



COMMUNITY HEALTH NEEDS ASSESSMENT

2024-2026



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ACKNOWLEDGEMENTS

The process of developing this Community Health Needs Assessment (CHNA) into a rich and meaningful resource for residents of Ashland, Bayfield, and Iron County is indebted to the contributions of individuals from the community. The observations and participation from over a thousand residents across the three-county region helped to lay the foundation for this assessment and subsequent plan. We value your input and insight on the health of where we live, work, and play. We were able to greater develop the information gathered through our CHIP Steering Committee, a focus group, and a stakeholder feedback meeting. Through everyone's involvement, we take a greater step towards a healthier future for Ashland, Bayfield, and Iron Counties.



**LUKE
BEIRL**

Interim CEO, Tamarack Health

“Conducting this Community Health Needs Assessment with other organizations in our region is key to not only getting a workable sample size from the survey, but analyzing the data to be used in an effective plan for change.”



CHNA Steering Committee

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INTRODUCTION

Local health departments and hospitals are responsible for conducting a Community Health Needs Assessment (CHNA), which is instrumental to developing a Community Health Improvement Plan (CHIP).

For the last several iterations, Ashland, Bayfield, and Iron County Health Departments have worked in collaboration with Ashland Medical Center in creating these processes and plans. The CHIP has been a useful tool for enacting change at the local level. Information can be put into action through the process of identifying and addressing health needs with the support and ideas of community organizations, local businesses, and devoted individuals.

From a 2022 County Health Rankings report, out of 72 Wisconsin counties, Ashland County ranks 67th, Bayfield County ranks 29nd, and Iron County ranks 28th (the higher the number, the less healthy the county). Overall health outcomes consider how long people in each county live and how healthy they feel during their life. These measures include premature death, poor or fair health, poor physical health days, poor mental health days, and low birth weight.

To survey this tri-county region, an online and paper community health survey was sent out in early 2024 for residents to share what they believe are current health and socioeconomic concerns in our communities.

Social Determinants of Health

For a community to truly thrive, certain factors are crucial that impact health outcomes, including the conditions in which people live, work, and age, known as **Social Determinants of Health**. These also include the broader systems and forces that shape daily life, such as economic policies, social norms, and political structures.

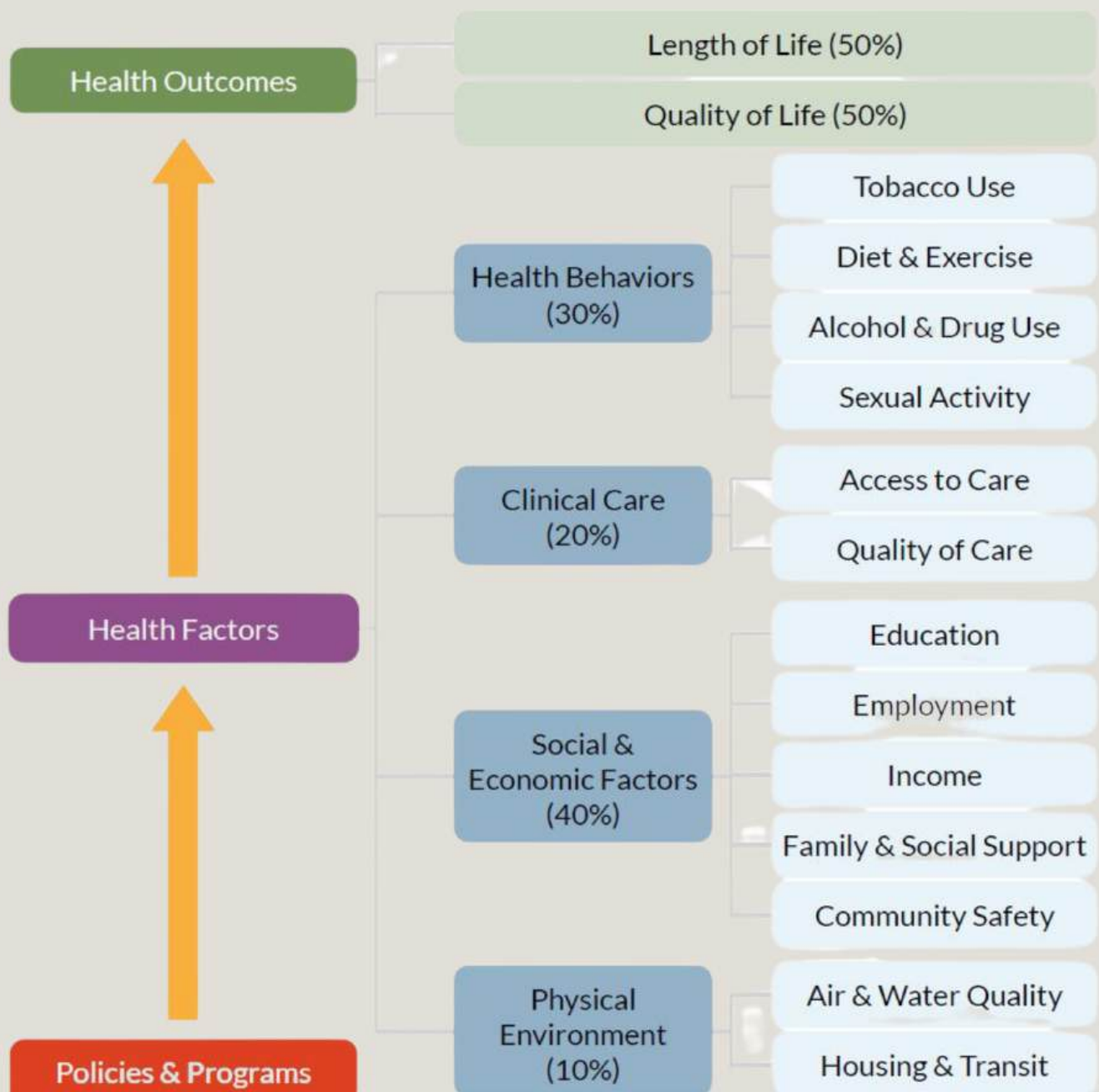
These are important to keep in mind when identifying goals to make improvements in the overall health of a community.



