Executive Summary

2016-17 Community Health Needs Assessment Report

Yellowstone County, Montana

Sponsored by:

Billings Clinic RiverStone Health St. Vincent Healthcare

By:

Professional Research Consultants, Inc. 11326 P Street Omaha, NE 68136-2316 www.PRCCustomResearch.com

2016-0523-02 © January 2017



Professional Research Consultants, Inc.

Table of Contents

About This Assessment	3
Significant Health Issues	4
Self-Reported Health Status	7
Access to Healthcare Services	8
Cancer	10
Heart Disease & Stroke	11
Injury	12
Mental Health	13
Nutrition, Physical Activity & Weight	14
Respiratory Disease	16
Substance Abuse	17
Overarching Issue: Income	18
Summary Tables	19

About This Assessment

Acknowledgements

Since 1994, Billings Clinic, RiverStone Health and St. Vincent Healthcare have been working together, creating and sustaining innovative programs that address complex community-wide health issues. These collaborating organizations (The Alliance) sponsored this Community Health Needs Assessment, a follow-up to similar studies conducted in 2005-06, 2010-11 and 2013-14. They see this research as a community asset, information that will assist many organizations in strengthening the impact and effectiveness of their services toward improving health in our community.

Introduction

The 2016-17 Community Health Needs Assessment for Yellowstone County is a systematic, data-driven approach to determining the health status, behaviors and needs of our population. Subsequently, this information may be used to inform decisions and guide efforts to improve community health and wellness.

There are three components that are essential in rendering a complete picture of the health of Yellowstone County: (1) the community health survey [primary quantitative data]; (2) existing data [secondary quantitative data]; and (3) online key informant data [primary qualitative data].

Community Health Survey

The Community Health Survey developed for this study gives us a complete and timely view of the health status and behaviors of area residents through a randomized telephone survey of 400 Yellowstone County adults. All administration of the surveys, data collection and data analysis was conducted by Professional Research Consultants, Inc. (PRC).

The sample drawn for this survey is representative of the adult Yellowstone County population in terms of demographic and socioeconomic characteristics, as well as geographical location. The maximum error rate associated with the total sample of 400 residents is ±4.9% at the 95 percent level of confidence.

Existing Data

Existing vital statistics and other data are incorporated into this assessment for Yellowstone County. Comparisons are also made, where available, to state and national benchmarks. Furthermore, wherever possible, health promotion goals outlined in Healthy People 2020 are included.

Online Key Informant Survey

To solicit input from key informants, those individuals who have a broad interest in the health of the community, an Online Key Informant Survey was also implemented as part of this process. 194 participants included healthcare providers, public health representatives, government representatives, educators, business leaders, and a variety of other community leaders.

This document is an Executive Summary of findings from the **2016-17 Community Health Needs Assessment** for Yellowstone County.

Data descriptions and source information can be found in the full report of findings.

To learn how to view the full report and data, please contact Heather Fink, Healthy By Design, at (406) 247-3272.



The Healthy People 2020 initiative is the nation's new 10-year goals and objectives for health promotion and disease prevention.

Healthy People 2020 is the product of an extensive stakeholder feedback process that is unparalleled in government and health. It integrates input from public health and prevention experts, a wide range of federal, state and local government officials, a consortium of more than 2,000 organizations, and perhaps most importantly, the public.

Significant Health Issues

Based on results of the 2016-17 Community Health Needs Assessment for Yellowstone County, the following represent some of the significant health needs identified for the community:

Areas of Opportunity

Access to Healthcare Services

Key areas of concern:

- Barriers to Access
 - Cost of Prescriptions
 - o Appointment Availability
 - Finding a Physician

Cancer

Key areas of concern:

- Cancer Deaths
 - Including Prostate Cancer and Colorectal Cancer Deaths
- Cancer Incidence
 - o Including Prostate Cancer Incidence
- Female Breast Cancer Screening
- Cervical Cancer Screening

Dementia, Including Alzheimer's Disease

Key areas of concern:

- · Alzheimer's Disease Deaths
- Progressive Memory Loss/Confusion

Diabetes

Key area of concern:

• Prevalence of Borderline/Pre-Diabetes

Heart Disease & Stroke

Key areas of concern:

- Heart Disease & Stroke Deaths
- High Blood Pressure Prevalence

Infant Health & Family Planning

Key areas of concern:

- · Low-Weight Births
- Infant Mortality

Injury & Violence

Key areas of concern:

- Motor Vehicle Crash Deaths
- Seatbelt Usage
- Firearm-Related Deaths
- Firearm Prevalence
 - o Including in Homes With Children
- Firearm Storage/Safety

Mental Health

Key areas of concern:

- "Fair/Poor" Mental Health
- Diagnosed Depression
- Suicide Deaths
- Suicide Ideation

Nutrition, Physical Activity & Weight

Key area of concern:

Obesity [Adults]

Potentially Disabling Conditions

Key areas of concern

- · Activity Limitations
- Sciatica/Back Pain Prevalence
- Blindness/Vision Trouble

Respiratory Diseases

Key areas of concern:

- Chronic Lower Respiratory Disease (CLRD) Deaths
- Pneumonia/Influenza Deaths

Substance Abuse

Key areas of concern:

- Cirrhosis/Liver Disease Deaths
- Drug-Induced Deaths
- Personal Impact of Substance Abuse

Tobacco Use

Key area of concern:

• Cigarette Smoking Prevalence

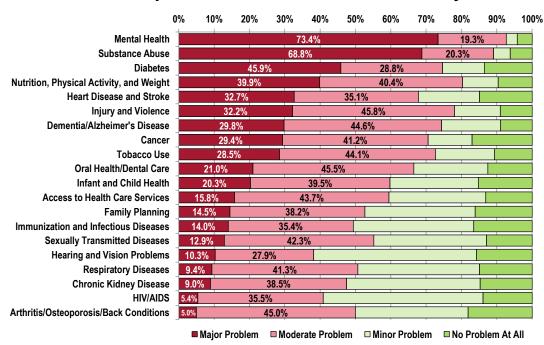
Where should we focus our efforts to make Yellowstone County a healthier community?



Top Concerns of Community Key Informants

In the Online Key Informant Survey, community stakeholders were asked to rate the degree to which each of 20 health issues is a problem in the community. With an impressive community response rate of 64.7%, the following chart summarizes participant responses.

Key Informants: Relative Position of Health Topics as Problems in the Community



(Note that these ratings alone do not establish priorities for this assessment, but rather are one of several data inputs considered for the prioritization process described on the following page.)

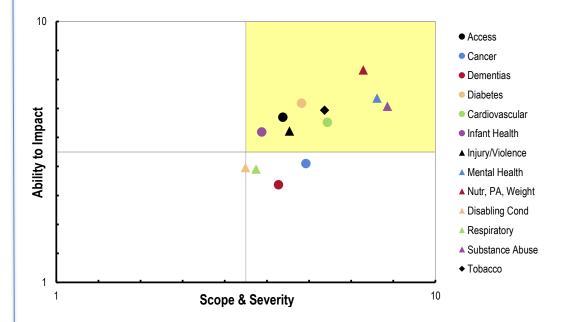
Prioritization of Community Needs

On Thursday, November 10, 2016, The Alliance convened a group of 110 community stakeholders (representing a cross-section of community-based agencies and organizations) to evaluate, discuss and prioritize health issues for community, based on findings of this Community Health Needs Assessment. Professional Research Consultants began the meeting with a presentation of key findings from the assessment, highlighting the significant health issues identified from the research (see Areas of Opportunity above and below).

Following the data review, PRC answered questions and facilitated a prioritization exercise in which participants rated each of the presented health issues along two criteria:

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

Individuals' ratings for each criteria were averaged for each tested health issue, and then these composite criteria scores were averaged to produce an overall score. Plotting these overall scores in a matrix illustrates the intersection of the Scope & Severity and the Ability to Impact scores. Below, those issues placing in the upper right (shaded) quadrant represent health needs rated as most severe, with the greatest ability to impact.



