

South East Washington Community Health Report 2018

Asotin, Columbia, and Garfield Counties

Updated 07/08/19



ACKNOWLEDGEMENTS & PARTNERS

Greater Columbia Accountable Communities of Health
Community Council
Providence St. Mary's Medical Center

| | |
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| Aging & Long Term Care | Providence St. Mary Medical Center |
| Alzheimer's Association | Shakespeare Walla Walla |
| Baker Boyer Bank | SonBridge Community Center |
| Blue Mountain Action Council | The Health Center |
| Blue Mountain Land Trust | Umatilla County Public Health |
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| Catholic Charities | Visit Walla Walla |
| Children's Home Society | Walla Walla Community College |
| City of College Place | Walla Walla County |
| City of Milton-Freewater | Walla Walla Police Department |
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| Columbia County Public Health | Walla Walla Public Schools |
| Community Resilience Initiative | Walla Walla University |
| Comprehensive Healthcare | Walla Walla Valley Chamber of Commerce |
| Craft3 | Walla Walla Valley Metropolitan Planning Organization |
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Social Determinants of Health

in Southeast Washington

Health
Outcomes

- Cardiovascular Disease
- Cancer
- Diabetes

Risk
Factors

- Substance Use
- Mental Health
- Communicable Disease
- Weight Status
- Teen Pregnancy
- Environmental Factors

Social
Determinants

- Education
- Income
- Housing
- Social Context
- Community Engagement
- Access to Care

GENETICS

DEMOGRAPHICS

| People | Asotin | Columbia | Garfield | State |
|-----------------|--------|----------|----------|----------|
| Population: | 22,535 | 4,407 | 2,210 | 7,407,74 |
| Percent Female: | 51.3% | 50.8% | 51.1% | 50.0% |
| Median Age: | 44.7 | 51.6 | 46.7 | 37.7 |
| Under 18: | 20.5% | 17.8% | 20.2% | 22.4% |
| Over 65: | 22.6% | 28.3% | 26.2% | 14.8% |

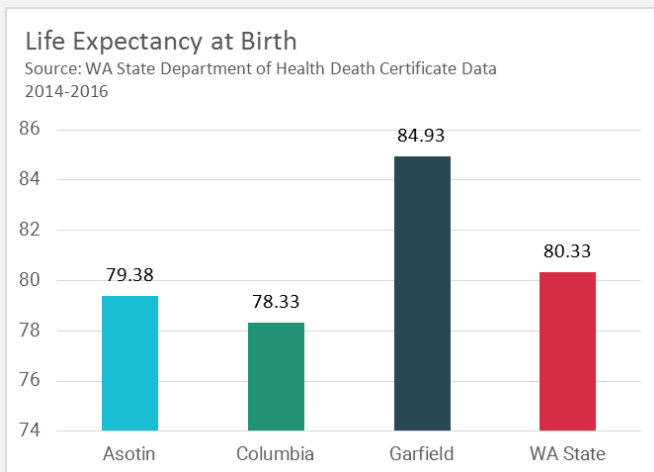
Source: U.S. Census Bureau Quickfacts 2017

| Ethnicity | Asotin | Columbia | Garfield | State |
|------------------|--------|----------|----------|-------|
| White: | 90.5% | 93.6% | 89.8% | 69.5% |
| Black: | 0.7% | 0.8% | 0.1% | 4.1% |
| AI/AN: | 1.8% | 1.7% | 0.6% | 1.9% |
| Asian/P.I. | 1.1% | 1.4% | 2.2% | 9.4% |
| Hispanic/Latino: | 4.0% | 7.5% | 5.7% | 12.4% |

Source: U.S. Census Bureau Quickfacts 2017

Life Expectancy

The life expectancy was just under 80 years in Asotin and Columbia Counties which is similar to the average for the state of Washington and has increased over time. The life expectancy at birth in Garfield county was nearly 85 years, which was higher than the state average.



Social Determinants of Health



Healthy People 2020 defines [Social Determinants of Health](#) as conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as “place.” In addition to the more material attributes of “place,” the patterns of social engagement and sense of security and well-being are also affected by where people live. Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.

For this report, indicators for education, income, housing, social context, community engagement and access to care have been selected to give an overview of social determinants of health affecting our diverse populations and where interventions have potential for equitable outcomes.

EDUCATION

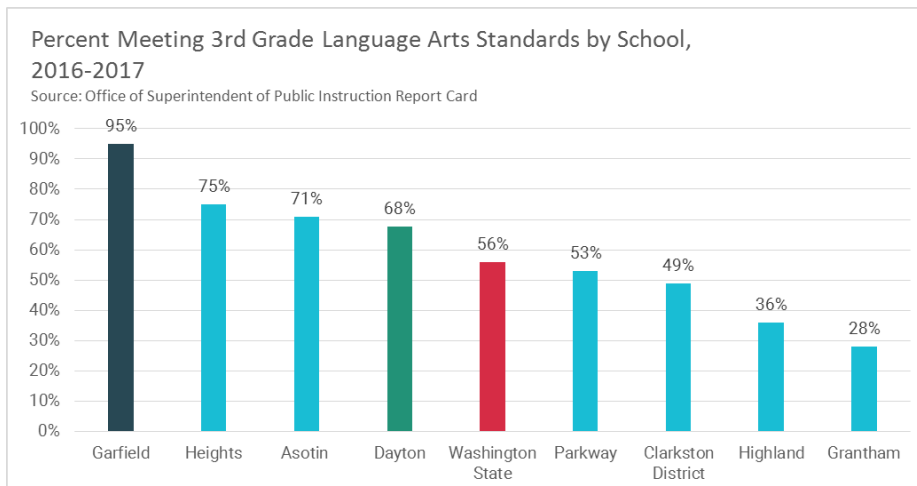
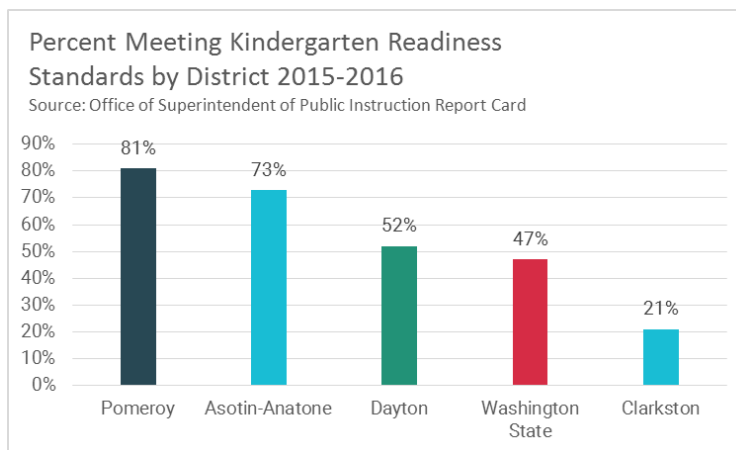
Education is an important determinant of health. People with more education tend to live longer lives and obtain employment more successfully. Higher educational attainment is correlated with lower rates of serious health problems such as diabetes and heart disease.

Elementary Education

One district (Clarkston) fell below the statewide average for Kindergarten Readiness while two (Pomeroy and Asotin-Anatone) were above the statewide average.

Two elementary schools (Highland and Grantham) fell below the statewide average for 3rd Grade reading while four (Garfield, Heights, Asotin, and Dayton) were above the state average. The Clarkston District (Grantham, Heights, Highland, and Parkway) is pictured and fell slightly below the state average. Garfield and Asotin-Anatone percentages are both school-wide and district-wide.

Percentages vary widely between schools partly due to differences in enrollment numbers.

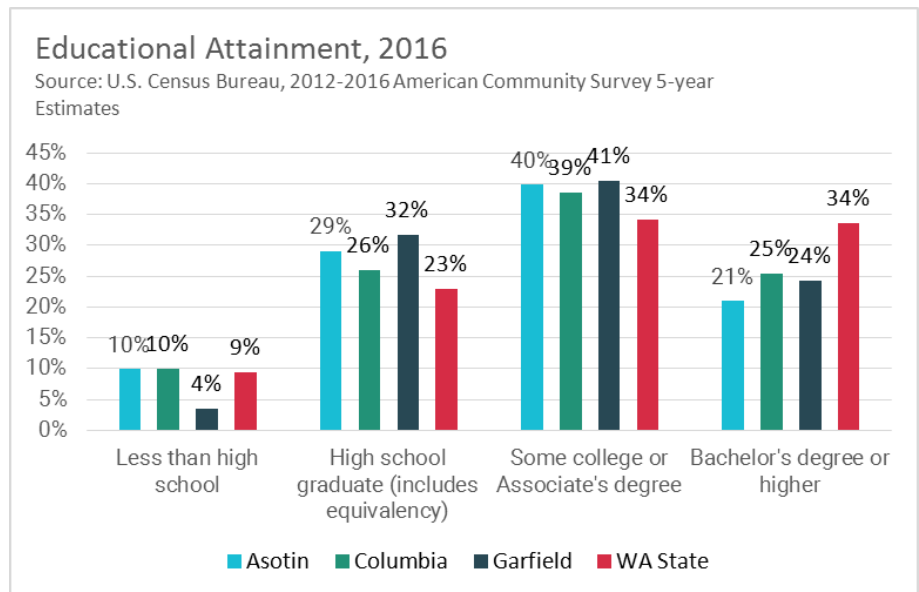
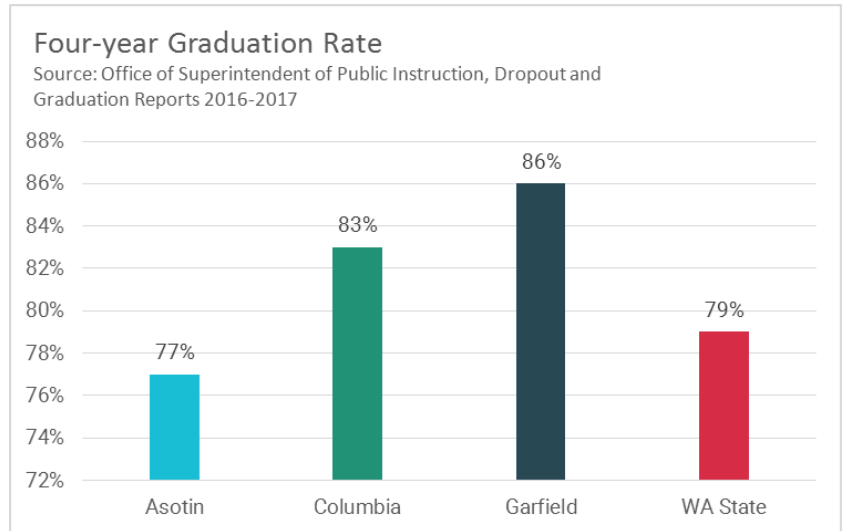


Educational Attainment

The four-year high school graduation rate in Columbia and Garfield Counties was slightly above the state average while the rate in Asotin County was the same as the state average.

Twenty-one percent of Asotin County, 25 percent of Columbia County, and 24 percent of Garfield County residents had a Bachelor's degree or higher, which were all lower than the statewide average of 34 percent.

Research shows that Americans with fewer years of education have poorer health and shorter lives. People with lower levels of educational attainment have higher rates of diabetes, smoking, and other serious health problems. This correlation suggests that education is important not only for higher paying jobs and economic productivity, but also for saving lives and improving quality of life for Asotin and Garfield County residents.



INCOME

Poverty

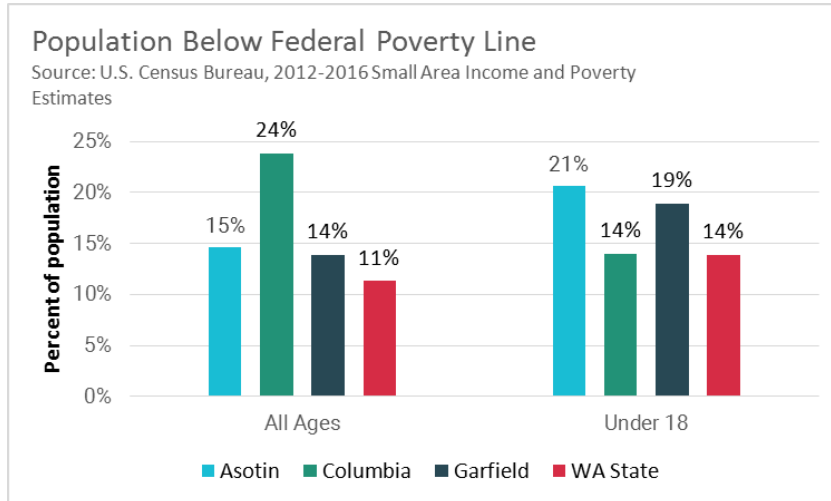
There is a strong and consistent link between poverty and poor health outcomes both globally

and in Southeast Washington. Due to cultural and social barriers, the cost of treatment, fewer education opportunities, poor living conditions, and many other factors, those living in poverty

often have significantly worse health outcomes and shorter lifespans. These poor outcomes include higher rates of motor vehicle accidents, drug-induced death, coronary heart disease, binge drinking, and adolescent pregnancy.

The Federal Poverty Line is issued each year based on household income and size to determine who qualifies for federal programs such as Medicaid, Food Stamps, and the National School Lunch Program. In 2016, fifteen percent in Asotin County, 24 percent in Columbia County, and 14% in Garfield County lived below the federal poverty line, as compared with 11 percent for Washington State. Twenty-one percent of youth in Asotin, 14 percent in Columbia, and 19 percent in Garfield County live below the poverty line compared to around 14 percent in the state as a whole. These rates have decreased in recent years, but remain high compared to the state average.

