

community health needs assessment 2023-2026



foreword

The mission of Dayton Children's Hospital is the relentless pursuit of optimal health for every child in our reach. To fulfill our mission, we must understand the status of children's health in our community and the barriers that exist to achieving optimal health. This community health needs assessment (CHNA) provides us with a snapshot of children's health and gives us actionable data to pursue optimal health for all children in our region.

We know a significant amount of a child's health is driven by social and behavioral factors including education, housing, access to food and safe neighborhoods. In this assessment, we were intentional in focusing our efforts to identify specific needs of the children in communities where we have seen some of the greatest health disparities.

To identify these disparities in an equitable way, this community health needs assessment not only considers secondary data from public health and other publicly available sources, but also has a significant amount of community input into the issues of greatest concern around children's health. The rich information gathered directly from community members and parents lays a significant foundation for identifying meaningful health improvement strategies. The Dayton Children's Center for Health Equity team conducted the health assessment using various methods to obtain this relevant information.

We want to thank our many community partners including public health professionals, child-serving organizations, social service partners and community residents who were part of the needs assessment process. We also thank the hundreds of parents who took our parent survey and spoke to us at community events ensuring their voices and experiences were represented in the process. Their insights and feedback make this a significant document on the status of children's health in our community.

There is no doubt, this assessment reveals the impact of a pandemic, sociopolitical forces and economic uncertainty on children's health and well-being in our community. We have serious work to do to achieve optimal health for every child in our reach. It is our hope that this assessment will foster greater collaboration among those serving children and families and highlight the need for strategic investments so children in our community can thrive.

Sincerely,

A handwritten signature in black ink that reads "Debbie Feldman". The signature is written in a cursive, flowing style.

Deborah A. Feldman
President and CEO
Dayton Children's Hospital

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executive summary

This executive summary provides an overview of health-related data for children collected through the Dayton Children's Hospital 2023-2026 Community Health Needs Assessment (CHNA) process. This CHNA complies with Internal Revenue Service (IRS) requirements in Section 501(r)(3)(A) of the IRS code requiring a hospital organization to conduct a community health needs assessment (CHNA) every three years. This is the seventh CHNA cycle conducted by Dayton Children's.

This assessment builds on the previous 2020 CHNA in that it revisited the needs and issues identified three years ago and continued to explore them against today's community challenges. Moving the needle on population level health indicators takes many years therefore this year's CHNA approach focused on refining an understanding of the barriers to optimal health for children in our region. Dayton Children's Hospital's last CHNA was adopted by our board in June 2020.

definition of community and service area

Dayton Children's serves 20 Ohio counties and eastern Indiana, but to determine the community covered by this CHNA, the hospital chose to include our primary service area where 75% of our patient population resides. This primary service area covers ZIP codes in Montgomery, Miami, Greene, Clark and northern Warren counties. These counties represent urban, rural and suburban communities. Our assessment focused on the pediatric population living in these counties. Special attention has been given to the city of Dayton in Montgomery County where Dayton Children's physically is located and health disparities for children are most challenging.

inclusion of vulnerable populations

Approximately 28.6% of Dayton City residents were below the poverty line, according to the 2021 American Community Survey five year estimates. For this reason, specific ZIP codes where there is great poverty, less access to resources and poorer health outcomes were a focus of data collection efforts. These ZIP codes include 45403, 45404, 45405, 45406, 45410 and 45417. Special attention was also paid to include community members whose first language was something other than English, which represent a growing segment of the population. Wherever possible, translation services and multiple language options were sought.

process and methods for engaging community

Community engagement was paramount throughout the data collection process. Multiple sectors, including the public, were asked to participate in the various phases of the project.

At a regional level, public health professionals were interviewed from Montgomery, Miami, Greene, Clark and Warren counties. Through these interviews, Dayton Children's explored each health department's community health assessments and additional questions related to pediatric health. County profiles were then assembled to summarize these findings.

To engage caregivers and community members at the regional level, a 10-question long form (open to all) and five question short form (for use at high volume attendee in-person events) online surveys were created to identify health priorities and capture barriers to optimal health along with existing community resources. Over 2,000 community members took this survey.

To thoroughly engage community members in the identified ZIP codes, staff from the Dayton Children's Center for Health Equity worked with key community partners to attend community forums, food distribution events, open houses and other events for in-person data collection. Details of these engagements are found below.

The assessment and plan were widely distributed to the public through the hospital website, through key constituent meetings and a public media launch.

identifying and prioritizing needs

As mentioned above, the 2023 CHNA and subsequent community health implementation plan (CHIP), built upon previous CHNA/CHIP priorities but engaged community members through the online survey and in-person data collection to prioritize issues while further investigating barriers to optimal health for children. This process led to a comprehensive list of existing resources. These prioritizations were then broken down by ZIP code and summarized to identify place-based strategies for consideration in the CHIP.

Then an internal team of Dayton Children's leaders further refined the priorities to ensure alignment with hospital strategy and investment. Dayton Children's Hospital is focused on the following priority health outcomes: mental health and addiction, chronic disease, and maternal and infant health. Dayton Children's Hospital will also focus on the following priority factors to address most, if not all, priority areas: community conditions and access to care.

resources to address needs

The needs and priorities identified through the planning process resulted in a comprehensive 2023 Dayton Children's Hospital Implementation Strategy Plan. Numerous resources were identified to address the needs found in the report, which can be found in Appendix C.

evaluation of impact

The impact evaluation considers the feedback from the last community health needs assessment conducted in 2020. Dayton Children's Hospital publishes an implementation strategy update every year and the topic highlights are included in the evaluation of impact. Please see Appendix B for the Dayton Children's Hospital 2020-2023 CHNA/CHIP Evaluation of Impact.

CHNA availability

The 2023 Community Health Needs Assessment, as well as the various other assessments used in creating this report, can be found on the Dayton Children's Hospital website: <https://www.childrensdayton.org/community/community-health/community-healthneeds-assessment>.

adoption by board

The Dayton Children's Hospital Board of Trustees adopted the 2023 Community Health Needs Assessment on June 20, 2023.

data collection and analysis

Dayton Children's Center for Health Equity conducted the health assessment including data collection, data analysis and overall project management. Both qualitative and quantitative methods were used during this process. This multidisciplinary team includes health outcomes researchers, a data analyst, a biostatistician, a quality improvement consultant, a community engagement coordinator, and project managers with public health backgrounds.

primary data collection methods

To assess community priorities, resource needs, and assets, we utilized multiple primary data collection methods including in-person and online surveys, as well as community input poster boards available at community events which allowed participants to indicate their top priorities among five areas, and indicate community needs and assets on open-ended questions. Topics addressed in these surveys included:

- Chronic diseases defined as including but not limited to asthma, diabetes, or obesity.
- Community conditions defined as topics involving education, transportation, housing, or food.
- Ability to get healthcare defined as the ease or difficulty involved in getting the necessary care.
- Health of moms and babies defined as addressing maternal and infant vitality.

community surveys

We developed two versions of an anonymous community survey with input from our Community Advisory Board. A short five-item version was created to be utilized at community events in which participants would have limited time to complete the survey. This version contained just one open-ended question and did not include demographic items except for ZIP code. The long 10-item version included the same questions as the short version as well as additional open-ended and demographic items. The long version was available in English and Spanish, and when available, interpreters assisted participants with limited English proficiency. Participants who completed the long version could be entered into a raffle for a \$100 gift card. Participants who completed the short survey received a small incentive such as a small toy, hand sanitizer, or a daily bus pass.

We sought to capture perspectives of community members in the five counties from which the majority of Dayton Children’s patients are drawn. In addition, we made more intentional outreach efforts in the three primary geographical regions of focus. These geographical regions, northwest and west Dayton, east Dayton and Old North Dayton, have significant health disparities compared to the broader region. Surveys were administered from March 9, 2023, to May 8, 2023. Both versions were available at community events either on iPads managed by Community Outreach Specialists who assisted with data collection, or by scanning a QR code with the participant’s phone. Community events included school-related events, neighborhood association meetings, Earth Day celebrations, health fairs, and food distributions. Additionally, the long version was distributed via email through a range of partner email lists including schools and community organizations.

	short survey	long survey	community input posters
How concerned are you with the following (responses included not at all concern/somewhat concerns/very concerned): <ul style="list-style-type: none"> • Health of moms and babies • Emotional well-being • Chronic disease • Community conditions • Ability to get healthcare 	X	X	X
Ranking of topics above	X	X	
What resources are needed in the community to help families be healthy? (open-ended)	X	X	X
What resources are available in the community to help families be healthy? (open-ended)		X	X
ZIP code	X	X	
Demographics		X	

Table 1: Content collected by data collection method

community input posters

To expand our data collection opportunities at events where participants may have limited time to complete a survey, we utilized large poster boards on which participants could place dots to indicate their top three priority conditions that impact children's health, as well as open-ended questions that allowed participants to write on post-it note what assets and resource needs they perceived were present in their community. We utilized these tools at community events such as a local Easter egg hunt as well as in our hospital lobby to allow parents leaving from appointments to quickly give their input.

sampling

The sampling frame for the survey was to survey families with children residing in the Greater Dayton Area. In this context, a "family" is defined as any number of children under 18 living with one or more adults. U.S. Census Bureau data indicates that 129,675 families with children resided in the Greater Dayton Area (Montgomery, Miami, Greene, Clark, and Warren counties). A power analysis based on a post-hoc distribution of variation in responses (70/30 split) to determine what sample size was needed to ensure a 95% confidence level with corresponding confidence interval of 5% (i.e., we can be 95% sure that the "true" population responses are within a 5% margin of error). The sample size required to generalize to all Greater Dayton Area families with children was 384, and the required number of invitees was 1,280.

data analysis

We conducted a descriptive analysis of all quantitative elements of surveys and community input data collected. This analysis included subgroup analysis of survey data by demographics as well as by whether the participant had children. Additionally, we conducted a descriptive analysis for each of our priority regions. Open-ended qualitative items (community resource needs and assets) were analyzed using an iterative approach that involved developing an initial code book based on survey questions. Responses were double coded by two members of the research team to ensure agreement. The team met regularly to resolve any questions and research consensus. Coded responses were then linked back to quantitative survey data to allow for a descriptive analysis of code frequency overall, by demographics, and by priority region. We utilized similar processes to analyze the quantitative and qualitative data collected through the Community Input mechanism.

limitations

We note a few limitations with this process. First, our sample was not random but rather reflected those who came to community events and who were included in our partner email list. While this is a limitation to generalizability, given our role as a children's hospital, we sought to balance a focus on families and child-related organizations with a broader perspective of community members at large. Secondly, our survey was only available in English and Spanish. When possible, we partnered with interpreters at community events, but our language opportunities were still limited. Finally, while our surveys clearly indicated that responses were anonymous, we recognize that parents of children seeking care at our hospital may have been hesitant to offer criticism. Our analysis of open-ended survey items includes criticism of health care services, suggesting this limitation is minor.

secondary data collection methods

Dayton Children's utilized numerous secondary data sources in conducting this community assessment including a number of metrics from the Centers for Disease Control (CDC), the Ohio Department of Health (ODH), the Ohio Department of Education, and the 2021 American Community Survey (ACS) administered by the U.S. Census Bureau. Census Reporter was used for ZIP code summaries using data from the 2021 ACS. Data from private and non-profit organizations were also utilized including data from the Brady Campaign to Prevent Gun Violence, Datadiversitykids.org, Feeding America, the Child & Adolescent Health Measurement Initiative, Policy Map, and Walk Score. Neighborhood history and other neighborhood specific information was taken from sources provided by the City of Dayton Planning Division including Dayton Neighborhoods and the Dayton Forward Comprehensive Plan. The full list of secondary data sources can be found in Appendix A.

acknowledgements

Funding for the 2023 Dayton Children's Community Health Needs Assessment was provided by Dayton Children's Hospital.

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written comments

Individuals are encouraged to submit written comments, questions, or other feedback about Dayton Children's Hospital community health needs assessment to salemj@childrensdayton.org.

secondary data review














Various secondary (existing) data points were utilized in the development of the previous (2020-2023) CHNA. This data was reviewed and updated as a secondary data assessment. In addition, to capture a full picture of health across the five counties (Clark, Greene, Miami, Montgomery, and Warren) that make up the primary service area for Dayton Children’s, we created county specific profiles of pediatric data. To accompany the data from these profiles we conducted interviews with each county health department to dig deeper into the needs identified by the communities as described by the epidemiologists and other public health professionals who regularly conduct and publish county needs assessments. Below is a summary of our findings followed by the secondary data assessment and the five county profiles.

pediatric health issues identified	pediatric health issues identified, unable to address	data needs	key takeaways
<ul style="list-style-type: none"> Pediatric data is either unavailable or not good enough to report at the population level <p>General focus on:</p> <ul style="list-style-type: none"> Infant mortality Vaccination rates Asthma Childhood obesity Behavioral health Tobacco and vaping 	<ul style="list-style-type: none"> Chronic conditions Make it easier for county health departments to access hospital records Vaccination rates Behavioral health Immigrant families People outside of reporting (no Medicare, Medicaid, etc.). That’s hard to get in general 	<ul style="list-style-type: none"> Easier access to data in general ED rates Medicaid Managed Care transportation use Immunization rates Social determinants of health/social needs screening Housing data at the population level Waiting lists for referrals for behavioral health 	<ul style="list-style-type: none"> There is very little data on pediatric health issues available in our region, outside of that provided by Dayton Children’s Develop a Youth Risk Behavior Survey (tool utilized by the Centers for Disease Control and Prevention) to be used for next CHNA





Table 2: Summary of county health department interviews

secondary data assessment

pediatric mental health and addiction

indicators	July 2020	November 2022
Percent of youth with major depressive episode who did not receive any mental health treatment (MHA)	48.6% (MHA)	 59.8% (MHA)
Percent of 7-12th graders in Western Ohio who saw a health care provider for a mental health problem in the past year (OHYES!)	28.64% (OHYES!)	 29.15% (OHYES!)
Percent of Ohioans living in a psychiatry health professional shortage area (HRSA)	Ohio (2021) HPSA Facilities: 258 HPSA Geographic Areas: 63 HPSA Population Groups: 97 Total Count of HPSAs: 418	 HPSA Facilities: 284  HPSA Geographic Areas: 71  HPSA Population Groups: 133  Total Count of HPSAs: 488
Percent of youth with major depressive episode who did not receive any mental health treatment (MHA)	48.6% (MHA)	 63.3% (MHA)
Number of youth suicide deaths due to suicide per 100,000 population (ODH)	12.0 per 100,000 (ODH)	 11.0 per 100,000 (ODH)
Percent of youth in Western Ohio who were recently depressed who received mental health care in the past year (OHYES!)	28.64% (OHYES!)	 29.15% (OHYES!)
Number of youth suicide deaths due to suicide per 100,000 population (ODH)	12.0 per 100,000 (ODH)	 11.0 per 100,000 (ODH)
Number of youth suicide deaths due to suicide per 100,000 population (ODH)	12.0 per 100,000 (ODH)	 11.0 per 100,000 (ODH)
Percent of youth in Western Ohio who were recently depressed who received mental health care in the past year (OHYES!)	5-9 years- 0	 29.15% (OHYES!)
Number of youth suicide deaths due to suicide per 100,000 population (ODH*)	10-14 years- 3.8/100,00 (2018, not specific to Western Ohio)	 11.0 per 100,000 (ODH)

pediatric chronic disease

indicators	July 2020	November 2022
<p>Percent of children who were obese by BMI classifications (NSCH)</p>	<p>19.3% of U.S. children and adolescents aged 2-19 years have obesity, including 6.1% with severe obesity, and another 16.1% are overweight. (2017-2018)</p>	<p>Data Update Unavailable</p>
<p>Percent of children who were obese by BMI classifications (NSCH1)</p> <p>Percent of children walking and biking to school</p>	<p>19.3% of U.S. children and adolescents aged 2-19 years have obesity, including 6.1% with severe obesity, and another 16.1% are overweight. (2017-2018)</p>	<p>Data Update Unavailable</p>
<p>Percent of children diagnosed with asthma</p> <p>Emergency department visits for pediatric asthma, per 10,000 children ages 0-17</p>	<p>7.8% children living with asthma in Ohio (2019)</p>	<p>Data Update Unavailable</p>
<p>Percent of households that are food insecure (Feeding America, Map the Meal Gap)</p>	<p>21.4% for Montgomery County (2019)</p>	<p> 22.7% for Montgomery County</p>
<p>Percent of children (6-11) who were physically active at least 60 minutes per day (CDC)</p> <p>Percentage of children in Ohio classified as overweight or obese (United Health)</p>	<p>26.1% (2017)</p>	<p> 26.9% (CDC)</p> <p> 34% (United Health)</p>
<p>Percent of young children with elevated blood lead levels (ODH)</p>	<p>2.7% (2019)</p>	<p> 1.90%</p>

maternal and infant health

indicators	July 2020	November 2022
Percent of infants that were breastfed for 3 months	*Term Infants 58.3% Any breastfeeding at 6 months - National (2020);	↓ *Term Infants 55.8% Any breastfeeding at 6 months
	46.9% Exclusive breastfeeding at 3 months - National (2020);	↓ 45.3% Exclusive breastfeeding at 3 months
	51.1% Any breastfeeding at 6 months - Ohio (2020);	↓ 50.5% Any breastfeeding at 6 months
	41.1% Exclusive breastfeeding at 3 months - Ohio (2020)	↑ 42.7% Exclusive breastfeeding at 3 months
Rate of infant deaths per 1,000 live births (ODH)	6.9/1000 (2019)	↓ 6.7/1000

community conditions

indicators	July 2020	November 2022
Children living in poverty (American Community Survey) Not currently available	324,754 people (2019) 30.8% of children (2019)	↓ 18.4% of children (2021)
Percent of kindergarten students demonstrating readiness (Ohio Kindergarten Readiness Assessment)	40% (2015-2016)	↑ 40.9% (2018-19)

access to care

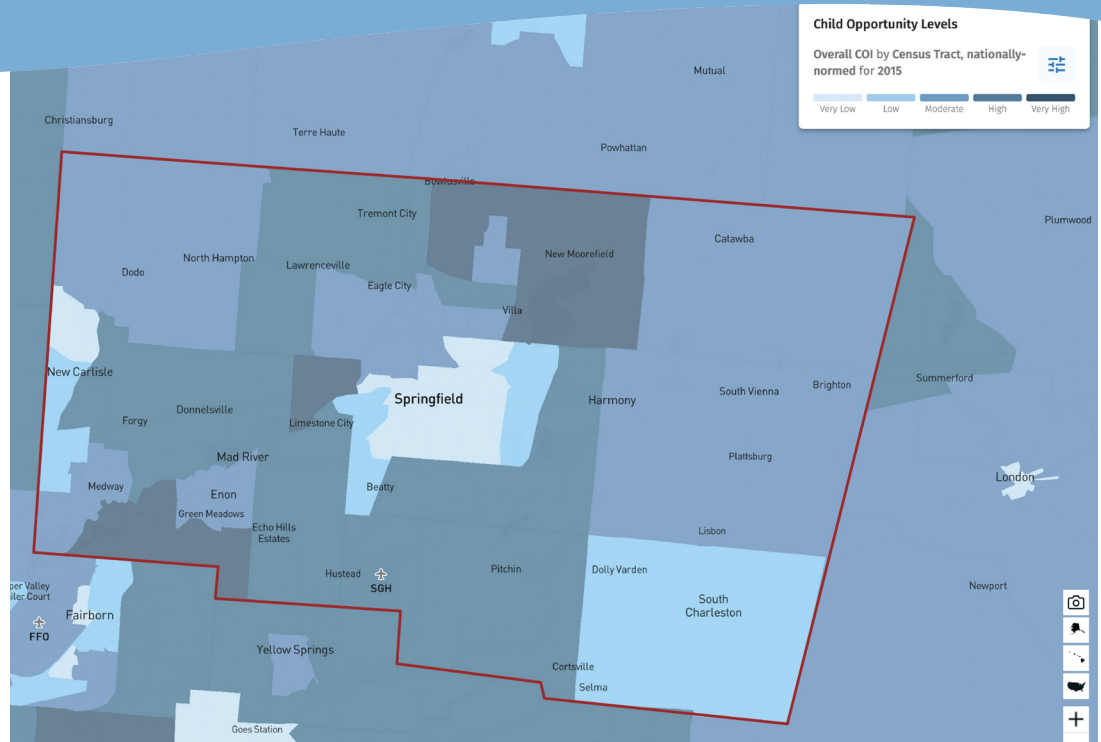
indicators	July 2020	November 2022
Percentage of children who are up to date on preventive care	71% had access to medical and dental care (2019)	Data Update Unavailable

Clark County pediatric profile

22.3% less than 18 years of age

Child Opportunity Index

The Child Opportunity Index (COI) measures and maps the quality of resources and conditions that matter for children to develop in a healthy way in the neighborhoods where they live.



economic stability

metric	county	Ohio	United States
% children in poverty	↑ 21%	17%	16%
income inequality*	↓ 4.2	4.6	4.9
school funding adequacy**	↑ \$1,634	\$927	\$741
median household income	↓ \$54,500	\$60,400	\$67,300
% household income required for childcare expenses	↑ 30%	27%	25%
% children in single-parent households	↑ 31%	28%	25%
% uninsured	↑ 9%	8%	11%

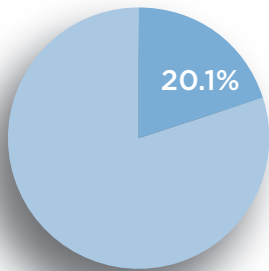
County Health Rankings, 2022

*Income Inequality: Ratio of household income at the 80th percentile to income at the 20th percentile.

**School Funding Adequacy: The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district.

food

Clark County food insecurity rate (child)



Feeding America, 2020

metric	county	Ohio	United States
food environment index*	↑ 7.2	6.8	7.8
% food insecure	↑ 15%	13%	11%
% limited access to healthy foods	↑ 8%	7%	6%
% eligible for free or reduced lunch	↑ 43%	36%	52%

County Health Rankings, 2022

*Food Environment Index: Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best).

education

Average overall kindergarten readiness score: 264.3.

The lowest average overall score was 253.6 and the highest score was 271.3 among 13 school districts.

note:

- Demonstrating overall: test score between 270-298
- Approaching overall: test score between 258-269
- Emerging overall: test score between 202-257

Ohio Department of Education, 2022

health outcomes

metric	county	Ohio	United States
% low birthweight	■ 9%	9%	8%
teen birth rate per 1,000 female population ages 15-19	↑ 32	21	19
child mortality rate per 100,000 population	■ 60	60	50
infant mortality rate per 1,000 live births	■ 7	7	6
% uninsured	↑ 9%	8%	11%

County Health Rankings, 2022

neighborhood & built environment

metric	county	Ohio	United States
% with access to exercise opportunities	↑ 80%	77%	80%
violent crime rate (per 100,000)*	↑ 368	293	386
school segregation**	↓ 0.16	0.30	0.25
% severe housing cost burden***	↓ 11%	12%	14%
% severe housing problems****	■ 13%	13%	17%
% broadband access	↑ 86%	85%	85%

County Health Rankings, 2022

*Violent Crime Rate: Number of reported violent crime offenses per 100,000 population.

**School Segregation: The extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. The index ranges from 0 to 1 with lower values representing a school composition that approximates race and ethnicity distributions in the student populations within the county, and higher values representing more segregation.

***Severe Housing Cost Burden: Percentage of households that spend 50% or more of their household income on housing.

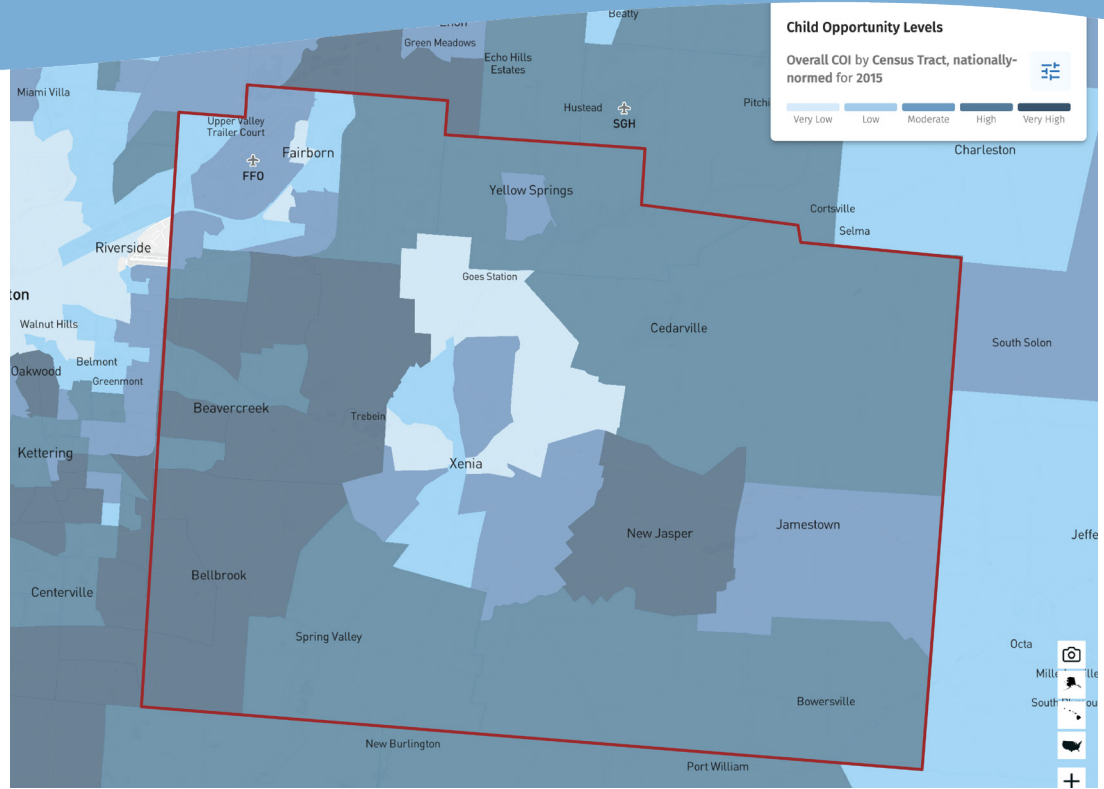
****Severe Housing Problems: Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities

Greene County pediatric profile

20.5% less than 18 years of age

Child Opportunity Index

The Child Opportunity Index (COI) measures and maps the quality of resources and conditions that matter for children to develop in a healthy way in the neighborhoods where they live.



economic stability

metric	county	Ohio	United States
% children in poverty	↓ 10%	17%	16%
income inequality*	↓ 4.5	4.6	4.9
school funding adequacy**	↑ \$2,592	\$927	\$741
median household income	↑ \$71,700	\$60,400	\$67,300
% household income required for childcare expenses	↑ 30%	27%	25%
% children in single-parent households	↓ 21%	28%	25%
% uninsured	↓ 7%	8%	11%

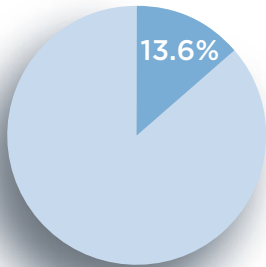
County Health Rankings, 2022

*Income Inequality: Ratio of household income at the 80th percentile to income at the 20th percentile.