County Health Rankings

Similar to Social Determinants of Health are the County Health Rankings.

These rankings give a closer look at how the health of a county is influenced by habits like smoking, drinking alcohol, exercise, physician access, and the Social Determinants of Health referenced above. The County Health Rankings and Roadmap website provides county-specific data on each of these measures.



Community Profile

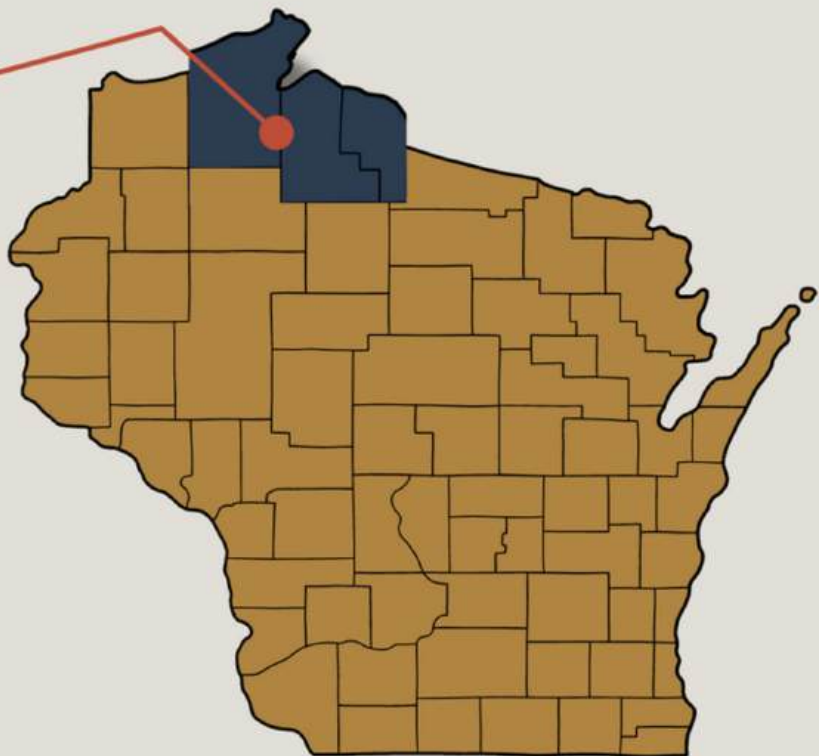
Tamarack Health and all three county health departments (Ashland, Bayfield, and Iron) continued the collaboration as before in conducting the Community Health Needs Assessment.

