2018
Community Health Assessment

SAN JUAN BASIN
public health

Contents

Letter from the Executive Director

The 2018 Community Health Assessment (CHA) for Archuleta and La Plata counties provides an opportunity to understand the health concerns of residents in our region and to strategically develop and fund public health programs that are relevant to the needs of our community. The information that follows helps to document the well-being of our community through both data-driven health indicators and community feedback about lived experience. This document provides a foundation for both improving health as well as for measuring that improvement. Ultimately, this information will be used to inform a 5-year strategic Public Health Improvement Plan (PHIP) that guides the work of San Juan Basin Public Health.

Enhancing population health requires the efforts of not only the local public health agency, but also of government, non-profits, healthcare organizations, and community members; CHA data will direct us to seek promising collaboration opportunities. Additionally, partner organizations can use this information to inform their own strategies to improve community health and to seek funding for innovative programming. Because this research reflects community input, local agencies will be able to tailor their plans and programs to best address the unique and complex needs of the residents of Archuleta and La Plata counties.

Local public health agencies are required by the state of Colorado to complete a Community Health Assessment every five years as a component of their overall Public Health Improvement Planning process. For more information about the state's Health Assessment and Planning initiative, visit: https://www.colorado.gov/pacific/cdphe-lpha/chaps. Thank you to the steering committee for their dedication throughout this process, to the staff of SJBPH for their support, and to the public for participating in this assessment and for your interest in the health of our communities. I hope you find this document useful as a reference for our community's health in the coming years.

Sincerely,

LIANE JOLLON
Executive Director
San Juan Basin Public Health

Acknowledgments

The development and production of the 2018 Community Health Assessment for Archuleta and La Plata counties required time and energy from many individuals and organizations. Sincere appreciation goes to those from the Steering Committee who participated in numerous planning and data review meetings, and who have committed to future activities related to implementing the Public Health Improvement Plan in our counties. It is this level of community input that enriches both the process and the final report.

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We would also like to thank our local and state partners that helped in this process:

- Durango Public Library
- Ignacio Community Library
- Pine River Library
- Pine River Shares
- Ruby M. Sisson Memorial Library
- Archuleta County Department of Human Services
- La Plata County Department of Human Services
- Archuleta County Board of County Commissioners
- La Plata County Board of County Commissioners
- City of Durango
- Town of Bayfield
- Town of Ignacio
- Town of Pagosa Springs
- Celebrating Healthy Communities
- Volunteers of America Community Shelter
- Office of Planning Partnerships and Improvement
- Colorado Department of Public Health and Environment
- Compañeros
- The Family Center Coalition

Thank you to the staff of San Juan Basin Public Health, whose tireless efforts at survey distribution resulted in a representative sample of community members providing feedback for this document.

Introduction/Background

San Juan Basin Public Health (SJBPH) is an organized district local public health agency that has served the residents of Archuleta and La Plata counties since 1948. For its entire 70-plus year history, SJBPH has provided services that enhance public health through a wide range of programs. SJBPH is governed by a seven-person Board of Health, which consists of one commissioner from both La Plata and Archuleta counties as well as five commissioner-appointed members.

The agency's mission is to protect human and environmental health and inspire well-being in our community, while reflecting the diverse communities within which we operate, and based on our organizational values of Compassion, Health Equity, Integrity, Respect, and Stewardship. While individual health services continue to be a priority, as dictated by the needs of our community, SJBPH's focus has shifted increasingly to population health, addressing health inequities and social determinants of health.

SJBPH supports the health and well-being of almost 70,000 residents across two rural counties that span over 3,000 square miles in southwest Colorado. Both Archuleta and La Plata counties are designated Health Professional Shortage Areas (HPSA) for primary care, dental health, and mental health. According to County Health Rankings, both La Plata (#16) and Archuleta (#20) are in the top one-third of "healthiest" counties in Colorado; this designation considers both how long people live, and how healthy they feel.

Previous Community Health Assessment: 2012

SJBPH partnered with Mercy Regional Medical Center and Pagosa Springs Medical Center to complete the 2012 Community Health Assessment (CHA). The work was led by a planning committee comprising representatives from all three participating agencies and a local contractor. Using information compiled during the 2012 CHA, SJBPH leadership created a Public Health Improvement Plan (PHIP) that included a goal of enhancing the data collection and analysis capacity of the organization; this resulted in the creation of an Assessment and Planning division dedicated to evaluating community health and crafting strategies to provide meaningful public health programs in Archuleta and La Plata counties.

Community Health Assessment: 2017–2018 Process

SJBPH formed an internal planning committee, as well as an external steering committee, to plan and develop the 2017 CHA. The internal planning committee consisted of:

- Deputy Director of Operations – provided oversight for 2017-18 CHA/PHIP process
- Director of Communications – created outreach and communication campaign for 2018 CHA Survey
- Director of Assessment and Planning – designed 2018 CHA Survey; developed timeline for CHA/PHIP project
- Assessment and Planning Specialist – collected primary and secondary sources of health data.

Health data about Archuleta and La Plata counties were collected and then organized according to SJBPH program areas. For example, health data regarding well water and air quality were combined into the category of "Environmental Health," a division within SJBPH. This categorization process enables future targeted program planning to address identified health concerns within the organization's existing structure. The CHA survey was also organized using these categories so that results would be directly applicable to SJBPH program areas. Finally, this report is organized according to the same programmatic areas.

The 2018 CHA survey consisted of 20 questions about the health and well-being of residents of Archuleta and La Plata counties (see appendix). The survey asked respondents to provide answers to open-ended questions, to rank health issues based on perceived impact, and to identify available resources/resource gaps; this eliminated the need for follow-up meetings to prioritize issues.

The external steering committee reviewed and approved the CHA survey in September 2017. The survey was then available from January 2018 through April 2018, in both English and Spanish, in multiple formats: online, paper, and mobile device. The survey was publicized via traditional media channels, social media, advertisements, the SJBPH website, face-to-face outreach at multiple community events, local government meetings, and during staff-client interactions. It was available to all adult community members, regardless of residency status, and all answers were anonymous.

Data Sources

To write this report, the staff at SJBPH documented original input from local residents through the CHA survey. This is referred to as "primary data" – it is original information, obtained directly from respondents. Authors of this report also relied on sources of external survey data, referred to as "secondary data" – this information is available from other data collection systems. Key sources of data used in the development of the 2018 Community Health Assessment include:

- Colorado Department of Public Health and Environment (CDPHE) resources
- Behavioral Risk Factor Surveillance System (BRFSS)
- U.S. Census Bureau American Community Survey (five years combined)
- U.S. Census Bureau Small Area Income and Poverty Estimates
- Colorado Department of Education
- U.S. Bureau of Labor Statistics
- Census Bureau County Business Patterns
- Colorado Child Health Survey
- Colorado Bureau of Investigation
- U.S. Environmental Protection Agency Air Quality System
- Colorado Pregnancy Risk Assessment Monitoring System (PRAMS)
- Healthy Kids Colorado Survey
- Colorado Health Institute
- Colorado Central Cancer Registry
- CDPHE Division of Disease Control and Environmental Epidemiology
- Colorado Health and Hospital Association
- Colorado Health Statistics & Vital Records

Technical Notes

County-level data were used whenever possible in this report; regional or state data were added to supplement the county-level findings or to substitute when county-level data were not available. Regional data most often applied in this report are referred to as "HSR9," or Health Statistics Region 9. Health Statistics Regions were defined by the Colorado Department of Public Health and Environment as 21 divisions of counties across the state by demographic and geographic criteria. Included in HSR9 are Archuleta, Dolores, La Plata, Montezuma, and San Juan counties. In some cases, multiple years were combined by the data source in order to present a stable estimate for the counties. Because county-level data are often based on a small sample size, there still might be important differences between the counties and the state that cannot be determined from available data.

Overall Health Rating

"How would you rate the overall health of your community?"

The overall rating of the two counties was 2.51 on a scale of 1 to 5, with 1 being "very healthy" (lower number equals a healthier community). Archuleta County survey takers rated their community healthier than did La Plata County respondents, at 2.43 and 2.77, respectively. A total of 793 people answered the follow-up question of "why did you select this rating?" Of those who chose "very healthy," many referred to the outdoor physical activity that is readily available in our counties. Of those who chose "very unhealthy" or "unhealthy," many mentioned homelessness, suicide, substance abuse, and a lack of resources for those with low income.

How would you rate the overall health of your community?

| Rating	Percentage
Very Healthy	5%
Healthy	46%
Somewhat Healthy	43%
Unhealthy	5%
Very Unhealthy	1%
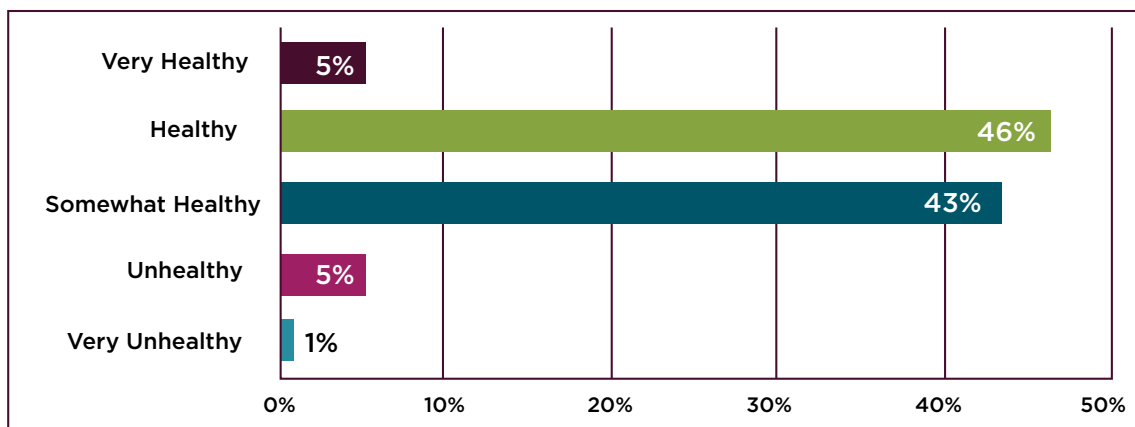
2018 SJBPH Survey Results

Respondent Demographics

A total of 1,082 community members took the time to share their opinions: 248 in Archuleta County and 834 in La Plata County. This response distribution is similar to population distribution across the SJBPH service area. The majority of survey takers completed the questions in English; 27 people took the survey in Spanish. Approximately one-third of the surveys were completed on paper.

What county do you primarily live in?
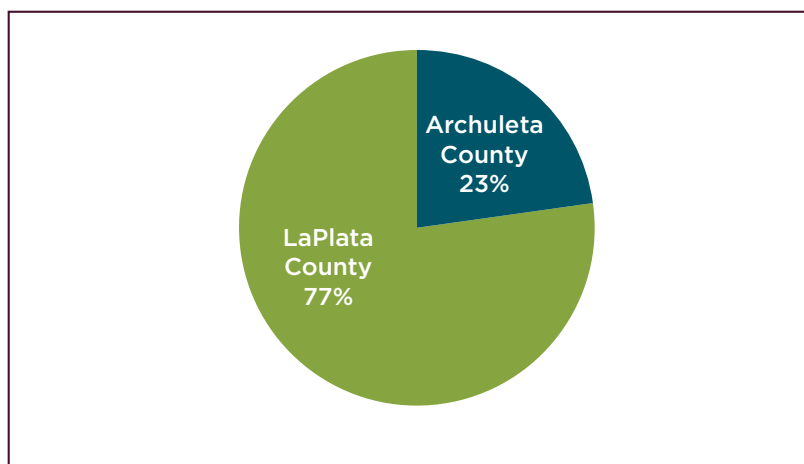
2018 SJBPH Survey Results

Only adults, over 18 years of age, were sampled. The age distribution of survey respondents is fairly close to the age distribution of each county, according to American Community Survey (ACS) data for 2013-2017 (U.S. Census Bureau, 2018a). Based on that estimation of adult population, in our survey, age groups from 18-24 and 65+ were under-sampled, and from 25-54 were oversampled; response from the 55-64 age group was only 0.38% different than the actual proportion of adults in both counties.

According to 2017 ACS data, Archuleta County residents are older, on average, than those in La Plata County. Aging populations may experience additional health concerns and need more intensive health services; according to Healthy People 2020, "[a]ging adults experience higher risk of chronic disease. In 2012, 60% of older adults managed 2 or more chronic conditions" (HP 2020, 2018a). Additionally, researchers have documented that "rural older adults have higher rates of overweight/obesity, physical inactivity and food insecurity than older adults living in suburban areas" (Durazo et al., 2011).
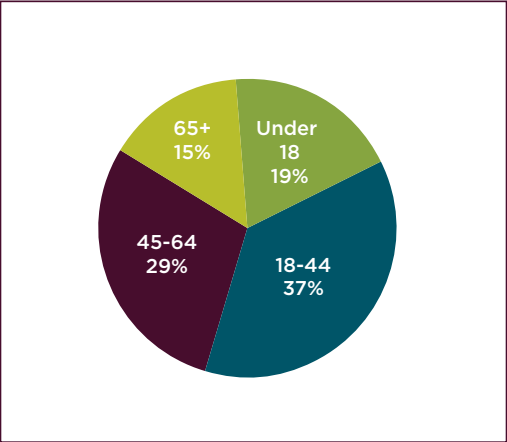
What is your age?
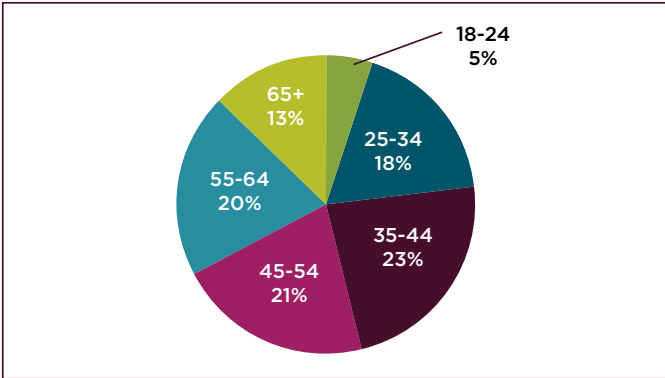
2018 SJBPH Survey Results

Archuleta County Age
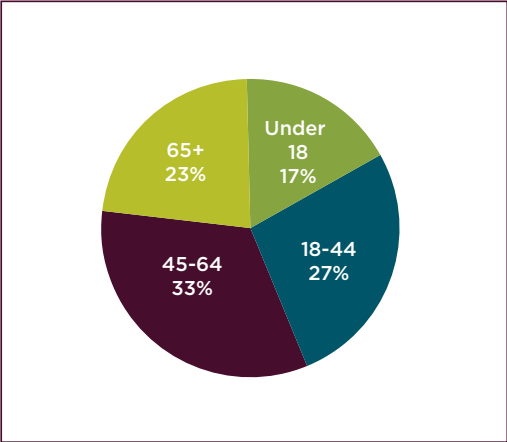
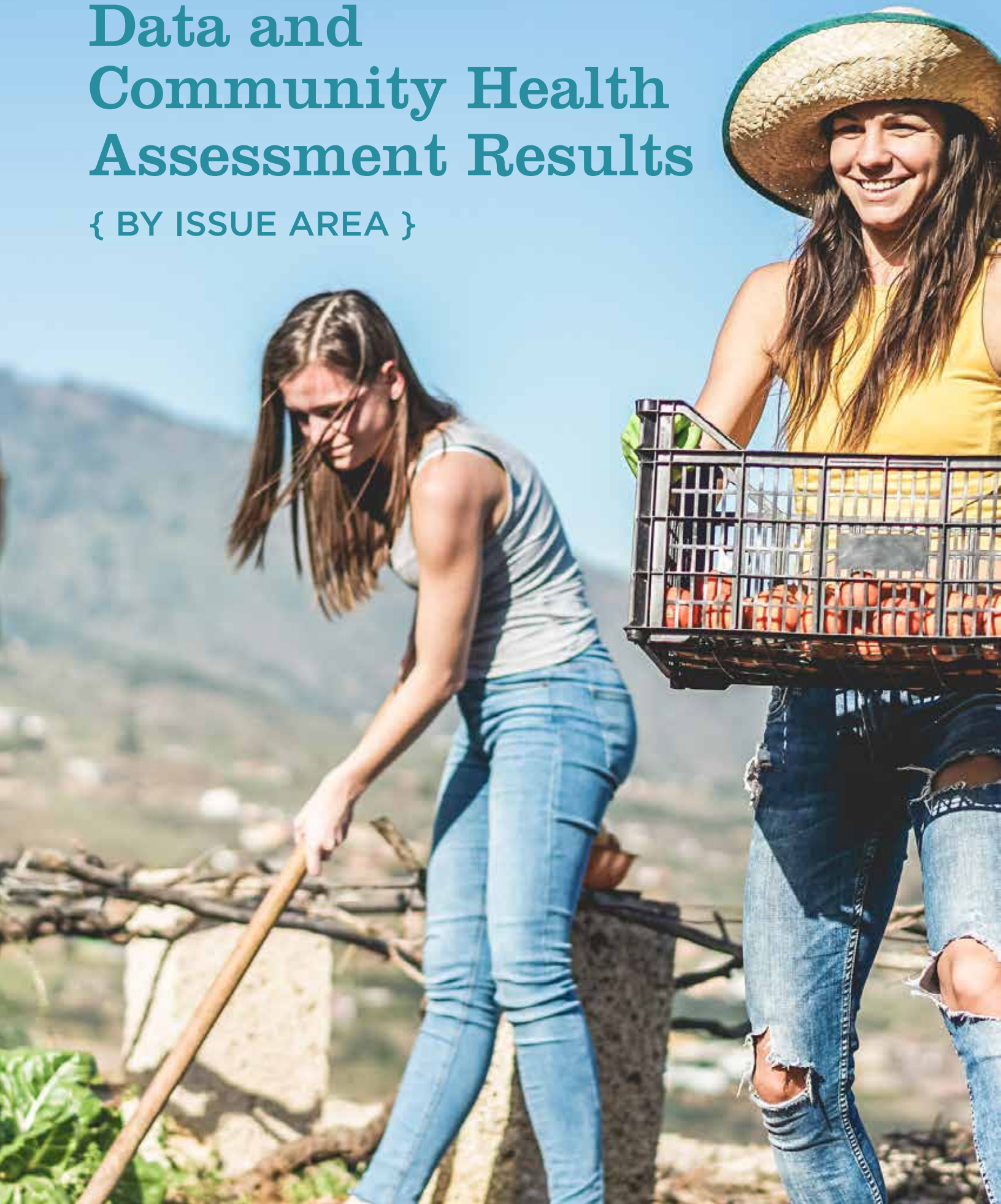
U.S. Census Bureau, 2018-a
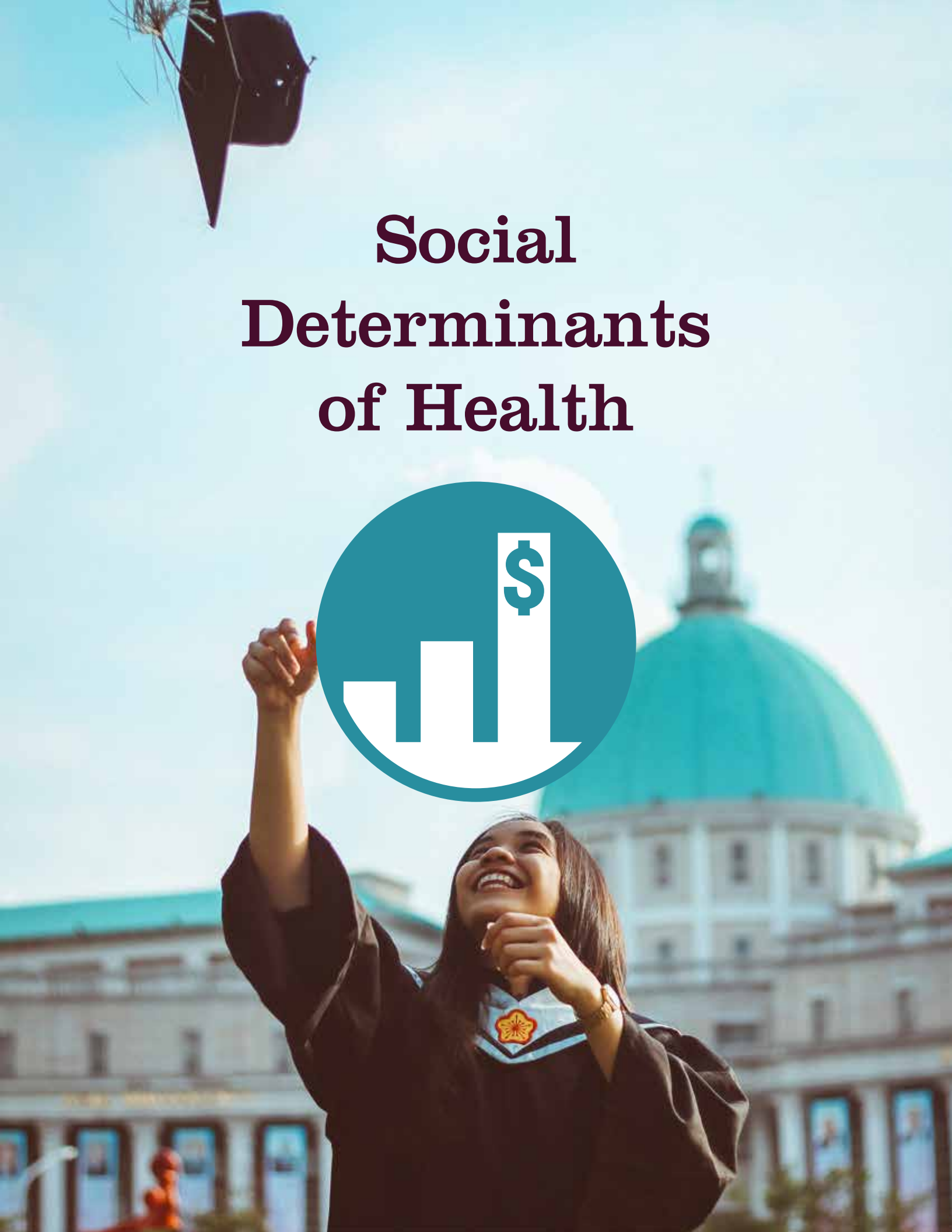
La Plata County Age

