2025

Perry County Memorial Hospital Community Health Needs Assessment

Prepared by the Indiana Rural Health Association

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Purpose

The purpose of this Community Health Needs Assessment (CHNA) is to provide a comprehensive and data-driven understanding of the health needs within Perry County Memorial Hospital's service area. This assessment is conducted with the primary aim of improving the health and well-being of individuals within the community by identifying and addressing the most pressing health issues.

Specifically, this CHNA has the following goals:

1. Identify Health Disparities: To analyze and document the disparities and inequities in access to and outcomes of health services within the community. Factors, such as race, ethnicity, age, gender, socioeconomic status, and geographic location all impact health outcomes and will be considered within the report.
2. Assess Existing Services: Evaluate the scope and effectiveness of the health services currently offered within Perry and Spencer Counties, including the adequacy of resources, staffing, and infrastructure.
3. Engage Stakeholders: Engage with a diverse group of community stakeholders, including patients, families, community organizations, local government, and other healthcare providers to gather their insights, experiences, and perspectives on the health needs and challenges faced by the community.
4. Identify Priorities: Determine the most critical health issues and unmet needs within the community. This includes understanding prevalent health conditions and health challenges that impact the hospital's patient population.
5. Develop an Action Plan: Create a clear and evidence-based action plan to address the identified health needs and disparities. This plan will be used to guide the hospital's future strategies, services, and programs to better serve the community.
6. Foster Collaboration: Promote collaboration among local agencies, healthcare providers, community organizations, and policymakers to create a coordinated approach to address health issues in the service area.
7. Comply with Regulatory Requirements: Ensure compliance with regulatory requirements and reporting obligations stipulated by relevant authorities, including federal and state regulations that govern non-profit hospitals.

By conducting this Community Health Needs Assessment, the hospital aims to enhance its ability to deliver high-quality, patient-centered healthcare services that are responsive to the unique needs of our community. This assessment will also facilitate transparency, accountability, and continuous improvement in the efforts to promote health and well-being while reducing health disparities within the hospital's service area.

Process

Perry County Memorial Hospital (PCMH) contracted with the Indiana Rural Health Association (IRHA) to conduct the Community Health Needs Assessment (CHNA).

IRHA first identified the community served by PCMH through conversations with the hospital. Based on a review of patient zip codes, the hospital was able to define the community served as all postal codes within the geographic area of Perry and Spencer Counties.

To quantifiably describe the community, census reports were pulled from the United States Census Bureau Reports. Quantifiable statistics and reports for health-related community data were obtained from the Indiana Department of Health, the Community Health Rankings & Roadmaps from the Robert Wood Johnson Foundation, Map the Meal Gap by Feeding America, the Centers for Disease Control and Prevention, and more state and national resources. The full list of references follows this report.

Next, two focus groups of Perry and Spencer County representatives were organized with the help of Perry County Memorial Hospital's Marketing Manager, Casey Stutsman. Business owners, local officials, healthcare providers, minority representatives, clergy, student representatives, non-profits, and any other interested parties were invited to attend the meetings to discuss the health-related needs of the counties with a view to identifying the areas of greatest concern. The list of attendees and the organizations they represent can be found in Appendix A.

From the information obtained during the focus group meeting, a 60-question survey was developed to gain the perspective of the inhabitants of the community. Questions included queries about the effect of various factors (such as transportation, mental health, and childcare), as well as probes into the perceived need for various services and facilities in the county. The survey was widely disseminated to the residents of Perry and Spencer Counties through inclusion on the hospital's website, social media, newsletters and face-to-face polling at a library event in the park. Further, paper surveys were made available at the Perry and Spencer County libraries. An online survey posted on REDCap® was also made available to the public. The survey may be viewed in Appendix B.

To identify all healthcare facilities and resources that are currently responding to the healthcare needs of the community, the IRHA contacted PCMH to ascertain the facilities that are currently available to the residents of their service area. The hospital was able to provide a listing of the facilities and resources, including, but not limited to, clinics, family practices, and nursing facilities. The list of existing community resources can be found in Appendix C.

At this point, the entirety of the collected data was submitted to Perry County Memorial Hospital to explain how the needs identified by the CHNA are currently being met, as well as to write a plan of action for those needs that are not currently being met. The hospital was also able to identify the information gaps limiting the hospital's ability to assess all of the community's health needs.

The completed CHNA was then publicly posted on the hospital's website. Hard copies of the full report were made available to the community upon request at Perry County Memorial Hospital, as well.

Community Served

The community served by Perry County Memorial Hospital is defined as follows: All people living within Perry and Spencer Counties in Indiana, at any time during the year. To be determined as living within the service area of Perry and Spencer Counties, a person must reside within one of the following postal zip codes: 47514, 47515, 47520, 47525, 47551, 47574, 47576, 47586, 47637, 47588, 47523, 47531, 47536, 47537, 47550, 47577, 47579, 47611, 47615, 47617, 47634, and 47635.

Description of Community

Physical

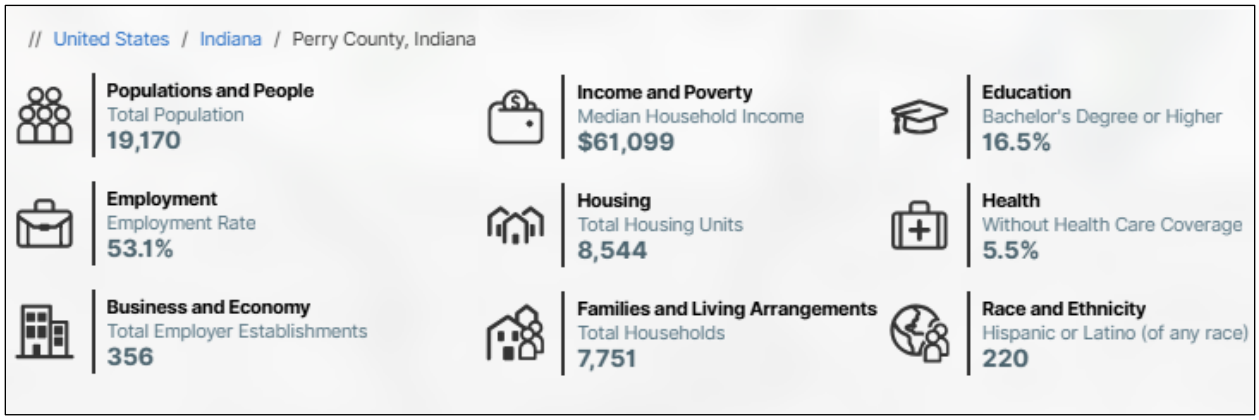
Perry County is in the center of the southern border of Indiana. The county is largely rural and is the 58th largest county in Indiana at approximately 381.7 square miles. Perry County is bordered by Dubois, Spencer, and Crawford Counties in Indiana and Kentucky to the south.

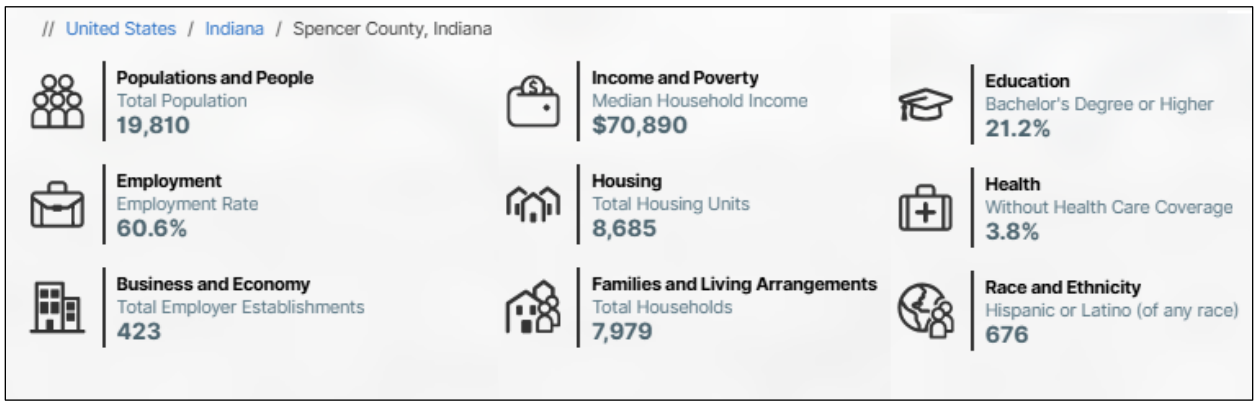
Spencer County is on the southern border of Indiana, directly west of Perry County. The county is largely rural and is the 46th largest county in Indiana at approximately 396.8 square miles. In addition to Perry County, Spencer County is bordered by Warrick and Dubois Counties in Indiana and Kentucky to the south.

