



# 2019 – 2020 Community Health Needs Assessment Report *Yellowstone County, Montana*

## Executive Summary

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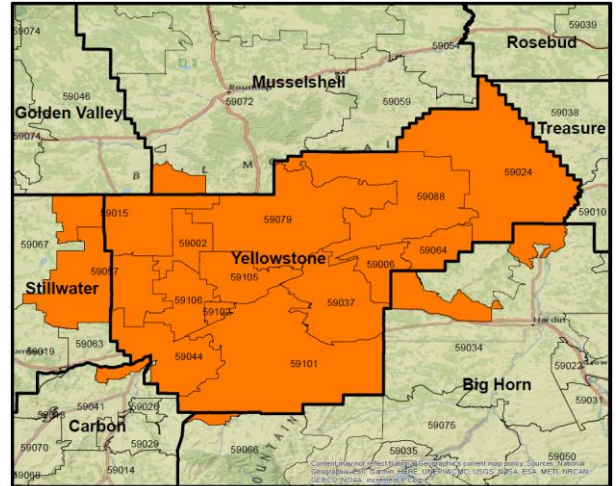
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## About This Assessment

### Acknowledgements

Since 1994, Billings Clinic, RiverStone Health, and St. Vincent Healthcare, often referred to as the Alliance, have collaborated to address complex community health initiatives in Yellowstone County, Montana. This assessment marks the 5<sup>th</sup> partnership with Professional Research Consultants, Inc. (PRC) to administer, collect, and analyze a statistically valid community health needs assessment and report. This report is intended to serve as a community resource, available to local organizations, advocates, and leaders, to inform data-driven interventions to improve the health of our community.



### Introduction

The 2019-20 Yellowstone County Community Health Needs Assessment (CHNA) is a comprehensive, data-driven assessment of the overall health status, health behaviors, and health issues within our community. The CHNA evaluates and informs decisions related to resources and efforts that improve health at the community level. Data included in this report derives from the following:

#### Primary Data



##### **Online Key Informant Survey**

- Community stakeholder input — 154 representatives from healthcare, public health, social services, faith, education, government, and more
- Based on their experiences, the populations they serve



##### **Customized Local Health Survey**

- Statistically significant, randomized survey of 400 households
- Targets health status, experience, behaviors
- Conducted via landline and cell phones



##### **Streetwyze User Feedback**

- Community stakeholder input – 120 users and 428 comments
- Based on user experiences
- Web-based platform open to the general public
- Administered by Healthy By Design and ISEED (Streetwyze founder)



#### Secondary Data

- County-level data
- Census data, vital statistics, other health-related data

This is an Executive Summary of the 2019-2020 Yellowstone County Community Health Needs Assessment featuring select information from the data descriptions; source information can be found within the full report. To learn more, please contact:

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## Significant Health Issues

### Areas of Opportunity

The 2019-20 CHNA revealed 13 Areas of Opportunity. These 13 areas have been identified by our consultant as significant health concerns in Yellowstone County. The following represent specific data points or trends of concern.

#### Access to Healthcare

- Finding a Physician or Provider
- Specific Source of Ongoing Medical Care

#### Cancer

- Leading Cause of Death
- Prostate Cancer & Female Breast Cancer (Deaths and Incidence)

#### Diabetes

- Diabetes Related Deaths

#### Heart Disease & Stroke

- Leading Cause of Death
- High Blood Pressure Prevalence
- High Blood Pressure Management

#### Infant Health

- Low-Weight Births
- Infant Deaths

#### Injury & Violence

- Unintentional Related Injury Deaths Motor Vehicle Crash, Falls [Age 65+]
- Firearm-Related Deaths
- Domestic Violence Experience

#### Mental Health

- “Fair/Poor” Mental Health
- Diagnosed Depression
- Symptoms of Chronic Depression
- Suicide Deaths & Ideation

#### Nutrition, Physical Activity, & Weight

- Fruit/Vegetable Consumption
- Overweight & Obesity [Adults]

#### Potentially Disabling Conditions

- Activity Limitations
- Osteoporosis Prevalence [Age 50+]
- Sciatica/Chronic Back Pain Prevalence
- Caregiving for Others

#### Respiratory Diseases

- Chronic Lower Respiratory Disease (CLRD) Deaths
- Chronic Obstructive Pulmonary Disease (COPD) Prevalence
- Flu Vaccinations [Age 65+]

#### Sexual Health

- Gonorrhea Incidence
- Chlamydia Incidence
- HIV Prevalence

#### Substance Abuse

- Cirrhosis/Liver Disease Deaths
- Personally Impacted by Substance Abuse (Self or Other)

#### Tobacco Use

- Use of E-Cigarettes/Vaping Products

In the 2019-20 CHNA, Sexual Health replaced Dementias as an Area of Opportunity.

Key Informants ranked Mental Health and Substance Abuse as top concerns. See page 4.

## Significant Health Issues

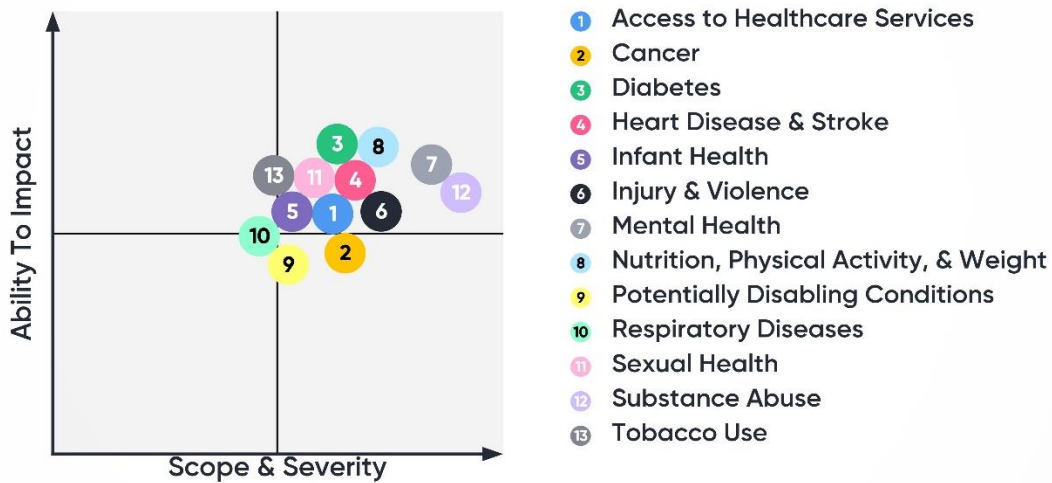
### Top Concerns of Community

#### Prioritization of Community Needs

A community health public forum was held on Friday, November 22, 2019. More than 110 community stakeholders attended this event. Participants heard a presentation by PRC of significant health issues identified through the CHNA and had an opportunity to browse the data and to discuss the root causes of these health issues with other participants. To conclude the forum, attendees were asked to prioritize the identified areas of opportunity through a real-time exercise, using an online polling platform. Each priority area was ranked based on the following criteria:

- **Scope & Severity (1-10):** Ratings based on a scale of 1 (not very prevalent at all, with minimal health consequences) to 10 (extremely prevalent, with very serious health consequences)
- **Ability to Impact (1 – 10):** Ratings based on a scale of 1 (no community ability to impact) to 10 (great ability to impact)

A total of 85 forum attendees chose to participate in the live ranking activity, and scores were averaged for each health issue to generate an overall score and ranking. The matrix below shows the intersection of Scope & Severity with Ability to Impact. Issues in the upper right quadrant represent the most severe health issues that our community has the greatest ability to impact.



