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# East Tennessee Children's Hospital 2025 Community Health Needs Assessment and Implementation Plan

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**Toward a Healthier Future for All Children in East Tennessee**

**East Tennessee Children's Hospital**

**University of Tennessee Social Work Office of Research and Public Service  
Division of Applied Research**

**Prepared by:**

Joe Bolinger, MPA, PhD  
Senior Researcher

Kelsie K. Allison, PhD  
Senior Evaluator

Rebecca Renegar, PhD  
Applied Research Manager

**Research support provided by:**

Shanimol Shajimon and Sagen Eatwell

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# Table of Contents

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Executive Summary . . . . .	1
About East Tennessee Children’s Hospital . . . . .	2
About the 2025 Community Health Needs Assessment . . . . .	3
How the CHNA Study was Conducted . . . . .	4
Focus Groups . . . . .	4
Web Survey . . . . .	5
Findings . . . . .	7
Identifying Children’s Health Needs in the Community . . . . .	8
Identifying Barriers to Accessing Physical and Mental Healthcare . . . . .	12
Barriers to Physical/Medical Healthcare Access . . . . .	12
Rating Satisfaction with Availability of Healthcare and Health Education Services . . . . .	13
Community Health Needs Assessment Summary . . . . .	15
Caregiver Healthcare Experiences and Community Health Strengths . . . . .	16
CHNA Implementation Plan . . . . .	21
Addressing Healthcare Affordability . . . . .	22
Addressing Healthcare Accessibility . . . . .	22
Affordable Housing . . . . .	23
Addressing Diet and Nutrition . . . . .	23
Addressing Healthy Screentime Habits . . . . .	23
Addressing Mental, Behavioral, and Emotional Health . . . . .	24
Addressing Treatment and Prevention of Substance Use Disorder . . . . .	24
Implementation Plan Summary . . . . .	25
References . . . . .	26

# List of Tables and Figures

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Table 1: Description of 2025 ETCH CHNA Focus Groups . . . . .	4
Table 2: Characteristics of the Web Survey Sample . . . . .	5
Table 3: Survey Respondent’s County of Residence Compared to 16 County Population . . . . .	6
Table 4: Lists of Response Options from Needs Assessment Section of CHNA Web Survey . . . . .	8
Table 5: Caregivers’ Use of Different Healthcare Facility Types Over Previous 12 Months . . . . .	20
Table 6: Satisfaction with ETCH Facilities . . . . .	20
Figure 1: Top Health Issues Selected for Children Aged 5 and Under . . . . .	9
Figure 2: Top Health Issues Selected for Children Six to 12 . . . . .	9
Figure 3: Top Health Issues Selected for Teens . . . . .	10
Figure 4: Health Services with Highest and Lowest Satisfaction for Availability . . . . .	13
Figure 5: Health Education Services with Highest and Lowest Satisfaction for Availability . . . . .	14
Figure 6: Sources of Children’s Insurance Coverage Reported by Caregivers . . . . .	16
Figure 7: Caregivers’ First Facility Type Choice for Non-Urgent Medical Care . . . . .	17
Figure 8: Caregivers’ Routine Vaccination Uptake by County Level of Development . . . . .	18
Figure 9: Caregivers’ COVID-19 Vaccine Uptake by County Level of Development . . . . .	19
Figure 10: Caregivers’ Flu Vaccine Uptake by County Level of Development . . . . .	19

## Executive Summary

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We are pleased to present this 2025 Community Health Needs Assessment (CHNA) and Implementation Plan. This report represents a commitment of time, resources, and expertise for the purpose of understanding a simple question: what do the residents of East Tennessee see as the most pressing health and wellness needs for children and families in their communities? East Tennessee Children's Hospital (ETCH) is committed to remaining a reliable and valuable community partner in the effort to improve health and wellness for children of all backgrounds, ages, and needs. ETCH also understands that health needs are not limited to the treatment of illness and injury but also stem from the complex and challenging economic and social circumstances in which people live, such as many of the issues identified in this CHNA.

- East Tennessee residents are concerned about the social, mental, and behavioral health of children, including the development of healthy screen time habits. Study results show that residents are dissatisfied with the availability of children's mental health treatment options and positive mental health promotion.
- Residents believe strongly in the importance of good nutrition for children's overall health and have concerns about the accessibility of nutritious food.
- Substance abuse disorder is affecting the health and wellness of children. Residents believe that parents' use is harmful for younger children, and they are concerned about prevention for teens. A desire for better access to treatment, prevention, and education on substance use is clear.
- The cost of care continues to be a barrier to access, compounded by incomplete or inadequate insurance coverage. Barriers can be both financial and non-monetary, such as time, distance, transportation, and a lack of understanding about how to navigate the complex healthcare system. All these factors prevent children from reaching their full potential for health and wellness.

ETCH continues to develop programming to address these social and economic health challenges, while still pursuing world-class medical care for injuries and diseases like cancer and asthma. The implementation plan presented in this report includes programs such as ETCH's Grow with Me Clinic, which treats neonatal abstinence syndrome; summer camps, which promote the development of healthy outdoor play away from screens; and ETCH's financial assistance programs, which help income-challenged families afford care. These and many other programs are working every day to respond to the needs identified in this CHNA and will continue to do so in the years to come.

In addition to community needs, this CHNA reveals notable community health strengths. These include high rates of insurance coverage for children, wide use of primary care providers, and high levels of satisfaction with ETCH's facilities. Even as ETCH addresses the community's pressing needs, it will build on these and other community strengths to promote healthy and thriving lives for the children of East Tennessee.

Sincerely,

**Matt C. Schaefer**

President and CEO

East Tennessee Children's Hospital

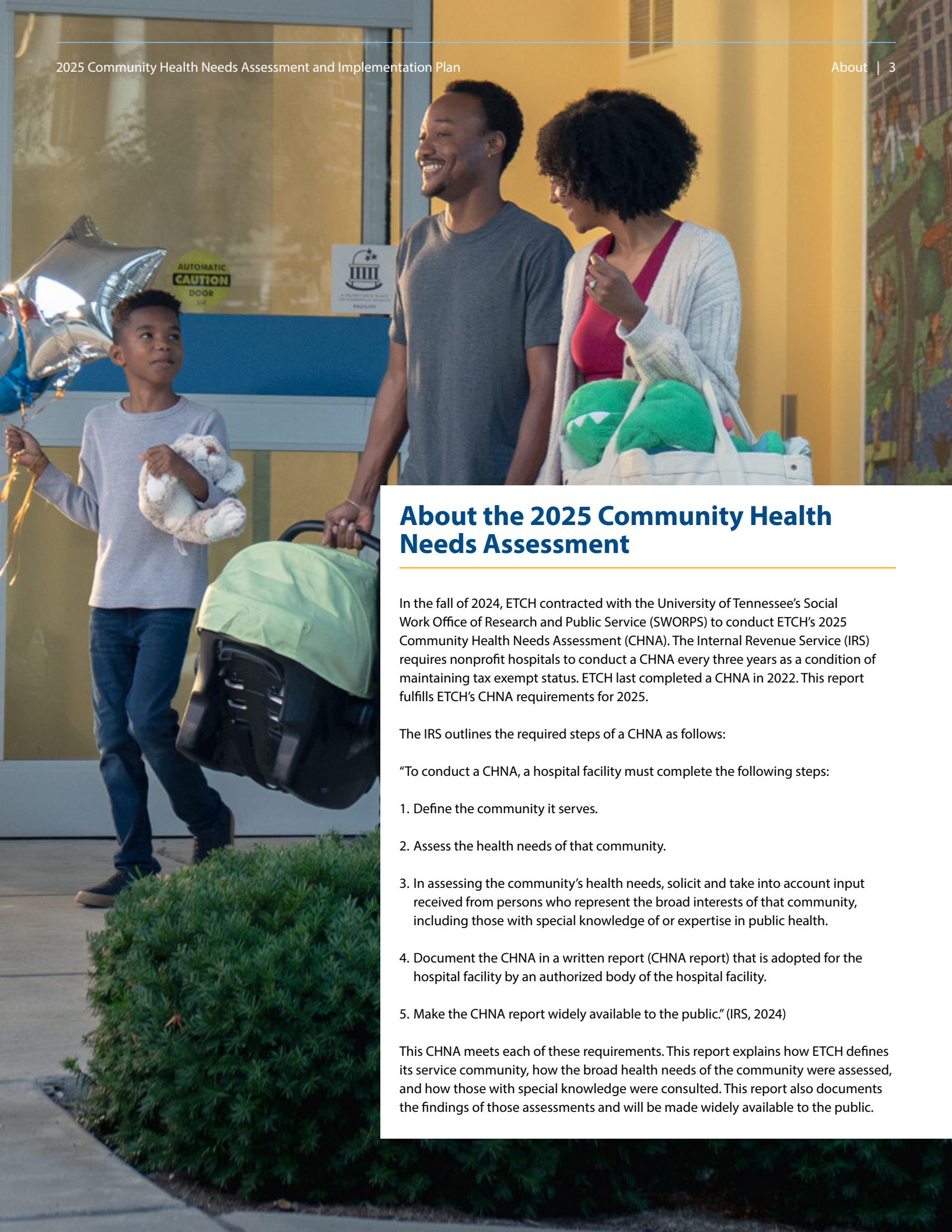
## About East Tennessee Children's Hospital

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Founded in 1937, East Tennessee Children's Hospital (ETCH) is a 152-bed hospital certified by the state of Tennessee. ETCH is one of four Comprehensive Regional Pediatric Centers in Tennessee and is accredited by the Joint Commission. Home to nearly 2,000 full- and part-time staff supporting hospital operations, the hospital has 152 licensed inpatient beds: 60 support level III neonatal intensive care, 13 support pediatric intensive care, and 79 beds support a variety of medical/surgical conditions. As a Comprehensive Regional Pediatric Center, East Tennessee Children's Hospital offers full capabilities to care for seriously ill children in a unique pediatric environment and offers services in many different pediatric subspecialties.

Today, the hospital is surrounded by a network of care that treats families in East Tennessee, Kentucky, and Virginia with 32 subspecialties, 14 primary care offices, 4 urgent cares, and 4 outpatient centers. In FY 2024, ETCH had 454,207 patient encounters reaching patients from 86 of 95 Tennessee Counties. In FY2024, ETCH also had 165,784 outpatient visits and 5,174 inpatient admissions.





## About the 2025 Community Health Needs Assessment

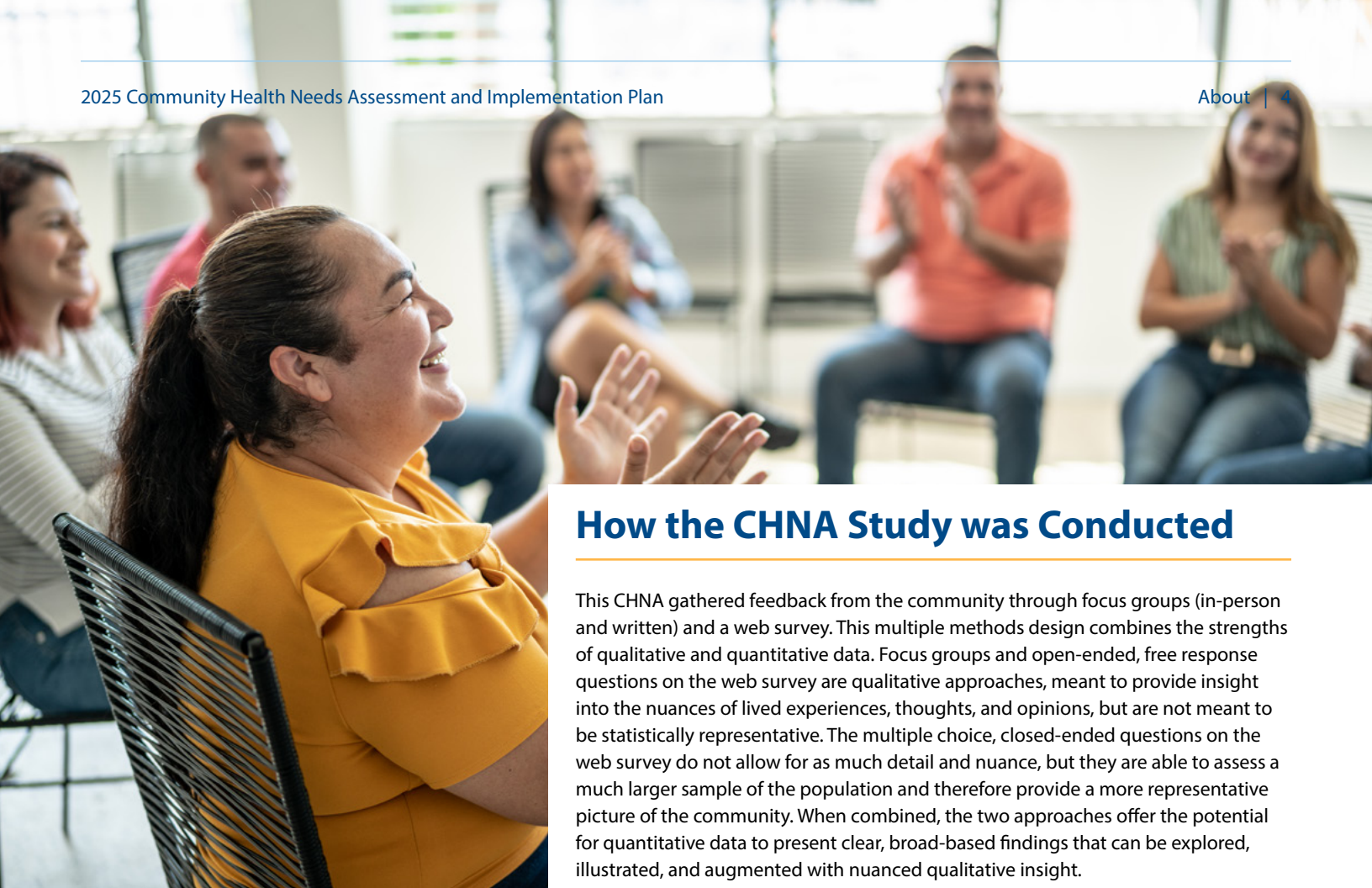
In the fall of 2024, ETCH contracted with the University of Tennessee's Social Work Office of Research and Public Service (SWORPS) to conduct ETCH's 2025 Community Health Needs Assessment (CHNA). The Internal Revenue Service (IRS) requires nonprofit hospitals to conduct a CHNA every three years as a condition of maintaining tax exempt status. ETCH last completed a CHNA in 2022. This report fulfills ETCH's CHNA requirements for 2025.

The IRS outlines the required steps of a CHNA as follows:

"To conduct a CHNA, a hospital facility must complete the following steps:

1. Define the community it serves.
2. Assess the health needs of that community.
3. In assessing the community's health needs, solicit and take into account input received from persons who represent the broad interests of that community, including those with special knowledge of or expertise in public health.
4. Document the CHNA in a written report (CHNA report) that is adopted for the hospital facility by an authorized body of the hospital facility.
5. Make the CHNA report widely available to the public." (IRS, 2024)

This CHNA meets each of these requirements. This report explains how ETCH defines its service community, how the broad health needs of the community were assessed, and how those with special knowledge were consulted. This report also documents the findings of those assessments and will be made widely available to the public.



## How the CHNA Study was Conducted

This CHNA gathered feedback from the community through focus groups (in-person and written) and a web survey. This multiple methods design combines the strengths of qualitative and quantitative data. Focus groups and open-ended, free response questions on the web survey are qualitative approaches, meant to provide insight into the nuances of lived experiences, thoughts, and opinions, but are not meant to be statistically representative. The multiple choice, closed-ended questions on the web survey do not allow for as much detail and nuance, but they are able to assess a much larger sample of the population and therefore provide a more representative picture of the community. When combined, the two approaches offer the potential for quantitative data to present clear, broad-based findings that can be explored, illustrated, and augmented with nuanced qualitative insight.

### Focus Groups

Overall, four focus groups were conducted, each representing different important stakeholders in ETCH's service community. Live virtual focus groups were conducted with ETCH's Family Advisory Council, ETCH peer directors (a group of ETCH managers, including some nurses and physicians), and a group consisting of native Spanish speakers from the community, which was conducted in Spanish. Additionally, written versions of the focus group questions were sent to a group of coordinated school health professionals working in area school systems. Each focus group was based on a questionnaire designed by SWORPS researchers in consultation with ETCH staff. The full text of the focus group script is available in Appendix A<sup>1</sup>. Table 1 provides further descriptive details about each group. In this report, focus group responses are used to illustrate and add nuance to major themes identified from the web survey. Spanish language responses have been translated into English.

**TABLE 1: Description of 2025 ETCH CHNA Focus Groups**

Group	Description	Mode	Date(s)
Family Advisory Council (n=4)	Parents of children receiving treatment at East Tennessee Children's Hospital. Many have children with complex medical needs.	Live Virtual (Zoom)	January, 2025
ETCH Peer Directors (n=12)	Program directors at East Tennessee Children's Hospital, including some physicians.	Live Virtual (Zoom)	January, 2025
Native Spanish Speakers (n=2)	Residents of East Tennessee whose first language is Spanish.	Live Virtual (Zoom)	March, 2025
Coordinated School Health Professionals (n=5)	Directors of Coordinated School Health Programs in East Tennessee Area Schools.	Online Written Questionnaire (Google Form)	January, 2025

<sup>1</sup> Appendices A, B, and C are available on ETCH's website: [www.etch.com](http://www.etch.com)

## Web Survey

The web survey was designed by SWORPS researchers in consultation with ETCH staff. Questions were based on a literature review of previously published CHNAs, SWORPS and ETCH staff expertise, and public health and child development best practice guidance. Questions were also tailored to reflect ETCH's unique constituency as a child-focused healthcare institution. Overall, the survey consisted of approximately 50 questions (not every question was shown to each respondent, and some questions were asked in multiple parts), and was divided into five sections: Demographics, Community Health Needs, Healthcare Barriers, Health Service Access, and Caregiver Healthcare Experiences. The questions in these sections are explained in more detail as findings are presented below, and the full text of the survey instrument is available in Appendix B.

## Web Survey Sample and Respondent Characteristics

While ETCH serves residents from beyond East Tennessee, including other Tennessee counties and southeastern Kentucky, the IRS CHNA requirements dictate that hospital facilities clearly define a service area and target population. The target population for this CHNA includes adults (age 18 and older) residing in one of 16 East Tennessee counties. These are Knox, Blount, Sevier, Jefferson, Anderson, Scott, Campbell, Claiborne, Morgan, Union, Grainger, Hamblen, Cocke, Monroe, Roane, and Loudon counties.