Both counties' southern border is the Ohio River. Both counties are crisscrossed by various State Highways and include Interstate 64 running east to west along the north edge of each.

Demographics

According to the 2020 U.S. Census Report, the total population of the Perry County was approximately 19,170, with a 2023 estimate of 19,218.[1,2] The population of Spencer County for 2020 was 19,810, with a 2023 estimate of 19,871.[3,4] The median age in Perry County is 41.1 years old and there are approximately 120.2 males for every 100 females.[2] The median age in Spencer County is 44.2 years old and there are approximately 104.6 males for every 100 females.[4]

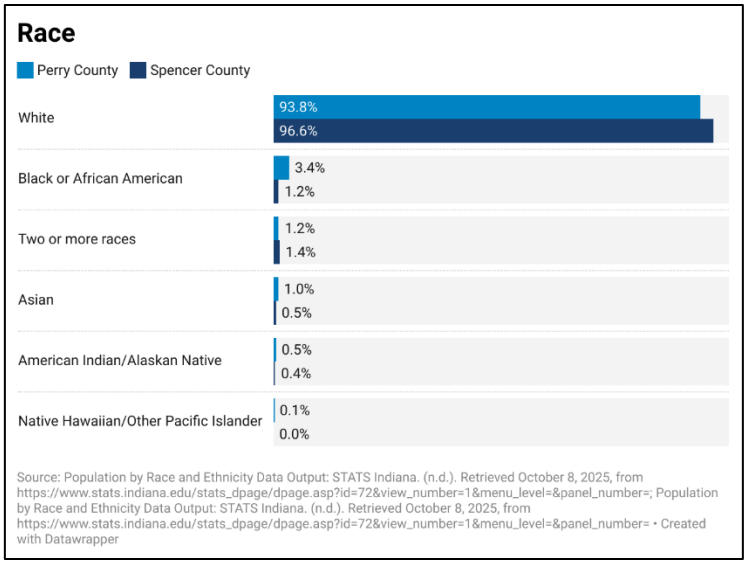




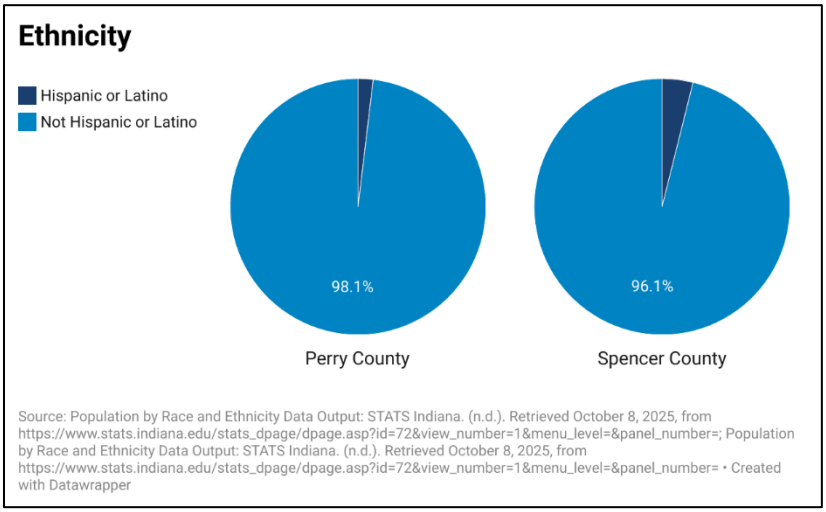
Data visualizations from United States Census Bureau Quick Facts 2010-2020

Medically Underserved, Low-Income, and Minority Populations

Perry and Spencer Counties have a relatively homogenous racial and ethnic profile. Overall, in Perry County, 93.8% of residents identify as White alone and 96.6% of residents in Spencer identify as White alone. The second largest reported racial population in both Perry and Spencer Counties was Black or African American at 3.4% and 1.2%, respectively.[3,4]



For ethnicity, the majority of residents are Not Hispanic or Latino with the Hispanic or Latino population making up 1.9% in Perry County, and 3.9% in Spencer County.[3,4]



English is the dominant language spoken in the county at a 98% in Perry and Spencer Counties. The *2023 American Community Survey 5-Year Estimates* shows that 2.5% of the Spencer County population speaks Spanish, but all other languages are spoken at less than 1% in either county.[1,3]

Beyond the ethnic and racial demographics, the U.S. Census Bureau estimates that there are approximately 2,385 veterans (7.8%) in Perry and Spencer Counties.[5,6] This population is of special note, because, according to the U.S. Department of Veteran Affairs, veteran populations are at higher risk of substance use and mental health conditions, such as PTSD.[7]

According to data from the Williams Institute at UCLA, approximately 4.5% of Indiana residents identify as part of the LGBTQ+ community.[8] While county-level and youth population data is not yet available, this percentage can provide a starting point for identifying a proportion within the target service area. The LGBTQ+ youth population is at particular risk of Mental Health issues, including suicidal ideation and suicide attempts. A 2024 report by the Trevor Project states that 39% of LGBTQ+ youth seriously considered suicide in the previous year and that 50% of LGBTQ+ youth who wanted Mental Healthcare in the past year were unable to receive care.[9]

The 2023 American Community Survey 5-Year Estimates reports that approximately 16.0% of Perry County and 14.1% of Spencer County residents are classified as disabled at any age for all disabilities with both being higher than Indiana and the United States percentages.[5] The most prevalent disability is ambulatory, with Perry County (9.2%) having a percentage higher than Spencer

Disabilities

	Perry County	Spencer County	Indiana	United States
All Disabilites	16	14	14	13
Ambulatory	9	6	7	7
Independent Living	6	6	6	6
Cognitive Difficulty	6	4	6	5
Hearing Difficulty	6	5	4	4
Self-Care Difficulty	2	2	3	3
Vision Difficulty	3	2	2	2

Source: Disability Prevalence by State and County in the United States. (n.d.). Retrieved October 8, 2025, from https://disabilitystatistics.org/acs-census • Created with Datawrapper

County (6.2%), Indiana (7.0%), and the United States (6.7%). The population with a disability is a measurement of the percentage of people that have the reported disability and should not be confused with the percentage of the total number of disabilities categorized by disability. There are a wide variety of disabilities that may be co-occurring and appropriate interventions and adaptations should be identified to best serve each individual need.

