**2019 Community Health Assessment**

**Mineral County, Montana**



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# **Introduction**

This document is a reflection of the collaborative effort and organizational participation to seek the community’s perspective on the most pertinent health needs faced by Mineral County. Conducting a county-wide needs assessment is a hefty task, but there are many unseen benefits reaped from the effort. Partnerships are formed through the volunteer effort, and its truly fun to get out in the county and talk to our community members about what their experiences are. It gives us a solid knowledge base and partnerships to move forward with implementing our Community Health Improvement Plan.

The Mineral County Health Department (MCHD) worked in conjunction with the Mineral Community Hospital (MCH) and Board, Healthy Communities Coalition (HCC), Parents as Teachers Home Visiting, Zero to Five, school-based mental health, and community volunteers to complete a Community Assessment for Public Health Emergency Response (CASPER). This method allowed us to survey with minimal cost.

We collected data on a number of topics including safety, access to exercise, housing, nutrition, health concerns, access to health care, dental care, tobacco use, domestic violence, mental health, substance abuse, aging services, education, employment, age, and race/ethnicity. So what do housing and unemployment have to do with health? The American Public Health Association defines public health as protecting the health of people where they live, work, and play (APHA, 2019). We know there is stress and economic insecurity that can happen when housing is difficult to find and afford, or how difficult it can be to seek medical care when your job doesn’t offer benefits or time off to seek care. We understand the need for affordable and accessible childcare, and preschools for our children. Much of what makes us healthy or not isn’t merely the absence of disease, rather it includes every part of our lives: where we work, play, eat, sleep, and live. These are called social determinants of health. The picture below (CDC, 2020) depicts the five general areas, which include economic stability, neighborhood and build environment, health and health care, social and community context, and education.

### **Figure 1- Social Determinants of Health** (CDC, 2020)

 Economic Stability-

* Employment
* Food insecurity
* Housing instability
* Poverty

Neighborhood and Built Environment-

* Access to healthy foods
* Crime and violence
* Environmental conditions
* Quality of housing

Health and Health Care-

* Access to health care
* Access to primary care
* Health literacy

Social and Community Context-

* Civic participation
* Social cohesion
* Discrimination

Education-

* Early childhood education
* Higher education opportunity
* High school graduation
* Language

The data from this effort is used in many ways across our county, and is available for any organization to utilize. The MCHD uses this data to write our Community Health Improvement Plan (CHIP), for grant writing purposes to demonstrate areas of need, strategic planning, program development, and policy improvement.

# **Community Profile**

### **Figure 2- Mineral County Map**

## **Related imageLocation and Geography**

### Mineral County covers an area of approximately 1,220 square miles in southwestern Montana. As depicted in the graphic, Mineral County is rural with most of the land being devoted to US Forest Service, MT Fish, Wildlife and Parks, and MT State Lands. We share our western boarder with Idaho and our eastern border with Sanders and Missoula counties.

\*Image created by Nygaard and Bosak (2014).

## **Population**

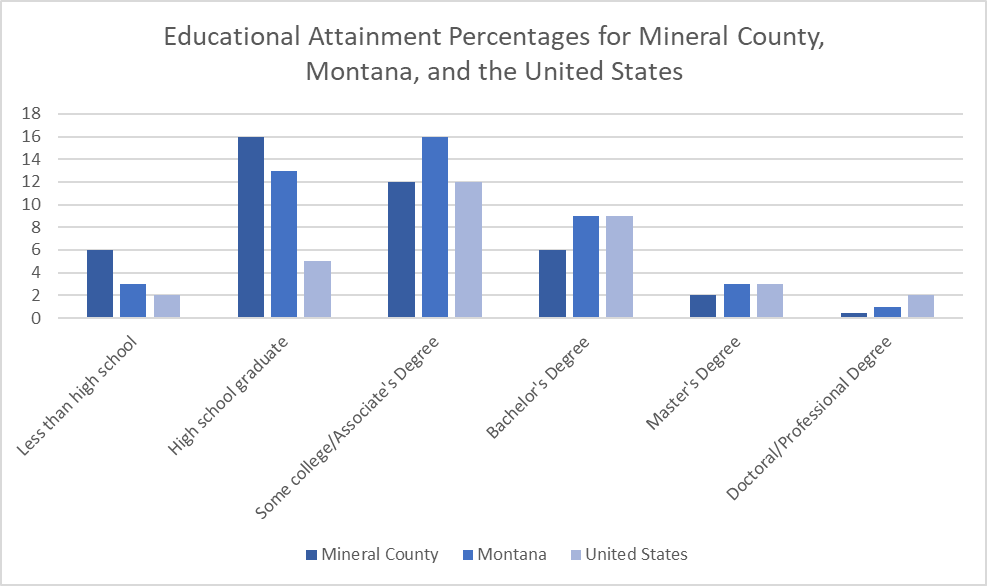
Our estimated population in Mineral County for 2018 is 4,316, according to the US Census (2018). The US Census estimates we have a 2.1% growth rate which is under that of both Montana and the United States growth rate of around 6%. Our average median age, 53, is much higher compared to Montana and the United States, 38.5, as is the proportion of people aged 65 years and older. Mineral is considered a frontier county with 3.5 people per square mile. Our population has a higher prevalence of disability for those under 65 years of age, 12.7%, as compared to the 8.7% among the US as a whole. We also experience a higher poverty rate at 14.5% compared to the US- 12.3%, and our median household income of $40,117 is much lower than found in Montana ($53,386) and the US ($57,652). According to the MT Department of Labor and Industry, Mineral County experiences a much higher unemployment rate (10.5%) in comparison to MT (5.1% unadjusted) and US (4.9%). Approximately 12% of our county are veterans. The race/ethnicity makeup of Mineral County is as follows: White (94.1%), Hispanic/Latino (2.9%), Two or more races (2.7%), American Indian/Alaska Native (2%), Asian (2%), and Black (.5%). Listed in tables 1-4 below are Mineral County age groups, housing, educational attainment, and functional needs (US Census 2010, 2018).