The sample for the web survey was obtained in two ways. A vendor was contracted to distribute the survey to a panel of paid respondents meeting the eligibility criteria of the survey (aged 18+ and residing in an eligible county). This method yielded 407 complete surveys. To bolster the number of responses, an anonymous link to the survey was distributed publicly through email and an ETCH e-newsletter and posted on ETCH's website. Screening questions were used to ensure respondents were an appropriate age and lived in an eligible county. These efforts yielded 125 respondents. In all, there were 532 surveys used for this analysis of which 478 were completions and 54 were partial completions. Partial completions were any surveys where respondents answered at least the eligibility screening questions of age, consent, and county of residence but dropped off before finishing the survey.

Table 2 displays the major demographic characteristics of the survey sample. Note that the sample size for questions differs from question to question because not all questions were displayed to all respondents (for instance, some questions were only displayed to people who identified as caregivers), respondents could choose not to answer some questions, and respondents could stop taking the survey before it was completed.

**Throughout this report, percentages should be interpreted as the number of respondents selecting that answer out of the total number of respondents who answered that particular question.**

**TABLE 2: Characteristics of the Web Survey Sample**

Characteristic	Category	Value
<b>Age</b> (n=532)	Range:	18-90 years old
	Median:	44 years old
<b>Race and Ethnicity</b> (n=518)	White	96%
	Black/African-American	3.1%
	American Indian/Alaska Native	2.5%
	Asian/Pacific Islander	1.5%
	Other	1%
	Hispanic/Latino/Latina	3.3%
<b>Education</b> (n=519)	High School Diploma/GED or Less	35.1%
	Some College/Vocational Training	32.7%
	Bachelor's Degree or Higher	32.2%
<b>Household Income</b> (n=519)	≤ \$30,000	30%
	\$30,000 - \$75,000	37%
	> \$75,000	33.9%
<b>Gender</b> (n=513)	Women	70%
	Men	29%
	Non-Binary/Transgender	1%
<b>Relationship Status</b> (n=519)	Married	48%
	Living with Partner	14%
	Single/Divorced/Separated/ Widowed	38%
	<b>Caregiver Status</b> (n=482)	Currently a caregiver to a child for whom respondent makes healthcare decisions



The survey collected information about respondents' age, ethnicity and race, education, household income, gender, relationship and caregiver status, and county of residence. Comparisons to US Census population data for the 16-county target area show a high degree of similarity between the survey sample and the population on most variables. Gender is one exception, with more women (70%) in the survey sample compared to county population counts. However, an overrepresentation of women is typical of survey research, as studies show that women are more likely to take surveys than men (Becker 2022; Slauson-Blevins & Johnson 2016; Green 1996). Survey respondents were also somewhat more likely to identify as white than the population of these counties (96% vs 85%) and correspondingly less likely to identify as a different race (note that respondents were able to select more than one race category).

Respondents were asked in which of the counties in ETCH's 16-county service regions they currently resided. Respondents closely matched the overall population density of the 16-county service region, as shown in Table 3.

**TABLE 3: Survey Respondent's County of Residence Compared to 16 County Population**

County of Residence	Percentage of Survey Respondents (n=532)	Percentage of 16-County Population from American Community Survey 2023 1-year Estimates (Total pop. 1,311,309)*
Knox	38.9%	38.2%
Anderson	9.2%	6.1%
Sevier	8.6%	7.6%
Blount	7.9%	10.8%
Jefferson	4.9%	4.4%
Roane	4.3%	4.3%
Loudon	4.3%	4.6%
Hamblen	4.1%	5.0%
Campbell	3.6%	3.1%
Monroe	3%	3.7%
Cocke	3%	2.9%
Grainger	2.4%	1.9%
Claiborne	2.1%	2.5%
Union	1.3%	1.6%
Morgan	1.3%	1.6%
Scott	0.9%	1.7%

\*American Community Survey population estimates include children, which are excluded from the survey sample.

## Findings

In this section of the report, results of the web survey, data from focus groups, and open-ended survey comments are used together to add context and nuance to the discussion. While much of the analysis utilizes the survey sample as a whole, researchers also examined whether respondents' answers differed according to their caregiver status, their household income, and whether their county of residence was primarily urban or rural. While there were few major differences overall, this report highlights patterns in responses that may be useful for responding to community health needs where appropriate.





### Identifying Children’s Health Needs in the Community

In the first section of the survey and in the focus groups, respondents were asked to identify major health needs of children in their community. Children encounter different kinds of health and wellness challenges at different ages, so respondents were asked to assess major health needs for three different age ranges: children five and under, children aged 6-12, and children aged 13-18. Age ranges correspond to commonly used categories in child development and public health research. These questions were asked of everyone, regardless of whether they identified as a caregiver.

Respondents were asked to pick their top issue from each of three different lists of issues facing children of that age range. Table 4 displays each response option in the three lists. The first of these was a list of community

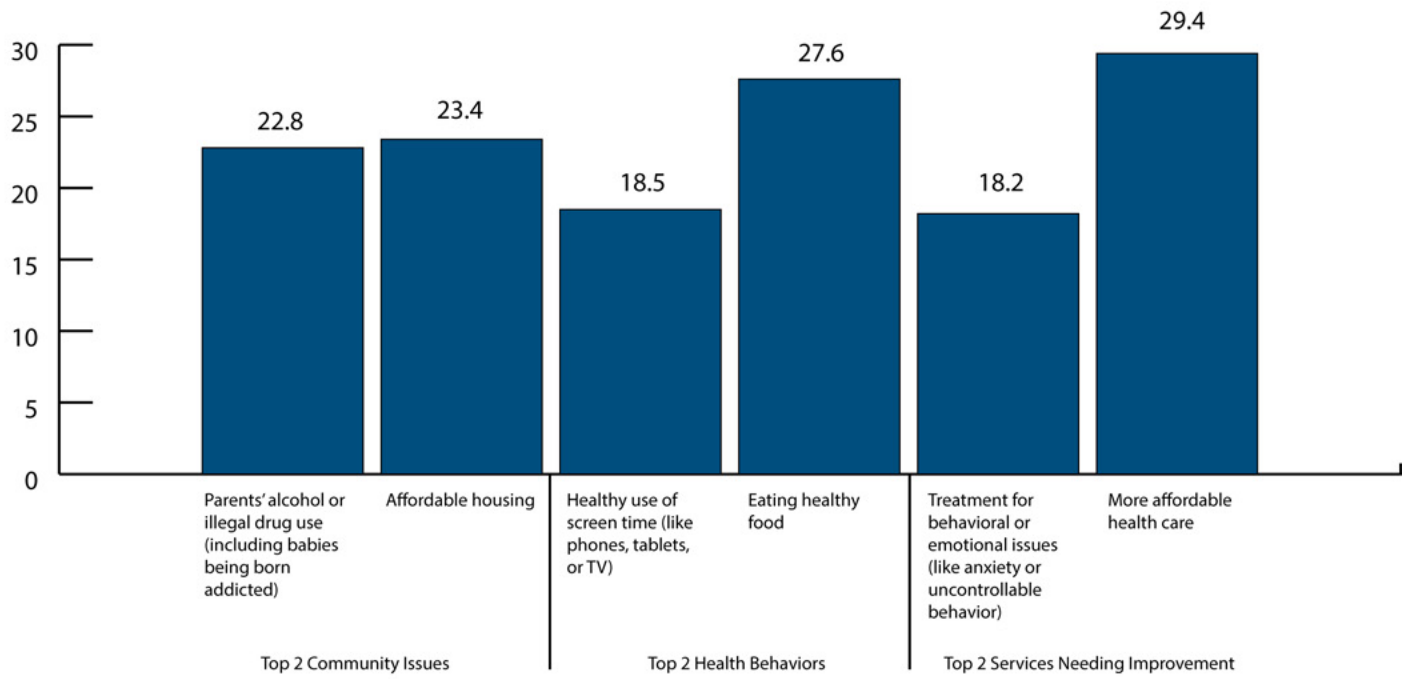
issues, addressing the home and community environments in which children live. Many of these correspond to major social determinants of health, like income and housing. The second list contains health behaviors, including utilization of select healthcare services. The third list contains a list of healthcare and health education services and asks respondents to select where services could be improved to help the health and wellness of a particular age group. The lists were identical for children aged five and under and aged 6-12, but slightly different for teenagers (see Table 4). Of course, no list can cover every health-related issue. For that reason, for each age group, respondents also had the opportunity to write in other issues that they thought should be considered for the health and wellness of children.

**TABLE 4: Lists of Response Options from Needs Assessment Section of CHNA Web Survey**

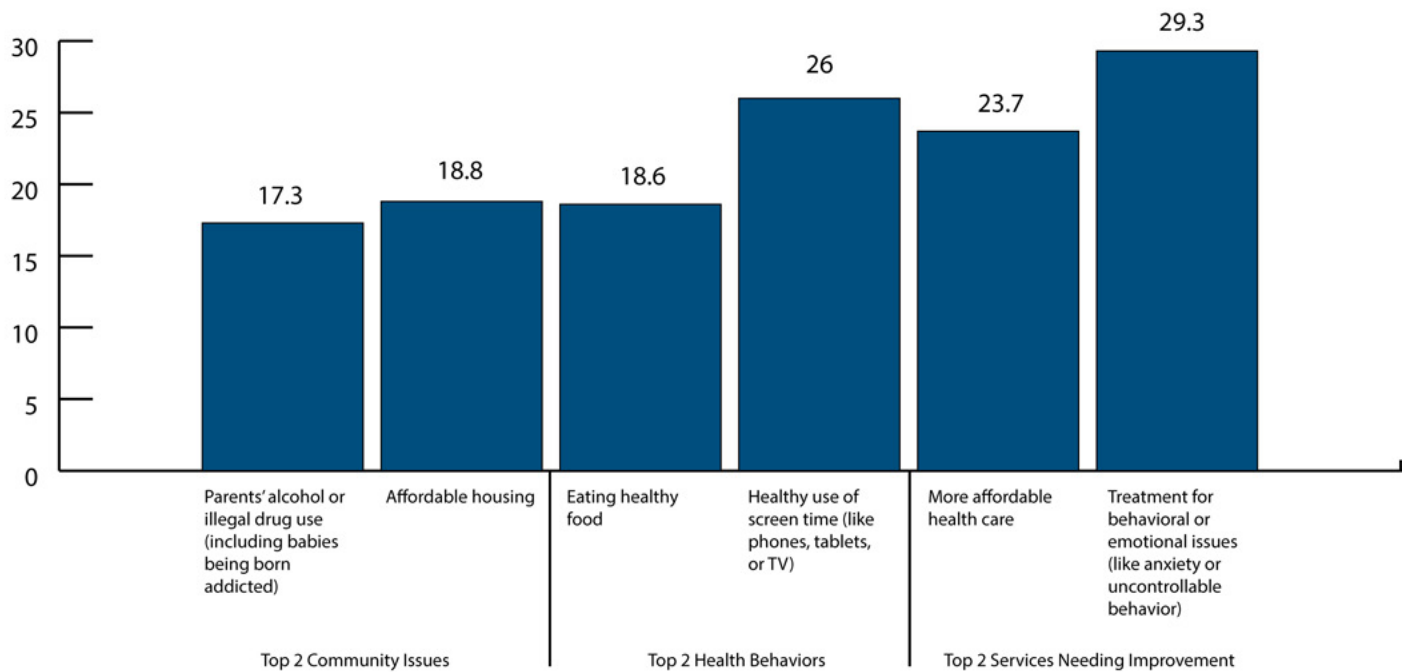
List of Community Issues	List of Health Behaviors	List of Services Needing Improvement
<ul style="list-style-type: none"> <li>• Air or water quality</li> <li>• Unhealthy housing (like lead paint, mold, crowded homes)</li> <li>• Access to parks and places to exercise</li> <li>• Health education for parents or kids</li> <li>• Health care providers who share your race/ethnicity</li> <li>• Education on parenting and supervision</li> <li>• Teaching gun safety</li> <li>• Domestic violence (like partner violence and child abuse)</li> <li>• Parent’s alcohol or illegal drug use (including babies being born addicted)</li> <li>• Parents’ smoking or vaping in the home</li> <li>• Access to grocery stores with fresh food</li> <li>• Jobs for parents</li> <li>• Affordable housing</li> </ul>	<ul style="list-style-type: none"> <li>• Getting enough exercise</li> <li>• Use of seatbelts or car seats</li> <li>• Eating healthy food</li> <li>• Healthy use of screen time (like phones, tablets, or TV)</li> <li>• Going to the dentist (yearly checkups)</li> <li>• Going to the pediatrician or family doctor (yearly checkups)</li> <li>• Going to the eye doctor</li> <li>• Getting flu shots and other regular vaccines</li> <li>• Promoting good mental health</li> <li>• *Smoking or vaping</li> <li>• *Use of alcohol or illegal drugs</li> <li>• *Sexually transmitted infections (STI) or teen pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>• More affordable prescription medicine</li> <li>• More affordable health care</li> <li>• Treatment for allergies or asthma</li> <li>• Treatment for behavioral or emotional issues (like anxiety or uncontrollable behavior)</li> <li>• Treatment for chronic diseases (like childhood diabetes)</li> <li>• Screening and help for developmental delays (like not speaking or walking on time)</li> <li>• Information on reducing obesity or promoting a healthy weight</li> <li>• Drug or alcohol abuse prevention</li> <li>• More types of healthcare providers or services that fit different cultures</li> <li>• Services for children with disabilities</li> <li>• *Access to reproductive care (birth control or other reproductive health issues)</li> </ul>

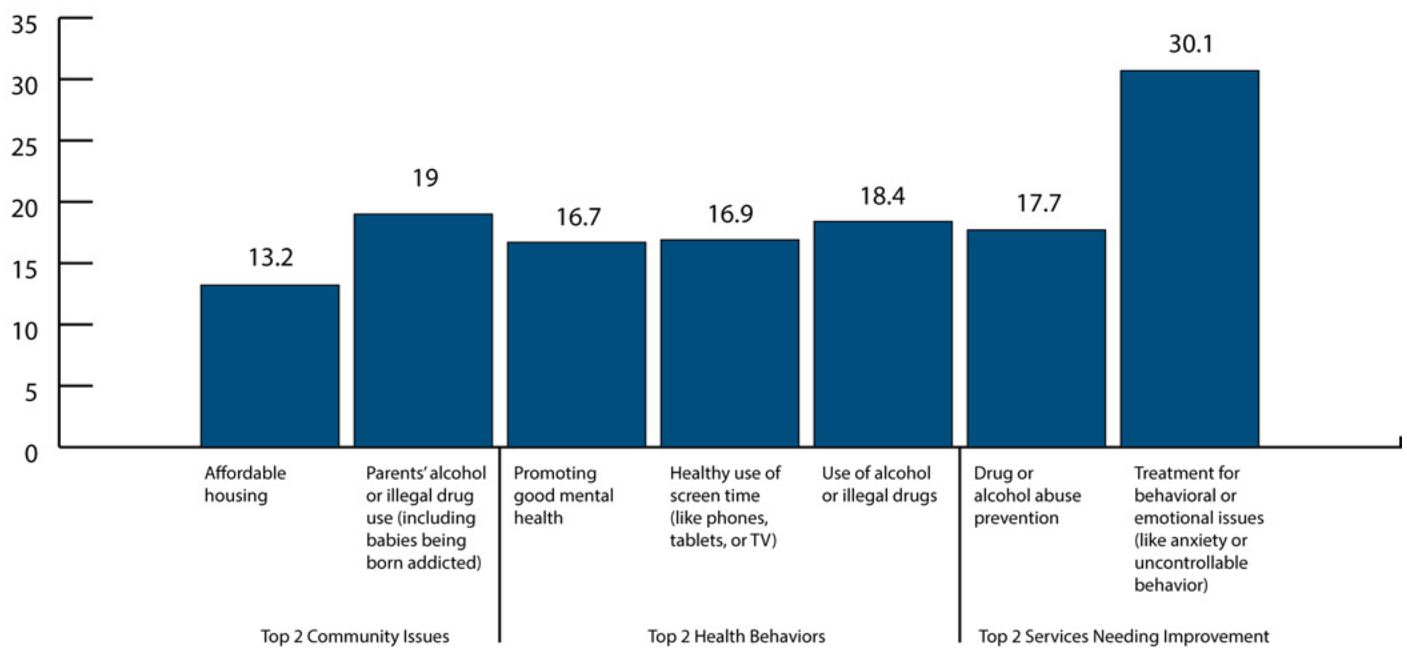
\*These responses were only available for questions asking about teens’ health.

**Figure 1: Top Health Issues Selected for Children Aged 5 and Under**



**Figure 2: Top Health Issues Selected for Children 6-12**



**Figure 3: Top Health Issues Selected for Teens**

**Affordable housing and parents' substance** use disorder were the top two most frequently selected community issues affecting the health of all three age groups of children. Respondents in mostly urban areas were more likely to report affordable housing as the top community issues, whereas respondents in rural areas were more likely to report parents' substance use as the top community issue. Parental substance abuse was also more of a concern for individuals with lower reported household incomes than respondents with higher household incomes. These issues were also evident in the qualitative data from focus groups and open-ended responses in the web survey. Regarding housing, a web survey respondent commented on the need for "some type of help with affordable, safe, and stable housing. I have read...stories of local families living in tents in the winter and summer with their children! Housing for families is a huge problem in our area." Another said, "The main problem facing our entire society is the lack of universal healthcare and affordable housing."

Substance use is identified as a leading problem, both as a community issue insofar as parents' use affects children's health, but also as a top health behavior issue faced by teens. Prevention for substance use disorder is also identified as a leading service needing improvement for teens. Qualitative evidence provides insight on how community members are grappling with problems related to substance use disorder among both caregivers and children. A coordinated school health professional observed, "Our students with families who have addiction, mental health issues, and lack of financial resources for water and utilities are dramatically impacted compared to our students whose families do not have these barriers in life." Two focus

group participants from ETCH's peer directors group commented on their concerns about the increasing prevalence of CBD vaping and the marketing of such products to young people through ads, flavorings, and other techniques (Centers for Disease Control and Prevention, 2024). Regarding the availability of vaping products, one observed, "Tobacco, vape and CBD are very popular among children. This exposure is leading to the development of unhealthy addiction among teenagers. The sale of such drugs in shops is normalized...They are even more dangerous than cigarettes." Web survey respondents offered many comments concerning substance use disorder in the community, such as: "Parents having drug problems...is the major concern this community and the surrounding communities have." Another survey respondent commented on the need for substance use education and counseling for teens, saying that children need "drug and alcohol education ...someone that they feel safe talking to without it getting back to their parents."



