

Winona County | Winona Health

2022 Community Health Needs Assessment

Winona County, Minnesota



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2022 Community Health Needs Assessment

“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

— World Health Organization Constitution

Executive Summary

In 2022, Winona Health and Winona County Health & Human Services partnered to conduct a Community Health Needs Assessment (CHNA) to understand the barriers to health faced by Winona County residents. Community stakeholders and leaders, healthcare leaders, community members, and community members who speak languages other than English all actively engaged in the CHNA process from survey completion to listening sessions.

The 2022 CHNA is in alignment with the federal IRS community benefit reporting requirements, and priorities identified have come from the perspective of the community. This assessment is available on the Winona Health website at www.winonahealth.org/chna or the Winona County website at www.co.winona.mn.us. Paper copies are also available at Winona Health and Winona County’s Parkview Office Building location by request.

Priority Areas

Priority 1: Mental Health and Well-being - Support the mental health and well-being of Winona County residents. Includes specific treatment and services available for individuals with a diagnosed mental illness as well as efforts to support all individuals with achieving and maintaining mental well-being and resilience.

Priority 2: Health Equity - Strive for equity to foster a healthy and thriving community for all.

Priority 3: Healthy Behaviors - Support behaviors that promote health and result in the reduction of chronic disease.

Additional Consideration: Social Connectedness - Encourage social connectedness across the community.

About Winona Health

Winona Health is a nonprofit, technologically advanced, integrated healthcare system that delivers personalized, high-quality care to residents and visitors of southeastern Minnesota and Trempealeau and Buffalo counties in Wisconsin. In conducting a Community Health Needs Assessment, Winona Health focused on communities in Winona County, given the significant proportion of services provided to residents in the county (as a proportion of all Winona Health patients).

Winona Health is a testament to the community’s long commitment to keeping healthcare local. Founded in 1894, Winona Health continues to be one the city’s largest employers. Nearly 1,100 caregivers, including approximately 90 physicians and associate providers, care for people throughout their 49-bed hospital, primary and specialty care clinics, emergency department, urgent care clinic, and assisted living and long-term care residences. Care at Winona Health is tailored to meet each person’s unique needs through all stages of life.

Primary care at Winona Health includes pediatrics, family medicine, internal medicine, and health and wellness services through clinics in Winona and Rushford, Minnesota. The healthcare system also offers a broad range of specialty care including general surgery; mental health services; ophthalmology; orthopedic and sports medicine; plastic, cosmetic and reconstructive surgery; podiatry; rehabilitation therapy; women’s health; dermatology; and an accredited cancer care program. Winona Health’s Senior Services include Senior Living at Watkins (assisted living apartments); Lake Winona Manor (adjacent to the hospital and clinic for long-term and transitional care); Roger Metz and Adith Miller Manor (assisted living memory care residences); and hospice services. Refer to Appendix A for a complete list of service areas.

Winona Health is focused on continuous improvement and innovation. A robust performance improvement system and lean principles allow caregivers to examine processes, eliminate waste, and add elements of care that provide value to patients. This furthers Winona Health's vision to create the most inclusive, compassionate and self-generating community health movement in the nation.

Our Mission

To inspire, recognize, and empower the **caregiver** in all of us.

Our Vision

To create the most inclusive, **compassionate**, and self-generating community health movement in the nation.

Our Values

We will achieve our Mission and Vision through three interlocking **commitments**:

Everything Matters

The pursuit of excellence is our greatest teacher. Our many voices and ideas generate innovation and drive improvement in every touchpoint of every day to create more trusted and meaningful experiences.

Everyone Matters

We honor the unique and profound experiences that shape each of us on our path through life and serve all with empathy, dignity, and expertise.

Every Moment Matters

Sometimes, there are no second chances. We are driven to be more fully present in every moment, big or small, across entire lifetimes and generations.

About Winona County Health & Human Services

Winona County Health & Human Services is the umbrella agency for Community Health and Human Services programming. Winona County Health & Human Services works collaboratively with partners through the communities of Winona County. On behalf of the Winona County Board of Commissioners, this department administers various services in the areas of community health and social services. These services are administered pursuant to state law and rule under the supervision of the State of Minnesota.

Our Mission

Fosters healthy and stable communities

Our Vision

Enhances the health, well-being, and self-sufficiency of all members of our communities

Our Values

Excellence: We achieve excellence in all respects of service delivery

Integrity: We are dedicated to honesty, responsibility, and accountability

Compassion: We serve our communities and each other with compassion, dignity, and respect

Winona County Health & Human Services

Maternal-Child Health Nursing Services

Providing quality health care and educational services to Winona County.

Child & Teen Checkups (C&TC) Outreach

Child and Teen Checkups (C&TC) are complete health screenings for children ages 0 to 21 years who are on Medical Assistance. C&TC screenings include:

- Height and weight
- Physical exam
- Hearing and vision
- Immunizations
- Development
- Health Information
- Nutrition
- Lab tests
- Dental referral

Help with scheduling C&TC appointments, transportation, or interpreters is available.

Child Passenger Safety

Maternal Child Health Nurses provide:

- Individual instruction on correct use and installation of child passenger restraints (by appointment)
- Car seat distribution program
- Training to child and foster care providers

Follow Along Program

A program to follow infants and children from birth to age 3 to help parents know if their child is playing, growing, talking, moving, and acting like other children the same age. Maternal Child Health nurses make follow-up visits when concerns are noted and help with referrals to area providers.

Cost

Maternal Child Health services may be covered by private insurance, Medical Assistance or grant funds. Fees may also be based on the individual's ability to pay.

Winona County Human Services Programs Available:

- Adolescent Parent Counseling
- Adoption
- Adult Protective Services
- Cash Assistance
- Chemical Dependency
- Chemical Dependency Counseling
- Child Maltreatment Investigation
- Child Protective Services
- Child Support Collection
- Collection of Parental Fees
- Commitments
- Custody Studies
- Day Care Assistance
- Day Care Licensing

Immunizations

Low-cost immunizations for qualifying adults and children.

Infant and Child Development

A Maternal Child Health Nurse can come to your home to address concerns about:

- Newborns and children
- Health, growth and development
- Parenting
- Infant/children's mental health
- Community resources and referrals
- Infants/children with special health needs

Prenatal and Postpartum Care

A maternal Child Health Nurse can come to your home to teach about:

- Pregnancy, labor and delivery
- Maternal mental health and postpartum feelings
- Self-care and nutrition
- Breastfeeding support
- Pregnancy prevention
- Community Resources

Women, Infants & Children (WIC)

WIC is a program that provides nutrition education and healthy foods for:

- Women who are pregnant, breastfeeding, or have recently had a baby
- Infants - from birth to 1 year
- Children – from 1 to 5 years

Families qualify according to income guidelines and nutritional needs

- Developmentally Disabled Services
- Emergency Assistance
- Enforcement of Child Support Orders
- Establishment of Paternity
- Family & Children Services
- Financial Aid for Repairs of Homes
- Food Stamps
- Foster Care
- General Assistance
- General Assistance Medical Care
- Group Care
- Guardianship
- Information-Referral
- License Adult Foster Homes
- License Child Foster Homes
- License Family Day Care
- Locating of Absent Parents
- Medical Assistance
- Mental Health Counseling
- MFIP (Minnesota Family Investment Program)
- Minnesota Supplemental Aid
- Nursing Home Pre-admission Screening
- Parent Support Outreach Program (PSOP)
- Pre-petition Screening of Mental Health Commitments
- Residential Treatment
- Securing Support Orders
- TANF (Temporary Assistance for Needy Families)
- Transportation for Those in Need
- Volunteer Services
- Vulnerable Adult Investigation
- Vulnerable Adult Services
- Welfare Fraud Investigation

About Winona County PartnerSHIP

Winona County PartnerSHIP is a division of Winona County Health & Human Services and serves as the steward of the Statewide Health Improvement Partnership (SHIP) for Winona County. SHIP is a grant program from the Minnesota Department of Health that gives each county, county health board, and tribal government within Minnesota funding for initiatives that aim to reduce the two largest contributors to healthcare costs within the state: obesity and commercial tobacco use.

SHIP aims to reduce obesity and commercial tobacco use through policy, system, and environmental change. Per state statute, changes enacted should be evidence or theory-based with allowances for culturally-based activities if applicable. Winona County PartnerSHIP works with local governments, schools, healthcare providers, and community organizations to support initiatives that reduce barriers to healthy behaviors and create sustainable change. Initiatives and activities supported include FoodRx, Exercise is Medicine, breast/chest feeding, walkable and bikeable communities (active transportation), Safe Routes to School, and commercial tobacco policies among many others. SHIP works to ensure the healthy choice is the easy and possible choice for all Winona County residents.

A Snapshot of Winona County

Winona County encompasses more than 625 square miles, with towering bluffs and the winding Mississippi River on one side and the open farmlands of western Winona County on the other side, of southeastern Minnesota. This beautiful, rural area with a population of 49,630 is large enough to support many industries, including several of national and international distinction. Winona County is also home to three institutions of higher education. The community offers a variety of cultural events, beautiful parks, educational opportunities and community services. In addition, there are many options for recreation, entertainment and sightseeing.

A key component of the health of any community is equitable access to high-quality healthcare, physical activity, healthy food, and social and emotional well-being. Community resources like sidewalks, indoor walking spaces, and farmers markets can have a positive impact on a community's health. Winona County residents have access to three farmer's markets and numerous walking trails within each of our major cities.

For more information about Winona County, see Appendix C: Winona County Demographic Data and Appendix D: Winona County Assets 2021.

Evaluating Impact

Drivers of Health

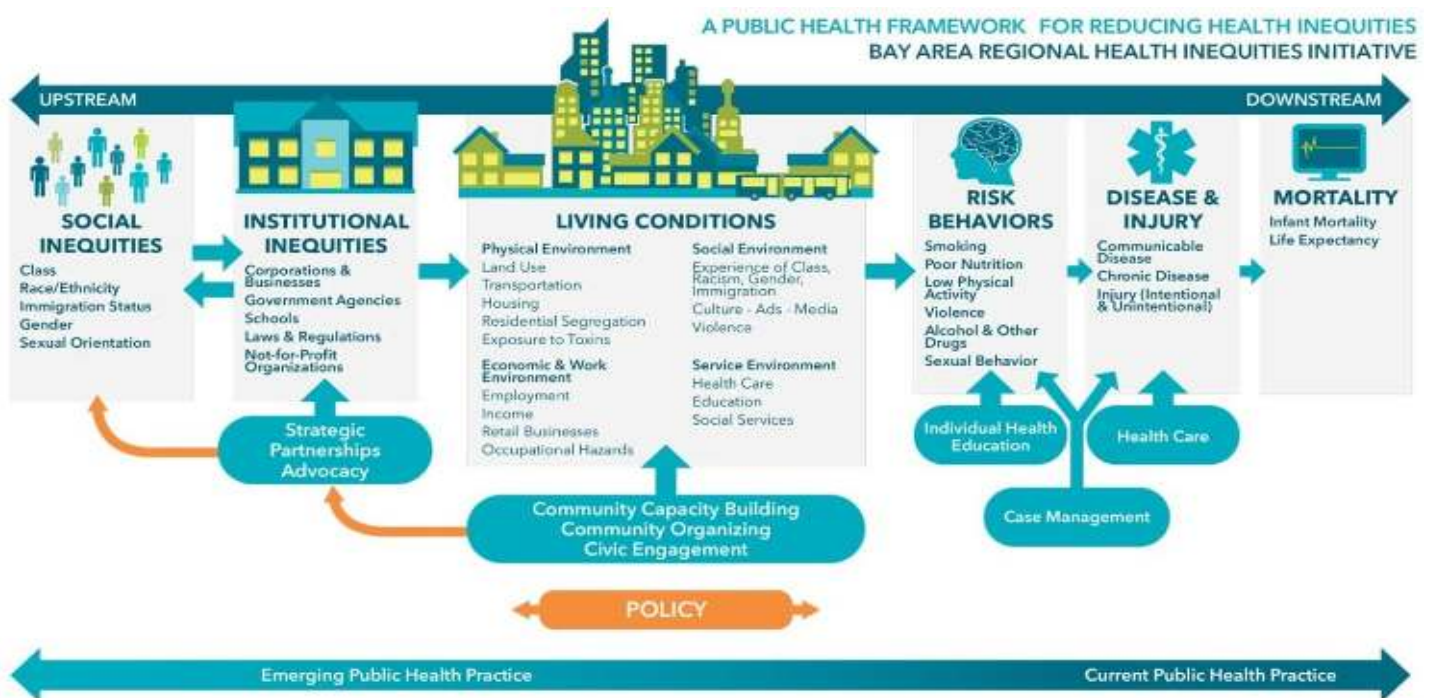
“It is not at the clinic or hospital that healing actually takes place. It is within the church, within the neighborhood, within the workplace, and within the family that we live out the consequences of our diagnoses. Each is part of the geography of healing. Each has the opportunity, indeed the responsibility, to speak the language of life. We simply must find and then fearlessly name the causes of life that bring about healing wherever they may be.”

— Larry Pray, Leading Causes of Life

As defined by the World Health Organization, social determinants of health (SDoH) are the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. Medical care is estimated to account for 10-20 percent of health outcomes, while SDoH (health-related behaviors, socioeconomic factors, and environmental factors) account for the other 80-90 percent.

More recently, the Christensen Institute has made the case for using the term drivers of health as a better way to describe social determinants of health. There are multiple competing definitions of social determinants of health, and the causal drivers of health outcomes are just that—drivers—not determinants that cannot be changed. As a result, we will refer to drivers of health throughout this document.

Figure 1 provides a visual of A Public Health Framework for Reducing Health Inequities, developed by the Bay Area Health Inequities Initiative.



Past CHNA Progress

The 2019 CHNA process identified the following priorities that were addressed in Winona Health's 2019 Implementation Plan as well as the 2019 Community Health Improvement Plan developed by Winona County.

- Priority 1:** Address and help reverse/prevent the unhealthy behaviors that contribute to obesity/overweight and subsequent chronic disease.
- Priority 2:** Strive for health equity given the current inequitable distribution of social determinants of health.
- Priority 3:** Improve mental health.

The following strategies and activities were deployed to impact the 2019 CHNA priority areas:

Gr8 Kids

Live Well Winona, Winona Area Public Schools, and Winona State University collaborated on the GR8 Kids program to increase and promote healthy behaviors in youth. GR8 Kids is an eight-week wellness program for 4th grade students led by Live Well Winona in partnership with Winona State University. Classes promote age-appropriate education in proper nutrition and active living. In the most recent iteration of the program, a sixth step of "kindness" was incorporated to begin impacting mental health (whether depression or anxiety in youth). Each class is 45 minutes and is held in the respective school's gymnasium. Past program data showed increases in exercise by students as well as increases in the number of students that ate the recommended servings of fruits and vegetables each day. Scheduling of GR8 Kids was impacted by the COVID-19 pandemic (albeit the program was reworked into an online offering in the midst of the pandemic) while in-person learning was put on hold.

The Winona Community HUB

Winona Community HUB (HUB) connects vulnerable populations with the resources needed to live their best lives. This program addresses the root causes of factors that affect well-being and the role of drivers of health. The HUB impacts drivers of health in Winona County with a comprehensive strategy using the Pathways Community HUB Institute (PCHI) model, data-measuring software, and community connector (CC) positions at care coordination agencies (CCAs) across the community with a goal of changing local policy to reduce barriers to services. To be enrolled in the HUB, participants must be a Winona County resident, and someone in the household has screened positive for food insecurity, or someone in the household has been diagnosed with or has self-reported mental health concerns, or they are experiencing homelessness. The HUB launched in June 2019 and continues to expand into the community. The HUB currently operates in partnership with four CCAs—Winona Health, Hiawatha Valley Mental Health Center, Family & Children's Center, and Winona Volunteer Services—that employ a total of five CCs serving HUB participants. Catholic Charities is currently in the process of onboarding as a CCA and plans to hire a CC in the near term.

Statewide Health Improvement Partnership

Several local agencies actively participated and collaborated in the Statewide Health Improvement Partnership (SHIP) with Winona County. SHIP provides funding and resources for workplaces, schools, healthcare organizations, and community organizations to create a healthier Winona County. The Statewide Health Improvement Partnership advocates for making the "the healthy choice the easy choice."

Winona County PartnerSHIP has used the SHIP grant to create policies, systems and environments that allow all Winona County residents to make choices to reduce obesity/overweight and chronic disease. See examples of partnerships on the next page.

- SHIP funded a portion of Winona Health's ongoing diversity, equity and inclusion work with national consultant, Team Dynamics. Funds provided allowed Winona Health to deploy the Intercultural Development Inventory and engage in ongoing coaching support to revise patient- and caregiver-facing policies with an equity and inclusion lens.
- In the City of Winona, SHIP helped to fund raised garden beds at Hiawatha Valley Mental Health Center for residents to have increased access to fresh food as well as improve well-being through time spent outdoors.
- Installed raised garden beds at the Winona Family Y for sustainable snacking and education for youth programming as well as the opportunity to help kids learn to grow their own healthy food from a young age.
- Purchased a food steamer for the Winona Middle School to provide healthier cooking options for vegetables, as well as training from a master chef for school nutrition staff to learn how to prepare healthy food in ways children are more likely to eat and enjoy.
- In the City of Lewiston, SHIP helped fund raised garden beds at Crossings Community Center as well as directional signage for their walking paths.
- Funded standing desks for educators and administration at Lewiston-Altura Public Schools to give staff more opportunities for movement during the workday.
- In the City of Rollingstone, SHIP helped fund healthy eating classes as part of the initiative to bring classes and students back to Rollingstone Community School. These classes focused on teaching families healthy habits and ways to cook healthy foods that children and adults alike will enjoy.
- SHIP hosted a motivational interviewing workshop for Winona County that included staff members in Health and Human Services and Court Administration. This two-day seminar taught participants strategies to meet clients where they are and empower clients to make long-lasting behavioral health changes.
- SHIP has also prioritized the development of an emerging Community Health Worker (CHW) workforce by funding the educational costs of a CHW certificate program. These certified CHWs provide community-based care coordination via the Winona Community HUB.

