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MESSAGE FROM THE HEALTH OFFICER

April, 2013

Greetings Polk County Citizens,

I am pleased to present the 2012 Polk County Community Health Needs Assessment (CHNA). The health of our population is instrumental to the well-being of our community. Healthy people lead more productive lives, contribute more to society and keep our economy strong. Prevention of chronic disease such as diabetes, heart disease and cancer not only assures a strong quality of life, but also results in a decreased economic burden on our health care system. This report gives a snapshot of the current health status of Polk County citizens.

Many community members and key stakeholders participated in the CHNA community forums and examined current data relevant to the health of Polk County citizens. They ultimately selected three priority focus areas that could benefit from a coordinated community planning effort. A Community Health Improvement Plan (CHIP) is being developed as a companion to the CHNA and will detail goals, objectives and action plans for each of the three health focus areas.

Sincere appreciation is extended to Amery Regional Medical Center, Osceola Medical Center and St. Croix Regional Medical Center for ongoing participation and fiscal support during the CHNA process. In addition, heartfelt thanks goes to Mike Rust, ABC for Rural Health; Cortney Draxler, Public Health Specialist; and Kim Gearin, Research Scientist; who spent countless hours examining health data and trends, and brought the data to life through written reports and PowerPoint presentations. A special thanks to Mary Boe, Health Educator, for coordinating the entire CHNA process and community activities with our staff and partners.

Finally, a thanks goes to the Wisconsin Association of Local Health Departments and Boards (WALHDAB) and the UW Population Health Institute for Wisconsin Partnership Program funds received for the “Creating and Piloting New Resources to Support Local Efforts to Improve the Health of Wisconsin Communities” grant project Polk County Department and its partners received to help facilitate work on this endeavor.

For online access to the Polk County CHNA and CHIP, please take a minute to visit www.healthypolkcounty.com. We hope to keep this website updated with progress on Polk County’s Community Health Improvement Plan.

Warm Regards and Sincere Wishes for Good Health,

Gretchen Sampson RN MPH
Director/Health Officer
ACKNOWLEDGEMENTS

The 2013 Polk County Community Health Needs Assessment (CHNA) represents the collaborative effort of the following four key partners, who provided direction and leadership to the CHNA, assured compilation and shared data and engaged residents of Polk County through a series of forums and surveys:

- Polk County Health Department (PCHD)
- Amery Regional Medical Center (ARMC)
- Osceola Medical Center (OMC)
- St. Croix Regional Medical Center (SCRMC)

The collaborative team acknowledges and extends sincere appreciation to the following community partners for their contributions to the Polk County CHNA process.

1300 + Community Members
- Andrea Seifert, PCHD
- Ann Frey, Community Referral Agency
- Ashley Sempf, Haage Dental
- Bob Wolf, OMC
- Bonnie Leonard, PCHD
- Brandi Warner, CESA 11
- Brian Hobbs, PCHD
- Carleen Matosky, Mental Health Task Force
- Corby Stark, Polk County Human Services
- Cortney Draxler, PCHD
- Dan Shober, Good Samaritan Society
- Dana Frey, Polk County Administrator
- Danielle Nelson, Central Insurance
- Emily Larson, Amery School District
- Gail Wassberg, Polk County Veteran’s Affairs
- Gregg Westigard, Inter-County Leader
- Gretchen Sampson, PCHD
- Jen Johnston, Unity School District
- Jennifer Williams, Polk County Kinship
- Joanne Jackson, ARMC
- John Gauper, Central Insurance
- Joyce Schaefer, ARMC
- Julie Krenz, PCHD
- Julie Pool, Good Samaritan Society
- Karen Littlefield, Good Samaritan Society
- Kathy Weeks, SCRMC
- Kim Gearin, Minnesota Department of Health
- Kim Henningsgard, Polk County Family Preservation
- Konrad VanBaalen, Good Samaritan Society
- Laura Jensen, SCRMC
- Mary Boe, PCHD
- Melanie Mertes, PCHD
- Mike Rust, ABC for Rural Health
- Nina Hutton, CESA 11
- Pam Stratmoen, Central Insurance
- Pat Schmidt, Polk County Board of Health
- Patty Willeman, ARMC
- Phil Bock, Osceola Sun
- Rick Gates, Polk County Veteran’s Affairs
- Sally Bajak, SCRMC
- Rick Palmer, Luck School District
- Sandi Reed, ARMC
- Sandra Williams, SCRMC
- Sarah Shaw, SCRMC
- Sharon Ward, Mental Health Task Force
- Sue Jenson, OMC
- Sue Gerlach, Osceola Community Health Foundation
- T.A. Doughty-St.Hilaire, Ledger
- Therese Armour, PCHD
- Ward Moberg, OMC Board of Directors
- Wendy Young, SCRMC

A special thanks to ARMC, OMC, SCRMC and the Inter-County Leader for providing the photographs for this document.
The Polk County Health Department, in collaboration with Amery Regional Medical Center, Osceola Medical Center and St. Croix Regional Medical Center, began the process of conducting a new Community Health Needs Assessment in mid 2012. The ultimate goal of the assessment is to identify priority health issues and develop strategies to address the community’s health needs. This effort included a comprehensive review of health data, an analysis of real time body mass index data from local clinic patient electronic medical records and health and lifestyle data from community surveys. These surveys included:

- An ARMC sponsored assessment survey conducted over the phone (402 respondents).
- A county wide survey of the health of Polk County residents. This survey was available at all of the local medical centers and the health department, as well as advertised in the local newspapers and posted on all four of the partners organization’s websites (1,214 respondents).
- A consumer health survey funded by the Community Transformation Grant, which was mailed to Polk County Residents (154 respondents).

The comprehensive data review, in combination with the three surveys resulted in determining the top 10 health focus areas for Polk County. The top 10 health focus areas identified were:

- Alcohol Use
- Injury Prevention
- Mental Health
- Nutrition
- Obesity
- Oral Health
- Physical Activity
- Reproductive Health
- Tobacco Use
- Violence Prevention

Four community forums were sponsored in Balsam Lake, St. Croix Falls, Amery and Osceola. The community members in attendance offered input and suggestions on the health focus areas. In addition, a partner meeting was held in Dresser targeting key organizations as well as local health-related coalitions. At each of these venues, attendees had the opportunity to provide input on the 10 health focus areas as well as vote for their top five.

On March 8, 2013, a group of approximately 20 community partners participated in a process focusing on review and discussion of compiled data on the current health status of Polk County citizens, as well as voting results from the community forums and partner meeting. During the meeting, this group completed a paper survey to cast their votes to determine the top three health focus areas for Polk County.

The top health focus areas selected were:

1. Mental Health
2. Obesity
3. Alcohol Use

See Appendix A, on page 35, for a complete description of methods used.
Polk County is located in scenic northwestern Wisconsin, about 50 miles northeast of St. Paul, Minnesota. The total population of Polk County is 43,610. The county has 48 persons per square mile, a density which ranks 37th out of the 72 counties in the state. The ethnic make-up is 97.2% white. The county seat, Balsam Lake, is populated by 1,009 persons. According to the U.S. Census Bureau, the county has a total area of 956 square miles; of that, 917 square miles is land and 39 square miles or 4.08% is water.