### **Table 1: Age Groups**

### **Table 2: Housing**

|  |  |
| --- | --- |
| Mineral County Housing Data |  |
| Housing units | 2502 |
| Owner-occupied housing unit rate | 70.7% |
| Median value of owner-occupied housing | $159,800 |
| Median selected monthly owner costs  With mortgage  Without mortgage | $1244  $364 |
| Median gross rent | $564 |

### **Table 3: Educational Attainment**



**Table 4: Functional Needs,** Montana Disability and Health Program (2016)

|  |  |
| --- | --- |
| Functional Need | % of Mineral County Population |
| **Communication** |  |
| Serious hearing difficulty/deaf (all ages) | 8% |
| Serious vision difficulty/blind (all ages) | 5% |
| Cognitive difficulty (over 5 years) | 8% |
| Speak English “Less than very well” | 0.1% |
| **Transportation** |  |
| Zero care households | 0.4% |
| **Social Economic** |  |
| Population receiving SSI | 4% |
| Average monthly Medicaid enrollment | 15% |
| SNAP recipients | 6% |
| Estimated WIC eligible | 68.4% |
| Households below poverty | 9% |
| Percent uninsured | 16% |
| Percent population on Medicaid | 15% |
| **Mobility** |  |
| Serious difficulty walking or climbing stairs | 13% |
| **Daily Living Activity and Participation** |  |
| Independent living difficulty (over 14 years) | 8% |
| Self-care difficulty (over 5 years) | 4% |
| PAS Recipients | 0.1% |
| Medicaid Mental Health recipients | 3% |
| **Women, Children, and Seniors** | Number in Population |
| Live births | 46 |
| Children enrolled in Special Services | 96 |
| Youth served by Children’s Mental Health Medicaid Services | 147 |
| Householders (65+) living alone | 284 |

# **Methods**

CASPER is an epidemiologic technique designed to provide household-level information. The organization of CASPER includes leadership, local coordination, logistics, data management, and field teams. CASPER uses a two-stage cluster design based on the World Health Organization epidemiology technique for estimating vaccine coverage from small pox eradication. In the first stage of the sampling method, 20 clusters (i.e. census blocks) with ≥7 housing units (HUs) are selected with their probability proportional to the estimated number of HUs in each cluster. In the second stage, seven HUs are randomly selected in each of the 20 clusters by the field teams for the purpose of conducting the interviews with the goal of 140 completed interviews. Eighty percent (80%) completion rates allows population needs to be estimated from the sample and the estimates are usually within 10 percent.

MCHD applied for and received a grant from the Public Health Systems Improvement (PHSI) office for help conducting a CASPER in Spring 2019. MCHD developed the survey, along with input from MCH and community stakeholders. MCHD located and managed volunteers, completed all logistics including data collection, and completed the media campaign to raise awareness of the event. MCHD provided a place to meet and food for the volunteers. PHSI coordinated the sampling and development of cluster maps with the Montana State Library, the just-in-time training for volunteers, completion of the volunteer evaluation, data analyses, and graphics.

The geographic area for the CASPER included all of Mineral County, which is 1,223 square miles. The main population center is Superior with a population of 812. Mineral County contains 1,573 total census blocks including 1,208 blocks with 0 HUs, 264 blocks with 1–6 HUs, and 101 blocks with ≥7 HUs for a total of 2,446 HUs. The Montana State Library logically combined census blocks taking into account boundaries, roads, rivers, and other features to create new clusters with ≥7 HUs. In the first stage sampling, 20 clusters were randomly selected with probability proportional to the number of HUs within the merged blocks. In the second stage, field teams used a standardized method for randomization to select HUs for the seven interviews.

The survey instrument was designed to capture 1) demographic information 2) physical activity and nutrition 3) mental health and substance abuse 4) access to quality health servicers 5) injury 6) tobacco use 7) oral health and 8) community perceptions (Appendix A). On April 11, 2019, a just-in-time training session for 12 volunteers provided an overview of a CASPER, household selection, interview techniques, and safety. Six, two-person teams attempted to conduct seven interviews in each of the 20 clusters selected for the sample, with a goal of 140 completed interviews. Residents of households who were at least 18 years of age were considered eligible respondents. Additionally, field teams distributed information about the MCHD, MCH, Parents as Teachers Home Visiting, and Mineral County Crime Victim Advocates. In addition, gas gift cards for $10 were given to participants. Data collection occurred on Thursday April 11, Friday April 12, and Saturday April 13. A total of 130 surveys were completed in the 20 clusters for a 93% response rate.

## **Analysis**

Epi Info 7.1.2, a free statistical software package produced by the CDC, was used for data entry and analysis. The completion rate was calculated by dividing the number of completed interviews by 130. To account for the probability that the responding household was selected, we created sampling weights based on the total number of occupied houses according to the 2010 Census, the number of clusters selected, and the number of interviews completed in each cluster. This weight was used to calculate all weighted frequencies and percentages presented in this report.

# **Results**

## **Community**

The majority of respondents (88%) feel safe in their homes and communities. About 40% felt they couldn’t get the health care they needed in Mineral County, 38% felt they could, and 20% didn’t know. Most also felt they could access places near their home for physical fitness according to their abilities; however, 6% said they did not have such access. Eighty-four percent felt they have enough financial resources to meet their basic needs, and 12% said they did not. Sixty nine percent of participants felt Mineral County is a good place to raise children, 13% said they didn’t know, and 9% said it was not. When asked what could be available, or improved upon, to make Mineral County a better place to raise children, responses were (could choose more than one) 54% more activities for teens, 52% improved summer activities, more things for children to do with free time, 39% more clubs/activities for children to participate in, 24% more childcare, 23% more parental resources for help raising children, 19% early childhood education/services, 17% after school care, 15% didn’t know, and 13% before school care. Sixty three percent stated Mineral County was a good place to grow old, 19% said they didn’t know, and 17% said it was not. When asked what would help make our community be a better place to grow old (could choose more than one), 47% stated transportation services, 43% expanded medical services, 35% more social options, 25% expanded senior center, 23% home meals, 19% ability to exercise, 15% didn’t know, and 3% preferred not to say. The three most important items for a healthy community chosen were good jobs and a healthy economy, access to health care, and affordable housing. Closely following the top three were good schools, clean air/water, and a strong family life.

## **Health**

The top three most serious health concerns for the participants taking the survey were alcohol/substance abuse, mental health issues, and unemployment. Child abuse/neglect and access to health care ranked highly as well. Accessible parks, trails, or greenways, accessible sidewalks, and access to a gym were the top three chosen that would improve physical activity. About a third of participants stated nothing got in the way of them being more physically active, while a quarter said they were too busy or didn’t have time, and a fifth said they didn’t have access to a gym or facility. When asked what makes it difficult to eat healthy, 32% said health foods cost too much, 31% said there aren’t places in their community to buy healthy food, and 23% said its hard to find healthy choices when they eat outside of the home.

A quarter of survey respondents use tobacco, and three quarters do not. Of those that do, the majority (87%) use tobacco every day. Ten percent of those who use tobacco stated they didn’t know where they would go for help quitting tobacco, 6% Montana Quit Line, 3% health care provider, and 2% health department. Alcohol/narcotics anonymous, Choices for Change, and Partnership Health Services were the top three places listed to refer someone for substance abuse services/treatment. A third stated they didn’t know where to refer someone for mental health services, 30% Choices for Change, and 30% Partnership Health Center. Fifty seven percent felt domestic violence was an issue in our community, 34% didn’t know, and 9% said it was not. Holding abusers accountable, safe housing, advocates to assist, education for family/friends, and treatment for abusers were ways participants felt Mineral County can help those dealing with domestic violence. Forty one percent would refer someone experiencing domestic violence to the local helpline, 25% didn’t know, 20% faith leader, 20% mental health provider, 19% medical provider, 12% YMCA in Missoula, and 9% to a friend.

