



2018 Chippewa County Community Health Assessment

EXECUTIVE SUMMARY

This 2018 Chippewa County Community Health Assessment was conducted by the Community Health Assessment Planning Partnership Committee. This group strategically joined efforts to assess health in Chippewa and Eau Claire Counties. The Community Health Assessment Planning Partnership Committee is a collaborative venture involving county health departments, local health care facilities, and nonprofit organizations. The purpose of the assessment is to evaluate and prioritize the health concerns in the county and mobilize the community in working towards health outcomes. As a result of the assessment process collaborative interventions, can be implemented to align with the identified health priorities.

The prioritization process selected for the assessment employed multiple methods to collect quantitative and qualitative data to maximize confidence in overall findings of the top health priorities. These methods included: a community health survey, community conversations, coalition meetings, and comprehensive secondary data collection. Chippewa County identified **mental health, alcohol misuse, substance use, obesity, and physical activity** as the top five health priorities.

A comprehensive collection of county-level quantitative data was collected to compare residents to national benchmarks to depict validity in the prioritization process. This assessment of qualitative and quantitative data will be utilized by the partnership, including the local health coalition members of Chippewa Health Improvement Partnership.

Improving the health of the community takes the efforts of many and the Community Health Assessment Planning Partnership Committee strongly believes in effectively improving community health through focused action. Community health assessments are commonly the first phase of the community health planning efforts. Many community partners, including those who are part of the planning partnership committee will utilize the assessment to create action-oriented plans for their organizations and coalitions. The Community Health Improvement Plan is a three-year action plan that will identify community action to address the newly identified health priorities with special attention to addressing disparities.



Community members learning about the top five health priorities.

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ACKNOWLEDGMENTS

The 2017-2018 Community Health Assessment Planning Partnership Committee is made up of nine community organizations in Chippewa and Eau Claire counties. The committee is working together, to share financial support, resources, and commitment to leverage the health improvements, thereby reducing duplication of public and private sector efforts in both counties.

Members of the Community Health Assessment Planning Partnership Committee include:

Angela Weideman	Director/Health Officer, Chippewa County Department of Public Health
Cortney Draxler	Policy and Systems Division Manager, Eau Claire City-County Health Department
Jan Porath	Executive Director, United Way of the Greater Chippewa Valley
Jay Edenberg	Public Affairs Director, Mayo Clinic Health System
Laura Baalrud	Community Health Educator, 3D Community Health: Body. Mind. Spirit for HSHS Sacred Heart and St. Joseph's hospital
Lieske Giese	Director/Health Officer, Eau Claire City-County Health Department
Lynn Salter	Public Affairs Account Coordinator, Mayo Clinic Health System
Miriam Gehler	Administrator, Marshfield Clinic Health System
Nicole Rubenzer	Director of the Community Health Initiative, United Way of the Greater Chippewa Valley
Rhonda Brown	Division Director, 3D Community Health: Body. Mind. Spirit and the Healing Place for HSHS Sacred Heart and St. Joseph's hospital; Director of Chippewa Health Improvement Partnership
Sara Carstens	Director of Community Wellness and Engagement, Mayo Clinic Health System
Sarah Dillivan-Pospisil	Community Health Assessment Project Manager, report author

The committee could not have completed the assessment process without the active engagement and commitment of the community. The completion of the survey and participation in the community conversations provided results which indicated priority areas where resources should be directed to improve residents' health and well-being. A special thanks to the many community members and organizations whose contributions were invaluable to the completion of the 2018 Chippewa and Eau Claire community health assessment, including:

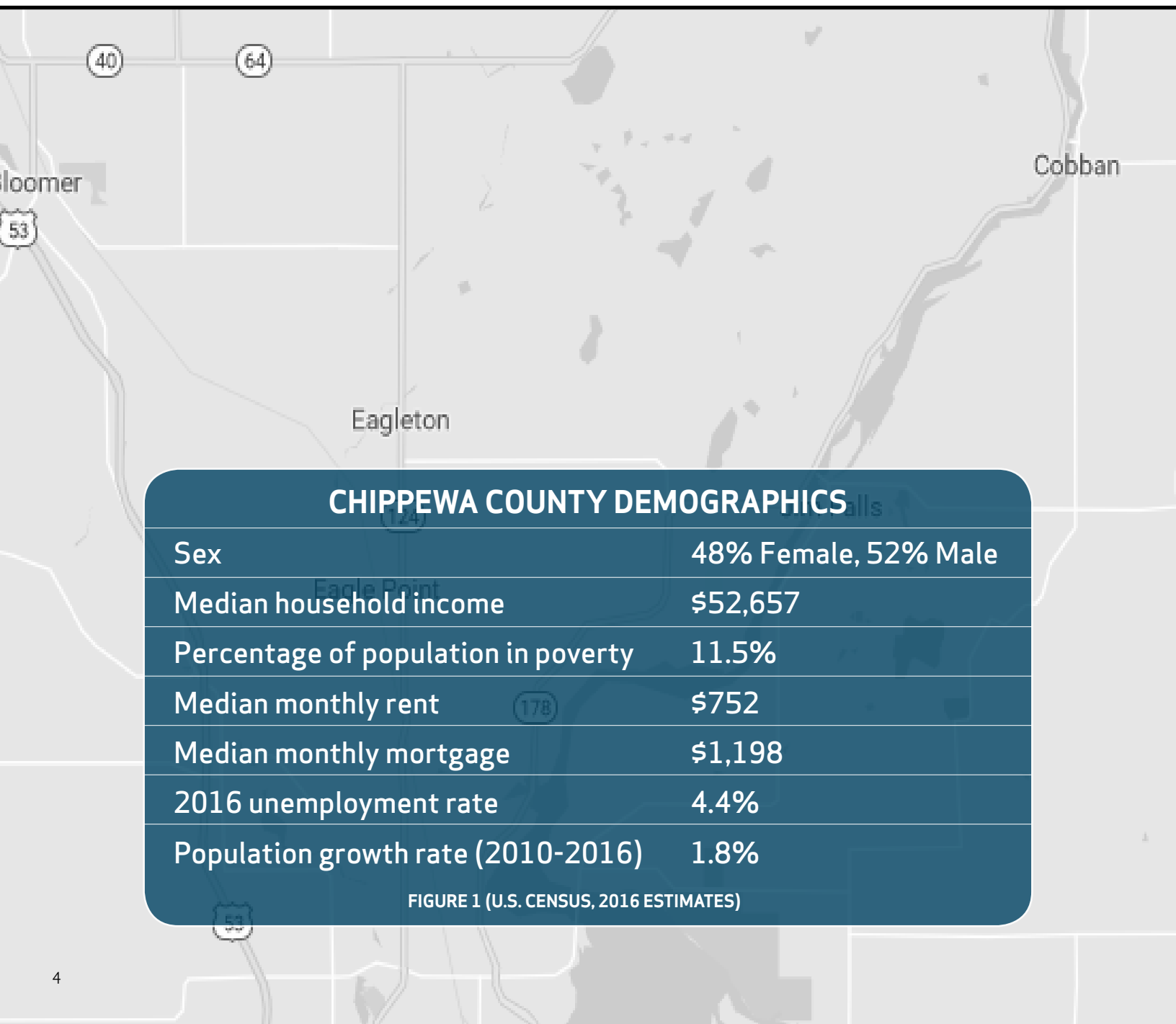
- Chippewa Health Improvement Partnership Steering Committee
- Eau Claire Healthy Communities Council
- Michele Paquette, Marketing Manager, HSHS Sacred Heart and St. Joseph's hospital
- Peggy O'Halloran, Evaluator, Eau Claire City-County Health Department
- Volunteer assistants for survey distribution, collection, and recording



2018 Community Health Assessment Planning Partnership Committee.
Not pictured Jay Edenberg, Lynn Salter, and Lieske Giese

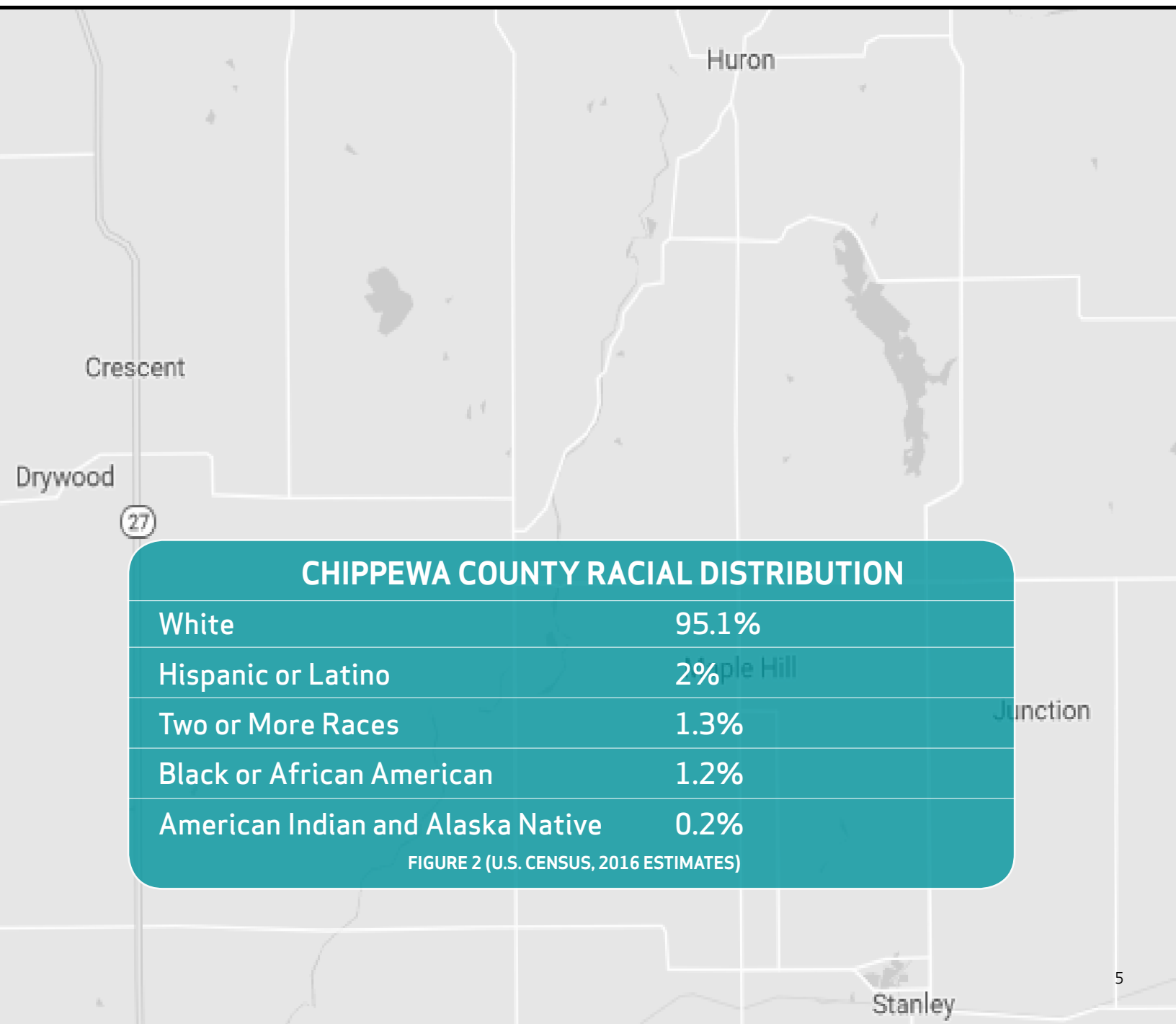
COMMUNITY PROFILE | CHIPPEWA COUNTY

Chippewa County is comprised of five cities (Bloomer, Chippewa Falls, Eau Claire, Cornell, Stanley), and four villages (Lake Hallie, New Auburn, Cadott, Boyd) located in the Chippewa River Valley of west-central Wisconsin. The county is bordered by Rusk and Barron counties to the north, Taylor and Clark counties to the east, Eau Claire County to the south, and Dunn County to the west. In 2016, the county population was 63,649, approximately 46% of which is rural. Thirty-eight percent of Chippewa County household income was between \$50,000 and \$74,9999. The largest age distribution (28%) was 45-64 years in the county. One quarter of the county received a high school diploma or GED, by residents over age 25 years. Reference page 38 for additional demographics.



2018 | CHIPPEWA COUNTY COMMUNITY HEALTH ASSESSMENT

The county seat is located in the city of Chippewa Falls, which has a population of 14,084. Chippewa Falls is approximately 90 miles east of the Twin Cities and 100 miles north of La Crosse, WI. The county provides eight public and private school districts, Chippewa Valley Technical College campus, and Lakeland College. Economic drivers in the county include production agriculture, computer information systems, and seasonal tourism focused on outdoor recreation. Three hospitals serve Chippewa County: Mayo Clinic Health System—Chippewa Valley in Bloomer, HSHS St. Joseph's Hospital in Chippewa Falls, and Our Lady of Victory Medical Center in Stanley.



OVERVIEW

The 2018 Chippewa and Eau Claire Counties' Community Health Assessment (CHA) process and results are described in this report. The purpose of the CHA was to: identify the health needs in the community, prioritize the top health concerns, and engage the residents in developing a shared sense of purpose towards health improvement in each county. This process was undertaken jointly by the collaboration of partners in both Chippewa and Eau Claire Counties. The Community Health Assessment Planning Partnership Committee includes:

- Chippewa County Department of Public Health
- Chippewa Health Improvement Partnership
- Eau Claire City-County Health Department
- Eau Claire Healthy Communities
- Marshfield Clinic Health System
- Mayo Clinic Health System
- HSHS Sacred Heart Hospital
- HSHS St. Joseph's Hospital
- United Way of the Greater Chippewa Valley



The partnership signed a Memorandum of Understanding (MOU) to set forth the roles and responsibilities as they combined resources to assess the health needs in the communities they serve. The Chippewa County and Eau Claire City-County Health Departments have a long standing statutory responsibility to conduct periodic community health needs assessments in order to assess the health priorities of citizens in their jurisdictions. Hospitals also have tax exemption obligations under the Internal Revenue Code relevant to community health needs assessments and setting strategic and operational plans designed to improve health needs for the communities they serve. The partnership has a strong history of collaborating on Community Health Assessment and Community Health Improvement Plan processes, most recently on the CHA process completed in 2015.

The Eau Claire City-County Health Department served as the fiscal agent for the partnership, with each organization contributing finances, plus in-kind services. These resources were used to fund a part-time Project Manager who facilitated meetings for the CHA Committee, coordinated survey distribution secondary data collection for both counties, planned public meetings, and produced the Chippewa and Eau Claire CHA reports. In addition, advertising, meeting supplies, graphic design, and printing were supported by the contributed funds.

Representatives from the partnership met bi-monthly from June 2017 through May 2018 to plan and implement the CHA. The collaboration also allows the community to participate in one comprehensive assessment rather than several CHAs conducted each year by different organizations. The shared CHA reduces duplication of efforts, costs, promotes a greater coordination of resources, and results in a potentially more significant impact on the health needs of the communities.

2018 | CHIPPEWA COUNTY COMMUNITY HEALTH ASSESSMENT

The partnership utilized the [County Health Rankings and Roadmaps](#) Take Action Model (FIGURE 3) to guide the CHA process. The model outlines the steps needed for the community health improvement process by assessing needs and resources of the county, focusing on the top health priorities, and developing action plans with effective programs. Community health priorities were determined during the CHA process through critical evaluation of 14 health focus areas based on the Wisconsin Department of Health Services health plan ([Healthiest Wisconsin 2020](#)). Local data and community health survey results around each of these 14 health focus areas are detailed in the Health Focus Area Summaries section of this report. The CHA process included a variety of data collection methods in order to connect with several different demographic groups in the community and to develop a thorough understanding of health issues facing the Chippewa Valley. These methods included: primary qualitative data collection through

an online and hardcopy community health survey, survey outreach with underrepresented demographics groups, community conversations (to prioritize health focus areas), and coalition meetings (to further evaluate the top five health focus areas). Secondary, quantitative community health data was collected based on the measures recommended in the [Wisconsin Association of Local Health Departments and Boards \(WALHDAB\)](#) core dataset and the State Health Plan. This full range of data is detailed in this report and will also be utilized by the local health coalitions—[Chippewa Health Improvement Partnership \(CHIP\)](#) and [Eau Claire Healthy Communities \(ECHC\)](#)—in order to develop initiatives that are relevant to the unique priority health concerns of both Chippewa and Eau Claire Counties.

Specifically, this report details the CHA process and results as it relates to Chippewa County. The 2018 Eau Claire County Community Health Assessment is available from any of the Eau Claire County-based partner organizations listed on page 6 or the [Eau Claire Healthy Communities website](#).



FIGURE 3. Take Action Systems Model



Chippewa County residents discussing top health priorities.

DATA COLLECTION METHODS

Survey

Partners distributed the community health survey to residents throughout Chippewa County in November and December 2017. The objective of the survey was to better understand the community's perception of the top health concerns in the county. The survey was hosted by the same online development tool as the last CHA, SurveyMonkey, to compare the survey results from 2015. An abbreviated hardcopy survey was created for residents with limited health literacy (available Appendix I). A translator was present during survey outreach sessions to provide assistance to community residents facing a language barrier. The link to the web survey was widely distributed through the networks of each of the partner organizations, as well as over 70 community organizations. Community organizations included: The Salvation Army, Aging and Disability Resource Center, Boys & Girls Club of the Greater Chippewa Valley, Family Resource Center, Western Dairyland Head Start, local churches and food pantries, University of Wisconsin—Extension, Eau Claire Area Hmong Mutual Assistance Association, Family Promise of the Chippewa Valley, Eau Claire YMCA, Eau Claire Chamber of Commerce, Catholic Charities, Bolton Refuge House, Hope Gospel Mission, public and private schools, and others. The survey launch was announced by a press release and was widely advertised in local newspapers, television media outlets, social media, and flyers throughout the county. Special effort was made to ensure the survey was available to underrepresented groups who can be at the highest risk of suffering from health disparities, more information on page 28. Hardcopy surveys were also made available throughout the county by request from the Project Manager. Additional information about how the survey was distributed is presented in the Survey Outreach Section.

Community Health Assessment (CHA) Timeline

June 2017	The partnership began meeting bi-monthly to plan the CHA
November 2017	Distributed community health survey throughout the community
December 2017	Distributed paper copy health surveys to underrepresented groups
January 2018	Began compiling secondary local health data
February 2018	Hosted Community Conversations to determine top health priorities
March 2018	Hosted Coalition meetings to determine top health priorities
May 2018	Completed and publicized CHA report

A total of 1,225 Chippewa County residents completed the survey, and results are reportable at a 95% confidence level. Survey respondents represented a wide range of county residents, including a variety of income and educational levels, age, and household size. One-quarter of the survey respondents were from Chippewa Falls. Twenty-four percent identified as healthcare providers and 5% Emergency Services personnel, indicating many residents not employed in a healthcare related field also participated in the survey. Demographics of Chippewa County residents who completed the survey are available in Appendix II.

The survey focus areas were framed by the Wisconsin State Health Plan addressed in the survey: alcohol misuse, chronic disease prevention & management, communicable disease prevention & control, environmental & occupational health, healthy growth & development, healthy nutrition, injury & violence, mental health, obesity, oral health, physical activity, reproductive & sexual health, substance use, and tobacco use & exposure. Survey respondents were asked to rate each of the health focus areas on a four-point scale indicating how much of a problem they perceived each area to be for the community (1=not a problem, 4= major problem) and identify reasons they felt the area was problematic. At the end of the survey, respondents identified the community's top three health areas in need of improvement.