- From 2000 to 2010, the overall population of Polk County grew 7% to 44,205, a rate of increase slightly higher than the 6% increase seen statewide. All of the growth was among adults 45 years and older. The percentage of adults 65 years and older is somewhat higher in Polk County (15%) than it is statewide (13%). Among children (0-17) and adults (18-44), the population declined 3% and 7%, respectively.

Assessment findings suggest that when compared to the overall state population, the population of Polk County is somewhat older, considerably less diverse and far more rural.

Polk County Population by Age and Gender, 2010

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Males</th>
<th>Females</th>
<th>Total</th>
<th>Percent Change from 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-17</td>
<td>5,399</td>
<td>5,101</td>
<td>10,500</td>
<td>-3%</td>
</tr>
<tr>
<td>18-44</td>
<td>6,675</td>
<td>6,468</td>
<td>13,143</td>
<td>-7%</td>
</tr>
<tr>
<td>45-64</td>
<td>6,865</td>
<td>6,633</td>
<td>13,498</td>
<td>35%</td>
</tr>
<tr>
<td>65+</td>
<td>3,238</td>
<td>3,826</td>
<td>7,064</td>
<td>13%</td>
</tr>
<tr>
<td>Total</td>
<td>22,177</td>
<td>22,028</td>
<td>44,205</td>
<td>7%</td>
</tr>
</tbody>
</table>

Source: Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services
• Given this pattern, it’s not surprising that almost all of the growth is due to migration into the county, as opposed to a natural increase from a rising birthrate. The overall population size is projected to increase steadily to almost 53,000 in 2020.

• Polk County is considerably more rural than the state of Wisconsin. In Polk County, 93% of the population resides in a rural area, compared to 32% of the overall state population.

• The population of Polk County is also considerably more white than the state (97% compared to 88%). Hispanic/Latino residents comprise the second largest racial/ethnic group in Polk County (1.6%), which is still considerably lower than the population of Hispanic/Latino residents statewide (6.1%).

• Less than one percent of the Polk County population lacks proficiency in English, compared to 3% of the state population.

**Race/Ethnicity in Polk County and Wisconsin, 2011**

<table>
<thead>
<tr>
<th>Racial/Ethnic Group</th>
<th>Polk %</th>
<th>WI %</th>
</tr>
</thead>
<tbody>
<tr>
<td>White, non-Hispanic/Latino</td>
<td>97.2</td>
<td>88.4</td>
</tr>
<tr>
<td>Black</td>
<td>0.3</td>
<td>6.5</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>1.1</td>
<td>1.1</td>
</tr>
<tr>
<td>Asian</td>
<td>0.4</td>
<td>2.4</td>
</tr>
<tr>
<td>Persons reporting two or more races</td>
<td>1.1</td>
<td>1.6</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>1.6</td>
<td>6.1</td>
</tr>
</tbody>
</table>

Source: US Department of Commerce, United States Census Bureau, State and County Quickfacts
FACTORS THAT INFLUENCE COMMUNITY HEALTH

People typically think first about the leading causes of death, illness or injury when considering the health of their communities. It is also important to carefully consider the factors that lead to poor health outcomes. This approach helps people think preventively to identify the greatest opportunities to improve health.

Most people believe that 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 are the dominant factors that shape health, but two other major influences play a very important role – the social and economic factors and the physical environment. This community health needs assessment examines all of these factors.

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 a whole population. The factors include health behaviors, clinical care, social and economic factors and the physical environment.11

In addition, the health focus areas targeted for analysis are some 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
SOCIAL AND ECONOMIC FACTORS

Social and economic factors consist of education, employment, income, family and social support and community safety. Forty percent of a person’s health is influenced by these factors. This assessment of key social and economic factors suggests that some important aspects of the broader environment are not as favorable in Polk County as in Wisconsin as a whole. In particular, added stress from low income status and unemployment may have negative health implications for Polk County residents.

Education

The relationship between educational attainment and improved health outcomes is well known. Better educated individuals live longer, healthier lives than those with less education and their children are more likely to thrive.

Polk County residents are far more likely to have a high school degree (40%) compared to the state (35%) and nation (30%). However, Polk County residents are far less likely to have a college degree. The percentage of adults age 25-44 with some college or associate’s degree in Polk County (58%) is lower than the percentage statewide (63%).

Employment and Income

Employment positively impacts health and is linked with slower declines in health status over time. Unemployment can lead to an increase in unhealthy behaviors 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 other basic goods.

- The 2011 median household income in Polk County ($46,900) trailed the median income of the state ($50,400) and nation ($50,500).
• Based on the preliminary unemployment rate for December, 2012, unemployment in Polk County is comparable to the rate nationwide (just under 8%), but somewhat higher than the rate for the state of Wisconsin (approximately 6%).

• In 2011, just over 1 in 10 Polk County residents lived below the poverty level. More children live under poverty than the overall population. Approximately 18% of Polk County children under 18 years of age live below the federal poverty line, compared to 18% statewide and a 13% national goal.

• The percentage of students in Polk County who receive free or reduced school lunch varies widely, from just over 30% in Osceola to approximately 60% in Frederic. The percentage of students eligible for free or reduced school lunch is higher than the state average (45%) in four of the county’s eight school districts.

Percent of Population Living Below Federal Poverty Level
Polk County, Wisconsin and US, 2011

<table>
<thead>
<tr>
<th></th>
<th>Polk</th>
<th>WI</th>
<th>US</th>
</tr>
</thead>
<tbody>
<tr>
<td>All ages</td>
<td>11.1</td>
<td>13.1</td>
<td>15.9</td>
</tr>
<tr>
<td>Under 18 years</td>
<td>16.3</td>
<td>18.4</td>
<td>22.5</td>
</tr>
</tbody>
</table>


On the Community Health Survey, when asked “What’s healthy/unhealthy about Polk County?”, respondents shared comments about health in Polk County that relate to these broad social and economic factors. Many cited income and employment as a limiting factor for health such as, “There are too few work opportunities” and “The lack of jobs is depressing”. The educational systems were seen as a more supportive factor in the county.

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.

• Just over 1 in 4 Polk County children live in a household led by a single parent (26%), compared to 39% statewide and a national goal of 20%.

• More than 1 in 4 Polk County residents older than 65 live alone in Polk County (27.5%), compared to 29.8% statewide.

• In Polk County, 16% of adults lack social/emotional support (i.e., report that they ‘never’, ‘rarely’ or ‘sometimes’ get the support they need). This compares favorably to Wisconsin (17%), but trails behind the national goal (14%).
Indicators of Low Social Support

Sources: Household data are from the US Census Bureau, American Community Survey (http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml). Adult lacking support from the WI Department of Health Services, Wisconsin Interactive Statistics on Health (WISH) data query system (data presented for combined years 2006-2010).

On the Community Health Survey, when asked “What’s healthy about Polk County?”, respondents shared comments about health in Polk County that relate to these broad social and economic factors. Survey respondents commented on the supportive social environment, noting that “Polk County is a nice place to raise a family” and “People are helping one another”.

