Executive Summary

In the summer of 2014, Marion and Polk health departments started a community health assessment and improvement plan with partners using the national model, Mobilization for Action through Planning and Partnerships. (MAPP)

COMMUNITY PARTNERS:
Salem Health, Santiam Hospital, Silverton Health, Kaiser Permanente, Willamette Valley Community Health, WVP Health Authority, OSU Extension, Early Learning Hub, Inc., and United Way.

During the first few meetings, we wrote a
VISION STATEMENT:
Marion Polk Community Health Assessment Steering Committee will ensure the community health assessment represents the whole community by looking at the broad definition of health including the community system and the environment.

The four assessments of the MAPP model include:
Community Themes and Strengths Assessment, Local Public Health System Assessment (conducted in 2013), Community Health Status Assessment and The Forces of Change Assessment.

Based on the assessment data, the Steering Committee selected
FOUR FOCUS AREAS:
• Prenatal Care
• Obesity
• Depression
• Tobacco Use

To get community members opinions about the focus areas, Marion and Polk counties had five community meetings in:
• Woodburn
• Salem
• Stayton
• Dallas
• Independence

Questions about this report?
Please Contact
Marion County Health Department-health@co.marion.or.us
Polk County Health Department - www.co.polk.or.us/ph

Questions Contact

Executive Summary .......................... 2
Community Health Improvement Plan .......... 3
Demographics ................................. 4
Socioeconomic Factors ........................ 6
Marion County Survey Results ............... 8
Polk County Survey Results .................. 10
Depression ..................................... 12
Obesity ........................................ 13
Prenatal Care .................................. 14
Tobacco ........................................ 15
Acknowledgements .......................... 16
2015 marks the first time that Marion and Polk County Health Departments and the coordinated care organization, Willamette Valley Community Health (WVCH) joined together to lead a community health assessment process.

With the completion of the assessment, the next step was to develop a Community Health Improvement Plan (CHIP). It was not possible to address every issue identified through the assessment, so four key health issues were chosen for improvement. These are: depression, obesity, prenatal care and tobacco and match the priorities contained in the WVCH 2013 CHIP. The health departments and WVCH will also align their CHIPs for the first time and focus on the same four health issues. The plans are set for five years, but may be revised as new data become available.

While adjacent, the two counties have different populations, economics and health. To meet the unique needs of each county, the health departments will have separate plans with different strategies to address the health issues. WVCH has a CHIP that focuses on the health of its two-county member population. Some of the strategies chosen by WVCH will be implemented in collaboration with one or both of the counties. It is hoped that three CHIPs focusing on the same priorities will provide opportunities to work together and will have a greater impact on health in the region.

Assessment and community health improvement plan work are on-going. Despite the comprehensive assessment conducted in 2015, there are some issues that may need a closer look based on feedback from partners and community members. Some of these are: child disease rates for WVCH members, changing demographics of school aged children, child abuse rates by type, school absenteeism and perinatal health data such as information on post-partum depression.
Demographics define the people in a community at any given time. We care about demographic information because different groups of people may experience greater risk for disease.

The population growth rates decreased from about 35% in Marion County and 30% in Polk County between 1970-1980 to 10% in Marion County and 20% in Polk County between 2000-2010.

**During 2013:**
- 20% of Marion and Polk County deaths were caused by heart disease
- About 5% of Marion and Polk County deaths were caused by lung cancer, or stroke
- About 5% of Polk County deaths were caused by Alzheimer’s Disease
- About 3% of Marion and Polk County deaths were caused by diabetes

**Why do we care?**

All of the leading causes of death in Marion and Polk Counties are related to chronic disease. Many of these chronic diseases can be prevented or dealt with through behavior change. For example, heart disease, and stroke are often linked to weight, high blood pressure, high cholesterol, lack of physical activity, poor diet, and tobacco use. If more community members addressed these health problems by increasing exercise and eating healthy diets, perhaps the percent of deaths caused by chronic disease would decrease.
Different age groups, sexes, and racial and ethnic groups experience different health problems. For example, young children and adults over 65 are more likely to die of the flu than younger adults and men are more likely to have heart disease than women.