Do you see this health focus area as a problem in your community?

1. Not a problem
2. Slight problem
3. Moderate problem
4. Major problem

Why is this health focus area a problem in your community?

Survey Outreach Sessions

Analysis of the survey demographics in Chippewa County indicated that a low number of respondents were received from over age 70, as well as respondents with highest education level being some education or high school (available in Appendix II). Therefore, targeted sessions were held to engage these groups and gather information on barriers and resources needed for making healthy choices in the community. These sessions were held in December 2017 throughout the county: Chippewa Valley Correctional Treatment Facility, Eau Claire Area Hmong Mutual Assistance Association, L.E. Phillips Senior Center, Agnes Table, The Community Table, and WIC Clinic in Augusta. Each session was conducted by at least one CHA partner organization representative. Session participants had the choice to complete the community health survey online, hardcopy, or an abbreviated assessment (available in Appendix I), during the outreach. Overall, 127 surveys were completed through the targeted outreach sessions.

SECONDARY DATA COLLECTION

After the survey results were analyzed, local quantitative health data was compiled from a variety of data sources based on the measures recommended by Wisconsin Association of Local Health Departments and Boards. The core dataset was modified slightly based on the availability of Chippewa County-specific data and to improve representation of health focus areas that are underrepresented in the measures. Data sources included: County Health Rankings, US Census, government reports, Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Youth Risk Behavior Surveillance System, health department reports, Wisconsin Department of Health Services statistics, schools, and other publicly available sources.

COMMUNITY HEALTH SURVEY

Top Health Priorities

1. Substance use
2. Mental health
3. Alcohol misuse

County-specific data was compared to state, national rates, and Healthy People 2020 target rates when available. The data points are summarized in the Health Focus Area Summaries section of this report. The full core dataset is presented in Appendix III.

COMMUNITY CONVERSATIONS

The primary and secondary data points were presented at two community conversations that took place February 2018 in the cities of Chippewa Falls and Cornell. Data points are available in the Health Focus Area Summaries section. The purpose of these sessions was to allow the public to prioritize the 14 health focus areas that were initially presented in the community health survey. Identical to the survey, the community conversations were widely publicized through the professional networks of each of the CHA partner organizations, community organizations that assisted in survey distribution, and in local print, broadcast, and social media.

Community conversations were held on weeknight evenings and in a public location (e.g. local public library or community center). Over 30 residents attended the Community Conversations in Chippewa County. Community representation was diverse—attendees represented healthcare, public schools, university students and faculty, local government, and the general public. Each Community Conversation consisted of a data presentation that highlighted survey results and local health data for each of the 14 health focus areas. Data fact sheets presented to the community are available in the Health Focus Area Summaries section. Next, participants discussed the survey results and secondary data points in small groups guided by the Community Conversation Prioritization Criteria handout. Criteria included in the handout are listed below.

COMMUNITY CONVERSATION

Top Health Priorities

1. Mental health
2. Substance use
3. Alcohol misuse

These facilitated group discussions allowed the public to analyze data from multiple sources, which lends to a more complete representation of the health of the county. Participants were able to develop a more complete portrait of health through considering the public perception of health and the secondary data that had been collected by local and national agencies. Data was presented orally and also on clear, concise fact sheets to allow thorough understanding of the data sources during group discussion.

COMMUNITY CONVERSATION PRIORITIZATION CRITERIA

1. Which health areas have the largest community impact?
Consider which areas have a high number of people affected, which areas affect certain groups more than others, and how big the problem is in our community.
2. Which health areas have the most serious impact?
Which areas result in disability, death, have long-term effects, or need action right now? Is the problem getting worse? Will the problem get worse if no action is taken?
3. Which areas is our community ready to change?
Will the community accept new or added programs? Are new programs wanted in certain areas? Is change on a local level reasonable?

Following group discussion, participants were asked to vote for their personal top three health priority areas, with consideration of the survey results and health data presented. Fourteen posters, one for each health area, were distributed around the meeting room. Each participant was able to vote by placing one of three provided 'post-it notes' on each of the three health areas they felt were of the highest priority in the community.

The top three health priorities identified during the Community Conversations in Chippewa County were **Mental Health**, **Substance Use**, and **Alcohol Misuse**. In addition, other areas of high concern for Chippewa County residents included: obesity, healthy nutrition, and chronic disease. At the end of the community conversation, participants interested in joining Chippewa Health Improvement Partnership Action Teams were given the opportunity to complete, Be Part of Healthy Change worksheet, to get involved.



COALITION MEETING

Following the Community Conversations, two final events were held in March 2018 to get feedback on the preliminary CHA results, and to enhance the focus and understanding of the top priorities. The goal of the Coalition Meeting was to: engage coalition members in discussion related to the top five health priorities determined by the community health survey, highlight related initiatives of Chippewa Health Improvement Partnership, and encourage ongoing commitment for local health improvement efforts through collaborative action plans. A total of 12 council members, representing a broad cross-section of local leaders, organizations, and dedicated community members, were present during the Chippewa Health Improvement Partnership Steering Committee meeting. An additional event held with 11 Youth Advisory Council Members participated in the voting process. The structure for both meetings included a presentation of the top five health focus areas based on survey responses, as well as additional quantitative health data related to the five health focus areas. Participants utilized the Community Conversation Prioritization Criteria questions, (page 10) in facilitated small-group discussion. The council members then were asked to vote on the top three health priorities based on the conversation and prioritization criteria worksheet. Data fact sheets similar to those that were presented at the Coalition Meeting are available in the Health Focus Areas Summaries section.

COALITION MEETING

Top Health Priorities

1. Mental health
2. Substance use
3. Alcohol misuse

FINAL PRIORITIZATION PROCESS

In order to carefully and strategically consider all the data and feedback gathered during the CHA process and to determine final community health priorities, a new method, guided by the National Association of County and City Health Officials, Prioritization Matrix, was utilized. Data included in the matrix consisted of the health focus area rankings for the community health survey, community conversations, coalition meetings, and a calculated secondary data score based on comparison to national measures.

2018 | CHIPPEWA COUNTY COMMUNITY HEALTH ASSESSMENT

In this process, all four of these “pillars” of data were scored and weighted for each health priority and then added together to determine the relative ranking of the 14 health priorities (see chart on page 13). The goal of utilizing this method was to account for all the data types and feedback groups. The assigned weights and ranking process allowed for the partnership to have a higher confidence in the data process by adjusting for nonresponse bias and accounting for the importance of both community perception as well as quantitative data input.



NACCHO Prioritization Matrix

To score and rank secondary health data, local measures were compared to national measures. A ratio was calculated for each measure: a ratio of less than 1 indicates that the county is not doing as well as the nation as a whole, a ratio of 1 or close to 1 means the county and national measure are the same or about the same, and a ratio of greater than 1 means the county is doing better than the nation for that measure. Next, an average ratio and rank was calculated for each of the 14 health focus areas. Each rank was given a weight of .35 and added with the other 3 criteria to arrive at a priority score for each health focus area.



The community health survey, community conversations, and coalition meeting rankings were based on votes from community residents on the 14 health focus areas. These priorities were determined by participants after being prompted to consider the size and seriousness of the problem and readiness to change. Each health focus area received a ranking and score based on the number of votes received during the CHA process. Health focus areas with more votes received a lower score compared to those with the least amount of votes. Each rank was multiplied by the designated weight and added with the other criteria.

The data collected through the community health survey, community conversations, and coalition meetings was based on participant’s perception of the problems within the community. The secondary data provided quantitative trends and comparisons to the national measures. By utilizing both, and weighting appropriately, the overall CHA priorities were determined for the county.

HEALTH RANKING + WEIGHTED SCORE = PRIORITY ORDER

How data will be used

The 2018 top five health priorities mirrored similar results from the 2015 Community Health Survey. Obesity, Mental Health, Alcohol Misuse, Substance Use, and Healthy Nutrition were selected as top priorities in Chippewa County from the 2015 assessment.

Chippewa County has several collaborative partnerships that include a wealth of community support and sustainable resources to improve programs and policies. The Community Health Assessment data and information will be used by organizations and coalitions to prioritize in funding applications, build on existing assets, support continuous quality improvement initiatives, address health disparities, and engage stakeholder and policy makers to inspire system-level changes to create a larger impact on the community. This CHA and supporting information will be shared among all partners and made publicly available on partner and coalition websites.

Data will be used to assess needs and planning collaborative efforts to help solve complex health issues with the development of the Community Health Improvement Plan. The Community Health Improvement Plan provides a roadmap to guide the work of goals, specific objectives, and evidence-based strategies, as it relates to the health priority focus area.

COMMUNITY HEALTH ASSESSMENT

TOP 2015 HEALTH PRIORITIES

Mental Health
Obesity
Alcohol Misuse
Substance Use
Health Nutrition

TOP 2018 HEALTH PRIORITIES

Mental Health
Alcohol Misuse
Substance Use
Obesity
Physical Activity

Additional 2018 Health Priorities

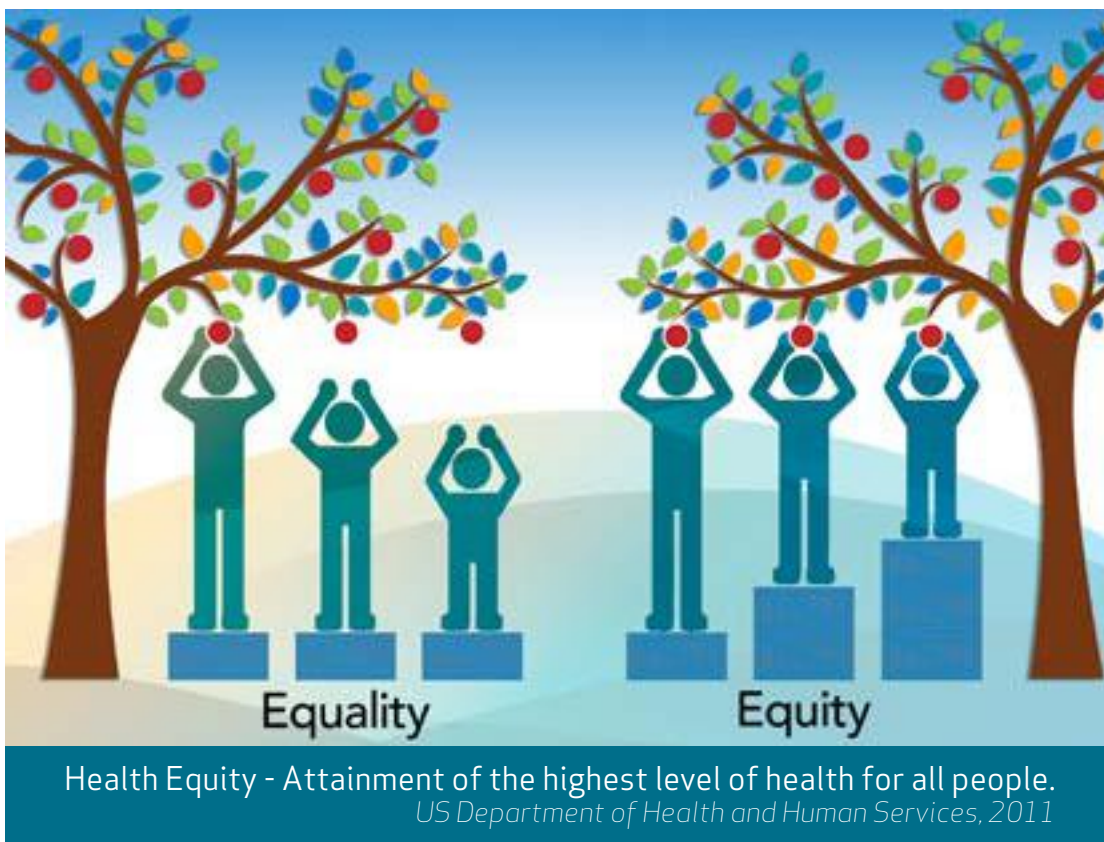
- Injury and Violence Prevention
- Chronic Disease
- Healthy Nutrition
- Tobacco Use and Exposure
- Healthy Growth and Development
- Communicable Disease Prevention and Control
- Reproductive and Sexual Health
- Environmental and Occupational Health
- Oral Health

HEALTH NEEDS AND DISPARITIES

Each partner strongly believes in improving the health of all people in the community, especially by identification of health disparities, gaps, and barriers. Health disparities are population-based differences in health outcomes that are linked with social, economic, and/or environmental disadvantage. While population data on health disparities is limited due to small numbers in Chippewa County, the partners specifically worked to get input through survey outreach. As the community builds and strengthens programs on the top health priorities leading to identifying health disparities and/or inequities within their health areas. Secondary data gathered throughout the CHA process, insight from the community, and coalition conversations provided additional perspective on the disparities among populations within Chippewa County.

Approximately, 46% of the residents in the county are living in a rural location compared to the state rate of 29.8%. Rural populations suffer from health inequities regarding access to food and physical activity locations. Rural residents have less access to fresh and healthy food, as convenience stores and fast food restaurants are often more common in villages than grocery stores. Nineteen percent of the residents do not have adequate access to locations for physical activity. Improper access can deter county residents from pursuing healthy behaviors, such as exercising outdoors.

According to the 2017 Community Health Survey, 62% of survey respondents felt healthy nutrition was a problem in Chippewa County and indicated the top reasons to be "some people don't have enough food" or "can't afford enough food." The percentage of residents with food insecurity and limited access to healthy foods are higher in the Chippewa County compared to the state rate.



HEALTH NEEDS AND DISPARITIES

Chippewa County has 6,740 residents who lack adequate access to food within the community which is higher than the national rate. Low-income residents that do not live close (rural areas are defined as less than ten miles from a grocery store; nonrural, less than one mile) to a grocery store in the county is 3,154 similar to the Wisconsin rate. The percentage of children in the county who attend a public school that are eligible for free or reduced price lunch has continued to increase, currently 42% of children.

Non-insured or underinsured residents suffer from health disparities regarding access to care. Ten percent of adults and four percent of children in the county do not have insurance. In the last year, one-quarter of residents did not get the recommended dental or medical care; which is similar to the Wisconsin rate. An area of high concern is the availability of health care providers that accept BadgerCare, the healthcare coverage program for low-income Wisconsin residents. According to the 2017 Community Health Survey, 73% of survey respondents felt “good dental care or personal dental care practices are not affordable” in Chippewa County and indicated one of the top reasons to be “lack of dental providers that accept BadgerCare” with 60% of responses.

In recognition of disparities that are faced by rural community members, special attention was paid to ensuring surveys were distributed in the rural areas. This was done by making them available in each town and advertising the survey link through all of the public school districts in the county. In addition, Community Conversations were planned and held in rural communities in Chippewa County in addition to Community Conversations held in the city of Cornell. During survey distribution and Community Conversations, the CHA Committee also worked closely with organizations in Chippewa County that serve populations that typically experience poorer health outcomes, such as low-income and elderly residents. To this end, the partnership advertised and made paper surveys available at organizations such as the free clinic, meal sites, and the area senior centers.

HEALTH:

The state of complete physical, social, and mental well-being, and not merely the absence of disease or infirmity.
World health Organization, 1948

HEALTH INEQUITIES:

Health disparities based on unfair, socially-determined circumstances. Because health inequities are socially determined, change is possible.
Minnesota Department of Health, 2015

COMMUNITY ASSETS INVENTORY

Chippewa County has many organizations that are committed to improving community health and well-being. The CHA Committee assembled a list of community assets and resources that can be mobilized to address the top three health priorities in the community. The list was created using data collected from partnership connections using local directories, and internet sources. This listing is not intended to be exhaustive. Please refer to Appendix V.

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Health Focus Area Summaries

MENTAL HEALTH

HEALTH
PRIORITY | **#1**

Defined as: Services and support to address mental health conditions including depression, anxiety, and post traumatic stress disorder

LOCAL DATA

Hospitalizations for self-inflicted wounds per 100,000 people¹



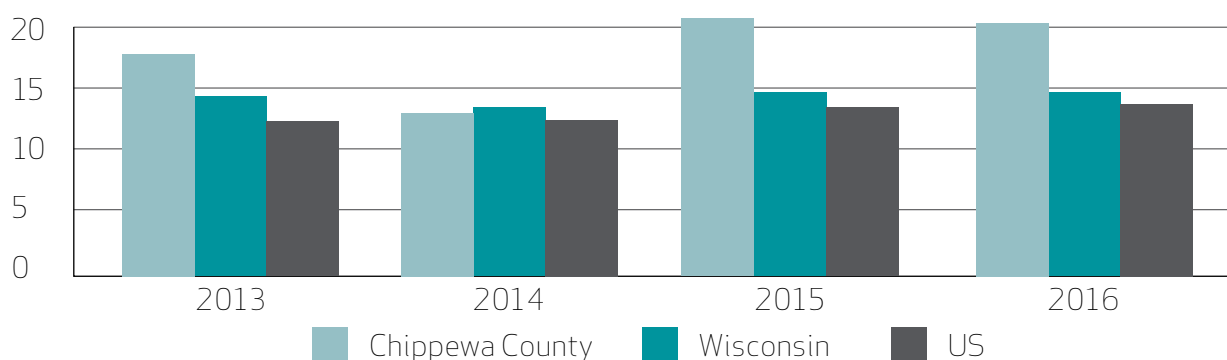
133 Chippewa County
96 Wisconsin

Number of mentally unhealthy days in the past 30 days²



3.2 Chippewa County
3.7 Wisconsin

Suicide death rate per 100,000 people³



According to the American Foundation for Suicide Prevention, there are 123 suicides each day. Chippewa County suicide rates per 100,000 people are higher compared to Wisconsin and the U.S. rate.

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

People don't feel comfortable seeking mental health services

Affordable mental health treatment is not available

People cannot easily access services for mental health treatment

88%

76%

73%

How serious is this health topic?

Major problem.....**41%**

Moderate problem.....**32%**

Slight problem.....**20%**

Not a problem.....**7%**

¹2017 County Health Rankings (DHS-Wisconsin Interactive Statistics on Health, 2012-2014)

²2017 County Health Rankings (Behavioral Risk Factor Surveillance System, 2015)

³American Foundation for Suicide Prevention/Chippewa County Department of Public Health (2017)

⁴2017 Chippewa County Community Health Survey

ALCOHOL MISUSE

HEALTH
PRIORITY | #2

Defined as: Underage alcohol consumption, consumption during pregnancy, binge drinking (4+ drinks per occasion for women, 5+ drinks per occasion for men), and heavy drinking (1+ drinks per women on daily average, 2+ drinks per men on daily average)

LOCAL DATA

Percent of driving deaths with alcohol involvement¹



47% Chippewa County
30% U.S.

