



Northeast Colorado Health Department Community Health Assessment

Health Begins in Our Communities.

Northeast Colorado Health Department has the proud distinction of serving the residents of Logan, Morgan, Phillips, Sedgwick, Washington, and Yuma counties to create the greatest possible opportunity for health for all of our residents. We serve a wide range of neighborhoods and communities, all with unique opportunities and challenges to health. This dashboard provides key data and insights about those challenges and opportunities.



What is a Community Health Assessment (CHA)?

Assessing the health status of the community is a core public health function provided by the Northeast Colorado Health Department (NCHD). The CHA includes quantitative data indicators on this dashboard as well as qualitative data collected through NCHD's Community Health Survey and Community Engagement Meetings. The data and information in this CHA helps to inform health department staff, government officials, and the community about our local health status and needs. It also helps to develop policy and operational priorities, allocate community resources, and plan for action to improve health.

 **CHA Progress Tracker**

1	Engage Community	10/1/2022	1/31/2023	Completed
2	Quantitative Health Data Indicator Assessment	9/1/2022	11/7/2022	Completed
3	Community Health Survey	8/1/2022	2/25/2023	Completed
4	Assess Capacity & Prioritize Issues	4/1/2023	7/31/2023	Completed
5	Develop Goals and an Action Plan	7/1/2023	9/30/2023	Completed
6	Take Action!	1/1/2024	12/31/2029	In Progress

How long do we live?

Ultimately, the job of public health is to **improve how long our residents live, and the quality of life our residents experience** throughout their lives. One key measure of the health of our community is life expectancy, which tells us how long a typical resident is expected to live when they are born. Communities that have more opportunities for health will generally have a longer life expectancy.

Life Expectancy at Birth

79
Years

Region 1 (NCHD Service Area)

80

Years

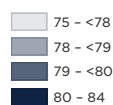
Colorado

Sources: CDC NCHS USALEEP 2010-2015

Life Expectancy at Birth

Region 1 (NCHD Service Area)

Life Expectancy at Birth



Sources: CDC NCHS USALEEP 2010-2015

How healthy are we compared to other counties in our state?

Each year, the [Robert Wood Johnson Foundation](#)¹² compiles data on a variety of health factors and outcomes to help communities compare their level of health to other peer counties in their state. These **County Health Rankings** use factors ranging from healthy behaviors such as regular exercise to outcomes such as rates of chronic disease. County Health Rankings help provide a standard for understanding how healthy we are overall.

+ Health Factors Rank

40

Out of 64 Counties

Sedgwick County, CO

36

Out of 64 Counties

Logan County, CO

49

Out of 64 Counties

Morgan County, CO

29

Out of 64 Counties

Washington County, CO

32

Out of 64 Counties

Yuma County, CO

30

Out of 64 Counties

Phillips County, CO

+ Health Outcomes Rank

36

Out of 64 Counties

Sedgwick County, CO

37

Out of 64 Counties

Logan County, CO

39

Out of 64 Counties

Morgan County, CO

45

Out of 64 Counties

Washington County, CO

22

Out of 64 Counties

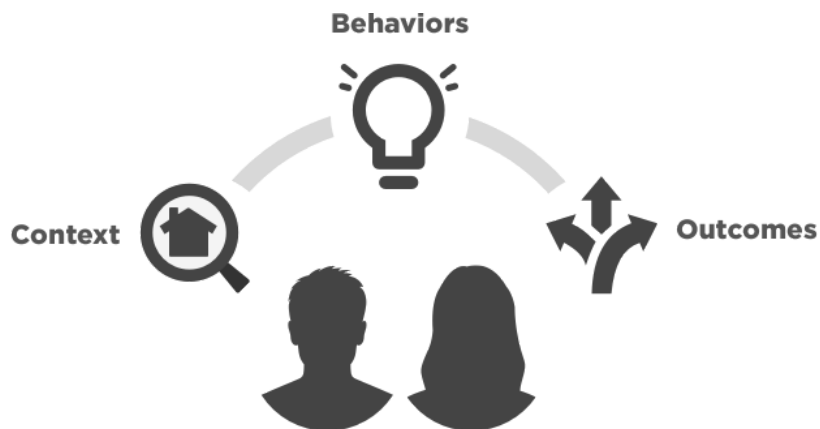
Yuma County, CO

31

Out of 64 Counties

Phillips County, CO

Sources: RWJF County Health Rankings, 2023



How can our community support the health of our residents?

The role of public health is no longer limited to preventing only acute illnesses linked to issues around sanitation and environmental health. Throughout this resource, you'll learn more about key factors in our **environment** that influence our everyday health **behaviors**. Together as a community, we can leverage these factors to move the needle on **health outcomes**.

Environment

Living in a walkable community decreases the risk of obesity and other diseases by encouraging physical activity.

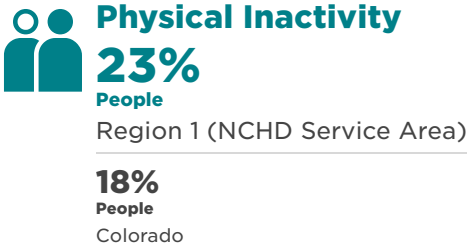


Sources: EPA 2021

Note: Walkability improves as scores approach 20

Behaviors

Behaviors, such as exercise, are shaped by the environment that a person is experiencing, such as a walkable community. Physical activity helps residents control their weight among numerous other health benefits.



Sources: CDC BRFSS PLACES 2023

Outcome

Health outcomes, such as obesity, are influenced by the environment and behaviors. Obesity is associated with common causes of death, including diabetes, heart disease, stroke, and some types of cancer.



Sources: CDC BRFSS PLACES 2023

Our Community Makeup Makes Us Who We Are

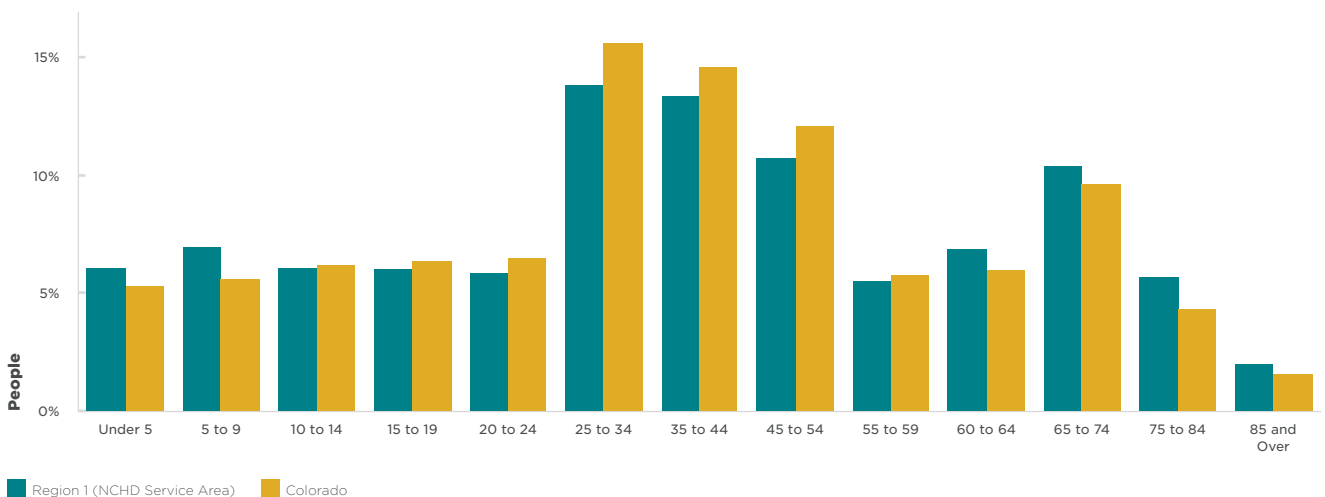
Northeast Colorado has unique communities that tend to share a few important traits. Each member of the community deserves the opportunity to live a full, healthy life. So we all get that chance, we need to provide resources and support that serve the needs of each community.



