



Neighborhoods at Risk

Selected Tracts

Selected Location(s):

Cherry Creek CDP, South Dakota, SD

Comparison Location:

U.S.

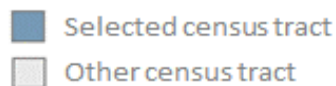
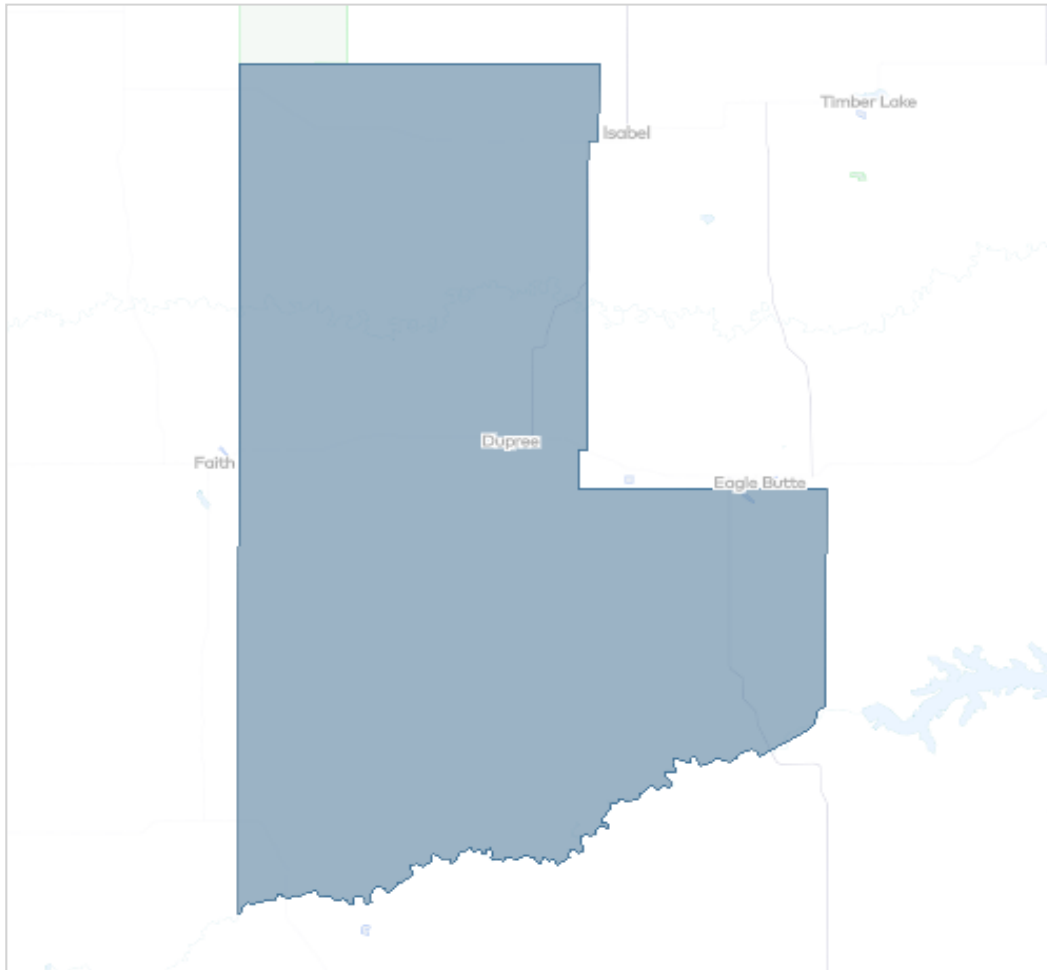
Produced by

Headwaters Economics'

Economic Profile System (EPS)

August 4, 2022

Area of Interest



Headwaters Economics

Headwaters Economics is an independent, nonprofit research group that works to improve community development and land management decisions: headwaterseconomics.org.

Neighborhoods at Risk

Neighborhoods at Risk is a free, web-based tool that provides cities with neighborhood-level information about at-risk populations and their vulnerability to the impacts of climate change.

Free and easy-to-use: Quickly create maps and reports of socioeconomic and climate data.

Available nation-wide: Explore socioeconomic and climate data for any community or county in the nation.

Updated continuously: Make use of the latest available, published government data.

headwaterseconomics.org/apps/neighborhoods-at-risk

Neighborhoods at Risk

Selected Tracts

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Neighborhoods at Risk

Selected Tracts

Summary

Indicators 2020*	Selected Tracts	U.S.	Percent Difference Selected Tracts vs. U.S.
People under 5 years	7.4%	6.0%	21%
People over 65 years	10.1%	16.0%	-45%
People of color (including Hispanic)	76.1%	39.9%	62%
People who don't speak English well	0.0%	4.2%	-200%
People without a high school degree	12.4%	11.5%	8%
Families in poverty	31.8%	9.1%	111%
Housing units that are rentals	44.4%	35.6%	22%
Households with no car	11.5%	8.5%	30%
People with disabilities	10.4%	12.7%	-20%
People without health insurance	28.7%	8.7%	107%

High Reliability: Data with coefficients of variation (CVs) < 12% are in black to show that the sampling error is small.

Medium Reliability: Data with CVs between 12 & 40% are in orange. These values should be interpreted with caution.

Low Reliability: Data with CVs > 40% are displayed in red to indicate that the estimate is considered very unreliable.

* ACS 5-year estimates: 2020 represents average characteristics from 2016-2020.

CITATION: U.S. Department of Commerce, 2022. Census Bureau, American Community Survey Office, Washington, D.C., reported by Headwaters Economics' Neighborhoods at Risk, headwaterseconomics.org/par.

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Summary

Neighborhoods at Risk

Selected Tracts

Summary

What do we measure on this page?

This page shows a quick comparison for many of the indicators covered in this report to highlight how the selected tracts differ from the United States as a whole.

The percent, or relative, difference between the selected tracts and the U.S. is calculated by dividing the difference between the values by the arithmetic mean of the values.

Why is it important?

These indicators are all measures of a population more likely to experience adverse outcomes from disruptions due to extreme weather events, climate change, pollution, or limited health care access.

Particularly high percentages for any of these indicators may highlight populations that are at higher risk and in need of outreach from disaster planning, public health, or social service organizations.

CHANGES IN BOUNDARIES: Data describing change over time can be misleading when geographic boundaries have changed. The Census provides documentation about changes in boundaries at this site: www.census.gov/geo/reference/boundary-changes.html

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Summary

Neighborhoods at Risk

Selected Tracts

Families in Poverty

	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Total families for whom poverty status is determined, 2020*	39	628	79,849,830
Families in poverty	30	200	7,245,704
Families with children in poverty	27	164	5,298,835
Single mother families in poverty	11	105	3,217,776

Percent of Total, 2020*

Families in poverty	76.9%	31.8%	9.1%
Families with children in poverty	69.2%	26.1%	6.6%
Single mother families in poverty	28.2%	16.7%	4.0%

Change in Percentage Points, 2010*-2020*

For example, if the value is 3% in 2010* and 4.5% in 2020*, the reported change in percentage points is 1.5.

Families in poverty	na	-10.1	-1.0
Families with children in poverty	na	-4.3	-1.3
Single mother families in poverty	na	0.1	-0.8

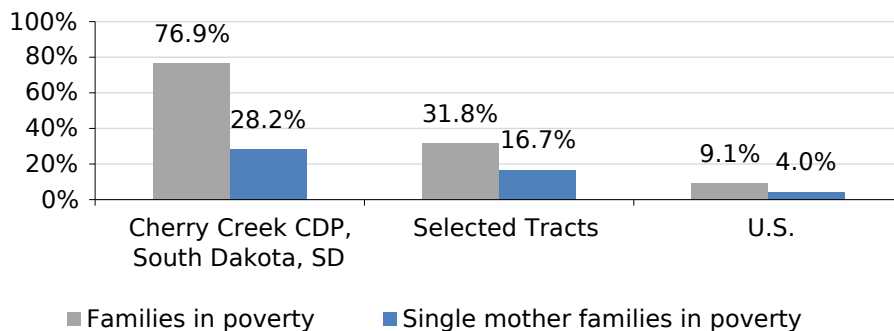
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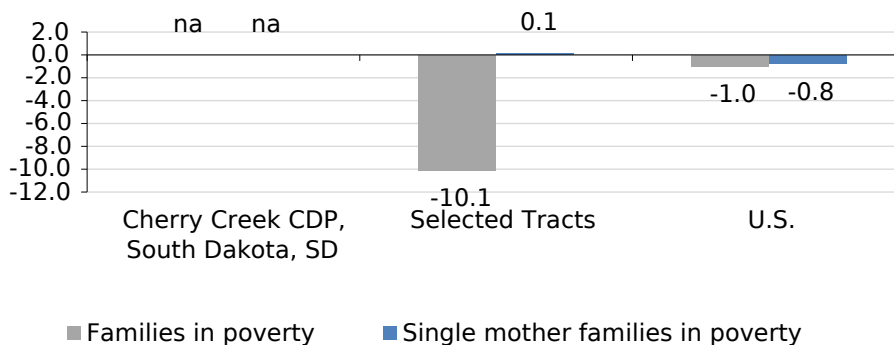
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Families in Poverty, Percent of Total, 2020*

- Cherry Creek CDP, South Dakota, SD has the largest share of single mother families in poverty (28.2%).



Families in Poverty, Change in Percentage Points, 2010*-2020*



* ACS 5-year estimates used. 2020 represents average characteristics from 2016-2020; 2010 represents 2006-2010.

CITATION: U.S. Department of Commerce. 2022. Census Bureau, American Community Survey Office, Washington, D.C., reported by Headwaters Economics' Neighborhoods at Risk, headwaterseconomics.org/apps/neighborhoods-at-risk.

Neighborhoods at Risk

Selected Tracts

Families in Poverty

What do we measure on this page?

This page describes the number of families living below the poverty line, and separately reports families with children and single mother families with children.

The Census defines a family as a group of two or more people who reside together and who are related by birth, marriage, or adoption.

The Census Bureau uses a set of income thresholds that vary by family size and composition to define who is poor. If the total income for a family or an unrelated individual falls below the relevant poverty threshold, then the family or an unrelated individual is classified as being "below the poverty level."

Why is it important?

Families in poverty may lack the resources to meet their basic needs. Their challenges cross the spectrum of food, housing, health care, education, vulnerability to natural disasters, and emotional stress.

To save money, families with low incomes often have to make lifestyle compromises such as unhealthy foods, less food, substandard housing, or delayed medical care.¹

Lack of financial resources makes families in poverty more vulnerable to natural disasters. This is due to inadequate housing, social exclusion, and an inability to re-locate or evacuate.^{11, 2}

Inadequate shelter exposes occupants to increased risk from storms, floods, fire, and temperature extremes.² Households with low incomes are more likely to have unhealthy housing such as leaks, mold, or rodents.⁵

The expense of running fans, air conditioners, and heaters makes low-income people hesitant to mitigate the temperature of their living spaces.^{1, 2} Furthermore, those in high-crime areas may not want to open their windows.²

Families in poverty are disproportionately affected by higher food prices, which are expected to rise in response to climate change.¹

Children in poor families, on average, receive fewer years of education compared to children in wealthier families.¹²

Low-income residents are less likely to have adequate property insurance, so they may bear an even greater burden from property damage due to natural hazards.²

Living in poverty can lead to a lack of personal control over potentially hazardous situations such as increased air pollution or flooding. Impoverished families may be less likely to take proactive measures to prevent harm.¹¹

Superscript numbers refer to references provided at the end of the report.