Twenty-eight percent of families in Asotin County used SNAP (Supplemental Nutrition Assistance Program) which was higher than the state average rate of 19 percent. Twenty-one percent of Garfield County families used SNAP, which was similar to the state average. Fifty percent of children in Asotin County, 52 percent in Columbia County,



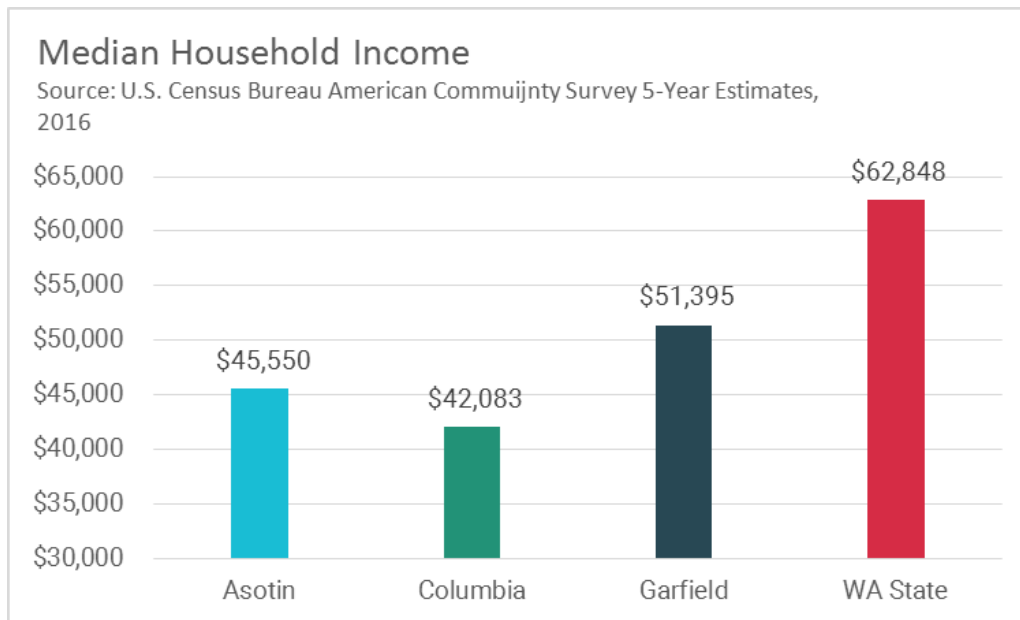
And 51 percent in Garfield County were eligible for free or reduced lunch, compared to 54 percent for the state overall.

In order to reduce health disparities in the community it is important to increase awareness that the disparities are problems that can be resolved. There is a need for interventions and greater re-allocation of resources in order to close gaps in health outcomes between those with average and higher than average incomes versus those below the federal poverty line

Income

The median household income was \$45,550 per year in Asotin County, \$42,083 in Columbia, and \$51,395 in Garfield, as compared to the Washington State median of \$62,848 per year.

There is a need for more employment in Asotin and Garfield Counties that pay a living wage. More higher paying jobs will help alleviate poverty, leading to improvements in overall health.



HOUSING

A lower percentage of renters in Asotin and Garfield Counties spent 30% or more of their income on housing compared to the state. This rate was higher than the state for Columbia and Walla Walla Counties.

Poor health can lead to homelessness when unhealthy people have insufficient income to afford housing.

Homelessness, both living on the street and in shelters, can cause or exacerbate health problems. When people have stable housing, they have more time to manage their health and may be better able to follow medical advice.

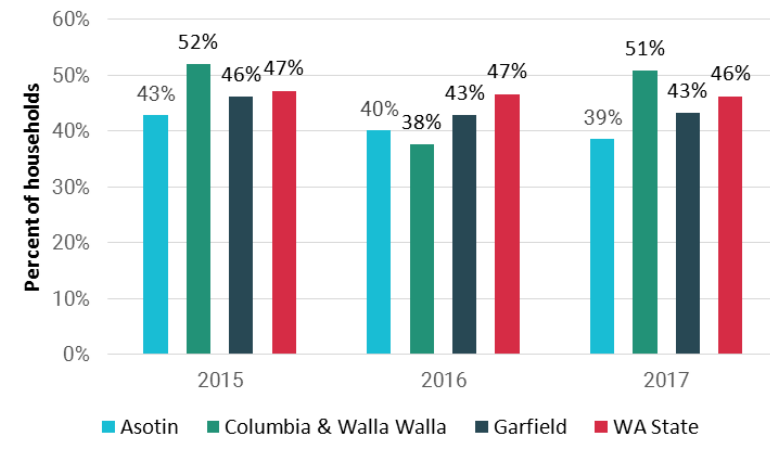
Estimates from a 2018 count approximate that there were 51 homeless individuals in Asotin, Columbia, and Garfield Counties at a given time.

Numbers for this

measure fluctuate significantly each year due to changes in how this measure is recorded.

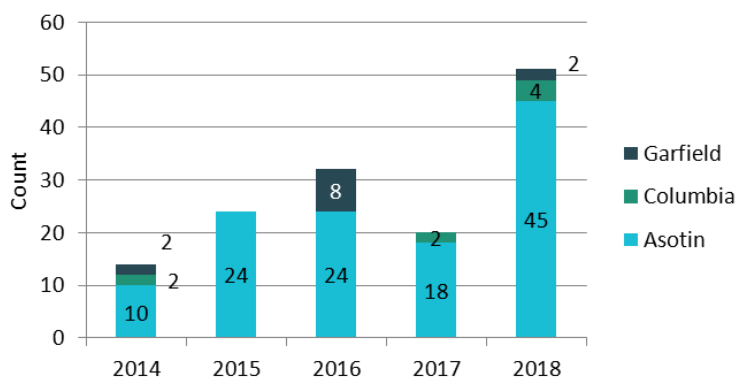
Renters spending 30% or more of income on housing costs

Source: U.S. Census Bureau ACS 2013-2017 5-Year Estimates



Homeless Individuals

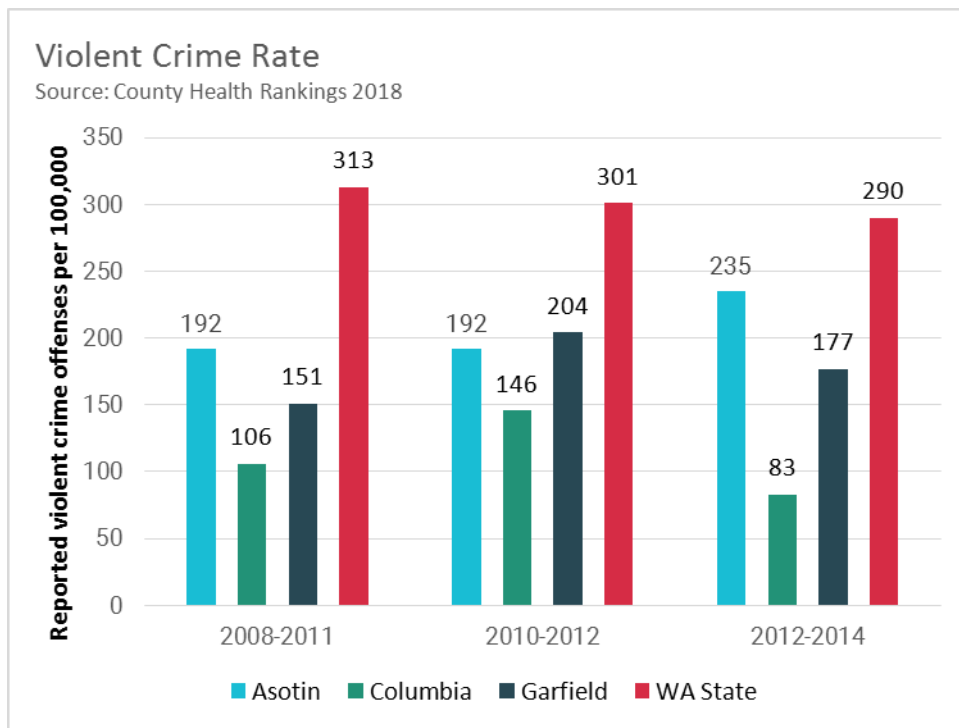
Source: WA State Department of Commerce Annual Point in Time Count



INJURY & VIOLENCE

Violence

Violent crimes are defined as offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, rape, robbery, and aggravated assault. Exposure to crime and violence can increase stress and deter residents from pursuing healthy behaviors, like exercising outdoors. The violent crime rates in Asotin, Columbia, and Garfield Counties were lower than the state of Washington.



While the violent crime rates were lower than the overall state, the state average violent crime rate is decreasing over time, while Asotin County's violent crime rate is increasing over time.

Violence is known to worsen health disparities. Rates of violence tend to be highest in populations that are already disadvantaged and marginalized. Its presence in a neighborhood is linked to increases in poor mental health and chronic disease, and violent neighborhoods discourage physical activity, which leads to many health problems.

Bullying

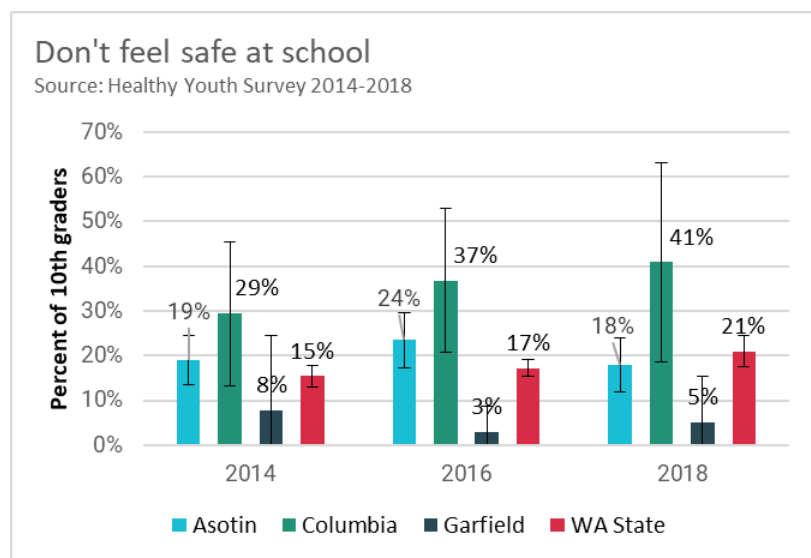
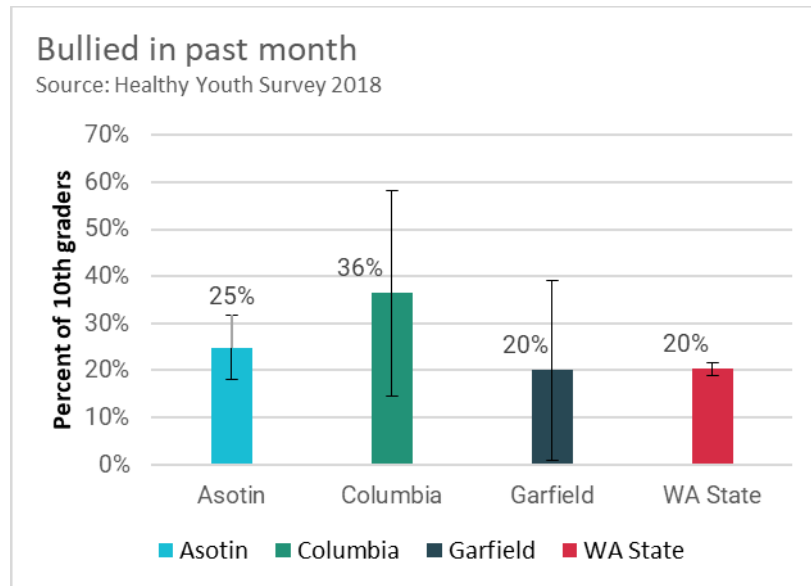
Bullying is a type of youth violence that threatens young people's well-being. Rates for 10th graders reporting being bullied in the past month were not statistically higher than the state average in Asotin, Columbia, and Garfield Counties. This measure could not be compared to data from previous years.

Rates for 10th graders reporting not feeling safe at school were not statistically higher than the state average in Asotin and Columbia Counties, but lower than the state average in Garfield County.

Bullying can result in physical injuries, social and emotional problems, and academic problems. The harmful effects of bullying are frequently felt by friends and families and can hurt the overall health and safety of schools, neighborhoods, and society.

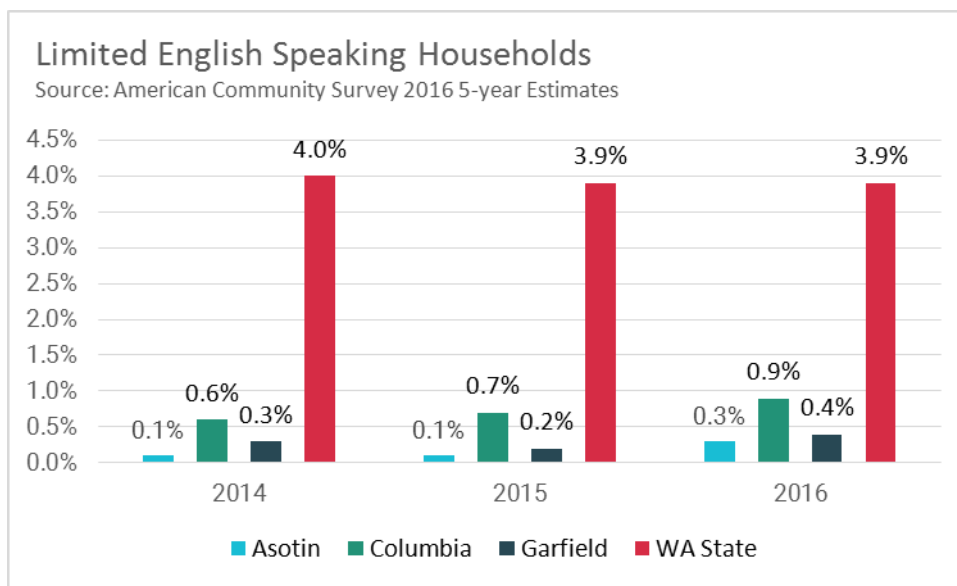
Kids who are bullied are more likely to experience depression and anxiety, issues that may persist into adulthood. They also experience decreased academic achievement and are more likely to be absent from or drop out of school.

Kids who bully others are also more likely to engage in risky behaviors such as substance abuse, early sexual activity, and domestic violence.



COMMUNITY ENGAGEMENT

A limited English-speaking household is one in which all members 14 years and over have at least some difficulty with English. According to 2016 American Community Survey estimates, under one percent of the population of Asotin, Columbia, and Garfield Counties faced linguistic isolation. This rate was lower than the Washington State rate. Linguistic isolation can create barriers to employment and other forms of community engagement, which is important to community health.



The Centers for Disease Control and Prevention (CDC) defines community engagement as "the process of working collaboratively with groups of people who are affiliated by geographic proximity, special interests or similar situations with respect to issues affecting their well-being."

It is important for the voices of all community members to be heard in order to solve problems and ensure the health and wellbeing of all.

