We are of this place, not just from it.

COMMUNITY HEALTH NEEDS ASSESSMENT
FY 2020-2022
Essentia Health-St. Mary's Hospital-Superior
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgements</td>
<td>2</td>
</tr>
<tr>
<td>Executive Summary</td>
<td>3</td>
</tr>
<tr>
<td>Introduction</td>
<td>4</td>
</tr>
<tr>
<td>Essentia Health at a Glance</td>
<td>5</td>
</tr>
<tr>
<td>Hospital Service Area</td>
<td>6</td>
</tr>
<tr>
<td>Demographics &amp; Socioeconomic Factors</td>
<td>7</td>
</tr>
<tr>
<td>Evaluation of 2016-2019 Implementation Plan</td>
<td>8-10</td>
</tr>
<tr>
<td>2020 – 2022 CHNA Process &amp; Timeline</td>
<td>11</td>
</tr>
<tr>
<td>Assess &amp; Prioritize</td>
<td>12</td>
</tr>
<tr>
<td>Community Input</td>
<td>13</td>
</tr>
<tr>
<td>Key Findings</td>
<td>14-16</td>
</tr>
<tr>
<td>Design &amp; Conclusion</td>
<td>17</td>
</tr>
<tr>
<td>Implementation Plan</td>
<td>18-21</td>
</tr>
</tbody>
</table>

Appendix A – Data Presentation PowerPoint
Appendix B – Data Presentation Results
Appendix C – Prioritization Survey Results
Acknowledgements

This report is based on a collaborative process with the following community members and organizations. Essentia Health would like to express our gratitude to the many steering committee members and community members for their contribution to planning, development, and analysis of community health needs. Additional thanks to the community members who shared their expertise and helped us include the voices of diverse sectors of our community.

Lead Parties on the Assessment

Martina Mellang, Community Health Specialist
Terry Jacobson, Administrator, Essentia Health St. Mary’s-Superior
Cindy Freeberg, Douglas County Department of Health and Human Services
Liz Gilbertson, North Country Independent Living
Lynn Goerdt, University of Wisconsin-Superior
Jessie Peterson, Lake Superior Community Health Center
Chris Stenberg, Superior Douglas County Family YMCA
Kathy Ronchi, Douglas County Department of Health and Human Services
Dayle Patterson, Lake Superior Community Health Center

A vision for an Engaged, Connected, and Healthy Community

A healthy community is one that is knowledgeable, engaged, safe, connected, active, supportive, and respectful. A healthy community has strong partnerships between community agencies who plan policies and promote health. Our Community Health Needs Assessment Community Values:

Engaged
- A community where education is valued as part of the decision-making process and that building a sense of community is a daily activity.
- A community where individuals are empowered to actively engage in healthy behaviors.

Connected
- A community where understanding and respect of cultural differences enhances the community and each resident has the opportunity to live their life to the fullest with equal opportunity for all.
- A healthy community is one that is proactively supporting neighbors to be physically, spiritually and mentally healthy through community organizations that build trust and connectedness.

Healthy
- A community where quality health care is focused on prevention and respect.
- A healthy community provides access to healthy foods, parks and recreation, and support services to optimize wellness.
Executive Summary

St. Mary’s Hospital-Superior is part of Essentia Health, a nonprofit, integrated health system which cares for patients in Wisconsin, Minnesota, North Dakota and Idaho. Essentia Health is called to make a healthy difference in people’s lives. To fulfill that mission, we seek opportunities to both enhance the care we provide and improve the health of our communities.

Every three years, each Essentia Health hospital conducts a Community Health Needs Assessment (CHNA) to systematically identify, analyze and prioritize community health needs. The process is conducted in collaboration with many community partners including other health care systems, local public health departments, and organizations or individuals that represent broad interests in the community, including those members of medically underserved, low-income, and populations that are at higher health risk.

Once priority health needs are identified, the St. Mary’s Hospital-Superior Community Health Steering Committee designed an implementation strategy to address the needs with internal stakeholders and community partners. The plan is designed to leverage existing community strengths and resources available to improve health.

From October 2018-May 2019, the St. Mary’s Hospital-Superior Community Health Steering Committee analyzed data, convened community partners, sought input from community members, and led a process to identify the following priority areas for the 2020-2022 Community Health Needs Assessment:

- Mental health
- Healthy living/heart conditions
- Substance abuse

The 2020-2022 Implementation Plan outlines the multiple objectives, activities and strategies to address each priority area.

**Mental health goals:** Youth and adults in Douglas County experience mental well-being and resilience

**Healthy living/heart conditions goals:** The community has access to healthy eating and active living opportunities

**Substance abuse goals:** Youth and adults in Douglas County are substance-free
Introduction

Essentia Health is called to make a healthy difference in people’s lives. To fulfill that mission, we seek opportunities to both enhance the care we provide and improve the health of our communities. In conducting the Community Health Needs Assessment, Essentia Health has collaborated with community partners to embrace these guiding principles:
Headquartered in Duluth, Minnesota, Essentia Health combines the strengths and talents of 14,400 employees, who serve our patients and communities through the mission of being called to make a healthy difference in people’s lives.

St. Mary’s Hospital-Superior is a part of Essentia Health, a health care system that provides care to individuals in Wisconsin, Minnesota, North Dakota and Idaho. Established in 1963 as Superior Memorial Hospital, the Superior campus is a 25-bed critical care hospital providing a number of specialty services to Superior residents.

St. Mary’s Hospital-Superior is the only acute-care facility in Douglas County. The nearest tertiary care center is in Duluth, Minnesota. Additional hospitals are located more than 60 miles away. Existing health care facilities within the defined service area include the Twin Ports Veterans Administration Clinic (Superior), Mariner Medical Clinic (Superior), Essentia Health St. Mary’s-Superior Clinic (Superior) and the Lake Superior Community Health Center (Superior). Douglas County Public Health and Human Services’ main office is in Superior.

**Caring for our community:** Our commitment to our community’s health and wellness goes well beyond the work of the Community Health Needs Assessment. Through contributions with numerous community organizations we’re working together with our communities to improve the health and vitality of our neighborhoods. In addition, we’re proud to say our employees donated their time and talents to a variety of programs and outreach efforts. Our community investments are designed to promote better health, help lessen inequities in our communities, improve access to health care and strengthen the fabric of our communities.
Hospital Service Area

For the purposes of this assessment, community is defined as the St. Mary’s Hospital-Superior planning area combined with the ZIP codes where 80 percent of inpatients resided for fiscal year 2018. This includes the ZIP codes of 54880 (Superior) and smaller zip codes of northwestern Wisconsin. The community was defined based on the hospital’s ability to have the greatest impact with the available resources. The hospital is committed to building and sustaining partnerships with area organizations in order to extend its reach to all areas within this region.

