Cook County Community Health Assessment

Cook County, MN

2023-2027





Cook County Public Health and Human Services

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Grand Marais, MN 55604

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Executive Summary

The Cook County Community Health Assessment (CHA) represents a collaborative effort to better understand the factors that influence the health of those who live in Cook County Minnesota. Because we believe that everyone in Cook County deserves the opportunity to be the healthiest version of themselves, we also aim to pay close attention to the reasons that some segments of the population experience greater challenges than others in achieving this state of health.

To accomplish these goals, the CHA uses a variety of data sources, including local, regional, and state-level reports. These include: the Bridge to Health Survey, the Minnesota Student Survey, U.S. Census, focus groups and key informant interviews. The process of learning about and improving community is continuous, which means that this document will be updated as new data becomes available, with a more formal and significant revision happening on a five-year cycle.

In addition to gathering and reviewing data on health for Cook County, a committed group of community members gathered 3 times between summer 2022 and 2023 to discuss the information presented in the CHA, provide comment, and collectively prioritize areas of focus for the Community Health Improvement Plan (CHIP) using the Mobilizing for Action through Planning and Partnerships (MAPP) tool, developed by the National Association of County and City Health Officials (NACCHO). The phases of this process are straightforward: I) Build a foundation for health improvement, 2) Tell the community story, and 3) Continuously work to improve community health.

In embarking on this journey, community partners worked together with Cook County Public Health and Human Services to determine 6 health priorities for the 2023-2027 cycle. These include access to:

- 1) Affordable housing
- 2) Mental health resources and support for well-being
- 3) Affordable, quality childcare
- 4) Transportation options
- 5) Affordable, healthy foods
- 6) Physical health services

The CHIP takes the priority health areas and breaks them into actionable goals, objectives, strategies, and activities that guide health improvement work across agencies throughout the community into the future. This report will be separate, yet complementary to the CHA. County staff, together with partner agencies, will reconvene periodically throughout the five-year cycle to review progress toward these goals, deepen our understanding of the factors underlying health challenges for the community, and keep us accountable to ourselves and the public.

For any questions, concerns, or suggestions on how to improve the CHA/CHIP process in Cook County, contact: Grace Grinager, Public Health Supervisor, grace.grinager@co.cook.mn.us.

Acknowledgements

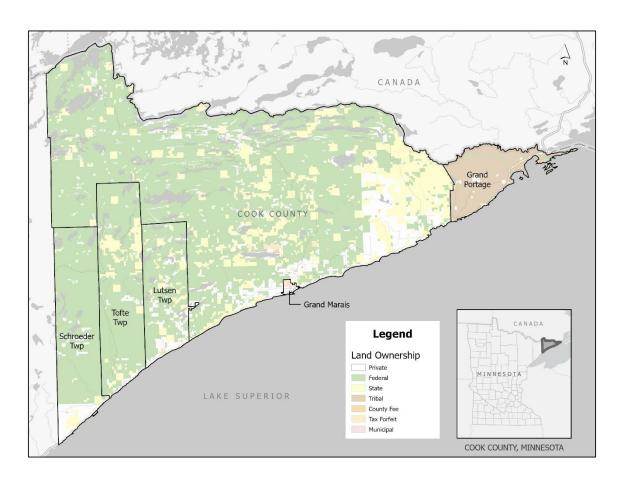
This report was created by Cook County Public Health staff, Andrea Tofte and Grace Grinager.

Thank you to all the individuals and agencies that participated in the CHA/CHIP process, including those who participated in focus groups and interviews. Without community partnerships, this work truly would not be possible. A special thanks to those who participated in at least one of our community meetings.

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Geography of Cook County



Cook County is at the northeastern tip of Minnesota and part of the Arrowhead region. The County is bordered by Lake County to the west; Ontario, Canada to the north; and by Lake Superior to the southeast. The Grand Portage Reservation (population 630) (U.S. Census Bureau, 2021) is in the northeastern portion of the county, alongside the shore of Lake Superior and the Canadian border.

Cook County is the 12th largest county in the state of Minnesota by total area, with a geographic size of 1,453 square miles. By population the County ranks 81st of 87 counties in the State with an estimated population of 5,600 (or 3.9 people per square mile). The county seat is Grand Marais (population 1,340), which is also the largest population center in the county. Cook County also includes three townships: Lutsen (population 486), Tofte (population 248), and Schroeder (population 229) and additional unorganized territories.

Most land in Cook County (93%) is publicly owned, much of which lies within the Superior National Forest (including parts of the Boundary Waters Canoe Area). The northern portion of the County is densely forested with many wetlands, whereas the southern portion of the county runs along the shores of Lake Superior. 56% of the County is covered in water, with 812 lakes and three major river systems (Poplar, Brule, and Pigeon) found within the County (Geospatial Analysis Center at the University of Minnesota, Duluth, 2019).

Health Services in Cook County

Within Cook County there is a range of health services available. These include:

Dentistry

o <u>Grand Marais Family Dentistry</u>: Employs two dentists. Partners with the <u>Oral Health Taskforce</u>, which strives to make dental care affordable to children, elders, and pregnant people, while also offering education and outreach about dental health.

Hospital/Skilled Nursing Facility

- North Shore Health: Located in Grand Marais, North Shore health provides a 16-bed critical access hospital, a 37-bed skilled nursing facility, a home health agency, ambulance service, and a variety of diagnostic and therapeutic services.
- Other independent health practitioners in Cook County provide services such as
 - Chiropractic care
 - Craniosacral therapy
 - East Asian medicine (includes acupuncture and herbs)
 - Homebirth midwifery services
 - Massage therapy
 - Mental health counselling
 - Outpatient treatment for substance use disorder
 - Physical therapy

Primary Care Clinics

- Grand Portage Health Services: Provides a variety of preventative care, primary care, and public health services in Grand Portage.
- Sawtooth Mountain Clinic (SMC): A Federally Qualified Health Center (FQHC) with a home campus in Grand Marais, providing services both in-person and via telehealth. Sawtooth Mountain Clinic provides behavioral health care (including specialized early childhood behavioral health services), pharmacy services, preventative services, primary care, and public health services to the community. SMC employs eight medical providers that also work with Grand Portage Health Services and North Shore Health.

Public Health and Human Services

- Cook County Public Health and Human Services offers a variety of behavioral health, case management and economic assistance programs, alongside services to support, children, families, older adults, and people living with disabilities. The public health team provides leadership in the six key areas of public health responsibility according to Minnesota State Statute 145.A
- Human Development Center provides after-hours and weekend mobile response services.
- Grand Portage Human Services offers programs including mental health and chemical dependency support, domestic violence intervention services, child protection services, and youth advocacy.

In addition to individuals and organizations providing direct health services, a wide array of nonprofit agencies offer services that support the health and well-being of those who live and work in Cook County. These include:

- Arrowhead Economic Opportunity Agency (AEOA): a regional nonprofit Community Action Program (CAP) that provides employment and training services in Cook County. AEOA also provides housing case management services, and transit services through Dial-a-Ride and the Volunteer Driver Program.
- <u>Care Partners</u>: provides support and services to help older adults and their families navigate
 aging, illness, and end-of-life with safety, dignity, and confidence. Manages Aging Well Resources
 Navigator
- <u>Cook County Higher Education</u>: Addresses extreme isolation, skilled worker shortages, limited career advancement, and lack of higher education opportunities within Cook County through college preparation, training & development, and lifelong learning opportunities.
- <u>Elderly Nutrition Program (ENP)</u>: provides food for older adults in Grand Portage.
- The Hub: Supports older adults through hosting a variety of programs and services on-site including a medical supply loan closet, eat-in dining, and the meals on wheels program.
- North Shore Health Care Foundation: Addresses health care gaps and needs in Cook County through advocacy, grantmaking, and incubating new programming.
- <u>Violence Prevention Center</u> provides direct services to people who have been affected by or subjected to domestic violence, sexual assault, and human trafficking.
- YMCA offers fitness classes and facilities, food access programs, youth programs and safety trainings.

Other assets that support community well-being include a vibrant local art community, multiple opportunities for community-based education, as well as ample opportunities for outdoor recreation and to pass time in the wilderness.