**School Funding Adequacy: The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district.

food

Greene County food insecurity rate (child)



Feeding America, 2020

metric	county	Ohio	United States
food environment index*	↑ 7.9	6.8	7.8
% food insecure	↓ 12%	13%	11%
% limited access to healthy foods	↓ 6%	7%	6%
% eligible for free or reduced lunch	↓ 22%	36%	52%

County Health Rankings, 2022

*Food Environment Index: Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best).

education

Average overall kindergarten readiness score: 265.4.

The lowest average overall score was 256.9 and the highest score was 276.5 among 12 schools districts.

note:

- Demonstrating overall: test score between 270-298
- Approaching overall: test score between 258-269
- Emerging overall: test score between 202-257

Ohio Department of Education, 2022

health outcomes

metric	county	Ohio	United States
% low birthweight	↓ 7%	9%	8%
teen birth rate per 1,000 female population ages 15-19	↓ 12	21	19
child mortality rate per 100,000 population	↓ 40	60	50
infant mortality rate per 1,000 live births	↓ 5	7	6
% uninsured	↓ 7%	8%	11%

County Health Rankings, 2022

neighborhood & built environment

metric	county	Ohio	United States
% with access to exercise opportunities	↓ 76%	77%	80%
violent crime rate (per 100,000)*	↓ 124	293	386
school segregation**	↓ 0.06	0.30	0.25
% severe housing cost burden***	↓ 9%	12%	14%
% severe housing problems****	↓ 12%	13%	17%
% broadband access	↑ 89%	85%	85%

County Health Rankings, 2022

*Violent Crime Rate: Number of reported violent crime offenses per 100,000 population.

**School Segregation: The extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. The index ranges from 0 to 1 with lower values representing a school composition that approximates race and ethnicity distributions in the student populations within the county, and higher values representing more segregation.

***Severe Housing Cost Burden: Percentage of households that spend 50% or more of their household income on housing.

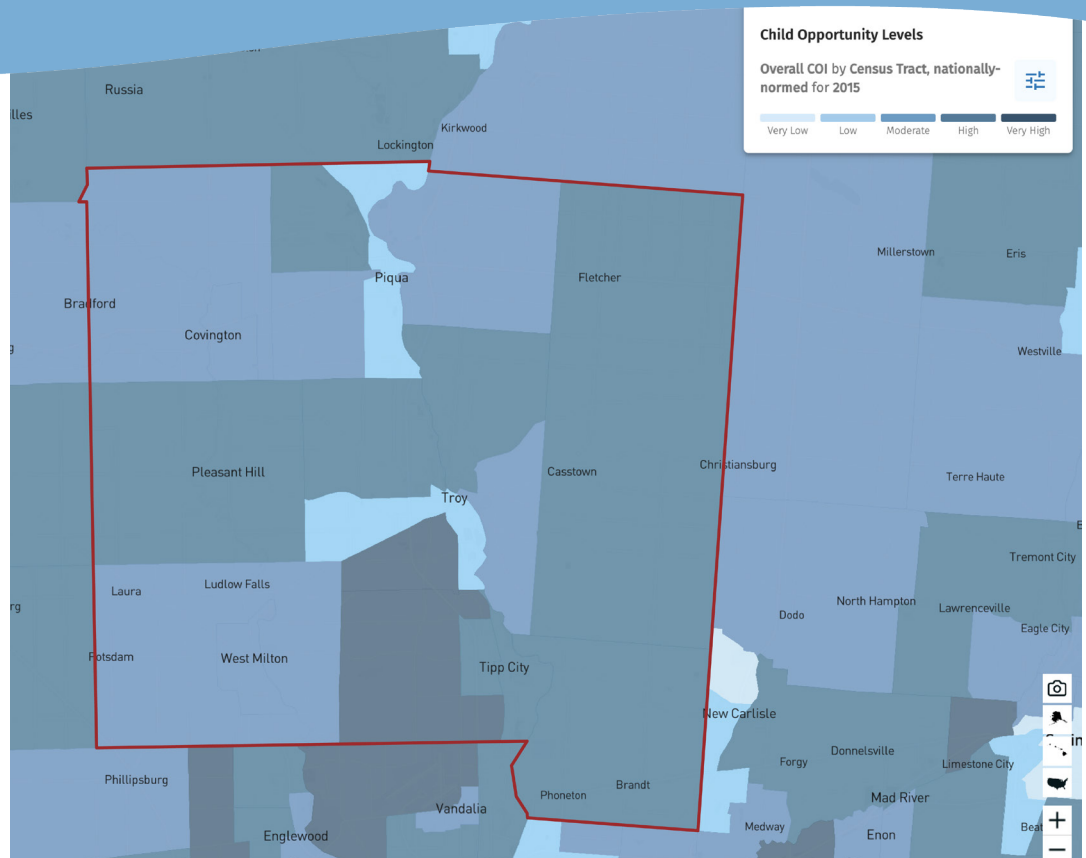
****Severe Housing Problems: Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities

Miami County pediatric profile

22.9% less than 18 years of age

Child Opportunity Index

The Child Opportunity Index (COI) measures and maps the quality of resources and conditions that matter for children to develop in a healthy way in the neighborhoods where they live.



economic stability

metric	county	Ohio	United States
% children in poverty	↓ 11%	17%	16%
income inequality*	↓ 3.9	4.6	4.9
school funding adequacy**	↑ \$4,486	\$927	\$741
median household income	↑ \$63,700	\$60,400	\$67,300
% household income required for childcare expenses	↓ 26%	27%	25%
% children in single-parent households	↓ 19%	28%	25%
% uninsured	8%	8%	11%

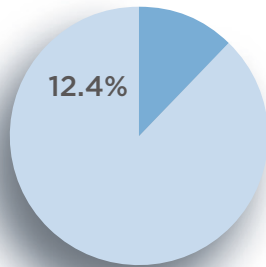
County Health Rankings, 2022

*Income Inequality: Ratio of household income at the 80th percentile to income at the 20th percentile.

**School Funding Adequacy: The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district.

food

Miami County food insecurity rate (child)



Feeding America, 2020

metric	county	Ohio	United States
food environment index*	↑ 8.2	6.8	7.8
% food insecure	↓ 12%	13%	11%
% limited access to healthy foods	↓ 4%	7%	6%
% eligible for free or reduced lunch	↑ 38%	36%	52%

County Health Rankings, 2022

*Food Environment Index: Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best).

education

Average overall kindergarten readiness score: 265.8.

The lowest average overall score was 257.6 and the highest score was 276.5 among 18 school districts.

note:

- Demonstrating overall: test score between 270-298
- Approaching overall: test score between 258-269
- Emerging overall: test score between 202-257

Ohio Department of Education, 2022

health outcomes

metric	county	Ohio	United States
% low birthweight	↓ 6%	9%	8%
teen birth rate per 1,000 female population ages 15-19	↑ 24	21	19
child mortality rate per 100,000 population	↓ 40	60	50
infant mortality rate per 1,000 live births	↓ 5	7	6
% uninsured	■ 8%	8%	11%

County Health Rankings, 2022

neighborhood & built environment

metric	county	Ohio	United States
% with access to exercise opportunities	↑ 81%	77%	80%
violent crime rate (per 100,000)*	↓ 108	293	386
school segregation**	↓ 0.08	0.30	0.25
% severe housing cost burden***	↓ 9%	12%	14%
% severe housing problems****	↓ 10%	13%	17%
% broadband access	↑ 87%	85%	85%

County Health Rankings, 2022

*Violent Crime Rate: Number of reported violent crime offenses per 100,000 population.

**School Segregation: The extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. The index ranges from 0 to 1 with lower values representing a school composition that approximates race and ethnicity distributions in the student populations within the county, and higher values representing more segregation.

***Severe Housing Cost Burden: Percentage of households that spend 50% or more of their household income on housing.

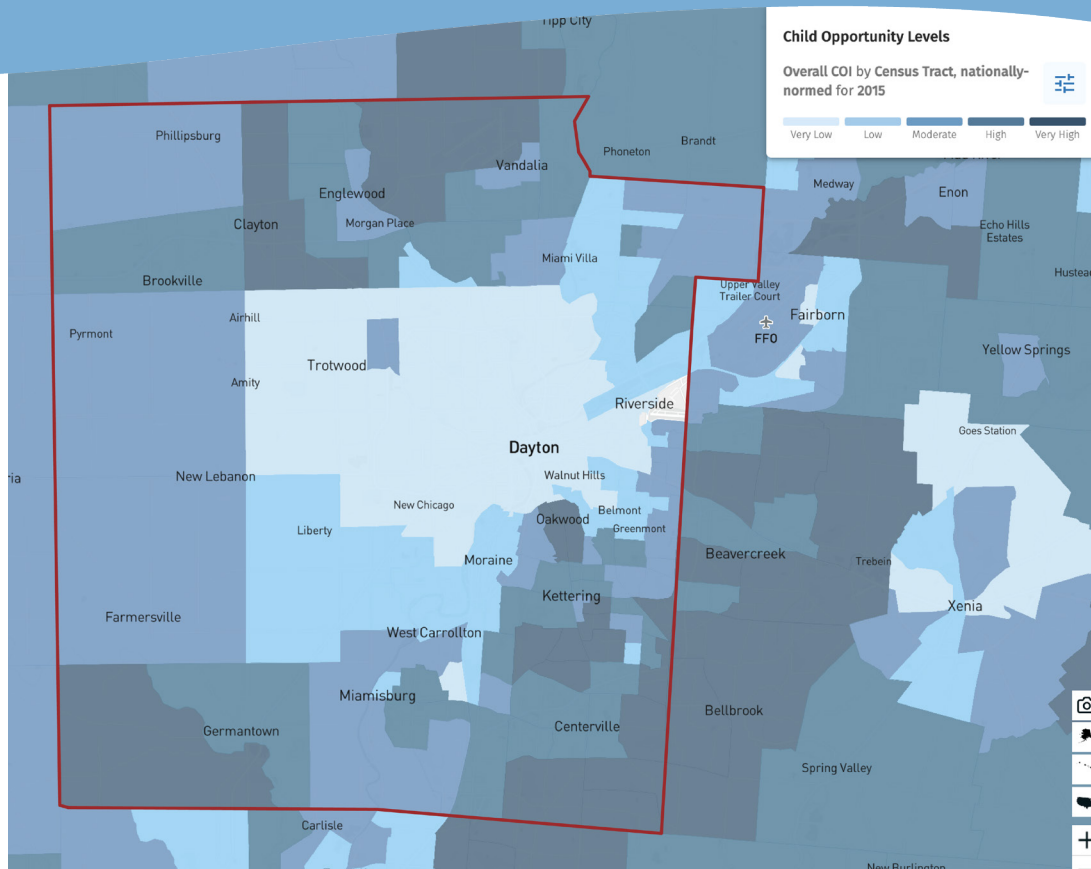
****Severe Housing Problems: Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities

Montgomery County pediatric profile

21.9% less than 18 years of age

Child Opportunity Index

The Child Opportunity Index (COI) measures and maps the quality of resources and conditions that matter for children to develop in a healthy way in the neighborhoods where they live.



economic stability

metric	county	Ohio	United States
% children in poverty	↑ 21%	17%	16%
income inequality*	↑ 4.8	4.6	4.9
school funding adequacy**	↓ \$45	\$927	\$741
median household income	↓ \$54,700	\$60,400	\$67,300
% household income required for childcare expenses	↑ 39%	27%	25%
% children in single-parent households	↑ 33%	28%	25%
% uninsured	↑ 9%	8%	11%

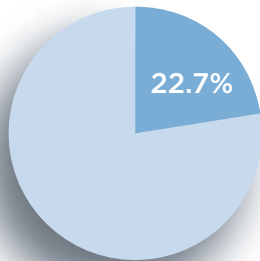
County Health Rankings, 2022

*Income Inequality: Ratio of household income at the 80th percentile to income at the 20th percentile.

**School Funding Adequacy: The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district.

food

Montgomery County food insecurity rate (child)



Feeding America, 2020

metric	county	Ohio	United States
food environment index*	↑ 7	6.8	7.8
% food insecure	↑ 14%	13%	11%
% limited access to healthy foods	↑ 10%	7%	6%
% eligible for free or reduced lunch	↑ 39%	36%	52%

County Health Rankings, 2022

*Food Environment Index: Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best).

education

Average overall kindergarten readiness score: 264.6.

The lowest average overall score was 255.9 and the highest score was 274.4 among 29 school districts.

note:

- Demonstrating overall: test score between 270-298
- Approaching overall: test score between 258-269
- Emerging overall: test score between 202-257

Ohio Department of Education, 2022

health outcomes

metric	county	Ohio	United States
% low birthweight	■ 9%	9%	8%
teen birth rate per 1,000 female population ages 15-19	↓ 25	21	19
child mortality rate per 100,000 population	↑ 70	60	50
infant mortality rate per 1,000 live births	↑ 8	7	6
% uninsured	↑ 9%	8%	11%

County Health Rankings, 2022

neighborhood & built environment

metric	county	Ohio	United States
% with access to exercise opportunities	↑ 91%	77%	80%
violent crime rate (per 100,000)*	↑ 399	293	386
school segregation**	↓ 0.25	0.30	0.25
% severe housing cost burden***	↑ 13%	12%	14%
% severe housing problems****	↑ 14%	13%	17%
% broadband access	↑ 86%	85%	85%

County Health Rankings, 2022

*Violent Crime Rate: Number of reported violent crime offenses per 100,000 population.

**School Segregation: The extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. The index ranges from 0 to 1 with lower values representing a school composition that approximates race and ethnicity distributions in the student populations within the county, and higher values representing more segregation.

***Severe Housing Cost Burden: Percentage of households that spend 50% or more of their household income on housing.

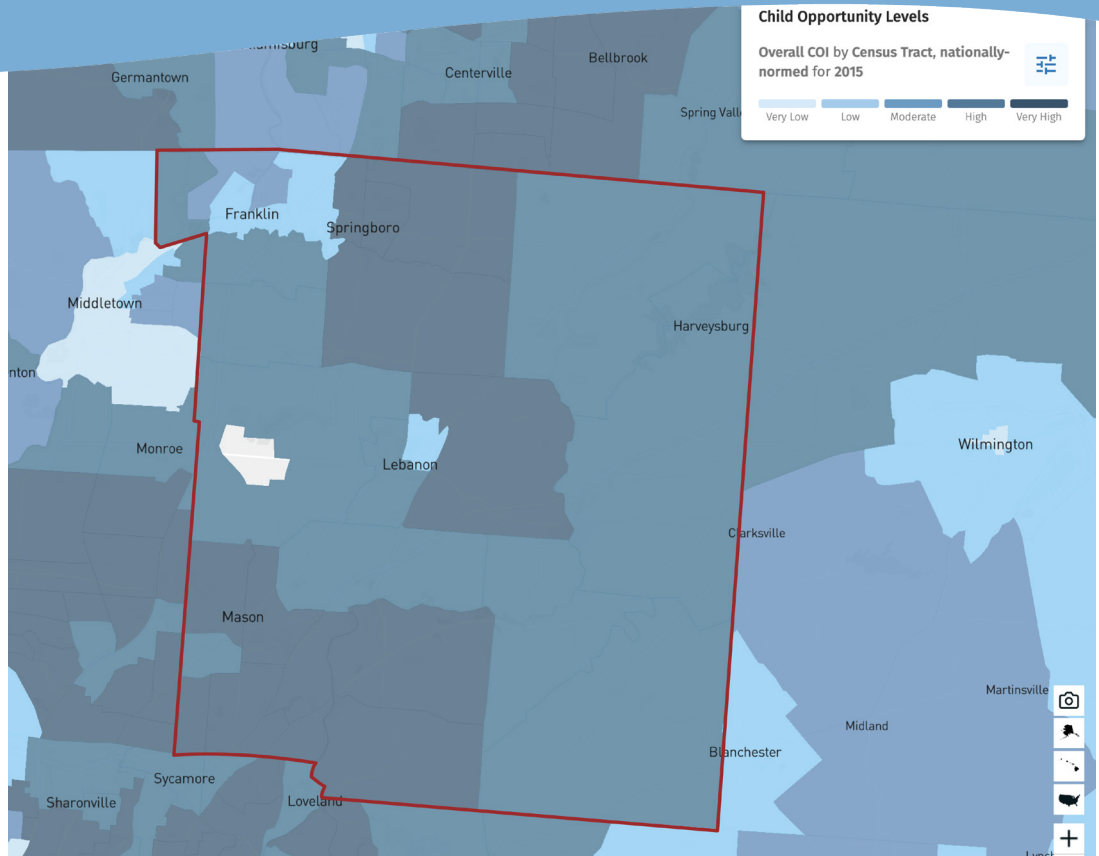
****Severe Housing Problems: Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities

Warren County pediatric profile

24% less than 18 years of age

Child Opportunity Index

The Child Opportunity Index (COI) measures and maps the quality of resources and conditions that matter for children to develop in a healthy way in the neighborhoods where they live.



economic stability

metric	county	Ohio	United States
% children in poverty	↓ 6%	17%	16%
income inequality*	↓ 3.8	4.6	4.9
school funding adequacy**	↑ \$3,801	\$927	\$741
median household income	↑ \$90,600	\$60,400	\$67,300
% household income required for childcare expenses	↓ 24%	27%	25%
% children in single-parent households	↓ 14%	28%	25%
% uninsured	↓ 5%	8%	11%

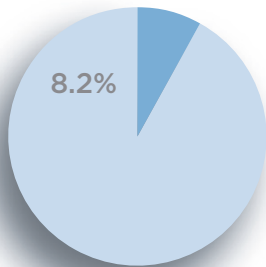
County Health Rankings, 2022

*Income Inequality: Ratio of household income at the 80th percentile to income at the 20th percentile.

**School Funding Adequacy: The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district.

food

Warren County food insecurity rate (child)



Feeding America, 2020

metric	county	Ohio	United States
food environment index*	↑ 8.6	6.8	7.8
% food insecure	↓ 9%	13%	11%
% limited access to healthy foods	↓ 6%	7%	6%
% eligible for free or reduced lunch	↓ 16%	36%	52%

County Health Rankings, 2022

*Food Environment Index: Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best).

education

Average overall kindergarten readiness score: 264.7.

The lowest average overall score was 253.5 and the highest score was 278.5 among 16 school districts.

note:

- Demonstrating overall: test score between 270-298
- Approaching overall: test score between 258-269
- Emerging overall: test score between 202-257

Ohio Department of Education, 2022

health outcomes

metric	county	Ohio	United States
% low birthweight	↓ 7%	9%	8%
teen birth rate per 1,000 female population ages 15-19	↓ 9	21	19
child mortality rate per 100,000 population	↓ 40	60	50
infant mortality rate per 1,000 live births	↓ 4	7	6
% uninsured	↓ 5%	8%	11%

County Health Rankings, 2022

neighborhood & built environment

metric	county	Ohio	United States
% with access to exercise opportunities	↑ 83%	77%	80%
violent crime rate (per 100,000)*	↓ 68	293	386
school segregation**	↓ 0.13	0.30	0.25
% severe housing cost burden***	↓ 8%	12%	14%
% severe housing problems****	↓ 9%	13%	17%
% broadband access	↑ 93%	85%	85%

County Health Rankings, 2022

*Violent Crime Rate: Number of reported violent crime offenses per 100,000 population.

**School Segregation: The extent to which students within different race and ethnicity groups are unevenly distributed across schools when compared with the racial and ethnic composition of the local population. The index ranges from 0 to 1 with lower values representing a school composition that approximates race and ethnicity distributions in the student populations within the county, and higher values representing more segregation.

***Severe Housing Cost Burden: Percentage of households that spend 50% or more of their household income on housing.

****Severe Housing Problems: Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities

overall survey results

This section presents the results of our primary data collection activities as described above including overall survey results and demographics and subgroup analysis by demographics of age, status of caring for or having children and race/ethnicity.

As Figure 1 shows, our primary data collection efforts included 64 community events, 22 partner email lists and 5 in-person data community outreach events. In total, we collected 2,137 surveys through all our efforts. We excluded those that were not in our 5 primary county service area. Therefore, the remaining 1,977 are included in the analysis below, with 86% representing the long version and 14% representing the short version.



Figure 1: Primary data collection efforts

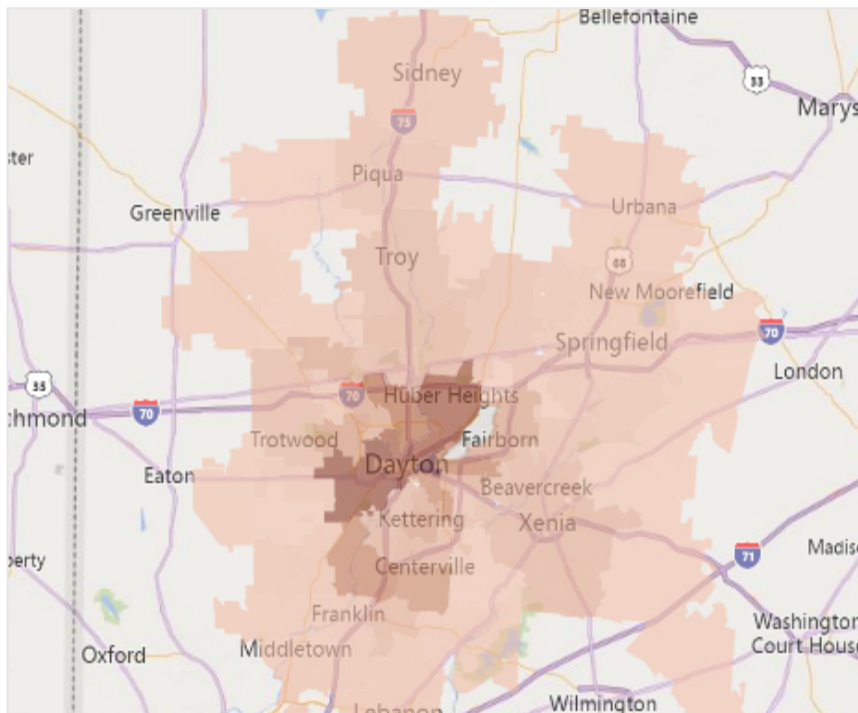


Figure 2. Map of survey results

Figure 2 shows a map of the ZIP codes from which surveys were collected with darker colors indicating more surveys in that ZIP code. As this map shows, we focused our efforts on three priority geographical areas, which are the darkest areas on this map. Most surveys (98%) were taken in English with only 2% in Spanish.

