



THE HEALTH OF ISLAND COUNTY:

FINDINGS, PRIORITIES, AND EMERGING ISSUES

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Why is it important to measure and report health data?

- ◆ Every year one million U.S. deaths are due to personal health behaviors-the choices people make each day that affect their health
- ◆ Can make national/state/county comparisons
- ◆ Determine priority health issues & develop strategic plans
- ◆ Health planners/providers can address emerging health issues & measure trends in health behaviors
- ◆ Health interventions can be directed to areas of greatest need and effectiveness of interventions can be measured
- ◆ Data is used to propose and garner support for health policies, programs, and actions
- ◆ Create reports, facts sheets, press releases, and other publications designed to educate the public, policymakers, health community, social programs & funding sources





The Health of Island County "Chapters"

- 1) Demographic & Economic Factors
- 2) Quality of Life/Social Context
- 3) General Health Status
- 4) Health Care: Coverage, Access, Use & Satisfaction
- 5) Environmental Health
- 6) Unintentional Injury
- 7) Infectious Disease
- 8) Chronic Disease & Physical Activity
- 9) Maternal-Child Health
- 10) Oral Health
- 11) Mental Health
- 12) Substance Abuse
- 13) Crime & Violence

Data Sources

- ◆ Island County BRFSS (1996, 2000-2001)
- ◆ Washington State BRFSS
- ◆ National BRFSS
- ◆ Census Data
- ◆ State Databases, Surveys and Reports: VISTA, CHARS, vital statistics, tobacco, injury, chronic disease, infectious disease, cancer registry, law enforcement, Medicaid, Medicare, Basic Health Plan
- ◆ Local Data Sources: CAPF/CPS child abuse statistics, WGH survey and hospital records, Sheriff's Dept., ICHD
- ◆ WA State & Island County Healthy Youth Surveys
- ◆ Federal data sources and reports
- ◆ Smile Survey (Dental Health)





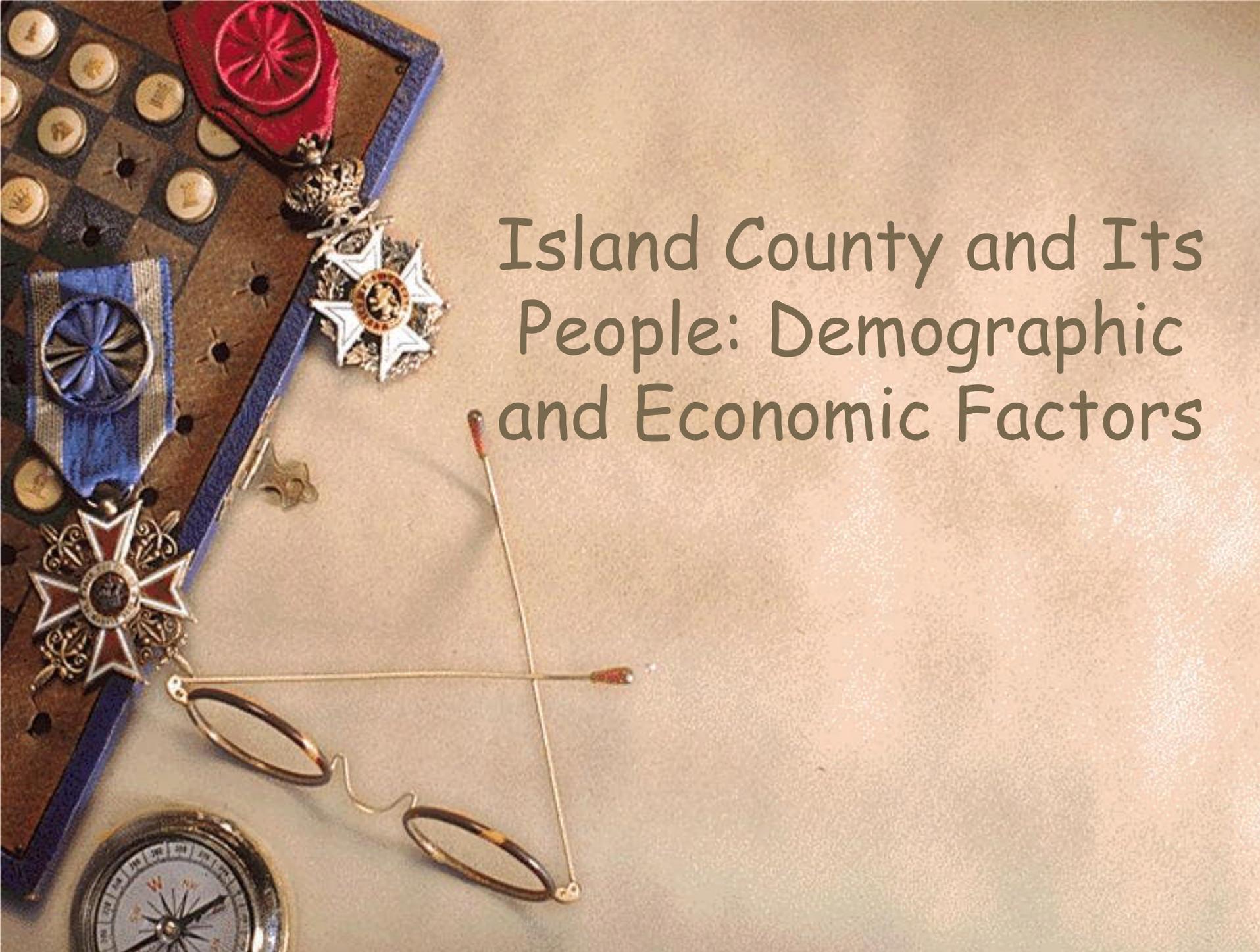
Modules Examined Many Factors: e.g. Chronic Disease

- ◆ **Incidence of Disease:** Diabetes, Adult and Pediatric Asthma, Cardiovascular Disease, Hypertension, Cancer (breast, cervical, skin, colorectal)
- ◆ **Mortality:** Cancer, other diseases
- ◆ **Screening and Prevention:** Mammogram, Pap Test, Colonoscopy, Prostate Blood Test, Blood Cholesterol Screening
- ◆ **Risk Factors:** Physical Inactivity, Overweight, Smoking, Sunscreen Use



Chapter Lay-out

- ◆ Fast Facts
- ◆ Island County Issues
- ◆ Background (includes WA State data)
- ◆ Local Data and Findings
- ◆ Effective Interventions
- ◆ Healthy People (2000 & 2010)
- ◆ Local Resources
- ◆ Helpful Internet Sites



Island County and Its
People: Demographic
and Economic Factors



- ◆ Population: We are growing but not as fast as in the past (18.9% from 1990-2000, compared to 36.7% from 1980-1990). We had 71,558 residents in the 2000 Census, almost 1/2 live in rural areas (34,450). We are, however, the fifth most densely populated county in WA.
- ◆ Gender and Age: Higher percentage of males ages 20-29 (NAS Whidbey); 14% of our residents are over age 65 and 25% under age 18. Median age is 37 (35.3 WA). Have a larger proportion over age 65 compared to the state (14.3% vs 11.2%).
- ◆ Marital Status: IC has a higher percentage of married persons (compared to WA) but total percentage decreased due to growth in other household structures.

Demographic and Economic Factors, Continued...

- ◆ Race/ethnicity: Growing in ethnic diversity, racial minorities were 12.8% in 2000, compared to 6.8% in 1980 and 8.5% in 1990. Our largest racial minority group is Asian/Pacific Islander (%). Children are increasingly multiracial (7%) compared to 2% of adults.
- ◆ Household data: We have more households (27,784) but smaller size; 35% have children < 18 and 25% have an adult > 65. Most households are families but IC increased in other types of households (single, non-family, other).



Socioeconomic Factors Continued...

- ◆ **Income & Poverty:** Median income was \$45,513 in 1999 with a per capita income of \$21,472. Average annual wages were \$24,731 compared to \$37,458 in WA. In IC 6.6% of persons live below the Federal Poverty level and 10.4% of all children (compared with 10.2% and 15.2% in WA state). Children age 5 and under are most affected by poverty with 1/3 of children under 200% FPL.
- ◆ **Employment & Education:** IC has many residents in the Armed Forces (11% in IC vs. 1% in WA). Most residents have a high school education. 10.7% of our children <18 are not enrolled in school and 21.3% of our population ages 18-24 have not graduated from high school.



A collection of military medals and a pair of glasses are arranged on a wooden surface. The medals include a red ribbon with a circular emblem, a blue ribbon with a circular emblem, and two silver Maltese crosses with central medallions. A pair of gold-rimmed glasses with thin temples is positioned in the lower center. A circular compass is visible in the bottom left corner. The background is a light-colored, textured surface.

Quality of Life & Social Context



Quality of Life & Social Context

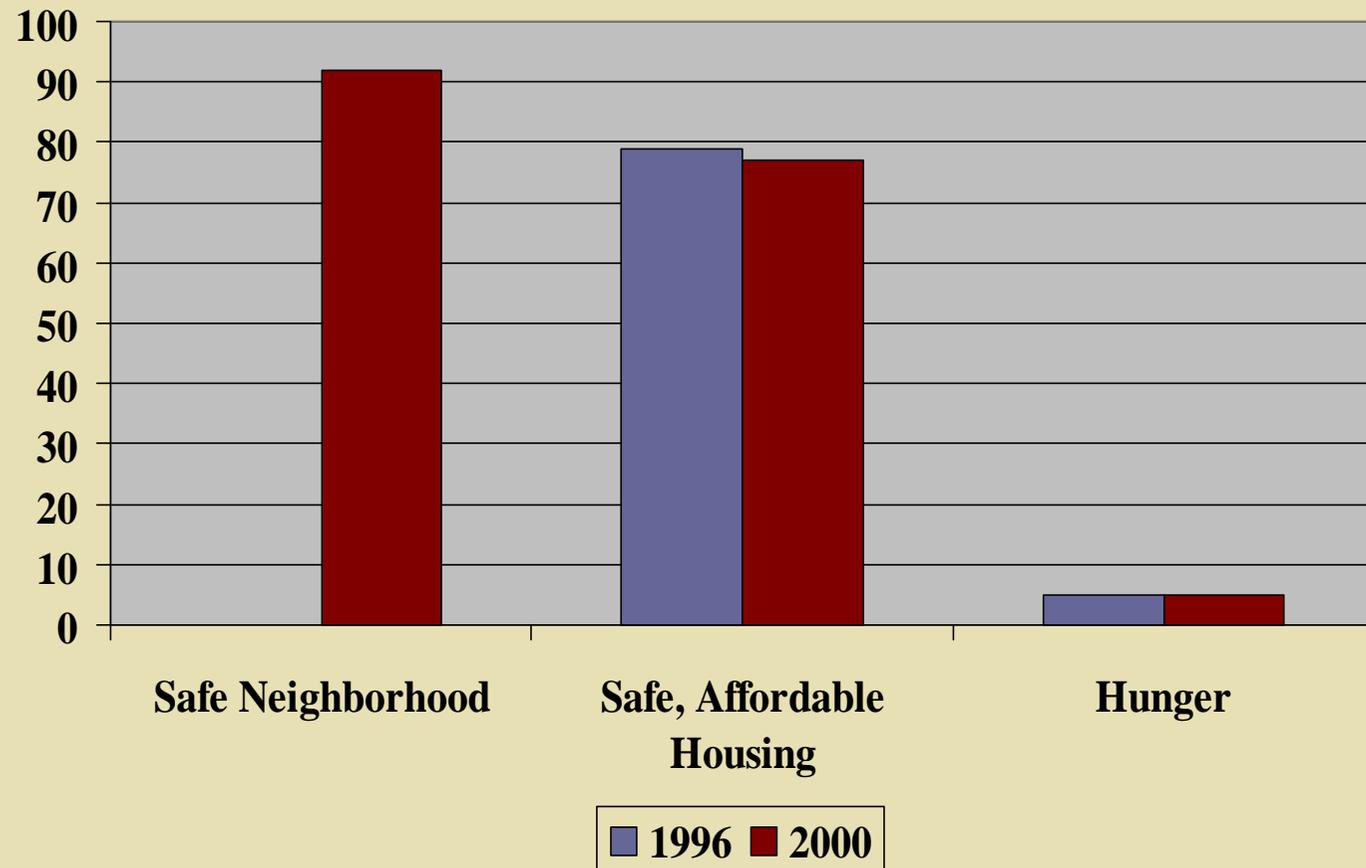
- ◆ Home ownership—IC has a large number of home owners who have lived in their homes for many years, about 10% of homes are used seasonally. The majority considers IC neighborhoods to be safe.
- ◆ Safe and affordable housing—Many (77%) residents feel there is enough safe and affordable housing. Of concern are rising numbers of persons seeking shelter (homeless).