Community Safety

The health impacts of community safety are far-reaching. They vary from the obvious impact of violence on the victim to the less obvious health impact of children not being able to play outdoors in their neighborhoods. Community safety impacts other health factors and outcomes as well, including birth weight, diet and exercise and family and social support.²⁵

- The rate of substantiated child abuse and neglect in Polk County is comparable to or somewhat worse than neighboring counties, though lower than the state overall.²⁶
- The number of domestic abuse injury reports in Polk County for calendar year 2011 totaled 122, an increase from the 107 reports during 2010.²⁷
- The rate of violent crime is lower in Polk County than in Wisconsin (230 offenses compared to 275 offenses per 100,000 population), though more than three times the national goal (73 per 100,000).²⁸
Violent Crime Rate per 100,000 Population
Polk County and Wisconsin, 2007-2009

Source: County Health Rankings/Uniform Crime Reporting Program. Violent Crime includes offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, forcible rape, robbery and aggravated assault.

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.

Alcohol and Drug Use

Consumption of too much alcohol is a risk factor for a number of adverse health outcomes. These include alcohol poisoning, high blood pressure, heart attack and interpersonal violence. Approximately 80,000 deaths are attributed annually to excessive drinking. It is the third leading lifestyle-related cause of death for people in the United States each year.

- An estimated 22 million people per year in the US have drug and alcohol problems which contribute to physical, mental and public health problems.
- Important indicators of high-risk alcohol use include binge drinking, heavy drinking and excessive drinking.
- Binge drinking is defined as consuming four or more alcoholic beverages for women and five or more alcoholic beverages for men on a single occasion in the past month. On the community health survey, approximately 30% of respondents (n=1,167)* reported binge drinking in the past month.
- Excessive drinking is defined as engaging in either binge or heavy drinking, with heavy drinking defined as having more than one (women) or two (men) drinks on a typical day. The prevalence of excessive drinking in Polk County (23%) and Wisconsin (24%) far exceeds the national goal of 8%.

* n is the size of the data sample

Several indicators related to alcohol use among adults and children are of particular concern in Polk County, including excessive drinking among adults, early initiation among young boys and alcohol-related motor vehicle crashes.
Approximately 24% of boys and 16% of girls in Polk County report having had their first drink of alcohol before age 13 (other than a few sips). This is higher than for boys statewide (21%). 32

Motor vehicle crashes are the leading cause of death in Polk County, with a rate more than twice that of the state. 33 Alcohol is far more likely to be a factor in those motor vehicle crashes in Polk County than in the state as a whole. Alcohol is involved in three times as many fatal car crashes than in the state overall. 34

There are dozens of arrests for drug possession in Polk County each year (e.g., 67 arrests in 2011 and 51 arrests in 2010). 35
On the Community Health Survey, when asked “What’s unhealthy about Polk County?”, a higher percentage of respondents (31%) cited concerns about alcohol and other drug use, than any other single category. Multiple comments focused on the number of late night hours of Polk County bars and taverns, “Bars and taverns are open too late”. Noted in the clinical care section, multiple community health survey respondents identified specific services that seem lacking in the area, including chemical dependency treatment.

### Physical Activity

Regular physical activity in adults and children can lower the risk of early death, heart disease, stroke, high blood pressure, Type 2 diabetes, breast and colon cancer, falls and depression. ³⁶

- Approximately 20% of Polk County adults aged 20 and up report having no leisure time physical activity. ³⁷
- Approximately one-quarter of respondents to Polk County’s community health survey reported leisure time physical activity on one or fewer days (25%, n=1,317). On the other hand, 35% reported leisure time physical activity on most (four or more) days.
Indicators for Physical Activity and Overweight


On the Community Health Survey, when asked “What’s healthy about Polk County?”, respondents overwhelmingly commented on the numerous year-round outdoor recreational opportunities available in Polk County (e.g., walking, hiking and biking trails, skiing and snowshoeing and swimming in area lakes).

**Obesity**

Obesity has a strong relationship to many negative health conditions and outcomes. Obesity is a contributing factor for skyrocketing health care costs. The increase in annual health care costs for every obese adult exceeds $1,400. Obese youth are also much more likely to become obese adults, putting them at risk of having lifelong health consequences. Obesity is closely interconnected with nutrition and physical activity.

Body Mass Index (BMI) is a number calculated from a person's weight and height. BMI is a fairly reliable indicator of body fat for most people. It is an inexpensive and easy-to-perform method of screening for weight categories.\(^\text{38}\)

- With an obesity rate of approximately 28%, Polk County and Wisconsin both exceed the national goal of 25%.\(^\text{39}\)
- When asked on the community health survey to describe their own weight, just over one-third of respondents described their weight as “healthy.” Nearly half of respondents reported they were “slightly overweight” and 14% said they were “very overweight.” (see pie chart on page 15)
- Medical centers in Polk County screen patients for height and weight. For this health assessment, area medical centers shared information from their medical records on height and weight to help understand the scope of overweight and obese residents in Polk County.
County. In the first six months of 2012, approximately 65% of patients were screened for height and weight. More than 40% of screened patients were obese and nearly 30 percent were overweight.  

**Percentage of Overweight and Obesity among Patients Screened at Polk County Medical Centers, January-June 2012**

![Percentage of Overweight and Obesity among Patients Screened at Polk County Medical Centers, January-June 2012](image)

**Self Assessed Weight Status of Polk County Adults, 2012**

![Self Assessed Weight Status of Polk County Adults, 2012](image)

Source: Polk County Medical Centers (n=10,844)  

Source: Polk County Community Health Survey, 2012.
On the Community Health Survey, when asked “What’s unhealthy about Polk County?” respondents commented on the unhealthy weight of the population. One respondent captured the sentiments of many in the remark, “People are too fat.”

**Tobacco Use**

Tobacco use remains the single most preventable cause of death and disease in the United States. Approximately 8,000 deaths are related to tobacco use in Wisconsin each year. Secondhand smoke causes heart disease, lung cancer, asthma attacks, respiratory infections and ear infections.

- The percentage of Polk County adults who are current smokers (17%) is lower than the percentage statewide (20%), but still exceeds the national goal (14%).
- In Polk County, the percentage of students who report smoking cigarettes in the past month is comparable to the percentage statewide (15% and 14.6%), but the percentage who reported using chewing tobacco, snuff or dip in last month is higher (10.2% compared to 8.3%).
- In 2012, approximately 20% of licensed tobacco retailers in Polk County sold tobacco to minors, compared to the statewide goal of 10%.
- A substantially higher percentage of women in Polk County report smoking during pregnancy (24%) than in Wisconsin (14%).

---

**Percent of Mothers who Report Smoking during Pregnancy**

Polk County and Wisconsin, 2007-2009

![Bar chart showing percent of mothers who report smoking during pregnancy](chart.png)
Centroid of Illegal Tobacco Sales to Minors
Polk County and Wisconsin, 2012

<table>
<thead>
<tr>
<th></th>
<th>Percent of Sales to Minors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Polk County</td>
<td>19.5%</td>
</tr>
<tr>
<td>Wisconsin State Goal</td>
<td>10.0%</td>
</tr>
</tbody>
</table>

Source: Wisconsin WINS

Reproductive and Sexual Health
Family planning services help improve health outcomes for infants, children, women and families. Sexually transmitted infections can lead to reproductive health problems, fetal health problems and long-term health problems.46

Teen mothers are less likely to graduate from high school and have lower lifetime earnings. Teen fathers are more likely to have lower educational attainment and lower income.47

- Chlamydia is the most frequently reported sexually transmitted infection in Polk County and Wisconsin. The rate of Chlamydia per 100,000 population in Polk County is a third the rate statewide (115 compared to 372 cases per 100,000).48
- The teen birth rate is lower in Polk County (26 per 1,000 females ages 15-19) than in the state as a whole (31 per 1,000), though county and state rates exceed the national goal (22 per 1,000).49
- More than 8 in 10 pregnant women in Polk County (84%) obtained prenatal care during the first trimester.50
- The percentages of Polk County boys and girls who report ever having sexual intercourse (32% and 38%, respectively) are lower than the percentages state and nationwide.51
- Among students who had sexual intercourse during the past three months, the percentage in Polk County who reported using a condom during their last sexual intercourse (23%) was dramatically lower than the percentage state and nationwide (26% and 40%).52
Percent of Students who have ever had Sexual Intercourse
Polk County and Wisconsin, 2011

Source: Youth Risk Behavioral Survey (YRBS)

Percentage of Sexually Active Students who used a Condom during last Sexual Intercourse
Polk County and Wisconsin, 2011

Source: Youth Risk Behavioral Survey (YRBS)

### Nutrition

A healthy diet reduces the risk of being overweight and obese, having heart disease, Type 2 diabetes and osteoporosis. Good nutrition is important for individuals to ensure a healthy weight and healthy growth and development.  