U.S. Census Bureau, 2018-a

Data and Community Health Assessment Results

{ BY ISSUE AREA }

Social Determinants of Health

Social Determinants of Health

Social Determinants of Health (SDOH) are described by the Centers for Disease Control and Prevention (CDC) as "[c]onditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes" (CDC, 2018a). Those conditions may include, but are not limited to, factors such as poverty, stress, education, housing, discrimination, social safety networks, and transportation. The World Health Organization (WHO) further states that, "social determinants of health are mostly responsible for health inequities – the unfair and avoidable differences in health status seen within and between countries" (WHO, 2018a). While it may not seem obvious that something like the affordability of housing or economic opportunity can impact an individual's health outcomes, survey respondents overwhelmingly identified social determinants as the major health issues facing our communities across both counties.

**Social Determinants of Health
Highest % Major Concern**
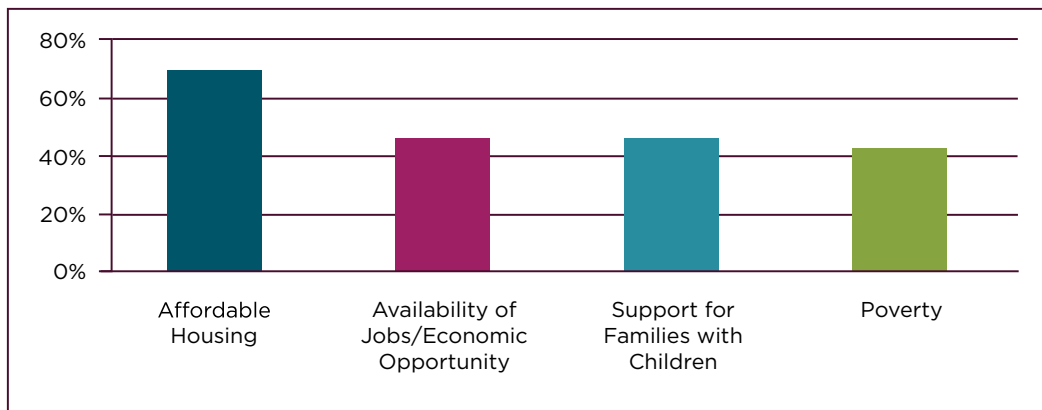
2018 SJBPH Survey Results

"

When asked, "In your own words, what do you believe is the most important health issue facing the residents of your county?" residents across both counties identified social determinants of health as the major sources of poor health outcomes in their communities:

- A feeling of disconnect or isolation – perhaps brought on by economic disparity, lack of affordable housing, and the feeling that everyone around them is successful and not struggling.

- The most important health issue facing residents is the personal sense of control over one's well-being, because it impacts how they behave, especially how they behave when they are experiencing stress. I believe it directly relates to our community's problem with substance abuse and depression and suicide.

- Difficult to say. Probably basic needs such as food, housing & health care/insurance for low income people which includes elderly, children & disabled.

- High grocery prices, lack of transportation.

- Fear & stress.

- Stress – work/life balance.

"

Slightly more than 20% of people skipped this survey question, while others included comments but did not answer the question.

Race and Ethnicity

Nationally, research suggests that racial and ethnic minorities have poorer health outcomes as compared to white, non-Hispanic Americans. Data from the Kaiser Family Foundation indicate that "Blacks and American Indians and Alaska Natives fare worse than Whites on the majority of examined measures of health status and health outcomes…. Findings for Hispanics are more mixed, with them faring better than whites on some measures and worse on others" (Artiga et al., 2016). The 2013-2017 ACS data show that the majority of residents of both Archuleta and La Plata counties are white, non-Hispanic. The open-ended question that asked survey takers about their race or ethnicity reflected the same.

## Race and Ethnicity Population Numbers
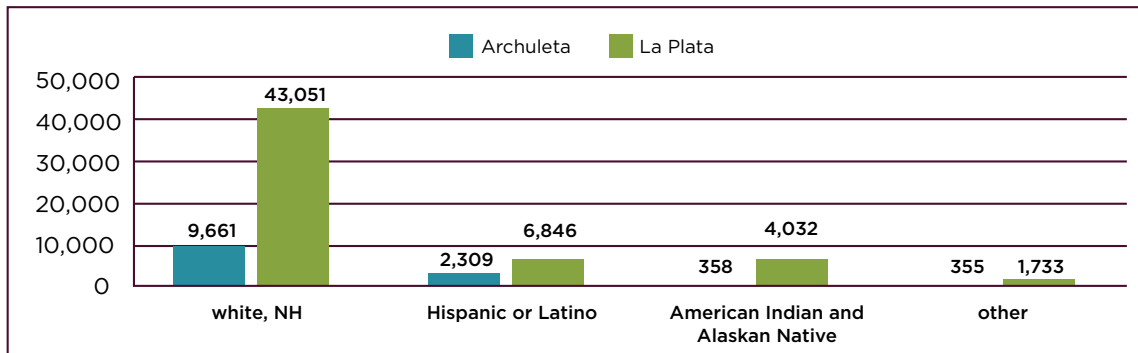
U.S. Census Bureau 2018a

Socioeconomic Status

Some research indicates that socioeconomic status can mitigate the effects of race/ethnicity on health outcomes. A meta-analysis conducted by Williams (1996) demonstrated that "the effect of race/ethnicity on health outcomes tends to diminish significantly when socioeconomic position is controlled for and in some instances the race effect disappears."

% below the poverty level
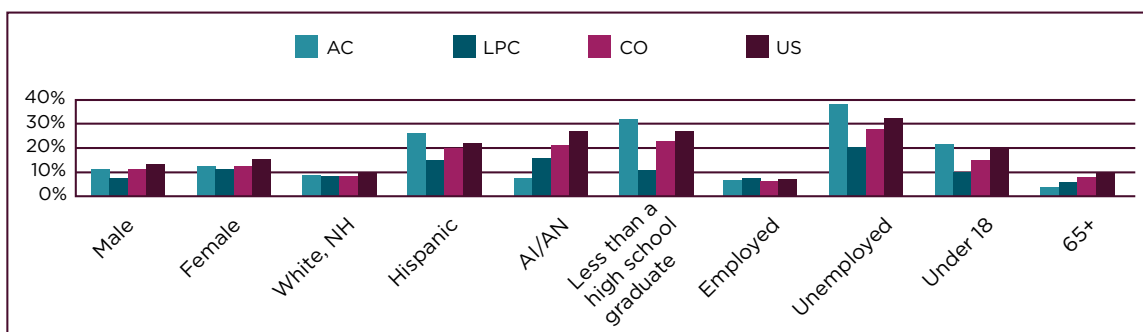
U.S. Census Bureau, 2018 b3

According to the most recent ACS, the median annual income was $62,533 for La Plata County and $48,016 for Archuleta County; the median annual income for the state of Colorado was $65,458. Over 25% of La Plata and Archuleta county households combined have a total income of more than $100,000 (U.S. Census Bureau, 2018c); 21.87% of survey respondents reported a household income over $100,000.

What is your household income?
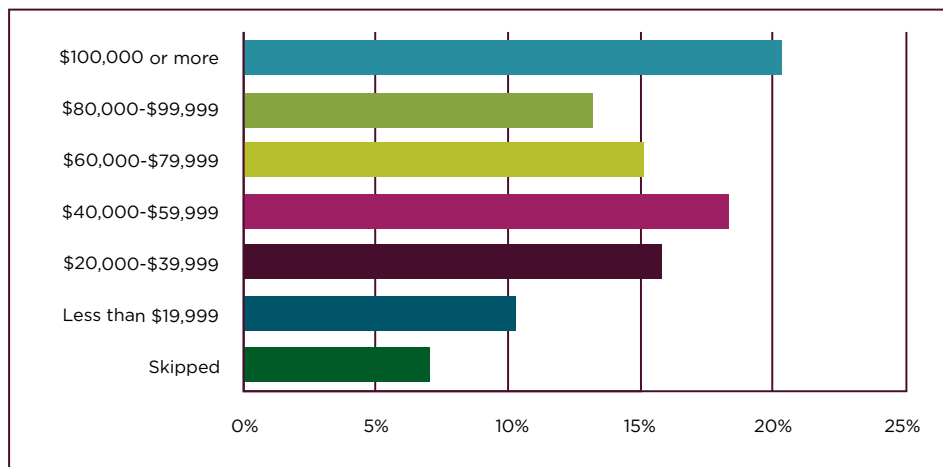
2018 SJBPH Survey Results

> **Many respondents added comments connecting economic opportunity to social determinants of health. Comments related to income included:**
>
> - Income disparities, unequal opportunities for health.
> - Guidance for those in poverty.
> - Stress over cost of living and being able to support their families.
> - Over-working to survive in this community, which leads to stress.
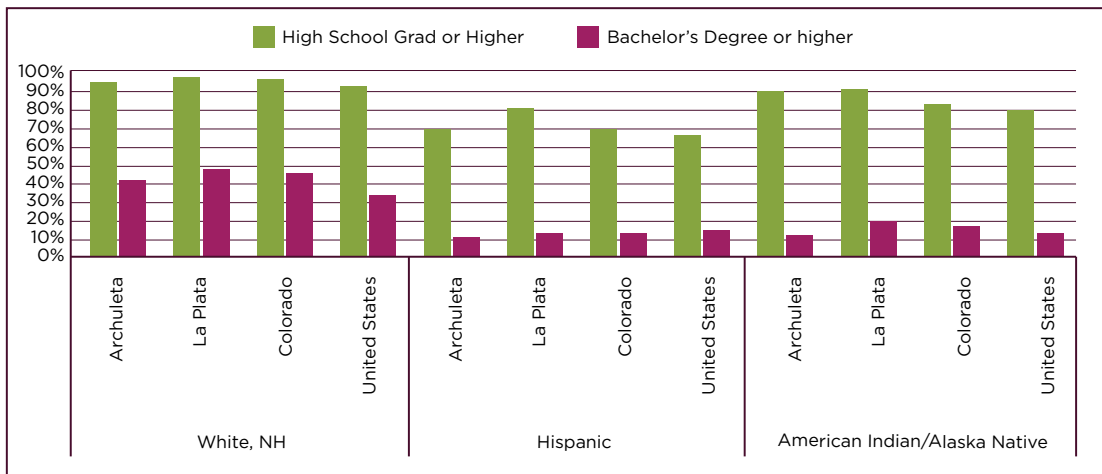
Education

In addition to socioeconomic status, educational attainment can have profound impacts on individual and community health. Zimmerman, Woolf, and Haley (2015) write:

> The health benefits of education accrue at the individual level (e.g., skill development and access to resources); the community level (e.g., the health-related characteristics of the environments in which people live); and the larger social/cultural context (e.g., social policies, residential segregation, and unequal access to educational resources).
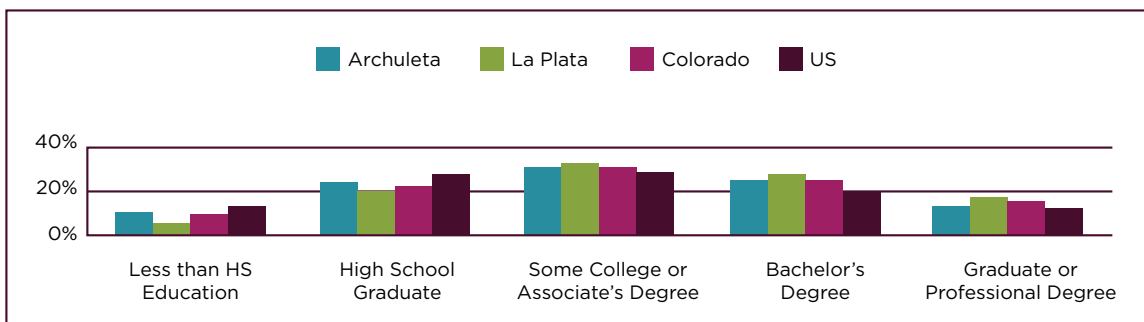
ACS data show that, across several categories, residents of both Archuleta and La Plata counties are slightly more educated than state and national averages. This holds true after data are separated by race/ethnicity in both counties.

Education by Race by Location

U.S. Census Bureau, 2018-c

Education, age 25+

U.S. Census Bureau, 2018-c

Housing

Of SJBPH survey takers, 70.43% indicated that affordable housing is a major issue. Along with the rest of the United States, almost half of the population in Archuleta and La Plata counties who rent spend more than 30% of their monthly household income on rent. For those households with a mortgage, almost one-third of La Plata County residents spend 30% or more of their household income on monthly payments; a higher percentage of residents in Archuleta County (41.4%) spend more than 30% on their mortgages. When people are forced to spend a high percentage of their income on housing, they are often less able to afford health care, nutritious food, and reliable transportation, and may experience higher rates of stress or depression.