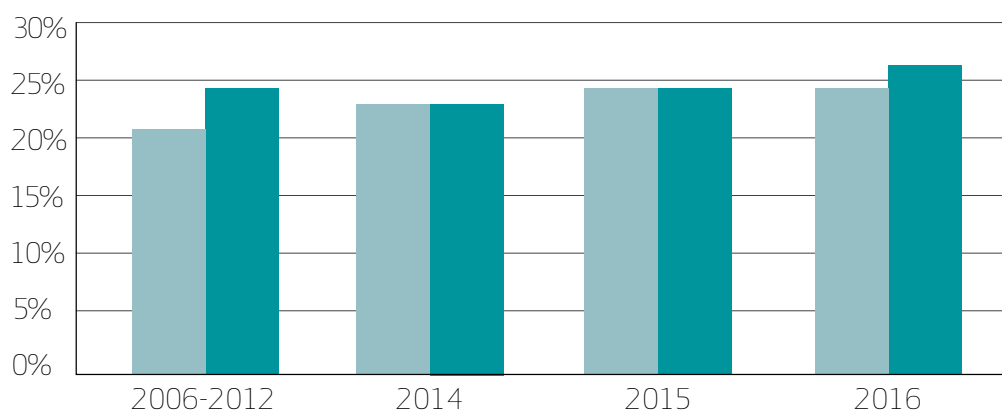
High school students that reported consuming at least one drink in the past 30 days²



32% Chippewa County
33% Wisconsin

Adults that reported engaging in excessive (binge or heavy drinking) drinking³

Chippewa County
Wisconsin



Liver Cirrhosis or liver damage is the results of “heavy” drinking over a lengthy time period. Wisconsin reported 354 deaths from Alcohol-Related Liver Cirrhosis and slightly rising (Wisconsin Epidemiological Profile on Alcohol and Other Drug Use, 2016).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Alcohol misuse is an accepted attitude or belief

73%

Alcohol is easily available in the community

66%

There are too few alcohol-free social activities

44%

How serious is this health topic?

Major problem.....**31%**
Moderate problem.....**46%**
Slight problem.....**18%**
Not a problem.....**5%**

¹2017 County Health Rankings (Fatality Analysis Reporting System, 2011-2015)

²Chippewa Pride Survey (2015)

³2016 WI Epidemiological Profile on Alcohol & Other Drug Use (2012-2014)

⁴2017 Chippewa County Community Health Survey

SUBSTANCE USE

HEALTH
PRIORITY | **#3**

Defined as: Use of and negative impacts from mood altering substances (marijuana, heroin) or misuse of prescription drugs

LOCAL DATA

Drug arrests per 100,000 people¹



103 Chippewa County
439 Wisconsin
490 U.S.

Drug-related hospitalizations per 100,000 people²



307 Chippewa County
261 Wisconsin

Opioid-related
hospitalization per
1,000 people³

Chippewa County
Wisconsin



In Wisconsin, between 2012-2014, forty percent of counties experienced an increase in opioid-related hospitalizations (Wisconsin Epidemiological Profile on Alcohol and Other Drug Use, 2016).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Substances are easily available

73%

Treatment is too expensive

49%

More substance use prevention education
is needed

49%

How serious is this health topic?

Major problem.....**51%**

Moderate problem.....**31%**

Slight problem.....**15%**

Not a problem.....**4%**

¹2016 WI Epidemiological Profile on Alc. & Other Drug Use (2013-2014)

²2016 WI Epidemiological Profile on Alc. & Other Drug Use (2014)

³2016 WI Epidemiological Profile on Alc. & Other Drug Use (2013-2014)

⁴2017 Chippewa County Community Health Survey

OBESITY

HEALTH
PRIORITY | #4

Defined as: Presence of excessive body fat that can increase risk of heart disease, high blood pressure, or diabetes

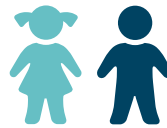
LOCAL DATA

Adults with a body mass index over 30¹



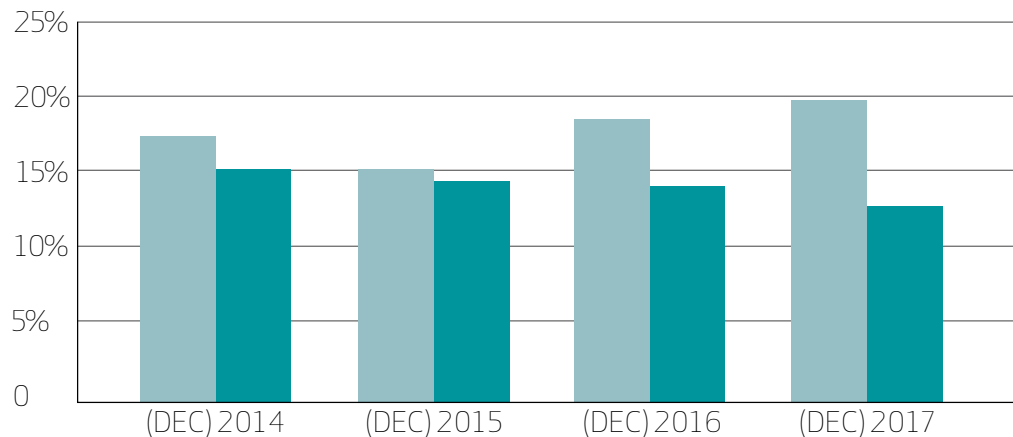
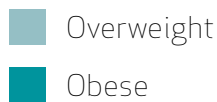
30% Chippewa County
30% Wisconsin

Children 2-5 years old in WIC (Women, Infant, and Children) that are obese²



12% Chippewa County
15% U.S.

Body Mass Index trends for Chippewa City - County WIC Program participants (ages 2-5)³



In 2017, Women, Infant and Children Program participants through Chippewa County has increased in the overweight category, but decreased in obesity. Obesity is 3% lower compared to the Wisconsin rate (Wisconsin WIC Program BMI Trend Report, 2014-2017).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Health care or personal practices for healthy weight management are not the easy or desirable option

Healthy weight support groups or treatment services are not affordable

People are not aware of the resources or services available for healthy weight management

83%

59%

56%

How serious is this health topic?

Major problem.....**35%**

Moderate problem.....**41%**

Slight problem.....**18%**

Not a problem.....**6%**

¹2017 County Health Rankings (CDC Diabetes Interactive, 2013)

²Chippewa City-County Health Department (Wisconsin WIC Program, 2017)

³Chippewa City-County Health Department (Wisconsin WIC Program, 2017)

⁴2017 Chippewa County Community Health Survey

PHYSICAL ACTIVITY

**HEALTH
PRIORITY** | **#5**

Defined as: Staying active to improve overall health, including walking, biking, swimming, team sports, or weight lifting

LOCAL DATA

Residents with adequate access to a physical activity location¹

Chippewa County - 63%

U.S. - 84%

High school students who watched television 3 or more hours/day²

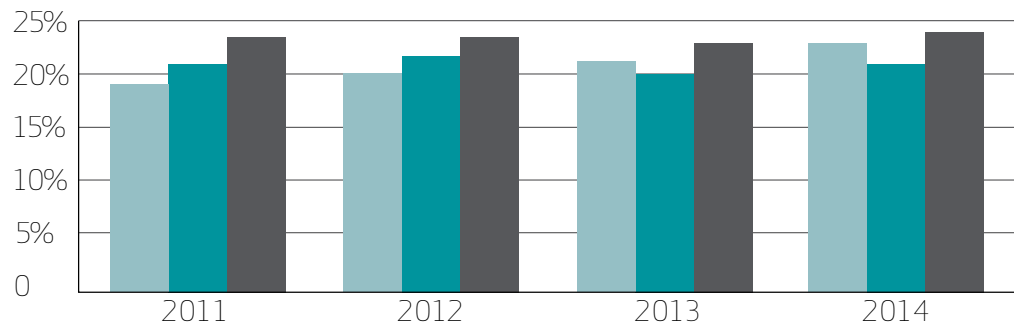
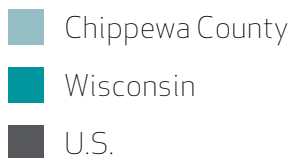


17% Wisconsin

25% U.S.

Fifty-eight percent of Chippewa County high school students reported being physically active for at least 60 minutes five out of the last seven days (Chippewa County Youth Risk Survey, 2017).

Adults (20 and older) reporting no leisure³



Chippewa County has continued to increase the number of adults reporting no physical activity time, higher than the Wisconsin rate and slightly below the national rate. Approximately, 1 out of 4, report no leisure-time physical activity in the County. Inactivity leads to increased risks of hypertension, cardiovascular disease, type 2 diabetes, stroke and premature death (County Health Rankings, 2015-2018).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Being physically active is not the easy or desirable choice

Physical activity choices are not affordable or lack sufficient discounts

People do not have the time to be physically active

81%

68%

57%

How serious is this health topic?

Major problem.....**12%**

Moderate problem.....**31%**

Slight problem.....**32%**

Not a problem.....**25%**

¹2017 County Health Rankings (ArcGIS, 2014)

²Youth Risk Behavioral Surveillance System (2015)

³2017 County Health Rankings (The National Diabetes Surveillance System, 2013)

⁴2017 Chippewa County Community Health Survey

INJURY AND VIOLENCE PREVENTION

HEALTH
PRIORITY | #6

Defined as: Preventing injury from accidents or violence (i.e. falls, car crashes, abuse, assault)

LOCAL DATA

Injury hospitalizations per 100,000 people¹



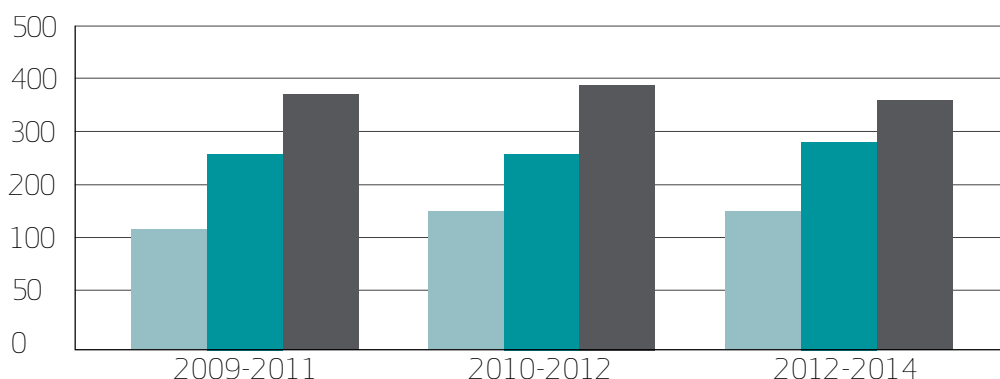
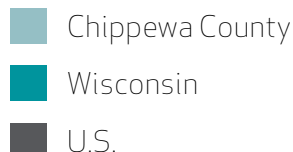
852 Chippewa County
830 Wisconsin
599 U.S.

Injury deaths due to falls per 100,000 people, for adults over 65²



98 Chippewa County
127 U.S.

Violent crimes per 100,000 people³



A community with higher rates of reported violent crimes (homicide, rape, robbery, and aggravated assault) leads to decreased outdoor healthy behaviors. Chippewa County reported 76 violent crimes from 2012 to 2014 (County Health Rankings, 2014-2017).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

People are not aware as to how to prevent violence in relationships

39%

People aren't aware of resources available for victims of violence (counseling, safe housing)

59%

Safe neighborhoods are not the affordable or easy option

39%

How serious is this health topic?

Major problem.....**9%**
Moderate problem.....**27%**
Slight problem.....**41%**
Not a problem.....**23%**

¹DHS Wisconsin Interactive Statistics on Health (2014)
²DHS Wisconsin Interactive Statistics on Health (2012-2014)
³2017 County Health Rankings (FBI-Uniform Crime Reporting, 2012-2014)
⁴2017 Chippewa County Community Health Survey

CHRONIC DISEASE PREVENTION AND MANAGEMENT

**HEALTH
PRIORITY** | **#7**

Defined as: Preventing and managing illnesses that last a long time and usually cannot be cured (i.e. Alzheimer's, cancer, diabetes, heart disease)

LOCAL DATA

Adults diagnosed with diabetes¹



1 in 13 - Chippewa County



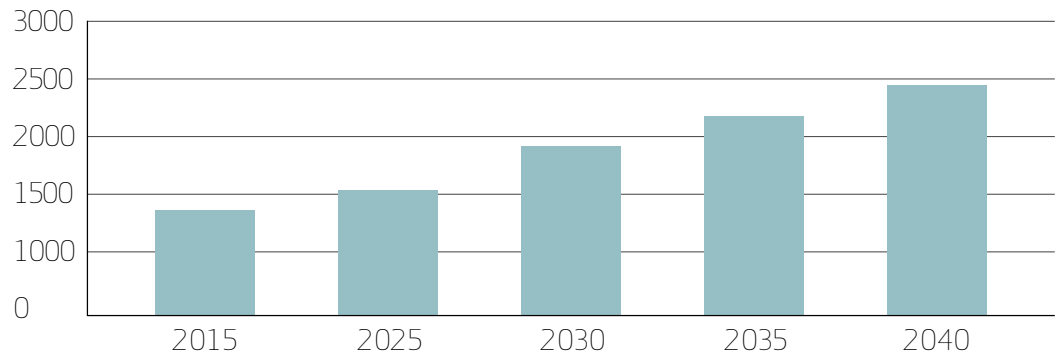
1 in 11 - U.S.

Cancer incidence per 100,000 people²

Chippewa County - 487

U.S. - 454

Estimated and Projected
Dementia in Chippewa
County, Ages 65 and
older³



In the United States, every 67 seconds, someone develops Alzheimer's. Wisconsin is projected to have an 18.2% increase in Alzheimer's incidence between 2015 and 2025; Chippewa County 23% (Wisconsin Department of Health Services, 2015).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

People lack insurance coverage or the ability to pay for managing existing conditions

People cannot easily access services for chronic disease prevention or management

Healthy lifestyle choices and managing risk

81%

73%

53%

How serious is this health topic?

Major problem.....**14%**

Moderate problem.....**38%**

Slight problem.....**38%**

Not a problem.....**33%**

¹2017 County Health Rankings (The National Diabetes Surveillance System, 2013)/CDC (2014)

²2017 County Health Rankings (Wisconsin Cancer Reporting System, 2009-2013)

³2017 Alzheimer's Disease Facts and Figures (2014)

⁴2017 Chippewa County Community Health Survey

HEALTHY NUTRITION

**HEALTH
PRIORITY** | **#8**

Defined as: Having enough and nutritious food for healthy eating (i.e. balanced meals, breastfeeding infants, fruits & vegetables)

LOCAL DATA

Infants in WIC (Women, Infants, Children) exclusively breastfed for three months¹



51% Chippewa County
28% Wisconsin

Percent of adults that consume vegetables less than one time per day²

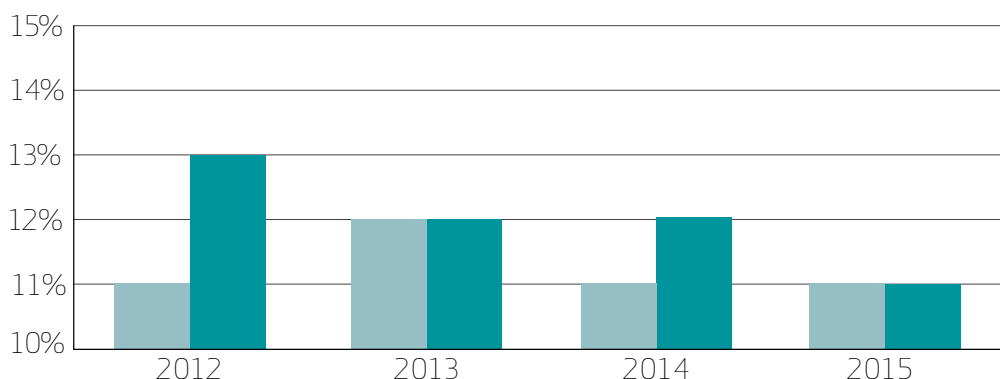


24% Wisconsin
22% U.S.

Over 90% of both middle and high school students in Chippewa County reported eating fruits and veggies over one week (Chippewa County Youth Risk Survey, 2017).

Percentage that lack adequate access to a reliable food source³

Chippewa County
Wisconsin



In 2015, food insecurity affected 6,417 Chippewa County residents compared to Wisconsin at 5% (County Health Rankings, 2015-2018).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Some people can't afford enough food

61%

Not everyone knows how to eat healthy or has the skills to prepare healthy food

65%

Some people don't have enough food

61%

How serious is this health topic?

Major problem.....**18%**

Moderate problem.....**44%**

Slight problem.....**27%**

Not a problem.....**11%**

¹Breastfeeding Composite Report (2017)

²CDC (Winnable Battles, 2015)

³2017 County Health Rankings (Map the Meal Gap, 2014)

⁴2017 Chippewa County Community Health Survey

TOBACCO USE & EXPOSURE

HEALTH
PRIORITY

#9

Defined as: Preventing tobacco use, providing treatment to stop smoking, protection from second-hand smoke

LOCAL DATA

Adults report smoking most days or everyday¹



17% Chippewa County
17% Wisconsin
16% U.S.

Tobacco sales to minors²

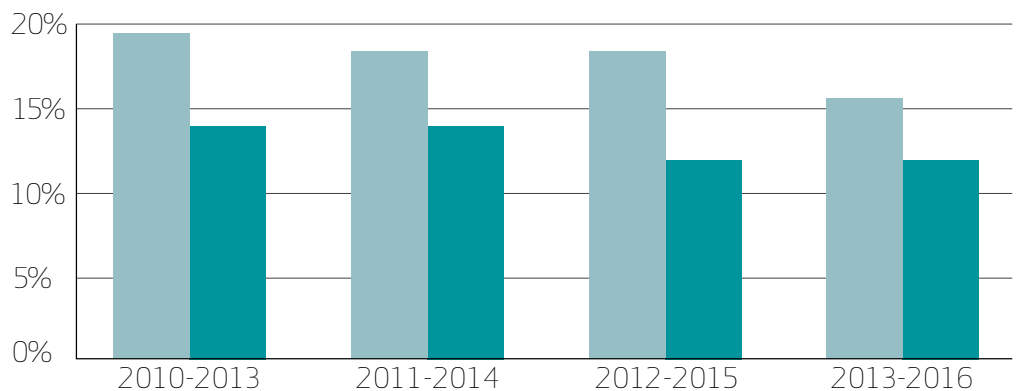


4.8% Chippewa County
9.8% U.S.

Wisconsin Wins campaign designed to reduce illegal tobacco sales to minors. Chippewa County had 62 inspections in 2017 with 3 sales.

Mothers reported smoking during pregnancy³

Chippewa County
Wisconsin



Nationally, 10% of women reported smoking during the last three months of pregnancy. Chippewa County, had a decrease of mothers who reported smoking; difference of 109 expecting mothers (County Health Rankings, 2015-2018).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Tobacco products are easily available

Tobacco use is an accepted practice

There are not more incentive, such as lower insurance premiums, for non-smokers

61%

63%

44%

How serious is this health topic?

Major problem.....**11%**
Moderate problem.....**40%**
Slight problem.....**40%**
Not a problem.....**9%**

¹2017 County Health Rankings (Behavioral Risk Factor Surveillance System, 2015)

²Wisconsin WINS (2017)

³2017 County Health Rankings (DHS Wisconsin Interactive Statistics on Health, 2012-2014)

⁴2017 Chippewa County Community Health Survey

HEALTHY GROWTH & DEVELOPMENT

**HEALTH
PRIORITY** | **#10**

Defined as: Care and support for best possible physical, social & emotional health and development (i.e. prenatal care, regular check-ups, child & elderly care)

LOCAL DATA

Fourth grade students proficient or advanced in reading¹



53% Chippewa County
52% Wisconsin

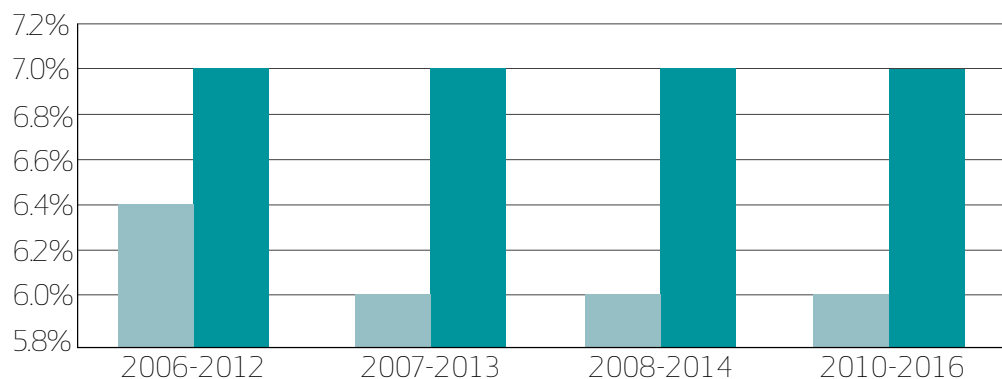
Adults 25-44 with some college or associate's degree²



63% Chippewa County
57% U.S.

