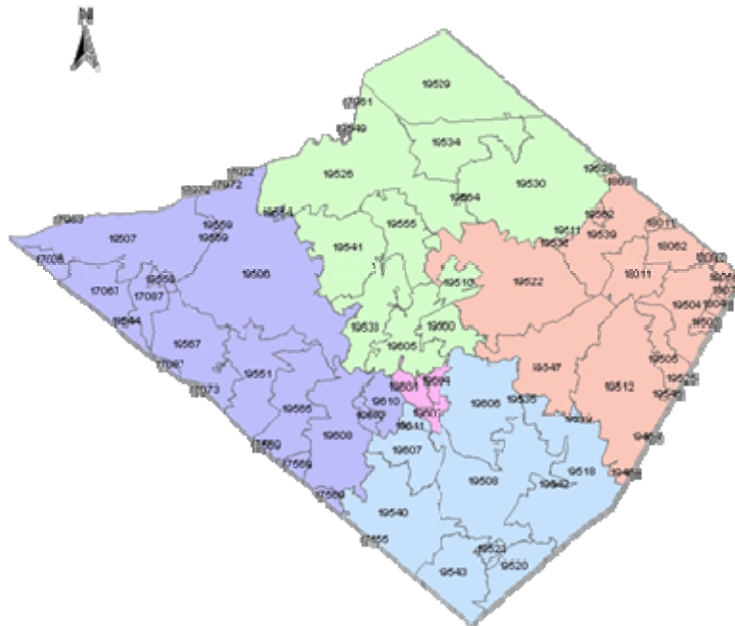




## **BERKS COUNTY, PENNSYLVANIA COMMUNITY HEALTH NEEDS ASSESSMENT**



PREPARED FOR:  
**BERKS COUNTY COMMUNITY FOUNDATION  
ST. JOSEPH REGIONAL HEALTH NETWORK  
READING HEALTH SYSTEM  
UNITED WAY OF BERKS COUNTY**

PREPARED BY:  
**THE RESEARCH AND EVALUATION GROUP  
PUBLIC HEALTH MANAGEMENT CORPORATION  
260 SOUTH BROAD STREET, 18<sup>TH</sup> FLOOR  
PHILADELPHIA, PA 19102**

**JANUARY 2013**



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## **BERKS COUNTY COMMUNITY HEALTH NEEDS ASSESSMENT**

### **EXECUTIVE SUMMARY**

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#### **PURPOSE**

This needs assessment was jointly sponsored by the Berks County Community Foundation, St. Joseph Regional Health Network, Reading Health System, and the United Way of Berks County. The purpose of the needs assessment is to identify and prioritize community health needs so that these organizations can develop strategies and implementation plans that benefit the public as well as satisfy the requirements of the Affordable Care Act for the two hospitals. This report summarizes the results of an assessment of the health status and health care needs of residents *in* Berks County, Pennsylvania. The needs assessment was conducted by Public Health Management Corporation, a private non-profit public health institute. This needs assessment was completed before many of the provisions of the Affordable Care Act went into effect, and before the Berks Community Health Center had been in operation for more than a few months. Therefore, information on the impact of the legislation and the Health Center on access to health care were not included in the research for this assessment. It is anticipated that both of these recent changes in the health care system in Berks County will have an impact on the issues raised by this assessment.

#### **NEEDS ASSESSMENT PROCESS**

This needs assessment was overseen by a Steering Committee of representatives from each of the four sponsoring organizations. An Advisory Committee of 17 representatives from Berks County community organizations was appointed by the Steering Committee to provide input from the community. The Advisory Committee supplied guidance at all stages of the needs assessment process.

#### **COMMUNITY**

**Berks County** (2010 Pop. 411,500) was defined as the community for the purposes of this assessment. Berks County includes urban, suburban, and rural areas with distinct populations and health resources. The population of Berks County is relatively homogeneous overall, with the exception of the City of Reading, where the majority of residents are Latino. The City of Reading also has a younger population than the County as a whole, and its residents are poorer than the county as a whole. In 2010, the City of Reading had the largest share of its population in poverty among cities in the U.S. with a population of 65,000 or more.<sup>1</sup> The population of Berks County is not expected to greatly increase in the next few years.

#### **HEALTH**

Overall, Berks County residents are in good health. However, heart disease is the leading cause of death followed by all forms of cancer (including female breast cancer), stroke, lung cancer, and female breast

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<sup>1</sup>"Reading, PA Knew it Was Poor. Now it Knows Just How Poor." New York Times, September 27, 2011, page A10.



cancer. In addition, many adults suffer from obesity, high blood pressure, diabetes and untreated mental health conditions. For example:

- Nearly one-third of adults (30.2%) are obese and more than one-third (35.9%) are overweight;
- One-third of adults (33.4%) have been diagnosed with high blood pressure; this percentage represents 105,400 adults;
- One in seven adults (13.9%) has been diagnosed with diabetes; and
- Although 14.6% have been diagnosed with a mental health condition, only 38.5% of those are receiving treatment for their condition.
- Residents of the City of Reading, Blacks, and Latinos are in poorer overall health, are more likely to be obese and are more likely to have diabetes, high blood pressure, or a mental health condition than other residents, but there are many smaller suburban and rural areas of the County where low income residents, in particular, are in poor health.

## **UNMET NEEDS**

Health care is unaffordable for many Berks County residents. Forty-four percent of survey respondents identified the cost of health care, including insurance coverage, co-pays, and deductibles, as the most common health concern. For example:

- One in seven adults aged 18-64 (13.3%) is uninsured, representing 33,000 uninsured adults; this percentage has increased from 8.7% in 2008 to 13.3% in 2012.
- Among the uninsured in Berks County, one-quarter (24.8%) visited an emergency room for care in the past year due to a lack of health insurance.
- Many adults in Berks County are unable to get needed care due to the cost of that care: 12.0% of adults, or about 37,000 individuals, reported that there was a time in the past year when they needed health care, but did not receive it due to the cost.

## **CONCLUSION AND RECOMMENDATIONS**

The overall health status of Berks County's population compares favorably to Pennsylvanians in general and *Healthy People 2020* goals. Nonetheless, a number of disparities do exist among the subareas and subpopulations studied. Disparities in health status are affected by a variety of factors, including, among others: poor access to health services; various socio-demographic factors, including income; insurance coverage; and cultural considerations.

Although these disparities are not isolated in any one geographic region compared to Berks County as a whole, they are most likely to be statistically significant for the City of Reading, the county's largest urban area, where the highest concentrations of poor, uninsured, racial minorities, and individuals who identify their ethnicity as Hispanic or Latino reside. The following table summarizes several of the indicators discussed in the study and illustrates the challenge posed by the relative health status of the population of the separate subareas of the County.



**Selected Health Indicators from the Berks County Community Health Needs Assessment**

| Indicators                                    | Figure #      | Berks County | Reading | North Berks | South Berks | East Berks | West Berks |
|---|---------------|--------------|---------|-------------|-------------|------------|------------|
| <b>Health Status and Behavior Indicators*</b> |               |              |         |             |             |            |            |
| Mental health condition                       | 18            | 14.6%        | 21.3%   | 10.7%       | 14.1%       | 11.6%      | 15.6%      |
| Health status fair or poor                    | 15            | 15.9%        | 32.6%   | 14.5%       | 14.0%       | 13.2%      | 7.4%       |
| High blood pressure                           | 16            | 33.4%        | 40.0%   | 30.5%       | 33.1%       | 34.6%      | 30.8%      |
| Obesity                                       | 17            | 30.2%        | 35.0%   | 26.1%       | 30.8%       | 29.5%      | 30.6%      |
| Diabetes                                      | App C-Table 1 | 13.9%        | 18.9%   | 13.7%       | 13.7%       | 16.9%      | 8.8%       |
| ER visit due to no insurance                  | 22            | 24.8%        | 44.1%   | 16.6%       | 27.3%       | 8.1%       | 6.8%       |
| Did not fill prescription due to cost         | App C-Table 3 | 13.7%        | 23.7%   | 15.4%       | 12.5%       | 7.4%       | 8.9%       |
| No dental care due to cost                    | App C-Table3  | 21.1%        | 33.2%   | 20.2%       | 19.3%       | 22.2%      | 14.0%      |
| No regular source of care                     | 24            | 11.8%        | 18.9%   | 11.7%       | 9.1%        | 11.9%      | 9.6%       |
| Smoking                                       | 27            | 20.4%        | 29.3%   | 18.5%       | 19.3%       | 18.5%      | 17.6%      |
| Binge drinking                                | App C-Table 4 | 38.4%        | 47.9%   | 32.8%       | 43.6%       | 37.1%      | 33.0%      |
| <b>Vital Statistics**</b>                     |               |              |         |             |             |            |            |
| Adolescent births/1,000 births                | 13            | 9.4          | 28.1    | 3.5         | 5.1         | NA         | 2.8        |
| Late /no prenatal care                        | 25            | 32.8%        | 50.1%   | 24.7%       | 24.0%       | 24.8%      | 23.0%      |
| Mortality rate/100,000 pop                    | 20            | 731.3        | 926.6   | 692.0       | 699.6       | 720.1      | 639.5      |
| <b>Social/Economic Indicators</b>             |               |              |         |             |             |            |            |
| Uninsured adults*                             | 21            | 13.3%        | 23.7%   | 8.3%        | 8.8%        | 15.2%      | 13.9%      |
| Low social capital*                           | 28            | 31.0%        | 57.0%   | 29.5%       | 25.5%       | 22.3%      | 23.8%      |
| Living in poverty***                          | 8             | 13%          | 34%     | 6%          | 10%         | 5%         | 6%         |

\*Source: PHMC's 2012 Berks County Household Health Survey (n=1,101)

\*\*Source: PA Department of Health, Bureau of Health Statistics and Research, 2005-2008; not tested for significance

\*\*\*Source: U.S. Census, 2010; not tested for significance

**Note:** Shaded areas represent statistically significantly worse results compared to Berks County (p<.05).

In addition to the results obtained from a phone survey of residents in five subareas and other third party data, the following health issues were also raised as significant areas of concern by participants in focus groups and key informant interviews:

- Cost of care, including insurance coverage, co-pays, and deductibles;
- Chronic diseases;
- Access to child and adolescent psychiatrists;
- Access to specialists by Medical Assistance beneficiaries and the uninsured or under-insured;
- Reluctance on the part of undocumented immigrants to utilize social and health services available in the community; and
- Cultural and linguistic factors that lead to disparities in accessing essential health care, particularly for the Hispanic and Latino community.

Berks County has a considerable infrastructure of social service agencies and health care providers that provide care to at-risk populations. These health care providers include the new Berks Community Health Center, the St. Joseph Regional Health Network Downtown Campus, specialty clinics sponsored by the county's non-profit acute care hospitals, and the Western Berks Free Medical Clinic in Robesonia.



Nonetheless, the results of the Community Health Needs Assessment indicate a need for an expansion of essential health care services.

It is also notable that Berks County lacks a public health department. In many communities such a resource addresses gaps in the health safety net for at-risk populations in addition to risks affecting the overall health of the larger population. A county public health department might also serve as a focal point for coordinating community resources in response to significant health concerns and disparities that arise in the community.

### **Recommendations**

The following recommendations are made based in response to issues raised by the Community Health Needs Assessment. It is worth noting that community responses to the issues will need to take into consideration provisions of the Affordable Care Act as they are implemented, particularly those that expand access to health insurance for the uninsured and under-insured.

#### Target 1: Access to Essential Health Care

- Increase the capacity of existing providers and add new providers to improve access to essential healthcare services for at-risk populations. These needs include:
  - Primary care and specialty care;
  - Mental health services, including psychiatrists;
  - Early prenatal care, particularly for Black and Hispanic/Latina women; and
  - Patient navigators and case managers to assist at-risk populations in circumventing barriers to accessing essential health care.
- Encourage the community to work together to establish a Berks County Health Department to focus on such population health objectives as:
  - Providing preventive screenings and health education to at-risk subpopulations;
  - Addressing barriers at-risk populations face in accessing affordable medications, dental care and vision care; and
  - Coordinating community responses to issues affecting population health.
- Improve the social service agencies' and health care providers' capacity to address unique linguistic and cultural factors that affect access to care by large segments of the Hispanic/Latino population, specifically:
  - Increasing the availability of bilingual, culturally appropriate services, particularly in specialists' offices;
  - Better educating at-risk populations about the value and availability of preventive services;
  - Improving at-risk populations' understanding of eligibility requirements and application processes for publicly-funded health insurance; and
  - Addressing concerns of those at-risk populations whose legal status represents a barrier to accessing essential health services.

#### Target 2: Enhance Personal Health Behaviors

- Increase programs and interventions which address personal health behaviors that negatively impact health. Priorities should include:



- Developing strategies to address adolescent pregnancy, particularly in the City of Reading;
- Assisting smokers in quitting;
- Addressing obesity, especially in children; and
- Developing a concerted effort to reduce binge drinking in the County as a whole.

## **Advisory Committee Guidance**

The Community Advisory Committee to the Berks County Community Health Needs Assessment reviewed the report of Public Health Management Corporation (PHMC). The Committee drew conclusions that were consistent with those of PHMC, most notably that:

- The overall health status of Berks County residents is reasonably good compared to norms for Pennsylvania and *Health People 2020* goals;
- Enhancing preventive, primary, and specialty care for certain at-risk populations is the most direct approach to advancing the community's health status; and
- The greatest disparities in health status are concentrated among the poor, the Hispanic and Latino community, and in particular for those who reside in the City of Reading.

Recognizing that the issues raised by the report will require considerable time and resources to address adequately, the committee suggested that efforts be focused around a set of more immediate priorities and a set of longer term objectives.

### More Immediate Priorities

All of the following essential health care services need to be provided in a manner that is sensitive to the unique linguistic and cultural needs of the Hispanic and Latino at-risk populations and involve access to care issues. The three priorities chosen are:

1. Preventive Care:
  - Reducing the prevalence of obesity; and
  - Providing routine dental care.
2. Prenatal Care:
  - Increasing the utilization of prenatal care with a particular emphasis on the disproportionately high rate of adolescent pregnancies in the City of Reading.
3. Specialty Care:
  - Improving the availability of specialty care, particularly for the uninsured and under-insured; and
  - Enhancing access to behavioral health services.

### Longer Term Objectives

A more comprehensive and far reaching strategy is required to address the root causes of many disparities discussed in the needs assessment. One approach might be to organize a coalition of community leaders and stakeholders that would examine these issues in greater depth and forge a longer term strategy for ameliorating them. The objectives of such an effort might include, but are not limited to:



- Assessing how community resources might be better coordinated to provide a more effective response to the health disparities identified in the Community Health Needs Assessment;
- Investigating initiatives undertaken by other communities faced with similar challenges;
- Defining the appropriate role of a county public health agency and examining alternative approaches to financing and ensuring the sustainability of such a capability; and
- Exploring how an epidemiological database could be developed drawing on existing public and private resources to better monitor population health and the causes of disparities within the population.

In summary, the overall health status of Berks County residents is good and the majority of residents have access to essential health services. Nonetheless, in the interest of advancing the health of the community further, a concerted effort on the part of community resources is required to address and minimize to the extent feasible the troublesome disparities highlighted in the Community Health Needs Assessment.

The report that follows provides an overview of the assessment process, the data collection methods and sources of information utilized and provides a detailed picture of the health status, health care experiences, and unmet health care needs of residents in Berks County, Pennsylvania.





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## I. INTRODUCTION

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### **PURPOSE**

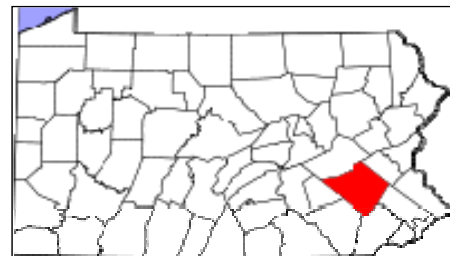
This needs assessment was jointly sponsored by the Berks County Community Foundation, St. Joseph Regional Health Network, Reading Health System, and the United Way of Berks County. The purpose of the needs assessment is to identify and prioritize community health needs so that these organizations can develop strategies and implementation plans that benefit the public as well as satisfy the requirements of the Affordable Care Act for the two hospitals. This report summarizes the results of an assessment of the health status and health care needs of residents in Berks County, Pennsylvania. The needs assessment was conducted by Public Health Management Corporation (PHMC), a private non-profit public health institute. This needs assessment was completed before many of the provisions of the Affordable Care Act went into effect, and before the Berks Community Health Center had been in operation for more than a few months. Therefore, information on the impact of the legislation and the Health Center on access to health care were not included in the research for this assessment. It is anticipated that both of these recent changes in the health care system in Berks County will have an impact on the issues raised by this assessment.

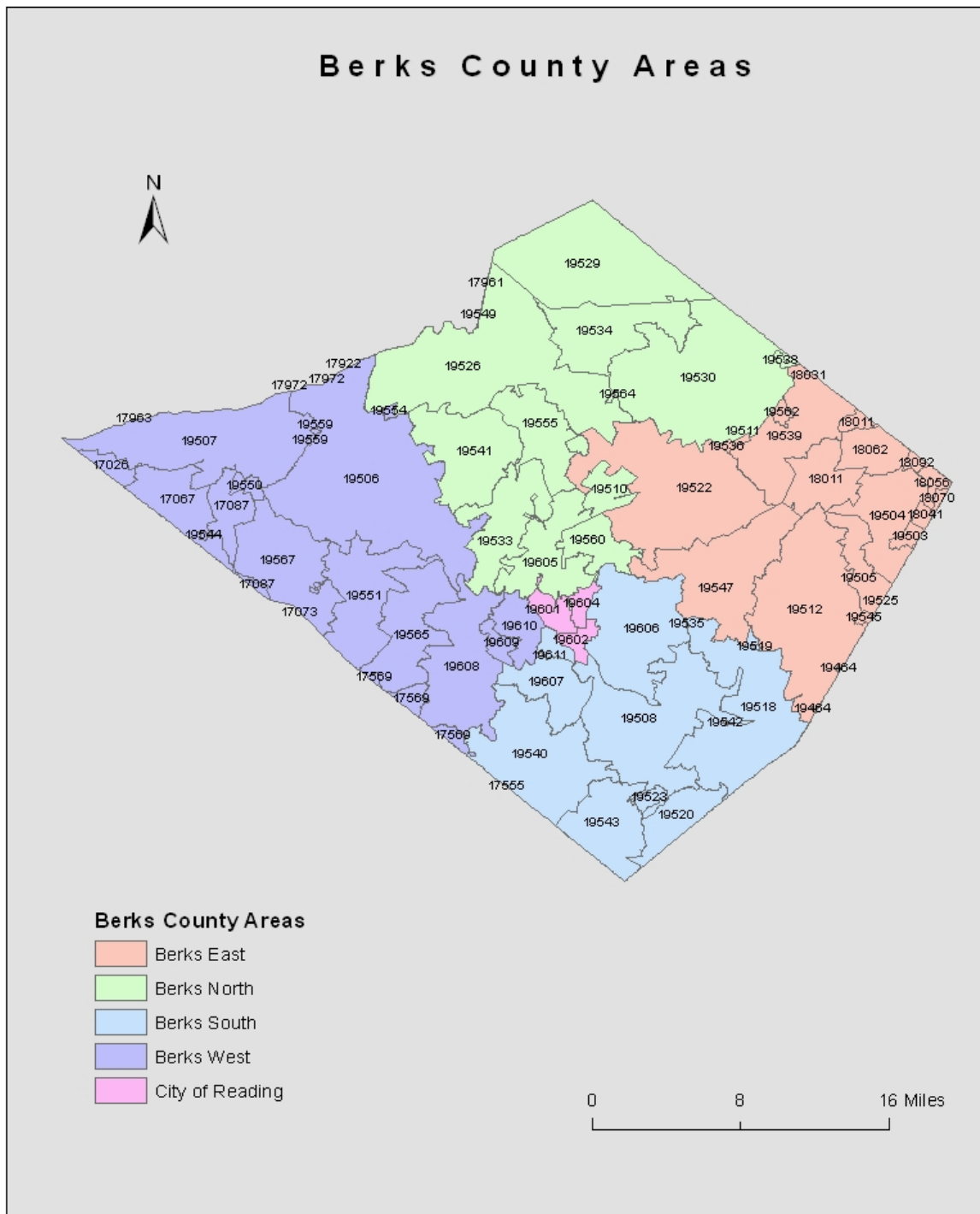
This introduction includes a definition of the community assessed in the report, the demographic and socioeconomic characteristics of the residents, and the existing health care resources followed by II. Needs Assessment Process and Methods; III. Findings; IV. Unmet Health Care Needs; and V. Conclusion and Recommendations. Tables and maps are included in Appendices A-G.

### **COMMUNITY DEFINITION**

**Berks County** (2010 Pop. 411,500) was defined as the community for the purposes of this assessment.

Berks County includes urban, suburban, and rural areas with distinct populations and health resources. For the purposes of this needs assessment, five geographic subareas of the County, defined by ZIP code clusters, were identified: the **City of Reading and East, West, North, and South Berks County** (Map 1). The boundaries of these smaller areas were determined by the Needs Assessment Steering Committee in collaboration with PHMC using county geography and population demographics. The City of Reading, consisting of only three ZIP codes approximately contiguous with its municipal boundaries, was assessed as a separate area because of the unique socioeconomic and demographic characteristics of its population compared to other areas of Berks County.





Source: U.S Census, 2010. Prepared by PHMC.



## **COMMUNITY DEMOGRAPHICS**

This report includes a description of the socioeconomic and demographic characteristics of the residents of Berks County and its separate regions because these characteristics are strong indicators of access to health care and good health.

### ***Population Size and Trends***

The population of Berks County is relatively homogeneous overall, with the exception of the City of Reading, where the majority of residents are Latino. The City of Reading also has a younger population than the County as a whole, and its residents are poorer than the County as a whole. In 2010, the City of Reading had the largest share of its population in poverty among cities in the U.S. with a population of 65,000 or more.<sup>2</sup> The population of Berks County is not expected to greatly increase in the next few years.

The total population of Berks County is **nearly 411,500**, a 10% increase from **373,600** in 2000 (Figure 1).<sup>3</sup> The population of Berks County is projected to continue to increase, but only slightly, through 2018 (See Appendix A for U.S. Census Tables).

The **South Berks area of the County has the largest population (122,000)**, followed by the North Berks area (84,400), the City of Reading (78,100), and the West (77,800) and East Berks (53,400) areas.

The **South Berks area had the largest increase in its population from 2000 to 2010 (13.3%)**; the **East Berks area had the smallest increase (1.7%)**.

The City of Reading, and North, West, and South Berks areas are projected to increase slightly in population through 2018, and the East Berks area is expected to decrease slightly (Figure 2).

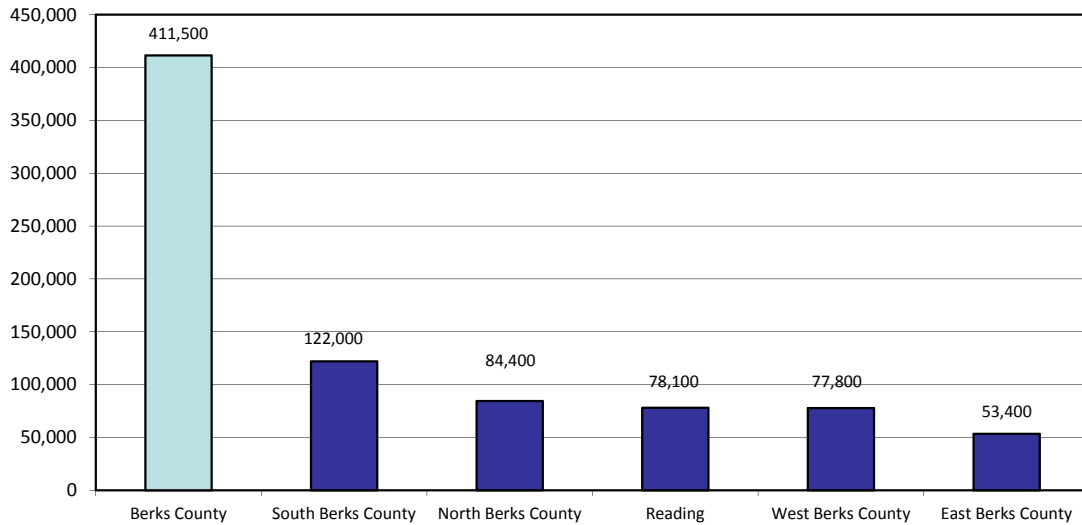
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<sup>2</sup>“Reading, PA Knew it Was Poor. Now it Knows Just How Poor.” New York Times, September 27, 2011, page A10.

<sup>3</sup>U.S. Census information for Berks County and county subareas are based on population totals for ZIP codes within Berks County and therefore may differ from U.S. Census totals based on county political boundaries.

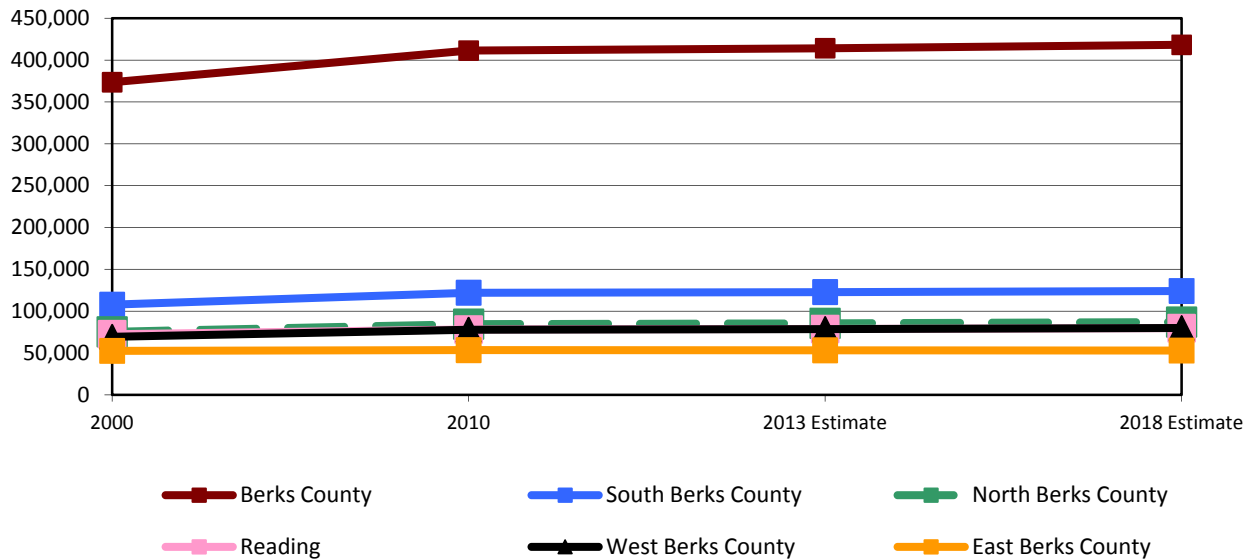


**Figure 1: Population of Berks County by Area, 2010**



Source: 2010 U.S. Census. Population figures based on ZIP code population.

**Figure 2: Population of Berks County, 2000-2018**



Source: Nielsen-Claritas Pop-Facts Database (2013, 2018) and 2000, 2010 U.S. Census. Population figures based on ZIP code population.



## ***Demographic Characteristics***

### Age

**Berks County has a relatively high percentage of older adults aged 65 and over (14.5%)** compared to the United States as a whole (13.0%). This percentage is lower than the percentage for Pennsylvania (16.0%). In Berks County nearly one-quarter of residents are children between the ages of 0-17 (23.9%), just over one-third are aged 18-44 (34.3%), and over one-quarter are aged 45-64 (27.4%). **The population of Berks County is aging; there was a decrease in the percentage of residents aged 18-44 between 2000 and 2010** (37.7% in 2000 and 34.3% in 2010) and **an increase in the percentage of those aged 45-64** (22.6% in 2000 and 27.4% in 2010). This age structure is expected to remain the same through 2018.

**The City of Reading, overall, has a younger population compared to the rest of the County;** 31.3% are ages 0-17 and 39.3% are ages 18-44 compared to 23.9% and 34.3%, respectively, in Berks County overall. Conversely, only **8.9% of adults in the City of Reading are 65 or older compared to 14.5% for Berks County.** In Reading, the percentage of residents under 65 years of age slightly increased from 2000 to 2010, while the percentage of adults 65 or older decreased.

The North, South, and West Berks areas follow a population trend that is similar to Berks County as a whole; in 2010, the percentages of adults aged 18-44 decreased and the percentages of adults 45-64 increased. The East Berks area has seen an increase in adults aged 45-64 and 65 or older and a decline in the percentages of residents ages 0-17 and 18-44; this trend is projected to continue through 2018.

### Gender

**In Berks County an equal percentage of residents are male and female:** 49.1% of residents are male and 50.9% are female.

### Race/Ethnicity

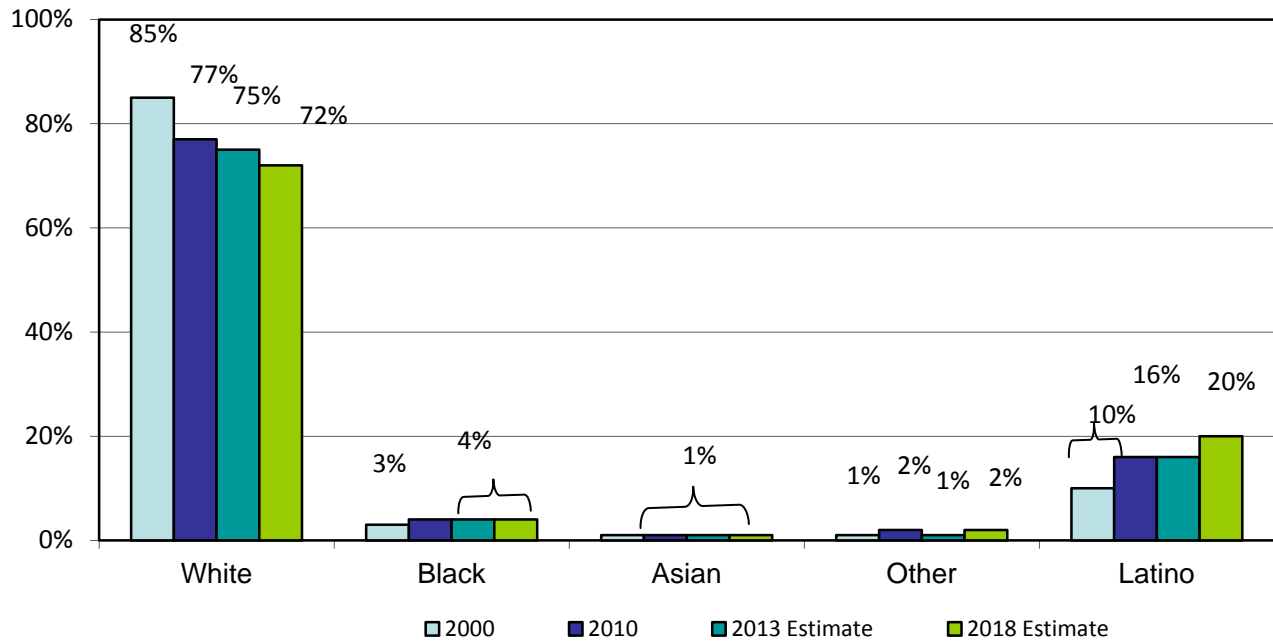
**In Berks County, the percentage of ethnic and racial minorities increased between 2000 and 2010** (Figure 3). **Between 2000 and 2010, the percentage of White residents dropped from 84.8% to 76.9% and the percentage of Latino residents increased from 9.7% to 16.4%.<sup>4</sup>** The percentages of Black, Asian, and those who identified as an “other” race/ethnicity increased slightly in 2010 as well. The Latino population in Berks County is projected to continue to grow through 2018.

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<sup>4</sup>It is important to note that racial and ethnic minorities are often undercounted by the U.S. Census. Therefore, the Asian, Black, and Latino populations of Berks County may actually be larger than reported.



**Figure 3: Race/Ethnicity of Berks County Residents, 2000-2018**



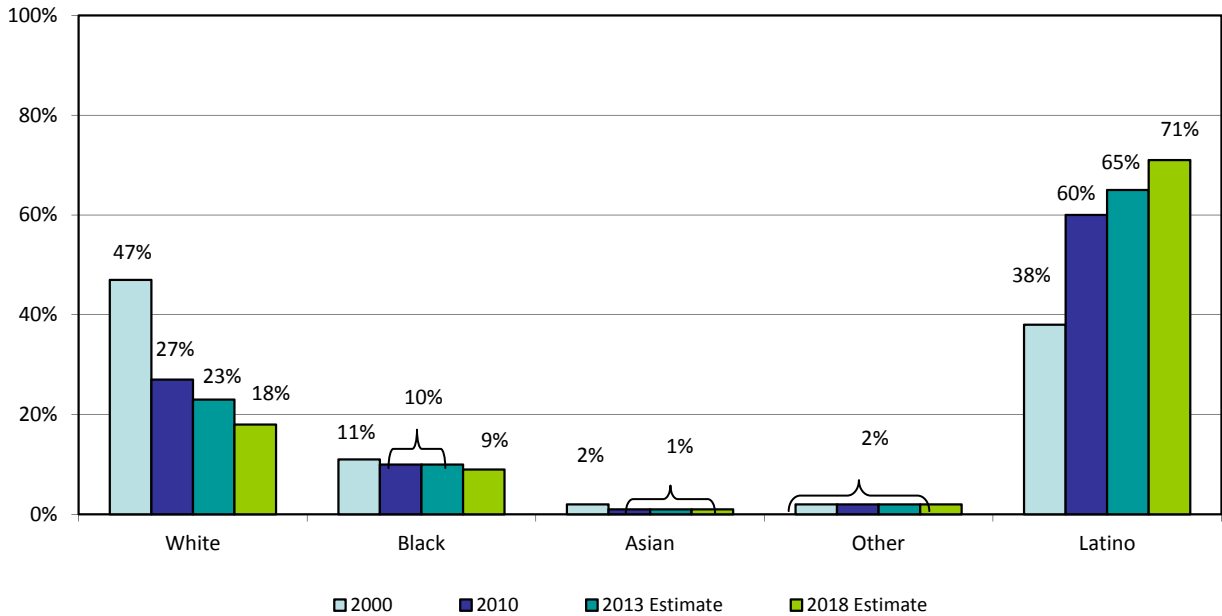
Source: Nielsen-Claritas Pop-Facts Database (2013, 2018) and 2000, 2010 U.S. Census. Population figures based on ZIP code population.

The race and ethnicity of Berks County residents varies by area. **The City of Reading has a much higher percentage of Latino (59.6%) residents than White (27.1%) or Black (10.2%) residents.** In contrast to the City of Reading, the North, South, East and West Berks areas are much less racially and ethnically diverse; over 85.0% of the population is White and 3.0% or less of the population is Black.

**The racial and ethnic composition of the City of Reading’s population changed substantially from 2000 to 2010.** The percentage of White residents decreased from 47.0% to 27.1%, and the percentage of Latino residents increased from 38.0% to 59.6%. These trends are expected to continue through 2018, as the White population decreases and the Latino population increases (Figure 4).



**Figure 4: Race/Ethnicity of City of Reading Residents, 2000-2018**



Source: Nielsen-Claritas Pop-Facts Database (2013, 2018) and 2000, 2010 U.S. Census. Population figures based on ZIP code population.

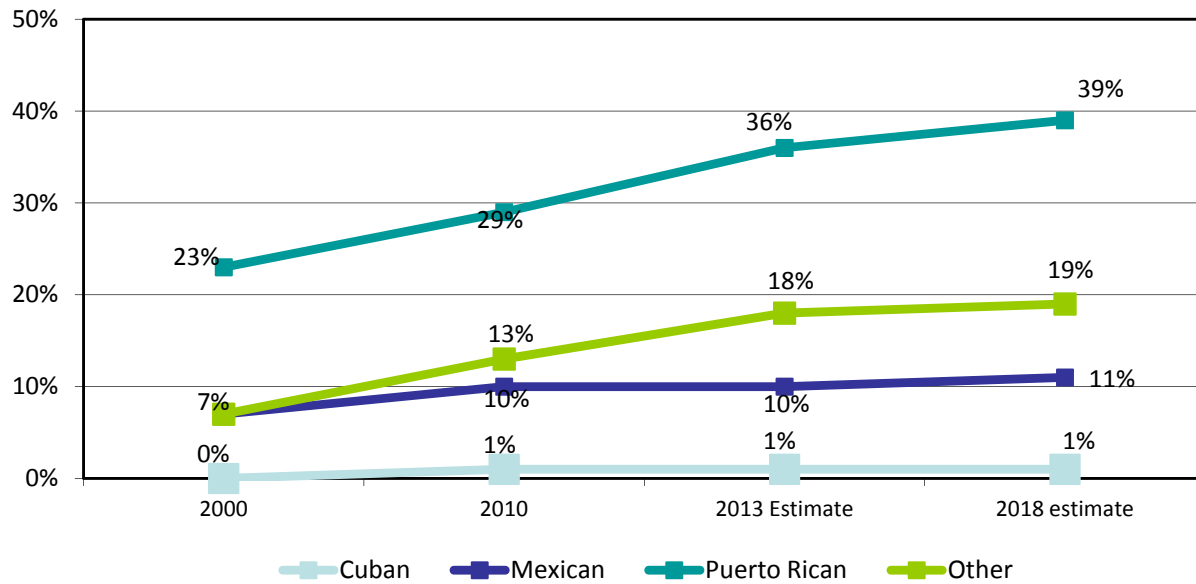
*Latino Origin*

**Approximately one in six residents of Berks County (16.4%) is Latino.** The Berks County Latino population increased from 9.7% to 16.4% between 2000 and 2010, and is projected to reach 20.3% in 2018. Latino residents most commonly identify as **Puerto Rican (7.8%)**, followed by **other Latino origin (3.9%)**, **Mexican American (2.4%)**, and **Cuban American (0.3%)**.

**The City of Reading has a substantially larger Latino population than the other areas of Berks County. The majority of the City of Reading residents are Latino (59.6%), representing 46,600 persons.** In comparison to the City of Reading, other areas of Berks County are less than 10% Latino: 8.0% (South), 7.2% (North), 5.2% (West), and 1.7% (East). In the City of Reading, the most common Latino cultural group is Puerto Rican (29.3%), followed by 13.0% other, 9.8% Mexican American, and 0.8% Cuban American (Figure 5).



**Figure 5: City of Reading Latino Population by Cultural Origin, 2000-2018**



Source: Nielsen-Claritas Pop-Facts Database (20013, 2018) and 2000, 2010 U.S. Census. Population figures based on ZIP code population.

In the North and West Berks areas, the percentage of Puerto Rican residents, although small, doubled between 2000 and 2010. The population of those who identified as being of “other” Latino origin increased slightly in 2010 in the North, West, and South Berks areas.

*Asian Origin*

**One percent of the population of Berks County is Asian (representing 5,200 individuals).** This percentage is not expected to change greatly in the near future. Asian residents most commonly identify as **Vietnamese American, followed by Indian and Chinese American.** By 2013 it is expected that there will be more Chinese American residents than Vietnamese and Indian American residents. The City of Reading has the highest percentage of Vietnamese residents and the West Berks area has the highest percentages of Indian and Chinese American residents.

Language Spoken at Home

**The overwhelming majority of Berks County residents speak English at home (85.1%),** about one in eleven speaks Spanish (10.6%), 3.6% speak another language, and 0.7% speak an Asian language. The percentage of residents who speak Spanish at home is projected to increase to about 12.2% in 2018.

**In the City of Reading, more than two in five residents (42.5%) speak Spanish at home, although the majority speak English at home (53.3%).** In the North, South, East and West Berks areas, at least 90.0%





of residents speak English at home. Similar to the County as a whole, the percentage of residents who speak Spanish at home is estimated to continue to increase slightly in Reading to 46.1% in 2018.