Table 3 below describes respondents to our survey across all geographic areas compared to Dayton Children’s population, defined as any patient seen at any hospital location for any type of encounter for the last 12 months, as well as to Dayton, Montgomery County, and the State of Ohio. Respondents identified most frequently as White (43%), followed by Black (24%) and Hispanic (7%) with 3% expressing a preference not to respond. Most respondents fell into the age categories of 25-34 (38%) and 35-44 (22%) years of age. The majority of respondents identified as female (78%) and reporting having at least one child (89%). Most had completed some college (26%) or high school (19%). Most came from Montgomery County (69%), followed by Greene (20%) and Miami (6%). Within Montgomery County, 19% were from northwest Dayton, 12% from east Dayton, and 6% from Old North Dayton.

demographics*	CHNA survey (N=1,977)		Dayton Children’s Hospital population (N=160,511)		Dayton* (N= 137,644)		Montgomery County* (N=537,309)		Ohio* (N=11,780,017)	
	N	%	N	%	N	%	N	%	N	%
race/ethnicity										
Black or African American	472	24%	26,335	16%	55,981	41%	113,728	21%	1,406,378	12%
Caucasian or white	854	43%	110,032	69%	65,511	48%	365,077	68%	9,110,505	77%
Hispanic or Latino/a/x	134	7%	6,582	4%	8,567	6%	19,111	4%	505,113	4%
More than one race/ethnicity	79	4%	6,234	4%	9,026	7%	34,044	2%	759,443	6%
Some other race or ethnicity	42	2%	7,874	5%	7,126	5%	24,462	5%	248,491	2%
Prefer not to respond	69	3%	141	< 1%	N/A	N/A	N/A	N/A	N/A	N/A
Unknown/(blank)	328	17%	3,313	2%	N/A	N/A	N/A	N/A	N/A	N/A
age										
24 and Younger	181	9%	N/A	N/A	42,676	31%	168,482	32%	3,662,044	31%
25-34	750	38%	N/A	N/A	19,984	15%	72,404	13%	1,539,983	13%
35-44	440	22%	N/A	N/A	17,675	13%	65,229	13%	1,460,736	13%
45-54	136	7%	N/A	N/A	10,299	7%	60,625	12%	1,424,952	12%
55 and Older	147	7%	N/A	N/A	45,422	33%	111,007	31%	3,465,089	31%
Prefer not to respond	18	1%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Unknown/(blank)	305	15%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
education										
Grade school	60	3%	N/A	N/A	3,179	2%	9,037	2%	219,901	2%
Less than high school/some high school	110	6%	N/A	N/A	7,548	5%	22,902	4%	846,551	7%
High school graduate or equivalent	381	19%	N/A	N/A	34,864	25%	120,630	22%	3,060,897	26%
Some college or technical school	516	26%	N/A	N/A	39,331	29%	127,404	24%	2,696,323	23%
Received four-year college degree	256	13%	N/A	N/A	12,236	9%	69,378	13%	1,667,944	14%
Some post-graduate studies	68	3%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Received advanced degree	216	11%	N/A	N/A	6,082	4%	45,968	9%	957,286	8%

Some other education	27	1%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Prefer not to respond	34	2%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Unknown/(blank)	309	16%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
gender identity			(Sex)							
Female	1,491	78%	80,794	50%	72,527	53%	277,243	52%	5,971,442	51%
Male	153	7%	79,628	50%	65,054	47%	258,597	48%	5,808,575	49%
Transgender/ genderqueer/ some other gender identity	12	1%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Prefer not to respond	17	1%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Unknown/(blank)	304	15%	89	< 1%	N/A	N/A	N/A	N/A	N/A	N/A

Table 3. Overall Survey Result Demographics

CHNA results for five county core region		frequency (N = 1,977)	percent of surveys (%)
survey type			
Long		1,681	86%
Short		296	14%
have or caring for children			
Yes		1,759	89%
No		218	11%
survey language			
English		1,940	98%
Spanish		37	2%
ZIP code- each target region, Dayton, Montgomery County, other counties			
Dayton		1,016	51%
	east Dayton (03,10)	244	12%
	north and northwest Dayton (05, 06, 17)	383	19%
	Old North Dayton (04)	115	6%
Montgomery County		1,363	69%
Clark County		78	4%
Greene County		403	20%
Miami County		116	6%
Warren County		17	1%

Table 4. Survey results for five county core regions

When asked how concerned they were with various health-related issues, 60% were very concerned about the health of moms and babies, 65% very concerned about emotional well-being, 49% very concerned with chronic disease, 53% very concerned about community conditions, and 56% very concerned about ability to get healthcare (Figure 3). Respondents most often ranked the health of moms and babies as the highest concern at 34%, followed by ability to get healthcare (22%) and emotional well-being (20%) as indicated in Figure 4.

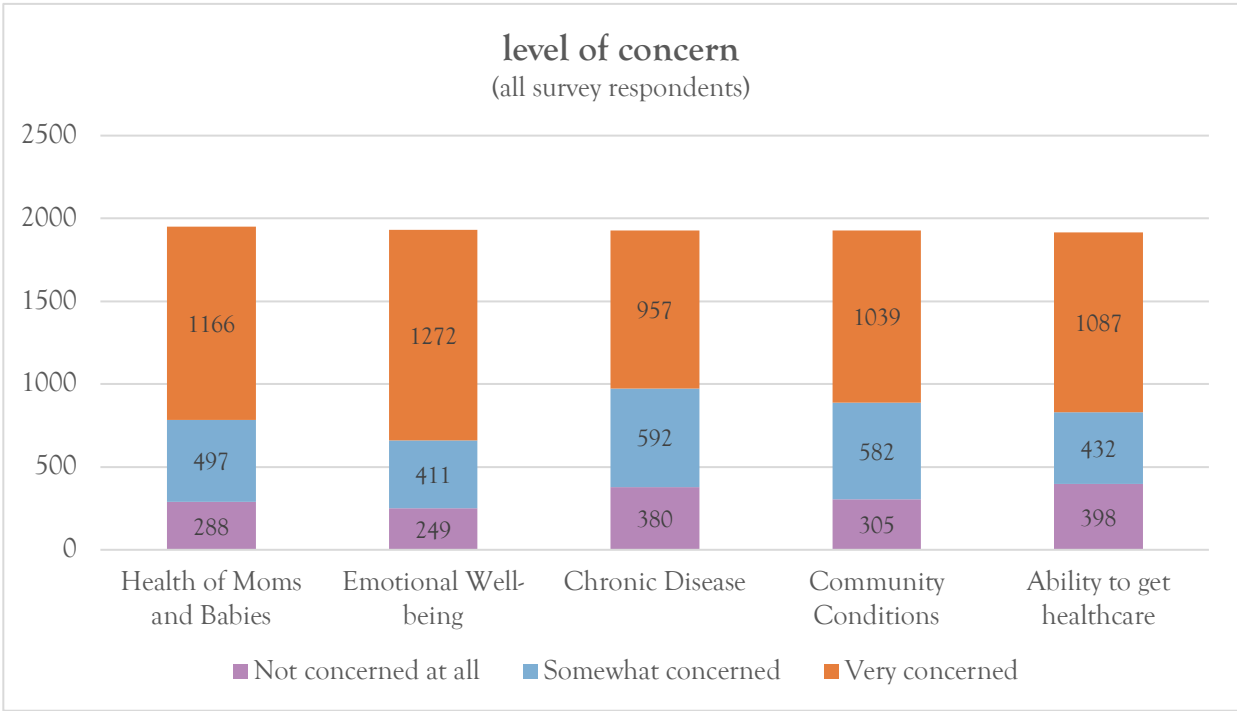


Figure 3. Level of concern for health topics

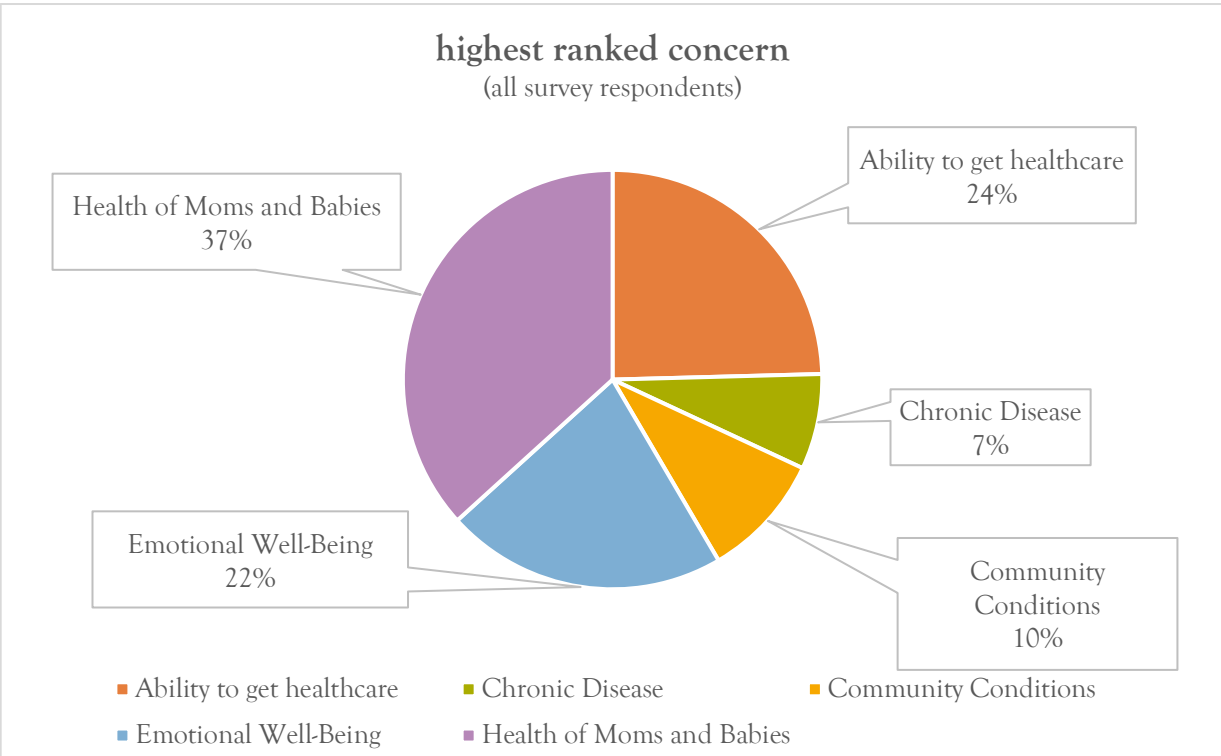


Figure 4. Highest ranked concern



Comments related to resources **needed** focused on various healthcare services, food, community conditions, and language needs. Additionally, respondents highlighted that while resources may be available, they may be difficult to access and a greater awareness of resources and how to access is needed. Here are some of the comments collected.

“Access to basics especially in areas of need. Food, clothing, shelter, and a sense of peace. Knowing where the next meal is coming from, where to feel safe, nurturing a child and engaging their minds once all other basic needs are provided.” - *Speaking about community condition needs*

“Better ways to find out about what’s available.” - *Speaking about needs for awareness of resources*

“Access to healthy food for affordable prices and recipes because some people don’t know where to begin. Helping families that go above what is considered “low income” and taking into account different factors to help those who are still struggling, but don’t meet certain criteria because they “make too much.” - *Speaking about food needs*

“Clinics in reasonably accommodating places. Sometimes it’s hard to get to places in larger cities. Also, maybe more satellite clinics in smaller towns for ease of access.” - *Speaking about healthcare needs*

“Advocates for non-English speaking people.” - *Speaking about language needs*

Respondents were also asked to identify resources that **existed** in the community to help families be healthy (Table 6). The most common resource focused on healthcare services with 26% identifying this resource, followed by community conditions at 20% and social services at 19%.

existing resources (all survey respondents)	frequency (n = 1681)	percent of surveys (%)
Healthcare services	444	26%
Community conditions	335	20%
Social services	323	19%
Community services and supports	296	18%
Food	242	14%
Education	81	5%
Non-food commodities	57	3%
Health education	42	2%
Nothing/not enough	113	7%
Not sure	141	8%

Table 6: Existing resources in the community to help families be healthy



Many respondents addressed multiple issues in one comment. Additionally, some commented that while services are available, there are limitations that may make them less accessible. Here are some comments from data collection.

“It is great that there are rehab services in Miami County. PLEASE PUT IN A URGENT CARE ALSO!” - *Speaking about existing healthcare resources*

“Existing resources for behavioral health are limited with long wait times to get in with providers. Community related conditions also create barriers to accessing health care.” - *Speaking about existing resources that are less accessible*

“Strong network of parks and playgrounds to allow families to stay active.” - *Speaking about existing community conditions*

“Job and Family Services, WIC, Moms & Babies First.” - *Speaking about existing social services*

“Counseling, parks for gatherings and physical activities, and having advocating people to talk to you about your situation.” - *Speaking about existing resources in multiple areas*

“Existing resources for behavioral health are limited with long wait times to get in with providers. Community related conditions also create barriers to accessing health care.” - *Speaking about existing resources that are less accessible*

When examining our community input posters, emotional well-being was viewed as most important (32%) followed by maternal/child health (22%) and ability to get health care (10%). Resources **needed** in the community identified in this data included mental health-related services and resources and housing. **Existing resources** identified focused mainly on education.



Graphic 1: Community events for data collection



Graphic 2: Community input posters

subgroup analysis

age of respondent

We then examined the survey results by age. This analysis grouped age into three categories: 24 and under, 25-44, and 45 and greater. The figures below show responses for levels of concern, highest ranked concerns, community needs, and community resources. As Figure 6 shows, all groups were very concerned about all five issues, and this was most clear with respect to emotional well-being and maternal/child health. Older respondents were more concerned than younger respondents about chronic disease and community conditions, indicating “very concerned” on 66% and 70% of surveys for those domains respectively (49% and 52% for ≤24, 45% and 49% for 25-44). As shown in Figure 7, maternal/child health was most frequently ranked highest across all age groups (46% for ≤24, 35% for 25-44, 27% for ≥45), followed by ability to get care (15% for ≤24, 24% for 25-44, 27% for ≥45). Tables 7 and 8 compare needs and existing resources identified by age group. All groups most frequently noted health care services, community conditions, and food as **needs**. For **existing resources**, all groups noted healthcare services most frequently. The 25–44-year-old and 45 years and older age groups noted community conditions as the second most frequently mentioned resource, compared to social services for the 24 and underage group.

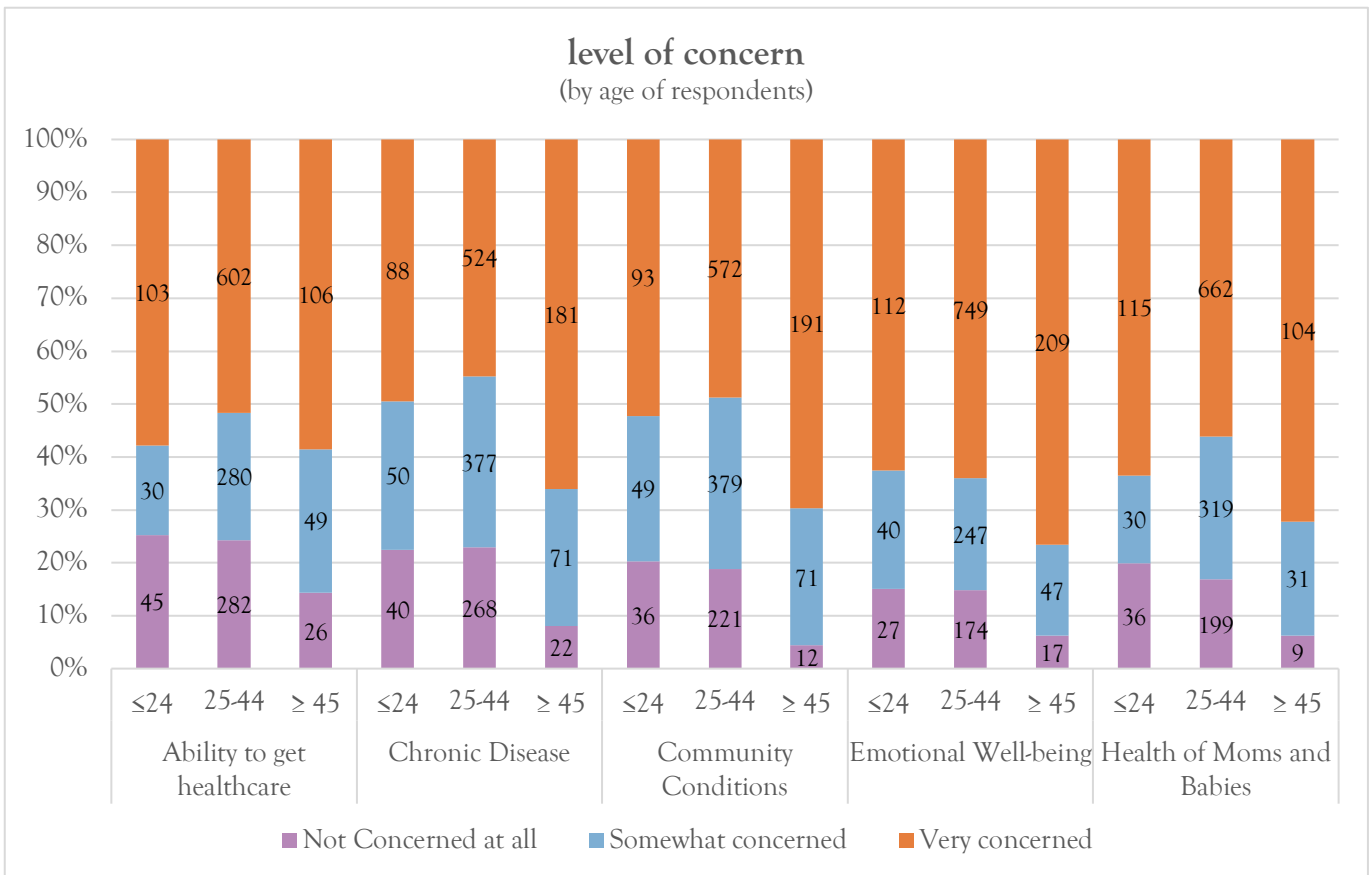


Figure 6. Level of concern for health topics (grouped by age)

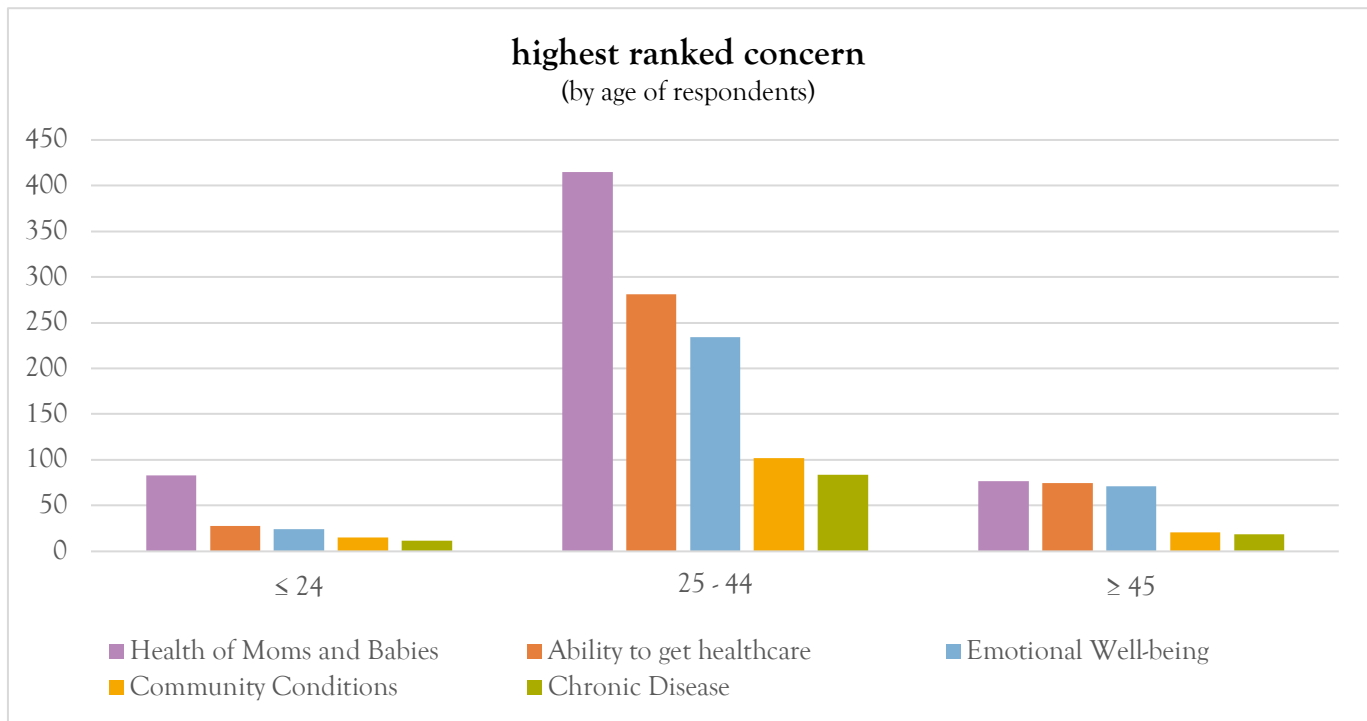


Figure 7. Highest ranked concern (grouped by age)

resources needed (by age) N = 1681	≤ 24 (N=181)		25 - 44 (N=1190)		≥ 45 (N=283)	
	N	%	N	%	N	%
Healthcare services	49	27%	354	30%	110	39%
Community conditions	36	20%	291	24%	78	28%
Food	38	21%	213	18%	58	20%
Community services and supports	26	14%	157	13%	28	10%
Social services	18	10%	106	9%	30	11%
Mental health services	7	4%	89	7%	26	9%
Health education	9	5%	95	8%	24	8%
Education	9	5%	47	4%	9	3%
Transportation	7	4%	33	3%	7	2%
Non-food commodities	9	5%	26	2%	5	2%
Awareness	3	2%	30	3%	4	1%
Community events	6	3%	31	3%	2	1%
Language	1	1%	4	0%	2	1%
Everything is needed	1	1%	9	1%	0	0%
Nothing needed	1	1%	21	2%	11	4%
Not sure	2	1%	13	1%	1	0%
Other	11	6%	50	4%	16	6%

Table 7. Needed resources in the community to help families be healthy (grouped by age)

existing resources (by age) N = 1681	≤ 24 (N=181)		25 - 44 (N=1190)		≥ 45 (N=283)	
	N	%	N	%	N	%
Healthcare services	48	27%	303	25%	86	30%
Community conditions	34	19%	264	22%	53	19%
Social services	42	23%	229	19%	47	17%
Community services and supports	32	18%	204	17%	59	21%
Food	26	14%	168	14%	44	16%
Education	4	2%	62	5%	15	5%
Non-food commodities	12	7%	41	3%	4	1%
Health education	5	3%	29	2%	8	3%
Nothing/not enough	7	4%	83	7%	21	7%
Not sure	13	7%	100	8%	25	9%

Table 8. Existing resources in the community to help families be healthy (grouped by age)

respondents with and without children

When comparing survey results by those who reported caring for children and those who reported not caring for children, some differences were noted. Respondents not caring for children were more likely to select “very concerned” for all domains and this was most pronounced in the domains of access to care and emotional well-being (Figure 8). Both groups most frequently selected maternal/child health as the highest concern followed by access to care (Figure 9). When asked about resources **needed** in the community, both groups most frequently identified healthcare services (30% and 38%), followed by community conditions (25% and 23%), and food (18% and 17%) (Table 9). Resources identified as **existing** in the community showed similar patterns with both groups most frequently identifying healthcare services (24% and 14%), followed by community conditions such as parks (19% and 11%), and social services such as WIC and SNAP (17% and 11%) (Table 10).

