



# 2022 COMMUNITY HEALTH NEEDS ASSESSMENT

Aitkin County, Minnesota

Sponsored by



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# PROJECT OVERVIEW

## Project Goals

This Community Health Needs Assessment is a systematic, data-driven approach to determining the health status, behaviors, and needs of residents in Aitkin County, the service area of Riverwood Healthcare Center. Subsequently, this information may be used to inform decisions and guide efforts to improve community health and wellness.

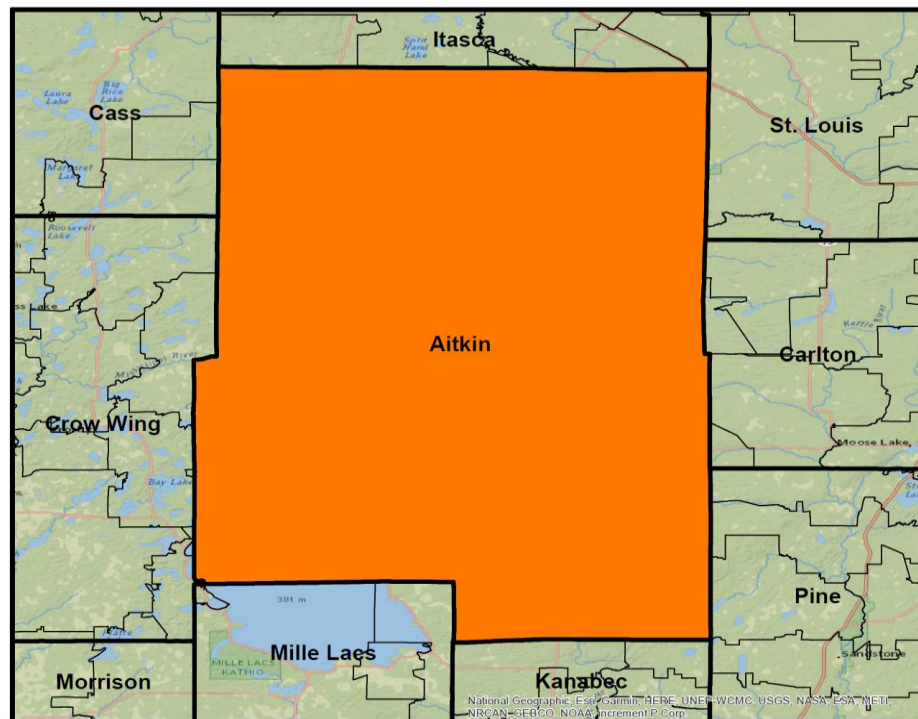
A Community Health Needs Assessment provides information so that communities may identify issues of greatest concern and decide to commit resources to those areas, thereby making the greatest possible impact on community health status.

## Methodology

Quantitative data input for this assessment includes secondary research (vital statistics and other existing health-related data) that allows for comparison to benchmark data at the state and national levels. Qualitative data input includes primary research among community stakeholders gathered through an Online Key Informant Survey.

## Community Defined for This Assessment

The study area for this effort is Aitkin County in Minnesota. This community definition, determined based on the areas of residence of most recent patients of Riverwood Healthcare Center, is illustrated in the following map.



## Online Key Informant Survey

To solicit input from community stakeholders (key informants), those individuals who have a broad interest in the health of the community, an Online Key Informant Survey also was implemented as part of this process. A list of recommended participants was provided by Riverwood Healthcare Center; this list included names and contact information for physicians, public health representatives, other health professionals, social service providers, and a variety of other community leaders. Potential participants were chosen because of their ability to identify primary concerns of the populations with whom they work, as well as of the community overall.

Key informants were contacted by email, introducing the purpose of the survey and providing a link to take the survey online; reminder emails were sent as needed to increase participation. In all, 51 community stakeholders took part in the Online Key Informant Survey, as outlined below:

ONLINE KEY INFORMANT SURVEY PARTICIPATION	
KEY INFORMANT TYPE	NUMBER PARTICIPATING
Physicians	3
Public Health Representatives	3
Other Health Providers	7
Social Services Providers	4
Other Community Leaders	34

Final participation included representatives of the organizations outlined below.

- Aicota Health Care Center
- Aitkin Chiropractic
- Aitkin County
- Aitkin County CARE, Inc.
- Aitkin County Health and Human Services
- Aitkin School District
- City of Aitkin
- City of Hill City
- Cummings Janzen Realty
- Growth Innovations
- Hill City
- Lakes & Pines CAC
- Lundberg Plumbing
- McGregor Dental
- McGregor School District
- Minnesota Department of Health
- Minnesota Legislature
- Pine Insurance Agency
- Rialto Theater
- Riverwood Healthcare Center
- Security State Bank
- State Farm Insurance
- The Journey North
- Tidholm Productions

Through this process, input was gathered from several individuals whose organizations work with low-income, minority, or other medically underserved populations.

In the online survey, key informants were asked to rate the degree to which various health issues are a problem in their own community. Follow-up questions asked them to describe why they identify problem

areas as such and how these might better be addressed. Results of their ratings, as well as their verbatim comments, are included throughout this report as they relate to the various other data presented.

NOTE: These findings represent qualitative rather than quantitative data. The Online Key Informant Survey was designed to gather input regarding participants' opinions and perceptions of the health needs of the residents in the area.

## Public Health, Vital Statistics & Other Data

A variety of existing (secondary) data sources was consulted to complement the research quality of this Community Health Needs Assessment. Data for Aitkin County were obtained from the following sources (specific citations are included with the graphs throughout this report):

- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension, SparkMap ([sparkmap.org](http://sparkmap.org))
- Centers for Disease Control & Prevention, Office of Infectious Disease, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
- Centers for Disease Control & Prevention, Office of Public Health Science Services, Center for Surveillance, Epidemiology and Laboratory Services, Division of Health Informatics and Surveillance (DHIS)
- Centers for Disease Control & Prevention, Office of Public Health Science Services, National Center for Health Statistics
- ESRI ArcGIS Map Gallery
- National Cancer Institute, State Cancer Profiles
- OpenStreetMap (OSM)
- US Census Bureau, American Community Survey
- US Census Bureau, County Business Patterns
- US Census Bureau, Decennial Census
- US Department of Agriculture, Economic Research Service
- US Department of Health & Human Services
- US Department of Health & Human Services, Health Resources and Services Administration (HRSA)
- US Department of Justice, Federal Bureau of Investigation
- US Department of Labor, Bureau of Labor Statistics

## Benchmark Data

### Minnesota and National Data

Where possible, state and national data are provided as an additional benchmark against which to compare local findings.



## Healthy People 2030

Healthy People provides 10-year, measurable public health objectives — and tools to help track progress toward achieving them. Healthy People identifies public health priorities to help individuals, organizations, and communities across the United States improve health and well-being. Healthy People 2030, the initiative's fifth iteration, builds on knowledge gained over the first four decades.



Healthy People 2030's overarching goals are to:

- Attain healthy, thriving lives and well-being free of preventable disease, disability, injury, and premature death.
- Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all.
- Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.
- Promote healthy development, healthy behaviors, and well-being across all life stages.
- Engage leadership, key constituents, and the public across multiple sectors to take action and design policies that improve the health and well-being of all.

The Healthy People 2030 framework was based on recommendations made by the Secretary's Advisory Committee on National Health Promotion and Disease Prevention Objectives for 2030. After getting feedback from individuals and organizations and input from subject matter experts, the U.S. Department of Health and Human Services (HHS) approved the framework which helped guide the selection of Healthy People 2030 objectives.

## Determining Significance

For the purpose of this report, "significance" of secondary data indicators (which might be subject to reporting error) is determined by a 15% variation from the comparative measure.

## Information Gaps

While this assessment is quite comprehensive, it cannot measure all possible aspects of health in the community, nor can it adequately represent all possible populations of interest. It must be recognized that these information gaps might in some ways limit the ability to assess all of the community's health needs. In terms of content, this assessment was designed to provide a comprehensive and broad picture of the health of the overall community. However, there are certainly medical conditions that are not specifically addressed.

## Public Comment

Riverwood Healthcare Center made its prior Community Health Needs Assessment (CHNA) report publicly available through its website; through that mechanism, the hospital requested from the public written comments and feedback regarding the CHNA and implementation strategy. At the time of this writing, Riverwood Healthcare Center had not received any written comments. However, through key informant feedback for this assessment, input from the broader community was considered and taken into account when identifying and prioritizing the significant health needs of the community. Riverwood Healthcare Center will continue to use its website as a tool to solicit public comments and ensure that these comments are considered in the development of future CHNAs.

# IRS FORM 990, SCHEDULE H COMPLIANCE

For non-profit hospitals, a Community Health Needs Assessment (CHNA) also serves to satisfy certain requirements of tax reporting, pursuant to provisions of the Patient Protection & Affordable Care Act of 2010. To understand which elements of this report relate to those requested as part of hospitals' reporting on IRS Schedule H (Form 990), the following table cross-references related sections.

IRS FORM 990, SCHEDULE H (2019)		See Report Page
<b>Part V Section B Line 3a</b> A definition of the community served by the hospital facility		6
<b>Part V Section B Line 3b</b> Demographics of the community		19
<b>Part V Section B Line 3c</b> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		80
<b>Part V Section B Line 3d</b> How data was obtained		6
<b>Part V Section B Line 3e</b> The significant health needs of the community		11
<b>Part V Section B Line 3f</b> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		Addressed Throughout
<b>Part V Section B Line 3g</b> The process for identifying and prioritizing community health needs and services to meet the community health needs		11
<b>Part V Section B Line 3h</b> The process for consulting with persons representing the community's interests		7
<b>Part V Section B Line 3i</b> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)		84

# SUMMARY OF FINDINGS

## Significant Health Needs of the Community

The following “Areas of Opportunity” represent the significant health needs of the community, based on the information gathered through this Community Health Needs Assessment. From these data, opportunities for health improvement exist in Aitkin County with regard to the following health issues (see also the summary tables presented in the following section).

The Areas of Opportunity were determined after consideration of various criteria, including: standing in comparison with benchmark data; the preponderance of significant findings within topic areas; the magnitude of the issue in terms of the number of persons affected; and the potential health impact of a given issue. These also take into account those issues of greatest concern to the community stakeholders (key informants) giving input to this process.

AREAS OF OPPORTUNITY IDENTIFIED THROUGH THIS ASSESSMENT	
CANCER	Leading Cause of Death
HEART DISEASE & STROKE	Leading Cause of Death High Blood Pressure Prevalence
INJURY & VIOLENCE	Unintentional Injury Deaths
MENTAL HEALTH	Suicide Deaths Mental Health Provider Ratio Key Informants: Mental health ranked as a top concern.
NUTRITION, PHYSICAL ACTIVITY & WEIGHT	Low Food Access Key Informants: Nutrition, physical activity, and weight ranked as a top concern.
ORAL HEALTH	Access to Dentists
POTENTIALLY DISABLING CONDITIONS	Disability Prevalence
COVID-19/ RESPIRATORY DISEASE	Coronavirus/COVID-19 Deaths
SUBSTANCE ABUSE	Key Informants: Substance abuse ranked as a top concern.

## Community Feedback on Prioritization of Health Needs

Prioritization of the health needs identified in this assessment (“Areas of Opportunity” above) was determined based on a prioritization exercise conducted among community stakeholders (representing a cross-section of community-based agencies and organizations) in conjunction with the administration of the Online Key Informant Survey.

In this process, these key informants were asked to rate the severity of a variety of health issues in the community. Insofar as these health issues were identified through the data above and/or were identified as top concerns among key informants, their ranking of these issues informed the following priorities:

1. Mental Health
2. Substance Abuse
3. Nutrition, Physical Activity & Weight
4. Oral Health
5. Cancer
6. Heart Disease & Stroke
7. Coronavirus/COVID-19
8. Disability & Chronic Pain
9. Injury & Violence

## Hospital Implementation Strategy

Riverwood Healthcare Center will use the information from this Community Health Needs Assessment to develop an Implementation Strategy to address the significant health needs in the community. While the hospital will likely not implement strategies for all of the health issues listed above, the results of this prioritization exercise will be used to inform the development of the hospital's action plan to guide community health improvement efforts in the coming years.

*Note: An evaluation of the hospital's past activities to address the needs identified in the prior CHNA can be found as an appendix to this report.*

## Summary Tables: Comparisons With Benchmark Data

The following tables provide an overview of indicators in Aitkin County, grouped by health topic.

### Reading the Summary Tables














■ In the following tables, Aitkin County results are shown in the larger, gray column.









■ The columns to the right of the Aitkin County column provide comparisons between local data and any available state and national findings, and Healthy People 2030 objectives. Symbols indicate whether Aitkin County compares favorably (☀️), unfavorably (☁️), or comparably (☔️) to these external data.






Note that blank table cells in the tables that follow signify that data are not available or are not reliable for that area and/or for that indicator

SOCIAL DETERMINANTS	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
Population in Poverty (%)	12.2	☔️ 9.7	☁️ 13.4	☔️ 8.0
Children in Poverty (%)	18.0	☔️ 12.2	☁️ 18.5	☔️ 8.0
Housing Exceeds 30% of Income	27.9	☁️ 25.4	☁️ 30.9	
No High School Diploma (% Age 25+)	8.8	☔️ 6.9	☀️ 12.0	
Unemployment Rate (% Age 16+)	0.0	☁️ 0.0	☁️ 0.0	
Linguistically Isolated Population (%)	0.1	☀️ 2.6	☀️ 4.3	
		☀️ better	☁️ similar	☔️ worse













OVERALL HEALTH	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
"Fair/Poor" Overall Health (%)	15.8	☔️ 12.8	☁️ 18.0	
		☀️ better	☁️ similar	☔️ worse







		AITKIN COUNTY vs. BENCHMARKS		
ACCESS TO HEALTH CARE	Aitkin County	vs. MN	vs. US	vs. HP2030
Uninsured (% Adults 18-64)	8.8	 6.9	 12.8	 7.9
Uninsured (% Children 0-17)	0.0	 0.0	 0.0	 7.9
Recent Primary Care Visit (%)	79.0	 74.8	 76.1	
Primary Care Doctors per 100,000	81.8	 89.5	 75.8	
		 better	 similar	 worse









		AITKIN COUNTY vs. BENCHMARKS		
CANCER	Aitkin County	vs. MN	vs. US	vs. HP2030
Cancer (Age-Adjusted Death Rate)	163.2	 146.6	 152.3	 122.7
Mammogram in Past 2 Years (% Women 50-74)	72.9	 77.0	 73.7	
		 better	 similar	 worse









		AITKIN COUNTY vs. BENCHMARKS		
DIABETES	Aitkin County	vs. MN	vs. US	vs. HP2030
Diabetes Prevalence (%)	7.8	 7.5	 9.5	
		 better	 similar	 worse























HEART DISEASE & STROKE	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
Coronary Heart Disease (Age-Adjusted Death Rate)	88.2	 59.9	 92.6	 90.9
Stroke (Age-Adjusted Death Rate)	32.7	 32.8	 37.3	 33.4
High Blood Pressure Prevalence (%)	38.8	 27.2	 32.9	 27.7
		 better	 similar	 worse






INFANT HEALTH & FAMILY PLANNING	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
Births to Adolescents Age 15 to 19 (Rate per 1,000)	13.1	 13.0	 20.9	 31.4
		 better	 similar	 worse










INJURY & VIOLENCE	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
Unintentional Injury (Age-Adjusted Death Rate)	72.1	 43.8	 47.5	 43.2
Violent Crime Rate	113.3	 238.1	 416.0	
		 better	 similar	 worse










MENTAL HEALTH	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
Suicide (Age-Adjusted Death Rate)	34.2	 13.5	 13.8	 12.8
Mental Health Providers per 100,000	69.2	 267.9	 261.6	
		 better	 similar	 worse






		AITKIN COUNTY vs. BENCHMARKS		
NUTRITION, PHYSICAL ACTIVITY & WEIGHT	Aitkin County	vs. MN	vs. US	vs. HP2030
Fast Food (Restaurants per 100,000)	43.2	 71.3	 82.2	
Population With Low Food Access (%)	33.8	 27.4	 22.2	
No Leisure-Time Physical Activity (%)	23.9	 19.0	 22.1	 21.2
Obese (%)	29.7	 28.7	 29.5	 36.0
		 better	 similar	 worse







		AITKIN COUNTY vs. BENCHMARKS		
ORAL HEALTH	Aitkin County	vs. MN	vs. US	vs. HP2030
Dentists per 100,000	19.1	 67.8	 65.6	
Poor Dental Health (%)	13.7	 9.6	 13.8	
		 better	 similar	 worse

		AITKIN COUNTY vs. BENCHMARKS		
POTENTIALLY DISABLING CONDITIONS	Aitkin County	vs. MN	vs. US	vs. HP2030
Disability Prevalence (%)	18.2	 10.9	 12.6	
		 better	 similar	 worse

RESPIRATORY DISEASE	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
Lung Disease (Age-Adjusted Death Rate)	40.5	 34.8	 40.2	
Coronavirus/COVID-19 (Crude Death Rate)	377.3	 218.4	 290.0	
Asthma Prevalence (%)	8.6	 8.5	 9.5	
		 better	 similar	 worse

SEXUAL HEALTH	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
HIV Prevalence Rate	35.6	 183.5	 372.8	
Chlamydia Incidence Rate	157.9	 422.6	 539.9	
Gonorrhea Incidence Rate	37.9	 135.2	 179.1	
		 better	 similar	 worse

SUBSTANCE ABUSE	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
Excessive Drinker (%)	22.0	 23.2	 19.2	
		 better	 similar	 worse

TOBACCO USE	Aitkin County	AITKIN COUNTY vs. BENCHMARKS		
		vs. MN	vs. US	vs. HP2030
Current Smoker (%)	18.7	 16.1	 17.0	 5.0
		 better	 similar	 worse



# COMMUNITY DESCRIPTION



# POPULATION CHARACTERISTICS

## Total Population

Data from the US Census Bureau reveal the following statistics for our community relative to size, population, and density.

**Total Population**  
(Estimated Population, 2015-2019)

	Total Population	Total Land Area (Square Miles)	Population Density (Per Square Mile)
<b>Aitkin County</b>	15,834	1,821.80	8.69
<b>Minnesota</b>	5,563,378	79,626.72	69.87
<b>United States</b>	324,697,795	3,532,068.58	91.93

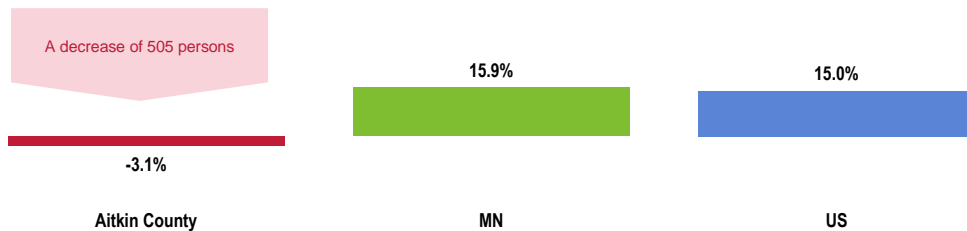
Sources: 

- US Census Bureau American Community Survey 5-year estimates.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

## Population Change 2010-2020

A significant positive or negative shift in total population over time impacts health care providers and the utilization of community resources. The following chart and map illustrate the changes that have occurred in Aitkin County between the 2010 and 2020 US Censuses.

