

**HEALTH VOICE VISION
REPORT
2018**

This report was prepared by the Minority Health Disparities Initiative at the University of Nebraska-Lincoln. Questions regarding the data or content of this report can be sent to kstarlin2@unl.edu or mhdi@unl.edu.

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INTRODUCTION

Lexington, Nebraska

Lexington, Nebraska is at the forefront of a demographic shift in rural Nebraska. Lexington High School (LHS) students come from 32 nations and speak 20 languages. Of the almost 900 students attending LHS, 76% of students live in poverty, 18% are English Language Learners, 21% are 1st generation immigrants or refugees, and 13% are homeless. Yet, LHS has high attendance (95%) and many students graduate on time (91%). However, rapidly changing demographics present a particular stress on rural communities' infrastructures. The 2015 Nebraska Health Disparities Executive Summary reports that most minority groups in Nebraska are: less likely to receive emotional support; more frequently suffer from diabetes and obesity (food related); and frequently perceive their health as fair or poor compared to their non-minority counterparts (1). In rural towns such as Lexington, where residents are more likely to be foreign born (36.9% v. 6.3% NE), speak English as a second language (67.6% v. 10.5% NE), and have poor educational backgrounds (high school diplomas: 55.1% v. 90.5% NE), the importance of understanding the interrelationships between social determinants and public health is significant (2).

The Minority Health Disparities Initiative's commitment to Lexington is long-term. Early on in our meetings with the Lexington community, we discovered that the current available community health assessments for Dawson County do not adequately reflect the public health conditions in Lexington. To address this critical knowledge gap, this project, Health Voice Vision (HVV), engaged residents in an innovative discovery process by combining participatory research methods (Photovoice) with respondent driven sampling in Lexington. The Minority Health Disparities Initiative partnered with the Lexington community to develop a community assessment to address the following questions:

1. How do community members of a diverse rural Nebraska community interpret social determinants of health (SDH) as facilitators or barriers to health and well-being?
2. How do community members define and prioritize health, sickness, and disease?
3. How do people make sense of who they are in relation to their community?
4. What makes them feel included in the process of creating a healthy community, and what makes them feel excluded?
5. What would community members change in their communities to improve their health and well-being?

The following report provides an overview of the data collected in 2017 for the Lexington community to build their public health capacity with confidence.

METHODS

Survey Instrument Development, Recruitment and Procedures

The 140-item questionnaire was developed by the research team and delivered to residents of Lexington using audio computer-assisted self-interview (ACASI) software at designated community organizations throughout the community. Participants had the option of taking the survey in 3 different languages: English, Spanish, and Somali. Participants were recruited to the study using respondent driven sampling (RDS) which is a type of chain referral recruitment. RDS begins by selecting a small number of participants to take a survey. After completion, each participant is given recruitment coupons which they can pass out to people they know who qualify for the study. Those who are recruited through a coupon are then given more coupons and recruitment spreads through the local community. Recruitment continued until 325 interviews were completed. Participants were eligible for an incentive for completing the survey, and for each recruitment coupon that resulted in a new participant. Upon arriving to the study location, participants (1) were checked-in, (2) were verbally read an informed consent/assent form, (3) provided consent, (4) interviewed, and (5) checked-out.

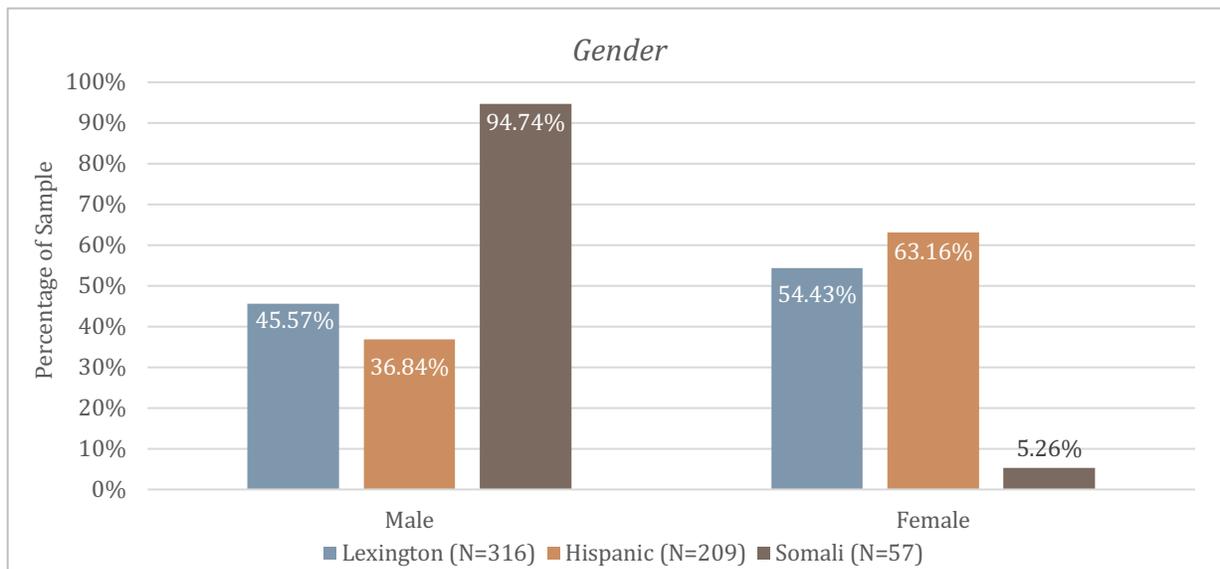
Participants received the survey via the ACASI interface that walked them step by step through questions and answer choices, provided audio of the text if needed, and inputted their selections at each step via a screen. This method provides confidentiality for responses and support for a participant's preferred language. Several participants indicated receiving information regarding minutes to complete, but ranged from approximately 30 minutes to 1 hour. The staff included 4 English only speaking individuals, 3 Spanish (2 fluent) speaking individuals, and 2 Somali speaking individuals. There was no additional help for check-ins and check-outs; thus, one person on staff was required for this purpose at all times (partially due to the time required per interview). Some participants were required to wait, with wait times ranging approximately 5 – 10 minutes. Because of the steady stream of participants in Lexington, interviews were conducted back-to-back throughout the day by all interviewers, with only brief breaks permitted (e.g., 5 minutes to eat lunch). Given the hard work and dedication of each staff member, most participants were interviewed with minimal wait time.

DEMOGRAPHICS

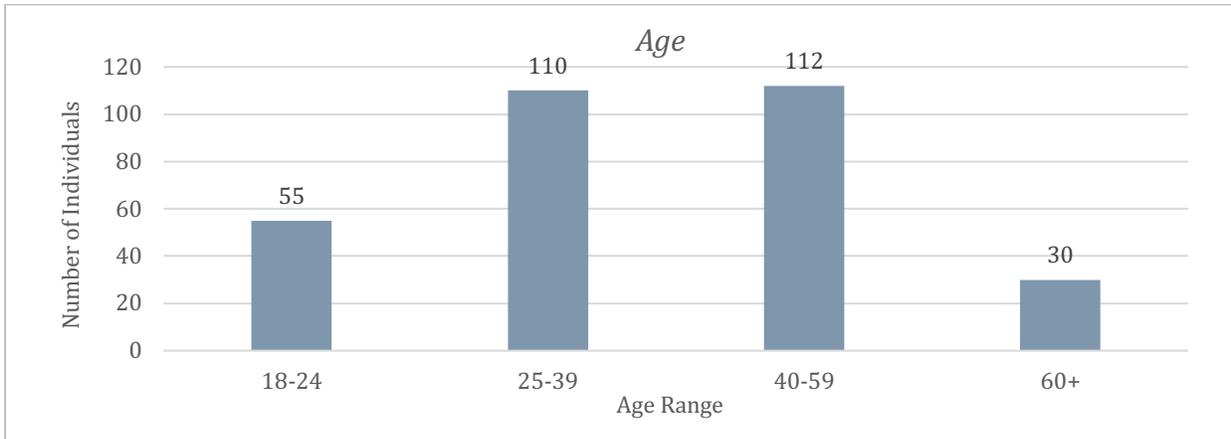
Individual and Household

Demographics. During the interviews, we requested information regarding basic demographic characteristics from those who participated in the study. This provided a general description of the participants in our study as several questions asked about race and ethnic identity, household, and values related to the importance of family.

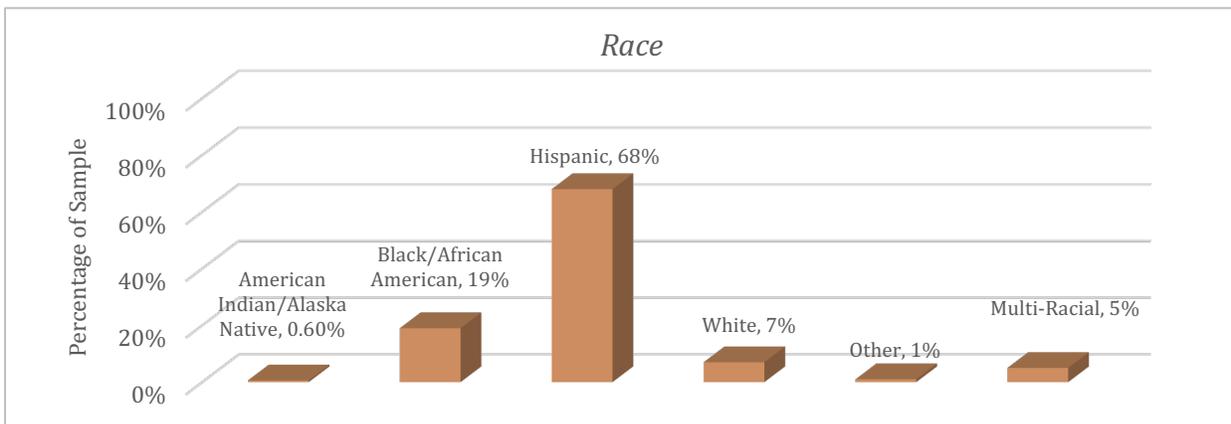
Gender. The sample is made up of 45.57% men and 54.43% women. While the Hispanic subgroup of the sample is split similarly to the non-Hispanic group, the Somali subgroup includes significantly more men than women compared to non-Somali people ($p < .05$).



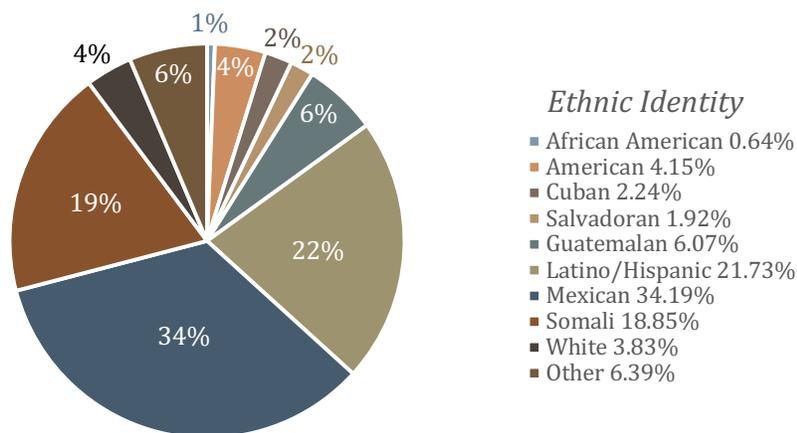
Age. The average age of the sample is 39.57 years. Participants ranged in ages from 18 years to 77 years (N=307).



Race. In the sample of 310 individuals, 211 participants identified as Hispanic, 59 as Black/African American, 21 as White, 14 as Multi-Racial, 3 as American Indian/Alaska Native, and 3 as Other.



Ethnic Identity. As noted in the previous section on race, most people in the sample identify with Hispanic ethnic groups such as Mexican, Cuban, Guatemalan, or Salvadoran. Somali participants make up about 19% of the sample, and other ethnic groups make up about 15% of the sample (N=313).



Household Composition. The average total household size in Lexington is about 5 people. Hispanics in Lexington, on average, have fewer people under age 18 in their households than the rest of the population. Somali people, on the other hand, have more children under age 18 in their household than the rest of the population.

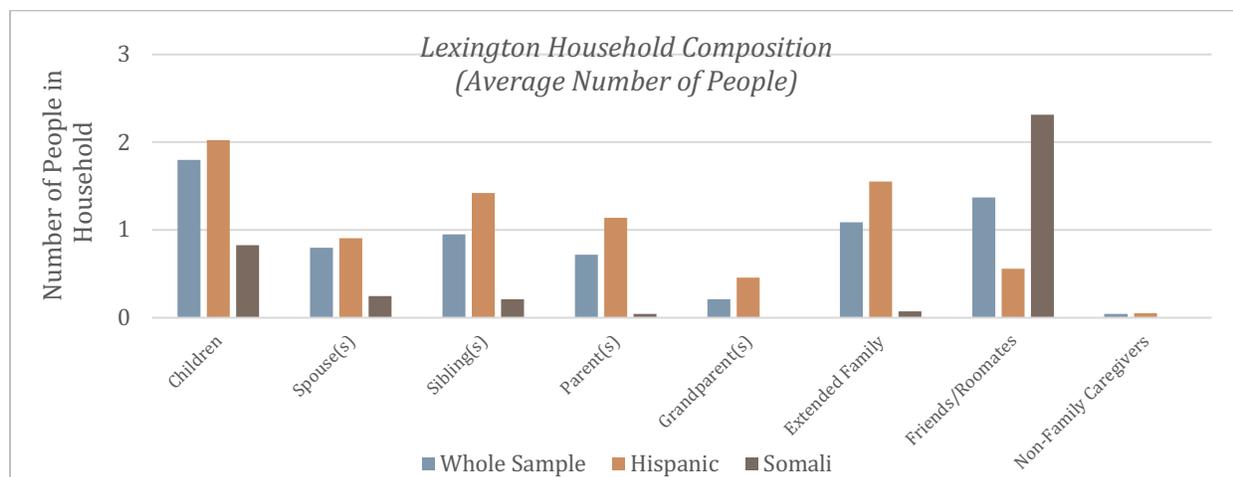
Number of People in Household - Household Composition (Family/Not). Most of the sample considers all of the people living in their household to be family. Somali people, however, are more

likely to feel as though people in their household(s) are not family compared to non-Somali participants. This is likely because (as shown in question 15) Somali people tend to live with more friends and roommates than their non-Somali neighbors.

DO YOU CONSIDER ALL OF THE PEOPLE IN YOUR HOUSEHOLD AS PART OF YOUR FAMILY?			
	Lexington Sample	Hispanic Subsample	Somali Subsample
Yes	299 (96.45%)	202 (97.58%)	53 (89.83%)
No	11 (3.55%)	5 (2.42%)	6 (10.17%)
TOTAL	310	207	59

*p<.05

Household Composition in Depth. Hispanics, compared to others in Lexington, have more children, spouses, siblings, parents, and grandparents living in their homes on average. Hispanic people do, however, have fewer friends and roommates living in their household than the rest of the population. Conversely, Somali people in Lexington live with higher numbers of friends and roommates in their household than do the rest of the Lexington population. The Somali population reports living with lower numbers of children, spouses, and other family members in their household than the rest of Lexington's residents. In this case, the Hispanic population tends to live with more family members in the household than other groups in Lexington.



Monthly Household Income. The majority of the sample report household incomes between \$0 and \$3,100. This is lower than the median household income in Nebraska, which was approximately \$4,744 in 2016 according to the Nebraska Department of Numbers. Hispanic participants were more likely to have higher household incomes than non-Hispanic participants (p<.05).

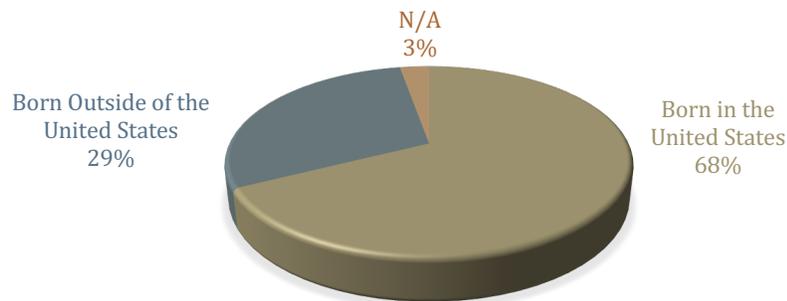
MONTHLY HOUSEHOLD INCOME			
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)
\$0 to \$1,200	95 (30.84%)	62 (30.54%)	11 (18.64%)
\$1,201 to \$1,750	110 (35.71%)	53 (26.11%)	44 (74.58%)
\$1,751 to \$2,150	37 (12.01%)	32 (15.76%)	1 (1.69%)
\$2,151 to \$3,100	36 (11.69%)	32 (15.76%)	3 (5.08%)
\$3,101 to \$4,500	11 (3.57%)	9 (4.43%)	0
\$4,501 to \$5,500	7 (2.27%)	6 (2.96%)	0
\$5,501 or More	12 (3.90%)	9 (4.43%)	0
Total	308	203	59

Number of Household Financial Contributors. Two-thirds of the Lexington sample have one to two household contributors. The Hispanic portion of the sample was more likely to report higher numbers of household contributors than non-Hispanic participants ($p < .05$).

NUMBER OF HOUSEHOLD FINANCIAL CONTRIBUTORS			
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)
1 Contributor	158 (51.30%)	75 (37.13%)	58 (98.31%)
2 Contributors	106 (34.42%)	93 (46.04%)	0
3 Contributors	27 (8.77%)	23 (11.39%)	0
4 Contributors	10 (3.25%)	7 (3.47%)	0
5 Contributors	2 (0.65%)	2 (0.99%)	0
6 Contributors	5 (1.62%)	2 (0.99%)	1 (1.69%)
Total	308	202	59

Nativity. According to the American Immigration Council, approximately 7% of the Nebraska population is made up of foreign-born citizens (13). The current sample is comprised of nearly ten times that amount of people born outside of the U.S. Somali people are significantly more likely to have been born outside of the U.S. than non-Somali Lexington residents who participated in the current research ($p < .05$).

Lexington Nativity



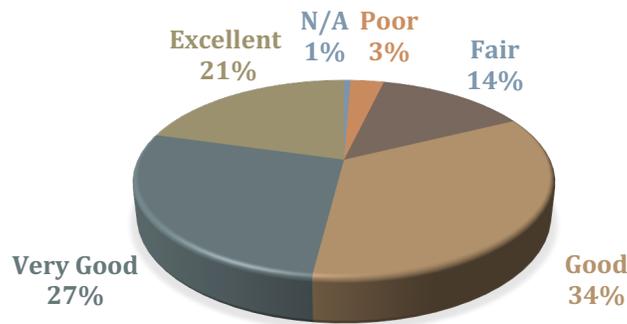
WERE YOU BORN IN THE UNITED STATES?			
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)
Yes	95 (30.45%)	67 (32.52%)	5 (8.62%)*
No	217 (69.55%)	139 (67.48%)	53 (91.38%)*
Total	312	206	58

Travel to Non-U.S. Birthplace. Hispanic participants born outside of the United States were more likely to have visited their home countries since moving to the U.S. than other participants who were not born in the U.S. In this sample, Somali participants were less likely to have visited their home countries since emigrating to the U.S. than other participants born outside of the U.S.