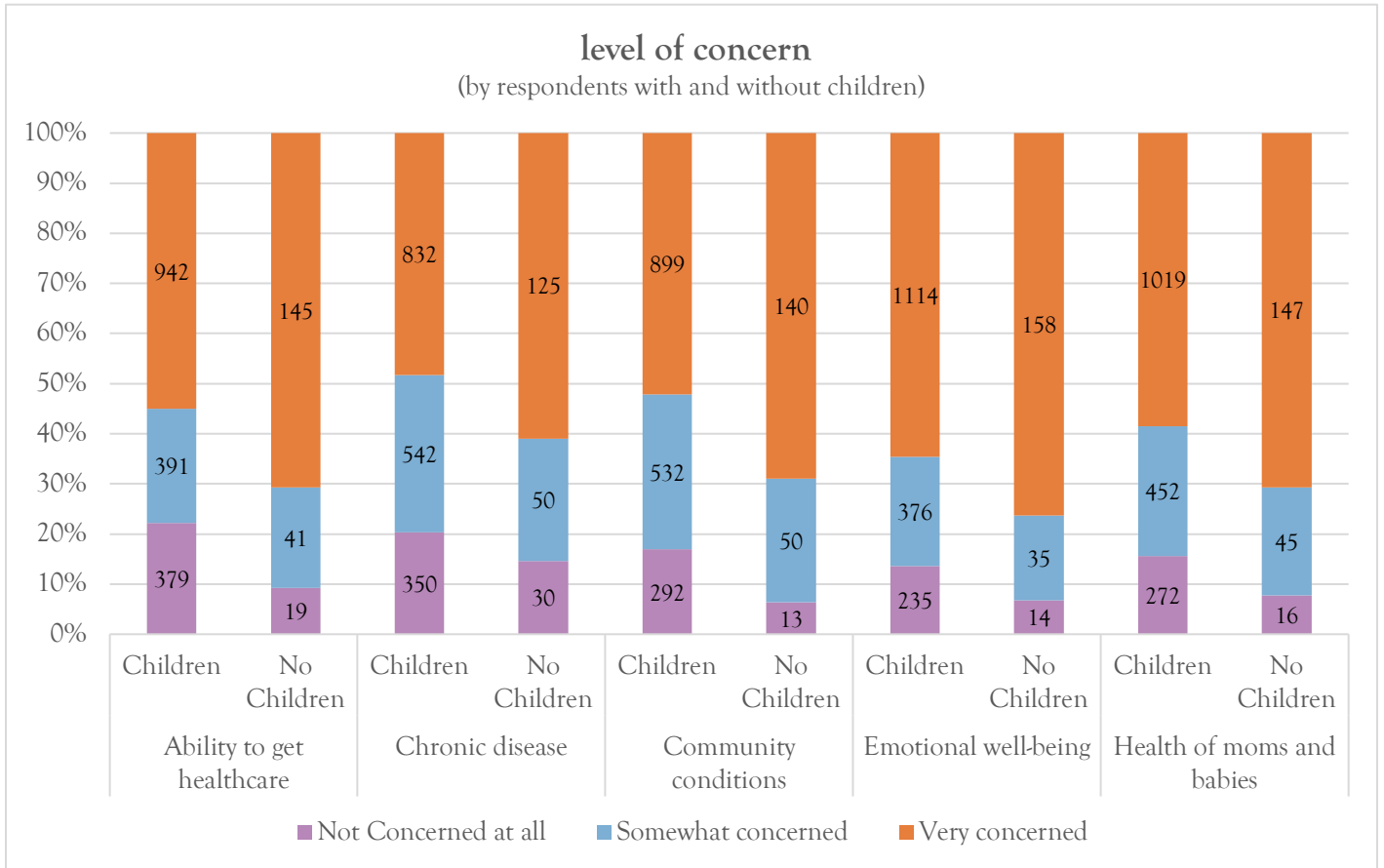


Figure 8. Level of concern for health topics (grouped by with/without children)

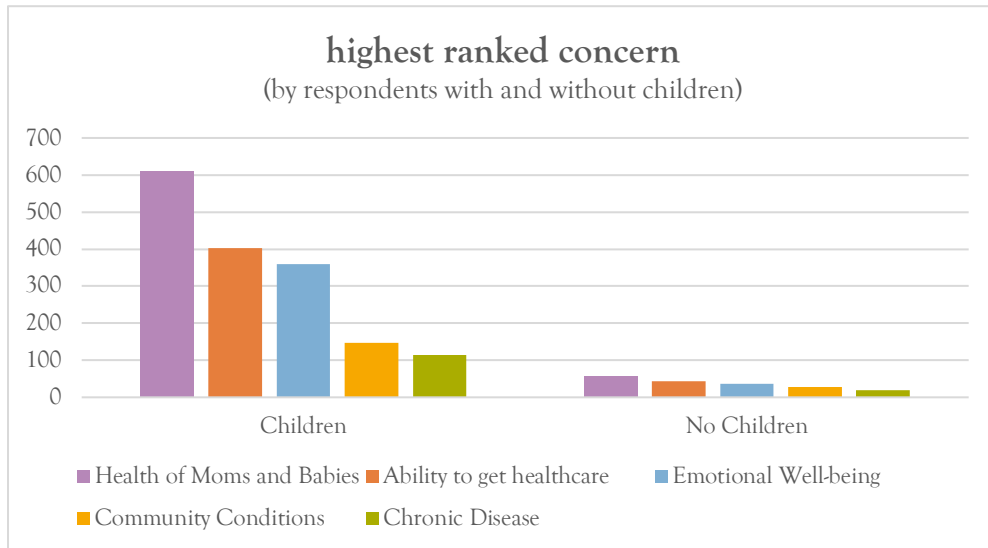


Figure 9. Highest ranked concern (Grouped by with/without children)

resources needed (by respondents with children or without children) N = 1681	children (N=1759)		no children (N=218)	
	N	%	N	%
Healthcare services	525	30%	83	38%
Community conditions	439	25%	51	23%
Food	317	18%	37	17%
Community services and supports	260	15%	30	14%
Social services	158	9%	21	10%
Mental Health services	128	7%	12	6%
Health education	130	7%	8	4%
Education	82	5%	12	6%
Transportation	53	3%	7	3%
Non-food commodities	41	2%	8	4%
Awareness	42	2%	5	2%
Community events	38	2%	3	1%
Language	8	0%	2	1%
Everything is needed	17	1%	3	1%
Nothing is needed	39	2%	9	4%
Not sure	17	1%	2	1%
Other	86	5%	19	9%

Table 9. Needed resources in the community to help families be healthy (grouped by children/no children)

existing resources (by respondents with children or without children) N = 1681	children (N=1759)		no children (N=218)	
	N	%	N	%
Healthcare services	414	24%	30	14%
Community conditions	332	19%	23	11%
Social services	300	17%	23	11%
Community services and supports	271	15%	25	11%
Food	219	12%	23	11%
Education	76	4%	5	2%
Non-food commodities	55	3%	2	1%
Health education	41	2%	1	0%
Nothing/not enough	107	6%	6	3%
Not sure	128	7%	13	6%

Table 10. Existing resources in the community to help families be healthy (grouped by children/no children)

responses by race/ethnicity of respondents

Across all races and ethnicities, respondents were most frequently “very concerned” about emotional well-being (65%) followed by the health of moms and babies (60%) (Figure 10). Respondents less frequently selected as “very concerned” for chronic disease (49%). For access to care, chronic disease, community conditions, and health of moms and babies, Black respondents were most likely to select “very concerned” compared to all other races. All groups most frequently selected health of moms and babies as their highest concern (38%), followed by access to health care (25%) (Figure 11). When asked about resources **needed** in the community (Table 11), all racial and ethnic groups showed similar patterns with healthcare (29%), community conditions (23%), and food (18%) as the top three most frequently identified. Similarly, all racial and ethnic groups most frequently identified health care services, community conditions, and community services and supports as the top three **resources that exist** in the community (Table 12).

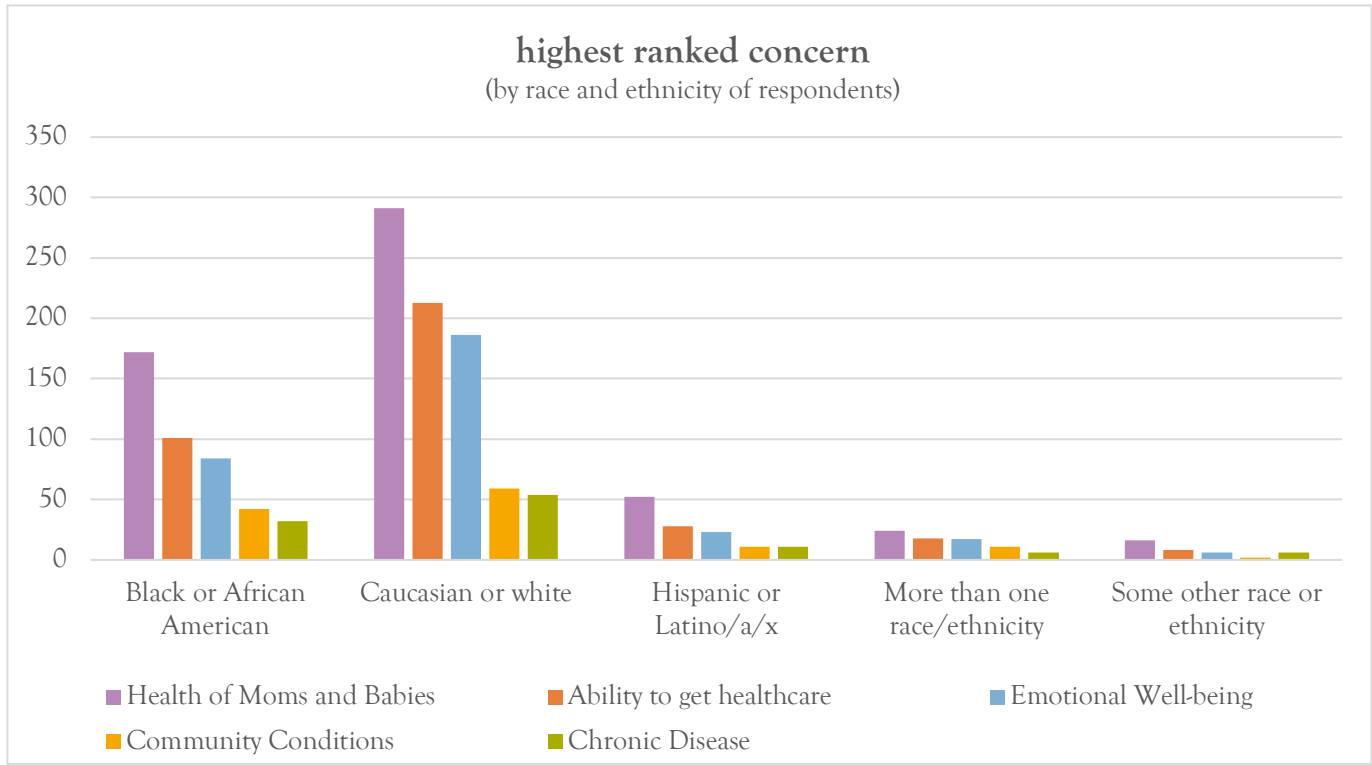


Figure 10. Highest ranked concern (grouped by race/ethnicity)

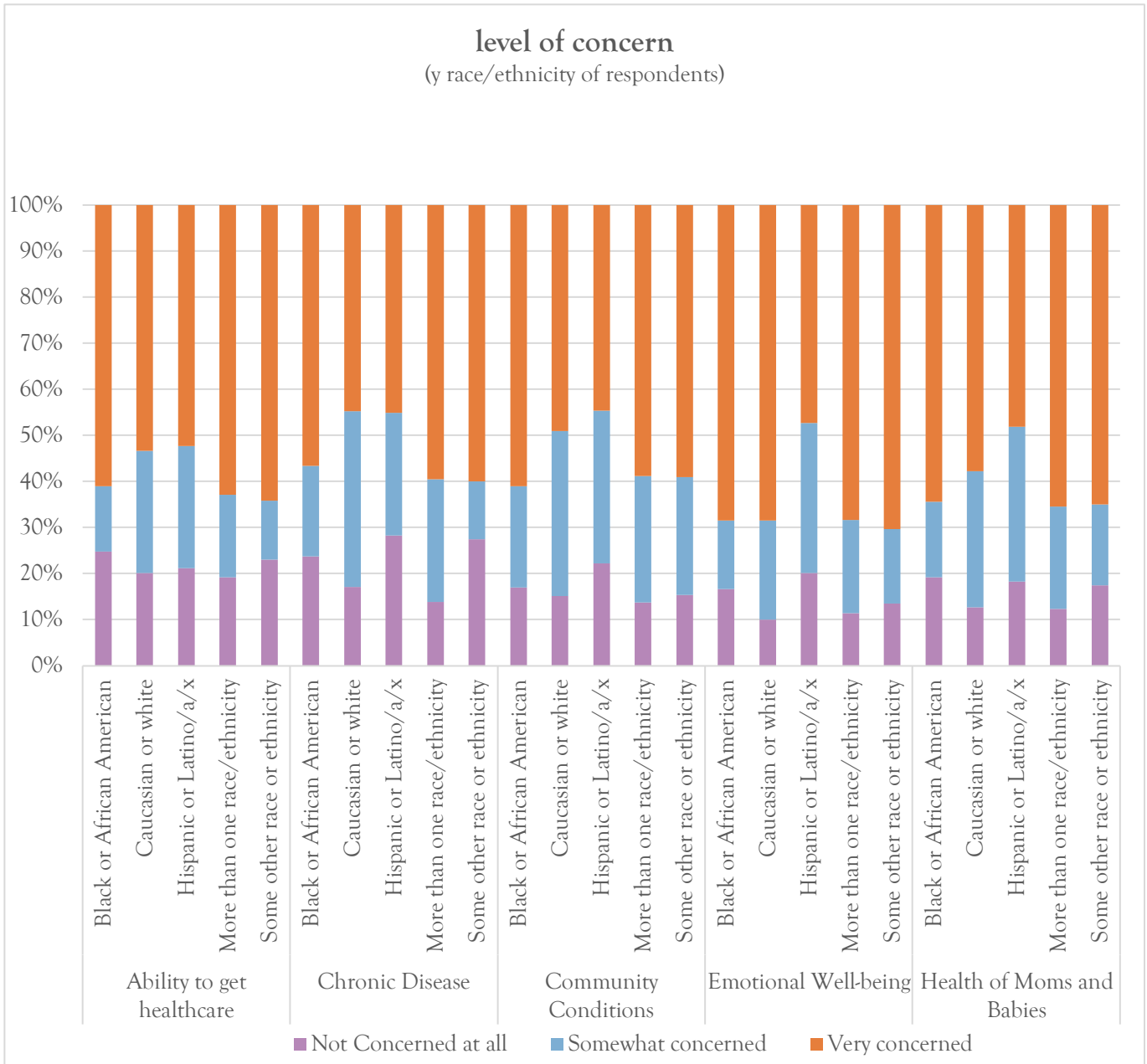


Figure 11: Level of concern for health topics (grouped by race/ethnicity)

resources needed (by race and ethnicity of respondents) N = 1681	Black or African American (N = 472)		Caucasian or white (N = 854)		Hispanic or Latino/a/x (N = 134)		More than one race/ ethnicity (N = 79)		Some other race or ethnicity (N = 42)	
	N	%	N	%	N	%	N	%	N	%
Healthcare services	138	29%	287	34%	29	22%	26	33%	10	24%
Community conditions	132	28%	203	24%	30	22%	18	23%	5	12%
Food	99	21%	149	17%	27	20%	18	23%	8	19%
Community services and supports	80	17%	98	11%	16	12%	8	10%	4	10%
Social services	80	17%	89	10%	8	6%	8	10%	2	5%
Mental health services	20	4%	82	10%	8	6%	5	6%	2	5%
Health education	34	7%	71	8%	10	7%	5	6%	5	12%
Education	24	5%	32	4%	1	1%	2	3%	3	7%
Transportation	14	3%	27	3%	0	0%	2	3%	0	0%
Non-food commodities	14	3%	19	2%	3	2%	2	3%	1	2%
Awareness	15	3%	16	2%	1	1%	4	5%	1	2%
Community events	16	3%	17	2%	1	1%	3	4%	0	0%
Language	2	0%	0	0%	3	2%	1	1%	0	0%
Everything is needed	4	1%	5	1%	1	1%	0	0%	0	0%
Nothing needed	9	2%	6	1%	1	1%	1	1%	1	2%
Not sure	5	1%	11	1%	0	0%	0	0%	0	0%
Other	23	5%	35	4%	3	2%	5	6%	4	10%

Table 11. Needed resources in the community to help families be healthy (grouped by race/ethnicity)

existing resources (by race and ethnicity of respondents) N = 1681	Black or African American (N = 472)		Caucasian or white (N = 854)		Hispanic or Latino/a/x (N = 134)		More than one race/ethnicity (N = 79)		Some other race or ethnicity (N = 42)	
	N	%	N	%	N	%	N	%	N	%
Healthcare services	124	26%	237	28%	23	14%	23	29%	13	31%
Community conditions	112	24%	175	20%	19	12%	19	24%	15	36%
Social services	88	19%	173	20%	15	9%	19	24%	9	21%
Community services and supports	98	21%	144	17%	19	12%	19	24%	8	19%
Food	73	15%	123	14%	14	9%	12	15%	8	19%
Education	12	3%	54	6%	1	1%	6	8%	6	14%
Non-food commodities	21	4%	27	3%	2	1%	5	6%	1	2%
Health education	10	2%	22	3%	4	2%	3	4%	1	2%
Nothing/not enough	44	9%	43	5%	10	6%	5	6%	3	7%
Not sure	40	8%	71	8%	11	7%	5	6%	4	10%

Table 12: Existing resources in the community to help families be healthy (grouped by race/ethnicity)

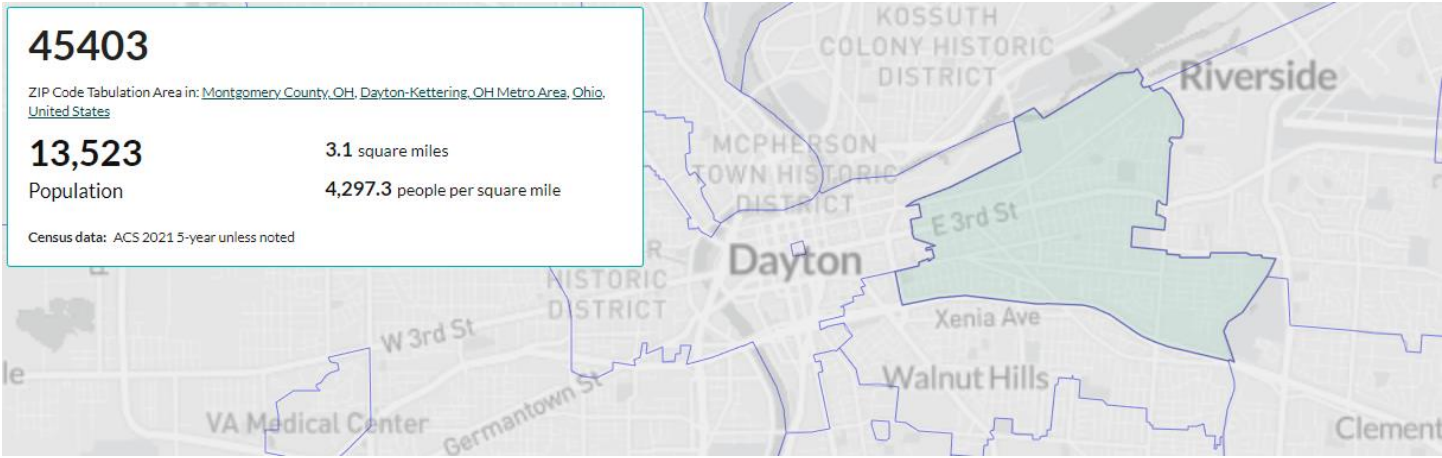
results by geographic priority areas

Based on the review of secondary data, it was clear that there was a greater need to focus in on Montgomery County. Each county profile included in the secondary data section of this report show areas of improvement and decline. When reviewing the Montgomery County data, there was a clear overall report of decline across all areas. Because of this, we decided to dig deeper into the data, considering the child opportunity index to zero in on areas of need. The following profiles are neighborhood and ZIP code specific to align with a deeper dive into communities. East Dayton (45403 and 45410), Old North Dayton (45404) and west Dayton (45405, 45406 and 45417).





east Dayton



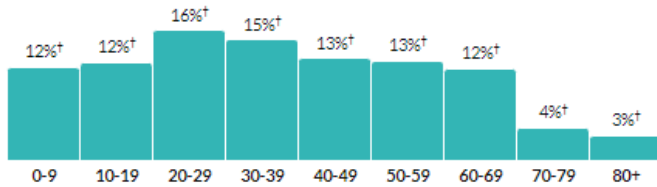
45403 consists of the Burkhardt, Eastern Hills, Historic Inner East, Springfield, and Wright View neighborhoods as well as the St. Anne’s Hill and Huffman historic districts. This ZIP code is defined by the Mad River to the north, downtown Dayton to the west, U.S. Route 35 to the south, and the city of Riverside to the east. Historically, the area nearest the Mad River was primarily a commercial district centered around the railroad industry and local train depot. Today, many of the former industrial buildings have been repurposed to fit modern uses and are occupied by technology firms, arts communities, and other businesses. The areas farther east are more suburban residential neighborhoods which saw growth after World War II as veterans returned home and began building more single-family homes. The neighborhoods within 45403 are home to many active and prominent neighborhood associations, historic societies, cultural and faith-based community centers, and other anchor institutions. 45403 has a Walk Score of 55 and is considered somewhat walkable.

Age

36.1
Median age

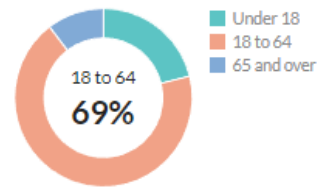
about 90 percent of the figure in the Dayton-Kettering, OH Metro Area: 39.2
about 90 percent of the figure in Ohio: 39.4

Population by age range



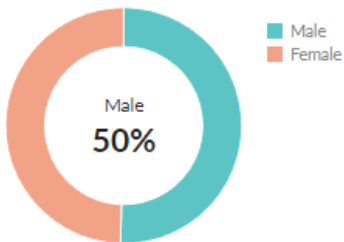
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Population by age category



Show data / Embed

Sex



Show data / Embed

Race & Ethnicity



* Hispanic includes respondents of any race. Other categories are non-Hispanic.

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Income

\$19,666

Per capita income

about three-fifths of the amount in the Dayton-Kettering, OH Metro Area: \$34,164

about three-fifths of the amount in Ohio: \$34,526

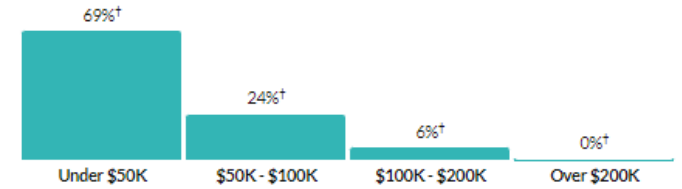
\$32,750

Median household income

about half the amount in the Dayton-Kettering, OH Metro Area: \$61,763

about half the amount in Ohio: \$61,938

Household income



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Poverty

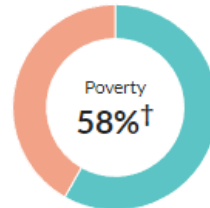
34.4%

Persons below poverty line

more than double the rate in the Dayton-Kettering, OH Metro Area: 13.4%

more than double the rate in Ohio: 13.4%

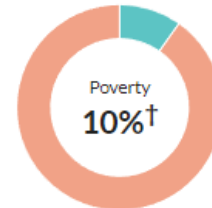
Children (Under 18)



■ Poverty
■ Non-poverty

Show data / Embed

Seniors (65 and over)



■ Poverty
■ Non-poverty

Show data / Embed

Educational attainment

74.3%

High school grad or higher

about 80 percent of the rate in the Dayton-Kettering, OH Metro Area: 91.9%

about 80 percent of the rate in Ohio: 91.1%

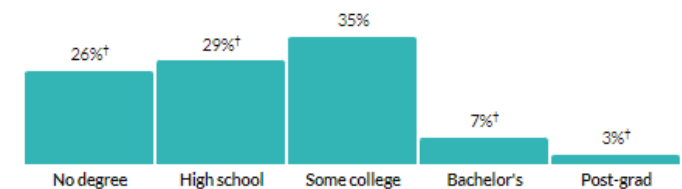
10.4%

Bachelor's degree or higher

about one-third of the rate in the Dayton-Kettering, OH Metro Area: 31%

about one-third of the rate in Ohio: 29.7%

Population by highest level of education



* Universe: Population 25 years and over

Show data / Embed

<https://dayton-forward-2040-daytonohio.hub.arcgis.com/pages/northeast>

Citation: U.S. Census Bureau (2021). *American Community Survey 5-year estimates*. Retrieved from *Census Reporter Profile page for 45403* <http://censusreporter.org/profiles/86000US45403-45403/>

<https://liveindayton.org/neighborhood-profiles/>

45410

ZIP Code Tabulation Area in: [Montgomery County, OH](#), [Dayton-Kettering, OH Metro Area](#), [Ohio](#), [United States](#)

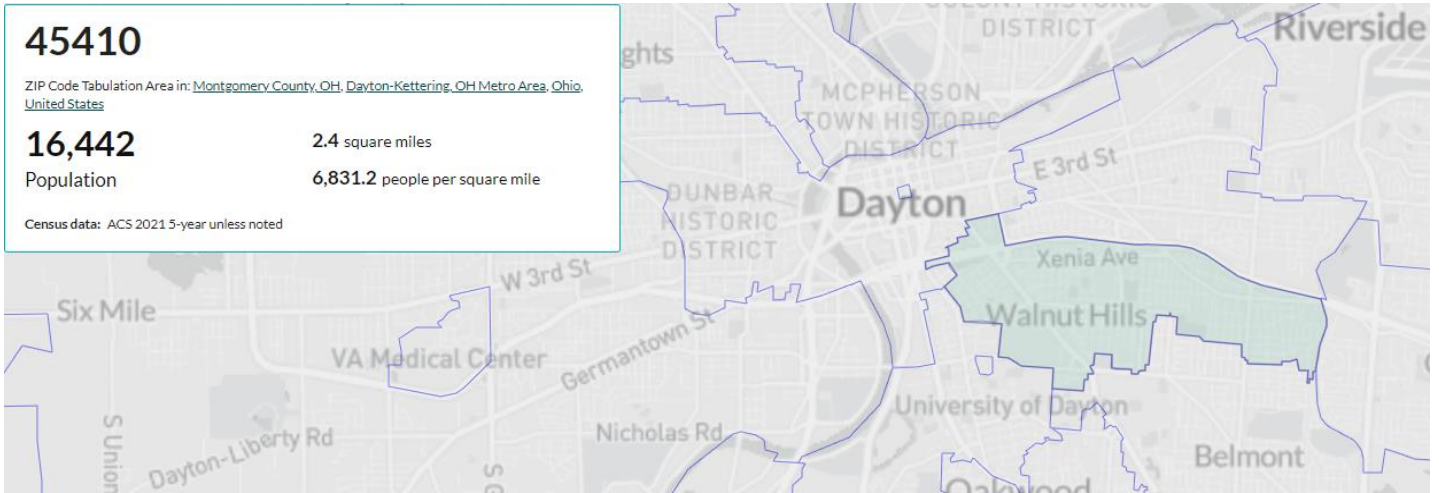
16,442

Population

2.4 square miles

6,831.2 people per square mile

Census data: ACS 2021 5-year unless noted



45410 covers the area of east Dayton bordered by US 35 to the north and S. Smithville Road to the east, encompassing the neighborhoods of Hearthstone, Linden Heights, Walnut Hills, Twin Towers, and South Park. By the late 19th century, this area was largely populated by Irish, German, and Russian Jewish immigrants, all with their own religious institutions serving as cultural and social hubs in the community. These neighborhoods saw significant growth and expansion to the southeast in the early 20th century with the introduction of electric streetcar routes, and later after World War II as veterans returned to start families and build new homes. Suburbanization in the later half of the 20th century caused some decline in this area. Today, you can see many indicators of some of Dayton's first suburbs in the surviving business districts, religious organizations, and parks. 45410 has a Walk Score of 60 and is ranked as the second most walkable area of Dayton.

Age

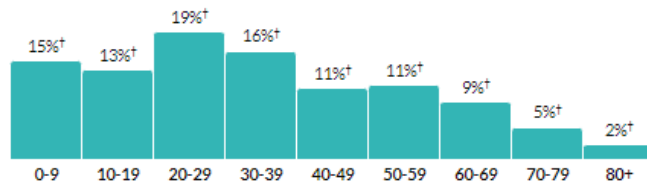
31.2

Median age

about 80 percent of the figure in the Dayton-Kettering, OH Metro Area: 39.2

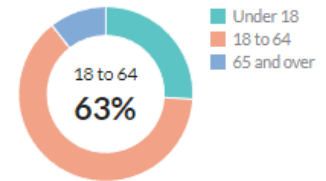
about 80 percent of the figure in Ohio: 39.4

Population by age range



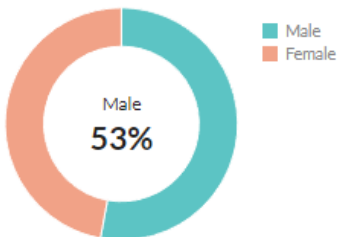
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Population by age category



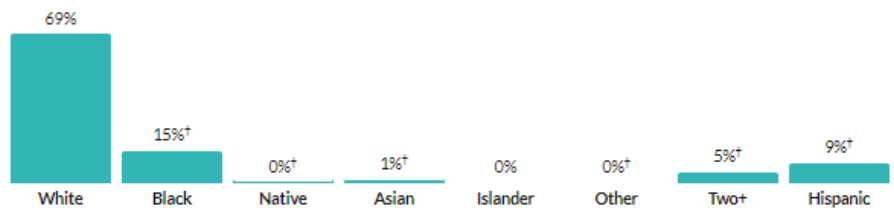
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Sex



Show data / Embed

Race & Ethnicity



* Hispanic includes respondents of any race. Other categories are non-Hispanic.

