



COLLECTIVELY WE THRIVE TOGETHER

CITY OF LAREDO COMMUNITY HEALTH IMPROVEMENT PLAN

2023

City of Laredo Health Department



Public Health
Prevent. Promote. Protect.



Through excellence and leadership, the City of Laredo Health Department provides culturally competent quality services that promote optimal health, prevent disease, and protect the safety of all to achieve health equity.

Dear Laredo Community,

I hope this message finds you in good health and high spirits. I am honored to serve as the Public Health Director for the City of Laredo and want to introduce and present you with a significant milestone in our city's public health journey. Introducing Laredo's First Community Health Improvement Plan (CHIP) - based on 2023 CHNA Data, developed by the Laredo Public Health Department, and founded on extensive analysis of data produced by our 2022-2023 Community Health Needs Assessment (CHNA).

For many years, our dedicated team has worked tirelessly to understand our community's unique health needs and challenges. We listened to your concerns and took a significant step further. We conducted the 2022-2023 Community Health Needs Assessment (CHNA) to gather comprehensive data, insights, and perspectives from our community members and healthcare experts. This data has been pivotal in shaping our Community Health Improvement Plan (CHIP) for the betterment of Laredo.

The Community Health Improvement Plan (CHIP) is a strategic framework that outlines our vision for a healthier Laredo. It serves as a roadmap for the years to come, guiding our efforts to enhance the quality of life for everyone who calls our city home. This plan is a testament to our commitment to your well-being and our determination to create a healthier future for our community, guided by the most current and relevant data.

In this plan, you will find a series of goals and objectives that cover a wide range of health-related issues, including:

- **Access to Quality Healthcare:** We are dedicated to improving access to healthcare services for all residents, ensuring that no one is left behind.
- **Preventive Health Measures:** We aim to promote healthy lifestyles and disease prevention through education, outreach, and community programs.
- **Mental Health and Well-being:** Recognizing the importance of mental health, we are committed to providing resources and support to address this vital aspect of overall wellness.
- **Collaborative Partnerships:** We believe in the power of collaboration, and we will continue to work closely with local organizations, agencies, and community leaders to achieve our goals.

Over the coming months and years, we will actively engage with the community to implement this plan. Your input, support, and participation are essential to its success. We encourage you to stay involved and understand that this is just the beginning of our journey. Together and armed with the insights from the 2022-2023 CHNA, we can overcome any obstacle and make meaningful improvements in the health and well-being of our community. I invite you to explore the Community Health Improvement Plan (CHIP) and learn more about our goals and strategies. Thank you for entrusting us with your health, and we look forward to working hand in hand to build a healthier Laredo for generations to come.

Your Partner in Health,
Richard A. Chamberlain DrPH, MPH, CPHA, CPM, CHW, RS

A handwritten signature in black ink that reads "Chamberlain, Richard". The signature is written in a cursive style.

Director, City of Laredo Public Health Department

TABLE OF CONTENTS



Executive Summary	5
City of Laredo Community Health Improvement Development Process	6
City of Laredo Community Health Improvement Development Process	7
• Development Plan of CHIP	
• Process and Method of the CHNA	
Priority Areas of Concern	8
Mobilizing for Action through Planning and Partnership (MAPP)	10
City of Laredo Improvement Plan	13
I. Overview	14
SOCIAL DETERMINANT OF HEALTH FRAMEWORK	16
Five Keys Areas of Social Determinant of Health (SDoH)	17
• ECONOMIC STABILITY	
• EDUCATION	
• HEALTH AND HEALTHCARE ACCESS	
• NEIGHBORHOOD AND BUILT ENVIRONMENT	
• SOCIAL AND COMMUNITY CONTEST	
II. Prioritization of Health Issues	20
III. CHIP Implementation Plan	21
Health Priorities	22
• Access to and Affordability of Health Care	23
• Health Outcome	26
▪ Nutrition (Sub-Priority)	28
• Behavioral Health	29
▪ Substance Use Disorder	
▪ Mental Health	
▪ Sexual Health	
IV. Next Plan	33
V. Sustainability	33
Appendices	34

EXECUTIVE SUMMARY

The City of Laredo Public Health Department 2023 Community Health Improvement Plan (CHIP) is a long-term strategic plan for addressing health disparities and improving community health based on the 2022-23 Community Health Needs Assessment (CHNA), which included qualitative data from focus groups, key informant interviews, community leadership committee, a community survey, and a social media campaign. This assessment also provided quantitative data from local, state and national indicators to inform discussions and determine health priority areas. Both the CHNA and CHIP collectively serve as the bedrock upon which the Public Health Accreditation Board (PHAB) bases its initiative. This framework is dedicated to fostering a continuous trajectory of quality improvement for the City of Laredo's public health endeavors. Through this integrated approach, the city's health department aims to fortify its commitment to promoting public health by addressing priority areas identified in the CHNA through strategic planning. All facets of this ongoing action is aimed at applying the strategic plans to improve the health and quality of life of the City of Laredo area residents.

Priority areas of concern include:

- Access to and Affordability of Health Care
- Behavioral Health
- Health Outcomes

This Community Health Improvement Plan is a collaborative effort involving the City of Laredo Health Department, community residents, and various stakeholders. It provides a foundation for organizations to leverage resources, engage partners, and identify their priorities and strategies for improving community health. The CHIP aims to enhance the community's overall well-being and reduce health disparities by guiding future services, programs, and policies.

Staff continuously improve community outreach, patient care efficiency, and the education and expertise of the local public health workforce. The department seeks to advance health equity in the Laredo community, ensuring that every person has access to their full health potential, regardless of social position or other hindering circumstances.

About CLHD

The City of Laredo Public Health Department is committed to proactive healthcare by preventing issues before they arise to increase the likelihood of healthier and longer lives for our community members. Through 47 programs and services covering over 7,300 mi. our value-based approach aims to improve patient outcomes and quality of care. We continuously improve our community outreach, patient care efficiency, and the education and expertise of our public health workforce. Our goal is to achieve advanced health equity levels in our community. The City of Laredo Public Health Department offers public health protections like communicable disease prevention, safe food and water, maternal and child health, clinical care access, and chronic disease and injury prevention. We also provide unique local services such as affordable laboratory services and pharmaceutical access.



CITY OF LAREDO COMMUNITY HEALTH IMPROVEMENT DEVELOPMENT PROCESS



“The way we work in public health is, we make the best recommendations and decision based on the best available data.”

-Tom Frieden



CITY OF LAREDO COMMUNITY HEALTH IMPROVEMENT DEVELOPMENT PROCESS

To facilitate the development of the CHIP, the City of Laredo Health Department collaborated with the Texas Health Institute (THI) to conduct the 2022-23 City of Laredo CHNA. This comprehensive report outlines the process, methods, and findings of the assessment, including identifying health and social determinants of health needs in Laredo, assessing community assets, and summarizing recommendations from the analysis. The report is valuable for understanding the community's health needs and identifying strategies to address them effectively.

By implementing the CHIP, the City of Laredo Health Department and its partners aim to create lasting positive change in the community's health outcomes. The plan emphasizes the importance of collaboration, community engagement, and continuous evaluation to ensure that interventions are evidence-based, responsive to community needs, and sustainable in the long run. With a focus on health equity and proactive healthcare, the City of Laredo Health Department is committed to improving the overall health and well-being of the community and ensuring that everyone has an equal opportunity to thrive.

Development Plan of CHIP

The City of Laredo Community Health Improvement Plan (CHIP) combines consistent and joint collaborative partnerships among agencies and community members dedicated to protecting and improving the health of people and their communities. The Public Health Accreditation Board (PHAB) defines a Community Health Improvement Plan, or CHIP, as "a long-term, systematic effort to address public health problems based on the results of community health needs assessment (CHNA) activities and the community health improvement process." The CHIP will serve as a vision for the community's health and a foundation for organizations to leverage resources, engage partners, and identify their priorities and strategies for community health improvement.

In collaboration with The City of Laredo Public Health Department, THI adopted an equity-centered, community-focused, and place-based approach to developing the City of Laredo Community Health Needs Assessment. THI used quantitative and qualitative methods, including analyzing publicly available data sets, key informant interviews, focus groups with community members, and a robust community survey.

Process and Method of the CHNA ¹

To facilitate the development of the CHIP, the City of Laredo Health Department collaborated with the Texas Health Institute (THI) to conduct the 2022-2023 City of Laredo CHNA. This comprehensive report outlines the assessment process, methods, and findings, including community input collection, primary data collection and analysis, secondary data sources and analysis, data synthesis, significant health needs, prioritization of essential health needs, and determinants for areas of concern.

1. Community Input Collection: THI developed and—jointly with the City of Laredo Health Department—disseminated a community survey in fall 2022. The survey was completed by 1,635 residents of the city of 12 City of Laredo 2022-23 Community Health Needs Assessment Laredo living in ZIP codes 78040, 78041, 78043, 78045, and 78046 between November 18 and December 9, 2022. All residents completing the survey were 18 or older. One-fifth of survey respondents (20.4%) conducted the study in Spanish and 79.6% in English. The community survey included 47 questions about health status and conditions, mental health, health insurance, health-seeking behaviors and services, COVID-19, housing status, neighborhood concerns, food access, and demographics (such as age, race, ethnicity, etc.).

2. Primary Data Collection and Analysis: THI virtually conducted 11 key informant interviews and seven in-person community focus groups in Laredo during August and September 2022. The focus groups and discussions aimed to learn about local priority health needs and assets and how community members think community health and well-being can be improved.

3. Secondary Data Sources and Analysis: The quantitative data used for this report is secondary data and includes data on approximately 80 indicators, many broken down by geography or demographic characteristics when available. Indicator sources are cited for figures, tables, and graphs in this CHNA. Publicly available data sources used include:

- American Community Survey
- Argonne National Laboratory: Housing Stability Index
- Behavioral Risk Factor Surveillance System
- Centers for Disease Control and Prevention
- COVID Data Tracker
- National Center for Health Statistics
- Social Vulnerability Index
- U.S. Diabetes Surveillance System
- Center for Medicare and Medicaid

¹ City of Laredo 2022-23 Community Health Needs Assessment, Pg 11-19

- Federal Bureau of Investigation Crime Data Explorer
- Feeding America: Map the Meal Gap Study
- Health Resources and Services Administration
- Substance Use Disorder and Mental Health Services Administration: National Survey on Drug Use and Health
- Texas Cancer Statistics
- Texas Department of State Health Services
- Texas Education Agency
- United for ALICE
- U.S. Bureau of Labor Statistics
- U.S. Department of Agriculture: Food Access Research Atlas
- U.S. Census Bureau of Small Area Income and Poverty Estimates Program
- Small Area Health Insurance Estimates Program

4. Data Synthesis and Significant Health Needs: THI weighted the community survey data to make the sample more representative of population-level data. The survey data were weighted by age, education, gender identity, sex, and ZIP code. Staff used Qualtrics to conduct univariate and bivariate analyses on questions with single and multiple-choice answers. Questions with an open-ended answer option were analyzed using Excel to identify the most common themes among the responses. The survey findings in this report were included if they were statistically significant, meaning there is mathematical reason to believe the results are not due to random chance and there is an actual difference between groups.

5. Prioritization of Significant Health Needs: Members of the City of Laredo Health Department Accreditation team utilized the data analysis and synthesis findings to vote on which significant health needs will be prioritized for implementation strategy development consideration.

6. Determining Areas of Concern: Through the analysis and synthesis of the survey, community focus group, and consistent health themes identified within the CHNA, the Laredo Health Department Accreditation Team reviewed health areas of concern, focusing on five priority health needs from this particular zip codes ZIP codes: 78040, 78041, 78043, 78045, and 78046.

Priority Areas of Concern²

Health Outcomes: (Diabetes, Obesity, Hypertension, Heart disease.)