Demographics of Cook County

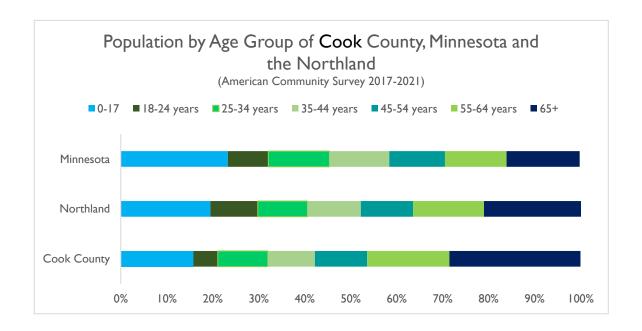
Age

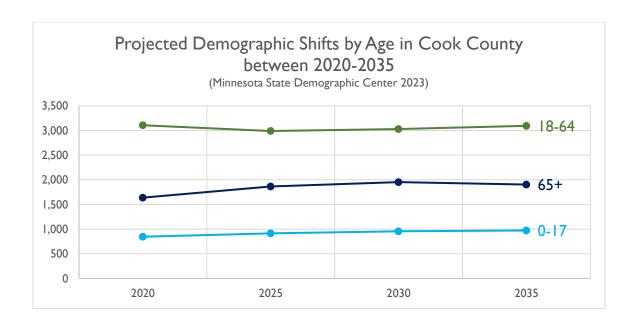
Compared to the State of Minnesota, and the Northland Region¹, Cook County has a higher percentage of people ages 55-64 years of age (17.9%) and those ages 65 and older (28.5%), a relatively equal percentage of those ages 45-54 (11.4%), a somewhat smaller percentage of those ages 35-44 (10.2%) and ages 25-34 (10.9%), and significantly smaller percentage of those ages 18-24 (5.3%) and those ages 17 and younger (15.8%) (Wilder Research, 2023). See graph below.

Between 2020 and 2035, the Minnesota Demographic Center projects that the population of Cook County will grow by approximately 7%. As the county grows over the next several years, the age breakdown of the population of Cook County will shift. The population of residents ages 65 and older is projected to grow between 2020 and 2030, when it is projected to peak, then begin to decline. From 2020-2025, the population of residents ages 18-64 is projected to decline. Between 2025 and 2035 this

Defined as including Aitkin, Carlton, Cook, Itasca, Koochiching, Lake, and St. Louis Counties

age group is projected to grow modestly, not quite reaching its 2020 level. The population of those ages 17 and younger is projected to steadily grow by approximately 15% between 2020-2035 (Minnesota State Demographic Center, 2023).





To gain more perspective on aging in Cook County, Public Health staff conducted a focus group with members of the Cook County Aging Coalition (N=6). This focus group discussed supports, challenges, and disparities related to aging. While this is by no means a comprehensive analysis, the discussion does offer initial direction and ideas for future investigation.

Overall, the group noted that a strong, organic sense of community and the sense that neighbors "take care of one another" were seen as great strengths to living in Cook County as an older adult. The group noted that <u>Aging Well Resources</u> serves as a comprehensive phone and web-based information portal to supportive services related to aging, linking to a variety of local nonprofits offering multiple services. Aging Well Resources also provides a human Care Navigator.

Older adults experience aging in different ways in Cook County. Some factors influencing these experiences include whether a person:

- Can drive independently and/or has a reliable vehicle.
- Has friends or family nearby.
- Can afford to retire.

Depending on an individual's circumstances, there are an array of challenges to aging in Cook County, including:

- Thinking through future needs and options.
- Asking for help from others.
- Transportation for medical care outside the local area.
- Social isolation (which can both influence and be influenced by health issues and a sense of belonging).
- Housing (there are no assisted living facilities in the County, and there is limited bed availability at the one skilled nursing facility).

- Affording the basic cost of living (food, shelter, transportation, etc.)
- Limited professional services in the area (there are waitlists for services such as home care and in-home support services and there are no drop-in respite care options for caregivers).

On the other side of the age spectrum, there are an average of 45 births per year to Cook County residents. Because the number of deaths each year in the county is higher than the number of births, growth in the county's population is due to people relocating to the county. (Jennifer Valorose, 2021).

Birthing parents in Cook County are less likely than birthing parents statewide to access prenatal care in the first trimester of pregnancy (69% vs. 87%); however, they are more likely than parents statewide to get adequate prenatal care during their pregnancies² (50% vs 15%). In Cook County a larger percentage of babies than the state average born pre-term (13% vs. 7%) or with low birth weight (10% vs 4%). This data is not broken down by race/ethnicity due to the small number of pregnancies overall in the county each year.

In a 2021 report by Wilder Research entitled, "Cook County & Grand Portage Early Childhood Needs Assessment), parents of young children (0-5)³ and the "Listening to Families Survey" of parents 0-3) voiced the following as priority needs:

- Availability of childcare
- Birthing, labor and delivery services, including support for travel to Duluth for care/delivery
- Lack of awareness of existing services
- Social isolation
- Parent education
- Peer support
- Socialization opportunities for children

Whenever possible, this Community Health Assessment will aim to use a lifespan approach to better understand how age may be a factor in the experience of health in Cook County.

Gender Identity & Sexual Orientation

The U.S Census Bureau (Lydia Anderson, 2021) reports that 8.4% of adults in Minnesota identify as lesbian, gay, bisexual, or transgender (LGBT⁵) (this data is not broken down by county). If this rate holds true for Cook County, there are approximately 466 people living in Cook County identify as LGBT. The 2022 Minnesota Student Survey (distributed among 8th (n=29), 9th (n=34) and 11th grade (n=29) students in Cook County) asked students about their sexual orientation and came up with the following demographic information:

² "Adequate prenatal care" is defined by the Minnesota Department of Health as having the appropriate number of prenatal appointments at the appropriate intervals throughout pregnancy

³ Interviewed 20 community service providers and 32 parents.

⁴ Interviewed 6 parents and surveyed 36 parents.

⁵ The U.S. Census only reports on LGBT adults, whereas Rainbow Health looks at LGBTQ+ adults ("Q" refers to people who identify as queer and "+" refers to people who identify with a broader range of gender identities and sexual orientations.)

Sexual Orientation	Percentage of Student Respondents
Straight/Heterosexual	75%
Bisexual	13%
Gay or Lesbian	1%
Pansexual	2%
Queer	3%
Questioning/Not Sure	3%
Not Sure What Question Means	2%

While there is no county-specific survey data related to health outcomes for LGBTQ+ people in Cook County, we did host a focus group (N=3) with members of the Pride Planning Committee to better understand supports, challenges, and disparities related to LGBTQ+ health locally. While this is by no means a comprehensive analysis, the discussion does offer initial direction and ideas for future investigation.

The focus group revealed that activities associated with Pride Month felt safe, whereas other community spaces didn't always feel like affirming places where people can trust that their identities will be accepted. They described a "live and let live mentality" as pervasive in the community, that could be described as some limited acceptance of LGBTQ+ identities if they are not overly visible. While there is no Cook County specific data related to anti-LGBTQ+ behavior, the 2021 Voices of Health Survey (Rainbow Health, 2021) of LGBTQ+ people in Minnesota found that 77% of respondents had experienced some form of anti-LGBTQ+ behavior in the past 12 months.

LGBTQ+ community members experience health differently according to factors such as:

- Age
- Whether a person can support themselves financially
- Culturally based gender norms
- A person's social support network

Additionally, the group noted that there are challenges to identifying as LGBTQ+6 and living in a small rural community due to the lack of anonymity, "particularly for young people who are seeking their identity."

To integrate LGBTQ+ experiences into this Health Assessment, relevant focus group results and statewide survey data will be included in health topic areas for discussion whenever possible.

Racial & Ethnic Identity

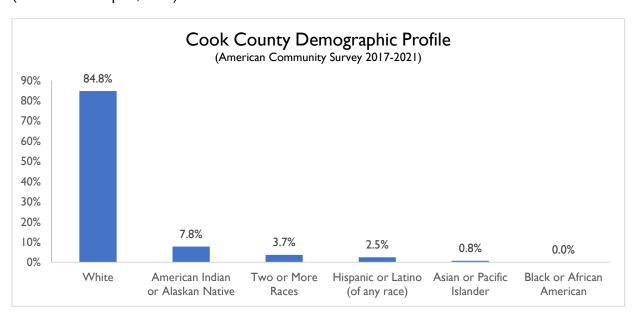
According to U.S. Census data, of the 5,600 people who call Cook County home 4,729 identify as white (84.8%), 435 identify as American Indian or Alaskan Native (7.8%), 209 identify as "two or more races" (3.7%), 139 identify as Hispanic or Latino (of any race) (2.5%), and 42 identify as Asian or Pacific Islander

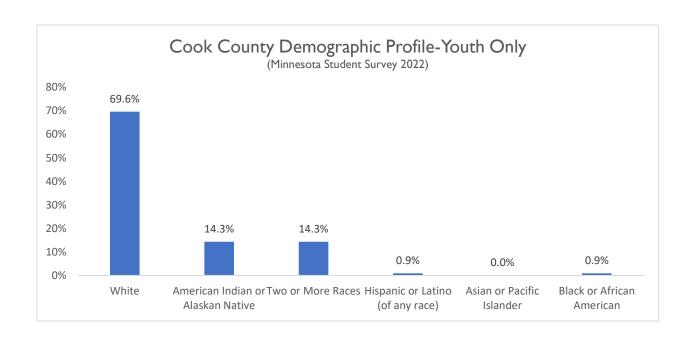
⁶ While the U.S. Census only asks about LGBT identities, the term "LGBTQ+" also includes people who identify as "queer" which more broadly includes people who do not identify as heterosexual and/or cisgender

(0.8%). Data is suppressed for those who identify as Black or African American, due to the small number of people identifying this way. See graph below.