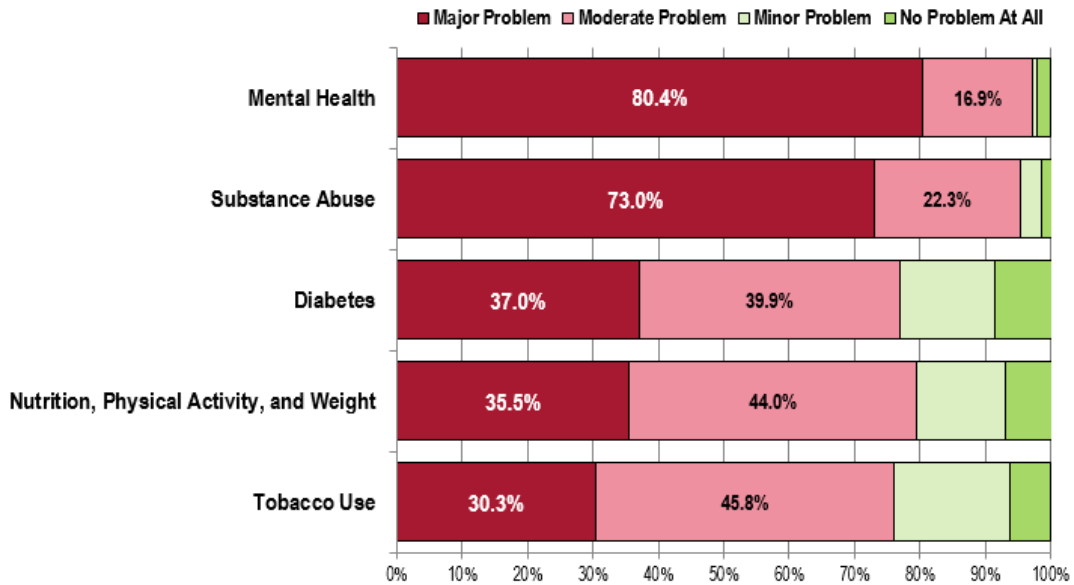
The top 3 issues ranked by the community were: **1) Substance Abuse, 2) Mental Health, and 3) Nutrition, Physical Activity, & Weight.** The ranking activity was also offered virtually for those who could not attend, however, only results from the community health forum are included in this report. The virtual prioritization poll yielded similar results.



**Key Informants**

Community leaders in a variety of sectors rated 20 health issues on the degree to which they thought each was a problem in the community. The Key Informant Survey generated 154 responses, a completion rate of 51.3%. The following chart demonstrates the top 5 issues of concern, according to these community stakeholders.

**Key Informants: Top Health Topics Perceived as “Major Problems” in Yellowstone County**



Note – Key informant responses are one of several data inputs from the assessment process and do not establish priorities for this assessment. See page 3 for information on the prioritization exercise.

**Key Findings**

Income disparity has a significant influence on Yellowstone County residents' health



Individuals earning lower incomes are much more likely to experience food insecurity, activity limitations, be negatively affected by substance abuse, or experience mental health issues, among other health issues

**Community Voice**

"... There is no housing code, so renters, in particular, struggle with poor conditions, such as lack of heat, mold, poor ventilation, and pests."

- Public Health Representative

**Social Determinants of Health**

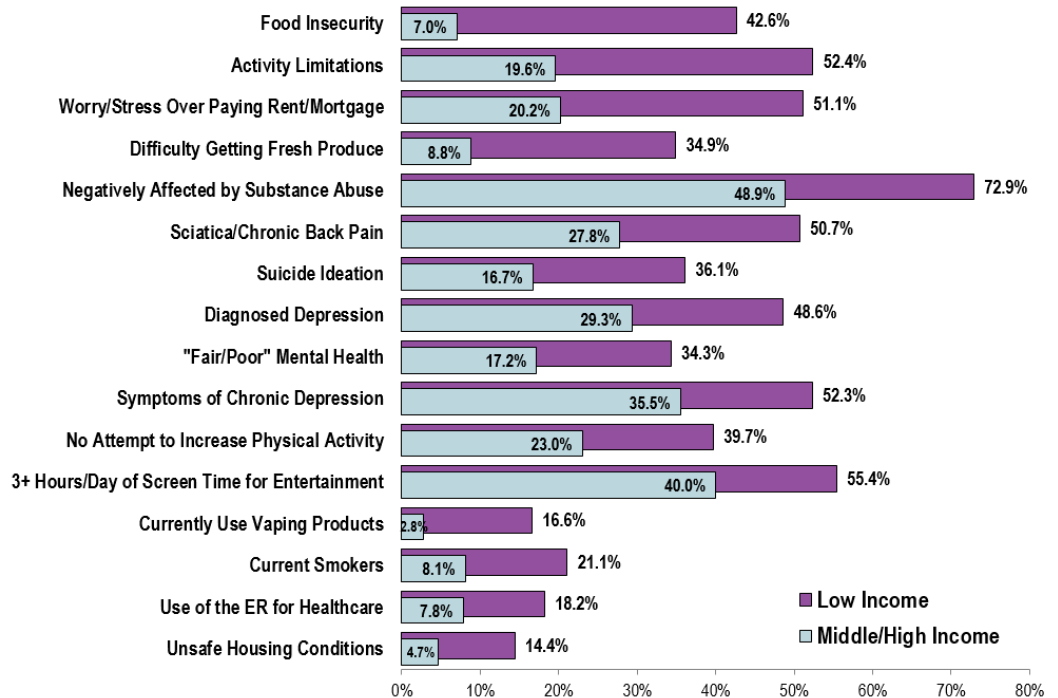
According to Healthy People 2020, "social determinants of health are conditions in the environments in which people are born, live, work, play, worship and age that affect a wide range of health, functioning, and quality of life outcomes and risks". Social determinants are factors outside of a clinical healthcare setting that contribute (either positively or negatively) to an individual's health status, and consider a place-based approach to access and availability to resources to support healthy lifestyles or disease management. The five key social determinants of health include the following:



Source: Healthy People 2020

Data from the 2019-20 CHNA highlights the role that income plays in creating health disparities in Yellowstone County.

**Income Disparity in Selected Yellowstone County Health Indicators**



**Key Findings**

Yellowstone County is growing faster than most counties nationwide

Yellowstone County's population accounts for 15% of Montana's population



**Community Voice**

“The social determinants of health are an important measure of a healthy community: access to healthcare, housing, nutrition food, transportation, and employment.”

- Government Representative

**Social Determinants of Health – Data Snapshot**

Efforts were made in 2019 to incorporate additional survey questions that address the root causes of health outcomes, or social determinants of health. These data points will serve as a baseline measure for future measurement while providing an important snapshot of several indicators that impact more than just health.

**Health & Healthcare**

- See page 7 for more on this Social Determinant under the Access to Healthcare Area of Opportunity.



**Social & Community Context**

- 90% of respondents report an ability to improve community life in Yellowstone County<sup>+</sup>.
- Nearly 1 in 4 Yellowstone County residents report “never”, “seldom”, or only “sometimes” having social and emotional support<sup>+</sup>.



**Education**

- Approximately 7% of residents over 25 years of age in Yellowstone County do not have a high school education (high school diploma or equivalent).



**Economic Stability**

- 1 in 10 Yellowstone County residents are living below the federal poverty level. This is fewer than both state and national rates. This affects an estimated 4,222 children.
- The unemployment rate in Yellowstone County was under 3% as of August 2019. This is below national rates and consistent with the rest of Montana.
- 1 in 4 Yellowstone county adults “sometimes”, “usually”, or “always” worry about the cost of housing (having money to pay their rent or mortgage in the past year).