- More than a third of Polk County restaurants serve fast food (35%). The density of fast food outlets is more favorable in Polk County than in Wisconsin overall, but still considerably higher than the national goal. (See graph in Physical Environment section on page 26)
The community health survey compiled data from respondents on fruit and vegetable consumption. When asked to report on the typical number of fruits and vegetable servings (1/2 cup) consumed on a typical day, the most frequent response was two servings (32%). This is far short of the recommended five servings per day, which was reported by only 7% of respondents.

School lunch is a major source of calories and nutrition for school age children, particularly for low-income children. From just under a third to well over half of the students in Polk County Schools rely on free or reduced lunches.

Percentage of Students Receiving Free and Reduced Meals at School by District, 2011

<table>
<thead>
<tr>
<th>District</th>
<th>Free Meals</th>
<th>Reduced Meals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amery</td>
<td>43%</td>
<td>51%</td>
</tr>
<tr>
<td>Clayton</td>
<td>41%</td>
<td>62%</td>
</tr>
<tr>
<td>Clear Lake</td>
<td>49%</td>
<td>33%</td>
</tr>
<tr>
<td>Frederic</td>
<td>57%</td>
<td>46%</td>
</tr>
<tr>
<td>Luck</td>
<td>42%</td>
<td>57%</td>
</tr>
<tr>
<td>Osceola</td>
<td>33%</td>
<td>62%</td>
</tr>
<tr>
<td>St. Croix Falls</td>
<td>49%</td>
<td>46%</td>
</tr>
<tr>
<td>Unity</td>
<td>42%</td>
<td>57%</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>41%</td>
<td>62%</td>
</tr>
</tbody>
</table>

Source: WI Department of Public Instruction, 2011

Approximately one-third of the restaurants in Polk County are fast food restaurants, compared to 40% statewide, and a national goal of 25%.

In Polk County, one-third of WIC (Women, Infants and Children) newborns are breastfed exclusively for 3 months, compared to 20% of WIC newborns statewide. The comparable national goal is 45%.

On the Community Health Survey, when asked “What’s healthy about Polk County?”, respondents identified many assets within Polk County which promote good nutrition, including an abundance of locally grown and home grown foods, farmers markets, farm stands and organic options. Some also praised the schools for their progress on offering healthier lunches, “School lunches are improving but there’s a long way to go”. Food shelves and WIC services were also identified as positive resources.

On the Community Health Survey, when asked “What’s unhealthy about Polk County?”, respondents commented on food insecurity and cautioned that there are few nutritional offerings to low-income residents. Comments also suggested that fast food and convenience food are more widely available and more affordable than healthier options, “There aren’t enough community grocery stores where you can get fresh fruit and veggies at an affordable price” and “The cost of eating healthy is way higher than fast food/unhealthy food”. Multiple comments noted limited healthy options when eating at area restaurants.
Unintentional Injury

Injury is the leading cause of disability. It also is the leading cause of death among 1-44 year olds. Many think of injuries as “accidents” or “acts of fate” but most injuries are predictable and preventable. Data on intentional injury are included under Community Safety, starting on page 10.

- The leading causes of injury death in Polk County are motor vehicle crashes, suicide and falls. The rate of death due to each of these injuries in Polk County is substantially higher than the rates of death statewide. (For more on motor vehicle crashes, see the section on alcohol and drug abuse, starting on page 12.)
- The percentage of high school students reporting that they rarely or never wear a seat belt when riding in a car driven by someone else is lower in Polk County than in the state as a whole (7.5% compared to 10.3%). The national goal is 7.7%.
- Rate of emergency department visits for injuries sustained in boating or off-road motor vehicle accidents (ATVs and snowmobiles) is also higher in Polk County than in Wisconsin (more than 100 per 100,000 population, compared to 60 per 100,000 population).

![Rate of Emergency Department Visits for Injuries Sustained in Boating or Off-Road Motor Vehicle Accidents, 2008-2010](image)

Source: Wisconsin Department of Health Services. WISH

- The rate of injury related deaths among the elderly in Polk County is 20% higher than that statewide (20 vs. 16 per 100,000).
- Falls are the leading cause of emergency room visits and hospitalizations by a very substantial margin for both the county and the state. The rate of hospitalization for falls is more than six times higher than the second leading cause, self-harm.
- Approximately 1 in 10 community health survey respondents reported that a member of their household had fallen at least once in the previous month.
Clinical care includes services for medical, dental and mental health care. Important aspects of access include the availability of insurance coverage for preventive services and having a designated provider for routine services.

Access to Care
Access to health care impacts overall physical, social and mental health status; prevention of disease and disability; detection and early treatment of health conditions; quality of life; and preventable death and life expectancy. Access to health care services helps to ensure the health and economic security of Wisconsin families. Approximately 11% of the Polk County population younger than 65 years old has no insurance coverage, a figure equal to the percentage statewide.

Approximately 88% of the community survey respondents reported that everyone in their household is covered by insurance. More than 1 in 10 respondents to the survey reported that cost prevented them from taking prescribed medicine in the past 12 months (n= 1,162, 11%) or prevented them from getting needed medical care (n= 1,187, 14%). On a follow-up question, expense was the dominant explanation for what prevented respondents from seeking care, “My deductible is too high”. Many respondents also pointed to pain or discomfort as a barrier to care, “I have severe back and leg pain and couldn’t get in the car”.

### Injury Hospitalizations (Five Leading Causes) Rates per 100,000 Population

Polk County and Wisconsin, 2007-2009

<table>
<thead>
<tr>
<th>Category</th>
<th>Polk</th>
<th>Wisconsin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nontraff Trans</td>
<td>17</td>
<td>27</td>
</tr>
<tr>
<td>MVC</td>
<td>42</td>
<td>78</td>
</tr>
<tr>
<td>Poisoning</td>
<td>48</td>
<td>47</td>
</tr>
<tr>
<td>Self-harm</td>
<td>58</td>
<td>98</td>
</tr>
<tr>
<td>Falls</td>
<td>389</td>
<td>441</td>
</tr>
</tbody>
</table>

Source: WI Department of Health Services, *Burden of Injury in Wisconsin*, 2011
The County Health Rankings report for Polk County used Medicare data to estimate the hospitalization rate for types of conditions where timely and effective ambulatory care can reduce the likelihood of hospitalization. In Polk County, the rate of preventable hospitalizations per 1,000 Medicare enrollees was higher (74 hospitalizations/1,000 enrollees), than the comparable rate statewide (59 hospitalizations per 1,000 enrollees). For the overall population in 2010, the Wisconsin Division of Health Services reports that there were 697 preventable hospitalizations in Polk County, with two-thirds of those hospitalizations (69%) occurring among persons 65 years and older.  