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Income

\$21,454

Per capita income

about three-fifths of the amount in the Dayton-Kettering, OH Metro Area: \$34,164

about three-fifths of the amount in Ohio: \$34,526

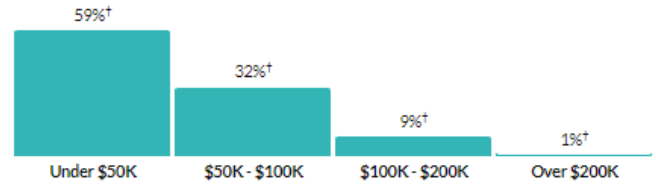
\$39,018

Median household income

about three-fifths of the amount in the Dayton-Kettering, OH Metro Area: \$61,763

about three-fifths of the amount in Ohio: \$61,938

Household income



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Poverty

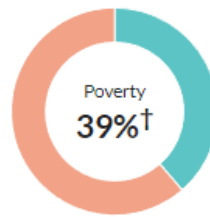
29.8%

Persons below poverty line

more than double the rate in the Dayton-Kettering, OH Metro Area: 13.4%

more than double the rate in Ohio: 13.4%

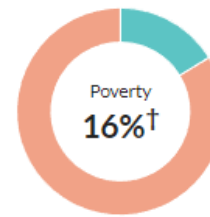
Children (Under 18)



■ Poverty
■ Non-poverty

Show data / Embed

Seniors (65 and over)



■ Poverty
■ Non-poverty

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Educational attainment

82%

High school grad or higher

about 90 percent of the rate in the Dayton-Kettering, OH Metro Area: 91.9%

about 90 percent of the rate in Ohio: 91.1%

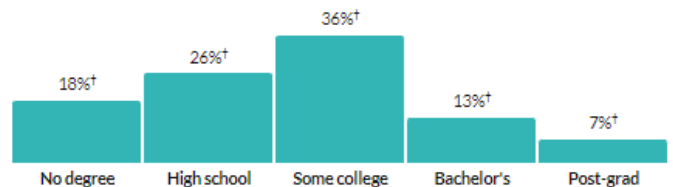
19.9%

Bachelor's degree or higher

about two-thirds of the rate in the Dayton-Kettering, OH Metro Area: 31%

about two-thirds of the rate in Ohio: 29.7%

Population by highest level of education



* Universe: Population 25 years and over

Show data / Embed

Citation: U.S. Census Bureau (2021). *American Community Survey 5-year estimates*. Retrieved from *Census Reporter Profile page for 45410* <http://censusreporter.org/profiles/86000US45410-45410/>

<https://www.walkscore.com/OH/Dayton/45410>

<https://dayton-forward-2040-daytonohio.hub.arcgis.com/pages/southeast>

east Dayton survey results

In total, we collected 244 surveys in the 45403 and 45410 ZIP codes which are included in the analysis below, with 76% representing the long version and 24% representing the short version. Most surveys (93%) were taken in English with the other 7% completed in Spanish. Table 13 below describes respondents to our survey in these east Dayton ZIP codes. Respondents identified most frequently as white (39%), followed by unknown (27%), Hispanic (18%), and Black (10%). Most respondents were 25-34 years of age (30%) and the age of 26% of respondents was unknown. The majority of respondents identified as female (61%), and 86% of all respondents reported having at least one child. The level of education for most respondents was unknown (26%), while 25% were high school graduates and 23% had some college or technical school. When asked about their level of concern regarding several health-related topics, East Dayton residents most frequently said that they were very concerned about their ability to get healthcare (61%) and emotional well-being (60%) (Figure 12). When asked to rank child health priorities, people most often ranked health of moms and babies as their top priority (40%). Emotional well-being (21%) was ranked as the highest priority second most often, followed by ability to get healthcare (19%) (Figure 13). When asked what resources are **needed** in the community to help families be healthy (Table 14), community conditions (26%) were most often mentioned, followed by healthcare services (23%) and then food (18%). **Existing resources** (Table 15) in the community were most often identified as social services (17%), followed by healthcare services (15%) and then food and community conditions (both 29%).

demographics for east Dayton (ZIP codes 45403 & 45410) N = 244		
race/ethnicity	N	%
Black or African American	25	10%
Caucasian or white	95	39%
Hispanic or Latino/a/x	43	18%
More than one race/ethnicity	3	1%
Some other race or ethnicity	7	7%
Prefer not to respond	6	2%
Unknown	65	27%
age		
Under 24	18	7%
25-34	74	30%
35-44	51	21%
45-54	17	7%
55 and Older	20	8%
Unknown	64	26%
education		
Grade school	16	7%
Less than high school/some high school	26	11%
High school graduate or equivalent	60	25%
Some college or technical school	56	23%
Received four-year college degree	12	5%
Some post-graduate studies	2	1%
Received advanced degree	7	3%
Prefer not to respond	2	1%
Some other education	0	0
Unknown	63	26%

gender identity		
Female	150	61%
Male	29	12%
Transgender/Genderqueer/Some other gender	2	<1%
Prefer not to respond/Unknown	63	26%
survey type		
Long	183	76%
Short	61	24%
children		
Children	211	86%
No Children	33	14%
language		
English	226	93%
Spanish	18	7%

Table 13. Demographics for surveys from east Dayton

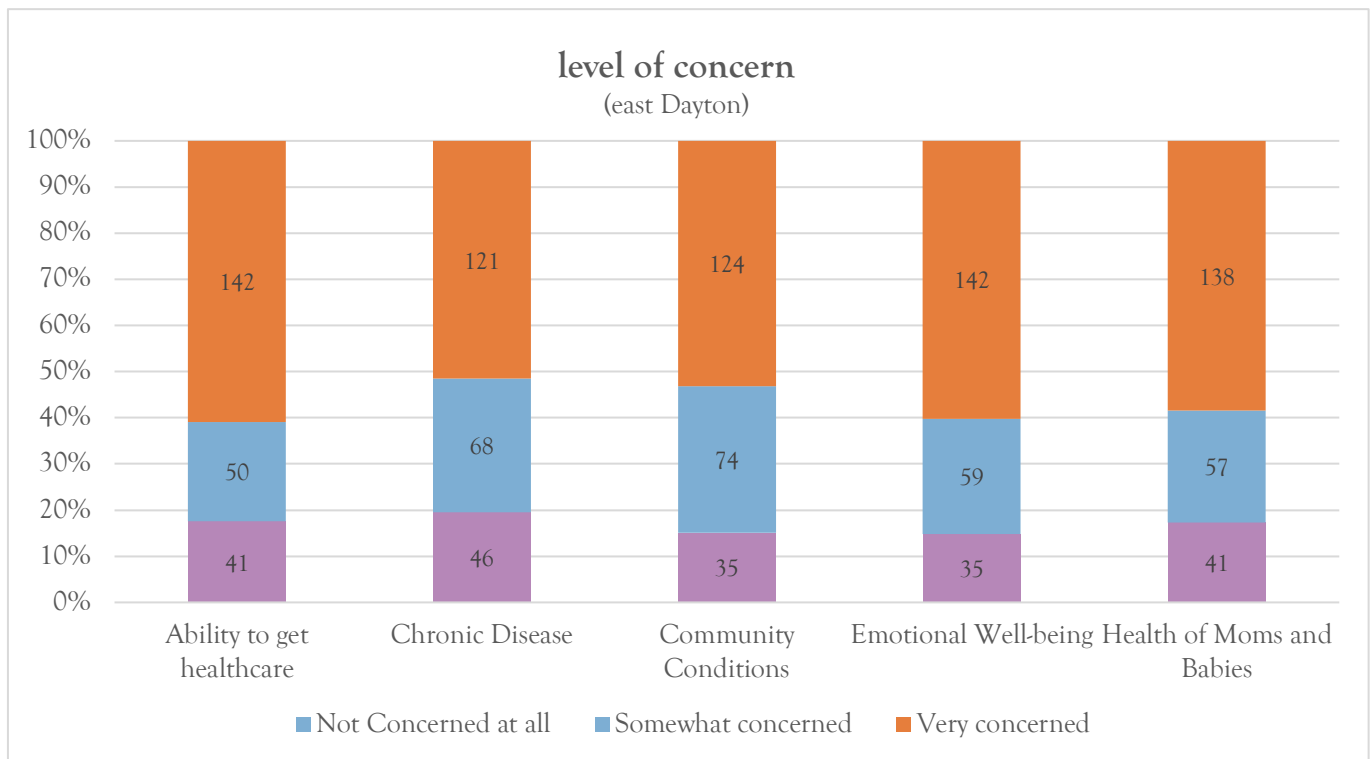


Figure 12. Level of concern for health topics (East Dayton)

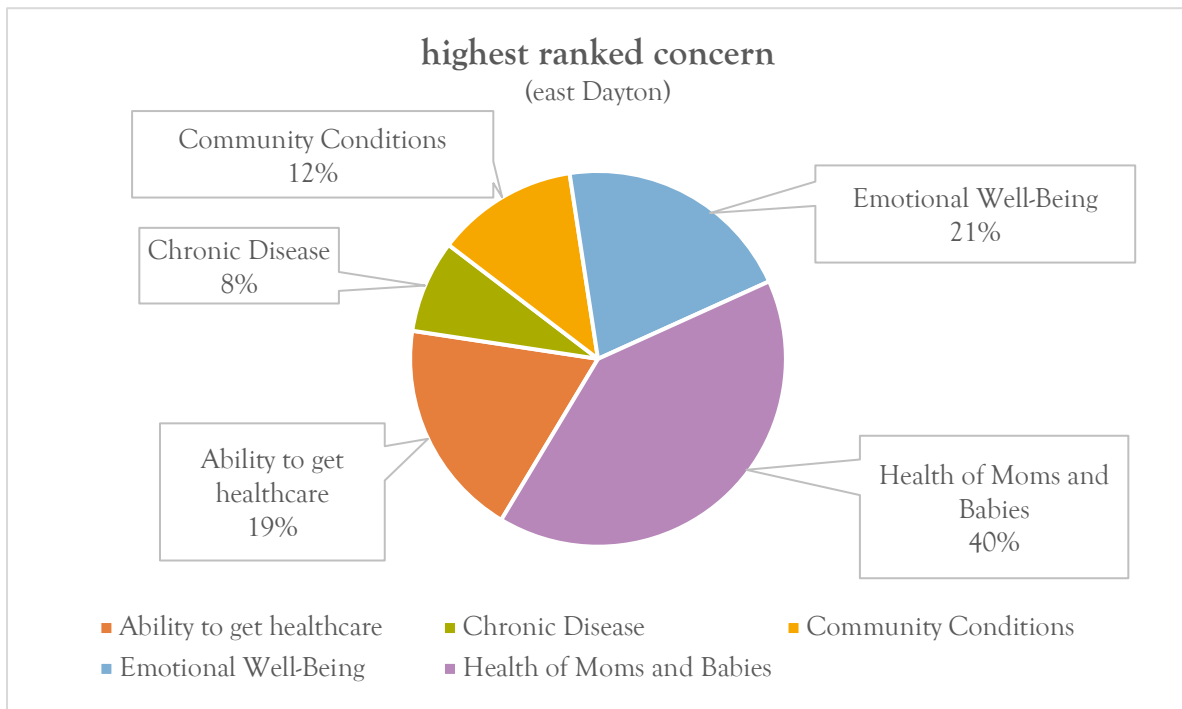


Figure 13. Highest ranked concern (east Dayton)

resources needed (east Dayton)	frequency (N = 244)	percent of surveys (%)
Healthcare services	57	23%
Community conditions	63	26%
Food	45	18%
Community services and supports	13	5%
Social services	17	7%
Mental health services	8	3%
Health education	13	5%
Education	9	4%
Transportation	15	6%
Non-food commodities	7	3%
Awareness	2	1%
Community events	1	0%
Language	1	0%
Nothing needed	9	4%
Everything is needed	5	2%
Not sure	1	0%
Other	20	8%

Table 14. Needed resources in the community to help families be healthy (east Dayton)



voices from east Dayton – resource needs

“Access to physicians that actually take Medicaid.” - *Speaking about healthcare needs*

“Community centers recreational facilities for youth.” - *Speaking about community condition needs*

“More access to healthy fresh produce closer to home.” - *Speaking about food needs*

existing resources (east Dayton)	frequency (N = 244)	percent of surveys (%)
Healthcare services	36	15%
Community conditions	29	12%
Social services	41	17%
Community services and supports	27	11%
Food	29	12%
Education	3	1%
Non-food commodities	5	2%
Health education	4	2%
Nothing/not enough	9	4%
Not sure	8	3%

Table 15. Existing resources in the community to help families be healthy (east Dayton)



voices from east Dayton – existing resources

“WIC, Food stamps, that there is a childrens hospital and 2 off site urgent cares.” - *Speaking about existing healthcare and social service resources*

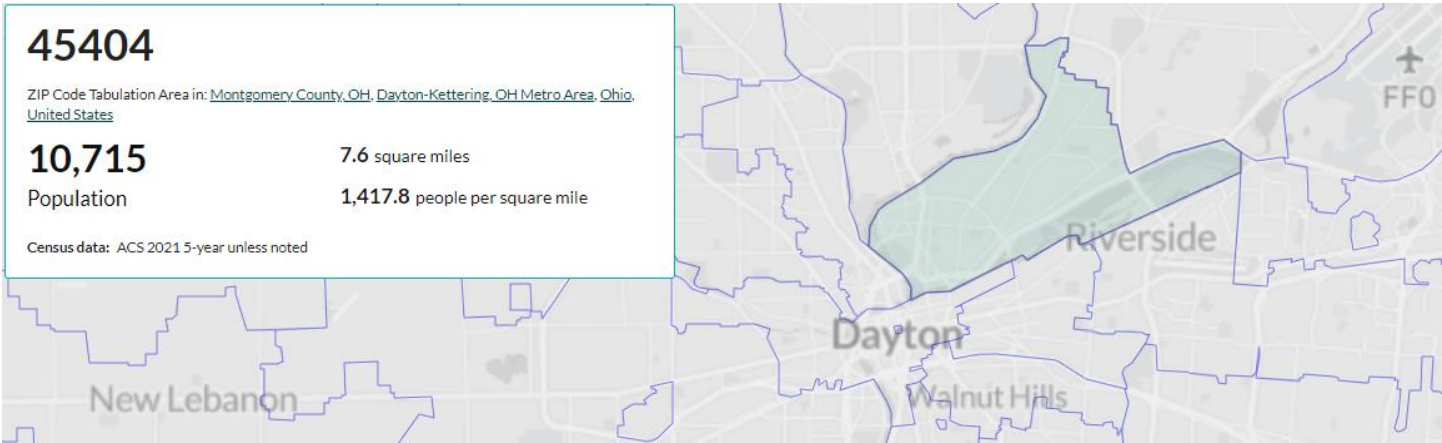
“Our Metroparks are one of the best things about our city; free and accessible to residents. Please continue to keep them clean and safe for us to use.” - *Speaking about existing community conditions*

“There is WIC, and school programs, and community health centers available.” - *Speaking about existing social services*

“Many resources, just not always clear where to go in a sea of info.” - *Speaking about existing resource barriers*



Old North Dayton



45404 is situated northeast of downtown Dayton between the Mad River and Great Miami River and includes McCook Field and Old North Dayton. Old North Dayton was primarily settled by Eastern European immigrants in the early 1900s, coming to the area to work in the various local manufacturing industries. You can see the history of Old North Dayton in the many churches and social clubs, originally formed to support the growing immigrant community, which are still present and active today. McCook Field has a long history of attracting industry dating back to when it was used as a military airfield during World War I. While industry has historically been a driver of residential growth for this neighborhood, it has more recently been a source of decline, with decades of industrial use leading to a plume of groundwater contamination and limiting possible commercial and residential land uses in certain areas. 45404 is now home to Dayton Children’s Hospital, the Kroc Community Center, and several riverfront Metroparks featuring playgrounds, seasonal splash pads, numerous baseball fields, and paved recreational trails connecting to other parks throughout Dayton. While these trails make the area somewhat bikeable, 45404 has a Walk Score of 19 and is considered a car-dependent area.

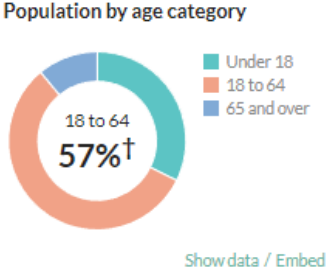
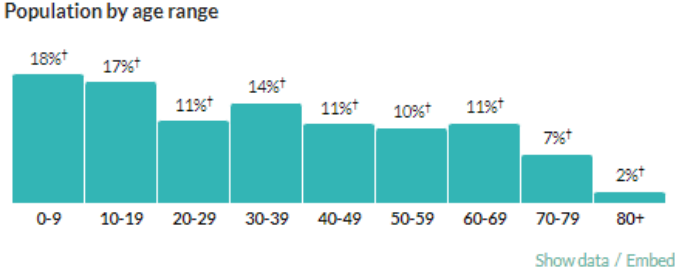
Age

31.5

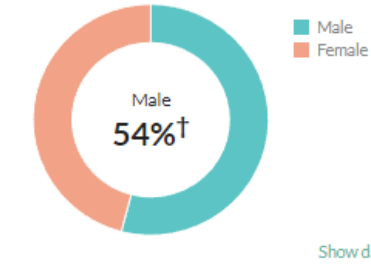
Median age

about 80 percent of the figure in the Dayton-Kettering, OH Metro Area: 39.2

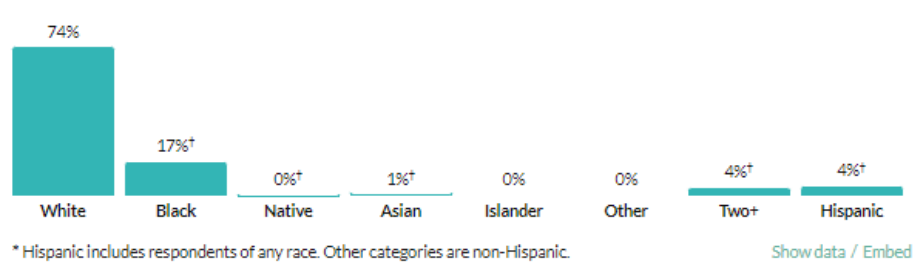
about 80 percent of the figure in Ohio: 39.4



Sex



Race & Ethnicity



Income

\$15,347

Per capita income

about half the amount in the Dayton-Kettering, OH Metro Area: \$34,164

about two-fifths of the amount in Ohio: \$34,526

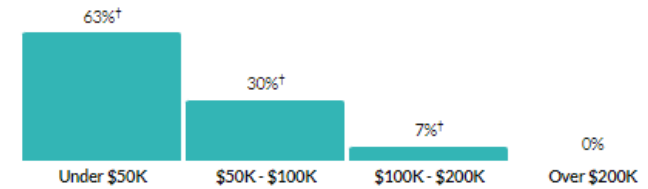
\$32,397

Median household income

about half the amount in the Dayton-Kettering, OH Metro Area: \$61,763

about half the amount in Ohio: \$61,938

Household income



Show data / Embed

Poverty

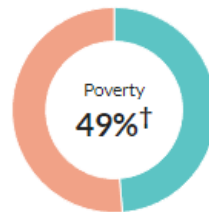
34.9% ±8.6% (3,727 ±1,020)

Persons below poverty line

more than double the rate in the Dayton-Kettering, OH Metro Area: 13.4% 104,545 (±0.5% / ±4,138)

more than double the rate in Ohio: 13.4% 1,528,963 (±0.2% / ±19,095)

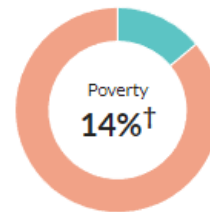
Children (Under 18)



■ Poverty
■ Non-poverty

Show data / Embed

Seniors (65 and over)



■ Poverty
■ Non-poverty

Show data / Embed

Educational attainment

81.1%

High school grad or higher

about 90 percent of the rate in the Dayton-Kettering, OH Metro Area: 91.9%

about 90 percent of the rate in Ohio: 91.1%

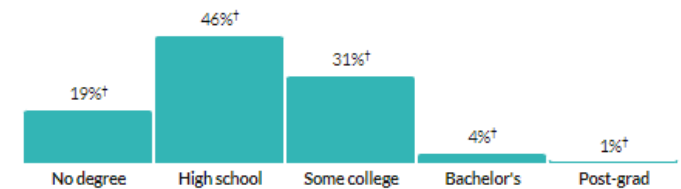
4.3%

Bachelor's degree or higher

less than a fifth of the rate in the Dayton-Kettering, OH Metro Area: 31%

less than a fifth of the rate in Ohio: 29.7%

Population by highest level of education



* Universe: Population 25 years and over

Show data / Embed

<https://liveindayton.org/neighborhood-profiles/>

Citation: U.S. Census Bureau (2021). *American Community Survey 5-year estimates*. Retrieved from *Census Reporter Profile page for 45404* <http://censusreporter.org/profiles/86000US45404-45404/>

<https://dayton-forward-2040-daytonohio.hub.arcgis.com/pages/northeast>

Old North Dayton survey results

In total, we collected 115 surveys in the 45404 ZIP code which are included in the analysis below, with 85% representing the long version and 15% representing the short version. Most surveys (94%) were taken in English with the other 6% completed in Spanish. Table 16 below describes respondents to our survey in the Old North Dayton ZIP code.