ACCESS TO CARE

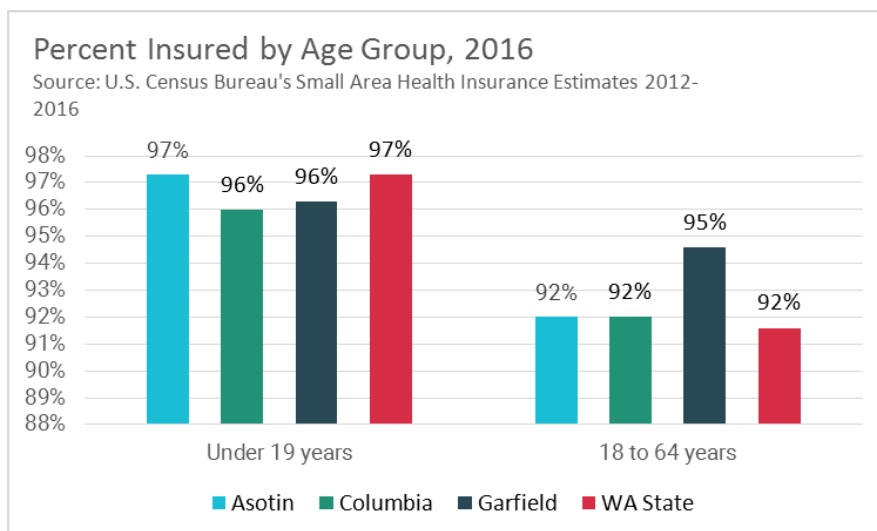
Health Insurance

Ninety-two percent of Asotin and Columbia County residents and 95 percent of Garfield County residents had health insurance coverage. Ninety-seven percent of children and teens in Asotin County and 96 percent in Columbia and Garfield County had health insurance coverage. These rates of coverage were not significantly different from the statewide averages, but fell short of the Healthy People 2020 goal of 100 percent. The main source of coverage for people under 65 was private employer-sponsored insurance, which is typical. Private health insurance can also be purchased on an individual basis,

either directly through a licensed producer or through the Washington Health Benefit Exchange, usually during open enrollment periods. Public

programs such as Medicaid (e.g. Apple Health) provide coverage for many low-income children and adults.

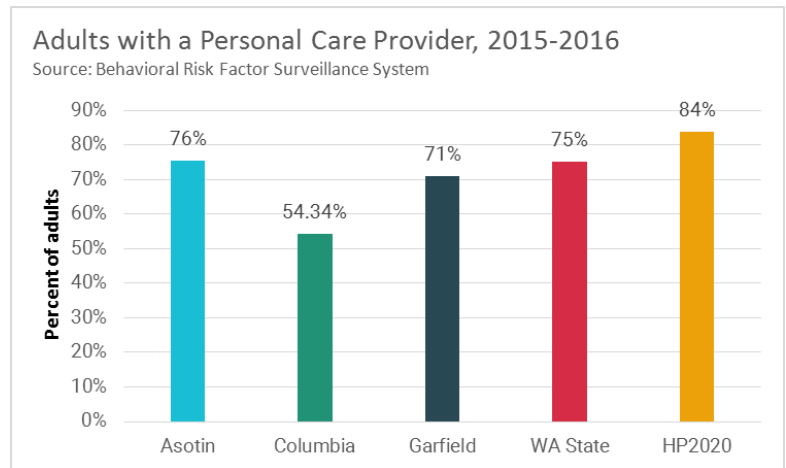
Health insurance coverage can be an important indicator of health status. Due to concern over potential high-cost medical bills, the uninsured are more than twice as likely to delay or forgo needed care as the insured. This can lead to the development of serious health problems that might be prevented. An increase in health care coverage amongst children and adults in Asotin and Garfield Counties might significantly reduce both health problems and subsequent health-related costs.



Provider Availability

Sixty percent of Asotin adults had a checkup in the past year, which was not significantly lower than the Washington State average of 63 percent. Seventy percent of Columbia and 80 percent of Garfield adults had a checkup in the past year, which were higher than the state average. Eighteen percent of Asotin and 20 percent of Garfield adults did not see a health care provider within the previous year due to cost, which was higher than the statewide average of 12 percent. Eight percent of adults in Columbia County did not see a provider due to cost, which was not lower than the state average.

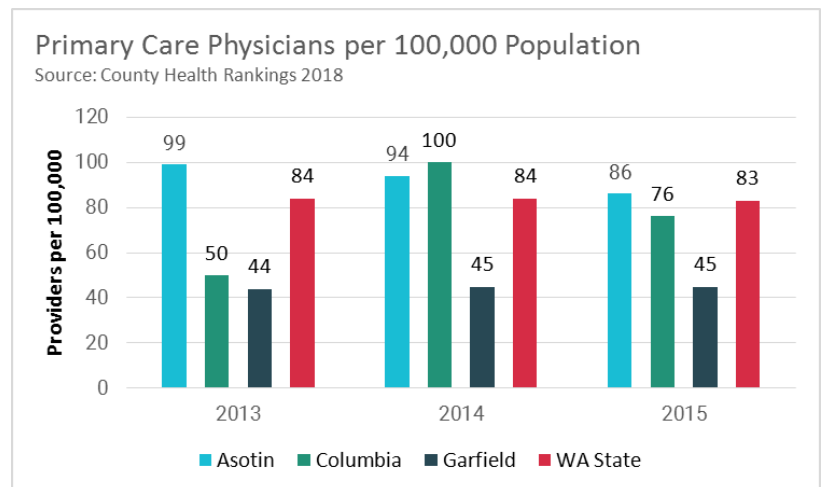
Seventy-six percent of Asotin County and 71 percent of Garfield county had a personal care provider, which were similar rates to the state average, but lower than the Healthy People 2020 target of 84 percent. Fifty-four percent of Columbia County adults had a personal care provider which was lower than the state average.



Robert Wood Johnson Foundation's County Health Rankings reports that Asotin County had 86 Primary Care Physicians per 100,000 population and Columbia had 76 per 100,00, which were not significantly different from the state of Washington. Garfield had 45 Physicians per 100,000, which was lower than the state average. It should be noted that this number does not account for those not accepting new patients and does not include part-time practitioners.

Having a primary care provider manage, coordinate, and deliver the majority of one's care is extremely important for the health of adults and the provision of wellness and prevention services.

Adults having a primary care provider tend to receive better management of chronic diseases and have lower overall healthcare costs.

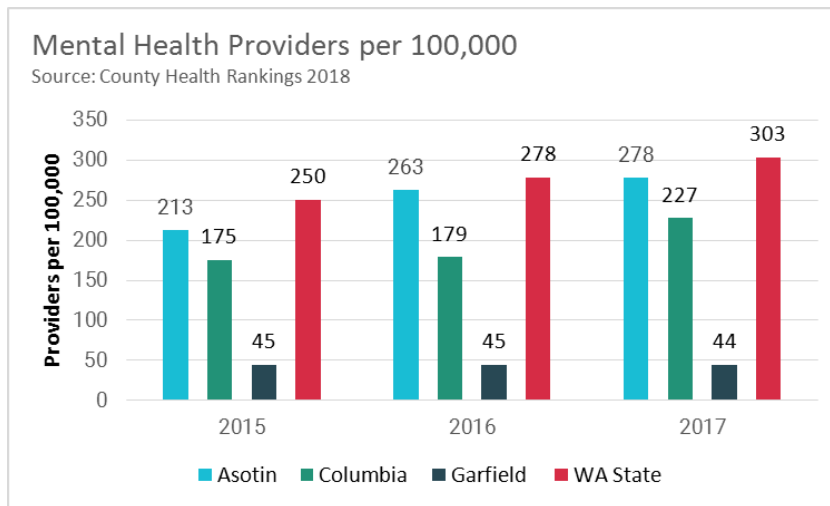


Mental Health

Mental health counselors played a critical role in helping people who were experiencing mental or emotional conditions get their lives back on track. While primary care can sometimes manage circumstantial and routine anxiety and unipolar depressive disorders, behavioral health providers are better suited to assess, diagnose and treat people struggling with severe mental health issues, including bipolar disorder, eating disorders,

schizophrenia, post-traumatic stress disorder or other severe conditions. There were 278 mental health care providers per 100,000 population in Asotin County an 227 per

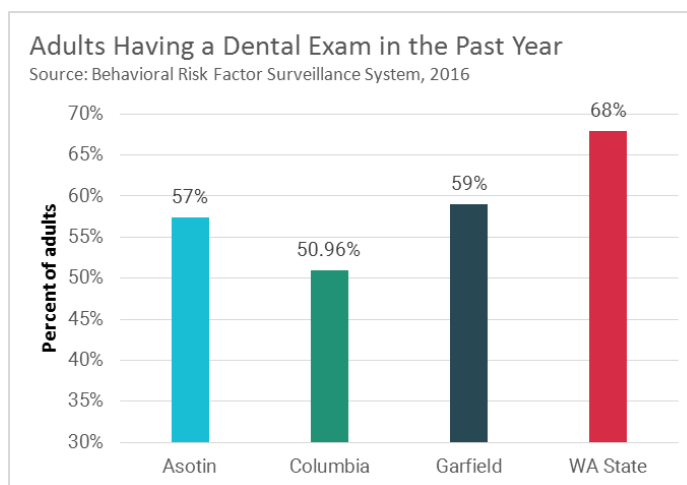
100,000 in Columbia which were not significantly lower than the state average. There were 44 providers per 100,000 in Garfield County, which was lower than the state average.



Adults with dental care

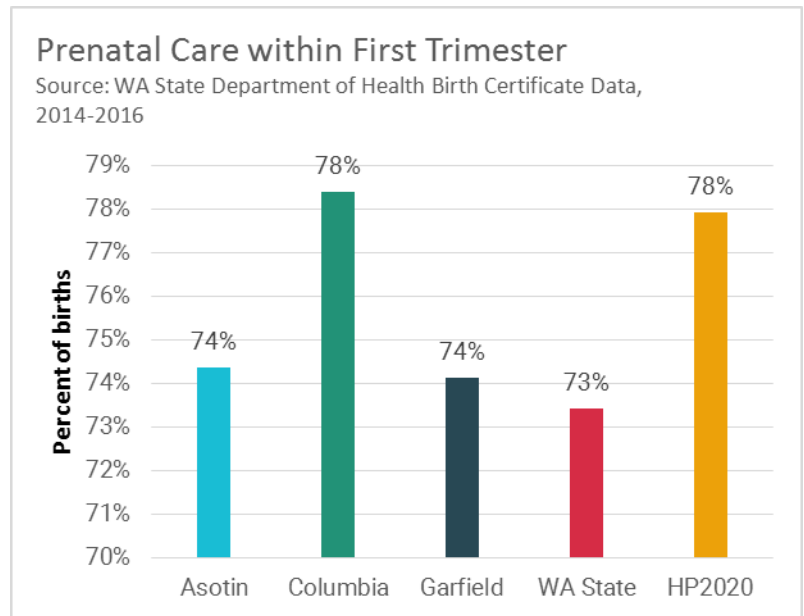
The rates for adults receiving dental care in Asotin, Columbia, and Garfield Counties were lower than the statewide average.

Oral health is essential for overall health. Complications such as tooth decay and gum disease can worsen existing health conditions like diabetes and negatively impact quality of life and mental health. Regular dental exams help prevent these common problems, and linking oral health to primary care can help increase awareness of oral health's importance to healthy development and aging.



Adults with first trimester prenatal care

Rates for first trimester prenatal care were not significantly higher than the statewide average of 73 percent, but fell short of the Healthy People 2020 recommendation of 78 percent. First semester visits are very important for a baby's health and can lead to the identification of potential risk factors. Women with first semester prenatal care tend to have better birth outcomes than women who do not.



HIV Screening Rate

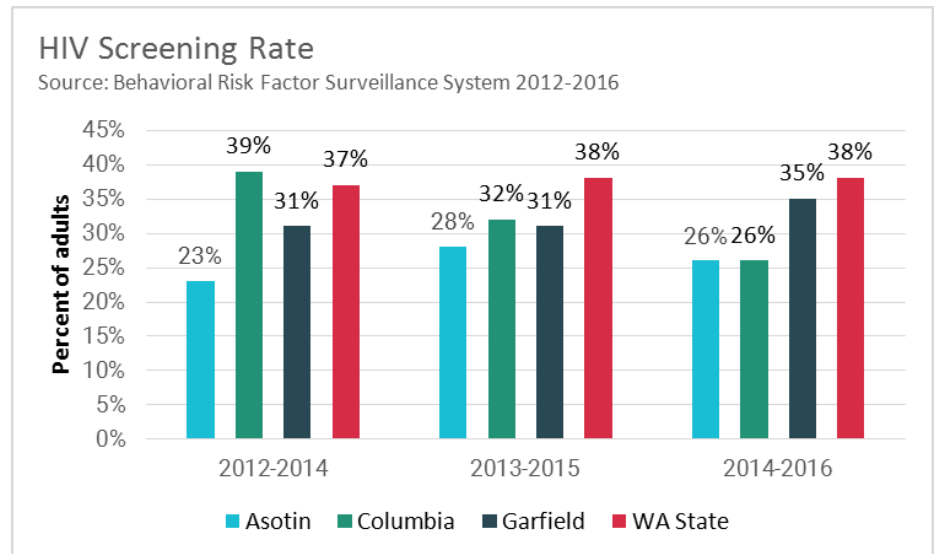
HIV Screening Rates were lower than the state average of 38 percent in Asotin, Columbia, and Garfield Counties.

The [CDC](#) estimates that 15 percent of people living with HIV in the United States are unaware that they are infected. It is recommended

that all adolescents and adults get tested at least once in their lives for HIV infection and that gay and bisexual men be tested more frequently.

Testing is a very important way to prevent transmission. Those who test positive can begin an effective treatment program that will allow for a long, healthy life.

People who do not get tested and let the disease progress tend to be less likely to have positive outcomes when beginning treatment at a later stage of the disease. Knowing your HIV status is very important way to protect yourself and your community.

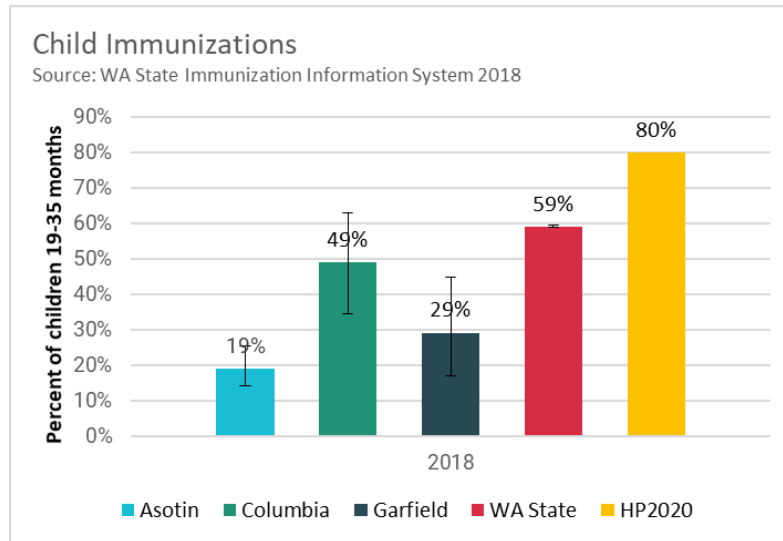


Child Immunization

The child immunization rate is defined as the percentage of 2-year-old children receiving vaccinations for 4 doses-DPT, 3 doses-Polio, 1 dose- MMR, 3 doses-Hib, 3 doses-HepB, and 1 dose-Varicella. The rate in Asotin and Garfield

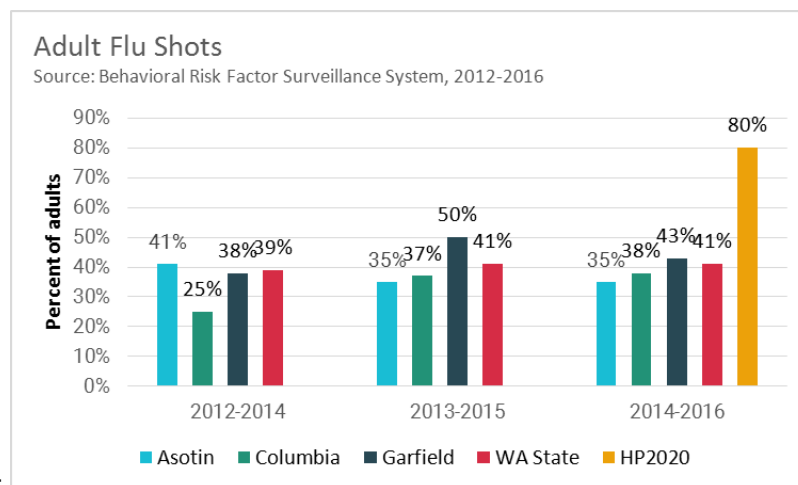
Counties were lower than the Washington state rate of 58 percent. All counties' rates fell far below the Healthy People 2020 goal of 80 percent. This measure could not be compared to data from previous years.

