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Executive Summary

Valley Medical Center (VMC) is a 321-bed acute care hospital and clinic network committed to providing safe, quality, compassionate care since 1947. The oldest and largest public district hospital in the State of Washington, VMC serves more than 600,000 residents in South King County. The Patient Protection and Affordable Care Act through the IRS section 501(r)(3) regulations direct nonprofit hospitals to conduct a Community Health Needs Assessment and develop an Implementation Strategy every three years.

The purpose of this Community Health Needs Assessment (CHNA) is to identify and prioritize significant health needs of the community served by VMC. The health needs identified in this report help to guide the hospital’s community benefit activities.

Community Definition

Valley Medical Center (VMC) is located at 400 South 43rd Street, Renton, Washington 98055. The service area comprises portions of King County and includes 19 ZIP Codes, representing 7 cities or communities. The hospital service area was determined from the ZIP Codes that reflect a majority of patient admissions.

Assessment Process and Methods

Secondary and primary data were collected to complete the CHNA. Secondary data were collected from a variety of local, county and state sources to present community demographics, social determinants of health, healthcare access, birth characteristics, leading causes of death, chronic disease, health behaviors, mental health, substance use and misuse, and preventive practices. The analysis of secondary data yielded a preliminary list of significant health needs, which then informed primary data collection. The following criterium was used to identify significant health needs:

Primary data were obtained through surveys with 33 community partner stakeholders, public health, and service providers, members of medically underserved, low-income, and minority populations in the community, and individuals or organizations serving or representing the interests of such populations, and 126 surveys with community residents. The primary data collection process was designed to validate secondary data findings, identify additional community issues, solicit information on disparities among subpopulations, ascertain community assets potentially available to address needs and discover gaps in resources.
Priority Health Needs
The community stakeholders were asked to prioritize the significant health needs according to highest level of importance in the community.

Among community member responses, access to health care, disease prevention, chronic disease management, mental health, and physical or sexual abuse were ranked as the top five priority needs in the service area.

Among community partner respondents, economic insecurity, access to health care, mental health, housing and homelessness, and disease prevention were ranked as the top five priority needs in the service area.

Calculations from survey respondents resulted in the following prioritization of the significant health needs.

Prioritized Health Needs –Comparison of Community Residents and Community Partners

<table>
<thead>
<tr>
<th>Significant Health Need (alphabetical order)</th>
<th>Community Residents Important/Very Important</th>
<th>Community Partners Important/Very Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to healthcare</td>
<td>96.6%</td>
<td>96.8%</td>
</tr>
<tr>
<td>Chronic disease management (heart disease,</td>
<td>93.7%</td>
<td>90.3%</td>
</tr>
<tr>
<td>cancer, stroke, diabetes, lung disease, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disease prevention (health education, health screenings, vaccines, fall prevention)</td>
<td>94.4%</td>
<td>93.8%</td>
</tr>
<tr>
<td>Economic insecurity</td>
<td>75.8%</td>
<td>96.9%</td>
</tr>
<tr>
<td>Food insecurity</td>
<td>71.8%</td>
<td>90.9%</td>
</tr>
<tr>
<td>Housing and homelessness</td>
<td>75.8%</td>
<td>93.9%</td>
</tr>
<tr>
<td>Loneliness/isolation</td>
<td>72.8%</td>
<td>87.5%</td>
</tr>
<tr>
<td>Mental health</td>
<td>92.0%</td>
<td>93.9%</td>
</tr>
<tr>
<td>Physical or sexual abuse</td>
<td>85.6%</td>
<td>84.4%</td>
</tr>
<tr>
<td>Sexually transmitted infections</td>
<td>69.6%</td>
<td>75.0%</td>
</tr>
<tr>
<td>Substance use and misuse</td>
<td>84.8%</td>
<td>90.9%</td>
</tr>
<tr>
<td>Weight management/obesity</td>
<td>81.0%</td>
<td>75.8%</td>
</tr>
</tbody>
</table>

Report Adoption, Availability and Comments
This CHNA report was adopted by the Valley Medical Center Board of Directors May 14, 2020.

This report is widely available to the public on the hospital’s web site, https://www.valleymed.org/About-Us/Financial-Information/. Written comments on this report can be submitted to Liz Nolan at liz_nolan@valleymed.org.
Introduction

Background and Purpose
Valley Medical Center (VMC) is a 321-bed acute care hospital and clinic network committed to providing safe, quality, compassionate care since 1947. The oldest and largest public district hospital in the State of Washington, VMC serves more than 600,000 residents in South King County. Dedicated to patient safety and improving the overall health of the community, VMC is a thriving medical center and the largest nonprofit healthcare provider between Seattle and Tacoma. Valley Medical Center is a component entity of UW Medicine, which includes Harborview Medical Center, Northwest Hospital & Medical Center, UW Medical Center, UW Neighborhood Clinics, UW Physicians, UW School of Medicine and Airlift Northwest.

The passage of the Patient Protection and Affordable Care Act requires tax-exempt hospitals to conduct Community Health Needs Assessments (CHNA) every three years and adopt Implementation Strategies to meet the priority health needs identified through the assessment. A CHNA identifies unmet health needs in the service area, provides information to select priorities for action and target geographical areas, and serves as the basis for community benefit programs. This assessment incorporates components of primary data collection and secondary data analysis that focus on the health and social needs of the service area.

Service Area
Valley Medical Center (VMC) is located at 400 South 43rd Street, Renton, Washington 98055. The service area comprises portions of King County and includes 19 ZIP Codes, representing 7 cities or communities. VMC determines the service area by assigning ZIP Codes based on patient discharges. The VMC service area is presented below by community and ZIP Code.

<table>
<thead>
<tr>
<th>City/Community</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>98001</td>
</tr>
<tr>
<td>Auburn</td>
<td>98002</td>
</tr>
<tr>
<td>Auburn</td>
<td>98092</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factory)</td>
<td>98006</td>
</tr>
<tr>
<td>Black Diamond</td>
<td>98010</td>
</tr>
<tr>
<td>Kent</td>
<td>98030</td>
</tr>
<tr>
<td>Kent</td>
<td>98031</td>
</tr>
<tr>
<td>Kent</td>
<td>98032</td>
</tr>
<tr>
<td>Kent (Covington)</td>
<td>98042</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98038</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98051</td>
</tr>
<tr>
<td>Renton</td>
<td>98055</td>
</tr>
<tr>
<td>Renton (Newcastle)</td>
<td>98056</td>
</tr>
<tr>
<td>Renton</td>
<td>98057</td>
</tr>
<tr>
<td>Renton</td>
<td>98058</td>
</tr>
<tr>
<td>City/Community</td>
<td>ZIP Code</td>
</tr>
<tr>
<td>---------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Renton</td>
<td>98059</td>
</tr>
<tr>
<td>Seattle (SeaTac)</td>
<td>98188</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98168</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98178</td>
</tr>
</tbody>
</table>

Project Oversight

The Community Health Needs Assessment process was overseen by:
Consultant
Biel Consulting, Inc. conducted the CHNA. Biel Consulting, Inc. is a specialist in the field of community benefit for nonprofit hospitals. Dr. Melissa Biel has over 24 years of experience conducting hospital Community Health Needs Assessments. For this CHNA, she was assisted by Denise Flanagan, BA.

www.bielconsulting.org
Data Collection Methodology

Secondary Data Collection
Secondary data were collected from a variety of local, county and state sources to present
community demographics, social determinants of health, health care access, birth characteristics,
leading causes of death, chronic disease, health behaviors, mental health, substance use and misuse,
and preventive practices. When available, data sets are presented in the context of King County and
Washington to help frame the scope of an issue as it relates to the broader community.

Sources of data include: the U.S. Census American Community Survey, Washington State Department
of Health, Public Health – Seattle & King County, County Health Rankings, Washington Department of
Commerce, Washington Office of Superintendent of Public Instruction, among others.

Secondary data for the service area were collected and documented in data tables with narrative
explanation. The tables present the data indicator, the geographic area represented, the data
measurement (e.g. rate, number, or percent), county and state comparisons (when available), the
data source, data year and an electronic link to the data source. Analysis of secondary data includes
an examination and reporting of health disparities for some health indicators. The report includes
benchmark comparison data that measure the data findings as compared to Healthy People 2020
objectives, where appropriate. Healthy People 2020 objectives are a national initiative to improve the
public’s health by providing measurable objectives and goals that are applicable at national, state,
and local levels. Attachment 1 compares Healthy People 2020 objectives with service area data.

Primary Data Collection
Valley Medical Center conducted surveys with community partners and community residents to
obtain input on health needs, barriers to care and resources available to address the identified health
needs. The surveys were available in an electronic format through a Survey Monkey link as well as in
print. The surveys were available from January 7 – 31, 2020. During this time, 33 surveys were
collected from community organizations who serve medically underserved, low-income, and minority
populations, and included local health or other departments or agencies that have current data or
other information relevant to the health needs of the community. Additionally, 126 community
members completed the survey. Valley Medical Center distributed the survey link through emails,
social media, news publications and their patient portal. A written introduction explained the
purpose of the survey and assured participants the survey was voluntary, and their responses would
be kept confidential.
The survey asked for respondents’ demographic information. Survey questions focused on the following topics:

- Biggest health issues in the community.
- Persons most impacted by community issues.
- Problems faced accessing health care, mental health care, dental care or supportive services.
- Where people go to receive routine health care services.
- Community conditions that most negatively impact health.

Analysis of the primary data occurred through a process that compared and combined responses to identify themes. The survey responses for community members are in Attachment 2 and the survey responses for community partner agencies can be found in Attachment 3. A list of the community partner respondents, their names and organizations, can be found in Attachment 4.

Public Comment
In compliance with IRS regulations 501(r) for charitable hospitals, a hospital Community Health Needs Assessment (CHNA) and Implementation Strategy are to be made widely available to the public and public comment is to be solicited. The previous Community Health Needs Assessment and Implementation Strategy were made widely available to the public on the website [https://www.valleymed.org/About-Us/Financial-Information/](https://www.valleymed.org/About-Us/Financial-Information/). To date, no comments have been received.
Identification and Prioritization of Significant Health Needs

Review of Primary and Secondary Data
 Significant health needs were identified from secondary data using the size of the problem (relative portion of population experiencing the problem) and the seriousness of the problem (impact at individual, family, and community levels). To determine size or seriousness of the problem, the health need indicators that were identified in the secondary data were measured against benchmark data; specifically, county rates, state rates and/or Healthy People 2020 objectives. Indicators related to the health needs, which performed poorly against one or more of these benchmarks met this criterion to be considered a health need.

The following significant health needs were determined:

- Access to healthcare
- Chronic disease management (heart disease, cancer, stroke, diabetes, lung disease)
- Disease prevention (health education, health screenings, vaccines, fall prevention)
- Economic insecurity
- Food insecurity
- Housing and homelessness
- Loneliness/isolation
- Mental health
- Physical or sexual abuse
- Sexually transmitted infections
- Substance use and misuse
- Weight management/obesity

Priority Health Needs
 The list of significant health needs informed primary data collection. The primary data collection process was designed to validate secondary data findings, identify additional community issues, solicit information on disparities among subpopulations, ascertain community assets to address needs and discover gaps in resources. Community stakeholder surveys were used to gather input and prioritize the significant health needs. The following criterium was used to prioritize the health needs: The level of importance the hospital should place on addressing the issue.

The stakeholders were asked to indicate the level of importance that should be placed on addressing the identified significant community needs from not important to very important. The percentage of responses is presented for those needs rated as important and very important. Not all respondents answered every question. Therefore, the percentages were calculated based on respondents only and not on the entire sample.
Among community member responses, access to healthcare, disease prevention, chronic disease management, mental health, and physical or sexual abuse were ranked as the top five priority needs in the service area. Calculations from community residents resulted in the following prioritization of the significant health needs.

**Prioritization of Health Needs – Community Residents**

<table>
<thead>
<tr>
<th>Significant Health Need</th>
<th>Important/Very Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to healthcare</td>
<td>96.6%</td>
</tr>
<tr>
<td>Disease prevention (health education, health screenings, vaccines, fall prevention)</td>
<td>94.4%</td>
</tr>
<tr>
<td>Chronic disease management (heart disease, cancer, stroke, diabetes, lung disease, etc.)</td>
<td>93.7%</td>
</tr>
<tr>
<td>Mental health</td>
<td>92.0%</td>
</tr>
<tr>
<td>Physical or sexual abuse</td>
<td>85.6%</td>
</tr>
<tr>
<td>Substance use and misuse</td>
<td>84.8%</td>
</tr>
<tr>
<td>Weight management/obesity</td>
<td>81.0%</td>
</tr>
<tr>
<td>Economic insecurity</td>
<td>75.8%</td>
</tr>
<tr>
<td>Housing and homelessness</td>
<td>75.8%</td>
</tr>
<tr>
<td>Loneliness/isolation</td>
<td>72.8%</td>
</tr>
<tr>
<td>Food insecurity</td>
<td>71.8%</td>
</tr>
<tr>
<td>Sexually transmitted infections</td>
<td>69.6%</td>
</tr>
</tbody>
</table>

Among community partner respondents, economic insecurity, access to health care, mental health, housing and homelessness, and disease prevention were ranked as the top five priority needs in the service area. Calculations from community partners resulted in the following prioritization of the significant health needs.

**Prioritization of Health Needs – Community Partners**

<table>
<thead>
<tr>
<th>Significant Health Need</th>
<th>Important/Very Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Economic insecurity</td>
<td>96.9%</td>
</tr>
<tr>
<td>Access to healthcare</td>
<td>96.8%</td>
</tr>
<tr>
<td>Mental health</td>
<td>93.9%</td>
</tr>
<tr>
<td>Housing and homelessness</td>
<td>93.9%</td>
</tr>
<tr>
<td>Disease prevention (health education, health screenings, vaccines, fall prevention)</td>
<td>93.8%</td>
</tr>
<tr>
<td>Substance use and misuse</td>
<td>90.9%</td>
</tr>
<tr>
<td>Food insecurity</td>
<td>90.9%</td>
</tr>
<tr>
<td>Chronic disease management (heart disease, cancer, stroke, diabetes, lung disease, etc.)</td>
<td>90.3%</td>
</tr>
<tr>
<td>Loneliness/isolation</td>
<td>87.5%</td>
</tr>
<tr>
<td>Physical or sexual abuse</td>
<td>84.4%</td>
</tr>
<tr>
<td>Weight management/obesity</td>
<td>75.8%</td>
</tr>
<tr>
<td>Sexually transmitted infections</td>
<td>75.0%</td>
</tr>
</tbody>
</table>
Resources to Address Significant Health Needs

Through the survey process, stakeholders identified community resources potentially available to address the significant health needs. The identified community resources are presented in Attachment 5.

Review of Progress

In 2017, Valley Medical Center conducted the previous Community Health Needs Assessment. Significant health needs were identified from issues supported by primary and secondary data sources gathered for the CHNA. The hospital’s Implementation Strategy associated with the 2017 CHNA addressed: access to care, mental and behavioral health, chronic conditions and preventive care (includes overweight/obesity and smoking), and family and social support through a commitment of community benefit programs and resources. The impact of the actions that VMC used to address these significant health needs can be found in Attachment 6.
Community Demographics

Population

The population of the Valley Medical Center service area is 588,774. From 2012 to 2017, the population increased by 7.9%.

Total Population and Change in Population, 2012-2017

<table>
<thead>
<tr>
<th></th>
<th>VMC Service Area</th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>588,774</td>
<td>2,118,119</td>
<td>7,169,967</td>
</tr>
<tr>
<td>Change in population</td>
<td>7.9%</td>
<td>9.1%</td>
<td>6.4%</td>
</tr>
</tbody>
</table>


The hospital service area population is 50.0% female and 50.0% male.

Population by Gender

<table>
<thead>
<tr>
<th></th>
<th>VMC Service Area</th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>50.0%</td>
<td>50.0%</td>
<td>49.9%</td>
</tr>
<tr>
<td>Female</td>
<td>50.0%</td>
<td>50.0%</td>
<td>50.1%</td>
</tr>
</tbody>
</table>


Children and youth, ages 0-19, make up 26.2% of the population, 62.3% are adults, ages 20-64, and 11.5% of the population are seniors, ages 65 and over. The population in the service area has a higher percentage of children and youth, and adults 45-64, and a lower percentage of young adults, ages 20-24, and seniors, than found in the county or state.

Population by Age

<table>
<thead>
<tr>
<th></th>
<th>VMC Service Area</th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>Percent</td>
<td>Number</td>
<td>Percent</td>
</tr>
<tr>
<td>Age 0-4</td>
<td>40,490</td>
<td>6.9%</td>
<td>127,205</td>
</tr>
<tr>
<td>Age 5-19</td>
<td>113,606</td>
<td>19.3%</td>
<td>358,404</td>
</tr>
<tr>
<td>Age 20-24</td>
<td>36,142</td>
<td>6.1%</td>
<td>132,420</td>
</tr>
<tr>
<td>Age 25-44</td>
<td>171,441</td>
<td>29.1%</td>
<td>682,455</td>
</tr>
<tr>
<td>Age 45-64</td>
<td>159,261</td>
<td>27.1%</td>
<td>553,815</td>
</tr>
<tr>
<td>Age 65+</td>
<td>67,834</td>
<td>11.5%</td>
<td>263,820</td>
</tr>
</tbody>
</table>


When the service area is examined by community, Maple Valley 98038 has the highest percentage of children and youth (31.3%). Seattle SeaTac ZIP Code 98188 (22.2%), Renton 98055 (22.4%) and Renton Newcastle ZIP 98056 (22.6%) have the lowest percentages of children and youth in the service area.
The percent of the population 65 years and older in the service area is 11.5%, which is lower than the state rate of 14.4%. Bellevue 98006 has the highest percentage of seniors in the area (14.7%). Kent 98032 has the lowest percentage of seniors in the service area (9.5%).

### Population by Youth, Ages 0-19, and Seniors, Ages 65+

<table>
<thead>
<tr>
<th>ZIP Code</th>
<th>Total Population</th>
<th>Youth Ages 0 – 19</th>
<th>Seniors Ages 65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn 98001</td>
<td>32,789</td>
<td>27.4%</td>
<td>11.5%</td>
</tr>
<tr>
<td>Auburn 98002</td>
<td>34,255</td>
<td>28.9%</td>
<td>12.1%</td>
</tr>
<tr>
<td>Auburn 98092</td>
<td>44,821</td>
<td>27.5%</td>
<td>10.9%</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factorya) 98006</td>
<td>37,231</td>
<td>25.5%</td>
<td>14.7%</td>
</tr>
<tr>
<td>Black Diamond 98010</td>
<td>5,218</td>
<td>25.9%</td>
<td>13.1%</td>
</tr>
<tr>
<td>Kent 98030</td>
<td>36,968</td>
<td>28.7%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Kent 98031</td>
<td>37,292</td>
<td>26.2%</td>
<td>10.9%</td>
</tr>
<tr>
<td>Kent 98032</td>
<td>36,814</td>
<td>25.5%</td>
<td>9.5%</td>
</tr>
<tr>
<td>Kent (Covington) 98042</td>
<td>47,043</td>
<td>25.6%</td>
<td>12.3%</td>
</tr>
<tr>
<td>Maple Valley 98038</td>
<td>35,126</td>
<td>31.3%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Maple Valley 98051</td>
<td>3,773</td>
<td>24.4%</td>
<td>10.8%</td>
</tr>
<tr>
<td>Renton 98055</td>
<td>23,782</td>
<td>22.4%</td>
<td>11.7%</td>
</tr>
<tr>
<td>Renton (Newcastle) 98056</td>
<td>35,652</td>
<td>22.6%</td>
<td>9.8%</td>
</tr>
<tr>
<td>Renton 98057</td>
<td>13,089</td>
<td>23.1%</td>
<td>9.8%</td>
</tr>
<tr>
<td>Renton 98058</td>
<td>42,649</td>
<td>24.8%</td>
<td>13.4%</td>
</tr>
<tr>
<td>Renton 98059</td>
<td>37,570</td>
<td>27.5%</td>
<td>12.0%</td>
</tr>
<tr>
<td>Seattle (SeaTac) 98188</td>
<td>25,652</td>
<td>22.2%</td>
<td>11.3%</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98168</td>
<td>31,771</td>
<td>25.4%</td>
<td>11.3%</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98178</td>
<td>27,279</td>
<td>26.4%</td>
<td>13.5%</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td>588,774</td>
<td>26.2%</td>
<td>11.5%</td>
</tr>
<tr>
<td>King County</td>
<td>2,118,119</td>
<td>22.9%</td>
<td>12.5%</td>
</tr>
<tr>
<td>Washington</td>
<td>7,169,967</td>
<td>24.9%</td>
<td>14.4%</td>
</tr>
</tbody>
</table>


### Race/Ethnicity

The majority population in the service area identifies as White/Caucasian (53.6%), with 17.4% of the population identifying as Asian, 12.5% of the population is Hispanic/Latino, and 8.5% of the population is Black/African American. Individuals identifying as multiracial (two-or-more races) make up 5.6% of the population, while Native Hawaiian/Pacific Islanders are 1.3%, and American Indian/Alaskan Natives are 0.9% of the population.
When race/ethnicity is examined by place, Bellevue 98006 (34.2%) and Seattle (Tukwila) 98178 (31.3%) have the highest percentage of Asians. Seattle (Tukwila) 98178 (24.2%) and Seattle SeaTac 98188 (23.2%) have the highest percentage of Black/African Americans. Kent 98032 has the highest percentage of Latinos (24.3%) in the service area. Maple Valley 98051 has the highest percentage of Whites (86.1%).

