

2023

Community Health Assessment



Prepared by:



Crawford County
Community Health

Home Health, Hospice, & Public Health



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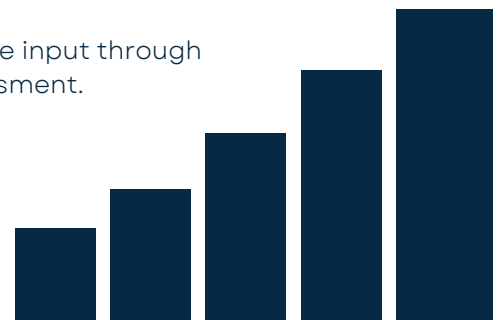
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Acknowledgements

Thank you to our partners who contributed their time and expertise to assist with the assessment process.

Thank you to everyone who completed the survey and helped provide input through our focus groups. Your responses and input helped shape this assessment.



About CCCH

Crawford County Community Health provides home health, hospice, and public health services for the citizens of Crawford County and surrounding area. Located in the county seat of Denison, CCCH began providing public health services in 1951. The agency has been Medicare certified since 1974 and Hospice certified since 1999.

CCCH provides a wide range of services for people across the lifespan and partners with area providers to ensure that all individuals have the opportunity to experience a healthy life. The agency employs a team of dedicated individuals who work together to provide compassionate, quality care.





Vision, Mission, And Values

Vision

Ensure an optimal level of health for all individuals

Mission

Remove barriers that result in inequities and promote policies, systems, and conditions that enable optimal health for everyone

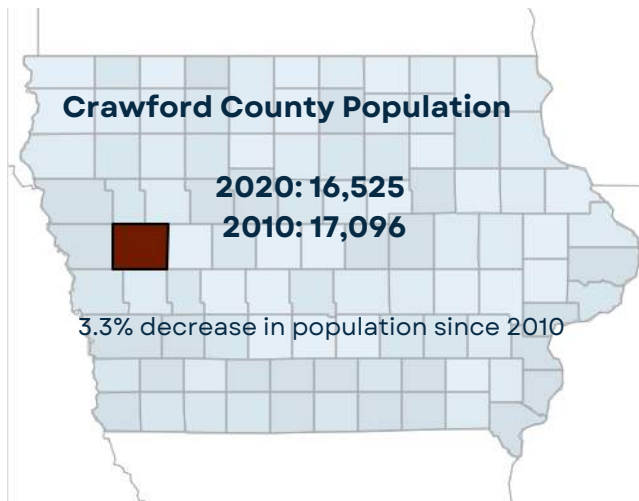
Values

We serve with CARE: **C**ompassion, **A**ccountability, **R**espect, **E**xcellence

Executive Summary

Every five years, the Iowa Department of Health and Human Services (HHS) requires local public health agencies to complete a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). The CHA identifies the most important factors that shape health for all who live, learn, work, and play in our communities based on data points and what we heard from people in Crawford County. These help guide the development of the CHIP.

Population Information



Age

Every age group has health and social needs that are unique to them.

Race & Ethnicity

It is important to break down data by race and ethnicity to identify disparities.

Languages

While most people in Iowa use English as their primary language, those with English as a second language face barriers to getting interpreting and translating services.

	Non-Hispanic					
	White	Black	Native American/ Alaskan	Asian	Hawaiian/ Pacific Islander	Multiple
Crawford	90.7%	3.6%	1.5%	2.8%	0.4%	1.0%
Iowa	90.1%	4.3%	0.6%	2.8%	0.2%	2.1%
US	75.8%	13.6%	1.3%	6.1%	0.3%	2.9%

Hispanic or Latino	
Crawford	30.4%
Iowa	6.7%
US	18.9%

	Under 5 yrs	Under 18 yrs	65 yrs and older
Crawford	6.4%	25.0%	18.0%
Iowa	5.9%	23.1%	17.7%
US	5.7%	22.2%	16.8%