Vaccinations are crucial because just a few cases of vaccine preventable diseases can rapidly spread among unvaccinated children to become hundreds of thousands of cases. Immunizations are an extremely important way to protect yourself and others from contracting of serious diseases.



Adult Flu Vaccination

The Adult Flu Vaccination rate in Asotin, Columbia, and Garfield Counties were not significantly different from the Washington State rate. All counties' rates fell far below the Healthy People 2020 guideline of 80 percent.



Every flu season is different, in terms of the numbers of individuals infected. The CDC estimates that flu results in between 140,000 and 710,000 hospitalizations each year and 12,000 to 56,000 influenza-associated deaths in the United States.



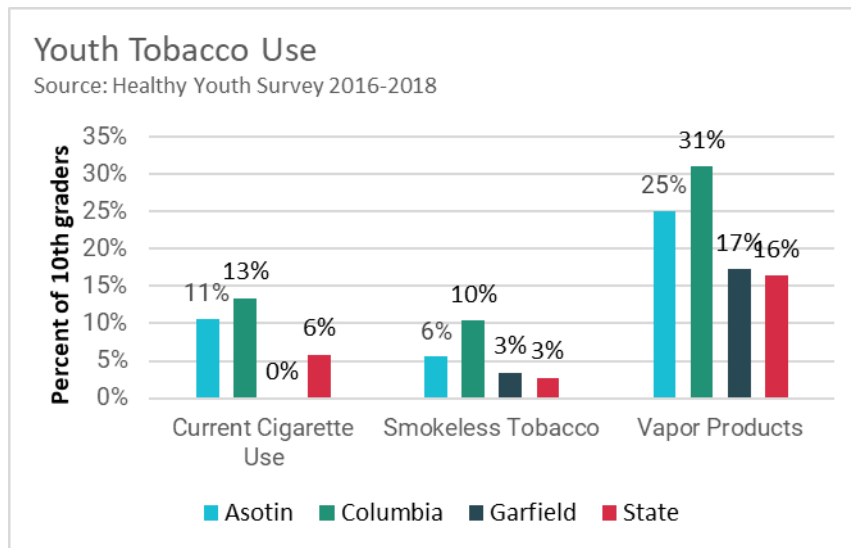
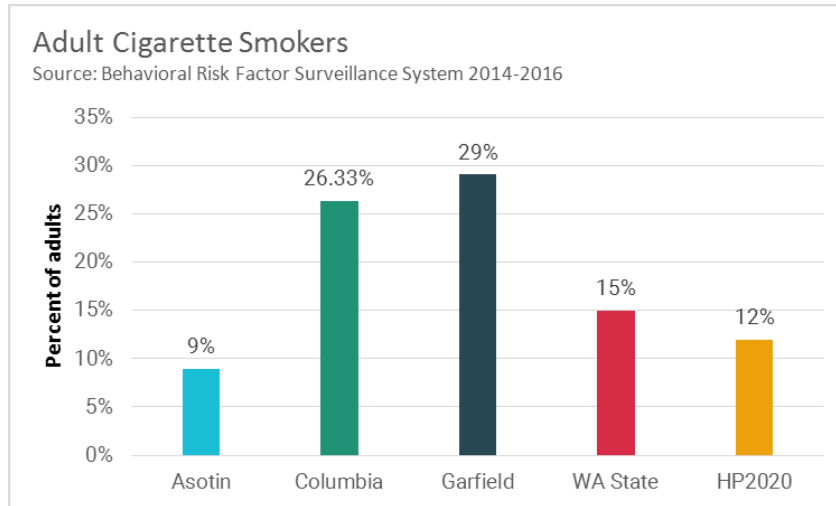
Risk Factors

The World Health Organization defines a risk factor as 'any attribute, characteristic or exposure of an individual that increases the likelihood of developing a disease or injury.' Included in this report are indicators affecting diverse populations within our community or which have a high impact on health and include substance use, mental health, weight status, communicable disease, teen pregnancy and environmental factors. These indicators are subject to interventions with potential for equitable outcomes.

SUBSTANCE USE

Tobacco

Cigarette smoking is the leading cause of preventable death in the United States and accounts for nearly one in five deaths nationwide each year. Smokers are at a higher risk of coronary heart disease, stroke, lung cancer, and other serious health conditions. The adult cigarette smoking rate in Asotin County was lower than the Washington State rate of 15 percent. The adult cigarette smoking rate in Columbia and Garfield Counties were significantly higher than the state average.

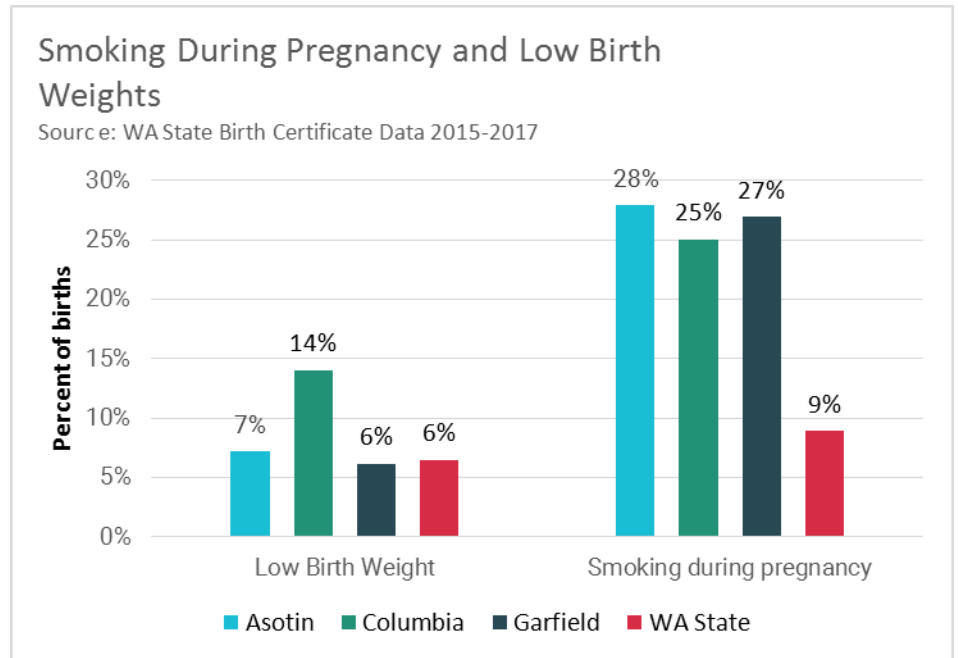


According to the 2016 and 2018 Healthy Youth Surveys, vapor product use among 10th graders was higher than the state in Asotin and Columbia Counties.

While vapor products are less harmful than regular cigarettes, the liquid nicotine they contain is still highly addictive and can harm adolescent brain development which continues into the early to mid-20s. E-cigarette use is closely related to use of other tobacco products, and youth who use multiple tobacco products are at a

higher risk for developing nicotine dependence and are more likely to continue using tobacco into adulthood. Smoking of any kind is particularly dangerous for this age group as there is a correlation between youth smoking and depression, anxiety, and stress. Lowering the acceptance and tolerance of tobacco among peer groups in the community is an effective way to decrease smoking among youth.

Rates for mothers smoking during pregnancy in Asotin, Columbia, and Garfield Counties were significantly higher than the state average. Maternal smoking is very dangerous as it can lead to premature delivery, low birth weight, stillbirth, and SIDS. Increased education and awareness of the health risks of maternal smoking are needed to reduce this rate.

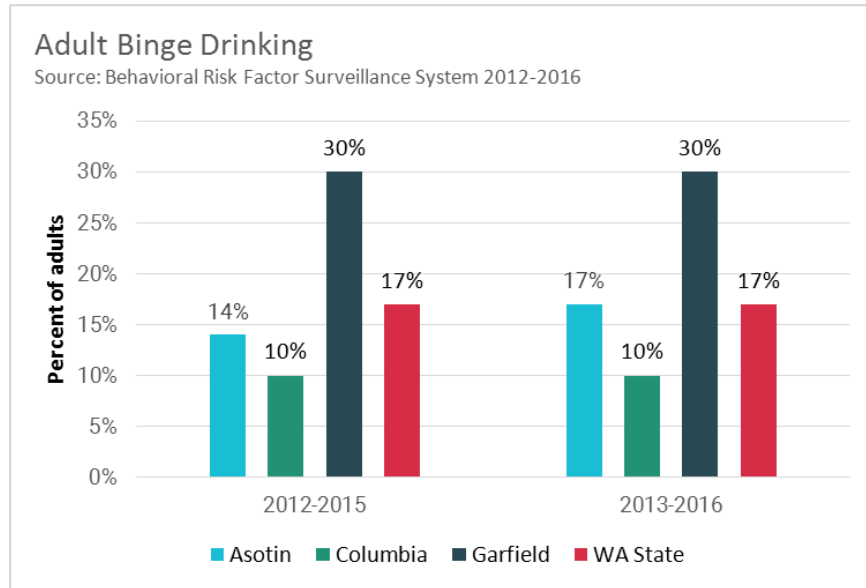


Encouraging any smoker to quit can prevent the onset of many medical problems. The CDC estimates that 2 to 5 years after a person quits smoking their risk of stroke drops to the same level as that of a non-smoker. Ten years after quitting, a person's risk of lung cancer may be reduced by half. Deaths due to cigarette smoking are completely preventable and lowering the smoking rate will make for a much cleaner and healthier community.

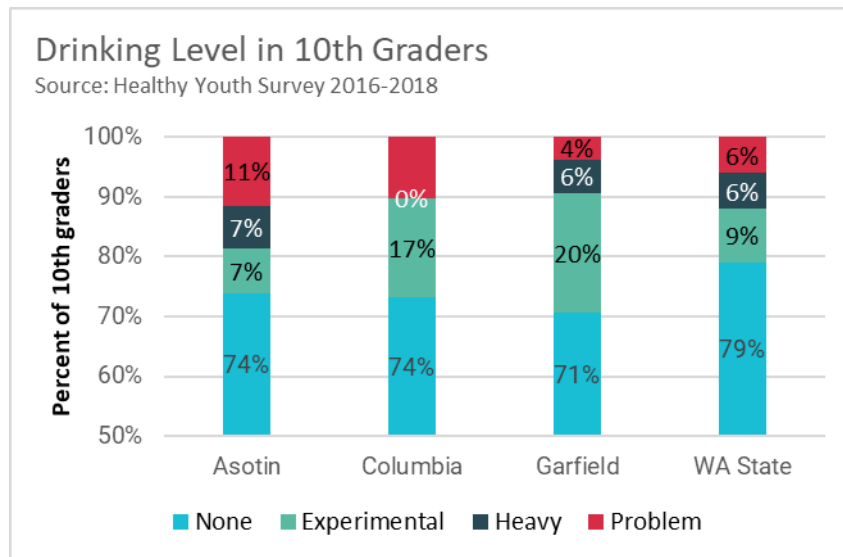
Alcohol

Binge drinking is defined as the consumption of four drinks or more for a woman and five drinks or more for a man within a 2 hour period on at least one occasion in the past 30 days. Garfield County had a higher binge drinking rate

than Washington state's average. Binge drinking presents many problems to the community, as national data reveals its frequent association with injuries, sexual assault, unwanted pregnancy, violence, and chronic diseases.