Collaboration between Winona Health and the Winona Family YMCA

In December of 2020, the Winona Family YMCA opened a new facility on the Winona Health campus, which significantly improved efficiency of operations and expanded the Y's ability to serve a larger percentage of the community. As part of this new building development, Winona Health relocated rehabilitation and sports therapy services to the second floor of the new development. Like many similarly designed partnerships seen nationally, the aligned vision and values allow both agencies to have a greater impact and meet the growing needs of the community. Programming has been developed to support healthy transitions from acute need to a life of well-being.

Workplace Well-being

As one of the area's largest employers, Winona Health recognizes that community well-being starts within their walls. Winona Health's HealthyU worksite well-being program was designed to support caregivers on their journey to well-being. HealthyU allows caregivers the opportunity to earn points by working on their health and well-being. When enough points are earned, caregivers may receive reduced health insurance premiums or a one-time payroll bonus. Program participation includes, but is not limited to:

- Access to a web-based portal and mobile app that provides education, self-elected challenges and supports.
- Access to screening services.
- Membership subsidies to the Winona Family YMCA.
- Resources to support weight management. In addition to group weight management challenges, eligible caregivers with a BMI of 25 or higher are able to participate in Intensive Therapy for Weight Management with Winona Health's registered dietitians.
- Rotating group monthly challenges that address a variety of wellness aspects such as healthy food choices, meditation, physical activity, gratitude and social connection.

Health Equity and Building Cultural Capacity

Since the last CHNA report, Winona Health has developed a clearly defined team responsible for building and implementing the necessary structures to embed Diversity, Equity and Inclusion (DEI) into all practices cross-organizationally. Winona Health partnered with Team Dynamics, a consulting group of organizational culture experts, who assisted with capacity building via training and coaching. A cohort was established that included individuals across the organization at all levels. Members completed the Intercultural Development Inventory (IDI) to assess personal intercultural competence and completed a debrief with a certified IDI administrator. Cohort members attended a series of seven trainings to help develop a shared language related to diversity, equity and inclusion, as well as build self-awareness of one's own identities and patterns within the context of cross-cultural communication. A smaller team of organizational champions, called the IDEA Team (Inclusion, Diversity, Equity and Allyship) was formed to continue to advance the culture and welcoming climate of Winona Health and to make system changes. IDEA Team members continue to receive coaching with Team Dynamics.

Additional strategies to address cultural competency within Winona Health included:

- Completing a Health Equity Organizational Assessment and developing an organizational workplan to address growth areas.
- Team Dynamics provided intensive coaching to the IDEA team through Action Learning Projects related to the revision of key patient- and employee-facing policies within a lens of diversity, equity and inclusion. Revisions were suggested and submitted for approval.
- An IDEA Team page was created on Winona Health's Intranet to serve as a hub of DEI resources.
- Policies and systems around communication barriers have been evaluated and next steps are proposed. Opportunities for improving care for patients who communicate in other ways besides spoken English were identified, and policy and system changes are underway.
- Winona Health caregivers involved in an environmental redesign initiative have collaborated with Team Dynamics coaches to consider how design choices can support an inclusive and equitable care experience.
- The Winona Health website now offers an accessibility menu, and language translation to maximize access.
- The expansion of data collection regarding social needs and stratification of key quality measures by race has informed community collaborative efforts and other health initiatives aimed at eliminating disparity.

Health Equity Strategies at Winona County

In 2019, Winona County's health equity targets were to increase immunization rates for underserved populations, increase the number of families enrolled in evidence-based family home visiting programs, and provide sustainable, stable housing for the homeless population in Winona County.

Increase immunization rates for underserved populations:

The goal for this objective was to increase immunization rates for underserved populations by 25% by 2023. Strategies to reach this goal were:

- To record all members of the Amish Community Families and complete a database in PHDoc to track vaccination rates.
- Increase the Disease Prevention and Control Public Health Nurse for a vaccination outreach program to a .5 FTE.
- Deploy vaccination advertising on a highly visible electronic billboard.
- Promote Winona County Health & Human Services offerings at the Winona County Fair.
- Provide routine outreach at the jail, homeless shelters, and mental health facilities to provide Hepatitis A vaccinations.

Of these strategies, Health and Human Services was able to deploy billboard advertising for Child and Teen Check-ups and the COVID-19 vaccines. Health and Human Services also attended the 2021 Winona County Fair to

highlight initiatives and offerings. The remainder of these strategies were unable to be completed due to staff turnover and the COVID-19 pandemic.

Increase the number of families enrolled in evidence-based family home visiting programs:

The goal for this objective was to increase the number of families enrolled in the Healthy Families America model evidence-based family home visiting program by 40%. This overall goal was completed by increasing the number of enrolled families from 10 to 17. The tactics of 1) training all home-visiting staff in this model, 2) leveraging Public Health Nursing to enroll new families and 3) exploring different evidence-based models to determine if a second model is warranted were all completed. In November 2021 Maternal Early Childhood Sustained Home-Visiting Program (MECSH) was implemented as another evidence-based home visiting program.

Provide sustainable, stable housing to the homeless population in Winona County:

The goal for this objective was to have Winona County Health & Human Services (WCHHS) coordinate with local agencies to address housing stability and determine how housing case management may be best achieved. Winona County leadership now attends the Poverty Roundtable and GAPS group meetings to facilitate this goal. Winona County staff also provided information on new DHS requirements to provide housing case management and inform partners of the options to achieve this goal.

Mental Health Strategies

The objective for improving Mental Health for Winona County residents included decreasing the stigma surrounding mental health issues and increasing access to mental health services. Winona County identified a goal of collaborating with local mental health and substance abuse prevention organizations to develop methods to increase access to mental health services and reduce the stigma surrounding mental health. The strategy to achieve this goal was to host three educational forums, but this was unable to be completed safely due to the COVID-19 pandemic.

Winona Health worked on behavioral health integration in primary care. Many organizations imbed primary care and behavioral health services to provide a seamless delivery of care. This model also connects providers and, in many cases, supports overall healthcare cost reduction. Winona Health put a standardized clinical process in place to ensure depression screening and referral resources, in addition to embedding social work resources within primary care. This strategy addressed health equity in addition to mental health.

Process and Methodology

In conducting the 2022 Winona County CHNA, a systematic process was used to get a comprehensive overview of Winona County residents, examining indicators of population health, identifying critical issues, gathering input from community members, and determining strategic priorities to improve the health of the community. The CHNA process involved collecting population data and community input. Additional indicators of community health status using existing local, state, and national secondary data sources were identified.

It was essential that information was gathered about community members whose voices and health statuses may not be represented through local, regional and national secondary data sources, specifically the Hmong, Laotian and Hispanic populations. Project FINE (Focus on Integrating Newcomers through Education) was engaged to translate surveys and administer the CHNA to the immigrant and refugee populations in the community. Project FINE is a local nonprofit organization that helps newcomers integrate into the community. They provide language interpreters and translators as well as education, information, and referral to resources to engage and empower immigrants and refugees.

Survey Instrument

The survey instrument content was adapted from the CHNA survey conducted in 2019. Modifications to the 2019 survey were developed by Winona Health and Winona County Health & Human Services with technical assistance from the

Minnesota Department of Health Center for Health Statistics. The survey was formatted by the survey vendor, Survey Systems, Inc. of Shoreview, Minnesota, as a scannable, self-administered English-language questionnaire. The survey was four pages, front and back, and consisted of 71 questions. A copy of the survey can be found in Appendix G.

Sample

A two-stage sampling strategy was used for obtaining a probability sample of adults living in Winona County. For the first stage of sampling, a random sample of Winona County residential addresses was purchased from a national sampling vendor (Marketing Systems Group of Horsham, PA). Address-based sampling was used so that all households would have an equal chance of being sampled for the survey. Marketing Systems Group obtained the list of addresses from the U.S. Postal Service. For the second stage of sampling, the “most recent birthday” method of within-household respondent selection was used to specify one adult from each selected household to complete the survey.

Survey Administration

An initial survey packet was mailed to 4,000 sample households that included a cover letter, the survey instrument, and a postage-paid return envelope. One week after the first survey packets were mailed, a reminder postcard was sent to all sampled households, reminding those who had not yet returned a survey to do so, and thanking those who had already responded. Three weeks after the reminder postcards were mailed, another full survey packet was sent to all households that had still not returned the survey. The remaining completed surveys were received over the next four weeks. Participation in the survey was completely voluntary and confidential.

Completed Surveys and Response Rate

Completed surveys were received from 1,083 adult residents of Winona County; thus, the overall response rate was 27.1% (1,083/4,000).

Data Entry and Weighting

Survey responses were scanned into an electronic file by Survey Systems, Inc. To ensure that the survey results are representative of the adult population of Winona County, the data were weighted when analyzed. The weighting accounts for the sample design by adjusting for the number of adults living in each sampled household. The weighting also includes a post-stratification adjustment so that the gender and age distribution of the survey respondents mirrors the gender and age distribution of the adult population in Winona County according to U.S. Census Bureau American Community Survey 2016-2020 estimates. After weighting data, a descriptive analysis was conducted.

Limitations

A limitation of this process is the potential for survey sampling bias. It is possible that there are differences between the individuals that self-selected to respond to the survey compared to those who did not answer the survey.

Sampling Households that Speak Languages Other than English

In addition to the above methodology, Winona Health and Winona County Health & Human Services contracted with Project FINE to have an additional 182 surveys administered to households whose primary language is not English. Project FINE served 3,300 individuals in 2021, or an estimated 600 households. Recognizing that race, ethnicity, language and immigration status may impact health outcomes, intentional oversampling of households whose primary language was not English occurred to better understand community barriers and disparities in health. The surveys were either completed privately or with assistance from representatives and/or translators from Project FINE. Data from these surveys are shared adjacently to the larger sample to understand the difference of outcomes and perspectives.

Listening Sessions

After reviewing the survey results, a series of seven listening sessions were hosted at a variety of locations to gain feedback related to the findings. All Winona County residents were invited to participate in listening sessions which were held in person and virtually. All but three sessions were open to the general public. Population-specific sessions

were held at the Winona Day Center for those experiencing housing insecurity and later sessions were held in St. Charles and Winona for populations needing translation assistance from Project FINE.

A total of 78 people attended listening sessions. In addition to community members, representatives of the following organizations participated in listening sessions:

- Engage Winona
- Family & Children's Center
- Hiawatha Valley Mental Health Center
- Live Well Winona
- Project FINE
- SEMCAC
- SEMCIL
- Winona Area Public Schools
- Winona County Alliance for Substance Abuse Prevention (ASAP)
- Winona County Board
- Winona County Health & Human Services
- Winona Family YMCA
- Winona Health
- Winona Volunteer Services

Listening session feedback and priority areas expressed by community stakeholders are summarized in general terms in comparison to County Health Rankings & Roadmaps and the CHNA data in Figure 2 below.

Prioritization Process and Criteria

Winona Health and Winona County Health & Human Services worked together to analyze data from the survey, secondary data sources, and listening sessions to determine priorities for the 2022 CHNA. Survey results can be found in Appendix H. Looking back to the 2013, 2016, and 2019 CHNAs, some familiar themes and opportunities continue to present themselves. However, the 2022 CHNA also offers an opportunity to refocus our efforts and address some needs that have continued to intensify and were perhaps exacerbated by the COVID-19 pandemic.

For the purpose of discussing and comparing survey data in this report, we will refer to data collected from mailed surveys as "mailed survey responses," and we will refer to data collected from translated surveys as "translated survey responses."

Figure 2 summarizes identified community health needs as voiced in the CHNA survey responses, during community listening sessions, and as evidenced by local and state level data.

Figure 2	Summary of Identified Community Health Needs Winona County, MN	Voiced by CHNA Data	Voiced by Community Listening Sessions	County Health Rankings below MN Average*	Evidence of Disparity**
Health Outcomes	Poor or fair health	X		X	X
	Poor mental health days	X	X	X	
	COVID-19 impact	X	X		X
	Child mortality		X	X	X
	Frequent physical distress		X	X	
	Frequent mental distress	X	X	X	
	Diabetes Prevalence			Same as MN avg.	X
	High blood pressure		X	No Data	
	Health equity	X	X	No Data	X
Health Behaviors	Adult smoking		X	X	X
	Adult obesity	X	X	X	X
	Food environment index			Same as MN avg.	
	Physical inactivity	X	X	X	X
	Excessive drinking		X	X	X
	Alcohol-impaired driving		X		
	Drug use		X	No Data	
	Food insecurity		X	Same as MN avg.	X
	Limited access to healthy foods		X		X
	Insufficient sleep		X	X	
Clinical Care	Uninsured	X	X	Same as MN avg.	X
	Access to primary care providers	X	X	X	X
	Access to dentists	X	X	X	X
	Access to mental health providers		X	X	
Social & Economic Factors	Children in poverty		X	X	X
	Social associations/isolation		X	X	X
	Crime		X		X
	Median household income		X	X	X
	Childcare cost burden		X	Same as MN avg.	X
	Discrimination	X	X	No Data	X
	Free fitness and nutrition classes	X	X	No Data	X
Physical Environment	Air pollution - particulate matter			X	
	Drinking water violations			X	
	Severe housing problems		X	X	X
	Transportation issues		X	No Data	X
	Homeownership			Same as MN avg.	X
	Broadband (Internet) access	X		Same as MN avg.	X
	Walkable/bikeable neighborhoods	X	X	No Data	X

*County Health Rankings & Roadmaps is a Robert Wood Johnson Foundation Program. Data used is from 2022 reporting of Winona County. Several County Health Ranking metrics are inverse; and "x" indicates a problem area for Winona County.

**Disparity was measured via comparison between Weighted Data and Individuals Needing Translation Services (indicating racial and ethnic disparities), in addition to income data and some secondary sources.

Priority Areas

Based on CHNA survey data, secondary data, and qualitative listening sessions, the following priorities were identified for 2022:

Priority 1: Mental Health and Well-being - Support the mental health and well-being of Winona County residents. Includes specific treatment and services available for individuals with a diagnosed mental illness as well as efforts to support all individuals with achieving and maintaining mental well-being and resilience.

Priority 2: Health Equity - Strive for equity to foster a healthy and thriving community for all.

Priority 3: Healthy Behaviors - Support behaviors that promote health and result in the reduction of chronic disease.

Additional Consideration: Social Connectedness - Encourage social connectedness across the community.

Priority 1: Mental Health and Well-being

Survey results show that mental health concerns have significantly increased in the years since the 2013 CHNA. In 2013, 15.6% of mailed survey respondents indicated they have been told by a medical doctor they have anxiety or panic attacks. In 2022 that increased to 30.5%, while 28% of respondents indicated they had been diagnosed with depression. Additionally, in every listening session, mental health was identified as a major issue within Winona County.

Outlined are the rates of incidence of mental health-related conditions:

I have been told by a medical doctor that I have:		
	Mailed Survey Responses	Translated Survey Responses
Depression	28.0%	18.6%
Anxiety or panic attacks	30.5%	14.5%
Other mental health problems	9.8%	3.9%

The following data from Winona County Sheriff's Department further illustrates the state of mental health in Winona County. The data shows mental health related calls over the last three years, and 2022 projected annualization:

Event Type	2019	2020	2021	2022 (est. annualized)
Emotional Behavioral	147	163	241	241
Check Welfare	1081	970	996	928
Attempted Suicide	9	9	4	14
Suicide Death	7	8	5	9

In addition to the high incidence of mental health issues seen above, 43% of mailed survey respondents indicated their mental health was not good at some point in the past 30 days. About 10% of respondents did not feel their life has purpose, and 2-4% of respondents indicated they have seriously thought about killing themselves in the past 12 months. The data also showed an increase in mental health care delays, representing that while mental health concerns are increasing the ability to access care is decreasing.

In addition to diagnosable mental illness, there are other stressors and factors that influence overall mental well-being. A new question was added to the 2022 CHNA survey inquiring about informal caregiving. Respondents reported 24.0% (mailed survey) to 29.8% providing unpaid care to an adult relative, family member or friend aged 18 years or older to help them take care of themselves in the past year. Caregiver stress is a real emotional and physical strain, and individuals who provide this level of care often report higher levels of stress than those who are not caregivers.

Pathway for Improvement

The COVID-19 pandemic likely exacerbated an already significant increase in mental health-related needs in Winona County. Prioritizing mental health and well-being takes into consideration the increases in alcohol and other substance use that may be used as coping mechanisms for dealing with stress and mental health concerns. It should be noted that mental health has shown up as a priority area in the 2013, 2016, 2019, and now 2022 CHNAs, and despite our focus on mental health, it remains a growing concern. Perhaps some of this is because many of our past and present efforts remain focused on downstream solutions. There is a need for collaborative, community-level work to champion upstream initiatives that will drive impact in this area.

Following are some of the ongoing work and new initiatives to address mental health and well-being.

Winona Health is working to open a Partial Hospitalization Program (PHP) and Intensive Outpatient Program (IOP) to meet the complex mental health needs of our community members. A PHP is designed to provide stabilization services for individuals who would otherwise be served in an inpatient hospital or emergency room. Patients receive intensive therapy and psychiatry services while returning to their own home each evening. This program is a step down from 24-hour care in a psychiatric hospital setting (inpatient treatment) and can be used to prevent the need for an inpatient hospital stay. Treatment takes place in a small group setting, allowing patients to share experiences and support each other. Patients typically participate in the PHP for two to three weeks, Monday-Friday, for approximately six hours each day. While in the program, patients work with psychiatric providers to ensure medications are producing the intended therapeutic impact and receive intensive group and individual therapy from licensed mental health clinicians to address issues identified on the patient's individualized treatment plan. Additionally, participants develop an after-care plan designed to connect them with needed care and resources to maintain stability following the program. Similarly, an IOP is a treatment option for patients who need more services than a traditional weekly clinic visit, but not the extensiveness of a PHP or hospitalization. IOP patients receive a minimum of 9 hours of psychiatric services, group and individual therapy, medication management, and case management services per week. Having a PHP and IOP in Winona ensures community members receive care close to home and provides law enforcement and other community agencies a concrete and comprehensive treatment option where they can refer those in need. PHPs and IOPs have proven results in reducing psychiatric hospital readmissions by filling the gap between traditional outpatient mental health services and inpatient hospital care. The targeted opening date for the PHP/IOP is fall of 2022. In addition to addressing the priority area of mental health and well-being, PHP and IOP services will impact the other priority areas of health equity, healthy behaviors, and social connectedness.