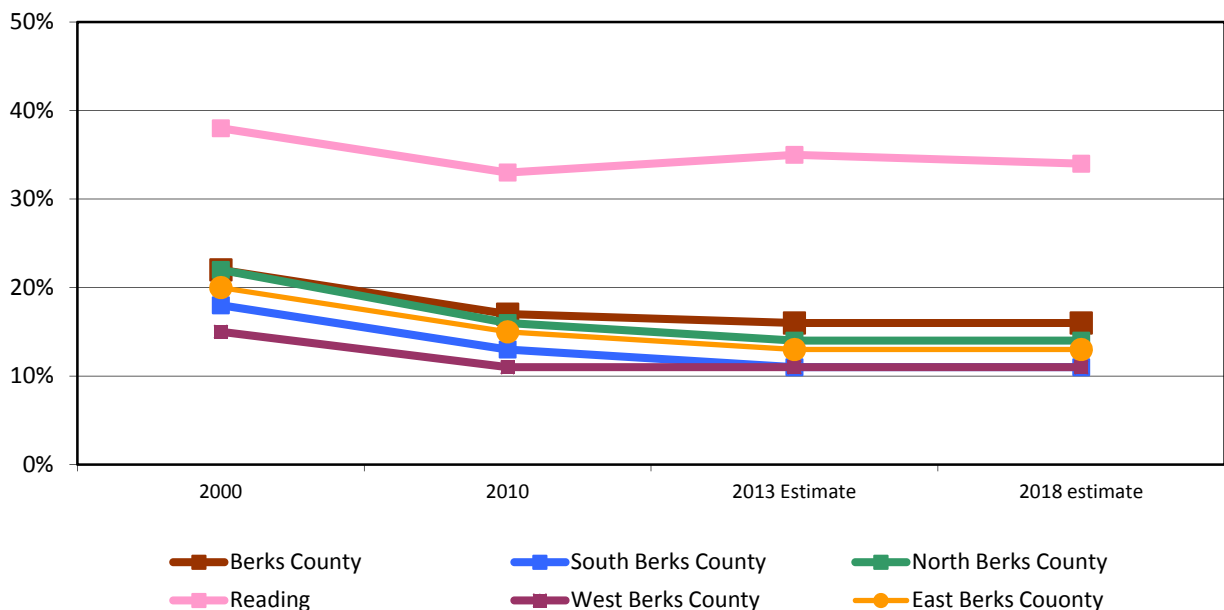
**Socioeconomic Indicators**

Education

**In Berks County, three out of five residents (60.5%) are high school graduates, and one in five (22.4%) has at least a college degree.** Seventeen percent of residents have less than a high school degree. While the percentage of high school graduates remained the same in 2000 and 2010, the percentage of those who have a college degree or more increased to 22.4% and the percentage of those who have less than a high school degree decreased to 17.1%. These percentages are projected to remain relatively constant through 2013 and 2018.

**The level of educational attainment is lower in the City of Reading than in the other Berks County areas. City of Reading residents are twice as likely to have dropped out of high school and one-half as likely to have a college degree as County residents overall.** In the City of Reading, one-third of residents (32.9%) have less than a high school degree, 56.0% graduated from high school, and only one in nine (11.1%) has a college or higher degree. These percentages have improved slightly since 2000. In contrast to the City of Reading, approximately 60.0% of residents of East, South, West, and North Berks areas have high school diplomas. While educational attainment in the other Berks County areas is generally projected to continue to improve, **in the City of Reading the percentage of those with less than a high school degree is projected to increase to 34.4% in 2018, and the percentage of those with a college degree or more is expected to decrease to 9.7%** (Figure 6).

**Figure 6: Residents with Less than a High School Degree in Berks County, 2000-2018**



Source: Nielsen-Claritas Pop-Facts Database (2013, 2018) and 2000, 2010 U.S. Census. Population figures based on ZIP code population.



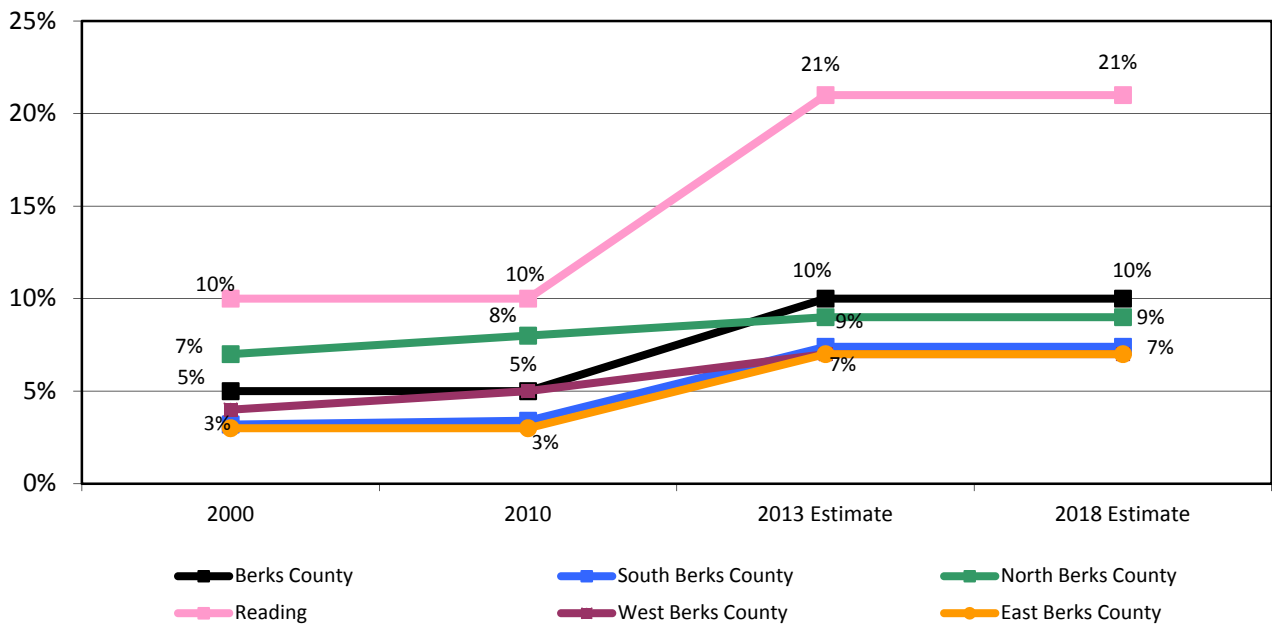
Employment

The overwhelming majority of Berks County residents age 25 and over (94.6%) were employed in 2010. By 2013, however, the unemployment rate is projected to double to 9.7%.

Reading has the highest unemployment rate in the County: 10.0% of residents were unemployed in 2010. The North Berks area had a slightly lower unemployment rate (7.5%). In the East, West and South Berks areas, the percentage of those who were unemployed in 2010 was less than 5.0%.

The unemployment rate in the City of Reading was 10.5% in November, 2012, and 7.8% in Berks County overall, according to the Pennsylvania Department of Labor. According to U.S. Census projections, unemployment rates are projected to rise to 10.0% in Berks County overall by 2018, and to 21.0% in the City of Reading in the next five years. (Figure 7).

**Figure 7: Percentage of Unemployed Adults 25+ in Berks County, 2000-2018**



Source: Nielsen-Claritas Pop-Facts Database (2013, 2018) and 2000, 2010 U.S. Census. Population figures based on ZIP code population.

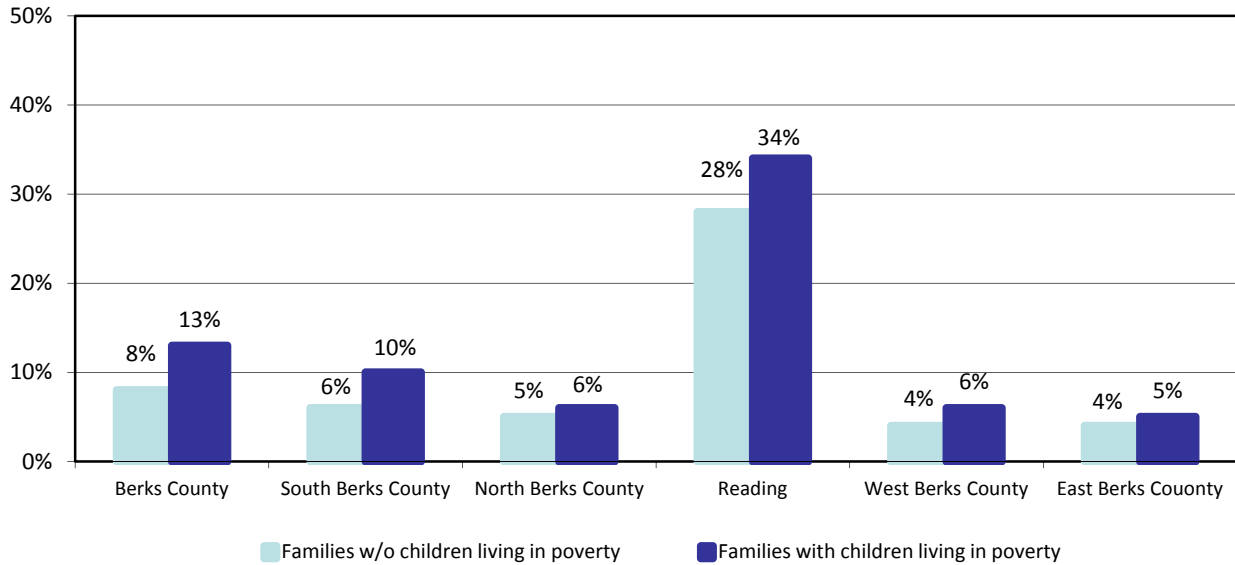


Poverty Status

In Berks County, 13.3% of families with children and 8.0% of families without children are living in poverty (Figure 8). The 2012 federal poverty level is an annual income of \$23,050 for a family of four.<sup>5</sup> The family poverty rate is projected to increase in 2013 and 2018.

**The City of Reading has the highest percentage of families living in poverty in Berks County:** more than one-third of families with children (37.2%) and more than one-quarter of families without children (27.6%) are living in poverty. **The percentage of City of Reading families without children living in poverty more than tripled from 2000 (8.0%) to 2010 (27.6%).** In other areas of Berks County the percentage of families with children living in poverty ranges from 4.6%-9.7%, and the percentage of families without children in poverty ranges from 3.6% to 5.6%.

**Figure 8: Percentage of Families With and Without Children Living in Poverty in Berks County, 2010**



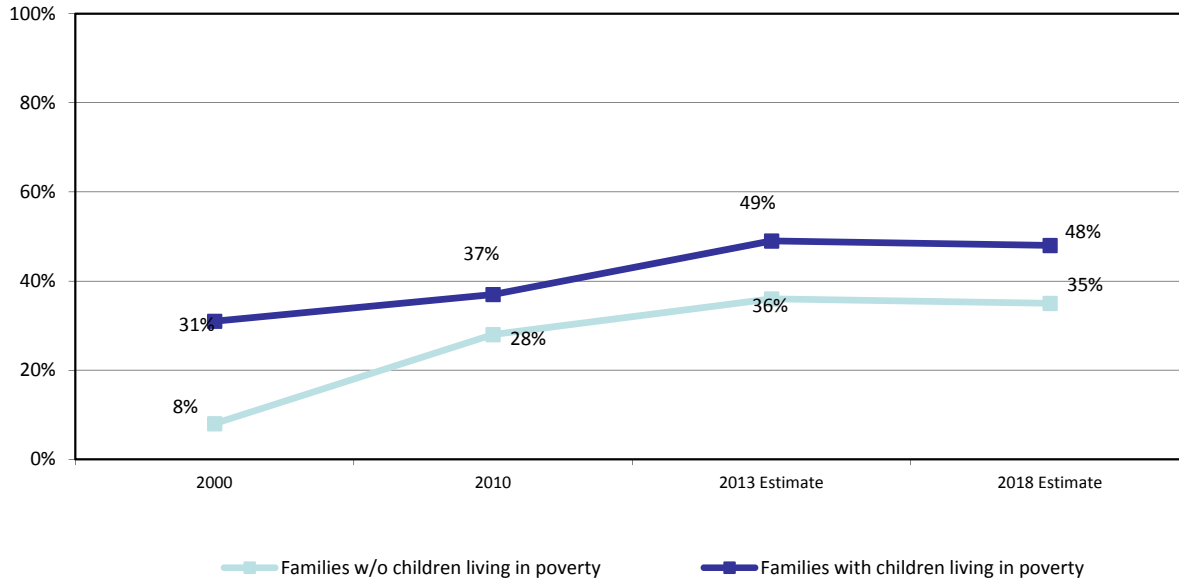
Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census. Population figures based on ZIP code population.

**All areas of Berks County are projected to see continued increases in the percentage of families living in poverty.** The increase is projected to be **greater in the City of Reading**, with nearly one-half of families with children (48.3%), and one-third of families without children (35.3%) projected to live in poverty in 2018 (Figure 9).

<sup>5</sup>Federal Register Volume 77, Number 17 (Thursday, January 25, 2012).



**Figure 9: Percentage of Families With and Without Children Living in Poverty in Reading City, 2010-2018**



Source: Nielsen-Claritas Pop-Facts Database (2013, 2018) and 2000, 2010 U.S. Census. Population figures based on ZIP code population.

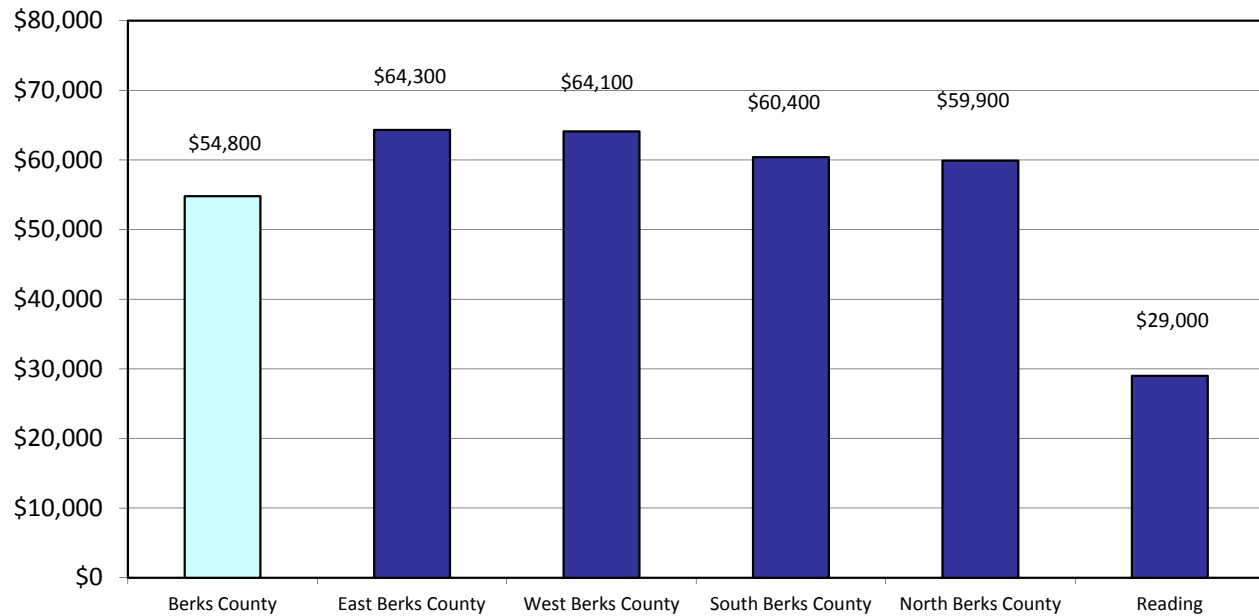
### Median Household Income

**The median household income in Berks County is \$54,800 annually, an increase from \$45,118 in 2000. However, household income in the County is projected to decrease in the future to \$51,500 annually in 2013 and 2018.**

**The median household income in the City of Reading is \$29,000 annually, almost one-half the county-wide median household income.** This income level is projected to drop below 2000 levels to **\$26,000 in 2013**. In contrast to the City of Reading, the East Berks area (\$64,300) has the highest median household income, and the North Berks area has the lowest (\$59,900). The median household income in these areas increased by \$10,000 and \$13,000 between 2000 and 2010 (Figure 10).



**Figure 10: Median Household Income in Berks County, 2010**



Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census. Population figures based on ZIP code population.

### Home Ownership

**The majority of Berks County residents own their own homes (71.7%).** Just over one-quarter of residents (28.3%) rent their home. These percentages are not projected to change through 2018.

**Home ownership is much less common in the City of Reading than in the rest of the county: 58.5% of residents rent their homes compared to 28.3% county-wide.** Housing tenure in the City of Reading is expected to remain the same in 2013 and 2018.

In the North, South, East and West Berks areas, approximately one-fifth of residents rent their homes. This percentage is projected to remain constant through 2018.

The next section, Existing Resources, summarizes the health and social service resources that currently exist in Berks County.

## **EXISTING RESOURCES**

**Most of the health and social service resources in Berks County are clustered in and around the City of Reading, the area with the highest population density** (See Appendix D for Asset Maps). In comparison to the City of Reading and its suburbs, the remainder of Berks County is less densely populated and more suburban and rural. The City of Reading is also the County seat, so County agencies and services



are also clustered there. Most resources for the low income population are also located in or near the City of Reading. (For a complete list of services and locations, please see Appendix E.)

## **Health Care Resources**

### Public Health Resources

**There is no County health department in Berks County.** Pennsylvania has a total of six county and four city health departments. The purpose of public health departments is to prevent disease, protect people from hazards to their health, and promote healthy living through an organized, community-based approach. Health departments conduct health screenings, ensure environmental and food safety, monitor and test for communicable diseases, administer immunizations, support maternal and child health, and provide health education. Local health departments ensure that these services are provided to the public using an organized approach. Services are provided free or at low cost to the general public in order to reach as many residents as possible. Several key informants cited an urgent need for a Berks County Health Department to provide these services throughout the County. Although many of the health and social service providers discussed in this section individually provide the many services which could be provided by a county health department, there are unmet needs which could be filled in a county-wide, coordinated manner by a county health department.

### Acute Care

**Acute care resources in Berks County include two not-for-profit acute care general hospitals** (St. Joseph Regional Health Network in Bern Township and Reading Health System in West Reading), Haven Behavioral Hospital of Eastern Pennsylvania (a 28-bed adult inpatient unit and a 20-bed older adult acute care unit located in Downtown Reading), a publicly-funded psychiatric hospital in Wernersville, and The Surgical Institute of Reading, an inpatient surgical hospital in Wyomissing. Both acute care general hospitals are teaching hospitals that are located just outside the municipal boundaries of the City of Reading. St. Joseph Regional Health Network admitted 8,122 inpatients and reported 226,586 outpatient (emergency and non-emergency) visits in fiscal year 2012.<sup>6</sup> St. Joseph Regional Health Network consists of:

- A 204 acute care bed facility, located in Bern Township (Reading);
- 20 outpatient centers, including physician offices, diagnostic, and therapeutic satellite locations;
- 100 employed physician and mid-level providers; and
- A comprehensive ambulatory care facility in Downtown Reading.

Reading Health System has:

- 600 acute care beds;
- 40 primary care and diagnostic centers;

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<sup>6</sup> Pennsylvania Health Care Cost Containment Council, 2012.



- The Center for Mental Health including a 35-bed psychiatric hospital (adult and adolescent beds); and a
- 110-bed post-acute hospital.

There were 800 and 3,586 births at each hospital, respectively, in fiscal year 2011.

### Primary Care

Primary care patient medical homes are an important resource in insuring continuous and comprehensive care that can prevent or ameliorate chronic disease. **Berks County has fewer primary care physicians per person than Pennsylvania as a whole.** According to the **County Health Rankings**,<sup>7</sup> the ratio of primary care physicians to the population of Berks County is 1,440:1. This is worse than the U.S. ratio of 631:1 and the Pennsylvania ratio of 838:1. In addition, the Berks County Medical Society forecasts that, in the next decade, 440 new primary care physicians will be needed in the county to maintain the existing ratio.<sup>8</sup> However, there are limitations in using the supply of primary care physicians as an indicator of overall health in the community. Although studies have shown a significant relationship between higher primary care physician supply and lower mortality, longer life expectancy, and better birth outcomes, the mere presence of more primary care physicians does not ensure that more individuals in the population are exposed to primary care.<sup>9</sup>

**There are 12 census tracts in the City of Reading that have a relatively lower ratio of primary care physicians to population than the county as a whole (3,499:1 compared to 1,440:1).** These census tracts are designated as Medically Underserved Areas by the U.S. Health Research and Services Administration.<sup>10</sup> The lower ratio of primary care physicians to the population in these 12 census tracts in the City of Reading compared to the County as a whole is related to the fact that many primary care physician's offices are located in or near the two acute care hospitals, which are located outside this 12 census tract area of the City. However, both the St. Joseph Regional Health Network Downtown Campus and the Berks Community Health Center, as well as private physicians, do provide primary care in this medically underserved area of the City of Reading.

**Access to primary care for low income residents of Berks County is provided at three community clinics:** the new Federally Qualified Health Center (**Berks Community Health Center**), which opened in June 2012, and the **St. Joseph Regional Health Network Downtown Campus**, both in the City of Reading, and the **Western Berks Free Medical Clinic** in Robesonia. The Berks Community Health Center, which replaced the Reading Dispensary, provides primary medical care to uninsured and insured adults,

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<sup>7</sup> [www.countyhealthrankings.org](http://www.countyhealthrankings.org) , November 1, 2012. The original primary care physician to population ratio for Berks County on which the County Health Rankings were based was incorrect because General Practice physicians were counted twice in error. The corrected ratio, which is higher, is used in this report, but the Berks County Health Rankings were not changed to reflect the corrected physician to population ratio.

<sup>8</sup> [www.berkscms.org](http://www.berkscms.org) accessed October 18, 2012.

<sup>9</sup> Shi, L. and Starfield, B. The Effect of Primary Care Physician Supply and Income Inequality on Mortality Among Blacks and Whites in US Metropolitan Areas. American Journal of Public Health. August 2001, Vol. 91, No. 8, pp. 1246-1250.

<sup>10</sup> Federally Qualified Health Center Feasibility Study for Berks County, Pennsylvania. Drexel University School of Public Health (September 2010).



accepting Medicare, Medical Assistance (also known as Medicaid), private insurance, and self-pay patients on a sliding fee scale. It will eventually provide dental care and mental health services as well. The St. Joseph Regional Health Network Community Campus, also known as the St. Joseph Downtown Campus, provides over 200,000 patient encounters annually, mostly to uninsured and underserved patients. Services include the Family and Women’s Care practice, a dental clinic, community pharmacy, imaging, behavioral health, physical and occupational therapy, diabetes education and wound care, and many other low cost or free social and health care services. All services provided at the Downtown Campus are bilingual. The Western Berks Free Medical Clinic uses volunteer physicians to provide free primary care to uninsured adults on Wednesday evenings. It opened in 2002 and served 247 unduplicated patients in calendar year 2011. Forty percent of patients live in Reading, which is fifteen miles away by car.

Other sources of **health care services for specific populations** are Planned Parenthood of Northeast, Mid-Penn, & Bucks County for reproductive health; the Keystone Farmworker Health Program for migrant workers; and Co-County Wellness Services for persons living with HIV/AIDS. Planned Parenthood, in the Downtown area of the City of Reading, provides affordable reproductive health care to men and women through medical services and education. The **Keystone Farmworker Health Program** provides medical outreach to farms, farmworker homes, and labor camps in the county. It works with the Pennsylvania Department of Health and St. Joseph Regional Health Network to provide adult primary care, adult immunizations, STD screenings and counseling, adult health screenings and referrals for hypertension and diabetes simultaneously, school physicals, domestic violence programming, and mental health services to about 800 Latino farm workers annually in Berks County. Services are provided in the City of Reading and also on-site at area farms. The program collaborates with the residency program at St. Joseph Regional Health Network to bring physicians out to farm worker camps and homes. The program also acts as an essential liaison with St. Joseph’s outpatient clinics to reach farmworkers in the evening or at their workplace who cannot be reached by mail or phone. **Co-County Wellness Services** provides services in Berks and Schuylkill Counties in sexually transmitted disease screening, counseling, treatment, and education. The STD screening and treatment clinic is funded by the Pennsylvania Department of Health. The education department provides teaching and counseling in the community and on site. Individuals with HIV who are medically indigent and need a primary care physician are referred to the **Center for Public Health**, a publicly funded clinic at Reading Health System that provides primary care and case management services for persons with HIV/AIDS and STD screening.

Primary episodic care services are also provided by several urgent care centers located primarily in the City of Reading’s suburbs.

### ***Social Services***

As shown in Map 2 in Appendix D, there are many social service agencies in Berks County, including mental health services, substance abuse treatment, homeless/emergency shelters, social work case management and referral, and nutrition services. Major social service organizations include **Boyertown Area Multi-Services Center** in Boyertown in the East Berks area and **The Hispanic Center of Reading and Berks County** (Centro Hispano Daniel Torres) and the **Berks Counseling Center** in the City of Reading, which provides outpatient behavioral health treatment, and transitional and permanent housing with supportive services for persons with behavioral health disabilities.





The **Boyertown Area Multi-Services Center** serves 750 older adults per month at the senior center and 300-400 individuals monthly with other services. They provide 185,000 units of service a year. Services include meals on wheels, a community food pantry, the senior center, energy assistance, transportation to medical appointments by volunteers, and a senior farmer's market program.

The **Hispanic Center of Reading and Berks County** is the primary agency serving the rapidly growing Latino population of the area, serving over 3,000 community members through its information and referral program alone in the past year. The Hispanic Center offers social services, information and referral, and works to support other organizations in the county. Services also include two senior centers, Kennedy Senior Center and Casa de la Amistad, and the "Senior to Senior" case management program; the Office of Violence against Women in collaboration with Berks Women in Crisis; HelpLink assistance with benefits and entitlements enrollment; and a notary public. The Center's Higher Education Program, a partnership between the Center and the Higher Education Colleges of Berks County (HECBC): Albright College, Alvernia University, Kutztown University, Penn State Berks, and the Reading Area Community College (RACC), offers workshops and other opportunities for those pursuing higher education.

The **Berks Counseling Center** provides supportive services and case management for person with behavioral health disabilities on an outpatient basis. They also provide transitional and permanent housing with supportive services for this population. Specific services include: case management for homeless persons and HUD housing residents; maternal intervention and supportive services; community outreach; chemical dependency treatment; mental health treatment and crisis coverage; assertive community treatment for transition ages 16-24; and a student assistance program at Reading High School and Citadel Intermediate High School. Additional programs include: a satellite site at Opportunity House; family services; peer support services; services under the jurisdiction of the Drug Courts in Berks and Chester Counties; a Chester County Counseling Center; and drug and alcohol treatment for inmates of the Berks County Prison and Reentry Center.

There are **ten senior centers in the County**, which provide health, education, and fitness programming; information and referrals; assistance with grocery shopping; socialization opportunities; and communal meals for older adults. There are five in the City of Reading. Berks Encore operates six senior centers in Berks County in the City of Reading, Birdsboro, Fleetwood, Hamburg, Mifflin, and Wernersville. There are also two senior centers in the City of Reading, Kennedy Senior Center and La Casa de la Amistad, which serve the Latino older adult population. There are seven emergency shelters in the County for women in crisis, families, and homeless persons. Six are located in the City of Reading and one in Wernersville.

Berks County has several agencies and organizations that provide services directed to improving nutrition. Three **Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)** offices in the county, two in the City of Reading and one in Shillington, provide supplemental nutritious foods, information on healthy eating, including breastfeeding promotion and support, and referrals to health care for low-income pregnant, postpartum, and breastfeeding women, infants, and children up to age 5 who are at nutritional risk.



Additional nutritional assistance is provided through the **Greater Berks Food Bank**, which collects, stores, and distributes food to more than 270 food pantries, soup kitchens, shelters, and after school programs in Berks, Schuylkill, and western Montgomery Counties. The food bank provides 1,000 meals nightly to children in after school program “Kids’ Cafes,” food backpacks to take home on the weekends, and 1,300 meals to low income seniors on a monthly basis. In Berks County there are a total of **27 food pantries and 21 soup kitchens** and other meal programs distributed throughout the County. While the majority of soup kitchens and meal programs are located in the City of Reading, food pantry locations are more dispersed throughout the County. Most food pantries, soup kitchens, and meal programs are located in churches.

Other non-profit agencies that provide services to a substantial number of County residents include the Salvation Army, Olivet Boys and Girls Club of Reading and Berks County, and Jewish Family Service of Reading.

The next section of this report describes the process for conducting this needs assessment, including methods of data acquisition and analysis, followed by a summary of findings of the needs assessment and conclusion and recommendations.



## II. NEEDS ASSESSMENT PROCESS AND METHODS

This needs assessment was overseen by a Steering Committee of representatives from each of the four sponsoring organizations. An Advisory Committee of 17 representatives from Berks County community organizations was appointed by the Steering Committee to provide input from the community. The Advisory Committee supplied guidance at all stages of the needs assessment process. The members of the Advisory Committee, and their organizations and titles, are listed below.

| <b>Berks County Community Health Needs Assessment</b> |  |  |
|---|--|--|
| <b><i>Community Advisory Committee Members</i></b>    |  |  |
| <b>NAME</b>   | <b>TITLE</b>   | <b>ORGANIZATION</b>                                  |
| Mike Baxter, MD                                       | Family Practice Physician; Past President, Berks County Medical Society  | Reading Health System Family Health Care Center      |
| Carolyn Bazik   | Executive Director   | Co-County Wellness Services                          |
| Diane Bonaccorsi, MD                                  | Primary Care Physician   | Green Hills Medical Center                           |
| Rebecca Hartman                                       | Doctoral Program Student   | Alvernia University                                  |
| Rev. Wayne Heintzelman                                | Pastor   | St. Daniel's Lutheran Church                         |
| Ed Michalik, PsyD                                     | County Administrator   | Mental Health/Developmental Disabilities             |
| Gary Rightmire  | Board Chair  | Berks Community Health Center                        |
| Karen Rightmire                                       | President  | Wyomissing Foundation                                |
| Mike Russo, MD  | Cardiologist   | Berks Cardiologists, Ltd.                            |
| Pam Taffera, DO                                       | Family Practice Physician; President-Elect, Berks County Medical Society | St. Joseph Regional Health Network                   |
| Mike Toledo   | Executive Director   | Centro Hispano (Hispanic Centro Daniel Torres, Inc.) |
| Ivan Torres, EdD                                      | President  | Pronto! Financial Services                           |
| Selina Zygmunt  | Manager  | Keystone Farmworker Health Program                   |
| Pat Giles   | SVP, Community Impact  | United Way of Berks County                           |
| Mary Hahn   | Development  | St. Joseph Regional Health Network                   |
| Richard Mable   | SVP for Community & Government Relations                                 | The Reading Health System                            |
| Heidi Williamson                                      | VP for Grantmaking & Communications                                      | Berks County Community Foundation                    |

The steps in the needs assessment process were: defining the community; identifying existing primary and secondary data and data needs; collecting primary and secondary data; analyzing data; and preparation of a written narrative report. The data acquisition and analysis are described in more detail below.



## DATA ACQUISITION AND ANALYSIS

Both primary and secondary and quantitative and qualitative data were obtained and analyzed for this needs assessment. Obtaining information from multiple sources, known as triangulation, helps provide context for information and allows researchers to identify results which are consistent across more than one data source.

### ***Data Sources and Dates***

Quantitative information for this needs assessment was obtained from sources listed below for the most recent years available.

### **Berks County Community Health Needs Assessment Data Sources**

| <b>Data Source</b>                                | <b>Dates</b> |
|---|--------------|
| U.S. Census of Population and Housing             | 2000, 2010   |
| Claritas, Inc. Pop-Facts                          | 2013, 2018   |
| Pennsylvania Department of Health                 | 2005-2008    |
| PHMC Berks County Household Health Survey         | 2008, 2012   |
| Pennsylvania Health Care Cost Containment Council | 2011         |

#### Household Health Survey

The Berks County Household Health Survey was modeled after previous Household Health Surveys conducted by PHMC in Southeastern Pennsylvania and in Berks, Lancaster, and Schuylkill Counties. The instrument was designed by PHMC with input from the project Steering Committee. The survey was fielded by Abt/SRBI between June 20<sup>th</sup> and August 2<sup>nd</sup> 2012, and included 1,101 random-digit dial landline (1,001) and cell phone (100) respondents using a probability sample across five areas in the county. Within each randomly selected landline household, the selected respondent was chosen using the last birthday method. Interviews were conducted in English and Spanish, including an oversample of 101 household of Latino origin, and averaged 17 minutes in duration. The Berks County survey had an overall AAPOR 3 response rate close to, or better than, comparable surveys at 31.0%. The final data were weighted to reflect 2011 census estimates in two weighting areas, the City of Reading and the remainder of Berks County, allowing for projection numbers, estimates of the population represented by each percentage, to be calculated.

#### U.S. Census

This report includes data on the population of Berks County residents along with socio-demographic and socioeconomic characteristics for the years 2000, 2010, 2013 and 2018. Data from the 2000 U.S. Census, the 2010 American Community Survey, and the Nielsen-Claritas Pop-Facts Database were also used. The Nielsen-Claritas Pop-Facts Database uses an internal methodology to calculate and project socio-demographic and socioeconomic characteristics for non-census years, relying on the U.S. Census, the Current Population Survey, and the American Community Survey.



Vital Statistics

The most recent information on births, birth outcomes, deaths, and reportable diseases and conditions for Berks County was obtained from the Pennsylvania Department of Health, Bureau of Health Statistics and Research. Four year (2005-2008) annualized average rates for natality and mortality were calculated by PHMC. Mortality rates were age-adjusted using the Direct Method and the 2000 U.S. standard million population. The most recent morbidity information from 2010 was also obtained from the state Department of Health, and rates were calculated by PHMC. Morbidity information, including information on HIV and AIDS cases, is not available at the ZIP code level and, therefore, rates are presented for the county and the state only. The denominators for all 2005-2008 vital statistics rates for the county and state were interpolated from the 2000 and 2010 U.S. Census. The number of women ages 15-44 and the number of adolescents ages 14-19 were also interpolated from the 2000 and 2010 U.S. Census.

**COMMUNITY REPRESENTATIVES**

In addition to including community representatives on the project Advisory Board, other representatives of the Berks County community were included in this needs assessment through focus discussion groups of residents and informational interviews with service providers and community advocates knowledgeable about community health. The process for including community representatives in the focus groups and informational interviews is described below.

Focus Groups

There were five focus groups of Berks County residents conducted between June and September, 2012. A total of 55 residents participated. Focus groups were used to collect in-depth information from Berks County population subgroups that might be at risk for poor health and access to care: Latinos (migrant workers, 18-64 year olds, and those age 65+); African Americans; and low income older adults aged 65+. All focus groups were conducted in the City of Reading, although participants were recruited from throughout Berks County. Participants were recruited by the Berks Encore Senior Center, Berks Community Health Center, Reading Area Community College ESL program, and the Keystone Migrant Farmworker Program. Transportation was provided when necessary, and participants were compensated \$50 each for their time and transportation costs. Focus groups lasted approximately 90 minutes and were guided by a set of written questions (see Appendix F for the Focus Group Discussion Guide). The focus groups of Latino older adults, migrant workers, and adults age 18-64 were conducted in Spanish by a bilingual, bicultural facilitator. All focus groups were audiotaped. Refreshments were served.

| Focus Group             | Location                           | Number of Participants |
|-------------------------|------------------------------------|------------------------|
| Older Adults 65+        | Berks Encore Senior Center Reading | 11                     |
| African Americans       | Berks Community Health Center      | 9                      |
| Latino Older Adults 65+ | Reading Area Community College     | 11                     |
| Latino Migrant Workers  | El Puente Restaurant               | 12                     |
| Latino Adults 18-64     | Reading Area Community College     | 12                     |



Informational Interviews

Information interviews were conducted with 13 community representatives with knowledge of the health and health care needs of Berks County residents. Key informants were identified and recruited by the project Steering Committee working in collaboration with PHMC. The names, titles, area of expertise, and organizational affiliation of each key informant are listed in the following table.

**Berks County Community Health Needs Assessment Key Informants**

| <b>Name</b>                | <b>Organization</b>               | <b>Title</b>                                    | <b>Expertise</b>                                  |
|----------------------------|-----------------------------------|---|---|
| Carolyn Bazik              | Co-County Wellness Services       | Executive Director                              | HIV and AIDS Populations                          |
| Peg Bianca                 | Greater Berks Food Bank           | Executive Director                              | Food Insecurity                                   |
| Sheila Bressler            | Berks County MH/MR                | Child and Adolescent Service System Coordinator | Child Mental Health                               |
| Dana Eichert               | Boyertown Area Multi-Service      | Executive Director                              | Health and Social Service Needs in Boyertown Area |
| Ann Fisher                 | Reading School District           | Supervisor of School Health                     | Child Health and Mental Health                    |
| Bob Harrop                 | East Penn Manufacturing           | VP of Personnel                                 | Insurance   |
| Rev. Dr. Wayne Heintzelman | Western Berks Free Medical Clinic | Pastor, St. Daniel’s Lutheran Church            | Uninsured   |
| Dr. Louis D. Mancano       | Reading Health System             | Medical Director, Ambulatory Services           | Clinical Services for At Risk Populations         |
| Edward Michalik, Psy. D.   | Berks County MH/MR                | MH/MR Administrator                             | Mental Health and Mental Retardation              |
| Ann Moll                   | Galen Insurance                   | President                                       | Insurance   |
| Dr. George A. Neubert      | Reading Health System             | Chair, Dept. of Ob/Gyn                          | Obstetrics and Gynecology                         |
| Dr. Peter Schnatz          | Reading Health System             | Residency Program Director                      | Clinical Services for At Risk Populations         |
| Ivan Torres, Ph.D.         | PRONTO! Financial Services        | President                                       | Latino Population                                 |
| Selina Zygmunt             | Keystone Farmworker Programs      | Regional Manager                                | Migrant Workers                                   |

Key informants also included individuals with direct knowledge of special populations in Berks County, including: Latinos, migrant workers, individuals with HIV/AIDS, the uninsured, pregnant women, older adults, and persons with mental health conditions.

The interviews were conducted by telephone and lasted approximately 45 minutes. The interviews were guided by questions developed by PHMC in collaboration with the project Steering Committee (See Appendix G for the interview guide). The interviews were conducted between June and September, 2012.



## **ANALYTICAL METHODS**

Quantitative information from the U.S. Census, Pennsylvania vital statistics, and Berks County Household Health Survey was analyzed for Berks County as a whole and for the five separate areas within the county using the Statistical Program for Social Sciences (SPSS). Frequency distributions were produced for variables for multiple years of data so trends over time could be identified and described. Qualitative information from focus groups and informational interviews was analyzed by identifying and coding themes common across groups and individual interviews, and also themes that were unique. This information was organized into major topic areas related to health status, access to care, special population needs, unmet needs, and health care priorities.

## **INFORMATION GAPS**

There were no major gaps in information for this community health needs assessment because quantitative information for socioeconomic and demographic information, vital statistics, and health was available at the ZIP code level for the entire county. These sources also provided information on the Latino population in Berks County. Information on these populations, and other unmet health care needs, was also supplied in great detail by informational interviews and focus group discussions with community representatives.

The next section, III. Findings, summarizes the results of the needs assessment process.



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### III. FINDINGS

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This section describes the **health needs of Berks County’s population**, describing differences between Berks County and Pennsylvania, and among individual areas of Berks County, in health status, access to care, health behaviors, use of preventive screenings, and social capital, including the health needs of Latino residents.

#### **HEALTH NEEDS OF THE COMMUNITY**

##### ***HEALTH OUTCOMES***

The County Health Rankings provide an important overall context for unmet health care needs of Berks County residents because health outcomes which are poorer for Berks County than for other counties in the state indicate that these health issues should be addressed in Berks County. The County Health Rankings can be used to measure the health outcomes of Berks County residents relative to the other 66 counties in Pennsylvania in specific health areas. The rankings measure the health of nearly all counties in the nation and ranks counties within states. The County Health Rankings in Pennsylvania range from 67<sup>th</sup> to 1<sup>st</sup>, with a low numerical ranking of 1 out of 67 being assigned to the County in the State with the best health outcomes, and a high numerical ranking of 67 out of 67 being assigned to the County in the State with the worst health outcomes. The rankings are compiled using county-level measures from a variety of national and state data sources. The health outcomes rank includes the premature death rate, health status, poor physical and mental health days, and low birth weight. The health outcomes rank includes indicators of health behavior, clinical care, social and economic factors, and the physical environment.

Berks County ranks 14<sup>th</sup> of the 67 counties in the state in health outcomes and 26<sup>th</sup> out of 67 counties in health factors, compared to a rank of 1<sup>st</sup> representing best in the state in health outcomes or health factors (Union County), and 67 being worst in the state (Philadelphia).<sup>11</sup>

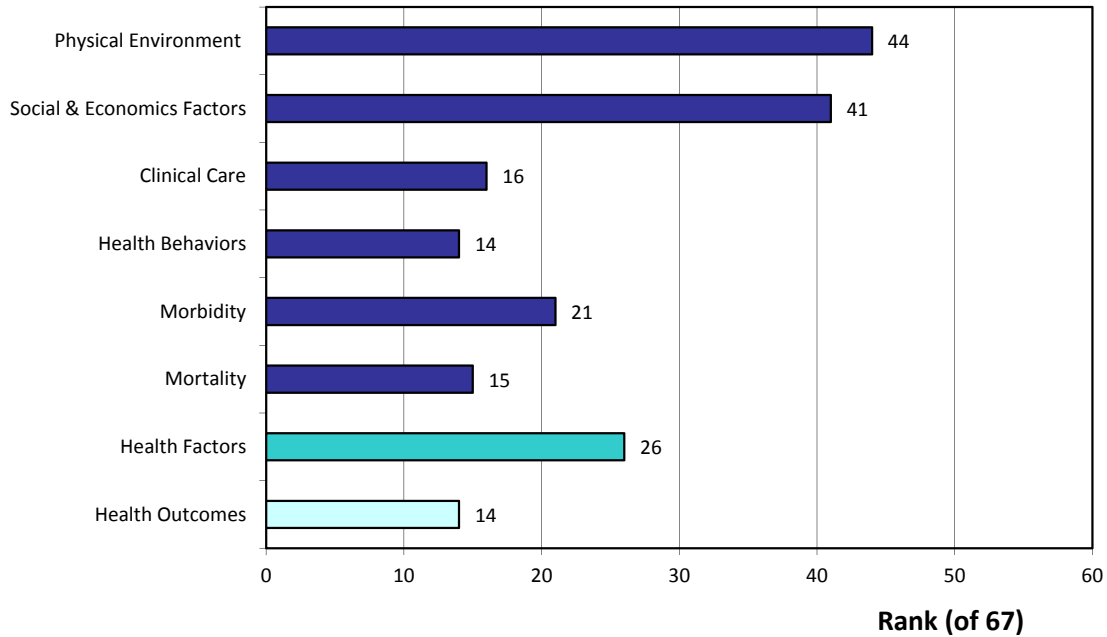
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<sup>11</sup>County Health Rankings & Roadmaps. [www.countyhealthrankings.org](http://www.countyhealthrankings.org). Accessed November 1, 2012. The original primary care physician to population ratio for Berks County on which the County Health Rankings were based was incorrect because General Practice physicians were counted twice in error. The corrected ratio, which is higher, is used in this report, but the Berks County Health Rankings were not changed to reflect the corrected physician to population ratio.





**Figure 11: Berks County, Pennsylvania Health Rankings**



Source: County Health Rankings and Roadmaps, [www.countyhealthrankings.org](http://www.countyhealthrankings.org).

**Berks County (overall health outcome rank of 14th out of 67) ranks better compared to the 53 other counties in Pennsylvania in health outcomes.** However, it ranks worse than 46 other counties in morbidity (21<sup>st</sup>) (Figure 11). **Berks County’s health factors rank is worse than 41 other counties (26<sup>th</sup> out of 67), due to relatively worse rankings in the physical environment (44th) and social and economic factors (41st) that comprise the Health Factors rank.** However, clinical care (16th) and health behaviors (14th) are better than 51 and 53 counties in the state, respectively.

The next section of this report describes the health status, access to care, and use of services of Berks County residents.

**Health Status**

The health of a community can be assessed by comparing birth outcomes, self-reported health status and health conditions, communicable disease rates, self-reported health concerns and perceptions, and mortality rates to statewide indicators and *Healthy People 2020* goals for the nation. Self-reported health status has been shown to be an accurate method of determining an individual’s health, comparable to the results of a clinical examination.<sup>12</sup>

<sup>12</sup>Idler EL, Benyamini Y. Self-Rated Health and Mortality: A Review of Twenty-Seven Community Studies. *Journal of Health and Social Behavior*.1997; 21-37.



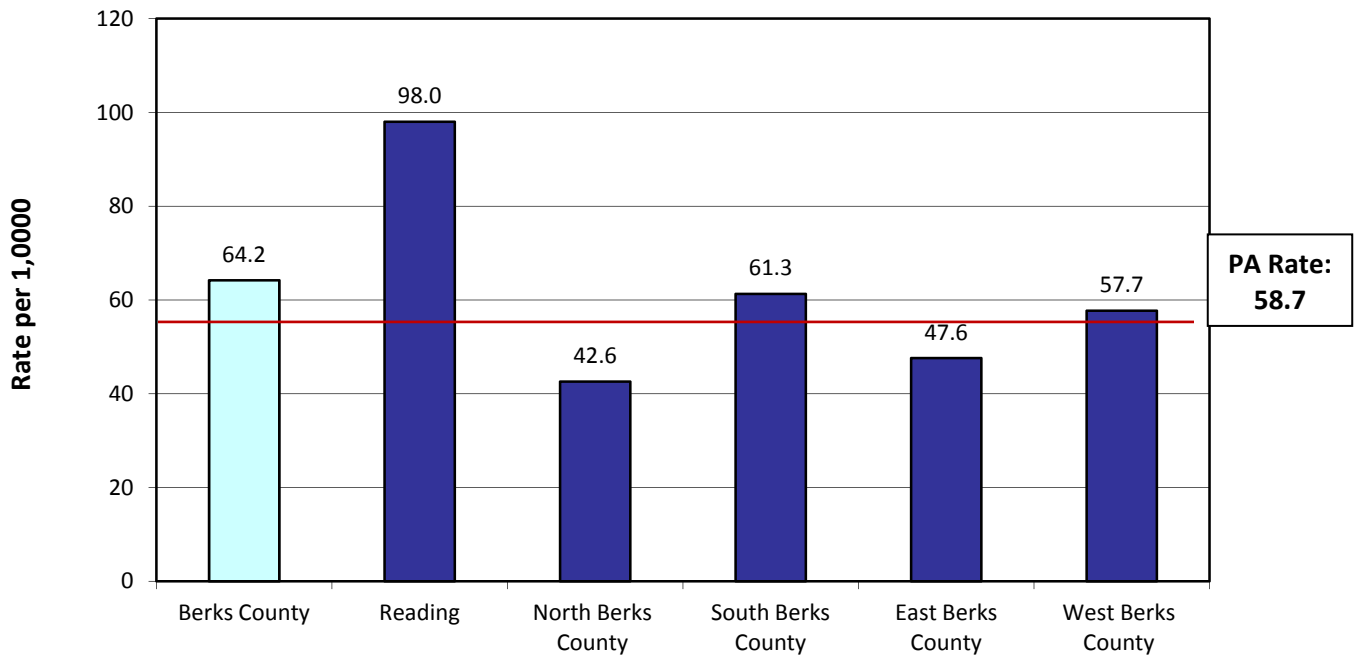
Birth Outcomes

*Birth Rate*

**There is an average of nearly 5,100 births annually to Berks County women.** The Berks County birth rate (64.2 per 1,000 women 15-44 years of age) is slightly higher than the state rate (58.7). **In Berks County as a whole, Latina women have the highest birth rate (119.8 per 1,000 women 15-44), followed by Asian (90.6) and Black (83.9) women, women of another race (70.6), and White women (54.9)** (See Appendix B for Vital Statistics Tables).

**The City of Reading has the highest birth rate (98.0 per 1,000 women 18-44) in the County.** The City of Reading birth rate is higher than rates for the state (58.7), Berks County as a whole (64.2), and the surrounding Berks County areas, which range from 61.3 to 42.6 (Figure 12). The City of Reading birth rate represents an average of nearly 1,700 births annually. In contrast to the City of Reading, the North Berks area has the lowest birth rate (42.6) in the County. It is lower than the birth rate for the state (58.7), County (64.2), and the surrounding Berks County areas.

**Figure 12: Average Annualized Birth Rates for Berks County Women 15-44 Years by Area, 2005-2008**



Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.



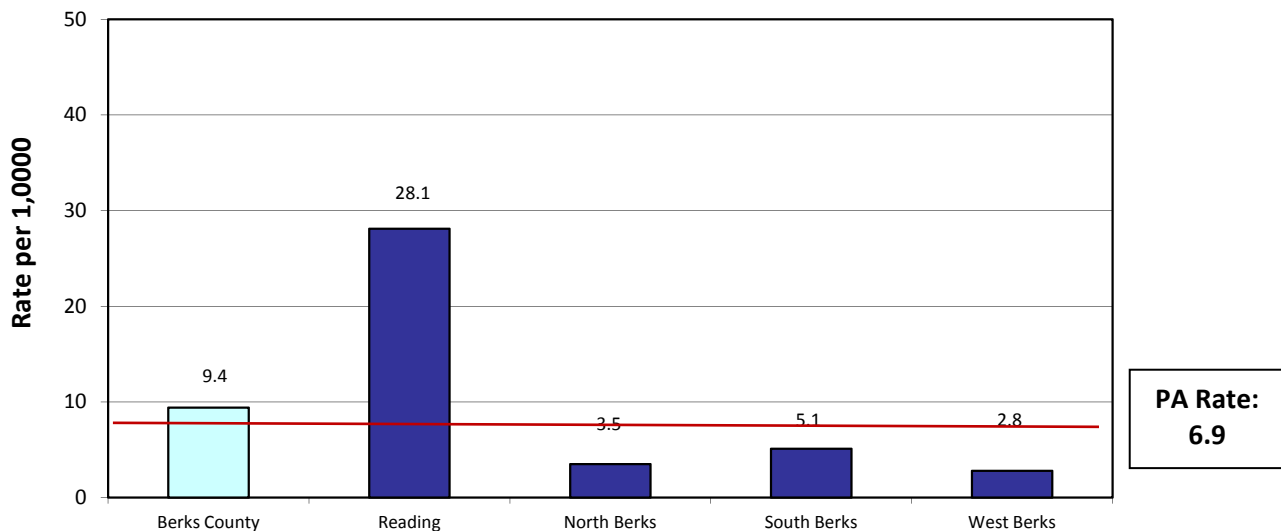
### Adolescent Birth Rate

Adolescent births are associated with a number of negative birth outcomes, including prematurity and low birth weight. In Berks County, the adolescent birth rate (9.4) is higher **than the state rate (6.9)** (Figure 13).

**The adolescent birth rate is highest for Berks County Latina women (31.5)**, followed by women of another race (19.5) and Black women (18.5); the adolescent birth rate is lowest for White women (4.8). These rates are comparable to the statewide adolescent birth rates. It is important to note that many Latino cultures view women as adults at age 14, so many marry and have children during their teen years.

**The City of Reading has the highest adolescent birth rate (28.1) of all the areas in the County. The City of Reading rate is four times the county-wide rate.** This rate represents an average of 134 births to adolescents annually. **Two-thirds of adolescent births in the County are to adolescents in the City of Reading (67.8%).** The City of Reading rate is more than four times the state rate (6.9), and three times the County rate (9.4). In contrast to the City of Reading, the West Berks area has the lowest adolescent birth rate (2.8; representing an average of 11 births annually).

**Figure 13: Average Annualized Adolescent Birth Rates for Berks County by Area, 2005-2008**



Note: The adolescent birth rate for East Berks was not calculated and displayed because the count was less than 10.  
Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.

### Low Birth Weight

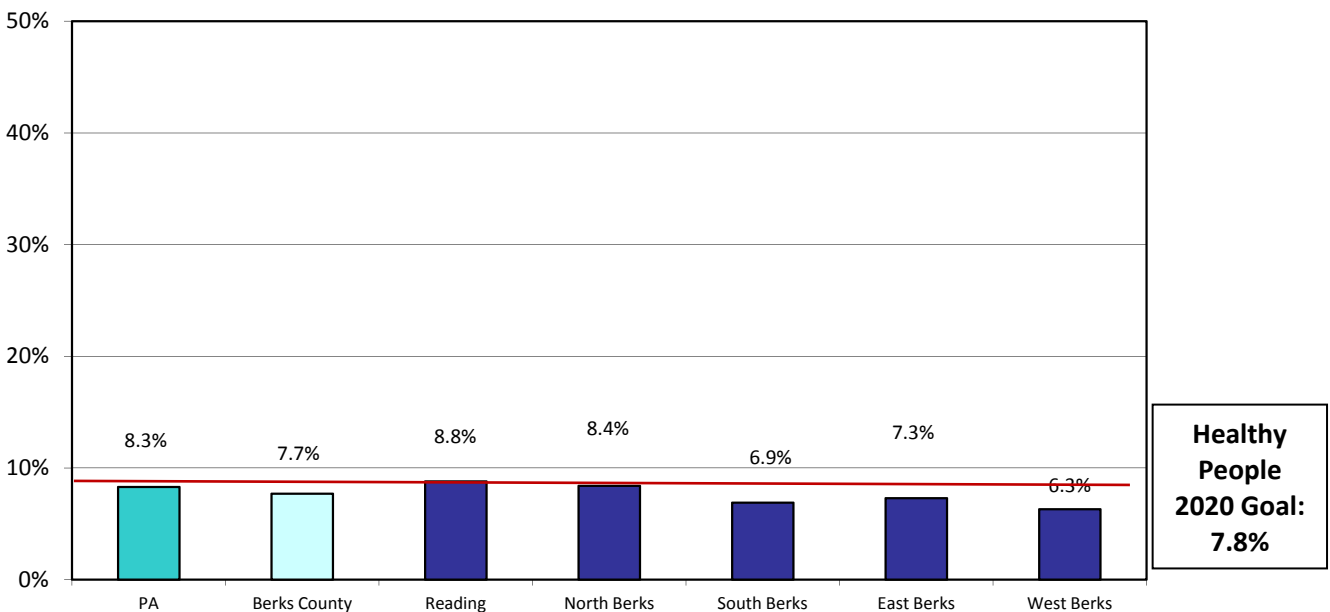
Low birth weight infants (<2,500 grams or <5 lbs. 8 oz.) are at greater risk for dying within the first year of life than infants of normal birth weight. **In Berks County, 7.7% of infants are low birth weight, comparable to the statewide average (8.3%) and the Healthy People 2020 target goal (7.8%)** (Figure 14). This percentage represents an annual average of almost 400 low birth weight infants. The percentage of low birth weight infants is higher among Black infants (12.1%) than Latino (8.2%) and



White (7.2%) infants, and infants of another race (7.2%). In general, these percentages are comparable to statewide percentages.

**The City of Reading has a slightly higher percentage of low birth weight infants (8.8%) than the other areas of Berks County.** This percentage represents an average of 150 births annually. The low birth weight percentage for the City of Reading is slightly higher than the County and state percentages, and the *Healthy People 2020* target.

**Figure 14: Average Annualized Percentage of Low Birth Weight Births in Berks County by Area, 2005-2008**



Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.

### *Infant Mortality Rate*

**The Berks County infant mortality rate is 4.9 infant deaths per 1,000 live births.** This represents an average of 25 infant deaths annually. The infant mortality rate for Berks County is comparable to the state rate (5.2) and both rates meet the *Healthy People 2020* goal of 6.0 infant deaths per 1,000 live births. The infant mortality rate for the City of Reading is 5.8 infant deaths per 1,000 live births; this rate meets the *Healthy People 2020* goal as well.



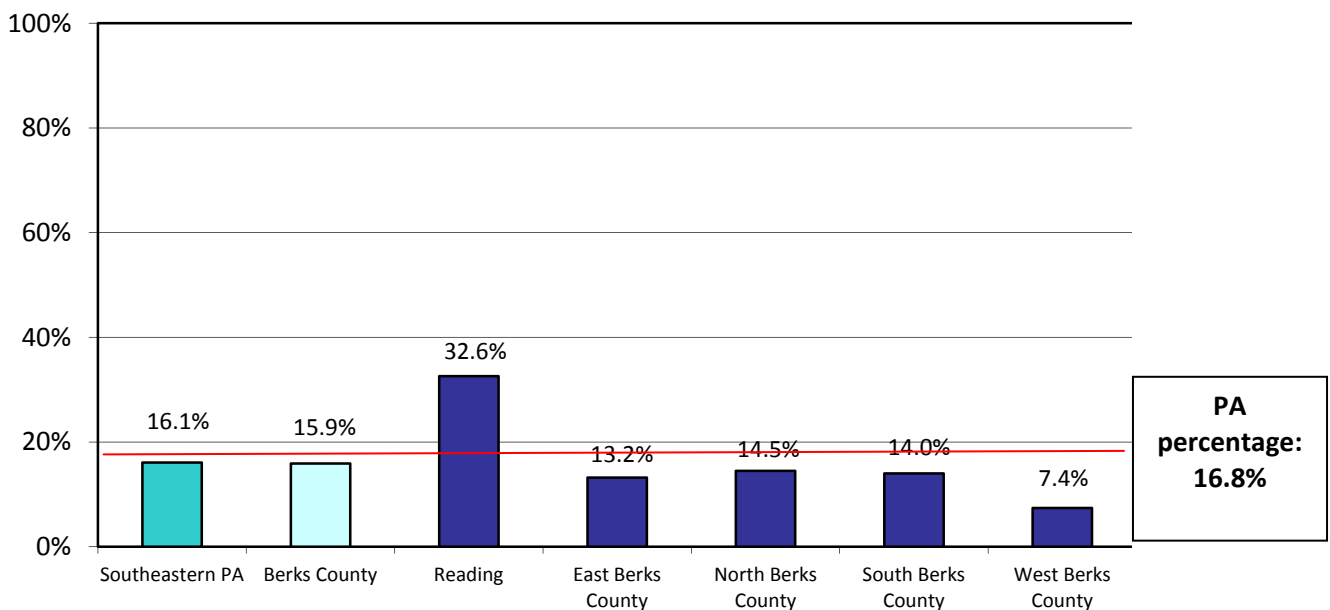
Self-reported Health Status

*Fair or Poor Health*

Self-reported health status is one of the best indicators of the population health. This measure has consistently correlated very strongly with mortality rates.<sup>13</sup> In Berks County **the overwhelming majority of adults rate their health as excellent, very good or good (Figure 15)** (See Appendix C for Household Health Survey Tables). **However, 15.9% of residents are in fair or poor health, representing 50,400 adults.** This percentage is slightly lower than the statewide average (16.8%)<sup>14</sup> and the average for the five counties in Southeastern Pennsylvania as a whole (Bucks, Chester, Delaware, Montgomery, and Philadelphia) (16.1%).

**Adults in the City of Reading (32.6%) are more than twice as likely to be in fair or poor health than adults in other areas of Berks County.**

**Figure 15: Percentage of Adults in Fair or Poor Health by Area, Berks County, 2012**



Source: PHMC's 2012 Berks County Household Health Survey.

*Health Conditions*

High blood pressure, diabetes, asthma, cancer, and mental health conditions are common illnesses that require ongoing care. In Berks County, **more than one-third of adults (33.4%) have been diagnosed with high blood pressure; this represents 105,400 adults.** Similarly, 31.0% of Pennsylvania adults have

<sup>13</sup> Idler EL, Benyamini Y. Self-Rated Health and Mortality: A Review of Twenty-Seven Community Studies. *Journal of Health and Social Behavior*. 1997; 21-37.

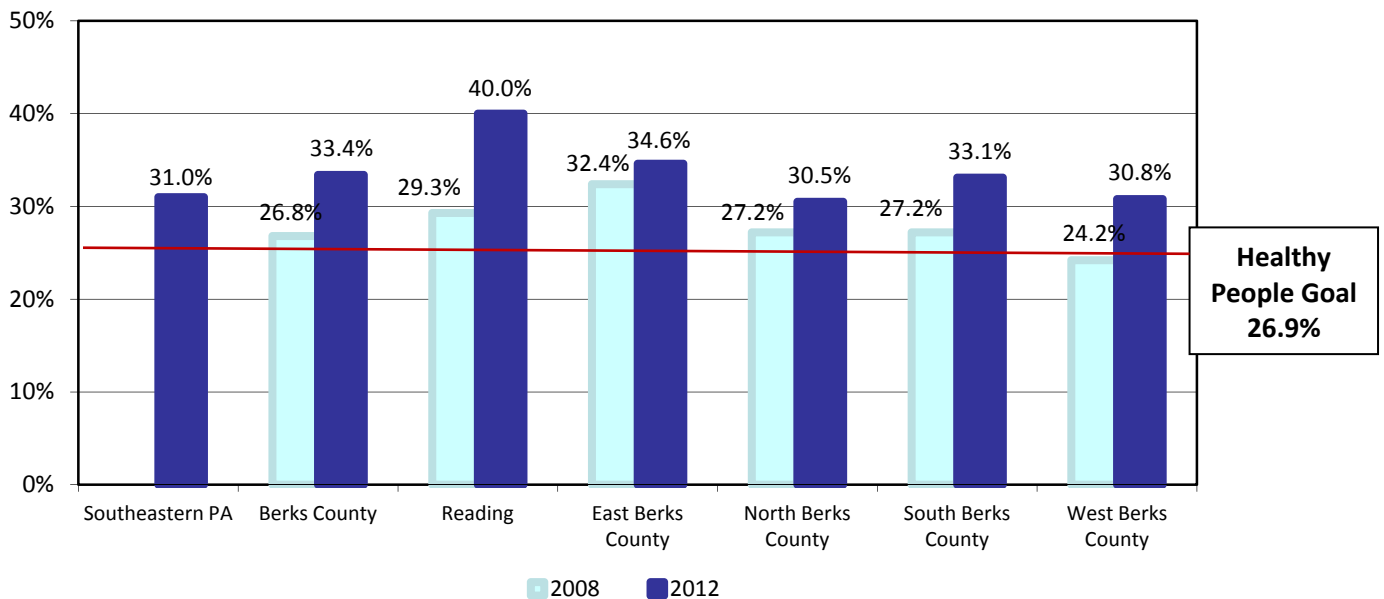
<sup>14</sup> 2011 Behavioral Risks of Pennsylvania Adults, PA Department of Health.



high blood pressure.<sup>15</sup> Both of these percentages do not meet the *Healthy People 2020* goal of 26.9%. The percentage of Berks County adults with high blood pressure increased from 26.8% to 33.4% between 2008 and 2012. (Figure 16)

- The City of Reading (40.0%) has the highest percentage of adults with high blood pressure, and North Berks (30.5%) has the lowest percentage.
- For most of the areas, the percentage of adults with high blood pressure has slightly increased since 2008. However, **the percentage of adults in the City of Reading with high blood pressure has increased dramatically since 2008, from 29.3% to 40.0% in 2012.**

**Figure 16: Percentage of Adults with High Blood Pressure in Berks County by Area, 2012**



Source: PHMC's 2008 and 2012 Berks County Household Health Survey.

**One in seven adults (13.9%) in Berks County has been diagnosed with diabetes;** this percentage represents approximately 44,000 adults. Statewide, only 9.5% of adults have been diagnosed with diabetes.<sup>16</sup> **The percentage of adults with diabetes is highest among adults in the City of Reading (18.9%) and lowest among adults in the West Berks area (8.8%).**

Diabetes among adults and children was also named as one of the top three health problems by key informants. Some key informants observed that diabetes disproportionately affects the Latino population, but others indicated it is a universal problem.

<sup>15</sup>2009 Behavioral Risks of Pennsylvania Adults, PA Department of Health.

<sup>16</sup>2011 Behavioral Risks of Pennsylvania Adults, PA Department of Health.



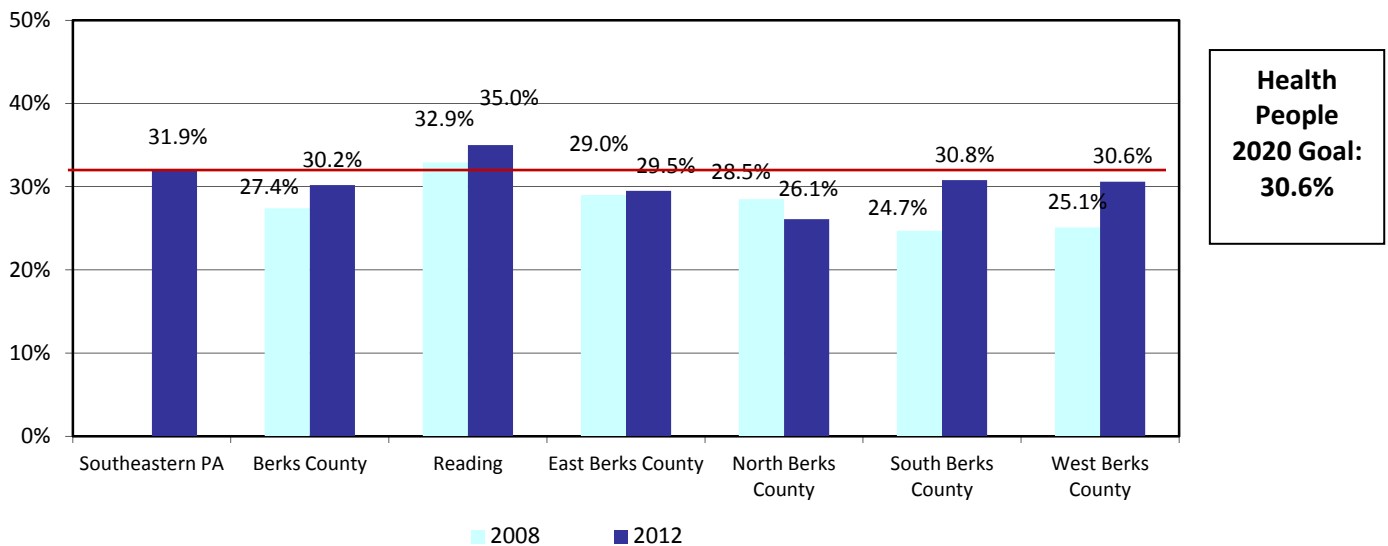
**Approximately 49,200 adults in Berks County have asthma (15.5%).** In Pennsylvania, 12.9% of adults have asthma.<sup>17</sup> The percentage of adults with asthma is highest in the City of Reading (18.7%) and lowest in the East and West Berks areas (11.4% and 11.3%, respectively).

- The percentage of adults with asthma has decreased since 2008 in all areas of Berks County except for the North and South Berks areas (13% and 17.6%, and 13.6% and 17%, respectively).

Nine percent (8.9%) of adults in Berks County have had cancer at some point in their lives, representing 28,300 adults. The percentage of adults who ever had cancer is highest in the East Berks area (14%) and lowest in the North Berks area (8.3%). Adults in the City of Reading are least likely to report ever having cancer (6.1%).<sup>18</sup>

**Nearly one-third of adults in Berks County (30.2%) are obese and more than one-third (35.9%) are overweight (Figure 17).** A similar percentage of adults are obese or overweight statewide (28.6% and 36.0%, respectively).<sup>19</sup> The *Healthy People 2020* goal for adult obesity is 30.6%.

**Figure 17: Percentage of Obese Adults in Berks County Area, 2008 & 2012**



Source: PHMC's 2008 and 2012 Berks County Household Health Survey.

**The City of Reading has the highest percentage (35.0%) of obese adults among all Berks areas.** The North Berks area has the lowest percentage (26.1%) of obese adults and is the only area that had a decrease in the percentage of obese adults from 2008 to 2012 (28.5% to 26.1%, respectively).

<sup>17</sup>2011 Behavioral Risks of Pennsylvania Adults, PA Department of Health.

<sup>18</sup>The higher proportion of young adults in the City of Reading population may be a factor in this result.

<sup>19</sup>2011 Behavioral Risks of Pennsylvania Adults, PA Department of Health.



According to key informants, obesity an important health factor impacting Berks County youth and adults.

“Among people who don’t manage their diabetes well, obesity is very much a problem. There is more obesity in children because the most affordable food is the least appropriate for people to eat, and people don’t know how to cook unless it is fast food or take out, which is very fattening.” (Key Informant)

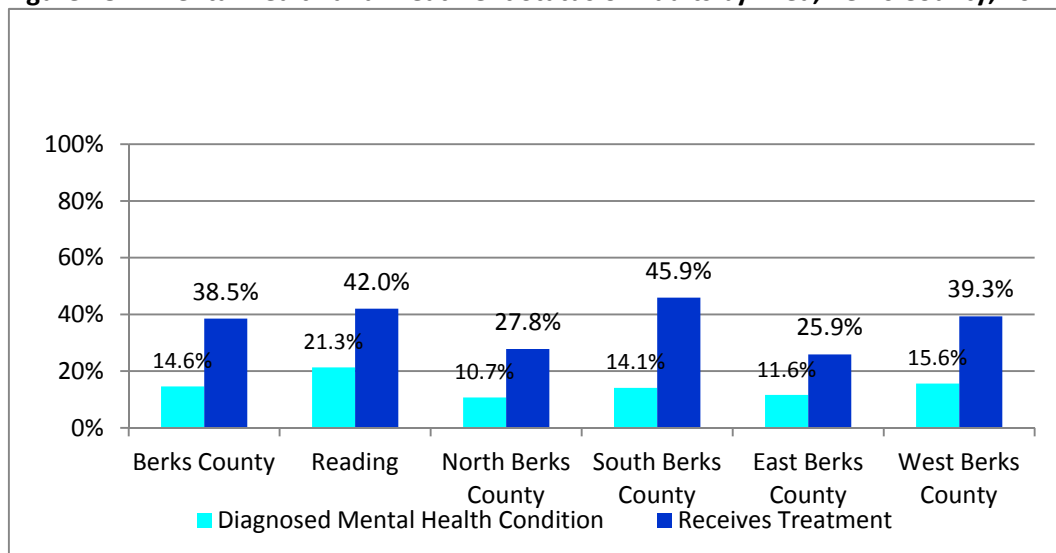
“Obesity is the simple greatest health risk in the United States, not just Berks County. It is the number one health problem related to coronary heart disease, diabetes, hypertension, and orthopedic joint disease. This will be very costly to the system.” (Key informant)

According to key informants, obesity is also the number one problem in caring for pregnant women, and is related to many maternal and infant complications, such as diabetes, pregnancy induced hypertension, shoulder dystocia, and increased Cesarean section rates.

**Across Berks County, one in seven adults (14.6%) has been diagnosed with a mental health condition, including clinical depression, anxiety disorder or bipolar disorder.** This represents 46,200 adults (Figure 18). Of these adults, less than four in ten (38.5%) are receiving treatment for their condition. Nationally, 22.6% of adults suffer from some type of mental disorder, of which 5.8% are classified as “severe.”<sup>20</sup>

- Adults in the City of Reading are most likely to have been diagnosed with a mental health condition (21.3%), while adults in the North Berks area are least likely to be diagnosed with a mental health condition (10.7%).
- Among adults in the South Berks area, nearly one-half (45.9%) are not receiving treatment.

**Figure 18: Mental Health and Treatment Status of Adults by Area, Berks County, 2012**



Source: PHMC's 2012 Berks County Household Health Survey.

<sup>20</sup>National Institute of Mental Health, [http://www.nimh.nih.gov/statistics/1ANYDIS\\_ADULT.shtml](http://www.nimh.nih.gov/statistics/1ANYDIS_ADULT.shtml). Accessed November 1, 2012.





Several key informants referred to mental health problems, particularly among youth, as one of the top issues in Berks County. One mental health service provider reported that the number of youth with a mental health disorder diagnosis, and the severity of the symptoms, is increasing. Several key informants noted that many families lack parenting skills, and this contributes to a wide range of conduct disorders and mental health problems in youth. One key informant recommended that all primary care practices should have mental health providers on-site because mental health is related to so many other adverse health conditions.

#### Communicable Diseases

**The rates of most communicable diseases in Berks County are below state-wide rates.** County-wide rates for chronic Hepatitis B (6.6 per 100,000 population), Lyme disease (8.0), Varicella (chicken pox) (20.7), Chlamydia (302.6), and gonorrhea (47.6) are lower than state rates for these diseases. However, rates for Pertussis, or whooping cough, are slightly higher in Berks County (6.6) than the state (4.0).

**The prevalence rate of HIV/AIDS in Berks County is also below the statewide rate.** There are 883 individuals currently living with HIV, including AIDS; this represents a rate of 218.7 cases per 100,000 population. This rate is below the state rate of 224.9 per 100,000 population. Among Berks County residents living with HIV or AIDS, nearly two-thirds are men (65.1%). In addition, nearly one-half (46.3%) are Latino, one-third (33.6%) are White, and one-fifth (19.8%) are Black.

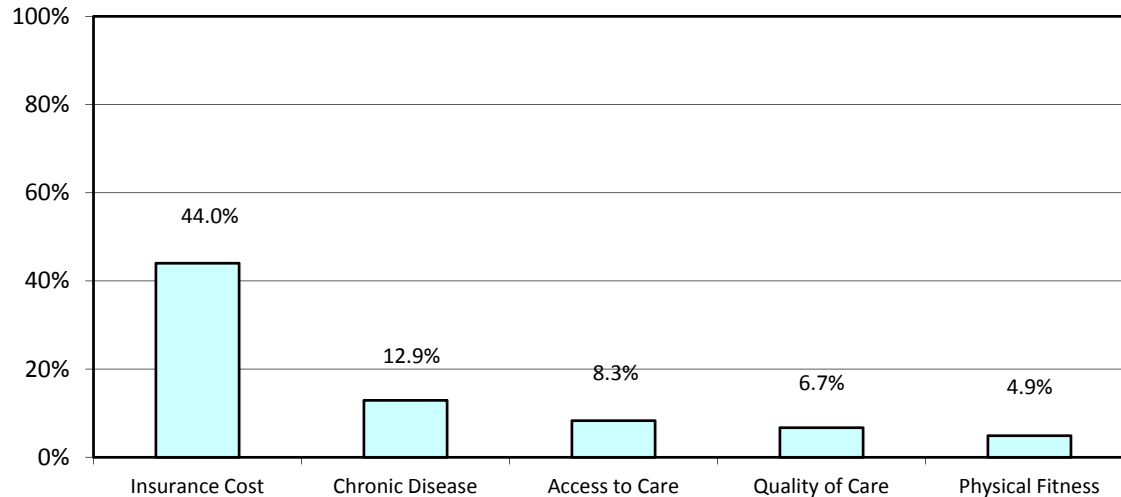
#### Health Concerns

**Forty-four percent of survey respondents identified the cost of health care, including insurance coverage, co-pays, and deductibles, as their top health concern (Figure 19).** This percentage represents nearly 138,000 adults county-wide who have identified health care costs as their top concern. East Berks area residents are most likely to identify cost as their top concern (51.6%), and the City of Reading residents are least likely to do so (32.1%).

**Chronic disease is the second most common health concern for Berks County residents (12.9%).** City of Reading residents (27.8%; representing 15,000 adults) are twice as likely as residents county-wide to be concerned about chronic disease, whereas 6.6% of West Berks area residents are concerned about chronic disease. Access to care not related to insurance (8.3%), quality of care (6.7%), and physical fitness (4.6%) are less common health concerns for Berks County residents than the cost of insurance and chronic diseases.



**Figure 19: Five Most Common Health Concerns Reported by Berks County Adults, 2012**



Source: PHMC's 2012 Berks County Household Health Survey.

### Mortality

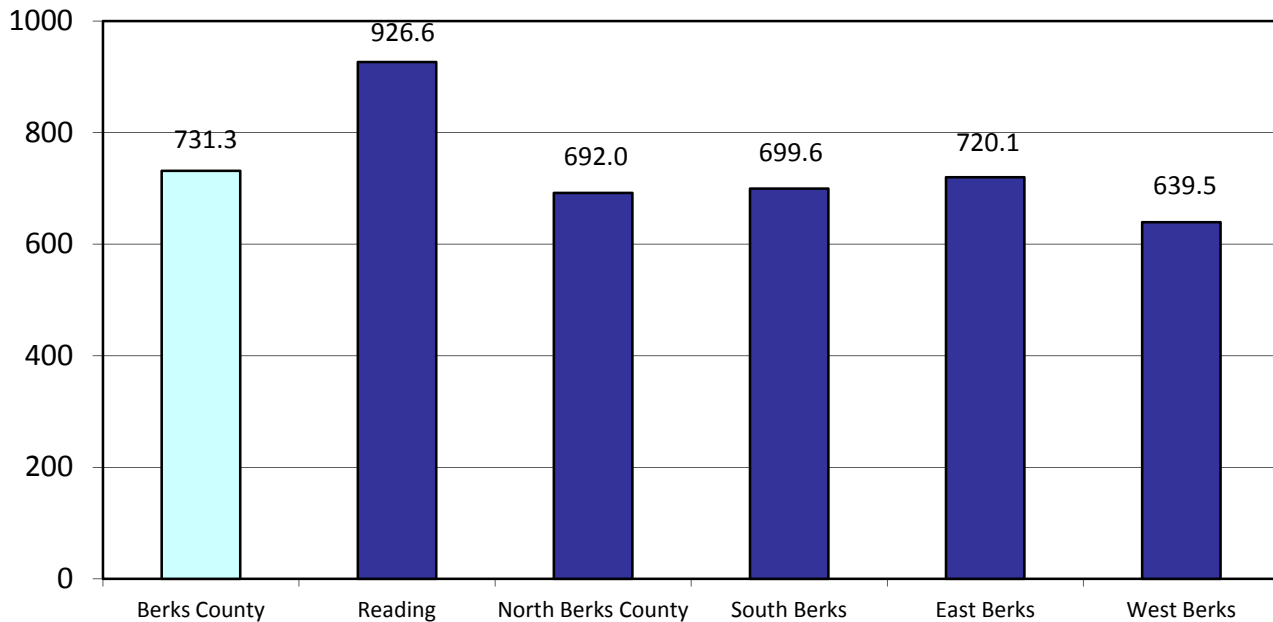
In addition to self-reported health status and disease rates, the health of a population and the community can be measured by the leading causes of death and by death rates for specific conditions.

Berks County has a lower overall death rate (731 per 100,000 population) than the state as a whole (785) (Figure 20). **Heart disease is the leading cause of death in Berks County (189.3), four of the five Berks County areas, and in Pennsylvania as a whole (203.2) (Figure 20).** The other four leading causes of death in the County are: all forms of cancer (including female breast cancer) (175.1); stroke (50.7); lung cancer (46.7); and female breast cancer (24.5). The other four leading causes of death in the state are similar: all forms of cancer, including female breast cancer (184.7); lung cancer (50.9); stroke (42.5); and female breast cancer (23.9).

**The City of Reading has a higher overall mortality rate than Berks County (929.6 versus 731 per 100,000 population), the four other areas of the county, and the state.** Additionally, the City of Reading has higher mortality rates than the other areas of the County and state for each of the leading causes of death: heart disease (241.5); all forms of cancer, including female breast cancer (184.7); stroke (59.0); lung cancer (54.2); and female breast cancer (27.3). The North Berks area has the lowest overall death rate in the County (692 per 100,000 population).



**Figure 20: Average Annualized Overall Mortality Rates by Area, Berks County, 2005-2008**



Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.

### ***Access and Barriers to Care***

The *Healthy People 2020* goals for access to health care include:

- Increase the proportion of the population with health insurance to 100%;
- Reduce the proportion of individuals who are unable to obtain, or delay in obtaining, necessary medical care, dental care or prescription medicines to 9% overall (4.2% for medical care, 5% for dental care and 2.8% for prescription medications); and
- Increase the proportion of persons with a usual primary care provider to 83.9%.

Barriers to care for Berks County residents that were identified by key informants included insurance and other health care costs, transportation, communication, beliefs about the need for health care, and cultural differences. These barriers make it more difficult for individuals to receive the timely, high quality health care that they need.