**Neighborhood & Environment**

- More than half of residents feel that they could rely on public transportation if needed.
- Approximately 1 in 10 residents do not feel safe walking alone in their neighborhoods<sup>+</sup>.
- A total of 7% have experienced housing quality problems such as water leaks, rodents/pests, mold, or other unsafe conditions in the past year<sup>+</sup>.



+ New Question in 2019-2020 Assessment



**Key Findings**

Residents find it much easier to afford their prescriptions



Residents are experiencing significantly more difficulty finding a doctor



2 in 3 adults have had a routine check-up in the past year, an improvement over time

**Community Voice**

“We live in a frontier state where people have to travel many miles to access healthcare. We also live close to reservation communities where stigmas as well as transportation may be an issue.”

— Educator

**Areas of Opportunity**

**Access to Healthcare Services**

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
% [age 18 – 64] lack health insurance	6.4	13.2	13.7
% had routine checkup in past year	67.2	73.0	68.3

**Improving since 2017**

- % reporting difficulty accessing healthcare in past year (- 9.9%)
- % cost prevented getting prescription in past year (- 5.5%)
- % difficulty getting an appointment in past year (- 10.1%)

**Similar results to 2017**

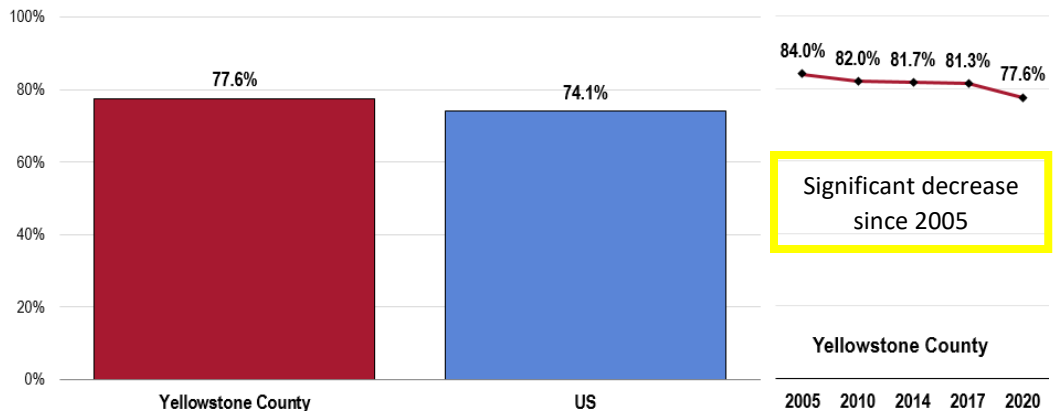
- % lacking health insurance (18 – 64 year olds) (- 1.0%)
- % inconvenient hours prevented doctor visit in past year (+ 0.2%)
- % cost prevented physician visit in past year (- 2.9%)
- % difficulty finding physician in past year (- 1.1%)
- % transportation hindered doctor visit in past year (- 2.6%)
- % language/culture prevented care in past year (- 0.5%)
- % skipped prescription doses to save costs (- 4.4%)
- % difficult getting child’s healthcare in past year (- 3.1%)
- % low health literacy (+ 3.1%)
- % adults with a specific source of ongoing care (- 3.7%)
- % have had a routine check up in past year (- 0.6%)
- % child has had checkup in past year (+ 1.8%)
- % 2+ ER visits in past year (+ 3.3%)

**Worsening since 2017 (None)**

**Comparison to 2017 Unavailable - Data below reflects current measurement**

- Primary care doctors (85.8 per 100,000)

**Have a Specific Source of Ongoing Medical Care**  
Healthy People 2020 = 95.0% or Higher



## Areas of Opportunity

### Cancer

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
Cancer related deaths (per 100,000)	158.7	151.8	155.6
% [women 50-74] mammogram (past 2 yrs.)	77.3	74.1	77.0
% [women 21-65] pap smear (past 3 yrs.)	75.3	77.0	81.1
% [age 50-75] colorectal cancer screening	77.7	64.5	76.4

#### Improving since 2017 (None)

#### Similar results to 2017

- % skin cancer (+ 1.4%)
- % cancer (other than skin) (+ 1.6%)
- % [women 50 – 74] mammogram in past 2 years (+ 0.9%)
- % [women 21 – 65] pap smear in past 3 years (+ 5.8%)
- % [age 50 – 75] colorectal cancer screening (+ 2.7%)

#### Worsening since 2017 (None)

#### Comparison to 2017 Unavailable - Data below reflects current measurement

- Cancer (age adjusted death rate) (158.7 per 100,000)
- Lung cancer (age-adjusted death rate) (37.5 per 100,000)
- Prostate cancer (age-adjusted death rate) (25.0 per 100,000)
- Female breast cancer (age-adjusted death rate) (24.0 per 100,000)
- Colorectal cancer (age-adjusted death rate) (11.8 per 100,000)
- Cancer incidence rate (all sites) (496.4 per 100,000)
- Prostate cancer incidence (123.1 per 100,000)
- Female breast cancer incidence (134.0 per 100,000)
- Lung cancer incidence (59.3 per 100,000)
- Colorectal cancer incidence (37.3 per 100,000)

#### Age-Adjusted Cancer Death Rates by Site

(2015-2017 Annual Average Deaths per 100,000 Population)

	Yellowstone County	Montana	US	HP2020
ALL CANCERS	158.7	151.8	155.6	161.4
Lung Cancer	37.5	35.0	38.5	45.5
Prostate Cancer	25.0	23.3	18.9	21.8
Female Breast Cancer	24.0	19.6	20.1	20.7
Colorectal Cancer	11.8	13.5	13.9	14.5

#### Key Findings

Mortality and incidence rates are higher in Yellowstone County for breast cancer and prostate cancer when compared to rates in Montana or the US



#### Community Voice

“It feels like everyone is affected by cancer in some way. We all know someone or have someone close to us with cancer.”

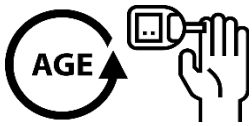
— Educator

## Areas of Opportunity

### Diabetes

#### Key Findings

In Yellowstone County, individuals who are 40 years of age or older are at higher risk of diabetes



#### Community Voice

“Not enough places to buy healthy food. Unhealthy school lunches. Non-walkable places to live or work.”

- Government Representative

“I think controlling it is an issue. Not getting to the point of having Type 2 diabetes should be a strong focus of any community. [This is] a major cost issue for many.”

- Business Leader

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
Diabetes mellitus deaths (per 100,000)	19.9	23.2	21.3
% diabetes/high blood sugar	12.5	9.4	13.3

#### Improving since 2017 (None)

#### Similar results to 2017

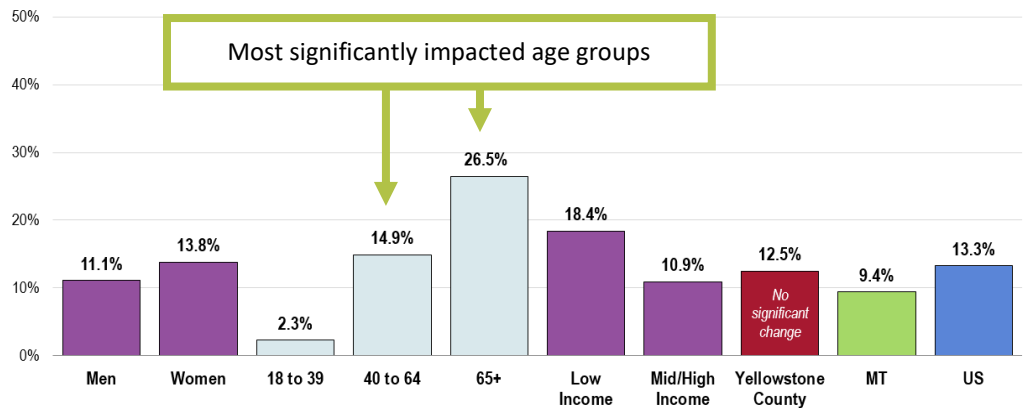
- % diabetes (+ 3.3%)
- % borderline/pre-diabetes (- 3.7%)