Within the context of the health concerns prevalent in the City of Laredo, the insights provided by key informants and focus group participants shed light on four significant issues: diabetes, obesity, hypertension, and heart disease. These health conditions garnered considerable attention and are interwoven with the community.

Diabetes stands out as a prominent concern, as articulated by both participants and survey responses.

Diabetes is a prominent concern articulated by participants and survey responses. The narratives underscore the familiarity of diabetes within Hispanic families and the broader community, reflecting its pervasive impact. According to the survey findings, approximately 21.6% of respondents acknowledged receiving a diabetes diagnosis from a healthcare professional. The data further reveals that the estimated prevalence of diabetes in Laredo reaches 15.7%, underscoring its substantial presence.

Similarly, the discourse around obesity echoes strongly within the Hispanic community. The insights gleaned from focus group participants and key informants underline the prevalence of obesity as a prevailing issue. These discussions reveal a complex web of contributing factors, from economic constraints hindering access to wholesome dietary choices to ingrained poor nutrition habits and a lack of comprehensive nutrition education. Notably, the survey data highlights the acknowledgment of obesity diagnoses by 35.3% of the respondents. Within Laredo, the estimated prevalence of obesity is notably higher, at 45.2%.

Behavioral Health: Mental Health, Substance Use Disorder, Sexual Health.

Laredo community members feel a significant need for local mental health services. The magnitude of the market has increased due to the impact of COVID-19. Nearly one-fifth (19.8%) of community survey respondents indicated they had been told by a doctor or healthcare provider that they had a mental health condition. The estimated prevalence of depression in Laredo is 20.2%. The estimated prevalence of frequent mental distress in Laredo is 16.2%. Laredo residents face severe challenges with a lack of specialty care, especially psychiatry. Many reported that people struggle to find continuity of care for mental health after crisis management. Focus group participants shared that they often travel to other parts of the state to seek mental health services, which can be expensive. Community members mentioned the need to increase access to mental health services in Laredo. Participants also said the negative stigma in the Hispanic culture associated with mental health might prevent individuals and families from seeking treatment and support. Focus group participants noted a pattern of avoidance of preventive care and seeking care at the last minute, partly attributing it to the Hispanic culture. A lower percentage of adult residents in Webb County (69.1%) received a preventive, primary checkup in the last year compared to Texas (72.6%).

Substance Use Disorder and Sexual health were related to behavioral health issues from the CHNA. Focus group participants and key informants reported concerns regarding increased substance use and misuse in the community, particularly among young people. Presently, there are no detox facilities and few halfway homes in Laredo. The estimated prevalence of smoking is 16.4%, and heavy drinking is 16.5%. Notably, the overdose death rate has more than doubled in Webb County over the past two decades, from 5.62 in 2003 to 19.38 in 2021.

² City of Laredo 2022-23 Community Health Needs Assessment , Pg 3-7

Moreover, a compelling pattern emerges in Webb County, Texas, when examining the crucial metric of teen birth rates within the demographic of 15 to 19-year-olds. With a teenage birth rate standing at 38.85%, this statistic underscores the issue's significance and showcases the urgency of addressing it. Remarkably, this figure is more than double the corresponding national average for the United States, which rests at a comparatively lower 15.39%.

Access to and Affordability of Health Service

Focus group participants described regularly seeking health care outside of Laredo for various reasons, such as better-quality care for more complex health conditions and increased access. Participants often traveled outside Laredo to other parts of Texas and Nuevo Laredo, Mexico. Webb County/ City of Laredo is designated as a Medically Underserved Area (MUA). MUAs are geographic areas with a lack of access to primary care. The root causes participants identified for the lack of access to primary and specialty care included overburdened providers leaving Laredo for better opportunities with higher salaries and a lack of medical residents to become future providers. Community members frequently mentioned the increasing need for mental health services in Laredo.

Laredo community members reported care affordability as another top barrier to healthcare access. They indicated that low-income families living in poverty must choose between paying for basic needs or insurance. Because many residents do not receive full benefits or health insurance through their jobs, they seek care across the border (Mexico) for prescriptions and doctor's visits.

Laredo community members reported care affordability as another top barrier to healthcare access. They indicated that low-income families living in poverty must choose between paying for basic needs or insurance. Because many residents do not receive full benefits or health insurance through their jobs, they seek care across the border (Mexico) for prescriptions and doctor's visits.

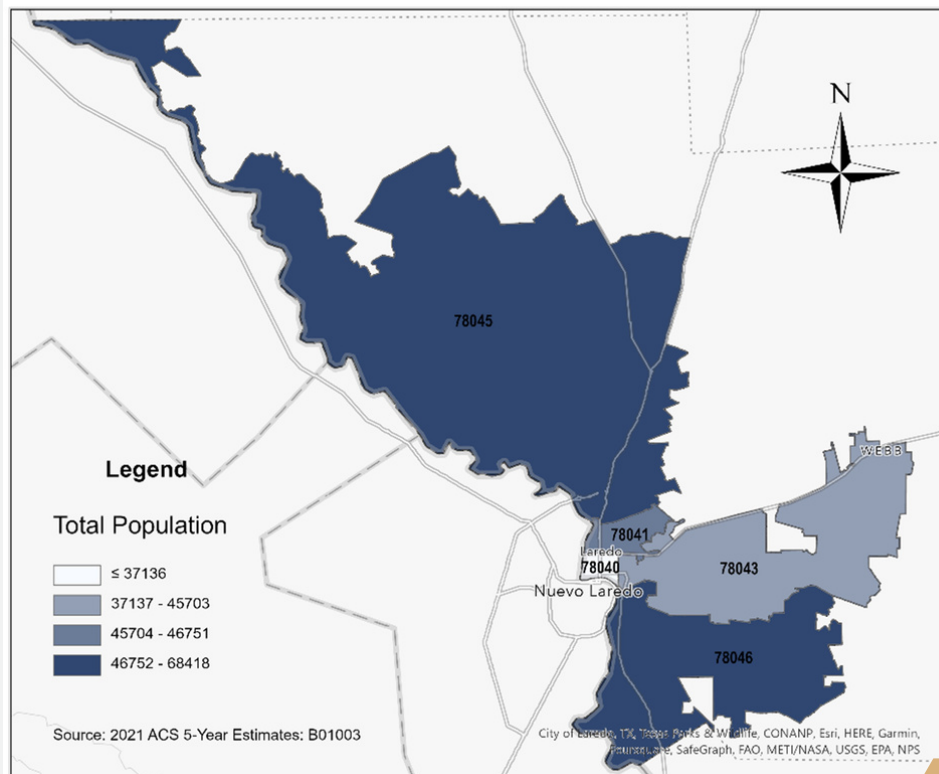
Laredo community members reported that health literacy and insurance literacy are still significant barriers for many residents of Laredo, especially those who are undocumented. Many still need help understanding how to access, seek, and receive care. Language on pamphlets, brochures, and official applications often needs to be clarified and easier to understand. With Laredo's climate and infrastructure, driving is the primary way to get around. Still, with the spiking gas prices, transportation is another concern, particularly for lower-income residents. Transportation becomes a barrier for residents seeking specialty care and mental health services. Focus group members shared that they must travel to a central metropolitan area for health needs outside of routine maintenance.

CHNA Recommendations³

The recommendations focused on five primary outcomes:

- Improve healthcare access and affordability
- Improve access to specialty care
- Increase culturally relevant healthcare
- Build trust and encourage partnerships to strengthen the community
- Strengthen community engagement and outreach

Total Population of Residents by ZCTAs, City of Laredo



³ City of Laredo 2022-23 Community Health Needs Assessment, Pg 8

Mobilizing for Action through Planning and Partnership (MAPP) Modified and Adapted Framework.⁴

Overview of Planning Goals & Strategies for the City of Laredo 2022-23 CHIP

More than 20 City of Laredo community leaders, community members, stakeholders, and health workers, both internal and external of the health department, attended the kick-off Community Leadership Committee in 2022; the launch meeting provided a platform for diverse agencies, community members, and perspectives to be shared to generate inclusive, cohesive, and attainable health improvement plan. During the meeting, the MAPP framework was adapted as a guide to provide a comprehensive approach to community health planning. The participants came together with a shared goal: to enhance the overall well-being of the City of Laredo and its residents.

The MAPP (Mobilizing for Action through Planning and Partnerships) framework, renowned for its effectiveness in community health planning, became the guiding compass for this committee. Its five essential components – Assessment Phase, Analysis and Issue identification, Strategic Planning and Goal Setting, Implementation, and Evaluation – offered a systematic way to address Laredo's health concerns and challenges.

- **Assessment Phase:** Conduct a thorough assessment of the community's health literacy levels from the health needs assessment. Identify existing resources, gaps, and the specific needs of different population groups, including linguistic and cultural considerations.
- **Analysis and Issue Identification:** Utilize systems thinking to analyze the assessment data. Identify root causes of low health literacy, considering socio-economic factors, cultural diversity, and barriers to accessing health information.
- **Strategic Planning and Goal Setting:** Collaboratively set a goal to improve health literacy and develop strategies such as community workshops, multilingual health materials, and partnerships with educational institutions.
- **Implementation:** Implement health literacy improvement strategies, engaging stakeholders like Laredo Independent School District (LISD), United Independent School District (UISD) and City of Laredo Health Department (CLHD) to integrate health initiatives into the education system and the health department outpatient services.
- **Evaluation:** Continuously assess the impact of health literacy initiatives, measuring improvements in residents' understanding of health information

Goal 2: Enhance Community Health by Creating a Comprehensive Employee Training Program for Aspiring Community Health Workers (CHWs).

- **Assessment Phase:** Assess the current state of CHW training programs, identifying strengths and gaps in education and training opportunities.
- **Analysis and Issue Identification:** Use systems thinking to identify barriers to aspiring CHWs receiving comprehensive training and how this affects community health.
- **Strategic Planning and Goal Setting:** Collaboratively set a goal to enhance CHW training and develop a comprehensive program. Engage stakeholders from the City of Laredo Health Department (CLHD) in curriculum development.
- **Implementation:** Launch the CHW training program, involving community health workers, healthcare providers, and educational institutions in training aspiring CHWs.
- **Evaluation:** Continuously assess the program's effectiveness and the impact of well-trained CHWs on community health.

Goal 3: Healthcare providers will pledge to provide comprehensive communication in English and Spanish.

- **Assessment Phase:** Assess the current language accessibility in healthcare services, identifying areas where language barriers exist.
- **Analysis and Issue Identification:** Use systems thinking to understand the structural factors contributing to language barriers in healthcare.
- **Strategic Planning and Goal Setting:** Collaboratively set a goal to improve language accessibility in healthcare and develop strategies such as bilingual training for healthcare providers.



Source

In each priority area and associated goal, the MAPP framework will be applied:

Priority Area 1: Access to and Affordability of Health Care

Goal 1: Every City of Laredo resident can access comprehensive health literacy tools.

⁴ Mobilizing for action through planning and partnerships (MAPP). NACCHO. (n.d.).



- **Implementation:** Launch training programs for healthcare providers, engaging stakeholders from Laredo Specialty Hospital and Doctors Hospital of Laredo in implementing language accessibility initiatives.
- **Evaluation:** Continuously assess the impact of language accessibility improvements on patient-provider communication and healthcare outcomes.

Priority Area 2: Health outcomes:

Goal: Improve chronic disease management in the City of Laredo by enhancing access to quality healthcare services and implementing targeted preventive measures.

- **Assessment Phase:** Assess the prevalence of chronic diseases in the community, identifying disparities in healthcare services.
- **Analysis and Issue Identification:** Use systems thinking to understand the interconnected factors contributing to chronic diseases and access barriers.
- **Strategic Planning and Goal Setting:** Collaboratively set a goal to improve chronic disease management, focusing on expanding access to primary and preventive care.
- **Implementation:** Implement programs to enhance access to quality healthcare services involving stakeholders from Doctors Hospital of Laredo and Texas A&M International University.
- **Evaluation:** Continuously assess the impact of access improvements on chronic disease management and preventive measures.