Winona Health and Winona Area Public Schools have also begun work on a school-based clinic partnership that will provide students with another way to access needed care. Winona Health caregivers will be available to students at the Winona Area Middle School and Winona Area High School several times each month. In addition to routine care needs, care providers are an essential first resource for students who express the need for behavioral health support. Per the Academy of Pediatrics, 1 in 5 children have a diagnosable mental health disorder. Care providers assist with screening and identification, in addition to treatment and co-management with mental health providers. This model removes barriers and provides easy access for students to pediatric services, leveraging virtual technology to allow parents or guardians to join visits remotely without having to leave work. These sites are also enrolled in the Vaccines for Children

program, which provides vaccines at no cost to youth who might not otherwise be vaccinated. This initiative addresses the priority areas of mental health and well-being, health equity, and healthy behaviors.

Winona Community HUB (HUB) is an existing program that supports the mental health and well-being of community members by identifying health risks, removing barriers to address those risks, and connecting participants with resources and services to address those needs. Currently, referral criteria for Winona Community HUB includes being a resident of Winona County and having mental health concerns, or struggles with food insecurity, or struggles with housing security. This innovative, highly collaborative program is continuing to expand, making the HUB an important resource in Winona County to those most vulnerable. The work of Winona Community HUB supports all of the CHNA priority areas.

Winona County PartnerSHIP is currently collaborating with the Winona Public Library and The Joy Labs for an initiative that works to address mental health and resilience within communities that may not have access to standard mental health care. This project is facilitated by a trained mental health professional who uses art to teach resilience and coping skills to area youth from the Winona Area Alternative Learning Center and Our Voices, an organization that works to empower BIPOC communities.

The Statewide Health Improvement Partnership (SHIP) grant has added a new context area, MN Well-being, for 2022-2025. The addition of this context area will allow Winona County PartnerSHIP to continue partnering with and funding initiatives that increase social connectedness and create policy, system, or environmental changes to work to create safe, mindful communities for all. In addition to mental health and well-being, Winona County PartnerSHIP also impacts each of the other priority areas.

There are additional opportunities for future partnership work with other community members and agencies that will be explored. This will include gathering all stakeholders to discuss ideas and create plans that will have a positive impact.

Priority 2: Health Equity

“...our nation has experienced the COVID-19 pandemic and its disparate impact on people of color, which has illuminated persistent health inequities and heightened the sense of urgency to reduce these disparities. To make progress towards a more just and equitable society, it is critical to address patients’ social risk factors and needs—especially in populations with disadvantages due to systemic racism or lower socioeconomic status—as well as the contextual conditions that underlie those needs.”

— Magnan, S. 2021. Social Determinants of Health 201 for Health Care: Plan, Do, Study, Act.
Health Partners Institute and the University of Minnesota.

The priority of health equity aims to address the disparities that were demonstrated in the data, both the differences between the mailed survey and translated survey responses, in addition to outcomes influenced by drivers of health like income. Before examining disparities in health, it’s important to understand the differences across Winona County.

Race and Ethnicity (United States Census Bureau QuickFacts):

- 93.4% of Winona County residents identified as White alone, 2.7% as Asian alone, 1.9% as Black or African American alone, 1.5% as Two or More Races, and 0.5% as American Indian and Alaskan Native alone. The percentage of residents identified as Native Hawaiian and Other Pacific Islander alone was a value greater than zero but less than a half unit of measure shown. 3.2% of residents identified as Hispanic or Latino, while 90.6% identified as White alone, not Hispanic or Latino.

Income (United States Census Bureau QuickFacts):

- The median household income (in 2020 dollars) for Winona County residents was \$60,020.
- The per capita income in the past 12 months (in 2020 dollars) was \$31,384.
- 11% of residents lived in poverty.

Gender Identity:

- 0.6% (mailed survey) and 4.5% (translated survey) identified as non-binary, prefer to self-describe, or prefer not to respond in regard to gender.

Sexual Orientation:

- 3.1% (mailed survey) and 2.3% (translated survey) identified as gay or lesbian, bisexual, transgender, describe some other way, or not sure (questioning).

Religion:

- 29.5% (mailed survey) and 54.5% (translated survey) identified their religious/spiritual affiliation to be something other than Christianity or no religious/spiritual affiliation.

In 2022, questions related to discrimination were presented on the CHNA survey for the first time. Respondents were asked if they had done a variety of activities in the past and if they had felt discriminated against while participating in those activities or at all. A question on why respondents believed they were experiencing discrimination was also included.

- 31% of all respondents indicated they had felt discriminated against.
- 19% of those respondents were in the mailed survey group. Responses from mailed surveys indicated most common reasons for discrimination were age (5.9%) and gender (5.8%).
- 23.4% of respondents in the group that received translation services while completing the survey indicated they had experienced discrimination based on their race, color, ethnicity, or country. This was followed by discrimination due to level of education (3.6%).
- The most common setting for discrimination across both survey groups was working at a job.

There is evidence of disparity when comparing the translated survey responses to the mailed survey responses.

- Respondents of the translated survey were three times more likely to say their health was poor or fair, compared to respondents of the mailed survey.
- Respondents to the translated survey were four times more likely to go to the emergency department for medical care.
- A lack of insurance was cited as the main reason for medical care delays for individuals needing translation services, and they were more than three times as likely to be uninsured as respondents to the mailed survey.
- Translated survey respondents were eight times more likely to be kept from medical appointments and medications due to lack of transportation. In addition, respondents to the translated survey were more likely to delay needed dental care, mostly due to inability to get an appointment.

Food insecurity frequently showed up in the translated survey responses with an increase in use of a food shelf and an increase in worry of food running out. An additional increase in worry about not being able to pay rent/mortgage/housing costs was also reported (more than two times the response of the mailed survey).

Pathways for Improvement

An existing opportunity to address healthy equity is in continuing to leverage Winona Community HUB as a resource to help participants identify health risks and mitigate those risks by reducing barriers and connecting participants with needed resources and services in the community. The HUB also aims to address gaps in services by using program data

to identify needs and advocate for development of services and policy changes to close these gaps. An important aspect of this work is including the voices of past, current and potential HUB participants to ensure this work will have a positive impact across the community. The collaborative make-up of the HUB model presents a multitude of opportunities for partnership with other organizations across the community to further this work. In 2022, Winona County PartnerSHIP was able to fund Community Health Worker certifications for Community Connectors for the Winona Community HUB for Winona Volunteer Services and Family and Children's Center. Two additional certified Community Health Workers in Winona County will allow for a greater number of families to enter the HUB and address drivers of health in areas where they may have had fewer opportunities prior.

The Minnesota Department of Health has created a Center for Health Equity. This center will host regional meetings on identifying areas of improvement and providing resources for systemic change. Winona County Health & Human Services, Winona Community HUB, and other community agencies will be a part of these regional meetings, which will increase knowledge and allow for systemic change leading to a more equitable community.

Winona County Health & Human Services continues to offer outreach services to meet individuals where they are for services like immunizations, WIC, and Child & Teen Check-ups. The Immunization Coordinator will continue to build relationships within the Amish communities as well as conduct home visits for those who may need vaccinations but have great difficulty in leaving home. Similarly, the Winona County Health & Human Services SHIP coordinator is in the process of developing an "office in the community" style of working to ensure a representative of Winona County Health & Human Services is seen, known, and available to our more vulnerable populations. This approach is another example of an initiative that addresses each of the identified CHNA priority areas.

Since 2021, all Statewide Health Improvement Partnership (SHIP) awards have been required to address health inequities in some way. With SHIP's inherent focus on policy, system, and environmental change, the SHIP grant and SHIP Coordinator are great resources to ensure local organizations are not only thinking of health equity, but are also thinking of the policies, systems, and environments that continue to uphold structural inequities and work to change them. Health equity cannot be achieved with the work of any one organization, so the partnership aspect of SHIP will continue to provide a pathway for systems thinking and collaboration.

There is ongoing work by Winona Health in their journey to be a more inclusive, diverse, and equitable organization. Continued work was highlighted earlier in this document. Emerging work includes examining and enhancing communication processes for community members whose primary language is not American English. For example, outreach to Spanish speaking populations to encourage the importance of breast cancer screening would include translated promotional materials and interpretation to facilitate scheduling and holding related appointments. Lastly, Winona Health aims to leverage data analytics to understand and close disparities in health.

Priority 3: Healthy Behaviors

According to County Health Rankings & Roadmaps, "health behaviors" are actions individuals take that affect their health. They include actions that lead to improved health, such as eating well and being physically active, and actions that increase one's risk of disease, such as smoking, excessive alcohol intake, and risky sexual behavior. Establishing a broader priority related to healthy behaviors allows us to continue work to address obesity while also promoting a variety of other behaviors that improve health.

Body Mass Index (BMI) data indicated that more than 65% of mailed survey respondents were overweight or obese. While there are acknowledged limitations of BMI (e.g., standardized to white males, may overestimate body fat in athletes/individuals with higher muscle mass, and may underestimate body fat in older persons or those with lower muscle mass), BMI is still a useful measure because it can correlate with measures of body fat percentage and provide a generalized direction of obesity in the community. BMI is more powerful when taken in consideration with other

measures and qualitative information. Further validating the need for a focus on healthy behaviors, was that more than 50% of mailed survey respondents also indicated that they were trying to lose weight.

Other survey results provided possible explanations for the incidence of overweight and obesity. There was a dramatic decrease in eating the recommended amount of vegetables, and respondents indicated that fruits and vegetables are difficult to prepare and cost too much. Those factors, along with a decrease in moderate to vigorous activity and data that indicates more than 60% of survey respondents mostly sit or stand at work, all contribute to obesity.

One positive note regarding survey results, and a likely impact of the COVID-19 pandemic, was that there was an expressed increase in awareness and use of local walking trails, bike paths, swimming pools, parks, schools open for public use, creeks, rivers and lakes. Still, 62.9% of mailed survey respondents are not meeting physical activity guidelines.

Survey data related to substance use demonstrated an increase in drinking, heavy drinking, and binge drinking in translated survey respondents. In addition, the rate of smoking in those translated survey respondents increased four times compared to the 2019 survey. Commentary during listening sessions with the translated survey population suggested the increase in alcohol use and smoking may be a result of stress and anxiety brought on by the pandemic and other stressors.

There was a positive decrease of tobacco use (e.g., e-cigarettes, Hookah, and other products) for the mailed survey respondents, however an increase in nonmedical use of cannabis and pain relievers.

Pathway to Improvement

There are some existing programs that will continue to address healthy behaviors, including two offered by Winona Health. The Food as Medicine program is for adults with diabetes who have an A1C greater than or equal to 8. This program offers education, pre-made meals, fresh produce, and food boxes, along with check-ins with a dietitian, to promote healthy eating. Winona Health and Winona County PartnerSHIP are in the beginning stages of discussion of how collaboration on this program can be achieved in the future.

Winona Health offers Intensive Behavioral Therapy for Obesity (IBT for Obesity) to all patients. IBT for Obesity is a covered Medicare benefit for seniors who have a BMI of greater than or equal to 30. Medicare eligible seniors have no cost sharing for this service. Programming includes intensive behavioral counseling and therapy to promote sustained weight loss. This includes up to 22 visits with a dietitian annually. Winona Health has seen many patients achieve success with the Medicare IBT for Obesity program and in 2019 expanded it to their own benefit eligible staff members who have a BMI of 25 or higher (overweight or obese). The success of these two programs recently prompted a pilot called "Healthy Weight for Life" with a large regional payer. This program models the structure of the IBT for Obesity program and is available for a subset of patients on Medicaid who have a BMI of 30 or higher. Enrollment for this pilot is ongoing at the time of this publication, and this initiative addresses not only the priority area of healthy behaviors, but also health equity.

Winona County Health & Human Services continues to offer guidance on healthy behaviors for the entire age span through their Maternal Child Health, Follow Along, and Care Coordination services. Winona County provides nutritional support for Women, Infants and Children in the WIC program through supplemental food benefits as well as nutrition education with a registered dietitian. These services are for populations on Medicaid, and targeted outreach will continue to strengthen relationships and trust with our most vulnerable communities in order to ensure they have access to those services.

Another existing program that will continue to support healthy behaviors is GR8 Kids, an eight-week wellness program for 4th grade students led by Live Well Winona in partnership with Winona State University. Classes promote age-appropriate education in proper nutrition and active living. In addition to healthy behaviors, the content of GR8 Kids touches all of our priority areas, including mental health and well-being, health equity, and social connectedness.

A new program under development is the Exercise is Medicine program currently in the discussion stage with Winona Health and Winona Family YMCA, in collaboration with Winona County PartnerSHIP. Exercise as Medicine creates a referral system for individuals from a medical setting, to facilitate an easy and seamless transition to exercise. Two areas being piloted are patients with a cancer diagnosis and those who are pregnant.

Winona County Alliance for Substance Abuse Prevention (ASAP) is a coalition of community members devoted to cultivating a drug-free culture for children and teens in the Winona area. They work within schools and the wider community to raise awareness and reduce substance abuse through education and programs. Both Winona Health and Winona County Health & Human Services provide support to ASAP. Continuing to leverage this partnership with ASAP to address substance misuse in Winona County will be an ongoing part of promoting healthy behaviors in the community. The work of ASAP impacts the CHNA priority areas of mental health and well-being, healthy behaviors, and social connectedness.

Winona County, through Winona County PartnerSHIP, continues to collaborate with local organizations to reduce barriers to healthier choices in food and physical activity. The SHIP grant requires policy, system, or environmental change through partnership with the community, so it is a fantastic opportunity to create significant, lasting change in schools, workplaces, and within community organizations - especially in the areas of healthy eating and active living. Policy, systems and environmental change acknowledges that is not enough to know how to be healthy at the individual level, but that changes to policies, systems and environments better equip communities to improve health and reduce chronic disease.

In addition to their internal wellness program HealthyU, Winona Health has begun work to develop deeper partnerships with businesses to support their employees' well-being by piloting a well-being program with several small nonprofits across the Winona Community. HealthyBalance works with organizations and their employees at their current state of wellness and aims to make measured improvements for the individual employees and the organization as a whole. This collaboration presents opportunities for further expansion of work in this area.

Additional Consideration: Social Connectedness

Many Winona County residents spent most of their time over the past two years socially isolated as a means of protecting themselves and others during the ongoing COVID-19 pandemic. Social integration is a key driver of health, and people who feel connected express lower levels of anxiety and depression.

The following responses illustrate the need to address social connectedness as an important aspect of health and well-being:

- Survey respondents were asked if they have a person or group of people they can connect with and talk to. Responses indicated that 9.2% (mailed survey) and 12.8% (translated survey) do not.
- 33% cited no one to exercise with as a reason they did not get enough physical activity.
- 44% lost social connectedness related to COVID-19.

In their March 23, 2020 article "Social Connection Boosts Health, Even When You're Isolated", Psychology Today reported that those who are socially connected have lower rates of anxiety and depression, and they experience more social, emotional, and physical well-being. Science Daily reported on a study done at Massachusetts General Hospital

that showed social connectedness is one of the strongest protective factors against depression. Neglecting our needs for connection puts our greater physical, mental, and emotional health at risk.

Pathway to Improvement

There is potential to support social connectedness and relationships within each of our organizations to promote social connection for community members. For example, Winona Health is piloting a mentorship program for new employees and is in early-stage conversations with Miller Mentoring to support mentorship between Winona Health caregivers and students. Connections with the business community and the Winona Area Nonprofit Alliance present opportunities for collaboration and information sharing to further this work.

Winona Health is partnering with Miss Winona to explore and implement a model of external caregiving support for those in the community providing care to other adults with a variety of needs. This pilot is an emerging opportunity to facilitate connection for those who have taken on caregiving roles outside of the work setting.

Winona County PartnerSHIP, through the Statewide Health Improvement Partnership, is working to foster social connectedness through the MN well-being context area. Support will be provided to area schools, workplaces, and community organizations to develop policy, system, and environmental change that creates room for social connectedness.

Next Steps and Implementation Plan

Winona Health and Winona County Health & Human Services recognize systemic changes need to be made in many areas to slow or decrease negative outcomes and show improvements. In order to uplift and empower our communities that experience negative health outcomes at a greater rate than their peers, we are committed to engaging and building relationships with our most vulnerable citizens.

The Implementation Plan identifies activities already underway or scheduled that impact the priority areas, and a County Health Improvement Plan (CHIP) to be drafted by Winona County will be available as a separate document. Ongoing work will be done after the completion of this document to engage others in the community and build on these priority areas. Authentic engagement with communities most impacted by health inequities will be essential to improving the health of our community. The CHNA, Implementation Plan and CHIP should be dynamic and evolving documents that adjust with the needs of the community over time.

Evaluation

“We’ve been wrong about what our job is in medicine. We think our job is to ensure health and survival. But really it is larger than that. It is to enable well-being. And well-being is about the reasons one wishes to be alive.”

— Atul Gawande, *Being Mortal: Medicine and What Matters in the End*

The implementation strategies will be evaluated throughout the three-year cycle as part of Winona Health’s and Winona County’s continuous systems improvement processes. The information included in this report will inform the strategic planning process for Winona Health, which monitors progress and course corrects based on findings and community needs. Winona County Health & Human Services will adapt Statewide Health Improvement Partnership work to align with the needs of the community. This work uses evidence-based and culturally-based projects and is evaluated by the Minnesota Department of Health as well as by local public health.

Winona Health and Winona County Health & Human Services appreciate all community partners and voices that contributed to this report and their continued collaboration in striving for more equitable and sustainable health!

