
O'Brien County, Iowa

MercyOne Primghar Medical Center Community Health Needs Assessment



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Executive summary

MercyOne Primghar Medical Center, in collaboration with an advisory council of community and public health partners, conducted a comprehensive Community Health Needs Assessment (CHNA) for the geographic area of O'Brien County, Iowa. The CHNA was presented to, and adopted by, the MercyOne Primghar Medical Center Board of Directors on April 25, 2023.

Seven (7) significant health needs were identified based on the information gathered through a community input survey and a review of secondary data indicators. The advisory council then ranked the identified significant health needs based on the following criteria: number of people impacted, the risk of morbidity and mortality, impact on vulnerable populations, importance to the community, and feasibility of change. The significant community health needs, ranked order of priority, include:

1. Mental health and substance misuse
2. Access to primary care and dental care
3. Safe housing and transportation
4. Child care access and affordability
5. Maternal, infant, and child health
6. Access to nutritious foods and physical activity opportunities
7. Lung health

MercyOne Primghar Medical Center will reconvene the advisory council this summer to develop a multi-year strategy to address identified community health and social needs.

Printed copies of this report are available upon request at MercyOne Primghar Medical Center. This report is also available electronically at <https://www.mercyone.org/about-us/community-health-and-well-being/>.

Please email questions, comments, and feedback to communityhealth@mercyhealth.com.

About us

Mission Statement

We, MercyOne, serve together in the spirit of the Gospel, as a compassionate and transforming healing presence within our communities.

Core Values

- **Reverence:** We honor the sacredness and dignity of every person.
- **Commitment to Those who are Poor:** We stand with and serve those who are poor, especially those most vulnerable.
- **Safety:** We embrace a culture that prevents harm and nurtures a healing, safe environment for all.
- **Justice:** We foster right relationships to promote the common good, including sustainability of Earth.
- **Stewardship:** We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.
- **Integrity:** We are faithful to who we say we are.

MercyOne Primghar Medical Center

MercyOne was founded in 1998 through a collaboration between CommonSpirit Health and Trinity Health – two of the country’s foremost, not-for-profit Catholic health organizations. On September 1, 2022, MercyOne became a fully aligned member of Trinity Health based in Livonia, Michigan. This decision, which brings all parts of MercyOne under a single parent organization, is about making MercyOne stronger and more unified so we can grow and care for more people in our communities.

MercyOne Siouxland, part of the MercyOne health care network, operates not-for-profit, Catholic medical centers in Sioux City, Iowa, and Primghar, Iowa, manages a hospital in Hawarden, Iowa, and operates a primary care clinic network, specialty care clinics and home health services. MercyOne Siouxland is a partner with Dunes Surgical Hospital, a multi-specialty hospital in Dakota Dunes, South Dakota.

MercyOne Primghar Medical Center is a 14 bed, not-for-profit Critical Access Hospital. Hospital programs include acute care, swing bed, respite care, 24-hour Emergency Room, and ambulatory care. Additional programs include community wellness screenings, diabetic education, cardiac rehabilitation and community education. MercyOne Primghar Medical Center operates three provider-based Rural Health Clinics located in Primghar, Sutherland, and Paullina, Iowa, and a Fitness Center located in the clinic. The hospital also operates a Wound Center with hyperbaric chambers near the hospital.

Advisory Council

Thank you to our community and public health partners for actively participating in the assessment process:

- Elderbridge Agency on Aging
- O’Brien County Public Health
- O’Brien County Emergency Management
- O’Brien County Judicial Mental Health Advocate
- Upper Des Moines Opportunity
- Love INC of Greater O’Brien County

Summary of previous needs assessment

The MercyOne Primghar Medical Center Board approved the previous Community Health Needs Assessment (CHNA) March 24, 2020. The five (5) significant health needs prioritized in the 2020 CHNA included expansion of mental health services, access to healthcare, chronic disease prevention and management, support for community-based volunteer ambulance services, and community health and wellness education.

Of note, the COVID-19 pandemic began at the beginning of the 2020 CHNA Implementation Strategy period, and some tactics were prioritized over others to address the immediate needs of patients and communities.

The below examples highlight steps taken over the succeeding three (3) years to address each prioritized need in collaboration with community and public health partners:

Prioritized need	Progress
Expansion of mental health services	MercyOne Primghar expanded mental health services by launching a telemedicine program for psychiatry in 2020. The hospital was unable to sustain the program and services ended in 2021.
Access to healthcare	MercyOne Primghar is working to address access to care barriers through provider recruitment, expanded telehealth offerings, increased specialty services, and promoting health care careers among area youth. The hospital recruited one (1) provider to the community and recruitment efforts continue. Neurology and pain management increased monthly services offered and ambulatory cardiology services resumed. The hospital served as a host site for a summer ‘Explore Medicine Camp’ exposing youth to careers in the medical field.
Chronic disease prevention and management	MercyOne Primghar continues to support chronic disease prevention and management by offering health screenings in the community including diabetes screenings, cholesterol screenings, prostate screenings, and vascular screenings. The hospital also supported community vaccine clinics for COVID-19. MercyOne Primghar continues to provide education for chronic diseases including diabetes. Educational materials are also available in clinic waiting areas.

<p>Support for community-based volunteer ambulance services</p>	<p>MercyOne Primghar supported community-based volunteer ambulance services by providing medical direction for the area ambulance. The hospital participated in active shooter preparedness exercises for O'Brien County. A MercyOne Primghar colleague serves on the Primghar Rescue Squad.</p>
<p>Community health and wellness education</p>	<p>MercyOne Primghar, in partnership with O'Brien County Public Health, purchased and distributed wellness education materials to area school nurses. Education materials covered nutrition, safe exercise, bike helmet use, safe baby handling, safe medication use, smoking cessation, sun protection, and avoidance of illicit drugs. In partnership with area schools, MercyOne Primghar educated youth on skin cancer prevention and maintaining healthy bones. Additionally, the hospital offered life support classes in the community and provided annual education at the local fair. The hospital continues to support health and wellness by funding a fitness center available to community members.</p>

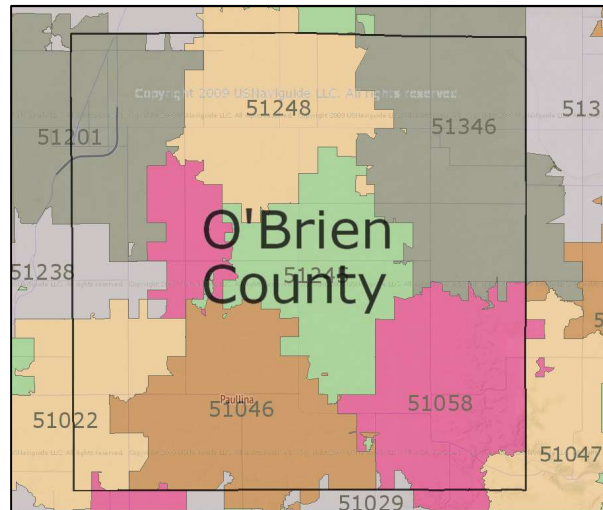
Community description

Geographic area

The geographic area for this assessment is O'Brien County, Iowa. MercyOne Primghar Medical Center is located in Primghar, Iowa, which serves as the county seat for O'Brien County. MercyOne Primghar Medical Center also operates three provider-based Rural Health Clinics all located within O'Brien County. The county is 573 square miles. This service area does not exclude low-income or underserved populations.



Map Source: United States Census Bureau

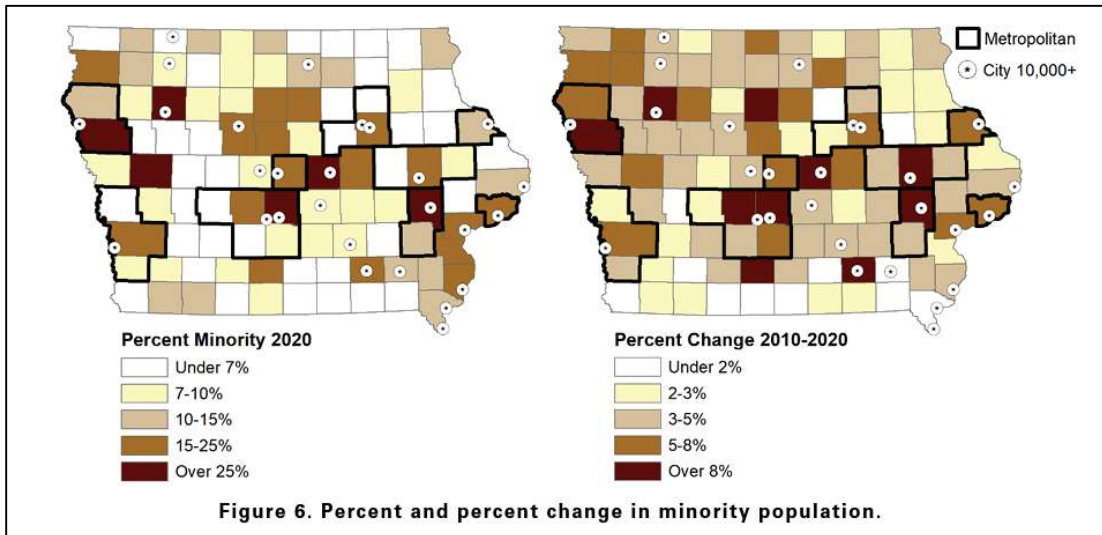


Map Source: Zipmap.net

Population characteristics

The total population of O'Brien County, as recorded on the most recent census in 2020, is 14,182. The more recent 2021 estimate lists the population as 14,015. O'Brien County, along with other rural Iowa communities, is experiencing population declines. The population of O'Brien County decreased by 1.5% between 2010 and 2020. This demonstrates improved stability compared to the 4.7% population decline recorded between 2000 and 2010. Of note, gains in minority residents partially offset population declines in O'Brien County. Population growth was largest in the Hispanic

community at 3.1% followed by residents identifying with two or more races (1.3%).



Peters, D.J. 2021. Population Trends by Race and Ethnicity: Findings from the 2020 Census. SOC 3098. Ames, IA: Iowa State University Extension.

The below table summarizes the demographics of O’Brien County using 2021 population estimates.

Race and Hispanic Origin	
White alone	96%
Black or African American alone	1.6%
American Indian or Alaska Native alone	0.4%
Asian alone	0.8%
Native Hawaiian and Other Pacific Islander alone	0.1%
Two or more races	1.2%
Hispanic or Latino	6.0%
White alone, not Hispanic or Latino	90.9%
Ethnicity	
Hispanic or Latino (of any race)	7%
Not Hispanic or Latino (white alone, not Hispanic or Latino)	89%
Age	
Under 18	24%
18-64	55%
65 and older	21%
Median age	40.7
Sex	
Male	51%
Female	49%

Population characteristics	
Foreign-born population	2.5%
Population age 5+ with limited English proficiency	2%
Veterans	894
Geography	
Population per square mile (2020)	24.7

Assessment process

Input from community leaders and community organizations

The CHNA Advisory Council (Advisory Council) met for the first time in January 2023. Representatives from MercyOne, O’Brien County Public Health, O’Brien County Emergency Management, Upper Des Moines Opportunity, Inc., Elderbridge Agency on Aging, and a Mental Health Advocate serving O’Brien County were present. The Advisory Council discussed the purpose and requirements for conducting a CHNA as well as the role of the Advisory Council. The Advisory Council reviewed the draft community input survey and discussed priority indicators to capture. The Advisory Council also discussed the process to distribute the survey.

The Advisory Council convened in February 2023 to review primary and secondary indicator data. Representatives from MercyOne, O’Brien County Public Health, and Love INC of Greater O’Brien County were present. The Advisory Council reviewed demographic data, results from the community input survey, and a summary of secondary data. The Advisory Council discussed indicators that may have changed since the most recent publicly available data (i.e. food insecurity, sexually transmitted infections, and substance misuse), additional indicators to review (i.e. child abuse and perinatal/neonatal mortality rates), and potential causal factors (i.e. radon exposure). The Advisory Council discussed the health indicators where O’Brien County performed poorly in comparison to the state of Iowa as well as the areas that community members ranked as important on the input survey. The Advisory Council then discussed grouping indicators together as significant health needs.

Between February 28, 2023 and March 13, 2023, representatives from MercyOne, O’Brien County Public Health, O’Brien County Emergency Management, Love INC, and a Mental Health Advocate serving O’Brien County participated in prioritization process. Input was also collected regarding community resources and assets available to address identified needs during this timeframe.

Input from community members

MercyOne Primghar Medical Center collected community input through a 32-question survey. A total of 102 responses were collected between January 20, 2023 and February 19, 2023. Surveys were distributed to community members and organizations throughout O’Brien County, including, but not limited to, nonprofit organizations, nursing homes, hospitals and clinics, religious organizations, and city and county employees. Survey information was also posted at the courthouse and distributed via social media. The survey was available both electronically and via a paper form. The paper survey was available in English and Spanish.

Almost all (99%) respondents reside in O’Brien County.

The below zip codes within O'Brien County are represented in survey responses.

Zip codes		
51022	51058	51248
51046	51201	51346
51047	51231	

The below table summarizes the demographics of survey respondents.

Race and ethnicity	
Hispanic or Latino (of any race)	3%
White (Non-Hispanic or Latino)	94%
Other (Black, AI/AN, Asian, Native Hawaiian/Pacific Islander)	2%
Age	
18-64	89%
65 and older	11%
Median age	42
Sex	
Male	23%
Female	77%
Household income	
Less than \$50,000	22%
\$50,000-\$74,999	17%
\$75,000+	62%
Work situation	
Full time work	75%
Part time or temporary work	14%
Unemployed and seeking work	1%
Unemployed but not seeking work	11%
Educational attainment	
Less than a high school diploma or equivalent	0%
High school graduate or equivalent	5%
Some college but not a degree	21%
Associate degree	30%
Bachelor's degree or Graduate degree	45%
Healthcare coverage (All that apply)	
Employer	73%
Privately purchased	12%

Medicare	13%
Medicaid or other state program	8%
TRICARE, VA or Military	4%
Uninsured	0%
Other	2%
Dental	28%
Vision	26%
Language	
Language other than English spoken at home	5%

A copy of the survey is included in the Appendix.

Written comments

MercyOne Primghar Medical Center’s did not receive any written comments regarding the 2020 Community Health Needs Assessment or Implementation strategy. The documents continue to be available on the MercyOne website at <https://www.mercyone.org/about-us/community-health-and-well-being/> and printed copies are available upon request at MercyOne Primghar Medical Center.

Quantitative data gathering

Secondary data, comparisons, and benchmarks include figures and interpretation from the following sources:

- American Community Survey 5-Year Estimates
- Center for Applied Research and Engagement Systems (CARES)
- Centers for Medicare and Medicaid Services
- Centers for Disease Control and Prevention
- County Health Rankings
- O’Brien County Community Input Survey
- Feeding America
- Federal Bureau of Investigation
- Federal Communications Commission
- Health Resources and Services Administration
- Healthy People 2030
- Iowa Department of Public Health
- Iowa State University Extension
- Kids Count Data Center
- National Center for Health Statistics
- State Cancer Profiles
- Small Area Income and Poverty Estimates
- U.S. Census Bureau

- U.S. Department of Education
- U.S. Department of Health and Human Services
- U.S. Department of Labor
- U.S. Department of Health and Human Services
- U.S. Environmental Protection Agency

Indicator data summary

Primary data summary table

Community Input Survey	O'Brien County
Access to care	
Access barrier to primary care	10%
Doctors office not open at convenient times	8%
Access barrier to dental care	13%
Could not afford cost of dental care	6%
Trouble paying for medications	4%
Employment and income	
Trouble paying for food	14%
Trouble paying for utilities	7%
Trouble paying for childcare	2%
Community safety	
Afraid of violence in neighborhood	2%
Social and community	
Challenges obtaining childcare	19%
Social contacts less than once a week	6%
Experienced discrimination	13%
Good place to grow old (5 is most positive)	3.9
Good place to raise children (5 is most positive)	4.1
Air and water quality	
Unsafe drinking water	4%
Housing and transportation	
Trouble paying for transportation	7%
Trouble paying for housing	2%
Issue with general cleanliness of living arrangement	4%
Health behaviors and risk factors	
Strongly agree substance use is a growing problem	39%
Less physical activity than peers	29%
Recommended fruit/vegetable intake	8%
Quality of life	
Fair or poor overall health	6%
Fair or poor mental health	21%
Fair or poor community health	22%

Biggest personal health concerns (Free text)	Count
Weight/obesity	16
Mental health	6
Physical inactivity	6
Heart health and hypertension	6

Most important community health concerns	Count
Mental health	50
Substance use & misuse (alcohol or other drugs)	42
Cancers	38
Aging issues	33
Obesity	33

Greatest community strengths	Count
Good schools	46
Friendly community	33
Access to healthcare	33
Religious spiritual values	28
Low crime/Safe neighborhoods	33

Secondary data summary table

Secondary data		O'Brien County	Iowa	United States
Access to care				
Percent of residents with health insurance	Green	97%	95%	
Percent of residents with a recent primary care visit	Yellow	76%	76%	75%
Primary care providers per 100,000 population	Red	78	106	107
Mental health providers per 100,000 population	Red	28	114	142
Addiction/substance use providers per 100,000 population	Red	14	20	23
Dentists per 100,000 population	Red	59	70	72
Quality of care				
Preventable hospitalizations per 100,000 (Medicare)	Green	1,646	2,418	2,865
30-Day hospital readmissions (Medicare)	Green	13%	15%	18%
Mammography screening	Yellow	52%	53%	43%
Flu vaccine	Yellow	34%	36%	
Employment and income				
Labor force participation rate	Yellow	67%	67%	63%
Unemployment rate	Green	2.40%	2.80%	3.40%
Food insecurity rate	Yellow	7.70%	7.30%	10.22%
Median household income	Yellow	\$57,200	\$61,836	\$64,994
Households at or below 200% of the FPL	Yellow	28%	28%	30%
Children eligible for free and reduced-price lunch	Yellow	40%	41%	53%

Education				
Head start programs per 10,000		21.7	13.2	10.5
Preschool enrollment		66%	43%	46%
Chronic absenteeism		8%	10%	16%
Student reading proficiency		69%	66%	47%
High school diploma		91%	93%	89%
Bachelor's degree or higher		21%	30%	34%
Young people not in school and not working		1.72%	5.69%	6.90%
Community safety				
Violent crimes per 100,000 people		227	283	416
Alcohol-impaired driving deaths		0%	27%	27%
Social and community				
Broadband access		98%	97%	93%
Park access		52%	45%	38%
Social associations		261	146	96
Racial diversity index		0.08	0.4	0.36
Air and water quality				
Particulate matter (micrograms per cubic meter)		7.4	8.2	7.5
Drinking water violations		No	Yes	Yes
Housing and transportation				
Households with no motor vehicle		8.68%	5.62%	8.35%
Housing cost burdened		19%	23%	30%
Overcrowded housing		2.98%	1.72%	4.58%
Substandard housing		20%	23%	31%
Maternal, infant, and child health				
Infant mortality per 1,000 live births		6.9	4.7	
Perinatal mortality per 1,000 live births		2.3	2.2	
Neonatal mortality per 1,000 live births		2.3	2.9	
Post neonatal mortality per 1,000 live births		4.6	1.8	
Low birth weight		5.30%	6.80%	8.20%
Teen births (births per 1,000)		18.8	16.3	19.3
Infants ever breastfed		84%	83%	
Child immunization		69%	70%	
Child abuse per 1,000 children		18	15	
Health behaviors and risk factors				
Current smokers		17%	16%	14%
Median radon levels in unmitigated households (pCi/L)		12.1	4.4	
Physical inactivity		29%	26%	26%
Obesity (adult)		34%	36%	32%
Grocery stores (establishments per 100,000 people)		49	19	19

Excessive drinking	Yellow	23%	25%	20%
Chlamydia cases per 100,000 population	Green	320	495	
HIV disease per 100,000 population	Green	21	96	
Chronic diseases				
Cancer incidence per 100,000 population	Yellow	465	484	449
Diabetes (adult)	Yellow	11%	10%	11%
Alzheimer's disease (Medicare)	Yellow	11%	10%	11%
High blood pressure (Medicare)	Yellow	54%	54%	57%
High cholesterol (Medicare)	Yellow	46%	45%	48%
Heart disease (Medicare)	Yellow	24%	24%	27%
Quality of life				
Poor physical health days	Red	10%	9%	10%
Poor or fair health	Yellow	15%	14%	18%
Poor mental health	Yellow	13%	13%	14%
Length of life				
Life expectancy	Yellow	77	79	79
Years of potential life lost per 100,000 population	Red	7,362	6,549	7,296
Alzheimer's Disease deaths per 10,000	Red	9.9	2.7	
Cancer mortality per 100,000 population	Yellow	143.5	154.3	149.4
Lung disease mortality per 100,000 population	Red	49	44	39
Coronary heart disease mortality per 100,000 population	Green	91	102	92

Significant community health needs

After analyzing primary and secondary data, along with input from the advisory council, Seven (7) significant community health needs were identified.