Quality of Life & Social Context

- ◆ Social support—Most residents have someone to help them with their emotional needs and/or social support
- ◆ Nutrition—About 5% of residents were concerned about having enough food
- ◆ Language—92% of IC residents speak English as their primary language

Social Context/Quality of Life



A collection of military medals and a pair of glasses are arranged on a light-colored, textured surface. On the left, a blue ribbon with a red and white checkered pattern is pinned to a dark brown board. Below it, a blue ribbon with a white and red checkered pattern is also pinned. Two silver Maltese crosses with gold centers are visible, one above the other. A pair of gold-rimmed glasses with thin temples is placed in the center. In the bottom left corner, a circular compass is partially visible. The text "General Health Status" is written in a simple, black, sans-serif font on the right side of the image.

General Health Status

General Health Status

- ◆ Average life expectancy is 80.2 years.
- ◆ Many IC residents rate their health as excellent or very good with 10% reporting their health as fair or poor.
- ◆ About 10-15% residents have a health problem/impairment that affects their functioning (almost half are in pain). Limitations and disabilities increase with age. Family members offer the most help with care needs, however 5% had no one to help.



General Health Status

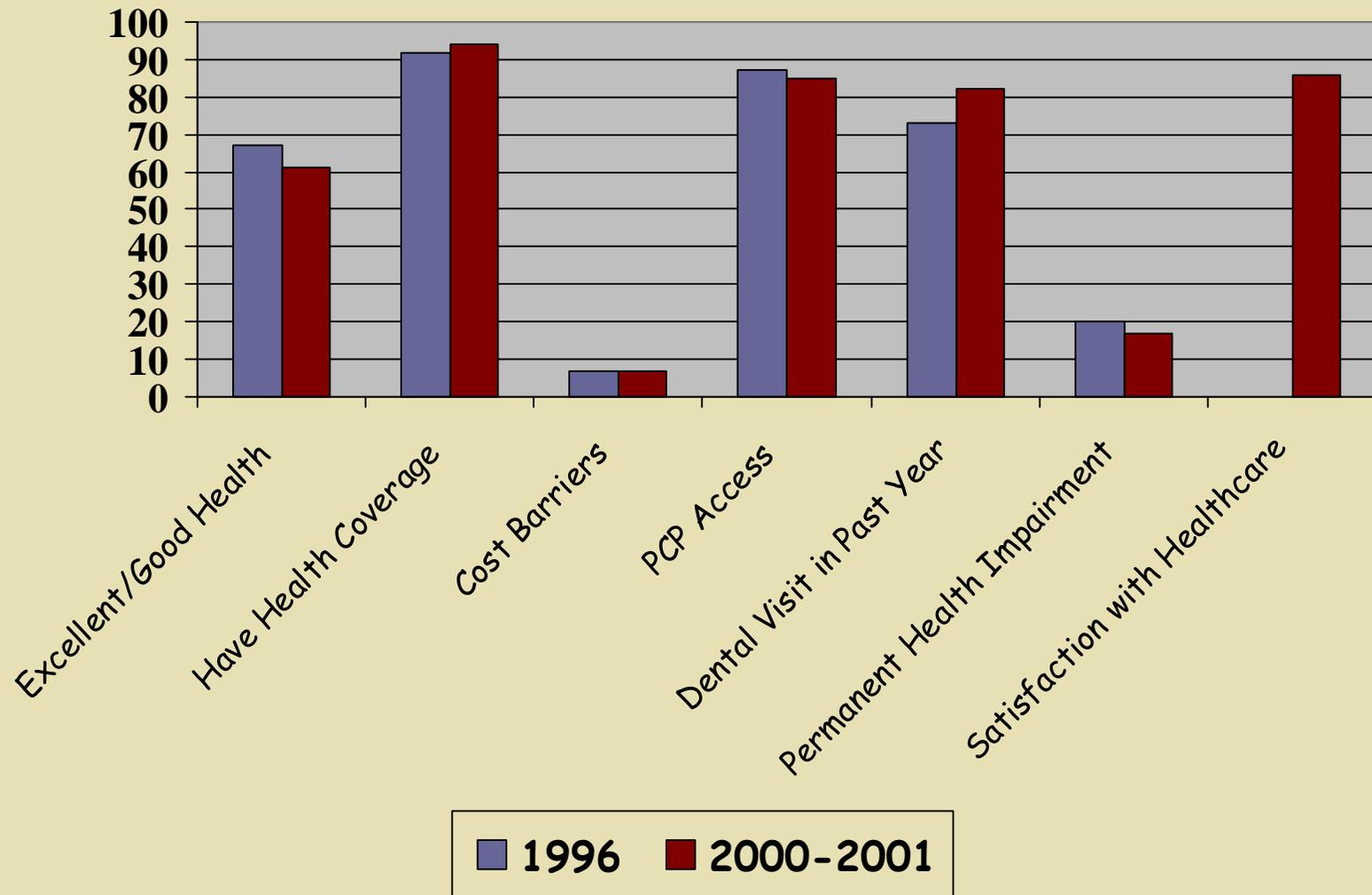
- ◆ The principle causes of death in IC for ages 1-64 are largely preventable.
- ◆ Almost 10% of the population reported sleeping poorly for 3-30 days a month.
- ◆ Poverty is associated with poor health status. BRFSS respondents earning \$20,000 or less had higher levels of poor/fair health compared to those earning more than \$20,000 (25% vs. 6%).



A collection of military medals and a pair of glasses are arranged on a wooden surface. The medals include a red ribbon with a circular emblem, a blue ribbon with a circular emblem, and two silver Maltese crosses with central emblems. A pair of gold-rimmed glasses with thin temples is positioned in the lower center. A circular compass is visible in the bottom left corner. The background is a light-colored, textured surface.

Health Care: Access,
Satisfaction &
Coverage

Findings: Health Status and Access Trends



Healthcare Coverage

- ◆ Most persons had health coverage (94% vs. 90.2% in WA and 88.1% US). Most (56.5%) had current coverage > 5 years. Lack of insurance was associated with low income, mid-age (35-54), having children at home, and/or living on Camano Island. Most uninsured (54%) could not afford premiums.
- ◆ Health insurance is primarily government-based (44% Medicare, Military, or Medicaid). Over one quarter had a second form of health insurance, particularly among >65.
- ◆ Much regional variation ranged from a low of 4.2% uninsured in North Whidbey to 11.0% uninsured in Camano--directly related to military coverage.





Health Care Findings

- ◆ Overall IC residents are satisfied with the health care system (85% rate excellent, very good or good).
- ◆ Most(85%) residents had a clinic/place they go with their health concerns and many residents were getting preventive care.
- ◆ Eight percent of residents had been unable to fill a prescription due to cost.

Environmental Health





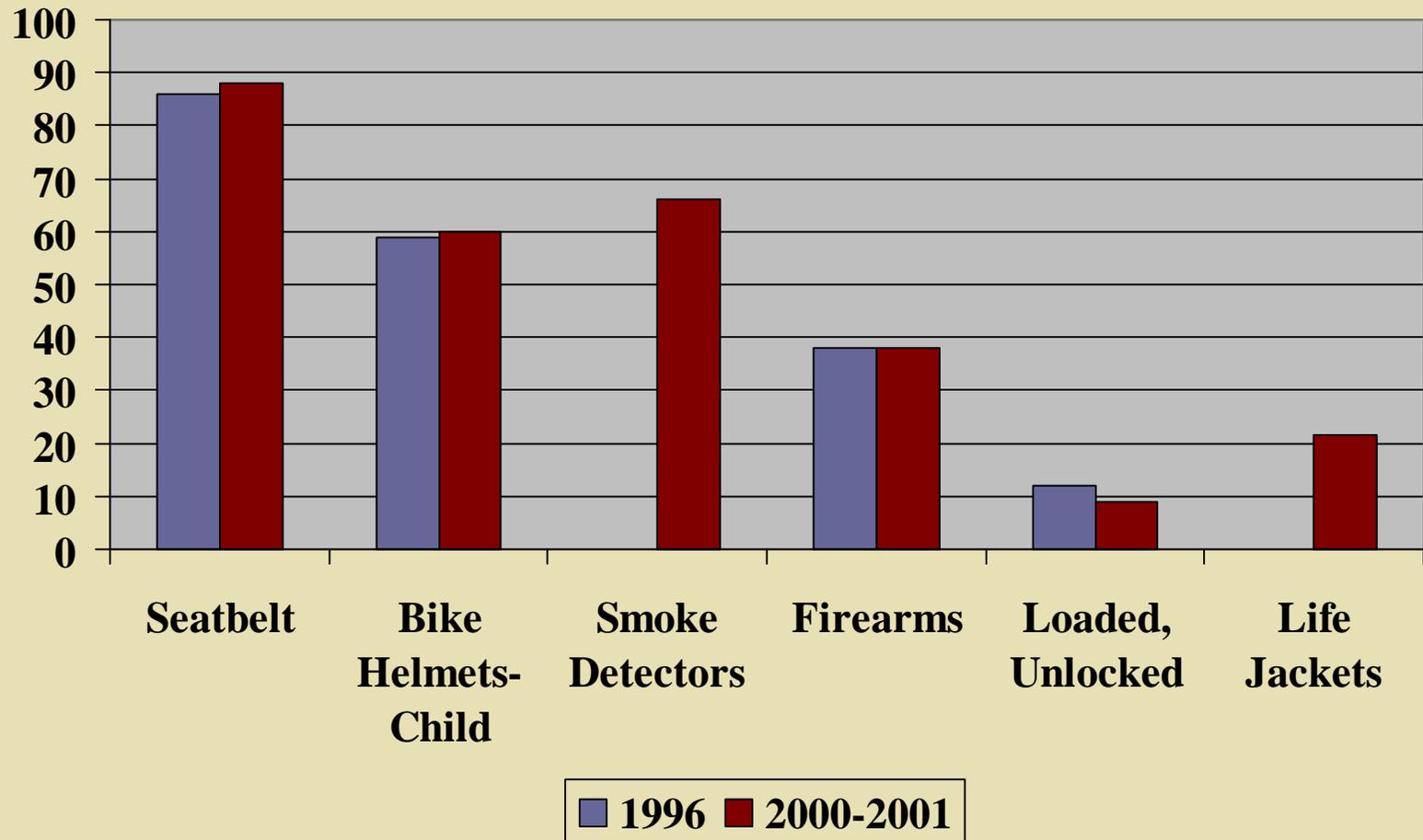
Environmental Health

- ◆ Overall our physical environment is very healthy.
- ◆ Almost 70% of residents are served by on-site sewage systems.
- ◆ 15-20% of IC wells may not meet the new EPA arsenic standards for large water systems.
- ◆ IC responds to and investigates 10-20 foodborne illnesses a year. IC had more than normal outbreaks in 2000 (Salmonella, Shigella and Giardiasis) and 2002 (Norwalk-like).
- ◆ IC had the first horse with West Nile Virus in 2002 and 2 bats tested positive for rabies in 2003.
- ◆ 6% of residents report being chemically sensitive.

Unintentional Injury



Unintentional Injury Factors



Unintentional Injury

- ◆ Motor vehicle accidents are the leading cause of unintentional injury death to persons < 65, almost 13% of IC residents do not always wear their seatbelt.
- ◆ Firearms: 38% of adults surveyed had firearms in the house, 47% of those were unlocked, 21% were loaded (about 50% of these were also unlocked).
- ◆ Drowning/boat safety: 37% of adults surveyed had been in a small boat (< 20 ft.) in the past year. Of these 21.6% never wear a lifejacket. IC had 3 drownings in 2001.
- ◆ Falls constitute the highest number (65%) of non-fatal hospitalizations for unintentional injury.