Ashland, Bayfield,
and Iron Counties

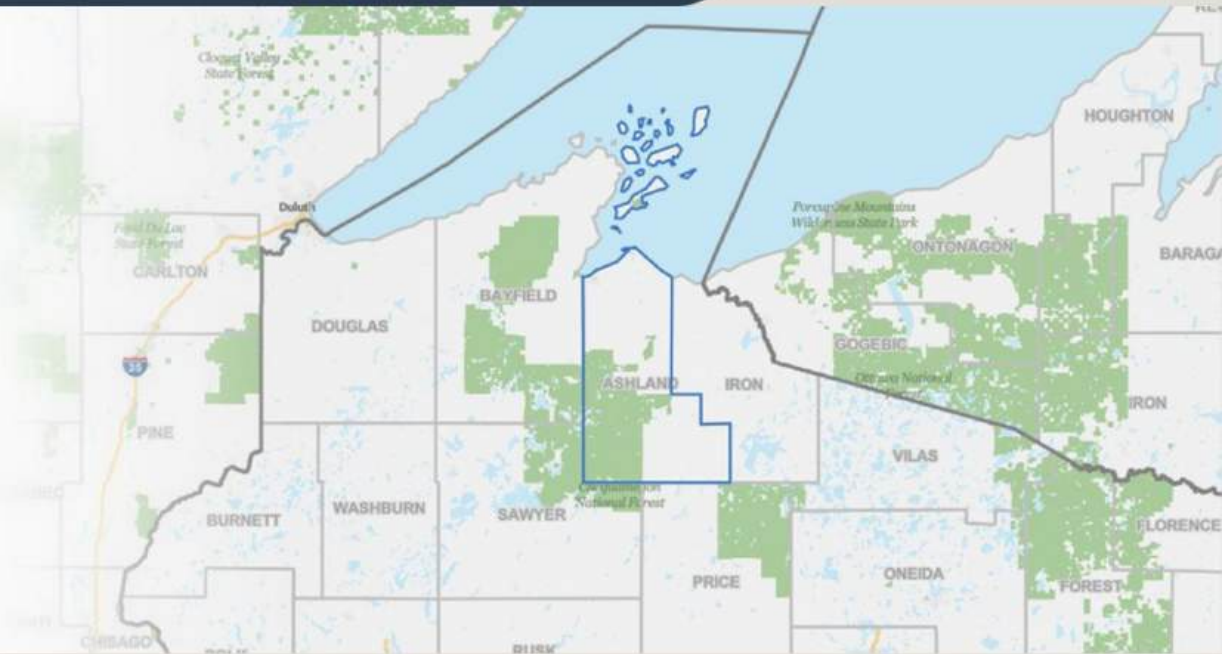


39,076

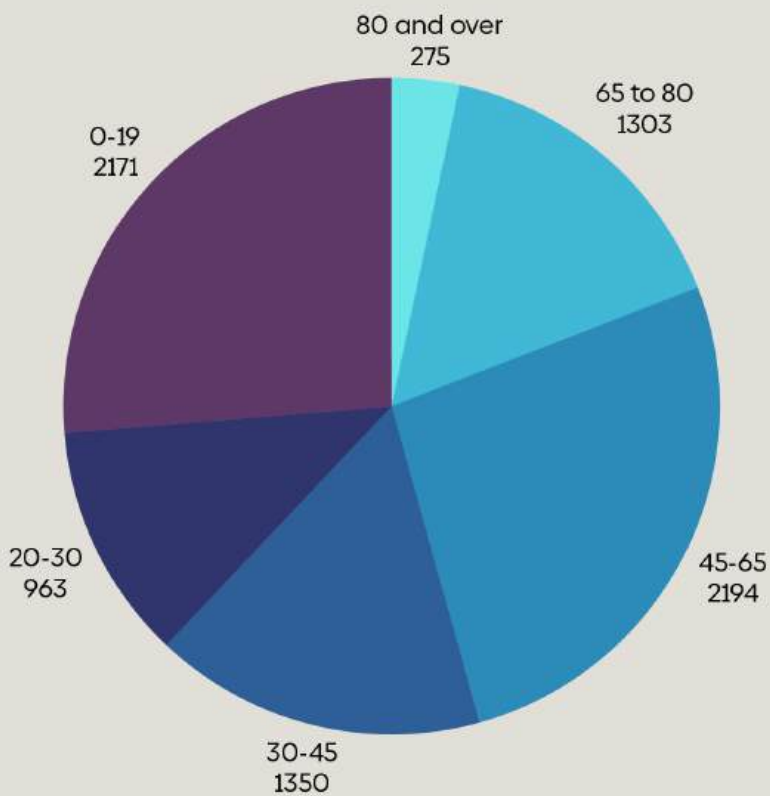
Total tri-county population



Ashland County



Age Breakdown



People without health insurance



6.5%

(1.6% above state average)

Median Household Income



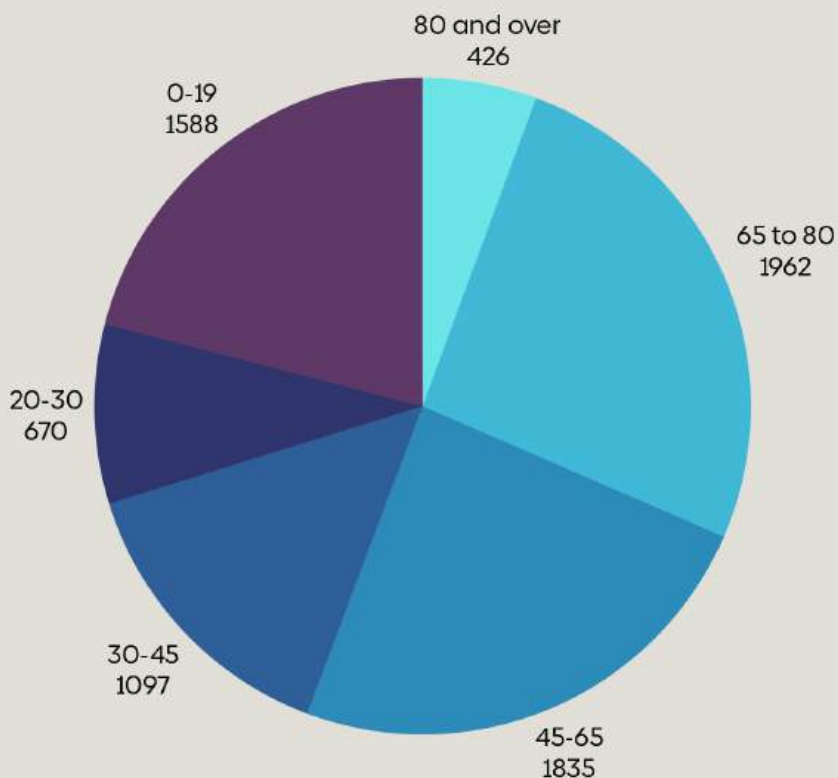
\$57,000

(\$17,631 below state average)

Bayfield County



Age Breakdown



People without health insurance



5.8%

(.9% above state average)

Median Household Income



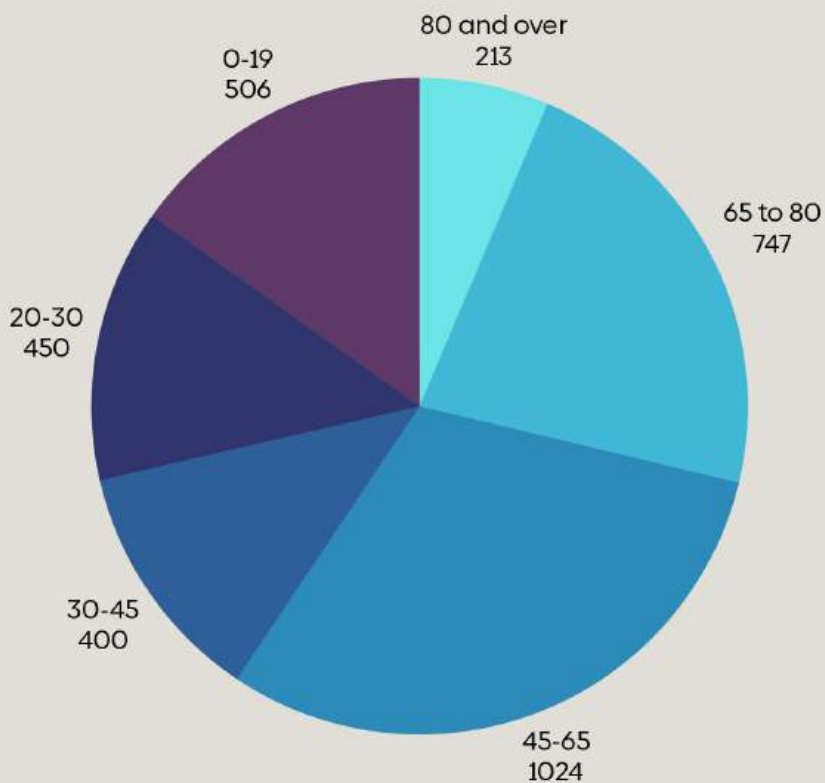
\$67,266

(\$7,365 below state average)