Significant health need	Supporting data
Mental health and substance misuse	<ul style="list-style-type: none"> • Shortage of mental health and substance use professionals • Community residents consider substance use a growing problem • One in five community survey respondents report fair or poor mental health • Mental health and substance use/misuse identified as two of the most important <u>community</u> health concerns • Substance use/misuse identified as one of the most needed community services • Nearly a quarter of residents report binge or heavy drinking
Maternal, infant, and child health	<ul style="list-style-type: none"> • The infant mortality rate is much higher than the state rate • The child abuse and neglect rate is higher than the state rate • A higher proportion of Hispanic or Latino infants are born at low birth weights than Non-Hispanic White infants • Higher rates of teen births than the state rate <ul style="list-style-type: none"> ○ Teen birth rate is highest among Hispanic and Latino females
Safe housing and transportation	<ul style="list-style-type: none"> • Higher percentage of households with no motor vehicle than the state • Trouble paying for transportation reported on community survey • Overcrowded housing higher than the state rate <ul style="list-style-type: none"> ○ The western area of the county has the highest rates of overcrowding • Trouble paying for utilities reported on community survey • Rental households are more cost burdened than owner occupied households
Lung health	<ul style="list-style-type: none"> • Lung disease mortality rate higher than the state rate <ul style="list-style-type: none"> ○ Mortality rate much higher among males than females • Highest median radon levels in unmitigated homes in 2019 of all Iowa counties • Percentage of population who are current smokers is slightly higher than the state • Flu vaccination rate is slightly lower than the state rate
Child care access and affordability	<ul style="list-style-type: none"> • One in five survey respondents reported challenges obtaining child care

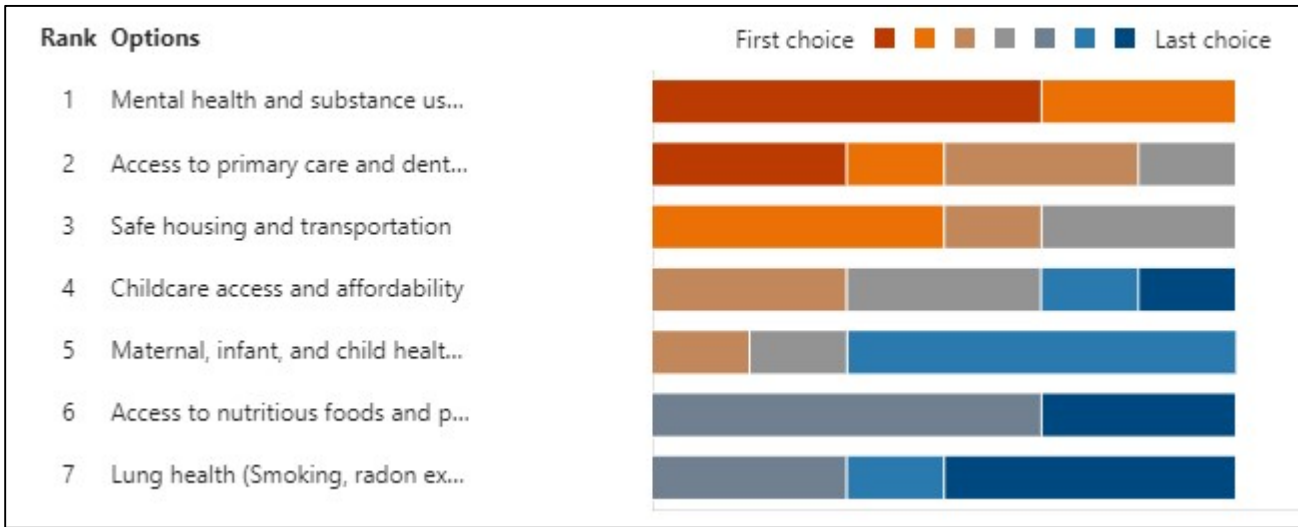
<p>Access to nutritious foods and physical activity opportunities</p>	<ul style="list-style-type: none"> • Challenges paying for food reported on community survey • Residents are less active than Iowa peers • Most residents aren't eating the recommended amount of fruits/vegetables each day • The most reported biggest <u>personal</u> health concern on the community survey was weight/obesity. Physical inactivity tied for second most reported. • Residents report wanting more bike paths and walking paths
<p>Access to primary care and dental care</p>	<ul style="list-style-type: none"> • Shortage of primary care providers and dentists • Lack of dentists seeing Medicaid patients • Poor physical health days • Barriers to primary care reported on community survey <ul style="list-style-type: none"> ○ Inconvenient hours ○ Medication affordability • Barriers to dental care reported on community survey <ul style="list-style-type: none"> ○ Cost of dental care

Prioritized needs

The CHNA process identified seven (7) significant health needs for prioritization. Members of the Advisory Council, plus a MercyOne Physician, ranked the significant health needs using the following criteria:

- Number of people impacted by the problem
- Risk of morbidity and mortality associated with the problem
- Impact of the problem on vulnerable populations
- Importance of the problem to the community
- Feasibility of change

The below graph summarizes the results of the prioritization process.



The significant community health needs, ranked order of priority, include:

1. Mental health and substance misuse
2. Access to primary care and dental care
3. Safe housing and transportation
4. Child care access and affordability
5. Maternal, infant, and child health
6. Access to nutritious foods and physical activity opportunities
7. Lung health

Community assets and resources

The Advisory Council identified the following community resources and assets that may be available to address the highest priority health needs.

Mental health and substance misuse

- Creative Living Center
- Local churches
- MercyOne Primghar Medical Center
- O’Brien County Mental Health
- O’Brien County Public Health
- Sanford Sheldon Medical Center
- Seasons Center for Behavioral Health

Access to primary care and dental care

- Iowa Department of Human Services
- MercyOne Primghar Medical Center
- O’Brien County Public Health
- Promise Community Health Center

-
- Sanford Sheldon Medical Center

Safe housing and transportation

- Love INC
- Northwest Iowa Regional Housing Authority (NWIRHA)
- RIDES
- Upper Des Moines Opportunity, Inc.
- U.S. Department of Housing and Urban Development (HUD)

Child care access and affordability

- Best Care for Babies and Children Program (O'Brien County Public Health)
- Iowa Child Care Resources & Referral (CCR&R)
- O'Brien County Public Health
- Upper Des Moines Opportunity, Inc.
- Daycare waiting lists

Maternal, infant, and child health

- Best Care for Babies and Children Program (O'Brien County Public Health)
- Iowa Department of Health and Human Services
- K.I.D.S. Program
- MercyOne Primghar Medical Center
- O'Brien County Public Health
- Sanford Sheldon Medical Center
- The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

Access to nutritious foods and physical activity opportunities

- MercyOne Primghar Health & Fitness Center, additional fitness centers in Paullina and Sheldon
- Mobile pantry- O'Brien County- Paullina
- Mobile pantry- O'Brien County- Hartley
- O'Brien County General Assistance
- O'Brien County Public Health
- Primghar City Park
- Sheldon Mobile Food Bank
- Sneakers Run/Bike Trail
- The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- Upper Des Moines Opportunity, Inc.

Lung health

- MercyOne Primghar Medical Center
- O'Brien County Public Health
- Radon kits (funding for mitigation noted as a gap)
- Sanford Sheldon Medical Center
- Hospitals and clinics for CT scans and influenza vaccines

Next steps

MercyOne Primghar Medical Center will reconvene the Advisory Council this summer to develop a multi-year strategy to address identified community health and social needs. The implementation strategy will be publicly available as a separate document.

Printed copies of this report are available upon request at MercyOne Primghar Medical Center (255 N Welch Avenue, Primghar, IA 51245). This report is also available electronically at <https://www.mercyone.org/about-us/community-health-and-well-being/>.

Please email questions, comments, and feedback to communityhealth@mercyhealth.com.

The next community needs assessment for MercyOne Primghar Medical Center will be completed in fiscal year 2026.

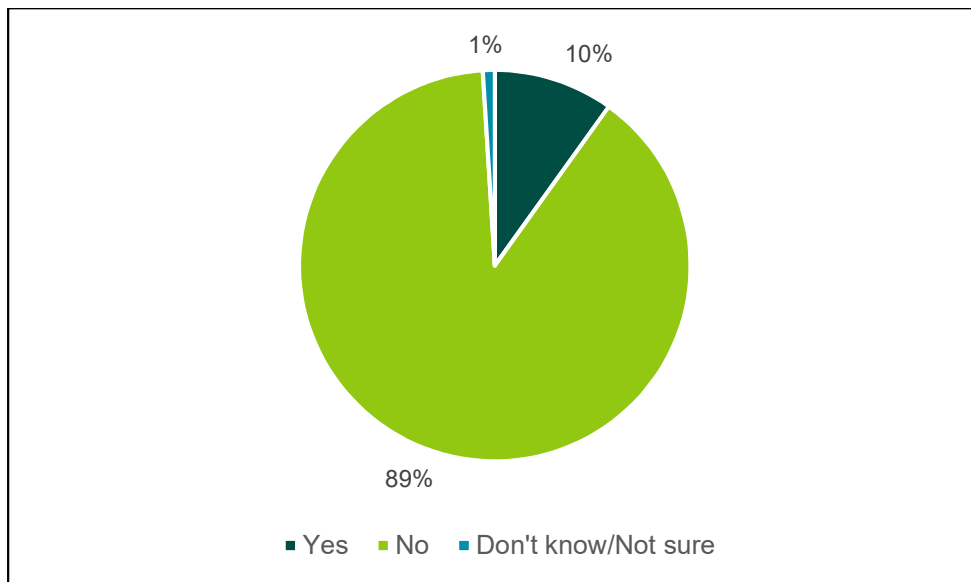
Appendix

Primary indicator data

ACCESS TO CARE

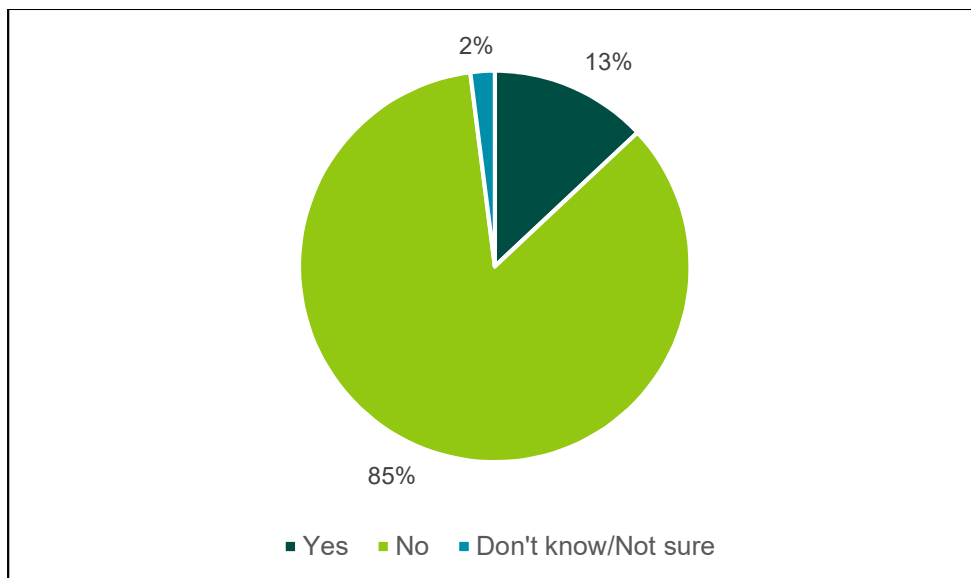
Access to primary care

Ten percent (10%) of respondents report a time in the past year when they needed to see a doctor but could not. The most reported reason was the doctor’s office not being open at convenient times.



Access to dental care

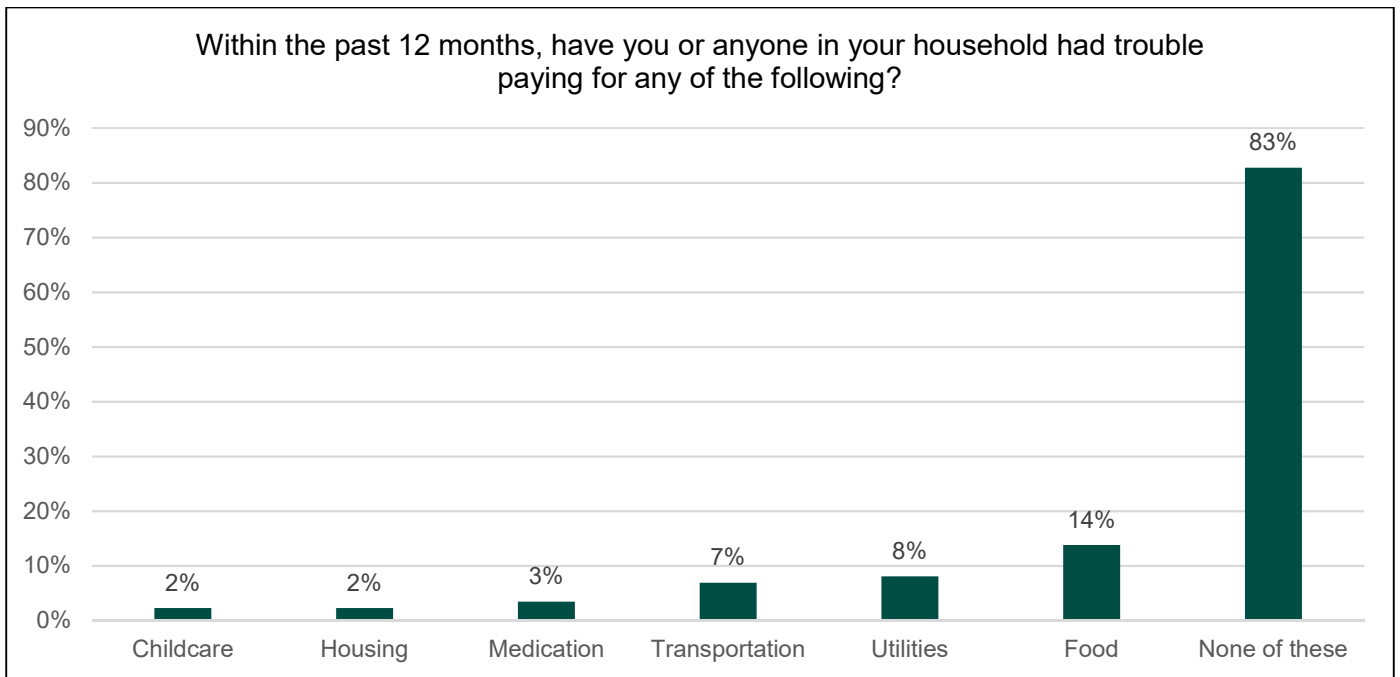
Thirteen percent (13%) of respondents report a time in the past year when they needed dental care but could not get it. The most reported reason was not being able to afford the cost.



EMPLOYMENT AND INCOME

Socioeconomic

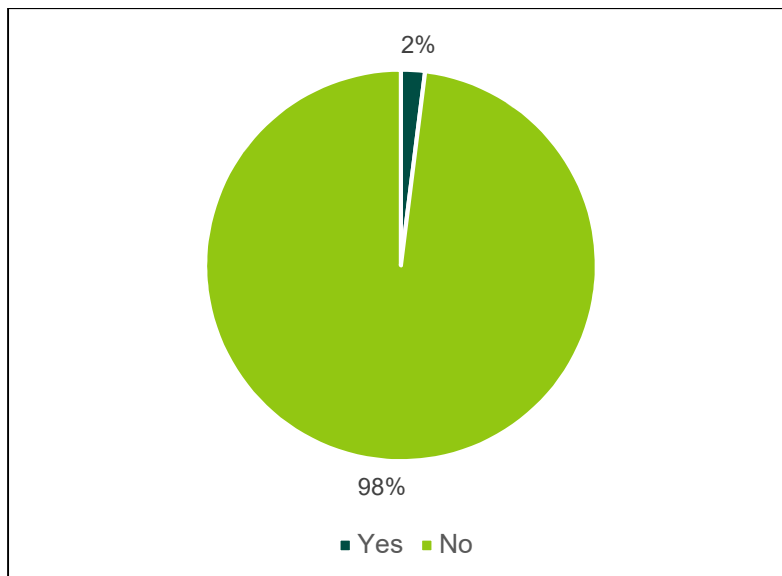
Seventeen percent (17%) of respondents report challenges paying for at least one essential need. The most reported domain is food insecurity at 14% followed by utilities at 8% and transportation at 7%.



COMMUNITY SAFETY

Neighborhood violence

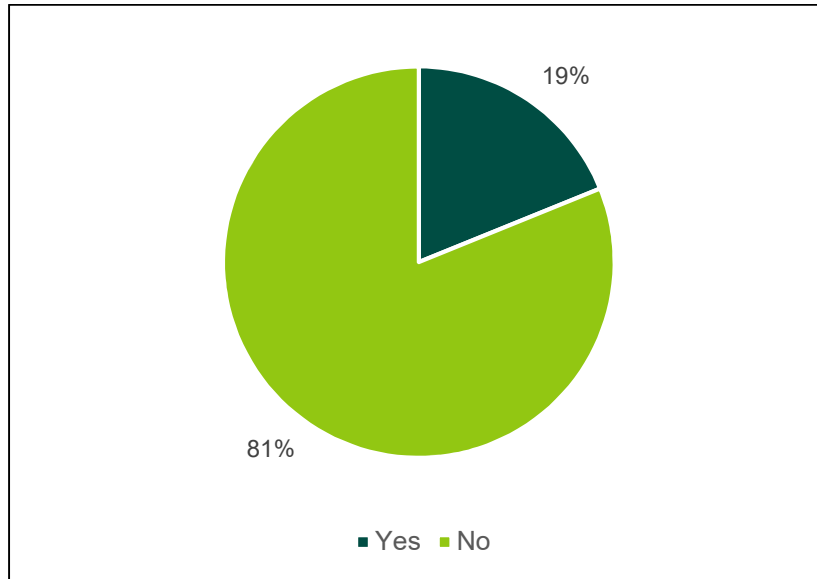
Two percent (2%) of survey respondents report feeling afraid of violence in their neighborhood.



SOCIAL AND COMMUNITY

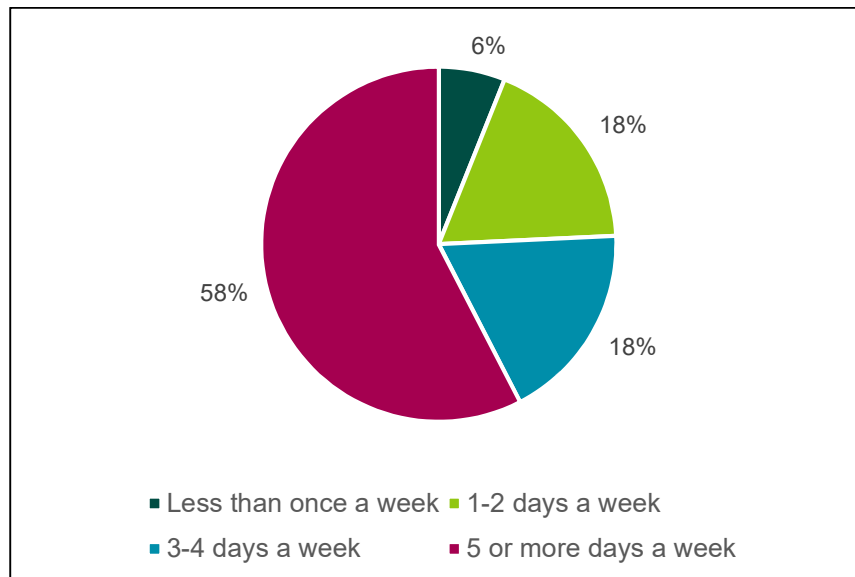
Child care

Nineteen percent (19%) of respondents report challenges with obtaining childcare.



Social isolation

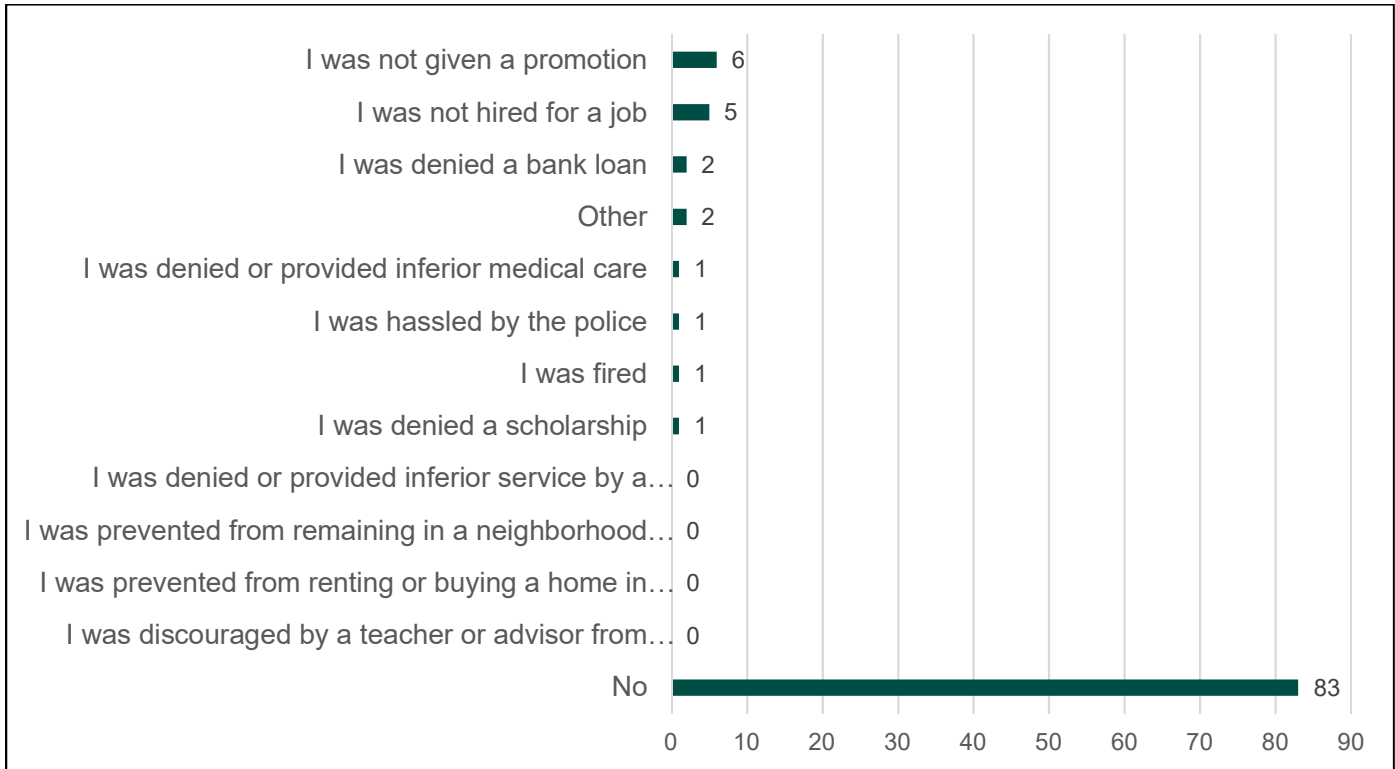
Six percent (6%) of respondents report seeing or talking to people they care about or feel close to less than once a week.



Experienced discrimination

Thirteen percent (13%) of survey respondents report experiencing discrimination because of race, ethnicity, gender, age, religion, physical appearance, sexual orientation, or other characteristics. The most reported experiences include not being provided a promotion and not being hired for a job. All respondents reporting discrimination were non-Hispanic white individuals between the ages of 25-60. Both male and female

respondents report this experience. The assessment team plans to incorporate additional questions around discrimination in the next assessment to better understand the types of discrimination occurring in the community.



Good place to grow old

Most survey respondents answered positively in regards to the community being a good place to grow old.

Average rating: 3.92 (5 is the most positive)

Good place to raise children

Most survey respondents answered positively in regards to the community being a good place to raise children.

