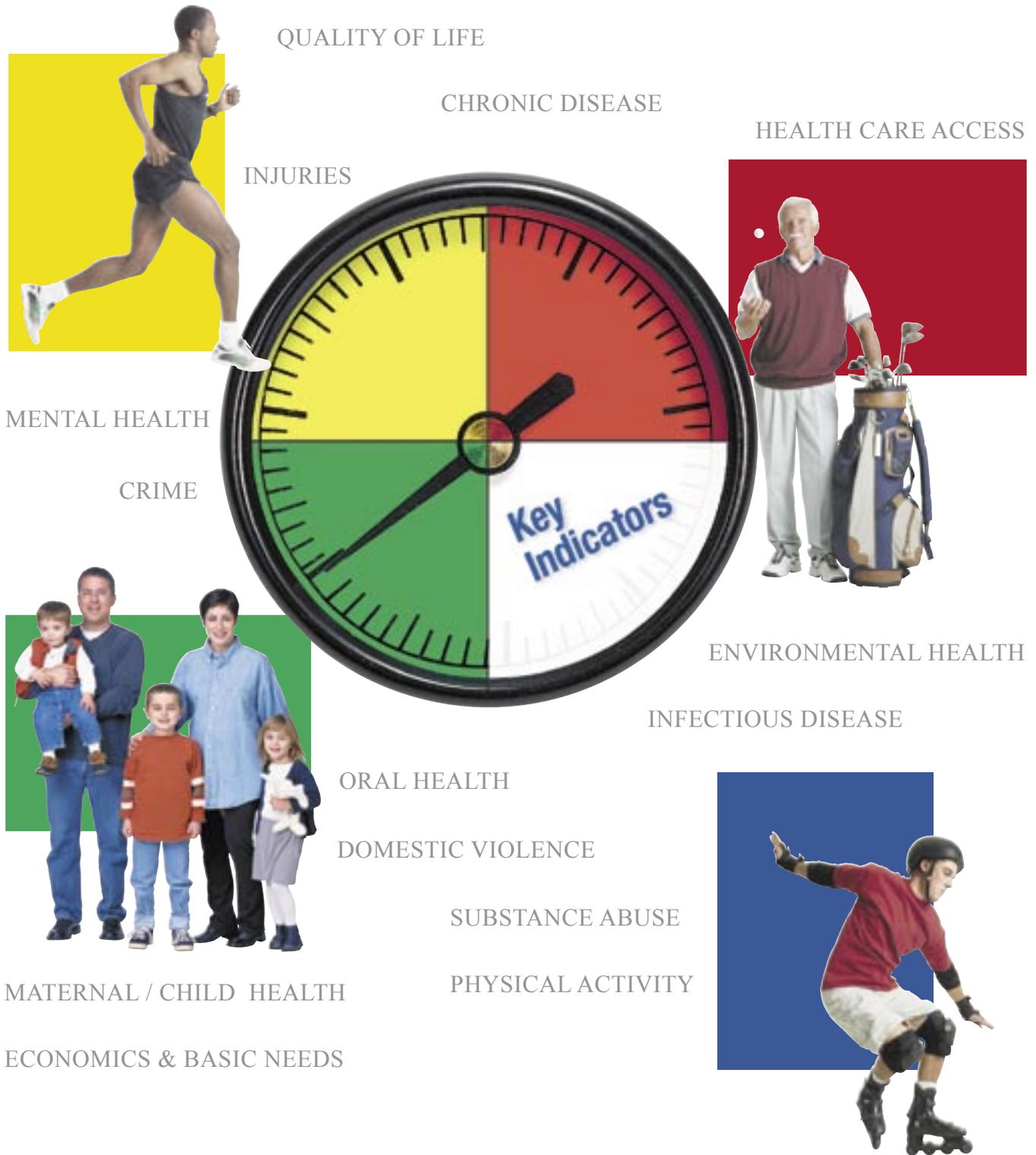


The Health of Island County

Key Indicators Update 2005



Island County Health Department

Dear Neighbors,

Island County Community Health Advisory Board (CHAB) is pleased to present to you our latest publication, ***The Health of Island County: Key Indicators Update 2005***.

CHAB's role in our community is to assist the Island County Board of Health and Island County Health Department in decision-making and priority setting. Through our work we hope to help increase public understanding of the relationship between regulation and the prevention of disease; increase public support for health programs; increase access to local non-governmental resources; and engage a broad range of community partners in addressing priority health issues.

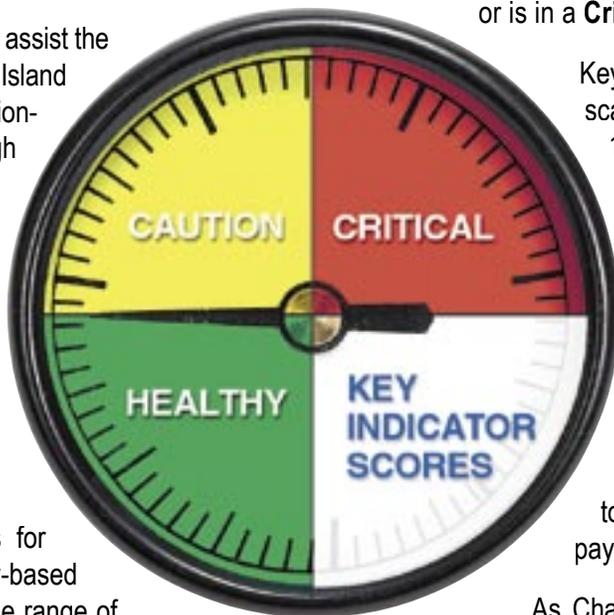
The expectations and objectives for CHAB are to implement community-based health assessments; measure a wide range of health indicators; develop policy recommendations based upon data & community input; develop new relationships with the public; facilitate community partnerships; and educate staff and community about health issues having an impact on Island County.

The Island County Board of Health appoints CHAB's 21 community members and eight student members, selected to represent various regions, systems, agencies, and population subgroups. Over the past three years they developed a comprehensive report about the health of Island County; examined and set priority health issues; and participated in Health Action Teams. Priority health issues were identified as *Early Childhood Education & Support, Mental Health, Preventive Health, Chronic Disease & Physical Activity*.

The assessment work needed to publish ***The Health of Island County*** was substantial. We have limited resources and wish to spend time and efforts on the priority health issues. To help streamline our data assessment process, we selected several key indicators in each of the health areas.

A Key Indicator Task Force examined and selected indicators for each of the thirteen modules based on a number of factors. Some are ones we want to monitor; some are ones in which we are doing well and want the community to know about; some are areas of concern; and all are representative of Island County's health and worth monitoring.

Once selected, the key indicators were scored, and a composite score was given that showed whether an area of concern is **Healthy (Green)**, merited **Caution (Yellow)**, or is in a **Critical (Red)** range.



Key indicators were scored on three scales:

- 1) how we compare to the state and the nation;
- 2) data trends, using 1996 as a baseline when possible; and
- 3) how we are meeting *Healthy People 2010* goals or some other national goal or our own goal for our community. As you can see, there are some areas in which we are doing really well, some we need to monitor, and some we really need to pay attention to and take action on.

As Chair of the CHAB Key Indicators Task Force, I want to thank the CHAB members who volunteered their time to this work: David Macys, Mary Anderson, Marie Piper, Kathryn Stephens and Judy Moore.

Certainly, there is no better place to live than Island County. Government bodies, businesses, schools, healthcare providers, non-profit organizations, community and neighborhood groups, service clubs, faith and cultural organizations abound, all flowing with the creativity, heart and spirit of the people who live here. Healthy living is one key aspect in maintaining and enhancing regional vitality.

We hope this document will help focus limited resources, instigate new partnerships, and create a county where people flourish. We wish for communities in which people can live healthy, productive lives; communities where people work together to positively change areas of concern.

We look forward to working with you, our neighbors, in preserving, sustaining, and improving the quality of life in Island County.