Due to the region’s rural nature, data for populations smaller than county level are frequently unavailable or of limited value. Therefore, in the following assessment, data are presented at the county and state level to ensure stability of the estimates. When available, ZIP code or census tract level data will supplement the county level information to provide a deeper understanding of the health needs of the community.
Demographics & Socioeconomic Factors

Table A. Overall demographics (2016)

<table>
<thead>
<tr>
<th></th>
<th>Douglas County</th>
<th>Superior</th>
<th>Wisconsin</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Population</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population</td>
<td>43,705</td>
<td>26,676</td>
<td>5,754,798</td>
</tr>
<tr>
<td>Population age 65 and over (%)</td>
<td>16.30%</td>
<td>14.70%</td>
<td>14.29%</td>
</tr>
<tr>
<td><strong>Poverty</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Median household income</td>
<td>$48,190</td>
<td>$41,030</td>
<td>$54,610</td>
</tr>
<tr>
<td>People of all ages living in poverty (%)</td>
<td>15.50%</td>
<td>20.30%</td>
<td>12.70%</td>
</tr>
<tr>
<td>People under 18 years living in poverty (%)</td>
<td>19.00%</td>
<td>25.20%</td>
<td>17.50%</td>
</tr>
<tr>
<td>Unemployment rate</td>
<td>4.10%</td>
<td>4.10%</td>
<td>3.70%</td>
</tr>
<tr>
<td><strong>Educational Attainment</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school graduate or higher, person’s age 25 years (%)</td>
<td>93.60%</td>
<td>93.50%</td>
<td>91.70%</td>
</tr>
<tr>
<td>Population ages 25+ with bachelor’s degree or higher</td>
<td>22.80%</td>
<td>22.40%</td>
<td>28.30%</td>
</tr>
<tr>
<td><strong>Housing</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent of owner-occupied homes (%)</td>
<td>67.60%</td>
<td>55.30%</td>
<td>67%</td>
</tr>
<tr>
<td>Population spending more than 30% of income on rent (%)</td>
<td>44.60%</td>
<td>45.60%</td>
<td>46.70%</td>
</tr>
<tr>
<td><strong>Transportation</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Households with no motor vehicle available (%)</td>
<td>7.80%</td>
<td>11.40%</td>
<td>7%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau 2016, American Community Survey

Table B. Race/Ethnicity Distribution (2016)

<table>
<thead>
<tr>
<th>Race Distribution – Superior, WI</th>
<th>2016</th>
<th>Percent</th>
<th>2015</th>
<th>Percent</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population</td>
<td>26,676</td>
<td>100.00%</td>
<td>26,817</td>
<td>100.00%</td>
<td>-0.53%</td>
</tr>
<tr>
<td>One Race</td>
<td>25,909</td>
<td>97.10%</td>
<td>25,962</td>
<td>96.80%</td>
<td>-0.20%</td>
</tr>
<tr>
<td>White</td>
<td>24,450</td>
<td>91.70%</td>
<td>24,653</td>
<td>91.90%</td>
<td>-0.82%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>441</td>
<td>1.70%</td>
<td>409</td>
<td>1.50%</td>
<td>7.82%</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>467</td>
<td>1.80%</td>
<td>379</td>
<td>1.40%</td>
<td>23.22%</td>
</tr>
<tr>
<td>Asian</td>
<td>428</td>
<td>1.60%</td>
<td>436</td>
<td>1.60%</td>
<td>-1.83%</td>
</tr>
<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>0</td>
<td>0.00%</td>
<td>0</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Other Race</td>
<td>123</td>
<td>0.50%</td>
<td>85</td>
<td>0.30%</td>
<td>44.71%</td>
</tr>
<tr>
<td>Two or More Races</td>
<td>767</td>
<td>2.90%</td>
<td>855</td>
<td>3.20%</td>
<td>-10.29%</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>434</td>
<td>1.60%</td>
<td>354</td>
<td>1.30%</td>
<td>22.60%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau 2014-2016, American Community Survey

Residents of this county are increasingly older, have lower incomes, experience higher rates or poverty and lower education levels. The region’s rural nature makes transportation and isolation two barriers to accessing care. Poverty, education, age and race are all factors contributing to inequitable health outcomes. Poverty is not evenly distributed across racial/ethnic groups, ages or educational levels.
Evaluation of 2016–2019 Implementation Plan

During 2016–2019, St. Mary’s Hospital-Superior addressed significant needs identified in the 2016 assessment: physical inactivity, alcohol and other drugs, mental health, and tobacco use. Some activities were led by the hospital, while others were part of larger collaborative efforts with local partners. The following describes significant accomplishments and outcomes.

Priority Area #1: Physical Inactivity

In 2017, St. Mary’s Hospital-Superior began offering a free weekly yoga class in Poplar, Wisconsin. Yoga offers many benefits, including increased muscle strength, flexibility, energy, vitality and weight loss. On average, 27 individuals attended each week and more than 75 individuals have been impacted. Participants stated they enjoyed the class, would continue to attend, and that the class helps them to reduce stress in their lives.

St. Mary’s Hospital-Superior supports the Superior Douglas County YMCA’s National Diabetes Prevention Program. As of January 2017, the program has registered 40 participants, all reaching for a goal of 5-7% weight loss and 150 minutes of physical activity per week to help reduce their risk of developing diabetes. This has been a successful program in the Superior area with about five classes starting each year. Participants are averaging 8% weight loss.

A bike share program, called Zagster, was implemented in Superior in September 2018. Bike stations were erected at the Millennium Trail head, Center City Park, University of Wisconsin-Superior campus, and Barkers Island. From September 2018 through April 2019, there have been 243 rentals, which breaks down to 126 hours of total ride time and a total of 1,012 miles.