Percentage of live births with low birthweights (<2500 grams)³

■ Chippewa County
■ Wisconsin



Low birthweight (LBW) contributes to multiple risk factors, mortality risk, morbidity, and health behaviors. Chippewa County has remained stable at 6% equating to 320 LBW live births (County Health Rankings, 2015-2018).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

People are unable to afford health care for themselves or their children

74%

People cannot easily access services for healthy growth and development

59%

People are unable to afford health care for pregnancy

47%

How serious is this health topic?

Major problem.....**7%**
Moderate problem.....**24%**
Slight problem.....**39%**
Not a problem.....**30%**

¹2017 County Health Rankings (American Community Survey, 2011-2015)

²2017 County Health Rankings (National Vital System, 2008-2014)

³2017 County Health Rankings (American Community Survey, 2011-2015)

⁴2017 Chippewa County Community Health Survey

COMMUNICABLE DISEASE PREVENTION & CONTROL

HEALTH
PRIORITY | **#11**

Defined as: Illnesses caused by bacteria, viruses, parasites, etc. that can be passed to others (i.e. Lyme disease, influenza, whooping cough)

LOCAL DATA

Population over age 65 that had flu shot in last 12 months¹



66% Chippewa County
90% National benchmark target

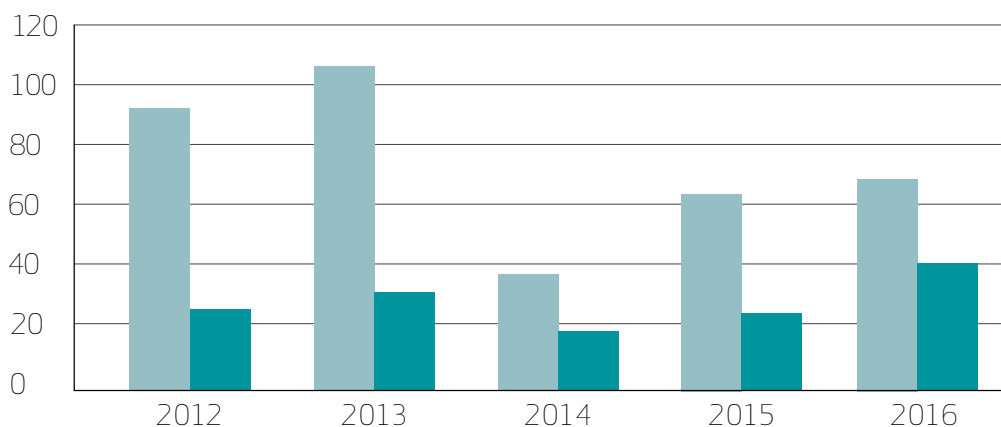
Children that received recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella, and pneumococcal²



77% Chippewa County
71% U.S.

Lyme disease incidence per 100,000 people³

Chippewa County
Wisconsin



The western and northern regions in Wisconsin have the highest prevalence of Lyme disease. Now, the central and eastern regions of Wisconsin have witnessed an increase (Wisconsin Department of Health Services, 2017).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Communicable disease control practices are not the easy or desirable option

Prevention methods are not the easy or desirable option

Prevention or control methods are not affordable or covered by insurance

64%

46%

37%

How serious is this health topic?

Major problem.....**2%**
Moderate problem.....**16%**
Slight problem.....**50%**
Not a problem.....**32%**

¹DHS (Wisconsin Immunization Registry, 2015-2016)

²2017 County Health Rankings (Wisconsin Immunization Registry, 2015)

³Environmental Public Health Data Track (2016)

⁴2017 Chippewa County Community Health Survey

REPRODUCTIVE & SEXUAL HEALTH

HEALTH
PRIORITY | **#12**

Defined as: Education and health care to maintain sexual health, prevent unintended pregnancy and sexually transmitted infections

LOCAL DATA

Females age 15 to 19 that gave birth per 1,000 people¹



21 Chippewa County
24 Wisconsin
32 U.S.

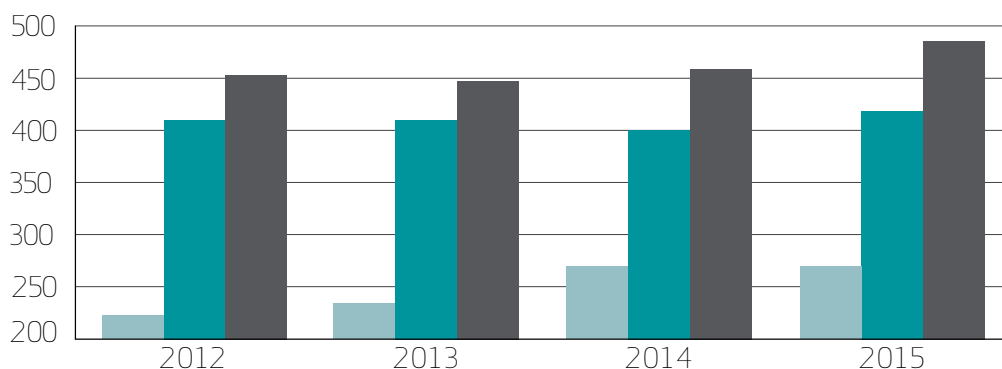


Pregnant women that received 1st trimester prenatal care²

79% Chippewa County
76% Wisconsin
77% U.S.

Newly diagnosed chlamydia cases per 100,000³

Chippewa County
Wisconsin
U.S.



In 2015, 167 incidences of Chlamydia cases were report by Chippewa County. The newly diagnoses rate is approximately 44% less than national rate (County Health Rankings, 2015-2018).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

People do not feel comfortable seeking services

74%

Sexual health care or personal practices are not the easy or desirable choice

57%

People are not aware of where to receive sexual health supplies or care

52%

How serious is this health topic?

Major problem.....**6%**
Moderate problem.....**19%**
Slight problem.....**38%**
Not a problem.....**37%**

¹2017 County Health Rankings (National Vital Statistics System (2008-2015)

²DHS- Wisconsin Interactive Statistics on Health (2015)

³2017 County Health Rankings (National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2014)

⁴2017 Chippewa County Community Health Survey

ENVIRONMENTAL & OCCUPATIONAL HEALTH

HEALTH
PRIORITY | **#13**

Defined as: Illnesses and injuries from indoor and outdoor hazards, such as chemicals, contaminated food/water, polluted air, or work hazards

LOCAL DATA

Radon tests that exceeded the recommended level of 4 picocuries per liter¹



1.8 pCi/L Wisconsin
1.3 pCi/L U.S.

Chippewa County Department of Public Health distributed 114 kits. 63 kits had radon levels above recommendations.

Percent of housing units built before 1950s²

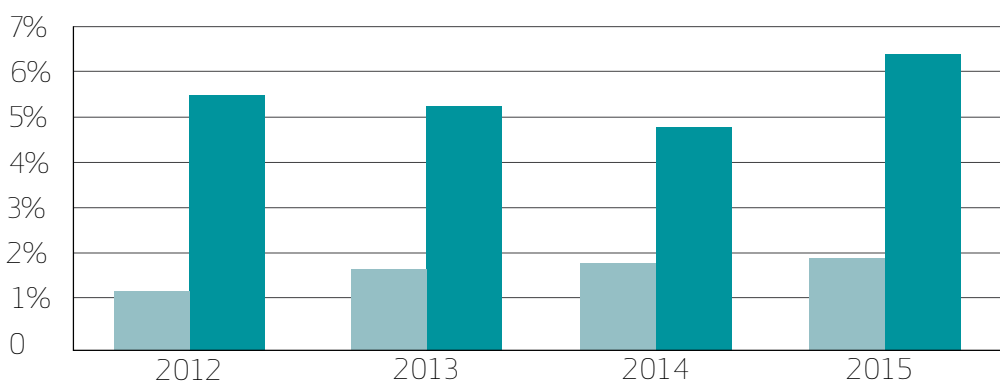


26% Chippewa County
26% Wisconsin

This measure is tracked due to older houses that are susceptible to lead or asbestos poisoning.

Children (birth to < 6 years) lead poisoning with blood lead levels of 5- <10 µg/dl³

Chippewa County
Wisconsin



Lead poisoning is defined at or above 5 micrograms per deciliter by the Centers for Disease Control and Prevention (Environmental Public Health Data Tracker, 2015).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Home improvement measures are not affordable

49%

People are not aware of common home hazards, or how to decrease them

59%

Safe neighborhoods, residences, or work areas are not always the easy option

49%

How serious is this health topic?

Major problem.....**4%**
Moderate problem.....**13%**
Slight problem.....**36%**
Not a problem.....**47%**

¹2017 Chippewa County Department of Public Health (2014-2017)
²2017 County Health Rankings (American Community Survey, 2011-2015)
³2015 Environmental Health Profile (2014)
⁴2017 Chippewa County Community Health Survey

ORAL HEALTH

HEALTH
PRIORITY | **#14**

Defined as: Keeping teeth, gums, and mouth healthy to prevent mouth pain, tooth decay, tooth loss, mouth sores

LOCAL DATA

3rd graders with untreated dental decay¹



17% Western Wisconsin

18% Wisconsin

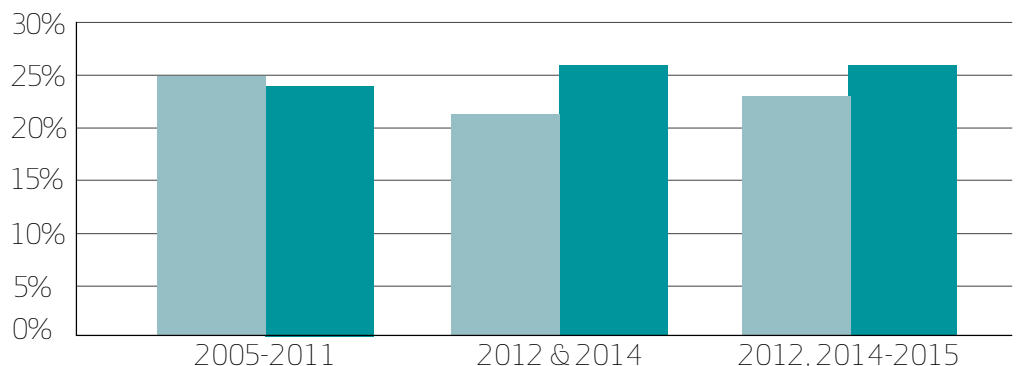
Residents on municipal water with fluoride content at the recommended level²

Chippewa County - 16%

Wisconsin - 89%

Residents (age 2+) that did not have a dental visit in the past year³

Chippewa County
Wisconsin



Maintaining proper oral health is not only good for a healthy smile, but prevents certain oral diseases (gum disease) and chronic diseases (heart disease) associated with improper dental hygiene (County Health Rankings, 2015-2017).

COMMUNITY HEALTH SURVEY⁴

Top reasons this is a problem in our community:

Good dental care or personal dental care practices are not affordable

Dental clinics that accept BadgerCare are limited

People cannot easily access services for dental care

How serious is this health topic?

73%

60%

53%

Major problem.....**10%**
Moderate problem.....**23%**
Slight problem.....**38%**
Not a problem.....**29%**

¹DHS-Health Smiles/Healthy Growth Wisconsin's Third Grade Children (2013)

²Environmental Public Health Tracker (2015)

³2017 County Health Rankings (DHS - Wisconsin Family Health Survey, 2012, 2014, 2015)

⁴2017 Chippewa County Community Health Survey

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Appendix I: Community Health Survey

Abbreviated Community Health Survey created for outreach sessions

Community Health Survey for Chippewa and Eau Claire Counties

This survey is being conducted to better understand the health issues in Chippewa and Eau Claire counties and how to address them.

Participation in this survey is voluntary. Your answers will be anonymous, confidential, and combined with those of all other survey respondents. The results will be shared with community members who are interested in improving the health of our community.

The questions in this survey are based on the Health Areas of the Wisconsin State Health Plan. For each health area, please indicate if you feel the area is a problem in the Chippewa and Eau Claire County community and share your ideas about services and programs that would help improve community health. Thank you for contributing to the Community Health Survey for Chippewa and Eau Claire counties!

1. Do you live within Chippewa or Eau Claire County?

- ☐ Yes-Chippewa County
- ☐ Yes-Eau Claire County
- ☐ No

2. For each health area listed below, please indicate if you feel it is a problem in your community (Chippewa or Eau Claire County).

	Not a problem	Slight problem	Moderate problem	Major problem
Healthy Nutrition	☐	☐	☐	☐
Alcohol Misuse	☐	☐	☐	☐
Tobacco Use and Exposure	☐	☐	☐	☐
Substance Use	☐	☐	☐	☐
Chronic Disease Prevention and Management	☐	☐	☐	☐
Communicable Disease Prevention and Control	☐	☐	☐	☐
Environmental and Occupational Health	☐	☐	☐	☐
Healthy Growth and Development	☐	☐	☐	☐
Injury and Violence	☐	☐	☐	☐
Mental Health	☐	☐	☐	☐
Oral Health	☐	☐	☐	☐
Physical Activity	☐	☐	☐	☐
Reproductive and Sexual Health	☐	☐	☐	☐
Obesity	☐	☐	☐	☐

Abbreviated Community Health Survey created for outreach sessions

Choose 3 areas from the list on page 1 that you think are the biggest problem in your community and please comment on why.

Health area 1: _____ is a problem in your community because...

Health area 2: _____ is a problem in your community because...

Health area 3: _____ is a problem in your community because...

Age: _____ years

Gender: _____

Race/Ethnicity:

- ☐ Asian/Pacific Islander
- ☐ Black/African American
- ☐ Hispanic/Latino
- ☐ Native American
- ☐ White
- ☐ Other, please specify: _____

Thank you for completing this survey!

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Appendix II:

Chippewa County Profile

Chippewa County Demographics

Figure 1. Household income distribution in Chippewa County (US Census, 2016 estimates)

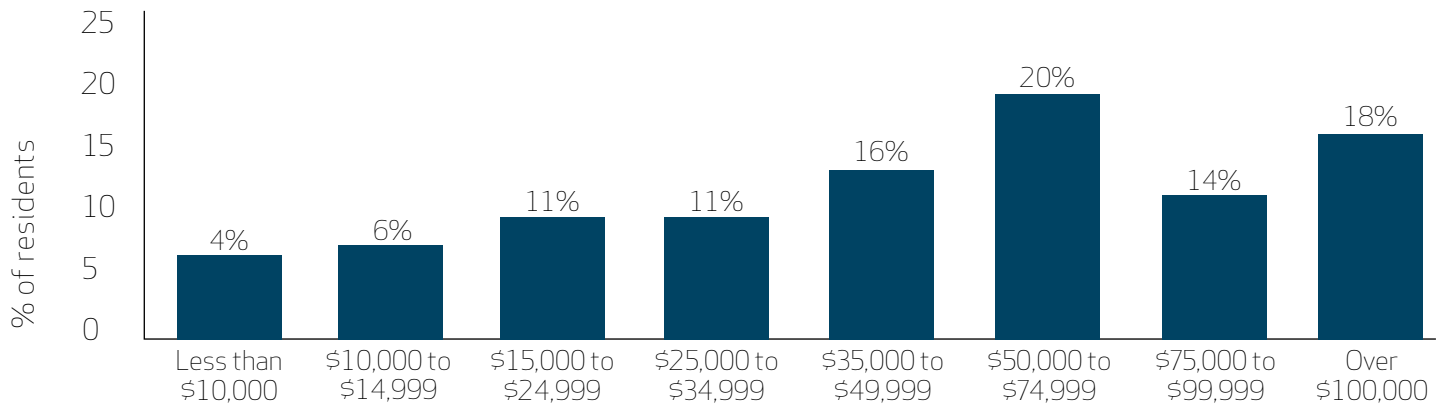


Figure 2. Highest education level attained by Chippewa County residents over age 25 (US Census, 2016 estimates)

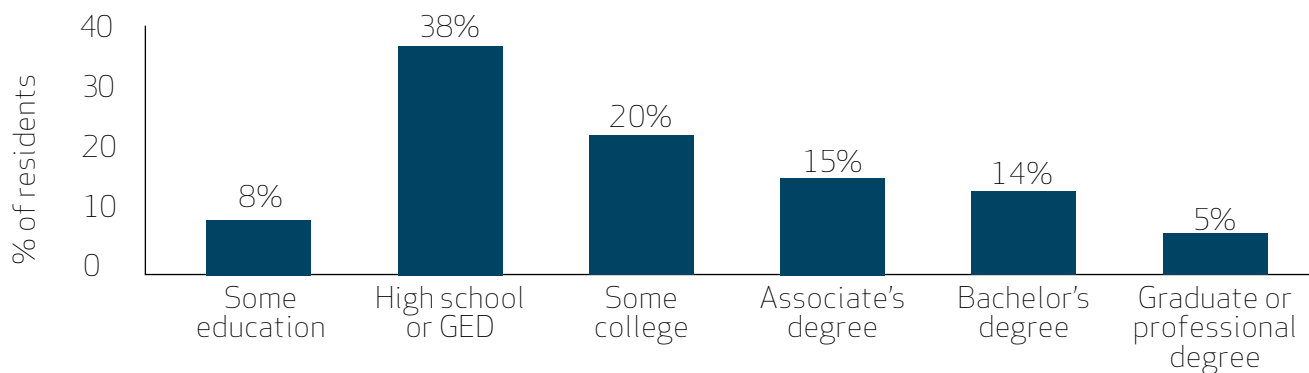
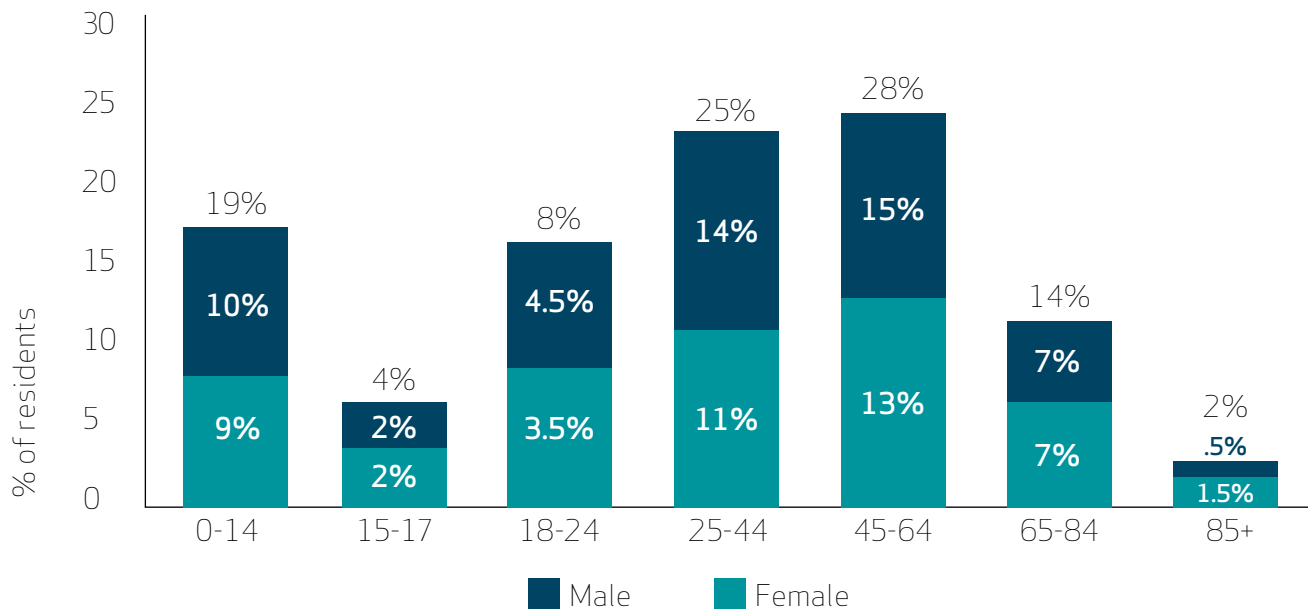