**Change in Total Population**  
(Percentage Change Between 2010 and 2020)



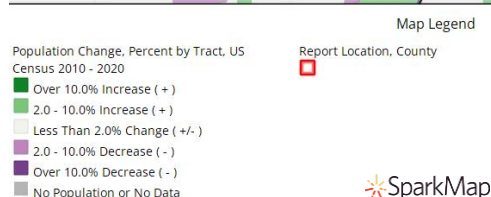
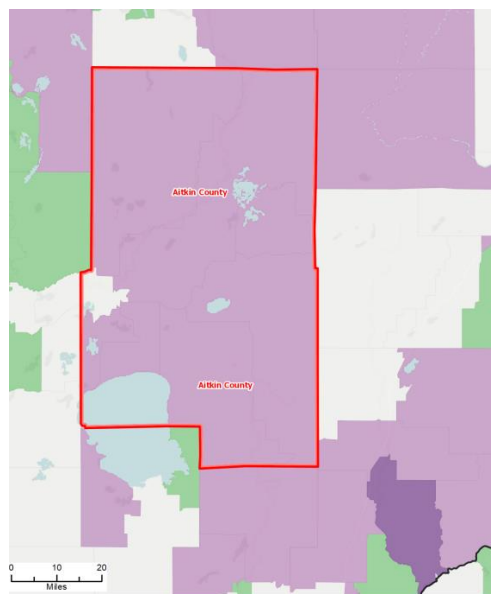
Sources: 

- US Census Bureau Decennial Census (2010-2020).
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

Notes: 

- A significant positive or negative shift in total population over time impacts healthcare providers and the utilization of community resources.

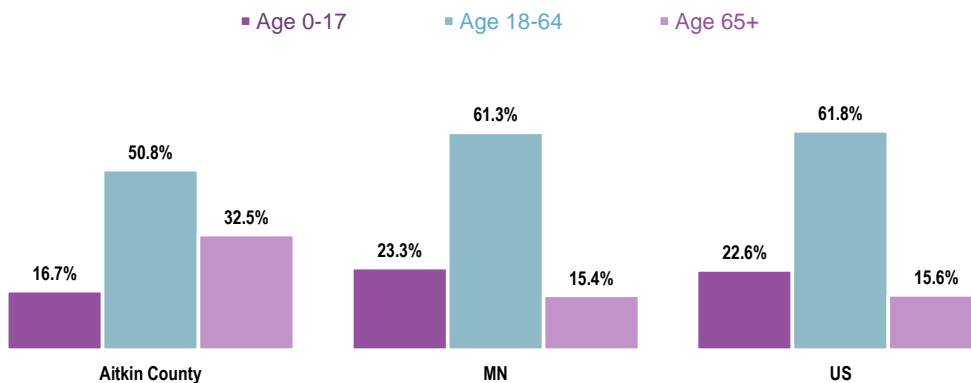




## Age

It is important to understand the age distribution of the population, as different age groups have unique health needs that should be considered separately from others along the age spectrum.

### Total Population by Age Groups (2015-2019)



Sources:

- US Census Bureau American Community Survey 5-year estimates.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

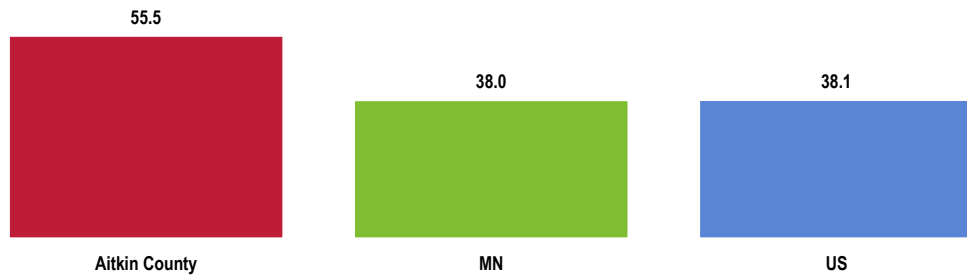




## Median Age

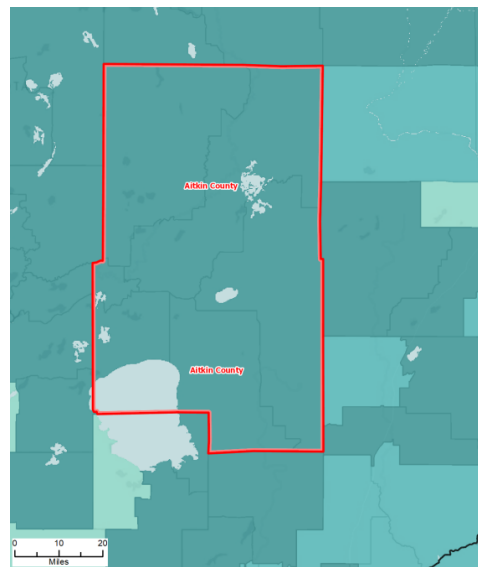
Note the median age of our population, relative to state and national medians.

### Median Age (2015-2019)



Sources: 

- US Census Bureau American Community Survey 5-year estimates.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).



Median Age by Tract, ACS 2015-19

- Over 45.0
- 40.1 - 45.0
- 35.1 - 40.0
- Under 35.1
- No Data or Data Suppressed

Map Legend

Report Location, County

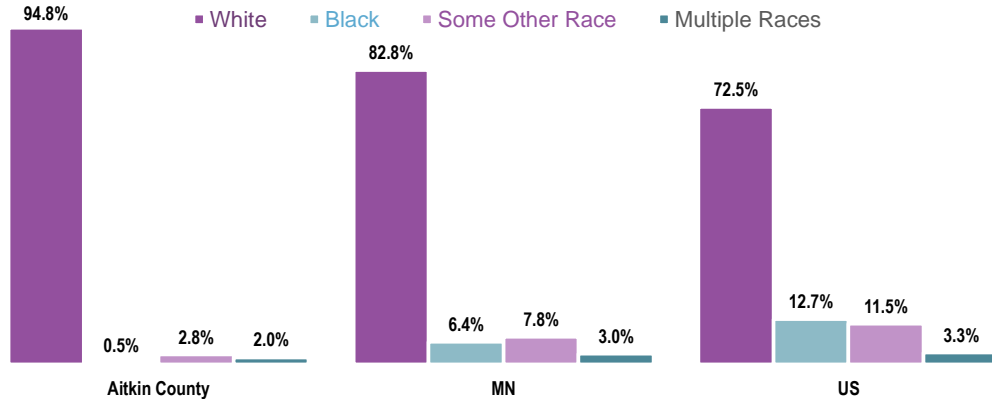
SparkMap



## Race & Ethnicity

The following charts illustrate the racial and ethnic makeup of our community. Origin can be viewed as the heritage, nationality group, lineage, or country of birth of the person or the person's parents or ancestors before their arrival in the United States — people who identify their origin as Hispanic, Latino, or Spanish may be of any race.

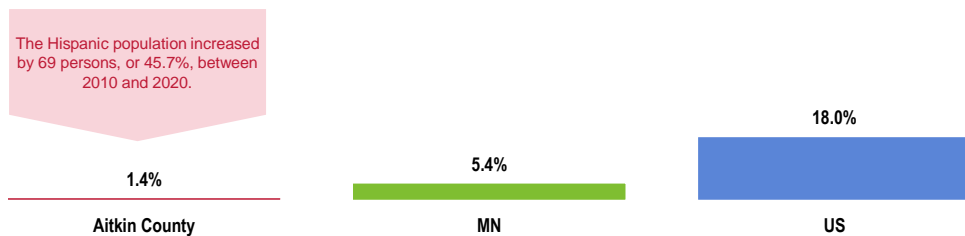
**Total Population by Race Alone**  
(2015-2019)



Sources: 

- US Census Bureau American Community Survey 5-year estimates.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

**Hispanic Population**  
(2015-2019)



Sources: 

- US Census Bureau American Community Survey 5-year estimates.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

  
Notes: 

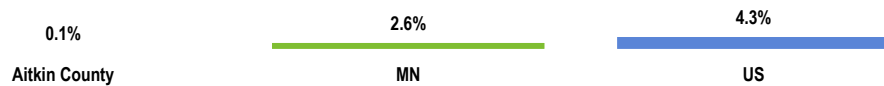
- Origin can be viewed as the heritage, nationality group, lineage, or country of birth of the person or the person's parents or ancestors before their arrival in the United States. People who identify their origin as Hispanic, Latino, or Spanish may be of any race.



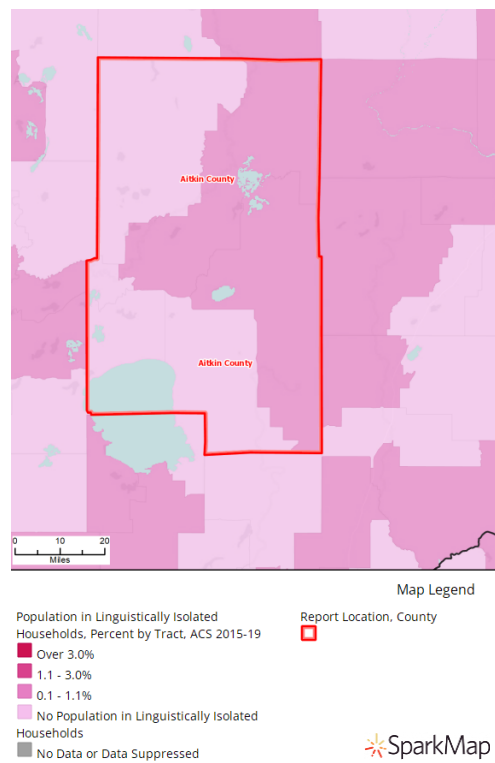
# Linguistic Isolation

This indicator reports the percentage of the population age 5 years and older who live in a home in which: 1) no person age 14 years or older speaks only English; or 2) no person age 14 years or older speaks a non-English language but also speaks English “very well.”

## Linguistically Isolated Population (2015-2019)



- Sources:
- US Census Bureau American Community Survey 5-year estimates.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).
- Notes:
- This indicator reports the percentage of the population age 5+ who live in a home in which no person age 14+ speaks only English, or in which no person age 14+ speak a non-English language and speak English “very well.”



# SOCIAL DETERMINANTS OF HEALTH

## ABOUT SOCIAL DETERMINANTS OF HEALTH

Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

Social determinants of health (SDOH) have a major impact on people's health, well-being, and quality of life. Examples of SDOH include:

- Safe housing, transportation, and neighborhoods
- Racism, discrimination, and violence
- Education, job opportunities, and income
- Access to nutritious foods and physical activity opportunities
- Polluted air and water
- Language and literacy skills

SDOH also contribute to wide health disparities and inequities. For example, people who don't have access to grocery stores with healthy foods are less likely to have good nutrition. That raises their risk of health conditions like heart disease, diabetes, and obesity — and even lowers life expectancy relative to people who do have access to healthy foods.

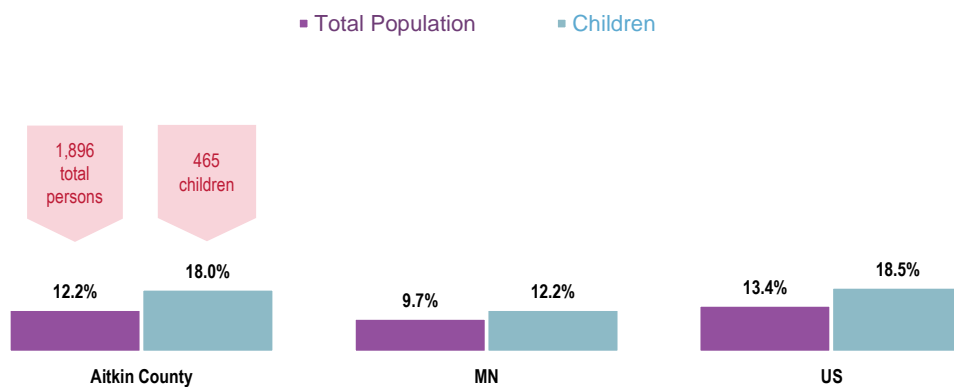
Just promoting healthy choices won't eliminate these and other health disparities. Instead, public health organizations and their partners in sectors like education, transportation, and housing need to take action to improve the conditions in people's environments.

- Healthy People 2030 (<https://health.gov/healthypeople>)

## Poverty

Poverty is considered a key driver of health status. This indicator is relevant because poverty creates barriers to accessing health services, healthy food, and other necessities that contribute to optimal health. The following chart and maps outline the proportion of our population below the federal poverty threshold, as well the percentage of Aitkin County children living in poverty, in comparison to state and national figures.

**Population in Poverty**  
(Populations Living Below the Poverty Level; 2015-2019)  
Healthy People 2030 = 8.0% or Lower



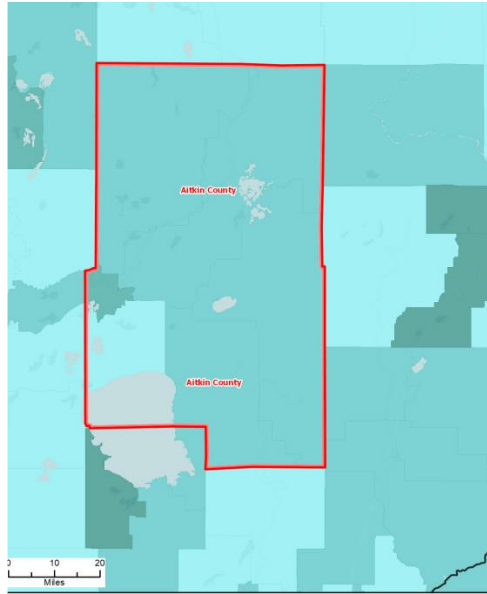
Sources: 

- US Census Bureau American Community Survey 5-year estimates.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
- US Department of Health and Human Services. Healthy People 2030, August 2030. <http://www.healthypeople.gov>

Notes: 

- Poverty is considered a key driver of health status. This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.



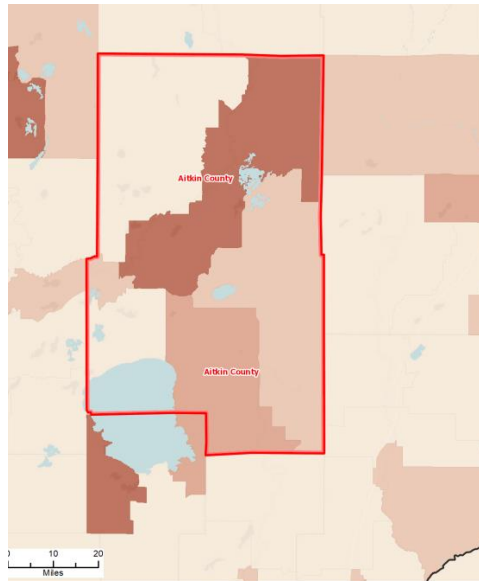


Map Legend

Population Below the Poverty Level, Percent by Tract, ACS 2015-19

- Over 20.0%
- 15.1 - 20.0%
- 10.1 - 15.0%
- Under 10.1%
- No Data or Data Suppressed

Report Location, County



Map Legend

Population Below the Poverty Level, Children (Age 0-17), Percent by Tract, ACS 2015-19

- Over 30.0%
- 22.6 - 30.0%
- 15.1 - 22.5%
- Under 15.1%
- No Population Age 0-17 Reported
- No Data or Data Suppressed

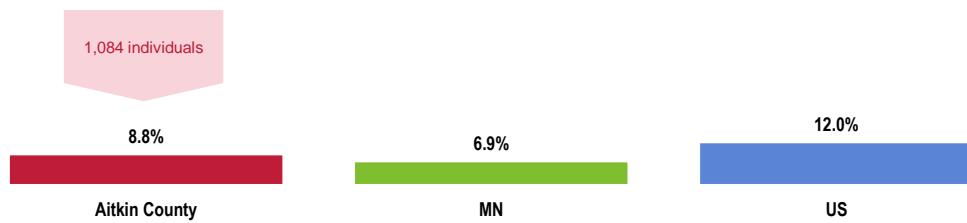
Report Location, County



## Education

Education levels are reflected in the proportion of our population without a high school diploma.

### Population With No High School Diploma (Population Age 25+ Without a High School Diploma or Equivalent, 2015-2019)

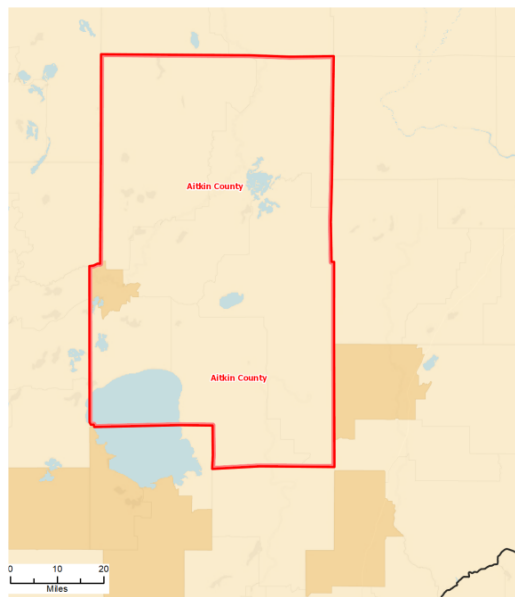


Sources: 

- US Census Bureau American Community Survey 5-year estimates.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

Notes: 

- This indicator is relevant because educational attainment is linked to positive health outcomes.



Population with No High School Diploma (Age 25+), Percent by Tract, ACS 2015-19

- Over 21.0%
- 16.1 - 21.0%
- 11.1 - 16.0%
- Under 11.1%
- No Data or Data Suppressed

Report Location, County

SparkMap



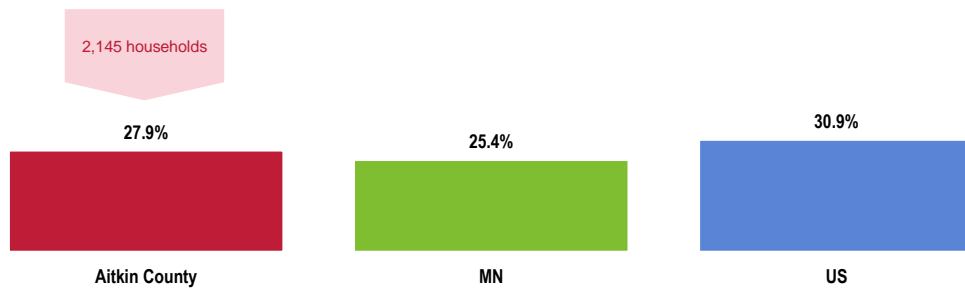


# Housing Burden

The following chart shows the housing burden in Aitkin County. This serves as a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels.

“Housing burden” reports the percentage of the households where housing costs (rent or mortgage costs) exceed 30% of total household income.

## Housing Costs Exceed 30% of Household Income (2015-2019)



- Sources:
- US Census Bureau, American Community Survey.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).
- Notes:
- This indicator reports the percentage of the households where housing costs exceed 30% of total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels.