**Race/Ethnicity by ZIP Code**

<table>
<thead>
<tr>
<th>ZIP Code</th>
<th>White</th>
<th>Asian</th>
<th>Hispanic Latino</th>
<th>Black</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>98001</td>
<td>61.1%</td>
<td>11.4%</td>
<td>12.0%</td>
</tr>
<tr>
<td>Auburn</td>
<td>98002</td>
<td>54.8%</td>
<td>5.7%</td>
<td>23.3%</td>
</tr>
<tr>
<td>Auburn</td>
<td>98092</td>
<td>66.2%</td>
<td>11.4%</td>
<td>7.6%</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factoria)</td>
<td>98006</td>
<td>52.6%</td>
<td>34.2%</td>
<td>5.2%</td>
</tr>
<tr>
<td>Black Diamond</td>
<td>98010</td>
<td>80.1%</td>
<td>3.0%</td>
<td>11.7%</td>
</tr>
<tr>
<td>Kent</td>
<td>98030</td>
<td>44.0%</td>
<td>20.9%</td>
<td>13.3%</td>
</tr>
<tr>
<td>Kent</td>
<td>98031</td>
<td>45.4%</td>
<td>26.1%</td>
<td>13.4%</td>
</tr>
<tr>
<td>Kent (Covington)</td>
<td>98042</td>
<td>70.7%</td>
<td>10.8%</td>
<td>8.1%</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98038</td>
<td>82.1%</td>
<td>4.3%</td>
<td>5.2%</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98051</td>
<td>86.1%</td>
<td>4.0%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Renton</td>
<td>98055</td>
<td>41.5%</td>
<td>25.0%</td>
<td>9.6%</td>
</tr>
<tr>
<td>Renton (Newcastle)</td>
<td>98056</td>
<td>51.7%</td>
<td>20.6%</td>
<td>14.6%</td>
</tr>
<tr>
<td>Renton</td>
<td>98057</td>
<td>38.5%</td>
<td>22.2%</td>
<td>14.6%</td>
</tr>
<tr>
<td>Renton</td>
<td>98058</td>
<td>59.5%</td>
<td>16.4%</td>
<td>10.3%</td>
</tr>
<tr>
<td>Renton</td>
<td>98059</td>
<td>57.9%</td>
<td>22.9%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Seattle (SeaTac)</td>
<td>98188</td>
<td>35.3%</td>
<td>15.9%</td>
<td>15.7%</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98168</td>
<td>39.2%</td>
<td>19.1%</td>
<td>22.5%</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98178</td>
<td>25.4%</td>
<td>31.3%</td>
<td>9.5%</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td></td>
<td>53.6%</td>
<td>17.4%</td>
<td>12.5%</td>
</tr>
<tr>
<td>King County</td>
<td></td>
<td>61.4%</td>
<td>16.5%</td>
<td>9.5%</td>
</tr>
<tr>
<td>Washington</td>
<td></td>
<td>69.8%</td>
<td>8.0%</td>
<td>12.3%</td>
</tr>
</tbody>
</table>

**Language**

In the service area, 68.6% of the population 5 years and older speak only English in the home. 13% speak an Asian/Pacific Islander language and 8.8% speak Spanish in the home.

**Language Spoken at Home for the Population 5 Years and Over**
Population 5 years and older | VMC Service Area | King County | Washington
--- | --- | --- | ---
English only | 68.6% | 73.3% | 80.9%
Speaks Spanish | 8.8% | 6.6% | 8.4%
Speaks other Indo-European language | 6.9% | 6.5% | 3.9%
Speaks Asian or Pacific Islander language | 13.0% | 11.4% | 5.7%
Speaks other language | 2.7% | 2.3% | 1.1%


The highest percentage of Asian language speakers, among area cities, is in Seattle/Tukwila 98178 (26.7%) and Bellevue/Newcastle/Factoria 98092 (25.9%). Seattle/Tukwila 98168 (18.2%), Auburn 98002 (17.7%) and Kent 98032 (17.4%) have high percentages of Spanish speakers. Kent 98030 (15.7%) has the highest percentage of Indo-European languages spoken at home in the service area.

### Language Spoken at Home by ZIP Code

<table>
<thead>
<tr>
<th>ZIP Code</th>
<th>English</th>
<th>Asian/Pacific Islander</th>
<th>Spanish</th>
<th>Other Indo European</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn 98001</td>
<td>71.1%</td>
<td>8.5%</td>
<td>8.5%</td>
<td>11.1%</td>
</tr>
<tr>
<td>Auburn 98002</td>
<td>70.0%</td>
<td>7.0%</td>
<td>17.7%</td>
<td>4.8%</td>
</tr>
<tr>
<td>Auburn 98092</td>
<td>78.9%</td>
<td>8.8%</td>
<td>4.9%</td>
<td>6.8%</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factoria) 98006</td>
<td>65.2%</td>
<td>25.9%</td>
<td>2.9%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Black Diamond 98010</td>
<td>89.9%</td>
<td>1.5%</td>
<td>7.4%</td>
<td>1.0%</td>
</tr>
<tr>
<td>Kent 98030</td>
<td>55.4%</td>
<td>12.8%</td>
<td>10.1%</td>
<td>15.7%</td>
</tr>
<tr>
<td>Kent 98031</td>
<td>57.7%</td>
<td>16.6%</td>
<td>10.6%</td>
<td>11.8%</td>
</tr>
<tr>
<td>Kent 98032</td>
<td>64.3%</td>
<td>9.9%</td>
<td>17.4%</td>
<td>5.4%</td>
</tr>
<tr>
<td>Kent (Covington) 98042</td>
<td>81.1%</td>
<td>7.7%</td>
<td>5.0%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Maple Valley 98038</td>
<td>93.8%</td>
<td>2.5%</td>
<td>2.2%</td>
<td>1.1%</td>
</tr>
<tr>
<td>Maple Valley 98051</td>
<td>94.2%</td>
<td>3.7%</td>
<td>2.1%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Renton 98055</td>
<td>63.7%</td>
<td>16.1%</td>
<td>5.3%</td>
<td>11.8%</td>
</tr>
<tr>
<td>Renton (Newcastle) 98056</td>
<td>61.3%</td>
<td>16.4%</td>
<td>12.6%</td>
<td>8.2%</td>
</tr>
<tr>
<td>Renton 98057</td>
<td>67.4%</td>
<td>16.9%</td>
<td>10.0%</td>
<td>2.8%</td>
</tr>
<tr>
<td>Renton 98058</td>
<td>74.7%</td>
<td>12.0%</td>
<td>6.3%</td>
<td>5.6%</td>
</tr>
<tr>
<td>Renton 98059</td>
<td>73.0%</td>
<td>15.8%</td>
<td>5.2%</td>
<td>4.9%</td>
</tr>
<tr>
<td>Seattle (SeaTac) 98188</td>
<td>51.3%</td>
<td>11.1%</td>
<td>10.7%</td>
<td>11.5%</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98168</td>
<td>54.2%</td>
<td>16.0%</td>
<td>18.2%</td>
<td>4.6%</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98178</td>
<td>61.1%</td>
<td>26.7%</td>
<td>6.7%</td>
<td>1.3%</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td>68.6%</td>
<td>13.0%</td>
<td>8.8%</td>
<td>6.9%</td>
</tr>
<tr>
<td>King County</td>
<td>73.3%</td>
<td>11.4%</td>
<td>6.6%</td>
<td>6.5%</td>
</tr>
</tbody>
</table>


Among area school districts, the percentage of students classified as English Language Learners ranges from 2.4% in the Tahoma School District to 37.8% in the Tukwila School District. The percentage of bilingual students in area school districts, with the exception of Tahoma, are all higher than the state (11.7%).

### English Language Learner Students by School District
<table>
<thead>
<tr>
<th>School District</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn School District</td>
<td>18.2%</td>
</tr>
<tr>
<td>Kent School District</td>
<td>20.4%</td>
</tr>
<tr>
<td>Renton School District</td>
<td>17.5%</td>
</tr>
<tr>
<td>Tahoma School District</td>
<td>2.4%</td>
</tr>
<tr>
<td>Tukwila School District</td>
<td>37.8%</td>
</tr>
<tr>
<td>Washington</td>
<td>11.7%</td>
</tr>
</tbody>
</table>

Social Determinants of Health

Social and Economic Factors Ranking

County Health Rankings ranks counties according to health factors data. Social and economic indicators are examined as a contributor to the health of a county’s residents. Washington’s 39 counties are ranked according to social and economic factors with 1 being the county with the best factors to 39 for the county with the poorest factors. This ranking examines: high school graduation rates, unemployment, children in poverty, social support, and others. King County is ranked third among Washington counties, according to social and economic factors.

<table>
<thead>
<tr>
<th>Social and Economic Factors Ranking</th>
<th>County Ranking (out of 39)</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>3</td>
</tr>
</tbody>
</table>

Source: County Health Rankings, 2019 [http://www.countyhealthrankings.org](http://www.countyhealthrankings.org)

Unemployment

The unemployment rate in the hospital service area, averaged over 5 years, was 5.7%. This is higher than King County (5.0%), but lower than the state unemployment rate (6%). The highest rate of unemployment was found in Auburn 98002 (7.5%), and the lowest (3.7%) in Bellevue/Newcastle/Factoria 98006.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>98001</td>
<td>16,907</td>
<td>977</td>
<td>5.8%</td>
</tr>
<tr>
<td>Auburn</td>
<td>98002</td>
<td>16,362</td>
<td>1,226</td>
<td>7.5%</td>
</tr>
<tr>
<td>Auburn</td>
<td>98092</td>
<td>23,702</td>
<td>1,471</td>
<td>6.2%</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factoria)</td>
<td>98006</td>
<td>18,680</td>
<td>692</td>
<td>3.7%</td>
</tr>
<tr>
<td>Black Diamond</td>
<td>98010</td>
<td>2,646</td>
<td>132</td>
<td>5.0%</td>
</tr>
<tr>
<td>Kent</td>
<td>98030</td>
<td>18,855</td>
<td>1,205</td>
<td>6.4%</td>
</tr>
<tr>
<td>Kent</td>
<td>98031</td>
<td>20,779</td>
<td>1,404</td>
<td>6.8%</td>
</tr>
<tr>
<td>Kent</td>
<td>98032</td>
<td>19,154</td>
<td>1,306</td>
<td>6.8%</td>
</tr>
<tr>
<td>Kent (Covington)</td>
<td>98042</td>
<td>25,830</td>
<td>1,224</td>
<td>4.7%</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98038</td>
<td>18,314</td>
<td>1,084</td>
<td>5.9%</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98051</td>
<td>1,899</td>
<td>96</td>
<td>5.1%</td>
</tr>
<tr>
<td>Renton</td>
<td>98055</td>
<td>13,687</td>
<td>640</td>
<td>4.7%</td>
</tr>
<tr>
<td>Renton (Newcastle)</td>
<td>98056</td>
<td>21,054</td>
<td>1,109</td>
<td>5.3%</td>
</tr>
<tr>
<td>Renton</td>
<td>98057</td>
<td>7,388</td>
<td>423</td>
<td>5.7%</td>
</tr>
<tr>
<td>Renton</td>
<td>98058</td>
<td>23,402</td>
<td>1,093</td>
<td>4.7%</td>
</tr>
<tr>
<td>Renton</td>
<td>98059</td>
<td>20,452</td>
<td>992</td>
<td>4.9%</td>
</tr>
<tr>
<td>Seattle (SeaTac)</td>
<td>98188</td>
<td>14,557</td>
<td>730</td>
<td>5.0%</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98168</td>
<td>16,982</td>
<td>1,355</td>
<td>8.0%</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98178</td>
<td>14,235</td>
<td>647</td>
<td>4.6%</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td>1,200,419</td>
<td>60,066</td>
<td>5.0%</td>
<td></td>
</tr>
<tr>
<td>King County</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
ZIP Code | Civilian Labor Force | Unemployed | Unemployment Rate
--- | --- | --- | ---
Washington | 3,636,944 | 218,821 | 6.0%


Poverty

Poverty thresholds are used for calculating official poverty population statistics. They are updated each year by the Census Bureau. For 2017, the federal poverty level (FPL) for one person was $12,488 and for a family of four $24,858.

Among the residents in the service area, 10.9% are at or below 100% of the federal poverty level (FPL) and 25.8% are at 200% of FPL or below. These rates of poverty are lower than found in the state, but higher than county levels. The highest rates of poverty in the service area are found in Renton 98057 (21%), Kent 98030 (20.3%) and Auburn 98002 (19.2%). High rates of low-income residents are found in Renton 98057 (43.6%), Kent 98032 (41%) and Auburn 98002 (40.8%).

<table>
<thead>
<tr>
<th>ZIP Code</th>
<th>&lt;100% FPL</th>
<th>&lt;200% FPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn 98001</td>
<td>10.0%</td>
<td>26.9%</td>
</tr>
<tr>
<td>Auburn 98002</td>
<td>19.2%</td>
<td>40.8%</td>
</tr>
<tr>
<td>Auburn 98092</td>
<td>7.7%</td>
<td>21.6%</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factoria) 98006</td>
<td>4.2%</td>
<td>12.2%</td>
</tr>
<tr>
<td>Black Diamond 98010</td>
<td>7.9%</td>
<td>15.0%</td>
</tr>
<tr>
<td>Kent 98030</td>
<td>20.3%</td>
<td>36.4%</td>
</tr>
<tr>
<td>Kent 98031</td>
<td>11.8%</td>
<td>27.3%</td>
</tr>
<tr>
<td>Kent 98032</td>
<td>16.1%</td>
<td>41.0%</td>
</tr>
<tr>
<td>Kent (Covington) 98042</td>
<td>6.2%</td>
<td>16.5%</td>
</tr>
<tr>
<td>Maple Valley 98038</td>
<td>5.0%</td>
<td>10.8%</td>
</tr>
<tr>
<td>Maple Valley 98051</td>
<td>4.9%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Renton 98055</td>
<td>9.9%</td>
<td>24.3%</td>
</tr>
<tr>
<td>Renton (Newcastle) 98056</td>
<td>9.7%</td>
<td>21.8%</td>
</tr>
<tr>
<td>Renton 98057</td>
<td>21.0%</td>
<td>43.6%</td>
</tr>
<tr>
<td>Renton 98058</td>
<td>5.9%</td>
<td>17.5%</td>
</tr>
<tr>
<td>Renton 98059</td>
<td>5.9%</td>
<td>15.7%</td>
</tr>
<tr>
<td>Seattle (SeaTac) 98188</td>
<td>14.0%</td>
<td>38.7%</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98168</td>
<td>17.1%</td>
<td>38.9%</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98178</td>
<td>15.5%</td>
<td>33.0%</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td>10.9%</td>
<td>25.8%</td>
</tr>
<tr>
<td>King County</td>
<td>10.2%</td>
<td>22.0%</td>
</tr>
<tr>
<td>Washington 12.2%</td>
<td>28.2%</td>
<td></td>
</tr>
</tbody>
</table>


When examined by ZIP Code, Auburn 98002 has the highest rate of poverty among children (29.1%) in the service area. Kent 98030 has the highest rate of poverty among seniors (20.1%). In Black Diamond, almost half of households (48.6%) with a female head-of-household (HoH), living with her own children, under the age of 18, live in poverty.
<table>
<thead>
<tr>
<th></th>
<th>ZIP Code</th>
<th>Children</th>
<th>Seniors</th>
<th>Female HoH with Children*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>98001</td>
<td>15.8%</td>
<td>6.3%</td>
<td>31.8%</td>
</tr>
<tr>
<td>Auburn</td>
<td>98002</td>
<td>29.1%</td>
<td>10.0%</td>
<td>39.8%</td>
</tr>
<tr>
<td>Auburn</td>
<td>98092</td>
<td>10.8%</td>
<td>2.7%</td>
<td>18.7%</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factoria)</td>
<td>98006</td>
<td>4.1%</td>
<td>3.5%</td>
<td>5.2%</td>
</tr>
<tr>
<td>Black Diamond</td>
<td>98010</td>
<td>6.2%</td>
<td>4.1%</td>
<td>48.6%</td>
</tr>
<tr>
<td>Kent</td>
<td>98030</td>
<td>26.4%</td>
<td>20.1%</td>
<td>37.2%</td>
</tr>
<tr>
<td>Kent</td>
<td>98031</td>
<td>20.2%</td>
<td>8.8%</td>
<td>33.8%</td>
</tr>
<tr>
<td>Kent</td>
<td>98032</td>
<td>21.9%</td>
<td>10.6%</td>
<td>23.0%</td>
</tr>
<tr>
<td>Kent (Covington)</td>
<td>98042</td>
<td>8.2%</td>
<td>6.5%</td>
<td>21.7%</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98038</td>
<td>5.2%</td>
<td>5.2%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98051</td>
<td>0.5%</td>
<td>2.9%</td>
<td>34.7%</td>
</tr>
<tr>
<td>Renton</td>
<td>98055</td>
<td>16.3%</td>
<td>6.2%</td>
<td>28.0%</td>
</tr>
<tr>
<td>Renton (Newcastle)</td>
<td>98056</td>
<td>12.6%</td>
<td>8.4%</td>
<td>31.4%</td>
</tr>
<tr>
<td>Renton</td>
<td>98057</td>
<td>25.3%</td>
<td>12.6%</td>
<td>31.0%</td>
</tr>
<tr>
<td>Renton</td>
<td>98058</td>
<td>9.3%</td>
<td>4.8%</td>
<td>20.3%</td>
</tr>
<tr>
<td>Renton</td>
<td>98059</td>
<td>7.0%</td>
<td>2.0%</td>
<td>17.8%</td>
</tr>
<tr>
<td>Seattle (SeaTac)</td>
<td>98188</td>
<td>24.3%</td>
<td>8.4%</td>
<td>33.3%</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98168</td>
<td>25.3%</td>
<td>10.1%</td>
<td>29.1%</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98178</td>
<td>28.5%</td>
<td>8.0%</td>
<td>40.6%</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td></td>
<td>15.8%</td>
<td>7.2%</td>
<td>30.7%</td>
</tr>
<tr>
<td>King County</td>
<td></td>
<td>12.3%</td>
<td>8.7%</td>
<td>28.9%</td>
</tr>
<tr>
<td>Washington</td>
<td></td>
<td>15.8%</td>
<td>7.9%</td>
<td>34.4%</td>
</tr>
</tbody>
</table>


Free and Reduced Price Meals

The percentage of students eligible for the free and reduced price meal program is one indicator of socioeconomic status. In Tukwila School District, 67.4% of the student population are eligible for the free and reduced price meal program, which is higher than the state rate of 43.4%. Auburn (51.9%), Kent (48%), and Renton (46.7%) school districts also have higher rates of student eligibility than the county or state.

Free and Reduced Price Meals Eligibility, 2015-2016

<table>
<thead>
<tr>
<th></th>
<th>Percent Eligible Children</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2015</td>
</tr>
<tr>
<td>Auburn School District</td>
<td>48.5%</td>
</tr>
<tr>
<td>Kent School District</td>
<td>50.5%</td>
</tr>
<tr>
<td>Renton School District</td>
<td>52.4%</td>
</tr>
<tr>
<td>Tahoma School District</td>
<td>11.7%</td>
</tr>
<tr>
<td>Tukwila School District</td>
<td>69.9%</td>
</tr>
<tr>
<td>King County</td>
<td>34.3%</td>
</tr>
<tr>
<td>Washington</td>
<td>44.4%</td>
</tr>
</tbody>
</table>

Households
In the hospital service area, there are 212,354 households and 223,411 housing units. Over the last five years, the population grew by 7.9%, the number of households grew at a rate of 5%, housing units grew at a rate of 4.3%, and vacant units decreased by 8.3%. Owner-occupied housing increased by 2.7% and renters increased by 9.4%.

Households and Housing Units, and Percent Change, 2012-2017

<table>
<thead>
<tr>
<th></th>
<th>VMC Service Area</th>
<th></th>
<th>King County</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2012</td>
<td>2017</td>
<td>Percent</td>
<td>2012</td>
<td>2017</td>
</tr>
<tr>
<td>Households</td>
<td>202,170</td>
<td>212,354</td>
<td>5.0%</td>
<td>796,555</td>
<td>851,077</td>
</tr>
<tr>
<td>Housing units</td>
<td>214,233</td>
<td>223,411</td>
<td>4.3%</td>
<td>851,180</td>
<td>902,107</td>
</tr>
<tr>
<td>Owner occ.</td>
<td>130,995</td>
<td>134,480</td>
<td>2.7%</td>
<td>469,030</td>
<td>488,554</td>
</tr>
<tr>
<td>Renter occ.</td>
<td>71,175</td>
<td>77,874</td>
<td>9.4%</td>
<td>327,525</td>
<td>362,523</td>
</tr>
<tr>
<td>Vacant</td>
<td>12,063</td>
<td>11,057</td>
<td>-8.3%</td>
<td>54,625</td>
<td>51,030</td>
</tr>
</tbody>
</table>


The weighted average of the median household income in the area is $76,943, and ranges from $44,291 in Renton 98057 to $126,601 in Bellevue (Newcastle/Factory).

