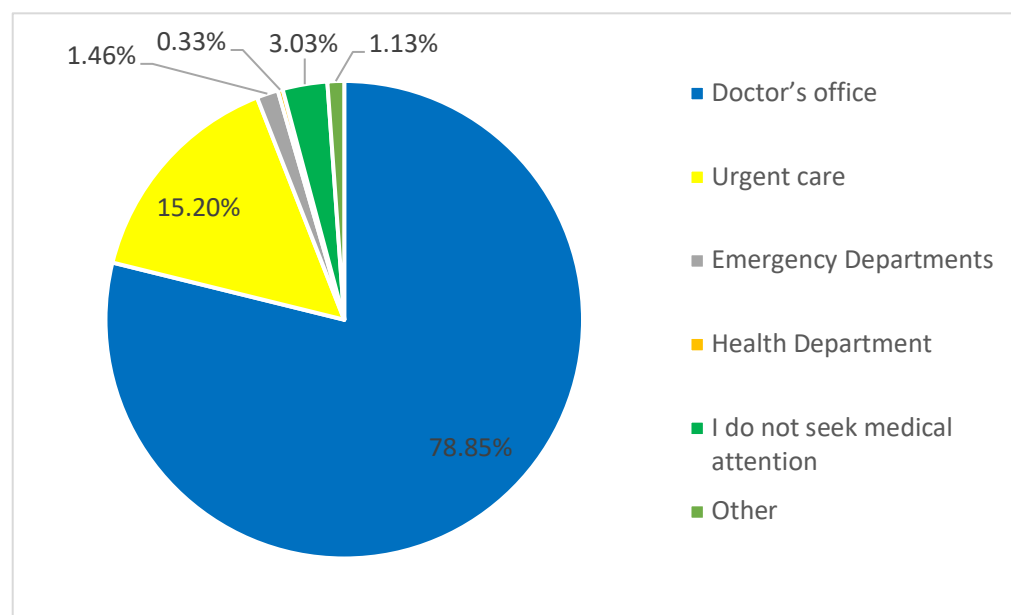
A. Male Participants

	Freq.	Percent
Doctor's office	3,248	75.03
Urgent care	671	15.5
Emergency Departments	89	2.06
Health Department	17	0.39
I do not seek medical attention	242	5.59
Other	62	1.43
Total	4,329	100



B. Female Participants

	Freq.	Percent
Doctor's office	5,239	78.85
Urgent care	1,010	15.2
Emergency Departments	97	1.46
Health Department	22	0.33
I do not seek medical attention	201	3.03
Other	75	1.13
Total	6,644	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Doctor's office	51	64.56
Urgent care	16	20.25
Emergency Departments	2	2.53
Health Department	1	1.27
I do not seek medical attention	9	11.39
Other	0	0
Total	79	100

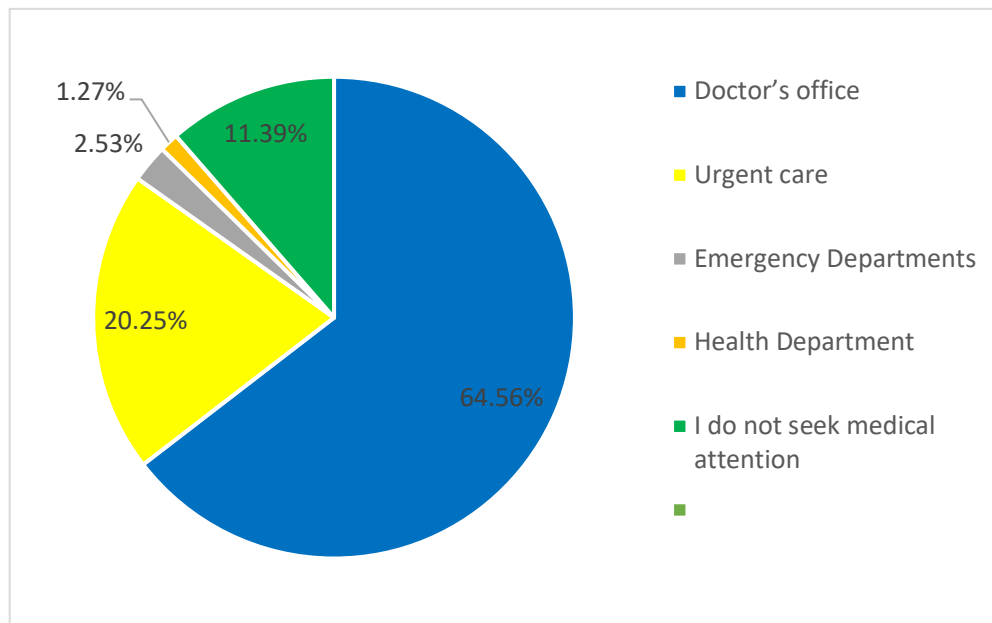
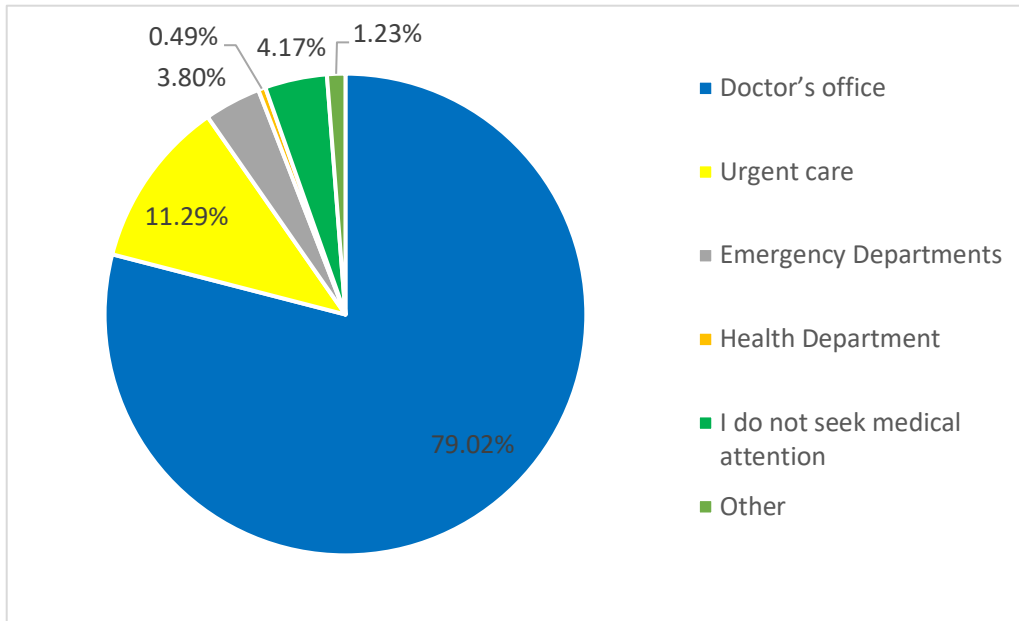


Table 67. Location for Medical Care by Race

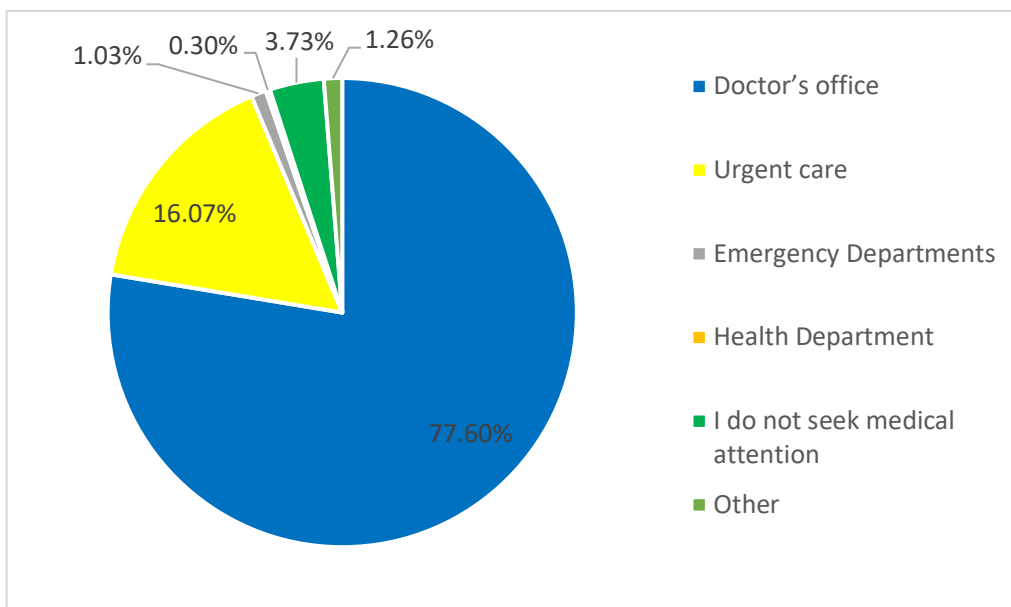
A. Black Participants

	Freq.	Percent
Doctor's office	1,288	79.02
Urgent care	184	11.29
Emergency Departments	62	3.8
Health Department	8	0.49
I do not seek medical attention	68	4.17
Other	20	1.23
Total	1,630	100



B. White Participants

	Freq.	Percent
Doctor's office	6,154	77.6
Urgent care	1,274	16.07
Emergency Departments	82	1.03
Health Department	24	0.3
I do not seek medical attention	296	3.73
Other	100	1.26
Total	7,930	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Doctor's office	1,071	73.96
Urgent care	222	15.33
Emergency Departments	43	2.97
Health Department	8	0.55
I do not seek medical attention	87	6.01
Other	17	1.17
Total	1,448	100

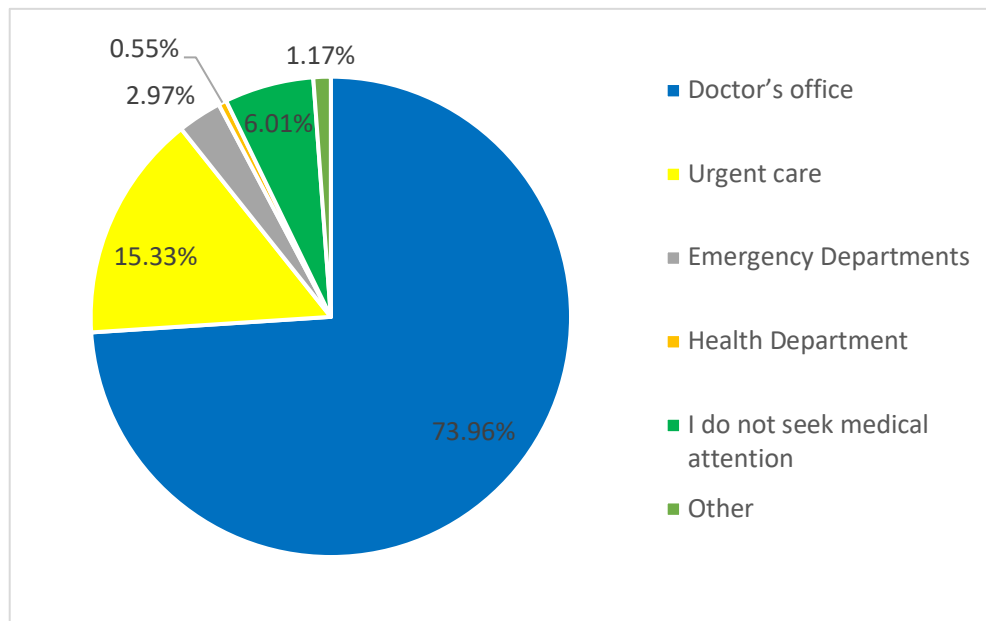
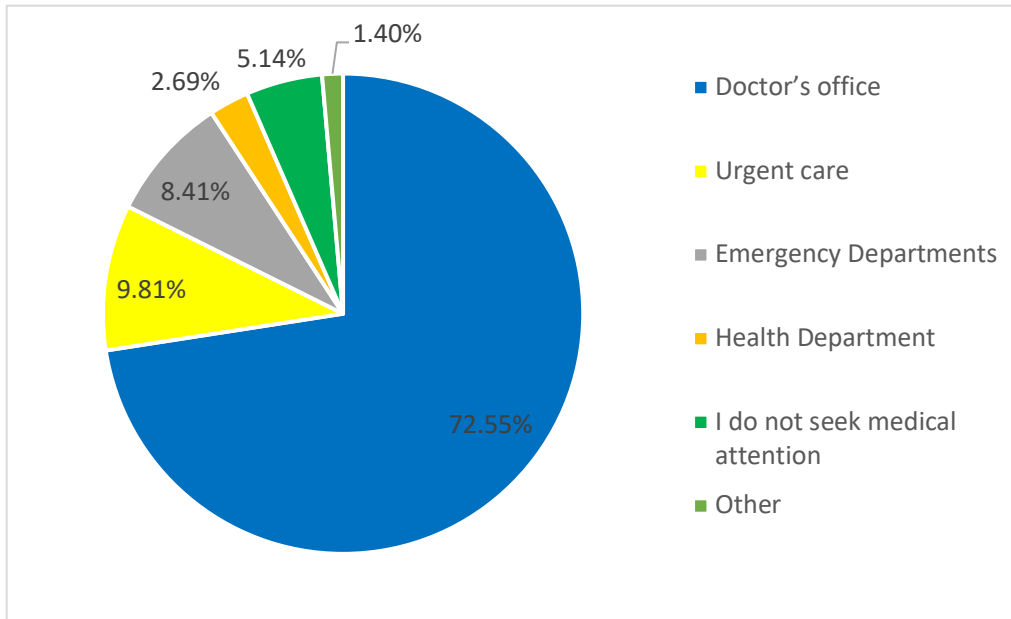


Table 68. Location for Medical Care by Location

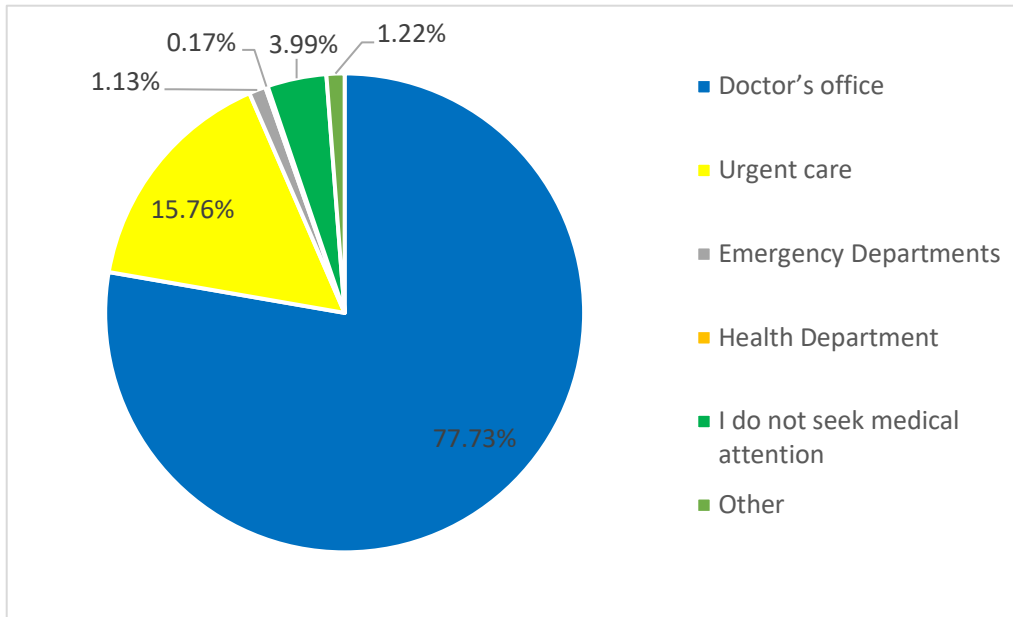
A. Newark

	Freq.	Percent
Doctor's office	621	72.55
Urgent care	84	9.81
Emergency Departments	72	8.41
Health Department	23	2.69
I do not seek medical attention	44	5.14
Other	12	1.4
Total	856	100



B. Other Cities

	Freq.	Percent
Doctor's office	7,953	77.73
Urgent care	1,613	15.76
Emergency Departments	116	1.13
Health Department	17	0.17
I do not seek medical attention	408	3.99
Other	125	1.22
Total	10,232	100



10.3. History of Checkup/Wellness Visits

Over seventy percent of residents in Essex County had their wellness checkup or visits within the last year.

Table 69. Frequency of Checkups/Wellness Visits, Total population

	Freq.	Percent
Within the last year	8,210	73.93
1-2 years ago	1,812	16.32
3-5 years ago	697	6.28
5 or more years ago	347	3.12
I have never been to the doctor for a checkup	39	0.35
Total	11,105	100

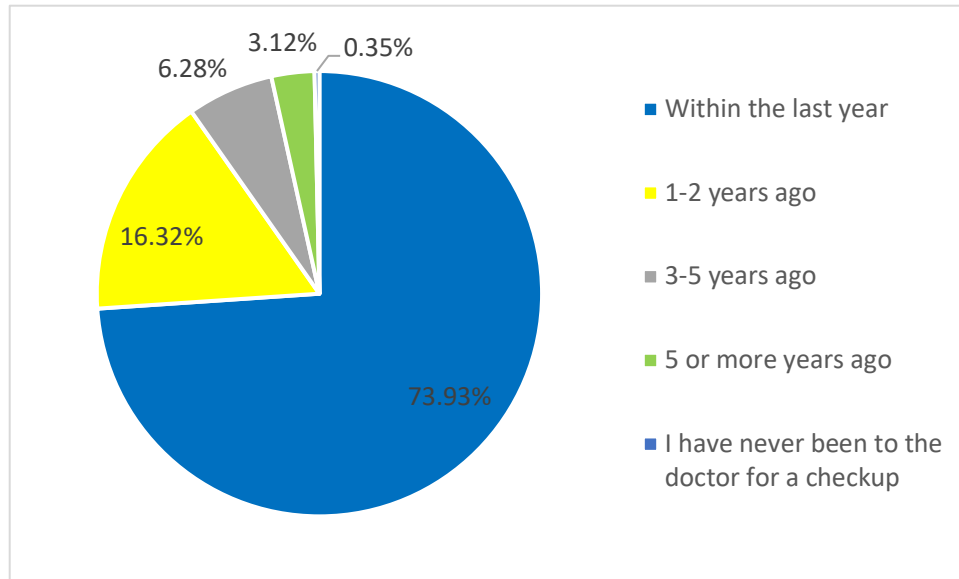
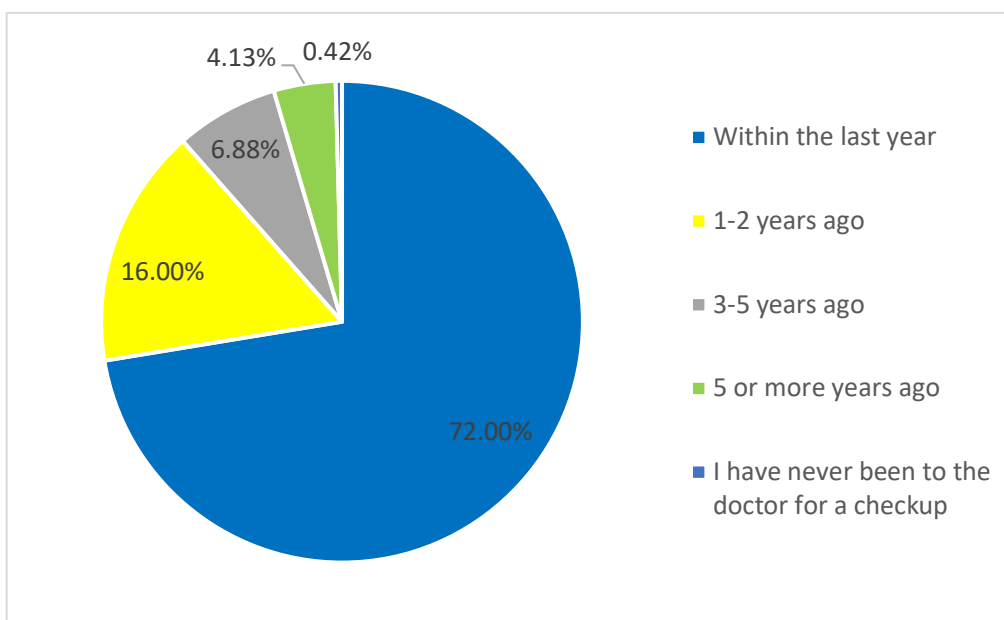


Table 70. Frequency of Checkups/Wellness Visits by Gender

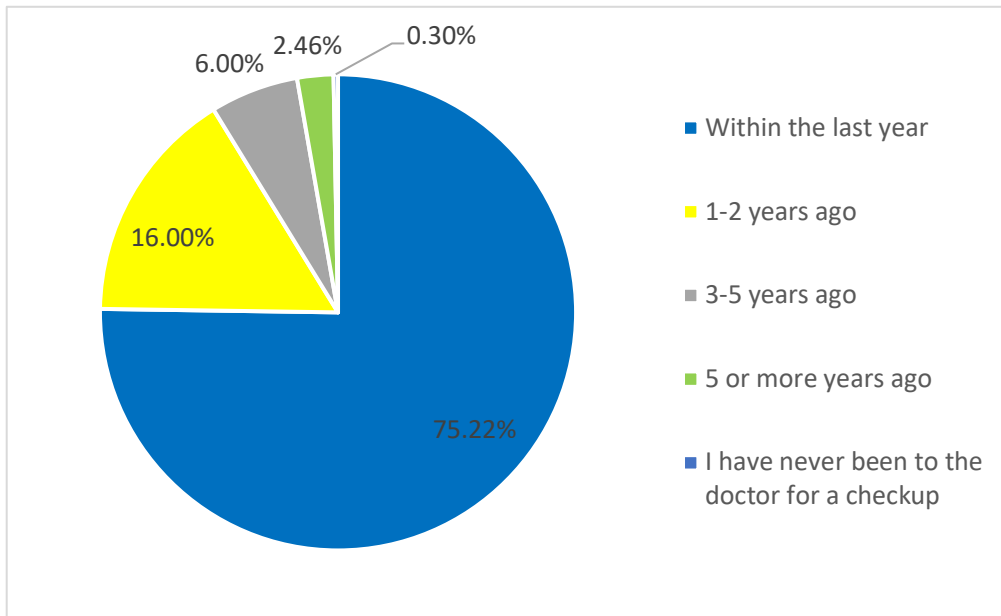
A. Male Participants

	Freq.	Percent
Within the last year	3,128	72
1-2 years ago	709	16
3-5 years ago	298	6.88
5 or more years ago	179	4.13
I have never been to the doctor for a checkup	18	0.42
Total	4,332	100



