

2016

# COMMUNITY HEALTH NEEDS ASSESSMENT



**ST. JOSEPH**  
Regional Medical Center



**Public Health**  
Idaho North Central District







## Introduction

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We are pleased to release the 2016 Community Health Needs Assessment (CHNA) for Public Health – Idaho North Central District. This report is a joint CHNA between Public Health, St. Joseph Regional Medical Center and Twin County United Way. This effort included updating key health indicators tailored to our community, and creating and conducting a public survey and listening sessions to understand the community members’ concerns with health, education and income issues in our region.

The assessment continues to affirm that the health status of our region is very positive and compares favorably to our state and nation on many health indicators. It also shows more could be done in certain areas. Several opportunities for improving residents’ overall health and wellness were identified, and through community process we will focus on three major social determinants: Health, Education and Income. Nearly every resident is touched by one or more of these issues, with our vulnerable populations often bearing a disproportionate burden. While the focus of our Community Health Improvement Plan will be these three major social determinants, it is critical that we continue the ongoing work in our communities that address the many social determinants of health.

We extend our thanks to the many community organizations that contributed to this effort and who provide valuable services every day to help keep our community healthy. In keeping with our community’s tradition of strong inter-organizational collaboration, key leaders and organizations in the community have committed to addressing the priority issues identified in this community health needs assessment. Working together we can have lasting and meaningful effects on the health of our community.

A handwritten signature in cursive script that reads "Carol M. Moehrle".

Carol M. Moehrle  
Director  
Public Health – Idaho North Central District

## Table of Contents

<b>Executive Summary</b> .....	<b>5</b>
<b>Demographic Snapshot</b> .....	<b>6</b>
<b>Health Concerns</b> .....	<b>7</b>
#1: OVERWEIGHT/OBESITY & CHRONIC DISEASES .....	7
#2: HEALTH INSURANCE.....	8
#3: MENTAL HEALTH & DRUG/ALCOHOL ABUSE .....	9
<b>Education Concerns</b> .....	<b>10</b>
#1: OPPORTUNITIES FOR COLLEGE EDUCATION OR POST HIGH SCHOOL TRAINING.....	10
#2: TUTORING AT RISK.....	11
#3: CHILD DAY CARE .....	12
<b>Income Concerns</b> .....	<b>13</b>
#1: HOUSING .....	13
#2: FOOD ASSISTANCE.....	14
#3: MANAGING FINANCES & EMPLOYMENT ASSISTANCE .....	15
<b>Communities Served</b> .....	<b>16</b>
<b>Process and Methodology</b> .....	<b>18</b>
<b>Community Feedback and Attendees</b> .....	<b>19</b>
<b>Community Input</b> .....	<b>20</b>
<b>Community Resource List</b> .....	<b>21</b>
<b>County Profile</b> .....	<b>22</b>
CLEARWATER COUNTY .....	23
IDAHO COUNTY .....	24
LATAH COUNTY .....	25
LEWIS COUNTY .....	26
NEZ PERCE COUNTY .....	27
ASOTIN COUNTY.....	28
<b>Idaho’s Local Public Health System</b> .....	<b>29</b>
<b>Idaho’s Public Health Districts</b> .....	<b>29</b>
<b>Community Health Needs Assessment</b> .....	<b>30</b>
<b>Community Health Needs Assessments and Results</b> .....	<b>36</b>
<b>Data Resources</b> .....	<b>47</b>
<b>Get Healthy Idaho: Measuring and Improving Population Health</b> .....	<b>48</b>
<b>Network of Care</b> .....	<b>56</b>
<b>Crosswalk of Regional Community Health Assessments</b> .....	<b>58</b>

# Executive Summary

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The 2016 Community Health Needs Assessment (CHNA) focused on Health, Education and Income and was accomplished through a collaborative effort spearheaded by the Twin County United Way, St. Joseph Regional Medical Center and Public Health – Idaho North Central District. The Community Health Needs Assessment was conducted in a five-county area of North Central Idaho encompassing Clearwater, Idaho, Latah, Lewis, and Nez Perce counties and one bordering eastern Washington County; Asotin. Nearly 2,000 respondents provided input via a survey and dozens of individuals provided input through community conversations and community engagement. A very special thank you is owed to all the volunteers, survey respondents and individuals who contributed to this project.

The CHNA is intended to identify the health, education and income needs and issues of the region and to provide useful information to public health, hospitals, health care providers, policy makers, collaborative groups, social service agencies, community groups and organizations, churches, businesses and consumers who are interested in improving the health and overall status of the community and region. Joining forces helps ensure that good use is being made of our community’s charitable resources by identifying the most urgent needs of the underserved. In turn, this maximizes effort by reducing costs and coordinating research findings into a comprehensive document for use by others.

The following are the top three identified needs from each category that emerged from the findings of the Community Health Needs Assessment:

ASSESSED NEEDS	HEALTH	EDUCATION	INCOME
<b>TOP NEED</b>	Overweight/ Obesity & Chronic Diseases (Diabetes, Heart Disease, Obesity)	Post High School/ College Opportunities	Affordable Housing
<b>2<sup>ND</sup> HIGHEST</b>	Health Insurance	Tutoring for At-Risk	Food Assistance
<b>3<sup>RD</sup> HIGHEST</b>	Mental Health	Before & After School Options	Managing Finances/ Employment Assistance

The results of this collaborative assessment reveals several opportunities for improvement in a variety of areas enabling organizations to more strategically establish priorities, develop interventions and commit resources. The selected areas will provide many opportunities for community groups, working together, to make the biggest impact on the community’s health, education & income. The following pages provide some of the information necessary to make informed decisions and set priorities.

# Demographic Snapshot

This Community Health Needs Assessment: (CHNA) focused on the overlapping service areas of St. Joseph Regional Medical Center, Public Health – Idaho North Central District, Gritman Medical Center, St. Mary Hospital, Clearwater Valley Hospital, Syringa Hospital and the Twin County United Way, which includes the five North Central Idaho Counties: Clearwater, Idaho, Latah, Lewis and Nez Perce, as well as the Washington County: Asotin. Collectively these 6 counties represent nearly 130,000 people, of which 93% are White, 49% female and 18% over the age of 65 years. Within these counties, over 60% of the population resides in either Nez Perce or Latah County, wherein Lewiston, ID and Moscow, ID are located.



<b>People QuickFacts<sup>1</sup></b> July 1, 2014 Unless otherwise Indicated	<b>Asotin</b>	<b>Clearwater</b>	<b>Idaho</b>	<b>Latah</b>	<b>Lewis</b>	<b>Nez Perce</b>	<b>Totals/ Average</b>
<b>Population</b> Estimates, July 1, 2015	22,105	8,496	16,272	38,778	3,789	40,048	129,488
<b>Median Income Per Person</b> (in 2014 dollars), 2010-2014	\$24,836	\$20,154	\$19,527	\$22,575	\$21,542	\$24,570	\$23,006
<b>Median household income</b> (in 2014 dollars), 2010-2014	\$42,689	\$39,750	\$38,320	\$41,944	\$36,159	\$46,608	\$42,733
<b>Persons in poverty</b> % below federal poverty level	16%	17%	16%	20%	14%	15%	17%
<b>Persons under 18 years</b>	21%	16%	20%	19%	23%	22%	20%
<b>Persons 65 years and over</b>	21%	25%	24%	12%	24%	19%	18%
<b>Female persons</b>	52%	45%	48%	49%	50%	51%	49%
<b>White Only</b>	94%	94%	94%	93%	90%	90%	93%
<b>Persons without health insurance</b> Under age 65 years	15%	20%	22%	16%	23%	16%	17%

<sup>1</sup> www.census.gov

# Health Concerns

## #1: OVERWEIGHT/OBESITY & CHRONIC DISEASES

The number 1 ranked health concern among all respondents, those without health insurance and those with income less than \$50,000 is Overweight/ Obesity. Closely tied to obesity is chronic diseases, which is the 3<sup>rd</sup> highest health need among respondents with income less than \$50,000 and those without health insurance.

HEALTH CONCERNS BY RANK*	All Respondents	Income less than \$50,000	No Insurance
Overweight/Obesity	1	1	1
Treatment for Chronic Diseases (Diabetes, Heart Disease, Obesity)	4	3	3

The rate of obesity raises concern because of its implications for the health of Americans. Obesity increases the risk of many diseases and health conditions including<sup>2</sup>:

- Coronary Heart Disease
- Cancers (endometrial, breast, and colon)
- Osteoarthritis
- Liver and Gallbladder Disease
- Dyslipidemia ( high total cholesterol or high levels of triglycerides)
- Type-2 Diabetes
- Hypertension (high blood pressure)
- Sleep Apnea and Respiratory Problem
- Gynecological Problems
- Stroke

Diabetes is the seventh leading cause of death in Idaho and about one third of Idaho adults living with diabetes do not know they have the disease<sup>3</sup>. Effectively managing diabetes will help Idahoans living with the disease lead more productive and healthier lives. An estimated 100,000 Idaho adults, or 8.4% of the adult population, live with diabetes and an estimated 84,000 Idaho adults, or 7.5% of the adult population, live with pre-diabetes.

HEALTH FACTORS BY COUNTY <sup>4</sup>	Clearwater	Idaho	Latah	Lewis	Nez Perce	ID State	Asotin	WA State	US Median
<b>Adult obesity</b> Percent of adults that report a BMI >= 30	29%	27%	27%	29%	32%	28%	32%	27%	31%
<b>Food Environment Index</b> Measure ranging from 0 (worst) to 10 (best)	6.3	5.8	6.7	5.7	7.4	7.1	7.3	7.5	7.2
<b>Access to exercise opportunities</b> % of the population with adequate access to locations for physical activity	21%	59%	66%	40%	79%	75%	73%	88%	62%
<b>Diabetic monitoring</b> — Percent of diabetic Medicare enrollees that receive HbA1c screening	83%	81%	88%	82%	84%	82%	82%	86%	85%

<sup>2</sup> NHLBI. 2013. Managing Overweight and Obesity in Adults: Systematic Evidence Review from the Obesity Expert Panel. <http://www.nhlbi.nih.gov/sites/www.nhlbi.nih.gov/files/obesity-evidence-review.pdf>

<sup>3</sup> Idaho Department of Health and Welfare, Division of Public Health, Get Healthy Idaho, 2015

<sup>4</sup> [www.countyhealthrankings.org](http://www.countyhealthrankings.org)

## #2: HEALTH INSURANCE

The second highest ranking health concern among all respondents, those without health insurance and those with income less than \$50,000 was health insurance. This indicates that even those with health insurance acknowledge that a lack of health insurance is a leading need in the community.

HEALTH CONCERNS BY RANK*	All Respondents	Income less than \$50,000	No Insurance
Health Insurance	2	2	2

Nearly one in five people in the service area are without Health Insurance (19%). Compared to people with health insurance, uninsured children and adults experience worse health and die sooner. Families can suffer emotionally and financially when even a single member is un- or under insured. Lack of health insurance at the community level is associated with financial instability for health care providers and institutions, reduced hospital services and capacity, and significant cuts in public health programs, which may diminish access to certain types of care for all residents, even those who have adequate coverage. The nation as a whole is economically disadvantaged as a result of the poorer health and premature death of uninsured Americans. The Institute of Medicine estimated the lost economic value of uninsurance is between \$65 billion and \$130 billion annually.<sup>5</sup>

HEALTH FACTORS BY COUNTY*	Clearwater	Idaho	Latah	Lewis	Nez Perce	ID State	Asotin	WA State	US Median
Uninsured adults — Percent of population under age 65 without health insurance	20%	22%	16%	23%	16%	19%	15%	16%	17%

Within the service area there is a significant difference in uninsured rates between Asotin County, located in Washington State, and all other counties located in Idaho. This is likely due to the expansion of Medicaid in Washington and not in Idaho.

<sup>5</sup> (Institute of Medicine. 2004. *Insuring America's Health*. Washington, DC: National Academy Press, p. xi)



### #3: MENTAL HEALTH & DRUG/ ALCOHOL USE

Mental health services and drug/alcohol prevention, education and treatment were both ranked in the top half of health concerns of all respondents. Mental health was the third highest rank of health concerns. 16 percent of respondents, or more than one in six people, reported a need for mental health services over the last year and nearly that many who needed care did not receive it. While only three percent of respondents indicated a need for drug/alcohol prevention, education & treatment, 33% of those who needed that care did not receive it. Mental health also has an impact on income concerns and is the 2<sup>nd</sup> highest need within the income category, specifically getting help for mental illness.

HEALTH CONCERNS	BY RANK All Respondents	% Needing Care	% Did Not Receive Needed Care
Mental Health Services	3	18%	16%
Drug/ Alcohol Prevention, Education & Treatment	6	3%	33%
INCOME CONCERNS	BY RANK-All Respondents		Income less than \$50,000
Getting Help for Mentally Ill	2		5

The National Bureau of Economic Research (NBER) reports that there is a “definite connection between mental illness and the use of addictive substances”. Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships, and the ability to adapt to change and cope with adversity. Mental health is indispensable to personal well-being, family and interpersonal relationships, and contribution to community or society. There is increasing awareness and concern in the public health sector regarding the impact of stress, its prevention and treatment, and the need for enhanced coping skills. Stress may be experienced by any person and provides a clear demonstration of mind-body interaction.

Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental and public health problems. The nearest substance abuse facilities are more than 100 miles away.

HEALTH FACTORS BY COUNTY <sup>6</sup>	Clearwater	Idaho	Latah	Lewis	Nez Perce	ID State	Asotin	WA State	US Median
<b>Poor mental health days</b> Average number of mentally unhealthy days reported in past 30 days	3.4	3.5	3.5	3.8	3.6	3.7	3.5	3.4	3.7
<b>Excessive drinking</b> Binge plus heavy drinking	15%	17%	21%	14%	17%	18%	16%	20%	17%
<b>Mental Health providers</b> Ratio of population to mental health providers	780:1	900:1	670:1	960:1	470:1	460:1	520:1	380:1	1060:1
<b>Suicide Rates (per 100,000)</b> 5-Year Avg. Annual Rate 2010-2014	27.8	19.7	13.2	25.9	30.8	18.8	24.0 <sup>7</sup>	15.9	12.93

<sup>6</sup> [www.countyhealthrankings.org](http://www.countyhealthrankings.org)

<sup>7</sup> Washington State Department of Health, Suicide Deaths in Washington, Sabel 2013 (2008-2012)

# Education Concerns

## #1: OPPORTUNITIES FOR COLLEGE EDUCATION OR POST HIGH SCHOOL TRAINING

The top ranking education concerns, among all respondent groups, is opportunities for college education or post high school training. A projected 60 percent of new jobs in the next

EDUCATION CONCERNS BY RANK*	All Respondents	Respondents with Children	Income less than \$50,000 with Children
Opportunities for college education or post high school training	1	1	1

decade will require job seekers to have some college, training or certification beyond high school. Another 27 percent are projected to require a Bachelor's degree or higher. Idaho is in the bottom 10 states in the nation when it comes to people continuing education after high school and completing a four-year college degree. Additionally, Idaho is 46th (of 50 states) of high school graduates continuing on to college directly from high school, 47th in the nation in the percentage of 18-24 year olds enrolled in college, 46th in retention rates for first time college freshman returning for their second year, and 44th in graduation rates from college (BA degree in 6 years)<sup>8</sup>.

Compared to Idaho and Washington State averages, the service area is significantly under-educated beyond high school<sup>9</sup>. Except for Latah county, wherein the University of Idaho is located, every other county has more than 42% of the population with a high school diploma as the highest education level and for some areas, more than 50% of the population at most has a high school diploma

EDUCATION LEVEL (Population 25 years and over) <sup>9</sup>	Clearwater	Idaho	Latah	Lewis	Nez Perce	ID State	Asotin	WA State
% with NO High School Diploma	9.4%	6.6%	3.1%	7.1%	6.6%	6.4%	8.2%	5.5%
% High School Only	34%	37.3%	19.8%	34.3%	30.7	27.5%	30.5%	23.3%
% Some College	28.1%	25.5%	22.2%	31.2%	28.8%	26.9%	30.8%	24.6%
% Associate Degree	7.3%	7.3%	7.9%	7.9%	8.5%	9.2%	9.9%	9.8%
% Bachelor's Degree	12.1%	14.9%	27.8%	11.1%	16.7%	17.7%	12.9%	20.9%
% Graduate/ Professional Degree	4.9%	4.4%	17.9%	4.1%	6.7%	8.2%	5.3%	12%
% High school Graduate or Higher	86.4%	89.4%	95.5%	88.6%	91.3%	89.5%	89.4%	90.4%
% Bachelor's degree or higher	16.9%	19.3%	45.6%	15.2%	23.4%	25.9%	18.2%	32.9%

<sup>8</sup> National Information Center for Higher Education Policy Analysis

<sup>9</sup> US Census Bureau, American Community Survey 2011-2015

## #2: TUTORING AT RISK

The second highest ranking education concern, among all respondent groups, is tutoring for children/youth at risk of failure.

EDUCATION CONCERNS BY RANK	All Respondents	Respondents with Children	Income less than \$50,000 with Children
Tutoring for At-Risk Children/ Youth	2	2	2

“At Risk” implies children, youth and teens whom face greater barriers to being successful in life due to a lifecycle of poverty, exposure to drug and alcohol use, abuse and neglect and/or trauma or other adverse childhood experiences.

The Center for Disease Control and Kaiser Permanente Adverse Childhood Experiences (ACE) Study is one of the largest investigations of childhood abuse and neglect and later-life health and well-being. The ACE study has uncovered how Adverse Childhood Experiences are strongly tied to development of risk factors for disease and well-being throughout the life course. ACE definitions include abuse (emotional, physical, sexual), household challenges (violence, substance abuse, mental illness, divorce, criminal history), and neglect (emotional and physical).