Sincerely,

A handwritten signature in blue ink that reads 'Sharon Little'.

Sharon Little, Chair, CHAB Key Indicator Task Force

What Are Key Indicators?

This report is primarily based on thirteen categories of health indicators. These categories were developed by a team of community members and staff of the Island County Health Department. Our goal in selecting key indicators was to select indicators that are reflective of the health category. In some cases, individual behaviors impact health outcomes such as smoking, alcohol use, and using precautions to limit injuries, and even death. In other cases societal constructs might encourage or discourage certain healthy behaviors. Poverty for example, is often correlated with poorer general health, lower education, and fewer societal opportunities.

We are very broad in our concept of health, as you will see in the selection of indicators, such as poverty or early childhood education. Indicators are used to represent trends by tracking measurable changes over time.

We have also chosen to use 1996, whenever possible, as a baseline for measuring trends. That was the first year Island County conducted a Behavioral Risk Factor Surveillance System Survey (BRFSS), that provides us with much information about individual health conditions and behaviors, risk factors, and environmental influences.

As much as possible we use Healthy People 2010 goals as a “benchmark” for our goals. This builds on national work where panels of experts select goals they think are realistic and optimal. In areas where there were not HP2010 or other national/state goals we developed our own, frequently by selecting our “best” year of data or by aiming high for optimal health of all.

“Community indicators are measuring systems, designed, developed and researched by the community members themselves. Indicators are small bits of information that reflect the status of larger systems.

They are like instrument panels that provide citizens with clear and honest information about past trends and current realities, and assist them in steering their communities on their desired course. They help civic leaders clarify key issues and challenges, or prioritize spending when budgets are tight.

Indicators can point a community toward specific initiatives or policy changes that will have a real effect on the quality of life. That impact is then reflected in the indicator designed to measure it, and the positive feedback inspires the community to continue striving for a better tomorrow.”

*from The Community Indicators Handbook by
Tyler Norris, Alan AtKisson, et al, 1997*

Our plans miscarry because they have no aim. When a man does not know what harbor he is making for, no wind is the right wind. —*Lucius Annaeus Seneca*

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ISLAND COUNTY AND ITS PEOPLE

EDUCATIONAL LEVEL OF THE ADULT POPULATION

The educational attainment of the adult population in an area is an indicator of the area job market and/or the availability of educational opportunities.

FINDINGS:

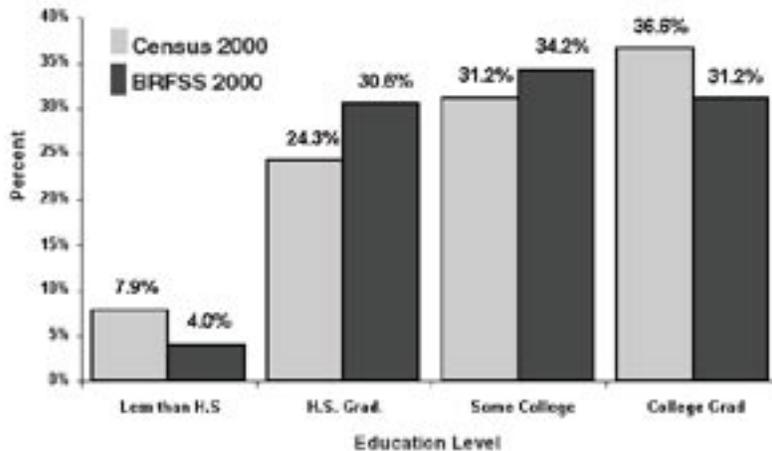
The educational level of adults in Island County remained relatively consistent during the 1990's. The percent of adults over age 25 who were not high school graduates was 7% in 1997 and 7.9% in 2000. The nation (19.6%) and Washington State (12.9%) lag behind Island County, with higher percentages of adults who are not high school graduates. In addition, Island County has a high percentage of college graduates (36.5% have obtained a college degree at an associate level or above).

Education:

Healthy People 2010 Goal:
90% of the adult population to be a high school graduate.

How are we meeting our goal?
Exceeding

Educational Attainment Census 2000 vs. BRFSS



EMPLOYMENT

The unemployment rate is a common measure of the economic health of a community.

FINDINGS:

Historical 1990 Census data indicates that many Island County residents work in other counties (24%). In 2003, the Island County unemployment rate was 6.2%, higher than both state (5.1%) and national figures (5.4%). The unemployment rate in Island County is volatile, fluctuating from 6% in 1990, 8.6% in 1996, and 5.3% in 2001.

Employment:

Goal: 5% or less unemployment rate.

How are we meeting our goal of low unemployment?
Fluctuating

POVERTY

A nationally accepted indicator of regional poverty is 100% of the federal poverty level (FPL). The Census Bureau uses this threshold to calculate official poverty statistics for communities. Poverty is an obstacle to obtaining proper medical care and is associated with poor health status.

FINDINGS:

2000 Island County data indicates 7% of Island County residents were living below 100% of the federal poverty level. Island County levels are less than state (10.6%) and national figures (11.3%). Island County 1997 figures for the percentage living below 100% of the FPL are comparatively unchanged (6.6%).

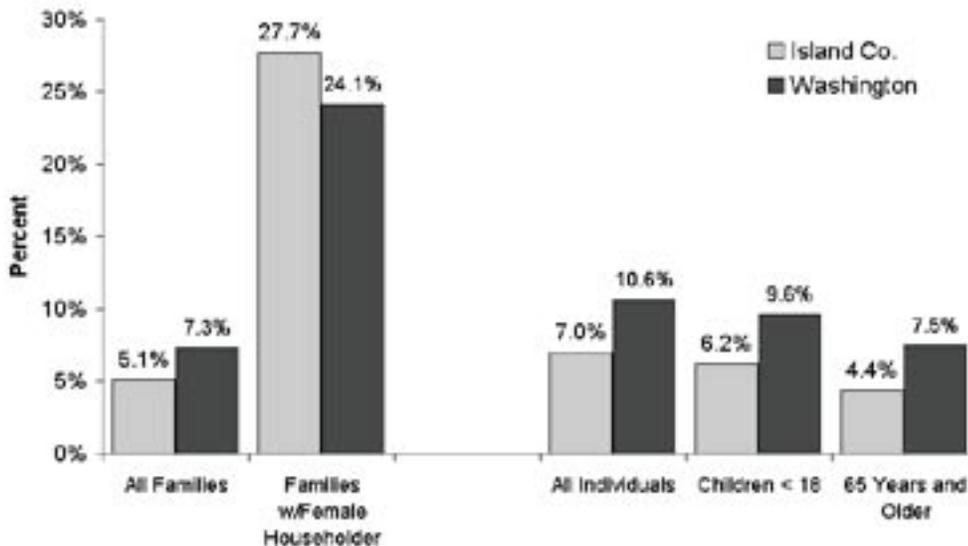
Poverty:

Goal: 7% or less living below 100% of FPL.

How are we meeting our goal?

Meeting

**Poverty Status in 1999
Island County & Washington**



“The indicators a society chooses to report to itself about itself are surprisingly powerful. They reflect collective values and inform collective decisions. A nation that keeps a watchful eye on its salmon runs or the safety of its streets makes different choices than does a nation that is only paying attention to its GNP. The idea of citizens choosing their own indicators is something new under the sun—something intensely democratic.”

— Donella Meadows





QUALITY OF LIFE AND SOCIAL CONTEXT

HUNGER & FOOD INSECURITY

Food is one of life's basic needs. According to the USDA, Washington State ranks fifth in the nation for hunger concerns. The fastest growing segment of food bank clients is the 'working poor.' Single-parent households, people with disabilities, and seniors on fixed incomes are also more likely to need food support. Food concerns and under-nutrition increase in times of economic slowdowns and layoffs. Most food banks offer supplemental food assistance on a monthly basis.

FINDINGS:

2000 data indicates 5% of Island County adults surveyed were concerned about having enough food for themselves or their families. This figure is comparable to the state (5%) and nation (5%), and is unchanged from Island County 1996 data (5%). Even so, county food banks report increased numbers of clients. For instance, in 2004, Good Cheer in Langley supplied food to 2,000 people (13% of the South Whidbey population) and Help House of Oak Harbor served 3,242 people (7% of the Oak Harbor area population). In addition, three smaller food banks operate in the county.

Hunger:

Healthy People 2010 Goal: To reduce the percentage concerned with having food for themselves or their families to 6%.

How are we meeting our goal?

Meeting

EMOTIONAL AND SOCIAL SUPPORT

Belonging to a social network in which a person communicates frequently, shares a sense of mutual obligation, feels cared for and valued greatly affects their health. Individuals with social support have a reduced risk of mortality from specific diseases and recover more quickly from already-diagnosed illness.

FINDINGS:

2000 data indicate 98% of Island County adults feel they have someone to help with emotional problems or provide social support (87% have 3 or more people). Social networks have a huge impact on quality of life. We recommend asking this question in future Behavioral Risk Factor System Surveys (BRFSS), so that trends can be monitored.



Social Support:

Goal: 95% of people have someone to help with emotional problems or provide social support.

How are we meeting our goal?

Exceeding



GENERAL HEALTH STATUS

RATING OF HEALTH

A person's self-reported general health status is an indicator of vital, creative, and productive people who are able to contribute to the health of a community. For individuals, leading a "healthy life" means feeling in good health, having a full range of functional capacity, being able to have satisfying relationships, and engage in activities that are fulfilling at work and play.

FINDINGS:

2000-01 Island County data indicates that 90% of adults surveyed rated their health as good, very good, or excellent. The proportion of Island County residents who rate their health as good, very good, or excellent has not changed from 1996 (90-91%). A higher percentage of Island County residents feel positive about their health when compared to the state (87%). Nationally, it is reported that 91% of residents rated their health as good, very good, or excellent.

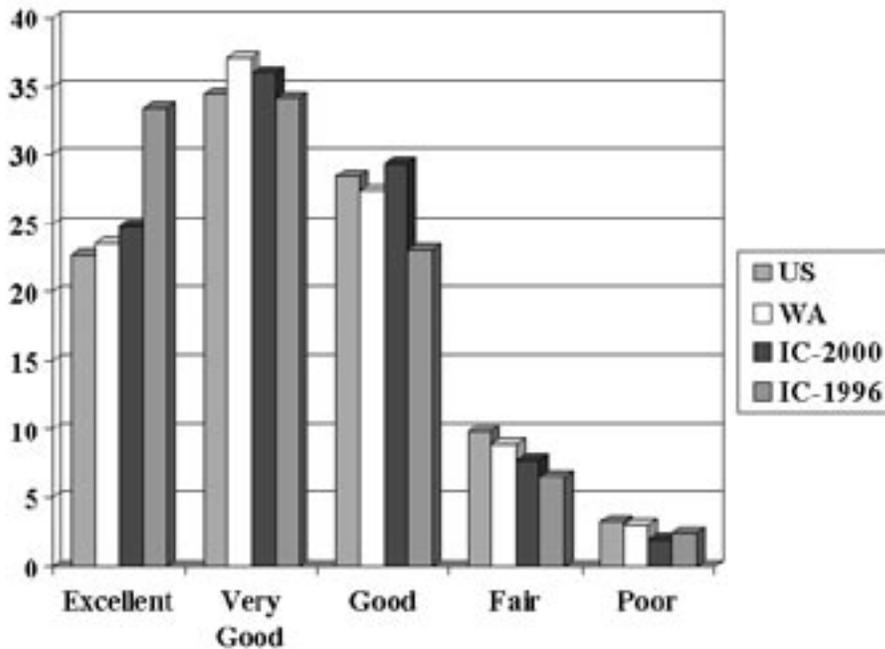
Rating of Health:

Goal: 90% of people rate their health as good, very good, or excellent.

How are we meeting our goal?

Meeting

Self-Rating of General Health Status





HEALTH ACCESS, SATISFACTION AND CARE

PROVIDER AVAILABILITY

Keeping a community physically healthy means providing access to quality health care for all. This can be measured by the immediate availability of a regular primary care physician.

FINDINGS:

The number of physicians increased from .84 per 1000 residents in 1996 to 1.2 per 1000 in 2001, with Whidbey Island designated a primary care health professional shortage area in 2001. However, Island County has a sizeable military population and only civilian based physicians are included in this ratio. Both the state at 2.2 per 1000 residents and nation at 2.2 per 1000 residents have higher ratios of civilian-based physician availability.

Provider Availability:

Goal: 2.2 physicians per 1000 residents.

How are we meeting our goal?
Not meeting

ADULTS WITH HEALTH INSURANCE

Health insurance provides access to health care. Persons with health insurance are more likely to have a primary care provider and to have received appropriate preventative care, such as a Pap test, immunization, colorectal cancer screening, or early prenatal care. Adults with health insurance are twice as likely to receive a routine checkup, compared to adults without health insurance. Although nearly all seniors are covered by Medicare, many persons under 65 lack coverage. The major source of coverage for non-elderly persons is employer-sponsored group health insurance.

FINDINGS:

2000 data indicate that 94% of Island County adults under age 65 had health coverage: a slight increase from 92-93% in 1996. The large proportion of residents who have military coverage positively impacts Island County's insurance rates. This is higher than state (90%) and national (88.2%) figures. Only 83.8% of Americans under age 65 had health care coverage in 2002, so the trend seems to be that more Americans lack health insurance.

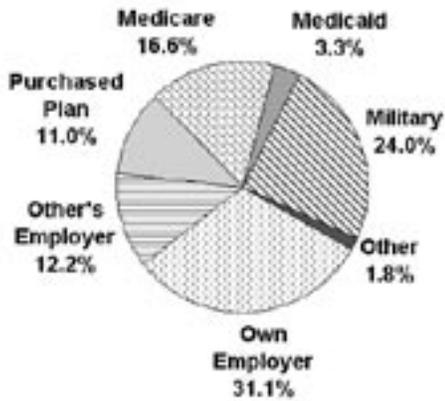
Health Insurance:

Healthy People 2010 Goal: 100% health care insurance coverage.

How are we meeting our goal?
Not meeting



Source of Health Care Coverage
Island County BRFSS 2000



ADULTS WITH USUAL SOURCE OF CARE

Access to a usual, affordable source of health care typically results in higher use of preventive health care, such as cancer screenings, blood pressure and cholesterol monitoring. These preventive screenings are vital to increased incidence of successful treatment, lower rates of disease, and lower overall health costs.

FINDINGS:

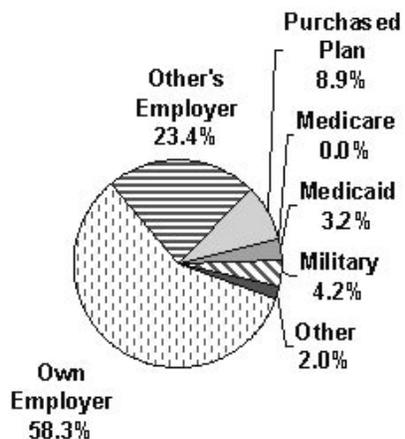
2000 data indicate that 86% of Island County adults identify a usual source for health care; a slight decrease from 87% in 1996. Washington State figures are continuing to decrease from 85% in 2000 to 80% in 2002. Island County needs to be closely monitored for a similar trend (e.g. survey in BRFSS).

Usual Care:

Healthy People 2010 Goal: 96% with a specific source of ongoing care.

How are we meeting our goal?
Not meeting

Source of Health Care Coverage
Washington BRFSS 2000





UNINTENTIONAL INJURY

FALLS

Injuries due to falls occur at all ages; however, people older than 65 suffer a disproportionate share of the burden. Falls are not an inevitable consequence of aging. They can be prevented with effective interventions targeted at risk factors. The public pays a very high proportion of the medical care costs associated with falls among older adults. Falls are a common reason for admission to nursing homes and are a threat to independence and quality of life.

FINDINGS:

2003 Island County data indicate a falls age-adjusted mortality rate of 14.08 per 100,000. In Island County, there has been a significant increase in the falls mortality rate from 6.42 per 100,000 in 1996. This rate is considerably higher than state figures of 8.87 per 100,000. Nationally, there was a falls mortality rate of 4.8 per 100,000 in 1999.

Falls:

Healthy People 2010 Goal: To reduce the age-adjusted falls mortality rate to 3.0 per 100,000.

How are we meeting our goal?
Not meeting

FIREARMS SAFETY & STORAGE

Nationally, a number of unintentional injuries involve firearms. In 1997, 32,436 individuals died from firearm injuries.

FINDINGS:

Of concern is the alarming risk of any loaded and unlocked firearm. 2000 Island County data from households surveyed indicate 39.6% of adults surveyed had firearms in the house, 4.2% of those homes had loaded and unlocked firearms. 1996 data shows similar figures for the percentage of households with loaded and unlocked firearms (4.6%). State figures (4.4%) for loaded and unlocked firearms are comparable to Island County. Nationally, 19% of homes have loaded and unlocked firearms.

Firearms Safety:

Goal: Reduce the percentage of homes with loaded and unlocked firearms to 0%.

How are we meeting our goal?
Not Meeting





MENTAL HEALTH

MENTAL HEALTH PROFESSIONAL SHORTAGE AREA (MHPSA)

The Shortage Designation Branch in the U.S. Health Resources and Services Administration, Bureau of Health Professions, National Center for Health Workforce Analysis develops shortage designation criteria and uses them to decide whether or not a geographic area or population group is a Health Professional Shortage Area (HPSA) or a Medically Underserved Area or Population.

FINDINGS:

In 2004 Island County received HPSA designation for mental health.

MHPSA:

Goal: To not be designated a MHPSA.

How are we meeting our goal?

Not meeting

ADULT EMOTIONAL HEALTH

Mental health is sometimes thought of as simply the absence of mental illness but is actually much broader. Mental health is a state of successful mental functioning, resulting in productive activities, fulfilling relationships, and the ability to adapt to change and cope with adversity. Emotional health within a community may be influenced by a variety of factors, including the availability of emotional support systems, and the availability of adequate mental health services.

FINDINGS:

2000 data indicate 8.5% of adults in Island County report more than 8 days of poor mental health in the past month, a rate lower than state (13.3%) and national figures (12.6%). In addition, 31.8% of Island County adults indicated that there was at least one day in the past month when their mental health was not good. There is a severe shortage of mental health services and providers in Island County leading to an inability to meet current mental health needs.



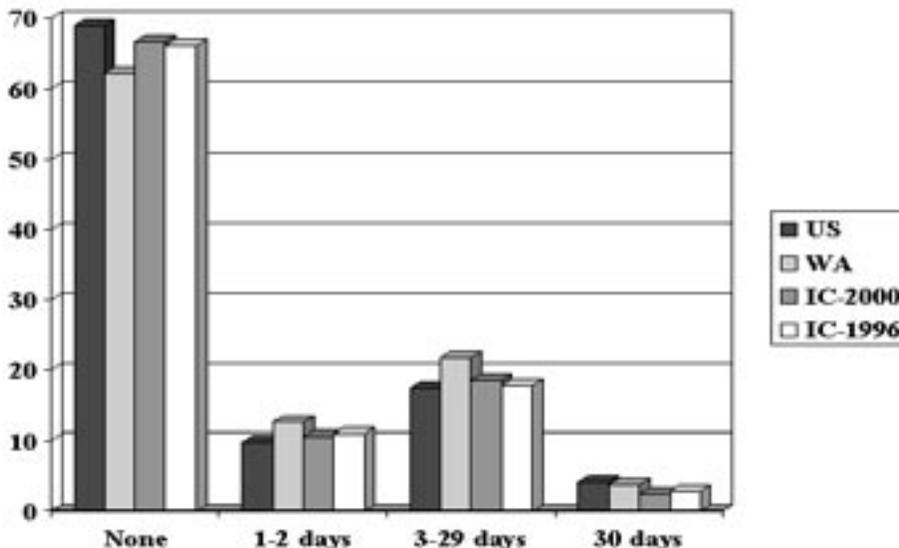
Emotional Health:

Goal: 8.5% or less report more than 8 days of poor mental health in the past month.

How are we meeting our goal?

Meeting

Self-Reported Days of Poor Mental Health



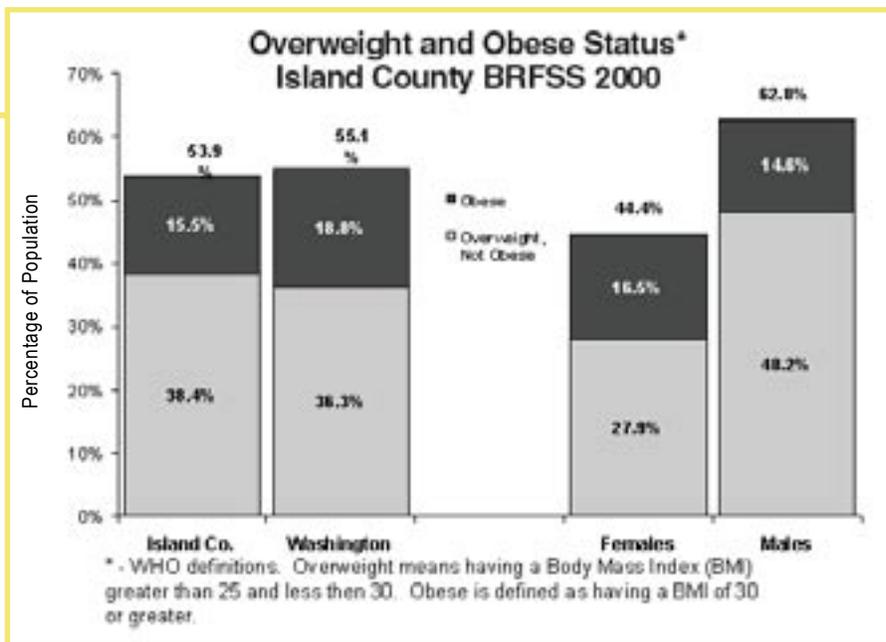


CHRONIC DISEASE AND PHYSICAL ACTIVITY

OVERWEIGHT AND OBESE ADULTS

A crisis is developing in our country with regard to overweight and obesity. In 2001, the Surgeon General reported that an estimated 300,000 preventable deaths per year might be attributable to obesity. Obese and overweight individuals are more prone than normal weight individuals to develop hypertension, elevated blood cholesterol, and diabetes, which increase the risk of heart disease. Overweight individuals are also at increased risk of some types of cancer, gallbladder disease, liver disease, sleep apnea, respiratory problems, and osteoarthritis.

FINDINGS: 2000 data indicate that the percent of Island County adults who are overweight or obese has dramatically increased over the past several years. The county rate was 26% in 1996 and 53.9% in 2000. Statewide (55.1%) and national rates (57.5%) are similar to Island County, with increasing trends. A new definition of overweight (WHO) was used in 2000 and sets a lower weight threshold for who is considered overweight. This may contribute to some of the observed increase. Overweight is defined as having a Body Mass Index (BMI) greater than 25 and less than 30. Obesity is defined as a BMI of 30 and above.



OVERWEIGHT CHILDREN

Patterns established in youth carry into adult life, likewise the negative consequences of being overweight continue into adulthood. The Island County Healthy Youth Survey asked youth for their height and weight. Survey researchers determined their body mass index (BMI).

FINDINGS: 2002 data indicate that overweight figures for Island County youth (8-9%) are slightly lower than youth overweight figures for the state (9-11%) and nation (12.9%). There is an improving trend of overweight youth noted from 1996 (15.8%), however, overweight is a rising issue in our country. Effective interventions need to be established for youth. Overweight for children (6-19 years) is defined as sex and age-specific 95th percentile of BMI based on Centers for Disease Control and Prevention Growth Charts.

Overweight Adults:

Healthy People 2010 Goal: 60% of adults at a healthy weight.

How are we meeting our goal?
Not Meeting

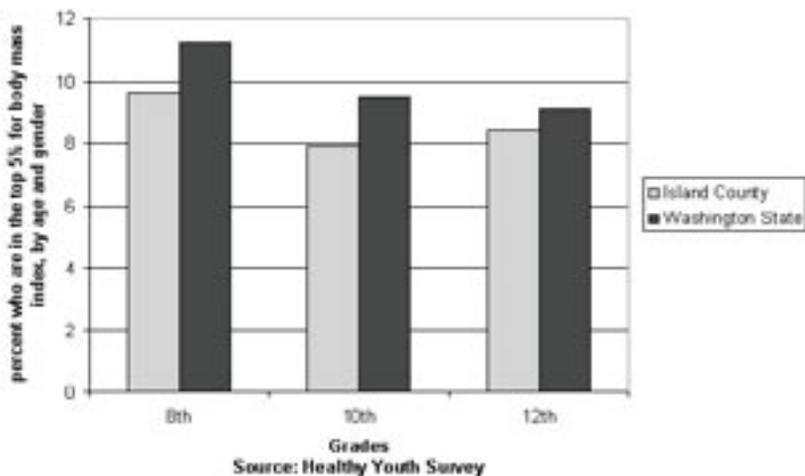


Overweight Children:

Healthy People 2010 Goal: To reduce the proportion of children and adolescents who are overweight or obese to 5%.

How are we meeting our goal?
Not meeting

Overweight, Washington State and Island County, 2002



ADULT PHYSICAL ACTIVITY

The benefits of regular physical activity include a longer life span and lowered risk of major illnesses including heart disease, diabetes and cancer. Physical activity helps people maintain body weight and improves quality of life. Activity both at work and during leisure time contributes to overall physical activity.

FINDINGS:

2000 data indicate 73% of adults in Island County perform regular, preferably daily, moderate physical activity 30 minutes a day. Island County residents are more active than the state (53%) and their activity has increased considerably from 1996, when 35% of adults exercised 30 or more minutes, five or more days a week, and 30% exercised 20 or more minutes three or more days a week.

YOUTH PHYSICAL ACTIVITY

In general, people tend to be most active in childhood. However, there is some indication that children in the nation are becoming less active. According to a 2000 report, "Promoting Better Health for Young People Through Physical Activity and Sports," there was a 40% decline in biking and walking from 1977 to 1995 among children between the ages of five and fifteen. The report also indicated a drop in the percent of high school students participating in physical education classes from 42% to 29% between 1991 and 1999.

FINDINGS:

2002 data indicate 78% of Island County 8th grade youth surveyed reported exercising 30 or more minutes a day, three to seven days a week. Island County has remained relatively constant in percent of youth activity from 1995 when 77% of 8th graders reported exercising 30 or more minutes a day 3-7 days a week. Island County figures for youth physical activity are higher than the state (32-34%) and nation (27%).

Physical Activity:

Goal: 30% of adults perform physical activity for 30 minutes, 5 days a week.

How are we meeting our goal?

Meeting

Youth Physical Activity:

Goal: 85% of youth report exercising 30 minutes, 3-7 days a week.

How are we meeting our goal?

Not meeting





INFECTIOUS DISEASE

ADULT IMMUNIZATIONS

Immunizations against influenza and pneumonia can prevent serious illness and death. Pneumonia and influenza deaths together constitute the sixth leading cause of death in the United States. Recommended immunizations for adults aged 65 years and older include a yearly immunization against influenza (the “flu shot”) and a one-time immunization against pneumonia. Most of the deaths and serious illnesses caused by influenza and pneumonia occur in older adults and others at increased risk for complications of these diseases because of other risk factors or medical conditions.

FINDINGS:

2000 data indicates 67% of Island County adults aged 65 and older are immunized for flu and 70.6% are immunized for pneumonia. Adult flu immunization levels are similar to national levels (66.2%), but less than state levels (72.5%). Island County adult pneumonia immunization levels are greater than both the state (66.8%) and nation (61.3%). More recent 2004 United States data show that 64% of adults aged 65 and older are immunized for flu and 46% are immunized for pneumonia.

Flu & Pneumonia:

Healthy People 2010 Goal: 90% of adults aged 65 and older immunized for flu and pneumonia.

How are we meeting our goal?
Not meeting

CHILDREN IMMUNIZED AT SCHOOL –ENTRY

Following clean drinking water and sanitation, childhood immunizations are among the greatest public health achievements of the 20th century. When children are under immunized, they pose a risk not only to themselves but also to the entire community.

FINDINGS:

Upon entrance to school in 2003-2004, 81.1% of Island County children had received all vaccines that have been recommended for universal administration for at least five years (or at school entry).

Of concern is the 10.1% of children whose parents claimed exemption from immunization requirements for medical, religious, or personal reasons. The percentage of Island County children that are claiming exemption has significantly increased from 3.5% in 1997-98. Island County figures are less than the state (89.3%) for children who are fully immunized at school entry, and substantially more Island County children are claiming exemption than state children (4.2%). 1997-1998 Island County data shows an increase from 63.4% of children fully immunized at school entry. However, the number of non-immunized children in Island County, and the high rate of non-immunized children in Washington State are of concern; there is a need to educate our citizens about the consequences of inadequate immunizations.

Childhood Immunization Levels:

Healthy People 2010 Goal: 95% immunized at school entry level.

How are we meeting our goal?
Not meeting

Ideally, children should receive a series of recommended immunizations by age two. National vaccination coverage for all recommended immunizations among children 19-35 months of age was 74.8% in 2001. We recommend surveying adequate immunization of Island County children, ages 19-35 months.



SEXUALLY TRANSMITTED DISEASE

Unintended pregnancies and sexually transmitted diseases (STDs), including infection with the human immunodeficiency virus that causes AIDS, can result from unprotected sexual behaviors. Abstinence is the only method of complete protection. Condoms, if used correctly and consistently, can help prevent both unintended pregnancy and STDs.

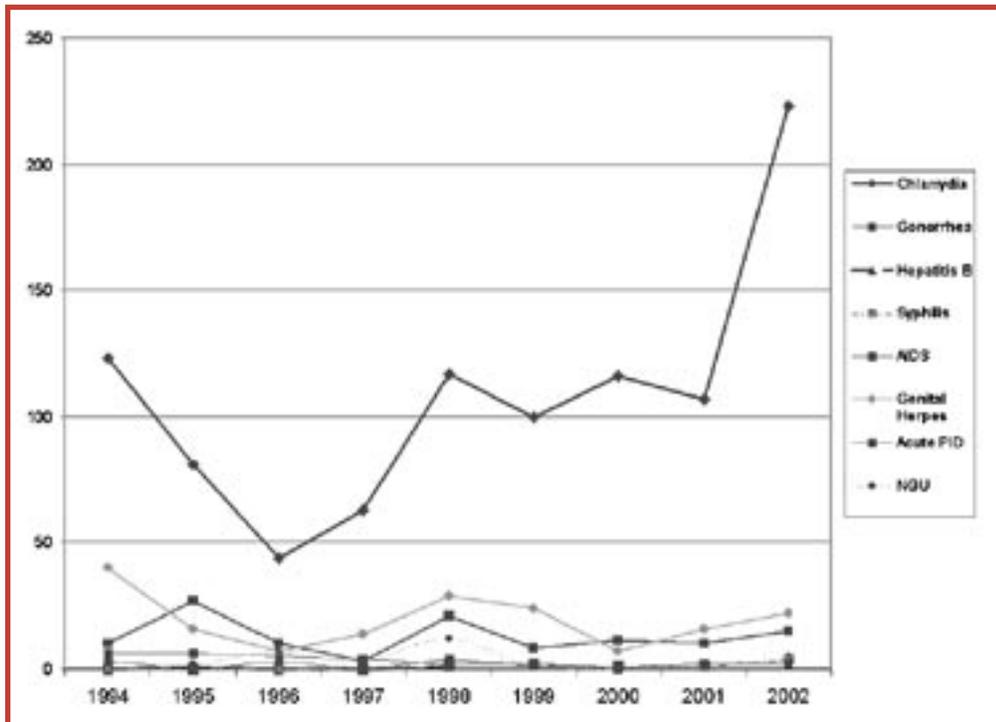
FINDINGS:

2002 Island County data indicate an incidence rate of 323.4 per 100,000 population for gonorrhea, syphilis, and chlamydia. Island County data for 1996 (81.05 per 100,000) shows an alarming increase in the rate of STDs. The state rate for gonorrhea, syphilis and chlamydia was less at 298.4 per 100,000 and the national rate was 422.8 per 100,000.

STDs:

Healthy People 2010: To decrease the STD rate to less than 189.2 per 100,000 for gonorrhea, syphilis and chlamydia.

How are we meeting our goal?
Not meeting



MATERNAL / CHILD HEALTH



PRENATAL CARE

Early prenatal care (first trimester) is one of the first and most important steps for healthy mothers and children. Pregnant women who receive prenatal care and their newborns are at lower risk for complications during pregnancy and during childhood.

FINDINGS:

2001 data indicate 88% of Island County pregnant women received prenatal care in their first trimester, higher than state (81.2%) and national (83%) figures. In 1997 85.5% of Island County pregnant women received prenatal care in their first trimester.

Prenatal Care:

Healthy People 2010 Goal: Increase the proportion of pregnant women who receive early and adequate prenatal care to 90%.

How are we meeting our goal?
Not meeting

SMOKING & ALCOHOL USE IN PREGNANCY

Smoking and alcohol use are two entirely preventable causes of pregnancy complications. All pregnant women should be advised to abstain from smoking and alcohol use during pregnancy.

FINDINGS:

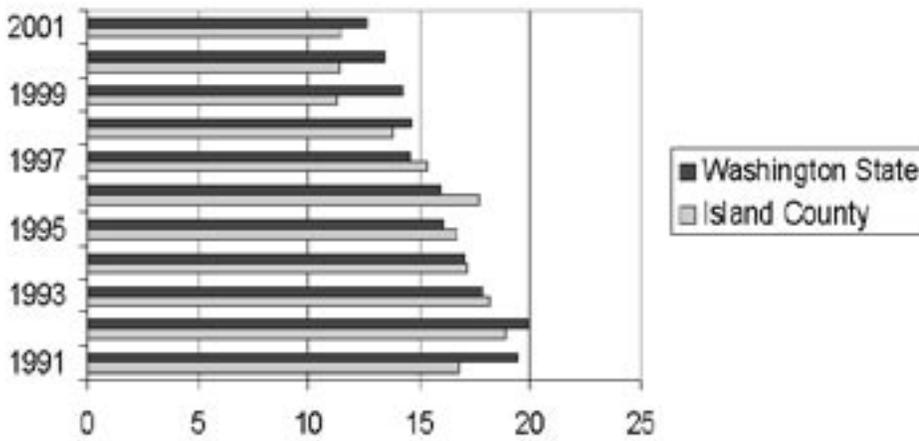
In 2001, 88.5% of Island County pregnant women did not smoke during their pregnancy. This proportion is similar to the state (87.4%) and nation (88%). 2001 data also indicates that the proportion of Island County pregnant women (98.1%) who do not use alcohol is similar to the state (98.4%).

Pregnancy Alcohol & Smoking:

Healthy People 2010 Goal: To increase the proportion of pregnant women who do not smoke during pregnancy to 99% and the percentage that does not use alcohol during pregnancy to 94% (Our goal is 99%).

How are we meeting our goal?
Not meeting

Maternal Smoking, WA State and Island County 1991-2001

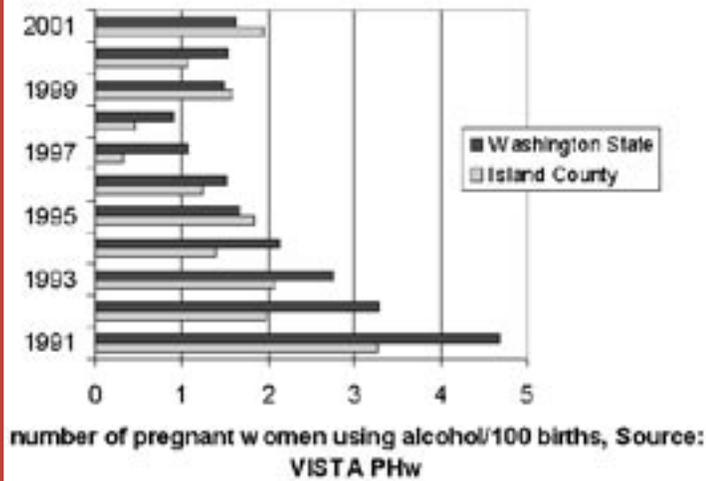


Number of Pregnant Women Smoking / 100 births

Source: VISTA PHw



Maternal Alcohol Use, Washington State and Island County, 1991-2001



CHILDCARE CHOICES & QUALITY

Communities with choices of available and affordable high-quality childcare provide a solid supportive foundation for children and their families.

FINDINGS:

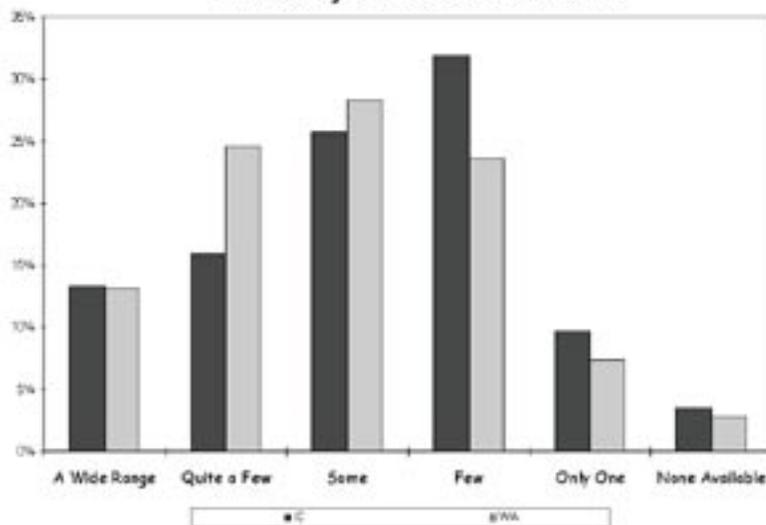
2000 data indicate 45% of Island County parents surveyed reported few or no choices for childcare. Island County figures are higher than the state (34%), where fewer parents reported this same concern. In addition, only 80% of Island County parents rated their child's childcare quality as good or very good compared to 95% of parents in the state. We recommend asking this question in future BRSS surveys, so that trends can be monitored.

Childcare Choices & Quality:

Goal: 25% or less will report few or no childcare choices. 95% will rate childcare quality as good or very good.

How are we meeting our goal?
Not meeting

How Many Choices in Childcare





ENVIRONMENTAL HEALTH

DISEASE COMPOSITE RATE ACQUIRED BY WATER, FOOD OR ANIMAL CONTACT

Control of disease has been the major reason for declining death rates in the nineteenth and twentieth centuries. Incidence rates of diseases acquired by water, food and animal contact are measures of the risks residents face from their community's environment. Washington State and Island County Health Department (ICHHD) are monitoring the following diseases: Campylobacteriosis, E Coli 0157:H7, Giardia, Listeriosis, Salmonellosis, Shigellosis, Vibriosis, Yersiniosis, and food borne outbreaks of 2 persons or more. A composite incident rate per 100,000 population has been established including all 9 diseases.