St. Mary’s Hospital-Superior partnered with South End Days to sponsor the Webster Dream Park’s mission of building an inclusive, all-abilities community playground. This first of its kind all-inclusive playground was inspired by an 8-year-old girl who wanted to see more play areas for kids of all abilities. This project aligns with Essentia Health’s priority to get youth of all ages and abilities active.
Priority Area #2: Alcohol and Other Drugs

St. Mary’s Hospital-Superior participates in a coalition for AODA (Alcohol and Other Drug Abuse) issues. The Alcohol and Other Drug Abuse Community Coalition of Douglas County partnered with Essentia Health and participated in a large community town hall event in February 2017. The event featured speakers and a “Hidden in Plain Sight” mock room to help community members spot the signs of AODA-related issues. It drew attendees from across Douglas County. In 2018, three community drug addiction awareness events were held at Superior Middle School, Solon Springs School and Northwestern High School. Participants learned about local resources to get help for families and loved ones impacted by drug abuse and toured the “Hidden in Plain Sight” mock rooms. The AODA coalition coordinated the “Be Drug-Free” event in 2019 at Superior Middle School and offered the Elk’s Drug Quiz Show and mock rooms showing parents hidden signs of substance use in a bedroom.

Priority Area #3: Mental Health

St. Mary’s Hospital-Superior has helped lead a Mental Health Community Response Coalition (MHCCR). This coalition helps increase access to mental health services, raise awareness for mental health issues, and provide person-centered care. There are over 20 community partners in this group and several active initiatives. These initiatives include Youth Mental Health First Aid, which teaches parents, family members, school staff, peers, health and human services workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis. The National Alliance on Mental Illness (NAMI) has partnered with St. Mary’s Hospital-Superior to offer free programs for the community. In October 2018, 30 people attended the Minority Mental Health Presentation. In November 2018, 12 people attended the Managing Mental Health and Stress During the Holidays class and 10 people attended the Veterans Mental Health presentation. In March 2019, 24 people attended the QPR (Question, Persuade, Refer) Suicide Awareness and Prevention Training. Since October 2018 there have been eight presentations of “In Our Own Voice” with over 300 participants who have learned about reducing mental health stigma.

St. Mary’s Hospital-Superior partnered with the Superior High School’s One Circle Curriculum in 2018. This is a strength-based curriculum that incorporates positive youth development and works on building social-emotional competencies while also specifically addressing issues of healthy relationships, violence, and substance abuse. This curriculum addresses mental health, which is one of the highest health priorities for Superior High School students.
The Superior Fire Department was adamant about addressing mental health. With the loss of a fellow firefighter last spring to suicide, the department has focused on bringing more awareness and resources to all aspects of mental health to the region, including post-traumatic stress syndrome, resilience and the impacts of trauma. St. Mary’s Hospital-Superior supported the Peer Support two-day intensive training class led by instructors from the International Association of Fire Fighters. This training was attended by 30 people from multiple agencies including the Duluth Fire Department, Superior Fire Department, Superior Police Department, St. Louis County dispatchers, Douglas County dispatchers, Cloquet Fire Department, Hibbing Fire Department, Virginia Fire Department and Gold Cross paramedics. The class was designed to provide and practice skills to become an effective peer counselor. Skills included how to approach a fellow firefighter of concern; establishing trust and confidentiality; providing support and determining whether a crisis is developing; referring to available resources; and educating others about behavioral health. The Superior Fire Department will continue to offer peer-related training courses to support mental health.

**Priority Area #4: Tobacco Use**

St. Mary’s Hospital-Superior is focusing on increasing key partnerships with community stakeholders such as the University of Wisconsin-Superior and local law enforcement, as well as increasing its role in community-based advocacy to strengthen the impact and changes related to the Community Health Needs Assessment priorities.

The hospital is looking to increase the community’s capacity to address tobacco cessation through ensuring more community organizations are trained to provide tobacco cessation education.

St. Mary’s Hospital-Superior hosted a Nicotine Dependence Center Tobacco Treatment Specialist Certification Program. This accredited program from the Mayo Clinic provided the Superior area with certified tobacco treatment specialists to help incorporate nicotine-dependent treatment into their current practices and developed a service to meet the needs of tobacco-dependent patients. Partners who attended this training included Fond du Lac, St. Luke’s, Duluth Area Family YMCA, Itasca Public Health, the Human Development Center, Lake Superior Community Health Center, and Halvor Lines in addition to Essentia Health staff. St. Mary’s Hospital-Superior now has three certified tobacco treatment specialists.

To address the vaping epidemic, Essentia Health’s Tobacco Cessation Program Supervisor facilitated an informational event for parents and teachers to educate them on the dangers and rising use of tobacco products including e-cigarettes known as “vapes.” The event in the fall semester of 2018 sparked the need for more parent and teacher education. An Essentia Health pediatrician partnered with the American Lung Association to create a short film presentation on the vaping epidemic to share with more schools in Douglas County. The informational film was posted on the Superior High School website.
2020-2022 Essentia Health CHNA Process and Timeline

Essentia Health’s Community Health Advisory Committee developed a shared plan for the 15 hospitals within the system. The plan was based on best practices from the Catholic Hospital Association and lessons learned from the 2016-2019 CHNA process. The process was designed to:

- Incorporate input from persons representing broad interests of the community
- Collaborate with local public health and other health care providers
- Utilize multiple sources of public health data to make data-driven decisions

Each of the 15 hospitals worked with community partners to carry out the plan in their service area. Aspects of the plan were adapted to meet the unique needs of each location. Hospital leadership teams and local hospital boards received and approved each implementation plan, followed by final approval by the Essentia Health Board of Directors. The following visual describes the assessment steps and timeline.

**Timeline**

**ASSESS** (October-December 2018)
- Define Service Area
- Service Area Demographics
- Select Health Status Indicators
- Analyze Data & Inventory available resources

- Choose Prioritization Process
- Prioritize Issues
- Justify needs that will not be addressed and provide reasoning why
- Gather Community Input on Priority Issues

**DESIGN** (January-April 2019)
- Develop Goals and Measurable Objectives
- Choose Strategies and Tactics
- Identify the “team” and resources for each strategy
- Identify Performance Indicators

**FINALIZE** (May - June 2019)
- Prepare reports, and review with key stakeholders for final feedback
- Present to Hospital Board for Approval
- Share results and action plans with key stakeholders and leaders systemwide
- Post to website, and share plan with the broader community

**Adoption of implementation strategy:**

The Community Health Needs Assessment and Implementation Strategy was approved by Essentia Health East Region Board of Directors approved on May 2, 2019
Assess

In October 2018, the St. Mary’s Hospital-Superior Community Health Steering Committee met for the first time to launch the Community Health Needs Assessment. This committee gathered 10 stakeholders who represented the broad interests of the community. Agencies representing this committee included: Douglas County Department of Health and Human Services, North Country Independent Living, University of Wisconsin-Superior, Lake Superior Community Health Center, and the Superior Douglas County Family YMCA. This committee’s first task was to create a vision for a healthy community. The vision statement and list of values can be found on Page 3 of this report.