Average rating: 4.14 (5 is the most positive)

HOUSING AND TRANSPORTATION

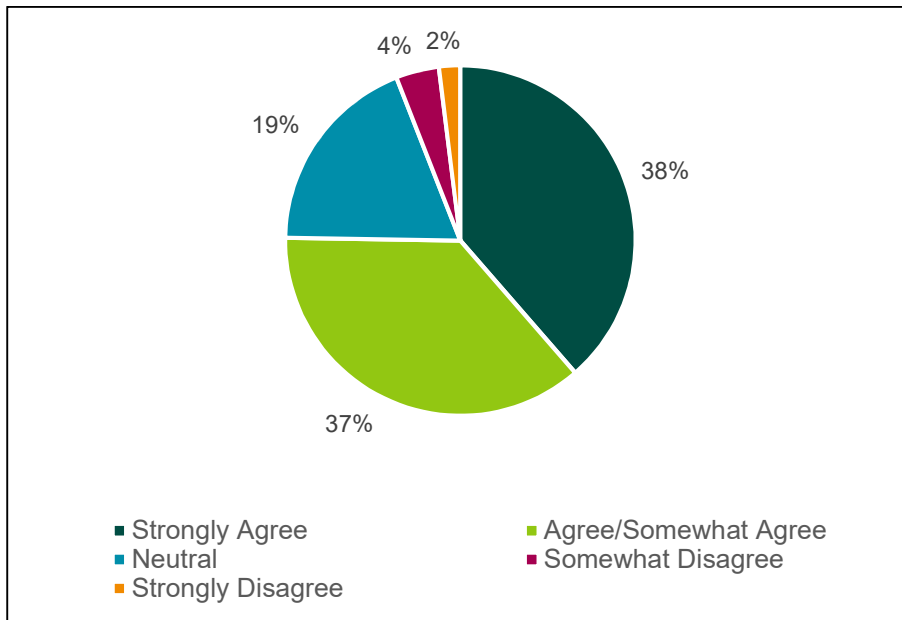
Housing

Approximately four percent (~4%) of respondents report general cleanliness and ~4% report unsafe drinking water, followed by issues with mold or dampness (~2%), and unreliable utilities (~1%).

HEALTH BEHAVIORS AND RISK FACTORS

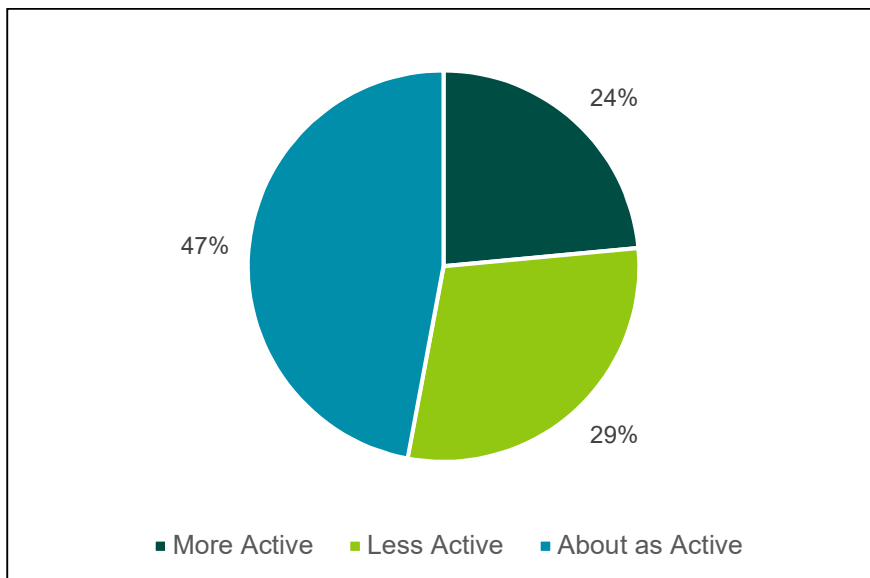
Substance use and misuse

Thirty-nine percent (39%) of respondents strongly agree that the community has a growing problem with substance use and misuse.



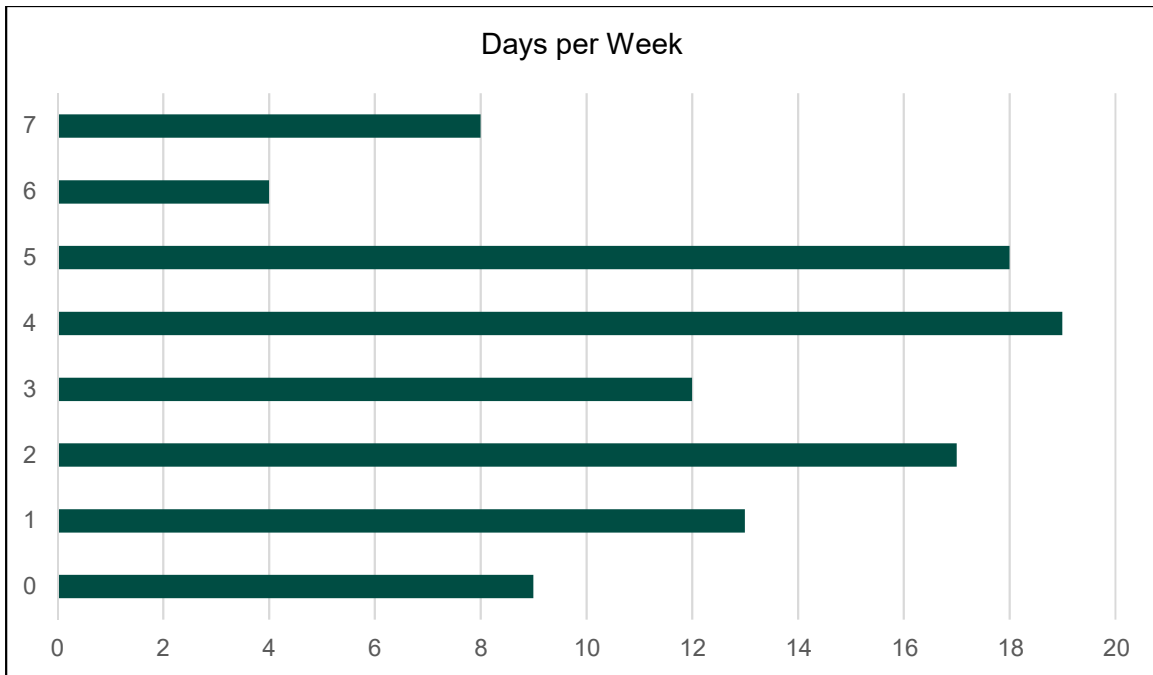
Physical activity

Twenty-nine (29) percent of respondents report being less active than other persons their age.



Fruits and vegetables

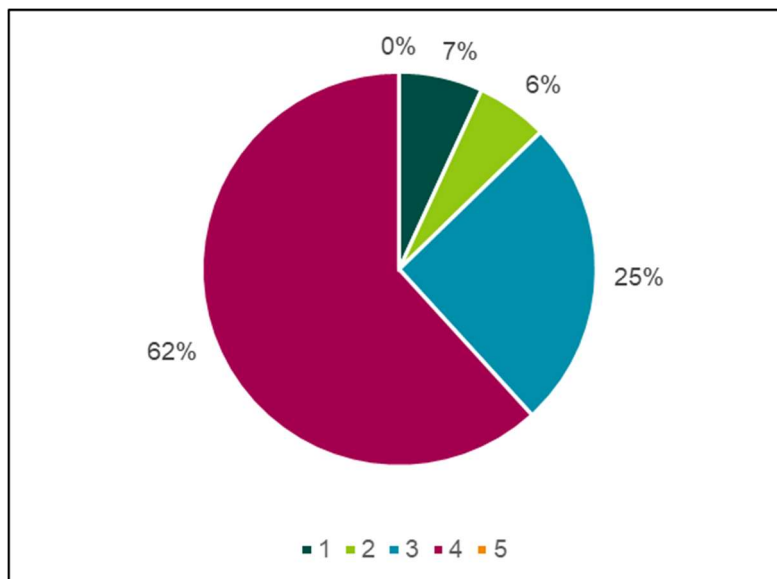
Eight percent (8%) of respondents report eating the recommended amount of fruits and vegetables each day.



QUALITY OF LIFE

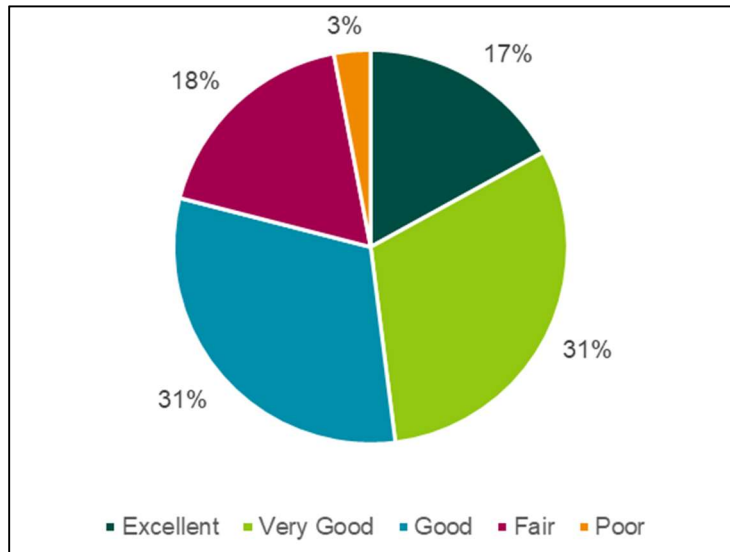
Overall health

A majority of respondents (69%) rated their overall health as very good or excellent while 6% rated their overall health as fair or poor.



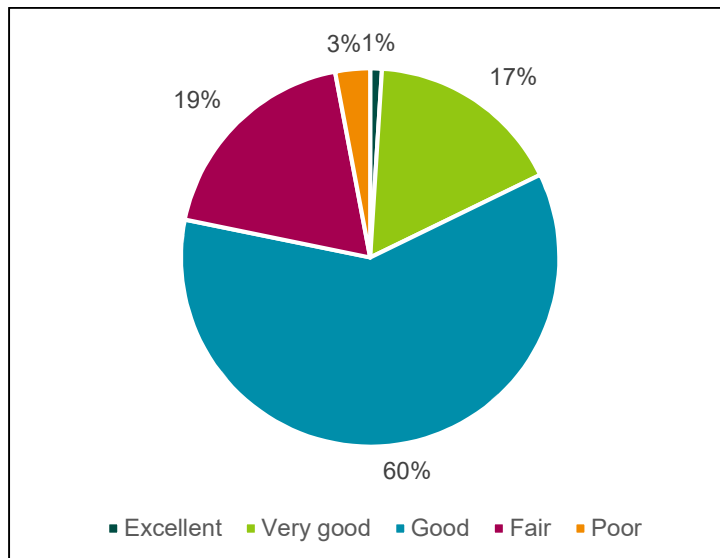
Mental health

Twenty-one percent (21%) of respondents rated their mental health as fair or poor.



Community health

Twenty-two percent (22%) of respondents rated the overall health of their community as fair or poor.



PERSONAL HEALTH CONCERNS

Greatest personal health concern

Question: What is your biggest health concern? (Similar free text responses are grouped together; only responses with a count of three (3) or more are included in the table)

Health concern	Count
Weight/Obesity	16
Mental health	6
Physical inactivity	6
Heart health and hypertension	6
Cancer	5
Healthcare access	5
Lungs and COPD	4
Dental and oral health	3
Diabetes	3
Other free text responses	16

COMMUNITY HEALTH CONCERNS

Important community health concerns

Question: What are the 3 most important health concerns in our community? (Which concerns have the greatest impact on overall community health?)

Health concern	Count
Mental health	50
Substance use & misuse (alcohol or other drugs)	42
Cancers	38
Aging issues	33
Obesity	33
Heart disease & stroke	27
Child abuse/neglect	18
High blood pressure	14
Diabetes	8
Suicide	7
Domestic violence	5
Dental problems	4
Maternal health	2

Violence	2
Other	2
Firearm related injuries	1
Infectious diseases	0
Sexually transmitted diseases	0

Community services needed

Question: Are there any additional services or resources that you think should be available in our community to help residents maintain or improve their overall health? (Similar free text responses are grouped together)

Health concern	Count
Mental health and SUD counselors/Mental health awareness	6
Bike paths and walking paths	5
Dental care for Medicaid	4
Transportation	3
Youth recreation	3
Affordable/Improved fitness centers	3
Better healthcare facilities/Bigger hospital	2
Health education/Diabetes prevention workshop	3
Affordable housing/Senior housing	2
Improved senior activity programs/social supports	2
Long-term care	1
Affordable childcare	1
Urgent care	1
Home health services	1
Health services for seniors	1
Larger ambulance crew	1
New businesses	1

COMMUNITY STRENGTHS

Greatest strengths of community

Question: What are the 3 greatest STRENGTHS of our community that help residents maintain or improve their overall health?

Strength	Count
Good schools	46
Friendly community	33

Access to healthcare	33
Religious/Spiritual values	28
Low crime/Safe neighborhoods	25
Affordable housing	19
Police, fire, and rescue services	19
Clean environment	18
Access to affordable healthy foods	17
Access to child care	14
Walkable, bikeable community	14
Good jobs & health economy	10
Early childhood services	7
Parks & recreation	7
Respect toward difference cultures/races	2
Programs for youth outside of school	2
Prepared for emergencies	1
Senior services	1
Access to alcohol/Drug treatment	0
Arts and cultural events	0
Homeless services	0
Public transportation	0
Technology	0
Other	0

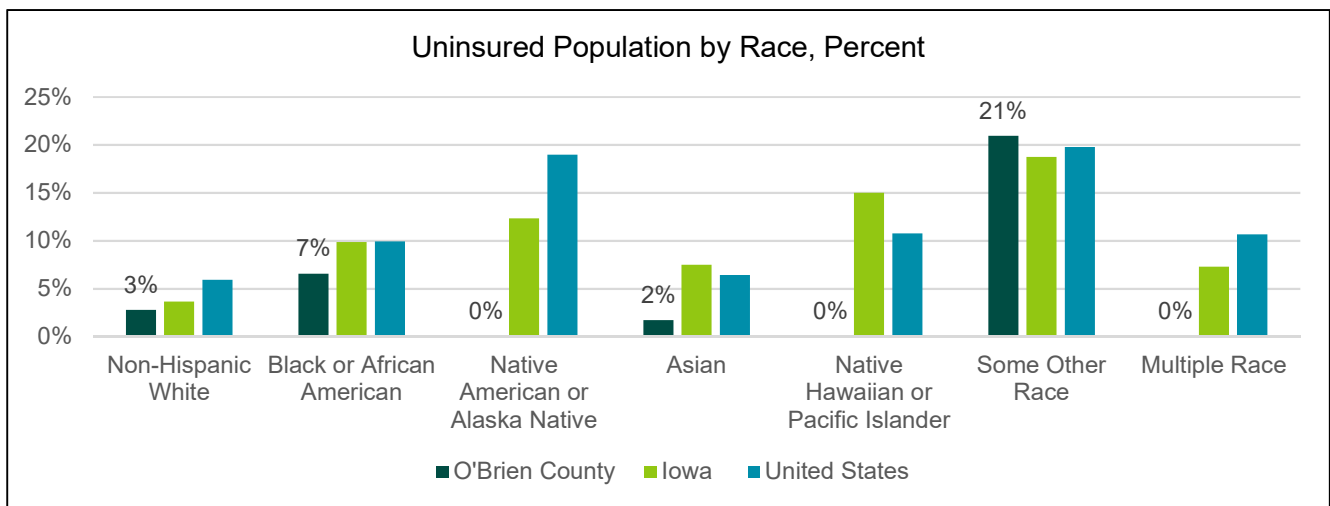
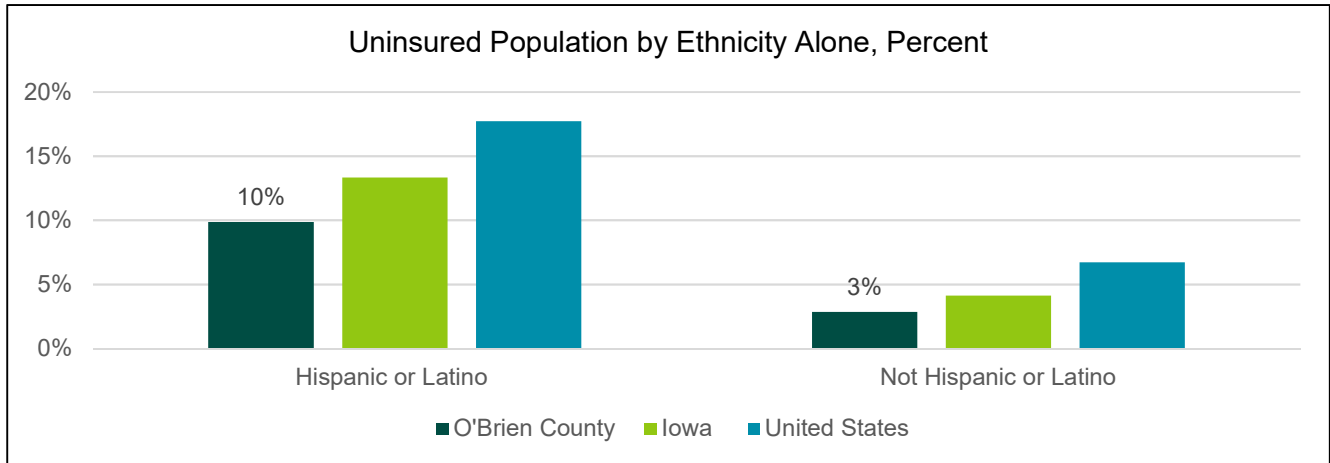
Secondary indicator data

ACCESS TO CARE

Health insurance

The lack of health insurance is a key driver of health status. People without health insurance are less likely to get the care they need leading to poorer health outcomes. In O’Brien County, almost 97% of residents have health insurance. Of those insured, 19.85% are receiving Medicaid benefits.

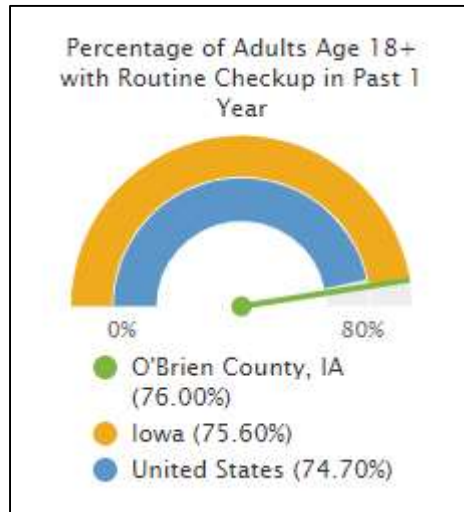
- **Benchmark:** Insured rates in O’Brien County are higher than the state overall (95%).
- **Healthy People 2030 target:** The county insured rate exceeds the Healthy People 2030 target of 92.4% of people having health insurance.
- **Disparities:** Uninsured rates are highest among people of color in O’Brien County.



Recent primary care visit

Within O'Brien County, 76% of adults had a routine checkup in the past year.

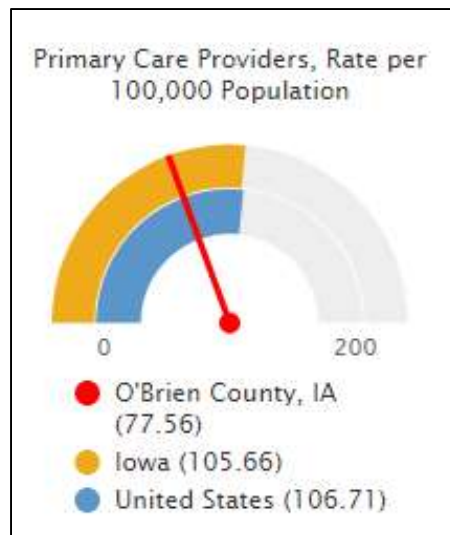
- **Benchmark:** Comparable to state (75.6%) and national (74.7%) rates.
- **Data Source(s):** Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System.



Primary care providers

In O'Brien County, there are 77.56 primary care providers per 100,000 population.

- **Comparison:** The shortage in O'Brien County is more significant than state and national shortages.
- **Data source(s):** Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). January 2023.

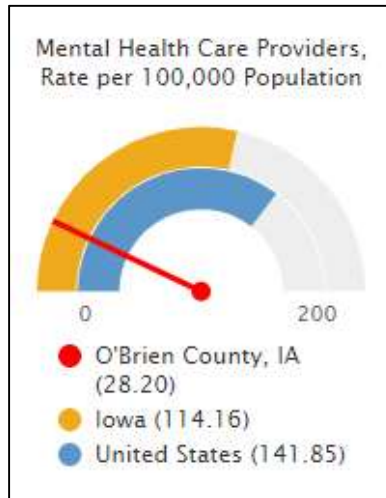


Mental health providers

O'Brien County is a geographic HPSA for mental health. The county has four (4) providers specializing in mental health translating to a rate of 28.2 mental health providers per 100,000 population.

- **Benchmark:** The shortage in O'Brien County is much more significant than state and national shortages.
- **Data Source(s):** Centers for Medicare and Medicaid Services, CMS - National Plan and

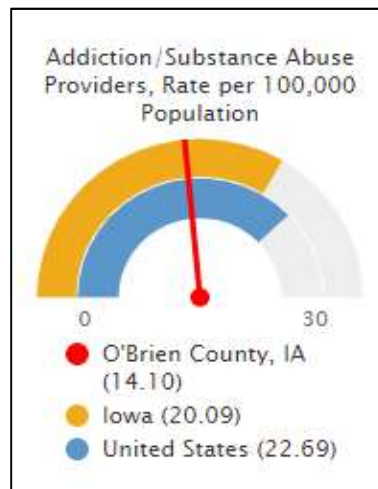
Provider Enumeration System (NPPES). January 2023.



Addiction/substance abuse providers

In O'Brien County, there are 14.10 addiction/substance use providers per 100,000 population.

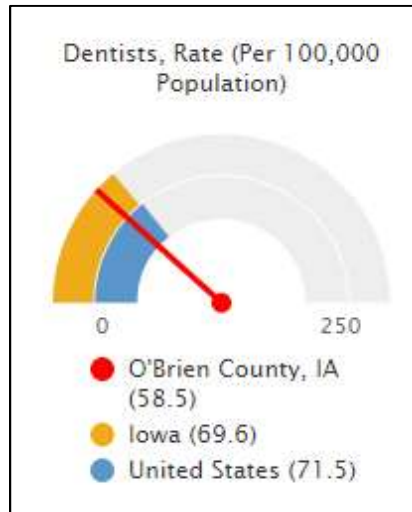
- **Benchmark:** The shortage in O'Brien County is more significant than state and national shortages.
- **Data source(s):** Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES). January 2023.



Dentists

In O'Brien County, there are 58.5 dentists per 100,000 population.

- **Benchmark:** The shortage in O'Brien County is slightly more significant than state and national shortages.
- **Data Source(s):** County Health Rankings 2020.