The 2022 Minnesota Student Survey also gathered demographic data on race/ethnicity for youth in grades 5, 8, 9, and 11 (n=116). While the trends are similar for youth as compared to all county residents, a significantly smaller percentage of youth report their race/ethnicity as "White-only" (69.6% vs 84.8%), and a significantly higher percentage of youth report their race ethnicity as "American Indian or Alaskan Native" (14.3% vs 7.8%) or "Two or More Races" (14.3% vs. 3.7%). These responses show that there is increased racial and ethnic diversity among youth in Cook County than in the population overall.

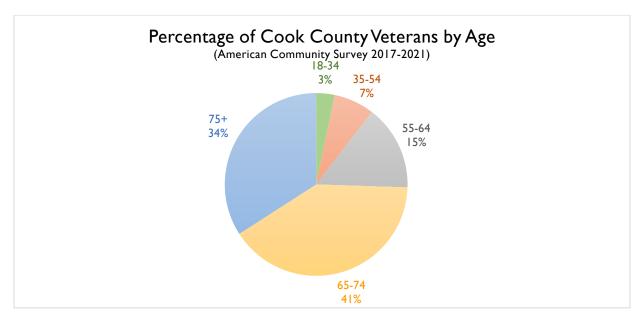
The diversity index for Cook County (the probability that two people, selected at random would be from different racial and ethnic groups) has risen from 23.4% in 2010 to 29.5% in 2020. In other words, the racial and ethnic diversity of the Cook County population has risen slightly during this decade (Minnesota Compass, 2023).





Veterans

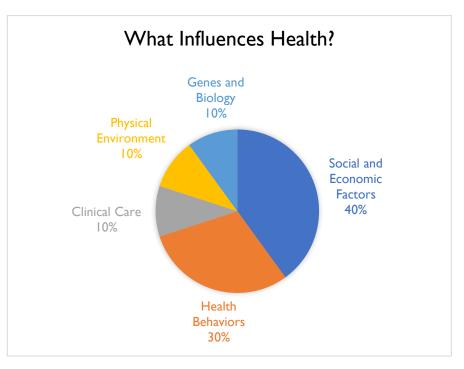
Cook County is home to 362 veterans, according to the 2020 U.S. Census. This represents 6.5% of the overall population of the County. 56% veterans in Cook County in Cook County are over the age of 65 (Housing Assistance Council, 2023).



Social Determinants of Health

The social determinants of health are a range of economic, environmental, and social factors that

together deeply influence the health of a person. We know that the opportunity for health starts with our families, homes, jobs, and schools — long before a person experiences an illness. Looking at these factors (such as childcare, education, income, food, access, housing, and transportation) helps us understand how to better support people in having the opportunity to enjoy optimal health across the lifespan.



Childcare

When parents and other primary caregivers can access

affordable, high-quality childcare that fits their needs, it positively affects both the development of their child(ren) and their ability to participate in the workforce and economically support their family. Early childhood (0-5) is a unique period of foundational, rapid brain development. The impact of experiences in a person's life during this period continues throughout the lifespan.

A 2022 Supply and Demand Gap Analysis by First Children's Finance showed that there is an unmet need for at least 114 childcare slots to meet the demand of families with children 0-5 in Cook County and Grand Portage. Currently, parents often struggle to find and afford childcare, particularly for infants. Challenges with the affordability and accessibility of childcare are complex. Even if a family can find a childcare slot for their child(ren), additional challenges remain, both for families and providers. These can include:

- Fewer slots are available than the number of children under school-age in the county.
- High cost of care relative to families' incomes⁷.
- Income-based financial assistance programs for childcare that do not always cover the full cost
 of care and/or exclude families whose incomes are too high to qualify, but for whom the cost of
 care remains a financial barrier⁸.

⁷ In 2022, Childcare Aware Minnesota estimated the average cost of care throughout the state to be approximately \$868/month or \$10,410/year per child (Childcare Aware Minnesota, 2023).

⁸ The Childcare Assistance Program (CCAP), administered by the Minnesota Department of Human Services (DHS) requires that a family earn no more than 47% of the state median income (SMI) to be eligible for financial

- Parents/financial assistance programs unable to pay enough for childcare to be able to adequately compensate providers (this also includes time off and benefits).
- Programs not able to charge enough to maintain staff or be financially stable.
- Childcare has a small profit margin, and it is an expensive business to start and a complex business to run (First Children's Finance, 2022).
- The need for ongoing training and support for childcare providers to reduce job-stress and improve retention within the field.

Often families who cannot locate childcare will adjust work schedules with their partner or rely informally on friends or family to assist with care. This same study showed that 44% of employers in the area have struggled to attract employees for open positions due to a lack of childcare, and 33% of employers have struggled to retain employees for this same reason. 82% of families report that the availability and cost of childcare influences how adult family members participate in the workforce. 46% of families indicate that the availability of childcare impacts their family planning decisions.

Economics, Income & Educational Attainment

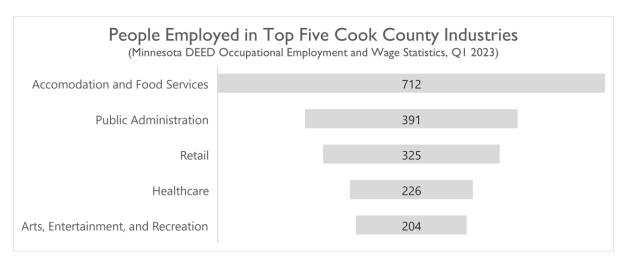
The economy of Cook County is heavily based on tourism. The top five industries of employment for Cook County include: Accommodation & Food Services (27.9%), Public Administration (15.3%), Retail (12.7%), Healthcare (8.9%) and Arts, Entertainment & Recreation (8.0%). See graph below.

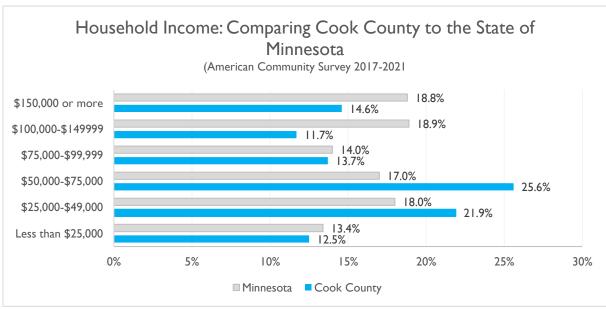
The median household income in Cook County is lower than the State of Minnesota (\$65,045 compared to \$77,706). The median number of people per household in Cook County is 2.2 ((U.S. Census Bureau, 2021). The county also has a higher percentage of households with incomes less below \$50,000 than the State. See graph below.

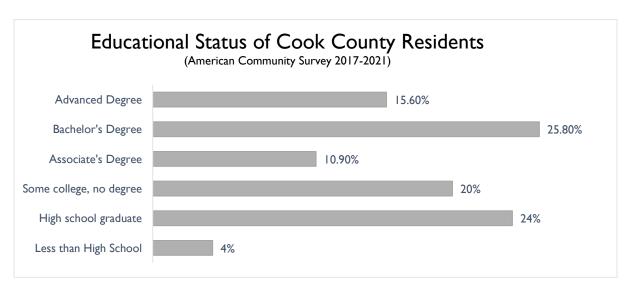
The unemployment rate for Cook County was 4.5% in 2021, with a decline in the of -4.7 workers each year from 2010-2020 and a projected decline of -6.6 workers per year between 2023-2033. Changes in the labor force contribute to an extremely tight labor market, with less than one jobseeker per vacancy (Minnesota Department of Employment and Economic Development, 2023).

96.1% of adults in Cook County have at least a high school diploma and 52.3% have an Associate's, Bachelor's, or Advanced Degree. See the following graphs for detail:

assistance for childcare at the point of an initial application. For reference, in 2022, 47% of the SMI for a four person household was \$55,266 (Minnesota Department of Human Services, 2022).







Food Insecurity

Food insecurity is defined by the United States Department of Agriculture (USDA) as "the lack of access, at times, to enough food for an active, healthy life." Systemic barriers to accessing food are associated with multiple poor social and health outcomes for individuals. Feeding America estimates that 520 individuals in Cook County could be defined as "food insecure," representing 9.6% of the population overall. The risk of food insecurity rises when there is not enough money to buy food, thus many federally funded nutritional assistance programs have income-based eligibility guidelines. However, not everyone who is food insecure has a low enough income to qualify for these programs. Feeding America estimates that 36% of people who are food insecure in Cook County would not qualify for federal nutrition programs such as the Supplemental Nutritional Assistance Program (SNAP) or the Women Infants and Children Nutrition Program (WIC) due to being over the income limits for program participation. (Feeding America, 2023).