Priority Area 3: Behavioral Health

Goal 1: Expand community access to mental health programs for individuals with serious mental illness within Laredo by implementing The Laredo Assisted Outpatient Treatment (AOT) Program.

- **Assessment Phase:** Assess the current availability and utilization of mental health services, identifying gaps in access.
- **Analysis and Issue Identification:** Use systems thinking to understand the factors contributing to limited access to mental health services.
- **Strategic Planning and Goal Setting:** Collaboratively set a goal to expand access to mental health programs, such as AOT, and develop strategies for implementation.
- **Implementation:** Launch the AOT program and expand mental health services, engaging stakeholders from Border Region BHC and Laredo Specialty Hospital.
- **Evaluation:** Continuously assess the impact of expanded mental health programs on individuals with serious mental illness.

Goal 2: Enhance the City of Laredo's well-being by increasing access to the Recovery center and creating a strong response team for overdose incidents.

- **Assessment Phase:** Assess the availability of recovery centers and the capacity to respond to overdose incidents, identifying gaps in access and response.
- **Analysis and Issue Identification:** Use systems thinking to understand the interconnected factors contributing to Substance Use Disorder and overdose incidents.
- **Strategic Planning and Goal Setting:** Collaboratively set a goal to enhance access to recovery centers and create a response team. Develop strategies for both.
- **Assessment Phase:** Assess the availability of recovery centers and the capacity to respond to overdose incidents, identifying gaps in access and response.
- **Analysis and Issue Identification:** Use systems thinking to understand the interconnected factors contributing to Substance Use Disorder and overdose incidents.
- **Strategic Planning and Goal Setting:** Collaboratively set a goal to enhance access to recovery centers and create a response team. Develop strategies for both.
- **Implementation:** Launch recovery centers and establish a response team involving stakeholders like Doctor's Hospital of Laredo (DHL).
- **Evaluation:** Continuously assess the impact of improved access to recovery centers and the effectiveness of the response team.

Goal 3: Reduce the teen pregnancy rate in Webb County, Texas, to levels closer to the statewide and national averages by addressing socio-economic, cultural, and educational factors contributing to higher rates.

- **Assessment Phase:** Assess the current teen pregnancy rate and its contributing factors, including cultural and educational aspects.
- **Analysis and Issue Identification:** Use systems thinking to understand the structural causes of teen pregnancy disparities.
- **Strategic Planning and Goal Setting:** Collaboratively set a goal to reduce teen pregnancy rates and develop strategies, such as comprehensive sex education and cultural outreach.
- **Implementation:** Implement sex education programs and cultural outreach initiatives involving stakeholders like Area Health Education Center (AHEC).
- **Evaluation:** Continuously assess the impact of these initiatives on reducing teen pregnancy rates strategies and interventions as necessary.





The 2022 kick-off meeting began an ambitious journey towards a healthier and more vibrant City of Laredo. With the MAPP framework as their guide and a committed group of community leaders and members, they were committed to creating a comprehensive and sustainable health improvement plan that highlights a Mission, Goal, and Common Values for the City of Laredo that would benefit all residents, today and for generations to come.

Mission

Ensuring our community members are Healthy to have a Prosperous Community

Goal

For our community and organizations (public, private, non-profit) to work together to create a healthy and sustainable Laredo

Common Values

Diverse, Inclusive, and Collaborative

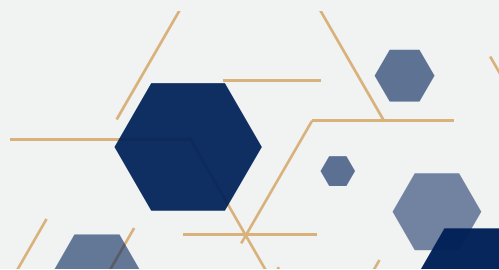
Promoting Health: Building on current programs available and developing new programs and assets

Efficient Results, Data Driven, and Evidence-Informed: Approach designed to improve overall health and disparities

The planning process of the community health improvement plan was meticulously designed to incorporate an additional layer of focus within each priority area, considering the influence of social determinants of health. These determinants encompass a broad range of factors, including economic conditions, educational opportunities, community infrastructure, and cultural competencies, as previously stated based on the metric set by the National Association of County and City Health Officials (NACCHO)⁵ and part of the vision of Healthy People 2030.⁶

⁵ Social Determinants of Health. Social Determinants of Health - Healthy People 2030. (n.d.).

⁶ Social Determinants of Health and healthy people. NACCHO. (n.d.).





**CITY OF LAREDO COMMUNITY HEALTH
IMPROVEMENT PLAN (CHIP)**



City of Laredo Community Health Improvement Plan (CHIP)

II. OVERVIEW

A. Defining and Utilizing a Community Health Improvement Plan

A Community Health Improvement Plan (CHIP) offers a vision for the community's health and an outline for organizations to utilize resources, engage partners, and identify their significance and tactics for community health improvement. The CHIP is developed and written in a manner that engages various outlooks so that all community groups and sectors, both private and nonprofit organizations, various government agencies, academic institutions, faith-based organizations, and community members can unite to improve the health and quality of life for all people who live, work, learn, and play in Laredo, TX.

A CHIP is designed to be a broad, strategic design for community health and is critical for developing and defining actions to target efforts that promote health. The CHIP is created and written in a way that engages multiple perspectives so that all community groups and sectors – private and nonprofit organizations, government agencies, academic institutions, community, and faith-based organizations, and citizens can unite to improve the health and quality of life for all the people who work, live, learn and play in the city of Laredo and its surrounding areas. The CHIP is typically updated every three to five years in correlation with the CHNA.

B. Approaches

After obtaining the essential findings and issues identified in the Community Health Needs Assessment (CHNA), the CHIP intentions are to:

- Identify priority issues to improve community health outcomes
- Develop and implement a plan with performance measures for evaluation
- Alleviate some of the ongoing health concerns within the community
- Guide future community decision-making related to community health improvement

Developing the Community Health Improvement Plan (CHIP) in Laredo is a continuous collaborative effort that drew upon crucial findings from the Community Health Needs Assessment and valuable input from community members. Following the guidelines set forth by the National Association of County and City Health Officials (NACCHO)⁷, the community health improvement process was thoughtfully designed to integrate and enhance the contributions of various organizations. By building upon existing assets, strengthening ongoing programs and initiatives, and strategically leveraging resources, the aim was to maximize efficiency and amplify the overall impact on community health.

⁷ Community Health Assessment and Improvement Planning. NACCHO. (n.d.-a).

C. Preparation for Community Health Improvement

In preparation for developing the Community Health Improvement Plan (CHIP), the City of Laredo Health Department proactively considered the valuable insights provided by the Social Determinants of Health (SDoH) framework module. The SDoH framework recognizes the critical influence of the conditions in which individuals are born, grow, live, work, and age on their overall health, well-being, and quality of life. It encompasses various environmental factors, including social, economic, educational, and cultural aspects, significantly impacting health outcomes and potential risks. By incorporating the SDoH framework, the CHIP aims to address the underlying root causes of health disparities and promote a more holistic and equitable approach to community health improvement.



Social Determinants of Health (SDoH) Framework

City of Laredo Public Health Department



“Social determinants of Health (SDoH) are the nonmedical factors that influence health outcomes. They are the conditions on which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.”

Centers for Disease Control and Prevention⁸

⁸ Centers for Disease Control and Prevention. (2022, December 8). Social Determinants of Health at CDC.

Social Determinants of Health (SDoH) ⁹

Utilizing the Social Determinants of Health (SDoH) framework as a baseline for our Community Health Improvement Plan is paramount. This framework conceptualized by the World Health Organization recognizes that health outcomes are influenced by a complex interplay of factors beyond just medical care, including:

- Education Access and Quality
- Health Care Access and Quality
- Economic Stability
- Neighborhood and Built Environment
- Social and community context

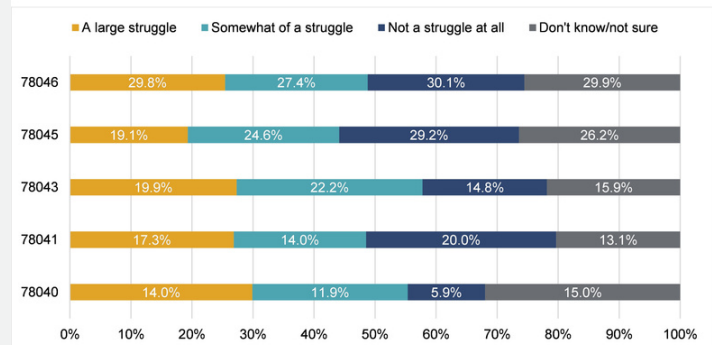
By centering the SDoH framework as a critical component of our work, we acknowledge that health improvement requires a comprehensive approach beyond treating symptoms and addressing the root causes of health disparities. This framework empowers us to identify and tackle the social and economic inequities that often underlie health disparities, ensuring that our effective and equitable improvement efforts lead to healthier and more resilient communities.



Economic Stability¹⁰- In the context of Laredo's economic landscape, it becomes evident that economic stability plays a crucial role in determining the health and well-being of its residents. Laredo's median household incomes exhibit variations based on household types, with households consisting of adults aged 65 and older and households with children experiencing the lowest median incomes.

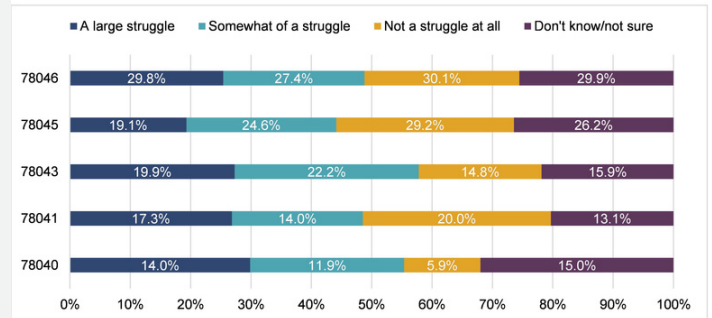
At the individual level, a staggering 22.2% of Laredo's population resides below the federal poverty level. This sobering statistic not only highlights the economic challenges faced by a significant portion of the city's residents but also underscores the profound impact of economic stability on their health outcomes. Moreover, when we consider residents who, while above the official poverty line, still earn less than what is required to cover the basic cost of living in Laredo, we encounter the concept of Asset-limited, Income Constrained, Employed (ALICE). While specific data for Laredo is unavailable, the Webb County situation provides valuable insights. In Webb County, a substantial 43.5% of total households fall under the ALICE category, indicating the prevalence of economic hardship among a significant portion of the population. Altogether, a staggering 59.0% of Laredo's residents find themselves below the ALICE threshold, struggling to meet basic living expenses. Among these, single female-headed families are the most vulnerable to economic instability in Webb County. These economic disparities are not just abstract figures; they have tangible consequences for the health and well-being of Laredo's community.