Comments related to housing included:

- Lack of stable housing and employment.
- Cost of living. People cannot afford to eat healthy if they can't afford rent.
- Affordable housing, people spend so much of their income on housing that healthcare is hard to find.
- Inadequate affordable housing; seasonal employment/minimum wage jobs.
- Affordable housing – housing is a health issue and housing insecurity and homelessness have a direct impact on the health care system.
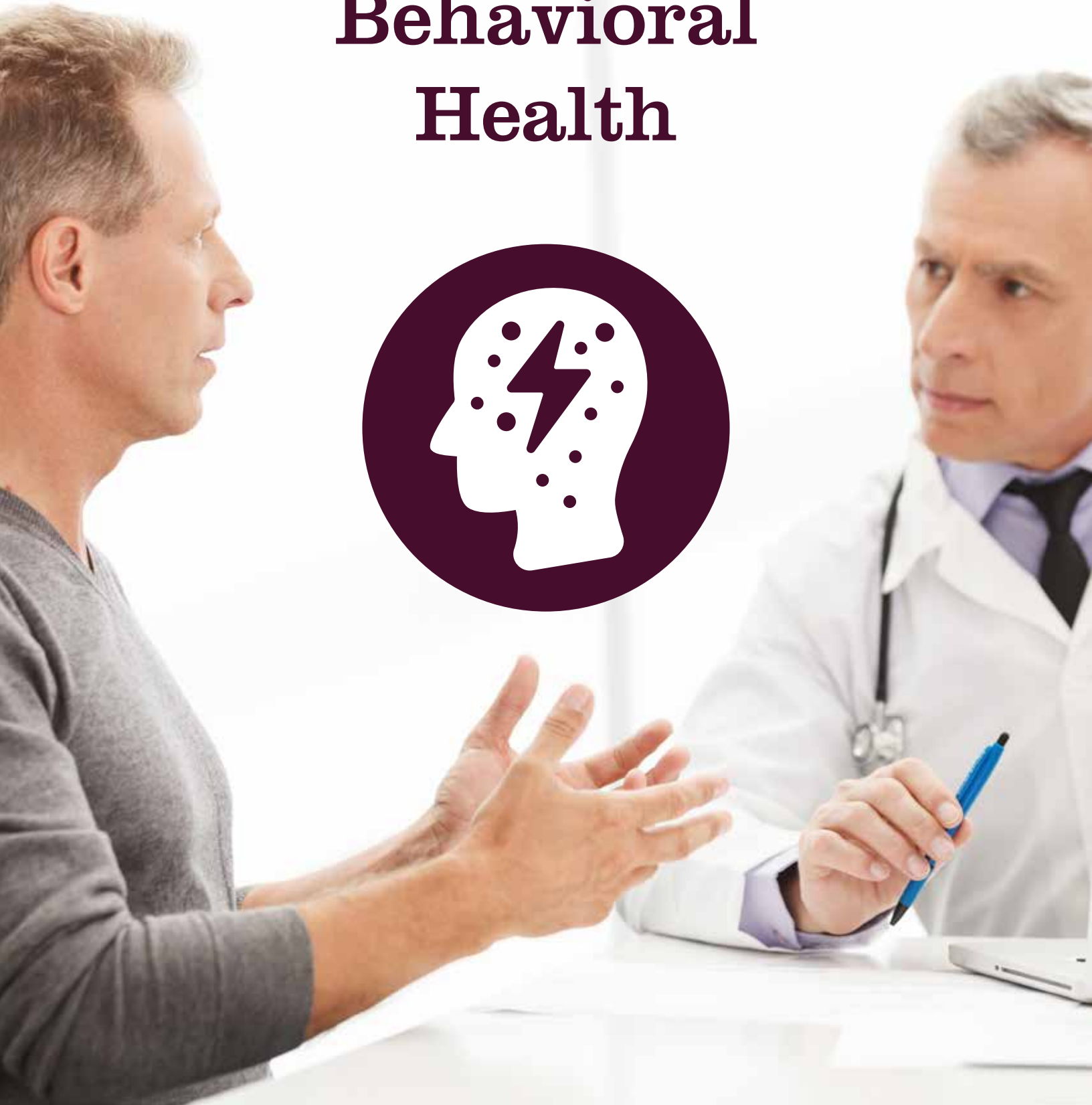
Households spending more than 30% of their income on housing
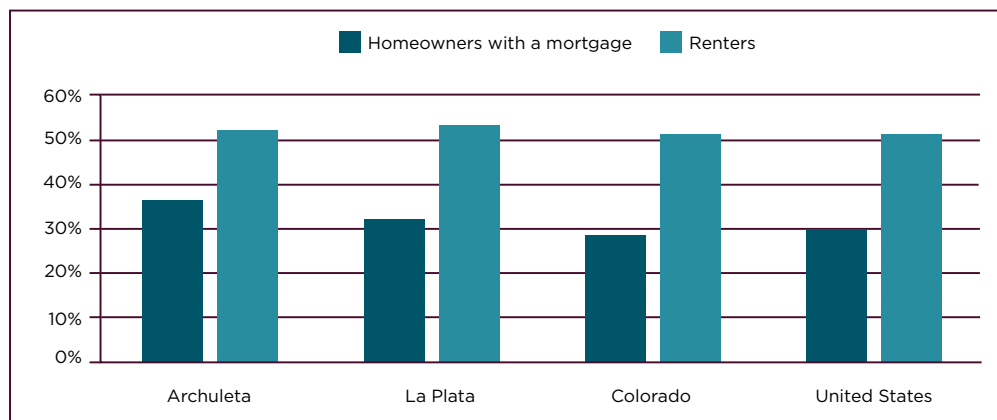

American Community Survey data from 2012-2017

Behavioral Health

Behavioral Health

As defined by the U.S. Substance Abuse and Mental Health Services Administration, behavioral health encompasses the prevention and treatment of both mental health and substance use conditions and disorders (SAMHSA, 2018). Survey respondents in both counties expressed concern over health outcomes related to poor mental health, an issue that has been at the forefront of local media in the past 18 months.

Behavioral Health as a Community Health Concern
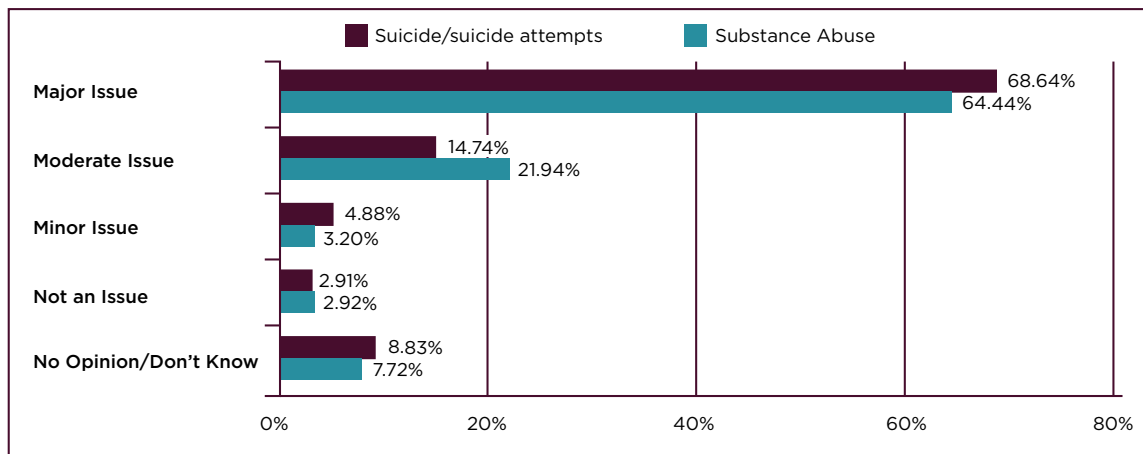
2018 SJBPH Survey Results

> **Community responses regarding both substance abuse and mental health included:**
>
> - I believe the top two health concerns we are facing is drug/alcohol abuse and suicide.
>
> - Drug use and mental health awareness. The mentally ill supporters are the folks that need training, support and awareness. The mentally ill cannot help themselves.

Substance Abuse – Perceived Impacts

In response to the question, "what do you believe is the most important health issue facing the residents of your county?" 282 respondents left comments related to substance abuse, such as:

- Drug use among impoverished families with few protective factors and skills leads to many other struggles including unsupervised/cared for kids, DV [domestic violence] and trauma.

- The drug epidemic and its many effects on the family and community.

- Normalized substance abuse.

- Addiction and the way we address it through law enforcement and prosecution instead of through treatment. We need to use our resources to provide services and treatment.

High School Substance Abuse
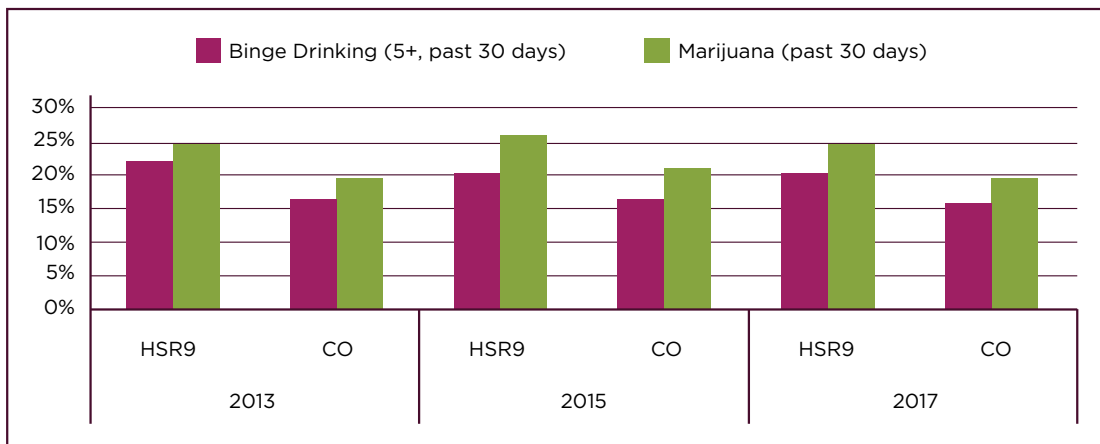
CDPHE, 2018-b

Although our survey did not include youth participants, we surveyed adults to determine their perception of youth substance abuse in our community. Approximately 10% fewer survey respondents answered the questions regarding youth substance use than answered the questions about adult substance use. The range of people who chose "Don't Know/No Opinion" for the five questions about youth substance use range from 16.06% to 30.58%, but for adult substance use the range "not knowing" or having "no opinion" is 8.34% to 17.07%.

Youth Substance Abuse

The following chart includes both regional and state data from the Healthy Kids Colorado Survey. A question regarding binge drinking asks, have you had "five or more drinks in a row, that is, within a couple of hours, on one or more of the past 30 days"? The marijuana question asks students about who "used marijuana one or more times during the past 30 days." For both binge drinking and marijuana use, the regional numbers are higher than the state averages.
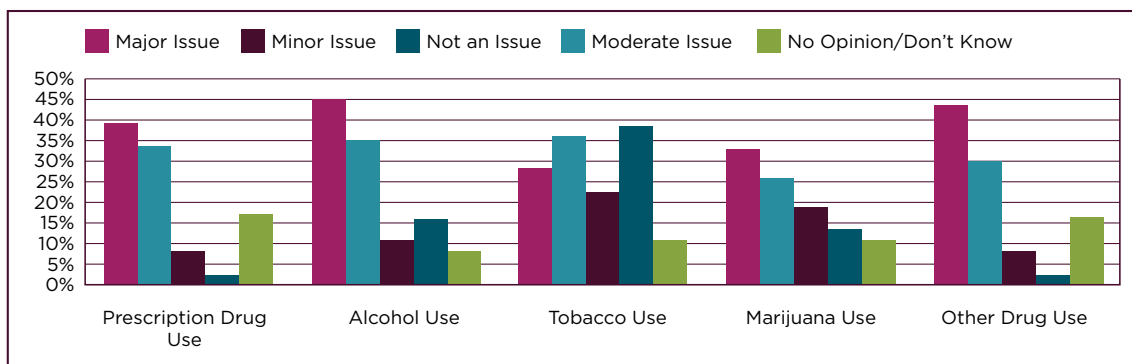
Youth Substance Abuse
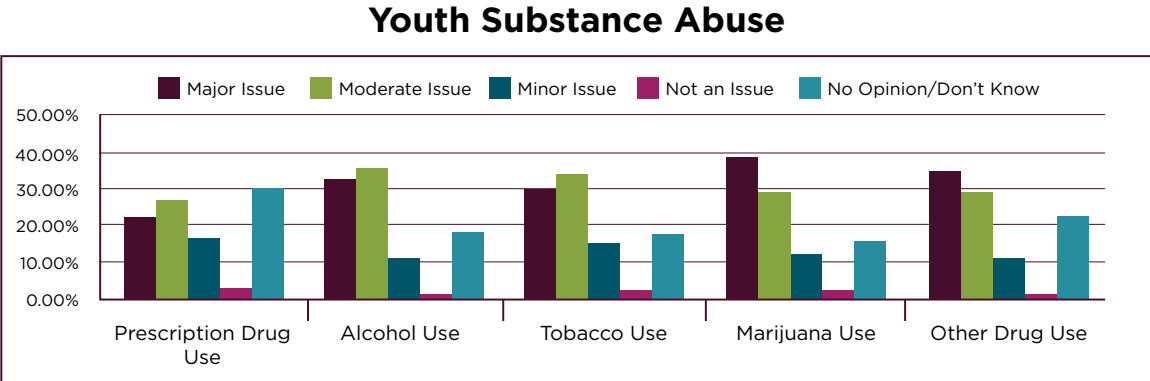
2018 SJBPH Survey Results

Adult Substance Abuse

Data indicate that adult binge drinking rates have decreased in both counties, although both binge drinking and heavy alcohol consumption rates are equal to or higher than state averages. Adult marijuana consumption in La Plata County is higher than the state average.

Adult Substance Use: Archuleta & La Plata

Legend: Major Issue, Minor Issue, Not an Issue, Moderate Issue, No Opinion/Don't Know

Categories: Prescription Drug Use, Alcohol Use, Tobacco Use, Marijuana Use, Other Drug Use

2018 SJBPH Survey Results

Mental Health

Data from the CDC indicate that approximately one in four Americans live with one or more diagnosable mental disorders in a given year, but that the majority of people with diagnosed mental disorders will not receive treatment (CDC, 2005).

The Behavioral Risk Factor Surveillance System asks the question, "Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?" In Archuleta County, the percentage of people who reported poor mental health for 14 or more days decreased in 2014-2016 when compared to 2011-2013 (CDPHE, 2018b). Colorado has stayed relatively stable as a whole; however, in La Plata County, the percentage of people experiencing poor mental health days has increased steadily, and most recently was higher than the state average.
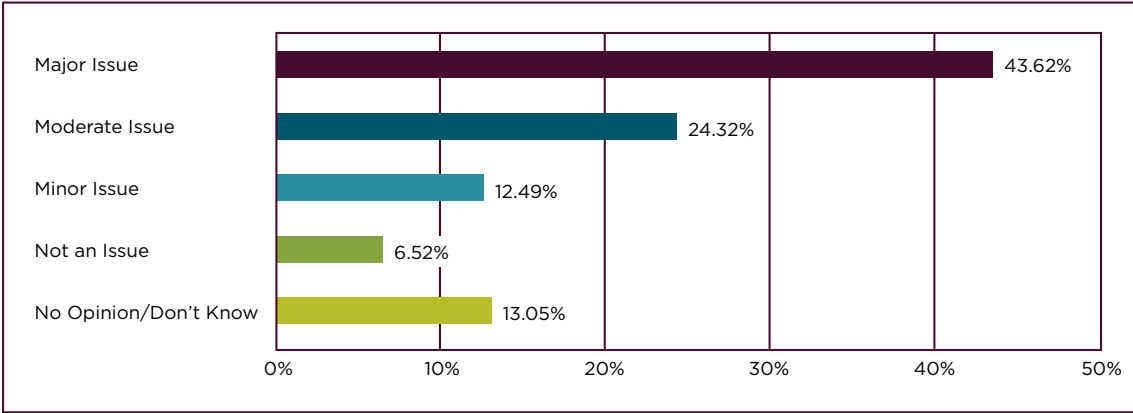
Mental health not good 14+ days in past 30 days

Legend: Archuleta County, La Plata County, Colorado
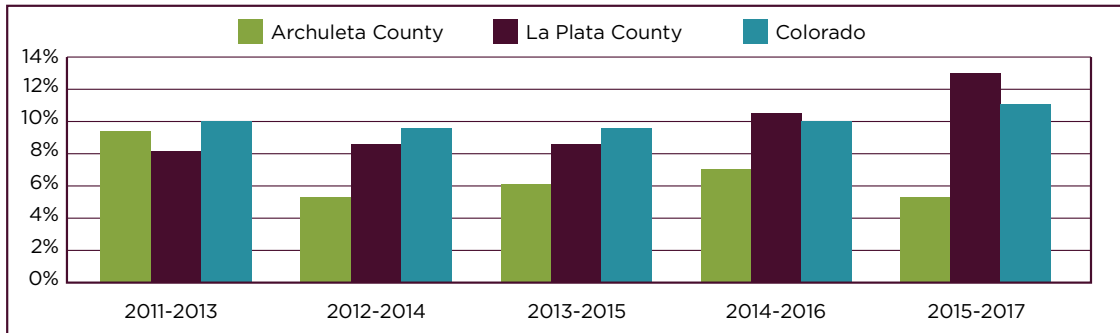
The community commented 332 times about mental health being the most important health issue. Here is a sample of those comments:

- The most important health issue facing residents in our county is mental health. There are many reasons for this such as school shootings, substance use, and financial issues to name a few.

- Mental health: depression, stress, drug abuse, social pressure.

- Mental health seems to be a BIG issue that people are dealing with.

- Mental illness, and lack of resources to recognize/treat/educate.

- Mental health awareness. So many people are AFRAID of mental health or have been taught that it's just their problem to keep to themselves. People need someone to talk to. ALL the time.

- Mental health. Suicide risk is top of mind, but contributors include how we attend to our youth in a larger context, how we can develop the conversation beyond "prevention" to strong mental health over time.

Stigma surrounding mental health needs, whether actual or perceived, remains an identified barrier to seeking and receiving care in both counties.

Stigma of having or seeking treatment for a mental health condition

Major Issue	43.62%
Moderate Issue	24.32%
Minor Issue	12.49%
Not an Issue	6.52%
No Opinion/Don't Know	13.05%

2018 SJBPH Survey Results

Access to Mental Health Support

> **Fifty-seven comments were submitted regarding challenges accessing mental health care. These comments included:**
>
> - Lack of facilities to help in emergency situations with mental health, alcohol and drugs, etc.
> - Mental health accessibility, including substance abuse programs and prevention.
> - Access to affordable mental health care and primary medical care.
> - Access to behavioral health services for complex mental health issues.
> - Adequate access to quality services for specialty care and mental health services for all members of the region.

Access to Mental Health Support

Access to:
- Diagnostic Services
- Individual Therapy/Counseling
- Group Therapy/Counseling or Support
- Treatment Services using Prescription Drugs
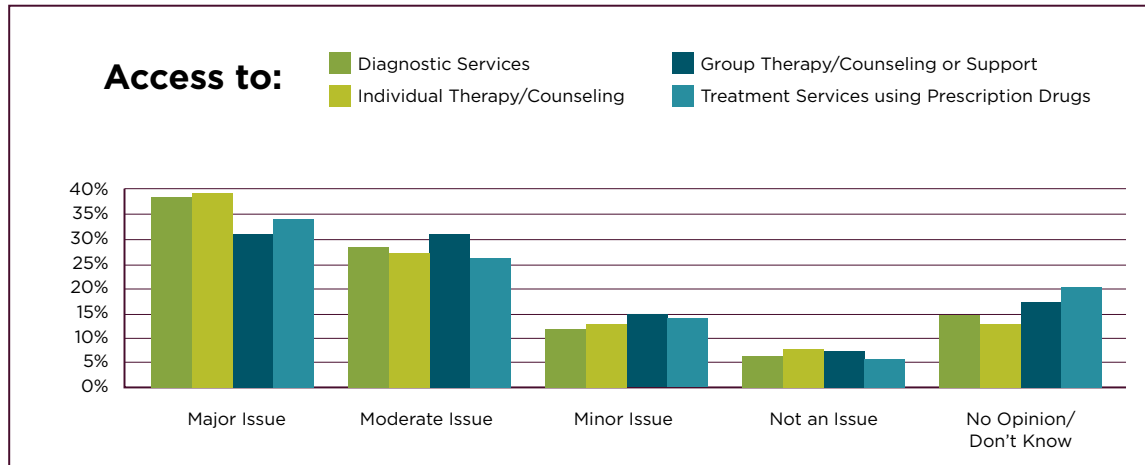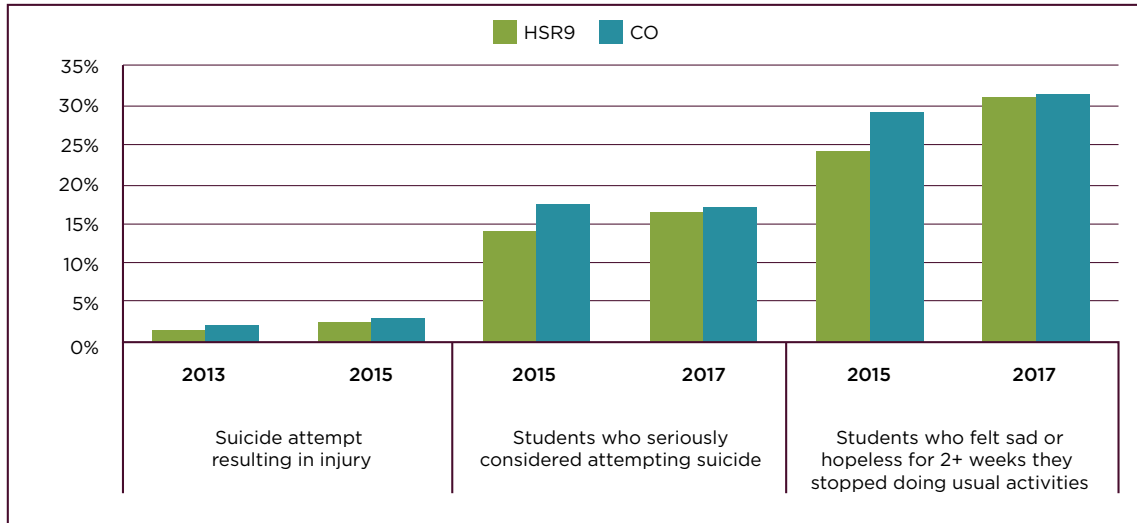

2018 SJBPH Survey Results

Suicide

Suicide awareness and prevention is an ongoing issue around the state and in local communities. As of 2016, in Archuleta County, La Plata County, and the state of Colorado, suicide is the third leading cause of years of potential life lost. Years of potential life lost is defined as "the years of potential life lost due to premature death by estimating the average time a person would have lived had they not died prematurely" (CDPHE, 2017c). It is the sixth leading cause of death in both Archuleta and La Plata counties and the seventh leading cause of death in Colorado.