 Median Household Income

<table>
<thead>
<tr>
<th>ZIP Code</th>
<th>Households</th>
<th>Median Household Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>98001</td>
<td>11,097</td>
</tr>
<tr>
<td>Auburn</td>
<td>98002</td>
<td>13,111</td>
</tr>
<tr>
<td>Auburn</td>
<td>98092</td>
<td>15,985</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factory)</td>
<td>98006</td>
<td>13,356</td>
</tr>
<tr>
<td>Black Diamond</td>
<td>98010</td>
<td>1,961</td>
</tr>
<tr>
<td>Kent</td>
<td>98030</td>
<td>11,967</td>
</tr>
<tr>
<td>Kent</td>
<td>98031</td>
<td>12,554</td>
</tr>
<tr>
<td>Kent</td>
<td>98032</td>
<td>13,752</td>
</tr>
<tr>
<td>Kent (Covington)</td>
<td>98042</td>
<td>16,408</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98038</td>
<td>12,190</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98051</td>
<td>1,382</td>
</tr>
<tr>
<td>Renton</td>
<td>98055</td>
<td>9,256</td>
</tr>
<tr>
<td>Renton (Newcastle)</td>
<td>98056</td>
<td>13,964</td>
</tr>
<tr>
<td>Renton</td>
<td>98057</td>
<td>5,937</td>
</tr>
<tr>
<td>Renton</td>
<td>98058</td>
<td>15,758</td>
</tr>
<tr>
<td>Renton</td>
<td>98059</td>
<td>13,423</td>
</tr>
<tr>
<td>Seattle (SeaTac)</td>
<td>98188</td>
<td>9,517</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98168</td>
<td>11,236</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98178</td>
<td>9,500</td>
</tr>
<tr>
<td>Valley Medical Center Service Area</td>
<td>212,354</td>
<td>*$76,943</td>
</tr>
<tr>
<td>King County</td>
<td>851,077</td>
<td>$83,571</td>
</tr>
<tr>
<td>Washington</td>
<td>2,755,697</td>
<td>$66,174</td>
</tr>
</tbody>
</table>

According to the US Department of Housing and Urban Development, those who spend more than 30% of their income on housing are said to be “cost burdened.” Those who spend 50% or more are considered “severely cost burdened.” Over one-third (36.4%) of owner and renter occupied households in the service area spend 30% or more of their income on housing. This is higher than the county (34.6%) and state (33.8%) rates. The communities with the highest percentage of households spending 30% or more of their income on housing are Renton (Newcastle) 98056 (51.4%), Seattle (Tukwila) 98178 (46.6%) and Seattle (SeaTac) 98188 (45.9%).

<table>
<thead>
<tr>
<th>Households that Spend 30% or More of Income on Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>ZIP Code</td>
</tr>
<tr>
<td>----------</td>
</tr>
<tr>
<td>Auburn 98001</td>
</tr>
<tr>
<td>Auburn 98002</td>
</tr>
<tr>
<td>Auburn 98092</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factoria) 98006</td>
</tr>
<tr>
<td>Black Diamond 98010</td>
</tr>
<tr>
<td>Kent 98030</td>
</tr>
<tr>
<td>Kent 98031</td>
</tr>
<tr>
<td>Kent 98032</td>
</tr>
<tr>
<td>Kent (Covington) 98042</td>
</tr>
<tr>
<td>Maple Valley 98038</td>
</tr>
<tr>
<td>Maple Valley 98051</td>
</tr>
<tr>
<td>Renton 98055</td>
</tr>
<tr>
<td>Renton (Newcastle) 98056</td>
</tr>
<tr>
<td>Renton 98057</td>
</tr>
<tr>
<td>Renton 98058</td>
</tr>
<tr>
<td>Renton 98059</td>
</tr>
<tr>
<td>Seattle (SeaTac) 98188</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98168</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98178</td>
</tr>
<tr>
<td>VMC Service Area</td>
</tr>
<tr>
<td>King County</td>
</tr>
<tr>
<td>Washington</td>
</tr>
</tbody>
</table>

Households by Type
When households are examined by type, the Valley Medical Center service area has almost one-third (32.2%) of family households with children under 18 years old, and 6.5% of households with a female as head of household and children; these rates are higher than the county and state rates. Among service area households, 7.3% are seniors living alone, which is lower than county and state rates.

### Households by Type

<table>
<thead>
<tr>
<th></th>
<th>Total Households</th>
<th>Family Households with Children under Age 18</th>
<th>Female Head of Household with own Children under Age 18</th>
<th>Seniors, 65+, Living Alone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Percent</td>
<td>Percent</td>
<td>Percent</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td>212,354</td>
<td>32.2%</td>
<td>6.5%</td>
<td>7.3%</td>
</tr>
<tr>
<td>King County</td>
<td>851,077</td>
<td>27.1%</td>
<td>4.4%</td>
<td>8.7%</td>
</tr>
<tr>
<td>Washington</td>
<td>2,755,697</td>
<td>28.2%</td>
<td>5.6%</td>
<td>9.8%</td>
</tr>
</tbody>
</table>


Homelessness
A point-in-time count of homeless people is conducted annually in every county in the state. The 2019 point-in-time count estimated 11,199 homeless individuals in King County. 53.3% of the homeless in King County are sheltered, and 19.8% are considered to be chronically homeless. Over the past four years, the homeless population has risen statewide and in King County. The proportion of homeless who are unsheltered and the percentage who are considered chronically homeless have risen.

### Homeless Point-in-Time Count, 2015 and 2019

<table>
<thead>
<tr>
<th></th>
<th>King County 2015</th>
<th>King County 2019</th>
<th>Washington 2015</th>
<th>Washington 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Homeless</td>
<td>10,122</td>
<td>11,199</td>
<td>19,418</td>
<td>21,621</td>
</tr>
<tr>
<td>Sheltered</td>
<td>62.4%</td>
<td>53.3%</td>
<td>63.3%</td>
<td>55.6%</td>
</tr>
<tr>
<td>Unsheltered</td>
<td>37.6%</td>
<td>46.7%</td>
<td>36.7%</td>
<td>44.4%</td>
</tr>
<tr>
<td>Chronically homeless</td>
<td>8.0%</td>
<td>19.8%</td>
<td>11.6%</td>
<td>13.1%</td>
</tr>
</tbody>
</table>

Educational Attainment

Educational attainment is a key driver of health. In the hospital service area, 10.6% of adults, 25 and over, lack a high school diploma, which is higher than county and state rates. 42.3% of area adults have a college degree, which is lower than the county and state rates.

<table>
<thead>
<tr>
<th>Education Levels, Population 25 Years and Older</th>
<th>VMC Service Area</th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population 25 years and older</td>
<td>398,536</td>
<td>1,500,090</td>
<td>4,896,055</td>
</tr>
<tr>
<td>Less than 9th grade</td>
<td>4.6%</td>
<td>3.4%</td>
<td>3.8%</td>
</tr>
<tr>
<td>9th to 12th grade, no diploma</td>
<td>5.9%</td>
<td>3.9%</td>
<td>5.3%</td>
</tr>
<tr>
<td>High school graduate</td>
<td>24.3%</td>
<td>15.5%</td>
<td>22.5%</td>
</tr>
<tr>
<td>Some college, no degree</td>
<td>22.9%</td>
<td>18.6%</td>
<td>24.0%</td>
</tr>
<tr>
<td>Associate’s degree</td>
<td>10.0%</td>
<td>8.1%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Bachelor’s degree</td>
<td>21.9%</td>
<td>30.7%</td>
<td>21.7%</td>
</tr>
<tr>
<td>Graduate/professional degree</td>
<td>10.4%</td>
<td>19.6%</td>
<td>12.7%</td>
</tr>
</tbody>
</table>


High School Graduation Rates

High school graduation rates are the percentage of high school students that graduate 4 years after starting 9th grade. The Healthy People 2020 objective for high school graduation is 82.4%. Kent (83.7%) and Tahoma (89.8%) Districts exceed this objective.

<table>
<thead>
<tr>
<th>High School Graduation Rates</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn School District</td>
<td>77.4%</td>
</tr>
<tr>
<td>Kent School District</td>
<td>83.7%</td>
</tr>
<tr>
<td>Renton School District</td>
<td>76.2%</td>
</tr>
<tr>
<td>Tahoma School District</td>
<td>89.8%</td>
</tr>
<tr>
<td>Tukwila School District</td>
<td>80.7%</td>
</tr>
<tr>
<td>Washington</td>
<td>80.9%</td>
</tr>
</tbody>
</table>


Preschool Enrollment

36.1% of 3 and 4-year-olds are enrolled in preschool in the service area, which is lower than state (41.5%) and county (51.5%) rates. The enrollment rates range from 12.7% in Auburn 98002 to 64.4% in Renton (Newcastle) 98056.

<table>
<thead>
<tr>
<th>Children, 3 and 4 Years of Age, Enrolled in Preschool</th>
<th>ZIP Code</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>98001</td>
<td>444</td>
<td>44.0%</td>
</tr>
<tr>
<td>Auburn</td>
<td>98002</td>
<td>179</td>
<td>12.7%</td>
</tr>
<tr>
<td>Auburn</td>
<td>98092</td>
<td>402</td>
<td>58.3%</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factoria)</td>
<td>98006</td>
<td>61</td>
<td>33.3%</td>
</tr>
<tr>
<td>Black Diamond</td>
<td>98010</td>
<td>431</td>
<td>31.5%</td>
</tr>
</tbody>
</table>
### ZIP Code Numbers and Percentages

<table>
<thead>
<tr>
<th>Location</th>
<th>ZIP Code</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kent</td>
<td>98030</td>
<td>221</td>
<td>28.1%</td>
</tr>
<tr>
<td>Kent</td>
<td>98031</td>
<td>258</td>
<td>23.1%</td>
</tr>
<tr>
<td>Kent</td>
<td>98032</td>
<td>555</td>
<td>50.6%</td>
</tr>
<tr>
<td>Kent (Covington)</td>
<td>98042</td>
<td>495</td>
<td>37.7%</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98038</td>
<td>28</td>
<td>28.0%</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>98051</td>
<td>337</td>
<td>48.5%</td>
</tr>
<tr>
<td>Renton</td>
<td>98055</td>
<td>339</td>
<td>34.9%</td>
</tr>
<tr>
<td>Renton (Newcastle)</td>
<td>98056</td>
<td>152</td>
<td>64.4%</td>
</tr>
<tr>
<td>Renton</td>
<td>98057</td>
<td>402</td>
<td>31.4%</td>
</tr>
<tr>
<td>Renton</td>
<td>98058</td>
<td>689</td>
<td>58.3%</td>
</tr>
<tr>
<td>Renton</td>
<td>98059</td>
<td>426</td>
<td>29.9%</td>
</tr>
<tr>
<td>Seattle (SeaTac)</td>
<td>98188</td>
<td>303</td>
<td>29.6%</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98168</td>
<td>287</td>
<td>34.0%</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>98178</td>
<td>306</td>
<td>39.3%</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td></td>
<td>6,315</td>
<td>36.1%</td>
</tr>
<tr>
<td>King County</td>
<td></td>
<td>27,310</td>
<td>51.5%</td>
</tr>
<tr>
<td>Washington</td>
<td></td>
<td>77,387</td>
<td>41.5%</td>
</tr>
</tbody>
</table>


### Reading to Children

King County adults with children in their care, ages 6 months to 5 years, were asked whether the children were read, sung, or told stories to daily by family members, during the previous week. 69% of South County adults interviewed responded “yes” to this question. In general, percentages increase with rising family incomes and respondents’ level of education.

#### Children Who Were Read to Daily by a Parent or Family Member

<table>
<thead>
<tr>
<th></th>
<th>South County</th>
<th>King County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children read, sung, or</td>
<td>69%</td>
<td>73%</td>
</tr>
<tr>
<td>told stories to daily</td>
<td></td>
<td></td>
</tr>
<tr>
<td>by family member</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Best Starts for Kids Health Survey (BSKHS), 2017, via King County Department of Community and Human Services. [http://www.kingcounty.gov/healthservices/health/data/indicators.aspx](http://www.kingcounty.gov/healthservices/health/data/indicators.aspx)

### Crime

Crime negatively impacts communities through economic loss, reduced productivity, and disruption of social services. Person crimes include homicide, rape, assault, kidnapping, human trafficking and violating restraining orders. Property crimes include arson, burglary, robbery, theft, counterfeiting and extortion.

Person crime rates decreased from 2015 to 2018 in King County, Auburn, Black Diamond, and Kent. Several area police departments did not exist as separate entities in 2015 or did not submit reports and, therefore, trends cannot be observed for them. The rates of person crimes reported were higher in Auburn, Kent and Tukwila than in the county.
Property crime rates decreased from 2015 to 2018 in the state, county and all area cities for which data were available. With the exception of Auburn, Kent and Tukwila where property crime rates remained higher than the county rate.

Person Crimes Rates and Property Crime Rates, per 1,000 Persons, 2013 and 2018

<table>
<thead>
<tr>
<th></th>
<th>Person Crimes</th>
<th>Property Crimes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Rate</td>
</tr>
<tr>
<td>Auburn Police Dept.</td>
<td>1,595</td>
<td>21.1</td>
</tr>
<tr>
<td>Bellevue Police Dept.</td>
<td>864</td>
<td>6.4</td>
</tr>
<tr>
<td>Black Diamond Police</td>
<td>20</td>
<td>4.8</td>
</tr>
<tr>
<td>Covington Police Dept.</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Kent Police Dept.</td>
<td>2,688</td>
<td>21.9</td>
</tr>
<tr>
<td>King County Sheriff's</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Maple Valley Police D.</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Newcastle Police Dept.</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Renton Police Dept.</td>
<td>970</td>
<td>9.9</td>
</tr>
<tr>
<td>Seatac Police Dept.</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Tukwila Police Dept.</td>
<td>624</td>
<td>32.3</td>
</tr>
<tr>
<td>King County</td>
<td>22,666</td>
<td>14.6</td>
</tr>
<tr>
<td>Washington State</td>
<td>67,539</td>
<td>14.0</td>
</tr>
</tbody>
</table>

Health Insurance Coverage

Health insurance coverage is considered a key component to ensure access to health care. 91.1% of the population in the hospital service area has health insurance. Maple Valley 98038 has the highest health insurance rate (95.6%) and Kent 98032, has the lowest rate of health insurance (86.7%), followed closely by Renton 98057 (86.8%) and Seattle-Tukwila 98168 (86.9%). 96.2% of children, ages 18 and under, have health insurance coverage in the service area. Maple Valley 98051 has the highest health insurance rate among children (99.1%), and Kent 98030 has the lowest percentage of children with health insurance (91.7%). Among adults, ages 19-64, 87.7% in the service area have health insurance. Maple Valley 98038 has the highest insurance rates (94.8%), and Kent ZIP 98032 has the lowest insurance rate (80.8%) among adults, ages 19-64.

Health Insurance, Total Population, Children under 19, and Adults, Ages 19-64

<table>
<thead>
<tr>
<th>ZIP Code</th>
<th>Total Population</th>
<th>Children, Under 19</th>
<th>Adults, Ages 19-64</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn 98001</td>
<td>91.3%</td>
<td>95.8%</td>
<td>87.9%</td>
</tr>
<tr>
<td>Auburn 98002</td>
<td>87.3%</td>
<td>94.9%</td>
<td>81.6%</td>
</tr>
<tr>
<td>Auburn 98092</td>
<td>92.1%</td>
<td>94.3%</td>
<td>89.9%</td>
</tr>
<tr>
<td>Bellevue (Newcastle/Factory) 98006</td>
<td>94.7%</td>
<td>97.2%</td>
<td>92.8%</td>
</tr>
<tr>
<td>Black Diamond 98010</td>
<td>94.0%</td>
<td>95.8%</td>
<td>92.0%</td>
</tr>
<tr>
<td>Kent 98030</td>
<td>88.7%</td>
<td>91.7%</td>
<td>85.7%</td>
</tr>
<tr>
<td>Kent 98031</td>
<td>92.2%</td>
<td>97.7%</td>
<td>89.3%</td>
</tr>
<tr>
<td>Kent 98032</td>
<td>86.7%</td>
<td>97.7%</td>
<td>80.8%</td>
</tr>
<tr>
<td>Kent (Covington) 98042</td>
<td>93.8%</td>
<td>96.2%</td>
<td>91.9%</td>
</tr>
<tr>
<td>Maple Valley 98038</td>
<td>95.6%</td>
<td>95.6%</td>
<td>94.8%</td>
</tr>
<tr>
<td>Maple Valley 98051</td>
<td>93.3%</td>
<td>99.1%</td>
<td>90.2%</td>
</tr>
<tr>
<td>Renton 98055</td>
<td>91.5%</td>
<td>96.3%</td>
<td>88.7%</td>
</tr>
<tr>
<td>Renton (Newcastle) 98056</td>
<td>89.0%</td>
<td>98.5%</td>
<td>84.5%</td>
</tr>
<tr>
<td>Renton 98057</td>
<td>86.8%</td>
<td>95.5%</td>
<td>82.3%</td>
</tr>
<tr>
<td>Renton 98058</td>
<td>93.9%</td>
<td>98.1%</td>
<td>91.1%</td>
</tr>
<tr>
<td>Renton 98059</td>
<td>93.8%</td>
<td>97.1%</td>
<td>91.6%</td>
</tr>
<tr>
<td>Seattle (SeaTac) 98188</td>
<td>87.2%</td>
<td>97.3%</td>
<td>82.1%</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98168</td>
<td>86.9%</td>
<td>96.4%</td>
<td>81.2%</td>
</tr>
<tr>
<td>Seattle (Tukwila) 98178</td>
<td>91.0%</td>
<td>96.1%</td>
<td>86.8%</td>
</tr>
<tr>
<td>VMC Service Area</td>
<td>91.1%</td>
<td>96.2%</td>
<td>87.7%</td>
</tr>
<tr>
<td>King County</td>
<td>93.0%</td>
<td>97.2%</td>
<td>90.5%</td>
</tr>
<tr>
<td>Washington</td>
<td>91.7%</td>
<td>96.2%</td>
<td>88.2%</td>
</tr>
</tbody>
</table>

Medical Assistance Programs
In King County, 395,002 individuals were enrolled in Washington medical assistance programs. The highest percentage of enrollment was in the Apple Health for Kids program, followed by Medicaid CN Expansion.

### Medicaid Program Enrollment

<table>
<thead>
<tr>
<th>Medical Program</th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>AEM Expansion Adults</td>
<td>0.04%</td>
<td>0.03%</td>
</tr>
<tr>
<td>Apple Health for Kids</td>
<td>40.5%</td>
<td>43.7%</td>
</tr>
<tr>
<td>Elderly persons</td>
<td>6.7%</td>
<td>4.4%</td>
</tr>
<tr>
<td>Family (TANF) Medical</td>
<td>0.001%</td>
<td>0.003%</td>
</tr>
<tr>
<td>Family Planning</td>
<td>0.9%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Former Foster Care Adults</td>
<td>0.1%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Foster Care</td>
<td>1.2%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Medicaid CN Caretaker</td>
<td>5.9%</td>
<td>6.6%</td>
</tr>
<tr>
<td>Medicaid CN Expansion</td>
<td>32.7%</td>
<td>30.4%</td>
</tr>
<tr>
<td>Other Federal Programs</td>
<td>0.0020%</td>
<td>0.0004%</td>
</tr>
<tr>
<td>Partial Duals</td>
<td>3.2%</td>
<td>3.4%</td>
</tr>
<tr>
<td>Persons with disabilities</td>
<td>7.8%</td>
<td>8.1%</td>
</tr>
<tr>
<td>Pregnant Women’s Coverage</td>
<td>1.0%</td>
<td>0.9%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>395,002</td>
<td>1,807,563</td>
</tr>
</tbody>
</table>


### Regular Source of Care
Access to a medical home and a primary care provider improve continuity of care and decrease unnecessary emergency room visits. 26% of adults in King County do not have a usual primary care provider. At a local level, no primary care provider ranges from 14% in East Kent to 33% in SeaTac/Tukwila.

### No Usual Primary Care Provider

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>28%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>24%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>30%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>25%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>18%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>23%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>21%</td>
</tr>
<tr>
<td>Kent**</td>
<td>26%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>30%</td>
</tr>
<tr>
<td>Kent East</td>
<td>14%</td>
</tr>
</tbody>
</table>
Unmet Medical Need
13% of adults in King County reported an unmet medical need as a result of not being able to afford care. This was a lower rate than the state rate (14.2%). Rates in area cities and Health Reporting Areas ranged from a low of 10% (South Bellevue and Covington/Maple Valley) to a high of 26% (South Auburn).

Adults with Unmet Medical Need Due to Cost, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>Area</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>20%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>26%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>15%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>11%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>10%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>11%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>10%</td>
</tr>
<tr>
<td>Kent**</td>
<td>16%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>17%</td>
</tr>
<tr>
<td>Kent East</td>
<td>*11%</td>
</tr>
<tr>
<td>Kent West</td>
<td>19%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>11%</td>
</tr>
<tr>
<td>Renton**</td>
<td>13%</td>
</tr>
<tr>
<td>Renton North</td>
<td>15%</td>
</tr>
<tr>
<td>Renton East</td>
<td>11%</td>
</tr>
<tr>
<td>Renton South</td>
<td>12%</td>
</tr>
</tbody>
</table>
Percent

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>SeaTac/Tukwila</td>
<td>22%</td>
</tr>
<tr>
<td>South County</td>
<td>16%</td>
</tr>
<tr>
<td>King County</td>
<td>13%</td>
</tr>
<tr>
<td>Washington</td>
<td>14%</td>
</tr>
</tbody>
</table>


Primary Care Physicians

The ratio of the population to primary care physicians in King County is 850:1.