In November 2018, the committee reviewed secondary data that was collected and analyzed through [www.bridginghealthnorth.org](http://www.bridginghealthnorth.org), a web-based community health data platform developed by Conduent Healthy Communities Institute. The site brings non-biased data, local resources, and reporting tools to one accessible, user-friendly location. The site includes a comprehensive dashboard of over 100 community indicators covering over 20 topics in the areas of health, determinants of health, and quality of life. The data is primarily derived from state and national data sources including: Bridge to Health Survey, Minnesota Department of Health, Minnesota Student Survey and County Health Rankings. See Appendix A for the data presentation PowerPoint. Due to the rural nature of the community, data for populations smaller than county level are frequently unavailable or of limited value. In the assessment, data are presented at the county and state level, and when available, ZIP code or census tract.

After a full set of the data was presented, each committee member wrote down health indicators on Post-It notes that stood out to them based on the Douglas County data presented. Post-It notes were displayed on the wall to show themes and get a better idea of the most pressing health issues. Mental health, social determinants of health, diabetes, obesity, maternal health, heart conditions, cancer, and older adults were the top-rated health indicators. See Appendix B for the full results from the data presentation.

Prioritize

The data review process included feedback from the St. Mary’s Hospital-Superior Community Health Steering Committee. Steering Committee members filled out a survey to determine the top three health priority areas the committee would address over the next three years. Mental health and alcohol, tobacco and other drugs (substance abuse) tied for first. Heart conditions and obesity tied for second. The committee agreed to address heart conditions and obesity together. See Appendix C for the survey results. In no specific order of importance, the three health priorities identified for action are:

- Mental health
- Healthy lifestyles/heart conditions
- Substance abuse

Significant needs not addressed in the CHNA: Other issues identified through the process but not included among the top three priorities included social determinants of health, older adults and aging, and maternal health. These needs will be address in part through the selected priorities as they are interrelated. Additionally, Essentia Health already collaborates with local partners to address these specific issues in the communities.
Community Input

After priority issues were identified through reviewing data and the formal prioritization process, St. Mary’s Hospital-Superior solicited broad feedback from the community on the priorities chosen and how to address the needs.

Community input was primarily gathered through focus groups, key informant interviews, and online surveys. Over the course of two months, more than 100 community members provided input on the priority issues in their community. Each member of the St. Mary’s Hospital-Superior Community Health Steering Committee facilitated focus groups within the community to get more feedback on the root causes, partners who should be involved and some solutions to address mental health, substance abuse, and obesity/heart conditions.

Four key questions were asked to discern community strengths, health issues and barriers.

1. Do you confirm the top three priorities?
2. What are the strengths and weaknesses in this community related to those priorities?
3. What partners should be involved to help address the priorities?
4. What are some solutions?

The focus groups used the Results Based Accountability format to get feedback from the community on the strengths and barriers of each of the three priority areas. Each focus group was presented with an indicator or data set to clearly understand the current conditions and where improvements needed to be. This approach helped identify root causes, partners who could be involved and solutions to the three health priority areas. Focus groups were limited to an hour and promoted a safe space to have an open dialogue.

Participants in focus groups or key informant interviews came from the following areas:

- Twin Ports Patient and Family Advisory Council
- Independent Living
- Superior Douglas County Family YMCA-Staff
- Silver Sneakers participants
- Dove Home Health Professionals
- Wisconsin Indianhead Technical College
- Aging & Disability Resource Center
- Public Health
- High school students
- Parish nurses
- Essentia Health St. Mary’s-Superior managers
- Superior area ministerium
- Twin Ports Patient and Family Advisory Council
- Mental Health Community Coordinated Response
- Superior school nurses
- University of Wisconsin-Superior
Key Findings

Priority #1 Mental Health

Supporting Data:

- In 2015, almost 11% of adults reported more than 14 days of poor mental health (Bridging Health Survey, 2015).
- In 2015, 23% of adults in Douglas County reported having depression compared to 9.6% in 2000 (Bridging Health Survey, 2015).
- In 2017, 27% of high school students in Wisconsin reported feeling sad or hopeless compared to 24.6% in 2013 (Youth Risk Behavior Survey, WI High School Report, 2017)

Community Input:

There were many comments about the Wisconsin reimbursement rates for mental health and behavioral health services. Community members see the need to advocate at the federal level to increase the reimbursement rates and the types of licensure a provider can offer. Schools are also looking for more resources and providers to meet the mental health needs of youth. Isolation is also a barrier due to the rural setting of the towns and villages in Douglas County.

Community Strengths and Resources Available:

The services provided for mental and behavioral health differ between Duluth and Superior. More is being done to bridge this gap so that Wisconsin residents are accessing care for mental illness. There is increased awareness of mental illness in Douglas County. Many people expressed the quality of providers in the area. Some of the resources available in Douglas County include the Mental Health Community Coordinated Response Team, Douglas County Health and Human Services, University of Wisconsin-Superior, The Center Against Sexual and Domestic Abuse, Alcohol and Other Drug Abuse Community Coalition of Douglas County, Creative Counseling, Human Development Center, Lake Superior Community Health Center, National Alliance on Mental Illness, Head Start, the Superior Police Department, Superior Fire Department and local faith-based communities. The community reported wanting to see peer support/counseling along with peer-based mobile crisis teams.
Supporting Data:

- In Douglas County, almost 75% of adults report being overweight or obese compared to the U.S. Value of 65.3% (Bridge to Health Survey, 2015).
- In 2016, 15% of Wisconsin High School students reported being overweight compared to 13% in 2013 (YRBS WI High School Report, 2017).
- In Douglas County, 13.9% of adults report having been told by a health care provider that they have heart disease compared to the Wisconsin value of 4% (Bridge to Health Survey, 2015).

Community Input:

Overall, the community reported that Douglas County has a lower socio-economic status. There is a lack of access to health care and healthy foods for residents living in rural parts of the county. People are interested in learning more about nutrition and ways to stay active and would like to see more nutrition screenings, health coaching, and affordable fitness centers. There are many low-cost fast food options that are easily accessible. Many residents would like to have more affordable healthy food options. Douglas County residents are aware of the increasing obesity rates among all age groups. This may be due to the reduced amount of physical activity kids are participating in.

