



Community Strengths and Themes Assessment



Annual Report
Fiscal Year 2023

Prepared by Health Promotion Operations
Health Promotion and Wellness
Defense Centers for Public Health – Aberdeen

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2023 Community Strengths and Themes Assessment

Background

- The Community Strengths and Themes Assessment (CSTA) is part of a comprehensive suite of assessment tools for military communities to assess health risk factors and perceptions of health-related needs to improve overall readiness and resiliency.
- The CSTA identifies priorities for community coalitions to assist Command-level leadership in development of a responsive and holistic community support plan.

Methods

- The CSTA is administered every 2 years to Service Members, adult Family Members, Civilian employees, Veterans, and Retirees.
- The sample size of completed assessments for fiscal year 2023 is **6,996**.
- Data were collected from **October 2022 through September 2023**.
- The 21 installations contributing to this report include Fort Belvoir, Fort Gregg-Adams, Fort Irwin, Fort Jackson, Fort Johnson, Fort Leavenworth, Fort Leonard Wood, Fort Riley, Joint Base Myer Henderson Hall, Rock Island Arsenal, USAG Ansbach, USAG Bavaria, USAG Benelux, USAG Daegu, USAG Humphreys, USAG Italy, USAG Poland, USAG Rheinland-Pfalz, USAG Stuttgart, USAG Wiesbaden, and USAG Yongsan-Casey.



21 Locations Represented for FY23
 10 CONUS; 11 OCONUS

PHYSICAL HEALTH



Top 3 Physical Health Concerns *N* = 6,996



Lack of Health Care Access <i>n</i> = 2,363	33.8%
Overweight/Obesity <i>n</i> = 2,518	36.0%
Poor Diet <i>n</i> = 2,303	32.9%

Top 3 Health-Related Activities to Support Community Health *N* = 6,996



Stress Management <i>n</i> = 2,840	40.6%
Physical Activity <i>n</i> = 1,868	26.7%
Weight Loss Programs <i>n</i> = 1,810	25.9%

Perceptions of How Healthy People are on the Installations *N* = 6,958



Very Healthy <i>n</i> = 429	6.2%
Somewhat Healthy <i>n</i> = 3,990	57.3%
Somewhat Unhealthy <i>n</i> = 2,123	30.5%
Very Unhealthy <i>n</i> = 416	6.0%

BEHAVIORAL AND EMOTIONAL HEALTH



Top 3 Behavioral Health Concerns *N* = 6,564



Depression <i>n</i> = 3,758	57.3%
Stress <i>n</i> = 3,286	50.1%
Anxiety <i>n</i> = 2,653	40.4%

Perceptions of Behavioral, Psychological, and Emotional Health *N* = 6,548*



Very Healthy <i>n</i> = 367	5.6%
Somewhat Healthy <i>n</i> = 2,880	44.0%
Somewhat Unhealthy <i>n</i> = 1,930	29.5%
Unhealthy <i>n</i> = 944	14.4%

* *n* = 427 (6.5%) Prefer not to Answer

Likelihood of Seeking Support on Installation *N* = 6,550*



Very Likely <i>n</i> = 1,185	18.1%
Somewhat Likely <i>n</i> = 1,949	29.8%
Somewhat Unlikely <i>n</i> = 1,375	21.0%
Very Unlikely <i>n</i> = 1,646	25.1%

* *n* = 395 (6.0%) Prefer not to Answer

SOCIAL AND ENVIRONMENTAL HEALTH



Top 3 Social and Environmental Health Concerns N= 6,291



Work-Life Balance n = 3,596	57.2%
Financial Issues n = 2,732	43.4%
Career Opportunities/ Unemployment n = 1,860	29.6%

Top 3 Strengths of Installations N= 6,291



Diverse Community n = 1,816	28.9%
Access to Sports and Recreation Activities n = 1,541	24.5%
Safe Neighborhoods n = 1,390	22.1%

Perceptions of Environmental Health Conditions on Installations N= 6,253*



Very Healthy n = 518	8.3%
Somewhat Healthy n = 2,620	41.9%
Somewhat Unhealthy n = 1,768	28.3%
Very Unhealthy n = 760	12.2%
N/A Remote Employee n = 110	1.8%

* n = 477 (7.6%) Prefer not to Answer

SPIRITUAL HEALTH



Top 3 Spiritual Health Concerns *N* = 6,111



Lack of Morals <i>n</i> = 1,388	22.7%
Lack of Community Cohesion <i>n</i> = 1,301	21.3%
Lack of Purpose <i>n</i> = 1,213	19.8%

Satisfaction of Spiritual Needs Met on Installation *N* = 6,100



Very Satisfied <i>n</i> = 941	15.4%
Somewhat Satisfied <i>n</i> = 1,381	22.6%
Somewhat Dissatisfied <i>n</i> = 714	11.7%
Very Dissatisfied <i>n</i> = 427	7.0%
N/A No Spiritual Needs <i>n</i> = 2,637	43.2%

Top 3 Improvements for Community Spiritual Health *N* = 6,111



More Time to Participate <i>n</i> = 1,395	22.8%
More Alternative Choices <i>n</i> = 1,239	20.3%
More Spiritual Activities <i>n</i> = 1,166	19.1%

FAMILY HEALTH



Top 3 Family Health Concerns N= 6,002



Work-Life Balance <i>n</i> = 2,315	38.6%
Financial Issues <i>n</i> = 2,045	34.1%
Access to Childcare <i>n</i> = 1,854	30.9%

Satisfaction with Community Support for Financial Setbacks N= 5,989*



Very Satisfied <i>n</i> = 516	8.6%
Somewhat Satisfied <i>n</i> = 1,499	25.0%
Somewhat Dissatisfied <i>n</i> = 612	10.2%
Very Dissatisfied <i>n</i> = 509	8.5%
Unaware of Support <i>n</i> = 1,063	17.7%