As the number of ACEs increases so does the risk for the following\*

- Alcoholism and Alcohol Abuse
- Chronic Obstructive Pulmonary Disease
- Depression
- Fetal Death
- Health-related Quality of Life
- Illicit Drug Use
- Ischemic Heart Disease
- Liver Disease
- Poor Work Performance
- Financial Stress
- Risk for Intimate Partner Violence
- Multiple Sexual Partners
- Sexually Transmitted Diseases
- Smoking
- Suicide Attempts
- Unintended Pregnancies
- Early Initiation of Smoking
- Early Initiation of Sexual Activity
- Adolescent pregnancy
- Risk for Sexual Violence
- Poor Academic Achievement

\*This list is not exhaustive.

Below are selected county health ranking that may be indicative of an adverse childhood event.

COUNTY HEALTH RANKINGS	Clearwater	Idaho	Latah	Lewis	Nez Perce	ID State	Asotin	WA State
Children in poverty — Percent of children under age 18 in poverty	24%	23%	16%	26%	18%	19%	24%	18%
Violent Crime Rate — Violent crime rate per 100,000 population	201	108	120	139	151	210	192	301
Children in single-parent households — Percent of children that live in household headed by a single parent	24%	24%	19%	25%	36%	25%	37%	24%

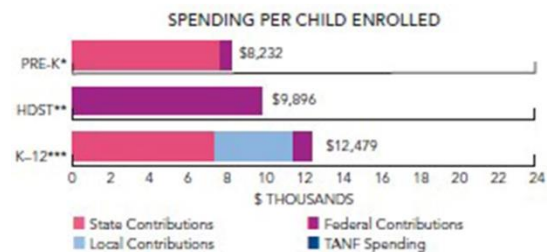
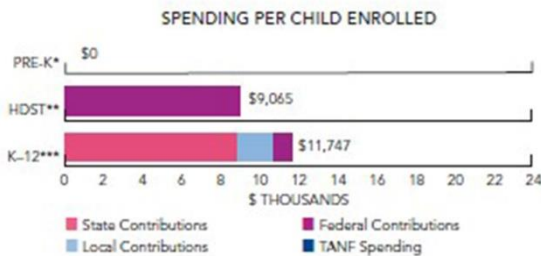
### #3 CHILD DAY CARE

The 3<sup>rd</sup> highest need regarding education concerns among respondents with children and those with children/ income less than \$50,000 was Child Day Care. This was the 4<sup>th</sup> highest need among all respondents.

EDUCATION CONCERNS BY RANK	All Respondents	Respondents with Children	Income less than \$50,000 with Children
Child Day Care	4	3	3

In the context of educational needs, many 3- and 4-year olds still lack access to high-quality preschool education despite modest gains in enrollment, quality, and funding, according to an annual report by the nonpartisan National Institute for Early Education Research (NIEER) at Rutgers University. While several states made significant progress through a concerted effort to increase enrollment and funding and improve quality, progress is slow and uneven nationally, and quality standards are particularly low in some of the nation’s largest states.

Idaho remains one of 8 states in the 2014-2015 year without a state-funded pre-K program. Washington created the Washington State Early Childhood Education and Assistance Program in 1985 with the intention of creating safe, healthy, and nurturing learning experiences for the state’s 3- and 4-year-old citizens.<sup>10</sup>



Within the region, the ALICE report<sup>11</sup> indicates that between 22-31% of total monthly expenses for four person households with 1 infant and 1 toddler is child care.

CHILD CARE COST FOR 1 INFANT & 1 PRESCHOOLER	Clearwater	Idaho	Latah	Lewis	Nez Perce	ID State	Asotin	WA State
Total Child Care Costs	\$807	\$807	\$939	\$939	\$939	\$902	\$1395	\$1223
% of Monthly Cost for Child Care	22%	22%	24%	24%	24%	23%	31%	28%

<sup>10</sup> The State of Preschool 2015.

<sup>11</sup> <http://www.unitedwayalice.org/reports.php>

# Income Concerns

## #1: HOUSING

The number 1 ranking income concern was housing for all respondents and for those with income under \$50,000.

Additionally, a Needs Assessment completed by Community Action Partnership (CAP)<sup>12</sup> in 2015 also states affordable housing as “one of the top needs identified by program participants and focus group respondents”.

INCOME CONCERNS BY RANK*	All Respondents	Income less than \$50,000
Housing	1	1

The CAP survey reported that on average, over 60% of survey respondents reported they are unable to find affordable housing to purchase, while 67% reported they are unable to find affordable housing to rent. Survey responses indicated that Asotin County is the most difficult county in which to find affordable housing.

A benchmark for affordable housing is 30% of income. Families who pay more than 30% of their income for housing are considered “cost burdened” and may have difficulty affording necessities such as food, clothing, transportation and medical bills. A family with one full-time worker earning the minimum wage cannot afford the local fair-market rent for a 2-bedroom apartment anywhere in the U.S. (U.S. Department of Housing and Urban Development). The *2015 Corporation for Enterprise Development (CFED) Scorecard* for Idaho reports that 47.7% of renters are “housing cost burdened”.

**ALICE<sup>13</sup>**, an acronym for **A**sset **L**imited, **I**ncome **C**onstrained, **E**mployed, are households that earn more than the U.S. poverty level, but less than the basic cost of living for the county. The average annual Household Survival Budget for a family of four ranges from \$46,176 in Idaho to \$52,152 in Washington, double the U.S. poverty rate of \$23,550. The number of poverty and ALICE households combined equals the total population struggling to afford basic needs. **In Idaho and Washington one in three households face financial hardships as ALICE households.** Part of the reason these numbers are so high is that jobs are not located near housing that is affordable and the cost of housing has gone up 11-17% between 2007-2013.

A.L.I.C.E. Factors BY COUNTY*	Clearwater	Idaho	Latah	Lewis	Nez Perce	ID State	Asotin	WA State
% of Population at Poverty and ALICE	40%	40%	43%	48%	33%	37%	37%	32%
% of Monthly Expenses for Housing (1 Adult)	35% \$501	33% \$475	35% \$513	35% \$506	31% \$402	34% \$470	31% \$402	37% \$528
% of Monthly Expenses for Housing (2 Adults, 2 Children)	17% \$626	17% \$626	17% \$661	16% \$626	17% \$657	17% \$656	15% \$657	19% \$805

<sup>12</sup> Community Action Partnership 2015 Community Needs Assessment

<sup>13</sup> <http://www.unitedwayalice.org/reports.php>

## #2: FOOD ASSISTANCE

Food Assistance was the 2<sup>nd</sup> highest ranking income concern among respondents with income less than \$50,000, and the 4<sup>th</sup> highest need among all respondents. Additionally, access to health food was indicated under Health Concerns as a top five need by all respondents and those without health insurance.

<b>INCOME CONCERNS BY RANK</b>	<b>All Respondents</b>	<b>Income less than \$50,000</b>
<b>Food Assistance</b>	4	2
<b>HEALTH CONCERNS BY RANK</b>	<b>All Respondents</b>	<b>No Health Insurance</b>
<b>Access to Healthy Food</b>	5	4

Access to an adequate quantity of food and more specifically healthy food plays a significant role in a person's overall health. Diet is a major contributing factor to body weight. Fruits and vegetables contain essential vitamins, minerals, and fiber that may provide protection from chronic diseases. Compared with people who consume a diet with only small amounts of fruits and vegetables, those who eat more generous amounts are likely to have reduced risk of chronic diseases, including stroke and perhaps other cardiovascular diseases, and certain cancers.

Additionally, when children are hungry it can have adverse effects on learning and education. Throughout the region the percent of free and reduced lunch varies from county to county and more so from school to school. As an example, Grantham Elementary in Asotin County has nearly 90% of students on free or reduced price lunches<sup>14</sup>. The Supplemental Nutrition Assistance Program (SNAP) is a helpful resource for those receiving it, however the CAP survey<sup>15</sup> did note that some eligible people do not participate in the program because they feel the small amount is not worth it or there is too much pride to apply.

<sup>15</sup>	<b>Clearwater</b>	<b>Idaho</b>	<b>Latah</b>	<b>Lewis</b>	<b>Nez Perce</b>	<b>ID State</b>	<b>Asotin</b>	<b>WA State</b>
<b>Households Receiving SNAP Total</b>	409	700	1,458	193	2,058	74,696	1,761	380,611
<b>% Households Receiving SNAP</b>	11.2%	10.6%	9.7%	11.9%	12.8%	12.7%	18.9%	14.3%
<b>Number of Free/ Reduced Price Lunch Eligible</b>	534	825	1,864	560	2,423	138,886	1,871	489,870
<b>% of Free/ Reduced Price Lunch</b>	53.2%	47.1%	36.3%	68.1%	42.57%	47.4%	56.1%	46.3%

<sup>14</sup> (<http://elementaryschools.org/directory/wa/cities/clarkston/grantham-elementary>)

<sup>15</sup> Community Action Partnership 2013-2014 Community Needs Assessment  
US Census Bureau, American Community Survey 2011-2015

### #3: MANAGING FINANCES & EMPLOYMENT ASSISTANCE

The third highest income concern among respondents with incomes less than \$50,000, those households considered living at the ALICE<sup>16</sup> level and for all respondents was Support to Better Manage Finances. Closely tied to managing finances is employment, which is noted as the fourth highest need among respondents with income less than \$50,000.

INCOME CONCERNS BY RANK*	All Respondents	Income less than \$50,000
Manage Finances	3	3
Employment Assistance		4

When households cannot make ends meet, they are forced to make difficult choices such as forgoing health care, accredited child care, healthy foods or car insurance. Effective financial management reduces mental stress, crises, risk taking, utilization of costly alternative financial systems to bridge gaps, hunger, homelessness and illness. Within the community as a whole, effective financial management creates a more stable workforce and reduces costs for homeless shelters, foster care homes and emergency health care.

Financial management is especially important when the bare minimum budget does not allow for savings, leaving a household vulnerable to unexpected expenses. Below is an example of the Household Survival Budget for Nez Perce County, as reported by the ALICE report. The budget calculates the actual costs of basic necessities (housing, child care, food, health care and transportation). This bare-minimum budget does not allow for savings, leaving a household vulnerable to unexpected expenses. Affording only a very modest living in each community, this budget is still significantly more than the U.S. poverty level of \$11,490 for a single adult and \$23,550 for a family of four.

HOUSEHOLD SURVIVAL BUDGET	Nez Perce County		Asotin County	
	Single Adult	2 Adults, 1 Infant, 1 Preschool	Single Adult	2 Adults, 1 Infant, 1 Preschool
Housing	\$402	\$657	\$402	\$657
Child Care	\$-	\$939	\$-	\$1,395
Food	\$191	\$579	\$191	\$579
Transportation	\$350	\$700	\$350	\$700
Health Care	\$119	\$474	\$119	\$474
Misc.	\$118	\$354	\$118	\$403
Taxes	\$119	\$192	\$115	\$221
Monthly Total	\$1,299	\$3,895	\$1,295	\$4,429
ANNUAL TOTAL	\$15,588	\$46,740	\$15,540	\$53,148
Hourly Wage	\$7.79	\$23.37	\$7.77	\$26.57

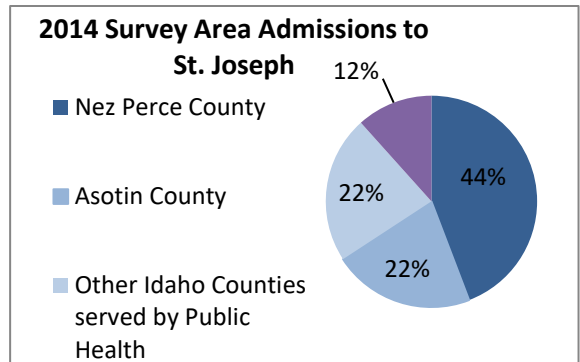
<sup>16</sup> <http://www.unitedwayalice.org/reports.php>

# Communities Served

The Twin County United Way defines its service area as Asotin County, WA and Nez Perce County, ID. Public Health – Idaho North Central District is funded to provide services to the five North Central Idaho counties. Clearwater, Idaho, Latah, Lewis and Nez Perce County.

St. Joseph Regional Medical Center, located in Lewiston, ID defines its primary service area as Lewiston, ID, Clarkston, WA, and a number of other communities throughout the region and included in this needs assessment. Its catchment area can extend further into Washington and

northeastern Oregon for certain services. As a non-profit medical center, St. Joseph's patient population is not dependent on insurance coverage or type of coverage. For the purposes of the CHNA the selected six counties surveyed accounted for 88% of all patient admissions to St. Joseph in Fiscal Year 2014 (07/01/14-06/30/15).



## DEMOGRAPHICS

People QuickFacts <sup>17</sup>	Asotin County, Washington	Clearwater County, Idaho	Idaho County, Idaho	Latah County, Idaho	Lewis County, Idaho	Nez Perce County, Idaho
Population estimates, July 1, 2015	22,105	8,496	16,272	38,778	3,789	40,048
Population estimates base, April 1, 2010	21,623	8,761	16,267	37,244	3,821	39,265
Population, percent change - April 1, 2010 (estimates base) to July 1, 2015	2.20%	-3.00%	Z	4.10%	-0.80%	2.00%
Population, Census, April 1, 2010	21,623	8,761	16,267	37,244	3,821	39,265
Persons under 5 years, percent, July 1, 2014	5.40%	4.00%	5.20%	5.80%	5.30%	6.20%
Persons under 18 years, percent, July 1, 2014	21.00%	16.30%	20.00%	18.50%	23.00%	21.70%
Persons 65 years and over, percent, July 1, 2014	20.90%	25.40%	24.00%	11.80%	24.10%	18.90%
Female persons, percent, July 1, 2014	51.80%	45.20%	47.80%	48.50%	49.80%	50.50%
White alone, percent, July 1, 2014,	94.40%	94.40%	94%	93.30%	90%	90.10%
Black or African American alone, percent, July 1, 2014	0.60%	0.50%	0.40%	1.10%	0.40%	0.50%
American Indian and Alaska Native alone, percent, July 1, 2014,	1.60%	2.20%	3%	0.90%	6%	5.80%
Asian alone, percent, July 1, 2014,	0.90%	0.60%	0.50%	1.90%	0.5	0.9
Native Hawaiian and Other Pacific Islander alone, percent, July 1, 2014	0.20%	0.10%	0.10%	0.20%	0.20%	0.10%
Two or More Races, percent, July 1, 2014,	2.40%	2.10%	2.10%	2.70%	2.80%	2.50%
Hispanic or Latino, percent, July 1, 2014	3.60%	3.60%	3.10%	4.10%	4%	3.70%
White alone, not Hispanic or Latino, percent, July 1, 2014,	91.30%	91.30%	91.50%	89.80%	86.80%	87.40%

<sup>17</sup> www.census.gov



People QuickFacts <sup>18</sup>	Asotin County, Washington	Clearwater County, Idaho	Idaho County, Idaho	Latah County, Idaho	Lewis County, Idaho	Nez Perce County, Idaho
Housing units, July 1, 2014, (V2014)	9,843	4,479	8,648	16,330	1,868	17,417
Owner-occupied housing unit rate, 2010-2014	67.10%	78.60%	79.80%	54.50%	73.30%	69.30%
Median value of owner-occupied housing units, 2010-2014	\$170,000	\$131,200	\$151,600	\$189,100	\$114,800	\$166,000
Median selected monthly owner costs -with a mortgage, 2010-2014	\$1,217	\$1,132	\$980	\$1,263	\$943	\$1,191
Median selected monthly owner costs -without a mortgage, 2010-2014	\$371	\$341	\$310	\$410	\$351	\$355
Median gross rent, 2010-2014	\$681	\$629	\$602	\$655	\$573	\$667
Building permits, 2014	35	19	1	136	10	55
<b>Households and Population</b>						
Households, 2010-2014	9,405	3,560	6,523	15,069	1,657	16,159
Persons per household, 2010-2014	2.3	2.14	2.41	2.31	2.26	2.39
Living in same house 1 year ago, percent of persons age 1 year+, 2010-2014	82.00%	84.20%	85.30%	70.60%	86.70%	84.90%
Language other than English spoken at home, percent of persons age 5 years+, 2010-2014	3.60%	5.10%	2.10%	5.60%	3.90%	4.10%
High school graduate or higher, percent of persons age 25 years+, 2010-2014	88.70%	85.70%	89.80%	95.80%	88.50%	90.50%
Bachelor's degree or higher, percent of persons age 25 years+, 2010-2014	18.50%	15.80%	16.80%	44.00%	16.50%	22.10%
Persons without health insurance, under age 65 years, percent	14.70%	20%	22.30%	16.10%	22.60%	15.50%
<b>Transportation and Income</b>						
Mean travel time to work (minutes), workers age 16 years+, 2010-2014	15.4	24.8	18.3	18	19.9	16.5
Median household income (in 2014 dollars), 2010-2014	\$42,689	\$39,750	\$38,320	\$41,944	\$36,159	\$46,608
Per capita income in past 12 months (in 2014 dollars), 2010-2014	\$24,836	\$20,154	\$19,527	\$22,575	\$21,542	\$24,570
Persons in poverty, percent	16.30%	16.60%	16.30%	19.90%	13.70%	14.60%
<b>Geography</b>						
Population per square mile, 2010	34	3.6	1.9	34.6	8	46.3
Land area in square miles, 2010	636.21	2,457.27	8,477.35	1,076	478.8	848.09

<sup>18</sup> www.census.gov

# Process and Methodology

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The Community Health Needs Assessment is based on both primary and secondary data sources. The process of collecting this data included a publicly available survey, community meetings, an examination of existing health data, and input from health professionals within our communities.

The top needs identified in this report are based on the facts (demographics and secondary data) and circumstances (survey results).

To ensure that the implementation strategies specifically meet the true needs of the most vulnerable in the community, the assessment process involved the community at every phase, including planning, data collection, evaluation, identification of health issues and community strengths and development of strategies to address identified problems.

## Survey

A Community Health Needs Assessment survey was used to collect primary quantitative data. The survey was developed and disseminated to provide insight into the issues of importance of the community. Paper copies were widely distributed through partner agencies and an on-line survey link was advertised through local and social media. A total of 1987 surveys were completed by the broad community.