Community Strengths and Resources Available:

Superior has a new bike share program called Zagster with four different stations around town giving people access to multi-modal transportation. There are a variety of fitness and wellness centers in Douglas County. Webster Park in Superior will be renovated to make it accessible for all. Douglas County offers walking and biking trails. Kids stay active while participating in summer park programs. The Superior Douglas County Family YMCA continues to offer a robust National Diabetes Prevention Program eligible for adults with prediabetes.
Supporting Data:

- In 2015, 18.8% of adults reported smoking cigarettes (Bridge to Health Survey, 2015).
- In Wisconsin, 30.2% of high school students reported using Marijuana (Wisconsin Youth Risk Behavior Summary Report, 2017).
- In Wisconsin, 11.2% of high school students reported using prescription painkillers (Wisconsin Youth Risk Behavior Summary Report, 2017).
- In Wisconsin, 7.8% of high school students report smoking cigarettes (Wisconsin Youth Risk Behavior Summary Report, 2017).
- In Wisconsin, 11.6% of high school students report currently using electronic vapor products (e-cigarettes) (Wisconsin Youth Risk Behavior Summary Report, 2017).

Community Input:

The community realizes that there is still a great deal of work to do to build awareness of substance use and abuse. Douglas County residents shared there are not enough support systems for families. The community would benefit from more peer support groups and social support systems. There is a lack of access to treatment centers and counselors in the county to address the prevalence of drugs use. The use of e-cigarettes or vaping is on the rise among youth starting in middle school through high school. Peer pressure and social media influence youth at a younger age to start vaping. Many community members noted the effect substance abuse has on other factors to include hygiene, finances, job stability, and mental health.

Community Strengths and Resources Available:

Douglas County offers local programming and rehab resources with efforts to prevent substance abuse and provide early interventions. High schools are enforcing tobacco and drug policies including students in high school sports. High school counselors and administrators are proving multiple ways educate students, parents, and teachers on the dangers of the vaping epidemic. The Alcohol and Other Drug Coalition actively plans events and determines strategies to address substance use among youth and adults. St. Mary’s Hospital-Superior has hosted a Nicotine Dependence Center Tobacco Treatment Specialist Certification Program training and currently has three certified tobacco treatment Specialists on site.
Design

St. Mary’s Hospital-Superior worked with internal stakeholders as well as community partners to design a strategy to address each of the priority needs identified in the CHNA process. The plan outlines actions that will be taken to respond to the identified community needs including goals and measurable objectives, strategies, tactics, and performance indicators.

The implementation plan is a three-year plan to address priority needs. The implementation plan will be reviewed annually, with progress shared with hospital leadership and the Board of Directors on an annual basis.

Additionally, the following three priorities were determined by the Community Health Advisory Committee (CHAC) at a retreat in January 2019. The retreat included input from Community Health staff from across the Essentia Health system. Prioritization was based on common themes from the 15 Community Health Needs Assessments.

- Mental health and wellness
- Substance use
- Nutrition and physical activity

During the FY2020-FY2022 assessment cycle, some activities will be led by the individual hospitals/markets, while others will be coordinated across the health system. This will help Essentia Health make the greatest impact with available resources.

No written comments were received from the 2013 CHNA. Any comments would have been taken into consideration.

Conclusion

As a nonprofit health system, Essentia Health is called to make a healthy difference in people’s lives. This needs assessment illustrates the importance of collaboration between our hospitals and community partners. By working collaboratively, we can have a positive impact on the identified health needs in our community in FY 2020–2021.

For questions or comments about the community health needs assessment, please contact: chna.comments@essentiahealth.org

Copies of this plan can be downloaded from our website: https://www.essentiahealth.org/about/chna/
St. Mary’s Hospital-Superior Community Health Steering Committee

**Our Mission:** Empower individuals to actively engage in healthy behaviors.

The St. Mary’s Hospital-Superior Community Health Steering Committee is dedicated to a community that is knowledgeable, engaged, safe, connected, active, supportive, and respectful. The committee will continue to support the strong partnerships between community agencies who plan policies and promote health. With a strong belief in collaboration and being action oriented we know we can make a difference. The Essentia Health system has outlined an allocation of resources available to each hospital as a percentage of net revenue to address the priorities set forth in the Community Health Needs Assessments. Progress on goals will be monitored and reported to hospital leaders routinely.

**Youth and adults in Douglas County experience mental wellbeing and resilience**
- 23% of adults in Douglas County report that they suffer from depression
- 27% of high school students in Wisconsin felt sad or hopeless in 2017.

**The community has access to healthy eating and active living opportunities**
- 74.9% of adults in Douglas County are overweight or obese
- 15% of Wisconsin high school students reported being overweight

**Youth and adults in Douglas County are substance free.**
- In Douglas County, 18.8% of adults smoke
- 30% of students in Wisconsin have used marijuana to get high
**Mental Health: Youth and adults in Douglas County experiencing positive mental wellbeing and resilience**

**Indicators**

<table>
<thead>
<tr>
<th>Adults in Douglas County who Report 14+ Days of Poor Mental Health</th>
<th>High School Students who felt sad or hopeless</th>
</tr>
</thead>
<tbody>
<tr>
<td>28.0%</td>
<td>27.0%</td>
</tr>
<tr>
<td>27.0%</td>
<td>24.6%</td>
</tr>
<tr>
<td>26.0%</td>
<td>25.0%</td>
</tr>
<tr>
<td>25.0%</td>
<td>24.0%</td>
</tr>
<tr>
<td>24.0%</td>
<td>23.0%</td>
</tr>
<tr>
<td>23.0%</td>
<td>20.0%</td>
</tr>
<tr>
<td>20.0%</td>
<td>10.0%</td>
</tr>
<tr>
<td>10.0%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Source: Bridge to Health Survey, 2015
Source: Youth Risk Behavior Survey WI High School Report

**Partners who can help**

- Mental Health Coordinated Community Response Team, University of Wisconsin-Superior
- Essentia Health, Creative Counseling, Human Development Center, Lake Superior Community Health Center, St. Luke’s, National Alliance on Mental Illness, Northland Healthy Minds, Superior Douglas County Family YMCA, Family Forum- Head Start, Superior Police Department, Superior Fire Department, Faith-Based Communities, Douglas County Health and Human Services, University of Wisconsin-Continuing Education, The Center Against Sexual and Domestic Abuse, State Legislatures