PHYSICAL HEALTH

Overall Health. 82.76% of all respondents reported “good” or better overall health. Hispanic people, on average, rated their overall health as “good” more often than non-Hispanic Lexington residents who more often rated their health as “excellent” and “very good.” In other words, Hispanic residents rated their health as being more moderate than other Lexington participants. Conversely, a higher proportion of Somali participants rated their overall health as “excellent” and “very good” than non-Somali Lexington residents did.

How Would You Rate Your Overall Health?



HOW WOULD YOU RATE YOUR OVERALL HEALTH?						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)	
Excellent	66 (20.69%)	37 (17.62%)	22 (37.29%)	38 (26.57%)	27 (15.79%)	
Very Good	88 (27.59%)	46 (21.90%)	33 (55.93%)	54 (37.76%)	33 (19.30%)	
Good	110 (34.48%)	90 (42.86%)	0	34 (23.78%)	75 (43.86%)	
Fair	45 (14.11%)	32 (15.24%)	3 (5.08%)	12 (8.39%)	31 (18.13%)	
Poor	10 (3.13%)	5 (2.38%)	0	5 (3.50%)	5 (2.92%)	
Total	319	210	59	143	171	

Physical Fitness. Hispanic participants were more likely than non-Hispanic participants to rate their physical fitness as “good”, “fair”, or “poor” rather than “excellent” or “very good.” Conversely, Somali participants were more likely to rate their overall physical fitness as “excellent” or “very good” than non-Somali participants.

Physical Health. During the interviews, participants were asked questions concerning their physical health. We asked them questions regarding their lifestyle and nutrition as well as the measures taken through preventative care, like screenings and testing. We gathered information regarding various medical issues and family medical history. In addition, some questions asked about pain and injury within a 6 month and 12-month period.

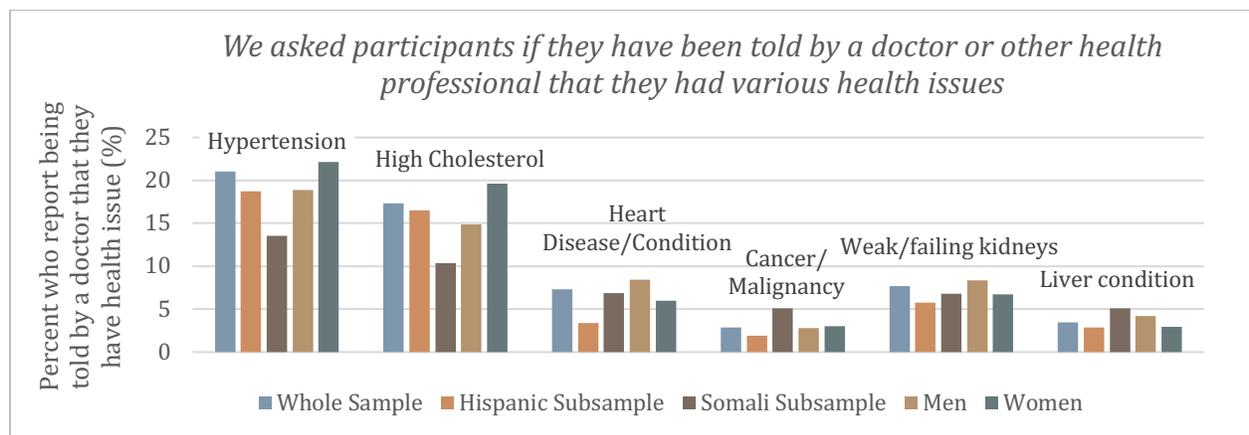
Sleep Quality. The sample reports sleeping about 7 hours a night on average. The Hispanic subsample sleeps slightly longer per night at 7.25 hours on average, and the Somali subsample sleeps slightly less at 6.44 hours per night on average ($p < .05$). This trend is supported with the fact that Hispanic people in the sample have less trouble falling and staying asleep, and report feeling well rested more often than their non-Hispanic neighbors ($p < .05$). The Somali subsample, on the other hand, show lower odds of staying asleep and feeling well rested in a week than non-Somali people.

IN THE PAST WEEK HOW MANY TIMES DID YOU HAVE TROUBLE FALLING ASLEEP?			
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)
No Trouble	108 (34.50%)	84 (40.78%)	13 (22.03%)
1-2 Times	133 (42.59%)	77 (37.38%)	35 (59.32%)
3-4 Times	49 (15.65%)	34 (16.50%)	8 (13.56%)
5-6 Times	9 (2.88%)	3 (1.46%)	2 (3.39%)
7 Or More	14 (4.47)	8 (3.88%)	1 (1.69%)
Total	313	206	59

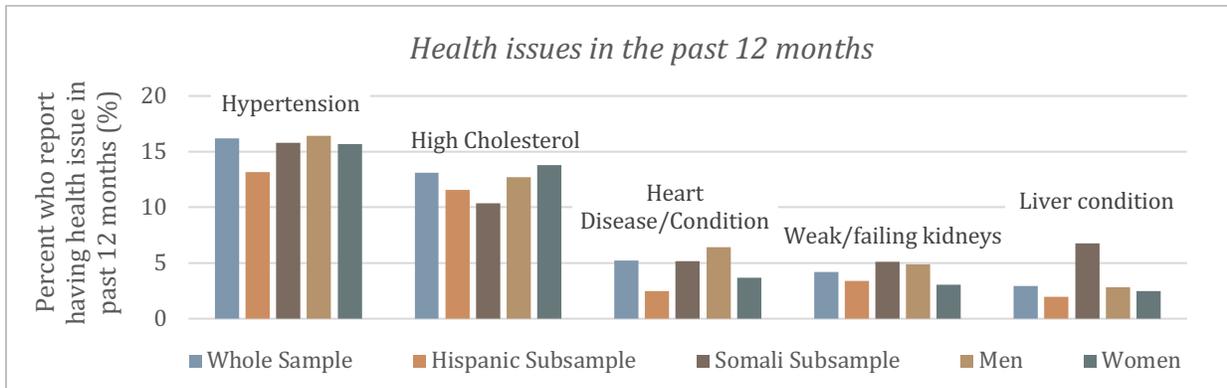
IN THE PAST WEEK HOW MANY TIMES DID YOU HAVE TROUBLE STAYING ASLEEP?			
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)
No Trouble	147 (47.27%)	112 (54.11%)	18 (31.58%)
1-3 Times	125 (40.19%)	73 (35.27%)	30 (52.63%)
4-6 Times	29 (9.32%)	16 (7.73%)	8 (14.04%)
7 Times	10 (3.22%)	6 (2.90%)	1 (1.75%)
Total	311	207	57

IN THE PAST WEEK HOW MANY TIMES DID YOU WAKE UP FEELING WELL RESTED?			
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)
Never	51 (16.29%)	33 (15.87%)	11 (18.97%)
1-2 Days	129 (41.21%)	75 (36.06%)	33 (56.90%)
3-4 Days	63 (20.13%)	51 (24.52%)	6 (10.34%)
5-6 Days	34 (10.86%)	24 (11.54%)	4 (6.90%)
7 Days	36 (11.50%)	25 (12.02%)	4 (6.90%)
Total	313	208	58

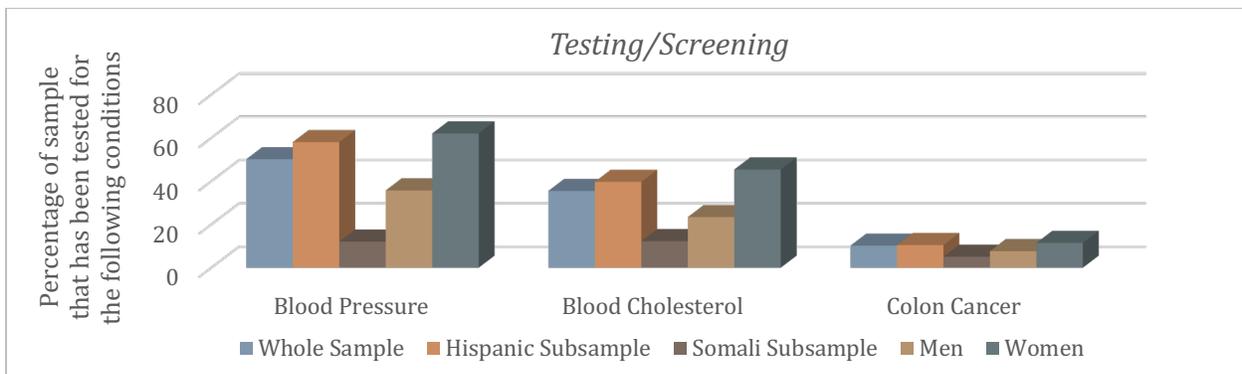
Various health issues. Twenty-one percent of the sample report being told they have hypertension by a doctor, followed by 17 percent having High cholesterol. Less than 10 percent of the sample report being told by a doctor or health professional that they have Heart disease or weak/failing kidneys, and even fewer have been told they have cancer or a liver condition. These results don't differ significantly for men and women, and Somali people show no significant differences from non-Somali people in the sample. While Hispanic people generally report health issues as told by health professionals at the same level as non-Hispanics, this subgroup has significantly lower odds of being told they have heart conditions than non-Hispanic people. People in the sample were more likely to report being told they have hypertension, high cholesterol, heart disease, and weak or failing kidneys as age increased ($p < .05$).



Various health issues in the past 12 months. Few people in the sample report having any of the health issues in the last 12 months. Similarly, to the results on diagnoses by health professionals, the current results confirm that Hispanic people are less likely to report heart conditions than their non-Hispanic counterparts in the sample. Older people in the sample were more likely to report having hypertension, high cholesterol, and heart conditions in the last 12 months.

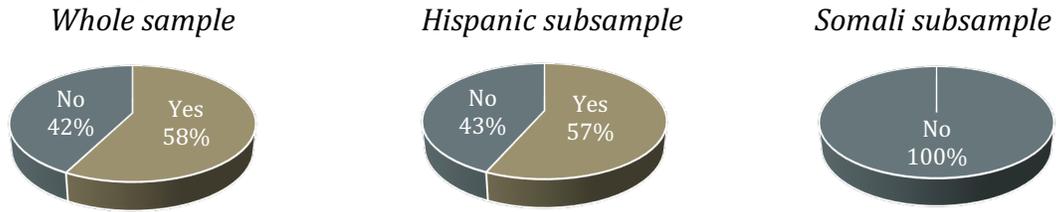


Testing/Screening. We asked people if they have been tested for various health issues by a health professional in the last 12 months. About half of the sample has had their blood pressure tested in the last year. Fewer people (35.5%) have had their cholesterol tested, and even fewer (10.19%) have been tested for colon cancer in the last year. Overall, as age increased in the sample, so did the likelihood of being tested. Hispanic participants reported more blood pressure and cholesterol tests than non-Hispanic participants. Somali people reported that getting tested for these two health risks significantly less than non-Somali people.

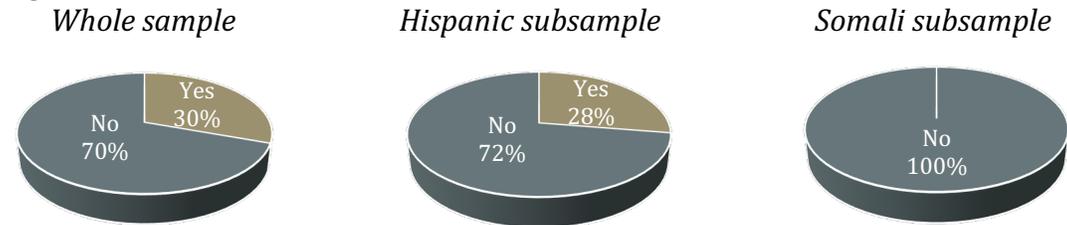


Women. More than half of the female participants report that they have had a Pap smear or Pap test in the last year. However, only 30 percent of the whole female sample have had a mammogram in the last 12 months. The American Cancer Society recommends women ages 45 to 54 should have a mammogram every year, and those older than 55 should continue to get mammograms every one or two years. Pap smears and pap tests, however, are meant to be received once every 3-5 depending on one's age according to the U.S. office of women's health. There were no significant differences in testing between women of different ethnic groups. Although no Somali women in the sample have had a mammogram or Pap test in the last year, there are only three Somali women in the sample, so it is possible that results for Somali women as a whole are different. When it comes to Pap tests, age does not affect whether participants report getting the test. However, results show that as age increases, so does mammogram testing.

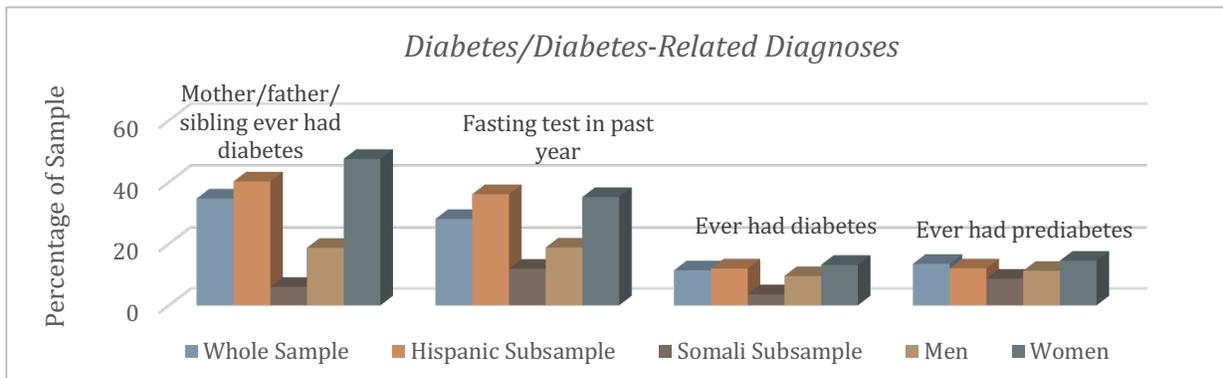
Pap smear or Pap test



Mammogram



Diabetes/Diabetes-Related Diagnoses. Diabetes prevalence varies greatly depending on gender and ethnic group. Hispanic people who participated in the research were significantly more likely to have a family member who has had diabetes compared to non-Hispanic participants. Similarly, Hispanic participants were more likely to have had fasting test for diabetes or blood sugar in the past 12 months compared to their non-Hispanic counterparts. Somali participants, on the other hand, were much less likely to have family with diabetes or to have had diabetes testing compared to the non-Somali subset of participants.



Similarly to Somali people in the sample, men were also less likely to have had diabetes screening or to have family with the disease compared to women who answered the same questions. Finally, age matters when it comes to diabetes testing and diagnoses. Specifically, older people in the sample were more likely to have had fasting tests, been told by a health professional they have diabetes, or had prediabetes, impaired fasting glucose, impaired glucose tolerance, borderline diabetes, or high blood sugar. Of the 24 women who answered the question “Were you pregnant when the doctor or other health professional told you that you have diabetes or sugar diabetes,” 25% said that they were pregnant at the time.

Diet, Nutrition, & Lifestyle

Told to Change Diet/Physical Activity by Doctor. The world health organization recommends that “Adults aged 18–64 should do at least 150 minutes of moderate-intensity aerobic physical activity throughout the week or do at least 75 minutes of vigorous-intensity aerobic physical activity throughout the week or an equivalent combination of moderate- and vigorous-intensity activity (12).” When it comes to people who participated in the current research, about a third of them have been

told by a doctor or health professional to increase their physical activity, and about a quarter of the sample has been advised to reduce the amount of fat calories in their diets. About 20 percent of the sample has discussed their diet with a doctor or health professional in the past year, and only about 14 percent have been advised to participate in a weight loss program. Hispanic people report being told in the past year to increase their physical activity and to reduce the amount of fat calories they consume more often than non-Hispanic participants. This is the same trend for women compared to men. On other words, women have greater odds of reporting being told to change their physical activity levels or the amount of fat calories they consume. Somali respondents, on the other hand, report fewer conversations with their doctors about diet and physical activity changes. With the current sample, as age increases, so do reports of lifestyle change recommendations from doctors and health professionals.

TOLD TO CHANGE DIET/PHYSICAL ACTIVITY BY DOCTOR					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
Increase Physical Activity	102 (32.80%)	73 (35.27%)	6 (10.17%)	29 (20.42%)	70 (42.42%)
Reduce Amount Of Fat Calories	77 (24.60%)	56 (27.05%)	4 (6.78%)	25 (17.61%)	50 (29.95%)
Participate In A Weightloss Program	43 (13.83%)	28 (13.59%)	4 (6.78%)	16 (11.27%)	26 (15.76%)
Talked To You About Your Diet	59 (18.97%)	44 (21.26%)	3 (5.08%)	24 (16.78%)	33 (20.12%)

Smoking. Approximately 14 percent of participants report being smokers or having been smokers in the past year. This is slightly lower than the state average of 17 percent in 2014. About 30% of those people who smoke report that a doctor or health professional has talked to them about it in the last year. While there are not many differences in smoking across ethnic groups, it is true that men are significantly more likely than women to report being smokers.

SMOKING					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
Do You Currently, Or Have You Been in The Past Year, A Smoker?	44 (14.10%)	25 (12.02%)	4 (6.78%)	30 (20.98%)	14 (8.43%)
During The Past Year, Has A Health Professional Talked To You About Your Smoking?	13 (27.66%)	5 (19.23%)	2 (66.67%)	10 (34.48%)	3 (17.65%)

Alcohol Consumption. The majority of people in the sample (62.75%) report that the highest number of alcoholic beverages they have consumed in a 24-hour period is between 1 and 2 drinks. This is similar to results for the whole sample when asked, on a typical day when drinking alcohol, how many beverages did you consume? This shows that 54.17 percent of people consume between 1-2 alcoholic beverages. About 17 percent of people report that they consume 3-4 alcoholic drinks on a typical day where they would be consuming alcohol, and about 19 percent of people report consuming somewhere between 5 and 11 alcoholic beverages. This leaves only 9 percent of people who report drinking over 11 alcoholic beverages in a normal day where they drink alcohol. Men reported higher amounts of beverages consumed on these days than did women.