- Yellowstone County adults' ratings of their overall health and mental health are less favorable than found in the 2005 baseline survey.
- Health status is not universal across population segments. At-risk groups in Yellowstone County include:
 - Low-income residents*
 - 24.1% "fair/poor" overall health
 - 22.1% "fair/poor" mental health
 - 43.0% with activity limitations
 - Adults Age 40 to 64
 - 22.0% "fair/poor" overall health
 - 36.9% with activity limitations
 - Adults Under Age 40
 - 17.5% "fair/poor" mental health

Self-Reported Health Status

Overall Health

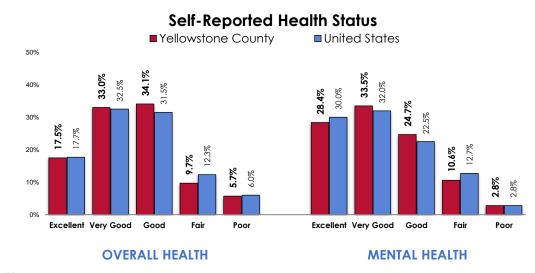
While most residents give favorable evaluations of their overall health, 15.4% believe that their overall health is "fair" or "poor."

- Similar to national findings.
- "Fair/poor" responses are statistically similar to what was found in 2010-11 and 2013-14, but significantly above what was found in the baseline 2005-06 survey (10.5%).

Mental Health

Again, most residents believe their overall mental health is "excellent," "very good," or "good;" however, 13.4% rate their mental health is "fair" or "poor."

- Similar to the "fair/poor" response reported nationally.
- Has increased significantly and consistently since 2005 (6.9%).



Also note:

- 25.3% of Yellowstone County adults have been diagnosed with a depressive disorder by a physician.
- 31.0% of Yellowstone County adults have had two or more years in their lives when they
 felt depressed or sad on most days, although they may have felt okay sometimes
 (symptoms of chronic depression).
- 14.2% of Yellowstone County adults acknowledge having considered attempting suicide at some point which is a significant increase from 2005 findings (8.1%).

Between 2012 and 2014, there was an annual average age-adjusted suicide rate of 22.8 deaths per 100,000 population in Yellowstone County.

Similar to the statewide rate, but much higher than the national rate (12.7).

Activity Limitations

A total of 29.6% of Yellowstone County adults are limited in some way in some activities due to a physical, mental or emotional problem.

• These are most often attributed to musculoskeletal issues, such as back/neck problems, fractures or bone/joint injuries, arthritis/rheumatism, or difficulty walking.

^{* &}quot;Low-income" is defined here as persons in households with incomes below 200% of the Federal Poverty Level (FPL), equivalent to \$48,500 or less for a family of four.

- While the proportion of adults with health insurance has improved, residents are finding it more difficult to find doctors or get doctor appointments when needed.
- In all, 42.0% of Yellowstone County adults report difficulty or delay in obtaining healthcare services in the past year due to one or more of the seven tested barriers.

Population groups with greater access difficulties in Yellowstone County include:

- Adults under age 65.
- Low-income residents
- In the online key informant survey, some of the major concerns included:
 - Affordability
 - Lack of transportation
 - Limited number of primary care providers
 - Large homeless population

Access to Healthcare Services

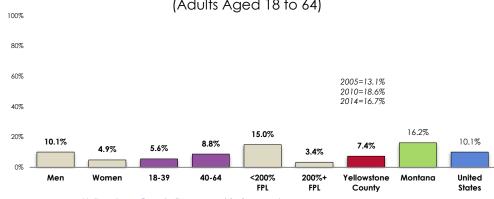
Health Insurance Coverage

7.4% of Yellowstone County adults aged 18 to 64 have no insurance coverage for healthcare expenses (neither private nor government-sponsored coverage); this is statistically similar to the national average, and lower than 2010-11 and 2013-14 findings.

Lack of coverage increases to 15.0% for those who earn less than 200% of the federal poverty level (equivalent to \$48,500 for a family of four).

Lack Health Insurance Coverage

(Adults Aged 18 to 64)



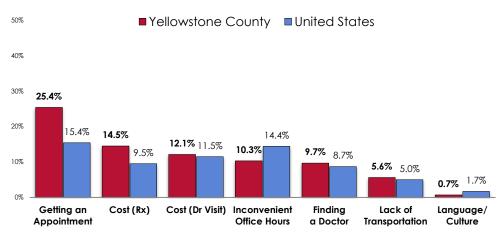
Yellowstone County Demographic Segments

Other Barriers to Access

Many Yellowstone County adults report some type of difficulty or delay in obtaining healthcare services in the past year.

- 25.4% did not see a doctor in the past year because they were not able to get an appointment when needed. This is a significant increase from findings in 2005-06 (14.2%), 2010-11 (12.7%), and 2013-14 (18.7%).
- 11%-15% did not go to the doctor or did not get a needed prescription in the past year because they couldn't afford it.

Barriers to Access Prevented Medical Care in the Past Year



- Yellowstone County residents are more likely than Americans overall to have a particular doctor's office or clinic that they go to for routine medical care.
 - Still, nearly 1 out of 5 adults does not have a specific source of ongoing care.
- Children in Yellowstone County are more likely than adults to have had a routine medical check-up in the past year.
 - Still, nearly 1 out of 3 adults and 1 out of 6 children have not had routine care in the past year.
- Key informants agree that dental care in Yellowstone County is lacking for those who do not have the means to pay for it.

It was also noted that finding a dentist who will take Medicaid or Medicare is a challenge and even those with health insurance often go without dental care because it isn't covered.

Access to Healthcare Services (continued)

Routine Medical Care

Adults

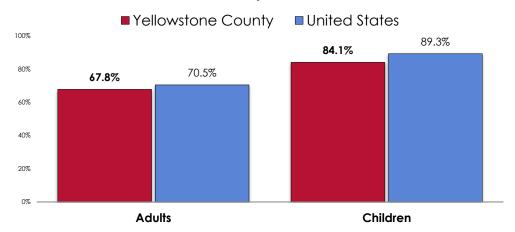
81.3% of Yellowstone County adults have a regular place they go for routine health needs. This is better than found nationally (74.0%), but far from reaching the Healthy People 2020 target of 95% or higher. It also has not changed significantly over time.

67.8% of Yellowstone County adults visited a physician for a routine checkup in the past year, compared to 70.5% nationally. In Yellowstone County, this has improved significantly from the 57.2% found in 2005-06 (and is similar to 2010-11 and 2013-14 findings).

Children

84.1% of surveyed parents report that their child has had a routine checkup in the past year, statistically similar to the prevalence found nationally. This also has increased significantly in Yellowstone County since 2005-06 (72.6%) but is similar to 2010-11 and 2013-14 findings.

Have Visited a Physician for a Routine Checkup Within the Past Year



Routine Dental Care

Adults

68.0% of county adults visited a dentist or dental clinic (for any reason) in the past year, statistically similar to national findings. This is also statistically similar to what was found in all previous surveys.

• This drops to 54.2% among low-income adults in Yellowstone County.

3 in 10 adults (30.3%) have no dental insurance to help with dental care costs, similar to national findings.

Children

88.1% of parents report that their child (aged 2 to 17) has been to a dentist or dental clinic within the past year, statistically similar to the prevalence found nationally, and statistically higher than reported in Yellowstone County in 2005-06 (78.1%) and 2013-14 (75.1%).

Age-Adjusted Cancer Death Rates by Leading Sites (2012-2014 Annual Average Deaths per 100,000 Population)

	Yellowstone County	MT	US
Lung Cancer	41.5	39.7	43.4
Prostate Cancer	20.7	20.0	19.2
Female Breast Cancer	15.4	20.0	20.9
Colorecta Cancer	l 15.4	13.7	14.6

Key Findings

- Cancers are the #2 leading cause of death in Yellowstone County (2014), accounting for19.8% of all deaths.
- While the overall county ageadjusted death rate for (all) cancer is similar to the national rate, specific rates for colorectal and prostate cancers are higher.
- There is opportunity to promote age-appropriate and gender-specific cancer screenings among Yellowstone County adults.
 - Pap smear testing is significantly below the national level.
 - Mammography screening level in women 50-74 (76.4% with a mammogram in the past 2 years) is statistically similar to the national level (80.3%), but has decreased significantly since the 2005 study (86.9%).

Cancer

Cancer Deaths

Cancers account for 19.8% of deaths in Yellowstone County (2014 deaths).

Lung cancer is by far the leading cause of cancer deaths in the county. Other leading sites include prostate cancer among men, breast cancer among women, and colorectal cancer (both genders).

The Yellowstone County age-adjusted death rates for prostate cancer and colorectal cancer are higher than the corresponding national rates; colorectal cancer mortality is also higher than found across Montana overall.

Cancer Prevalence & Risk

In Yellowstone County, 7.2% of adults have had a skin cancer diagnosis, and 8.3% have been diagnosed with another (non-skin) type of cancer. Each of these is statistically similar to national prevalence levels, and each is statistically unchanged since 2005-06.

Nutrition

Research has shown that adequate fruit/vegetable consumption reduces the risk for some cancers, including colorectal cancer.

 Just three of ten Yellowstone County adults (30.8%) report eating the recommended 5 or more servings of fruits and/or vegetables per day (lower among men and among adults age 40 and older). Overall, the local finding is similar to the national finding.

Tobacco Use

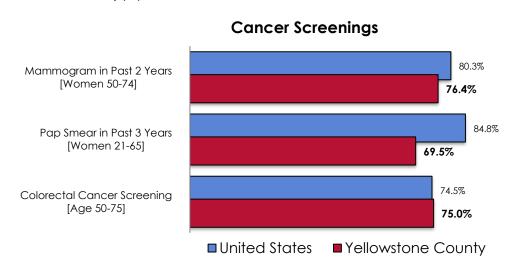
19.6% of Yellowstone County adults currently smoke cigarettes – this is similar to statewide findings, but statistically worse than national findings (14.0%).

• Further, 4.8% of adults use e-cigarettes, and 3.5% use smokeless tobacco. These proportions are similar to national findings and e-cigarette usage is highest among young adults

A total of 68.4% of Yellowstone adults who use tobacco (cigarettes, e-cigarettes, smokeless tobacco) were advised by a healthcare professional in the past year to stop using these products.

Cancer Screenings

The chart below outlines the prevalence levels of certain types of cancer screenings in the Yellowstone County population.



- Heart disease is the #1 leading cause of death in Yellowstone County (2014), accounting for 20.1% of all deaths.
 - Stroke is the #4 leading cause, accounting for another 5.5%.
- The Yellowstone County age-adjusted death rates for heart disease and for stroke have declined, mirroring state and national trends.
- The prevalence of high blood pressure has increased significantly in Yellowstone County — from 26.1% of the adult population in 2005-06, to now affecting 37.3% of the adult population.
- 84.2% of Yellowstone County adults exhibit one or more of the following cardiovascular (heart disease & stroke) risk factors:
 - High Blood Pressure
 - High Blood Cholesterol
 - Cigarette Smoking
 - Physical Inactivity
 - Overweight/Obesity

Heart Disease & Stroke

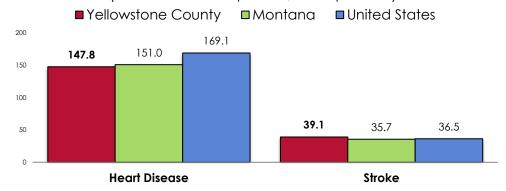
Heart Disease & Stroke

Together, heart disease and stroke account for 25.6% of deaths in Yellowstone County (2014 deaths).

Heart disease and stroke death rates have declined consistently since 2005.

Age-Adjusted Death Rates: Heart Disease & Stroke

(2012-2014 Deaths per 100,000 Population)



Known Risks for Heart Disease & Stroke

High Blood Pressure & High Blood Cholesterol

In Yellowstone County, 37.3% of adults have been told they have high blood pressure, and 30.0% have been told they have high cholesterol.

• The prevalence of high blood pressure in Yellowstone County has increased significantly from the 26.1% reported in 2005.

Cigarette Smoking

19.6% of Yellowstone County adults currently smoke cigarettes – this is similar to statewide findings, but statistically worse than national findings (14.0%). It has increased from the 13.8% and 11.7% reported in 2010-11 and 2013-14 respectively, but is similar to the 2005-06 prevalence.

Physical Inactivity

18.0% of Yellowstone County adults report no leisure-time physical activity in the past month (better than the 27.9% reported nationally, and significantly lower than all previous local findings of 26.3%, 22.4% and 23.7%).

24.3% of adults meet physical activity recommendations (in terms of frequency/intensity/duration of aerobic activity and frequency of strengthening activity); this is similar to national findings (23.6%).

5.8% of adults say that they wanted to be more physically active in the past year but felt unsafe due to factors such as crime or traffic. This is down significantly from the 2013-14 findings (10.8%) and is similar to that found in 2010-11.

Overweight & Obesity

65.6% of Yellowstone County adults are overweight, based on reported heights and weights.

- Statistically similar to that found nationwide.
- Statistically similar to 2005-06 and 2013-14 local findings, but lower than the 72.9% found in Yellowstone County in 2010-11.

Motor vehicle crashes accounted for 32.6% of unintentional injury deaths in Yellowstone County between 2012 and 2014.

The Yellowstone County age-adjusted death rate for motor vehicle crash deaths is below the statewide death rate, but above the national rate.

- Seat belt use remains below the national average.
- Firearm-related deaths are higher than reported nationally.
- One-half (50.5%) of children do not "always" wear a protective helmet when riding a bicycle.

Injury

Unintentional Injury Deaths

Unintentional injury is the #6 leading cause of death in Yellowstone County, accounting for 4.6% of deaths in 2014.

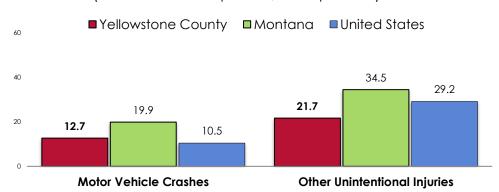
Motor Vehicle Crashes

Motor vehicle crashes make up 32.6% of all unintentional injury deaths.

The death rate specific to motor vehicle crashes is considerably lower in Yellowstone County than it is statewide; however, it is higher than found nationwide. It is similar to the Healthy People 2020 target of 12.4 or less.

Age-Adjusted Death Rate: Unintentional Injury

(2012-2014 Deaths per 100,000 Population)



80.7% of Yellowstone County adults report "always" wearing a seat belt when driving or riding in a vehicle (significantly above the 72.1% found statewide, but below the 87.9% found nationally). It also has not changed significantly in the county since 2005. The Healthy People 2020 target is to raise this to 92.0% or higher.

Other Unintentional Injury Indicators

Firearm Safety

A majority (56.8%) of Yellowstone County adults has a firearm kept in or around their home (53.2% among households with children). Nationally, a much lower 33.8% of adults have a firearm in the home.

 Among Yellowstone County households with firearms, 16.6% report that there is at least one weapon that is kept unlocked and loaded (similar to national findings).

The county age-adjusted death rate attributed to firearms (17.0 deaths per 100,000 population) is close to what is found statewide (16.5), but far above the national rate (10.4) and the Healthy People 2020 target (9.3 or lower).

Helmet Use

Among school-aged children (age 5-17) who ride bicycles, 49.5% are reported by parents to "always" wear a helmet when doing so. This has not changed significantly since 2005.

- While most mental health status indicators in the survey are similar to those found nationally, the prevalence of diagnosed depressive disorders is significantly higher.
- The proportion of Yellowstone County adults who have sought help for mental health is higher than found nationally and has increased significantly since 2005.
- Suicide rates remain quite high.

Key informants identified the lack of mental health treatment options, resources and personnel as a high priority issue for Yellowstone County.

They also acknowledged that stigma remains a significant barrier for residents.

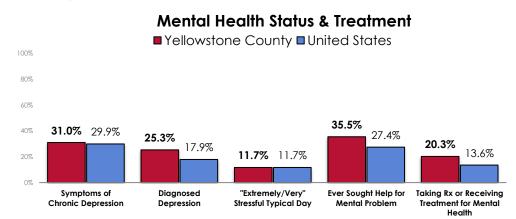
Mental Health

Mental Health Status & Treatment

31.0% of Yellowstone County adults describe having two or more years in their lives when they felt sad or depressed on most days (symptoms of chronic depression). This is similar to what is found nationally, and has not changed significantly since 2005.

However, 1 in 4 adults (25.3%) reports having been diagnosed with a depressive disorder by a physician at some point in their lives. This is higher than what is found nationally. The proportion of all Yellowstone County adults who have sought help for a mental problem is significantly higher than the national rate, as is the proportion currently taking medication or receiving treatment.

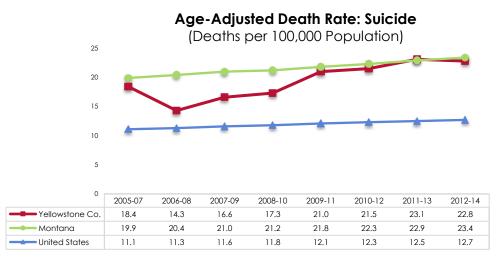
 Overall, the proportion of adults who have sought help for mental health has increased significantly since 2005 (24.1%).