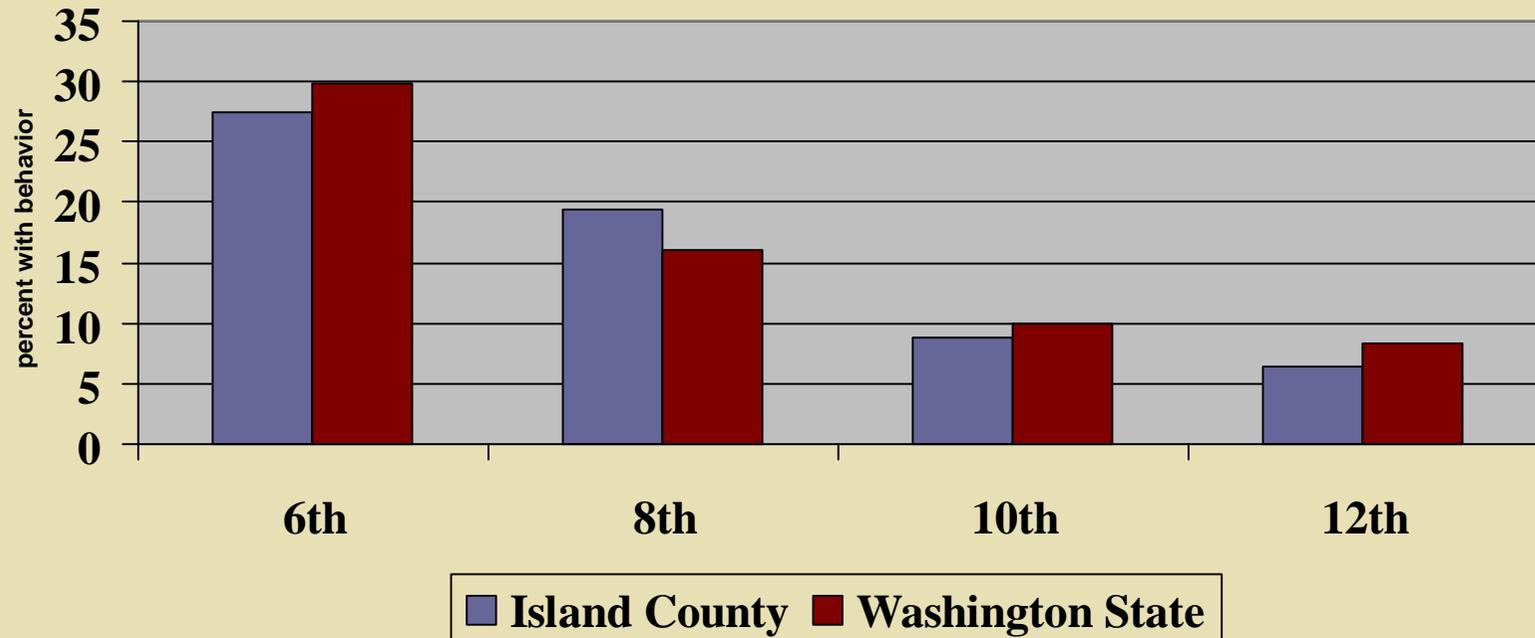


Always Wore a Bicycle Helmet

Of concern are the 16.7% of children who use bicycle helmets sometimes (6.3), seldom (3.1) or never (7.3), according to parent report (BRFSS).

Washington State and Island County, 2002

Source: Healthy Youth Survey



Infectious Disease



Infectious Disease

- ◆ Pertussis (whooping cough): Island County continues to experience outbreaks of pertussis (34 cases in 1999 and 10 cases in 2000) . . . almost exclusively among unvaccinated children.
- ◆ Hepatitis A, B, and C: IC had 10 cases of Hep C in 2001 and 25 cases in 2002.
- ◆ STDs: STD rates are higher in IC than the State average... and are rising each of the past 3 years with chlamydia being by far the most common STD (80% of the cases occurring among those ages 15-24) and rates doubled between 2001-2002.

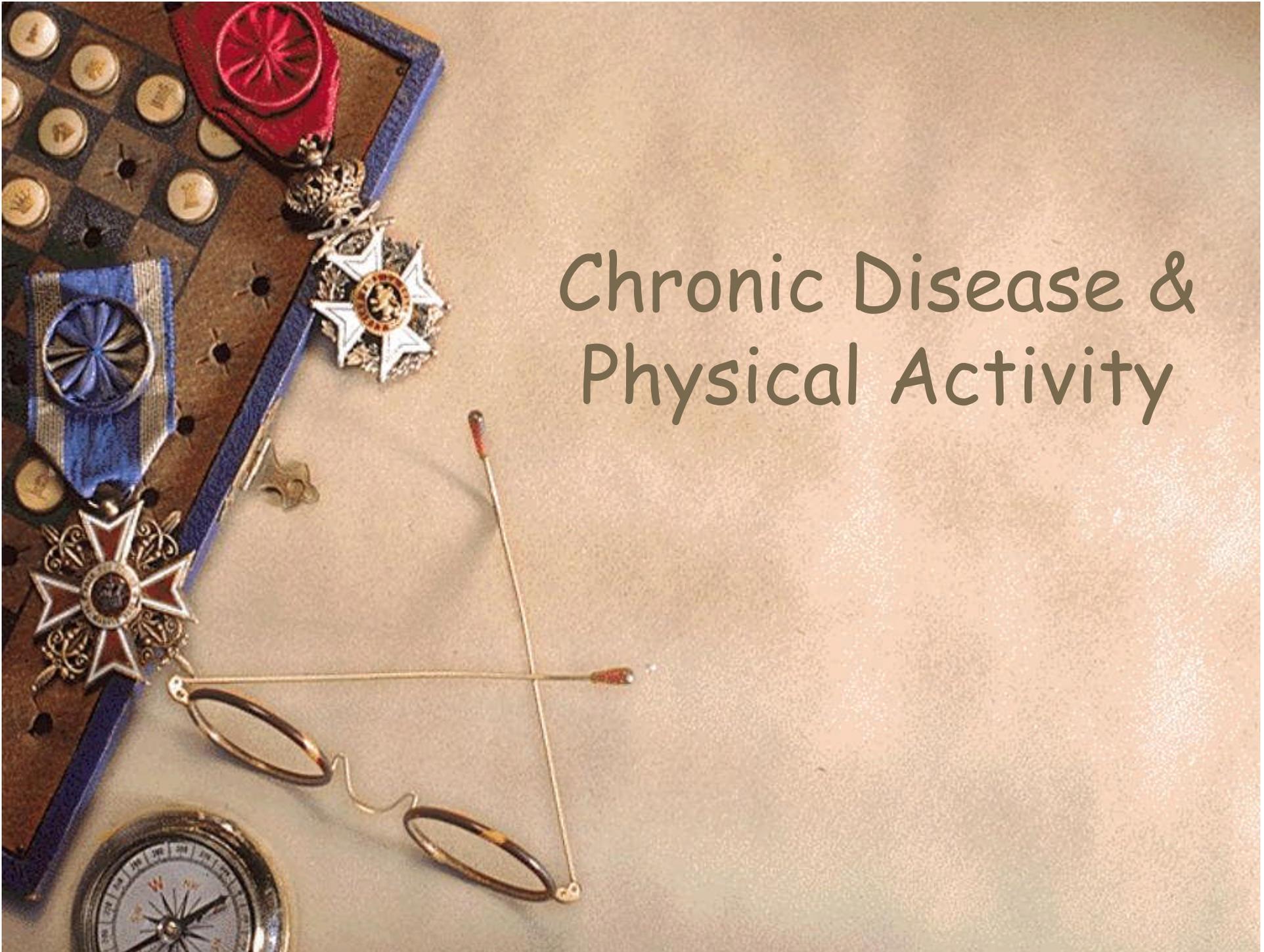




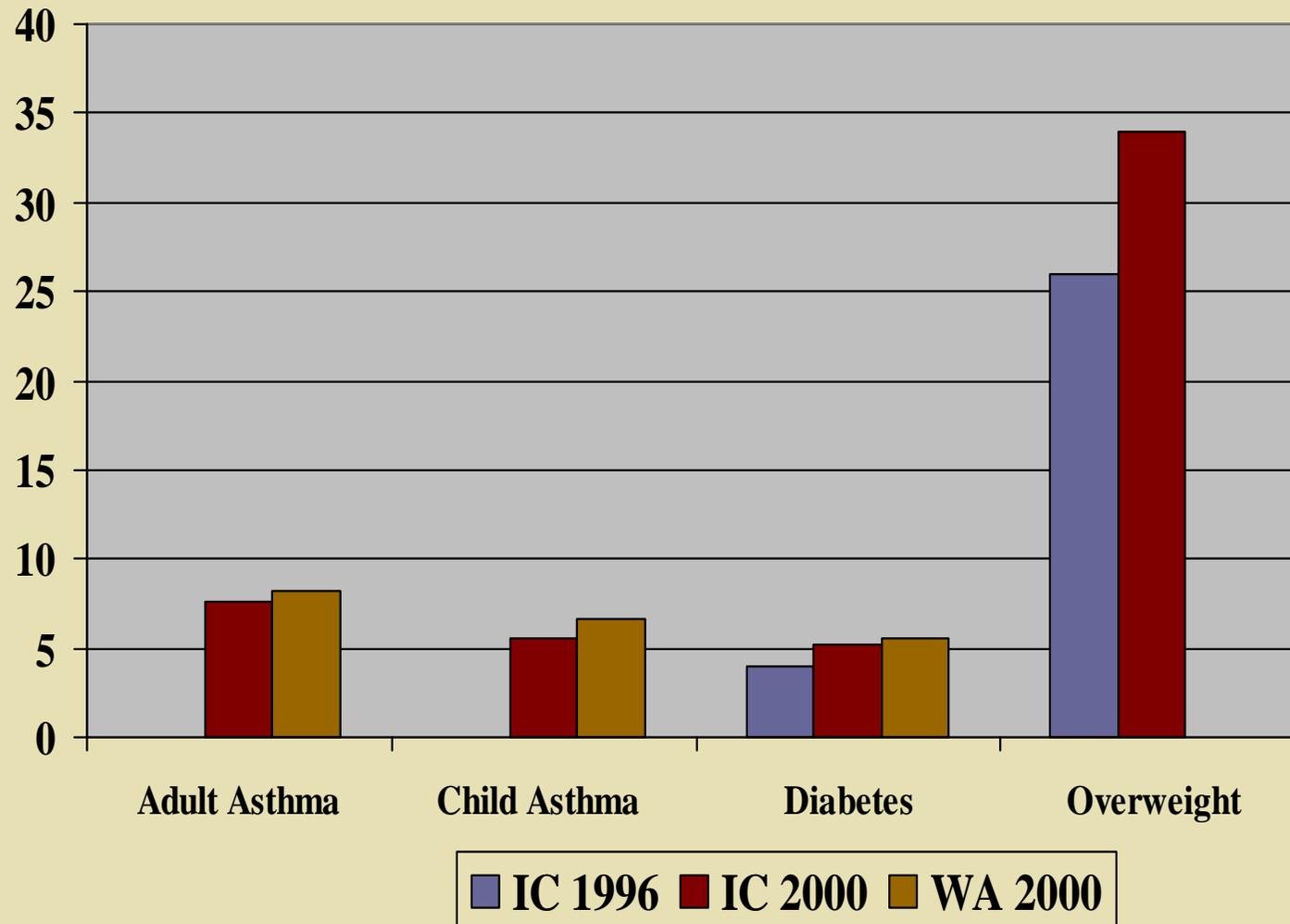
Infectious Disease Issues

- ◆ Influenza: Pneumonia and influenza deaths together constitute the 6th leading cause of death. In 2000-2001, 67% of adults > 65 years received shots for the flu and 71% for pneumonia.
- ◆ Tetanus: Almost one quarter (23%) IC adults were not or did not know if they were up-to-date on their tetanus shot.

Chronic Disease & Physical Activity



Findings: Chronic Disease



Heart Disease

- ◆ Cardiovascular Disease: Diseases of the heart are the leading cause of death in IC. Increases in reported incidence of heart attack (4 to 5.1%), angina (3 to 5%) and stroke (2 to 2.6%) since 1996.
- ◆ High blood pressure (Hypertension): High blood pressure affects 28.5% of IC adults, this has increased from 1996 (22.8%). IC levels are above WA (22.1%) and US (23.9%) levels and significantly higher than HP 2010 goals (16%).
- ◆ More IC adults are having their cholesterol checked, however, 18% of adults have never had a cholesterol screening.



Physical Activity & Overweight

- ◆ Overweight: Affects 34% of the adult population in IC, significantly increased since 1996 (26%). Significantly higher than HP 2000 and 2010 goals (20 and 15%).
- ◆ Obesity affects 5% of the adult population of IC; has increased since 1996 (from 4.1%).
- ◆ Physical Inactivity: 73% of IC adults are at risk for health problems related to lack of exercise. 26 conditions have been identified as caused or worsened by inactivity, including heart disease, high blood pressure, depression, obesity and some cancers.
- ◆ Diabetes: Affects 5% of IC adults.