In Colorado, suicide is the leading cause of death for those between the ages of 10 and 24, according to a report by the Colorado Department of Public Health and Environment. According to the Healthy Kids Colorado Survey, 17% of high school students have seriously considered attempting suicide in 2017.

Suicide and suicide attempts were the top-ranked issue in the survey with the highest number of respondents choosing it as a "major issue" from a list of physical and mental health concerns needing immediate attention in the community.

High School Students in the Past 12 Months

Legend: HSR9 (green), CO (teal)

Y-axis: 35%, 30%, 25%, 20%, 15%, 10%, 5%, 0%

Suicide attempt resulting in injury: 2013, 2015

Students who seriously considered attempting suicide: 2015, 2017

Students who felt sad or hopeless for 2+ weeks they stopped doing usual activities: 2015, 2017

CDPHE, 2018-a

There were 95 comments in Question 3 about suicide. These included:

- The number of suicides seems very high for such a small community.

- Mental health - preventing suicide, helping people access resources to address mental health issues.

- Durango seems to have a high incidence of mental health crisis and high suicide rate, especially in young people.

- I would have to say mental health, in light of the increase in suicides in the past year.

- Obviously mental health as we are experiencing an absolute epidemic of suicides the high suicide rate for such a small county

- Suicide - and access to mental health resources, especially inpatient, and especially for kids.

Environmental Health

Environmental Health

Historically, environmental health is the bedrock of public health practice. Planning and maintaining safe water systems, monitoring air quality, and preventing foodborne illness are critical elements to enhancing community health. Environmental health also can be expanded to encompass the built environment; how we plan and build our communities can promote or discourage exercise, safety, and connectedness.

Water Quality

In the immediate aftermath of the 2015 Gold King Mine spill, water quality and safety was on the forefront of community awareness. In 2018, however, many survey respondents indicated that water quality concerns were only a "moderate" or "minor" issue in both Archuleta and La Plata counties.

Water Quality
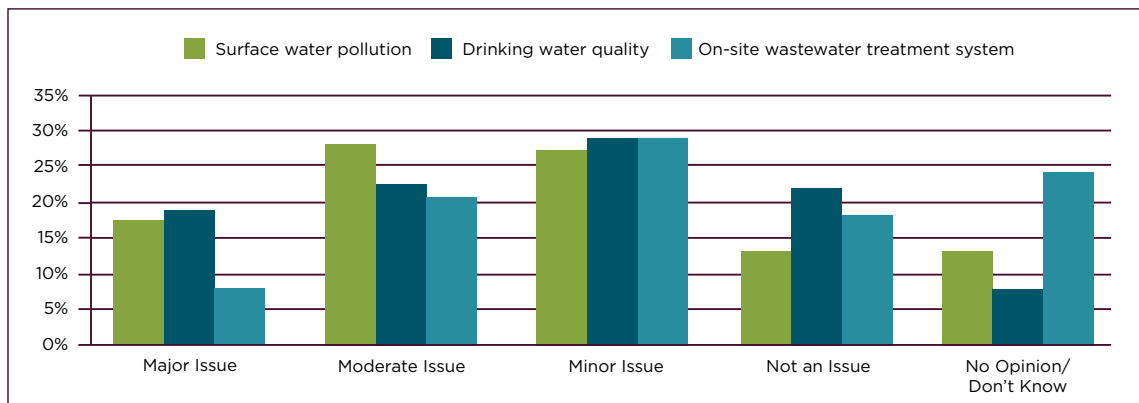
2018 SJBPH Survey Results

> **Few people commented on water when it came to the most important health concern (21), and most of the comments expressed concern about pollution or some form of contamination. The comments from Question 15 related to water included:**
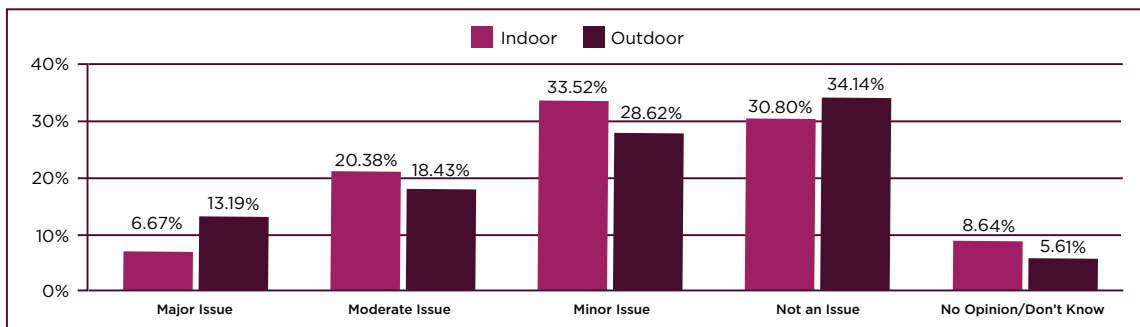>
> - Water needs to be free of chemicals.
> - Health and ecosystem impacts of the Gold King Mine spill.
> - I already know that my water is not good, I didn't bother with a test I just choose not to use it for any edible purposes.

Air Quality

Air quality may refer to the breathability and health of both indoor and outdoor air. WHO data show that 9 out of 10 people worldwide breathe polluted air, and that 1 of every 9 deaths worldwide is related to polluted air (WHO, 2018b). In Colorado, air quality reporting is done by region; both Archuleta and La Plata counties are in the southwestern region. CDPHE states that this region complies with federal air quality standards (CDPHE, 2018e). Few respondents selected air quality as a major issue, although this response may be different during wildfire season, when smoke from across the southwest impacts the air quality in both counties.

Air Quality

Indoor ■ Outdoor

	Major Issue	Moderate Issue	Minor Issue	Not an Issue	No Opinion/Don't Know
Indoor	6.67%	20.38%	33.52%	30.80%	8.64%
Outdoor	13.19%	18.43%	28.62%	34.14%	5.61%

2018 SJBPH Survey Results

According to the CDPHE Environmental Public Health Tracking Program private well water dataset, there are 1,647 wells in Archuleta County and 7,874 in La Plata County (CDPHE, 2018c). In 2011, 48.9% of La Plata County residents reported using a private well, compared to 24.6% of Region 9 residents and 9.8% of Colorado residents overall (CDPHE, 2018d). Approximately 25% of survey respondents said that their main drinking source is a well, indicating that our survey may not have fully captured La Plata County residents who rely on private wells for drinking water. Of those who use a well, 70% reported having it tested for contaminants.

When well-owners were asked why they had their well tested, they responded:

- To check levels of heavy metals.
- I wanted to make sure it was safe to drink.
- Oil and gas pollution.
- Want to know what I'm drinking. Have tested for metals – not chemicals because that is too expensive.

When well-owners were asked why they haven't tested their well, they responded:

- Not concerned about contaminants.
- Renting.
- Expensive.
- Not sure how to test.

Twenty-five people commented on air quality when asked about the most important health concern. These comments included:

- Coal burning train, low lying valleys caught between mountain ranges, desert dust storms.
- There is a lot of burning in our area/the county (fireplaces, outside fires), radon is a concern, and there are dusty roads (particulate matter and diesel/gas "fumes").
- Air pollution from coal smoke of train and other environmental pollution from gas industry.
- Fracking wells/methane air pollution.
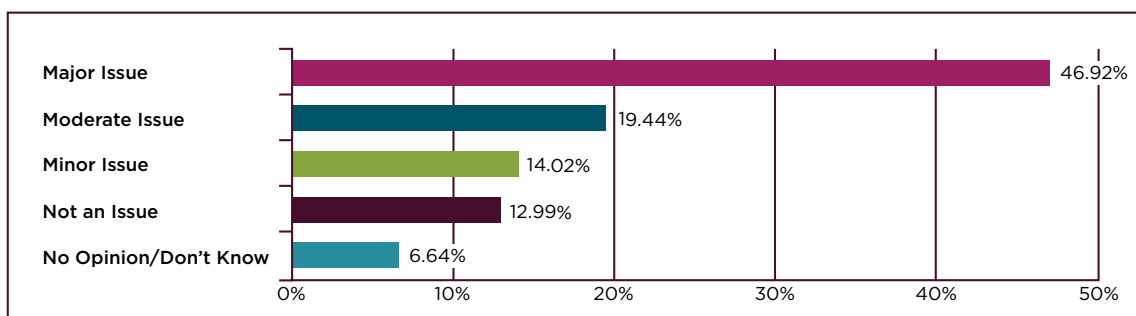
Climate Change

Leading public health organizations such as the WHO, CDC, American Public Health Association (APHA), and National Institutes of Health agree that as the Earth's climate changes, human health is impacted. Specifically:

Climate change can harm the water supply, increase vector-borne disease and increase extreme weather events. Vulnerable populations such as communities of color, the elderly, young children, the poor and those with chronic illnesses bear the greatest burden of injury, disease and death related to climate change.

(APHA, 2018a)

Almost half of survey respondents indicated that they believed climate change was a "major" issue for community health.
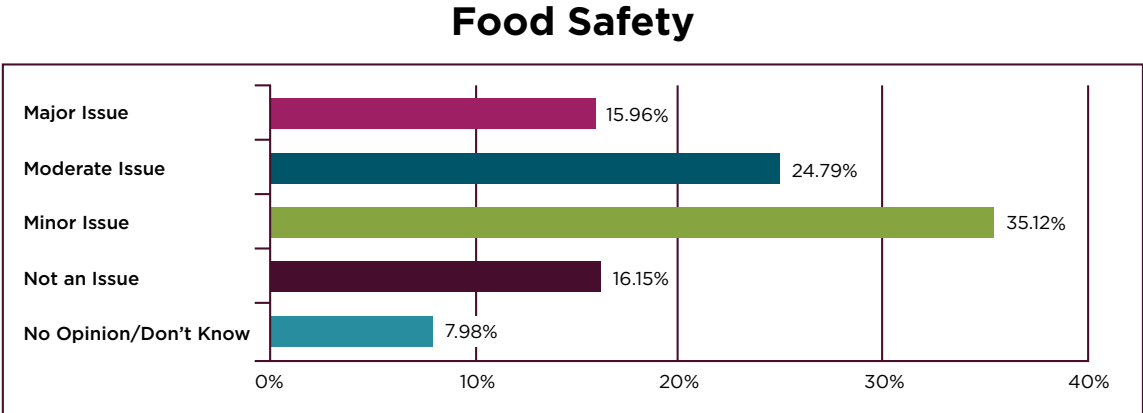
Climate Change

Category	Percentage
Major Issue	46.92%
Moderate Issue	19.44%
Minor Issue	14.02%
Not an Issue	12.99%
No Opinion/Don't Know	6.64%

2018 SJBPH Survey Results

Food Safety

Annually, foodborne illnesses sicken 48 million Americans, leading to nearly 3,000 preventable deaths (HP 2020, 2018b). Both Archuleta and La Plata counties support large tourism industries that depend, in part, on safe restaurant and food-handling practices. In Question 15, survey respondents selected "Food Safety" as the third-highest weighted environmental health concern.

Food Safety

Category	Percentage
Major Issue	15.96%
Moderate Issue	24.79%
Minor Issue	35.12%
Not an Issue	16.15%
No Opinion/Don't Know	7.98%

2018 SJBPH Survey Results

Community comments regarding food safety when asked about "opinions on environmental issues" indicate a lack of public understanding about the food safety programs that exist in both Archuleta and La Plata counties, as well as the rigorous inspection requirements carried out by public health staff in conjunction with restaurant owners and operators.

Health Behaviors

Health Behaviors

Health behaviors are the beliefs that people have and the choices that they make that can impact their well-being. Some examples of health behaviors include using or abstaining from alcohol and tobacco, wearing seat belts, exercising, and eating healthful foods. Health behaviors are influenced by external factors, such as social norms, policies and regulations, economic conditions, and access to resources. According to the CDC, "only 1 in 4 rural adults practices at least 4 of 5 health-related behaviors that can prevent chronic disease such as not smoking, maintaining a normal body weight, being physically active, not drinking alcohol or drinking in moderation, and getting sufficient sleep. Practicing health-related behaviors can prevent chronic diseases" (CDC, 2019b). Making healthy choices the easiest, most accessible choices will allow people to attain their best health and prevent chronic illness.

Obesity

According to the CDC, "[o]besity is a serious concern because it is associated with poorer mental health outcomes, reduced quality of life, and the leading causes of death in the U.S. and worldwide, including diabetes, heart disease, stroke, and some types of cancer" (CDC, 2018b). Many public health researchers believe that a multi-level, systems-based approach to improving available nutrition while reducing barriers to activity will be required to reduce obesogenic factors in our society (Bassett and Perl, 2004).

Colorado has the lowest adult obesity rate of any state at 22.3% (U.S. News and World Report, 2018). In 2016, in Colorado, non-Hispanic Blacks and Hispanics were more likely to be obese than non-Hispanic whites. Those with lower education levels and income at less than 250% below the federal poverty level were also more likely to be obese. This discrepancy indicates that physiology alone does not determine obesity rates; social determinants of health are key contributors.

Unfortunately, the obesity rate has been increasing steadily across all groups over the past five years. Obesity rates for adults living in La Plata and Archuleta counties are consistently lower than state rates. This may be related to the fact that over 85% of adults report that they partake in leisure-time physical activity.

Overweight and Obese Adults
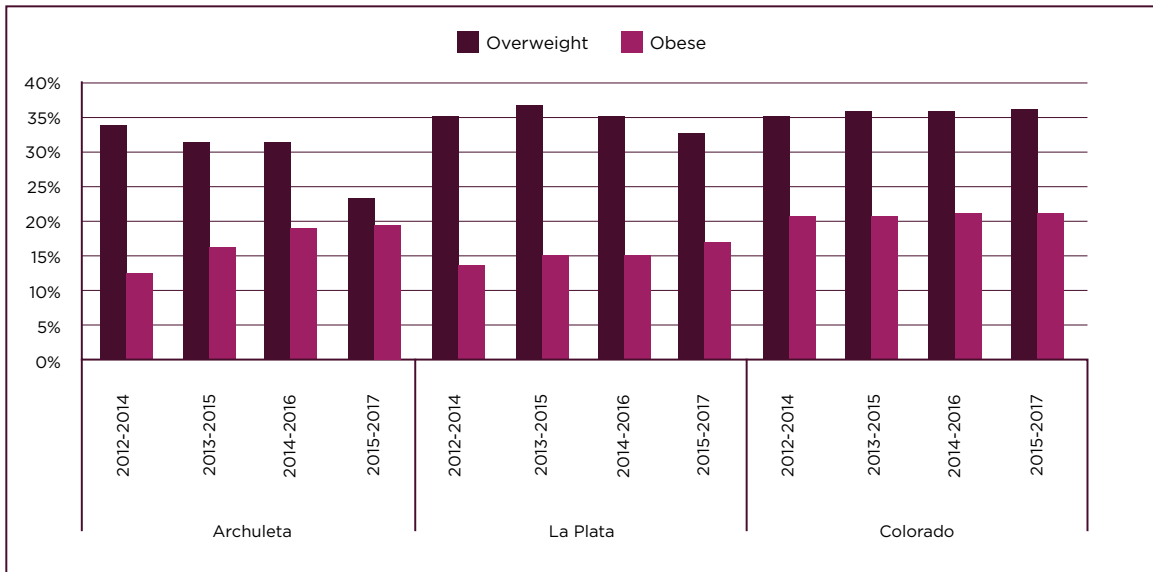
Overweight Obese

CDPHE, 2018d

The survey did not include youth respondents; however, available data indicate that high school students in Region 9 are more likely to be overweight or obese than their statewide counterparts, although this is not a statistically significant difference.