**The main problem facing our entire society is the lack of universal healthcare and affordable housing."**

**Eating healthy foods** was one of the most frequently selected health behaviors impacting children aged five and under and aged 6-12. The focus group of native Spanish speakers addressed the issue of nutrition, specifically the need for more nutritionists in the healthcare system to help create customized diets for people with dietary restrictions: *"More than anything it would be good if we had more nutritionists. We know that... nutritional information can indicate the nutritional value of any food or product that someone consumes or buys, but it would be good if they relied on nutritionists to design some kind of diet. ...I would like share my daughter's situation, who is allergic to... milk and soy. So they simply told us, well, avoid products that contain milk or soy, but they didn't tell us directly, 'Look, regarding the milk, substitute it with this in the morning, give her,' for example, 'cereal to supplement this,' or 'give her an apple mid-morning.'"*

Nutrition for children was also a repeated theme among the Family Advisory Council focus group. Noting the wholistic impact of nutrition, one participant commented, *"Nutrition, and things like that should be a really big part of a hospital and of children. I think that what a child puts into their body and eats, feeds their mind, and feeds their soul and feeds their health."*

Another family advisory council participant discussed how challenging it is to meet their children's nutrition needs when low-quality food is so much easier to afford, saying: *"I think nutrition is a huge one. [For] my 6-year-old daughter, we've got some eating issues there with her. She's developed an eating disorder, and it's definitely nutrition and the choices that are out there...I'm always on the go. We're trying to get healthy stuff, and...the cost of it is way expensive, but you know the horrible things are so cheap, so, nutrition is huge."*

**For all age groups, treatment for behavioral or emotional issues** was one of the two most frequently selected options for services needing improvement, and promoting good mental health was selected as a top issue impacting the health of teens. This issue was particularly important among respondents who were caregivers and respondents who live in more urban areas. Focus group participants had much to say about the difficulties children face with complex social and family lives, mental health, trauma, and lack of mental healthcare. When asked to comment on the most important health issues for children in the ETCH service area, a member of ETCH's Family Advisory Council pointed to *"the rise of mental health issues or the rise in anxiety in children during this post Covid era. We need access to mental health care for younger children and a more accessible way."* A participant from the ETCH peer directors focus group observed, *"What I...envision is the amount of trauma some of our kids are having exposure to early in life, whether it's accidental or non-accidental. ...[T]hat trauma early in childhood really kind of changes their trajectory for health throughout the spectrum."*

One aspect of healthy development is children's **screen time, or time spent using social media and devices like television, cell phones, tablets, and video games**. Healthy use of screen time is a

top selection for important health behavior for all three age groups. Regarding the impact of social media and screen time, a participant from the coordinated school health professionals group said, *"I still think mental health is a large problem. More children and adults are going to social media for relationships instead of communicating with those around them."* Another comment from this group on pressing health and wellness problems for the community was that *"social media is truly hurting our students' well-being."* ETCH peer directors also noted the impact of social media on well-being, saying *"social media and online presence of teenagers are becoming dangerous. Children are spending their productive time in online media and screen addiction has increased in a significant manner among children."* Several web survey respondents mentioned the issue of screen time; one said of children aged five and under, *"I've noticed a lot of kids in the area around that age are constantly glued to a screen when going anywhere. It seems like the parents are using these devices as babysitters."*

**Healthcare affordability** was selected as a top area needing improvement for children aged five and under and aged 6-12. Participants addressed affordability by discussing insurance coverage and economic hardship in general. One of ETCH's peer directors identified *"complex medical patients that are not insured or underinsured"* as a major issue. A web survey respondent said, *"We must get rid of the current insurance model. It does nothing but increase the cost and complexity of securing quality healthcare."* A coordinated school health professional noted, *"We are in an impoverished area of TN. Basic needs are not being met for these children."*



***We are in an impoverished area of TN. Basic needs are not being met for these children."***

## Identifying Barriers to Accessing Physical and Mental Healthcare

After assessing leading health and wellness concerns for children in the community, survey respondents were asked to turn to another important issue: barriers obstructing children's access to care. The survey addressed both physical healthcare and mental healthcare, and it inquired about children as a whole, rather than different age categories. Respondents were shown one list of barriers to physical healthcare access and one list of barriers to mental healthcare access; the two lists were similar but not identical. For example, stigma was a barrier listed for mental

healthcare access but not physical healthcare. The full text of each question is available in Appendix B, and the survey results for each response option is available in Appendix C. Respondents were asked to choose the top two most important barriers from each list. This report examines the top four most frequently chosen barriers to each type of care. For each of the two lists, respondents were also able to offer their own thoughts on barriers that may not have been explicitly included in the lists, and data from these open-ended responses and focus groups augment the analysis.

## Barriers to Physical/Medical Healthcare Access

Specifically, respondents were asked, "in your opinion, which two problems make it hardest for children of all ages in your community to get health care, like wellness checkups, prescriptions, and urgent care?" Top responses were:

- The high cost of services or medication (including high co-pays and deductibles) (45%);
- Lack of insurance or not enough coverage (44%);
- Scheduling problems, like not being able to take time off work (20%);
- Not knowing about healthcare options or the system (18%).

Focus group and web survey participants addressed many of these issues. Regarding barriers from cost and insurance challenges, one web survey respondent identified, "difficulty finding doctors who take your insurance and are accepting new patients" as a major barrier to children getting healthcare. Another web survey comment noted a problem with working families who may be ineligible for subsidized coverage but struggle to afford market rate coverage, saying there is "too large a gap between government 'free' healthcare and insurance coverage with high deductibles."

Similar comments were offered about mental healthcare access barriers, such as "long wait times and lack of providers that take different insurances." One comment touched on several barriers to mental health care, noting problems with the "lack of access to providers(:) many areas have a shortage of pediatric mental health professionals. This can lead to long wait lists making it difficult for children to receive timely care. Also stigma & parental awareness."

**Scheduling problems** were identified as a major barrier to healthcare access. Focus group and web survey participants addressed several ways that scheduling problems could arise, including: inability to get timely appointments due to lack of providers, inability to reach providers located farther away due

to time and transportation constraints, and issues with taking time away from work and other obligations. Distance from healthcare facilities is closely related to scheduling challenges because distance increases the time required to travel to care facilities. Among web survey respondents, many felt facilities were far away, especially in rural areas. "Most of my healthcare for my family is outside my county. To get the quality of care I want, I travel to Knoxville." Participants from the native Spanish speakers focus group discussed the high time-cost of attending and long wait times to schedule medical appointments and expressed a desire to see them reduced, perhaps by adding providers: "Something I find very difficult sometimes is getting appointments. For example, I call to make an appointment or they refer me to a doctor, and it can take up to one or two months to get an appointment... or they leave you in the office for three hours to see you, so that's also is a bit difficult.... So, imagine if you have a problem... And they tell you, well, take this and wait a month for the next appointment, and you still have the same problem. So I think that from month to month, more and more time is wasted, and time is gold."

**Lack of knowledge about the healthcare system** was identified as a top barrier to accessing both physical and mental healthcare. Focus group and web survey comments addressed related issues. Navigating the complex healthcare system can be intimidating for people, which may dissuade them from seeking care. For instance, a member of ETCH's Family Advisory Council (many of whom have children with complex medical needs) discussed how this complexity can be exhausting to navigate. "You go to this one doctor, and they have no clue of your chart...and you go to a different 'ology,' and they have no clue of the chart of the other doctor," and they wish that "every doctor that's going to serve your child...[should] be able to access everything that your child has been through, because also parents are traumatized sometimes, and they forget things."

### Rating Satisfaction with Availability of Healthcare and Health Education Services

Survey respondents were asked to rate their satisfaction with the availability of different healthcare and health education services. Ratings were based on a 4-point scale with options of very unsatisfied, unsatisfied, satisfied, or very satisfied. Respondents were asked to rate ten healthcare services and nine health education services. The full list of services is displayed in Appendix B (questions 15-16).

#### Health Services Availability

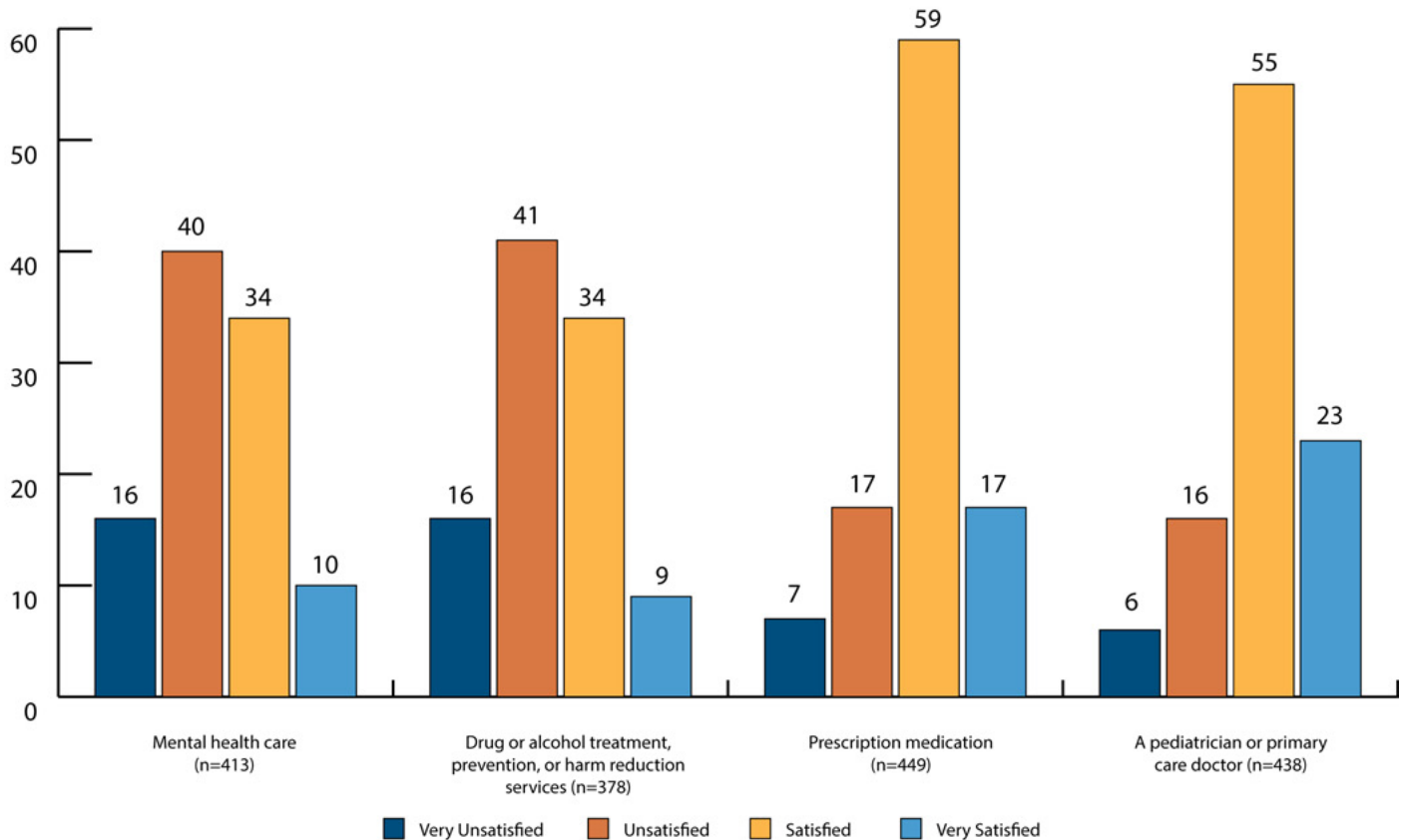
Within the health services category, respondents generally expressed more positive than negative feelings toward the availability of health services, but there were two health services for which availability was more unsatisfactory than satisfactory. Those were:

- Drug or alcohol treatment, prevention, or harm reduction services (57% ranked Very Unsatisfied or Unsatisfied); and
- Mental health care (55% ranked Very Unsatisfied or Unsatisfied).

Other categories of health services with lower levels

of availability satisfaction were dental care (37% Very Unsatisfied or Unsatisfied), reproductive health care (45% Very Unsatisfied or Unsatisfied); and specialty care (37% Very Unsatisfied or Unsatisfied). Services where satisfaction with availability was high include prescription medication, urgent care, telemedicine, and pediatrician or primary care. Figure 4 displays levels of satisfaction with the two lowest rated and the two highest rated services. The full results for each service listed on the survey are available in Appendix C.

**Figure 4: Health Services with Highest and Lowest Satisfaction for Availability**



### Health Education Services Availability

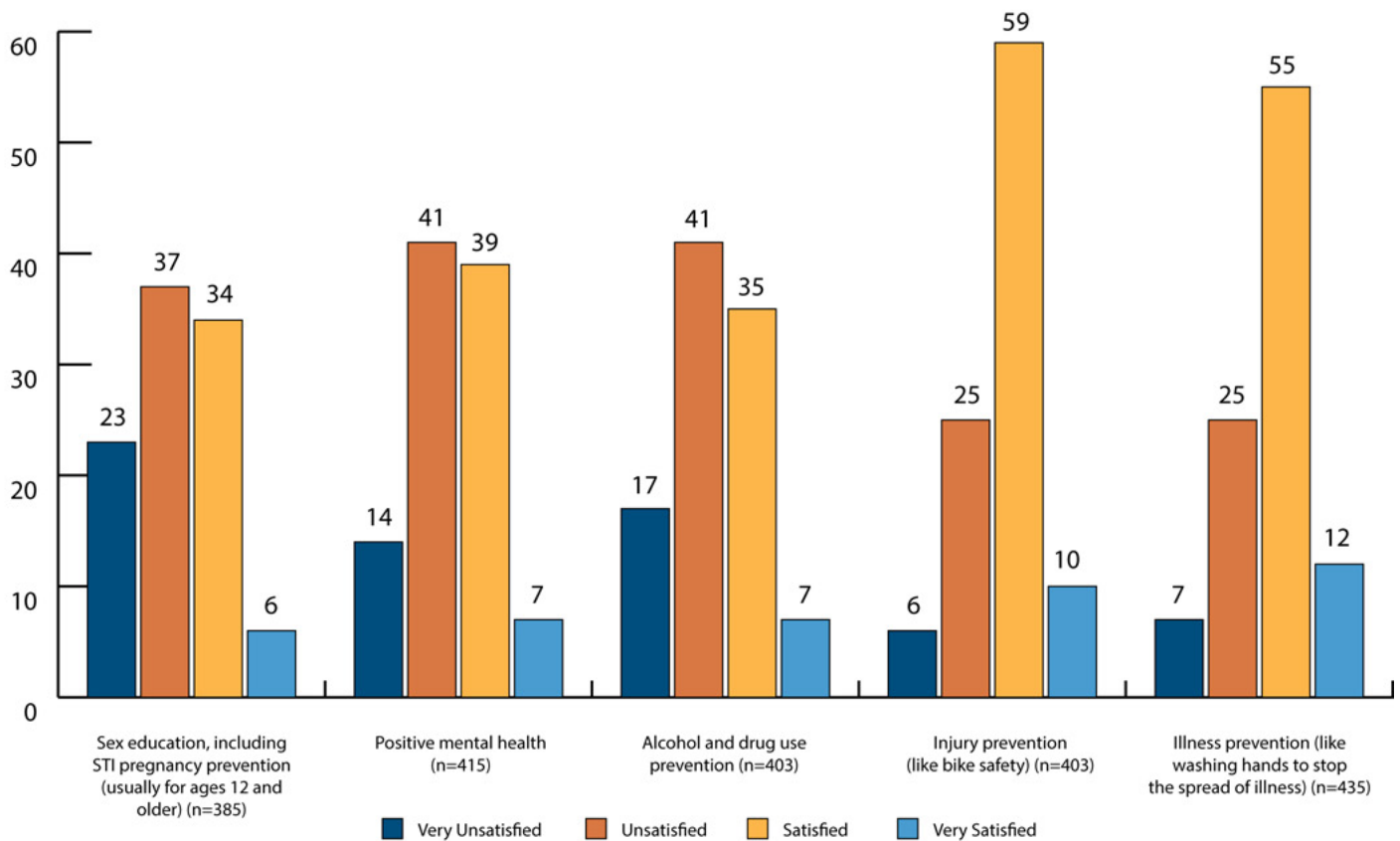
The survey identified three areas of education services for which dissatisfaction outweighed satisfaction. Those were:

- Alcohol and drug use prevention (58% Very Unsatisfied or Unsatisfied);
- Positive mental health (54% Very Unsatisfied or Unsatisfied); and
- Sex education, including STI and pregnancy prevention (60% Very Unsatisfied or Unsatisfied).

Health education services for which satisfaction was high were illness prevention, like washing hands (68% Satisfied or Very Satisfied), injury prevention, like bike safety (69% Satisfied or Very Satisfied), and vaccination education (60% Satisfied or Very Satisfied).

Figure 5 displays the health education services with the highest and lowest satisfaction ratings for availability. The full results of each health education service listed on the survey are available in Appendix C.

**Figure 5: Health Education Services with Highest and Lowest Satisfaction for Availability**

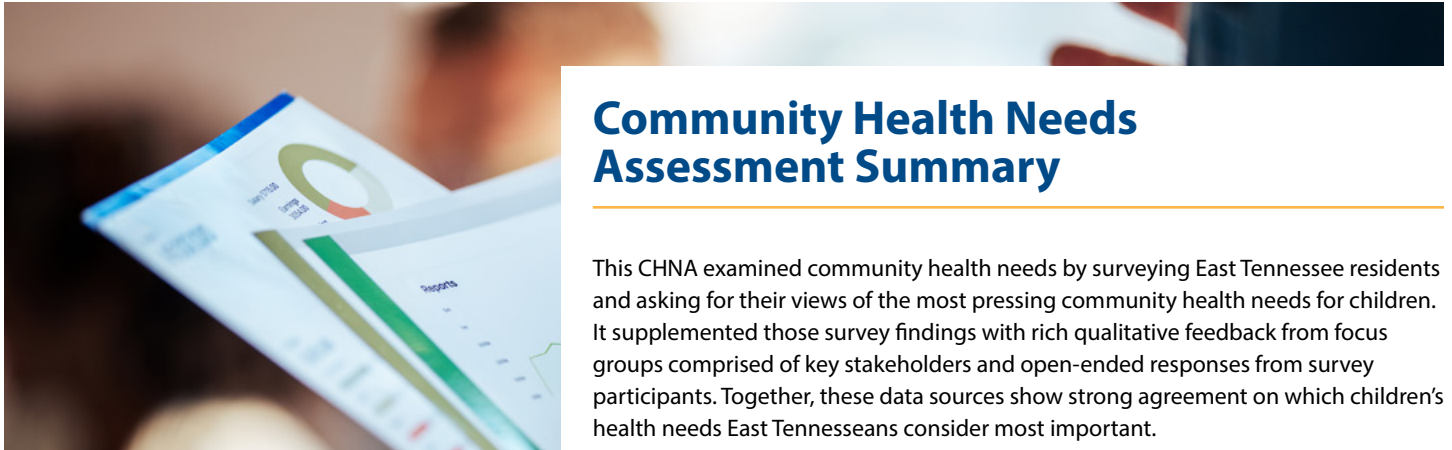


Focus group and web survey participants offered qualitative feedback on the lack of substance use treatment and prevention, mental health care and positive mental health promotion, and sex education. Regarding substance use disorder treatment and prevention, a coordinated school health professional suggested that an important area for improvement would be to “provide drug prevention educators to schools, communities, and daycares. Speak on the importance of a healthy family network. Our county needs professional prevention educators.”