## **Heath Care**

Most (80%) respondents stated they had been to a medical provider within the past year, 10% between 1 and 2 years ago, and 5% said more than 2 but less than 5. When asked about utilizing preventative health services within the past year, 50% of participants had routine blood pressure, 47% flu shot, 36% cholesterol check, 27% mammography, 18% pap smear, 18% health fair labs, 17% children’s check-ups, 13% colonoscopy, 12% hadn’t sought preventative services, and 5% prostate. Roughly one third of participants stated they or a household member did not get (or delayed getting) health services in the past year, and roughly two thirds stated they did seek care within the past year when they needed it. Reasons given for not seeking care were that it costs too much, no insurance, and availability of services. Almost half of participants stated they had been to the dentist within the past year. For those that did not visit the dentist within the past year, cost, no insurance, dislike going, and distance were the reasons given. Forty two percent of participants stated more primary care providers would improve Mineral County access to health care, 35% said availability of visiting specialists, 32% availability of walk-in clinics, 23% transportation services, 22% improved quality of care, and 15% telemedicine. When asked with services the participant would use if they knew it was available in Mineral County, 40% stated dentist, 33% chiropractor, 18% didn’t know, 18% general surgery, 18% acupuncturist, 16% chronic pain specialist, 15% colonoscopy, 13% pediatric services, 12% OB/GYN, and 8% diabetes nurse educator. Seventy nine percent always use their seatbelt, 17% nearly always, 3% sometimes, and 1% never.

## **Health Information**

The top three sources of information during an emergency were cited as television (58%), social media (40%), and tied for third were radio, word of mouth, texting, and neighbors (33%). Family/friends, word of mouth, and health care provider were the top three ways respondents find out about health services or health-related information in Mineral County. The top three most interesting educational classes/programs were health and wellness, fitness, and first aid/CPR.

## **Demographics**

Twenty three percent of respondents live in a 1 person household, 45% in a 2 person household, 9% 3 person, 9% 4 person, 9% 5 person, 3% 6 person, and 2% have eight people in their household. Sixty five percent were women and 35% were men. Three percent were between the ages of 18 and 25, 11% 26-35, 14% 36-45, 14% 46-55, 28% 56-65, 18% 66-75, and 11% were 75+. The majority of respondents were white (96%), 2% Asian, 2% American Indian or Alaska Native, and 1% preferred not to say. Forty percent were employed full-time, 9% part-time, 34% retired, 1% student, 0% armed forces/Military, 5% self-employed, 4% stay-at-home parent, 3% unable to work due to injury or illness, 2% unemployed for less than a year, 2% unemployed for more than a year, and 2% preferred not to say. Twenty six percent have lived in Mineral County less than 5 years, 9% 5-10 years, 9% 10-15 years, 16% 15-20 years, and 40% more than twenty years. When asked what the highest grade level or year of school completed was, 1% stated some grade school, 5% some high school, 27% high school or equivalency, 34% some college or technical school, and 33% college graduate.

# **Summary**

The top five most serious health concerns are alcohol and substance abuse, unemployment, mental health, access to health care, and child abuse and neglect. The most important parts of a healthy community were good jobs and a healthy economy, affordable housing, access to health care and other services, good schools, and clean air/water. These all intertwine and are addressed at a deeper level of health; the social determinants of health. Our physical and social environments have a huge impact on how well we function.

# **References**

APHA (2019). American Public Health Association’s What is Public Health? [www.apha.org](http://www.apha.org)

CDC (2019). Center for Disease Control Healthy People 2020- Social Determinants of Health. [www.healthypeople.gov](http://www.healthypeople.gov)

Montana Disability and Health Program (2016). Data and Resources for a Whole Community Approach to Emergency Planning. <http://mtdh.ruralinstitute.umt.edu>

Nygaard, K. and Bosak, K. (2014). A Critical Assessment of the Mineral County Challenge: The Role and Implications of Scale in Collaborative Development. *Journal of Rural Studies*. 34:235-245.

US Census (2010). [www.census.gov](http://www.census.gov)

US Census (2018). Quick Facts- Mineral County [www.factfinder.census.gov](http://www.factfinder.census.gov)

# **Appendix A- Community Health Needs Assessment**

# **Appendix B- Raw CASPER Data Scores**

**Table 1. Community**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **I can get the health care I need in Mineral County.** | | | | | |
| Agree | 48 | 37.5 | 863 | 37.4 | 35.4,39.4 |
| Don’t know | 26 | 20.3 | 446 | 56.7 | 17.7,21.0 |
| Disagree | 51 | 39.8 | 948 | 41.1 | 39.1,43.1 |
| Not applicable | 3 | 2.3 | 52 | 2.3 | 1.7,3.0 |
| **I feel safe in my home.** | | | | | |
| Agree | 117 | 90.0 | 2078 | 88.6 | 87.3,89.9 |
| Don’t know | 8 | 6.2 | 143 | 6.1 | 5.2,7.2 |
| Disagree | 5 | 3.9 | 123 | 5.3 | 4.4,6.3 |
| Not applicable | 0 | 0 | 0 | 0 | 0,0 |
| **I feel safe in my community** | | | | | |
| Agree | 117 | 90.7 | 2037 | 87.7 | 86.2,89.0 |
| Don’t know | 6 | 4.7 | 111 | 4.8 | 4.0,5.7 |
| Disagree | 6 | 4.7 | 176 | 7.6 | 6.6,8.8 |
| Not applicable | 0 | 0 | 0 | 0 | 0,0 |
| **There are places near my home where I am able to be physically active according to my abilities** | | | | | |
| Agree | 116 | 89.2 | 2055 | 87.7 | 86.3,89.0 |
| Don’t know | 5 | 3.9 | 93 | 4.0 | 3.2,4.9 |
| Disagree | 8 | 6.2 | 178 | 7.6 | 6.6,8.8 |
| Not applicable | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| **I have enough financial resources to meet my basic needs.** | | | | | |
| Agree | 108 | 83.7 | 1909 | 82.1 | 80.5,83.7 |
| Don’t know | 4 | 3.1 | 76 | 3.3 | 2.6,4.1 |
| Disagree | 16 | 12.4 | 319 | 13.7 | 12.4,15.2 |
| Not applicable | 1 | 0.8 | 20 | 0.9 | 0.6,1.4 |
| **My community is a good place to raise children** | | | | | |
| Agree | 89 | 68.5 | 1530 | 65.3 | 63.3,67.2 |
| Don’t know | 17 | 13.1 | 349 | 14.9 | 13.5,16.4 |
| Disagree | 12 | 9.2 | 249 | 10.6 | 9.4,12.0 |
| Not applicable | 12 | 9.2 | 215 | 9.2 | 8.1,10.5 |
| **My community is a good place to grow old.** | | | | | |
| Agree | 82 | 63.1 | 1456 | 62.1 | 60.1,64.1 |
| Don’t know | 25 | 19.2 | 465 | 19.8 | 18.3,21.5 |
| Disagree | 23 | 17.7 | 423 | 18.0 | 16.5,19.7 |
| Not applicable | 0 | 0 | 0 | 0 | 0,0 |