Overweight and Obese High School Students
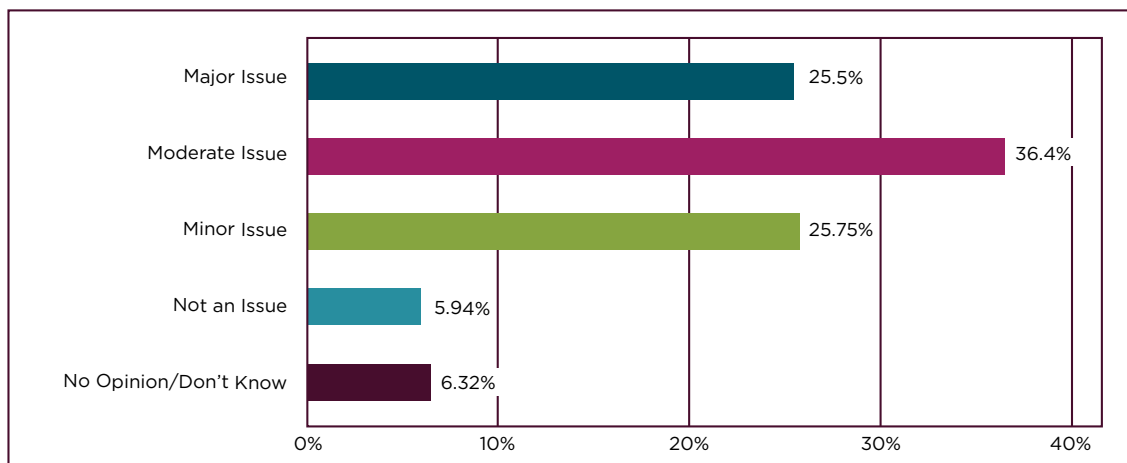

Overweight Obese
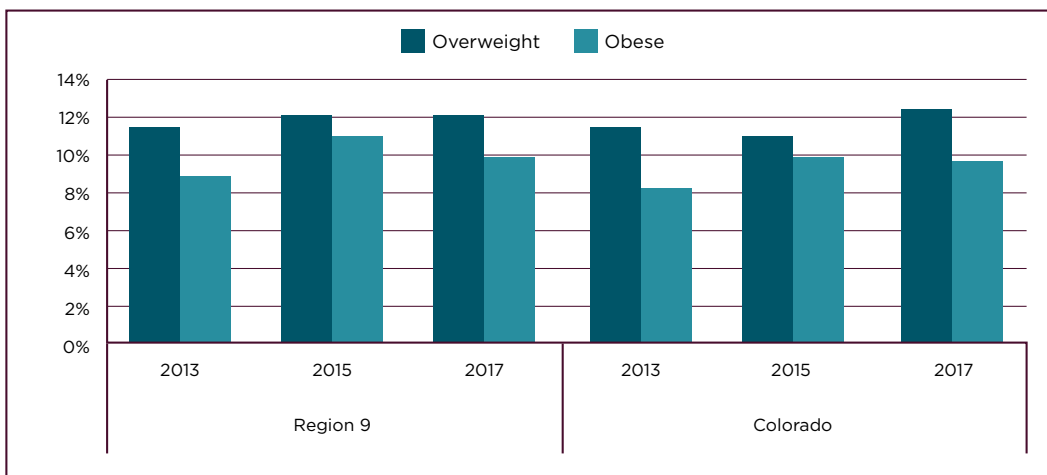
CDPHE, 2018a

> **Most of the comments from the survey regarding obesity (Question 4) were about a good diet and education around healthful eating habits. These comments included:**
>
> - A good diet affects EVERYTHING – true farmers market mentality of 'grow your OWN' is the best thing we have going for us!
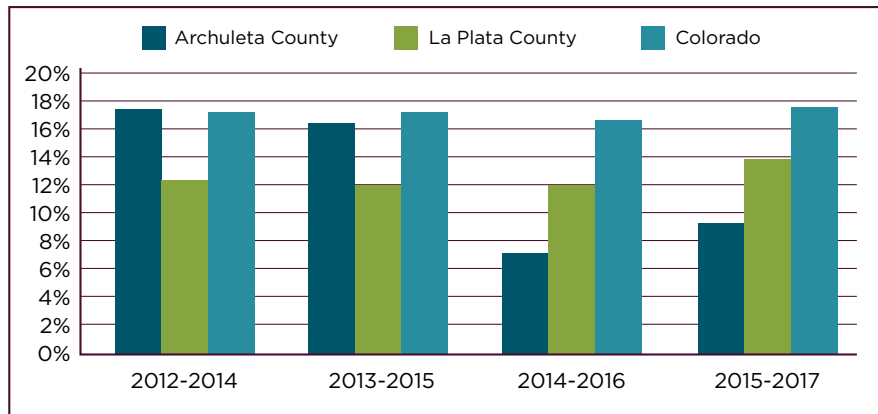> - Education on healthy living – diet, exercise, etc.

There were 90 comments about obesity, 34 about activity, and 75 about food when asked "what do you believe is the most important health issue facing the residents of your county?"

Obesity as a Community Health Concern

| Category	Percentage
Major Issue	25.5%
Moderate Issue	36.4%
Minor Issue	25.75%
Not an Issue	5.94%
No Opinion/Don't Know	6.32%

2018 SJBPH Survey Results

No Leisure Time Physical Activity

CDPHE, 2018-b

Nationally, western Colorado has a reputation as a leader in outdoor recreation opportunities. Data suggest that high school students in the region spend less time watching television or playing video games than other Colorado teens. Respondents indicated that the issue of "availability of exercise or fitness opportunities" was of low concern.

High School Students that:
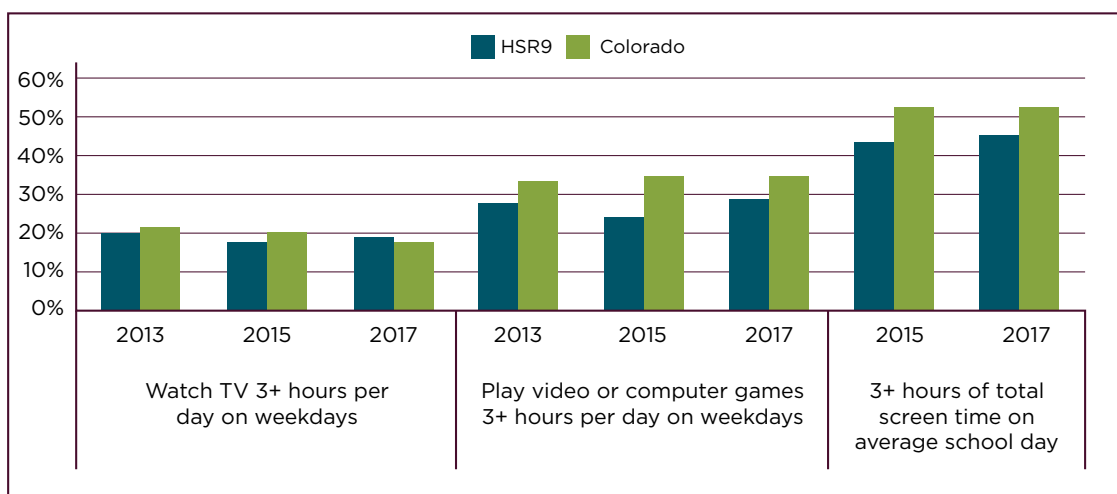
CDPHE, 2018-a

Stress, food insecurity, working multiple jobs, and being unable to afford recreational activities also may contribute to the prevalence of obesity (HP 2020, 2018c). Due to socioeconomic disparities in Archuleta and La Plata counties, some residents are at increased risk for the factors that contribute to obesity and related chronic disease. Only 22.6% of survey takers think that access to healthy foods is a major issue, although many people commented on food access.

"

Many respondents commented on financial disparities and their impact on health. These comments included:

- Access to healthy food that is affordable and ability to exercise. This is the root of disease – poor food options and lack of activity.

- Cost of living. People cannot afford to eat healthy if they can't afford rent.

- Families who come from low socio-economic situations do not have the same opportunities to access nutritious food choices. Same thing re: getting regular exercise.

- I feel that access to good food for all is the most important health issue. The cost of living is so high in this county, food is not cheap. Healthy food is not cheap. And the rural residents do not have the same access to groceries that city of Durango folks have.

- The high cost of living forces people to work multiple jobs to provide for their families, leading to unhealthy diets and excessive fatigue.

"

Unintended Pregnancy

According to Healthy People 2020, "[f]amily planning is one of the 10 great public health achievements of the 20th century" (HP 2020, 2018d). For many women, family planning is their primary contact with a health care provider and their usual source of care. Across the country, almost half of all pregnancies are unintended; in Colorado, the unintended pregnancy rate is under 40%.
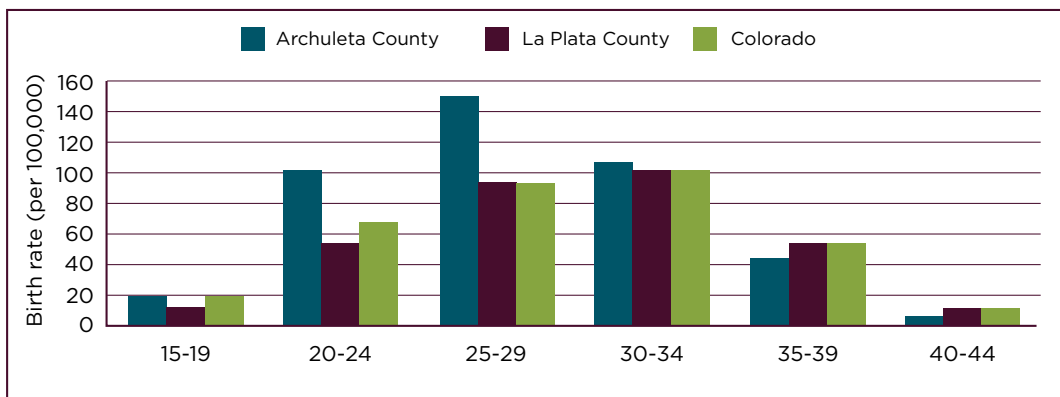
Unintended Pregnancy, 2012-2014
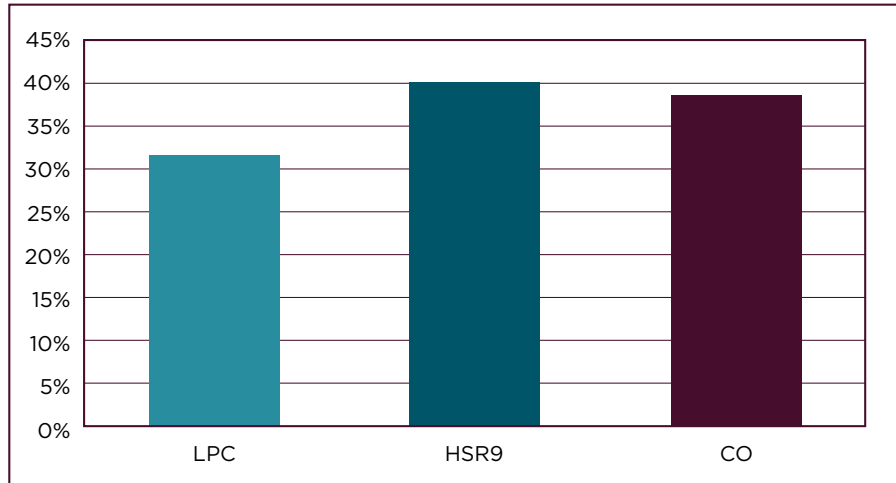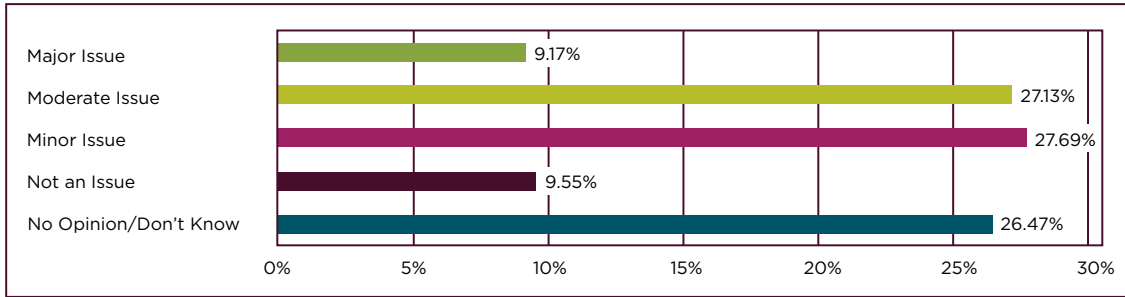

HP 2020, 2018-e

This chart indicates that in Archuleta County, the birth rate is higher than the state average for women of lower maternal age. The rates of teen births are similar in both counties and are close to the state average. This may explain why few respondents indicated that the teen birth rate was a "major issue."

Birth rate, by age and county, 2013-2017

Maternal Age CDPHE, 2017-a

Teen Birth Rate

|	
Major Issue	9.17%
Moderate Issue	27.13%
Minor Issue	27.69%
Not an Issue	9.55%
No Opinion/Don't Know	26.47%

2018 SJBPH Survey Results

## Cardiovascular Risk Factors: Tobacco Use

The APHA reports, "Despite dramatic declines in the U.S. smoking rate, cigarette use remains the leading cause of preventable disease and death in the nation" (APHA, 2018b). In 2016, 15.6% of Colorado adults smoked, compared with the national average of 17.1% (Truth Initiative, 2018). Rates of cigarette use are declining across Archuleta and La Plata counties, although youth vaping is on the rise. In Colorado, white people, people who live at over 250% of the federal poverty level, and people with college education are least likely to smoke cigarettes.

Current Tobacco Use

Legend: Archuleta County, La Plata County, HSR9, Colorado
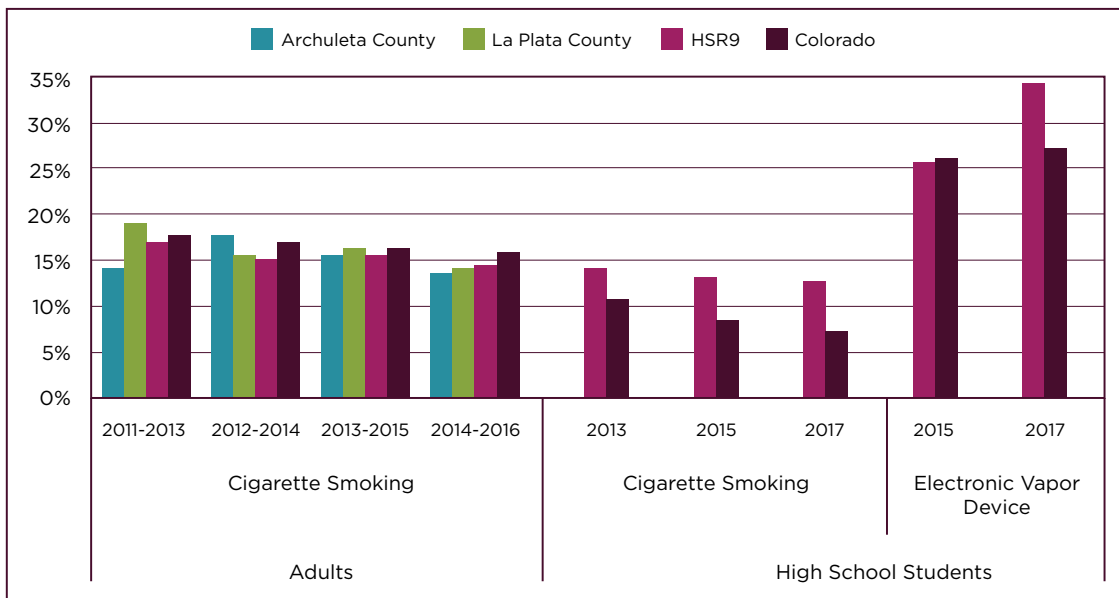
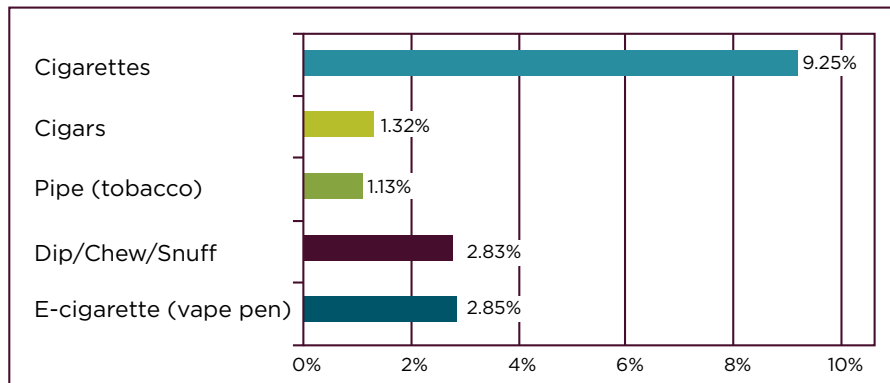Adults CDPHE, 2018-d
High School CDPHE, 2018-a
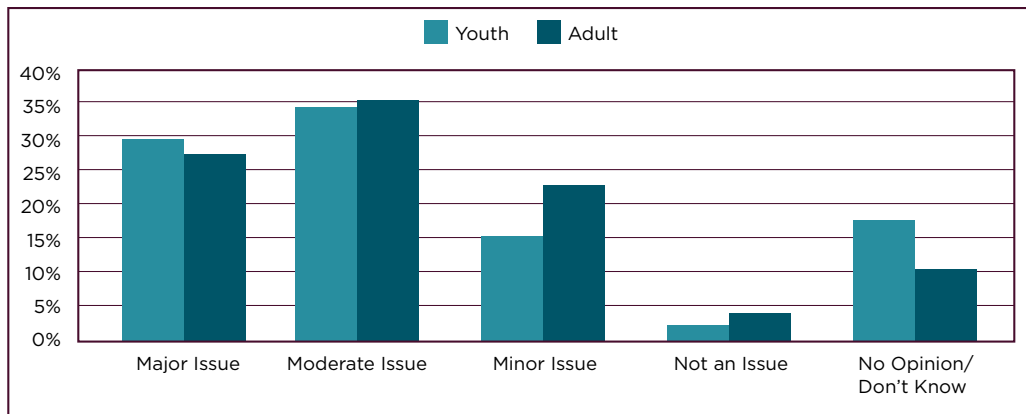
Current Cigarette Smoking, CO
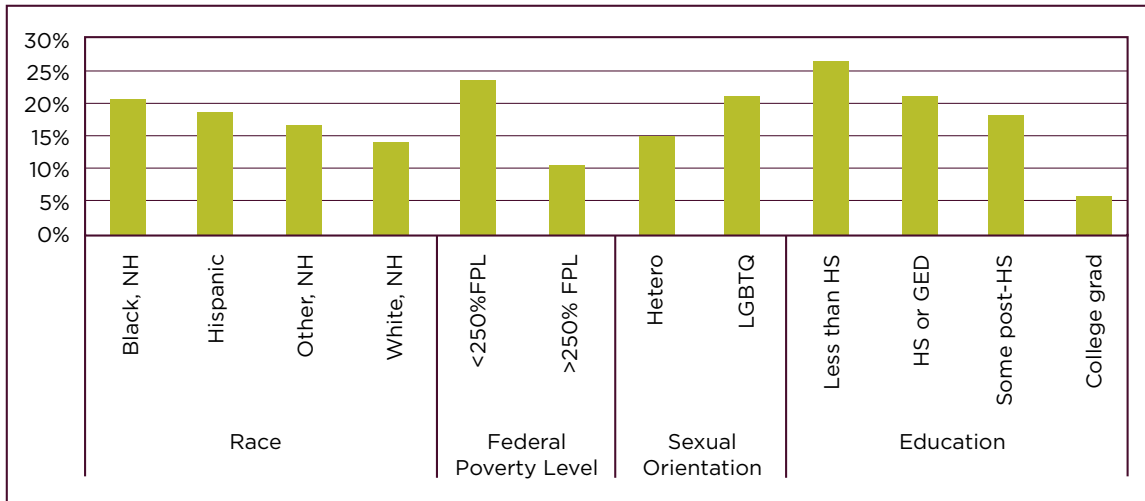
CDPHE, 2018-c

The survey may have under-sampled tobacco users across both counties, as only 9.25% of people indicated that they use cigarettes, and the actual rate is closer to 14% (CDPHE, 2018b). The majority of respondents identified tobacco use as a "moderate" or "major" issue facing our communities.