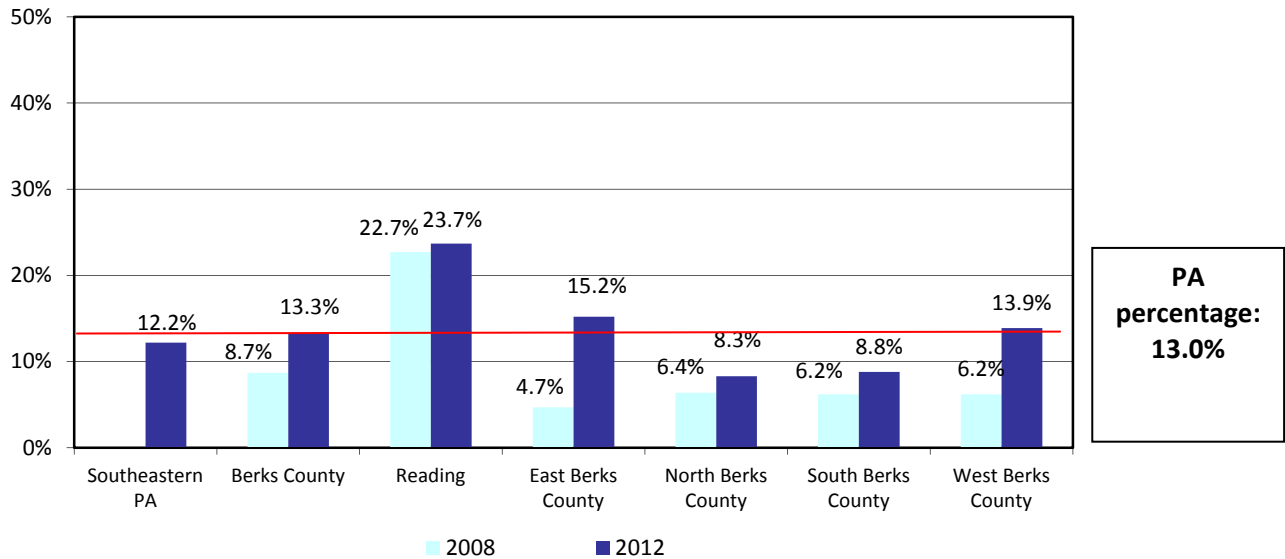
#### Health Insurance Status

Having health insurance and a regular place to go when sick are important in ensuring continuity of care over time. The overwhelming majority of Berks County adults (86.7%) have health insurance coverage. However, a sizable percentage of adults do not have any private or public health insurance; **13.3% of adults aged 18-64 in Berks County are uninsured, representing 33,000 uninsured adults (Figure 21).** The percentage of uninsured adults statewide (13%) is the same as the percentage in Berks County. The percentage of uninsured adults in Berks County has **increased since 2008 from 8.7% to 13.3% in 2012.**



The percentage of adults in Berks County without insurance does not meet the *Healthy People 2020* goal of 100%.

**Figure 21: Percentage of Uninsured Adults Age 18-64 in Berks County by Area, 2008 & 2012**



Source: PHMC's 2008 and 2012 Berks County Household Health Survey.

- **Adults in the City of Reading (23.7%) are more likely to be uninsured.** Adults in the North Berks area (8.3%) are least likely to be uninsured.
- While the percentage of adults without health insurance has remained steady in the City of Reading as well as North and South Berks since 2008, the percentage of adults without health insurance has increased in the East and West Berks areas (4.7% to 15.3%, and 6.2% to 13.9%, respectively).

Undocumented Latinos are more likely to be uninsured because, under federal law, they are not eligible for publicly-funded insurance programs. Many Latino focus group participants went without needed care because they were uninsured and could not afford the out-of-pocket costs.

*“They say that we don’t get screenings, but we don’t get screenings because we don’t have health insurance.” (Latino adults 18-64)*

Information from focus group participants revealed that many Berks County residents who are uninsured or underinsured lack sufficient funds to self-pay for preventive or specialty care and to pay for needed prescriptions, dental, or vision care.

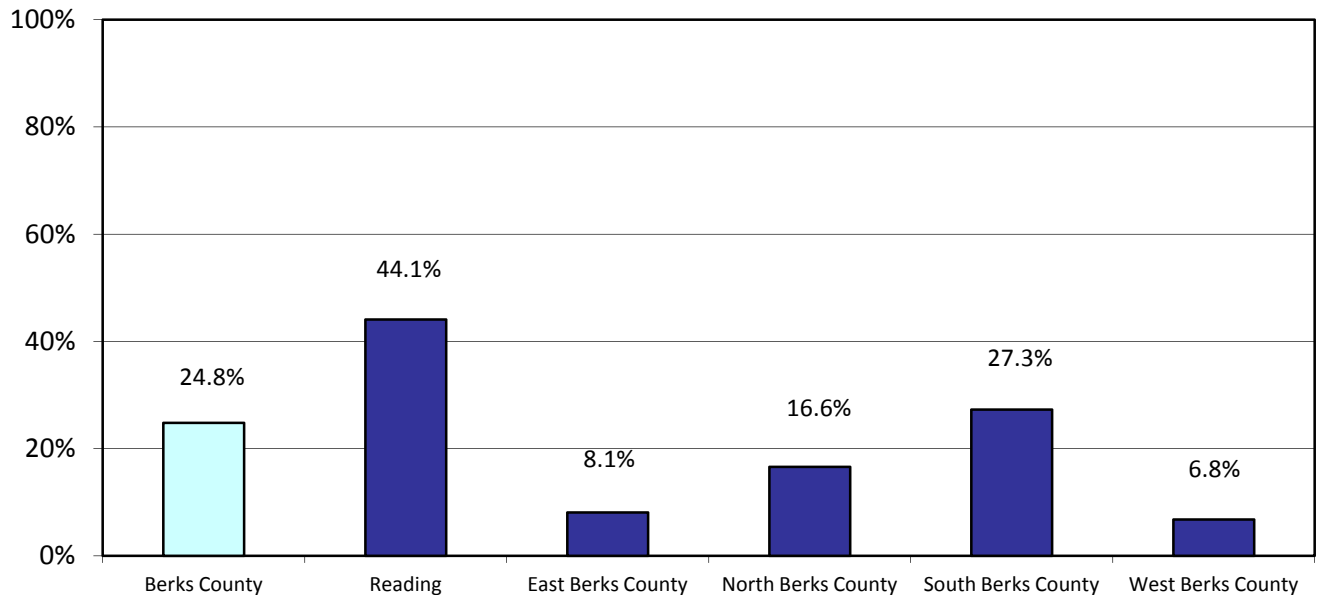
Emergency Room Utilization among the Uninsured

**Among the uninsured in Berks County, one-quarter (24.8%) visited an emergency room for care due to lack of insurance;** this represents 8,100 adults. Uninsured adults in the City of Reading (44.1%) are more



likely to visit an emergency room due to a lack of health coverage. Uninsured adults in the West Berks area are least likely to use the emergency room for care (6.8%) (Figure 22).

**Figure 22: Percentage of Uninsured Adults who Visited an Emergency Department Due to Lack of Insurance by Area, Berks County, 2012**



Source: PHMC's 2012 Berks County Household Health Survey.

Many uninsured and underinsured focus group participants described going to emergency departments for non-urgent care because they could not afford to pay for private care and knew they would not have to pay the emergency department charges and/or preferred to be seen as soon as possible. Several informants mentioned that the emergency department becomes a default source of primary care, which is costly and lacks the continuity of care that chronic conditions demand.

Despite focus group participants' impressions, both St. Joseph Regional Health Network and the Reading Health System provide care for non-emergency self-pay patients without asking for payment at the initial point of service. When the bill is received patients can apply for charity care which will waive part or all of the costs. Charity care is also available to cover the costs of ongoing clinic visits for those with chronic health problems. However, focus group participants seemed unaware of this resource.

### Prescription Drug Coverage

**One in ten (10.8%) adults in Berks County does not have prescription drug coverage.** This percentage has remained constant since 2008. According to key informants, many older residents use their savings to pay for prescriptions. This is a serious problem for those who need medications for chronic conditions, particularly for expensive psychiatric medications. Patients often cut the medication dosage, which causes more serious health problems, or go without necessary basic medications. Many people are reluctant to ask for help.



*“I have asthma, and I couldn’t afford the medications and the care. Insurance doesn’t pay for it all. Welfare says you make too much money. Then you try to go elsewhere and it’s too expensive to get additional insurance. I use an inhaler and sometimes I have to suck it up. Nebulizer controls it, but the Advair controls it better. But insurance doesn’t pay for it [Advair]. I’m working, but insurance doesn’t cover everything, and there’s a \$700 deductible.” (Berks Community Health Center)*

*“My daughter has mental health problems and doesn’t have insurance. The co-pays for mental health care are \$800 a visit.” (Senior Center)*

*“People are too prideful to ask [for help]. It’s because they don’t think they’re going to get services. They take over-the-counter medications. There are also housing problems and paying your utility bills. There was an elderly couple that was sitting in their house with no heat. They paid for the medications and couldn’t pay for their heating. So they went without.” (Berks Community Health Center)*

Focus group participants felt that patients at private providers had better experiences with prescription refills and referrals than patients who used public clinics.

*“My girlfriend gets her prescriptions filled in an hour. If she calls for an appointment, she gets one in 45 minutes to an hour.” (Berks Community Health Center)*

*“Yes, but you need a referral. I was here 2 weeks ago and I waited 2 weeks for people to let me know. I needed an MRI. I finally got something in the mail. You have to come down here in person if you want something done.” (Berks Community Health Center)*

*“The message (at the clinic) is too long now. I had called and it took two weeks to get a prescription. I had to miss two doctor’s appointments because of the referrals. The doctor tells you to call in a referral, but the phone is too long. You dial and wait for a ring or someone to pick up, but you get a message. And then you get here and they’re more focused on your name—has that changed; is everything the same for the form? But they’re not paying attention to what needs to get back to the doctor.” (Berks Community Health Center)*

### Economic Barriers

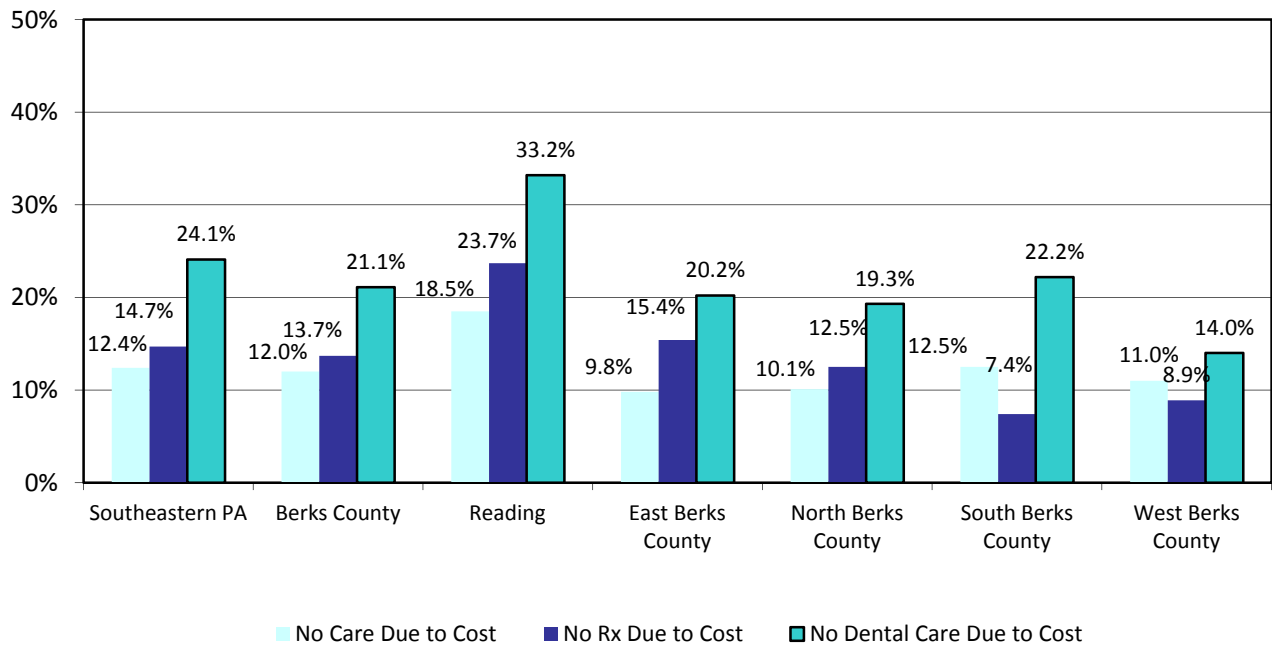
With or without health insurance, many adults in Berks County are unable to get needed care due to the cost of that care; 12.0% of adults reported that there was a time in the past year when they needed health care, but did not receive it due to the cost (Figure 23). Unemployment, and underemployment, are often major factors in economic barriers to care because so many individuals lose their health insurance coverage when they lose their jobs, or have no health insurance because they work part-time. The role of cost as a barrier to care varies across the county. In the City of Reading, 18.5% of adults did not receive care due to cost. Residents of the North Berks area (9.8%) were least likely to not get care due to the cost.



**About 43,400 adults in Berks County were prescribed a medication but did not fill the prescription due to cost in the past year (13.7%).** Those living in the City of Reading are more likely to face cost barriers to prescriptions, with nearly one-quarter of adults in the City of Reading not receiving prescribed medications due to cost (23.7%).

**More than one in five adults in Berks County did not get dental care in the past year due to the cost of that visit (21.1%).** There was wide variation in the role of cost as a barrier to dental care in different parts of the county. One-third of adults in the City of Reading (33.2%) did not receive dental care due to the cost, compared to 14.0% of adults in the West Berks area.

**Figure 23: Cost Barriers to Care in Past Year by Area, Berks County, 2012**



Source: PHMC’s 2012 Berks County Household Health Survey.

Many residents have no prescription coverage or dental insurance, and many older residents do not have Medicare Part D coverage and, as a result, go without needed medication. Dental care is not covered by Medicare, and minimum dental insurance coverage, which is often all that older adults can afford, has high deductibles and co-pays.

*“When you try to buy dental care, it’s minimal amount. They’ll pay for general care. They’re making money on you. I have a problem right now and I need major care. It’s an impossible amount of money. I have one broken tooth, and it cost me \$1,000. Why isn’t dental covered by medical? If you have bad teeth, it affects your whole system. Then you have other problems that come from it. Dental care is absolutely impossible. And I have many more problems than that [broken tooth].” (Senior Center)*



According to key informants, a primary reason why low income adults may lack Medicaid or other insurance coverage is that this population is very transient. They often move without forwarding addresses and are unable to comply with the documentation needed to apply for, or renew, Medicaid applications. They may also ignore notices and requests from the County welfare office for more information and become uninsured. Many of the County's social service and health care providers work tirelessly to enroll and re-enroll these residents. However, many new uninsured but eligible residents are constantly being dropped from enrollment.

### *Transportation*

Many Berks County residents have difficulty accessing services because they live in areas where public bus service is limited. Additionally, many services are located in the City of Reading, which is not always accessible for suburban and rural residents who don't drive. While paratransit and some volunteer transportation programs are available, the paratransit service will not cross county lines, so a resident in Berks County cannot see a physician in Montgomery County. The paratransit service is often inconvenient:

*"You can use the City bus. I was denied the special bus because I'm not disabled. I have to rely on a taxi or friends. The bus doesn't stop in front of the doctor's office. I manage to get there, but I have to take a taxi." (Senior Center)*

*"You can use the BARTA bus, but you have to be disabled. And they won't wait for you. You have to call 24 hours in advance." (Senior Center)*

### *Language*

The ability to communicate with health care providers can be a major barrier to health care, especially for Latinos, due to a lack of Spanish-speaking staff and poor or non-existent translation services.

*"Language and many times also lack of education and understanding terminology. They talk to us in terms that we don't understand. Instructions. Many of us don't understand English easily. They speak in terms that are difficult for us." (Latino adults 18-64)*

Interpreters are available at hospitals, but often not for specialists or at private practitioners' offices. Materials are often provided solely in English. Since interpreters are so expensive, Latino patients often rely on children to interpret, which is a violation of doctor/patient confidentiality and can also result in miscommunication.

*"In the hospitals, you often find an interpreter, but when you go to a specialist that's the bigger problem because you need to bring your own interpreter, and they're \$75 dollars an hour. The specialists typically are outside of the hospitals, so they'll do translation and transportation – if you have to take a kid to King of Prussia, the interpreter and translation is \$150." (Latino adults 18-64)*

Interpreter services for Spanish speakers are thought to be unreliable. One participant felt that interpreters are sometimes rude:





*“If you go to the clinic and treat them nicely, there’s no reason for their translators to be nasty to you. If you’re rude to them, then yes they’ll be rude to you, but if you’re there sick and treat them well, they shouldn’t treat you poorly.” (Latino adults 18-64)*

*“You don’t have to smile, but show some respect. They’re the professional. We’re not feeling well and then we have to be treated badly.” (Latino adults 18-64)*

### *Cultural Differences*

Even with interpretation, some important facts are often lost due to cultural differences. Differences between cultures can sometimes prevent optimal care and service provision.

*“[Health care professionals] need training on the uniqueness within the Latino population and between documented and undocumented Latinos. They see Latinos all the same, but here there are Dominicans, Puerto Ricans, and Mexicans, which are totally different cultures.... They should understand the differences between the cultures – there are 21 different countries in Latin America.” (Key Informant Interview)*

Lack of education is also a barrier to care for the Latino population:

*“A poor person here doesn’t really have access to anything and being educated makes it easier to have opportunities, but here the poor person and the poorly educated, you’re going to have a very hard time in this city.” (Latino Adults 18-64)*

In addition to economic and linguistic barriers, according to key informants, many County residents do not understand the importance of preventive care, or of having a primary care physician, and do not seek health care unless they feel ill. Others share a cultural belief that their lives and destiny, including illness, are not under their control, so there is no reason to seek early preventive care. In addition, some types of preventive care, such as pre-natal care, are not commonly available in their original culture, such as Latin America, so women do not understand the benefits of seeking out obstetrical care as early in the pregnancy as possible.

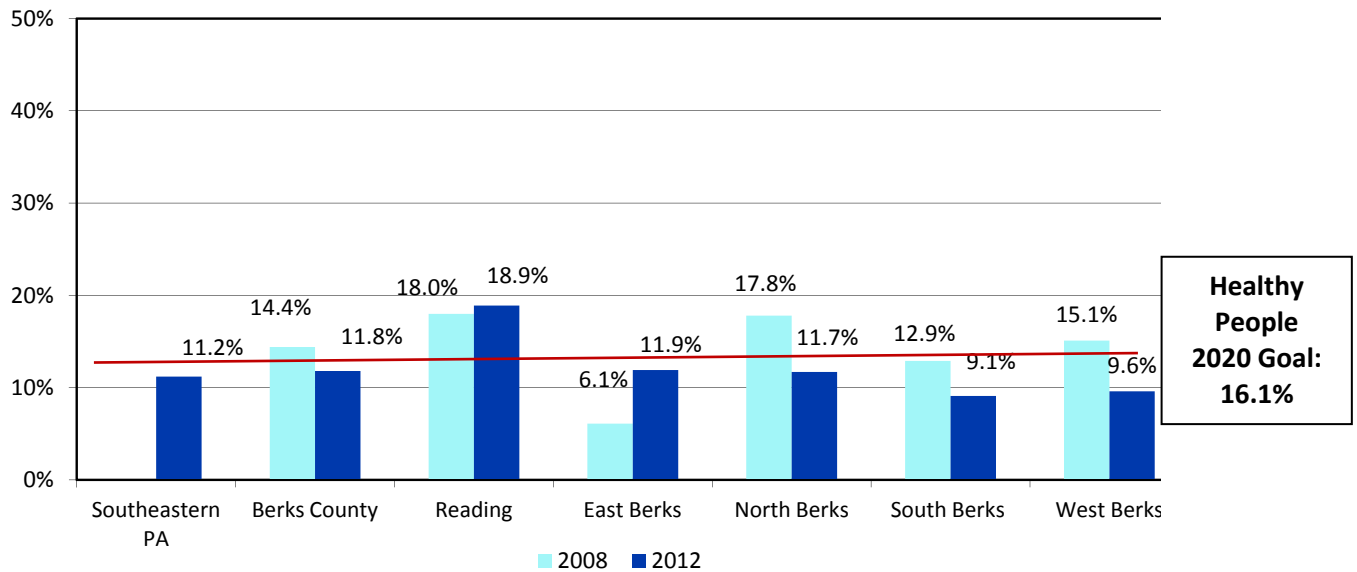
### Utilization of Services

Having a regular source of care is important since people who have a regular source of care are more likely to seek care when they are sick compared with those who do not. **In Berks County, 11.8% of adults do not have a regular source of care; this percentage represents approximately 37,600 adults (Figure 24).** The percentage of adults in Berks County with a regular source of care (88.2%) is higher than the *Healthy People 2020* goal of 83.9%.

- In the City of Reading, 18.9% of adults do not have a regular source of care; this percentage has remained constant since 2008.
- The percentage of adults without a regular source of care differs across the other areas of Berks County: it is lowest in the South Berks area (9.1%).



**Figure 24: Percentage of Adults without a Regular Source of Care in Berks County by Area, 2008 & 2012**



Source: PHMC's 2012 Berks County Household Health Survey.

In addition to a lack of primary care providers, many residents also lack sufficient access to mental health and specialty services. According to key informants, mental health needs are often unmet because there is a significant shortage of psychiatrists, particularly for children and adolescents, and many do not accept any type of insurance or Medical Assistance. Even with insurance coverage, out-of-pocket costs for deductibles and co-pays and low reimbursement rates are prohibitively expensive for many lower income residents. The insufficient number of board certified child and adolescent psychiatrists in the County also leads to long waiting times for an appointment. Although Reading Health System operates 10 adolescent inpatient psychiatric beds, according to key informants many families rely on a family practitioner for treatment when they need specialty mental health care.

Accessing specialty care and preventive screenings is also difficult for Medicaid patients because some specialists do not accept Medicaid, or accept a limited number of Medicaid patients.

*"I wanted to go [to the specialist] and they told me I couldn't go because they didn't have any space for another [Medicaid] patient." (Latino adults 65+)*

Key Informants agreed that the Medicaid population also lacks access to substance abuse treatment and dental care due to the limited number of providers who accept Medicaid.

In addition, some types of specialty treatment, like elective surgery, are not covered at all by Medicaid, so that patients must pay out of pocket or forgo treatment. For example, many pain management specialists and physicians who treat Hepatitis C will not see Medicaid patients at all. Many Latinos also rely on corner stores (bodegas) to acquire medications from their native countries; they also sometimes find it less expensive to travel to their home countries to receive care if they can.



Many key informants mentioned difficulty in accessing specialty services for those enrolled in Medical Assistance. Many specialty providers do not accept Medical Assistance, and the existing hospitals and community clinics do not have the capacity to serve all of the patients. This leads to long waiting times to see a provider and frustration for patients.

*“What happens, they [clinic staff] make you wait a long time. Sometimes we don’t have time to wait until they want to treat us. It also depends on the person, when I ask them why do you make me wait a long time, I’m not here to waste your time, and then they’ll treat you. But sometimes it’s a matter of speaking up, because if you stay quiet and wait for them, then they’re just going to continue to ignore you.” (Latino migrant workers)*

Uninsured adults often cannot afford the cost of specialty services and procedures.

*“I went to a private clinic, and they sent me to the ER. When I got to the ER what they gave me was information about a specialist, so obviously at the specialist we had to pay ahead of time. It was \$270 for the consult and the exam. It was a colonoscopy that costs \$2,700, so obviously, no, I didn’t get the procedure.” (Latino adults 18-64)*

*“That’s another reason that we don’t receive health care, because there’s no one that will charge you less or will at least put you on a payment plan and tell you we’re going to do this [procedure] or that [one]. But there’s no opportunity, there’s no possibility, we don’t have the opportunity to have available doctors that will charge us less or help us.” (Latino adults 18-64)*

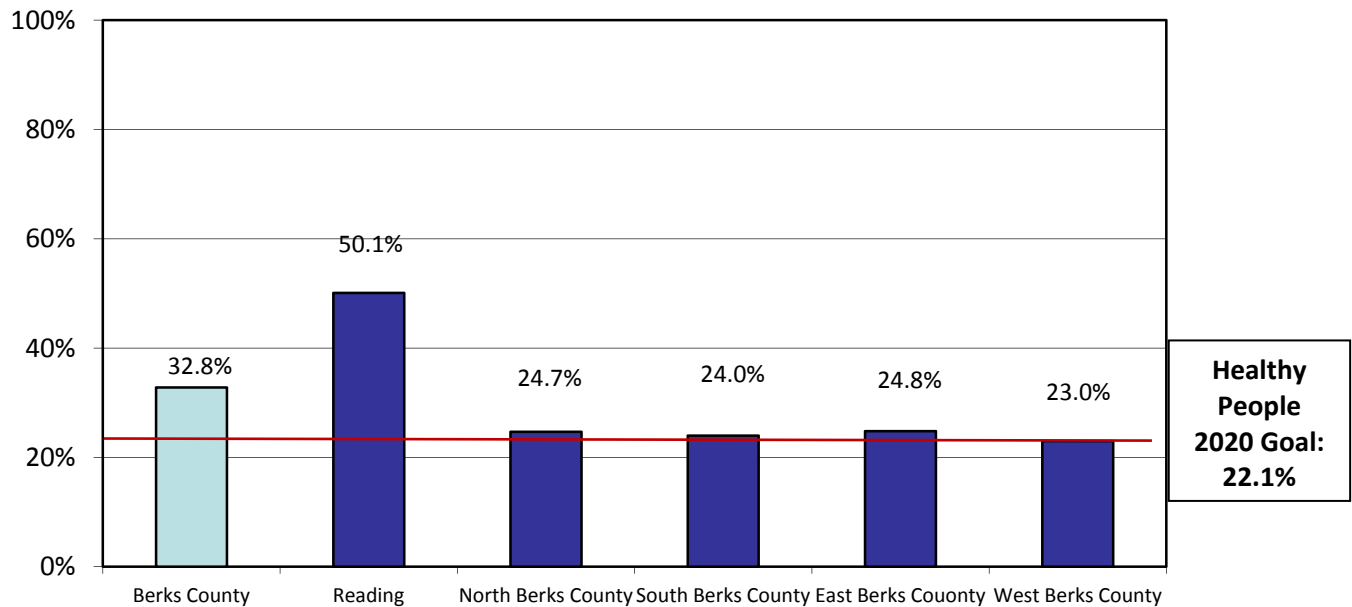
### Pre-Natal Care

Receiving pre-natal care during the first trimester of pregnancy can help ensure that health concerns are identified and addressed in a timely manner. Two-thirds of Berks County women (67.2%) receive early pre-natal care, which is below the state average of 70.6% and does not meet the *Healthy People 2020* goal of 77.9% (Figure 25).

- **Black and Latina women are more likely to receive late or no pre-natal care than White or Asian women.** Approximately one-half of Latina (49.1%), and Black women (48.7%) receive late or no pre-natal care, compared to 30.0% of Asian women and 26.6% of White women. Similar patterns are found statewide.
- **In the City of Reading, one-half of women (50.1%) receive late or no pre-natal care,** representing more than 820 women annually in the City. This percentage is higher than the percentage that receive late or no pre-natal care in other Berks County areas, Berks County as a whole (32.8%), and the state. In Reading, more than one-half of Black women (52.7%), Latinas (52.0%) received pre-natal care late or not at all. **The West Berks area has the lowest percentage of women who receive late or no pre-natal care (23.0%).** Within West Berks, more than one-third of Latina women (36.2%) did not begin early pre-natal care, compared with 21.8% of White women.



**Figure 25: Average Annualized Percentage of Women Receiving Late or No Pre-Natal Care for Berks County by Area, 2005-2008**



Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.

### **Health Screenings**

Regular health screenings can help identify health problems before they start. Early detection can improve chances for treatment and cure and help individuals to live longer, healthier lives. **In Berks County, 17.5% of adults did not visit a health care provider in the past year; this percentage represents 55,200 adults.**

- Adults in the City of Reading (23.0%) were less likely to visit a health care provider in the past year than any other area in Berks County.

#### Dental Visit

**Nearly one-third (30.0%) of all Berks County adults did not visit a dentist in the past year.** This is similar to the percentage of adults statewide without a dental visit in the past year (29.0%).<sup>21</sup> Adults in the City of Reading (43.0%) were more likely to not visit a dentist in the past year.

- In all Berks County areas, the percentage of adults who did not visit a dentist in the past year has increased from 2008.

<sup>21</sup>2011 Behavioral Risks of Pennsylvania Adults, PA Department of Health.



### Recommended Screenings

The following screenings have been recommended for preventative health for adults by the U.S. Centers for Disease Control. As described below, many adults in Berks County are not utilizing these services.

#### *Blood Pressure*

- **13.2% of adults in Berks County did not have a blood pressure test in the past year.** Adults in the City of Reading (17.0%) are most likely to not receive this test within the past year.

#### *Colonoscopy*

Regular screenings beginning at age 50 are fundamental in preventing colorectal cancer.

- Seven in ten (69.4%) adults 50 years of age and older in Berks County have had a colonoscopy in the past ten years. Statewide, 65.0% of adults age 50 and over have had a colon cancer screening in the past ten years.<sup>22</sup>
- In the North Berks area, more than four in ten (42.5%) adults did not receive this recommended screening in the past ten years. This percentage represents 16,400 adults and is an increase since 2008 (31.6%).
- Nearly one-third (31.5%) of adults in the City of Reading did not receive a colonoscopy in the past ten years; adults in the West Berks (78.0%) area were most likely to have had this test.

#### *Pap Smear Test*

- **Four in ten Berks County women (41.0%) did not receive a Pap Smear test in the past year.** This percentage represents approximately 66,300 women, and is an increase from 31.7% in 2008.
- The East Berks area has the highest percentage (46.8%) of women not receiving this test in the past year.
- The City of Reading had the lowest percentage (36.4%) of adult women who did not receive a Pap test in the past year.

#### *Mammogram*

The American Cancer Society recommends annual mammograms beginning at age 40 for women in good health. However, **four in ten (40.6%) Berks County women age 40 and over are not receiving this screening annually. This is similar to the statewide percentage (42.0%).**<sup>23</sup>

- In the City of Reading, 45.2% of women aged 40 and over did not receive a mammogram in the past year. This percentage increased substantially from 28.6% in 2008.
- The percentage of adult women who did not receive a mammogram in the past year is slightly lower in other areas of the County.

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<sup>22</sup>2010 Behavioral Risks of Pennsylvania Adults, PA Department of Health.

<sup>23</sup>2011 Behavioral Risks of Pennsylvania Adults, PA Department of Health.



- All regions saw an increase in the percentage of women not receiving yearly mammograms from 2008 to 2012; this may be due to recent changes by some organizations in the recommended screening intervals.

*Rectal Exams for Prostate Cancer*

- **Nearly one-half (47.4%) of men aged 45 years and over in Berks County did not have a screening for prostate cancer in the past year.** Statewide, 53.0% of men age 50 and over did not have this test.

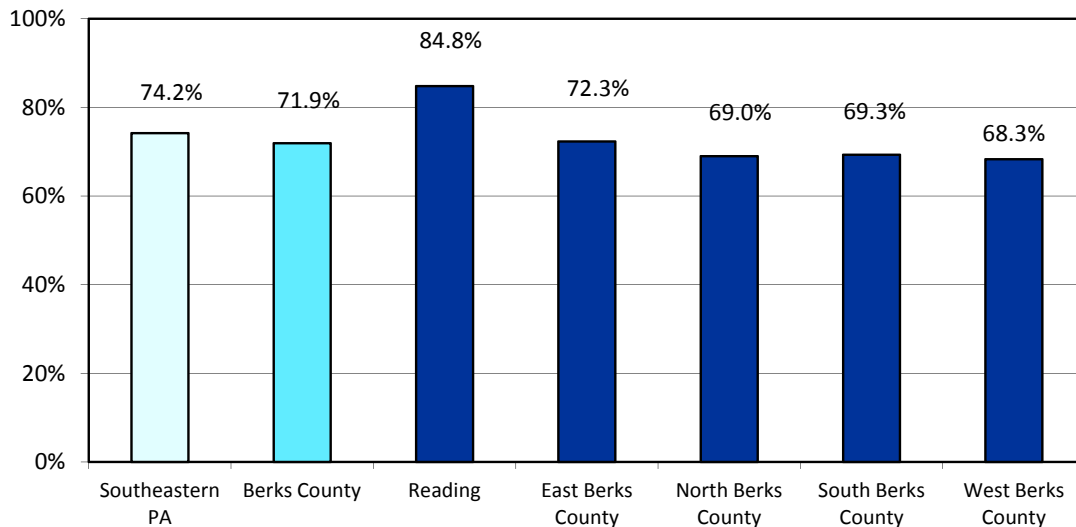
**Health Behaviors**

Nutrition

According to the USDA’s MyPlate food guidelines, adults should eat 4-5 servings of fruits and vegetables daily.<sup>24</sup> **Most adults in Berks County do not reach these recommended goals: nearly 221,100 residents (71.9%) do not meet these nutritional guidelines.** This percentage is comparable to national data. Nationally, less than three-quarters of adults (74.0%) eat three or more servings of fruits and vegetables daily.<sup>25</sup>

**The City of Reading has the highest percentage in the County of adults who do not eat enough fruits and vegetables.** More than eight in ten adults (84.8%) eat three or fewer servings of fruits and vegetables a day (Figure 26). In the other areas of the County approximately seven in ten adults eat fewer than the recommended four servings of fruits and vegetables a day.

**Figure 26: Percentage of Adults Consuming Three or Less Servings of Fruit and Vegetables/Day by Area, Berks County, 2012**



Source: PHMC’s 2012 Berks County Household Health Survey

<sup>24</sup>The U.S. Departments of Agriculture, (2011). Dietary Guidelines Consumer Brochure. Retrieved online on October 23, 2012 at <http://www.choosemyplate.gov/food-groups/downloads/MyPlate/DG2010Brochure.pdf>

<sup>25</sup>U.S. Centers for Disease Control and Prevention. State-Specific Trends in Fruit and Vegetable Consumption Among Adults, 2000-2009 (2011).



Fast foods are high in unhealthy calories, saturated fats, sugar, and salt. **Currently, nearly one-half (48.1%) of Berks County residents eat fast food one or more times a month.**

Key Informants attributed the rise in obesity to difficulty in accessing affordable healthy foods, individuals' preferences for cheap, fast food, and the difficult economic times in which families focus more on economic security than on diet and exercise.

### Exercise

The U.S. Department of Health and Human Services' 2008 Physical Activity Guidelines for Americans recommends that adults (ages 18-64) get 2.5 hours of moderate aerobic physical activity each week.<sup>26</sup> Many adults in Berks County do not meet these recommended guidelines.

- **About sixteen percent (15.6%) of adults in Berks County do not participate in any exercise and only 55.0% of adult residents exercise three or more days a week as recommended.** The *Healthy People 2020* goal is to reduce the percentage of adults who participate in no leisure time physical activity to 32.6%.
- Exercise habits of Berks County adult differ across the County. **The City of Reading has the highest percentage of adults (23.6%) who did not exercise at all within the past month;** the North and South Berks areas have the lowest percentage (13.4% and 13.2%, respectively).

Focus group participants were also asked whether they had heard of the Reading Trails and if they had used them. Most participants were aware of the trails, but none were currently using them due to either disability or fear of crime. Participants who had heard of the trails were aware of a recent attack on an older woman that occurred on the trails during the day. Those who stated they did not want to use the trails, or no longer wanted to use them, gave fear of crime as their reason.

### Tobacco Use

**One in five (20.4%) adults in Berks County currently smokes; this percentage is similar to the smoking rate statewide (22.4%)** (Figure 27). The percentage of adults in Berks County who smoke does not meet the *Healthy People 2020* goal of 12%.<sup>27</sup> The City of Reading has the highest percentage (29.3%) of adults who smoke and the West Berks area (17.6%) has the lowest percentage of adult smokers.

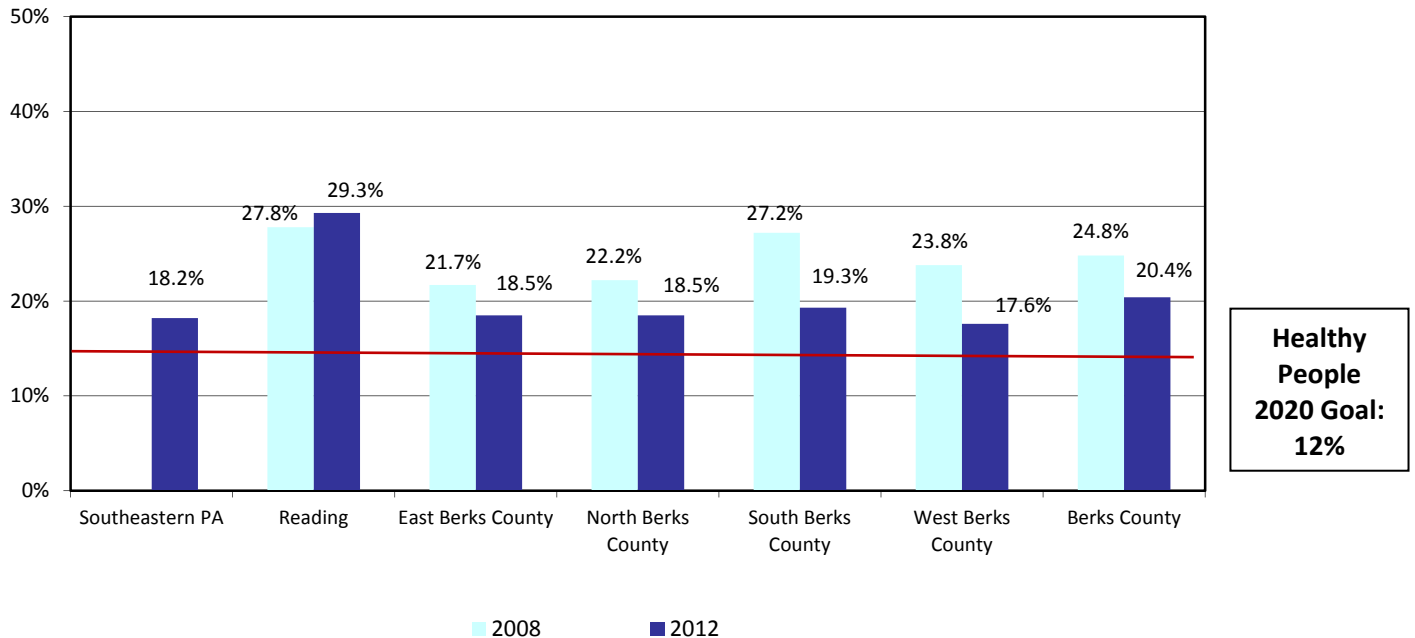
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<sup>26</sup>U.S. Department of Health and Human Services. 2008 Physical Activity Guidelines for Americans, 2008.

<sup>27</sup>2011 Behavioral Risks of Pennsylvania Adults, PA Department of Health.



**Figure 27: Percentage of Adults Who Smoke by Area, Berks County, 2008 & 2012**



Source: PHMC's 2008 and 2012 Berks County Household Health Surveys.

**Slightly more than one-half (54.3%) of adults who smoke in Berks County tried to quit in the past year.** Within the county, there was wide variation among smokers who tried to quit in the past year. The highest percentage of adults trying to quit was in the North Berks area (68.9%), and the lowest percentage of adults trying to quit was in the West Berks area (27%).

### Alcohol Consumption

According to the Centers for Disease Control and Prevention (CDC), binge drinking is a common pattern of excessive alcohol use in the U.S. It is defined as five or more drinks on one occasion.<sup>28</sup> **Nearly four in ten (38.4%) Berks County adults participated in binge drinking on one or more occasions in the past month.** The Berks County binge drinking percentage is more than twice the statewide percentage of 18.3%.<sup>29</sup>

- The City of Reading has the highest percentage of residents who participated in binge drinking in the past month. Nearly one-half of Reading residents (47.5%) consumed five or more drinks on one or more occasions during the past month.

<sup>28</sup>U.S. Centers for Disease Control and Prevention. Fact Sheets – Binge Drinking – Alcohol (2010).

<sup>29</sup>2011 Behavioral Risks of Pennsylvania Adults, PA Department of Health.