A further examination of the payer mix provided by Perry County Memorial Hospital resulted in additional data to identify low-income, disabled, and/or older populations. It is important to understand the key characteristics of the hospital's patient population. This includes identifying the low-income, disabled, and/or elderly population. For the 2024 calendar year, the payer mix for the hospital was:

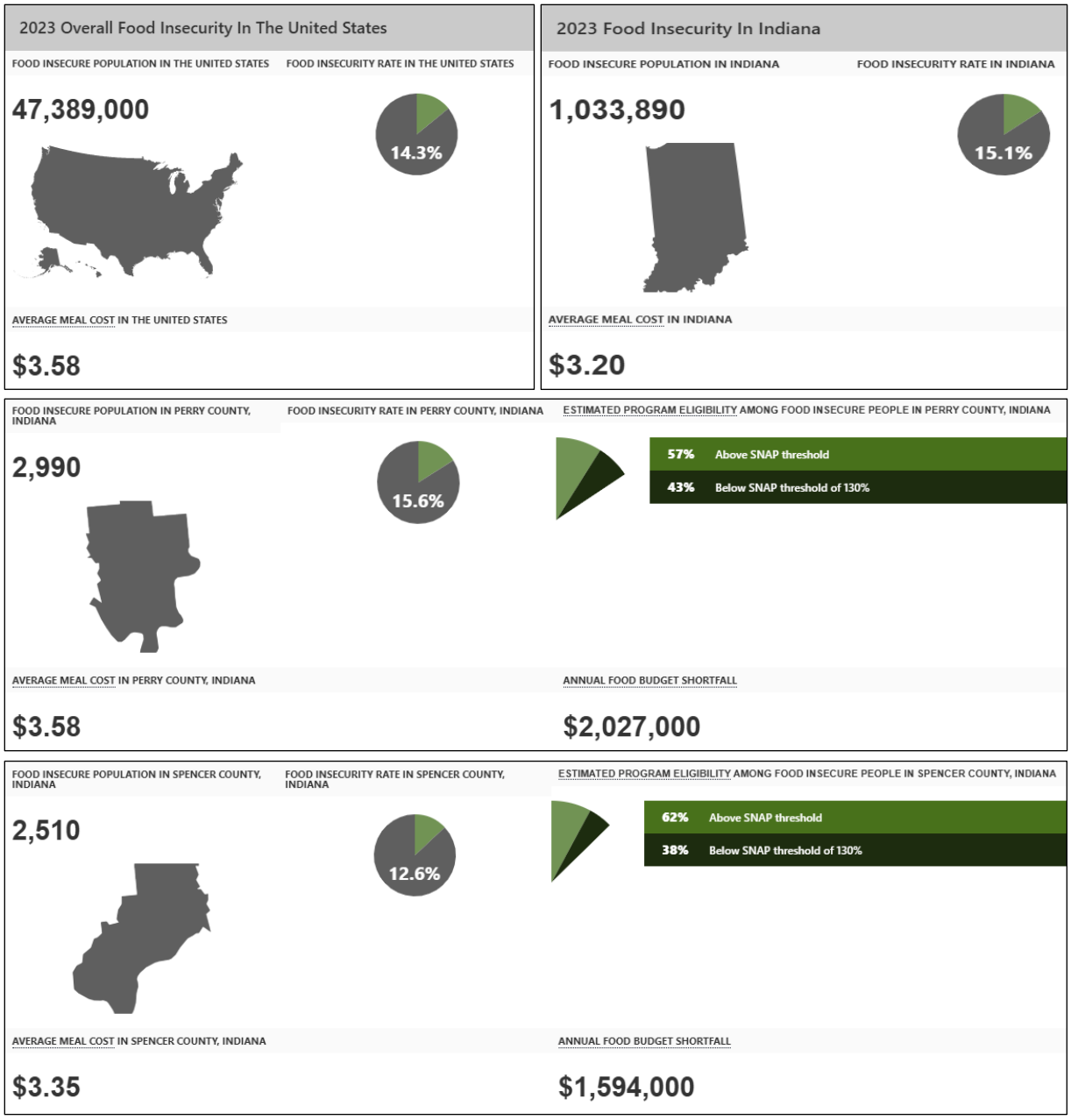
Blue Cross	5.00%
Commerical	7.50%
Medicaid	3.21%
Medicaid Replacment	4.64%
Medicare	48.57%
Medicare Replacement	30.71%
Private Pay	0.36%

Finally, the January 2025 Point-in-Time count for unhoused populations includes Perry and Spencer Counties in the Region 13 cohort. The count was taken on January 29, 2025.[11] Neither Perry nor Spencer Counties reported any unhoused families or individuals during the PIT count.[11] However, this should not serve as proof or indication that unhoused people do not exist in the community.

Social Drivers of Health

Food Insecurity[6]

Feeding America's *Map the Meal Gap* study reported that in 2023, 2,990 people were food insecure in Perry County (with a rate of 15.6%) and 2,510 were food insecure in Spencer County (with a rate of 12.6%). The Indiana statewide rate was 15.1% and the national rate is 14.3%. The average meal cost in Perry and Spencer Counties is $3.20. This is equal to the average meal cost for the state, but less than the average meal cost nationally of $3.58. It is worth noting that these numbers are from 2023 and will likely be exacerbated by the inflation that has been particularly impacting groceries and food costs for some time.



Data Visualizations from Feeding America's the Meal Gap, 2023

Economic Factors[7]

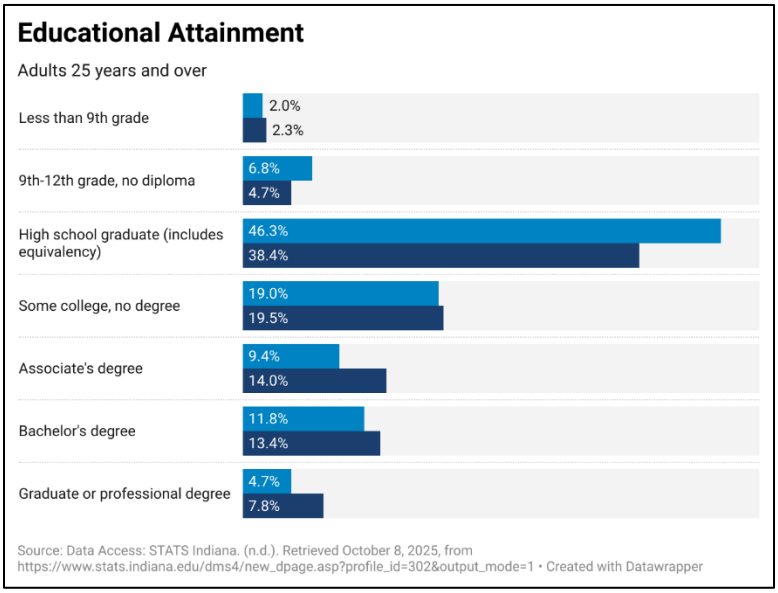
Perry and Spencer Counties experience very disparate poverty rates, though both counties' unemployment rate is below the state's averages according to the 2023 American Community Survey 5-Year Estimates from the U.S. Census Bureau and STATS Indiana reporting from the Indiana Department of Workforce Development (IDWD). The 2023 poverty rate in Perry County was 14.3% and Spencer County was 8.7%, compared to Indiana's rate of 12.2%.[8] Per the IDWD from August 2025, the unemployment rate in Perry County is 3.5 and 3.2 in Spencer County, compared to Indiana's rate of 3.8.[8,9] In 2023, the Perry County per capita income is reported at $46,830 and Spencer County is $56,258, which falls behind Indiana's reported average of $61,243.[8,9]

Housing[10]

There are 17,531 total housing units in Perry and Spencer Counties based on 2024 estimates reported by STATS Indiana. Of those units, 12,290 or 70.1%, are owner-occupied. The median home value in Perry County for 2023 was $146,000 with the median rent reported as $515 per month. In Spencer County, the median home value for 2023 was $182,000, with the median rent reported as $517 per month.

Education[11]

According to 2023 United States Census Bureau data reported by STATS Indiana, the percentage of Perry County adults aged 25 or older that are high school graduates or higher was 91.2% and in Spencer County the rate climbs to 93.1%, both of which are higher than Indiana's percentage of 90.2%. However, both counties underperform Indiana on percentage of adults aged 25 or older with a bachelor's degree or higher, with Perry County at 16.5%, Spencer County at 21.2% and Indiana at 28.8%.[8] Further data reported by the National Institute of Health shows that the rates of adults with less than a 9th grade education is better in Perry and Spencer Counties than both the state and national rates with Perry at 2.0%, Spencer at 2.3%, Indiana at 3.6%, and the United States at 4.7%.[12]