Percent of people who use the following tobacco products:

Product	Percent
Cigarettes	9.25%
Cigars	1.32%
Pipe (tobacco)	1.13%
Dip/Chew/Snuff	2.83%
E-cigarette (vape pen)	2.85%

2018 SJBPH Survey Results

Tobacco Use

Legend: ■ Youth ■ Adult

Category	Youth	Adult
Major Issue	~30%	~27%
Moderate Issue	~34%	~35%
Minor Issue	~15%	~23%
Not an Issue	~2%	~4%
No Opinion/Don't Know	~18%	~10%

2018 SJBPH Survey Results

"

When asked, "In your own words, what do you believe is the most important health issue facing the residents of your county?" community responses related to tobacco included:

- 2nd hand smoke from nicotine addicts.

- Tobacco use is prevalent.

- I am new to town and this is the healthiest community I have ever lived in. I still see people smoking a lot.

"

Motor Vehicle Injury and Seat Belt Use

The Society for Public Health Education states that, "[i]njuries are the leading cause of death among people ages 1-44" and emphasizes that "[i]njuries have identified risk and protective factors making them preventable" (SOPHE, 2018). Injury prevention can occur at the individual level, such as a person using a seat belt, and at the policy level, such as mandatory seat belt use laws.

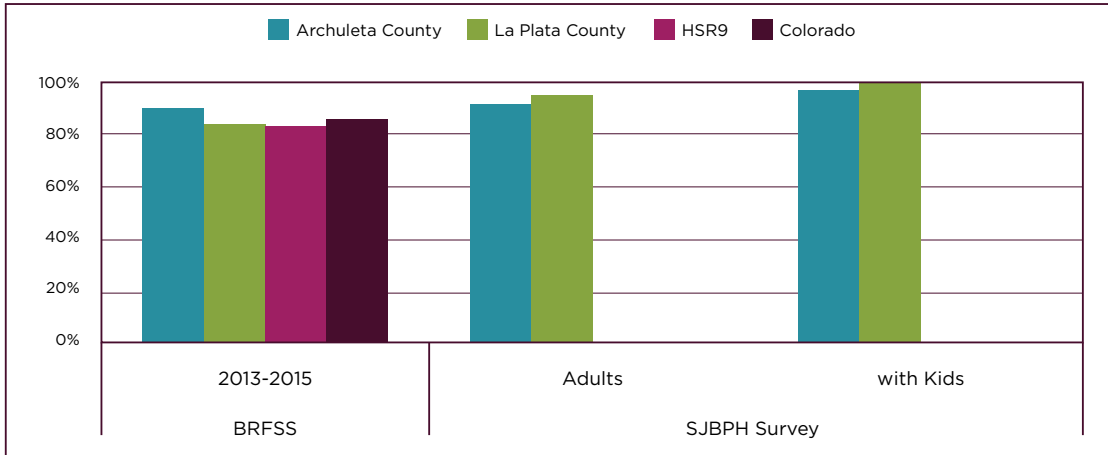## Age-adjusted Rate of Motor Vehicle Accident Injuries (per 100,000 people) (2013-2015)
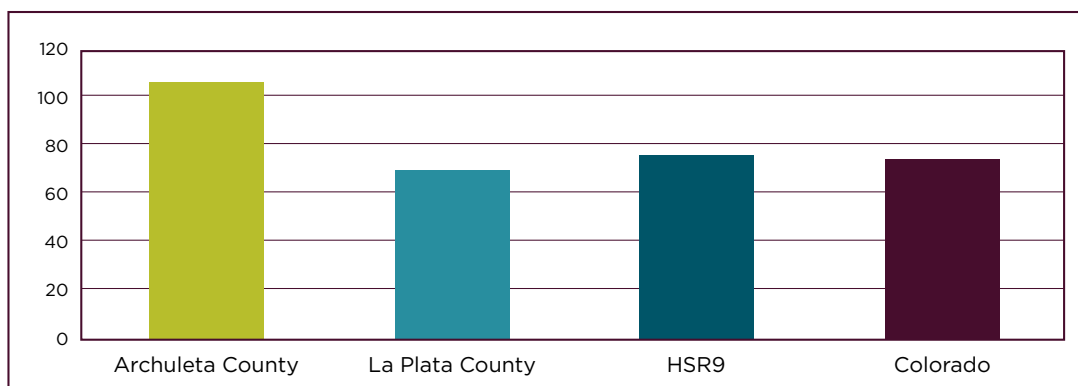
Includes both non-fatal and fatal, CDPHE, 2018-d

Most survey respondents indicated that they "always" wear a seat belt. Age-adjusted rates allow all age groups to be considered and compared. In the region, Archuleta County has a higher-than-average rate of motor vehicle accident injuries, although this may be impacted by smaller sample size. La Plata County data are similar to Region 9 and Colorado data, while Archuleta County data are much higher (although not a statistically significant difference).

Because these rates are per 100,000 people, sometimes one event can influence these numbers drastically for areas with small populations. For instance, 9 people died in Archuleta County due to motor vehicle accidents in a population of approximately 13,000, versus 24 people in the same time frame in La Plata County, with a population estimate of 55,500. La Plata County had two and a half times the number of people pass away, while having four and a half times the population size.
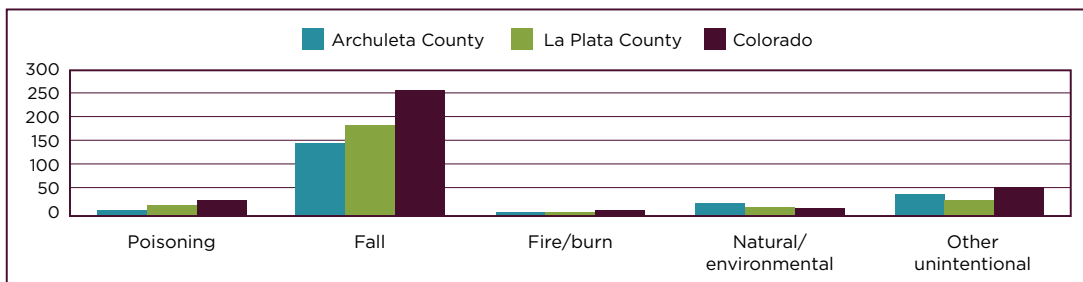
Always Wear a Seat Belt

Legend: Archuleta County | La Plata County | HSR9 | Colorado

Chart showing percentages (0% to 100%) for BRFSS (2013-2015) and SJBPH Survey (Adults, with Kids):
- BRFSS 2013-2015: Archuleta County ~90%, La Plata County ~84%, HSR9 ~83%, Colorado ~86%
- SJBPH Survey Adults: Archuleta County ~91%, La Plata County ~94%
- SJBPH Survey with Kids: Archuleta County ~96%, La Plata County ~100%

Injury Prevention and Hospitalizations

Public health agencies address fall prevention through "education, training, creating safer environments, prioritizing fall-related research and establishing effective policies to reduce risk," according to the WHO (2018c). Falls were responsible for the highest rate of injury hospitalizations across the state; both Archuleta and La Plata county fall rates were lower than the state average.

Age-adjusted Injury Hospitalizations (per 100,000), 2011-2015

Legend: Archuleta County | La Plata County | Colorado

Chart (0 to 300) with categories Poisoning, Fall, Fire/burn, Natural/environmental, Other unintentional:
- Poisoning: Archuleta County ~8, La Plata County ~15, Colorado ~25
- Fall: Archuleta County ~145, La Plata County ~185, Colorado ~255
- Fire/burn: Archuleta County ~3, La Plata County ~3, Colorado ~8
- Natural/environmental: Archuleta County ~20, La Plata County ~12, Colorado ~12
- Other unintentional: Archuleta County ~38, La Plata County ~25, Colorado ~50

CDPHE, 2017-b

Clinical Care Linkages

Clinical Care Linkages

Local public health agencies are often the entry point to healthcare services for community members. While accessing services such as Nurse Family Partnership, or learning about resources like tobacco prevention, clients can be connected to partner organizations that meet their clinical care needs. The Agency for Healthcare Research and Quality states, "[c]reating sustainable, effective linkages between the clinical and community settings can improve patients' access to preventive and chronic care services… Strategies that improve access to clinical preventive services (such as screening and counseling), community-level activities, and appropriate medical treatment have been shown to reduce and prevent disease in communities" (AHRC, 2019a). Coordinating services between agencies or assisting clients as they find the appropriate care setting can improve health outcomes for individuals while supporting healthier communities.

Screening and Accessibility

Heart Disease and Diabetes

According to the Office of Disease Prevention and Health Promotion, "heart disease and stroke, along with other cardiovascular disease, are among the most widespread and costly health problems facing the nation today, accounting for approximately $320 billion in health care expenditures and related expenses annually" (HP 2020, 2018e). There are many factors that may be addressed to prevent heart disease, including diabetes, high blood pressure, smoking, obesity, lack of activity, and access to healthy foods. Additionally, "the burden of cardiovascular disease is disproportionately distributed across the population. There are significant disparities based on gender . . . age, race/ethnicity, geographic area, and socioeconomic status" (HP 2020, 2018e).

Heart disease was the leading cause of death in 2017 in La Plata County, and the second leading cause of death in Archuleta County and the state of Colorado, based on age-adjusted rates. Heart disease is the fourth leading cause of years of potential life lost.

Diabetes was the ninth leading cause of death in 2017 in La Plata County and the eighth in the state of Colorado. It was the fifth leading cause of years of potential life lost in La Plata County and the ninth in Colorado. Diabetes does not fall in the top 10 leading causes of death in Archuleta County.

Not all adults face the same risk factors for heart disease and diabetes. As demonstrated in the following charts, residents of Archuleta and La Plata counties experience risk factors at a lower rate than the state average, but those rates are impacted by income, race/ethnicity, and age.

## Heart Disease Risk Factors Among Adults
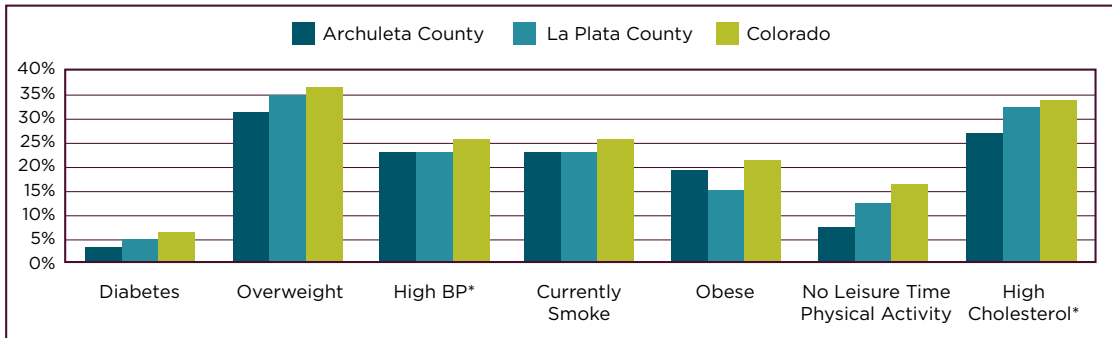
CDPHE, 2018-b

Heart Disease Risk Factors, Colorado
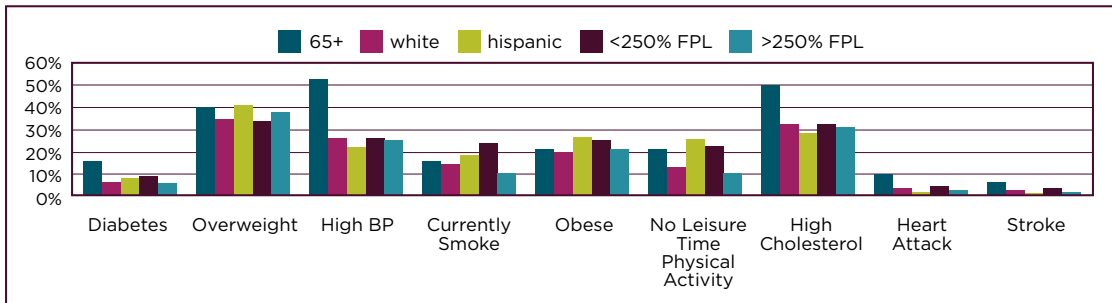
CDPHE, 2018-b

Because heart disease risk factors impact populations unequally, SJBPH works with community partners to provide lifestyle education and health programming to vulnerable populations to prevent the onset, or worsening, of heart disease in at-risk individuals and communities.

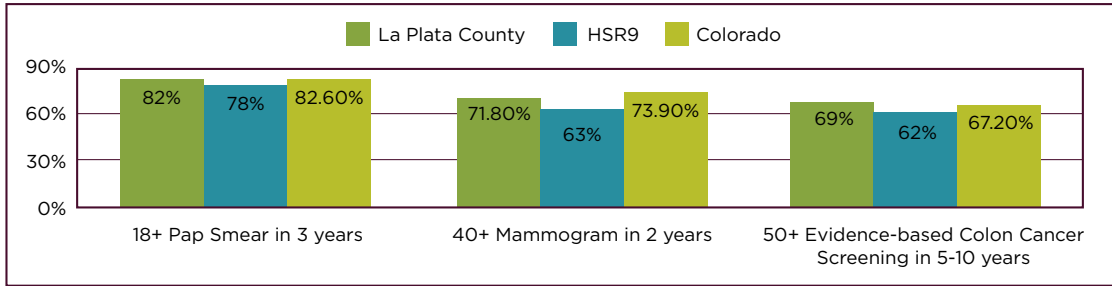## Heart Disease and Diabetes as a Community Health Concern
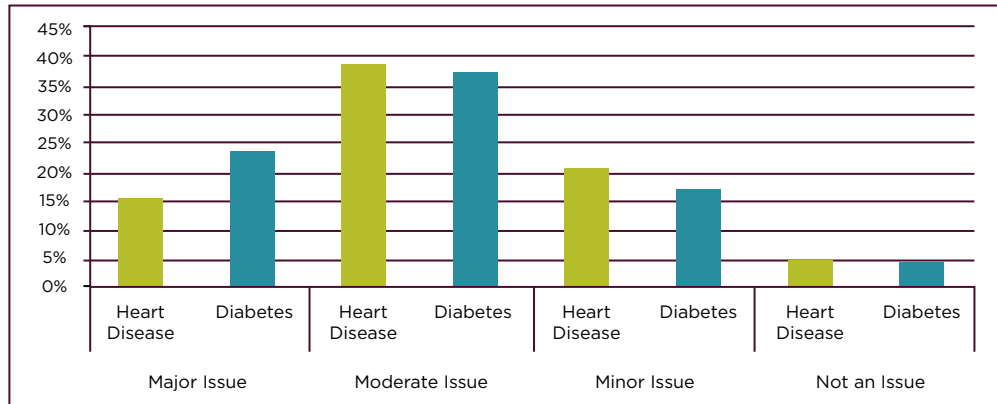
2018 SJBPH Survey Results

Cancer

According to the Office of Disease Prevention and Health Promotion, "cancer remains a leading cause of death in the United States, second only to heart disease" (HP 2020, 2018f). Public health interventions can prevent many types of cancer, particularly those related to tobacco use, physical inactivity and poor nutrition, obesity, and sexually transmitted infections.

In 2017, cancer was the leading cause of death in the state of Colorado and in Archuleta County. It was the second leading cause of death in La Plata County. Health Statistics and Vital Records data for 2013-2015 show that cancer is also the number 2 leading cause of years of potential life lost. However, survey results show that only

24.22% of respondents think cancer is a major issue (CDPHE, 2017d). Understanding what causes the disconnect between the actual and perceived risks of cancer in our communities may help us to design more effective prevention activities.

Colorectal and cervical cancer screening rates are higher now than they were in 2008 and 2010. Breast cancer screening rates are lower, following a similar statewide trend. Archuleta County screening rate estimates are unreliable due to the small sample size; therefore Region 9 data are shown. La Plata County has higher screening rates than Region 9 for all three types of screening, but is higher than the state only in colorectal cancer screening.
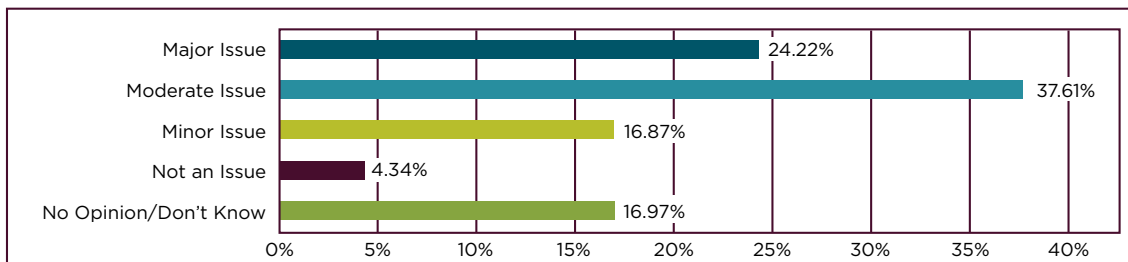
Cancer Screening Rates

Legend: La Plata County | HSR9 | Colorado

Category	La Plata County	HSR9	Colorado
18+ Pap Smear in 3 years	82%	78%	82.60%
40+ Mammogram in 2 years	71.80%	63%	73.90%
50+ Evidence-based Colon Cancer Screening in 5-10 years	69%	62%	67.20%

CDPHE, 2018-b

With the exception of skin cancer, all incidence rates of cancers considered in the 2012 assessment (all invasive cancer, prostate, breast, lung, colorectal, melanoma, and cervical) for La Plata County are lower than the state age-adjusted rates. Archuleta County is also lower than the state in all categories except skin and cervical cancer. Incidence rates went down in every category for the state as a whole and La Plata County for 2011-2015 as compared with 2006-2010. Archuleta County's rates for cervical and melanoma cancer are the only two that are higher than the state's rates and the differences are not statistically significant.

All age-adjusted death rates for the state of Colorado went down in the last 5-year period compared to the previous one. Death rates increased in La Plata County for melanoma and in Archuleta County for colorectal cancer. Breast cancer death rates increased in both counties. The lower screening rates in Region 9 may contribute to the higher death rates.

Cancer as a Community Health Concern

Major Issue	24.22%
Moderate Issue	37.61%
Minor Issue	16.87%
Not an Issue	4.34%
No Opinion/Don't Know	16.97%

2018 SJBPH Survey Results

> **When asked "what do you believe is the most important health issue facing the residents of your county?"**
> Only 16 people mentioned cancer; 11 were from Archuleta County, including this comment: "Our community has lost numerous people, of all ages, to various forms of cancer."

Oral Health

The CDC estimates that oral diseases cause pain and impact the productivity of millions of Americans each year, and that billions of dollars are lost due to these preventable diseases (CDC, 2018c). Relatively simple and inexpensive public health interventions, such as fluoridated drinking water and dental hygiene outreach programs, are proven to prevent tooth decay. However, both La Plata County and Region 9 have higher-than-average numbers of residents who depend on wells that may not have fluoride systems for drinking water.