Respondents identified most frequently as White (45%), followed by Unknown (17%), Hispanic (15%), and Black (14%). Most respondents were 24 years of age or younger (31%) and 25-34 years of age (30%), followed by ages 35-44 (22%). The majority of respondents identified as female (65%), and 83% of all respondents reported having at least one child. The level of education for most respondents was high school graduate or equivalent (29%), while 17% were some college or technical school, and 17% were unknown. When asked about their level of concern regarding several health-related topics, Old North Dayton residents most frequently said that they were very concerned about emotional well-being (53%) and community conditions (51%) (Figure 14). When asked to rank child health priorities, people most often ranked health of moms and babies as their top priority (38%). Ability to get healthcare (24%) was ranked as the highest priority second most often, followed by emotional well-being (18%) (Figure 15). When asked what resources are **needed** in the community to help families be healthy (Table 17), community conditions (26%) were most often mentioned, followed by healthcare services (24%) and then food (17%). **Existing resources** (Table 18) in the community were most often identified as healthcare services (15%), followed by community conditions (14%) and then community services and supports (12%).

demographics for Old North Dayton (ZIP code 45404) N = 115		
race/ethnicity	N	%
Black or African American	16	14%
Caucasian or white	52	45%
Hispanic or Latino/a/x	17	15%
More than one race/ethnicity	1	<1%
Some other race or ethnicity	3	3%
Prefer not to respond	7	6%
Unknown	19	17%
age		
Under 24	36	31%
25-34	29	25%
35-44	25	22%
45-54	6	5%
55 and Older	13	11%
Prefer not to respond	2	2%
Unknown	19	17%
education		
Grade school	9	8%
Less than high school/some high school	15	13%
High school graduate or equivalent	33	29%
Some college or technical school	20	17%
Received four-year college degree	5	4%
Some post-graduate studies	2	2%
Received advanced degree	6	5%
Prefer not to respond	5	4%

Some other education	0	0
Unknown	20	17%
gender identity		
Female	75	65%
Male	18	16%
Prefer not to respond/unknown	2	2%
Unknown	20	17%
survey type		
Long	98	85%
Short	17	15%
children		
Children	96	83%
No Children	19	17%
language		
English	108	94%
Spanish	7	6%

Table 16. Demographics for surveys from Old North Dayton

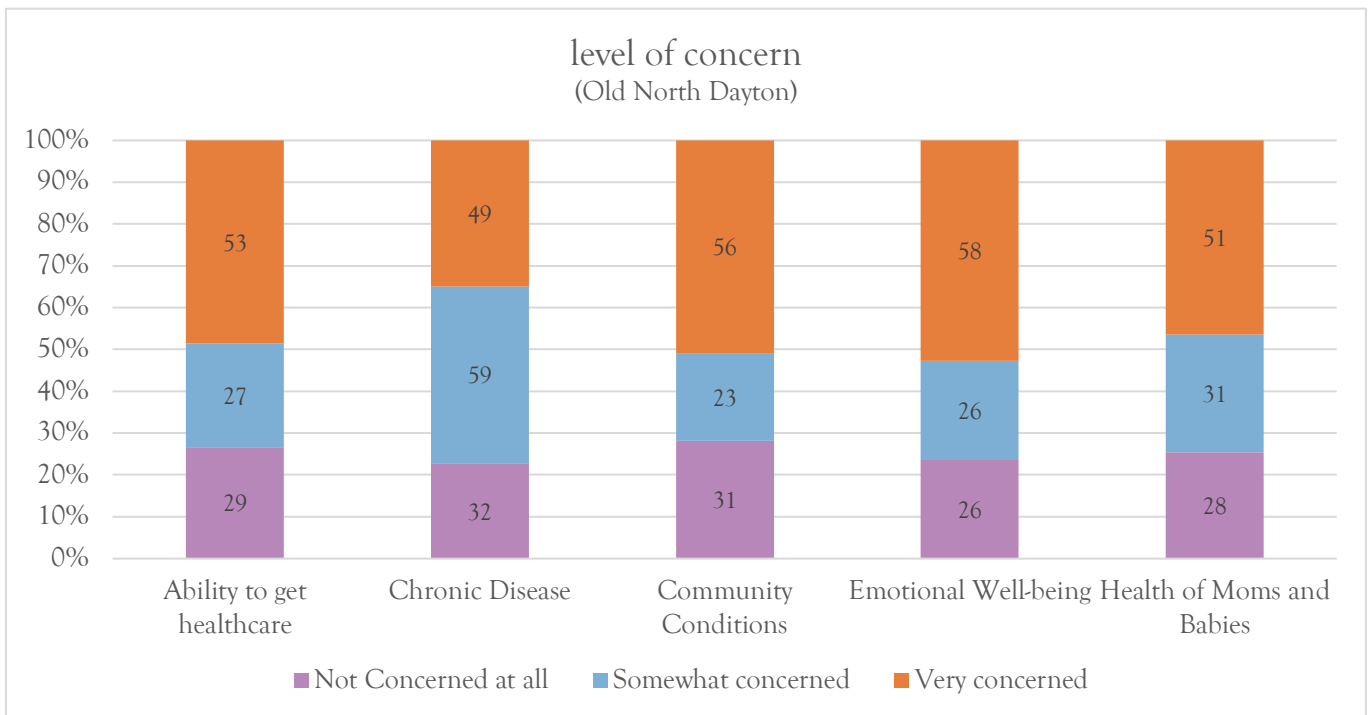


Figure 14. Level of concern for health topics (Old North Dayton)

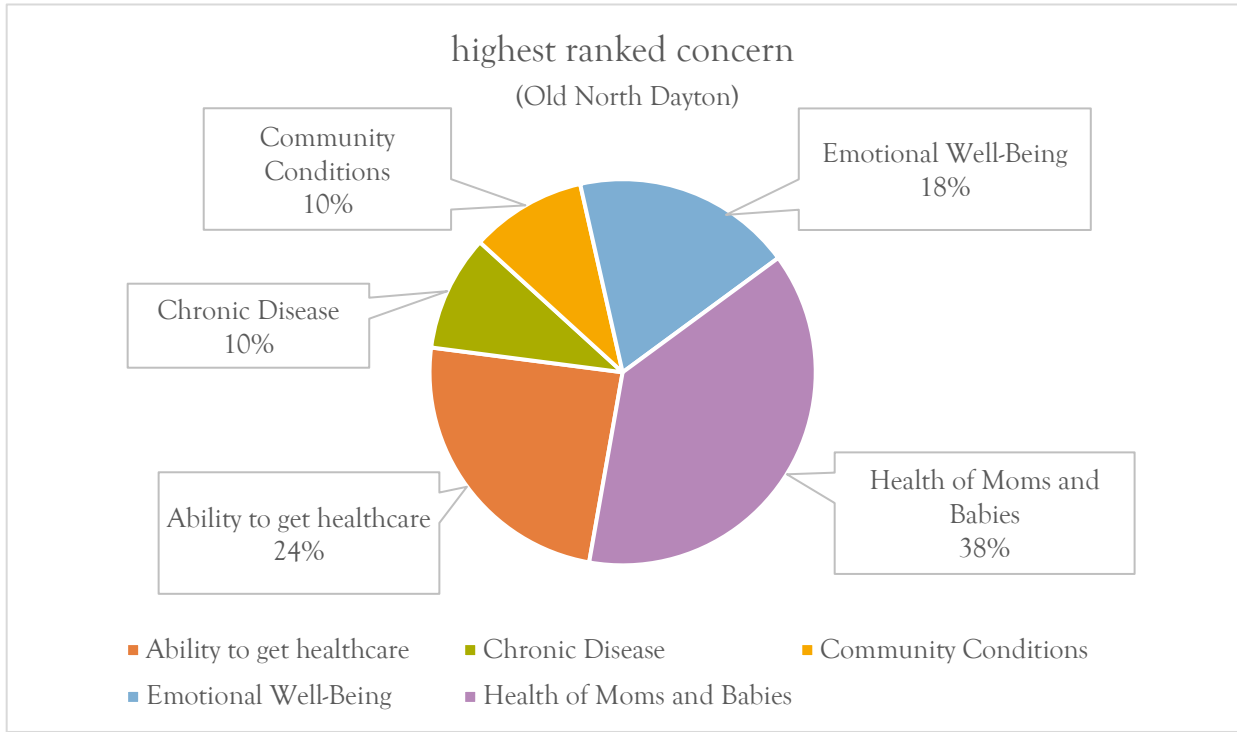


Figure 15. Highest ranked concern (Old North Dayton)

resources needed (Old North Dayton)	frequency (N = 115)	percent of surveys (%)
Healthcare services	28	24%
Community conditions	30	26%
Food	20	17%
Community services and supports	12	10%
Social services	9	8%
Mental health services	9	8%
Health education	2	2%
Education	3	3%
Transportation	5	4%
Non-food commodities	2	2%
Awareness	2	2%
Community events	3	3%
Language	1	1%
Nothing needed	6	5%
Everything is needed	0	0%
Not Sure	4	3%
Other	4	3%

Table 17. Needed resources in the community to help families be healthy (Old North Dayton)



voices from Old North Dayton – resource needs

“Community gardens, child centers, and maybe some healthy food trucks that give meals to families in need.” - *Speaking about needs around food and community conditions*

“Non-emergency walk-in clinics. No need for appointment. Services for the non-insured and low income.” - *Speaking about healthcare needs*

“Mental health treatment for whole families not just children or parent. Easier access to these services. Healthcare for people who can’t seem to get the coverage they need.” - *Speaking about healthcare needs*

“Transportation to and from appointments.” - *Speaking about community condition needs*

existing resources (Old North Dayton)	frequency (N = 115)	percent of surveys (%)
Healthcare services	17	15%
Community conditions	16	14%
Social services	9	8%
Community services and supports	14	12%
Food	11	10%
Education	2	2%
Non-food commodities	4	3%
Health education	2	2%
Nothing/not enough	7	6%
Not sure	8	7%

Table 18. Existing resources in the community to help families be healthy (Old North Dayton)



voices from Old North Dayton – existing resources

“Behavioral health working in groups at Dayton Children’s, therapists at Dayton Children’s.” - *Speaking about existing healthcare services*

“Several communities center and hospitals that provide resources and help.” - *Speaking about existing community conditions*

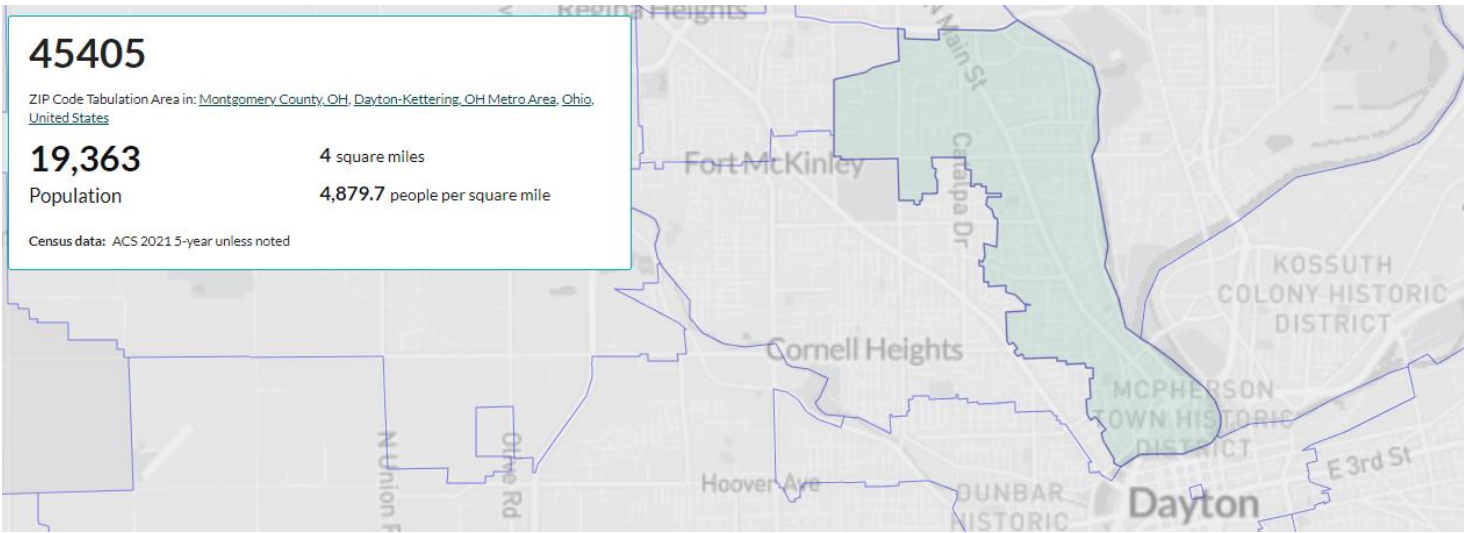
“WIC is a great resource, especially during the summer months when the farmers markets are available for extra produce.” - *Speaking about existing social services*

“There are some resources, but they are very limited in time, value and locations.” - *Speaking about existing resources that are less accessible*

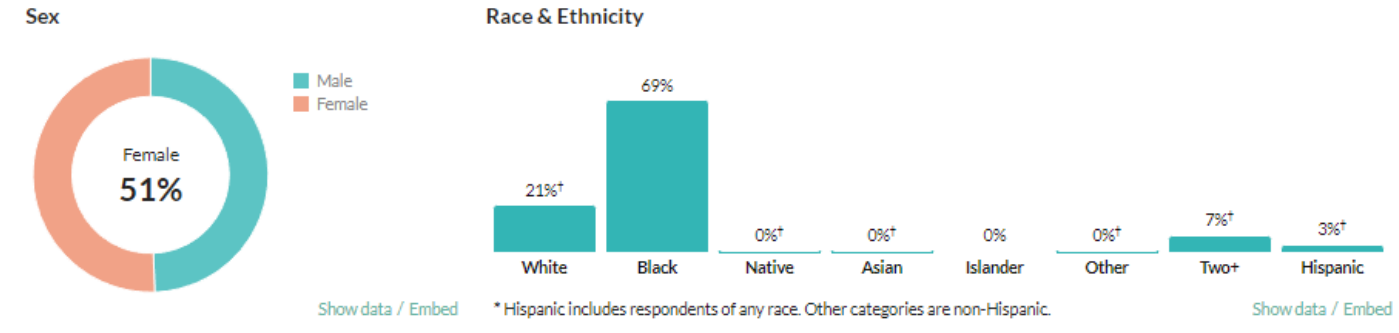
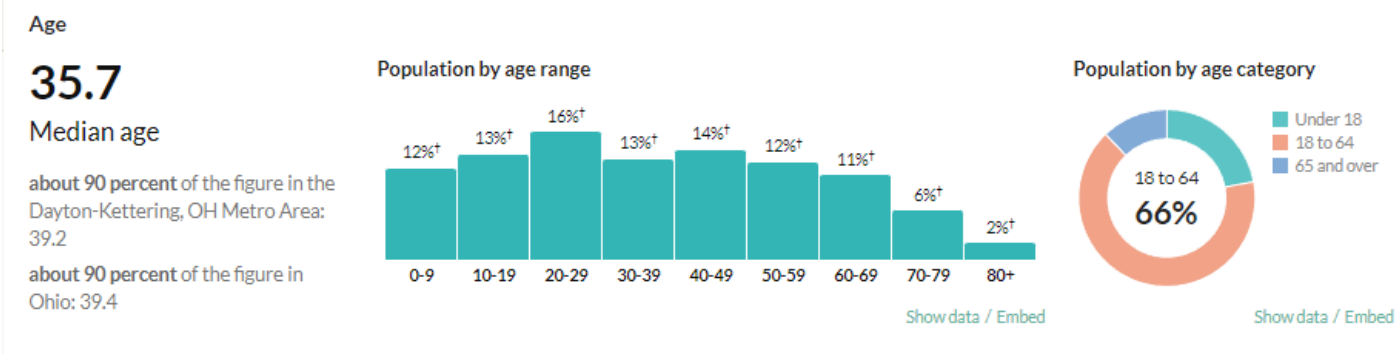


Dayton
View
Triangle

northwest and west Dayton



45405 stretches north from downtown Dayton along the Stillwater River and the N. Main Street corridor. Just across the Miami River from downtown Dayton are the historic neighborhoods of McPherson Town and Grafton Hill. As industry grew in Dayton during the late 19th and early 20th centuries, wealthy professionals settled in Grafton Hill and similar neighborhoods for their proximity to downtown and safe elevation above the surrounding waterways. Shortly after, the city’s working-class families followed their wealthier counterparts, forming neighborhoods like McPherson Town on the less desirable, low-lying areas nearer the river. While the poorer neighborhoods were struck by multiple floods, the wealthier neighborhoods in this area remained relatively unharmed. Subsequent decades of disasters, crises, and suburbanization continued to push economic development and investment farther from the city center and these already struggling neighborhoods. Today, residential neighborhoods nearer the Stillwater River have little recreational greenspace available and residents have limited access to the extensive network of multi-purpose trails and recreational facilities located just across the river. Overall, 45405 has a Walk Score of 45 and is considered a car-dependent area.



Income

\$21,347

Per capita income

about three-fifths of the amount in the Dayton-Kettering, OH Metro Area: \$34,164

about three-fifths of the amount in Ohio: \$34,526

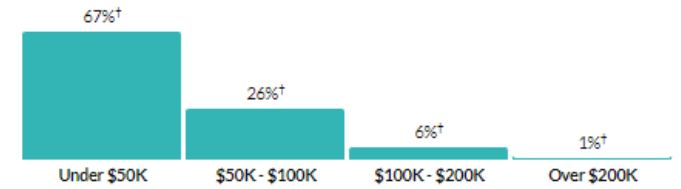
\$36,177

Median household income

about three-fifths of the amount in the Dayton-Kettering, OH Metro Area: \$61,763

about three-fifths of the amount in Ohio: \$61,938

Household income



Show data / Embed

Educational attainment

90.1%

High school grad or higher

about the same as the rate in the Dayton-Kettering, OH Metro Area: 91.9%

about the same as the rate in Ohio: 91.1%

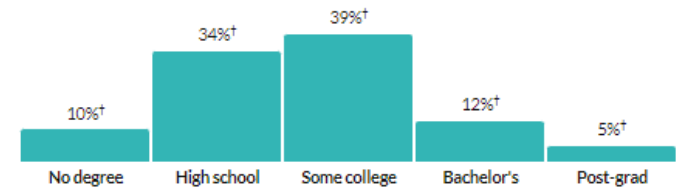
17.3%

Bachelor's degree or higher

about three-fifths of the rate in the Dayton-Kettering, OH Metro Area: 31%

about three-fifths of the rate in Ohio: 29.7%

Population by highest level of education



* Universe: Population 25 years and over

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Poverty

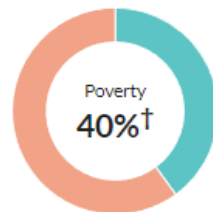
27.1% ±4% (5,180 ±843)

Persons below poverty line

about double the rate in the Dayton-Kettering, OH Metro Area: 13.4% 104,545 (±0.5% / ±4,138)

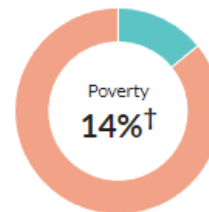
about double the rate in Ohio: 13.4% 1,528,963 (±0.2% / ±19,095)

Children (Under 18)



Show data / Embed

Seniors (65 and over)

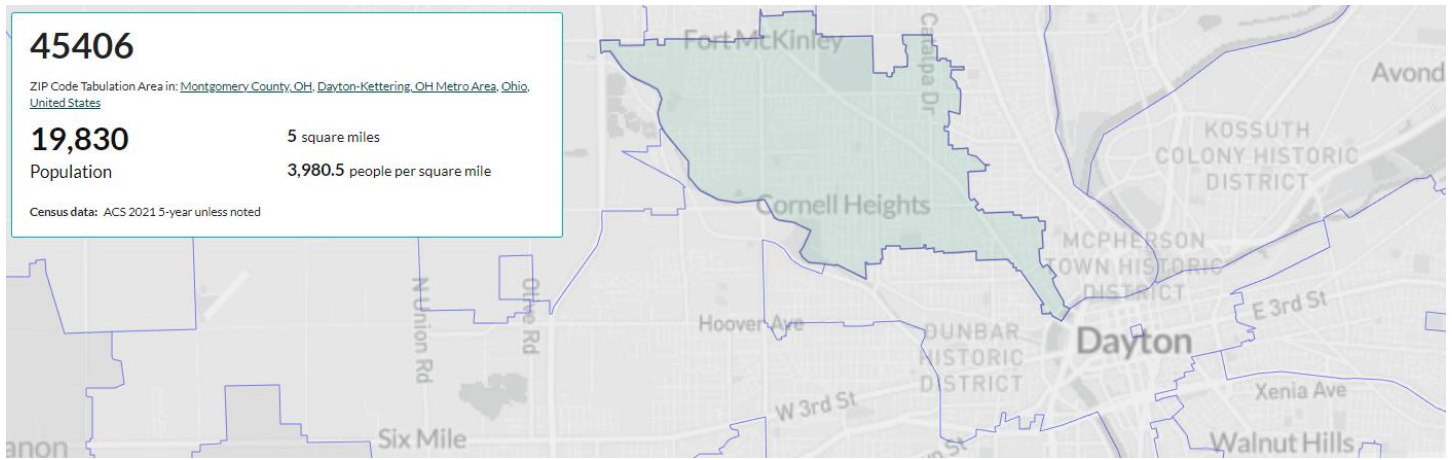


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Citation: U.S. Census Bureau (2021). *American Community Survey 5-year estimates*. Retrieved from *Census Reporter Profile page for 45405* <<http://censusreporter.org/profiles/86000US45405-45405/>>

<https://liveindayton.org/neighborhood-profiles/>

<https://dayton-forward-2040-daytonohio.hub.arcgis.com/pages/north-central>



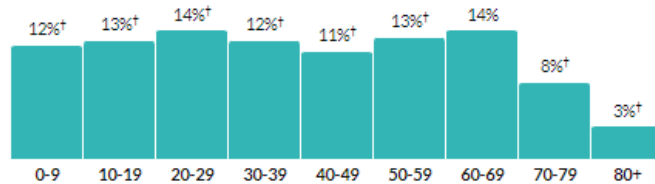
45406 is settled around the Salem Ave Corridor, extending north-west from downtown Dayton. In the late 19th century, neighborhoods in north-west Dayton were connected to downtown via a newly installed streetcar route along Salem Ave and began to develop as destination neighborhoods for the city’s wealthy industrialists. Throughout the early 20th century, neighborhoods along Salem Ave like University Row, Dayton View Triangle, and Five Oaks flourished with commercial and residential growth, welcoming diverse populations who were not welcome in other parts of the city. These neighborhoods began to suffer around the middle of the century and were greatly affected by the loss of industry in the area. Suburbanization further afflicted these neighborhoods and the building of major highways limited access to downtown Dayton. Recent years have seen significant reinvestment initiatives in these neighborhoods with the opening of the Hope Center for Families and the Gem City Market. This ZIP code has a Walk Score of 35 and is considered a car-dependent area.

Age

39.5
 Median age

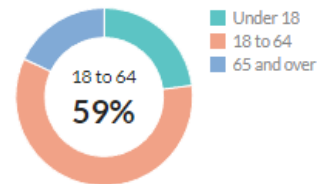
about the same as the figure in the Dayton-Kettering, OH Metro Area: 39.2
 about the same as the figure in Ohio: 39.4

Population by age range



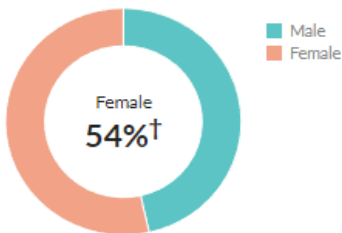
[Show data / Embed](#)

Population by age category



[Show data / Embed](#)

Sex



[Show data / Embed](#)

Race & Ethnicity



* Hispanic includes respondents of any race. Other categories are non-Hispanic.

[Show data / Embed](#)

Income

\$25,713

Per capita income

about three-quarters of the amount in the Dayton-Kettering, OH Metro Area: \$34,164

about three-quarters of the amount in Ohio: \$34,526

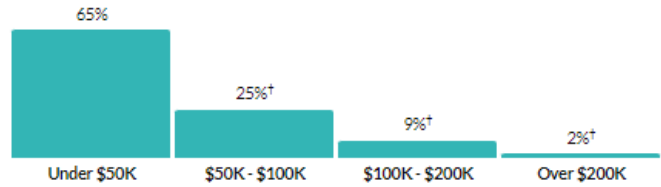
\$35,294

Median household income

about three-fifths of the amount in the Dayton-Kettering, OH Metro Area: \$61,763

about three-fifths of the amount in Ohio: \$61,938

Household income



Show data / Embed

Educational attainment

87.9%

High school grad or higher

a little less than the rate in the Dayton-Kettering, OH Metro Area: 91.9%

a little less than the rate in Ohio: 91.1%

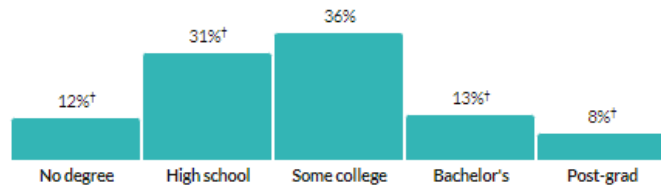
20.6%

Bachelor's degree or higher

about two-thirds of the rate in the Dayton-Kettering, OH Metro Area: 31%

about two-thirds of the rate in Ohio: 29.7%

Population by highest level of education



* Universe: Population 25 years and over

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Poverty

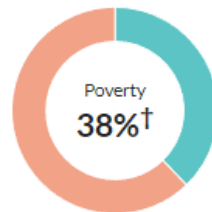
24.7%

Persons below poverty line

nearly double the rate in the Dayton-Kettering, OH Metro Area: 13.4%

nearly double the rate in Ohio: 13.4%

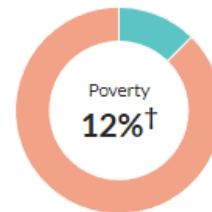
Children (Under 18)



■ Poverty
■ Non-poverty

Show data / Embed

Seniors (65 and over)



■ Poverty
■ Non-poverty

Show data / Embed

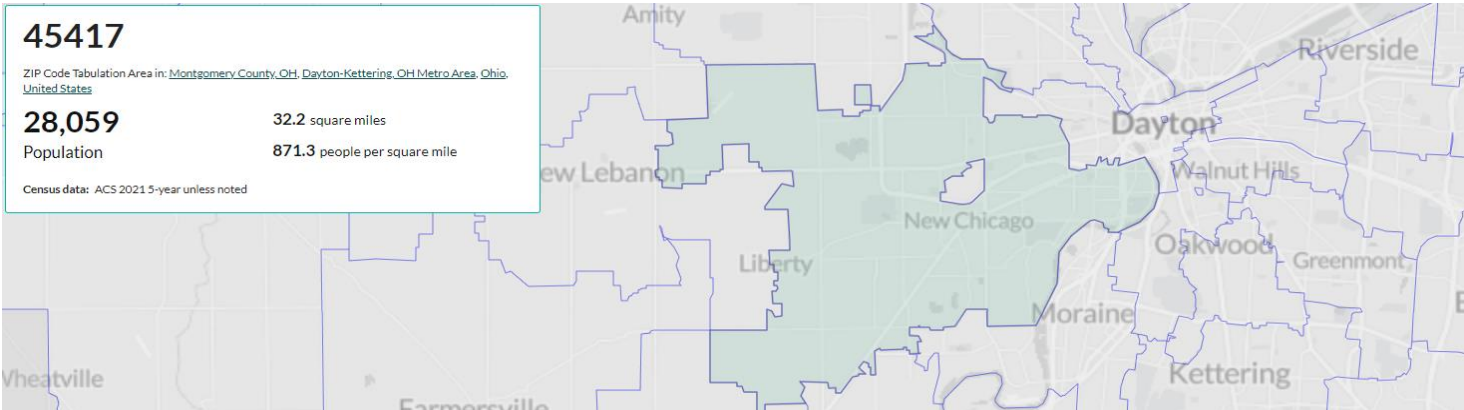
Citation: U.S. Census Bureau (2021). *American Community Survey 5-year estimates*. Retrieved from *Census Reporter Profile page for 45406* <http://censusreporter.org/profiles/86000US45406-45406/>

<https://liveindayton.org/neighborhood-profiles/>

<https://dayton-forward-2040-daytonohio.hub.arcgis.com/pages/north-central>

<https://www.daytonohio.gov/DocumentCenter/View/10711/July-2020-Northwest-Dayton-Neighborhoods-Vision>

<https://www.walkscore.com/OH/Dayton/45406>



45417 covers nearly all of the west Dayton region, including 15 different neighborhoods, extending south from Wolf Creek and west from the Miami River. Like much of Dayton, the residential expansion of this area was a response to the growth of industry and an influx of workers in the early 20th century. These neighborhoods, again like many in Dayton, saw a boom in residential growth as veterans returned home after World War II. Around that time, redlining practices were implemented which targeted the majority Black neighborhoods of west Dayton and obstructed economic growth by preventing residents from getting mortgages and other financial services. These practices significantly limited the social and economic mobility of residents by denying many the possibility of homeownership, the generally accepted foundation of intergenerational wealth. Despite these barriers, hubs of local business and culture emerged on West 3rd Street and West 5th Street, known then as “The Nickel”, which had easy access to downtown Dayton via bridges spanning the Miami River. The construction of I-75, and later US 35, led to the demolition of many homes and businesses in these areas as well as the West 5th Street bridge. Intentional revitalizations efforts have been made in recent years to reinvest in the areas of west Dayton nearest downtown and lying just outside 45417 like West 3rd St in the Wright-Dunbar neighborhood.