**Table 2. What do you think would make our community a better place to grow old?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| Transportation assistance | 62 | 47.7 | 1057 | 45.1 | 43.1,47.1 |
| Expanded medical services | 56 | 43.1 | 1027 | 43.8 | 41.8,45.9 |
| More social options | 45 | 34.6 | 797 | 34.0 | 32.1,36.0 |
| Expanded senior center | 33 | 25.4 | 568 | 24.2 | 22.5,26.0 |
| Home meals | 30 | 23.1 | 520 | 22.2 | 20.5,24.0 |
| Ability to exercise | 24 | 18.5 | 140 | 17.5 | 16.0,19.1 |
| Don’t know | 19 | 14.6 | 347 | 14.8 | 13.4,16.3 |
| Prefer not to say | 4 | 3.1 | 70 | 3.0 | 2.4,3.8 |

**Table 3. What do you think needs to be available, or improved upon to make it a better place to raise children?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| More activities for teens | 70 | 53.9 | 1235 | 52.7 | 50.6,54.7 |
| Improved summer activities | 67 | 51.5 | 1223 | 52.2 | 50.2,54.2 |
| More things for children to do with free time | 56 | 43.1 | 1052 | 44.9 | 42.8,46.9 |
| More clubs/activities for children to participate in | 50 | 38.5 | 906 | 38.7 | 36.7,40.7 |
| More childcare | 31 | 23.9 | 536 | 22.9 | 21.2,24.6 |
| More parental resources for help raising children | 30 | 23.1 | 523 | 22.3 | 20.6,24.0 |
| Early childhood education/services | 24 | 18.5 | 416 | 17.7 | 16.2,19.4 |
| After school care | 22 | 16.9 | 389 | 16.6 | 15.1,18.1 |
| Don’t know | 19 | 14.6 | 349 | 14.9 | 13.5,16.4 |
| Before school care | 17 | 13.1 | 295 | 12.6 | 11.3,14.0 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |

**Table 4. Three most important items for a healthy community**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| Good jobs and healthy economy | 71 | 54.6 | 1329 | 56.7 | 54.7,58.7 |
| Access to health care | 58 | 44.6 | 1014 | 43.3 | 41.2,45.3 |
| Affordable housing | 56 | 43.1 | 1033 | 44.1 | 42.0,46.1 |
| Good schools | 44 | 33.9 | 845 | 36.0 | 34.1,38.0 |
| Clean air/water | 33 | 25.4 | 535 | 22.8 | 21.1,24.6 |
| Strong family life | 31 | 23.9 | 571 | 24.4 | 22.6,26.2 |
| Low crime/safe neighborhood | 30 | 23.1 | 531 | 22.7 | 21.0,24.4 |
| Strong early childhood resources | 18 | 13.9 | 316 | 13.5 | 12.1,14.9 |
| Healthy food options | 17 | 13.1 | 295 | 12.6 | 11.3,14.0 |
| Community involvement | 16 | 12.3 | 289 | 12.3 | 11.0,13.7 |
| Religious or spiritual values | 13 | 10.0 | 228 | 9.7 | 8.6,11.0 |
| Tolerance for diversity | 13 | 10.0 | 214 | 9.1 | 8.0,10.4 |
| Parks and recreation | 11 | 8.5 | 177 | 7.5 | 6.5,8.7 |
| Access to adult learning opportunities | 11 | 8.5 | 198 | 8.5 | 7.4,9.7 |
| Public transportation | 9 | 6.9 | 152 | 6.5 | 5.5,7.6 |
| Low levels of domestic violence | 7 | 5.4 | 175 | 7.5 | 6.4,8.6 |
| Arts and cultural events | 7 | 5.4 | 125 | 5.3 | 4.5,6.4 |
| Low death and disease rates | 4 | 3.1 | 73 | 3.1 | 2.5,3.9 |
| Don’t know | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |

**Table 5. Three most serious health concerns in our community**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=xxx)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| Alcohol/substance abuse | 106 | 81.5 | 1934 | 82.5 | 80.9,84.0 |
| Mental health issues | 34 | 26.2 | 637 | 27.2 | 25.4,29.0 |
| Unemployment | 31 | 23.9 | 639 | 27.3 | 25.5,29.1 |
| Child abuse/neglect | 30 | 23.1 | 505 | 21.5 | 19.9,23.3 |
| Access to healthcare | 28 | 21.5 | 562 | 24.0 | 22.3,25.8 |
| Overweight/Obesity | 27 | 20.8 | 475 | 20.3 | 18.7,22.0 |
| Domestic violence | 20 | 15.4 | 389 | 16.6 | 15.1,18.2 |
| Tobacco | 15 | 11.5 | 263 | 11.2 | 10.0,12.6 |
| Access to dental care | 15 | 11.5 | 255 | 10.9 | 9.7,12.2 |
| Cancer | 14 | 10.8 | 250 | 10.7 | 9.5,12.0 |
| Access to places for exercise | 11 | 8.5 | 199 | 8.5 | 7.4,9.7 |
| Diabetes | 10 | 7.7 | 175 | 7.5 | 6.4,8.6 |
| Chronic pain | 9 | 6.9 | 136 | 5.8 | 4.9,6.8 |
| Don’t know | 6 | 4.6 | 106 | 4.5 | 3.7,5.5 |
| Motor vehicle crashes | 5 | 3.9 | 90 | 3.9 | 3.1,4.7 |
| Maternal and child health | 4 | 3.1 | 57 | 2.4 | 1.9,3.2 |
| Heart disease | 3 | 2.3 | 52 | 2.2 | 1.7,2.9 |
| Recreational related injuries | 3 | 2.3 | 55 | 2.4 | 1.8,3.1 |
| Dating violence/abuse | 2 | 1.5 | 38 | 1.6 | 1.2,2.2 |
| Work related accidents or injuries | 1 | 0.8 | 20 | 0.9 | 0.6,1.4 |
| Stroke | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |

**Table 6. Physical Activity and Healthy Eating**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **Which of the following would help you be more physically active?** | | | | | |
| Accessible parks, trails, or  greenways | 46 | 35.4 | 828 | 35.3 | 33.4,37.3 |
| Accessible sidewalks or  crosswalks | 43 | 33.1 | 736 | 31.4 | 29.5,33.3 |
| Access to a gym | 36 | 27.7 | 632 | 27.0 | 25.2,28.8 |
| Walking or exercise group | 35 | 26.9 | 594 | 25.4 | 23.6,27.2 |
| Recreational sports leagues | 26 | 20.0 | 472 | 20.1 | 18.6,21.8 |
| More programs or events | 26 | 20.0 | 445 | 19.0 | 17.4,20.7 |
| Don’t know | 18 | 13.9 | 320 | 13.7 | 12.3,15.4 |
| None | 14 | 10.8 | 301 | 12.8 | 11.5,14.3 |
| Stores within walking  distance | 11 | 8.5 | 185 | 7.9 | 6.8,9.1 |
| Increased neighborhood  safety | 9 | 6.9 | 205 | 8.7 | 7.6,10.0 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |
| **Which of the following gets in the way of you being more physically active or exercising?** | | | | | |
| Nothing gets in the way | 47 | 36.2 | 848 | 36.2 | 34.3,38.2 |
| Im too busy or don’t have  time | 33 | 25.4 | 543 | 23.2 | 21.5,25.0 |
| I don’t have access to a  gym or facility | 25 | 19.2 | 439 | 18.7 | 17.2,20.4 |
| Im too tired | 20 | 15.4 | 342 | 14.6 | 13.2,16.1 |
| I don’t have friends or a  group to exercise with | 18 | 13.9 | 310 | 13.2 | 11.9,14.7 |
| Im physically unable | 15 | 11.5 | 306 | 13.1 | 11.8,14.5 |
| I don’t like to exercise | 10 | 7.7 | 178 | 7.6 | 6.6,8.7 |
| It costs too much | 9 | 6.9 | 196 | 8.4 | 7.3,9.6 |
| Don’t know | 7 | 5.4 | 125 | 5.3 | 4.5,6.4 |
| Prefer not to say | 5 | 3.9 | 90 | 3.9 | 3.1,4.7 |
| Its not important to me | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| **What makes it hard to eat healthy?** | | | | | |
| Health foods costs too  much | 41 | 31.5 | 741 | 31.6 | 29.7,33.5 |
| There aren’t places in my  community to buy healthy  food | 40 | 30.8 | 658 | 28.1 | 26.3,29.9 |
| Its hard to find healthy  choices when you eat  outside the home | 29 | 22.3 | 587 | 25.1 | 23.3,26.9 |
| Nobody in my family  would eat it | 10 | 7.7 | 227 | 9.7 | 8.5,11.0 |
| It takes too much time to  prepare and shop for  healthy food | 24 | 18.5 | 454 | 19.4 | 17.8,21.0 |
| Don’t know | 13 | 10.0 | 234 | 10.0 | 8.8,11.3 |
| Prefer not to say | 5 | 3.9 | 87 | 3.7 | 3.0,4.6 |
| I don’t know how to  prepare the food we like | 3 | 2.3 | 47 | 2.0 | 1.5,2.7 |

**Table 7. Health care services**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **How long has it been since you last visited a medical provider?** | | | | | |
| Within the past year | 103 | 79.8 | 1849 | 79.5 | 77.8,81.1 |
| Between 1-2 years ago | 13 | 10.1 | 239 | 10.3 | 9.1,11.6 |
| More than 2 years ago but  less than 5 | 6 | 4.7 | 111 | 4.8 | 3.9,5.7 |
| 5 or more years ago | 2 | 1.6 | 38 | 1.6 | 1.2,2.3 |
| Never | 4 | 3.1 | 73 | 3.1 | 2.5,3.9 |
| Don’t know | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |
| **Which of the following preventive health services have you used in the past year** | | | | | |
| Routine blood pressure | 64 | 49.2 | 1198 | 51.0 | 49.1,53.2 |
| Flu shot | 61 | 46.9 | 1143 | 48.8 | 46.7,50.8 |
| Cholesterol check | 47 | 36.2 | 902 | 38.5 | 36.5,40.5 |
| Mammography | 35 | 26.9 | 600 | 25.6 | 23.8,27.4 |
| Pap smear | 23 | 17.7 | 395 | 16.9 | 15.4,18.5 |
| Health fair labs | 23 | 17.7 | 405 | 17.3 | 15.8,18.9 |
| Children’s checkup | 22 | 16.9 | 372 | 15.9 | 14.5,17.5 |
| Colonoscopy | 17 | 13.1 | 336 | 14.3 | 13.0,15.8 |
| None | 16 | 12.3 | 289 | 12.3 | 11.0,13.7 |
| Prostate | 6 | 4.6 | 149 | 6.3 | 5.4,7.4 |
| Don’t know | 2 | 1.5 | 35 | 1.5 | 1.1,2.1 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| **Are you aware of programs that help people pay for health care expenses?** | | | | | |
| Yes | 73 | 57.5 | 1309 | 57.1 | 55.1,59.2 |
| No | 35 | 27.6 | 641 | 28.0 | 26.2,29.9 |
| Don’t know | 18 | 14.2 | 324 | 14.1 | 12.8,15.6 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | .05,1.2 |

**Table 8. Access to Health Care**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **In the past 12 months, was there a time when you or a member of your household thought you needed health care services but did not get or delayed getting health services? (n=130)** | | | | | |
| Yes | 35 | 27.8 | 622 | 27.4 | 25.6,29.3 |
| No | 85 | 67.5 | 1539 | 67.7 | 65.8,69.7 |
| Prefer not to say | 2 | 1.6 | 35 | 1.5 | 1.1,2.2 |
| Don’t know | 4 | 3.2 | 76 | 3.3 | 2.7,4.2 |
| **What were the most important reasons you did not receive health care services? (n=xxx)** | | | | | |
| It costs too much | 15 | 11.5 | - | - | - |
| No insurance | 12 | 9.2 | - | - | - |
| Availability of services | 8 | 6.2 | - | - | - |
| Insurance wouldn’t cover  it | 7 | 5.4 | - | - | - |
| Too long to wait for an  appointment | 5 | 3.9 | - | - | - |
| Do not like health care  providers in this area | 4 | 3.1 | - | - | - |
| No treated with respect | 3 | 2.3 | - | - | - |
| Could not get off work | 2 | 1.5 | - | - | - |
| Office not open when I  could go | 2 | 1.5 | - | - | - |
| Could not get an  appointment | 2 | 1.5 | - | - | - |
| Too nervous or afraid | 2 | 1.5 | - | - | - |
| Don’t know | 2 | 1.5 | - | - | - |
| Prefer not to say | 1 | 0.8 | - | - | - |
| Language barrier | 0 | 0 | - | - | - |
| Had no one to care for the  children | 0 | 0 | - | - | - |