Oral Health, % of Residents Who:
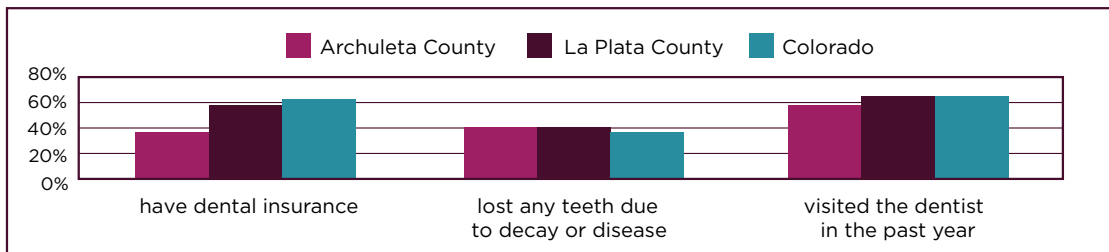
CDPHE, 2018-b

While 27.94% of people in Archuleta County (CDHCPF, 2017a) and 21.19% of people in La Plata County (CDHCPF, 2017b) are covered by Medicaid, there are only four Medicaid dental providers in the area that perform general dentistry or hygiene services (several more serve only children or are more specialized). Difficulty accessing and paying for services creates a barrier to routine dental hygiene for many, potentially leading to preventable oral health issues.

Accessibility of Oral Health Care as a Community Health Concern

Major Issue — 16.84%
Moderate Issue — 22.86%
Minor Issue — 27.75%
Not an Issue — 22.67%
No Opinion/Don't Know — 9.88%
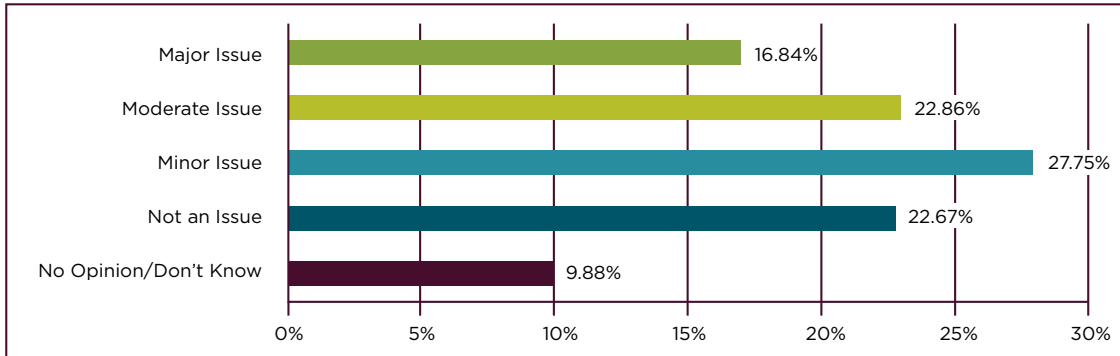
2018 SJBPH Survey Results

There were 11 comments about oral health when asked about the most important health concern, including:

- Among elders – dental health.
- We see a lot of dental problems and also health care because of finances.

When asked about oral health, 12 people left comments, most of which concerned money, such as,

- I don't find it hard to get an appointment, but affordable dentistry for folks without money is quite limited.

Several other comments were about accessibility:

- Takes way too long for a new patient who has emergency issues for dental.
- For children there is no issue, but for adults there is no Medicaid accepting dentist so we have been going to Farmington for checkups.

Health Service Awareness

Prevention and population health services encompass a spectrum of programs that are traditionally associated with public health, such as preventative medical care, immunizations, health screenings, and family planning programs. Our survey asked respondents to identify how they learned about these services and whether they were able to access programs that met their preventative health care needs. Residents indicated that "word of mouth" remains the most common way to learn about health services in our counties.

How do you learn about health services in your community?

Source	Percentage
Referral from a Healthcare Provider	60%
Word of Mouth	78%
Newspaper	20%
Radio	9%
Website/Internet	44%
Social Media	15%
Television	3%
311 Services	1%
Other	13%
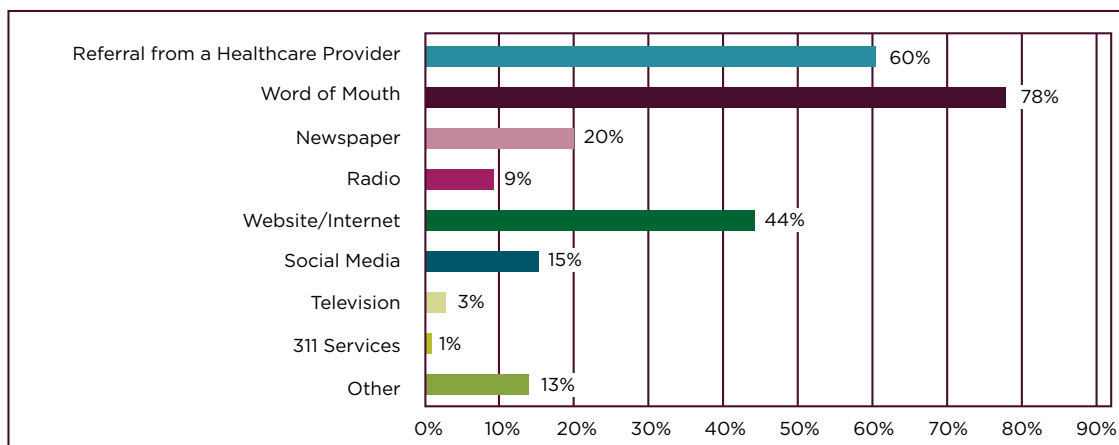
2018 SJBPH Survey Results

Access to Care

County Health Rankings lists La Plata County as 13th in the state in Clinical Care (CHR&R, 2018a). This indicator considers the number of uninsured; the ratio of primary care physicians, dentists, and mental health providers to residents; preventable hospital stays; diabetes monitoring; and mammography screening. Archuleta County is ranked 38th (CHR&R, 2018b).

Access to care may be improved or hindered depending on insurance coverage in a given community. People living in HSR9 are more likely to be uninsured than the state average. Residents here also have higher rates of Medicare coverage and lower rates of employer-sponsored insurance than the state. This may exacerbate the difficulty of accessing care if a limited number of providers accept Medicare.

Health Insurance Coverage in Colorado, 2017
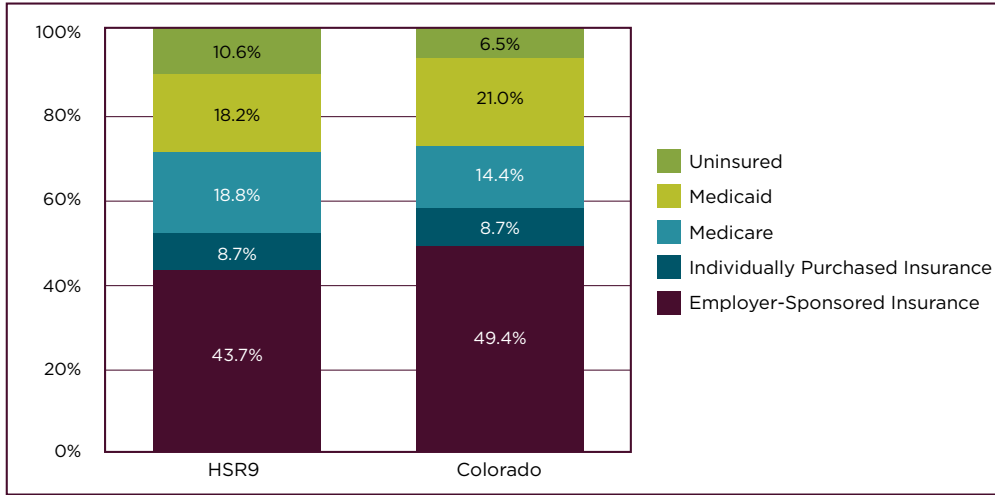
CHI, 2017

In Colorado, people living under 100% of the federal poverty level remain the most likely to be uninsured, despite coverage gains made by Medicaid expansion. In Archuleta County, 13.1% of residents of all ages were below the poverty level in 2015, compared to 9.4% in La Plata County and 11.5% in the state (U.S. Census Bureau, 2018e).

Uninsured Rate in Colorado by Federal Poverty Level, 2013-2016
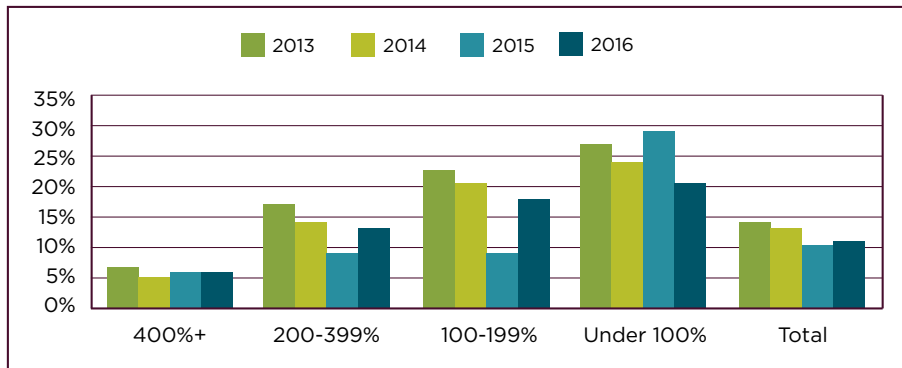
Henry J Kaiser Family Foundation, 2018

The availability of medical providers is not equal across both counties: La Plata County has a much lower ratio of population to physicians, dentists, and mental health providers than does Archuleta. These numbers may explain why more Archuleta residents expressed difficulty accessing health care than La Plata residents. The disparities are particularly pronounced when looking at the ratio of population to mental health providers.

Availability of Medical Providers Across Counties

	Archuleta County	La Plata County	Colorado	National Average (2016 BRFSS)
% of adults 18+ who report having one or more health care provider(s) (CDPHE, 2018a)	73.7%	71.1%	76.3%	76.3%
Ratio of population to health care providers:				90th Percentile (2015 National)
Primary care physicians	1,120:1	960:1	1,240:1	1,030:1
Dentists	1,840:1	1,140:1	1,290:1	1,280:1
Mental health providers	920:1	300:1	330:1	330:1

Source: CHR&R, 2018a; CHR&R, 2018b

Residents indicated that they were generally able to access providers for basic healthcare needs, but finding specialists remains a challenge, particularly in Archuleta County.

Ability to get an Appointment:
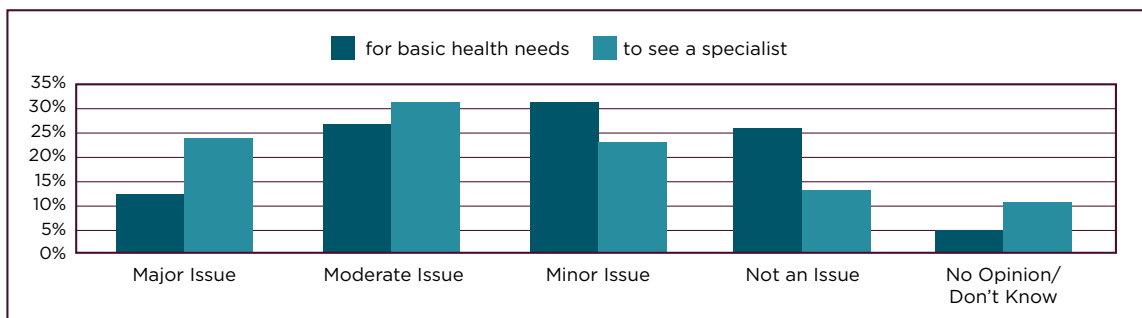
2018 SJBPH Survey Results

> **There were 92 comments about access to care. Within the prevention/population health category, access to care and cost of care had the most comments (86).**
>
> - (Not) enough drs and nurses to meet the need of our growing community.
>
> - Distance to access health care from remote area.
>
> - Access to health care and the ability to pay for it
>
> - I think access to health care is a big deal. We don't have OB services here, residents have to drive an hour to get this kind of care; I think mental health and suicide prevention needs some more resources, as well.
>
> - Access to affordable healthcare. Availability of doctors taking medicare or uninsured patients.
>
> - Lack of available primary care physicians.

In Archuleta County, "access to care" under prevention and promotion had the most number of comments (26). In La Plata County, there were a greater number of comments (66), but "access to care" was not the highest category in prevention and promotion. In fact, multiple categories had more comments than "access to care," including: obesity, general mental health, suicide, cost of care, and drugs. However, when asked to rate how much of an issue the ability to get an appointment to see a doctor for basic needs or a specialist, the percentages between the two counties are very similar.

% [of respondents] who ranked
"ability to get an appointment with a provider"
as a major issue (by provider type)

Legend: ■ Archuleta County ■ La Plata County

doctor, nurse, or other health care provider for basic health needs: 11.38%, 12.65%

doctor or nurse who is a specialist: 24.49%, 23.41%
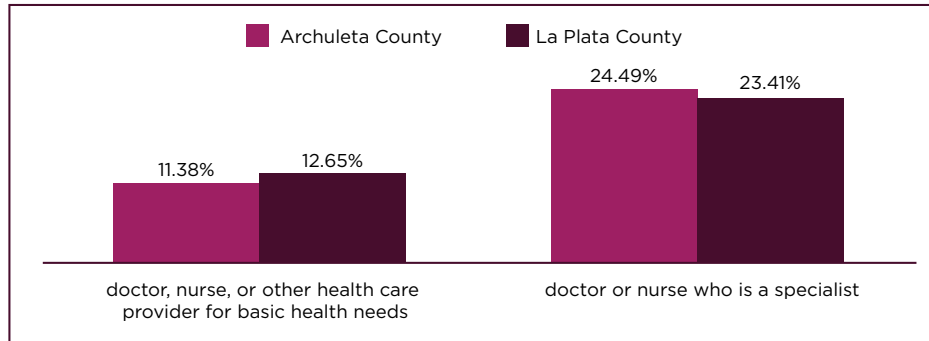
2018 SJBPH Survey Results

Communicable Disease

Communicable Disease

Communicable disease prevention and immunization programs are two of the most visible and successful initiatives of public health practice. Vaccine programs address and prevent a wide variety of diseases, and may include children's immunizations, travel vaccines, and booster shots. Respondents were most familiar with childhood immunizations and influenza vaccines, and least familiar with vaccines that prevent cancers associated with sexually transmitted infections.

> **When asked about the most important health issue facing this community, many people left comments regarding immunizations and communicable diseases. These included:**
>
> - Influenza.
> - The flu season and lack of medication to treat it [specific to 2018 influenza season].
> - People who don't vaccinate their children.
> - Unsafe sex.

Communicable Diseases
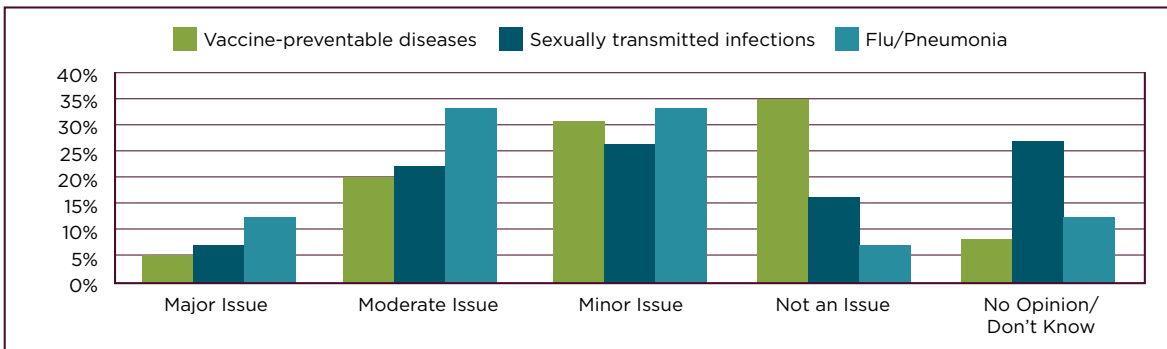
2018 SJBPH Survey Results

When asked, "What is your opinion about the following physical and mental health issues in your community," many of the comments indicated acceptance of misinformation regarding the safety and efficacy of vaccines.

Communicable Diseases

Legend: That ARE NOT vaccine-preventable (green) / That ARE vaccine-preventable (teal)

Categories: Major Issue, Moderate Issue, Minor Issue, Not an Issue, No Opinion/Don't Know

2018 SJBPH Survey Results

"
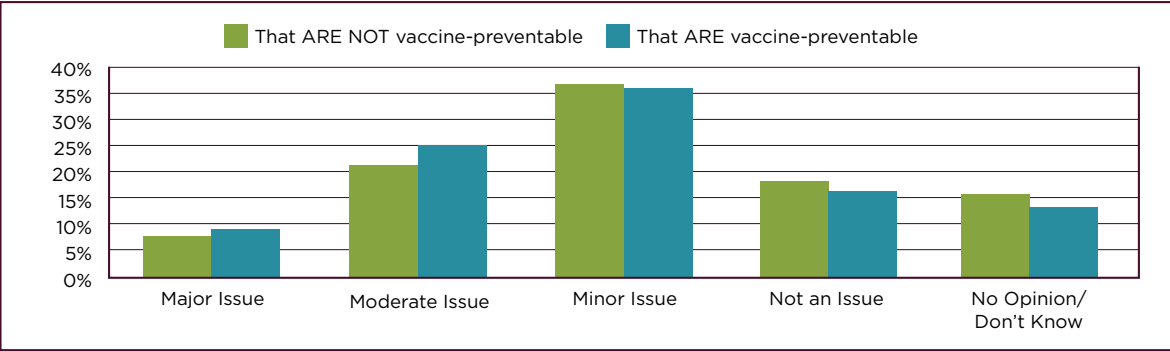
Community comments regarding communicable diseases, when asked about "opinions on environmental issues," included:

- Please encourage parents to vaccinate their kids.

- Parents need more education about when they need to keep their children home from school due to illness.

"

Do you receive a flu shot every year?
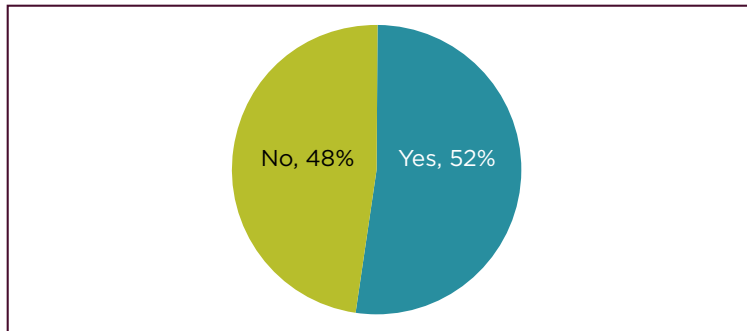
2018 SJBPH Survey Results

The question "do you receive a flu shot every year" yielded the most comments of the survey (601), with respondents evenly split about their safety and efficacy. This topic presents an important opportunity for public health professionals to educate our communities about the safety and importance of prevention programs, including vaccinations.

"

The comments included:

- Mandatory at work.

- Not enough proof it helps and I don't trust pharmaceutical corporations.