# HEALTH STATUS

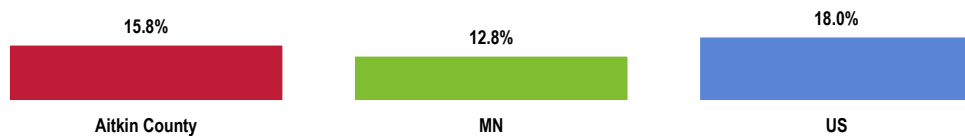
# OVERALL HEALTH STATUS

The CDC's Behavioral Risk Factor Survey, from which these data are derived, asked respondents:

*"Would you say that in general your health is: excellent, very good, good, fair, or poor?"*

The following indicator provides a relevant measure of overall health status in Aitkin County, noting the prevalence of residents' "fair" or "poor" health evaluations. While this measure is self-reported and a subjective evaluation, it is an indicator which has proven to be highly predictive of health needs.

## Adults With "Fair" or "Poor" Overall Health (2018)



Sources: 

- Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

Notes: 

- This indicator is relevant because it is a measure of general poor health status.



# MENTAL HEALTH

## ABOUT MENTAL HEALTH & MENTAL DISORDERS

About half of all people in the United States will be diagnosed with a mental disorder at some point in their lifetime. ...Mental disorders affect people of all age and racial/ethnic groups, but some populations are disproportionately affected. And estimates suggest that only half of all people with mental disorders get the treatment they need.

In addition, mental health and physical health are closely connected. Mental disorders like depression and anxiety can affect people's ability to take part in healthy behaviors. Similarly, physical health problems can make it harder for people to get treatment for mental disorders. Increasing screening for mental disorders can help people get the treatment they need.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Suicide

### AGE-ADJUSTED DEATH RATES

In order to compare mortality in the region with other localities (in this case, Minnesota and the United States), it is necessary to look at rates of death — these are figures which represent the number of deaths in relation to the population size (such as deaths per 100,000 population, as is used here).

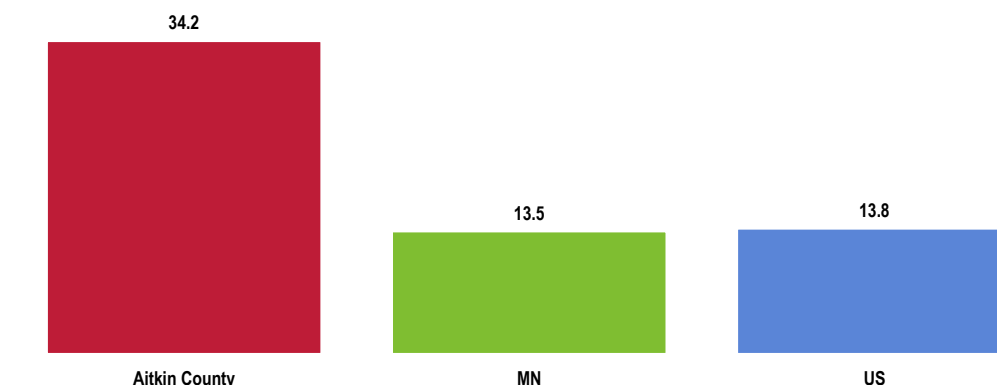
Furthermore, in order to compare localities without undue bias toward younger or older populations, the common convention is to adjust the data to some common baseline age distribution. Use of these “age-adjusted” rates provides the most valuable means of gauging mortality against benchmark data, as well as Healthy People 2030 objectives.

Note that deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10). Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

The following reports the rate of death in Aitkin County due to intentional self-harm (suicide) in comparison to statewide and national rates. Here, these rates are age-adjusted to account for age differences among populations in this comparison. This measure is relevant as an indicator of poor mental health.



## Suicide: Age-Adjusted Mortality (2015-2019 Annual Average Deaths per 100,000 Population) Healthy People 2030 = 12.8 or Lower



Sources: 

- Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
- US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>

Notes: 

- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

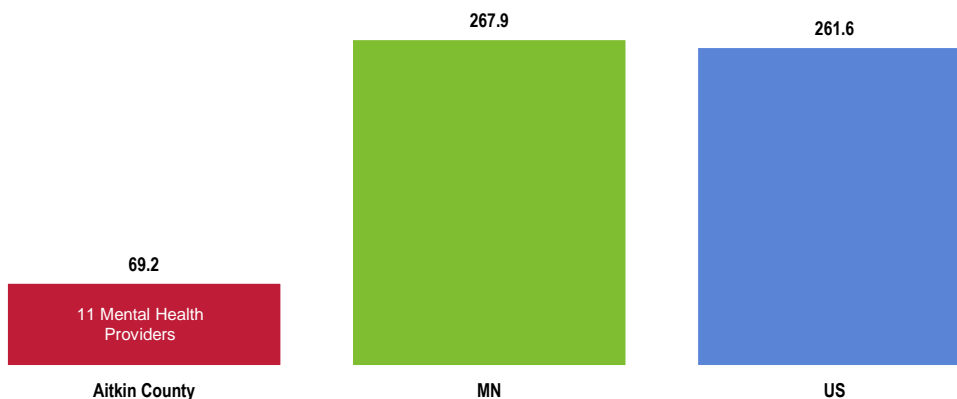
## Mental Health Providers

The data below show the number of mental health care providers in Aitkin County relative to the Aitkin County population size (per 100,000 residents). This is compared to the rates found statewide and nationally.

Here, "mental health providers" includes psychiatrists, psychologists, clinical social workers, and counsellors who specialize in mental health care.

Note that this indicator only reflects providers practicing in Aitkin County and residents in Aitkin County; it does not account for the potential demand for services from outside the area, nor the potential availability of providers in surrounding areas.

### Access to Mental Health Providers (Number of Mental Health Providers per 100,000 Population, 2020)



Sources: 

- University of Wisconsin Population Health Institute, County Health Rankings.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).

Notes: 

- This indicator reports the rate of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care.



## Key Informant Input: Mental Health

Key informants' ratings of the severity of *Mental Health* as a concern in Aitkin County are outlined below.

### Perceptions of Mental Health as a Problem in the Community (Key Informants, 2021)

■ Major Problem ■ Moderate Problem ■ Minor Problem ■ No Problem At All



Sources: • PRC Online Key Informant Survey, PRC, Inc.  
Notes: • Asked of all respondents.

## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Access to Care/Services

People with mental health problems have difficulty accessing clinics and mental health care providers. – Other Health Provider

Access to therapy and prescription meds. – Community Leader

Access to mental health services in general and how long they have to wait to be seen, especially for younger children. – Social Services Provider

Access to providers and services. We don't have enough providers to aid these people and wait times can be long. Also, those who are uninsured do not have access. – Other Health Provider

Lack of inpatient treatment. – Other Health Provider

Services, partnerships, support 24/7. – Community Leader

Obtaining immediate (or at least short-term) professional help. – Community Leader

Access. – Community Leader

Access to care, lack of therapists, especially child and geriatric therapists. – Other Health Provider

Lack of access to counseling/therapist and emergency care/inpatient needs are very far away. – Physician

Lack of immediate and long-term care. – Community Leader

Mental health diagnosis, care and support are very limited to those with long-term issues and communities, healthcare institutions and the police all struggle to provide care. We struggle to provide the minimal crisis intervention level of care and there is little preventive, intervention, or supportive care available with predictable catastrophic outcomes. – Community Leader

Accessing care/resources in a timely fashion. – Community Leader

Not enough resources. – Community Leader

The biggest challenge in our mental health is the availability of programs that connect the individual with adequate help and support. – Community Leader

### Contributing Factors

Access and stigma. – Community Leader

Unable to get appointments in a timely manner. Not enough knowledgeable doctors. – Community Leader

Lack of transparency between people, Feeling shameful. Attacking the root of many issues including technology downsides and breaking inner circle cycles like past family abuse etc. Society not living in the moment. Feeling of self-worth based on material items and status. – Community Leader

We have a high prevalence of people with cards stacked against them: unemployment, poverty, physical illness, substance abuse, etc. People who fall under these categories also lack the family support as well as healthy coping mechanisms. – Community Leader





Not getting the diagnosis when they do the follow-up and medications are not done. – Community Leader

People are mean to each other and it's unhealthy. In my opinion, social media is giving us a platform to tear each other apart. As a community and a nation, we need to have campaigns to encourage civility and kindness. We have national hot dog appreciation days, adopt-a-pet days, charitable giving days etc. Why not start a kindness initiative? We all like stories of people being kind. – Community Leader

Lack of support. Many people are not aware that their insurance policy covers mental health treatment. Some people fall into a coverage gap where treatment is not available to them. Lack of funding. Lack of transportation. Financial barriers (this hinders people from receiving needed care). In rural and low-income communities, there can be a significant shortage of mental health providers and services. – Public Health Representative

## Lack of Providers

I believe having the option of different providers as a choice would be helpful to our residents. The limited options can be a disservice to those who may not work well with the options available. This is a small community issue. I also believe there should be a push for some individuals toward self-sufficiency and working with their mental health issues. – Social Services Provider

Lack of providers on all levels, lack of mental health hospital beds, lack of front-line mental health workers such as peer support specialist and ARMHS (adult rehab mental health service) workers. – Social Services Provider

I keep hearing that there are not enough professionals to serve those who need help, especially the younger children. – Community Leader

## Denial/Stigma

Stigma. – Public Health Representative

## Awareness/Education

Awareness of where/how to get help and/or support groups. – Community Leader

## Incidence/Prevalence

Based on the number of clients using services such as public housing, social services, jail inmates struggling with mental health issues, etc. – Community Leader





# DEATH, DISEASE & CHRONIC CONDITIONS

# CARDIOVASCULAR DISEASE

## ABOUT HEART DISEASE & STROKE

Heart disease is the leading cause of death in the United States, and stroke is the fifth leading cause. ...Heart disease and stroke can result in poor quality of life, disability, and death. Though both diseases are common, they can often be prevented by controlling risk factors like high blood pressure and high cholesterol through treatment.

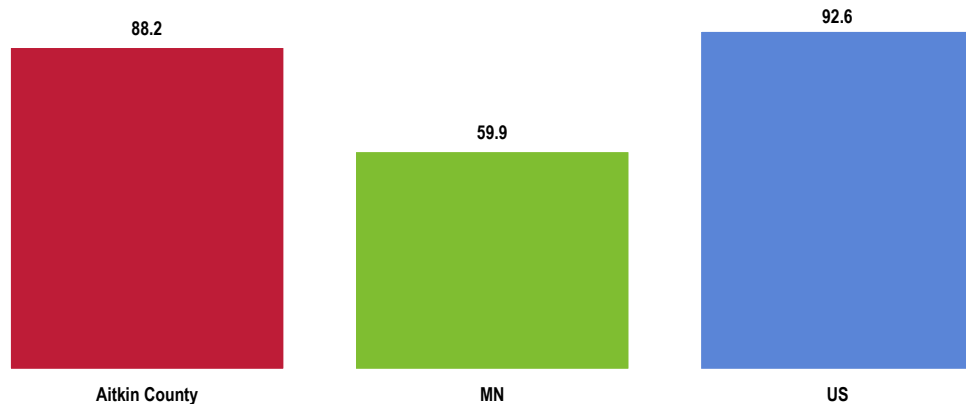
In addition, making sure people who experience a cardiovascular emergency — like stroke, heart attack, or cardiac arrest — get timely recommended treatment can reduce their risk for long-term disability and death. Teaching people to recognize symptoms is key to helping more people get the treatment they need.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Coronary Heart Disease Deaths

Coronary heart disease is a leading cause of death in Aitkin County and throughout the United States. The chart that follows illustrates how our (age-adjusted) mortality rate compares to rates in Minnesota and the US.

**Coronary Heart Disease: Age-Adjusted Mortality**  
(2015-2019 Annual Average Deaths per 100,000 Population)  
Healthy People 2030 = 90.9 or Lower



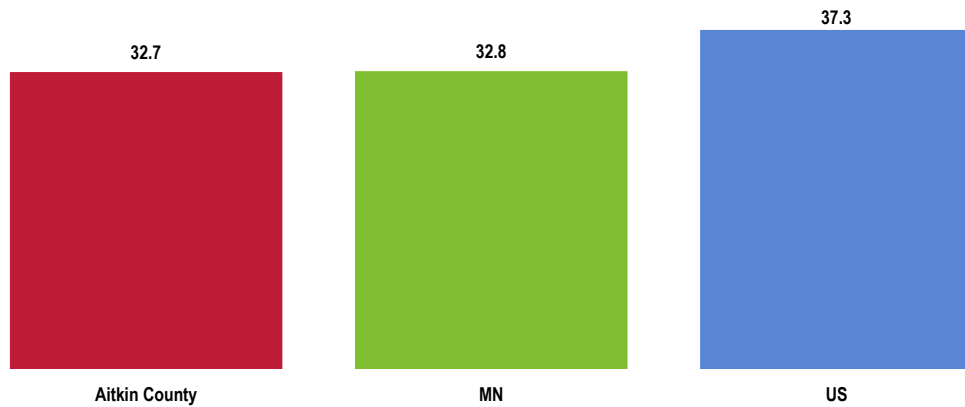
- Sources:
- Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
  - US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>
- Notes:
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
  - Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



## Stroke Deaths

Stroke, a leading cause of death in Aitkin County and throughout the nation, shares many of the same risk factors as heart disease. Outlined in the following chart is a comparison of stroke mortality locally, statewide, and nationally.

**Stroke: Age-Adjusted Mortality**  
(2015-2019 Annual Average Deaths per 100,000 Population)  
Healthy People 2030 = 33.4 or Lower



Sources: 

- Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).
- US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>

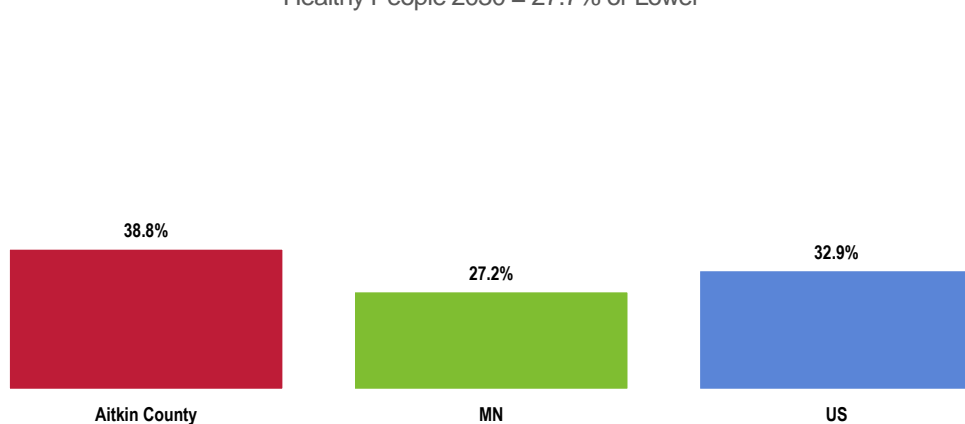
Notes: 

- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.

## High Blood Pressure

Uncontrolled high blood pressure (hypertension) can damage the body and lead to disability or heart attack and stroke. As can be seen in the following chart, a significant share of Aitkin County adults have been told by a health professional at some point that their blood pressure was high.

**Prevalence of High Blood Pressure**  
(2017)  
Healthy People 2030 = 27.7% or Lower



Sources: 

- Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).
- US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>

Notes: 

- This indicator is relevant because coronary heart disease is a leading cause of death in the US and is also related to high blood pressure, high cholesterol, and heart attacks.

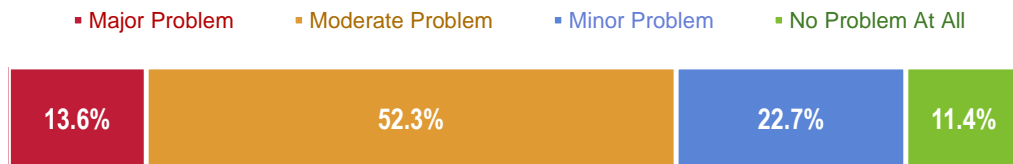
The CDC's Behavioral Risk Factor Survey asked:  
*"Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?"*



## Key Informant Input: Heart Disease & Stroke

Outlined below are key informants' levels of concern for *Heart Disease & Stroke* as an issue in Aitkin County.

### Perceptions of Heart Disease and Stroke as a Problem in the Community (Key Informants, 2021)



Sources: ● PRC Online Key Informant Survey, PRC, Inc.  
Notes: ● Asked of all respondents.

## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Incidence/Prevalence

- They are major problems in all communities. One is way more likely to have a heart attack or a stroke than to get cancer or die in an accident. – Community Leader
- I personally know of quite a number of people afflicted. – Community Leader
- Based on the number of people I personally know with these issues and the number of overweight individuals we have in our community. – Community Leader

### Aging Population

- Our population is older; all health concerns among the elderly are major. – Community Leader

### Lifestyle

- Sedentary lifestyles, diets. – Community Leader



# CANCER

## ABOUT CANCER

Cancer is the second leading cause of death in the United States. ...The cancer death rate has declined in recent decades, but over 600,000 people still die from cancer each year in the United States. Death rates are higher for some cancers and in some racial/ethnic minority groups. These disparities are often linked to social determinants of health, including education, economic status, and access to health care.

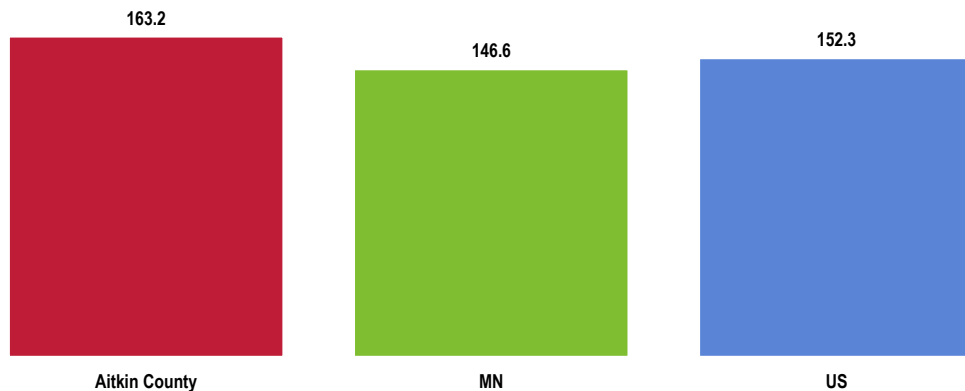
Interventions to promote evidence-based cancer screenings — such as screenings for lung, breast, cervical, and colorectal cancer — can help reduce cancer deaths. Other effective prevention strategies include programs that increase HPV vaccine use, prevent tobacco use and promote quitting, and promote healthy eating and physical activity. In addition, effective targeted therapies and personalized treatment are key to helping people with cancer live longer.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Age-Adjusted Cancer Deaths

Cancer is a leading cause of death in Aitkin County and throughout the United States. Age-adjusted cancer mortality rates are outlined below.

**Cancer: Age-Adjusted Mortality**  
(2015-2019 Annual Average Deaths per 100,000 Population)  
Healthy People 2030 = 122.7 or Lower



- Sources:
- Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
  - US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>
- Notes:
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
  - Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



RELATED ISSUE  
See also *Nutrition, Physical Activity & Weight and Tobacco Use* in the **Modifiable Health Risks** section of this report.

## ABOUT CANCER RISK

Reducing the nation's cancer burden requires reducing the prevalence of behavioral and environmental factors that increase cancer risk.