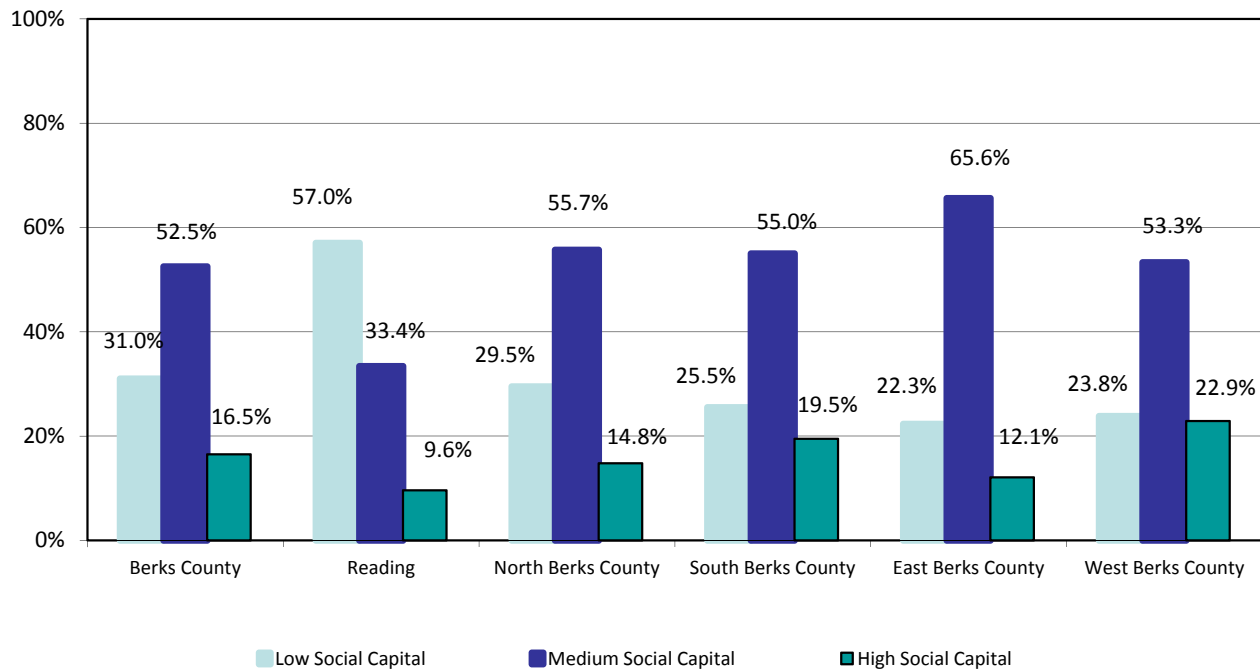
**Social Capital and Neighborhood**

Neighborhood factors have important roles in the overall health and well-being of Berks County residents. Social capital is one measure used to understand an individual’s neighborhood and role in that neighborhood. The social capital index used in this needs assessment was created from five questions asked in the Berks County Household Health Survey. Those questions were: 1) number of groups the respondent currently participates in; 2) respondent’s perception as to whether neighbors ever worked together to improve their community; 3) respondent’s perception as to whether neighbors are willing to help each other; 4) respondent’s feeling of belonging to the neighborhood; and 5) respondent’s perception as to whether people in the neighborhood can be trusted. A social capital index, with scores ranging from 1 to 10, was created with a score of 1-4 deemed as having a “low” social capital, 5-7 as being “medium,” and 8-10 as “high” social capital.

**Adults in Reading are more likely than adults in other parts of Berks County to have low social capital.**

- More than one-half of adults in Reading, 57.0%, or approximately 26,500 adults, have low social capital, as compared to 22.3% of adults in the East Berks area (Figure 28).

**Figure 28: Social Capital by Area, Berks County, 2012**



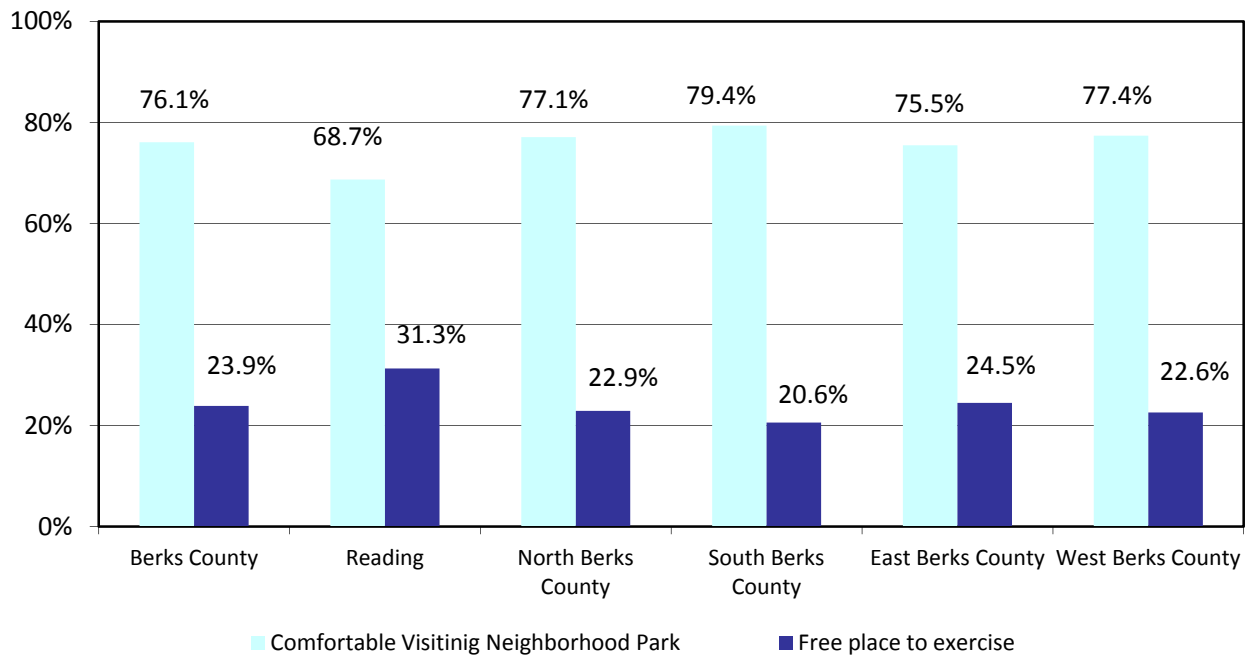
Source: PHMC’s 2012 Berks County Household Health Survey.

**About three-quarters of adults in Berks County (76.1%) have a park or other outdoor space in their neighborhood that they are comfortable visiting; this represents 237,800 adults.** Adults in the South Berks area are most likely to have a park or other outdoor space in their neighborhood that they are comfortable visiting (79.4%). Adults in the City of Reading are less likely (68.7%) to have a neighborhood park or other outdoor space that they are comfortable visiting.



**About six in ten adults in Berks County (59.8%) say there is a free place where they can exercise.** This represents approximately 163,400 adults. **Adults in the City of Reading are less likely than other adults in Berks County to say there is a place where they can exercise for free,** with one-half of adults (50.7%), or about 23,900 adults, saying there was a place where they could exercise free of charge. Access to a free place to exercise is somewhat consistent across the rest of the county, ranging from 63.7% of adults in the North Berks area to 58.1% of adults in the East Berks area (Figure 29).

**Figure 29: Opportunities for Physical Activity by Area, Berks County, 2012**



Source: PHMC's 2012 Berks County Household Health Survey.

## HEALTH NEEDS OF SPECIAL POPULATIONS

One of the goals of this needs assessment was to identify the health needs of special populations across Berks County. As described earlier in this report, the Latino population of Berks County has grown rapidly in the past twenty years, and many Latinos are in poorer health and experience more barriers to accessing health care than others in the County. However, other populations across Berks County, including Blacks and the poor, also lack access to affordable health care. The following section focuses on the health status and health care needs of special populations across Berks County. These groups present an area of immediate and growing need.

### Health Status

One of the best indicators of the health of the population is their self-reported health status. This measure has consistently shown to correlate very strongly with outcomes on medical examinations.



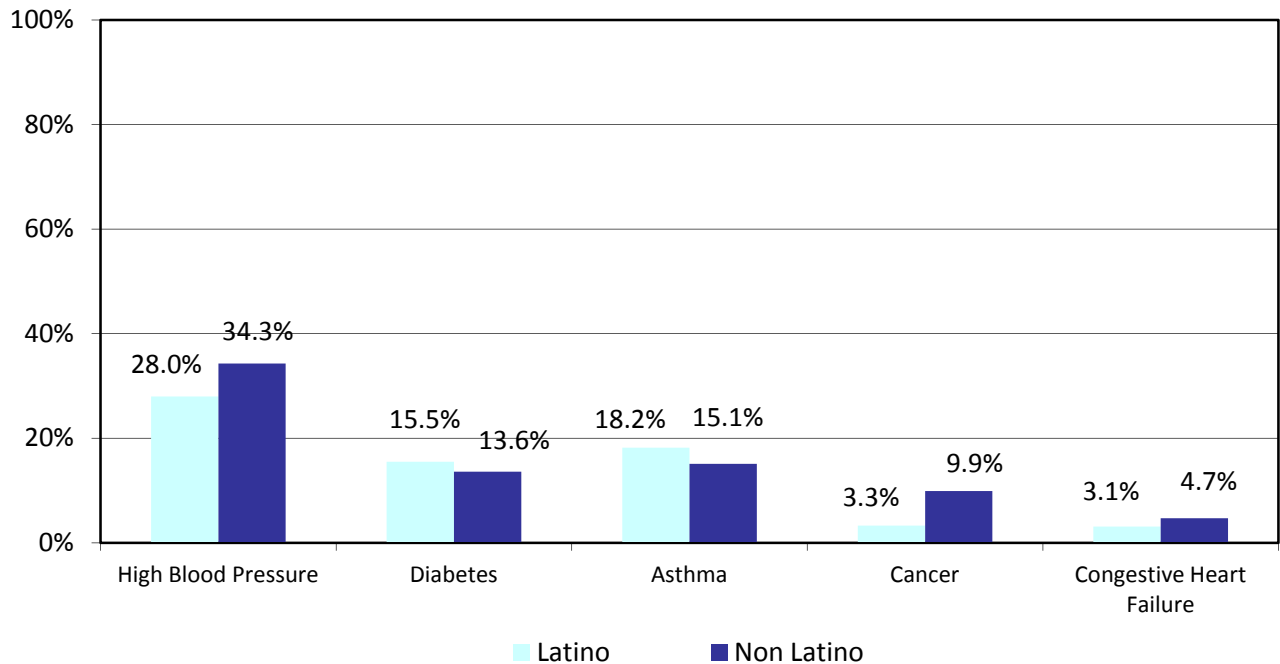
- Across Berks County, **the majority of Latino adults rate their health as good. However, slightly more than one-third (34.0%) of Latino adults age 18 years of age or older are in fair or poor health, representing 15,600 adults.** This percentage is almost three times higher than for non-Latino adults in Berks County (34.0% versus 12.8%, respectively).
- **Three in ten (30.9%) Black adults in Berks County are in fair or poor health;** this percentage is more than twice as high compared to White adults.
- **Poor adults across Berks County are more than three times as likely to be in fair or poor health compared to non-poor adults (40.8% versus 12.6%, respectively).**

High blood pressure, diabetes, asthma, cancer, and mental health are frequently cited health conditions that require ongoing care.

- **More than one-quarter (28.0%) of Latino adults have high blood pressure;** this percentage represents 12,900 adults. This percentage is lower than compared to non-Latino adults (34.3%). Black adults are more likely to have high blood pressure compared to White adults (48.4% versus 33.5%). One in four (39.6%) poor adults has high blood pressure compared to one-third (32.6%) of non-poor adults.
- Approximately **7,100 (15.5%) Latino adults in Berks County have diabetes and 18.2% has asthma.** These percentages are slightly higher than compared to non-Latino adults (13.6% and 15.1%, respectively). Across Berks County, Black (28.3%) and poor adults (24.9%) are twice as likely to have diabetes compared to their counterparts (13.3% and 12.5%). Black adults are slightly more likely to have asthma compared to White adults (17.9% versus 15.7%). Poor adults in Berks County are much more likely to have asthma compared to non-poor adults (25.2% versus 14.2%, respectively). (Figure 30)
- Latino adults in Berks County are **more likely to have a diagnosed mental health problem** than non-Latino adults (17.6% versus 14.2%, respectively). Poor adults are two times (16.2%) as likely to have a mental health problem compared to non-poor adults (13%).
- **Seven in ten (71.9%) Latino adults are overweight or obese;** this percentage represents 31,200 adults and is higher compared to non-Latino (65.2%) adults in Berks County. Black adults are more likely to be overweight or obese compared to White adults (69% versus 65.6%). Similarly, poor adults (74%) are more likely to be overweight or obese compared to non-poor (65.1%) adults.



**Figure 30: Percentage of Latino Adults in Berks County with Specific Chronic Health Conditions, 2012**



Source: PHMC's 2012 Berks County Household Health Survey.

### Utilization of Services

Early detection of a health problem can improve an individual's chances for treatment and a cure of a health condition.

- **Among Latinos in Berks County, approximately three in ten (29.3%) adults did not visit a health care provider in the past year;** this percentage represents 13,200 adults. The percentage of Latino adults who did not visit a health care provider in the past year is nearly two times as high as for non-Latino adults (15.6%). One in five Black (21.7%) and poor (21.4%) adults did not visit a health care provider in the past year compared to White (16.5%) and non-poor (17.0%) adults.
- **Four in ten (40.3%) Latino adults did not visit a dentist in the past year,** representing 18,600 adults. This percentage is higher than for non-Latino adults (28.4%). One-half of Black adults did not visit a dentist in the past year; this percentage represents 7,300 adults. This percentage is higher than compared to White adults (28.4%). Similarly, nearly one-half of poor adults (47.8%) did not visit a dentist compared to non-poor adults (27.6%).

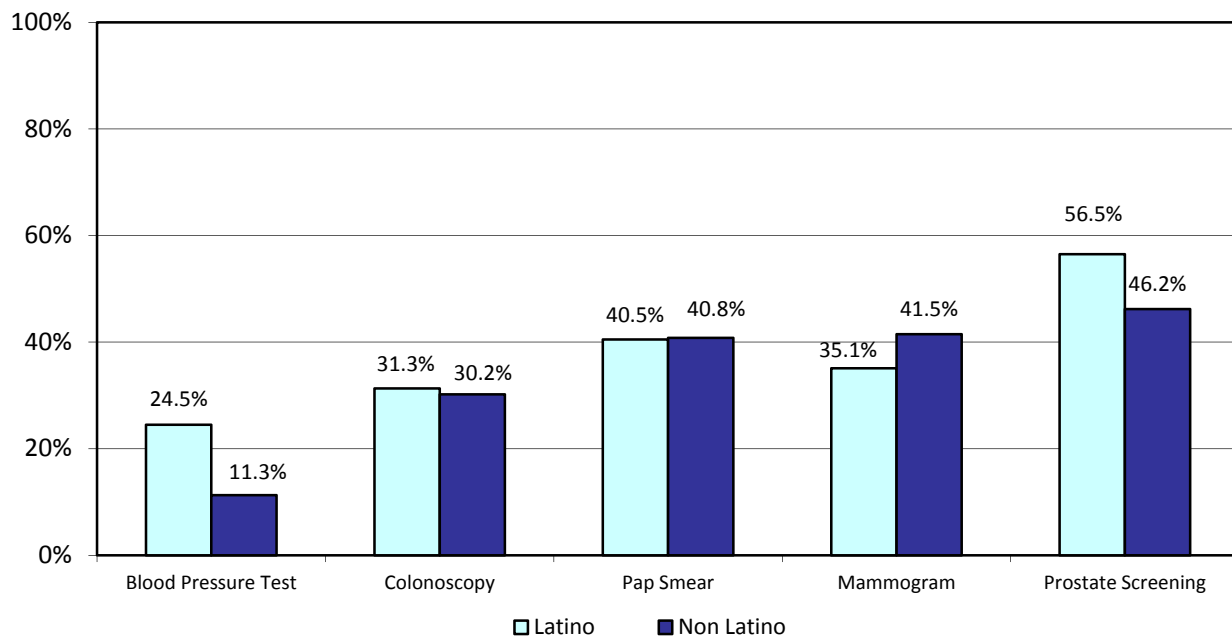


## Health Screenings

The following screenings have been recommended for preventative health for adults. For many of these indicators, information is presented for Latinos across Berks County only. This is because for some screenings, the sample size was limited for Black and poor adults.

As described below, many Latino adults in Berks County are not getting these important screenings. (Figure 31).

**Figure 31: Utilization of Health Screenings among Latino Adults in Berks County, 2012**



Source: PHMC's 2012 Berks County Household Health Survey.

### *Blood Pressure*

- Almost one-quarter (24.5%) of Latino adults in Berks County did not have a blood pressure test in the past year, representing 11,100 adults. This percentage is more than two times as high as compared to non-Latino adults (11.3%). Across Berks County, Black (14.6%) and poor (19.4%) adults were more likely to not have a blood pressure test in the past year. These percentages are higher compared to White (11.6%) and non-poor adults (12.4%).

### *Colonoscopy*

- Approximately one-third of Latino and non-Latino adults did not receive a colonoscopy screening in the past ten years (31.3% and 30.2%, respectively).



### *Pap Smear*

- Four in ten (40.5%) Latina adult women did not receive a Pap smear test in the past year. This percentage represents approximately 10,000 women. This percentage is similar for non Latina women.

### *Mammogram*

- Annual mammograms are often recommended for women 40 years of age and older. However, more than one-third (35.1%) of Latina women in Berks County are not getting this annual screening. While this percentage is lower compared to non Latina women (41.5%), it represents 4,500 adult Latina women not getting this important cancer screening.

### *Rectal Exams for Prostate Cancer*

- More than one-half (56.5%) of Latino adult men 45 years of age or older in Berks County did not have a rectal exam for prostate cancer in the past year. This percentage represents approximately 3,600 men. The percentage of Latino men who have not had a rectal exam for prostate cancer in the past year is higher compared to non-Latino men (56.5% versus 46.2%, respectively).

### **Access and Barriers to Care**

**More than a quarter of Latinos in Berks County between the ages of 18 and 64 (25.8%) have no public or private health insurance.** This represents approximately 10,800 uninsured Latino adults in Berks County. Latino adults are more than twice as likely to be uninsured as non-Latino adults (10.8%). Similarly, more than one-quarter of Black (27.9%) and poor (27.3%) adults (ages 18-64) in Berks County do not have any public or private health insurance. These percentages are more than two times as high as for White (10.6%) and non-poor adults (10.5%).

- **While 8.6% of insured non-Latino adults in Berks have prescription drug coverage, more than one-quarter of insured Latino adults (25.7%) do not.**

Adults without a regular source of care face increased risk of poor health outcomes. For example, Latino adults in Berks County are much less likely to have a regular source of care than are non-Latino adults. One in ten non-Latino adults (9.9%) has no regular source of care, compared to 22.9% of Latino adults. White adults in Berks County are much more likely to lack a regular source of care compared to Black adults (22.9% versus 9.9%). One in five (20.4%) poor adults across Berks County does not have a regular source of care; this percentage is twice as high as the percentage for non-poor adults (10.7%).

Not having a regular healthcare provider is a particular burden for those without health insurance coverage. Among adults in Berks County without health coverage, nearly 8,100 visited an emergency department because they had nowhere else to go for care.



- **Nearly one-half of uninsured Latino adults in Berks County (45.2%) visited a hospital emergency department because they were uninsured.** Uninsured Latinos are more than three times as likely to use the emergency department as uninsured non-Latinos (14.9%).

As indicated by the research above, there are many barriers to receiving regular and timely care for Berks County residents. One frequently cited barrier is cost, including the cost of medical and dental treatment for the uninsured, the cost of co-pays for those with insurance, and the cost of prescription medications. Many Berks County adults with health insurance still do not have coverage for prescriptions or for dental visits. In Berks County, Latinos, Blacks, and poor adults face additional cost-related barriers to health care.

- **Nearly 8,000 Latino adults needed health care in the past year but did not receive that care due to cost.** This represents 16.8% of all Latino adults in Berks County and is higher than the percentage of non-Latino adults (11.1%) who deferred necessary care due to cost. Nearly one-quarter (23.6%) of Black adults did not seek healthcare due to the cost, representing 3,300 adults. Approximately 7,000 (17.8%) poor adults did not seek healthcare due to the cost.
- While many residents are able to seek medical treatment, cost remains a barrier to receiving prescription drugs. **More than one in five (21%) Latino adults in Berks County were prescribed medications in the past year but did not purchase those medications due to cost,** almost two times higher than the percentage of non-Latinos (12.4%) forgoing prescriptions due to cost. More than one-quarter of Black (26.3%) and poor (28.2%) adults did not fill a prescription due to the cost compared to 12.1% of White adults and 11.7% of non-poor adults.

Dental coverage can be difficult to obtain, and delayed dental care can result in extensive damage.

- More than one-third of Latino adults in Berks County (34.9%) were not able to get the dental care they needed in the past year due to the cost of that care, while 18.8% of non-Latino adult deferred dental care. More than one in four Black (46.1%) and poor (42.1%) adults did not seek dental care due to the cost compared to White (18.4%) and non-poor (18.3%) adults.

### **Personal Health Behaviors**

The USDA recommends that adults consume at least four to five servings of fruits and vegetables daily.<sup>30</sup> **Rates of fruit and vegetable consumption and exercise are lower for Latinos than for non-Latinos.**

- **The overwhelming majority of Latino adults in Berks County (86.6%) consume less than four servings of fruits and vegetables daily,** compared to 69.5% of non-Latino adults.

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<sup>30</sup> Dietary Guidelines Consumer Brochure, U.S. Department of Agriculture (2011)



Eating in fast food restaurants is associated with increased consumption of high calorie, salty foods, placing individuals at risk for obesity-related chronic diseases.

- **The majority of Latino adults (50.1%) eat at fast food restaurants at least once a week.**
- This percentage is similar to that for non-Latino adults (47.8%).

Smoking is associated with increased risk for cancer, heart disease, and lung disease. **Latinos are more likely than non-Latinos to smoke cigarettes.**

- **Three in ten Latinos (30.4%) smoke cigarettes** compared to 18.8% of non-Latinos. This represents 14,000 Latino adults who smoke.
- The percentage of Latinos who smoke is more than twice the *Healthy People 2020* goal (30.4% versus 12.0%).

**Latinos smokers are more likely to have tried to quit smoking in the past year than non-Latino smokers.**

- More than two-thirds of Latino smokers (69.5%) have tried to quit compared to one-half (50.2%) of non-Latinos.
- This percentage (69.5%) is lower than the *Healthy People 2020* goal of 80.0%.

Latinos are slightly more likely than non-Latinos to drink more than five alcoholic drinks on one or more days in the past month (40.8% compared to 38.4%).

### **Social Capital and Neighborhood**

Social capital includes participation in clubs and groups, feelings of belonging and trust in neighborhood and neighbors and neighborhood activities and parties and communities working together.

- **Latino adults are more than twice as likely as non-Latino adults to have low social capital (59.5% as compared with 26.4%).** Black (45.7%) and poor (51.1%) adults across Berks County are more likely to have low social capital compared to White (27.8%) and non-poor adults (27.9%).

In addition, Latino and poor adults in Berks County face other environmental disadvantages. While 77.3% of non-Latino adults have a park or other outdoor space they are comfortable visiting, just 69.7% of Latino adults report the same neighborhood resources. Similarly, 68.2% of poor adults across Berks County have a park or other outdoor space they are comfortable visiting compared to 77.2% of non-poor adults.

Slightly more than six in ten (62.3%) non-Latino adults have a place in their neighborhood where they can exercise for free, but less than one-half of Latinos (46.8%) have such a place. Similarly, less than one-half of Black (47.3%) and poor (43.3%) adults across Berks County have a place in their neighborhood where they can exercise for free compared to three in five White (62.1%) and non-poor (61.9%) adults.





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## IV. UNMET HEALTH CARE NEEDS

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### ***Process and Unmet Health Care Needs***

Unmet health care needs in Berks County were identified after determining the health status, access to care, health behaviors, social capital, and health care utilization of Berks County residents. This information was then compared to information on existing resources to identify unmet needs among County residents overall, for separate areas of the County, and for special populations.

The Community Need Index score for Berks County provides an overall measure of unmet health care needs in the County.

#### Community Need Index

The **Community Need Index**<sup>31</sup> (CNI) uses many of the socioeconomic indicators from the U.S. Census which were described in the Community Definition section of this report on pp. 1-2 to assign a community need index score to each ZIP code in the United States. The indicators are drawn from five major barriers to good health (culture/language, education, insurance, and housing). They are used to measure the multiple factors which are known to limit health care access. Individual indicators include: percent of elderly, children, and single parents in poverty; percent non-Caucasian and percent with limited English proficiency; percent without a high school diploma; percent unemployed and uninsured; and percent renting housing. A score of 1.0 to 5.0 is assigned to each community, with 1.0 indicating a community with the lowest need and 5.0 a community with the highest need. There is a high correlation between high CNI scores and high rates of hospital utilization, including those which are preventable with adequate primary care. Rates of hospital use in communities with the highest needs (5.0) are 60% higher than those in communities with low needs (1.0). Nationally, Bucks County, Pennsylvania has the lowest need index (1.99) among all communities with populations over 500,000, and Montgomery County is sixth lowest. The Bronx, N.Y. is highest nationally among large communities with a CNI score of 4.8.

**Berks County as a whole is a community with middle range needs (2.7). Within Berks County, four ZIP codes in Reading and West Reading have the highest needs (4.6-5.0):** 19604 (Reading; 4.6); 19611 (West Reading; 4.8); 19601 (Reading; 5.0); and 19602 (Reading; 5.0). There are no ZIP codes with the second highest needs, but six ZIP codes have mid-level needs: Bethel (3.2), Shoemakersville (3.0), Kutztown (2.8), Womelsdorf (2.6), Temple (2.6), and Hamburg (2.6). ZIP codes in Bally (1.2), Kempton (1.2), Blandon (1.6), Centerport (1.6), and Wernersville (1.6) have the lowest needs.

#### Unmet Needs

**There is no County health department in Berks County.** Pennsylvania has a total of six county and four city health departments. Although many of the health and social service providers in the County individually provide the many services which could be provided by a county health department, there

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<sup>31</sup>Improving Public Health & Preventing Chronic Disease: CHW's Community Need Index. Dignity Health (2005).



are unmet needs which could be filled in a county-wide, coordinated manner by a county health department.

Specific unmet needs in the County which were identified during this needs assessment, include:

- Access to primary and specialty care for the uninsured and underinsured, including particularly access to dental and mental health care;
- Access to affordable prescription medications;
- Access to specialty care for those insured through Medical Assistance;
- Transportation to medical care for the low income and Latino migrant worker population;
- More affordable mental health and substance abuse services, particularly for children and adolescents; and
- Culturally competent care for the Latino population, including more affordable services for the uninsured, including more qualified, affordable interpretation services and more bilingual, bicultural staff.



## V. CONCLUSIONS AND RECOMMENDATIONS

The overall health status of Berks County’s population compares favorably to Pennsylvanians in general and *Healthy People 2020* goals. Nonetheless, a number of disparities do exist among the subareas and subpopulations studied. Disparities in health status are affected by a variety of factors including, among others: poor access to health services; various socio-demographic factors, including income; insurance coverage; and cultural considerations.

Although these disparities are not isolated in any one geographic region compared to Berks County as a whole, they are most likely to be statistically significant for the City of Reading, the county’s largest urban area, where the highest concentrations of poor, uninsured, racial minorities and individuals who identify their ethnicity as Hispanic or Latino reside. The following table summarizes several of the indicators discussed in the study and illustrates the challenge posed by the relative health status of the population of the separate subareas of the County.

### Selected Health Indicators from the Berks County Community Health Needs Assessment

| Indicators                                    | Figure #      | Berks County | Reading | North Berks | South Berks | East Berks | West Berks |
|---|---------------|--------------|---------|-------------|-------------|------------|------------|
| <b>Health Status and Behavior Indicators*</b> |               |              |         |             |             |            |            |
| Mental health condition                       | 18            | 14.6%        | 21.3%   | 10.7%       | 14.1%       | 11.6%      | 15.6%      |
| Health status fair or poor                    | 15            | 15.9%        | 32.6%   | 14.5%       | 14.0%       | 13.2%      | 7.4%       |
| High blood pressure                           | 16            | 33.4%        | 40.0%   | 30.5%       | 33.1%       | 34.6%      | 30.8%      |
| Obesity                                       | 17            | 30.2%        | 35.0%   | 26.1%       | 30.8%       | 29.5%      | 30.6%      |
| Diabetes                                      | App C-Table 1 | 13.9%        | 18.9%   | 13.7%       | 13.7%       | 16.9%      | 8.8%       |
| ER visit due to no insurance                  | 22            | 24.8%        | 44.1%   | 16.6%       | 27.3%       | 8.1%       | 6.8%       |
| Did not fill prescription due to cost         | App C-Table 3 | 13.7%        | 23.7%   | 15.4%       | 12.5%       | 7.4%       | 8.9%       |
| No dental care due to cost                    | App C-Table3  | 21.1%        | 33.2%   | 20.2%       | 19.3%       | 22.2%      | 14.0%      |
| No regular source of care                     | 24            | 11.8%        | 18.9%   | 11.7%       | 9.1%        | 11.9%      | 9.6%       |
| Smoking                                       | 27            | 20.4%        | 29.3%   | 18.5%       | 19.3%       | 18.5%      | 17.6%      |
| Binge drinking                                | App C-Table 4 | 38.4%        | 47.9%   | 32.8%       | 43.6%       | 37.1%      | 33.0%      |
| <b>Vital Statistics**</b>                     |               |              |         |             |             |            |            |
| Adolescent births/1,000 births                | 13            | 9.4          | 28.1    | 3.5         | 5.1         | NA         | 2.8        |
| Late /no prenatal care                        | 25            | 32.8%        | 50.1%   | 24.7%       | 24.0%       | 24.8%      | 23.0%      |
| Mortality rate/100,000 pop                    | 20            | 731.3        | 926.6   | 692.0       | 699.6       | 720.1      | 639.5      |
| <b>Social/Economic Indicators</b>             |               |              |         |             |             |            |            |
| Uninsured adults*                             | 21            | 13.3%        | 23.7%   | 8.3%        | 8.8%        | 15.2%      | 13.9%      |
| Low social capital*                           | 28            | 31.0%        | 57.0%   | 29.5%       | 25.5%       | 22.3%      | 23.8%      |
| Living in poverty***                          | 8             | 13%          | 34%     | 6%          | 10%         | 5%         | 6%         |

\*Source: PHMC’s 2012 Berks County Household Health Survey (n=1,101)

\*\*Source: PA Department of Health, Bureau of Health Statistics and Research, 2005-2008; not tested for significance

\*\*\*Source: U.S. Census, 2010; not tested for significance

**Note:** Shaded areas represent statistically significantly worse results compared to Berks County (p<.05).

In addition to the results obtained from a phone survey of residents in five subareas and other third party data, the following health issues were also raised as significant areas of concern by participants in focus groups and key informant interviews:



- Cost of care, including insurance coverage, co-pays, and deductibles;
- Chronic diseases;
- Access to child and adolescent psychiatrists;
- Access to specialists by Medical Assistance beneficiaries and the uninsured or under-insured;
- Reluctance on the part of undocumented immigrants to utilize social and health services available in the community; and
- Cultural and linguistic factors that lead to disparities in accessing essential health care, particularly for the Hispanic and Latino community.

Berks County has a considerable infrastructure of social service agencies and health care providers that provide care to at-risk populations. These health care providers include the new Berks Community Health Center, the St. Joseph Regional Health Network Downtown Campus, specialty clinics sponsored by the county's non-profit acute care hospitals, and the Western Berks Free Medical Clinic in Robesonia. Nonetheless, the results of the Community Health Needs Assessment indicate a need for an expansion of essential health care services.

It is also notable that Berks County lacks a public health department. In many communities such a resource addresses gaps in the health safety net for at-risk populations in addition to risks affecting the overall health of the larger population. A county public health department might also serve as a focal point for coordinating community resources in response to significant health concerns and disparities that arise in the community.

### **Recommendations**

The following recommendations are made based in response to issues raised by the Community Health Needs Assessment. It is worth noting that community responses to the issues will need to take into consideration provisions of the Affordable Care Act as they are implemented, particularly those that expand access to health insurance for the uninsured and under-insured.

#### Target 1: Access to Essential Health Care

- Increase the capacity of existing providers and add new providers to improve access to essential healthcare services for at-risk populations. These needs include:
  - Primary care and specialty care;
  - Mental health services, including psychiatrists;
  - Early prenatal care, particularly for Black and Hispanic/Latina women; and
  - Patient navigators and case managers to assist at-risk populations in circumventing barriers to accessing essential health care.
- Encourage the community to work together to establish a Berks County Health Department to focus on such population health objectives as:
  - Providing preventive screenings and health education to at-risk subpopulations;
  - Addressing barriers at-risk populations face in accessing affordable medications, dental care and vision care; and
  - Coordinating community responses to issues affecting population health.



- Improve the social service agencies' and health care providers' capacity to address unique linguistic and cultural factors that affect access to care by large segments of the Hispanic/Latino population, specifically:
  - Increasing the availability of bilingual, culturally appropriate services, particularly in specialists' offices;
  - Better educating at-risk populations about the value and availability of preventive services;
  - Improving at-risk populations' understanding of eligibility requirements and application processes for publicly-funded health insurance; and
  - Addressing concerns of those at-risk populations whose legal status represents a barrier to accessing essential health services.

Target 2: Enhance Personal Health Behaviors

- Increase programs and interventions which address personal health behaviors that negatively impact health. Priorities should include:
  - Developing strategies to address adolescent pregnancy, particularly in the City of Reading;
  - Assisting smokers in quitting;
  - Addressing obesity, especially in children; and
  - Developing a concerted effort to reduce binge drinking in the County as a whole.



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## VI. ADVISORY COMMITTEE GUIDANCE

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The Community Advisory Committee to the Berks County Community Health Needs Assessment reviewed the report of Public Health Management Corporation (PHMC). The Committee drew conclusions that were consistent with those of PHMC, most notably that:

- The overall health status of Berks County residents is reasonably good compared to norms for Pennsylvania and *Health People 2020* goals;
- Enhancing preventive, primary, and specialty care for certain at-risk populations is the most direct approach to advancing the community's health status; and
- The greatest disparities in health status are concentrated among the poor, the Hispanic and Latino community, and in particular for those who reside in the City of Reading.

Recognizing that the issues raised by the report will require considerable time and resources to address adequately, the committee suggested that efforts be focused around a set of more immediate priorities and a set of longer term objectives.

### More Immediate Priorities

All of the following essential health care services need to be provided in a manner that is sensitive to the unique linguistic and cultural needs of the Hispanic and Latino at-risk populations and involve access to care issues. The three priorities chosen are:

4. Preventive Care:
  - Reducing the prevalence of obesity; and
  - Providing routine dental care.
5. Prenatal Care:
  - Increasing the utilization of prenatal care with a particular emphasis on the disproportionately high rate of adolescent pregnancies in the City of Reading.
6. Specialty Care:
  - Improving the availability of specialty care particularly, for the uninsured and under-insured; and
  - Enhancing access to behavioral health services.

### Longer Term Objectives

A more comprehensive and far reaching strategy is required to address the root causes of many disparities discussed in the needs assessment. One approach might be to organize a coalition of community leaders and stakeholders that would examine these issues in greater depth and forge a longer term strategy for ameliorating them. The objectives of such an effort might include, but are not limited to:

- Assessing how community resources might be better coordinated to provide a more effective response to the health disparities identified in the Community Health Needs Assessment;
- Investigating initiatives undertaken by other communities faced with similar challenges;
- Defining the appropriate role of a county public health agency and examining alternative approaches to financing and ensuring the sustainability of such a capability; and



- Exploring how an epidemiological database could be developed drawing on existing public and private resources to better monitor population health and the causes of disparities within the population.

In summary, the overall health status of Berks County residents is good and the majority of residents have access to essential health services. Nonetheless, in the interest of advancing the health of the community further, a concerted effort on the part of community resources is required to address and minimize to the extent feasible the troublesome disparities highlighted in the Community Health Needs Assessment.



## APPENDIX A: U.S. CENSUS TABLES





**Berks County**

**Table 1. Socio-Demographic Indicators of Berks County, U.S. Census**

|                                |                | 2000    |        | 2010    |        | 2013    |        | 2018    |        |
|--------------------------------|----------------|---------|--------|---------|--------|---------|--------|---------|--------|
|                                |                | 373,638 |        | 411,442 |        | 414,193 |        | 418,339 |        |
|                                |                | #       | %      | #       | %      | #       | %      | #       | %      |
| <b>Age</b>                     | 0-17           | 91,909  | (24.6) | 98,136  | (23.9) | 96,516  | (23.3) | 94,880  | (22.7) |
|                                | 18-44          | 140,980 | (37.7) | 141,140 | (34.3) | 140,705 | (34.0) | 140,718 | (33.6) |
|                                | 45-64          | 84,559  | (22.6) | 112,608 | (27.4) | 113,592 | (27.4) | 112,180 | (26.8) |
|                                | 65+            | 56,190  | (15.0) | 59,558  | (14.5) | 63,380  | (15.3) | 70,561  | (16.9) |
| <b>Gender</b>                  | Male           | 182,956 | (49.0) | 201,864 | (49.1) | 203,159 | (49.0) | 205,129 | (49.0) |
|                                | Female         | 190,682 | (51.0) | 209,578 | (50.9) | 211,034 | (51.0) | 213,210 | (51.0) |
| <b>Race/Ethnicity*</b>         | White          | 317,025 | (84.8) | 316,406 | (76.9) | 310,624 | (75.0) | 302,093 | (72.2) |
|                                | Black          | 12,478  | (3.3)  | 16,517  | (4.0)  | 17,267  | (4.2)  | 18,475  | (4.4)  |
|                                | Asian          | 3,713   | (1.0)  | 5,244   | (1.3)  | 5,527   | (1.3)  | 5,904   | (1.4)  |
|                                | Other          | 4,065   | (1.1)  | 5,920   | (1.4)  | 6,323   | (1.5)  | 6,937   | (1.7)  |
|                                | Latino         | 36,357  | (9.7)  | 67,355  | (16.4) | 74,452  | (18.0) | 84,930  | (20.3) |
| <b>Language Spoken at Home</b> | English        | --      | --     | 324,576 | (85.1) | 323,776 | (83.3) | 326,764 | (83.4) |
|                                | Spanish        | --      | --     | 40,504  | (10.6) | 47,785  | (12.3) | 47,940  | (12.2) |
|                                | Asian Language | --      | --     | 2,612   | (0.7)  | 3,165   | (0.8)  | 3,180   | (0.8)  |
|                                | Other          | --      | --     | 13,864  | (3.6)  | 13,865  | (3.6)  | 13,940  | (3.6)  |

\*White, Black, Asian and Other races exclude Latinos.  
 Note: Language spoken at home was not provided by Nielsen-Claritas for 2000.  
 Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**Table 2. Latino Population by Specific Origin of Berks County, U.S. Census**

| Total Population |              | 2000    |       | 2010    |       | 2013    |       | 2018    |        |
|------------------|--------------|---------|-------|---------|-------|---------|-------|---------|--------|
|                  |              | 373,638 |       | 411,442 |       | 414,193 |       | 418,339 |        |
|                  |              | #       | %     | #       | %     | #       | %     | #       | %      |
| Specific Origin  | Cuban        | 385     | (0.1) | 1,423   | (0.3) | 1,378   | (0.3) | 1,571   | (0.4)  |
|                  | Mexican      | 6,562   | (1.8) | 10,027  | (2.4) | 11,812  | (2.9) | 13,399  | (3.2)  |
|                  | Puerto Rican | 22,038  | (5.9) | 32,057  | (7.8) | 40,537  | (9.8) | 46,478  | (11.1) |
|                  | Other        | 7,372   | (2.0) | 16,166  | (3.9) | 20,725  | (5.0) | 23,482  | (5.6)  |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

**Table 3. Population by Detailed Asian Origin of Berks County, U.S. Census**

| Total Population |            | 2000    |       | 2010    |       | 2013    |       | 2018    |       |
|------------------|------------|---------|-------|---------|-------|---------|-------|---------|-------|
|                  |            | 373,638 |       | 411,442 |       | 414,193 |       | 418,339 |       |
|                  |            | #       | %     | #       | %     | #       | %     | #       | %     |
| Asian Origin     | Indian     | 871     | (0.2) | 1,256   | (0.3) | 1,291   | (0.3) | 1,376   | (0.3) |
|                  | Cambodian  | 31      | (0.0) | 45      | (0.0) | 59      | (0.0) | 60      | (0.0) |
|                  | Chinese    | 569     | (0.2) | 796     | (0.2) | 1,527   | (0.4) | 1,642   | (0.4) |
|                  | Filipino   | 325     | (0.1) | 463     | (0.1) | 724     | (0.2) | 774     | (0.2) |
|                  | Hmong      | 45      | (0.0) | 52      | (0.0) | 21      | (0.0) | 25      | (0.0) |
|                  | Japanese   | 155     | (0.0) | 197     | (0.0) | 73      | (0.0) | 73      | (0.0) |
|                  | Korean     | 330     | (0.1) | 470     | (0.1) | 212     | (0.1) | 233     | (0.1) |
|                  | Laotian    | 93      | (0.0) | 117     | (0.0) | 53      | (0.0) | 55      | (0.0) |
|                  | Thai       | 37      | (0.0) | 59      | (0.0) | ND      |       | ND      |       |
|                  | Vietnamese | 1,066   | (0.3) | 1,279   | (0.3) | 1,387   | (0.3) | 1,492   | (0.4) |
|                  | Other      | 263     | (0.1) | 368     | (0.1) | 335     | (0.1) | 352     | (0.1) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

ND=Not Displayed. Percentages are not calculated and displayed when the count is less than 10.