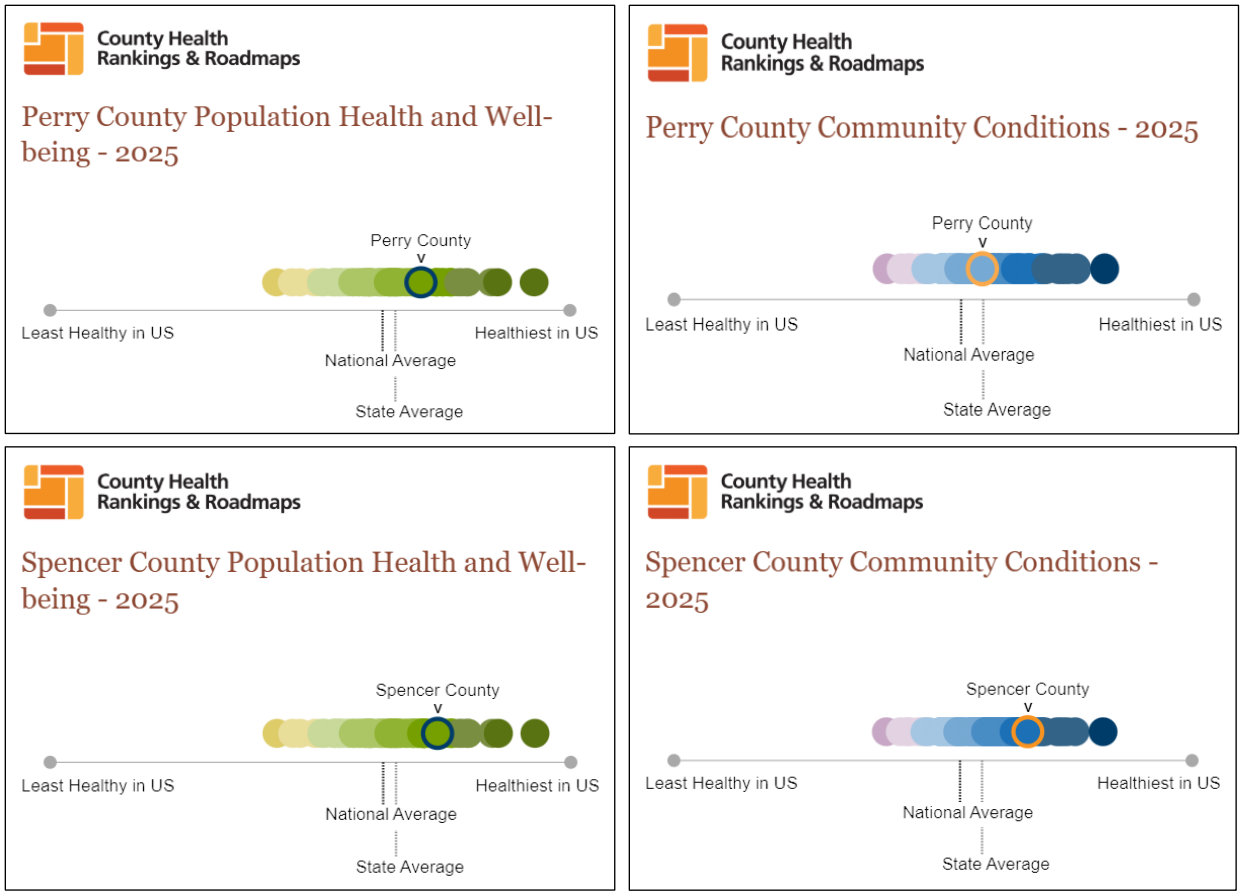


The complete description of metrics and methodology can be found using the citations listed in the Reference section.

Health Report Summaries

County Health Rankings and Roadmaps[13,14]

The 2025 Robert Wood Johnson Foundation's County Health Rankings and Roadmaps report shows Perry and Spencer Counties ranking above both the average county in Indiana and the average county in the nation for both Population Health and Well-being (previously Health Outcomes). Under Community Conditions (previously Health Factors), Perry County is on par with the average county in the state and bove the national average, while Spencer County is performing above average compared to both the state and nation.



Data visualizations from the RWJF 2025 County Health Rankings

As noted, Perry and Spencer Counties' Population Health and Well-being rankings overall are ranked above the state and national averages with some exceptions. Some of the most favorable factors include the incidence of premature death (7,000 in Perry and 9,000 in Spencer compared to 9,800 in Indiana and 8,400 nationally), HIV prevalence in Perry is 115 per 100,000 residents compared to 223 in Indiana and 387 for the U.S., and low birth weight (LBW) babies in Spencer is 6% compared to Indiana and the U.S. LBW percentages of 8%. For detrimental factors, poor mental health days is higher in Perry (5.8) and Spencer (5.6 days) counties than Indiana (5.5 days) and the United States (5.1 days), obesity in Perry County (41%) is higher than Spencer County (36%), Indiana (38%), and the U.S. (34%), and the suicide rate in Spencer County is higher (23 deaths by suicide per 100,000) than Perry County (13), Indiana (16), and the U.S. (14).

Perry County fares slightly higher than the national average and on par with state averages for Community Conditions and Spencer County fares better than both national and state averages for Community Conditions. Perry and Spencer Counties outperform Indiana and national rates for uninsured (Perry – 6%, Spencer – 7%, Indiana – 8%, U.S. – 20%). Perry and Spencer Counties have a better food environment index (Perry – 7.7, Spencer – 8.8, Indiana – 6.5, and U.S. – 7.4), Perry County has 1,450 hospital stays per 100,000 people enrolled in Medicare, which is less than Spencer County (2,866), Indiana (3,078), and the U.S. (2,666), and both Perry and Spencer counties

have lower rates of new cases of chlamydia per 100,000 people (Perry -151.2 new cases and Spencer – 150.2 new cases) compared to Indiana 495.2 new cases and the U.S. 495.0 new cases per 100,000 people. Spencer County also have a much lower rate of drug overdose deaths (17 deaths per 100,000) than Indiana (38) and the U.S. (31). There is no data for this metric from Perry County.

Perry and Spencer counties have higher percentages of people who drive alone to work than Indiana and the U.S. (Perry – 85%, Spencer – 87%, Indiana – 77%, and U.S. – 70%). Both Perry and Spencer counties have a lower percentage of childcare cost burden with Perry's average household spending 26% of its income on childcare for two children and Spencer's average being 21%, compared to Indiana (31%) and the U.S. (28%).

Several additional Community Conditions factors are pertinent to the overall health of the county but some are not included in the overall summary on County Health Rankings. The percentage of homeownership, flu vaccinations, mammography screening, motor vehicle crash deaths, adult smoking, and physical inactivity. Homeownership has a higher percentage in both Perry and Spencer counties, and mammography screening percentages are slightly higher in Perry and Spencer counties. Flu vaccinations are similar between Perry County, Spencer County, Indiana, and the U.S. Adult smoking and motor vehicle crash deaths are slightly higher in Perry and Spencer counties than the current state and national rates.

Other Community Conditions

	Perry County	Spencer County	Indiana	United States
Homeownership (% owner-occupied housing units)	75	81	70	65
Flu Vaccinations (% Medicare enrollees)	45	50	51	48
Mammography Screening (% female Medicare enrollees)	48	50	47	44
Motor Vehicle Crash deaths (Number of motor vehicle crash deaths per 100,000 population)	16	14	13	12
Adult Smoking (% current cigarette smokers)	19	18	17	13
Physical Inactivity (% of adults age 18+ reporting no leisure-time physical activity)	27	26	27	23

Source: Perry, Indiana | County Health Rankings & Roadmaps. (n.d.). Retrieved October 1, 2025, from https://www.countyhealthrankings.org/health-data/indiana/perry; Spencer, Indiana | County Health Rankings & Roadmaps. (n.d.). Retrieved October 1, 2025, from https://www.countyhealthrankings.org/health-data/indiana/spencer • Created with Datawrapper

The following other health factors were used to identify pertinent health behaviors but not included in the overall summary on County Health Rankings. Perry and Spencer Counties performed similar to the state and national averages for percentages of frequent physical and mental distress, diabetes prevalence, and feelings of loneliness.