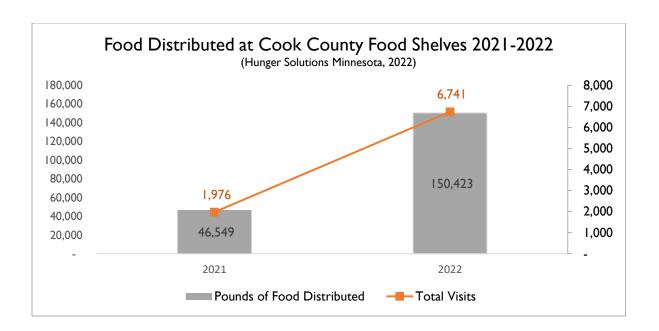
Nutritional support programs in Cook County include:

- Food shelves (includes monthly food distributions in Grand Marais and Grand Portage through the Northern Lakes Food Bank as well as Grand Portage Food Shelf and Food Distribution Program)
- Grand Portage Elderly Food and Nutrition Program
- Ruby's Pantry monthly food distribution events in Grand Marias
- Senior meals at the Hub and Birch Grove
- The Snacks and Packs program
- The Free and Reduced Lunch Program (served 28.9% of school-aged children in Cook County in 2021 (Children's Defense Fund, 2023))9
- SNAP (served 258 people in December 2022)
- WIC (served 138 participants in 2022 including 38 women, 30 infants, and 70 children (Minnesota WIC Information Systems, 2023))
- YMCA free snacks for children program

Cook County saw a 241% increase in visits to the food shelf and a 223% increase in the pounds of food distributed at food shelves from 2021-2022. This mirrors state-level trends. Hunger Solutions Minnesota links these trends to inflation in the price of food during this time, alongside the loss of certain economic support programs implemented during the pandemic (such as stimulus payments, child tax-credit advance payments, emergency SNAP) (Hunger Solutions, 2023). See graph following.

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⁹ More school-aged children may be eligible for free meals at school after Minnesota state government passed legislation in the 2022-2023 legislative session offering free universal meals for students in Minnesota schools starting in fall of 2023



Housing

The affordability, safety, stability, and quality of a person's housing, as well as the area where that housing is located, all have a strong impact on a person's overall health and well-being (Taylor, 2018). For example:

- Both people with unstable housing and those experiencing chronic homelessness experience significantly poorer health than their peers who have stable housing.
- Housing-based health threats (such as moisture damage, inadequate ventilation, pests, poor temperature control, and residential crowding) are associated with higher rates of asthma, cardiovascular disease, injury, mental health conditions, and infectious diseases.
- Experiencing a "cost burden," defined as spending more than 30% of a household's income on housing, contributes to negative health outcomes by limiting a person's ability to afford other necessities (such as food, medical care, transportation or utilities).
- The physical location of a person's housing can impact how easy it is for that individual to access grocery stores, safe walking routes or public transportation.

A 2022 needs assessment of housing in Cook County (Loci Consulting, 2022) found that there is a shortage of all types of housing (rental housing, housing for sale, senior housing, and special needs housing). The shortage of available housing options has impacted the median sales price for homes, making homeownership for the local workforce an increasing challenge. The extremely low vacancy rate in rental housing has also led to challenges both for local employers looking to hire and retain staff, and for those looking to find a rental property in the county. The shortage of housing has also magnified challenges related to housing for those aging-in-place, returning from chemical dependency treatment, or navigating domestic violence experiences.

The natural beauty and isolated nature of Cook County make it an attractive location for seasonal homes. Over half of the existing homes (~2,900) in Cook County are seasonal, the majority of which

are located on inland lakes or alongside Lake Superior. The unique geography of the County also makes it an attractive location for retirees or remote workers to live.

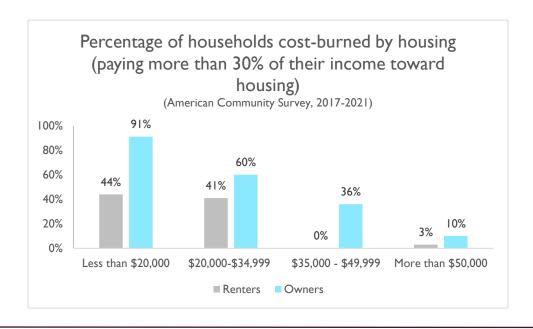
While the county's remote, rural location contributes to housing demand, it also contributes to challenges with building more housing for year-round residents. Both the geography of the county and its small year-round population base contribute to challenges with:

- Few contractors
- Obtaining building materials (higher cost, longer time to arrive on-site)
- Higher investment risk
- Fewer local services (such as maintenance and property management)
- A shorter building season due to climate
- High land costs
- Availability of appropriate building sites (due to bedrock, water features, clay soil, and wetlands)
- Competing for limited resources with those building seasonal homes

Additionally, the low availability of rental units coupled with a high demand for rental housing, along with seasonal fluctuations in demand for housing contribute to challenges, such as:

- Lower incentives for property owners/managers to maintain rental units.
- Seasonal rentals lead to an annual need for renters to look for alternative summer housing.
- Fear of reporting issues with landlords or management companies due to fear of losing housing in a tight rental market.
- Informal rental agreements without a lease offer minimal protections to tenants.

Within Cook County's 2,499 households, 684 households (27%) are cost-burdened by housing (Minnesota Housing Partnership, 2023). Of these, 317 (13%) are severely cost-burdened by housing (meaning they pay more than 50% of their income toward housing costs).



The number of individuals experiencing homelessness in Cook County is difficult to quantify since there are no homeless shelters within Cook County. The annual "Point in Time" study, facilitated by the NE Continuum of Care, aims to estimate how many individuals are experiencing homelessness in each NE County by working with various service agencies across the region to tally how many individuals are homeless on a given day. The results for Cook County for 2022 were seven individuals (NE Minnesota Continuum of Care, 2023). This is likely an undercount, since not all individuals who are homeless are actively working with an agency, some may be "doubling up" in homes or apartments with friends or family at the point of the survey.

Intimate Partner Violence

Exposure to intimate partner violence can lead to poor health outcomes, including an increased risk of physical injury and mental health conditions including disordered eating, depression, and suicidal ideation. Children who are exposed to abuse or violence are at risk for long poor long term mental health outcomes, including anxiety, depression, and post-traumatic stress disorder (U.S. Department of Health and Human Services, 2023). In 2022, the Violence Prevention Center in Cook County worked with 179 victims of violence—this includes those who have been affected by or subjected to domestic violence, human trafficking, stalking, harassment, physical abuse or assault, and teen dating violence.

Transportation

Transportation is an important element of access to health care since challenges with transportation can affect a person's ability to initiate or follow through with medical appointments. Throughout the U.S., people living in rural areas such as Cook County report both greater struggles with transportation and longer travel distances to accessing health care than the population in general. Struggles with transportation impact more than just health care access; they can also influence a person's ability to travel to work or school, the ability to purchase groceries, recreational opportunities, and the ability to visit friends and family. All these things have an impact on health (Rural Health Information Hub, 2023).

The regional Bridge to Health survey, which looked at the percentage of people who do not often have transportation for various activities across the Northland, found that, regionally, transportation access was most limited for people living under 200% of the federal poverty line and was most limited when seeking to visit friends or relatives (10.9% did not often have transportation for this purpose) and in seeking out recreation (11.4% did not often have transportation for this purpose) (Kjos S.A., 2021).