Suicides

Between 2012 and 2014, there was an annual average age-adjusted suicide rate of 22.8 deaths per 100,000 population in Yellowstone County.

 Suicide rates in Yellowstone County and in Montana have been consistently higher than national rates and have continued to increase.



14.2% of adults in Yellowstone County acknowledge having contemplated attempting suicide at some point in their lives. This has increased significantly since 2005 (8.1%).

 Suicide ideation (ever) is significantly higher among respondents reporting depressive disorders, chronic depression and among younger adults (under age 40).

- While fruit/vegetable consumption is comparable to national findings, 70% of county adults still do not get the recommended number of daily servings.
- Nearly 1 out of 4 county adults says that it is difficult for them to get affordable, fresh produce.
 - Women and adults age 40-64 are more likely to report difficulties.
- Physical activity levels in Yellowstone County appear to have improved over the years, although only 1 in 4 adults currently meet recommended guidelines.
 - Physical activity among children has also improved and appears better than found nationally.
- Key informants mention a lack of nutritional knowledge, poor access to healthful foods, and a built environment that does not always support healthy living as significant concerns.

Nutrition, Physical Activity & Weight

Nutrition

30.8% of Yellowstone County adults report eating five or more servings of fruits and/or vegetables per day (similar to the national average). Consumption has decreased significantly since 2010-11 (40.6%) and 2013-14 (40.1%), but is similar to the 2005-06 finding.

23.3% of Yellowstone County adults report that it is "very" or "somewhat" difficult for them to access affordable, fresh fruits and vegetables.

Also, 29.8% of adults report having seven or more sugar-sweetened beverages in the past week (similar to what was reported nationwide).

Overall, 16.9% of residents are "food insecure", having run out of food in the past year and/or been worried about running out of food.

Physical Activity

18.0% of Yellowstone County adults report no leisure-time physical activity in the past month (similar to statewide findings, better than national findings [27.9%], and statistically better than all previous survey findings).

• Older adults (65+) and lower income residents more often report no physical activity in the past month (25.9% and 31.8%, respectively).

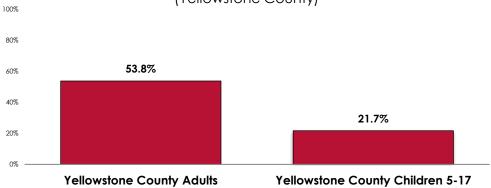
24.3% of Yellowstone County adults meet activity recommendations (participating in adequate levels of aerobic and muscle strengthening activities). This is similar to national findings.

- A total of 68.6% of Yellowstone County adults attempted to increase their physical activity in the past year through everyday behavioral changes (e.g., taking the stairs, parking farther from destinations, walking or biking instead of driving, etc.).
- 5.8% of survey respondents report that at some point in the past year, they wanted to be
 more physically active but were not because things like traffic or crime made them feel
 unsafe. This is more often reported among women.
- 6.9% report that poor weather "always"/"nearly always" negatively affects their decision to be physically active outdoors.

70.8% of Yellowstone County children aged 2-17 had at least 60 minutes of physical activity on each of the previous seven days. This is much better than found nationally (47.9%) and has increased significantly since 2013-14 (42.8%).

53.8% of adults and 21.7% of school-age children have three or more hours per day of total screen time for entertainment (television, computer, video games, Internet, etc.).

Three or More Hours Time per Day of Total Screen [TV, Computer, Video Games, Etc.] for Entertainment (Yellowstone County)



- Most adults (65.6%) are currently overweight or obese, similar to statewide and national findings.
- Overweight and obese adults are more likely to report a number of adverse health conditions, such as:
 - High blood pressure
 - Activity limitations
 - High cholesterol
 - Chronic back pain
 - Arthritis
 - "Fair/poor" overall health
 - "Fair/poor" mental health
- 28.8% of Yellowstone County children aged 5 to 17 are overweight or obese.
- Online key informants are concerned about unhealthy eating habits in the community. They believe that poor nutrition stems largely from the reliance on fast food establishments, due to busy lifestyles.
- Key informants rated diabetes as a top concern in their community, and many perceive the biggest challenges for those with diabetes to be diet, exercise and weight management.

Nutrition, Physical Activity & Weight (continued)

Body Weight

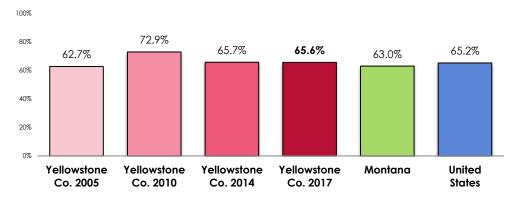
Adults

Nearly two-thirds (65.6%) of Yellowstone County adults are overweight. This proportion is statistically similar to statewide and national findings.

 Locally, the proportion has decreased significantly since 2010-11, but is similar to the 2005-06 and 2013-14 survey results.

Prevalence of Overweight

(Adults Overweight or Obese, Body Mass Index of 25.0+)



34.4% of county adults are considered obese [included in the prevalence of overweight reported above], higher than what is found statewide (26.4%) and an increase since 2005 (23.9%).

• In Yellowstone County, obesity is even more prevalent among men (39.5% vs. 29.5% among women).

Children

Based on the heights/weights reported by surveyed parents, 28.8% of Yellowstone County children aged 5 to 17 are overweight or obese (≥85th percentile).

• This is statistically similar to what is found nationally and has not changed significantly in Yellowstone County since 2005 (33.8%).

- Chronic lower respiratory disease (CLRD), which includes conditions such as emphysema and chronic bronchitis, is the #3 leading cause of death in Yellowstone County.
- While county death rates for CLRD have decreased slightly over the past several years, they have been consistently higher than statewide rates, and much higher than national rates.
- 9.5% of Yellowstone County adults currently have asthma, and 8.4% have been diagnosed with chronic obstructive pulmonary disease (COPD). Each of these is similar to national findings, and has not changed significantly in the county since 2005.

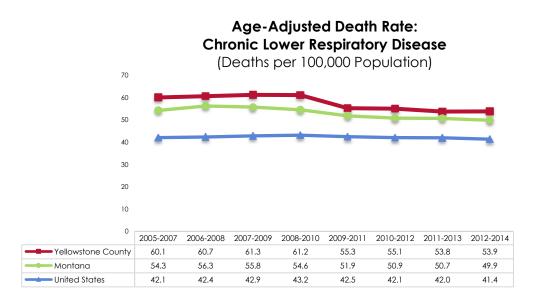
Respiratory Disease

Chronic Lower Respiratory Disease (CLRD)

Chronic lower respiratory disease (CLRD) accounts for 7.5% of (2014) deaths in Yellowstone County.

 Between 2012 and 2014, there was an annual average age-adjusted CLRD mortality rate of 53.9 deaths per 100,000 population in Yellowstone County, which is higher than found statewide and nationally.

Most CLRD is attributed to cigarette smoking – 19.6% of Yellowstone County adults currently smoke cigarettes.



Other Respiratory Indicators

9.5% of Yellowstone County adults have asthma, as do 12.5% of children.

• Childhood asthma has increased significantly since 2013-14 (4.4%), but is similar to the 2010-11 prevalence.

8.4% of Yellowstone County adults suffer from chronic obstructive pulmonary disease (COPD), similar to state and national prevalence levels.

Excessive alcohol use can lead to increased risk of health problems such as liver disease or unintentional injuries.

1 out of 5 county adults is considered to be an excessive drinker. Excessive drinking is more common among young adults in Yellowstone County.

- The Yellowstone County age-adjusted death rate for cirrhosis and liver disease is higher than the national rate and has been increasing since 2009.
- In all, 45.5% of residents report being negatively affected by substance abuse (whether their own or someone else's) which is notably higher than national findings.
- Key informants (who rated this as a "major problem") clearly identified alcohol as the most problematic substance abused in the community.

This was followed by methamphetamine/other amphetamines and prescription medications.

These community members noted a lack of access to substance abuse treatment, mainly due to cost.

Substance Abuse

Alcohol Use

Nearly three out of five Yellowstone County adults drink alcohol (60.5% have had at least one drink in the previous month). This is on par with the state and national averages.

Regarding alcohol-related risk behaviors:

- 20.3% of Yellowstone County adults are excessive drinkers (averaging >2 drinks/day in the past month for men or >1 for women, and/or 5+ drinks on any one occasion in the past month for men or 4+ for women). This is similar to the national prevalence.
- 2.3% of Yellowstone County adults acknowledge having driven a vehicle in the past
 month after they had perhaps too much to drink (similar to national findings). However,
 note that this translates to roughly 2,800 county adults who have driven drunk in the past
 month.