Persons with a disability under age 65	
Crawford	10.2%
Iowa	8.1%
US	8.7%

Persons without insurance	
Crawford	10.8%
Iowa	5.8%
US	9.8%

Persons in Poverty	
Crawford	11.4%
Iowa	11.1%
US	11.6%

Median household income	
Crawford	\$ 55,552
Iowa	\$ 65,429
US	\$ 69,021

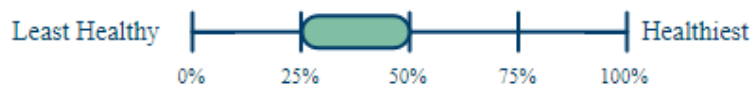
Education:	HS Graduate	Bachelor's degree or higher
Crawford	81.3%	16.8%
Iowa	92.8%	29.7%
US	88.9%	33.7%

Overall Health Profile

Health Outcomes

Health outcomes represent how healthy a county is right now, in terms of length of life but quality of life as well.

Crawford (CF) is ranked in the lower middle range of counties in Iowa (Lower 25%-50%).



Health outcomes represent how healthy a county is right now. They reflect the physical and mental well-being of residents through measures representing the length and quality of life typically experienced in the community.

Health Factors

Health Factors represent those things we can modify to improve the length and quality of life for residents.

Crawford (CF) is ranked among the least healthy counties in Iowa (Lowest 0%-25%).



Health factors represent things that, if changed, can improve length and quality of life. They are predictors of how health our communities CAN be in the future. The four factor areas in the model include health behaviors, clinical care, social & economic factors, and physical environment.



Assessment Process

To gather information from community members, we used a survey and focus groups. The survey was provided in English and Spanish and assistance was provided for individuals who had problems reading the survey. Crawford County Memorial Hospital assisted with the distribution and collection of surveys. In total, 251 surveys were completed and returned.

We also held several focus groups that included community members, community service providers, and staff members. Survey data was provided for review, along with other data points (such as census data and Community Health Rankings). Focus groups allowed for great discussion and collaboration. The groups also provided strategies to address the areas of focus identified, which will be used to develop the improvement plan.

Identified Needs

Areas of need that were identified through review of data (listed in no particular order):

- Mental health issues such as depression, anger, suicide, etc.
- Chronic illnesses (diabetes, heart disease, cancer)
- Overweight/Obesity
- Substance Use/Abuse (alcohol, drugs [illegal and/or prescription])
- Lack of insurance
- Unable to afford co-pay and/or deductible
- Transportation (no car, no gas money, no driver's license, etc.)
- Language barriers
- Fear
- Lack of providers
- No evening or weekend appointments
- Access to nutritious food
- Job opportunities
- Specialty Providers
- Safe places to walk and play

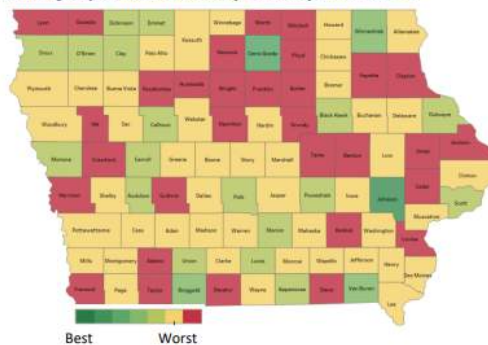
Priorities

1

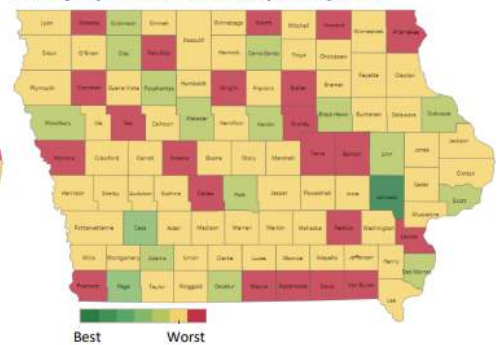
Access to Care (the ability to find and pay for care):

- People who do not have a regular provider are less likely to get preventive care and screenings, which can both lead to improved health. Crawford County is a rural area with limited providers for medical, dental, and mental health.