Appendix A: Winona Health Service Directory



Healthy starts here — with local healthcare services

Emergency/Urgent Care Services

- Emergency Department
- Urgent Care Clinic
- Winona Area Ambulance Service

Inpatient Services

- Intensive Care Unit
- Medical/Surgical/Pediatric Unit
- Family Birth Center

Primary Care Services

- Family Medicine
- Internal Medicine
- Pediatrics/Adolescent Medicine
- Rushford Clinic
- Psychiatric and Counseling Services (outpatient)
- Dialysis
- Anticoagulation/Coumadin Clinic
- Cardiac Rehab
- Community Care Network
- Conservative Management Clinic
- Diabetes/Nutrition Education

Virtual Visits

- SmartExam
- Telemedicine
- Urgent Care

Main Street Clinic

- Quick Care
- Eye Care

Hospice Services

Specialty Services

- Anesthesia Services
- Audiology
- Cancer Care
- Dermatology and Mohs Surgery
- Durable Medical Equipment (DME)
- Eye Care Clinic
 - Optometry
 - Ophthalmology
 - Glasses & Contact Lens Services
- General Surgery
- Imaging Services
 - Mammography
 - DEXA
 - Ultrasound
 - Diagnostic Radiology (X-ray)
 - MRI
 - CT
 - PET CT
 - Echocardiogram
 - Nuclear Medicine
- Infusion Services
- Laboratory/Pathology
- Orthopedics & Sports Medicine
- Pain Management
- Plastics, Cosmetics & Reconstructive Surgery
- Podiatry
- Sleep Studies & Sleep Advisor Services
- Spa Services

Specialty Services *continued*

- Women's Health
 - OB/GYN
 - Midwifery
- Rehabilitation Services
 - Physical & Sports Therapy
 - Occupational Therapy
 - Speech-Language Pathology
 - Massage Therapy
- Urology Services
- Wound Care

Senior Services

- Chaplain Services
- Skilled Nursing
 - Lake Winona Manor
 - Transitional Care Unit
- Assisted Living
 - Senior Living at Watkins, Adith Miller & Roger Metz Manors

Retail Pharmacy Services

- Winona Clinic Pharmacy with drive-up window

Wellness Services

- Employer Services
 - Occupational Health
 - HealthyBalance
- Healthy Kids
- Wellness Classes

To learn more about services, healthcare providers, career opportunities and upcoming events, visit winonahealth.org or call us at 507.454.3650.

Find us online: winonahealth.org   

Scan the QR code to learn more or visit: winonahealth.org/options



Appendix B: County Health Rankings & Roadmaps

County Health Rankings & Roadmaps

Building a Culture of Health, County by County



The 2022 Rankings include deaths attributable to COVID-19 from 2020. See our FAQs for more information on COVID-specific data.

Winona (WI) 2022 Rankings

[Download Minnesota Rankings Data](#)

County Demographics

	County	State
Population	50,485	5,657,342
% below 18 years of age	17.7%	23.0%
% 65 and older	18.3%	16.8%
% Non-Hispanic Black	1.8%	7.0%
% American Indian & Alaska Native	0.4%	1.4%
% Asian	2.7%	5.3%
% Native Hawaiian/Other Pacific Islander	0.0%	0.1%
% Hispanic	3.2%	5.7%
% Non-Hispanic White	90.8%	78.6%
% not proficient in English **	1%	2%
% Females	50.4%	50.2%
% Rural	34.5%	26.7%

	County	Error Margin	Top U.S. Performers ^	Minnesota
Health Outcomes				
Length of Life				
Premature death	5,000	4,300-5,700	5,600	5,600
Quality of Life				
Poor or fair health **	15%	13-17%	15%	13%
Poor physical health days **	3.4	3.2-3.7	3.4	3.1
Poor mental health days **	4.1	3.8-4.4	4.0	4.0
Low birthweight	7%	6-8%	6%	7%
Additional Health Outcomes (not included in overall ranking)				
COVID-19 age-adjusted mortality **	58	42-80	43	72
Life expectancy	80.9	80.1-81.7	80.6	80.4
Premature age-adjusted mortality	270	250-300	290	280
Child mortality	50	30-80	40	40
Infant mortality			4	5
Frequent physical distress **	11%	10-12%	10%	9%
Frequent mental distress **	13%	12-15%	13%	12%
Diabetes prevalence **	8%	8-9%	8%	8%
HIV prevalence	54		38	187
Health Factors				
Health Behaviors				
Adult smoking **	18%	15-21%	15%	15%
Adult obesity **	34%	33-36%	30%	30%
Food environment index	8.9		8.8	9.0
Physical inactivity **	21%	19-23%	23%	20%
Access to exercise opportunities	91%		86%	81%

Excessive drinking **	25%	24-26%	15%	23%
Alcohol-impaired driving deaths	9%	2-21%	10%	30%
Sexually transmitted infections	400.1		161.8	433.9
Teen births	6	5-7	11	12
Additional Health Behaviors (not included in overall ranking)				
Food insecurity	8%		9%	8%
Limited access to healthy foods	3%		2%	6%
Drug overdose deaths	13	8-20	11	15
Motor vehicle crash deaths	7	5-11	9	8
Insufficient sleep **	30%	28-31%	32%	29%
Clinical Care				
Uninsured	6%	5-7%	6%	6%
Primary care physicians	2,660:1		1,010:1	1,100:1
Dentists	1,530:1		1,210:1	1,320:1
Mental health providers	470:1		250:1	340:1
Preventable hospital stays	2,808		2,233	3,073
Mammography screening	56%		52%	52%
Flu vaccinations	61%		55%	55%
Additional Clinical Care (not included in overall ranking)				
Uninsured adults	7%	6-8%	7%	7%
Uninsured children	3%	2-5%	3%	3%
Other primary care providers	1,120:1		580:1	730:1
Social & Economic Factors				
High school completion	94%	93-95%	94%	93%
Some college	75%	69-81%	74%	75%
Unemployment	4.9%		4.0%	6.2%
Children in poverty	11%	7-15%	9%	10%
Income inequality	4.3	3.9-4.7	3.7	4.3
Children in single-parent households	15%	11-18%	14%	20%
Social associations	11.7		18.1	12.6
Violent crime	95		63	236
Injury deaths	62	53-72	61	69
Additional Social & Economic Factors (not included in overall ranking)				
High school graduation	81%		96%	84%
Disconnected youth			4%	4%
Reading scores	3.2		3.3	3.1
Math scores	3.3		3.4	3.3
School segregation	0.06		0.02	0.25
School funding adequacy	\$3,186			\$2,384
Gender pay gap	0.81	0.75-0.86	0.88	0.82
Median household income	\$65,300	\$57,700 to \$72,900	\$75,100	\$75,500
Living wage **	\$35.76			\$39.89
Children eligible for free or reduced price lunch	35%		32%	36%
Residential segregation - Black/white	57		27	64
Residential segregation - non-white/white	22		16	48
Childcare cost burden **	22%		18%	22%
Childcare centers **	5		12	4
Homicides			2	2
Suicides	11	7-16	11	14
Firearm fatalities	6	3-9	8	8
Juvenile arrests	18			22
Physical Environment				
Air pollution - particulate matter	9.0		5.9	6.9
Drinking water violations	Yes			
Severe housing problems	15%	13-17%	9%	13%
Driving alone to work	76%	74-78%	72%	76%
Long commute - driving alone	22%	20-24%	16%	31%
Additional Physical Environment (not included in overall ranking)				
Traffic volume	172			435
Homeownership	72%	71-73%	81%	72%
Severe housing cost burden	10%	8-12%	7%	11%
Broadband access	87%	85-89%	88%	87%

^ 10th/90th percentile, i.e., only 10% are better.

** Data should not be compared with prior years

Note: Blank values reflect unreliable or missing data

Appendix C: Winona County Demographic Data

All Topics	Q Winona County, Minnesota
Population Estimates, July 1 2021, (V2021)	49,630
PEOPLE	
Population	
Population Estimates, July 1 2021, (V2021)	49,630
Population estimates base, April 1, 2020, (V2021)	49,671
Population, percent change - April 1, 2020 (estimates base) to July 1, 2021, (V2021)	-0.1%
Population, Census, April 1, 2020	49,671
Population, Census, April 1, 2010	51,461
Age and Sex	
Persons under 5 years, percent	4.6%
Persons under 18 years, percent	17.8%
Persons 65 years and over, percent	18.2%
Female persons, percent	50.1%
Race and Hispanic Origin	
White alone, percent	93.4%
Black or African American alone, percent (a)	1.9%
American Indian and Alaska Native alone, percent (a)	0.5%
Asian alone, percent (a)	2.7%
Native Hawaiian and Other Pacific Islander alone, percent (a)	Z
Two or More Races, percent	1.5%
Hispanic or Latino, percent (b)	3.2%
White alone, not Hispanic or Latino, percent	90.6%
Population Characteristics	
Veterans, 2016-2020	3,114
Foreign born persons, percent, 2016-2020	3.4%
Housing	
Housing units, July 1, 2021, (V2021)	21,780
Owner-occupied housing unit rate, 2016-2020	72.0%
Median value of owner-occupied housing units, 2016-2020	\$173,200
Median selected monthly owner costs -with a mortgage, 2016-2020	\$1,292
Median selected monthly owner costs -without a mortgage, 2016-2020	\$472
Median gross rent, 2016-2020	\$694
Building permits, 2021	103

Families & Living Arrangements	
Households, 2016-2020	19,466
Persons per household, 2016-2020	2.41
Living in same house 1 year ago, percent of persons age 1 year+, 2016-2020	81.5%
Language other than English spoken at home, percent of persons age 5 years+, 2016-2020	5.6%
Computer and Internet Use	
Households with a computer, percent, 2016-2020	92.4%
Households with a broadband Internet subscription, percent, 2016-2020	87.4%
Education	
High school graduate or higher, percent of persons age 25 years+, 2016-2020	93.5%
Bachelor's degree or higher, percent of persons age 25 years+, 2016-2020	31.3%
Health	
With a disability, under age 65 years, percent, 2016-2020	7.5%
Persons without health insurance, under age 65 years, percent	6.1%
Economy	
In civilian labor force, total, percent of population age 16 years+, 2016-2020	69.5%
In civilian labor force, female, percent of population age 16 years+, 2016-2020	67.7%
Total accommodation and food services sales, 2017 (\$1,000) (c)	88,657
Total health care and social assistance receipts/revenue, 2017 (\$1,000) (c)	232,733
Total transportation and warehousing receipts/revenue, 2017 (\$1,000) (c)	86,093
Total retail sales, 2017 (\$1,000) (c)	676,852
Total retail sales per capita, 2017 (c)	\$13,327
Transportation	
Mean travel time to work (minutes), workers age 16 years+, 2016-2020	17.9
Income & Poverty	
Median household income (in 2020 dollars), 2016-2020	\$60,020
Per capita income in past 12 months (in 2020 dollars), 2016-2020	\$31,384
Persons in poverty, percent	11.0%

BUSINESSES	
Businesses	
Total employer establishments, 2020	1,141
Total employment, 2020	23,508
Total annual payroll, 2020 (\$1,000)	940,389
Total employment, percent change, 2019-2020	0.9%
Total nonemployer establishments, 2019	2,920
All employer firms, Reference year 2017	927
Men-owned employer firms, Reference year 2017	463
Women-owned employer firms, Reference year 2017	149
Minority-owned employer firms, Reference year 2017	S
Nonminority-owned employer firms, Reference year 2017	775
Veteran-owned employer firms, Reference year 2017	S
Nonveteran-owned employer firms, Reference year 2017	666
GEOGRAPHY	
Geography	
Population per square mile, 2020	79.3
Population per square mile, 2010	82.2
Land area in square miles, 2020	626.18
Land area in square miles, 2010	626.21
FIPS Code	27169

About datasets used in this table

Value Notes

Estimates are not comparable to other geographic levels due to methodology differences that may exist between different data sources.

Some estimates presented here come from sample data, and thus have sampling errors that may render some apparent differences between geographies statistically indistinguishable. Click the Quick Info icon to the left of each row in TABLE view to learn about sampling error.

The vintage year (e.g., Y2021) refers to the final year of the series (2020 thru 2021). Different vintage years of estimates are not comparable.

Users should exercise caution when comparing 2015-2020 ACS 5-year estimates to other ACS estimates. For more information, please visit the [2020 5-year ACS Comparison Guidance](#) page.

Fact Notes

- (a) Includes persons reporting only one race
- (c) Economic Census - Puerto Rico data are not comparable to U.S. Economic Census data
- (b) Hispanics may be of any race, so also are included in applicable race categories

Value Flags

- Either no or too few sample observations were available to compute an estimate, or a ratio of medians cannot be calculated because one or both of the median estimates falls in the lowest or upper interval of an open ended distribution.
- F Fewer than 25 firms
- D Suppressed to avoid disclosure of confidential information
- N Data for this geographic area cannot be displayed because the number of sample cases is too small.
- FN Footnote on this item in place of data
- X Not applicable
- S Suppressed; does not meet publication standards
- NA Not available
- Z Value greater than zero but less than half unit of measure shown

QuickFacts data are derived from: Population Estimates, American Community Survey, Census of Population and Housing, Current Population Survey, Small Area Health Insurance Estimates, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits.

Appendix D: Winona County Assets 2021

The following information was compiled by a group of Winona County interns in 2021. This is not to be assumed an exhaustive list of all Winona County assets, but is fairly comprehensive.

Variety of health services – including mental health centers (Hiawatha Valley Mental Health Center and Winona Health – Behavioral Health Services), health clinics (Winona Health, Main Street Clinic, Gundersen Winona Campus, and more), physical therapy clinics (Winona Health Rehabilitation Services), free clinics (Bridges Health Winona), women’s health clinics, urgent care facilities, family planning clinics, and a hospital (Winona Health).

Trails/Paths/State Parks – Winona County has many different trails, paths, and parks for walking, running, or biking allowing individuals to stay physically active.

State Parks

1. **Whitewater State Park** – is located in Altura, Minnesota. This state park has many different activities that visitors can partake in including trout fishing, swimming at the beach, exploring the visitor center, hiking on easy to difficult trails, camping, snowshoeing, and cross-country skiing. Visitors may run into out of the ordinary or unique animals as Whitewater State Park is home to roughly 50 different kinds of mammals and 250 diverse kinds of birds.
2. **Great River Bluffs State Park** – is located in southeast Winona and overlooks the Mississippi River. At this park, visitors can hike on any of the 6 miles of trail within the park, bird watch, camp, or cross-country ski.
3. **John A. Latsch State Park** – is located in Minnesota City. This Park has a trail made up of all stairs that will take you up to the top of Mount Charity. Once to the top of the bluff, the view of the Mississippi River Valley makes the challenging half mile hike up all worth it.

Other Paths/Trails

1. Sugar Loaf Trail Health, Garvin Heights City Park, Lake Park/Lake Winona, Bronk Unit Plowline Trail, Levee Park, Flyway Trail, Saint Mary’s University Hiking and Skiing Trails, Brookwood Park, Kieffer Park, Elba Fire Tower, Lewiston Prairie Trails Park, City of St. Charles trail system.

Parks and Recreation

1. **St. Charles Parks and Recreation** – The St. Charles Parks and Recreation office offers a variety of different opportunities for individuals to be active. Parks and Recreation offers many programs such as T-Ball, 8U Girls' softball, Girls' softball, Boy's baseball, Track and field camp, summer kickball, Basics of Disc Golf, Summer Dance, a Twins trip, Junior Golf camp, Swim Lessons, and the ability to use the Mel Brownell Family Aquatic Center
2. **Winona Parks and Recreation** – Bob Welch Aquatic Center and Lake Lodge have activities where children and adults can play in the water or go on the water with a paddle board, kayak, canoe, and more. Adult leagues such as softball, kickball, volleyball, and volleyball are scattered throughout the entire year.

Farmers Markets

1. **Winona** – Is a local site for producers of homegrown fruits, vegetables, nuts, herbs, herbal medicine, eggs, honey, syrups, dairy products, baked goods, meats, flowers, bedding, and house plants. The Farmer's market is sponsored by Winona County PartnerSHIP. The Winona Farmers Market accepts SNAP benefits as well. There are roughly 26 current vendors this year.
2. **Goodview** – Supports local farmers, business, growers, and artisans. Goodview's farmers market is smaller than Winona's but still provides many unique products for consumers. The Farmer’s market is sponsored by Winona County PartnerSHIP. This farmers market is located right off Hwy 61 at Elks Lodge.

3. **Lewiston Area Farmers Market** – This farmers market takes place at Crossing Center, and is sponsored by SHIP, Minnesota Grown, Farmers Market Coalition, and Minnesota Farmers Market Association. The farmers market takes place every Wednesday from 5-8pm and offers local growers and people interested in natural food the ability to connect with one another. Local growers and producers have the opportunity to sell their products in a fun, lively, and unique venue. This farmers market accepts SNAP benefits as well.

School Districts – Winona County is home to 8 different school districts which include both public and private schools.

1. Bluffview Montessori School District (Kindergarten through 8th grade)
2. Dakota Area Community Charter School District (Kindergarten through 5th grade)
3. Hiawatha Valley Education District (Pre-K through 12th grade)
4. Lewiston-Altura Public School District (Pre-K through 12th grade)
5. Ridgeway Learning Community Charter School District (Kindergarten through 5th grade)
6. Riverway Learning Community Charter School District (Pre-K through 12th grade)
7. St. Charles Public School District (Pre-K through 12th grade)
8. Winona Area Public School District (Pre-K through 12th grade)
9. Cotter Schools Serves grades 5-12

Higher Education – Winona County is home to three higher education facilities.

1. **Winona State University** – was founded in 1852 and is the oldest member of the Minnesota State System of colleges and universities. The college is also ranked number one for student success rate in the Minnesota State System. Winona State is a mid-sized university made up of two campuses (one in Winona and one in Rochester) and had a little over 7,500 students during the 2019-2021 school year. Winona State offers 73 undergraduate programs and has a graduation rate of 59%.
2. **St. Mary's University of Minnesota** – St. Mary's offers more than 40 majors and provides graduate, bachelors complete and certificate programs. The graduation rates as of 2014 were at 58.5%. St Mary's is a relatively small college with a total of 1,329 undergraduate students and 3,823 graduate students making the total students enrolled is 5,152. The university is comprised of three campuses, the main campus is in Winona Mn, then there are two others. One is in Minneapolis which is the Twin Cities Campus and the other is the Rochester, MN campus.
3. **Minnesota Southeast Tech and Community College** – Minnesota Southeast offers almost 50 programs and eight different career areas such as Business and management, Education and Human Services, Engineering, manufacturing and trades, Health Sciences, Information Technologies, Liberal Arts and Transfer Studies, Musical Instrument Repair and Building, and Transportation Careers. Minnesota Southeast has two campuses, one in Winona and the other in Red Wing. In total the college serves 2,663 students with a graduation rate of 38%.