#### Worsening since 2017 (None)

#### Comparison to 2017 Unavailable - Data below reflects current measurement

- Diabetes mellitus (age-adjusted death rate) (19.9 per 100,000)

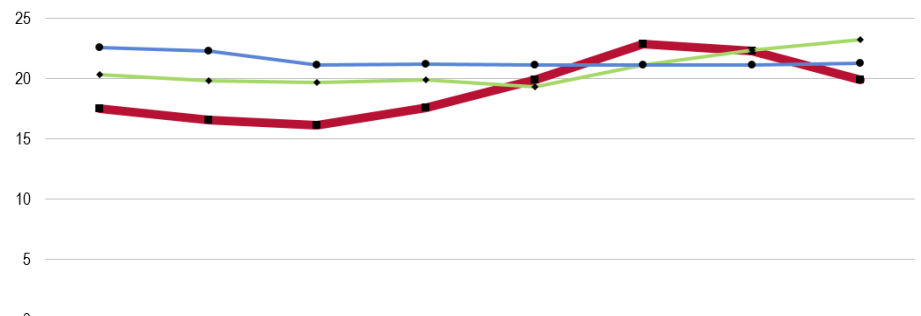
#### Prevalence of Diabetes (Yellowstone County, 2020)



#### Diabetes: Age-Adjusted Mortality Trends

(Annual Average Deaths per 100,000 Population)

Healthy People 2020 = 20.5 or Lower (Adjusted)



Year	Yellowstone Co	MT	US
2008-2010	17.5	20.3	22.6
2009-2011	16.6	19.8	22.3
2010-2012	16.1	19.7	21.1
2011-2013	17.6	19.9	21.2
2012-2014	19.9	19.3	21.1
2013-2015	22.9	21.1	21.1
2014-2016	22.3	22.4	21.1
2015-2017	19.9	23.2	21.3

**Key Findings**

1 in 4 Yellowstone County deaths are attributed to heart disease or stroke



**Community Voice**

“Heart disease and stroke are among the major disease of older people all across the US. Montana is no exception. The fact [that] so many of our elderly citizens are overweight and... inactive contributes greatly to this problem. Many middle-aged people are also well on the way to heart disease due to their excess body weight, elevated blood pressure, and lack of activity.”

— Community Leader

**Areas of Opportunity**

**Heart Disease & Stroke**

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
% suffered from stroke	3.0	3.6	4.7
% told have high blood pressure (ever)	37.3	34.0	37.5

**Improving since 2017 (None)**

**Similar results to 2017**

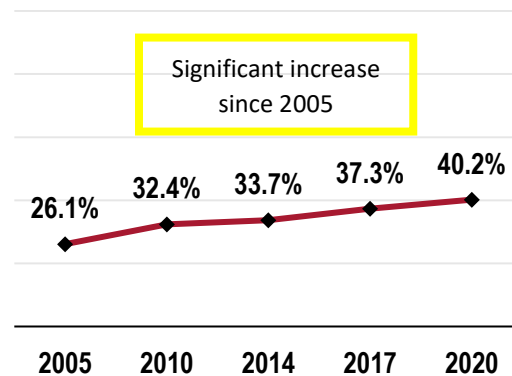
- % heart disease (heart attack, angina, coronary disease) (+ 0.3%)
- % stroke (+ 0.9%)
- % told have high blood pressure (ever) (+ 2.9%)
- % [HBP] taking action to control high blood pressure (- 8.4%)
- % told have high cholesterol (ever) (- 0.6%)
- % [HBC] taking action to control high blood cholesterol (+ 0.3%)
- % 1+ cardiovascular risk factor (- 0.1%)

**Worsening since 2017 (None)**

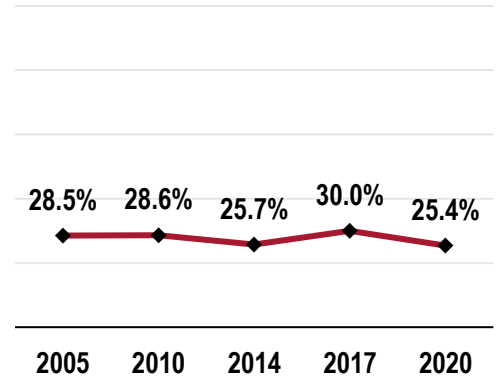
**Comparison to 2017 Unavailable - Data below reflects current measurement**

- Diseases of the heart (age-adjusted death rate) (155.3 per 100,000)
- Stroke (age-adjusted death rate) (37.3 per 100,000)

**Prevalence of High Blood Cholesterol**  
(Yellowstone County)



**Prevalence of High Blood Pressure**  
(Yellowstone County)



## Areas of Opportunity

### Infant Health

Infant health is measured by infant mortality rates and the number of low birthweight babies born. Low birth weight is defined as babies who weigh less than 2,500 grams – or 5 pounds, 8 ounces – at birth.

#### Select Geographic Comparisons (2019-20)

	Yellowstone	MT	US
% births to teenagers under age 30	5.2	5.4	5.1

#### Comparison to 2017 Unavailable for the Area of Opportunity

Data below reflects current measurement

- % low birthweight births (7.7%)
- Infant death rate (7.1 per 1,000 live births)
- % would give a newborn all vaccinations+ (92.5%)
- % births to teenagers under 20 years of age (5.2%)

#### Key Findings

Infant mortality rates are slightly higher in Yellowstone County than in Montana or the US



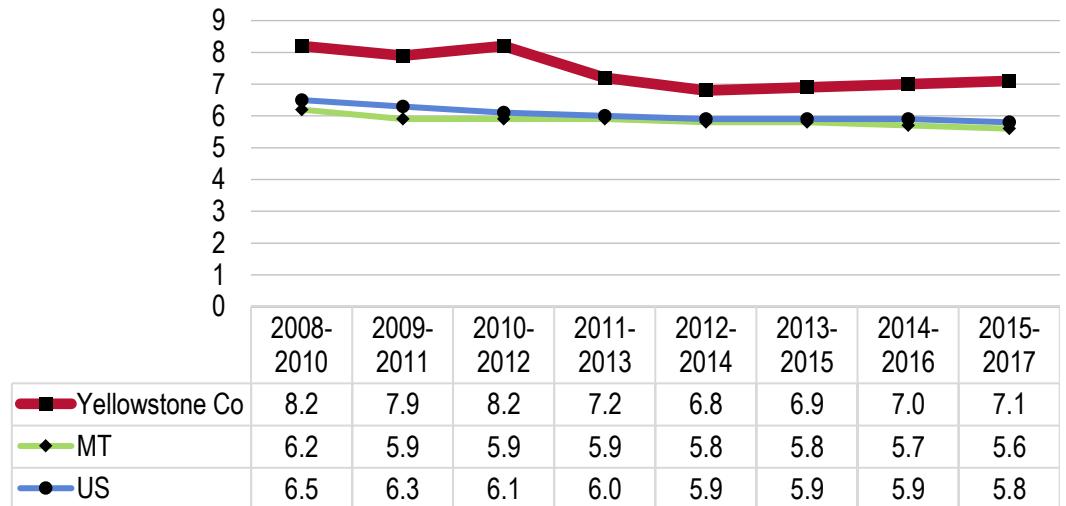
#### Community Voice

“...There is no public transportation to this community so single mothers with newborns who may have no transportation are cut off from seeing doctors on a regular basis”

- Educator

#### Infant Mortality Trends

(Annual Average Infant Deaths per 1,000 Live Births)



## Areas of Opportunity

### Injury & Violence

#### Key Findings

Unintentional injury death rates are notably higher than US rates for falls (among 65+) and vehicle crashes

Yellowstone County adults experience domestic violence at a higher rate than the US



#### Community Voice

“I think injury and violence are a major problem in our community because we have so many issues with substance abuse.