Other Health Factors

	Perry County	Spencer County	Indiana	United States
Frequent Physical Distress (% of adults experiencing 14+ days of poor physical health)	13	12	13	12
Frequent Mental Distress (% of adults experiencing 14+ days of poor mental health)	18	19	18	16
Diabetes Prevalence (% of adults with diagnosis)	11	10	11	10
Feelings of Loneliness (% adults reporting always, usually, sometimes lonely)	33	30	32	33

Source: Perry, Indiana | County Health Rankings & Roadmaps. (n.d.). Retrieved October 1, 2025, from https://www.countyhealthrankings.org/health-data/indiana/perry; Spencer, Indiana | County Health Rankings & Roadmaps. (n.d.). Retrieved October 1, 2025, from https://www.countyhealthrankings.org/health-data/indiana/spencer • Created with Datawrapper

Clinical Health Indicators

Clinical Care

Perry and Spencer counties have higher patient-to-provider ratios for primary care, dentists, and mental health than Indiana per the County Health Rankings & Roadmaps 2025.[13,14] Perry County is identified as Health Professional Shortage Areas (HPSA) by the Health Resources & Services Administration (HRSA) in the areas of Primary Care, Dental Health, and Mental Health and Spencer County is identified as a HPSA for Primary Care and Mental Health.[15] This influences access to healthcare and health indicators. Perry and Spencer Counties have a patient to Primary Care Provider ratio of 1,061:1 and 1,479:1, respectively, whereas Indiana's ratio is 636:1.[16] The Mental Health Provider ratio is even more pronounced at 1,291:1 in Perry and 1,840:1 in Spencer, compared to 440:1 in Indiana and 290:1 in the U.S.[13,14]

The Centers for Medicare & Medicaid Services Office Of Minority Health reports mammography screening for women on Medicare aged 65-74 is greater in Perry (48%) and Spencer Counties (50%) compared to 47% in Indiana and 44% nationally.[13,14] Unfortunately, the most recent public National Cancer Institute's State Cancer Profile data available on screening for women aged 40 and older is from 2019, and is therefore considerably out-of-date.[17] This is a significant gap in information for the hospital to be able to respond to their community's need.

Maternal, Infant, and Child Health[18]

The number one health indicator in the world is infant mortality, which is the death of a baby before their first birthday. Perry County's infant mortality rate (IMR) from 2019-2023 was suppressed due to not enough data and Spencer County's IMR from 2019-2023 was 8.8 per 1,000 live births, which is higher than Indiana's 2019-2023 IMR of 6.7 per 1,000 live births and above the United States IMR

(5.4 per 1,000 live births). Low birthweight (LBW) is defined as babies who are born weighing less than 5 pounds, 8 ounces and in 2023, Perry and Spencer Counties' LBW were both 6.5%, which is much lower than Indiana and the national 2023 LBW of 8.6%. Preterm birth (PTB) is a baby born before 37 weeks gestation and premature babies are at risk for significant health concerns. Perry and Spencer Counties' 2023 preterm birth rate was 8.8% and 12.4%, respectively, with Perry's PTB rate being lower than the state and national rates of 11.0% and 10.4%, respectively and Spencer County being higher than both the state and national rates. Prenatal care in the first trimester is another important maternal and infant health factor, with Perry and Spencer Counties' 2023 percentage of women not receiving early prenatal care being 24.1% and 14.1% respectively, with both Perry and Spencer counties being better than Indiana's 2023 percentage of 26.6%. Spencer County had a much lower percentage than the US' percentage of 23.0% for women not receiving early prenatal care as well.

According to the Indiana Department of Health, Perry and Spencer County mothers who are on Medicaid is slightly lower at 40.6% in Perry County and much lower in Spencer County at 29.7%, compared to 40.9% for Indiana's mothers and the nation (41.3%) overall.[19] Additionally, the rate of smoking while pregnant in Perry (11.8%) and Spencer (7.0%), which is higher than Indiana's rate of 5.3% of women who smoke while pregnant.[19] Finally, the 2023 teen birth rate—births to females aged 20 years old and younger is 22.6 per 1,000 live births in Perry County and 18.9 per 1,000 live births in Spencer County, which is higher than state (15.9) and national (13.6) rates.

Mental and Behavioral Health

Perry County adults reported 5.8 mentally unhealthy days (average number of days in the past 30 days where an adult's mental health was not good) and Spencer County adults reported 5.6 days compared to 5.5 in Indiana and 5.1 nationally.[13,14] Perry County reported 13 deaths by suicide per 100,000 people from 2018-2022 and Spencer County reported an average of 23 deaths per 100,000 people from 2018-2022. which is higher than Indiana's rate of 16 and the national rate of 14 deaths by suicide per 100,000 people.[13,14]

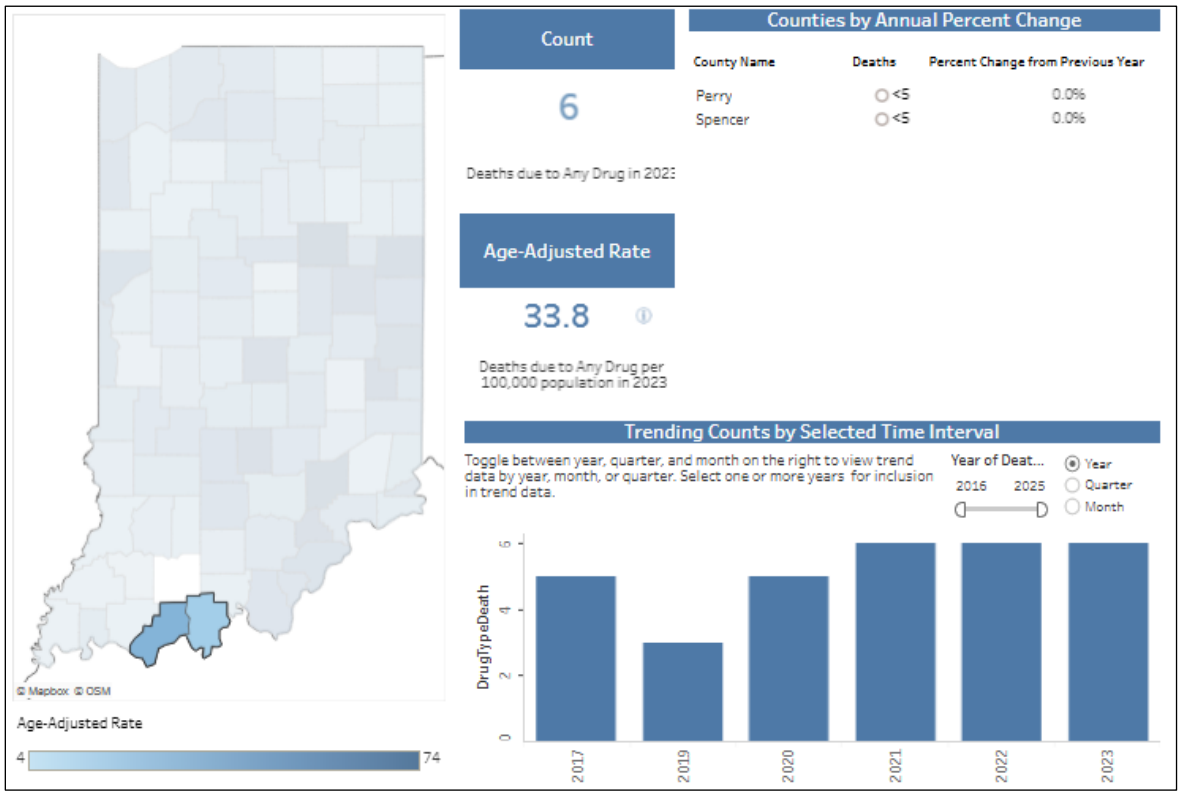
The following mental health data from Mental Health America (MHA) was collected from MHA screening from January 2020-June 2025. It should be noted that data may be updated and changed when MHA adds additional months. Perry and Spencer Counties' number of people scoring the PHQ-9 with severe depression per 100,000 from 2020-2025 is 29.5 and 34.7, respectively, which is lower than Indiana's rate of 48.0 per 100,000 of the state's population.[21] Perry and Spencer Counties' number of people reporting frequent suicide ideation per 100,000 of county's population from 2020-2025 is 29.5 and 35.7, respectively, which is lower than Indiana's number of people reporting frequent suicidal ideation rate of 51.2 per 100,000 of the state's population.[21]

Perry and Spencer Counties' trauma survivors per 100,000 of the county's population from 2020-2025 is 57.1 and 63.0, respectively, which is lower than Indiana's trauma survivors rate of 89.6 per 100,000 of the state's population.[21] Perry and Spencer Counties' number of people scoring positive for post-traumatic stress disorder (PTSD) per 100,000 of county's population from 2020-2025 is

11.2 for both counties, which is lower than Indiana's positive PTSD rate of 22.7 per 100,000 of the state's population.[21]

Substance Use[22]

According to the Drug Overdose Dashboard from the Indiana Department of Health there were 2,221 deaths from all drug overdoses in Indiana in 2023 with an age-adjusted rate of 33.8. Perry and Spencer Counties, by comparison, had only 6 deaths from any drug in 2023 with an age-adjusted rate that matched the state at 33.8 overall.



