

Feedback on data shared at the October Advisory Committee Meetings

Topic	Section	Description (Question/ Factor)
Access to Care & Services	Access	Can it be correlated to \$/ rate decrease/ R.I.
Access to Care & Services	Access	Health care system. Money spent by race, ethnicity & gender etc.
Access to Care & Services	Access	Medical/ Legal partnerships. Do high deductible plans discourage preventive services? Health literacy.
Access to Care & Services	Access	How does the distance to E.D.s compare to other rural states?
Access to Care & Services	Access	Want to see data based on employment information.
Access to Care & Services	Access	Specialty care (i.e; brain injury). Travel times are -> eg, DHMC or UVMHC? Access to mental health care is missing. We have one psychiatric hospital for children in VT and it's in Brattleboro. Access to PCP where there is a behavior issue so they are banned or they have forgotten too many appointments.
Access to Care & Services	Access	Brain injury survivors do not have access to MH agency programs even if they have a MH diagnosis - does this need a legislative change?
Access to Care & Services	Access	Medical population by county. Medical recipients that are disabled.
Access to Care & Services	Access	Medicaid specific information: Health status of medicaid recipients is of interest because these are people with lower SES.
Access to Care and Services	Access	Identifying factors of resiliency. Who delayed care? How long was the wait?
Access to Care and Services	Access	In school setting/ forms.
Access to Care and Services	Access	Cost of Health Insurance! Including VHC.
Access to Care and Services	Access	Are the behavioral issues which lead to forgetting appointments also what keep providers from accepting appointments?
Access to Care and Services	Access	Why do people <u>Not</u> go for an annual visit? Poverty, can't afford the deductible? People with developmental disabilities (but not getting home and community based services) don't go because feel the doctor doesn't communicate well/ answer questions.
Access to Care and Services	Access	Too far to go, health/no health issues; blame weather & poor road conditions; physically undable to go to PCP or hospitals.
Access to Care and Services	Access	Farm & migrant workers have more barriers including transportation.
Access to Care and Services Adults with PCP	Access	Employment policies to allow for healthcare. Less clinical/ more welcoming.
Oral health, Vision, & Hearing	access	Neglected systems.
Oral Health?	access	According to ADA, VT has the highest gap in utilization of dental care between people with private dental insurance & medicaid. Huge disparity/ equity issue (adults).
Shortage of Providers	Access	What incentives are in place to recruit new MD's? Primary care = Low pay! VS High cost of education. Specialty care = limited in rural areas.
Adult & Youth Risk Behaviors	Chronic	What is percentage of youths of color are successfully treated for risky behaviors?
Adult & Youth Risk Behaviors	Chronic	If you segment risk behaviors for adults over 18, think about those who are most likely child-rearing age.
Adult & Youth Risk Behaviors	Chronic	Youth risk behavior survey- marginalized groups may need special categories- special needs students etc. Give us trends for adult & youth risk behaviors.
Cancer	Chronic	Slide 16 is going in the right direction. Looking at health by education & income etc.

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Cancer	Chronic	# issue on this slide. (For low income).
Cancer	Chronic	Did cancer get broken out by medicaid? Which had just screening? Are more low income people suffering?
Cancer	Chronic	Breakdown of types of cancer
Cancer Screening	Chronic	Hope you come to a time/place where you have data on cancer screenings that would add lung cancer to cervical, colorectal, & breast cancers.
Chronic Disease	Chronic	Arthritis data by occupation
Chronic Disease, Tobacco Use & Sexual Orientation	Chronic	Explanation of Connection between HIV, smoking & sexual orientation; why present these together?
Chronic Disease, Tobacco Use & Sexual Orientation	Chronic	Don't like that LGBT, HIV testing, and smoking are presented together. Seems negative.
Chronic Diseases	Chronic	Planning for alzheimers: Long term care?
Drug Related Fatalities Over Time	Chronic	County data for suicide or drug use of other deaths/ behaviors not as useful as social measures. Using network analysis to look at critical determinants; such as group dynamics related to "shooting up" or fentanyl content in certain groups of users etc.
Drug Related Fatalities Over Time	Chronic	Identify one of drug related overdose with the idea of identifying intervention parts & trends.
Farmers	Chronic	Injury prevention data (SIREN- EMS Ambulance). How VDH can get. Migrant data -> migrant education (Extension Program- best migrant data in state).
Heart Attack & Stroke	Chronic	Is the decrease in heart attack and stroke death rates tied to decrease in smoking?
Injury	Chronic	Break down firearms into circumstances - Domestic violence etc.
Injury Deaths by age	Chronic	The "tied" factors could be classified.
OverWeight/ Obesity	Chronic	Compared
OverWeight/ Obesity	Chronic	Is the obesity trend correlated with aging population?
Risk Behaviors	Chronic	Prescription misuse - Overtime # & what drugs.
Suicide	Chronic	Background on suicide: Healthcare, recent deployment, high risk time? Need a better sense of community. Driving factors - loneliness, connection to community. Create community - help to prevent many health adverse outcomes. But how are people drawn to community? What works? (Eg; senior citizens don't use senior
Suicide	Chronic	Would like to see how other sources of trauma (aside from Veteran status) eg; intimate partner violence impacts rates.
Suicide	Chronic	# of women lower # of attempts.
Suicide	Chronic	Rates - LGBT vs Not LGBT community.
Suicide	Chronic	Is their a correlation with economic status?
Suicide	Chronic	Attempts (guns) vs death. Suicide rate by employment status/ faze.
Suicide	Chronic	Present geographically; rural vs urban. Substance abuse/ mental health relationship - Match with available mental health services.

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Suicide in Veterans	Chronic	Thinking of Veterans as survivors of war, contextualizing refugee communities in suicidality data + trauma response.
Suicide in Veterans	Chronic	Suicide pie chart; % Veterans compared to Non-Veterans - 18 - 34 age group - suicide - is that National Guard?
Suicide in Veterans	Chronic	What is the number? (Out of 100,000 people?)
Suicide Rate	chronic	Average age? What is the median age? It looks like 46 years of age is the average?
Suicide Victims	Chronic	How many were receiving services?
Tobacco Use	Chronic	Cost of E-cig vs tobacco types / Influence
Tobacco Use	Chronic	Smoking rates among pregnant women - Intended vs unintended comparison.
Top Injury by Age	Chronic	Could unintended injury be broken down by type?
Top Injury Deaths by Age	Chronic	Poisoning by age & by overdose vs other accidental It will be interesting to see how access to narcan, role/ availability of recovery centers impacts poisoning/OD.
Top Injury Deaths by Age	Chronic	Intentional death by firearms, mental illness, and role of obtaining firearms.
Top Injury Deaths by Age	Chronic	Confusing "six tied" & "five ties". Why is poisoning # 1 in age 25-44? Does that include Opioids/ drug OD?
Youth Assets	Chronic	What are the reasons associated with 40% of kids of color not believing teachers really care and encourage them?
Youth Assets	Chronic	Are these all low? What's developmentally appropriate?
Youth Assets	Chronic	What impact does technology have on youth & health outcomes?
Youth Assets	Chronic	Youth equality disenfranchisement trends over time.
Youth Data	Chronic	How to bridge the gap of getting youth data.
Dementia	Chronic	Lack of public health attention? Placement & quality of care?
Adult & Youth Risk Factors	Chronic	Peer pressure, social environment, stress, no relaxation methods.
Arthritis	Chronic	Aging population, type of work & length of work (farming, forestry, & construction).
Cancer	Chronic	More data showing who reports feeling well in past ~30 days, strengths based.
Cancer Screening	Chronic	May be change in recommended screenings.
Cancer Screening	Chronic	Getting fewer screenings, why? Difficulty of getting follow-up appointment (transportation), lack of accessible equipment - eg; mamograms, physician bias - reluctance to "put someone with a disability through a colonoscopy".
Cancer Screening	Chronic	Changing benchmarks/ recommendations leads to confusion -> especially for "female" cancers. Sometimes requires multiple appointments - resource intensive. Transparency -> What am I actually supposed to be doing?
Chronic Disease	Chronic	Cancer screening - changing recommendations and "controversy" in regards to th "right" frequency of screenings continues. Also the cost of diagnostic tests - ignorance is bliss.

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Chronic Disease	Chronic	Role of access to recovery centers - any impact on poisoning/ overdose. And going forward with ability to distribute Narcan - how will access to recovery centers impact OD deaths?
Chronic Disease	Chronic	People with disabilities are in some categories of disability.
Chronic Disease - Cancer	Chronic	Why are cancer screening rates going down? Do low income folks know about programs to pay for screenings? I believe many screenings are free, but what about treatments? If you know you can't afford treatment than why be screened?