We have a high incidence of traffic fatalities.”

- Educator

“Uncontrolled intersections are [common] ... [and] can be confusing and dangerous. Let’s add some more stop signs or other traffic calming devices in our neighborhood to make it safer for everyone.”

– Billings Resident via Streetwyze platform

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
Unintentional injury related deaths (per 100,000)	46.5	53.5	46.7
Motor vehicle crash related deaths (per 100,000)	12.7	17.7	11.4
[65+] fall related deaths (per 100,000)	89.7	84.7	62.1
Firearm-related deaths (per 100,000)	18.3	20.2	11.6

#### Improving since 2017 (None)

#### Similar results to 2017

- % “always” wear seat belt (- 5.5%)
- % child [age 5-17 years] “always” wear bicycle helmet (- 8.5%)

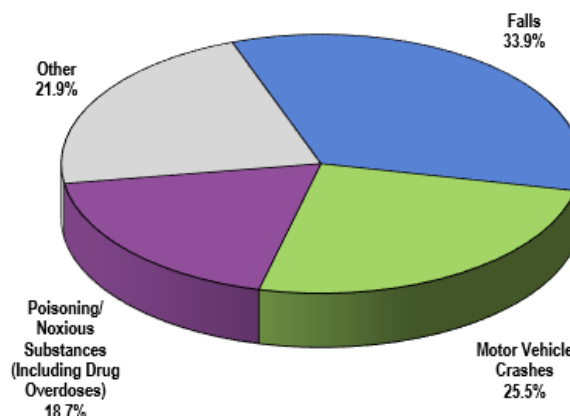
#### Worsening since 2017

- % victim of domestic violence (ever) (+ 6.6%)

#### Comparison to 2017 Unavailable - Data below reflects current measurement

- Unintentional injury (age adjusted death rate) (46.5 per 100,000)
- Motor vehicle crashes (age-adjusted death rate) (12.7 per 100,000)
- [65+] falls (age adjusted death rate) (89.7 per 100,000)
- % [age 45+] fell in the past year (38.5%)
- % have a family emergency plan+ (38.5%)
- Firearm related deaths (age adjusted death rate) (18.3 per 100,000)
- % have an unlocked firearm in home or vehicle + (23.6%)
- Homicide (age adjusted death rate) (3.3 per 100,000)
- Violent crime rate (362.0 per 100,000)
- % perceive neighborhood as “slightly/not at all safe” + (13.7%)
- % feel “slightly/not at all safe” walking in the neighborhood+ (11.7%)

**Leading Causes of Unintentional Injury Deaths**  
(Yellowstone County, 2015-2017)



Note- firearm related deaths are included in the ‘other’ category above.

+ New Question in 2019-2020 Assessment

**Key Findings**

1 in 5 Yellowstone County residents have considered suicide



Individuals earning lower incomes and those who identify as women are more likely to experience symptoms of chronic depression

**Community Voice**

“Mental health issues are a huge problem nationwide. Lack of services or availability of such as psychiatrists and counselors. Negative attitudes towards mental health as a weakness. Mentality to ‘suck it up’. Cost of counseling.”  
— Educator

**Areas of Opportunity**

**Mental Health**

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
% fair/poor mental health	20.2		13.0
% diagnosed depression	32.2	21.9	21.6
Suicide related deaths (per 100,000)	25.3	26.7	13.6
% ever sought help for mental health	41.7		30.8
% unable to get mental health services	5.1		6.8

**Improving since 2017 (None)**

**Similar results to 2017**

- % have ever sought help for mental health (+ 6.2%)
- % [those with diagnosed depression] seeking help (- 2.1%)
- % taking Rx/receiving mental health treatment (- 0.9%)
- % unable to get mental health services in past year (+ 1.6%)
- % typical day is “extremely/very” stressful (+ 1.9%)

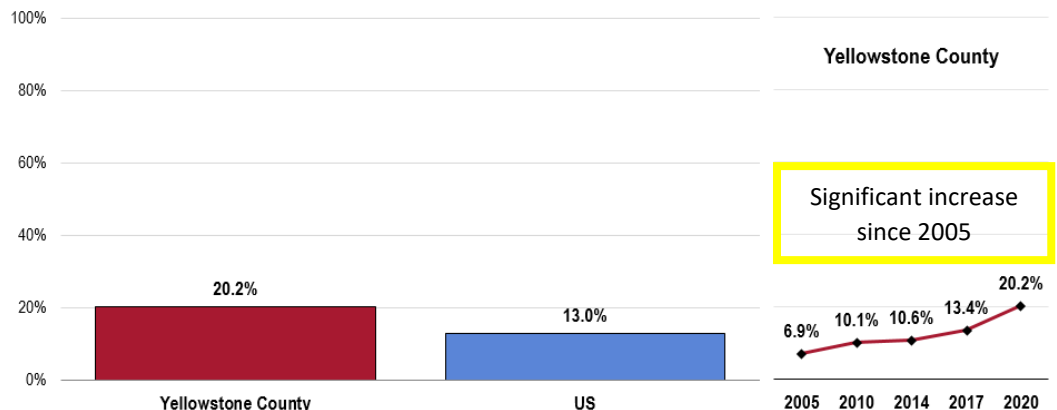
**Worsening since 2017**

- % “fair/poor” mental health (+ 6.8%)
- % diagnosed depression (+ 6.9%)
- % symptoms of chronic depression (2+ years) (+ 7.5%)
- % have considered suicide (+7.1%)

**Comparison to 2017 Unavailable - Data below reflects current measurement**

- % “always/usually” have social and emotional support+ (76.8%)
- % “often” experience feelings of isolation+ (11.9%)
- Suicide (age adjusted death rate) (25.3 per 100,000)
- Mental health providers (317.7 per 100,000)

**Experience “Fair” or “Poor” Mental Health**



+ New Question in 2019-2020 Assessment

**Key Findings**

**Among Yellowstone County Children:**

2 in 3 currently meet physical activity recommendations

Girls have caught up with boys in their level of physical activity

1 in 4 report 3 or more hours of screen time daily



**Among Yellowstone County Adults**

2 in 3 are trying to increase their daily physical activity levels

44% report 3 or more hours of screen time daily

Rates of overweight and obesity are higher than Montana, but are similar to the US

**Community Voice**

“Much of Yellowstone County isn’t friendly to walking, running, and biking. The community is set up for driving to most things”

- Business Leader

**Areas of Opportunity**

**Nutrition, Physical Activity & Weight**

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
% population at healthy weight	26.9	34.7	30.3
% eat 5+ servings fruit or vegetables per day	27.7		33.5
% no leisure time physical activity	16.6	22.7	26.2

**Improving since 2017**

- % “very/somewhat” difficult to buy fresh produce (- 6.2%)
- % [adults] 3+ hours per day of total screen time (- 9.1%)

**Similar results to 2017**

- % eat 5+ servings of fruit or vegetables per day (- 3.1%)
- % food insecure (+ 1.2%)
- % 7+ sugar-sweetened drinks in past week (+ 2.9%)
- % healthy weight (BMI 18.5 – 24.9) (+ 5.2%)
- % obese (BMI 30+) (+ 2.5%)
- % child [age 5 – 17] obese (+ 7.3%)
- % children [age 5 -17] overweight (85<sup>th</sup> percentile) (+ 5.5%)
- % children [age 5 – 17] obese (95<sup>th</sup> percentile) (+ 7.3%)
- % no leisure time physical activity (- 1.4%)
- % meeting physical activity guidelines (- 1.0%)
- % increased physical activity through everyday behaviors (- 0.4%)
- % “never” walked/biked/used public transportation for commute (- 4.7%)
- % child [age 2-17] physically active 1+ hours per day (- 4.6%)
- % child [age 5-17] 3+ hours per day of total screen time (- 3.7%)