**Table 4. Socio-Economic Indicators of Berks County, U.S. Census**

|                                |  | 2000    |        | 2010    |        | 2013    |        | 2018    |        |
|--------------------------------|--|---------|--------|---------|--------|---------|--------|---------|--------|
|                                |  | 373,638 |        | 411,442 |        | 414,193 |        | 418,339 |        |
|                                |  | #       | %      | #       | %      | #       | %      | #       | %      |
| <b>Education</b>               | Less than HS                             | 54,651  | (22.0) | 46,556  | (17.1) | 42,986  | (15.7) | 43,650  | (15.7) |
|                                | HS graduate                              | 148,202 | (59.6) | 165,193 | (60.5) | 169,624 | (61.9) | 172,689 | (61.9) |
|                                | College or more                          | 46,011  | (18.5) | 61,261  | (22.4) | 61,554  | (22.5) | 62,465  | (22.4) |
| <b>Employment</b>              | Employed                                 | 180,881 | (94.9) | 206,721 | (94.6) | 197,088 | (90.3) | 200,220 | (90.3) |
|                                | Unemployed                               | 9,671   | (5.1)  | 11,879  | (5.4)  | 21,259  | (9.7)  | 21,597  | (9.7)  |
| <b>Poverty Status</b>          | Families living in poverty w/o children  | 1,247   | (2.5)  | 8,544   | (8.0)  | 10,823  | (10.2) | 10,906  | (10.2) |
|                                | Families living in poverty with children | 4,943   | (10.3) | 6,895   | (13.3) | 9,015   | (17.9) | 9,071   | (17.9) |
| <b>Housing Unit Type</b>       | Renter-occupied                          | 36,851  | (26.0) | 43,703  | (28.3) | 43,840  | (28.4) | 44,165  | (28.4) |
|                                | Owner-occupied                           | 104,719 | (74.0) | 110,653 | (71.7) | 110,632 | (71.6) | 111,088 | (71.6) |
| <b>Median Household Income</b> |  | 45,118  |        | 54,775  |        | 51,448  |        | 51,546  |        |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**Reading City**

**Table 5. Socio-Demographic Indicators of Reading City, U.S. Census**

|                                |                | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|--------------------------------|----------------|--------|--------|--------|--------|--------|--------|--------|--------|
|                                |                | 72,472 |        | 78,128 |        | 78,715 |        | 79,673 |        |
|                                |                | #      | %      | #      | %      | #      | %      | #      | %      |
| <b>Age</b>                     | 0-17           | 21,843 | (30.1) | 24,415 | (31.3) | 24,258 | (30.8) | 24,263 | (30.5) |
|                                | 18-44          | 29,398 | (40.6) | 30,729 | (39.3) | 30,648 | (38.9) | 30,541 | (38.3) |
|                                | 45-64          | 12,458 | (17.2) | 15,998 | (20.5) | 16,436 | (20.9) | 16,723 | (21.0) |
|                                | 65+            | 8,773  | (12.1) | 6,986  | (8.9)  | 7,373  | (9.4)  | 8,146  | (10.2) |
| <b>Gender</b>                  | Male           | 35,219 | (48.6) | 38,272 | (49.0) | 38,648 | (49.1) | 39,234 | (49.2) |
|                                | Female         | 37,253 | (51.4) | 39,856 | (51.0) | 40,067 | (50.9) | 40,439 | (50.8) |
| <b>Race/Ethnicity*</b>         | White          | 34,029 | (47.0) | 21,155 | (27.1) | 17,828 | (22.6) | 14,107 | (17.7) |
|                                | Black          | 8,195  | (11.3) | 7,935  | (10.2) | 7,668  | (9.7)  | 7,085  | (8.9)  |
|                                | Asian          | 1,097  | (1.5)  | 845    | (1.1)  | 796    | (1.0)  | 728    | (0.9)  |
|                                | Other          | 1,627  | (2.2)  | 1,617  | (2.1)  | 1,601  | (2.0)  | 1,529  | (1.9)  |
|                                | Latino         | 27,524 | (38.0) | 46,576 | (59.6) | 50,822 | (64.6) | 56,224 | (70.6) |
| <b>Language Spoken at Home</b> | English        | --     | --     | 35,492 | (53.3) | 35,612 | (50.0) | 36,237 | (50.3) |
|                                | Spanish        | --     | --     | 28,257 | (42.5) | 33,031 | (46.4) | 33,176 | (46.1) |
|                                | Asian Language | --     | --     | 856    | (1.3)  | 1,066  | (1.5)  | 1,082  | (1.5)  |
|                                | Other          | --     | --     | 1,934  | (2.9)  | 1,503  | (2.1)  | 1,514  | (2.1)  |

\*White, Black, Asian and Other races exclude Latinos.  
 Note: Language spoken at home was not provided by Nielsen-Claritas for 2000.  
 Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**Table 6. Latino Population by Specific Origin of Reading City, U.S. Census**

| Total Population |              | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|------------------|--------------|--------|--------|--------|--------|--------|--------|--------|--------|
|                  |              | 72,472 |        | 78,128 |        | 78,715 |        | 79,673 |        |
|                  |              | #      | %      | #      | %      | #      | %      | #      | %      |
| Specific Origin  | Cuban        | 195    | (0.3)  | 634    | (0.8)  | 773    | (1.0)  | 836    | (1.0)  |
|                  | Mexican      | 5,398  | (7.4)  | 7,674  | (9.8)  | 8,196  | (10.4) | 8,959  | (11.2) |
|                  | Puerto Rican | 16,809 | (23.2) | 22,926 | (29.3) | 28,007 | (35.6) | 31,182 | (39.1) |
|                  | Other        | 5,122  | (7.1)  | 10,129 | (13.0) | 13,846 | (17.6) | 15,247 | (19.1) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

**Table 7. Population by Detailed Asian Origin of Reading City, U.S. Census**

| Total Population |            | 2000   |       | 2010   |       | 2013   |       | 2018   |       |
|------------------|------------|--------|-------|--------|-------|--------|-------|--------|-------|
|                  |            | 72,472 |       | 78,128 |       | 78,715 |       | 79,673 |       |
|                  |            | #      | %     | #      | %     | #      | %     | #      | %     |
| Asian Origin     | Indian     | 131    | (0.2) | 149    | (0.2) | 74     | (0.1) | 70     | (0.1) |
|                  | Cambodian  | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Chinese    | 91     | (0.1) | 104    | (0.1) | 314    | (0.4) | 299    | (0.4) |
|                  | Filipino   | 46     | (0.1) | 50     | (0.1) | 42     | (0.1) | 45     | (0.1) |
|                  | Hmong      | 25     | (0.0) | 22     | (0.0) | ND     |       | ND     |       |
|                  | Japanese   | 31     | (0.0) | 34     | (0.0) | 28     | (0.0) | 26     | (0.0) |
|                  | Korean     | 47     | (0.1) | 56     | (0.1) | 25     | (0.0) | 23     | (0.0) |
|                  | Laotian    | 36     | (0.0) | 34     | (0.0) | ND     |       | ND     |       |
|                  | Thai       | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Vietnamese | 671    | (0.9) | 722    | (0.9) | 292    | (0.4) | 257    | (0.3) |
|                  | Other      | 69     | (0.1) | 73     | (0.1) | 77     | (0.1) | 68     | (0.1) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

ND=Not Displayed. Percentages are not calculated and displayed when the count is less than 10.



**Table 8. Socio-Economic Indicators of Reading City, U.S. Census**

|                                |  | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|--------------------------------|--|--------|--------|--------|--------|--------|--------|--------|--------|
|                                |  | 72,472 |        | 78,128 |        | 78,715 |        | 79,673 |        |
|                                |  | #      | %      | #      | %      | #      | %      | #      | %      |
| <b>Education</b>               | Less than HS                             | 16,183 | (38.4) | 14,435 | (32.9) | 15,542 | (34.7) | 15,954 | (34.4) |
|                                | HS graduate                              | 22,292 | (52.8) | 24,563 | (56.0) | 24,848 | (55.5) | 25,894 | (55.9) |
|                                | College or more                          | 3,716  | (8.8)  | 4,868  | (11.1) | 4,362  | (9.7)  | 4,511  | (9.7)  |
| <b>Employment</b>              | Employed                                 | 27,832 | (90.5) | 29,150 | (90.0) | 27,438 | (79.0) | 27,851 | (79.0) |
|                                | Unemployed                               | 2,919  | (9.5)  | 3,226  | (10.0) | 7,277  | (21.0) | 7,399  | (21.0) |
| <b>Poverty Status</b>          | Families living in poverty w/o children  | 499    | (8.0)  | 4,399  | (27.6) | 6,172  | (35.8) | 6,162  | (35.3) |
|                                | Families living in poverty with children | 3,087  | (30.5) | 3,853  | (37.2) | 5,532  | (48.9) | 5,511  | (48.3) |
| <b>Housing Unit Type</b>       | Renter-occupied                          | 13,304 | (49.6) | 15,556 | (58.5) | 15,655 | (58.5) | 15,829 | (58.5) |
|                                | Owner-occupied                           | 13,503 | (50.4) | 11,054 | (41.5) | 11,116 | (41.5) | 11,227 | (41.5) |
| <b>Median Household Income</b> |  | 26,783 |        | 29,032 |        | 26,033 |        | 26,051 |        |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**North Berks County**

**Table 9. Socio-Demographic Indicators of North Berks County, U.S. Census**

|                                |                | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|--------------------------------|----------------|--------|--------|--------|--------|--------|--------|--------|--------|
|                                |                | 75,270 |        | 84,437 |        | 85,509 |        | 86,865 |        |
|                                |                | #      | %      | #      | %      | #      | %      | #      | %      |
| <b>Age</b>                     | 0-17           | 15,786 | (21.0) | 16,885 | (20.0) | 16,546 | (19.4) | 16,149 | (18.6) |
|                                | 18-44          | 30,175 | (40.1) | 31,003 | (36.7) | 31,314 | (36.6) | 31,801 | (36.6) |
|                                | 45-64          | 17,281 | (23.0) | 23,511 | (27.8) | 23,785 | (27.8) | 23,421 | (27.0) |
|                                | 65+            | 12,028 | (16.0) | 13,038 | (15.4) | 13,864 | (16.2) | 15,494 | (17.8) |
| <b>Gender</b>                  | Male           | 37,225 | (49.5) | 41,607 | (49.3) | 42,120 | (49.3) | 42,708 | (49.2) |
|                                | Female         | 38,045 | (50.5) | 42,830 | (50.7) | 43,389 | (50.7) | 44,157 | (50.8) |
| <b>Race/Ethnicity*</b>         | White          | 71,084 | (94.4) | 74,555 | (88.3) | 74,180 | (86.8) | 73,046 | (84.1) |
|                                | Black          | 917    | (1.2)  | 2,083  | (2.5)  | 2,408  | (2.8)  | 2,947  | (3.4)  |
|                                | Asian          | 469    | (0.6)  | 756    | (0.9)  | 810    | (0.9)  | 888    | (1.0)  |
|                                | Other          | 521    | (0.7)  | 985    | (1.2)  | 1,091  | (1.3)  | 1,273  | (1.5)  |
|                                | Latino         | 2,279  | (3.0)  | 6,058  | (7.2)  | 7,020  | (8.2)  | 8,711  | (10.0) |
| <b>Language Spoken at Home</b> | English        | --     | --     | 73,468 | (90.7) | 73,809 | (90.7) | 74,905 | (90.7) |
|                                | Spanish        | --     | --     | 3,668  | (4.5)  | 4,142  | (5.1)  | 4,170  | (5.1)  |
|                                | Asian Language | --     | --     | 376    | (0.5)  | 414    | (0.5)  | 415    | (0.5)  |
|                                | Other          | --     | --     | 3,464  | (4.3)  | 3,032  | (3.7)  | 3,072  | (3.7)  |

\*White, Black, Asian and Other races exclude Latinos.

Note: Language spoken at home was not provided by Nielsen-Claritas for 2000.

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**Table 10. Latino Population by Specific Origin of North Berks County, U.S. Census**

| Total Population |              | 2000   |       | 2010   |       | 2013   |       | 2018   |       |
|------------------|--------------|--------|-------|--------|-------|--------|-------|--------|-------|
|                  |              | 75,270 |       | 84,437 |       | 85,509 |       | 86,865 |       |
|                  |              | #      | %     | #      | %     | #      | %     | #      | %     |
| Specific Origin  | Cuban        | 42     | (0.1) | 162    | (0.2) | 64     | (0.1) | 75     | (0.1) |
|                  | Mexican      | 531    | (0.7) | 1,127  | (1.3) | 1,710  | (2.0) | 2,142  | (2.5) |
|                  | Puerto Rican | 911    | (1.2) | 1,787  | (2.1) | 3,423  | (4.0) | 4,234  | (4.9) |
|                  | Other        | 795    | (1.1) | 2,130  | (2.5) | 1,823  | (2.1) | 2,260  | (2.6) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

**Table 11. Population by Detailed Asian Origin of North Berks County, U.S. Census**

| Total Population |            | 2000   |       | 2010   |       | 2013   |       | 2018   |       |
|------------------|------------|--------|-------|--------|-------|--------|-------|--------|-------|
|                  |            | 75,270 |       | 84,437 |       | 85,509 |       | 86,865 |       |
|                  |            | #      | %     | #      | %     | #      | %     | #      | %     |
| Asian Origin     | Indian     | 91     | (0.1) | 144    | (0.2) | 98     | (0.1) | 107    | (0.1) |
|                  | Cambodian  | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Chinese    | 95     | (0.1) | 146    | (0.2) | 255    | (0.3) | 270    | (0.3) |
|                  | Filipino   | 44     | (0.1) | 65     | (0.1) | 63     | (0.1) | 66     | (0.1) |
|                  | Hmong      | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Japanese   | 24     | (0.0) | 34     | (0.0) | ND     |       | ND     |       |
|                  | Korean     | 48     | (0.1) | 64     | (0.1) | 30     | (0.0) | 31     | (0.0) |
|                  | Laotian    | ND     |       | ND     |       | 45     | (0.1) | 47     | (0.1) |
|                  | Thai       | ND     |       | 17     | (0.0) | ND     |       | ND     |       |
|                  | Vietnamese | 98     | (0.1) | 157    | (0.2) | 275    | (0.3) | 319    | (0.4) |
|                  | Other      | 59     | (0.1) | 100    | (0.1) | 53     | (0.1) | 57     | (0.1) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

ND=Not Displayed. Percentages are not calculated and displayed when the count is less than 10.





**Table 12. Socio-Economic Indicators of North Berks County, U.S. Census**

|                                |  | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|--------------------------------|--|--------|--------|--------|--------|--------|--------|--------|--------|
|                                |  | 75,270 |        | 84,437 |        | 85,509 |        | 86,865 |        |
|                                |  | #      | %      | #      | %      | #      | %      | #      | %      |
| <b>Education</b>               | Less than HS                             | 11,016 | (21.8) | 9,450  | (16.4) | 8,120  | (14.4) | 8,245  | (14.3) |
|                                | HS graduate                              | 30,774 | (61.0) | 35,665 | (62.0) | 37,241 | (66.2) | 38,136 | (66.2) |
|                                | College or more                          | 8,628  | (17.1) | 12,439 | (21.6) | 10,924 | (19.4) | 11,235 | (19.5) |
| <b>Employment</b>              | Employed                                 | 37,458 | (93.4) | 44,329 | (92.5) | 42,371 | (91.3) | 43,296 | (91.3) |
|                                | Unemployed                               | 2,649  | (6.6)  | 3,616  | (7.5)  | 4,023  | (8.7)  | 4,116  | (8.7)  |
| <b>Poverty Status</b>          | Families living in poverty w/o children  | 258    | (2.4)  | 983    | (4.5)  | 1,262  | (5.9)  | 1,281  | (5.9)  |
|                                | Families living in poverty with children | 350    | (4.1)  | 596    | (6.1)  | 955    | (10.6) | 978    | (10.8) |
| <b>Housing Unit Type</b>       | Renter-occupied                          | 5,211  | (19.1) | 6,627  | (21.4) | 6,615  | (21.4) | 6,623  | (21.3) |
|                                | Owner-occupied                           | 22,104 | (80.9) | 24,350 | (78.6) | 24,366 | (78.6) | 24,513 | (78.7) |
| <b>Median Household Income</b> |  | 48,032 |        | 59,907 |        | 54,438 |        | 54,597 |        |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**South Berks County**

**Table 13. Socio-Demographic Indicators of South Berks County, U.S. Census**

|                                |                | 2000    |        | 2010    |        | 2013    |        | 2018    |        |
|--------------------------------|----------------|---------|--------|---------|--------|---------|--------|---------|--------|
|                                |                | 107,683 |        | 122,016 |        | 122,829 |        | 124,135 |        |
|                                |                | #       | %      | #       | %      | #       | %      | #       | %      |
| <b>Age</b>                     | 0-17           | 26,125  | (24.3) | 29,179  | (23.9) | 28,790  | (23.4) | 28,364  | (22.8) |
|                                | 18-44          | 39,089  | (36.3) | 39,857  | (32.7) | 39,530  | (32.2) | 39,210  | (31.6) |
|                                | 45-64          | 25,770  | (23.9) | 34,469  | (28.2) | 34,778  | (28.3) | 34,566  | (27.8) |
|                                | 65+            | 16,699  | (15.5) | 18,511  | (15.2) | 19,731  | (16.1) | 21,995  | (17.7) |
| <b>Gender</b>                  | Male           | 52,312  | (48.6) | 59,422  | (48.7) | 59,769  | (48.7) | 60,346  | (48.6) |
|                                | Female         | 55,371  | (51.4) | 62,594  | (51.3) | 63,060  | (51.3) | 63,789  | (51.4) |
| <b>Race/Ethnicity*</b>         | White          | 98,901  | (91.8) | 104,831 | (85.9) | 103,792 | (84.5) | 101,933 | (82.1) |
|                                | Black          | 1,985   | (1.8)  | 3,783   | (3.1)  | 4,150   | (3.4)  | 4,787   | (3.9)  |
|                                | Asian          | 1,063   | (1.0)  | 1,739   | (1.4)  | 1,865   | (1.5)  | 2,034   | (1.6)  |
|                                | Other          | 1,134   | (1.1)  | 1,869   | (1.5)  | 2,033   | (1.7)  | 2,300   | (1.9)  |
|                                | Latino         | 4,600   | (4.3)  | 9,794   | (8.0)  | 10,989  | (8.9)  | 13,081  | (10.5) |
| <b>Language Spoken at Home</b> | English        | --      | --     | 102,035 | (90.9) | 103,315 | (89.5) | 104,346 | (89.6) |
|                                | Spanish        | --      | --     | 5,263   | (4.7)  | 7,275   | (6.3)  | 7,250   | (6.2)  |
|                                | Asian Language | --      | --     | 690     | (0.6)  | 1,101   | (1.0)  | 1,094   | (0.9)  |
|                                | Other          | --      | --     | 4,255   | (3.8)  | 3,806   | (3.3)  | 3,829   | (3.3)  |

\*White, Black, Asian and Other races exclude Latinos.

Note: Language spoken at home was not provided by Nielsen-Claritas for 2000.

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**Table 14. Latino Population by Specific Origin of South Berks County, U.S. Census**

| Total Population |              | 2000    |       | 2010    |       | 2013    |       | 2018    |       |
|------------------|--------------|---------|-------|---------|-------|---------|-------|---------|-------|
|                  |              | 107,683 |       | 122,016 |       | 122,829 |       | 124,135 |       |
|                  |              | #       | %     | #       | %     | #       | %     | #       | %     |
| Specific Origin  | Cuban        | 105     | (0.1) | 424     | (0.3) | 131     | (0.1) | 156     | (0.1) |
|                  | Mexican      | 276     | (0.3) | 547     | (0.4) | 1,035   | (0.8) | 1,236   | (1.0) |
|                  | Puerto Rican | 3,342   | (3.1) | 5,345   | (4.4) | 6,709   | (5.5) | 8,075   | (6.5) |
|                  | Other        | 877     | (0.8) | 2,231   | (1.8) | 3,114   | (2.5) | 3,614   | (2.9) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

**Table 15. Population by Detailed Asian Origin of South Berks County, U.S. Census**

| Total Population |            | 2000    |       | 2010    |       | 2013    |       | 2018    |       |
|------------------|------------|---------|-------|---------|-------|---------|-------|---------|-------|
|                  |            | 107,683 |       | 122,016 |       | 122,829 |       | 124,135 |       |
|                  |            | #       | %     | #       | %     | #       | %     | #       | %     |
| Asian Origin     | Indian     | 278     | (0.3) | 416     | (0.3) | 342     | (0.3) | 360     | (0.3) |
|                  | Cambodian  | ND      |       | 17      | (0.0) | 48      | (0.0) | 47      | (0.0) |
|                  | Chinese    | 164     | (0.2) | 232     | (0.2) | 520     | (0.4) | 588     | (0.5) |
|                  | Filipino   | 129     | (0.1) | 195     | (0.2) | 317     | (0.3) | 334     | (0.3) |
|                  | Hmong      | 15      | (0.0) | 22      | (0.0) | 18      | (0.0) | 17      | (0.0) |
|                  | Japanese   | 49      | (0.0) | 65      | (0.1) | 16      | (0.0) | 16      | (0.0) |
|                  | Korean     | 111     | (0.1) | 168     | (0.1) | 111     | (0.1) | 120     | (0.1) |
|                  | Laotian    | 48      | (0.0) | 69      | (0.1) | ND      |       | ND      |       |
|                  | Thai       | 13      | (0.0) | 21      | (0.0) | ND      |       | ND      |       |
|                  | Vietnamese | 192     | (0.2) | 255     | (0.2) | 412     | (0.3) | 465     | (0.4) |
|                  | Other      | 59      | (0.1) | 90      | (0.1) | 119     | (0.1) | 131     | (0.1) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

ND=Not Displayed. Percentages are not calculated and displayed when the count is less than 10.



**Table 16. Socio-Economic Indicators of South Berks County, U.S. Census**

|                                |   | 2000    |        | 2010    |        | 2013    |        | 2018    |        |
|--------------------------------|---|---------|--------|---------|--------|---------|--------|---------|--------|
|                                |   | 107,683 |        | 122,016 |        | 122,829 |        | 124,135 |        |
|                                |   | #       | %      | #       | %      | #       | %      | #       | %      |
| <b>Education</b>               | Less than HS                                | 13,098  | (17.6) | 10,929  | (13.3) | 8,843   | (10.5) | 8,916   | (10.5) |
|                                | HS graduate                                 | 45,405  | (61.1) | 50,454  | (61.4) | 51,226  | (61.1) | 51,832  | (61.1) |
|                                | College or more                             | 15,757  | (21.2) | 20,844  | (25.3) | 23,827  | (28.4) | 24,126  | (28.4) |
| <b>Employment</b>              | Employed                                    | 54,909  | (96.8) | 63,586  | (96.6) | 62,722  | (92.6) | 63,821  | (92.6) |
|                                | Unemployed                                  | 1,819   | (3.2)  | 2,228   | (3.4)  | 5,018   | (7.4)  | 5,083   | (7.4)  |
| <b>Poverty Status</b>          | Families living below poverty w/o children  | 238     | (1.5)  | 1,851   | (5.6)  | 2,050   | (6.2)  | 2,094   | (6.3)  |
|                                | Families living below poverty with children | 1,074   | (7.6)  | 1,507   | (9.7)  | 1,588   | (10.3) | 1,623   | (10.5) |
| <b>Housing Unit Type</b>       | Renter-occupied                             | 9,317   | (22.1) | 10,744  | (22.9) | 10,755  | (22.9) | 10,805  | (22.9) |
|                                | Owner-occupied                              | 32,771  | (77.9) | 36,176  | (77.1) | 36,180  | (77.1) | 36,406  | (77.1) |
| <b>Median Household Income</b> |   | 49,890  |        | 60,411  |        | 60,234  |        | 60,640  |        |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**East Berks County**

**Table 17. Socio-Demographic Indicators of East Berks County, U.S. Census**

|                                |                | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|--------------------------------|----------------|--------|--------|--------|--------|--------|--------|--------|--------|
|                                |                | 52,468 |        | 53,429 |        | 53,199 |        | 52,941 |        |
|                                |                | #      | %      | #      | %      | #      | %      | #      | %      |
| <b>Age</b>                     | 0-17           | 12,908 | (24.6) | 11,465 | (21.5) | 11,047 | (20.8) | 10,528 | (19.9) |
|                                | 18-44          | 19,331 | (36.8) | 16,296 | (30.5) | 15,940 | (30.0) | 15,724 | (29.7) |
|                                | 45-64          | 13,032 | (24.8) | 17,131 | (32.1) | 17,100 | (32.1) | 16,548 | (31.3) |
|                                | 65+            | 7,197  | (13.7) | 8,537  | (16.0) | 9,112  | (17.1) | 10,141 | (19.2) |
| <b>Gender</b>                  | Male           | 26,076 | (49.7) | 26,487 | (49.6) | 26,344 | (49.5) | 26,138 | (49.4) |
|                                | Female         | 26,392 | (50.3) | 26,942 | (50.4) | 26,855 | (50.5) | 26,803 | (50.6) |
| <b>Race/Ethnicity*</b>         | White          | 51,139 | (97.5) | 51,365 | (96.1) | 50,963 | (95.8) | 50,375 | (95.2) |
|                                | Black          | 430    | (0.8)  | 369    | (0.7)  | 361    | (0.7)  | 377    | (0.7)  |
|                                | Asian          | 159    | (0.3)  | 287    | (0.5)  | 311    | (0.6)  | 340    | (0.6)  |
|                                | Other          | 278    | (0.5)  | 498    | (0.9)  | 555    | (1.0)  | 636    | (1.2)  |
|                                | Latino         | 462    | (0.9)  | 910    | (1.7)  | 1,009  | (1.9)  | 1,213  | (2.3)  |
| <b>Language Spoken at Home</b> | English        | --     | --     | 49,137 | (93.9) | 48,231 | (95.5) | 47,912 | (95.5) |
|                                | Spanish        | --     | --     | 999    | (1.9)  | 599    | (1.2)  | 595    | (1.2)  |
|                                | Asian Language | --     | --     | 161    | (0.3)  | 63     | (0.1)  | 61     | (0.1)  |
|                                | Other          | --     | --     | 2,007  | (3.8)  | 1,613  | (3.2)  | 1,597  | (3.2)  |

\*White, Black, Asian and Other races exclude Latinos.

Note: Language spoken at home was not provided by Nielsen-Claritas for 2000.

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**Table 18. Latino Population by Specific Origin of East Berks County, U.S. Census**

| Total Population |              | 2000   |       | 2010   |       | 2013   |       | 2018   |       |
|------------------|--------------|--------|-------|--------|-------|--------|-------|--------|-------|
|                  |              | 52,468 |       | 53,429 |       | 53,199 |       | 52,941 |       |
|                  |              | #      | %     | #      | %     | #      | %     | #      | %     |
| Specific Origin  | Cuban        | 19     | (0.0) | 67     | (0.1) | 162    | (0.3) | 196    | (0.4) |
|                  | Mexican      | 129    | (0.2) | 248    | (0.5) | 194    | (0.4) | 233    | (0.4) |
|                  | Puerto Rican | 200    | (0.4) | 366    | (0.7) | 419    | (0.8) | 501    | (0.9) |
|                  | Other        | 114    | (0.2) | 295    | (0.6) | 234    | (0.4) | 283    | (0.5) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

**Table 19. Population by Detailed Asian Origin of East Berks County, U.S. Census**

| Total Population |            | 2000   |       | 2010   |       | 2013   |       | 2018   |       |
|------------------|------------|--------|-------|--------|-------|--------|-------|--------|-------|
|                  |            | 52,468 |       | 53,429 |       | 53,199 |       | 52,941 |       |
|                  |            | #      | %     | #      | %     | #      | %     | #      | %     |
| Asian Origin     | Indian     | 17     | (0.0) | 22     | (0.0) | 39     | (0.1) | 45     | (0.1) |
|                  | Cambodian  | ND     |       | 12     | (0.0) | ND     |       | ND     |       |
|                  | Chinese    | 30     | (0.1) | 45     | (0.1) | 80     | (0.2) | 88     | (0.2) |
|                  | Filipino   | 31     | (0.1) | 47     | (0.1) | 43     | (0.1) | 41     | (0.1) |
|                  | Hmong      | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Japanese   | ND     |       | 11     | (0.0) | 26     | (0.0) | 28     | (0.1) |
|                  | Korean     | 33     | (0.1) | 47     | (0.1) | 26     | (0.0) | 32     | (0.1) |
|                  | Laotian    | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Thai       | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Vietnamese | 16     | (0.0) | 22     | (0.0) | 28     | (0.1) | 31     | (0.1) |
|                  | Other      | 11     | (0.0) | 15     | (0.0) | 71     | (0.1) | 77     | (0.1) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

ND=Not Displayed. Percentages are not calculated and displayed when the count is less than 10.



**Table 20. Socio-Economic Indicators of East Berks County, U.S. Census**

|                                |   | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|--------------------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|
|                                |   | 52,468 |        | 53,429 |        | 53,199 |        | 52,941 |        |
|                                |   | #      | %      | #      | %      | #      | %      | #      | %      |
| <b>Education</b>               | Less than HS                                | 7,067  | (19.6) | 5,573  | (14.5) | 4,845  | (12.8) | 4,845  | (12.7) |
|                                | HS graduate                                 | 22,771 | (63.2) | 24,582 | (64.1) | 24,576 | (64.8) | 24,624 | (64.8) |
|                                | College or more                             | 6,171  | (17.1) | 8,176  | (21.3) | 8,531  | (22.5) | 8,552  | (22.5) |
| <b>Employment</b>              | Employed                                    | 28,004 | (97.2) | 31,141 | (97.0) | 28,089 | (92.6) | 28,214 | (92.6) |
|                                | Unemployed                                  | 812    | (2.8)  | 958    | (3.0)  | 2,241  | (7.4)  | 2,247  | (7.4)  |
| <b>Poverty Status</b>          | Families living below poverty w/o children  | 154    | (2.0)  | 558    | (3.6)  | 440    | (2.9)  | 459    | (3.1)  |
|                                | Families living below poverty with children | 196    | (2.8)  | 335    | (4.6)  | 244    | (3.9)  | 260    | (4.2)  |
| <b>Housing Unit Type</b>       | Renter-occupied                             | 3,697  | (18.6) | 4,265  | (20.2) | 4,249  | (20.2) | 4,234  | (20.2) |
|                                | Owner-occupied                              | 16,162 | (81.4) | 16,836 | (79.8) | 16,766 | (79.8) | 16,686 | (79.8) |
| <b>Median Household Income</b> |   | 51,556 |        | 64,298 |        | 61,122 |        | 61,501 |        |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



**West Berks County**

**Table 21. Socio-Demographic Indicators of West Berks County, U.S. Census**

|                                |                | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|--------------------------------|----------------|--------|--------|--------|--------|--------|--------|--------|--------|
|                                |                | 69,305 |        | 77,806 |        | 78,595 |        | 79,767 |        |
|                                |                | #      | %      | #      | %      | #      | %      | #      | %      |
| <b>Age</b>                     | 0-17           | 16,236 | (23.4) | 17,364 | (22.3) | 17,036 | (21.7) | 16,664 | (20.9) |
|                                | 18-44          | 24,039 | (34.7) | 24,319 | (31.3) | 24,427 | (31.1) | 24,771 | (31.1) |
|                                | 45-64          | 16,997 | (24.5) | 22,768 | (29.3) | 22,907 | (29.1) | 22,429 | (28.1) |
|                                | 65+            | 12,033 | (17.4) | 13,355 | (17.2) | 14,225 | (18.1) | 15,903 | (19.9) |
| <b>Gender</b>                  | Male           | 33,886 | (48.9) | 38,163 | (49.0) | 38,534 | (49.0) | 39,085 | (49.0) |
|                                | Female         | 35,419 | (51.1) | 39,643 | (51.0) | 40,061 | (51.0) | 40,682 | (51.0) |
| <b>Race/Ethnicity*</b>         | White          | 65,389 | (94.3) | 68,758 | (88.4) | 68,363 | (87.0) | 67,484 | (84.6) |
|                                | Black          | 957    | (1.4)  | 2,336  | (3.0)  | 2,670  | (3.4)  | 3,265  | (4.1)  |
|                                | Asian          | 946    | (1.4)  | 1,683  | (2.2)  | 1,819  | (2.3)  | 2,008  | (2.5)  |
|                                | Other          | 550    | (0.8)  | 996    | (1.3)  | 1,099  | (1.4)  | 1,253  | (1.6)  |
|                                | Latino         | 1,463  | (2.1)  | 4,033  | (5.2)  | 4,644  | (5.9)  | 5,757  | (7.2)  |
| <b>Language Spoken at Home</b> | English        | --     | --     | 67,763 | (92.2) | 66,875 | (89.9) | 67,753 | (89.9) |
|                                | Spanish        | --     | --     | 2,362  | (3.2)  | 2,712  | (3.6)  | 2,733  | (3.6)  |
|                                | Asian Language | --     | --     | 575    | (0.8)  | 667    | (0.9)  | 669    | (0.9)  |
|                                | Other          | --     | --     | 2,780  | (3.8)  | 4,162  | (5.6)  | 4,203  | (5.6)  |

\*White, Black, Asian and Other races exclude Latinos.

Note: Language spoken at home was not provided by Nielsen-Claritas for 2000.

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.





**Table 22. Latino Population by Specific Origin of West Berks County, U.S. Census**

| Total Population |              | 2000   |       | 2010   |       | 2013   |       | 2018   |       |
|------------------|--------------|--------|-------|--------|-------|--------|-------|--------|-------|
|                  |              | 69,305 |       | 77,806 |       | 78,595 |       | 79,767 |       |
|                  |              | #      | %     | #      | %     | #      | %     | #      | %     |
| Specific Origin  | Cuban        | 32     | (0.0) | 136    | (0.2) | 253    | (0.3) | 314    | (0.4) |
|                  | Mexican      | 201    | (0.3) | 391    | (0.5) | 694    | (0.9) | 857    | (1.1) |
|                  | Puerto Rican | 770    | (1.1) | 1,609  | (2.1) | 1,982  | (2.5) | 2,499  | (3.1) |
|                  | Other        | 460    | (0.7) | 1,353  | (1.7) | 1,715  | (2.2) | 2,087  | (2.6) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

**Table 23. Population by Detailed Asian Origin of West Berks County, U.S. Census**

| Total Population |            | 2000   |       | 2010   |       | 2013   |       | 2018   |       |
|------------------|------------|--------|-------|--------|-------|--------|-------|--------|-------|
|                  |            | 69,305 |       | 77,806 |       | 78,595 |       | 79,767 |       |
|                  |            | #      | %     | #      | %     | #      | %     | #      | %     |
| Asian Origin     | Indian     | 356    | (0.5) | 524    | (0.7) | 752    | (1.0) | 814    | (1.0) |
|                  | Cambodian  | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Chinese    | 195    | (0.3) | 277    | (0.4) | 386    | (0.5) | 429    | (0.5) |
|                  | Filipino   | 74     | (0.1) | 111    | (0.1) | 258    | (0.3) | 289    | (0.4) |
|                  | Hmong      | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Japanese   | 45     | (0.1) | 53     | (0.1) | 1      | (0.0) | 1      | (0.0) |
|                  | Korean     | 97     | (0.1) | 141    | (0.2) | 24     | (0.0) | 27     | (0.0) |
|                  | Laotian    | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Thai       | ND     |       | ND     |       | ND     |       | ND     |       |
|                  | Vietnamese | 95     | (0.1) | 134    | (0.2) | 386    | (0.5) | 432    | (0.5) |
|                  | Other      | 64     | (0.1) | 90     | (0.1) | 30     | (0.0) | 36     | (0.0) |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.

ND=Not Displayed. Percentages are not calculated and displayed when the count is less than 10.



**Table 24. Socio-Economic Indicators of West Berks County, U.S. Census**

|                                |   | 2000   |        | 2010   |        | 2013   |        | 2018   |        |
|--------------------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|
|                                |   | 69,305 |        | 77,806 |        | 78,595 |        | 79,767 |        |
|                                |   | #      | %      | #      | %      | #      | %      | #      | %      |
| <b>Total Population</b>        | Less than HS                                | 7,278  | (15.1) | 6,092  | (11.3) | 5,760  | (10.6) | 5,850  | (10.6) |
|                                | HS graduate                                 | 28,215 | (58.5) | 31,448 | (58.3) | 33,153 | (60.9) | 33,836 | (61.1) |
|                                | College or more                             | 12,749 | (26.4) | 16,383 | (30.4) | 15,481 | (28.5) | 15,702 | (28.3) |
| <b>Employment</b>              | Employed                                    | 34,557 | (95.8) | 40,684 | (95.5) | 38,788 | (93.1) | 39,656 | (93.0) |
|                                | Unemployed                                  | 1,523  | (4.2)  | 1,897  | (4.5)  | 2,896  | (6.9)  | 2,966  | (7.0)  |
| <b>Poverty Status</b>          | Families living below poverty w/o children  | 104    | (1.0)  | 797    | (3.7)  | 907    | (4.3)  | 936    | (4.4)  |
|                                | Families living below poverty with children | 329    | (3.8)  | 622    | (6.4)  | 694    | (7.7)  | 713    | (7.8)  |
| <b>Housing Unit Type</b>       | Renter-occupied                             | 5,580  | (20.8) | 6,785  | (22.4) | 6,856  | (22.5) | 6,993  | (22.7) |
|                                | Owner-occupied                              | 21,212 | (79.2) | 23,512 | (77.6) | 23,573 | (77.5) | 23,746 | (77.3) |
| <b>Median Household Income</b> |   | 53,864 |        | 64,080 |        | 60,172 |        | 60,279 |        |

Source: Nielsen-Claritas Pop-Facts Database and 2010 U.S. Census.



## APPENDIX B: VITAL STATISTICS TABLES



**Table 1: Average Annualized Birth Rates for Women 15-44 Years by Race and Ethnicity, 2005-2008**

| Race/Ethnicity | Reading          | North         | South           | East          | West          | County           | State             |
|----------------|------------------|---------------|-----------------|---------------|---------------|------------------|-------------------|
| Total          | 98.0<br>(1,688)  | 42.6<br>(712) | 61.3<br>(1,382) | 47.6<br>(462) | 57.7<br>(785) | 64.2<br>(5,098)  | 58.7<br>(144,233) |
| White          | 73.4<br>(597)    | 42.0<br>(646) | 58.8<br>(1,179) | 47.6<br>(450) | 56.7<br>(696) | 54.9<br>(3,638)  | 52.6<br>(105,608) |
| Black          | 88.1<br>(200)    | 35.5<br>(15)  | 67.6<br>(52)    | ND            | 59.2<br>(28)  | 83.9<br>(297)    | 74.6<br>(21,237)  |
| Asian          | 99.1<br>(28)     | ND            | 70.9<br>(27)    | ND            | 74.6<br>(26)  | 90.6<br>(92)     | 78.8<br>(5,298)   |
| Other          | 77.6<br>(508)    | 29.7<br>(21)  | 44.6<br>(60)    | ND            | 38.7<br>(19)  | 70.6<br>(611)    | 92.6<br>(8,810)   |
| Latina*        | 118.1<br>(1,134) | 53.4<br>(59)  | 84.3<br>(166)   | 65.5<br>(10)  | 62.3<br>(47)  | 119.8<br>(1,416) | 110.0<br>(13,040) |
| Non-Latina     | 69.2<br>(527)    | 41.6<br>(650) | 58.5<br>(1,203) | 46.9<br>(448) | 57.1<br>(732) | 53.7<br>(3,630)  | 55.4<br>(129,559) |

Notes:

The birth rate is calculated per 1,000 women 15-44 years of age.