**Table 9. Dental Care**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=xxx)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **About how long has it been since you last visited a dentist for any reason?** | | | | | |
| Within the past year | 62 | 48.1 | 1133 | 48.7 | 46.7,50.8 |
| Within the past 2 years | 26 | 20.2 | 469 | 20.2 | 18.6,21.9 |
| 2 or more years ago | 31 | 24.0 | 547 | 23.5 | 21.8,25.3 |
| Don’t know | 6 | 4.7 | 108 | 4.6 | 3.8,5.6 |
| Never | 3 | 2.3 | 52 | 2.3 | 1.7,3.0 |
| Prefer not to say | 1 | 0.8 | 14 | 0.8 | 0.5,1.2 |
| **What was the main reason you did not visit the dentist in the last year?** | | | | | |
| Could not afford/cost/too  expensive | 15 | 11.5 | - | - | - |
| No insurance | 12 | 9.2 | - | - | - |
| Dislike going | 7 | 5.4 | - | - | - |
| Dentist too far away | 7 | 5.4 | - | - | - |
| Didn’t think about it/low  priority | 6 | 4.6 | - | - | - |
| Do not have/know a  dentist | 6 | 4.6 | - | - | - |
| Don’t need it/no dental  problems | 6 | 4.6 | - | - | - |
| Fear, apprehension,  nervousness, pain | 5 | 3.9 | - | - | - |
| Did not have time | 4 | 3.1 | - | - | - |
| No teeth | 2 | 1.5 | - | - | - |
| Other ailments prevent  dental care | 1 | 0.8 | - | - | - |
| Lack of transportation | 1 | 0.8 | - | - | - |
| Hours aren’t convenient | 1 | 0.8 | - | - | - |
| Don’t know | 1 | 0.8 | - | - | - |
| Prefer not to say | 1 | 0.8 | - | - | - |
| Could not get an  appointment | 0 | 0 | - | - | - |

**Table 10. Access to Care**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **In your opinion, what would improve Mineral County’s access to health care?** | | | | | |
| More primary care  providers | 54 | 41.5 | 927 | 39.6 | 37.6,41.6 |
| Availability of visiting  specialists | 45 | 34.6 | 895 | 38.2 | 36.2,40.2 |
| Availability of walk-in  clinic | 41 | 31.5 | 765 | 32.7 | 30.8,34.6 |
| Transportation assistance | 30 | 23.1 | 510 | 21.8 | 20.1,23.5 |
| Improved quality of care | 29 | 22.3 | 549 | 23.4 | 21.8,25.2 |
| Don’t know | 21 | 16.2 | 382 | 16.3 | 14.8,17.9 |
| Telemedicine | 20 | 15.4 | 321 | 13.7 | 12.3,15.2 |
| Health education  resources | 13 | 10.0 | 215 | 9.2 | 8.0,10.4 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| **What services would you use if you knew they were available in Mineral County?** | | | | | |
| Dentist | 52 | 40.0 | 950 | 40.5 | 38.6,42.6 |
| Chiropractor | 43 | 33.1 | 798 | 34.1 | 32.1,36.0 |
| Don’t know | 24 | 18.5 | 469 | 20.3 | 18.4,21.7 |
| General surgery | 23 | 17.7 | 408 | 17.4 | 15.9,19.0 |
| Acupuncturist | 23 | 17.7 | 388 | 16.5 | 15.1,18.1 |
| Chronic pain specialist | 21 | 16.2 | 360 | 15.4 | 13.9,16.9 |
| Colonoscopy | 19 | 14.6 | 327 | 14.0 | 12.6,15.5 |
| Psychiatric services | 17 | 13.1 | 287 | 12.3 | 11.0,13.7 |
| OB/GYN | 15 | 11.5 | 230 | 9.8 | 8.7,11.1 |
| Diabetes Nurse Educator | 10 | 7.7 | 172 | 7.4 | 6.4,8.5 |
| Prefer not to say | 5 | 3.9 | 79 | 3.4 | 2.7,4.2 |

**Table 11. How often do you use your seat belts when you drive or ride in a car?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| Always | 101 | 78.9 | 1770 | 76.6 | 74.9,78.3 |
| Nearly always | 22 | 17.2 | 446 | 19.3 | 17.7,21.0 |
| Sometimes | 4 | 3.1 | 76 | 3.3 | 2.6,4.1 |
| Seldom | 0 | 0 | 0 | 0 | 0,0 |
| Never | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| Never ride or drive in a car | 0 | 0 | 0 | 0 | 0,0 |
| Don’t know | 0 | 0 | 0 | 0 | 0,0 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |

**Table 12. Tobacco Use**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=xxx)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **Do you use tobacco?** | | | | | |
| Yes | 33 | 26.0 | 581 | 25.4 | 23.6,27.3 |
| No | 94 | 74.0 | 1707 | 74.6 | 72.7,76.4 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |
| **How often do you use tobacco?** | | | | | |
| Every day | 27 | 87.1 | - | - | - |
| Few times a week | 2 | 6.5 | - | - | - |
| Few times a month | 0 | 0 | - | - | - |
| Only from time to time | 2 | 6.5 | - | - | - |
| Don’t know | 0 | 0 | - | - | - |
| Prefer not to say | 0 | 0 | - | - | - |
| **Where would you go for help if you wanted to quit tobacco?** | | | | | |
| Don’t know | 13 | 10.0 | - | - | - |
| Montana Quitline | 8 | 6.2 | - | - | - |
| Health care provider | 4 | 3.1 | - | - | - |
| Health department | 2 | 1.5 | - | - | - |
| Prefer not to say | 2 | 1.5 | - | - | - |

**Table 13. Domestic Violence**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **Do you feel domestic violence is an issue in our community?** | | | | | |
| Yes | 72 | 56.7 | 1325 | 57.9 | 55.8,59.9 |
| No | 11 | 8.7 | 193 | 8.4 | 7.3,9.7 |
| Don’t know | 43 | 33.9 | 753 | 32.9 | 31.0,34.9 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| **What do you feel can be done in Mineral County to help those dealing with domestic violence?** | | | | | |
| Holding abusers  accountable | 46 | 35.4 | - | - | - |
| Safe housing | 34 | 26.2 | - | - | - |
| Advocates to assist | 34 | 26.2 | - | - | - |
| Education for family /  friends | 33 | 25.4 | - | - | - |
| Treatment for abusers | 31 | 23.9 | - | - | - |
| Help with finances | 23 | 17.7 | - | - | - |
| Don’t know | 6 | 4.6 | - | - | - |
| Prefer not to say | 2 | 1.5 | - | - | - |
| **Where would you refer someone for domestic violence?** | | | | | |
| Helpline locally | 54 | 41.5 | 999 | 42.6 | 40.6,44.6 |
| Don’t know | 33 | 25.4 | 606 | 25.9 | 24.1,27.7 |
| Faith leader | 26 | 20.0 | 442 | 18.8 | 17.3,20.5 |
| Mental Health Provider | 26 | 20.0 | 485 | 20.7 | 19.1,22.4 |
| Medical provider | 25 | 19.2 | 421 | 18.0 | 16.5,19.6 |
| YWCA in Missoula | 15 | 11.5 | 252 | 10.8 | 9.6,12.1 |
| Friend | 12 | 9.2 | 218 | 9.3 | 8.2,10.6 |