- All cancers caused by cigarette smoking could be prevented. At least one-third of cancer deaths that occur in the United States are due to cigarette smoking.
  - According to the American Cancer Society, about one-third of cancer deaths that occur in the United States each year are due to nutrition and physical activity factors, including obesity.
- National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention

## Mammograms

### FEMALE BREAST CANCER

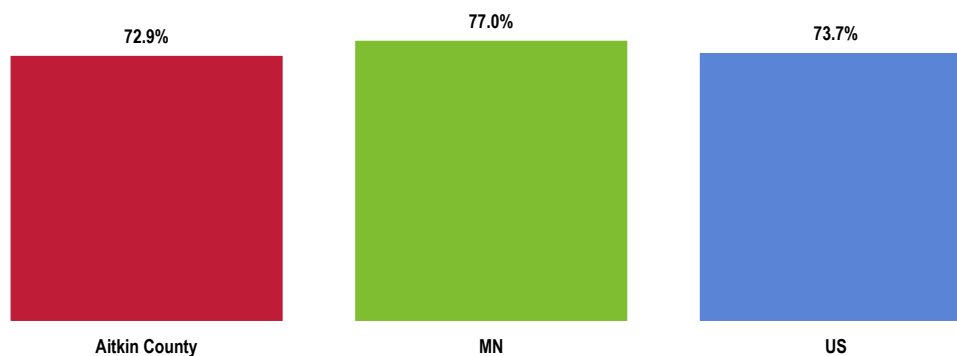
The US Preventive Services Task Force (USPSTF) recommends biennial screening mammography for women aged 50 to 74 years.

- US Preventive Services Task Force, Agency for Healthcare Research and Quality, US Department of Health & Human Services

Note that other organizations (e.g., American Cancer Society, American Academy of Family Physicians, American College of Physicians, National Cancer Institute) may have slightly different screening guidelines.

The following indicator outlines the percentage of female residents age 50-74 who have received a mammogram in the past two years. Mammography is important as a preventive behavior for early detection and treatment of health problems. Low screening levels can highlight a lack of access to preventive care, a lack of health knowledge, or other barriers.

### Mammogram in Past Two Years (Women Age 50-74; 2018) Healthy People 2030 = 77.1% or Higher



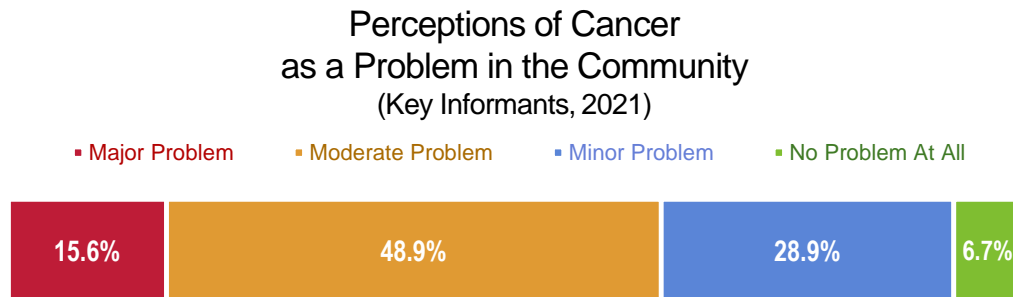
Sources: • Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care.  
• Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved via SparkMap (sparkmap.org).  
• US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>

Notes: • This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems.



## Key Informant Input: Cancer

Key informants' perceptions of *Cancer* as a local health concern are outlined below.



Sources: • PRC Online Key Informant Survey, PRC, Inc.  
Notes: • Asked of all respondents.

## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Incidence/Prevalence

The number of individuals with cancer seems to be a large number. The ability to complete treatment locally is good but can always be improved. – Community Leader

Simply due to the high presence in a large number of citizens. – Community Leader

Increased incidence of aggressive forms of cancer, at least with people I know. – Community Leader

Many people are diagnosed with cancer every year; it's a problem everywhere. In our community it is a bigger concern because you need to have transportation to Aitkin for treatment. – Community Leader

Based on the number of people I personally know that have or have had cancer. – Community Leader

Because it seems to be everywhere! – Community Leader

Cancer of many types effect many residents. – Public Health Representative





# RESPIRATORY DISEASE

## ABOUT RESPIRATORY DISEASE

Respiratory diseases affect millions of people in the United States. ...More than 25 million people in the United States have asthma. Strategies to reduce environmental triggers and make sure people get the right medications can help prevent hospital visits for asthma. In addition, more than 16 million people in the United States have COPD (chronic obstructive pulmonary disease), which is a major cause of death. Strategies to prevent the disease — like reducing air pollution and helping people quit smoking — are key to reducing deaths from COPD.

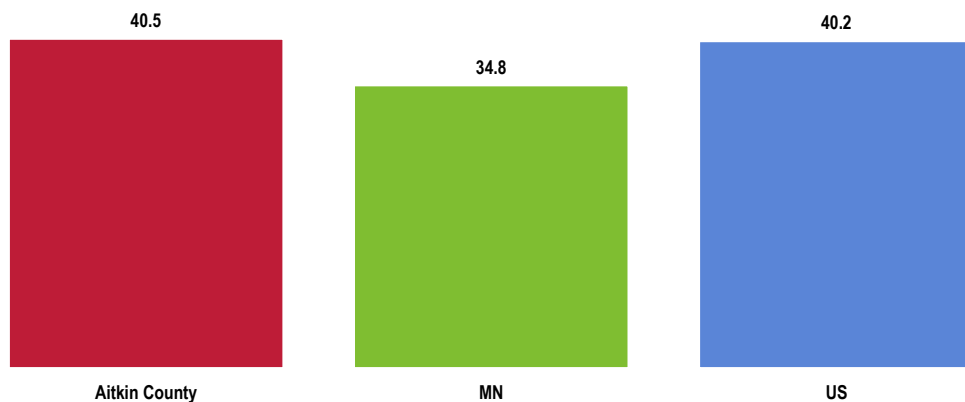
Interventions tailored to at-risk groups can also help prevent and treat other respiratory diseases — for example, pneumonia in older adults and pneumoconiosis in coal miners. And increasing lung cancer screening rates can help reduce deaths from lung cancer through early detection and treatment.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Lung Disease Deaths (CLRD)

The mortality rate for lung disease in Aitkin County is summarized below, in comparison with Minnesota and national rates.

**Lung Disease: Age-Adjusted Mortality**  
(2015-2019 Annual Average Deaths per 100,000 Population)



- Sources:
- Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
- Notes:
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
  - Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.
  - This indicator is relevant because lung disease is a leading cause of death in the United States.



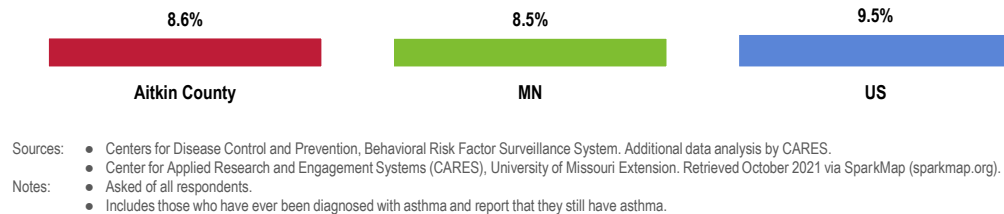
## Asthma Prevalence

The following chart shows the prevalence of asthma among Aitkin County adults.

The CDC Behavioral Risk Factor Survey asked respondents:

*“Has a doctor, nurse, or other health professional ever told you that you had asthma?”*

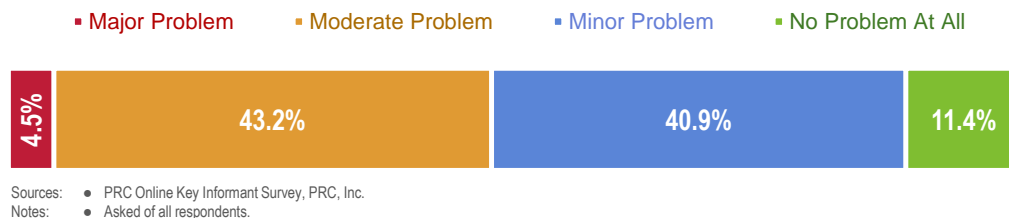
### Prevalence of Asthma (2018)



## Key Informant Input: Respiratory Disease

The following outlines key informants' perceptions of *Respiratory Disease* in our community.

### Perceptions of Respiratory Diseases as a Problem in the Community (Key Informants, 2021)



## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Incidence/Prevalence

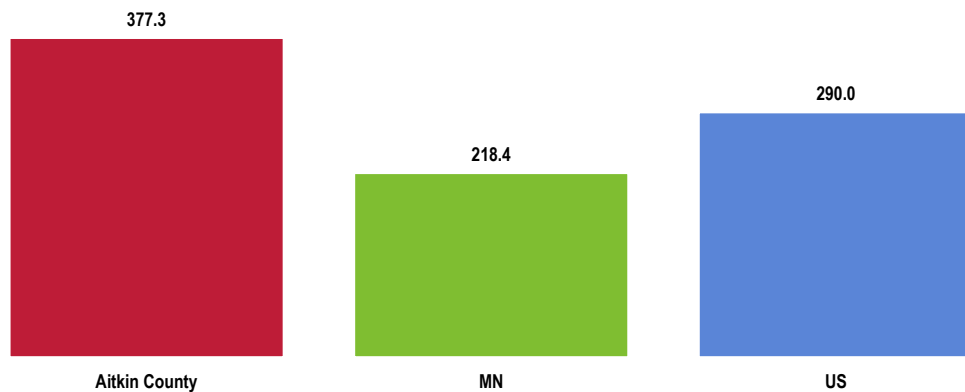
I know of several of my personal acquaintances who are afflicted, i.e., COPD, asthma, etc. – Community Leader



## Coronavirus/COVID-19 Deaths

The Aitkin County crude death rate for coronavirus/COVID-19 as of March 2022 is illustrated below, in comparison with state and US rates.

Coronavirus/COVID-19: Crude Mortality Rates  
(Deaths per 100,000 Population as of March 2022)

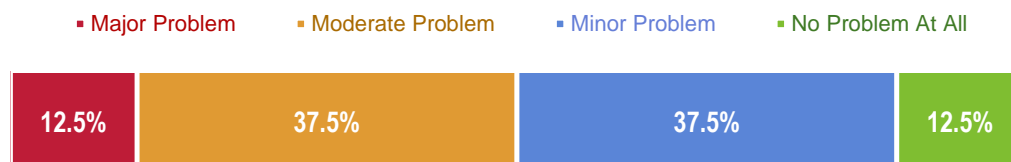


Sources: • Johns Hopkins University. Accessed via ESRI. Additional data analysis by CARES, 2022; University of Missouri Extension. Retrieved March 2022 via SparkMap (sparkmap.org).  
Notes: • Rates are crude deaths per 100,000 population as of March 2022.

## Key Informant Input: Coronavirus Disease/COVID-19

Key informants' levels of concern about *Coronavirus Disease/COVID-19* in Aitkin County is outlined below.

Perceptions of Coronavirus Disease/COVID-19  
as a Problem in the Community  
(Key Informants, 2021)



Sources: • PRC Online Key Informant Survey, PRC, Inc.  
Notes: • Asked of all respondents.



## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Awareness

- Because people in this community have not taken it seriously. – Community Leader
- Probably more of a fear versus actual problem. – Community Leader

### Lack of Public Health Mitigation Measures

- Many people have been sick with COVID, not many people take precautions seriously. We so have a higher vaccine rate, but is that among people under 55? – Community Leader
- Lack of masking and low vaccination rate. – Other Health Provider

### Incidence/Prevalence

- At this time, we are in a resurgence of COVID-Omni virus. – Community Leader
- Recent CDC and MDH number indicate we are in high transmission rate. – Community Leader

### Local COVID testing

- The ability to be tested for COVID related symptoms without having to drive 30 minutes to over an hour away. – Community Leader



# INJURY & VIOLENCE

## ABOUT INJURY & VIOLENCE

**INJURY** ► In the United States, unintentional injuries are the leading cause of death in children, adolescents, and adults younger than 45 years. ...Many unintentional injuries are caused by motor vehicle crashes and falls, and many intentional injuries involve gun violence and physical assaults. Interventions to prevent different types of injuries are key to keeping people safe in their homes, workplaces, and communities.

Drug overdoses are now the leading cause of injury deaths in the United States, and most overdoses involve opioids. Interventions to change health care providers' prescribing behaviors, distribute naloxone to reverse overdoses, and provide medications for addiction treatment for people with opioid use disorder can help reduce overdose deaths involving opioids.

**VIOLENCE** ► Almost 20,000 people die from homicide every year in the United States, and many more people are injured by violence. ...Many people in the United States experience physical assaults, sexual violence, and gun-related injuries. Adolescents are especially at risk for experiencing violence. Interventions to reduce violence are needed to keep people safe in their homes, schools, workplaces, and communities.

Children who experience violence are at risk for long-term physical, behavioral, and mental health problems. Strategies to protect children from violence can help improve their health and well-being later in life.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Unintentional Injury

### Age-Adjusted Unintentional Injury Deaths

Unintentional injury is a leading cause of death. The chart that follows illustrates unintentional injury death rates for Aitkin County, Minnesota, and the US.

**Unintentional Injuries: Age-Adjusted Mortality**  
(2015-2019 Annual Average Deaths per 100,000 Population)  
Healthy People 2030 = 43.2 or Lower



Sources: 

- Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved via SparkMap ([sparkmap.org](http://sparkmap.org)).
- US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>

Notes: 

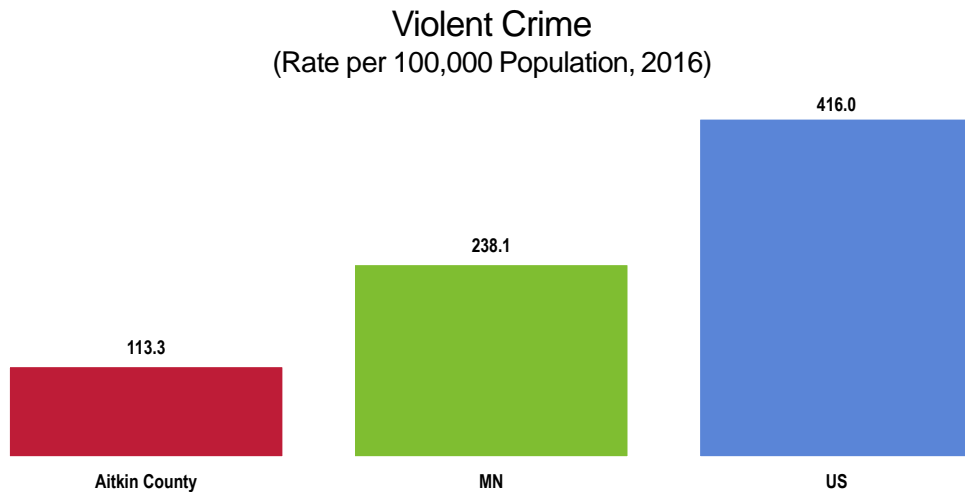
- Deaths are coded using the Tenth Revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10).
- Rates are per 100,000 population, age-adjusted to the 2000 US Standard Population.



## Intentional Injury (Violence)

### Violent Crime Rate

The following chart shows the rate of violent crime per 100,000 population in Aitkin County, Minnesota, and the US.



Sources: 

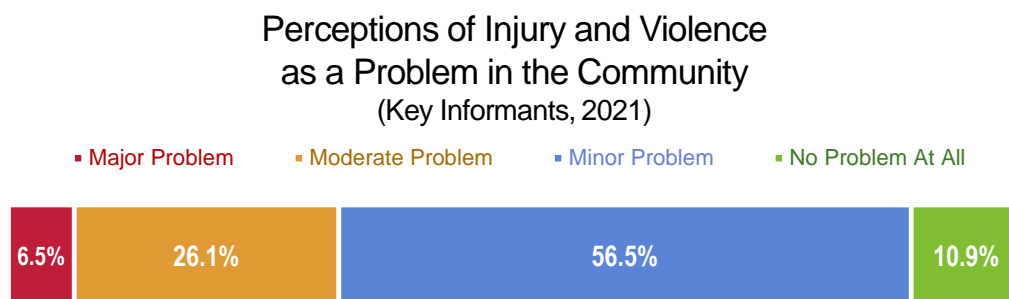
- Federal Bureau of Investigation, FBI Uniform Crime Reports.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

Notes: 

- This indicator reports the rate of violent crime offenses reported by the sheriff's office or county police department per 100,000 residents. Violent crime includes homicide, rape, robbery, and aggravated assault. This indicator is relevant because it assesses community safety.
- Participation by law enforcement agencies in the UCR program is voluntary. Sub-state data do not necessarily represent an exhaustive list of crimes due to gaps in reporting. Also, some institutions of higher education have their own police departments, which handle offenses occurring within campus grounds; these offenses are not included in the violent crime statistics but can be obtained from the Uniform Crime Reports Universities and Colleges data tables.

## Key Informant Input: Injury & Violence

Key informants' perceptions of *Injury & Violence* in our community:



Sources: 

- PRC Online Key Informant Survey, PRC, Inc.

Notes: 

- Asked of all respondents.



## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Domestic Violence

I believe domestic violence is all around us and it would be denial believing it is not a major problem in our community too. With limited resources for intervention, this is an area of great concern. – Community Leader

### Incidence/Prevalence

Injury and violence are major problems everywhere and we are not immune to those issues. Specifically, here we have a lot of low-income people that statistically are more prone to being involved in violent offenses. – Community Leader





# DIABETES

## ABOUT DIABETES

More than 30 million people in the United States have diabetes, and it's the seventh leading cause of death. ...Some racial/ethnic minorities are more likely to have diabetes. And many people with diabetes don't know they have it.

Poorly controlled or untreated diabetes can lead to leg or foot amputations, vision loss, and kidney damage. But interventions to help people manage diabetes can help reduce the risk of complications. In addition, strategies to help people who don't have diabetes eat healthier, get physical activity, and lose weight can help prevent new cases.

– Healthy People 2030 (<https://health.gov/healthypeople>)

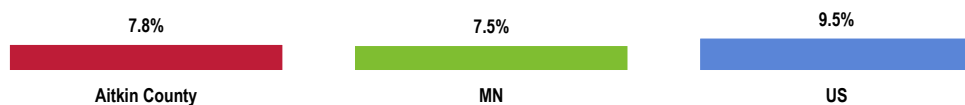
## Prevalence of Diabetes

Diabetes is a prevalent and long-lasting (chronic) health condition with a number of adverse health effects, and it may indicate an unhealthy lifestyle. The prevalence of diabetes among Aitkin County adults age 20 and older is outlined below, compared to state and national prevalence levels.

The CDC Behavioral Risk Factor Survey asked respondents:

*"Has a doctor, nurse, or other health professional ever told you that you had diabetes?"*

### Prevalence of Diabetes (Adults Age 20+, 2017)



Sources: 

- Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).