White, Black, Asian and Other races include Latinas.

\*Latina birth rate for Berks County subareas does not total the County Latina birth rate because some subarea Zip codes include Latina women in Lehigh and Chester Counties, increasing the denominator.

ND=Not Displayed. Rates are not calculated and displayed when the count is less than 10.

Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.

**Table 2: Average Annualized Birth Rates for Adolescent Women 10-17 Years, 2005-2008**

|  | Reading       | North       | South       | East | West        | County       | State          |
|--|---------------|-------------|-------------|------|-------------|--------------|----------------|
|  | 28.1<br>(134) | 3.5<br>(14) | 5.1<br>(33) | ND   | 2.8<br>(11) | 9.4<br>(198) | 6.9<br>(4,427) |

Notes:

The birth rate is calculated per 1,000 women 10-17 years of age.

ND=Not Displayed. Rates are not calculated and displayed when the count is less than 10. Racial and ethnic rates are not calculated and displayed for each service area due a count of less than 10.

Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.



**Table 3: Average Annualized Percentage of Women Receiving Late or No Pre-Natal Care by Area, Race, and Ethnicity, 2005-2008**

| Race/Ethnicity | Reading       | North         | South         | East          | West          | County          | State            |
|----------------|---------------|---------------|---------------|---------------|---------------|-----------------|------------------|
| Total          | 50.1<br>(821) | 24.7<br>(172) | 24.0<br>(327) | 24.8<br>(112) | 23.0<br>(177) | 32.8<br>(1,634) | 29.4<br>(40,227) |
| White          | 45.6<br>(263) | 23.2<br>(146) | 21.9<br>(254) | 24.6<br>(108) | 21.8<br>(149) | 26.6<br>(944)   | 24.0<br>(24,458) |
| Black          | 52.7<br>(102) | ND            | 41.9<br>(21)  | ND            | ND            | 48.7<br>(140)   | 47.5<br>(9,051)  |
| Asian          | 45.5<br>(13)  | ND            | ND            | ND            | ND            | 30.0<br>(27)    | 32.7<br>(1,604)  |
| Other          | 57.3<br>(283) | ND            | 37.2<br>(22)  | ND            | ND            | 54.3<br>(324)   | 45.9<br>(3,753)  |
| Latina         | 52.0<br>(575) | 37.9<br>(22)  | 37.7<br>(62)  | ND            | 36.2<br>(17)  | 49.1<br>(680)   | 45.4<br>(5,524)  |
| Non-Latina     | 45.8<br>(233) | 23.4<br>(148) | 21.9<br>(260) | 24.7<br>(108) | 22.1<br>(159) | 26.3<br>(933)   | 27.6<br>(33,988) |

Notes:

White, Black, Asian and Other races include Latinas.

ND=Not Displayed. Percents are not calculated and displayed when the count is less than 10.

Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.

**Table 4: Average Annualized Percentage of Infants Born at Low Birth Weight by Berks County Area, 2005-2008**

|  | Reading      | North       | South       | East        | West        | County       | State           |
|--|--------------|-------------|-------------|-------------|-------------|--------------|-----------------|
|  | 8.8<br>(150) | 8.4<br>(60) | 6.9<br>(96) | 7.3<br>(34) | 6.3<br>(49) | 7.7<br>(392) | 8.3<br>(12,022) |

Notes:

Low birth weight is defined as an infant weighing less than 2500 grams (5.5 lbs.) at birth.

ND=Not Displayed. Rates are not calculated and displayed when the count is less than 10. Racial and ethnic rates are not calculated and displayed for each service area due a count of less than 10.

Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.

**Table 5: Average Annualized Infant Mortality Rate, 2005-2008**

|  | Reading     | North | South | East | West | County      | State        |
|--|-------------|-------|-------|------|------|-------------|--------------|
|  | 5.8<br>(10) | ND    | ND    | ND   | ND   | 4.9<br>(25) | 5.2<br>(751) |

Notes:

Infant mortality is defined as the death of an infant within the first year of birth and is calculated per 1,000 live infant births.

ND=Not Displayed. Rates are not calculated and displayed when the count is less than 10. Racial and ethnic rates are not calculated and displayed for each service area due a count of less than 10.

Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.



**Table 6: Average Annualized Mortality Rates, 2005-2008**

|                       | <b>Reading</b> | <b>North</b>   | <b>South</b>     | <b>East</b>    | <b>West</b>    | <b>County</b>    | <b>State</b>       |
|-----------------------|----------------|----------------|------------------|----------------|----------------|------------------|--------------------|
| All Causes            | 929.6<br>(601) | 692.0<br>(709) | 699.6<br>(1,021) | 720.1<br>(464) | 639.5<br>(687) | 731.3<br>(3,514) | 785.2<br>(124,136) |
| All Cancer            | 184.7<br>(117) | 170.5<br>(172) | 163.8<br>(235)   | 175.5<br>(115) | 170.1<br>(174) | 175.1<br>(818)   | 184.7<br>(28,616)  |
| Female Breast Cancer  | 27.3<br>(10)   | 23.2<br>(13)   | 25.5<br>(21)     | ND             | 23.5<br>(13)   | 24.5<br>(65)     | 23.9<br>(2,082)    |
| Lung Cancer           | 54.2<br>(34)   | 49.9<br>(50)   | 42.6<br>(61)     | 50.5<br>(33)   | 39.0<br>(40)   | 46.7<br>(217)    | 50.9<br>(7,852)    |
| Colorectal Cancer     | 19.4<br>(12)   | 15.7<br>(16)   | 15.1<br>(22)     | 15.1<br>(10)   | 21.3<br>(22)   | 17.6<br>(83)     | 17.8<br>(2,802)    |
| Prostate cancer       | ND             | ND             | 7.6<br>(11)      | ND             | ND             | 6.7<br>(33)      | 8.9<br>(1,448)     |
| Heart Disease         | 241.5<br>(154) | 176.5<br>(186) | 188.5<br>(283)   | 188.9<br>(124) | 164.0<br>(183) | 189.3<br>(940)   | 203.2<br>(33,297)  |
| Stroke                | 59.0<br>(38)   | 53.6<br>(58)   | 47.3<br>(71)     | 42.7<br>(28)   | 50.8<br>(60)   | 50.7<br>(255)    | 42.5<br>(7,017)    |
| HIV/AIDS              | ND             | ND             | ND               | ND             | ND             | 2.6<br>(10)      | 2.7<br>(344)       |
| Homicide              | ND             | ND             | ND               | ND             | ND             | 4.0<br>(15)      | 6.1<br>(721)       |
| Suicide               | ND             | 11.0<br>(10)   | 9.6<br>(12)      | ND             | ND             | 10.8<br>(44)     | 10.9<br>(1,404)    |
| Motor Vehicle Crashes | ND             | 15.4<br>(13)   | 11.8<br>(14)     | 19.2<br>(10)   | ND             | 14.0<br>(57)     | 11.2<br>(1,434)    |

Notes:

Mortality rates are calculated per 100,000 population.

ND=Not Displayed. Rates are not calculated and displayed when the count is less than 10.

Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research. Calculations prepared by PHMC.



| <b>Table 7: Currently Living with HIV, including AIDS (2008)<br/>by Gender and Race/Ethnicity</b>   |               |              |
|---|---------------|--------------|
|   | <b>County</b> | <b>State</b> |
| Total number currently living with HIV, including AIDS  | 883           | 30,479       |
| Currently living with HIV, including AIDS (rate per 100,000)*   | 218.7         | 244.9        |
| <b>Gender (percentage)</b>  |               |              |
| Male  | 65%<br>(575)  | N/A          |
| Female  | 35%<br>(308)  | N/A          |
| <b>Race/Ethnicity (percentage)</b>  |               |              |
| White   | 34%<br>(297)  | N/A          |
| Black   | 20%<br>(175)  | N/A          |
| Latino  | 46%<br>(409)  | N/A          |
| Asian   | ND            | N/A          |
| Other   | ND            | N/A          |
| <p>Notes:<br/>           ND=Not Displayed. Percentages are not calculated and displayed when the count is less than 10.<br/>           N/A=Data are not available.<br/>           *Rates calculated by PHMC using HIV prevalence estimates provided by the Pennsylvania Department of Health divided by population estimates from the 2008 American Community Survey.<br/>           Source: Pennsylvania Department of Health, HIV/AIDS Investigations-Bureau of Epidemiology and American Community Survey.</p> |               |              |



**Table 8: Communicable Disease Rates, 2010**

|                      | <b>County</b>    | <b>State</b>      |
|----------------------|------------------|-------------------|
| Hepatitis B, Chronic | 6.6<br>(27)      | 11.6<br>(1,470)   |
| Lyme Disease         | 8.0<br>(33)      | 30.0<br>(3,805)   |
| Pertussis*           | 6.6<br>(123)     | 4.0<br>(1,496)    |
| Varicella*           | 20.7<br>(387)    | 23.1<br>(8,671)   |
| Chlamydia            | 302.6<br>(1,245) | 374.1<br>(47,518) |
| Gonorrhea            | 47.6<br>(196)    | 101.4<br>(12,883) |

Notes:  
Communicable disease rates are calculated per 100,000 population.  
\* Indicates information is from 2007-2009.  
Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research, EpiQMS.





## APPENDIX C: HOUSEHOLD HEALTH SURVEY TABLES



**Table 1: Health Status of Adults 18+**

|                           |  | Reading       |               | East Berks    |               | North Berks   |               | South Berks   |               | West Berks    |               | Berks County   |                |
|---------------------------|--|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|----------------|----------------|
|                           |  | 2008          | 2012          | 2008          | 2012          | 2008          | 2012          | 2008          | 2012          | 2008          | 2012          | 2008           | 2012           |
|                           |  | N (%)         | N (%)         | N (%)         | N (%)         | N (%)         | N (%)         | N (%)         | N (%)         | N (%)         | N (%)         | N (%)          | N (%)          |
| Health Status             | Excellent                                      | 9,700 (20.3)  | 7,300 (13.3)  | 11,000 (28.3) | 5,800 (14.9)  | 20,100 (31.9) | 15,000 (21.1) | 27,600 (31.7) | 22,000 (25.8) | 20,600 (28.0) | 16,900 (25.0) | 89,000 (28.7)  | 67,000 (21.1)  |
|                           | Very Good                                      | N/A           | 9,900 (18.2)  | N/A           | 16,700 (43.1) | N/A           | 25,600 (36.1) | N/A           | 29,800 (35.0) | N/A           | 18,000 (26.6) | N/A            | 100,100 (31.5) |
|                           | Good   | 22,600 (47.3) | 19,200 (35.3) | 19,400 (50.3) | 11,200 (28.8) | 33,600 (53.2) | 20,000 (28.2) | 42,500 (48.8) | 21,500 (25.2) | 42,000 (57.1) | 27,800 (41.0) | 160,100 (51.6) | 99,700 (31.4)  |
|                           | Fair   | 11,500 (24.2) | 15,100 (27.2) | 6,400 (16.6)  | 3,400 (8.7)   | 7,700 (12.3)  | 7,800 (10.9)  | 14,200 (16.3) | 8,900 (10.4)  | 9,800 (13.3)  | 4,000 (6.0)   | 49,700 (16.0)  | 39,100 (12.3)  |
|                           | Poor   | 3,900 (8.2)   | 3,000 (5.4)   | 1,900 (4.8)   | 1,700 (4.5)   | 1,700 (2.6)   | 2,600 (3.6)   | 2,800 (3.3)   | 3,100 (3.6)   | 1,100 (1.6)   | 900 (1.4)     | 11,400 (3.7)   | 11,300 (3.6)   |
| Mental Health             | Diagnosed with mental health condition         | N/A           | 11,600 (21.3) | N/A           | 4,500 (11.6)  | N/A           | 7,600 (10.7)  | N/A           | 12,000 (14.1) | N/A           | 10,500 (15.6) | N/A            | 46,200 (14.6)  |
|                           | Received treatment for mental health condition | N/A           | 6,800 (58.0)  | N/A           | 3,400 (74.1)  | N/A           | 5,500 (72.2)  | N/A           | 6,500 (54.1)  | N/A           | 6,400 (60.7)  | N/A            | 28,400 (61.5)  |
| Body Mass Index           | Overweight                                     | 16,000 (32.9) | 18,500 (35.3) | 14,900 (39.3) | 12,700 (33.9) | 23,700 (37.8) | 25,100 (35.6) | 33,300 (38.7) | 28,800 (35.4) | 21,400 (29.7) | 25,500 (38.7) | 109,200 (35.7) | 110,600 (35.9) |
|                           | Obese  | 16,000 (32.9) | 18,300 (35.0) | 11,000 (29.0) | 11,000 (29.5) | 17,900 (28.5) | 18,400 (26.1) | 21,200 (24.7) | 25,100 (30.8) | 18,000 (25.1) | 20,200 (30.6) | 83,700 (27.4)  | 93,100 (30.2)  |
| Chronic Health Conditions | Ever had cancer                                | N/A           | 3,300 (6.1)   | N/A           | 5,400 (14.0)  | N/A           | 5,900 (8.3)   | N/A           | 7,400 (8.7)   | N/A           | 6,200 (9.2)   | N/A            | 28,300 (8.9)   |
|                           | Ever had asthma                                | 11,000 (23.0) | 10,200 (18.7) | 5,900 (15.2)  | 4,400 (11.4)  | 8,200 (13.0)  | 12,500 (17.6) | 12,000 (13.6) | 14,400 (17.0) | 11,500 (15.6) | 7,700 (11.3)  | 48,500 (15.6)  | 49,200 (15.5)  |
|                           | Ever had diabetes                              | 6,900 (14.5)  | 10,300 (18.9) | 6,300 (16.2)  | 6,600 (16.9)  | 7,500 (11.9)  | 9,600 (13.7)  | 7,500 (8.6)   | 11,600 (13.7) | 6,000 (8.2)   | 5,900 (8.8)   | 34,200 (11.0)  | 44,000 (13.9)  |
|                           | Ever had high blood pressure                   | 14,000 (29.3) | 21,800 (40.0) | 12,500 (32.4) | 13,300 (34.6) | 17,000 (27.2) | 21,700 (30.5) | 21,400 (27.2) | 28,100 (33.1) | 21,400 (24.4) | 20,500 (30.8) | 82,900 (26.8)  | 105,400 (33.4) |
|                           | Ever had congestive heart failure              | N/A           | 3,700 (6.7)   | N/A           | 1,300 (3.3)   | N/A           | 3,000 (4.2)   | N/A           | 3,500 (4.1)   | N/A           | 2,600 (3.8)   | N/A            | 14,100 (4.4)   |

Note: N/A = not asked in 2008

Source: PHMC's 2008 and 2012 Berks County Household Health Survey



**Table 2: Health Insurance Status of Adults 18+**

|  | Reading         |                  | East Berks     |                 | North Berks      |                 | South Berks      |                 | West Berks       |                 | Berks County     |                  |
|--|-----------------|------------------|----------------|-----------------|------------------|-----------------|------------------|-----------------|------------------|-----------------|------------------|------------------|
|  | 2008            | 2012             | 2008           | 2012            | 2008             | 2012            | 2008             | 2012            | 2008             | 2012            | 2008             | 2012             |
|  | N (%)           | N (%)            | N (%)          | N (%)           | N (%)            | N (%)           | N (%)            | N (%)           | N (%)            | N (%)           | N (%)            | N (%)            |
| Uninsured (18-64)                                | 9,100<br>(22.7) | 11,100<br>(23.7) | 1,436<br>(4.7) | 4,300<br>(15.2) | 3,200<br>(6.4)   | 4,600<br>(8.3)  | 4,700<br>(6.2)   | 5,700<br>(8.8)  | 3,600<br>(6.2)   | 7,200<br>(13.9) | 22,000<br>(8.7)  | 33,000<br>(13.3) |
| No prescription drug coverage                    | 7,000<br>(18.2) | 6,500<br>(15.1)  | 2,100<br>(5.7) | 3,100<br>(9.6)  | 7,300<br>(12.4)  | 6,600<br>(10.1) | 7,800<br>(9.3)   | 7,500<br>(9.5)  | 6,300<br>(9.2)   | 6,500<br>(10.7) | 30,600<br>(10.7) | 30,200<br>(10.8) |
| No regular source of care                        | 8,600<br>(18.0) | 10,400<br>(18.9) | 2,300<br>(6.1) | 4,600<br>(11.9) | 11,300<br>(17.8) | 8,300<br>(11.7) | 11,300<br>(12.9) | 7,800<br>(9.1)  | 11,000<br>(15.1) | 6,500<br>(9.6)  | 44,600<br>(14.4) | 37,500<br>(11.8) |
| Visited ER in past year due to lack of insurance | N/A             | 4,900<br>(44.1)  | N/A            | 300<br>(8.1)    | N/A              | 800<br>(16.6)   | N/A              | 1,600<br>(27.3) | N/A              | 500<br>(6.8)    | N/A              | 8,100<br>(24.8)  |

Note: N/A = not asked in 2008

Source: PHMC's 2008 and 2012 Berks County Household Health Survey



**Table 3: Cost Barriers to Care**

|                                       | Reading |                  | East Berks |                 | North Berks |                  | South Berks |                  | West Berks |                 | Berks County |                  |
|---------------------------------------|---------|------------------|------------|-----------------|-------------|------------------|-------------|------------------|------------|-----------------|--------------|------------------|
|                                       | 2008    | 2012             | 2008       | 2012            | 2008        | 2012             | 2008        | 2012             | 2008       | 2012            | 2008         | 2012             |
|                                       | N (%)   | N (%)            | N (%)      | N (%)           | N (%)       | N (%)            | N (%)       | N (%)            | N (%)      | N (%)           | N (%)        | N (%)            |
| Did not seek health care due to cost  | N/A     | 10,100<br>(18.5) | N/A        | 4,800<br>(12.5) | N/A         | 7,000<br>(9.8)   | N/A         | 8,600<br>(10.1)  | N/A        | 7,400<br>(11.0) | N/A          | 37,900<br>(12.0) |
| Did not seek dental care due to cost  | N/A     | 18,100<br>(33.2) | N/A        | 8,600<br>(22.2) | N/A         | 14,300<br>(20.2) | N/A         | 16,500<br>(19.3) | N/A        | 9,500<br>(14.0) | N/A          | 67,000<br>(21.1) |
| Did not fill prescription due to cost | N/A     | 12,900<br>(23.7) | N/A        | 2,900<br>(7.4)  | N/A         | 11,000<br>(15.4) | N/A         | 10,600<br>(12.5) | N/A        | 6,000<br>(8.9)  | N/A          | 43,400<br>(13.7) |

Note: N/A = not asked in 2008

Source: PHMC's 2008 and 2012 Berks County Household Health Survey



**Table 4: Personal Health Behaviors of Adults 18+**

|   |                         | Reading          |                  | East Berks       |                  | North Berks      |                  | South Berks      |                  | West Berks       |                  | Berks County      |                   |
|---|-------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-------------------|-------------------|
|   |                         | 2008             | 2012             | 2008             | 2012             | 2008             | 2012             | 2008             | 2012             | 2008             | 2012             | 2008              | 2012              |
|   |                         | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)             | N (%)             |
| Number of fruits and vegetables consumed in normal day    | 0-3 servings            | 40,900<br>(88.3) | 43,300<br>(84.8) | 23,600<br>(63.5) | 26,800<br>(72.3) | 39,700<br>(63.5) | 48,000<br>(69.0) | 56,500<br>(65.9) | 57,300<br>(69.3) | 51,000<br>(71.3) | 45,700<br>(68.3) | 211,800<br>(69.8) | 221,100<br>(71.9) |
|   | 4+ servings             | 5,400<br>(11.7)  | 7,700<br>(15.2)  | 13,600<br>(36.5) | 10,300<br>(27.7) | 22,800<br>(36.5) | 21,600<br>(31.0) | 29,300<br>(34.1) | 25,400<br>(30.7) | 20,500<br>(28.7) | 21,200<br>(31.7) | 91,600<br>(30.2)  | 86,200<br>(28.1)  |
| How many times eaten at fast food restaurant in past week | 1 or more times         | N/A              | 26,800<br>(48.9) | N/A              | 21,800<br>(43.5) | N/A              | 30,900<br>(43.5) | N/A              | 40,800<br>(48.0) | N/A              | 32,200<br>(47.6) | N/A               | 152,600<br>(48.1) |
| Number of times exercised in past month                   | None                    | 9,600<br>(19.9)  | 12,900<br>(23.6) | 4,900<br>(12.7)  | 5,600<br>(15.0)  | 3,900<br>(6.2)   | 9,500<br>(13.4)  | 8,800<br>(10.1)  | 11,100<br>(13.2) | 4,900<br>(6.7)   | 9,900<br>(14.6)  | 32,100<br>(10.3)  | 49,000<br>(15.6)  |
|   | 1-2 days per week       | 15,200<br>(31.7) | 16,800<br>(31.0) | 14,500<br>(37.5) | 13,000<br>(34.9) | 19,500<br>(30.9) | 20,700<br>(29.3) | 23,000<br>(26.3) | 22,100<br>(26.3) | 25,000<br>(34.3) | 19,800<br>(29.2) | 97,300<br>(31.4)  | 92,400<br>(29.4)  |
|   | 3 or more days per week | 23,300<br>(48.4) | 24,700<br>(45.4) | 19,300<br>(49.9) | 18,600<br>(50.1) | 39,600<br>(62.8) | 40,400<br>(57.2) | 55,600<br>(63.6) | 51,000<br>(60.6) | 43,000<br>(59.0) | 38,000<br>(56.2) | 180,800<br>(58.3) | 172,800<br>(55.0) |
| Smokes Cigarettes   |                         | 13,300<br>(27.8) | 15,900<br>(29.3) | 8,300<br>(21.7)  | 7,100<br>(18.5)  | 14,000<br>(22.2) | 13,000<br>(18.5) | 23,900<br>(27.2) | 16,400<br>(19.3) | 17,500<br>(23.8) | 11,900<br>(17.6) | 77,000<br>(24.8)  | 64,500<br>(20.4)  |
| Have tried quitting in past year                          |                         | 6,538<br>(49.2)  | 10,000<br>(62.6) | 3,900<br>(46.5)  | 4,400<br>(62.3)  | 9,100<br>(64.9)  | 9,000<br>(68.9)  | 14,144<br>(59.3) | 8,300<br>(50.5)  | 9,600<br>(55.4)  | 3,200<br>(27.0)  | 43,200<br>(56.3)  | 34,900<br>(54.3)  |
| Number of days consumed 5 or more drinks in past month    | 1 or more days          | N/A              | 7,500<br>(47.9)  | N/A              | 6,000<br>(37.1)  | N/A              | 10,100<br>(32.8) | N/A              | 19,500<br>(43.6) | N/A              | 12,000<br>(33.0) | N/A               | 55,000<br>(38.4)  |

Note: N/A = not asked in 2008

Source: PHMC's 2008 and 2012 Berks County Household Health Survey



**Table 5: Utilization of Services by Adults 18+**

|   | Reading          |                  | East Berks      |                  | North Berks      |                  | South Berks      |                  | West Berks       |                  | Berks County     |                  |
|---|------------------|------------------|-----------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
|   | 2008             | 2012             | 2008            | 2012             | 2008             | 2012             | 2008             | 2012             | 2008             | 2012             | 2008             | 2012             |
|   | N (%)            | N (%)            | N (%)           | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            | N (%)            |
| <b>In past year DID NOT...</b>                                    |                  |                  |                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Visit a health care provider                                      | 12,600<br>(26.2) | 12,300<br>(23.0) | 5,500<br>(14.2) | 6,200<br>(16.3)  | 9,000<br>(14.3)  | 12,400<br>(17.5) | 15,600<br>(17.8) | 11,800<br>(13.9) | 8,900<br>(12.1)  | 12,400<br>(18.4) | 51,600<br>(16.6) | 55,200<br>(17.5) |
| Visit a dentist   | 18,900<br>(39.4) | 23,600<br>(43.0) | 8,400<br>(21.7) | 12,400<br>(31.8) | 14,000<br>(22.2) | 19,800<br>(27.9) | 24,200<br>(27.7) | 24,300<br>(28.8) | 16,100<br>(21.9) | 15,100<br>(22.4) | 81,600<br>(26.3) | 95,100<br>(30.0) |
| <b>DID NOT have the recommended screening...</b>                  |                  |                  |                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Blood pressure test in the past year                              | 6,300<br>(13.2)  | 9,100<br>(17.0)  | 2,800<br>(7.2)  | 4,900<br>(13.3)  | 8,400<br>(13.6)  | 10,100<br>(14.3) | 11,000<br>(12.6) | 9,800<br>(11.6)  | 5,800<br>(8.0)   | 7,400<br>(11.0)  | 34,300<br>(11.1) | 41,400<br>(13.2) |
| Colonoscopy in past 10 years<br>(adults 50+)                      | 6,300<br>(40.2)  | 6,100<br>(31.5)  | 8,400<br>(40.5) | 5,300<br>(25.2)  | 8,200<br>(31.6)  | 16,400<br>(42.5) | 13,600<br>(37.0) | 11,700<br>(28.8) | 9,000<br>(28.1)  | 7,400<br>(22.0)  | 45,500<br>(34.7) | 46,900<br>(30.6) |
| Pap smear in the past year  | 8,800<br>(39.6)  | 10,400<br>(36.4) | 8,800<br>(42.3) | 9,300<br>(46.8)  | 8,100<br>(22.8)  | 17,700<br>(42.8) | 14,500<br>(31.4) | 14,000<br>(36.8) | 10,000<br>(29.6) | 14,700<br>(43.9) | 50,200<br>(31.7) | 66,300<br>(41.0) |
| Mammogram in the past year<br>(women 40+)                         | 3,900<br>(28.6)  | 7,500<br>(45.2)  | 4,800<br>(31.4) | 6,500<br>(40.4)  | 6,700<br>(31.5)  | 12,400<br>(42.2) | 9,900<br>(31.6)  | 9,600<br>(35.7)  | 6,300<br>(30.6)  | 8,900<br>(41.0)  | 31,600<br>(31.0) | 44,800<br>(40.6) |
| Rectal exam for prostate cancer in past<br>year (males 45+)       | 5,400<br>(53.5)  | 6,200<br>(55.9)  | 7,100<br>(49.9) | 6,900<br>(52.6)  | 6,200<br>(44.6)  | 8,700<br>(45.7)  | 11,200<br>(50.2) | 13,100<br>(50.9) | 7,900<br>(40.5)  | 8,300<br>(37.4)  | 37,700<br>(47.2) | 43,200<br>(47.4) |
| Note: N/A = not asked in 2008                                     |                  |                  |                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Source: PHMC's 2008 and 2012 Berks County Household Health Survey |                  |                  |                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |



**Table 6: Social Capital and Neighborhood of Adults 18+**

|   |                       | Reading |               | East Berks |               | North Berks |               | South Berks |               | West Berks |               | Berks County |                |
|---|-----------------------|---------|---------------|------------|---------------|-------------|---------------|-------------|---------------|------------|---------------|--------------|----------------|
|   |                       | 2008    | 2012          | 2008       | 2012          | 2008        | 2012          | 2008        | 2012          | 2008       | 2012          | 2008         | 2012           |
|   |                       | N (%)   | N (%)         | N (%)      | N (%)         | N (%)       | N (%)         | N (%)       | N (%)         | N (%)      | N (%)         | N (%)        | N (%)          |
| Social Capital  | Low social capital    | N/A     | 26,500 (57.0) | N/A        | 7,900 (22.3)  | N/A         | 18,600 (29.5) | N/A         | 18,600 (25.5) | N/A        | 13,900 (23.8) | N/A          | 85,500 (31.0)  |
|   | Medium social capital | N/A     | 15,600 (33.4) | N/A        | 23,200 (65.6) | N/A         | 35,000 (55.7) | N/A         | 40,100 (55.5) | N/A        | 31,100 (53.3) | N/A          | 145,000 (52.5) |
|   | High social capital   | N/A     | 4,500 (9.6)   | N/A        | 4,300 (12.1)  | N/A         | 9,300 (14.8)  | N/A         | 14,200 (19.5) | N/A        | 13,300 (22.9) | N/A          | 45,600 (16.5)  |
| Comfortable visiting park/outdoor space in neighborhood |                       | N/A     | 37,500 (68.7) | N/A        | 28,400 (75.5) | N/A         | 53,700 (97.1) | N/A         | 66,900 (79.4) | N/A        | 51,400 (77.4) | N/A          | 237,800 (76.1) |
| Free place to exercise                                  |                       | N/A     | 23,900 (50.7) | N/A        | 20,000 (58.1) | N/A         | 39,300 (63.7) | N/A         | 45,400 (60.8) | N/A        | 34,700 (63.0) | N/A          | 163,400 (59.8) |

Note: N/A = not asked in 2008

Source: PHMC's 2008 and 2012 Berks County Household Health Survey



|                                       | <b>Latino Origin</b> |                  | <b>Total</b>     |
|---------------------------------------|----------------------|------------------|------------------|
|                                       | Latino               | Non- Latino      |                  |
|                                       | N<br>(%)             | N<br>(%)         | N<br>(%)         |
| Did not seek health care due to cost  | 7,700<br>(16.8)      | 29,800<br>(11.1) | 37,900<br>(12.0) |
| Did not seek dental care due to cost  | 15,900<br>(34.9)     | 50,700<br>(18.8) | 67,000<br>(21.1) |
| Did not fill prescription due to cost | 9,700<br>(21.0)      | 33,300<br>(12.4) | 43,400<br>(13.7) |

Source: PHMC's 2012 Berks County Household Health Survey





**Table 8: Insurance Status and Source of Care by Latino Origin**

|   | Latino Origin    |                  | Total            |
|---|------------------|------------------|------------------|
|   | Latino           | Non-Latino       |                  |
|   | N (%)            | N (%)            | N (%)            |
| Uninsured (18-64)   | 10,800<br>(25.8) | 22,200<br>(10.8) | 33,000<br>(13.3) |
| No prescription drug coverage (among insured)   | 9,100<br>(25.7)  | 21,000<br>(8.6)  | 30,200<br>(10.8) |
| No regular source of care   | 10,600<br>(22.9) | 26,600<br>(9.9)  | 37,500<br>(11.8) |
| Visited ER in past year due to lack of insurance (among those uninsured in past year) | 4,900<br>(45.2)  | 3,200<br>(14.9)  | 8,100<br>(24.8)  |

Source: PHMC's 2012 Berks County Household Health Survey



**Table 9: Health Status by Latino Origin**

|                           |  | Latino Origin    |                  | Total             |
|---------------------------|--|------------------|------------------|-------------------|
|                           |  | Latino           | Non- Latino      |                   |
|                           |  | N (%)            | N (%)            | N (%)             |
| Health Status             | Excellent                              | 6,100<br>(13.2)  | 60,300<br>(22.4) | 67,000<br>(21.1)  |
|                           | Very Good                              | 6,700<br>(14.6)  | 92,800<br>(34.5) | 100,100<br>(31.5) |
|                           | Good                                   | 17,600<br>(38.2) | 81,300<br>(30.2) | 99,700<br>(31.4)  |
|                           | Fair                                   | 12,000<br>(26.1) | 26,900<br>(10.0) | 39,100<br>(12.3)  |
|                           | Poor                                   | 3,600<br>(7.9)   | 7,700<br>(2.8)   | 11,300<br>(3.6)   |
| Mental Health             | Diagnosed with mental health condition | 8,100<br>(17.6)  | 38,100<br>(14.2) | 46,200<br>(14.6)  |
| Body Mass Index           | Overweight                             | 16,600<br>(38.2) | 93,000<br>(35.5) | 110,600<br>(35.9) |
|                           | Obese                                  | 14,600<br>(33.7) | 77,800<br>(29.7) | 93,100<br>(30.2)  |
| Chronic Health Conditions | Ever had cancer                        | 1,500<br>(3.3)   | 26,600<br>(9.9)  | 28,300<br>(8.9)   |
|                           | Ever had asthma                        | 8,400<br>(18.2)  | 40,500<br>(15.1) | 49,200<br>(15.5)  |
|                           | Ever had diabetes                      | 7,100<br>(15.5)  | 36,500<br>(13.6) | 44,000<br>(13.9)  |
|                           | Ever had high blood pressure           | 12,900<br>(28.0) | 91,800<br>(34.3) | 105,400<br>(33.4) |
|                           | Ever had congestive heart failure      | 1,400<br>(3.1)   | 12,500<br>(4.7)  | 14,100<br>(4.5)   |

Source: PHMC's 2012 Berks County Household Health Survey



**Table 10: Personal Health Behaviors by Latino Origin**

|   |                         | Latino Origin |                | Total          |
|---|-------------------------|---------------|----------------|----------------|
|   |                         | Latino        | Non-Latino     |                |
|   |                         | N (%)         | N (%)          | N (%)          |
| Number of fruits and vegetables consumed in normal day    | 0-3 servings            | 37,200 (86.6) | 182,300 (69.5) | 221,100 (71.9) |
|   | 4+ servings             | 5,700 (13.4)  | 79,900 (30.5)  | 86,200 (28.1)  |
| How many times eaten at fast food restaurant in past week | 1 or more times         | 23,100 (50.1) | 128,600 (47.8) | 152,600 (48.1) |
| Number of times exercised in past month                   | None                    | 12,100 (26.2) | 36,500 (13.7)  | 49,000 (15.6)  |
|   | 1-2 days per week       | 14,100 (30.6) | 77,800 (29.3)  | 92,400 (29.4)  |
|   | 3 or more days per week | 19,900 (43.2) | 151,600 (57.0) | 172,800 (55.0) |
| Smokes Cigarettes   |                         | 14,000 (30.4) | 50,500 (18.8)  | 64,500 (20.4)  |
| Have tried quitting in past year                          |                         | 9,500 (69.5)  | 25,400 (50.2)  | 34,900 (54.3)  |
| Number of days consumed 5 or more drinks in past month    | 1 or more days          | 4,900 (40.8)  | 50,200 (38.4)  | 55,000 (38.4)  |

Source: PHMC's 2012 Berks County Household Health Survey



**Table 11: Social Capital and Neighborhood by Latino Origin**

|   |                       | Latino Origin |                | Total          |
|---|-----------------------|---------------|----------------|----------------|
|   |                       | Latino        | Non-Latino     |                |
|   |                       | N (%)         | N (%)          | N (%)          |
| Social Capital  | low social capital    | 22,400 (59.5) | 62,400 (26.4)  | 85,500 (31.0)  |
|   | medium social capital | 12,300 (32.8) | 131,700 (55.6) | 145,000 (52.5) |
|   | high social capital   | 7,400 (7.7)   | 40,700 (18.0)  | 45,600 (16.5)  |
| Comfortable visiting park/outdoor space in neighborhood |                       | 31,700 (69.7) | 204,900 (77.3) | 237,800 (76.1) |
| Free place to exercise                                  |                       | 19,300 (46.8) | 143,300 (62.3) | 163,400 (59.8) |

Source: PHMC's 2012 Berks County Household Health Survey



**Table 12: Utilization of Services by Latino Origin**

|  | Latino Origin    |                  | Total            |
|--|------------------|------------------|------------------|
|  | Latino           | Non-Latino       | N                |
|  | N (%)            | N (%)            | (%)              |
| <b>In past year DID NOT...</b>                           |                  |                  |                  |
| Visit a health care provider                             | 13,200<br>(29.3) | 41,700<br>(15.6) | 55,200<br>(17.5) |
| Visit a dentist  | 18,600<br>(40.3) | 76,100<br>(28.4) | 95,100<br>(30.0) |
| Blood pressure test in the past year                     | 11,100<br>(24.5) | 29,900<br>(11.3) | 41,400<br>(13.2) |
| Colonoscopy in past 10 years<br>(adults 50+)             | 3,300<br>(31.3)  | 42,800<br>(30.2) | 46,900<br>(30.6) |
| Pap smear in the past year                               | 10,000<br>(40.5) | 55,400<br>(40.8) | 66,300<br>(41.0) |
| Mammogram in the past year<br>(women 40+)                | 4,500<br>(35.1)  | 40,200<br>(41.5) | 44,800<br>(40.6) |
| Rectal exam for prostate cancer in past year (males 45+) | 3,600<br>(56.5)  | 38,700<br>(46.2) | 43,200<br>(47.4) |

Source: PHMC's 2012 Berks County Household Health Survey



| Table 13. Health Status, Mental Health Status, Body Mass Index, and Chronic Health Conditions<br>by Race and Poverty Status |  |                  |                 |                  |                  |                   |
|---|--|------------------|-----------------|------------------|------------------|-------------------|
|   |  | Race             |                 | Poverty Status*  |                  | Total             |
|   |  | White            | Black           | Poor             | Non-Poor         | N<br>(%)          |
|   |  | N<br>(%)         | N<br>(%)        | N<br>(%)         | N<br>(%)         |                   |
| Health Status   | Excellent                              | 58,200<br>(21.7) | 3,100<br>(21.2) | 4,400<br>(12.0)  | 62,500<br>(22.3) | 67,000<br>(21.1)  |
|   | Very Good                              | 91,500<br>(34.1) | 2,100<br>(14.3) | 4,000<br>(10.8)  | 96,000<br>(34.3) | 100,100<br>(31.5) |
|   | Good                                   | 81,400<br>(30.3) | 4,900<br>(33.7) | 13,500<br>(36.4) | 86,100<br>(30.8) | 99,700<br>(31.4)  |
|   | Fair                                   | 29,300<br>(10.9) | 3,700<br>(25.6) | 12,000<br>(32.2) | 27,100<br>(9.7)  | 39,100<br>(12.3)  |
|   | Poor                                   | 8,200<br>(3.0)   | 800<br>(5.3)    | 3,200<br>(8.6)   | 8,100<br>(2.9)   | 11,300<br>(3.6)   |
| Mental Health   | Diagnosed with mental health condition | 38,400<br>(14.3) | 2,900<br>(19.6) | 9,800<br>(26.2)  | 36,400<br>(13.0) | 46,200<br>(14.6)  |
| Body Mass Index   | Overweight                             | 94,100<br>(36.0) | 4,800<br>(35.5) | 11,700<br>(33.0) | 98,900<br>(36.3) | 110,600<br>(35.9) |
|   | Obese                                  | 77,400<br>(29.6) | 4,500<br>(33.5) | 14,500<br>(41.0) | 78,500<br>(28.8) | 93,100<br>(30.2)  |
| Chronic Health Conditions   | Ever had asthma                        | 42,100<br>(15.7) | 2,600<br>(17.9) | 9,500<br>(25.2)  | 39,700<br>(14.2) | 49,200<br>(15.5)  |
|   | Ever had diabetes                      | 35,600<br>(13.3) | 4,100<br>(28.3) | 9,200<br>(24.9)  | 34,800<br>(12.5) | 44,000<br>(13.9)  |
|   | Ever had high blood pressure           | 89,500<br>(33.5) | 7,000<br>(48.4) | 14,900<br>(39.6) | 90,500<br>(32.6) | 105,400<br>(33.4) |

Source: PHMC's 2012 Berks County Household Health Survey



| <b>Table 14. Insurance Status and Source of Care by Race and Poverty Status</b> |                  |                 |                  |                  |                  |
|---|------------------|-----------------|------------------|------------------|------------------|
|   | Race             |                 | Poverty          |                  | Total            |
|   | White            | Black           | Poor*            | Non-Poor         |                  |
|   | N (%)            | N (%)           | N (%)            | N (%)            | N (%)            |
| Uninsured (18-64)   | 21,800<br>(10.6) | 3,400<br>(27.9) | 10,200<br>(32.5) | 22,700<br>(10.5) | 33,000<br>(13.3) |
| No regular source of care   | 10,600<br>(22.9) | 26,600<br>(9.9) | 7,700<br>(20.4)  | 29,900<br>(10.7) | 37,500<br>(11.8) |