Chronic Disease - For people with disabilities - O	Chronic	Prejudice, lack of access to gym, transportation to gym, adaptive equipment, etc. Exclusion from competitive sports, failure of MD's to counsel people with disabilities about weight, lack of wheelchair accessible scales, use/ overuse of psychotropic medications for any type of "challenging behavior".
Chronic Disease - Heart Disease/ Stroke	Chronic	Why do we keep focusing on heart disease/ stroke when the people dying from these are on average, close to the average age of death for Vermonters.
Chronic Disease - Risk Behaviors	Chronic	Why is there such a difference between REM & WNH around "used Rx with out a prescription?
Chronic Disease - Risk Behaviors	Chronic	I worry about the BRFSS survey if it relies on landline surveying. Are all phones included? Younger people don't have landlines?
Diabetes	Chronic	Poverty? Refugee - diet, poor or nonexistent healthcare?
Drug Poisoning	Chronic	Essex County deaths are high; does this have to do with response times? Rutland County - access/ drug transporting from states south of VT landing in Rutland first?
Drug Related Fatalities	Chronic	Prescribing practices & standards of care. Within DoMH up 50% attributed to overdose, measure by network analysis. Break down by age, access, source
Drug Related Fatalities	Chronic	Fentanyl is changing heroin use + limited narcan availability. Offer education.
Drug Related Fatalities	Chronic	Contributing factors - poverty & trauma.
Drug Related Fatalities	Chronic	Depression; lack of support systems; boredom; no transportation; no help; wrong environment.
E-cigs	Chronic	Context - Market is not as regulated as traditional forms of tobacco.
Heart Disease/ Strokes	Chronic	No early screening; made standard screening for all ages; no dietary lessons; not aware of family history.
Heart Disease/ Strokes	Chronic	Emergency responders carrying AED's? Distance to hospitals> Alternative therapies? Care coordination is a challenge. Prevention/ education efforts.
Hypertension	Chronic	Diet, lack of exercise, stress? Under treated, diet, lack of exercise?
Injury	Chronic	Motor vehicle traffic as 2nd highest cause of injury deaths for children - need to enforce car seat laws.
Injury - Falls	Chronic	Aging population- Reason for fall assessment.
Injury - Suicide	Chronic	Waitlists for psychiatric care? Available mental health services?
LBTQ Smoking Rates	Chronic	Psychological stress & experiences of social stigma.
Lung Cancer	Chronic	Leading cancer killer. High rates of smoking with new Americans & low income in VT? High levels of radon in state?
Obesity/ Overweight	Chronic	We have known for a long time what shifts need to be made. Can we break it down by age, food access/ source. Multigenerational symptoms related to trauma, poverty, ACES - Where can we build protective factors?
Obesity/ Overweight	Chronic	Intellectual disabilities can be a barrier to eating healthy & leading an active life.

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Obesity/ Overweight	Chronic	Why No improvement? Calorie dense foods are cheaper than healthy foods.
Overweight & Obese	Chronic	Lack of mobility.
Suicide	Chronic	Not enough effective resources for returning Veterans. Need better access to VA services; including transportation.
Suicide	Chronic	Imbedded mental health professionals/ OneCare.
Suicide	Chronic	Working parents - lack of supervision - access to guns - rise in social media use - isolation. Whether receiving services?
Suicide	Chronic	Stigma.
Tobacco Use	Chronic	Network analysis of who is not smoking. Break it down by age, access, & source.
Tobacco Use	Chronic	Less money devoted to outreach & prevention. Why do people start/ continue to smoke? E-vape products - people think are healthier - need education.
Tobacco Use	Chronic	We need more research/ data around E-vape products. Young adults feel it's healthier than tobacco products.
Tobacco Use/ E-cigs	Chronic	Lack of education. Lack of awareness of potential harm.
Tobacco/ Alcohol & Other Substances	Chronic	Peer pressure/ stress management. Refugee - Easy access- more resources.
Top Injury in VT	Chronic	Lack of education for swimming - No lessons or membership needed. (= Expense)
Access to Care & Services	demographics	Children/ families who are in childcare/ have access to childcare or / and "affordable childcare"?
Age	demographics	Lower birthrate/ US. out- migration/ in- migration of young people.
Age Population	demographics	What is life expectancy of generational Vermonter's vs transplants?