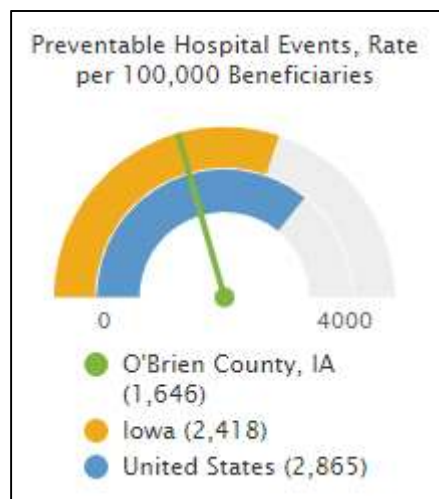


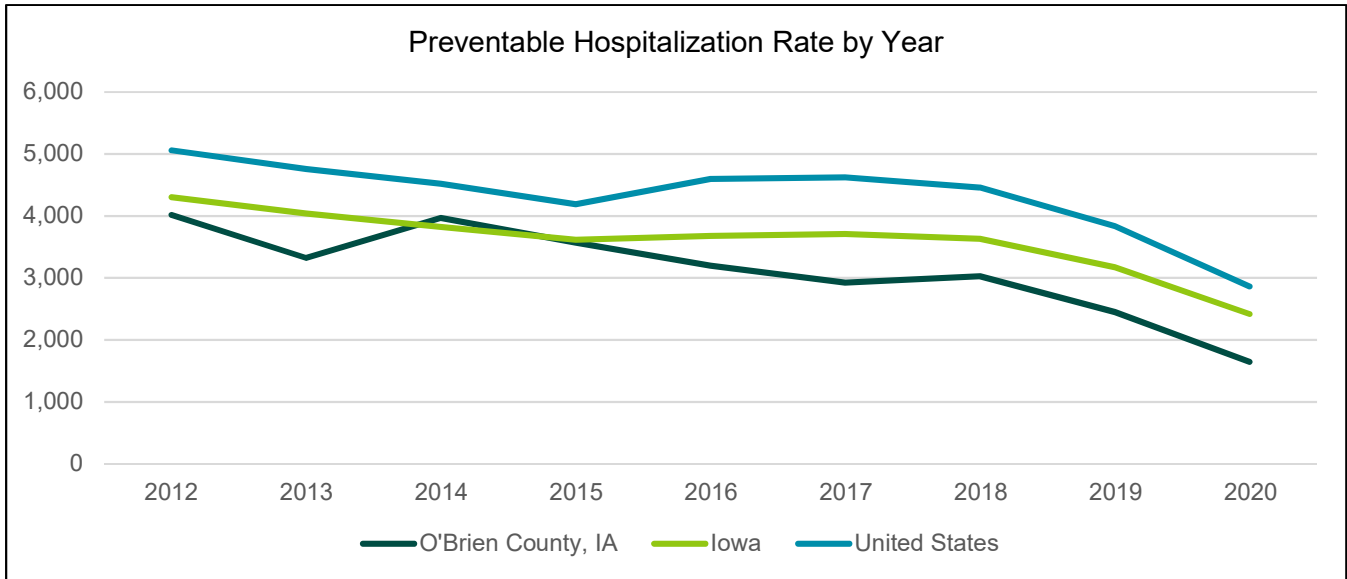
QUALITY OF CARE

Preventable hospitalizations

This indicator reports the preventable hospitalization rate among Medicare beneficiaries for the latest reporting period. Preventable hospitalizations include hospital admissions for one or more of the following conditions: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infection. The preventable hospitalization rate in O'Brien County was 1,646 per 100,000 beneficiaries. Of note, the preventable hospitalization rate for the county has dropped significantly in the past eight (8) years.

- **Benchmark:** The preventable hospitalization rate in O'Brien County is lower than the state rate of 2,418.
- **Data Source(s):** Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool. 2020.

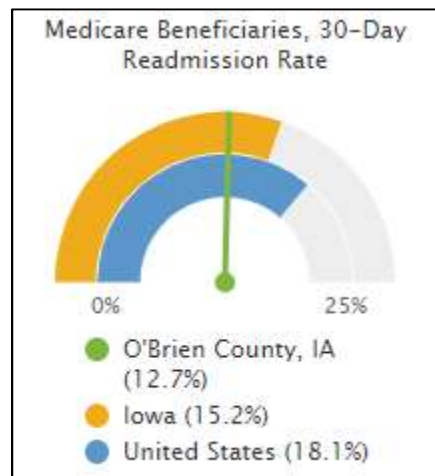




30-day hospital readmissions

This indicator reports the number and rate of 30-day hospital readmissions among Medicare beneficiaries age 65 and older. Hospital readmissions are unplanned visits to an acute care hospital within 30 days after discharge from a hospitalization. Patients may have unplanned readmissions for any reason, however readmissions within 30 days are often related to the care received in the hospital, whereas readmissions over a longer time period have more to do with other complicating illnesses, patients' own behavior, or care provided to patients after hospital discharge. O'Brien County has a 30-day hospital readmission rate of 12.7%.

- **Benchmark:** The readmission rate in O'Brien County is better than the state readmission rate of 15.2%.
- **Data Source(s):** Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File. 2020.



Mammography screening

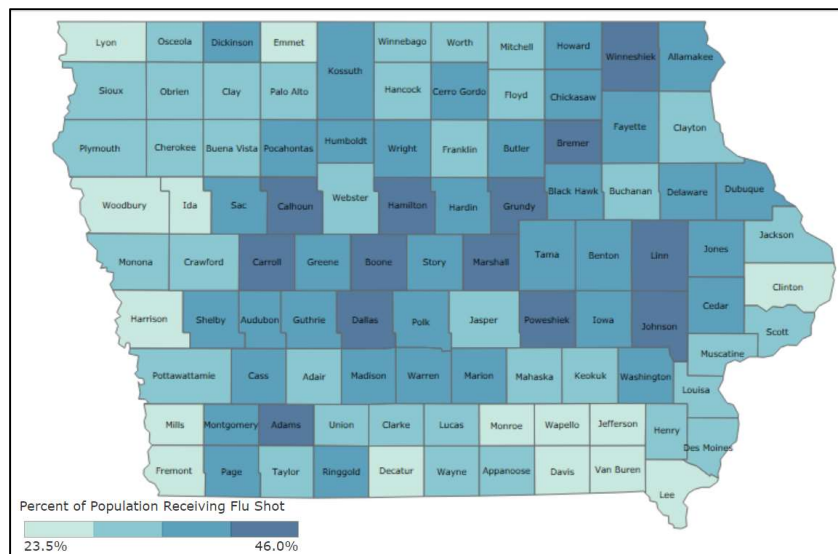
About half (52%) of female Medicare enrollees ages 65-74 in O'Brien County received an annual mammography screening.

- **Benchmark:** Mammography screening rates in O'Brien County are similar to the statewide screening rate (53%).
- **Data Source(s):** County Health Rankings. 2019.

Flu vaccine

Thirty-four percent (33.9%) of O'Brien County residents received a flu vaccine during the 2022-2023 flu season.

- **Benchmark:** The percent of the population receiving the flu vaccine in O'Brien County is lower than the statewide vaccination rate of 36.1%.
- **Data Source(s):** Iowa Public Health Tracking Portal, Influenza Vaccine Data, 2022-2023 Flu Season.

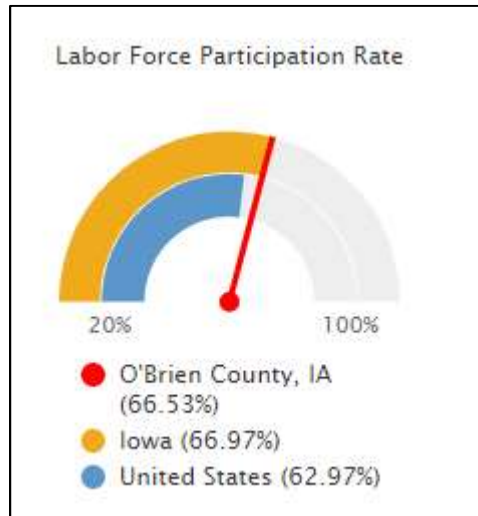


EMPLOYMENT AND INCOME

Labor force participation

Labor force participation rate measures the percentage of working age adults employed or seeking employment. The labor force participation rate in O'Brien County is 66.53%.

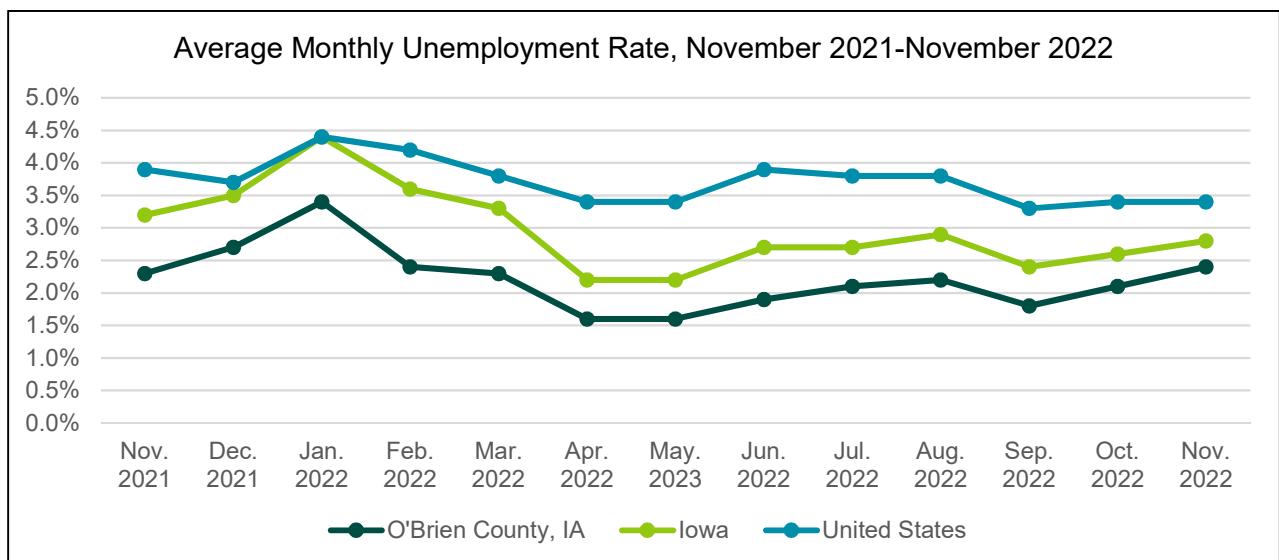
- **Benchmark:** Labor force participation in O'Brien County is similar to the state participation rate (66.97%) and higher than the national participation rate (62.97%).
- **Target:** Labor force participation in O'Brien County is below the Healthy People 2030 target of 75%.
- **Data Source(s):** US Census Bureau, 2016-2020 American Community Survey; Healthy People 2030.

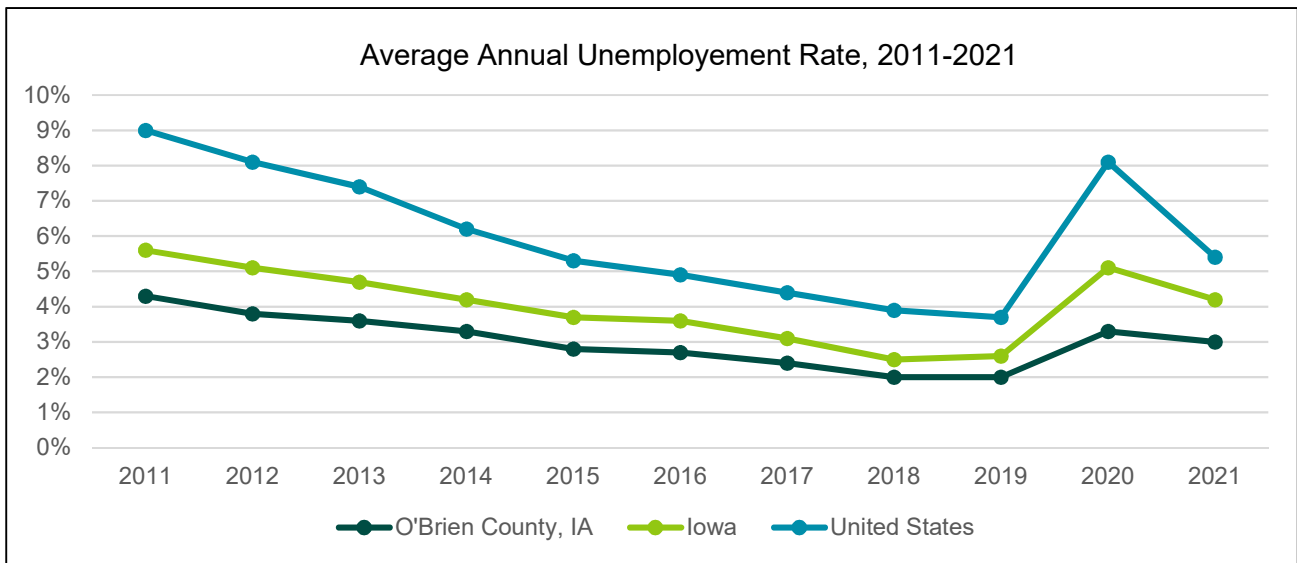


Unemployment rate

Unemployment rate measures the percentage of working age adults employed or seeking employment. The unemployment rate in O'Brien County in November 2022 was 2.4%. The unemployment rate did increase in 2020 likely related to the COVID-19 pandemic. The rate decreased in 2021 to 3.0% but has not returned to the pre-pandemic rate of 2.0%. This indicator is relevant because unemployment creates financial instability and barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor health status.

- **Benchmark:** The unemployment rate in O'Brien County is consistently lower than both state and national rates.
- **Disparities:** In Iowa, jobs lost during the COVID-19 pandemic were primarily in the leisure and hospitality sector. The recession disproportionality affected women over men.
- **Data Source(s):** US Department of Labor, Bureau of Labor Statistics, November 2022; Iowa Workforce and the Economy 2021.

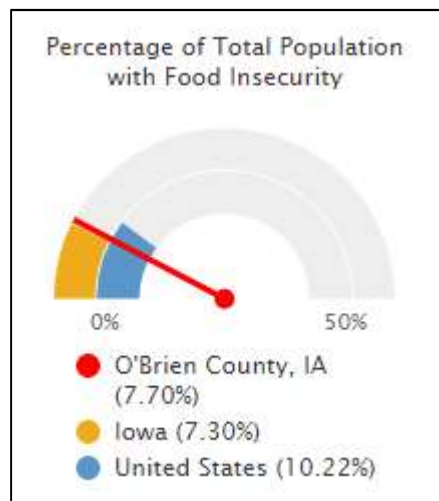




Food insecurity rate

Food insecurity estimates the percentage of the population that experienced food insecurity at some point during the year. The food insecurity rate in O'Brien County in 2020 was 7.7%. Thirty percent of the food insecure population is ineligible for assistance programs (SNAP, WIC, school meals, CSFP, and TEFAP). Food insecurity has been linked to negative health outcomes.

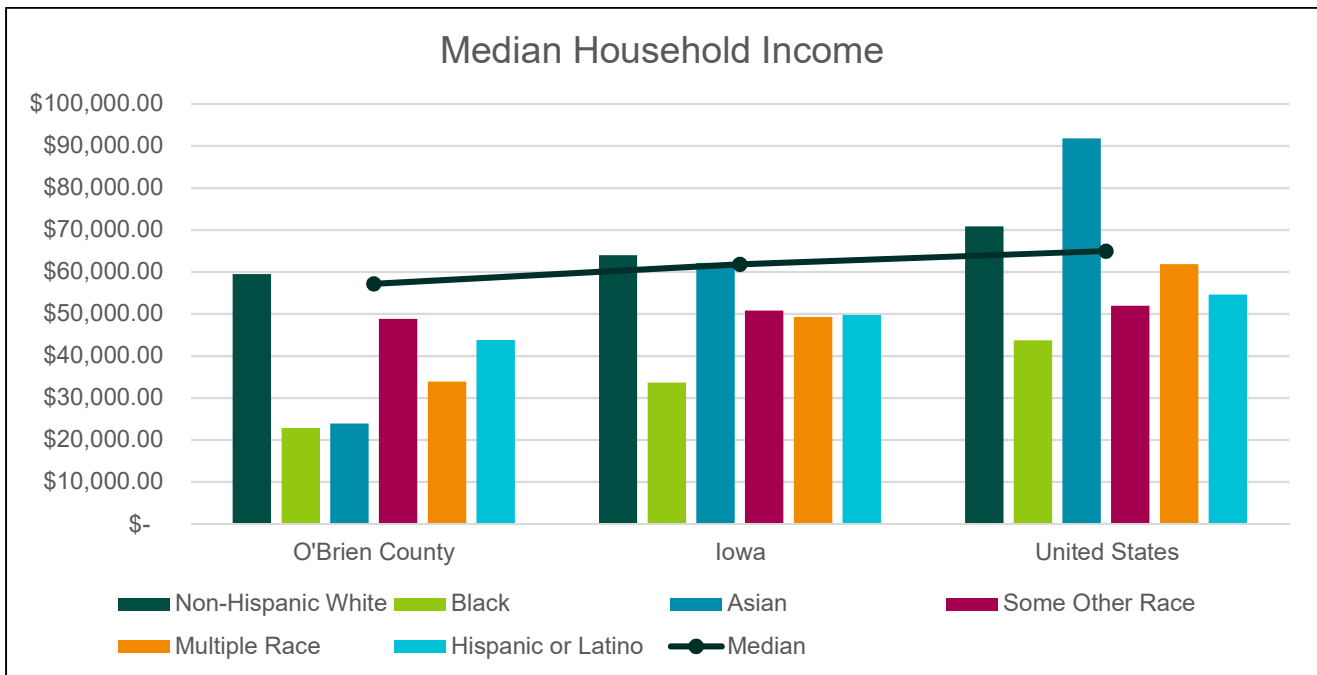
- **Benchmark:** The food insecurity rate in O'Brien County is slightly higher than the state rate of 7.3%.
- **Target:** O'Brien County is not achieving the Healthy People 2030 target of 6%.
- **Disparities:** Food insecurity disproportionately affects children in O'Brien County. The food insecurity rate among children is 10.5%.
- **Data Source(s):** Feeding America 2020; Healthy People 2030.



Income

The median household income in O'Brien County is \$57,200 (2016-2020).

- **Benchmark:** The median household income in O'Brien County is lower than the state median of \$61,836.
- **Disparities:** Median household income is much lower among people of color in O'Brien County.
- **Data Source(s):** 5-year American Community Survey Estimates, 2016-2020.

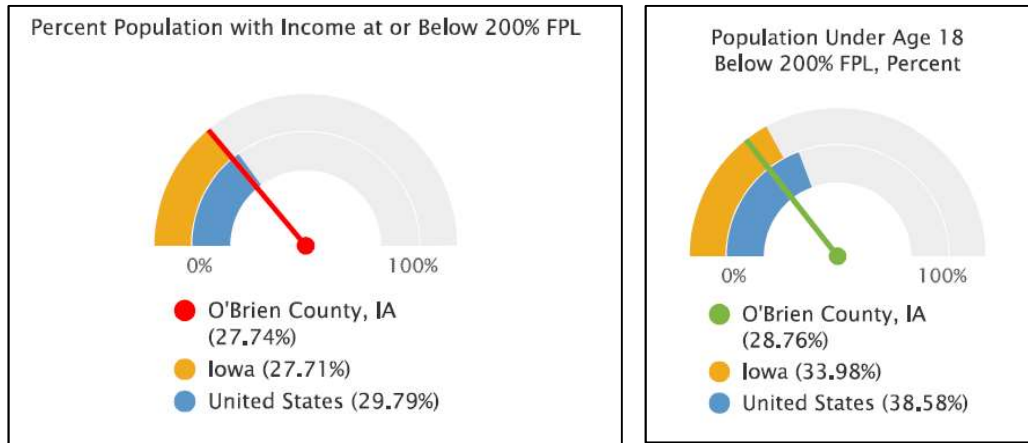


Household income for American Indian or Alaska Native and Native Hawaiian or Pacific Islander was not available for O'Brien County, IA

Poverty

More than a quarter (27.74%) of O'Brien County residents live in households with income at or below 200% of the Federal Poverty Level (FPL). The population under 18 living in households below 200% FPL is 28.76%. This indicator is important since poverty creates barriers to access including health services, healthy food, stable housing, and opportunities for physical activity.

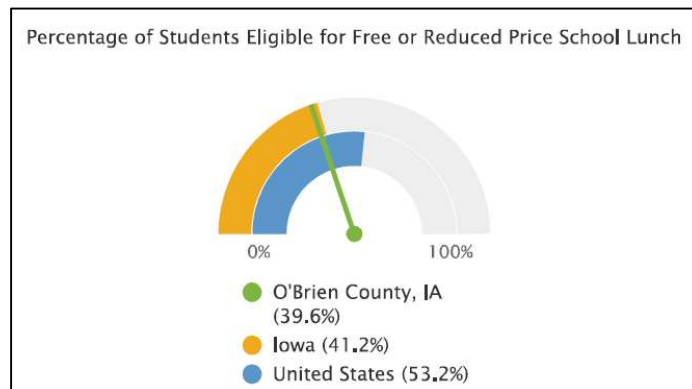
- **Benchmark:** The percentage of individuals living in poverty in O'Brien County is similar to Iowa as a whole (27.71%).
- **Target:** O'Brien County is not meeting the 8.0% Healthy People 2030 target.
- **Data Source(s):** 5-year American Community Survey Estimates, 2016-2020; Healthy People 2030; 2021 Small Area Income and Poverty Estimates (SIAPE).



Children eligible for free/reduced-price lunch

Nearly 40% of public school students in O'Brien County were eligible for free or reduced-price lunch. Free or reduced-price lunches are served to qualifying students in families with income under 185% (reduced-price) or under 130% (free lunch) of the US federal poverty threshold as part of the National School Lunch Program (NSLP).

- **Benchmark:** The percentage of children eligible for free or reduced-price lunch is lower in O'Brien County than the state as a whole (41.2%).
- **Data Source(s):** 5-year American Community Survey Estimates, 2016-2020.



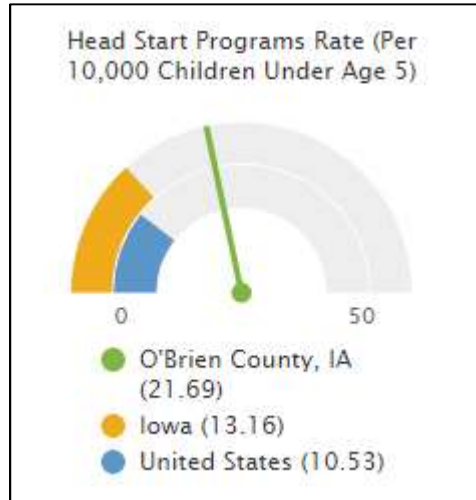
EDUCATION

Head Start

Head Start is a program designed to help children from birth to age five who come from families at or below poverty level. O'Brien County has two (2) Head Start programs, a rate of 21.69 per 10,000 children. This indicator is important because the program's goal is to help children become ready for kindergarten while also providing the needed requirements to thrive, including health care and food support.

- **Benchmark:** O'Brien County has a much higher rate of head start programs than the state as a whole (13.16).

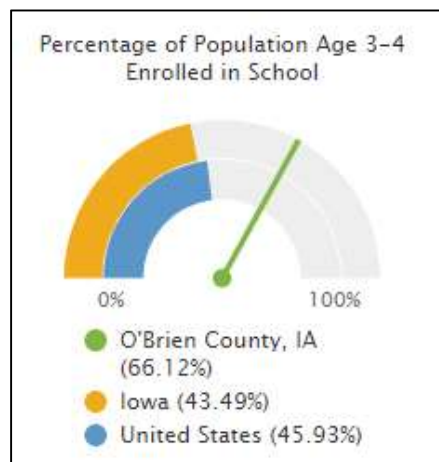
- **Data Source(s):** US Department of Health and Human Services (HHS) 2022 Head Start locator.