B. Female Participants

	Freq.	Percent
Within the last year	5,006	75.22
1-2 years ago	1,077	16
3-5 years ago	388	6
5 or more years ago	164	2.46
I have never been to the doctor for a checkup	20	0.3
Total	6,655	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Within the last year	47	59.49
1-2 years ago	21	26.58
3-5 years ago	8	10.13
5 or more years ago	2	2.53
I have never been to the doctor for a checkup	1	1.27
Total	79	100

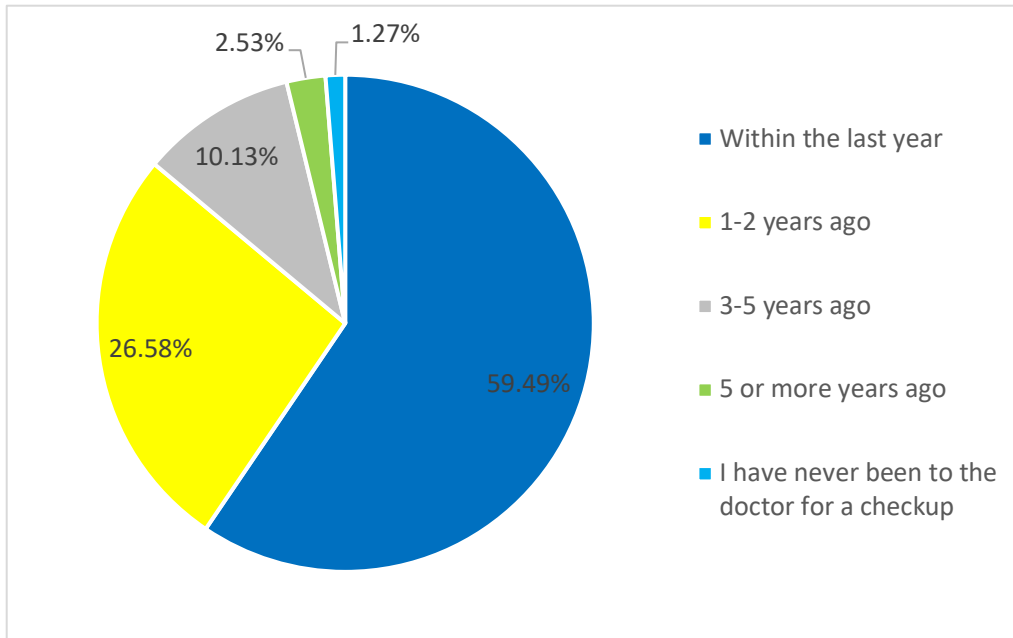
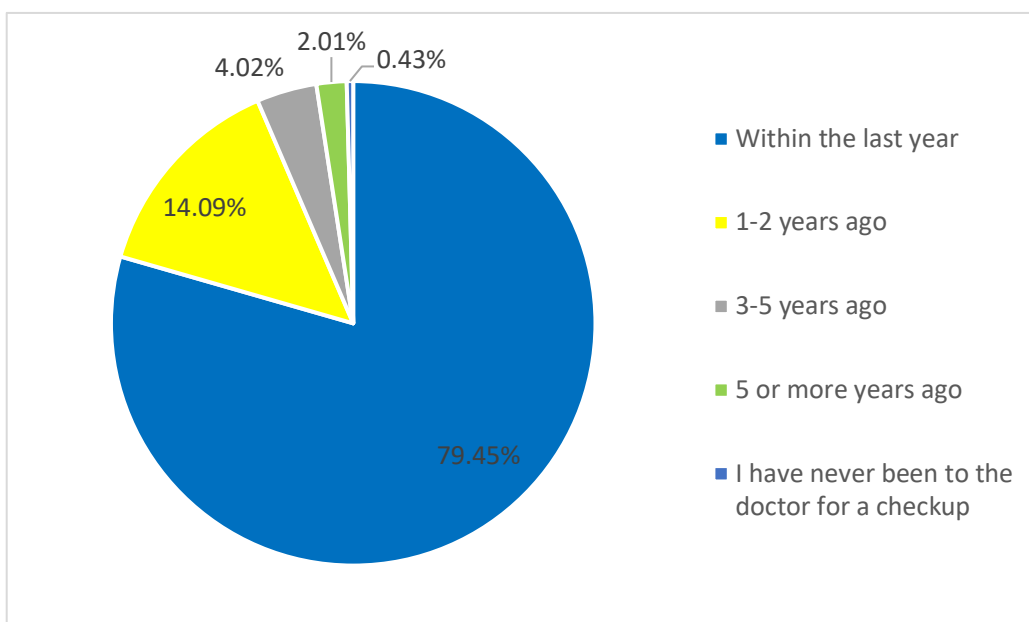


Table 71. Frequency of Checkups/Wellness Visits by Race

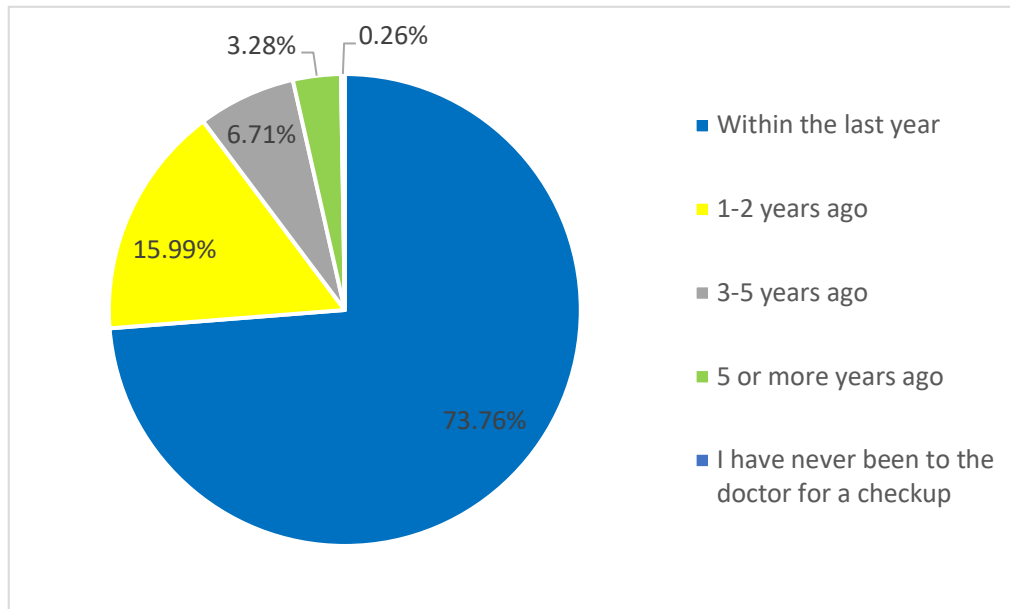
A. Black Participants

	Freq.	Percent
Within the last year	1,303	79.45
1-2 years ago	231	14.09
3-5 years ago	66	4.02
5 or more years ago	33	2.01
I have never been to the doctor for a checkup	7	0.43
Total	1,640	100



B. White Participants

	Freq.	Percent
Within the last year	5,852	73.76
1-2 years ago	1,269	15.99
3-5 years ago	532	6.71
5 or more years ago	260	3.28
I have never been to the doctor for a checkup	21	0.26
Total	7,934	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Within the last year	1,001	68.99
1-2 years ago	296	20.4
3-5 years ago	95	6.55
5 or more years ago	48	3.31
I have never been to the doctor for a checkup	11	0.76
Total	1,451	100

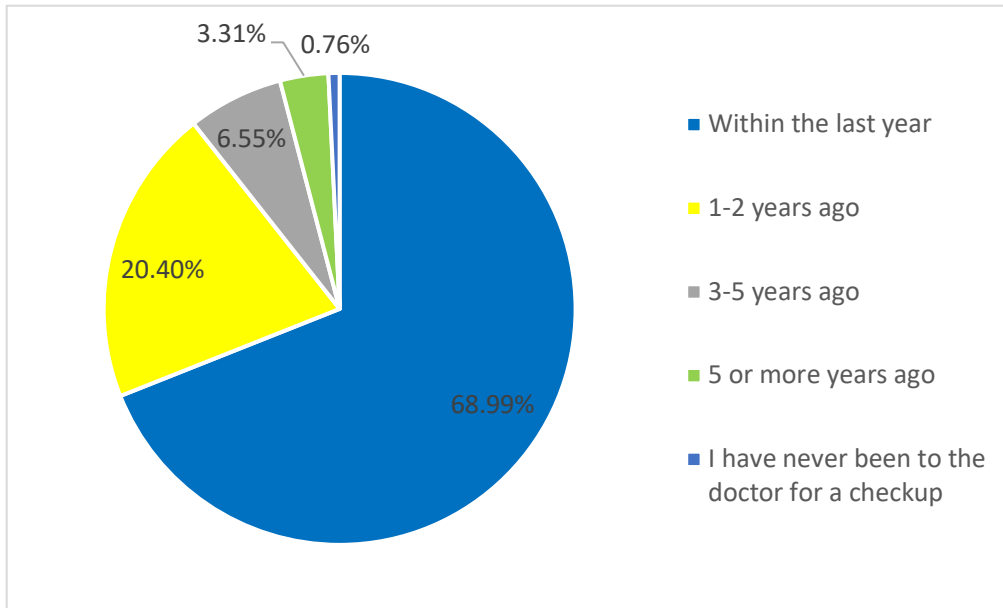
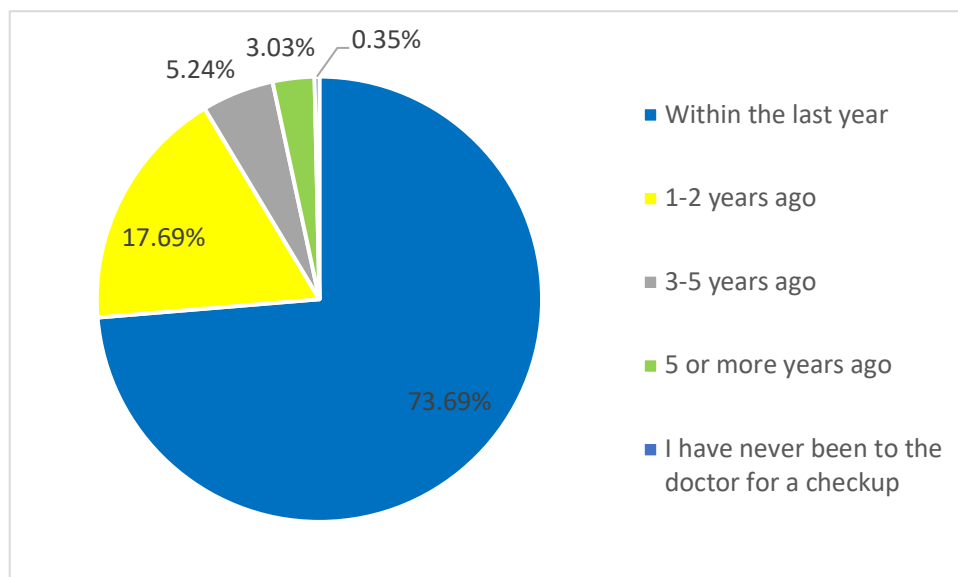


Table 72. Frequency of Checkups/Wellness Visits by Location

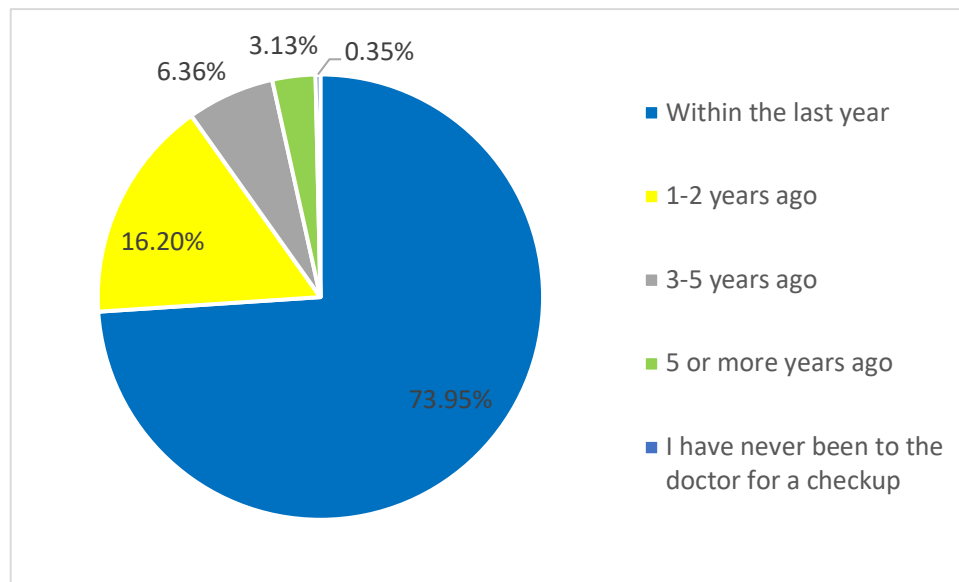
A. Newark Participants

	Freq.	Percent
Within the last year	633	73.69
1-2 years ago	152	17.69
3-5 years ago	45	5.24
5 or more years ago	26	3.03
I have never been to the doctor for a checkup	3	0.35
Total	859	100



B. Other Cities

	Freq.	Percent
Within the last year	7,577	73.95
1-2 years ago	1,660	16.2
3-5 years ago	652	6.36
5 or more years ago	321	3.13
I have never been to the doctor for a checkup	36	0.35
Total	10,246	100



a. Impact of COVID-19 on Wellness Checkups

Less than half of the residents believe COVID-19 has had an impact on their wellness visit scheduling.

Table 73. COVID-19 Impact on Scheduling a Wellness Visit by Total population

	Freq.	Percent
Yes	4,939	44.44
No	5,887	53
Not applicable	287	2.58
Total	11,113	100

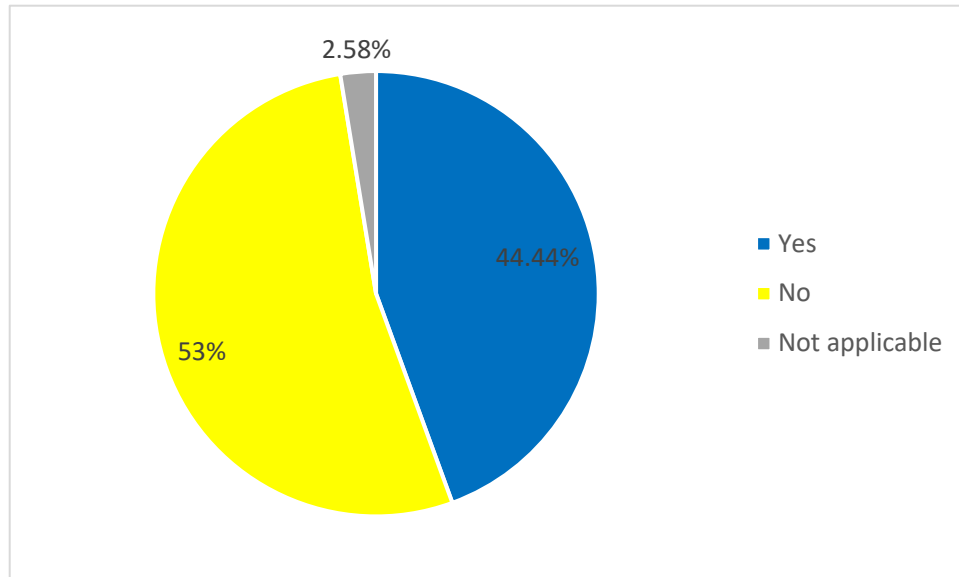
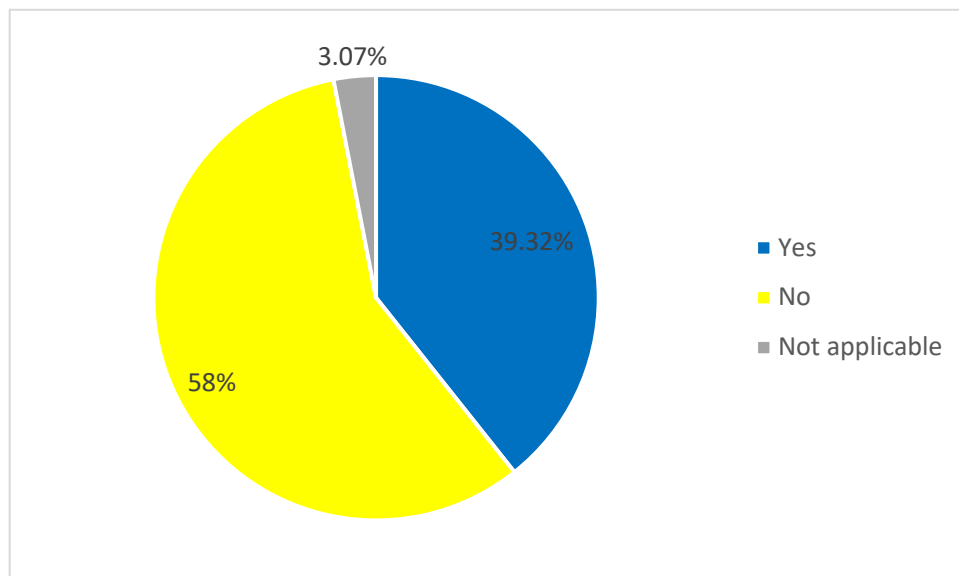


Table 74. COVID-19 Impact on Scheduling a Wellness Visit by Gender

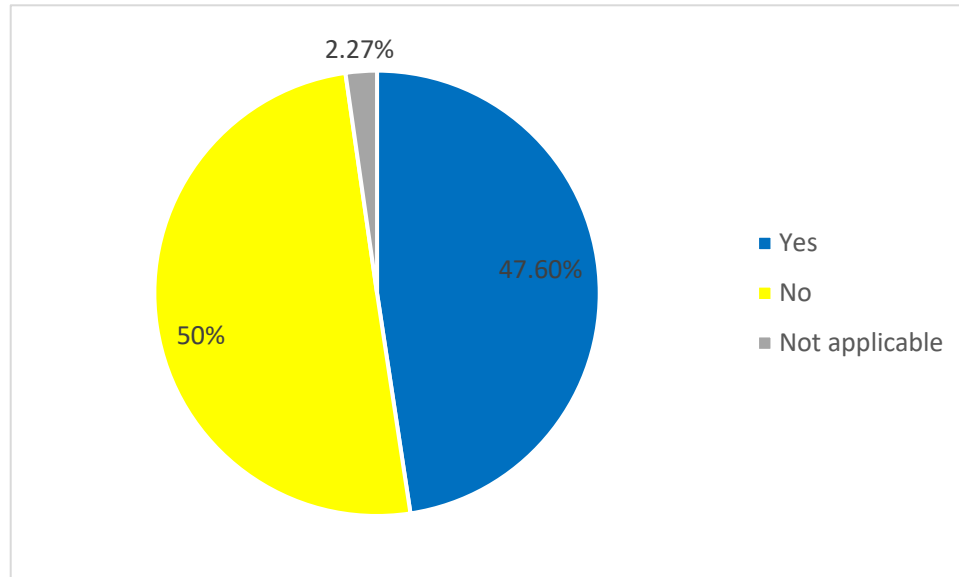
A. Male Participants

	Freq.	Percent
Yes	1,705	39.32
No	2,498	57.61
Not applicable	133	3.07
Total	4,336	100



B. Female Participants

	Freq.	Percent
Yes	3,170	47.6
No	3,338	50.13
Not applicable	151	2.27
Total	6,659	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Yes	46	58.23
No	30	37.97
Not applicable	3	3.80
Total	79	100

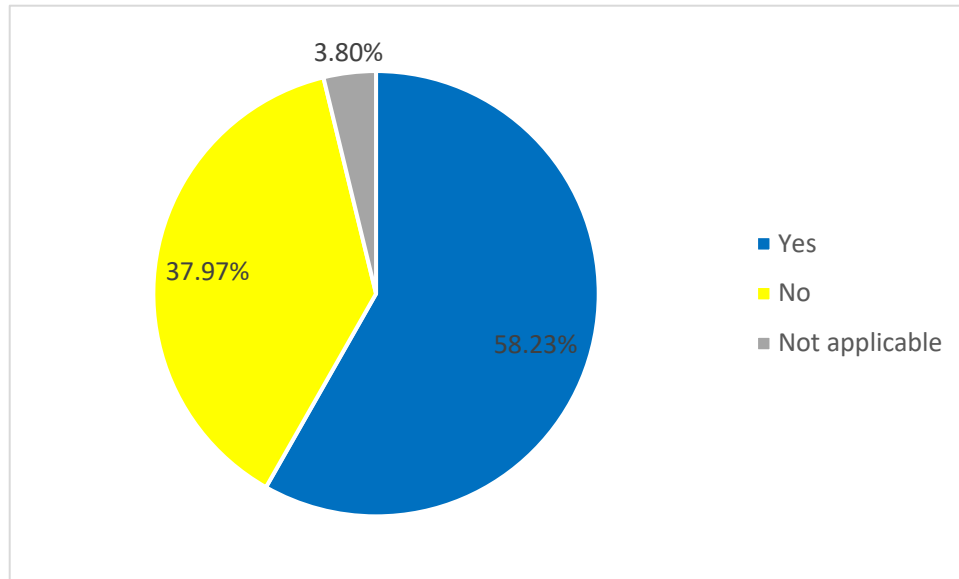
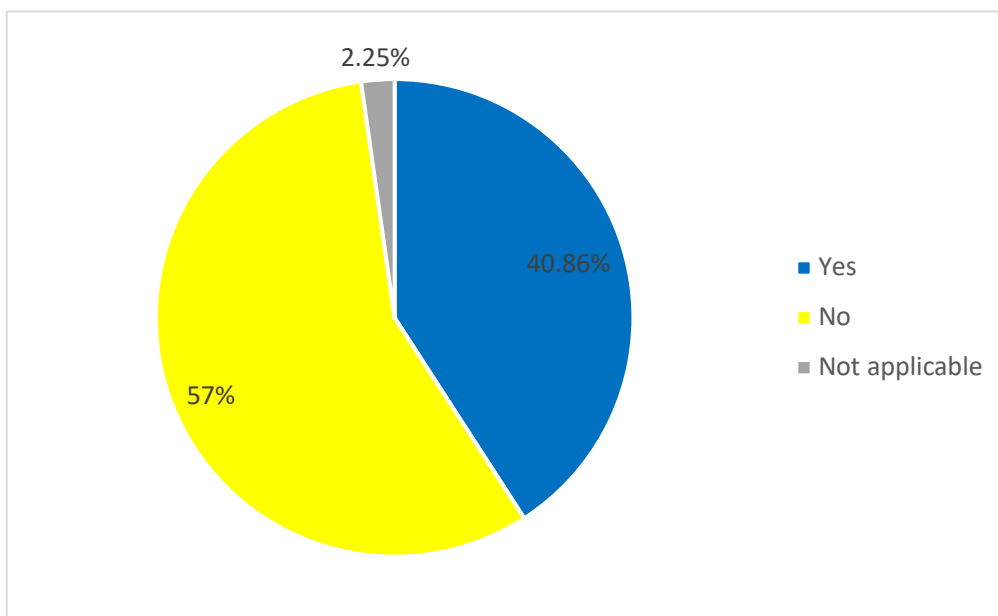