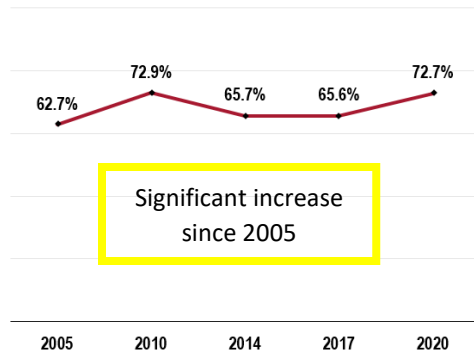
**Worsening since 2017**

- % overweight (BMI 25+) (+ 7.1%)

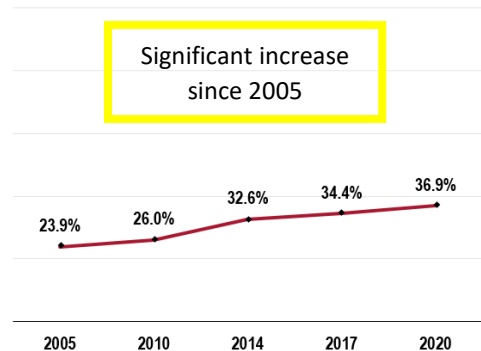
**Comparison to 2017 Unavailable - Data below reflects current measurement**

- % population with low food access (22.7%)
- Recreation/fitness facilities (24.3 per 100,000)

**Prevalence of Total Overweight [Overweight and Obese] (Yellowstone County)**



**Prevalence of Obesity (Yellowstone County) Healthy People 2020 = 30.5% or Lower**





**Key Findings**

Limitations reported were most commonly associated with musculoskeletal issues

Chronic back pain and osteoporosis (among older adults) are more common in Yellowstone County than the US

Top health issues cited requiring a caregiver include:  
 Mental illness  
 Old age/frailty  
 Dementia/ cognitive impairment  
 Back problems  
 Cancer  
 Heart disease

**Community Voice**

“I wish [Yellowstone County] had a service to help people like me to clean my house when I can’t.”

-Yellowstone County Resident via Streetwyze

“We have an aging population, dementia and Alzheimer’s are on the rise, and yet there is a significant lack of awareness about the disease and treatment.”

- Healthcare Provider

**Areas of Opportunity**

**Potentially Disabling Conditions**

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
% [50+] arthritis or rheumatism	38.9		38.3
% [50+] osteoporosis	17.2		9.4
% sciatica/back pain	33.8		22.9
% activity limitations	30.7		25.0
Alzheimer’s disease related deaths (per 100,000)	63.2	51.9	41.0
% caregiver to a friend/family member	30.1		20.8

**Improving since 2017 (None)**

**Similar results to 2017**

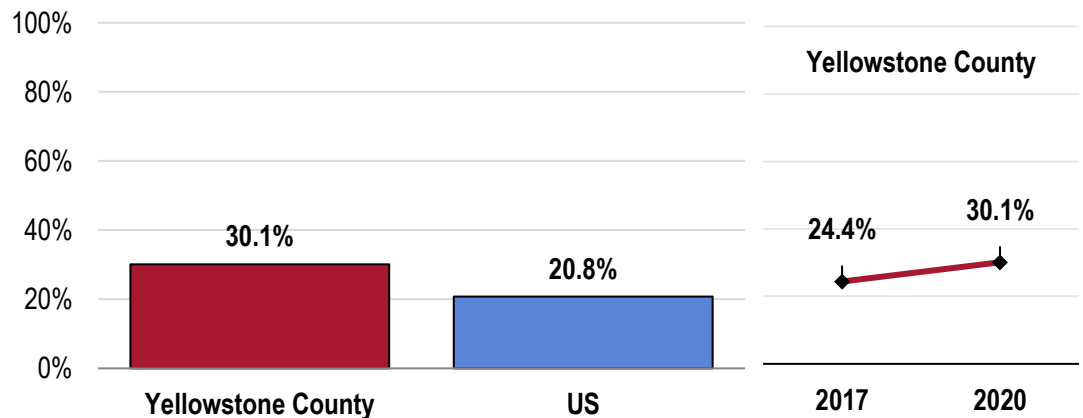
- % [50+] arthritis/rheumatism (+ 0.8%)
- % [50+] osteoporosis (+ 4.8%)
- % sciatica/chronic back pain (+ 6.1%)
- % activity limitations (+ 1.1%)
- % caregiver to a friend/family member (+ 5.7%)

**Worsening since 2017 (None)**

**Comparison to 2017 Unavailable - Data below reflects current measurement**

- % multiple chronic conditions (43.5%)
- Alzheimer’s disease (age-adjusted death rate) (22.5 per 100,000)

**Act as Caregiver to a Friend or Relative with a Health Problem, Long-Term Illness or Disability**



## Areas of Opportunity

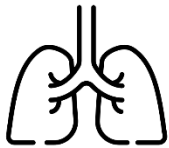
### Respiratory Diseases

#### Select Geographic Comparisons (2019-20)

	Yellowstone	MT	US
CLRD related deaths (per 100,000)	63.2	51.9	41.0
Pneumonia/influenza related deaths (per 100,000)	13.0	12.7	14.3
% [adult] currently has asthma	10.0	10.0	11.8
% [child] currently has asthma	6.5		9.3
% [age 65+] flu vaccine in past year	64.5	57.5	76.8

#### Key Findings

Rates of chronic lower respiratory disease (CLRD) in Yellowstone County are higher than the rest of Montana and the US



#### Improving since 2017 (None)

#### Similar results to 2017

- % chronic obstructive pulmonary disease (COPD or lung disease) (+ 2.8%)
- % [adult] currently has asthma (+ 0.5%)
- % [child 0-17] currently has asthma (- 6.0%)

#### Worsening since 2017 (None)

#### Comparison to 2017 Unavailable - Data below reflects current measurement

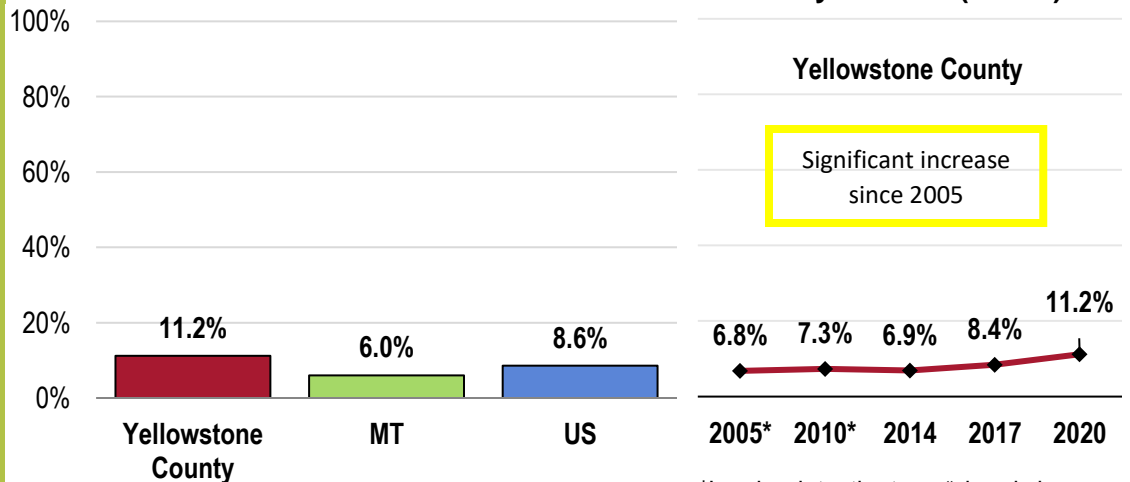
- Chronic lower respiratory disease (CLRD) (age-adjusted death rate) (63.2 per 100,000)
- Pneumonia/influenza (age-adjusted death rate) (13.0 per 100,000)
- % [age 65+] flu vaccine in past year+ (64.5%)

#### Community Voice

“In my experience, many individuals in Yellowstone County have COPD and have to be on oxygen part- or full-time.”