Regarding ways to address the lack of mental health services for youth, another coordinated school health professional suggested the community could add “a mental health component to the after-school program. Teaching kids healthy coping skills - go for a walk, read a book, listen to music, journal, draw, etc.”

Regarding sex education, a participant in the native Spanish speakers focus group addressed the value for youth well-being, saying “I think that adolescent health is always important, teaching adolescents about self-care, taking girls to a gynecologist, and boys to the appropriate doctor so they have all the appropriate information... If one day a teenager reaches the age of 18 and ends up doing something they shouldn't be, well, at least they have the resource and avoid illnesses, pregnancies, and everything that entails.”

A comment on the web survey about other major health and wellness issues in the community noted the “lack of sex education. Abstinence-only education programs do not cut it. It should also be inclusive to members of the LGBTQIA+ community.”



## Community Health Needs Assessment Summary

This CHNA examined community health needs by surveying East Tennessee residents and asking for their views of the most pressing community health needs for children. It supplemented those survey findings with rich qualitative feedback from focus groups comprised of key stakeholders and open-ended responses from survey participants. Together, these data sources show strong agreement on which children's health needs East Tennesseans consider most important.

### Healthcare Affordability and Access

Healthcare affordability was identified as one of the areas of service most in need of improvement, and cost, along with insufficient insurance coverage, was identified as a major barrier to both mental and physical healthcare access. Focus group participants and survey comments showed that access was limited not only by direct financial costs, but also by time costs and scheduling challenges, with physical distance from facilities and lack of reliable transportation options worsening time costs. These indirect costs of time and transportation were particularly burdensome for more rural residents who often face a significant shortage of convenient healthcare options where they live. The intimidating complexity of navigating the healthcare system was another access barrier participants identified as important.

### Mental, Social, Emotional, and Behavioral Health: Treatment, Education, and Promotion

Study participants conveyed a strong signal that children in East Tennessee today face struggles with mental and behavioral health. From the difficulty of navigating screen time habits and social media to recovering from trauma, children, especially teens, seem to be facing challenges mentally, emotionally, and socially in East Tennessee. Making mental healthcare for young people more easily accessible is clearly a top priority for the community. Improving access will require overcoming barriers of stigma, cost, insurance coverage, lack of providers, and increasing integration into the systems that currently work with children, like schools and primary care doctors.

### Substance Use Disorder Prevention, Treatment, and Education

Substance use disorder is impacting children in East Tennessee. For younger children, caregivers' use is most important, including impacting infants in neo-natal abstinence syndrome. For teens, their own use of substances becomes a potential danger to their health and wellness. Study participants have conveyed a clear message that there is a need in East Tennessee for improvement in substance use prevention, treatment, education, and harm reduction, both for adults and teens.

### Affordable Housing as a Social Determinant of Health

Study participants conveyed a clear sense that affordable housing was an unmet need affecting children's health and wellness. Qualitative feedback revealed an understanding that caregivers' economic circumstances contribute directly to children's health outcomes. These "social determinants of health" are well-documented in public health scholarship, and housing is one of the most important. Affordable housing is known to contribute to health and wellness via multiple pathways, including improving family stability and increasing the percentage of a household budget that can be spent on food, medications, and other health-promoting products and activities (Swope and Hernandez, 2019; Taylor, 2018).

### Nutrition

Study participants believe that eating healthy foods is very important for children's health and wellness. Qualitative feedback reveals some of the major obstacles to ensuring children are provided high-quality food, such as the prevalence and low-cost of "junk food" compared to nutritious food, especially in rural areas.



## Caregiver Healthcare Experiences & Community Health Strengths

The preceding sections of this report represent the central questions of the community health needs assessment. All survey respondents were asked for feedback on the leading concerns, barriers, and services affecting the health and wellness of children in the community.

The final section of the web survey sought feedback on the experiences of caregivers as they have navigated the healthcare system on behalf of children. This section was only shown to respondents who answered yes ( $n = 172, 36\%$ ) to “Are you the parent or caregiver

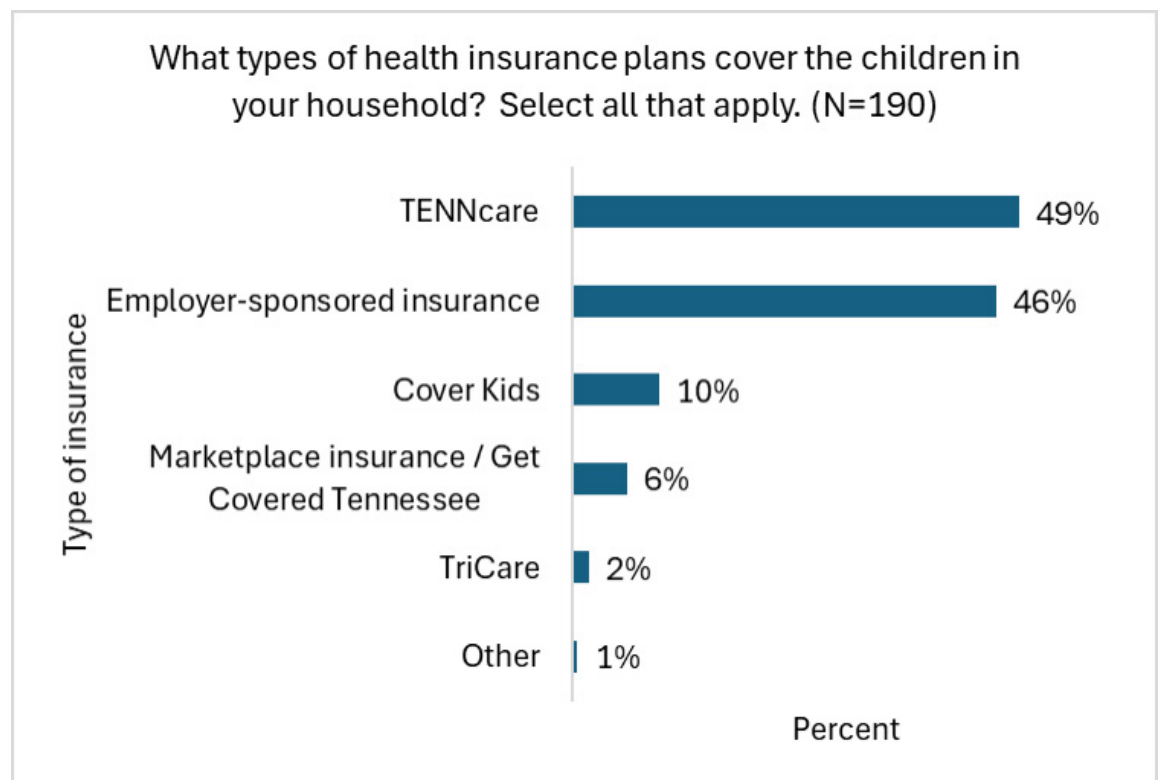
for a child under the age of 18 and make health care decisions for them?” Respondents were asked questions regarding their children’s insurance coverage, overall health and chronic illness status, immunization practices, frequency of use of different types of healthcare facilities and their utilization of primary care providers, and their satisfaction with facilities run by ETCH. Additionally, some questions asked earlier in the survey to all respondents are discussed here, because they relate more to community strengths than to community needs.

### Children’s Insurance Coverage

One area of community health strength is that 96% of caregivers indicated the children in their household were covered by health insurance of some kind. Respondents who indicated that their children were covered by health insurance were asked to select all

types of health insurance plans that cover the children in their household. The two most common types of health insurance were TENNcare (49%) and employer-sponsored insurance (46%; see Figure 6).

**Figure 6:**  
Sources of Children’s Insurance Coverage Reported by Caregivers

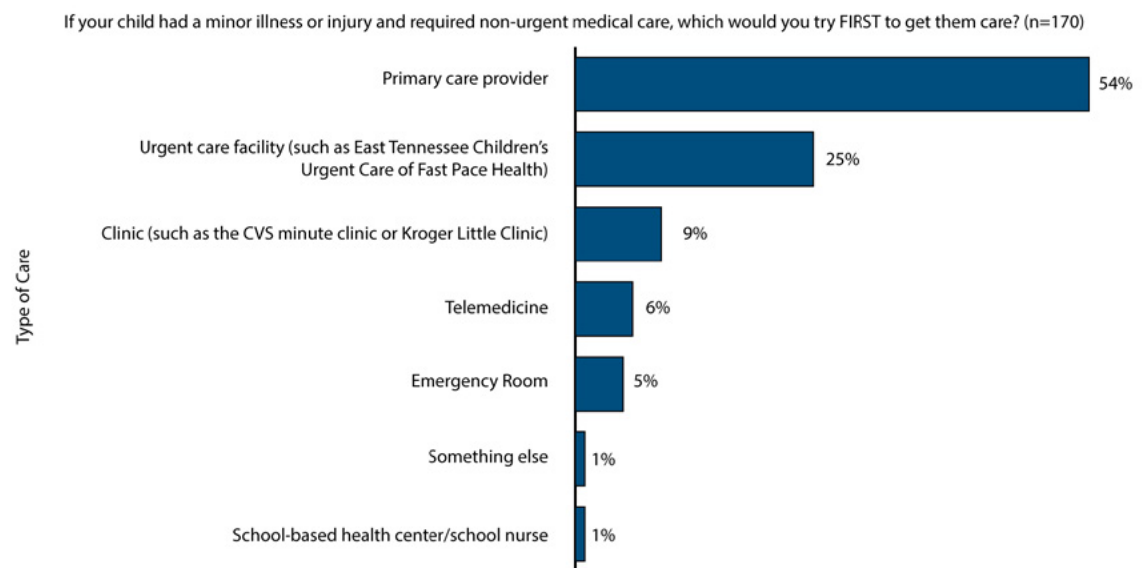


### Use of Primary Care Providers

Another area of strength identified in the survey data is the prevalence of caregivers utilizing a primary care healthcare provider: A large majority of respondents indicated that their children have a current main health provider. Respondents were also prompted to select what kind of facility they would try first to get care from if their child had a minor illness or injury that required non-urgent medical care. The two most common selections were a primary care provider (54%) or an urgent care facility (such as East Tennessee Children’s Urgent Care or Fast Pace Health) (25%; see Figure 7). Respondents were also asked how frequently they used different types of healthcare facilities (such as emergency rooms, telehealth, and primary care). The

most commonly used healthcare facilities were those of primary care doctors, with 87% of respondents having visited a primary care doctor for their children’s care at least once over the previous 12 months (see Table 5). One question on the survey asked where respondents got information about treating medical problems or improving health; primary care and urgent care doctors were by far the most frequently selected source of information (65.3%), with the second highest being the internet/social media (18.9%). Overall, these findings indicate that caregivers in East Tennessee are utilizing primary care as their main point of contact for their children’s healthcare.

**Figure 7: Caregivers’ First Facility Type Choice for Non-Urgent Medical Care**



**Table 5: Caregivers’ Use of Different Healthcare Facility Types Over Previous 12 Months**

	None	Once to three times	Four times or more
About how many times have you used a primary care doctor for your children in the last 12 months? (n=170)	21 (12%)	99 (58%)	50 (29%)
About how many times have you used an emergency room for your children in the last 12 months? (n=169)	97 (57%)	69 (41%)	3 (2%)
About how many times have you used a walk-in clinic for your children in the last 12 months? (n=169)	70 (41%)	83 (49%)	16 (10%)
About how many times have you used an urgent care for your children in the last 12 months? (n=169)	85 (50%)	71 (42%)	13 (8%)
About how many times have you used a school based health center/ school nurse for your children in the last 12 months? (n=139)	94 (68%)	39 (28%)	6 (4%)

### Children’s Health and Vaccinations

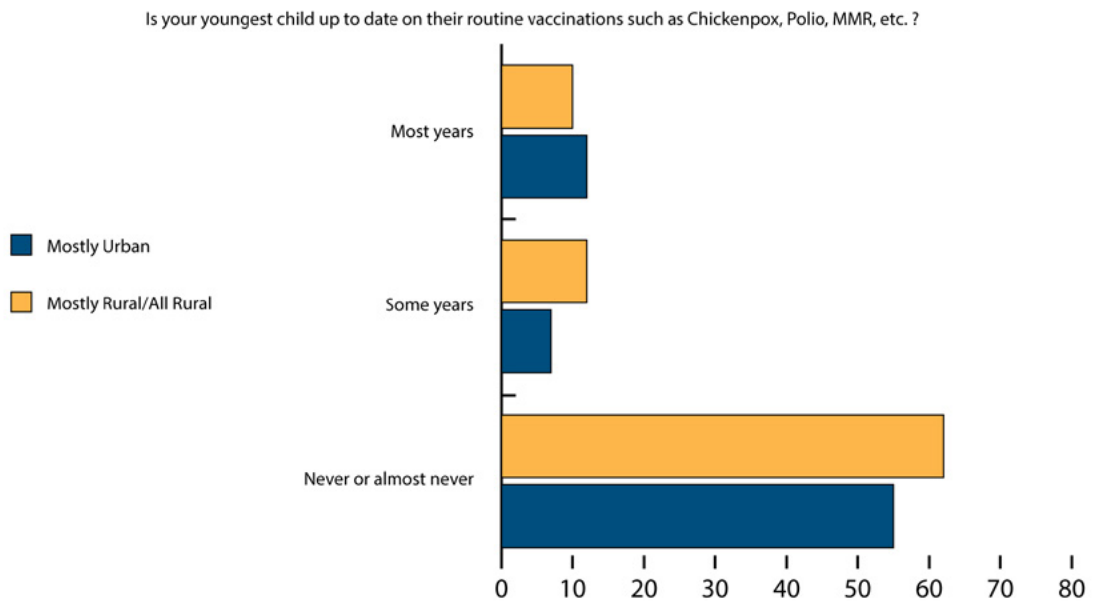
Overall, respondents indicated that their children are in very good health with low likelihood of experiencing chronic health conditions. Respondents were asked to rate their children’s health over the last year on a scale of one (Very poor) to five (Excellent). The mean of children’s health reported from the sample was 4.0 (Very good). Additionally, 85% of respondents selected that none of their children have a chronic health condition. Among respondents who cared for at least one child with a chronic health condition (n = 26), the most commonly reported was asthma and allergies.

Respondents were asked whether their youngest child was up to date on routine vaccinations (e.g., Chickenpox, Polio, MMR), and how often their children receive their seasonal or yearly shots such as COVID-19

and Flu. Most (90%) respondents indicated that their youngest child is up to date on all routine vaccines. However some indicated that their child never or almost never receives their seasonal/yearly flu (35%) or COVID-19 (57%) vaccine.

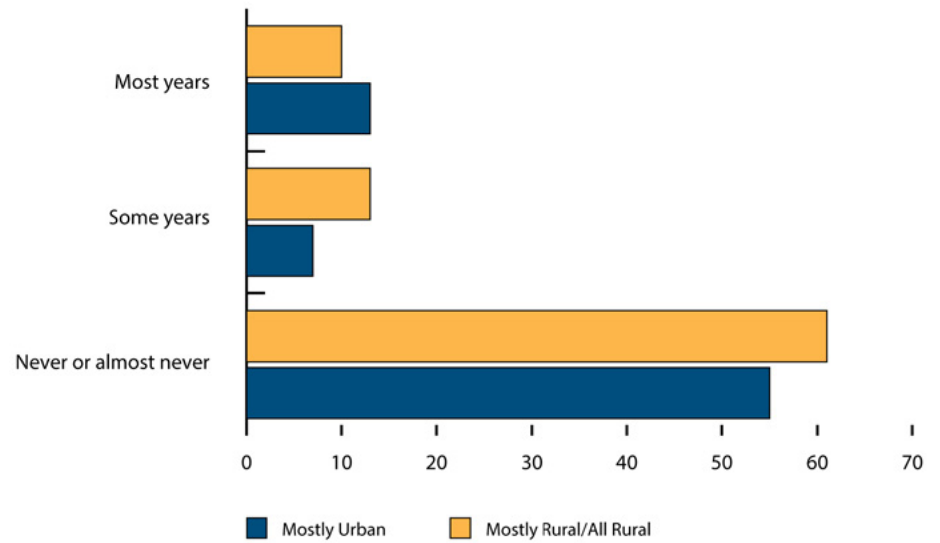
Given the lower rates of seasonal vaccines, children’s seasonal/yearly immunization rates were analyzed by how urban or rural each respondent’s county of residence is and the income of parent/guardian to see if there were any trends. Figures 8-10 show that those in urban areas reported higher routine, flu, and COVID-19 vaccine rates than those in mostly rural/all rural areas. This may be due to challenges with access to care for rural areas as reported in previous sections.

**Figure 8: Caregivers’ Routine Vaccination Uptake by County Level of Development**



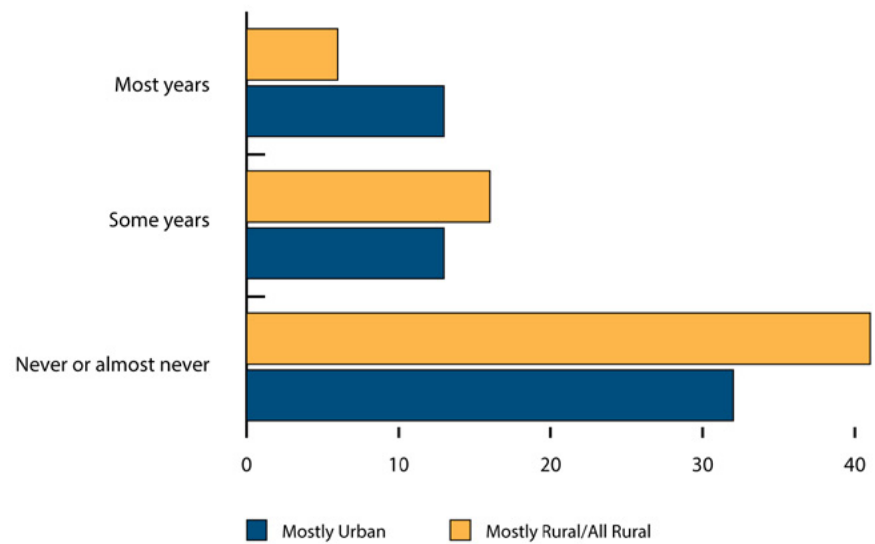
**Figure 9:  
Caregivers’  
COVID-19 Vaccine  
Uptake by  
County Level of  
Development**

For shots that are seasonal or yearly (like the flu shot), how often do your children get those shots? - COVID-19



**Figure 10:  
Caregivers’ Flu  
Vaccine Uptake by  
County Level of  
Development**

For shots that are seasonal or yearly (like the flu shot), how often do your children get those shots? - Flu



**Satisfaction with ETCH Facilities**

Respondents were asked to specify whether their children’s visits to a primary care doctor, emergency room, walk-in clinic, and/or urgent care, in the last 12 months were at facilities run by East Tennessee Children’s Hospital. Most respondents indicated that their children’s emergency room visits (67%) were at a facility run by East Tennessee Children’s Hospital, followed by urgent care visits (49%), primary care visits (46%), and walk-in clinic visits (35%).