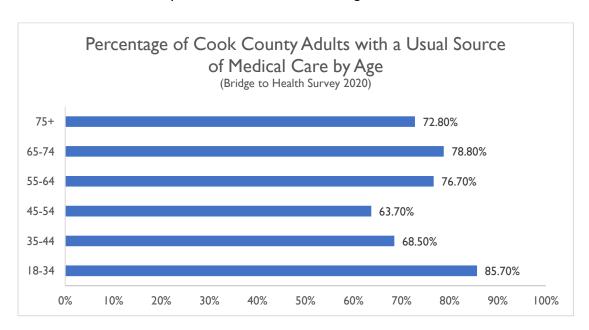
Nationally, access to transportation is unevenly distributed across rural population, with the following groups typically experiencing greater barriers to accessing transportation:

- Low-income individuals and families
- Older adults
- People with special health care needs, who need to drive longer distances to access specialty medical care.
- Veterans

Health Care Access

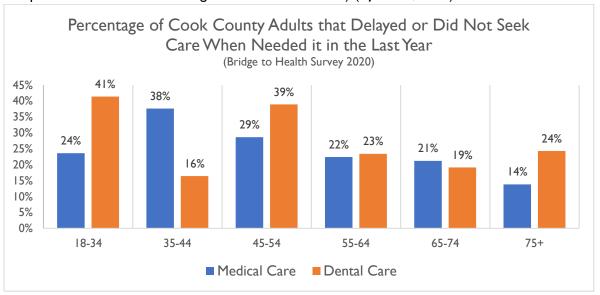
Health Care Access includes four core components (Agency for Healthcare Reserach and Quality, 2023):

- a. Insurance coverage: People who do not have medical insurance are less likely to receive medical care and are more likely to have poor health status. The primary reason uninsured people cite for lacking insurance coverage is the high cost of coverage. Additionally, many people do not have access to insurance through a job. People who are uninsured are more likely than those who are insured to be able to pay their medical bills (Tolbert J., 2022). In Cook County, 10% of the population under the age of 65 is uninsured, compared to 6% for the State of Minnesota overall (University of Wisconsin Population Health Institute, 2023). In 2020, the average number of those eligible for the public medical insurance programs Medical Assistance and MinnesotaCare in Cook County were 1,005 and 151 respectively (Minnesota Department of Health, 2023).
- b. Services: When a person has a usual source of care, they are more likely to receive recommended screenings and preventative services. Within Cook County, adults are more likely to have a usual source of medical care as they get older (Kjos S.A., 2021). Poverty also plays a role, with 87.8% of those living under 200% of the federal poverty line FPL reporting a usual source of care, compared with 95.5% of those living over 200% of the FPL.



c. Timeliness: This is defined as the ability to provide care when the need for it is recognized. The timely delivery of care can reduce mortality and morbidity for chronic conditions. The regional Bridge to Health Survey looks at whether adults delayed or did not seek care within the last year and finds wide variations by both age and poverty level, with 22.6% of those living

under 200% of the FPL reporting that they delayed or did not seek medical care in the past year (as compared to 25.5% of those living above 200% of the FPL), and 41.7% of those living under 200% of the FPL reporting that they delayed or did not seek dental care in the past year (as compared to 23.7% of those living about 200% of the FPL) (Kjos S.A., 2021).



d. Workforce: A competent and sufficient healthcare workforce is critical to providing access to health care. The Health Resources and Services Administration (HRSA) designates certain geographic areas and populations as having too few primary care, dental, mental health providers, and services. Cook County is considered a Health Professional Shortage Area (HPSA) for dental providers and mental health providers. Low-income individuals in Cook County are also considered a Medically Underserved Population (MUP) (HRSA, 2023).

	Ratio of Residents P	Ratio of Residents Per Provider (University of Wisconsin	
	Population	Population Health Institute, 2023)	
	Cook County	Minnesota	
Dental Care	1,870:1	1,310:1	
Mental Care	1,120:1	320:1	
Primary Care	680:1	1,110:1	

Substance Use

Substance use, like health more generally, starts with social conditions—the conditions within one's home, family, school, workplace, and community. A wide range of substances can affect a person's health and well-being, from alcohol and commercial tobacco to marijuana, methamphetamine, and opioids, to name just a few. Many factors at multiple levels might influence a person's substance use behaviors (Minnesota Department of Health, 2023):

- Individual Factors
 - o Physical and mental health

- Trauma and resiliency
- Social emotional learning and skills
- Perception of risk
- Knowledge of harm reduction tools
- Withdrawal symptom management

Social Factors

- Access to substances
- Attitudes and opinions toward substance use and pain management
- Access to prevention education
- Access to family and peer support
- o Family history of substance use

• Community Factors

- Community context risk and protective factors
- O Access to appropriate providers, peer networks, and behavioral health services
- o Prescribing providers' perceptions of risk and practices
- Drug disposal facilities
- Access to Naloxone and Naloxone training
- Access to harm reduction and substance use prevention programming

Societal

- Stigma towards people who use substances
- Legislation surrounding syringe exchange programs, Medication Assisted Therapy (MAT), and the provision of behavioral health services
- Policies that promote equitable access to health-promoting services, economic wellbeing, housing stability, and racial equity
- Health insurance coverage for mental health and substance use treatment
- Naloxone protocol for pharmacies

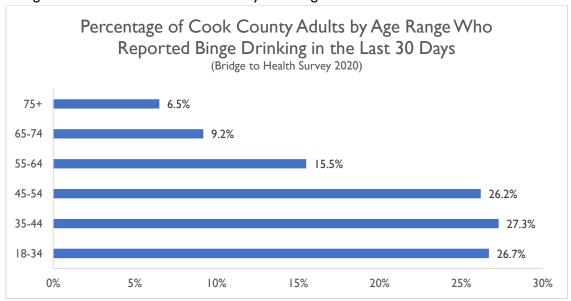
Alcohol Use

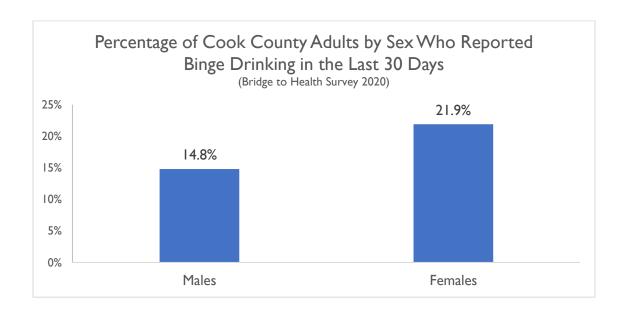
Nationally, alcohol contributes to more deaths and illnesses than most other drugs as it is used by more people than other drugs. Excessive alcohol use can lead to short-term health impacts such as alcohol poisoning, drowning, motor vehicle injuries, poor birth outcomes, and violence. Over time, alcohol use can lead to chronic diseases including heart disease, liver disease, digestive problems, and multiple types of cancer (Minnesota Department of Health, 2020).

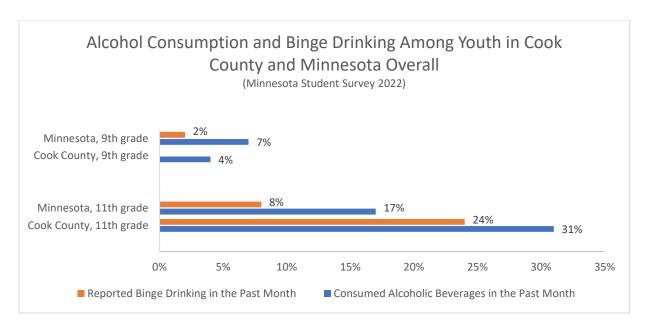
In Cook County 67.4% of adults reported drinking at least one alcoholic beverage in the last month. This is slightly higher than the percentage of adults in Minnesota who report drinking at least one alcoholic beverage in the last month (58.8%) (Kjos S.A., 2021). Those who binge drink are more likely to drink more frequently and in greater quantities on an occasion. Those who binge drink are also almost three times more likely to report driving after drinking too much, as compared to those who do not binge drink (Minnesota Department of Health, 2020).

Of those adults who reported drinking at least one alcoholic beverage in the past month, 18.4% of adults in Cook County reported binge drinking in that same time period (defined as 4 or more drinks on an

occasion for females and 5 or more drinks on an occasion for males.) Rates of binge drinking in Cook County are higher for females and those under 54 years of age.







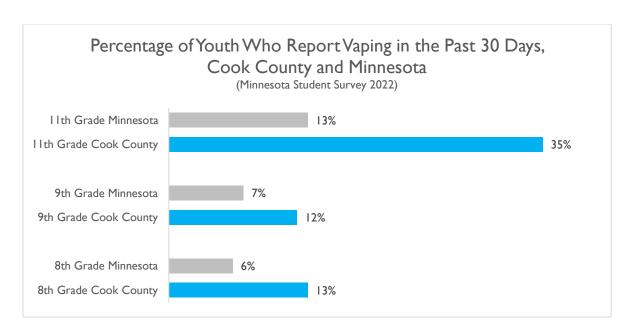
For youth in Cook County, 4% of 9th grade students and 31% of 11th grade students reported drinking at least one alcoholic beverage in the past month. 0% of 9th grade students and 23% of 11th grade students report binge drinking in the past month. While rates of both alcohol consumption and binge drinking are lower for Cook County 9th grade students, as compared to the State overall, rates for 11th grade students in Cook County are higher than the state average.

In Minnesota overall, students who report higher numbers of adverse childhood experiences (ACEs), such as physical abuse, parental incarceration, or witnessing domestic violence, were significantly more likely to report binge drinking than students who reported no ACEs (Minnesota Department of Health, 2020).