IN THE PAST YEAR, HOW OFTEN DO YOU HAVE AN ALCOHOLIC DRINK?					
	Lexington sample N(%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
<i>Every Day</i>	12 (3.38%)	3 (1.44%)	9 (15.79%)	10 (7.04%)	2 (1.2%)
<i>5-6 times a week</i>	12 (3.38%)	4 (1.91%)	7 (12.28%)	9 (6.34%)	3 (1.81%)
<i>3-4 times a week</i>	9 (2.88%)	7 (3.35%)	1 (1.75%)	9 (6.34%)	0
<i>2 times a week</i>	9 (2.88%)	6 (2.87%)	0	2 (1.41%)	7 (4.19%)
<i>Once a week</i>	20 (6.39%)	17(8.13%)	0	11 (7.75%)	8 (4.79%)
<i>2-3 times a month</i>	17 (5.43%)	17(8.13%)	0	8 (5.63%)	9 (5.39%)
<i>Once a month</i>	20 (6.39%)	17(8.13%)	0	7 (4.93%)	13 (7.78%)
<i>3-11 times a year</i>	13 (4.15%)	12 (5.74%)	0	4 (2.82%)	9 (5.39%)
<i>1-2 times a year</i>	32 (10.22%)	28 (13.4%)	1 (1.75%)	7 (4.93%)	25 (14.97%)
<i>No alcohol this year, but in the past</i>	56 (16.93%)	39 (18.66%)	0	19 (13.38%)	34 (20.34%)
<i>No alcohol ever</i>	116 (37.06%)	59 28.33%)	39 (68.42%)	56 (39.44%)	57 (34.13%)
Total	313	209	57	142	167

DURING YOUR LIFETIME, WHAT IS THE MAXIMUM AMOUNT OF ALCOHOLIC DRINKS YOU HAVE CONSUMED IN A 24-HOUR PERIOD?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
36 or more	3 (5.88%)	1 (2.78%)	0	3 (15.79%)	0
24-35	0	0	0	0	0
18-23	2 (3.92%)	0	0	1 (5.26%)	1 (3.13%)
12-17	0	0	0	0	0
8-11	2 (3.92%)	2 (5.56%)	0	2 (10.53%)	0
5-7	6 (11.76%)	4 (11.11%)	0	2 (10.53%)	4 (12.40%)
4	3 (5.88%)	3 (8.33%)	0	0	3 (9.38%)
3	3 (5.88%)	2 (5.56%)	0	1 (5.26%)	2 (6.25%)
2	12 (23.53%)	10 (27.78%)	0	3 (15.79%)	9 (28.13%)
1	20 (39.22%)	14 (38.89%)	2 (100%)	7 (36.84%)	13 (40.63%)
Total	51	36	2	19	32

IN THE PAST YEAR, HOW MANY ALCOHOLIC DRINKS DID YOU HAVE ON A TYPICAL DAY WHEN YOU DRANK ALCOHOL?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
25 or more	5 (3.47%)	0	5 (26.32%)	5 (7.46%)	0
19-24	3 (2.08%)	1 (0.90%)	2 (10.53%)	3 (4.48%)	0
16-18	1 (0.69%)	0	1 (5.26%)	1 (1.49%)	0
12-15	4 (2.78%)	4 (3.60%)	0	2 (2.99%)	2 (2.63%)
9-11	3 (2.08%)	3 (2.70%)	0	3 (4.48%)	0
7-8	11 (7.64%)	11 (9.91%)	0	8 (11.94%)	3 (3.95%)
5-6	14 (9.72%)	12 (10.80%)	2 (10.53%)	10 (14.93%)	4 (5.26%)
3-4	25 (17.36%)	22 (19.82%)	0	6 (8.96%)	19 (25%)
2	29 (20.14%)	24 (21.62%)	0	11 (16.42%)	17 (22.37%)
1	49 (34.03%)	34 (30.63%)	9 (47.37%)	18 (26.87%)	31 (40.79%)
Total	144	111	19	67	76

We also measured binge drinking behaviors, which is defined as consuming 5 or more (for men) or 4 or more (for women) alcoholic beverages within a two-hour period. About half of the sample reported that they have never consumed that many alcoholic beverages, or only done so one to two times in the past year. Hispanic people were less likely to have occasions of binge drinking behaviors than non-Hispanic participants. Somali people, on the other hand, reported more days in which they binge

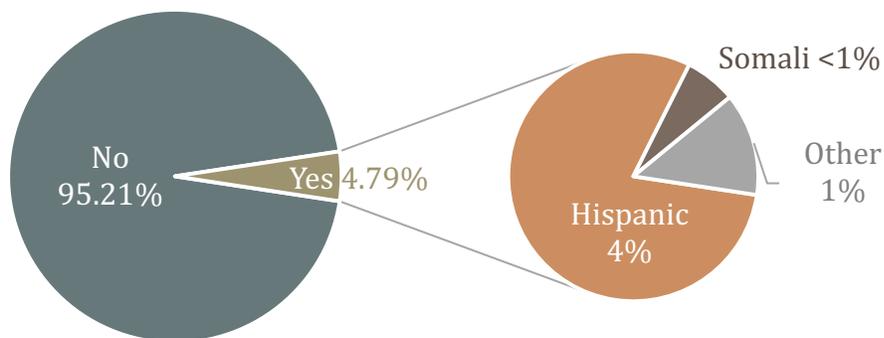
drank than non-Somali people. Men were also more likely to engage in binge drinking than women in the sample.

DURING THE PAST YEAR, HOW OFTEN DID YOU HAVE 5 OR MORE (MALES) OR 4 OR MORE (FEMALES) DRINKS CONTAINING ANY KIND OF ALCOHOL WITHIN A TWO HOUR PERIOD?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
Every Day	11 (7.53%)	1 (0.89%)	10 (52.63%)	11 (16.67%)	0
5-6 Days A Week	3 (2.05%)	1 (0.89%)	2 (10.53%)	3 (4.55%)	0
3-4 Days A Week	7 (4.79%)	6 (5.36%)	1 (5.26%)	7 (10.61%)	0
2 Days A Week	3 (2.05%)	1 (0.89%)	0	1 (1.52%)	2 (2.53%)
1 Day A Week	12 (8.22%)	10 (8.93%)	0	7 (10.61%)	5 (6.33%)
2-3 Days A Month	7 (4.79%)	6 (5.36%)	0	4 (6.06%)	3 (3.80%)
1 Day A Month	12 (8.22%)	12 (10.71%)	0	4 (6.06%)	7 (8.86%)
3-11 Days A Year	13 (8.90%)	11 (9.82%)	0	5 (7.58%)	8 (10.13%)
1-2 Days In The Past Year	42 (28.77%)	37 (33.04%)	2 (10.53%)	13 (19.70%)	29 (36.71%)
Never	36 (24.66%)	27 (24.11%)	4 (21.05%)	11 (16.67%)	25 (31.65%)
Total	146	112	19	66	79

Child with Low Birth Weight. Only about 5% of the sample reported having ever had a child identified as low birth weight. About 75% of those who said yes are Hispanic.

Prescribed Medication in Last 12 Months. About 38% of respondents reported that they have had medication prescribed to them by a doctor in the last 12 months, and 74 percent of those people identify as Hispanic. There were no Somali people in the sample who reported being prescribed medication in the last year. Of those who have been prescribed medication in the last year, 27.35 percent are male, and 72.65 are female. This means that women in the sample are significantly more likely to have been prescribed medication by a doctor in the last 12 months than were men.

"Have you ever had a baby that was identified as low birth weight?"



Pain within last 6 Months. Approximately 65.27 percent of people who answered the question *"In the past 6 months, how often did you have pain?"* reported having some sort of pain. The majority, however (77% of people who report having pain) only feel pain on some days, rather than most or every day. About half of people in the sample claim that their pain does not ever limit their ability to carry out work or life activities, which leaves half of the sample suffering from pain that limits their functioning in some capacity. Hispanic people who responded report lower levels of pain than non-Hispanic people do, but do not show major differences from non-Hispanic respondents when it comes to pain limiting their lives. Somali people, on the other hand, were more likely to report more days in which their pain limits them in their daily activities.

HOW OFTEN HAVE YOU HAD PAIN IN THE LAST 6 MONTHS?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
Never	108 (34.73%)	81 (38.76%)	15 (26.79%)	50 (35.71%)	57 (34.13%)
Some days	157 (50.48%)	103 (49.28%)	34 (60.71%)	69 (49.29%)	86 (51.50%)
Most days	26 (8.36%)	16 (7.66%)	4 (7.14%)	11 (7.86%)	15 (8.38%)
Every day	20 (6.43%)	9 (4.31%)	3 (5.36%)	10 (7.14%)	10 (5.99%)
Total	311	209	56	140	167

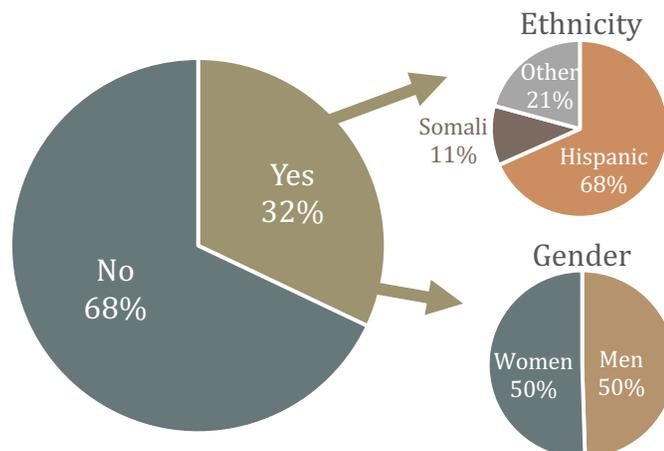
HOW OFTEN DID YOUR PAIN LIMIT YOUR LIFE OR WORK ACTIVITIES IN THE LAST 6 MONTHS?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
Never	165 (53.05%)	117 (56.80%)	22 (37.93%)	73 (50.69%)	91 (55.83%)
Some days	118 (37.94%)	75 (36.41%)	28 (48.28%)	56 (38.89%)	60 (36.81%)
Most days	17 (5.47%)	10 (4.85%)	6 (10.34%)	10 (6.94%)	6 (3.68%)
Every day	11 (3.54%)	4 (1.94%)	2 (3.45%)	5 (3.47%)	6 (3.68%)
Total	311	206	58	144	163

OCCUPATIONAL HEALTH

During the interview, we asked questions about occupational health. We asked questions regarding training and injury on the job, as well as days missed to injury and/or illness.

Injured on the Job. About 32 percent of participants report that they have been injured on the job. Of those who have been injured on the job, half are men and half are women, 68 percent are Hispanic, 11 percent are Somali, and 21 percent identify as some other ethnic group. The majority of these injuries happened within the last 5 years (73.79%) and took place in Lexington (79.61%). However, less than half of participants that were injured on the job filed a worker’s compensation report (48%). There are no significant differences between genders when it comes to the rates of workplace injuries, timing or place of the injuries, or likelihood of having filed a worker’s compensation report. Somali people were less likely to report being injured on the job compared to non-Somali people.

"Have you ever been injured on the job?"



OVERVIEW OF WORKPLACE INJURIES						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
HAVE YOU EVER BEEN INJURED ON THE JOB?						
Yes	101 (32.06%)	69 (33.01%)	11 (18.97%)		50 (34.97%)	51 (30.36%)
No	214 (67.94%)	140 (66.99%)	47 (81.03%)		93 (65.03%)	117 (69.64%)
WAS THE INJURY IN THE PAST 5 YEARS?						
Yes	76 (73.79%)	52 (74.29%)	9 (75%)		39 (76.47%)	37 (71.15%)
No	27 (26.21%)	18 (25.71%)	3 (25%)		12 (23.53%)	15 (28.85%)
DID THIS INJURY HAPPEN IN LEXINGTON?						
Yes	82 (79.61%)	55 (78.57%)	8 (66.67%)		37 (72.55%)	45 (86.54%)
No	21 (20.39%)	15 (21.43%)	4 (33.33%)		14 (27.45%)	7 (13.46%)
DID YOU COMPLETE A WORKER'S COMPENSATION REPORT? (Q119)						
Yes	48 (48%)	34 (50%)	7 (63.64%)		27 (55.10%)	21 (41.18%)
No	52 (52%)	34 (50%)	4 (36.36%)		22 (44.90%)	30 (58.82%)

Reporting. A large proportion of people (85%) who have been injured on the job say that they reported the injury to their employer, and two-thirds reported that they were unafraid of telling their employer of the injury (32.18%). Many people who answered the question of whether they feared losing their job as a result of reporting their injury said they were, in fact, afraid of losing their job (70.37%). Hispanic people were more likely to report having this fear than non-Hispanic people in the sample, while Somali people, compared to non-Somali people were less likely to report fear. Somali people showed lower rates of reporting their injuries to their employers, and reported feeling more afraid to tell their employers about the injuries than their non-Somali counterparts.

REPORTING OF WORKPLACE INJURIES						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
DID YOU REPORT THE INJURY TO YOUR EMPLOYER?						
Yes	85 (85%)	60 (85.71%)	7 (63.64%)		39 (78%)	46 (92%)
No	15 (15%)	10 (14.29%)	4 (36.36%)		22 (22%)	4 (8%)
WERE YOU AFRAID TO TELL YOUR EMPLOYER?						
Yes	28 (32.18%)	17 (28.33%)	5 (71.43%)		9 (23.08%)	19 (39.58%)
No	59 (67.82%)	43 (71.67%)	2 (28.57%)		30 (76.92%)	29 (60.42%)
DID YOU FEAR LOSING YOUR JOB IF YOU REPORTED THE INJURY?						
Yes	19 (70.37%)	15 (88.24%)	2 (33.33%)		6 (60%)	13 (76.47%)
No	8 (29.63%)	2 (11.76%)	4 (66.67%)		4 (40%)	4 (23.53%)

Medical Coverage. Almost two-thirds (71.57%) of respondents who have been hurt on the job says that they sought out medical attention for their injuries. Costs for these injuries were largely paid either in full by the employer (39.73%) or in full by the employee (26.39%), with anywhere from 35.62 percent and 40.28 percent of participants reporting that they shared the cost of the injury with their employer. There were no significant differences in seeking medical care or shared payment of care for workplace injuries between men and women or across ethnic groups.

MEDICAL COVERAGE OF WORKPLACE INJURIES						
	Whole Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
DID YOU SEEK MEDICAL ATTENTION FOR YOUR WORKPLACE INJURY?						
Yes	73 (71.57%)	48 (68.57%)	7 (63.64%)		36 (72%)	37 (71.15%)
No	29 (28.43%)	22 (31.43%)	4 (36.36%)		14 (28%)	15 (28.85%)
WHAT PERCENTAGE OF THE MEDICAL COSTS DID YOUR EMPLOYER OR THE INSURANCE PAY?						
0%	18 (24.66%)	8 (17.02%)	4 (50%)		10 (27.03%)	8 (22.22%)
1%-25%	3 (4.11%)	2 (4.26%)	1 (12.50%)		3 (8.11%)	0
26%-50%	9 (12.33%)	5 (10.64%)	1 (12.50%)		3 (8.11%)	6 (16.67%)
51%-75%	2 (2.74%)	1 (2.13%)	0		1 (2.70%)	1 (2.78%)
76%-99%	12 (16.44%)	9 (19.15%)	0		9 (24.32%)	3 (8.33%)
100%	29 (39.73%)	22 (46.81%)	2 (25%)		11 (29.73%)	18 (50%)
WHAT PERCENTAGE OF THE MEDICAL COSTS DID YOU PAY?						
0%	24 (33.33%)	17 (36.96%)	1 (12.50%)		9 (25%)	15 (41.67%)
1%-25%	12 (16.67%)	6 (13.04%)	2 (25%)		9 (25%)	3 (8.33%)
26%-50%	8 (11.11%)	5 (10.87%)	2 (25%)		4 (11.11%)	4 (11.11%)
51%-75%	5 (6.94%)	2 (4.35%)	1 (12.50%)		4 (11.11%)	1 (2.78%)
76%-99%	4 (5.56%)	1 (2.17%)	0		1 (2.78%)	3 (8.33%)
100%	19 (26.39%)	15 (32.62%)	2 (25%)		9 (25%)	10 (27.78%)

Education and Support. Less than half (41.41%) of participant who have been injured on the job feel that their employer was fully supportive of their injury, followed by 35.35 percent who felt somewhat supported, and 23.23 percent who did not feel supported. Similarly, less than half of respondents who have experienced workplace injuries were adequately educated about their injury by a medical professional or their employer.

EDUCATION ABOUT AND SUPPORT OF WORKPLACE INJURIES						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
DO YOU BELIEVE THE EMPLOYER WAS SUPPORTIVE OF YOUR INJURY?						
Yes	41 (41.41%)	31 (46.27%)	3 (25%)		20 (40.82%)	21 (42%)
Somewhat	35 (35.35%)	24 (35.82%)	5 (41.67%)		15 (30.61%)	20 (40%)
No	23 (23.23%)	12 (17.91%)	4 (33.33%)		14 (28.57%)	9 (18%)
DID YOUR EMPLOYER OR MEDICAL PROFESSIONAL EDUCATE YOU ABOUT YOUR INJURY?						
Yes	44 (43.14%)	33 (47.83%)	2 (16.67%)		20 (40%)	24 (46.15%)
Somewhat	19 (19.59%)	19 (27.54%)	4 (33.33%)		15 (30%)	13 (25%)
No	25 (25.77%)	17 (24.64%)	6 (50%)		15 (30%)	15 (28.85%)

Missed work. On average, participants who have been injured on the job and had to miss work as a result missed about 35 days of work. This amount of missed work was compensated for only 37.29 percent of people who had to take time off. While there were not significant group differences in number of days missed, there were differences when it came to compensation for missed work days. Namely, Hispanic participants reported more coverage of lost wages than non-Hispanic participants did.

MISSED WORK DUE TO WORKPLACE INJURIES (Q 125)						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
DID YOU MISS ANY WORK DUE TO ANY INJURIES? (Q125)						
Yes	72 (74.23%)	46 (69.7%)	6 (50%)		42 (85.71%)	30 (62.5%)
No	25 (25.77%)	20 (30.3%)	6 (50%)		7 (14.29%)	18 (37.5%)
HOW MUCH WORK DID YOU MISS DUE TO THE WORKPLACE INJURY? (Q126)						
Average days	35.34 days	31.78 days	10 days		31.27 days	39.71 days

DID YOU RECEIVE WAGES FOR THE MISSED WORK? (Q127)					
Yes	22 (37.29%)	19 (50%)	6 (100%)	11 (34.38%)	11 (40.74%)
No	37 (62.71%)	19 (50%)	0	21 (65.63%)	16 (59.26%)

Job Retention. Of those who were injured on the job, 67.33 percent retained employment at the same place where they were injured, and 88.24 percent kept their same job. Sixty percent of participants reported that they were moved into a different position following their injuries. There were major differences across ethnic groups and gender when asked if a respondent kept their same job with the same employers following their injuries. Hispanic people were more likely than non-Hispanics in the sample to report retaining a job with the same employer they were under when the injury took place. Women were also more likely than men to keep a job under the same employer than men were. Somali people, however, were significantly less likely to report retaining a job with the same employer following their injury compared to non-Somali people.