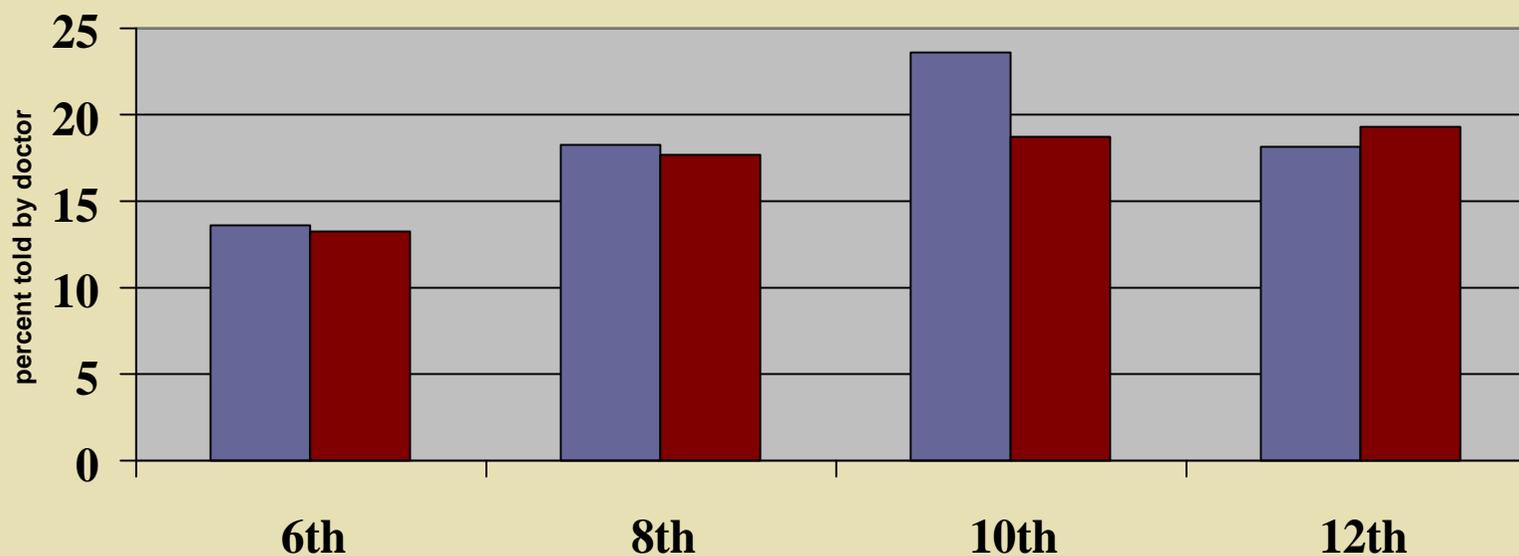


Asthma in Island County

- ◆ Adult Asthma: 10.9% of IC adults report that they have been diagnosed with asthma (WA 11.9%, US 10.5%). Is often considered to be an environmental disease and there are well known "triggers" that exacerbate symptoms (tobacco smoke, dust mites, etc.).
- ◆ Pediatric Asthma: 14% of adults in IC said that they have at least one child that has been diagnosed with asthma. Most common disease of childhood; leading cause of absence from school and 4th leading cause of disability in children.

Youth Told by Doctor Had Asthma

Told by Doctor had Asthma, Washington State and Island County, 2002

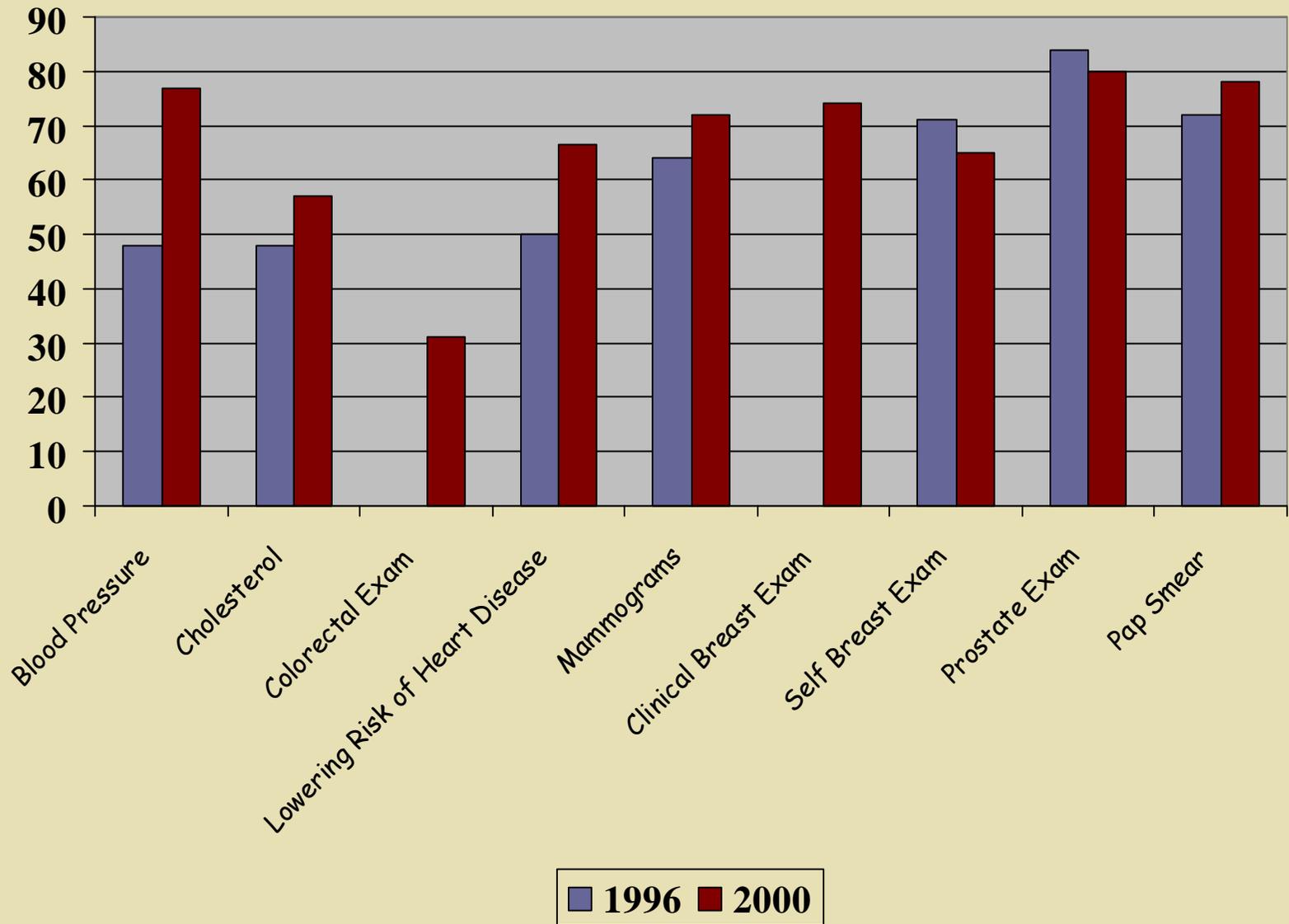


Grades, Source: Healthy Youth Survey

■ Island County ■ Washington State



Findings: Preventative Health



Maternal-Child Health





Maternal-Child Health

- ◆ Fertility/Birth rates
- ◆ Adolescent Pregnancy
- ◆ Infant Mortality
- ◆ Low Birth Weight and Premature Infants
- ◆ Prenatal Care
- ◆ Children in Poverty



Early Childhood/Parent Support & Education

- ◆ There is a lack of programs and/or resources available to new parents and/or children in overburdened families (“at risk”).
- ◆ There is an increase in child abuse reports in the past two years.



Child Care Findings

- ◆ Many families (45.1%) reported having few, one, or none choices for childcare.
- ◆ Many (16.2%) children being cared for by relatives (.9% in WA).
- ◆ 6% report provider doing poor/very poor job responding to child's emotional needs (1.7% WA).
- ◆ Poor/very poor safety ratings (6% vs. WA's .9%) and for cleanliness (6.8% vs. WA's .9%).

Oral Health



Oral Health Findings

- ◆ Pediatric dental care: Over 10% of families with children wanted dental care for their child in 2 years previous to the BRFSS but were unable to get it. Since that time, IC Health Department has started the ABCD Program.
- ◆ Adult dental care: 18% of adults had not seen a dentist in year prior to the BRFSS survey, of those, 22% did not see a dentist because of cost. 65% of adult respondents have some form of dental insurance.



Mental Health



Mental Health

- Scarce resources for mental health prevention services: IC has very few education/outreach resources or support groups focused on mental health.
- Demand vs. resources for mental health services and ineffectiveness of state structure.
- Depression: IC adults with health impairments most frequently reported depression/anxiety/emotional problems (25.8%). IC lost 43 residents to suicide in 1996-2001.



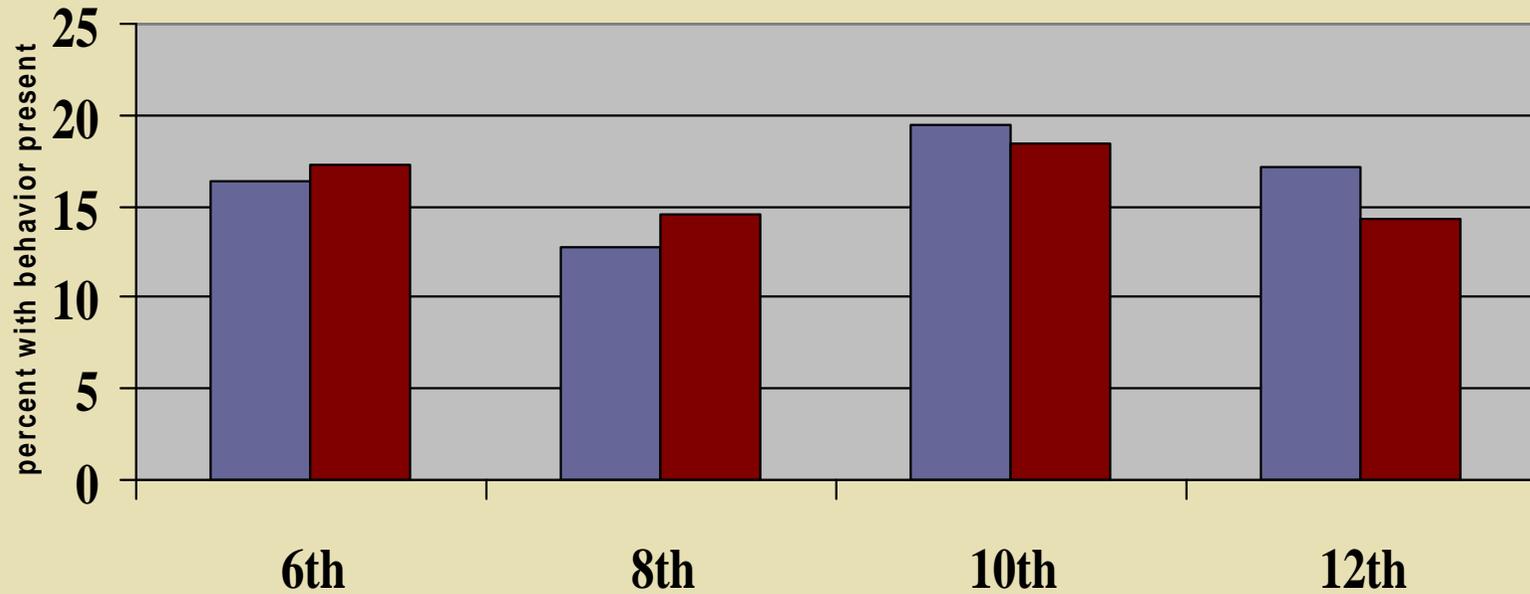


Mental Health

- Scarce resources for child/adolescent mental health: There is limited access to child/adolescent mental health professionals in Island County (e.g. hard to find a provider who will accept private insurance--improving).
- Resource "gap" for working poor and/or uninsured adults: There are few mental health professionals able to see persons on a sliding fee scale, and individuals are often unable to pay for services out-of-pocket. Many insurance programs limit their provision of mental health services.

