



**2019**

**Grant County**

**Wisconsin**

Community Health Needs  
Assessment/Community Health  
Improvement Plan

*Prepared by:*  
Grant County Health Department  
August 2019



**Public Health**  
Prevent. Promote. Protect.

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## **Acknowledgements**

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Key Stakeholders (via de-identified surveys, focus groups, and informal contacts)

Unified Community Services

## Executive Summary

For this assessment the Mobilizing for Action through Planning and Partnerships (MAPP) Process served as an evidence-based guiding tool. Local data was examined and key stakeholders were interviewed and surveyed. Additionally, community members provided input via de-identified surveys and focus groups/community dialogues were assembled as well. Grant County was compared to the southern region of Wisconsin, the State of Wisconsin, and the United States (U.S.).

According to the U.S. Census Bureau (2016), Grant County had a population of 51,723. The county experienced a slight increase in population since 2012. The percentage of the population over the age of 65 remains higher than the state's average. As a result, services and supports for older individuals remain an important issue for the county and needs are expected to increase in the future.

Housing characteristics in Grant County were similar to those of Wisconsin and the US. However, Grant County remains largely rural with a population density of 44.7 people per square mile compared to Wisconsin's average of 105 people per square mile (US Census, 2010).

During the 1990s, the county's economy experienced a slight shift from manufacturing toward service industries; this shift caused an increase in lower paying service jobs. Grant County has a per capita income of \$23,103 (US Census 2012-2016). The percent of persons in poverty was 15.3% and Grant County had a median household income of \$50,522 which is lower compared to Wisconsin's average of \$29,253 per capita and \$59,759 household income during the same time period (US Census 2012-2016). The percentage of people below the poverty level in Grant County exceeds both the state and national averages as well.

According to census data from 2012-2016, the percentage of adults over the age of 25 in Grant County with a college diploma (21.3%) was slightly lower than the state average (28.4%). The percentage of adults in Grant County over age 25 with a college diploma decreased considerably from the 2005-2007 rate of 28.6%. However, the percentage of adults over the age of 25 with a high school diploma was 91.3% and equal to the state average.

### Health Rankings

- Health Factors are an estimate of the future health of the county as compared to other counties in Wisconsin. The ranks are based on four types of measures: health behaviors, clinical care, social and economic, and physical environment factors. Grant County Ranked 46 out of 72 Wisconsin Counties (UW Population Health 2019 County Health Rankings).
- Health Outcomes are a measure of how healthy the county is compared to other Wisconsin counties. The ranks are based on two types of measures: how long people live and how healthy people feel while alive. Grant County Ranked 14 out of 72 Wisconsin Counties (UW Population Health 2019 County Health Rankings).

Key stakeholders and the general public were surveyed and focus groups/community dialogues throughout the county were used to explore public health concerns.

**Top concerns included:**

- Cancer and heart disease
- Mental health and addiction issues
- Adverse Childhood Experiences (ACES)
- Culture of unhealthy eating
- Social isolation
- Transportation issues
- Groundwater and surface water quality.

**Data indicates there are also concerns with:**

- Low immunization rates
- High STD rates
- Obesity concerns
- Poverty concerns
- Housing (accessibility and quality)

## ***Priorities and Community Health Improvement Plan***

Based upon current data, surveys, and community dialogues, a set of recommendations were created for the Community Health Improvement Plan. The priorities are as follows:

- Attempt to prevent, address, or minimize the impact of adverse childhood experiences (ACES).
- Improve access to health care for Grant County residents who do not have health insurance or cannot afford it, and for residents who face other obstacles such as low health literacy, being unaware of available resources, lack of support, and transportation issues.
- Increase capacities for the provision of services and support as demographics shift including addressing social isolation.
- Reduce unhealthy behaviors, such as substance abuse, among Grant County residents, while increasing the number of programs and education available related to chronic disease prevention.
- Reduce stigma associated with assessing mental health and accessing mental health services, while reducing barriers and improving navigation.
- Address increases in communicable diseases including sexually transmitted infections and vaccine preventable illness.

<b>Attempt to prevent, address, or minimize the impact of adverse childhood experiences (ACES).</b>		
<i>Objectives (to be completed by August 31, 2024 or sooner)</i>	<i>Activities</i>	<i>Evaluation Measures</i>
Increase screening for adverse childhood experiences.	Encourage training for appropriate timing and screening for ACES by conducting meetings with providers.  Encourage providers to conduct screening for ACEs and make appropriate referrals.	Hold or participate in two related meetings per year.  Survey providers to determine how many are screening for ACEs
Train individuals in Trauma Informed Care (TIC)	Seek out and promote TIC opportunities to health care providers, schools and daycares.  Train health department staff in TIC  Use the resources on the Wisconsin Department of Health Services Website <a href="https://www.dhs.wisconsin.gov/tic/index.htm">https://www.dhs.wisconsin.gov/tic/index.htm</a>	Provide TIC training to at least 75% of Health Department staff.  Partner with at least one area hospital to promote TIC

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<p>Work towards reducing trauma and building resilience.</p>	<p>Promote health equity strategies.</p> <p>Work with partners to teach and implement evidence based resilience building tools and strategies.</p>	<p>Educate two legislators on health equity strategies.</p> <p>Identify at least three area partners and enhance or develop programming.</p>
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<b>Improve access to health care for Grant County residents who do not have health insurance or cannot afford it, and for residents who face other obstacles such as low health literacy, being unaware of available resources, lack of support, and transportation issues.</b>		
<i>Objectives (to be completed by August 31, 2024 or sooner)</i>	<i>Activities</i>	<i>Evaluation Measures</i>
<p>Coordinate with partners to increase awareness of available resources including insurance and transportation</p>	<p>Partner with Social Services, ADRC, UW Extension, SW-CAP and area providers to promote and share available resources.</p>	<p>Monitor health insurance rates and availability of transportation.</p>
<p>Refer and encourage individuals to sign up for health insurance</p>	<p>Refer to Social Services and on line resources.</p>	<p>Strive to lower the uninsured rate to less than 5% as reported in the County Health Rankings.</p>
<p>Continue education outreach activities and provide information in multiple formats and venues. Use common, simple words to be as clear as possible and minimize the risk of misunderstanding. Provide information at an appropriate grade level.</p>	<p>Translate more information into Spanish</p> <p>Use lower level reading comprehension fact sheets</p> <p>Work with surrounding counties that have health educators to develop more “friendly” materials and educational campaigns.</p> <p>Provide relevant information in newsletters, health fairs, websites, pamphlets, fact sheets.</p>	<p>Translate WIC schedules and other materials into Spanish.</p> <p>Provide access to newly State created fact sheets as they become available.</p> <p>Provide materials at least 3 events per year.</p>

<b>Increase capacities for the provision of services and support as demographics shift including addressing social isolation.</b>		
<i>Objectives (to be completed by August 31, 2024 or sooner)</i>	<i>Activities</i>	<i>Evaluation Measures</i>
Collaborate with area partners.	Work with partners such as ADRC, Parkinson’s groups, Alzheimer’s groups and SWCAP to identify areas of need and work to enhance or promote services.	Participate in 1-2 collaborative programs per year.
Promote and help develop programming	Continue to promote dementia friendly businesses and work toward increasing access to adult daycare/respite.  Consider physical activity interventions to reduce social isolation	Participate and regularly attend ADRC dementia related meetings.  Educate 2 legislators.  Initiate two programs aimed at reducing social isolation.
Ensure access to needed services such as Home Health and Hospice which typically serve older individuals	Maintain programming via efficiencies and other strategies such as reducing drug costs, ensuring proper coding, and leveraging better pricing on medical supplies.	Keep viable programming for at least the next 5 years.

<b>Reduce unhealthy behaviors, such as substance abuse, among Grant County residents, while increasing the number of programs and education available related to chronic disease prevention.</b>		
<i>Objectives (to be completed by August 31, 2024 or sooner)</i>	<i>Activities</i>	<i>Evaluation Measures</i>
Maintain partnerships with SWCAP, Unified Community Services, UW Extension, and others and programs related to unhealthy behaviors.	Continue participation in SWCAP Behavioral Health Grant.  Continue participating in Mental Health Matters Grant County	Maintain representation on the SWCAP Behavioral Health Grant Steering Committee.  Maintain representation on the county level committee and contribute to or participate in at least one activity per year.

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	Continue participation with Grant County Criminal Justice Coordinating Committee.	Provide access to information via multiple venues each year.
Expand relationships with the three area hospitals to increase programming and education	Maintain liaisons with the three area hospitals.	Assign and maintain one Public Health Nurse to each area hospital to participate in joint community health programming.