Long-Term Care and Assisted Livings – The county of Winona has many different assisted living facilities (some of which are brand new facilities). Most facilities are in Winona; however, a handful are in Lewiston and St. Charles. Lake Winona Manor – Winona Health, Brookdale Winona, Sugar Loaf Senior Living, St Anne Extended Healthcare, Benedictine Living Community, Benedictine Living Community, Senior Living at Watkins – Winona Health, Sauer Health Care, Roger Metz Manor, Adith Miller Manor, St. Charles Assisted Living, Lewiston Senior Living, Speltz Estates Assisted Living.

Family and Children's Center – This center works to provide a plethora of services to strengthen families and promote individual well-being. This way, children and family can continue to reside with one another in an environment where both parties are thriving. The services offered include child abuse and neglect prevention, community-based counseling, residential options, community support programs, and several outreach programs.

Project FINE – is an organization that provides the following services to newcomers in the community: education, information, translators, referrals, and empowerment. This service has played a significant role in influencing the

health of minorities and allowing other organizations in Winona to be culturally competent, aware, and prepared to welcome all.

Statewide Health Improvement Partnership (SHIP) – works with members in the community to prevent chronic diseases before they start. SHIP’s goal is to help members of the community live longer, healthier, and better lives. They support programs and projects to help encourage opportunities for active living, healthy eating, well-being, and commercial tobacco-free living. SHIP works within communities, schools and childcare, workplaces, and health care. Winona County PartnerSHIP works with schools, workplaces, childcare providers, healthcare providers and the community to increase opportunities for active transport, physical activity, healthy foods, well-being, and decrease commercial tobacco use and exposure.

Live Well Winona – is a health hub available to the whole community aiming to improve health and well-being. There are many different resources available categorized into categories like health and wellness, assistance and support, family life, bike/walk safety, recipes, health assessments and calculators, current programs and events, news, facts, wellness and more. Live Well Winona administers the Winona Community HUB.

Winona County Alliance for Substance Abuse Prevention (ASAP) – is a community member-run coalition that helps create awareness of substance abuse and reduce it by fostering a drug-free culture for teens and children within Winona County.

Gr8 Kids – Winona Health and other nonprofit organizations in 2005 developed the Healthy Kids Club to respond to the rise in childhood obesity. Gr8 Kids is an eight-week wellness program for 4th graders. The program includes eight weekly classes that give children education on proper nutrition and active living. Gr8 Kids works to improve overall quality of life for young individuals within the community. GR8 Kids is partnered with many of the local schools including: Bluffview Montessori School, Jefferson Elementary School, Ridgeway Community School, Riverway Learning Community, Rushford Learning Community, Rushford-Peterson Schools, and St. Stan’s Elementary School.

Fastenal – was founded in 1967 as a fastener shop, and now operates 3,200 branches and on-site locations in all 50 US states and in Canada, Mexico, Asia, Africa, and Europe. However, the headquarters for this major company is right here in Winona, MN. The business is the largest employer in Winona, MN, employing a variety of different jobs such as IT, Human Resources, Accounting, Marketing, Vending Solutions Support, Product Development, Sourcing, manufacturing, sales, and administrative.

The Winona Family YMCA – is an organization that offers a handful of different services and activities for all ages. Some of these services or activities include a fitness center, personal training sessions, dance lessons, small group training, nutrition services, after school care, summer childcare, kids' corner: while you work out, swim team, swim lessons, and youth basketball and volleyball. The YMCA is available to all people as financial assistance is available to those who may need it, and if members choose, they can get access 24-hour access to the facility.

Winona Volunteer Services – is a non-profit service provider that works to improve the lives of community members by providing food, clothing, information, referrals, and any needed emergency assistance. The Supplemental Food Shelf is one of their services that is open Mondays through Fridays to anyone who needs free food. Clients who use this food shelf often appreciate how they can do the shopping themselves. Home delivered meals is another service provided and is available to eligible residents of either the city of Winona or Goodview.

Appendix E: Community Health Assessment Literature Review

Health factors are a large determinant of the health outcomes in a community. This means that when individuals display healthy behaviors, have access to available and affordable health care, have access to education, jobs, money, family, and support systems, and live in a physical environment that is kept well, the community and individuals typically experience good health outcomes. However, the rankings in Winona County do not follow this exact trend.

Vulnerable Populations

With equal weight, 16 different parameters were used to analyze census tract site locations to determine highly vulnerable populations. Many of the parameters focused on topics such as frequency of doctor visits, prescription consumption, and frequency of physical activity/inactivity. The census tract sites can be seen in Figure 1. Census tract site 271696709 is considered to be the most vulnerable population while an area located in City of Winona, census tract site 271696705, is considered to be the least vulnerable population (Mpagi, 2021). Vulnerability rankings can be seen in Figure 2. The number 1 ranking is the most vulnerable and as you move up the table to higher rankings, the census tract site populations become less vulnerable (Mpagi, 2021).

Figure 1



Figure 2

Site	Rank	Final score
271696705	10	0.23
271696706	9	0.46
271696704	8	0.47
271696702	7	0.51
271696708	6	0.53
271696710	5	0.54
271696703	4	0.63
271696707	3	0.64
271696701	2	0.69
271696709	1	0.77

Winona County Health Rankings

Winona County is ranked 49th out of the 87 counties in Minnesota for health outcomes and is ranked 17th out of the 87 counties for health factors (County Health Rankings, 2021). Within Winona County, there are a few notable health factors that rank worse than the state average and sometimes worse than the United States average, too. The notable health factors include smoking, physical inactivity, large patient to primary care ratios, severe housing problems, all of which may be influencing the lower performing health outcomes (County Health Rankings, 2021). This literature review examines possible reasons that contribute to this gap between health factors and health outcomes as well as some of the most pressing issues Winona County faces.

Physical Inactivity

It was reported that “All states and territories had more than 15% of adults who were physically inactive, and this estimate ranged from 17.3% to 47.7%” (Centers for Disease Control and Prevention [CDC], 2020a, p. 1). Washington, Oregon, Colorado, and Utah were listed as the most active states (CDC, 2020a). Minnesota and Wisconsin were listed as two of many states where 20-25% of the population was physically inactive, and 22 other states had 25% - <30% of their population who were deemed as physically inactive (CDC, 2020a). Not only did the physical inactivity rates vary by location, but they also varied by race/ethnicity. According to data from the CDC, Hispanic adults had the highest rates of physical inactivity (31.7%), non-Hispanic Blacks followed shortly behind (30.3%), and non-Hispanic whites had the smallest proportion of physically inactive adults (24.3%) (2020a). It has been said that 10% of premature deaths can be attributed to physical inactivity and this lack of exercise can be associated with “\$117 billion in annual healthcare costs” (CDC, 2020a, p.1). Furthermore, physical inactivity can be held responsible for roughly 8.3% of all deaths in the United States (CDC, 2018).

Like mentioned above, 20-25% of Minnesotans are physically inactive (CDC 2020a). It has been recommended that adults get 150 minutes of aerobic exercise a week. Within Minnesota, the 25–34-year-old age group appeared to have the most challenging time reaching the goal of 150 minutes of aerobic exercise a week as only 54% report doing so, but the percentage of adults who were physically active steadily increased among each older age group (CDC, 2019). The percent of adults who typically got at least 150 minutes of aerobic exercise a week are as follows: 54.2% of those 35-44 years, 57.5% of those 45-54 years, 61.7% of those 55-64 years, and 62.5% of those 65 years and older (CDC, 2019). A reported 55.2% of people ages 18-24 met the aerobic exercise minutes per week goal (CDC, 2019).

Winona County has higher rates of physical inactivity when being compared to the percentages of all Minnesotans. It was reported that 24% of the individuals living in Winona County are physically inactive compared to 20% of all Minnesota residents (County Health Rankings, 2021). Surprisingly, Winona County has exceptional access to exercise opportunities. According to the County Health Rankings, 2021, Winona County is a U.S. top qualifier for exercise opportunities. Figure 3 shows the prevalence rates of physical inactivity among adults who are 18+ years old (PLACES, 2018b). Data shows that a small area, census tract site 271696703.00 (which can be seen in Figure 1), has the smallest proportion (19.5%) of physically inactive adults (PLACES, 2018b). On the other hand, census tract site 271696707.00, indicated by a darker purple, has the greatest proportion (23.2%) of physically inactive adults (PLACES, 2018b).

Figure 3

Figure 3

County also has multiple disc golf courses including Willow's Disc Golf Course (around Lake Winona), The Woods Frisbee Golf Course at St. Mary's University, St. Charles Disc Golf Course, Prairie Island Disc Golf Course, and Heartland Country Club Disc Golf Course in Lewiston. Moreover, there are many gyms/fitness centers within the city of Winona. Although outside the city of Winona, indoor fitness centers become scarce.

The World Health Organization recognized that urbanization could influence activity levels because rates of violence may be higher, there may be more traffic, there may be poorer air quality, and community parks, sidewalks, or recreation centers may be limited (2021). Urbanization has not occurred rapidly over time in Winona County. The population has actually dropped by 1.9% from 2010 to 2020 (United States Census Bureau, 2021). Air quality levels and rates of violence remain at comparable levels to the state average and likely have little association with the rates of inactivity (County Health Rankings, 2021).

Obesity

United States

Obesity is a growing problem in the United States. According to the CDC, the obesity prevalence rate was 40% among adults aged 20-39, 44.8% among adults aged 40-59 years, and 42.8% among adults aged 60 and older (2021c). These percentages were significantly larger than what they were in children and adolescents during the same period. The obesity prevalence rate in 2018 was 13.4% among ages 2-5 years, 20.3% among 6-11-year-olds, and 21.2% among 12-19-year-olds (CDC, 2021a). The total prevalence rate in children and adolescents was 19.3% and affected a total of roughly 14 million children and adolescents (CDC, 2021a).

Minnesota

In the state of Minnesota, the obesity rates continue to climb. For adults, the obesity prevalence rate in 2018 was 30.1% which was up 1.7% from the year before as the rate was 28.4% in 2017 (Minnesota Department of Health [MDH], 2019a). The obesity rate for individuals between the ages of 10-17 is 10.4% (MDH, 2019a). Data gathered from the National Health and Nutrition Examination Survey (NHANES) found that 39.6% of individuals living in nonmetropolitan areas were obese while only 33.4% of individuals were obese in a metropolitan area (Laurdeen et al., 2018). In 2018, 1 in 3 adults living in Minnesota were obese with an even larger percentage of individuals being overweight (MDH, 2020).

Winona County

In Winona County, 29% of the adult population (ages 20 and over) is considered obese, meaning that they have a body mass index (BMI) greater than or equal to 30kg/m (County Health Rankings, 2021). The percentage of individuals ages 18-34 that are obese is 27.7%; ages 35-44 years is 44.3%; ages 45-54 years is 35.3%; ages 65-74 years is 35%; and 75 and over is 28% (Winona County Health & Human Services and Winona Health, 2019). According to current trends, those living in a rural county within the United States commonly have a higher prevalence of obesity (Lundeen et al., 2018). Obesity can be closely linked to diabetes. Within Winona County, diabetes rates range from roughly 7% of the population up to 9.5% of the population (PLACES: Local Data for Better Health, 2018a). Darker pink areas indicate higher rates of diabetes in Figure 4 (PLACES: Local Data for Better Health, 2018a).

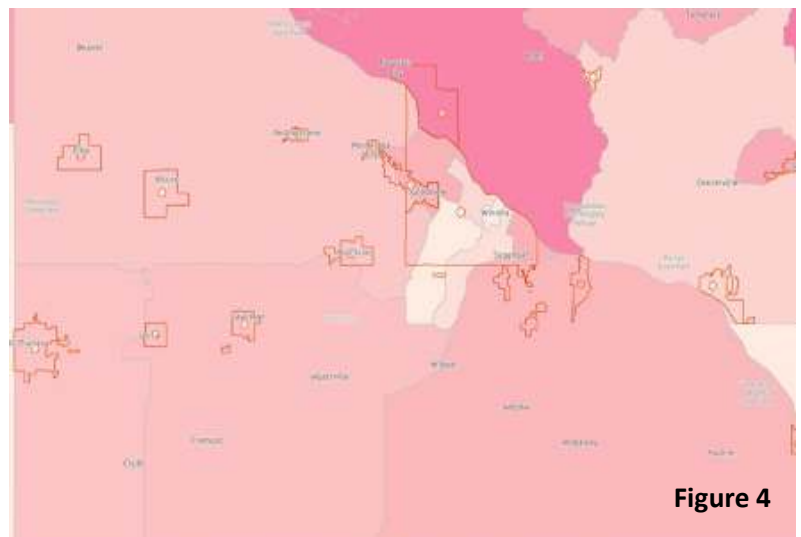


Figure 4

Mental Health

United States

Mental health has been a growing issue within the United States, the state of Minnesota, and Winona County. Twenty-one percent of adults experience a mental illness, 5% of adults experience a serious mental illness, and 17% of those aged 6-17 experience a mental health disorder (NAMI, 2021). The two most common mental illnesses are anxiety disorder, which has a prevalence rate of 19%, and depression, which has a prevalence rate of 8% (NAMI, 2021). The prevalence of mental illness among certain groups is as follows: 44% of lesbian, gay, and bisexual adults, 32% of multiracial adults, 22% of white adults, 19% of American Indian or Alaska Native adults, 18% of Hispanic or Latinx adults, 17% of Native Hawaiian or other Pacific Islander adults, 17% of Black adults, and 14% of Asian adults (NAMI, 2021).

The COVID-19 pandemic exacerbated levels of depressive disorders and anxiety (Czeisler et al., 2020). These mental health conditions affected certain groups more than others. Young adults, Hispanic persons, Black persons, essential workers, unpaid caregivers for adults, and individuals who are receiving treatment for preexisting psychiatric conditions have all been disproportionately affected by mental health conditions (Czeisler, 2020). To get a better overview of how the COVID-19 pandemic has affected mental health, about 8.1% of adults ages 18+ had symptoms of anxiety disorder, 6.5% showed symptoms of depressive disorder, and 10.8% showed symptoms of an anxiety disorder or a depressive disorder before the COVID-19 pandemic began (CDC, 2021d).

Minnesota

The 2021 County Health Rankings disclosed that the average number of mentally unhealthy days reported by Minnesota residents in the past 30 days was 3.5 days. According to the Children's Mental Health Inventory and Benefit-Cost Analysis conducted by the MDH, roughly 20% of Minnesotan children and adults experience "challenges in emotional well-being and development" (p.9, 2019a). About 7% of children in Minnesota experience intense mental health concerns which are often referred to as severe emotional disturbances. Each year it is estimated that 20% of adults experience mental well-being challenges, 15% have a mental illness, 3% experience a severe mental illness, and 2% experience a serious and persistent mental illness (MDH, 2019a). The average ratio of the Minnesota population to mental health providers during 2020 was 370:1 (County Health Rankings 2021). The mental health of many adult Minnesotans worsened during the pandemic at similar percentages in comparison to the United States as a whole. Although the percentage of Minnesota adults aged 18 and over who displayed symptoms of anxiety disorder was smaller than the United States average, the percentages were still higher than normal.

Winona County

The larger patient-to-provider ratio in Winona County, 2540:1, may be a contributing factor to this rising mental health need (County Health Rankings, 2021). Data from 2020 showed that Winona County has a mental health provider-to-patient ratio of 510:1 which is a greater ratio than the Minnesota average (County Health Rankings, 2021). The average number of mentally unhealthy days reported by Winona County residents in the past 30 days was 3.8 and was also slightly higher than the Minnesota average of 3.5 (County Health Rankings, 2021).

Winona County females in grades 8, 9, and 11 displayed worse emotional well-being statuses and higher levels of distress than males. The percent of females in grades 8, 9, and 11 who reported feeling nervous, anxious, or on edge nearly every day for the past two weeks was 15% for each grade while the percentages ranged between 4% and 6% for males from each of the same grades (MDH, 2019c). Almost 20% of females and 11% of males in grade 5 strongly agreed with the statement that they have worried a lot within the past 30 days (MDH, 2019c). Almost an even percent of 5th grade males (14%) and females (13%) strongly agreed with the statement that they sometimes felt sad within the past 30 days and did not know why (MDH, 2019c).

Winona County students shared results that indicate there is a need to focus on improving mental health. Winona County 11th grade students were asked "Over the past two weeks, how often have you been bothered by feeling down, depressed or hopeless?" and 37% of the students said they had these feelings for several days (MDH, 2019c). Another

question was, “Have you seriously considered attempting suicide?” and 21% reported yes, they had these thoughts at some point more than a year ago (MDH, 2019c).

Treating Mental Health (Prescriptions, Counseling & Therapy)

United States

As indicated in the mental health data above, anxiety and depression increased within the past few years. Similarly, treatment options for mental health concerns have also been used at higher rates than prior to the onset of the pandemic in 2019. The CDC stated that in 2019, 15.8% of adults (18 years and older) had taken medication for their mental health during that year (2021d). During the period between August 19 and 31 of 2020, 19.4% of adults ages 18 and older reported taking prescription medication for mental health during those past 4 weeks (CDC, 2021d). The percentage peaked during December 9 - 21 of 2020 at 21.8% (CDC, 2021d).

Roughly 9.5% of adults ages 18 and older went to counseling or therapy with a mental health professional during 2019 but rates have changed since then (CDC, 2021d). The percent increases in receiving counseling or therapy were not as drastic when being compared to the increases in receiving prescription medication for mental health concerns.