JOB RETENTION AFTER WORKPLACE INJURIES						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
DID YOU RETAIN EMPLOYMENT WITH THE SAME EMPLOYERS WERE YOU WERE INJURED?						
Yes	68 (67.33%)	51 (75%)	2 (16.67%)		29 (58%)	39 (76.47%)
No	33 (32.67%)	17 (25%)	10 (83.33%)		21 (42%)	12 (23.53%)
DID YOU KEEP YOUR SAME JOB?						
Yes	60 (88.24%)	45 (88.24%)	1 (50%)		26 (89.66%)	34 (87.18%)
No	8 (11.76%)	6 (11.76%)	1 (50%)		3 (10.34%)	5 (12.82%)
DID YOUR EMPLOYER MOVE YOU INTO ANOTHER POSITION?						
Yes	6 (60%)	5 (62.50%)	1 (100%)		3 (75%)	3 (50%)
No	4 (40%)	3 (37.50%)	0		1 (25%)	3 (50%)

Pain. About half (52.48%) of people still suffer pain from their workplace injuries, and 80.77 percent of people who still experience pain say working increases it. Those who experience pain from their injuries report suffering from pain an average of 16.24 days out of the month, and 4.06 days a week. Women were significantly more likely than men in the sample to report suffering from pain as a result of their workplace injuries.

PAIN DUE TO WORKPLACE INJURIES						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
DO YOU SUFFER PAIN FROM YOUR WORKPLACE INJURY?						
Yes	53 (52.48%)	34 (49.28%)	4 (33.33%)		19 (38%)	34 (66.67%)
No	10 (47.52%)	35 (50.72%)	8 (66.67%)		31 (62%)	17 (33.33%)
HOW MANY DAYS DO YOU SUFFER FROM PAIN A MONTH?						
Average Days	16.24 days	15.12 days	16.33 days		16.16 days	16.29 days
HOW MANY DAYS DO YOU SUFFER FROM PAIN A WEEK?						
Average Days	4.06 days	3.85 days	3 days		4.06 days	4.06 days
HOW MANY HOURS DO YOU SUFFER FROM PAIN A DAY?						
Average Days	9.47 hours	9.21 hours	5 hours		8.78 hours	10.13 hours
DOES WORKING INCREASE YOUR PAIN?						
Yes	42 (80.77%)	27 (81.82%)	4 (100%)		16 (84.21%)	26 (78.79%)
No	10 (19.23%)	6 (18.18%)	0		3 (15.79%)	7 (21.21%)

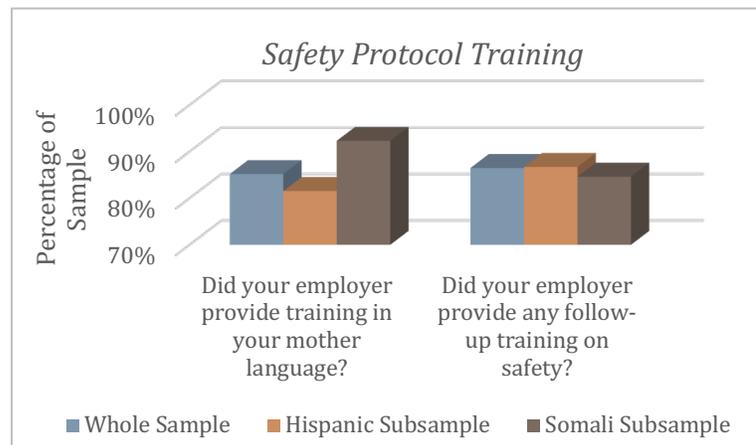
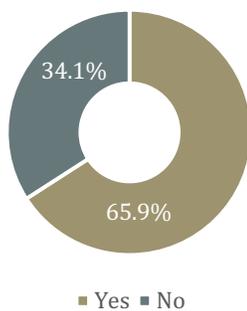
Worked Days Missed due to Injury/Illness. About 35 percent of people report that they have missed work days due to an injury or illness in the past year. A large proportion of the people (86/110) who have missed work for this reason report missing a week of work or less. Time taken off of work due to injuries or illnesses did not vary significantly by gender or ethnic identity.

DURING THE PAST 12 MONTHS, IN GENERAL, HOW SATISFIED ARE YOU WITH THE HEALTHCARE YOU HAVE RECEIVED?

	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
None	202 (64.74%)	137 (66.18%)	36 (62.07%)		93 (65.96%)	108 (64.67%)
1-3	65 (20.83%)	44 (21.26%)	114 (24.14%)		29 (20.57%)	33 (19.76%)
4-7	21 (6.73%)	14 (6.76%)	3 (5.17%)		10 (7.09%)	11 (6.59%)
8-14	8 (2.56%)	6 (2.90%)	1 (1.72%)		2 (1.42%)	6 (3.59%)
15-21	2 (0.64%)	2 (0.97%)	0		1 (0.71%)	1 (0.60%)
22-30	6 (1.92%)	1 (0.48%)	3 (5.17%)		3 (2.13%)	3 (1.80%)
31+	8 (2.56%)	3 (1.45%)	1 (1.72%)		3 (2.13%)	5 (2.99%)
Total	312	207	58		141	167

Safety Protocol Training We asked participants about their training in safety protocols at their jobs. 65.9% of the participants in the sample said that their employer did train them on safety protocols while 34.1% said they did not. 92.31% of Somali participants said that their employer provided training in their mother language compared to 81.53% for Hispanic participants. Overall, 85.17% of the entire sample reported having been provided training in their mother language. When asked if their employer provided any follow-up training on safety, 86.71% of the Hispanic subsample and 84.62% of the Somali subsample reported that they did. As a whole, 86.47% of the Lexington sample reported having been provided follow-up training by their employer.

"Did your employer train you about safety protocols?"



Employer-Provided Opportunities to Increase Physical Fitness. A little over half of the sample reports that their employer has provided opportunities for them to increase their physical fitness. While there were no significant differences in employer-provided fitness opportunities between men and women, results show that those respondents who identify themselves as Hispanic were more likely to report having opportunities for such improvement than non-Hispanic participants. Oppositely, Somali participants, compared to non-Somali people sampled were less likely to report that their employers had extended opportunities to them that would increase their physical fitness.

DOES YOUR EMPLOYER PROVIDE YOU AN OPPORTUNITY TO INCREASE YOUR PHYSICAL FITNESS?

	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)
Yes	172 (56.03%)	127 (62.87%)	16 (27.59%)
No	135 (43.97%)	75 (37.13%)	42 (72.41%)
Total	307	202	58

Employer- Provided Opportunities to Increase Physical Fitness. A little over half of the sample reports that their employer has provided opportunities for them to increase their physical fitness.

While there were no significant differences in employer-provided fitness opportunities between men and women, results show that those respondents who identify themselves as Hispanic were more likely to report having opportunities for such improvement than non-Hispanic participants. Oppositely, Somali participants, compared to non-Somali people sampled were less likely to report that their employers had extended opportunities to them that would increase their physical fitness.

DOES YOUR EMPLOYER PROVIDE YOU AN OPPORTUNITY TO INCREASE YOUR PHYSICAL FITNESS?			
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)
Yes	172 (56.03%)	127 (62.87%)	16 (27.59%)
No	135 (43.97%)	75 (37.13%)	42 (72.41%)
Total	307	202	58

MENTAL HEALTH

Psychological well-being represents a significant aspect of overall quality of life, therefore we included several measures of psychological well-being in the study. Participants were asked about their past month experiences with symptoms associated with major depression (i.e. depressive symptoms) and anxiety, as conceptualized within the clinical literature, along with its interference in their daily lives.

Happiness. Over 70% of the Lexington population who participated are happy or very happy while 1.2% are not happy at all. Somali participants are significantly less likely to report lower levels of happiness compared to participants who are not Somali.

HOW WOULD YOU RATE YOUR HAPPINESS?					
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)	Men N (%)	Women N (%)
Very Happy	105 (33.65%)	67 (32.21%)	24 (42.11%)	52 (37.14%)	53 (31.36%)
Happy	141 (45.19%)	92 (44.23%)	31 (54.39%)	65 (46.43%)	74 (43.79%)
Somewhat Happy	45 (14.42%)	33 (15.87%)	2 (3.51%)	14 (10.00%)	30 (17.75%)
A Little Happy	17 (5.45%)	15 (7.21%)	0	8 (5.71%)	9 (5.33%)
Not At All Happy	4 (1.28%)	1 (0.48%)	0	1 (0.71%)	3 (1.78%)
Total	312	211	57	140	169

Family's Happiness. The sample largely reports that their families are happy or very happy. There are very few people in the sample, across ethnic groups and gender, who report no or very little family happiness.

HOW WOULD YOU RATE YOUR FAMILY'S HAPPINESS?					
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)	Men N (%)	Women N (%)
Very Happy	118 (38.31%)	83 (40.10%)	20 (36.36%)	53 (38.13%)	65 (38.69%)
Happy	149 (48.38%)	96 (46.38%)	30 (54.55%)	64 (46.04%)	84 (50.00%)
Somewhat Happy	24 (7.79%)	15 (7.25%)	4 (7.27%)	14 (10.07%)	10 (5.95%)
A Little Happy	11 (3.57%)	10 (4.83%)	0	4 (2.88%)	7 (4.17%)
Not At All Happy	6 (1.95%)	3 (1.45%)	1 (1.82%)	4 (2.88%)	2 (1.19%)
Total	308	207	55	139	168

Happiness with Family. Family happiness is widespread across the sample. Most people (87.05%) report feeling happy or very happy with their families. This result is similar across genders and ethnic groups (N=312).

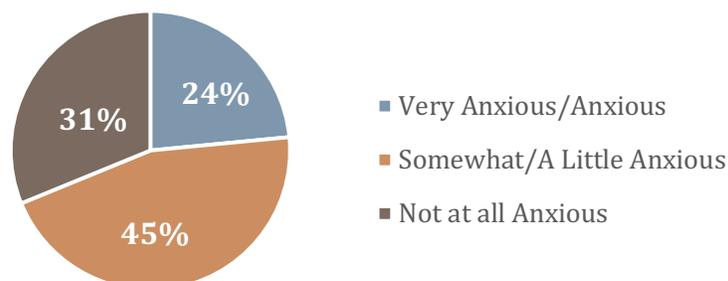
HOW WOULD YOU RATE YOUR HAPPINESS WITH YOUR FAMILY?					
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)	Men N (%)	Women N (%)
Very Happy	161 (52.10%)	116 (56.59%)	20 (35.09%)	67 (48.20%)	93 (55.69)
Happy	108 (34.95%)	59 (28.78%)	33 (57.89%)	52 (37.41%)	55 (32.93%)
Somewhat Happy	21 (6.80%)	17 (8.29%)	2 (3.51%)	9 (6.47%)	12 (7.19%)
A Little Happy	13 (4.21%)	11 (5.37%)	1 (1.75%)	7 (5.04%)	5 (2.99%)
Not At All Happy	6 (1.94%)	2 (0.98%)	1 (1.75%)	4 (2.88%)	2 (1.20%)
Total	309	205	57	139	167

Happiness with Job. Hispanic people are less likely to be “very happy” with their jobs, and more likely to report being “somewhat happy” than non-Hispanic participants. Somali participants are more likely to be “very happy” and “happy” with their jobs, and less likely to be “somewhat” or “a little” happy with their jobs than non-Somali participants. Women are more likely to report being less happy with their jobs compared to men.

HOW WOULD YOU RATE YOUR HAPPINESS WITH YOUR JOB?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
Very Happy	74 (23.72%)	41 (19.90%)	18 (32.14%)	41 (29.29%)	31 (18.34%)
Happy	145 (46.47%)	97 (47.09%)	33 (58.93%)	66 (47.14%)	78 (46.15%)
Somewhat Happy	54 (17.31%)	44 (21.36%)	2 (3.57%)	19 (13.57%)	35 (20.71%)
A Little Happy	28 (8.97%)	20 (9.71%)	1 (1.79%)	6 (4.29%)	22 (13.02%)
Not At All Happy	11 (3.53%)	4 (1.94%)	2 (3.57%)	8 (5.71%)	3 (1.78%)
Total	312	211	56	140	169

Current Anxiety. Overall, 68.8% of the sample reports experiencing some sort of current anxiety, even though few (10.29%) report being very anxious. While there are no significant differences in current anxiety between the Hispanic and non-Hispanic portions of the sample, Somali respondents were more likely to report lower anxiety levels. In other words, Somali people reported being less anxious than non-Somali people. There is no difference between men and women’s reports of current anxiety.

“How would you rate your current anxiety?”



HOW WOULD YOU RATE YOUR CURRENT ANXIETY?					
	Lexington Sample N (%)	Hispanic Population N (%)	Somali Population N (%)	Men N (%)	Women N (%)
Very Anxious	32 (10.29%)	18 (8.74%)	7 (12.50%)	16 (11.51%)	15 (8.88%)
Anxious	41 (13.18%)	24 (11.65%)	9 (16.07%)	20 (14.39%)	21 (12.43%)
Somewhat Anxious	55 (17.68%)	40 (19.42%)	3 (5.36%)*	21 (15.11%)	34 (20.12%)
A Little Anxious	86 (27.65%)	74 (35.92%)	4 (7.14%)*	30 (21.58%)	56 (33.14%)
Not At All Anxious	97 (31.19%)	50 (24.27%)	33 (58.93%)*	52 (37.41%)	43 (25.44%)
Total	311	206	56	139	169

Current Sadness. Almost half (47.12%) of the whole sample reports that they do not feel sad at all. Women are more likely than men to report higher levels of sadness, but Somali people are more likely than non-Somali people to report lower levels of sadness.

HOW WOULD YOU RATE YOUR CURRENT SADNESS?					
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)	Men N (%)	Women N (%)
Very Sad	11 (3.53%)	5 (2.39%)	3 (5.45%)	6 (4.29%)	5 (2.96%)
Sad	21 (6.73%)	10 (4.78%)	7 (12.73%)	8 (5.71%)	13 (7.69%)
Somewhat Sad	49 (15.71%)	38 (18.18%)	2 (3.64%)	18 (12.86%)	30 (17.75%)
A Little Sad	84 (26.92%)	69 (33.01%)	1 (1.82%)	25 (17.86%)	58 (34.32%)
Not At All Sad	147 (47.12%)	87 (41.63%)	42 (76.369%)	83 (59.29%)	63 (37.28%)
Total	312	209	55	140	169

Sadness. About 50 percent of respondents have felt so sad that nothing could cheer them up at least a little of the time in the last 30 days. Women report more time feeling this way than men in the sample do. While Hispanic people do not differ on sadness from non-Hispanic people in the sample, Somali people tend to report less sad time in the last month than to non-Somali respondents. In other words, the Somali subsample was not as sad as others.

IN THE PAST 30 DAYS HOW OFTEN DID YOU FEEL SO SAD THAT NOTHING COULD CHEER YOU UP?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
All of the time	15 (4.78%)	6 (2.90%)	7 (11.86%)	9 (6.34%)	6 (3.57%)
Most of the time	12 (3.82%)	7 (3.38%)	3 (5.08%)	8 (5.63%)	4 (2.38%)
Some of the time	40 (12.74%)	26 (12.56%)	2 (3.39%)	13 (9.15%)	26 (15.49%)
A little of the time	89 (28.34%)	74 (35.75%)	3 (5.08%)	23 (16.20%)	65 (38.69%)
None of the time	158 (50.32%)	94 (45.41%)	44 (74.58%)	89 (62.68%)	67 (39.88%)
Total	314	207	59	142	168

Nervousness. Almost half of the sample (45.83%) report that they did not feel nervous in the past 30 days, followed by 44.23 percent who felt nervous a little or some of the time. Less than 10 percent of people reported having felt nervous in the last month most or all of the time. These results vary significantly based on ethnic identity and age. For instance, Hispanic respondents were more likely to report higher levels of nervousness than non-Hispanic participants. Somali respondents, on the other hand, were less likely to report higher levels of nervousness. While nervousness didn't vary significantly by gender, results show that an increase in age is associated with a decrease in the level of nervousness one experienced in the last 30 days.

IN THE PAST 30 DAYS HOW OFTEN DID YOU FEEL NERVOUS?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
All of the time	11 (3.53%)	4 (1.92%)	4 (6.78%)	7 (4.96%)	3 (1.80%)
Most of the time	20 (6.41%)	11 (5.29%)	4 (6.78%)	9 (6.38%)	11 (6.59%)
Some of the time	38 (12.18%)	29 (13.94%)	3 (5.08%)	15 (10.64%)	22 (13.17%)
A little of the time	100 (32.05%)	85 (40.87%)	3 (5.08%)	35 (24.82%)	64 (38.32%)
None of the time	143 (45.83%)	79 (37.98%)	45 (76.27%)	75 (53.19%)	67 (40.12)
Total	312	208	59	141	167

Restlessness/Fidgeting. Half of the sample reports never being fidgety or restless, and just 8.28 reported feeling restless or fidgety most or all of the time. As far as restlessness and ethnic identity go, Hispanic people are more likely to be more fidgety and restless compared to non-Hispanic respondents, while Somali participants were less likely to report higher levels of restlessness than their non-Somali counterparts. Women in the sample were more likely to be restless than men in the sample, and levels of restlessness decreased with age.

IN THE PAST 30 DAYS HOW OFTEN DID YOU FEEL RESTLESS OR FIDGETY?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
All of the time	8 (2.55%)	2 (0.97%)	3 (5.08%)	6 (4.17%)	1 (0.60%)
Most of the time	18 (5.73%)	11 (5.31%)	1 (1.69%)	8 (5.56%)	10 (6.02%)
Some of the time	44 (14.01%)	34 (16.43%)	3 (5.08%)	17 (11.81%)	27 (16.27%)
A little of the time	84 (26.75%)	66 (31.88%)	6 (10.17%)	27 (18.75%)	56 (33.73%)
None of the time	160 (50.96%)	94 (45.41%)	46 (77.97%)	86 (59.72%)	72 (43.37%)
Total	314	207	59	144	166

Hopelessness. The majority of the people sampled in Lexington (57.37%) did not feel hopeless at all in the month leading up to the study. Thirty-five percent did, however, feel hopeless for at least some of the time. Twenty-three people (7.38%) in the sample reported that they felt hopeless most or all of the time, and sixteen of those people identify as Hispanic. Hispanic people were more likely to report more time spent feeling hopeless than non-Hispanic participants. Somali participants' answers followed the opposite trend, meaning that they more often reported less hopelessness in the last 30 days than non-Somali people who were sampled. Women in the sample were more likely than men to report higher levels of hopelessness.