The 2018 Healthy Youth Survey results revealed that 23 percent of Asotin, 27 percent of Columbia, and 29 percent of Garfield 10th graders reported having consumed alcohol in the past 30 days. Alcohol

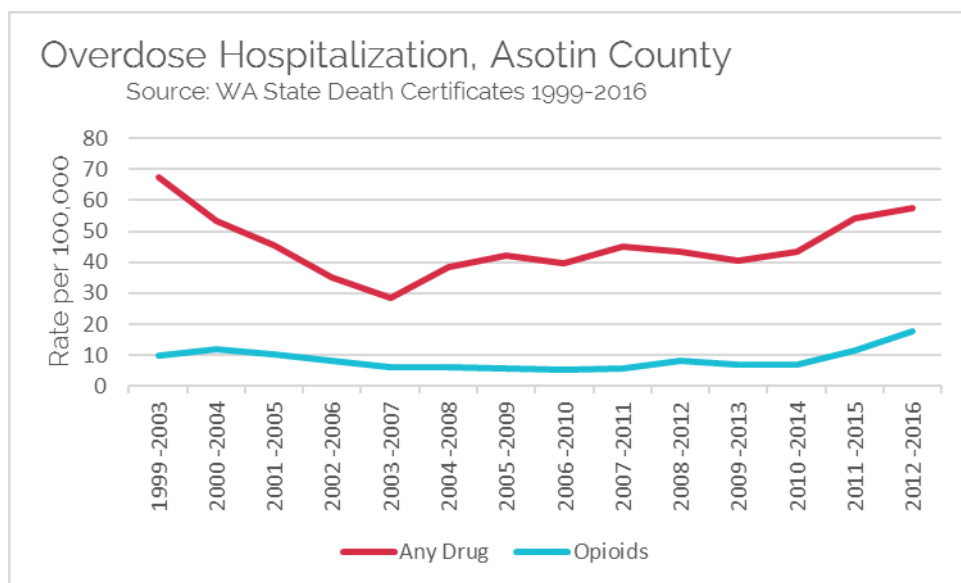
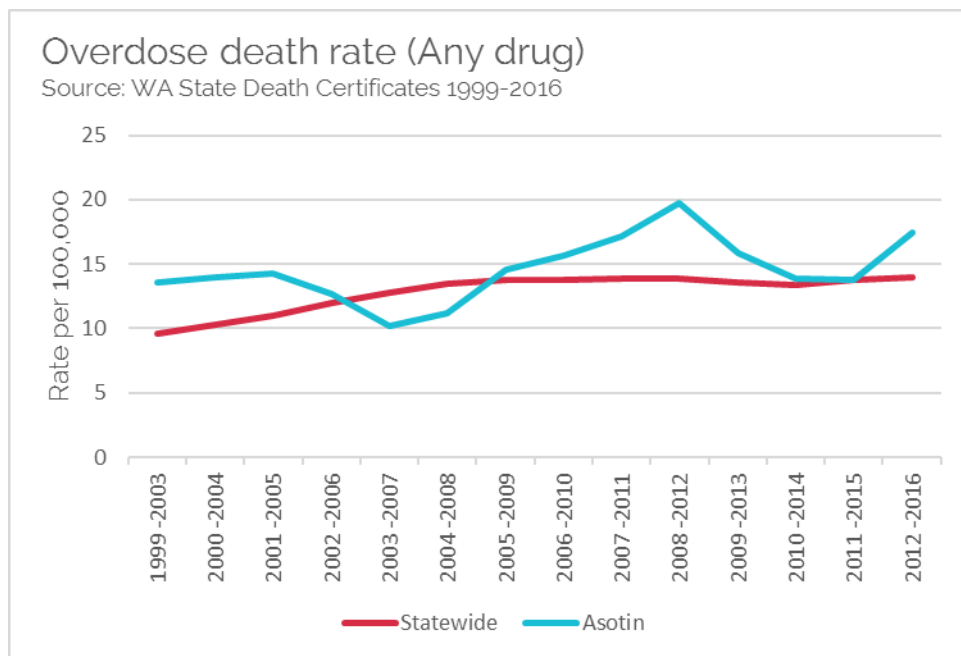


use among teenagers is a particular concern as it places them at risk for emotional and social problems, lesser academic performance, and abnormal changes in brain development. Youth who begin drinking at an early age are also more likely to develop alcohol dependence later in life than those who begin drinking at age 21 or later.

Opioids

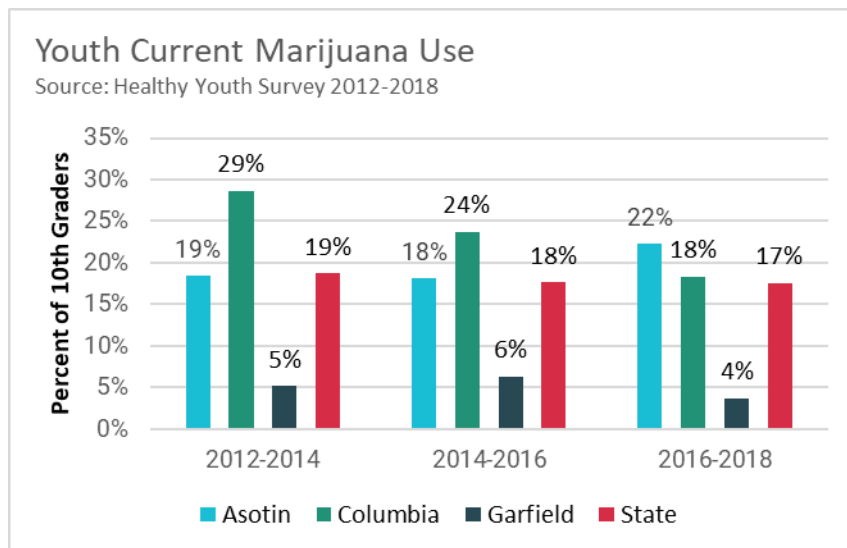
Drug overdose is a significant problem in the United States. Deaths from Opioid use have increased rapidly since 1999, and hospitalization and mortality data reflected the same trend in Asotin County. Rates for Columbia and Garfield County could not be reported due to small numbers.

The opioid epidemic has become fast-moving and complex. Partnering with healthcare providers and social service providers, encouraging consumers to make safe choices about opioids, and raising overall awareness of the opioid crisis will help better coordinate efforts to prevent opioid overdoses and deaths



Marijuana

Twenty-four percent of Asotin and Columbia County 10th graders and reported having used marijuana in the past 30 days. Garfield's rates were lower, likely due to small sample size. Because the brain is still developing well into a person's third decade of life, marijuana use is dangerous for adolescents. Marijuana's effects include memory and learning impairment, interference with ovulation and pre-natal development, impaired immune response, and possible adverse effects on heart function. The use of marijuana may also lead teenagers to use other, more risky drugs.



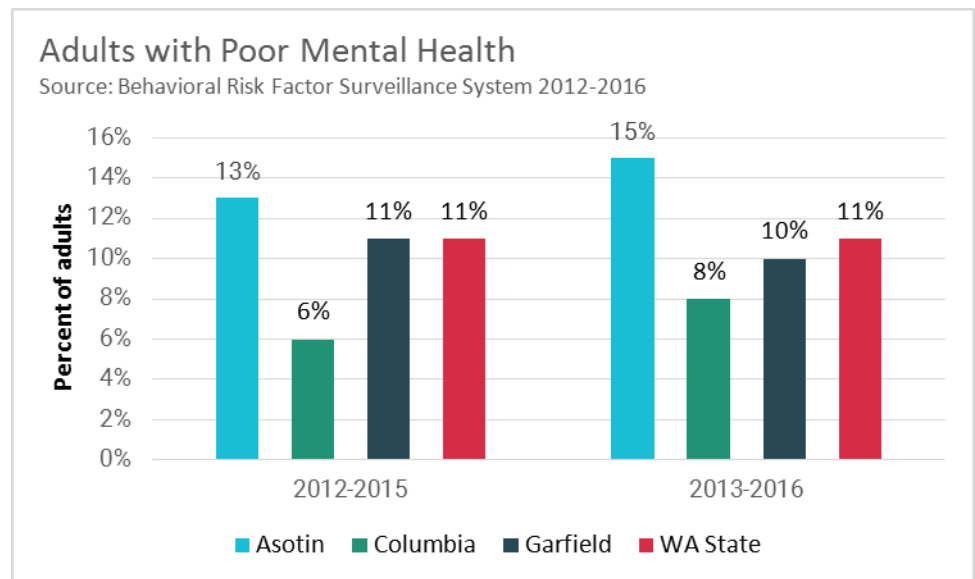
MENTAL HEALTH

Adults with Poor Mental Health

Mental health disorders are treatable medical conditions that inhibit the way a person feels, thinks, or functions in society. While mental illnesses can affect anyone, risk factors include a family history of mental illness, stressful life conditions, a traumatic experience, use of illegal drugs, and childhood abuse or neglect. Examples of mental health disorders include depression, bipolar disorder, obsessive-compulsive disorder, and post-traumatic stress disorder.

Rates for adults reporting poor mental health for 14 or more days within the previous month, which was higher than the state rate in Asotin County. Columbia County's rate was lower than the state average..

Mental health treatment can be difficult due to the shame and stigma that prevent people from seeking mental health care, leaving many cases of poor mental health untreated in the community.

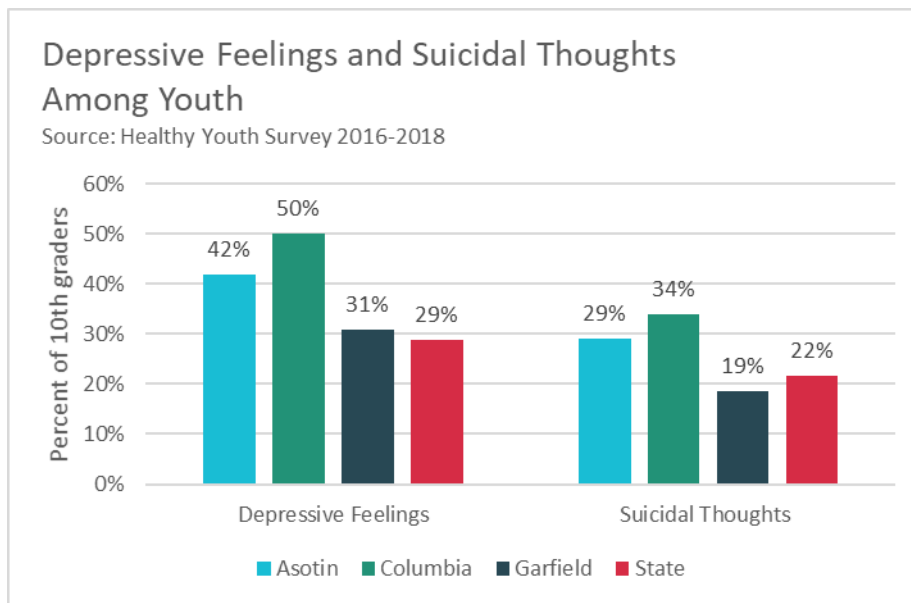


Suicide Rate

Risk factors for suicide include a family history of suicide, child maltreatment, alcohol and substance abuse, mental disorders, and feelings of isolation and loss. At 25.6 per 100,000 deaths, the suicide rate in Asotin County was higher than Columbia County and Washington State's rate of 15 per 100,000 and did not meet the goal set by Healthy People 2020 of 10.2 per 100,000..Washington State has a higher rate of suicide deaths compared to the U.S. (13 per 100,000).

Suicidal thoughts are also a serious concern amongst youth as 29 percent of Asotin, 34 percent of Columbia, and 19 percent of Garfield 10th graders reported seriously considering suicide in the past year.

Factors that protect against suicide include effective clinical care for mental, physical, and substance abuse disorders, as well as social support..



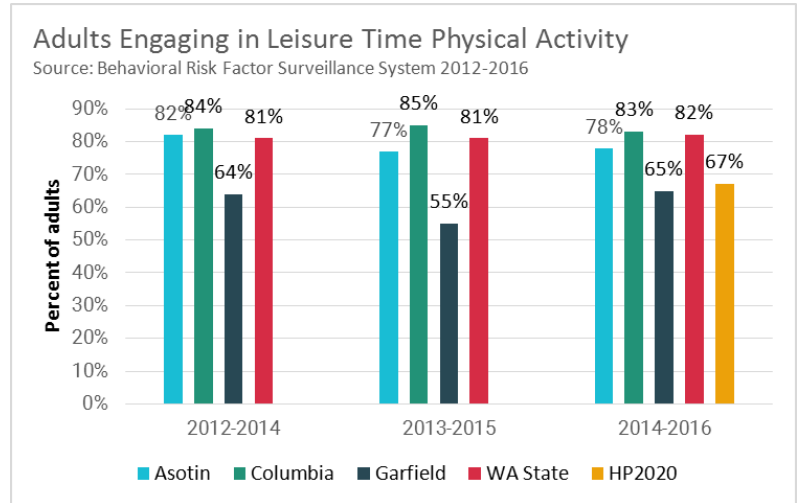
Youth Depression

Forty-two percent of Asotin and 10th graders reported feeling sad and hopeless for 14 or more days in the previous month, which were slightly higher than the overall state average. Fifty percent of Columbia and 31 percent of Garfield 10th graders and reported feeling sad and hopeless, which was not significantly higher than the state average due to their low "n". Depression in adolescence is associated with the use of drugs and alcohol, school dropout, and engagement in promiscuous sexual behavior. Healthy People 2020 set a goal of reducing the number of adolescents who have a major depressive episode and of increasing depression screening by primary care providers.

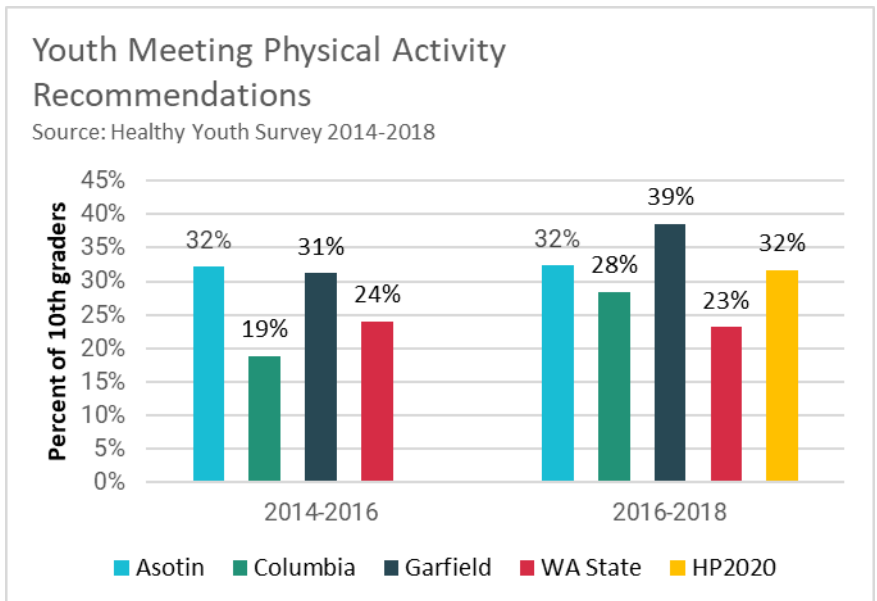
WEIGHT STATUS

Physical Activity

Rates of adults reporting leisure-time physical activity were similar to the overall state rate and exceeded the Healthy People 2020 goal in Asotin and Columbia Counties. Only 65 percent of Garfield adults reported leisure-time physical activity which was lower than the state rate and does not meet the Healthy People 2020 goal.



Only 32 percent of tenth graders in Asotin County and 39 in Garfield County reported 60 minutes or more of physical activity per day, which were higher than the Washington State rate. Columbia County was not statistically higher than the state average at 28 percent.