Preschool

O'Brien County has 203 children age 3-4 enrolled in school, which is 66.12% of the county population age 3-4.

- **Benchmark:** Preschool opportunities are more abundant in O'Brien County than in Iowa as a whole (43.49%).
- **Data Source(s):** US Census Bureau, American Community Survey. 2017-21.

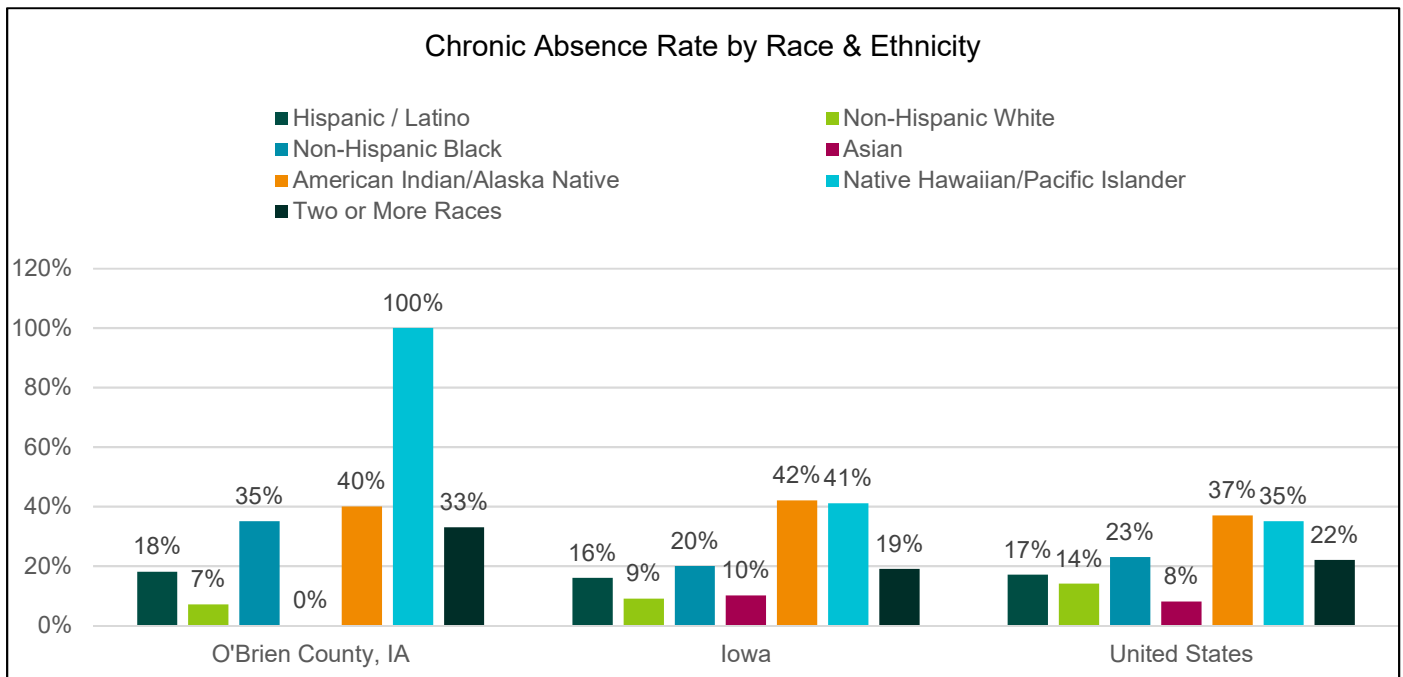
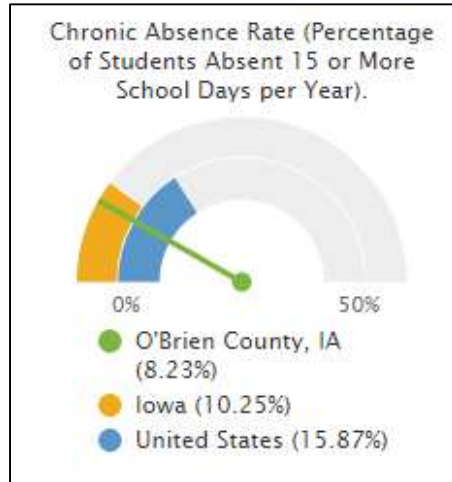


Chronic absenteeism

In O'Brien County, 8.23% of children missed 15 or more school days during the 2017-2018 school year. This indicator is important because chronic absence can jeopardizes students' academic proficiency, social engagement, and opportunities for long-term success.

- **Benchmark:** Absenteeism in O'Brien County is lower than Iowa as a whole (10.25%).
- **Disparities:** Chronic absenteeism is higher among people of color in O'Brien County.

- **Data Source(s):** U.S. Department of Education, US Department of Education - Civil Rights Data Collection.



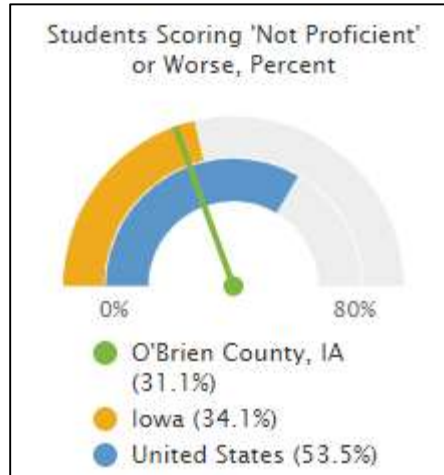
Data on chronic absenteeism for O'Brien County is not available for the Asian population

Student reading proficiency (4th grade)

In O'Brien County, almost 70% of 4th grade students had reading skills at or above the proficient level.

- **Benchmark:** Students in O'Brien County (68.9%) performed better than students statewide (65.9%).
- **Target:** O'Brien County is performing above the Healthy People 2030 target of 41.5%.

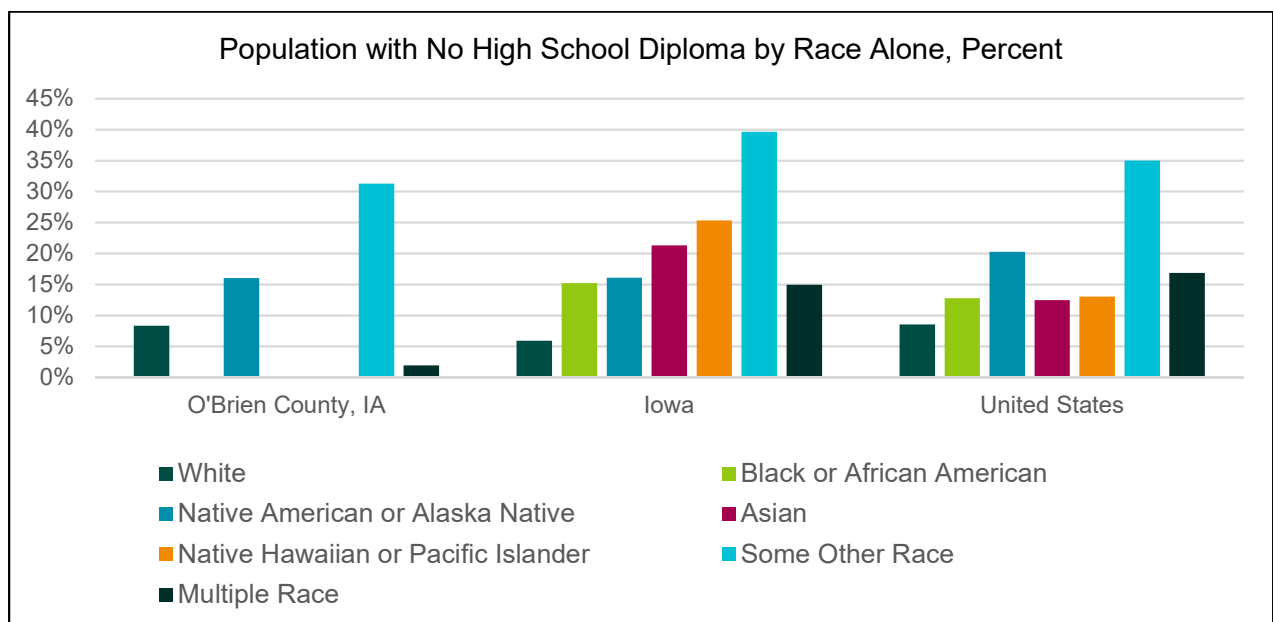
- **Data Source(s):** US Department of Education, EDFacts. Additional data analysis by CARES. 2018-19.

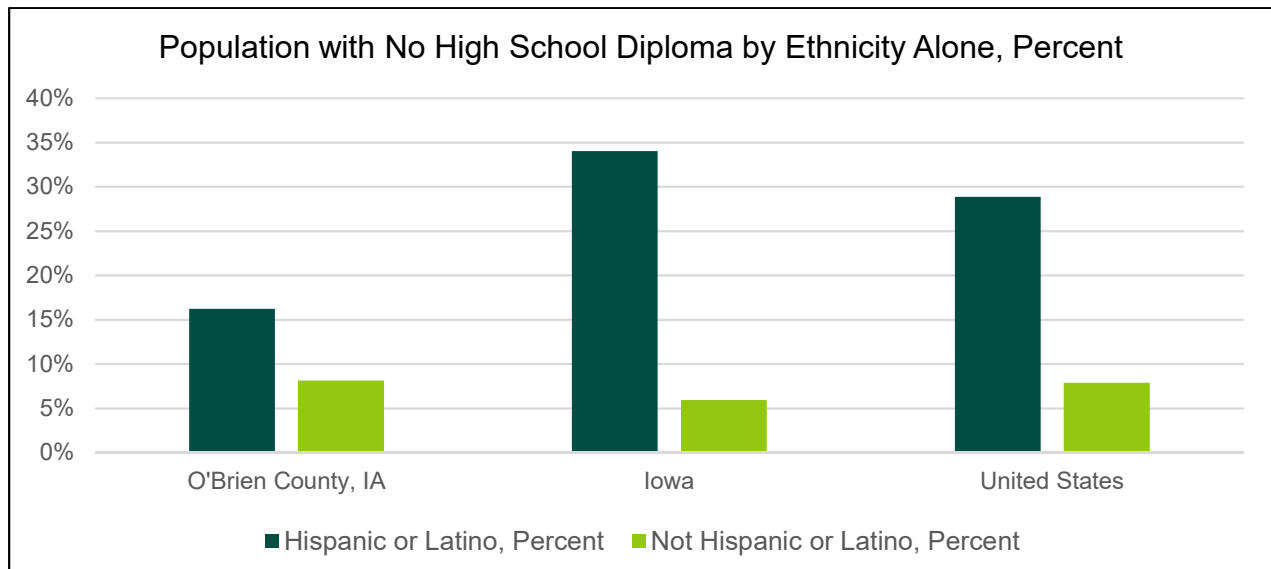


High school diploma

In O'Brien County 92% of the population aged 25 or older has a high school diploma or equivalent. This indicator is important because educational attainment is linked to positive health outcomes.

- **Benchmark:** High school graduation rates in O'Brien County are slightly lower than the state as a whole (93%).
- **Disparities:** The percentage of the population without a high school diploma is much higher in the Hispanic or Latino population.
- **Data Source(s):** US Census Bureau, American Community Survey. 2017-21.

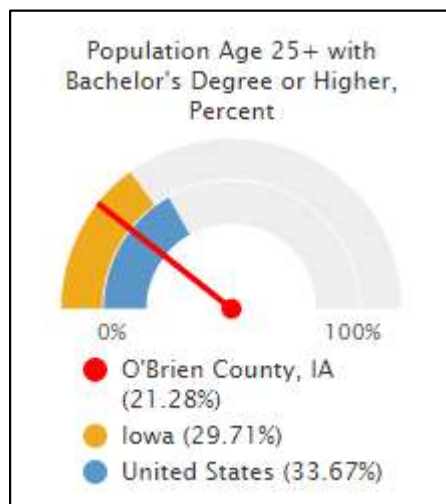




Bachelor's degree or higher

Less than a quarter (21.28%) of O'Brien County residents aged 25 or older have obtained a Bachelor's degree or higher. According to Healthy People 2030, higher education helps people secure better-paying jobs with fewer safety hazards. Income from these employment opportunities may improve health by increasing people's ability to accrue material resources, such as higher-quality housing, as well as psychosocial resources, such as higher social status.

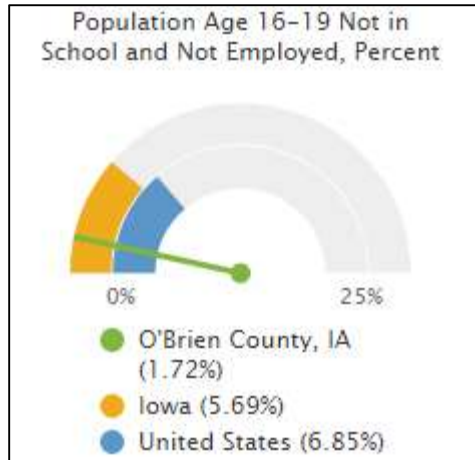
- **Benchmark:** The percentage of O'Brien County residents with a Bachelor's degree or higher is lower than the state (29.71%).
- **Data Source(s):** US Census Bureau, American Community Survey. 2017-21.



Young people not in school and not working

This indicator reports the percentage of youth age 16-19 who are not currently enrolled in school and who are not employed. Less than 2% of youth in O'Brien County are not in school and not employed.

- **Benchmark:** The percentage of youth who not enrolled in school and who are not employed is lower in O’Brien County (1.72%) than the state of Iowa (5.69%).
- **Target:** The healthy people 2023 target is to decrease the number of adolescents and young adults aged 16 to 24 years who are enrolled in neither school nor working to 10.1%.
- **Data Source(s):** US Census Bureau, American Community Survey. 2017-21; Health People 2030.

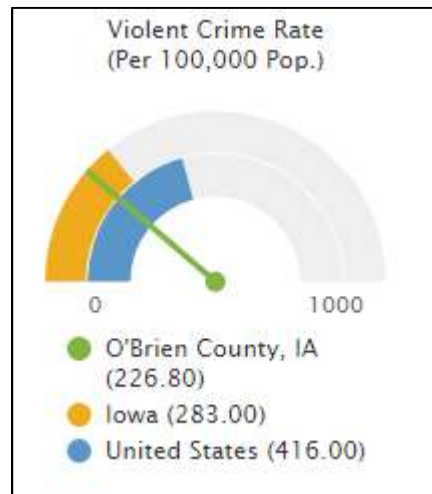


COMMUNITY SAFETY

Violent crime

Within O’Brien County, the 2015-2017 three-year total of reported violent crimes was 96, which equates to an annual rate of 226.80 crimes per 100,000 people. Violent crime includes homicide, rape, robbery, and aggravated assault.

- **Benchmark:** The rate of violent crimes in O’Brien County is lower than the state rate of 283.00.
- **Data Source(s):** Federal Bureau of Investigation, FBI Uniform Crime Reports.



Alcohol-impaired driving deaths

No driving deaths (0%) in O'Brien County between 2016-2020 involved alcohol.

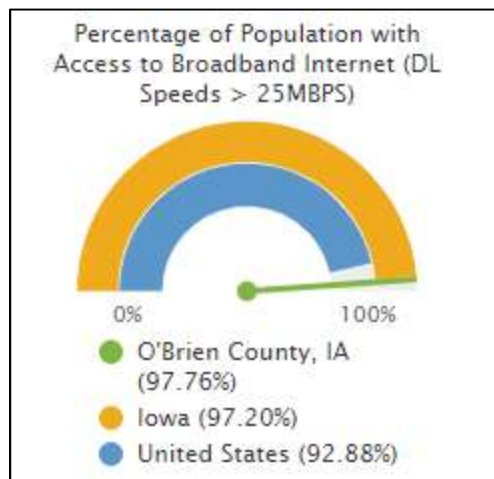
- **Benchmark:** More than a quarter (27%) of motor vehicle crash deaths in Iowa involved alcohol.
- **Data Source(s):** 2022 County Health Rankings, which utilizes figures from the 2016-2020 Fatality Analysis Reporting System.

SOCIAL AND COMMUNITY

Broadband access

Most (97.76%) O'Brien County residents have access to high-speed internet. Data is based on the reported service area of providers offering download speeds of 25 MBPS or more and upload speeds of 3 MBPS or more.

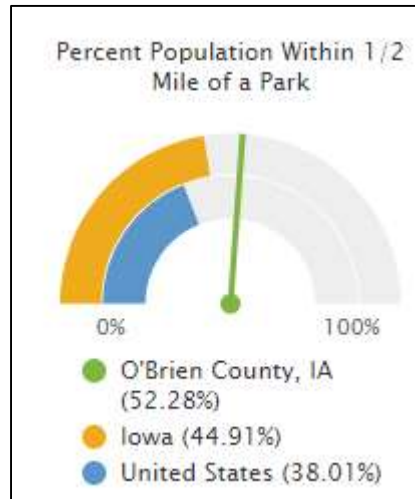
- **Benchmark:** Access to broadband in O'Brien County is similar to the state as a whole (97.20%).
- **Data Source(s):** FCC FABRIC Data. Additional data analysis by CARES. 2022.



Park access

Just over half of the population in O'Brien County (52.28%) live within a half-mile of a park. This indicator is relevant because access to outdoor recreation encourages physical activity and other healthy behaviors.

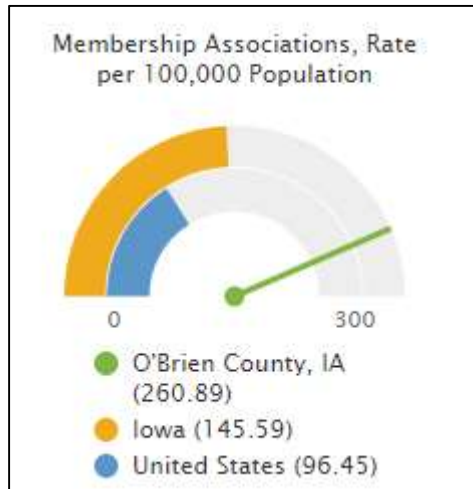
- **Benchmark:** A greater proportion of O'Brien County residents have park access than Iowa as a whole (44.91%).
- **Disparities:** A smaller percentage of residents in the western area of the county have close park access.
- **Data Source(s):** US Census Bureau, Decennial Census. ESRI Map Gallery. 2013.



Social associations

O'Brien County has 261 social establishments per 100,000 population. Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, political organizations, labor organizations, business organizations, and professional organizations.

- **Benchmark:** O'Brien County has a much higher rate of social establishments than the state (146).
- **Data Source(s):** US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2020.



Racial diversity (Theil Index)

This indicator measures the spatial distribution or evenness of population demographic groups in neighborhoods throughout the county. This indicator is presented as an index with values ranging between 0 and 1, with higher values indicating higher levels of segregation between neighborhoods.

- **Benchmark:** O'Brien County has lower levels of segregation between neighborhoods than the state average (0.4).
- **Data Source(s):** US Census Bureau, Decennial Census. University of Missouri, Center for Applied Research and Engagement Systems. 2020.

	Non-Hispanic White, Percent	Non-Hispanic Black, Percent	Non-Hispanic Asian, Percent	Non-Hispanic AI/AN, Percent	Hispanic or Latino, Percent	Diversity Index
O'Brien County, IA	90.83%	1.15%	0.57%	0.28%	0.08%	0.08
Iowa	85.85%	4.21%	2.44%	0.30%	0.18%	0.40
United States	60.01%	12.50%	6.14%	0.70%	0.19%	0.36

AIR AND WATER QUALITY

Air pollution

O'Brien County has an annual average of 7.4 micrograms per cubic meter of fine particulate matter measured in the air.

- **Benchmark:** The average density of particulate matter in the air is lower in O'Brien County than Iowa as a whole (8.2).
- **Data Source(s):** 2022 County Health Rankings, which utilizes 2019 figures from the Environmental Public Health Tracking Network.

Drinking water safety

This indicator reports presence or absence of one or more health-based violations in drinking water within community water systems that serve the community. No community water system in O'Brien

County reported a health-based drinking water violation.

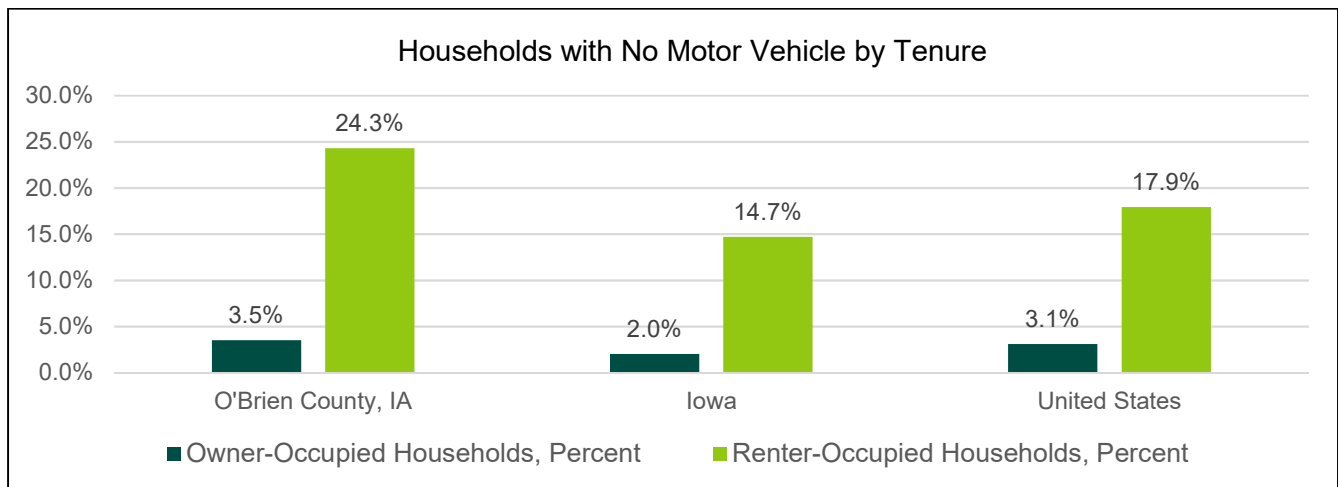
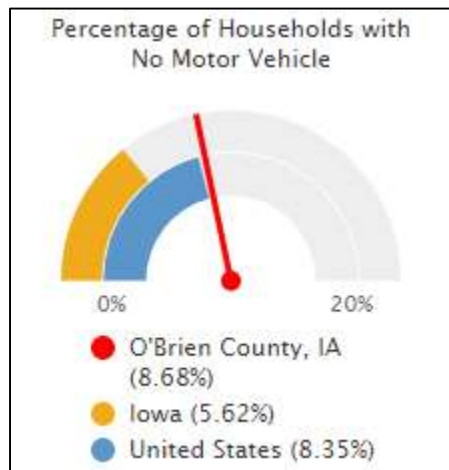
- **Data Source(s):** 2022 County Health Rankings, which utilizes figures from the 2020 Safe Drinking Water Information System (SDWIS).