Iron County



Age Breakdown



People without health insurance



6.2%

1.3% above state average)

Median Household Income



\$55,777

(\$18,854 below state average)

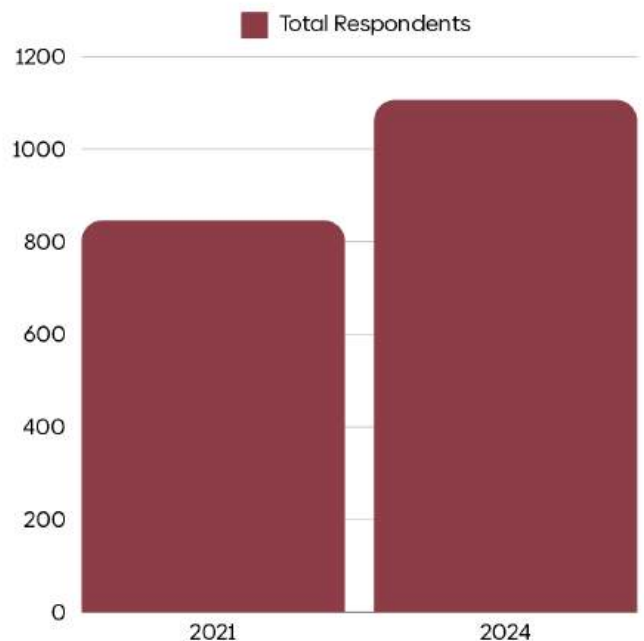


SURVEY PROCESS

In early 2024, an online and paper survey was created by the CHIP steering team to send out to our tri-county residents for participation. We have over 1,000 respondents, which is the most we've ever had.

The promotion of the online survey was funded by Tamarack Health, and allowed the survey to receive great engagement online, including the Tamarack Health website, social media platforms, and more.

There were also paper surveys available. The local public health departments made great efforts to get these into the hands of elderly residents, community groups, and our local Native American tribes. We received hundreds of paper surveys.



NEW QUESTIONS

It's universally accepted there's a housing crisis across our nation, and locally, as well. With that, we wanted to add additional questions about housing availability, costs, and senior living facilities.

Another new question added this survey was in regards to loneliness. The COVID pandemic shifted the way people socialized, and for many, it had devastating effects that still linger today.

30.7%

Increase in respondents over the last survey



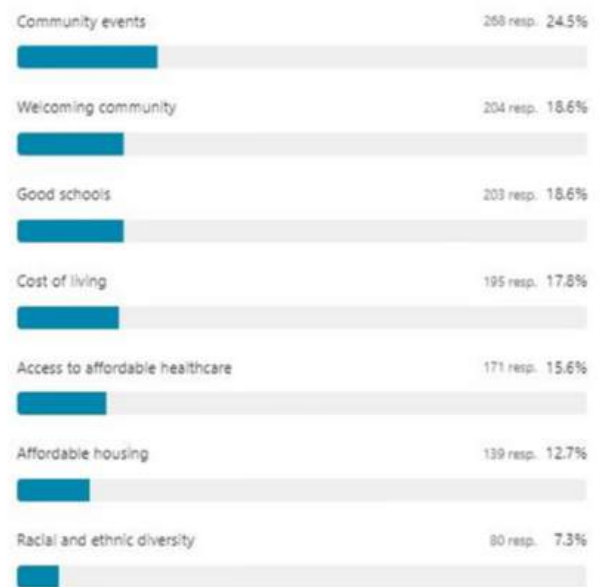
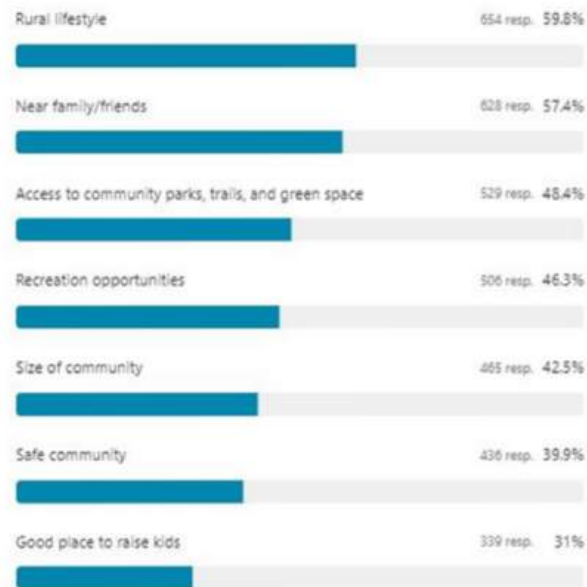
1,106

total survey respondents



The reasons we love living here.

Ashland, Bayfield, and Iron County residents were asked in the community survey to select what they believe are the best reasons to live here.