Traumatic Experiences

United States

Many variables can put people at a greater risk for experiencing a mental illness. Some factors that impact mental health cannot be changed such as one’s biology, family, or community (MDH, 2019a). Other factors that can impact mental health include income levels, employment, relationships, and traumatic experiences. Not only do those factors have the potential to affect mental health, they also can lead to substance use disorders that often develop later in life (MDH, 2019a). The Centers for Disease Control and Prevention decided to do a study on individuals who have experienced a traumatic event or events within their first 18 years of life. The CDC-Kaiser Permanente Adverse Childhood Experience (ACE) Study is one of the largest studies of childhood abuse, neglect, and household challenges, and their impact on later life health and well-being. The results showed two-thirds of the study participants reported experiencing at least one Adverse Childhood Experience (ACE), and more than one in five reported having three or more ACEs (CDC, 2021b).

Minnesota

In 2019 about half of the 8th, 9th, and 11th grade population (48%) reported having one or more ACEs during their childhood (Minnesota Department of Education, 2019). The most frequently reported ACEs in Minnesota were living with someone who is depressed or has mental health issues (26%) and having a parent who is currently in jail or has been in jail (16%) (Minnesota Department of Education, 2019). The least frequently reported ACEs were having been sexually abused by a family member and/or a person outside of the family (6%) and living with someone who uses illegal drugs or abuses prescription drugs (5%) (Minnesota Department of Education, 2019).

Winona County

Winona County’s 8th, 9th, and 11th graders reported experiencing ACEs at a similar rate when being compared to the Minnesota data. An average of almost 49% reported experiencing one or more ACEs on the Minnesota Student Survey from 2019. On average, Winona County’s 8th, 9th, and 11th graders most frequently reported living with someone who is depressed or has a different health issue (23.3%), being regularly sworn at, insulted, or put down by a parent or other adult in their home (15.7%), and having a parent or other adult in their house hit, beat, kick, or physically hurt them in a different way (12.7%) (Minnesota Student Survey, 2019). The least frequently reported ACEs for the same grades were living with someone who uses illegal drugs or abuses prescription drugs (6%), and being tricked, pressured, or forced by a family member to do something sexual or have something sexual done to them (3.5%) (Minnesota Student Survey, 2019).

Smoking

United States

Smoking has continued to be a major health problem within the United States. According to the CDC, if smoking continues at the rate it is going among young adults, then, 5.6 million individuals under the age of 18 will die early from a smoking related illness (2020c). The increased use of electronic cigarettes has caused an increase in total tobacco use. About 23% of high schoolers reported using any kind of tobacco product, and of that 23%, 19.6% reported using e-cigarettes (CDC, 2020c). Data shows that adults are less likely to be current smokers than young adults. Males, however, are more likely to smoke than females. 15.5% of males have reported smoking and 12.7% of females have reported smoking (CDC, 2020b).

Minnesota

Smoking is one of Minnesota's major causes of preventable death and disease. A rising trend in Minnesota is the high rate of young adults who are current smokers. Of the age group 18–24-years, 14% are current smokers (MDH, 2018b). From the age group 25-44, 25% are current smokers (MDH, 2018b). Minnesota spends \$110.5 million each year on promoting tobacco products (MDH, 2018c). Among Winona County retailers, 3 in 5 sold flavored tobacco, 4 in 5 sold menthol tobacco, 1 in 5 sold at discounted prices, and 3 in 5 sold e-cigarettes (MDH, 2018c). As seen in both the United States and Minnesota, males are more likely to smoke than females. It has been reported that 16.8% of males are current smokers while 13.5% of females are current smokers in Minnesota (MDH, 2018b). Smoking rates also vary by race and ethnicity. The percentages for current smokers go as follows: Indian or Alaskan Native (49%); Black(21.4%); White (14.6%); Hispanic (13.6%); and Asian (9.9%) (MDH, 2018b).

Winona County

Roughly 19% of adults in Winona County are smokers (County Health Rankings, 2021). However, there is also a large population of youth smokers within Winona County. In 2018, 23% of 11th graders used any kind of tobacco and 16.6% of those students used E-cigarettes (MDH, 2018c). Vaping and E-cigarettes such as JUUL have become immensely popular for the youth. These E-cigarettes have developed innovative technologies that can absorb nicotine into the body more effectively and have extremely elevated levels of nicotine in them (MDH, 2021).

Poverty

United States

In the United States, individuals and families are considered living in poverty when they lack the economic resources necessary to experience a minimal living standard. In 2019 there was 10.5% of the US population living in poverty (United States Census Bureau, 2019).

Minnesota

In 2019, 9% of persons in Minnesota were living in poverty (United States Census Bureau, 2019). According to the Minnesota State Demographic Center, 529,000 Minnesotans, including 150,000 children under the age of 18, had family incomes below the poverty threshold in 2018. Poverty rates are highest among certain groups including those who are American Indian (34%), Black (27%), and Hispanic (19%) (Minnesota State Demographic Center, 2018). These numbers are three times higher than the poverty rates for Non-Hispanic White Minnesotans (Minnesota State Demographic Center, 2018).

Winona County

A total of 11.0% of the Winona County population was living in poverty in 2019, which is higher than the national poverty rate of 10.5% and Minnesota poverty rate of 9% mentioned above (United States Census Bureau, 2019). This poverty level is reflected in other data regarding the ability to afford meals. The following numbers are percentages representing Winona area students' answers to this question: "During the last 30 days, have you had to skip meals because your family did not have enough money to buy food?" There was a total of 7% of 5th graders, 10% of 8th graders, 12% of 9th graders, and 11% of 11th graders who responded: "Yes" (MDH, 2019c). Even larger percentages responded "Yes" to receiving free or reduced-price lunches at school; 43% of 5th graders, 43% of 8th graders, 31% of 9th graders, and 37% of 11th graders (MDH, 2019c).

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Appendix F: Community Health Needs Assessment Survey

WINONA COUNTY COMMUNITY HEALTH NEEDS ASSESSMENT



Correct marks



Incorrect marks

- Please use #2 pencil or blue or black pen to complete this survey.
- Do not use red pencil or ink.
- Do not use X's or check marks to indicate your responses.
- Fill response ovals completely with heavy, dark marks.

INSTRUCTION: Please give the survey to the adult (age 18 or over) in the household who most recently had a birthday.

1. In general, would you say that your health is:

- ☐ Excellent ☐ Very good ☐ Good ☐ Fair ☐ Poor

2. Have you ever been told by a doctor, nurse, or other health professional that you had any of the following health conditions?

	No	Yes	Yes, but only during pregnancy
a. High blood pressure or hypertension	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Diabetes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Overweight	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Cancer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Chronic lung disease (including COPD, chronic bronchitis or emphysema)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Heart trouble or angina	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Stroke or stroke-related health problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. High cholesterol or triglycerides	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Anxiety or panic attacks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Other mental health problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. Obesity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. Asthma	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Are you now trying to lose weight?

- ☐ Yes ☐ No

4. What kind of place do you usually go to when you are sick or need advice about your health?

(Mark ALL that apply)

- ☐ A doctor's office
☐ A hospital outpatient clinic
☐ Some other health center
☐ An emergency room
☐ An urgent care clinic
☐ Social Media
☐ Internet Search
☐ No usual place
☐ Some other place _____

5. During the past 12 months, was there a time when you thought you needed medical care but did not get it or delayed getting it?

- ☐ Yes ☐ No ► IF NO, GO TO QUESTION 7

6. Why did you not get or delay getting the medical care you thought you needed? (Mark ALL that apply)

- ☐ I could not get an appointment
☐ I did not think it was serious enough
☐ Transportation problems
☐ It cost too much
☐ I do not have insurance
☐ My insurance did not cover it
☐ Cancellation due to COVID-19
☐ I did not have access to telehealth or a virtual visit
☐ Other reason _____

7. During the past 12 months, was there a time when you thought you needed dental care but did not get it or delayed getting it?

- ☐ Yes ☐ No ► IF NO, GO TO QUESTION 9

8. Why did you postpone dental care?
(Mark ALL that apply)

- ☐ I could not get an appointment
- ☐ I did not think it was serious enough
- ☐ Too nervous or afraid
- ☐ Transportation problems
- ☐ It cost too much
- ☐ I do not have insurance
- ☐ My insurance did not cover it
- ☐ I did not know where to go
- ☐ Cancellation due to COVID-19
- ☐ I did not have access to telehealth or a virtual visit
- ☐ Other reason _____

9. During the past 12 months, was there a time when you wanted to talk with or seek help from a health professional about emotional problems such as stress, depression, excess worrying, troubling thoughts or emotional problems, but did not or delayed talking with someone?

- ☐ Yes ☐ No ► IF NO, GO TO QUESTION 11

10. Why did you not get or delay getting the care you thought you needed? (Mark ALL that apply)

- ☐ I could not get an appointment
- ☐ I did not think it was serious enough
- ☐ Too nervous or afraid
- ☐ Transportation problems
- ☐ It cost too much
- ☐ I do not have insurance
- ☐ My insurance did not cover it
- ☐ Cancellation due to COVID-19
- ☐ I did not have access to telehealth or a virtual visit
- ☐ Other reason _____

11. During the past 30 days, how often was your mental health not good? (Poor mental health includes stress, anxiety, and depression.)

- ☐ Never ☐ Most of the time
- ☐ Rarely ☐ Always
- ☐ Sometimes

17. Have you had...

	Within the past year	Within the past 2 years	Within the past 5 years	Five or more years ago	Never
a. ...your blood pressure checked?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. ...your blood cholesterol checked? <i>Blood cholesterol is a fatty substance found in the blood.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. ...any screening for colon cancer? <i>Examples include colonoscopy, stool test for blood (FIT Test), stool test for DNA (Cologuard), fecal occult blood test, proctoscopic exam, sigmoidoscopy and barium enema.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. Do you feel you have a person or group of people you can connect with and talk to?

- ☐ Yes ☐ No

13. How strongly do you agree or disagree with the statement, "I lead a purposeful and meaningful life."

- ☐ Somewhat agree ☐ Disagree
☐ Agree ☐ Somewhat disagree

14. In the past 12 months, have you provided UNPAID care to an adult relative, family member or friend aged 18 years or older to help them take care of themselves?

Unpaid care may include help with personal needs or household chores. It might be managing a person's finances, arranging for outside services, or visiting regularly to see how they are doing. This person may or may not live with you.

- ☐ Yes ☐ No

15. Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living? (Mark ALL that apply)

- ☐ Yes, it has kept me from medical appointments or from getting medications
- ☐ Yes, it has kept me from non-medical meetings, appointments, work and from getting things that I need
- ☐ No

16. How confident are you that you can control and manage most of your health problems? Select a number from 1 to 10, 1 = not confident at all, and 10 = very confident.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

FEMALES ONLY, MALES GO TO QUESTION 19

18. Have you...
- | | Within the past year | Within the past 2 years | Within the past 5 years | Five or more years ago | Never | Not applicable |
|---|-----------------------|-------------------------|-------------------------|------------------------|-----------------------|-----------------------|
| a. ...had a mammogram? A mammogram is an x-ray of each breast to look for breast cancer. Mark "not applicable" if you have had a double mastectomy. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. ...performed a breast self-exam? Mark "not applicable" if you have had a double mastectomy. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. ...had a Pap smear? A Pap smear is a test for cancer of the cervix. Mark "not applicable" if you have had a complete hysterectomy. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

MALES ONLY, FEMALES GO TO QUESTION 20

19. Have you had a prostate exam? A prostate exam can either be the prostate specific antigen blood test (PSA) or the digital rectal exam.

- ☐ Within the past year ☐ Within the past 5 years ☐ Never
☐ Within the past 2 years ☐ 5 or more years ago

20. Do you currently have any of the following types of health insurance?
(Please answer yes or no for each.)

- | | Yes | No |
|---|-----------------------|-----------------------|
| a. Health insurance or coverage through your or someone else's work | <input type="radio"/> | <input type="radio"/> |
| b. Health insurance or coverage bought directly by you or your family | <input type="radio"/> | <input type="radio"/> |
| c. Indian or Tribal Health Service | <input type="radio"/> | <input type="radio"/> |
| d. Medicare | <input type="radio"/> | <input type="radio"/> |
| e. Medicaid, Medical Assistance or PMAP | <input type="radio"/> | <input type="radio"/> |
| f. MinnesotaCare or BadgerCare | <input type="radio"/> | <input type="radio"/> |
| g. CHAMPUS, TRICARE or Veterans' benefits | <input type="radio"/> | <input type="radio"/> |
| h. Other health insurance or coverage | <input type="radio"/> | <input type="radio"/> |
| i. NO health insurance coverage | <input type="radio"/> | <input type="radio"/> |

21. A serving of fruit is one medium-sized piece of fruit, or a half cup of chopped, cut or canned fruit. How many servings of fruit did you have yesterday? (Do NOT include fruit juice.)

0 1 2 3 4 5 6 7 8 9 10 11 12+ servings

22. A serving of 100% fruit juice is 6 ounces. How many servings of fruit juice did you have yesterday?

0 1 2 3 4 5 6 7 8 9 10 11 12+ servings

23. A serving of vegetables—not including French fries—is one cup of salad greens or a half cup of vegetables. How many servings of vegetables did you have yesterday?

0 1 2 3 4 5 6 7 8 9 10 11 12+ servings

24. How often did you drink the following beverages in the past week?

- | | Never or less than 1 time per week | 1 time per week | 2-4 times per week | 5-6 times per week | 1 time per day | 2-3 times per day | 4 or more times per day |
|--|------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-------------------------|
| a. Fruit drinks (such as Snapple, flavored teas, Capri Sun, and Kool-Aid) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| b. Sports drinks (such as Gatorade, PowerAde); these drinks usually do not have caffeine. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| c. Regular soda or pop (include all kinds such as Coke, Pepsi, 7-Up, Sprite, root beer) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| d. Energy drinks (such as Rockstar, Red Bull, Monster, and Full Throttle); these drinks usually have caffeine. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

25. Please mark the extent to which you agree or disagree with each of these statements:

- a. Fruits and vegetables are difficult to prepare.
b. Fruits and vegetables cost a lot.

Strongly agree	Agree	Disagree	Strongly disagree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. During the past 12 months, have you used a community food shelf program?

- ☐ Yes ☐ No

27. During the past 12 months, how often did you worry that your food would run out before you had money to buy more?

- ☐ Often ☐ Sometimes ☐ Rarely ☐ Never

28. During the past 12 months, how often did you worry about not having enough money to pay your rent, mortgage or other housing costs?

- ☐ Often ☐ Sometimes ☐ Rarely ☐ Never

29. Do you own or rent your home?

- ☐ Own ☐ Rent ☐ Other arrangement

30. During the past 12 months, has the electric, gas, oil, or water company threatened to shut off services in your home?

- ☐ Yes ☐ No ☐ Already shut off

31. Think about the place where you live. Do you have problems with any of the following?

(Mark ALL that apply)

- ☐ Insect infestation
☐ Mold
☐ Lead paint or pipes
☐ Inadequate heat
☐ Oven or stove not working
☐ Smoke detectors missing or not working
☐ Water leaks
☐ None of the above

32. Does a partner, or anyone at home, hurt, hit or threaten you?

- ☐ Often ☐ Sometimes ☐ Rarely ☐ Never ☐ Not applicable

33. During the past 12 months, have you experienced any of the following situations?

If yes, have you felt you were discriminated against during the situation?

	Experienced the situation		Felt discriminated against	
a. Applied for a job?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes
b. Worked at a job?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes
c. Received medical care?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes
d. Looked for a different house or apartment?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes
e. Applied for a credit card, bank loan or a mortgage?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes
f. Shopped at a store or eaten at a restaurant?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes
g. Applied for social services or public assistance?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes
h. Dealt with the police?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes
i. Appeared in court?	<input type="radio"/> No	<input type="radio"/> Yes→	<input type="radio"/> No	<input type="radio"/> Yes

34. If you felt discriminated against in any of the above situations, what was the reason(s)?

(Mark ALL that apply)

- ☐ I did not experience any discrimination
☐ Race, color, ethnicity or country of origin
☐ Age
☐ Gender
☐ Sexual orientation
☐ Gender identity
☐ Disability
☐ Religion
☐ Being overweight or obese
☐ Income
☐ Level of education
☐ Other, please specify _____

35. Please indicate whether you use the following resources and facilities in your community.

	I use this	I do not use this	My community does not have this
a. Walking trails	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Bicycle paths, shared use paths, or bike lanes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Public swimming pools or water parks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Public recreation centers (e.g., Friendship Center, community centers)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Parks, playgrounds, or sports fields	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Schools, colleges, or universities that are open for public use for exercise or physical activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Library	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. A shopping mall for physical activity or walking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Health club, fitness center, or gym (YMCA, Curves, Bally's, Snap, LA Fitness, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Nearby waterways, such as creeks, rivers, and lakes for water-related activities (canoeing, swimming, kayaking, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

36. During the past 30 days, other than your regular job, did you participate in any physical activity or exercise such as running, golf, gardening or walking for exercise?

☐ Yes ☐ No

37. During an average week, other than your regular job, on how many days do you get at least 30 minutes of *moderate* physical activity? (Moderate activities cause only light sweating and a small increase in breathing or heart rate.)

☐ 0 days ☐ 1 day ☐ 2 days ☐ 3 days ☐ 4 days ☐ 5 days ☐ 6 days ☐ 7 days

38. During an average week, other than your regular job, on how many days do you get at least 20 minutes of *vigorous* physical activity? (Vigorous activities cause heavy sweating and a large increase in breathing and heart rate.)

☐ 0 days ☐ 1 day ☐ 2 days ☐ 3 days ☐ 4 days ☐ 5 days ☐ 6 days ☐ 7 days

39. How much of a problem are the following factors for you in terms of preventing you from being more physically active?

	Not a problem	A small problem	A big problem
a. Lack of time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Lack of programs, leaders, or facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Lack of support from family or friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. No one to exercise with	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. The cost of fitness programs, gym memberships, or admission fees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Public facilities (schools, sports fields, etc.) are not open or available at the times I want to use them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Not having sidewalks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Traffic problems (excessive speed, too much traffic)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Long-term illness, injury, or disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Fear of injury	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Distance I have to travel to fitness, community center, parks or walking trails	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. No safe place to exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. The weather	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. I don't like to exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o. Lack of self-discipline or willpower	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p. I don't know how to get started	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
q. Other reasons	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

40. During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor?

☐ Yes ☐ No ► IF NO, GO TO QUESTION 44

41. During the past 30 days, on how many days did you have at least one drink of any alcoholic beverage?

Days	
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

42. A drink is one can of beer, one glass of wine, or a drink with one shot of liquor. On the days that you drank during the past 30 days, about how many drinks did you drink on the average?