Cirrhosis/Liver Disease Deaths

Yellowstone County mortality for cirrhosis/liver disease (12.9 deaths per 100,000 in 2012-2014) is close the statewide rate (12.6), but higher than the national rate (10.2). The Healthy People 2020 target is 8.2 or lower.



0	2005-2007	2006-2008	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013	2012-2014
Yellowstone County	11.4	11.6	10.7	10.3	9.2	10.2	11.4	12.9
Montana	11.6	11.8	12.4	11.9	11.5	11.5	12.3	12.6
United States	8.9	9.0	9.1	9.2	9.4	9.7	9.9	10.2

Illicit Drug Use

Just 1.0% of Yellowstone County adults acknowledge using an illicit drug in the past month (including use of illegal substances or of someone else's prescription medication).

- Lower than found nationally (3.0%).
- As a self-reported measure and because this indicator reflects potentially illegal behavior it is reasonable to expect that it might be underreported, and that actual prescription illicit drug use in the community is likely higher.

A total of 3.7% of Yellowstone County adults report that they have sought professional help for an alcohol or drug problem at some point in their lives.

A much higher 45.5% report that they have been personally negatively impacted by substance abuse (whether their own abuse or that of another).

• This is notably higher than the national percentage (32.2%) and disproportionately affects women and adults age 40 to 64.

- Low-income residents* experience poorer health status or greater health risk in several areas related to the following:
 - Access to medical & dental care
 - Overall health status
 - Mental health status
 - Unhealthy behaviors
 - Chronic conditions
- Health insurance coverage remains out of reach for many residents of Yellowstone County – not only for the poorest of the poor, but also for many families living well above the poverty level.

Overarching Issue: Income

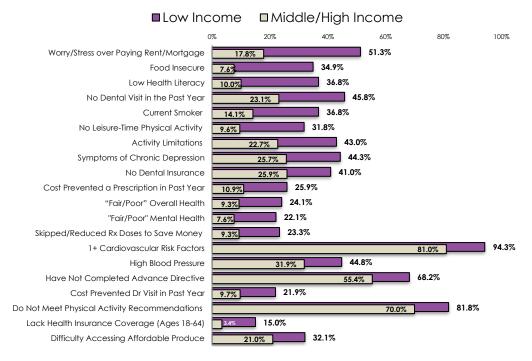
As you review these issues and the related findings, it is important to recognize that the overarching issue of income disparity strongly impacts most of the issues discussed. The health status and experience of low-income families is quite different and typically less favorable than for residents with higher incomes.

Understanding this disparity will help us better understand many of the health issues outlined throughout this assessment.

Income

For low-income* residents in the county, the following represent some of the greatest disparities found (vs. those at higher incomes):

Income Disparity in Selected Yellowstone County Health Indicators



^{* &}quot;Low-income" is defined here as households with incomes below 200% of the Federal Poverty Level (FPL), equivalent to \$48,500 or less for a family of four.

Summary Tables

The following tables provide an overview of indicators in Yellowstone County, as well as trend data. These data are grouped to correspond with the Focus Areas presented in Healthy People 2020.

Reading the Data Summary Tables

Comparisons to Benchmark Data

- In the following charts, Yellowstone County results are shown in the larger, blue column.
- The columns to the right of the Yellowstone County column provide trending, as well as comparisons between the county and any available state and national findings, and Healthy People 2020 targets. Symbols indicate whether Yellowstone County compares favorably (⑤), unfavorably (⑥), or comparably (⑥) to these external data.

Note that blank table cells signify that data are not available or are not reliable for that area and/or for that indicator.

Trending

- Trending is shown in the pink columns to the far right of the following tables. For the purposes of these tables:
 - Trending analyses for survey-derived indicators are performed among all consecutive data years and also between the most current (2017) data and baseline (earliest available) data. Significance is determined based on the associated confidence intervals.
 - For secondary data indicators (e.g., deaths, births, infectious disease), trends represent point-to-point changes between the most current reporting period and the earliest presented in this report (typically representing the span of 7-10 years. For these, differences are marked as significant if there is a variance greater than ±5% between the current and baseline measures.

Additional detail (data descriptions and source information) around these indicators can be found in the full report for the 2016-17 Community Health Needs Assessment for Yellowstone County. To learn how to view the full report and data, please contact Heather Fink, Healthy By Design, at (406) 247-3272.

		Yellowstone County vs. Benchmarks				
Social Determinants	Yellowstone County	vs. MT	vs. US	vs. HP2020		
Linguistically Isolated Population (Percent)	0.6	0.4	4.7			
Population in Poverty (Percent)	12.5	15.3	15.6			
Population Below 200% FPL (Percent)	31.2	36.2	34.5			
Children Below 200% FPL (Percent)	40.5	44.5	44.2			
No High School Diploma (Age 25+, Percent)	7.6	<i>₹</i> 3 7.6	13.7			
Unemployment Rate (Age 16+, Percent)	3.3	4.1	5.3			
% Worry/Stress Over Rent/Mortgage in Past Year	27.7					
		better		worse		

	Yellowstone County Trends							
2006	2011	2014	2017	Baseline vs. Current Data §				
				(2.9 vs. 3.3)*				
		ns, each yea ne prior surve		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)				

		Yellowstone County vs. Benchmarks				
Overall Health	Yellowstone County	vs. MT	vs. US	vs. HP2020		
% "Fair/Poor" Physical Health	15.4		Ê			
		15.4	18.3			

Yellowstone County Trends								
2006	2011	2014	2017	Baseline vs. Current Data §				
10.5	17.1		5 15.4	(10.5 vs. 15.4)				

		Yellowstone County vs. Benchmarks				
Overall Health (continued)	Yellowstone County	vs. MT	vs. US	vs. HP2020		
% Activity Limitations	29.6	23.1	20.0			
		better		worse		

Yellowstone County Trends							
2006	2011	2014	2017	Baseline vs. Current Data §			
				给			
24.3	25.7	22.4	29.6	(24.3 vs. 29.6)			
		ns, each yea ne prior surve	§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)				

		Yellowstone County vs. Benchmarks				
Access to Health Services	Yellowstone County	vs. MT	vs. US	vs. HP2020		
% [Age 18-64] Lack Health Insurance	7.4	16.2		0.0		
% Difficulty Accessing Healthcare in Past Year (Composite)	42.0		35.0			
% Inconvenient Hrs Prevented Dr Visit in Past Year	10.3		14.4			
% Cost Prevented Getting Prescription in Past Year	14.5		9.5			
% Cost Prevented Physician Visit in Past Year	12.1		£			
% Difficulty Getting Appointment in Past Year	25.4		15.4			
% Difficulty Finding Physician in Past Year	9.7		给			
			8.7			

Yellowstone County Trends							
2006	2011	2014	2017	Baseline vs. Current Data §			
13.1	18.6	16.7	7.4	(13.1 vs. 7.4)			
33.9		35.3	42.0	(33.9 vs. 42.0)			
10.7	8.3	11.6	10.3	(10.7 vs. 10.3)			
				£			
13.5	12.6	12.0	14.5	(13.5 vs. 14.5)			
				£			
13.4	13.7	16.0	12.1	(13.4 vs. 12.1)			
14.2	12.7	18.7	25.4	(14.2 vs. 25.4)			
4.3	6.2	8.0	9.7	(4.3 vs. 9.7)			

		Yellowstone County vs. Benchmarks				Yellowstone County Trends				
Access to Health Services (continued)	Yellowstone County	vs. MT	vs. US	vs. HP2020	200	6 2011	2014	2017	Baseline vs. Current Data §	
% Transportation Hindered Dr Visit in Past Year	5.6							D);		
			5.0		3.8	5.6	5.9	5.6	(3.8 vs. 5.6)	
% Language/Culture Prevented Care in Past Year	0.7									
			1.7							
% Skipped Prescription Doses to Save Costs	13.9		ớ							
			10.2		14.	3 17.3	14.1	13.9	(14.3 vs. 13.9)	
% Difficulty Getting Child's Healthcare in Past Year	4.8		会							
			3.9		3.2	2.0	2.8	4.8	(3.2 vs. 4.8)	
% Have Completed Advance Directive Documents	41.3									
			33.7							
% Low Health Literacy	17.3									
			23.3							
Primary Care Doctors per 100,000	83.0									
		76.6	74.5							
% [Age 18+] Have a Specific Source of Ongoing Care	81.3									
			74.0	95.0	84.	82.0	81.7	81.3	(84.0 vs. 81.3)	
% [Age 18-64] Have a Specific Source of Ongoing Care	79.8									
			73.1	89.4	84.	81.8	78.2	79.8	(84.0 vs. 79.8)	
% [Age 65+] Have a Specific Source of Ongoing Care	85.4									
			76.8	100.0	85.	82.7	97.7	85.4	(85.0 vs. 85.4)	
% Have Had Routine Checkup in Past Year	67.8	会								
		63.6	70.5		57.	62.9	64.7	67.8	(57.2 vs. 67.8)	