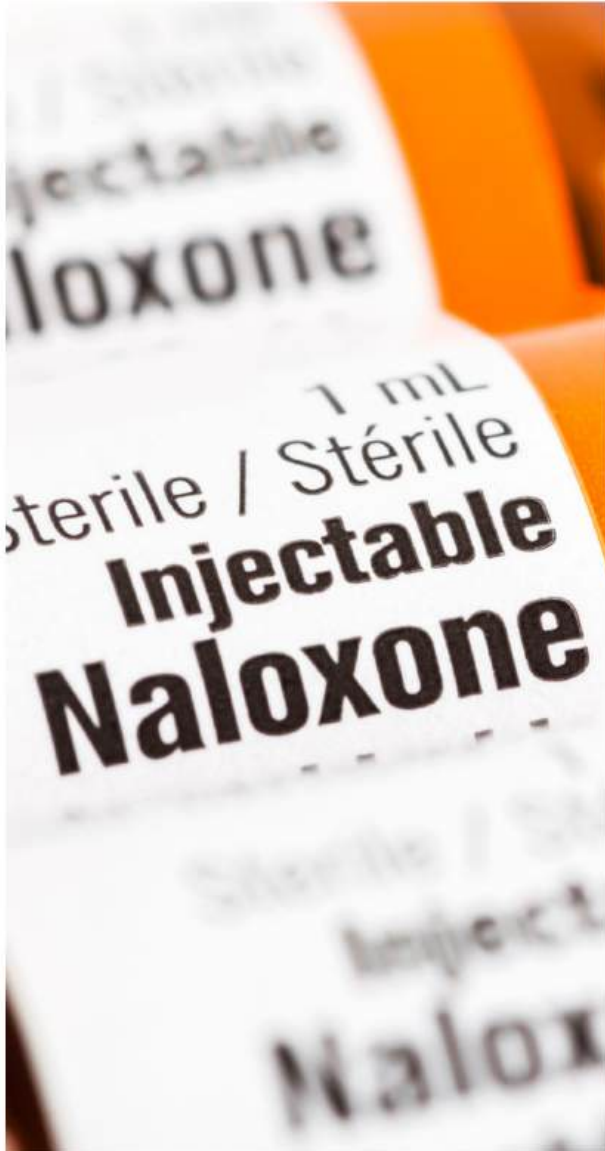


A healthcare professional, likely a nurse or doctor, is shown from the chest down, wearing blue scrubs and a stethoscope. They are focused on a patient's arm, which is resting on a surface. The patient is wearing a beige, textured sweater. The healthcare professional is holding a black blood pressure cuff and a manual sphygmomanometer. The background is blurred, suggesting a clinical setting.

Health Behaviors and Concerns



DRUG USE



“In the area I reside there is a lot of drug abuse, finding used needles around playground equipment where my child plays.”

CENSUS DATA

For Ashland County, drug overdose deaths were 42 per 100K, which is up from Wisconsin's rate of 26 per 100K. The death rate from opioids (per 100K) were 21.0 for Ashland, 7.9 for Bayfield, and 5.7 for Iron. The state rate is 17.7.

#1 issue for respondents

Drug use was identified in the community survey as the #1 issue by all three counties (70% of respondents named it #1).

COMMUNITY RESPONSE

744 of the 1,106 respondents ranked drug use as a health concern in our tri-county area.

While there are current harm reduction programs in place, there is still an existing stigma that surrounds those programs. The CHIP will address ways to de-stigmatize this.

Of the 744 respondents who marked drug use as a health concern,

- 652 are Caucasian
- 62 are Native American
- 31 Prefer Not To Answer
- 11 are Asian
- 7 are Multiracial
- 5 are African American
- 5 are Other
- 2 are Hispanic
- 1 is Pacific Islander

MENTAL HEALTH, SUICIDE



“As a healthcare provider in the area, I have seen countless patients with mental health issues and be unable to get access to a provider for it.”

CENSUS DATA

All three counties were higher than the state and national rates of “frequent mental distress (14 or more days in the past 30 days). Ashland’s rate is 16%, Bayfield’s is 15%, and Iron’s is 16%.

#2 issue for respondents

Mental Health/Suicide was identified in the community survey as the #2 issue by all three counties (62% of respondents named it #2).

COMMUNITY RESPONSE

663 of the 1,106 respondents ranked mental health/suicide as a health concern in our tri-county area.

Of the 663 respondents who marked mental health/suicide as a health concern,

- 185 make less than \$50,000 a year
- 24 remarked that they don’t have one person they can talk to if they have a personal problem.
- 96 remarked they feel access to healthcare is a benefit to living here

ALCOHOL USE



CENSUS DATA

For Ashland County, the percentage of excessive drinking is 25%, for Bayfield it's 23%, and for Iron it's 20%. All of these are above the national percentage of 18%.

Iron County had the highest rate among the three counties (and above the state and national rate) of alcohol-impaired driving deaths at 54%.

#3 issue for respondents

Excessive alcohol use was identified in the community survey as the #3 issue by all three counties (55% of respondents named it #3).

COMMUNITY RESPONSE

587 of the 1,106 respondents ranked excessive alcohol use as a health concern in our tri-county area.

Of the 587 respondents who marked excessive alcohol use as a health concern,

- 48 said they WOULD NOT take advantage of a support group to get help
- 429 said they WOULD take advantage of a support group to get help

INJURY



CENSUS DATA

Of the three counties, Ashland has the highest rate of injury deaths per 100K at a rate of 130. Bayfield is at 98, and Iron is at 111. The state rate is 93 and the national is 80.

Both Ashland and Bayfield Counties are higher than the state and national rates for firearm fatalities (Ashland 17 per 100K, Bayfield 20 per 100K) and motor vehicle crash deaths (Ashland 13 per 100K, Bayfield 26 per 100K).

**13% of
respondents**

marked injuries and accidents
(motor vehicles, ATV/UTV,
bicycles) as a top health concern.

COMMUNITY RESPONSE

147 of the 1,106 respondents ranked injuries and accidents as a health concern in our tri-county area.

Economic Stability and Housing



MEDIAN HOUSEHOLD INCOME

CENSUS DATA

- For the nation, the median household income was \$74,580 in 2022, a 2.3 percent decline from the 2021 estimate of \$76,330.
- Householders under the age of 65 experienced a decline in median household income of 1.4 percent from 2021, while householders aged 65 and over did not experience a significant change in median income between 2021 and 2022.

\$60,014

is the average median household income for all three counties (Ashland is \$57,000, Bayfield is \$67,266, Iron is \$57,777).

The median household income for Wisconsin is \$74,631.

COMMUNITY RESPONSE

556 of the 1,106 respondents noted that they make less than \$75,000 per year.

16% of Ashland County is at or below the poverty level.



EMPLOYMENT



“I work at the college and fear that there are no jobs in this area that I am qualified for where I can earn a living wage.”