The Stats:

- Marion and Polk Counties are both about 50% male and 50% female.
- Marion and Polk Counties both have younger populations (more people under the age of 25) than Oregon and the United States.
- Marion County has a larger percent of people who identify as Hispanic, American Indian/Alaska Native, or Asian than Polk County.

Why do we care?

Different age groups, sexes, and racial and ethnic groups experience different health problems. For example, young children and adults over 65 are more likely to die of the flu than younger adults and men are more likely to have heart disease than women. Having a younger population can impact the community’s economy. Young people usually earn less money than middle age adults. If a county has a lot of young people then the average income of that county could be lower.

Population Forecast

The fastest growing community in Marion and Polk Counties is the Hispanic community. The percent of the population that identifies as Hispanic has increased by about 4% since 2006. Based on a Portland State University population forecast study, the average Marion County mom has 2.37 children while the average Marion County Hispanic mom has 3.51 children. If one community is growing faster than others it may be due to having more children per mother. We see this growth in our incoming kindergarten classes where, according to the Oregon Department of Education, the majority of kindergarten classes have over 50% of students identifying as Hispanic.
Socioeconomics

Socioeconomic factors are the circumstances that affect how a person lives. These can be factors like: education level, income, employment, etc. These factors are shaped by where people are born and live as well as the economy, politics, and policies that exist in their environment.

People living in poverty may be more likely to need help paying for food and health care.

Marion County has a larger percent of people that live in poverty than Polk County

• 1 in 3 people under 18 in Marion County live in poverty

Polk County has a slightly higher unemployment rate than Marion County.
People who live in Marion County reported better access to all types of health care services than they did in the 2011 community survey.

People who live in smaller cities outside of Salem have fewer options for health care so getting to and from care is a barrier.

Marion County has a higher percent of people without health insurance than Polk County and Oregon. People with health insurance are more likely to see a doctor when they want or need than people without health insurance.

In 2013, 71.3% of Marion County students and 59.1% of Polk County students finished high school in four years. This does not count students who complete five year high school programs.

In general, people with more school are healthier than people with less school.

When asked why people could not see a doctor when they needed to, most said “they could not afford health care or did not have health insurance”.

A higher education level can help a person to earn more money.
Who answered the survey?

Partners from: business, community groups, community health care, education, churches, government, medical care, mental health care, public health and social services.

Communities represented:
Gates, Gervais, Keizer, Mill City, Salem, Silverton, Stayton and Woodburn.

In Their Words

“The lack of free advocacy, housing, care, and support for those with mental health issues is a big problem.”

“Need service providers to come into the rural areas.”

“Complex system so folks don’t get what they need.”

“Providers not accepting new patients. Lack of available providers (with or without insurance).”

“There is no financial support/funding for making changes to policy or the environment to prevent chronic disease up front. Seems to be plenty of money/focus for helping people prevent worse outcomes by managing or treating chronic disease”

-Partner Survey Respondents

TOP COMMUNITY ISSUES

- Mental Health
- Access and Cost of Health Care
- Obesity
The Marion County Health Department asked people who live in Marion County to complete a survey about health and safety in February of 2015. The survey was handed out through partners and posted on the Marion County Health Department website. 1,749 surveys were filled out.

Who answered the survey?
- 1,166 women, 391 men, 1 transgender person, and 191 did not say their gender
- 15.8% of people surveyed were Hispanic
- 38.4% of people surveyed were under 45
- 74.6% spoke English at home; 11.1% spoke Spanish
- 9% were unemployed or underemployed
- 18.7% had a total household income below $20,000

Communities represented:

In Their Words
“Detroit is in perhaps the most remote part of Marion County. Health care providers don’t always take into consideration the difficulties in scheduling and traveling to and from appointments. It’s not just the cost of the service, but the cost of gas to get there.”