Respondents who indicated that their child did visit a facility (i.e., emergency room, urgent care, primary care, walk-in clinic) run by ETCH were then asked to rate how satisfied they were with the visit(s) on a scale of 1 (Very unsatisfied) to 4 (Very satisfied). Notably, no respondents selected that they were very unsatisfied. Overall, respondents’ satisfaction with visits to East Tennessee Children’s Hospital run facilities was high (see Table 6).

**TABLE 6: Satisfaction with ETCH Facilities**

Overall, how satisfied were you with...	Mean (Standard Deviation)	1 Very unsatisfied	2 Somewhat unsatisfied	3 Somewhat satisfied	4 Very satisfied
...the primary care visits at facilities run by East Tennessee Children’s Hospital? (n=65)	3.8 (-0.4)	0 (0%)	1(2%)	11 (17%)	53 (82%)
...the emergency room visits at East Tennessee Children’s Hospital’s? (n=46)	3.8 (-0.5)	0 (0%)	1(2%)	9 (19%)	36 (78%)
...walk-in clinic visits at facilities run by East Tennessee Children’s Hospital? (n=32)	3.7 (-0.5)	0 (0%)	1 (3%)	6 (19%)	25 (78%)
...urgent care visits at facilities run by East Tennessee Children’s Hospital? (n=37)	3.7 (-0.5)	0 (0%)	0 (0%)	11 (30%)	26 (70%)

**Potential for Growth in Telehealth**

All survey respondents (not just caregivers) were asked whether they had ever used telehealth for themselves or their families and how willing they would be to use it in the future. Nearly half (46%) of respondents reported having never used telehealth. Among those who had used it, the willingness to continue using it was high; 63% indicated they would be very willing to use it in the future, and another 33% would be somewhat willing. Among those who had never used telehealth, 19% would be very willing to use it in the

future, and 50% were somewhat willing. One possible interpretation of these findings is once people try telehealth, they are more likely to use it again, and there is a substantial portion of the population in East Tennessee who have never tried it but are willing to. Given the access barriers regarding scheduling, transportation, and proximity identified earlier in this report, promoting and expanding telehealth might be a promising direction for reducing the difficulty of accessing care.

## 2025 ETCH CHNA Implementation Plan

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The Federal CHNA requirements also call for the creation of an implementation plan to address the community health needs identified in their CHNA studies. This section of the report describes a selection of ETCH's ongoing and upcoming efforts to help meet the community health needs identified in this CHNA.



### Addressing Healthcare Affordability

Making healthcare more affordable is one of the pressing community needs identified in the 2025 CHNA. ETCH is taking the following steps to address the affordability of its services.

- ETCH offers full financial services to patient families, including accepting multiple insurance types from private to Medicaid and offering supplemental financial services for noncovered expenses. The hospital's payer relations department is dedicated to insurance negotiations to help lower costs for families. ETCH's CoverKids program offers free health coverage for pregnant women and children who do not have insurance and who do not qualify for TennCare. Children aged 18 and under also get dental and vision benefits. Preventive health care is free. Sick visits and medication have very low co-pays, and pregnant women get prenatal, delivery and 60 days postpartum care.
- ETCH also offers charity care for any family who earns less than 250% of the current Federal Poverty guidelines. For example: In 2024, a family of four could earn up to \$78,000.00 to qualify. They now grant partial assistance up to 400% of federal poverty. These amounts are updated annually.
- In 2024, ETCH opened a specialty pharmacy to offer a larger range of medications. This new pharmacy allows for shorter waiting times and lower costs due to the Federal 340b program, which allows hospitals serving a substantial low-income population to offer lower prices for prescription drugs. This provides an immediate cut in cost for patients. If patients cannot afford copays, Children's Hospital Specialty Pharmacy staff will research available financial assistance programs to help reduce out-of-pocket expenses. The specialty pharmacy works with a number of foundations and manufacturer programs that provide financial assistance for specialty medications.
- The hospital's four urgent cares (with a fifth location coming in Fall 2025) are now operated by the ETCH healthcare system, which helps them streamline their billing and costs to patient families.
- Thanks to the purchase of new technology, such as their dental x-ray machine, patients no longer must go to a private dentist. This can reduce the number of appointments required for dental care and may save families additional time and money.

### Addressing Healthcare Accessibility

Findings from this CHNA show that residents of East Tennessee struggle with the logistics of finding healthcare for their children. Survey and qualitative data indicate that scheduling and attending appointments is difficult for families. Taking time off work, finding reliable transportation, having to travel long distances to appointments, and long appointment duration all take a toll on households trying to find healthcare for their children. ETCH is taking the following steps to reduce these accessibility costs.

- To make high quality healthcare more accessible, ETCH offers home health. Home health provides services patients can access in their own homes, including medical equipment needs, nursing care, and dietician services. Each year, the home health team sees over 1,000 children and serves 16 counties. From rehabilitation to skills to equipment and pharmacy needs, this 45-person team offers the same care a patient would receive when they visit one of ETCH's facilities.
- ETCH offers school telehealth for minor illnesses to make receiving care easier for the child and caregiver. With the help of the school nurse, they can test for strep throat, flu and Covid-19. They are also able to send a prescription to a pharmacy and give caregivers the details of the child's visit on their patient portal if they are unable to attend the virtual appointment. In 2024, 47 schools with this Telehealth option reported a total of 439 student visits.
- ETCH has four urgent care locations in Knoxville, Powell, Alcoa, and Sevierville to better serve families across the region. These locations are open nights and weekends when pediatric offices are closed, so families can still receive care that works with their busy schedules.

## Affordable Housing

Affordable housing was one of the top issues affecting children's community health identified in the CHNA. While ETCH recognizes the importance of housing stability as a social determinant of health, housing programs are outside the current scope of ETCH's services as a children's hospital. ETCH fully supports the efforts of other actors in the community to address this crucial need.

## Addressing Diet and Nutrition

The CHNA identified eating healthy food as a key component of children's health, and qualitative feedback revealed reasons providing healthy food options to children can be challenging. ETCH is taking the following steps to address children's nutrition in East Tennessee.



Scan to learn more about the Milk Drops Program

- The Healthy Ways Clinic focuses on helping families make healthier choices in their diets, physical activity and related behaviors. The program is created around and based on each individual case. It is also flexible for family and patient needs and differences.
- While healthy food is important throughout a child's life, at no time is it more important than in infancy. ETCH has implemented the Milk Drops Program, which is an evidence-based practice that promotes breastfeeding in their NICU. It includes supporting mothers to pump breastmilk and the feeding of the mother's own milk to the infant depending on their interest, gestational age, and clinical status. Since beginning this program, ETCH has seen improved parent experience from the standpoint of bonding, increased breastfeeding rates, and babies who are feeding by mouth with faster and more successful first feedings.
- ETCH's staff includes registered dietitians, registered dietetic technicians, and support staff whose ongoing work promotes healthy eating for ETCH's patients and families.
- ETCH promotes nutrition education through public awareness. ETCH's website includes an Eat and Live Healthy page, which provides extensive links to nutrition-related resources for professionals, parents, and children, and a Healthy Snacks page with healthy recipes.

## Addressing Healthy Screentime Habits

Children's healthy screen time habits was a major community issue identified in the CHNA. Healthy screen time can encompass a wide variety of issues, including use of social media, mobile devices, video games, streaming video applications, and television. A closely related issue is children cultivating "off screen" habits, like time spent playing, socializing, exercising, and exploring. ETCH is taking the following steps to help children develop healthy screen time habits.

- ETCH discusses the importance of healthy screen time habits across multiple platforms including their social channels and media. ETCH sees the need for more development and education around this topic and are currently developing strategies to address it.
- With their new online screening tool (the Child Health and Development Interactive System, or CHADIS), ETCH can ask teenagers about their screen time and social media use to help collect data and hold thoughtful discussions during their appointment.
- ETCH partners with Dick's House of Sport to hold educational and sports days to provide different offerings to the community, such as properly fitting children for sports gear and classes.
- Part of addressing healthy screen time habits is making sure children have opportunities to develop their passion for other kinds of play. ETCH recognizes the importance of summer camp as an environment in which children can cultivate those habits. ETCH currently operates three summer camp programs: Camp Cure for children with diabetes, Donald M. Gally Summer Camp for children with special needs, and Camp Eagle's Nest for patients from ETCH's hematology/oncology clinic.
- The Healthy Kids Club is offered all year and works with schools and summer camps to promote education and play. Healthy Kids Club includes the Breathe Easy Asthma Screening program, CPR classes, babysitter safety classes, and nutrition education. The Healthy Kids Club serves 40 children in each of these programs.

## Addressing Mental, Behavioral, and Emotional Health



Scan to watch an interview with Dr. Suzanne Rybczynski, CMO at Children's Hospital

No community health need was more prominent in the 2025 CHNA than improving children's access to mental, behavioral, and emotional healthcare and promoting public awareness and education on those topics. From the trauma of adverse childhood experiences to the stress of growing up in a world of social media, to the lingering impact of having lived through the COVID-19 pandemic, children today face many challenges to their mental health. ETCH is taking the following steps to promote improvements to children's mental, emotional, and behavioral health and healthcare.

- In 2024, ETCH moved psychology, psychiatry, and developmental behavior under one roof to become Pediatric Behavioral Health. Consolidating mental health services under one umbrella and in one location is intended to make it easier for patients to navigate their mental healthcare needs.
- ETCH has ongoing media coverage and social media content that covers behavioral and emotional health topics. This also includes tips for families and how their child can receive help if needed.
- ETCH holds a Mental Health campaign every May to raise funds for their mental health initiative fund. To help fill the gaps and build a brighter future for these children, this fund is helping East Tennessee Children's Hospital invest in licensed clinical social workers. They are actively certifying the social work team to become licensed clinical social workers.
- Beginning in 2004, ETCH partnered with a donor, United Cleanup Oak Ridge (UCOR), to help fund more behavioral health programs. UCOR has committed \$645,000 over a 5-year period. The UCOR funding is helping ETCH to add behavioral health consultants to their primary care offices (beginning with Oak Ridge Pediatrics) to better support their pediatricians and patients.
- ETCH established a relationship with the Helen Ross McNabb Center, one of the leading providers of mental healthcare in the region, to better serve patients' mental health needs. This partnership includes a facility that integrates mental health patient intake procedures with ETCH's emergency department.
- ETCH has invested in behavioral health software (CHADIS) to better track the mental health needs of patients in hopes of more effectively linking them to available mental healthcare resources.

## Addressing Treatment and Prevention of Substance Use Disorder

CHNA study participants identified alcohol and drug use as a major issue affecting the health and wellness of children in East Tennessee. Many children are impacted by their caregivers' substance use disorder, and children (especially teens) also face problems that stem from their own substance use. Not only did this CHNA identify substance use disorder as a major health problem for children, but it also found dissatisfaction with the availability of services for drug and alcohol treatment, prevention, and education. ETCH is taking the following steps to address substance use disorder and its impact in the community.

- In 2024, ETCH treated 163 infants for Neonatal Abstinence Syndrome. The Grow with Me Clinic is a care coordination service and outpatient clinic designed to serve at-risk children who have experienced intrauterine drug exposure or were diagnosed with and treated for Neonatal Abstinence Syndrome (NAS). The focus of the Grow with Me program is to address the medical, developmental and emotional needs of a child during the first five years of life.
- The NICU Cuddler Program includes trained volunteers who provide comfort and support to premature or ill infants in the Neonatal Intensive Care Unit (NICU).
- With cannabis use on the rise in this region, ETCH has increased its outreach to raise awareness of possible mental health implications associated with the overuse of this drug. Further, ETCH provides educational programming regarding the hazards of early cannabis use to families.

## Implementation Plan Summary

As a nonprofit hospital, East Tennessee Children's Hospital is committed to its charitable purpose of addressing the health needs of children in the community. Health needs are not limited to the treatment of illness and injury but also stem from the broad scope of economic and social circumstances in which people live. The 2025 CHNA identified priority areas for improving children's health, many of which point to areas that push the boundaries of standard medical models of healthcare. Nevertheless, ETCH continues to evolve programming to address these broader health and wellness needs. The programs and policies outlined in this implementation plan are meant to support families in East Tennessee and beyond as they grapple with healthcare affordability and accessibility, nutrition, development of healthy screen time habits, mental health, and substance use disorders.



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## Appendix A: 2025 ETCH CHNA Focus Group Questions & Protocol

### Introduction to Focus Group Script

Thank you so much for taking the time to join us today. My name is [Name of Facilitator], and I work for the UT College of Social Work Office of Research and Public Service. [Name of Assistant Facilitator] is here to take notes on our conversation. Our team has been contracted by East Tennessee Children's Hospital to conduct a Community Health Needs Assessment, or CHNA. This CHNA must consider both the area and the population of service to which the hospital is dedicated. For ETCH that service area includes a 16-county area in East Tennessee (Knox, Blount, Sevier, Jefferson, Anderson, Scott, Campbell, Claiborne, Morgan, Union, Grainger, Hamblen, Cocke, Monroe, Roane, and Loudon), and its service population, as a children's hospital, includes all the people living in that region from birth through 18 years of age. Every nonprofit hospital by law must conduct a CHNA at least every three years. The goal of the CHNA is to identify what this community sees as its leading health challenges for children birth to 18 years of age in the 16 East Tennessee counties - and for ETCH to use that knowledge to better serve this community's health needs. Today, we plan to ask about your thoughts and experiences regarding child and family health in your community, including what the community and ETCH are doing well, and what could be changed or improved. Our conversation today will last about 1 hour.

We believe that everything you tell us is important; therefore, we would like to record today's discussion so we can go back and listen to all the ideas and experiences you share. The researchers at SWORPS are the only people who will have access to the recordings. Our report will identify key themes from our discussion and may use some of your quotes; however, we will not use your name(s), and we will not include any unnecessary details that might give readers a clue to your identity. We request that everything that is said in this group be kept private and encourage you NOT to talk about what is discussed today outside of this group. We cannot control what is said outside of the group so we cannot guarantee confidentiality.

Do you have any questions before we begin? Is it OK with you for us to record our conversation?

Thank you! Before we get started exploring your thoughts on your community's health needs, let's take a moment to introduce the research team and the participants today. Please share with the group your first name, your position [exclude position for family advisory], what county you live in and/or work in, and what connects you to ETCH. We will go around the meeting and call on you for an introduction, but for the focus group questions, please simply answer on your own, we will not call on anyone for the remainder of the discussion.

## Focus Group Script

1. Take a minute to think about your ideal vision for a healthy community for children in East Tennessee. What are one or two features of your vision that stick out to you the most?	Probe: You might consider both medical needs and non-medical issues related to children's health and wellbeing.
2. In your opinion, what are the most important health issues for children in the communities where you live and work?	<p>[Process Note: We could write down answers they give us in the chat or use Zoom whiteboard for participants to refer to as they discuss]</p> <p>Probe: (If anyone makes a compelling or interesting statement). ... "Why do you think that is so?" or, "Can you say more about why you think this is so important?"</p>
3. What are the most important health issues for children in the broader ETCH service area?	<p>[Process Note: Here, we could show the map from their website. As issues are mentioned, we may want to share them via whiteboard, chat, or shared screen]</p> <p>Probe: (If anyone makes a compelling or interesting statement). ... "Why do you think that is so?" or, "Can you say more about why you think this is so important?"</p> <p>Follow up: Which of the issues you identified might you consider the most critical needs of...?</p> <ul style="list-style-type: none"> <li>• Young children aged birth to 5 years</li> <li>• School aged children 6-12 years</li> <li>• Teenagers, aged 13 years and older</li> </ul>
4. You've identified a number of important health needs for children. Besides age groupings, are there any other groups of children who face health challenges that are unique, different, or more severe? If so, what are those groups, and what are their challenges?	Probe: How, if at all, might race, class, or socio-economic status impact the health outcomes of children in our community?
5. What are one or two things ETCH is doing now that are having the most positive impact on the overall health of the children in East Tennessee?	Probe: Which ETCH services are playing the biggest role in filling the child and family healthcare gaps in this community?
6. What one or two things could ETCH do differently, or could begin to do, that would have the biggest positive impact on the overall health and wellness of the children in East Tennessee?	Probe: What are the biggest gaps in child and family healthcare services in the community, and how might ETCH better fill those gaps?
7. You already mentioned some things ETCH could be doing differently. Outside of ETCH, what else could be done, or could be done differently, to make your vision of a healthy community for children a reality?	<p>Process note: we may want to restate the things that could be done differently by ETCH.</p> <p>Probe: You might consider how the community could better address the major health, home-based, or other community problems facing children.</p>
8. Besides what ETCH has been doing, what are some of the other most important things currently being done to help make your vision of a healthy community for children a reality?	<p>Process note: we may want to restate the things that are already being done by ETCH.</p> <p>Probe: You might consider how the community effectively addresses the major health, home-based, or other community problems facing children.</p>

## Appendix B: Full Text of Survey

### East Tennessee Children's Hospital Community Health Needs Assessment (2025)

1. Would you like to complete this survey in English or Spanish?

[CONSENT]

East Tennessee Children's Hospital (ETCH), with University of Tennessee's Social Work Office of Research and Public Service (SWORPS), is doing a study to understand the health needs in the communities they serve. We'd love for you to share your thoughts by taking this survey. The study is a Community Health Needs Assessment (CHNA) and is required for nonprofit hospitals every three years. The goal is for ETCH to find out what the community thinks are the most important health issues and use this information to better help children and families in the area.

The risks of participating in this survey are small, just like most everyday activities. Some questions might make people feel uncomfortable, but others may feel okay answering them. Your name will not be asked in this survey, and we ask that you do not write your name or your family members' names in your answers. Your answers will stay private, and no one will know you took the survey.