- | | | |
|--------------------------------|--------------------------------|---------------------------------|
| <input type="radio"/> 1 drink | <input type="radio"/> 5 drinks | <input type="radio"/> 9 drinks |
| <input type="radio"/> 2 drinks | <input type="radio"/> 6 drinks | <input type="radio"/> 10 drinks |
| <input type="radio"/> 3 drinks | <input type="radio"/> 7 drinks | or more |
| <input type="radio"/> 4 drinks | <input type="radio"/> 8 drinks | |

43. Considering all types of alcoholic beverages, how many times during the past 30 days did you have...?

FOR FEMALES:
4 or more drinks
on an occasion

FOR MALES:
5 or more drinks
on an occasion

Times	
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

Times	
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

44. During the past 12 months, did you ride in any of the following types of vehicles when you thought that the driver had too much to drink (including you driving while intoxicated)?

	Yes	No
a. Car or truck	<input type="radio"/>	<input type="radio"/>
b. Motorcycle	<input type="radio"/>	<input type="radio"/>
c. Boat	<input type="radio"/>	<input type="radio"/>
d. Snowmobile/ATV/Jet Ski	<input type="radio"/>	<input type="radio"/>

45. During the past 30 days, on how many days did you text, e-mail, or check social media while driving a car or other vehicle?

- | | |
|--|------------------------------------|
| <input type="radio"/> I did not drive a car or other vehicle during the past 30 days | <input type="radio"/> 6 - 9 days |
| <input type="radio"/> 0 days | <input type="radio"/> 10 - 19 days |
| <input type="radio"/> 1 - 2 days | <input type="radio"/> 20 - 29 days |
| <input type="radio"/> 3 - 5 days | <input type="radio"/> All 30 days |

46. During the past 30 days, which of the following substances have you used at least once for non-medical purposes? (Mark ALL that apply)

- ☐ Marijuana
☐ Pain relievers (Oxycodone, Vicodin, Acetaminophen with Codeine, Fentanyl, etc.)
☐ Tranquilizers or sedatives (Xanax, Ativan, Valium, Ketamine, etc.)
☐ Stimulants (methamphetamine or other amphetamines)
☐ Cocaine or crack
☐ Heroin
☐ Hallucinogens (Ecstasy, MDMA, PCP, etc.)
☐ Inhalants
☐ Other _____
☐ None

47. Have you smoked at least 100 cigarettes in your entire life? (100 cigarettes = 5 packs)

☐ Yes ☐ No IF NO, GO TO QUESTION 50

48. Do you now smoke cigarettes every day, some days, or not at all?

☐ Every day ► GO TO QUESTION 49
☐ Some days ► GO TO QUESTION 49
☐ Not at all ▼ GO TO QUESTION 50

49. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit?

☐ Yes ☐ No

50. During the past 12 months, have you used any of the following tobacco products?

	Yes	No
a. Cigars	<input type="radio"/>	<input type="radio"/>
b. Pipes	<input type="radio"/>	<input type="radio"/>
c. Snuff, snus or chewing tobacco	<input type="radio"/>	<input type="radio"/>
d. E-cigarettes, vaping pen, JUUL, etc.	<input type="radio"/>	<input type="radio"/>
e. A hookah water pipe	<input type="radio"/>	<input type="radio"/>
f. Any other type of tobacco product	<input type="radio"/>	<input type="radio"/>

51. During the past 7 days, how many days did anyone (including yourself) use one of the products listed in question 50 anywhere inside your home?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 Days

52. During the past 7 days, have you been in a car with someone (other than yourself) who was using one of the products listed in question 50?

☐ Yes ☐ No

53. Do you have access to the internet at this address using a computer, tablet, or cell phone?

☐ Yes ☐ No

54. Are there any barriers to internet use at this address?

(Mark ALL that apply)

- ☐ None
- ☐ Inadequate internet service (e.g., poor or intermittent service, not enough bandwidth)
- ☐ Internet service or equipment is too expensive
- ☐ Not enough devices for everyone in household (computers, tablets, etc.)
- ☐ Devices (computers, tablets, etc.) not adequate for needed use (work, school, virtual health care visit, etc.)
- ☐ Do not have the necessary skills to use the internet or device
- ☐ User accessibility issues
- ☐ No internet service available
- ☐ Other _____

55. Have you experienced any losses related to the COVID-19 pandemic?

(Mark ALL that apply)

- ☐ None
- ☐ Job (layoff, furlough, hours reduction)
- ☐ Income
- ☐ Housing
- ☐ Health Insurance
- ☐ Transportation
- ☐ Child care
- ☐ Regular school routine
- ☐ Social connectedness
- ☐ Social support
- ☐ Sense of wellness
- ☐ Recreation or entertainment
- ☐ Exercise opportunities
- ☐ Death of family member or friend
- ☐ Other _____

56. During the past 12 months, did you seriously think about killing yourself?

☐ Yes ☐ No

57. Your age group:

☐ 18-24 ☐ 35-44 ☐ 55-64 ☐ 75 or older
☐ 25-34 ☐ 45-54 ☐ 65-74

58. Are you:

☐ Male ☐ Prefer to Self Describe
☐ Female ☐ Prefer not to respond
☐ Non-binary

59. Which of the following best describes you?

- ☐ Heterosexual (straight)
- ☐ Gay or lesbian
- ☐ Bisexual
- ☐ Transgender
- ☐ I describe my sexual identity some other way
- ☐ I am not sure about my sexual identity (questioning)

60. What religious/spiritual community do you belong to?

☐ Christianity ☐ Agnostic
☐ Islam ☐ Atheist
☐ Hinduism ☐ Other _____
☐ Buddhism ☐ None
☐ Judaism

61. What language are you most comfortable speaking?

☐ English ☐ Hmong
☐ Spanish ☐ Other _____

62. Are you of Hispanic or Latino origin?

☐ Yes ☐ No

(Mark ALL that apply)

64. How tall are you without shoes?

65. Approximately how much do you weigh?

66. Including yourself, how many adults live in your household?

Number of adults age 18 or older (including yourself)

① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ or more

67. How many children live in your household?

Number of children age 5-17

① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ or more

Number of children age 0-4

① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ or more

69. Household income per year?

70. Are you currently... (Mark ALL that apply)

71. When you are at work, which of the following best describes what you do? (Mark only ONE)

- ☐ Mostly sitting or standing
- ☐ Mostly walking
- ☐ Mostly heavy labor or physically demanding work

***Thank you for
your participation!***

DO NOT WRITE IN THIS BOX

[illegible]

Appendix G: Survey Results

Community Health Needs Assessment Survey Results					
Winona County 2022 Adult Health Survey					
Demographic Characteristic		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
		1083	100	182	100
Gender	Male	531	49.1	74	41.1
	Female	545	50.3	98	54.4
	Non-binary	1	0.1	1	0.6
	Prefer to Self Describe	0	0.0	2	1.1
	Prefer not to respond	6	0.5	5	2.8
Sexual orientation	Heterosexual (straight)	1029	96.9	170	97.7
	Gay or lesbian	11	1.0	0	0
	Bisexual	14	1.3	1	0.6
	Transgender	0	0.0	0	0
	Describe some other way	4	0.4	1	1.2
	Not sure (questioning)	4	0.3	2	1.2
Religious/ Spiritual Community	Christianity	748	70.5	81	45.5
	Islam	4	0.4	4	2.2
	Hinduism	0	0.0	0	0
	Buddhism	4	0.4	5	2.8
	Judaism	0	0.0	0	0
	Agnostic	87	8.2	1	0.6
	Atheist	26	2.5	1	0.6
	Other	24	2.3	59	33.1
	None	168	15.8	27	15.2
Language most comfortable speaking	English	1070	98.9	14	7.8
	Spanish	5	0.4	113	63.1
	Hmong	2	0.2	43	24
	Other	5	0.5	9	5
Age Group	18-34	417	38.5	61	33.9
	35-44	132	12.2	49	27.2
	45-54	138	12.8	37	20.6
	55-64	173	16.0	21	11.7
	65-74	125	11.6	10	5.6
	75+	97	9.0	2	1.1

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
White/Of color	White	1061	97.9	42	25.6
	Not white	22	2.1	141	74.4
	Hispanic or Latino origin	8	These are unweighted counts since a respondent could choose more than one response.	117	These are unweighted counts since a respondent could choose more than one response.
	American Indian or Alaskan Native	10		10	
	Asian	6		6	
	Native Hawaiian or other Pacific Islander	1		0	
	Black or African American or African	10		7	
	Other	13		50	
Education	Did not complete 8th grade	17	1.6	50	28.3
	Did not complete high school	19	1.8	35	19.8
	High school diploma/GED	144	13.4	44	24.9
	Trade/Vocational school	101	9.5	11	6.2
	Some college	172	16.0	12	6.8
	Associate degree	123	11.5	11	6.2
	Bachelor's degree	323	30.2	12	6.8
	Graduate/professional degree	172	16.0	2	1.1
Income	<\$20,000	118	11.5	31	17.7
	\$20,000-\$34,999	109	10.6	49	28
	\$35,000-\$49,999	115	11.2	74	42.3
	\$50,000-\$74,999	199	19.3	15	8.6
	\$75,000-\$99,999	194	18.9	4	2.3
	\$100,000+	293	28.5	2	1.1

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
Employment status	Employed	713	66.4	127	69.4
These do not add up to 100% because respondents could choose more than one status.	Self-employed	81	7.6	1	0.6
	Unemployed	26	2.4	11	6
	Homemaker/ stay at home parent	36	3.4	19	10.4
	Student	59	5.5	6	3.3
	Retired	221	20.6	4	2.2
	Unable to work	40	3.7	15	8.2
Winona County 2022 Survey Results					
1. In general, would you say that your health is:					
Poor		16	1.5	7	3.9
Fair		80	7.5	37	20.6
Good		390	36.6	62	34.4
Very Good		469	43.9	42	23.3
Excellent		113	10.6	32	17.8
2. Have you <u>ever</u> been told by a doctor, nurse, or other health professional that you had any of the following health conditions? (indicated yes)					
a. High blood pressure or hypertension		290	27	30	16.6
b. Diabetes		119	11.1	27	15.1
c. Overweight		387	35.9	33	18.4
d. Cancer		104	9.7	3	1.7
e. Chronic lung disease (including COPD, chronic bronchitis or		39	3.7	1	0.6
f. Heart trouble or angina		77	7.1	6	3.4
g. Stroke or stroke-related health problems		35	3.3	5	2.8
h. High cholesterol or triglycerides		268	24.9	23	12.9
i. Depression		301	28	33	18.6
j. Anxiety or panic attacks		329	30.5	26	14.5
k. Other mental health problems		105	9.8	7	3.9
l. Obesity		145	13.5	12	6.7
m. Asthma		162	15	11	6.2
3. Are you trying to lose weight?					
Yes		506	47	65	37.6
No		570	53	108	62.4

	Weighted Data		Individuals Needing Translation Services	
	Frequency	Percent	Frequency	Percent
4. What kind of place do you usually go to when you are sick or need advice about your health? (Mark ALL that apply)				
A doctor's office	799	73.8	133	73.9
A hospital outpatient clinic	167	15.4	38	21
Some other health center	30	2.8	44	24.3
An emergency room	107	9.9	84	46.4
An urgent care clinic	431	39.8	74	40.9
Social media	12	1.1	15	8.3
Internet search	354	32.7	18	9.9
No usual place	77	7.2	13	7.2
Some other place	37	3.4	3	1.7
5. During the past 12 months, was there a time when you thought you needed medical care but did not get it or delayed getting it?				
Yes	291	27	35	19.3
No	788	73	146	80.7
6. Why did you not get or delay getting the medical care you thought you needed (Mark ALL that apply)				
I could not get an appointment	37	12.8	11	6.1
I did not think it was serious enough	122	42	8	4.4
Transportation problems	8	2.6	3	1.7
It cost too much	151	51.7	19	10.5
I do not have insurance	17	5.8	17	9.4
My insurance did not cover it	27	9.4	2	1.1
Cancellation due to COVID-19	28	9.5	1	0.6
I did not have access to telehealth or a virtual visit	14	4.8	1	0.6
Other reason	72	24.7	3	1.7
7. During the past 12 months, was there a time when you thought you needed dental care but did not get it or delayed getting it?				
Yes	264	24.5	66	36.7
No	812	75.5	114	63.3
8. Why did you postpone dental care (Mark ALL that apply)				
I could not get an appointment	16	6	30	16.7
I did not think it was serious enough	85	32.1	8	4.4
Too nervous or afraid	58	22.1	4	2.2
Transportation problems	8	3.2	4	2.2
It cost too much	134	50.8	30	16.7
I do not have insurance	52	19.8	18	10
My insurance did not cover it	43	16.4	8	4.4
I did not know where to go	48	18	14	7.8
Cancellation due to COVID-19	25	9.6	1	0.6
I did not have access to telehealth or a virtual visit	2	0.7	2	1.1
Other reason	49	18.7	7	3.9

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
9. During the <u>past 12 months</u> , was there a time when you wanted to talk with or seek help from a health professional about emotional problems such as stress, depression, excess worrying, troubling thoughts or emotional problems, but did not or delayed talking to someone?					
Yes		227	21.1	24	13.4
No		847	78.9	155	86.6
10. Why did you not get or delay getting the care you thought you needed? (Mark ALL that apply)					
I could not get an appointment		29	12.7	13	7.2
I did not think it was serious enough		74	32.8	3	1.7
Too nervous or afraid		83	36.6	3	1.7
Transportation problems		10	4.6	3	1.7
It cost too much		115	50.9	9	5
I do not have insurance		16	6.9	10	5.6
My insurance did not cover it		30	13.1	1	0.6
Cancellation due to COVID-19		13	5.8	3	1.7
I did not have access to telehealth or a virtual visit		1	0.4	2	1.1
Other reason		48	21.1		
11. During the <u>past 30 days</u> , how often was your mental health not good? (Poor mental health includes stress, anxiety, and depression.)					
Never		291	27.5	87	48.6
Rarely		308	29.1	31	17.3
Sometimes		316	29.9	42	23.5
Most of the time		109	10.3	13	7.3
Always		33	3.2	6	3.4
12. Do you feel you have a person or group of people you can connect with and talk to?					
Yes		920	90.8	150	86.2
No		94	9.2	24	13.8
13. How strongly do you agree or disagree with the statement, "I lead a purposeful and meaningful life."					
Somewhat agree		209	20.7	36	21.4
Agree		696	68.8	117	69.6
Disagree		64	6.4	3	1.8
Somewhat disagree		42	4.2	12	7.1

14. In the past 12 months, have you provided UNPAID care to an adult relative, family member or friend aged 18 years or older to help them take care of themselves? <i>Unpaid care may include help with personal needs or household chores. It might be managing a person's finances, arranging for outside services, or visiting regularly to see how they are doing. This person may or may not live with you.</i>				
Yes	247	24.4	51	29.8
No	767	75.6	120	70.2
15. Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living? (Mark ALL that apply)				
Yes, it has kept me from medical appointments or from getting	13	1.2	16	9.4
Yes, it has kept me from non-medical meetings, appointments, work and from getting things that I	15	1.4	19	11.1
No	994	91.8	136	79.5
16. How confident are you that you can control and manage most of your health problems?				
0 - Not confident at all	1	0.1	2	1.2
1	1	0.1	0	0
2	4	0.4	4	2.4
3	23	2.3	4	2.4
4	8	0.8	5	3
5	35	3.4	21	12.6
6	60	5.9	7	4.2
7	81	8	16	9.6
8	204	20.2	24	14.4
9	223	22.1	31	18.6
10 - very confident	370	36.6	53	31.7
17. Have you had...				
a. ...your blood pressure checked?				
Within the past year	881	83.3	122	68.2
Within the past 2 years	129	12.2	29	16.2
Within the past 5 years	12	1.2	6	3.4
Five or more years ago	29	2.8	4	2.2
Never	6	0.6	18	10.1
b. ...your blood cholesterol checked? <i>Blood cholesterol is a fatty substance found in the blood.</i>				
Within the past year	564	54.4	103	57.2
Within the past 2 years	204	19.7	26	14.4
Within the past 5 years	89	8.6	10	5.6
Five or more years ago	58	5.6	7	3.9
Never	122	11.8	34	18.9

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
c. ...any screening for colon cancer? Examples include colonoscopy, stool test for blood (FIT Test), stool test for DNA (Cologuard), fecal occult blood test, proctoscopic exam, sigmoidoscopy and barium enema.					
Within the past year		151	14.5	32	18
Within the past 2 years		74	7	16	9
Within the past 5 years		136	13	5	2.8
Five or more years ago		101	9.7	7	3.9
Never		583	55.8	118	66.3
18. FEMALES ONLY: Have you...					
a. ...had a mammogram? A mammogram is an x-ray of each breast to look for breast cancer. Mark "not applicable" if you have had a double mastectomy.					
Within the past year		203	37.9	38	34.9
Within the past 2 years		52	9.6	13	11.9
Within the past 5 years		27	5	6	5.5
Five or more years ago		30	5.6	5	4.6
Never		213	39.8	29	26.6
Not applicable		11	2	18	16.5
b. ...performed a breast self-exam? Mark "not applicable" if you have had a double mastectomy.					
Within the past year		347	66.6	56	50.9
Within the past 2 years		35	6.6	15	13.6
Within the past 5 years		28	5.3	3	2.7
Five or more years ago		20	3.8	2	1.8
Never		82	15.7	28	25.5
Not applicable		10	1.9	6	5.5
c. ...had a Pap smear? A Pap smear is a test for cancer of the cervix. Mark "not applicable" if you have had a complete hysterectomy.					
Within the past year		161	29.9	46	42.2
Within the past 2 years		132	24.6	28	25.7
Within the past 5 years		99	18.4	5	4.6
Five or more years ago		56	10.4	5	4.6
Never		33	6.1	19	17.4
Not applicable		56	10.5	6	5.5
19. MALES ONLY: Have you had a prostate exam? A prostate exam can either be the prostate specific antigen blood test (PSA) or the digital rectal exam.					
Within the past year		87	16.9	4	4.8
Within the past 2 years		33	6.3	4	4.8
Within the past 5 years		47	9.1	1	1.2
Five or more years ago		21	4.1	2	2.4
Never		330	63.7	72	86.8