“Medical services are available, but clinics and doctor’s offices need to be open either before or after the “regular” working hours of 8a to 5p.”

“It is challenge for people with Medicare to find providers who accept new patients, making their Medicare less than useful.”

“The poor public transportation system limits access to a lot of resources for many people”

“The built environment (sidewalks, bike lanes, noise pollution, etc) in some places is not conducive to active living and public transit options are awful. There are big gaps for what the neighborhood looks like in well off areas and what it looks like in lower income areas.”

-Marion County Residents
The Polk County Health Department asked community partners to complete a survey about health and environmental issues in February of 2015. About 40 community partners completed the survey.

In Their Words

“Polk County residents nearly always need to travel for their care and are likely to have more difficulty accessing specialty care; transportation may be a significant barrier as well as finances, personal investment in health and lack of education/understanding about health and potential interventions.”

“Availability to providers of all types is the biggest barrier to health care in the more rural areas such as Falls City.”

“Most people are under insured for dental care.”

“Free diabetes education and nutrition education would be wonderful to offer community members - prevention of disease as opposed to scrambling to treat disease”

-Partner Survey Respondents

Who answered the survey?

Sectors represented: business, community-based organizations, community health care, resident, education, faith organizations, government, medical care, mental health care, public health, social services, and corrections.

Communities represented:
West Salem, Dallas, Falls City, Independence and Monmouth.

TOP COMMUNITY ISSUES

- Mental Health
- Access and Affordability of Health Care
- Obesity
The Community Survey

In February of 2015, residents were asked to complete a health and community safety survey. The survey was given to community partners to hand out and made available online. Polk County Health Department also held 3 focus groups around the county.

In Their Words

“As with anywhere we would benefit from some kind of low income gym membership/support team.”

“Need more bicycle-safe paths so more folks can commute to work.”

“Transportation is a major obstacle in getting to/from community activities. Not enough recreational activities for families.”

“High school kids are uninformed about sex. Most are unaware that PCPH exist and can help them.”

“The county health department was a great place to have children immunized”

“There seems to be a lot of help. This is the first time I’ve needed assistance and I was very pleasantly surprised by the resources that were available to me.”

“Transportation is a huge issue for these people to try to get to [services]. Transportation would be one of the big things that should be taken care of to help these people get to [services].”

-Polk County Residents

Who answered the survey?

- 67.2% of respondents were female
- 1.1% identify as Hispanic
- 46.8% are under the age of 45
- 85.5% speak English at home and 6.6% speak Spanish at home
- 7.7% of respondents were unemployed or under employed
- 17.6% of respondents had household incomes below $20,000

Communities represented:
Dallas, Monmouth, Falls City, Independence, Rickreall and West Salem.

Focus Group Participants
11 participants from Edgewater Community,
13 clinical and non-clinical staff from West Valley Hospital
9 high school students from Monmouth, Independence and Dallas

Top Community Issues
- Obesity
- Vaccination Rates
- Access to Affordable Health Care

Top Reported Chronic Conditions
- High Blood Pressure
- Obesity
- Depression
- Arthritis
- Chronic Pain
Depression

Depression is an illness that involves the body, mood, and thoughts. It can affect the way a person eats, sleeps, and thinks about things. Some signs of depression are loss of interest in activities that were once enjoyable or interesting, ongoing feelings of hopelessness or sadness, social withdrawal, and tiredness.

Age adjusted DEPRESSION PREVALENCE 2010-2013

What Can We Do?

- Continue to work towards collaborative care-linking primary care providers, patients and mental health care specialists
- Improve routine depression screening and diagnosis of depressive orders
- Increase use of evidence-based programs for proactive management of depressive disorders

Depression Prevalence:
percent of people reported having depressive symptoms or being treated for depression in the last 30 days.