Table 75. COVID-19 Impact on Scheduling a Wellness Visit by Race

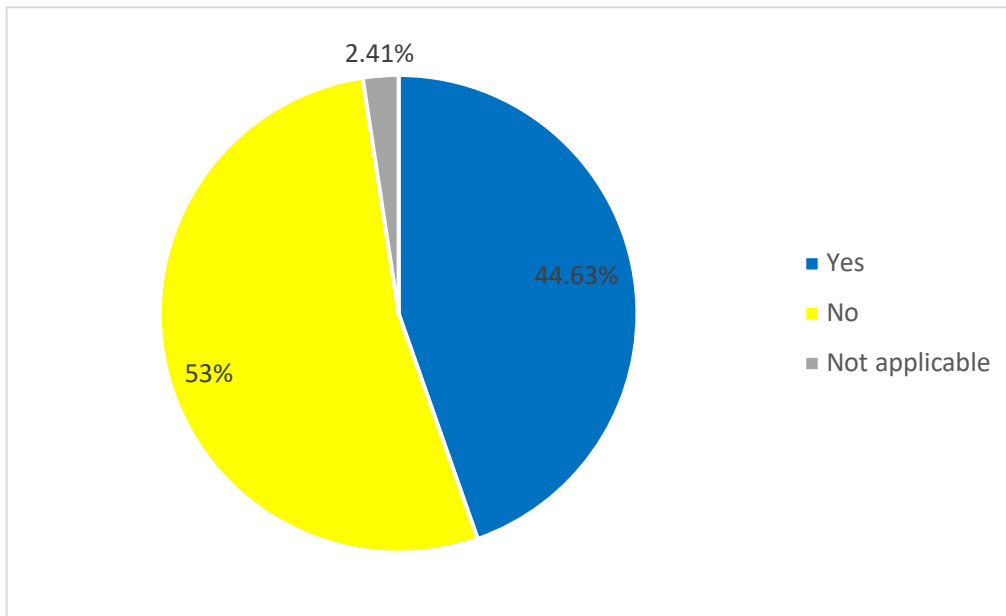
A. Black Participants

	Freq.	Percent
Yes	671	40.86
No	934	56.88
Not applicable	37	2.25
Total	1,642	100



B. White Participants

	Freq.	Percent
Yes	3,541	44.63
No	4,202	52.96
Not applicable	191	2.41
Total	7,934	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Yes	692	47.53
No	707	48.56
Not applicable	57	3.91
Total	1,456	100

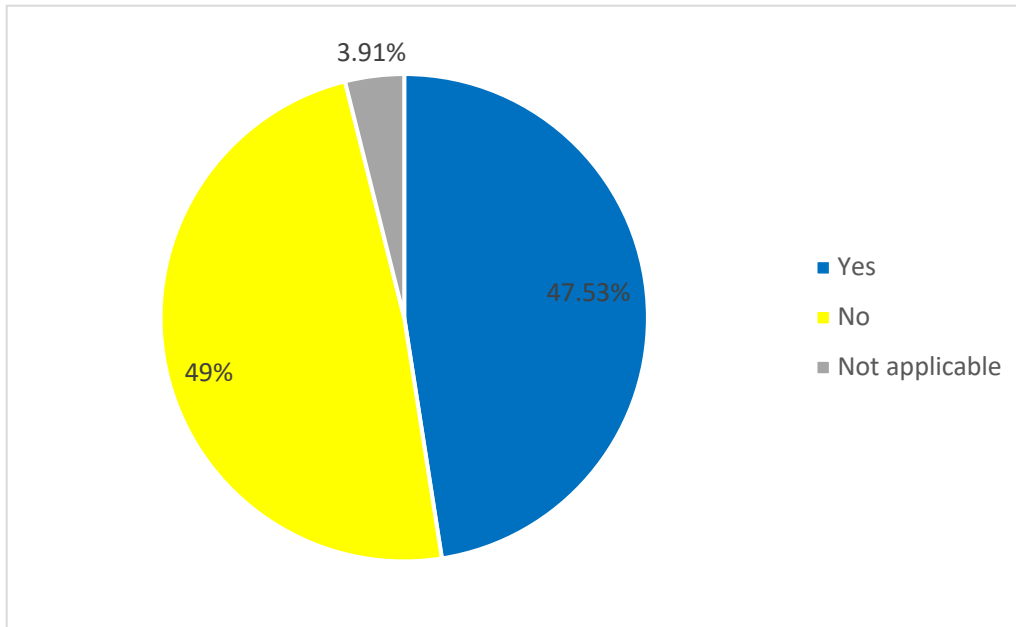
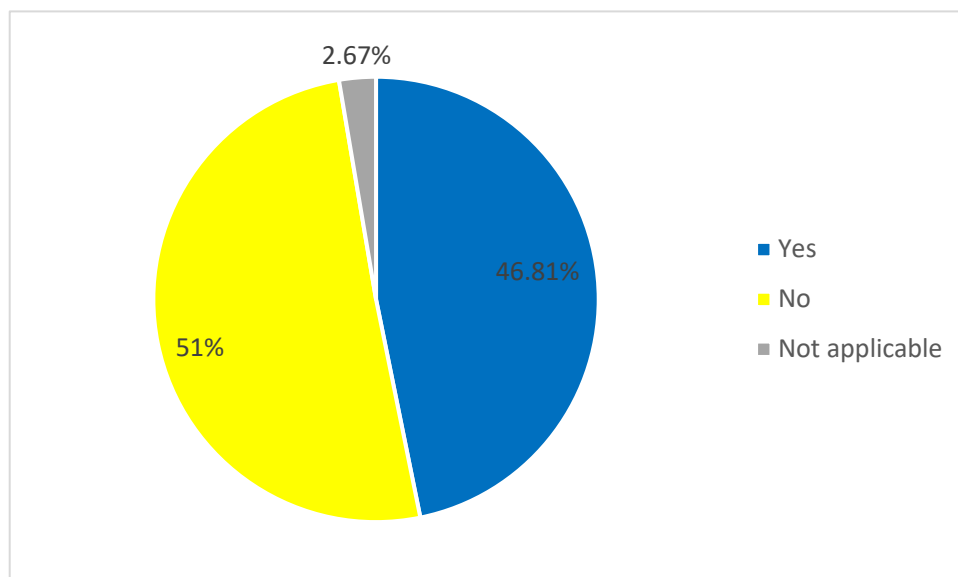


Table 76. COVID-19 Impact on Scheduling a Wellness Visit by Location

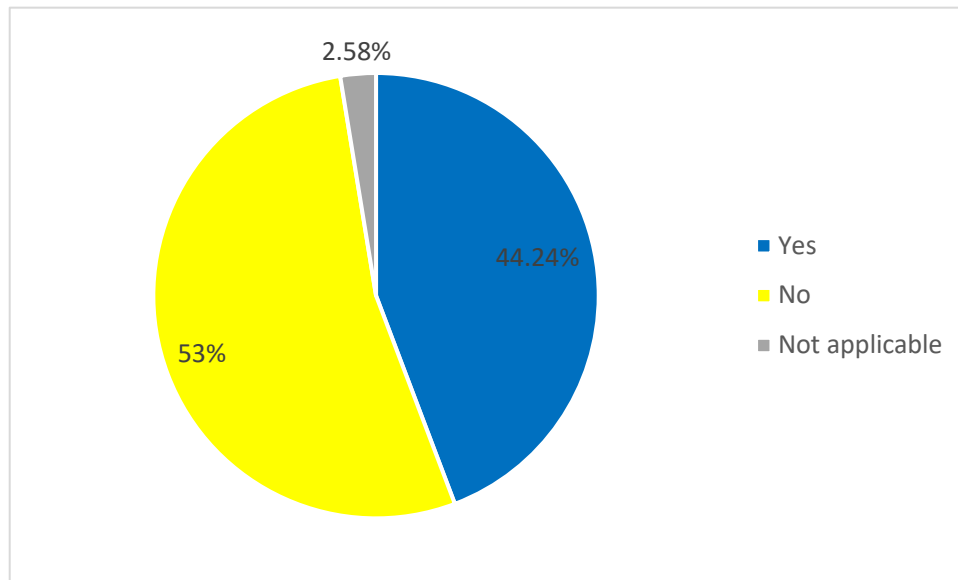
A. Newark Participants

	Freq.	Percent
Yes	404	46.81
No	436	50.52
Not applicable	23	2.67
Total	863	100



B. Other Cities

	Freq.	Percent
Yes	4,535	44.24
No	5,451	53.18
Not applicable	264	2.58
Total	10,250	100



b. Impact of COVID-19 on Medical Care

Similarly, less than half of the resident's report that their medical care has been affected by COVID-19.

Table 77. Impact of COVID on Medical Care by Total population

	Freq.	Percent
Yes	4,939	44.44
No	5,887	52.97
Not applicable	287	2.58
Total	11,113	100

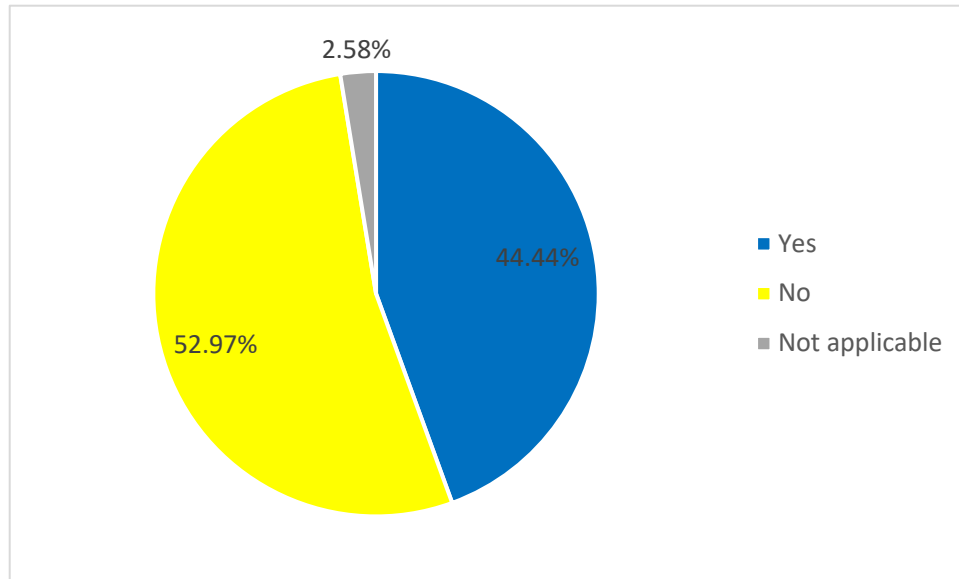
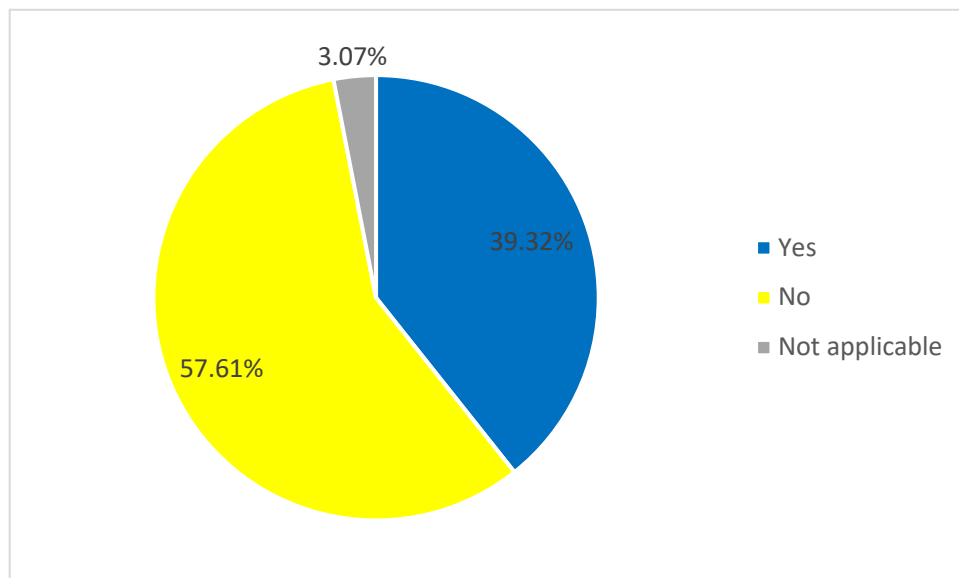


Table 78. Impact of COVID on Medical Care by Gender

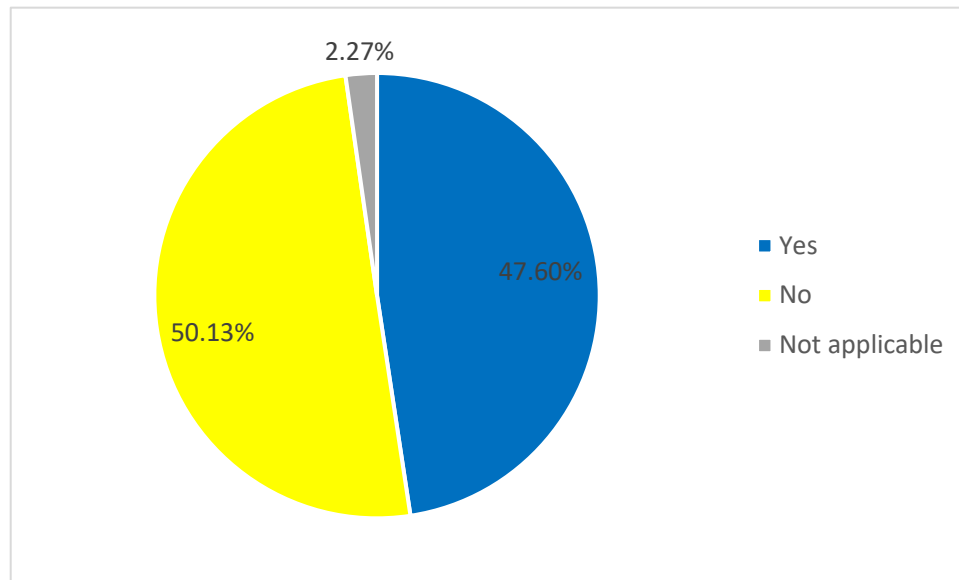
A. Male Participants

	Freq.	Percent
Yes	1,705	39.32
No	2,498	57.61
Not applicable	133	3.07
Total	4,336	100



B. Female Participants

	Freq.	Percent
Yes	3,170	47.6
No	3,338	50.13
Not applicable	151	2.27
Total	6,659	100



C. Other (non-binary, other) Participants

	Freq.	Percent
Yes	18	22.78
No	51	64.56
Not applicable	10	12.66
Total	79	100

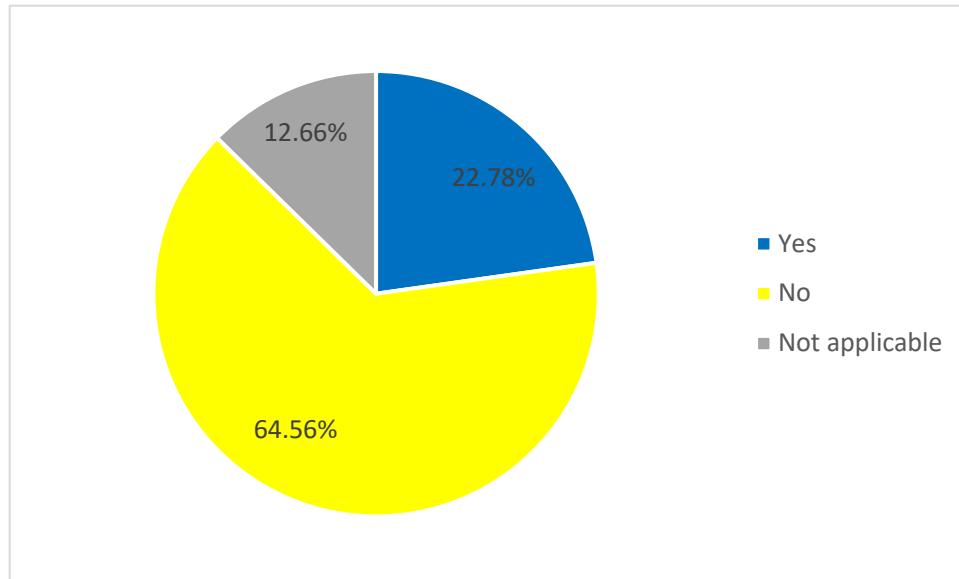
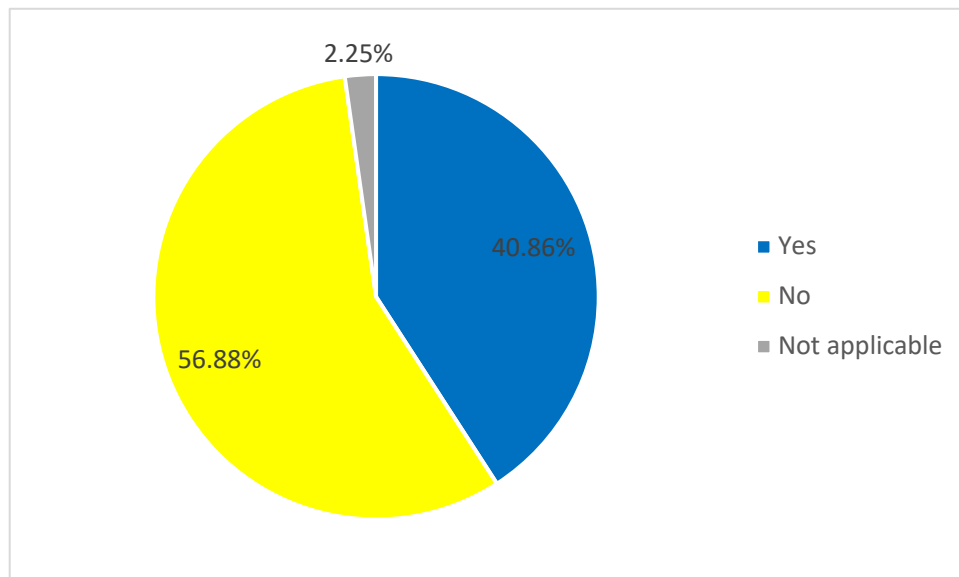


Table 79. Impact of COVID on Medical Care by Race

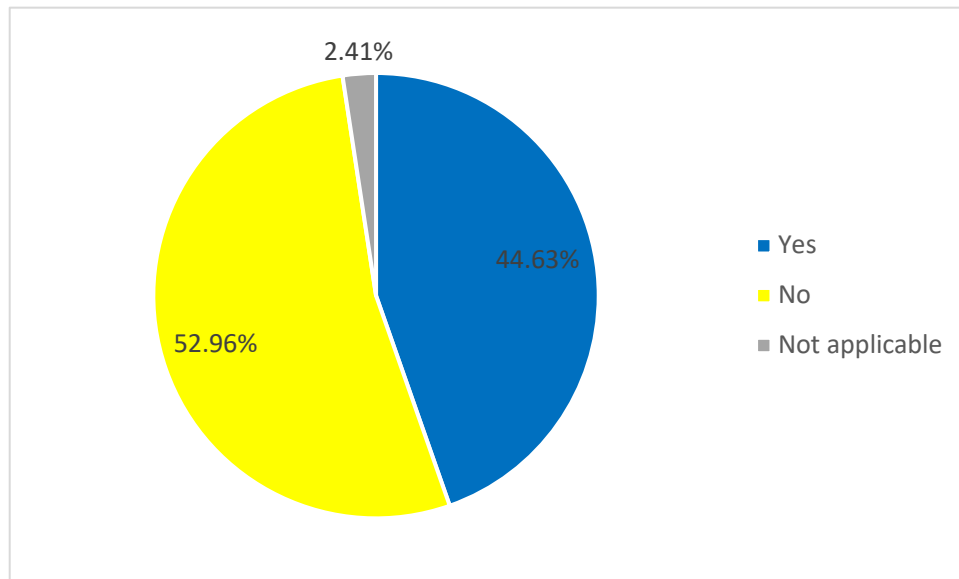
A. Black Participants

	Freq.	Percent
Yes	671	40.86
No	934	56.88
Not applicable	37	2.25
Total	1,642	100



B. White Participants

	Freq.	Percent
Yes	3,541	44.63
No	4,202	52.96
Not applicable	191	2.41
Total	7,934	100