IN THE PAST 30 DAYS HOW OFTEN DID YOU FEEL HOPELESS?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
All of the time	10 (3.21%)	7 (3.40%)	2 (3.45%)	5 (3.57%)	5 (2.98%)
Most of the time	13 (4.17%)	9 (4.37%)	0	5 (3.57%)	8 (4.76%)
Some of the time	32 (10.26%)	21 (10.19%)	4 (6.90%)	16 (11.43%)	15 (8.93%)
A little of the time	78 (25%)	62 (30.10%)	4 (6.90%)	21 (15.00%)	55 (32.74%)
None of the time	179 (57.37%)	107 (51.94%)	48 (82.76%)	93 (66.43%)	85 (50.60%)
Total	312	206	58	140	168

Effort. Overall, answers to this question did not vary significantly by gender or ethnic identity. However, people who are older reported less time spent feeling like everything was an effort.

IN THE PAST 30 DAYS HOW OFTEN DID YOU FEEL THAT EVERYTHING WAS AN EFFORT?

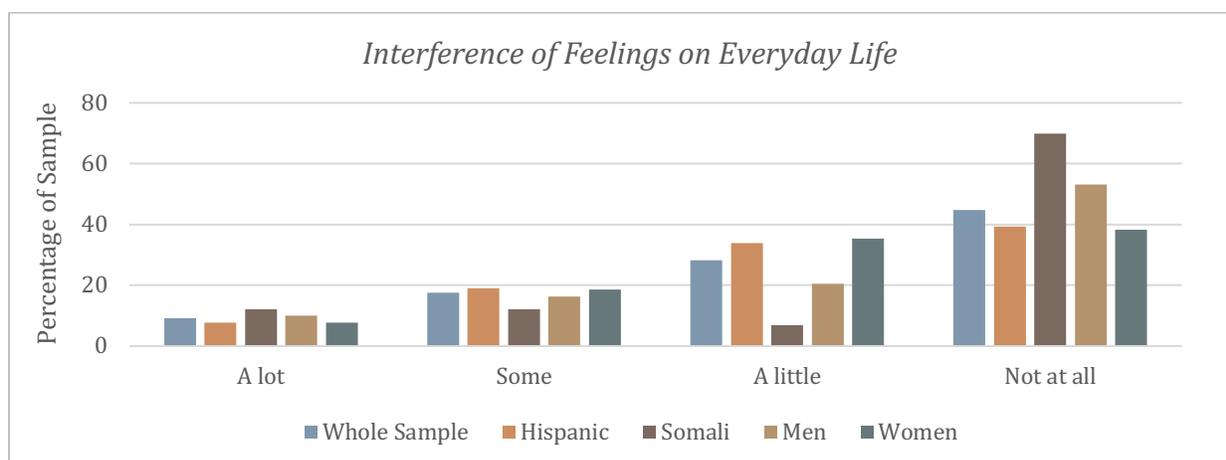
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
All of the time	34 (10.79%)	16 (7.73%)	15 (25.42%)	21 (14.89%)	13 (7.69%)
Most of the time	27 (8.57%)	15 (7.25%)	6 (10.17%)	13 (9.22%)	14 (8.28%)
Some of the time	50 (15.87%)	37 (17.87%)	2 (3.39%)	27 (19.15%)	23 (13.61%)
A little of the time	65 (20.63%)	53 (25.60%)	3 (5.08%)	21 (14.89%)	41 (24.26%)
None of the time	139 (44.13%)	86 (41.55%)	33 (55.93%)	59 (41.84%)	78 (46.15%)
Total	315	207	59	141	169

Worthlessness. Overall, answers to this question did not vary significantly by gender or ethnic identity. However, people who are older reported less time spent feeling worthless in the month leading up to the study.

IN THE PAST 30 DAYS HOW OFTEN DID YOU FEEL WORTHLESS?

	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
All of the time	12 (3.83%)	6 (2.90%)	3 (5.17%)	6 (4.20%)	6 (3.61%)
Most of the time	15 (4.79%)	8 (3.86%)	5 (8.62%)	10 (6.99%)	5 (3.01%)
Some of the time	21 (6.71%)	17 (8.21%)	1 (1.72%)	9 (6.29%)	12 (7.23%)
A little of the time	52 (16.61%)	35 (16.91%)	6 (10.34%)	16 (11.19%)	34 (20.48%)
None of the time	213 (68.05%)	141 (68.12%)	43 (74.14%)	102 (71.33%)	109 (65.66%)
Total	313	207	58	143	166

Interference of Feelings on Everyday Life. About half of the entire sample reported that their feelings don't interfere at all with their lives or activities, 46 percent say feelings interfere some or a little, and about nine percent said that their feelings interfere a lot of the time. The Hispanic people surveyed were more likely to answer that their feelings interfered at higher levels than were non-Hispanic people, and people who identified themselves as Somali were less likely to report higher levels of interference than non-Somali participants.



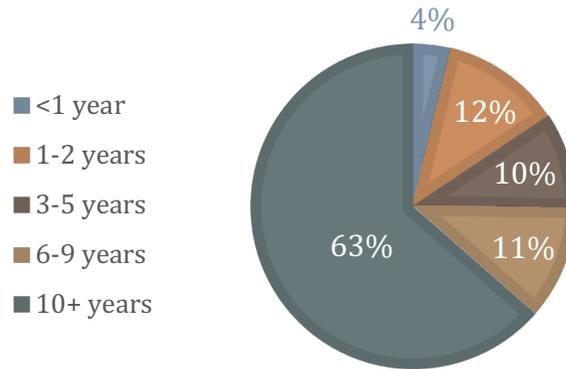
LIFE IN LEXINGTON

Experiences in and Around Lexington

Through the questionnaire, we asked questions regarding experiences in and around Lexington. Participants were asked about the amount of time they had spent in Lexington as well as their feelings towards Lexington. We also asked participants to report their experiences regarding discrimination and harassment in and around Lexington.

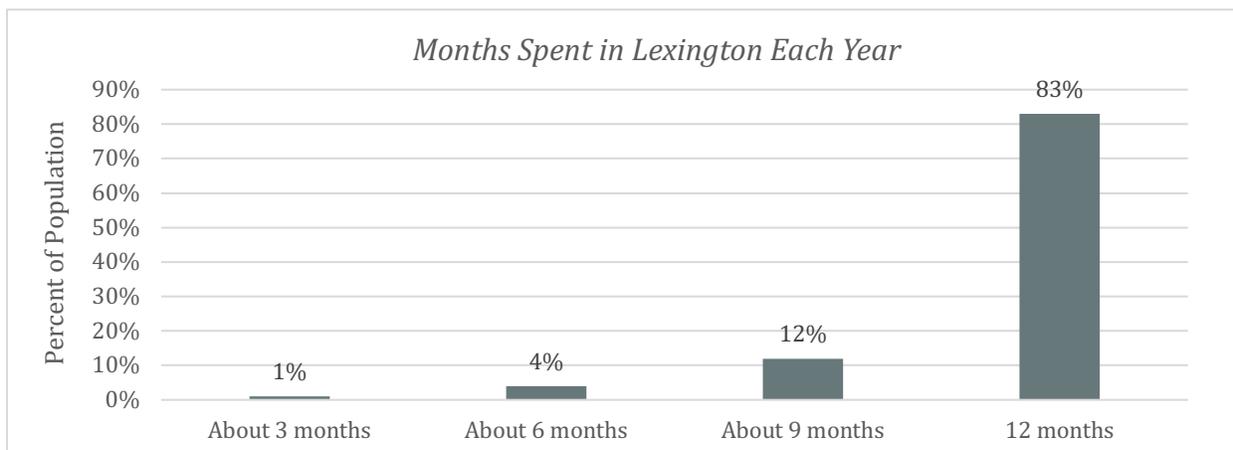
Years Lived in Lexington. Somali people have lived in Lexington for significantly fewer years than non-Somali Lexington residents. Conversely, Hispanic residents in the sample report living in Lexington for longer than non-Hispanic residents. Overall, a large part of the sample has lived in Lexington for several years.

Years lived in Lexington



YEARS LIVED IN LEXINGTON			
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)
Less Than One Year	12 (3.85%)	1 (0.48%)	10 (16.95%)
1-2 Years	37 (11.86%)	16 (7.69%)	6 (10.17%)
3-5 Years	30 (9.62%)	15 (7.21%)	9 (15.25%)
6-9 Years	35 (11.22%)	22 (10.58%)	7 (11.86%)
10 Or More Years	198 (63.46%)	154 (74.04%)	27 (45.76%)
Total	312	208	59

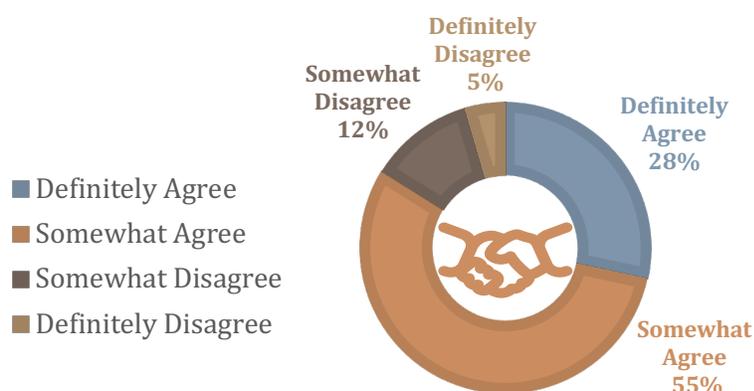
Months Spent in Lexington Each Year. Somali participants are more likely than non-Somali participants to report spending less time in Lexington throughout the year. Hispanic people, however, are more likely than non-Hispanic people to spend more months out of the year in Lexington. That being said, most respondents spend the entire year in Lexington (83.07%).



MONTHS SPENT IN LEXINGTON EACH YEAR			
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)
About 3 Months/ Not Much Of The Year	4 (1.28%)	2 (0.97%)	1 (1.69%)
About 6 Months/ About Half Of The Year	13 (4.15%)	4 (1.94%)	9 (15.25%)
About 9 Months/ Most Of The Year	36 (11.50%)	20 (9.71%)	11 (18.64%)
12 Months/ The Entire Year	260 (83.07%)	180 (87.38%)	38 (64.41%)
Total	313	206	59

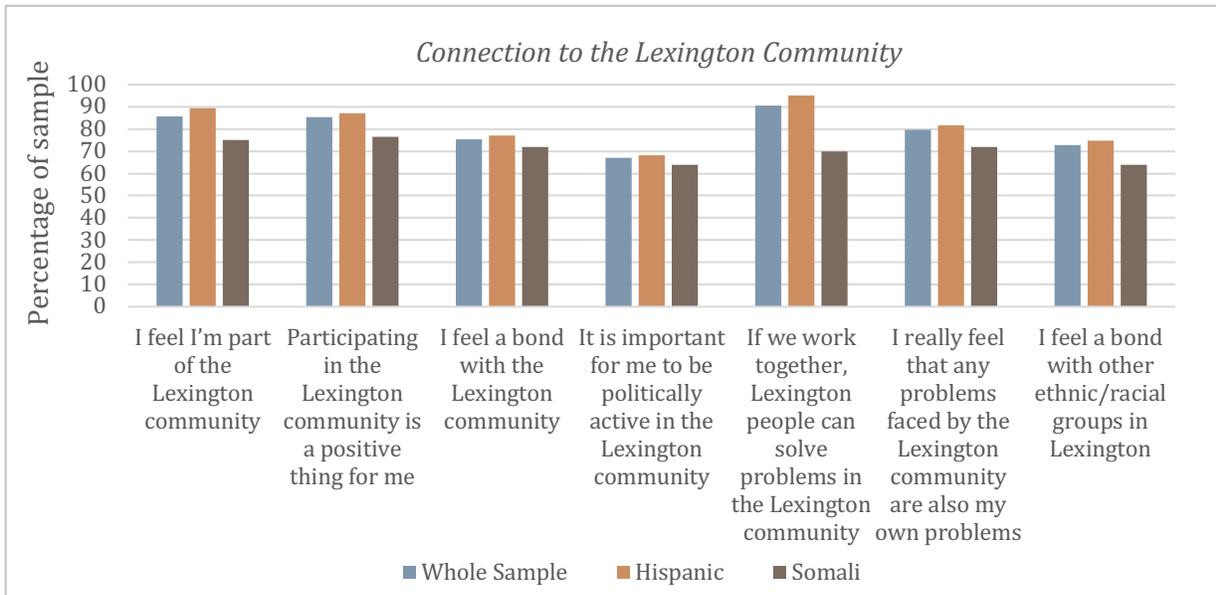
Trust in the People of Lexington. While most participants feel as though the people of Lexington can be trusted (83.87%), there is slight variability across ethnic groups with the extent to which they agree with the statement. Somali people, for instance, are more likely than non-Somali people to strongly agree, as opposed to “slightly agree,” that people of Lexington can be trusted. The opposite is true, however, for Hispanic people compared to non-Hispanics.

“Do you agree that the people of Lexington can be trusted?”

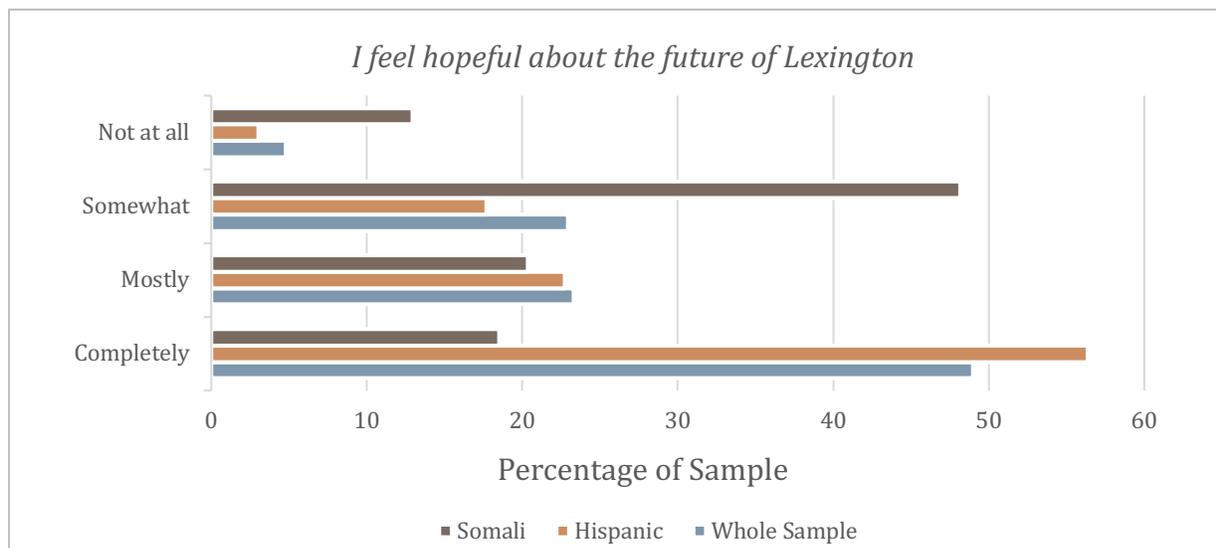


DO YOU AGREE THAT THE PEOPLE OF LEXINGTON CAN BE TRUSTED?			
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)
Definitely Agree	88 (28.39%)	49 (24.02%)	34 (58.62%)
Somewhat Agree	172 (55.48%)	121 (59.31%)	23 (39.66%)
Somewhat Disagree	36 (11.62%)	26 (12.75%)	0
Definitely Disagree	14 (4.52%)	8 (3.92%)	1 (1.72%)
Total	310	204	58

Connection to the Lexington Community. The majority of the participants feel connected to the community in the ways specified above. Hispanic participants feel, more so than non-Hispanic residents, that they are a part of the community and agree that if the community works together, Lexington residents’ problems can be solved. The opposite is reported for Somali participants. In other words, Somali participants disagreed with those statements more often than non-Somali people who were surveyed.



Feelings about Lexington. About half of the whole sample feels hopeful about the future of Lexington and expects to be a part of Lexington for a long time. Hispanic people were more likely to answer that they are hopeful and that they do expect to be a part of the community for a long time than not. Somali people, however, were significantly less likely to answer “completely” to those statements.



U.S. Refugees in Relation to Lexington Refugees. Somali participants were more likely than non-Somali participants to report that they do think what affects U.S. immigrants and refugees will affect their lives as well. Somali people felt similarly about the idea that what affects people of their same faith in the U.S. will also affect them. Hispanic people, however, do not differ in their feelings regarding U.S. refugee circumstances affecting their lives than the rest of the non-Hispanic sample. Hispanics do differ from the rest of the sample when it comes to feelings about the effects of religious group circumstances in the U.S. and were more likely to report that these circumstances would not affect their lives.

DO YOU THINK WHAT HAPPENS GENERALLY TO IMMIGRANTS OR REFUGEES IN THIS COUNTRY WILL HAVE SOMETHING TO DO WITH WHAT HAPPENS IN OUR LIFE? DO YOU THINK IT WILL AFFECT YOU...

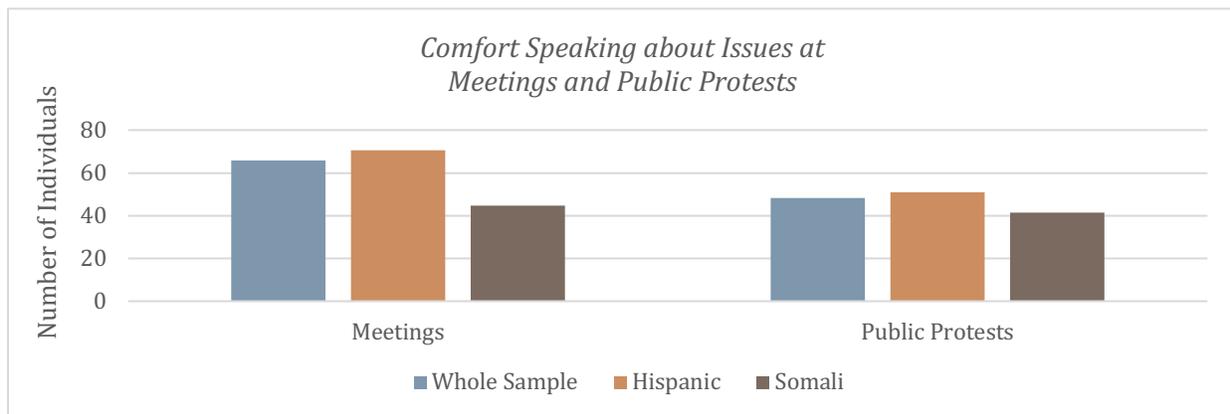
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)
A Lot	69 (21.97%)	42 (20.10%)	15 (25.86%)
Some	107 (34.08%)	71 (33.97%)	26 (44.83%)
A Little	65 (20.70%)	47 (22.49%)	8 (13.97%)
Not At All	73 (23.25%)	49 (23.44%)	9 (15.52%)
Total	314	209	58

U.S. Religious Groups in Relation to Lexington Religious Groups

DO YOU THINK WHAT HAPPENS GENERALLY TO PEOPLE FROM YOUR FAITH OR RELIGIOUS BACKGROUND IN THIS COUNTRY WILL HAVE SOMETHING TO DO WITH WHAT HAPPENS IN OUR LIFE? DO YOU THINK IT WILL AFFECT YOU...