Figure 3. Age distribution of Chippewa County residents (DHS public health profile, 2017)



Community Health Survey Demographics

Figure 1. Household income distribution in Chippewa County who completed the Community Health Survey

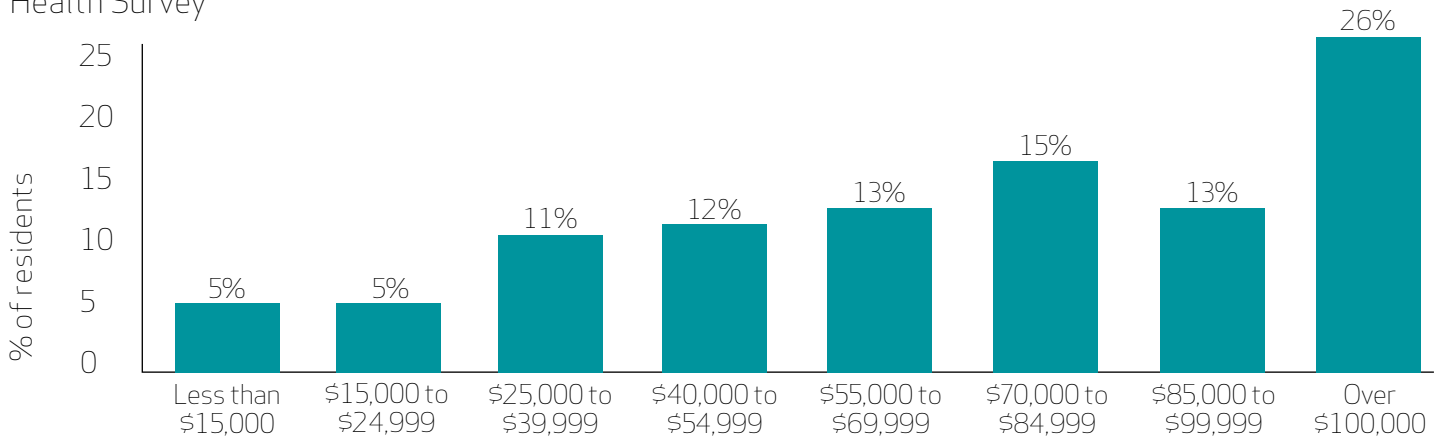


Figure 2. Highest education level attained by Chippewa County residents over age 25 who completed the Community Health Survey.

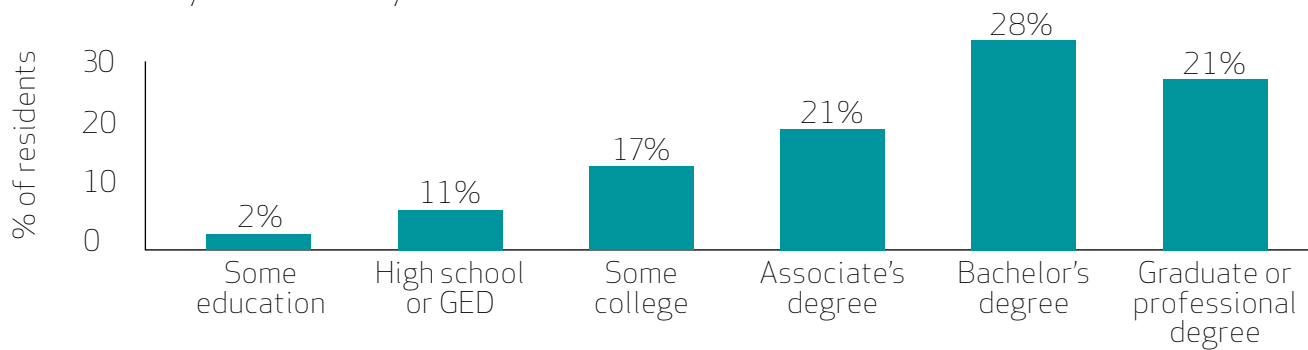
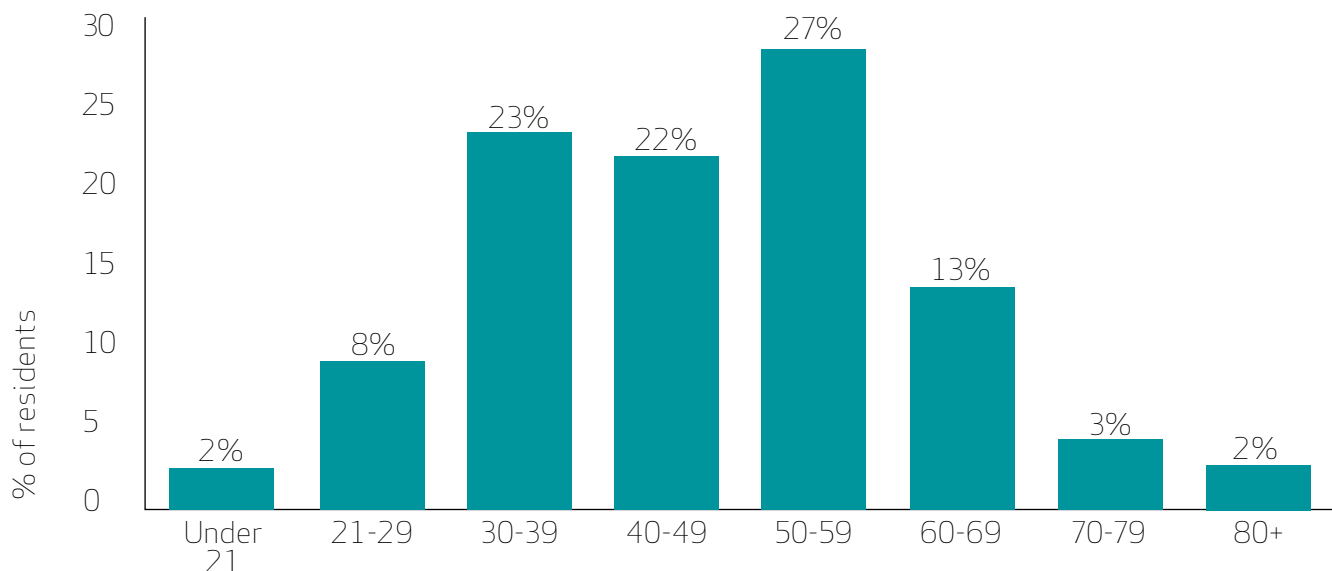


Figure 3. Age distribution of Chippewa County residents who completed the Community Health Survey



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Appendix III:

Core Dataset

2018 | CHIPPEWA COUNTY COMMUNITY HEALTH ASSESSMENT

Measure	Definition	Chippewa County	Source (Year of Data)	Wisconsin	Source (Year of Data)	Healthy People 2020 Target	National Rate	Source (Year of Data)
Alcohol Misuse Focus Area								
Alcohol Outlet Density	Alcohol outlet density per 500 people	1.8	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2014-2015)	1.5	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2014-2015)	n/a	n/a	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)
Alcohol Use	Alcohol use among 18+ (At least one drink in the past 30 days)	61%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2012-2014)	63%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2014)	n/a	53%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)
Alcohol-related Hospitalizations	Rate of alcohol-related hospitalizations per 1,000 population	3	2017 County Health Rankings (WI Public Health Profiles; 2014)	2	2017 County Health Rankings (WI Public Health Profiles; 2014)	n/a	10.3	
Alcohol-related vehicle deaths	Percentage of driving deaths with alcohol involvement	47%	2017 County Health Rankings (Fatality Analysis Reporting System; 2011-2015)	37%	2017 County Health Rankings (Fatality Analysis Reporting System; 2011-2015)	n/a	30%	2017 County Health Rankings (Fatality Analysis Reporting System; 2011-2015)
Binge drinking	Engagement in binge drinking among adults 18+ years old	17%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2012-2014)	22%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2014)	24.2%	16%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)
Excessive drinking (Binge +Heavy Drinking)	Percentage of the adult population that reports either binge drinking, defined as consuming more than 4 (women) or 5 (men) alcoholic beverages on a single occasion in the past 30 days, or heavy drinking, defined as drinking more than 1 (women) or 2 (men) drinks per day on average	24%	2017 County Health Rankings (Behavioral Risk Factor Surveillance System; 2015)	24%	2017 County Health Rankings (Behavioral Risk Factor Surveillance System; 2015)	25.4%	18%	2017 County Health Rankings (Behavioral Risk Factor Surveillance System; 2015)
Liquor law arrests	Violations of state or local laws or ordinances	129	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2014)	300	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2014)	n/a	101	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)
Student Alcohol Use	Percentage of high school students who had at least one drink of alcohol on one or more of the past 30 days	32.0%	Chippewa County Youth Risk Survey (2017)	33%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2013)	n/a	35%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013)
Student Alcohol Use	Percentage of high school students who had their first drink of alcohol other than a few sips before age 13	22%	Chippewa County Youth Risk Survey (2017)	15%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 (2013)	n/a	19%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013)
Chronic Disease Prevention & Management Focus Area								
Alzheimer's	Alzheimer's Disease deaths per 100,000	n/a		36.2	Alzheimer's Association (Alzheimer's Disease Facts and Figures; 2015)	n/a	34.4	Alzheimer's Association (Alzheimer's Disease Facts and Figures; 2015)
Cancer	Incidence per 100,000 population by cancer site (age-adjusted)	487	2017 County Health Rankings (Wisconsin Cancer Reporting System; 2009-2013)	468	2017 County Health Rankings (Wisconsin Cancer Reporting System; 2009-2013)	n/a	436.6	Centers for Disease Control and Prevention(2014)
Cancer mortality	Cancer Mortality Crude Rates per 100,000 population	203.5	Wisconsin Interactive Statistics on Health (2015)	197.9	Wisconsin Interactive Statistics on Health (2015)	161.4	158.5	National Vital Statistics System-Mortality, 2015

2018 | CHIPPEWA COUNTY COMMUNITY HEALTH ASSESSMENT

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Cerebrovascular Disease Hospitalizations	Cerebrovascular disease hospitalization rate per 1,000 people	2.3	2017 Wisconsin Public Health Profiles (State of Wisconsin Public Health Profiles; 2015)	2.5	2017 Wisconsin Public Health Profiles (State of Wisconsin Public Health Profiles; 2015)	n/a	n/a	
Cervical Cancer Screening	Percentage of women (21-65) who had a pap test in last 3 years	n/a		83.9%	CDC (BRFSS; 2016)	93%	79.7%	CDC (BRFSS; 2016)
Cholesterol Screening	Percentage of adults had cholesterol checked in past 5 years	n/a		77.5%	CDC (BRFSS; 2015)	82.1%	77.7%	CDC (BRFSS; 2015)
Colorectal Cancer Screening	Percentage of adults (50-75) received screening based on most recent guidelines (FOBT, CT, sigmoidoscopy or colonoscopy)	n/a		73.7%	CDC (BRFSS; 2016)	70.5%	67.1%	CDC (BRFSS; 2016)
Coronary Heart Disease Hospitalizations	Coronary heart disease hospitalization rate per 1,000 population	2.5	2017 Wisconsin Public Health Profiles (Wisconsin Hospital Association Information Center; 2015)	2.8	2017 Wisconsin Public Health Profiles (Wisconsin Hospital Association Information Center; 2015)	n/a	3.6	CDC (National Center for Health Statistics; 2014)
Diabetes	Percentage of adults age 20 and above with diagnosed diabetes	8%	2017 County Health Rankings (CDC Diabetes Interactive Atlas; 2013)	9%	2017 County Health Rankings (CDC Diabetes Interactive Atlas; 2013)	n/a	9.10%	CDC (U.S. Diabetes Surveillance System; 2015)
Diabetic Screening	Percentage of diabetic Medicare enrollees that received HbA1c screening in past year	92%	2017 County Health Rankings (Dartmouth Atlas of Health Care; 2014)	90%	2017 County Health Rankings (Dartmouth Atlas of Health Care; 2014)	n/a	85%	2017 County Health Rankings (Dartmouth Atlas of Health Care; 2014)
Mammography Screening	Percentage of female Medicare enrollees aged 67-69 that received mammography screening over two years	75.0%	2017 County Health Rankings (Dartmouth Atlas of Health Care; 2014)	72%	2017 County Health Rankings (Dartmouth Atlas of Health Care; 2014)	n/a	63%	2017 County Health Rankings (Dartmouth Atlas of Health Care; 2014)
Youth Asthma	Percentage of children who currently have asthma	n/a		10.2%	CDC, National Environmental Public Health Tracking Network (2014)	n/a	8.3%	CDC, National Environmental Public Health Tracking Network (2014)
Communicable Disease & Prevention Focus Area								
Percentage of children aged 19 to 35 months who received the recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella, and PCV								
Childhood Immunizations		77.0%	2017 County Health Rankings (WI Immunization Registry; 2015)	71%	2017 County Health Rankings (WI Immunization Registry; 2015)	80%	72.2%	CDC (National Immunization Survey; 2015)
Communicable Diseases	Number of reportable cases of communicable diseases per 100,000 population	667	2017 County Health Rankings (WI Public Health Information Network Analysis, Visualization, and Reporting; 2015)	839	2017 County Health Rankings (WI Public Health Information Network Analysis, Visualization, and Reporting; 2015)	n/a	n/a	
Influenza Immunization 65+	Percentage of population age 65 and older who had a flu shot in the last 12 months	66.2%	DHS (Wisconsin Immunization Registry; 2015-2016)	62.2%	DHS (Wisconsin Immunization Registry; 2016-2017)	90%	63.6%	CDC (National Health Interview Survey; 2015)
Lyme Disease	Rate per 100,000 population of confirmed Lyme disease cases	52.9	DHS (Environmental Public Health Data Tracker; 2015-2016)	39.7	DHS (Environmental Public Health Data Tracker; 2016)	n/a	8	CDC (Lyme disease data tables; 2016)

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Environmental & Occupational Health Focus Area								
Contaminants in Municipal Water	Average concentration of Arsenic in public water (µg/L)	0.4	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2013-2015)	1.4	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2013-2015)	n/a	2.2	ODC (National Environmental Public Health Tracking Network; 2016)
Contaminants in Municipal Water	Average concentration of Nitrate in public water (mg/L)	3.6	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2013-2015)	1.5	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2013-2015)	n/a	1.2	ODC (National Environmental Public Health Tracking Network; 2016)
Good or 'moderate' air quality days	Percentage of measured days in given year (not every day was measured) that were 'good' or 'moderate' (Air quality index from 0-100)	n/a	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)	99.3	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)	n/a	98.30%	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)
Lead Poisoned Children	Percent of childhood lead poisoning with blood lead ≥5µg/dL	1.8%	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2015)	6.4%	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2015)	n/a	2.8%	ODC (National Surveillance Data; 2015)
Carbon Monoxide Poisoning	Rate of emergency room visits related to Carbon Monoxide poisoning per 100,000 people	8.5	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2010-2014)	7.9	2017 Environmental Health Profile (Wisconsin Environmental Public Health Tracking; 2010-2014)	n/a	6.6%	ODC (National Environmental Public Health Tracking Network; 2014)
Unhealthy air quality days	Number of measured days in given year (not every day was measured in both counties) that were "unhealthy" (Air quality index above 101)	n/a	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)	0	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)	n/a	0.4	U.S. Environmental Protection Agency (Air Data Reporting QuerySystem; 2017)
Year Structure Built	Percentage of housing units built prior to 1950	26%	2017 County Health Ranking (American Community Survey; 2015)	26%	2017 County Health Ranking (American Community Survey; 2015)	n/a	29.2%	U.S. Census Bureau, 2011-2015 American Community Survey
Healthy Growth & Development Focus Area								
Infant Mortality	Rate per 1,000 live births	4.1	Wisconsin Dept. of Health Services, Wisconsin Interactive Statistics on Health (2016)	6.2	Wisconsin Dept. of Health Services, Wisconsin Interactive Statistics on Health (2016)	6	5.9	Wisconsin Dept. of Health Services, Wisconsin Interactive Statistics on Health (2015)
Reading Proficiency	Percentage of fourth grade students proficient or advanced in reading	53%	2017 County Health Rankings (Department of Education; 2014-2015)	52%	2017 County Health Rankings (Department of Education; 2014-2015)	n/a	n/a	
High School Graduation	Percentage of 9th grade cohort that graduates in four years	92%	2017 County Health Rankings (EDFacts; 2014-2015)	88%	2017 County Health Rankings (EDFacts; 2014-2015)	87%	83%	2017 County Health Rankings (EDFacts; 2014-2015)
Low Birth Weight	Percentage of live birth weights <2,500 grams	6.0%	2017 County Health Rankings (National Vital Statistics System; 2008-2014)	7.0%	2017 County Health Rankings (National Vital Statistics System; 2008-2014)	7.8%	8.0%	2017 County Health Rankings (National Vital Statistics System; 2008-2014)
Single-parent Households	Percentage of children that live in a household headed by a single parent	24%	2017 County Health Rankings (American Community Survey; 2015)	31%	2017 County Health Rankings (American Community Survey; 2015)	n/a	34%	2017 County Health Rankings (American Community Survey; 2015)
Some College	Percentage of adults age 25-44 with some college or associate's degree	63.0%	2017 County Health Rankings (American Community Survey; 2015)	67%	2017 County Health Rankings (American Community Survey; 2015)	n/a	64%	2017 County Health Rankings (American Community Survey; 2015)