### Primary Care Physicians, Number and Ratio

<table>
<thead>
<tr>
<th></th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of primary care physicians</td>
<td>2,532</td>
<td>5,986</td>
</tr>
<tr>
<td>Ratio of population to primary care physicians</td>
<td>850:1</td>
<td>1,220:1</td>
</tr>
</tbody>
</table>

Source: County Health Rankings, 2016. [http://www.countyhealthrankings.org](http://www.countyhealthrankings.org)

Access to Primary Care Community Health Centers

Community health centers provide primary care (including medical, dental and mental health services) for uninsured and medically underserved populations. Using ZCTA (ZIP Code Tabulation Area) data for the Valley Medical Center service area and information from the Uniform Data System (UDS), 25.8% of the population in the service area is low-income (200% of Federal Poverty Level) and 10.9% of the population are living in poverty. There are a number of Section 330-funded grantees (Federally Qualified Health Centers – FQHCs and FQHC Look-Alikes) located in the service area, including: Community Health Care, Country Doctor Community Clinic, Healthpoint, International Community Health Services, Neighborcare Health, Sea-Mar Community Health Center, and Seattle-King County Public Health Department.

Even with Section 330 funded Community Health Centers serving the area, there are a number of low-income residents who are not served by one of these clinic providers. The FQHCs have a total of 96,105 patients in the service area, which equates to 63.6% penetration among low-income patients and 16.3% penetration among the total population. From 2016-2018, the Community Health Center providers added 7,744 patients for an 8.8% increase in patients served by Community Health Centers in the service area. However, there remain 54,997 low-income residents, over one-third (36.4%) of the population at or below 200% FPL, which are not served by an FQHC.

---

1 The UDS is an annual reporting requirement for grantees of HRSA primary care programs:
   • Community Health Center, Section 330 (e)
   • Migrant Health Center, Section 330 (g)
   • Health Care for the Homeless, Section 330 (h)
   • Public Housing Primary Care, Section 330 (i)
Low-Income Patients Served and Not Served by FQHCs

<table>
<thead>
<tr>
<th>Low-Income Population</th>
<th>Patients served by Section 330 Grantees in Service Area</th>
<th>Penetration among Low-Income Patients</th>
<th>Penetration of Total Population</th>
<th>Low-Income Not Served</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>151,102</td>
<td>96,105</td>
<td>63.6%</td>
<td>16.3%</td>
<td>54,997</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>36.4%</td>
</tr>
</tbody>
</table>


Dental Care

Among King County adults, 30% did not access dental care in the prior year. 43% of adults in North Auburn, 46% in West Kent, and 52% in the SeaTac/Tukwila HRA did not access dental care in the previous 12 months.

Adults Who Did Not Access Dental Care Prior Year, 2011-2012 & 2014-2015 Averaged

<table>
<thead>
<tr>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
</tr>
<tr>
<td>Auburn North</td>
</tr>
<tr>
<td>Auburn South</td>
</tr>
<tr>
<td>Bellevue**</td>
</tr>
<tr>
<td>Bellevue South</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
</tr>
<tr>
<td>Kent**</td>
</tr>
<tr>
<td>Kent West</td>
</tr>
<tr>
<td>Kent SE</td>
</tr>
<tr>
<td>Kent East</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
</tr>
<tr>
<td>Renton**</td>
</tr>
<tr>
<td>Renton North</td>
</tr>
<tr>
<td>Renton East</td>
</tr>
<tr>
<td>Renton South</td>
</tr>
<tr>
<td>Renton South</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
</tr>
<tr>
<td>South County</td>
</tr>
<tr>
<td>King County**</td>
</tr>
<tr>
<td>Washington**</td>
</tr>
</tbody>
</table>


The ratio of persons to dentists in King County is 940:1. This ratio is better than the state.

Dentists, Number and Ratio

<table>
<thead>
<tr>
<th></th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of dentists</td>
<td>2,336</td>
<td>5,987</td>
</tr>
<tr>
<td>Ratio of population to dentists</td>
<td>940:1</td>
<td>1,240:1</td>
</tr>
</tbody>
</table>
Mental Health Providers
Mental health providers include psychiatrists, clinical psychologists, clinical social workers, psychiatric nurse specialists, and marriage and family therapists who meet certain qualifications and certifications. In King County, the ratio of residents to mental health providers is 270:1.

<table>
<thead>
<tr>
<th>Mental Health Providers, Number and Ratio</th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of mental health providers</td>
<td>8,053</td>
<td>23,891</td>
</tr>
<tr>
<td>Ratio of population to mental health providers</td>
<td>270:1</td>
<td>310:1</td>
</tr>
</tbody>
</table>

Source: County Health Rankings, 2017. [http://www.countyhealthrankings.org](http://www.countyhealthrankings.org)
Birth Characteristics

Births

In 2017, the number of births in King County was 25,274. This was the first decrease in the number of births in the county since 2013.

Total Births, 2013-2017

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>24,910</td>
<td>25,348</td>
<td>25,487</td>
<td>26,011</td>
<td>25,274</td>
</tr>
<tr>
<td>Washington</td>
<td>86,566</td>
<td>88,561</td>
<td>89,000</td>
<td>90,489</td>
<td>87,508</td>
</tr>
</tbody>
</table>


The race/ethnicity of mothers in King County was primarily White (60.8%). Beginning in 2012, Hispanic/Latino was no longer a reported racial/ethnic category by the Washington State Department of Health.

Births by Mother, Race/Ethnicity

<table>
<thead>
<tr>
<th></th>
<th>White</th>
<th>Asian/Pacific Islanders</th>
<th>African American</th>
<th>Multi-Racial ( &gt;1 race given)</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>60.8%</td>
<td>23.1%</td>
<td>9.1%</td>
<td>4.5%</td>
</tr>
<tr>
<td>Washington</td>
<td>76.5%</td>
<td>10.5%</td>
<td>4.9%</td>
<td>4.7%</td>
</tr>
</tbody>
</table>


Teen Birth Rate

In 2016, teen births occurred in King County at a rate of 18.9 per 1,000 live births (or 1.9% of total births). This rate is lower than the teen birth rate (40.0 per 1,000 live births) found in the state (4%).

Births to Teenage Mothers (Under Age 20)

<table>
<thead>
<tr>
<th></th>
<th>Births to Teen Mothers</th>
<th>Live Births*</th>
<th>Rate per 1,000 Live Births</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>491</td>
<td>26,003</td>
<td>18.9</td>
</tr>
<tr>
<td>Washington</td>
<td>3,617</td>
<td>90,473</td>
<td>40.0</td>
</tr>
</tbody>
</table>


The rate of births among females, ages 15 to 17, in King County is 4.0 births per 1,000 teen girls, while in South County the rate is 6.6 births per 1,000 teen girls, ages 15 to 17.

Births to Teenage Mothers (15-17 Years Old), Five-Year Average, 2013-2017

<table>
<thead>
<tr>
<th></th>
<th>Rate per 1,000 Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>South County</td>
<td>6.6</td>
</tr>
<tr>
<td>King County</td>
<td>4.0</td>
</tr>
</tbody>
</table>

Source: WA State Dept. of Health, Center for Health Statistics, Birth Certificates 2013-2017, via Public Health - Seattle & King County; Community Health Indicators.  
Prenatal Care
72.6% of pregnant women in King County entered prenatal care on-time – during the first trimester – and attended at least 80% of their recommended prenatal visits. This does not meet the Healthy People 2020 Objective of 83.2% of women receiving early and adequate prenatal care. Rates of prenatal care were lowest in South Bellevue, where 63.9% of pregnant mothers received early and adequate care.

Early and Adequate Prenatal Care, Five-Year Average, 2013-2017

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn South</td>
<td>68.4%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>69.5%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>63.9%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>74.3%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>75.6%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>66.2%</td>
</tr>
<tr>
<td>Kent East</td>
<td>67.7%</td>
</tr>
<tr>
<td>Kent West</td>
<td>64.1%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>70.6%</td>
</tr>
<tr>
<td>Renton North</td>
<td>67.1%</td>
</tr>
<tr>
<td>Renton East</td>
<td>71.6%</td>
</tr>
<tr>
<td>Renton South</td>
<td>67.6%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>65.0%</td>
</tr>
<tr>
<td>South County</td>
<td>68.9%</td>
</tr>
<tr>
<td>King County</td>
<td>72.6%</td>
</tr>
</tbody>
</table>

Source: WA State Dept. of Health, Center for Health Statistics, Birth Certificates 2013-2017, via Public Health - Seattle & King County; Community Health Indicators. [http://www.kingcounty.gov/healthservices/health/data/indicators.aspx](http://www.kingcounty.gov/healthservices/health/data/indicators.aspx)

Low Birth Weight
Low birth weight is a negative birth indicator. Babies born at a low birth weight are at higher risk for disease, disability and possibly death. For this measurement, a lower rate is a better indicator. The rate of low birth weight babies in King County is 6.5%, which is lower than the Healthy People 2020 objective of 7.8% of births being low birth weight. The percentage of low-birth-weight babies in area cities and neighborhoods ranges from 5.5% in Black Diamond/Enumclaw/SE County to 7.8% in South Renton.

Low Birth Weight (Under 2,500 g), Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>6.8%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>6.7%</td>
</tr>
</tbody>
</table>
Preterm Births

Preterm births – those occurring before 37 weeks of gestation – have higher rates of death and disability. 9% of births in King County were preterm births. The preterm birth rate was 10.3% for South County and 11.3% in the South Renton HRA.

### Preterm Births, Babies Born Before 37 Weeks of Gestation, 2013-2017

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn North</td>
<td>11.0%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>11.0%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>8.7%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>9.4%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>8.7%</td>
</tr>
<tr>
<td>Kent West</td>
<td>10.5%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>10.9%</td>
</tr>
<tr>
<td>Kent East</td>
<td>9.6%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>8.1%</td>
</tr>
<tr>
<td>Renton North</td>
<td>9.1%</td>
</tr>
</tbody>
</table>
Maternal Smoking During Pregnancy
Among pregnant women, 97.2% in King County did not smoke during pregnancy. This rate does not meet the Healthy People 2020 objective of 98.6% of women to abstain from cigarette smoking during pregnancy.

No Smoking during Pregnancy

<table>
<thead>
<tr>
<th>Mother did Not Smoke</th>
<th>Live Births*</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>25,128</td>
<td>25,844</td>
</tr>
<tr>
<td>Washington</td>
<td>83,81</td>
<td>89,583</td>
</tr>
</tbody>
</table>

From 2011-2015, 95.8% of pregnant women in King County did not smoke. Rates in area cities ranged from to 89.1% in South Auburn to 98.6% in Bellevue, the only city to meet the Healthy People 2020 objective (98.6%).


<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>90.2%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>91.1%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>89.1%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>98.6%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>98.5%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>91.5%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>95.6%</td>
</tr>
<tr>
<td>Kent**</td>
<td>94.9%</td>
</tr>
<tr>
<td>Kent West</td>
<td>94.2%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>94.8%</td>
</tr>
<tr>
<td>Kent East</td>
<td>95.7%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>96.7%</td>
</tr>
<tr>
<td>Renton**</td>
<td>95.9%</td>
</tr>
<tr>
<td>Renton North</td>
<td>95.9%</td>
</tr>
</tbody>
</table>
Infant Mortality

The infant mortality rate is defined as deaths to infants more than 27 days old, and under 1 year of age. The infant mortality rate in King County, from 2013 to 2017, was 3.9 deaths per 1,000 live births. The infant death rate in South County was 5.1 deaths per 1,000 live births. Despite this difference, the infant death rate in South County is still within the Healthy People 2020 objective of 6.0 deaths per 1,000 live births. Rates above the Healthy People 2020 objective occurred in West Kent (6.1 infant deaths per 1,000 live births) and East Kent (6.6 infant deaths per 1,000 live births).

### Infant Mortality Rate, 2013-2017

<table>
<thead>
<tr>
<th>Location</th>
<th>Rate per 1,000 Live Births</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn North</td>
<td>4.6</td>
</tr>
<tr>
<td>Auburn South</td>
<td>5.5</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>*</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>4.5</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>4.0</td>
</tr>
<tr>
<td>Kent West</td>
<td>6.1</td>
</tr>
<tr>
<td>Kent SE</td>
<td>6.0</td>
</tr>
<tr>
<td>Kent East</td>
<td>6.6</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>*</td>
</tr>
<tr>
<td>Renton North</td>
<td>3.3</td>
</tr>
<tr>
<td>Renton East</td>
<td>3.5</td>
</tr>
<tr>
<td>Renton South</td>
<td>4.3</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>6.0</td>
</tr>
<tr>
<td>South County</td>
<td>5.1</td>
</tr>
<tr>
<td>King County</td>
<td>3.9</td>
</tr>
</tbody>
</table>

Source: WA State Dept. of Health, Center for Health Statistics, Linked Birth/Death Certificate Data, 2013-2017, via Public Health - Seattle & King County; Community Health Indicators *Statistically unstable or suppressed due to small sample size; interpret with caution. http://www.kingcounty.gov/healthservices/health/data/indicators.aspx
Breastfeeding Initiation
Breastfeeding has been proven to have considerable benefits to baby and mother. The American Academy of Pediatrics recommends that babies are fed only breast milk for the first six months of life. According to data from birth certificates, 97% of infants in King County were breastfed at some point prior to discharge from the hospital. The lowest rate of breastfeeding initiation was reported in South Auburn (92.7%).

<table>
<thead>
<tr>
<th>Infants Breastfed at Some Point Prior to Discharge</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn South</td>
<td>92.7%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>94.7%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>97.6%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>94.3%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>96.6%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>95.2%</td>
</tr>
<tr>
<td>Kent East</td>
<td>94.1%</td>
</tr>
<tr>
<td>Kent West</td>
<td>95.0%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>97.4%</td>
</tr>
<tr>
<td>Renton North</td>
<td>97.0%</td>
</tr>
<tr>
<td>Renton East</td>
<td>97.4%</td>
</tr>
<tr>
<td>Renton South</td>
<td>96.9%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>96.1%</td>
</tr>
<tr>
<td><strong>South County</strong></td>
<td><strong>95.3%</strong></td>
</tr>
<tr>
<td><strong>King County</strong></td>
<td><strong>97.0%</strong></td>
</tr>
</tbody>
</table>

Mortality/Leading Causes of Death

Life Expectancy at Birth
Life expectancy in area HRAs ranges from 75.4 years in South Auburn to 83.8 years in South Bellevue. The life expectancy for King County is 81.7 years.

<table>
<thead>
<tr>
<th>Life Expectancy at Birth</th>
<th>Number of Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn South</td>
<td>75.4</td>
</tr>
<tr>
<td>Auburn North</td>
<td>78.6</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>83.8</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>79.3</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>81.5</td>
</tr>
<tr>
<td>Kent SE</td>
<td>79.0</td>
</tr>
<tr>
<td>Kent East</td>
<td>79.3</td>
</tr>
<tr>
<td>Kent West</td>
<td>79.1</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>82.1</td>
</tr>
<tr>
<td>Renton North</td>
<td>82.6</td>
</tr>
<tr>
<td>Renton East</td>
<td>81.7</td>
</tr>
<tr>
<td>Renton South</td>
<td>80.1</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>79.1</td>
</tr>
<tr>
<td><strong>South County</strong></td>
<td><strong>79.6</strong></td>
</tr>
<tr>
<td><strong>King County</strong></td>
<td><strong>81.7</strong></td>
</tr>
</tbody>
</table>


Mortality Rates
Age-adjusted death rates are an important factor to examine when comparing mortality data. The crude death rate is a ratio of the number of deaths to the entire population. Age-adjusted death rates eliminate the bias of age in the makeup of the populations. The age-adjusted death rate in King County of 6.2 per 1,000 persons is less than the state rate of 6.8 per 1,000 persons. All area HRAs have higher mortality rates than the county, with the exception of South Bellevue (5.3 deaths per 1,000 persons) and North Renton (5.9 deaths per 1,000). The highest age-adjusted death rate in the service area is 10.3 deaths per 1,000 persons, found in South Auburn.
**Mortality Rates, per 1,000 Persons, 2014-2018**

<table>
<thead>
<tr>
<th>Location</th>
<th>Deaths</th>
<th>Crude Rate</th>
<th>Age-Adjusted Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn North</td>
<td>1,563</td>
<td>7.5</td>
<td>7.8</td>
</tr>
<tr>
<td>Auburn South</td>
<td>1,173</td>
<td>8.6</td>
<td>10.3</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>805</td>
<td>4.9</td>
<td>5.3</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>1,813</td>
<td>7.6</td>
<td>7.8</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>1,312</td>
<td>4.5</td>
<td>6.7</td>
</tr>
<tr>
<td>Kent East</td>
<td>1,128</td>
<td>6.0</td>
<td>8.0</td>
</tr>
<tr>
<td>Kent SE</td>
<td>1,949</td>
<td>6.7</td>
<td>7.8</td>
</tr>
<tr>
<td>Kent West</td>
<td>812</td>
<td>5.6</td>
<td>8.1</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>830</td>
<td>5.6</td>
<td>6.8</td>
</tr>
<tr>
<td>Renton East</td>
<td>781</td>
<td>4.7</td>
<td>6.3</td>
</tr>
<tr>
<td>Renton North</td>
<td>934</td>
<td>5.9</td>
<td>5.9</td>
</tr>
<tr>
<td>Renton South</td>
<td>2,003</td>
<td>7.4</td>
<td>7.0</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>1,441</td>
<td>6.0</td>
<td>7.4</td>
</tr>
<tr>
<td><strong>King County</strong></td>
<td><strong>64,790</strong></td>
<td><strong>6.2</strong></td>
<td><strong>6.2</strong></td>
</tr>
<tr>
<td><strong>Washington</strong></td>
<td><strong>275,220</strong></td>
<td><strong>7.7</strong></td>
<td><strong>6.8</strong></td>
</tr>
</tbody>
</table>

*Source: Data prepared and provided by Public Health - Seattle & King County; Assessment, Policy Development & Evaluation Unit, December 2019 utilizing Death Certificate Data from 2014-2018 from the WA State Dept. of Health Center for Health Statistics via their Community Health Assessment Tool, accessed October 2019. * Weighted Average of the listed HRAs, using 2015 population estimates.*

**Leading Causes of Death**

The top two leading causes of death in King County are cancer and heart disease. The cancer death rate in King County is 135.6 per 100,000 persons, which is lower than the state rate (147.3 per 100,000 persons). This is better than the Healthy People 2020 objective for cancer mortality of 161.4 per 100,000 persons.

The heart disease mortality rate in King County is 123.7 per 100,000 persons, which is lower than the state rate (137.2 per 100,000 persons) but exceeds the Healthy People 2020 objective of 103.4 deaths per 100,000 persons.

In addition to cancer and heart disease, Alzheimer’s disease, unintentional injury and stroke are in the top five causes of death in King County. Deaths due to Alzheimer’s Disease (47.7 per 100,000 persons) and deaths due to pneumonia and flu (12.7 per 100,000 persons) are the only rates of death in King County that exceeded state rates.
<table>
<thead>
<tr>
<th>Mortality Rates, per 100,000 Persons, Crude and Age-Adjusted, 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>King County</strong></td>
</tr>
<tr>
<td>Number</td>
</tr>
<tr>
<td>All Cancers</td>
</tr>
<tr>
<td>Heart Disease</td>
</tr>
<tr>
<td>Alzheimer’s disease</td>
</tr>
<tr>
<td>Unintentional injury</td>
</tr>
<tr>
<td>Stroke</td>
</tr>
<tr>
<td>Lung disease</td>
</tr>
<tr>
<td>Diabetes</td>
</tr>
<tr>
<td>Pneumonia and flu</td>
</tr>
<tr>
<td>Suicide</td>
</tr>
<tr>
<td>Chronic liver disease and cirrhosis</td>
</tr>
</tbody>
</table>

http://www.doh.wa.gov/DataandStatisticalReports/HealthDataVisualization/MortalityDashboard

The top two leading causes of death in Health Reporting Areas (HRAs) are major cardiovascular disease (heart disease and stroke) and cancer. In addition, Alzheimer’s disease, unintentional injury deaths (accidents), chronic lower respiratory disease (CLRD), and/or diabetes mellitus are the top causes of death in the area HRAs. Comparison of rates should be undertaken with caution, as rates may have been based on fewer than four deaths per year in certain HRAs.

<table>
<thead>
<tr>
<th>Mortality Rates, per 100,000 Persons, Age-Adjusted, 2014-2018, Top Six Causes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Major Cardiovascular Diseases</strong></td>
</tr>
<tr>
<td>Auburn South</td>
</tr>
<tr>
<td>Auburn North</td>
</tr>
<tr>
<td>Bellevue South</td>
</tr>
<tr>
<td>Black Diamond / Enumclaw/SE County</td>
</tr>
<tr>
<td>Covington / Maple Valley</td>
</tr>
<tr>
<td>Kent SE</td>
</tr>
<tr>
<td>Kent East</td>
</tr>
<tr>
<td>Kent West</td>
</tr>
<tr>
<td>Newcastle / Four Creeks</td>
</tr>
<tr>
<td>Renton North</td>
</tr>
<tr>
<td>Renton East</td>
</tr>
</tbody>
</table>
For all listed causes of death, except for Parkinson’s disease, the rate of death averaged across the listed HRAs is higher than the county rate. Auburn South has high rates of suicide, flu and pneumonia, liver disease and pneumonitis. Kent has high rates of Parkinson’s Disease and Renton South has high rates of kidney disease. Comparison of rates should be undertaken with caution, as rates may have been based on fewer than two deaths per year for certain causes of death in certain HRAs.