FINDINGS: 2001-2002 Island County data indicates a composite disease rate of 1.74 per 100,000. This rate is considerably lower than the state rate of 4.93 per 100,000 and is an improvement from the Island County rate of 2.46 in 1996.

ILLEGAL DUMPING

Illegal dumping is the term used to describe disposing of waste in unauthorized areas. Illegal dumps are not just ugly; they also impact human health, damage the environment and can discourage economic development. In 2004 the Island County Environmental Health Assessment Team (EHAT) identified illegal dumping as Island County's top priority issue for environmental health.

FINDINGS: The results are variable for Island County. While the number of illegal dump complaints to the ICHHD has decreased over the last ten years, this is primarily due to a decrease in the number of illegal burning complaints (now handled through the Fire Warden). Recent ICHHD data reflect primarily non-owner illegal dump sites or abandoning of solid waste incidences and increased incidents of improper storage. Proposed code revisions, community awareness and education are expected to help further decrease the number of illegal dump sites.

WATER QUALITY

Providing drinking water free of disease-causing agents, whether biological or chemical, is the primary goal of all water supply systems. The Safe Drinking Water Act (SDWA) of 1995 (Public Law 93-523) authorized the United States Environmental Protection Agency (EPA) to establish safe standards of purity and required operators of federally-regulated public water systems to comply with primary health-related drinking water quality standards. This law focuses on all public/community water systems designed for human drinking use that serve a population of 25 or more people per day or 15 or more residential connections, whether from above-ground or under-ground sources.

FINDINGS: In Island County federally regulated water systems provide drinking water to 85% of residents (group A public water systems). Eight percent (8%) of the population is served by Group B public water systems that only sample for biological contaminant once per year and nitrates once every three years. Seven percent (7%) of residents consume drinking water from private wells where water quality monitoring is not required. In 2004, 92% of the Island County Group A public drinking water systems met SWDA standards.

Disease Control:

Healthy People 2010 Goal: A composite incident rate of 20.35 or less for 4 diseases.

How are we meeting our goal?

Exceeding

Illegal Dumping

Goal is to reduce the number of illegal dumping sites and littering complaints in Island County. At this point we are monitoring complaints closely but there are still improvements to be made in the area of illegal dumping.

How are we meeting our goal?

Fluctuating

Water Quality:

Environmental Protection Agency target: 95% of community/public water systems meet the SDWA standard.

How are we meeting our goal?

Not meeting



ORAL HEALTH

ADULT DENTAL VISITS

Annual dental cleanings and checkups are nationally recognized steps towards preventing dental decay and dental disease among adults. The rate of dental visits among adults is often an indicator of accessibility to dental care, including availability of dental insurance coverage, and low-cost clinics in the area.

FINDINGS:

2000 data indicate that 82% of adults in Island County saw a dental provider in the previous year, a slight improvement from 73% in 1996. These figures are higher than the state at 70% in 2002 and 67% in 1999. However, this indicator needs to be closely monitored with Island County's only low-cost dental clinic closing in 2003.

CHILDREN'S ACCESS TO DENTAL CARE

In 2001, the American Academy of Pediatrics recommended early preventive dental care for children (with first tooth eruption). Access to dental care at an early age is a known intervention to prevent childhood caries.

FINDINGS:

2000 BRFSS data indicate 10% of parents surveyed wanted dental care for their children in the last two years but were unable to get it, primarily due to lack of insurance or the cost.

CHILDHOOD CARIES

There has been remarkable progress in the reduction of childhood caries in the United States over the past 30 years. Use of sealants and fluoride varnishes on children's teeth decreases the likelihood of developing caries. The use of fluoride in public water supplies, in toothpaste, and in professional dental products, as well as improvements in oral hygiene and increased access to dental care have played major roles in this dramatic improvement.

FINDINGS:

Smile Survey 2000 data indicate that 38% of Island County children screened had caries. Students screened were one of three age groups: three to five year olds, second and third grade students, and 14 to 16 years. This is a decrease from 1994 when 50% had caries. Statewide in 2000, 54% of children two to four years old and second and third graders had caries.



Adult Dental Visits:

Goal: The national target is for 83% of adults to visit a dentist within the last year.

How are we meeting our goal?

Meeting

Children's Dental Care:

Healthy People 2010 Goal: 57% of children and adolescents will receive preventative dental care within the past year.

How are we meeting our goal?

Meeting

Childhood Caries:

Healthy People 2010 Goal: To reduce the proportion of children with caries in their permanent or primary teeth to 42%.

How are we meeting our goal?

Meeting





SUBSTANCE ABUSE

ADULTS WHO SMOKE

Tobacco is the leading preventable cause of death in the United States, causing more than 440,000 deaths each year and resulting in an annual cost of more than 75 billion in direct medical costs.

FINDINGS: Island County adult smoking rates declined from 21% in 1996 to 19% in 2000. Although state (20.7%) and national (23.1%) rates are higher than Island County, our rate is unacceptably high.

YOUTH WHO SMOKE

Youth are placed at increased risk for initiation of tobacco use by complex social, environmental, and personal factors. Every day, an estimated 3,000 young persons start smoking. These trends are disturbing because the vast majority of adult smokers tried their first cigarette before age 18 years; more than half of adult smokers became daily smokers before this same age. Almost half of adolescents who continue smoking regularly will die eventually from smoking-related illness. Immediate health consequences for youth who use tobacco include impaired lung growth and function, increased respiratory illness, and poorer health overall.

FINDINGS: Youth smoking rates for Island County 12th graders declined from 32% in 1995 to 22% in 2002. Other 2002 data of youth who took the Healthy Youth Survey indicate smoking rates of 17.6% for 10th graders, 7.3% for 8th graders, and 1.4% for 6th graders. State rates are comparable: 22% for 12th graders, 15% for 10th graders, 9.2% for 8th graders, and 2.2% for 6th graders. The national smoking rate for youth (>12yrs) is 26%.

ADULTS WHO BINGE DRINK

Studies conducted by the Center for Disease Control and Prevention (CDC) have found that binge drinkers were 14 times more likely to drive while intoxicated than non-binge drinkers. Researchers have also highlighted other dangers linked to binge drinking such as injuries to self and others, unintended pregnancy, sexual and physical abuse, and death.

FINDINGS: 2000 findings indicate 15% of adults in Island County as well as Washington State (14.9%) drank five or more drinks on one or more occasion in the past month. Figures for Island County binge drinking are unchanged from 1996 (15%). The national figure for binge drinking is 17%.

YOUTH ALCOHOL USE

A range of known family, peer, achievement, and social risk factors may contribute to a significant likelihood of developing substance abuse problems among youth. Youth who use alcohol compromise decision-making skills not fully developed, putting them at risk for injury and unintended pregnancy.

FINDINGS: 2002 data of Island County youth who took the Healthy Youth Survey indicate that fewer youth are using alcohol. Alcohol use by 12th graders has decreased from 48.6% in 1995 to 39.4% in 2002. Other ages of youth surveyed in 10th grade (35.4% to 34.4%) and 8th grade (19.6% to 16.5%) show parallel trends. Island County rates are similar to the state rates for 12th grade (42.8%), 10th grade (29.3%), and 8th grade (17.8%). In spite of favorable comparisons this rate is extremely high.

Adult Smoking:

Healthy People 2010 Goal: To reduce adult smoking to 12%.

How are we meeting our goal?
Not meeting

Youth Smoking:

Healthy People 2010 Goal: To reduce cigarette smoking by adolescents to 16%.

How are we meeting our goal?
Not meeting

Binge Drinking:

Healthy People 2010 Goal: To reduce the proportion of adults engaging in binge drinking to 6%.