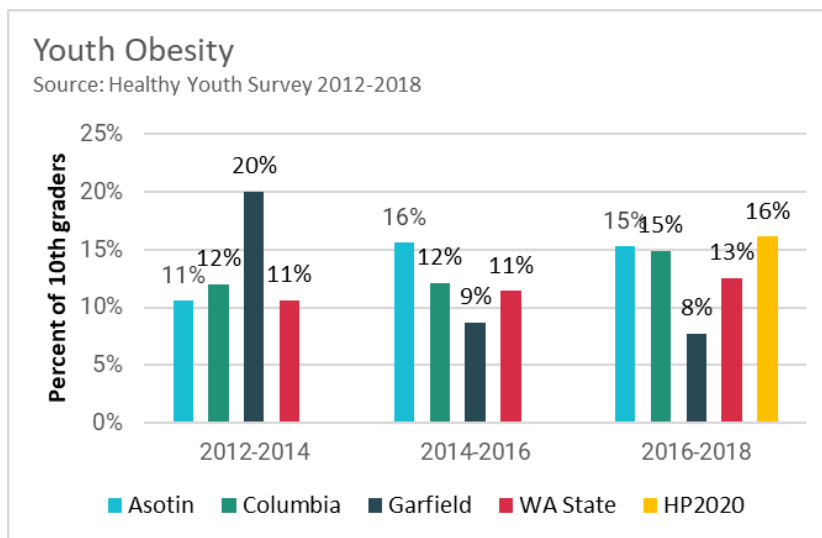
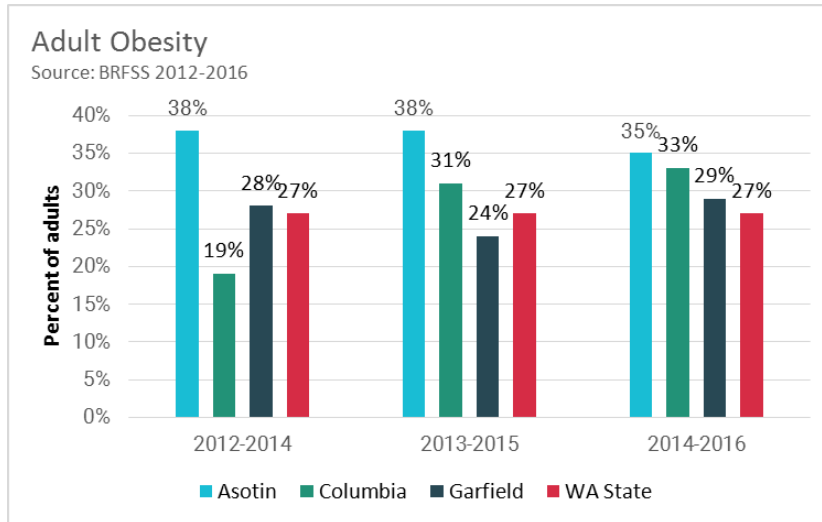


Physical activity is important because it can greatly reduce obesity, which in turn lowers risk for many serious and often fatal health problems. The Centers for Disease Control recommends 150 minutes per week of moderate-intensity aerobic activity (such as brisk walking, aqua aerobics, or gardening), or 75 minutes a week of more vigorous activity (such as jogging/running, singles tennis, aerobic dancing, or swimming laps). Two or more days a week of muscle strengthening activities is also recommended.

Overweight/ Obesity

Adult obesity rates in Asotin and Columbia Counties were higher than the Washington State average. Garfield's obesity rate was 29 percent which was similar to the state rate.

Amongst students in Asotin County, 15 percent of 8th graders, 15 percent of 10th graders, and 17 percent of 12th graders were obese. Amongst students in Columbia County, 15 percent of 10th graders, and 16 percent of 12th graders were obese. Amongst students in Garfield County, 8% of 10th graders and 9% of 12th graders were obese, which were not statistically lower than the Washington State rate.

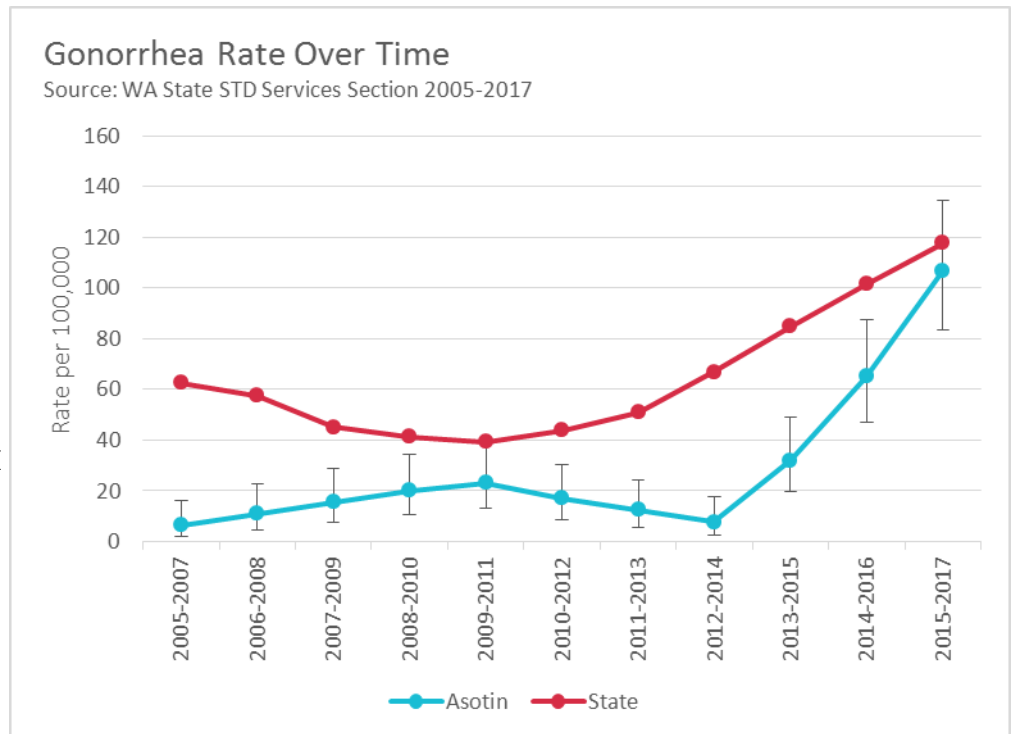


A BMI (weight to height ratio) of 25 to 25.9 is considered overweight, while a BMI of 30 and above is considered obese. Obesity results from an energy imbalance involving eating too many calories and not getting enough physical activity. Obesity-related conditions include heart disease, stroke, and Type II diabetes. These are some of the leading causes of preventable death both in Asotin and Garfield Counties and nationwide. Exercise and healthy eating habits are two of the most important ways to decrease obesity rates and improve many areas of a person's health.

COMMUNICABLE DISEASE

Gonorrhea

The gonorrhea rate has increased in recent years and is currently 107 cases per 100,000 people. Gonorrhea is a sexually transmitted infection that can infect both men and women. It is spread through vaginal, oral, and anal sex and can be passed from mother to child during childbirth. Gonorrhea can be cured with treatment but can cause serious damage including Pelvic Inflammatory Disorder if left untreated.

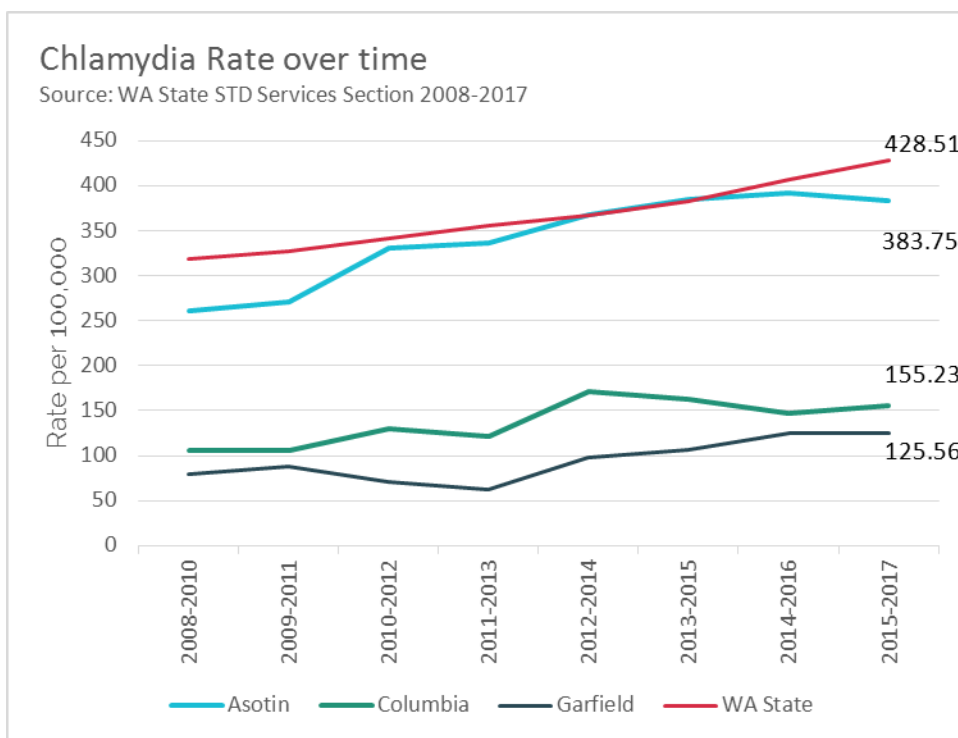


Chlamydia

Chlamydia is a sexually transmitted infection that can infect men and women through unprotected vaginal, oral, or anal sex. The chlamydia rate in Asotin, Columbia, and Garfield Counties has increased over time. Like gonorrhea, it can be passed from mother to child during birth. Young people who are sexually active are at a higher risk for chlamydia and should be tested each year. The infection is easily cured with treatment but can damage a female's reproductive system, making it difficult for her to get pregnant later in life if left untreated. Many times, the condition is asymptomatic.

It is important to increase knowledge around chlamydia, gonorrhea, and other common STDs in Asotin and Garfield Counties. While abstinence is the only way to ensure avoiding these infections, proper use of latex condoms can also prevent

infection. Yearly testing among young, sexually active people is very important in the recognition and treatment of, chlamydia, gonorrhea and other sexually transmitted infections.

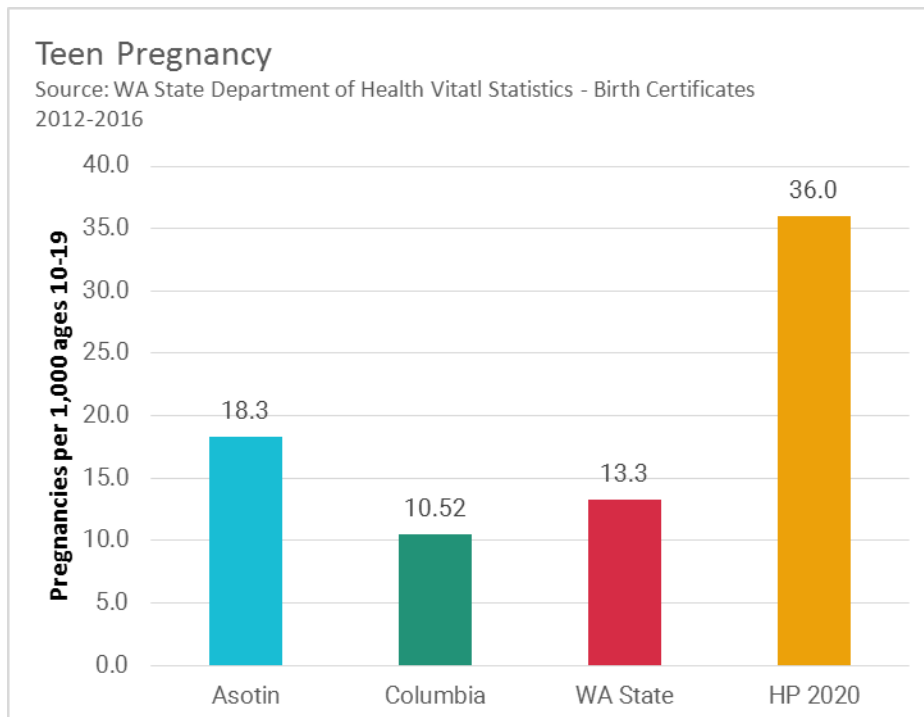


TEEN PREGNANCY

Teen Pregnancy

At 18 per 1,000 births, the rate of teenage pregnancy in Asotin County was slightly higher than the state's overall rate, but well within the 36 per 1,000 target set by Healthy People 2020. The rate in Columbia County was lower than the state average. The Garfield County rate could not be reported due to small numbers.

Young women who become pregnant as teenagers are at a higher risk of negative health outcomes later in life. They are less likely to complete high school and typically have lower levels of educational attainment than their peers. The children of teenage mothers are also at higher risk for health problems and are more likely to face poverty and other adverse conditions later in life. Research shows that teenage pregnancy rates are effectively reduced when teenagers have an appropriate perception of the risks involved with sexual activity and communicate with parents or other adults about sex, condoms, and contraception.

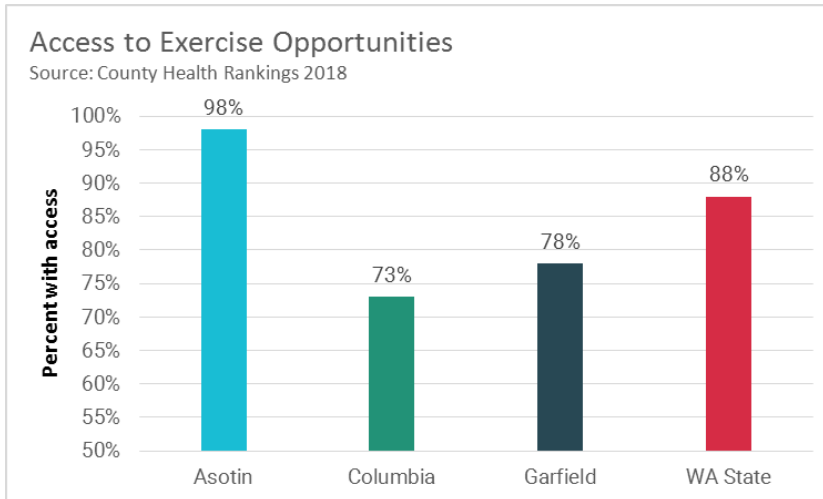


ENVIRONMENTAL FACTORS

Physical Environment:

Under one percent of Asotin and Garfield County residents and three percent in Columbia County used public transit to commute to work, as compared to six percent for the state overall. Four percent of Asotin County, 17 percent in Columbia County, and 5 percent of Garfield County walked or biked to work, compared to the Washington State rate percent of 4.5 percent.

Exercise opportunities were accessible to 98 percent of Asotin County which was higher than the state average. Rates for Columbia and Garfield were lower than the state. This measure cannot be compared

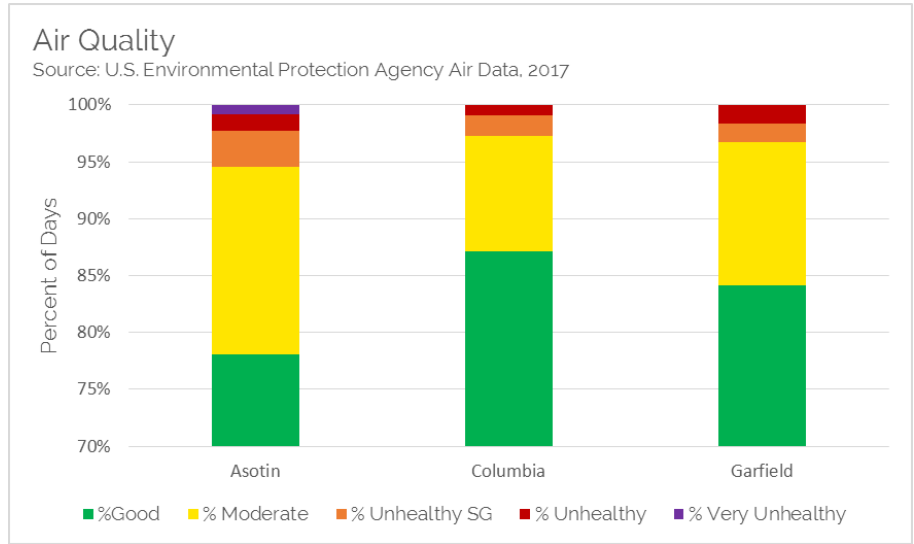


to previous years due to changes in how it is calculated. "Access to exercise opportunities" measures the percentage of individuals in a county who live reasonably close to a location for physical activity including recreational facilities and local, state, and national parks. Better access to recreation facilities and safe places to walk and exercise has the potential to facilitate healthier lifestyle choices for residents of Southeast Washington.

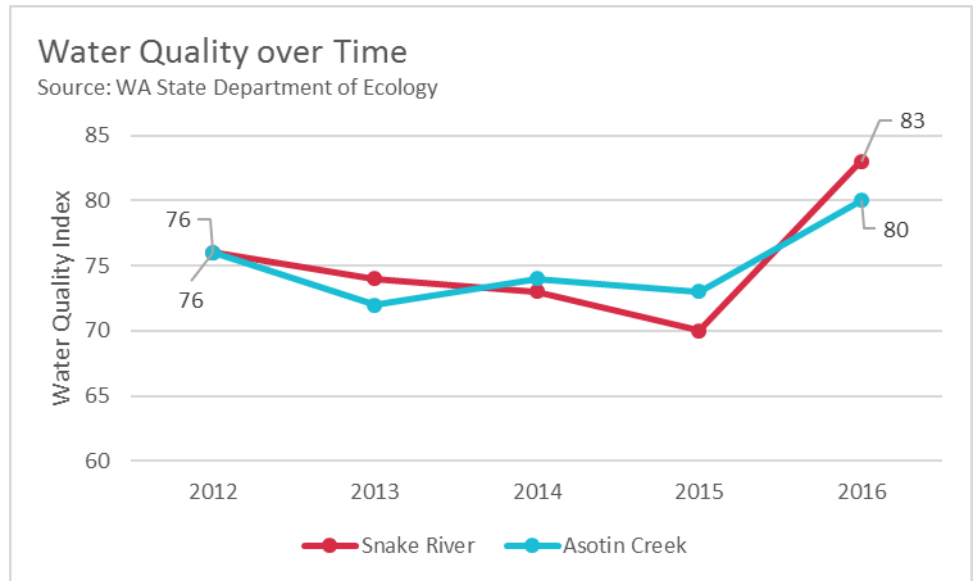
There is a need for additional data on how Southeast Washington residents interact with their Physical Environment. Additional data could include feelings of safety in neighborhoods, type and frequency of exercise, and satisfaction with the environment.

Environmental Quality

Asotin, Columbia, and Garfield Counties had good environmental air quality. There was likely a lower proportion of "Good" days in 2017 due to wildfires in the area. Asotin County met AQI standards (Good or Moderate) 94 percent of days in the past year and Columbia and Garfield County met standards 97 percent of days.

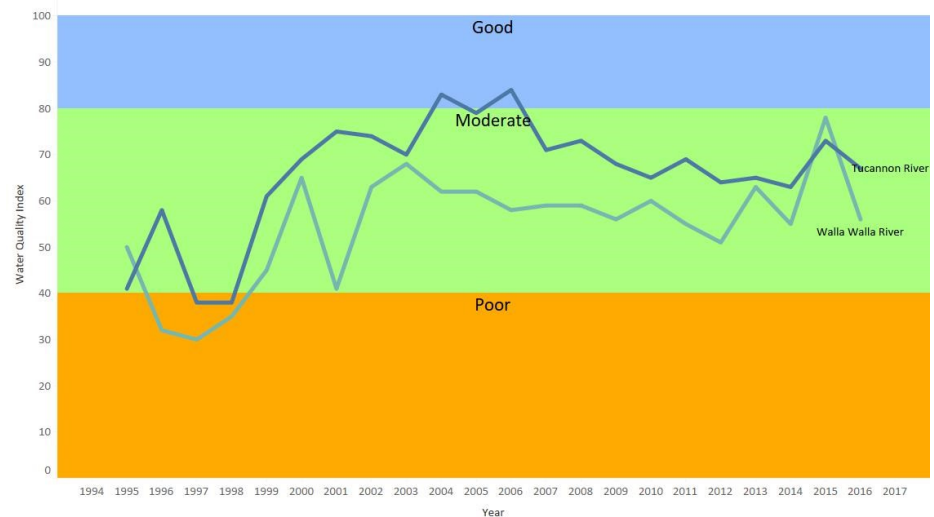


Asotin Creek, Snake River, Walla Walla River, and Tucannon River water quality had increased over time. The quality of water, whether used for drinking, domestic purposes, food production or recreational purposes has an important impact on health. Water of poor quality can cause disease outbreaks and it can contribute to background rates of disease manifesting themselves on different time scales.



Water Quality Index: Walla Walla River and Tucannon River

Measures: fecal coliform bacteria, oxygen, pH, suspended solids, temperature, total persulf nitrogen, total phosphorus, turbidity. Adjusted for flow. Source: WA Dept. of Ecology





Health Outcomes

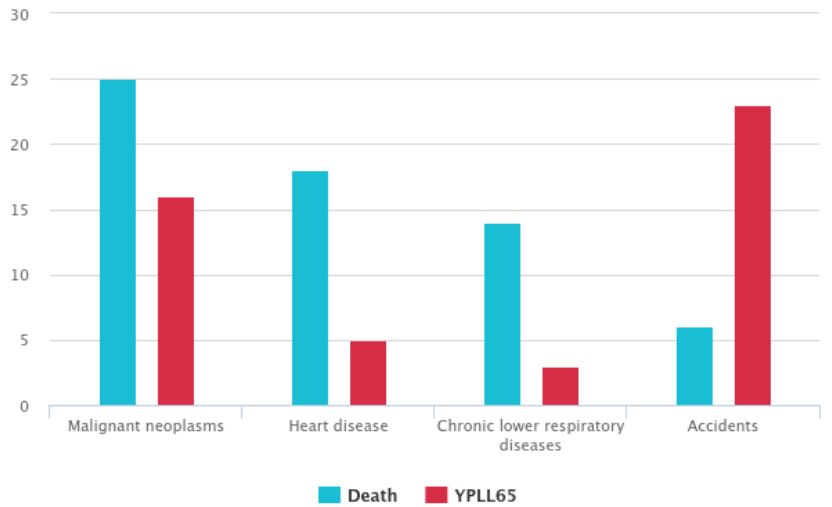
A community health assessment would not be complete without examining health outcomes. Indicators such as Leading Causes of Death in Asotin and Garfield Counties and Years of Potential Life Lost relative to age 65 give a snapshot of morbidity and mortality, leading to indicators for cardiovascular health, cancer and diabetes as specific targets of equitable interventions.

LEADING CAUSES OF DEATH

The top causes of death in Asotin, Columbia, and Garfield Counties were malignant neoplasms (cancer), heart disease, and chronic lower respiratory diseases. YPLL 65 is defined as the years of potential life lost relative to age 65 per 100,000 population. YPLL 65 is a measure of premature death that focuses on deaths that could have been prevented. Measuring YPLL allows communities to target resources to high-risk areas and further investigate the causes of premature death.

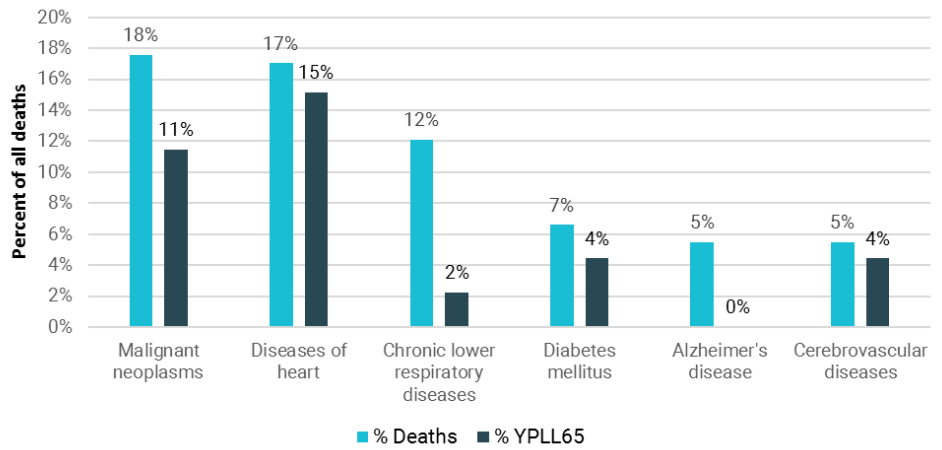
Leading Causes of Death - Columbia County

Source: WA State Death Certificate Data 2014-2016



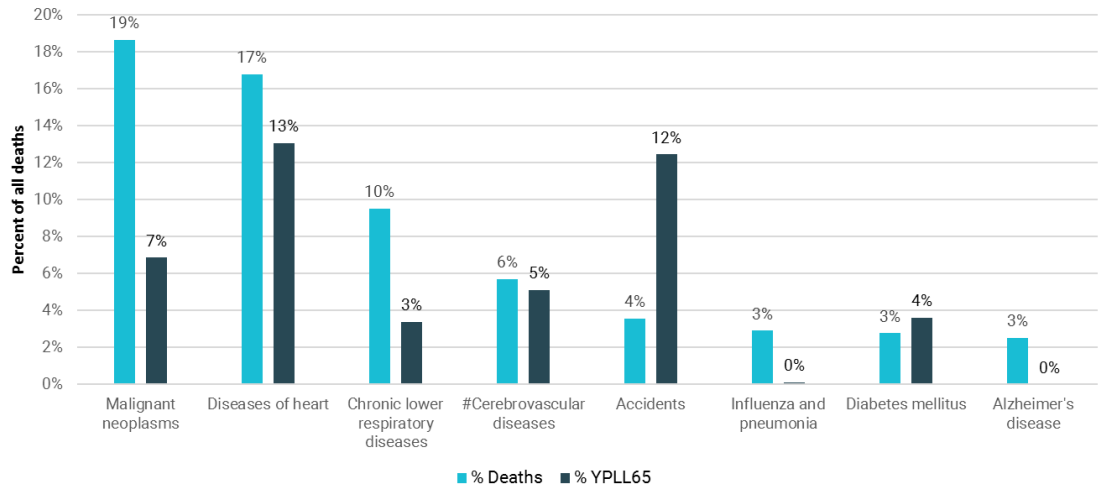
Leading Causes of Death and YPLL65 - Garfield

Source: WA State Death Certificate Data 2011-2017



Leading Causes of Death and YPLL65 - Asotin

Source: WA State Death Certificate Data 2011-2017

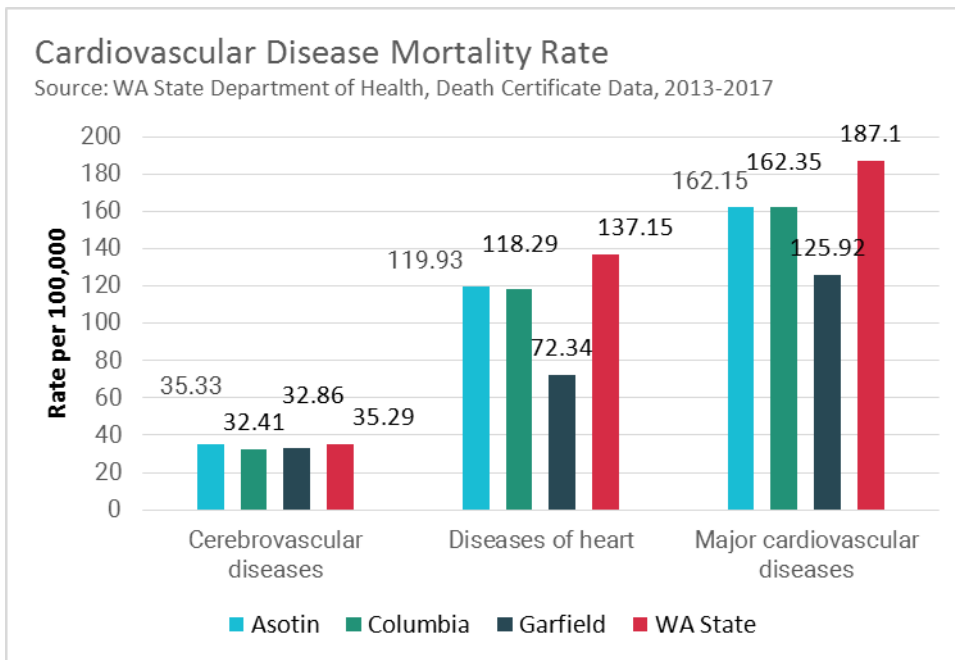


CARDIOVASCULAR HEALTH

Cardiovascular disease is the leading cause of death in the United States. High blood pressure, high LDL cholesterol, and smoking are the three most significant risk factors for cardiovascular disease, followed by diabetes, obesity, poor diet, and excessive alcohol use.

Major cardiovascular diseases were leading causes of death in the Southeast Washington community. While not statistically significant, the death rate due to cardiovascular disease in Asotin, Columbia, and Garfield Counties appeared slightly lower than the overall rate in the state of Washington.

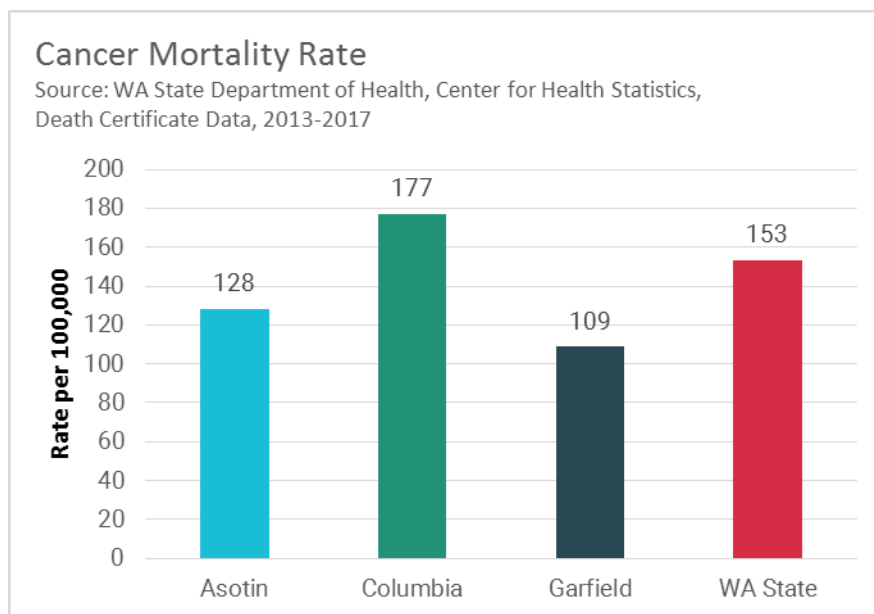
Preventive measures include eating a healthy diet, exercising, limiting alcohol use, not smoking, and maintaining a healthy weight.



CANCER

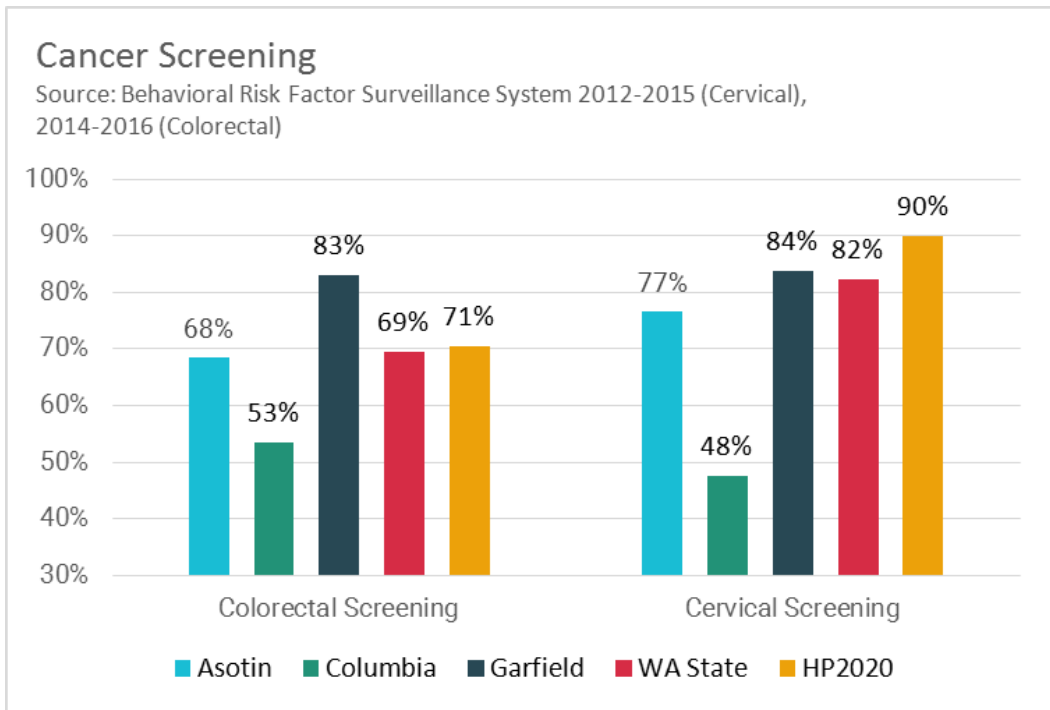
Cancer Mortality

Malignant neoplasms (cancerous tumors), were the leading cause of death in Asotin, Columbia, and Garfield Counties. The cancer mortality rate in Columbia County was slightly higher than the Washington State rate. The rates in Asotin and Garfield Counties were slightly lower.



Cervical Cancer Screening

The cervical cancer screening rate in Asotin and Columbia Counties were lower than the Washington State rate. All counties fell below the Healthy People 2020 goal of 90 percent. It is recommended that every woman between the ages of 21 and 29 years have a Pap test every three years and women between the ages of 30 and 65 years have a combination Pap testing and HPV testing every 5 years. Pap tests can identify possibly treatable irregularities on the cervix that may be cervical cancer or its precursor. The test detects cervical cancer in its initial states, leaving time for effective treatment to be given.



Colorectal Cancer Screening

The colorectal cancer screening rate in Garfield County was higher than the Washington State rate and Healthy People 2020 goal. The rate in Columbia County was lower than both the state rate and Healthy People 2020 goal while the rate in Asotin was the same as the state.

Adults between 50 and 75 years should be initially screened for colorectal cancer, while the decision to screen after 75 should be made on an individual basis and with the advice of a physician. Colorectal screening searches for pre-cancerous polyps in the colon or rectum that can then be removed before they become cancerous. Screening can also detect colorectal cancer at an early stage, while it is still very treatable. Screening is important because early-stage colorectal cancer can be asymptomatic.

DIABETES

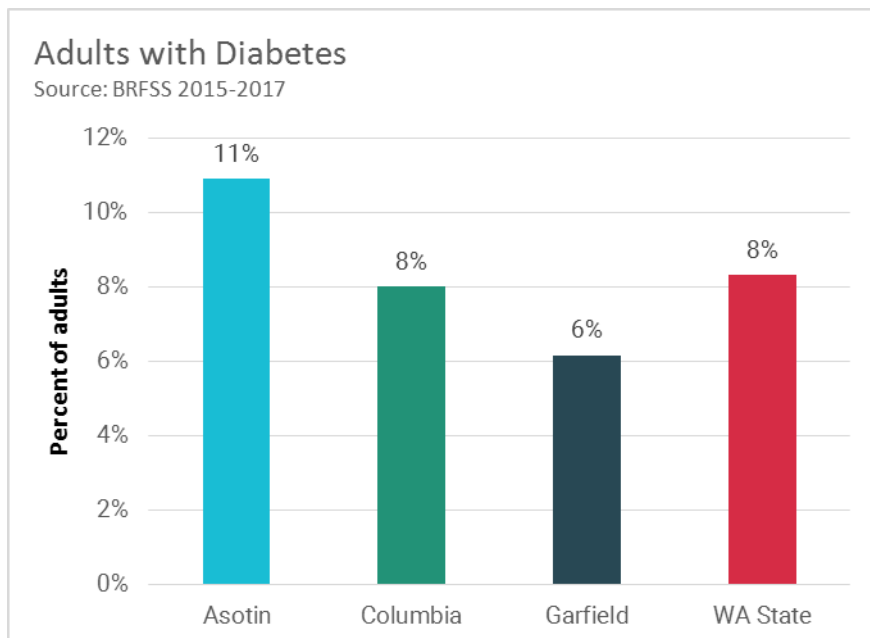
The Diabetes Rate in Asotin County was higher than Washington State rate. The rates in Columbia and Garfield Counties were similar to the state rate.

Diabetes is a serious, progressive chronic illness in Asotin and Garfield Counties and across the United States. In 2017, it affected 30.3 million people in the USA, or approximately 9.4 percent of the US population. People with diabetes are at higher risk of serious health complications including blindness, kidney failure, heart disease, stroke, and loss of toes, feet, or legs. People with diabetes are twice as likely to have heart

disease or a stroke as people without diabetes—and at an earlier age.

There are three types of diabetes. Type I diabetes is an autoimmune disease that is not preventable and can develop at any stage in person's life. Type II diabetes is much more prevalent and usually develops later in life. It is typically preventable

through lifestyle modifications. Being overweight and having a family history of diabetes are two major risk factors for Type II diabetes. Staying active, eating healthy, and maintaining a healthy weight are three important ways to prevent its onset. Gestational diabetes develops in pregnant women who have never had diabetes and usually relinquished following pregnancy. Gestational diabetes increases both the mother and child's risk of developing type 2 diabetes later in life.



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CLOSING SUMMARY AND NEXT STEPS

Strengths and Weaknesses

The process used to select indicators for this report was collaborative and inclusive, drawing participation from a wide variety of community organizations. Using a collaborative indicator selection process generated interest among community members, and allowed for valuable discussion about the meaning of data included in this report. While the process revealed a lack of recent data for many topics. Participants identified a need for more data in many areas including mental health, physical environment, healthy aging, wait times for appointments, transportation, food choices throughout the community, civic participation, economic diversity, and accessibility. Further discussion of these needs will occur through “Next Steps” outlined below.

Next Steps

This assessment will be used to base the community's health priorities over the next three to five years. Asotin, Columbia, and Garfield Counties will undergo extensive Community Health Improvement Planning (CHIP) processes that will involve stakeholders from throughout the community. Recommendations identified in the CHIPs will be used to drive community action over a period of three to five years.

Contact

To participate in Community Health Improvement Planning, please contact Martha Lanman at Martha_Lanman@co.columbia.wa.us. For more information on this assessment, please contact Morgan Linder at mlinder@co.walla-walla.wa.us.

DATA SOURCES

| | |
|-----------------------------|---|
| Demographics | Demographics: <i>U.S. Census Bureau Quickfacts 2017</i> |
| | Life Expectancy: <i>Washington State Department of Health, Center for Health Statistics, Death Certificate Data, 1990–2016</i> |
| Education | Kindergarten Readiness, 3rd Grade Reading: <i>Office of Superintendent of Public Instruction Report Card, 2015-2016</i> |
| | Four-Year Graduation Rates: <i>Office of Superintendent of Public Instruction Graduation and Dropout Statistics Annual Report 2016-2017</i> |
| | Educational Attainment: <i>U.S. Census Bureau American Community Survey 5-Year Estimates 2012-2016</i> |
| Income | Population below Federal Poverty Line: <i>U.S. Census Bureau, Small Area Income and Poverty Estimates 2012-2016</i> |
| | SNAP Utilization, Free and Reduced Lunch: <i>DSHS Research and Data Analysis Division Client Services Report 2016-2017</i> |
| | Median Household Income: <i>U.S. Census Bureau American Community Survey 5-Year Estimates 2012-2016</i> |
| | Wage by Industry: <i>Employment Security Department, Quarterly Census of Employment and Wages, Annual Averages 2016</i> |
| Housing | Renters paying 30% or more: <i>U.S. Census Bureau American Community Survey 5-Year Estimates 2012-2016</i> |
| | Homelessness: <i>Washington State Department of Commerce Point in Time Count 2018</i> |
| Social Context | Violent Crime Rate: <i>County Health Rankings 2018</i> |
| | Bullying: <i>Healthy Youth Survey 2018</i> |
| Community Engagement | Limited English-speaking households: <i>U.S. Census Bureau American Community Survey 5-Year Estimates 2012-2016</i> |
| Access to Care | Health Insurance coverage: <i>U.S. Census Bureau's Small Area Health Insurance Estimates 2016</i> |
| | Adults having checkup in past year, Adults not seeing provider due to cost: <i>Behavioral Risk Factor Surveillance System 2014-2016</i> |
| | Adults with Personal Care Provider: <i>Behavioral Risk Factor Surveillance System 2014-2016</i> |
| | Primary Care Providers: <i>County Health Rankings 2018</i> |
| | Mental Health Providers: <i>County Health Rankings 2018</i> |
| | Adults having dental exam in past year: <i>Behavioral Risk Factor Surveillance System 2016</i> |
| | Prenatal Care: <i>Washington State Department of Health, Center for Health Statistics (CHS), Birth Certificate Data, 2014–2016</i> |
| | HIV Screening Rate: <i>Behavioral Risk Factor Surveillance System 2016</i> |
| | Child Immunization: <i>Washington State Immunization Information System, 2018</i> |
| | Adult Flu Vaccination: <i>Behavioral Risk Factor Surveillance System 2014-2016</i> |
| Substance Use | Adult cigarette smoking: <i>Behavioral Risk Factor Surveillance System 2014-2016</i> |
| | Youth tobacco use: <i>Healthy Youth Survey 2016-2018</i> |

| | |
|--------------------------------|---|
| Substance Use | Smoking during pregnancy, low birth weights: <i>Washington State Department of Health, Center for Health Statistics (CHS), Birth Certificate Data, 2014–2016</i> |
| | Adult binge drinking: <i>Behavioral Risk Factor Surveillance System 2015-2016</i> |
| | Youth alcohol use: <i>Healthy Youth Survey 2016-2018</i> |
| | Overdose death rate: <i>Washington State Department of Health, Center for Health Statistics, Death Certificate Data, 2012-2016</i> |
| | Overdose hospitalization: <i>Washington State Hospital Discharge Data, Comprehensive Hospitalization Abstract Reporting System (CHARS) 2012-2016</i> |
| | Youth marijuana use: <i>Healthy Youth Survey 2016-2018</i> |
| Mental Health | Adults with Poor Mental Health: <i>Behavioral Risk Factor Surveillance System 2014– 2016</i> |
| | Suicide Rate: <i>Washington State Department of Health, Center for Health Statistics, Death Certificate Data, 2012– 2016</i> |
| | Provider Knowledge: <i>Walla Walla Suicide Prevention Work Group Mental Health Survey 2017</i> |
| | Youth depressive feelings and suicidal thoughts: <i>Healthy Youth Survey 2016-2018</i> |
| Weight Status | Adult leisure time physical activity, Adults meeting activity recommendations: <i>Behavioral Risk Factor Surveillance System 2014-2016</i> |
| | Youth meeting activity recommendations: <i>Healthy Youth Survey 2016-2018</i> |
| | Adult Obesity: <i>Behavioral Risk Factor Surveillance System 2014-2016</i> |
| | Youth Obesity: <i>Healthy Youth Survey 2016-2018</i> |
| Communicable Disease | Gonorrhea and Chlamydia: <i>Washington State Department of Health, STD Services Section, 2015–2017</i> |
| Teen Pregnancy | Teen Pregnancy: <i>Washington State Department of Health, Center for Health Statistics, Vital Statistics System–Washington State Certificate of Live Birth, 2015–2017</i> |
| Environmental Factors | Commuting to work: <i>U.S. Census Bureau American Community Survey 2012-2016</i> |
| | Access to exercise opportunities: <i>County Health Rankings 2018</i> |
| | Air Quality: <i>U.S. Environmental Protection Agency Air Data, 2017</i> |
| | River Quality: <i>Washington State Department of Ecology River Water Quality Monitoring Network 2017</i> |
| Leading Causes of Death | Leading Causes of Death, YPLL65: <i>Washington State Department of Health, Center for Health Statistics, Death Certificate Data, 2014–2016</i> |
| Cardiovascular Disease | Cardiovascular disease mortality rate: <i>Washington State Department of Health, Center for Health Statistics, Death Certificate Data, 2014– 2016</i> |
| Cancer | Cancer mortality rate: <i>Washington State Department of Health, Center for Health Statistics, Death Certificate Data, 2014– 2016</i> |
| | Cervical Cancer screening: <i>Behavioral Risk Factor Surveillance System 2012-2015</i> |
| | Colorectal Cancer screening: <i>Behavioral Risk Factor Surveillance System 2014-2016</i> |
| Diabetes | Adults with Diabetes: <i>Behavioral Risk Factor Surveillance System 2014-2016</i> |