### Mortality Rates, per 100,000 Persons, Age-Adjusted, 2014-2018, Additional Causes

<table>
<thead>
<tr>
<th></th>
<th>Suicide</th>
<th>Flu &amp; Pneumonia</th>
<th>Chronic Liver Disease</th>
<th>Parkinson’s Disease</th>
<th>Pneumonitis</th>
<th>Kidney Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn South</td>
<td>22.3</td>
<td>25.8</td>
<td>21.6</td>
<td>9.5</td>
<td>16.2</td>
<td>9.2</td>
</tr>
<tr>
<td>Auburn North</td>
<td>18.2</td>
<td>14.1</td>
<td>17.1</td>
<td>10.3</td>
<td>7.8</td>
<td>7.4</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>8.3</td>
<td>9.2</td>
<td>2.4</td>
<td>6.3</td>
<td>8.9</td>
<td>5.7</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/S E County</td>
<td>14.1</td>
<td>9.3</td>
<td>10.1</td>
<td>10.2</td>
<td>10.1</td>
<td>7.7</td>
</tr>
<tr>
<td>Kent SE</td>
<td>11.8</td>
<td>12.9</td>
<td>14.1</td>
<td>13.1</td>
<td>5.6</td>
<td>5.6</td>
</tr>
<tr>
<td>Kent East</td>
<td>10.0</td>
<td>11.7</td>
<td>9.7</td>
<td>12.7</td>
<td>14.5</td>
<td>11.0</td>
</tr>
<tr>
<td>Kent West</td>
<td>17.6</td>
<td>20.8</td>
<td>12.4</td>
<td>6.8</td>
<td>18.5</td>
<td>11.1</td>
</tr>
<tr>
<td>Renton North</td>
<td>15.4</td>
<td>8.3</td>
<td>12.6</td>
<td>4.2</td>
<td>6.0</td>
<td>8.1</td>
</tr>
<tr>
<td>Renton East</td>
<td>11.5</td>
<td>9.8</td>
<td>9.1</td>
<td>8.3</td>
<td>13.6</td>
<td>3.8</td>
</tr>
<tr>
<td>Renton South</td>
<td>10.3</td>
<td>11.3</td>
<td>10.5</td>
<td>8.8</td>
<td>9.2</td>
<td>12.1</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>11.4</td>
<td>10.8</td>
<td>14.5</td>
<td>8.9</td>
<td>7.5</td>
<td>4.1</td>
</tr>
<tr>
<td>HRA weighted avg.*</td>
<td>13.7</td>
<td>13.4</td>
<td>11.8</td>
<td>8.9</td>
<td>11.1</td>
<td>7.8</td>
</tr>
<tr>
<td>King County</td>
<td>12.1</td>
<td>9.9</td>
<td>9.6</td>
<td>9.3</td>
<td>7.7</td>
<td>5.8</td>
</tr>
<tr>
<td>Washington</td>
<td>15.8</td>
<td>10.7</td>
<td>11.5</td>
<td>8.6</td>
<td>7.1</td>
<td>5.6</td>
</tr>
</tbody>
</table>

Source: Data prepared and provided by Public Health - Seattle & King County; Assessment, Policy Development & Evaluation Unit, December 2019 utilizing Death Certificate Data from 2014-2018 from the WA State Dept. of Health Center for Health Statistics via their Community Health Assessment Tool, accessed October 2019. * Weighted Average of the listed HRAs, using 2015 population estimates.
Homicide was the 14th leading cause of death in the state and county. The highest rate of homicides was recorded in SeaTac/Tukwila (7.9 homicides per 100,000 persons).

### Homicide Rate, per 100,000 Persons, Age-Adjusted, 2014-2018

<table>
<thead>
<tr>
<th>Location</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn South</td>
<td>5.2</td>
</tr>
<tr>
<td>Auburn North</td>
<td>6.3</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>0.0</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>0.8</td>
</tr>
<tr>
<td>Kent SE</td>
<td>5.9</td>
</tr>
<tr>
<td>Kent East</td>
<td>3.0</td>
</tr>
<tr>
<td>Kent West</td>
<td>6.0</td>
</tr>
<tr>
<td>Renton North</td>
<td>0.7</td>
</tr>
<tr>
<td>Renton East</td>
<td>3.7</td>
</tr>
<tr>
<td>Renton South</td>
<td>6.7</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>7.9</td>
</tr>
<tr>
<td>HRA weighted average*</td>
<td>4.0</td>
</tr>
<tr>
<td>King County</td>
<td>3.0</td>
</tr>
<tr>
<td>Washington</td>
<td>3.4</td>
</tr>
</tbody>
</table>

Source: Data prepared and provided by Public Health - Seattle & King County; Assessment, Policy Development & Evaluation Unit, December 2019 utilizing Death Certificate Data from 2014-2018 from the WA State Dept. of Health Center for Health Statistics via their Community Health Assessment Tool, accessed October 2019. * Weighted Average of the listed HRAs, using 2015 population estimates.

### Cancer Mortality

The mortality rate for female breast cancer in King County was 16.6 per 100,000 women, while the rate for prostate cancer deaths was 20.6 per 100,000 men. The rate for prostate cancer deaths is higher for King County than for the state (18.8 per 100,000 men).

### Cancer Death Rates, Crude and Age-Adjusted Death Rates, per 100,000 Persons, 2017

<table>
<thead>
<tr>
<th></th>
<th>Female Breast Cancer</th>
<th>Prostate Cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Crude Rate</td>
</tr>
<tr>
<td>King County</td>
<td>198</td>
<td>18.4</td>
</tr>
<tr>
<td>Washington</td>
<td>886</td>
<td>24.2</td>
</tr>
</tbody>
</table>


The rate of colorectal cancer deaths in King County was 12.5 per 100,000 persons, and the rate of lung cancer mortality was 27.3 per 100,000 persons. Mortality from both types of cancer was lower for the county than for the state.
Cancer Death Rates, Crude and Age-Adjusted Death Rated, per 100,000 Persons, 2017

<table>
<thead>
<tr>
<th></th>
<th>Colorectal Cancer</th>
<th>Lung Cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Crude Rate</td>
</tr>
<tr>
<td>King County</td>
<td>271</td>
<td>12.5</td>
</tr>
<tr>
<td>Washington</td>
<td>1,069</td>
<td>14.6</td>
</tr>
</tbody>
</table>


HIV
The death rate from HIV/AIDS-related causes was 1.4 deaths per 100,000 persons in the county and 1.0 deaths per 100,000 persons in South County.

HIV/AIDS-Related Death Rates, per 100,000 Persons, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th></th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>South County</td>
<td>1.0</td>
</tr>
<tr>
<td>King County</td>
<td>1.4</td>
</tr>
<tr>
<td>Washington</td>
<td>0.9</td>
</tr>
</tbody>
</table>


Drug and Alcohol-Related Deaths
Deaths from acute drug and/or alcohol poisoning have been rising in King County, from 247 deaths in 2011 to 415 deaths in 2018.

Deaths Caused by Acute Drug or Alcohol Poisoning

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>271</td>
<td>267</td>
<td>260</td>
<td>247</td>
<td>278</td>
<td>316</td>
<td>327</td>
<td>331</td>
<td>345</td>
<td>382</td>
<td>415</td>
</tr>
</tbody>
</table>


Compared to 2017, overdose deaths in 2018 involving Fentanyl almost doubled (from 33 to 65 deaths), while those involving methamphetamine increased by 19%, and those involving heroin and prescription opioids remained stable. Since 2009, methamphetamine deaths have risen sharply, from 4.2 to 10.1 deaths per 100,000 persons. The numbers in the chart below cannot be totaled because 77% of deaths due to drugs or alcohol in 2018 involved multiple substances. Deaths involving a combination of both opioids and stimulants has significantly increased as well, from 17% in 2009 to 32% in 2018.

Fatal Overdoses, by Type of Substance, 2018

<table>
<thead>
<tr>
<th></th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opioids</td>
<td>277</td>
<td>66.7%</td>
</tr>
<tr>
<td>Heroin</td>
<td>156</td>
<td>37.6%</td>
</tr>
<tr>
<td>Prescription opioids</td>
<td>100</td>
<td>24.1%</td>
</tr>
<tr>
<td>Fentanyl</td>
<td>65</td>
<td>15.7%</td>
</tr>
</tbody>
</table>
### Number and Percent of Drug-Related Deaths, 2017-2018 Combined

<table>
<thead>
<tr>
<th></th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stimulants</td>
<td>221</td>
<td>53.3%</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>163</td>
<td>39.3%</td>
</tr>
<tr>
<td>Cocaine</td>
<td>86</td>
<td>20.7%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>92</td>
<td>22.2%</td>
</tr>
<tr>
<td>Alcohol alone</td>
<td>9</td>
<td>2.2%</td>
</tr>
<tr>
<td>Non-euphoric drugs alone</td>
<td>6</td>
<td>1.4%</td>
</tr>
<tr>
<td>Other medications alone</td>
<td>31</td>
<td>7.5%</td>
</tr>
<tr>
<td>Total</td>
<td>415</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: Public Health - Seattle & King County; Prevention Division; 2018 Overdose Death Report

In 2017 and 2018 combined, deaths tended to be highest among men (67% of deaths), persons between the ages of 30 to 59 (27% of all deaths were among those ages 50-59), and were significantly higher among the homeless – 16% of all deaths despite representing less than 1% of the population. Deaths also were highest in the west of the county, with the highest rates seen in SeaTac/Tukwila (32.8 deaths per 100,000 residents).

### Drug and Alcohol Death Rates, per 100,000 Residents, by Location, 2017-2018 Combined

<table>
<thead>
<tr>
<th>Location</th>
<th>Number</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>38</td>
<td>26.7</td>
</tr>
<tr>
<td>Bellevue</td>
<td>30</td>
<td>10.5</td>
</tr>
<tr>
<td>Kent</td>
<td>45</td>
<td>17.6</td>
</tr>
<tr>
<td>Renton</td>
<td>36</td>
<td>14.7</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>32</td>
<td>32.8</td>
</tr>
<tr>
<td>Seattle</td>
<td>389</td>
<td>26.9</td>
</tr>
<tr>
<td>King County</td>
<td>798</td>
<td>18.4</td>
</tr>
</tbody>
</table>

Source: Public Health - Seattle & King County; Prevention Division; 2018 Overdose Death Report

Despite representing only 0.6% of King County’s population, American Indian/Alaskan Native residents had the highest death rate from drugs and alcohol (99.4 deaths per 100,000 persons). Non-Hispanic (NH) Blacks (29.1 deaths per 100,000) and NH Whites (23.9 deaths per 100,000) were more likely to die from drugs and alcohol than were NH Asians (4.5 deaths per 100,000 persons) and Hispanics (4.3 deaths per 100,000 persons).

### Drug and Alcohol Death Rates, per 100,000 Residents, by Race, 2017-2018 Combined

<table>
<thead>
<tr>
<th>Race</th>
<th>Number</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>19</td>
<td>4.3</td>
</tr>
<tr>
<td>Asian, non-Hispanic</td>
<td>33</td>
<td>4.5</td>
</tr>
<tr>
<td>White, non-Hispanic</td>
<td>627</td>
<td>23.9</td>
</tr>
<tr>
<td>Black, non-Hispanic</td>
<td>81</td>
<td>29.1</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>27</td>
<td>99.4</td>
</tr>
<tr>
<td>King County, all races</td>
<td>798</td>
<td>18.4</td>
</tr>
</tbody>
</table>
Chronic Disease

Fair or Poor Health

When asked to self-report on health status, 12% of adults in King County indicated they were in fair or poor health. This was lower than the state rate (16%). In area cities, responses ranged from 7% of South Bellevue to 21% of North Auburn.

<table>
<thead>
<tr>
<th>Fair or Poor Health, Adults, Five-Year Average, 2011-2015</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>20%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>20%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>21%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>11%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>7%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>12%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>9%</td>
</tr>
<tr>
<td>Kent**</td>
<td>15%</td>
</tr>
<tr>
<td>Kent West</td>
<td>18%</td>
</tr>
<tr>
<td>Kent East</td>
<td>17%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>14%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>12%</td>
</tr>
<tr>
<td>Renton**</td>
<td>14%</td>
</tr>
<tr>
<td>Renton South</td>
<td>14%</td>
</tr>
<tr>
<td>Renton North</td>
<td>20%</td>
</tr>
<tr>
<td>Renton East</td>
<td>9%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>15%</td>
</tr>
<tr>
<td>South County</td>
<td>16%</td>
</tr>
<tr>
<td>King County**</td>
<td>12%</td>
</tr>
<tr>
<td>Washington**</td>
<td>16%</td>
</tr>
</tbody>
</table>

Source: Public Health - Seattle & King County; Behavioral Risk Factor Surveillance System, 2011-2015.

Diabetes

Rates of diabetes diagnosed in area cities ranged from 6.9% in Bellevue to 10.0% in Kent.

<table>
<thead>
<tr>
<th>Adult Diabetes Prevalence, Age-Adjusted</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>9.3%</td>
</tr>
<tr>
<td>Bellevue</td>
<td>6.9%</td>
</tr>
<tr>
<td>Kent</td>
<td>10.0%</td>
</tr>
<tr>
<td>Renton</td>
<td>8.9%</td>
</tr>
<tr>
<td>Seattle</td>
<td>7.9%</td>
</tr>
</tbody>
</table>
Heart Disease and Stroke
3% of King County and South County adults reported being told by a health professional they have coronary heart disease or angina. 4% of King County adults have been told by a health professional they have had a myocardial infarction (heart attack). 2% of King County adults reported being told by a health professional they have had a stroke.

<table>
<thead>
<tr>
<th></th>
<th>Coronary Heart Disease or Angina</th>
<th>Heart Attack</th>
<th>Stroke</th>
</tr>
</thead>
<tbody>
<tr>
<td>South County</td>
<td>3%</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td>King County</td>
<td>3%</td>
<td>4%</td>
<td>2%</td>
</tr>
<tr>
<td>Washington</td>
<td>4%</td>
<td>6%</td>
<td>3%</td>
</tr>
</tbody>
</table>


4.2% of King County adults reported having cardiovascular disease or having had a heart attack (Myocardial Infarction) vs. 5.1% statewide.

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>4.2%</td>
</tr>
<tr>
<td>Washington</td>
<td>5.1%</td>
</tr>
</tbody>
</table>


High Blood Pressure and High Cholesterol
Co-morbidity factors for diabetes and heart disease are high blood pressure (hypertension) and high blood cholesterol. The lowest reported rates of high blood pressure and high cholesterol among area cities are in Bellevue, where 23.5% of adults have high blood pressure and 29.3% have high cholesterol. The highest rates are reported in Kent where 29.2% of adults have high blood pressure and 31.7% have high cholesterol.

<table>
<thead>
<tr>
<th></th>
<th>High Blood Pressure</th>
<th>High Cholesterol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>28.6%</td>
<td>31.8%</td>
</tr>
<tr>
<td>Bellevue</td>
<td>23.5%</td>
<td>29.3%</td>
</tr>
<tr>
<td>Kent</td>
<td>29.2%</td>
<td>31.7%</td>
</tr>
<tr>
<td>Renton</td>
<td>27.3%</td>
<td>30.7%</td>
</tr>
<tr>
<td>Seattle</td>
<td>25.6%</td>
<td>29.7%</td>
</tr>
</tbody>
</table>

Cancer
In King County, the age-adjusted cancer incidence rate is 522.6 per 100,000 persons, which is higher than the state rate of 503.3 per 100,000 persons. Breast cancer and prostate cancer occur at higher rates in King County than in the state. Though incidence of breast cancer is higher for King County (188.5 per 100,000 persons) than the state (169.0 per 100,000 persons), mortality is lower.

Cancer Incidence Rates, per 100,000 Persons, Age Adjusted, 2012-2016

<table>
<thead>
<tr>
<th></th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>All sites</td>
<td>522.6</td>
<td>503.3</td>
</tr>
<tr>
<td>Breast (female)</td>
<td>188.5</td>
<td>169.0</td>
</tr>
<tr>
<td>Prostate</td>
<td>110.1</td>
<td>100.7</td>
</tr>
<tr>
<td>Lung and Bronchus</td>
<td>50.0</td>
<td>56.3</td>
</tr>
<tr>
<td>Leukemia</td>
<td>15.0</td>
<td>14.9</td>
</tr>
<tr>
<td>Cervix</td>
<td>6.1</td>
<td>6.7</td>
</tr>
</tbody>
</table>


Asthma
Reported rates of adult asthma in the area are lowest in Bellevue (7.9% of adults) and highest in Auburn (10%) and Kent (9.9%). All area cities, for which data are available, report higher rates of adult asthma than the county rate, with the exception of Bellevue.

Adult Asthma Prevalence

<table>
<thead>
<tr>
<th>City</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>10.0%</td>
</tr>
<tr>
<td>Bellevue</td>
<td>7.9%</td>
</tr>
<tr>
<td>Kent</td>
<td>9.9%</td>
</tr>
<tr>
<td>Renton</td>
<td>9.1%</td>
</tr>
<tr>
<td>Seattle</td>
<td>8.9%</td>
</tr>
<tr>
<td>King County</td>
<td>8.4%</td>
</tr>
<tr>
<td>Washington</td>
<td>9.8%</td>
</tr>
</tbody>
</table>


5% of children in South County have been diagnosed with asthma, while 6% of children in King County have asthma.

Childhood Asthma Prevalence, 2012-2014 & 2016, Averaged

<table>
<thead>
<tr>
<th>County</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>South County</td>
<td>5%</td>
</tr>
<tr>
<td>King County</td>
<td>6%</td>
</tr>
</tbody>
</table>

Asthma hospitalization in children, under age 18, occurs at a rate of 112.5 per 100,000 children in South County, and 131.0 per 100,000 children in King County.

Adults are hospitalized for asthma at much lower rates than children. Averaged over five years, adults in King County were hospitalized for asthma at a rate of 38.8 per 100,000 persons. South County has a rate of 51.1 per 100,000 adults hospitalized for asthma per year.

**Asthma Hospitalization Rates, per 100,000 Persons, Five-Year Average, 2011-2015**

<table>
<thead>
<tr>
<th></th>
<th>Childhood Asthma</th>
<th>Adult Asthma</th>
</tr>
</thead>
<tbody>
<tr>
<td>South County</td>
<td>112.5</td>
<td>51.1</td>
</tr>
<tr>
<td>King County</td>
<td>131.0</td>
<td>38.8</td>
</tr>
</tbody>
</table>


**Tuberculosis**

Tuberculosis rates in King County fell slightly from 2014 to 2017, continuing a downward trend. The rate of TB, per 100,000 persons in 2017 in King County was 4.6 per 100,000 persons, which is higher than the statewide rate of 2.8 per 100,000 persons.

**Tuberculosis Rate, per 100,000 Persons, 2014-2017**

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Crude Rate</td>
</tr>
<tr>
<td>King County</td>
<td>99</td>
<td>4.9</td>
</tr>
<tr>
<td>Washington</td>
<td>193</td>
<td>2.8</td>
</tr>
</tbody>
</table>


**Disability**

In the service area, 10.3% of the non-institutionalized civilian population identified as having a disability. In King County, 9.6% had a disability, while the rate of disability in the state was 12.8%.

**Population with a Disability , Five-Year Average, 2013-2017**

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>VMC Service Area</td>
<td>10.3%</td>
</tr>
<tr>
<td>King County</td>
<td>9.6%</td>
</tr>
<tr>
<td>Washington</td>
<td>12.8%</td>
</tr>
</tbody>
</table>

Health Behaviors

Health Behaviors Ranking
The County Health Rankings examines healthy behaviors and rank counties according to health behavior data. Washington’s 39 counties are ranked from 1 (healthiest) to 39 (least healthy) based on indicators that include: adult smoking, obesity, physical inactivity, excessive drinking, sexually transmitted infections, and others. A ranking of 1 puts King County at the top of Washington counties for healthy behaviors.

<table>
<thead>
<tr>
<th>Health Behaviors Ranking</th>
<th>County Ranking (out of 39)</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>1</td>
</tr>
</tbody>
</table>

Source: County Health Rankings, 2019. [http://www.countyhealthrankings.org](http://www.countyhealthrankings.org)

Overweight and Obesity
Almost a quarter of adults in King County (22%) are obese and 34% are overweight. Rates of obesity in service area cities ranged from 15% in Bellevue to 38% in Auburn and North Auburn. Combined rates of overweight and obesity are lowest in Bellevue (48%) and highest in North Auburn and East Kent (73%).

Adult Overweight (2011-2015) and Obesity (2013-2017), Five-Year Averages

<table>
<thead>
<tr>
<th></th>
<th>Overweight</th>
<th>Obese</th>
<th>Combined</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>31%</td>
<td>38%</td>
<td>69%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>24%</td>
<td>37%</td>
<td>61%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>35%</td>
<td>38%</td>
<td>73%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>33%</td>
<td>15%</td>
<td>48%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>35%</td>
<td>18%</td>
<td>53%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>36%</td>
<td>28%</td>
<td>64%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>38%</td>
<td>31%</td>
<td>69%</td>
</tr>
<tr>
<td>Kent**</td>
<td>36%</td>
<td>33%</td>
<td>69%</td>
</tr>
<tr>
<td>Kent East</td>
<td>40%</td>
<td>33%</td>
<td>73%</td>
</tr>
<tr>
<td>Kent West</td>
<td>32%</td>
<td>37%</td>
<td>69%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>35%</td>
<td>32%</td>
<td>67%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>38%</td>
<td>23%</td>
<td>61%</td>
</tr>
<tr>
<td>Renton**</td>
<td>35%</td>
<td>26%</td>
<td>61%</td>
</tr>
<tr>
<td>Renton North</td>
<td>30%</td>
<td>24%</td>
<td>54%</td>
</tr>
<tr>
<td>Renton South</td>
<td>39%</td>
<td>28%</td>
<td>67%</td>
</tr>
<tr>
<td>Renton East</td>
<td>35%</td>
<td>23%</td>
<td>58%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>39%</td>
<td>26%</td>
<td>65%</td>
</tr>
<tr>
<td>South County</td>
<td>36%</td>
<td>30%</td>
<td>66%</td>
</tr>
</tbody>
</table>
In King County, 20% of 8th graders, 23% of 10th graders and 26% of 12 grade students are overweight or obese; these rates are lower than the state.