Age/ Education	demographics	Types of occupational opportunities in VT - That attract young people may not exist in VT?
Aging Population	demographics	What impacts on systems & resources for an aging population? Increase of aging population + only ~ 50% of youth. Feel as though they matter in their community.
Aging Population	demographics	Age >65 over taking < 19 in 2020. How are we getting ready for this dramatic change? More nursing homes? More SSTA service? How is our resource allocation going to change to meet this change in needs/ care? What does this mean for the state economy?
Aging Population	demographics	Is the aging population unique to VT or common across the nation?
Aging Population	demographics	Loss of housing/ living as a contributing factor - buying & renting - taxes & cost. Wages are low/ & there are fewer job opportunities.
Average Age at Death	demographics	Data by race, mental health status, LGBTQ, & disability.
Cause of Death	demographics	If our age distribution matched the U.S., would out 10 leading causes change? Do we have better access to treatment that might impact?
Data	demographics	Length of life: What does "in VT" mean? (Born here, live here now, lived here x # of years?)
Data	demographics	National trend data over time. Economic data needs to allow and account for cost of living not just income level.

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Data	demographics	Vermont Food Insecurity data, current population. Survey breakouts by age available. (Annual release happens every September). (Katy Davis from Hunger Free Vermont can help access data from the census cps).
Demographics	demographics	Est. new Americans, other ethnicities, LGBTQ
Demographics	demographics	Poverty levels? FPL
Disability	demographics	"Disability is a natural part of the human experience" ADA & DD Act. DRVT works to "de-medicalize" attitudes and recognize the role of trauma. We support community oriented + non-segregated services and access to justice.
Farmers	demographics	National Agricultural Statistics Services (NASS) collects farmer data by state & county. Not particularly health but has info about accessing farmers. Get lists.
Health Outcomes	demographics	Leaving examples such as heart disease & diabetes are not examples of health outcomes they are disease outcomes. This is not semantics- it really matters in terms of interductions to change to health and well being outcomes not diseases. Even in the graphics.
High Cost of Higher Education	demographics	High stress, even in state schools very expensive.
Income Data	demographics	It would be great to see % of the FPL, where the population falls in.
Leading Causes of Death	demographics	Why is Vermont Leading death? We should be focusing on what contributes to quality of life.
Leading Causes of Death	demographics	Does VT drug poisoning correlate with geography in other causes of intentional death? Orange area corresponds most to poor socioeconomic opportunities.
Leading Causes of Death	demographics	Have we looked at higher rate of death by Alzheimers by age?
Leading Causes of Death	demographics	Leading contributors of death?
Leading COD- Adults & premature deaths	demographics	Observation: Need to see unintended injuries broken down by specific causes (esp. because it contains a # of disparate causes).
Mortality	demographics	Please don't start with or over emphasize mortality! Everyone will die of something - We need to emphasize Living not dying. If we focus on mortality it drives the improper balance of investing \$.88 on the dollar to health care, rather than health.
Mortality	demographics	National life expectancy.
Mortality	demographics	Where people are dying (hospitals, in - home, etc)?
Mortality/ Morbidity	demographics	Years of quality of life lost / QALY's
Premature Death	demographics	Co-morbidity with schitzophrenia & heart disease, diabetes, & injury.
Premature Death	demographics	Emphasis on death and premature mortality isn't as useful; perhaps as DALY's (Not YPLL's only) Also wouldn't Qaly's help in our thinking about health outcomes and potential areas for intervention and prevention?
Premature Death	demographics	Severe & persistent mental health issues impact premature death significantly. Data shows that age of death is 56 years.
Premature Death	demographics	Is it possible or feasible to also measure magnitude of premature death (ie, total premature death events x 80.5- age at death).
Premature Death	demographics	Could we look at SES status within these categories? Could we break out the 4 diseases that the Accountable Care organization (OneCare) is going to be measured by per their contracts with medicaid, medicare, and private carriers.
Race & Ethnicity	demographics	Changing demographics and Vermonts readiness to assist with comprehensive health needs of people of color.
Race & Ethnicity	demographics	What's going on in Rutland & Orange? So they are changing?

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Race & Ethnicity	demographics	Show data of population growth related to migration.
Race & Ethnicity	demographics	Language barriers?
Race/ Ethnicity	demographics	We were surprised by the progression - what is contribution of refugee/ intl. immigration vs U.S. - based on migration, adoption, etc?