You don't have to take this survey, and you can stop anytime if you start. The survey will take about 20 minutes to finish.

Do you want to continue with the survey?

- Yes
- No

### Section 1 - Demographics

First, we are going to ask some questions about you. These questions will help us see how different groups in our community might be affected.

1. Please select the East Tennessee county you live in. If you don't live in any of these East Tennessee counties, please select "none of these." **\*\*[REQUIRED Question] \*\***

[Knox, Blount, Sevier, Jefferson, Anderson, Scott, Campbell, Claiborne, Morgan, Union, Grainger, Hamblen, Cocke, Monroe, Roane, Loudon, None of these]-please put counties in alphabetical order

[If Q2=None of these, Exit survey:]

Exit Message: Because you live outside of the counties we're studying, you are ineligible for this survey. Thank you for your time! Please close this window to exit.

2. How long have you lived here? {years, months}

3. If the answer to 3 < 12 months, how long have you lived in an East Tennessee county (list counties or have a popup menu)

4. What is your age? Drop down 18-99

5. Are you of Hispanic, Latino/Latina, or Spanish origin?

- Yes
- No

6. With which race do you identify? Select all that apply.

American Indian/Alaska Native

- Black/African-American
- Asian/Pacific Islander
- White (non-Hispanic)
- Another race (Please specify): \_\_\_\_\_

7. What is your current relationship status?

- Single, never married
- Living with a partner
- Married
- Widowed
- Divorced or separated

8. Which of the following best describes your highest level of education?

- Less than high school
- Some high school, did not graduate
- High school graduate or GED (General Education Diploma)
- Some college credit, did not earn a degree
- Trade/technical/vocational program
- Associate degree (2-year program)
- Bachelor's degree
- Master's degree (or other post-graduate/professional training)
- Doctoral degree

9. What is your yearly household income? Include earnings from all adults in the home.

- Less than \$15,000 per year
- \$15,000 to 30,000
- \$30-50,000
- \$50-75,000
- \$75-100,000
- \$100-200,000
- More than 200,000

10. How do you describe your gender?

- A Man
- A Woman
- Something else: \_\_\_\_\_
- Prefer not to disclose

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## Section 2

Next, we want to know which health problems are most important for children in your community. We are looking at three age groups: under 5 years old, 6-12 years old, and 13-18 years old.

For each age group, choose the health issues that you think affect children the most in your community. If you think there is another important issue not listed, you can write it in.

10a) Please look at this list of community issues. In your opinion, which one affects the health and well-being of children under age 5 years in your community the most?

- Air or water quality
- Unhealthy housing (like lead paint, mold, crowded homes)
- Access to parks and places to exercise
- Health education for parents or kids
- Health care providers who share your race/ethnicity
- Education on parenting and supervision
- Teaching gun safety
- Domestic violence (like partner violence and child abuse)
- Parent's alcohol or illegal drug use (including babies being born addicted)
- Parents' smoking or vaping in the home
- Access to grocery stores with fresh food
- Jobs for parents
- Affordable housing

10b) Please look at this list of health behaviors. In your opinion, which one affects the health and well-being of children under age 5 years in your community the most?

- Getting enough exercise
- Use of seatbelts or car seats
- Eating healthy food
- Healthy use of screen time (like phones, tablets, or TV)
- Going to the dentist (yearly checkups)
- Going to the pediatrician or family doctor (yearly checkups)
- Going to the eye doctor
- Getting flu shots and other regular vaccines
- Promoting good mental health

10c) In your opinion, which service needs the most improvement in your neighborhood or community to help the health and well-being of children under 5 years old?

- More affordable prescription medicine
- More affordable health care
- Treatment for allergies or asthma
- Treatment for behavioral or emotional issues (like anxiety or uncontrollable behavior)
- Treatment for chronic diseases (like childhood diabetes)
- Screening and help for developmental delays (like not speaking or walking on time)
- Information on reducing obesity or promoting a healthy weight
- Drug or alcohol abuse prevention
- More types of healthcare providers or services that fit different cultures
- Services for children with disabilities

10d) Besides the issues you've already mentioned, are there any other problems affecting the health and well-being of children under 5 years old in your community? If there are no other issues you wish to include, please [select the next question].

11a) Please look at this list of community issues. In your opinion, which one affects the health and well-being of children 6-12 years old in your community the most?

- Air or water quality
- Unhealthy housing (like lead paint, mold, crowded homes)
- Access to parks and places to exercise
- Health education for parents or kids
- Health care providers who share your race/ethnicity
- Education on parenting and supervision
- Teaching gun safety
- Domestic violence (like partner violence and child abuse)
- Parent's alcohol or illegal drug use (including babies being born addicted)
- Parents' smoking or vaping in the home
- Access to grocery stores with fresh food
- Jobs for parents
- Affordable housing

11b) Please look at this list of health behaviors. In your opinion, which one affects the health and well-being of children 6-12 years old in your community the most?

- Getting enough exercise
- Use of seatbelts or car seats
- Eating healthy food
- Healthy use of screen time (like phones, tablets, or TV)
- Going to the dentist (yearly checkups)
- Going to the pediatrician or family doctor (yearly checkups)
- Going to the eye doctor
- Getting flu shots and other regular vaccines
- Promoting good mental health

11c) In your opinion, which service needs the most improvement in your neighborhood or community to help the health and well-being of children 6-12 years old?

- More affordable prescription medicine
- More affordable health care
- Treatment for allergies or asthma
- Treatment for behavioral or emotional issues (like anxiety or uncontrollable behavior)
- Treatment for chronic diseases (like childhood diabetes)
- Screening and help for developmental delays (like not speaking or walking on time)
- Information on reducing obesity or promoting a healthy weight
- Drug or alcohol abuse prevention
- More types of healthcare providers or services that fit different cultures
- Services for children with disabilities

11d) Besides the issues you've already mentioned, are there any other problems affecting the health and well-being of children aged 6 to 12 years old in your community? If there are no other issues you wish to include, please [select the next question].

12a) Please look at this list of community issues. In your opinion, which one affects the health and well-being of children 13-18 years old in your community the most?

- Air or water quality
- Unhealthy housing (like lead paint, mold, crowded homes)
- Access to parks and places to exercise
- Health education for parents or kids
- Health care providers who share your race/ethnicity
- Education on parenting and supervision
- Teaching gun safety
- Domestic violence (like partner violence and child abuse)
- Parent's alcohol or illegal drug use (including babies being born addicted)
- Parents' smoking or vaping in the home
- Access to grocery stores with fresh food
- Jobs for parents
- Affordable housing

12b) Please look at this list of health behaviors. In your opinion, which one affects the health and well-being of children 13-18 years old in your community the most?

- Getting enough exercise
- Use of seatbelts or car seats
- Eating healthy food
- Healthy use of screen time (like phones, tablets, or TV)
- Going to the dentist (yearly checkups)
- Going to the pediatrician or family doctor (yearly checkups)
- Going to the eye doctor
- Getting flu shots and other regular vaccines
- Promoting good mental health
- Smoking or vaping
- Use of alcohol or illegal drugs
- Sexually transmitted infections (STI) or teen pregnancy

12c) In your opinion, which service needs the most improvement in your neighborhood or community to help the health and well-being of children 13-18 years old?

- More affordable prescription medicine
- More affordable health care
- Treatment for allergies or asthma
- Treatment for behavioral or emotional issues (like anxiety or uncontrollable behavior)
- Treatment for chronic diseases (like childhood diabetes)
- Screening and help for developmental delays (like not speaking or walking on time)
- Information on reducing obesity or promoting a healthy weight
- Drug or alcohol abuse prevention
- More types of healthcare providers or services that fit different cultures
- Services for children with disabilities
- Access to reproductive care (birth control or other reproductive health issues)

12d) Besides the issues you've already mentioned, are there any other problems affecting the health and well-being of children aged 13 to 18 years old in your community? If there are no other issues you wish to include, please [select the next question].

**Section 3**

Thank you for sharing your thoughts about important issues for children in your area! Next, we'd like to ask some questions about getting health care in your community.

13a) In your opinion, which two problems make it hardest for children of all ages in your community to get health care, like wellness checkups, prescriptions, and urgent care?

- Cultural or religious beliefs
- Discrimination by providers based on income, gender, gender identity, race, or sexual orientation
- Distrust of doctors or the health care system
- Not enough health providers nearby
- Lack of insurance or not enough coverage
- Lack of transportation
- Not knowing about healthcare options or the system.
- Language barriers
- High cost of services or medications (including high co-pays and deductibles)
- Scheduling problems, like not being able to take time off work
- Immigration status of child or family members (for example, if the child or a family member is an undocumented immigrant)

13b) Which other topic(s) do you think make it harder for children of all ages in your community to get health care like wellness checkups, prescriptions, and urgent care? If there are no other issues, please [select the next question].

14a) In your opinion, which two issues make it hardest for children of all ages in your community to get mental health services, like counseling and psychiatric treatment?

- Discrimination by providers based on income, gender, gender identity, race, or sexual orientation
- Distrust of doctors or the health care system
- Not enough health providers nearby
- Lack of insurance or not enough coverage
- Lack of transportation
- Not knowing about mental health care options or the system.
- Language barriers
- High cost of services or medications (including high co-pays and deductibles)
- Scheduling problems, like not being able to take time off work
- Immigration status of child or family members (for example, if the child or a family member is an undocumented immigrant)
- Stigma around needing mental health services

14b) Which other topic(s) do you think make it harder for children of all ages in your community to get mental health care like counseling and psychiatric treatment? [If there are no other issues, please [select the next question].

**Section 4**

Thank you! Now we'd like to ask a few questions about the child and family health care services in your community.

15. How satisfied are you with the availability of these child and family healthcare services in your community?

*Programming note: on a 4-point scale of Very unsatisfied to Very Satisfied + Don't Know/Unsure*

- A pediatrician or primary care doctor for wellness checkups and preventive care
- Dental care
- Drug or alcohol treatment, prevention, or harm reduction services
- Emergency rooms
- Mental health care
- Prescription medication
- Reproductive health care (usually for ages 12 and older)
- Specialty care (like ENT, oncologist, allergist, dermatologist)
- Urgent care facilities
- Virtual appointments, like telemedicine or telehealth

16. How satisfied are you with the availability of these health education services in your community?

*Programming note: on a 4-point scale of Very unsatisfied to Very Satisfied + Don't Know/Unsure*

- Alcohol and drug use prevention
- Healthy eating habits and nutrition
- Importance of exercise
- Illness prevention (like washing hands to stop the spread of illness)
- Injury prevention (like bike safety)
- Positive mental health
- Positive relationships and communication skills
- Sex education, including STI and pregnancy prevention (usually for ages 12 and older)
- Vaccination education

17. Where do you and your family usually get information about treating medical problems or improving your health?

- Family or friends
- Health Department
- Internet / Social media
- Magazines
- Pharmacy
- Primary care doctor/Urgent care doctor

18. Have you ever used telehealth/telemedicine for you or your family? Telehealth is when you have an appointment with a healthcare provider over the internet.

- Yes
- No

19. How willing are you to use telehealth/telemedicine for your family's health care in the future?

- Very willing
- Somewhat willing
- Not very willing

**Section 5**

Thank you! Next, we are going to ask questions about you and your household.

20. Are you the parent or caregiver for a child under the age of 18 and make health care decisions for them?

- Yes
- No

21. Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes.

- Under 2 years old: \_\_\_\_\_
- 3-12 years old: \_\_\_\_\_
- 13-17 years old: \_\_\_\_\_
- 18-24 years old: \_\_\_\_\_
- 25-34 years old: \_\_\_\_\_
- 35-44 years old: \_\_\_\_\_
- 45-54 years old: \_\_\_\_\_
- 55-64 years old: \_\_\_\_\_
- 65 and over: \_\_\_\_\_

[If no to Q20, move to demographics in Section q34]

You said you were a parent or caregiver for at least one child under the age of 18, and that you make health care decisions for them. The following questions ask about health care for your child(ren).

22. Are the children in your household covered by health insurance?

- Yes, all are covered.
- No, none are covered.
- Some are covered, but some are not.
- I'm not sure

23. [if not none] What types of health insurance plans cover the children in your household? Select all that apply.

- Employer-sponsored insurance
- Marketplace insurance / Get Covered Tennessee
- Cover Kids
- TENNcare
- TriCare
- Other. (Please specify): \_\_\_\_\_

24. Do you currently have someone who is the children's main health provider? This could be your child's doctor or anyone they see regularly for checkups, shots, colds, etc.

- Yes
- No
- Unsure

25. How would you rate your children's health on average over the last year?

- Excellent
- Very Good
- Good
- Poor
- Very Poor

26. Do any of your children have a chronic health condition? (examples: asthma, Type 1 Diabetes, etc.)

- No
- Yes

If yes, please list: [TEXT BOX]

27. Do any of your children identify as transgender?

- Yes
- No
- Prefer not to respond

If transgender=yes, display 28 and 29

28. Has your transgender child ever received medical or mental health care related to supporting their transgender identity, also known as gender affirming care?

- Yes
- No

29. How interested would you be in learning more about medical and mental health supports available in your community to support your child in their transgender identity?

[Not at all interested, A little interested, Somewhat interested, very interested]

30. If your child had a minor illness or injury and required non-urgent medical care, which would you try FIRST to get them care?

- Primary care provider
- Clinic (such as the CVS minute clinic or Kroger Little Clinic)
- Urgent care facility (such as East Tennessee Children’s Urgent Care or Fast Pace Health)
- Emergency room
- Telemedicine
- School-based health center / school nurse
- Something else (please explain): \_\_\_\_\_

31a. About how many times have you used these different types of medical care for your children in the last 12 months?

	None	Once to Three Times	Four Times or More
<b>Primary Care Doctor</b>			
<b>Emergency room</b>			
<b>Walk-in Clinic</b>			
<b>Urgent Care</b>			
<b>School based health center / School Nurse (display if any children of school age)</b>			

31b) [display if primary care != None]

Did any of your children's primary care visits take place at a facility run by East Tennessee Children's Hospital?

- Yes
- No
- Unsure

31c) Display If 31b=yes

Overall, how satisfied were you with the primary care visits at facilities run by East Tennessee Children's Hospital?

[Very Unsatisfied, Somewhat unsatisfied, Somewhat satisfied, Very Satisfied]

31d) [display if Emergency Room != None]

Were any of your children's emergency room visits at a facility run by East Tennessee Children's Hospital?

- Yes
- No
- Unsure

31e) [display if 31d=Yes]

Overall, how satisfied were you with the emergency room visits at East Tennessee Children's Hospital's? [Very Unsatisfied, Somewhat unsatisfied, Somewhat satisfied, Very Satisfied]

31f) [display if walk-in clinic != None] Were any of your walk-in clinic visits at a facility run by East Tennessee Children's Hospital?

- Yes
- No
- Unsure

31g) [display if 32 f = Yes] Overall, how satisfied were you with walk-in clinic visits at facilities run by East Tennessee Children's Hospital? [Very Unsatisfied, Somewhat unsatisfied, Somewhat satisfied, Very Satisfied]

31h) display if urgent care != None] Were any of your urgent care visits at a facility run by East Tennessee Children's Hospital?

- Yes
- No
- Unsure

31i) [display if 32 h=yes]

Overall, how satisfied were you with urgent care visits at facilities run by East Tennessee Children's Hospital? [Very Unsatisfied, Somewhat unsatisfied, Somewhat satisfied, Very Satisfied]

32. Is your youngest child up to date on their routine vaccinations such as Chickenpox, Polio, MMR, etc.?

- My child is up to date on all routine vaccines.
- My child has some, but not all, routine vaccines.
- My child does not have any routine vaccines.

33. For shots that are seasonal or yearly (like the flu shot), how often do your children get those shots? [Never or almost never, Some years, Most years, Every year]  
[PROGRAMMING NOTE: MATRIX Question]

- Covid-19
- Flu

34. If you have other thoughts or comments about the health and healthcare needs of children in your community, please share them below.

- [TEXT BOX]

## Appendix C: Frequency Tables and Descriptive Statistics for CHNA Web Survey

This appendix displays the results of each survey question except ones with open-ended text responses. The order of tables follows the order of the survey questions (the full text of the survey is available in Appendix B). For questions whose answers are categorical, responses are presented as frequency tables, and descriptive statistics are presented for numeric responses. For some questions, bar charts are included to aid interpretation.

- Each frequency table contains the following information:
- Frequency: The total number of survey respondents who chose that category.
- Percent: The percentage of survey participants who chose that category out of the total number of people who took the survey.
- Valid Percent: The percentage of respondents who chose that category out of the total number of respondents who answered that question.
- Cumulative Percent: The sum of each “valid percent” who chose that answer and the percent who answered any of the preceding answers in the table.
- Missing: the number of respondents who did not answer the question for one of three reasons: they were not shown that question because of the survey’s skip/display logic; they saw the question but chose not to answer it; or, they stopped taking the survey before they could see the question.

**Please select the East Tennessee county you live in. If you don’t live in any of these East Tennessee counties, please select “none of these.”**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Anderson	49	9.2	9.2	9.2
	Blount	42	7.9	7.9	17.1
	Campbell	19	3.6	3.6	20.7
	Claiborne	11	2.1	2.1	22.7
	Cocke	16	3.0	3.0	25.8
	Grainger	13	2.4	2.4	28.2
	Hamblen	22	4.1	4.1	32.3
	Jefferson	26	4.9	4.9	37.2

Knox	207	38.9	38.9	76.1
Loudon	23	4.3	4.3	80.5
Monroe	16	3.0	3.0	83.5
Morgan	7	1.3	1.3	84.8
Roane	23	4.3	4.3	89.1
Scott	5	.9	.9	90.0
Sevier	46	8.6	8.6	98.7
Union	7	1.3	1.3	100.0
Total	532	100.0	100.0	

**Number of years in current county**

N	Valid	523
	Missing	9
Mean		20.05
Median		15.08
Std. Deviation		17.89
Minimum		.08
Maximum		78.17
Percentiles	25	5.17
	50	15.08
	75	30.00

**What is your age?**

N	Valid	532
	Missing	0
Mean		45.91
Median		44.00
Std. Deviation		16.4
Minimum		18
Maximum		90
Percentiles	25	33.00

	50	44.00
	75	59.00

**Are you of Hispanic or Latino/Latina origin?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	498	93.6	96.7	96.7
	Yes	17	3.2	3.3	100.0
	Total	515	96.8	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	6	1.1		
	Total	17	3.2		
Total		532	100.0		

**With which race(s) do you identify? Select all that apply. - American Indian/Alaska Native**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	505	94.9	97.5	97.5
	American Indian/Alaska Native	13	2.4	2.5	100.0
	Total	518	97.4	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	3	.6		
	Total	14	2.6		
Total		532	100.0		

**With which race(s) do you identify? Select all that apply. - Black/African-American**

		Frequency	Percent	Valid Percent	Cumulative Percent
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Valid	0	502	94.4	96.9	96.9
	Black/African-American	16	3.0	3.1	100.0
	Total	518	97.4	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	3	.6		
	Total	14	2.6		
Total		532	100.0		

**With which race(s) do you identify? Select all that apply. - Asian/Pacific Islander**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	510	95.9	98.5	98.5
	Asian/Pacific Islander	8	1.5	1.5	100.0
	Total	518	97.4	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	3	.6		
	Total	14	2.6		
Total		532	100.0		

**With which race(s) do you identify? Select all that apply. - White**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	22	4.1	4.2	4.2
	White	496	93.2	95.8	100.0
	Total	518	97.4	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	3	.6		
	Total	14	2.6		
Total		532	100.0		

**With which race(s) do you identify? Select all that apply. - Another race (Please specify):**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	514	96.6	99.2	99.2
	Another race (Please specify):	4	.8	.8	100.0
	Total	518	97.4	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	3	.6		
	Total	14	2.6		
Total		532	100.0		

<b>With which race(s) do you identify? Select all that apply (combined) (N=518)</b>			
	Race	Count*	Valid Percent*
Valid	American Indian/ Alaska Native	13	2.5
	Black/African American	16	3.1
	Asian/Pacific Islander	8	1.5
	White	496	95.8
	Another race	4	0.8
Missing	Respondent dropped off	11	
	Respondent saw the question and chose not to answer.	3	
*Respondents could choose more than one race. Sum of percentages exceeds 100%.			