HOUSING AND TRANSPORTATION

Households with no motor vehicle

Almost nine percent (8.68%) of households in O’Brien County do not have a motor vehicle.

- **Benchmark:** A higher percentage of households in O’Brien County are without a motor vehicle than the state percentage (5.62%).
- **Disparities:** Within the service area, there are significantly more renter-occupied households with no vehicle (24.29%) than owner-occupied households (3.52%).
- **Data Source(s):** US Census Bureau, 2017-2021 American Community Survey.

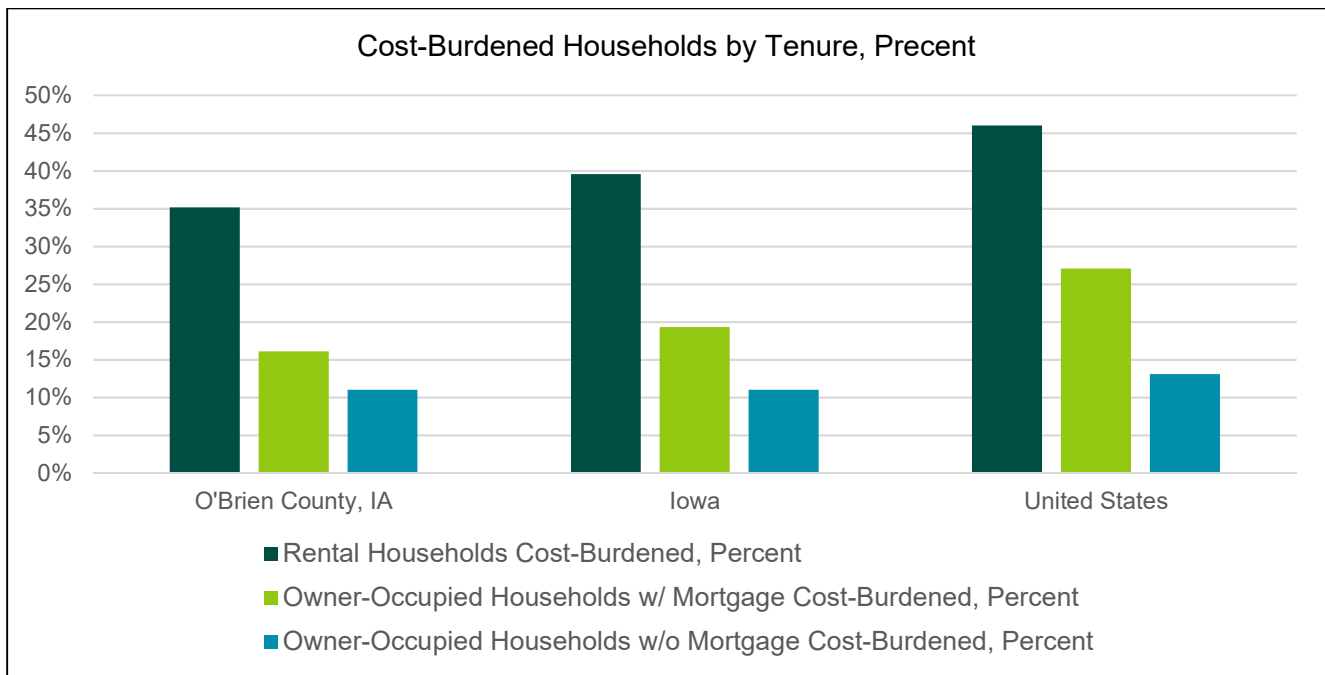
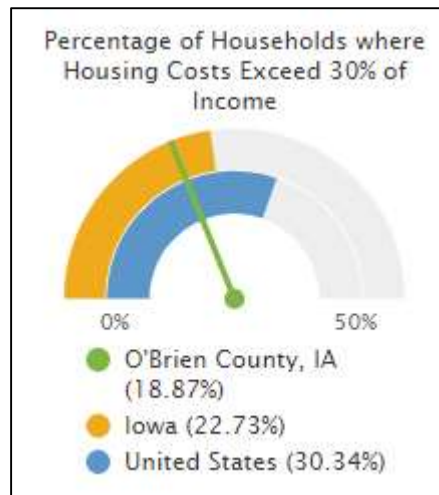


Housing costs

A total of 18.87% of households in O’Brien County have housing costs exceeding 30% of their total household income. This indicator provides information on the cost of monthly housing expenses for

owners and renters. The information offers a measure of housing affordability and excessive shelter costs.

- **Benchmark:** The percentage of cost-burdened households in O'Brien County is lower than the Iowa rate of 22.73%.
- **Disparities:** Rental households are more cost-burdened than owner-occupied households.
- **Data Source(s):** US Census Bureau, American Community Survey. 2017-21.



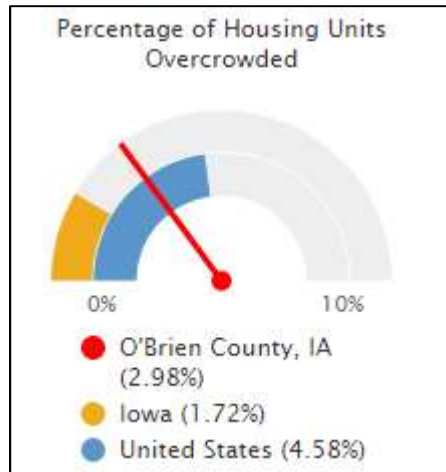
Overcrowded housing

A total of 2.98% of households in O'Brien County are overcrowded. Overcrowding is defined as more than one occupant per room.

- **Benchmark:** The percentage of overcrowded households in O'Brien County is higher than

Iowa (1.72%).

- **Disparities:** The western area of the county has higher rates of overcrowding (over 4%).
- **Data Source(s):** US Census Bureau, American Community Survey. 2017-21.



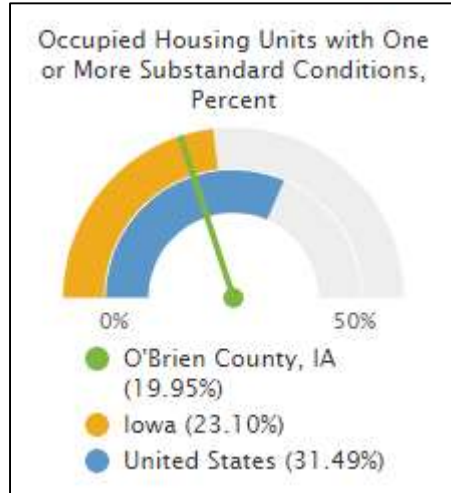
Substandard housing

This indicator reports the number and percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30%, and 5) gross rent as a percentage of household income greater than 30%. Selected conditions provide information in assessing the quality of the housing inventory and its occupants. This data is used to easily identify homes where the quality of living and housing can be considered substandard. Of the 5,670 total occupied housing units in the report area, 1,131 or 19.95% have one or more substandard conditions.

- **Benchmark:** The percentage of housing units with substandard conditions in O'Brien County is lower than the Iowa rate of 23.1%. The only condition where O'Brien County performs more poorly than the state is housing units lacking a complete kitchen. Almost seven percent of housing units in O'Brien County lack a complete kitchen compared to the Iowa average of

2.5%.

- **Data Source(s):** US Census Bureau, American Community Survey. 2017-21.

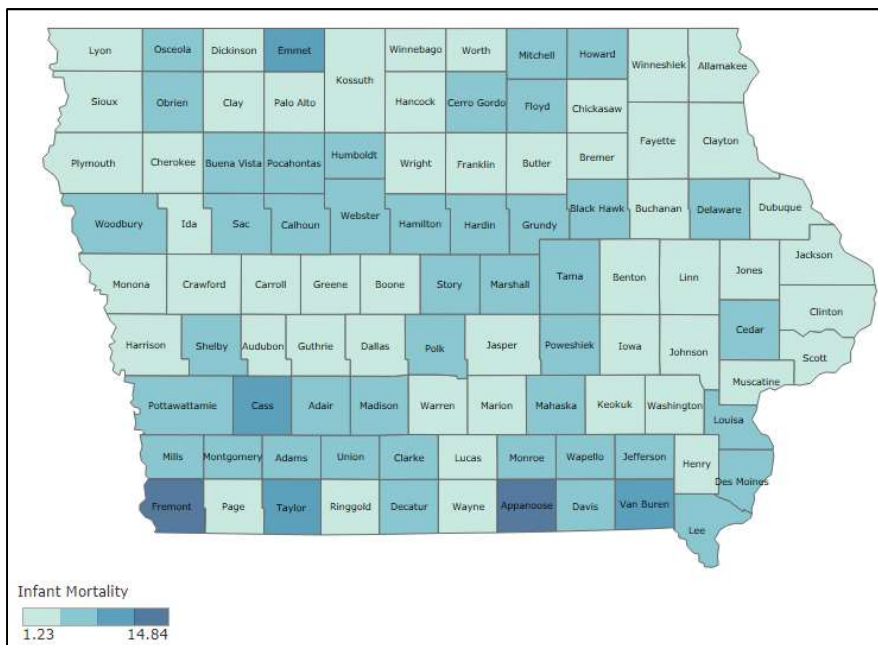


MATERNAL, INFANT, AND CHILD HEALTH

Infant mortality

O'Brien County has an infant mortality rate of 6.94 per 1,000 live births. The mortality rate is highest in infants between 28 days of age and one year of age.

- **Benchmark:** The infant mortality rate is higher in O'Brien County than the state of Iowa (4.65 per 1,000 live births).
- **Data Source(s):** Iowa Public Health Tracking Portal, Infant Mortality Data, 2017-2021.



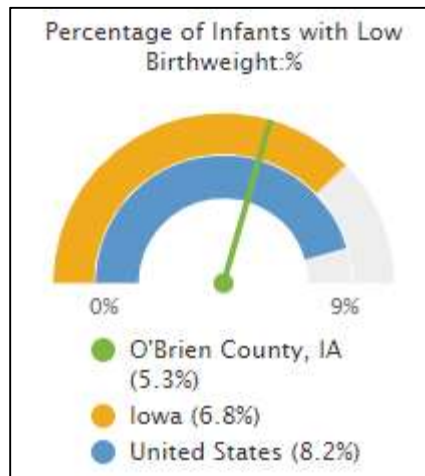
Indicator	Definition	O'Brien	Iowa
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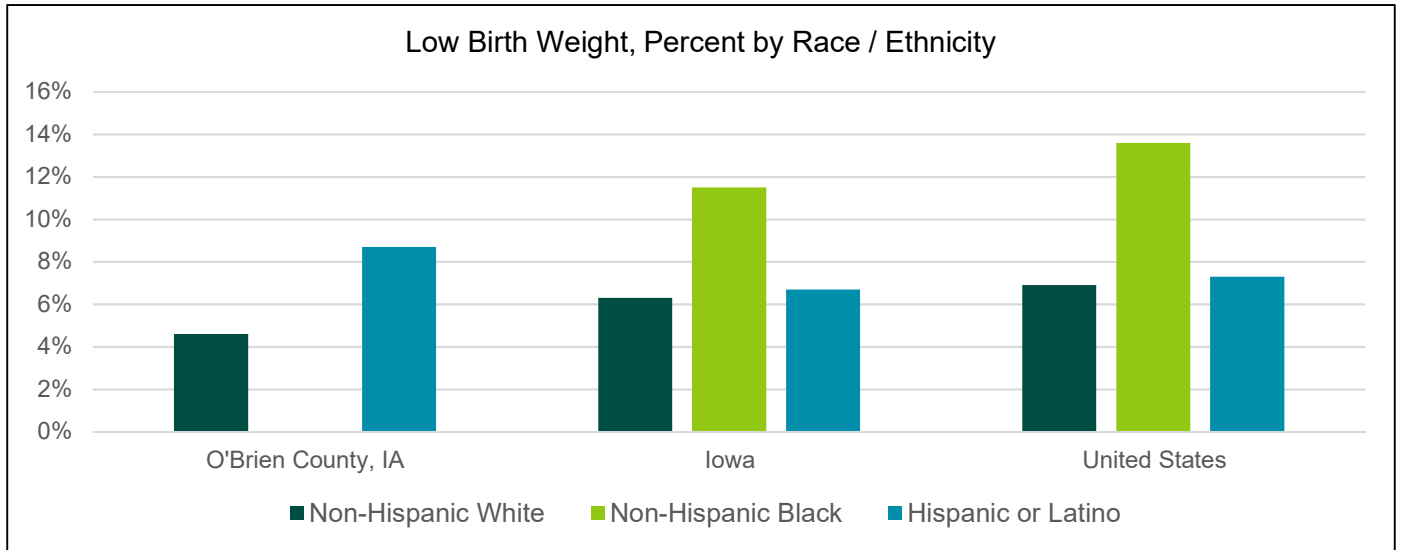
		County	
Infant mortality	Number of deaths in infants younger than one year of age per 1,000 live births	6.94	4.65
Perinatal mortality	Number of deaths in infants younger than seven days of age plus the number of fetal deaths at 28 weeks or greater gestation per 1,000 live births	2.31	2.20
Neonatal mortality	Number of deaths in infants younger than 28 days of age per 1,000 live births	2.31	2.87
Post neonatal mortality	Number of deaths in infants between 28 days of age and one year of age per 1,000 live births	4.62	1.77

Low birth weight

Five percent of infants born in O’Brien County had a low birth weight. Low birth weight is defined as less than 2,500 grams (approximately 5 lbs., 8 Oz.).

- **Benchmark:** The prevalence of infants born at a low birth weight is lower in O’Brien County than Iowa as a whole (6.8%).
- **Disparity:** A greater proportion of Hispanic or Latino infants in O’Brien County are born at low birth weights than Non-Hispanic White infants.
- **Data Source(s):** National Center for Health Statistics - Natality Files (2014-2020), used for the 2022 County Health Rankings.



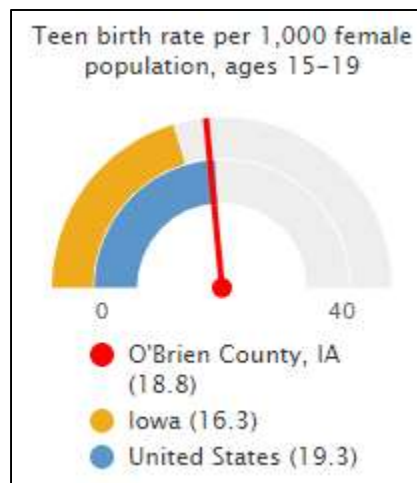


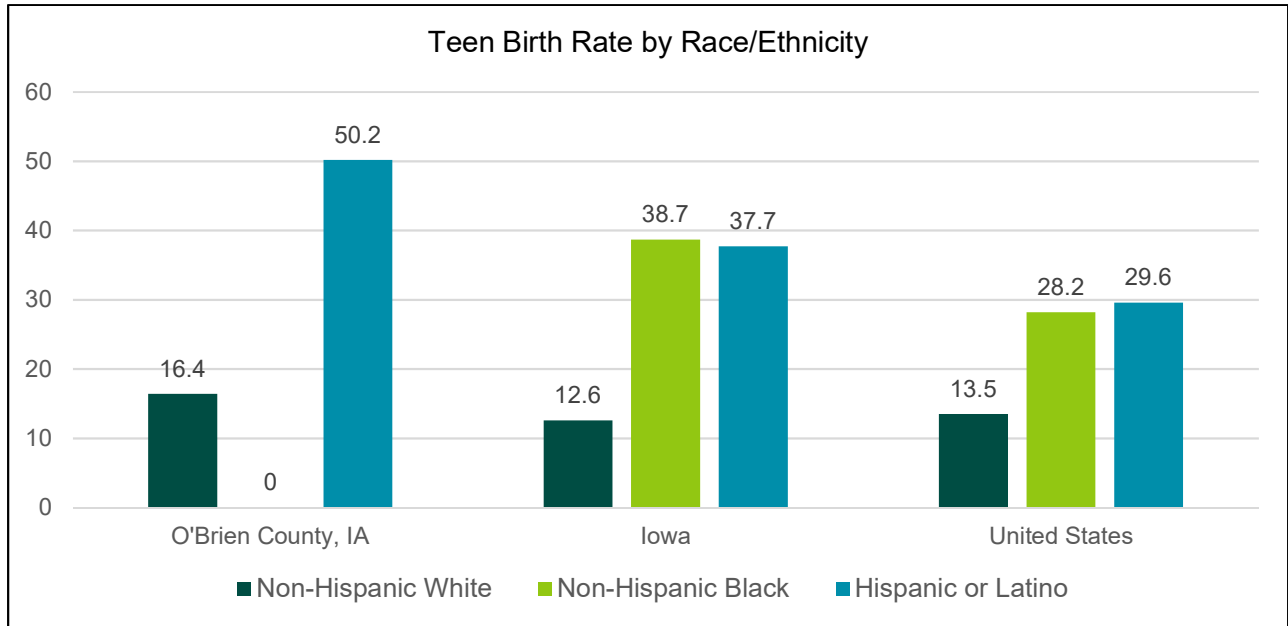
Note: Low birth weight data is not available for Non-Hispanic Black infants in O'Brien County.

Teen births

This indicator reports the seven-year average number of births per 1,000 female population age 15-19. In O'Brien County, the teen birth rate is 18.8 per 1,000.

- **Benchmark:** The teen birth rate in O'Brien County is higher than the state's teen birth rate of 16.3.
- **Disparities:** The teen birth rate among Hispanic or Latino females (50.2) is much higher than Non-Hispanic White Females (16.4).
- **Data Source(s):** National Center for Health Statistics - Natality files (2014-2020).



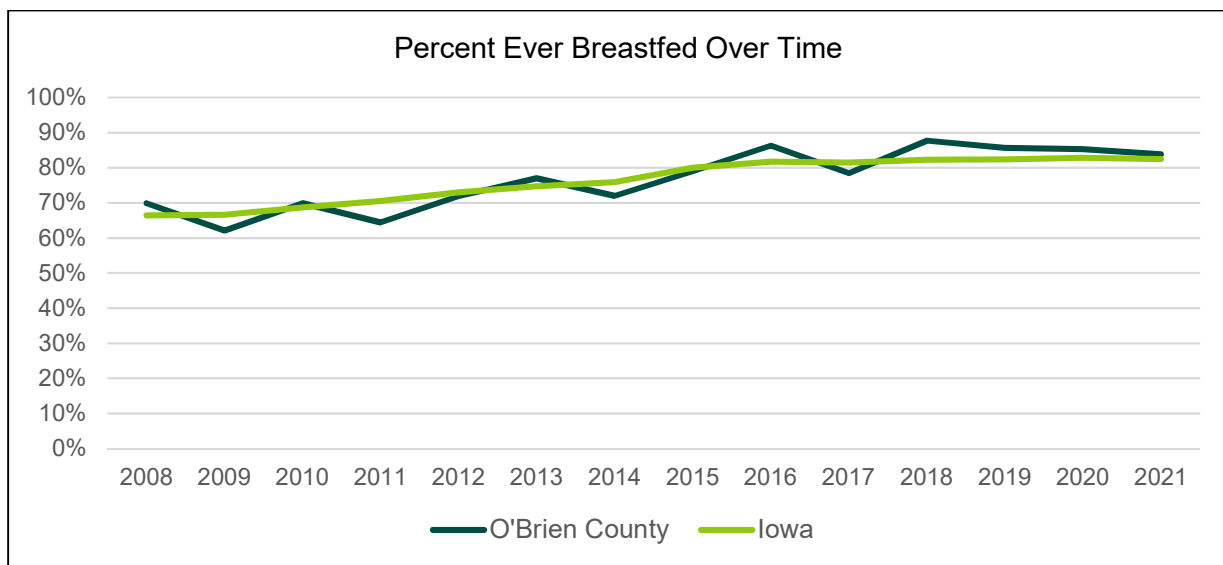


Note: Data for this indicator is not available for the Non-Hispanic Black population in O'Brien County.

Infants ever breastfed

The breastfeeding initiation rate in O'Brien County was 84% in 2021. This indicator is defined as the percentage of births where breastfeeding was initiated prior to hospital discharge for the delivery.

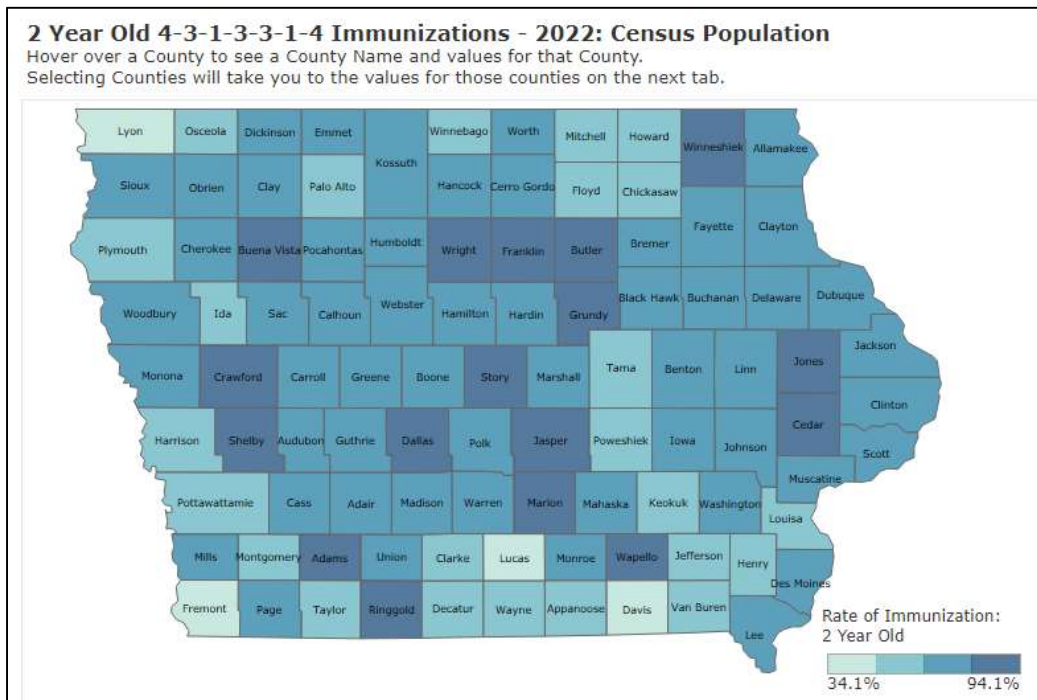
- **Benchmark:** O'Brien County has a slightly higher breastfeeding initiation rate than the state as a whole (83%).
- **Data Source(s):** Iowa Public Health Tracking Portal. Infants Ever Breastfed. 2021.



Child immunization

Nearly 70% (68.6%) of children in O'Brien County received the recommended doses of the 4:3:1:3:3:1:4 series by age 24 months.