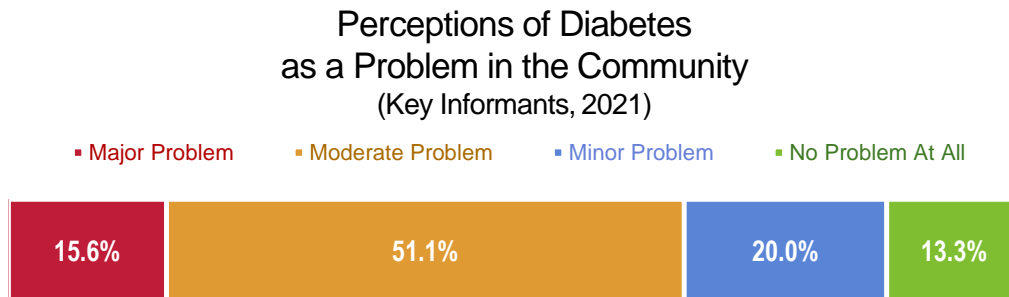
Notes: 

- This indicator is relevant because diabetes is a prevalent problem in the US; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.



## Key Informant Input: Diabetes

The following are key informants' ratings of *Diabetes* as a health concern in Aitkin County.



Sources: • PRC Online Key Informant Survey, PRC, Inc.  
Notes: • Asked of all respondents.

## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Contributing Factors

- Access to affordable healthy lifestyle options such as fresh fruits and vegetables and exercise programs. Also, cultural norms and family history play a role. We need to shift the conversation somehow to make eating right and exercising a normal part of life. – Community Leader
- Poor health management and not a healthy community. – Community Leader
- Lack of fitness facilities and proper healthy restaurants. – Community Leader

### Access to Affordable Healthy Food

- Affordable healthy foods. Eating on a budget often means fast food or quick boxed/processed foods. – Public Health Representative

### Disease Management

- That would be having diabetes and getting the necessary monitoring, education, and care they need to deal with it effectively. – Community Leader

### Affordable Care/Services

- Access to affordable supplies. Pharmacy in McGregor that is open on the weekends. – Community Leader

### Aging Population

- Aging community, sedentary living. – Community Leader



# KIDNEY DISEASE

## ABOUT KIDNEY DISEASE

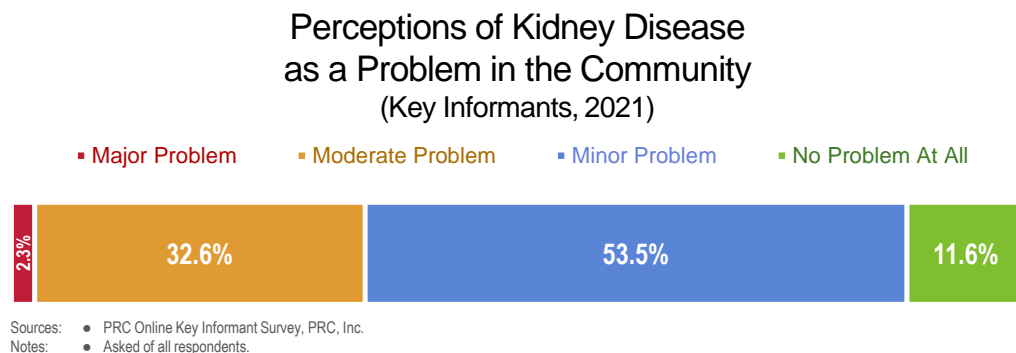
More than 1 in 7 adults in the United States may have chronic kidney disease (CKD), with higher rates in low-income and racial/ethnic minority groups. And most people with CKD don't know they have it. ...People with CKD are more likely to have heart disease and stroke — and to die early. Managing risk factors like diabetes and high blood pressure can help prevent or delay CKD. Strategies to make sure more people with CKD are diagnosed early can help people get the treatment they need.

Recommended tests can help identify people with CKD to make sure they get treatments and education that may help prevent or delay kidney failure and end-stage kidney disease (ESKD). In addition, strategies to make sure more people with ESKD get kidney transplants can increase survival rates and improve quality of life.

— Healthy People 2030 (<https://health.gov/healthypeople>)

## Key Informant Input: Kidney Disease

The following are the perceptions of *Kidney Disease* as a community health issue among key informants taking part in an online survey.



## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Incidence/Prevalence

■ An acquaintance that is dealing with kidney disease. — Community Leader



# POTENTIALLY DISABLING CONDITIONS

## Disability

### ABOUT DISABILITY & HEALTH

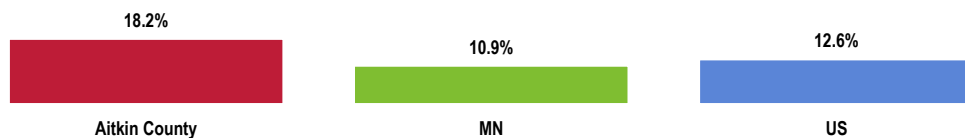
Studies have found that people with disabilities are less likely to get preventive health care services they need to stay healthy. Strategies to make health care more affordable for people with disabilities are key to improving their health.

In addition, people with disabilities may have trouble finding a job, going to school, or getting around outside their homes. And they may experience daily stress related to these challenges. Efforts to make homes, schools, workplaces, and public places easier to access can help improve quality of life and overall well-being for people with disabilities.

– Healthy People 2030 (<https://health.gov/healthypeople>)

The following represents the percentage of the total civilian, non-institutionalized population in Aitkin County with a disability. This indicator is relevant because disabled individuals may comprise a vulnerable population that requires targeted services and outreach.

### Population With Any Disability (Total Civilian Non-Institutionalized Population; 2015-2019)



Sources: 

- US Census Bureau, American Community Survey.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).

Notes: 

- This indicator is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers.

Disability data come from the US Census Bureau's American Community Survey (ACS), Survey of Income and Program Participation (SIPP), and Current Population Survey (CPS). All three surveys ask about six disability types: hearing difficulty, vision difficulty, cognitive difficulty, ambulatory difficulty, self-care difficulty, and independent-living difficulty.

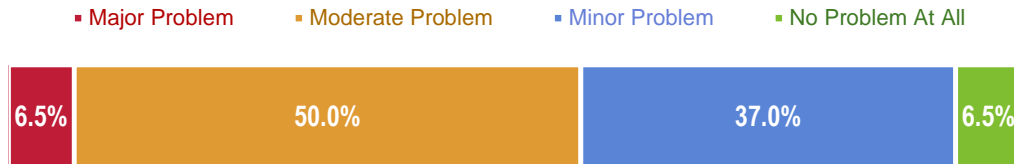
Respondents who report any one of the six disability types are considered to have a disability.



## Key Informant Input: Disability & Chronic Pain

Key informants' perceptions of *Disability & Chronic Pain* are outlined below.

### Perceptions of Disability & Chronic Pain as a Problem in the Community (Key Informants, 2021)



Sources: ● PRC Online Key Informant Survey, PRC, Inc.  
Notes: ● Asked of all respondents.

## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Incidence/Prevalence

I am new to this community, so I do not know how many people deal with this, but I have personal experience with it. My wife suffers from RA and there have been times I have had severe herniated disc problems. I have seen people much worse off than I and have witnessed how debilitating this can be to their physical and mental health. – Community Leader

Based on the number of disabled individuals I personally know and the number of people on public assistance programs due to disability. – Community Leader

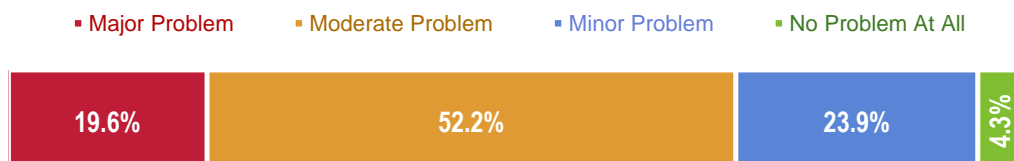
### Mobility Issues

Based on the number of ambulance/first responder calls, there appears to be an increasing number of people that suffer from mobility issues—aka calls for lift assists—perhaps more emphasis on physical therapy treatments in increasing a person's sense of balance issues, along with, developing more muscle strength so people can get up/stand up by their own strength. I see this as an ever-increasing problem! – Community Leader

## Key Informant Input: Dementia/Alzheimer's Disease

The following represents key informants' ratings of *Dementia/Alzheimer's Disease* as a community health concern.

### Perceptions of Dementia/Alzheimer's Disease as a Problem in the Community (Key Informants, 2021)



Sources: ● PRC Online Key Informant Survey, PRC, Inc.  
Notes: ● Asked of all respondents.



## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Aging Population

Our community is mostly senior, and we need more facilities and care for them and support for the caregivers. Could use more specialized doctors and information. – Community Leader

We are a community of upper-age bracket people. – Community Leader

There is no cure for dementia/Alzheimer’s. With our aging population, we have many people that have been diagnosed with this terrible disease. – Community Leader

### Incidence/Prevalence

It seems to affect large number of people. Why? – Community Leader

I have seen people suffer from it greatly. Of all the families/couples that I know, at least one of the grandparents suffers from Alzheimer’s or dementia. I do not know of a family that is not affected by this silent killer. – Community Leader

The prevalence is so high in our elderly. Difficult to early detect and not very good treatment options available. It’s not an issue with Riverwood’s services; rather we just don’t have a handle on how to prevent or stop its advance. – Community Leader

### Access to Care/Services

There are very few support systems or programs to help those identified with this disease. – Community Leader

### Diagnosis/Treatment

Late diagnosis prevents families and individuals from preparation and planning. It is important to be able to have conversations with an individual to be able to understand their wishes. – Community Leader

### Lack of Service Providers

Limited/lack of service providers (memory care) to safely serve people with this diagnosis in their home or in a safe community facility with staff that can address all aspects of need. – Public Health Representative





# BIRTHS



# FAMILY PLANNING

## ABOUT FAMILY PLANNING

Nearly half of pregnancies in the United States are unintended, and unintended pregnancy is linked to many negative outcomes for both women and infants. ...Unintended pregnancy is linked to outcomes like preterm birth and postpartum depression. Interventions to increase use of birth control are critical for preventing unintended pregnancies. Birth control and family planning services can also help increase the length of time between pregnancies, which can improve health for women and their infants.

Adolescents are at especially high risk for unintended pregnancy. Although teen pregnancy and birth rates have gone down in recent years, close to 200,000 babies are born to teen mothers every year in the United States. Linking adolescents to youth-friendly health care services can help prevent pregnancy and sexually transmitted infections in this age group.

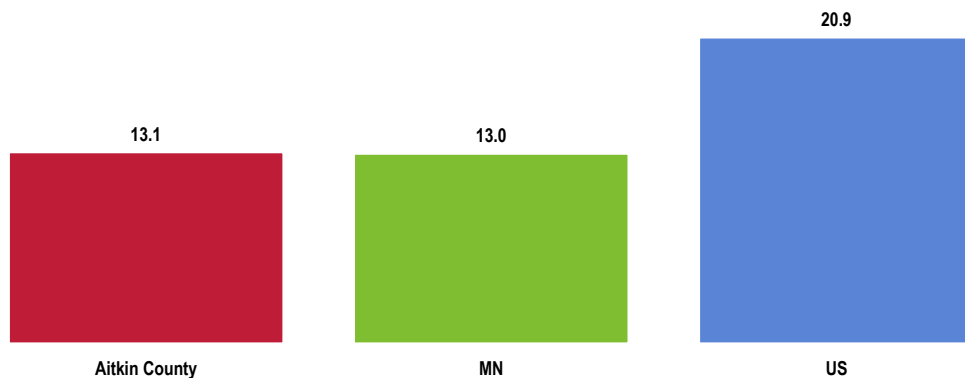
– Healthy People 2030 (<https://health.gov/healthypeople>)

## Births to Adolescent Mothers

The following chart outlines the teen birth rate in Aitkin County, compared to rates statewide and nationally. In many cases, teen parents have unique health and social needs. High rates of teen pregnancy might also indicate a prevalence of unsafe sexual behavior.

Here, teen births include births to women ages 15 to 19 years old, expressed as a rate per 1,000 female population in this age cohort.

**Teen Birth Rate**  
(Births to Adolescents Age 15-19 per 1,000 Females Age 15-19, 2013-2019)  
Healthy People 2030 = 31.4 or Lower



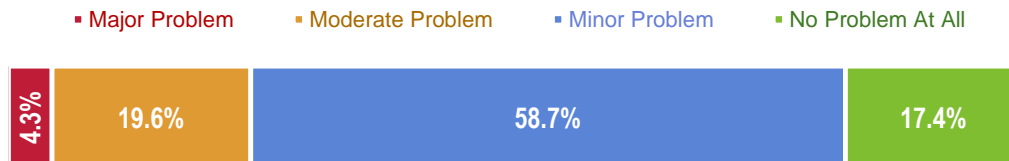
- Sources:
- Centers for Disease Control and Prevention, National Vital Statistics System.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
  - US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>
- Notes:
- This indicator is relevant because in many cases, teen parents have unique social, economic, and health support services. Additionally, high rates of teen pregnancy may indicate the prevalence of unsafe sex practices.



# Key Informant Input: Infant Health & Family Planning

Key informants' perceptions of *Infant Health & Family Planning* as a community health issue are outlined below.

## Perceptions of Infant Health and Family Planning as a Problem in the Community (Key Informants, 2021)



Sources: • PRC Online Key Informant Survey, PRC, Inc.  
Notes: • Asked of all respondents.

## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Access to Care/Services

Because the United States is a third world country when it comes to infant mortality, healthcare, and family planning. Although some people have good access to all, many others do not. – Community Leader

### Awareness/Education

It's not a problem so much as a reality. We have young people that need to learn about birth control at a young age and be supported through pregnancy. We have low-income families that need education on basic needs of children. – Community Leader





# MODIFIABLE HEALTH RISKS

# NUTRITION

## ABOUT NUTRITION & HEALTHY EATING

Many people in the United States don't eat a healthy diet. ...People who eat too many unhealthy foods — like foods high in saturated fat and added sugars — are at increased risk for obesity, heart disease, type 2 diabetes, and other health problems. Strategies and interventions to help people choose healthy foods can help reduce their risk of chronic diseases and improve their overall health.

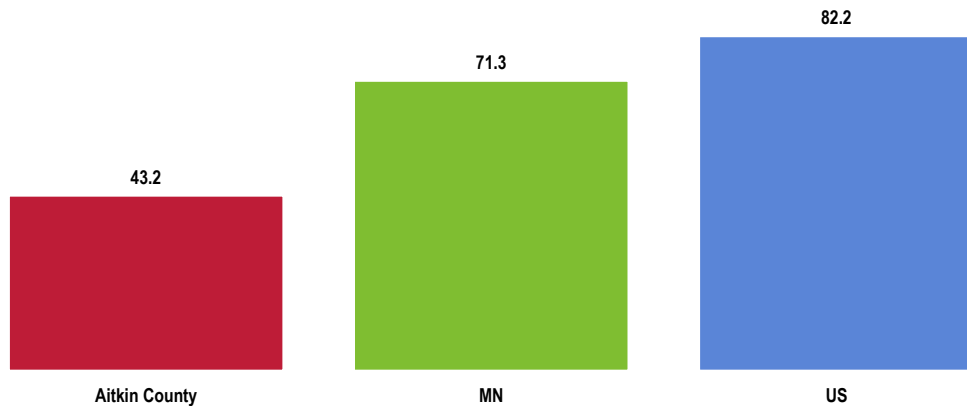
Some people don't have the information they need to choose healthy foods. Other people don't have access to healthy foods or can't afford to buy enough food. Public health interventions that focus on helping everyone get healthy foods are key to reducing food insecurity and hunger and improving health.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Food Environment: Fast Food

The following shows the number of fast-food restaurants in Aitkin County, expressed as a rate per 100,000 residents. This indicator provides a measure of healthy food access and environmental influences on nutrition.

**Fast Food Restaurants**  
(Number of Fast Food Restaurants per 100,000 Population, 2019)



Sources: 

- US Census Bureau, County Business Patterns. Additional data analysis by CARES.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).

Notes: 

- This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

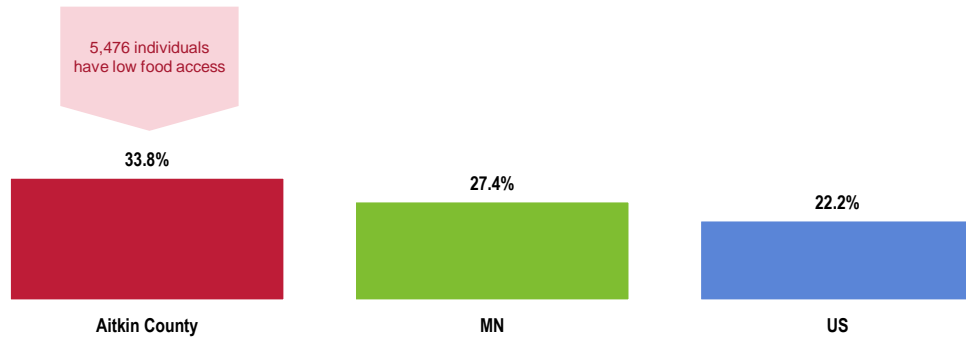


## Access to Healthful Food

Low food access is defined as living more than ½ mile from the nearest supermarket, supercenter, or large grocery store.

The following chart shows US Department of Agriculture data determining the percentage of Aitkin County residents found to have low food access, meaning that they do not live near a supermarket or large grocery store.

**Population With Low Food Access**  
(Percent of Population Far From a Supermarket or Large Grocery Store, 2019)

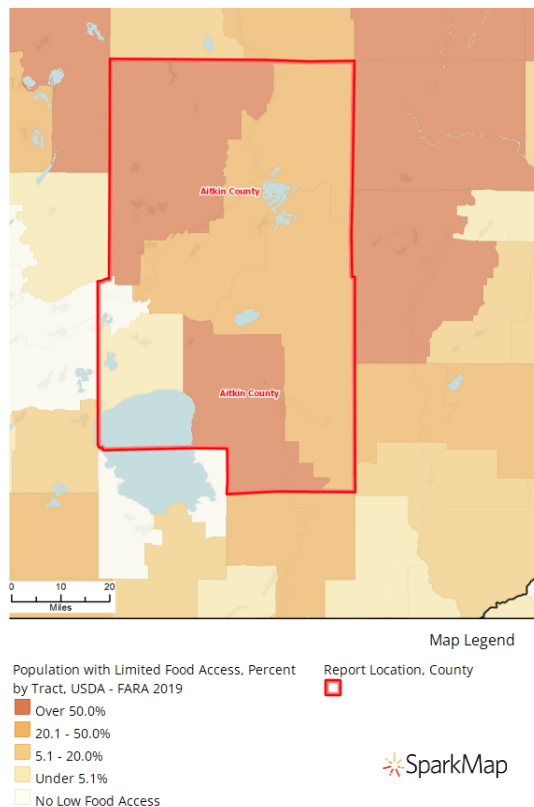


Sources: 

- US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas (FARA).
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).

Notes: 

- This indicator reports the percentage of the population with low food access. Low food access is defined as living more than ½ mile from the nearest supermarket, supercenter, or large grocery store. This indicator is relevant because it highlights populations and geographies facing food insecurity.



# PHYSICAL ACTIVITY

## ABOUT PHYSICAL ACTIVITY

Physical activity can help prevent disease, disability, injury, and premature death. The Physical Activity Guidelines for Americans lays out how much physical activity children, adolescents, and adults need to get health benefits. Although most people don't get the recommended amount of physical activity, it can be especially hard for older adults and people with chronic diseases or disabilities.