**Table 14. Referral for Mental Health and Substance Abuse**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **Where would you refer someone for mental health services in Mineral County?** | | | | | |
| Don’t know | 44 | 33.9 | 837 | 35.7 | 33.8,37.7 |
| Choices for Change  Counseling | 39 | 30.0 | 689 | 29.4 | 27.6,31.3 |
| Partnership Health Center | 39 | 30.0 | 662 | 28.3 | 26.4,30.1 |
| Doctor/PA | 28 | 21.5 | 474 | 20.2 | 18.6,21.9 |
| Faith-based leader | 22 | 16.9 | 388 | 16.6 | 15.1,18.2 |
| Emergency room | 12 | 9.2 | 205 | 8.8 | 7.7,10.0 |
| Friend | 5 | 3.9 | 96 | 4.1 | 3.4,5.0 |
| Prefer not to say | 3 | 2.3 | 52 | 2.2 | 1.7,2.9 |
| **Where would you refer someone for substance abuse services/treatment for alcohol or drug addiction in Mineral County?** | | | | | |
| Alcohol / Narcotics  Anonymous | 47 | 36.2 | 821 | 35.1 | 33.1,37.0 |
| Choices for Change  Counseling | 45 | 34.6 | 796 | 34.0 | 32.1,36.0 |
| Partnership Health Center | 32 | 24.6 | 539 | 23.0 | 21.3,24.8 |
| Don’t know | 30 | 23.1 | 586 | 25.0 | 23.3,26.8 |
| Doctor/PA | 22 | 16.9 | 380 | 16.2 | 14.8,17.8 |
| Faith-based leader | 21 | 16.2 | 373 | 15.9 | 14.5,17.5 |
| Emergency room | 10 | 7.7 | 161 | 6.9 | 5.9,8.0 |
| Friend | 7 | 5.4 | 123 | 5.3 | 4.4,6.3 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |

**Table 15. Health Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **What would be your top three sources of information in a large scale disaster or emergency in Mineral County?** | | | | | |
| Television | 75 | 57.7 | 1383 | 59.0 | 57.0,61.0 |
| Social media | 52 | 40.0 | 894 | 38.1 | 36.2,40.1 |
| Radio | 43 | 33.1 | 729 | 31.1 | 29.2,33.0 |
| Word of mouth | 43 | 33.1 | 759 | 32.4 | 30.5,34.3 |
| Texting | 43 | 33.1 | 813 | 34.7 | 32.8,36.7 |
| Neighbors | 43 | 33.1 | 799 | 34.1 | 32.2,36.1 |
| News website | 38 | 29.2 | 677 | 28.9 | 27.1,30.8 |
| Other website | 14 | 10.8 | 297 | 12.7 | 11.4,14.1 |
| Newspaper | 12 | 9.2 | 207 | 8.9 | 7.8,10.1 |
| Don’t know | 4 | 3.1 | 65 | 2.8 | 2.2,3.5 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |
| **How do you learn about health services or health-related information in Mineral County?** | | | | | |
| Friends/family | 81 | 62.3 | 1445 | 61.6 | 59.6,63.6 |
| Word of mouth | 66 | 50.8 | 1146 | 48.9 | 46.9,50.9 |
| Health care provider | 37 | 28.5 | 640 | 27.3 | 25.5,29.2 |
| Mailings/newsletters | 36 | 27.7 | 587 | 25.1 | 23.3,26.9 |
| Social media | 33 | 25.4 | 554 | 23.7 | 22.0,25.4 |
| Website/internet | 20 | 15.4 | 345 | 14.7 | 13.3,16.2 |
| Television | 18 | 13.9 | 376 | 16.0 | 14.6,17.6 |
| Newspaper | 16 | 12.3 | 294 | 12.6 | 11.3,14.0 |
| Public health | 16 | 12.3 | 286 | 12.2 | 10.9,13.6 |
| Radio | 8 | 6.2 | 138 | 5.9 | 5.0,6.9 |
| Don’t know | 7 | 5.4 | 114 | 4.9 | 4.1,5.8 |
| Presentations | 4 | 3.1 | 62 | 2.6 | 2.0,3.4 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |

**Table 16. Educational Programs and Aging Services**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **What educational classes/programs would you be most interested in?** | | | | | |
| Health and wellness | 40 | 30.8 | 683 | 29.1 | 27.3,31.0 |
| Fitness | 37 | 28.5 | 619 | 26.4 | 24.7,28.3 |
| First aid/CPR | 33 | 25.4 | 565 | 24.1 | 22.4,25.9 |
| Weight loss | 27 | 20.8 | 501 | 21.4 | 19.8,23.1 |
| Nutrition | 23 | 17.7 | 378 | 16.1 | 14.7,17.7 |
| Mental Health | 22 | 16.9 | 356 | 15.2 | 13.8,16.7 |
| Don’t know | 22 | 16.9 | 382 | 16.3 | 14.9,17.9 |
| Alzheimer’s | 21 | 16.2 | 376 | 16.1 | 14.6,17.6 |
| Health insurance/ACA | 21 | 16.2 | 373 | 15.9 | 14.5,17.5 |
| Support group | 16 | 12.3 | 340 | 14.5 | 13.1,16.0 |
| Diabetes | 15 | 11.5 | 268 | 11.4 | 10.2,12.8 |
| Grief counseling | 14 | 10.8 | 229 | 9.8 | 8.6,11.1 |
| Early childhood  development | 13 | 10.0 | 212 | 9.0 | 7.9,10.3 |
| Alcohol/substance abuse | 13 | 10.0 | 223 | 9.5 | 8.4,10.8 |
| Heart disease | 13 | 10.0 | 280 | 11.9 | 10.7,13.3 |
| Domestic violence | 12 | 9.2 | 207 | 8.9 | 7.8,10.1 |
| Parenting | 12 | 9.2 | 177 | 7.6 | 6.6,8.7 |
| Cancer | 11 | 8.5 | 207 | 8.8 | 7.7,10.1 |
| Smoking cessation | 6 | 4.6 | 81 | 3.4 | 2.8,4.3 |
| Prefer not to say | 4 | 3.1 | 70 | 3.0 | 2.4,3.8 |
| Lung-related conditions | 2 | 1.5 | 35 | 1.5 | 1.1,2.1 |
| **Which of the following aging services are you aware of in Mineral County?** | | | | | |
| Don’t know | 58 | 44.6 | 986 | 42.1 | 40.1,44.1 |
| LEIAP | 46 | 35.4 | 837 | 35.7 | 33.8,37.7 |
| Hospice care | 45 | 34.6 | 835 | 35.6 | 33.7,37.6 |
| Help with obtaining food | 34 | 26.2 | 643 | 27.4 | 25.7,29.3 |
| Assistance with  Medicare/Medicaid | 33 | 25.4 | 603 | 25.7 | 24.0,27.6 |
| Respite care | 20 | 15.4 | 386 | 16.5 | 15.0,18.0 |
| Area 6 Agency on Aging | 10 | 7.7 | 175 | 7.5 | 6.5,8.6 |
| Prefer not to say | 0 | 0 | 0 | 0 | 00,0 |