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Neighborhoods at Risk

Selected Tracts

Rental & Mobile Homes

	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Total Occupied Housing Units, 2020*	55	775	122,354,219
Rental Units	43	344	43,552,843
Mobile Homes	12	217	6,621,383

Percent of Total, 2020*

Rental Units	78.2%	44.4%	35.6%
Mobile Homes	21.8%	28.0%	5.4%

Change in Percentage Points, 2010*-2020*

For example, if the value is 3% in 2010* and 4.5% in 2020*, the reported change in percentage points is 1.5.

Rental Units	78.2	-2.7	4.4
Mobile Homes	21.8	0.4	-0.3

Median Home Value (MHV), 2020* (2021 \$s)	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Median Home Value (MHV), 2020* (2021 \$s)	\$0	\$72,034	\$240,601
Change in MHV, 2010*-2020* (2021 \$s)	na	-\$5,281	\$6,420

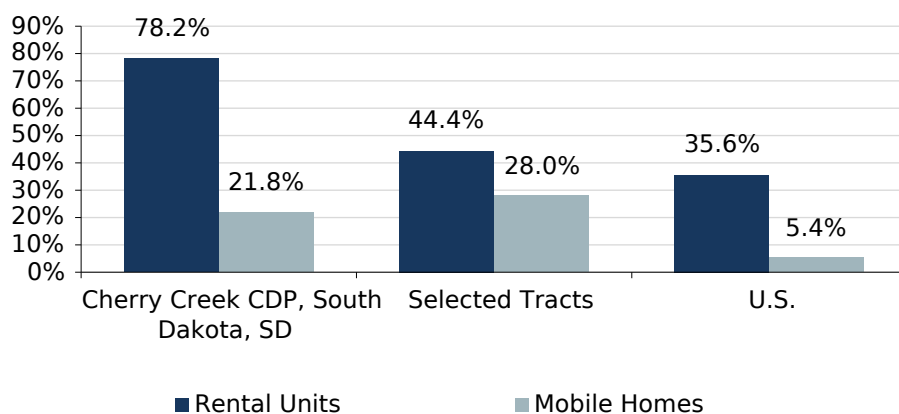
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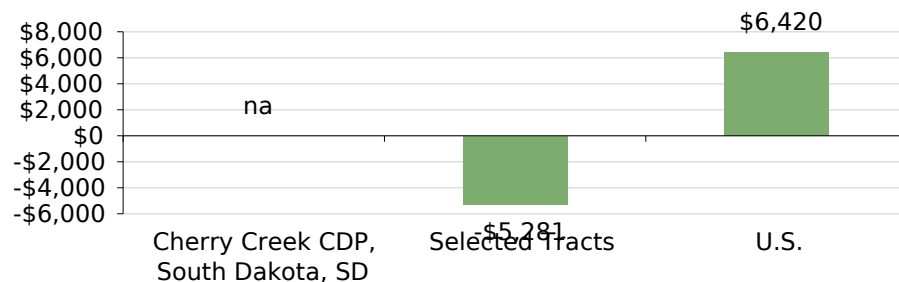
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Rental Units and Mobile Homes as a Percent of Total Housing Units, 2020*

- Cherry Creek CDP, South Dakota, SD has the largest share of rental units (78.2%).
- Selected Tracts has the largest share of mobile homes (28.0%).



Change in Median Home Value, 2010*-2020* (2021 \$s)



* ACS 5-year estimates used. 2020 represents average characteristics from 2016-2020; 2010 represents 2006-2010.

CITATION: U.S. Department of Commerce. 2022. Census Bureau, American Community Survey Office, Washington, D.C., reported by Headwaters Economics' Neighborhoods at Risk, headwaterseconomics.org/apps/neighborhoods-at-risk.

Neighborhoods at Risk

Selected Tracts

Rental & Mobile Homes

What do we measure on this page?

This page reports the numbers of housing units that are either rental units or mobile homes, and provides median home value.

Why is it important?

In general, home ownership contributes to well-being and stability. However, each type of living situation has its own risks and health concerns.

Home ownership is often associated with mental health benefits such as high self-esteem, a sense of control over one's living situation, and financial stability.¹³

The financial stress associated with losing one's home is heightened by people's emotional attachment to their home and their neighborhood.¹⁴

Homeowners typically pay a greater overall housing cost, but renters pay a larger proportion of their income. The high proportion of household costs for renters has further increased over the past 25 years.¹⁵

Rental homes are generally not maintained as well as those that are owned. Substandard housing conditions like dampness, mold, and exposure to toxic substances or allergens are linked with compromised health outcomes.¹³

Areas with high-density residences, such as urban areas, tend to have a greater proportion of renters.¹ High density living conditions and large, multistory apartment buildings exacerbate heat-related health stresses.⁴

Mobile homes are more likely to be damaged in extreme weather, which poses a risk for both the structure and the occupants.^{4,11}

Neighborhoods at Risk

Selected Tracts

People of Color and Hispanics

	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Total Population, 2020*	288	2,767	326,569,308
White alone	27	661	229,960,813
Black or African American alone	0	0	41,227,384
American Indian alone	249	2,001	2,688,614
Asian alone	0	0	18,421,637
Native Hawaii & Other Pacific Is. alone	0	3	611,404
Some other race alone	8	10	16,783,914
Two or more races	4	92	16,875,542
Hispanic or Latino (of any race)	8	93	59,361,020
Not Hispanic or Latino	280	2,674	267,208,288
Not Hispanic & White alone	27	661	196,251,375
People of Color and Hispanics	261	2,106	130,317,933