Commercial Tobacco Use

Smoking commercial tobacco products significantly contributes to heart disease, lung disease, and many forms of cancer. It is the leading cause of preventable death throughout the United States. Minnesota currently has the lowest rate of commercial tobacco use ever recorded in the State. In Cook County, 9.5% of adults reported smoking, compared to 13.8% of adults throughout Minnesota. (Kjos S.A., 2021).

Despite overall decreases in commercial tobacco use throughout the state, increasing numbers of young people are vaping commercial tobacco products, such as e-cigarettes. A larger percentage of youth in Cook County report vaping in the past 30 days compared to youth across the State of Minnesota overall (Minnesota Department of Education and the Minnesota Department of Health, 2022)



Drug Overdoses

Throughout Minnesota, overdose deaths have increased by 29% from 2020 to 2021, to the highest number ever recorded (1,354). The increase in drug overdose deaths in this time was higher for Greater Minnesota (34%) than it was for the seven-County Metro (24%). The increase is driven in large part by deaths due to synthetic opioids (such as fentanyl and xylazine), psychostimulants (such as methamphetamine) and cocaine. For every overdose death in Minnesota, there are 13 people treated in hospitals for non-fatal drug overdoses (Minnesota Department of Health, 2023). Between 2011 and 2021, drug overdose deaths in Cook County have fluctuated between 0-2 per year and the number of reported nonfatal overdoses has fluctuated between 0-3 per year.

Substance Use Disorder Treatment

Between 2011-2022, people from Cook County attending substance use disorder treatment most listed alcohol and methamphetamines as the primary substances used at admission. During this time, the total number of admissions of people from Cook County to treatment programs has fluctuated between 18 and 66 each year (Minnesota Department of Health, 2023). Sawtooth Mountain Clinic facilitates a Medication Assisted Treatment (MAT) program that combines medications with counseling and behavioral therapies to treat opioid use disorders and help people sustain recovery. This program serves an average of 12 people each year. In 2022, the Cook County Wilderness Outpatient treatment program conducted 43 comprehensive assessments with an average of 11 participants in the outpatient treatment program throughout the year.

Mental Health and Well-Being

The World Health Organization (WHO) defines mental health as, "a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community" (World Health Organization, 2023). They add to this definition, that:

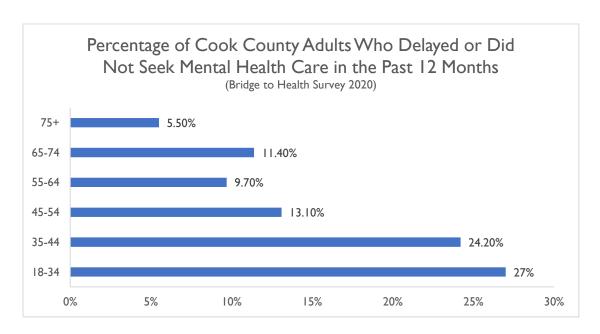
- Mental health is more than the absence of mental disorders. Not having a mental illness does
 not guarantee good mental health. Having a mental illness does not guarantee poor mental
 health. Everyone has a state of mental health, which can change throughout a person's life.
- Mental health is an integral part of overall human health that underpins our abilities to make decisions, build relationships, and shape the world we live in. Mental health includes factors like:
 - Life satisfaction
 - Self-acceptance
 - Sense of purpose
 - Sense of safety/security
 - Identity
 - Feeling connected/having a sense of belonging
 - Resilience (the ability to bounce back after setbacks) (Minnesota Department of Health, 2023)
- Mental health is determined by a range of socioeconomic, biological, and environmental factors.
- Mental health and physical health are closely connected. Poor mental health can affect a
 person's physical health in multiple ways, making it difficult to think clearly, make healthy
 decisions, and manage chronic diseases.

As with all health conditions, people in Cook County experience mental well-being in different ways. Not all groups or segments of the population have the same access to the support and experiences that lend themselves to a state of well-being.

Nationally, mental health challenges for young people are the leading cause of disability and poor life outcomes in this age group, with significant increases in rates of anxiety, depression, and suicidal ideation in recent years. Youth who have experienced marginalization and trauma due to poverty, discrimination and violence are at a higher risk than youth overall to experience mental health challenges across the lifespan (U.S. Surgeon General, 2021)

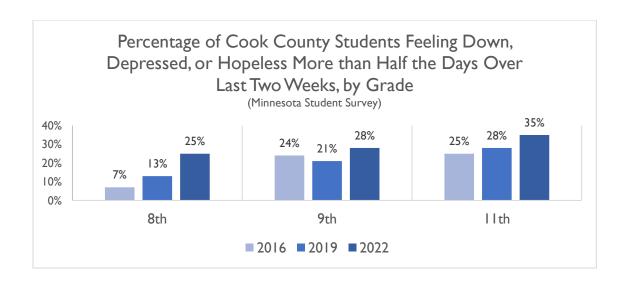
Treatment Delays

Nationally, more than half of people living with mental illnesses don't receive treatment. Often, people avoid or delay treatment due to concerns about how others will behave toward them, or fear of losing their jobs. Stigma surrounding mental illness refers to negative, shaming attitudes and beliefs that others may have or that individuals may have about their own mental illness. Stigma also exists in systems and institutions, which may limit opportunities, resources, and support for people living with mental illnesses (American Psychiatric Association, 2023). In Cook County, 15% of adults report that they delayed or did not receive mental health services within the last year, despite feeling that they wanted to seek help. This rate varied widely by age, with those ages 18-44 much less likely to seek care than those over the age of 45 (Kjos S.A., 2021).



Fair or Poor Health Days

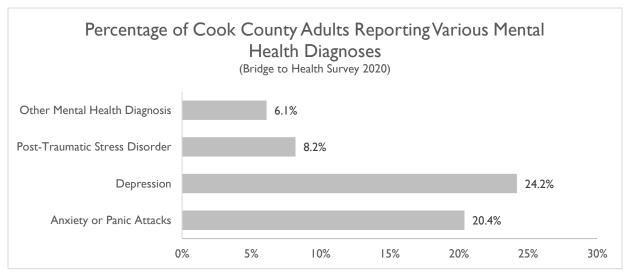
The Bridge to Health survey asks adults whether they've had 14 or more days within the last 30 days that they would consider "poor mental health days," which they define as days involving significant stress, depression, or emotional problems. Overall, 10.8% of adults report that 14 or more of the past 30 days were "poor mental health days." Rates vary widely by sex (only 5.8% of males report 14 or more poor mental health days, compared to 15.6% of females), and by poverty status (with 16.8% of those living at or below 200% of the federal poverty level reported 14 or more poor mental health days, compared to 8.9% of those living above 200% of the federal poverty level).

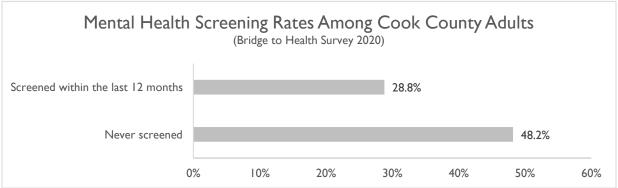


The Minnesota Student Survey looks at poor mental health days differently than the Bridge to Health Survey, asking what percentage of students in grades 8, 9, 11 have, "felt down, depressed, or hopeless more than half the days over the last two weeks." Using this metric, rates of poor mental health days among Cook County youth have been rising from 2016-2022 (Minnesota Department of Education and the Minnesota Department of Health, 2022).

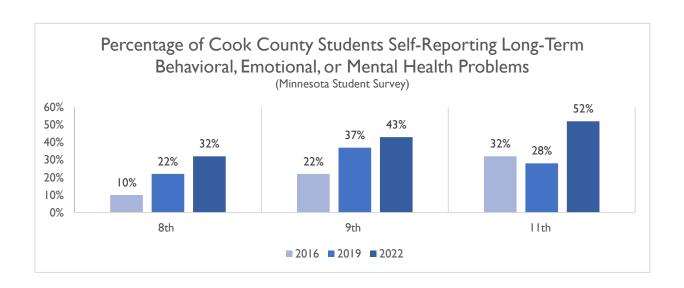
Mental Health Conditions and Screening Rates

The Bridge to Health Survey also asks Cook County adults to report on whether they've ever received a mental health diagnosis from a healthcare provider. One factor affecting these results is that just under half of Cook County adults (48.2%) report that they have never been screened by a medical provider for mental health conditions. Just under a third (28.8%) of Cook County adults report being screened for mental health conditions by a medical provider within the last year.