### Youth Overweight and Obese, Grades 8, 10 and 12, 2018

<table>
<thead>
<tr>
<th></th>
<th>8th Grade</th>
<th></th>
<th></th>
<th>10th Grade</th>
<th></th>
<th></th>
<th>12th Grade</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Overweight</td>
<td>Obese</td>
<td>Overweight</td>
<td>Obese</td>
<td>Overweight</td>
<td>Obese</td>
<td>Overweight</td>
<td>Obese</td>
</tr>
<tr>
<td>King County**</td>
<td>12%</td>
<td>8%</td>
<td>12%</td>
<td>11%</td>
<td>13%</td>
<td>13%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Washington**</td>
<td>14%</td>
<td>12%</td>
<td>15%</td>
<td>14%</td>
<td>15%</td>
<td>17%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


### Physical Activity

The CDC recommendation for adult physical activity is 30 minutes of moderate activity five times a week or 20 minutes of vigorous activity three times a week, and strength training exercises that work all major muscle groups at least 2 times per week. In South County, 80% of adults do not meet these recommendations, while in area cities rates ranged from 72% in East Kent to 86% in Auburn (92% in South Auburn, though this rate is unstable due to a small sample size).

### Physical Activity Recommendations Not Met, Adults 18+, 2013, 2015 & 2017, Averaged

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>86%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>* 92%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>82%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>78%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>76%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>84%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>75%</td>
</tr>
<tr>
<td>Kent**</td>
<td>79%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>82%</td>
</tr>
<tr>
<td>Kent East</td>
<td>72%</td>
</tr>
<tr>
<td>Kent West</td>
<td>77%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>74%</td>
</tr>
<tr>
<td>Renton**</td>
<td>83%</td>
</tr>
<tr>
<td>Renton East</td>
<td>81%</td>
</tr>
<tr>
<td>Renton South</td>
<td>84%</td>
</tr>
<tr>
<td>Renton North</td>
<td>83%</td>
</tr>
</tbody>
</table>
16% of adults in King County were sedentary and did not participate in any leisure-time physical activity in the previous month. This is a lower rate of sedentary adults than the statewide reported rate of 20%. South County’s rate of sedentary adults is higher, with 21% not participating in physical activity in the prior month. Rates among area cities ranged from 13% in South Bellevue, Covington/Maple Valley and West Kent to 27% of SeaTac/Tukwila adults being sedentary.

### Sedentary Adults, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>Area</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>22%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>25%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>20%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>16%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>13%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>23%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>13%</td>
</tr>
<tr>
<td>Kent**</td>
<td>21%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>24%</td>
</tr>
<tr>
<td>Kent East</td>
<td>17%</td>
</tr>
<tr>
<td>Kent West</td>
<td>13%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>16%</td>
</tr>
<tr>
<td>Renton**</td>
<td>21%</td>
</tr>
<tr>
<td>Renton East</td>
<td>21%</td>
</tr>
<tr>
<td>Renton South</td>
<td>22%</td>
</tr>
<tr>
<td>Renton North</td>
<td>19%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>27%</td>
</tr>
<tr>
<td>South County</td>
<td>21%</td>
</tr>
<tr>
<td>King County**</td>
<td>16%</td>
</tr>
<tr>
<td>Washington**</td>
<td>20%</td>
</tr>
</tbody>
</table>

Source: Public Health - Seattle & King County; Behavioral Risk Factor Surveillance System, 2011-2015.

* Statistically unstable due to small sample size; interpret with caution.
22% of adults in King County and 24% of adults in South County limited their activities due to poor mental or physical health.

**Limited Activity Due to Poor Health, Adults, 2011-2015**

<table>
<thead>
<tr>
<th>Area</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>25%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>21%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>28%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>19%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>25%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>23%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>18%</td>
</tr>
<tr>
<td>Kent**</td>
<td>23%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>23%</td>
</tr>
<tr>
<td>Kent East</td>
<td>26%</td>
</tr>
<tr>
<td>Kent West</td>
<td>26%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>24%</td>
</tr>
<tr>
<td>Renton**</td>
<td>23%</td>
</tr>
<tr>
<td>Renton East</td>
<td>22%</td>
</tr>
<tr>
<td>Renton South</td>
<td>23%</td>
</tr>
<tr>
<td>Renton North</td>
<td>25%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>19%</td>
</tr>
<tr>
<td>South County</td>
<td>24%</td>
</tr>
<tr>
<td>King County**</td>
<td>22%</td>
</tr>
<tr>
<td>Washington**</td>
<td>25%</td>
</tr>
</tbody>
</table>


The CDC recommendation for youth physical activity is 60 minutes or more each day. King County youth were less likely than state youth to meet this recommendation. 84% of 12th grade students did not meeting this activity recommendation, compared to 79% statewide.

**Youth Inadequate Physical Activity, Grades 6, 8, 10 and 12, 2018**

<table>
<thead>
<tr>
<th></th>
<th>6th Grade</th>
<th>8th Grade</th>
<th>10th Grade</th>
<th>12th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>74%</td>
<td>76%</td>
<td>82%</td>
<td>84%</td>
</tr>
<tr>
<td>Washington State</td>
<td>73%</td>
<td>72%</td>
<td>78%</td>
<td>79%</td>
</tr>
</tbody>
</table>

Exercise Opportunities
Proximity to exercise opportunities can increase physical activity in a community. 98% of King County residents live in close proximity to exercise opportunities, which is higher than the state rate of 87%.

Adequate Access to Exercise Opportunities, 2010 & 2018 Combined

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>98%</td>
</tr>
<tr>
<td>Washington</td>
<td>87%</td>
</tr>
</tbody>
</table>


Community Walkability
WalkScore.com ranks over 2,500 cities in the United States (over 10,000 neighborhoods) with a walk score. The walk score for a location is determined by its access to amenities. Many locations are sampled within each city and an overall score is issued for the walkability of that city. A higher score indicates an area is more accessible to walking while a lower score indicates a more vehicle-dependent location.

WalkScore.com has established the range of scores as follows:
0-24: Car Dependent (Almost all errands require a car)
25-49: Car Dependent (A few amenities within walking distance)
50-69: Somewhat Walkable (Some amenities within walking distance)
70-89: Very Walkable (Most errands can be accomplished on foot)
90-100: Walker's Paradise (Daily errands do not require a car)

Based on this scoring method, all communities in the service area are classified as “Car Dependent.” Newcastle, Maple Valley and Covington are rated as the most “Car Dependent” communities in the service area.

Walkability

<table>
<thead>
<tr>
<th></th>
<th>Walk Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn</td>
<td>31</td>
</tr>
<tr>
<td>Bellevue</td>
<td>40</td>
</tr>
<tr>
<td>Black Diamond</td>
<td>34</td>
</tr>
<tr>
<td>Covington</td>
<td>23</td>
</tr>
<tr>
<td>Kent</td>
<td>39</td>
</tr>
<tr>
<td>Maple Valley</td>
<td>22</td>
</tr>
<tr>
<td>Newcastle</td>
<td>21</td>
</tr>
<tr>
<td>Renton</td>
<td>39</td>
</tr>
<tr>
<td>Seattle (SeaTac)</td>
<td>39</td>
</tr>
<tr>
<td>Seattle (Tukwila)</td>
<td>46</td>
</tr>
</tbody>
</table>

Source: WalkScore.com, 2019
Soda Consumption
In King County, 2% of 10th graders drink sugar-sweetened beverages daily at school. This shows a steep decline from previous years as school policies have shifted to ban sugary drinks in schools.

Daily Sweetened Drink Consumption at School, 10th Grade Youth, 2006-2018

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2008</th>
<th>2010</th>
<th>2012</th>
<th>2014</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>18%</td>
<td>16%</td>
<td>12%</td>
<td>10%</td>
<td>4%</td>
<td>2%</td>
</tr>
<tr>
<td>Washington</td>
<td>22%</td>
<td>19%</td>
<td>15%</td>
<td>13%</td>
<td>4%</td>
<td>3%</td>
</tr>
</tbody>
</table>


Fruit and Vegetable Consumption
In King County, 81% of 10th graders do not eat the recommended minimum of five servings of fruits and vegetables daily. This shows a continuing increase in the number of children not meeting the recommendations since 2008.

Eat Fewer than Five Servings of Fruits and Vegetables Daily, 10th Grade Youth, 2006-2018

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>74%</td>
<td>70%</td>
<td>73%</td>
<td>76%</td>
<td>78%</td>
<td>81%</td>
<td></td>
</tr>
<tr>
<td>Washington</td>
<td>75%</td>
<td>75%</td>
<td>76%</td>
<td>78%</td>
<td>80%</td>
<td>83%</td>
<td></td>
</tr>
</tbody>
</table>


Youth Sexual Behaviors
In King County, almost one-third of 10th graders (30%) have had sex. This rate is higher than the state rate (26%). 41% of 10th graders in King County did not use a condom during their last sexual encounters.

Sexual Behaviors, Youth

<table>
<thead>
<tr>
<th></th>
<th>Has had Sex</th>
<th>Did Not Use a Condom During Last Sexual Encounter</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>8th Grade</td>
<td>10th Grade</td>
</tr>
<tr>
<td>King County</td>
<td>9%</td>
<td>30%</td>
</tr>
<tr>
<td>Washington</td>
<td>9%</td>
<td>26%</td>
</tr>
</tbody>
</table>


Sexually Transmitted Infections
Chlamydia occurs at a rate of 453.2 per 100,000 persons in King County and the rate of gonorrhea is 194.0 per 100,000 persons. Primary and Secondary syphilis occurs at a rate of 15.0 per 100,000 persons in King County, while reported initial infections with genital Herpes occurred at a rate of 16.5 per 100,000 persons. Rates of the listed STIs are higher in King County than the state, with the exception of genital Herpes.
Sexually Transmitted Infections (STI) Rates, per 100,000 Persons

<table>
<thead>
<tr>
<th></th>
<th>King County</th>
<th>Washington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chlamydia</td>
<td>453.2</td>
<td>444.0</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>194.0</td>
<td>137.1</td>
</tr>
<tr>
<td>Syphilis (primary &amp; secondary)</td>
<td>15.0</td>
<td>9.2</td>
</tr>
<tr>
<td>Genital Herpes (initial infection)</td>
<td>16.5</td>
<td>28.2</td>
</tr>
</tbody>
</table>


HIV

The number of newly-diagnosed HIV cases fell from 2013 to 2017 in King County. The King County rate of newly-diagnosed HIV cases was 10.2 per 100,000 persons in 2017.

Newly Diagnosed HIV Cases, Annual Count and Rate, per 100,000 Persons, 2013-2017

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2017 Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>251</td>
<td>273</td>
<td>236</td>
<td>217</td>
<td>220</td>
<td>10.2</td>
</tr>
<tr>
<td>Washington</td>
<td>456</td>
<td>448</td>
<td>461</td>
<td>438</td>
<td>445</td>
<td>6.1</td>
</tr>
</tbody>
</table>


The incidence of HIV (annual new cases) in King County from 2013 to 2016, averaged, was 11.9 cases per 100,000 persons, while in South County it was 9.2 cases per 100,000 persons. The prevalence of HIV (those living with HIV regardless of when they might have been diagnosed or infected) is 323 cases per 100,000 persons in the county and 205 cases per 100,000 persons in South County.

HIV/AIDS Incidence, per 100,000 Persons & Prevalence, Three-Year Average, 2013-2016

<table>
<thead>
<tr>
<th></th>
<th>Incidence (Rate)</th>
<th>Prevalence (Number of Cases)</th>
</tr>
</thead>
<tbody>
<tr>
<td>South County</td>
<td>9.2</td>
<td>205</td>
</tr>
<tr>
<td>King County</td>
<td>11.9</td>
<td>323</td>
</tr>
</tbody>
</table>

Mental Health

Frequent Mental Distress
Frequent Mental Distress is defined as 14 or more bad mental health days in the last month. In King County, 10% of the adult population experienced frequent mental distress. Service area cities and HRAs had rates ranging from 7% in Bellevue and Covington/Maple Valley to 16% of adults in South Auburn (this number was based on a small sample size and should be treated with caution).

<table>
<thead>
<tr>
<th>Frequent Mental Distress, Adults, Five-Year Average, 2011-2015</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>15%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>16%*</td>
</tr>
<tr>
<td>Auburn North</td>
<td>13%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>7%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>9%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>12%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>7%</td>
</tr>
<tr>
<td>Kent**</td>
<td>13%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>15%</td>
</tr>
<tr>
<td>Kent East</td>
<td>12%</td>
</tr>
<tr>
<td>Kent West</td>
<td>14%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>8%</td>
</tr>
<tr>
<td>Renton**</td>
<td>11%</td>
</tr>
<tr>
<td>Renton East</td>
<td>14%</td>
</tr>
<tr>
<td>Renton South</td>
<td>10%</td>
</tr>
<tr>
<td>Renton North</td>
<td>9%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>9%</td>
</tr>
<tr>
<td>South County</td>
<td>12%</td>
</tr>
<tr>
<td>King County**</td>
<td>10%</td>
</tr>
<tr>
<td>Washington**</td>
<td>11%</td>
</tr>
</tbody>
</table>


Youth Mental Health
Among 10th grade youth, 36% in King County had experienced depression in the previous year, described as ‘feeling so sad or hopeless for two weeks or more that they had stopped doing their usual activities’. This represents a continued increase in youth depression over the previous 10-year timespan.
Youth Depression, Past 12 Months, 10th Grade

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>36%</td>
</tr>
<tr>
<td>Washington</td>
<td>40%</td>
</tr>
</tbody>
</table>


20% of 10th graders in King County said they had considered suicide in the past year, while 9% said they had attempted suicide in the past year. These numbers represent a continued increase in suicidal ideation and attempts over prior years.

Youth Considered and Attempted Suicide, Past 12 Months, 10th Grade

<table>
<thead>
<tr>
<th></th>
<th>Considered Suicide</th>
<th>Attempted Suicide</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>20%</td>
<td>9%</td>
</tr>
<tr>
<td>Washington</td>
<td>23%</td>
<td>10%</td>
</tr>
</tbody>
</table>


Intimate partner violence begins to be a concern for youth beginning in at least 8th grade, rising by grade level. 4% of 8th graders said ‘someone they were dating or going out with had limited their activities, threatened them, or made them feel unsafe in any other way’ in the past 12 months, while 6% of 10th graders and 8% of 12th graders indicated they had experienced intimate partner violence. Levels are higher in South County than in King County. Levels are higher among LGBTQ-identifying youth compared to all youth.

Intimate Partner Violence, in the Past 12 Months, 8th, 10th, and 12th Grade Students

<table>
<thead>
<tr>
<th></th>
<th>South County</th>
<th>King County</th>
</tr>
</thead>
<tbody>
<tr>
<td>All youth</td>
<td>7%</td>
<td>6%</td>
</tr>
<tr>
<td>LGBTQ-identifying youth</td>
<td>20%</td>
<td>17%</td>
</tr>
</tbody>
</table>


Healthcare professionals play an important role in the wellbeing of all LGBTQ youth, who may have particular difficulty discussing their health needs in front of their parents or guardians, who may not be supportive; correct use of pronouns and chosen names by healthcare professionals is also important, and impacts trust levels with Transgender youth. While data from the Healthy Youth Survey cannot be broken down by self-reported sexuality or gender-non-conforming youth on the askhys.net website, a special report was created utilizing this data in addition to listening sessions and interviews with youth and key informants as part of the King County CHNA 2018/2019. This “LGBTQ Community Spotlight” may be found at [https://kingcounty.gov/depts/health/data/community-health-indicators/~/media/depts/health/data/documents/CHNA-LGBTQ-Community-Spotlight.ashx](https://kingcounty.gov/depts/health/data/community-health-indicators/~/media/depts/health/data/documents/CHNA-LGBTQ-Community-Spotlight.ashx).
Key insights were that youth are more likely than adults to identify as LGBTQ (5.5% of adults do, while 11.3% of King County public school 8th 10th and 12th graders do, with an additional 7% responding ‘not sure’). LGBTQ-identifying youth are more likely to feel depressed, use cigarettes and abuse alcohol and drugs, be sedentary and/or obese, be victims of bullying and violence, be subject to homelessness, and have higher rates of suicide, particularly Transgender youth. All of these issues can be compounded by racial oppressions, and many can carry over into adulthood and have long-term health consequences. Access to hormone therapy or puberty blockers is also of particular concern to Transgender youth, and also carries long-term consequences.
Substance Use and Misuse

Cigarette Smoking

In King County, 11% of adults report being current smokers. This is lower than the 15% rate reported by adults statewide. Rates in the service area cities and HRAs range from 8% in Bellevue and South Bellevue to 22% in South Auburn.

## Adult Cigarette Smoking, Five-Year Average, 2013-2017

<table>
<thead>
<tr>
<th>City</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>20%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>22%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>19%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>8%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>8%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>17%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>9%</td>
</tr>
<tr>
<td>Kent**</td>
<td>16%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>19%</td>
</tr>
<tr>
<td>Kent East</td>
<td>13%</td>
</tr>
<tr>
<td>Kent West</td>
<td>14%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>10%</td>
</tr>
<tr>
<td>Renton**</td>
<td>15%</td>
</tr>
<tr>
<td>Renton East</td>
<td>16%</td>
</tr>
<tr>
<td>Renton South</td>
<td>14%</td>
</tr>
<tr>
<td>Renton North</td>
<td>16%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>16%</td>
</tr>
<tr>
<td>South County</td>
<td>10%</td>
</tr>
<tr>
<td>King County**</td>
<td>11%</td>
</tr>
<tr>
<td>Washington**</td>
<td>15%</td>
</tr>
</tbody>
</table>


Vapor products are now the most common nicotine product used by youth. 4% of 10th grade youth in King County smoked cigarettes in the prior 30 days, 2% used smokeless tobacco in the prior 30 days, and 16% had used vapor products.

## Youth Tobacco Use, Past 30 Days, Grade 10

<table>
<thead>
<tr>
<th>City</th>
<th>Smokes Cigarettes</th>
<th>Used Smokeless Tobacco</th>
<th>Used Vapor Products</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>4%</td>
<td>2%</td>
<td>16%</td>
</tr>
<tr>
<td>Washington</td>
<td>5%</td>
<td>2%</td>
<td>21%</td>
</tr>
</tbody>
</table>

9% of King County 10th graders, who reported vaping in the past 30 days, weren’t sure what substance they had vaped. 63% said it was a nicotine product, 20% said it was a THC (marijuana) product, and 31% stated it was a flavor-only product, with no nicotine or THC.

### Reported Substance “Vaped” Among Current Users, Past 30 Days, Grade 10

<table>
<thead>
<tr>
<th>Substance Not Known</th>
<th>Flavor Only (No Nicotine or THC)</th>
<th>THC (Marijuana)</th>
<th>Nicotine</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>31%</td>
<td>20%</td>
<td>63%</td>
</tr>
<tr>
<td>Washington</td>
<td>33%</td>
<td>21%</td>
<td>56%</td>
</tr>
</tbody>
</table>


### Alcohol Use

Binge drinking is defined as consuming a certain amount of alcohol within a set period of time. For males this is five or more drinks per occasion and for females it is four or more drinks per occasion. Among adults, 20% in King County reported having engaged in binge drinking in the previous 30 days. Rates ranged from 9% in West Kent to 20% in North Auburn and Covington/Maple Valley.

### Binge Drinking, Past 30 Days, Adults, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>City/Borough</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>18%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>20%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>17%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>18%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>18%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>14%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>20%</td>
</tr>
<tr>
<td>Kent**</td>
<td>14%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>16%</td>
</tr>
<tr>
<td>Kent East</td>
<td>13%</td>
</tr>
<tr>
<td>Kent West</td>
<td>9%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>12%</td>
</tr>
<tr>
<td>Renton**</td>
<td>16%</td>
</tr>
<tr>
<td>Renton East</td>
<td>15%</td>
</tr>
<tr>
<td>Renton South</td>
<td>15%</td>
</tr>
<tr>
<td>Renton North</td>
<td>19%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>19%</td>
</tr>
<tr>
<td>South County</td>
<td>17%</td>
</tr>
<tr>
<td>King County**</td>
<td>20%</td>
</tr>
<tr>
<td>Washington**</td>
<td>17%</td>
</tr>
</tbody>
</table>

Not unexpectedly, alcohol use among youth increased by age. 26% of 12th grade youth in King County had consumed alcohol at some time in the past month. Consumption of alcohol was seen in 17% of 10th graders, 7% of 8th graders and 2% of 6th graders. These rates are lower for King County than for the state.