Source: PHMC's 2012 Berks County Household Health Survey  
\*Below 100% of Federal Poverty Level



**Table 15: Social Capital and Neighborhood by Population Sub-groups**

|   |                       | Race              |                  | Poverty Status   |                   | Total             |
|---|-----------------------|-------------------|------------------|------------------|-------------------|-------------------|
|   |                       | White             | Black            | Poor             | Non-Poor          | N<br>(%)          |
|   |                       | N<br>(%)          | N<br>(%)         | N<br>(%)         | N<br>(%)          |                   |
| Social Capital  | low social capital    | 66,000<br>(27.8)  | 5,600<br>(45.7)  | 16,800<br>(51.1) | 68,600<br>(27.9)  | 85,500<br>(31.0)  |
|   | medium social capital | 129,900<br>(54.8) | 4,800<br>(39.6)  | 10,400<br>(34.7) | 134,600<br>(54.7) | 145,000<br>(52.5) |
|   | high social capital   | 41,200<br>(17.4)  | 1,800<br>(14.7)  | 2,800<br>(9.3)   | 42,800<br>(17.4)  | 45,600<br>(16.5)  |
| Comfortable visiting park/outdoor space in neighborhood |                       | 202,900<br>(76.8) | 10,600<br>(73.3) | 25,100<br>(68.2) | 212,600<br>(77.2) | 237,800<br>(76.1) |
| Free place to exercise                                  |                       | 143,600<br>(62.1) | 5,800<br>(47.3)  | 13,400<br>(43.3) | 150,000<br>(61.9) | 163,400<br>(59.8) |

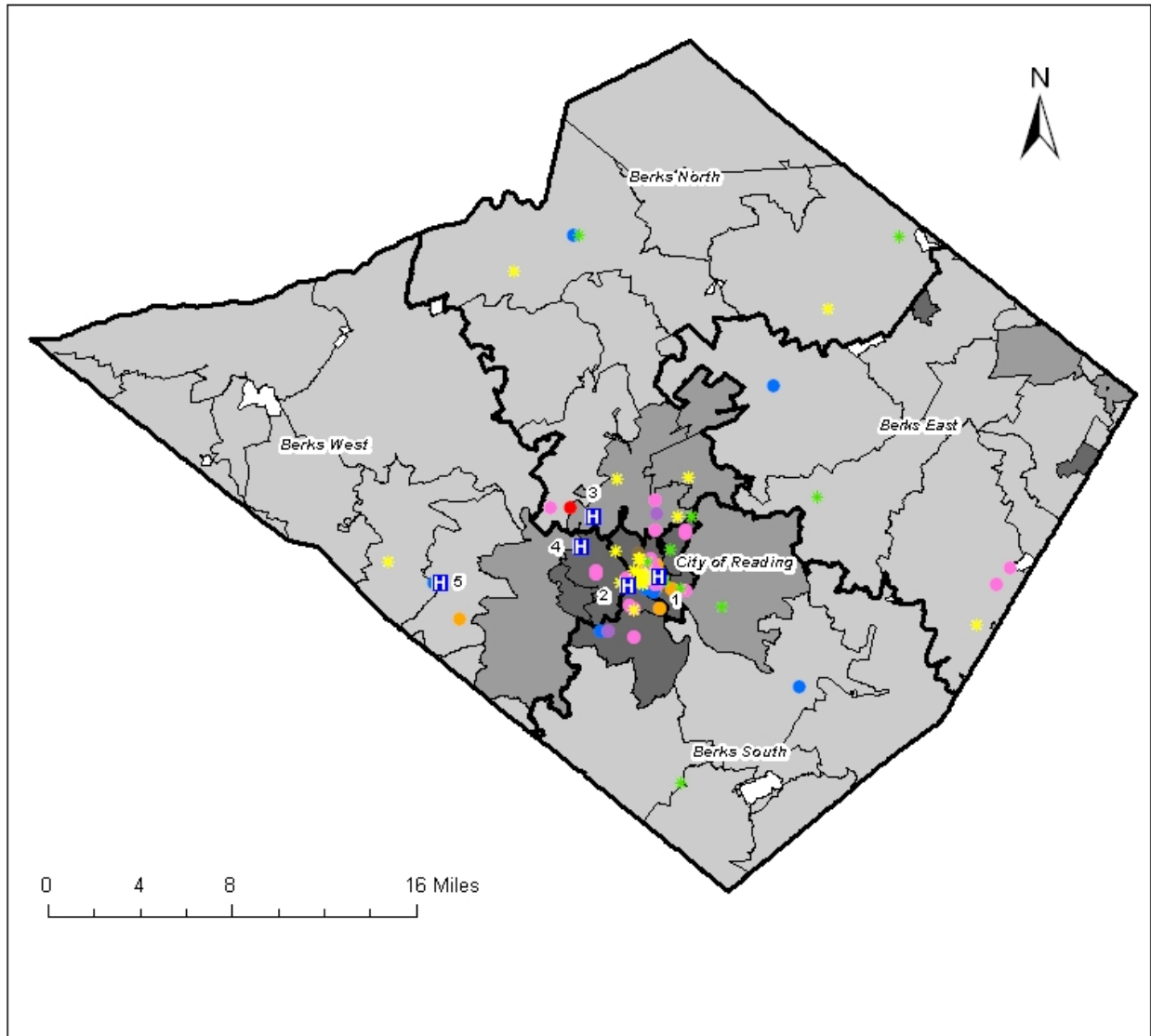




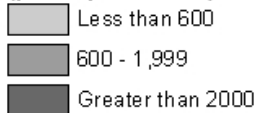
## APPENDIX D: ASSET MAPS



## Berks County Social Services



### Population Density (per square mile)



### Hospitals

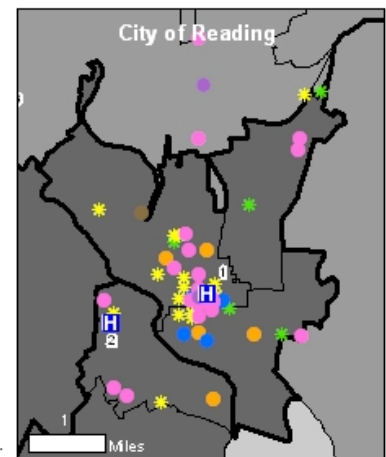
- 1 Haven Behavioral Hospital of Eastern PA
- 1 Reading Hospital
- 2 St. Joseph Medical Center
- 3 Surgical Institute of Reading
- 4 Wernersville State Hospital

### Social Services

- Emergency Services
- Homeless/Emergency Shelter
- Pregnancy Crisis Center
- Senior Center
- Social Service Agency
- WIC Office

### Food Assistance

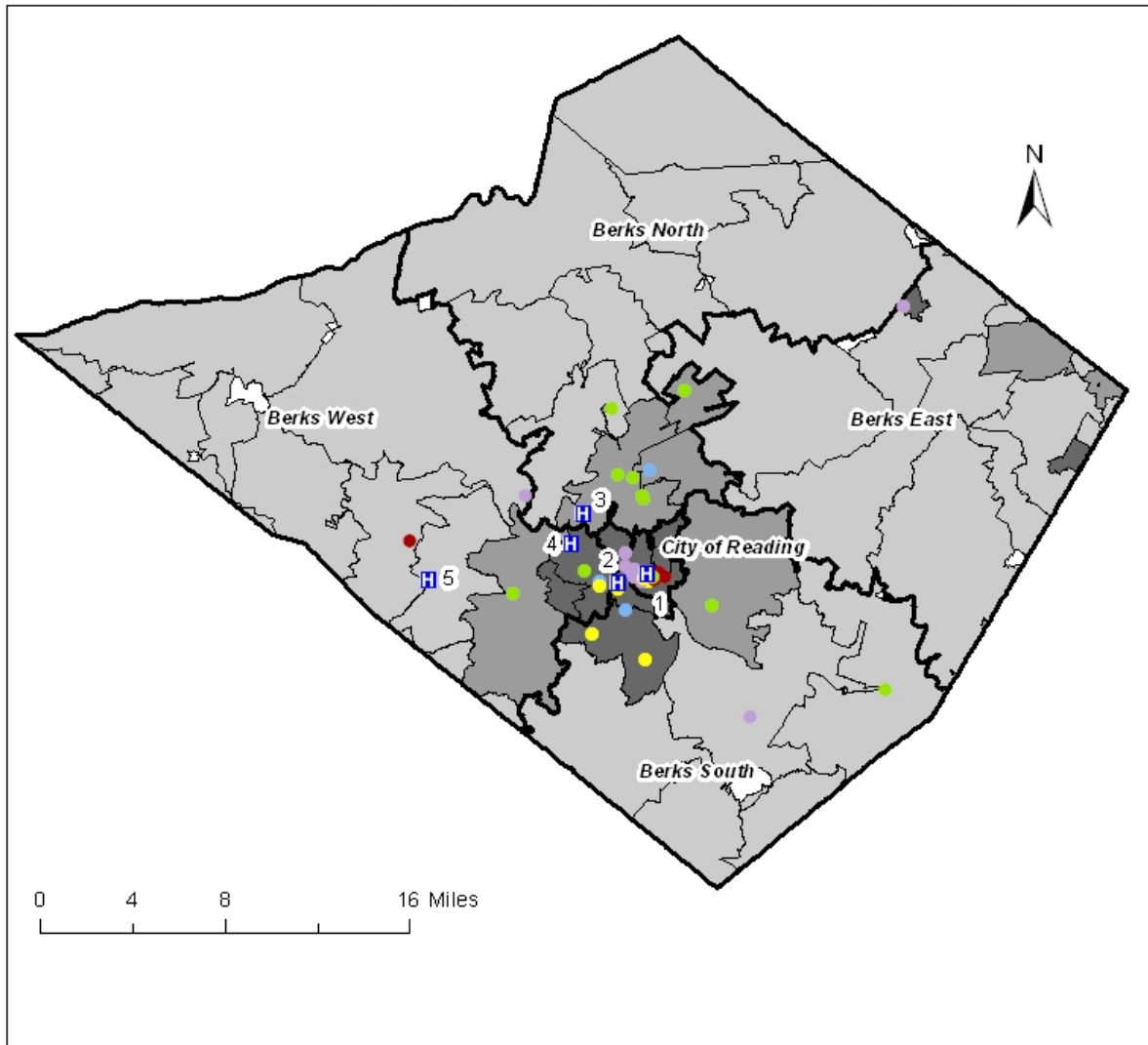
- ★ Food Pantry
- ★ Soup Kitchen/Meal Program



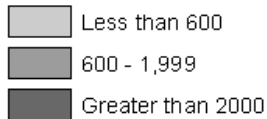
Unshaded zipcodes are postal/business zipcodes and do not have census population data.  
Prepared by The Research & Evaluation Group, PHMC; October, 2012



## Berks County Health Care Services



### Population Density (per square mile)



*Unshaded zipcodes are postal or business zipcodes and do not have census population data.*

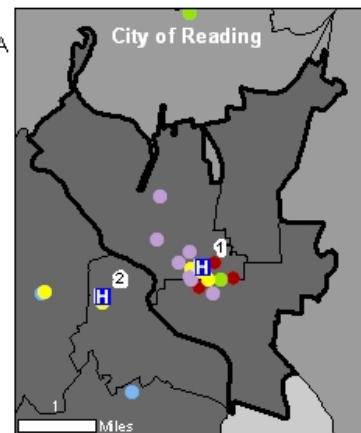
*Prepared by The Research & Evaluation Group, PHMC; October 2012*

### Hospitals

- 1 Haven Behavioral Hospital of Eastern PA
- 2 Reading Hospital
- 3 St. Joseph Medical Center
- 4 Surgical Institute of Reading
- 5 Wemerville State Hospital

### Health Care Services

- Behavioral Health Service
- Health Center
- Mental Health Center
- Substance Abuse Treatment
- Urgent Care Center





**PUBLIC HEALTH**  
management corporation



## APPENDIX E: COMMUNITY RESOURCE LIST



| Name   | Town          | State        | Zip        | Type                       |
|--|---------------|--------------|------------|----------------------------|
| <b>BERKS COUNTY HOSPITALS</b>                      |               |              |            |                            |
| <b>Name</b>  | <b>Town</b>   | <b>State</b> | <b>Zip</b> | <b>Type of Hospital</b>    |
| Haven Behavioral Hospital of Eastern PA            | Reading       | PA           | 19601      | Behavioral Health Hospital |
| Wernersville State Hospital                        | Wernersville  | PA           | 19565      | Psychiatric Hospital       |
| St. Joseph Regional Health Network                 | Reading       | PA           | 19605      | Hospital                   |
| Reading Health System                              | West Reading  | PA           | 19611      | Hospital                   |
| Surgical Institute of Reading                      | Wyomissing    | PA           | 19610      | Surgical Hospital          |
| <b>BERKS COUNTY HEALTH CENTERS AND CLINICS</b>     |               |              |            |                            |
| <b>Name</b>  | <b>Town</b>   | <b>State</b> | <b>Zip</b> | <b>Type of Center</b>      |
| St. Joseph Regional Health Network Downtown Campus |               | PA           | 19601      | Health Center              |
|  | Reading       |              |            |                            |
| Western Berks Free Medical Clinic                  | Robesonia     | PA           | 19551      | Health Center              |
| Berks Community Health Center                      | Reading       | PA           | 19601      | Health Center              |
| Keystone Farmworker Health Program                 | Reading       | PA           | 19601      | Health Center              |
| Planned Parenthood of Northeast Pennsylvania       | Reading       | PA           | 19602      | Health Center              |
| Co-County Wellness Services/Berks AIDS Network     | Reading       | PA           | 19603      | HIV/AIDS services          |
| Mercy Community Crisis Pregnancy Center            | Reading       | PA           | 19601      | Pregnancy Crisis Center    |
| St. Joseph Regional Health Network at Maiden creek | Blandon       | PA           | 19510      | Urgent Care Center         |
| Premier Immediate Medical Care                     | Douglassville | PA           | 19518      | Urgent Care Center         |
| Concentra Urgent Care                              | Reading       | PA           | 19605      | Urgent Care Center         |
| Reading Convenient Care                            | Reading       | PA           | 19605      | Urgent Care Center         |
| MedExpress Urgent Care - Muhlenberg                | Reading       | PA           | 19605      | Urgent Care Center         |
| Advance Urgent Care                                | Reading       | PA           | 19608      | Urgent Care Center         |

| Name                                     | Town       | State | Zip   | Type                            |
|--|------------|-------|-------|---------------------------------|
| Abilities In Motion                      | Reading    | PA    | 19601 | Social Service Agency           |
| ADAPPT                                   | Reading    | PA    | 19601 | Substance Abuse Treatment       |
| Alternative Consulting Enterprises, Inc. | Reading    | PA    | 19601 | Mental Health/Medicaid Provider |
| American Cancer Society                  | Reading    | PA    | 19605 | Social Service Agency           |
| American Diabetes Association            | Reading    | PA    | 18017 | Social Service Agency           |
| American Red Cross                       | Reading    | PA    | 19601 | Social Service Agency           |
| Arc Advocacy Services                    | Reading    | PA    | 19607 | Social Service Agency           |
| Autism Society of Berks                  | Wyomissing | PA    | 19610 | Social Service Agency           |
| Bailey, Diane, L.P.C.                    | West Lawn  | PA    | 19609 | Mental Health/Medicaid Provider |
| BCC Satellite Office                     | Reading    | PA    | 19601 | Social Service Agency           |
| BCC/ACT Program                          | Reading    | PA    | 19601 | Social Service Agency           |
| Berks Advocates Against Violence         | Reading    | PA    | 19601 | Social Service Agency           |
| Berks Coalition to End Homelessness      | Reading    | PA    | 19602 | Social Service Agency           |
| Berks Counseling Center                  | Reading    | PA    | 19601 | Social Service Agency           |
| Berks Counseling Center, Inc.            | Reading    | PA    | 19601 | Mental Health/Medicaid Provider |
| Berks County Associate for the Blind     | Reading    | PA    | 19604 | Social Service Agency           |
| Berks County Children and Youth          | Reading    | PA    | 19601 | Social Service Agency           |
| Berks County Community Foundation        | Reading    | PA    | 19601 | Foundation                      |
| Berks County Emergency Management        | Leesport   | PA    | 19533 | Emergency Services              |



|  |              |    |       |  |
|--|--------------|----|-------|--|
| Berks County Services Center                                 | Reading      | PA | 19601 | Social Service Agency                                      |
| Berks Encore- Birdsboro                                      | Birdsboro    | PA | 19508 | Senior Center  |
| Berks Encore- Fleetwood                                      | Fleetwood    | PA | 19522 | Senior Center  |
| Berks Encore- Hamburg  | Hamburg      | PA | 19526 | Senior Center  |
| Berks Encore- Mifflin  | Shillington  | PA | 19607 | Senior Center  |
| Berks Encore- Providence House                               | Reading      | PA | 19601 | Senior Center  |
| Berks Encore- Wernersville                                   | Wernersville | PA | 19565 | Senior Center  |
| Berks Encore-Reading Center                                  | Reading      | PA | 19601 | Senior Center  |
| Berks Psychiatry, Inc.                                       | Reading      | PA | 19602 | Mental Health/Medicaid Provider                            |
| Berks Women in Crisis  | Reading      | PA | 19601 | Homeless/Emergency Shelter                                 |
| Berkshire Psychiatric & Behavioral Health Services, P.C.     | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Beveridge, Lisa, L.S.W. Berks Counseling Associates, P.C.    | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider                            |
| Big Brothers/Big Sister                                      | Reading      | PA | 19601 | Social Service Agency                                      |
| Boyertown Area Multi-Services Center                         | Boyertown    | PA | 19512 | Social Service Agency                                      |
| Boyertown Salvation Army                                     | Boyertown    | PA | 19512 | Social Service Agency                                      |
| Cammarano, Denise, L.S.W. Berks Advocates Against Violence   | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Center for Mental Health                                     | Reading      | PA | 19601 | Mental Health  |
| Centro Hispano (Hispanic Center)                             | Reading      | PA | 19601 | Social Service Agency                                      |
| Child & Family Support Services, Inc.                        | Reading      | PA | 19602 | Mental Health/Medicaid Provider                            |
| Children's Alliance Center                                   | Reading      | PA | 19601 | Social Service Agency                                      |
| Children's Home of Reading                                   | Reading      | PA | 19601 | Substance Abuse Treatment Drug & Alcohol/Medicaid Provider |
| CHOR Youth & Family Services, Inc.                           | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| CHOR Youth & Family Services, Inc.                           | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Commonwealth Clinical Group, Inc.                            | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Community Prevention Partnership                             | Reading      | PA | 19601 | Social Service Agency                                      |
| Community Skills Program and Rehab, Inc.                     | Wyomissing   | PA | 19610 | Social Service Agency                                      |
| Community Solutions of Pennsylvania                          | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| CONCERN Professional Services for Children, Youth & Families | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider                            |
| Concern of Reading   | Reading      | PA | 19602 | Mental Health  |
| Council on Chemical Abuse                                    | Reading      | PA | 19601 | Substance Abuse Treatment                                  |
| Creative Health Services, Inc.                               | Birdsboro    | PA | 19508 | Substance Abuse Treatment                                  |
| Creative Health Services, Inc.                               | Birdsboro    | PA | 19508 | Mental Health/Medicaid Provider                            |
| Danken House   | Wernersville | PA | 19565 | Homeless/Emergency Shelter                                 |
| Dayspring Homes, Inc.  | Reading      | PA | 19611 | Homeless/Emergency Shelter                                 |
| Department of Public Welfare County Assistance Office        | Reading      | PA | 19601 | Government agency  |
| DeSantis, Denise, L.C.S.W. Berks Counseling Associates, P.C. | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider                            |
| Easter Seals of Eastern PA                                   | Reading      | PA | 19611 | Social Service Agency Drug & Alcohol/Medicaid Provider     |
| Easy Does It, Inc.   | Leesport     | PA | 19533 | Provider   |
| Ercole, Mario, M.D.  | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Familicare Counseling Center                                 | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Family First Resource Center                                 | Reading      | PA | 19602 | Senior Center Drug & Alcohol/Medicaid Provider             |
| Family Guidance Center                                       | Wyomissing   | PA | 19610 | Provider   |



|  |              |    |       |  |
|--|--------------|----|-------|--|
| Family Guidance Center                                   | Reading      | PA | 19601 | Mental Health/Medicaid Provider  |
| Family Life Services                                     | Topton       | PA | 19562 | Substance Abuse Treatment  |
| Family Promise of Berks                                  | Reading      | PA | 19601 | Homeless/Emergency Shelter   |
| Fischetto, Anthony, Ed.D                                 | Shillington  | PA | 19607 | Mental Health/Medicaid Provider  |
| Freedom Gate Ministries                                  | Reading      | PA | 19602 | Substance Abuse Treatment  |
| Gaulin, Ann, M.S., L.M.F.T.                              | Shillington  | PA | 19607 | Mental Health/Medicaid Provider  |
| Goodwill   | Reading      | PA | 19605 | Social Service Agency  |
| Greater Reading Mental Health Alliance, The              | Shillington  | PA | 19607 | Mental Health/Medicaid Provider  |
| Haven Behavioral Hospital of Eastern Pennsylvania        | Reading      | PA | 19601 | Mental Health/Medicaid Provider  |
| Here and Now Group                                       | Reading      | PA | 19602 | Social Service Agency  |
| Hill, Alison, Ph.D. Berks Counseling Associates, P.C.    | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider  |
| Holcomb Behavioral Health Systems                        | Reading      | PA | 19604 | Mental Health/Medicaid Provider  |
| Hope Rescue Mission                                      | Reading      | PA | 19601 | Homeless/Emergency Shelter   |
| Infante, Olga, M.D.                                      | Reading      | PA | 19601 | Mental Health/Medicaid Provider  |
| Janjua, Mohammad, M.D. Horizonz, LLC                     | Reading      | PA | 19601 | Mental Health/Medicaid Provider  |
| Jewish Community Center of Reading                       | Reading      | PA | 19604 | Social Service Agency  |
| Kennedy Senior Center                                    | Reading      | PA | 19602 | Senior Center  |
| KidsPeace National Centers, Inc.                         | Temple       | PA | 19560 | Mental Health/Medicaid Provider  |
| La Casa De la Amistad                                    | Reading      | PA | 19601 | Senior Center  |
| Laureldale Center  | Reading      | PA | 19605 | WIC Office   |
| Lesniak-Karpiak, Katarzyna, Ph.D.                        | Douglasville | PA | 19518 | Mental Health/Medicaid Provider  |
| Mary's Shelter   | Reading      | PA | 19602 | Homeless/Emergency Shelter   |
| McConaghay, Dean, M.S. Berks Counseling Associates, P.C. | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider  |
| Mental Health Association                                | West Reading | PA | 19611 | Mental Health  |
| Milestones Community Healthcare, Inc.                    | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider  |
| Nagle, Robert, Ph.D. Berks Counseling Associates, P.C.   | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider  |
| Namiotka, Mary, L.C.S.W.                                 | Leesport     | PA | 19533 | Mental Health/Medicaid Provider  |
| National Mentor Healthcare, Inc. dba PA Mentor           | Fleetwood    | PA | 19522 | Mental Health/Medicaid Provider<br>Drug & Alcohol/Medicaid<br>Provider |
| New Directions Treatment Services                        | West Reading | PA | 19611 | Mental Health/Medicaid Provider  |
| New Directions Treatment Services                        | West Reading | PA | 19611 | Mental Health/Medicaid Provider  |
| New Life Cognitive Behavioral Services, Inc.             | Reading      | PA | 19601 | Mental Health/Medicaid Provider  |
| New Person Center  | Reading      | PA | 19601 | Substance Abuse Treatment  |
| NHS Pennsylvania   | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider  |
| Nicodemus, David, M.A.                                   | Reading      | PA | 19607 | Mental Health/Medicaid Provider  |
| Office of Mental Health/Developmental Disabilities       | Reading      | PA | 19601 | Mental Health  |
| Olivet Boy and Girls Club                                | Reading      | PA | 19611 | Social Service Agency  |
| Opportunity House  | Reading      | PA | 19601 | Substance Abuse Treatment  |
| Orr, Gerald, M.A. - Berks Counseling Associates, P.C.    | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider<br>Drug & Alcohol/Medicaid<br>Provider |
| Pennsylvania Counseling Services, Inc.                   | Reading      | PA | 19602 | Mental Health/Medicaid Provider  |
| Pennsylvania Counseling Services, Inc.                   | Reading      | PA | 19602 | Mental Health/Medicaid Provider  |
| Perez Bentancourt, Mirta, L.P.C.                         | Shillington  | PA | 19607 | Mental Health/Medicaid Provider  |





|   |              |    |       |  |
|---|--------------|----|-------|--|
| Progressions                                | Reading      | PA | 19601 | Mental Health  |
| Progressions Companies, Inc., The           | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Reading Behavioral Health Center Inc.       | Reading      | PA | 19602 | Mental Health/Medicaid Provider                            |
| Reading Center                              | Reading      | PA | 19601 | WIC Office   |
| Reading Health System - Ctr. for MH         | West Reading | PA | 19611 | Mental Health/Medicaid Provider<br>Drug & Alcohol/Medicaid |
| Reading Health System - Ctr. for MH         | West Reading | PA | 19611 | Provider   |
| Real Alternatives                           | West Reading | PA | 19601 | Pregnancy Crisis Center<br>Drug & Alcohol/Medicaid         |
| Richard J. Caron Foundation                 | Wyomissing   | PA | 19610 | Provider   |
| Rijo, Ana, L.P.C. Seed of Hope, Inc.        | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Royall, Carmen, L.P.C. Horizonz, LLC.       | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Salvation Army                              | Reading      | PA | 19602 | Social Services  |
| Salvation Army - Boyertown Corps            | Boyertown    | PA | 19512 | Social Services  |
| Schollenberger, Craig, L.C.S.W.             | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider                            |
| Service Access & Management, Inc.           | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Shillington Center                          | Shillington  | PA | 19607 | WIC Office   |
| Signature Family Services                   | West Reading | PA | 19611 | Social Service Agency                                      |
| Spellman, Pamela, L.C.S.W.                  | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| Stufflet, Kathryn, L.C.S.W.                 | Wyomissing   | PA | 19610 | Mental Health/Medicaid Provider                            |
| Tamaqua Salvation Army                      | Tamaqua      | PA | 18252 | Social Service Agency                                      |
| Threshold Rehabilitation Services, Inc.     | Reading      | PA | 19607 | Behavioral Health Services                                 |
| Threshold Rehabilitation Services, Inc.     | Reading      | PA | 19607 | Mental Health/Medicaid Provider                            |
| Treatment Access & Services Center, Inc.    | Reading      | PA | 19601 | Mental Health/Medicaid Provider<br>Drug & Alcohol/Medicaid |
| Treatment Access & Services Center, Inc.    | Reading      | PA | 19601 | Provider   |
| United Way of Berks County                  | Reading      | PA | 19603 | Community agency   |
| Veterans Affairs of Berks                   | Leesport     | PA | 19533 | Government agency  |
| Wyomissing Foundation                       | Wyomissing   | PA | 19610 | Foundation   |
| Yasmeen, Nikhat, M.D. - Reading Psaychiatry | Reading      | PA | 19601 | Mental Health/Medicaid Provider                            |
| YMCA  | Reading      | PA | 19601 | YMCA   |
| Youth Advocate Programs, Inc.               | Reading      | PA | 19605 | Mental Health/Medicaid Provider                            |

**BERKS COUNTY FOOD PANTRIES AND SOUP KITCHENS**

| Name                                | Town             | State | Zip   | Type        |
|-------------------------------------|------------------|-------|-------|-------------|
| St. Luke's Lutheran Church          | Bloomsburg       | PA    | 17815 | Food Pantry |
| Pottsville Area Food Pantry         | Pottsville       | PA    | 17901 | Food Pantry |
| Schuylkill Community Action Program | Pottsville       | PA    | 17901 | Food Pantry |
| Hope Lutheran Church                | Ashland          | PA    | 17921 | Food Pantry |
| Mahanoy Area Food Pantry            | Mahonoy City     | PA    | 17948 | Food Pantry |
| Minersville Area Food Cupboard      | Minersville      | PA    | 17954 | Food Pantry |
| Schuylkill Valley Food Pantry       | New Philadelphia | PA    | 17959 | Food Pantry |
| New Ringgold Area Food Pantry       | New Ringgold     | PA    | 17960 | Food Pantry |
| Pine Grove Area Food Pantry         | Pine Grove       | PA    | 17963 | Food Pantry |
| Shenandoah Area Food Pantry         | Shenandoah       | PA    | 17976 | Food Pantry |
| Williams Valley Food Pantry         | Tower City       | PA    | 17980 | Food Pantry |
| Tremont Food Pantry                 | Tremont          | PA    | 17981 | Food Pantry |
| Tri Valley Food Pantry              | Valley View      | PA    | 17983 | Food Pantry |



|   |              |    |       |                           |
|---|--------------|----|-------|---------------------------|
| McAdoo Area Food Pantry                     | McAdoo       | PA | 18237 | Food Pantry               |
| Nuremberg Area Food Pantry                  | Nuremberg    | PA | 18241 | Food Pantry               |
| Tamaqua Area Food Pantry                    | Tamaqua      | PA | 18252 | Food Pantry               |
| Tamaqua Primitive Methodist Church          | Tamaqua      | PA | 18252 | Food Pantry               |
| Northern Berks Food Pantry                  | Hamburg      | PA | 19526 | Food Pantry               |
| The Rodale Institute                        | Kutztown     | PA | 19530 | Food Pantry               |
| St. Benedict's RCC                          | Mohnton      | PA | 19540 | Food Pantry               |
| Oley Valley Food Pantry                     | Oley         | PA | 19547 | Food Pantry               |
| Spring Valley Church of God                 | Temple       | PA | 19560 | Food Pantry               |
| Iglesia Bautista Betania                    | Reading      | PA | 19601 | Food Pantry               |
| St. Paul's Lutheran Church                  | Reading      | PA | 19601 | Food Pantry               |
| St. James Chapel                            | Reading      | PA | 19602 | Food Pantry               |
| Hub of Hope at Reading Moravian Church      | Reading      | PA | 19604 | Food Pantry               |
| St. Ignatius Loyola RCC                     | Reading      | PA | 19606 | Food Pantry               |
| Ringtown Valley Food Pantry                 | Reading      | PA |       | Food Pantry               |
| Ashland Food Pantry                         | Ashland      | PA | 17921 | Soup Kitchen/Meal Program |
| Friend, Inc.                                | Kutztown     | PA | 19350 | Soup Kitchen/Meal Program |
| Harvest Fellowship of Colebrookdale         | Boyertown    | PA | 19512 | Soup Kitchen/Meal Program |
| Hamburg SDA Church                          | Hamburg      | PA | 19526 | Soup Kitchen/Meal Program |
| Conrad Weiser Pantry                        | Robesonia    | PA | 19551 | Soup Kitchen/Meal Program |
| Hampden Heights SDA Church                  | Temple       | PA | 19560 | Soup Kitchen/Meal Program |
| Bethel AME Church                           | Reading      | PA | 19601 | Soup Kitchen/Meal Program |
| Christ Lutheran Church                      | Reading      | PA | 19601 | Soup Kitchen/Meal Program |
| Circle of Friends Drop In Center            | Reading      | PA | 19601 | Soup Kitchen/Meal Program |
| City Light Ministry                         | Reading      | PA | 19601 | Soup Kitchen/Meal Program |
| Grace and Hope Mission                      | Reading      | PA | 19601 | Soup Kitchen/Meal Program |
| Holy Cross Memorial Church                  | Reading      | PA | 19601 | Soup Kitchen/Meal Program |
| Holy Spirit Lutheran Church                 | Reading      | PA | 19601 | Soup Kitchen/Meal Program |
| Holy Trinity Church of God                  | Reading      | PA | 19601 | Soup Kitchen/Meal Program |
| Evangelical Mennonite Church                | Reading      | PA | 19602 | Soup Kitchen/Meal Program |
| First Unitarian Universalist                | Reading      | PA | 19602 | Soup Kitchen/Meal Program |
| Greater Berks Food Bank                     | Reading      | PA | 19605 | Soup Kitchen/Meal Program |
| Catholic Charities, Diocese of Allentown    | Reading      | PA | 19606 | Soup Kitchen/Meal Program |
| Central Park United Methodist Food Ministry | Reading      | PA | 19606 | Soup Kitchen/Meal Program |
| Bethany Lutheran Church                     | West Reading | PA | 19611 | Soup Kitchen/Meal Program |
| Calvary Community Center                    | Reading      | PA | 19611 | Soup Kitchen/Meal Program |
| Cluster Outreach Center                     | Temple       | PA | 19560 | Soup Kitchen/Meal Program |



## APPENDIX F: FOCUS GROUP DISCUSSION GUIDE



## **Older Adults Focus Group Questions**

### **Introduction**

You have been asked to participate in this discussion group because you are residents of Berks County. The St. Joseph Regional Health Network, The Reading Hospital and Medical Center, Berks County Community Foundation, and the United Way of Berks County have asked the Philadelphia Health Management Corporation to collect information on the health and social service needs of residents of Berks County. Public Health Management Corporation, or PHMC, is a private, non-profit public health organization.

There are three other discussion groups being conducted for this project. The information from these discussion groups will be combined with other information we are collecting into a report. The results of the needs assessment will be made available to the public. Our conversation tonight will be recorded by a tape recorder because we do not want to miss anything you say. I want to assure you that everything you say here is confidential and your name will never be used in connection with anything you say in any written report that comes out of this group. My job is to act as moderator of the discussion and ask the questions. Since we have a lot of questions to get through today/tonight, I may have to cut short discussion of some questions to make sure we finish on time. Also, in order to make sure that everyone gets a chance to be heard, I ask that only one person talk at a time. Please feel free to leave and use rest rooms at any time during the discussion or to get up and help yourself to the refreshments.

In order to introduce everyone, let's go around the table. Please tell everyone your first name and what part of Berks County you live in.

### **Questions**

As I mentioned earlier, we are very interested in learning if there are any unmet health care needs for people who live in Berks County. This includes care for health problems a person might have, as well as screenings and check ups to maintain good health, and mental health care.

I am going to ask you some questions about how people get to the doctor, and where they go for care.

1. How many people here have a doctor or other health care professional they can go to if they have a question about their health or are sick? Do other people in your family have a doctor or other health care professional? What type of provider do you use: private practice doctor, clinic, emergency room, etc.? If you or your family don't have a health care professional you can go to, why not?

Now I am going to ask you some questions about any problems getting health care you or your family might have had in the past year.



2. Have you or anyone in your family had a problem getting any health care and related services that you needed or thought you needed in the past year? This includes primary care, check ups for adults, emergency services, mental health (inpatient or outpatient), substance abuse treatment (inpatient or outpatient), specialty care, dental care, prescriptions, eyeglasses, diagnostic tests, such as mammograms and prostate cancer screening.
3. If so, what type of services could you not get, and what was the problem? Probe for type of service:

Primary care for adults  
Specialty care for adults  
Services for adults with special needs  
Dental care  
Eyeglasses  
Dentures  
Urgent care  
Preventive screenings  
Diagnostic testing  
Mental health care – in patient or outpatient  
Substance abuse treatment – inpatient or outpatient

What was the reason you or your family could not get health care? Probe for:

- Insurance – does not take my type of insurance
- Cost – no insurance or cost of co-pays and deductibles
- No providers in my area
- Care after hours and on weekends
- Long waiting time for appointment
- Cost of prescriptions
- Transportation/location
- Handicap access
- Language barrier
- Cultural barriers

Now I would like to ask you to think a little about what types of unmet health care needs there are in Berks County.

4. Nutrition is very important for health. Do older adults in Berks County experience any barriers in getting fresh fruits and vegetables? If so, what are they? Probe for: markets with fresh fruit and vegetables in their community, transportation barriers, cost, oral health, medical conditions, likes/dislikes, lack of knowledge of importance of eating f/vegs, culture.
5. Physical exercise is also very important for health. Are there any barriers to physical exercise for older adults in Berks County? If so, what are they? Probe for: chronic condition, cost, lack of facility in neighborhood/transportation, fears of going outside, don't want to, lack of knowledge of importance of exercise, culture.
6. Have you heard of the Greater Reading Trails? If so, how did you hear about it? Do you use it? If not, why not? How likely would you be to use it in the future? Probe for: safety reasons, health problems, transportation, don't have someone to go with them, don't want to.
7. Based on your own experience, what are the top health care needs of adults in Berks County?
8. Many health problems are impacted by social conditions, such as lack of education, poverty, poor housing conditions, unemployment, and culture and language. What, in your opinion, are the top social conditions that have a negative impact on the health of the community in Berks County?



9. What is the best way to reach people in Berks County with information about health and health care resources? Probe for: local newspapers, radio, cable TV, internet, word of mouth, churches, other organizations.



## APPENDIX G: KEY INFORMANT INTERVIEW GUIDE



**BERKS COUNTY COMMUNITY HEALTH NEEDS ASSESSMENT  
KEY INFORMANT INTERVIEW GUIDE**

**INTERVIEWER:** \_\_\_\_\_

**DATE:** \_\_/\_\_/\_\_

**KEY INFORMANT:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**ORGANIZATION:** \_\_\_\_\_

*Introduction: The St. Joseph Regional Health Network, The Reading Hospital and Medical Center, Berks County Community Foundation, and the United Way of Berks County are conducting an assessment of the community assets and unmet health care needs of residents of Berks County. As part of the assessment, we are interviewing leaders in the community who are knowledgeable about these issues. We would like to know your opinions, based on your experience serving the community.*

*First, I would like to ask you some questions about your experiences working in Berks County.*

*I would like to ask you some questions about the health of residents of Berks County, based on your experiences.*

Based on your experience, what types of health problems – both physical and mental health problems – do you observe in adults and children in Berks County? Are there different problems in different regions of the County?

- Overweight
- Diabetes
- Arthritis
- Heart disease
- High Blood pressure
- Cancer
- High cholesterol
- Poor oral health
- Poor nutrition
- STDs
- Depression
- Serious mental illness – schizophrenia, bi-polar, etc.
- ADHD
- Anorexia/bulimia
- Communicable diseases – including those of childhood
- Lead poisoning/elevated lead levels
- Limitations of mobility
- Alzheimer’s/dementia

Based on your experience, have you observed any health behaviors in Berks County residents that can have a negative impact on health? (Probe for smoking, drinking, substance abuse, obesity, food insecurity, poor nutrition, high risk sexual behavior, lack of physical exercise) Are these behaviors more common among different population subgroups or different geographic areas of the county?





Do Berks County residents have access to the health care services they need? Do different groups of residents have access?

- Adults
- Children
- Uninsured persons, underinsured
- Persons without prescription insurance, dental insurance
- Pregnant women
- Older adults
- Persons with special needs – children and adults
- Ethnic and racial minorities – African American, Latino
- Undocumented persons
- Persons with limited English proficiency
- Urban residents
- Rural residents
- Homeless
- Persons with Medical Assistance or Medicare

If no, why not??

Probe for transportation, eligibility rules, cost, lack of information, culture, language, immigration status, insurance type, provider shortages

Are there barriers to accessing specific types of health care services? If so, what types of services?

- Primary care for adults
- Prescriptions
- Dental care
- Obstetrical care
- Women's health – gyn care/prenatal care, mammograms, other
- Acute inpatient care
- Outpatient care
- Rehabilitation care
- Home health care
- Respite care
- Pediatric primary care or specialty care
- Adult specialty care
- Substance abuse treatment – inpatient and outpatient
- Mental health treatment – inpatient and outpatient

What are the barriers? Probe for provider shortages, cost, transportation, eligibility rules, lack of information, culture, language, immigration status, insurance type

What are the top five health and social service needs of the people you serve?

Are these needs being met? If not, why not? Are there any gaps in services? What are they?

Which are some exemplary services/programs? Why are they exemplary?

Are there services/programs that need improvement? Why?

Which of the needs not being met should have the highest priority for being met?

Do you have any further comments?