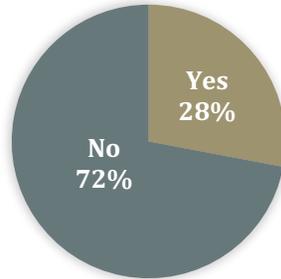
	Lexington Population N (%)	Hispanic Population N (%)	Somali Population N (%)
A Lot	62 (19.81%)	35 (16.75%)	19 (32.76%)
Some	86 (27.48%)	57 (27.27%)	18 (31.03%)
A Little	70 (22.36%)	51 (24.40%)	7 (12.07%)
Not At All	95 (30.35%)	66 (31.58%)	14 (24.14%)
Total	313	209	58

Comfort Speaking about Issues at Meetings & Public Protest. Overall, more people are comfortable talking about issues at meetings than they are at public protests. Hispanics were significantly more likely than non-Hispanic people to report that they are comfortable talking in meetings about issues, but there was no difference between these two groups when referring to talking about issues at protests. Somali people were also not much different in regards to their comfort speaking about issues at protests than their non-Somali counterparts. They are, however, significantly less likely to report feeling comfortable speaking about issues at meetings than non-Somali participants.

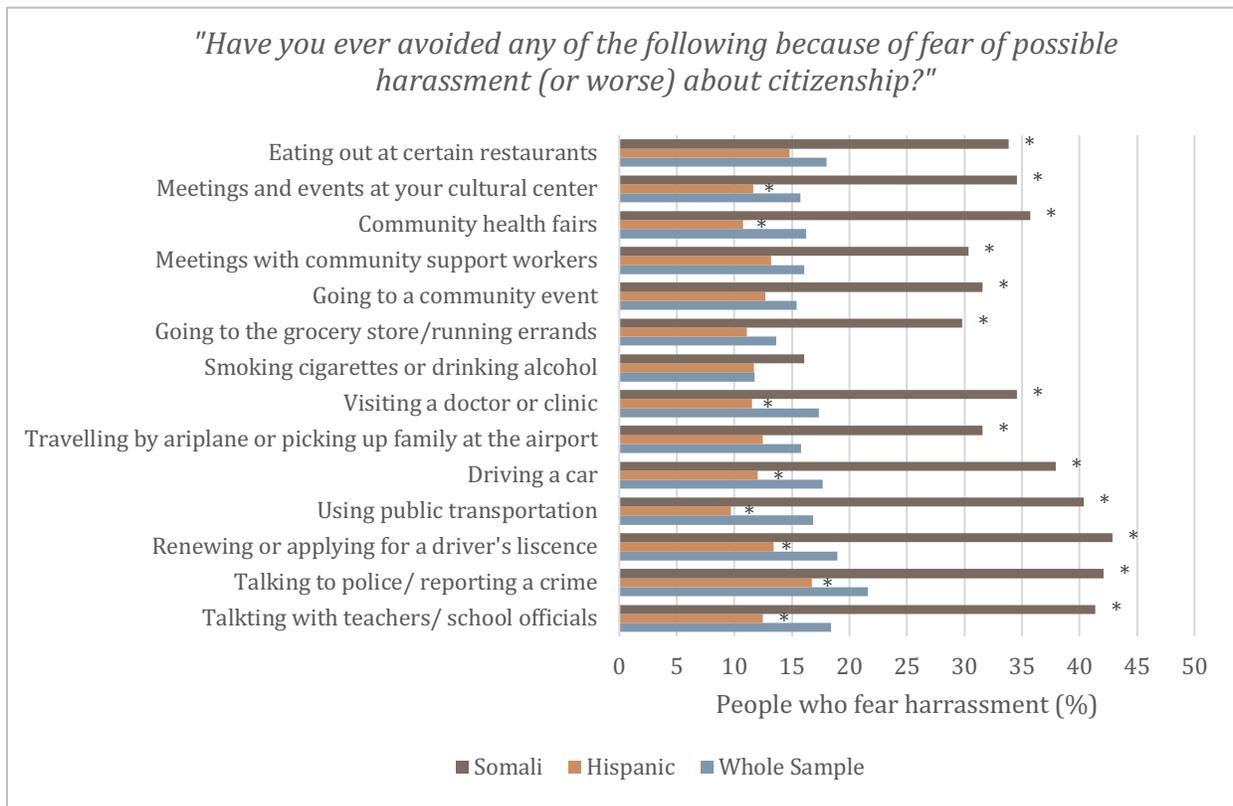


Perceived Discrimination. We asked participants if they had personally experienced discrimination or been treated unfairly because of race, ethnicity, or cultural background while living in Lexington. While 72.03% of participants answered “no” to this question, results were different across ethnic groups. Somali people, of which 86.44% reported not experiencing discrimination, were less likely to report that they had been treated unfairly due to race compared to non-Somali people. This result is the opposite for Hispanic people, who more often (31%) reported that they had experienced discrimination.

"Have you personally experienced discrimination or been treated unfairly because of your race, ethnicity, or cultural background while living in Lexington?"



"Have you ever avoided any of the following because of fear of possible harassment (or worse) about citizenship?"

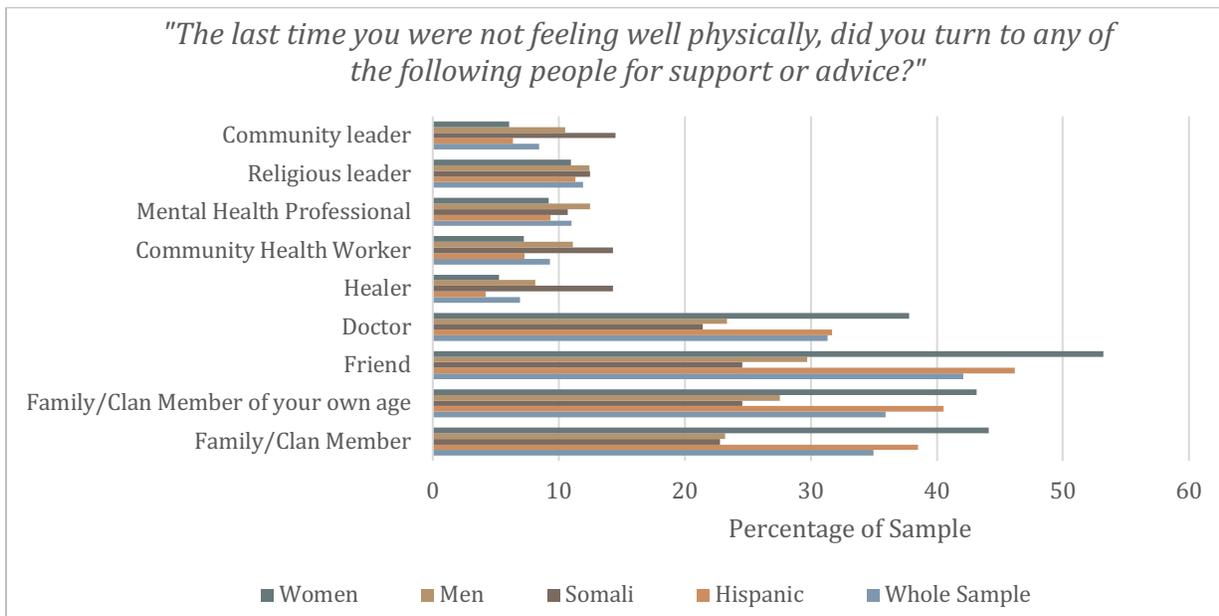


Avoidance of Activities for Fear of Harassment about Citizenship. The figure above illustrates the community's avoidance of certain activities for fear of harassment (or worse) about their citizenship. Overall, the community shows little fear of harassment when engaging in the activities listed above. However, when broken down into Hispanic and Somali subgroups, there is much light shed on how community members feel about getting harassed about their citizenship. Specifically, Hispanic people are generally less fearful of harassment than non-Hispanic people in the sample. Oppositely, Somali people are much more worried about harassment while performing daily life tasks than non-Somali people. Note that bars marked with an asterisk represent activities where Hispanic or Somali subgroups differed significantly from those who are not Hispanic or Somali, respectively.

HEALTHCARE

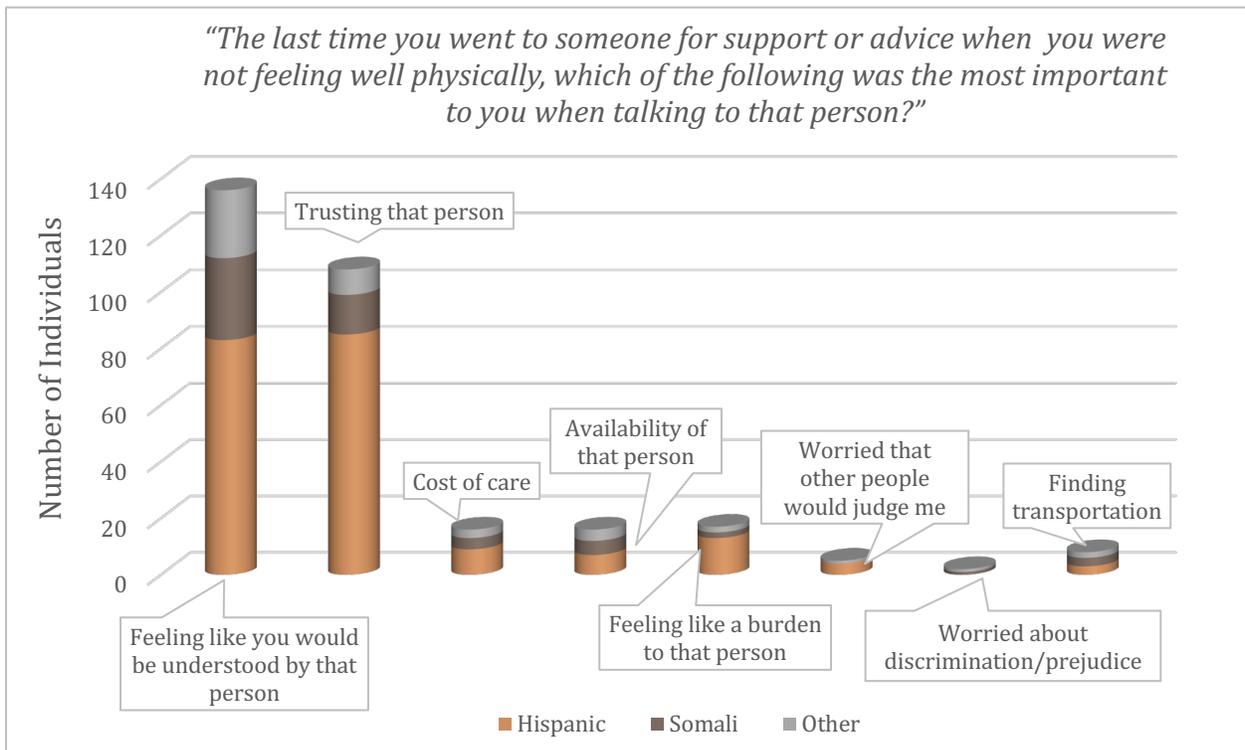
Communication. During the interview, participants were asked questions about turning to someone for support and advice when feeling physically unwell or having negative emotions. The information gathered also relayed if the participant was comfortable discussing physical and mental health with family members, community members and health professionals.

People gone to for Support/Advice when Feeling Physically Unwell. Higher percentages of the sample feel more comfortable talking with family members, clan members, friends, and doctors when they don't feel well physically. That being said, less than fifty percent of the participants who responded to this question said that they do feel comfortable talking to all people listed above. Women were more likely to be comfortable talking to family and clan members, friends, and doctors than men in the sample were. Somali people were more likely to turn to healers for advice than non-Somali people sampled, but were less likely to report going to family members, clan members, and friends than Non-Somali participants. Oppositely, Hispanic people were less likely to report going to a healer for advice than non-Hispanic people, and were more likely to report turning to family, clan members, and friends than those who identify as ethnicities other than Hispanic.

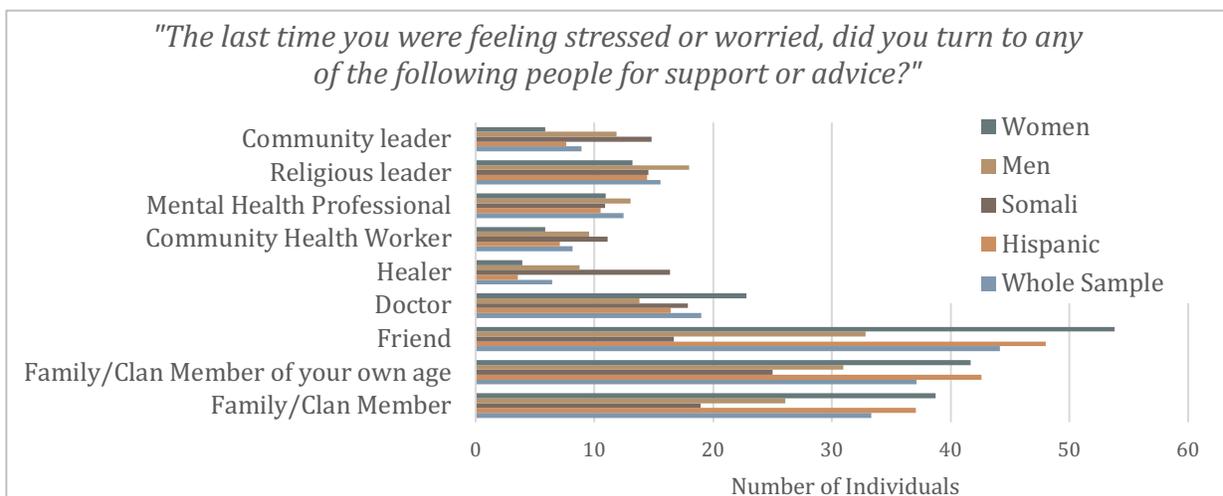


Important Things to Talk about when Feeling Physically Unwell. We asked people “The last time you went to someone for support or advice when you were not feeling well physically, which of the following was the most important to you when talking to that person?”

As you can see in the figure on the following page, the two most important things when getting support while feeling physically unwell are feeling like the person understands you and trusting that person. Hispanic people in the sample were more likely to report trust as the most important thing compared to feeling like they could be understood.

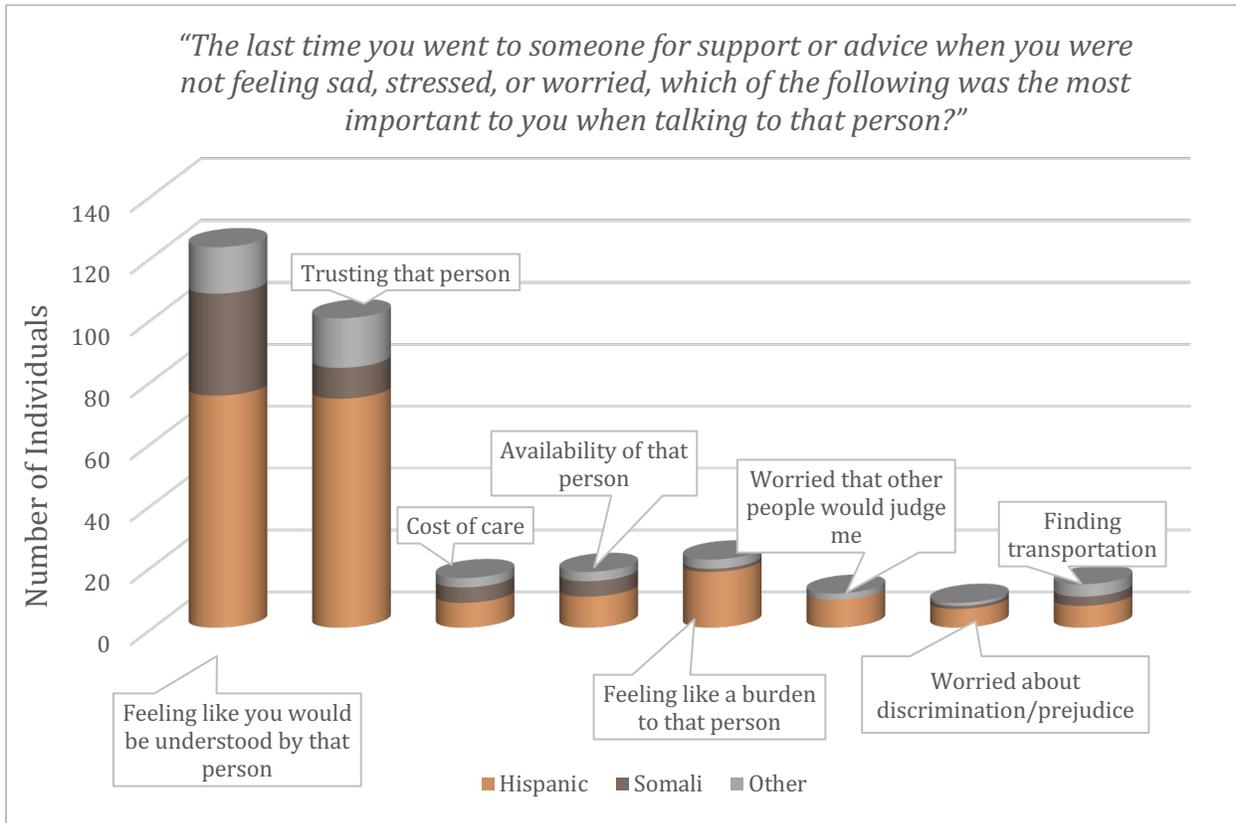


People Gone to for Support/Advice when Feeling Negative Emotions. When participants are feeling negative emotions, they tend to report being most comfortable talking about it with family and clan members as well as friends. As noted with seeking advice for dealing with physical ailments, there are differences between genders and ethnic groups when considering who to go to for advice. Somali participants, as seen previously, are more likely than non-Somali participants to seek advice from a healer, but less likely to seek advice from family, clan members, and friends. Oppositely, Hispanic fewer Hispanic respondents reported that they would see a healer when feeling worried or stressed than non-Hispanic participants. In turn, Hispanic participants were significantly more likely to report seeking advice from friends, family, and clan members than non-Hispanic people interviewed. Lastly, Women were more likely to feel comfortable talking with friends, family, and clan members about being worried or stressed than men in the sample were.