**What we are going to do**

**Factors that have contributed to improvements:**
- Working to bridge the gap between Duluth and Superior
- Awareness of the issue
- Quality of providers in the area
- Churches
- People taking mental health seriously
- Case management services now integrated into many organizations

**Limiting factors:**
- Douglas County has a lower socio-economic status
- Too much money spent of 1:1 therapy, not enough money spent on community supports
- Lack of social supports/need more support groups and peer support
- Lack of diversity makes it difficult
- Available services are across the river and do not always accept WIMA
- Educating community members, Not enough counselors
- Schools trying to address the issue among youth with limited resources
- Insurance coverage
- More local suicide resources/help, Need for crisis beds
- Self-harm, bullies and social media

**Strategy #1:** Partner with the Douglas County Mental Health Coordinated Care Committee to develop short term crisis stabilization

**Action Steps:**
- A) Research models of crisis response and crisis respite
- B) Research grants for writing and planning models for crisis response and respite
- C) Reduce barriers to group support: research current organizations that offer group support and barriers participants face i.e. transportation, stigma etc.

**Strategy #2:** Help promote and support training—for first responders, peer helpers, and others—on effective suicide grief support and on addressing other postvention needs

**Action Steps:**
- A) Mental Health First Aid: Provide an 8-hour training to educate laypeople about how to assist individuals with mental health problems or at risk for problems such as depression, anxiety, and substance use disorders
- B) Support ongoing International Association of Fire Fighters Peer Support Training courses
- C) Identify and assist persons at risk – example activities: gatekeeper training, suicide screenings, QPR and teaching warning signs

**Healthy Living/ Heart Conditions: The community has access to healthy eating and active living opportunities**
CHNA 2020-2022 Implementation Plan

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Partners who can help</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1" alt="Graph showing Wisconsin High School Students Physical Activity and Overweight" /> <img src="image2" alt="Graph showing Adults who are Overweight or Obese" /></td>
<td>University of Wisconsin-Continuing Education, Superior Douglas County Family YMCA, University of Wisconsin-Superior, Anytime Fitness, PhyEd Health Club, GreenLight Fitness, Strength Factory, Parks and Recreation, Lake Superior Community Health Center, St. Luke’s, Douglas County Farmers Market Association, American Heart Association</td>
</tr>
</tbody>
</table>

**Story Behind the Data**

**Factors that have contributed to improvements:**
- Bike stations around town, local gyms, Accessible park, Webster Park (in progress)
- Education around the topic
- Whole Foods Co-op in Duluth
- Summer park programs for kids
- Many walking and biking trails

**Limiting factors:**
- Douglas County has a lower socio-economic status
- Access for rural families - food desert for resources/treatment
- Social media/body shaming
- Cost-friendly gyms, screenings, and nutrition
- Affordable health choices need to be more available (there are many cheap, fast food options all over the area)
- There are high rates of obesity within all age groups
- Long winters make people lazier/ have feelings of isolation
- Less activity level among children and teens
- Seniors do not like to go to the community centers, churches, town halls, etc., for meals

**What we are going to do**

**Strategy #1:** Support multiple vendor markets where producers sell goods such as fresh fruit and vegetables, meat, dairy items, and prepared foods directly to consumers to include markets in food desert areas

**Action Steps:**
- A) Partner with local master gardeners, Douglas County Farmers Market Association, Schools, and others
- B) Identify need, current use, and existing CSA & EBT and implement if doesn’t exist

**Strategy #2:** Offer free community wide programs that educate and provide opportunities for physical activity for all

**Action Steps:**
- A) Continue to support and promote the YMCA’s Diabetes Prevention Program and Lake Effect Dance, Free Yoga classes.
- B) Identify other programs to promote and support
- C) Create an inventory of the community strengths and resources related to physical activity opportunities and healthy food options
### Substance Abuse: Youth and adults in Douglas County are substance free

#### Indicators

<table>
<thead>
<tr>
<th>Students Who Have Used the Following Substances to Get High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cocaine</td>
</tr>
<tr>
<td>Inhalants</td>
</tr>
<tr>
<td>Over the Counter Drugs</td>
</tr>
<tr>
<td>Prescription Painkillers</td>
</tr>
<tr>
<td>Marijuana</td>
</tr>
</tbody>
</table>

#### Partners who can help

Alcohol and Other Drug Abuse Coalition, Superior Fire Department, Superior Police Department, Douglas County Health & Human Services, Drug Court- Alcohol and Other Drug Abuse, School districts, AID’s Resource Center, Lake Superior Community Health Center, Private Dentists, Douglas County Sheriff, Parents/ Guardians

#### Story Behind the Data

**Factors that have contributed to improvements:**

- Preventable with early intervention
- AODA Coalition supports and helps address alcohol and other drugs
- Successful programing with the Adult and Teen Challenge
- Tobacco and drug policies are enforced at the schools
- Health classes for youth educate on substance use
- Law enforcement is addressing substance abuse

**Limiting factors:**

- Lack of social supports, support groups and peer support
- Lack of substance abuse awareness in the community
- Alcohol is tightly woven into the culture of Wisconsin
- Need better insurance to cover drug treatment
- Limited access to local treatment centers
- Teens are using e-cigarettes at a higher rate than conventional cigarettes
- There is a high volume of bars in the city of Superior

#### What we are going to do

**Strategy #1:** Partner with schools to decrease use of tobacco, vaping, and other substances

**Action Steps:**

A) Identify partners (Schools, ALA, Public Health, LSCHC, DPD)
B) Determine a strategy to decrease substance abuse in schools
C) Research tactics and resources to educate students and adults

**Strategy #2:** Explore partnering with public health and WIC

**Action Steps:**

A) Increase maternal smoking cessation efforts
B) Identify current and needed resources for home visits targeting mothers who smoke
C) Collect current data on Douglas County maternal smoking cessation programs

**Strategy #3:** Partner with existing Douglas County AODA to expand programming

**Action Steps:**

A) Identify assets and existing programs in Douglas County targeting substance abuse
B) Research current substance abuse data, education resources, and communication tools

---

Douglas County, WI: 18.8%  
Source: Bridge to Health Survey, 2015  
Service Area:
Douglas County, WI
This model emphasizes the many factors that, if improved, can help make communities healthier places to live, work, and play.
Demographics
Douglas County’s Overall Rankings in Health Factors is 57 out of 72.