C. Other (including Hispanic/Latino) Participants

	Freq.	Percent
Yes	692	47.53
No	707	48.56
Not applicable	57	3.91
Total	1,456	100

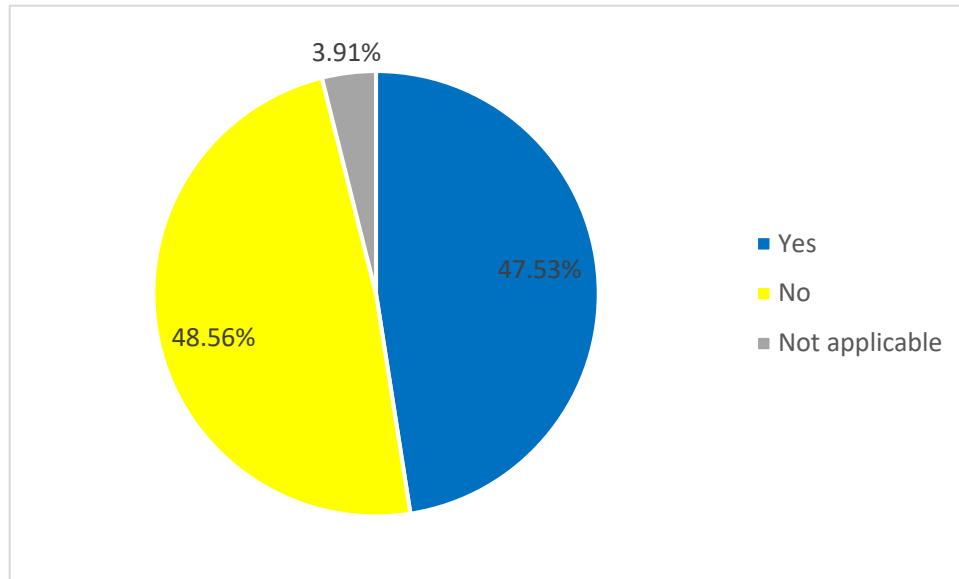
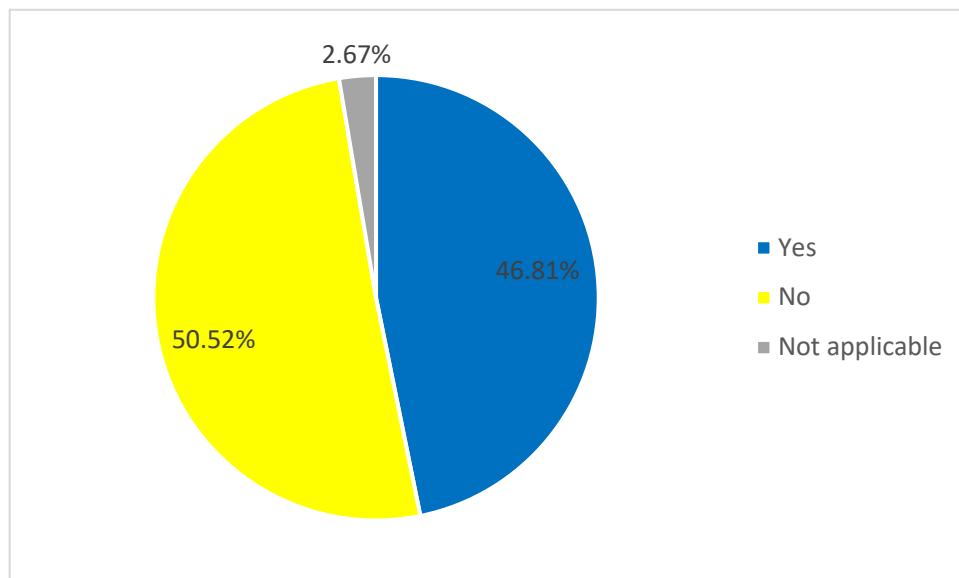


Table 80. Impact of COVID on Medical Care by City

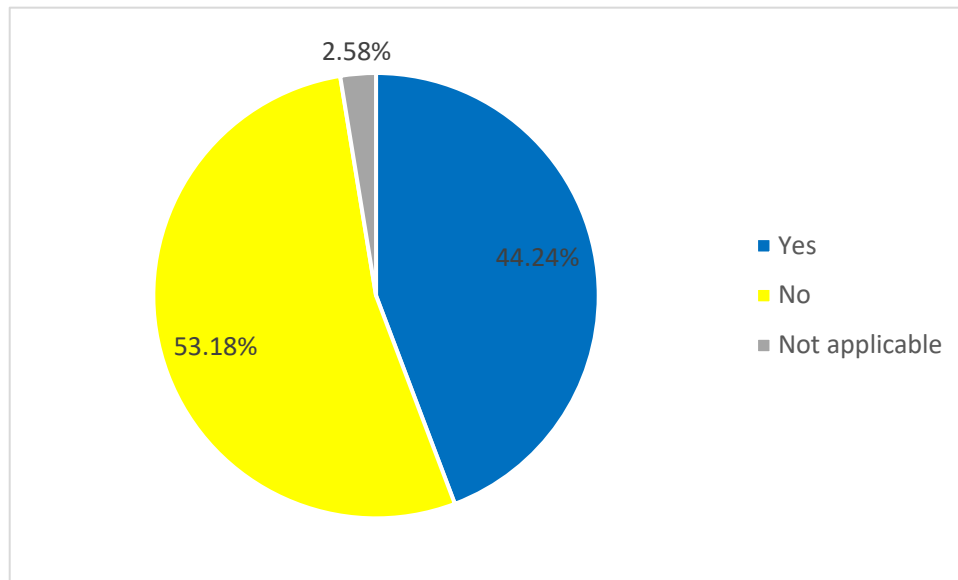
A. Newark Participants

	Freq.	Percent
Yes	404	46.81
No	436	50.52
Not applicable	23	2.67
Total	863	100



B. Other Cities

	Freq.	Percent
Yes	4,535	44.24
No	5,451	53.18
Not applicable	264	2.58
Total	10,250	100



Appendix

Table 1. Health Issues in Community, Ages under 20

	Freq.	Percent out of total respondents (N=288)
Mental health issues (such as depression, anxiety, schizophrenia)	199	69.1
Cancer	116	40.28
Infectious disease (such as flu, pneumonia, etc.)	82	28.47
Obesity and overweight	82	28.47
Diabetes	76	26.39
Aging issues (such as Alzheimer's disease, hearing loss, memory loss, arthritis, etc.)	70	24.31
Injuries	50	17.36
Heart disease	37	12.85
Early sexual activity	35	12.15
Sexually transmitted infections and disease	30	10.42
Chronic pain	27	9.38
Lung disease (such as COPD, asthma, etc.)	19	6.6
HIV/AIDS	17	5.9
Stroke	11	3.82
Dental health (including tooth pain)	8	2.78

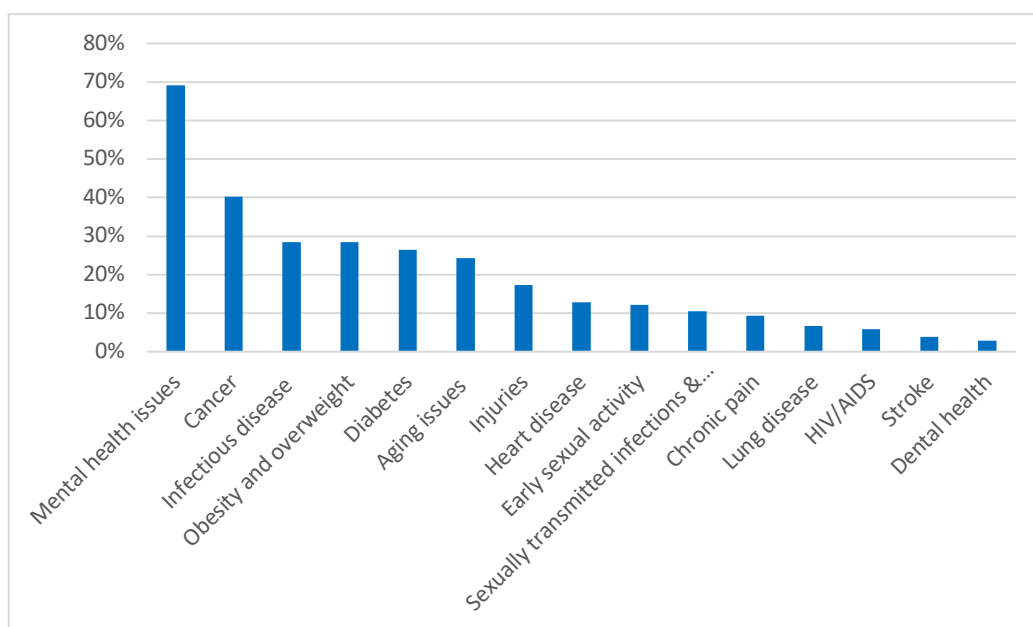


Table 2. Health Issues in Community, Ages 21-60

	Freq.	Percent out of total respondents (N=7,328)
Mental health issues (such as depression, anxiety, schizophrenia)	4,728	64.52
Obesity and overweight	3,124	42.63
Cancer	3,106	42.39
Aging issues (such as Alzheimer's disease, hearing loss, memory loss, arthritis, etc.)	2,477	33.8
Infectious disease (such as flu, pneumonia, etc.)	2,231	30.44
Diabetes	1,773	24.19
Heart disease	1,706	23.28
Chronic pain	593	8.09
Dental health (including tooth pain)	314	4.28
Lung disease (such as COPD, asthma, etc.)	297	4.05
Early sexual activity	267	3.64
Injuries	253	3.45
Stroke	242	3.3
Sexually transmitted infections and disease	210	2.87
HIV/AIDS	205	2.8

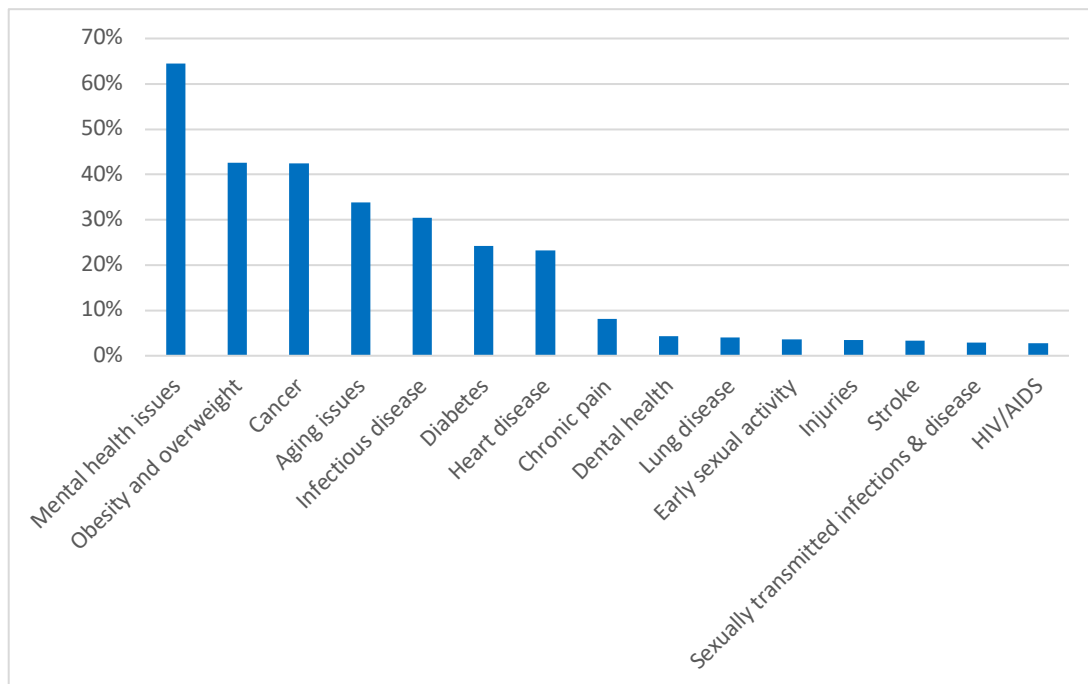


Table 3. Health Issues in Community, Ages above 60

	Freq.	Percent out of total respondents (N=3,502)
Aging issues (such as Alzheimer's disease, hearing loss, memory loss, arthritis, etc.)	2,249	64.22
Mental health issues (such as depression, anxiety, schizophrenia)	1,545	44.12
Cancer	1,434	40.95
Obesity and overweight	1,227	35.04
Heart disease	975	27.84
Infectious disease (such as flu, pneumonia, etc.)	944	26.96
Diabetes	748	21.36
Chronic pain	379	10.82
Dental health (including tooth pain)	207	5.91
Stroke	174	4.97
Lung disease (such as COPD, asthma, etc.)	172	4.91
Injuries	77	2.2
Early sexual activity	57	1.63
HIV/AIDS	36	1.03
Sexually transmitted infections and disease	18	0.51

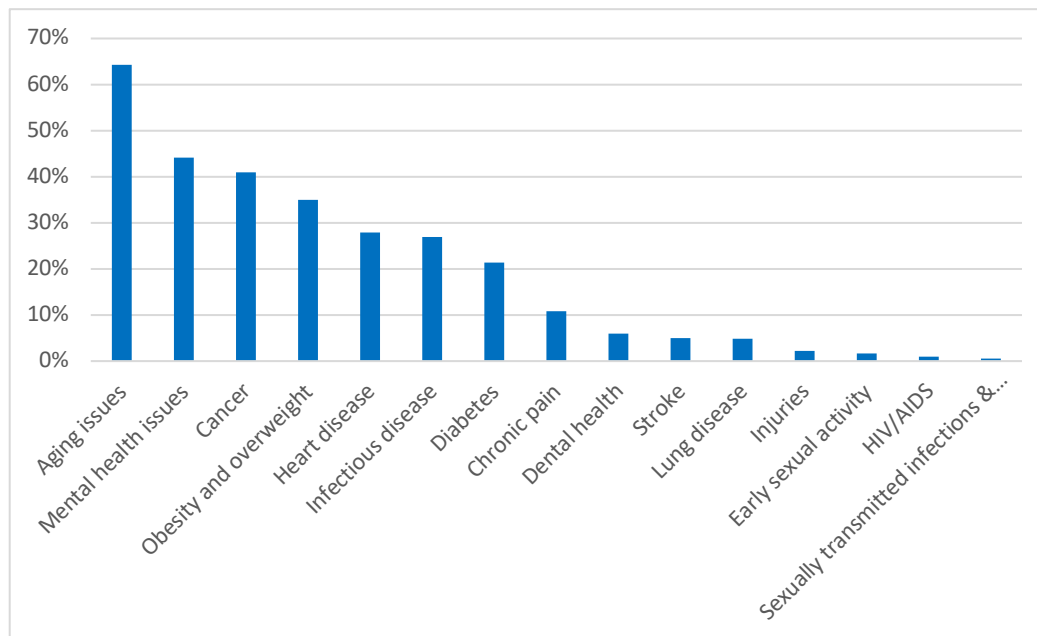


Table 4. Unhealthy Behavior that Impact the Community, Ages under 20

	Freq.	Percent out of total respondents (N=287)
Alcohol abuse	117	40.77
Poor eating habits	111	38.68
Drug abuse	104	36.24
Lack of exercise	93	32.4
Smoking	93	32.4
Angry behavior/violence	83	28.92
Reckless driving	70	24.39
Domestic violence	56	19.51
Not getting a routine check-up	48	16.72
Child abuse	41	14.29
Risky sexual behavior	32	11.15
Elder abuse (ie. Physical, emotional, financial, sexual)	11	3.83

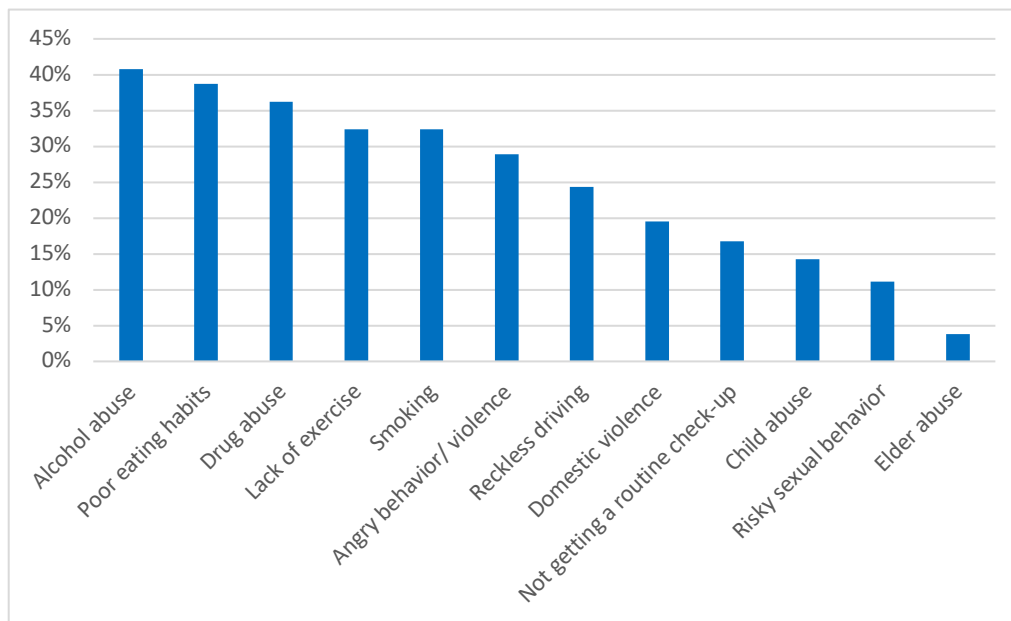


Table 5. Unhealthy Behavior that Impact the Community, Ages 21-60

	Freq.	Percent out of total respondents (N=7,240)
Poor eating habits	3,648	50.39
Lack of exercise	3,528	48.73
Drug abuse	2,535	35.01
Angry behavior/violence	2,515	34.74
Alcohol abuse	2,416	33.37
Not getting a routine check-up	1,765	24.38
Reckless driving	1,632	22.54
Smoking	1,164	16.08
Domestic violence	1,136	15.69
Child abuse	641	8.85
Elder abuse (ie. Physical, emotional, financial, sexual)	274	3.78
Risky sexual behavior	194	2.68

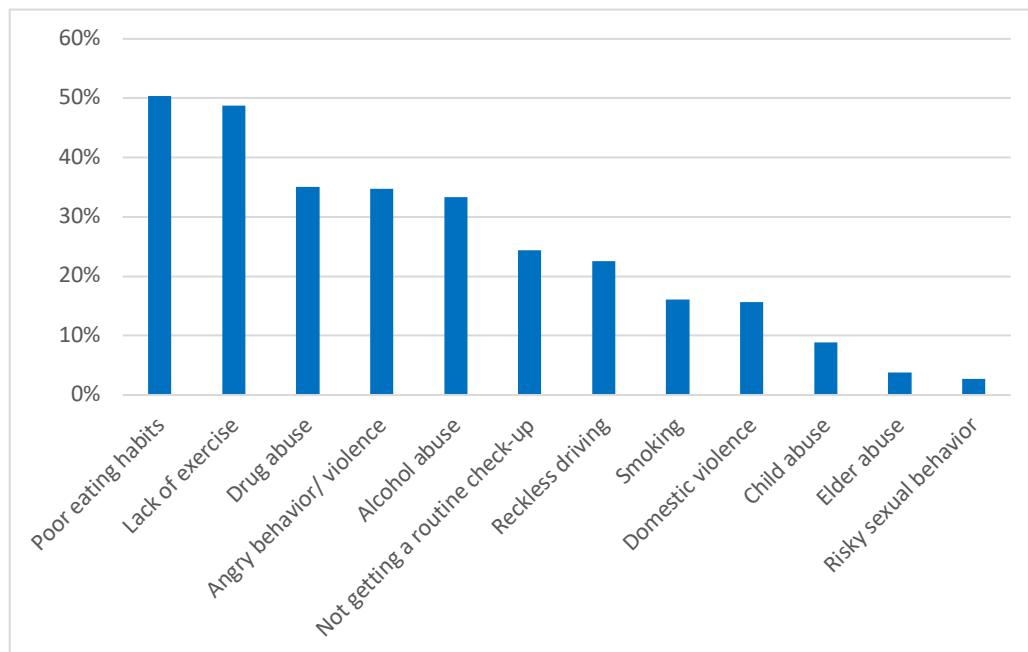


Table 6. Unhealthy Behavior that Impact the Community, Ages above 60

	Freq.	Percent out of total respondents (N= 3,443)
Angry behavior/violence	1,668	48.45
Lack of exercise	1,495	43.42
Drug abuse	1,340	38.92
Poor eating habits	1,329	38.6
Alcohol abuse	1,122	32.59
Reckless driving	844	24.51
Smoking	669	19.43
Not getting a routine check-up	612	17.78
Domestic violence	537	15.6
Child abuse	261	7.58
Elder abuse (ie. Physical, emotional, financial, sexual)	252	7.32
Risky sexual behavior	46	1.34

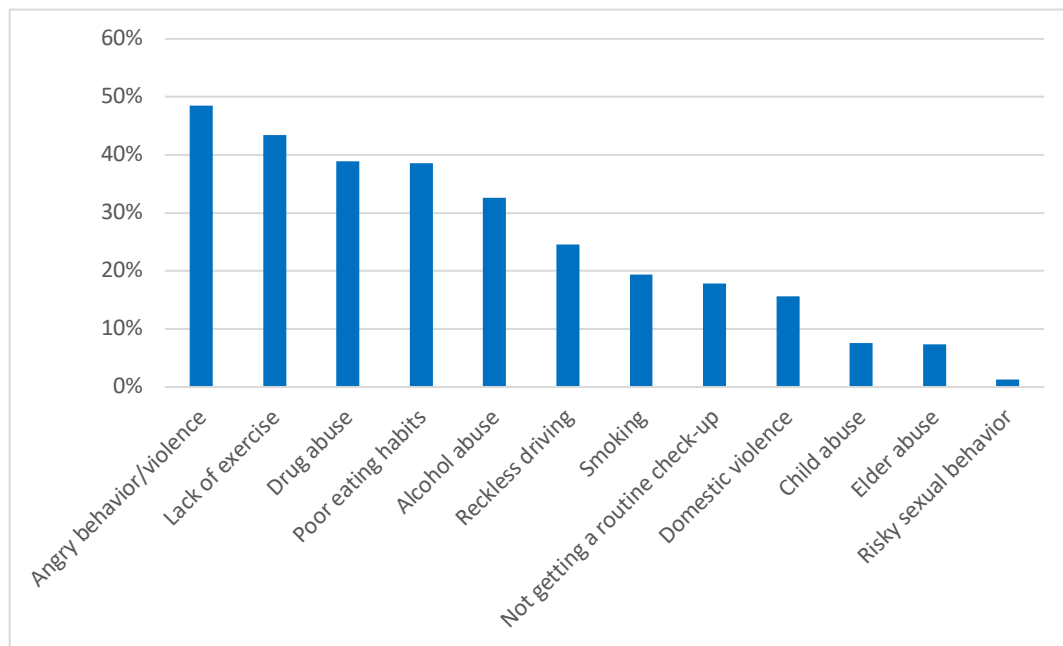


Table 7. Factors that Affect Personal Wellbeing in Community, Ages under 20

	Freq.	Percent out of total respondents (N= 264)
Poor eating habits	160	60.61
Lack of exercise	143	54.17
Angry behavior/violence	88	33.33
Reckless driving	82	31.06
Not getting a routine check-up	66	25
Smoking	61	23.11
Alcohol abuse	53	20.08
Drug abuse	48	18.18
Risky sexual behavior	31	11.74
Domestic violence	20	7.58
Child abuse	13	4.92
Elder abuse (ie. Physical, emotional, financial, sexual)	8	3.03

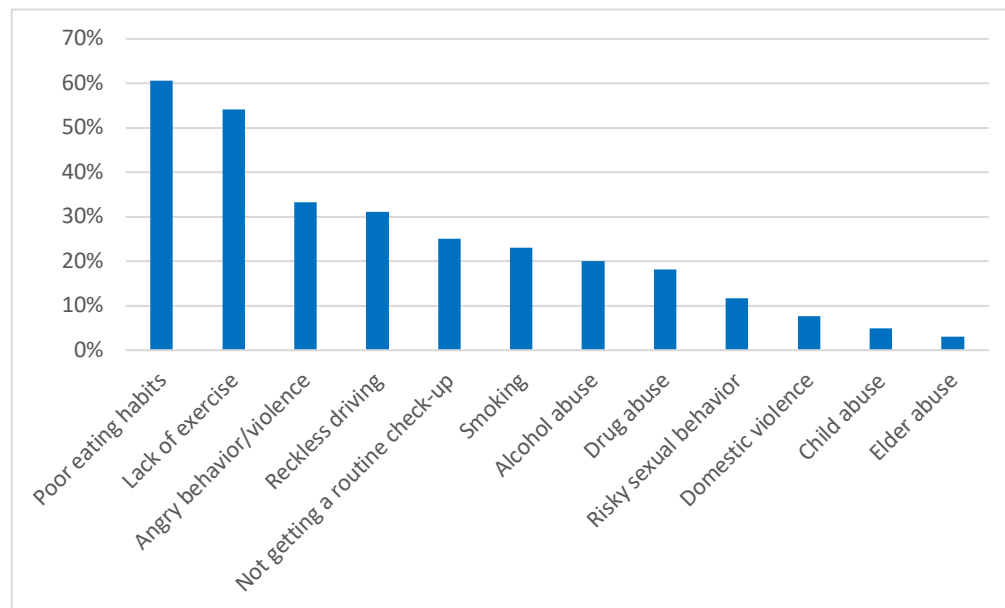


Table 8. Factors that Affect Personal Wellbeing in Community, Ages 21-60

	Freq.	Percent out of total respondents (N= 6,903)
Lack of exercise	4,391	63.61
Poor eating habits	4,073	59
Not getting a routine check-up	2,341	33.91
Angry behavior/violence	2,278	33
Reckless driving	2,200	31.87
Alcohol abuse	1,320	19.12
Drug abuse	1,127	16.33
Smoking	864	12.52
Domestic violence	423	6.13
Child abuse	254	3.68
Elder abuse (ie. Physical, emotional, financial, sexual)	191	2.77
Risky sexual behavior	189	2.74

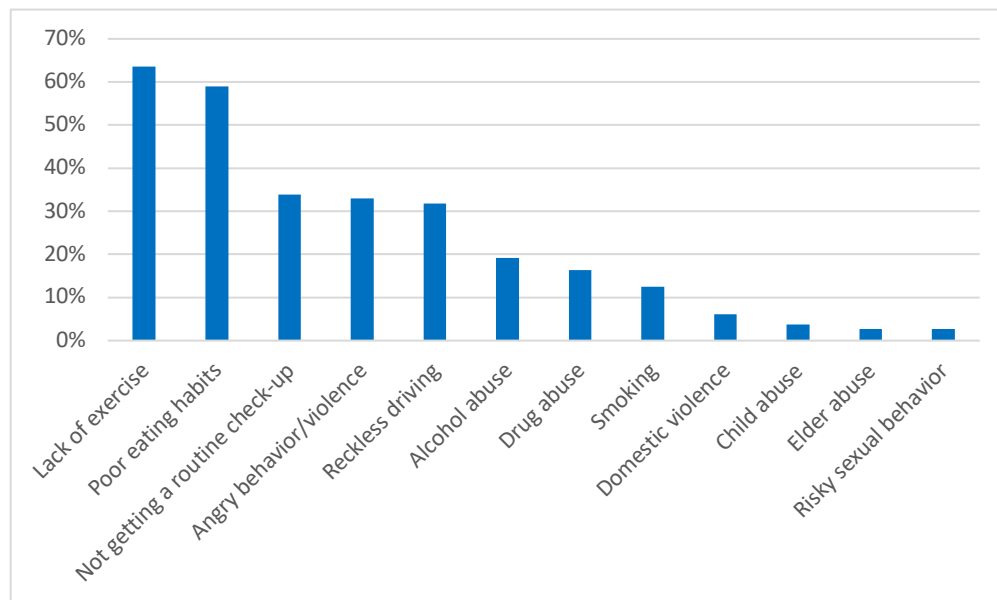


Table 9. Factors that Affect Personal Wellbeing in Community, Ages above 60

	Freq.	Percent out of total respondents (N= 3,241)
Lack of exercise	1,866	57.57
Angry behavior/violence	1,545	47.67
Poor eating habits	1,526	47.08
Reckless driving	1,251	38.6
Drug abuse	665	20.52
Alcohol abuse	607	18.73
Not getting a routine check-up	602	18.57
Smoking	386	11.91
Elder abuse (ie. Physical, emotional, financial, sexual)	327	10.09
Domestic violence	163	5.03
Child abuse	83	2.56
Risky sexual behavior	35	1.08

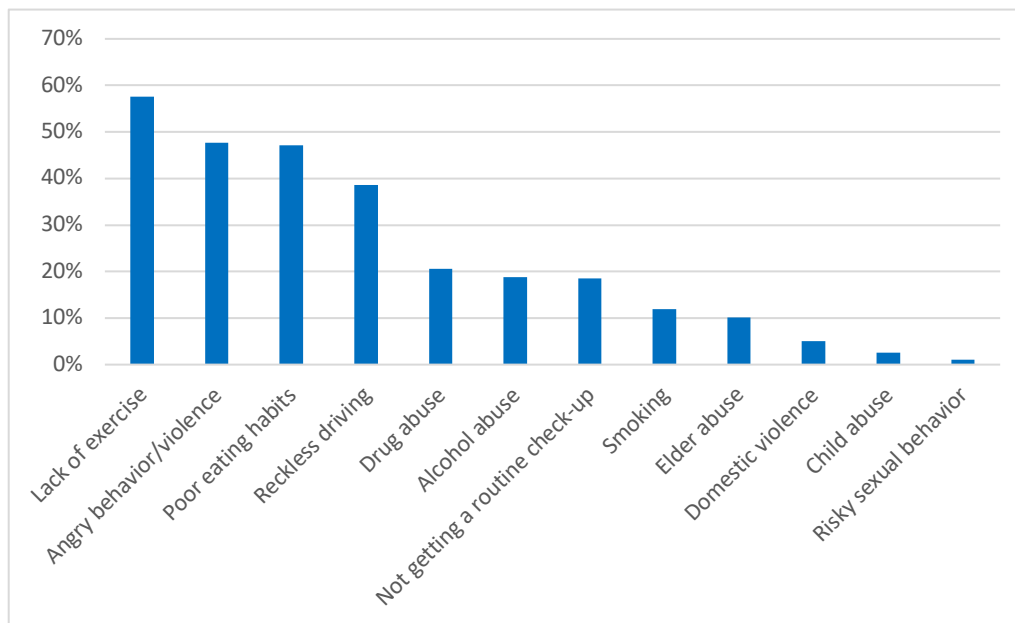


Table 10. Prevalence of COVID-19 Vaccine, Ages under 20

	Freq.	Percent
Yes	286	98.96
No	3	1.04
I plan to	0	0
Total	289	100

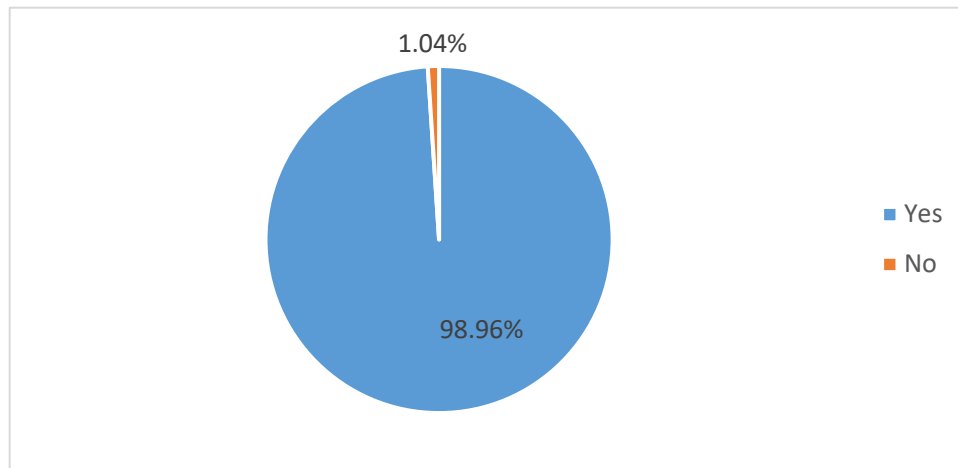


Table 11. Prevalence of COVID-19 Vaccine, Ages 21-60

	Freq.	Percent
Yes	7,256	99.14
No	55	0.75
I plan to	8	0.11
Total	7,319	100

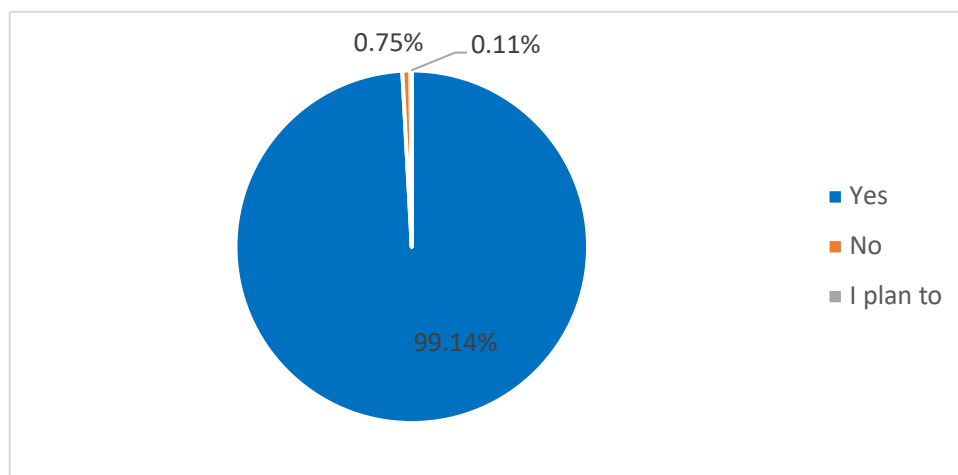


Table 12. Prevalence of COVID-19 Vaccine, Ages above 60

	Freq.	Percent
Yes	3,482	99.54
No	12	0.34
I plan to	4	0.11
Total	3,498	100

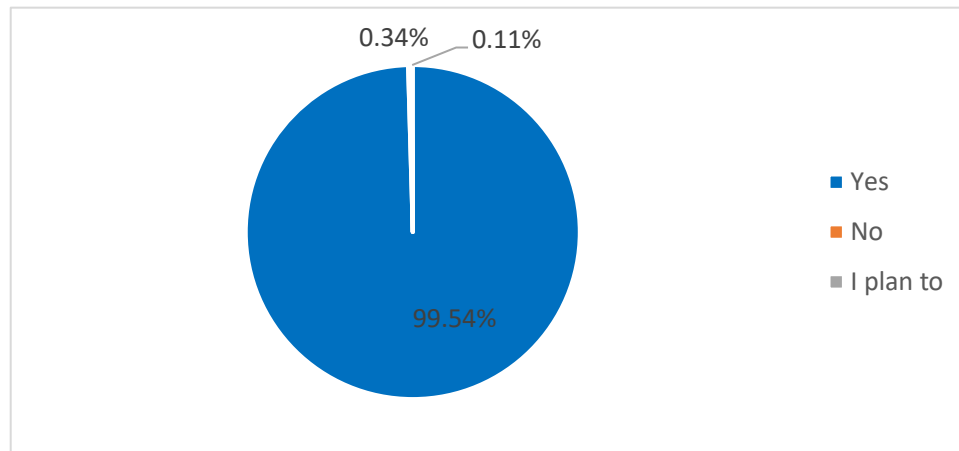


Table 13. Reasons for not getting the COVID-19 Vaccine, Ages under 20

	Freq.	Percent
Fear	1	33.33
Availability	0	0
Lack of research	0	0
Other	2	66.67
Total	3	100

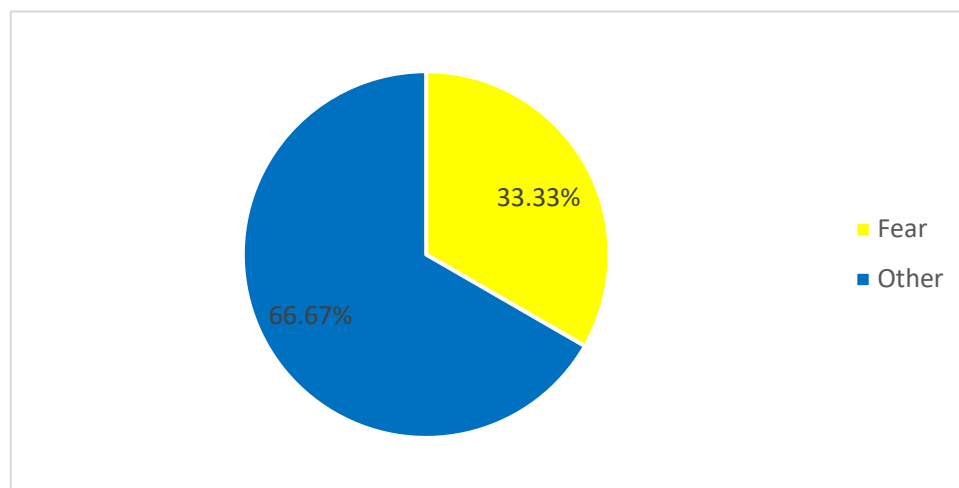


Table 14. Reasons for not getting the COVID-19 Vaccine, Ages 21-60

	Freq.	Percent
Fear	17	30.91
Lack of research	12	21.82
Availability	2	3.64
Other	24	43.64
Total	55	100

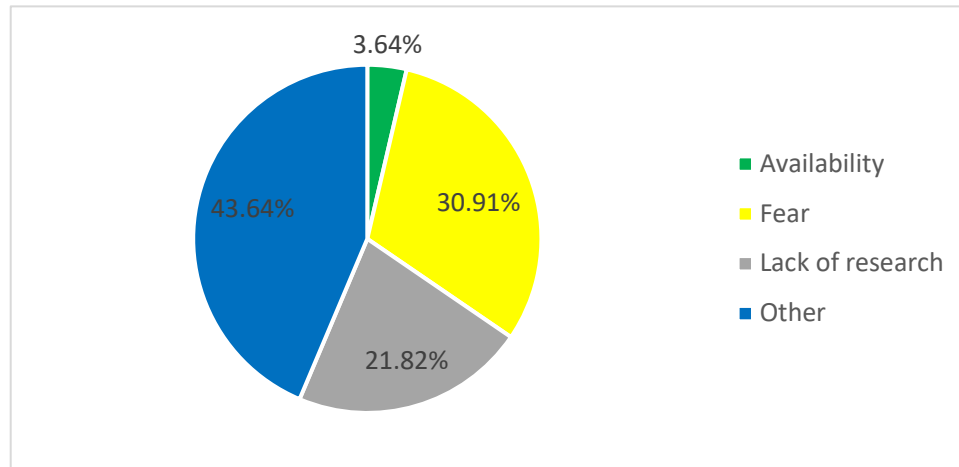


Table 15. Reasons for not getting the COVID-19 Vaccine, Ages above 60

	Freq.	Percent
Fear	2	18.18
Lack of research	1	9.09
Availability	0	0
Other	8	72.73
Total	11	100

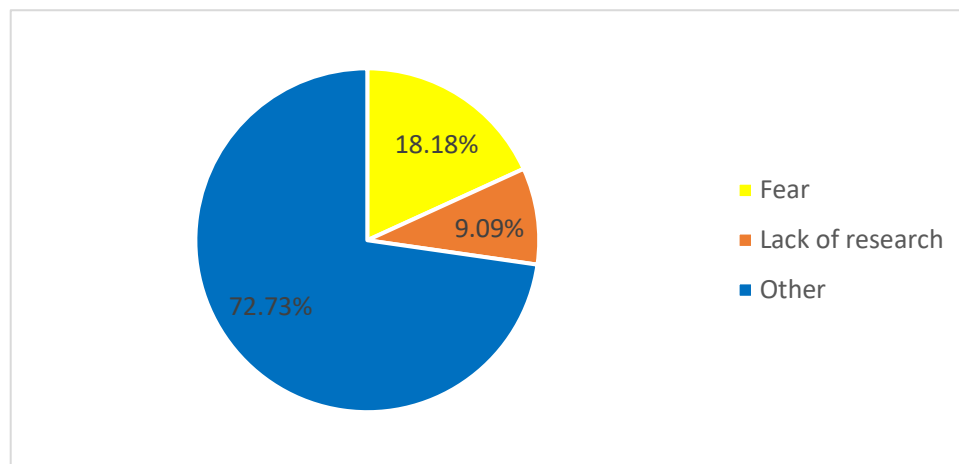


Table 16. Likelihood of getting the COVID-19 Annual Vaccine, Ages under 20

	Freq.	Percent
Very likely	205	70.93
Somewhat likely	62	21.45
Not likely at all	22	7.61
Total	289	100

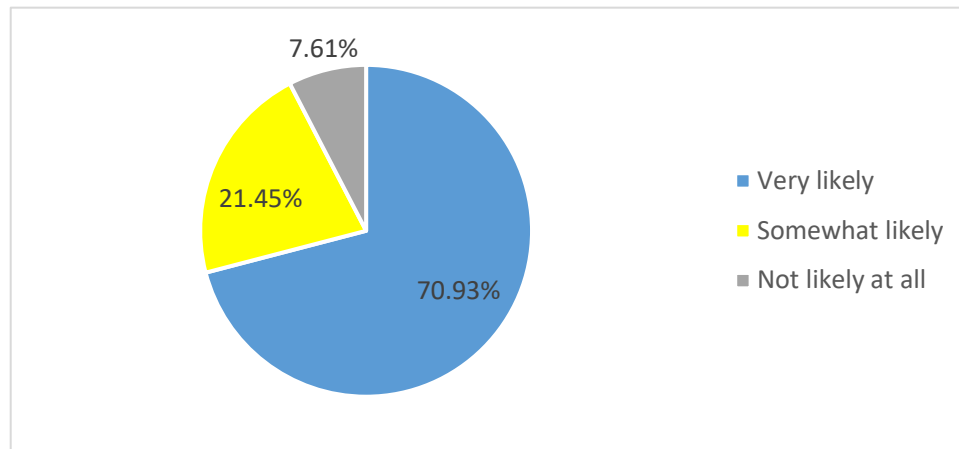


Table 17. Likelihood of getting the COVID-19 Annual Vaccine, Ages 21-60

	Freq.	Percent
Very likely	5,431	74.21
Somewhat likely	1,413	19.31
Not likely at all	474	6.48
Total	7,318	100

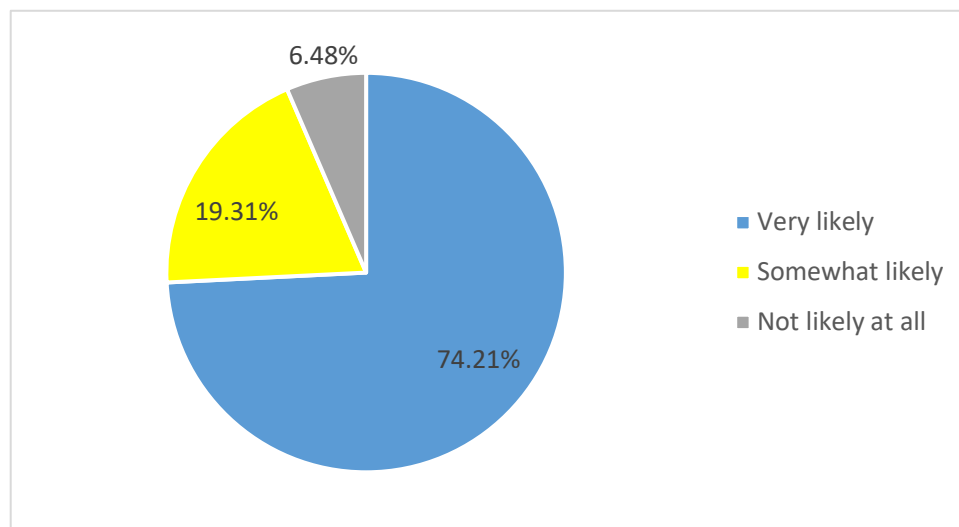


Table 18. Likelihood of getting the COVID-19 Annual Vaccine, Ages above 60

	Freq.	Percent
Very likely	2,997	85.97
Somewhat likely	384	11.02
Not likely at all	105	3.01
Total	3,486	100

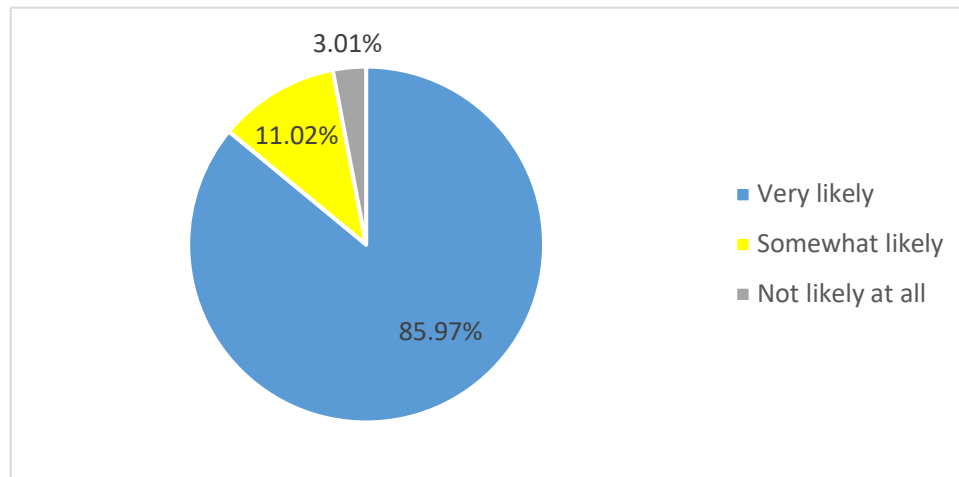


Table 19. Prevalence of FLU Vaccine, Ages under 20

	Freq.	Percent
Within the last year	155	53.63
1-2 years	79	27
3-5 years	18	6.23
5 or more years	19	6.57
I have never had a flu shot	18	6.23
Total	289	100

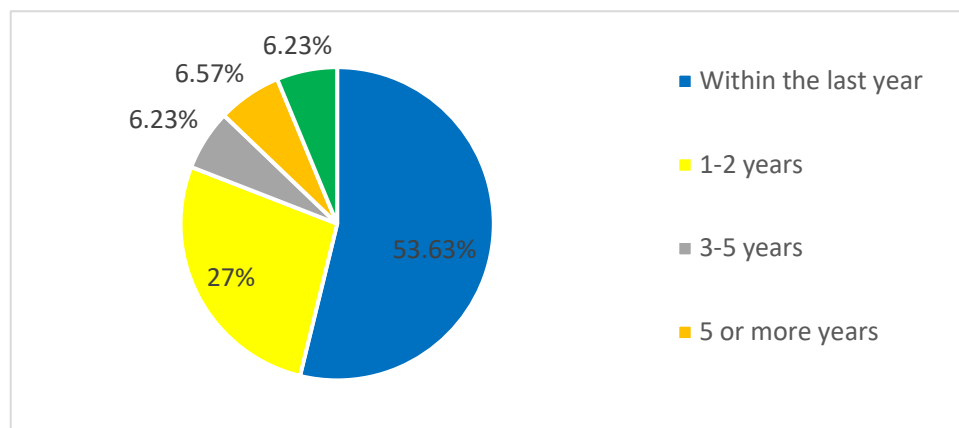


Table 20. Prevalence of FLU Vaccine, Ages 21-60

	Freq.	Percent
Within the last year	4,549	62.12
1-2 years	1,132	15
3-5 years	398	5.43
5 or more years	477	6.51
I have never had a flu shot	767	10.47
Total	7,323	100

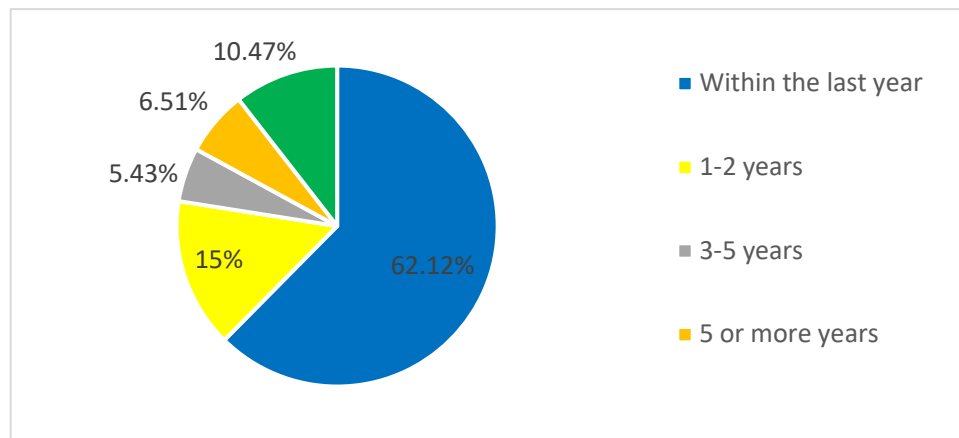


Table 21. Prevalence of FLU Vaccine, Ages above 60

	Freq.	Percent
Within the last year	2,942	84.15
1-2 years	177	5.06
3-5 years	52	1
5 or more years	82	2
I have never had a flu shot	243	7
Total	3,496	100

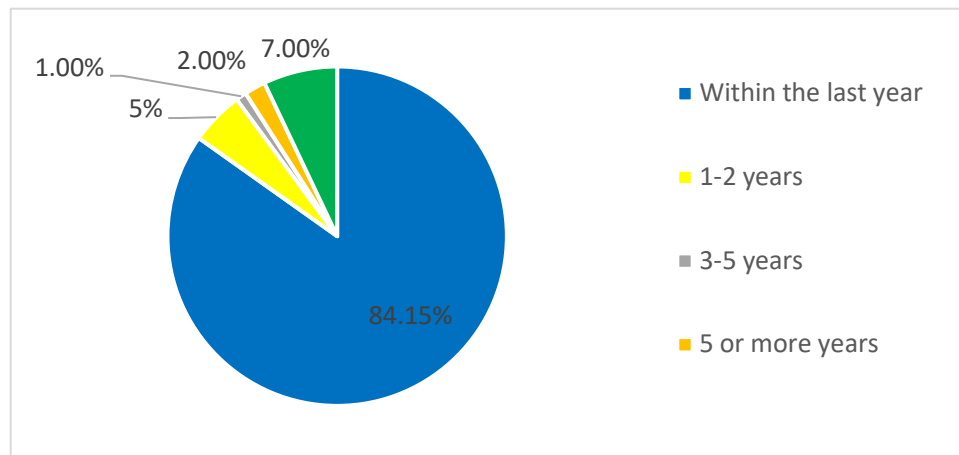


Table 22. Prevalence of Exercise, Ages under 20

	Freq.	Percent
1-2 times	98	33.91
3-4 times	64	22.15
5-6 times	44	15.22
More than 7 times	30	10.38
Not at all	53	18.34
Total	289	100

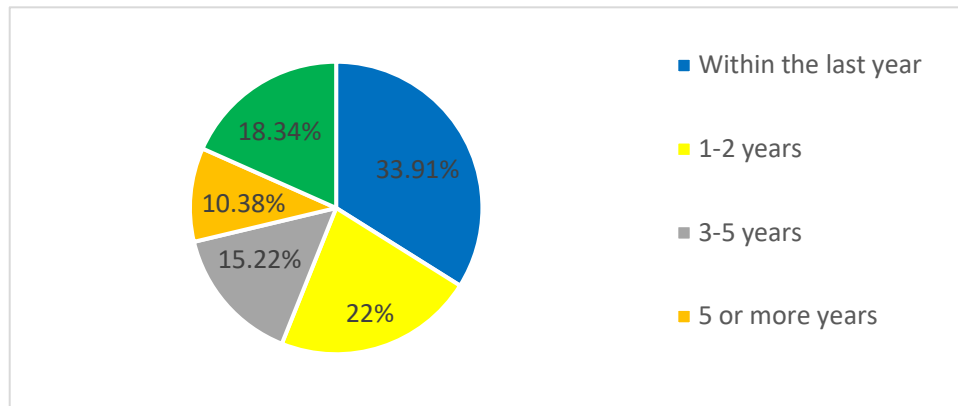


Table 23. Prevalence of Exercise, Ages 21-60

	Freq.	Percent
1-2 times	2,338	31.94
3-4 times	1,839	25.12
5-6 times	1013	13.84
More than 7 times	219	2.99
Not at all	1911	26.11
Total	7,320	100

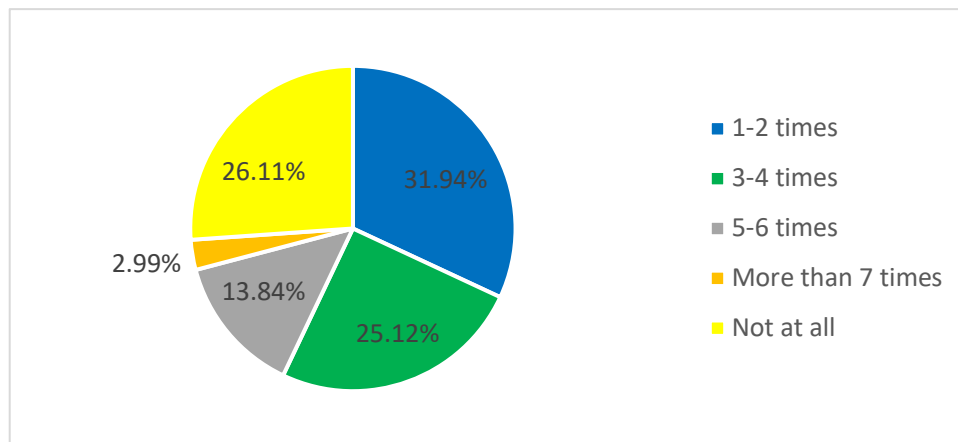


Table 24. Prevalence of Exercise, Ages above 60

	Freq.	Percent
1-2 times	902	25.8
3-4 times	879	25.14
5-6 times	609	17.42
More than 7 times	156	4.46
Not at all	950	27.17
Total	3,496	100

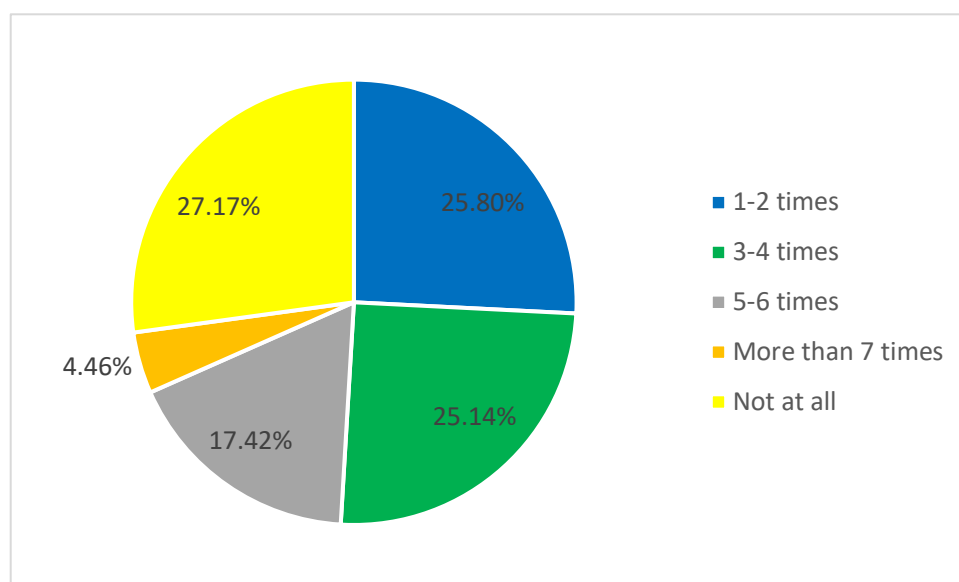


Table 25. Reasons for a Lack of Exercise, Ages under 20

	Freq.	Percent
I do not have motivation to exercise	30	56.6
Exercise is not important to me	6	11.32
I do not have time to exercise	6	11.32
I am too tired to exercise	5	9.43
I do not have access to exercise equipment	2	3.77
I have a physical disability that makes it difficult to exercise	2	3.77
I cannot afford the fees to exercise	1	1.89
I do not have childcare while I exercise	0	0
Other	1	1.89
Total	53	100

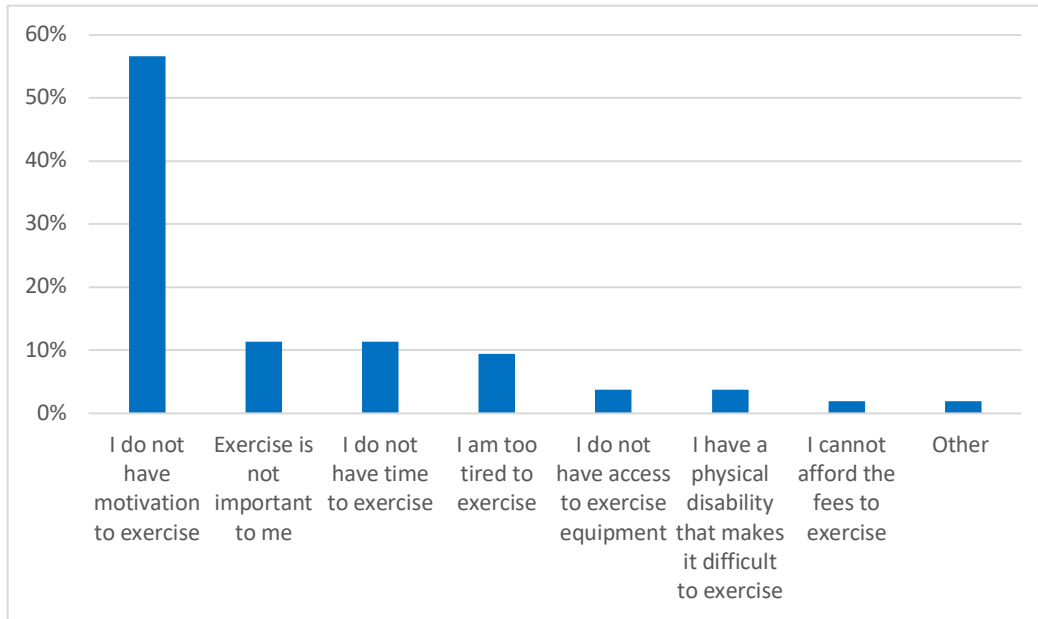


Table 26. Reasons for a Lack of Exercise, Ages 21-60

	Freq.	Percent
I do not have motivation to exercise	754	39.58
I do not have time to exercise	534	28.03
I am too tired to exercise	244	12.81
I have a physical disability that makes it difficult to exercise	81	4.25
I do not have childcare while I exercise	75	3.94
I do not have access to exercise equipment	43	2.26
I cannot afford the fees to exercise	40	2.1
Exercise is not important to me	31	1.63
Other	103	5.41
Total	1,905	100

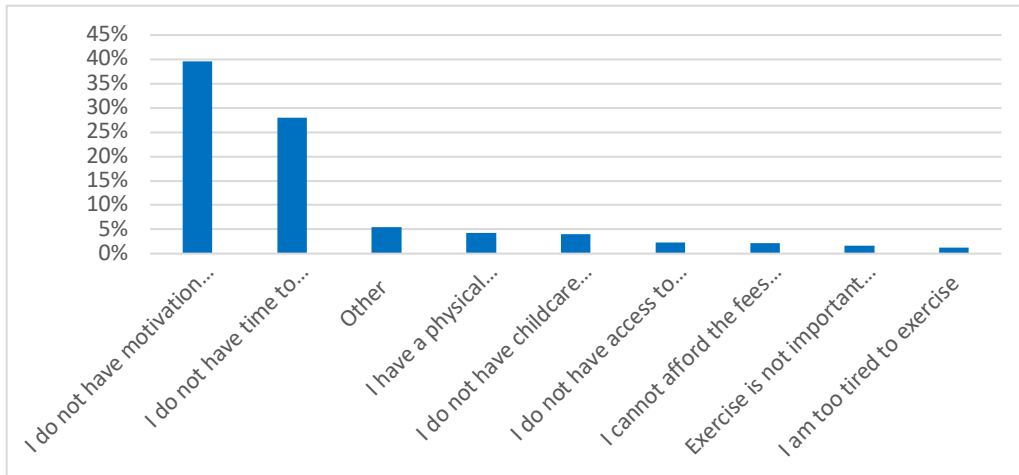


Table 27. Reasons for a Lack of Exercise, Ages above 60

	Freq.	Percent
I do not have motivation to exercise	422	44.75
I have a physical disability that makes it difficult to exercise	160	16.97
I do not have time to exercise	83	8.8
I am too tired to exercise	74	7.85
Exercise is not important to me	35	3.71
I cannot afford the fees to exercise	22	2.33
I do not have access to exercise equipment	22	2.33
I do not have childcare while I exercise	1	0.11
Other	124	13.15
Total	943	100

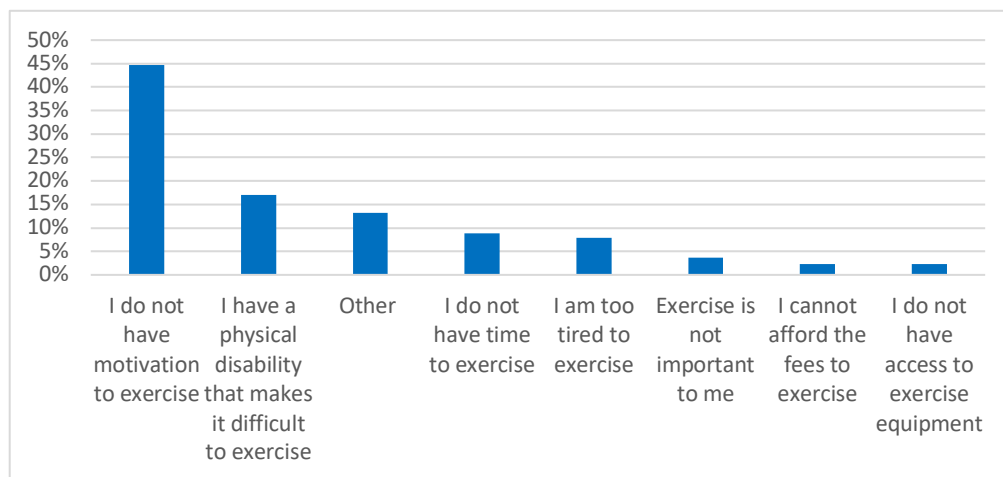


Table 28. Fruit and Vegetable Serving per day, Ages under 20

	Freq.	Percent
1-2 servings	184	63.67
3-4 servings	73	25.26
More than 5 servings	11	3.81
None	21	7.27
Total	289	100

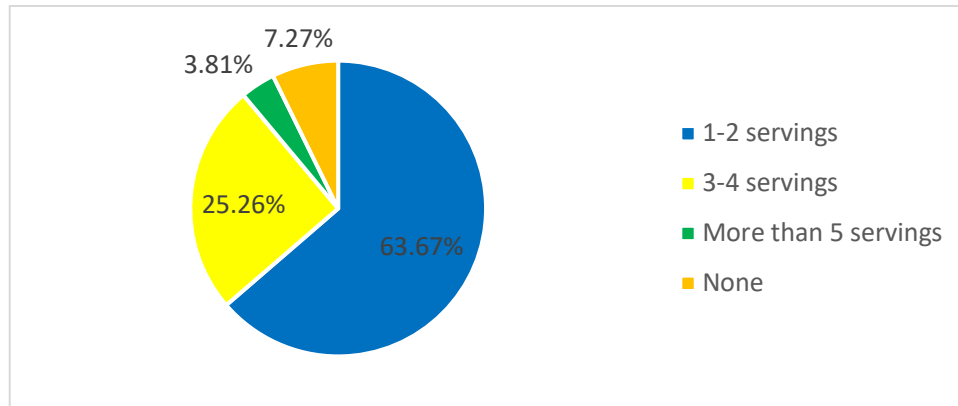


Table 29. Fruit and Vegetable Serving per day, Ages 21-60

	Freq.	Percent
1-2 servings	4,122	56.31
3-4 servings	2,318	31.67
More than 5 servings	588	8
None	292	3.99
Total	7,320	100

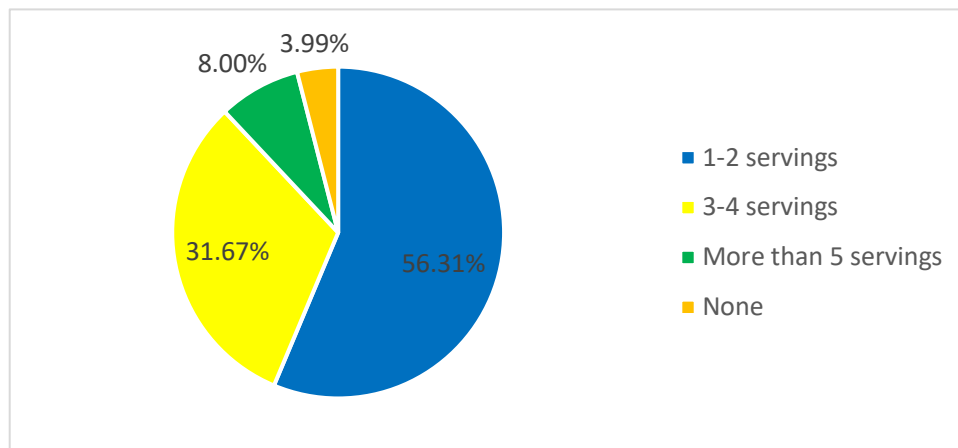


Table 30. Fruit and Vegetable Serving per day, Ages above 60

	Freq.	Percent
1-2 servings	1,747	49.99
3-4 servings	1,321	37.8
More than 5 servings	335	10
None	92	2.63
Total	3,495	100

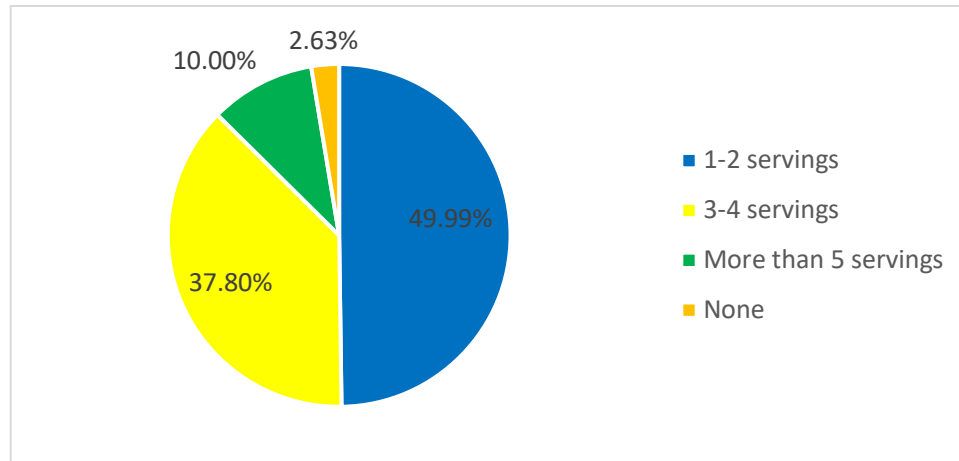


Table 31. Reasons for not eating fruits and vegetables, Ages under 20

	Freq.	Percent
Prioritize other groceries	12	57.14
Too expensive	5	23.81
Cannot get to supermarket	0	0
Other	4	19.05
Total	21	100

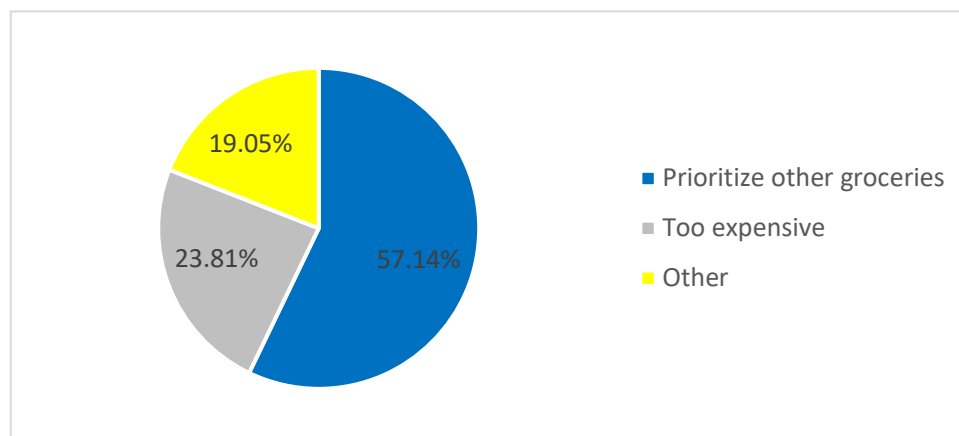


Table 32. Reasons for not eating fruits and vegetables, Ages 21-60

	Freq.	Percent
Prioritize other groceries	157	53.95
Too expensive	38	13.06
Cannot get to supermarket	16	5.5
Other	80	27.49
Total	291	100

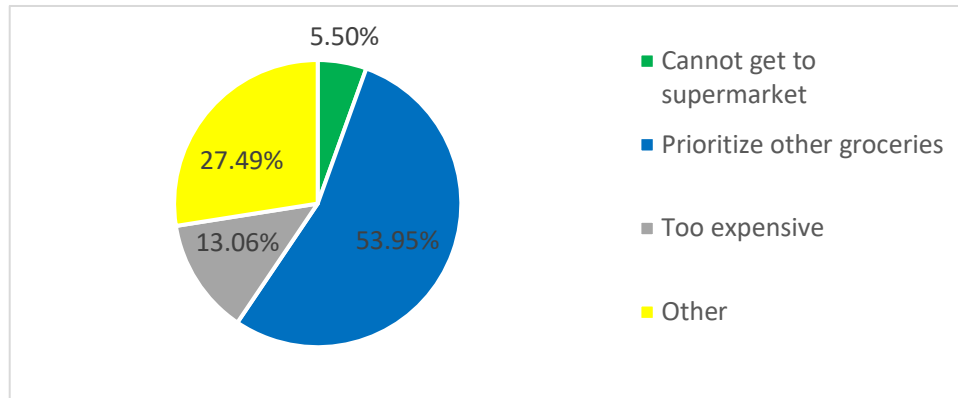


Table 33. Reasons for not eating fruits and vegetables, Ages above 60

	Freq.	Percent
Prioritize other groceries	53	57.61
Too expensive	9	9.78
Cannot get to supermarket	2	2.17
Other	28	30.43
Total	92	100

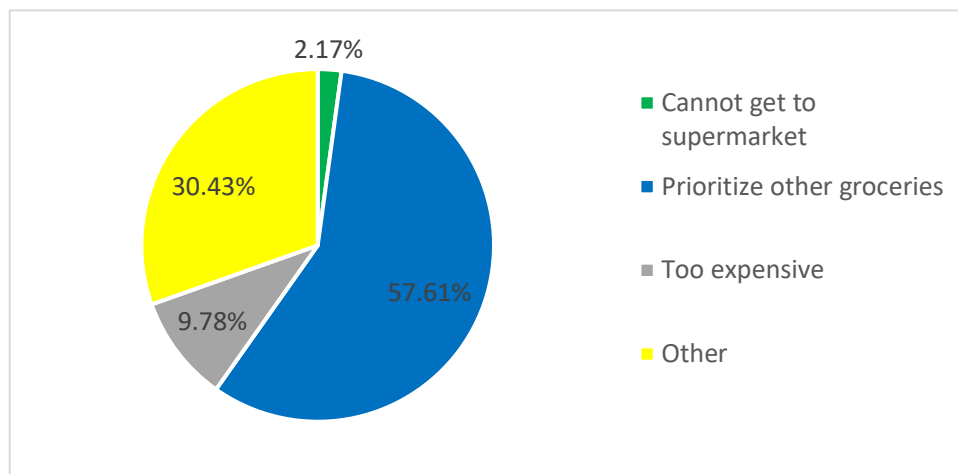


Table 34. Type of Insurance Coverage, Ages under 20

	Freq.	Percent
Private/ Commercial	173	60.7
Medicare	78	27.37
Medicaid	20	7.02
Obamacare	3	1.05
No insurance	11	3.86
Total	285	100

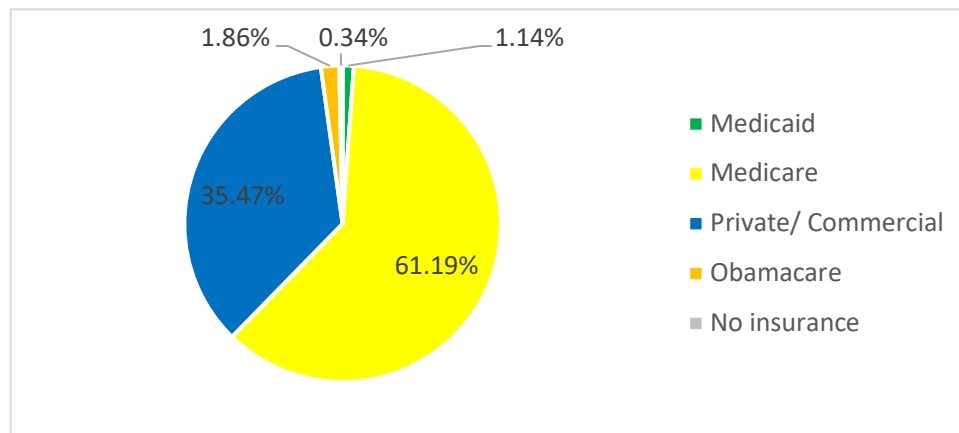


Table 35. Type of Insurance Coverage, Ages 21-60

	Freq.	Percent
Private/ Commercial	6,201	84.67
Medicaid	374	5.11
Medicare	319	4.36
Obamacare	253	3.45
No insurance	177	2.42
Total	7,324	100

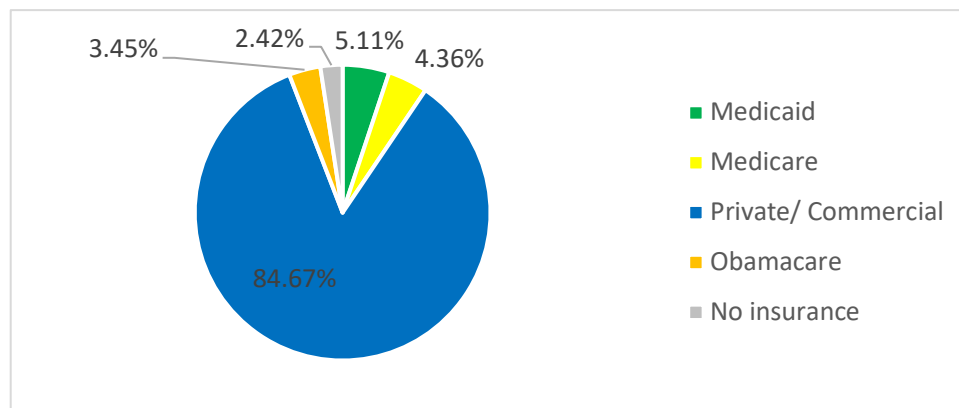


Table 36. Type of Insurance Coverage, Ages above 60

	Freq.	Percent
Medicare	2,141	61.19
Private/ Commercial	1,241	35.47
Obamacare	65	1.86
Medicaid	40	1.14
No insurance	12	0.34
Total	3,499	100

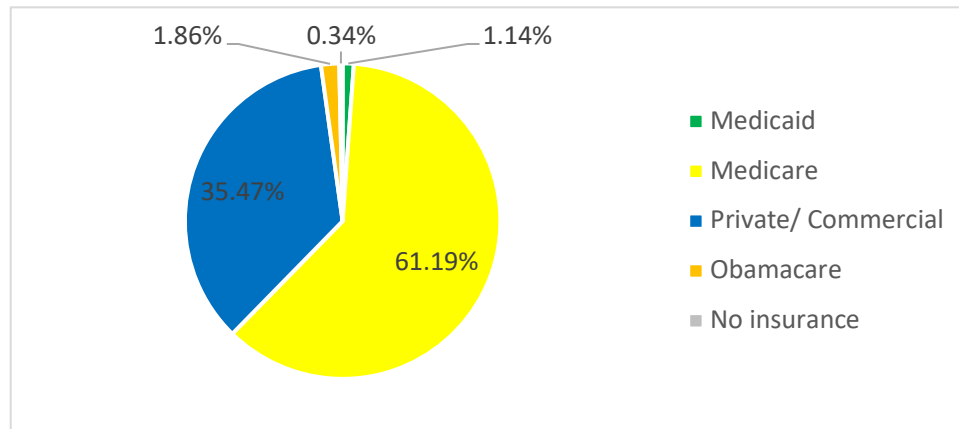


Table 37. Reasons for not having Insurance, Ages under 20

	Freq.	Percent
I do not know how to get health insurance	4	36.36
I cannot afford health insurance	3	27.27
I do not need health insurance	3	27.27
Other	1	9.09
Total	11	100

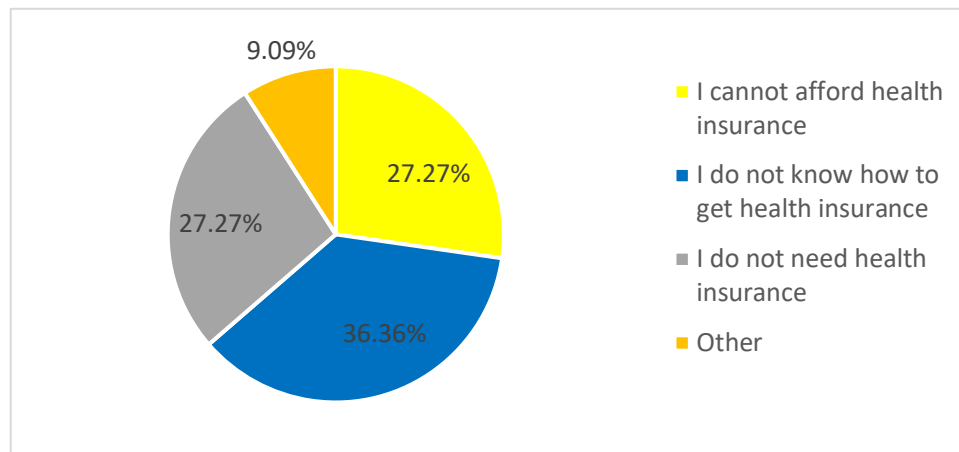


Table 38. Reasons for not having Insurance, Ages 21-60

	Freq.	Percent
I cannot afford health insurance	135	76.71
I do not know how to get health insurance	14	7.95
I do not need health insurance	1	0.57
Other	26	14.77
Total	176	100

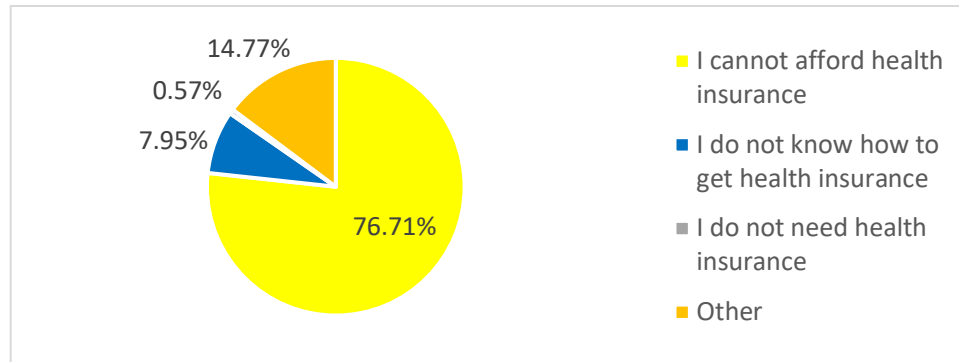


Table 39. Reasons for not having Insurance, Ages above 60

	Freq.	Percent
I cannot afford health insurance	7	58.33
I do not know how to get health insurance	1	8.33
I do not need health insurance	1	8.33
Other	3	25
Total	12	100

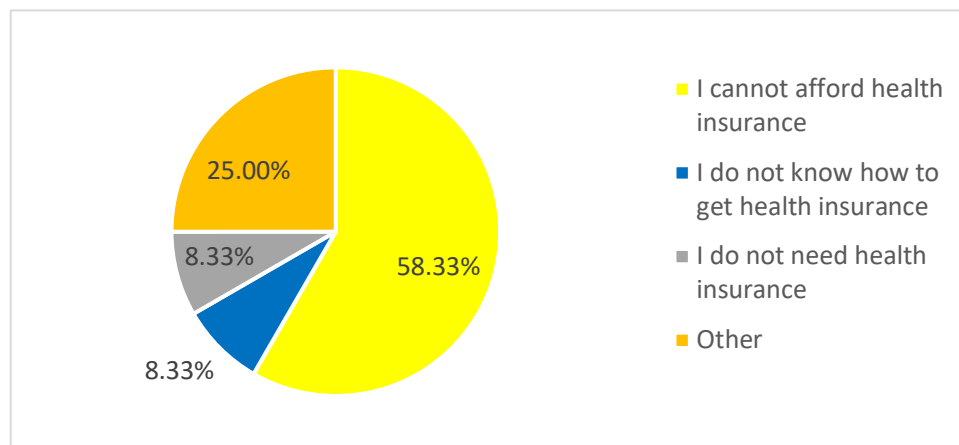


Table 40. Medical Conditions, Ages under 20

	Freq.	Percent out of total respondents (N=289)
Asthma	47	16.26
High cholesterol	19	6.57
Obesity	15	5.19
Loss of vision	15	5.19
Diabetes/ pre-diabetes	14	4.84
High blood pressure	12	4.15
Cancer	9	3.11
Hearing-difficulty	6	2.08
Heart disease	5	1.73
Arthritis	4	1.38
Stroke	2	0.69
COPD	1	0.35
Lung disease	1	0.35

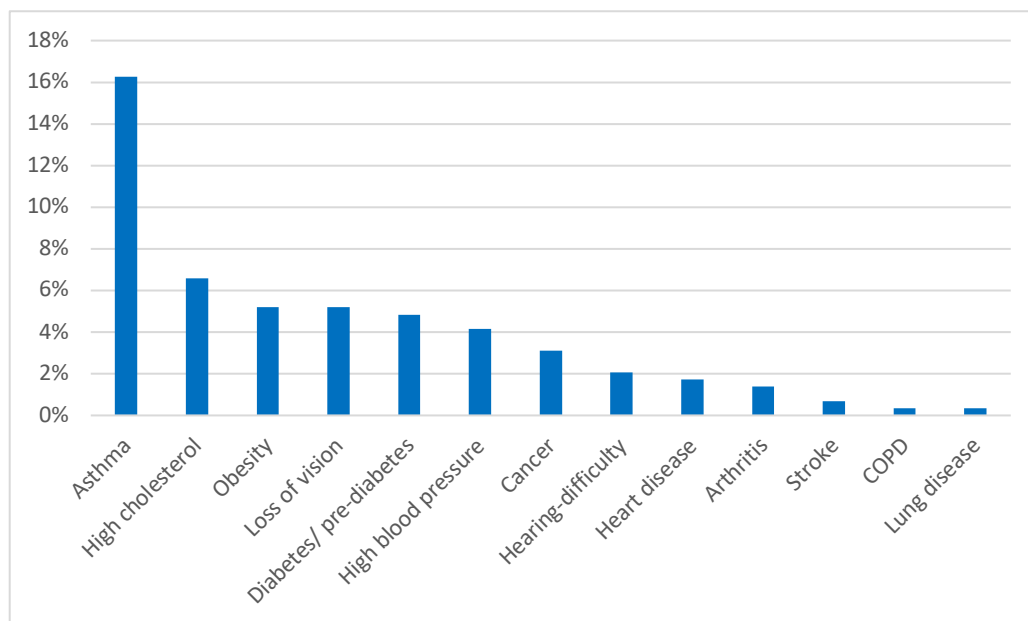


Table 41. Medical Conditions, Ages 21-60

	Freq.	Percent out of total respondents (N=4,247)
High cholesterol	1,509	35.53
High blood pressure	1,497	35.25
Obesity	1,335	31.43
Asthma	879	20.7
Diabetes/ pre-diabetes	826	19.45
Arthritis	612	14.41
Cancer	445	10.48
Heart disease	282	6.64
Hearing-difficulty	278	6.55
Loss of vision	266	6.26
Stroke	99	2.33
Lung disease	54	1.27
COPD	45	1.06

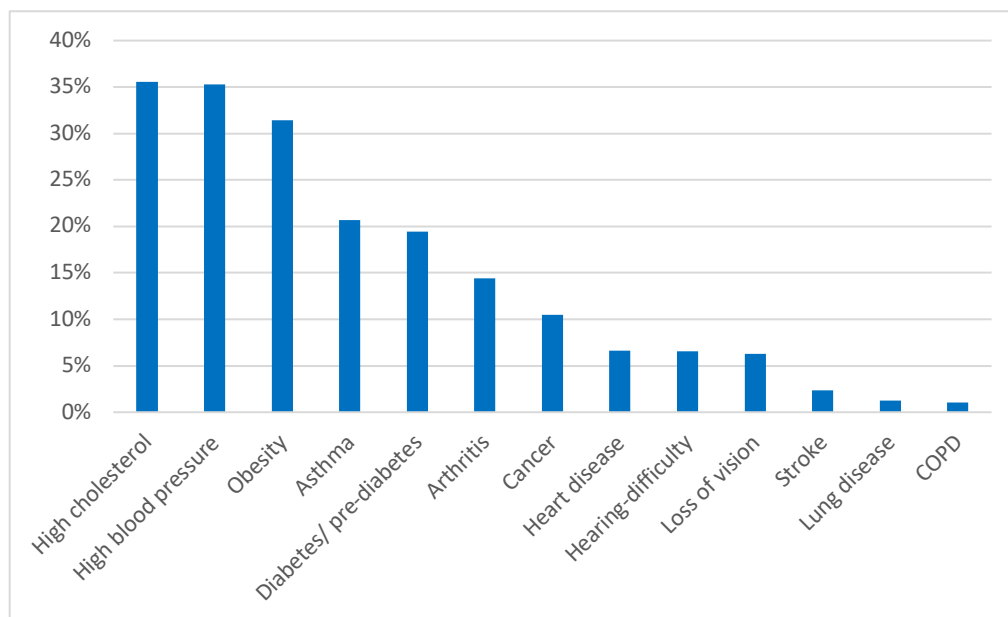
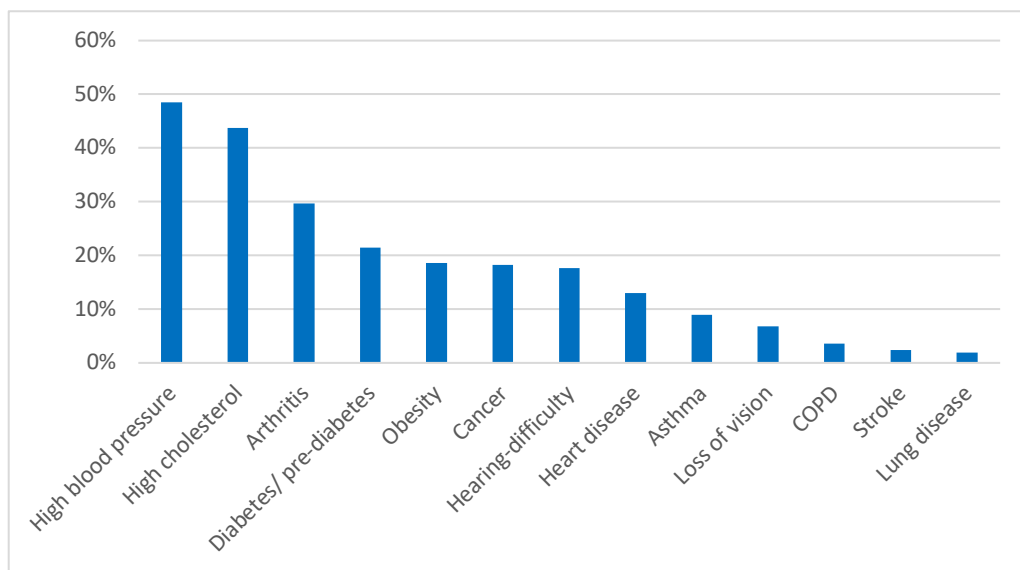