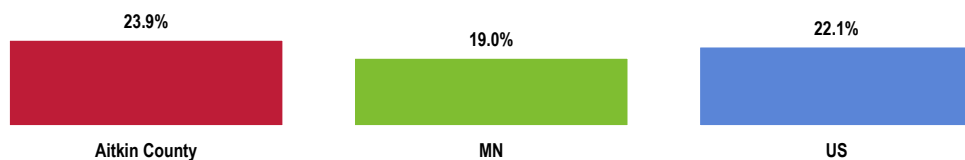
Strategies that make it safer and easier to get active — like providing access to community facilities and programs — can help people get more physical activity. Strategies to promote physical activity at home, at school, and at childcare centers can also increase activity in children and adolescents.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Leisure-Time Physical Activity

Below is the percentage of Aitkin County adults age 20 and older who report no leisure-time physical activity in the past month. This measure is important as an indicator of risk for significant health issues such as obesity or poor cardiovascular health.

### No Leisure-Time Physical Activity in the Past Month (Adults Age 20+, 2017) Healthy People 2030 = 21.2% or Lower



- Sources:
- Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
  - US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>
- Notes:
- This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.





# WEIGHT STATUS

## ABOUT OVERWEIGHT & OBESITY

Obesity is linked to many serious health problems, including type 2 diabetes, heart disease, stroke, and some types of cancer. Some racial/ethnic groups are more likely to have obesity, which increases their risk of chronic diseases.

Culturally appropriate programs and policies that help people eat nutritious foods within their calorie needs can reduce overweight and obesity. Public health interventions that make it easier for people to be more physically active can also help them maintain a healthy weight.

- Healthy People 2030 (<https://health.gov/healthypeople>)

Body Mass Index (BMI), which describes relative weight for height, is significantly correlated with total body fat content. The BMI should be used to assess overweight and obesity and to monitor changes in body weight. In addition, measurements of body weight alone can be used to determine efficacy of weight loss therapy. BMI is calculated as weight (kg)/height squared ( $m^2$ ). To estimate BMI using pounds and inches, use: [weight (pounds)/height squared (inches<sup>2</sup>)] x 703.

In this report, overweight is defined as a BMI of 25.0 to 29.9  $kg/m^2$  and obesity as a BMI  $\geq 30 kg/m^2$ . The rationale behind these definitions is based on epidemiological data that show increases in mortality with BMIs above 25  $kg/m^2$ . The increase in mortality, however, tends to be modest until a BMI of 30  $kg/m^2$  is reached. For persons with a BMI  $\geq 30 kg/m^2$ , mortality rates from all causes, and especially from cardiovascular disease, are generally increased by 50 to 100 percent above that of persons with BMIs in the range of 20 to 25  $kg/m^2$ .

- Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults: The Evidence Report. National Institutes of Health. National Heart, Lung, and Blood Institute in Cooperation With The National Institute of Diabetes and Digestive and Kidney Diseases. September 1998.

CLASSIFICATION OF OVERWEIGHT AND OBESITY BY BMI	BMI ( $kg/m^2$ )
Underweight	<18.5
Normal	18.5 – 24.9
Overweight	25.0 – 29.9
Obese	$\geq 30.0$

Source: Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults: The Evidence Report. National Institutes of Health. National Heart, Lung, and Blood Institute in Cooperation With The National Institute of Diabetes and Digestive and Kidney Diseases. September 1998.



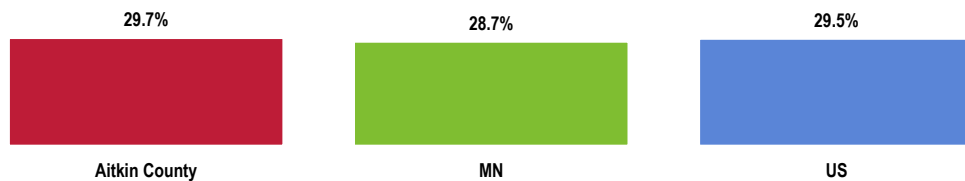


## Obesity

"Obese" includes respondents with a BMI value  $\geq 30.0$ .

Outlined below is the percentage of Aitkin County adults age 20 and older who are obese, indicating that they might lead an unhealthy lifestyle and be at risk for adverse health issues.

### Prevalence of Obesity (Adults Age 20+ With a Body Mass Index $\geq 30.0$ , 2017) Healthy People 2030 = 36.0% or Lower

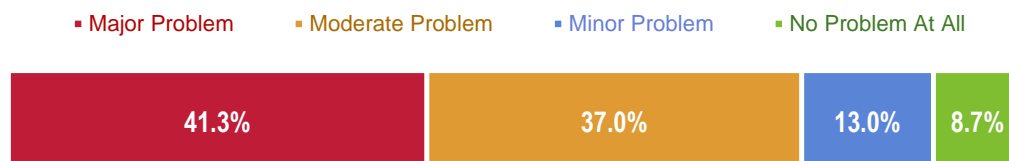


- Sources:
- Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).
  - US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>
- Notes:
- The definition of obesity is having a body mass index (BMI), a ratio of weight to height (kilograms divided by meters squared), greater than or equal to 30.0, regardless of gender.
  - This indicator is relevant because excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

## Key Informant Input: Nutrition, Physical Activity & Weight

Key informants' ratings of *Nutrition, Physical Activity & Weight* as a community health issue are illustrated below.

### Perceptions of Nutrition, Physical Activity, and Weight as a Problem in the Community (Key Informants, 2021)



- Sources:
- PRC Online Key Informant Survey, PRC, Inc.
- Notes:
- Asked of all respondents.



## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Contributing Factors

There is not enough emphasis on this issue. A healthier society would reduce many of the questions asked in this survey. Also, the availability for an exercise facility is extremely limited in our area. – Community Leader

No community center, high cost of food, access to healthy foods. – Other Health Provider

NUTRITION: Access to nutritious foods (food shelves don't always have nutritious options to choose from). No community gardens where community members can grow their own produce. Worksite wellness infrastructure that supports healthy food. Access to healthy food/snacks at schools. PHYSICAL ACTIVITY: Financial stress (not being able to purchase a gym membership). Access to physical activity (walking trails, infrastructure that doesn't support walking/biking throughout towns, poor conditions of sidewalks, lack of snow removal, gyms/community centers). Worksite wellness infrastructure that supports healthy food. WEIGHT: Everything mentioned above is directly related to weight status. There are too many organizations/institutions try to accomplish the same task (improving health and wellness) but are doing silo work. Organizations and institutions need to come together and join forces. Thus, more can be accomplished by working as a team. – Public Health Representative

Financial challenges and societal norms. – Community Leader

Lack of grocery stores with affordable fresh produce. Lack of area for exercise in the cold months. – Other Health Provider

### Awareness/Education

People either don't understand or don't care how important nutrition, physical activity and staying within at a decent weight are to overall health and happiness. I'm not sure if putting out more flyers or having more classes with help. I've had people tell me things like: my doctor told me to lose weight but he's overweight, too. As if that gives them justification for not doing anything about it. Our nation's culture of having things easy and ready-made has contributed a lot to this issue. In our small communities there are a number of people so heavy they are in electric scooters. And I would say the majority of our population are overweight and are not physically active. – Social Services Provider

Ignorance regarding obesity as a disease among both the public and health care workers. Sedentary lifestyle choices by the majority of people starting in childhood. – Physician

Education. – Community Leader

### Built Environment

This community continually fails to build facilities that would be beneficial to community members in regard to physical activity. Not enough gyms, no swimming pools, no indoor walking facilities. – Community Leader

I struggle with all of these and winter in Minnesota does not help. We need more walking trails and healthy activities that do not include shoveling snow. – Community Leader

### Healthy Lifestyles

Busy lives and convenience leave less room for a healthy lifestyle. I feel food can fill a gap like drugs, alcohol, eating disorders, over working, and sexual promiscuity. I also feel the strive for accomplishment and fast pace allows permitted excuses to not exercise and eat poorly. People on government assistance should only be allowed healthy items with assistance similar to a WIC program. – Community Leader

### Nutrition

Most residents do not get proper meals because of schedules/sports and working schedules. Much of the food purchased is EBT and not much is purchased that is or has any nutritional value. Junk food, energy drinks and processed foods are the main meals. This includes most purchases that allowed with EBT funds. – Community Leader

### Access to Care/Services

No gyms or nutrition locations to purchase healthy food and services. – Community Leader

Lack of affordable options that are kept up/maintained. – Public Health Representative

### Obesity

Obesity and weight-related illnesses. – Community Leader

### Recreational Facilities

Limited fitness facilities and no indoor lap swimming. – Community Leader



# SUBSTANCE ABUSE

## ABOUT DRUG & ALCOHOL USE

More than 20 million adults and adolescents in the United States have had a substance use disorder in the past year. ...Substance use disorders can involve illicit drugs, prescription drugs, or alcohol. Opioid use disorders have become especially problematic in recent years. Substance use disorders are linked to many health problems, and overdoses can lead to emergency department visits and deaths.

Effective treatments for substance use disorders are available, but very few people get the treatment they need. Strategies to prevent substance use — especially in adolescents — and help people get treatment can reduce drug and alcohol misuse, related health problems, and deaths.

– Healthy People 2030 (<https://health.gov/healthypeople>)

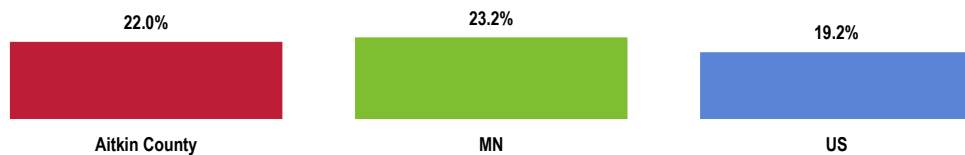
## Excessive Alcohol Use

**Excessive drinking** includes heavy and/or binge drinkers:

- **HEAVY DRINKERS** ► men reporting 2+ alcoholic drinks per day or women reporting 1+ alcoholic drink per day in the month preceding the interview.
- **BINGE DRINKERS** ► men reporting 5+ alcoholic drinks or women reporting 4+ alcoholic drinks on any single occasion during the past month.

The following illustrates the prevalence of excessive drinkers in Aitkin County, as well as statewide and nationally. Excessive drinking is linked to significant health issues, such as cirrhosis, certain cancers, and untreated mental/behavioral health issues.

### Excessive Drinkers (2018)



Sources: • Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse.

Notes: • Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).  
• This indicator reports the percentage of adults aged 18 and older who self-report heavy alcohol consumption (defined as more than two drinks per day on average for men and one drink per day on average for women). This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as cirrhosis, cancers, and untreated mental and behavioral health needs.



## Key Informant Input: Substance Abuse

Note the following perceptions regarding *Substance Abuse* in the community among key informants taking part in an online survey.

### Perceptions of Substance Abuse as a Problem in the Community (Key Informants, 2021)

■ Major Problem   ■ Moderate Problem   ■ Minor Problem   ■ No Problem At All



Sources: • PRC Online Key Informant Survey, PRC, Inc.  
Notes: • Asked of all respondents.

## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Access to Care/Services

- It seems as though there are not enough facilities with enough spots that are able to help people. The burden probably should not fall on law enforcement and medical centers. – Community Leader
- There are not enough good faith-based recovery groups in the area. – Community Leader
- No in-county beds or detoxification center. – Community Leader
- Lack of access to counseling and recovery programs. – Physician
- Ease of access to substances-true cessation programs. We have Al-Anon but we have a growing problem of kids using and abusing substances. There are limited awareness programs and teens are the greatest target market. – Community Leader
- Lack of treatment centers in the area. Financial cost of treatment centers. Transportation to seek help at treatment centers and/or resources available. – Public Health Representative
- Lack of regional residential treatment facilities. – Community Leader

### Awareness/Education

- Awareness of what is out there to help. Education on dangers. – Community Leader
- Patients not understanding point of entry, beds unavailable. – Other Health Provider

### Contributing Factors

- People need to be willing to attend. Once again, attacking the underlying condition of mental health. The roots are still in family breakdown and a need to get an endorphin boost whether from drugs, food, sex, ego, etc. – Community Leader
- The first barrier is having an actual desire to go to treatment and the second barrier is having inpatient bed space available. I do not consider outpatient treatment effective enough to consider. – Community Leader

### Lack of Providers

- Lack of providers in our area, lack of transportation to get to and from treatment. – Social Services Provider
- Lack of providers and funding to provide support services. – Community Leader

### Alcohol Use

- Alcohol use. I feel that it is a problem because there is not much to do in our community. Since COVID, it seems that people stayed home as directed and drank. – Community Leader



## Prevention

Prevention of substance abuse is failing in our families, schools and workplaces. – Physician

## Most Problematic Substances

Note below which substances key informants (who rated this as a “major problem”) identified as causing the most problems in Aitkin County.

SUBSTANCES VIEWED AS MOST PROBLEMATIC IN THE COMMUNITY (Among Key Informants Rating Substance Abuse as a “Major Problem”)	
ALCOHOL	76.5%
HEROIN OR OTHER OPIOIDS	11.8%
METHAMPHETAMINE OR OTHER AMPHETAMINES	5.9%
MARIJUANA	5.9%



# TOBACCO USE

## ABOUT TOBACCO USE

More than 16 million adults in the United States have a disease caused by smoking cigarettes, and smoking-related illnesses lead to half a million deaths each year.

Most deaths and diseases from tobacco use in the United States are caused by cigarettes. Smoking harms nearly every organ in the body and increases the risk of heart disease, stroke, lung diseases, and many types of cancer. Although smoking is widespread, it's more common in certain groups, including men, American Indians/Alaska Natives, people with behavioral health conditions, LGBT people, and people with lower incomes and education levels.

Several evidence-based strategies can help prevent and reduce tobacco use and exposure to secondhand smoke. These include smoke-free policies, price increases, and health education campaigns that target large audiences. Methods like counseling and medication can also help people stop using tobacco.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Cigarette Smoking Prevalence

Tobacco use is linked to the two major leading causes of death: cancer and cardiovascular disease. Note below the prevalence of cigarette smoking in our community.

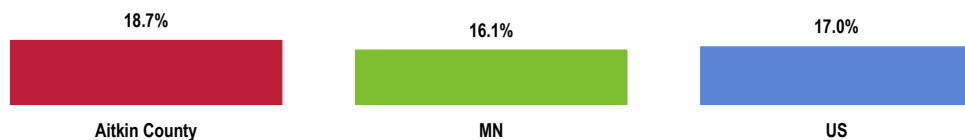
The CDC Behavioral Risk Factor Surveillance Survey asked respondents:

*“Do you now smoke cigarettes every day, some days, or not at all?”*

“Current smokers” are defined as those who smoke every day or on some days.

### Current Smokers (2018)

Healthy People 2030 = 5.0% or Lower

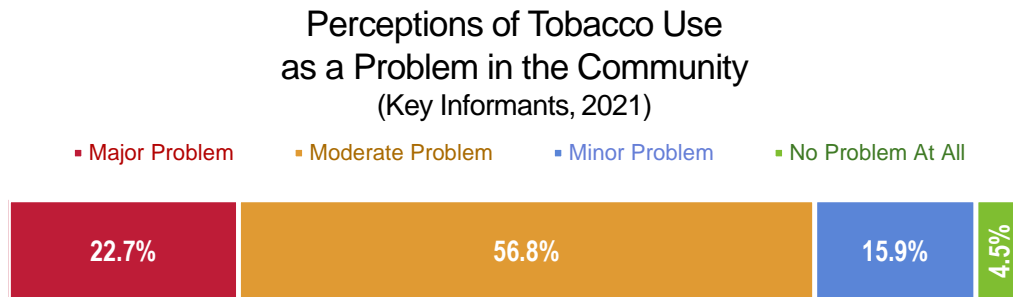


- Sources:
- Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse.
  - Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
  - US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>
- Notes:
- Includes regular and occasional smokers (those who smoke cigarettes every day or on some days).
  - This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.



## Key Informant Input: Tobacco Use

Below are key informants' ratings of *Tobacco Use* as a community health concern.



Sources: • PRC Online Key Informant Survey, PRC, Inc.  
Notes: • Asked of all respondents.

### Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

#### E-Cigarettes

Vaping/tobacco has been a serious problem at the school districts in Aitkin County. – Public Health Representative

Vaping is a growing issue. I am willing to bet 80% of our students 7-12 have used or currently use vapes. It is viewed as better than traditional smoking simply because there isn't the tar. The problem is that they are often more addictive than traditional cigarettes. Peer pressure is high, and use is everywhere. – Community Leader

#### Incidence/Prevalence

Too many people smoke in this community. – Community Leader

Many still smoking or knowledge of risks due to tobacco use. – Other Health Provider

#### Awareness/Education

Not enough education to young people. – Community Leader

#### Teen/Young Adult Usage

Introduction/addiction at young age and limited intervention at school level. – Public Health Representative



# SEXUAL HEALTH

## ABOUT HIV & SEXUALLY TRANSMITTED INFECTIONS

Although many sexually transmitted infections (STIs) are preventable, there are more than 20 million estimated new cases in the United States each year — and rates are increasing. In addition, more than 1.2 million people in the United States are living with HIV (human immunodeficiency virus).

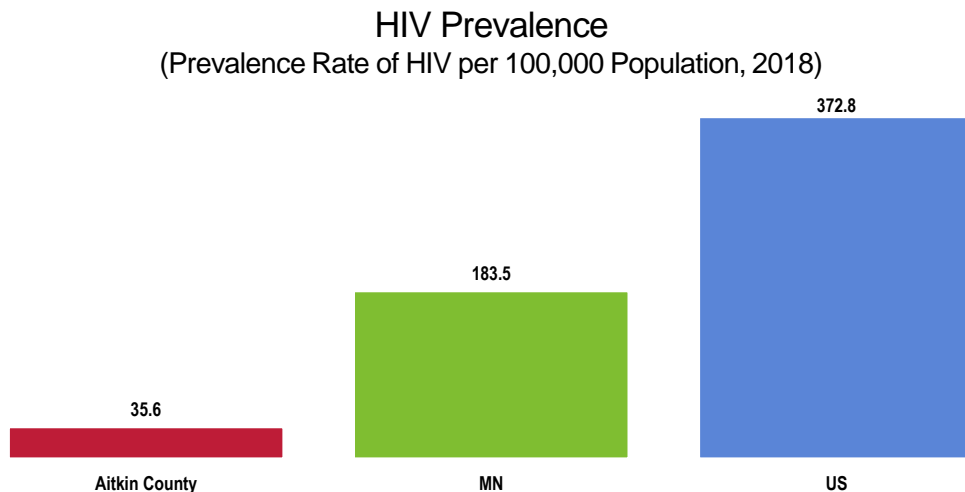
Adolescents, young adults, and men who have sex with men are at higher risk of getting STIs. And people who have an STI may be at higher risk of getting HIV. Promoting behaviors like condom use can help prevent STIs.

Strategies to increase screening and testing for STIs can assess people's risk of getting an STI and help people with STIs get treatment, improving their health and making it less likely that STIs will spread to others. Getting treated for an STI other than HIV can help prevent complications from the STI but doesn't prevent HIV from spreading.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## HIV

The following chart outlines the prevalence of HIV in our community, expressed as a rate per 100,000 population.



Sources:

- Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).