**What is your yearly household income? Include earnings from all adults in the home.**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than \$15,000 per year	64	12.0	12.3	12.3
	\$15,000-\$30,000	88	16.5	17.0	29.3
	\$30,001-\$50,000	101	19.0	19.5	48.7
	\$50,001-\$75,000	90	16.9	17.3	66.1
	\$75,001-\$100,000	67	12.6	12.9	79.0
	\$100,001-\$200,000	83	15.6	16.0	95.0
	More than \$200,000 per year	26	4.9	5.0	100.0
	Total	519	97.6	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	2	.4		
	Total	13	2.4		
Total		532	100.0		

**What is your current relationship status?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Single, never married	97	18.2	18.7	18.7
	Living with a partner	73	13.7	14.1	32.8
	Married	248	46.6	47.8	80.5
	Widowed	30	5.6	5.8	86.3
	Divorced or separated	71	13.3	13.7	100.0
	Total	519	97.6	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	2	.4		
	Total	13	2.4		
Total		532	100.0		

### What is your highest level of education?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than high school	8	1.5	1.5	1.5
	Some high school, did not graduate	22	4.1	4.2	5.8
	High school graduate or GED (General Education Diploma)	152	28.6	29.3	35.1
	Some college credit, did not earn a degree	91	17.1	17.5	52.6
	Trade/Technical/Vocational program	23	4.3	4.4	57.0
	Associate's degree (2-year program)	56	10.5	10.8	67.8
	Bachelor's degree	95	17.9	18.3	86.1
	Master's degree (or other post-graduate/professional training)	59	11.1	11.4	97.5
	Doctoral degree	13	2.4	2.5	100.0
	Total	519	97.6	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	2	.4		
	Total	13	2.4		
Total		532	100.0		

### How do you describe your gender?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	A Man	149	28.0	29.0	29.0

	A Woman	359	67.5	70.0	99.0
	Something else. (Please specify):	5	.9	1.0	100.0
	Total	513	96.4	100.0	
Missing	Respondent dropped off	11	2.1		
	Respondent saw the question and chose not to answer	3	.6		
	Don't know / Unsure / NA / Prefer not to respond	5	.9		
	Total	19	3.6		
Total		532	100.0		

**Please look at this list of community issues. In your opinion, which one affects the health and well-being of children under age 5 in your community the most?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Air or water quality	12	2.3	2.4	2.4
	Unhealthy housing (like lead paint, mold, crowded homes)	33	6.2	6.6	9.0
	Access to parks and places to exercise	10	1.9	2.0	11.0
	Health education for parents or kids	38	7.1	7.6	18.6
	Health care providers who share your race/ethnicity	6	1.1	1.2	19.8
	Education on parenting and supervision	40	7.5	8.0	27.7
	Teaching gun safety	7	1.3	1.4	29.1

	Domestic violence (like partner violence and child abuse)	29	5.5	5.8	34.9
	Parents' alcohol or illegal drug use (including babies being born addicted)	114	21.4	22.8	57.7
	Parents' smoking or vaping in the home	40	7.5	8.0	65.7
	Access to grocery stores with fresh food	17	3.2	3.4	69.1
	Jobs for parents	38	7.1	7.6	76.6
	Affordable housing	117	22.0	23.4	100.0
	Total	501	94.2	100.0	
Missing	Respondent dropped off	31	5.8		
	Total	532	100.0		

**Please look at this list of health behaviors. In your opinion, which one affects the health and well-being of children under age 5 in your community the most?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Getting enough exercise	40	7.5	8.0	8.0
	Use of seatbelts or car seats	22	4.1	4.4	12.5
	Eating healthy food	137	25.8	27.6	40.0
	Healthy use of screen time (like phones, tablets, or TV)	92	17.3	18.5	58.6
	Going to the dentist (yearly checkups)	20	3.8	4.0	62.6
	Going to the pediatrician or family doctor (yearly checkups)	79	14.8	15.9	78.5
	Going to the eye doctor	3	.6	.6	79.1

	Getting flu shots and other regular vaccines	53	10.0	10.7	89.7
	Promoting good mental health	51	9.6	10.3	100.0
	Total	497	93.4	100.0	
Missing	Respondent dropped off	31	5.8		
	Respondent saw the question and chose not to answer	4	.8		
	Total	35	6.6		
Total		532	100.0		

**In your opinion, which service needs the most improvement in your neighborhood or community to help the health and well-being of children under 5 years old?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	More affordable prescription medicine	30	5.6	6.0	6.0
	More affordable health care	147	27.6	29.4	35.4
	Treatment for allergies or asthma	12	2.3	2.4	37.8
	Treatment for behavioral or emotional issues (like anxiety or uncontrollable behavior)	91	17.1	18.2	56.0
	Treatment for chronic diseases (like childhood diabetes)	13	2.4	2.6	58.6
	Screening and help for developmental delays (like not speaking or walking on time)	53	10.0	10.6	69.2

	Information on reducing obesity or promoting a healthy weight	48	9.0	9.6	78.8
	Drug or alcohol abuse prevention	47	8.8	9.4	88.2
	More types of healthcare providers or services that fit different cultures	22	4.1	4.4	92.6
	Services for children with disabilities	37	7.0	7.4	100.0
	Total	500	94.0	100.0	
Missing	Respondent dropped off	31	5.8		
	Respondent saw the question and chose not to answer	1	.2		
	Total	32	6.0		
Total		532	100.0		

**Please look at this list of community issues. In your opinion, which one affects the health and well-being of children 6-12 years old in your community the most?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Air or water quality	12	2.3	2.5	2.5
	Unhealthy housing (like lead paint, mold, crowded homes)	24	4.5	4.9	7.4
	Access to parks and places to exercise	26	4.9	5.4	12.8
	Health education for parents or kids	49	9.2	10.1	22.9
	Health care providers who share your race/ethnicity	8	1.5	1.6	24.5
	Education on parenting and supervision	47	8.8	9.7	34.2
	Teaching gun safety	20	3.8	4.1	38.4
	Domestic violence (like partner violence and child abuse)	38	7.1	7.8	46.2
	Parents' alcohol or illegal drug use (including babies being born addicted)	84	15.8	17.3	63.5
	Parents' smoking or vaping in the home	33	6.2	6.8	70.3
	Access to grocery stores with fresh food	25	4.7	5.2	75.5
	Jobs for parents	28	5.3	5.8	81.2
	Affordable housing	91	17.1	18.8	100.0
	Total	485	91.2	100.0	
Missing	Respondent dropped off	44	8.3		
	Respondent saw the question and chose not to answer	3	.6		

Total	47	8.8		
Total	532	100.0		

**Please look at this list of health behaviors. In your opinion, which one affects the health and well-being of children 6-12 years old in your community the most?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Getting enough exercise	61	11.5	12.6	12.6
	Use of seatbelts or car seats	16	3.0	3.3	15.9
	Eating healthy food	90	16.9	18.6	34.4
	Healthy use of screen time (like phones, tablets, or TV)	126	23.7	26.0	60.4
	Going to the dentist (yearly checkups)	21	3.9	4.3	64.7
	Going to the pediatrician or family doctor (yearly checkups)	52	9.8	10.7	75.5
	Going to the eye doctor	4	.8	.8	76.3
	Getting flu shots and other regular vaccines	32	6.0	6.6	82.9
	Promoting good mental health	83	15.6	17.1	100.0
	Total	485	91.2	100.0	
	Missing	Respondent dropped off	44	8.3	
Respondent saw the question and chose not to answer		3	.6		
Total		47	8.8		
Total		532	100.0		

**In your opinion, which service needs the most improvement in your neighborhood or community to help the health and well-being of children 6-12 years old?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	More affordable prescription medicine	10	1.9	2.1	2.1
	More affordable health care	115	21.6	23.7	25.8
	Treatment for allergies or asthma	9	1.7	1.9	27.6
	Treatment for behavioral or emotional issues (like anxiety or uncontrollable behavior)	142	26.7	29.3	56.9
	Treatment for chronic diseases (like childhood diabetes)	12	2.3	2.5	59.4
	Screening and help for developmental delays (like not speaking or walking on time)	33	6.2	6.8	66.2
	Information on reducing obesity or promoting a healthy weight	53	10.0	10.9	77.1
	Drug or alcohol abuse prevention	54	10.2	11.1	88.2
	More types of healthcare providers or services that fit different cultures	20	3.8	4.1	92.4
	Services for children with disabilities	37	7.0	7.6	100.0
	Total	485	91.2	100.0	
Missin	Respondent dropped off	44	8.3		

9	Respondent saw the question and chose not to answer	3	.6		
	Total	47	8.8		
Total		532	100.0		

**Please look at this list of community issues. In your opinion, which one affects the health and well-being of children 13-18 years old in your community the most?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Air or water quality	12	2.3	2.5	2.5
	Unhealthy housing (like lead paint, mold, crowded homes)	20	3.8	4.1	6.6
	Access to parks and places to exercise	17	3.2	3.5	10.1
	Health education for parents or kids	45	8.5	9.3	19.4
	Health care providers who share your race/ethnicity	4	.8	.8	20.2
	Education on parenting and supervision	54	10.2	11.2	31.4
	Teaching gun safety	57	10.7	11.8	43.2
	Domestic violence (like partner violence and child abuse)	54	10.2	11.2	54.3
	Parents' alcohol or illegal drug use (including babies being born addicted)	92	17.3	19.0	73.3
	Parents' smoking or vaping in the home	25	4.7	5.2	78.5
	Access to grocery stores with fresh food	19	3.6	3.9	82.4

	Jobs for parents	21	3.9	4.3	86.8
	Affordable housing	64	12.0	13.2	100.0
	Total	484	91.0	100.0	
Missing	Respondent dropped off	45	8.5		
	Respondent saw the question and chose not to answer	3	.6		
	Total	48	9.0		
Total		532	100.0		

**Please look at this list of health behaviors. In your opinion, which one affects the health and well-being of children 13-18 years old in your community the most?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Getting enough exercise	22	4.1	4.5	4.5
	Use of seatbelts or car seats	4	.8	.8	5.4
	Eating healthy food	44	8.3	9.1	14.4
	Healthy use of screen time (like phones, tablets, or TV)	82	15.4	16.9	31.3
	Going to the dentist (yearly checkups)	8	1.5	1.6	33.0
	Going to the pediatrician or family doctor (yearly checkups)	20	3.8	4.1	37.1
	Going to the eye doctor	4	.8	.8	37.9
	Getting flu shots and other regular vaccines	11	2.1	2.3	40.2
	Promoting good mental health	81	15.2	16.7	56.9
	Smoking or vaping	48	9.0	9.9	66.8
	Use of alcohol or illegal drugs	89	16.7	18.4	85.2

	Sexually Transmitted Infections (STIs) or teen pregnancy	72	13.5	14.8	100.0
	Total	485	91.2	100.0	
Missing	Respondent dropped off	45	8.5		
	Respondent saw the question and chose not to answer	2	.4		
	Total	47	8.8		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - A pediatrician or primary care doctor for wellness checkups and preventative care**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	28	5.3	6.4	6.4
	Unsatisfied	69	13.0	15.8	22.1
	Satisfied	241	45.3	55.0	77.2
	Very Satisfied	100	18.8	22.8	100.0
	Total	438	82.3	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	2	.4		
	Don't know / Unsure / NA / Prefer not to respond	45	8.5		
	Total	94	17.7		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Dental care**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	44	8.3	9.9	9.9
	Unsatisfied	114	21.4	25.7	35.7
	Satisfied	222	41.7	50.1	85.8
	Very Satisfied	63	11.8	14.2	100.0
	Total	443	83.3	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	4	.8		
	Don't know / Unsure / NA / Prefer not to respond	38	7.1		
	Total	89	16.7		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Vision Care**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	30	5.6	6.7	6.7
	Unsatisfied	92	17.3	20.7	27.4
	Satisfied	250	47.0	56.2	83.6
	Very Satisfied	73	13.7	16.4	100.0
	Total	445	83.6	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	1	.2		

	Don't know / Unsure / NA / Prefer not to respond	39	7.3		
	Total	87	16.4		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Drug or alcohol treatment, prevention, or harm reduction services**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	61	11.5	16.1	16.1
	Unsatisfied	154	28.9	40.7	56.9
	Satisfied	129	24.2	34.1	91.0
	Very Satisfied	34	6.4	9.0	100.0
	Total	378	71.1	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	3	.6		
	Don't know / Unsure / NA / Prefer not to respond	104	19.5		
	Total	154	28.9		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Emergency rooms**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	36	6.8	8.0	8.0
	Unsatisfied	103	19.4	22.8	30.8
	Satisfied	241	45.3	53.4	84.3

	Very Satisfied	71	13.3	15.7	100.0
	Total	451	84.8	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	2	.4		
	Don't know / Unsure / NA / Prefer not to respond	32	6.0		
	Total	81	15.2		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Mental health care**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	65	12.2	15.7	15.7
	Unsatisfied	163	30.6	39.5	55.2
	Satisfied	142	26.7	34.4	89.6
	Very Satisfied	43	8.1	10.4	100.0
	Total	413	77.6	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	6	1.1		
	Don't know / Unsure / NA / Prefer not to respond	66	12.4		
	Total	119	22.4		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Prescription medication**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	30	5.6	6.7	6.7
	Unsatisfied	76	14.3	16.9	23.6
	Satisfied	266	50.0	59.2	82.9
	Very Satisfied	77	14.5	17.1	100.0
	Total	449	84.4	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	2	.4		
	Don't know / Unsure / NA / Prefer not to respond	34	6.4		
	Total	83	15.6		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Reproductive health care (usually for ages 12 and older)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	51	9.6	14.0	14.0
	Unsatisfied	111	20.9	30.6	44.6
	Satisfied	167	31.4	46.0	90.6
	Very Satisfied	34	6.4	9.4	100.0
	Total	363	68.2	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	3	.6		
	Don't know / Unsure / NA / Prefer not to respond	119	22.4		
	Total	169	31.8		

Total	532	100.0		
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**How satisfied are you with the availability of these child and family healthcare services in your community? - Specialty care (like ENT, oncologist, allergist, dermatologist)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	41	7.7	9.7	9.7
	Unsatisfied	114	21.4	27.0	36.6
	Satisfied	211	39.7	49.9	86.5
	Very Satisfied	57	10.7	13.5	100.0
	Total	423	79.5	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	3	.6		
	Don't know / Unsure / NA / Prefer not to respond	59	11.1		
	Total	109	20.5		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Urgent care facilities**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	25	4.7	5.6	5.6
	Unsatisfied	86	16.2	19.1	24.7
	Satisfied	244	45.9	54.2	78.9
	Very Satisfied	95	17.9	21.1	100.0
	Total	450	84.6	100.0	
Missing	Respondent dropped off	47	8.8		

g	Respondent saw the question and chose not to answer	4	.8		
	Don't know / Unsure / NA / Prefer not to respond	31	5.8		
	Total	82	15.4		
Total		532	100.0		

**How satisfied are you with the availability of these child and family healthcare services in your community? - Virtual appointments, like telemedicine or telehealth**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	27	5.1	7.2	7.2
	Unsatisfied	72	13.5	19.1	26.3
	Satisfied	221	41.5	58.8	85.1
	Very Satisfied	56	10.5	14.9	100.0
	Total	376	70.7	100.0	
Missing	Respondent dropped off	47	8.8		
	Respondent saw the question and chose not to answer	5	.9		
	Don't know / Unsure / NA / Prefer not to respond	104	19.5		
	Total	156	29.3		
Total		532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Alcohol and drug use prevention**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	69	13.0	17.1	17.1

	Unsatisfied	164	30.8	40.7	57.8
	Satisfied	141	26.5	35.0	92.8
	Very Satisfied	29	5.5	7.2	100.0
	Total	403	75.8	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	2	.4		
	Don't know / Unsure / NA / Prefer not to respond	77	14.5		
	Total	129	24.2		
Total		532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Healthy eating habits and nutrition**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	37	7.0	8.7	8.7
	Unsatisfied	175	32.9	41.1	49.8
	Satisfied	178	33.5	41.8	91.5
	Very Satisfied	36	6.8	8.5	100.0
	Total	426	80.1	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	4	.8		
	Don't know / Unsure / NA / Prefer not to respond	52	9.8		
	Total	106	19.9		
Total		532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Importance of exercise**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	42	7.9	9.9	9.9
	Unsatisfied	148	27.8	34.7	44.6
	Satisfied	191	35.9	44.8	89.4
	Very Satisfied	45	8.5	10.6	100.0
	Total	426	80.1	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	4	.8		
	Don't know / Unsure / NA / Prefer not to respond	52	9.8		
	Total	106	19.9		
Total		532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Illness prevention (like washing hands to stop the spread of illness)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	31	5.8	7.1	7.1
	Unsatisfied	110	20.7	25.3	32.4
	Satisfied	241	45.3	55.4	87.8
	Very Satisfied	53	10.0	12.2	100.0
	Total	435	81.8	100.0	
Missing	Respondent dropped off	50	9.4		