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
20. Current insurance status.					
Currently uninsured		32	3.2	18	11
Currently insured		963	96.8	145	89
21. & 22. Number of fruits and fruit juice servings yesterday.					
0 servings		173	16.5	72	19.9
1-2 servings		496	47.4	159	44
3-4 servings		257	24.5	84	23.3
5 or more servings		121	11.6	46	12.7
23. Number of vegetables servings yesterday.					
0 servings		164	15.5	12	6.8
1-2 servings		558	53	93	52.5
3-4 servings		270	25.7	50	28.3
5 or more servings		60	5.7	22	12.4
24. How often did you drink the following beverages in the past week?					
<i>a. Fruit drinks (such as Snapple, flavored teas, Capri Sun, and Kool-Aid)</i>					
Never or less than 1 time per week		805	76.7	105	57.7
1 time per week		110	10.5	33	18.1
2-4 times per week		86	8.2	27	14.5
5-6 times per week		15	1.4	3	1.7
1 time per day		15	1.4	3	1.7
2-3 times per day		18	1.7	3	1.7
4 or more times per day		2	0.2	8	4.4
<i>b. Sports drinks (such as Gatorade, PowerAde); these drinks usually do not have caffeine</i>					
Never or less than 1 time per week		829	78.8	95	53.1
1 time per week		114	10.9	36	20.1
2-4 times per week		67	6.4	24	13.4
5-6 times per week		24	2.3	15	8.4
1 time per day		11	1	3	1.7
2-3 times per day		4	0.4	6	3.4
4 or more times per day		3	0.3	0	0
<i>c. Regular soda or pop (include all kinds such as Coke, Pepsi, 7-Up, Sprite, root beer)</i>					
Never or less than 1 time per week		514	49.1	53	29.3
1 time per week		150	14.3	48	26.5
2-4 times per week		212	20.3	40	22.1
5-6 times per week		32	3	20	11.1
1 time per day		79	7.5	9	5
2-3 times per day		50	4.8	3	1.7
4 or more times per day		10	0.9	8	4.4

	Weighted Data		Individuals Needing Translation Services	
	Frequency	Percent	Frequency	Percent
<i>d. Energy drinks (such a Rockstar, Red Bull, Monster, and Full Throttle); these drinks usually have caffeine</i>				
Never or less than 1 time per week	922	88.6	133	73.1
1 time per week	38	3.7	19	10.4
2-4 times per week	25	2.4	9	5
5-6 times per week	25	2.4	6	3.3
1 time per day	28	2.7	6	3.3
2-3 times per day	0	0	2	1.1
4 or more times per day	1	0.1	7	3.9
25. Please mark the extent to which you agree or disagree with each of these statements:				
<i>a. Fruits and vegetables are difficult to prepare.</i>				
Strongly agree	4	0.4	32	18
Agree	104	9.8	30	16.9
Disagree	622	58.3	68	38.2
Strongly disagree	337	31.6	48	27
<i>b. Fruits and vegetables cost a lot.</i>				
Strongly agree	145	13.7	62	35.4
Agree	490	46.4	49	28
Disagree	325	30.7	31	17.7
Strongly disagree	97	9.2	33	18.9
26. During the past 12 months, have you used a community food shelf program?				
Yes	35	3.3	42	23.5
No	1044	96.7	137	76.5
27. During the past 12 months, how often did you worry that your food would run out before you had money to buy more?				
Often	13	1.2	17	9.4
Sometimes	69	6.4	49	27.1
Rarely	91	8.4	39	21.6
Never	905	83.9	76	42
28. During the past 12 months, how often did you worry about not having enough money to pay your rent, mortgage or other housing costs?				
Often	60	5.6	14	7.8
Sometimes	70	6.5	60	33.3
Rarely	156	14.5	41	22.8
Never	793	73.4	65	36.1
29. Do you own or rent your home?				
Own	884	82.3	54	74
Rent	129	12	19	26
Other arrangement	61	5.7	0	0

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
30. During the past 12 months, has the electric, gas, oil, or water company threatened to shut off services in your home?					
Yes		39	3.6	5	2.8
No		1039	96.3	174	96.1
Already shut off		1	0.1	2	1.1
31. Think about the place where you live. Do you have problems with any of the following? (Mark ALL that apply)					
Insect infestation		23	2.1	7	3.9
Mold		72	6.6	9	5
Lead paint or pipes		37	3.4	3	1.7
Inadequate heat		46	4.3	12	6.7
Over or stove not working		24	2.2	9	5
Smoke detectors missing or not work		21	1.9	10	5.6
Water leaks		69	6.3	6	3.4
None of the above		858	79.3	151	84.4
32. Does a partner, or anyone at home, hurt, hit or threaten you?					
Often		0	0	3	1.9
Sometimes		19	1.8	3	1.9
Rarely		26	2.4	0	0
Never		899	83.6	136	87.2
Not applicable		132	12.2	14	9
33. During the past 12 months, have you experienced any of the following situations?					
a. Applied for a job?		241	22.9	27	14.9
b. Worked at a job?		729	69.4	78	43.1
c. Received medical care?		737	70.2	77	43
d. Looked for a different house or apartment?		170	16.2	23	12.9
e. Applied for a credit card, bank loan or mortgage?		260	24.8	22	12.3
f. Shopped at a store or eaten at a restaurant?		950	90.1	96	53.3
g. Applied for social services or public assistance?		79	7.5	41	23
h. Dealt with the police?		6	9	10	5.6
i. Appeared in court?		23	2.2	3	1.7
If yes, have you felt discriminated against during the situation?					
a. Applied for a job?		14	6.1	8	4.4
b. Worked at a job?		85	12	18	9.9
c. Received medical care?		22	3.2	12	6.7
d. Looked for a different house or apartment?		6	3.5	5	2.8

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
e. Applied for a credit card, bank		5	2	4	2.2
f. Shopped at a store or eaten at a		26	3	13	7.2
g. Applied for social services or		8	10.6	10	5.6
h. Dealt with the police?		7	7.4	5	2.8
i. Appeared in court?		4	15.8	1	0.6
34. If you felt discriminated against in any of the above situations, what was the reason(s)? (Mark ALL that apply)					
I did not experience any discrimination		631	80.9	115	68.9
Race, color, ethnicity or country of origin		20	2.6	39	23.4
Age		46	5.9	2	1.2
Gender		45	5.8	2	1.2
Sexual orientation		5	0.6	0	0
Gender identity		1	0.1	0	0
Disability		5	0.6	2	1.2
Religion		9	1.1	0	0
Being overweight or obese		10	1.3	2	1.2
Income		21	2.7	3	1.8
Level of education		10	1.3	6	3.6
Other		50	6.4	8	4.8
35. Please indicate whether you use the following resources and facilities in your community.					
<i>a. Walking trails</i>					
I use this		763	70.4	116	74.8
I do not use this		256	23.6	39	25.2
My community does not have this		48	0	0	0
<i>b. Bicycle paths, shared used paths, or bike lanes</i>					
I use this		630	58.2	79	44.6
I do not use this		379	35	92	52
My community does not have this		55	5	6	3.4
<i>c. Public swimming pools or water parks</i>					
I use this		274	25.3	61	34.5
I do not use this		681	62.9	111	62.7
My community does not have this		91	8.4	5	2.8
<i>d. Public recreation centers (e.g., Friendship Center, community centers)</i>					
I use this		296	27.9	55	31.3
I do not use this		733	69.2	116	65.9
My community does not have this		31	2.9	5	2.8

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
e. Parks, playgrounds, or sports fields					
I use this		759	70.1	90	50.3
I do not use this		286	26.4	84	46.9
My community does not have this		13	1.2	5	2.8
f. Schools, colleges, or universities that are open for public use for exercise or physical activity					
I use this		222	20.5	44	24.7
I do not use this		767	70.9	127	71.4
My community does not have this		72	6.6	7	3.9
g. Library					
I use this		455	42.7	34	20
I do not use this		550	51.6	133	78.2
My community does not have this		60	5.7	3	1.8
h. A shopping mall for physical activity or walking					
I use this		103	9.7	56	31.8
I do not use this		828	78.2	109	61.9
My community does not have this		128	12.1	11	6.3
i. Health club, fitness center, or gym (YMCA, Curves, Bally's, Snap, LA Fitness, etc.)					
I use this		270	25.4	41	23
I do not use this		716	67.5	127	71.4
My community does not have this		75	7.1	10	5.6
j. Nearby waterways such as creeks, rivers and lakes for water-related activities (canoeing, swimming, kayaking, etc.)					
I use this		595	55.9	53	29.4
I do not use this		408	38.3	118	65.6
My community does not have this		63	5.9	9	5
36. During the past 30 days , other than your regular job, did you participate in any physical activity or exercise such as running, golf, gardening or walking for exercise?					
Yes		748	70.8	85	47.2
No		309	29.2	95	52.8
38. During an average week , other than your regular job, on how many days did you get at least 20 minutes of vigorous physical activity? (Vigorous activities cause heavy sweating and large increase in breathing and heart rate.)					
0 days		152	14.2	94	52.2
1-4 days		628	58.6	47	26.1
5-7 days		291	27.2	39	21.7

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
39. How much of a problem are the following factors for <u>you</u> in terms of prevention you from being more physically active?					
a. Lack of time					
Not a problem		411	38.9	91	39.9
A small problem		352	33.3	100	43.9
A big problem		294	27.8	37	16.2
b. Lack of programs, leaders, or facilities					
Not a problem		793	76.7	108	65.5
A small problem		162	15.7	49	29.7
A big problem		79	7.6	8	4.9
c. Lack of support from family or friends					
Not a problem		887	84.7	112	67.1
A small problem		130	12.4	45	27
A big problem		30	2.9	10	6
d. No one to exercise with					
Not a problem		698	66.6	108	62.4
A small problem		285	27.2	48	27.8
A big problem		66	6.3	17	9.8
e. The cost of fitness programs, gym memberships, or admission fees					
Not a problem		553	52.7	89	50.6
A small problem		320	30.5	45	25.6
A big problem		177	16.8	42	23.9
f. Public facilities (schools, sports fields, etc.) are not open or available at the times I want to use them					
Not a problem		820	78.2	113	65.3
A small problem		161	15.3	30	17.3
A big problem		68	6.5	30	17.3
g. Not having sidewalks					
Not a problem		862	81.8	19	22.6
A small problem		119	11.3	27	32.1
A big problem		73	6.9	38	45.2
h. Traffic problems (excessive speed, too much traffic)					
Not a problem		860	82	122	80.3
A small problem		146	13.9	30	19.7
A big problem		43	4.1	25	16.5
i. Long-term illness, injury, or disability					
Not a problem		852	80.5	124	71.3
A small problem		122	11.5	34	19.5
A big problem		85	8.1	16	9.2

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
j. Fear of injury					
Not a problem		911	86.5	118	67.8
A small problem		110	10.5	39	22.4
A big problem		32	3.1	17	9.8
k. Distance I have to travel to fitness, community center, parks or walking trails					
Not a problem		834	79.2	124	71.3
A small problem		191	18.1	33	19
A big problem		28	2.7	17	9.8
l. No safe place to exercise					
Not a problem		988	94.2	125	71.8
A small problem		51	4.9	35	20.1
A big problem		9	0.9	14	8.1
m. The weather					
Not a problem		411	39	86	48.6
A small problem		462	43.9	55	31.1
A big problem		180	17.1	36	20.3
n. I don't like to exercise					
Not a problem		605	57.5	106	60.9
A small problem		321	30.5	48	27.6
A big problem		125	11.9	20	11.5
o. Lack of self-discipline or willpower					
Not a problem		412	39.2	91	52.6
A small problem		435	41.3	47	27.2
A big problem		205	19.5	35	20.2
p. I don't know how to get started					
Not a problem		805	74.3	110	63.6
A small problem		198	18.2	39	22.5
A big problem		47	4.4	24	13.9
q. Other reasons					
Not a problem		717	84.4	117	69.6
A small problem		86	10.1	32	19.1
A big problem		47	5.5	19	11.3
41. During the past 30 days, on how many days did you have at least one drink of any alcoholic beverage?					
Yes		717	66.4	59	33.3
No		364	33.6	118	66.7
42. Heavy drinking (For men, 15 or more drinks per week; for women, 8 or more drinks per week)					
No drinking or not heavy		979	90.6	110	60.2
Heavy drinking		101	9.4	72	39.2

	Weighted Data		Individuals Needing Translation Services	
	Frequency	Percent	Frequency	Percent
43. Binge drinking <i>(For men, 5 or more drinks on an occasion; for women, 4 or more drinks on an occasion)</i>				
No drinking or not binge	845	78.2	113	61
Any binge drinking	235	21.8	69	39
44. During the past 12 months, did you ride in any of the following types of vehicles when you thought that the driver had too much to drink (including you)				
<i>Car or truck</i>				
Yes	45	4.8	7	4.8
No	898	95.2	138	95.2
<i>Motorcycle</i>				
Yes	2	0.2	0	0
No	924	99.8	145	100
<i>Boat</i>				
Yes	11	1.1	0	0
No	917	98.9	145	100
<i>Snowmobile/ATV/Jet Ski</i>				
Yes	5	0.5	0	0
No	923	99.5	145	100
45. During the past 30 days, on how many days did you text, e-mail, or check social media while driving a car or other vehicle?				
I did not drive a car during the past 30 days	46	4.3	48	27.6
0 days	643	60.3	79	45.4
1-2 days	181	17	15	8.6
3-5 days	76	7.1	10	5.8
6-9 days	45	4.2	2	1.2
10-19 days	52	4.9	3	1.7
20-29 days	14	1.3	7	4
All 30 days	11	1	10	5.8
46. During the past 30 days, which of the following substances have you used at least once for non-medical purposes? <i>(Mark ALL that apply)</i>				
Marijuana	103	9.5	4	2.2
Pain relievers (Oxycodone, Vicodin,	51	4.7	1	0.6
Tranquilizers or sedatives (Xanax, Ativan, Valium, Ketamine, etc.)	13	1.2	0	0
Stimulants (methamphetamine or other amphetamines)	10	0.9	0	0
Cocaine or crack	5	0.5	0	0
Heroin	5	0.5	0	0
Hallucinogens (Ecstasy, MDMA, PCP, etc.)	7	0.7	0	0
Inhalants	8	0.8	0	0
Other	18	1.7	0	0
None	911	84.2	175	97.2

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
47. Smoking status					
Current smoker		106	9.8	20	10.8
Former smoker		249	23.1	12	6.5
Never smoked		723	67.1	153	82.7
49. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit?					
Yes		55	53	8	42.1
No		49	47	11	57.9
50. During the past 12 months, have you used any of the following tobacco products?					
a. Cigars		36	3.6	10	6.9
b. Pipes		4	0.4	0	0
c. Snuff, snus or chewing tobacco		58	5.7	0	0
d. E-cigarettes, vaping pen, JUUL, etc.		69	6.8	3	2.1
e. A hookah water pipe		3	0.3	3	2.1
f. Any other type of tobacco product		42	4.1	1	0.7
		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
51. During the past 7 days, how many days did anyone (including yourself) use one of the products listed in question 50 anywhere inside your home?					
0 days		922	89.1	102	92.7
1 day		30	2.9	3	2.7
2 days		6	0.6	2	1.8
3 days		7	0.7	1	0.9
4 days		1	0.1	0	0
5 days		6	0.6	0	0
6 days		3	0.2	0	0
7 days		60	5.8	2	1.8
52. During the past 7 days, have you been in a car with someone (other than yourself) who was using one of the products listed in question 50?					
Yes		38	3.6	8	7.1
No		1042	96.4	104	92.9
53. Do you have access to the internet at this address using a computer, tablet, or cell phone?					
Yes		1016	95.4	162	89.5
No		49	4.6	19	10.5

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
54. Are there any barriers to internet use at this address? <i>(Mark ALL that apply)</i>					
None		888	82	133	74.7
Inadequate internet service (e.g., peer or intermittent service, not enough bandwidth)		97	8.9	162	89.5
Internet service or equipment is too expensive		59	5.5	20	11.2
Not enough devices for everyone in the household (computers, tablets, etc.)		6	0.6	7	3.9
Devices (computers, tablets, etc.) not adequate for needed use (work, school, virtual health care visit, etc.)		7	0.6	6	3.4
Do not have necessary skills to use the internet or device		35	3.2	6	3.4
User accessibility issues		5	0.4	2	1.1
No internet service available		8	0.7	0	0
Other		10	1	0	0
55. Have you experienced any losses related to the COVID-19 pandemic? <i>(Mark ALL that apply)</i>					
None		372	34.8	67	37
Job (layoff, furlough, hours reduction)		195	18.2	32	17.7
Income		194	18.1	42	23.2
Housing		4	0.4	18	9.9
Health Insurance		12	1.1	8	4.4
Transportation		8	0.8	7	3.9
Child care		106	9.9	13	7.2
Regular school routine		170	15.9	25	13.8
Social connectedness		475	44.4	40	22.1
Social support		152	14.2	25	13.8
Sense of wellness		255	23.8	29	16
Recreation or entertainment		426	39.8	19	10.5
Exercise opportunities		214	20	6	3.3
Death of family member or friend		182	17	50	27.6
Other		23	2.2	1	0.6
56. During the past 12 months, did you seriously think about killing yourself?					
Yes		38	3.6	5	2.8
No		1042	96.4	173	97.2

		Weighted Data		Individuals Needing Translation Services	
		Frequency	Percent	Frequency	Percent
64. & 65. Weight status according to BMI					
Not overweight		357	33.9	41	22.5
Overweight but not obese		355	33.7	80	44
Obese		341	32.4	57	31.3
71. When you are at work, which of the following best describes what you do? (Mark only ONE)					
Mostly sitting or standing		471	60.6	83	61.9
Mostly walking		198	25.5	30	22.4
Mostly heavy labor or physically demanding work		108	13.9	21	15.7