Purpose
The purpose of the community health assessment is to convene a diverse stakeholder group to identify what factors affect the health of its population and what resources are available within the community to address these factors. Completing a Community Health Assessment is a core function of local public health.

Data Sources
- Minnesota Department of Health Statistics
- Minnesota Department of Human Services
- Census Data

Process
- Highlighted data sets from the above sources were compiled into a Community Health Assessment Data Profile Document. The Profile is posted online at www.communityhealthboard.org (Health Data tab)
- An opinion survey was distributed and completed by 109 Cook County residents.
- Community stakeholders met during 2012-2013 to review data and identify top health issues.

Partners Involved:
- Cook Co. North Shore Hospital & Care Center
  * Hospital Staff and Board Members
- Sawtooth Mountain Clinic
- Cook County Public Health and Human Services
  * Staff and Advisory Committee members representing mental health, early childhood, engaged citizens, etc.
- Cook County Community Center & Extension Services Staff
- Care Partners
- North Shore Health Care Foundation
- Cook County Board of Commissioners

Priority #1: Mental Health
Increased rates of mental health issues (e.g. anxiety, depression, stress) are being reported. From 2000 to 2010 the percentage of adults reported with depression increased by 5.9% and reported anxiety increased by 7.5% (data from BTH).

Priority #2: Increased Food Insecurity
Increased rates of food assistance and support programs indicate food insecurity which results in a negative impact on overall health. Food insecurity limits access to healthy foods. According to the 2010 BTH data, the percentage of adults reporting food insecurity in Cook County was 9.0% (BTH).

Priority #3: Growing Population of Older Adults
A large and growing population of older adults, many of whom may require additional health and social services due to dementia, and other chronic diseases related to aging that limit mobility and independence for which existing services may not be adequate. From 1995-2010 elderly dependency ratio increased from 26.4 to 30.6 (MDH).
OTHER PRIORITIES ...

HIGH RATES OF ALCOHOL & ABUSE

SUBSTANCE

There are high rates of alcohol, tobacco and marijuana use in youth.

In 2010, percentage of adults who reported engaging in binge drinking in the last month was 13.2%. Percentage of Adult smokers in 2010 was 14.2%.

POVERTY

Poverty has a negative impact on health (e.g. poor diet, substance use, lack of access to health care, higher stress, lack of exercise, etc.)
Single parent homes are at an even greater risk to live in poverty (BTH).

From 1995 to 2009, the percentage of people living in poverty increased from 6.9% to 10.1% (MDH).

PREVENTATIVE SCREENINGS AND CHECK-UPS

Concern about Cook County residents who reported not receiving the recommended preventative screenings (dental, colonoscopy etc.).

In 2010, percentage of adult Cook County residents who reported that they have never had the following screenings: Blood Cholesterol (10.5%), Colon (26.9%), Mammogram (6.5%), Blood Pressure (1.8%) (BTH).

OBESITY

Chronic health conditions and diseases such as Heart Disease, Diabetes, and Arthritis are on the rise due to consistently increasing rates of overweight and obesity among adults and children.

From 2005 to 2010 the obesity rate in Cook County increased from 3.3% to 9.5% (BTH).

LACK OF INFORMATION ABOUT AVAILABLE HEALTH SERVICES AND RESOURCES:

There is a lack of information related to the availability of health services and options for payment of those services.

From 2000 to 2010, the percentage of adults without health insurance increased from 7.7% to 9.8% (BTH).

INCREASING SEXUAL ACTIVITY AMONG TEENS

Sexual activity among teens continues to be a concern.

In Cook and Lake Counties the percentage of 12th graders engaged in sexual activity from 2004 to 2010 increased from 58% to 61% (MSS).

Next Steps

- Complete an environmental scan identifying current activities, community partners and gaps in services.
- Develop a Community Improvement Plan to address the top prioritized health issue: Mental Health.