9	Respondent saw the question and chose not to answer	2	.4		
	Don't know / Unsure / NA / Prefer not to respond	45	8.5		
	Total	97	18.2		
Total		532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Injury prevention (like bike safety)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	24	4.5	6.0	6.0
	Unsatisfied	101	19.0	25.1	31.0
	Satisfied	237	44.5	58.8	89.8
	Very Satisfied	41	7.7	10.2	100.0
	Total	403	75.8	100.0	
Missing	Respondent dropped off	50	9.4		
	9 Respondent saw the question and chose not to answer	8	1.5		
	Don't know / Unsure / NA / Prefer not to respond	71	13.3		
	Total	129	24.2		
	Total	532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Positive mental health**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	56	10.5	13.5	13.5
	Unsatisfied	168	31.6	40.5	54.0
	Satisfied	162	30.5	39.0	93.0
	Very Satisfied	29	5.5	7.0	100.0
	Total	415	78.0	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	3	.6		
	Don't know / Unsure / NA / Prefer not to respond	64	12.0		
	Total	117	22.0		
Total		532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Positive relationships and communication skills**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	46	8.6	11.1	11.1
	Unsatisfied	161	30.3	38.9	50.0
	Satisfied	163	30.6	39.4	89.4
	Very Satisfied	44	8.3	10.6	100.0
	Total	414	77.8	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	1	.2		
	Don't know / Unsure / NA / Prefer not to respond	67	12.6		

Total	118	22.2		
Total	532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Sex education, including STI and pregnancy prevention (usually for ages 12 and older)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	88	16.5	22.9	22.9
	Unsatisfied	144	27.1	37.4	60.3
	Satisfied	129	24.2	33.5	93.8
	Very Satisfied	24	4.5	6.2	100.0
	Total	385	72.4	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	2	.4		
	Don't know / Unsure / NA / Prefer not to respond	95	17.9		
	Total	147	27.6		
Total		532	100.0		

**How satisfied are you with the availability of these health education services in your community? - Vaccination education**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Unsatisfied	59	11.1	14.0	14.0
	Unsatisfied	111	20.9	26.3	40.3
	Satisfied	202	38.0	47.9	88.2
	Very Satisfied	50	9.4	11.8	100.0

	Total	422	79.3	100.0	
Missin g	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	3	.6		
	Don't know / Unsure / NA / Prefer not to respond	57	10.7		
	Total	110	20.7		
Total		532	100.0		

**Where do you and your family usually get information about treating medical problems or improving your health? - Selected Choice**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Family or friends	32	6.0	6.7	6.7
	Health Department	21	3.9	4.4	11.0
	Internet / Social media	91	17.1	18.9	29.9
	Magazines	1	.2	.2	30.1
	Pharmacy	9	1.7	1.9	32.0
	Primary care doctor / Urgent care doctor	314	59.0	65.3	97.3
	Something else:	13	2.4	2.7	100.0
	Total	481	90.4	100.0	
Missin g	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	1	.2		
	Total	51	9.6		
Total		532	100.0		

**Have you ever used telehealth/telemedicine for you or your family? Telehealth is when you have an appointment with a healthcare provider over the internet.**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	220	41.4	45.7	45.7
	Yes	261	49.1	54.3	100.0
	Total	481	90.4	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	1	.2		
	Total	51	9.6		
Total		532	100.0		

**How willing are you to use telehealth/telemedicine for your family's health care in the future?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Not very willing	80	15.0	16.6	16.6
	Somewhat willing	195	36.7	40.5	57.1
	Very willing	207	38.9	42.9	100.0
	Total	482	90.6	100.0	
Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Are you the parent or caregiver for a child under the age of 18 and make health care decisions for them?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	310	58.3	64.3	64.3
	Yes	172	32.3	35.7	100.0

Total		482	90.6	100.0	
Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - Under 2 years old:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	447	84.0	92.7	92.7
	1	32	6.0	6.6	99.4
	2	2	.4	.4	99.8
	3	1	.2	.2	100.0
	Total	482	90.6	100.0	
Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - 3-12 years old:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	376	70.7	78.0	78.0
	1	64	12.0	13.3	91.3
	2	35	6.6	7.3	98.5
	3	6	1.1	1.2	99.8
	11	1	.2	.2	100.0
	Total	482	90.6	100.0	

Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - 13-17 years old:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	390	73.3	80.9	80.9
	1	65	12.2	13.5	94.4
	2	25	4.7	5.2	99.6
	3	1	.2	.2	99.8
	5	1	.2	.2	100.0
	Total	482	90.6	100.0	
Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - 18-24 years old:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	385	72.4	79.9	79.9
	1	69	13.0	14.3	94.2
	2	28	5.3	5.8	100.0
	Total	482	90.6	100.0	
Missing	Respondent dropped off	50	9.4		

Total	532	100.0		
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**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - 25-34 years old:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	389	73.1	80.7	80.7
	1	52	9.8	10.8	91.5
	2	37	7.0	7.7	99.2
	3	4	.8	.8	100.0
	Total	482	90.6	100.0	
Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - 35-44 years old:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	367	69.0	76.1	76.1
	1	77	14.5	16.0	92.1
	2	35	6.6	7.3	99.4
	3	2	.4	.4	99.8
	5	1	.2	.2	100.0
	Total		482	90.6	100.0
Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - 45-54 years old:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	354	66.5	73.4	73.4
	1	84	15.8	17.4	90.9
	2	43	8.1	8.9	99.8
	3	1	.2	.2	100.0
	Total	482	90.6	100.0	
Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - 55-64 years old:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	367	69.0	76.1	76.1
	1	82	15.4	17.0	93.2
	2	33	6.2	6.8	100.0
	Total	482	90.6	100.0	
Missing	Respondent dropped off	50	9.4		
Total		532	100.0		

**Please indicate how many people, including yourself, live in your household at least part of the year in each of these age categories. Please include college students over the age of 18 who live elsewhere but are still claimed as a dependent on your taxes. - 65 and over:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	370	69.5	76.8	76.8
	1	60	11.3	12.4	89.2
	2	52	9.8	10.8	100.0
	Total	482	90.6	100.0	
Missing	Respondent dropped off g	50	9.4		
Total		532	100.0		

**Total HH Size (sum of age ranges variables)**

N	Valid	455
	Missing	77
Mean		2.7
Median		2.00
Std. Deviation		1.41
Minimum		1.00
Maximum		11.00
Percentiles	25	2.00
	50	2.00
	75	4.00

**Are the children in your household covered by health insurance?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No, none are covered	3	.6	1.8	1.8

	Some are covered, but some are not	4	.8	2.3	4.1
	Yes, all are covered	164	30.8	95.9	100.0
	Total	171	32.1	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	310	58.3		
	Don't know / Unsure / NA / Prefer not to respond	1	.2		
	Total	361	67.9		
Total		532	100.0		

**What types of health insurance plans cover the children in your household?  
Select all that apply. - Employer-sponsored insurance**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	90	16.9	53.6	53.6
	Employer-sponsored insurance	78	14.7	46.4	100.0
	Total	168	31.6	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	314	59.0		
	Total	364	68.4		
Total		532	100.0		

**What types of health insurance plans cover the children in your household?  
Select all that apply. - Marketplace insurance / Get Covered Tennessee**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	158	29.7	94.0	94.0

	Marketplace insurance / Get Covered Tennessee	10	1.9	6.0	100.0
	Total	168	31.6	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	314	59.0		
	Total	364	68.4		
Total		532	100.0		

**What types of health insurance plans cover the children in your household?  
Select all that apply. - Cover Kids**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	152	28.6	90.5	90.5
	Cover Kids	16	3.0	9.5	100.0
	Total	168	31.6	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	314	59.0		
	Total	364	68.4		
Total		532	100.0		

**What types of health insurance plans cover the children in your household?  
Select all that apply. - TENNcare**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	86	16.2	51.2	51.2
	TENNcare	82	15.4	48.8	100.0
	Total	168	31.6	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	314	59.0		

Total	364	68.4		
Total	532	100.0		

**What types of health insurance plans cover the children in your household?  
Select all that apply. - TriCare**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	165	31.0	98.2	98.2
	TriCare	3	.6	1.8	100.0
	Total	168	31.6	100.0	
Missin g	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	314	59.0		
	Total	364	68.4		
Total		532	100.0		

**What types of health insurance plans cover the children in your household?  
Select all that apply. - Other. Please specify:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	167	31.4	99.4	99.4
	Other. Please specify:	1	.2	.6	100.0
	Total	168	31.6	100.0	
Missin g	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	314	59.0		
	Total	364	68.4		
Total		532	100.0		

**Do you currently have someone who is the children’s main health provider?  
This could be your child’s doctor or anyone they see regularly for checkups,  
shots, colds, etc.**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	15	2.8	8.9	8.9
	Yes	154	28.9	91.1	100.0
	Total	169	31.8	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent saw the question and chose not to answer	1	.2		
	Respondent did not see the question due to skip logic	310	58.3		
	Don't know / Unsure / NA / Prefer not to respond	2	.4		
	Total	363	68.2		
Total		532	100.0		

### How would you rate your children's health on average over the last year?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Very Poor	1	.2	.6	.6
	Poor	3	.6	1.7	2.3
	Good/Average	47	8.8	27.3	29.7
	Very Good	72	13.5	41.9	71.5
	Excellent	49	9.2	28.5	100.0
	Total	172	32.3	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	310	58.3		
	Total	360	67.7		
Total		532	100.0		

**Do any of your children have chronic health condition? (examples: asthma, Type 1 Diabetes, etc.)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	146	27.4	84.9	84.9
	Yes. Please list:	26	4.9	15.1	100.0
	Total	172	32.3	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	310	58.3		
	Total	360	67.7		
Total		532	100.0		

**Do any of your children identify as transgender?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	167	31.4	97.1	97.1
	Yes	5	.9	2.9	100.0
	Total	172	32.3	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	310	58.3		
	Total	360	67.7		
Total		532	100.0		

**Has your transgender child ever received medical or mental health care related to supporting their transgender identity, also known as gender affirming care?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	2	.4	40.0	40.0
	Yes	3	.6	60.0	100.0

	Total	5	.9	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	477	89.7		
	Total	527	99.1		
Total		532	100.0		

**How interested would you be in learning more about medical and mental health supports available in your community to support your child in their transgender identity?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	A little interested	1	.2	20.0	20.0
	Very interested	4	.8	80.0	100.0
	Total	5	.9	100.0	
Missing	Respondent dropped off	50	9.4		
	Respondent did not see the question due to skip logic	477	89.7		
	Total	527	99.1		
Total		532	100.0		

**If your child had a minor illness or injury and required non-urgent medical care, which would you try FIRST to get them care?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Primary care provider	91	17.1	53.5	53.5
	Clinic (such as the CVS minute clinic or Kroger Little Clinic)	16	3.0	9.4	62.9
	Urgent care facility (such as East Tennessee Children's Urgent Care or Fast Pace Health)	42	7.9	24.7	87.6
	Emergency room	8	1.5	4.7	92.4
	Telemedicine	10	1.9	5.9	98.2
	School-based health center / school nurse	1	.2	.6	98.8
	Something else (please explain):	2	.4	1.2	100.0
	Total	170	32.0	100.0	
Missing	Respondent dropped off	51	9.6		
	Respondent did not see the question due to skip logic	311	58.5		
	Total	362	68.0		
Total		532	100.0		

**About how many times have you used these different types of medical care for your children in the last 12 months? - Primary Care Doctor**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None	21	3.9	12.4	12.4
	Once to three times	99	18.6	58.2	70.6
	Four times or more	50	9.4	29.4	100.0
	Total	170	32.0	100.0	

Missin g	Respondent dropped off	51	9.6		
	Respondent did not see the question due to skip logic	311	58.5		
	Total	362	68.0		
Total		532	100.0		

**About how many times have you used these different types of medical care for your children in the last 12 months? - Emergency room**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None	97	18.2	57.4	57.4
	Once to three times	69	13.0	40.8	98.2
	Four times or more	3	.6	1.8	100.0
	Total	169	31.8	100.0	
Missin g	Respondent dropped off	51	9.6		
	Respondent saw the question and chose not to answer	1	.2		
	Respondent did not see the question due to skip logic	311	58.5		
	Total	363	68.2		
Total		532	100.0		

**About how many times have you used these different types of medical care for your children in the last 12 months? - Walk-in Clinic**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None	70	13.2	41.4	41.4
	Once to three times	83	15.6	49.1	90.5
	Four times or more	16	3.0	9.5	100.0
	Total	169	31.8	100.0	
Missing	Respondent dropped off	51	9.6		
	Respondent saw the question and chose not to answer	1	.2		
	Respondent did not see the question due to skip logic	311	58.5		
	Total	363	68.2		
Total		532	100.0		

**About how many times have you used these different types of medical care for your children in the last 12 months? - Urgent Care**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None	85	16.0	50.3	50.3
	Once to three times	71	13.3	42.0	92.3
	Four times or more	13	2.4	7.7	100.0
	Total	169	31.8	100.0	
Missing	Respondent dropped off	51	9.6		
	Respondent saw the question and chose not to answer	1	.2		
	Respondent did not see the question due to skip logic	311	58.5		
	Total	363	68.2		
Total		532	100.0		

**About how many times have you used these different types of medical care for your children in the last 12 months? - School based health center / School Nurse**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	None	94	17.7	67.6	67.6
	Once to three times	39	7.3	28.1	95.7
	Four times or more	6	1.1	4.3	100.0
	Total	139	26.1	100.0	
Missing	Respondent dropped off	51	9.6		
	Respondent saw the question and chose not to answer	1	.2		
	Respondent did not see the question due to skip logic	341	64.1		
	Total	393	73.9		
Total		532	100.0		

**Did any of your children's primary care visits take place at a facility run by East Tennessee Children's Hospital?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	77	14.5	54.2	54.2
	Yes	65	12.2	45.8	100.0
	Total	142	26.7	100.0	
Missing	Respondent dropped off	51	9.6		
	Respondent did not see the question due to skip logic	332	62.4		
	Don't know / Unsure / NA / Prefer not to respond	7	1.3		
	Total	390	73.3		

Total	532	100.0		
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**Overall, how satisfied were you with the primary care visits at facilities run by East Tennessee Children’s Hospital?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Somewhat Unsatisfied	1	.2	1.5	1.5
	Somewhat Satisfied	11	2.1	16.9	18.5
	Very Satisfied	53	10.0	81.5	100.0
	Total	65	12.2	100.0	
Missing	Respondent dropped off	51	9.6		
	Respondent did not see the question due to skip logic	416	78.2		
	Total	467	87.8		
Total		532	100.0		

**Were any of your children’s emergency room visits at a facility run by East Tennessee Children’s Hospital?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	23	4.3	33.3	33.3
	Yes	46	8.6	66.7	100.0
	Total	69	13.0	100.0	
Missing	Respondent dropped off	51	9.6		
	Respondent saw the question and chose not to answer	1	.2		
	Respondent did not see the question due to skip logic	409	76.9		
	Don’t know / Unsure / NA / Prefer not to respond	2	.4		
	Total	463	87.0		

Total	532	100.0		
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**Overall, how satisfied were you with the emergency room visits at East Tennessee Children’s Hospital’s?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Somewhat Unsatisfied	1	.2	2.2	2.2
	Somewhat Satisfied	9	1.7	19.6	21.7
	Very Satisfied	36	6.8	78.3	100.0
	Total	46	8.6	100.0	
Missing	Respondent dropped off	52	9.8		
	Respondent did not see the question due to skip logic	434	81.6		
	Total	486	91.4		
Total		532	100.0		

**Were any of your walk-in clinic visits at a facility run by East Tennessee Children’s Hospital?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	59	11.1	64.8	64.8
	Yes	32	6.0	35.2	100.0
	Total	91	17.1	100.0	
Missing	Respondent dropped off	52	9.8		
	Respondent saw the question and chose not to answer	1	.2		
	Respondent did not see the question due to skip logic	382	71.8		

	Don't know / Unsure / NA / Prefer not to respond	6	1.1		
	Total	441	82.9		
Total		532	100.0		

**Overall, how satisfied were you with walk-in clinic visits at facilities run by East Tennessee Children’s Hospital?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Somewhat Unsatisfied	1	.2	3.1	3.1
	Somewhat Satisfied	6	1.1	18.8	21.9
	Very Satisfied	25	4.7	78.1	100.0
	Total	32	6.0	100.0	
Missing	Respondent dropped off	52	9.8		
	Respondent did not see the question due to skip logic	448	84.2		
	Total	500	94.0		
Total		532	100.0		

**Were any of your urgent care visits at a facility run by East Tennessee Children’s Hospital?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	39	7.3	51.3	51.3
	Yes	37	7.0	48.7	100.0
	Total	76	14.3	100.0	
Missing	Respondent dropped off	52	9.8		
	Respondent saw the question and chose not to answer	1	.2		

	Respondent did not see the question due to skip logic	397	74.6		
	Don't know / Unsure / NA / Prefer not to respond	6	1.1		
	Total	456	85.7		
Total		532	100.0		

**Overall, how satisfied were you with urgent care visits at facilities run by East Tennessee Children’s Hospital?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Somewhat Satisfied	11	2.1	29.7	29.7
	Very Satisfied	26	4.9	70.3	100.0
	Total	37	7.0	100.0	
Missing	Respondent dropped off	52	9.8		
	Respondent did not see the question due to skip logic	443	83.3		
	Total	495	93.0		
Total		532	100.0		

**Is your youngest child up to date on their routine vaccinations such as Chickenpox, Polio, MMR, etc.?**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	My child does not have any routine vaccines	5	.9	3.0	3.0
	My child has some, but not all, routine vaccines	12	2.3	7.2	10.2

	My child is up to date on all routine vaccines	150	28.2	89.8	100.0
	Total	167	31.4	100.0	
Missing	Respondent dropped off	52	9.8		
	Respondent saw the question and chose not to answer	1	.2		
	Respondent did not see the question due to skip logic	312	58.6		
	Total	365	68.6		
Total		532	100.0		

**For shots that are seasonal or yearly (like the flu shot), how often do your children get those shots? - COVID-19**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never or almost never	95	17.9	56.5	56.5
	Some years	15	2.8	8.9	65.5
	Most years	19	3.6	11.3	76.8
	Every year	39	7.3	23.2	100.0
	Total	168	31.6	100.0	
Missing	Respondent dropped off	52	9.8		
	Respondent did not see the question due to skip logic	312	58.6		
	Total	364	68.4		
Total		532	100.0		

**For shots that are seasonal or yearly (like the flu shot), how often do your children get those shots? - Flu**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never or almost never	57	10.7	34.5	34.5
	Some years	23	4.3	13.9	48.5
	Most years	17	3.2	10.3	58.8
	Every year	68	12.8	41.2	100.0
	Total	165	31.0	100.0	
Missing	Respondent dropped off	52	9.8		
	Respondent saw the question and chose not to answer	3	.6		
	Respondent did not see the question due to skip logic	312	58.6		
	Total	367	69.0		
Total		532	100.0		