Notes:

- This indicator is relevant because HIV is a life-threatening communicable disease that disproportionately affects minority populations and may also indicate the prevalence of unsafe sex practices.

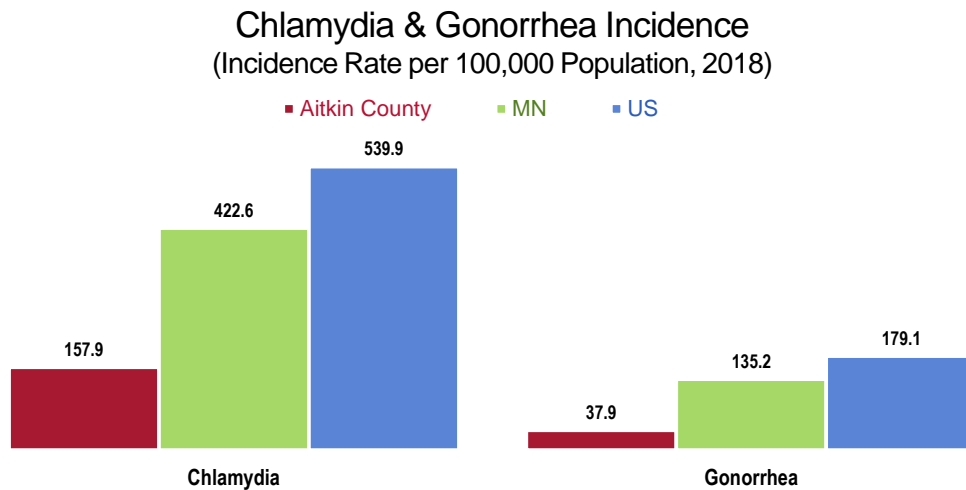




## Sexually Transmitted Infections (STIs)

### Chlamydia & Gonorrhea

Chlamydia and gonorrhea are reportable health conditions that might indicate unsafe sexual practices in the community. Incidence rates for these sexually transmitted diseases are shown in the following chart.



Sources: 

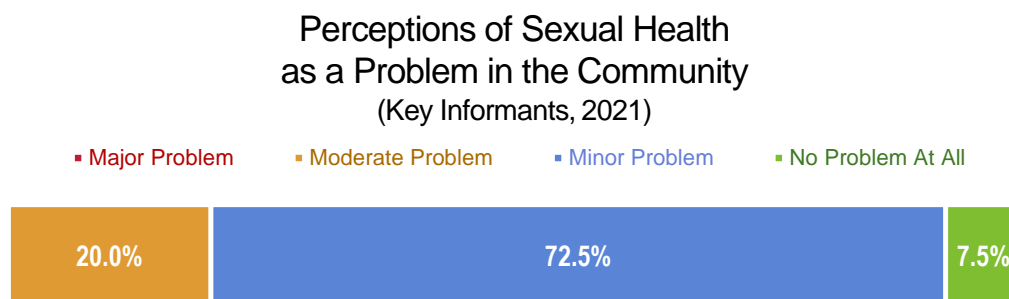
- Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

Notes: 

- This indicator is relevant because it is a measure of poor health status and indicates the prevalence of unsafe sex practices.

## Key Informant Input: Sexual Health

Key informants' ratings of *Sexual Health* as a community health concern are shown in the following chart.



Sources: 

- PRC Online Key Informant Survey, PRC, Inc.

Notes: 

- Asked of all respondents.





# ACCESS TO HEALTH CARE

# BARRIERS TO HEALTH CARE ACCESS

## ABOUT HEALTH CARE ACCESS

Many people in the United States don't get the health care services they need. ...About 1 in 10 people in the United States don't have health insurance. People without insurance are less likely to have a primary care provider, and they may not be able to afford the health care services and medications they need. Strategies to increase insurance coverage rates are critical for making sure more people get important health care services, like preventive care and treatment for chronic illnesses.

Sometimes people don't get recommended health care services, like cancer screenings, because they don't have a primary care provider. Other times, it's because they live too far away from health care providers who offer them. Interventions to increase access to health care professionals and improve communication — in person or remotely — can help more people get the care they need.

– Healthy People 2030 (<https://health.gov/healthypeople>)

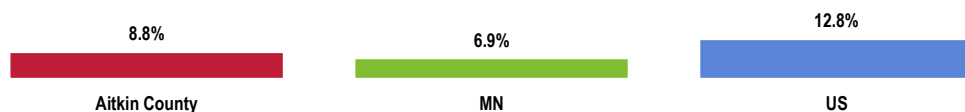
## Lack of Health Insurance Coverage

Health insurance coverage is a critical component of healthcare access and a key driver of health status. The following chart shows the latest figures for the prevalence of uninsured adults (age 18 to 64 years) in Aitkin County.

Here, lack of health insurance coverage reflects respondents age 18 to 64 (thus, excluding the Medicare population) who have no type of insurance coverage for health care services — neither private insurance nor government-sponsored plans (e.g., Medicaid).

**Uninsured Population  
(Adults Age 18-64, 2019)**  
Healthy People 2030 = 7.9% or Lower

■ Aitkin County ■ MN ■ US



Sources:

- US Census Bureau, Small Area Health Insurance Estimates. & American Community Survey 5-year estimates.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](http://sparkmap.org)).
- US Department of Health and Human Services. Healthy People 2030. August 2030. <http://www.healthypeople.gov>

Notes:

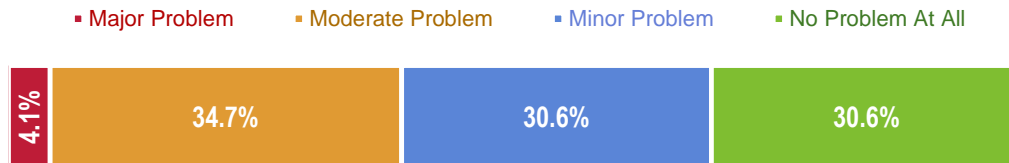
- The lack of health insurance is considered a *key driver* of health status. This indicator is relevant because lack of insurance is a primary barrier to healthcare access (including regular primary care, specialty care, and other health services) that contributes to poor health status.



# Key Informant Input: Access to Health Care Services

Key informants' ratings of *Access to Health Care Services* as a problem in Aitkin County is outlined below.

## Perceptions of Access to Healthcare Services as a Problem in the Community (Key Informants, 2021)



Sources: • PRC Online Key Informant Survey, PRC, Inc.  
Notes: • Asked of all respondents.

## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Services for Veterans

Local hospitals could be taking veterans patients for many of their needs. Most are elderly and have similar issues that Riverwood provides excellent services for. We are getting elderly veterans up at 4 a.m. to take a 130-mile van ride one way down for a checkup or treatment of common elderly health problems. These folks are driving right by Riverwood in the veteran's van on the way to the VA hospital at 4 or 5 a.m. in the morning and will end up getting back home at 6 or 7 p.m., even for a minor 30-minute appointment. – Community Leader

### Lack of Providers

Availability of providers that know the community and work within the community. Access to exercise facilities and overall creating a healthy community. – Community Leader

### Affordable Healthcare

Affordable healthcare (there is access; high-cost insurance plans make it unaffordable to seek care). – Public Health Representative

### Contributing Factors

Transportation, cost, adequate social supports. – Physician

### Transportation

Transportation. – Community Leader



# PRIMARY CARE SERVICES

## ABOUT PREVENTIVE CARE

Getting preventive care reduces the risk for diseases, disabilities, and death — yet millions of people in the United States don't get recommended preventive health care services.

Children need regular well-child and dental visits to track their development and find health problems early, when they're usually easier to treat. Services like screenings, dental check-ups, and vaccinations are key to keeping people of all ages healthy. But for a variety of reasons, many people don't get the preventive care they need. Barriers include cost, not having a primary care provider, living too far from providers, and lack of awareness about recommended preventive services.

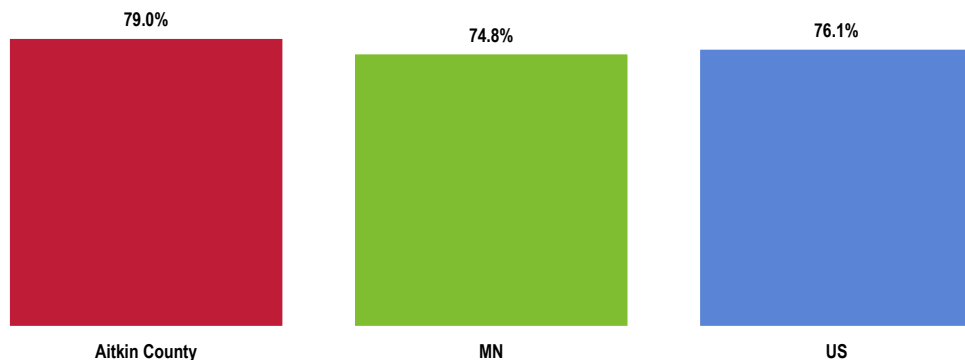
Teaching people about the importance of preventive care is key to making sure more people get recommended services. Law and policy changes can also help more people access these critical services.

— Healthy People 2030 (<https://health.gov/healthypeople>)

## Primary Care Visits

The following chart reports the percentage of Aitkin County adults who have had at least one visit to a doctor for a routine checkup in the past year.

Primary Care Visit in the Past Year  
(2018)



Sources: 

- Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).

Notes: 

- This indicator reports the number and percentage of adults age 18 and older with one or more visits to a doctor for routine checkup within the past one year.

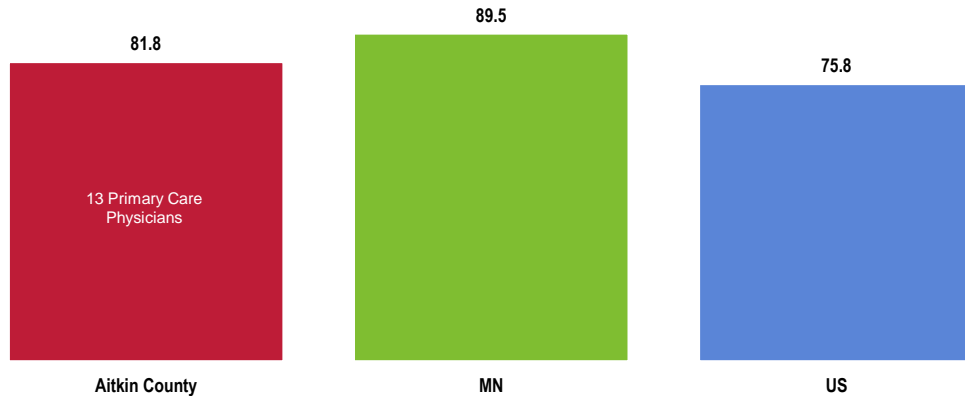


## Access to Primary Care

Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded.

The following indicator outlines the number of primary care physicians per 100,000 population in Aitkin County. Having adequate primary care practitioners contributes to access to preventive care.

**Access to Primary Care**  
(Number of Primary Care Physicians per 100,000 Population, 2017)



Sources: 

- US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap (sparkmap.org).

Notes: 

- Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs, and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.



# ORAL HEALTH

## ABOUT ORAL HEALTH

Tooth decay is the most common chronic disease in children and adults in the United States. ...Regular preventive dental care can catch problems early, when they're usually easier to treat. But many people don't get the care they need, often because they can't afford it. Untreated oral health problems can cause pain and disability and are linked to other diseases.

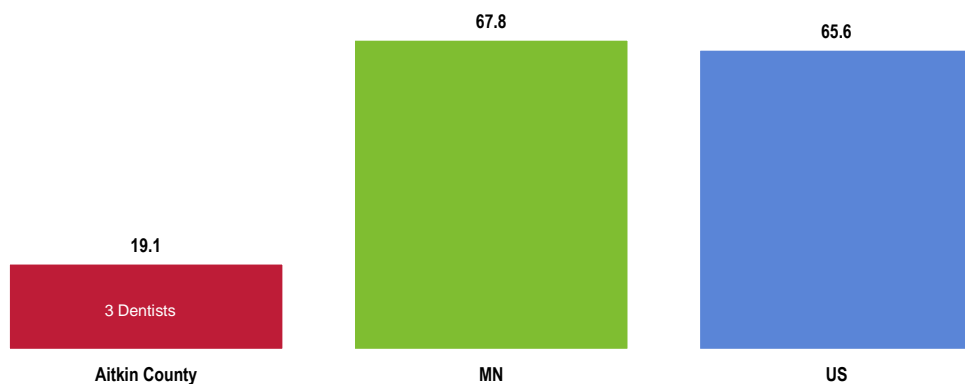
Strategies to help people access dental services can help prevent problems like tooth decay, gum disease, and tooth loss. Individual-level interventions like topical fluorides and community-level interventions like community water fluoridation can also help improve oral health. In addition, teaching people how to take care of their teeth and gums can help prevent oral health problems.

– Healthy People 2030 (<https://health.gov/healthypeople>)

## Access to Dentists

The following chart outlines the number of dentists for every 100,000 residents in Aitkin County.

**Access to Dentists**  
(Number of Primary Care Physicians per 100,000 Population, 2015)



Sources: 

- US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved October 2021 via SparkMap ([sparkmap.org](https://sparkmap.org)).

Notes: 

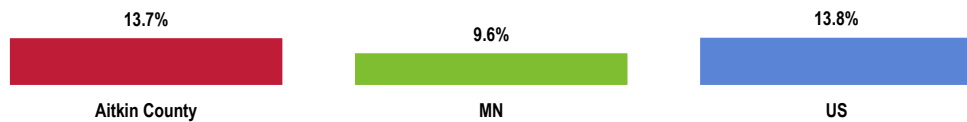
- This indicator reports the number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license.



## Poor Dental Health

The following chart shows the percentage of Aitkin County adults age 18 and older who have had six or more of their permanent teeth removed due to tooth decay, gum disease, or infection. This indicator can signify a lack of access to dental care and/or other barriers to the use of dental services.

**Teeth Loss Among Seniors**  
(Loss of All Permanent Teeth Among Adults Age 65+, 2018)



Sources: 

- Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES.
- Center for Applied Research and Engagement Systems (CARES), University of Missouri Extension. Retrieved via SparkMap (sparkmap.org).

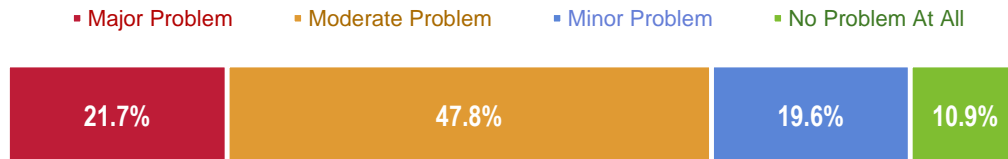
Notes: 

- This indicator reports the percentage of adults age 65 and older who self-report that all of their permanent teeth have been removed due to tooth decay, gum disease, or infection. This indicator is relevant because it indicates lack of access to dental care and/or social barriers to utilization of dental services.

## Key Informant Input: Oral Health

Key informants' perceptions of *Oral Health* are outlined below.

**Perceptions of Oral Health**  
as a Problem in the Community  
(Key Informants, 2021)



Sources: 

- PRC Online Key Informant Survey, PRC, Inc.

Notes: 

- Asked of all respondents.





## Top Concerns

Among those rating this issue as a “major problem,” reasons related to the following:

### Access for Medicaid Patients

Many patients with Medicaid with severe unattended dental carries. There are no dental offices in Aitkin that accept Medicaid. The offices that do accept Medicaid are backlogged with patients and are far away. – Other Health Provider

No one takes state-funded insurance in the county. – Community Leader

Dentists decide what insurances they will accept. Most do not accept Medical Assistance and if they do they are usually full on the quota that they take. Some even limit what private insurance that they accept so then people are considered out of network and have to pay more or travel further to find one that does accept what they have. – Social Services Provider

Lack of dental offices that will take MA insurance. – Public Health Representative

### Affordable Care/Services

Patients are unable to be seen by the dentist if they do not have cash in hand or dental insurance. – Other Health Provider

### Incidence/Prevalence

I have seen many people in the Aitkin Community either missing a number of teeth or having issues with their teeth such as receding gums. I work with numerous veterans who have these issues because they cannot afford or don't want to pay to go to a dentist to get them fixed. I feel many don't realize how important dental care is to overall health and wellness. – Social Services Provider

### Lack of Providers

Lack of dental providers. – Public Health Representative





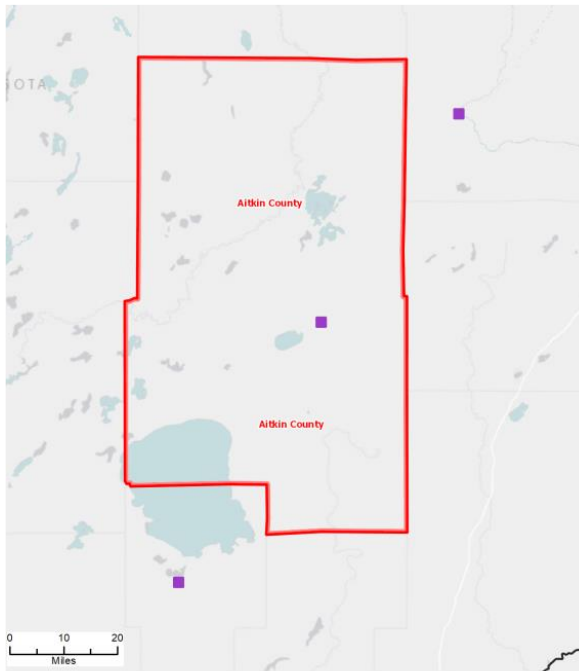
## LOCAL RESOURCES

# HEALTH CARE RESOURCES & FACILITIES

## Federally Qualified Health Centers (FQHCs)

The following map details Federally Qualified Health Centers (FQHCs) within Aitkin County.

FQHCs are community assets that provide health care to vulnerable populations; they receive federal funding to promote access to ambulatory care in areas designated as medically underserved.



Federally Qualified Health Centers, POS  
September 2020

Report Location, County

SparkMap



# Resources Available to Address the Significant Health Needs

The following represent potential measures and resources (such as programs, organizations, and facilities in the community) identified by key informants as available to address the significant health needs identified in this report. This list only reflects input from participants in the Online Key Informant Survey and should not be considered to be exhaustive nor an all-inclusive list of available resources.