Respondents Indicating Housing Costs as Struggle, by ZIP Code (n=1,355)



Source: 2022-23 City of Laredo CHNA

Survey Respondents Indicating Monthly Housing Costs Are a Struggle (n=1,355)



Source: 2022-23 City of Laredo CHNA

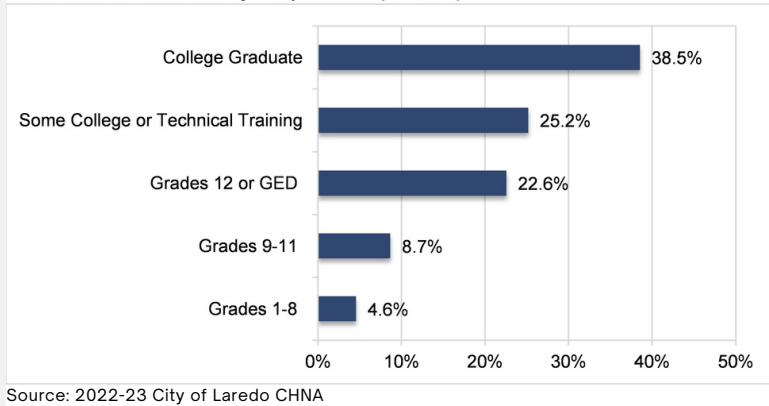
⁹ Social Determinants of Health. Social Determinants of Health - Healthy People 2030. (n.d.).

¹⁰ City of Laredo 2022-23 Community Health Needs Assessment , Pg 2

The quality of one's work environment, access to fair wages, and the ability to secure essential resources like nutritious food and safe housing are all closely linked to economic stability. In Laredo, where a substantial portion of the population faces economic challenges, these factors become critical determinants of health outcomes.

Education Access & Quality¹¹ - Within the social determinants of health framework, it becomes evident that access to quality education throughout one's life is essential in shaping overall well-being, even here in Laredo, Texas—those with consistent access to quality education experience better health outcomes than those without such access. Education provides individuals with opportunities for upward mobility, placing them in improved financial circumstances that facilitate access to quality healthcare, but it also equips them with the knowledge and awareness needed to take better care of their health.

Educational Level of Survey Respondents (n=1,339)



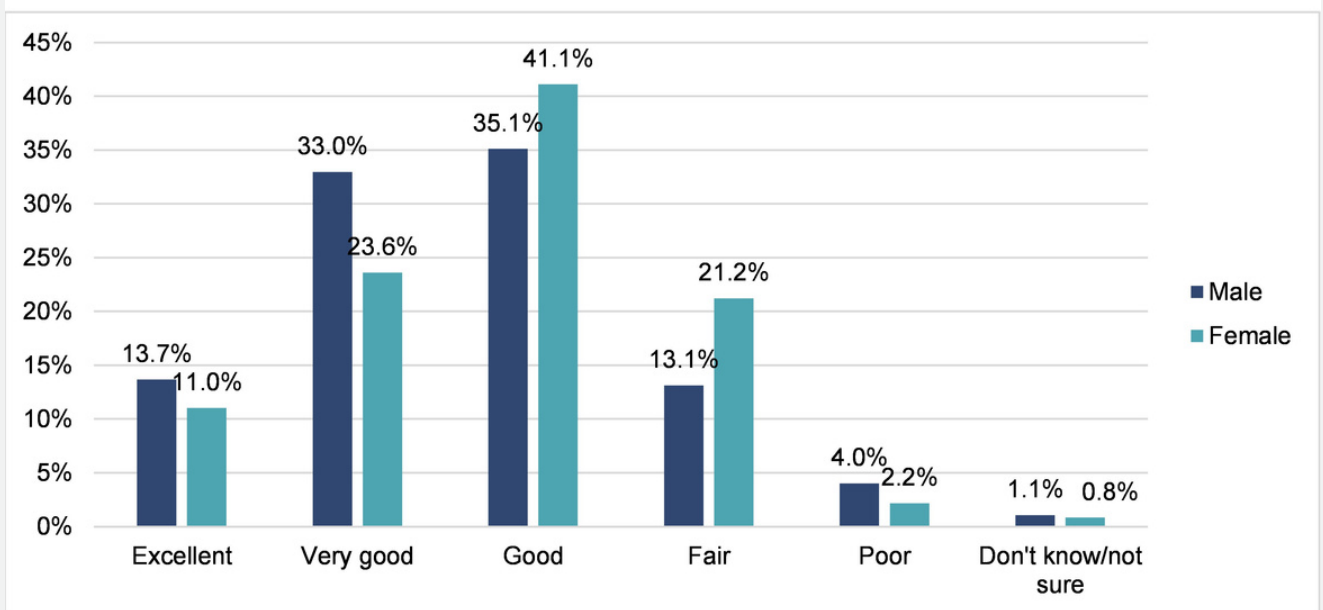
Source: 2022-23 City of Laredo CHNA

Furthermore, the link between education and income becomes apparent in our local context. Lower levels of education are often associated with lower income, which in turn is closely connected to poorer health outcomes. Education is a significant determinant of community health, and here in Laredo, it's noteworthy that 69.7% of individuals aged 25 years and older are high school graduates or hold higher educational qualifications. Additionally, a substantial 20.0% of the Laredo population possesses a bachelor's degree or higher, highlighting the presence of an educated segment of our community that contributes positively to our residents' overall health and well-being.

Healthcare Access and Quality¹² - In the context of the social determinants of health framework, several vital factors emerge from the 2022-23 CHNA on the impact of lack of access to healthcare services in Laredo:

- **Provider Migration and Shortage of Medical Residents:** A significant root cause identified by participants is the migration of overburdened healthcare providers to areas offering better opportunities with higher salaries. This trend can lead to a need for more healthcare professionals in Laredo. Additionally, the need for medical residents to become future providers exacerbates the shortage, potentially limiting the availability of primary and specialty care services.
- **Mental Health Service Needs:** Community members have emphasized Laredo's increasing need for mental health services. This underscores the importance of addressing mental health as a crucial aspect of healthcare accessibility within the community.
- **Comprehensive, Coordinated Care:** The community expressed the need for more extensive and coordinated healthcare services available in one place. This suggests that more cohesive healthcare systems may be needed to access necessary care.

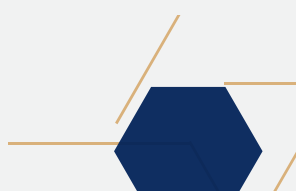
General Health Among Survey Respondents by Sex (n=1,334)



Source: 2022-23 City of Laredo CHNA

¹¹ City of Laredo 2022-23 Community Health Needs Assessment, Pg 37

¹² City of Laredo 2022-23 Community Health Needs Assessment , Pg 5-7

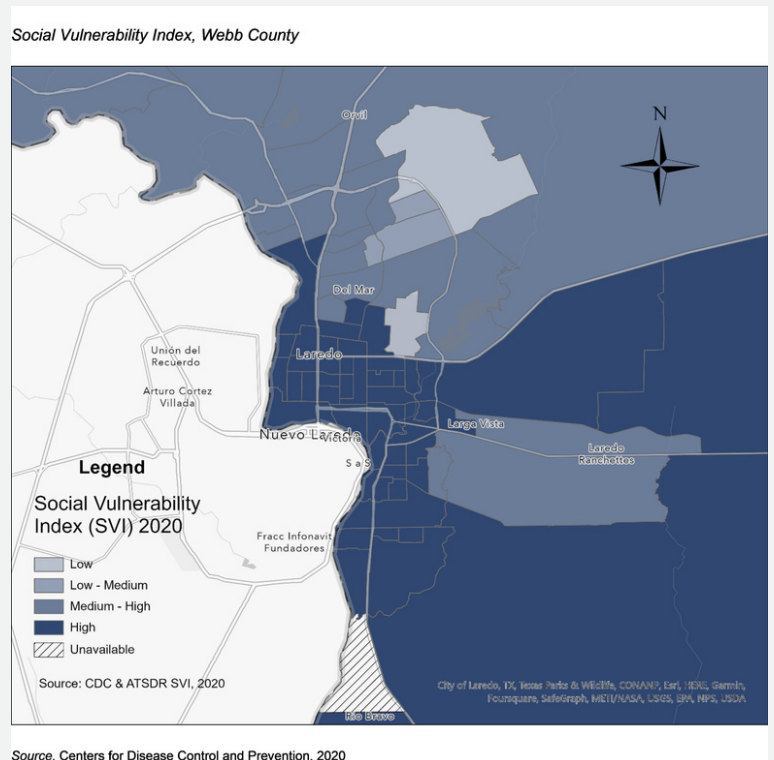


- **Personal Provider Access:** According to the community survey, while 56.6% of respondents indicated they had at least one person they consider their personal doctor or healthcare provider, disparities exist. Younger populations (ages 18-34) are less likely to have a personal provider compared to those over 55 years old, indicating potential generational differences in healthcare access.
- **Barriers to Care:** Nearly half (48.0%) of community survey respondents reported that they could receive medical care when needed, but a significant portion (31.6%) indicated that they could not afford the care. This highlights financial barriers as a substantial obstacle to accessing healthcare services.
- **Travel for Healthcare:** Over one-third (34.8%) of community survey respondents had to travel outside of Laredo within the past year to receive medical, dental, or health care for themselves. Additionally, many parents, guardians, or caregivers reported traveling outside Laredo to access healthcare for children in their care (32.8%). These findings indicate that some residents face geographic and logistical challenges in accessing necessary healthcare services locally.

Neighborhood and Built Environment¹³

Based on the CDC Social Vulnerability Index (SVI), The City of Laredo has an overall SVI of 0.7459, indicating a moderate to high vulnerability level. SVI is a composite measure that reflects various social factors affecting a community's resilience in the face of health challenges.

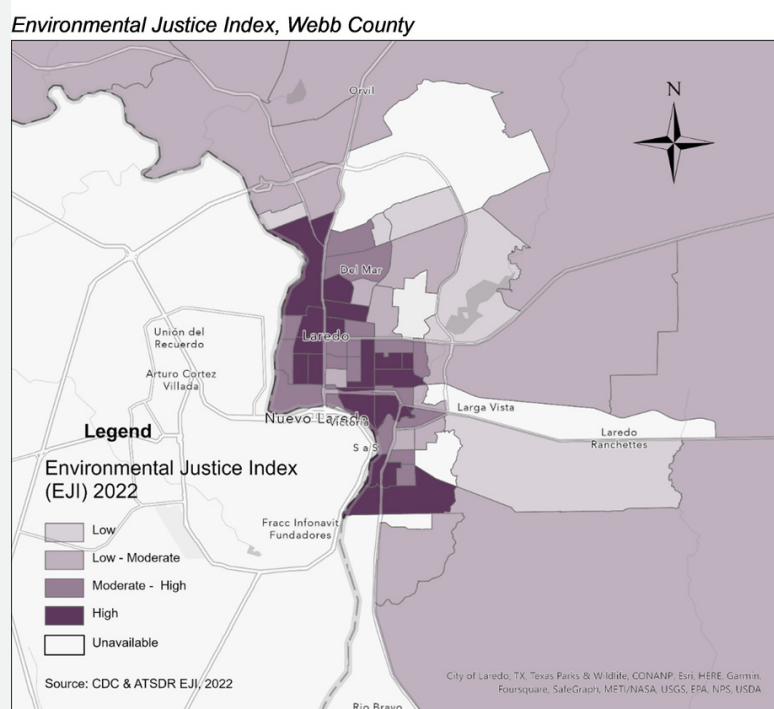
- **Geographic Variability:**
 - There is significant variability within Webb County, ranging from very high vulnerability (0.9360) in the northeast part of the county to lower exposure (0.3756) in the eastern region. This variation in SVI highlights the disparities in social determinants of health and vulnerabilities within different neighborhoods.
- **Neighborhood Conditions:**
 - The neighborhoods with higher SVI values may face a combination of challenges, such as lower income levels, limited access to healthcare facilities, inadequate housing, and educational disparities. These conditions can contribute to poorer health outcomes and reduced access to healthcare services.



Source: Centers for Disease Control and Prevention, 2020

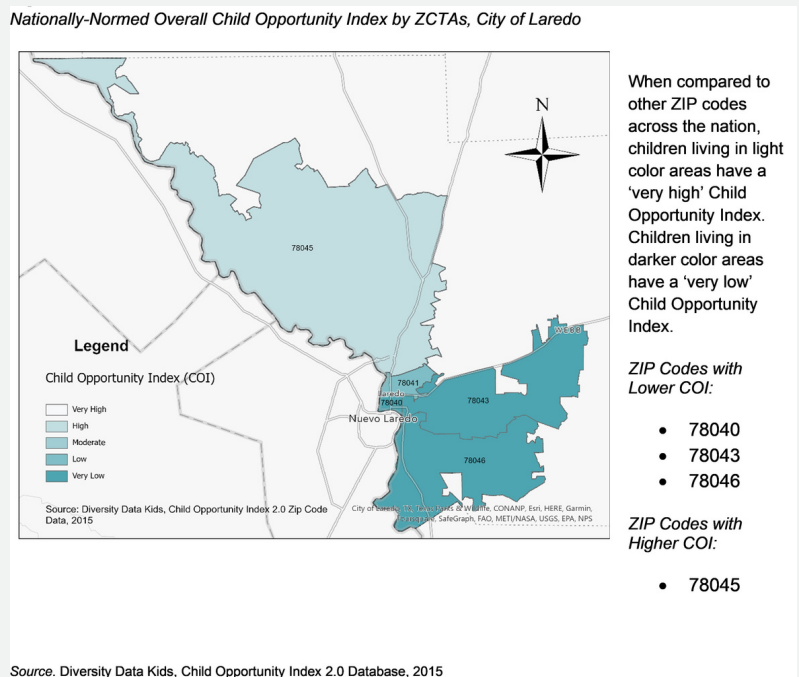
- **Built Environment:**
 - The built environment plays a critical role in the health of a community. Higher SVI areas may have limited access to safe and accessible parks, recreational facilities, and green spaces. This can impact physical activity levels and overall well-being.

Environmental Justice¹⁴: The Environmental Justice Index plays a crucial role in the lives of residents in Laredo, Texas, a city that experiences the disproportionate impact of environmental burdens. This index, as shown from the 2022-23 CHNA, assesses the distribution of environmental hazards and their social implications, aligning closely with the social determinants of health framework, particularly the built environment component. In Laredo, many communities are exposed to high levels of pollution, limited green spaces, and inadequate infrastructure; the Environmental Justice Index sheds light on the existing environmental inequities. These disparities in the built environment contribute to health disparities among residents, as they face increased risks of respiratory diseases and other health issues. Addressing these environmental injustices is essential to improving Laredo's population's overall health and well-being and achieving more equity in health outcomes.



¹³ City of Laredo 2022-23 Community Health Needs Assessment, Pg 40

¹⁴ City of Laredo 2022-23 Community Health Needs Assessment, Pg 41



Social and Community Context-¹⁵

The Child Opportunity Index (COI) has identified three ZIP codes in Laredo (78040, 78043, and 78046) as areas with lower opportunities for children. This index is a critical tool for understanding the social determinants of health, particularly within the context of child well-being. By measuring and mapping 29 neighborhood conditions essential for children's growth and thriving, such as access to healthy food, quality education, safe housing, and clean air, the COI provides insight into the disparities that impact children's health, education, and overall development. These disparities encompass various aspects of life, including education, health, environment, and socioeconomic indicators. Utilizing the Social Determinants of Health Framework is crucial in addressing the discrepancies in these neighborhoods, promoting the health and well-being of children in Laredo, and fostering more significant equity in health outcomes and life opportunities.

II. Prioritization of Health Issues

A. Identifying the Community's Health Priorities

To ensure the selection of crucial health priority areas in the City of Laredo, a thorough evaluation process was undertaken by community members and community leaders. The selection process involved considering three essential criteria, ensuring the most appropriate projects were chosen for implementation.

- The first criterion considered was **FEASIBILITY**. Members carefully assessed each potential project's feasibility, evaluating its likelihood of success and determining if the department could overcome any potential obstacles that may arise during implementation. By prioritizing projects with a higher chance of success, the city aimed to maximize the impact of its efforts and ensure the efficient utilization of resources.
- The second criterion considered was the **IMPACT** of the projects. We considered the input provided by the public and the prioritization recommendations from the Community Health Needs Assessment (CHNA). They analyzed which community projects would significantly affect the community's and its members' overall well-being. By prioritizing projects with a high potential for creating positive change and addressing the most pressing health needs, the city aimed to have a tangible and meaningful impact on the community's health outcomes. (CHNA). They analyzed which community projects would significantly affect the community's and its members' overall well-being. By prioritizing projects with a high potential for creating positive change and addressing the most pressing health needs, the city aimed to have a tangible and meaningful impact on the community's health outcomes.
- The third criterion focused on **SUITABILITY**, which was determined by evaluating the measure developed based on the 2022-23 CHNA evaluation results. Members assessed how the community members would benefit from each project included in the Community Health Improvement Plan (CHIP). The greater the potential benefit to the community, the more likely the project would be included in the plan. By considering the specific needs and interests of the community members, the city aimed to ensure that the selected projects aligned with the community's priorities and would provide the greatest value to its residents.

By applying these rigorous criteria, the City of Laredo aims to make informed decisions in selecting the most appropriate health priority areas for inclusion in its initiatives. This thorough evaluation process aimed to maximize the potential for success, create a significant and positive impact, and prioritize projects that would directly benefit the community members.

Recognizing the significance of these determinants is vital, as they play a pivotal role in shaping the overall health outcomes of individuals and communities. By addressing the impact of social determinants of health, the community health improvement plan aims to promote Health Equity, a fundamental approach to ensuring everyone has an equal opportunity to achieve their full potential without being disadvantaged. By including Health Equity as a lens, we can encapsulate the notion that everyone should have fair and equal access to resources and opportunities that contribute to their overall well-being. It acknowledges that factors beyond healthcare, such as income, education, housing, and social support, influence health outcomes. By addressing social determinants of health, the community health improvement plan aims to:

- Reduce these disparities.
- Create a level playing field.
- Provide everyone with an equitable chance to lead a healthy and fulfilling life.

B. Cross-Cutting Goal Strategies

Cross-cutting strategies are crucial in the Community Health Improvement Plan (CHIP) by serving as key focal points that transcend multiple priority areas. These strategies have been identified through a comprehensive evaluation of the Community Health Needs Assessment, highlighting their significance in promoting integration and synergy across various aspects of the plan.

The proposed cross-cutting goal strategies for the 2023 CHIP encompass a range of essential areas that are pivotal to achieving comprehensive community health improvement. These strategies include:

- Comprehensive Health Literacy Tools
- Health Workforce Development
- Cultural Competencies from Healthcare Agencies
- Cultural Competence
- Health Education
- Societal Norms and Stigma
- Health Literacy
- Curriculum Development

Priority Areas	Recommended Objective Topics	Cross-Cutting Goal Strategies to be addressed.
Access to and Affordability of Health Care	<ul style="list-style-type: none"> • Health Literacy • Community Health Workers • Lack of Cultural competencies 	<ul style="list-style-type: none"> • Comprehensive Health Literacy Tools • Health Workforce Development • Cultural Competencies from Healthcare Agencies
Health Outcome	<ul style="list-style-type: none"> • Primary and Secondary Prevention 	<ul style="list-style-type: none"> • Cultural Competencies • Education • Cultural Sensitivity
Behavioral Health	<ul style="list-style-type: none"> • Mental Health • Substance Use Disorder • Sexual Health 	<ul style="list-style-type: none"> • Society Norms and Stigma • Education • Curriculum Development

III. CHIP Implementation Plan

A. Goals, Objectives, and Strategies.

Community change stems from assessing current conditions, an optimistic framing of the desired future, and a precise evaluation of whether or not efforts are making a difference. The outcome indicators tell the story of where a community is about its vision, potential goals, objectives, and strategies.

The following pages outline the Goals, Objectives, Strategies, and Potential/ Resources for the priority areas outlined in the CHIP.





HEALTH PRIORITIES



Access to and Affordability of Healthcare

Texas Health Institute reports that a large population in Webb County has basic or below levels of health literacy.¹⁶ When asked about different barriers preventing access to healthcare, community members said that health literacy and lack of insurance are significant barriers for many residents in Laredo, especially those who are undocumented.¹⁷ Many also mentioned the need to understand how to access, seek, and receive care. Based on the CDC definition, Health Literacy is the degree to which individuals can find, understand, and use information and services to inform health-related decisions and actions for themselves and others. In addition, health literacy is recognized not only as an individual trait or risk factor for poorer health outcomes but also as an asset of characteristics related to families, communities, and organizations that provide health and social services.¹⁸ However, because of limited health literacy, many Laredo residents cannot comprehend health information.

Health Literacy

GOAL

Every City of Laredo resident has access to a range of comprehensive health literacy tools.

SMART Objectives

Objectives 1.1

Develop an in-person/ online portal within six months, offering comprehensive health resources navigation content in English and Spanish and tracking monthly engagement metrics.

Objectives 1.2

Host a bi-monthly community health workshop for a year, focusing on essential health literacy skills, and monitor attendance and participation.

Objectives 1.3

Within two months, distribute pamphlets and brochures on crucial health topics across clinics, libraries, and public spaces and gather feedback on their effectiveness.

Specifically, most ZCTAs 78041, 78043, and 78046 have between 50%-65% of the population with basic health literacy levels.¹⁹ In addition to a lack of health literacy, these challenges stem from limited access to transportation and a need for more competent community health workers, significantly impacting health outcomes.²⁰ This situation increases hospitalization rates and a higher reliance on emergency care and reduces the utilization of preventive health services.²¹ The lack of accessible transportation hinders individuals' ability to access medical appointments and interpret vital health messages and labels, leading to poorer health statuses and elevated mortality rates.²² These interconnected issues also contribute to the escalation of healthcare costs. Particularly concerning is the circumstance in Laredo, where nearly a quarter of the population (22.2%) lives below the federal poverty level.²³ For residents of Laredo, the combination of inadequate transportation options, lack of health literacy, and insufficiently skilled community health workers magnifies these challenges, ultimately becoming a public health concern that demands urgent attention.



¹⁶City of Laredo 2022-23 Community Health Needs Assessment, Pg 6-7

¹⁷City of Laredo 2022-23 Community Health Needs Assessment, Pg 119

¹⁸Centers for Disease Control and Prevention. (2023, July 11). What is health literacy?.CDC

¹⁹City of Laredo 2022-23 Community Health Needs Assessment, Pg 119

²⁰Johnson, L. J., Schopp, L. H., Waggle, F., & Frantz, J. M. (2022, January 12). mc/articles/PMC8831930/

²¹Social Determinants of Health Series: Transportation and the role of Hospitals: AHA. American Hospital Association. (n.d.-a).

²²Social Determinants of Health Series: Transportation and the role of Hospitals: AHA. American Hospital Association. (n.d.-a).

²³City of Laredo 2022-23 Community Health Needs Assessment, Pg 2

Cross-Cutting Strategies

- Incorporate a user-friendly interface into the existing health department website that includes a section for health literacy to enhance accessibility and engagement.
- Promote the portal through social media channels, community newsletters, and local events to raise awareness.
- Incorporate various formats such as articles, videos, infographics, and interactive tools to cater to different learning styles.
- Recruit knowledgeable healthcare professionals and educators to lead the workshops and provide accurate information.
- Develop engaging workshop materials, including presentations, interactive activities, and take-home resources.
- Utilize both online and offline platforms to promote the workshops, including social media, flyers, and local media coverage.
- Establish partnerships with clinics, libraries, community centers, and public spaces to ensure broad distribution.
- Design visually appealing materials that are easy to understand, incorporating clear language and visual aids.

Specifically, the majority of ZCTAs 78041, 78043 and 78046 have between 50%-65% of the population that have basic or below basic 50%-65% of the population that have basic or below basic levels of health literacy- CHNA

Long-Term Indicators

By 2025, achieve a community-wide health literacy proficiency rate of at least 50% among the City of Laredo residents, as measured by standardized literacy surveys administered during health literacy bi-monthly workshops, as measured by standardized literacy surveys administered during health literacy bi-monthly workshops.

Potential Community Partners

AHEC, UISD/LISD School Districts, Local churches, Laredo College, TAMIU, Laredo WIC Program, University of Texas Education and Research Center at Laredo

Community Health Workers

Enhance community health by creating a comprehensive employee training program for aspiring Community Health Workers (CHW).

GOAL 2

SMART Objectives

Objectives 2.1 Develop a comprehensive training program for employees interested in becoming CHWs, including health literacy, cultural competency, communication skills, and navigation of the healthcare system.



Key Performance Indicators

By 2025, establish a sustained and diverse pipeline of qualified Community Health Workers (CHWs) in the City of Laredo, with at least 90% of employees completing the comprehensive training program, gaining certification, and actively serving our community to improve public health outcomes.



Cross-Cutting Strategies

- Establish partnerships with local healthcare professionals, cultural organizations, and experienced CHWs to ensure training content aligns with real-world challenge
- Ensure that the skills and knowledge gained in the training program align with the roles and responsibilities of CHWs in the community.

Healthcare Professionals

Healthcare providers will take the pledge to commit to providing comprehensive communication in both English and Spanish.

GOAL 3

SMART Objectives

- Objectives 3.1** Within the first three months, create a bilingual communication pledge for healthcare providers and promote its adoption within the healthcare community.
- Objectives 3.2** Over the next 12 months, monitor and evaluate the implementation of the bilingual communication pledge among healthcare providers and assess its impact on patient care.
- Objectives 3.3** Within 6 months, actively encourage healthcare providers, including hospitals, clinics, and individual practitioners, to take the bilingual communication pledge.

Long-Term Indicators

By 2025, achieve a 100% participation rate among healthcare providers within the City of Laredo, signifying their commitment to bilingual communication as measured by the number of healthcare providers who have formally taken the pledge.

Cross-Cutting Strategies

- Develop a clear and concise bilingual communication pledge outlining the commitment to providing comprehensive communication in both English and Spanish.
- Provide resources and training to help healthcare providers implement bilingual communication practices effectively.
- Establish a system for healthcare providers to officially pledge their commitment and receive recognition for doing so.
- Gather feedback from patients and healthcare providers to assess the quality of bilingual communication and its impact on healthcare outcomes.

Grants Hub

Include a centralized grant hub in the health department website as a comprehensive resource for grant-related information and support.

GOAL 4



SMART Objectives

- Objectives 4.1** Design and launch the grant hub Section on the Health Department website.
- Objectives 4.2** Populate the grant hub with comprehensive grant resources.
- Objectives 4.3** Promote the grant hub and encourage utilization.

Cross-Cutting Strategies

- Involve key stakeholders, including health department staff, community organizations, grant writers, and potential grant applicants, in designing, developing, and promoting the grant hub.
- Consider the diverse needs and backgrounds of the community members and provide content in both English and Spanish, where relevant.
- Establish a content review and quality control process to ensure that the information provided in the hub is accurate, up-to-date, and relevant.
- Develop a comprehensive marketing and outreach plan to raise awareness about the grant hub and its benefits.

Key Performance Indicators

By 2025, achieve a surge in health department website traffic to the newly established grant hub as measured by the number of visitors.

Health Outcomes



Chronic diseases in Laredo, Texas, range from heart disease, obesity, diabetes, cancer, and hypertension. These diseases have been the leading causes of death and disability in high-income countries for quite some time.²⁴ Globally, a staggering 70% of deaths are attributed to chronic diseases, with the United States witnessing an even higher proportion, at more than 87%.²⁵ This fact is even more staggering when we consider the plight of medically underserved areas across America, which present a distinct and formidable challenge for individuals struggling with these diseases. This challenge emerges from the stark scarcity of health providers and essential services within these communities. In particular, Webb County is designated as a Medically Underserved Area with a score of 54.3; it contrasts with the national average index score of 62.0.²⁶

The Centers for Disease Control and Prevention (CDC) underlines that modifiable risk factors, including lack of physical exercise and poor nutrition, significantly contribute to the onset of chronic diseases. Given this, the potential for avoiding or preventing a substantial portion of illnesses, suffering, and premature deaths becomes evident.²⁷

With the lack of primary care and specialty providers in Laredo, the promotion of prevention and healthy lifestyles emerges as the most viable approach for mitigating the impact of these modifiable risk factors. In the face of these challenges, a holistic strategy must be employed. Empowering individuals with education, fostering collaborations among healthcare entities, leveraging technology, and cultivating community-driven initiatives become essential steps toward effecting positive change. The goal of effective chronic disease management in underserved areas like Webb County can be achieved by working collectively to enhance access, raise awareness, and encourage healthier choices.



²⁴ Centers for Disease Control and Prevention. (2022a, July 21). About chronic diseases. Centers for Disease Control and Prevention.

²⁵ Holman, H. R. (2020, March). The relation of the chronic disease epidemic to the Health Care Crisis. ACR open rheumatology.

²⁶ City of Laredo 2022-23 Community Health Needs Assessment, Pg 116

²⁷ Centers for Disease Control and Prevention. (2022b, September 8). Chronic disease fact sheet: Physical inactivity. Centers for Disease Control and Prevention.

Chronic Health Management

Improve the management of chronic disease in the City of Laredo by enhancing access to quality healthcare services and implementing targeted preventive measures.

GOAL

SMART Objectives

- Objectives 1.1** Provide comprehensive health education programs to raise awareness about chronic diseases, their risk factors, and the importance of early intervention and management.
- Objectives 1.2** Establish community-based screening initiatives to identify individuals at risk of chronic diseases at an early stage, enabling timely interventions.
- Objectives 1.3** Encourage and support healthier lifestyle choices through public campaigns, workshops, and community engagement to prevent the onset of chronic diseases.
- Objectives 1.4** Foster collaboration between local organizations tackling the issue of chronic illnesses.

Cross-Cutting Strategies

- **Educational Workshop:** Organize regular educational events to inform residents about the risks of chronic diseases, preventive measures, and management techniques. Collaborate with local schools, community centers, and religious institutions to reach a wider audience.
- **Healthy Lifestyle Campaign:** Launch social media campaigns promoting healthy eating, regular physical activity, and stress management
- **Promote using the transit system, trails, and parks to encourage physical activity.**

Key Performance Indicators

By 2025, achieve a reduction in the overall prevalence of chronic disease in the City of Laredo residents, as measured by comprehensive health assessment.

Potential Community Partners

Doctor's Hospital, Laredo Medical Center, Gateway Community Clinic, Mercy Ministries of Laredo, Nuestra Salud Health Clinic

Community-Based Intervention

GOAL 2

Enhance the impact of our existing community-based intervention programs on chronic health issues in the City of Laredo.

SMART Objectives

- Objectives 2.1** Enhance the effectiveness of our current intervention programs by incorporating evidence-based practices and culturally relevant strategies, increasing positive health outcomes among participants.
- Objectives 2.2** Forge strategic partnerships with local healthcare providers, community organizations, and other stakeholders to increase the support network for participants in our intervention programs.



Potential Community Partners

Buena Vida Program, Healthy Living Program, etc

Key Performance Indicators

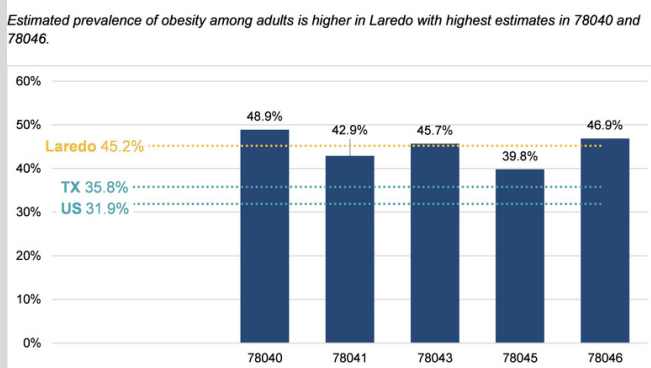
By 2025, achieve an improvement in the overall health and well-being of participants enrolled in various community-based intervention programs, as measured by a comprehensive assessment of health indicators, including lower blood pressure and overall improved quality of life.

Cross-Cutting Strategies

- **Develop personalized outreach campaigns and educational materials that are culturally sensitive and linguistically appropriate to resonate with the diverse population of Laredo.**
- **Implement a robust data collection and analysis system to monitor program outcomes and participant feedback continuously.**

Nutrition (Sub-Priority)

Nutrition is undeniably central to the health and well-being of Laredo’s residents, with its impact extending far beyond mere dietary choices. The lack of nutritional access in this community is a critical issue mentioned in the 2017 City of Laredo Comprehensive Plan, yet it persists.²⁸ According to data from the 2022-23 CHNA, Laredo faces significant challenges related to obesity. The CHNA reports that a staggering 45.2% of adults are obese, significantly higher than the national average of 31.9%.²⁹ Additionally, the CHNA reports that Hispanic/Latino populations have higher rates of diabetes, hypertension, heart disease, and obesity, possibly due to the lack of physical activity and poor nutrition, which may be a cause of culturally learned behaviors.³⁰



Source: CDC Behavioral Risk Factor Surveillance System (BRFSS), Local Data for Better Health, ZCTA 2022 Release (2020 data)

In addition, addressing the lack of nutritional access in Laredo is a pressing concern, backed by data from the 2022-23 CHNA that highlights the city's nutrition-related health challenges. By implementing the outlined goals, objectives, and strategies, Laredo can take significant strides toward improving the health and well-being of its residents, reducing obesity rates, and mitigating the prevalence of diet-related diseases. These efforts align with the CDC's recommendations and are crucial for fostering healthier lifestyles and reducing health disparities in the community.³¹

Increase Access to Quality Food Sources

SMART Objectives

- Objectives 2.1** → Encourage and support small-scale food producers, as well as home and community gardens, to increase the availability of local, fresh food.
- Objectives 2.2** → Collaborate with local transit providers to facilitate transportation to grocery stores for low-income residents, incentivizing the use of public transit.
- Objectives 2.2** → Encourage farmers' markets and healthy food retailers to accept federal nutrition programs like WIC and SNAP, enhancing affordability and accessibility of nutritious options.

GOAL 1

Key Performance Indicators

By 2025, achieve a significant reduction in the prevalence of food deserts in target communities, as measured by a comprehensive assessment of improved food access metrics, including increased proximity to grocery stores, farmers' markets, and acceptance of federal nutrition programs.

Potential Community Partners

South Texas Food Bank, Laredo Food Policy Council, Laredo Main Street Farmers Market, Laredo Regional Food Bank, and El Metro

Cross-Cutting Strategies

- Conduct thorough community food assessments to identify food deserts and prioritize interventions in areas with limited access to fresh, healthful food.
- Encourage the creation of community gardens on both public and private lands, promoting self-sufficiency and fostering community development.
- Consider revising zoning regulations to permit community garden activities in public parks, enhancing access to quality food sources while fostering community engagement and education.

²⁸ City of Laredo 2022-23 Community Health Needs Assessment, Pg 37

²⁹ City of Laredo 2022-23 Community Health Needs Assessment, Pg 37

³⁰ City of Laredo 2022-23 Community Health Needs Assessment, Pg 37

³¹ City of Laredo 2022-23 Community Health Needs Assessment, Pg 37



Behavioral Health



Consistency prevails across various assessment and community feedback platforms when addressing the pressing behavioral health issue in the City of Laredo. The concerns revolve around the critical need for improved access to a more integrated and coordinated behavioral health system. This resonates deeply with the 2022-23 Community Health Needs Assessment (CHNA) findings. It becomes evident that a cohesive and responsive approach to behavioral health services is imperative to meet the diverse and evolving needs of the community.

These consistent concerns underscore the urgency of not only identifying the gaps in the current system but also taking concrete steps towards establishing a more comprehensive and accessible behavioral health infrastructure in Laredo, thereby promoting the well-being and mental health, sexual health, and Substance Use Disorder recovery of its residents. In addition, through comprehensive and dedicated research initiatives, we will continue to closely examine rising factors with age, such as Alzheimer's and dementia, that might be inhibiting the lives of older adults in Laredo. A central focus will be on investigating the complex web of aging-related conditions, with particular emphasis on physical activity and diet, alcohol consumption, tobacco usage, and disease screening, which have garnered significant attention due to their strong influence on the overall well-being of older individuals. This initiative, driven by the pursuit of enhancing the livelihood of senior citizens, seeks to shed light on the multifaceted dynamics at play and aims to create data-driven and tailored strategies to improve and address the quality of life of older people.

Substance Use Disorder

Overdose deaths persist as a prominent contributor to injury-related fatalities within the United States. Drawing upon the data from the National Survey on Drug Use and Health, 2021 witnessed a high figure of 161.8 million individuals aged 12 or above engaging in tobacco, alcohol, or illicit substances over the preceding month.³² This encompassed a spectrum of behaviors, with 133.1 million people (47.5%) consuming alcohol, 54.7 million individuals (19.5%) resorting to tobacco products, and 40 million people (14.3%) experimenting with illicit drugs.³³ An emerging pattern within illegal drug use is the alarming combination of xylazine and fentanyl, illicitly dispensed, resulting in adverse health implications, including fatal overdoses and severe morbidity.³⁴ A comprehensive Drug Enforcement Administration (DEA) report underscores this trend. Between 2020 and 2021, there was a remarkable surge in forensic identifications of xylazine across all four U.S. census regions.³⁵

Disturbingly, overdose fatalities linked to xylazine exposure escalated by an astonishing 1,127% in the southern region, compared to a 100% surge in the northeastern counterpart.³⁶ This increasing trajectory of fatalities due to illicit drug poisoning is consistent with the observations the Texas Department of State Health Services (DSHS) documented. The course displays an astonishing rise of 97.08% between 2021 and 2022.³⁷ Astonishingly, even the initial half of 2023 has witnessed a high surge of 94.24% in reports of deaths stemming from illicit drug poisoning. In the City of Laredo, illegal drug poisoning-related death remains consistent with state and national data, leaving the city with an escalating count of drug-related overdose incidents. The year 2023 has already recorded a disheartening number of 42 reported deaths, compared with the 41 fatalities documented in 2022.³⁸



³² City of Laredo 2022-23 Community Health Needs Assessment, Pg 37

³³ Substance use in the past month tobacco product use or Samhsa. (n.d.-a). <https://www.samhsa.gov/data/sites/default/files/2022-12>

³⁴ The growing threat of xylazine and its mixture with illicit drugs - dea.gov (2022, December, 21)

³⁵ The growing threat of xylazine and its mixture with illicit drugs - dea.gov (2022, December 21)

³⁶ The growing threat of xylazine and its mixture with illicit drugs - dea.gov (2022, December 21)

³⁷ <https://healthdata.dshs.texas.gov/dashboard/drugs-and-alcohol/fentanyl-trends>

³⁸ City of Laredo Police Department, 2023

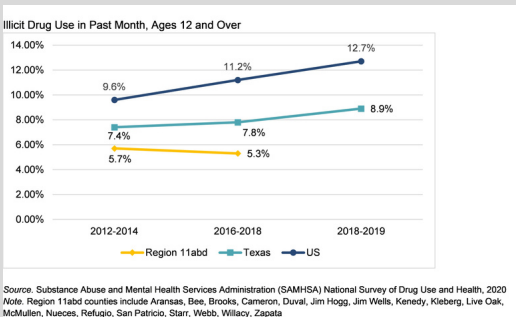
Substance Use Disorder



Enhance the City of Laredo's well-being by increasing access to Recovery centers and creating a strong response team for overdose incidents.

GOAL

SMART Objectives



Objectives 1.1

Collaborate with local healthcare facilities and organizations to streamline the referral process, ensuring seamless transitions for individuals seeking help from emergency response to recovery centers.

Objectives 1.2

Develop a comprehensive communication plan to ensure that residents of the City of Laredo know the resources available at the recovery centers and how to access the rapid response team in case of overdose incidents.

Cross-Cutting Strategies

- Partner with community organizations, law enforcement agencies, healthcare providers, and local businesses to collectively address Substance Use Disorder issues and provide a comprehensive support network.
- Establish youth engagement programs that provide constructive activities, mentorship, and opportunities for personal growth.
- Expand access to recovery centers and treatment facilities to provide individuals struggling with Substance Use Disorder a safe and supportive environment to seek help and rehabilitation.

Potential Community Partners

Potential Community Partners: UISD/LISD School Districts, SCAN, Community Health Centers, Bethany House of Laredo, PILLAR, ROOTS Detox Center

Key Performance Indicators

By 2025, achieve a 20% reduction in overdose-related emergency medical calls and hospital admissions within the City of Laredo.

Mental Health

Mental health is currently seeing a staggering trend in increase. It was estimated in 2021 that more than one in five U.S. adults live with mental illness.³⁹ The National Institute of Mental Health divides mental health into Any Mental Health and Serious Mental Health.⁴⁰ Mental illness is a mental, behavioral, or emotional disorder. Mental illness can surface in different ways, ranging from mild impairment to mild, moderate, and even severe. Serious Mental Illness results in severe functional impairment, substantially interfering with or limiting one or more major life activities. According to Data from the Substance Use Disorder and Mental Health Services Administration (SAMHSA), most Americans suffer from AMI, and its effect was exacerbated by the COVID-19 pandemic, with many adults reporting symptoms consistent with anxiety and depression.⁴¹



In addition, approximately four in ten adults reported these mental illness symptoms by early 2021 before declining to about three in ten adults as the pandemic continued.⁴²

This number is consistent with the City of Laredo, with nearly one-fifth (19.8%) of community survey respondents indicating they had been told by a doctor or health for the City of Laredo 2022-23 Community Health Needs Assessment that they have a mental health condition.⁴³ In addition, the estimated prevalence of depression in Laredo is 20.2%. The estimated occurrence of frequent mental distress in Laredo is 16.2%.⁴⁴

GOAL

Expand community access to mental health programs for individuals with serious mental illness within the city of Laredo by implementing The Laredo Assisted Outpatient Treatment (AOT) Program

SMART Objectives

Objectives 1.1

Increase enrollment in The Laredo Assisted Outpatient Treatment (AOT) Program by 20% within the next year, ensuring that individuals with serious mental illness have improved access to structured treatment and support.

Objectives 1.2

Collaborate with local mental health service providers, clinics, and community organizations to establish satellite AOT program centers in different areas of the city, enhancing convenience and accessibility for eligible individuals.

Objectives 1.3

Launch a public awareness campaign about The Laredo AOT Program through targeted outreach efforts, educational seminars, and collaborations with community leaders to reduce the stigma surrounding mental health and promote program participation.

Cross-Cutting Strategies

- Provide clear and comprehensive information about the benefits of the AOT program through informational brochures, websites, and community presentations.
- Collaborate with local mental health clinics and professionals to identify potential program candidates and refer them to the AOT program.
- Organize community workshops and seminars that focus on mental health awareness, the benefits of AOT, and how individuals can support their loved ones in seeking treatment.

Potential Community Partners

Potential Community Partners: Border Region, 111th Mental Health Court, Webb County Detention, Laredo Police Department, Laredo Fire Department EMT Services

Key Performance Indicators

By 2025 achieve a 25% increase in the enrollment and participation rate of individuals with serious mental illness (SMI) in the Laredo Assisted Outpatient Treatment (AOT) Program within the first year of its implementation.

³⁹ National Institute of Mental Health, U.S. Department of Health and Human Services (2023, March)

⁴⁰ National Institute of Mental Health, U.S. Department of Health and Human Services (2023, March)

⁴¹ Nirmita Panchal, H. S., & 2023, M. (2023, April 25). The implications of COVID-19 for mental health and substance use. KFF

⁴² Nirmita Panchal, H. S., & 2023, M. (2023, April 25). The implications of COVID-19 for mental health and substance use. KFF

⁴³ City of Laredo 2022-23 Community Health Needs Assessment, Pg 3

⁴⁴ City of Laredo 2022-23 Community Health Needs Assessment, Pg 4

Sexual Health

The U.S. teen birth rate (births per 1,000 females from ages 15 to 19 years) has consistently declined over the years, showcasing a positive trend in terms of sexual health awareness and access to contraceptives.⁴⁵ From 17.4 births per 1,000 females in 2018, the rate decreased to 16.7 per 1,000 females in 2019.⁴⁶ This reduction can be attributed to various factors, including increased sex education programs, improved availability of contraception methods, and a growing emphasis on responsible sexual behavior among teenagers. However, despite this nationwide decline in teen birth rates, certain regions continue to grapple with higher teen pregnancy rates, as seen in Webb County, Texas. In 2019, the teen pregnancy rate in Webb County stood at 39.0 births per 1,000 females aged 15 to 19, significantly higher than the statewide and national averages of 22.4 and 14.4, respectively. This disproportionality in rates underscores the importance of addressing localized factors contributing to elevated teen pregnancy rates.⁴⁷

Various socio-economic, cultural, and educational factors could influence the high teen pregnancy rate in Webb County. Limited access to comprehensive sex education, restricted availability of reproductive health services, and cultural attitudes toward discussions of sexual health may all contribute to these higher rates. Additionally, disparities in healthcare access, income levels, and educational opportunities can play a role in exacerbating the issue.

Reduce the teen pregnancy rate in Webb County, Texas, to levels closer to the statewide and national averages by addressing socio-economic, cultural, and educational factors contributing to higher rates

GOAL

SMART Objectives

Objectives 1.1

Enhance Strengthen the delivery and impact of Comprehensive Sex Education (CSE) programs in schools and local community centers, including the health department.

Objectives 1.2

Increase Access to Reproductive Health Services



Cross-Cutting Strategies

- Collaborate with local high schools to implement evidence-based, comprehensive sex education programs covering contraception, healthy relationships, and communication.
- Create youth-friendly spaces within the healthcare department that offer a comfortable environment for teenagers seeking reproductive health information and services.
- Amplify current reproductive health clinics through social media campaigning to provide access to contraception and family planning services.

Potential Community Partners

Potential Community Partners: UISD/LISD School Districts, PILLAR, Vital Med, TAMIU, Vital Med,

Key Performance Indicator

Achieve a 20% reduction in the teen pregnancy rate in Webb County within a three-year period, bringing it closer to the statewide and national averages.



⁴⁵ Centers for Disease Control and Prevention. (2021, November 15). About teen pregnancy. Centers for Disease Control and Prevention

⁴⁶ Centers for Disease Control and Prevention. (2021, November 15). About teen pregnancy. Centers for Disease Control and Prevention

⁴⁷ NCHS, National Vital Statistics System, Natality (2019)

IV. Next Plan

The components presented in this report signify the foundation of a comprehensive and data-driven Community Health Improvement Plan (CHIP) deeply rooted in community engagement. The City of Laredo Community Health team's collaborative efforts and input from community residents have laid the groundwork for this plan. Moving forward, the focus will be refining and enhancing the next phase of the planning process by incorporating the following improvements:

1. Comprehensive Prioritization

- During the evaluation process of the CHIP, a comprehensive Cost-Effectiveness Analysis will be conducted that includes available quantitative data and qualitative data analysis, community input, and a thorough review of evidence-based practices. With this approach, we can identify and select priority areas based on their potential impact, feasibility, and alignment with community needs and aspirations, creating a tailored approach that resonates with the local context.

2. Inclusive Stakeholder Engagement:

- We aim to broaden the scope of community engagement efforts by reaching out to diverse stakeholders, including community-based organizations, faith-based groups, schools, private businesses, and priority populations. This will be done by implementing a variety of engagement methods that include:
 - Online survey.
 - Focus group.
 - Community workshop.

3. SMART Goal Development:

- SMART Goal framework will be utilized as a metric to enhance accountability and measurability to ensure that objectives are Specific, Measurable, Achievable, Relevant, and Time-bound. This approach will facilitate effective progress tracking, enable benchmarking, and support regular evaluation to assess the success of interventions and strategies.

V. Sustainability:

The sustainability of the Community Health Improvement Plan (CHIP) is essential to ensure that its impact extends beyond the initial implementation phase. By developing a comprehensive sustainability plan, the City of Laredo Community Health team and community residents can ensure that the positive changes achieved through the CHIP are long-lasting and continue to benefit the community for years to come. This plan outlines key strategies and considerations to support the CHIP's ongoing success and sustainability.

1. Community Engagement:

- Community residents will be encouraged to take an active role in shaping and implementing the CHIP. This can be achieved by providing training assistance on program management, evaluation, and community engagement to empower community members to drive the change they want to see, foster a sense of ownership, and ensure the plan's sustainability.

2. Collaboration and Partnerships:

- The CHIP requires ongoing collaboration and partnerships with key stakeholders, including local government agencies, community organizations, healthcare providers, educational institutions, and businesses. By fostering these partnerships, the plan can leverage diverse resources, share responsibilities, and build a collective commitment to community health improvement. Regular communication, coordination, and collaboration with partners will be crucial to maintain momentum and ensure continued support for the CHIP.

3. Continuous Evaluation and Improvement:

- Regular evaluation and monitoring of the CHIP's progress will be implemented to assess the effectiveness of strategies and interventions. Data collection, analysis, and feedback from community residents will inform ongoing improvements and adjustments to the plan. By utilizing feedback loops, engaging in quality improvement efforts, and incorporating lessons learned, the program can adapt to emerging needs and evolving community dynamics, ensuring its continued relevance and effectiveness.

4. Policy Advocacy and Systems Change:

- Policy advocacy and systems change in sustaining the impact of the CHIP will be integrated into the plan and engaging with policymakers and local government agencies to advocate for supportive policies, regulations, and funding mechanisms that align with the goals of the CHIP.



APPENDICES

Appendix A

Definition of terms

Community Health Needs Assessment (CHNA)- A state, tribal, local, or territorial health assessment that identifies critical health needs and issues through organized, complete data collection and analysis.⁴⁸

Texas Health Institute (THI)- A nonprofit, non-partisan public health institute with the mission of advancing the health of all. Since 1964, they have served as a trusted, leading voice on public health and healthcare issues in Texas and the nation.⁴⁹

Public Health Accreditation Board (PHAB)- Accredits public health departments to strengthen public health infrastructure and transform governmental public health.⁵⁰

Health Equity- The fulfillment of the highest level of health for all people, where everyone has a fair and just opportunity to attain their optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, or other factors that affect access to care and health outcomes.⁵¹

MAPP (Mobilizing for Action through Planning and Partnerships)- Provides the framework for arranging the variety of organizations, groups, and individuals that include the local public health system to create and implement health equity.⁵²

National Association of County and City Health Officials (NACCHO) - An organization that serves to improve the health of communities by strengthening and advocating for local health departments.⁵³

Social Determinants of Health (SDoH)- The conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.⁵⁴

Asset-limited, Income Constrained, and Employed (ALICE)- This represents the growing number of families who cannot afford the basics of housing, childcare, food, transportation, health care, and technology.⁵⁵

Environmental Justice Index- The first national, place-based tool designed to measure the increasing impacts of environmental burden through the lens of human health and health equity.⁵⁶

Social Vulnerability Index (SVI)- This index incorporates 15 social factors from four main types of variables (socioeconomic status, household composition, race/ethnicity/language, and housing/transportation) to create a vulnerability score between 0 (least vulnerable) and 1 (most susceptible).⁵⁷

The Child Opportunity Index (COI)- A merged index measured at the census tract level that captures neighborhood resources and conditions that matter for children's healthy development in a single metric. The index focuses on current features of neighborhoods that are affecting children.⁵⁸

Centers for Disease Control and Prevention (CDC) - The nation's leading science-based, data-driven service organization that protects the public's health.⁵⁹

Health Literacy- The degree to which individuals can find, understand, and use information and services to inform health-related decisions and actions for themselves and others.⁶⁰

Diversity- The range of human differences, including but not limited to race, ethnicity, gender, gender identity, sexual orientation, age, social class, physical ability, religious or ethical values, national origin, and political beliefs.⁶¹

⁴⁸ Centers for Disease Control and Prevention. (2022, November 25). CDC

⁴⁹ Texas Health Institute. LinkedIn. (n.d.). <https://www.linkedin.com/company/texas-health-institute>

⁵⁰ Home. Public Health Accreditation Board. (2023, September 19). <https://phaboard.org/>

⁵¹ Health equity. CMS.gov. (n.d.). <https://www.cms.gov/pillar/health-equity>

⁵² www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/mapp

⁵³ <https://health.gov/news/202012/national-association-county-and-city-health-officials-helping-local-public-health-agencies-use-healthy-people>

⁵⁴ <https://health.gov/healthypeople/priority-areas/social-determinants-health>

⁵⁵ <https://www.unitedforalice.org/>

⁵⁶ Media, A. (2023, January 6). Environmental justice index. HHS.gov.

⁵⁷ <https://www.hhs.gov/climate-change-health-equity-environmental-justice/environmental-justice/index/index.html>

⁵⁸ <https://data.diversitydatakids.org/dataset/coi20-child-opportunity-index-2-0-database>

⁵⁹ <https://www.cdc.gov/about/index.html>

⁶⁰ <https://health.gov/healthypeople/priority-areas/health-literacy-healthy-people-2030/history-health-literacy-definitions>

⁶¹ Diversity and inclusion definitions. Ferris State University. (n.d.). <https://www.ferris.edu/administration/president/DiversityOffice/Definitions.html>

World Health Organization [WHO]- Founded in 1948, the World Health Organization (WHO) is the United Nations agency dedicated to global health and safety. The organization connects nations, partners, and communities to promote health and serve the vulnerable.⁶²

Medically Underserved Area- A shortage of primary health care services for residents within a geographic area⁶³

Food Insecurity- A need for consistent access to enough food for every person in a household to live an active, healthy life.⁶⁴

Health Disparity - Avoidable differences in the burden, disease, injury, violence, or opportunities to achieve ideal health experienced by socially disadvantaged racial, ethnic, and other populations and communities.⁶⁵

SMART (specific, measurable, achievable, relevant, and time-bound)- Objectives allow the project to move forward, help with accountability and timing, and let you know that you are accomplishing what you set out to accomplish.⁶⁶

Substance Abuse and Mental Health Services Administration (SAMHSA)- Established in 1992 to make substance use and mental disorder information, services, and research more accessible.⁶⁷

Department of State Health Services (DSHS)- An organization developed to promote and protect people's health and the communities where they live, learn, work, worship, and play.⁶⁸

Acronyms

AHEC- Area Health Education Center
ALICE- Asset-limited, Income Constrained, and Employed
AMI- Any Mental Illness
AOT- Assisted Outpatient Treatment
BRBHC- Border Region Behavioral Health Center
CDC- Centers for Disease Control and Prevention
CHNA- Community Health Needs Assessment
CHWs- Community Health Workers
CLHD- City of Laredo Health Department
COI- Child Opportunity Index
DEA- Drug Enforcement Administration
DHL- Doctors Hospital of Laredo
DHP- Driscoll Health Plan
DSHS- Department of State Health Services
EJI- Environmental Justice Index
EMT- Emergency Medical Technicians
LSH- Laredo Specialty Hospital
MAPP- Mobilizing for Action through Planning and Partnerships
MUA- Medically Underserved Area
NACHO- National Association of County and City Health Officials
PHAB- Public Health Accreditation Board
SAMHSA- Substance Abuse and Mental Health Services Administration
SDoH- Social Determinants of Health
SMART- Specific, Measurable, Achievable, Relevant. and Time-Bound
SMI- Serious Mental Illness
SVI- Social Vulnerability Index
TAMU- Texas A&M International University
THI- Texas Health Institute
WHO- World Health Organization
ZCTAs- Zip Code Tabulation Areas

⁶² World Health Organization. (n.d.-a). About who. World Health Organization. <https://www.who.int/about/>

⁶³ What is shortage designation?. What Is Shortage Designation? | Bureau of Health Workforce. (n.d.). <https://bhw.hrsa.gov/workforce-shortage-areas/shortage-designation>

⁶⁴ Hunger and food insecurity. Feeding America. (n.d.). <https://www.feedingamerica.org/hunger-in-america/food-insecurity>

⁶⁵ Centers for Disease Control and Prevention. (2017, January 31). Health disparities. Centers for Disease Control and Prevention. <https://www.cdc.gov/aging/disparities/index.htm>

⁶⁶ Setting goals and developing specific, measurable, achievable ... - samhsa. (n.d.-a). <https://www.samhsa.gov/sites/default/files/nc-smart-goals-fact-sheet.pdf>

⁶⁷ About Us. SAMHSA. (n.d.). <https://www.samhsa.gov/about-us>

⁶⁸ What is public health? (n.d.). <https://www.apha.gov/what-is-public-health>

Appendix B

Collaborative Contributors

CHIP COMMUNITY CONTRIBUTORS

We want to acknowledge every individual and member of our partnering organizations for their dedication of time and sharing of their expertise/insight. Your unwavering commitment and willingness to collaborate have played a pivotal role in our collective achievements, and we are deeply grateful for the invaluable contributions you have made toward our shared goal of creating a comprehensive community health improvement plan. Through your expertise and insights, we have identified critical areas for improvement, set clear objectives, and developed actionable strategies to bring about positive change in our community. Your contributions have enriched the plan and fostered a sense of unity and purpose within our community. As we implement this plan into actionable realities, we recognize that your continued support and engagement will be essential. We are poised to make a lasting impact, address pressing issues, and create a brighter future for our community. Thank you for your unwavering dedication and partnership in this endeavor.

City of Laredo Public Health Department

Richard A. Chamberlain, DrPH, MPH, CPHA, CPM, CHW, RS

Erika Martinez, MBA, SHRM-SCP, CHW, CTCM

Jaime Lara, BBA

Philip Sanusi, MPH

Carla Alvarez, MS, CHWI

Jaime Perez, BS

City of Laredo Community Leaders

Dr. Julie Bazan, Executive Director, Area Health Education Center of the Mid Rio Grande Border Area of Texas (AHEC)

Maria Sanchez, Executive Director, Border Region Behavioral Health Center

Emma Maria Montes-Ewing, Chief Executive Officer, Doctors Hospital of Laredo

Eric Castillo, Child Find Coordinator, Early Childhood Intervention (ECI)

Elmo Lopez, Chief Executive Officer, Gateway Community Health Center, Inc.

Dr. Minita Ramirez, President, Laredo College

Reymundo Cruz, Community Outreach Specialists, Laredo Health Coalition

Dr. Sylvia G. Rios, Superintendent, Laredo Independent School District

Jorge Leal, Chief Executive Officer, Laredo Medical Center

Hanna Lee Huang, Market Chief Executive Officer, Laredo Specialty Hospital

Dr. Cindy Salazar-Collier, Associate Professor of Public Health, Texas A&M International University

Dr. Pablo Arenaz, President, Texas A&M International University

Rebecca Morales, Assistant Superintendent, United Independent School District