<b>Reduce stigma associated with assessing mental health and accessing mental health services, while reducing barriers and improving navigation</b>		
<i>Objectives (to be completed by August 31, 2024 or sooner)</i>	<i>Activities</i>	<i>Evaluation Measures</i>
Continue to partner with Southwest Wisconsin Behavioral Health Partnership, Unified Community Services, and Mental Health Matters/Grant County which has these goals in mind.	Promote the new local chapters of NAMI  Support Rural Suicide prevention efforts  Support and promote the implementation of the Trilogy Network of Care Platform  Provide or promote community education opportunities	Provide information and linkages to programming and services.  Participate in the launch and monitor the success of the platform.  Participate in at least one event per year.
<b>Address increases in communicable diseases including sexually transmitted infections and vaccine preventable illness.</b>		
<i>Objectives (to be completed by August 31, 2024 or sooner)</i>	<i>Activities</i>	<i>Evaluation Measures</i>

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<p>Continue to work on improving vaccination rates via individual departmental efforts (clinics and outreach) as well as combined coalition efforts (regional and advocacy)</p> <p>Strengthen partnerships and programming with UW-Platteville Student Health Services</p>	<p>Maintain membership in the regional immunization coalition.</p> <p>Maintain VFC and VFA certification and continue to improve access to immunizations for children and adults.</p> <p>Support policy initiatives aimed at improving immunization rates.</p> <p>Continue to work on voluntary or required screening and sharing of immunization records of university students (especially students from out of state and foreign exchange students)</p>	<p>Send at least one staff person to immunization coalition meetings and participate in regional activities.</p> <p>Evidence of enrolment in VFC and VFA.</p> <p>Work with WALHDAB and WPHA and educate policy makers.</p> <p>Continue collaboration with University of Platteville</p>
<p>Work with SWCAP Neighborhood Health Partners, UW Platteville Student Health Services, Southwest Technical College and Clarity Clinic.</p>	<p>Hold more STI screening events with the university and technical college.</p> <p>Promote awareness of available resources to target populations such as students.</p> <p>Conduct, support or promote educational outreach with SWCAP Neighborhood Health Partners and Clarity Clinic</p>	<p>Hold at least one event per year.</p> <p>Reduce county STI rates by 25%</p>
<p>Capitalize on new Title X funding</p>	<p>Explore increasing access to services as well as promotion of services in conjunction with SWCAP Neighborhood Health Partners.</p>	<p>To be determined as opportunities present.</p>

## Grant County Demographic Profile



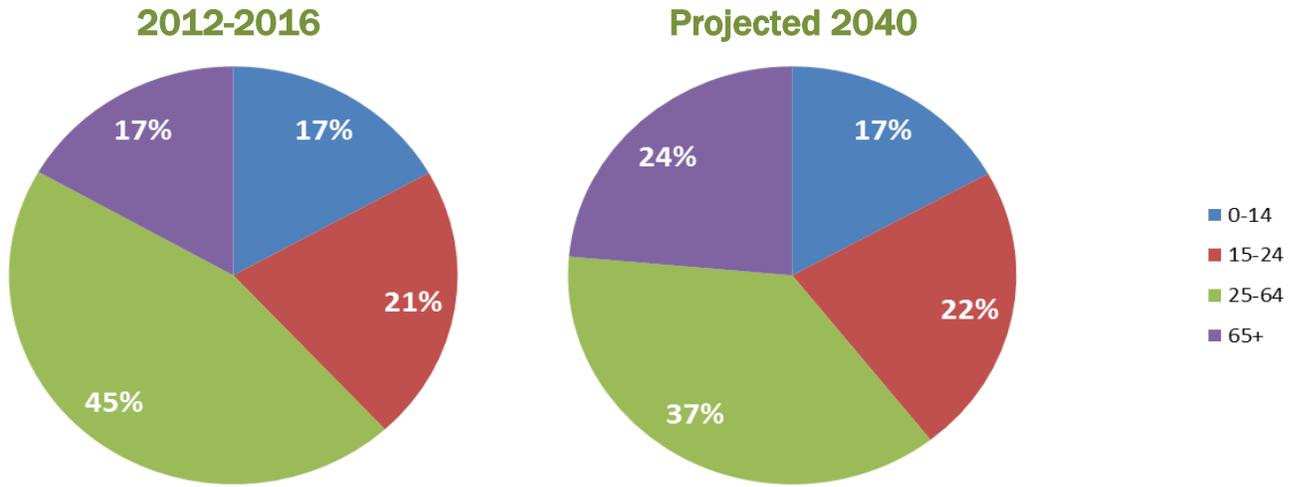
- Grant County is located in southwest Wisconsin forming a tristate area with Iowa and Illinois. The total population of Grant County is 51,723 according to the US Census Bureau (2016). The county has a population density of about 45 people per square mile (US Census Bureau, 2010), which ranks as the 39<sup>th</sup> densest out of the 72 counties in the state. This is much lower than the state average of 105 persons per square mile, which constitutes the area as predominantly rural.
- From 2010-2016, the county experienced a 3.7% increase in population, which was higher than the growth rate of Wisconsin (1.5%) during that same time. This increase in population may have resulted from a small increase in local birth rate combined with a pattern of people moving into the area (Grant County Workforce Profile, Wisconsin Department of Workforce Development, 2017).

## Age Composition

- Overall, Grant County had a higher percentage of people age 65 and older (16.5%) than Wisconsin (15.2%) and the U.S. (14.5%). It is estimated that by 2040, 24% of Grant County residents will be 65 years of age or older (Wisconsin Department of Administration, County Age-Sex Population Projections). As the population ages, the health and support needs of the community will change. Ensuring that capacity exists to serve and support older populations will be important. Focusing on preventing or delaying chronic disease will also be important for the county to be as healthy as possible.



## Grant County Population by Age



Source: US Census Bureau, ACS Demographic and Housing Estimates: 2012-2016

## Race

### Race/Ethnicity in Grant County, WI, and US

Racial/Ethnic Group	Grant County	WI	US
White, non-Hispanic/Latino	96.6%	86.2%	73.3%
African American	1.4%	6.3%	12.6%
American Indian and Alaskan Native	0.2%	0.9%	0.8%
Asian	0.7%	2.6%	5.2%
Persons reporting two or more races	0.8%	2.2%	3.1%
Hispanic/Latino	1.4%	6.5%	17.3%

Source: US. Census Bureau, American Community Survey: 2012-2016

## Household Characteristics

- Grant County had 19,353 households. The county had a lower percentage of households with single female parents and children (4.8%) than the state average (6.2%) and the U.S. (7.0%). Grant County's percentage of households with married couples and children was lower than the state, and the US as well (U.S. Census Bureau, American Community Survey, 2012-2016).

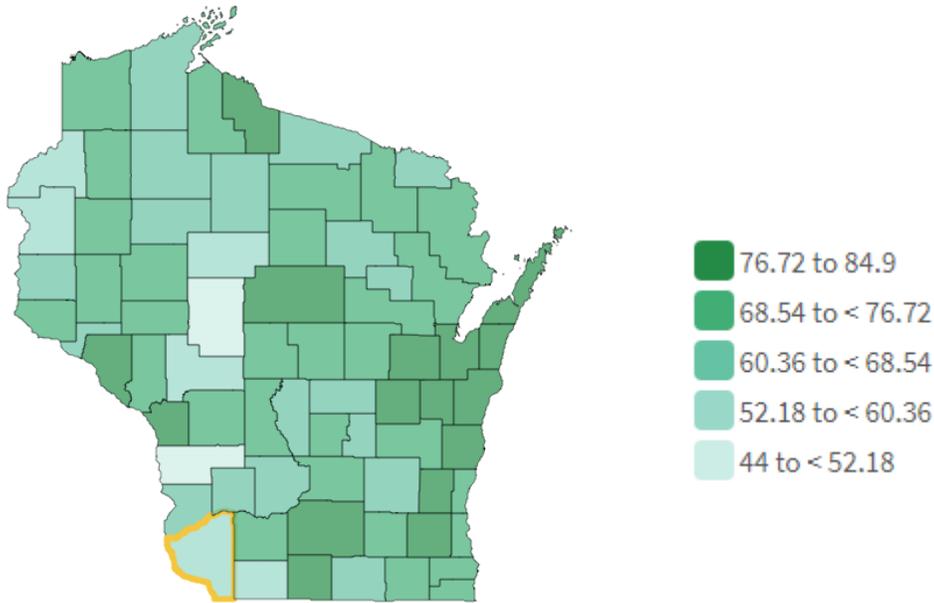
Selected household characteristics are listed in the following table:

Household Characteristics for 2012-2016			
	Grant County	WI	US
Household containing married couple with own children	17.8%	18.4%	19.2%
Household containing single female parent with own children	4.8%	6.2%	7.0%
Household with no children (Non-family Households)	38.5%	36.3%	34.1%
Householder living alone	28.4%	29.1%	27.7%

Source: U.S. Census Bureau, ACS Selected Social Characteristics: 2012-2016

## Vaccination Rates

- Getting vaccinated is an important method of disease prevention that can improve the health of a whole county. Although the prevalence of vaccine-preventable diseases has decreased significantly in the last 100 years, they are not gone. Getting vaccinated can create herd immunity that slows the rate at which diseases are transferred and protects those who have medical conditions that prohibit them from being vaccinated.
- The percentage of residents in Grant County who receive the recommended 4:3:1:3:3:1:4 series of vaccinations by 24 months is at 58.7%. The map below illustrates that this ranks in the bottom quartile in the state (Wisconsin Environmental Health Tracking Program, 2018). The series includes 4+DTaP, 3+Polio, 1+MMR, 3+Hib, 3+HepB, 1+Varicella, 4+PCV. Coverage among older children and adults is less than optimal as well. As a result, outbreaks of pertussis, mumps, measles, and hepatitis have been seen in recent years.



## Causes of Death

- After age adjustment, collectively, all diseases of the heart and all cancers combined were the top 2 causes of death in Grant County respectively at 135.8 and 122.7 deaths per 100,000 (WISH, 2017). The top causes of death in the State were also all diseases of the heart and all cancers respectively at 157.5 and 153.2 deaths per 100,000 (WISH, 2017).
- However, Grant County's top four individually identified causes of death exceeded both the regional and State rates (see table below).