	Yellowstone	Yellowstone County vs. Benchmarks				
Access to Health Services (continued)	County	vs. MT	vs. US	vs. HP2020		
% Child Has Had Checkup in Past Year	84.1					
			89.3			
% Two or More ER Visits in Past Year	6.1					
			8.5			
% Rate Local Healthcare "Fair/Poor"	10.7					
			14.2			
			ớ			
		better	similar	worse		

Yellowstone County Trends							
2006	2011	2014	2017	Baseline vs. Current Data §			
72.6	84.3	78.3	84.1	(72.6 vs. 84.1)			
7.3	8.6	5.8	6.1	(7.3 vs. 6.1)			
6.7	8.3	11.0	10.7	(6.7 vs. 10.7)			
	it pink colum ompared to th		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a 1), the years vary (typically spanning 7-10 years)				

		Yellowstone County vs. Benchmarks				
Arthritis, Osteoporosis & Chronic Back Conditions	Yellowstone County	vs. MT	vs. US	vs. HP2020		
% [50+] Arthritis/Rheumatism	38.1					
			32.0			
% [50+] Osteoporosis	12.4					
			8.7	5.3		
% Sciatica/Chronic Back Pain	27.7					
			19.4			
% Caregiver to a Friend/Family Member	24.4					
			20.9			
			Â			
		better	similar	worse		

Yellowstone County Trends						
2006	2011	2014	Baseline vs. Current Data §			
36.3	35.6	39.3	38.1	(36.3 vs. 38.1)		
11.9	9.2	10.9	12.4	(11.9 vs. 12.4)		
22.3	20.0	19.8	27.7	(22.3 vs. 27.7)		
		ns, each yea ne prior surve	§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)			

		Yellowstone County vs. Benchmarks			Yellowstone County Trends					
Cancer	Yellowstone County	vs. MT	vs. US	vs. HP2020		2006	2011	2014	2017	Baseline vs. Current Data §
Cancer (Age-Adjusted Death Rate)	158.1									
		155.2	163.6	161.4						(172.4 vs. 158.1)*
Lung Cancer (Age-Adjusted Death Rate)	41.5	£								
		39.7	43.4	45.5						
Prostate Cancer (Age-Adjusted Death Rate)	20.7									
		20.0	19.2	21.8						
Female Breast Cancer (Age-Adjusted Death Rate)	15.4									
		20.0	20.9	20.7						
Colorectal Cancer (Age-Adjusted Death Rate)	15.4									
		13.7	14.6	14.5						
Prostate Cancer Incidence per 100,000	149.8									
		133.5	131.7							
Female Breast Cancer Incidence per 100,000	120.8	会								
		124.2	123.0							
Lung Cancer Incidence per 100,000	61.2	会	ớ							
		58.6	63.7							
Colorectal Cancer Incidence per 100,000	40.1	会								
		41.3	41.9							
Cervical Cancer Incidence per 100,000	7.4		给							
		6.5	7.7							
% Skin Cancer	7.2	会								
		6.8	7.7			5.5	8.4	6.8	7.2	(5.5 vs. 7.2)

		Yellowstone County vs. Benchmarks			
Cancer (continued)	Yellowstone County	vs. MT	vs. US	vs. HP2020	
% Cancer (Other Than Skin)	8.3		Â		
		7.5	7.7		
% [Women 50-74] Mammogram in Past 2 Years	76.4	给			
		73.0	80.3	81.1	
% [Women 21-65] Pap Smear in Past 3 Years	69.5				
		81.3	84.8	93.0	
% [Age 50+] Sigmoid/Colonoscopy Ever	78.3				
		66.8	75.6		
% [Age 50+] Blood Stool Test in Past 2 Years	31.5		会		
		10.7	31.8		
% [Age 50-75] Colorectal Cancer Screening	75.0		会		
		62.4	74.5	70.5	
		better	similar	worse	

Yellowstone County Trends							
2006	2011	2014	2017	Baseline vs. Current Data §			
6.4	5.7	7.5	8.3	(6.4 vs. 8.3)			
				•			
86.9	76.4	76.1	76.4	(86.9 vs. 76.4)			
	给	给	给	\(\frac{1}{12} \)			
78.8	80.8	74.0	69.5	(78.8 vs. 69.5)			
62.6	76.0	68.2	78.3	(62.6 vs. 78.3)			
			含	£			
35.6	23.7	31.4	31.5	(35.6 vs. 31.5)			
		71.0	75.0	(71.0 vs. 75.0)			
	In the light pink columns, each year's data is compared to the prior survey.			§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)			

		Yellowstone County vs. Benchmarks				
Chronic Kidney Disease	Yellowstone County		vs. US	vs. HP2020		
Kidney Disease (Age-Adjusted Death Rate)	8.6	9.3	13.2			
% Kidney Disease	1.4	<i>€</i> 2.6	3.6			
		better		worse		

Yellowstone County Trends							
2006	2011	Baseline vs. Current Data §					
				(10.8 vs. 8.6)*			
U	In the light pink column compared to the			§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)			

		Yellowstone County vs. Benchmarks				
Dementias, Including Alzheimer's Disease	Yellowstone County	vs. MT	vs. US	vs. HP2020		
Alzheimer's Disease (Age-Adjusted Death Rate)	33.1	20.2	24.2			
% [Age 45+] Increasing Confusion/Memory Loss in Past Yr	19.9		12.8			
		better		worse		

	Yellowstone County Trends								
2006	2011	2014	Baseline vs. Current Data §						
				(19.8 vs. 33.1)*					
		ns, each yea ne prior surve		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)					

	Yellowston	e County vs.	Benchmarks
Yellowstone County	vs. MT	vs. US	vs. HP2020
19.9			
9.2			20.5
	8.8	14.5	
10.1		5.7	
50.6		Ê	
		55.1	
	hottor	similar.	worse
	19.9 9.2 10.1	Yellowstone County vs. MT 19.9	County vs. MT vs. US 19.9 ☆ ↓ 19.3 21.1 9.2 ☆ 8.8 14.5 10.1 ↓ 5.7 ↓ 55.1 ♠

Yellowstone County Trends						
2006	2011	2014	2017	Baseline vs. Current Data §		
				会		
				(20.3 vs. 19.9)*		
8.7	12.1	8.6	9.2	(8.7 vs. 9.2)		
		7.1	10.1	(7.1 vs. 10.1)		
				£		
		51.8	50.6	(51.8 vs. 50.6)		
	In the light pink columns, each year's data is compared to the prior survey.			§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)		

		Yellowstone County vs. Benchmarks			
Family Planning	Yellowstone County	vs. MT	vs. US	vs. HP2020	
Births to Teenagers Under Age 20 (Percent)	6.3				
		7.0	7.1		
		better	similar	worse	

Yellowstone County Trends					
2006	2011	2014	2017	Baseline vs. Current Data §	
				(9.5 vs. 6.3)*	
In the light pink columns, each year's data is compared to the prior survey.				§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)	

		Yellowstone County vs. Benchmarks			
Hearing & Other Sensory or Communication Disorders	Yellowstone County	vs. MT	vs. US	vs. HP2020	
% Deafness/Trouble Hearing	11.4		给		
			8.6		
		better		worse	

Yellowstone County Trends						
2006	2011	2014	2017	Baseline vs. Current Data §		
				会		
9.7	9.7	12.1	11.4	(9.7 vs. 11.4)		
		ns, each yea ne prior surve		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)		

		Yellowstone	County vs.	Benchmarks
Heart Disease & Stroke	Yellowstone County	vs. MT	vs. US	vs. HP2020
Diseases of the Heart (Age-Adjusted Death Rate)	147.8	<i>≦</i> 151.0	169.1	156.9
Stroke (Age-Adjusted Death Rate)	39.1	35.7	36.5	34.8
% Heart Disease (Heart Attack, Angina, Coronary Disease)	6.7		6.9	
% Stroke	2.1	<i>€</i> 3 2.7		
% Blood Pressure Checked in Past 2 Years	95.4		93.6	92.6
% Told Have High Blood Pressure (Ever)	37.3	29.3	<i>≦</i> 36.5	26.9
% [HBP] Taking Action to Control High Blood Pressure	90.5		92.5	