Youth Suicide Consideration

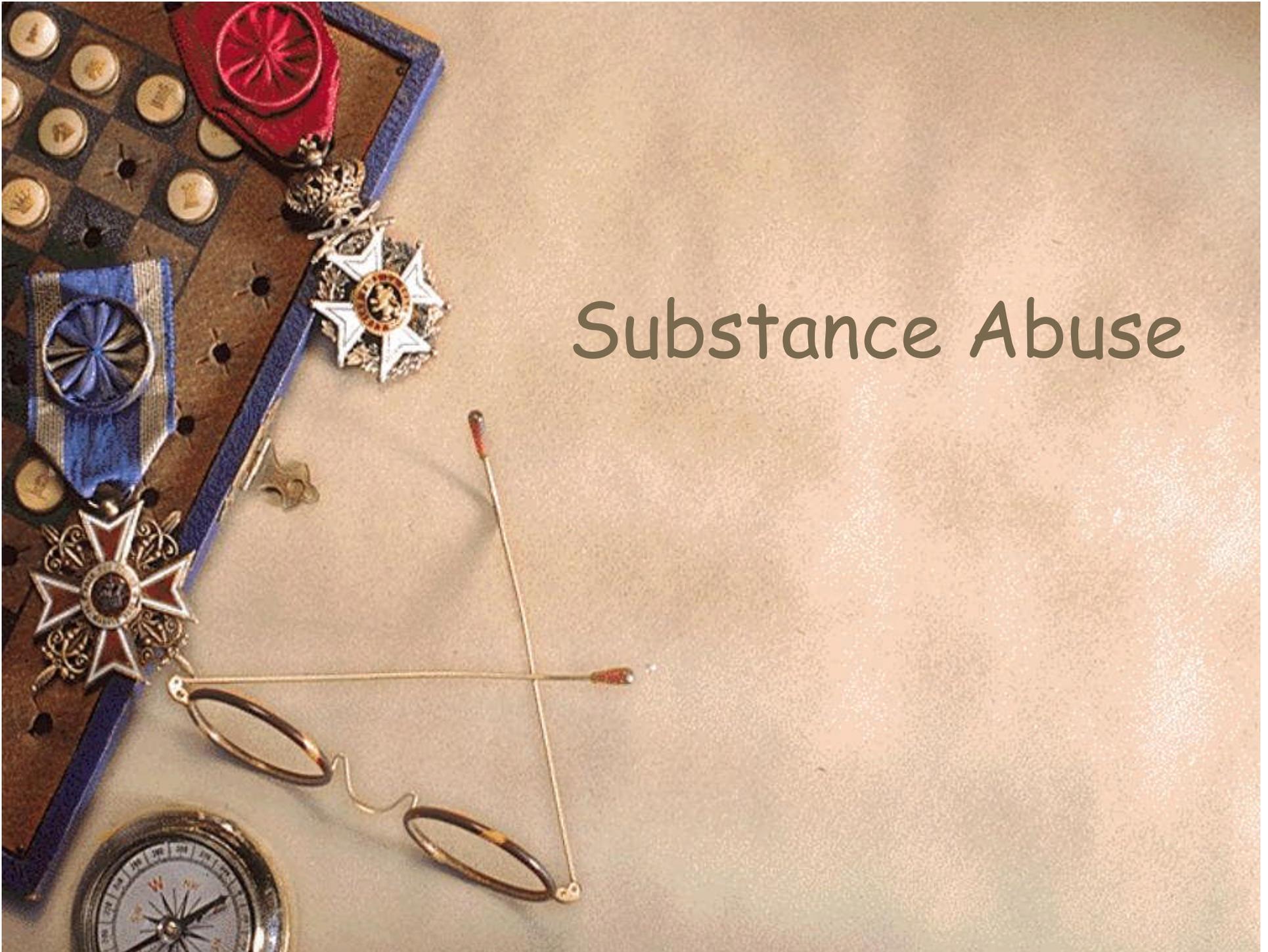
During the Past 12 months, Ever Seriously Consider Suicide,
Washington State and Island County, 2002



Grades, Source: Healthy Youth Survey

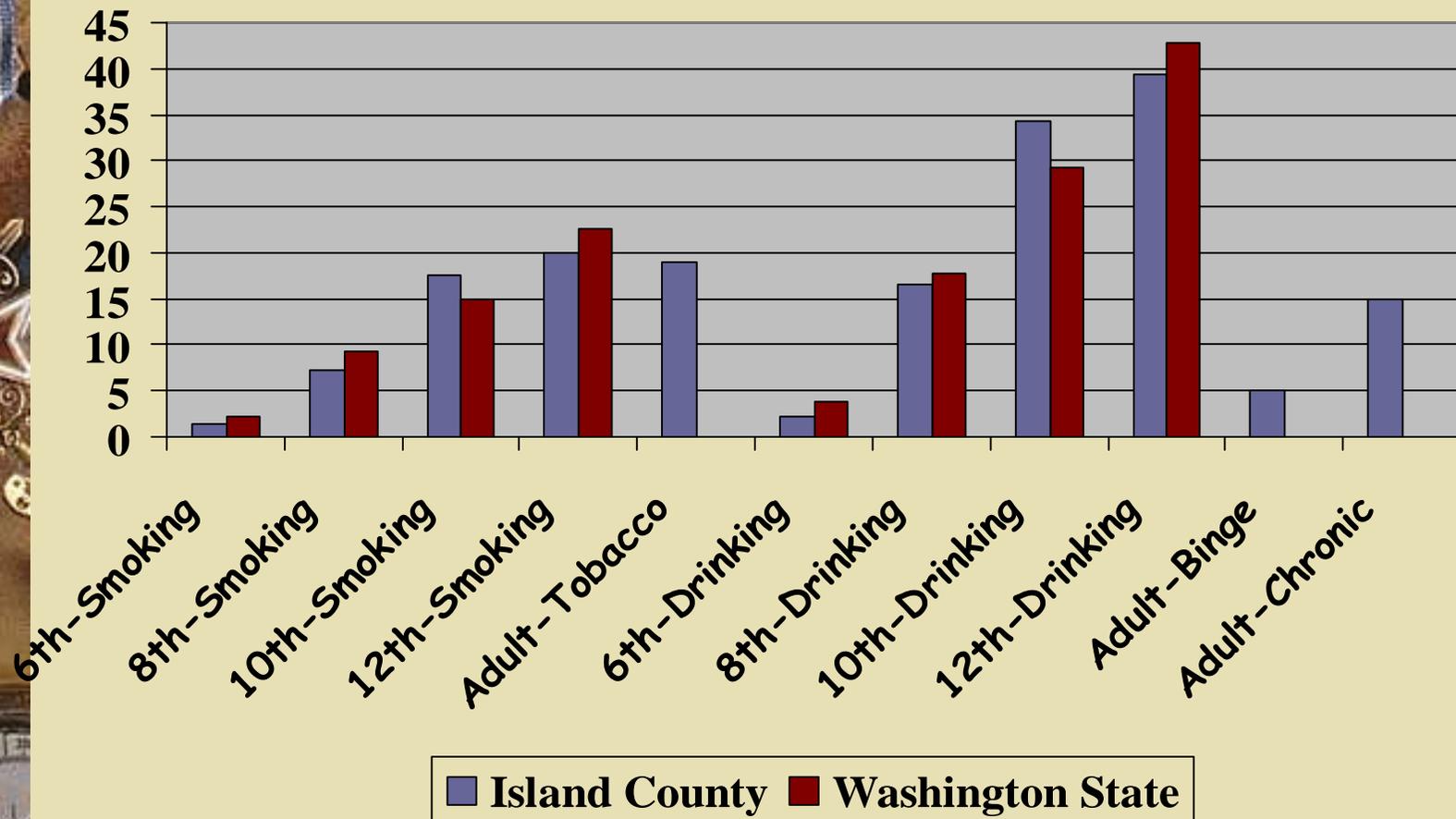
■ Island County ■ Washington State

Substance Abuse



Substance Use in Past 30 Days

Source: Healthy Youth Surveys and BRFSS



percent with behavior

Substance Abuse-Tobacco

- ◆ Smoking / Tobacco consumption is the leading preventable cause of death in the US. 19% of IC adults are at risk for smoking related illnesses.
- ◆ Percent of all adults that smoke in IC (19%) is lower than WA state (24%) or US (23%), but those that smoke in IC smoke more packs of cigarettes per day.
- ◆ Downward trend in youth smoking, from 1998 to 2002, IC data shows a 10% drop in smoking among 12th graders (30%-20%). Lower than the US rates across grades.



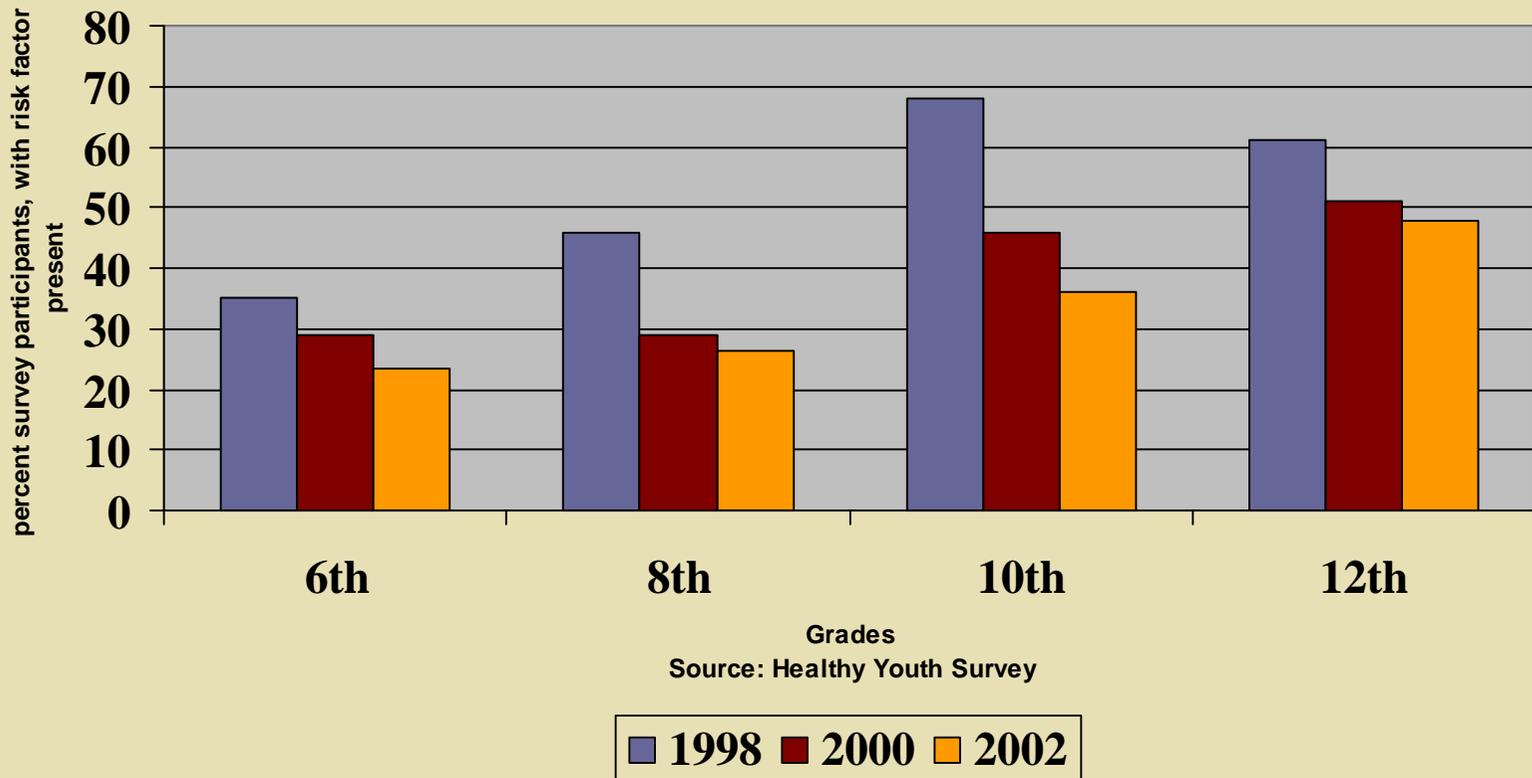


Substance Abuse-Alcohol

- ◆ Percent of IC adults that consumed 60 or more drinks in the last 30 day period is higher than that of WA state (5% vs. 3%).
- ◆ Adult Binge Drinking: Has increased since 1996 (13.3 to 15% of adults), is higher than WA state (14%), lower than the US (16.6%) and significantly higher than the HP 2010 goal (6%). Is especially prevalent in the 18-24 age group and in North Whidbey.
- ◆ Youth Alcohol Use: Lower than WA state and US rates; still 17% of 8th graders, 34% of 10th graders and 39% of 12th graders report using alcohol in last 30 days.

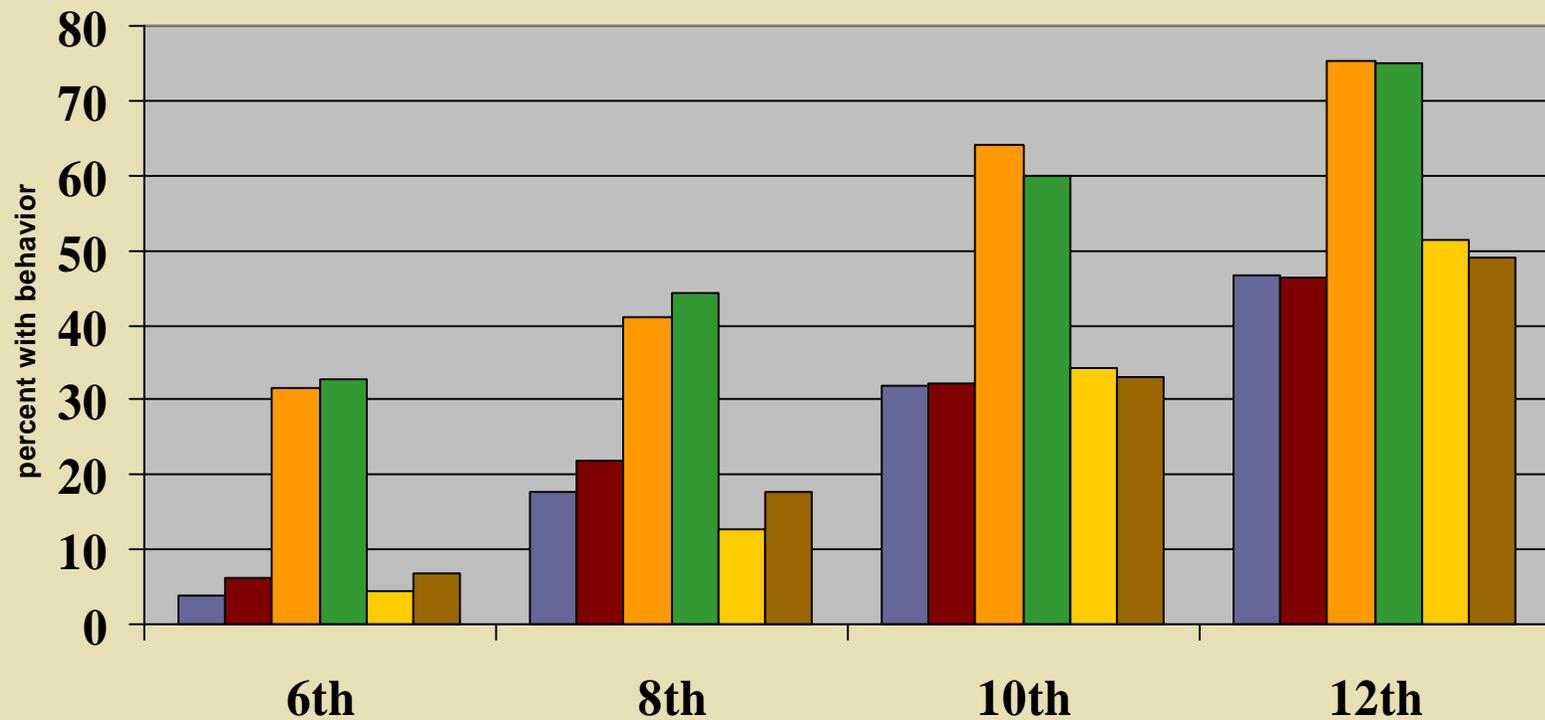
Perceived Availability of Drugs

Perceived Availability of Drugs, Island County, 1998-2002



"Any Lifetime Use" of Substances

Island County and Washington State,
Healthy Youth Survey, 2002



■ Tobacco--IC

■ Tobacco-WA

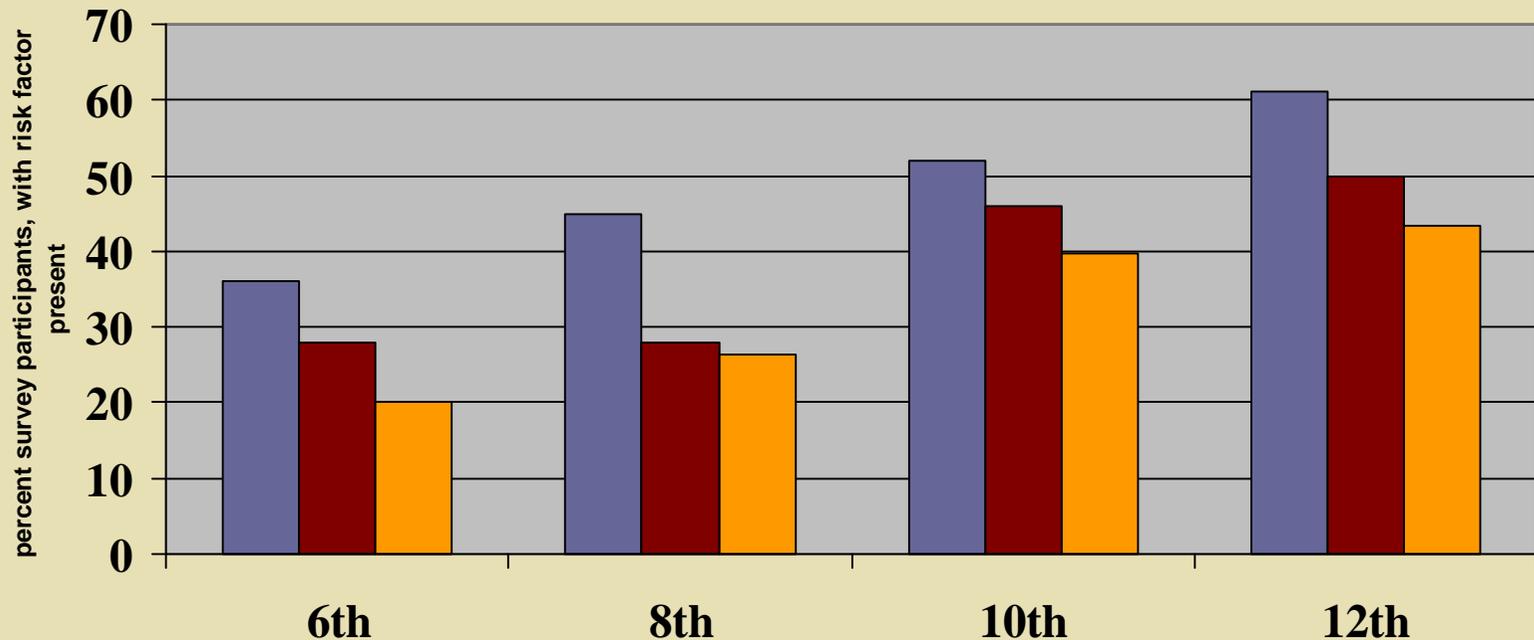
■ Alcohol-IC

■ Alcohol-WA

■ Illicit Drugs-IC

■ Illicit Drugs-WA

Favorable Attitudes Toward Drug Use



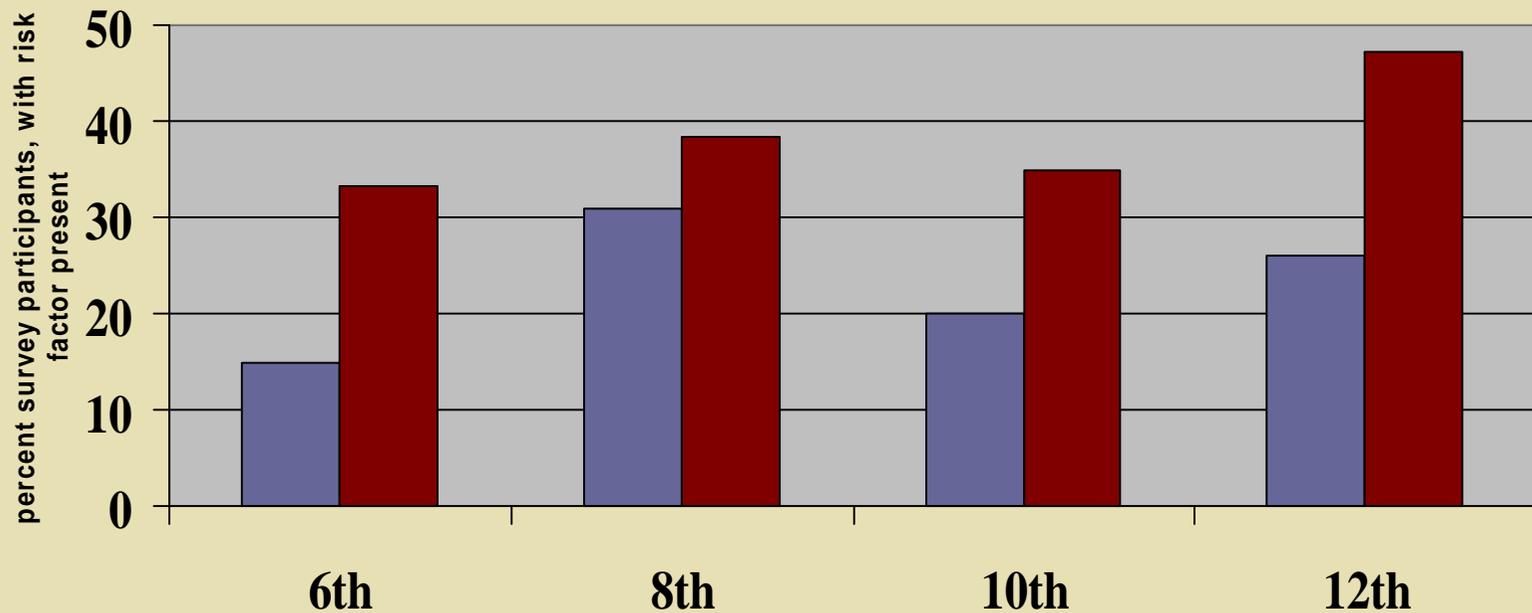
Source: Healthy Youth Survey

■ 1998 ■ 2000 ■ 2002



Perceived Risks of Drug Use

Perceived Risks of Drug Use, Island County 2000-2002

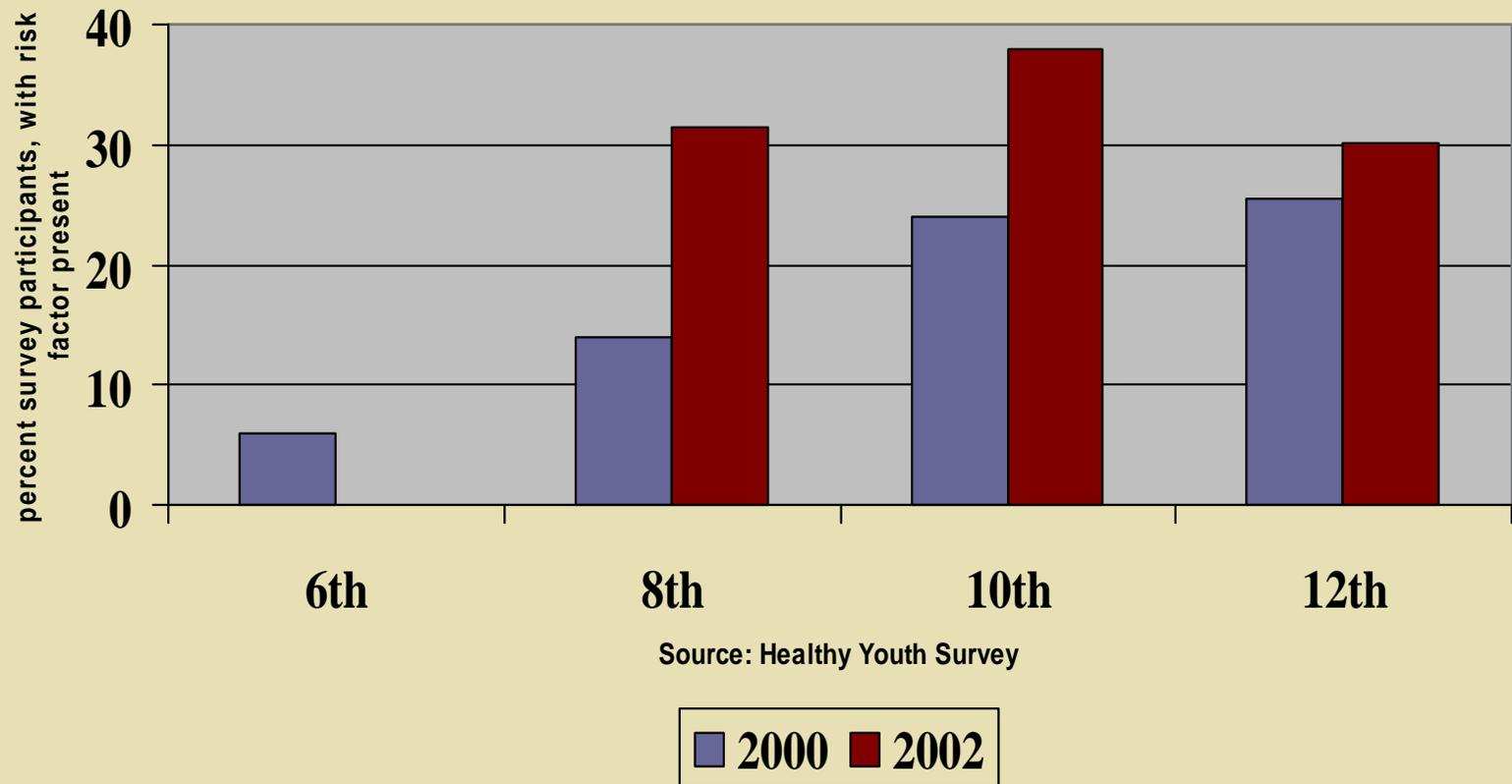


Source: Healthy Youth Survey



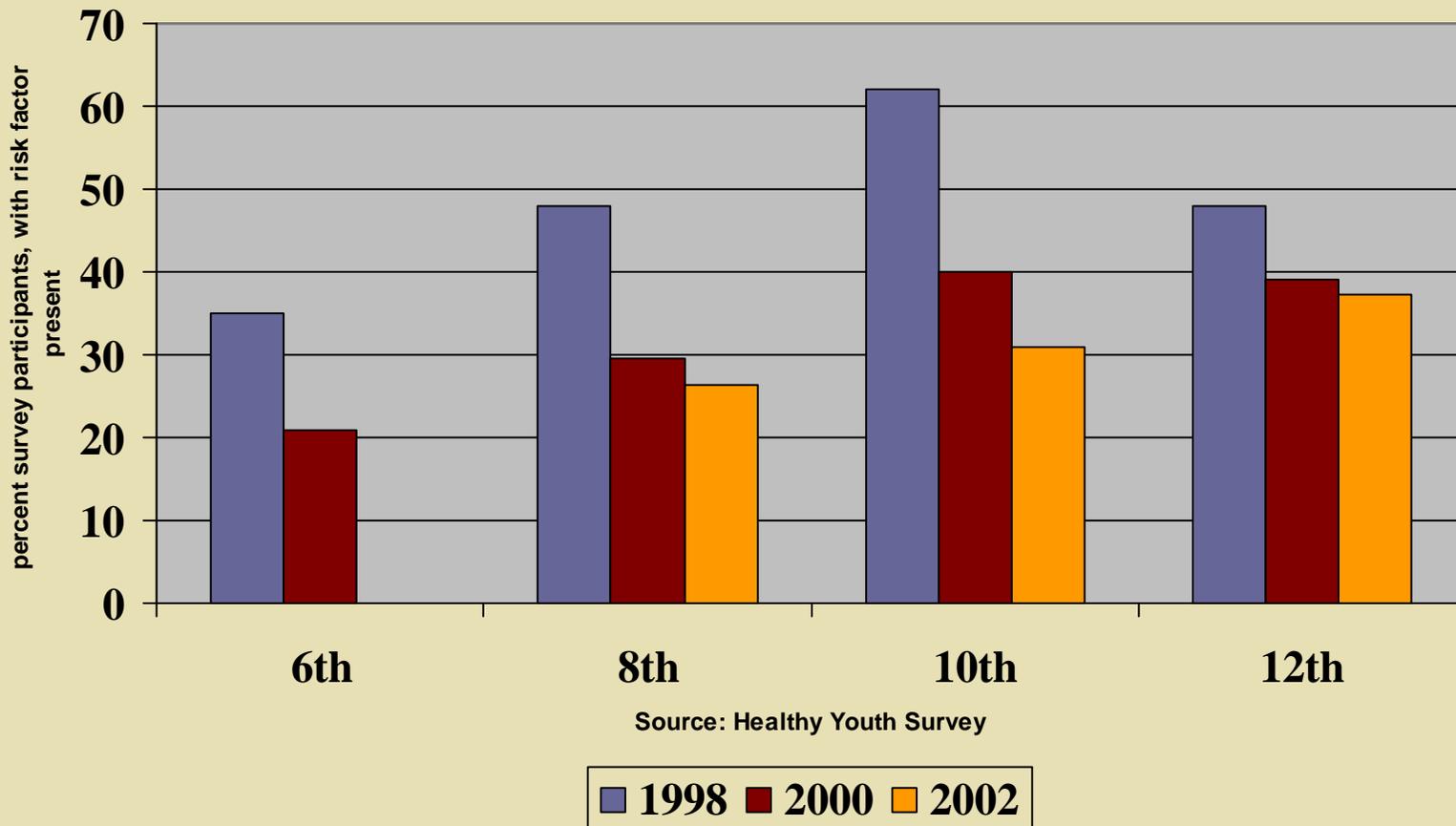
Intentions to Use

Intentions to Use, Island County, 2000-2002