On the Community Health Survey, when asked “What’s healthy/unhealthy about Polk County?”, respondents complimented the quality of medical care available in the county. Some respondents commented that the health care in Polk County is affordable and generally available regardless of ability to pay, “Access to care for all, regardless of ability to pay”. Others provided a different view, emphasizing instead concerns about affordability and access for medical care, as well as dental, mental health and chemical dependency services “Health care excellent if you can afford it.”

**Dental Health Services and Oral Health**

Good oral health can prevent tooth decay, tooth loss and pain.  

- The percentage of the population with access to water fluoridated at recommended levels is dramatically lower in Polk County than in the state as a whole (26% vs. 64%).
The population-to-dentist ratio in Polk County is about 20% higher than the state as a whole, suggesting that dentists are “not as available” locally as they are in other areas of the state.\textsuperscript{71}

Compared to Wisconsin as a whole, for the six year period 2003-09, a substantially higher percentage of Polk County residents reported that they did not have a dental visit in the past year (29% vs. 26%).\textsuperscript{72}

Approximately 1 in 5 third grade children in the western region of the state have untreated tooth decay (21%), and more than half of third graders have one or more dental cavities (54%). These figures are comparable percentages statewide.\textsuperscript{73}

Cost appears to be a significant barrier to care for many. Approximately 3 in 4 respondents to the community health survey reported that they had been to the dentist in the past year. Almost all of the 25% who had not been to the dentist provided an explanation. The leading explanation was that they didn’t have any dental problems. More than half of those who hadn’t been to the dentist (51%) pointed to cost as the reason why, “Cannot afford to go”, “Insurance doesn’t cover it” and “Finding a dentist that accepts BadgerCare”.\textsuperscript{74}

Some indicators suggest that oral health of low-income populations in Polk County may be better than oral health of low-income population statewide.

A higher percentage of Medicaid recipients in Polk County are using Medicaid to receive dental service than that statewide (30% vs. 23%).\textsuperscript{75}

When compared to the state as a whole, a markedly lower percentage of children in western Wisconsin who enrolled in Head Start have untreated decay (26% vs. 21%) or dental cavities (36% vs. 25%).\textsuperscript{76}
Mental Health Services and Mental Health

Just as physical health is important, so is good mental health. Mental health issues present themselves in a variety of different forms and in different degrees of severity.

Nationwide, 13 million adults have seriously debilitating mental illness each year. Suicide is the 11\textsuperscript{th} leading cause of death.

- Self-harm is the second leading cause of hospitalization in Polk County, though the county rate trails the state rate (58 vs. 98 per 100,000 population).\textsuperscript{77}
- The suicide rate in Polk County is nearly double that of the state (23 vs. 13 per 100,000).\textsuperscript{78}

\begin{figure}
\centering
\includegraphics[width=\textwidth]{Suicide_Annual_Rate_Polk_Wisconsin_2007-2009.png}
\caption{Suicide Annual Rate per 100,000 Population, 2007-2009.}
\end{figure}


- The actual number of suicides increased in a stair step pattern in 2009 (4), 2010 (7) and 2011 (11), before falling back in 2012 (7).\textsuperscript{79}
- Approximately 15\% of Polk County youth have reported that they seriously considered suicide in the past year. This is higher than the rate reported by youth statewide (13\%).\textsuperscript{80}
- In the three year period 2007-2009, 17 children were hospitalized in Polk County for self-harm.\textsuperscript{81}
- On the Community Health Survey, 16% of respondents indicated that they had been told they have depression or a mental health disorder and 18% indicated that they had felt sad or depressed on three or more days in the past two weeks. More than half (56%) said they had not felt sad or depressed on any days in the preceding two weeks.

- The 4% of respondents to the Community Health Survey who reported that they had considered suicide in the past year were asked what they are doing about it. Just over 1 in 5 (22%) reported that they are doing “nothing.” Similar percentages indicated that they are taking medication (20%), increasing healthy behaviors (20%), or talking to a counselor, trusted friend or health care provider (22%).

- The ratio of the population to mental health providers in Polk County is markedly higher than the state (15:1, compared to 8:1), suggesting that mental health providers are relatively scarce in Polk County, compared to the state as a whole. 82

On the Community Health Survey, when asked “What’s unhealthy about Polk County?”, approximately 8% of respondents mentioned mental health. Almost all of those comments related to suicide. Similarly, among those who identified a concern with health care access in Polk County (11%), just under one third identified a lack of mental health services as a problem. Comments also linked poor mental health issues to poverty/low income, unemployment or the stress of caregiving.
The built environment includes human-made resources and infrastructure such as buildings, roads, parks, restaurants and grocery stores. Healthy food choices and leisure time physical activity are more likely in environments that make these behaviors easy, safe and appealing.

- Approximately 1% of people living in poverty in Polk County live far from a grocery store (10 miles in rural areas or one mile in urban areas). This compares favorably to the state of Wisconsin (6%)\(^8^3\).
- The density of fast food outlets is more favorable in Polk County than in Wisconsin overall, but still considerably higher than the national goal.\(^8^4\)
- There is no evidence of elevated blood lead level among Polk County children screened.\(^8^5\)
- In the most recent year available (2007), there are no unhealthy air quality days due to fine particulate matter.\(^8^6\)
- Polk County community water systems do not exceed maximum levels of arsenic or nitrates.\(^8^7\)

### Proportion of Total Restaurants that Serve Fast Food, 2009

<table>
<thead>
<tr>
<th></th>
<th>Polk County</th>
<th>Wisconsin</th>
<th>National benchmark</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>35%</td>
<td>41%</td>
<td>25%</td>
</tr>
</tbody>
</table>

Source: County Health Rankings/US Census

On the Community Health Survey, when asked “What’s healthy/unhealthy about Polk County?”, the physical environment emerged as the dominant theme in the open-ended comments. Respondents overwhelmingly emphasized the quality of the air and water, beautiful views and surroundings and open spaces. Relatively few expressed concerns about the physical
environment. The concerns that were identified centered around littering, pollution and the need for more recycling, as well as fracking and concerns about water quality of lakes and rivers.

Respondents to the Community Health Survey overwhelmingly commented on the numerous year-round outdoor recreational opportunities available in Polk County (e.g., walking, hiking and biking trails, skiing and snowshoeing and swimming in area lakes), as well as availability of fresh foods from area farmers’ markets. Some also noted a lack of grocery stores with fresh foods in some rural areas of the county and some desired more healthy options in county restaurants.

HEALTH OUTCOMES

Length of life (mortality) and quality of life (morbidity) are crucial considerations for the health of a community.

Length of Life

The County Health Rankings estimates the burden of premature deaths. Premature deaths are deaths that occur before a person reaches life expectancy (75 years). Deaths before age 75 are often considered to be preventable. Every death occurring before the age of 75 contributes to the total number of years of potential life lost. For example, a person dying at age 25 contributes 50 years of life lost, whereas a person who dies at age 65 contributes 10 years of life lost. All of these “lost” years are added together to estimate the extent of premature death in a community.

In general, Polk County has a somewhat higher rate of premature death than the state as a whole. In 2012, Polk County ranked in the bottom half of Wisconsin counties (42nd). This means that residents of Polk County are more likely to die before the age 75, than their counterparts around the state. Each year, premature deaths of Polk County residents result in an estimated 6,500 “lost” years. 88

The rate of infant death in Polk County (5.2 deaths in the first year per 1,000 live births) is below the rate in Wisconsin (5.7 per 1,000) and the state target (6.0 per 1,000). 89

Quality of Life

Quality of life is the term that refers to how healthy people are during their lifetime.

- Several indicators are often combined to gauge the extent of healthy growth and development within a community. These indicators relate to breastfeeding, low birth-weight birth, teen birth rate, prenatal care, youth overweight, smoking during pregnancy and youth smoking. The data in Polk County for most of these indicators are at or below
the state average. However, the rate of smoking during pregnancy is far higher in Polk County (24%) than in the state as a whole (14%).

- The percentage of low birth-weight infants in Polk County (5.9%) is below the state of Wisconsin (6.9%) and slightly below the national goal (6.0%).

- Approximately 11% of Polk County adults rate their own health status as fair or poor, marginally lower than the percentage statewide (12%), but higher than the national goal (10%).

- Rates of hospitalization for heart disease and stroke are lower in Polk County than in Wisconsin, as is the age adjusted cancer incidence rate. The percentage of adults in Polk County with diagnosed diabetes (8%) is on par with the percentage statewide.

- The rate of some communicable disease is higher in Polk County than in Wisconsin. Examples include Streptococcus pneumonia and tick-borne illnesses such as Lyme disease Ehrlichiosis/Anaplasmosis. Two year old children are lagging on benchmark immunizations in Polk County with only 64.6% up-to-date on their second birthday compared to 80% statewide.

- Oral Health (See Dental Services and Oral Health on page 22)

- Injury (See Unintentional Injury on page 20)
HEALTH DISPARITY AND HEALTH EQUITY

The phrase health disparity refers to the differences in health status between groups. Public health research consistently points to significant health disparities in most communities, often by racial/ethnic group, income and health insurance status.

The University of Wisconsin Population Health Institute has created a report card to depict the health status for the overall state population and for four life stages (infants; children and young adults ages 1-24; working age adults ages 25-64; and adults 65 and older). The 2010 report scores for all four stages were either “B” or “C.” This alone might motivate communities to strive toward “A” grades.

<table>
<thead>
<tr>
<th>Life stage</th>
<th>Health grade</th>
<th>Health disparity grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants (less than 1 year of age)</td>
<td>C</td>
<td>C</td>
</tr>
<tr>
<td>Children and young adults (age 1-24)</td>
<td>B</td>
<td>D</td>
</tr>
<tr>
<td>Working-age adults (ages 25-64)</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>Older adults (ages 65+)</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>All ages</td>
<td>B-</td>
<td>C-</td>
</tr>
</tbody>
</table>

Source: Health of Wisconsin Report Card 2010

A closer look at the health data for sub populations (by gender, education, geography and race/ethnicity) will likely motivate even more concerted action because the report card points to dramatically different health experience across subgroups.

- When looking at the health of children and young adults, the score for Native Americans drops from B to F, while the score for white non-Hispanic, Hispanic/Latino and Asian children climbs to an A.
- The scores for rural children and young adults fall to a D, whereas the scores for their non-urban and suburban peers hold steady at a B.
- The data for older adults show a similar pattern. The health score for seniors with some post-secondary education is markedly higher (A) than that of those with a high school education or less (F).

Because of its relatively homogenous population and the expense often involved in data collection, there is a limited amount of population health information currently available within Polk County to compile by racial/ethnic group, or for subpopulations that are uninsured and/or low income. Available information related to health disparities is summarized below.

Some indicators suggest that oral health of low income populations in Polk County is better than low income population statewide.

- A higher percentage of Medicaid recipients in Polk County are using Medicaid to receive dental service than are Medicaid recipients statewide (30% vs. 23%).
- When compared to the state as a whole, a markedly lower percentage of children in western Wisconsin who enrolled in Head Start have untreated decay (26% vs. 21%) or dental caries (36% vs. 25%).
In Polk County, one-third of WIC newborns are breastfed exclusively for three months, compared to 20% of WIC newborns statewide. The comparable national goal is 45%.\textsuperscript{101}

These indicators suggest that income-related health disparities in oral health and breastfeeding are not as apparent in Polk County as in Wisconsin overall. Nonetheless, it is highly likely that underlying health disparities are prevalent, though currently not measured, within the county.

Disparities noted elsewhere in the report relating to age, gender and geography include:

- Seniors in Polk County are far more likely to experience preventable hospitalization than younger residents.
- High schools boys are substantially more likely than high school girls to report early initiation of alcohol use and use of chewing tobacco, snuff or dip.
- Among residents in Polk County that rely on a public water supply for residential use (36% of all residents), 71% have access to optimally fluoridated water. Controversy, in the spring of 2013, over community water fluoridation may result in reduced access to fluoridated water as some Polk County municipalities vote to discontinue this process.

**Health Disparities and Weight Status: A Pilot Test**

In a concerted effort to compile new data on racial/ethnic disparities for this assessment, the Polk County Health Department coordinated with an area medical center to review data available through electronic medical records to compare weight status by racial group. Data reported here was collected through height and weight screening during routine patient visits at one of three medical centers in the county, during the six month period from January 1 to June 30, 2012. BMI was calculated in the electronic medical record and then categorized as underweight, normal, overweight or obese using standard Centers for Disease Control (CDC) definitions.

Nearly 7,000 adult patients were screened during this six month period. BMI (78%) and racial (>99%) data were available for most patients. Most patients were white (98%). The most frequent racial group reported among those patients of color was American Indian (0.8%). BMI was available for similar percentages of patients who were white or populations of color (77.6% and 78.6%, respectively).

<table>
<thead>
<tr>
<th>Racial Group</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian or Alaska Native</td>
<td>57</td>
<td>0.82%</td>
</tr>
<tr>
<td>Asian</td>
<td>16</td>
<td>0.23%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>18</td>
<td>0.26%</td>
</tr>
<tr>
<td>Multiracial</td>
<td>28</td>
<td>0.40%</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
<td>7</td>
<td>0.10%</td>
</tr>
<tr>
<td>White</td>
<td>6848</td>
<td>97.93%</td>
</tr>
<tr>
<td>Unavailable</td>
<td>19</td>
<td>0.27%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>6993</td>
<td>100%</td>
</tr>
</tbody>
</table>
In this preliminary analysis, the overall pattern of BMI is similar among white patients and patients of color. The prevalence of being overweight was also comparable across the groups. However, when compared to white patients, patients from a racial minority group were more likely to be obese and less likely to be normal weight.

To achieve health equity and improve the health status of the whole population, it will be important for Polk County to address these disparities and pursue new opportunities like this to better understand health disparities in Polk County.

Comparison of Weight Status and Race, Adult Patients Visiting a Polk County Medical Center January-June, 2012

<table>
<thead>
<tr>
<th>Weight Status</th>
<th>Populations of Color</th>
<th>White</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal</td>
<td>19%</td>
<td>24%</td>
</tr>
<tr>
<td>Obese</td>
<td>47%</td>
<td>44%</td>
</tr>
<tr>
<td>Overweight</td>
<td>31%</td>
<td>31%</td>
</tr>
<tr>
<td>Underweight</td>
<td>2%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Source: Electronic Medical Record, a Polk County Medical Center, Jan-June, 2012

PRIORITY FOCUS AREAS FOR IMPROVEMENT

Partners convened four community forums around the county and two partner meetings to review assessment findings and participate in a voting process. The following five priority problems were identified consistently across all of the forums: mental health, obesity, alcohol, nutrition and physical activity. At the March 8, 2013 partner meeting, the consensus was to select three health focus areas to concentrate on in the new Community Health Improvement Plan (CHIP). The three priority focus areas are:

1. Mental Health
2. Obesity
3. Alcohol Use

It is notable that the top three health issues identified were also selected as top health issues in the 2009 CHNA but ordered differently in the voting process. Community members and key stakeholders continue to affirm that there is still work to be done in improving mental health and
preventing obesity. A key change in this CHNA process is the determination, from process participants, that there is community readiness to address Polk’s alcohol issues. These three health issues will be critically examined in the CHIP process which began in spring 2013 and will result in the creation of a new CHIP for Polk County.

Polk County lags substantially behind Wisconsin or national goals in several important areas that were not chosen as a high priority health focus area at this time. These areas primarily include oral health, injury, reproductive health and communicable disease.

- A higher percentage of Polk County residents report that they have not had a dental visit in the past year.\(^{102}\)
- Falls are the leading cause of emergency room visits and hospitalizations by a very substantial margin for both the county and the state. The rate of hospitalization for falls in Polk County is more than 6 times higher than the second leading cause and the rate of injury deaths among the elderly in Polk County is 20% higher than the death rate due to injury among the elderly statewide.\(^{103}\)
- The rate of emergency department visits for injuries sustained in boating or off-road motor vehicle accidents (ATVs and snowmobiles) is higher in Polk County than in Wisconsin.\(^{104}\)
- The percentage of sexually active high school students in Polk County who report using a condom during last sexual intercourse is dramatically lower than the percentage statewide.\(^{105}\)

These health issues still require public health attention, but were not selected as priority health focus areas in this CHNA process.

**NEXT STEPS**

The assessment findings point to numerous improvement opportunities and strategies, including community-based education (e.g., encouraging good role models for eating and activity) to more widespread availability of services and healthy options (e.g., more accessible chemical dependency and mental health services and more community grocery stores to increase year round access to fruits and vegetables). Improvement opportunities also extend to policy, systems and environmental changes, including continued improvements in school lunches and reduced access to tobacco at retail outlets. Polk County has already enjoyed some success in these areas (e.g., smoke-free restaurants) and has many assets on which to draw (e.g., numerous parks, lakes and trails provide nearby options for outdoor recreation).
This assessment is part of a larger ongoing process of assessment and improvement. The collaborative group engages community members and works collectively with partners to improve the health of the community through assessment, prioritization, effective planning, collaborative implementation and evaluation.

This assessment also uncovered several health indicators that are more favorable in Polk County than in the state as a whole or that characterize what is particularly “healthy” about Polk County.

- The rate of violent crime is lower in Polk County than in Wisconsin, though more than twice the national goal.\(^{106}\)
- Compared to their counterparts statewide, mothers enrolled in WIC in Polk County are more likely to breastfeed newborns exclusively for three months.
- The rate of teen birth and the percentage of high school students who report ever having sexual intercourse is lower in Polk County than in the state, although Polk County exceeds the national goal on both of these indicators.\(^{107,108}\)
- When asked to identify what is especially healthy about Polk County, the natural environment emerged as the dominant theme. Respondents overwhelmingly emphasized the quality of the air and water, beautiful views and surroundings and open spaces.

COMMUNITY ASSETS FOR HEALTH

Despite the size and rural nature of Polk County, there are considerable resources available to utilize for health improvement. In the community health survey, some respondents noted county assets that support health, particularly schools and businesses, community programs and events, lack of traffic and the slower pace and lifestyle of a rural setting. Listed below are resources identified for the top three health priority areas.

Resources to Address Mental Health

- **Amery Regional Medical Center Behavioral Health** (715) 268-0060
- **Aurora Community Counseling** (715) 235-1839
- **Family Based Therapy Associates** (Chisago City, MN) (651) 257-2733
- **Midwest Psychological Services** (715) 381-1980
- **Northwest Counseling & Guidance Clinic** (715) 327-4402
- **Northwest Passage, Ltd** (715) 327-4402
- **Osceola Medical Center** (715) 294-2111
- **Peace Tree Counseling** (715) 755-2233
- **Polk County Mental Health & Chemical Dependency** (715) 485-8400
- **St. Croix Regional Medical Center Counseling and Psychological Services** (715) 483-0243
- Visit [www.mentalhealthpolk.org](http://www.mentalhealthpolk.org) for additional resources for mental health in Polk County
Resources to Address Obesity

- Amery Regional Medical Center (715) 268-8000
- Osceola Medical Center (715) 294-2111
- St Croix Regional Medical Center (715) 483-3221
- Visit [www.healthypolkcounty.com](http://www.healthypolkcounty.com) for additional resources for physical activity and nutrition in Polk County

Resources to Address Alcohol Use

- Aurora Community Counseling (715) 235-1839
- Northwest Counseling & Guidance Clinic (715) 327-4402
- Northwest Passage, Ltd (715) 327-4402
- Peace Tree Counseling (715) 755-2233
- Polk County Mental Health & Chemical Dependency (715) 485-8400
- St. Croix Regional Medical Center Counseling and Psychological Services (715) 483-0243
APPENDIX A

Community Health Needs Assessment Process

Comprehensive Review of Health Data
This assessment is largely based on the Recommended Core Data Set for Community Health Improvement version 1.0; 9/2012 (Final version due spring 2014). This data set draws heavily on information compiled for the annual county health rankings report through on-going data collection systems (e.g., Behavioral Risk Factor Surveillance System, Youth Risk Behavior Survey, US Census, American Community Survey, Uniform Crime Reporting Program and the National Vital Records System). Other state-specific sources of data used in this assessment include the Make Your Smile Count Survey, Public Water Fluoridation Census, Wisconsin Inpatient Hospitalization Discharge file and Wisconsin Hospital Emergency Department data system. Additional county-level data was provided by CESA 11, area medical centers, the Polk County Sheriff’s Department and the Polk County Health Department.

Key online data sources include:

WI Department of Health Services, 2010 Profile for Polk County

WI Department of Health Services, Wisconsin Interactive Statistics on Health (WISH) data query system http://www.dhs.wisconsin.gov/wish/

University of Wisconsin Population Health Institute, County Health Rankings for Polk County http://www.countyhealthrankings.org

US Department of Commerce, U.S. Census Bureau, American Fact Finder http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml


This assessment drew heavily from resources available through the CHIPP Infrastructure Improvement Project. This project provided numerous tools for local health departments to “test” in the CHNA process. Specific tools used during the CHNA process included a model core data set, a guide to primary data collection, a community engagement guidance tool and a guide to stakeholder engagement.

Limitations
Although this assessment reflects the most recent and best available health information for Polk County, there are important limitations to note.