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Healthy Nutrition Focus Area								
Adult Dietary Behavior	Adults that consumed 1 or more fruits per day	n/a		62.1%	State Cancer Profiles, 2015	n/a	59.7	State Cancer Profiles, 2015
Adult Dietary Behavior	Adults that consumed 1 or more vegetables per day	n/a		76%	State Cancer Profiles, 2015	n/a	77.9	State Cancer Profiles, 2015
Breastfeeding	Percentage of infants in WIC breastfed exclusively through three months	51.0%	Chippewa County Department of Public Health (2017)	27.6%	Eau Claire City-County Health Dept. Composite Report (2017)	n/a	13.2%	USDA (WIC Breastfeeding Data Local Agency Report; 2016)
Food Environment Index	Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best)	8.1	2017 County Health Rankings (USDA; 2010 & 2014)	8	2017 County Health Rankings (USDA; 2010 & 2014)	n/a	7.3	2017 County Health Rankings (USDA; 2010 & 2014)
Food Insecurity	Percentage of the population without access to reliable food source	11%	2017 County Health Rankings (Map the Meal Gap; 2014)	12%	2017 County Health Rankings (Map the Meal Gap; 2014)	6%	12.7%	Current Population Survey-Food Security Supplement (CPS-FSS) and U.S. Census Bureau and Department of Agriculture; 2015
Injury & Violence Focus Area								
Child Abuse	Rate of allegations of maltreatment is substantiated to child victims per 1,000 population	2	2017 County Health Rankings (Wisconsin Department of Children and Families; 2014)	4	2017 County Health Rankings (Wisconsin Department of Children and Families; 2014)	8.5	9.1	National Child Abuse and Neglect Data System; 2015
Falls Fatalities 65+	Injury deaths due to falls for age 65 and older (per 100,000 population)	98	2017 County Health Rankings (Wisconsin Interactive Statistics on Health; 2012-2014)	123	2017 County Health Rankings (Wisconsin Interactive Statistics on Health; 2012-2014)	47	61	National Vital Statistics System-Mortality (2015)
Hate Crimes	Hate crime rate per 100,000 population	n/a	2017 County Health Rankings (Uniform Crime Reporting; 2014)	1	2017 County Health Rankings (Uniform Crime Reporting; 2014)	n/a	1.9	Uniform Crime Report; 2016
Injury deaths	Number of deaths due to injury per 100,000 population	65	2017 County Health Rankings (CDC, Wonder Mortality data; 2011-2015)	69	2017 County Health Rankings (CDC, Wonder Mortality data; 2011-2015)	n/a	62	2017 County Health Rankings (CDC, Wonder Mortality data; 2011-2015)
Injury Hospitalizations	Hospitalizations for injuries (age-adjusted per 100,000 population)	852	2017 County Health Rankings (Wisconsin Interactive Statistics on Health; 2014)	806	2017 County Health Rankings (Wisconsin Interactive Statistics on Health; 2014)	555.8	598.6	National Hospital Discharge Survey; 2010
Motor vehicle crash deaths	Number of motor vehicle crash deaths per 100,000 population	10	2017 County Health Rankings (CDC, Compressed Mortality File; 2009-2015)	10	2017 County Health Rankings (CDC, Compressed Mortality File; 2009-2015)	12.4	10.9	National Vital Statistics System-Mortality (2015)
Motor vehicle crash occupancy rate	Motor vehicle crash occupancy rate per 100,000 population (annual crash involvement, including injured and uninjured passengers)	34	2017 County Health Rankings (Crash Outcome Data Evaluation System; 2012-2014)	40	2017 County Health Rankings (Crash Outcome Data Evaluation System; 2012-2014)	n/a	n/a	
Violent Crime	Violent crime rate per 100,000 population (includes offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, forcible rape, robbery, and aggravated assault)	121	2017 County Health Rankings (Uniform Crime Reporting- FBI; 2012-2014)	283	2017 County Health Rankings (Uniform Crime Reporting- FBI; 2012-2014)		380	2017 County Health Rankings (Uniform Crime Reporting- FBI; 2012-2014)
Youth Injury	Percentage who rarely or never wore a seat belt when riding in a car driven by someone else	n/a		5.9%	Youth Risk Behavior Surveillance System (2017)	8%	10%	National Occupant Protection Use Survey; 2016
Youth Violence	Percentage of students who have been bullied on school property during the past 12 months	27	Youth Risk Behavior Surveillance System (2017)	24.2	Youth Risk Behavior Surveillance System (2017)	17.9%	20.2	Youth Risk Behavior Surveillance System (2015)

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Measure	Definition	Chippewa County	Source (Year of Data)	Wisconsin	Source (Year of Data)	Healthy People 2020 Target	National Rate	Source (Year of Data)
Mental Health Focus Area								
Disconnected Youth	Percentage of teens and young adults (16-24) who are neither working nor in school	13%	2018 County Health Rankings (American Community Survey, 2010-2014)	11%	2018 County Health Rankings (American Community Survey, 2010-2014)	n/a	n/a	
Intentional Injury Hospitalizations	Self-inflicted hospitalization rate per 100,000 population	133	2017 County Health Rankings (Wisconsin Interactive Statistics on Health, 2012-2014)	99	2017 County Health Rankings (Wisconsin Interactive Statistics on Health, 2012-2014)	112.4	162.4	National Electronic Injury Surveillance System-All Injury Program; 2015
Mental health providers	Ratio of population to mental health providers	1,480 to 1	2017 County Health Rankings (CMS, National Provider Identification file, 2016)	600 to 1	2017 County Health Rankings (CMS, National Provider Identification file, 2016)	n/a	500 to 1	2017 County Health Rankings (CMS, National Provider Identification file, 2016)
Poor Mental Health Days	Average number of mentally unhealthy days reported in past 30 days (age-adjusted)	3.2	2017 County Health Rankings (BRFSS; 2015)	3.7	2017 County Health Rankings (BRFSS; 2015)	n/a	3.7	2017 County Health Rankings (BRFSS; 2015)
Suicide	Suicide death rate per 100,000	10.82	Chippewa County Department of Public Health (2017)	14	DHS WISH (2016)	10.2	13.3	National Vital Statistics System-Mortality; 2015
Youth Suicide	Suicide attempt/sy adolescents (grades 9-12) that required medical attention	n/a		2.5%	Youth Risk Behavior Surveillance System (2013)	1.7%	2.8%	Youth Risk Behavior Surveillance System (2015)
Obesity Focus Area								
Adult Obesity	Percentage of adults (age 20+) with BMI > 30 (obese)	30%	2017 County Health Rankings (CDC Diabetes Interactive Atlas; 2013)	30.7%	The State of Obesity (Wisconsin; 2016)	30.5%	38%	The State of Obesity (NHANES; 2013-2014)
WIC obesity	Obesity occurrence in children 2-5 yr. enrolled in WIC	12.1%	Chippewa County Department of Public Health (WIC program; 2017)	15.0%	Eau Claire City-County Health Department (WIC program; 2017)	9.4%	14.5%	CDC (Division of Nutrition, Physical Activity, and Obesity; 2014)
WIC overweight	Overweight occurrence in children 2-5 yr. enrolled in WIC	19.8%	Chippewa County Department of Public Health (WIC program; 2017)	15.9%	Eau Claire City-County Health Department (WIC program; 2017)	n/a	n/a	
Youth obesity	Percentage of obesity (BMI or above the 95th percentile) rates of children (ages 2 to 19)	n/a		18.5%	National Health and Nutrition Examination Survey (2015-2016)	14.5%	17%	National Health and Nutrition Examination Survey (2011-2014)
Oral Health Focus Area								
Dentists	Ratio of population to dentists	1,930 to 1	2017 County Health Rankings (Area Health Resource File/National Provider Identification file; 2015)	1,560 to 1	2017 County Health Rankings (Area Health Resource File/National Provider Identification file; 2015)	n/a	1,320 to 1	2017 County Health Rankings (Area Health Resource File/National Provider Identification file; 2015)
Fluoride in Public Water Supply	Percentage of public water supplies with fluoride content at 0.7 PPM or greater	15.5%	2017 Chippewa County Environmental Health Profile (Wisconsin Oral Health Program, DHS; 2015)	88.9%	CDC (Water Fluoridation Reporting System; 2014)	n/a	74.4%	CDC (Water Fluoridation Reporting System; 2014)
No recent dental visit	Percentage of population age 2+ that did not have a dental visit in the past year	22%	2017 County Health Rankings (Wisconsin Family Health Survey; 2002, 2014 & 2015)	26%	2017 County Health Rankings (Wisconsin Family Health Survey; 2002, 2014 & 2015)	51%	56.8%	Office of Disease Prevention and Health Promotion (Medical Expenditure Panel Survey, 2014)
Oral Health of 3rd Grade Children	Percentage of untreated decay in Western region	17%	2013 Healthy Smiles/Healthy Growth Wisconsin's Third Grade Children (DHS; 2012-2013)	18%	2013 Healthy Smiles/Healthy Growth Wisconsin's Third Grade Children (DHS; 2012-2013)	25.9%	16.2%	Office of Disease Prevention and Health Promotion (NHANES; 2013-2014)

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Physical Activity Focus Area								
Access to exercise opportunities	Percentage of population with adequate access to location for physical activity	69%	2017 County Health Rankings (ArcGIS; 2014)	81%	2017 County Health Rankings (ArcGIS; 2014)	n/a	84%	2017 County Health Rankings (ArcGIS; 2014)
Computer usage	Percentage of students who played video games used a computer not for school for 3+ hours/day	n/a		40.3%	Youth Risk Behavior Surveillance System (2017)	n/a	41.7%	Youth Risk Behavior Surveillance System (2015)
Physical Education	Percentage of students not attending physical education class on 1 or more days during the school week	n/a		49.2%	Youth Risk Behavior Surveillance System (2017)	n/a	48.4%	Youth Risk Behavior Surveillance System (2015)
Physical Inactivity	percent of adults aged 20 and over reporting no leisure time physical activity	22%	2017 County Health Rankings (CDC Diabetes Interactive Atlas; 2013)	20%	2017 County Health Rankings (CDC Diabetes Interactive Atlas; 2013)	32.6%	22.0%	2017 County Health Rankings (CDC Diabetes Interactive Atlas; 2013)
Television	Percentage of students who watched TV 3+ hours per day	n/a		16.7%	Youth Risk Behavior Surveillance System (2017)	n/a	24.7%	Youth Risk Behavior Surveillance System (2015)
Youth Physical Activity	Percentage of students physically active at least 60 minutes per day on less than 5 days	58%	Chippewa County Youth Risk Survey (2017)	48.7%	Youth Risk Behavior Surveillance System (2017)	n/a	48.6%	Youth Risk Behavior Surveillance System (2015)
Reproductive/Sexual Health Focus Area								
Chlamydia Infections	Chlamydia incidence per 100,000 population	263.2	2017 County Health Rankings (NCHHSTP; 2014)	403.2	2017 County Health Rankings (NCHHSTP; 2014)	n/a	456.1	2017 County Health Rankings (NCHHSTP; 2014)
HIV Prevalence	Number of persons living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population	36	2017 County Health Rankings (National Center for HIV/AIDS; 2013)	115	2017 County Health Rankings (National Center for HIV/AIDS; 2013)	n/a	362.3	CDC (Atlas Plus; 2015)
Prenatal Care	Pregnant women who received 1st trimester prenatal care	79%	DHS WISH (2016)	76.4%	DHS WISH (2016)	77.9%	77.1%	DHS WISH (2016)
Preterm births	Percentage of births < 37 weeks gestation during 2013	8.7%	DHS WISH (2016)	9.6%	DHS WISH (2016)	9.4%	9.6%	National Vital Statistics System-Nativity, 2015
Teen Birth Rate	Birth rate per 1,000 females age 15-19	17	2017 County Health Rankings (NVSS; 2008-2014)	24	2017 County Health Rankings (NVSS; 2008-2014)	n/a	32	2017 County Health Rankings (NVSS; 2008-2014)
Youth Sexual Behavior	Percentage of students who have ever had sexual intercourse	35%	Chippewa County Youth Risk Survey (2017)	33.6%	Youth Risk Behavior Surveillance System (2017)	n/a	30.1%	Youth Risk Behavior Surveillance System (2015)
Youth Sexual Behavior	Among students who were currently sexually active, did not use a condom	39%	Chippewa County Youth Risk Survey (2017)	37.2%	Youth Risk Behavior Surveillance System (2017)	n/a	43.1%	Youth Risk Behavior Surveillance System (2015)

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Substance Use Focus Area								
Drug Arrests	Violation of laws prohibiting the production, distribution, possession, or transportation per 100,000 population	103	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)	439	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)	n/a	490	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2014)
Drug hospitalizations	Drug-related hospitalization rate per 100,000	307	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	261	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	n/a	n/a	
Opioid-related hospitalizations	Opioid-related hospitalizations per 1,000 population	1.7	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	1.5	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	n/a	n/a	
Methamphetamines	percentage of high students who used methamphetamines one or more times during their life	2.0%	Chippewa County Youth Risk Survey (2017)	2.0%	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2011)	n/a	3.0%	Youth Risk Behavioral Surveillance System (2015)
Marijuana	Percentage of high school students who recently used marijuana (w/in last 30 days)	14.0%	Chippewa County Youth Risk Survey (2017)	16%	Youth Risk Behavior Surveillance System (2017)	n/a	18.4%	Youth Risk Behavioral Surveillance System (2015)
Prescription Abuse	Percentage of high school students recently abused prescription drugs	4.0%	Chippewa County Youth Risk Survey (2017)	16.8%	Youth Risk Behavior Surveillance System (2015)	5.5%	5.6%	National Survey on Drug use and Health; 2014
Student drug suspension	Drug-related suspension & expulsion in public schools per 1,000 students	5.1	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	3.2	Wisconsin Epidemiological Profile on Alcohol and Other Drugs 2016 (2013-2014)	n/a	n/a	
Tobacco Use & Exposure Focus Area								
Adult Smokeless Tobacco Use	Percentage of persons aged ≥18 years who reported currently using chewing tobacco, snuff, or snus (a small pouch of smokeless tobacco) every day or some days	n/a		4.0%	CDC (BRFSS; 2011)	0.2%	2.2%	CDC (National Health Interview Survey; 2015)
Adult Smoking	Percentage of adults self-reporting smoking > 100 cigarettes in their lifetime and currently smoking (every day or most days)	15%	2017 County Health Rankings (BRFSS; 2015)	17%	2017 County Health Rankings (BRFSS; 2015)	12%	18%	2017 County Health Rankings (BRFSS; 2015)
Smoking During Pregnancy	Percentage of mothers who report smoking during pregnancy	16%	2017 County Health Rankings (Wisconsin Interactive Statistics on Health; 2012-2015)	13%	2017 County Health Rankings (Wisconsin Interactive Statistics on Health; 2012-2015)	n/a	10%	CDC (Pregnancy Risk Assessment and Monitoring System; 2011)
Tobacco Sales to Minors	Percentage of illegal tobacco sales to minors (retailer violation rate)	4.8%	Wisconsin Wins (2017)	11.8%	Wisconsin Wins (2017)	5%	9.8%	Substance Abuse and Mental Health Services Administration (Annual Synar Reports; 2014)
Student Tobacco Use	Percentage of high school students who smoked cigarettes on one or more of the past 30 days	10%	Chippewa County Youth Risk Survey (2017)	8.1%	Wisconsin Department of Health Services (Youth Tobacco Survey 2016)	16%	10.8%	Youth Risk Behavioral Surveillance System (2015)
Youth Tobacco Use	Percentage of students who used chewing tobacco, snuff, or dip on one or more of the past 30 days	10%	Chippewa County Youth Risk Survey (2017)	5.9%	Youth Risk Behavioral Surveillance System (2017)	6.9%	7.3%	Youth Risk Behavioral Surveillance System (2015)

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Miscellaneous Data								
65 and Older	Percentage of the population 65 and older	16.7%	2017 County Health Rankings (US Census; 2015)	15.6%	2017 County Health Rankings (US Census; 2015)	n/a	14.5%	American Community Survey; 2012-2016)
Below 18 Years	Percentage of the population below 18 years of age	22.6%	2017 County Health Rankings (US Census; 2015)	22.4%	2017 County Health Rankings (US Census; 2015)	n/a	n/a	
Child Mortality	Number of deaths among children under age 18 per 100,000 people	70.0	2017 County Health Rankings (CDC Compressed Mortality File; 2012-2015)	50.0	2017 County Health Rankings (CDC Compressed Mortality File; 2012-2015)	n/a	n/a	
Children Eligible for Free Lunch	Percentage of children enrolled in public schools that are eligible for free school lunch	43%	2017 County Health Rankings (National Center for Education Statistics; 2014-2015)	41%	2017 County Health Rankings (National Center for Education Statistics; 2014-2015)	n/a	51.8%	National Center for Education Statistics; 2014-2015
Children in Poverty	Percentage of children under 18 living below the Federal Poverty Line (FPL)	15%	2017 County Health Rankings (US Census Small Area Income and Poverty Estimates; 2015)	17%	2017 County Health Rankings (US Census Small Area Income and Poverty Estimates; 2015)	n/a	22%	2017 County Health Rankings (US Census Small Area Income and Poverty Estimates; 2015)
Health Care	Percentage of population that did not receive needed health care in the past year	2%	2017 County Health Rankings (Family Health Survey; 2012, 2014 & 2015)	2%	2017 County Health Rankings (Family Health Survey; 2012, 2014 & 2015)	n/a	n/a	
Driving alone to work	Percentage of the workforce that drives alone to work	81%	2017 County Health Rankings (American Community Survey; 2011-2015)	81%	2017 County Health Rankings (American Community Survey; 2011-2015)	n/a	76%	2017 County Health Rankings (American Community Survey; 2011-2015)
Health care costs	Amount of price-adjusted Medicare reimbursements per enrollee	\$8,756	2017 County Health Rankings (Dartmouth Atlas of Health Care 2014)	\$8,412	2017 County Health Rankings (Dartmouth Atlas of Health Care 2014)	n/a	\$9,589	2017 County Health Rankings (Dartmouth Atlas of Health Care 2014)
Income Inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	3.9	2017 County Health Rankings (American Community Survey; 2011-2015)	4.3	2017 County Health Rankings (American Community Survey; 2011-2015)	n/a	5.0	2017 County Health Rankings (American Community Survey; 2011-2015)
Local Health Department Staffing	Fulltime equivalents of local health department staff per 10,000 population	3.2	Chippewa County Public Health Profile, DHS (2016)	3	2017 County Health Rankings (Public Health Profiles; 2014)	n/a	n/a	
Long commute - driving alone	Among workers who commute in their car alone, the percentage that commute more than 30 minutes	24%	2017 County Health Rankings (American Community Survey; 2011-2015)	26%	2017 County Health Rankings (American Community Survey; 2011-2015)	n/a	34%	2017 County Health Rankings (American Community Survey; 2011-2015)
Median Household Income	Median household income	\$53,200	2017 County Health Rankings (Small Area Income and Poverty Estimates program; 2015)	\$55,600	2017 County Health Rankings (Small Area Income and Poverty Estimates program; 2015)	n/a	\$55,322	US Census Bureau (American Community Survey 5-year Estimates; 2012-2016)
Not Proficient in English	Percentage of population that is not proficient in English	0%	2017 County Health Rankings (American Community Survey; 2011-2015)	2%	2017 County Health Rankings (American Community Survey; 2011-2015)	n/a	n/a	
Older Living Alone	Percentage of 65 years and older who live alone	30.0%	2017 County Health Rankings (American Community Survey; 2011-2015)	29%	2017 County Health Rankings (American Community Survey; 2011-2015)	n/a	30.4%	American Community Survey; 2012-2016)
Poor or Fair Health	Percentage of adults self-reporting poor or fair health (age-adjusted)	12%	2017 County Health Rankings (BRFSS; 2015)	14%	2017 County Health Rankings (BRFSS; 2015)	n/a	15%	2017 County Health Rankings (BRFSS; 2015)
Poor Physical Health Days	Average number of physically unhealthy days self-reported in adults in past 30 days (age-adjusted)	3.2	2017 County Health Rankings (BRFSS; 2015)	3.4	2017 County Health Rankings (BRFSS; 2015)	n/a	3.6	2017 County Health Rankings (BRFSS; 2015)
Population Change	Percentage change in population 2010 - 2013	1%	2017 County Health Rankings (DHS WI Population Estimates; 2016)	1%	2017 County Health Rankings (DHS WI Population Estimates; 2016)	n/a	n/a	