Data visualization from IDOH Drug Overdose Dashboard, 2023

Chronic Disease

Perry and Spencer Counties' crude death rate from heart disease (ICD-10: I00-I99) is 357.8 and 376.8 per 100,000 from 2018-2023, and both being much higher than Indiana's rate of 293.1 per 100,000.[23] Further, the stroke-related (cerebral infarction ICD-10: I63) death rate in Perry is suppressed with no data available and Spencer Counties is unreliable and not able to be compared to the states crude rate; however, had 13 cerebral infarction deaths.[24]

Adult obesity in Perry (41%) and Spencer Counties (36%) is slightly lower than the state (38%) for Spencer County, but higher for Perry County and both higher than the nation (34%).[13,14] Diabetes prevalence in Perry and Spencer Counties is 11% and 10% respectively, which is similar to the state (11%) and national rates of 10%.[13,14]

Cancer[25]

Despite having higher incidence of many major cancer types than Indiana averages, cancer mortality rates for Perry and Spencer Counties are better than the state rate for the cancer types with reported data. Lung and Bronchus cancer incidence is 63.2 per 100,000 in Perry and Spencer Counties, which is higher than Indiana's incidence of 65.0 per 100,000. Female Breast cancer incidence is higher in Spencer County at 133.9 per 100,000, compared to Perry County's rate of 100.4 and Indiana's 127.3. Colon and Rectum cancer incidence is higher in Perry County at a rate of 50.1 per 100,000, compared to Spencer County's rate of 31.5 and Indiana's 39.4. Finally, Perry County's incidence of Prostate cancer was higher at 85.4 per 100,000, compared Spencer County's rate of 108.3 and Indiana's 111.2.

However, as stated above, despite the higher incidence rates for many cancers, Perry and Spencer Counties experience lower mortality rates for some cancer types. Both counties outperform the state with a rate of mortality for Lung and Bronchus cancers at 40.7 per 100,000 people in Perry County, 37.2 in Spencer County, but 41.4 in the state of Indiana as a whole. Spencer County outperforms the state for mortality rate of Colon and Rectum cancers at 12.8 per 100,000 compared to the state rate of 14.8. Data was not available for Perry County on this measure. Perry County had worse mortality rates than the state for Female Breast cancer at a rate of 21.3 per 100,000 people compared to the state rate of 20.3. Spencer County did not have available data for this measure. Unfortunately, neither Perry County nor Spencer County had data available for Prostate cancer mortality.

Cancer Incidence and Mortality Rates

	Perry County Incidence (2018-2022)	Spencer County Incidence (2018-2022)	Indiana Incidence (2018-2022)	Perry County Mortality (2019-2023)	Spencer County Mortality (2019-2023)	Indiana Mortality (2019-2023)
All Cancer Sites Combined	406	434	458	160.4	150.5	165
Lung and Bronchus	60	56	65	40.7	37.2	41
Female Breast	128	134	127	21.3	No data	20
Colon and Rectum	28	32	39	No data	12.8	15
Prostate	77	108	111	No data	No data	20

Source: USCS Data Visualizations. (n.d.). Retrieved October 1, 2025, from https://gis.cdc.gov/Cancer/USCS/#/ • Created with Datawrapper

Existing Community Resources

Perry County Memorial Hospital provided a complete listing of the currently available community facilities and services that are accessed by those living in Perry and Spencer Counties. The hospital will be able to use this listing when creating their action plan to fully incorporate all available resources.

Child Care

- 4Cs of Southern Indiana
- Perry Preschool & Childcare

Domestic Violence

- Crisis Connection
- Domestic Violence Hotline
- Holly's House

Education

- Adult Education
- Lincoln Hills Development Health Start & Early Head Start
- Indiana's College for Success Coalition
- Ivy Tech – Tell City
- Perry County Adult Education (TASC)

Emergency Helplines

- Adult Protective Services
- Child Abuse and Neglect
- Poison Control
- Tell City Police Department
- Perry County Sheriff's Department

Clothing, Food, Housing

- 211
- Catholic Charities
- Council of Agencies
- Division of Family Resources
- Food Pantries:
- 7th Day Adventist Food Pantry
- Cannelton Food Pantry
- Deer Creek Baptist
- St. Martin's Cloak
- Widows Barrel Food Pantry
- Table of Blessings
- Housing:
- Tell City Housing Authority
- Lincoln Hill Development Corp.

Insurance

- Division of Family Resources

Legal
- Indiana Legal Services

Medical Providers
- 13th Street Clinic – General Surgery, Pulmonology and Sleep Medicine
- 13th St Clinic- Women, Children and Family Medicine
- Perry County Family Practice
- Spencer County Clinic
- Tell City Clinic
- Dr. Kleeman
- Dr. Marcrum

Mental Health
- Life Springs
- Virtual Consult MD
- Deaconess Cross Pointe Mental Health Urgent Care
- Deaconess Cross Pointe

Pregnancy Services
- Catholic Charities- Lifeline
- Division of Family Resources
- Perry County Health Department
- WIC
- My Healthy Baby Program
- Pregnancy Promise Program

Transportation
- Council of Aging
- Link-n-Go
- Marksmen Cab

A complete listing of community resources and contact information can be found in Appendix C.

Identifying Health & Service Needs

Three focus groups of Perry and Spencer Counties representatives were organized with the help of Perry County Memorial Hospital's Marketing Manager, Casey Stutsman. Business owners, local officials, healthcare providers, minority representatives, clergy, student representatives, non-profits, and any other interested parties were invited to attend the meetings to discuss the health-related needs of the county with a view to identifying the areas of greatest concern. The list of attendees can be found in Appendix A.

The focus groups were encouraged to brainstorm all areas of need or concern in the health field in Perry and Spencer Counties. Once a master list of all concerns was agreed upon, attendees were asked to prioritize that list. The groups were asked to list what they perceived to be the greatest strengths and values in their community. Then, they were asked to identify the highest priorities from the master list of challenges. The master list, each group's priority list, and the list of areas that were determined to be of the greatest need can be found in Appendix A.

By analyzing both prioritized lists from the focus groups, the IRHA was able to identify the items that appeared most frequently and identified the community's areas of greatest concern:

Housing
Transportation
Substance Use
Funding
Mental Health
Provider Shortage especially Women's Health/OB Services
Child Care/Afterschool Programs
Marketing of Services/Resources
Healthy Food
Aging Population
Living Wages
Homelessness

The identified areas of greatest need and hospital input were used to create a 60-question survey, addressing demographics, county issues, and community services and amenities, which can be found in Appendix B. The survey was widely disseminated via a publicly available survey posted on REDCap®. It was shared with the community through inclusion on Perry County Memorial Hospital's website, community bulletins, and the local newspaper to the residents of Perry and Spencer Counties. Paper copies were disseminated at Perry and Spencer County libraries, and face-to-face polling was also implemented at a library event in the park. To conduct the in-person survey, two members of the IRHA staff greeted people and asked for their participation in the survey. QR codes were also posted in public places. At the end of polling, there was a total of 86 total responses.

The overwhelming majority (91.9%) of the respondents were from zip code 47253, 79.1% of respondents identified as female, and 93% of respondents identified as White only.

After basic demographics, respondents were asked to assess the effect of various factors on the health of their community by selecting "very negative impact, some negative impact, no impact, some positive impact, or very positive impact." The second portion of the survey required respondents to assess the need for various services and facilities in their community by selecting "no need, slight need, no opinion either way, definite need, or extreme need."

Finally, there was a section for open comments at the end of the survey for any additional information the respondents wanted to share.