Percent of Total, 2020*

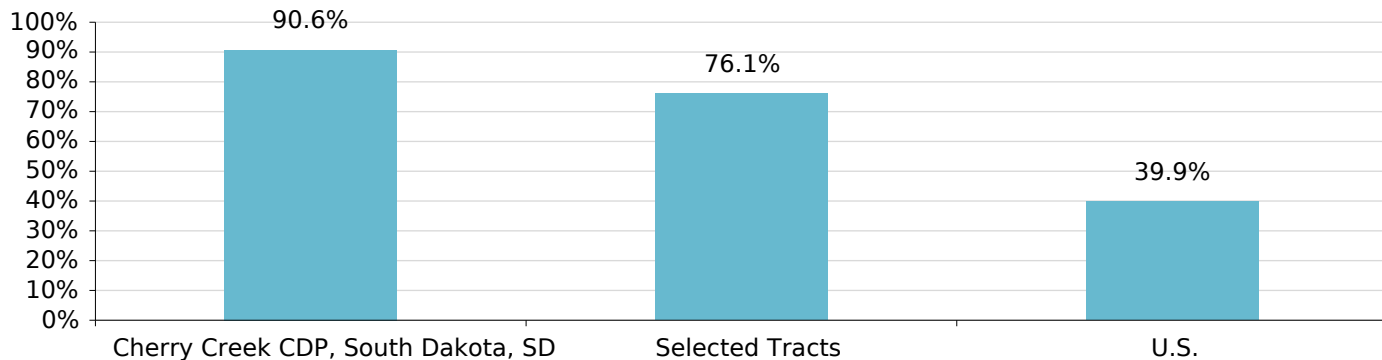
White alone	9.4%	23.9%	70.4%
Black or African American alone	0.0%	0.0%	12.6%
American Indian alone	86.5%	72.3%	0.8%
Asian alone	0.0%	0.0%	5.6%
Native Hawaii & Other Pacific Is. alone	0.0%	0.1%	0.2%
Some other race alone	2.8%	0.4%	5.1%
Two or more races	1.4%	3.3%	5.2%
Hispanic or Latino (of any race)	2.8%	3.4%	18.2%
Not Hispanic or Latino	97.2%	96.6%	81.8%
Not Hispanic & White alone	9.4%	23.9%	60.1%
People of Color and Hispanics	90.6%	76.1%	39.9%

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People of Color and Hispanics, Percent of Total, 2020*



* ACS 5-year estimates used. 2020 represents average characteristics from 2016-2020; 2010 represents 2006-2010.

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Neighborhoods at Risk

Selected Tracts

People of Color and Hispanics

What do we measure on this page?

Race is self-identified by Census respondents who choose the race or races with which they most closely identify. Included in "Other Races" are "Asian," "Native Hawaiian or Other Pacific Islander," and respondents providing write-in entries such as multiracial, mixed, or interracial.

Ethnicity has two categories: Hispanic or Latino, and Non-Hispanic or Latino. The federal government considers race and Hispanic origin to be two separate and distinct concepts. Hispanics and Latinos may be of any race.

"People of Color and Hispanics" is calculated by subtracting those who identify as both "Not Hispanic or Latino" and "White alone" from "Total Population."

Why is it important?

Race and ethnicity are strongly correlated with disparities in health, exposure to environmental pollution, and vulnerability to natural hazards.¹

Research consistently has found race-based environmental inequities, including the tendency for minority populations to live closer to noxious facilities and Superfund sites, and to be exposed to pollution at greater rates than whites.^{7, 1}

Many health outcomes are closely related to the local environment. Minority communities often have less access to parks and nutritious food, and are more likely to live in substandard housing.¹

Minorities tend to be particularly vulnerable to disasters and extreme heat events. This is due to language skills, housing patterns, quality of housing, community isolation, and cultural barriers.^{8, 4}

Blacks and Hispanics, two segments of the population that are currently experiencing poorer health outcomes, are an increasing percentage of the US population.^{1,9}

Research has identified measurable disparities in health outcomes between various minority and ethnic communities.

Across races, the rates of preventable hospitalizations are highest among black and Hispanic populations. Preventable hospital visits often reflect inadequate access to primary care. These types of hospital visits are also costly and inefficient for the health care system.⁵

Relative to other ethnicities and races, Hispanics and blacks are less likely to have health insurance, but rates of uninsured are dropping for both groups.¹⁰

Compared to other races, blacks have higher rates of infant mortality, homicide, heart disease, stroke, and heat-related deaths.⁵

Hispanics have higher rates of diabetes and asthma.⁵

American Indians have a distinct pattern of health effects different from blacks and Hispanics. Native populations are less likely to have electricity than the general population.² They have high rates of infant mortality, suicide and homicide, and nearly twice the rate of motor vehicle deaths than the U.S. average.⁵

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Neighborhoods at Risk

Selected Tracts

Language Proficiency

	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Population 5 years or older, 2020*	281	2,561	306,919,116
Speak English "not well"***	0	0	12,766,829
Speak English "not well"***, percent	0.0%	0.0%	4.2%
Speak English "not well"***, change in percentage points**, 2010*-2020*	na	-0.4	-0.6

**For example, if the value is 3% in 2010* and 4.5% in 2015*, the reported change in percentage points is 1.5.

*** Includes "not well" and "not well at all".

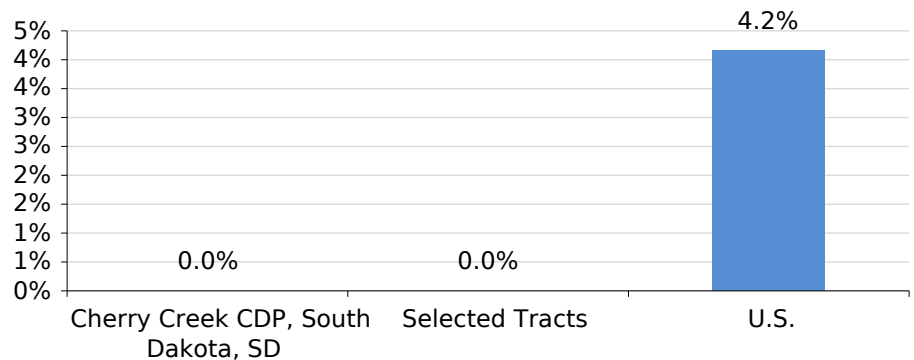
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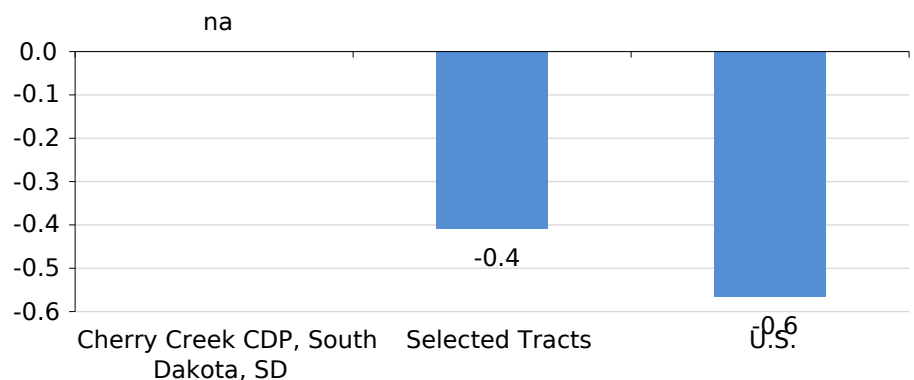
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People Who Speak English "Not Well", Percent of Total, 2020*

- The U.S. has the largest share of people who speak English "not well" (4.2%).



People Who Speak English "Not Well", Change in Percentage Points, 2010*-2020*



* ACS 5-year estimates used. 2020 represents average characteristics from 2016-2020; 2010 represents 2006-2010.

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Language Proficiency

What do we measure on this page?

This page reports the results of self-rated English-speaking ability questions in the American Community Survey.

Why is it important?

Many aspects of life in the US assume basic fluency in English. Thus, people with limited language skills are at risk for inadequate access to health care, social services, or emergency services.

A person's ability to take action during an emergency is compromised by language and cultural barriers.⁴

Poor English skills can make it harder to follow directions or interact with agencies.⁴

Lack of language skills can also instill lack of trust for government agencies.

In many industries, poor English skills can make it harder for people to get higher wage jobs.¹

Language barriers make it harder to obtain medical or social services; and make it more difficult to interact with caregivers.¹

Limited English skills may result in isolation from other segments of the US population, and social isolation is a health risk.¹ However some minority communities can be very tightly-knit and not isolated, so this risk factor cannot be generalized across all populations.

Neighborhoods at Risk

Selected Tracts

Young & Elderly Populations

	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Total Population, 2020*	288	2,767	326,569,308
Under 5 years old	7	206	19,650,192
65 years and older	3	279	52,362,817
80 years and older	0	30	6,621,816

Percent of Total, 2020*

Under 5 years old	2.4%	7.4%	6.0%
65 years and older	1.0%	10.1%	16.0%
80 years and older	0.0%	1.1%	2.0%

Change in Percentage Points, 2010*-2020*

For example, if the value is 3% in 2010* and 4.5% in 2020*, the reported change in percentage points is 1.5.

Under 5 years old	na	-4.2	-0.6
65 years and older	na	2.3	3.3
80 years and older	na	0.3	0.3

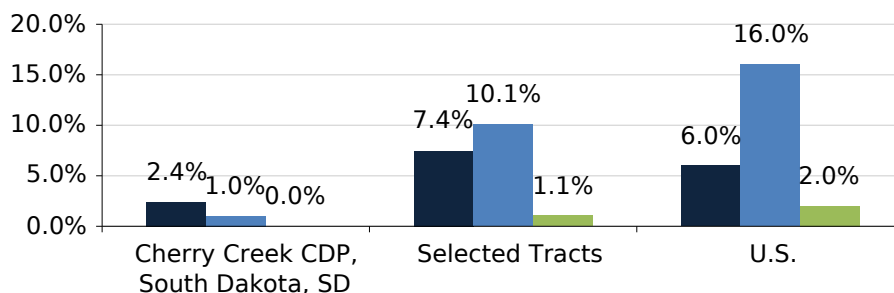
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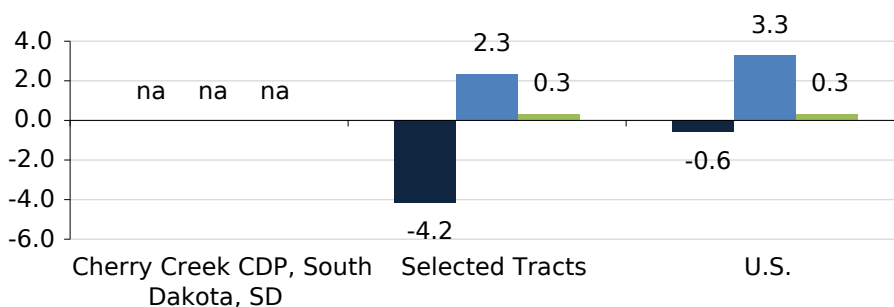
Population by Group, Percent of Total, 2020*

- Selected Tracts has the largest share of people under 5 years old (7.4%).
- The U.S. has the largest share of people 80 years and older (2.0%).