How are we meeting our goal?
Not meeting

Youth Alcohol:

Healthy People 2010 Goal: 19% or less of youth use alcohol.

How are we meeting our goal?
Not meeting



CRIME AND VIOLENCE

CHILD ABUSE AND NEGLECT

Physical and mental child abuse put children at risk for low self-esteem, poor school performance, drug and alcohol abuse, juvenile delinquency, temporary or permanent physical injury and death. Although abuse can and does occur in all socio-economic groups, several individual, family, social, cultural and economic factors contribute to this problem, including unemployment, substance abuse, poverty, lack of education and unintended pregnancy. Additionally children who are abused and/or live in homes with domestic violence are more likely to become abusers. It is for this reason that breaking the cycle of abuse is critical.

FINDINGS: Year 1998-2002 Island County data indicate 3.8% of children referred to Child Protective Services (CPS) as victims of maltreatment were judged to merit investigation. This compares to figures from the state (3.8%). However, data from CPS indicate a decreasing trend of reported cases from 1996 (1540 cases) to 2001 (1399 cases). It is important to consider that CPS may differ from year to year in actual staff available to handle reports and community norms may also differ in what might be reported and influence these findings.

DOMESTIC VIOLENCE

Domestic violence is any violence by one family member against another family member and affects men, women, children, seniors in all social classes. Dating partners and roommates are also covered under this state law. Violent acts include a pattern of controlling behavior that consists of physical, sexual and/or psychological assaults. Though awareness of domestic violence and the damage it causes have been steadily increasing in our society, it is estimated that only 10% of domestic violence incidents are reported to police. Reasons for this are most likely the fear of social stigma and the complicated emotional relationship that exists between the abuser and the abused.

FINDINGS: Island County data indicate an increase in the number of Island County Sheriff Department domestic dispute calls from 412 calls in 1995 to 624 calls in 2002. In 2002, Citizens Against Domestic & Sexual Abuse (CADA) served 188 domestic abuse victims.

VIOLENT CRIME RATE

Crime takes a toll on the health of our communities through loss of life, fear from physical safety, property damage, disintegration of community cohesion, diversion of public resources from social services and incarceration. Feeling safe and secure at home, work, and play is essential to people's sense of well-being. Violent crime includes murder, rape, robbery, and assault (assault with a weapon or with intent to cause severe injury). The use of alcohol and drugs, and access to firearms contribute to increased crime and violence.

FINDINGS: Year 2002 Island County data indicate a violent crime rate of 1 per 10,000 population. This violent crime rate is significantly lower than both state (35 per 10,000) and nation (50 per 10,000) violent crime rates.

Child Abuse & Neglect:

Goal: 1.5% of CPS referrals merit investigation (lowest % reported in Washington State).

How are we meeting our goal?
Not meeting

Domestic Violence:

Goal: 375 domestic dispute calls or less (lowest # reported in past 10 years).

How are we meeting our goal?
Not meeting

Violent Crimes:

Goal: To have less than 3 violent crimes per 100,000 population.

How are we meeting our goal?
Exceeding



Indicators

Percent of population, 25 years old that are not high school graduates
Unemployment Rate
Poverty levels (100% FPL)
Concerned about having food for themselves or their families (%)
Have someone to help with emotional problems or provide social support
Rate health as good, very good, excellent
Provider availability (physicians/residents)
Percent of adults with health care coverage
Residents reporting having a usual source of care
Incidence rate (per 100,000) for 9 diseases identified by state that are transmissible by food, water or air.
Illegal Dumping
Drinking water quality
Falls (Age-adjusted mortality rates)
Homes with loaded & unlocked firearms
Noninstitutionalized adults > 65 immunized for flu (2000)
Non-institutionalized adults > 65 ever immunized for pneumonia (2000)
Children who receive all vaccines that have been recommended for universal administration for at least five years (or school entry)
STD rates (Gonorrhea, Chlamydia, Syphilis)
Percent of overweight and obese adults
Percent overweight children/youth
Adults who perform regular, preferable daily, moderate physical activity 30 minutes a day, 5 days a week
Youth moderate physical activity-30 minutes a day, 3-7 days a week
Pregnant women who receive prenatal care in the first trimester
Parents report few or no choices for childcare
Childcare quality (good or very good)
Tobacco use during pregnancy
Alcohol use during pregnancy
Adults with a dental visit in the past year
Parents reporting children need dental care
Caries rate in children
Mental Health Shortage Area Designation
Number of days of poor mental health (>8 days/month)
Smoking rates among adults
Smoking rates among youth
Alcohol use among adults
Alcohol use among youth
Percent of children referred to CPS as victims of maltreatment and judged to merit an investigation
Domestic Violence rates
Violent Crimes per 10,000 population

Data Source

U.S. Census
WA State Office of Employment Security; WA State Office of Financial Management
U.S. Census
IC BRFS; DOH; BRFS; CDC
IC BRFS
IC BRFS; DOH
NWAF
IC BRFS; DOH; CDC
IC BRFS; DOH; National Health Interview Survey
DOH, Communicable Disease Report; CDC FoodNet/National Center for Infectious Disease
Island County Environmental Health database
DOH Division of Drinking Water; DOE
DOH, Center for Health Statistics
IC BRFS
IC BRFS; HP; CDC
IC BRFS; HP; CDC
National Immunization Survey; DOH, MCH Data Report; Immunization/Vaccine Preventable Diseases; IC Immunization Study (1995)
Island County Health Department; DOH; CDC
IC BRFS; DOH
Island County Healthy Youth Survey; WSSAHB; DOH, MCH Assessment; HP
Washington State BRFS; CDC
Island County Healthy Youth Survey; WSSAHB; HP
DOH; CDC
IC BRFS
IC BRFS
DOH, Center for Health Statistics
DOH, Center for Health Statistics
IC BRFS; HP
IC BRFS
Island County SmileSurvey; HP
DOH; U.S. Bureau of Primary Health Care
IC BRFS; HP
IC BRFS; CDC; HP
Island County Healthy Youth Survey; WSSAHB
IC BRFS; CDC; HP
Island County Healthy Youth Survey; HP
WA State DSHS; Division of Child and Family Services; Child Protective Services; DSHS Risk & Protective Profile for Substance Abuse Prevention
Island County Sheriff's Office
NWAF; Uniform Crime Reports

Key to Abbreviations:

CDC: United States Center for Disease Control and Prevention
 DOE: Washington State Department of Ecology
 DOH: Washington State Department of Health
 HP: Healthy People 2010

IC BRFS: Island County Behavioral Risk Factor Surveillance System
 NWAF: Northwest Area Foundation, Indicators Project
 WSSAHB: Washington State Survey of Adolescent Health Behaviors



Community
Health
is Community
Wealth...

--Let's all
invest in it!

Island County Community Health Advisory Board Vision For A Healthy Island County In The Year 2020...

- Every child has a loving, nurturing parent/family, and there is a connectedness among families who help each other when in need.
- We are compassionate and respectful of others, even in the resolving of conflicts.
- We equally value people of all ages and see a wide mix of ages in our schools, our workplaces, and our apartment dwellings.
- Our schools are preparing our children for real world challenges and also teaching them healthy lifestyle practices so they can avoid unnecessary diseases in the future.
- We have clean air and clean water and continue to preserve all the natural beauty of the islands.
- We have healthy, locally grown food available to us, and we have trail systems throughout the islands that foster more walking/hiking.
- People feel safe wherever they are.
- Our workplaces value health and in many ways demonstrate that they value family needs as well.
- Affordable health care is easily accessible to everyone and includes alternative as well as traditional medicine, with on-going emphasis on prevention.
- We have central community gathering locations /community hubs where people of all ages come together for a wide variety of activities.
- We have community celebration days that bring people together in the spirit of celebration.



To obtain additional copies of this report, contact us by mail, phone or fax at:

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