### Alcohol Use in Past 30 Days, Youth

<table>
<thead>
<tr>
<th></th>
<th>6th Grade</th>
<th>8th Grade</th>
<th>10th Grade</th>
<th>12th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>2%</td>
<td>7%</td>
<td>17%</td>
<td>26%</td>
</tr>
<tr>
<td>Washington</td>
<td>2%</td>
<td>8%</td>
<td>18%</td>
<td>28%</td>
</tr>
</tbody>
</table>


Among youth, binge drinking rates rose from 10th to 12th grade; 9% of 10th graders and 14% of 12th graders in King County had engaged in binge drinking in the previous two weeks.

### Binge Drinking in Past 2 Weeks, Youth

<table>
<thead>
<tr>
<th></th>
<th>10th Grade</th>
<th>12th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>9%</td>
<td>14%</td>
</tr>
<tr>
<td>Washington</td>
<td>10%</td>
<td>15%</td>
</tr>
</tbody>
</table>


**Drug Use**

14% of King County adults said they had used marijuana during the prior month. Rates in service area cities and HRAs ranged from 7% in South Bellevue (this number is based on a small sample size and should be treated with caution) to 18% in West Kent.

### Marijuana Use, Past 30 Days, Adults, Five-Year Average, 2013-2017

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>11%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>10%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>13%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>10%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>7%*</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>11%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>9%</td>
</tr>
<tr>
<td>Kent**</td>
<td>14%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>13%</td>
</tr>
<tr>
<td>Kent East</td>
<td>8%*</td>
</tr>
<tr>
<td>Kent West</td>
<td>18%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>14%</td>
</tr>
<tr>
<td>Renton**</td>
<td>12%</td>
</tr>
<tr>
<td>Location</td>
<td>Percent</td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Renton East</td>
<td>14%</td>
</tr>
<tr>
<td>Renton South</td>
<td>10%*</td>
</tr>
<tr>
<td>Renton North</td>
<td>12%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>11%</td>
</tr>
<tr>
<td>South County</td>
<td>13%</td>
</tr>
<tr>
<td>King County**</td>
<td>14%</td>
</tr>
<tr>
<td>Washington**</td>
<td>12%</td>
</tr>
</tbody>
</table>


19% of the 12th grade youth, and 14% of the 10th grade youth in King County indicated current use of marijuana in the past 30 days. These rates are lower than state rates.

### Marijuana Use in Past 30 Days, Youth

<table>
<thead>
<tr>
<th></th>
<th>10th Grade</th>
<th>12th Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>King County</td>
<td>14%</td>
<td>19%</td>
</tr>
<tr>
<td>Washington</td>
<td>18%</td>
<td>26%</td>
</tr>
</tbody>
</table>

Preventive Practices

Flu and Pneumonia Vaccines

63% of seniors in King County received a flu shot, which falls short of the Healthy People 2020 objective for 70% of all adults, 18 and older, including seniors, to receive a flu shot. Area HRA rates of seniors obtaining flu shots ranged from 37% in Covington/Maple Valley to 71% in South Bellevue.

Adults, 18 to 64 years of age, received flu shots at lower levels than seniors. 37% of King County adults received a flu shot. Adults receiving flu shots in area cities and neighborhoods ranged from 33% in Black Diamond/Enumclaw/SE County to 59% in Newcastle/Four Creeks.

Flu Shots, Past 12 Months, Seniors and Adults, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>Area</th>
<th>Seniors, Ages 65+</th>
<th>Adults, Ages 18-64</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>58%</td>
<td>35%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>60%</td>
<td>36%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>57%</td>
<td>34%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>64%</td>
<td>36%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>71%</td>
<td>42%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>54%</td>
<td>33%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>37%</td>
<td>60%</td>
</tr>
<tr>
<td>Kent**</td>
<td>63%</td>
<td>40%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>56%</td>
<td>36%</td>
</tr>
<tr>
<td>Kent East</td>
<td>67%</td>
<td>42%</td>
</tr>
<tr>
<td>Kent West</td>
<td>65%</td>
<td>36%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>52%</td>
<td>59%</td>
</tr>
<tr>
<td>Renton**</td>
<td>60%</td>
<td>44%</td>
</tr>
<tr>
<td>Renton East</td>
<td>57%</td>
<td>50%</td>
</tr>
<tr>
<td>Renton South</td>
<td>61%</td>
<td>47%</td>
</tr>
<tr>
<td>Renton North</td>
<td>Data suppressed*</td>
<td>37%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>51%</td>
<td>34%</td>
</tr>
<tr>
<td>South County</td>
<td>61%</td>
<td>37%</td>
</tr>
<tr>
<td>King County**</td>
<td>63%</td>
<td>37%</td>
</tr>
<tr>
<td>Washington**</td>
<td>60%</td>
<td>36%</td>
</tr>
</tbody>
</table>


The Healthy People 2020 objective is for 90% of seniors to have a pneumonia vaccine. In both King County and the state, 74% of senior residents reported having received the pneumonia vaccine. Rates in area cities and neighborhoods range from 58% in SE Kent to 81% in Black Diamond/Enumclaw/SE County.
### Pneumonia Vaccine, Adults 65+, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>74%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>71%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>76%*</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>74%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>67%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>81%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>78%</td>
</tr>
<tr>
<td>Kent**</td>
<td>66%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>58%</td>
</tr>
<tr>
<td>Kent East</td>
<td>74%*</td>
</tr>
<tr>
<td>Kent West</td>
<td>Data suppressed*</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>69%</td>
</tr>
<tr>
<td>Renton**</td>
<td>76%</td>
</tr>
<tr>
<td>Renton East</td>
<td>78%*</td>
</tr>
<tr>
<td>Renton South</td>
<td>74%</td>
</tr>
<tr>
<td>Renton North</td>
<td>Data suppressed*</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>72%</td>
</tr>
<tr>
<td>South County</td>
<td>73%</td>
</tr>
<tr>
<td>King County**</td>
<td>74%</td>
</tr>
<tr>
<td>Washington**</td>
<td>74%</td>
</tr>
</tbody>
</table>


### Immunization of Children

Among area school districts, Tahoma School District had the highest rate of up-to-date vaccinations among children entering Kindergarten (92.7%) and Auburn School District had the lowest rate of up-to-date vaccinations among children entering Kindergarten (82.8%).

### Up-to-Date Immunization Rates of Children Entering Kindergarten, 2016-2017

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn School District</td>
<td>82.8%</td>
</tr>
<tr>
<td>Kent School District</td>
<td>84.6%</td>
</tr>
<tr>
<td>Renton School District</td>
<td>91.7%</td>
</tr>
<tr>
<td>Tahoma School District</td>
<td>92.7%</td>
</tr>
<tr>
<td>Tukwila School District</td>
<td>88.1%</td>
</tr>
<tr>
<td>King County</td>
<td>84.8%</td>
</tr>
<tr>
<td>Washington</td>
<td>85.0%</td>
</tr>
</tbody>
</table>

Mammograms
The Healthy People 2020 objective for mammograms is 81.1% of women, between the ages of 50 and 74, have a mammogram in the past two years. This translates to a maximum of 18.9% who lack screening. In SeaTac/Tukwila, 40% of women lack breast cancer screening, compared to 22% county-wide.

No Mammogram Past 2 Years, Women Ages 50-74, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>Area</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>18%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>Data suppressed *</td>
</tr>
<tr>
<td>Auburn North</td>
<td>19%*</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>20%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>22%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>16%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>18%</td>
</tr>
<tr>
<td>Kent**</td>
<td>24%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>22%</td>
</tr>
<tr>
<td>Kent East</td>
<td>Data suppressed*</td>
</tr>
<tr>
<td>Kent West</td>
<td>Data suppressed*</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>31%</td>
</tr>
<tr>
<td>Renton**</td>
<td>18%</td>
</tr>
<tr>
<td>Renton East</td>
<td>21%*</td>
</tr>
<tr>
<td>Renton South</td>
<td>16%</td>
</tr>
<tr>
<td>Renton North</td>
<td>20%*</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>40%</td>
</tr>
<tr>
<td>South County</td>
<td>22%</td>
</tr>
<tr>
<td>King County**</td>
<td>22%</td>
</tr>
<tr>
<td>Washington**</td>
<td>23%</td>
</tr>
</tbody>
</table>


Pap Smears
The Healthy People 2020 objective is for 93% of women, ages 21 to 65, to have a Pap smear in the past three years. This equates to a maximum of 7% of women who lack screening. In SeaTac/Tukwila, 26% of women, ages 21 to 65, lack recent cervical screening.

No Pap Test Past 3 Years, Women Ages 21-65, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>Area</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn**</td>
<td>17%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>Data suppressed *</td>
</tr>
</tbody>
</table>
### Colorectal Cancer Screening

The Healthy People 2020 objective for adults, 50 to 75 years old, is for 70.5% to obtain colorectal cancer screening (defined as: a blood stool test in the past year, sigmoidoscopy in the past 5 plus blood test in the past 3 years, or colonoscopy in the past 10 years). 64% of South County residents, ages 50-75, met the colorectal cancer screening guidelines. Area cities and neighborhoods ranged from 53% in SeaTac/Tukwila to 74% in Black Diamond/Enumclaw/SE County.

### Screening for Colorectal Cancer, Adults Ages 50-75, Five-Year Average, 2011-2015

<table>
<thead>
<tr>
<th>City/Neighborhood</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auburn North</td>
<td>65%</td>
</tr>
<tr>
<td>Auburn South</td>
<td>69%</td>
</tr>
<tr>
<td>Auburn North</td>
<td>59%</td>
</tr>
<tr>
<td>Bellevue**</td>
<td>69%</td>
</tr>
<tr>
<td>Bellevue South</td>
<td>69%</td>
</tr>
<tr>
<td>Black Diamond/Enumclaw/SE County</td>
<td>72%</td>
</tr>
<tr>
<td>Covington/Maple Valley</td>
<td>61%</td>
</tr>
<tr>
<td>Kent**</td>
<td>62%</td>
</tr>
<tr>
<td>Kent SE</td>
<td>58%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kent East</td>
<td>59%</td>
</tr>
<tr>
<td>Kent West</td>
<td>65%</td>
</tr>
<tr>
<td>Newcastle/Four Creeks</td>
<td>67%</td>
</tr>
<tr>
<td>Renton**</td>
<td>72%</td>
</tr>
<tr>
<td>Renton East</td>
<td>65%</td>
</tr>
<tr>
<td>Renton South</td>
<td>69%</td>
</tr>
<tr>
<td>Renton North</td>
<td>68%</td>
</tr>
<tr>
<td>SeaTac/Tukwila</td>
<td>53%</td>
</tr>
<tr>
<td>South County</td>
<td>64%</td>
</tr>
<tr>
<td>King County**</td>
<td>64%</td>
</tr>
<tr>
<td>Washington**</td>
<td>70%</td>
</tr>
</tbody>
</table>

Attachment 1. Benchmark Comparisons

Where data were available, Valley Medical Center’s health and social indicators were compared to the Healthy People 2020 objectives. The **bolded items** are Healthy People 2020 objectives that did not meet established benchmarks; non-bolded items met or exceeded the objectives.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Service Area Data</th>
<th>Healthy People 2020 Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>High school graduation rate</td>
<td>76.2% - 89.8%</td>
<td>87%</td>
</tr>
<tr>
<td>Child health insurance rate</td>
<td>96.2%</td>
<td>100%</td>
</tr>
<tr>
<td>Adult health insurance rate</td>
<td>87.7%</td>
<td>100%</td>
</tr>
<tr>
<td>Unable to obtain medical care</td>
<td>10% - 26%</td>
<td>4.2%</td>
</tr>
<tr>
<td>Cancer deaths</td>
<td>157.4</td>
<td>161.4 per 100,000 persons</td>
</tr>
<tr>
<td>Colon/rectum cancer death</td>
<td>13.0</td>
<td>14.5 per 100,000 persons</td>
</tr>
<tr>
<td>Lung cancer death</td>
<td>40.7</td>
<td>45.5 per 100,000 persons</td>
</tr>
<tr>
<td>Female breast cancer death</td>
<td>19.9</td>
<td>20.7 per 100,000 persons</td>
</tr>
<tr>
<td>Prostate cancer death</td>
<td>20.6</td>
<td>21.8 per 100,000 persons</td>
</tr>
<tr>
<td>Stroke deaths</td>
<td>34.0</td>
<td>34.8 per 100,000 persons</td>
</tr>
<tr>
<td>Unintentional injury deaths</td>
<td>36.4</td>
<td>36.4 per 100,000 persons</td>
</tr>
<tr>
<td>Suicides</td>
<td>13.7</td>
<td>10.2 per 100,000 persons</td>
</tr>
<tr>
<td>Liver disease deaths</td>
<td>11.8</td>
<td>8.2 per 100,000 persons</td>
</tr>
<tr>
<td>Homicides</td>
<td>4.0</td>
<td>5.5 per 100,000 persons</td>
</tr>
<tr>
<td>Early and adequate prenatal care</td>
<td>68.9%</td>
<td>83.2%</td>
</tr>
<tr>
<td>Low birth weight infants</td>
<td>6.7%</td>
<td>7.8% of live births</td>
</tr>
<tr>
<td>Infant death rate</td>
<td>5.1</td>
<td>6.0 per 1,000 live births</td>
</tr>
<tr>
<td>Adult obese, ages 20+</td>
<td>30%</td>
<td>30.5%</td>
</tr>
<tr>
<td>Teens obese, ages 12-17</td>
<td>8% - 13%</td>
<td>16.1%</td>
</tr>
<tr>
<td>Adults engaging in binge drinking</td>
<td>17%</td>
<td>24.2%</td>
</tr>
<tr>
<td>Cigarette smoking by adults</td>
<td>10%</td>
<td>12%</td>
</tr>
<tr>
<td>Pap smears, ages 21-65, screened in the past 3 years</td>
<td>85%</td>
<td>93%</td>
</tr>
<tr>
<td>Mammograms, ages 50-74, screened in the past 2 years</td>
<td>78%</td>
<td>81.1%</td>
</tr>
<tr>
<td>Adults, 65+, ever receiving pneumonia vaccine</td>
<td>73%</td>
<td>90%</td>
</tr>
<tr>
<td>Annual adult influenza vaccination</td>
<td>37%</td>
<td>70%</td>
</tr>
</tbody>
</table>
Attachment 2. Community Member Survey Results

Valley Medical Center conducted surveys with community members to obtain input on community needs, barriers to care and resources available to address the identified needs. The surveys were available in an electronic format through a Survey Monkey link from January 7 – 31, 2020 and in print. During this time, 126 surveys were collected from community residents. VMC distributed the survey link through emails, social media, news publications and their patient portal. A written introduction explained the purpose of the survey, assured participants the survey was voluntary and they would remain anonymous.

What are the biggest health issues or needs you and your family face?

Access to Health Care

- Affordable insurance
- Transportation to appointments
- Vision care
- Dental care
- Cost of prescription medicines
- Prescriptions that are not covered by my insurance plan
- It seems like every time I need to see my doctor; they can’t get me in and tell me to go to urgent care.
- Most doctors are booked out 1-6 months with no open time slots available for add on cases
- Being able to afford insurance and out of pocket expenses
- The inability to predict cost of care and coverage issues with insurance companies
- Difficulty getting appointments around normal work hours because I can’t take time off to go to medical appointments
- We need timeslots for routine and specialty appointments that are open outside of our working hours. We can't afford to take time off from work, especially on a weekly basis. I always prioritize clinics/providers who offer evening and/or weekend hours. We want to follow up on our health concerns, but cannot always get the time off
- Access to primary care and specialty care
- It is difficult to find providers who are in network close to our home
- Cost of prescription medicine
- Insurance does not cover alternative/preventive care (e.g. acupuncture, naturopath, massage and physical therapy)
- Time to manage preventive health care needs
- Medicare/Medicaid education in different languages (finding dental and vision care).
- Birth control/family planning
- Need for more providers in urgent care
- I am choosing not to have recommended surgery because I don’t have anyone to care for me afterward (e.g. prepare meals, pick up prescriptions, etc.)
• Even with insurance the deductibles are too high. We are paying more than ever for labs and medications that once was covered
• Finding a provider who is accepting new patients
• Navigating the complexities of health care. I have a disabled family member and it is very difficult to make sure she receives adequate care and it’s hard to get her what she needs when she needs it
• Availability of women’s services
• Access to pediatric care. We are able to access a general pediatrician through VMC, but all specialists have to be seen at Seattle Children’s or Mary Bridge, which are very far away. This means additional time off work for appointments and the continuity of care is a burden on me
• As part of the Asian/Pacific Islander community, we see access to care as a big issue, especially for the immigrant communities. There are language and cultural barriers to care. Personally, I have seen language barriers every day on the hospital campus just assisting patients with getting to their appointments

Mental Health
• I have mental health issues and there are not very many clinics that will treat me
• Mental health care and services for autism
• Suffering from anxiety and depression
• Young adult depression
• Being able to access a mental health provider

Disease Conditions
• The biggest issue has been a cancer diagnosis and it is a stressful time waiting for appointments to be scheduled, waiting for test results, coordinating services
• Cancer
• Pre-diabetes
• Diabetes
• Heart condition
• Advanced emphysema
• Chronic back pain
• Asthma (adults and children)
• Epilepsy
• Sleep apnea
• Hypertension
• Allergies

Healthy Lifestyle
• Weight management
• Stress/very busy lifestyle
• Access to affordable physical activities for year-round youth participation and group physical activities for morbidly obese adults
• Exercise and healthy eating for adults
• Work/life balance
• Health coaching
• Finding time to be active
• Proper nutrition

**Aging Adults**
• Elder fitness, discounts at fitness centers for seniors with a fixed income
• Age-related illness and mental health issues
• Need adult day care for an aging father
• As older adults age and begin to lose independence there are few community options for transportation and availability of medications
• End of life management
• Caring for a parent with significant health issues

**At-Risk Populations**
• Teen health and development
• Gay health
• Adult child with drug addiction
• There is a need for more health care for young adults aging out of their parents’ insurance. They typically have lower paying jobs that do not offer it. It is especially hard on LGBTQ.
• Supportive care and acceptance of queer/non-binary kid
• Access to LGBTQ sensitive providers

**Other**
• Caregiving for family member with a chronic disease
• Lack of provider education to treat each patient as an individual rather than just prescribing meds
• Terrible traffic
• Homelessness

**Which groups in your community, are most affected by these needs? (e.g., youth, older residents, racial/ethnic groups, LGBTQ+, homeless, specific neighborhoods)**
• Working persons with families
• Older adults
• Racial groups/minorities/persons of color
• LGBTQ+
• Homeless
• Mature persons who are pre-retirement age
• Disabled
• Youth
• Persons living in Kent and Renton neighborhoods
• Persons with chronic illness
• Low-income residents
• Veterans
• Women and children

Where do you and/or your family go to receive routine health care services (physical exams, check-ups, immunizations, treatment for chronic diseases)?

• HealthPoint
• Valley Medical Center
• Community clinics
• Swedish
• Polyclinic
• Covington primary care
• Kaiser
• MultiCare
• Virginia Mason
• Neighborcare Clinic
• Private practice primary care provider
• Urgent Care
• Family Care of Kent
• Cascade Primary Care
• MyHealth Clinic
• Public Health Department.
• Overlake
• CHI/Franciscan

What barriers do you or your family face when they want or need to obtain health care, mental health care, or other health-related services? (Examples: cost, long wait, transportation, language, child-care, discrimination, etc.)

• Long waits to be seen (scheduling months in advance)
• Lack of available free time
• Distance from services and lack of services that are covered by insurance
• Transportation
• Lack of privacy in waiting areas
• No available appointments in evenings or on weekends
• Availability of specialty care
• Cost of care, cost of medications, cost of insurance/deductibles, cost of lab work and imaging
• Cost/lack of instance reimbursement for alternatives like chiropractic and naturopath
• Difficulty finding available mental health care
• Quality of care
• Child care
• It is difficult to navigate the system
• Qualified personnel
• Discrimination toward LGBTQ
• Too few providers
• Coordination of care

What conditions in your community most negatively impact health?
• Drugs and alcohol
• Mental health
• Lack of work/life balance
• Aging population, isolation, falls
• Chronic diseases
• Transportation for seniors, lack of public transportation
• No sidewalks, no traffic lights, poor roads
• Lack of health insurance, cost of care, lack of physicians taking new patients
• Crime
• Stress
• Homelessness
• Air quality, noise, pollution
• Food insecurity, lack of health food options, fast food
• Health literacy
• Poverty, economic instability, income inequality
• Lack of education
• Language barriers
• Smoking/vaping
• Obesity, sedentary lifestyle

Community Member Survey Demographics
Respondents reside in the following cities/communities:
• Auburn
• Beacon Hill/Seattle
• Black Diamond
• Bonney Lake
• Burien
- Covington
- Des Moines
- Edgewood
- Enumclaw
- Fairwood
- Federal Way
- Issaquah
- Kent
- Kirkland
- Lake Tapps
- Maple Valley
- Mercer Island
- Puyallup
- Renton
- Seattle
- Spanaway
- Tacoma
- Tukwila
- Vaughn
- West Seattle

**Gender**

<p>| | |</p>
<table>
<thead>
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<th></th>
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<tbody>
<tr>
<td>Female</td>
<td>75.2%</td>
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<tr>
<td>Male</td>
<td>24.0%</td>
</tr>
<tr>
<td>Non-Binary</td>
<td>0.8%</td>
</tr>
</tbody>
</table>

**Race/Ethnicity**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>White/Caucasian</td>
<td>81.0%</td>
</tr>
<tr>
<td>More than one race</td>
<td>7.4%</td>
</tr>
<tr>
<td>Asian/Asian American</td>
<td>4.9%</td>
</tr>
<tr>
<td>Other</td>
<td>3.3%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>1.7%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>1.7%</td>
</tr>
</tbody>
</table>
Attachment 3. Community Partner Survey Results

Valley Medical Center conducted surveys with community partners to obtain input on community needs, barriers to care and resources available to address the identified needs. The surveys were available in an electronic format through a Survey Monkey link from January 7 – 31, 2020 and in print. During this time, 33 surveys were collected from community organizations who serve medically underserved, low-income, and minority populations, and included local health or other departments or agencies that have current data or other information relevant to the health needs of the community. Valley Medical Center distributed the survey link through emails, social media, news publications and their patient portal.