CENSUS DATA

According to census data, the top three industries in Ashland County are: **Educational services/health care services, manufacturing, and retail trade.**

Bayfield: **Educational services/health care services, arts/entertainment/accommodation, and manufacturing.**

Iron: **Educational services/health care services, manufacturing, and arts/entertainment/accommodation.**

The unemployment rate for all three counties is higher than both the state (2.9%) and national (3.7%) percentages

(Ashland is 3.9%, Bayfield is 4.8%, and Iron is 5.1%).

COMMUNITY RESPONSE

376 of the 1,106 respondents noted they are unemployed, retired, or unable to work.

HOUSING



CENSUS DATA

Data tells us that all three counties are reported to have **13% severe housing problems**, which is the same rate as the state. Severe housing problems are defined by the County Health Rankings and Roadmaps as the percentage of households with one or more of the following housing problems: housing unit lacks complete kitchen facilities, housing unit lacks complete plumbing facilities, household is overcrowded, or household is severely cost burdened.

Average increase of **\$18,631**

for the median home price in Ashland, Bayfield, and Iron Counties from 2023 to 2024.

Median home prices:

Ashland = \$172,690
Bayfield = \$267,470
Iron = \$180,360

COMMUNITY RESPONSE

543 of the 1,106 respondents indicated that lack of housing is a concern, and 75 indicated that their current housing does not fit their needs.

“The Ashland/Bayfield Co areas are in desperate need of affordable, safe housing. I have been at my current job for over 12 years and after taking out for health insurance and taxes, I would not, as a single mother be able to afford rent and basic living expenses in the Ashland/Bayfield Co area. Rent for the most basic apartments is over \$1000 a month.”

FINANCIAL HARDSHIP



CENSUS DATA

County Health Rankings and Roadmaps define **income inequality** as the ratio of household income at the 80th percentile to income at the 20th percentile.

Ashland = 5.2%

Bayfield = 3.9%

Iron = 4.2

The state percentage is 4.2 % and the national is 4.9%.

367

of the 1,106 respondents remarked that they do not have enough money for basic needs.

COMMUNITY RESPONSE

543 of the 1,106 respondents indicated that if they were to unexpectedly be without income for three months, they wouldn't be able to cover all their expenses.

351 of the 1,106 respondents indicated that at the end of the month, they are unable to save money.

"Housing in general is a hard find but you couple that with rising rent prices and low wages, people can't afford to even live. Food insecurity seems to be rising as well as the price of food continues to jump."

"My child care costs \$1200 a month - more support for children and young families within this community."

FOOD INSECURITY



CENSUS DATA

County Health Rankings and Roadmaps define **Food Insecurity** as the percentage of population who lack adequate access to food.

State = 7%

Ashland = 11%

Bayfield = 9%

Iron = 11%

Evidence suggests food deserts are correlated with high prevalence of overweight, obesity, and premature death as supermarkets traditionally provide healthier options than convenience stores or smaller grocery stores.

COMMUNITY RESPONSE

543 of the 1,106 respondents selected “**sometimes**” or “**often**” to the question of “**In the last 12 months, how often have you worried that you would run out of food?**”

134 of the 1,106 respondents indicated that they purchase most of their food from convenience stores.

“Food insecurity seems to be rising as well, as the price of food continues to jump. I know they raised it slightly, but the guidelines for food stamps and Badgercare should be looked at again to reflect on the cost of living and low wages.”



Healthcare Access & Quality

PRIMARY CARE



CENSUS DATA

Data ranks primary care physicians by patient panel, that is, how many patients for every one physician.

State = 1,250:1

Ashland = 580:1

Bayfield = 2,330:1

Iron = 6,180:1

note: this data does not measure patients from one county who see a physician in a different county. For example, the ratio in Ashland may be much higher considering many Bayfield and Iron County residents come to Ashland for care.

Ashland, Bayfield, and Iron Counties are under the state rate for flu vaccinations, mammography screenings, and preventable hospital stays.

COMMUNITY RESPONSE

512 of the 1,106 respondents ranked the availability of primary care providers as needed improvement.

260 of the 1,106 respondents ranked the availability of preventive screenings as needed improvement.

“Trying to establish care with a primary care provider was difficult with wait times to get an appointment being close to 6 months out.”

“[We need] incentives for primary care providers to avoid burnout.”

HEALTH INSURANCE



CENSUS DATA

Data tracks the percentage of uninsured populations, even breaking it down show uninsured adults vs uninsured children.

State = 6%

Ashland = 8%

Bayfield = 9%

Iron = 6%

Uninsured adults under 65

State = 7%

Ashland = 10%

Bayfield = 10%

Iron = 7%

Uninsured children

State = 4%

Ashland = 5%

Bayfield = 6%

Iron = 4%

COMMUNITY RESPONSE

The community ranked both the availability and affordability of health insurance being a concern.

371 of the 1,106 respondents ranked the availability of health insurance as needing improvement.

636 of the 1,106 respondents ranked the affordability of health insurance as needing improvement.

“Vision services [are] not covered by most insurances.”

“[I] have to drive 40 miles one way.”

CHRONIC DISEASES



CENSUS DATA

Data tracks the percentage of “frequent physical distress” (14 or more days in the past 30), in addition to diabetes prevalence, adult smoking, and adult obesity.

Adult Obesity

State = 34%

Ashland = 38%

Bayfield = 36%

Iron = 36%

Diabetes Prevalence

State = 8%

Ashland = 9%

Bayfield = 8%

Iron = 8%

Adult Smoking

State = 14%

Ashland = 20%

Bayfield = 16%

Iron = 17%

COMMUNITY RESPONSE

680 of the 1,106 respondents indicated both Overweight/Obesity Levels and Chronic Diseases as areas of community concern.

“I believe our community can focus on measures for health promotion and disease prevention. We can organize health education activities to advocate for healthy lifestyles, such as regular exercise, balanced diet, and abstaining from smoking and excessive drinking.”

ORAL HEALTH



CENSUS DATA

Data ranks dentists by patient panel, that is, how many patients for every one dentist.

State = 1,360:1

Ashland = 1,460:1

Bayfield = 2,370:1

Iron = 2,070:1

note: this data does not measure patients from one county who see a dentist in a different county. For example, the ratio in Ashland may be much higher considering many Bayfield and Iron County residents come to Ashland for dental care.

availability of dentists is ranked

a #2 clinical issue

by 537 of the 1,106
community respondents

COMMUNITY RESPONSE

680 of the 1,106 respondents ranked the affordability of dental care as their #2 clinical concern on the community survey.

“There are not enough dental providers that support individuals whose primary insurance is Wisconsin Medicaid. I have private dental insurance and still with this insurance the cost of receiving dental care for me and my family as a whole has become very expensive.”

A photograph of a person's legs from the knees down, wearing tan leather hiking boots with black socks. The person is standing on a mossy, uneven forest floor. The background is a blurred forest scene with trees and foliage. The image is overlaid with a semi-transparent orange band in the center containing the text.

Environmental & Community Factors

PHYSICAL ACTIVITY



CENSUS DATA

Physical inactivity rates for Ashland, Bayfield, and Iron Counties are at or above the state level, but lower than the national rate.

Nation = 23%

State = 19%

Ashland = 21%

Bayfield = 19%

Iron = 21%

Access to Exercise Opportunities

Ashland County: 69%

compared to the state
percentage of 84%

COMMUNITY RESPONSE

412 of the 1,106 respondents indicated that physical inactivity was an area of concern.

361 of the 1,106 respondents indicated a need for more safe place places to exercise or play outside (like parks, beaches, pools, etc).

“[We] could use more kid friendly water play areas that is not the lake.”

TRANSPORTATION

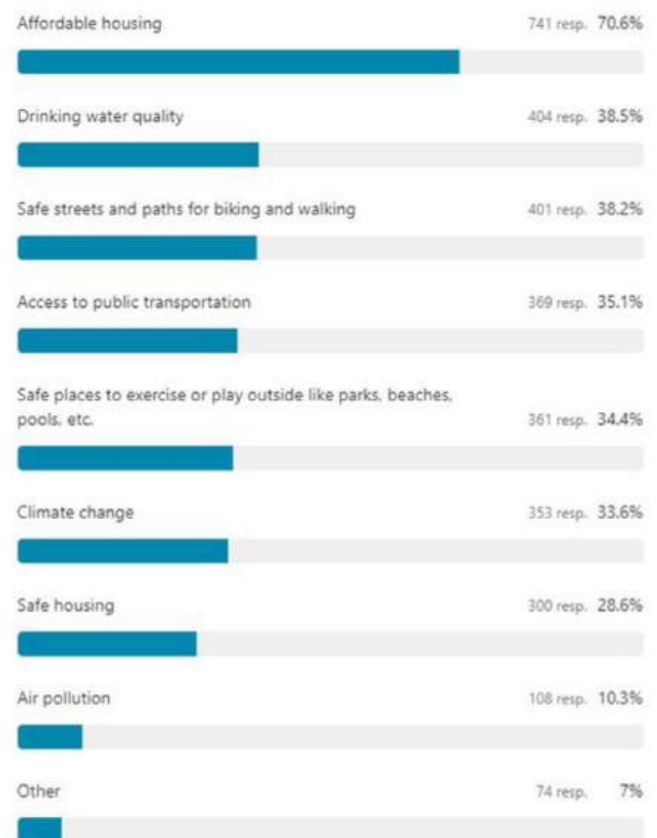


“If someone does not have reliable means of transportation and no one upon whom they can rely, there aren't too many options available to them.”

COMMUNITY SURVEY DATA

369 of the 1,106 respondents indicated that access to public transportation was an area of concern.

Access to public transportation was ranked fourth out of all the Physical Environment issues.



456

respondents indicated that transportation was a barrier to getting to a medical appointment.

ENVIRONMENTAL CONDITIONS



CENSUS DATA

The good news is that Ashland, Bayfield, and Iron Counties all rank under the national and state rates for air pollution and particulate matter.

While Bayfield and Iron Counties did not have any drinking water violations, Ashland County did report a drinking water violation.

404

respondents indicated
that drinking water quality
was an area of concern.

“[I’m] very concerned about lead in our drinking water.”

“Having safe drinking water seems like an easy choice. We received a letter in the mail from the city saying we might have lead poisoning from the ancient pipes that move our water around. Clean water to drink and being able to afford groceries is what we all want and need.”

A photograph of a woman and a young child sitting at a table outdoors at night. The woman is smiling and looking up, while the child is also looking up and pointing towards a string of warm white lights hanging above them. The table is set with plates of food, glasses, and a water bottle. The background is dark, with the lights providing the main illumination.