	Yellowstone County Trends						
2006	2011	2014	2017	Baseline vs. Current Data §			
				(167.9 vs. 147.8)*			
				*			
				(48.2 vs. 39.1)*			
				£			
5.1	8.1	5.9	6.7	(5.1 vs. 6.7)			
3.3	2.3	3.3	2.1	(3.3 vs. 2.1)			
				£			
94.6	97.2	95.5	95.4	(94.6 vs. 95.4)			

26.1	32.4	33.7	37.3	(26.1 vs. 37.3)			
88.9	94.4	83.7	90.5	(88.9 vs. 90.5)			

	V II (Yellowstone	County vs.	Benchmarks
Heart Disease & Stroke (continued)	Yellowstone County	vs. MT	vs. US	vs. HP2020
% Cholesterol Checked in Past 5 Years	90.9	73.8	87.4	82.1
% Told Have High Cholesterol (Ever)	30.0			13.5
% [HBC] Taking Action to Control High Blood Cholesterol	82.7		<i>€</i> 3 84.2	
% 1+ Cardiovascular Risk Factor	84.2		<i>€</i> 3.0	
		better		worse

Yellowstone County Trends						
2006	2011	2014	2017	Baseline vs. Current Data §		
77.7	86.5	89.7	90.9	(77.7 vs. 90.9)		
28.5	28.6	25.7	30.0	(28.5 vs. 30.0)		
				£		
83.6	91.3	79.8	82.7	(83.6 vs. 82.7)		
89.1	87.4	81.7	84.2	(89.1 vs. 84.2)		
		ns, each yea ne prior surve		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)		

			Yellowstone County vs. Benchmarks			
HIV	Yellowstone County	vs. MT	vs. US	vs. HP2020		
HIV Prevalence per 100,000	95.7	46.4	353.2			
% [Age 18-44] HIV Test in the Past Year	14.8					
		better		worse		

Yellowstone County Trends					
2006	2011	2014	2017	Baseline vs. Current Data §	
9.1	12.4	8.4	14.8	(9.1 vs. 14.8)	
	in the light pink columns, each year's data is compared to the prior survey.		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)		

		Yellowstone County vs. Benchm		
Injury & Violence Prevention	Yellowstone County	vs. MT	vs. US	vs. HP2020
Unintentional Injury (Age-Adjusted Death Rate)	34.4	54.4	39.7	36.4
Motor Vehicle Crashes (Age-Adjusted Death Rate)	12.7	19.9	10.5	12.4
% "Always" Wear Seat Belt	80.7	72.1	87.9	92.0
% Child [Age 5-17] "Always" Wears Bicycle Helmet	49.5		<i>≨</i> 3 54.2	
[65+] Falls (Age-Adjusted Death Rate)	44.0	75.9	57.2	47.0
Firearm-Related Deaths (Age-Adjusted Death Rate)	17.0	<i>≦</i> 3 16.5	10.4	9.3
% Firearm in Home	56.8		33.8	
% [Homes With Children] Firearm in Home	53.2		31.0	
% [Homes With Firearms] Weapon(s) Unlocked & Loaded	16.6		<u>20.4</u>	
Homicide (Age-Adjusted Death Rate)	4.9	3.0	5.2	5.5
Violent Crime per 100,000	260.1	277.9	395.5	

	Ye	llowston	y Trends	
2006	2011	2014	2017	Baseline vs. Current Data §
				(35.5 vs. 34.4)*
				(**************************************
				会
76.8	78.3	78.6	80.7	(76.8 vs. 80.7)
				Æ
36.2	45.1	38.5	49.5	(36.2 vs. 49.5)
				(13.9 vs. 17.0)*
53.5	59.1	55.9	56.8	(53.5 vs. 56.8)
				\(\frac{1}{12} \)
55.0	65.2	66.0	53.2	(55.0 vs. 53.2)
9.9	14.0	9.7	16.6	(9.9 vs. 16.6)

		Yellowston	e County vs.	Benchmarks
Injury & Violence Prevention (continued)	Yellowstone County	vs. MT	vs. US	vs. HP2020
% Victim of Violent Crime in Past 5 Years	2.4		£	
			2.3	
% Victim of Domestic Violence (Ever)	15.3			
			15.1	
		*	É	
		better	similar	worse

	16	IIOWSLOII	e Count	y Trends
2006	2011	2014	2017	Baseline vs. Current Data §
				43
4.0	2.3	1.4	2.4	(4.0 vs. 2.4)
	14.7	15.8	15.3	(14.7 vs. 15.3)
		ns, each yea ne prior surve	§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)	

		Yellowstone	County vs.	Benchmarks
Maternal, Infant & Child Health	Yellowstone County	vs. MT	vs. US	vs. HP2020
No Prenatal Care in First Trimester (Percent)	22.4			
		26.7		22.1
Low Birthweight Births (Percent)	8.0			
		7.4	8.0	7.8
Infant Death Rate	6.8			
		5.8	5.9	6.0
		better	similar	worse

Yellowstone County Trends							
2006	2011	2014	2017	Baseline vs. Current Data §			
				(25.5 vs. 22.4)*			
				(7.0 vs. 8.0)*			
				(6.4 vs. 6.8)*			
		ns, each yea ne prior surve		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)			

		Yellowstone County vs. Benchmarks			
Mental Health & Mental Disorders	Yellowstone County	vs. MT	vs. US	vs. HP2020	
% "Fair/Poor" Mental Health	13.4		<i>≦</i> 15.5		
% Diagnosed Depression	25.3	20.4	17.9		
% Symptoms of Chronic Depression (2+ Years)	31.0		<i>≨</i> 29.9		
% Have Considered Suicide	14.2				
Suicide (Age-Adjusted Death Rate)	22.8	<i>≦</i> 3.4	12.7	10.2	
% Have Ever Sought Help for Mental Health	35.5		27.4		
% [Those With Diagnosed Depression] Seeking Help	92.4		<i>≨</i> 31.7		
% Taking Rx/Receiving Mental Health Trtmt	20.3		13.6		
% Unable to Get Mental Health Svcs in Past Yr	3.5		4.4		
% Typical Day Is "Extremely/Very" Stressful	11.7		<i>☆</i> 11.7		
		better	similar	worse	

_	Ye	llowston	y Trends	
2006	2011	2014	2017	Baseline vs. Current Data §
6.9	10.1	10.6	13.4	(6.9 vs. 13.4)
		21.2	25.3	(21.2 vs. 25.3)
25.7	25.0	26.9	31.0	(25.7 vs. 31.0)
8.1	10.2	9.7	14.2	(8.1 vs. 14.2)
				(18.4 vs. 22.8)*
24.1	24.5	27.0	35.5	(24.1 vs. 35.5)
		85.0	92.4	(85.0 vs. 92.4)
9.5	11.6	12.6	11.7	(9.5 vs. 11.7)
	t pink colum impared to th			§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)

		Yellowstone County vs. Benchmarks			Yellowstone County Trends				
Nutrition, Physical Activity & Weight	Yellowstone County	vs. MT	vs. US	vs. HP2020	2006	2011	2014	2017	Baseline vs. Current Data §
% Eat 5+ Servings of Fruit or Vegetables per Day	30.8								
			27.4		34.9	40.6	40.1	30.8	(34.9 vs. 30.8)
% "Very/Somewhat" Difficult to Buy Fresh Produce	23.3								
			21.9				23.5	23.3	(23.5 vs. 23.3)
Population With Low Food Access (Percent)	23.8		ớ						
		26.9	23.6						
% Food Insecure	16.9								
			25.9						
% 7+ Sugar-Sweetened Drinks in Past Week	29.8								
			30.2						
% Medical Advice on Nutrition in Past Year	36.0								
			39.2		31.4		35.9	36.0	(31.4 vs. 36.0)
% Healthy Weight (BMI 18.5-24.9)	32.1	会				***			
		35.2	32.9	33.9	35.8	25.4	31.9	32.1	(35.8 vs. 32.1)
% Overweight (BMI 25+)	65.6								
		63.0	65.2		62.7	72.9	65.7	65.6	(62.7 vs. 65.6)
% Obese (BMI 30+)	34.4						900:		
		26.4	33.4	30.5	23.9	26.0	32.6	34.4	(23.9 vs. 34.4)
% Children [Age 5-17] Overweight (85th Percentile)	28.8							ớ	
			24.2		33.8	24.3	28.7	28.8	(33.8 vs. 28.8)
% Children [Age 5-17] Obese (95th Percentile)	14.4							Â	
			9.5	14.5	17.5	15.4	15.1	14.4	(17.5 vs. 14.4)