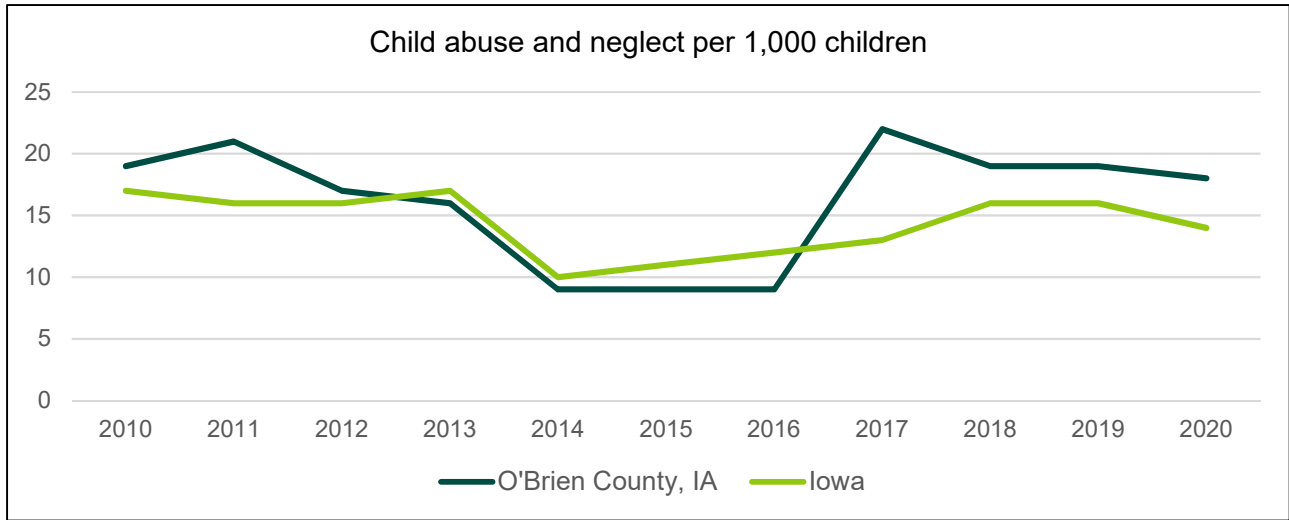
- **Benchmark:** The immunization rate in O'Brien County is slightly lower than the Iowa vaccination rate (70.1%).
- **Data Source(s):** Iowa Public Health Tracking Portal. Children: Immunization Data for 2 Year-Old. 2022.



Child abuse

O'Brien County had a Child Abuse rate of 18.4 per 1,000 children in 2020.

- **Benchmark:** The child abuse rate in O'Brien County is higher than the statewide rate of 14.5.
- **Data Source(s):** Kids Count Data Center. Child abuse and neglect in Iowa. 2020.

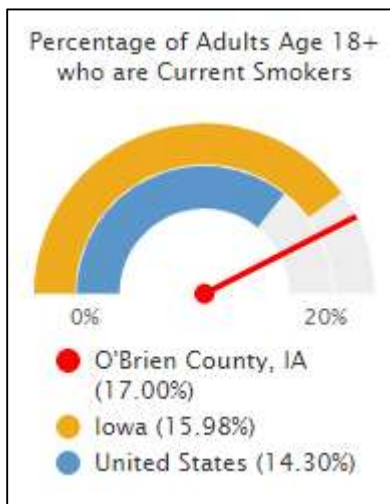


HEALTH BEHAVIORS AND RISK FACTORS

Current smokers

Within O'Brien County, 17.00% of adults report having smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days.

- **Benchmark:** The proportion of adults who are current smokers in O'Brien County is higher than the state (15.98%).
- **Data Source(s):** Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. 2020.



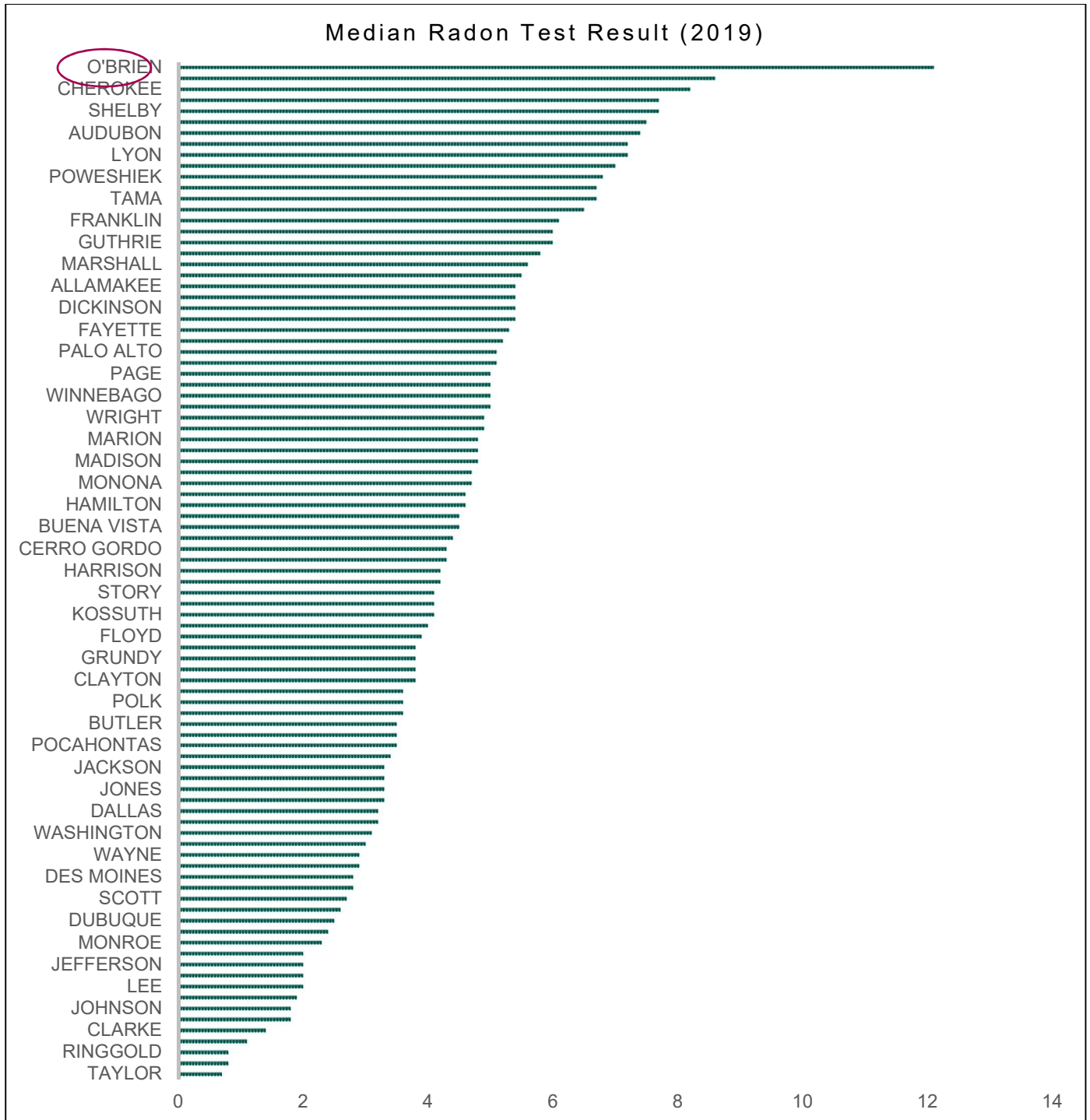
Radon exposure

Iowa has the highest average indoor concentration of radon. The median radon result for O'Brien County is 12.1 and the mean is 11.2. The data includes radon tests conducted in 2019 in private Iowa residences or during real estate transactions.

- **Benchmark:** Of the 93 Iowa counties included in the data file, O'Brien County had the

highest median of test results and the fourth highest mean of test results.

- **Target:** The Environmental Protection Agency recommends radon reduction in homes that measure at or above 4.0 pCi/L.



Physical inactivity

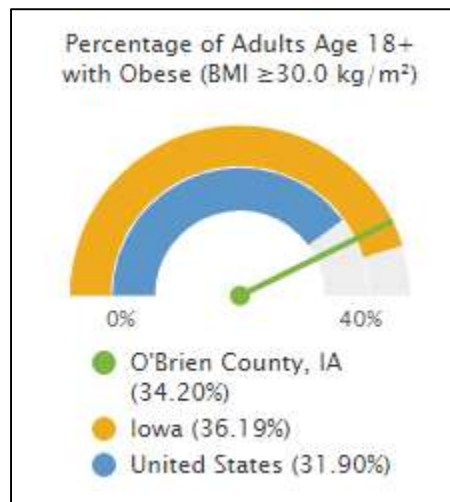
In O'Brien County, 29% of adults reported no leisure-time physical activity outside of work (age-adjusted).

- **Benchmark:** O'Brien County residents are less active than their Iowa peers (26%).
- **Data Source(s):** County Health Rankings. 2019.

Obesity

A total of 34.2% of O'Brien County adults are obese, defined as having a BMI of ≥ 30.0 kg/m².

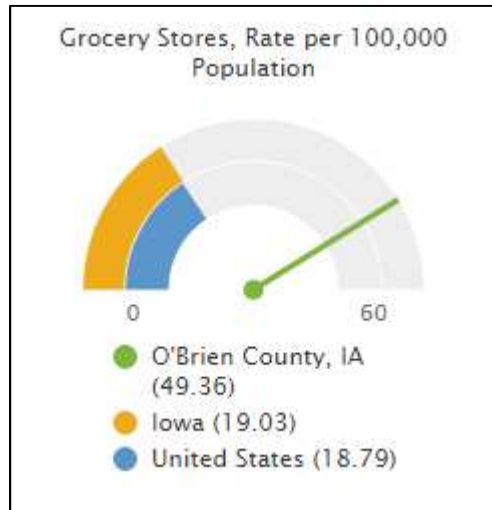
- **Benchmark:** Obesity is slightly lower in O'Brien County than the state (36.19%).
- **Data Source(s):** Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. 2020.



Grocery stores and supermarkets

O'Brien County has 49 grocery establishments per 100,000 population. Healthy dietary behaviors are supported by access to healthy foods, and grocery stores are a major provider of these foods. Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Delicatessen-type establishments are also included. Convenience stores and large general merchandise stores that also retail food, such as supercenters and warehouse club stores, are excluded.

- **Benchmark:** O'Brien County residents have better access to grocery establishments than Iowans as a whole (19.03 per 100,000).
- **Data Source(s):** US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2020.



Excessive drinking

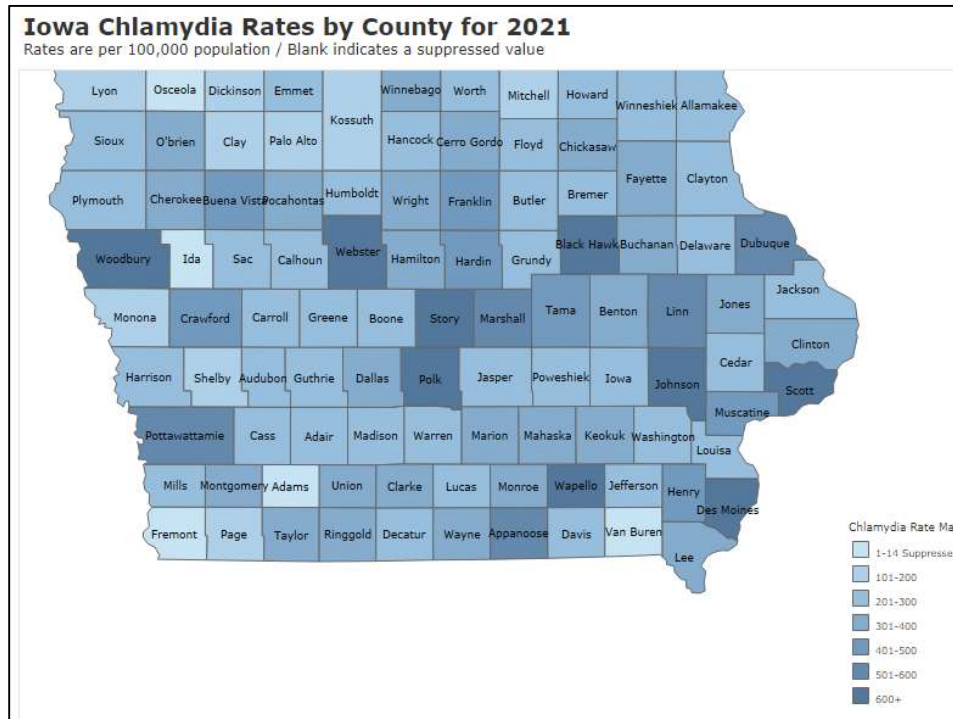
Nearly a quarter (23%) of O'Brien County adults report binge or heavy drinking.

- **Benchmark:** O'Brien County residents report slightly less binge/heavy drinking their Iowa peers (25%).
- **Data Source(s):** County Health Rankings. 2019.

Chlamydia

In O'Brien County, 320 new cases of chlamydia were diagnosed per 100,000 population in 2021.

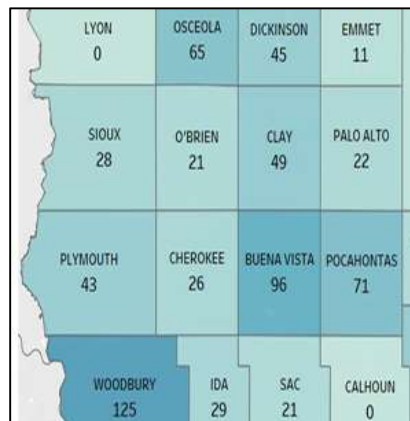
- **Benchmark:** The rate of chlamydia diagnosis in O'Brien County is lower than the state rate (495 per 100,000 population).
- **Data Source(s):** Iowa Public Health Tracking Portal. Chlamydia Data. 2021.



HIV diagnosis

The prevalence of HIV disease in O'Brien County is 21 per 100,000 residents.

- **Benchmark:** The prevalence in O'Brien County is much lower than the state (96 per 100,000 residents).
- **Data Source(s):** State of Iowa Department of Health and Human Services. State of Iowa HIV Disease End-of-Year 2021 Surveillance Report.

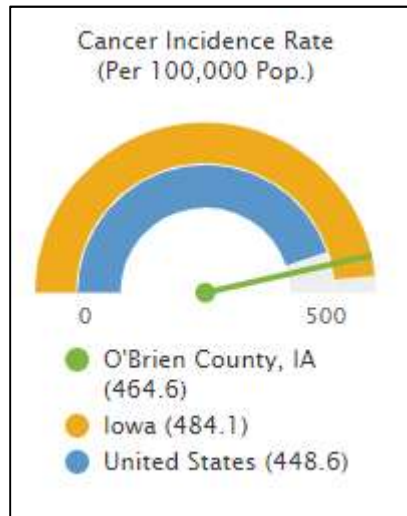


CHRONIC DISEASES

Cancer incidence

The age-adjusted cancer incidence rate in O'Brien County is 464.6 per 100,000 population. The top five most commonly diagnosed cancers in O'Brien County include prostate cancer, breast cancer, lung & bronchus cancer, colon & rectal cancer, and bladder cancer.

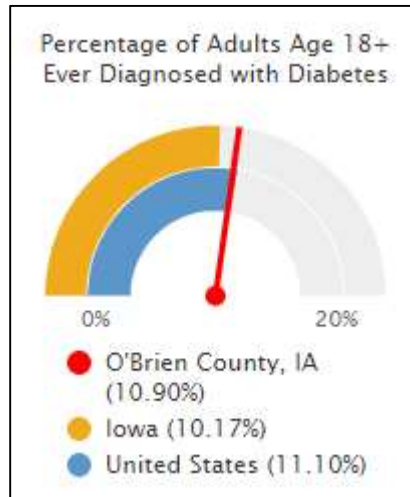
- **Benchmark:** The cancer incidence rate in O'Brien County is lower than the state rate (484.1).
- **Data Source(s):** State Cancer Profiles. 2014-18.



Diabetes

Nearly 11% percent of adults in O'Brien County have been told by a health care professional that they have diabetes (excludes gestational diabetes).

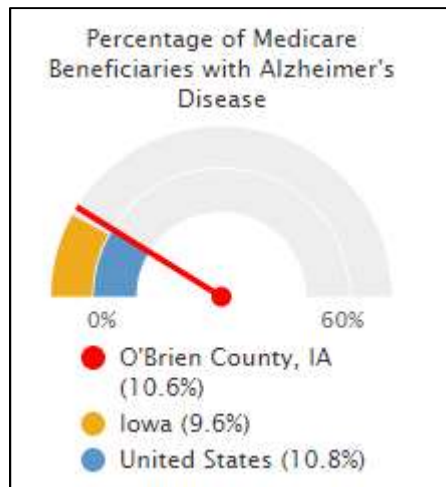
- **Benchmark:** The percentage of adults with diabetes in O'Brien County (10.9%) is slightly higher than state as a whole (10.17%).
- **Data Source(s):** Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System.



Alzheimer's disease

Nearly 11% percent of Medicare Fee-For-Service beneficiaries in O'Brien County are living with Alzheimer's disease.

- **Benchmark:** The percentage of beneficiaries with Alzheimer's disease in O'Brien County is slightly higher than the state as a whole (9.6%).
- **Data Source(s):** Centers for Medicare & Medicaid Services, Centers for Medicare & Medicaid Services - Chronic Conditions. 2018.

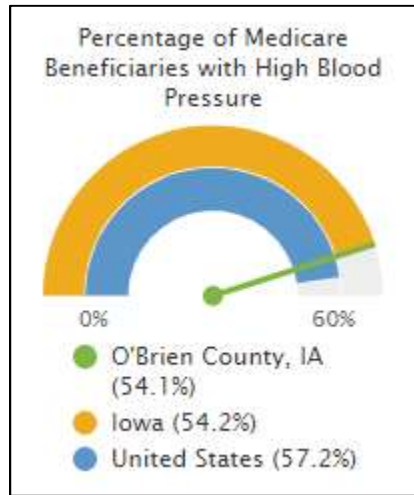


High blood pressure

Over half (54.1%) of Medicare Fee-For-Service beneficiaries in O'Brien County have hypertension (high blood pressure).

- **Benchmark:** The percentage of Medicare Fee-For-Service beneficiaries with hypertension in O'Brien County (54.1%) is similar to the state as a whole (54.2%).
- **Data Source(s):** Centers for Medicare & Medicaid Services, Centers for Medicare & Medicaid

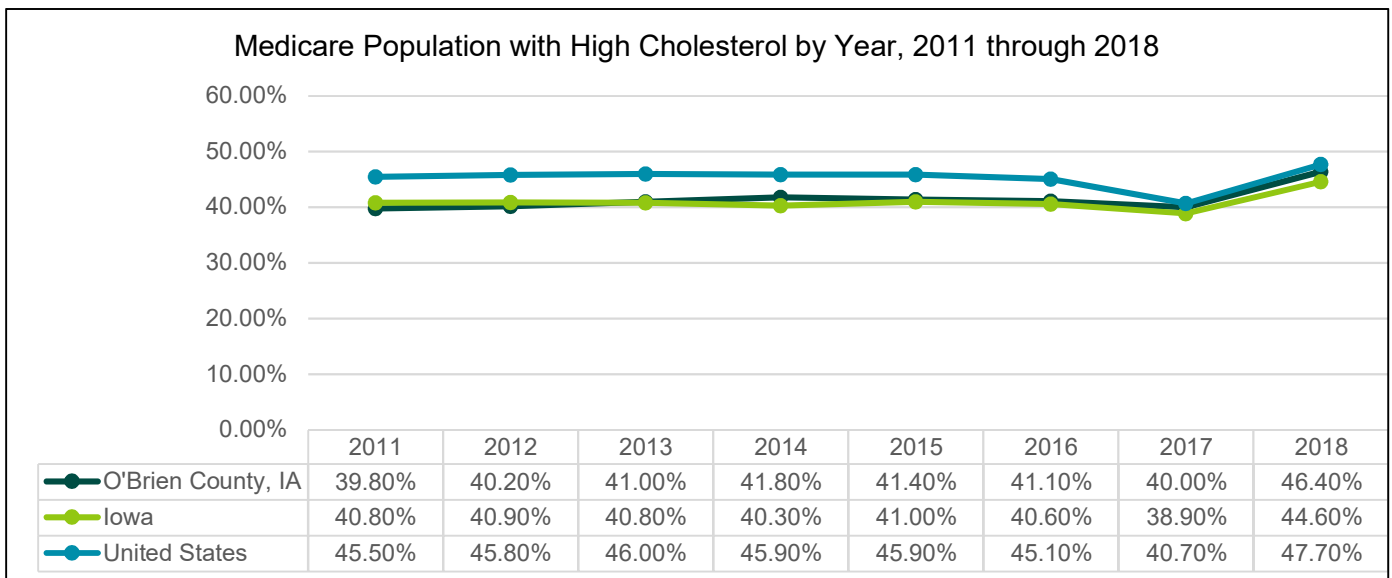
Services - Chronic Conditions. 2018.



High cholesterol

Almost half (46.4%) of Medicare Fee-For-Service beneficiaries in O'Brien County have hyperlipidemia (high cholesterol).

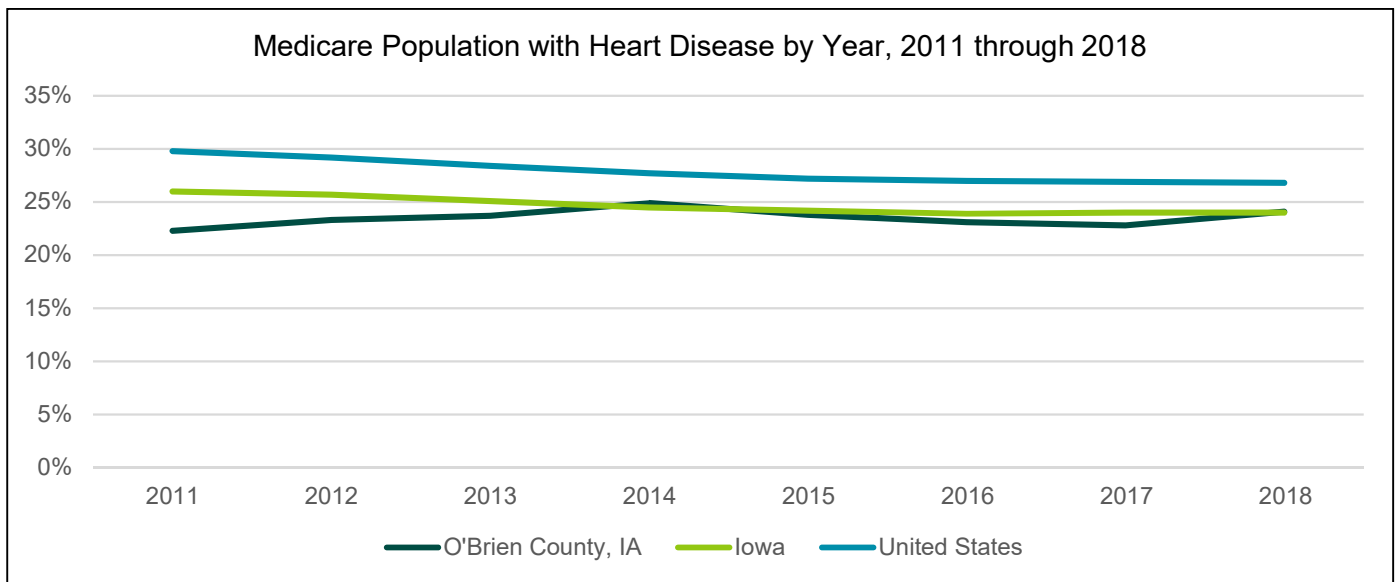
- **Benchmark:** The percentage of Medicare Fee-For-Service beneficiaries with hyperlipidemia in O'Brien County is higher than the state as a whole (44.6%).
- **Data Source(s):** Centers for Medicare & Medicaid Services, Centers for Medicare & Medicaid Services - Chronic Conditions. 2018.