A written introduction explained the purpose of the survey, assured participants the survey was voluntary and their responses would remain confidential. Analysis of the primary data occurred through a process that compared and combined responses to identify themes.

What are the most significant health issues or needs among the communities you serve?

- Across all income, ages, and racial/ethnic groups, we see a lack of awareness and access to resources to support a healthy lifestyle in day-to-day life (including adequate physical activity and healthful diet) to be one of the largest, preventable reasons people experience negative health outcomes in the communities we serve. These issues are exacerbated in communities that are low-income, communities of color, and/or newcomer populations.
- There is a lack of social connectivity and relationship support in day-to-day life affecting people of all ages, from youth to the elderly.
- Access to health services, to include transportation, money for co-payments and flexible hours to be able to go to appointments. These are issues/barriers for both physical and mental health needs, and chemical dependency support.
- Healthcare for low to no income K-12 students/parents and college students. Health care coverage for small business owners.
- Mental health and substance abuse counseling needs, we especially need more access to inpatient services.
- People are struggling to afford healthcare.
- Language barriers
- Mental health
- Addiction, substance use
- Cancer – getting appointments in a timely manner, getting approvals with insurance companies and getting treatment started. Having places for people to turn to when diagnosed
- Autism
- Asthma
- Diabetes
• Obesity
• Economic inequality, equity in investment in health-supporting infrastructure (transportation, open space, utilities, etc.), institutionalized racism, non-motorized transportation access and mass transit access, affordable housing, and food justice.
• Services for seniors
• Dental care
• Vision care
• Healthy food affordability and accessibility
• Homelessness
• Access to shower and laundry facilities for clients experiencing homelessness.
• Lack of easy access to healthcare, fear of seeking out care, the mentality that you only go to the doctor if something is wrong/you're sick instead of routine preventive health exams
• Safe, healthy and affordable housing. Safe Spaces for LGBTQ.
• Black, Asian and Latino mental health professionals.
• Housing/Low Barrier Shelters are the top need. Chemical Dependency Treatment/Harm reduction supplies to reduce infections. Physical Health: Bacterial infections, sepsis, Hep C.
• Access to birth control.

Who or what groups, in the community, are most affected by these needs? (e.g., youth, older residents, racial/ethnic groups, LGBTQ+, homeless, specific neighborhoods)

• Communities of color, recent immigrants and refugees as they often have less established social and advocacy networks, and indigenous communities.
• Older adults.
• Immigrants.
• Refugees.
• Low-income.
• Renters.
• Youth.
• Single parent families.
• Working poor and persons living on a fixed income.
• Health outcomes are the worst among non-white, low-income and newcomer communities.
• Youth, African, African American, Hispanic, LGBTQ, senior citizens, homeless are most affected by these needs and more in the Skyway/West Hill neighborhood.
• Young mothers and their babies.
• Sunset neighborhood of Renton.
• People who don't qualify for federal benefits like SNAP/WIC (i.e. because of their income) or are hesitant to utilize these programs due to immigration concerns.
• For Skyway-West Hill, the entire community is affected. Youth (asthma rate is higher than
county avg), middle aged and elderly (chronic disease rate higher). Particularly, the eastern side of Renton Ave who are lower-income, and renters.

- Renton has very few resources for the homeless. Center of Hope is a large help to women with families but for single men and women there is very little. A hot meal program and showers once a week at the Salvation Army. A day shelter is desperately needed where they can get showers, laundry, counseling, access to medical care and referrals to resources. Meals, lockers, a place to rest.

Where do the people you serve go to receive routine healthcare services (physical exams, check-ups, immunizations, treatment for chronic diseases)?

- Our population receives primary care from all health systems serving King County and the Puget Sound region. We receive most of our referrals from Virginia Mason, Swedish/Providence, and Valley Medical; as well as community health centers such as Sea Mar.
- If they go, they typically go to the local Health department/clinic. Some do have their own doctors. For mental health/substance abuse, people typically go to Valley Cities, Kent Youth & Family, Consejo, or Sea Mar.
- Some have doctors. Many go to the Emergency Room or Urgent Care. Some people access care at the Mobile Medical Van.
- Medicare-approved providers.
- Community Health Clinics.
- HealthPoint, Sea Mar, Valley Cities, Neighborcare Clinics.
- Many don’t receive routine health care.
- Pacific Medical Center, Renton.
- Places that accept public health care assistance.
- University of Washington Medical Clinics
- VA.
- Valley Medical Centers.
- School health clinic.

What barriers do those you serve face when they want or need to obtain healthcare, mental health care, or other health-related services? (Examples: cost, long wait, transportation, language, childcare, discrimination, etc.)

- Transportation.
- Depending on the population, we find different barriers. Homeless young adults face barriers related to cost, health insurance coverage, knowledge of the system, and discrimination.
- People express a lack of knowledge of how the healthcare system could or should have prevented a diagnosis or helped them to deal with it in the aftermath.
• Cost/lack of sufficient insurance.
• South King County is severely lacking in low barrier resources for homeless single adults.
• Not knowing how to get care or follow up.
• People don’t know how to navigate the insurance and health care systems.
• Access to counseling and inpatient programs given that there’s not enough capacity to meet
  the need. Long waits, particularly for mental health/substance abuse services.
• Language can be an issue.
• The barrier to their health is that they have already born the harm of living under the stress
  and structure of unhealthy communities.
• Some ethnic groups in need of interpreter services (Russian, Ukrainian, Vietnamese).
• For mental health there is a cumbersome intake process.
• Language is a common and significant barrier.
• Discrimination on the basis of socioeconomics is common. We assume discrimination on
  other grounds is also occurring.
• Substance abuse treatment is difficult to access, especially for those with complicating
  factors such as mental illness or other complicating illnesses.
• Ability to take time off work to get to care.
• Access to child care.
• Clients who are homeless are treated differently.
• Clients are accused of drug seeking if they are in any kind of pain.
• Lack of skills/knowledge and ability to advocate for oneself in a system that often does not
  hear their voice.
• Lack of citizenship/legal status, lack of guardianship for caregivers who have taken in children
  from their relatives/friends.

What conditions in the community you serve most negatively impact health?
• Food access, food marketing, environments not conducive to physical activity.
• High cost of living, access to services, free educational opportunities, to include parenting
  classes/support groups.
• Homelessness, lack of access to safe, stable, healthy housing, lack of access to nutritious food
  and/or inability to pay energy bills.
• Poverty.
• Economic inequality, institutionalized racism, exploitation of labor and land.
• Lack of access to service providers, lack of transportation, residents don't have time,
  residents can't speak English.
• Transportation, air quality, poor food options in near vicinity, chronic disease (family history).
• Lack of health insurance.
• Lack of dental care.
• Not enough low cost or free drug/alcohol treatment facilities.
• Lack of housing, food insecurity, poor hygiene/lack of access to showers/laundry, violence in the homeless community.
• Mental health care is not adequately supported.
• Discrimination.
• Stress and trauma.
Attachment 4. Community Partner Survey Respondents

Community partners who wished to remain anonymous did not provide their names or organizations.

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
<th>Service Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amanda Kerstetter</td>
<td>REACH/Evergreen Treatment Services</td>
<td>South King County</td>
</tr>
<tr>
<td>Amanda Santo</td>
<td>Multi-Service Center</td>
<td>Federal Way</td>
</tr>
<tr>
<td>Anant Mehta</td>
<td>Renton School District</td>
<td>Renton</td>
</tr>
<tr>
<td>Angie Escoto</td>
<td>The Salvation Army Renton Food Bank</td>
<td>Renton</td>
</tr>
<tr>
<td>Dave Hobbs</td>
<td>Kent Parks</td>
<td>Kent</td>
</tr>
<tr>
<td>Evan Oakes</td>
<td>HealthPoint</td>
<td>King County</td>
</tr>
<tr>
<td>Hannah Bahnmiller</td>
<td>City of Renton</td>
<td>Renton</td>
</tr>
<tr>
<td>Jamie McGinnis</td>
<td>Renton Technical College</td>
<td>Renton</td>
</tr>
<tr>
<td>Jon Schultdt</td>
<td>Renton Police</td>
<td>Renton</td>
</tr>
<tr>
<td>Karen Sauve</td>
<td>St Vincent de Paul</td>
<td>Renton</td>
</tr>
<tr>
<td>Kate Ortiz</td>
<td>Public Health Seattle &amp; King County</td>
<td>Seattle</td>
</tr>
<tr>
<td>Kemi Nakabayashi, MD</td>
<td>Pacific Medical Centers</td>
<td>Renton</td>
</tr>
<tr>
<td>Lara Randolph</td>
<td>Sustainable Renton</td>
<td>Renton</td>
</tr>
<tr>
<td>Leeching Tran</td>
<td>Viet Wah</td>
<td>Seattle and Renton</td>
</tr>
<tr>
<td>Melissa Glenn</td>
<td>King County Library System</td>
<td>Renton</td>
</tr>
<tr>
<td>Michele Starkey</td>
<td>Renton School District</td>
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<tr>
<td>Michelle Hankinson</td>
<td>Renton Area Youth and Family Services</td>
<td>Renton</td>
</tr>
<tr>
<td>Monica Davalos</td>
<td>Global to Local</td>
<td>SeaTac</td>
</tr>
<tr>
<td>Roberta Pitkin</td>
<td>RNR Property Investments</td>
<td>Renton</td>
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<tr>
<td>Robin Corak</td>
<td>Multi-Service Center</td>
<td>Federal Way</td>
</tr>
<tr>
<td>Ryan Quigtar</td>
<td>Renton Innovation Zone Partnership</td>
<td>Renton/Skyway</td>
</tr>
<tr>
<td>Sally Sundar</td>
<td>YMCA of Greater Seattle</td>
<td>King County</td>
</tr>
<tr>
<td>Samantha Nelson</td>
<td>Renton Technical College</td>
<td>Renton</td>
</tr>
<tr>
<td>Tina McDonough</td>
<td>Valley Girls &amp; Guys!</td>
<td>Ravensdale</td>
</tr>
<tr>
<td>Vicky Baxter</td>
<td>Renton Chamber of Commerce, Retired</td>
<td>Renton</td>
</tr>
</tbody>
</table>
**Attachment 5. Resources to Address Needs**

Community members identified community resources potentially available to address the identified health needs. This is not a comprehensive list of all available resources. For additional resources refer to King County 211 at [https://www.crisisconnections.org/king-county-2-1-1/](https://www.crisisconnections.org/king-county-2-1-1/).

<table>
<thead>
<tr>
<th>Health Need</th>
<th>Community Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to health care</td>
<td>Catholic Community Services, Community Health Centers, HealthPoint, Hopelink, International Community Health Services, Kindering, Neighborcare, Neighborhood House, Public Health, Rotacare, Salvation Army, Sea Mar, Sound Generations, Valley Medical Clinics</td>
</tr>
<tr>
<td>Chronic disease management (heart disease, cancer, stroke, diabetes, lung disease)</td>
<td>American Heart Association, Community Health Centers, HealthPoint, Neighborcare, Public Health, Sea Mar, Seattle Cancer Care Alliance, Senior centers, Sierra Sister, Valley Medical Clinics, YMCA</td>
</tr>
<tr>
<td>Disease preventive (health education, health screenings, vaccines, fall prevention)</td>
<td>Community Health Centers, HealthPoint, Kindering, Public Health, Renton Area Youth and Family Services, Schools and school districts, Sea Mar, Valley Medical Clinics, YMCA</td>
</tr>
<tr>
<td>Economic insecurity</td>
<td>Community college training programs, Global To Local, Neighborhood House, Salvation Army, Washington State Department of Social and Health Services, Work Source, YMCA, YWCA</td>
</tr>
<tr>
<td>Food insecurity</td>
<td>Churches, Food banks, Food Lifeline, Meals on Wheels</td>
</tr>
</tbody>
</table>
| Housing and homelessness                                                                 | REACH  
Renton Meal Coalition  
Salvation Army  
St. Vincent de Paul  
Sustainable Renton  
Washington State Department of Social and Health Services                                                                 |
| Loneliness/isolation                                                                      | Churches  
Kinship Program  
Meals on Wheels  
Public library  
Renton Area Youth and Family Services  
Renton Meal Coalition  
Renton Senior Center  
Senior Center  
Sound Generations Hyde Shuttle program  
Support groups  
Valley Cities  
YMCA                                                                                       |
| Mental health                                                                             | Consejo  
DAWN  
HealthPoint  
Healthsource  
King County Sexual Assault Center  
Navos  
RAYS  
Renton Area Youth and Family Services  
River Valley Psychological Services  
Sea Mar  
Sound Mental Health  
Valley Cities  
YMCA  
YWCA                                                                                       |
| Physical or sexual abuse                                                                  | Consejo  
DAWN                                                                                      |
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<td>Sound Mental Health</td>
<td>Sound Mental Health</td>
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<td>YWCA</td>
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<td>HealthPoint</td>
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<td>Medical Mobile Van</td>
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<td></td>
<td>Planned Parenthood</td>
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<td>Public health</td>
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<td></td>
<td>Valley Medical Clinics</td>
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<tr>
<td>Substance use and misuse</td>
<td>Evergreen Treatment</td>
</tr>
<tr>
<td></td>
<td>Navos</td>
</tr>
<tr>
<td></td>
<td>RAYS</td>
</tr>
<tr>
<td></td>
<td>Renton Area Youth and Family Services</td>
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<td>Sea Mar</td>
</tr>
<tr>
<td></td>
<td>Thunderbird</td>
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<td>Valley Cities</td>
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<td></td>
<td>Veterans Administration</td>
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<td>VITRA</td>
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<td>Weight management/obesity</td>
<td>Community Health Centers</td>
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<td></td>
<td>Lifestyle Medicine at Valley</td>
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<td>HealthPoint</td>
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<td>Mobile Medical Van</td>
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<td>Public Health</td>
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<td>Silver Sneakers</td>
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<td></td>
<td>Weight Watchers</td>
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Attachment 6. Report of Progress

VMC developed and approved an Implementation Strategy to address significant health needs identified in the 2017 Community Health Needs Assessment. The hospital addressed: access to care, mental and behavioral health, chronic conditions and preventive care (includes overweight/obesity and smoking), and family and social support through a commitment of community benefit programs and charitable resources.

To accomplish the Implementation Strategy, goals were established that indicated the expected changes in the health needs as a result of community programs and education. Strategies to address the priority health needs were identified and measures tracked. The following section outlines the health needs addressed since the completion of the 2017 CHNA.

Access to Care

- Valley Medical Center, in Collaboration with Renton Rotary, Renton Technical College and Renton Salvation Army launched the Renton RotaCare Clinic. The free RotaCare Clinic is offered on Saturdays at two community locations for families and individuals. Valley Medical continues to support RotaCare through free lab and imaging services, donated medical supplies and financial support for free or low-cost prescriptions.
- Jefferson Terrace Medical Respite Program is a 34-bed transitional unit for homeless patients with ongoing medical needs. Through a multi-year grant, Valley Medical supports the Respite Program mission to provide vital medical, social and housing assistance to our homeless neighbors.
- Valley Medical continues to provide enrollment assistance with the expanded Medicaid Program and local health exchanges to help increase access to care.
- Valley Medical is a proud participant of the South King County Health Fair, providing free health screenings and health resources for the homeless and other vulnerable populations within our community.

Family and Social Supports

- Valley Medical provides the Circle of Security Parenting Series, an award-winning program designed to enhance close relationships between parents and children.
- Numerous birth and parenting preparation and support classes are provided free to the public:
  - Labor and Birth
  - Breastfeeding
  - Newborn Care
  - Conscious Fathering
  - Life with Baby
Car Seat Safety
Parenting Support Groups
Perinatal Loss Support Group
Free Bicycle Helmet Fittings

- Valley Medical’s *Trauma Nurses Talk Tough* program lets impressionable audiences know there’s a strong link between unsafe practices, such as drinking and driving, and accidents. The program, run by Valley Medical Center’s ER staff, visits area schools and community groups to promote safe habits to reduce the number of accidents that occur in our community.

- Outreach programs that are designed to benefit students in grades K-12:
  - A Day in the ED
  - Career Fairs
  - Safety Events

- *The Friends Project’s* mission is to create an on-going program where first responders and the special needs community establish a positive relationship of education and trust. Special needs children and their siblings meet fire fighters and police officers, and therapy dogs.

- *Pitter Patter* is a Valley Medical program that supports community members through birth and parenting with free seminars and interactive events focused on raising awareness about nurturing happy, healthy families and family fun.

**Management of Chronic Conditions and Preventive Care**

- Valley Medical supports *Project Access Northwest* in helping our uninsured and underinsured neighbors receive specialty medical and dental care. Project Access Northwest facilitates chronic/advanced care referrals from RotaCare and other community safety net clinics for donated services ranging from joint replacement surgery and advanced MRI, to outpatient wound care and physical therapy.
  - The program matches prescreened patients with volunteer specialty providers and pays health insurance premiums for those unable to afford coverage on their own.

- In collaboration with Renton Technical College (RTC), Valley Medical developed the *Health Coach Program*. This free 12-week course trains community members to build trust and motivate high-risk patients to cultivate positive health choices and treatment adherence during visits with patients. Students learn about chronic illnesses and utilize active listening and communication skills as well as learn about local community resources.

- Valley Medical Center provides numerous, specialized health and wellness programs:
  - *GLOW* is designed by women for women. Knowing that women are often the health care decision makers for themselves and their families, GLOW’s mission is to empower women to make healthy decisions for themselves and their loved ones. Presentations by physicians and other professionals cover physical, spiritual, emotional and personal
well-being topics. A Women’s Health Blog also provides advice from health experts on a monthly basis.

- **GoldenCare** is a free health and wellness membership program for adults, 62 and older, offered by Valley Medical Center. The program includes low-cost cholesterol and glucose testing, hernia screenings, an annual health fair and free insurance counseling.
- **DocTalks** is open to the public and covers various topics, including stroke care, diabetes, obesity, nutrition, exercise, heart disease and oncology.
- **Webinars and free events** include an extensive array of topics including Help for Hernias, Food Allergies: Fact and Fiction, and As Girls Grow Up.

- Valley Medical is proud to be a participant in the national Healthier Hospital Initiative, committing to serving healthier food and beverage options to improve the health of patients, staff and the community. Additionally, Valley Medical is a tobacco-free workplace.
- **BodyWorks**, is a free 8-week program designed by the US Department of Health and Human Services to provide parents and caregivers of teens, ages 9-14, with tools to help improve family eating and activity habits to prevent obesity. The program teaches participants about healthy shopping and cooking strategies, recipes, reading food labels, healthy snack ideas and meal planning.
- Valley Medical provides numerous support groups focused on chronic conditions and preventive care, including:
  - Better Breathers Club
  - Stroke Club and Neurotango classes
  - Cancer Lifeline classes and support groups
  - Celiac Disease/Gluten Intolerance group
  - Pre-diabetes group support in collaboration with the YMCA
- The **Lifestyle Medicine Center** offers services to improve the health of chronically ill senior populations and prevent disease by changing behaviors and modifying activity to improve overall health and wellness. Registered Dietitians and Wellness Coaches provide 1:1 counseling and group education classes.
- **Healthy Foundations** is a 16-week intensive lifestyle modification program designed to help individuals adopt healthy lifestyle changes that incorporate fitness, wellness and nutrition. Originally designed to help pre-surgical patients lose weight, the program is now available to the general public. The program includes physical therapy, nutrition counseling, up-to-date education on healthy food choices and wellness education, as well and exercise.
- To proactively address health issues, Valley Medical:
  - Has expanded its primary care intake assessments to include questions about seat belt use, alcohol consumption and distracted driving.
  - Smoking is a “vital sign” and all patients are asked about it upon check-in and at every visit with a provider.
All Valley Medical patients are proactively screened through our Fall Prevention Program.

Mental Health and Behavioral Health

- Valley Medical Center’s Clinic Network offers the Behavioral Health Integration Program (BHIP), a team-based approach to managing depression and anxiety in the primary care setting based on the collaborative care model. Additionally, the program provides a clinic-based mental health clinician available to patients and providers, in person and over the phone. This program is geared toward mild or moderate depression, anxiety and related problems.
- In partnership with Renton Area Youth Services at the Children’s Therapy, Valley Medical is able to provide valuable behavioral health resources to the underserved pediatric population.
- To proactively address mental health issues, the Suicide Prevention Screen has been integrated into the intake pathway for all patients (ER and inpatient) with automatic consult to/follow-up orders by our social services team.
- Valley Medical has developed an Emergency Room Intervention Team (ERIT) Counselor position to provide psychiatric evaluations, crisis intervention, mental health consultations and chemical dependency support and referral services to individuals of all ages admitted to the ED with a primary behavioral health presentation. Valley Medical is currently recruiting for the position. This position is embedded in the Case Management team in the ER with a goal to facilitate a more synchronized plan of care across to care team.