According to the 2014 Medicaid Behavioral Risk Factor Surveillance System, the Medicaid populations of Marion and Polk counties had a depression prevalence of 36.0%. That is 10% higher prevalence than the general Marion County population and 15% higher prevalence than the Polk County general population.

Why do we care?

According to the National Institute of Mental Health women are 70% more likely than men to experience depression at some point in their life.

Inactivity from being depressed can lead to weight problems and other chronic disease and lower quality of life in general.

Depression often occurs with other illnesses or life events such as:

- Anxiety disorders (Post-traumatic stress disorder, obsessive compulsive disorder, panic disorder and social phobia)
- Alcohol and other substance abuse or dependence
- Heart disease
- Stroke
- Cancer
- HIV/AIDS
- Diabetes
- Parkinson’s Disease
- Post-Partum
- Adverse Child Experiences (ACEs)
Obesity

Adult obesity is measured by a person’s Body Mass Index or BMI. An adult is considered to be obese if he or she has a BMI of 30 or larger. A child or teen is considered to be obese if their BMI is greater than the 95th percentile for children or teens of the same age and sex.

The Healthy People 2020 goal for obesity is 30.5%

According to the National Center for Health Statistics Non-Hispanic Blacks and Hispanics have the highest rates of obesity, followed by Non-Hispanic Whites and then Non-Hispanic Asians.

Obesity in children and teens is defined as a person who has a BMI above the 95th percentile for children and teens of the same age and sex. Teens that are obese are more likely to become obese adults.

Why do we care?

The estimated medical cost of obesity to the United States each year is $147 billion. On average, obese individuals cost the health system $1,500 more than a normal weight individual each year.

Obesity increases the risk for other chronic diseases including: Type 2 diabetes, heart disease, high blood pressure, cancer, stroke, liver and gallbladder disease, and arthritis.

What Can We Do?

HEALTHCARE PROVIDERS:
Give patients and families a health prescription for physical activity and nutrition. Refer families and individuals to the 5210 Challenge website for healthy living ideas and support.

http://www.5210challenge.org

INDIVIDUALS:
• Eat 5 fruits and veggies daily.
• Limit computer/TV time to 2 hours daily.
• Get an hour of physical activity daily.
• Drink water and other drinks that don't have sugar.
Prenatal Care

Prenatal care is care a woman gets while pregnant. Prenatal care helps doctors make sure the baby is healthy. Women who start prenatal care during the first trimester of their pregnancy are at lower risk for low birth weight babies, pre-term births, and other birth difficulties.

The Healthy People 2020 goal for prenatal care is 77.6%.

Why do we care?

Though rates of prenatal care have improved since 2008, certain groups of people are less likely to get first trimester prenatal care than others.

What Can We Do?

WOMEN:
Marion and Polk County residents who think they may be pregnant can call this number to be connected with the OMC program—Marion County Health Department Clinic (503) 588-5342

HEALTHCARE SYSTEM:
- Prioritize appointments for pregnant women
- Refer women to services such as Oregon Mothers Care and WIC
The Healthy People 2020

- Adults who smoke cigarettes: 12.0%
- Women who smoke during pregnancy: 1.4%
- Youth who smoke cigarettes: 16.0%

According to the CDC some populations are at higher risk for tobacco use such as: men, American Indians/Alaska Natives, individuals with a GED, individuals who live below the poverty level, adults with a disability, and members of the LGBT community.

Why do we care?

- A baby born to a mother who smoked during pregnancy is more likely to have a low birth weight and to be born early
- Smoking during pregnancy may be related to 10% of all infant deaths
- Young people who smoke are more likely to have a long-term addiction to tobacco

What Can We Do?

HEALTHCARE PROVIDERS:
Screen smokers at every visit for readiness to quit and make referrals

INDIVIDUALS:
Ask your health provider about getting help to quit smoking.
Community Health Improvement Partnership: Coming together to build a healthier community

Thank you to the following organizations who helped with the process: