thrive
BARRON COUNTY
Growing Together in Health

2018/19

Barron County

Community Health Assessment

A Summary of Key Findings

Barron County Department of
Health & Human Services

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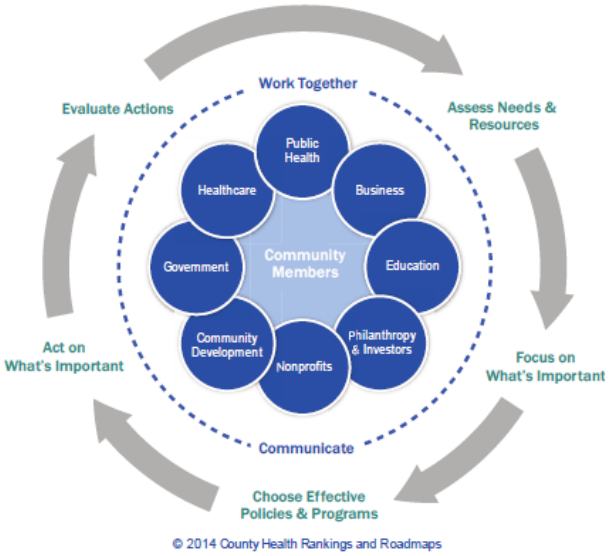
Assessment Partners

Summary

The 2018-2019 Barron County Community Health Assessment was conducted by the Thrive Barron County Steering Committee. Thrive Barron County is a collaborative group consisting of public health, local health care facilities, the Aging & Disability Resource Center and other public and private community groups. This committee works together to assess the health of Barron County Wisconsin and its residents. The steering committee has been meeting and working since December 2017 to gather data, obtain community input and prioritize health needs. The community health planning effort includes two major phases: a community health assessment (CHA) and a community health improvement plan (CHIP).



The *Wisconsin Guidebook on Improving the Health of Local Communities*, the Wisconsin State Health Plan, Healthiest Wisconsin 2020, and the County Health Rankings and Roadmaps were used to guide our assessment and improvement plan.

A variety of methods were used to gather quantitative and qualitative data to identify health priorities including a comprehensive secondary data collection, a community health survey, key informant interviews, focus groups, and community meetings held on September 26, 2018.

As a result of this process our community identified **substance use**, **mental health** and **chronic disease** as our top health priorities.

Barron County Health Priorities
Substance Abuse
Mental Health
Chronic Disease

Acknowledgements

The Thrive Steering Committee works together to share resources and improve the health of Barron County. Through working together we reduce the duplication of efforts and increase our capacity to respond to community needs. The steering committee met on a monthly basis from December 2017 until October 2018. The steering committee continues to meet quarterly to review data and our community health improvement plan progress. Members of the steering committee include:

Ashley Weinert	Barron County Department of Health & Human Services
Bethany Hilbert	University of Wisconsin-Eau Claire BSN Completion Student
Brianna Olson	Barron County Department of Health & Human Services
Bridget Klingelhoets	Cumberland Healthcare
Char Mlejnek	Marshfield Clinic Health System
Christa Cupp	Division of Public Health- Western Region Office
Christine Dunston	Wisconsin Indianhead Technical College Health Information Student
Deb Dietrich	Mayo Clinic Health System Northland
Emily Brunstad	Marshfield Clinic Health System
Jamie Wickstrom	Cumberland Healthcare
Dr. Jeanette Olsen	University of Wisconsin Eau Claire
Jeanine Schultz	Barron County Department of Health & Human Services
Jennifer Jako	Aging & Disability Resource Center of Barron, Rusk & Washburn Counties
Katherine Ellefson	Amery Hospital & Clinic
Kathy German-Olson	Barron County Department of Health & Human Services
Kelly Quick- Hanson	Cumberland Healthcare
Laura Sauve	Barron County Department of Health & Human Services
Lisa Laatsch	Marshfield Clinic Health System
Mary Beth Waldo	Cumberland Healthcare
Mike Farrell	Rice Lake Area Free Clinic
Nikki Liedl	Northlakes Community Clinic
Peter Potts-Shufelt	Mayo Clinic Health System Northland
Sabrina Meddaugh	Amery Hospital & Clinic
Sara Baars	Division of Public Health- Western Region Office
Stacey Frolik	Barron County Department of Health & Human Services
Sue Rouzer	Cumberland Healthcare
Tim Ringhand	Division of Public Health- Western Region Office

Community Health Assessment (CHA) Timeline

December 2017	Began meeting monthly to plan the Community Health Assessment (CHA) with the Thrive Steering Committee
January 2018	Began compiling secondary health data
April 2018	Distributed the Community Health Survey throughout the community (online and paper copies)
May 2018	Began compiling additional primary data through key informant interviews and focus groups
September 7, 2018	Thrive Steering Committee meeting to determine top health priorities
September 26, 2018	Hosted community meeting to obtain input on the top health priorities and discuss root causes
November 2018	Began Community Health Improvement Planning (CHIP) Meetings
January 2019	Began compiling information into the Barron County CHA and CHIP Documents
November 25, 2019	CHA was completed and approved by the Health & Human Services Board for distribution to the public.

Community Definition of Health

The 2018 Barron County Community Health Assessment Survey asked residents how they defined health. More than 800 people responded and below is a summary of themes found in the community's response to the question "How do you define health?"

Health is the physical, mental, emotional, and spiritual wellbeing of an individual. It is the absence of disease and pain.

One should exercise and have a balanced diet to remain in good health and to have the capabilities of being independent.

Preventative care is necessary to achieve an optimal health level.

The larger the word the more often it was used by survey respondents to define health.

Health Equity

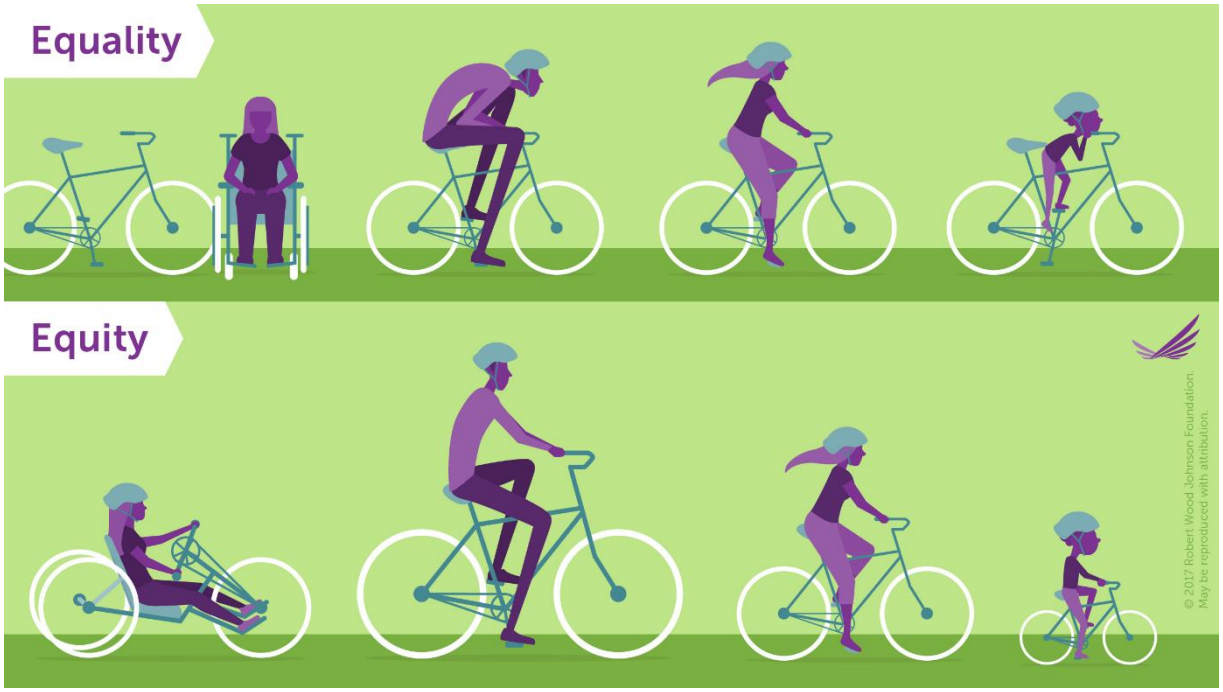


Photo courtesy of the Robert Wood Johnson Foundation

The Robert Wood Johnson Foundation (RWJF) provides the following definition: "Health equity means that everyone has a fair and just opportunity to be healthier. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care."

Understanding how health equity fits into the community definition of health and the community health assessment over all was very important to the Steering Committee. Finding ways to reach various populations in Barron County was a priority.

It is understood that while problems identified may be similar, there are different needs within the same health concern among diverse populations. Thrive Barron County strives to look for ways to adapt and modify approaches to ensure we are serving people in the way that works best for them.

Barron County Demographics

Population 45,164[1]
(Decreased 1.5% since 2010)

Population: Race & Hispanic Origin	Barron County[1]	Wisconsin[1]
White alone	95.5%	87.3%
Black or African American alone	1.4%	6.7%
American Indian and Alaska Native alone	1.0%	1.2%
Asian alone	0.7%	2.9%
Two or more races	1.3%	1.9%
Hispanic or Latino	2.6%	6.9%
White alone, not Hispanic or Latino	93.3%	81.3%

Non English Languages Spoken[2]
- Spanish: 1.62%
- African (Somali): 0.90%
- German (Amish): 0.78%

Median Household Income[1]

County $49,257

Wisconsin $59,759

Persons in Poverty[1]

County 13.1%

Wisconsin 11.3%

Below Poverty Level: Race & Hispanic Origin	Barron County Percent Below Poverty Level[3]	Wisconsin Percent Below Poverty Level[3]
White alone	11.4%	9.8%
Black or African American alone	4.3%	34.3%
American Indian and Alaska Native alone	44.4%	28.1%
Asian alone	8.0%	18.0%
Native Hawaiian and Other Pacific Islander alone	-	22.8%
Some other race alone	13.2%	26.9%
Two or more races	15.0%	23.5%
White, Hispanic or Latino origin (of any race)	13.3%	24.8%
White alone, not Hispanic or Latino	11.3%	9.2%

Our American Indian residents are living in poverty at disproportionate rates compared to other races. Lack of transportation and substance use were cited as contributing to this high poverty rate. Other non-white races are living in less poverty in Barron County than in WI as a whole.

Percentage of Barron County Population Receiving Income Maintenance Services in 2018 Compared to other Counties in the Great Rivers Income Maintenance Consortium

(Income Maintenance includes: Medical Assistance, Food Share, Child Care Assistance)
Source Barron County Economic Support Programs)

County	Percent Population	County	Percent Population
Barron County	22.52%	Eau Claire County	18.71%
Burnett County	24.03%	Pierce County	11.56%
Chippewa County	18.89%	Polk County	18.64%
Douglas County	19.53%	St. Croix County	11.37%
Dunn County	17.87%	Washburn County	24.69%

Barron County is the third highest county for percentage of residents receiving income maintenance in the region.

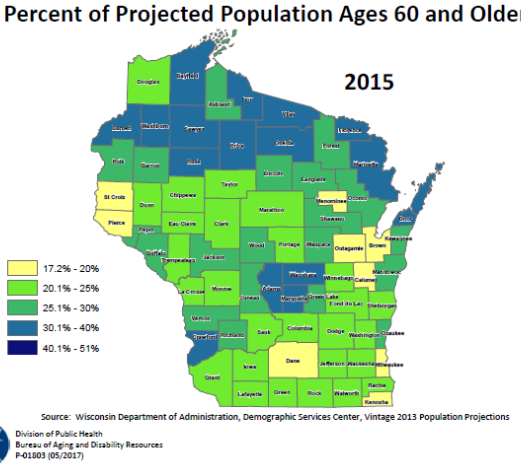
Age of Residents

Age[1]	Barron County	WI
Under 5 years	5.5%	5.8%
Under 18 years	21.7%	22.1%
65 years & over	21.4%	16.5%

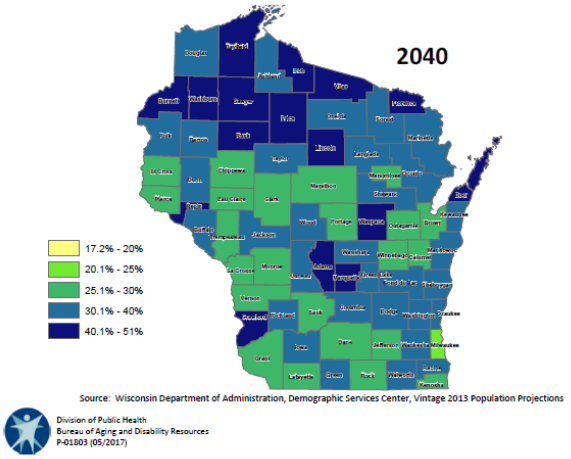
[1]Census Quick Facts, Barron County WI (2018)

Barron County's population continues to age. We need to consider the impact this will have on employment, housing, community services, healthcare, and our families.

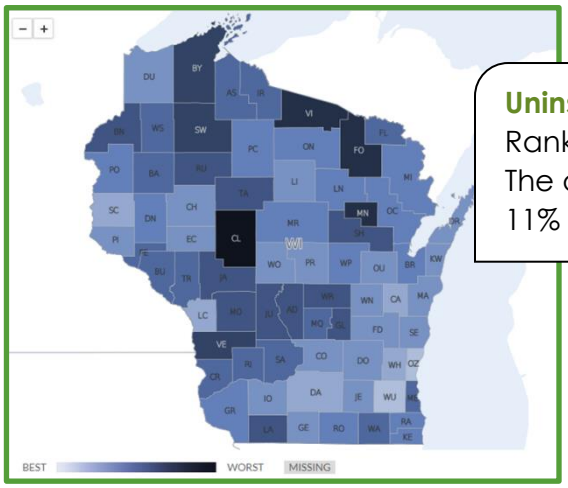
Percent of Projected Population Ages 60 and Older



Percent of Projected Population Ages 60 and Older



Health Care Capacity and Distribution



Uninsured: According to the 2019 County Health Roadmaps and Rankings 7% of Barron County's population under 65 is uninsured. The overall rate in Wisconsin is 6%. This rate has decreased from 11% in 2015 & 16 and stayed at 7% from 2017-2019.

Primary Medical Care:
Five medical systems serve Barron County residents through ten clinics and three hospitals.

Amery Hospital & Clinic
HealthPartners®

Clinic-Turtle Lake

CUMBERLAND HEALTHCARE

Hospital-Cumberland
Clinics –Cumberland, Turtle Lake

MAYO CLINIC HEALTH SYSTEM

Hospital- Barron,
Clinics- Barron, Rice Lake, Chetek

PREVEA health

Clinic-Rice Lake

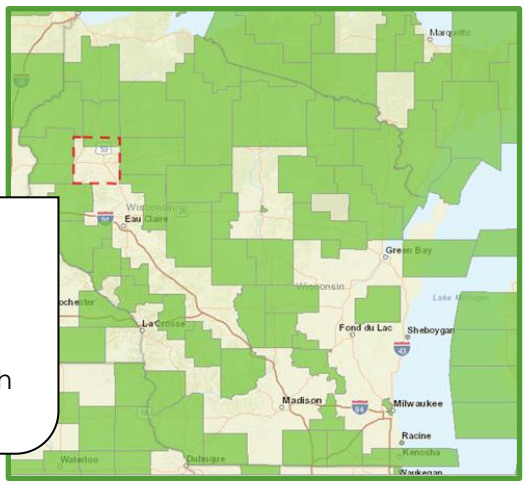
Marshfield Medical Center Rice Lake

Hospital- Rice Lake
Clinics- Rice Lake, Cumberland, Chetek
Family Health Center Dental Center- Rice Lake
(*Federally Qualified Healthcare Center*)

No Cost Healthcare:

Rice Lake Area Free Clinic

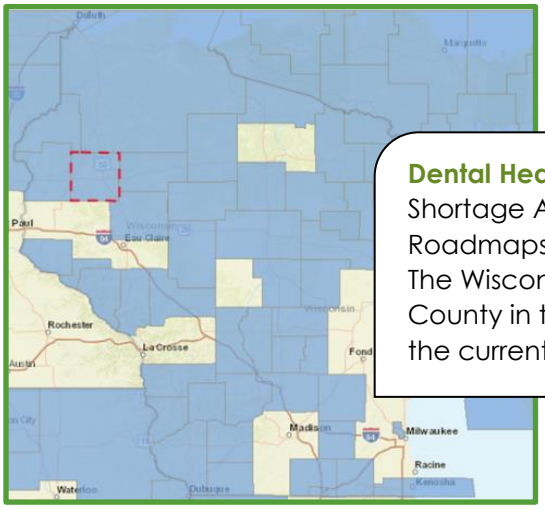
Open Tuesday nights, staffed by volunteers.
Provides free primary medical care, diabetic clinic and new in 2019 mental health counseling services.



Primary Care: The most northern part of Barron County is primary care provider health care shortage area[4]. According to the County Roadmaps and Rankings Barron County has ratio of population to primary care providers of 950:1 compared to 1215:1 in Wisconsin. This rate has been fairly stable in Barron County over the past five years with a low in 2016 of 930:1 and a high in 2017 of 1010:1.

Dental Health

Two dental clinics in Barron County currently accept medical assistance and provide care on a sliding fee scale: Northlakes Community Clinic (FQHC) in Turtle Lake and Marshfield Clinic Health System in Rice Lake.
Barron County has an additional 10 dental clinics, an oral surgery clinic and two orthodontic clinics.

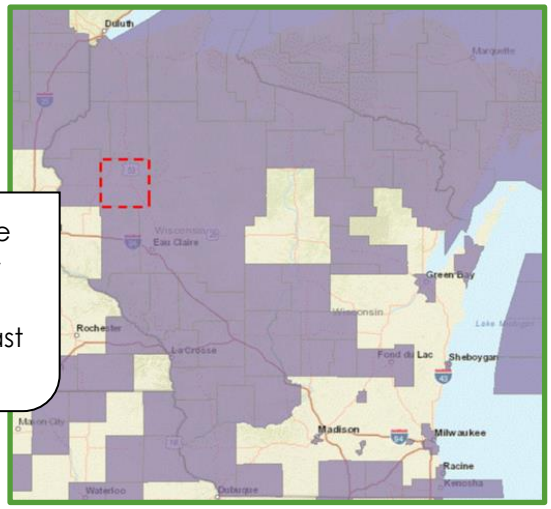


Dental Health: Barron County is a Dental Care Health Professional Shortage Area[4]. According to the 2019 County Health Rankings & Roadmaps Barron County has ratio of population to dentists of 1560:1. The Wisconsin average is 1470:1. This ratio has improved slightly in Barron County in the last five years decreasing from a high of 1680:1 in 2016 to the current 1560:1.

Mental Health

Barron County Public Health keeps a mental health resource list which currently has 14 private Barron County behavioral health counseling services listed. There are an additional 20 sites within 1 ½ hour drive. Cumberland Healthcare, Mayo Clinic Health System, Marshfield Clinic Health System and Prevea Rice Lake Health Center all offer behavioral health services.

Low cost options include:
Northlakes Community Clinic, a FQHC, provides mental health services on a sliding fee scale.
Rice Lake Area Free Clinic provides free counseling services one night a month.
Barron County Behavioral Health Programs ensures access for qualified persons to DHS 75, DHS, 34, DHS 36, and DHS 63 programs. The services provided adhere to the statutorily mandated behavioral health services that are outlined in the administrative codes and provide behavioral health and substance use services to populations who cannot otherwise afford services.



Mental Health: Barron County is a Mental Health Professional Shortage Area[4]. According to the 2019 County Health Rankings Barron County has a ratio of population to mental health providers of 1,370:1. The Wisconsin average is 530:1. This ratio has been improving over the past five years with a high in 2015 of 1631:1 and the low in 2019.

Healthcare Barriers and Gaps

The community shared its views on healthcare barriers and gaps through surveys, focus groups and interviews. Healthcare partners (Rice Lake Area Free Clinic, Northlakes Community Clinic, Cumberland Healthcare, Marshfield Clinic Health System, Mayo Clinic Health System, Public Health) contributed to this data. Analysis showed the top:

Barriers:

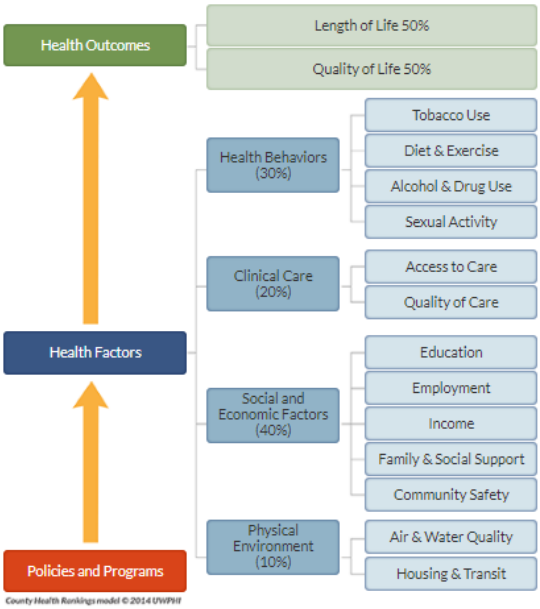
- Poverty: issues which force residents to make choices between basic living costs and healthcare
  - affordable housing
  - education
  - low wage jobs
- Affordability:
  - high insurance costs/ high deductible
  - cost of healthcare overall
  - cost of medications
- Communication:
  - language barriers (Spanish and Somali are primary languages needing interpreters)
  - literacy levels
  - the inability to understand how insurance works
  - being unsure where to start in the process
  - mental health stigma prevents the seeking of services
- Transportation:
  - no public transportation
  - living in a rural community

Gaps:

- Rural Community:
  - difficulty recruiting providers and/or their spouses to our rural community
  - migration of young, college educated professionals out of Barron County
- Reimbursement Rates:
  - inpatient and emergency mental health reimbursement rates are unable to sustain programs
  - no inpatient mental health or crisis stabilization beds in Barron County
  - low dental medical assistance reimbursement rates
- Access:
  - lack of psychiatry
  - lack of mental health for children
  - lack of local inpatient and emergency mental health services
  - lack of local inpatient substance abuse treatment
  - lack of dental providers
  - lack of dental providers who accept medical assistance

County Health Rankings & Roadmaps

The County Health Rankings compare all Wisconsin Counties using the same health factors and outcomes shown in this diagram. The information found in the County Health Rankings helped inform Barron County's Health assessment. More details on the Barron County Health Rankings may be found at:
https://www.countyhealthrankings.org/app/wisconsin/2019/overview



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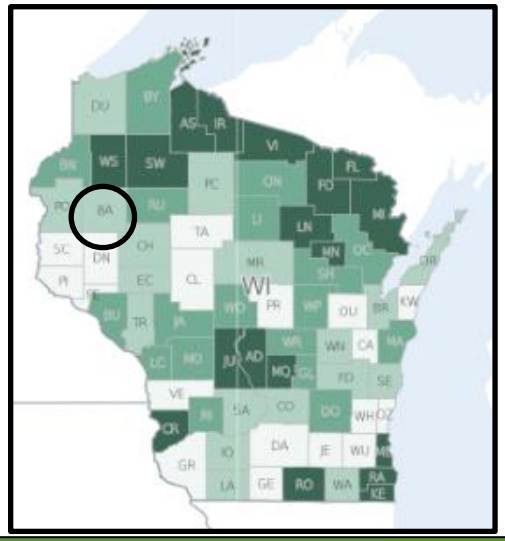
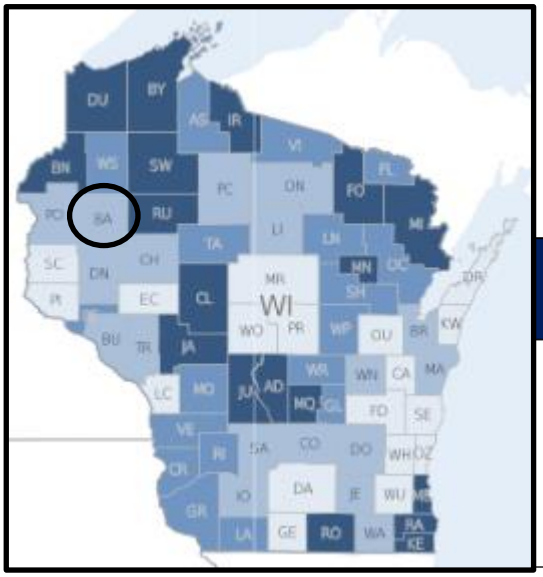


2019 County Health Rankings: Health Outcomes Map (above)

Barron County ranked 21th out of 72 counties in health outcomes. Health outcomes include length of life (50%) and quality of life (50%).

RANK 1 - 18 19 - 36 37 - 54 55 - 72 NOT RANKED (NR)



2019 County Health Rankings: Health Factors Map (left)

Barron County ranked 24th out of 72 counties in health factors. Health factors include physical environment (10%), social & economic factors (40%), clinical care (20%), and health behaviors (30%).

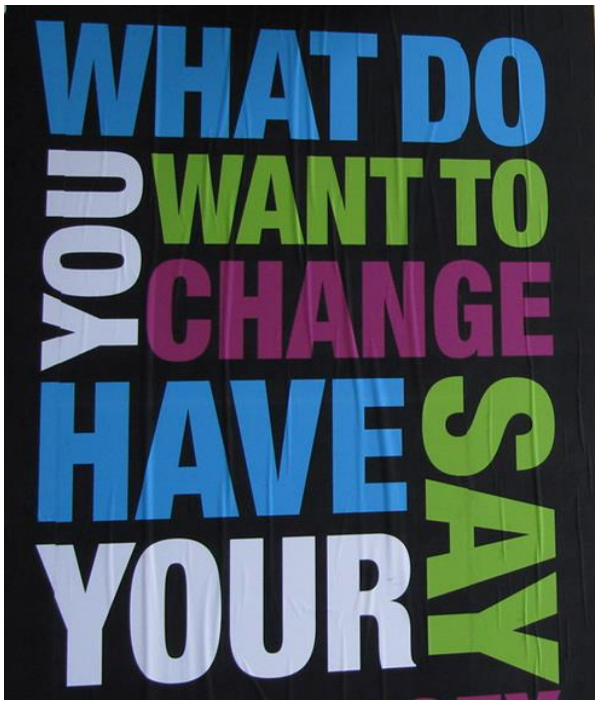
County Health Rankings & Roadmaps

Below is a five year look at Barron County's Health Rankings. All Counties in Wisconsin are ranked from 1 (best) to 72 (worst). Barron County's health factors, which are the conditions that typically impact our quality and length of life, have steadily improved over the last five years.

Year	Health Outcomes (length of life & quality of life)	Health Factors (health behaviors, clinical care, social & economic factors, and physical environment)
2019	**21**	**24**
2018	**18**	**37**
2017	**29**	**40**
2016	**30**	**46**
2015	**24**	**54**

Core Data

Barron County looked at data from multiple sources as it prioritized health concerns. As part of the Wisconsin Community health Improvement Plans and Processes (CHIPP) Infrastructure Improvement Project, a recommended core data set for initial assessment was created. Barron County used the "Introduction to the Recommended Core Data Set for Initial Assessment and Prioritization: Indicators for Assessing Local Health Needs, V2:0: February 2015" document to develop its core data set. The core data set compares Barron County demographics, access to care, social determinants of health, and death and illness rates to state rates. The full core data set is located in Appendix 1 of this document.

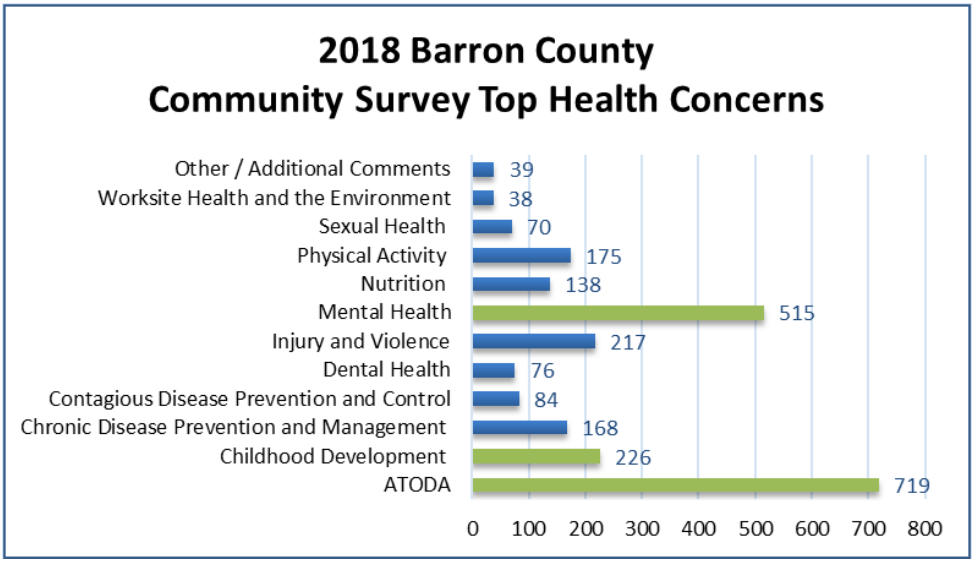


Community Voices

Efforts were made to collect input from a wide variety of community members through a community survey, focus groups, key informant interviews, and community meetings. Special emphasis was placed on individuals who were identified by the steering committee as medically underserved. These determinations were made by looking at populations using free or low cost safety net programs provided by the Rice Lake Area Free Clinic, Public Health, Aging & Disability Resource Center, Hospital Community Assistance Programs, Northlakes Community Clinic (Federally Qualified Healthcare Center), and Human Services. Community members identified with barriers to health care services are: homebound, community members in jail, those without health insurance, English language learners, Native Americans, and Amish residents

Community Survey

The Thrive Barron County Steering Committee developed and distributed electronic and paper surveys throughout the community to gather primary data and the community's perception of health needs. A total of 838 Barron County residents completed the survey. A copy of the survey can be found in Appendix 2. The top health concerns identified by the 2018 Community Survey participants:



Special efforts were made to survey food pantry participants, senior meal sites, Meals on Wheels participants, Drug Court participants, jail inmates, Rice Lake Area Free Clinic participants, and English language learners in our community. For our English language learners, the survey was translated to Spanish and Somali. Interpreters were paid to distribute and, when necessary, administer the surveys to these populations. Based on the demographic who completed the survey: (73% female, 61% college educated, 91% white) it was realized several of the groups identified as potentially being underserved were not represented. These groups were selected for additional focus group participation and key informant interviews.

Focus Groups and Key Informant Interview Data

Focus groups were held with: Drug Court Participants, Senior Center Participants, Rice Lake Area Free Clinic Participants, Somali Community Representatives. Key Informant Interviews were held with leaders from the following demographic groups: Amish, Hispanic, Philippine, Somali, St. Croix Tribe. Key Informant interviews were also held with Barron County's Economic Development Director, Barron County's Behavioral Health Manager, and Lakeview Medical Center's Emergency Room Manager.

Concerns brought forth by these focus groups and key informant interviews included:

- methamphetamine use (trauma, adverse childhood events, generational family use)
- alcohol use (acceptability of use, binge drinking)
- mental health (stigma, lack of local psychiatry providers, lack of crisis centers)
- chronic disease (diabetes, heart disease, COPD)
- obesity (healthy eating, exercise)
- family violence

- lack of health insurance
- kids raising themselves while parents work long hours
- language barriers
- racism

Specific needs identified included:

- transportation
- living wages
- local treatment centers, transitional housing, community support and treatment prior to having legal charges for those with addiction
- health education (*provided by trusted community members*)
- daycare especially for those who do not speak English
- space for women to exercise separate from men (Somali)

Prioritization of Health Issues by the Steering Committee

The Thrive Steering Committee used the following questions and data contained in this document to analyze and identify the community's top health needs.

Comparison to State and National Goals	How is Barron County doing in comparison to the State and National goals? (Core Data Set)
Community Impact	How is Barron County currently and in the future going to be affected by the health priority in terms of: • Number of people affected • Costs associated in not doing something (health care, lost work, supportive living) • Severity of the condition (chronic illness, disability, death) • Impact on quality of life
Ability to Impact	Are there known strategies to make a difference? Are there adequate resources available in the county to address the health priority? Are there adequate internal resources available to address the health priority?
Community Readiness	Is the community of Barron County ready to address the health priority in terms of: • Stakeholders awareness of concern • Community organizations receptiveness to addressing the health priority • Citizens being open to hearing more about the health priority
Gaps in Community	Are there gaps in Barron County efforts to address the health priority?
Voice of Local Customer	Did focus groups/key informant interviews identify this as an issue? Did survey data identify this as an issue?

Analysis of Data and Priorities

Top Identified Health Priorities Identified by Various Data Collection Methods	
Core Data Interpretation	1. Chronic Disease 2. Alcohol, Tobacco, and Other Drug Abuse (ATODA) 3. Mental Health
Survey (Electronic and Paper)	1. ATODA 2. Mental Health 3. Childhood Development
Community Conversations	1. ATODA 2. Mental Health 3. Chronic Disease

The Thrive Steering Committee reviewed the data, based on the core data information and community input, and prioritized 1) Substance Abuse (Alcohol, Tobacco, and Other Drug Use/Abuse), 2) Mental Health, and 3) Chronic Disease as our top health priorities. The committee also listened to the community who stated childhood development was important to address. The committee is requesting methods to address childhood development's impact be incorporated into the improvement plans for all three priorities.

Community Meetings

On 9/16/18 two community meetings were held; one meeting was held from 9:00am to noon and one was held from 5:30 to 8:30 pm. Data on all 12 health priorities and information on health disparities were shared. Additional information was given on the importance of social determinants of health and health equity. Participants were then asked to discuss the following for our top three health priorities:

- Root causes including considerations of data, who is most affected, health disparities, and social determinants of health.
- Community groups, individuals, and institutions currently working to address the health priority.
- Other community resources needed to address the health priority.

The small groups came up with the following information:

Alcohol, Tobacco and Other Drug Abuse Community Discussion Results

Root Causes:

- Socio Economic Related: low incomes, lower levels of education, generational substance use among families
- Mental Health Related: high Adverse Childhood Events (ACE's) levels, mental health overall
- Access Related: high alcohol outlet density, social activities revolve around alcohol use, culture of alcohol use, methamphetamine is readily available

Community Assets/Resources:

- Community Connections to Prosperity
- Drug Free Communities Efforts/Barron County Community Coalition
- Drug and Alcohol Court
- Brighter Futures Initiatives
- Faith Based Organizations- specifically Red Cedar Church
- Lutheran Social Services- Women's Way Program
- The GAP sober living
- Tribal Health Providers and Treatment Access
- Colleges and UW Extension Programs
- Private Providers
- Integrated Behavioral Health Providers
- Community Education Efforts- Methamphetamine Town Hall Meetings
- Barron County Sheriff

Who do we need to recruit to help?

- Groups to increase wages and education: employers, schools- K-12 and post-secondary education
- Alcohol/tobacco retailers
- Primary care health providers
- Civic groups
- Persons in recovery
- Diverse representatives: Hispanic, Somali, Native American representatives

Mental Health

Root Causes:

- Socioeconomic related: Adverse Childhood Events (ACEs), poverty, loss/trauma, cultural beliefs around mental health, LGBTQ more at risk
- Genetic disposition
- Substance use/ dual diagnosis
- Lack of access to services: affordability, distance, cost of medication, provider shortage
- Stigma

Community Assets/Resources:

- Schools providing space for counselors in schools; demand is greater than services provided
- Healthcare systems are working to recruit providers, bringing providers from larger cities, teledoc, policy changes to support primary care providers and allow continuation of certain medications until patients are able to access a psychiatrist
- Northlakes Community Clinic provides behavioral health on a sliding fee scale
- Rice Lake Area Free Clinic has a counselor one evening a month
- Mayo Clinics added a psychiatrist residents program in the area
- Department of Health & Human Services provides Coordinated Care Services, Community Support Program, trauma focused cognitive behavioral therapy in homes for children and families
- National Alliance of Mental Illness local chapter provides peer support, family to family support, education programs to community and schools

- Community Connections to Prosperity Coalition is working on poverty, mental health initiatives such as Question, Persuade, Refer (QPR) and Youth Mental Health First Aide

Who do we need to recruit to help?

- Variety of people in the community/everyone
- Faith communities/ churches
- Civic groups

Chronic Disease

Root Causes:

- Personal behaviors: alcohol, smoking, nutrition, lack of exercise
- Education related: Basic health literacy is lacking, Generational cycle of learned behavior
- Access: physical activity (cost, infrastructure, seasonal weather), healthy foods (cost, ability to cook/prepare), Lack of medical home, preventative medical care
- Poverty: not having enough money to pay for basics, healthcare, medications, gym membership, transportation, etc.
- Policy issues that affect access: bike routes, sidewalks, physical education cuts in schools, etc.
- Societal Issues: Obsession with phones, people are less active and less involved, increase in portion sizes
- Mental health related: stress, mental health in general, lack of motivation, social isolation, denial/fear

Community Assets/Resources:

- City of Rice Lake policies are making city more walkable/bikeable
- Nationally Recognized Diabetes Prevention Programs at Marshfield and Cumberland Healthcare
- Rice Lake Area Free Clinic
- UW Extension: Foodwise in schools, working with food pantries
- Aging and Disability Resource Center- health promotion programs, meals on wheels
- Know Your Numbers- free annual screening events
- Motivational interviewing
- Access to recipes at grocery stores, food health ranking system (Marketplace Foods)
- Clinics are using marketing initiatives to get people in for preventative care
- Access to outdoors: lakes, trails, parks, rural community so safer to bike/walk in the country

Who do we need to recruit to help?

- Variety of people from our community: different ages, different cultures, parents/caretakers, people living with chronic disease, civic groups
- Providers: physicians, nurse practitioners, physician assistants, nurses, medical assistants
- Youth serving organizations: schools, daycares, youth groups
- Employers: flexible scheduling, promote walk breaks, educations, pay rates, insurance costs
- Churches/Parish Nurses
- Restaurants
- Media
- Health insurance companies

Citations

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Appendix 1

Core Data Table

Category	Title	Measure	Targets & Top Performers *	Barron County	WI	Year(s) Data Used	Source*
Demographics	**Below 18 Years**	% of population below 18 years of age		21.70%	22.40%	2017	CHR – Additional Measures
Demographics	**65 and Older**	% of population aged 65 years and older		20.50%	15.60%	2017	CHR – Additional Measures
Demographics	**Race/ Ethnicity**	% of population that is African American, Asian, American Indian or Alaskan Native, or Hispanic		5.40%	16.90%	2017	CHR – Additional Measures
Demographics	**Not Proficient in English**	% of population that is not proficient in English		1%	2%	2017	CHR – Additional Measures
Demographics	**Rural**	% of population living in a rural area		65.90%	29.80%	2017	CHR – Additional Measures
Demographics	**Population Estimates**	Population numbers by age group and gender	See table at the bottom of the worksheet			2014	DHS
Demographics	**Population Change**	% of change in population 2010 - 2014		0%	1%		DHS
Mortality	**Premature Death**	years of potential life lost before age 75 per 100,000 population (age-adjusted)	5,200 per 100,000 (Top Performer)	5,800 per 100,000	6,000 per 100,000	2017	CHR – Ranked Measures ("County Snapshot")
Mortality	**Infant Mortality**	Rate per 1,000 live births	6 per 1000 (HP2020)	6.1 per 1000	6.2 per 1000	2016	DHS WISH system
Measures of Overall Health	**Poor or Fair Health**	% of adults self-reporting poor or fair health (age-adjusted)	10% (Top Performer)	13%	14%	2017	CHR – Ranked Measures ("County Snapshot")
Measures of Overall Health	**Poor Physical Health Days**	Average number of physically unhealthy days self-reported in adults in past 30 days (age-adjusted)	2.5 (Top Performer)	3.4	3.4	2017	CHR – Ranked Measures ("County Snapshot")
Measures of Overall Health	**Low Birth Weight**	% of birth weights <2,500 grams	6% (Top Performer)	6%	7%	2017	CHR – Ranked Measures ("County Snapshot")
Chronic Disease	**Diabetes**	% of adults age 20 and above with diagnosed diabetes	6% (Top Performer)	9%	9%	2017	CHR – Additional Measures
Chronic Disease	**Cancer**	Incidence per 100,000 population by cancer site (age-adjusted)		427.2 per 100,000	469.3 per 100,000	2010-2014	DHS WISH system

Category	Title	Measure	Targets & Top Performers *	Barron County	WI	Year(s) Data Used	
Chronic Disease	**Coronary Heart Disease Hospitalizations**	Coronary heart disease hospitalization rate per 1,000 population		2.1 per 1,000	2.8 per 1,000	2016	DHS Public health profiles
Chronic Disease	**Cerebrovascular Disease Hospitalizations**	Cerebrovascular disease hospitalization rate per 1,000 population		2.4 per 1,000	2.5 per 1,000	2016	DHS Public health profiles
Chronic Disease	**Youth Asthma**	% ever told by a doctor or nurse they had asthma and still have asthma		Unable to obtain			YRBS
Oral Health	**Fluoride in Public Water Supply**	% of public water supplies with fluoride content at 0.7 PPM or greater		Only City of Rice Lake			DHS WI Public Water Supply Fluoridation Census
Oral Health	**Oral Health of 3rd Grade Children**	% of untreated decay	20% (HP2010 target)	20.70%		2008	DPH, Make Your Smile Count survey
Communicable Disease	**Influenza Immunization 65+**	% of population age 18 and older that had flu vaccination in last 12 months	70% HP 2020 target	47%		2015-16	DHS WISH system
Communicable Disease	**Childhood Immunizations**	% of children aged 19 to 35 months who received the recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella, and PCV	80% (HP2020 target)	70%	73%		DHS WI Immunization Registry (WIR)
Communicable Disease	**Communicable Disease**	Rate per 100,000 population of top reportable communicable diseases		919.6 per 100,000	839 per 100,000	2017	DHS Analysis, Visualization, and Reporting (AVR)
Mental Health	**Poor Mental Health Days**	Average number of mentally unhealthy days reported in past 30 days (age-adjusted)	2.4 (Top Performer)	3.5	3.5	2017	CHR – Ranked Measures ("County Snapshot")
Mental Health	**Intentional Injury Hospitalizations**	Self-inflicted hospitalization rate per 100,000 population		81 per 100,000	99 per 100,00	2017	DHS WISH system
Mental Health	**Youth Suicide**	% who seriously considered attempting suicide during the 12 months before the survey		14.90%	13.20%	2016	YRBS
Injury and Violence	**Youth Injury**	% who rarely or never wore a seat belt when riding in a car driven by someone else		2.70%	8.30%	2016 Barron 2013 State	YRBS
Injury and Violence	**Falls Fatalities 65+**	Injury deaths due to falls for age 65 and older (per 100,000 population)		119.6 per 100,000	146.7 per 100,000	2016	DHS WISH system

Category	Title	Measure	Targets & Top Performers *	Barron County	WI	Year(s) Data Used	
Alcohol & Other Drugs	**Excessive Drinking**	% of the adult population that reports either binge drinking, defined as consuming more than 4 (women) or 5 (men) alcoholic beverages on a single occasion in the past 30 days, or heavy drinking, defined as drinking more than 1 (women) or 2 (men) drinks per day on average	10% (Top Performer)	23%	24%	2017	CHR-Ranked Measures
Alcohol & Other Drugs	**Alcohol impaired driving deaths**	Proportion of driving deaths with alcohol involvement	14% (Top Performer)	10%	37%	2017	CHR – Ranked Measures ("County Snapshot")
Alcohol & Other Drugs	**Drug Arrests**	Number of arrests for drug possession		13.00%	7.30%	2012	CHR – Ranked Measures ("County Snapshot")
Alcohol & Other Drugs	**Alcohol-related hospitalizations**	Rate of alcohol-related hospitalizations per 1,000 population		2.0 per 1,000	1.8 per 1,000	2016	Office of Justice Assistance
Alcohol & Other Drugs	**Youth Drug and Alcohol Use**	% of students who had at least one drink of alcohol on one or more of the past 30 days		19.20%	19.30%	2016	DHS Public health profiles
Alcohol & Other Drugs	**Youth Drug and Alcohol Use**	% of students who had their first drink of alcohol other than a few sips before age 13		16%	14.60%	2016	YRBS
Physical Activity and Nutrition	**Adult Obesity**	% adults (age 20 +)with BMI > 30	25% (Top Performer)	32%	30%	2017	YRBS
Physical Activity and Nutrition	**Physical Activity / Inactivity**	Estimated percent of adults aged 20 and over reporting no leisure time physical activity	21% (Top Performer)	25%	20%	2017	CHR – Ranked Measures ("County Snapshot")
Physical Activity and Nutrition	**Access to exercise opportunities**	Percentage of individuals in a county who live reasonably close to a location for physical activity (e.g., parks and recreational facilities)	85% (Top Performer)	58%	81%	2017	CHR – Ranked Measures ("County Snapshot")
Physical Activity and Nutrition	**Youth Dietary Behavior**	Percentage of students who ate fruits less than five times per day		92.70%		2016	CHR -- Ranked Measures

Category	Title	Measure	Targets & Top Performers *	Barron County	WI	Year(s) Data Used	
Physical Activity and Nutrition	**Youth Dietary Behavior**	Percentage of students who ate vegetables less than five times per day		93.90%		2016	YRBS
Physical Activity and Nutrition	**Youth Dietary Behavior/ Overweight**	Percentage of students overweight		31.80%	13%	2016	YRBS
Physical Activity and Nutrition	**Youth Physical Activity**	Percentage of students physically active at least 60 minutes per day on less than 5 days		39.50%	50.50%	2016	YRBS
Physical Activity and Nutrition	**Breast-feeding**	% of infants receiving WiC breastfed exclusively through three months	46% (HP2020 target)	30%	27%	2017	DHS Pediatric Nutrition Surveillance System (WIC)
Tobacco	**Adult Smoking**	% adults self-reporting smoking > 100 cigarettes in their lifetime and currently smoking (every day or most days)	14% (Top Performer)	18%	17%	2017	CHR – Ranked Measures ("County Snapshot")
Tobacco	**Adult Smokeless Tobacco Use**	% of persons aged ≥18 years who reported currently using chewing tobacco, snuff, or snus (a small pouch of smokeless tobacco) every day or some days		N/A	3.70%	2009	BRFSS
Tobacco	**Smoking During Pregnancy**	% of mothers who report smoking during pregnancy		20%	13%	2017	CHR – Additional Measures
Tobacco	**Tobacco Sales to Minors**	% of illegal tobacco sales to minors		4.10%		2017	DHS, Wisconsin WINS
Tobacco	**Youth Tobacco Use**	% of students who smoked cigarettes on one or more of the past 30 days	16% (HP2020)	5.40%	11.80%	2016	YRBS
Tobacco	**Youth Tobacco Use**	% of students who used chewing tobacco, snuff, or dip on one or more of the past 30 days		5.60%	8.00%	2016	YRBS
Reproductive and Sexual Health	**Sexually Transmitted Infections**	Chlamydia cases per 100,000 population	123 cases per 100,000 (Top Performer)	289 per 100,000	403 per 100,000	2017	CHR – Ranked Measures ("County Snapshot")
Reproductive and Sexual Health	**Teen Birth Rate**	Birth rate per 1,000 females age 15-19	20 (Top Performer)	26 per 1,000	24 per 1,000	2017	CHR – Ranked Measures ("County Snapshot")

Category	Title	Measure	Targets & Top Performers *	Barron County	WI	Year(s) Data Used	
Reproductive and Sexual Health	**Prenatal Care**	Adequacy of prenatal care per Kessner or Kotelchuck indices		100%	100%	2016	DHS WISH system
Reproductive and Sexual Health	**Preterm births**	% of births < 37 weeks gestation		9.70%	9.60%	2016	DHS WISH system
Reproductive and Sexual Health	**Youth Sexual Behavior**	% of students who have ever had sexual intercourse		23.10%	35.30%	2016	YRBS
Reproductive and Sexual Health	**Youth Sexual Behavior**	Among students who had sexual intercourse during the past three months, the percentage who did not use a condom during last sexual intercourse		33.10%	37.50%	2016	YRBS
Access to Care	**Preventable Hospital Stays**	Hospitalization rate for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	46 per 1000 (Top Performer)	46 per 1,000	45 per 1,000	2017	CHR – Ranked Measures ("County Snapshot")
Access to Care	**Uninsured under Age 65**	% population under age 65 that has no health insurance coverage		10%	9%	2017	CHR – Ranked Measures ("County Snapshot")
Access to Care	**Primary care physicians**	Ratio of population to primary care physicians	1051:1 (Top Performer)	1010 to 1	1240 to 1	2017	CHR – Ranked Measures ("County Snapshot")
Access to Care	**Mental health providers**	Ratio of population to mental health providers	536:1 (Top Performer)	1470 to 1	600 to 1	2017	CHR – Ranked Measures ("County Snapshot")
Access to Care	**Dental Utilization**	% of Medicaid members receiving a dental service		30.02%	23.43%	2008	DHS Forward Health. Medicaid utilization and enrollment data
Access to Care	**Dentists**	Ratio of population to dentists	1439:1 (Top Performer)	1630 to 1	1560 to 1	2017	CHR – Ranked Measures ("County Snapshot")
Access to Care	**No recent dental visit**	% of population age 2+ that did not have a dental visit in the past year		33%	26%	2017	CHR – Additional Measures
Access to Care	**Local Health Department Staffing**	Fulltime equivalents of local health department staff per 10,000 population		3.0 per 10,000	3.2 per 10,000	2016	DHS Public health profiles

Category	Title	Measure	Targets & Top Performers *	Barron County	WI	Year(s) Data Used	
Chronic Disease Management	**Cervical Cancer Screening**	% of women 18+ who had a pap test in last 3 years		no data			DHS WISH system
Chronic Disease Management	**Colon Cancer Screening**	% of 50+ population who ever had a sigmoidoscopy or colonoscopy		no data			DHS WISH system
Chronic Disease Management	**Diabetic Screening**	% of diabetic Medicare enrollees that received HbA1c screening in past year	90% (Top Performer)	91%	90%	2017	CHR – Ranked Measures ("County Snapshot")
Chronic Disease Management	**Mammography Screening**	% of female Medicare enrollees aged 67-69 that received mammography screening over two years	71% (Top Performer)	68%	72%	2017	CHR – Ranked Measures ("County Snapshot")
Chronic Disease Management	**Cholesterol Screening**	% of adults ever had cholesterol checked		83.2	n/a	2006-2008	DHS WISH system
Education	**High School Graduation**	% of 9th grade cohort that graduates in four years		87%	88%	2017	CHR – Ranked Measures ("County Snapshot")
Education	**Some College**	% of adults age 25-44 with some college or associate's degree	70% (Top Performer)	56%	67%	2017	CHR – Ranked Measures ("County Snapshot")
Education	**Reading Proficiency**	% of fourth grade students proficient or advanced in reading 3-8th grade		32.80%	36.60%	2013-2014	WI School Performance Report
Employment	**Unemployment**	% of population age 16+ unemployed but seeking work	4.4% (Top Performer)	5.10%	4.60%	2017	CHR – Ranked Measures ("County Snapshot")
Employment	**W2 Enrollment**	Count of Individuals enrolled in W-2 (Wisconsin Works) on the last working day of the month		41	14,439	2017	WI Dept of Children and Families
Adequate Income	**Median Household Income**	Median household income (all residents of a household over age 18)		$51,100	$55,600	2017	CHR – Additional Measures
Adequate Income	**Poverty, All Ages**	% of population living below the Federal Poverty Line (FPL)		11%	12%	2017	US Census
Adequate Income	**Poverty, Children**	% of children under 18 living below the Federal Poverty Line (FPL)	13% (Top Performer)	17%	17%	2017	CHR – Ranked Measures ("County Snapshot")
Adequate Income	**Children Eligible for Free Lunch**	% of children enrolled in public schools that are		47%	41%	2017	CHR – Additional Measures

Category	Title	Measure	Targets & Top Performers *	Barron County	WI	Year(s) Data Used	
		eligible for free school lunch					
Adequate Income	**Severe Housing Problems**	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities	9% (Top Performer)	13%	16%	2017	CHR – Ranked Measures ("County Snapshot")
Community Safety	**Violent Crime**	Violent crime rate per 100,000 population (includes offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, forcible rape, robbery, and aggravated assault)	64 per 100,000 (Top Performer)	67 per 100,000	283 per 100,000	2017	CHR – Ranked Measures ("County Snapshot")
Community Safety	**Child Abuse**	Child abuse rate per 1,000 population (allegation of maltreatment substantiated)		3 per 1,000	4 per 1,000	2017	WI Child Abuse and Neglect Report
Community Safety	**Youth Violence**	% of students who have been bullied on school property during the past 12 months		24%	23%	2016 Barron 2013 State	YRBS
Community Safety	**Youth Violence**	% of students who have ever been physically forced to have sexual intercourse when they did not want to		5.90%	N/a	2016	YRBS
Health Literacy	**Illiteracy**	% of the population age 16 and older that lacks basic prose literacy skills		8%	7%	2003	National Assessment of Adult Literacy
Social Support	**Single-parent Households**	% of children that live in a household headed by a single parent	20% (Top Performer)	30%	31%	2017	CHR – Ranked Measures ("County Snapshot")
Social Support	**Older Living Alone**	% 65 years and older who live alone		28%	29%	2017	CHR – Ranked Measures ("County Snapshot")
Racism	**Hate Crimes**	Hate crime rate per 100,000 population		N/A	1 per 100,000	2017	US Census
Built Environment	**Limited Access to Healthy Foods**	% population who are low income and do not live close to a grocery store (10 miles rural/one mile urban)		3%	5%	2017	Reports to law enforcement agencies in 2009

Category	Title	Measure	Targets & Top Performers *	Barron County	WI	Year(s) Data Used	
Built Environment	**Food Insecurity**	Percent of people who do not have adequate access to food during the past year		12%	12%	2017	CHR – Additional Measures
Built Environment	**Lead Poisoned Children**	Prevalence of elevated blood lead levels among children age six and under		1	678	2014	CHR – Additional Measures
Built Environment	**Year Structure Built**	% of housing units built prior to 1950		29%	26%	2017	DHS
Natural Environment	**Air Pollution -- Particulate Matter**	The average daily measure of fine particulate matter in micrograms per cubic meter (PM2.5) in a county	9.5 (Top Performer)	8.8	9.3	2017	US Census
Natural Environment	**High Ozone Days**	The 8-hour ozone concentration in parts per million, converted to an air quality index level	0 (Top Performer)	N/A	N/A		CHR – Ranked Measures ("County Snapshot")
Natural Environment	**Drinking Water Violations**	Percentage of population potentially exposed to water exceeding a violation limit during the past year		Yes		2017	CHR – Ranked Measures ("County Snapshot")

* Targets: Obtained from Healthy People 2020 or 2010 (HP2020 and HP2010).

* Top Performers: See the County Health Rankings and Roadmaps (CHRR) Exploring the Data (http://www.countyhealthrankings.org/using-the-rankings-data/exploring-the-data) for more information on this metric. The "Top Performer" is the value for which only 10% of counties in the country are doing better.

Population Data						
Barron County	**2014 Data**			**Wisconsin**		
Age Group	**Males**	**Female**	**Percent Change**	**Age Group**	**Male**	**Female**
0-17	4,934	4,719	-5%	0-17	664,657	636,188
18-44	6,939	6,503	-3%	18-44	1004757	973,698
45-64	6,714	6,587	-2%	45-64	794,628	799,615
65+	4,336	5,159	14%	65+	390,698	483,717
Total	22,923	22,968	0%	Total	2,854,740	2,893,218

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Appendix 2

Barron County
Community Health Survey

All Barron County residents are invited to complete this survey. The information you provide in this survey is important. Your views and opinions will help us understand the health needs of Barron County. Your responses to this survey are completely anonymous. If you have questions or concerns about this survey please contact Laura Sauve, Health Officer, at 715-537-6109. Thank you for taking time to help!

1. In your opinion, please choose the TOP THREE health concerns in Barron County.

- ☐ **Alcohol, Tobacco and other Drug Use/Abuse** focuses on the negative impacts of mood altering substances (alcohol, meth, marijuana, prescription drugs, tobacco, and heroin), such as:
  - Violence, car crashes and other injury or death, crimes, dependence/addiction
- ☐ **Childhood Development** focuses on receiving the care and support needed to reach the best possible physical, social, and emotional health and development, such as:
  - Prenatal care, early learning opportunities for infants and children/quality child care, positive caring relationships, regular health check-ups
- ☐ **Chronic Disease Prevention and Management** focuses on preventing and managing illnesses that last a long time, usually cannot be cured, and often result in disability, such as:
  - Heart disease, cancer, diabetes, Alzheimer's/dementia
- ☐ **Contagious Disease Prevention and Control** focuses on illnesses caused by bacteria, viruses, fungi, or parasites that can be passed from person-to-person or animal-to-person as well as ways to prevent and control these illnesses, such as:
  - Influenza, Lyme disease, immunizations, personal health practices (handwashing, using bug spray, etc.)
- ☐ **Dental Health** focuses on keeping teeth, gums, and mouth healthy. Issues of concern include:
  - Mouth pain, tooth decay/tooth loss
- ☐ **Injury and Violence** focuses on preventing injury from accidents or violence, such as:
  - Falls, car crashes, suicide, child abuse, sexual assault
- ☐ **Mental Health** focuses on services and support to address how we think, act, and feel as we handle stress, relate to others, and make choices. Examples of mental health conditions are:
  - Depression, anxiety, post-traumatic stress disorder (PTSD), bi-polar disorder
- ☐ **Nutrition** focuses on always having enough and nutritious food for healthy eating from infancy through old age, such as:
  - Breastfeeding, fruits and vegetables, fresh foods properly stored, prepared, and refrigerated, balanced meals
- ☐ **Physical Activity** focuses on ways to stay active to improve overall health, such as:
  - Walking, swimming, lifting weights, team sports
- ☐ **Sexual Health** focuses on education and health care services that help maintain sexual health for people of all ages, such as:
  - Preventing unintended pregnancy, detecting or preventing sexually transmitted infections (STIs) such as chlamydia and gonorrhea
- ☐ **Worksite Health and the Environment** focuses on preventing illnesses and injuries from indoor and outdoor hazards, such as:

- Contaminated food, water, or air, hazards at work (e.g., unsafe work practices or tools, exposure to chemicals or radiation, diseases that can be passed from animals to humans

Other / Additional Comments:

2. **If you could improve one or more things in your community what would it/they be and why?**

3. **How do you define health?**

4. **How do you define a healthy community?**

5. **Please check ALL of the things that have contributed to physical or mental health problems for you or a household member in the last 12 months.**

- ☐ Tobacco use
- ☐ Alcohol
- ☐ Drug use
- ☐ Bullying
- ☐ Physical injury
- ☐ Unsafe housing
- ☐ Child care giving
- ☐ Adult care giving
- ☐ Polluted air or water
- ☐ Not eating healthy
- ☐ Severe or chronic pain
- ☐ Being a victim of a crime
- ☐ Not getting enough exercise
- ☐ Feeling lonely or depressed
- ☐ Not knowing "Where to start"
- ☐ Physical, sexual, or verbal abuse
- ☐ Getting in trouble with the law
- ☐ Not being able to get a "good" job
- ☐ Not having a safe place to exercise
- ☐ Not being able to get to appointments
- ☐ Unsafe work or school environment
- ☐ Not having enough money to get food
- ☐ Lack of sleep (less than 7 hours per night)
- ☐ Not knowing how to get help paying bills
- ☐ Fear of being judged for health problems
- ☐ Not being able to find affordable housing
- ☐ Not being able to get a good education
- ☐ Not having a reliable car/ transportation
- ☐ Not having enough money to get healthcare
- ☐ Not enough time to deal with health problems
- ☐ Not understanding how health insurance works
- ☐ Not having support or help from family or friends
- ☐ Trouble seeing, hearing, remembering, or moving
- ☐ Not having enough money for medications or treatments
- ☐ Not being able to communicate (language, ability to read, etc.)

Other / Additional Comments:

6. **Have you been able to find and access help for problems checked in question 5? (such as healthcare, government programs, county organizations, etc.)**

- ☐ Yes
- ☐ No

Please explain:

7. **What are the top three strengths in Barron County?**

- ☐ Businesses/job opportunities
- ☐ Communities and neighborhoods
- ☐ Community organizations (like churches, senior centers, etc.)
- ☐ Diverse population
- ☐ Low crime rate
- ☐ Healthcare and public health services
- ☐ Improved health awareness
- ☐ Natural resources (like city/county parks, lakes, etc.)
- ☐ Schools (public, private, technical, university)
- ☐ Supportive services (like shelters, food shelves)

Other / Additional Comments:

8. **Many social issues contribute to our health. Please choose the top three issues below which could improve the health of Barron County.**

- ☐ Less unemployment
- ☐ Having enough food
- ☐ Having stable housing
- ☐ Less poverty or having enough money for basic bills
- ☐ Helping young children learn and develop
- ☐ Enrollment in higher education (i.e. technical college, 4 year colleges)
- ☐ Increase high school graduation rates
- ☐ Help with speaking and reading needs
- ☐ More community and government participation
- ☐ Less discrimination
- ☐ Less people in jail
- ☐ Feeling connected to family, neighbors and friends
- ☐ Access to health care
- ☐ Access to mental health care
- ☐ Access to dental health care
- ☐ Understanding health information
- ☐ Access to foods that help keep you healthy
- ☐ Less crime and violence
- ☐ Good environmental conditions
- ☐ Safe housing

Other / Additional Comments:

9. **Adverse childhood experiences (ACEs) are stressful or traumatic events that occur during childhood and are strongly associated with health problems throughout our lives. Please let us know if you experienced any of the following during your childhood.**

- ☐ Physical abuse
- ☐ Sexual abuse
- ☐ Emotional abuse
- ☐ Physical neglect
- ☐ Emotional neglect
- ☐ Intimate partner violence
- ☐ Mother treated violently
- ☐ Substance misuse within household
- ☐ Household mental illness
- ☐ Parental separation or divorce

- ☐ Household member in jail

Other / Additional Comments:

<u>We are asking the following questions to make sure we are getting opinions from people of different backgrounds.</u>

10. What is your current gender identity?

- ☐ Male
- ☐ Female
- ☐ Trans male/ trans man
- ☐ Trans female/ trans woman
- ☐ Genderqueer/gender non-conforming
- ☐ Prefer not to answer
- ☐ Different identity (please state): _____

11. In what ZIP code is your home located? (enter 5-digit ZIP code) _____

12. What is your age?

- ☐ Less Than 18
- ☐ 18-24
- ☐ 25-49
- ☐ 50-64
- ☐ 65-80
- ☐ Over 80
- ☐ Prefer not to answer

13. What is the highest level of education you have completed?

- ☐ Some high school
- ☐ High school diploma or GED
- ☐ Associate degree/ some college
- ☐ Bachelor's degree
- ☐ Graduate or professional degree
- ☐ Prefer not to answer

14. From the options below, please select the race/ethnicity that best represents you.

- ☐ White – non Hispanic
- ☐ White- Hispanic
- ☐ Black or African American
- ☐ American Indian or Alaskan Native
- ☐ Asian
- ☐ Native Hawaiian or other Pacific Islander
- ☐ From multiple races
- ☐ Prefer not to answer
- ☐ Other (please specify): _____

15. **How much money did people living in your house earn in 2017?**

- ☐ Less than $25,000
- ☐ $25,001 to $50,000
- ☐ $50,001 to $100,000
- ☐ More than $100,000
- ☐ Prefer not to answer

16. How many people, including yourself, does this income support?

- ☐ 1 (just me)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7 or More

Please share any additional comments you would like us to know:

Thank you for giving your opinions! Please return this survey to the place where you picked it up or mail to:
Barron County DHHS
Attn: Community Survey
335 E. Monroe Avenue, Room 338
Barron WI 54812

Appendix 3

2018 Community Health Assessment Fact Sheets

These informational sheets were distributed to the participants in the September 26, 2018 community meetings and summarize community demographics, survey results, health data, and specific population concerns for each health focus area. This handout also provided a written comment page for those wishing to submit written comments after the meeting.

Appendix 3

2018 Barron County Community Health Assessment

September 26, 2018

thrive
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Growing Together in Health

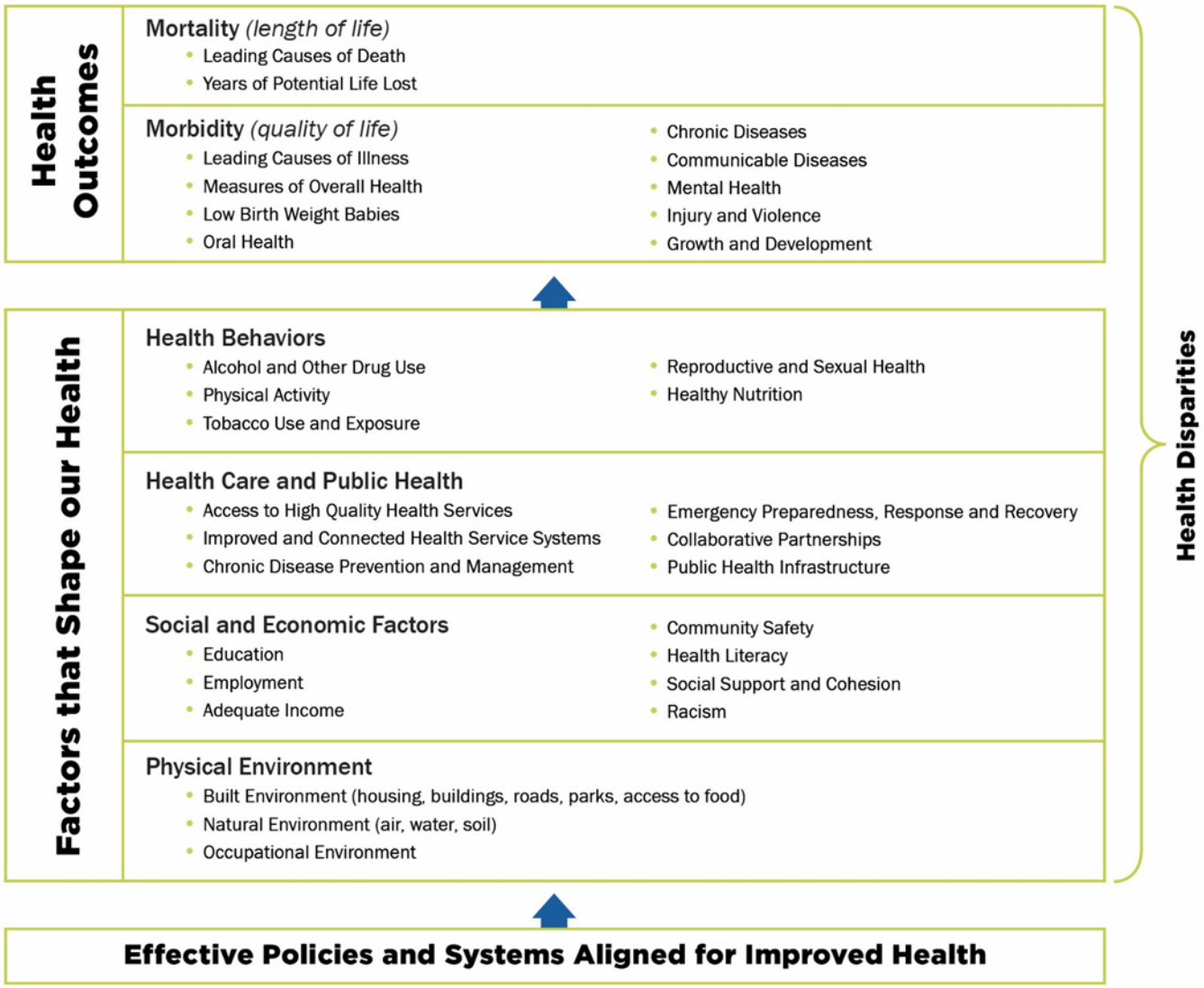
2018 Barron County Community Health Assessment
Community Meeting Agenda

15 min	Welcome
30 min	2012-18 Health improvement progress and activities
30 min	2018 Assessment data
15 min	Break and time to move to rooms for small group discussions
45 min	Small group discussions
30 min	Small groups report to the large group
15 min	Next Steps: Community Health Improvement Planning

On behalf of our Thrive Barron County Planning Committee, we would like to thank you for taking time out of your day to participate in the 2018 Barron County Community Health Assessment. We invite you to use the last page of this packet to give additional feedback on this process. You may also contact Laura Sauve, Barron County Public Health Program Manager, at 715-537-6109 or laura.sauve@co.barron.wi.us

thrive
BARRON COUNTY
Growing Together in Health

What Makes a Community Healthy?



"Note: The majority of the health outcomes and factors listed in the diagram above are included in the Wisconsin State Health Plan, Healthiest Wisconsin 2020, as health objectives, infrastructure objectives, or pillar objectives."

Taken from the Wisconsin Guidebook v2.0: February 2015
Wisconsin Community Health Improvement Plans and Processes (CHIPP) Infrastructure Improvement Project

Barron County Demographics

Population 45,251
(decreased 1.3% since 2010)

Non English Languages Spoken[2]
- Spanish: 1.62%
- African (Somali): 0.90%
- German: 0.78%

Race & Hispanic Origin[1]	Barron County	Wisconsin
White alone	95.5%	87.3%
Black or African American alone	1.4%	6.7%
American Indian and Alaska Native alone	1.0%	1.2%
Asian alone	0.7%	2.9%
Two or more races	1.3%	1.9%
Hispanic or Latino	2.6%	6.9%
White alone, not Hispanic or Latino	93.3%	81.3%

County
$46,863

Wisconsin
$54,610

$$$

Median Household Income[3]

County
11.3%

Persons in Poverty[3]

Wisconsin
11.8%

Age[1]	Barron County	WI
Under 5 years	5.5%	5.8%
Under 18 years	21.7%	22.1%
65 years & over	21.4%	16.5%

[1]Census Quick Facts, Barron County WI (2017)
[2] Data USA: https://datausa.io/profile/geo/barron-county-wi/#demographics (2015)
[3]Census Quick Facts, Barron County WI (2012-2016)

2018 Barron County Community Health Survey
Response Demographics

Age

18-24	26
25-49	282
50-64	199
65-80	125
Less Than 18	123
Over 80	51
Prefer not to answer	9
Grand Total	**815**

Total Surveys Collected: 838

Electronic: 539 (64%)

Paper: 299 (36%)

- English: 276 (33%)
- Somali: 6 (1%)
- Spanish: 9 (1%)
- Drug Court: 8 (1%)

89% White-Non Hispanic

71% Female

Race and Ethnicity

American Indian or Alaskan Native	6
Black or African American	4
From multiple races	12
Other (please specify)	8
Prefer not to answer	16
White – Non Hispanic	742
White- Hispanic	27
Grand Total	**815**

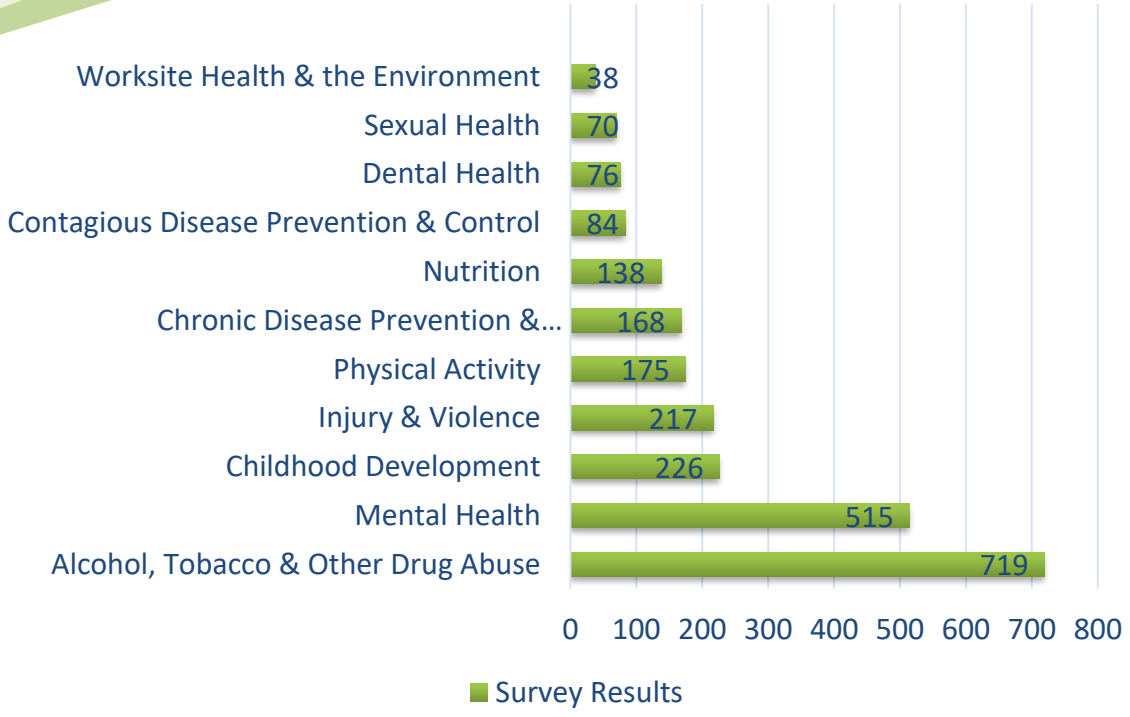
Income

$25,001 to $50,000	190
$50,001 to $100,000	224
Less than $25,000	130
More than $100,000	157
Prefer not to answer	105
Grand Total	**806**

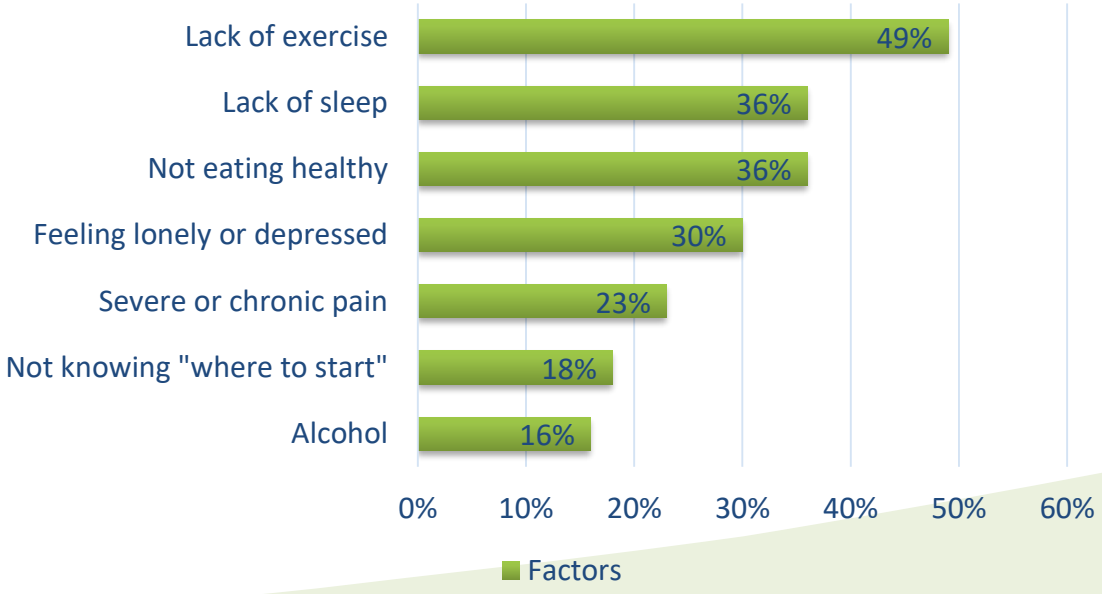
Education

Associate degree/ some college	223
Bachelor's degree	153
Graduate or professional degree	125
High school diploma or GED	148
Prefer not to answer	20
Some high school	150
Grand Total	**819**

Survey respondents chose their top three health concerns in Barron County



Top factors contributing to physical or mental health problems for survey respondents or a household member in the last 12 months.



Alcohol Misuse

Barron County

Defined as: *Underage alcohol consumption, consumption during pregnancy, and binge drinking (4+ drinks per occasion for women, 5+ drinks per occasion for men)*

Local data

10% County
36% Wisconsin

Percent of driving deaths with alcohol involvement[1]

19% County
30% Wisconsin

Students that reported consuming at least one drink in the past 30 days[2]

25% County
23% Wisconsin

18% Nationally

Adults that reported engaging in excessive drinking[3]

Community Health Survey[4]

86% of community survey respondents felt **alcohol, tobacco, and other drug abuse** was a top health concern.

Population Specific Concerns[5]

While alcohol misuse in our community affects all groups, we tend to binge drink more if we are 18-34 years old, male, non-Hispanic white, and have higher income.

[1]2018 County Health Rankings (Fatality Analysis Reporting System, 2012-2016)
[2]Barron County YRBS (2016) WI YRBS (2017)
[3]2016 WI Epidemiological Profile on Alcohol & Other Drug Use (2012-2014)
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

Other Drug Use

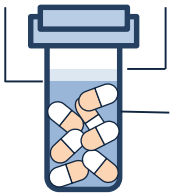
Barron County

Defined as: *Use of and negative impacts from mood altering substances (marijuana, meth) or misuse of prescription drugs*

Local data

0.8
County

1.5
Wisconsin



1.5
Nationally

Opioid-related hospitalizations per 1,000 people[1]

185
County

490
Nationally

439
Wisconsin

Drug arrests per 100,000 people[2]

1.8%
County

0.3%
Nationally

Percent of high school youth reporting having used meth in their lifetime[3]

Community Health Survey[4]

86% of community survey respondents felt alcohol, tobacco, and other drug abuse was a top health concern.

Population Specific Concerns[5]

We are more likely to die from drugs if we are non-Hispanic whites or American Indian/Alaskan Native.

[1]2016 WI Epidemiological Profile on Alc. & Other Drug Use (2013-2014)
[2] 2016 WI Epidemiological Profile on Alc. & Other Drug Use (2013-2014)
[3]2016 Youth Risk Behavioral Surveillance Survey
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

Tobacco Use & Exposure

Barron County

Defined as: *Preventing tobacco use, providing treatment to stop smoking, protection from second-hand smoke*

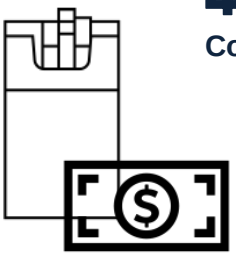
Local data

16%
County

17%
Wisconsin

15.5%
National goal

Adults report smoking most days or everyday[1]



4.1%
County

9.8%
Nationally

Tobacco sales to minors[2]

20%
County

13%
Wisconsin

Mothers who report smoking during pregnancy[3]

Community Health Survey[4]

86% of community survey respondents felt alcohol, tobacco, and other drug abuse was a top health concern.

Population Specific Concerns[5]

We are more likely to smoke cigarettes if we have a low socioeconomic status.

[1]2018 County Health Rankings (Behavioral Risk Factor Surveillance System, 2016)
[2] Wisconsin WINS (2017)
[3]2018 County Health Rankings (DHS Wisconsin Interactive Statists on Health, 2013-2016)
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

Childhood Development

Barron County

Defined as: *Care and support for best possible physical, social & emotional health and development (i.e. prenatal care, regular check-ups, child care, & education)*

Local data

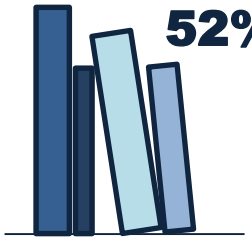
6% County

7% Wisconsin

Live births considered low birth weight[1]

52% County

52% Wisconsin



Fourth grade students proficient or advanced in reading[2]

89.9% County

91.4% Wisconsin

Adults (25 yrs+) who graduated from high school[3]

Community Health Survey[4]

27% of community survey respondents felt **childhood development** was a top health concern.

Population Specific Concerns[5]

We are less likely to graduate high school if we are Hispanic, live in poverty, have a disability, or were born outside the United States.

[1]2018 County Health Rankings (National Vital System, 2010-2016)
[2]2018 County Health Rankings (WI DPI, 2014-2015)
[3]2017 Census Quick Facts, (2012-2016)
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

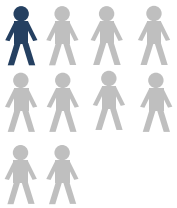
Data sheets adapted from Eau Claire City-County Health Department

Chronic Disease Prevention & Management

Barron County

Defined as: *Preventing and managing illnesses that last a long time and usually cannot be cured (i.e. Alzheimer's, cancer, diabetes, heart disease)*

Local data



1 in 10
County

1 in 11
Wisconsin

Adults diagnosed with diabetes[1]

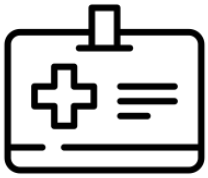
33
Wisconsin

29
Nationally

Deaths from Alzheimer's disease per 100,000 people[2]

427
County

469
Wisconsin



Cancer incidence per 100,000 people[3]

232
County

199
Wisconsin

Deaths from heart disease per 100,000 people[4]

Community Health Survey[5]

20% of community survey respondents felt **chronic disease prevention & management** was a top health concern.