## Secondary Data

Secondary data was gathered from a wide range of sources that are cited throughout the full document.

## Persons Representing the Broad Interest of the Community

Given the vital importance of community input in understanding the health, education and income needs of a community several methods were used to gather primary data. Representatives from the Twin County United Way, St. Joseph Regional Medical Center and the Public Health – Idaho North Central District held and attended numerous community meetings to collect information from community leaders, professionals and residents who have firsthand knowledge of the needs of the community.



# Community Feedback and Attendees

Below summarizes the solicited input gathered from the community meetings, which included representatives from Public Health - Idaho North Central District, the Snake River Community Clinic (a free health clinic for the under/un-insured patient population), County Commissioners, Senior services, including home health agencies, assisted living facilities and skilled nursing facilities, business owners, school districts, health care providers and nonprofit and community based organizations.

Community Meeting Input	
Strengths and Opportunities	Weaknesses and Challenges
1. A community that Cares	1. Isolation in Seniors
2. Key information and resources for the public	2. Drug issues are generational
3. Snake River Community Clinic	3. Caregivers need support
4. National Night Out	4. Need to document Transportation options
5. ACE's training	5. No evening childcare to work around jobs
6. Partnerships	6. Hopelessness
7. Health Care providers	7. Generational low education
8. Getting people to events	8. Lack of connections
9. Increase opportunities for multiple events	9. Need to increase sharing of resources
10. Job force training	10. Stigmas around Mental/Behavioral Health
11. Partnerships	11. Access to Healthcare
12. ACE's training	12. Lack of Dental services
13. Idaho expand Medicaid – grass roots	13. Lack of Mental Health providers
14. Fund SRCC 5 days a week	14. Provider Shortage all areas
15. Communication Network (Partnerships)	15. Root Problems Mental Health/Behavioral Health
16. Inventory of Resources (YWCA May 2016)	16. Affordable Housing shortage- low income
17. Early Childhood Education Ages 0-5	17. Working Poor – transportation, food issues
	18. Child Abuse
	19. Suicide
	20. Homeless – Unemployment
	21. Access to food/hunger- Children, Seniors

## Twin County United Way Board Meeting Individual/ Community Leader Input

- 1. What is the biggest health issue in our community?** Obesity, access to health care, prevention, mental, health literacy, diabetes, lack of low income providers in either NP county or Asotin.
- 2. What do you think is causing these issues?** Food, poor nutritional choices, income, access is also affected by income, community funding for health districts. Hospitals and doctors are seeing sicker patients because people are waiting to be treated because they cannot afford health care. Idaho's refusal to expand Medicare.
- 3. What are some challenges or barriers that communities face on these issues?** Lack of resources.
- 4. Are there opportunities to improve and where are they?** Exercise, partnerships, education, program development, sometimes we think people know what we know. Education is key.

## COMMUNITY INPUT

### Community Needs Assessment Kick Off, Non-Profit Community Agencies, 26-Jan-2016

Aging & Long Term Care (WA)	Habitat for Humanity	Lewiston City Library	Twin County United Way
Boys and Girls Club of the LC Valley	Idaho Foodbank	Lewiston School District	Valley Meals on Wheels
CASA	Idaho Legal Aid	Lewis-Clark Service Corps	Valley Medical Center
City of Lewiston Fire Department	Idaho Stars (U of I)	Public Health - Idaho North Central District	WA-ID Volunteer Center
Clarkston Police Department	Interlink Volunteers	Quality Behavioral Health	Walla Walla Community College
Clarkston School District: EPIC Program	Lewis-Clark Early Childhood Program	Snake River Community Clinic	Willow Center
Community Action Partnership	Lewis-Clark State College	St. Joseph Regional Medical Center	YoungLife
Family Promise	Lewis-Clark Valley Young Life	Tri-State Hospital	YWCA

### North Central Idaho Board of Health, Broad Community, 25-Feb-2016

Don Davis, Chair Latah County Commissioner	John Allen Clearwater County Commissioner	Douglas Zenner Nez Perce County Commissioner	Jerry Zumalt Disaster Management Coordinator Idaho County
Dave McGraw Latah County Commissioner	Shirley Greene Representative Nez Perce County	Glen Jefferson, M.D. Physician Representative Nez Perce County	Carol Moehrle District Director

### Care Coalition North Central Idaho, Healthcare & Seniors, 17-Feb-2016

Clearwater Health & Rehab	Lewis-Clark State College	Prestige Care Center	Royal Plaza Assisted Living & Care Center
Clearwater Valley Hospital & Clinics	Norco	Public Health - Idaho North Central District	St. Joseph Regional Medical Center
Elite Home Health & Hospice	North Idaho Acute Care Hospital	Pullman Regional Hospital	Syringa Hospital & Clinics
Kindred Care (Skilled Nursing)	Orchards Rehab & Care Center	Rehab Hospital North	Tri-State Memorial Hospital

### Twin County United Way Board of Directors, Broad Community, 18-Feb-2016

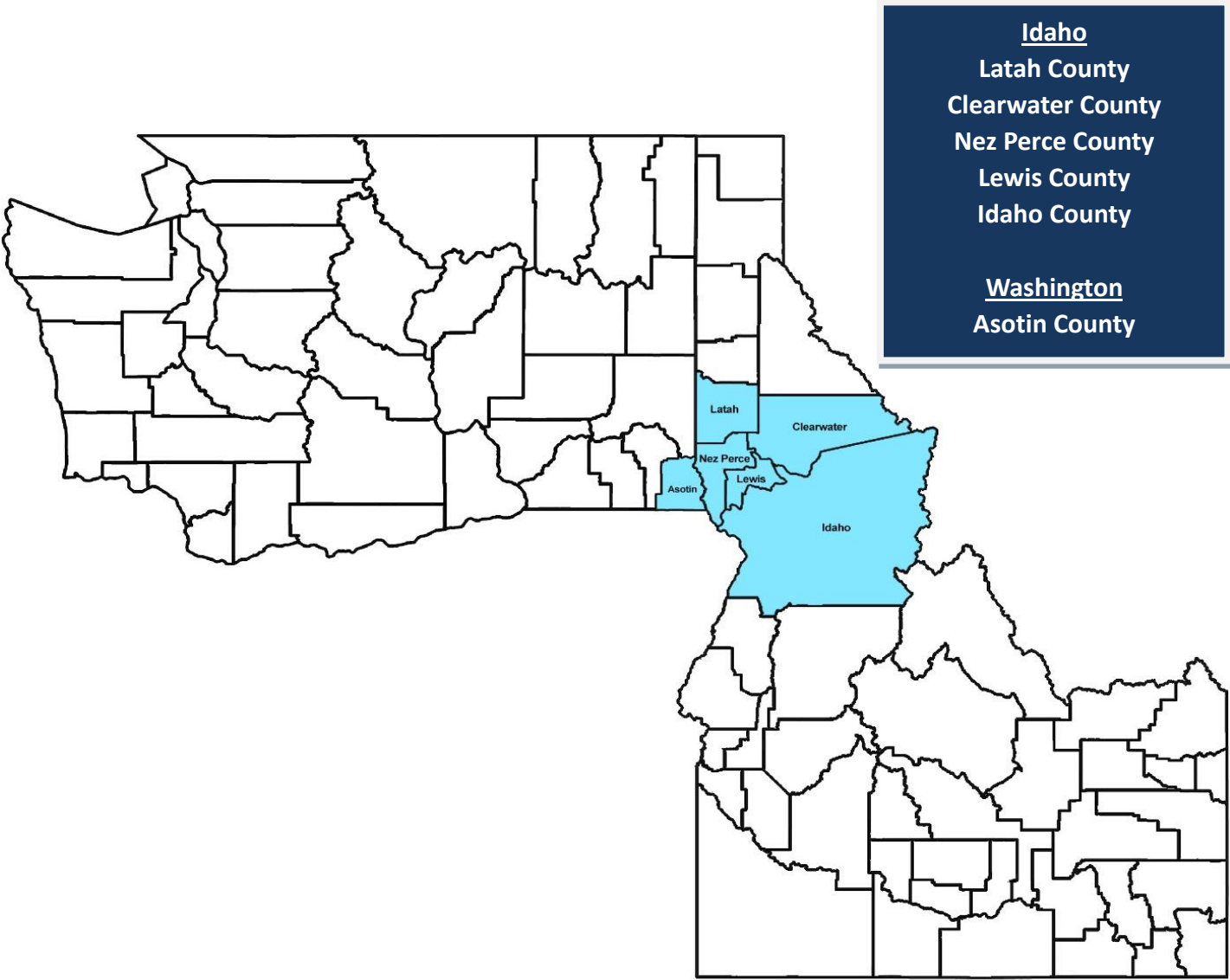
Debra Ausman, Stonebraker McQuary Agency	Susan Colburn, St. Joseph Regional Medical Center	Kim Matson, State of Idaho Department of Health & Welfare	Bert Sahlberg, Lewis-Clark State College
Nick Bacon Community Volunteer	Robert Donaldson, Lewiston School District	Mike Moser, P1FCU	Scott Sheldon, Dwyer Chiropractic Center
Scott Baldwin, Stifel	Janis Forsmann, Clearwater Paper	Travis Myklebust, Lewiston Fire Department	Tim Winter, Clarkston School District
Tim Barker, City of Lewiston	Barb Fry, Nez Perce County Treasurer	Crystal Nelson, Wells Fargo Home Mortgage	Cathy Jo Witters, Stonebraker McQuary Agency
Mike Bly, Inland Cellular	Lisa Huddleston, Clements, Brown & McNichols	Jessanne Price, Public Consulting Group	Samantha Skinner, Executive Director
Kim Casey, Avista	Michelle King, WideOrbit	Steven Reed, Northwest Media	Charity Rapiet, Clearwater Paper Corporation
Beverly Kloepfer, Lewis-Clark State College	Rhonda Mason, Tri-State Memorial Hospital		

## Community Resource List

Resource	Focus Area
Southeast Washington Aging & Long Term Care	Income
Area Agency on Aging	Health/Income
Asotin County Foodbank	Health/Income
Beautiful Downtown Lewiston	Income
2 <sup>nd</sup> Judicial District CASA	Income
City of Lewiston Fire Department	Health
City of Lewiston	Health/Income/Education
Clearwater Medical Clinic	Health
Clearwater Paper	Income
Community Action Partnership	Health/Income/Education
Families Together	Education
Family Promise	Income
Habitat for Humanity	Income
Homes of Hope	Income
Idaho Department of Labor	Education
Idaho Digital Learning	Education
Idaho Foodbank	Health/Income
Interlink	Health/Income
Lewis Clark Valley Chamber of Commerce	Health/Income/Education
Lewis-Clark CHAS Clinic	Health
Lewis-Clark Early Childhood Program	Education
Lewis-Clark State College	Health/Education
Lewiston City Library	Education
Lewiston School District	Health/Income/Education
Nimiipuu Health	Health
Public Health - Idaho North Central District	Health/Income/Education
Quality Behavioral Health	Health
Snake River Community Clinic	Health
St. Joseph Regional Medical Center	Health/Education
Tri-State Hospital	Health
Twin County United Way	Health/Income/Education
UI STEM Access Upward Bound	Education
Valley Meals on Wheels	Health/Income
Valley Medical Center	Health
WA-ID Volunteer Center	Education
Walla Walla Community College	Health/Income/Education
Willow Center for Grieving Children	Health
YWCA	Health/Income

# County Profile

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# Clearwater County

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## COUNTY PROFILE

Clearwater County is located in the magnificent North Central region of Idaho. From steep river canyons to high mountain vistas, it has a wide variety of terrain and outdoor activities for both residents and visitors.

The county is home to the North Fork of the Clearwater River and a small portion of the South Fork as well as the main Clearwater. Also in the county is the Dworshak Reservoir which is 54 miles long with 19,000 surface acres of water. Boating and fishing spots are popular with visitors and residents. Additionally, Dworshak State Park, Dworshak National Fish Hatchery and the Dworshak Dam, which is the third highest dam in the U.S. and the tallest straight axis concrete dam in North America.

The scenery is breathtaking, with numerous hills, mountains, forests, valleys and rivers to delight any photographer. There are plenty of historic sites to experience, including the site where the starving Lewis and Clark met the Nez Perce Indians on the Camas Prairie after crossing the Bitterroot Mountains. In addition, the oldest town in Idaho, Pierce, which is a gold rush town and home to the oldest courthouse in the state.

For the outdoor enthusiasts, the area offers big game hunting, fishing, hiking, ATV trails, downhill and cross-country skiing, snowmobiling and camping. The modest Bald Mountain ski area is located between Orofino and Pierce.

## DEMOGRAPHICS

Based on the 2010 census, the population of Clearwater County is 8,761. According to the census, 10.3% of the population of Clearwater County lives below poverty level.



## ASSETS

Clearwater County has many strengths and assets, which promote healthy lifestyles. Outdoor recreation is easily accessible throughout the county. Numerous trails provide seasonal recreational opportunities to residents.

- Clearwater Valley Hospital & Clinics
- State Hospital North
- Telehealth
- University of Idaho Extension Program
- Lewis Clark State College Outreach Center
- Law Enforcement
- Fire/EMS
- Outdoor Recreation
- Dworshak Dam
- Spiritual Health
- Local Media
- Libraries
- Safe place for kids
- Community Activities
- Farmer's Market
- Fishing/Hunting
- Parks/Reservoirs
- Historic Sites/Museums
- Arts/Theatre
- Agriculture
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**“54 miles of outdoor possibilities!”**

# Idaho County

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## COUNTY PROFILE

One of the country's largest counties is Idaho County. It is bigger than the state of New Jersey yet boasts one of the smallest population stretches from Oregon to Montana with more than four million trees growing from border to border.

There are 4,431,720 acres of National Forest land within the county; more than any county outside of Alaska. National Forests within the county are Nez Perce National Forest, Clearwater National Forest, Payette National Forest, Bitterroot National Forest, Salmon National Forest, and Wallowa National Forest. The Nez Perce National Forest is located entirely within the county's borders and is the largest National Forest lying within a single county.

Idaho County is one of the few counties in the United States with two time zones, divided by the Salmon River. Most of the county is in the Pacific Time zone, but those areas south of the Salmon River, including Riggins, but not the towns of Burgdorf and Warren, are in the Mountain time zone.

## DEMOGRAPHICS

Based on the 2010 census, the population of Idaho County is 16,267. With 8,477.35 square miles, Idaho County only has 1.9 persons per square mile. According to the census, 17.1% of the population of Idaho County lives below poverty level.



## ASSETS

Idaho County has many strengths and assets, which promote healthy lifestyles. Outdoor recreation is available throughout the county. Numerous trails and waterways provide healthy recreation to residents throughout the winter and summer months.

- University of Idaho Extension Program
- Lewis Clark State College Outreach Center
- St. Mary's Hospital & Clinics
- Syringa General Hospital & Clinics
- Telehealth
- Clearwater Valley Clinics
- Northwest Passage Scenic Byway
- Law Enforcement
- Fire/EMS
- Outdoor Recreation
- Spiritual Health
- Local Media
- Libraries
- Safe place for kids
- Community Activities
- Farmer's Market
- Fishing/Hunting
- Parks/Reservoirs
- Historic Sites/Museums
- Arts/Theatre
- Agriculture

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**“Come for the scenery and  
stay for the lifestyle.”**



# Latah County

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## COUNTY PROFILE

Latah County is located in the northern Idaho panhandle; to the immediate west lies Whitman County, Washington. These counties are referred to as “the Palouse,” which produces a large share of the wheat, lentils, peas, oats and barley in the United States.

Latah County is mostly rural with striking contrasts between the rolling hills of the Palouse region and thick forests of pine, fir, and cedar. The northern part of the county boasted the largest stand of white pine in the nation, attracting the Potlatch Lumber Company.

Home to the University of Idaho and close neighbors with Washington State University, Latah County hosts a surprising array of fine dining spots, wineries, art galleries and performance art venues.

The Lionel Hampton Jazz Festival presents world-class musicians to hundreds of visitors each February and a network of locally supplied chefs has resulted in menus that yield a true taste of the region.

Outdoors, visitors will find a number of opportunities for bicycling, mountain biking, hiking, golf and wildlife viewing.

## DEMOGRAPHICS

Based on the 2010 census, the population of Latah County was 37,244. According to the census, 21.3% of the population of Latah County is living below poverty level. Within Public Health District 2, Latah County has the highest proportion, 43.7% of residents with a Bachelor’s Degree or higher.



## ASSETS

Latah County has many strengths and assets, which promote healthy lifestyles. The University of Idaho provides great education, athletic options, as well as art and music programs. As a young town with a young population, residents are very active. Trails and bike paths are available for physical activity and community activities.

- University of Idaho
- University of Idaho Extension Program
- Gritman Medical Center
- Botanical Gardens
- Appaloosa Museum & Heritage Center Foundation
- White Pine Scenic Byway
- Law Enforcement
- Fire/EMS
- Outdoor Recreation
- Spiritual Health
- Local Media
- Libraries
- Safe place for kids
- Community Activities
- Farmer’s Market
- Fishing/Hunting
- Parks/Reservoirs
- Historic Sites/Museums
- Arts/Theatre
- Community Health Association of Spokane

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**“Latah County is unique,  
there’s something for  
everyone.”**

# Lewis County, ID

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## COUNTY PROFILE

Home to wide-open acres of fragrant farm fields, friendly faces and small towns full of history, Lewis County is a perfect destination choice for vacationers who enjoy soft adventures and history.

Winchester Lake State Park surrounds a 103-acre lake nestled in a forested area at the foot of the Craig Mountains. The park has a modern campground. Picnicking and hiking are popular summer activities. In the winter, the park offers cross-country skiing, ice skating and ice fishing. There are healthy stands of Ponderosa Pine and Douglas Fir. White-tailed Deer, raccoon, muskrat and the Painted Turtle roam the area.

Off the trails and onto the highway, the Camas Prairie Driving Tour explores the history and sites of the region on a scenic tour traveled by automobile, motorcycle and cycling enthusiasts. Late spring and early summer are especially stunning; the Camas is in full bloom and turns the landscape into a sea of vibrant blue.

## DEMOGRAPHICS

Based on the 2010 census, the population of Lewis County was 3,821. According to the census, 18.2% of the population of Lewis County is below poverty level. Within Health District 2, Lewis County at 478.8 square miles and only 8 persons per square mile is the smallest county.



## ASSETS

Lewis County has many strengths and assets, which promote healthy lifestyles. Residents enjoy the feel of small towns with easy access to the outdoors. This small county boasts an array of health services, including clinic and pharmacy, chiropractic, physical therapy, and dental services and Nimiipuu Health.

- St. Mary's Clinics
- Nimiipuu Health Satellite Clinic
- Wolf Education & Resource Center
- Law Enforcement
- Fire/EMS
- Outdoor Recreation
- Spiritual Health
- Local Media
- Libraries
- Safe place for kids
- Community Activities
- Farmer's Market
- Fishing/Hunting
- Parks/Reservoirs
- Historic Sites/Museums
- Arts/Theatre
- Agriculture

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**“A destination for the whole family. Come explore!”**

# Nez Perce County, ID

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## COUNTY PROFILE

Nez Perce County, located in North Central Idaho, is noted for its forests, agricultural production, scenic beauty and unusual concentration of higher education institutions in a rural area.

Dominated by the Snake River, Clearwater River and opening on to the northern gateway to Hells Canyon, this region is a perfectly balanced destination choice for those who enjoy outdoor adventure as much as leisure experiences.

Hells Gate State Park is the gateway to both Idaho's Lewis and Clark country and to Hells Canyon, the deepest river gorge in North America.

Consistently ranked as one of the top ten destinations for outdoor sportsmen by Outdoor Life, and often in the top three, the region is paradise for sportsmen. The waters hold bass and trout but are famous for legendary steelhead, Chinook salmon and massive white sturgeon while the hills are home to deer, bear, bighorn sheep, elk, pheasant, chukar and other game.

Nez Perce County lifestyles are a mixture of outdoor recreational leisure, community events, arts and festivals. It is bordered by national forests, wilderness areas, pristine lakes, Whitewater Rivers, and rugged canyons. In less than an hour's drive, there is access to fishing, camping, hunting, skiing or sailing.

## DEMOGRAPHICS

Based on the 2010 census, the population of Nez Perce County was 39,265. According to the census, 11.3% of the population of Nez Perce County is living below poverty level. Within Health District 2, Nez Perce County, at 46.3, has the highest number of people per square mile.

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**“I love living in Nez Perce County. All the big city amenities are near, but a small town feel.”**



## ASSETS

Nez Perce County has many strengths and assets, which promote healthy lifestyles. An abundance of activities, from golf to trails and civic groups, all help build a strong sense of community pride. With an array of health services, including clinics, pharmacies, dentists and St. Joseph Regional Medical Center, residents do not have to travel far for many of their medical needs.

- Lewis Clark State College
- University of Idaho Extension
- University of Idaho Reservation Extension
- St. Joseph Regional Medical Center
- Nimiipuu Health Center
- Snake River Community Clinic
- Idaho Housing Authority
- YWCA
- Idaho Food Bank
- Boys & Girls Clubs of America
- Fire/EMS/Law Enforcement
- Community Health Association of Spokane
- Spiritual Health
- Local Media
- Libraries
- Safe place for kids
- Community Activities
- Farmer's Market
- Fishing/Hunting
- Parks/Reservoirs
- Historic Sites/Museums/Arts/Theatre
- Agriculture

# Asotin County, WA

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## COUNTY PROFILE

Asotin County is the fifth-smallest county in Washington by area. It is part of the Palouse, a wide and rolling prairie-like region in the middle Columbia basin.

Asotin County is located at the confluence of the Snake and Clearwater rivers. The river system is home to a thriving aluminum jet boat manufacturing industry and provides the wood processing and other industrial users direct barge transportation to the West Coast.

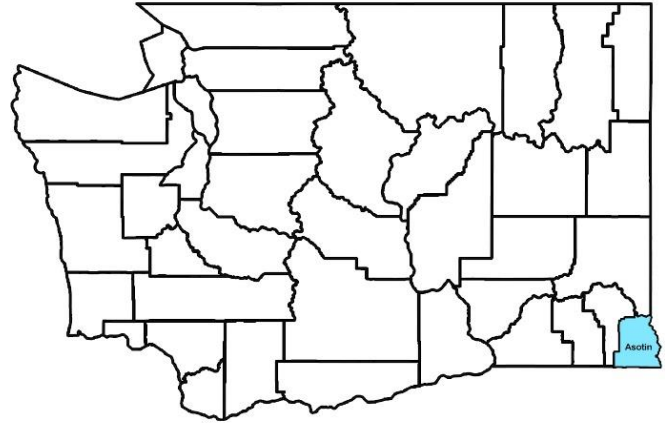
There are three ports within the immediate area and adequate industrial land for business growth and expansion. The highway grid supports access to Idaho and the southern tier of Washington, as well as the northern tier of Oregon, with connections to north-south and east-west interstates.

The warm climate, excellent health care facilities, year-round golfing and other recreational opportunities provide exceptional amenities for those looking for an active community for retirement.

The region boasts a safe, rural, educated lifestyle, attracting businesses with its small town hospitality and impressing them with its commitment to area commerce.

## DEMOGRAPHICS

Based on the 2010 census, the population of Asotin County is 21,623. With 641 square miles, Asotin County only has 34 persons per square mile. According to the census, 15.7% of the population of Asotin County lives below poverty level.



## ASSETS

Asotin County has many strengths and assets, which promote healthy lifestyles. An abundance of activities, from golf to trails and civic groups, all help build a strong sense of community pride. With an array of health services, including clinics, pharmacies, dentists and Tri-State Memorial Hospital, residents do not have to travel far for many of their medical needs.

- Walla Walla Community College
- Tri-State Memorial Hospital
- Valley Medical Center
- Boys & Girls Clubs of America
- Asotin County Food Bank
- Port of Clarkston
- Port of Wilma
- Northwest Passage Scenic Byway
- Law Enforcement
- Fire/EMS
- Outdoor Recreation
- Spiritual Health
- Local Media
- Fishing/Hunting
- Parks/Reservoirs
- Historic Sites/Museums
- Arts/Theatre
- Agriculture

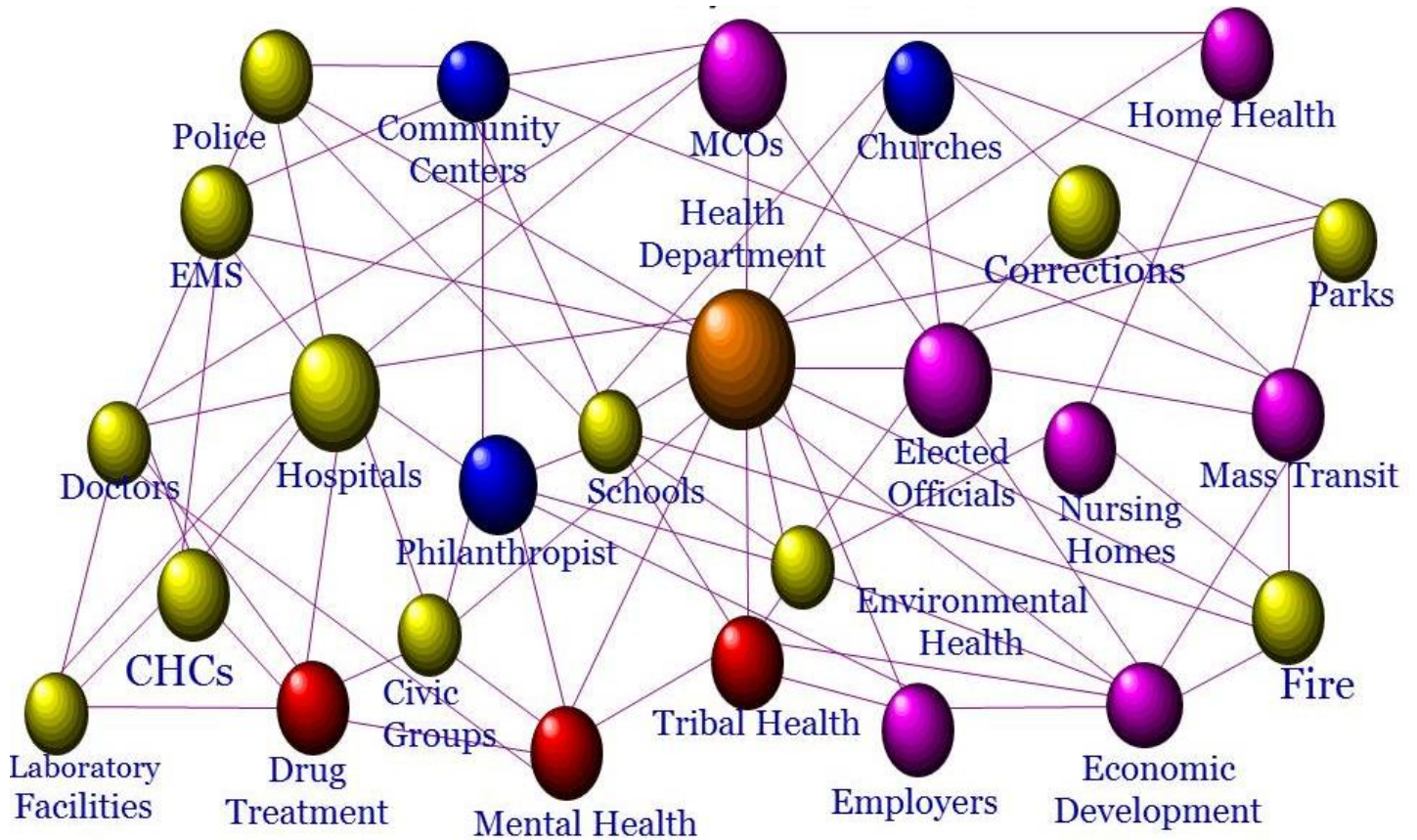
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**“The gateway to Hells Canyon.”**

# Idaho's Local Public Health System

What defines a public health system? In Idaho, the local public health system is comprised of many organizations (public, private and voluntary entities) and individuals that engage in activities that contribute to the delivery of the ten essential public health services. It takes more than healthcare providers and public health agencies to address the social, economic, environmental and individual factors which influence health.

## PUBLIC HEALTH SYSTEM/PARTNERS



# Idaho’s Public Health Districts

Established in 1970 under Chapter 4, Title 39, Idaho Code, Idaho’s Public Health Districts were created by the Legislature to ensure that preventive public health services are available to all citizens of the state — no matter how small or large their county population. It was the intent of the Legislature in creating the Public Health Districts that public health services be locally controlled and governed. Idaho’s 44 counties are grouped into seven Public Health Districts and are governed by policy boards appointed by the county commissioners in those districts. The district partnership has served Idaho well since 1971 and has received national attention due to the way it provides decentralized public health services designed to meet the unique needs of the residents of each district. Each Board of Health adopts a budget and defines the public health services to be offered in its district based on the particular needs of the local populations served. Idaho Public Health Districts are not state agencies or part of any state department; they are recognized much the same as other single purpose districts and are accountable to their local Boards of Health.

Although services vary depending on local need, all seven Public Health Districts provide the essential services that assure healthy communities.

These may include:

- Monitoring health status and understanding health issues
- Protecting people from health problems and health hazards
- Giving people information they need to make healthy choices
- Engaging the community to identify and solve health problems
- Developing public health policies and plans
- Enforcing public health laws and regulations
- Helping people receive health services
- Maintaining a competent public health workforce
- Evaluating and improving programs and interventions
- Contributing to the evidence-based practice of public health

Idaho Public Health Districts make a difference every day and their work touches everyone. They play a critical role in improving and maintaining the health of Idaho residents. They strive to prevent diseases and help keep the food and water supplies safe. Idaho is fortunate to have a strong system of Public Health Districts—one that is the envy of many other states.

*While Idaho Public Health Districts are locally based, they share a common vision and mission*

VISION	MISSION
<p><i>“Healthy People in Healthy Communities.”</i></p>	<p><b><i>Prevent</i></b> disease, disability, and premature death,  <b><i>Promote</i></b> healthy lifestyles, and  <b><i>Protect</i></b> the health and quality of the environment</p>

# Community Health Needs Assessment

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## METHODOLOGY

This assessment incorporates both primary data from the 2016 Community Health Survey and secondary data from the Network of Care.

2016 Community Health <u>Primary</u> Data – Community Health Survey	2016 Community Health <u>Secondary</u> Data – Network of Care
<ul style="list-style-type: none"><li>▪ A survey was developed by public health partners in the 5 North Central Idaho counties (Clearwater, Idaho, Latah, Lewis, and Nez Perce) and one Washington county of Asotin.</li><li>▪ 1987 people from 6 counties completed the survey.</li></ul>	<p>The Network of Care is a web portal provided by your local health districts. It is a resource for individuals, families and agencies concerned with community health. It provides information about community services, laws and related news as well as community health data and other resources. (See Appendix 3 – Network of Care.)</p>



**Network of Care**

<http://idaho.networkofcare.org>

**North Central Idaho -  
Community Health Assessment**  
**Serving: Clearwater, Idaho, Latah, Lewis  
and Nez Perce Counties**



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**2016 Community Needs Assessment – Community Survey**

Survey link: <https://www.surveymonkey.com/r/3PLVYV7>

**RESPONDENT CHARACTERISTICS**

**1. To which of the following age groups do you currently belong:**

- |                                   |                                      |
|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Under 18 | <input type="checkbox"/> 55-64       |
| <input type="checkbox"/> 18-24    | <input type="checkbox"/> 65-74       |
| <input type="checkbox"/> 25-34    | <input type="checkbox"/> 75-84       |
| <input type="checkbox"/> 35-44    | <input type="checkbox"/> 85 or older |
| <input type="checkbox"/> 45-54    |                                      |

**2. Are you:**

- Male  Female

**3. Which of the following do you consider to be your primary race?**

- White/Caucasian  
 Black/African American  
 Native American/Alaskan Native  
 Asian/Pacific Islander  
 Other (Please specify) \_\_\_\_\_

**4. Counting income from all sources for everyone living in your household, which category below represents your annual household income for 2015 before taxes (gross income):**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Less than \$10,000 | <input type="checkbox"/> \$35,000 – 49,999 | <input type="checkbox"/> \$100,000 – 149,999   |
| <input type="checkbox"/> \$10,000 – 14,999  | <input type="checkbox"/> \$50,000 – 74,999 | <input type="checkbox"/> \$150,000 - \$199,999 |
| <input type="checkbox"/> \$15,000 – 24,999  | <input type="checkbox"/> \$75,000 – 99,999 | <input type="checkbox"/> \$200,000 or more     |
| <input type="checkbox"/> \$25,000 – 34,999  |  |  |

**5. In what county do you live?**

- |                                     |                                 |
|-------------------------------------|---------------------------------|
| <input type="checkbox"/> Nez Perce  | <input type="checkbox"/> Latah  |
| <input type="checkbox"/> Clearwater | <input type="checkbox"/> Lewis  |
| <input type="checkbox"/> Idaho      | <input type="checkbox"/> Asotin |



**6. In what county do you work?**

- Nez Perce
- Clearwater
- Idaho
- Latah
- Lewis
- Asotin

**7. How many people are currently living in your house?**

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8+

**8. How many are adults age 65 years or older?**

(Include yourself if appropriate) \_\_\_\_\_

**9. How many are children under 18 years old?**

\_\_\_\_\_ children

**10. Of these children, how many are:**

	0	1	2	3	4	5	6
Pre-Kindergarten in age	—	—	—	—	—	—	—
Grades k-6	—	—	—	—	—	—	—
Grades 7-12	—	—	—	—	—	—	—

**EDUCATION CONCERNS**

**11. If you have children in your household under 18 years old, which of the following are they enrolled in: (Mark all that apply).**

- Child Care
- Before-school childcare
- After school childcare
- After school programs
- None of these
- No children in household

**HEALTH CONCERNS**

**12. When you or members of your household need basic, non-emergency medical care, where do you usually go?**

- Community Clinics (SRCC, CHAS, Public Health)
- Urgent care clinic
- Emergency department
- Primary care provider/Family physician/Nurse Practitioner
- Do not seek medical care
- Other: Specify: \_\_\_\_\_

**13. Is everyone in your household covered by health insurance?**

Yes  No

**14. If yes, what coverage do you have: (Mark all that apply)**

- Medicare
- Private Insurance
- Medicaid
- Military Insurance
- Other \_\_\_\_\_

**15. In 2015 did you or anyone in your household need:**

	Yes	No		Yes	No
Medical care			If YES, was the care received?		
Dental care			If YES, was the care received?		
Mental health care			If YES, was the care received?		
Substance abuse care			If YES, was the care received?		
Prenatal care			If YES, was the care received?		
Did you travel over 50 miles to receive the healthcare services you needed?					

**INCOME AND SELF-SUFFICIENCY CONCERNS**

**16. Are you currently employed?** \_\_\_ Yes-full-time \_\_\_ Yes-part-time \_\_\_ No

**17. If you answered "No" to #15, are you:**

\_\_\_ Homemaker      \_\_\_ Retired      \_\_\_ Disabled  
 \_\_\_ Student      \_\_\_ Unemployed

**18. Within the past 12 months, has anyone in your household sought education or training to qualify for a higher paying job?** \_\_\_ Yes \_\_\_ No

**19. If yes, were you able to obtain education or training?** \_\_\_ Yes \_\_\_ No

**20. During the past 12 months, did you miss a rent, mortgage or utility payment because you did not have enough money?** \_\_\_ Yes \_\_\_ No

People and families often face problems and look for help. For each issue listed below, please tell us whether each concern is an issue for your household or a concern in our community.

<b>21. Education Concerns</b>	<b>Major Issue</b>	<b>Moderate Issue</b>	<b>Minor Issue</b>	<b>Not an Issue</b>	<b>Don't Know</b>
Early Childhood development/Home visiting program					
Pre-K education and school readiness for children					
Child day care					
Before and after school services					
Tutoring for children/youth at risk of failure					
Opportunities for college education or post high school training.					

	Major Issue	Moderate Issue	Minor Issue	Not an Issue	Don't Know
<b>22. Health Concerns</b>					
Health Insurance					
Basic medical care for low-income					
Treatment for chronic diseases (diabetes, heart disease, obesity)					
Mental Health services (Children, youth, adults)					
Prevention and Recovery from domestic violence and/or abuse					
Preventive Health Education programs					
Drug/alcohol prevention and education					
Teen pregnancy prevention and education					
Diabetes prevention and education					
Access to healthy foods					
Overweight/obesity prevention and education					
Tobacco/e-cigarettes education and cessation					
Prevention and Treatment of Cancer					
<b>23. Income and Self-Sufficiency Concerns</b>	<b>Major Issue</b>	<b>Moderate Issue</b>	<b>Minor Issue</b>	<b>Not an Issue</b>	<b>Don't Know</b>
Employment assistance for adults/seniors					
Support to better manage finances					
Safe, affordable, accessible housing					
Home repair and safety for seniors					
Emergency shelter for homeless adults/children/youth					
Day care services for mentally ill					
Adult day care services, and respite care					
Specialized transportation for seniors/disabled					
Meal delivery for homebound seniors/disabled					
Food assistance					

**24. Where/How did you receive this survey?**

Non-profit or Charitable Organization

Community meeting

United Way

Personal Contact

Workplace

Online

Hospital or Clinic

Other

**25. Any additional comments or thoughts you would like to share about the needs of our community?**

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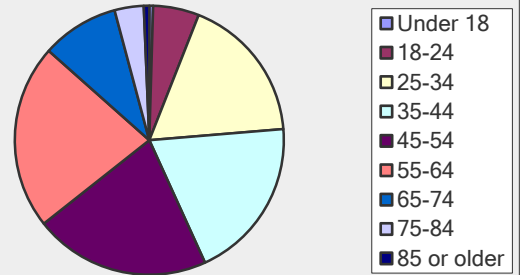
Thank you for participating in this Community Assessment.

# Community Health Needs Assessment Results

To which of the following age groups do you currently belong:

Answer Options	Response Percent	Response Count
Under 18	0.5%	9
18-24	5.5%	109
25-34	17.7%	349
35-44	19.5%	385
45-54	21.1%	417
55-64	22.2%	438
65-74	9.3%	183
75-84	3.5%	69
85 or older	0.7%	13
<i>answered question</i>		<b>1972</b>
<i>skipped question</i>		<b>13</b>

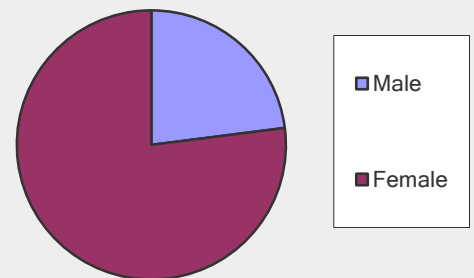
To which of the following age groups do you currently belong:



Are you:

Answer Options	Response Percent	Response Count
Male	23.0%	434
Female	77.0%	1454
<i>answered question</i>		<b>1888</b>
<i>skipped question</i>		<b>97</b>

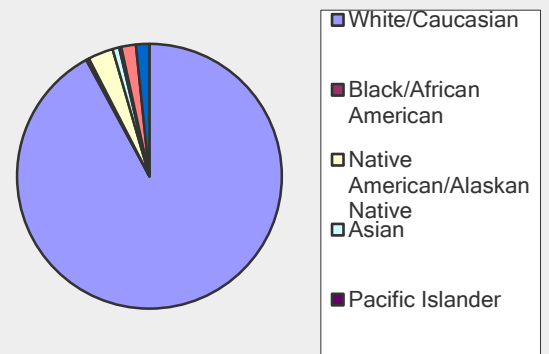
Are you:



Which of the following do you consider to be your primary race:

Answer Options	Response Percent	Response Count
White/Caucasian	92.1%	1803
Black/African American	0.4%	7
Native American/Alaskan Native	3.1%	60
Asian	0.8%	16
Pacific Islander	0.3%	5
Hispanic/Latino	1.8%	35
Other (please specify)	1.6%	32
<i>answered question</i>		<b>1958</b>
<i>skipped question</i>		<b>27</b>

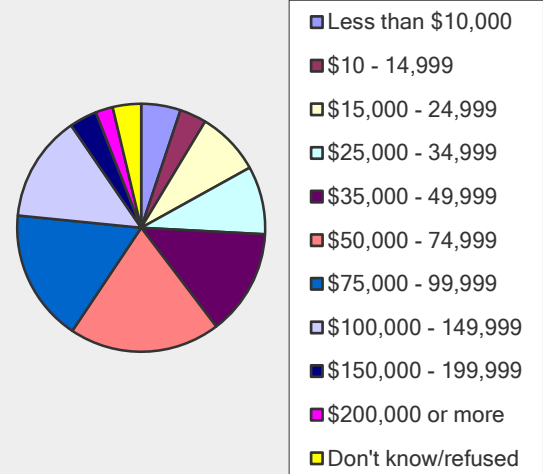
Which of the following do you consider to be your primary race:



Counting income from all sources for everyone living in your household, which category below represents your annual household income for 2015 before taxes (gross income):

Answer Options	Response Percent	Response Count
Less than \$10,000	5.1%	100
\$10 - 14,999	3.5%	68
\$15,000 - 24,999	8.3%	162
\$25,000 - 34,999	8.9%	173
\$35,000 - 49,999	13.8%	269
\$50,000 - 74,999	19.7%	384
\$75,000 - 99,999	17.2%	335
\$100,000 - 149,999	13.9%	270
\$150,000 - 199,999	3.6%	70
\$200,000 or more	2.3%	44
Don't know/refused	3.7%	72
<i>answered question</i>		<b>1947</b>
<i>skipped question</i>		<b>38</b>

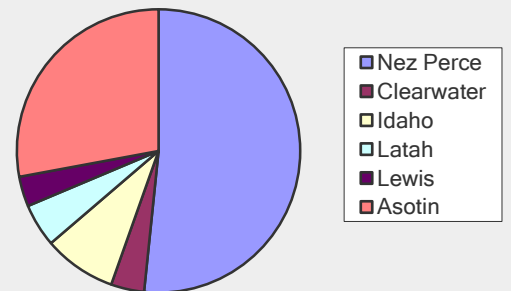
Counting income from all sources for everyone living in your household, which category below represents your annual household income for 2015 before taxes (gross income):



In what county do you live?

Answer Options	Response Percent	Response Count
Nez Perce	51.6%	995
Clearwater	3.8%	73
Idaho	8.3%	160
Latah	4.9%	95
Lewis	3.4%	66
Asotin	27.9%	538
<i>answered question</i>		<b>1927</b>
<i>skipped question</i>		<b>58</b>

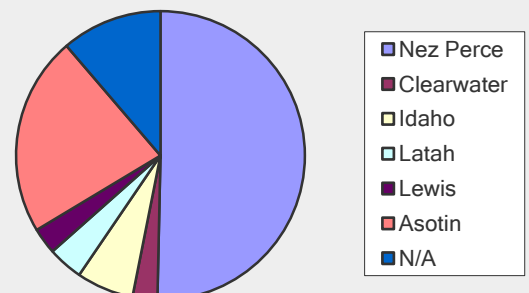
In what county do you live?



In what county do you work?

Answer Options	Response Percent	Response Count
Nez Perce	53.1%	960
Clearwater	2.9%	53
Idaho	6.8%	122
Latah	4.2%	75
Lewis	3.1%	56
Asotin	23.6%	426
N/A	11.9%	215
<i>answered question</i>		<b>1807</b>
<i>skipped question</i>		<b>78</b>

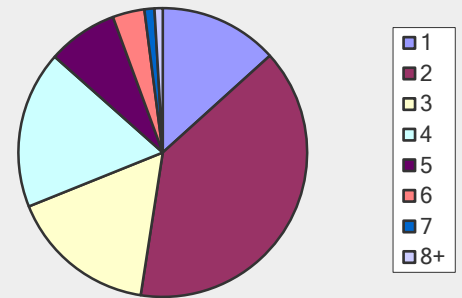
In what county do you work?



**How many people are currently living in your house?**

Answer Options	Response Percent	Response Count
1	13.3%	261
2	39.1%	768
3	16.5%	323
4	17.6%	346
5	7.8%	154
6	3.6%	70
7	1.1%	22
8+	0.9%	18
<i>answered question</i>		<b>1962</b>
<i>skipped question</i>		<b>23</b>

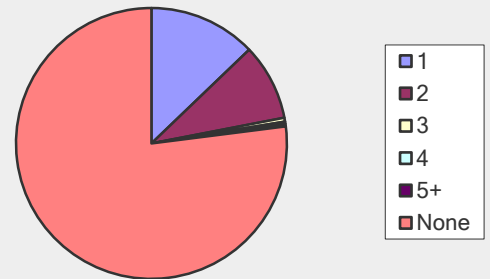
**How many people are currently living in your house?**



**How many are adults age 65 years or older? (Include yourself if appropriate)**

Answer Options	Response Percent	Response Count
1	12.8%	249
2	9.1%	177
3	0.5%	9
4	0.3%	5
5+	0.3%	6
None	77.0%	1494
<i>answered question</i>		<b>1940</b>
<i>skipped question</i>		<b>45</b>

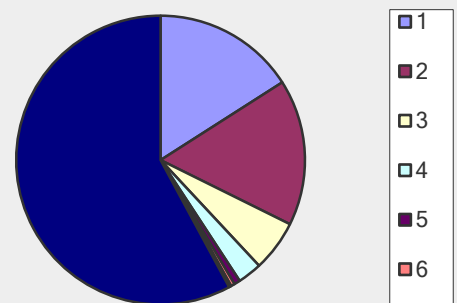
**How many are adults age 65 years or older? (Include yourself if appropriate)**



**How many children under 18 years old?**

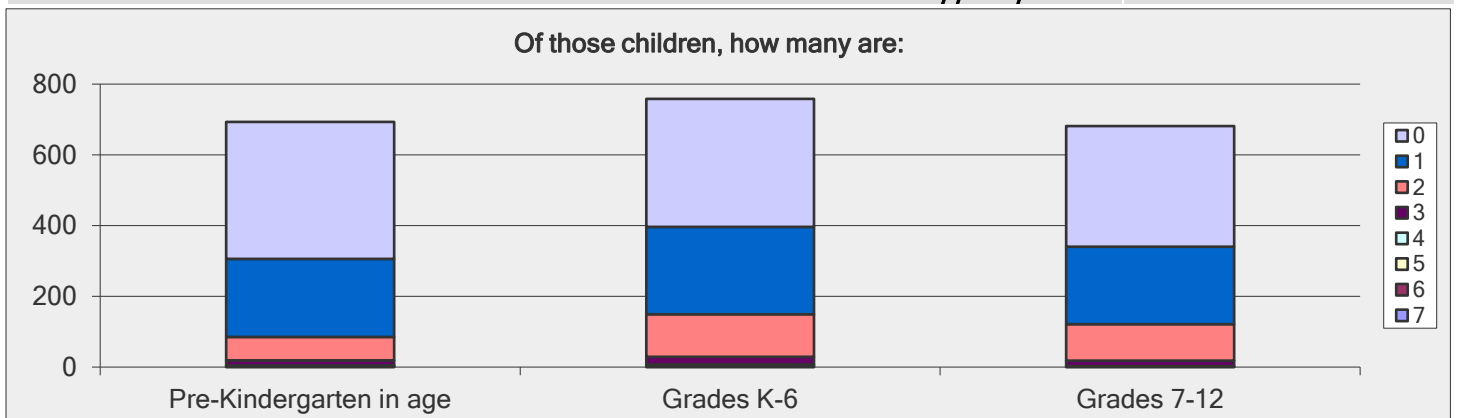
Answer Options	Response Percent	Response Count
1	16.0%	306
2	16.4%	314
3	5.7%	110
4	2.7%	52
5	0.7%	13
6	0.4%	8
7	0.1%	2
8+	0.2%	3
None	57.9%	1110
<i>answered question</i>		<b>1918</b>
<i>skipped question</i>		<b>67</b>

**How many children under 18 years old?**



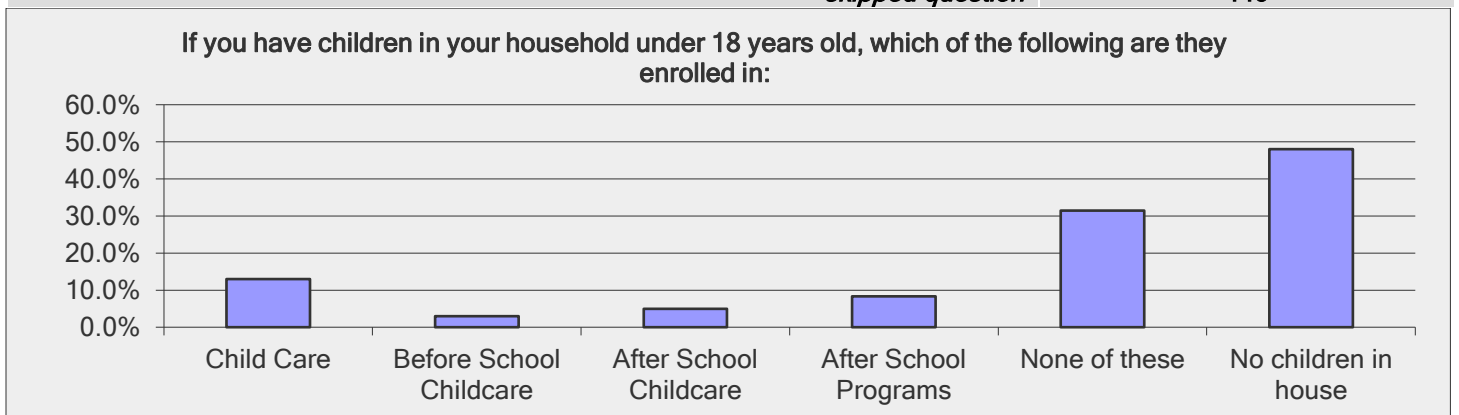
Of those children, how many are:

Answer Options	0	1	2	3	4	5	6	7	Response Count
Pre-Kindergarten in age	387	221	66	14	2	2	1	0	728
Grades K-6	362	247	120	22	5	1	1	0	802
Grades 7-12	341	219	103	15	0	2	0	1	734
<i>answered question</i>									<b>1087</b>
<i>skipped question</i>									<b>898</b>



If you have children in your household under 18 years old, which of the following are they enrolled in:

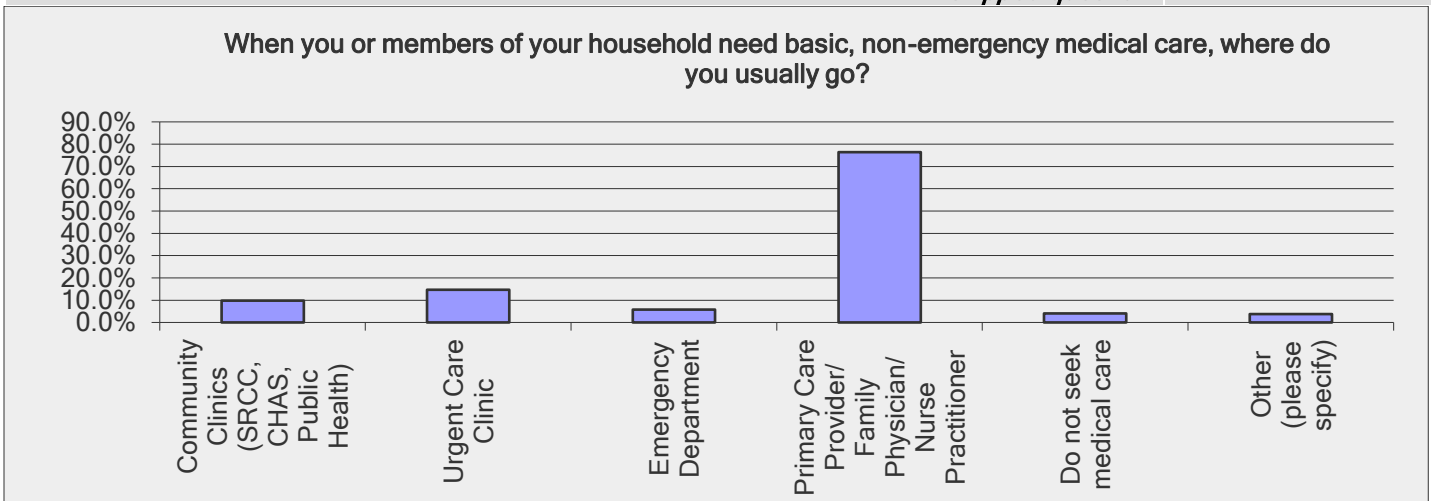
Answer Options	Response Percent	Response Count
Child Care	13.0%	228
Before School Childcare	3.0%	52
After School Childcare	5.0%	87
After School Programs	8.3%	146
None of these	31.5%	552
No children in house	48.1%	843
<i>answered question</i>		<b>1754</b>
<i>skipped question</i>		<b>449</b>





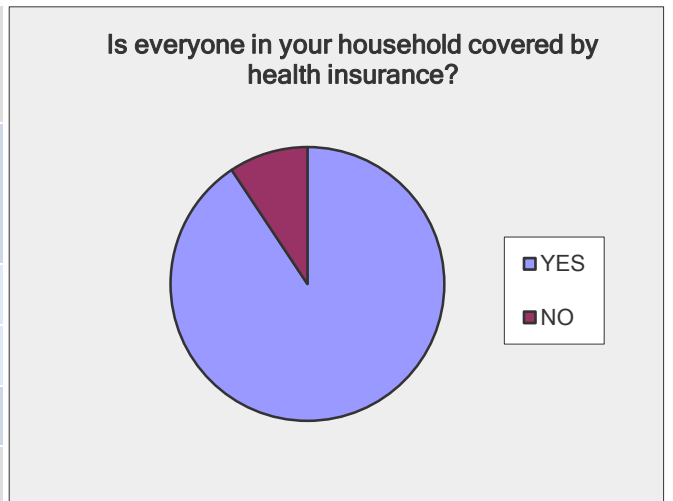
**When you or members of your household need basic, non-emergency medical care, where do you usually go?**

Answer Options	Response Percent	Response Count
Community Clinics (SRCC, CHAS, Public Health)	9.8%	188
Urgent Care Clinic	14.7%	281
Emergency Department	5.7%	109
Primary Care Provider/ Family Physician/ Nurse Practitioner	76.5%	1463
Do not seek medical care	4.0%	76
Other (please specify)	3.8%	72
<b>answered question</b>		<b>1913</b>
<b>skipped question</b>		<b>72</b>



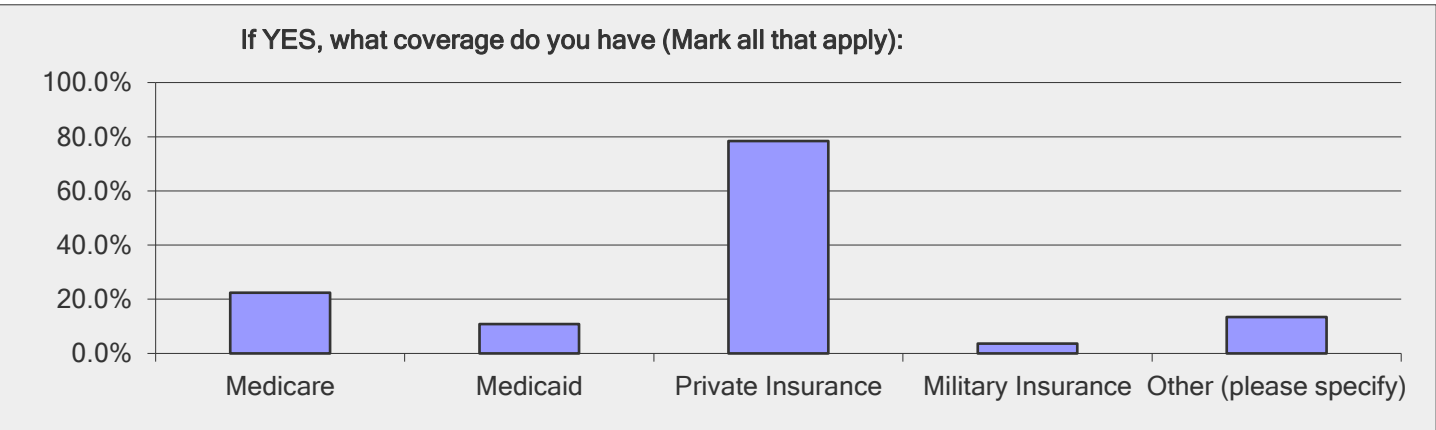
**Is everyone in your household covered by health insurance?**

Answer Options	Response Percent	Response Count
YES	90.7%	1719
NO	9.3%	177
<b>answered question</b>		<b>1896</b>
<b>skipped question</b>		<b>89</b>



**If YES, what coverage do you have (Mark all that apply):**

Answer Options	Response Percent	Response Count
Medicare	22.5%	404
Medicaid	10.9%	196
Private Insurance	78.4%	1410
Military Insurance	3.6%	65
Other (please specify)	13.4%	241
<i>answered question</i>		<b>1799</b>
<i>skipped question</i>		<b>186</b>



**In 2015 did you or anyone in your household need:**

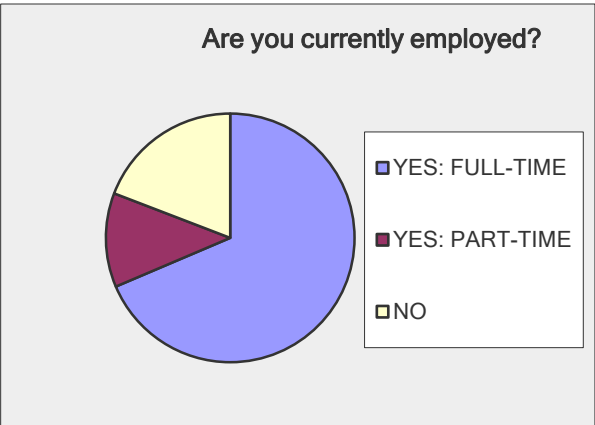
Answer Options	YES	NO	Response Count
Medical Care	1661	205	1866
Dental Care	1573	234	1807
Mental Health Care	316	1271	1587
Substance Abuse Care	46	1511	1557
Prenatal Care	112	1429	1541
Did you travel over 50 miles to receive the Healthcare services you needed?	440	1285	1725

**If YES, was the care received?**

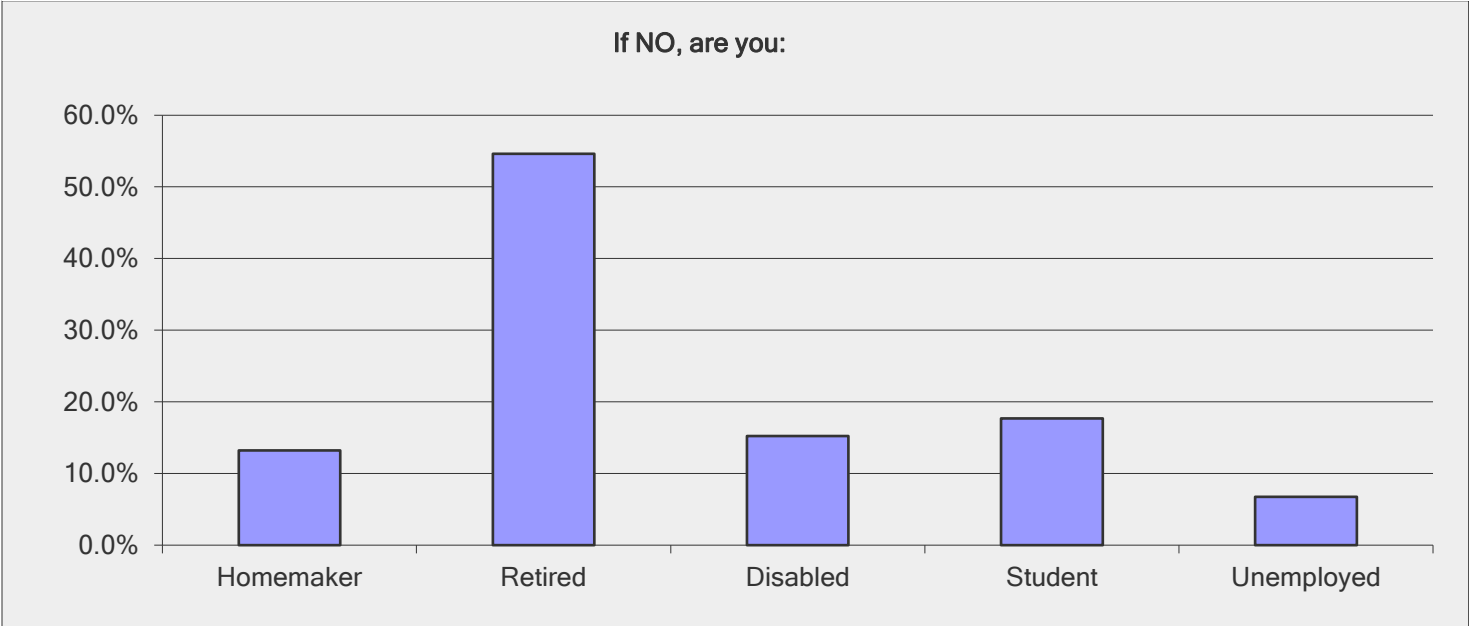
Answer Options	YES	NO	Response Count
Medical Care	1383	35	1571
Dental Care	1242	124	1490
Mental Health Care	233	240	498
Substance Abuse Care	22	267	306
Prenatal Care	86	252	359
Did you travel over 50 miles to receive the Healthcare services you needed?	262	191	488

		Question Totals
<i>answered question</i>		<b>1899</b>
<i>skipped question</i>		<b>86</b>

Are you currently employed?		
Answer Options	Response Percent	Response Count
YES: FULL-TIME	68.6%	1306
YES: PART-TIME	12.2%	233
NO	19.2%	365
<i>answered question</i>		<b>1904</b>
<i>skipped question</i>		<b>81</b>



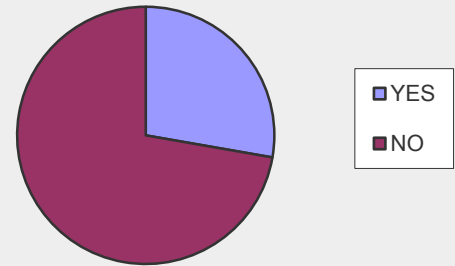
If NO, are you:		
Answer Options	Response Percent	Response Count
Homemaker	13.2%	53
Retired	54.6%	219
Disabled	15.2%	61
Student	17.7%	71
Unemployed	6.7%	27
Other (please specify)		23
<i>answered question</i>		<b>401</b>
<i>skipped question</i>		<b>1584</b>



Within the past 12 months, has anyone in your household sought education or training to qualify for a higher paying job?

Answer Options	Response Percent	Response Count
YES	27.7%	523
NO	72.3%	1362
<i>answered question</i>		<b>1885</b>
<i>skipped question</i>		<b>100</b>

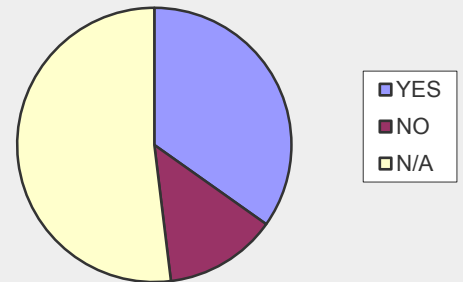
Within the past 12 months, has anyone in your household sought education or training to qualify for a higher paying job?



If YES, were you able to obtain education or training?

Answer Options	Response Percent	Response Count
YES	34.8%	449
NO	13.3%	171
N/A	51.9%	670
<i>answered question</i>		<b>1290</b>
<i>skipped question</i>		<b>695</b>

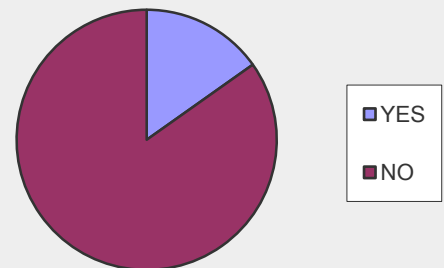
If YES, were you able to obtain education or training?



During the past 12 months, did you miss a rent, mortgage or utility payment because you did not have enough money?

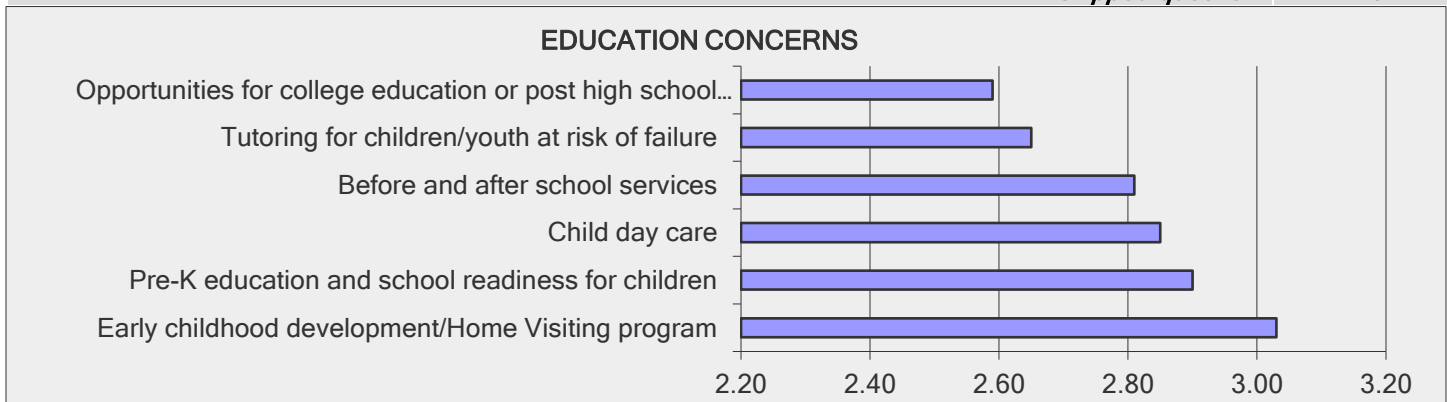
Answer Options	Response Percent	Response Count
YES	15.2%	289
NO	84.8%	1613
<i>answered question</i>		<b>1902</b>
<i>skipped question</i>		<b>83</b>

During the past 12 months, did you miss a rent, mortgage or utility payment because you did not have enough money?



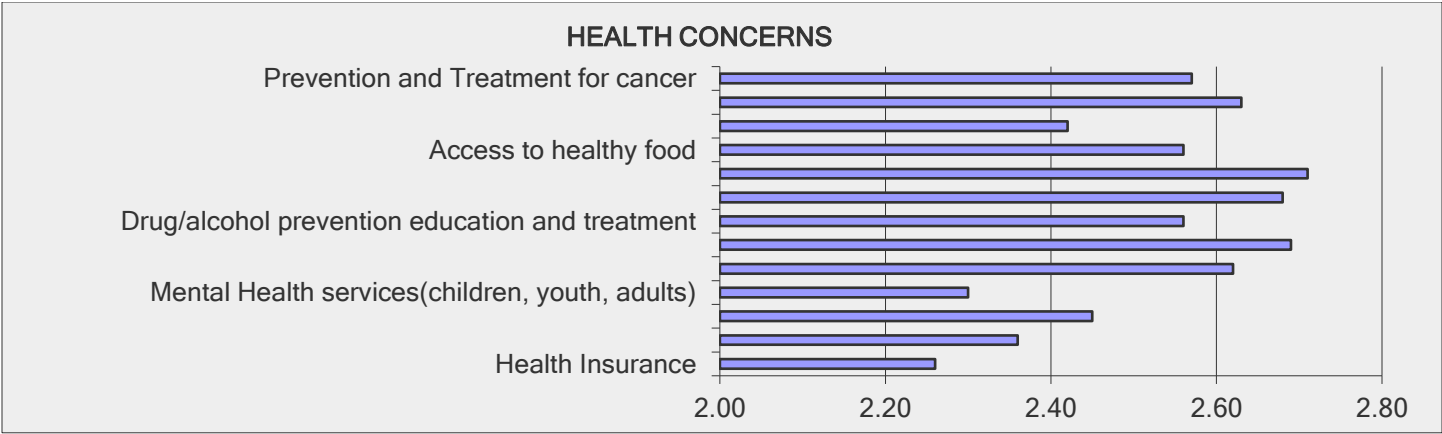
## EDUCATION CONCERNS

Answer Options	Major Issue	Moderate Issue	Minor Issue	Not an issue	Don't Know	Rating Average	Response Count
Early childhood development/Home Visiting program	178	308	173	790	278	3.03	1727
Pre-K education and school readiness for children	239	332	178	761	212	2.90	1722
Child day care	283	327	191	718	198	2.85	1717
Before and after school services	278	353	196	707	181	2.81	1715
Tutoring for children/youth at risk of failure	360	365	130	646	228	2.65	1729
Opportunities for college education or post high school training	376	417	196	606	144	2.59	1739
<i>answered question</i>							<b>1757</b>
<i>skipped question</i>							<b>228</b>



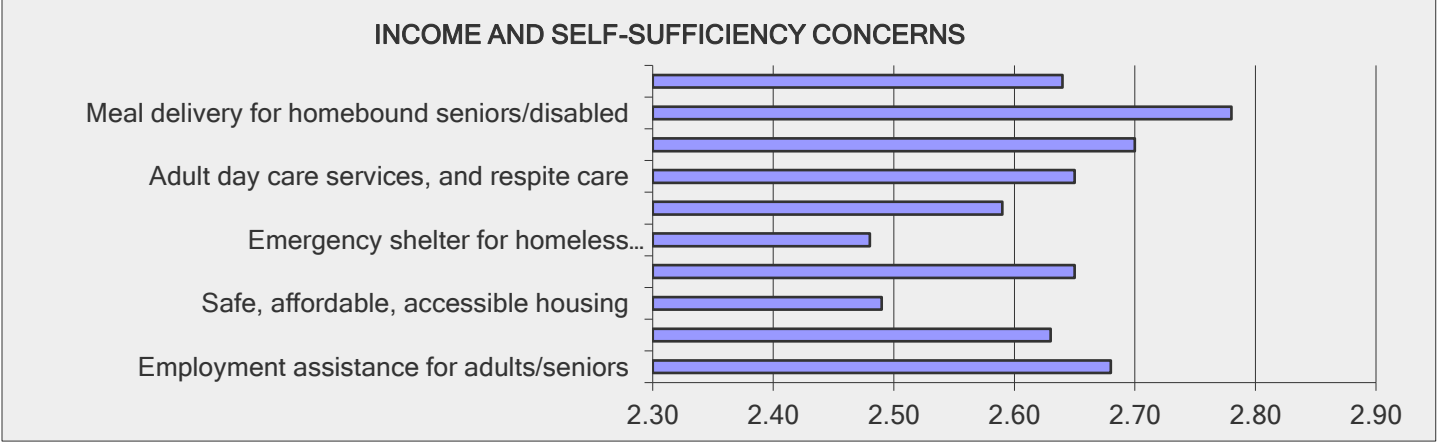
## HEALTH CONCERNS

Answer Options	Major Issue	Moderate Issue	Minor Issue	Not an issue	Don't Know	Rating Average	Response Count
Health Insurance	565	376	151	402	68	2.26	1750
Basic medical care for low-income	527	319	151	452	110	2.36	1743
Treatment for chronic diseases (diabetes, heart disease, obesity)	397	409	181	426	150	2.45	1752
Mental Health services(children, youth, adults)	584	288	126	448	124	2.30	1760
Prevention and Recovery from domestic violence or abuse	359	361	130	543	166	2.62	1749
Preventive Health Education programs	268	397	231	503	160	2.69	1750
Drug/alcohol prevention education and treatment	414	339	136	535	138	2.56	1751
Teen pregnancy prevention and education	313	372	172	543	162	2.68	1748
Diabetes prevention and education	258	398	251	500	154	2.71	1752
Access to healthy food	370	390	221	487	87	2.56	1746
Overweight/obesity prevention and education	419	407	218	406	114	2.42	1752
Tobacco/e-cigarettes education/cessation	323	397	204	516	121	2.63	1749
Prevention and Treatment for cancer	363	350	221	475	151	2.57	1747
<i>answered question</i>							<b>1793</b>
<i>skipped question</i>							<b>192</b>



### INCOME AND SELF-SUFFICIENCY CONCERNS

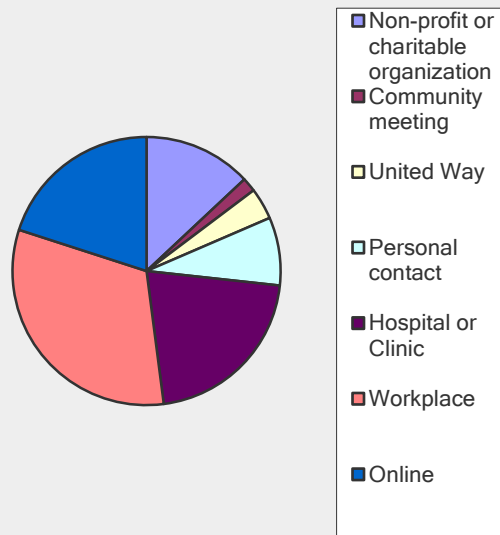
Answer Options	Major Issue	Moderate Issue	Minor Issue	Not an issue	Don't Know	Rating Average	Response Count
Employment assistance for adults/seniors	252	420	215	482	201	2.68	1763
Support to better manage finances	260	436	309	428	135	2.63	1758
Safe, affordable, accessible housing	413	374	202	461	112	2.49	1756
Home repair and safety for seniors	288	393	211	483	193	2.65	1763
Emergency shelter for homeless adults/children/youth	445	332	153	488	148	2.48	1759
Day care services for mentally ill	384	291	135	511	245	2.59	1758
Adult day care services, and respite care	312	353	172	508	221	2.65	1759
Specialized transportation for seniors/disabled	276	368	205	509	204	2.70	1755
Meal delivery for homebound seniors/disabled	248	353	234	548	181	2.78	1757
Food assistance	285	415	226	477	144	2.64	1731
<i>answered question</i>							<b>1782</b>
<i>skipped question</i>							<b>203</b>



**Where /How did you receive this survey?**

Answer Options	Response Percent	Response Count
Non-profit or charitable organization	13.0%	279
Community meeting	1.7%	69
United Way	3.8%	58
Personal contact	8.2%	144
Hospital or Clinic	21.2%	349
Workplace	32.0%	517
Online	20.0%	321
Other		139
<b><i>answered question</i></b>		<b>1697</b>
<b><i>skipped question</i></b>		<b>288</b>

**Where/How did you receive this survey?**



# Data Resources

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## **Primary Data**

2016 Community Health Survey, Public Health Partners 2016 Community Health Assessment

<http://www.idahopublichealth.com/files/data/community-health-assessment/2013/Community-Health-Assessment-D1-D2-09-06-13.pdf>

## **Secondary Data**

2012-2013 IDOL Idaho Primary Care Physicians Workforce Overview

[http://issuu.com/idaholabor/docs/idaho\\_primary\\_care\\_physicians?e=3684643/1089552](http://issuu.com/idaholabor/docs/idaho_primary_care_physicians?e=3684643/1089552)

2013 Idaho Dentists and Dental Specialists Workforce Supply and Demand Summary

[http://labor.idaho.gov/publications/Dentist\\_Whitepaper.pdf](http://labor.idaho.gov/publications/Dentist_Whitepaper.pdf) )

2016 County Health Rankings

<http://www.countyhealthrankings.org/app/idaho/2016/rankings/idaho/county/outcomes/overall/snapshot>

For Maternal/Child indicators 2-7, Adolescents indicators, and Adults indicator 10: Vital Statistics, Bureau of Vital Records and Health Statistics

[http://healthandwelfare.idaho.gov/Portals/0/Health/Statistics/2015-Reports/2015\\_District-County-Profile.pdf](http://healthandwelfare.idaho.gov/Portals/0/Health/Statistics/2015-Reports/2015_District-County-Profile.pdf)

Idaho BRFSS 2014

[http://healthandwelfare.idaho.gov/Portals/0/Health/Statistics/BRFSS%20Reports/Idaho\\_BRFSS\\_Annual\\_Report\\_2014.pdf](http://healthandwelfare.idaho.gov/Portals/0/Health/Statistics/BRFSS%20Reports/Idaho_BRFSS_Annual_Report_2014.pdf)

Network of Care, Idaho

<http://idaho.networkofcare.org>

SPAN Idaho September 2016 Suicide Fact Sheet

<http://www.spanidaho.org/uploads/2016%20sept%20fact%20sheet.pdf>

U.S. Census Bureau: State and County QuickFacts

<http://quickfacts.census.gov/qfd/states/16000.html>

ID Dept. of Health and Welfare- Get Healthy Idaho: Measuring & Improving Population Health Year 2 Update January 2017 <http://healthandwelfare.idaho.gov/Portals/0/Health/GetHealthyIdahoV2017c.pdf>

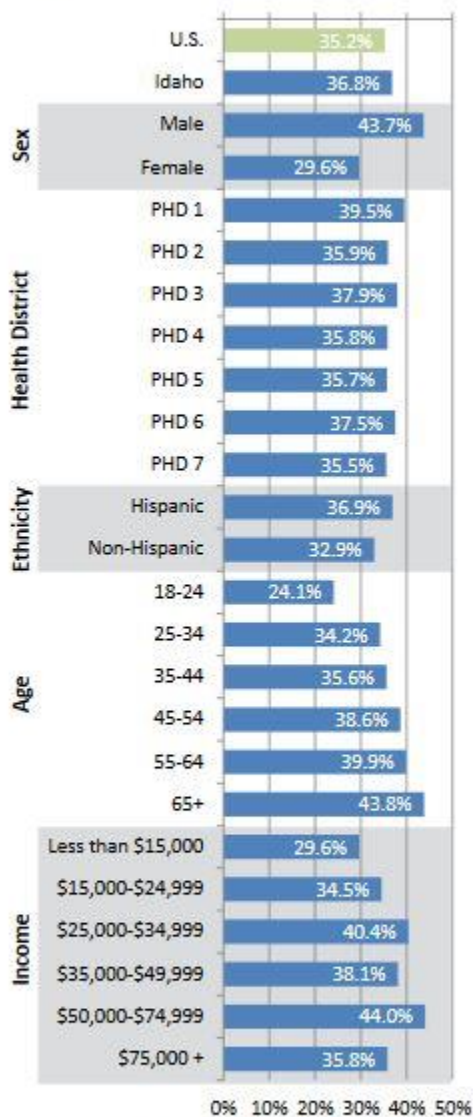


# Get Healthy Idaho: Measuring and Improving Population Health

## Topic Area: Overweight/Obesity

Indicator: Percentage of adults who are overweight, 2014

The percentage of adults who are Overweight in Idaho does not differ significantly from the U.S. rate. Some significant differences exist among demographic groups.<sup>1</sup>



Overweight is defined as a self-reported height and weight resulting in a calculated BMI greater than or equal to 25.0 but less than 30.0.

## How Many Adults?

**425,000**

37% of Idaho adults are overweight

## Who Are They?

### Males

44% vs. 30% of females are overweight

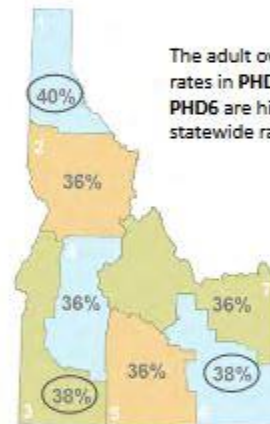
### Older Adults

The risk for being overweight increases with age

### Hispanic Adults

37% vs. 33% of non-Hispanics are overweight

## Where Are They?

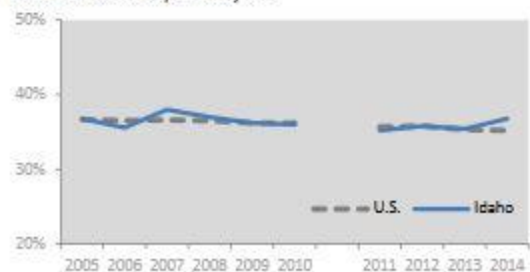


The adult overweight rates in PHD1, PHD3, and PHD6 are higher than the statewide rate of 37%

## 2005-2014

### The percent of adults in Idaho who are overweight

has remained relatively unchanged since 2005. Idaho's overweight prevalence has not differed significantly from the U.S. rate over the past 10 years.<sup>1</sup>



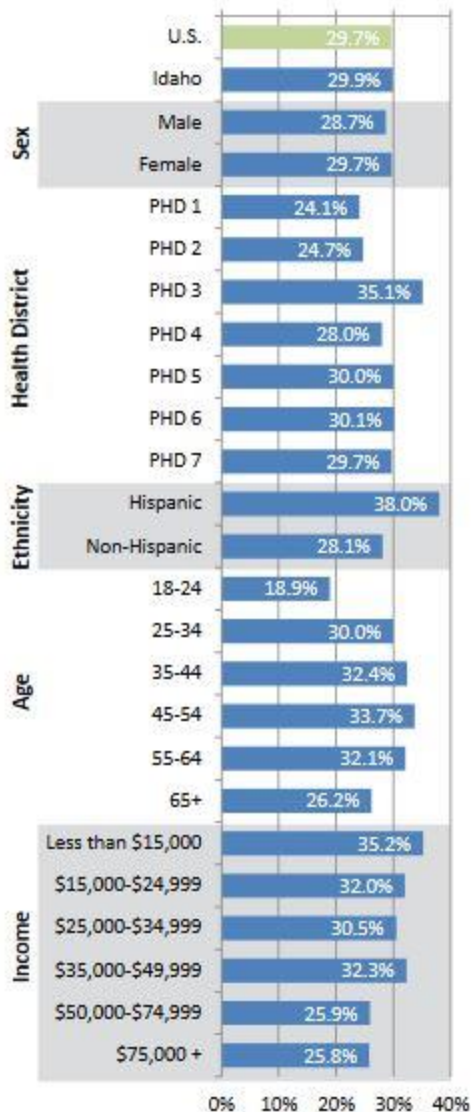
Due to changes in BRFSS methodology in 2011, data from 2011 and later are not directly comparable to 2010 and earlier.

1. Idaho Department of Health and Welfare, Division of Public Health, Behavioral Risk Factor Surveillance System, 2016.

## Topic Area: Overweight/Obesity

Indicator: Percentage of adults who are obese, 2014

The percentage of adults who are obese in Idaho does not differ significantly from the U.S. rate. Some significant differences exist among demographic groups.<sup>1</sup>



Obese is defined as a self-reported height and weight resulting in a calculated BMI greater than 30.0.

### How Many Adults?

**345,000**

30% of Idaho adults are obese

### Who Are They?

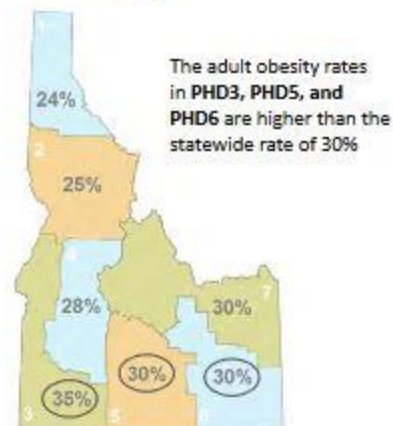
#### Lower Household Income

The obesity rate is significantly higher among lower income household adults

#### Hispanic Adults

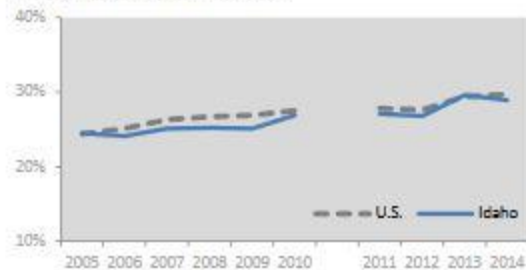
38% vs. 28% of non-Hispanic adults are obese

### Where Are They?



### 2005-2014

The percent of adults in Idaho who are obese has remained relatively unchanged since 2005. Idaho's overweight prevalence has not differed significantly from the U.S. rate over the past 10 years.<sup>2</sup>

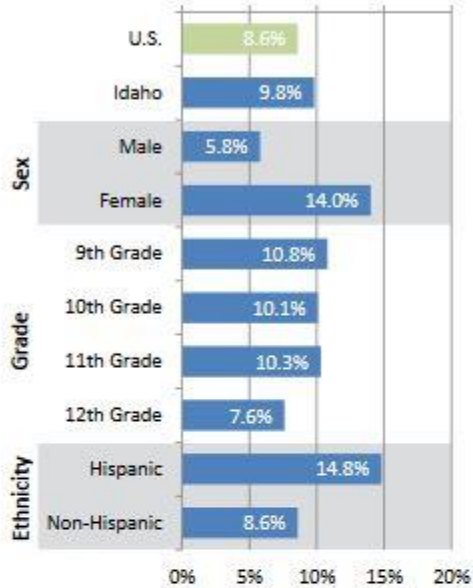


Due to changes in BRFSS methodology in 2011, data from 2011 and later are not directly comparable to 2010 and earlier.  
 1. Idaho Department of Health and Welfare, Division of Public Health, Behavioral Risk Factor Surveillance System, 2016.

## Topic Area: Injury/Suicide

Indicator: Percentage of adolescents who have attempted suicide, 2015

The percentage of Idaho adolescents who have attempted suicide does not differ significantly from the U.S. rate. The attempted suicide rate is significantly higher among female students (vs. male students).<sup>1</sup>



### How Many Adolescents?

**8,500**

10% of Idaho adolescents (grades 9-12) have ever attempted suicide

### Who Are They?

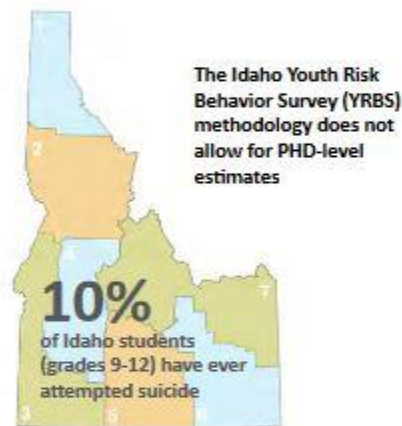
#### Female Students

14% vs. 6% of male students have attempted suicide

#### Hispanic Students

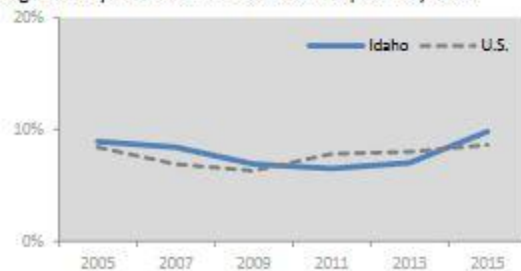
15% vs. 9% on non-Hispanic students have attempted suicide

### Where Are They?



### 2005-2015

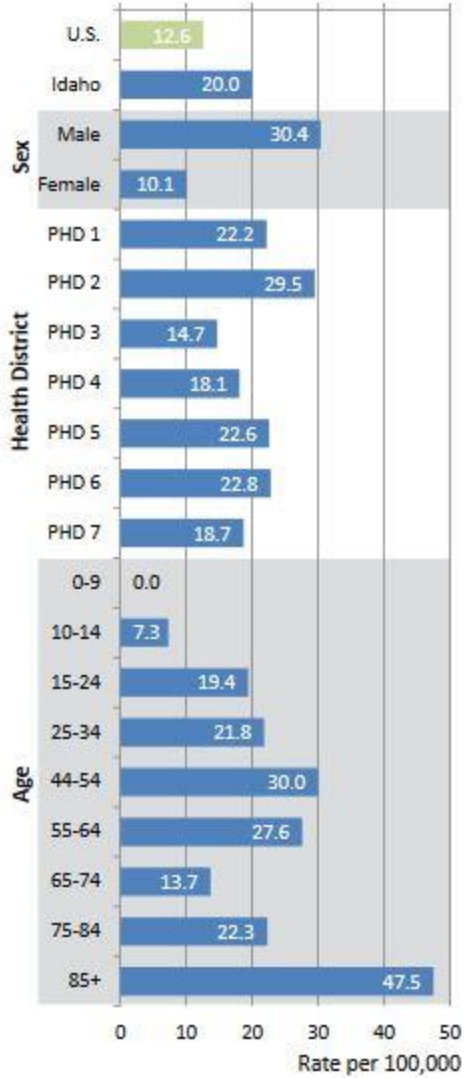
The percent of adolescents in Idaho who have ever attempted suicide has not changed significantly since 2005. Idaho's prevalence of suicide attempts has not differed significantly from the U.S. rate over the past 10 years.<sup>1</sup>



1. Centers for Disease Control and Prevention (CDC). 1991-2015 High School Youth Risk Behavior Survey Data. Available at <http://nccd.cdc.gov/youthonline/>. Accessed on July 5, 2016.