- Government Representative

#### Prevalence of Chronic Obstructive Pulmonary Disease (COPD)



\*In prior data, the term “chronic lung disease” was used, which also included bronchitis or emphysema.

**Key Findings**

**Yellowstone County residents are:**

Contracting chlamydia at higher rates than Montana, but less than the US

Contracting gonorrhea at nearly double the rate of the of Montana, and higher than the US

Experiencing higher rates of HIV than Montana, but much less than the US



**Community Voice**

“Rates of gonorrhea, chlamydia, and syphilis are growing in our community at alarming rates. What happens when we have an antibiotic resistant strain that cannot be treated? High risk behavior in the community— human trafficking, drug use, homelessness, movement in and out of Billings.”

- Public Health Representative

**Areas of Opportunity**

**Sexual Health**

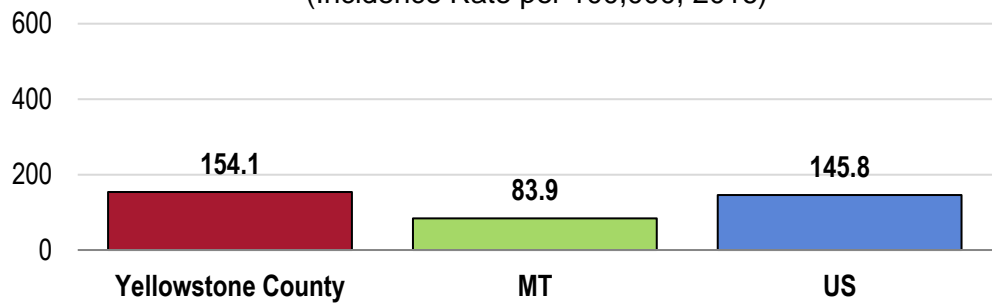
Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
Gonorrhea incidence per 100,000	154.1	83.9	145.8
Chlamydia incidence per 100,000	441.3	427.5	497.3
HIV prevalence per 100,000	103.1	66.1	362.3

**Comparisons to 2017 are unavailable for this Area of Opportunity**

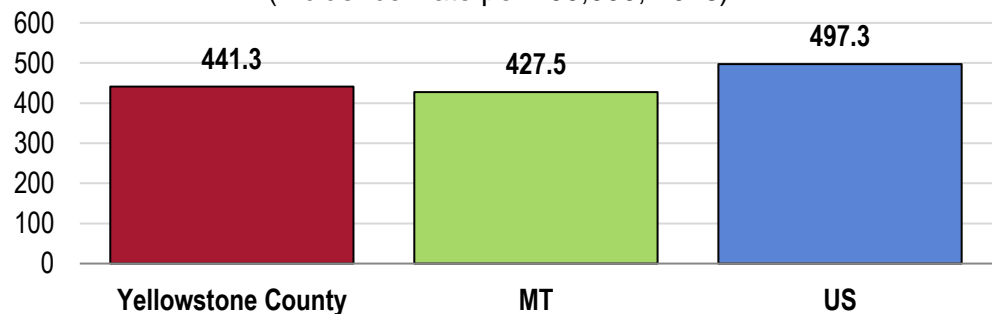
Data below reflects current measurement

- Gonorrhea incidence (154.1 per 100,000)
- Chlamydia incidence (441.3 per 100,000)
- HIV prevalence (103.1 per 100,000)

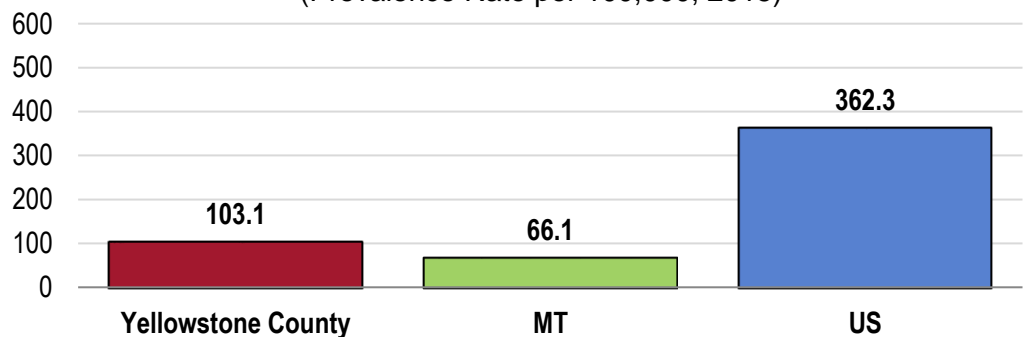
**Gonorrhea Incidence**  
(Incidence Rate per 100,000, 2016)



**Chlamydia Incidence**  
(Incidence Rate per 100,000, 2016)



**HIV Prevalence**  
(Prevalence Rate per 100,000, 2015)



**Key Findings**

Death rates from cirrhosis or liver disease are less than Montana, but higher than the US

Unintentional drug-related death rates nearly 1/2 and 1/3 of Montana and US rates, respectively



**Community Voice**

“Access to substances is easier and quicker than access to treatment.

[Yellowstone County] lacks the treatment capacity, both inpatient and outpatient, for the issues in the community.”

- Educator

“It is such a huge problem that is usually addressed when people are at the bottom. Needs to be discussed and education [made] available long before people are in crisis. We need more care givers, particularly for those that cannot afford care.”

- Community Leader

**Areas of Opportunity**

**Substance Abuse**

“Substances” include alcohol and illicit drugs.

“Excessive drinking” is defined as:

- *Heavy drinking*: men reporting 2+ alcoholic drinks/day or women reporting 1+ alcoholic drink/day in the preceding month, OR
- *Binge drinking*: men reporting 5+ alcoholic drinks or women reporting 4+ alcoholic drinks on any single occasion during the preceding month

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
Cirrhosis/liver disease related deaths (per 100,000)	13.9	15.1	10.8
% current drinker	60.1	58.6	55.0
% excessive drinker	20.0		22.5
Unintentional drug-related deaths (per 100,000)	4.1	8.6	12.3
% ever sought help for alcohol/drug problem	8.3		3.4
% life negatively affected by substance abuse	53.8		37.3