- I have a nephew with suppressed immune system, so it keeps him and my family safe.

"

Emergency Preparedness and Response

Emergency Preparedness and Response

Preparing for and responding to emergencies that impact human and environmental health is a major component of local public health activities. The CDC supports state and local preparedness activities through its Public Health Emergency Preparedness (PHEP) grant program. This program encompasses six areas (CDC, 2018d):

- Community Resilience: Preparing for and recovering from emergencies
- Incident Management: Coordinating an effective response
- Information Management: Making sure people have information to take action
- Countermeasures and Mitigation: Getting medicines and supplies where they are needed
- Surge Management: Expanding medical services to handle large events
- Biosurveillance: Investigating and identifying health threats

In Archuleta and La Plata counties, residents have experienced water contamination, winter storms, wildfires, and other natural disasters that have the potential to adversely impact human and environmental health. While many residents are aware of these threats, fewer than half have participated in most recommended preparedness activities.

Percent of total who took the SJBPH survey have:
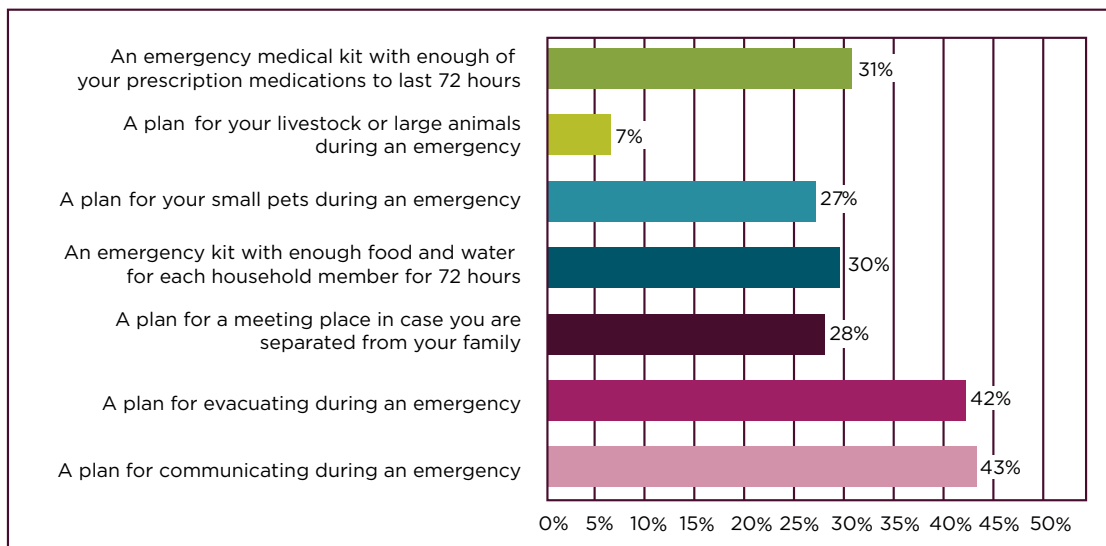
2018 SJBPH Survey Results

> **Most comments from respondents indicated an awareness of the need to prepare, but no formal plans to do so:**
>
> ▪ I really need to get on this.
>
> ▪ My husband and I have been talking about doing this for a long time, but now we realize, we really need to.

Additionally, many respondents indicated that they rely on communication methods, such as cell phones and websites, that may be impacted or unavailable during an emergency.

What information sources would you use to stay informed during an emergency?

Source	Percentage
Radio	76.06%
Television	36.88%
Twitter	7.58%
Facebook	44.55%
Local Newspaper	39.93%
Code Red (reverse 911)	31.61%
Text Messages	72.18%
Word of Mouth	64.14%
News Websites	50.28%
Law Enforcement Websites	43.99%
SJBPH Website	21.07%
Local Government Websites	35.86%
Other	4.81%
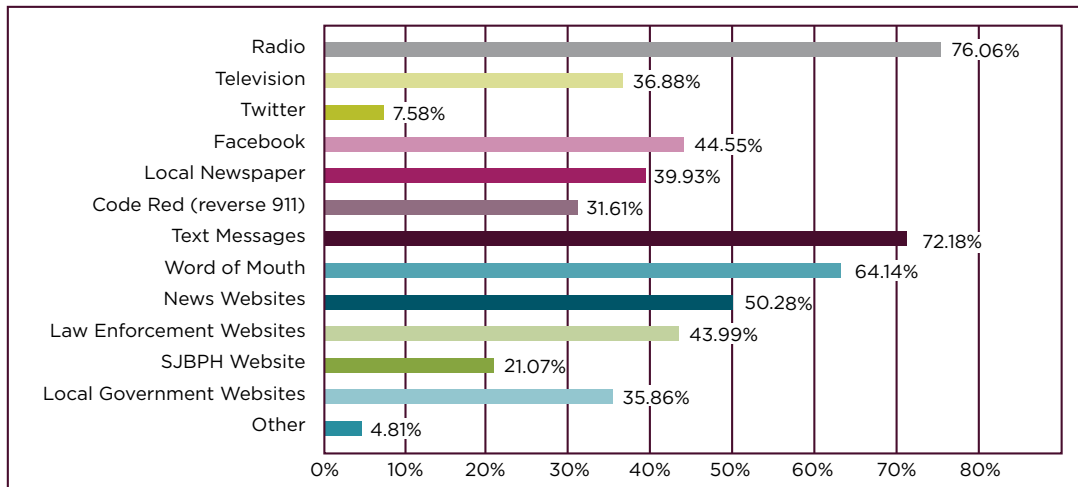
2018 SJBPH Survey Results

CHA Conclusion

What did SJBPH learn from the 2018 Community Health Assessment?

The CHA survey responses demonstrate that community members look beyond traditional public health domains when they consider what makes them healthy. The top five issues selected by respondents:

- suicide/suicide attempts
- affordable housing
- substance abuse
- poverty
- the availability of jobs/economic opportunity

demonstrate that the living conditions in our community that impact health are much more than simply access to healthcare, exercise opportunities, or nutritious foods. These are complex topics that will require cross-sector collaboration, programmatic innovations, and multi-level interventions before the communities served by SJBPH see an improvement in outcomes.

It is also important to remember that survey results offer a snapshot of local concerns during a specific time frame but do not exhaustively list every issue that people consider when they think about their health. For example, the survey occurred in the winter and early spring, before wildfire season, so issues such as air quality or emergency preparedness and response may have ranked higher in importance if the survey was administered later in the year. And in a rural area of Colorado that can experience winter storms, wildfires, flood, drought, etc., local public health staff know that being prepared to take care of yourself during an extended power outage, or to evacuate to a safer location, is critical to health and safety.

Additionally, there are many other factors that contribute to the health of communities that were not listed by survey respondents. Without clean water, clean air, or a safe food supply, it is very difficult for people to be healthy. Environmental Health is a major public health category that was not specifically called out by survey-takers but that public health experts know is critical to health and well-being. Public health concepts, such as getting immunized to prevent disease, wearing a seatbelt while in the car, and choosing not to use tobacco products are simple actions that when taken can improve health for the vast majority of people. While suicide is a very visible and emotionally difficult cause of death in our region, chronic diseases (such as cardiovascular disease or cancer) continue to cause more deaths or years of life lost than suicide. That does not mean that future programming should ignore either suicide or chronic disease – it means that SJBPH cannot rely on a survey alone to help determine future activities of the agency.

Therefore, to create an effective Public Health Improvement Plan (PHIP), SJBPH considers:

- The Public Health Act of 2008 – the legal obligations of local public health agencies.

- Community Health Assessment survey results – what Archuleta and La Plata county residents selected as their top health concerns.

- Data – the numbers that tell SJBPH what issues have the greatest impact on health in the region.

- Expert knowledge – what SJBPH staff and leadership know about the public health system, emerging trends, threats, and opportunities.

By creating a PHIP framework that allows SJBPH to address pressing health needs while planning for future trends, the agency can be responsive and flexible. Staff can seek health data that is not available from other sources, because they know what information is needed to design better programs or to support partners who are designing interventions. The programs SJBPH brings to the region will be tailored to the needs of Archuleta and La Plata county residents. SJBPH staff will have opportunities to exceed training requirements and to learn and practice new skills. The organization will utilize best practices, allowing us to be fiscally strong, responsive to our employees, and a great partner to community organizations. Ultimately, these improvements will help SJBPH support the health of our communities, using best practices rooted in evidence and equity to remove barriers to well-being.

The 2019-2023 SJBPH Public Health Improvement Plan is available for review or download on our website at **http://sjbpublichealth.org/public-health-improvement-plan/** and by e-mail request at **sjbphcommunications@sjbpublichealth.org**

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Addendum

2017 Community Health Assessment

Every 5 years, San Juan Basin Public Health (SJBPH) determines the health and wellness needs facing Archuleta and La Plata counties. SJBPH is gathering data and feedback from diverse members of our communities that will help build plans for addressing the top health needs in our region. This survey is an opportunity for us to hear from you about your health priorities and what issues you feel need to be addressed in your community.

This survey is open to any Archuleta or La Plata county resident over 18 years of age. Feel free to pass along the survey link and encourage others to take it. To receive a paper version of this survey, please call SJBPH at 970-247-5702 or 970-264-2409.

The survey should take less than 15 minutes to complete, and all responses are anonymous.

If you have any questions, please contact Kristin Pulatie, Director of Assessment and Planning, by email at kpulatie@sjbpublichealth.org or Shannon Shropshire, Assessment and Planning Specialist, by email at sshropshire@sjbpublichealth.org.

We appreciate your time and assistance!

Background

* 1. When answering the questions in this survey, please respond based on the county in which you live.

I live primarily in:

◯ Archuleta County

◯ La Plata County

2. How would you rate the overall health of your community?

Very Healthy	Healthy	Somewhat Healthy	Unhealthy	Very Unhealthy
◯	◯	◯	◯	◯

Why did you select this rating?

3. In your own words, what do you believe is the most important health issue facing the residents of your county?

Community Health

4. What is your opinion about the following physical and mental health issues in your community?

Use the following definitions to rank each issue:
Minor Issue: A concern, but much less important that other issues
Moderate Issue: A concern of average importance when compared to other issues
Major Issue: In the top 3 to 5 concerns needing immediate attention

	Not an Issue	Minor Issue	Moderate Issue	Major Issue	No Opinion/Don't Know
Ability to get an appointment to see a doctor, nurse, or other health care provider for basic health needs	☐	☐	☐	☐	☐
Ability to get an appointment to see a doctor or nurse who is a specialist	☐	☐	☐	☐	☐
Vaccine-preventable diseases (flu, whooping cough, measles, etc.)	☐	☐	☐	☐	☐
Sexually Transmitted Diseases (education, testing, and treatment services)	☐	☐	☐	☐	☐
Teen Birth Rates/Teen Pregnancy	☐	☐	☐	☐	☐
Suicide/Suicide Attempts	☐	☐	☐	☐	☐
Substance Abuse	☐	☐	☐	☐	☐
Obesity	☐	☐	☐	☐	☐
Heart Disease	☐	☐	☐	☐	☐
Diabetes	☐	☐	☐	☐	☐
Cancer	☐	☐	☐	☐	☐
Flu/Pneumonia	☐	☐	☐	☐	☐
Water Quality	☐	☐	☐	☐	☐
Air Quality	☐	☐	☐	☐	☐
Accessibility of Oral Health care (ability to get an appointment for dental health needs)	☐	☐	☐	☐	☐

Other (please specify)

[   ]

5. How concerned are you about these other community issues that impact health?

Use the following definitions to rank each issue:
Minor Issue: A concern, but much less important that other issues
Moderate Issue: A concern of average importance when compared to other issues
Major Issue: In the top 3 to 5 concerns needing immediate attention

	Not an Issue	Minor Issue	Moderate Issue	Major Issue	No Opinion/Don't Know
Poverty	☐	☐	☐	☐	☐
Low Education Levels	☐	☐	☐	☐	☐
Motor Vehicle Accidents	☐	☐	☐	☐	☐
Availability of Exercise or Fitness Opportunities	☐	☐	☐	☐	☐
Domestic Violence	☐	☐	☐	☐	☐
Sexual Violence	☐	☐	☐	☐	☐
Presence of Radon in homes	☐	☐	☐	☐	☐
Availability of jobs/economic opportunity	☐	☐	☐	☐	☐
Support for families with children (day care, safe places to play)	☐	☐	☐	☐	☐
Access to Healthy Foods (available stores, affordability)	☐	☐	☐	☐	☐
Transportation for health care purposes	☐	☐	☐	☐	☐
Affordable housing	☐	☐	☐	☐	☐

Other (please specify)

[   ]

Substance Abuse and Mental Health

6. What is your opinion about the following substance abuse issues in your community?

For these questions:
Youth is a person under age 18
Adult is a person aged 18 or older

Use the following definitions to rank each issue:
Minor Issue: A concern, but much less important that other issues
Moderate Issue: A concern of average importance when compared to other issues
Major Issue: In the top 3 to 5 concerns needing immediate attention

	Not an Issue	Minor Issue	Moderate Issue	Major Issue	No Opinion/Don't Know
Youth Prescription Drug Use	☐	☐	☐	☐	☐
Youth Alcohol Use	☐	☐	☐	☐	☐
Youth Tobacco Use (includes e-cigarettes or vaping)	☐	☐	☐	☐	☐
Youth Marijuana Use	☐	☐	☐	☐	☐
Youth Drug Use (drugs other than marijuana or prescriptions)	☐	☐	☐	☐	☐
Adult Prescription Drug Use	☐	☐	☐	☐	☐
Adult Alcohol Use	☐	☐	☐	☐	☐
Adult Tobacco Use (includes e-cigarettes or vaping)	☐	☐	☐	☐	☐
Adult Marijuana Use	☐	☐	☐	☐	☐
Adult Drug Use (drugs other than marijuana or prescriptions)	☐	☐	☐	☐	☐

Other (please specify)

[   ]

7. What is your opinion about the following mental health issues in your community?

Use the following definitions to rank each issue:
<u>Minor Issue</u>: A concern, but much less important that other issues
<u>Moderate Issue</u>: A concern of average importance when compared to other issues
<u>Major Issue</u>: In the top 3 to 5 concerns needing immediate attention

	Not an Issue	Minor Issue	Moderate Issue	Major Issue	No opinion/Not sure
Access to diagnostic services (testing, screening, assessing mental health or behavior issues)	☐	☐	☐	☐	☐
Access to individual therapy/counseling	☐	☐	☐	☐	☐
Access to group therapy/counseling or support	☐	☐	☐	☐	☐
Access to treatment services using prescription drugs (anti-depressants, anti-anxiety medication, etc)	☐	☐	☐	☐	☐
Stigma of having or seeking treatment for a mental health condition	☐	☐	☐	☐	☐

Other (please specify)

_____

Prevention and Population Health Services

8. How do you learn about health services in your community? (select top 3)

☐ Referral from health care provider   ☐ Website/Internet

☐ Word of mouth (friends, family)   ☐ Social Media (Facebook, Twitter, Instagram)

☐ Newspaper   ☐ Television

☐ Radio   ☐ 311 Services

☐ Other (please specify)

_____

9. Do you receive a flu shot every year?

◯ Yes

◯ No

Why or why not?

[   ]

Health Behaviors

10. Do you currently use any of the following tobacco products?

	Yes	No
Cigarettes	☐	☐
Cigars	☐	☐
Pipe (tobacco)	☐	☐
Dip/Chew/Snuff	☐	☐
E-cigarette (Vape pen or vaping)	☐	☐

Other (please specify)

[   ]

11. How often do you wear a seat belt while in a car?

◯ Always

◯ Occasionally

◯ Never

If you do not always wear a seat belt, why not?

[   ]

12. If you drive with children, how often do they use a car seat, booster seat, seat belt, or other restraining device?

○ Always

○ Occasionally

○ Never

○ N/A - I do not drive with children

If your children are not always in a car seat or seat belt, why not?

[   ]

Environmental Health

13. Is your primary source of drinking water a well?

○ Yes

○ No

○ Unsure/Don't know

14. If you answered "yes", have you had your well water tested for any type of contaminant?

○ Yes

○ No

Why or why not?

[   ]

15. What is your opinion about the following Environmental Health issues in your community?

Use the following definitions to rank each issue:
Minor Issue: A concern, but much less important that other issues
Moderate Issue: A concern of average importance when compared to other issues
Major Issue: In the top 3 to 5 concerns needing immediate attention

	Not an Issue	Minor Issue	Moderate Issue	Major Issue	Don't Know/Not Sure
Outdoor Air Quality	☐	☐	☐	☐	☐
Indoor Air Quality	☐	☐	☐	☐	☐
Surface Water pollution	☐	☐	☐	☐	☐
Onsite Wastewater (Septic) Systems	☐	☐	☐	☐	☐
Drinking Water Quality	☐	☐	☐	☐	☐
Communicable Diseases that are NOT Vaccine-Preventable (Hanta Virus, Tularemia, Ebola, Zika)	☐	☐	☐	☐	☐
Communicable Diseases that ARE Vaccine-Preventable (flu, measles, chicken pox)	☐	☐	☐	☐	☐
Climate Change	☐	☐	☐	☐	☐
Food Safety (food from restaurants, markets, deli counters)	☐	☐	☐	☐	☐

Additional environmental concerns?

Emergency Preparedness

16. Emergency Planning (fire, flood, severe storm, disease outbreak) - Do you/your family have (select all that apply):

☐ a plan for communicating during an emergency

☐ a plan for evacuating during an emergency

☐ a plan for a meeting place (other than your home) in case you are separated from your family

☐ an emergency kit with enough food and water for each household member for 72 hours

☐ a plan for your small pets during an emergency (dogs, cats, birds)

☐ a plan for your livestock or large animals during an emergency (cows, horses, sheep)

☐ an emergency medical kit with enough of your prescription medications to last 72 hours

17. During an emergency, what information sources would you use to stay informed about response efforts, evacuation information, etc.? (select all that apply)

☐ Radio   ☐ Text messages

☐ Television   ☐ Word of mouth (family, friends)

☐ Twitter   ☐ News websites (CNN, Durango Herald)

☐ Facebook   ☐ Law enforcement websites (police, sheriff)

☐ Local newspaper   ☐ San Juan Basin Public Health website

☐ Code Red (reverse 911)   ☐ Local government websites (city, county, town)

☐ Other (please specify)

[   ]

Demographics

18. What is your age?

○ 18 to 24   ○ 55 to 64

○ 25 to 34   ○ 65 to 74

○ 35 to 44   ○ 75 or older

○ 45 to 54

19. What is your annual household income?

- ( ) Less than $19,999
- ( ) $20,000 - $39,999
- ( ) $40,000 - $59,999
- ( ) $60,000 - $79,999
- ( ) $80,000 - $99,999
- ( ) $100,000 or more

20. Please describe your race/ethnicity.

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public health

How
are
you?

PROTECTING HUMAN + ENVIRONMENTAL HEALTH AND INSPIRING WELL-BEING IN OUR COMMUNITY.