**Table 17. Demographics**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Frequency (n=130)** | **% Households** | **Projected Households** | **Projected %** | **95% CI** |
| **How many people, including yourself, live in your household?** | | | | | |
| 1 | 30 | 23.3 | 542 | 23.3 | 21.6,25.1 |
| 2 | 58 | 45.0 | 1014 | 43.6 | 41.6,45.7 |
| 3 | 12 | 9.3 | 199 | 8.6 | 7.5,9.8 |
| 4 | 11 | 8.5 | 179 | 7.7 | 6.7,8.9 |
| 5 | 12 | 9.3 | 281 | 12.1 | 10.8,13.5 |
| 6 | 4 | 3.1 | 76 | 3.3 | 2.6,4.1 |
| 7 | 0 | 0 | 0 | 0 | 0,0 |
| 8 | 2 | 1.6 | 35 | 1.5 | 1.1,2.1 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |
| **What gender do you identify with?** | | | | | |
| Male | 44 | 34.7 | 823 | 35.9 | 34.0,37.9 |
| Female | 83 | 65.4 | 1468 | 64.1 | 62.1,66.0 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |
| **What age range represents you?** | | | | | |
| 18-20 | 1 | 0.8 | 20 | 0.9 | 0.6,1.4 |
| 21-25 | 3 | 2.4 | 55 | 2.4 | 1.9,3.2 |
| 26-30 | 2 | 1.6 | 35 | 1.5 | 1.1,2.2 |
| 31-35 | 12 | 9.5 | 238 | 10.5 | 9.3,11.8 |
| 36-40 | 12 | 9.5 | 240 | 10.6 | 9.4,11.9 |
| 41-45 | 6 | 4.8 | 100 | 4.4 | 3.6,5.3 |
| 46-50 | 10 | 7.9 | 159 | 7.0 | 6.0,8.1 |
| 51-55 | 7 | 5.6 | 120 | 5.3 | 4.4,6.3 |
| 56-60 | 18 | 14.3 | 324 | 14.3 | 12.9,15.8 |
| 61-65 | 17 | 13.5 | 304 | 13.4 | 12.0,14.9 |
| 66-70 | 15 | 11.9 | 261 | 11.5 | 10.2,12.9 |
| 71-75 | 8 | 6.4 | 143 | 6.3 | 5.3,7.4 |
| 76+ | 14 | 11.1 | 256 | 11.3 | 10.0,12.7 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | 0.5,1.3 |
| **How do you describe your race or ethnicity?** | | | | | |
| Black or African American | 0 | 0 | 0 | 0 | 0,0 |
| Asian | 2 | 1.6 | 30 | 1.3 | 0.9,1.9 |
| American Indian or  Alaskan Native | 2 | 1.6 | 35 | 1.5 | 1.1,2.1 |
| White or Caucasian | 122 | 96.1 | 2209 | 96.4 | 95.6,97.1 |
| Native Hawaiian or Pacific  Islander | 0 | 0 | 0 | 0 | 0,0 |
| Hispanic or Latino | 0 | 0 | 0 | 0 | 0,0 |
| Don’t know | 0 | 0 | 0 | 0 | 0,0 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| **What is your employment status?** | | | | | |
| Employed full-time | 50 | 39.1 | 947 | 41.1 | 39.1,43.1 |
| Employed part-time | 12 | 9.4 | 202 | 8.7 | 7.6,10.0 |
| Retired | 44 | 34.4 | 785 | 34.1 | 32.1,36.0 |
| Student | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| Armed forces/military | 0 | 0 | 0 | 0 | 0,0 |
| Self-employed | 6 | 4.7 | 111 | 4.8 | 4.0,5.8 |
| Stay at home parent | 5 | 3.9 | 71 | 3.1 | 2.4,3.9 |
| Unable to work due to  illness or injury | 4 | 3.1 | 62 | 2.7 | 2.1,3.5 |
| Unemployed for less than  one year | 2 | 1.6 | 38 | 1.6 | 1.2,2.3 |
| Unemployed for more  than one year | 9 | 1.6 | 38 | 1.6 | 1.2,2.3 |
| Don’t know | 0 | 0 | 0 | 0 | 0,0 |
| Prefer not to say | 2 | 1.6 | 35 | 1.5 | 1.1,2.1 |
| **How long have you lived in Mineral County?** | | | | | |
| 0 to 5 years | 33 | 25.6 | 639 | 27.5 | 25.7,29.3 |
| 5 to <10 years | 12 | 9.3 | 210 | 9.0 | 7.9,10.3 |
| 10 to 15 years | 12 | 9.3 | 202 | 8.7 | 7.6,9.9 |
| 15 to 20 years | 20 | 15.5 | 334 | 14.4 | 13.0,15.9 |
| 20+ years | 51 | 39.5 | 924 | 39.7 | 37.7,41.7 |
| Prefer not to say | 1 | 0.8 | 17 | 0.8 | 0.5,1.2 |
| **What is your zip code?** | | | | | |
| Alberton | 20 | 15.8 | 309 | 13.4 | 12.1,14.9 |
| Deborgia | 10 | 7.9 | 184 | 8.0 | 7.0,9.2 |
| Haugan | 5 | 3.9 | 99 | 4.3 | 3.5,5.2 |
| Saltese | 5 | 3.9 | 87 | 3.8 | 3.1,4.7 |
| St. Regis | 25 | 19.7 | 490 | 21.3 | 19.7,23.0 |
| Superior | 62 | 48.8 | 1130 | 49.2 | 47.1,51.2 |
| Prefer not to say | 0 | 0 | 0 | 0 | 0,0 |
| **What is the highest grade level or year of school you completed?** | | | | | |
| Never attended school | 0 | 0 | 0 | 0 | 0,0 |
| Some grade school | 1 | 0.8 | 20 | 0.9 | 0.6,1.4 |
| Some high school | 6 | 4.7 | 154 | 6.6 | 5.7,7.7 |
| High school or GED | 35 | 27.1 | 682 | 29.3 | 27.5,31.2 |
| Some college or technical  school | 44 | 34.1 | 747 | 32.1 | 30.2,34.0 |
| College graduate | 42 | 32.6 | 706 | 30.3 | 28.5,32.3 |
| Prefer not to say | 1 | 0.8 | 14 | 0.8 | 0.5,1.2 |