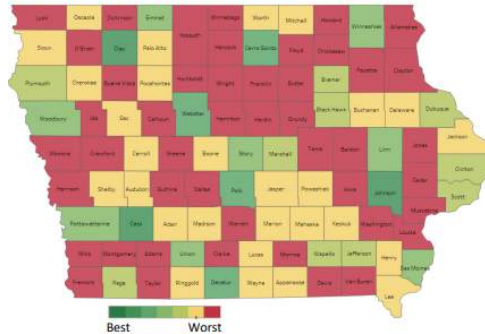
Ratio of Population to Primary Care Physicians, 2018⁷



Ratio of Population to Dentists by County, 2019⁸



Ratio of Population to Mental Health Providers*, 2020³



*Mental health providers are defined as psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, and mental health providers that treat alcohol and other drug abuse, as well as advanced practice nurses specializing in mental health care.³

Source: <https://hhs.iowa.gov/sites/default/files/portals/1/userfiles/291/healthy-iowans/sha2021.pdf>

- People who do not have health insurance are less likely to get care. They are also more likely to find health problems later, which leads to worse outcomes, lower quality of life, and higher mortality rates. In Crawford County, 11% of individuals do not have health insurance, which is higher than both the state and national averages.
- Transportation affects and individual's ability to get to care providers. Rural areas have limited resources. Rising fuel prices increase costs for providers and people using their services. People with limited incomes are not able to afford vehicles, insurance, and the other costs associated with owning a car.
- Interpreters help people with Limited English Proficiency (LEP) access and receive care. Crawford County has 30% of its population indicating Hispanic/Latino ethnicity, which is among the highest in the state. While most people in Iowa report English as their primary language, 32% of Crawford County residents and 55% of Denison residents report a language other than English being spoken at home.

Source: <https://www.census.gov/quickfacts/>

Priorities

2

Mental Health and Mental Health Disorders

According to Healthy People 2030, mental health conditions and disorders affect people regardless of age, social and economic background, or racial and ethnic group, but some populations are more affected than others are. Mental health and physical health are related and closely connected. Mental disorders, like depression and anxiety, can affect people's ability to take part in healthy behaviors. Physical health problems can make it more difficult for people to get treatment for mental disorders.

Focus groups discussed this issue at length and cited many reasons for choosing this as a priority. Reasons included lack of providers, the amount of time to get an appointment, ability to afford services, connections to substance abuse, and stigma.

Source: <https://hhs.iowa.gov/sites/default/files/portals/1/userfiles/291/healthy-iowans/sha2021.pdf>

3

Active Living and Healthy Eating

Both active living and healthy eating are important factors of overall health. Both help people maintain a healthy body weight and decrease the risk of becoming overweight or obese. Being overweight or obese can lead to serious chronic health issues such as heart disease, diabetes, stroke, and some cancers.

Access to nutritious food impacts health outcomes. Adults who don't have access to food (food insecurity) are more likely to have chronic diseases while children who lack access to food have a greater risk of obesity and developmental problems. Having easy, regular access to stores that sell fruits, vegetables, and other staples at affordable prices is necessary for people to eat a nutritious diet. Crawford County has the 8th highest food insecurity rate in Iowa (11.1%), which is 1.8% higher than the national average. Crawford County's child food insecurity rate is 15.6%, which is 6.8% higher than the national average (source: <https://stacker.com/iowa/counties-highest-rate-food-insecurity-iowa>).

Focus groups also discussed this issue at length. Access to a grocery store is limited to Denison. The other communities in the county either only have a convenience store or no stores at all. In addition to access issues, affordability of food was also discussed. Priority for this issue was given due to its links with obesity and chronic diseases.



Next Steps

The next step is to use the information from this assessment to develop and improvement plan. Input from community members and partners will be used to design action steps to help improve the health of our people and communities.

Contact Us



712.263.3303



<https://www.crawfordcountyhealth.com/contact.asp>



<https://www.crawfordcountyhealth.com/default.asp>