Social and Community Connection

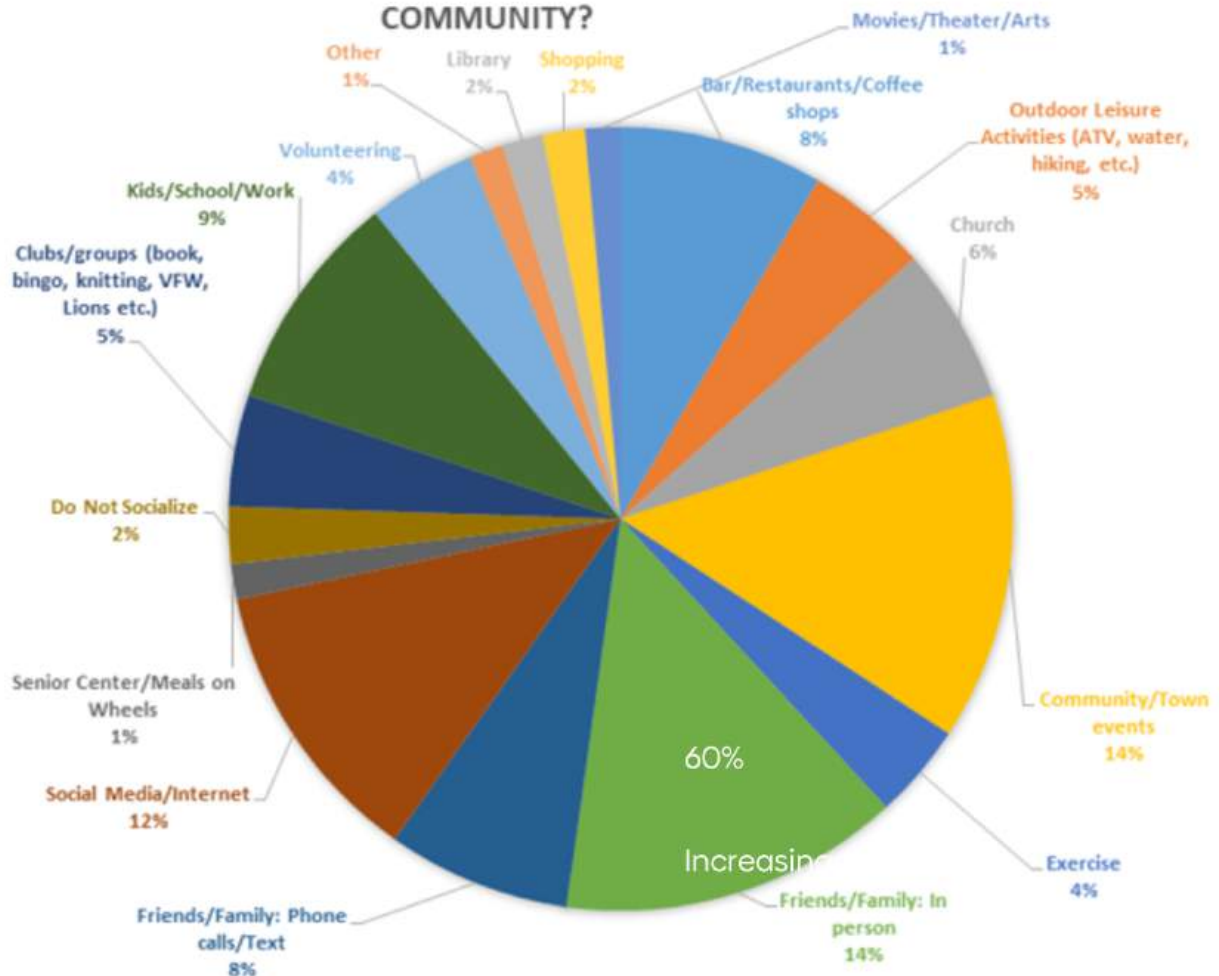
SOCIAL CONNECTION



We know that improved social connections ties back in to the social determinants of health - the multi-faceted approach to healthier individuals, healthier families, and healthier communities.

Coming out of the COVID pandemic, there was a notable fracture in the way people connect, with increased rates of digital and virtual connecting. However, our community survey indicated that people still find face-to-face connection and interaction valuable.

HOW DO YOU CONNECT OR SOCIALIZE WITH OTHERS IN YOUR COMMUNITY?



CHILD CARE



CENSUS DATA

Data around child care is generally measured by the **Child Care Cost Burden** (percent of income used for two children) and **Child Care Centers** (per 1,000 children under five years).

Child Care Cost Burden (%of income used for 2 children)

Nation = 27%

State = 31%

Ashland = 37%

Bayfield = 31%

Iron = 25%

Child Care Centers (per 1,000 children under two)

Nation = 7

State = 6

Ashland = 6

Bayfield = 7

Iron = 5

534

respondents indicated that both the availability and affordability of child care were areas of concern.

“Lack of child care slots for young parents. An initiative to compensate employers and child care start-ups would pay for itself by bringing a larger pool of job applicants, more job satisfaction/ less missed work days, more local consumers with spendable income, and safer care givers for our most vulnerable group.”

DISCRIMINATION



DATA

Healthy People 2030 describe discrimination as a socially structured action that is unfair or unjustified and harms individuals and groups. It is also identified as a social determinant of health in that an increase in discrimination can lead to unhealthy communities.

230

respondents indicated that they felt they or someone in their household were unfairly treated based on characteristics such as gender, age, race, and ethnicity, income.

Respondents included the following rationale for discrimination:

- Race/ethnicity
- Place of birth
- Gender
- Sexual orientation
- Criminal history
- Disability
- Income or socioeconomic status
- Citizenship status
- Age
- Primary language spoken
- Religion
- Weight

“ [There is] discrimination based on race and not enough providers for the growing needs of the community-givers for our most vulnerable group.”

USING THE CHNA WITH THE CHIP



HOW IS THIS DATA USED?

The data from the survey was compiled into the working data used in this report. A community focus group was then held in 2024 to provide feedback to the survey results, as well as the comparative state and national data. Finally, a stakeholder feedback meeting provided important direction for goal-setting for the CHIP plan based on the survey results, industry and non-profit programs already existing in the community, and available resources.

The CHIP Steering Team met to plan the final goals which are available to view in the 2024-2026 Community Health Improvement Plan (CHIP). The CHIP helps to identify ways in which the community, its agencies and municipalities, and local organizations can work together to affect change related to the health and socioeconomic concerns identified in the CHNA.

REFERENCES

COUNTY RANKINGS AND ROADMAPS

countyhealthrankings.org/

countyhealthrankings.org/sites/default/files/media/document/CHR2022_WI_O.pdf

HEALTHY PEOPLE 2030

<https://health.gov/healthypeople>

DEPARTMENT OF HEALTH AND HUMAN SERVICES

<https://www.dhs.wisconsin.gov/data.htm>

COMMUNITY HEALTH NEEDS ASSESSMENT

Conducted via Typeform

US CENSUS

[Census.gov](https://census.gov)

JOB CENTER OF WISCONSIN

<https://jobcenterofwisconsin.com/wisconomy>