■ Under 5 years old ■ 65 years and older ■ 80 years and older

Population by Group, Change in Percentage Points, 2010*-2020*



■ Under 5 years old ■ 65 years and older ■ 80 years and older

* ACS 5-year estimates used. 2020 represents average characteristics from 2016-2020; 2010 represents 2006-2010.

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Neighborhoods at Risk

Selected Tracts

Young & Elderly Populations

What do we measure on this page?

This page describes the number of people by specific age category.

The "Under 5 years old" category includes individuals younger than 5 years old. The "65 years and older" category includes individuals age 65 and older and the "80 years and older" category includes individuals age 80 and older. The "80 years and older" category is a subset of the "65 years and older" category.

Why is it important?

Young children and older adults both are vulnerable segments of the population. Understanding the age profile of a community can help users determine the types of services likely to be needed.¹

Children's developing bodies makes them particularly sensitive to health problems and environmental stresses.¹

Childhood lays the foundations for lifelong health. Poor health during childhood increases the likelihood of problems throughout adulthood.²

Because so many factors of a child's life are determined during pregnancy, infancy, and early childhood, children in poverty are an especially vulnerable population. Lack of adequate care through the early phases of life is more prevalent in poor populations.²

Children spend more time outside and have a faster breathing rate than adults, so they are more at risk for respiratory problems related to ground level ozone, airborne particulates, wildfire smoke, and allergens. Allergens are associated with climate change due to changing plant communities and longer pollen seasons.^{3, 4}

Because their immune systems are not fully developed, children are more sensitive to infectious diseases. Natural disasters can breach public water supplies, compromise sanitation, and spread illness. Children are more vulnerable to these hazards compared to adults.³

Older adults also are at increased risk of compromised health related to environmental hazards and climate change.

Age is the single greatest risk factor related to illness or death from extreme heat.⁴

The elderly are more likely to have pre-existing medical conditions or compromised mobility, which reduces their ability to respond to natural disasters.³

The likelihood of chronic disease increases with age.^{1, 5}

Older adults are more susceptible to air pollution such as ground level ozone, particulate matter, or dust. Increased dust is associated with drought, wildfires, and high wind events.^{3, 6}

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Neighborhoods at Risk

Selected Tracts

Educational Attainment

	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Total Population 25 years or older, 2020*	124	1,640	222,836,834
No high school degree	17	203	25,562,680
No high school degree, percent	13.7%	12.4%	11.5%
No high school degree, change in percentage points**, 2010*-2020*	na	-10.7	-3.5

**For example, if the value is 3% in 2010* and 4.5% in 2020*, the reported change in percentage points is 1.5.

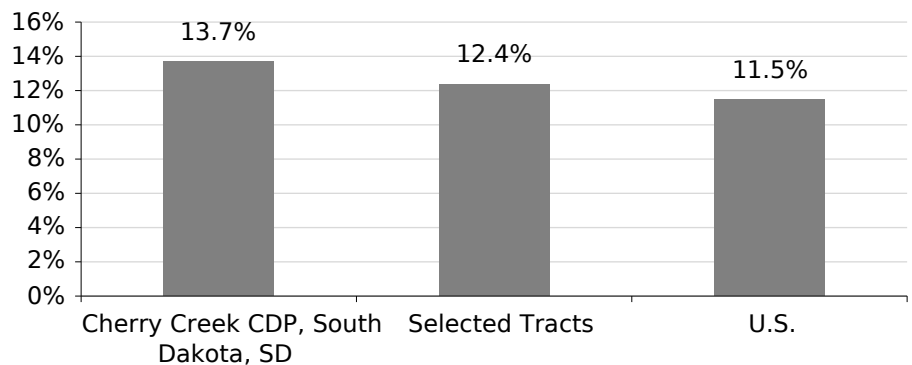
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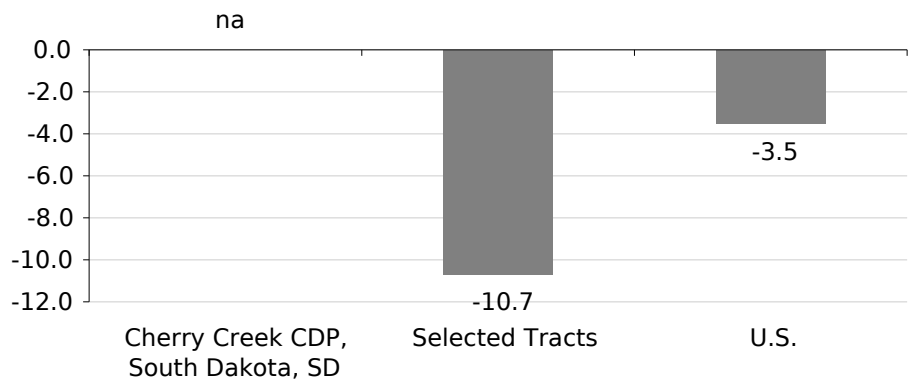
Low Reliability: Data with CVs > 40% are displayed in red to indicate that the estimate is considered very unreliable.

Population with Less than High School Education, Percent of Total, 2020*

- Cherry Creek CDP, South Dakota, SD has the largest share of people with less than a high school education (13.7%).



Population with Less than High School Education, Change in Percentage Points, 2010*-2020*



* ACS 5-year estimates used. 2020 represents average characteristics from 2016-2020; 2010 represents 2006-2010.

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Educational Attainment

What do we measure on this page?

This page describes levels of educational attainment, which refers to the highest degree or level of schooling completed by people 25 years and over.

Why is it important?

High school completion is used as a proxy for overall socioeconomic circumstances. Lack of education is strongly correlated with poverty and poor health.

People without a high school degree are more than twice as likely to live in inadequate housing compared to those with some college education.⁵

A study in California found the lack of a high school degree was the factor most closely related to social vulnerability to climate change.⁴

Thirty-eight percent of Americans without a high school degree do not have health insurance, compared to 10 percent with a college degree.⁷

The rate of diabetes is much greater for those without a high school degree. Incidence of this disease is more than double the rate of those who attended education beyond high school.⁵

Binge drinking is most severe among those without a high school degree. This demographic group had the highest risk of binge drinking across all measured categories (such as income, race, ethnicity, or disability status).⁵

Neighborhoods at Risk

Selected Tracts

Potentially Vulnerable Households

	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Total Occupied Households, 2020*	55	775	122,354,219
People > 65 years & living alone	0	20	4,651,248
Single female households	14	223	15,086,810
with children < 18 years	11	180	9,385,686
Households with no car	13	89	10,344,521

Percent of Total, 2020*

People > 65 years & living alone	0.0%	2.6%	3.8%
Single female households	25.5%	28.8%	12.3%
with children < 18 years	20.0%	23.2%	7.7%
Households with no car	23.6%	11.5%	8.5%

Change in Percentage Points, 2010*-2020*

For example, if the value is 3% in 2010* and 4.5% in 2020*, the reported change in percentage points is 1.5.

People > 65 years & living alone	na	0.2	-0.9
Single female households	na	1.5	-0.4
with children < 18 years	na	1.3	0.0
Households with no car	na	2.0	-90.9

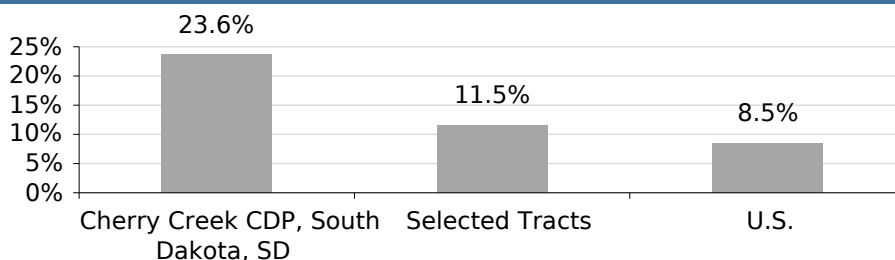
High Reliability: Data with coefficients of variation (CVs) < 12% are in black to indicate that the sampling error is relatively small.

Medium Reliability: Data with CVs between 12 & 40% are in orange to indicate that the values should be interpreted with caution.

Low Reliability: Data with CVs > 40% are displayed in red to indicate that the estimate is considered very unreliable.

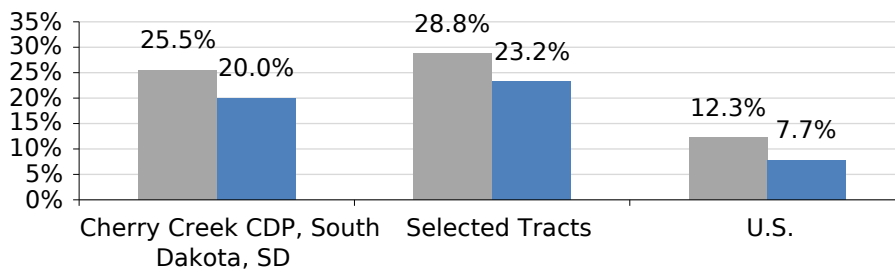
Households with No Car as a Percent of Total Households, 2020*

- The U.S. has the largest share of households with no car (3.8%).



Single Female Households as a Percent of Total Households, 2020*

- Selected Tracts has the largest share of single female households (28.8%).
- Selected Tracts has the largest share of single female households with children (23.2%).



■ Single female households ■ with children < 18 years

* ACS 5-year estimates used. 2020 represents average characteristics from 2016-2020; 2010 represents 2006-2010.

CITATION: U.S. Department of Commerce. 2022. Census Bureau, American Community Survey Office, Washington, D.C., reported by Headwaters Economics' Neighborhoods at Risk, headwaterseconomics.org/apps/neighborhoods-at-risk.

Neighborhoods at Risk

Selected Tracts

Potentially Vulnerable Households

What do we measure on this page?

This page describes household types that are associated with increased hardship, including the elderly living alone, single female households, single female households with children, and households without a car.

Why is it important?

Older adults are more likely to have compromised health and are less able to overcome disease. Living alone exacerbates health risks, and many health outcomes are worsened by social isolation.

Social isolation is strongly linked to poor health such as premature death, smaller chances of survival after a heart attack, depression, and greater levels of disability from chronic diseases.²

People 65 and older are particularly vulnerable to heat-related illness,⁴ which is exacerbated by social isolation.

Households headed by women face challenges related to income, education, and food security. These factors make it more difficult to respond to health, environmental, or climate risks.

Female-headed households are more likely to be living in poverty. This is most prevalent among black, Hispanic, and Native American households.¹⁶

In 2014, 35 percent of female-headed households were food insecure, compared to 14 percent of all households.¹⁷ Single mothers may be burdened by providing basic needs such as food and housing, which can make the urgency of other risks seem less important.¹⁸

Single-mother families are disproportionately exposed to hazardous levels of air pollution.⁴

Single mothers tend to be less educated and less affluent than the general population, which puts them at greater risk during natural disasters.¹⁸

Access to a car is linked with higher wages and more financial stability, and can help families relocate or evacuate in the event of emergencies.

People who own cars are more likely to be employed, work longer hours, and earn more than those who do not.¹⁹

Access to a car has measurable benefits for those receiving public assistance. Welfare recipients with access to a car were more likely to work more hours and get higher-paying jobs, and had a greater chance of leaving welfare.²⁰

During emergencies, natural disasters, and extreme weather events, people who do not have a car are less likely to evacuate or have access to emergency response centers.⁴

During heat waves, people without a car are less able to go to community cooling centers or cooler areas.⁴

Pedestrian fatalities are more than twice as likely in poor urban neighborhoods than in wealthier parts of cities.²¹

CHANGES IN BOUNDARIES: Data describing change over time can be misleading when geographic boundaries have changed. The Census provides documentation about changes in boundaries at this site: www.census.gov/geo/reference/boundary-changes.html

Neighborhoods at Risk

Selected Tracts

Potentially Vulnerable People

	Cherry Creek CDP, South Dakota, SD	Selected Tracts	U.S.
Total civilian noninstitutionalized population, 2020*	288	2,767	321,525,041
People w/ disabilities	31	289	40,786,461
People w/o health insurance	141	794	28,058,903

Percent of Total, 2020*

Percent of people w/ disabilities	10.8%	10.4%	12.7%
Percent of people w/o health insurance	49.0%	28.7%	8.7%

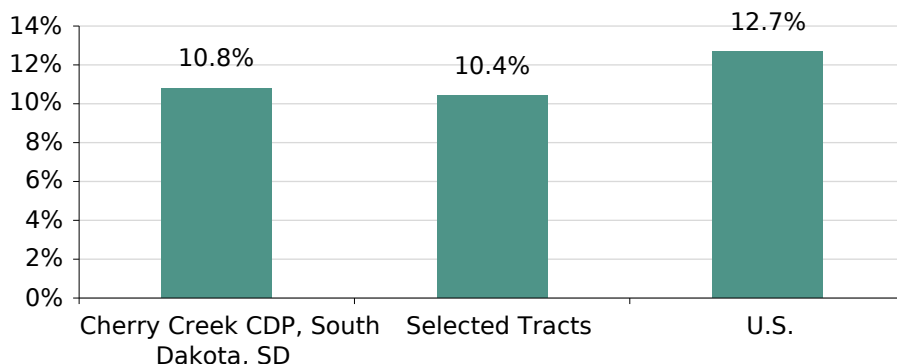
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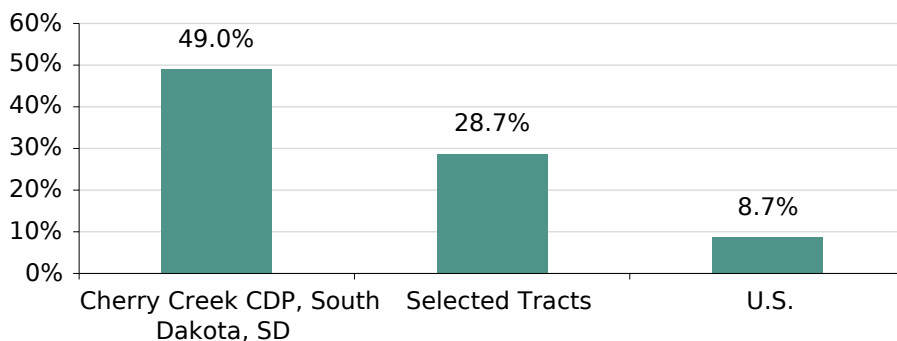
People with Disabilities, Percent of Total, 2020*

- The U.S. has the largest share of the noninstitutionalized population that is disabled (12.7%).



People without Health Insurance, Percent of Total, 2020*

- Cherry Creek CDP, South Dakota, SD has the largest share of the noninstitutionalized population without health insurance (49.0%).



* ACS 5-year estimates used. 2020 represents average characteristics from 2016-2020; 2010 represents 2006-2010.

CITATION: U.S. Department of Commerce. 2022. Census Bureau, American Community Survey Office, Washington, D.C., reported by Headwaters Economics' Neighborhoods at Risk, headwaterseconomics.org/apps/neighborhoods-at-risk.

Potentially Vulnerable People

What do we measure on this page?

This page describes groups of people that are associated with increased hardship, including people with disabilities and people without health insurance.

Why is it important?

Disabled people are subject to health complications that make environmental risks more consequential.

Disabled people are less likely to have health insurance, compared to the non-disabled population.⁵

Being confined to a bed raises heat mortality.²

Extreme weather events or natural disasters may result in limited access to medical care. This is particularly consequential for those who already have compromised health.³

People who lack health insurance are disadvantaged by several different mechanisms. They may avoid or delay diagnoses, treatment, and/or medication and thus may increase their odds of poor health. They do not have a regular place of care, and they are not benefitting from the standard of care that is afforded many Americans.

Households living in poverty are more likely to be uninsured. More than one quarter of uninsured households live in poverty.¹⁰

People with lower educational attainment are more likely to be uninsured.⁵

People without health insurance are less likely to have a regular source of care, and less likely to receive preventive, primary, and specialty care services.^{32,33} This risk is particularly evident among racial and ethnic minorities.⁵

People without health insurance are more likely to use the hospital emergency department for standard health care needs.⁵

About 25% of uninsured adults report having either delayed or gone without care in the past year because of costs.²³

Uninsured people are more likely to skip medications due to the costs, and some providers are less likely to prescribe medications to uninsured patients.²⁴

People who do not have health insurance suffer greater health consequences from air pollution compared to those with insurance.⁴

Neighborhoods at Risk

Selected Tracts

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