When asked "How do the following issues/items impact the health of your community?" the factors that received the most negative rankings by all respondents were (results on a 5-point scale with 1 being a very negative impact and 5 being a very positive impact):

1. Availability of quality housing – 1.21 average weighted response
2. Availability of women's health services (including OB and gynecology) – 1.77 average weighted response
3. (Tie) Substance Use Disorder/Addiction – 1.83 average weighted response
   (Tie) Access to emergency shelters and transitional housing – 1.83 average weighted response
4. Services available for unhoused individuals (e.g., hygiene, food, medical) – 1.86 average weighted response
5. Cost of quality childcare – 1.87 average weighted response
6. (Tie) Availability of public transportation – 1.89 average weighted response
   (Tie) Stigma around Mental Health – 1.89 average weighted response

For comparison, the following lists show the top negative impacts identified in the previous two CHNA reports for Perry and Spencer Counties:

2019 Top Negative Impacts
1. Illegal or prescription drug misuse
2. Poverty
3. Availability of housing for people with Substance Use Disorder
4. Availability of treatment for people with Substance Use Disorder
5. Mental health of the community

2022 Top Negative Impacts
1. Access to housing
2. Ability to attract foster care guardians
3. Cost of animal services
4. Availability of animal services
5. (Tie) Access to services for displaced youth
   (Tie) Cost of housing

When asked "do you see a need for the following in your community," the standout responses were (results on a 5-point scale with 1 being no need and 5 being extreme need):

1. Quality, affordable childcare – 4.16 average weighted response
2. (Tie) Women's health services (including OB/GYN) – 4.12 average weighted response
   (Tie) Additional specialty care providers – 4.12 average weighted response
3. Additional Mental Health providers for youth – 4.02 average weighted response
4. Substance Use/Addiction treatment – 3.96 average weighted response
5. Additional Primary Care Providers – 3.95 average weighted response
6. (Tie) Additional Mental Health providers for all populations – 3.94 average weighted response
   (Tie) Quality, affordable housing – 3.94 average weighted response

For comparison, the following lists include the top five needs identified by the previous two PCMH CHNAs:

2019 Top Needs

1. (Tie) Weekend of afterhours medical services
   (Tie) Illegal and/or prescription drug rehabilitation services
2. Illegal and/or prescription drug education
3. Mental/behavioral health services
4. Illegal and/or prescription drug rehabilitation facilities

2022 Top Needs

1. Affordable childcare services
2. Additional foster care guardians
3. Additional foster care services
4. (Tie) Mental/behavioral health services
   (Tie) Services for displaced youth

When asked whether they have a Primary Care Provider (PCP), 97% of all respondents responded affirmatively. When asked what specialties (other than women's health) are most needed in the community, the top responses were Mental Health, Dermatology, Pediatrics, and Cardiology. Other common responses were Endocrinology, Neurology, and Pulmonology.

The open comments section resulted in feedback primarily dealt with funding cuts and policy changes at the federal level, as well as social determinants of health like housing and transportation. A complete record of the open comments from the survey can be found in Appendix B.

Summary of Findings

Based on the information gathered as part of the Community Health Needs Assessment, the Indiana Rural Health Association has identified the areas of greatest need in Perry and Spencer Counties. Through the collection of health data and community input on the counties' strengths, challenges, and values, IRHA has identified two areas as being of the highest importance. While these areas have been identified as the highest county priorities, it is important to note that the root issue for most of these comes back to funding and affordability.

Identified Priorities

- Additional Providers and Specialties – especially OB/GYN, Mental Health/Substance Use Treatment
- Social Drivers of Health – especially housing/homelessness, transportation, and childcare

Opportunities

Based on the findings of this assessment, IRHA presents the following opportunities:

Additional Providers and Specialties

Ensuring access to key specialty services such as OB/GYN care and mental health/substance use treatment is vital to promoting comprehensive health in Perry and Spencer Counties and surrounding areas. While many residents may receive basic care locally, challenges remain when it comes to specialized services, continuity of care, and timely access. For example, limited OB/GYN availability can affect maternal and infant health outcomes, and insufficient mental health or substance use resources can leave vulnerable individuals without critical support when it is most needed. Rural geography and workforce constraints mean that some women may need to travel externally to access higher-level OB care or specialty prenatal services.

The realm of mental health and substance use treatment presents its own set of accessibility and coverage concerns. Rural residents may face barriers including long travel distances, limited number of providers, long waiting lists, and stigma around seeking care. Substance use disorders add further complexity, requiring integrated services, continuity of care, and often coordination across agencies and care settings.

By expanding the capacity and coordination of OB/GYN and behavioral health/substance use treatment services, and by integrating these into broader hospital-community health strategies, Perry and Spencer Counties can better align specialty care with its rural context. Perry County Memorial Hospital can serve as a convening partner, bridging specialty service gaps, supporting referral pathways, and collaborating with external providers to ensure that residents receive timely, high-quality specialty care locally or with minimal disruption.

- **Assess and strengthen the local OB/GYN service network**, including partnering with Deaconess Health System and other regional women's health providers to ensure coverage, referral pathways, and continuity from prenatal to postpartum care. https://www.deaconess.com/The-Womens-Hospital
- **Enhance mental health and substance use treatment capacity and access**, including exploring telehealth options, expanding outpatient/substance use services, and strengthening referral coordination from primary care settings.
    - Indiana Division of Mental Health & Addiction Provider directory https://www.in.gov/fssa/dmha/quality-assurance-quality-improvement/mental-health-and-addiction-providers/
- Refer patients to **LifeSpring Health Systems**, which provides outpatient therapy, psychiatric services, and substance use treatment across Southern Indiana. https://www.lifespringhealthsystems.org/

- **Develop a coordinated specialty-care referral network**, linking Perry County Memorial Hospital with regional tertiary centers, women's health hospitals, and behavioral health systems, to ensure seamless care and reduce travel burden for patients.
    - IRHAHelp! https://www.indianaruralhealth.org/resources/irhahelp-connecting-people-and-programs/?back=resources
    - Indiana 2-1-1 Hotline Call 2-1-1 to find local transit assistance, transportation programs, or referrals statewide
- **Initiate community outreach and screening programs** focused on women's health and behavioral health/substance use. Use hospital-based screening tools to identify patients needing specialty referrals and track access outcomes to monitor progress.
- **Track workforce metrics and service gaps** for OB/GYN and behavioral health specialties within Perry and its surrounding counties. Use this data to support grant applications, recruit providers, and align strategic investments with community need.
- Indiana Addiction Treatment Resource Overview
- https://www.in.gov/fssa/addiction/
- Promote resources available through the **Perry and Spencer Counties Community Foundation**, which supports expanded access to mental health services for local residents. https://hccfindiana.org/post/Mental-health-resources-expanded-for-Steuben-County-residents
- Leverage **IRHAHelp!**, an online resource from the Indiana Rural Health Association that connects people to behavioral health programs and services. https://irhahelp.indianaruralhealth.org/
- Connect individuals with **Certified Community Behavioral Health Clinics (CCBHCs)**, which offer integrated, comprehensive services for mental health and substance use needs. https://www.in.gov/fssa/dmha/certified-community-behavioral-health-clinic/individuals-receiving-services/
- Ensure awareness of the **988 Suicide & Crisis Lifeline** and **Mobile Crisis Teams**, which provide immediate crisis intervention and connect callers to local services. https://988indiana.org/
- Encourage patients to use **Be Well Indiana** and the **Indiana 211 Helpline** (dial 2-1-1 or text ZIP code to 898-211) for connections to counseling, support groups, and community-based services.
- Refer patients and families to **Mental Health America of Indiana (MHA-IN)** for education, advocacy, and peer support. https://www.mhai.net/
- Engage with the **Indiana Family and Social Services Administration (FSSA) – Division of Mental Health and Addiction (DMHA)** for access to treatment initiatives, prevention programs, and funding support. https://www.in.gov/fssa/dmha/
- Promote the **INConnect Alliance** as a hub for connecting individuals with disabilities and behavioral health needs to specialized community resources. https://www.in.gov/fssa/inconnectalliance/

- Partner with the **Indiana Youth Institute** to support youth-focused mental health initiatives, mentoring, and early intervention programs. https://iyi.org/
- Refer expectant mothers to the **Indiana Pregnancy Promise Program (IPPP)**, which provides comprehensive care coordination and wraparound services for pregnant women with Medicaid. https://www.in.gov/fssa/promise/
- Promote **My Healthy Baby**, Indiana's free program that connects pregnant women and new mothers with family support providers for personalized guidance and resources. https://www.myhealthybabyindiana.com/
- Encourage use of the **Perry and Spencer Counties Maternal & Child Health Clinic**, which provides maternal health services, health screenings, and referrals for county residents. https://www.in.gov/localhealth/Steubencounty/maternal-and-child-health-clinic
- Refer patients to regional systems such as **Baptist Health**, which provides comprehensive labor, delivery, and mother-baby care. https://www.baptisthealth.com/care-services/services/mother-baby-care
- Connect patients with **OB/GYN Associates of Southern Indiana**, offering a full range of obstetric and gynecological services. https://www.obgynsi.com/
- Promote specialty and high-risk pregnancy services through **U of L Physicians – OB/GYN & Women's Health**, a regional resource for advanced maternal and women's health care. https://uoflhealth.org/locations/uofl-physicians-ob-gyn-womens-health
- Highlight **WomanCare**, which provides OB/GYN services and women's health support to patients in Southern Indiana. https://woman-care.org/

PCMH can improve maternal and infant outcomes by screening for pregnancy-related needs early, coordinating referrals to OB providers and maternal health programs, partnering with regional systems to ensure continuity of care, and incorporating community education programs that promote healthy pregnancies.

PCMH can expand access to mental health and SUD care by embedding behavioral health screenings in routine visits, establishing warm hand-offs to local providers, collaborating with schools and youth-serving organizations, and supporting staff education to reduce stigma and improve early identification of behavioral health needs.

Ensuring that residents of Perry and Spencer Counties have reliable access to OB/GYN and behavioral health/substance use specialty services is critical to achieving comprehensive community health. By building partnerships, enhancing referral networks, and aligning local services with hospital-community strategies, Perry County Memorial Hospital and its community partners can address specialty care gaps and support improved health outcomes for women, families, and individuals facing behavioral health challenges.

Social Drivers of Health

The conditions in which people are born, live, work, learn, and age fundamentally shape the health of individuals and entire communities in Perry and Spencer Counties and the surrounding region. Factors such as economic stability, educational opportunity, social support, and neighborhood environment intertwine with healthcare access and quality to influence health outcomes. In rural settings like Perry and Spencer Counties, addressing these social drivers of health offers a vital pathway for improving equity, preventing disease, and fostering sustainable wellness across the lifespan.

Economic and social stability are foundational. When families face unstable employment, limited income, or housing insecurity, their capacity to manage chronic conditions, access preventive care, and engage in healthy behaviors is reduced. Educational and social environments – including schools, social networks, and community infrastructure – also play a critical role in shaping health trajectories by influencing health literacy, social connection, and resilience. Lastly, neighborhood and built-environment factors (like transportation, broadband access, safe housing, and access to recreation) contribute to the daily opportunities people have to live healthy lives.

In the PCMH community, local organizations, public health entities, and community coalitions are actively working to address these drivers by coordinating efforts to improve social supports, expand connectivity, and align social services with health system strategies. By integrating attention to social drivers of health into the hospital's community health improvement work, Perry County Memorial Hospital can help ensure that clinical care and community supports operate in tandem rather than in isolation. Building stronger cross-sector collaborations around housing, employment, education, transportation, and social connectivity will help lay a foundation for lasting health improvements in the region.

- **Partner with social services, workforce and education agencies** to map the most pressing social drivers of health locally (e.g., economic instability, social isolation, educational gaps) and identify high-impact intervention points.
    - Indiana Department of Health: State Health Assessment and Improvement Plans https://www.in.gov/health/phpm-archive/files/2022-2026-Indiana-State-Health-Assessment-and-Improvement-Plan-_FINAL.pdf
- **Embed screening for social needs into hospital and clinic workflows**, using validated tools to identify patients who may face housing, food, transportation, or other non-medical barriers, and connect them to community supports.
    - Drive for Five offers resources available to physicians and their patients to address social determinants of health. https://www.jotform.com/app/231644285709159
    - Indiana 211 – 2-1-1 is a free and confidential service that helps Hoosiers across Indiana find the local resources they need.

    - Leverage **IRHAHelp!**, an online resource from the Indiana Rural Health Association that connects people to behavioral health programs and services. https://irhahelp.indianaruralhealth.org/
- **Strengthen multi-sector coalitions** — bring together healthcare, public health, education, housing, employment and transportation partners to develop shared metrics, collaborative strategies, and a coordinated plan to address social determinants of health in Perry and Spencer Counties.
- **Partner with housing resource organizations** to map housing affordability and stability issues in the county and identify households at high risk of cost-burden or housing instability.
    - Housing4Hoosiers: Indiana's rental assistance and housing-affordability portal. https://housing4hoosiers.org/rentassistance/
    - Indiana Housing & Community Development Authority (IHCDA): supports affordable housing development, rental assistance, homeownership programs. https://www.in.gov/ihcda/
- **Collaborate with food access stakeholders** to assess where residents face the greatest barriers in accessing healthy, affordable food and connect screening/ referrals from hospital settings to community food resources.
    - Indiana Division of Nutrition & Physical Activity: state resource on increasing access to healthy food and farmers markets.
        1. Community Compass – Interactive online tool to help locate free meals, free groceries, WIC retailers and clinics, SNAP retailers, and more. You can also download the app on all smartphones.
        2. Indy Hunger Network – The goal of the Indy Hunger Network (IHN) is to create a system that ensures anyone who is hungry can access the nutritious food they need.
- Promote **Blue River Services, Inc.**, which provides affordable public and medical transportation services in Southern Indiana, including support for individuals with disabilities and seniors. https://www.brsinc.org/transportation
- Utilize **United Coachways**, a provider of specialized medical transportation services, including options available in Perry and Spencer Counties. https://unitedcoachways.com/medical-transportation-in-Steuben-indiana
- Connect Medicaid-eligible patients with **Verida**, which coordinates non-emergency medical transportation for qualifying members in Indiana. https://verida.com/indiana-members
- Encourage eligible patients to access **CareSource Transportation**, which provides free or low-cost transportation for Medicaid members. https://www.caresource.com/in/plans/medicaid/benefits-services/additional-services/transportation
- Leverage the **Recovery Assist Platform Transportation Toolkit** to connect patients in recovery or with behavioral health needs to appropriate transportation solutions. https://recoveryassistplatform.com/transportation-toolkit

- Partner with the **Indiana Community Action Association (INCAA)** to explore affordable transportation programs and advocate for improved funding for rural transit initiatives. https://www.incap.org/

Addressing social drivers of health is essential for creating the conditions in which individuals and families in Perry and Spencer Counties can thrive, not just survive. By aligning community supports with clinical care and pursuing a shared vision of health equity, Perry County Memorial Hospital can help advance a more holistic approach to wellness in its region.

Conclusion

The Indiana Rural Health Association is pleased to serve Perry County Memorial Hospital. IRHA has worked with the team at PCMH in various capacities for many years and highly respects its accomplishments that greatly contribute to the health needs of the residents in Perry and Spencer Counties and beyond. Growth and improvement in any area of need begins with education and collaboration. Communities of all sizes must join together and align the resources of their organizations and members to address areas of need and explore opportunities.

This Community Health Needs Assessment provides the foundation for strategic improvements in health outcomes, emphasizing education, collaboration, and community-driven initiatives. The data and insights gathered reflect the voices of local residents and stakeholders, offering a clear path forward.

By focusing on identified priority areas—housing, childcare, transportation, and access to health care—PCMH can develop targeted interventions that improve both access and equity. The hospital is in a unique position to lead coordinated, community-wide efforts that mobilize resources, foster partnerships, and address these priorities head-on.

With sustained leadership, open communication, and collaboration across sectors, Perry and Spencer Counties can move toward a healthier future, where every resident has access to high-quality care, supportive resources, and a thriving, health-focused community.

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