Age

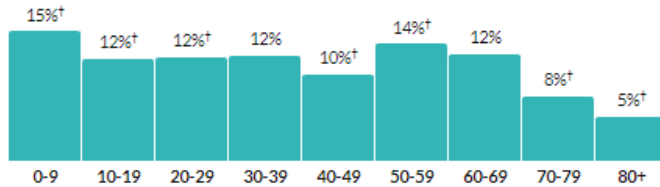
39.4

Median age

about the same as the figure in the Dayton-Kettering, OH Metro Area: 39.2

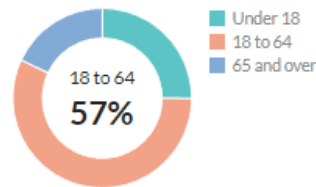
about the same as the figure in Ohio: 39.4

Population by age range



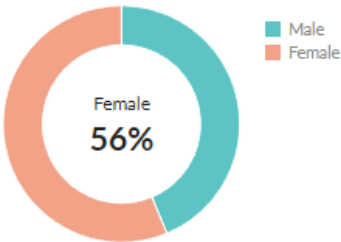
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Population by age category



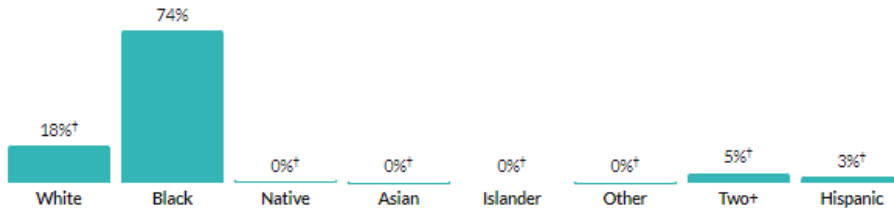
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Sex



Show data / Embed

Race & Ethnicity



* Hispanic includes respondents of any race. Other categories are non-Hispanic.

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Income

\$18,082

Per capita income

about half the amount in the Dayton-Kettering, OH Metro Area: \$34,164

about half the amount in Ohio: \$34,526

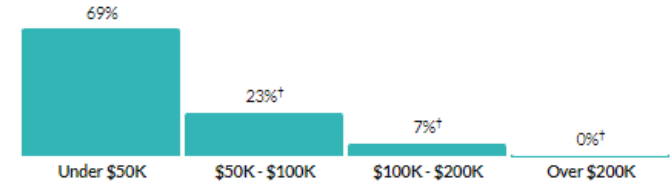
\$30,822

Median household income

about half the amount in the Dayton-Kettering, OH Metro Area: \$61,763

about half the amount in Ohio: \$61,938

Household income



Show data / Embed

Poverty

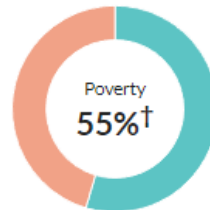
34.2%

Persons below poverty line

more than double the rate in the Dayton-Kettering, OH Metro Area: 13.4%

more than double the rate in Ohio: 13.4%

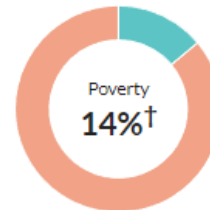
Children (Under 18)



■ Poverty
■ Non-poverty

Show data / Embed

Seniors (65 and over)



■ Poverty
■ Non-poverty

Show data / Embed

Educational attainment

78.8%

High school grad or higher

about 90 percent of the rate in the Dayton-Kettering, OH Metro Area: 91.9%

about 90 percent of the rate in Ohio: 91.1%

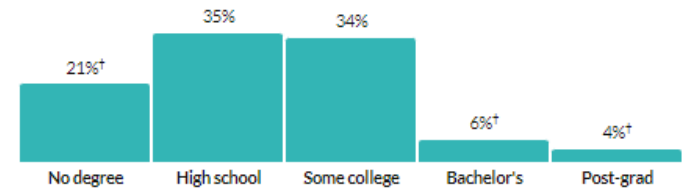
9.9%

Bachelor's degree or higher

about one-third of the rate in the Dayton-Kettering, OH Metro Area: 31%

about one-third of the rate in Ohio: 29.7%

Population by highest level of education



* Universe: Population 25 years and over

Show data / Embed

Citation: U.S. Census Bureau (2021). *American Community Survey 5-year estimates*. Retrieved from *Census Reporter Profile page for 45417* <http://censusreporter.org/profiles/86000US45417-45417/>

<https://dayton-forward-2040-daytonohio.hub.arcgis.com/pages/west>

<https://www.daytondailynews.com/local/deconstructing-segregation-how-highways-contributed-and-what-can-be-done-about-it-today/LIAY4RKK3JBSPCLZ6XAQPRZZNA/>

<https://udayton.edu/artssciences/endowedchair/roesch/undesigned-redline.php>

northwest and west Dayton Survey Results

In total, we collected 383 surveys in the 45405, 45406, and 45417 ZIP codes which are included in the analysis below, with 82% representing the long version and 18% representing the short version. Most surveys (98%) were taken in English with the other 2% completed in Spanish. Table 19 below describes respondents to our survey in these north and northwest Dayton ZIP codes. Respondents identified most frequently as Black (56%), followed by white (10%) with 19% being unknown. Most respondents were 25-34 years of age (32%) and 35-44 years of age (21%), followed by unknown (19%). The majority of respondents identified as female (73%), and 90% of all respondents reported having at least one child. The level of education for most respondents was some college or technical school (30%), while 23% were high school graduate or equivalent, and 19% were unknown. When asked about their level of concern regarding several health-related topics, north and northwest Dayton residents most frequently said that they were very concerned about emotional well-being (67%) while community conditions and the health of moms and babies tied at 63% (Figure 16). When asked to rank child health priorities, people most often ranked health of moms and babies as their top priority (39%). Ability to get healthcare (24%) was ranked as the highest priority second most often, followed by emotional well-being (23%) (Figure 17). When asked what resources are **needed** in the community to help families be healthy (Table 20), community conditions (28%) were most often mentioned, followed by healthcare services (25%) and then community services and supports (16%). **Existing resources** (Table 21) in the community were most often identified as healthcare services (21%), followed by community conditions (19%) and then community services and supports (18%).

demographics for northwest and west Dayton (ZIP codes 45405, 45406 & 45417) N = 383		
race/ethnicity	N	%
Black or African American	216	56%
Caucasian or white	37	10%
Hispanic or Latino/a/x	2	1%
More than one race/ethnicity	2	1%
Some other race or ethnicity	1	<1%
Prefer not to respond	12	3%
Unknown	73	19%
age		
Under 24	39	10%
25-34	123	32%
35-44	79	21%
45-54	27	7%
55 and Older	42	11%
Prefer not to respond	4	1%
Unknown	69	18%
education		
Grade school	17	4%
Less than high school/some high school	26	7%
High school graduate or equivalent	88	23%
Some college or technical school	116	30%
Received four-year college degree	32	8%
Some post-graduate studies	6	2%
Received advanced degree	21	5%

Prefer not to respond	6	2%
Some other education	0	0
Unknown	71	19%
gender identity		
Female	281	73%
Male	27	7%
Transgender/Genderqueer/Some other gender	2	1%
Prefer not to respond/Unknown	4	1%
Unknown	69	18%
survey type		
Long	314	82%
Short	69	18%
children		
Children	343	90%
No Children	40	10%
language		
English	108	94%
Spanish	7	6%

Table 19. Demographics for surveys from northwest and west Dayton

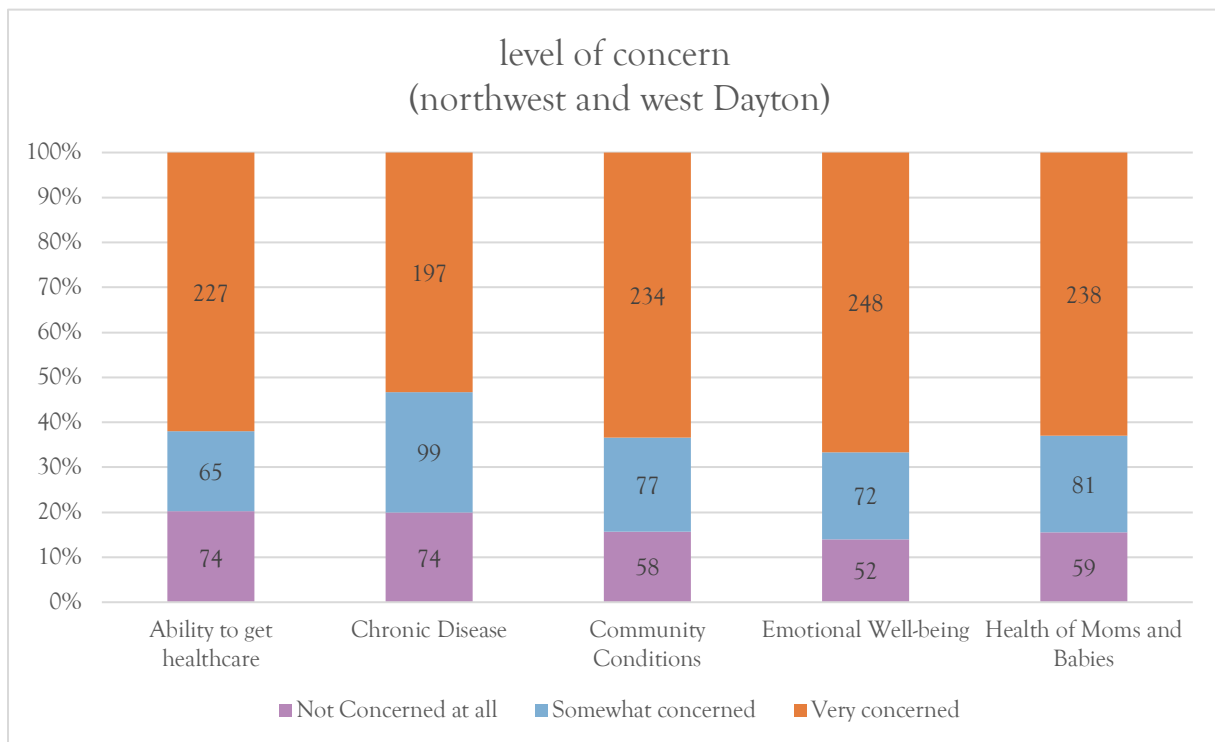


Figure 16. Level of concern for health topics (northwest and west Dayton)

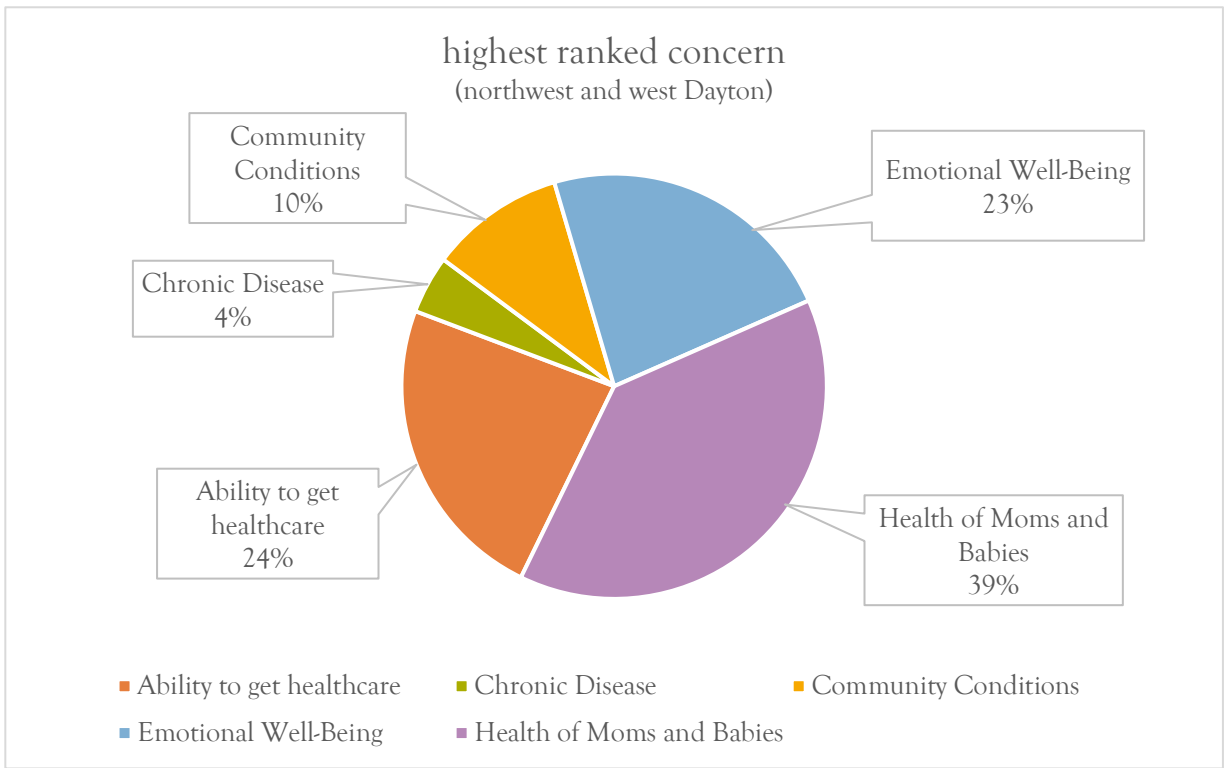


Figure 17. Highest ranked concern (northwest and west Dayton)

resources needed (northwest and west Dayton)	frequency (N = 383)	percent of surveys (%)
Healthcare services	95	25%
Community conditions	108	28%
Food	54	14%
Community services and supports	60	16%
Social services	26	7%
Mental health services	22	6%
Health education	25	7%
Education	20	5%
Transportation	10	3%
Non-food commodities	7	2%
Awareness	14	4%
Community events	12	3%
Language	4	1%
Nothing needed	7	2%
Everything is needed	10	3%
Not sure	5	1%
Other	20	5%

Table 20. Needed resources in the community to help families be healthy (northwest and west Dayton)



voices from northwest and west Dayton – resource needs

“More hospitals instead of urgent cares. There are many times when urgent cares are beneficial for the community. I definitely feel that we need them. However, on my side of town there isn’t a quality hospital for our community. Which as a mother, it affects my household and my children. An emergency shouldn’t require me having to go to the other side of town for quality care.” - *Speaking about healthcare needs*

“The availability or access to healthier food choices.” - *Speaking about food needs*

“Transportation, safe housing and a clean safe place for families to get active and outside.”- *Speaking about community condition needs*

existing resources (northwest and west Dayton)	frequency (N = 383)	percent of surveys (%)
Healthcare services	82	21%
Community conditions	71	19%
Social services	58	15%
Community services and supports	70	18%
Food	48	13%
Education	10	3%
Non-food commodities	16	4%
Health education	5	1%
Nothing/not enough	33	9%
Not sure	25	7%

Table 21. Existing resources in the community to help families be healthy (northwest and west Dayton)



voices from northwest and west Dayton – existing resources

“Library resources, parks and recreations, churches and interfaith communities, access to educational opportunities, cultural enrichment, excellent children’s medical specialties, therapies through programs like early intervention, help me grow and school programs.”
- Speaking about existing resources for healthcare and the community

“Dayton Children’s! Gem City Market, various health centers, various nonprofits.” -
Speaking about existing resources for healthcare and the community

“TRIBE, Help Me Grow, Wesley Center, WIC, Women’s Center.” - Speaking about
existing resources for the community

“The basic buildings like hospitals and counselors but many are inaccessible to families, especially full-time working parents.” - Speaking about existing resources that are less accessible

appendix A – secondary data sources

source	data used	website
Center for Disease Control and Prevention (CDC)	Breastfeeding – Recommendations and Benefits	https://www.cdc.gov/nutrition/infantandtoddlernutrition/breastfeeding/recommendations-benefits.html
	Caring for Children in a Disaster	https://www.cdc.gov/childrenindisasters/features/disasters-mental-health.html
	How Can Smoking Harm Your Baby?	https://www.cdc.gov/tobacco/campaign/tips/diseases/pregnancy.html
	Physical Activity Among School-Aged Children and Adolescents	https://www.cdc.gov/healthyschools/physicalactivity/facts.htm
	Preventing Adverse Childhood Experiences	https://www.cdc.gov/violenceprevention/childabuseandneglect/aces/fastfact.html
	Violence Prevention ACEs Fast Facts	www.cdc.gov/violenceprevention/childabuseandneglect/aces/fastfact.html
	2020 Recommended Vaccinations for Children	https://www.cdc.gov/vaccines/schedules/easy-to-read/adolescent-easyread.html
Diversitydatakids.org	Child Opportunity Index	http://diversitydatakids.org/research-library/data-visualization/what-does-child-opportunity-look-your-metro
Feeding America	Food insecurity	https://map.feedingamerica.org/
Ohio Department of Health, Public Health Data Warehouse	Live births	Ohio Public Health Information Warehouse - Public: Dataset Catalog

source	data used	website
Policy Map	Food insecurity Lead exposure risk Life expectancy Number of parks within a 10 Minute walk Social Vulnerability index	https://www.policymap.com/
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	American Community Survey 1 year estimate Ohio and County Census Demographic information Small Area Income and Poverty Estimates Federal Poverty Thresholds	www.census.gov
County Health Rankings	Economic stability Food insecurity Neighborhood and Built environment Health outcomes	https://www.countyhealthrankings.org/explore-health-rankings
Ohio Department of Education	Kindergarten Readiness Assessment	https://education.ohio.gov/Topics/Early-Learning/Kindergarten/Ohios-Kindergarten-Readiness-Assessment
Dayton Forward Comprehensive Plan	Neighborhood information	https://dayton-forward-2040-daytonohio.hub.arcgis.com/pages/northeast
Census Reporter	ZIP code specific data: 40403, 45404, 40405, 45406, 45410 & 45417	U.S. Census Bureau (2021). American Community Survey 5-year estimates. Retrieved from Census Reporter Profile page for 45403 http://censusreporter.org/profiles/86000US45403-45403/
Dayton neighborhoods	Neighborhood profiles	https://liveindayton.org/neighborhood-profiles/
Walk Score	ZIP code specific data: 40403, 45404, 40405, 45406, 45410 & 45417	https://www.walkscore.com/OH/Dayton

appendix B - evaluation of impact

In early 2023, interviews with 13 strategy owners were conducted to obtain their feedback on the 2020-2023 Implementation Plan progress. The aim was to obtain feedback on progress toward goals beyond the annual reporting for planning purposes. A total of eight questions were divided into two levels of discussion, first was a strategy specific questions to determine the biggest impact of the strategy and the next steps including whether more work is to be done or if the goal has been achieved. A second set of questions focused on a community level discussion, including these subject matter experts to engage in robust conversations on their beliefs regarding the status of children’s health in our community. Below is a summary of the strategy level discussion that was utilized to enhance the overall assessment and inform planning for the implementation plan process. This serves as an evaluation of impact for the last three years. In addition, a deeper update of the Dayton Children’s Implementation Plan is posted yearly at: <https://www.childrensdayton.org/community/community-health/community-health-needs-assessment>.

priority topic: mental health and addiction	
Strategy 1: Continue spreading the On Our Sleeves Movement throughout the Dayton region	
<i>Goal: Reduce mental health stigma</i>	
Impact	Next steps
Dayton Children’s successfully launched the On Our Sleeves movement in May 2021. Over the last two years, the On Our Sleeves campaign has gained momentum with many community partners including schools, neighborhood organizations, libraries, and many other child-serving organizations. A popular feature of the program is Conversation Starter cards that encourage discussions about thoughts and feelings. Most recently, the campaign launched the Classroom Champions distribution list for educators and distributed Kindness Classroom kits. The program continues to discuss mental health commonplace, reducing stigma for children in our community.	Continue to promote On Our Sleeves Movement

Strategy 2: Integrate behavioral health throughout primary care	
<i>Goal: Increase access to behavioral health services for patients</i>	
Impact	Next steps
Over the last three years, the hospital recruited and secured several licensed clinical counselors and psychologists who are now providing services in our primary pediatric clinics on the main campus and at the Hope Center. This has improved access to behavioral health services for patients and the community.	We will continue to grow through community primary care practices.

Strategy 3: Develop a comprehensive school-based program	
<i>Goal: Develop resiliency characteristics for children in Dayton Public Schools</i>	
Impact	Next steps
Student Resiliency Coordinators started in Dayton Public Schools in August of 2020 and added in additional districts within months. The program served 417 students in its first year. The program continues to grow momentum as it now has 61 student resiliency coordinators and 12 school-based therapists.	Continue to expand to more school districts in Montgomery County.

Strategy 4: Adopt and embed a comprehensive approach to suicide care (Zero Suicide)	
<i>Goal: Reduce youth suicide for ages 12-18</i>	
Impact	Next steps
Through a two-year grant from Cardinal Health, the Zero Suicide Initiative was successful in achieving the program goals of implementing the seven elements (lead, train, identify, engage, treat, transition, improve) of safer suicide care with the hospital's Behavioral Health Division. In the third year of the CHNA cycle, the Zero Suicide Initiative spread into additional ambulatory clinics.	Continue to expand brief assessment screening to more ambulatory clinics and partner with community organizations for greater regional impact.

Strategy 5: Develop and launch partial hospitalization and intensive outpatient therapy services	
<i>Goal: Increase access to mental health care</i>	
Impact	Next steps
To best meet the needs of children across the behavioral health continuum, Dayton Children's focused on creating access to intermediate levels of care. In December 2020, the Partial Hospitalization Program (PHP) launched focusing on group therapy five days a week. Shortly thereafter, in February 2021, Dayton Children's opened our Intensive Outpatient Program (IOP). These programs have shown a significant increase in access to intermediate behavioral health care.	None needed. This has been completed.

Strategy 6: Implement the Ohio American Academy of Pediatrics (OAAP) Store it Safe Program	
<i>Goal: Increase firearm safety education within Dayton Children's</i>	
Impact	Next steps
The Ohio American Academy of Pediatrics (OAAP) Store it Safe Program officially began in February 2021. The program continues to screen families to determine if they have a firearm in the home and if it is being stored safely. If the family needs a safe storage option, a lockbox is provided.	None needed. This has been integrated into practice.

Strategy 7: Implement The Roadmap Project	
<i>Goal: Promote resilience and emotional and mental health for children and families diagnosed with a chronic health condition</i>	
Impact	Next steps
Dayton Children's participated in a nine-site national learning collaborative to improve resiliency for children with chronic diseases. The learning collaborative focused on expanding the family resource directory on the hospital website, piloting a digital mentoring program for families with epilepsy, and continuing to spread the importance of inquiring about and supporting the emotional needs of patients and caregivers among the neurology staff. The pilot wrapped up in April 2021.	None needed. This has been completed.

priority topic: chronic disease	
Strategy 1: Implement healthy food initiatives	
Goal: Increase access to healthy food	
Impact	Next steps
Due to COVID-19, initiative plans to grow the number of cooking classes in the food demonstration kitchen was put on hold. However, the Dayton Children’s team pivoted to focus on food access during the pandemic. In year one of the CHNA cycle, Dayton Children’s partnered with Miami Valley Meals to serve 1,300 meals to 394 neighborhood families. Eventually the Community Teaching Kitchen was reopened and participation in food demonstration classes continued to grow. In early 2023, Dayton Children’s opened an on-site Food Pantry serving families at Kiser School and throughout the Greater Old North Dayton neighborhood. This program averages 50-60 customers a month.	Continue expansion of program to serve more community members. Consider focusing on community-level policy advocacy to support greater access to healthy food options.

Strategy 2: Implement Safe Routes to School	
Goal: Increase number of children walking and biking to school	
Impact	Next steps
In partnership with the Ohio Department of Transportation, the Safe Routes to School program was leveraged to get more bikes to students without access to resources to purchase a bike. This allowed underserved students to have another, affordable means of transportation. The program also held Girls in Gear programming to teach girls empowerment and how to care for a bicycle. The program also launched a pedestrian safety campaign with over 111,369 Facebook impressions and 304,536 impressions through billboards.	Explore other programs that promote physical activity

Strategy 3: Enhance the Dayton Asthma Alliance	
Goal: Decrease hospital utilization for asthma	
Impact	Next steps
The Dayton Asthma Alliance continued to improve outcomes for children in various settings. The Alliance supported the co-management program by working with primary care practices in the hospital’s clinically integrated network. Members of the Alliance worked on the standardization of the “Asthma Pathway” for community health workers. The Alliance also explored multiple programs to improve housing for children with asthma and piloted a training program for contractors in May 2023.	Strategically address asthma disparities in vulnerable populations and build better data systems to document impact.

Strategy 4: Expand the food insecurity screening and referral program	
Goal: Expand food insecurity screening within Dayton Children’s	
Impact	Next steps
Piloted food boxes in other Dayton Children’s locations which was not successful. There was a transition to gift cards, and they are available at various clinics. This specific strategy was sunset and included in Strategy 1: Social Needs Screening (Community Conditions) as food screening is part of the overall social needs screening initiative.	Important focus area that should be integrated into other strategies.