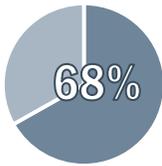


Important Things to Talk about when Feeling Negative Emotions. We asked people “The last time you went to someone for support or advice when you were not feeling sad, stressed, or worried, which of the following was the most important to you when talking to that person?”

As you can see in the figure on the next page, the two most important things when getting support while experiencing negative emotions are feeling like the person understands you and trusting that person. Hispanic people in the sample were more likely to report trust as the most important thing compared to feeling like they could be understood.



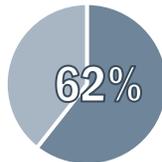
Worry about Paying Various Bills. Over two thirds of the sample are moderately or very worried about being able to pay medical costs for a serious illness or accident, and over half are worried about not having the money to pay for monthly bills, their children’s college tuition, credit card payments, or housing costs. Another financial worry among the sample is not being able to pay bills if a family member is detained by ICE, which fifty-two percent of people report worrying about. Somali participants are more worried about being able to pay credit card payments, housing costs, and for their children’s college tuition than non-Somali respondents. Somali people in the sample were also more likely to report being worried about financial burden in the event that a loved one is detained by ICE.



68% are worried about paying medical costs of a serious illness or accident



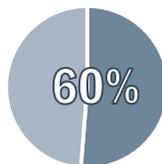
57% are worried about not having enough money to pay for their children's college



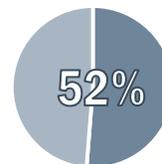
62% are worried about not having enough money to pay their normal monthly bills



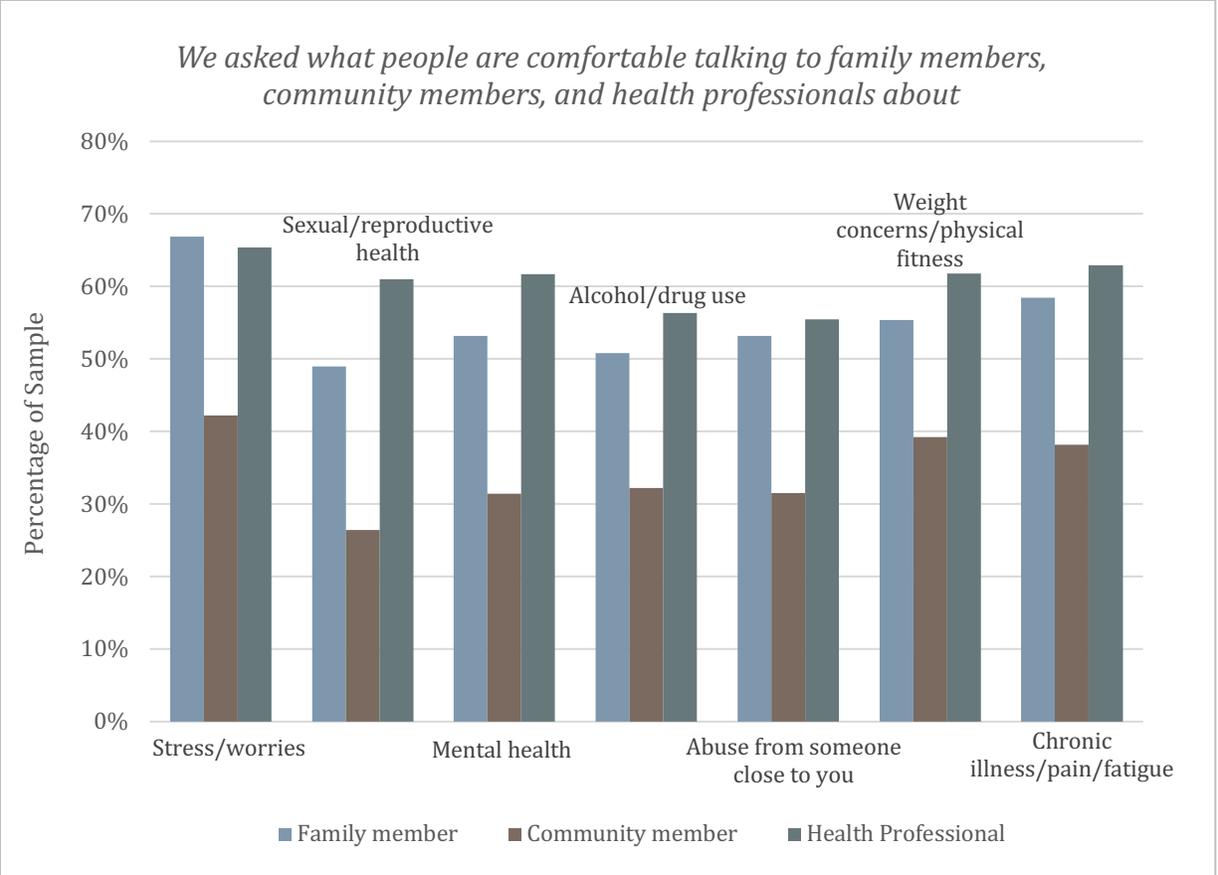
58% are worried about not being able to pay for rent. Mortgage, or other housing costs



60% of people who have credit cards are worried about not being able to pay the minimum amount on their accounts



52% are worried about not being able to pay bills and support their families if someone close to them is detained by ICE



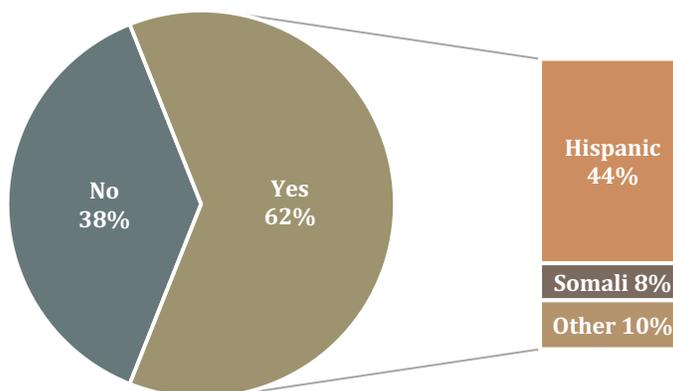
Healthcare. During the interview, information was collected from participants regarding healthcare and barriers to healthcare access. We gathered information regarding their previous 12-month experiences with change in health care provider, rejection from a provider or insurance company, or inability to afford medical care.

Most Important thing when visiting Healthcare Professional. The majority of the sample reported that the most important thing when visiting a health care professional is that the health care professional asks about their physical health. The next important thing for the sample is that the health care professional asks about stress and daily worries. Hispanic people were less likely to report that talking about personal relationships was important than the health care professional asking about physical health or stress. Similarly, the health professional being the same sex as the participant was more important than the health professional asking about personal relationships.



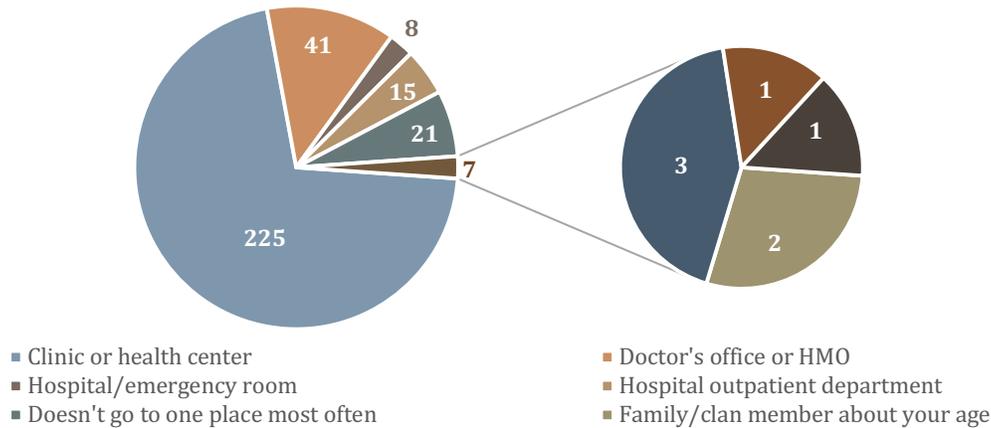
Health Insurance/Medicaid Coverage. As shown in the figure below, 62% of people in the sample had health insurance or Medicaid coverage at the time of the interview. The large majority of those who have health insurance coverage are Hispanic. In fact, Hispanic respondents were significantly more likely to report having coverage than non-Hispanic participants. Similarly, Women were more likely to report having coverage than men in the sample. Somali people, were more likely than their non-Somali counterparts be uninsured.

"Do you have health insurance or Medicaid coverage at this point in time?"



Where people Access Health Care. The majority of people in the sample report going to a clinic or health center for their health care. Hispanic people in the sample were more likely to report going to a clinic or health center than doctor's offices, compared to non-Hispanic people. The same goes for women compared to men. Somali people, though, were more likely than non-Somali participants to report using doctor's offices, HMOs, hospitals, or other places for healthcare instead of health centers or clinics.

"Which of the following do you usually go to for health care?"



Where People Go for Preventative/Routine Care. Clinics and health centers are also the most popular location for preventative care among participants. In fact, 68% of people reported that they go to clinics or health centers for preventative care. Thirteen percent of people say they do not get preventative care anywhere, and less than 4% report relying on some sort of hospital service for preventative care.

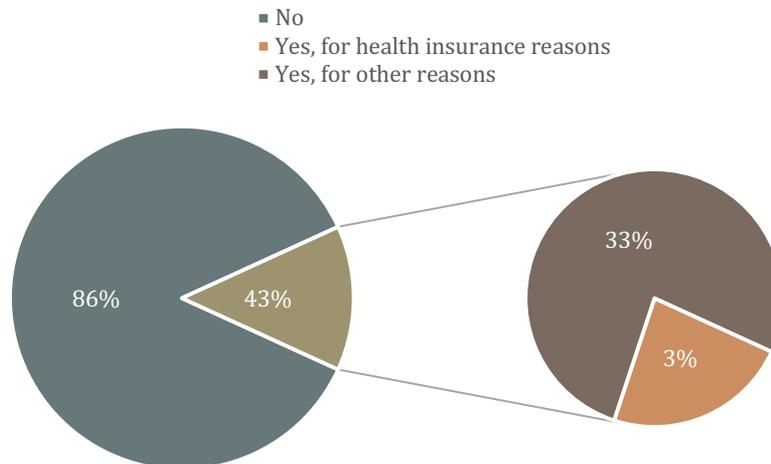
Similarly to patterns in regular health care usage, Hispanic respondents tend to report using clinics or health centers more than doctor's offices, HMOs, or no preventative care at all compared to non-Hispanic participants. Somali people, on the other hand, reported that they are more likely to use doctor's offices, HMOs, or no preventative care at all rather than clinics or health centers, compared to non-Somali people in the sample. There were also some differences in preventative care locations between genders. Namely that women were less likely to report using no preventative care than were men.

WHICH OF THE FOLLOWING DO YOU USUALLY GO TO FOR HEALTH CARE?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
I Do Not Get Preventative Care Anywhere	42 (13.46%)	20 (9.57%)	17 (29.82%)	26 (18.44%)	16 (9.58%)
Clinic Or Health Center	213 (68.27%)	158 (75.60%)	25 (43.86%)	86 (60.99%)	125 (74.85%)
Doctor's Office Or Hmo	22 (7.05%)	9 (4.31%)	8 (14.04%)	10 (7.09%)	12 (7.19%)
Hospital/Emergency Room	3 (0.96%)	3 (1.44%)	0	3 (2.13%)	0
Hospital Outpatient Department	7 (2.24%)	4 (1.91%)	2 (3.51%)	3 (2.13%)	3 (1.80%)
Some Other Place	6 (1.92%)	3 (1.44%)	1 (1.75%)	3 (2.13%)	3 (1.80%)
Doesn't Go To One Place Most Often	19 (6.09%)	12 (5.74%)	4 (7.02%)	10 (7.09%)	8 (4.79%)
Total	312	209	57	141	167

Changes in Places Gone to for Health Care in the Last 12 Months. The majority of the sample who answered this question reported that they did not change the place(s) they go to for health care in the past year. Of the thirteen percent of participants who did change their healthcare, less than a quarter say it was for health insurance reasons. While Somali participants were not more likely to

report changing their healthcare, those who did report a change were more likely to report that it was for insurance reasons as opposed to other reasons, compared to the non-Somali people that made changes in their healthcare locations. Women, however, were more likely than their male counterparts to report changing the place they go for health care in the last year.

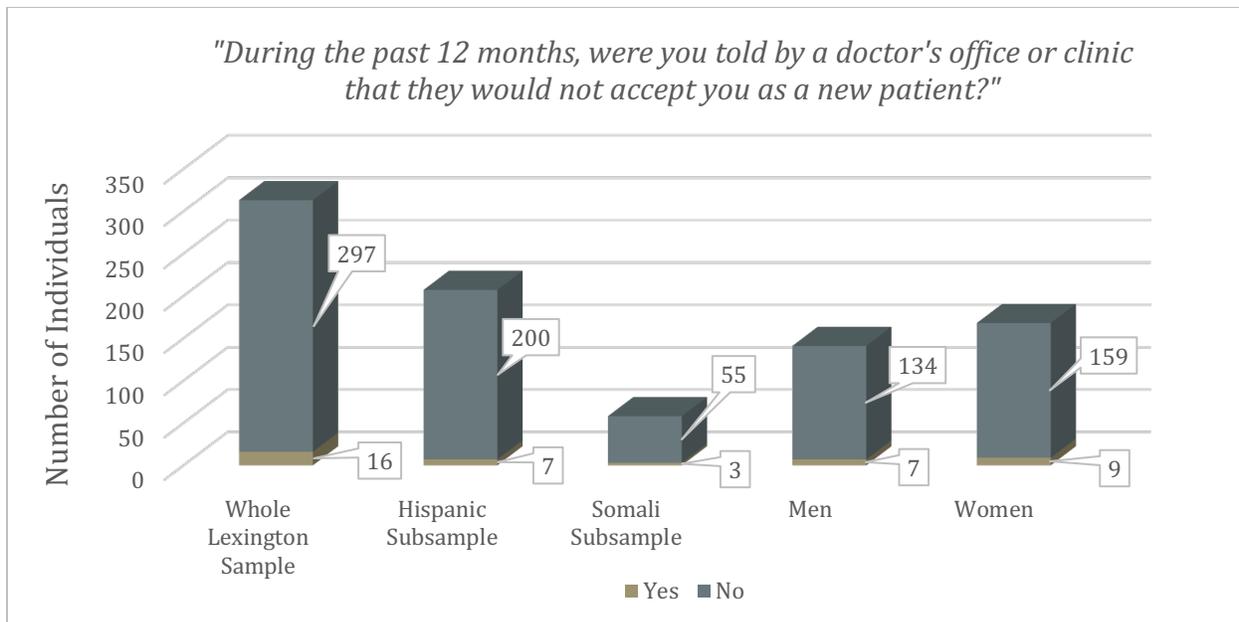
"During the past 12 months did you change the place(s) to which you usually go for health care?"



Finding General Doctor(s)/Provider(s). Over 90 percent of people in the sample report that they did not have any trouble finding a general doctor or provider who could see them. Of the 26 people who reported having trouble, about half were able to find a provider in the end, and about half reported that they were not able to find one. There were no significant differences across ethnicities and genders in finding general doctors or providers in the sample.

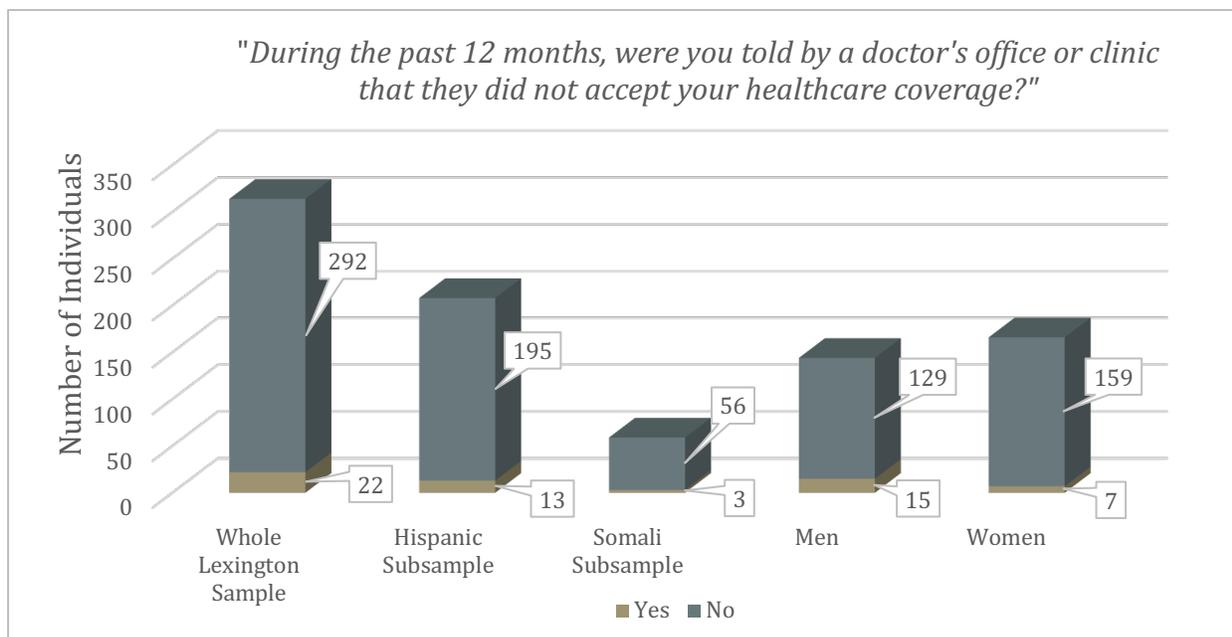
FINDING GENERAL DOCTOR(S)/PROVIDER(S)					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
DURING THE PAST 12 MONTHS, DID YOU HAVE ANY TROUBLE FINDING A GENERAL DOCTOR OR PROVIDER WHO COULD SEE YOU?					
Yes	24 (7.67%)	11 (5.31%)	6 (10.17%)	13 (9.15%)	10 (5.99%)
No	289 (92.33%)	196 (94.69%)	53 (89.83%)	129 (90.85%)	157 (94.01%)
DURING THE PAST 12 MONTHS, WERE YOU ABLE TO FIND A GENERAL DOCTOR OR PROVIDER WHO COULD SEE YOU?					
Yes	14 (53.85%)	5 (41.67%)	5 (83.3%)	7 (53.85%)	7 (58.33%)
No	12 (46.15%)	7 (58.33%)	1 (16.67%)	6 (46.15%)	5 (41.68%)

Rejected by Doctor's Office in the Past 12 Months. Sixteen people, or 5.11 percent of people who responded to this question answered that they had been rejected by a doctor's office or clinic that they could not be seen there. Given that this proportion of people is very small, there were few differences across groups in likelihood of being rejected by a doctor's office.