- This map represents what influences the health of a county.
- The healthiest county is ranked #1.
- The ranking is based on
  - Health behaviors
  - Clinical care
  - Social and economic
  - Physical environment factors.

Source: Robert Wood Johnson Foundation, 2018
TOTAL POPULATION

State of Wisconsin  Douglas County

<table>
<thead>
<tr>
<th>Year</th>
<th>State</th>
<th>County</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>5,687,219</td>
<td>43,963</td>
</tr>
<tr>
<td>2013</td>
<td>5,706,871</td>
<td>43,944</td>
</tr>
<tr>
<td>2014</td>
<td>5,742,619</td>
<td>43,901</td>
</tr>
<tr>
<td>2015</td>
<td>5,742,117</td>
<td>43,799</td>
</tr>
<tr>
<td>2016</td>
<td>5,751,798</td>
<td>43,705</td>
</tr>
</tbody>
</table>

Source: United States Census. American Fact Finder
### Number and Percent of People 65 Years and Older, State and County, 2016

<table>
<thead>
<tr>
<th>State/County</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>State of Wisconsin</td>
<td>875,220</td>
<td>15.2</td>
</tr>
<tr>
<td>Douglas County</td>
<td>7,114</td>
<td>16.3</td>
</tr>
</tbody>
</table>

Source: United States Census, American Fact Finder

Source: United States Census. American Fact Finder

Source: United States Census. American Fact Finder
Socioeconomics
Families Below Poverty
County: Douglas, WI
1,313 Families (11.51% of Families)

State: Wisconsin 125,226 Families (8.24% of Families)

Families Below Poverty with Children
County: Douglas, WI
986 Families (8.64% of Families)

State: Wisconsin 98,137 Families (6.46% of Families)

Source: Bridging Health North, 2018
Douglas County Median Household Income is $48,190

Source: American Community Survey, 2012-2016
# Population 25+ by Educational Attainment

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Persons</th>
<th>% of Population Age 25+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 9th Grade</td>
<td>465</td>
<td>1.51%</td>
</tr>
<tr>
<td>Some High School, No Diploma</td>
<td>1,557</td>
<td>5.06%</td>
</tr>
<tr>
<td>High School Grad</td>
<td>10,201</td>
<td>33.16%</td>
</tr>
<tr>
<td>Some College, No Degree</td>
<td>7,587</td>
<td>24.66%</td>
</tr>
<tr>
<td>Associate Degree</td>
<td>4,047</td>
<td>13.15%</td>
</tr>
<tr>
<td>Bachelor's Degree</td>
<td>4,742</td>
<td>15.41%</td>
</tr>
<tr>
<td>Master's Degree</td>
<td>1,600</td>
<td>5.20%</td>
</tr>
<tr>
<td>Professional Degree</td>
<td>343</td>
<td>1.11%</td>
</tr>
<tr>
<td>Doctorate Degree</td>
<td>222</td>
<td>0.72%</td>
</tr>
</tbody>
</table>

Source: Bridging Health North, 2018
9.7% of adults 65+ report living below the federal poverty level.
30% of people, aged 20-64, with any disability in Douglas County are living below the poverty level.

Source: American Community Survey, 2012-2016
Renters Spending More Than 30% of Household Income on Rent

Bar chart showing the percentage of renters spending 30% or more of their household income on rent for different areas. The chart indicates a higher percentage in St. Louis, MN.

Graph showing the percentage of renters spending 30% or more of their household income on rent by age group in Douglas, WI. The highest percentage is seen in the 65+ age group at 58.8%.

Source: American Community Survey (2012-2016)
Maternal Health
Total Number of Births in Douglas County

Source: Wisconsin Interactive Statistics on Health (WISH) data query system
The Douglas County Teen Birth Rate is 14.6%.
16.8% of mothers used tobacco during pregnancy.
Infectious Diseases
Gonorrhea Incidence Rate

Access to Health Care
Health Insurance

93.2% of adults in Douglas County have insurance.

96.6% of children in Douglas County have insurance.

Healthy People 2020 Goal is 100%.

Source: Small Area Health Insurance Estimates
There are 18 primary care providers in Douglas County per 100,000 population.

Source: County Health Rankings
34.9% of adults delayed to seek medical care even though they felt they needed it.
Dentist Rate

County: Douglas, WI

51
dentists/100,000 population

Source: County Health Rankings

Compared to:
- WI Counties
- U.S. Counties
- WI Value (66)
- US Value (67)
30.7% delayed to seek dental care even though they felt they needed it.
Eating Habits, Physical Activity & Chronic Conditions
In Douglas County, 26.6% of adults consume five or more servings of fruits and vegetables daily.
In Douglas County, 8.5% of the population in 2015 reported low income and low access to a grocery store compared to 6.4% in 2010.
12.5% of Douglas County population report having a food insecurity.
45.9% households in Douglas County with children under the age of 18 participated in SNAP.
36.5% of adults in Douglas County report being physically active five or more days per week for at least 30 minutes.
74.9% of adults in Douglas County are overweight or obese.
Wisconsin High School Students
Physical Activity and Overweight

Students not physically active at least 60 min

- 2013: 76%
- 2016: 75%

Overweight

- 2013: 13%
- 2016: 15%

Source: YRBS WI High School Report, 2017
11.2% of females 40 and over in Douglas County have never had a mammogram.
Significantly higher than WI value of 60.2
12.6% of adults have diabetes in Douglas County.
13.9% of adults have heart disease in Douglas County.

This rate is above the WI Value is 4%.

Modifiable risk factors include tobacco use, obesity, sedentary lifestyle, and poor diet.
Youth Substance Use
### Wisconsin High School Report: Cigarettes, Marijuana, Alcohol, and Vaping

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ever Tried Cigarettes</td>
<td>33.2%</td>
<td>24.4%</td>
</tr>
<tr>
<td>Currently Smoking Cigarettes</td>
<td>11.8%</td>
<td>7.8%</td>
</tr>
<tr>
<td>Ever Drank Alcohol</td>
<td>65.9%</td>
<td>64.5%</td>
</tr>
<tr>
<td>Had 1&lt;sup&gt;st&lt;/sup&gt; Drink Before the age of 13</td>
<td>14.6%</td>
<td>15.5%</td>
</tr>
<tr>
<td>Ever Used Marijuana</td>
<td>31.2%</td>
<td>30.2%</td>
</tr>
<tr>
<td>Tried Marijuana before the age of 13</td>
<td>6.3%</td>
<td>5.4%</td>
</tr>
<tr>
<td>Currently Using Electronic Vapor Products</td>
<td>-</td>
<td>11.6%</td>
</tr>
</tbody>
</table>

30.4% of students reported that they currently drink. 11.2% of students reported unauthorized use of prescription pain killers. Over 80% of students have never used cocaine, inhalants, or prescriptions. There is a downward trend for alcohol and drug use across all racial and ethnic groups.