		Yellowstone County vs. Benchmarks			
Nutrition, Physical Activity & Weight (continued)	Yellowstone County	vs. MT	vs. US	vs. HP2020	
% No Leisure-Time Physical Activity	18.0	<i>€</i> 3 19.6	27.9	32.6	
% Meeting Physical Activity Guidelines	24.3	<i>≦</i> 3.3	23.6	20.1	
Recreation/Fitness Facilities per 100,000	16.9	12.9	9.7	20.1	
% Medical Advice on Physical Activity in Past Year	43.6	-	44.0		
% 3+ Hours per Day of Total Screen Time	53.8				
% Want to be More Active But Feel Unsafe	5.8				
% Increased Physical Activity Through Everyday Behaviors/Past Yr	68.6				
% Aware of the 5-2-1-0 Health Message	37.9				
% Child [Age 2-17] Physically Active 1+ Hours per Day	70.8		47.9		
% Child [Age 5-17] 3+ Hours per Day of Total Screen Time	21.7				
		better		worse	

	Ye	llowston	y Trends	
2006	2011	2014	2017	Baseline vs. Current Data §
		Ê	****	
26.3	22.4	23.7	18.0	(26.3 vs. 18.0)
36.8		41.7	43.6	(36.8 vs. 43.6)
				£
	6.5	10.8	5.8	(6.5 vs. 5.8)
				£
		72.0	68.6	(72.0 vs. 68.6)
		31.3	37.9	(31.3 vs. 37.9)
		42.8	70.8	(42.8 vs. 70.8)
		ns, each yea ne prior surve		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)

	V II	Yellowston	County vs.	Benchmarks
Oral Health	Yellowstone County		vs. US	vs. HP2020
% [Age 18+] Dental Visit in Past Year	68.0	62.6	<i>€</i> 3 67.2	49.0
% Child [Age 2-17] Dental Visit in Past Year	88.1		<i>€</i> 3 90.7	49.0
% Have Dental Insurance	69.7		66.5	
		better		worse

Yellowstone County Trends							
2006	2011	2014	2017	Baseline vs. Current Data §			

63.9	70.0	62.9	68.0	(63.9 vs. 68.0)			
78.1	83.4	75.1	88.1	(78.1 vs. 88.1)			
56.2	58.9	58.9	69.7	(56.2 vs. 69.7)			
	at pink colum compared to the		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)				

		Yellowston	e County vs.	Benchmarks
Respiratory Diseases	Yellowstone County	vs. MT	vs. US	vs. HP2020
CLRD (Age-Adjusted Death Rate)	53.9	49.9	41.4	
Pneumonia/Influenza (Age-Adjusted Death Rate)	13.3	14.1	15.1	
% COPD (Lung Disease)	8.4	<i>€</i> 3 6.8	9.5	
% [Adult] Currently Has Asthma	9.5	<i>⊊</i> ≏ 9.6	<i>∽</i> 9.5	

	Yellowstone County Trends						
2006	2011	2014	2017	Baseline vs. Current Data §			
				(60.1 vs. 53.9)*			
				(10.8 vs. 13.3)*			
				A			
6.8	7.3	6.9	8.4	(6.8 vs. 8.4)			
8.0	9.0	11.1	9.5	(8.0 vs. 9.5)			

		Yellowstone County vs. Benchmarks			
Respiratory Diseases (continued)	Yellowstone County	vs. MT	vs. US	vs. HP2020	
% [Child 0-17] Currently Has Asthma	12.5		给		
			6.5		
		better		worse	

Yellowstone County Trends					
2006	2011	2014	2017	Baseline vs. Current Data §	
		Ê		给	
	8.5	4.4	12.5	(8.5 vs. 12.5)	
		ns, each yea ne prior surve	§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)		

			e County vs.	Benchmarks
Sexually Transmitted Diseases	Yellowstone County	vs. MT	vs. US	vs. HP2020
Gonorrhea Incidence per 100,000	65.5	42.8	110.7	
Chlamydia Incidence per 100,000	450.2	412.9	<i>≦</i> 456.1	
% [Unmarried 18-64] 3+ Sexual Partners in Past Year	11.2		<i>€</i> 44.5	
% [Unmarried 18-64] Using Condoms	32.1			
		better		worse

	Ye	llowston	e Count	y Trends
2006	2011	2014	2017	Baseline vs. Current Data §
				A
5.3	8.8	11.5	11.2	(5.3 vs. 11.2)
				A
32.0	42.5	42.2	32.1	(32.0 vs. 32.1)
	t pink colum mpared to th		§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)	

		Yellowstone	County vs.	Benchmarks
Substance Abuse	Yellowstone County	vs. MT	vs. US	vs. HP2020
Cirrhosis/Liver Disease (Age-Adjusted Death Rate)	12.9	<i>≨</i> ≒ 12.6	10.2	8.2
% Current Drinker	60.5	<i>≨</i> ≏ 59.6	<i>≨</i> 59.7	
% Excessive Drinker	20.3		<i>€</i> ≳ 22.2	25.4
% Drinking & Driving in Past Month	2.3		<i>€</i> 3 4.1	
Drug-Induced Deaths (Age-Adjusted Death Rate)	16.4	14.6	14.6	11.3
% Illicit Drug Use in Past Month	1.0		3.0	7.1
% Ever Sought Help for Alcohol or Drug Problem	3.7		<i>€</i> 3 4.1	
% Life Negatively Affected by Substance Abuse	45.5		32.2	
		better		worse

_	Ye	llowston	y Trends	
2006	2011	2014	2017	Baseline vs. Current Data §
				(11.4 vs. 12.9)*
57.4	58.5	59.7	60.5	(57.4 vs. 60.5)
				\Lambda
17.2	14.7	19.9	20.3	(17.2 vs. 20.3)
				\Lambda
2.9	2.6	3.1	2.3	(2.9 vs. 2.3)
				(13.1 vs. 16.4)*
1.6	1.0		1.0	(1.6 vs. 1.0)
			绘	\Lambda
3.8	4.8	5.2	3.7	(3.8 vs. 3.7)
		ns, each yea ne prior surve	§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)	

		Yellowston	Yellowstone County vs. Bench			
Tobacco Use	Yellowstone County	vs. MT	vs. US	vs. HP2020		
% Current Smoker	19.6					
		19.9	14.0	12.0		
% Someone Smokes at Home	10.5					
			10.2			
% [Nonsmokers] Someone Smokes in the Home	3.7		ớ			
			3.9			
% [Household With Children] Someone Smokes in the Home	8.9		会			
			10.2			
% Currently Use Electronic Cigarettes	4.8					
			3.8			
% Use Smokeless Tobacco	3.5		给			
		7.6	3.0	0.3		
% [Tobacco Users] Received Advice to Quit Using Tobacco Products	68.4					
			ớ			
		better	similar	worse		

	Yellowstone County Trends					
2006	2011	2014	2017	Baseline vs. Current Data §		
18.3	13.8	11.7	19.6	(18.3 vs. 19.6)		
15.6	9.1	9.9	10.5	(15.6 vs. 10.5)		
		6.7	3.7	(6.7 vs. 3.7)		
				\Lambda		
12.6	6.9	8.5	8.9	(12.6 vs. 8.9)		
				给		
5.1	6.6	7.6	3.5	(5.1 vs. 3.5)		
				给		
		69.0	68.4	(69.0 vs. 68.4)		
In the light pink columns, each year's data is compared to the prior survey.			§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)			

		Yellowstone County vs. Benchmarks			
Vision	Yellowstone County	vs. MT	vs. US	vs. HP2020	
% Blindness/Trouble Seeing	10.8	4.4	7.3		
% Eye Exam in Past 2 Years	61.6				
		>		worse	

	16	y Trends		
2006	2011	2014	2017	Baseline vs. Current Data §
6.5	8.4	8.6	10.8	(6.5 vs. 10.8)
63.4		59.3	61.6	(63.4 vs. 61.6)
		ns, each yea ne prior surve	§ For survey indicators, trend is the earliest year available vs. 2017; for secondary data indicators (marked with a *), the years vary (typically spanning 7-10 years)	