## Access to Health Care Services

- Hill City School

## Cancer

- Aitkin County CARE (Coordinating Area Resources Effectively)
- American Cancer Society
- Angels
- Arrowhead Transit
- Cuyuna Regional Medical Center
- Public Health
- Riverwood Healthcare Center

## Coronavirus

- Aitkin County Health and Human Services
- Aitkin County Public Health
- CDC
- Minnesota Department of Health
- Pharmacies
- Public Health
- Riverwood Healthcare
- School System

## Dementia/Alzheimer's Disease

- Aicota
- Aitkin County CARE
- Aitkin Health Services
- Annual Checkup
- Assisted Living and Nursing Homes
- Golden Horizons
- Riverwood Healthcare

## Diabetes

- Aitkin County Public Health
- Fitness Centers/Gyms
- Public Health
- Riverwood Healthcare
- School System
- SHIP Program

## Disabilities

- Aitkin County CARE
- Aitkin County Public Health
- Riverwood Healthcare

## Infant Health and Family Planning

- Public Health
- Riverwood Healthcare

## Heart Disease

- Aitkin County Public Health
- Riverwood Healthcare

## Injury and Violence

- Riverwood Healthcare

## Kidney Disease

- Riverwood Healthcare

## Mental Health

- Abuse Center
- Adult Social Services
- Aitkin County CARE
- Aitkin County Health and Human Services
- Aitkin County Public Health
- Aitkin County Public Schools
- Church
- Clearview Counseling
- County Based Services
- Cuyuna Regional Medical Center
- Doctor's Offices
- Hospitals
- McGregor School
- New Beginnings Counseling
- Northern Pines Counseling
- Northland Counseling
- Nystroms
- Public Health
- Regional Based Assessment Capacity for Those in Crisis



Riverwood Aitkin Specialty Clinic  
Riverwood Healthcare  
Riverwood Healthcare Behavioral Health  
Riverwood Mental Health  
School System  
Social Services

### **Nutrition, Physical Activity, and Weight**

210 Fitness  
Aitkin Community Parks and Recreation Sub-Committee  
Aitkin County CARE  
Aitkin County Public Health  
Aitkin County Statewide Health Improvement Partnership  
Community Education Programs  
Extension Services  
Farmer's Market  
Fitness Centers/Gyms  
Gramma Pantry  
Hallet Center  
Karmody Yoga  
Parks and Recreation  
Paulbecks  
Public Health  
Riverwood Healthcare  
School System  
SHIP Program  
SNAP Fitness  
Tank Trails  
Ukras Big Dollar

### **Oral Health**

Children's Dental Services  
Head Start  
McGregor Dental  
Northland Smiles  
River Oaks Dental  
Riverwood Healthcare Center  
Smile Center  
Veterans Services

### **Respiratory Diseases**

Riverwood

### **Substance Abuse**

AA/NA  
Aitkin County  
Aitkin County Health and Human Services  
Aitkin County SAMHSA Grant  
Church  
Counseling and Local Support Groups  
Courts  
Detox Centers  
Grace Unit  
Hospitals  
New Freedom  
Northern Pines Counseling  
Northland Counseling  
Nystroms  
Public Health  
Riverwood Healthcare  
Riverwood Healthcare Behavioral Health  
School System  
Social Services  
Teen Challenge

### **Tobacco Use**

Aitkin County Public Health  
American Lung Association  
DARE  
Law Enforcement  
Public Health  
Riverwood Healthcare Center  
School System







# APPENDIX

# EVALUATION OF PAST ACTIVITIES

## Community Benefit

Over the past three years, Riverwood Healthcare Center has invested in improving the health of our community's most vulnerable populations. Our commitment to this goal is reflected in:

- Over \$815 million in community benefit, excluding uncompensated Medicare.
- More than \$575 million in charity care and other financial assistance programs.

Our work also reflects a focus on community health improvement, as described below.

## Addressing Significant Health Needs

Riverwood Healthcare conducted its last CHNA in 2019 and reviewed the health priorities identified through that assessment. Taking into account the top-identified needs — as well as hospital resources and overall alignment with the hospital's mission, goals and strategic priorities — it was determined at that time that Riverwood Healthcare Center would focus on developing and/or supporting strategies and initiatives to improve:

- Mental Health
- Substance Abuse
- Access to Healthcare Services
- Nutrition, Physical Activity & Weight
- Diabetes

Strategies for addressing these needs were outlined in Riverwood Healthcare Center's Implementation Strategy. Pursuant to IRS requirements, the following sections provide an evaluation of the impact of the actions taken by Riverwood Healthcare Center to address these significant health needs in our community.



## Evaluation of Impact

Priority Area: Mental Health	
Community Health Need	This strategy will focus on residents of Aitkin County and Garrison/Mille Lacs Lake area.
Goal(s)	<ul style="list-style-type: none"> <li>• Maintain existing mental health and behavioral health services while exploring the feasibility of expanding services.</li> </ul>

### Strategy 1: Maintain Health Care Home certification in Riverwood's three primary care clinics.

Strategy Was Implemented?	Yes
Target Population(s)	Residents of Aitkin County, Garrison, and Mille Lacs Lake areas
Partnering Organization(s)	<ul style="list-style-type: none"> <li>• City &amp; County Law Enforcement</li> <li>• Aitkin County Health &amp; Human Services</li> <li>• Regional Mental Health agencies</li> </ul>
Results/Impact	<ul style="list-style-type: none"> <li>• Riverwood has maintained its Health Care Home certification through the Minnesota Department of Health (MDH) and continues to utilize an integrated team-based approach to care.</li> <li>• Registered Nurse (RN) Care Managers support care coordination needs and connecting patients with appropriate community resources.</li> <li>• In 2020, Riverwood expanded its behavioral health services by adding two Licensed Independent Social Workers (LICSW). In addition, Riverwood opened a freestanding behavioral health clinic in Aitkin to enhance our care delivery model and prepare for ongoing growth.</li> </ul>

### Strategy #2: Offer evidence-based Living Well with Chronic Conditions (LWCC) program to residents.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County, Garrison and Mille Lacs Lake areas
Partnering Organization(s)	Internal: Clinical Assistants (LPN, CMA's) External: Arrowhead Agency on Aging
Results/Impact	<ul style="list-style-type: none"> <li>• Riverwood sent a Licensed Practical Nurse (LPN) and a Certified Medical Assistant to be trained by an evidence-based program called Living Well with Chronic Conditions.</li> <li>• Both Riverwood team members, LPN and CMA, conducted classes at Riverwood prior to the COVID pandemic:               <ol style="list-style-type: none"> <li>1) "Living Well with Chronic Conditions" Sept. 12, 19 &amp; 26, Oct. 3, 10 &amp; 17, 2019</li> <li>2) "Living Well with Chronic Pain", Jan. 9, 16 &amp; 23, Feb. 6, 13 &amp; 20, 2020</li> </ol> </li> </ul>





### Strategy #3: Expand role of Mental Health RN through Behavioral Health Integration.

Strategy Was Implemented?	Yes
Target Population(s) all community members.	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Riverwood team members External:
Results/Impact	<ul style="list-style-type: none"> <li>Riverwood has a registered nurse (RN) who works collaboratively with patients on Behavioral Health Integration (BHI) needs.</li> <li>The RN care manager will support education, coordination of care, and proper alignment with community resources.</li> </ul>

### Strategy #4: Utilize Minnesota Community Measures (MNCM) as a trusted data source to access change in depression screening and remission.

Strategy Was Implemented?	Align clinic workflow with MNCM requirements
Target Population(s) patients	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Riverwood team members External: Communication to MNCM contacts
Results/Impact	<ul style="list-style-type: none"> <li>Mental health awareness continues to be a high priority for Riverwood and the communities we serve.</li> <li>Riverwood utilizes screening tools, such as the Patient Health Questionnaire-9 (PHQ-9) to screen for depression.</li> <li>Depression screening is a measure monitored by MNCM. Since 2019, PHQ-9 utilization for adolescents increased from 66.4% to 82.3% in 2021.</li> </ul>

### Strategy #5: Explore opportunity to form a community-wide task force to increase mental health awareness.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Behavioral Health RN External: Public health, family members, anyone who may provide services for mental health and community members
Results/Impact	<ul style="list-style-type: none"> <li>Riverwood's Behavioral Health team participates in the community CAPS (Committee for the Awareness and Prevention of Suicide) and LAC (Local Advisory Council) programs to improve local mental health services, awareness, improve statewide policy, and collaboration within our communities.</li> </ul>



## Priority Area: Substance Abuse

Community Health Need	This strategy will focus on residents of the Aitkin County and the Garrison/Mille Lacs Lake areas.
Goal(s)	<ul style="list-style-type: none"> <li>To help inform and educate community members about substance abuse prevention and treatment</li> </ul>

### Strategy #1: Maintain a multidisciplinary controlled substance care team that provides oversight to all clinic locations.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Multidisciplinary teams from Riverwood External: Aitkin County Public Health, City and Aitkin County Law Enforcement, Minnesota Department of Health, Area Schools
Results/Impact	<ul style="list-style-type: none"> <li>Riverwood has maintained the controlled substance care team with providers oversight at all clinic locations.</li> <li>The multidisciplinary team consists of physicians, registered nurses, and advanced practiced practitioners. The integrated team will review best practice treatment standards and implement strategies, such as Medication-Assisted Treatment (MAT), to reduce and help control opioid addiction.</li> </ul>

### Strategy #2: Collaborate with local and regional health systems on best practices to reduce opioid abuse, prevention, and ongoing education.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Multidisciplinary teams from Riverwood External: Aitkin County Public Health, City and Aitkin County Law Enforcement, Minnesota Department of Health, Area Schools
Results/Impact	<ul style="list-style-type: none"> <li>Since 2019, Riverwood has been an active participant in the Extension for Community Healthcare Outcomes (ECHO) program hosted by CHI St. Gabriel's Health. Weekly virtual teleconferences include presentations on a variety of opioid and controlled substance topics such as community collaboration and prescribing practices.</li> <li>Riverwood hosts a recurring Community Task Force meeting to further engage the ability to reduce the risks of opioid use, prevention, and ongoing education within the communities we serve. The Community Task Force consists of members of Riverwood's medical staff, pharmacy, emergency department, nursing, and key community stakeholders including, but not limited to, law enforcement, school superintendents, local mental health professional, and Aitkin Public Health.</li> </ul>



### Strategy #3: Utilize data analytics to monitor progress with opioid use reduction.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Multidisciplinary teams from Riverwood External: Aitkin County Public Health, City and Aitkin County Law Enforcement, Minnesota Department of Health, Area Schools.
Results/Impact	<ul style="list-style-type: none"> <li>Riverwood has been monitoring Milligram Morphine Equivalents (MMEs) as one of the key indicators to assess progress with opioid use. Since 2019, opioid prescriptions have decreased over 40% through safe and effective treatment modalities.</li> </ul>

### Strategy #4: Maintain the role of the Opioid RN Care Coordinator to facilitate care.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille lacs Lake areas
Partnering Organization(s)	Internal: Riverwood External: Aitkin County Opioid Taskforce
Results/Impact	<ul style="list-style-type: none"> <li>Riverwood has maintained its Registered Nurse (RN) Coordinator position to help patients with treatment for substance abuse related to opiates or narcotics.</li> <li>The RN works collaboratively with the patient and medical staff to develop an individualized care plan, while also provides coordination of care for patients enrolled in Medication Assisted Therapy (MAT).</li> </ul>

### Strategy #5: Offer on-site tobacco cessation support and partner with community stakeholders to provider education on growing trends with electronic nicotine delivery systems (i.e. e-cigs, vaporizers).

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and the Garrison and Mille Lacs Lake areas
Partnering Organization(s)	Internal: Riverwood External: Aitkin County Public Health and Aitkin, Hill City & McGregor schools
Results/Impact	<ul style="list-style-type: none"> <li>Riverwood partners with community organizations to enhance awareness around tobacco use and growing trend with electronic nicotine delivery systems.</li> <li>Internally, Riverwood aligns education to clinical staff and providers to support patient care and lifestyle changes. In 2019, two registered nurses became certified tobacco treatment specialists and tools, such as carbon monoxide monitors, can be used to support cessation efforts.</li> </ul>



## Priority Area: Access to Healthcare Services

Community Health Need	Access to healthcare for the communities of Aitkin County and Garrison and Mille Lacs Lake areas
Goal(s)	<ul style="list-style-type: none"> <li>To support enhanced access to primary care services</li> </ul>

### Strategy #1: Grow primary care through the recruitment of physicians and advanced practice practitioners.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: External:
Results/Impact	<ul style="list-style-type: none"> <li>In 2020, Riverwood welcomed Dr. Blankers, MD, a family practice physician, as well as Amy Thesing, FNP-BC, and Tammy Berg, PA-C, to our Same Day Clinic in Aitkin.</li> <li>Riverwood employs a full-time physician recruiter and maintains a proactive strategy to retain and recruit providers.</li> </ul>



## Strategy #2: Develop and implement a strategy to increase access within primary care and specialty care.

**Strategy Was Implemented?** Yes

**Target Population(s)** Aitkin County and Garrison/Mille Lacs Lake areas

**Partnering Organization(s)** Internal:  
External:

### Results/Impact

- In 2020, Riverwood transitioned its Urgent Care clinic to a Same Day Clinic model. Same Day Clinic is staffed with two advance practice practitioners, which includes both walk-in and same day appointment availability. This model increases ease of access and ensures timely care is achieved.
- In 2020, Riverwood opened a freestanding behavioral health clinic in Aitkin to enhance our care delivery model and prepare for ongoing growth. Riverwood expanded its behavioral health services by adding two Licensed Independent Social Workers (LICSW) to support therapy needs. Liz Thompson, PMHNP, FNP-BC, a psychiatric nurse practitioner also joined Riverwood in 2020.
- The Riverwood Aitkin Pharmacy, located at Paulbeck's County Market, also opened in 2020 offering full retail services and a drive-up window for ease of access. Additional services offered through the Riverwood Aitkin Pharmacy include free mail-out services for prescription medications, free delivery of prescription medications in the Aitkin area, medication packaging, and medication therapy management.
- In 2021, Riverwood expanded its comprehensive specialty care by adding Urology and Neck, Back & Spine Care service lines.
- Riverwood achieved additional growth by adding new providers to the existing service lines: Behavioral Health, Orthopaedics, General Surgery, OB/GYN, Oncology, Primary Care, Same Day Clinic, and Nutrition Services.
- Riverwood maintains strong relationships with external partners to enhance access to specialty care. Riverwood formed a partnership with CentraCare to open a dialysis clinic located at our hospital in Aitkin. This has significantly reduced barriers to care for our patients. In 2022, ownership of this kidney dialysis center transitioned from CentraCare Health to Fresenius Medical Care.
- To further enhance access, Virtual Video Visits are now offered throughout all clinic locations.

## Priority Area: Nutrition, Physical Activity & Weight

### Community Health Need

This strategy will focus on residents of the Aitkin County and the Garrison/Mille Lacs Lake areas.

### Goal(s)

- To improve the health of community residents by encouraging health eating, physical activity, and weight management



### Strategy #1: Expand care management services to support patients on their health and wellness goals.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake Area
Partnering Organization(s)	Internal: Multidisciplinary teams from Riverwood External: Community Education programs through Aitkin and McGregor Schools
Results/Impact	<ul style="list-style-type: none"> <li>• Riverwood's care management team is trained in motivational interviewing and clinical health coaching.</li> <li>• Our team develops individualized care plans that align with patient needs and interests to improve their health and well-being.</li> <li>• Registered Dietitians provide support with weight management and specialized nutrition management through Intensive Behavioral Therapy (IBT) and Medical Nutrition Therapy (MNT) services.</li> </ul>

### Strategy #2: Explore partnerships with community stakeholders around the feasibility of a community wellness center in Aitkin, MN.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Multidisciplinary teams from Riverwood External: Community education programs through Aitkin and McGregor Schools
Results/Impact	<ul style="list-style-type: none"> <li>• Due to COVID, this was a challenge to address and make substantial change.</li> <li>• Riverwood will continue to seek opportunities to enhance community resources and build strategic partnerships with community stakeholders.</li> </ul>

### Strategy #3: Continue to promote wellness through community engagement.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Multidisciplinary teams from Riverwood External: Community Education programs through Aitkin and McGregor Schools
Results/Impact	<ul style="list-style-type: none"> <li>• Riverwood participated in these wellness-related events: Aitkin Commerce Show (March 2019), Hill City Health Fair (March 2019), Aitkin County Fair (July 2019 &amp; July 2021), Relay for Life (cancer event/July 2019), McGregor 5K walk (2019), McGregor Wellness Fair (Sept 25, 2019).</li> <li>• Riverwood sponsored these community health seminars over the past 3 years: Knee &amp; Shoulder Pain Solutions (Feb 20, 2019), Elbow Pain Solutions (April 8, 2019), Hip &amp; Knee Pain Solutions (Oct 16, 2019), Hernia Repair (Nov 6, 2019); and these virtual webinars: Hernia Repair (June 16, 2020 &amp; Nov 30, 2020), Exercises for Running (July 1, 2020), and Solutions for Reflux &amp; Heartburn (Nov 16, 2021).</li> <li>• During 2020-21, the Covid pandemic interfered with Riverwood's ability to offer in-person seminars and annual community wellness events were cancelled.</li> <li>• Riverwood improved its website in 2020 with the addition a health and wellness library of video resources.</li> </ul>



**Priority Area: To help prevent diabetes and support patients with diabetes to better manage their health and well-being.**

<b>Community Health Need</b>	Access to healthcare for the communities of Aitkin County and Garrison/Mille Lacs areas
<b>Goal(s)</b>	<ul style="list-style-type: none"> <li>To support enhanced access to primary care services</li> </ul>

**Strategy #1: Maintain recognition from the American Diabetes Association (ADA).**

<b>Strategy Was Implemented?</b>	Yes
<b>Target Population(s)</b>	Aitkin County and Garrison/Mille lacs Lake areas
<b>Partnering Organization(s)</b>	Internal: Multidisciplinary teams from Riverwood External: Aitkin County Public Health and local school districts
<b>Results/Impact</b>	<ul style="list-style-type: none"> <li>Riverwood has maintained ADA (American Diabetes Association) status to support evidence-based interventions and education for our patients.</li> <li>Riverwood has continued its diabetes self-management program, which is available at Aitkin, Garrison, and McGregor clinics.</li> </ul>

**Strategy #2: Optimize electronic health record and population health strategies.**

<b>Strategy Was Implemented?</b>	Yes
<b>Target Population(s)</b>	Aitkin County and the Garrison and Mille lacs Lake Area
<b>Partnering Organization(s)</b>	Internal: Multidisciplinary teams from Riverwood External: Aitkin County Public Health and local school districts
<b>Results/Impact</b>	<ul style="list-style-type: none"> <li>Riverwood utilizes a team-based approach to care, which includes appropriate community resources that support prevention, health, and well-being of the patients we serve.</li> <li>Riverwood's electronic medical record system (EPIC) supports a proactive approach to care. With patient registries, Riverwood can monitor patients who may be overdue for preventive care and/or follow-up care for their chronic conditions. Care teams will outreach these patients to keep them informed and provide awareness around health maintenance topics.</li> <li>EPIC also enhances communication between hospitals and medical groups by utilizing the "Care Everywhere" feature which imports external health records.</li> <li>Riverwood will optimize additional features such as "Healthy Planet" and tools embedded in the system to screen and track social determinants of health.</li> </ul>



### Strategy #3: Utilize Minnesota Community Measures (MNCM) as a trusted data source to assess change in Optimal Diabetes Control.

Strategy Was Implemented?	Yes
Target Population(s)	Aitkin County and Garrison/Mille Lacs Lake areas
Partnering Organization(s)	Internal: Multidisciplinary teams from Riverwood External: Aitkin County Public Health and local school districts
Results/Impact	<ul style="list-style-type: none"> <li>• Riverwood is an active participant in Minnesota Community Measures (MNCM), which provides data on the quality and total cost of care for health systems and medical groups.</li> <li>• Riverwood's commitment to improving the health and well-being of the patients is reflective in this publicly reported data. Riverwood's optimal diabetes care score improved from 40.1% (2019) to 47.1% (2021). Riverwood's optimal diabetes care score is now +4% higher than the statewide average of 43%.</li> </ul>