- There can be a long lag time between data reporting and availability (i.e., the timeliness of data).
- Small numbers can make comparisons difficult.
• Health information is generally not available for jurisdictions smaller than counties (e.g., individual communities within Polk County).
• There is inadequate data for some topic areas.
• There are jurisdictional challenges within data collection systems (e.g., reporting issues across county and state lines).

Analysis of BMI Data Collected
Data reported in this assessment was collected through height and weight screening, recorded in electronic medical records, during routine patient visits at two of the three area medical centers. The data reported was collected during a six month period from January 1 to June 30, 2012. Screening rates varied by medical center. Overall, approximately 65% of all patients were screened for height or weight across both medical centers during this period.

For adults, Body Mass Index (BMI) is calculated from a person's weight and height. BMI is a fairly reliable indicator of body fat for most people. BMI does not measure body fat directly, but research has shown that BMI correlates to direct measures of body fat. BMI is an inexpensive and easy-to-perform method of screening for weight categories that may lead to health problems.

A high percentage of adults screened at the Polk County clinics are overweight or obese. Over time, as more and more people are screened for height and weight in Polk County, partners will be well positioned to estimate the magnitude of the problem and monitor trends.

The rates of being overweight and obese in this patient sample are higher than rates reported for Polk County through other methods (e.g., telephone based Behavioral Risk Factor Surveillance System). Potential explanations include:
• People who are overweight and obese are more likely to need health care, so the patient sample is more overweight and obese than the general population.
• People in the general population may under-report their weight, so the general population is even more overweight or obese than generally believed.

Community Surveys of Polk County Residents
In 2012, the medical centers and the Polk County Health Department came together to conduct three health surveys in Polk County.

• A community health assessment survey was conducted by the Amery Regional Medical Center. This telephone-based survey reached 402 respondents.
• A county-wide community health survey was made available at all three medical centers and the health department. An electronic link to the survey was also advertised in area newspapers and on the websites of all four organizations that collaborated on the assessment. This survey generated 1,214 responses.
• A consumer health survey funded by a Community Transformation Grant to Polk County was mailed to all Polk County residents and generated 154 responses.

Altogether, these three surveys reached 1,771 Polk County residents. Given the adult population of Polk County (33,705), these surveys engaged approximately 3.6% of adult residents.
Compared to the overall adult county population, survey respondents were somewhat older, more educated and more likely to be female.

Two of the surveys included open-ended questions (What is healthy about Polk County? and What is unhealthy about Polk County?). More than half of the total number of respondents across both surveys (58%) provided substantive, open-ended responses on one or both questions.

A sample of the comments was randomly selected for more intensive review (197 comments, which represents 25% of the 787 respondents to these questions). Each response was coded, depending on whether words or phrases related to each of the 10 health priorities that had emerged in the comprehensive review of existing health data (obesity, nutrition, physical activity, injury, access to health care, sexual health, mental health, tobacco, alcohol and other drugs, and violence). Two additional categories were added to capture other key ideas that emerged in the open-ended comments (physical environment and other).

Many of the responses were limited to a single word or short phrase. Others were very descriptive and identified multiple issues. The comments of many respondents spanned multiple categories (up to five categories per respondent). Many respondents also had multiple comments within each category.

Community Forums and Meetings
Efforts were made to share the results of the data compilation with the community. Four community forums were sponsored in Balsam Lake, St. Croix Falls, Amery and Osceola. Citizens present offered their input and suggestions on various health focus areas. In addition, two partner meetings were held in Dresser and Balsam Lake targeting top leadership of key stakeholder organizations as well as representatives of local health-related coalitions. At each of these venues, attendees had the opportunity to provide input on the health focus areas as well as vote on their selections of the top five issues.

Participants were asked to consider the questions below when voting for the top three focus areas at the March 8, 2012 Partner meeting.

1. Size and Prevalence of the Issue
   • How many people does this affect?
   • How does the prevalence of this issue in Polk County compare with its prevalence in other counties, the Western Region and the State of Wisconsin?
   • How serious are the consequences?

2. Effectiveness of Interventions
   • How likely is it that action taken will make a difference?
   • How likely is it that action will improve quality of life?
   • How likely is it that progress can be made in both the short term and the long term?
   • How likely is it that the community will experience reduction of long-term cost?

3. Community Capacity
   • Are people likely to support actions around this issue?
   • Will it be necessary to change behaviors and attitudes in relation to this issue?
   • Are the necessary resources and leadership available to us now?
RESOURCES

1 For more information: http://www.walhdab.org/CHIPPInfrastructure.htm
2 2010 U.S. Census
3 US Department of Commerce, United States Census Bureau
5 WI Department of Administration, Intergovernmental Relations, Demographics Services Center
6 WI Department of Administration, Intergovernmental Relations, Demographics Services Center
7 US Department of Commerce, United States Census Bureau (County Health Rankings)
8 US Department of Commerce, United States Census Bureau
9 US Department of Commerce, United States Census Bureau
10 US Department of Commerce, United States Census Bureau (County Health Rankings)
11 University of Wisconsin Population Health Institute. County Health Rankings http://www.countyhealthrankings.org
12 http://www.countyhealthrankings.org
13 http://www.countyhealthrankings.org
14 US Department of Commerce, United States Census Bureau
15 American Community Survey (ACS)
16 http://www.countyhealthrankings.org
18 WI Department of Workforce Development
20 WI Department of Public Instruction, October 2011
21 http://www.countyhealthrankings.org
22 US Department of Commerce, United States Census Bureau, American Community Survey (County Health Rankings) for the period 2006-2010
24 WI Department of Health Services, Wisconsin Interactive Statistics on Health (WISH) data query system (data presented for combined years 2006-2010).
25 http://www.countyhealthrankings.org
27 Wisconsin Department of Justice, Office of Crime Victim Services
29 http://www.countyhealthrankings.org
30 Healthy People 2020 and Healthiest Wisconsin 2020
31 County Health Rankings/Behavioral Risk Factor Surveillance System
32 WI Department of Public Instruction, Youth Risk Behavior Survey, 2011
33 WI Department of Health Services, Burden of Injury in Wisconsin
34 WI Department of Transportation
35 WI Office of Justice Assistance
36 Healthy People 2020
37 County Health Rankings/Behavioral Risk Factor Surveillance System, 2009
39 County Health Rankings/Behavioral Risk Factor Surveillance System, 2009
40 Polk County Medical Centers, January –June, 2012. For more information, see Appendix A.
41 Healthy People 2020 and Healthiest Wisconsin 2020
42 County Health Rankings, Behavioral Risk Factor Surveillance System
43 WI Department of Public Instruction, Youth Risk Behavior Survey
44 Wisconsin WINS, 2012
45 County Health Rankings/WI Department of Health Services WISH (2007-2009)
46 Healthy People 2020
47 Healthy People 2020
48 WI Department of Health Services
101 WI Department of Health Services, 2012
102 County Health Rankings/WI Department of Health Services/Family Health Survey
103 WI Department of Health Services, Burden of Injury in Wisconsin
104 WI Department of Health Services, Burden of Injury in Wisconsin
105 WI Department of Public Instruction, Youth Risk Behavior Survey, 2011
106 County Health Rankings/Uniform Crime Reporting Program
107 WI Department of Public Instruction, Youth Risk Behavior Survey, 2011
108 County Health Rankings/National Vital Statistics System
109 http://www.walhdab.org/NewCHIPPResources.htm