Rejected Insurance in the Past 12 Months. Similarly to results reflecting whether participants had been rejected by a doctor's office or clinic, the majority of respondents were not likely to have been told by a doctor's office or clinic that their insurance could not be accepted. Men in the sample showed higher odds of reporting a rejection of their health insurance than did women.

Ability to Pay Unexpected Medical Bills. Over 80 percent of the sample is worried about being able to pay medical bills in the event of an unexpected illness or accident, and half of these people report being very worried. While women are more likely to report higher levels of worry than men, Somali people are actually less likely than non-Somali participants to report higher anxiety over potential medical costs.



IF YOU GET SICK OR HAVE AN ACCIDENT, HOW WORRIED ARE YOU THAT YOU WILL BE ABLE TO PAY YOUR MEDICAL BILLS?

	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
Very Worried	127 (40.45%)	90 (43.27%)	14 (24.14%)	46 (32.39%)	80 (47.62%)
Somewhat Worried	130 (41.40%)	81 (38.94%)	31 (53.45%)	64 (45.07%)	65 (38.69%)
Not At All Worried	57 (18.15%)	37 (17.79%)	13 (22.41%)	32 (22.54%)	23 (13.69%)
Total	314	208	58	142	168

Health Care Coverage Compared to a Year Ago. Half of the participants in the current study feel that their current healthcare coverage is about the same as it was a year ago. Of those who notice a change, 28 percent report that their current healthcare is better, while 21 percent report that their current healthcare is worse than it was 12 months ago. Hispanic participants showed greater odds of having about the same or better healthcare as opposed to worst healthcare, compared to non-Hispanic participants. However, Somali respondents were more likely to report worse healthcare as opposed to the same healthcare as a year prior than non-Somali respondents.

IF YOU GET SICK OR HAVE AN ACCIDENT, HOW WORRIED ARE YOU THAT YOU WILL BE ABLE TO PAY YOUR MEDICAL BILLS?

	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
Better	87 (28.16%)	57 (27.94%)	17 (28.81%)	36 (25.53%)	48 (29.09%)
Worse	67 (21.68%)	32 (15.69%)	22 (37.29%)	34 (24.11%)	33 (20.00%)
About The Same	155 (50.16%)	115 (56.37%)	20 (33.90%)	71 (50.35%)	84 (50.91%)
Total	309	204	59	141	165

Time Since Last Dental Visit. About 41 percent of the sample report that they have seen a dentist within the last 6 months, and 20 percent report seeing a dentist between six months and a year ago. Twenty-two people (6.96%) have never seen a dentist. In terms of differences between ethnic groups and genders, some people were more likely to report that they have gone to a dentist at all. Specifically, Hispanic respondents were more likely to have ever seen a dentist than non-Hispanic people in the sample. Oppositely, Somali people were less likely to have reported some dentist visit in the past compared to those who do not identify as Somali. Lastly, men were more likely than women in the sample to report never having been to the dentist.

ABOUT HOW LONG HAS IT BEEN SINCE YOU LAST SAW A DENTIST?

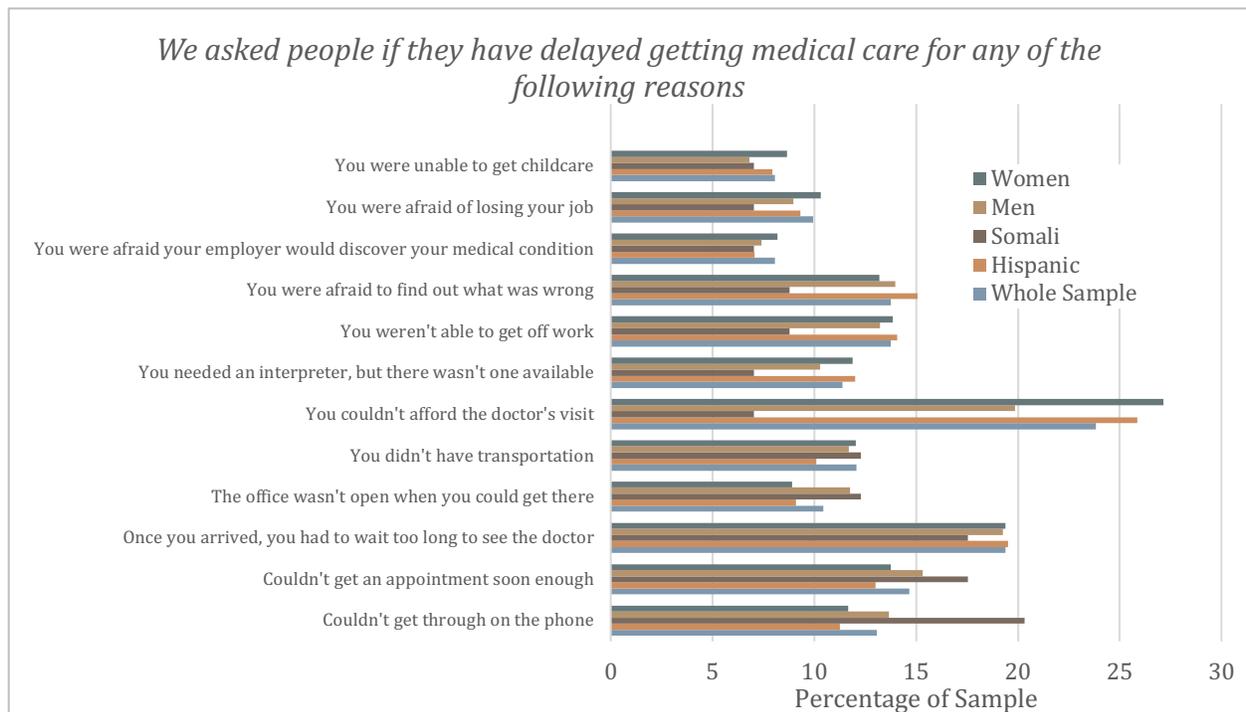
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
X ≤ 6 Months	131 (41.46%)	88 (42.11%)	26 (44.07%)	52 (36.11%)	77 (45.83%)
6 Months < X < 1 Year	64 (20.25%)	45 (21.53%)	9 (15.25%)	30 (20.83%)	34 (20.24%)
1 Year < X < 2 Years	48 (15.19%)	31 (14.83%)	9 (15.25%)	21 (14.58%)	26 (15.48%)
2 Years < X < 5 Years	27 (8.54%)	21 (10.05%)	2 (3.39%)	13 (9.03%)	13 (7.74%)
X > 5 Years	24 (7.59%)	14 (6.70%)	3 (5.08%)	12 (8.33%)	12 (7.14%)
Never Seen A Dentist	22 (6.96%)	10 (4.78%)	10 (16.95%)	16 (11.11%)	6 (3.57%)
Total	316	209	59	144	168

Time Since Last Discussing Own Health with Health Care Professional. About half of the sample report that they have seen a doctor within the last 6 months, and about 23 percent report seeing a doctor between six months and a year ago. Seventeen people (5.56%) have never seen a doctor. In

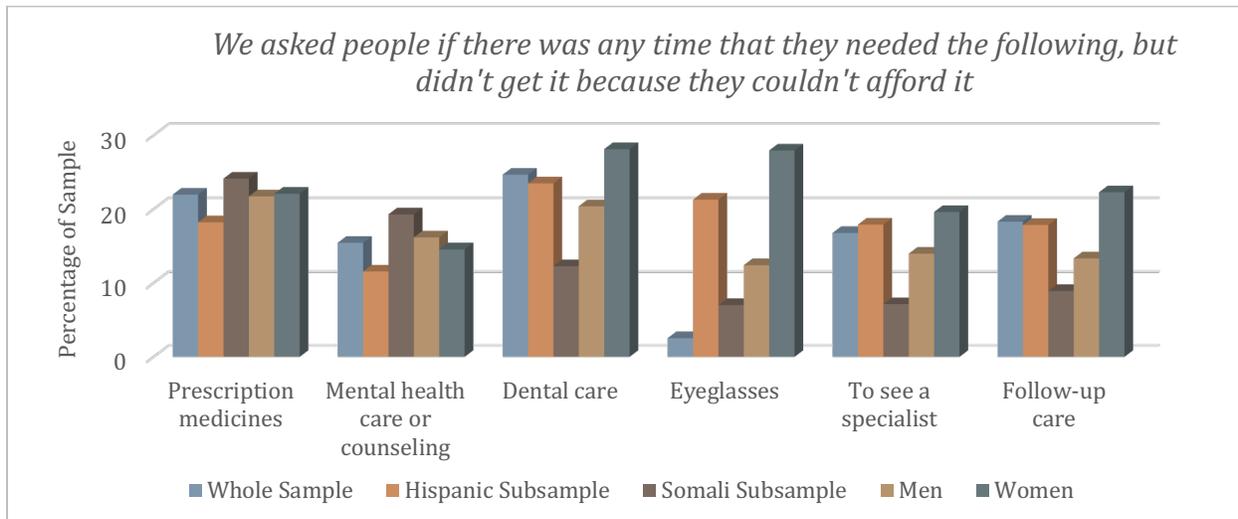
terms of differences between ethnic groups and genders, some people were more likely to report that they have gone to a doctor at all. Specifically, Hispanic respondents were more likely to have ever seen a doctor than non-Hispanic people in the sample. Oppositely, Somali people were less likely to have reported some doctor visit in the past compared to those who do not identify as Somali. Men were more likely than women in the sample to report never having been to the doctor. Lastly, women tend to report less time between the present and their last doctor visit where they spoke about their own health to a professional compared to men.

ABOUT HOW LONG HAS IT BEEN SINCE YOU LAST SAW OR TALKED TO A DOCTOR OR OTHER HEALTH CARE PROFESSIONAL ABOUT YOUR OWN HEALTH?					
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)	Men N (%)	Women N (%)
X ≤ 6 Months	154 (50.33%)	100 (49.02%)	30 (51.27%)	63 (44.37%)	90 (55.56%)
6 Months < X < 1 Year	70 (22.88%)	50 (24.51%)	8 (13.79%)	27 (19.01%)	43 (26.54%)
1 Year < X < 2 Years	29 (9.48%)	22 (10.78%)	4 (6.90%)	16 (11.27%)	12 (7.41%)
2 Years < X < 5 Years	25 (8.17%)	18 (8.82%)	4 (6.90%)	13 (9.15%)	12 (7.41%)
X > 5 Years	11 (3.59%)	7 (3.43%)	3 (5.17%)	9 (6.34%)	2 (1.23%)
Never Seen A Doctor	17 (5.56%)	7 (3.43%)	9 (15.52%)	14 (9.86%)	3 (1.85%)
Total	306	204	58	142	162

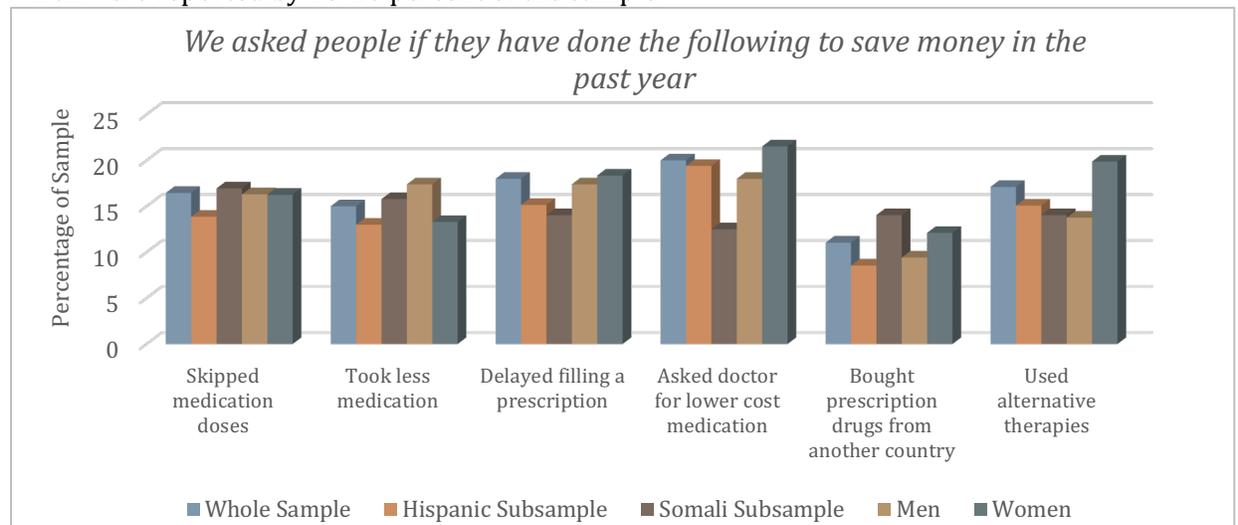
Reasons for Delayed Medical Care. As you can see in the graph below, there is a small percentage of the overall sample who delayed medical care for any of the reasons listed above. The most cited reasons for putting off medical care were because the participant couldn't afford the doctor's visit, and because receiving care took too long after the respondent had already arrived to the location. Between 10 and 15 percent of people reported other problems such as being afraid of finding out what was wrong, not being able to take time off work, and not being able to get through on the phone. While there were not many significant differences in reasons for delaying healthcare between ethnic groups, Somali people reported that not being able to pay for the visit was less of an issue than non-Somali people.



Things People Couldn't Afford, But Needed in the Last 12 Months. Between 20 and 25 percent of the sample didn't get prescription medications or dental care in the last year because they couldn't afford it. A smaller proportion of the sample (10%-20%) didn't get mental health counseling, follow-up care, or go to see a specialist due to the cost. Not being able to afford eyeglasses was a concern for only a small amount of the Lexington sample who participated in the survey. Hispanic people were less likely to have trouble getting prescription medications and mental health counseling than non-Hispanic participants. Somali respondents were less likely to report trouble with affording dental care, eyeglasses, and seeing specialists than non-Somali people sampled. Lastly, women were more likely than men to report not getting eyeglasses and follow-up care because they couldn't afford it in the last year.



Saving Money on Medication. People in the Lexington community who participated in the survey have done many things in attempts to save money in the past year. More common behaviors were to delay filling a prescription, ask doctors for lower cost medications, and to use alternative therapies, which were reported by 15-20 percent of the sample.



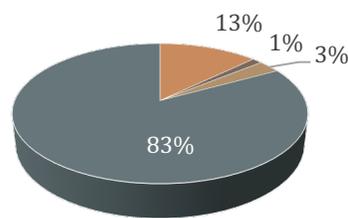
Purchased Health Insurance Directly in the Last 3 Years. Few people (9.62%) in the sample reported that they have attempted to purchase health insurance directly in the past three years. Of those who did attempt to purchase a plan directly, rather than through an employer, union, or government program, half actually succeeded in buying a plan, and half reported that they had a very difficult time with the process. Women, however, reported lower levels of difficulty purchasing a plan than men in the sample did.

PURCHASED HEALTH INSURANCE DIRECTLY IN THE LAST 3 YEARS						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
DURING THE PAST THREE YEARS, DID YOU TRY TO PURCHASE HEALTH INSURANCE DIRECTLY, THAT IS, NOT THROUGH AN EMPLOYER, UNION, OR GOVERNMENT PROGRAM?						
Yes	30 (9.62%)	20 (9.66%)	4 (6.78%)		14 (9.86%)	16 (9.64%)
No	282 (90.38%)	187 (90.34%)	55 (93.22%)		128 (90.14%)	150 (90.36%)
WAS A PLAN PURCHASED?						
Yes	18 (50%)	13 (56.52%)	2 (50%)		9 (56.25%)	9 (47.37%)
No	18 (50%)	10 (43.48%)	2 (50%)		7 (43.75%)	10 (52.63%)
WAS THIS PLAN FOR YOURSELF, SOMEONE ELSE IN YOUR FAMILY, OR BOTH?						
Self	21 (61.76%)	13 (59.09%)	4 (100%)		12 (75%)	9 (50%)
Someone Else In Family	3 (8.82%)	2 (9.09%)	0		1 (6.25%)	2 (11.11%)
Both	10 (29.41%)	7 (31.82%)	0		3 (18.75%)	7 (38.89%)
HOW DIFFICULT WAS IT TO FIND A PLAN WITH THE TYPE OF COVERAGE YOU NEEDED?						
Very Difficult	17 (50%)	10 (45.45%)	2 (50%)		11 (73.33%)	6 (31.58%)
Somewhat Difficult	15 (44.12%)	11 (50%)	2 (50%)		3 (20%)	12 (63.16%)
Not At All Difficult	2 (5.88%)	1 (4.55%)	0		1 (6.67%)	1 (5.26%)
HOW DIFFICULT WAS IT TO FIND A PLAN YOU COULD AFFORD?						
Very Difficult	17 (48.57%)	10 (43.48%)	2 (50%)		11 (68.75%)	6 (31.58%)
Somewhat Difficult	15 (42.86%)	12 (52.17%)	1 (25%)		3 (18.75%)	12 (63.16%)
Not At All Difficult	3 (8.57%)	1 (4.35%)	1 (25%)		2 (12.50%)	1 (5.26%)

Looked into Purchasing Health Insurance through Healthcare.gov/Nebraska Health Insurance Marketplace. The majority of people asked said they did not attempt to purchase health insurance through Healthcare.gov or the Nebraska health insurance marketplace. In fact, about 83 percent reported that they did not attempt to purchase a plan this way. Women in the sample, however, were more likely than men to report that they have looked into Healthcare.gov or the Nebraska health insurance marketplace. Somali people, oppositely, were less likely than non-Somali people to look into these domains.

We asked people if they have looked into purchasing health insurance coverage through Healthcare.gov or the Nebraska health insurance marketplace

■ Yes Hispanic ■ Yes Somali ■ Yes Other ■ No



Health Care Satisfaction in the Past 12 Months. The majority of people in the sample appear to be at least somewhat satisfied with their health care in the past year. Just 14 percent of people who answered the question (excluding those who did not have health care within the last year) reported that they are somewhat or very dissatisfied with the care they received.

DURING THE PAST 12 MONTHS, IN GENERAL, HOW SATISFIED ARE YOU WITH THE HEALTHCARE YOU HAVE RECEIVED?						
	Lexington Sample N (%)	Hispanic Subsample N (%)	Somali Subsample N (%)		Men N (%)	Women N (%)
Very Satisfied	118 (42.60%)	76 (42.22%)	24 (43.64%)		50 (40.32%)	67 (44.67%)
Somewhat Satisfied	119 (42.96%)	75 (41.67%)	28 (50.91%)		56 (45.16%)	61 (40.67%)
Somewhat Dissatisfied	22 (7.94%)	18 (10%)	2 (3.64%)		9 (7.26%)	13 (8.67%)
Very Dissatisfied	18 (6.50%)	11 (6.11%)	1 (1.82%)		9 (7.26%)	9 (6%)
Total	277	180	55		124	150

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