Friends' Use of Drugs

Friends' Use of Drugs, Island County, 1998-2002



Crime & Violence

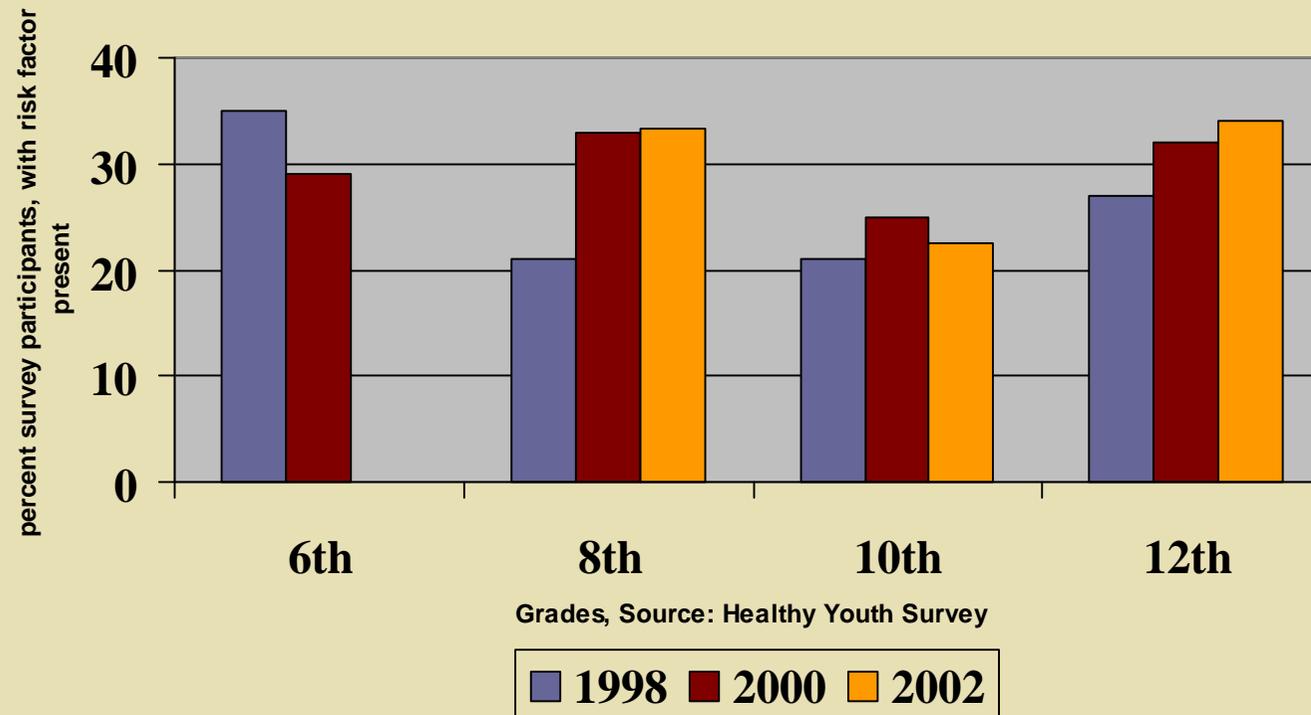


Crime & Violence

- ◆ The number of children (and percent of all children) age birth to 17 referred as victims of maltreatment and judged to merit an investigation has increased in Island County (394 in 1998, 441 in 2000). In 2000-2001 there were 2 incidents of child homicide.
- ◆ There is a lack of programs and/or resources available to new parents and/or parents in families that are "at risk". This issue was added by CHAB to reflect the belief that early intervention/prevention programs for young children and their families (e.g. the Healthy Families project), are a demonstrated way to prevent violence in society.