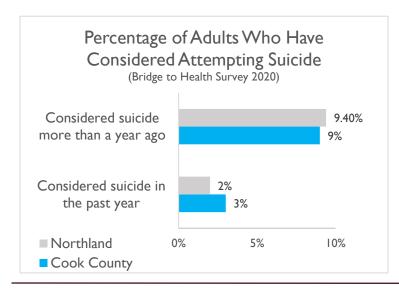
While the Minnesota Student Survey doesn't track specific mental health diagnoses for youth, it does ask respondents to self-identify whether they have any "long-term mental health, behavioral, or emotional problems" (which is defined as lasting six months or more). The rate of self-reported long-term behavioral, emotional, or mental health problems has risen among Cook County youth from 2016-2022 (Minnesota Department of Education and the Minnesota Department of Health, 2022).



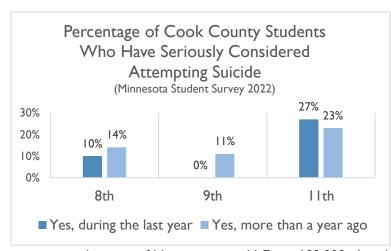
Suicide

Suicide, or death by intentional self-harm, is a complex public health problem with no single cause. Each suicide can leave lasting effects on individuals, families, and communities. Evidence shows that most suicides are preventable through a comprehensive approach that promotes health, wellness, resilience, and connectedness throughout all communities. Nationally, significant disparities exist in rates of suicide with Indigenous people, people who live in rural areas, middle-aged adults, people with disabilities, veterans, and LGBTQ+ youth experiencing disproportionately high rates of suicide. This may be linked to disparities in experiences and factors linked to suicide such as discrimination, multi-generational trauma, exposure to violence, struggles with mental well-being, isolation, access to lethal means, and poverty (Centers for Disease Control and Prevention, 2023).

Throughout Minnesota, the number of suicides has steadily increased over the past 20 years, contributing to a decline in life-expectancy (along with alcohol-attributable deaths and fatal drug overdoses) (Minnesota Department of Health, 2021).



Within Cook County, 9% of adults report having considered attempting suicide over a year ago. 3% say they have considered attempting suicide in the past year (Kjos S.A., 2021). The percentage of Cook County youth reporting that they have considered suicide in the past year varies by grade level, but tends to be higher than the percentage of adults reporting having considered attempting suicide (Minnesota Department of Education and the Minnesota Department of Health, 2022).



Because of the small population base in Cook County, data on the number and demographic information of people who completed suicide here is often suppressed to protect the privacy of those directly affected by these deaths. Between 1999 and 2020, there were 15 suicide deaths among Cook County residents, equating to an average annual suicide rate of 13.0 per 100,000. During that same time, the average annual suicide

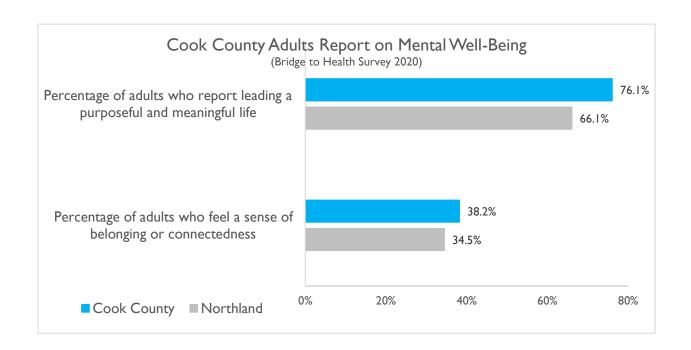
rate across the state of Minnesota was 11.7 per 100,000. In other words, the suicide rate for Cook County residents has been persistently higher than the rate for the state overall, over the past 20 years.

Mental Well-Being

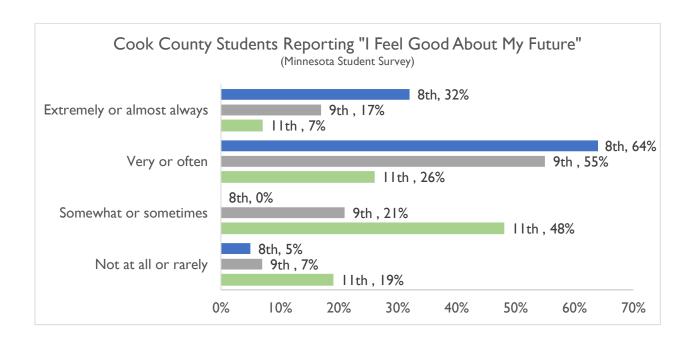
Certain factors are considered "protective" because they promote a sense of well-being and decrease rates of substance use and suicide attempts at a population level (Centers for Disease Control and Prevention, 2023). These include:

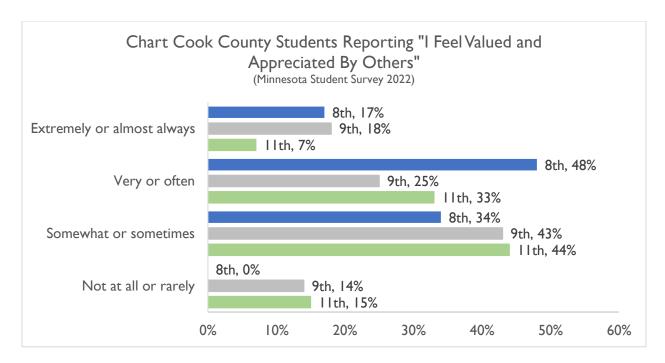
- Individual protective factors:
 - Effective coping and problem-solving skills
 - Sense of purpose
 - Strong sense of cultural identity
- Healthy relationships
 - Support from partners, family, friends
 - Feeling connected to others
- Community protective factors
 - Feeling connected to social institutions (schools, churches, workplaces, other organizations/groups)
 - Availability of high-quality behavioral/physical health care
 - Positive community norms

The Bridge to Health Survey measured both Cook County respondents' feelings of connectedness/belonging and their sense of purpose in life (Kjos S.A., 2021):



The Minnesota Student Survey also looks at measures of mental well-being for Cook County youth (Minnesota Department of Education and the Minnesota Department of Health, 2022):





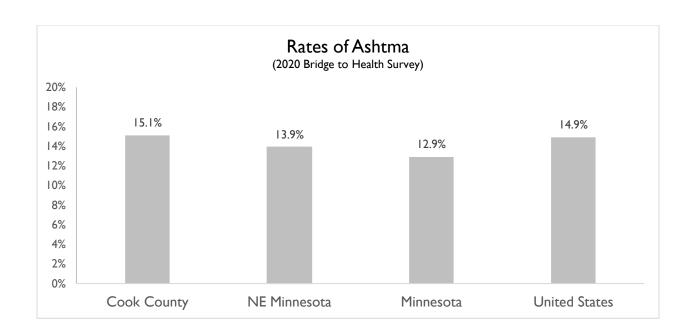
Generally, Cook County students report feeling valued and appreciated by others. We can see that as students move from middle school to high school, they become less confident in their futures.

Physical Health

Asthma

Asthma, one of the most common lifelong health conditions, is a chronic inflammatory disease of the lungs that limits the amount of air that can pass through a person's airways, making breathing difficult. Asthma can be triggered by many things. While timely and appropriate medical care can often resolve an asthma attack, the condition can be challenging and disruptive for those experiencing it either directly or indirectly (as a family member or friend). Both genetics and the environment contribute to whether a person develops asthma and how well that person can manage their condition.

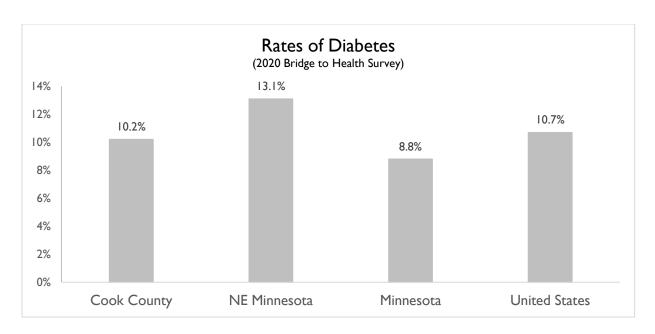
Regionally, rates of asthma among adults have risen among adults in NE Minnesota from 6.1% in 1995, to 13.9% in 2020. Within Cook County, 15.1% of adults report an asthma diagnosis (Kjos S.A., 2021). 21.9% of adults ages 18-34 report a diagnosis of asthma in Cook County, making young adults more likely than the population overall to suffer from this condition. Those living at or below 200% of the federal poverty level in Cook County are significantly more likely to report an asthma diagnosis than those living above 200% of the federal poverty level (22.8% vs 12.9%).