Get Healthy Idaho, 2017

The suicide death rate (age-adjusted) in Idaho is higher than the age-adjusted U.S. suicide death rate. Some highly significant differences exist between males and females and some age groups.<sup>1</sup>



### How Many Suicide Deaths?

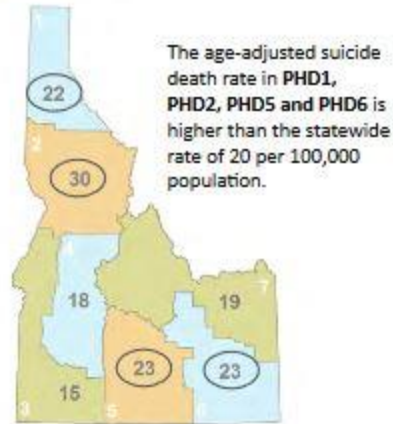
**320**  
 20 suicide deaths per 100,000 Idahoans

### Who Are They?

**Males**  
 30 per 100,000 vs. 10 per 100,000 females died by suicide

**Older Adults (85+ years)**  
 The age-specific suicide death rate is highest among adults age 85 and older

### Where Are They?



### 2005-2014

The age-adjusted suicide rate (per 100,000) among Idaho residents is significantly higher than the U.S. suicide rate over the past 10 years. The suicide death rate in Idaho has increased since 2005.<sup>1</sup>

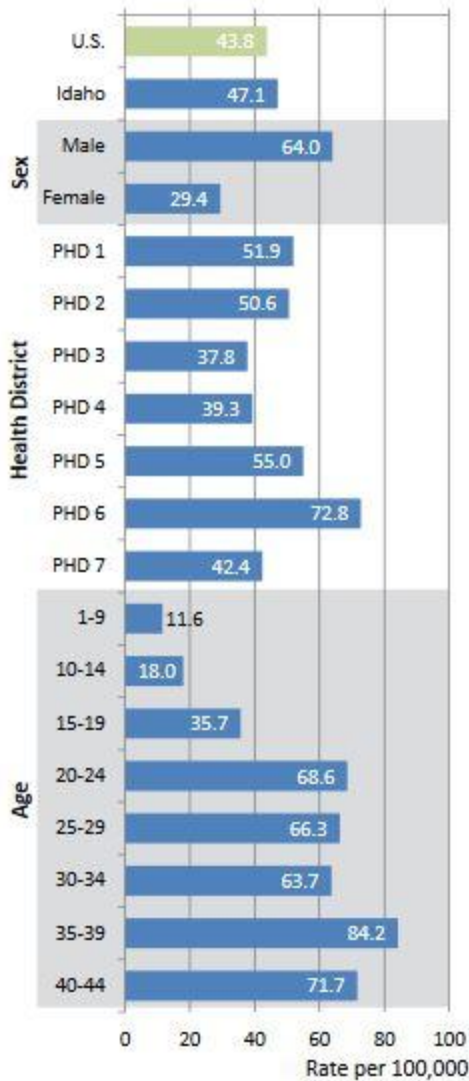


1. Idaho Department of Health and Welfare, Division of Public Health, Bureau of Vital Records and Health Statistics. Special Request, 2016. Get Healthy Idaho, 2017

**Topic Area: Injury/Suicide**

**Indicator: Injury fatalities (ages 1-44), 2014**

**Injury Death Rate (age-adjusted) among Idahoans aged 1-44** is slightly higher than the U.S. injury death rate. Some significant differences exist between males and females and some age groups.<sup>1</sup>



**How Many Injury Deaths?**

**461**

47 injury deaths per 100,000 Idahoans aged 1-44 years

**Who Are They?**

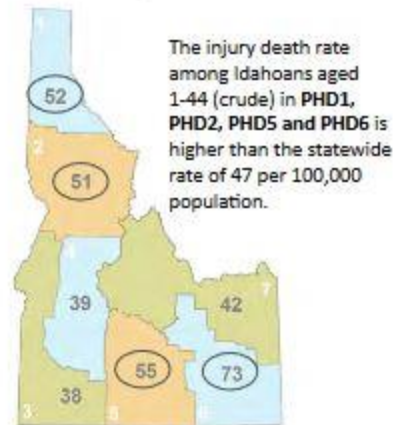
**Males**

64 per 100,000 vs. 29 per 100,000 females died from an injury

**Adults (20-44 years)**

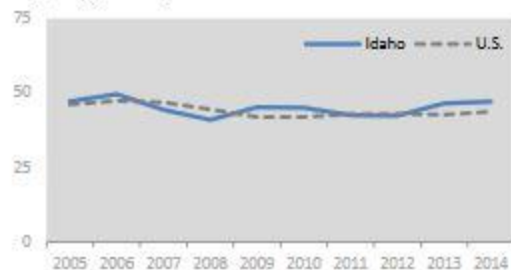
The injury death rate increases with age

**Where Are They?**



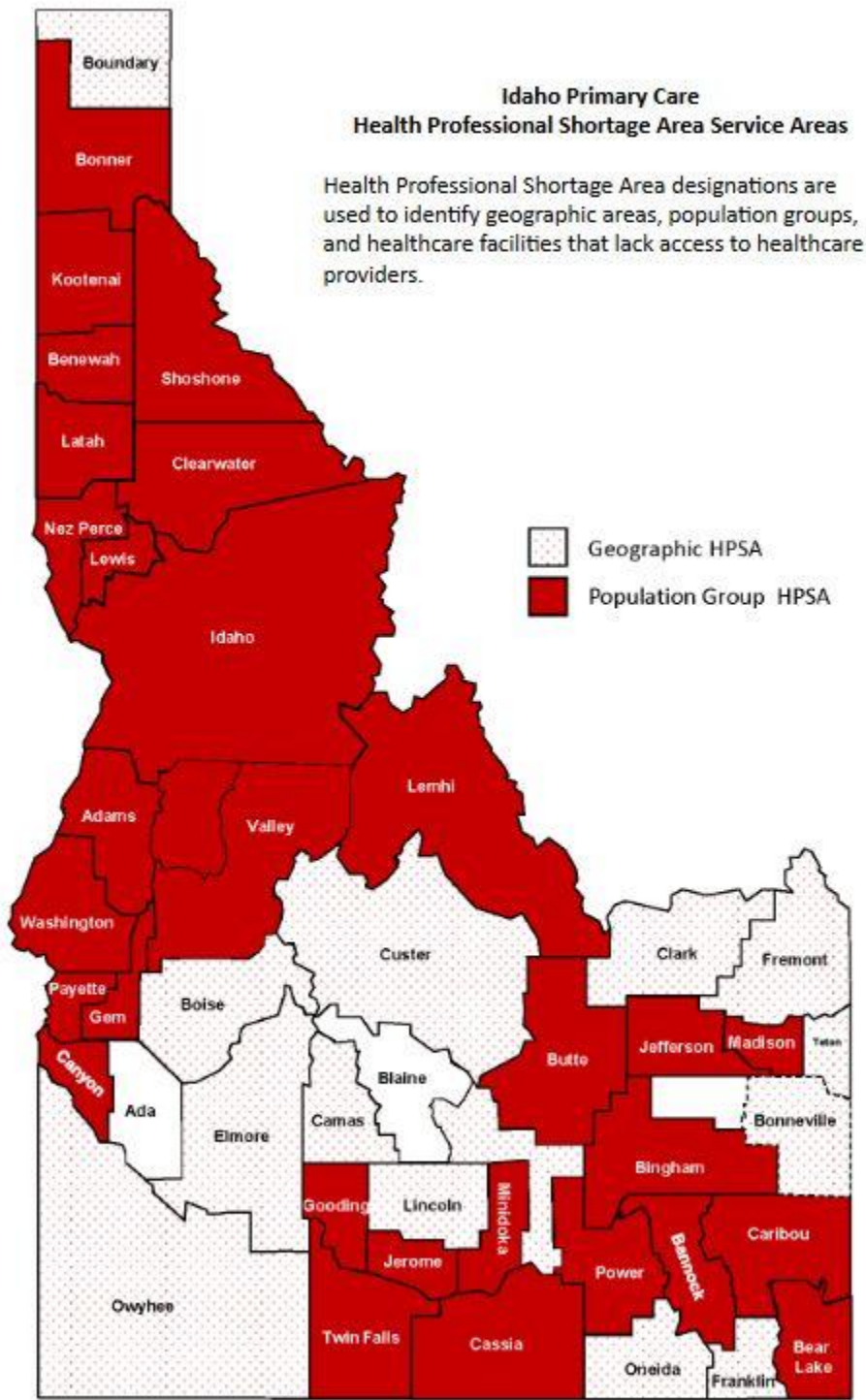
**2005-2014**

The injury death rate (per 100,000) among Idaho residents aged 1-44 is similar to the U.S. injury death rate over the past 10 years. The injury death rate in Idaho has not changed significantly since 2005.<sup>2</sup>

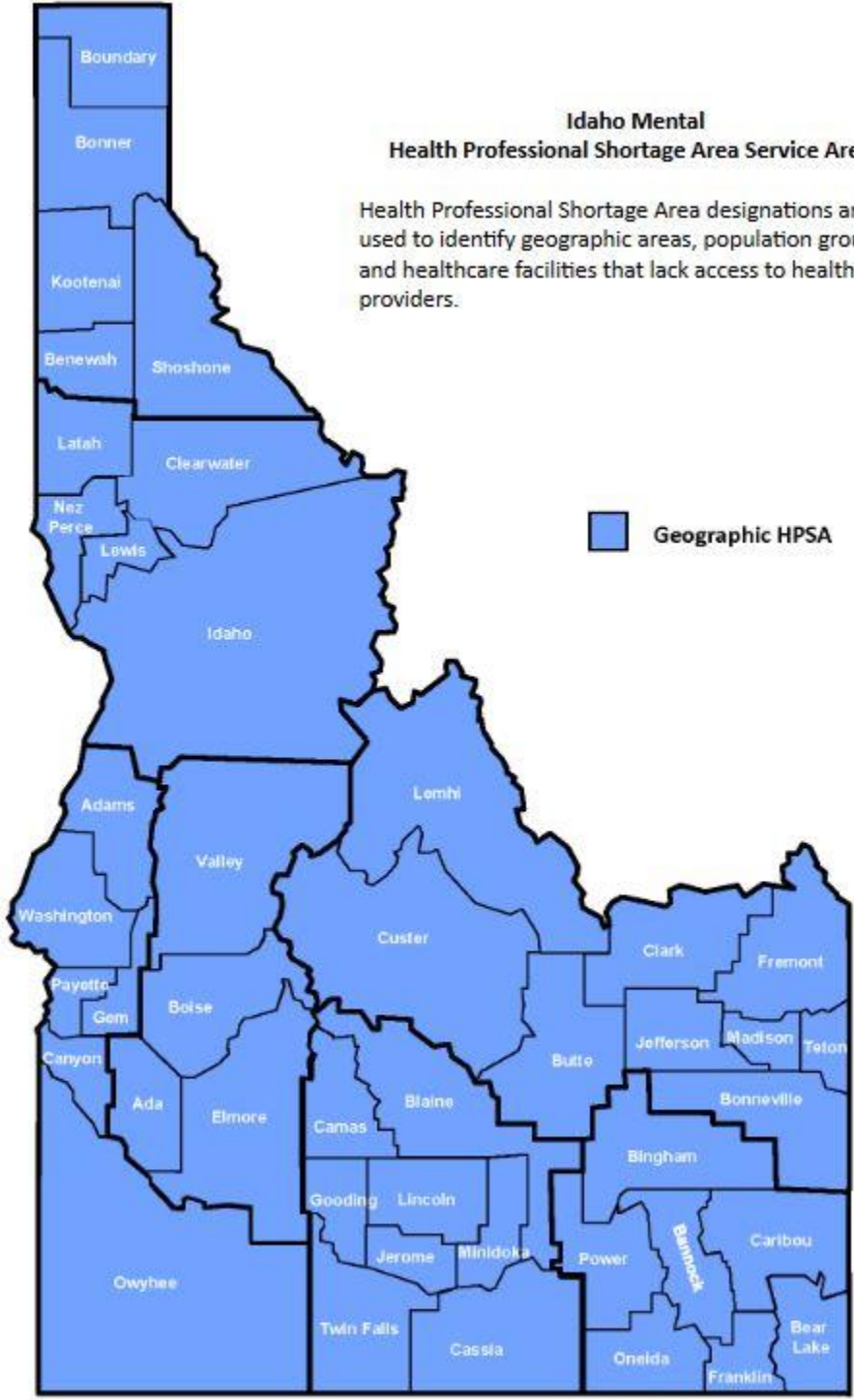


1. Idaho Department of Health and Welfare, Division of Public Health, Bureau of Vital Records and Health Statistics. Special Request, 2016.

## Idaho Professional Shortage Area Maps



Get Healthy Idaho, 2017

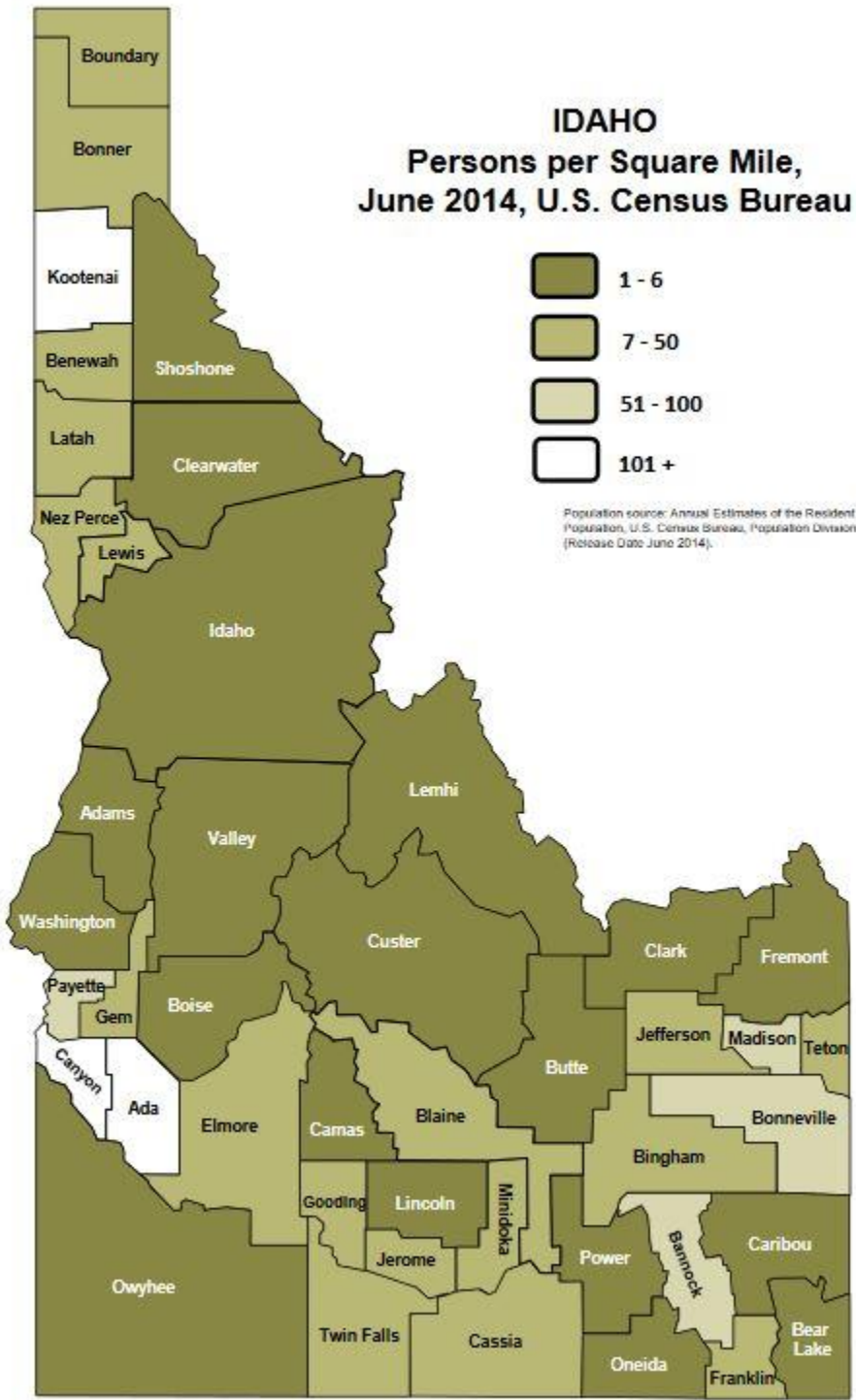


**Idaho Mental Health Professional Shortage Area Service Areas**

Health Professional Shortage Area designations are used to identify geographic areas, population groups, and healthcare facilities that lack access to healthcare providers.

Geographic HPSA

Get Healthy Idaho, 2017



Get Healthy Idaho, 2017





# Crosswalk of Regional Community Health Assessments

## CROSSWALK OF REGIONAL COMMUNITY HEALTH ASSESSMENTS



Fall-Winter 2016



**GRITMAN**  
MEDICAL CENTER

- ✓ Mental Health/Suicide
- ✓ Substance Abuse
- ✓ Physician Shortage
- ✓ Affordability/Accessibility
- ✓ Obesity/Overweight
- ✓ Alzheimer's

Access to Care

Mental Health



- ✓ Obesity/Overweight/Chronic Disease
- ✓ Health Insurance
- ✓ Mental Health/Suicide & Substance Abuse

Obesity & Chronic Disease



- ✓ Access to Care
- ✓ Obesity/Overweight/Chronic Disease Contributors
- ✓ Mental Health
- ✓ Cancer

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2016

# COMMUNITY HEALTH NEEDS ASSESSMENT

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**Public Health**  
Idaho North Central District