2018 | CHIPPEWA COUNTY COMMUNITY HEALTH ASSESSMENT

Measure	Definition	Chippewa County	Source (Year of Data)	Wisconsin	Source (Year of Data)	Healthy People 2020 Target	National Rate	Source (Year of Data)
Miscellaneous Data								
Poverty, All Ages	Percentage of population living below the Federal Poverty Line	11.0%	2017 County Health Rankings (Small Area Income and Poverty Estimates program; 2015)	12%	2017 County Health Rankings (Small Area Income and Poverty Estimates program; 2015)	n/a	12.7%	US Census Bureau (2016)
Premature Death	Age-adjusted mortality for under 75 years old per 100,000 population	290	2018 County Health Rankings (Compressed Mortality File; 2014-2016)	300	2018 County Health Rankings (Compressed Mortality File; 2014-2016)	n/a	341	CDC WONDER (1999-2016)
Preventable Hospital Stays	Hospitalization rate for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	56	2017 County Health Rankings (Dartmouth Atlas of Health Care 2014)	45	2017 County Health Rankings (Dartmouth Atlas of Health Care 2014)	n/a	50	2017 County Health Rankings (Dartmouth Atlas of Health Care 2014)
Primary care physicians	Ratio of population to primary care physicians	1,270 to 1	2017 County Health Rankings (Area Health Resource File/American Medical Association; 2014)	1,240 to 1	2017 County Health Rankings (Area Health Resource File/American Medical Association; 2014)	n/a	1,040 to 1	2017 County Health Rankings (Area Health Resource File/American Medical Association; 2014)
Race/Ethnicity	Percentage of population that is African American, Asian, American Indian or Alaskan Native, or Hispanic	5%	2017 County Health Rankings (Census Bureau's Populations Estimates Program; 2015)	16.9%	2017 County Health Rankings (Census Bureau's Populations Estimates Program; 2015)	n/a	n/a	
Rural	Percentage of population living in a rural area	46%	2017 County Health Rankings (US Census Bureau estimates; 2010)	29.8%	2017 County Health Rankings (US Census Bureau estimates; 2010)	n/a	19.3%	2017 County Health Rankings (US Census Bureau estimates; 2010)
Severe housing problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities	13%	2017 County Health Rankings (Comprehensive Housing Affordability Strategy data; 2009-2013)	16%	2017 County Health Rankings (Comprehensive Housing Affordability Strategy data; 2009-2013)	n/a	19%	2017 County Health Rankings (Comprehensive Housing Affordability Strategy data; 2009-2013)
Social Associations	Number of membership associations per 10,000 population	11.7	2017 County Health Rankings (County Business Patterns; 2014)	11.7	2017 County Health Rankings (County Business Patterns; 2014)	n/a	9	2017 County Health Rankings (County Business Patterns; 2014)
Unemployment	Percentage of population age 16+ unemployed but seeking work	4.8%	2017 County Health Rankings (Local Area Unemployment Statistics program; 2015)	4.6%	2017 County Health Rankings (Local Area Unemployment Statistics program; 2015)	n/a	5.3%	Bureau of Labor Statistics (2015)
Uninsured children	Percentage of children under age 19 without health insurance	5%	2017 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2014)	5%	2017 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2014)	n/a	n/a	
Uninsured under Age 65	Percentage of population under age 65 that has no health insurance coverage	10%	2017 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2014)	9%	2017 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2014)	n/a	14%	2017 County Health Rankings (US Census Bureau's Small Area Health Insurance Estimates; 2014)
W2 Enrollment	Count of individuals enrolled in W-2 (Wisconsin Works) on the last working day of the month	55	2017 County Health Rankings (WI Department Of Children and Families; Dec. 2015)	14,439	2017 County Health Rankings (WI Department Of Children and Families; Dec. 2015)	n/a	n/a	

Appendix IV:

Top Health Area Data Summaries

PRIORITY AREA: MENTAL HEALTH

Definition: Services and support to address mental health conditions including depression, anxiety, and post traumatic stress disorder

2017 Community Health Survey:

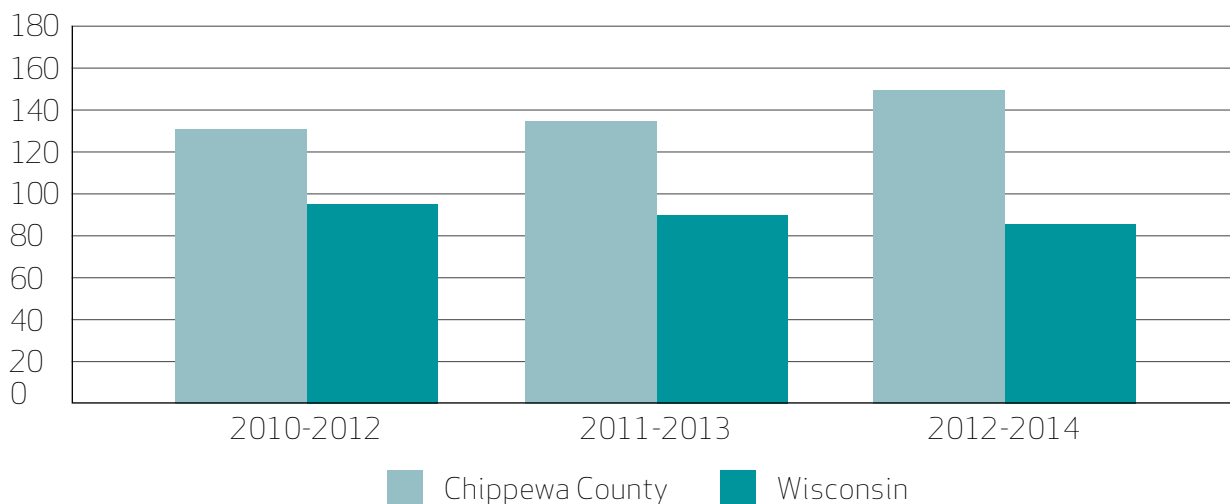
- › 73% believe mental health is a moderate or major problem in the community
- › 88% people don't feel comfortable seeking mental health services
- › 76% feel affordable mental health treatment is not available
- › 73% people cannot easily access services for mental health treatment

Wisconsin Suicide Prevention:

- › 700 Wisconsin residents die by suicide each year
- › 50% have at least one reported mental health problem
- › Caucasians experience highest suicide rates

Self-inflicted Hospitalizations, per 100,000:

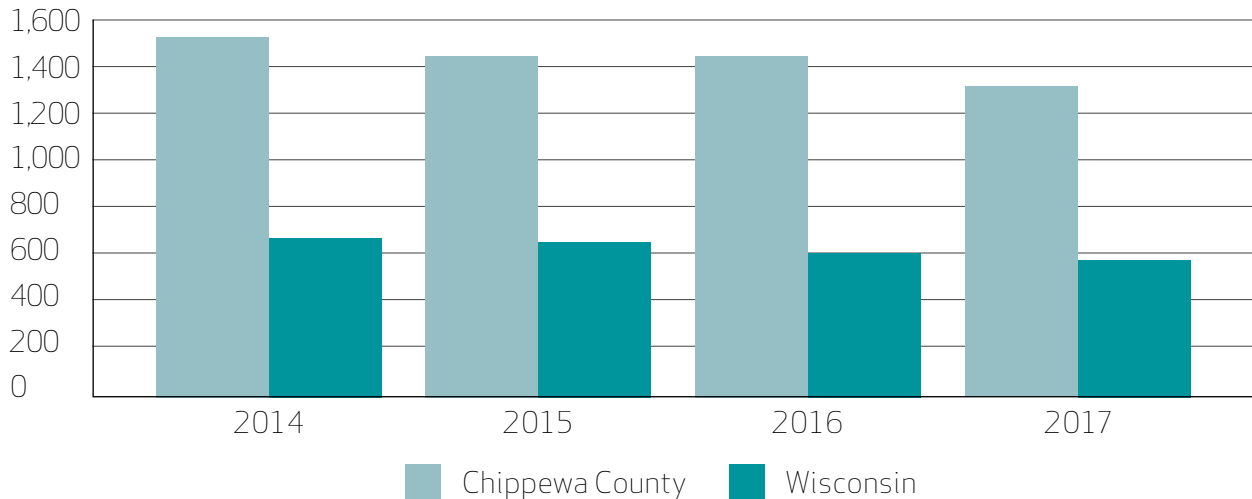
Self-inflicted injury rate has continued to decrease for Chippewa County and the state. The county has reported on average 60 more hospitalizations than the state



Sources:
2017 County Health Rankings (DHS-Wisconsin Interactive Statistics on Health, 2012-2014)
2017 County Health Rankings (Behavioral Risk Factor Surveillance System, 2015)
Wisconsin Department of Health Services (WISH, 2013-2016)
Wisconsin Department of Health Services (Wisconsin Suicide Prevention, 2017)

Mental Health Providers (Ratio to Population):

Self-inflicted injury rate has continued to decrease for Chippewa County and the state. The county has reported on average 60 more hospitalizations than the state

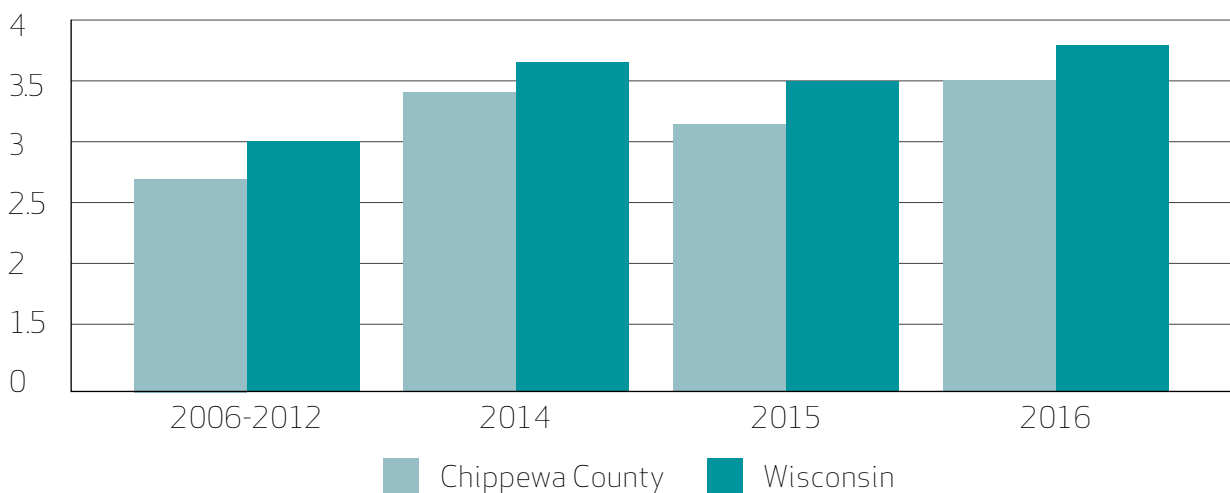


2016 Suicide Statistics :

- › 2nd leading cause of death in the U.S. for age groups 10-14, 15-24 and 25-34
- › 18,420 years of potential life lost before age 65 due to suicide in Wisconsin
- › 14 suicides in Chippewa County

Poor Mental Health Days in 30 Day Period (Age Adjusted):

Average number of mentally unhealthy days have increased 1.5 days over the last 10 years



PRIORITY AREA: **SUBSTANCE USE**

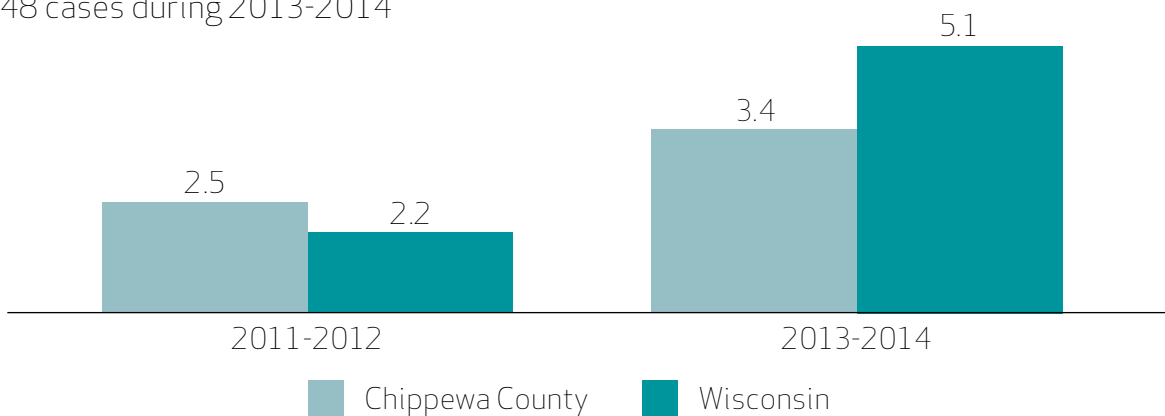
Definition: Use of and negative impacts from mood altering substances (i.e. marijuana, heroin, cocaine, methamphetamine) or misuse of prescription drugs

2017 Community Health Survey:

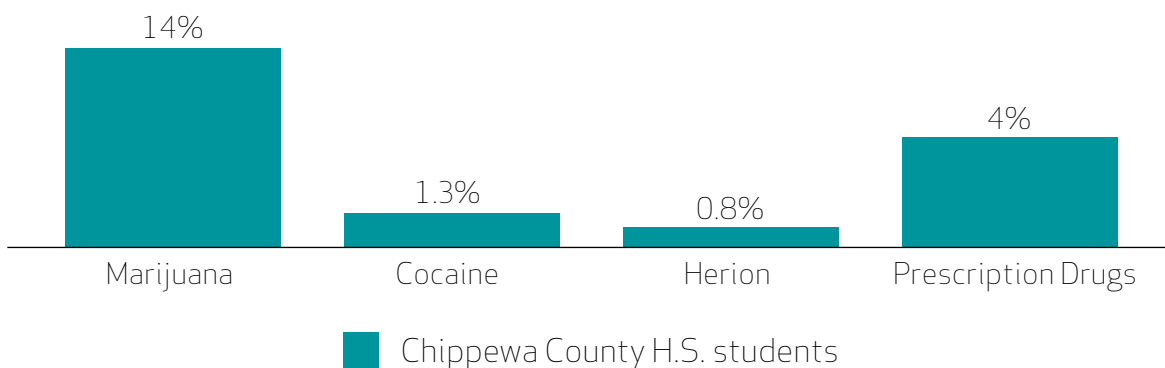
- > 82% of feel substance use is a moderate or major problem in the community
- > 73% believe substances are easily available
- > 49% stated treatment is too expensive
- > 49% indicated more substance use prevention education is needed
- > 46% people cannot easily access services for substance use treatment

Drug-related suspensions and expulsions, per 1,000 students

Drug-related suspensions and expulsions have increased by 12 incidences between the two school years; 48 cases during 2013-2014



Drug use in the past 30 days



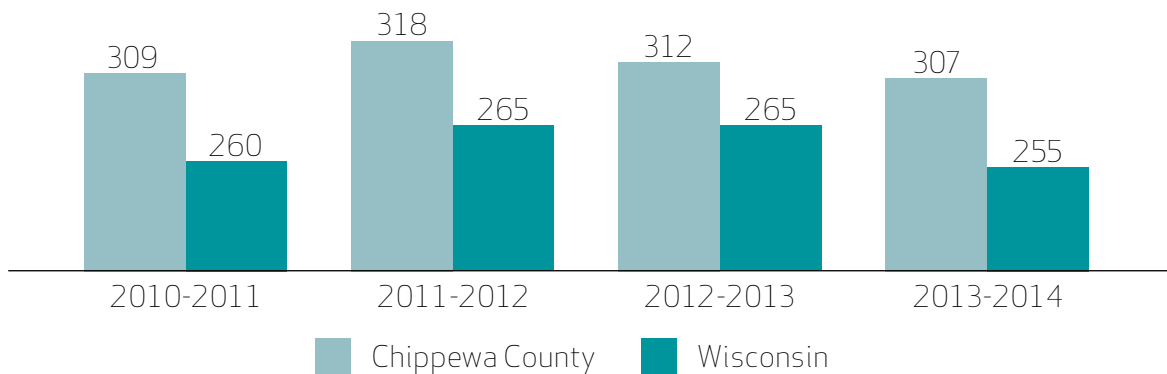
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2017 Chippewa County Youth Risk Survey:

- › 5% of students reporting trying marijuana before age 13
- › 14% of students have used marijuana in the past 30 days
- › 2% of students reported ever using meth
- › 4% of students reported misusing prescription drugs in the past 30 days

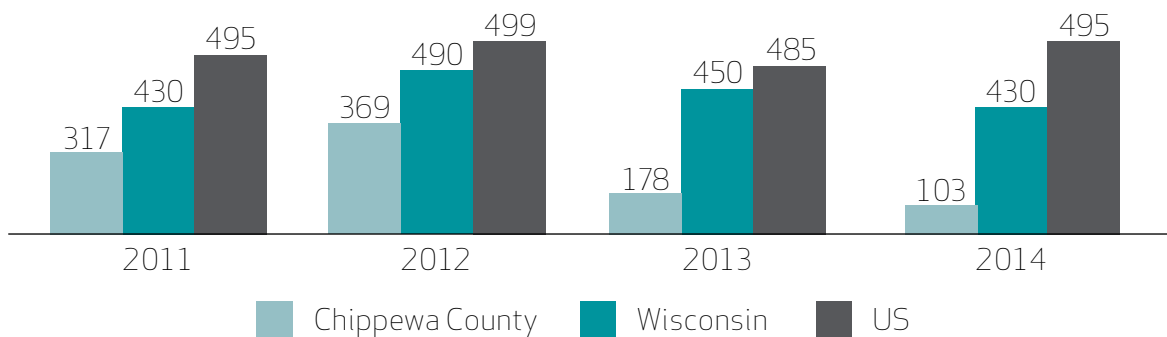
Drug-related Hospitalizations, per 1,000

In 2014, 14,710 drug-related hospitalizations were recorded in Wisconsin and 348 in Chippewa County, a decrease from 411 in 2012



Drug Law Arrests, per 100,000

Since 2011, drug law arrests have been under the WI and national rate



Sources:
2017 Profile for Chippewa County (2015)
2015 Chippewa County Pride data
2017 Community Health Survey
2016 WI Epidemiological Profile on Alcohol & Other Drug Use

PRIORITY AREA: **ALCOHOL MISUSE**

Definition: Underage alcohol consumption, consumption during pregnancy, binge drinking (4+ drinks per occasion for women, 5+ drinks per occasion for men) and other high-risk drinking behaviors

2017 Community Health Survey:

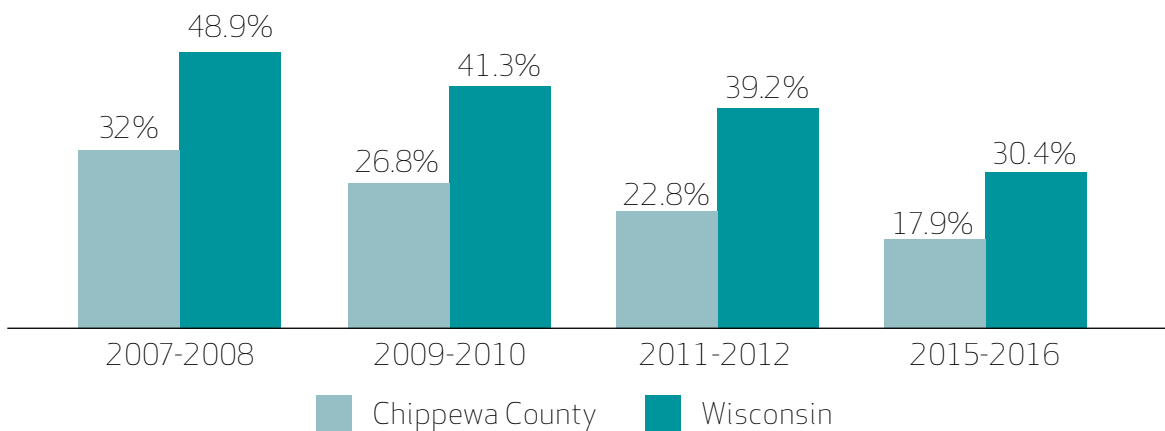
- › 77% of Chippewa County residents feel alcohol misuse is a moderate or major problem in the community
- › 73% believe alcohol misuse is an accepted attitude or belief
- › 66% say alcohol is easily available