Strategy 5: Continue to enhance the “Food Pharm” program	
Goal: Enhance the Food Pharm program at Dayton Children’s	
Impact	Next steps
The Food Pharm was a critical program when the COVID-19 pandemic hit. Dayton Children’s partnered with several agencies to do food distribution in summer 2020. During the first year of this CHNA cycle, over 400 food boxes were distributed from the Food Pharm and 1466 were served by Dayton Children’s co-sponsored mass food distributions. The Food Pharm continues to serve families monthly through the on-site food box program. Focusing on continuous improvement, the program also completed a Cultural Competence study to better understand the food options offered through the food boxes and how they could be more culturally appropriate for the families served.	Knowing there is a great need for food resource, it is necessary to work on programs across the community to expand food access

Strategy 6: Increase physical activity opportunities among families	
Goal: Increase physical activity	
Impact	Next steps
COVID restrictions limited participation in the Walk with a Doc series and other initiatives related to this strategy. As the pandemic slowed down and programming could begin again, the Healthy Me Clinic at Dayton Children’s focused on Rx to Parks prescriptions and continued writing exercise goals with patients as part of treatment plans.	Explore partnerships that expand community-based physical activity opportunities.

Strategy 7: Implement lead prevention quality improvement project	
Goal: Decrease rates of lead toxicity in children	
Impact	Next steps
Dayton Children’s Pediatrics completed a six-month pilot with Ohio American Academy of Pediatrics) to increase lead screening. As a result, the screening rates increased which led to more lab tests and an increase in anticipatory guidance. Lead screening will continue in clinics and will continue to be monitored.	None needed. This has been integrated into regular monitoring.

priority topic: maternal and infant health	
Strategy 1: Increase the use of safe sleep practices	
Goal: Increase safe sleep education	
Impact	Next steps
Dayton Children’s developed and implemented a conversation-based safe sleep training for clinical staff. This training was completed by all clinical staff by May of 2022. The training was also shared with local, state, and national partners. In addition, Dayton Children’s provided 306 families with a safe place for their baby to sleep through the Early Childhood Education Program funded by the Ohio Children’s Trust Fund and other pack ‘n play assistance programs.	A focus on early childhood (0-5 age group) parent education including various aspects of safety.

Strategy 3: Increase parenting resources and support	
<i>Goal: Expand awareness of parenting programs and resources offered by Dayton Children's</i>	
Impact	Next steps
The Ubicare messaging platform was leveraged to regularly reach 20,000 families with children three and younger each week with important health and safety information. Aligning messaging on Ubicare with some of the other health priorities including safe sleep and breastfeeding were a focus. For the Triple P program, staff training was held, and several staff can now deliver this program. However, engagement with families has been limited. The hospital continues to look for ways to best engage families in this program.	The hospital's Center for Health Equity team will research the impact of the Ubicare messaging platform.

priority topic: community conditions	
Strategy 1: Expand screenings to address social needs	
<i>Goal: Address social needs through resource connection</i>	
Impact	Next steps
A Social Needs digital screening pilot was launched in Dayton Children's Pediatrics with physicians to screen for Social Needs on a digital platform. Responses populate into the medical record in Epic, are reviewed by physicians and the patient's family is contacted to discuss needs. A dashboard that pulls data from Epic has been created to track compliance and positivity rate of screens. The FindHelp platform launched and is being utilized to provide resources to families that indicated needs. Social needs screening is currently happening in two primary care clinic locations and four ambulatory clinics.	Continued expansion into additional ambulatory clinics focusing on clinics caring for chronic patients.

Strategy 2: Support and expand strategies to improve kindergarten readiness	
<i>Goal: Connect children to kindergarten readiness programs</i>	
Impact	Next steps
Currently, 50% of children ages 0 to 5 in Montgomery County are enrolled in the Imagination Library. In addition, the program identified high-need ZIP codes to focus outreach efforts and the high-risk ZIP codes within the county at tracking with the overall Montgomery County Imagination Library numbers with 50% or more saturation.	Continue to improve outreach and increase enrollment in areas of greatest need.

appendix C – 2023 Dayton Children’s Hospital resource inventory

This resource inventory includes organizations, facilities, and programs in the community, including those of the hospital facility, that are available to address the health needs identified in this assessment. These resources were identified by hospital staff and community member input through our data collection process. The resource inventory is based on the priorities identified in the 2023-2026 Dayton Children’s Hospital Implementation Plan: **mental health and addiction**, **chronic disease**, **maternal and infant health**, **community conditions** and **access to care**.

Program/Service	Agency and Contact Information	Population(s) Served
Public Health Dayton and Montgomery County Recovery Services Mental health and addiction	Phone: 937-461-5223 Option 1 http://www.phdmc.org/client-services/addiction-services	Community
CarePoint: Syringe Services Program Mental health and addiction	Public Health Dayton and Montgomery County Phone: 937-496-7133 http://www.phdmc.org/client-services/carepoint-syringe-services-program	Community
Tri-County Board of Recovery & Mental Health Mental health and addiction	1280 N. County Rd.25 A Troy, OH 45373 Crisis hotline: 1-800-351-7347 www.tcbmds.org	Populations in Miami, Darke and Shelby Counties
Miami County Educational Service Center Mental health and addiction	2000 W. Stanfield Rd. Troy, OH 45373 Phone: 937-339-5100 https://www.miami.k12.oh.us	Children in Miami County
TCN Behavioral Health Services Mental Health and Addiction	452 W. Market St. Xenia, OH 45385 Phone: 937-376-8700 https://www.tcn.org	Children ages 4 to 18 years
Educational Services Center: School based Mental Health Services Mental health and addiction	360 E. Enon Rd. Yellow Springs, OH 45387 Phone: 937-767-1303 http://www.greeneesc.org/mentalhealthservices.aspx	School age children in Greene County
Infant and Early Childhood Mental Health Consultation Mental health and addiction	Greene County Educational Service Center 360 E. Enon Rd. Yellow Springs, OH 45387 Phone: 937-767-1303 https://www.greeneesc.org/earlychildhoodmentalhealthconsultation.aspx	Children ages 0-8 in Greene County
Family Violence Prevention Center of Greene Co. Mental health and addiction	380 Bellbrook Ave. Xenia, OH 45385 Phone: 937-426-2334 http://www.violencefreefutures.org/	Populations in Greene County
Substance Abuse Prevention Coalition of Warren County Mental health and addiction	761 Columbus Ave. Lebanon, OH 45036 Phone: 513-689-3169 https://sapcwarrencounty.org/#top	Populations in Warren County
Project AWARE - Warren County Educational Service Center Mental health and addiction	1879 Deerfield Rd. Lebanon, OH 45036 Phone: 513-695-2900 http://www.warrencountyesc.com/1/Department/20354	Children and families, in Warren County
Child Advocacy Center of Warren County Mental health and addiction	320 East Silver St. Lebanon, OH 45036 Phone: 513-695-3100 http://cacwarrencounty.org/	Children and families in Warren County
ReDo Mental health and addiction	http://redoday.com	Children in grades 7-12

Program/Service	Agency and Contact Information	Population(s) Served
Mental Health Recovery Services of Warren and Clinton Counties Mental health and addiction	Crisis Hotline:1-800-695-NEED (6333) http://www.mhrsonline.org/	All populations in Warren and Clinton County
Beech Acres Parenting Center Mental health and addiction	767 Columbus Ave. Ste.2 Lebanon, OH 45036 Phone: 513-237-6630 https://beechacres.org/	Parents and children in Hamilton County
Suicide Prevention Coalition of Warren and Clinton Counties Mental health and addiction	https://co.clinton.oh.us/suicidepreventioncoalitionofwarrenandclintoncounties	All populations in Warren and Clinton Counties
Montgomery County Alcohol, Drug and Mental Health Services Mental health and addiction	409 E. Monument Ave. Dayton, OH 45402 Phone: 937-443-0416 https://mcdamhs.org	All populations in Montgomery County
Recovery & Wellness Centers of Midwest Ohio Mental health and addiction	550 Summit Ave. Troy, OH 45373 Phone: 937-335-0361 https://www.recoveryandwellnessohio.org	Populations in Darke, Miami and Preble Counties
Care House Mental health and addiction	410 Valley Street Dayton, OH 45404 Phone: 937-641-4545	Children and families in Montgomery County
Michael's House Mental health and addiction	1016 Rainbow Court Fairborn, OH 45324 Phone: 937-641-5670 https://michaelshousecac.org	Children and families in Greene County
Mental Health Services for Clark and Madison Counties Mental health and addiction	474 N. Yellow Springs St. Springfield, OH 45504 Phone: 937-399-9500 www.mhsc.org	All populations in Clark and Madison Counties
Child, Adolescent and Family Center Mental health and addiction	1835 Miracle Mile Springfield, OH 45503 Phone: 937-390-7960 https://mhsc.org	All populations In Clark and Madison Counties
Oesterlen Services for Youth Mental health and addiction	1918 Mechanicsburg Rd. Springfield, OH 45503 Phone: 937-399-6101 http://oesterlen.org	Children
Samaritan Behavioral Health Mental health and addiction	Elizabeth Place, East Bldg., 4th Floor 601 Edwin C. Moses Blvd. Dayton, OH 45417 Phone: 937-734-8333 https://sbhihelp.org	All populations
South Community Mental health and addiction	3095 Kettering Blvd. Moraine, OH 45439 Phone: 937-293-8300 North Office 211 Kenbrook Dr. Vandalia, OH 45377 Phone: 937-293-8300 https://www.southcommunity.com	All populations
Eastway Family Center Webster Street Academy Mental health and addiction	1110 Webster Street Dayton, OH 45404 Phone: 937-463-2955 https://webster.eastway.org	Adolescents aged 12-17
Ohio Healthy Programs Chronic disease	Public Health Dayton and Montgomery County 117 South Main St. Dayton, OH 45422 Phone: 937-225-5700 https://www.phdmc.org/healthy-lifestyles	All populations in Montgomery County

Program/Service	Agency and Contact Information	Population(s) Served
OSU Extension Chronic disease	510 W. Water St. Suite 250 Troy, OH 45373 https://miami.osu.edu/	All populations in Miami county
OSU Extension Services: Dinning with Diabetes Chronic disease	100 Fairground Rd. Xenia, OH 45385 Phone: 937-372-9971 https://greene.osu.edu/program-areas/family-adn-consumer-science./diabetes-information	Community
Warren County Health District - Prevention and Wellness Subcommittee Chronic disease	www.wcchd.com	Community in Warren County
Safe Sleep Maternal and infant health	Ohio Department of Health http://www.odh.ohio.gov/know-our-programs/maternal-infant-wellness/safe-sleep/safe-sleep	Expecting mothers, parents and children
Five Rivers Health Center, Center for Women's Health Maternal and infant health	721 Miami Chapel Rd. Dayton, OH 45417 Phone: 937-281-6800 https://www.fiverivershealthcenters.org/locations/center-for-womens-health	Women with infants
Elizabeth New Life Center Maternal and infant health	359 Forest Ave, Ste. 202 Dayton, OH 45405 Phone: 937-228-2222 https://enlc.life	Expecting and new Mothers
Buckeye Health Plan Pregnancy Start Smart Maternal and infant health	Phone: 1-866-246-4358 https://ambetter.buckeyehealthplan.com/benefits-services/start-smart.html	Expecting and new mothers with Buckeye insurance
CareSource Babies First Program Maternal and infant health	Phone: 1-800-488-0134 https://www.caresource.com/plans/medicaid/benefits-services/additional-services/babies-first	Expecting and new mothers with Caresource insurance
Molina Healthcare Care Management for Pregnancies Maternal and infant health	Phone: 1-866-209-1126 https://www.molinahealthcare.com/members/oh/enus/hp/medicaid/overvw/coverd/hm/edu/pregprog.aspx	Expecting mothers with Molina insurance
United Healthcare Community Plan Healthy First Steps Maternal and infant health	Phone: 1-800-599-5985 https://member.uhc.com/communityplan/public/healthy-first-steps	Expecting mothers with United Healthcare insurance
Anthem Pregnancy and Women's Health Maternal and infant health	Phone:1-888-990-8681 https://www.anthem.com/oh/medicaid/health-topics/pregnancy-and-womens-health	Expecting mothers with Anthem insurance
Miami Co. Public Health Maternal and infant health	510 W. Water Street Ste. 130 Troy, OH 45373 Phone: 937- 573-3500 https://www.miamicountyhealth.net	Community & at risk
Miami Co. Dental Clinic Maternal and infant health	70 Troy Town Dr. Troy, OH 45373 Phone: 937-339-8656 https://miamicountydental.org	Community & at risk
Women, Infant and Children (WIC)-Greene Couty Maternal and infant health	Greene County Public Health 360 Wilson Dr. Xenia, OH 45385 Phone: 937-374-5600 https://www.gcph.info/wellness-services/maternal-and-child-health/wic	Baby, infants, and children up to five years of age in Greene County

Program/Service	Agency and Contact Information	Population(s) Served
Early Intervention Services Greene County Maternal and infant health	Greene County Public Health 360 Wilson Dr. Xenia, OH 45385 Phone: 937-374-5600 https://www.gcph.info/wellness-services/maternal-and-child-health/early-intervention	Parents of eligible children under the age of three with developmental delays or disabilities in Greene County
Women, Infants and Child (WIC) Program - Warren County Maternal and infant health	Warren County Health District 416 S. East St. Lebanon, OH 45036 Phone: 513-695-1217 http://warrenchd.com/home/wic	Mothers and young children in Warren County
Centering Pregnancy practices: Life Stages Maternal and infant health	Multiple locations https://www.premierhealth.com/lifestages-centers-for-women/locations	Expecting mothers
Women, Infants and Children (WIC) Program-Montgomery County Maternal and infant health	Public Health Dayton and Montgomery County Multiple locations in Montgomery County http://www.phdmc.org/child-maternal-health/women-infants-and-children-wic	Women, infants, and children up to age 5 in Montgomery County
Five Rivers Center for Women's Health Maternal and infant health	Five Rivers - Center for Women's Health 721 Miami Chapel Rd. Dayton, OH 45417 Phone: 937-965-4596 https://www.fiverivershealthcenters.org/locations/center-for-womens-health	Expecting mothers
Cribs for Kids Maternal and infant health	Public Health-Dayton & Montgomery County 117 S. Main St. Dayton, OH 45422 Phone: 937-496-6831 https://www.phdmc.org/programs-a-to-z/cribs-for-kids	Expecting mothers and infant caregivers in Montgomery County
Fidelity Health Care Maternal and infant health	3170 Kettering Blvd. Moraine, OH 45439 Phone: 937-208-6400 Toll-free: 800-946-6344 https://www.premierhealth.com/locations/fidelity-health-care	Mothers of infants
Mom's and Babies First Maternal and infant health	1323 W. Third Street Dayton, OH 45402 Phone: 937-224-3696 https://www.phdmc.org/programs-a-to-z/moms-babies-first	Expecting mothers, fathers and infants
Holy Family Prenatal Care Maternal and infant health	359 Forest Ave. Ste 202 Dayton, OH 45405 Phone: 937-228-4492	Patients of Holy Family Prenatal Care
EveryOne Reach One Maternal & Infant Vitality Task Force Maternal and infant health	Phone: 937-225-5700 https://mceveryonereachone.org/	Expecting mothers and mothers of infants
Trauma and Resilience - Informed Birth Education (TRIBE) Maternal and infant health	https://www.tribecoop.org/	Expecting mothers and infants
Moms2B Maternal and infant health	Phone: 937-775-3416 Email: Moms2B@wright.edu	Expecting mothers and infants
Queens Village Dayton Maternal and infant health	Phone: 937-496-7188 Email: QueensVillageDayton@phdmc.org	Expecting mothers and infants

Program/Service	Agency and Contact Information	Population(s) Served
Bike Miami Valley Community conditions	Bike Miami Valley 929 S. Perry St. Dayton, OH 45402 Phone: 937-496-3828 E-mail: lestandia@bikemiamivalley.org	Community
Safe Kids Greater Dayton Community conditions	Dayton Childrens Hospital 1 Children's Plaza Dayton, Ohio 45404 Phone: 937-641-5853 E-mail: safekids2@childrensdayton.org childrensdayton.org/safekids	Children
4C for Children Community conditions	2213 Arbor Blvd. Kettering, OH 45404 Phone: 937-220-9660 https://www.4cforchildren.org	Parents of young children
Homefull Housing Assistance Programs Community conditions	2621 Dryden Rd. Suite 302 Dayton, OH 45439 Phone: 937-293-1945 https://www.homefull.org/	All populations
Earned Income Tax Credit Program (EITC) Community conditions	City of Dayton https://www.daytonohio.gov/DocumentCenter/View/6406/2023-EITC-Flier?bidId=	All populations
St. Vincent De Paul Homeless Shelter Community conditions	St. Vincent De Paul 120 Apple St. Dayton, OH 45402 Phone: 937-461-7837 https://stvincentdayton.org	All populations
Preschool Promise Community conditions	2251 Timber Ln. Dayton, OH 45414 Phone: 937-329-2700 https://www.preschoolpromise.org	Children 0-5 in Montgomery County
Brunner Literacy Center Community conditions	1995 Shiloh Springs Rd. Dayton, OH 45426 Phone: 937-567-9600 https://www.brunnerliteracy.org/programs.html	Adult populations
Welcome Dayton Community conditions	101 W. Third St. Dayton, OH 45402 Phone: 937-333-3333 https://www.daytonohio.gov/998/Welcome-Dayton	Immigrant populations
The National Conference for Community & Justice of Greater Dayton (NCCJ) Community conditions	118 West First St. Ste. 630 Dayton, OH 45402 Phone: 937-222-6225 https://nccjgreaterdayton.org	All populations
Miami Valley Community Action Partnership Community conditions	719 S. Main St. Dayton, OH 45402 Phone: 937-341-5000 https://miamivalleycap.org	All populations in Montgomery, Greene, Darke and Preble Counties
Bellbrook-Sugarcreek Community Support Center Community conditions	51 South East Street Bellbrook, OH 45305 Phone: 937-848-3810 https://www.bsccsc.org	Community
Montgomery County Imagination Library Community conditions	1010 Valley St. Dayton, OH 45404 Phone: 937-641-5742 Email: Imaginationlibrary@childrensdayton.org	Children 0-5 in all counties
Warren County Family and Children First Counsel	1879 Deerfield Rd. Lebanon, OH 45036 Phone: 513-695-2900 Ext.2916	Children and families in Warren County

Program/Service	Agency and Contact Information	Population(s) Served
Mental health and addiction Maternal and infant health	http://www.co.warren.oh.us/fcfc/	
Mental Health Resource Connection Mental health and addiction Access to care	Dayton Children's Hospital 1 Children's Plaza Dayton, OH 45404 Phone: 937-641-4780 https://www.childrensdayton.org/patients-visitors/services/behavioral-health/programs-and-services/mental-health-resource-connection	Children and families
Montgomery County Alcohol, Drug and Mental Health Services Local Help Now Mental health and addiction Community conditions	https://montgomerycounty.localhelpnowapp.com	All populations in Montgomery County
Family Resource Guide Mental health and addiction, Chronic disease Maternal and infant health Community conditions Access to care	Montgomery County Department of Job and Family Services www.mcoho.org http://www.mcoho.org/document_center/JobFamily/Dayton_and_Montgomery_County_Family_Resource_Guide.pdf	Community
Goodwill Easter Seals Mental health and addiction Chronic disease Maternal and infant health	660 S. Main Street Dayton, OH 45402 Phone: 937-461-4800 https://gesmv.org	Community
Partners in Hope Mental health and addiction Chronic disease Community conditions	180 E. Race St. Troy, OH 45373 Phone: 937-335-0448 www.partnersinhopeinc.org Phone: 937-335-0448	Community and at risk
Warren County Community Services, Inc. - Early Learning Centers Mental health and addiction Chronic disease Maternal and infant health	https://www.wccsi.org/sitepages/PGM_EARLY_LEARNING.html	0-4 years old in Warren County
United Way Mental health and addiction Chronic disease Maternal and infant health Community conditions Access to care	Call 2-1-1 Toll Free: 800-543-7709 Text your zip code to 898-211 https://dayton-unitedway.org/get-help-now/	All populations in Greene, Montgomery and Preble Counties
Rocking Horse Center Mental health and addiction Chronic disease Maternal and infant health	651 S. Limestone Street Springfield, Ohio 45505 Phone: 937-324-1111 https://www.rockinghorsecenter.org	All populations
Dream Center Dayton Mental health and addiction Chronic disease Community conditions	2720 E. Third St. Dayton, OH 45403 Phone: 937-469-8840 https://www.daytondreamcenter.org/programs	All populations
Catholic Social Services of the Miami Valley	922 W. Riverview Ave. Dayton, OH 45402 Phone: 937-233-7217	All populations

Program/Service	Agency and Contact Information	Population(s) Served
Mental health and addiction Maternal and infant health Community conditions	https://cssmv.org	
East End Community Service Mental health and addiction Community conditions	624 Xenia Ave. Dayton, OH 45410 Phone: 937-259-1898 https://www.east-end.org	All populations
Warren County Community Services, Inc. Chronic disease Community conditions	645 Oak St. Lebanon, OH 45036 Phone: 513-695-2100 https://www.wccsi.org/sitepages/HOME.html	All populations in Warren County
The New Path Chronic disease Community conditions	7695 S. Co. Rd 25 A Tipp City, OH 45371 Phone: 937-669-1213 https://www.newpathserves.org	All populations in Miami County
Bethany Center Chronic disease Community conditions	339 S. Street PO Box 224 Piqua, OH 45356 Phone: 937-615-9762 www.miamiacac.org/new/bethany-center/	At risk population
Faith Community United Methodist Church: X-Out Hunger Backpack Cuisine Chronic disease Community conditions	100 Country Club Drive Xenia, OH 45385 https://xouthungerxenia.wixsite.com/help?fbclid=IwAR272bDuGleQ_01pEbSkDCNJOLgenNvmzajetGwOipslIRPpGDarHwxx7Fk	Xenia Elementary School students
OSU Extension Services: Supplemental Nutrition Assistance Education Program (SNAP-Ed) Chronic disease Community conditions	100 Fairground Rd. Xenia, OH 45385 Phone: 937-372-9971 https://greene.osu.edu/program-areas/snap-ed	Community
OSU Extension Services: EFNEP (Expanded Food and Nutrition Education Program) Chronic disease Community conditions	100 Fairground Rd. Xenia, OH 45385 Phone: 937-372-9971 https://greene.osu.edu/program-areas/efnep	All populations in Greene County
One Bistro (free meals) Chronic disease Community conditions	87 Main Street Xenia, OH 45385 Phone: 937-736-2358 https://onebistro.org/	Community
Dayton Asthma Alliance Chronic disease Community conditions	Dayton Children's Hospital 1 Children's Plaza Dayton, OH 45404 https://www.childrensdayton.org/community/advocacy-and-outreach/community-programs/dayton-asthma-alliance	Children with asthma
Homefull Mobile Grocery Chronic disease Community conditions	https://www.homefull.org/mobile-grocery	Community
The Dayton Food Bank Chronic disease Community conditions	56 Armor Pl. Dayton, OH 45417 Phone: 937-461-0265 https://thefoodbankdayton.org	All populations
Fidelity Health Care Chronic disease Maternal and infant health	3170 Kettering Blvd. Moraine, OH 45439 Phone: 937-208-6400 Toll-free: 800-946-6344	All populations

Program/Service	Agency and Contact Information	Population(s) Served
	https://www.premierhealth.com/locations/fidelity-health-care	
Help Me Grow/Brighter Futures Chronic disease Maternal and infant health	Phone: 937-208-GROW (4769) https://hmgbf.org	Expecting mothers or mothers of young children
Dayton Local Office on Minority Health Chronic disease Maternal and infant health Community conditions	117 S. Main St. Dayton, OH 45422 Phone: 937-225-4962 https://mih.ohio.gov/LOMH-Dayton	Community
The Salvation Army Kroc Center Chronic disease Community conditions	1000 N. Keowee St. Dayton, OH 45404 Phone: 937-528-5100 https://easternusa.salvationarmy.org/dayton-kroc	All populations
Miami Valley Meals Chronic disease Community conditions	428 S. Edwin C. Moses Blvd. Dayton, OH 45402 Phone: 937-938-7141 https://miamivalleymeals.org	All populations
Family and Children First Council Maternal and infant health Community conditions	451 West Third Street Dayton, OH 45422-3100 Phone: 937-225-4695 https://www.mcoho.org/departments/human_services_planning_and_development/family_and_children_first_council/index.php	Families and children in Montgomery County
Montgomery County Job and Family Services, Children Services Division Maternal and infant health Community conditions	3304 N. Main Street Dayton, OH 45405 Phone: 937-224 - K I D S (5 4 3 7) https://www.mcoho.org/departments/children_services/contact_us.php	Community
Baby & Me Tobacco Free Program Maternal and infant health Chronic disease	1320 E. 5th Street Dayton, OH 45410 Phone: 937-496-3376 https://www.phdmc.org/programs-a-to-z/baby-me-tobacco-free	Expecting mothers or mothers of infants
Community Health Centers of Greater Dayton Maternal and infant health Access to care	Phone: 937-461-6869 https://www.communityhealthdayton.org/	All populations
The Wesley Community Center Maternal and infant health Community conditions	3730 Delphos Ave. Dayton, OH 45417 Phone: 937-263-3556 Ext. 212 https://wesleydayton.org	All populations
The Stork's Nest Baby Pantry Maternal and infant health Community conditions	425 Findlay St. Dayton, OH 45404 Phone: 937-461-3625 https://www.daytonlife.org/Pregnant/services.php	Women, infants, and children up to age 5
Greater Dayton Area Hospital Association Pathways Hub Maternal and infant health Community conditions	Phone: 937-424-2361 https://gdaha.org/	Expecting mothers and mothers of infants
FindHelp/Dayton Children's Community Resource Hub	https://childrensdayton.findhelp.com/	All populations

Program/Service	Agency and Contact Information	Population(s) Served
Community conditions Access to care		
The Hope Center for Families Community conditions Access to care	1816 Harvard Blvd. Dayton, OH 45406 Phone: 937-739-4673 https://hopecenterdayton.org	All populations
Ebenezer Healthcare Access Community conditions Access to care	196 Hawthorn St. Dayton, OH 45402 Phone: 937-580-8817 http://www.ebenezeri.org	Immigrant populations