Table 42. Medical Conditions, Ages above 60

	Freq.	Percent out of total respondents (N=3,502)
High blood pressure	1,697	48.46
High cholesterol	1,531	43.72
Arthritis	1,040	29.7
Diabetes/ pre-diabetes	752	21.47
Obesity	651	18.59
Cancer	639	18.25
Hearing-difficulty	620	17.7
Heart disease	456	13.02
Asthma	314	8.97
Loss of vision	240	6.85
COPD	126	3.6
Stroke	82	2.34
Lung disease	65	1.86

**Table 43. Location for Medical Care, Ages under 20**

	Freq.	Percent
Doctor's office	211	73
Urgent care	42	14.53
Emergency Departments	6	2.08
Health Department	1	0.35
I do not seek medical attention	29	10.03
Other	0	0
Total	289	100

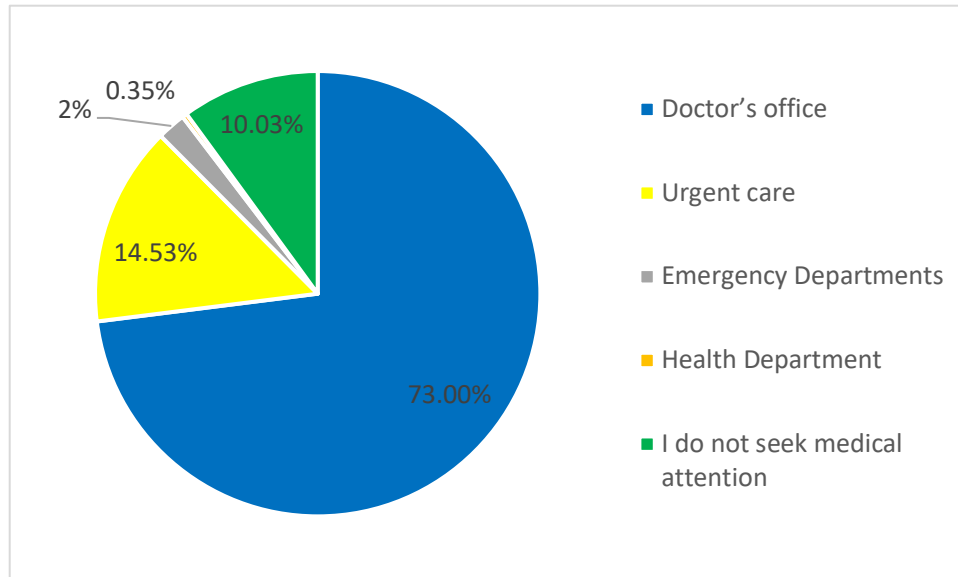


Table 44. Location for Medical Care, Ages 21-60

	Freq.	Percent
Doctor's office	5,317	72.86
Urgent care	1,343	18.4
Emergency Departments	146	2
Health Department	37	0.51
I do not seek medical attention	363	4.97
Other	92	1.26
Total	7,298	100

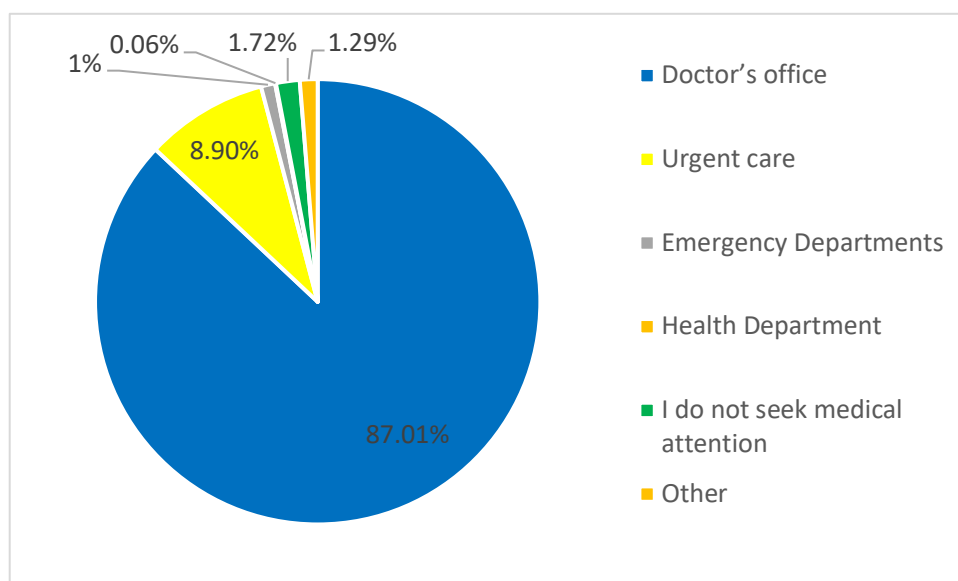
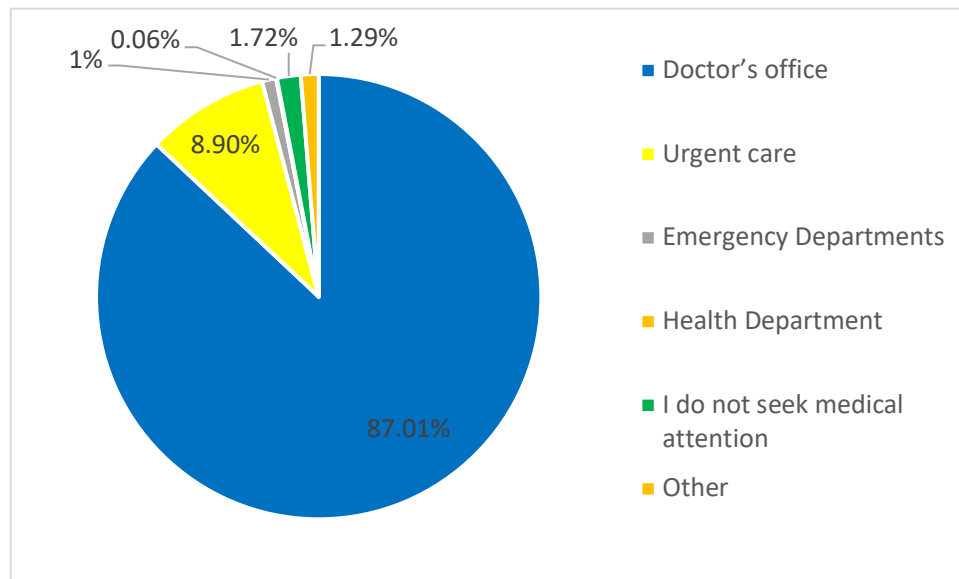


Table 45. Location for Medical Care, Ages above 60

	Freq.	Percent
Doctor's office	3,040	87.01
Urgent care	311	8.9
Emergency Departments	36	1.03
Health Department	2	0.06
I do not seek medical attention	60	1.72
Other	45	1.29
Total	3,494	100

**Table 46. Frequency of Checkups/Wellness Visits, Ages under 20**

	Freq.	Percent
Within the last year	224	77.51
1-2 years ago	49	16.96
3-5 years ago	8	2.77
5 or more years ago	4	1.38
I have never been to the doctor for a checkup	4	1.38
Total	289	100

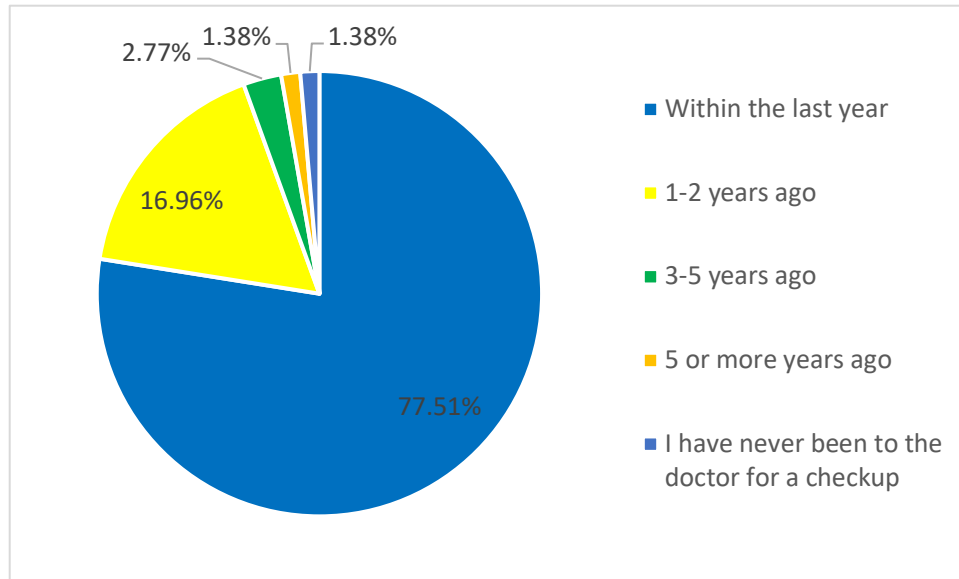


Table 47. Frequency of Checkups/Wellness Visits, Ages 21-60

	Freq.	Percent
Within the last year	4,926	67.35
1-2 years ago	1,482	20.26
3-5 years ago	596	8.15
5 or more years ago	282	3.86
I have never been to the doctor for a checkup	28	0.38
Total	7,314	100

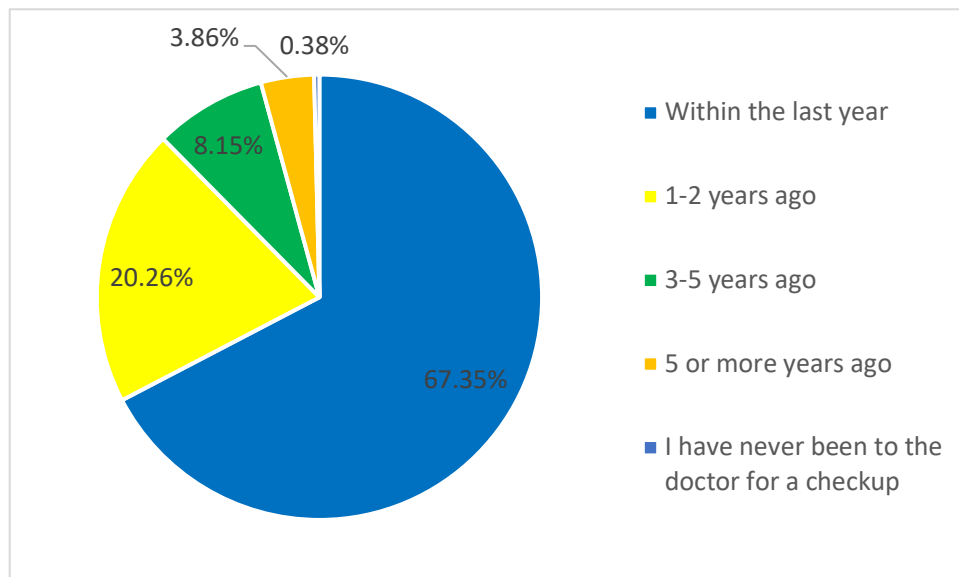
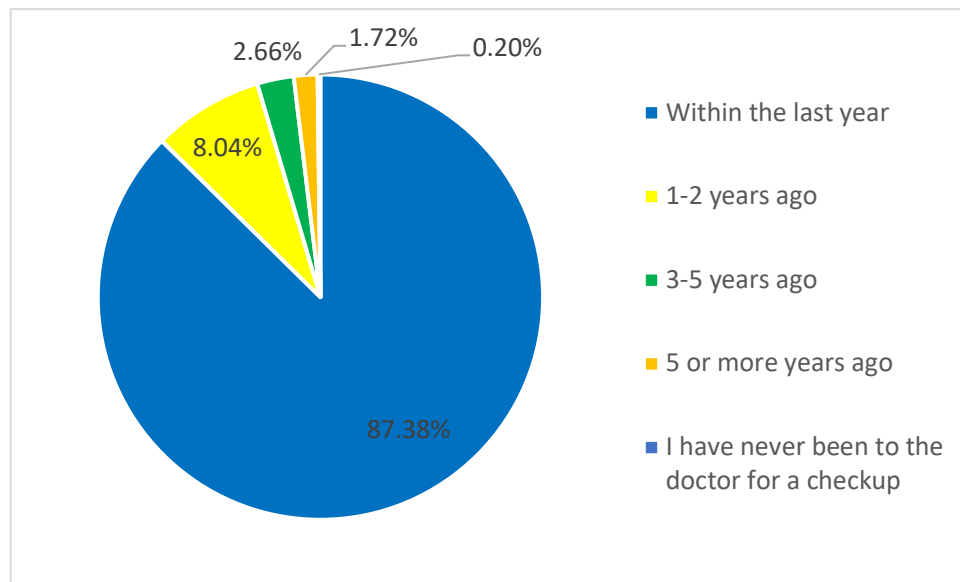


Table 48. Frequency of Checkups/Wellness Visits, Ages above 60

	Freq.	Percent
Within the last year	3,054	87.38
1-2 years ago	281	8.04
3-5 years ago	93	2.66
5 or more years ago	60	1.72
I have never been to the doctor for a checkup	7	0.2
Total	3,495	100

**Table 49. COVID-19 Impact on Scheduling a Wellness Visit, Ages under 20**

	Freq.	Percent
Yes	116	40.14
No	164	56.75
Not applicable	9	3.11
Total	289	100

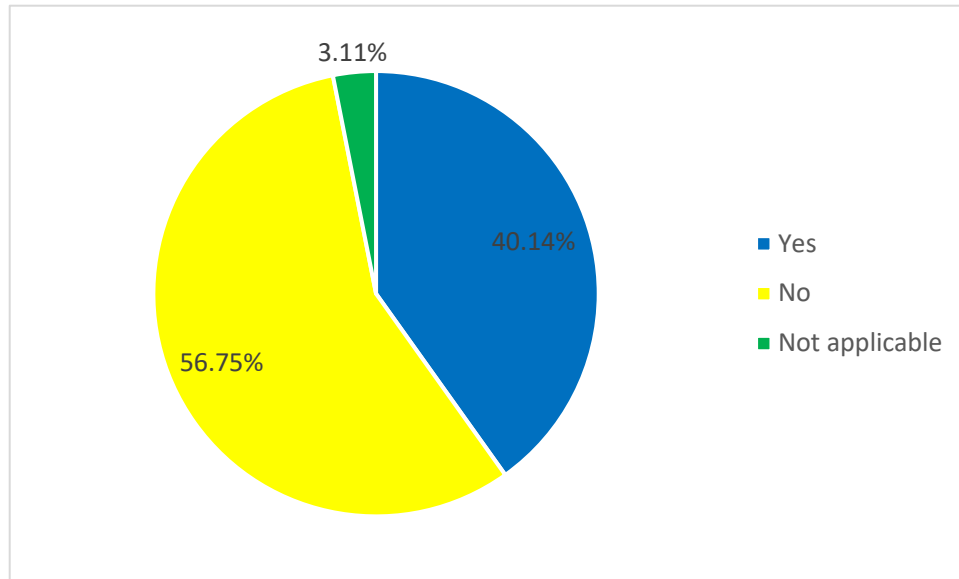


Table 50. COVID-19 Impact on Scheduling a Wellness Visit, Ages 21-60

	Freq.	Percent
Yes	3,522	48.09
No	3,596	49.1
Not applicable	206	2.81
Total	7,324	100

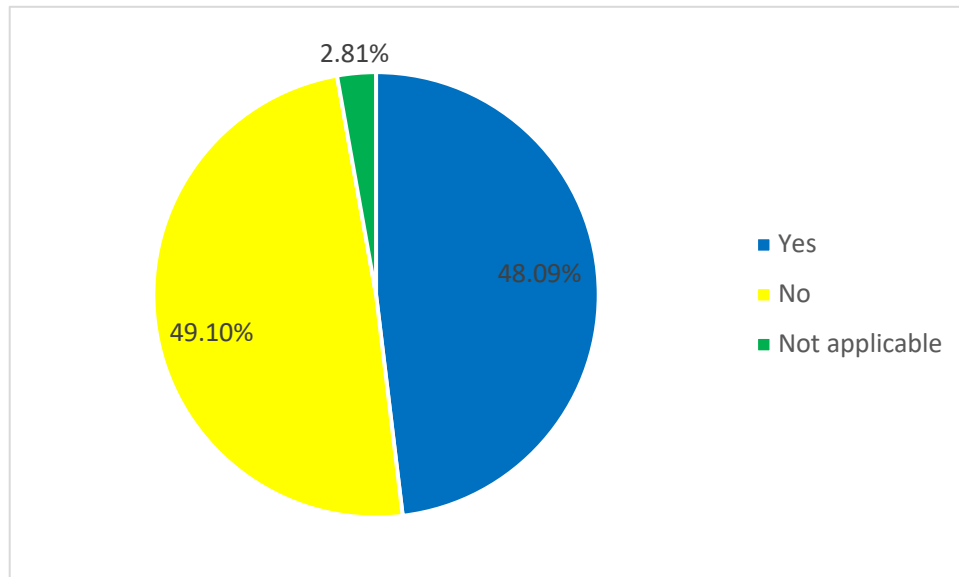


Table 51. COVID-19 Impact on Scheduling a Wellness Visit, Ages above 60

	Freq.	Percent
Yes	1,300	37.22
No	2,121	60.72
Not applicable	72	2.06
Total	3,493	100

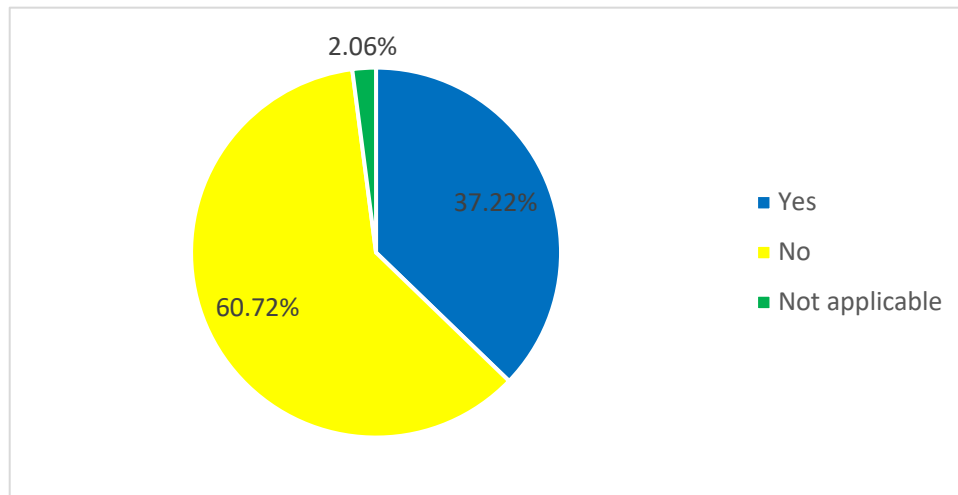


Table 52. Impact of COVID on Medical Care, Ages under 20

	Freq.	Percent
Yes	116	40.14
No	164	56.75
Not applicable	9	3.11
Total	289	100

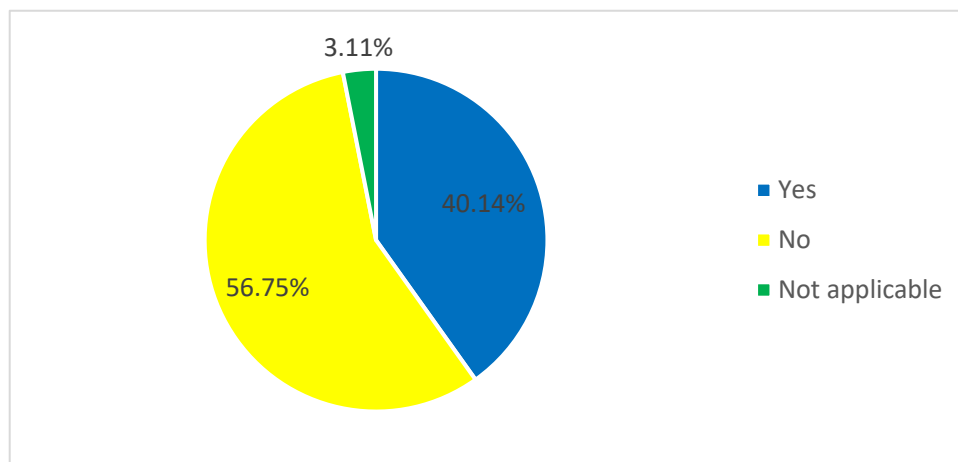


Table 53. Impact of COVID on Medical Care, Ages 21-60

	Freq.	Percent
Yes	3,522	48.09
No	3,596	49.1
Not applicable	206	2.81
Total	7,324	100

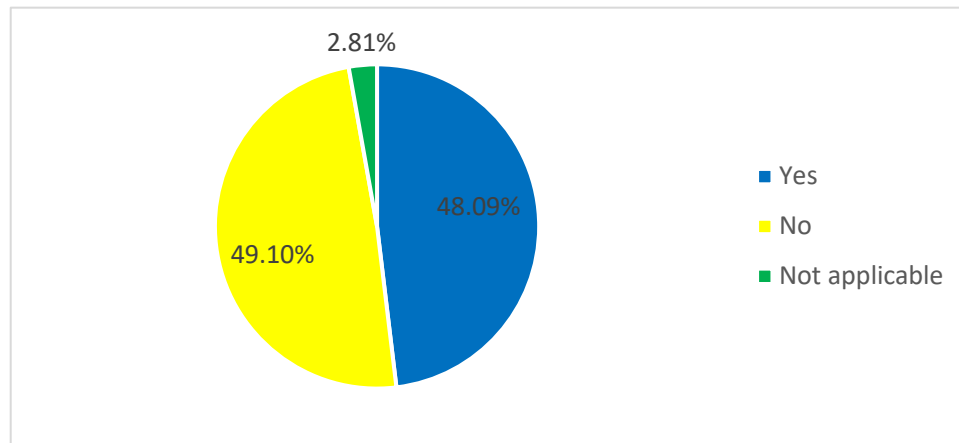


Table 54. Impact of COVID on Medical Care, Ages over 60

	Freq.	Percent
Yes	1,300	37.22
No	2,121	60.72
Not applicable	72	2.06
Total	3,493	100