Top 3 Financial Training and Education Interests N= 6,002



Retirement Planning <i>n</i> = 2,834	47.2%
Financial Goals <i>n</i> = 2,617	43.6%
Budgeting <i>n</i> = 2,484	41.4%

**n* = 1,790 (29.9%)
No Support Needed

PROGRAMS AND SERVICES



Awareness of Installation Programs and Services

N = 5,926*



Very Aware <i>n</i> = 1,063	17.9%
Aware <i>n</i> = 1,719	29.0%
Somewhat Aware <i>n</i> = 2,123	35.8%
Not at all Aware <i>n</i> = 526	8.9%

* *n* = 495 (8.4%) Prefer not to Answer

Reported Usage of Community Resource Guide (CRG)

N = 5,926



Yes <i>n</i> = 1,582	26.7%
No <i>n</i> = 2,014	34.0%
Unaware of CRG <i>n</i> = 2,330	39.3%

Receipt of Needed Health Services over Past Year

N = 5,878*



Always <i>n</i> = 872	14.8%
Most of the Time <i>n</i> = 1,120	19.1%
Sometimes <i>n</i> = 942	16.0%
Rarely <i>n</i> = 719	12.2%
Never <i>n</i> = 473	8.0%

* *n* = 515 (8.8%) Prefer not to Answer;
n = 1,237 (21.0%) No Services Required

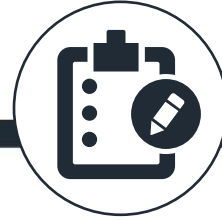
RESPONDENT CHARACTERISTICS



Service Affiliation	Army (<i>n</i> = 5,525)	94.7%
Principal Role	Active Duty Service Member (<i>n</i> = 2,967)	50.9%
Grade	GS12-GS15 (<i>n</i> = 1,002)	17.2%
	E5-E6 (<i>n</i> = 936)	16.0%
Gender	Male (<i>n</i> = 3,354)	57.5%
Age	26-39 years (<i>n</i> = 1,904)	32.6%
	40-54 years (<i>n</i> = 1,739)	29.8%
Race/Ethnicity	White/Caucasian (<i>n</i> = 3,134)	53.7%
Marital Status	Married (<i>n</i> = 3,640)	62.4%
Education	Master's Degree (<i>n</i> = 1,476)	25.3%
	Bachelor's Degree (<i>n</i> = 1,442)	24.7%

Note: Reported numbers represent largest proportion of respondents.

OVERALL SUMMARY



- Across all 21 Army locations, approximately half of respondents indicated people on their installation as somewhat healthy from a physical health (57%), behavioral health (44%), and environmental health (42%) perspective.
- Approximately one third of respondents indicated concerns regarding lack of access to healthcare (34%), obesity (36%), poor diet (33%), and access to childcare (31%).
- More than half (57%) of respondents indicated behavioral health concerns regarding depression, with 50% indicating concerns regarding stress.
- Work-life balance was indicated as a top concern for social and environmental health (57%) as well as family health (39%).
- Just over one third of respondents indicated financial issues as top social and environmental concerns (43%) as well as family health concerns (34%).
- Diverse communities (29%), access to sports and recreational activities (25%), safe neighborhoods (22%), and clean environments (22%) were indicated as strengths of the installations.

RECOMMENDATIONS AND WAY FORWARD



- Leaders and stakeholders are encouraged to read and share the FY23 CSTA results widely with Department of Defense health, readiness, and prevention professionals.
- Integration of CSTA findings into Community Health Improvement Planning efforts is strongly encouraged to support current and future programming efforts.
- Lack of access to health care, behavioral health concerns, work-life balance, and financial issues were indicated as common concerns across locations within multiple health-related domains suggesting a continued need to focus on these areas for community-level improvements in overall quality of life.

RESOURCES



Leaders and stakeholders can leverage health and readiness resources from the Defense Centers for Public Health – Aberdeen (DCPH-A) to action findings from the CSTA.

Public facing webpages contain a variety of resources, references and reports with topics including:

Injury prevention for Active Duty personnel:

<https://ph.health.mil/topics/discond/ptsaip/Pages/default.aspx>

Child health, safety, and well-being:

<https://ph.health.mil/topics/healthyliving/chswb/Pages/default.aspx>

Sexual health:

<https://ph.health.mil/topics/healthyliving/rsbwh/Pages/default.aspx>

Women's health:

<https://ph.health.mil/topics/healthyliving/wh/Pages/default.aspx>

RESOURCES



The Community Resource Guide (CRG) was developed by DCPH-A as a digital inventory of resources supporting community resource gaps and public health promotion processes. The CRG catalogs local resources, support services, and programs at the installation level. Categories include:

Medical and Behavioral Health Services

Education and Career Development

Social Services

Recreational Activities

Installation CRGs can be located here: <https://crg.health.mil/Pages/default.aspx>

RESOURCES



- The *Health of the Force* (HOF) report provides medical, environmental health, and Performance Triad metric data at the installation level and can be used in conjunction with findings from the CSTA to support overall Community Health Improvement Planning efforts.
<https://ph.health.mil/topics/campaigns/hof/Pages/default.aspx>
- The *Health of the Army Family* report characterizes the health and well-being of Army Family members in the context of the unique military environment. This DCPH-A resource can be used in support of results from the CSTA to action specific findings for diverse audiences including Service Members and their Families, Army Leaders, Research and Evaluators, Policy Makers, and Program Proponents.



For more information, please contact Health Promotion Operations at
<https://phc.amedd.army.mil/Pages/Contact.aspx?o=hpw>
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