Race/ Ethnicity	demographics	Are Latin farm workers reflected - to rising demographics?
SES	demographics	Women are segregated in to traditional roles - Are in SEM occupation/ education
SES	demographics	VT ranks # 1-2 for most well educated women, how does that translate to income?
SES	demographics	The "big picture" doesn't tell our individual stories- your own (smaller) context likely to influence your aspirations. Policier lead to "lines" that may determine where people live, work, etc.
SES	demographics	What are US comparisons? What proportion of Vermonters are "middle class" compared to US?(Eg, \$40,000 - \$100,000/ yr or some other definition of middle class).
SES	demographics	SES data break down by sex/ employment - Comparison to national average.
SES	demographics	Like to see data on the costs of higher education (UVM, VT Law School, St. Mikes, Champlain etc) over time in VT relative to Vermonter's income- broken down by whites/ non-hispanic & racial/ ethnic minorities (If we agree that higher education is one of the determinents of health).
SES	demographics	County level data for SES. Who are the 4% that live above \$200,000? -eg. Breakdown by millionaires, \$200,000 to \$500,000, etc? Is census data year-round residents? What about seasonal residents?
SES	demographics	Food insecurity in access- need to add to list on page 1 -
Sexual Orientation	demographics	Other gender - Non binary/ etc.
Sexual Orientation as priority population	demographics	Most new HIV occur in MSM. Testing #'s are going up. Although we're in a lower prevalence state. Would like to see more targeting of high-risk populations (MSM).
Trans Health	demographics	Some of the worst equity - what is the reason for the small?
VT Demographics	demographics	Birth rate declining (related to affordability, child care, job/ economic opportunity. Work force policies don't support raising families (haven't kept up with times).
Data	Disability	Number of learning disabled? Assessed & services? What % of disabled are employed or employable?
People with Disabilities	Disability	Broad category which lumps individuals with very different health & social issues together. Isn't it possible to start collecting collective data about this complex population sub group?
Airborne Diseases	environmental	From building mold? Asbestos removal- role of contractors?
Climate Change	Environmental	Older inefficient housing stock.
Climate Change	environmental	What is the mean for vulnerability? Is there a more compelling measure? Over time or regionally? How does it compare to cold vulnerability? Show % in annual precipitation? Like to see weeks early/ late for summer/ winter - what is it based on?
Environmental Health	Environmental	Heat vulnerability - poverty is a "why" - people can't afford to buy or pay electric for airconditioners.
Environmental Health- Transportation	environmental	Lack of transportation in VT.
Heat Illness Vulnerability	Environmental	# in trailers/ other housing types & quality. Lack of AC - Affordability of AC for older adults.

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Heat Vulnerability	environmental	Define vulnerable? What is the mean? Add trend over time. Add cold vulnerability.
Lead	Environmental	Interested to contextualize with poverty level/ race
Lead Exposure	environmental	By race & income.
Lead Poisoning	Environmental	More education to tenants/ landlords/ property owners.
Lead Poisoning	Environmental	Why is the number so low for % of 2 year olds (68%) being tested for lead? Perhaps we need to look at % of 2-5 year olds having a lead test to include those that are done after the 24 month visit. Can we keep MD's accountable for this 24th month lead test? If we know 5-6 % of kids have elevated lead when testing 68-78% of
Lead Poisoning	environmental	More info about source?
Lead Poisoning	environmental	Income levels- still = SES issue?
Lead Poisoning	environmental	What is the goal for testing? Clarify that we want the red & blue lines to match & both be higher.
Lead Poisoning	environmental	Break down by region or tenure (renter vs homeowner) or income level would make this graph more actionable. (Counter measures)
HIV	infectious disease	Youth don't understand their risks + stigma around using illegal drugs + external/ internal homophobia.
HIV Testing	infectious disease	Stereotyped as a "gay" disease. Not pushed in schools.
Immunizations	infectious disease	Why is childhood immunization still so low?
Lyme Disease/ All Tickborne Illnesses	infectious disease	Lack of provider & patient education. MD's may not study tick - Improve Dx (Pay with insurance).
Sexual Orientation - HIV	infectious disease	Is higher testing do to stigma or education? Is higher smoking rates do to greater discrimination? Diving this data in to race would be helpful.
Tickborne Diseases	infectious disease	Connection to climate. Are there patterns?
Tickborne Diseases	infectious disease	Climate change -> elevated number of ticks in environment due to rise in temperatures. Education around tick prevention. Coal - powered plants, alternative energy usage.
Tickborne Diseases	infectious disease	Education targetted to all groups (ex- refugees).
Tickborne diseases	infectious disease	Instead of tickborne Dx reporting alone why not get info associated with healthy behaviors related to preventing illness and infection, including: Really long pants, tucking socks into boots, showering after being in woods, tick checking on body, tick removal procedures & capabilities by average Vermonters (Not just health care
Tickborne diseases	infectious disease	This is something that's for parents (& others). Maybe add ages?
Tickborne Illnesses	infectious disease	Lack of outreach on protections against ticks. Climate change = more ticks.
LBGT	LGBTQ	Would it be more compelling to have something besides HIV testing? Hard to see the connection between HIV testing & smoking. Don't know what the testing is supposed to tell us? Trying to show added stress? Access? Awareness? Would suicide # show better? Is the rate of suicide higher for LGBT population?
Sexual Orientation	LGBTQ	Sexual orientation left blank on birth certificates?
Sexual Orientation as a Priority Population	LGBTQ	I'd like to know other aspects of the health of LGBTQ Vermonters, such as frequency of PCP visits, wtc. Will check data explorer.
Maternal & Family	maternal, child and f	Change to Family & Maternal Health. I thought this section was just for pregnant women & mothers at first. Put"Family" first.

Topic	Section	Description (Question/ Factor)
Preterm & low birthweight	maternal, child and f	Should be cross referenced with smoking during pregnancy. VT has one of the highest rates of smoking during pregnancy in the nation.
Unintended pregnancies/ Preterm & low Birthweig	maternal, child and f	Unintended pregnancies vs birth rate per age group. Is PRAMS only available in English? Preterm & birthweight by age of mother. # of teen pregnancies based on age of parents @ first birth? How many unintentional are repeat pregnancies?
Unintentional Pregnancies	maternal, child and f	Make the 3 charts that are side by side more distinct. Make clear what percentages represents.
Unintentional Pregnancy	maternal, child and f	Should this be focused on by all women? Male power dynamics. Limited aspirations may lead to unintended pregnancies.
Unintentional Pregnancy	maternal, child and f	WHI work - The graphs need visual separation - So we know it's 3 graphs. It can be figured out but it takes a minute. Colors of the bar graph don't match legend, so assume all bars = % of unintentional & lines = % prenatal care? Struggling with <20 having 14% intended pregnancy.
Unintentional Pregnancy/ Low Birthweight	maternal, child and f	Whate role does Substance abuse play with unintentional pregnancies & low birthweight?
Low Birth Weight	Maternal, child and f	Access to prenatal care
Sexual Health	Maternal, child and f	Expand concepts of sexual health beyond pregnancy prevention, Sexual health education in schools.
Unintended Pregnancies	Maternal, child and f	Need more outreach & education around contraceptions & prenatal care.
Unintended Pregnancies	Maternal, child and f	Cultural: Not talking about sex ed. Developmental: Higher age = higher level of cause/ effect thinking. Educational: Lack of length of sexual health education. Could be only 1 class per year.
Unintended Pregnancies/ Birth Control Access	Maternal, child and f	Rates of abortion, story of abortion, access in state, dating violence & domestic violence. Access to birthcontrol.
Unintended Pregnancies/ Prenatal care	Maternal, child and f	Need more emphasis on family planning/ contraceptives - start in middle school (earlier), Long acting contraceptives offered in doctor's office now, family planning clinics/ within family medicine setting - abortions. Health initiatives- contraceptives- incentives.
ACES		Contribution to health outcomes?
Data		All available by race & income. Building community - community spaces with free access & quality programming.
Data		Is it possible for each data set to make 1-2 statements about what the data tells us? The take away - key points we want people to see in the data?
General		Health related quality of life by chronic disease, mental health diagnosis.
General		More health related quality of life information. Not just death information. There needs to be a balance.
Mental Health (Refugee population)		History of trauma, poverty/ stress?
Suicide in Veterans		Suicide among Veterans dependent upon the conflict they were involved in.
Veterans		How is Veteran defined?
Vision Feedback		In addition to making sure services are culturally appropriate, we need to make sure they're linguistically appropriate as well -> Language services access.