2017 Youth Risk Behavior Survey
Superior High School

Using e-cigs: 37.5% (LBGTQ), 36.4% (Native American), 21.2% (Asian), 6.2% (Afican American)
Tried Alcohol before 13: 13.3% (LBGTQ), 9.1% (Native American), 6.2% (Asian), 9.1% (Afican American)
Tried Marijuana before 13: 18.2% (LBGTQ), 9.1% (Native American), 6.2% (Asian), 9.1% (Afican American)
Taking prescription drugs without a prescription: 18.8% (LBGTQ), 9.1% (Native American), 9.1% (Asian), 18.2% (Afican American)

Source: YRBS Superior High School Report, 2017
Adult Substance Use
The Healthy People 2020 national health target is 12.0%.
Adults Who Binge Drink
Bridge to Health Survey, 2015

Healthy People 2020 national health target is 24.4%

County: Douglas, WI 39.2%
There has been a steady increase in deaths from unintentional opioid overdoses. From 2002 to 2016, these deaths have risen by 80% in Douglas County.

Source: WISH
Causes of Death
Deaths due to all causes
Douglas County

Source: WISH
Age-Adjusted Death Rate due to Colorectal Cancer
County: Douglas, WI


HP 2020 Target
(14.5)
Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases by Gender
County: Douglas, WI

- Female: 47.5 deaths/100,000 population
- Male: 58.9 deaths/100,000 population
- Overall: 51.4 deaths/100,000 population

County: Douglas, WI
51.4

Source: Centers for Disease Control and Prevention (2014-2016)
www.bridginghealthnorth.org
By gender, there were 11 deaths by falls for females and 7 for males in Douglas County over 2014-2016.
Age-Adjusted Death Rate due to Diabetes

County: Douglas, WI

27.5 deaths/100,000 population

Source: Centers for Disease Control and Prevention

WI Value (19.5)
US Value (21.1)

Age-Adjusted Death Rate due to Diabetes

<table>
<thead>
<tr>
<th>Year Range</th>
<th>Deaths/100,000 Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010-2012</td>
<td>42</td>
</tr>
<tr>
<td>2011-2013</td>
<td>38</td>
</tr>
<tr>
<td>2012-2014</td>
<td>34</td>
</tr>
<tr>
<td>2013-2015</td>
<td>30</td>
</tr>
<tr>
<td>2014-2016</td>
<td>26</td>
</tr>
</tbody>
</table>
The Healthy People 2020 national target is 36.4 deaths per 100,000 population.

**County: Douglas, WI**

31.5 deaths/100,000 population

Source: Centers for Disease Control and Prevention

WI Value: 49.7

US Value: 43.2
The age-adjusted death rate in Douglas County is 16.3 deaths/100,000 population.

Source: Centers for Disease Control and Prevention, 2014-2016
Mental Health
People 65+ Living Alone

County: Douglas, WI

30.0%

Source: American Community Survey, 2012-2016

US Value (26.4%)

Source: American Community Survey, 2012-2016
Adults Who Rarely or Never Have Social and Emotional Support

Bridge to Health Survey Regional Value: 12.9

Source: Bridge to Health Survey (2015)
Bridge to Health Survey Regional Value: 19.7

Source: Bridge to Health Survey (2015)
23% of adults in Douglas County report that they suffer from Depression.

Source: Bridge to Health Survey (2015)

Due to changes in methodology, 2015 data should be considered a baseline year for data analysis and is not comparable to data from prior years. Please visit the Bridge to Health Survey website for more details on change in methodology.
In Douglas County, 2.3% of adults considered suicide.
Students who felt sad or hopeless almost every day
Total number of respondents: 883

Source: YRBS Superior, WI High School Report, 2017
Percentage of Superior High School students who purposely hurt themselves without wanting to die in the past 12 months

Source: YRBS Superior, WI High School Report, 2017
Students who seriously considered attempting suicide in the last 12 months

Source: YRBS WI High School Report
Special thanks to Emma Carroll (UW-Superior student/intern) who helped with the PowerPoint slides.

“
It is time to refocus, reinforce, and repeat the message that health disparities exist and that health equity benefits everyone.

—Kathleen Sebelius, Secretary of Health & Human Services
This table shows the health indicators that stood out to the St. Mary’s Hospital-Superior Community Health Steering Committee based on the Douglas County Data Health Presentation. Please see Appendix A for the full Data Presentation PowerPoint.

What stood out to you during the data presentation?

<table>
<thead>
<tr>
<th>Health Indicator</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>11</td>
<td>19.30%</td>
</tr>
<tr>
<td>Social Determinants of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health</td>
<td>6</td>
<td>10.53%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>6</td>
<td>10.53%</td>
</tr>
<tr>
<td>Obesity</td>
<td>4</td>
<td>7.02%</td>
</tr>
<tr>
<td>Maternal Health</td>
<td>4</td>
<td>7.02%</td>
</tr>
<tr>
<td>Heart Conditions</td>
<td>4</td>
<td>7.02%</td>
</tr>
<tr>
<td>Cancer</td>
<td>5</td>
<td>8.77%</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>3</td>
<td>5.26%</td>
</tr>
<tr>
<td>Opioids</td>
<td>3</td>
<td>5.26%</td>
</tr>
<tr>
<td>Access to Healthcare</td>
<td>3</td>
<td>5.26%</td>
</tr>
<tr>
<td>Older Adults</td>
<td>4</td>
<td>7.02%</td>
</tr>
<tr>
<td>Disability</td>
<td>2</td>
<td>3.51%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>2</td>
<td>3.51%</td>
</tr>
<tr>
<td>Total</td>
<td>57</td>
<td>100%</td>
</tr>
</tbody>
</table>
Please select FIVE 'Health Problems' in Douglas County.

Answered: 10   Skipped: 0