Population Specific Concerns[6]

Risks from chronic disease increase if we have lower income, less education, and if we were born outside the United States.

[1]2018 County Health Rankings CDC (2014)
[2]2017 Alzheimer's Disease Facts and Figures (2014)
[3]2018 County Health Rankings (Wisconsin Cancer Reporting System, 2010-2014)
[3]Wisconsin Public Health Profiles, 2017 Barron County (2015)
[5]2018 Barron County Community Health Survey
[6]CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

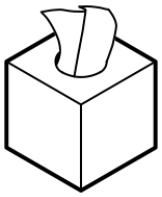
Communicable Disease Prevention & Control

Barron County

Defined as: *Illnesses caused by bacteria, viruses, parasites, etc. that can be passed to others (i.e. Lyme disease, influenza, whooping cough)*

Local data

47% County



70% National goal

Population over age 18 that had flu shot in last 12 months[1]

121 County

23 Wisconsin

Positive Lyme disease cases per 100,000 people[2]

70% County

73% Wisconsin

Children that received recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella, and pneumococcal[3]

Community Health Survey[4]

10% of community survey respondents felt **communicable disease prevention & control** was a top health concern.

Population Specific Concerns[5]

We are seeing more children receiving influenza vaccination however the influenza vaccination rate among non-Hispanic whites ≥65 years is decreasing.

[1]DHS (Wisconsin Immunization Registry, 2015-2016)
[2]2017Environmental Public Health Data Track (2016)
[3]2018 County Health Rankings (Wisconsin Immunization Registry, 2017
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

Healthy Nutrition

Barron County

Defined as: *Having enough and nutritious food for healthy eating (i.e. balanced meals, breastfeeding infants, fruits & vegetables)*

Local data

11%
County

11%
Wisconsin

Percent who lack adequate access to food[1]

30%
County

27%
Wisconsin

Infants in WIC (Women, Infants, Children) exclusively breastfed for three months[2]

24%
Wisconsin

22%
Nationally

Percent of adults that consume vegetables less than one time per day[3]

Community Health Survey[4]

16% of community survey respondents felt **nutrition** was a top health concern.

Population Specific Concerns[5]

We are less likely to live close to stores with healthy food choices when we live in rural areas.

[1]2018 County Health Rankings (Map the Meal Gap, 2015)
[2] Breastfeeding Composite Report (2017)
[3]CDC (Winnable Battles,2015)
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

Injury & Violence

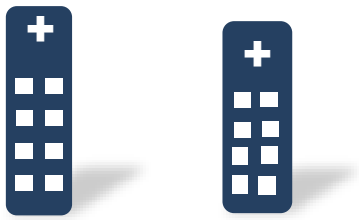
Barron County

Defined as: *Preventing injury from accidents or violence (i.e. falls, car crashes, abuse, assault)*

Local data

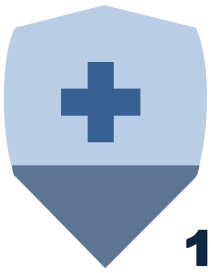
73
Wisconsin

72
County



Injury deaths per 100,000 people[1]

133
Wisconsin

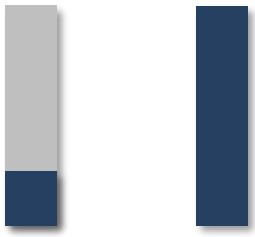


109
County

Injury deaths due to falls per 100,000 people, for adults over 65[2]

67
County

283
Wisconsin



Violent crimes per 100,000 people[3]

Community Health Survey[4]

26% of community survey respondents felt **injury & violence** was a top health concern.

Population Specific Concerns[5]

We are more likely to die in a motor vehicle accident if we are a man or an American Indian.

[1] 2018 County Health Rankings (CDC Wonder 2012-2016)
[2] DHS Wisconsin Interactive Statistics on Heath (2013-2016)
[3] 2018 County Health Rankings (FBI-Uniform Crime Reporting, 2012-2014)
[4] 2018 Barron County Community Health Survey
[5] CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

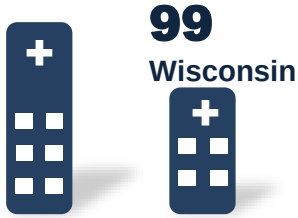
Mental Health

Barron County

Defined as: *Services and support to address mental health conditions, including depression, anxiety, and post traumatic stress disorder*

Local data

81
County



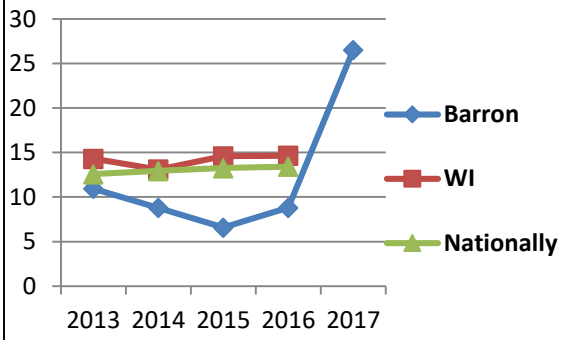
99
Wisconsin

Hospitalizations for self-inflicted wounds per 100,000 people[1]

3.6
County

3.8
Wisconsin

Number of mentally unhealthy days in the past 30 days[2]



Suicide death rate per 100,000 people[3]
2017 data for WI / Nation not available

Community Health Survey[4]

61% of community survey respondents felt **mental health** was a top health concern.

Population Specific Concerns[5]

In Barron County we are more likely to commit suicide if we are a middle age, white male.

[1]2018 County Health Rankings (DHS-Wisconsin Interactive Statistics on Health, 2012-2014)
[2]2018 County Health Rankings (Behavioral Risk Factor Surveillance System, 2016)
[3]American Foundation for Suicide Prevention/Barron County DHHS- Public Health (2017)
[4]2018 Barron County Community Health Survey
[5]Barron County DHHS- Public Health (2017)

Data sheets adapted from Eau Claire City-County Health Department

Oral Health

Barron County

Defined as: *Keeping teeth, gums and mouth healthy to prevent mouth pain, tooth decay, tooth loss, and mouth sores*

Local data

33% County

26% Wisconsin

Residents 2+ years old that did not have a dental visit in the past year[1]

17%
Western Wisconsin

18% Wisconsin

3rd graders with untreated dental decay in Western Wisconsin[2]

41%
County

89%
Wisconsin

Residents on municipal water with fluoride content at the recommended level[3]

Community Health Survey[4]

9% of community survey respondents felt **oral health** was a top health concern.

Population Specific Concerns[5]

We are more likely to have gum disease if we are older, low income, smoke, did not graduate from high school, or are black or Mexican American.

[1]2018 County Health Rankings (DHS – Wisconsin Family Health Survey, 2012, 2014, 2015)
[2] DHS-Health Smiles/Healthy Growth Wisconsin's Third Grade Children (2013)
[3]2017 Environmental Public Health Tracker (2015)
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

Physical Activity

Barron County

Defined as: *Staying active to improve overall health, including walking, biking, swimming, team sports, and weight lifting*

Local data

25% County

21% Wisconsin

Adults report no leisure time physical activity[1]

17% Wisconsin

25% Nationally

High school students who watched television 3 or more hours/day[2]

72% County

86% Wisconsin

Residents with adequate access to a physical activity location[3]

Community Health Survey[4]

21% of community survey respondents felt **physical activity** was a top health concern.

Population Specific Concerns[5]

While obesity is increasing among all groups; it is increasing more among boys and men.

[1]2018 County Health Rankings (The National Diabetes Surveillance System, 2014)
[2] Youth Risk Behavioral Surveillance System (2015)
[3]2018 County Health Rankings (ArcGIS, 2016)
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

Data sheets adapted from Eau Claire City-County Health Department

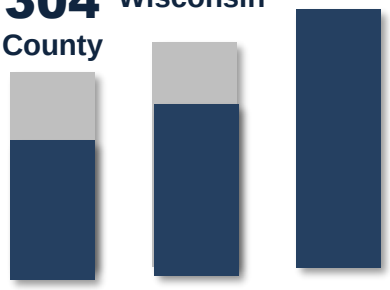
Reproductive & Sexual Health

Barron County

Defined as: *Education and health care to maintain sexual health, prevent unintended pregnancy and sexually transmitted infections*

Local data

304 County
424 Wisconsin
456 Nationally



Positive chlamydia tests per 100,000 people[1]

23 County
20 Wisconsin

32 Nationally

Females age 15 to 19 that gave birth per 1,000 people[2]

73% County
74% Wisconsin

Pregnant women that received 1st trimester prenatal care[3]

Community Health Survey[4]

8% of community survey respondents felt **sexual health** was a top health concern.

Population Specific Concerns[5]

We are more likely to test positive for chlamydia if we are between the ages of 15 and 24 years old.

[1]2018 County Health Rankings (National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2015)
[2] 2018 County Health Rankings (National Vital Statistics System (2010-2016)
[3]DHS- Wisconsin Interactive Statistics on Health (2016)
[4]2018 Barron County Community Health Survey
[5]Barron County DHHS-Public Health (2017)

Data sheets adapted from Eau Claire City-County Health Department

Worksite Health & the Environment

Barron County

Defined as: *Illnesses and injuries from indoor and outdoor hazards, such as chemicals, contaminated food/water, polluted air, or work hazards*

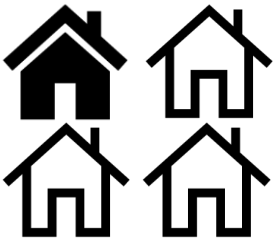
Local data

8.2 County

7.9 Wisconsin

ER Visits for Carbon Monoxide Poisoning per 100,000 people[1]

27% County



26% Wisconsin

Percent of housing units built before 1950s[2]

2.4% County

6.4% Wisconsin

Children Lead Poisoning Percent with blood lead ≥5µg/dL[3]

Community Health Survey[4]

5% of community survey respondents felt **worksite health & the environment** was a top health concern.

Population Specific Concerns[5]

We are more likely to have a job with a higher risk of injury and illness if we are Hispanic, in a low wage job, foreign born, only have a high school education, or are male.

Data sheets adapted from Eau Claire City-County Health Department

[1]2017 Environmental Health Profile (2010-2014))
[2]2018 County Health Rankings (American Community Survey, 2012-2016)
[3]2017 Environmental Health Profile (2015)
[4]2018 Barron County Community Health Survey
[5]CDC Health Disparities and Inequalities Report-2013

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Data

ALICE: A Study of Financial Hardship in Wisconsin, 2018 Report
https://unitedwaywi.site-ym.com/page/2018ALICE

County Health Rankings & Roadmaps
http://www.countyhealthrankings.org/app/wisconsin/2018/overview

Environmental Health Profile, 2017 Barron County
https://www.dhs.wisconsin.gov/publications/p0/p00719-barron.pdf

US Census Quick Facts
https://www.census.gov/quickfacts/fact/table/barroncountywisconsin/PST045217

Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016
https://www.dhs.wisconsin.gov/publications/p4/p45718-16.pdf

Wisconsin Health Atlas/ Wisconsin Obesity Map
https://www.wihealthatlas.org/

Wisconsin Public Health Profiles, 2017
https://www.dhs.wisconsin.gov/stats/pubhealth-profiles.htm

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BARRON COUNTY
Growing Together in Health

2018 Barron County Community Health Assessment
Comment Form

Name (optional) _____

Contact Information (optional) _____

Comments:

Please return to the registration table or mail to:

Barron County DHHS- Public Health
Attn: Laura Sauve
335 E. Monroe Avenue, Room 338
Barron WI 54812