Source: Wisconsin Interactive Statistics on Health (WISH), 2017, Mortality Module: Ranked Detailed Causes of Death

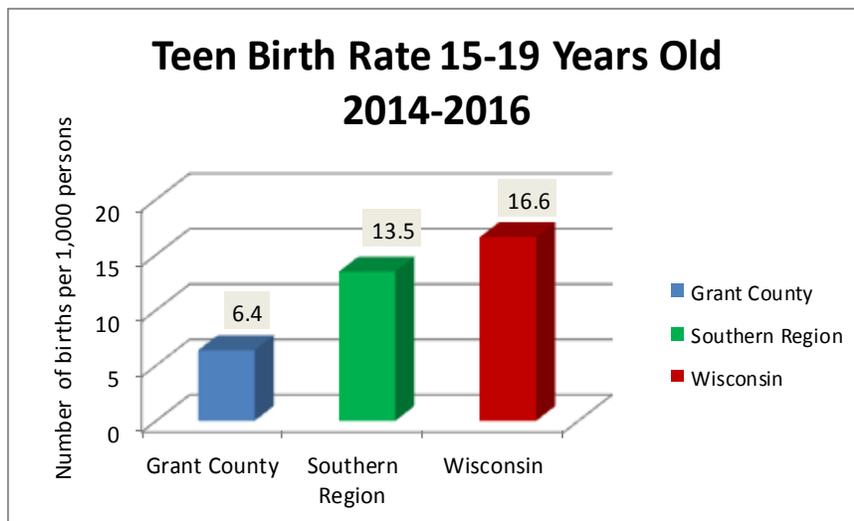
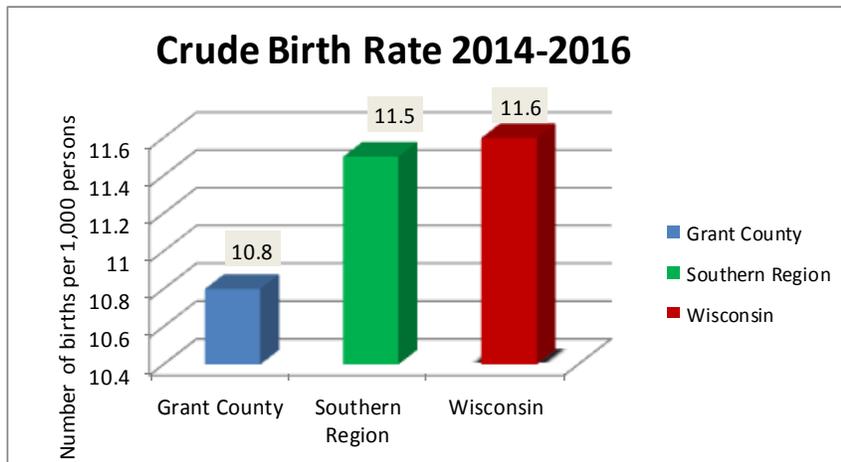
<b>Top 10 Causes of Death 2017</b>			
* Ranked Detailed Causes of Death: Age-adjusted rate (deaths per 100,000 population)			
	<b>Grant County</b>	<b>Southern Region</b>	<b>Wisconsin</b>
Other Chronic Lower Respiratory Diseases	45.0	33.0	35.3
Cerebrovascular Diseases	43.8	33.4	33.5
Alzheimer's Disease	43.3	35.9	31.6
Acute Myocardial Infarction	39.5	25.1	29.0
All Other Forms of Ischemic Heart Disease	34.9	46.2	47.9
Malignant Neoplasms of Trachea, Bronchus and Lung	33.7	33.9	37.5
Heart Failure	27.7	19.7	20.9
Diabetes	24.2	16.8	19.4
All Other Forms of Heart Disease	22.6	32.3	35.7
All Other and Unspecified Malignant Neoplasms	17.9	20.5	19.7
All Other Diseases (residual)	90.9	91.0	99.9

\* The causes of death are defined by the National Center for Health Statistics International Classification of Diseases (ICD-10) coding structure.

### Birth Characteristics

In 2017, there were 594 births (WISH, 2019). Of the 594 births in Grant County in 2017, 35 of them were below 2,500 grams (WISH, 2019). Less than 1 percent of all births were to mothers under 18 years of age (WISH, 2019). About 9.6% of Grant County mothers smoked throughout their entire pregnancy but 6.6% quit smoking prior to becoming pregnant or by the end of the second trimester (WISH, 2019). About 2.4 % of 2017 births were to Hispanic mothers (WISH, 2019).

The following graphs show crude birth and teen birth rate averages from 2014 to 2016 for Grant County, the Southern Region, and the State of Wisconsin.



Source: Wisconsin Interactive Statistics on Health, 2014-2016

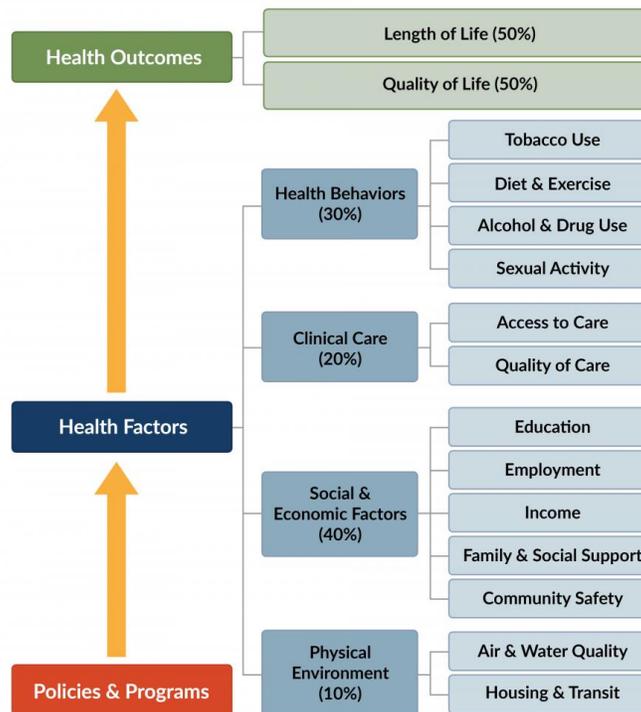
## Factors Influencing Community Health

When people discuss the health of the community in which they live, some of the first things that come to mind are leading causes of death, injury, and illness. However, to properly assess the health of a community, it is important that to consider the factors that lead to poor health outcomes. Assessing these health factors can lead to the implementation of prevention strategies that will help the community to attain its greatest level of health.

Communities often focus on individual health behaviors (an action taken by an individual or group of individuals to change or maintain their health status or prevent illness or injury) and quality health care as vital factors that shape health outcomes, but about half of health outcomes can be explained by the social and economic factors and the physical environment.

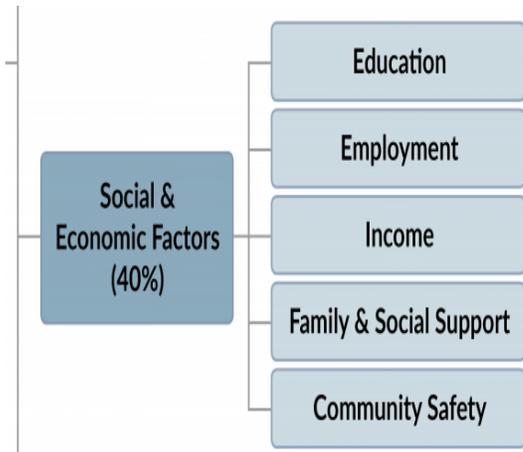
The County Health Rankings Model, shown below, was created by University of Wisconsin Population Health Institute to show the many factors that influence the health of the whole population. The factors include health behaviors, clinical care, social and economic factors and the physical environment. In addition, the health focus areas targeted for analysis are many of those contained within Wisconsin's state health plan, Healthiest Wisconsin 2020. The Rankings model is used to frame the data section of this document and will be a key factor in subsequent work to create a community health improvement plan.

### County Health Rankings Model



County Health Rankings model © 2014 UWPHI

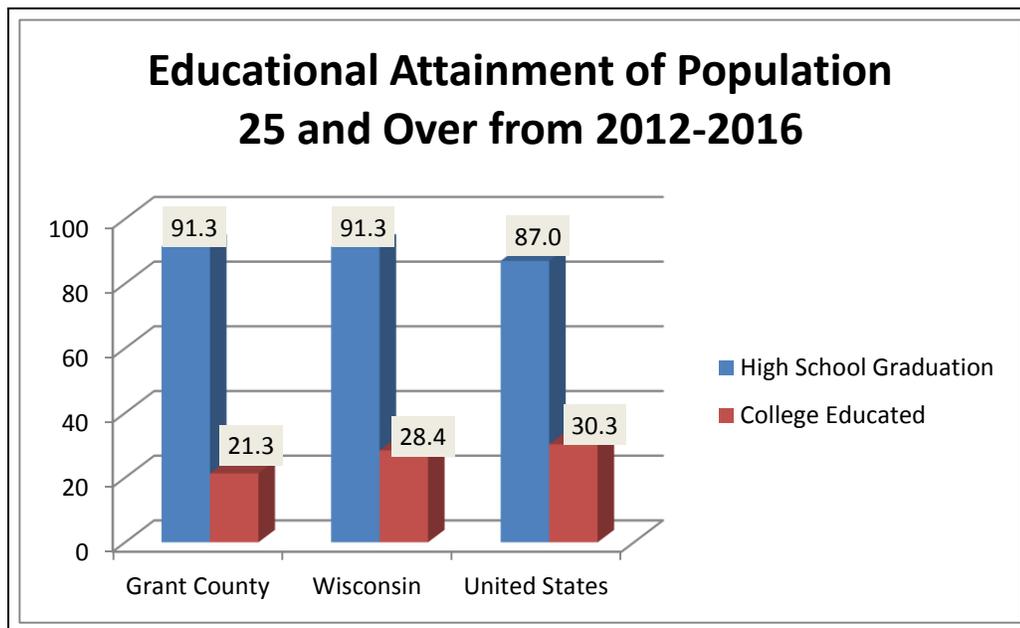
## Social and Economic Factors



- Social and economic factors are comprised of education, employment, income, family and social support, and community safety. These often-overlooked factors influence forty percent of a person's health.
- Overall, this assessment suggests that Grant County has some room to improve in key economic and social factors. Although unemployment has historically been equal or lower than state averages, a lower average income may cause stress on residents, and this stress may have negative health implications.

### Education

- The relationship between higher levels of education and improved health outcomes has been demonstrated. Often times, people who have completed a higher level of education live longer, healthier lives than those who do not.
- The educational attainment of residents in Grant County is similar to the state average and the US average. Over 91.4% of Grant County's population over the age of 25 has obtained a high school diploma. However, the percent of people over the age of 25 that have a college degree (21.3%) is lower than the state (28.4%) and the US (30.3%).



Source: US Census Bureau, Selected Social Characteristics: 2012-2016

## Employment and Income

- Having access to employment opportunities positively impacts health and is linked with slower declines in health over time. Unemployment can lead to stress that many try to alleviate increasing unhealthy behaviors sometimes related to alcohol and tobacco consumption, diet, and exercise. These poor health behaviors can lead to increased risk for disease or mortality. Income and financial resources are important to good health. Individuals need adequate income so that they can obtain health insurance, pay for medical care, afford healthy food and secure safe housing and meet other basic needs.

### Unemployment

Over the last ten years, Grant County has experienced a sharp increase in unemployment during the recession followed by a significant decrease. Unemployment, in general, mirrors or trends lower in Grant County than the state average. In April of 2018, 2.4% of the labor workforce was unemployed (Grant County Workforce Profile, Wisconsin Department of Workforce Development, 2018).

Unemployment Rates 2008-2018											
	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
<b>Wisconsin</b>	4.8%	8.7%	8.5 %	7.5%	6.9%	4.8%	4.5%	4.1%	3.3%	2.7%	2.7% (Apr.)
<b>Grant County</b>	4.8%	7.6%	7.2%	10.9%	5.8%	4.8%	4.0%	4.1%	3.0%	2.4%	2.4%

Source: Office of Economic Advisors-Wisconsin Department of Workforce Development: 2018

### Employers, Industry, and Wages

The table below shows the Top 10 employers in Grant County. The major employers in Grant County are healthcare and education. Of the top 10 employers, six fall under these categories. The top two employers employed 500-999 people. Employers ranked third through tenth employed between 250 and 499 people.

Employer	# Employed
1. UW – Platteville	500-999
2. Southwest Health Center, Inc.	500-999
3. Spectrum Brands	250-499
4. Grant County	250-499
5. Wal-Mart Associates	250-499
6. Gunderson Boscobel Area Hospital and Clinics	250-499
7. Platteville Public Schools	250-499
8. Southwest Wisconsin Technical College	250-499

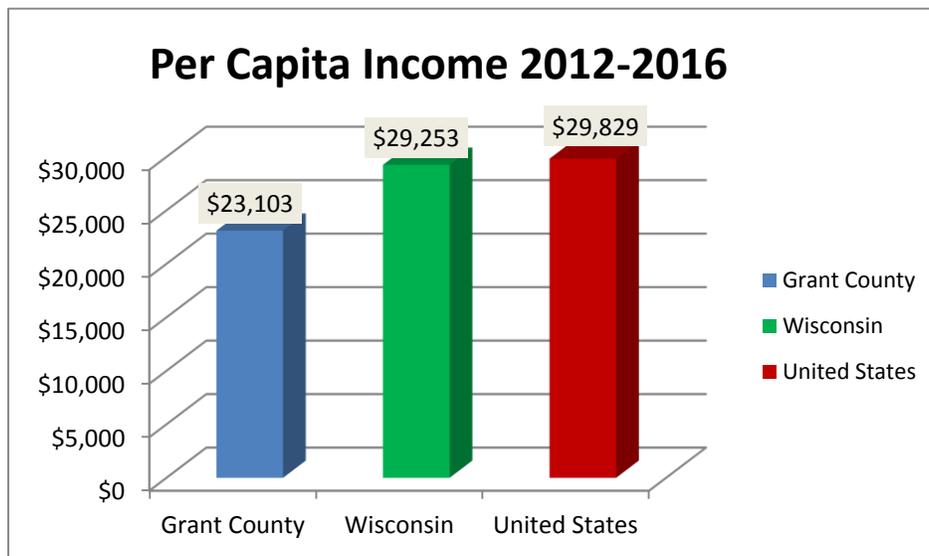
9. Nu-Pak	250-499
10. Heartland Health Care	250-499

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Source: Grant County Economic Development Corporation, May 2018

## Income

Grant County had a per capita income of \$23,103 which was lower than the state (\$29,253) and US average (\$29,829) from 2012-2016 (U.S. Census Bureau, Selected Economic Characteristic: 2012-2016). as shown in the graph below (U.S. Census Bureau, Selected Economic Characteristic: 2012-2016). The median household income of Grant County (\$50,522) was also lower than the state (\$54,610) and the US (\$55,322).



## Labor Force Participation

Labor force is defined as the number of residents age 16 and older who are either working or looking for work. The total labor market in Grant County was 64.9%, which fell between the state rate of 66.9% and the US rate of 63.5% according to the U.S. Census Bureau, Selected Economic Characteristic: 2012-2016.

## Poverty

Grant County had a higher percentage of people living in poverty (15.3%) than the state (12.7%) and the US (15.1%) in 2012-2016. As shown in the table below, Grant County and Wisconsin had a similar percentage of children living in poverty during the same time period.

Sources: U.S. Census Bureau, Selected Economic Characteristic: 2012-2016

<b>Estimated Poverty Rates 2012-2016</b>	
<b>% Living in poverty</b>	<b>2012-2016 US Census Estimates</b>
Grant County	15.3%
Wisconsin	12.7%
US	15.1%
<b>% Under 18 years old living in poverty</b>	
Grant County	16.9%
Wisconsin	17.5%
US	21.2%

Source: U.S. Census Bureau, Selected Economic Characteristic: 2012-2016

## Family and Social Support

- A lack of family and social support (the quality of relationships among family members and friends, as well as involvement in community life) is associated with increased illness and premature death. Survey and focus group data indicates concerns over social isolation and social supports that include several demographics including older populations, low income populations, and other marginalized populations.

## Adverse Childhood Experiences (ACEs)

- Adverse Childhood Experiences (ACEs) are traumatic events in a person's life that can lead to health consequences once they reach adulthood. More ACEs experienced as a child correlate with worse health outcomes as an adult. Health concerns mental health, health risk behaviors, and poor general health (see table) include some common ACEs include physical abuse, sexual abuse, divorced parents, parental incarceration, and alcohol and drug use by a family member.
- Grant County has a lower percentage of residents who have experienced 4 or more ACEs compared to many counties around the state (see map), but the Grant County and the State of Wisconsin is committed to focusing on trauma informed care and creating an environment for all children that fosters better health outcomes as adults.

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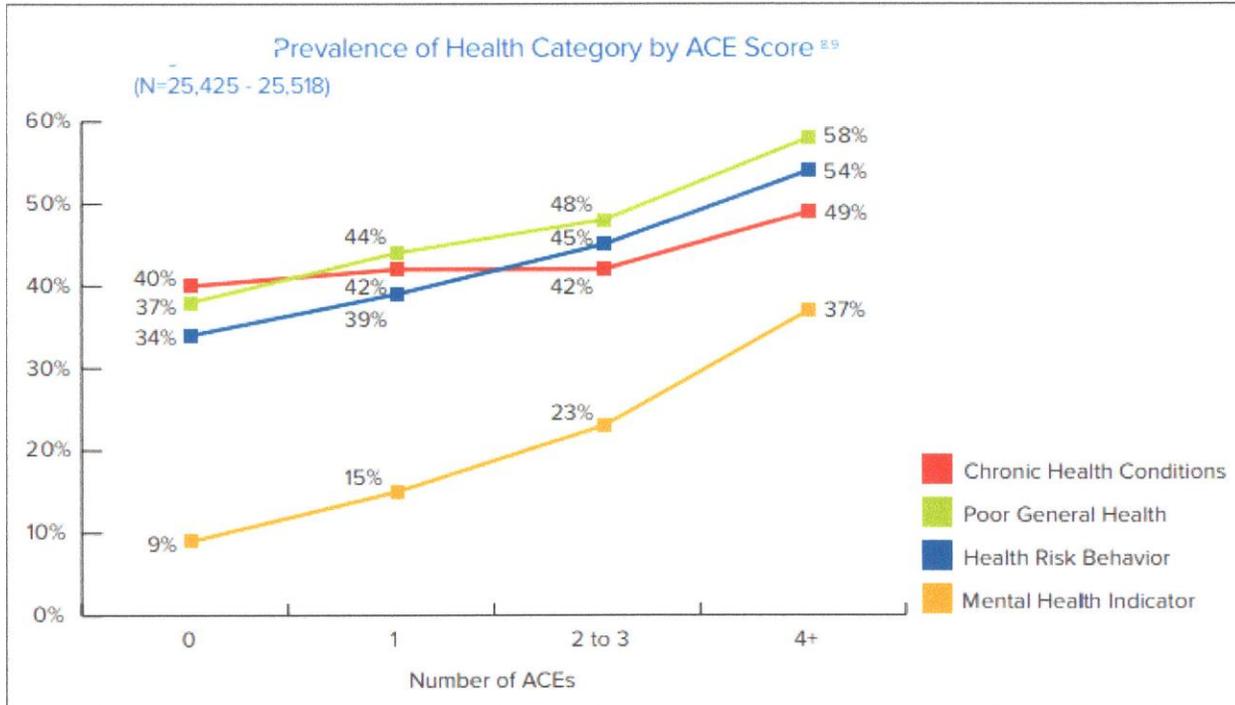
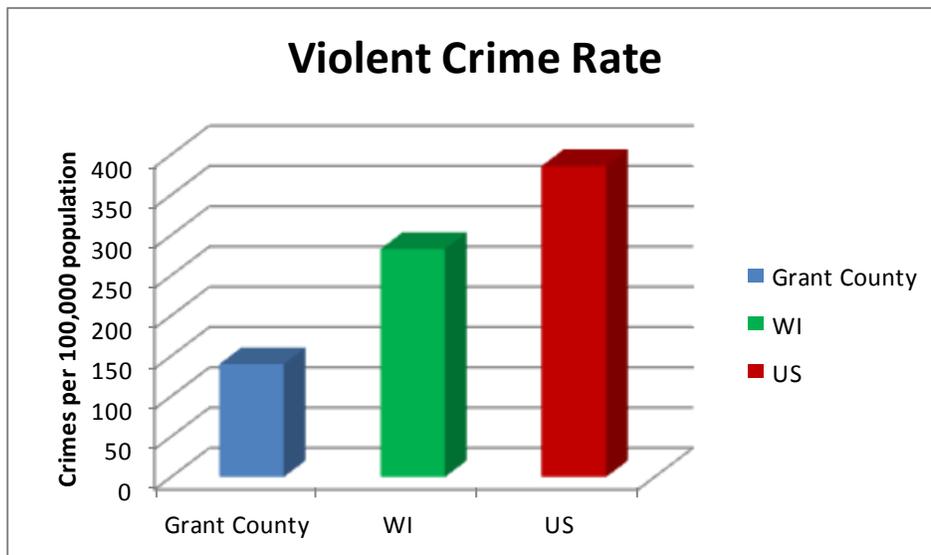


Figure 3. Prevalence of 4 or more ACEs in Wisconsin Counties

Adverse Childhood Experiences in Wisconsin: 2011 – 2015 Behavioral Risk Factor Survey Findings. (2018). Madison, WI: Child Abuse and Neglect Prevention Board.

## Community Safety

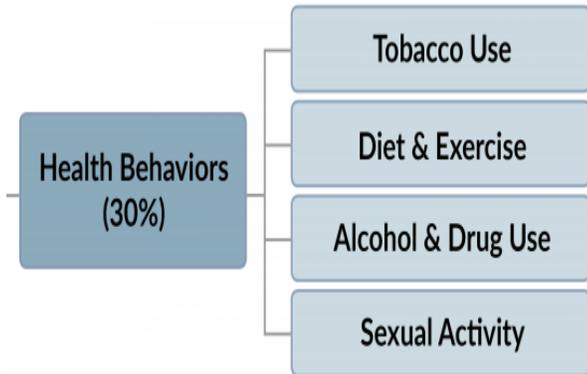
- Grant County has a violent crime rate of 140 per 100,000 population, which is significantly lower than Wisconsin rate of 283 and the United States rate of 386 (Wisconsin County Health Rankings, 2018).



## Motor Vehicle Crashes

- From 2011-2015, Grant County averaged 1,126 motor vehicle crashes per year (Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016). Over this same span, Grant County averaged 4 motor vehicle fatalities per year, which was comparable to the state's average of 3.6 motor vehicle fatalities per year.
- In 2017, Grant County had a crash rate per 100,000 of 2,525 versus a State rate of 2.406 (WisTransPortal, 2019). The same dataset shows a fatal crash rate of 9.27/100,000 for the State versus 15.38/100,000 for Grant County (WisTransPortal, 2019).

## Health Data

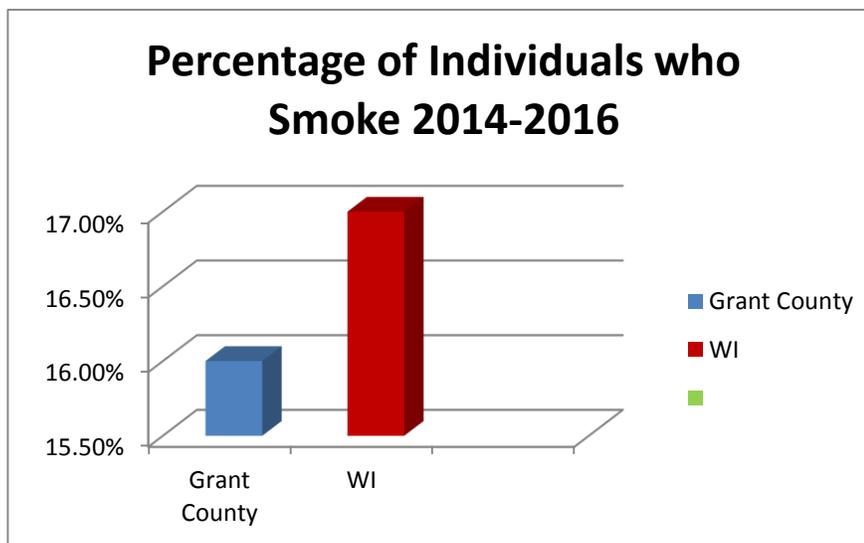


## Health Behaviors

- The following sections of this assessment present data on health-related behaviors, along with some aspects of the environment that influence those behaviors, either positively or negatively. Health behavior also reflects a person's health beliefs. Some common health behaviors are exercising regularly, eating a balanced diet and getting the recommended amount of sleep.

## Smoking

- 16% of Grant County residents identify themselves as smokers, which is slightly lower than the state average (17%). The percentage of smokers in Grant County has fallen from 22% in 2010. However, the use of Electronic Delivery Devices (a.k.a vaping) and other tobacco products is not well studied in Grant County at this time.



Source: 2016 Behavioral Risk Factor Surveillance System (BRFSS) data

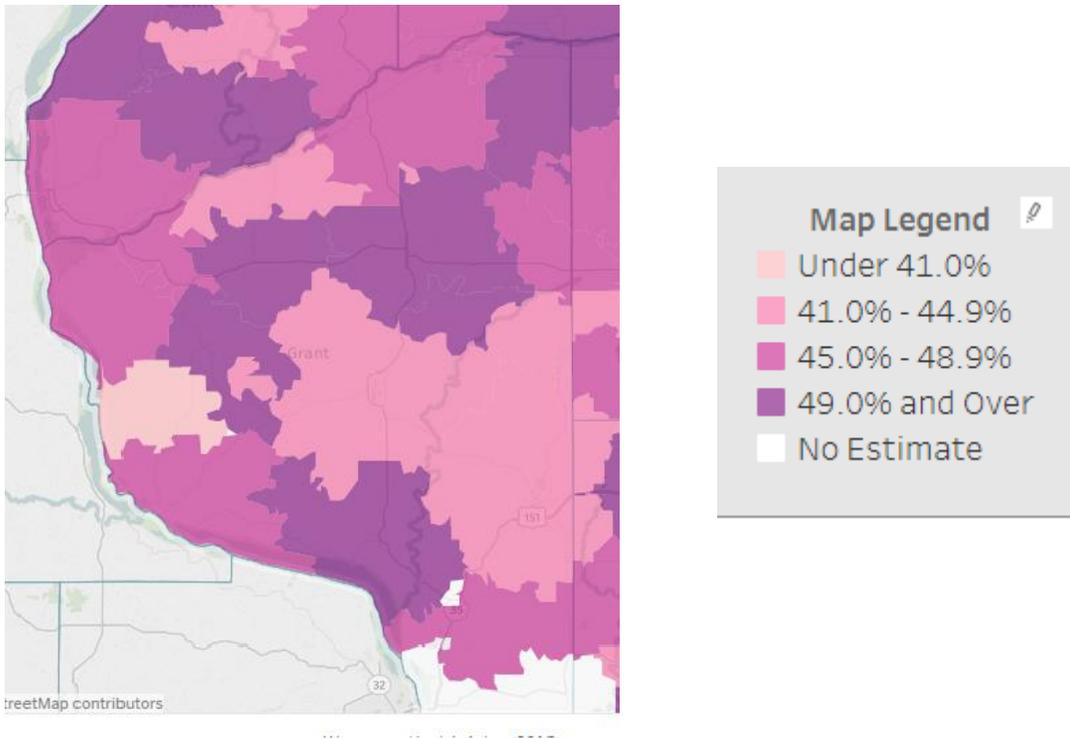
## Diet and Exercise

- Obesity has a strong relationship to many negative health conditions and outcomes like increased risk of diabetes, heart disease, and some cancers. Factors that might affect your weight include your genetic makeup, overeating, eating high-fat foods, and not being physically active.
- Grant County has comparable numbers to the state in terms of people who are overweight (Body Mass Index (BMI) of 25 to 29.9 kg/m<sup>2</sup>) but more obese (BMI greater than or equal to 30 kg/m<sup>2</sup>) individuals at 35% of the population than the state averages.

Obesity Statistics in Grant County and Wisconsin		
	Grant County	Wisconsin
Percent Obese	35%	31%

Sources: UW Population Health 2019 County Health Rankings

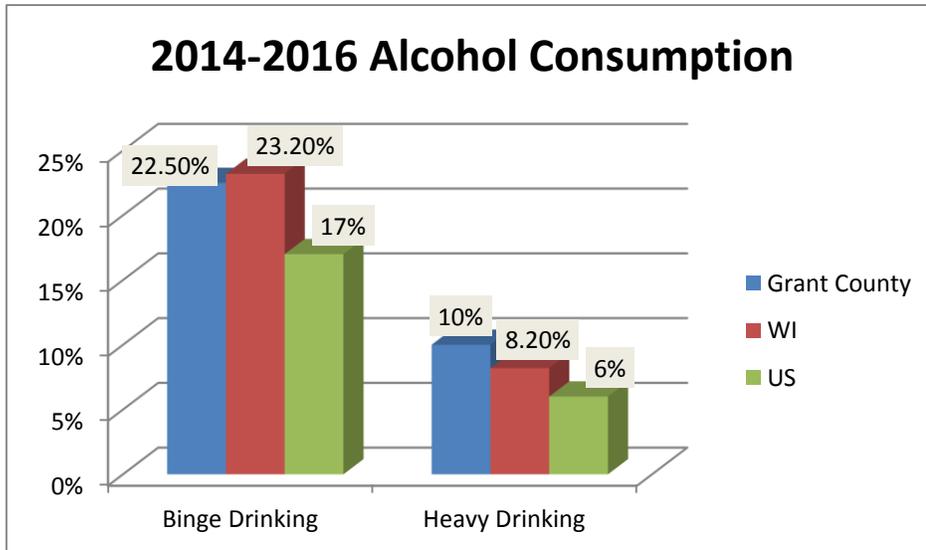
## Grant County Obesity Percentages by Zip Code



Source: Wisconsin Health Atlas 2018, University of Wisconsin School of Medicine and Public Health

## Alcohol and Drug Use

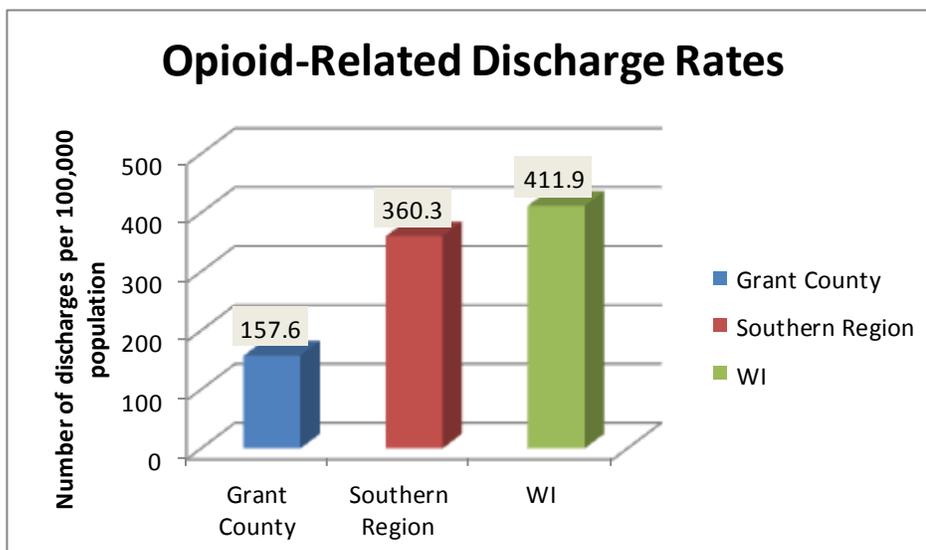
- Binge drinking is defined as consuming more than 5 drinks for men or 4 drinks for women in two hours. Heavy drinking is described as binge drinking on 5 or more days in the past month.
- Wisconsin has consistently high rates of adult alcohol consumption and binge drinking compared to other states and the U.S. as a whole. Additionally, Grant County percentages of binge drinkers and heavy drinkers compared to the state average. Alcohol can be a major contributor to car crashes, injury, and neglect.



Sources: WISH Data Query System (Wisconsin Interactive Statistics on Health) (2018) (Rates per 100,000 age-adjusted) and Centers for Disease Control Prevention (2015)

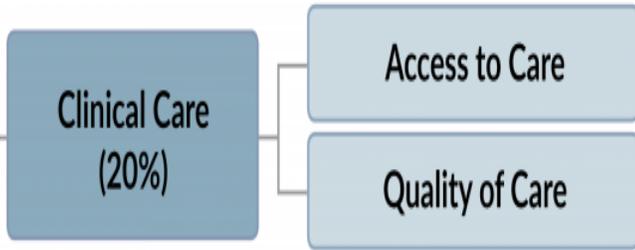
## Opioids

- In 2016, more Wisconsin residents died due to opioid overdoses than car accidents. Grant County has significantly lower levels of hospital discharges due to opioids compared to the Southern Region and state, but this is still a significant problem in our communities (Wisconsin Interactive Statistics on Health, 2018).



## Sexual Activity

- There were 1,707 births in Grant County from 2014-2016 (Wisconsin Interactive Statistics on Health, 2018). Grant County had a teen birth rate of 6.4% among women ages 15-19 years old. This rate is notably lower than the Southern Region (13.5%) and Wisconsin (16.6%) according to Wisconsin Interactive Statistics on Health 2014-2016.
- The average crude birth rate is lower than the southern regional average and the State. However, the average general fertility rate for Grant County was slightly higher compared to the Southern Region and comparable to Wisconsin overall. The averages for crude birth rate and general fertility rate for 2014-2016 are located in the following table.
- Chlamydia is the most common sexually transmitted infection (STI) in Grant County and Wisconsin. In 2017, the rate of Chlamydia in Grant County was 370 per 100,000 versus a State rate of 485 per 100,000 (Wisconsin STD Program data, 2018). STIs have been generally trending upward peaking thus far in 2017 in Grant County. In 2003, a total of 61 cases of chlamydia were reported in Grant County (Agency reports, 2003). However, due to improved reporting as well as actual increases in disease, in 2017 and 2018 there were 194 and 160 reports respectively (WEDSS, 2018, 2019)

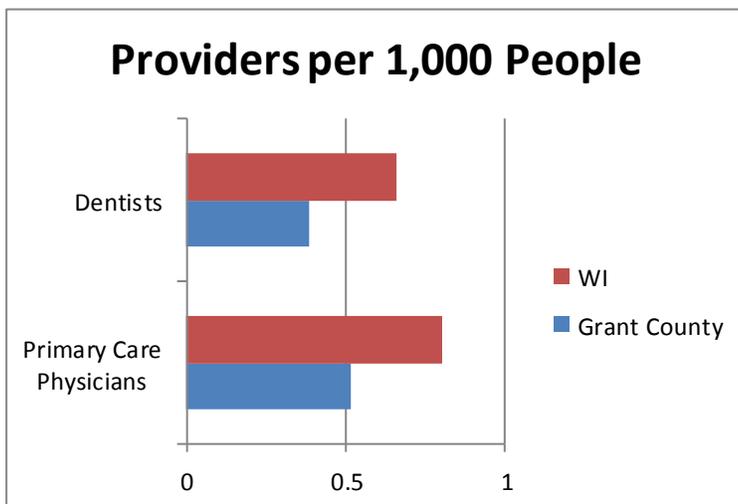
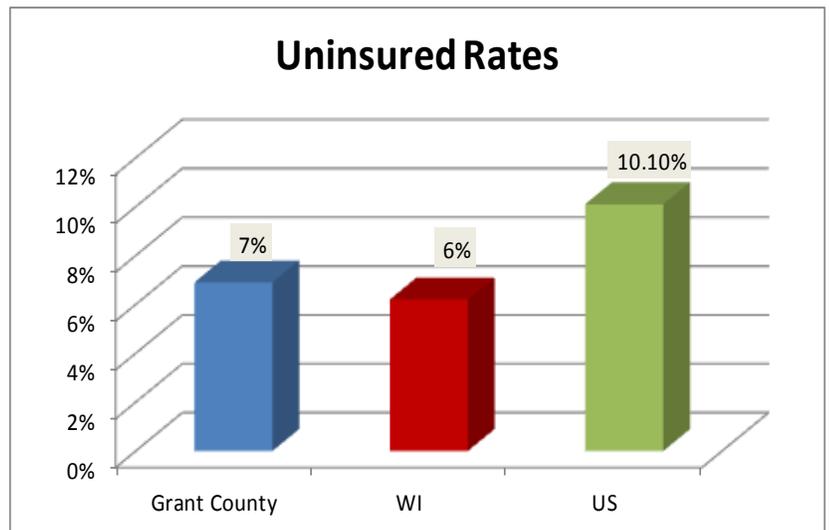


## Clinical Care

- Clinical care includes services for medical, dental and mental health care. These services all help to administer medical interventions that can impact the length and quality of life.

## Access to Care

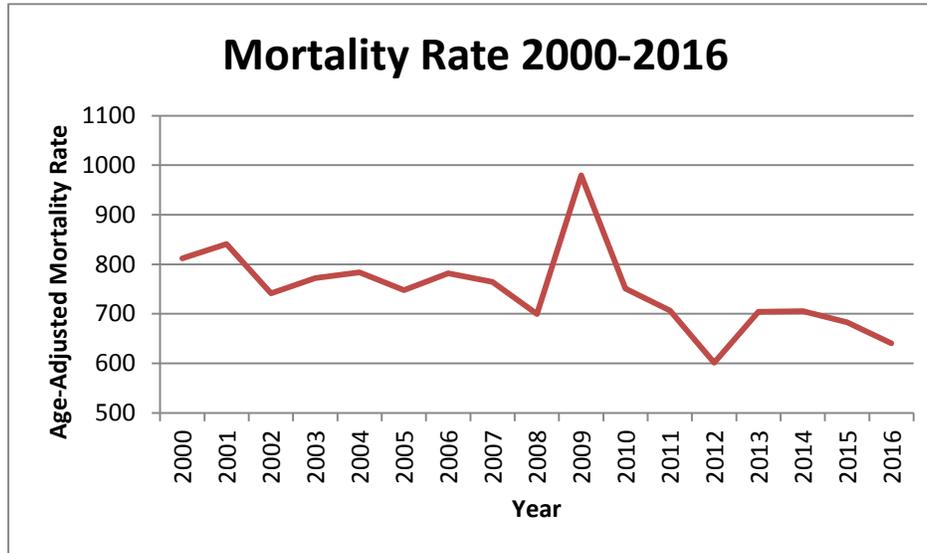
- Access to healthcare has many factors including health insurance, local care options, affordability, and cultural barriers.
- Grant County had a slightly higher percentage of people under the age of 65 who are uninsured compared to the state (7% vs 6%), but it does have a lower percent than the United States (10.1%). (County Health Rankings, 2019)



- Not having enough local providers can create significant challenges for an area. Compared to the state, Grant County has a lower ratio of providers to the population. However, mid-level providers like nurse practitioners and physician's assistants have become much more common in Grant County, which has helped to meet more of the area's needs.

## Mortality Data

- One way that we can measure health is through mortality rates. In Grant County, the age-adjusted mortality rate shows a decrease in mortality rate from 2000-2016.

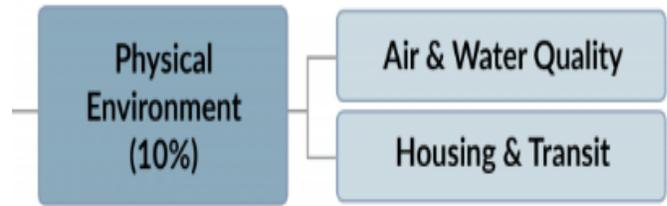


The top 10 Age-adjusted Rate (Broad) Causes of Death in Grant County in 2017 are as follows (WISH, 2019):

1. Diseases of heart
2. Malignant neoplasms
3. Other causes
4. Chronic lower respiratory diseases
5. Cerebrovascular diseases
6. Alzheimer's disease
7. Accidents (unintentional injuries)
8. Diabetes mellitus
9. Intentional self-harm (suicide)
10. Influenza and pneumonia

## Physical Environment

- Where we live, work, and play can also have impacts on our health. Air and water quality, along with safe housing all contribute to good health.