Heart disease

Almost a quarter (24.1%) of Medicare Fee-For-Service beneficiaries in O'Brien County are living with Ischemic Heart Disease.

- **Benchmark:** The percentage of Medicare Fee-For-Service beneficiaries with ischemic heart disease in O'Brien County is similar to Iowa as a whole (24.0%).
- **Data Source(s):** Centers for Medicare & Medicaid Services, Centers for Medicare & Medicaid Services - Chronic Conditions. 2018.

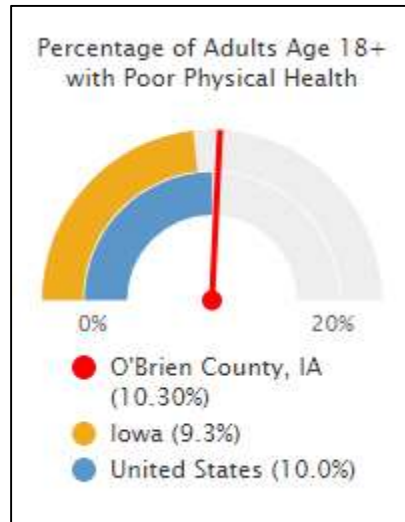


QUALITY OF LIFE

Poor physical health days

Within O'Brien County, 10.3% of adults reported having 14 or more days during the past 30 days during which their physical health was not good.

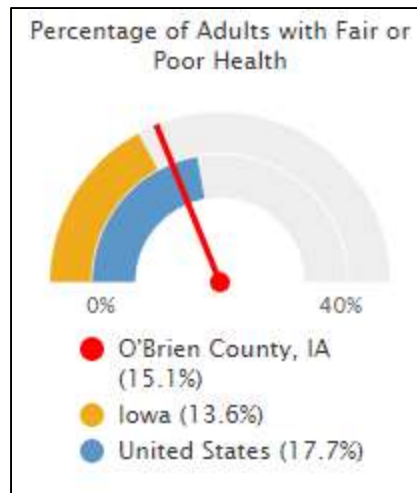
- **Benchmark:** A larger percentage of adults in O'Brien County (10.3%) reported poor physical health days than Iowa (9.3%).
- **Data Source(s):** Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. 2020.



Poor or fair health

Within O'Brien County, 15.1% of adults report having poor or fair health.

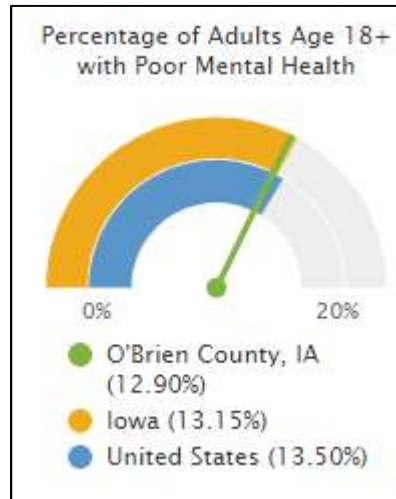
- **Benchmark:** The percentage of adults reporting poor or fair health in O'Brien County is slightly higher than the state rate (13.6%).
- **Data Source(s):** Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. 2019.



Poor mental health

Within O'Brien County, 12.90% of adults reported poor mental health in the past month.

- **Benchmark:** The percentage of adults reporting poor mental health in O'Brien County is slightly lower than the state rate (13.15%).
- **Data Source(s):** Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. 2020.

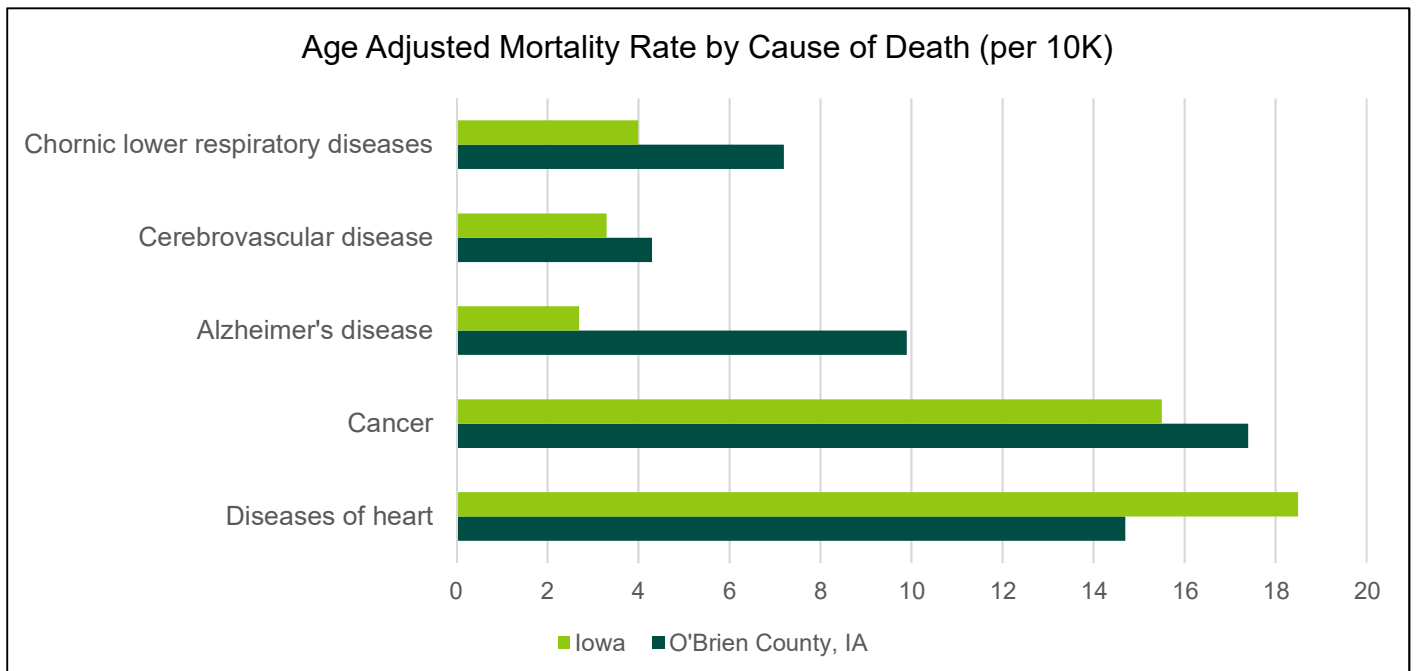


LIFE EXPECTANCY

Leading cause of death

The leading cause of death in O'Brien County is malignant neoplasms (cancer) at 17.4 per 10,000 followed by disease of heart at 14.7 per 10,000.

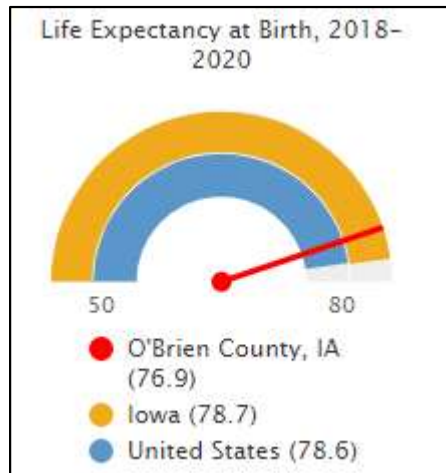
- **Benchmark:** The age-adjusted death rate due to Alzheimer's disease is much higher in O'Brien County at 9.9 per 10,000 than the Iowa rate of 2.7 per 10,000. The age-adjusted death rate due to chronic lower respiratory diseases is also higher in O'Brien County (7.2 per 10,000) than the state rate (4.0 per 10,000).
- **Data Source(s):** Iowa Public Health Tracking Tool. 2021.



Life expectancy

The average age-adjusted life expectancy at birth in O'Brien County is 76.9 years.

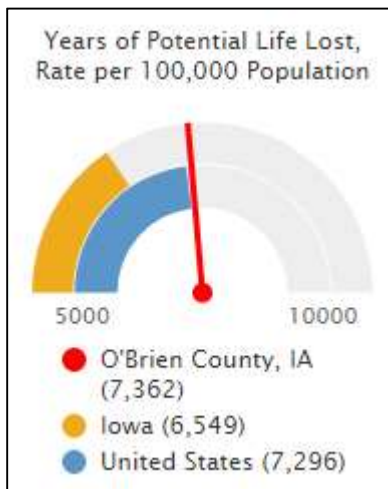
- **Benchmark:** The life expectancy in O'Brien County (76.9) is lower than the state life expectancy (78.7 years).
- **Data Source(s):** National Center for Health Statistics - Mortality Files (2018-2020), used for the 2022 County Health Rankings.

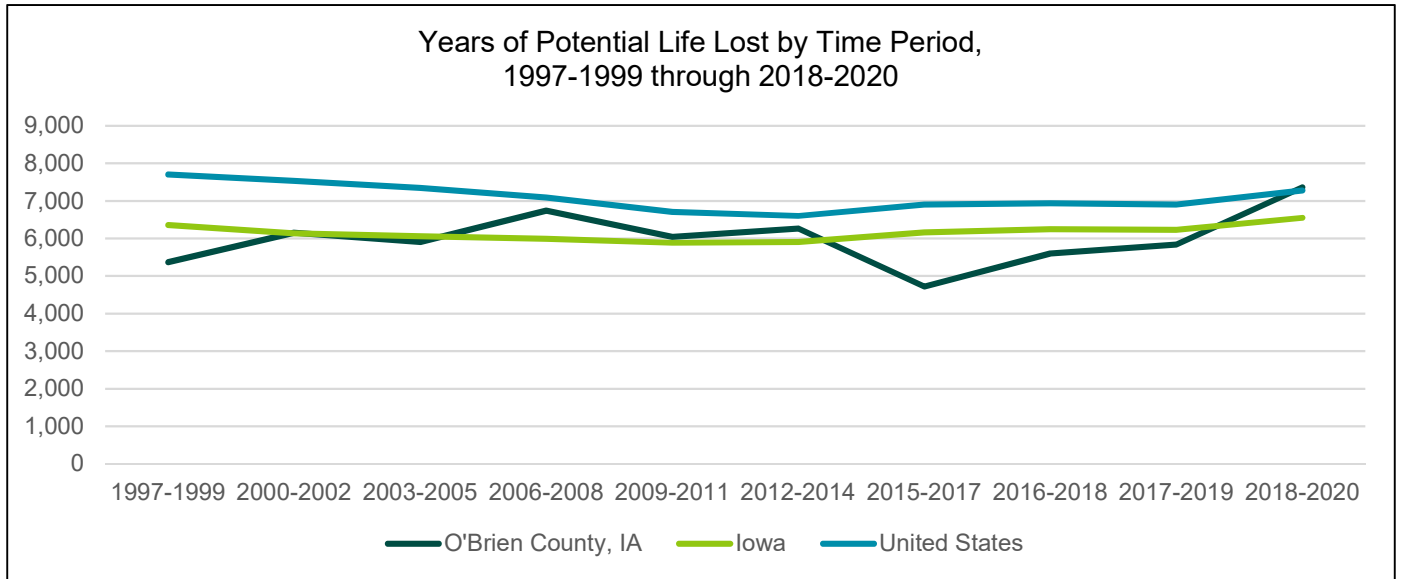


Years of potential life lost

Within O'Brien County, there were a total of 187 premature deaths from 2018-2020. This represents an age-adjusted rate of 7,362 years potential life lost before age 75 per every 100,000 total population. This indicator is relevant because a measure of premature death can provide a unique and comprehensive look at overall health status.

- **Benchmark:** The rate of years of potential life lost in O'Brien County is higher than the state rate (6,549).
- **Data Source(s):** Centers for Disease Control and Prevention, CDC - National Vital Statistics System.

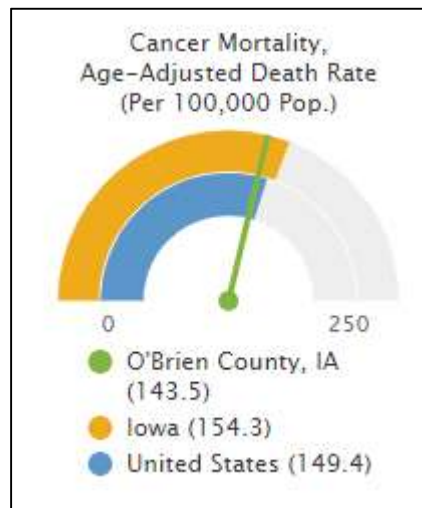




Cancer mortality

The age-adjusted death rate due to cancer in O'Brien County is 143.5 per every 100,000 population.

- **Benchmark:** The cancer mortality rate is lower in O'Brien County than the state (154.3).
- **Data Source(s):** Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2016-2020.

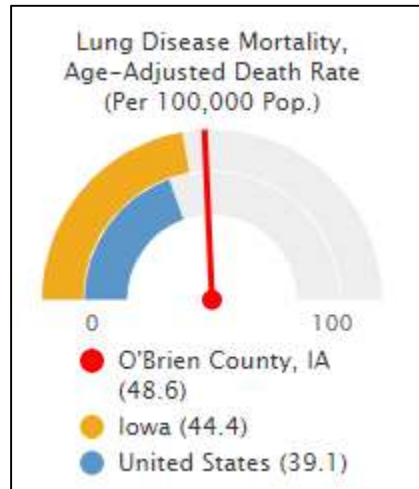


Lung disease mortality

The age-adjusted death rate due to lung disease in O'Brien County is 48.6 per every 100,000 population.

- **Benchmark:** The lung disease mortality rate is higher in O'Brien County than the state (44.4 per 100,000).

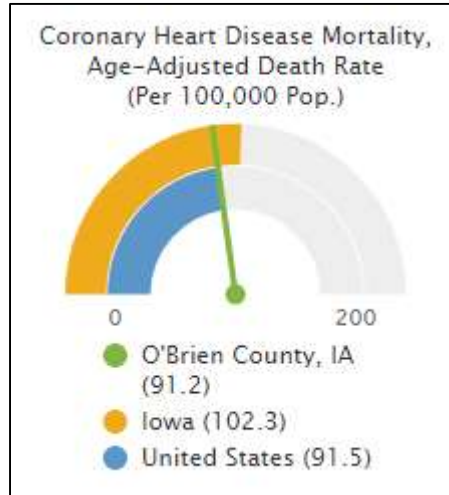
- **Disparity:** Lung disease mortality rate is much higher among males (73.9) than females (31.3) in O’Brien County.
- **Data Source(s):** Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2016-2020.



Coronary heart disease mortality

The age-adjusted death rate due to coronary heart disease in O’Brien County is 91.2 per every 100,000 population.

- **Benchmark:** The heart disease mortality rate is lower in O’Brien County than the state (102.3).
- **Data Source(s):** Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER. 2016-2020.



O'Brien County 2023 Community Survey

Every three years MercyOne Primghar Medical Center, in collaboration with community and public health partners, completes a Community Health Needs Assessment (CHNA) to evaluate the changing health and social needs of the community we serve. The purpose of this survey is to collect your input on the health and quality of life in O'Brien County. Once complete, the CHNA will be shared publicly on our website and used to develop a health improvement plan.

You must be 18 years of age or older to participate in this survey.

Please email questions to communityhealth@mercyhealth.com.

Thank you for your time and feedback.

1. What zip code do you live in? _____
2. What is your age? _____
3. What is your gender?
 Male Female Other
4. Are you of Hispanic, Latino, or Spanish origin?
 No Yes
5. What is your race? *(Check all that apply)*
 White or Caucasian
 Black or African American
 American Indian/Alaskan Native
 Asian
 Native Hawaiian or Other Pacific Islander
 Other: _____
6. Do you speak a language other than English at home?
 No Yes
7. What kind of healthcare coverage do you have? *(Check all that apply)*
 Through employer Alaska Native, Indian Health Service, Tribal Health Services
 Privately purchased Dental
 Medicare Vision
 Medicaid or other state program I do not have healthcare coverage
 TRICARE, VA, or Military Other: _____

8. What is your household income?

- \$0 to \$15,000
- \$16,000 to \$24,999
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$100,000
- Over \$100,000

9. What is the highest level of school you have completed?

- Less than high school degree
- High school graduate or GED
- Some college
- Associate degree
- Bachelor degree
- Graduate degree

10. What is your current work situation?

- Full time work
- Part time or temporary work
- Unemployed and seeking work
- Otherwise unemployed but not seeking work (ex. retired, disabled, student, or unpaid primary caregiver)

11. How would you rate your overall health?

- Excellent
- Very good
- Good
- Fair
- Poor

12. What is your biggest health concern?

13. Would you say that you are physically more active, less active, or about as active as other persons your age?

- More active
- Less active
- About as active

14. In a usual week, how many days do you eat at least 2 to 3 servings of vegetables and at least 2 servings of fruit in a day?

- 1
- 2
- 3
- 4
- 5
- 6
- 7

15. How would you rate your overall mental health, which includes stress, depression, and problems with emotions?

- Excellent
- Very good
- Good
- Fair
- Poor

16. In the last 12 months, was there a time when you needed to see a doctor but could not?

- Yes
- No
- Don't know/Not sure

17. **If yes**, what were the reasons that you could not see a doctor?

- Afraid or do not like going to the doctor
- Could not afford the cost
- Doctor's office was not open at a convenient time
- Doctor's office was too far away
- Difficulty filling out forms
- I did not have childcare
- I did not have transportation
- I did not think anything serious was wrong/expected problem to go away
- Long wait time to schedule appointment
- Too busy
- Unable to take time off from work
- Other: _____

18. In the last 12 months, was there a time when you needed dental care but could not get it?

- Yes
- No
- Don't know/Not sure

19. **If yes**, what were the reasons that you could not get the dental care you needed?

- Afraid or do not like going to the dentist
- Could not afford the cost
- Dental office was not open at a convenient time
- Dental office was too far away
- Difficulty filling out forms
- I did not have childcare
- I did not have transportation
- I did not think anything serious was wrong/expected problem to go away
- Long wait time to schedule appointment
- Too busy
- Unable to take time off from work
- Other: _____

20. Are you experiencing any of the following issues with your current living arrangement? *(check all that apply)*

- Bugs (e.g. roaches, bed bugs or rodents)
- General cleanliness
- Landlord disputes
- Lead paint
- Unsafe drinking water
- Nonfunctioning appliances (stove, oven, refrigerator)
- Unreliable utilities (e.g. electricity, gas, heat)
- Leaks
- Medical condition that makes it difficult to live in current home
- Mold or dampness
- Overcrowding
- Threat of eviction
- Violence/safety concerns
- Other: _____

21. Within the past 12 months, have you or anyone on your household had trouble paying for any of the following? *(check all that apply)*

- Childcare
- Transportation
- Food
- Housing
- Medication
- Utilities
- None of these

22. How often do you see or talk to people that you care about and feel close to? (For example, talking to friends on the phone, visiting friends and family, going to church or club meetings)

- Less than once a week
- 1-2 days a week
- 3-4 days a week
- 5 or more days a week

23. In the past year, have you or any family members you live with been unable to get childcare when it was really needed?

- Yes No Not applicable

24. Are you afraid you might be hurt by violence in your neighborhood?

- Yes No

25. Have you ever felt discriminated against in any of the following ways because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, or other characteristics? (*check all that apply*)

- I was discouraged by a teacher or advisor from seeking higher education
- I was denied a scholarship
- I was not hired for a job
- I was not given a promotion
- I was fired
- I was prevented from renting or buying a home in the neighborhood I wanted
- I was prevented from remaining in a neighborhood because neighbors made life so uncomfortable
- I was hassled by the police
- I was denied a bank loan
- I was denied or provided inferior medical care
- I was denied or provided inferior service by a plumber, care mechanic, or other service provider
- No
- Other: _____

26. How would you rate the overall health of our community?

- Excellent
- Very good
- Good
- Fair
- Poor

27. What are the **3** most important health concerns in our community? (Which 3 concerns have the greatest impact on overall community health)

- | | |
|--|---|
| <input type="checkbox"/> Aging Issues (ex. hearing loss, cataracts, dementia) | <input type="checkbox"/> Firearm Related Injuries |
| <input type="checkbox"/> Cancers | <input type="checkbox"/> Heart Disease & Stroke |
| <input type="checkbox"/> Child Abuse/Neglect | <input type="checkbox"/> High Blood Pressure |
| <input type="checkbox"/> Dental Problems | <input type="checkbox"/> High Blood Pressure |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Maternal Health |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Infectious Diseases, such as hepatitis or tuberculosis | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Substance use & misuse (alcohol or other drugs) | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Sexually Transmitted Diseases (STDs) Including HIV/Aids | <input type="checkbox"/> Violence |
| <input type="checkbox"/> Other: _____ | |

28. Our community has a **growing** problem with substance use and misuse.

- Strongly agree
- Agree
- Neutral
- Somewhat disagree
- Strongly disagree

29. Is this community a good place to raise children? (5 is the most positive)

- 1 2 3 4 5

30. Is this community a good place to grow old? (5 is the most positive)

- 1 2 3 4 5

31. What are the **3** greatest STRENGTHS of our community that help residents maintain or improve their overall health?

- | | |
|---|--|
| <input type="checkbox"/> Access to Affordable Healthy Foods | <input type="checkbox"/> Parks & Recreation |
| <input type="checkbox"/> Access to Alcohol/Drug Treatment | <input type="checkbox"/> Police, Fire, and Rescue Services |
| <input type="checkbox"/> Access to Child Care | <input type="checkbox"/> Prepared for Emergencies |
| <input type="checkbox"/> Access to Healthcare | <input type="checkbox"/> Programs for Youth Outside of School |
| <input type="checkbox"/> Affordable Housing | <input type="checkbox"/> Public Transportation |
| <input type="checkbox"/> Arts and Cultural Events | <input type="checkbox"/> Religious/ Spiritual Values |
| <input type="checkbox"/> Early Childhood Services | <input type="checkbox"/> Respect toward Different Cultures/Races |
| <input type="checkbox"/> Good Jobs & Healthy Economy | <input type="checkbox"/> Senior Services |
| <input type="checkbox"/> Good Schools | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Homeless Services | <input type="checkbox"/> Walkable, Bikeable Community |
| <input type="checkbox"/> Other: _____ | |

32. Are there any additional services or resources that you think should be available in our community to help residents maintain or improve their overall health?