**Improving since 2017**

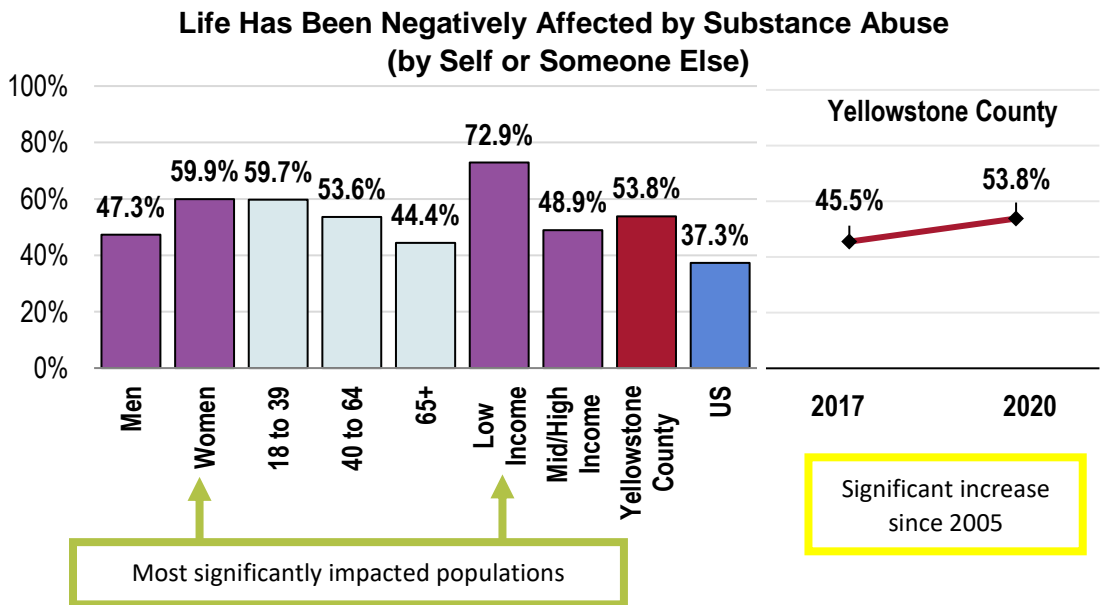
- % ever sought help for alcohol or drug problem (+ 4.6%)

**Similar results to 2017**

- % current drinker (- 0.4%)
- % excessive drinker (- 0.3%)

**Worsening since 2017**

- % life negatively affected by substance abuse (+ 8.3%)



## Areas of Opportunity

### Tobacco Use

Select Geographic Comparisons (2019-20)	Yellowstone	MT	US
% current smoker	11.9	18.0	16.3
% currently use electronic cigarettes	7.9	3.9	3.8
% use smokeless tobacco	4.3	6.6	4.4

#### Improving since 2017

- % current smoker (- 7.7%)

#### Similar results to 2017

- % someone smokes at home (- 0.8%)
- % [nonsmokers] someone smokes in the home (+ 2.5%)
- % [household with children] someone smokes in the home (- 2.1%)
- % currently use electronic cigarettes (+ 3.1%)
- % use smokeless tobacco (+ 0.8%)
- % [tobacco users] received advice to quit using tobacco (- 14.7%)

#### Worsening since 2017 (None)

#### Key Findings

Vaping rates are higher among residents under 40 years of age and those earning lower incomes



#### Community Voice

“I walk down the sidewalk and I see a lot of people smoking. I walk through the city parking garage and I have to walk through a cloud of smoke to get to my office.”

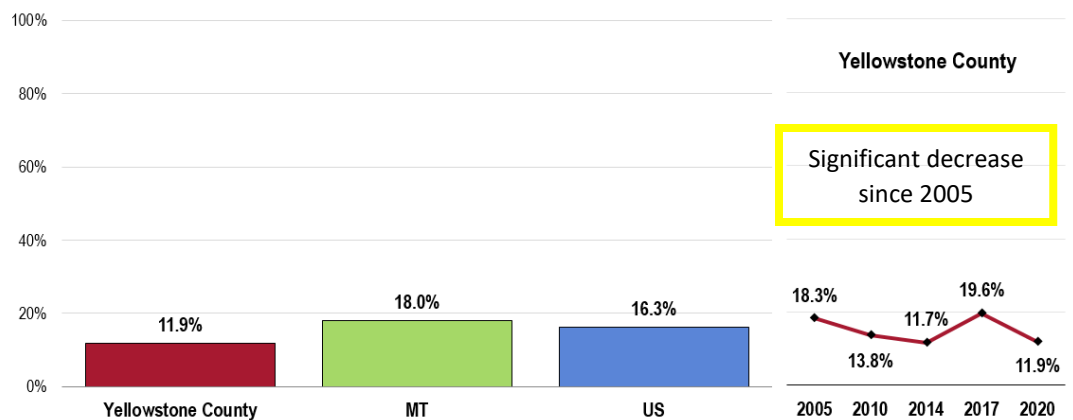
- Business Leader

“The younger people are switching from the old style of smoking to vaping and no one is really clear yet just how much harm this new form of smoking does to the body.”

- Community Leader

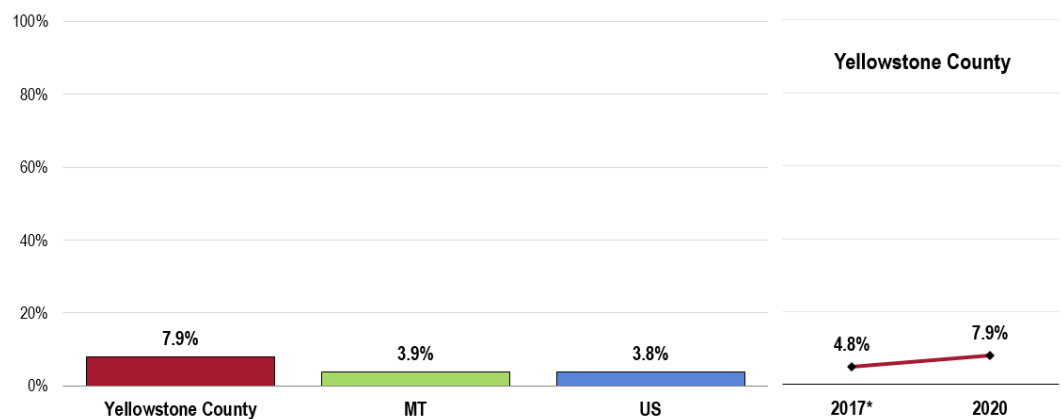
### Current Smokers

Healthy People 2020 = 12.0% or Lower



### Currently Use Vaping Products

(Every Day or on Some Days)



## Summary Tables and Additional Information

The full CHNA includes a series of summary tables, which provide a comparison of current data with previous CHNA cycles, state and national data, and Healthy People 2020 benchmarks where available. These summary tables begin on page 22 of the full report and may also be accessed as a standalone document on the Healthy By Design Coalition’s webpage:

<http://www.healthybydesignyellowstone.org/community-data/>

Overall Health	Yellowstone County	Yellowstone vs. Benchmarks		
		vs. MT	vs. US	vs. HP2020
% "Fair/Poor" Physical Health	16.7	☁ 15.1	☁ 18.1	
		☀ better	☁ similar	☔ worse

### Yellowstone County Trends

2005 vs. 2010	2010 vs. 2014	2014 vs. 2017	2017 vs. 2020	Baseline vs. Current Data §
☔ (10.5 vs. 17.1)	☁ (17.1 vs. 16.3)	☁ (16.3 vs. 15.4)	☁ (15.4 vs. 16.7)	☔ (10.5 vs. 16.7)
§ For survey indicators, this represents baseline findings (earliest year available) vs. 2020 (current findings). For secondary data indicators (those marked with a "**"), data years can vary but typically represent a span of 7 to 10 years.				

For the complete 2019-20 Yellowstone County Community Health Needs Assessment, please visit any one of the following websites:



[www.hbdyc.org](http://www.hbdyc.org)



[billingsclinic.com/communityhealth](http://billingsclinic.com/communityhealth)



[RiverStoneHealth.org](http://RiverStoneHealth.org)



[www.svh-mt.org](http://www.svh-mt.org)



**For more information on the  
2019 – 2020 Yellowstone County Community Health Needs Assessment  
or the Healthy By Design Coalition, please contact us.**



[www.hbdyc.org](http://www.hbdyc.org)



[HBDYyellowstone](https://www.facebook.com/HBDYyellowstone)



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