- In the County Rankings Report in 2019, where a ranking of 1<sup>st</sup> is the best physical environment, Grant County ranked 24<sup>th</sup> out of 72 counties in Wisconsin.
- The Wisconsin Environmental Public Health Tracking Program also publishes County Environmental Health Profiles. The following two pages are a “Dashboard” summary of the 2019 report. There are further details on air and water quality following the report.

# GRANT COUNTY

DASHBOARD | 2019 COUNTY ENVIRONMENTAL HEALTH PROFILE



## COMMUNITY HEALTH

### Fluoride

85.4% | Percent of population with fluoridated public water\*  
Wisconsin: 88.4%

### Alcohol Outlet Density

1.9 | Crude rate of alcohol licenses per 500 people  
Wisconsin: 1.5



## HOME HAZARDS

### Carbon Monoxide Poisoning

12.1 | Rate of ER visits per 100,000 people  
Wisconsin: 7.9

### Childhood Lead Poisoning

6.4% | Percent of children <6 years old with blood lead level  $\geq 5$   $\mu\text{g/dL}$   
Wisconsin: 5.0%

### Radon

52.0% | Percent of tests with results  $\geq 4$  pCi/L  
Wisconsin: 50.0%



## CLIMATE

### Heat Stress

27.2 | Rate of ER visits per 100,000 people  
Wisconsin: 12.6



## PRIVATE WATER QUALITY

### Nitrate

8.0% | Percent of test results above EPA standard of 10 mg/L  
Wisconsin: 11.0%

### Arsenic

13.2% | Percent of test results above EPA standard of 10  $\mu\text{g/L}$   
Wisconsin: 6.0%



## HEALTH CONDITIONS

### Asthma

26.1 | Rate of ER visits per 10,000 people<sup>#</sup>  
Wisconsin: 35.1

### Melanoma

27.2 | Rate of new cases per 100,000 people  
Wisconsin: 23.9

### Lung Cancer

49.5 | Rate of new cases per 100,000 people  
Wisconsin: 59.8

### Lyme Disease

57.7 | Crude rate per 100,000 people  
Wisconsin: 51.7

● Above state value

● At or below state value

\* Above state value preferred for this measure

^ Data are suppressed

<sup>#</sup> Note this rate is per 10,000 people, while the others are per 100,000. To compare this measure to others, be sure to multiply the rate by 10.

Data details on next page



## DASHBOARD DATA DETAILS

Below are the abbreviated references for the data presented in the dashboard. Note that some measures have more years of data available on the Wisconsin Tracking portal. For additional details on the data, see pages 15-16. For more information about age-adjustment and other terms referenced in this Profile, visit the Wisconsin Tracking Program's data details webpage or our Tracking 270 tutorial, both available [on our website](#).



### COMMUNITY HEALTH

**Fluoride:** Percent of population with access to fluoridated public water

**Source:** Wisconsin Oral Health Program, Bureau of Community Health Promotion, Division of Public Health, Wisconsin Department of Health Services  
**Year displayed:** 2017

**Alcohol Outlet Density:** Crude rate of alcohol licenses per 500 people

**Source:** Division of Care and Treatment Services, Wisconsin Department of Health Services; primary data source is Wisconsin Department of Revenue  
**Years displayed:** 2015-2016



### HOME HAZARDS

**Childhood Lead Poisoning:** Percent of children (less than 6 years of age) tested who had a blood lead level  $\geq 5$   $\mu\text{g}/\text{dL}$

**Source:** Childhood Lead Poisoning Prevention Program, Bureau of Environmental and Occupational Health, Division of Public Health, Wisconsin Department of Health Services  
**Year displayed:** 2016

**Radon:** Percent of tests with results above EPA standard of 4 pCi/L

**Source:** Radon and Indoor Air Program, Bureau of Environmental and Occupational Health, Division of Public Health, Wisconsin Department of Health Services  
**Year displayed:** 2015

**Carbon Monoxide (CO) Poisoning:** Age-adjusted rate of unintentional emergency room visits related to CO poisoning per 100,000 people

**Source:** Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services  
**Years displayed:** 2013-2017



### PRIVATE WATER QUALITY

**Nitrate:** Percent of test results that exceed EPA standard of 10 mg/L

**Arsenic:** Percent of test results that exceed EPA standard of 10  $\mu\text{g}/\text{L}$

**Source:** Well Water Quality Viewer, Center for Watershed Science and Education, University of Wisconsin-Stevens Point  
**Years displayed:** 1988 to March 2017



### HEALTH CONDITIONS

**Asthma:** Age-adjusted rate of emergency room visits related to asthma per 10,000 people

**Source:** Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services  
**Year displayed:** 2017

**Melanoma:** Age-adjusted rate of new cases of melanoma reported by health care providers per 100,000 people

**Lung Cancer:** Age-adjusted rate of new cases of lung cancer reported by health care providers per 100,000 people

**Source:** Wisconsin Cancer Reporting System, Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services  
**Years displayed:** 2012-2016



### CLIMATE

**Heat Stress:** Age-adjusted rate of emergency room visits related to heat stress per 100,000 people

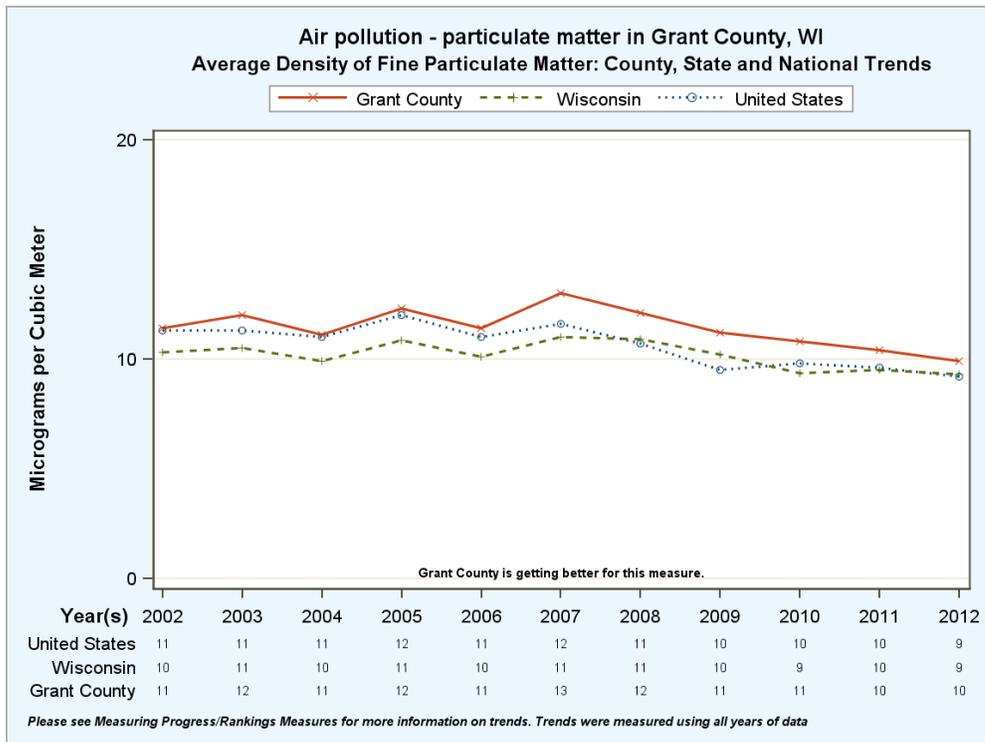
**Source:** Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services  
**Years displayed:** 2013-2017

**Lyme Disease:** Crude rate of confirmed and probable Lyme disease cases per 100,000 people

**Source:** Vectorborne Disease Program, Bureau of Communicable Diseases, Division of Public Health, Wisconsin Department of Health Services  
**Year displayed:** 2017

## Air Quality

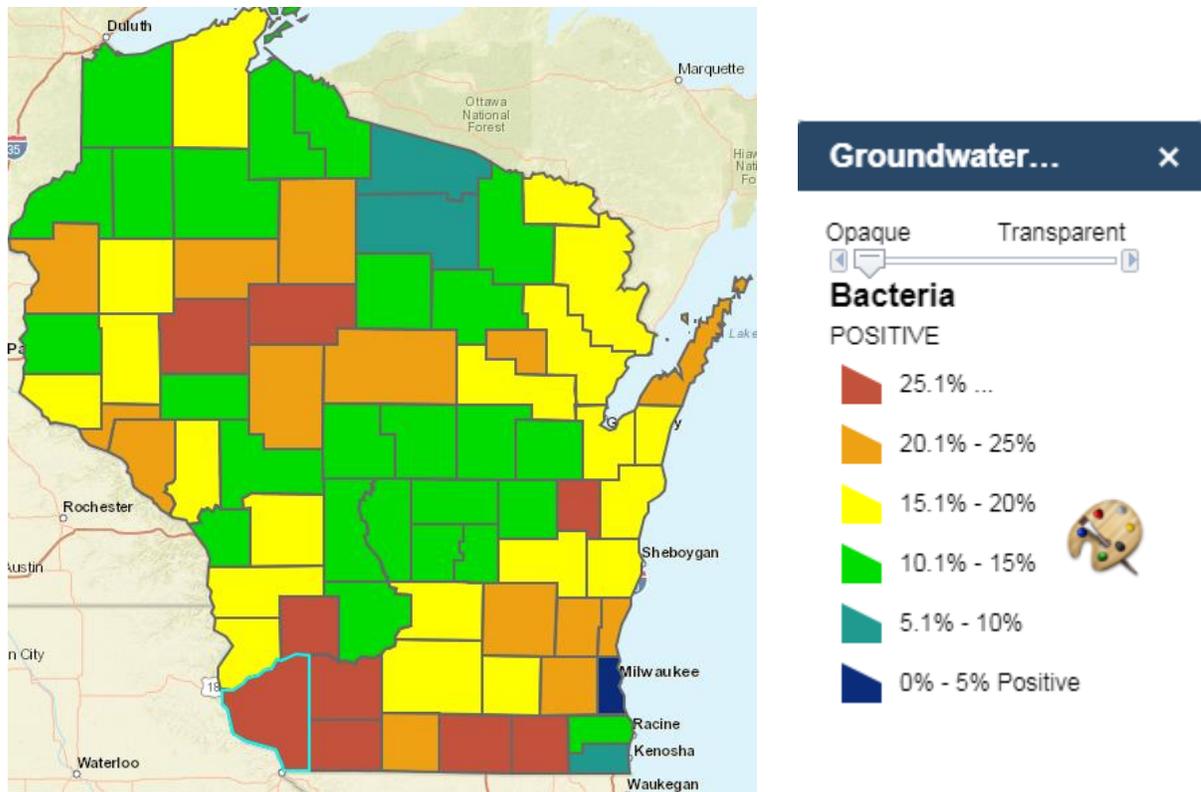
- Grant County averages 9.5 micrograms of pollution-particulate matter per cubic meter while Wisconsin's average is 8.6 micrograms per cubic meter (County Health Rankings 2019).