Diabetes

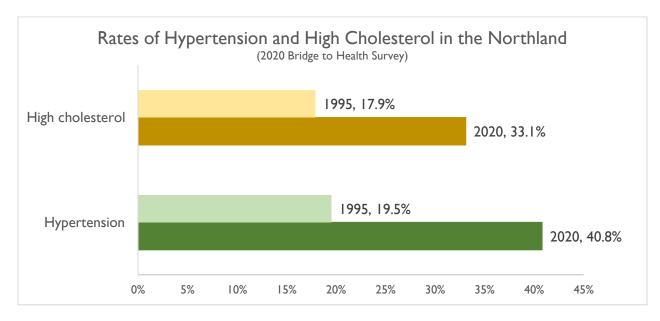
Diabetes is a chronic disease that affects how a person's body turns food into energy. There are two types of diabetes. Type I diabetes is an autoimmune condition with a genetic component. Type II diabetes, representing over 90% of all cases of diabetes in the United States, has a range of risk factors and is preventable. Risk factors include being overweight, being over 45 years of age, having a family history of diabetes, living a more sedentary lifestyle, and having a history of gestational diabetes. Over time, high blood sugar due to diabetes can lead to other serious health problems such as heart disease, vision loss, and kidney disease.

Regionally, rates of diabetes have risen among adults in NE Minnesota from 5.8% in 1995, to 13.1% in 2020. Within Cook County, 10.2% of adults report a diabetes diagnosis. 15.6% of adults ages 65 and older report a diabetes diagnosis in Cook County, making older adults more likely than the population overall to suffer from this condition. Those living at or below 200% of the federal poverty level are significantly more likely to report a diabetes diagnosis than those living above 200% of the federal poverty level (18.2 % vs. 8.3%) (Kjos S.A., 2021).



Cardiovascular Health

Cardiovascular disease includes coronary heart disease, heart attack, stroke, and other conditions that affect how well the heart functions. Cardiovascular disease is the leading cause of death in Minnesota. Both high blood pressure and high cholesterol are risk factors for developing cardiovascular diseases. Risk factors for high blood pressure and high cholesterol include various health conditions, family history, obesity, living a more sedentary lifestyle, and commercial tobacco use. Additional risk factors for high blood pressure include excessive alcohol consumption, not getting enough sleep on a routine basis, and social isolation. Additional risk factors for high cholesterol include age and eating a diet high in saturated- and trans-fats.

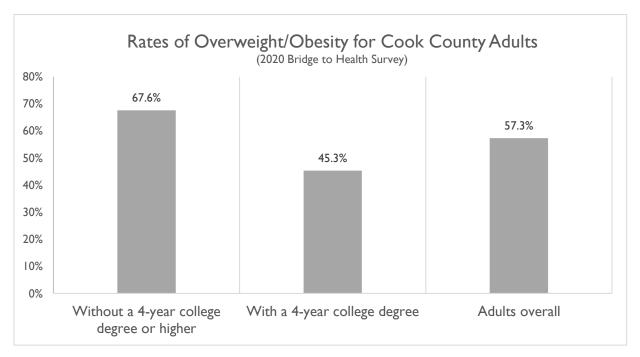


Regionally, rates of both high blood pressure (hypertension) and high cholesterol have risen in NE Minnesota from 1995 to 2020. Within Cook County, 35.9% of adults report a diagnosis of

hypertension. 61.6% of adults ages 65 and older report a hypertension diagnosis in Cook County, making older adults more likely than the population overall to suffer from this condition. Within Cook County, 31.8% of adults report a diagnosis of high cholesterol. 47.3% of adults ages 65-74 report a diagnosis of high cholesterol, making this age group more likely than the population overall to suffer from this condition (Kjos S.A., 2021).

Obesity

Public health and medical institutions define overweight and obesity as weight that is higher than what is considered healthy using the body mass index (BMI) as a tool (Centers for Disease Control and Prevention, 2023). Obesity is a common chronic disease that affects both children and adults and is itself a risk factor for various other diseases including cancer, diabetes, heart disease, and stroke. Genetics, certain medications, other illnesses, along with patterns of eating, physical activity, and sleep all influence a person's weight. While active living and healthy eating are widely accepted to decrease rates of obesity, not everyone has access to healthy foods or opportunities to be physically active.



Rates of overweight or obesity in adults have risen across the Northland from 1995 to 2020 (from 60.8% in 1995 to 70.9% in 2020). Within Cook County, 57.3% of adults report a BMI in the category of "overweight or obese." This rate increases to 67.6% among Cook County adults without a four-year college degree or higher, compared to 45.3% of Cook County adults with at least a four-year college degree.

Emergency Preparedness and Response

Impact of COVID-19

COVID-19 had and continues to have a massive impact on health and well-being throughout Cook County. In many ways, Cook County fared relatively well throughout the COVID-19 national public

health emergency. Cook County had the lowest case rate and death rate of any County in the State of Minnesota (1,664 cumulative cases reported throughout the public health emergency, along with five deaths due to COVID-19), alongside the highest COVID-19 vaccination rate (88.6% of the population of Cook County has received at least one dose of COVID-19 vaccine, compared with 72.1% for the population of Minnesota overall) (Minnesota Department of Health, 2023). While there is currently wide variation in estimates of the percentage of people who had COVID-19 and then went on to experience Long COVID, there is widespread agreement that a certain percentage of people do go on to experience Long COVID after a COVID-19 infection. Long COVID can include a range of symptoms of varying severity that last for a wide range of time. For some people, symptoms may be severe enough to result in a disability according to the Americans with Disabilities Act (ADA).

Aside from the immediate physical health effects directly caused by COVID-19, the Cook County Local Emergency Preparedness Committee met in late 2022 to conduct a COPEWELL assessment of Cook County following the most acute phases of the COVID-19 pandemic. COPEWELL stands for the "Composite of Post-Event Well-Being," an evidence-based model that helps communities understand factors that influence their overall resilience following an emergency event. The assessment looks at two primary areas: Connectedness and Health & Well-Being. Each area is measured on a scale of I (low) to I0 (high). The group rated Cook County as a 4.29/10 in terms of Health and Well-Being (experiencing a "medium-low" level of resilience). The reasons the group gave to support this rating included:

- 1) People are grateful for the health care options available.
- 2) There are limitations on health care access due to cost and availability of providers.
- 3) There are struggles with childcare and aging in place that strongly affect community well-being.

The group noted that the impact of large systemic issues affecting childcare, health care access, and housing are felt acutely within Cook County. In the area of "connectedness," the group rated Cook County as a 7.34/10 (experiencing a "medium-high" level of resilience). The reasons the group gave to support this rating included:

- 1) A strong spirit of volunteering and supporting one another.
- 2) A strong sense of belonging within the broader community.
- 3) Age-based disparities in feelings of connectedness.

The group noted that while there is a sense of social connection in Cook County, it is not equally shared among all communities, leaving room for social isolation and a sense of disconnectedness.

While the recovery phase from the pandemic will be ongoing, tools like COPEWELL can help us to analyze what factors will influence Cook County's ability to recover.

Hazards in Cook County

Pandemics are only one type of hazard that can affect public health in Cook County. Cook County Emergency Management compiles a "Multi-Hazard Mitigation Plan" for the County that includes all types of emergencies that could affect the health and well-being of the population (Geospatial Analysis Center, 2019). Emergency management uses the "Calculated Priority Risk Index" to assess all potential hazards that can affect the jurisdiction. Factors included in this process are: probability of occurrence,

magnitude/severity, warning time, and duration. Natural hazards considered a high or moderate risk include:

Natural Hazards	Hazard Ranking
Wildfire	High
Severe Winter Storms	High
Severe Summer Storms	High
Extreme Heat/Extreme Cold	Moderate
Flash floods, Riverine Floods, Coastal Floods	Moderate
Drought	Moderate
Erosion, Coastal Erosion, Land Subsidence	Moderate

Potential impacts of these identified hazards include:

- Poor air quality
- Injury and/or loss of life
- Property damage
- Damage to infrastructure
- Safety considerations for emergency personnel and first responders
- Displacement/need for sheltering
- Gaps in communication
- Electrical/broadband outages

The Minnesota Department of Health (MDH) projects that climate change will create warmer and wetter temperatures throughout the 21st century in Minnesota (Minnesota Department of Health, 2018) (Minnesota Department of Health, 2015) They project there will be:

- An increase in the number and strength of weather-related natural disasters
- More heavy precipitation events
- Extended periods of low rainfall
- Higher winter temperatures with reduced snowpack
- Prolonged high heat days
- Ecosystem threats with direct health impacts (such as changes in vector-borne diseases and harmful algae blooms)

Community Health Assessment Maintenance

Updating the Assessment and Continued Community Engagement

Ongoing maintenance of the Community Health Assessment in the years between the five-year assessment cycle will be a key component of this plan. Cook County Public Health and Human Services staff will review the plan on an annual basis to determine whether there are updated data points to

include. Annual revisions will be posted on the County's website, along with a synopsis of changes to the data. Gathering community feedback on the Community Health Assessment is another key component of this plan. Initial feedback will be gathered as the draft assessment is presented to the community in summer of 2023. Ongoing opportunities for engagement will be available as the plan is updated on an annual basis, and upon request by community partners.

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