2017 Profile for Chippewa County:

- › Alcohol abuse as underlying or contributing cause of death to five residents in the county
- › 170 Alcohol-related hospitalizations with average charge \$11,795 per occurrence

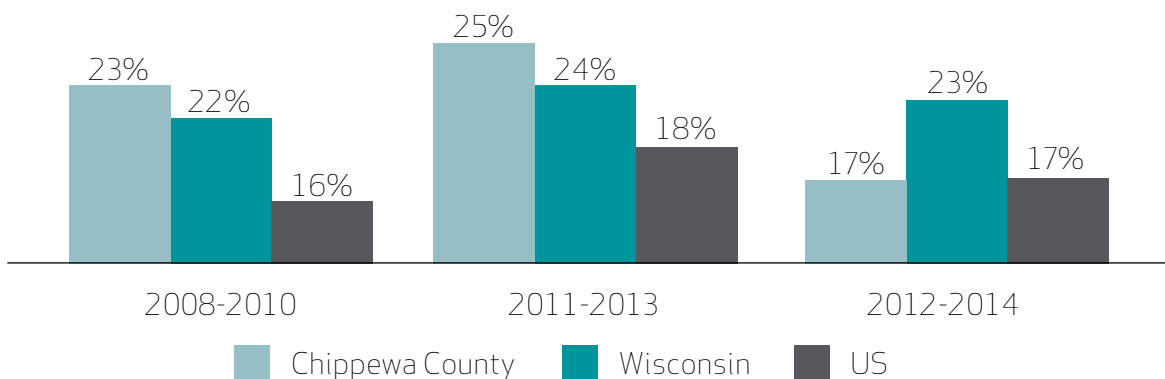
Percentage of High School Students Monthly Use of Alcohol:

From 2001-2015, monthly alcohol use for high school students decreased by 20.3%



Binge Drinking (age 18 and older):

From 2012-2014, binge drinking was 6% lower compared to the Wisconsin rate

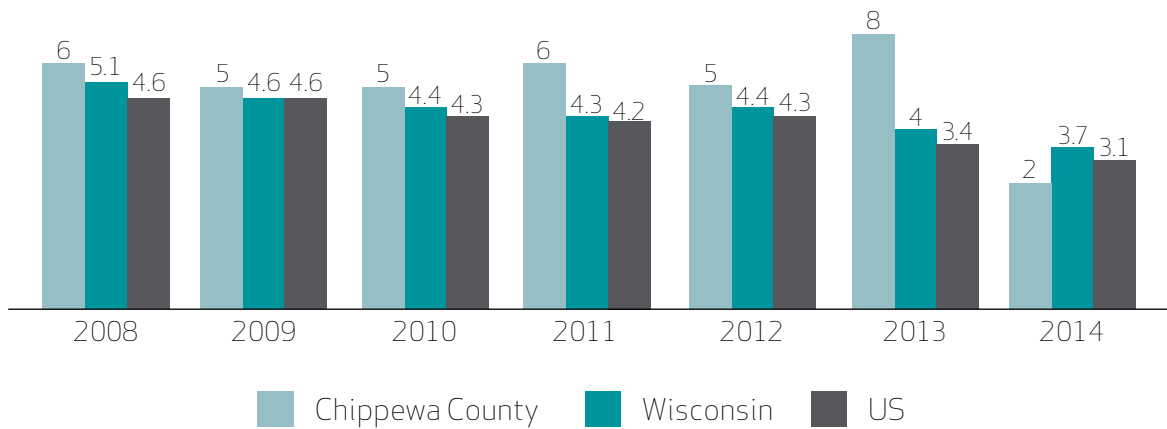


2017 Chippewa County Youth Risk Survey

- › 22% of Chippewa County students had their first drink of alcohol use before age 13
- › 32% of High School students had one drink in the past 30 days
- › 18% reported binge drinking in the past 30 days

Alcohol-Related Motor Vehicle Deaths, per 100,000:

42% of traffic fatalities in Wisconsin (2014) were alcohol-related

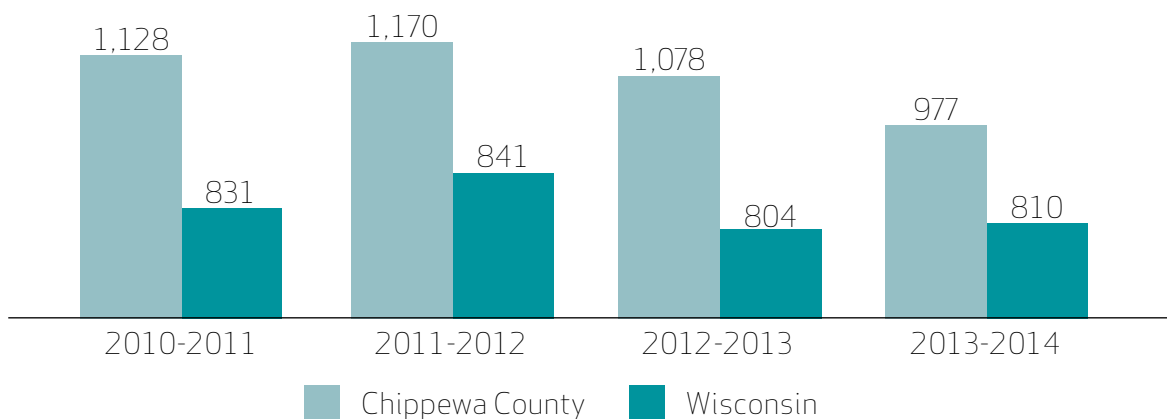


51,251 deaths occurred in Wisconsin (2015), approximately 4% (or 2,008) were attributed to excessive alcohol use.

Wisconsin Epidemiological Profile on Alcohol and Other Drug Use, 2016

Alcohol-related Hospitalizations:

In 2014, Chippewa County alcohol-related hospitalizations, per 100,000 population, reported 211 more incidences compare to the WI rate



Sources:
 2017 Profile for Chippewa County (2015)
 2015 Chippewa County Pride data
 2017 Community Health Survey
 2016 WI Epidemiological Profile on Alcohol & Other Drug Use

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Appendix V:

Community Assets Inventory

Mental Health Services

<u>Service Name</u>	<u>Contact Information</u>	<u>Description</u>
A Better Life Counseling	1101 W. Clairemont Ave. Eau Claire, WI 54701 (715) 835-5100	A private therapy practice offering conjoint, family, group, individual, and peer counseling
AIDS Resource Center of Wisconsin	505 S. Dewey St. Eau Claire, WI 54701 (715) 836-7710 www.arcw.org	Provides mental health services for individuals that are HIV positive or have AIDS
Alzheimer's Association of Greater Wisconsin Chippewa Valley Outreach Office	404 1/2 N. Bridge St. Chippewa Falls, WI 54729 (715) 720-7611 www.alz.org/gwwi	Provides information, consultation, and emotional support for persons with Alzheimer's, their families, care-givers, and general public
Bolton Refuge House	807 S. Farwell St. Eau Claire, WI 54701 (715) 834-9578 www.boltonrefuge.com	Provides advocacy and support services to victim of domestic violence, intimate partner violence, dating violence, sexual assault and stalking throughout the life span. All services are confidential and at no-cost to the individual.
Caillier Clinic	505 S. Dewey St. Eau Claire, WI 54701 (715) 836-0064 www.caillierclinic.com	Provides an outpatient clinic offering comprehensive mental health services for all ages
Children's Hospital of Wisconsin - Community Services	2004 Highland Ave. Eau Claire, WI 54701 (715) 835-5915 www.chw.org	Counseling for children and families with specialties in the areas of parenting issues, academic or behavior school problems, low self-esteem and others
Chippewa County Department of Human Services-Community Support Program	711 N. Bridge St. Chippewa Falls, WI 54729 (715) 726-7788	Provides treatment, rehabilitation, and support services for chronically mentally ill persons who are able to live and work in the community
Chippewa Health Improvement Partnership – Infant Mental Health Action Team	www.chippewahealth.org (715) 717-7647 info@chippewahealth.org	Community coalition that promotes the social and emotional development of our youngest children by increasing community awareness about factors that affect infant mental health and development of the infant brain
Chippewa Valley Family Caregiving Alliance	(715) 839-4735	Provides support and strengthens family caregivers of older adults through advocacy, education, and community resources Email: info@chippewavalleycaregiving.org
Chippewa Valley Free Clinic	816 Porter Ave. Eau Claire, WI 54701 (715) 839-8477 www.cvfreesclinic.org	Provides health services and assessments for patients with no healthcare alternative, including a mental health clinic weekly

Mental Health Services

<u>Service Name</u>	<u>Contact Information</u>	<u>Description</u>
Clearwater Counseling & Personal Growth Center	4330 Golf Terrace Eau Claire, WI 54720 (715) 832-4060	Provides mental health evaluation services for anxiety disorders, depression screening and conjoint, family, and individual counseling for all counseling issues Visit: www.clearwatercounseling.com
Clinic for Christian Counseling	505 S. Dewey St. Eau Claire, WI 54701 (715) 832-1678 www.cccwi.org	A private therapy practice offering faith-based conjoint, family, group, and individual counseling settings
Dr. Stress & Associates	5840 Arndt Rd. Eau Claire, WI 54701 (715) 833-7111	Provides a private therapy/family counseling practice offering conjoint, family, and individual counseling settings Visit: www.drstressassociates.com
Eau Claire Academy	550 N. Dewey St. Eau Claire, WI 54702 (715) 834-6681	Provides therapeutic treatment for children ages 10 through 17 to overcome physical, emotional, psychological, mental or behavioral challenges
Eau Claire Area Hmong Mutual Assistance Association, Inc.	423 Wisconsin St. Eau Claire, WI 54703 (715) 832-8420	Provides Hmong culturally and linguistically specific prevention and advocacy services to victims of crimes, victims and survivors of domestic violence and sexual assault and their children
Family Resource Center	4800 Golf Rd. Suite 450 Eau Claire, WI 54701 (715) 833-1735 www.frcec.org	Provides programs and services that build family strength through prevention, education, support and networking in collaboration with other resources in the community
First Things First Counseling & Consulting Services	2519 N. Hillcrest Pkwy. Altoona, WI 54720 (715) 832-8432	Provides mental health/counseling services as well as anger management and domestic violence prevention education Visit: www.firstthingsfirstcounseling.net
Great Rivers 2-1-1	www.greatrivers211.org Dial 2-1-1	Provides individuals with quick and easy access to community-based health and human services information and resources
L.E. Phillips Libertas Treatment Center	2661 Cty Hwy I Chippewa Falls, WI 54729 (715) 723-5585 www.libertascenter.org	Mental health therapists help individuals and families through life's struggles and crises to a point of healing and wholeness
L.E. Phillips Senior Center	1616 Bellinger St. Eau Claire, WI 54703 (715) 839-4909	Services and programs to enhance physical, mental, and social wellbeing for Senior Citizens, 55 and better

Mental Health Services

<u>Service Name</u>	<u>Contact Information</u>	<u>Description</u>
Positive Avenues	320 Putnam St. Eau Claire, WI 54703 (715) 838-2409	Provides a daytime resource center open to those experiencing mental health concerns or homelessness (must be 18 years old and an Eau Claire County resident)
The Wellness Shack, Inc.	505 S Dewey St. Eau Claire, WI 54701 (715) 855-7705 www.wellnessshack.org	Provides a sanctuary environment with individual and group peer support, education, advocacy, and socialization for adults living with mental health disorders
University of Wisconsin –Eau Claire Counseling Services	University of WI-Eau Claire Old Library 2122 Eau Claire, WI 54702 (715) 836-5521	Counseling and support for UWEC students and staff Visit: www.uwec.edu/counsel
Vantage Point Clinic & Assessment Center	2005 Highland Ave. Eau Claire, WI 54701 (715) 832-5454 www.vantagepointclinic.com	Provides behavioral health and AODA therapy services for both adolescents and adults
Western WI Regional Center for Children and Youth with Special Health Care Needs	711 N. Bridge St. Chippewa Falls, WI 54729 (715) 726-7900 (715) 726-7907	Supports and provides information for families through a statewide coordinated system of information, referral and follow-up, parent to parent support and service coordination Email: dstark@co.chippewa.wi.us - Dawn Stark

Substance Use Services

<u>Service Name</u>	<u>Contact Information</u>	<u>Description</u>
AIDS Resource Center of Wisconsin	505 S. Dewey St. Eau Claire, WI 54701 www.arcw.org	Provides alcohol and drug treatment services for individuals that are HIV positive or have AIDS
Arbor Place	4076 Kothlow Ave. Menomonie, WI 54751 (715) 235-4537	Treatment center providing various levels of care - residential, day treatment, outpatient with the goal to help people learn the skills needed to live a life in recovery
Caillier Clinic	2620 Stein Blvd. Eau Claire, WI 54701 (715) 836-0064	Offers a variety of services relating to alcohol and drug abuse - outpatient evaluation, interventions, education, group and one-on-one counseling
Chippewa County Department of Human Services	711 N. Bridge St. Chippewa Falls, WI 54729	Substance use services provided for individuals who have an inability to pay for services elsewhere or are referred by DHS staff
Chippewa Health Improvement Partnership - Voices in Prevention Action Team	www.chippewahealth.org (715) 717-7647 info@chippewahealth.org	Community coalition coordinating comprehensive community awareness campaign on current drug trends including prescription drug abuse, alcohol misuse, heroin, and other illegal drug use
Community Counseling Services	16947 Cty Hwy X Chippewa Falls, WI 54729	Provides educational program for individuals with legal or personal problems related to the misuse of alcohol or other drugs
Eau Claire Metro Treatment Center	2000 Oxford Ave. Eau Claire, WI 54703 (715) 834-1078	Services include evaluation, opioid-assisted medication treatment, individual, family, couple, and group counseling; support and psychotherapy groups
Great Rivers 2-1-1	www.greatrivers211.org Dial 2-1-1	Provides individuals with quick and easy access to community-based health and human services information and resources
L.E. Phillips Libertas Center	2661 Cty Hwy I Chippewa Falls, WI 54729 www.libertascenter.org	Outpatient substance abuse services including alcoholism and drug abuse assessment, counseling, and relapse prevention

Substance Use Services

<u>Service Name</u>	<u>Contact Information</u>	<u>Description</u>
Lutheran Social Services of Wisconsin and Upper Michigan	www.lsswis.org	Provide addiction treatment services specifically designed to help people experience lasting recovery and a newly improved life
Narcotics Anonymous Chippewa Valley Wisconsin	www.chippewavalleyna.org	Twelve-step program of recovery from drug addiction, fellowship or society of men and women for whom drugs had become a major problem
Mayo Clinic Health System - Chippewa Valley	1501 Thompson St. Bloomer, WI 54724 1-888-662-5666	Alcohol and drug dependency counseling services for people of all ages
North West Wisconsin Comprehensive Treatment Center	3440 Oakwood Hills Pkwy. Eau Claire, WI 54701 (715) 214-2525 www.eauclairectc.com	Provides medically supervised methadone and buprenorphine treatment to individuals who attempting to overcome an addiction to opioids
Vantage Point Clinic Assessment Center	(715) 832-5454 www.vantagepointclinic.com	Provides comprehensive AODA services for adults and adolescents. Various assessment and treatment programs are provided by experienced certified counselors

Alcohol Misuse Services

<u>Service Name</u>	<u>Contact Information</u>	<u>Description</u>
Affinity House	3042 Kilbourne Ave. Eau Claire, WI 54703 (715) 833-0436 anita.kuster@lsswis.org	Provides an 18-bed residential treatment facility for adult women with a length of 60-180 days. Client must have an addiction diagnosis, desire to live sober, and be employable or willing to volunteer
AIDS Resource Center of Wisconsin	505 Dewey Street S. Eau Claire, WI 54701 www.arcw.org	Provides alcohol and drug treatment services for individuals that are HIV positive or have AIDS
Chippewa County Department of Human Services	711 N. Bridge St. Chippewa Falls, WI 54729	Substance use services provided for individuals who have an inability to pay for services elsewhere or are referred by DHS staff
Chippewa Health Improvement Partnership – Infant Mental Health Action Team	www.chippewahealth.org (715) 717-7647 info@chippewahealth.org	Community coalition that promotes the social and emotional development of our youngest children by increasing community awareness about factors that affect infant mental health and development of the infant brain
Alcoholics Anonymous	www.district05.org	Provides a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism
Chippewa Health Improvement Partnership - Voices in Prevention Action Team	www.chippewahealth.org (715) 717-7647 info@chippewahealth.org	Community coalition coordinating comprehensive community awareness campaign on current drug trends including prescription drug abuse, alcohol misuse, heroin, and other illegal drug use
Eau Claire Academy - Clinicare Corporation	550 N. Dewey St. Eau Claire, WI 54702 (715) 834-6681	Provides therapeutic treatments for young children (ages 10 through 17), including those experiencing alcohol and drug addiction
First Things First Counseling & Consulting Services	2519 N. Hillcrest Pkwy Altoona, WI 54720 (715) 832-8432	Consultants provide individual, group, couples, and family counseling with focus on addiction and recover, conflict solution, depression and anxiety Visit: www.firstthingsfirstcounseling.net
Great Rivers 2-1-1	www.greatrivers211.org Dial 2-1-1	Provides individuals with quick and easy access to community-based health and human services information and resources
L.E. Phillips Libertas Center	2661 Cty Hwy I Chippewa Falls, WI 54729 www.libertascenter.org	Outpatient substance abuse services including alcoholism and drug abuse assessment, counseling, and relapse prevention
Lutheran Social Services of Wisconsin and Upper Michigan	www.lsswis.org	Provide addiction treatment services specifically designed to help people experience lasting recovery and a newly improved life

Alcohol Misuse Services

<u>Service Name</u>	<u>Contact Information</u>	<u>Description</u>
Marshfield Clinic Health System - Eau Claire Center	2116 Craig Rd. Eau Claire, WI 54701 (715) 858-4850	Provides conjoint, family, group, and individual counseling settings offering comprehensive mental health treatments
Mayo Clinic Health System - Chippewa Valley	1501 Thompson St. Bloomer, WI 54724 1-888-662-5666	Alcohol and drug dependency counseling services for people of all ages
University of Wisconsin –Eau Claire Counseling Services	University of WI-Eau Claire Old Library 2122 Eau Claire, WI 54702 (715) 836-5521	Counseling and support for UWEC students and staff Visit: www.uwec.edu/counsel
Vantage Point Clinic and Assessment Center	2005 Highland Ave. Eau Claire, WI 54701 (715) 832-5454 www.vantagepointclinic.com	Provides comprehensive AODA services for adults and adolescents
Women's Way AODA Program	505 South Dewey St. Eau Claire, WI 54701 (715) 855-6181 www.lsswis.org	Provides comprehensive case management services exclusively to women struggling with addiction and those involved in restorative justice programs