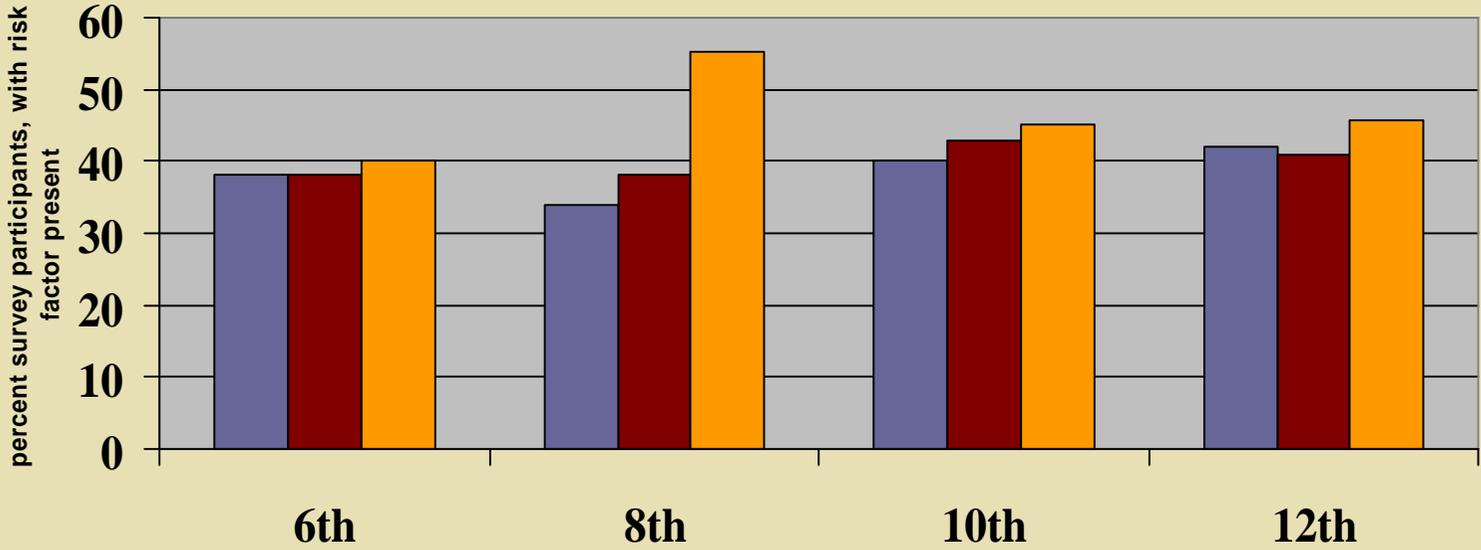


Perceived Availability of Handguns



Academic Failure

Academic Failure, Island County, 1998-2002

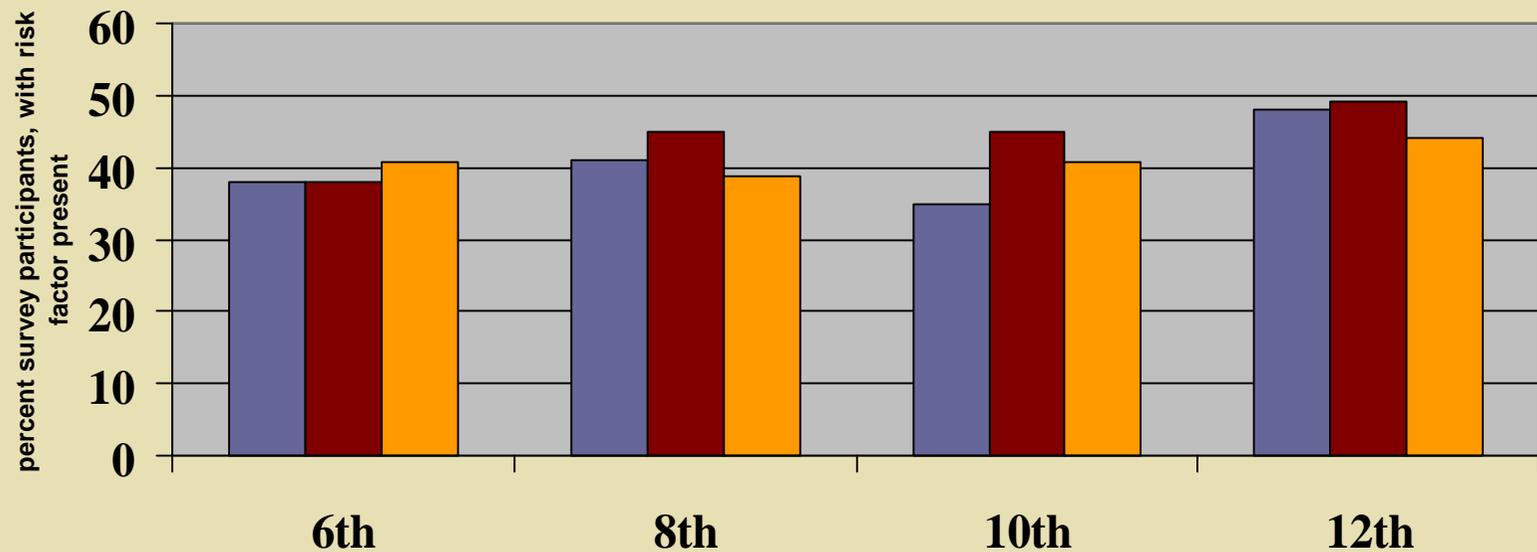


Source: Healthy Youth Survey



Low Commitment to School

Low Commitment to School, Island County, 1998-2002



Source: Healthy Youth Survey



Regional Variations



Island County Regions

- ◆ The Health Department divides the county into four planning regions: North, Central and South Whidbey Island and Camano Island.
- ◆ Half (51%) of the population lives in North Whidbey, 30% in other parts of Whidbey and 19% on Camano. North Whidbey was the slowest growing, while Camano grew 53.6% and South and Central Whidbey grew by more than one-third. North Whidbey has the youngest population while Central Whidbey has the oldest. North Whidbey is most racially/ethnically diverse. North Whidbey had the lowest incomes while Camano had the highest incomes.



Regional Variations

- ◆ Health Care: Satisfaction, Coverage and Access
 - Camano Island had the highest rate of uninsured (11%) (IC average is 6%) and employment-based insurance (67.1%).
 - North Whidbey: Highest rate (95.8%) of health insurance, with 42.4% having military coverage.
 - Dental Concerns: South Whidbey and Camano
- ◆ Seatbelt/bike helmet/lifejacket use (e.g. North Whidbey highest rates of seatbelt and bike helmet use, Central and South Whidbey had lower rates of lifejacket use)
- ◆ ↑ Tobacco use (North Whidbey)
- ◆ ↑ Environmental concerns (South Whidbey)
- ◆ ↓ Asthma rates (Central & South Whidbey)





Other Regional Variations

(see more in: Definition of Island County and in each chapter)

◆ Substance Abuse (Alcohol)

- North Whidbey: Don't drink on as many days as other regions but when they drink they drink more (27.3% had 3+ drinks at one time and 11.9% of those had 5+ drinks).
- 7.5% of respondents had drunk 5+ drinks, 5 or more times in the previous month, a total of 12.1% had drunk 5+ drinks, 3 or more times in the past month.
- Very definitely correlated to the 18-24 year olds
- South Whidbey: 26.5% of respondents drank on 16+ days in the past month (16.8% IC).

Findings: Summary

- ◆ A number of health concerns are prevalent throughout the entire county.
- ◆ The four regions of Island County do vary significantly.
- ◆ Responses may be targeted at the entire county or regionally.
- ◆ Regional partnerships or agencies serving particular areas are encouraged to dialogue with each other, explore effective community interventions, and plan for health interventions aimed at areas of concern.



Health Care Priorities of Island County Boards





Advantages of Community Involvement in Decision-making and Priority-setting Based on Data are...

- ◆ Better public understanding of relationship between regulation and the prevention of disease
- ◆ Increased public support for health programs
- ◆ Increased access to local non-governmental resources



Expectations & Objectives

- 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
- Educate staff and community



Island County Community Health Advisory Board (CHAB)

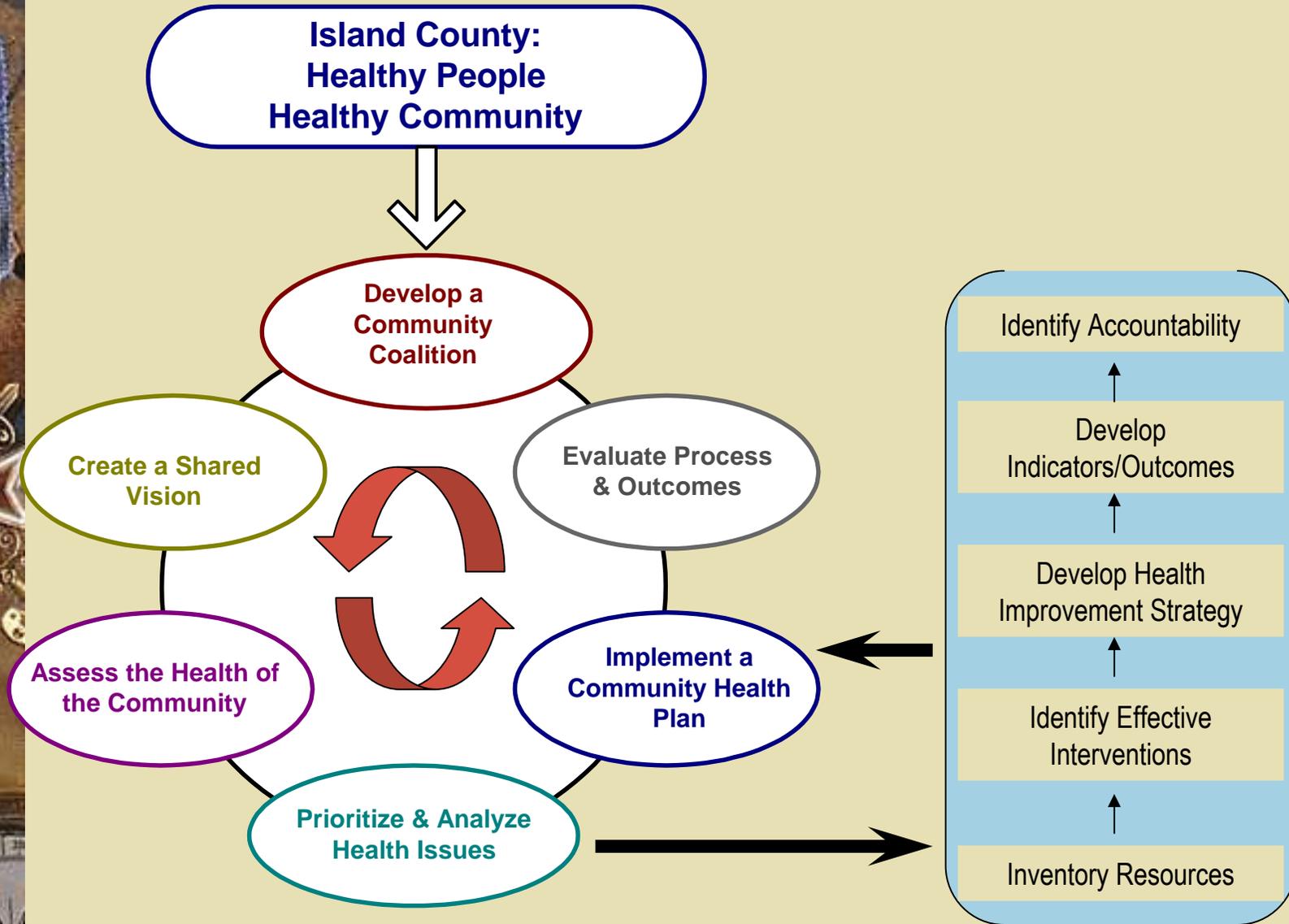
- ◆ CHAB is Island County Community Health Advisory Board (CHAB)
- ◆ Composed of 21 community members and 8 student members appointed by the Board of Health
- ◆ Selected to represent various regions, systems, agencies, and population subgroups



Role of CHAB

- ◆ Advise board of health
- ◆ Develop action plans
- ◆ Recommend policy
- ◆ Write letters of support
- ◆ Form and/or participate in coalitions
- ◆ Inform/educate the public
- ◆ Develop partnerships
- ◆ Make project/program recommendations

CHAB Community Health Process Model



Priority Issues

Early Support
for Infants/
Parents

- Parent Support
- Parent Education
- Child Care Choice

Preventive
Health
Screening

- Adult Immunization
- FOBT/Colonoscopy
- Pap Test
- STD Rates
- Pediatric Dentistry

Mental
Health
Services &
Resources

- Child/Teen
- Uninsured
- Prevention
- Resources
- Depression

Physical
Activity/
Chronic
Disease

- Overweight
- Hypertension
- Diabetes
- CVD
- Depression





Island County Environmental Health Assessment Team (EHAT)

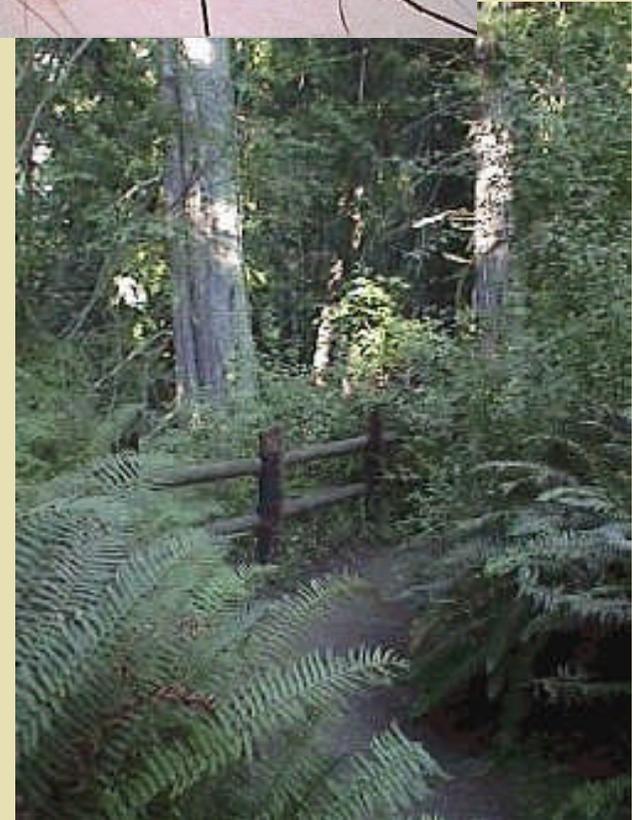
- ◆ EHAT is following the nationally recognized PACE-EH model (Protocol for Assessing Community Excellence in Environmental Health). Island County was one of the original pilot sites for the community focused, data-based assessment process with 13 tasks.
- ◆ The Island County Health Department and the CHAB jointly applied for a CDC grant to implement PACE-EH in Island County.
- ◆ Island County was selected and is funded by the Centers for Disease Control & Prevention through a 3-year capacity building grant.



Environmental Health Assessment Team

- ◆ Comprised of 25 citizen volunteers who were appointed by the Board of Health
- ◆ Members have diverse set of experiences, backgrounds, interests and viewpoints which represent Island County
- ◆ Have been actively meeting as EHAT since September 2002

Top 4 EH Issues of Concern





Other Health Department Community Advisory Boards

- ◆ IC Mental Health Advisory Board (Jackie Henderson)
- ◆ IC Alcoholism/Substance Abuse Advisory Board (Jackie Henderson)
- ◆ IC Developmental Disabilities Advisory Board (Jackie Henderson)
- ◆ IC Water Resources Advisory Committee (Sheilagh Byler)



Island County: Emerging Issues

- ◆ Low rates of childhood immunizations
- ◆ Vector-borne diseases—West Nile Virus, rabies, hantavirus
- ◆ High rates of STDs
- ◆ Infectious diseases—TB, Hepatitis



How Do I Access *The Health of Island County?*

- ◆ Island County Health Department--in Coupeville or any of the three branch offices
- ◆ At your local library
- ◆ Obtain a CD-rom disk



How Can I Support Such Work?

- ◆ Use the data and report your use to the ICHD—using the postcard or via e-mail
- ◆ Send ICHD your data and reports
- ◆ Help fund the next BRFSS and other health assessments
- ◆ Encourage your school district to continue to participate in the Healthy Youth Survey
- ◆ Participate in the BRFSS as well as state surveys



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