Source: Center for Disease Control and Prevention

## Water Quality

- Water quality is the highest resource concern for the residents of Grant County. The sandstone aquifer that lies under Grant County is susceptible to ground water contamination, and Southwest Wisconsin experiences some of the highest rates of bacterial contamination in the state.



Source: UW-Extension, Private Wells Groundwater Quality, 2018

## Housing

- Severe housing percentages are the percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities.
- 13% of households in Grant County are classified as severe housing problems. This is slightly less than the Wisconsin average of 15% of households.

## Community Engagement

### Community Dialogue/Focus Group Data

#### Locations and Dates

10/24/18 –Fennimore

11/01/18 – Muscoda

11/08/18 – Boscobel

11/08/18 – Cassville

03/22/19 - Lancaster

#### Questions Asked

1. What is important to the community?
  - Define what a community is. Does your group define it by zip code, ethnicity, business or social association? There can be many answers, consensus is not necessary.
  - After defining it, you could ask ‘how would you describe your community to someone who is not a part of it?’ What is the most important issue their community faces right now? What is threatening community health?
2. How is quality of life perceived in the community?
  - We want to know what ‘living your best life’ means to them. Questions to ask include: ‘What does it look like to live your best life in your community?’ ‘What is missing in your life right now that’s preventing you from living your best life?’
3. What assets does the community have?
  - This question provides empowerment. ‘If you could change one thing about your community to make it a better place to live, what would it be?’ ‘What are you proud of in your community, what are some strengths?’
4. What would make it easier to make healthier choices?
  - This question covers health equity and has the power to affect policy changes. We want to know how they feel about their built environment, access to care, ‘Do you have the resources necessary to make better choices?’

## Survey Questions General Public

**Overall, to what degree do you feel the health needs of your community are being addressed?**

**Below are seven areas of health needs. While all are important, please rank each according to how you think resources in your community should be allocated, with #1 being the area that should get the most resources/effort/attention and #7 the least.**

Mental Health  
Chronic Illness  
Behaviors  
Injuries  
Age Related issues  
Environmental issues  
Community Capacity

**Please rank the environmental factors from the list below that you think have the biggest impact on health in your community, with #1 having the biggest impact and #13 having the least impact on health in your community.**

Culture of Unhealthy eating  
Limited Access to Healthy Foods  
Shortage of Health Professionals/Services  
Limited Access to Healthy Recreation  
Poor Housing Quality  
Limited Access to Dental Care  
Social Isolation  
Poor Water Quality  
Poor Air Quality  
Poor Workplace Safety  
Crime  
Limited Access to culture and arts  
Other

**Please rank the environmental factors from the list below that you think have the biggest impact on health in your community, with #1 having the biggest impact and #13 having the least impact on health in your community.**

Cancer  
Heart Disease  
Suicide  
Stroke  
Injury/Accidents  
Other

**Below is a list of lifestyle/behavioral health factors. Please mark the 3 behavioral factors that you think most negatively affect health in your community**

Other Drug use  
Drinking and Driving  
Lack of Parenting Skills  
Misuse of Prescription Drugs  
Binge/Heavy Drinking  
Insufficient Physical Activity  
Smoking  
Poor Nutrition  
Risky Sexual Behavior  
Other

**What could be done to improve the health of your community?**

**Please mark your age group**

Under 20  
20-30  
31-40  
41-50  
51-60  
61-70  
Over 70

**Please mark your gender.**

Male  
Female  
Transgender  
Gender Neutral

**What is your Zip Code?**

**Which of these statements describe your household? You may mark more than one**

No minor Children in my home  
There are children ages 9-18 in my home  
There are children under 9 in my home

**Other Comments**

## Key Stakeholders Survey

Overall, to what degree do you feel the health needs of your community are being addressed?

The following are the most prevalent causes of death in our region. Please choose the 3 that you think have the biggest impact on life in your community.

- Cancer
- Heart Disease
- Diabetes
- Injuries/Accidents
- Suicide
- Stroke
- Other

Please mark the 4 environmental factors from the list below that you think have the biggest impact on the quality of life in your community.

- Culture of Unhealthy eating
- Limited Access to Healthy Foods
- Shortage of Health Professionals/Services
- Limited Access to Healthy Recreation
- Poor Housing Quality
- Limited Access to Dental Care
- Social Isolation
- Poor Water Quality
- Poor Air Quality
- Poor Workplace Safety
- Crime
- Limited Access to culture and arts
- Other

Below is a list of mental health conditions and issues. Please mark the 4 that you think have the most impact on the quality of life in your community

- Depression/Anxiety
- Addiction
- Abuse
- Memory loss
- Anger Disorder
- ADHA
- Autism
- Other

**Please mark your age group**

Under 20  
20-30  
31-40  
41-50  
51-60  
61-70  
Over 70

**Please mark your gender.**

Male  
Female  
Transgender  
Gender Neutral

**What is your Zip Code?**

**How many years have you lived in your community?**

Less Than 2 years  
2-10 years  
More than 10 Years

**Do you work in a health care setting?**

**Which hospital do you live closest to?**

**Below is a list of several sectors in our local communities. Please select any/all you represent.**

Health Care  
Business  
Government  
Education  
Other  
Youth Serving Organization  
Faith-based Organization  
Agriculture  
Aging  
Low Income  
Minorities  
Disabilities

**For this survey, we will look at eight areas of health needs. While all are important, please rank each according to how you feel resources in your community should be allocated, with #1 being the most important.**

- Mortality
- Behaviors
- Morbidity
- Mental Health
- Environmental Issues
- Injuries
- Community Capacity
- Aging Related Issues

**Please mark the 3 items that you think have the most available and accessible treatment options in your community.**

- Diabetes
- Heart Disease
- Stroke
- Cancer
- Drug and Alcohol abuse
- Mental Health
- Other

**Please select the 3 items that you think have the most available and accessible prevention services in your community and the region**

- Diabetes
- Heart Disease
- Stroke
- Cancer
- Drug and Alcohol abuse
- Mental Health
- Other

**The following conditions and events - though not always fatal by themselves - do cause much pain, distress and other problems. Please choose the 3 you believe have the most impact on health in your community and our region**

- Cancer
- Mental Health
- Diabetes
- Heart Disease
- Alzheimer's
- Lower Respiratory Disease
- Brain injury
- Sexually Transmitted Infections
- Other

**Consider your nearest or preferred hospital. What role or roles do you think it should fulfill in improving community health with regard to the following list of diseases and conditions: Cancer, heart disease, diabetes, lower respiratory diseases such as asthma and emphysema, brain injury and Alzheimer's and mental health?**

**As a key stakeholder in the community, what role could you (or your organization/business) fulfill to positively impact that same list of diseases and conditions (cancer, heart disease, diabetes, lower respiratory disease such as asthma and emphysema, brain injury, Alzheimer's and mental health)?**

**Below are common causes of injury in our region. Please mark the 5 causes that you believe have the most impact on life in your community.**

- Alcohol and drug related Motor Vehicle accidents
- Falls
- Farm Accidents
- Recreational vehicle accidents
- Violence
- Deer related motor vehicle accidents
- Firearms
- Accidental poisoning
- Other

**What are 3 things that could be done in your community to prevent injuries like the ones listed above?**

**What could be done in your community to improve outcomes after an injury or accident?**

**What steps do you think health officials in your community should take to improve environmental health (including access to healthy foods, access to healthy recreation, culture of healthy eating, air, water or housing quality, workplace safety, sufficient number of health professionals/services, access to dental care)?**

**As a key stakeholder in the community, what role could you (or your organization/business) fulfill to positively impact the environmental health (including access to healthy foods, access to healthy recreation, culture of healthy eating, air, water or housing quality, workplace safety, sufficient number of health professionals/services, access to dental care)?**

**Below is a list of lifestyle/behavioral health factors. Please mark the 4 behavioral factors that you think most negatively affect the quality of life in your community.**

- Other Drug use
- Drinking and Driving
- Lack of Parenting Skills
- Misuse of Prescription Drugs
- Binge/Heavy Drinking
- Insufficient Physical Activity
- Smoking
- Poor Nutrition
- Risky Sexual Behavior
- Other

**Please mark the top 3 barriers to better behavioral health treatment in your community.**

- Lack of available services
- Lack of behavioral Health Professionals
- Cost
- Stigma
- Public Awareness
- Transportation
- Other

**What educational program do you think should be provided in your community?**

**Please mark the top 3 barriers to better mental health treatment in your community.**

- Lack of available services
- Lack of behavioral Health Professionals
- Cost
- Stigma
- Public Awareness
- Transportation
- Other

**Please mark the top 3 barriers to substance abuse treatment in your community.**

- Lack of available services
- Lack of behavioral Health Professionals
- Cost
- Stigma
- Public Awareness
- Transportation
- Other

**Please identify any specific health care or social service you think is lacking in your community and that if added would improve the health of your community.**

## References

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