Age

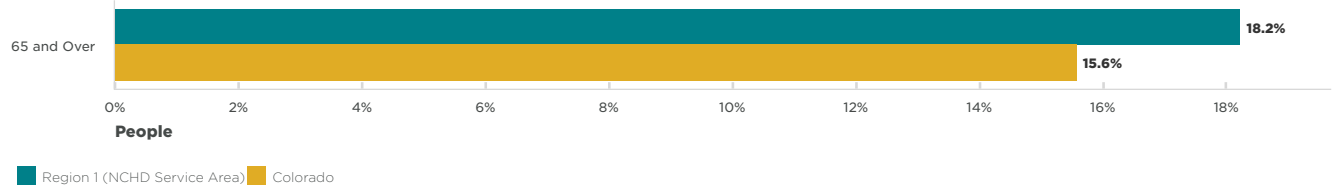
Our health needs change as we grow from children to senior adults.

Age Distribution



Sources: US Census Bureau ACS 5-year 2020-2024

Senior Population

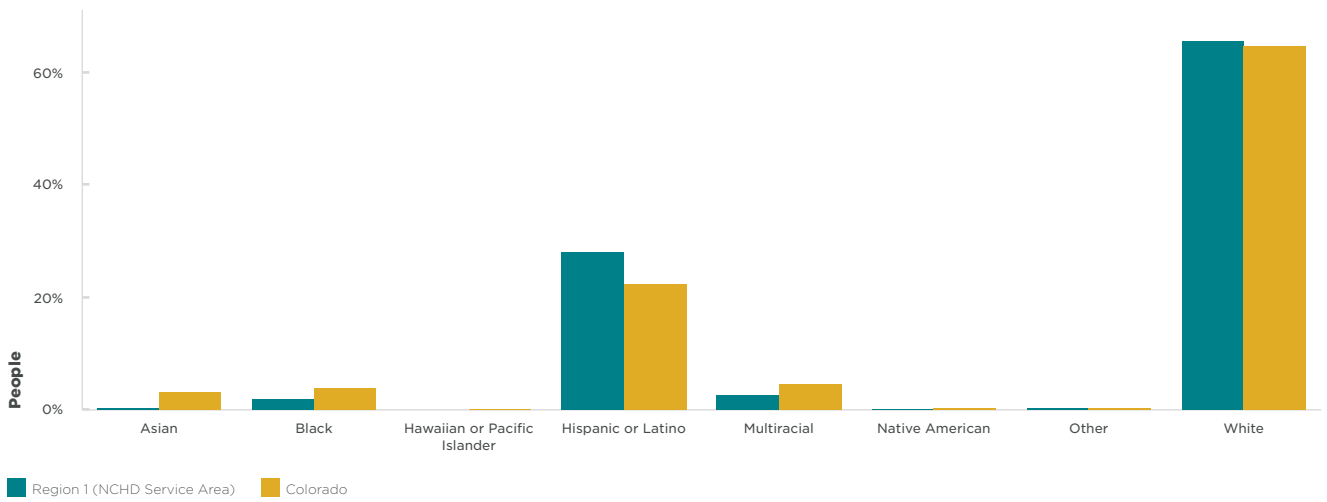


Sources: US Census Bureau ACS 5-year 2020-2024

Race & Ethnicity

To be able to make choices that support health and well-being, we need to have the opportunity. Centuries of discrimination and harm have created inequities in who has the opportunity to be healthy. We can level the field, and make health the easiest choice for everyone.

Race/Ethnicity



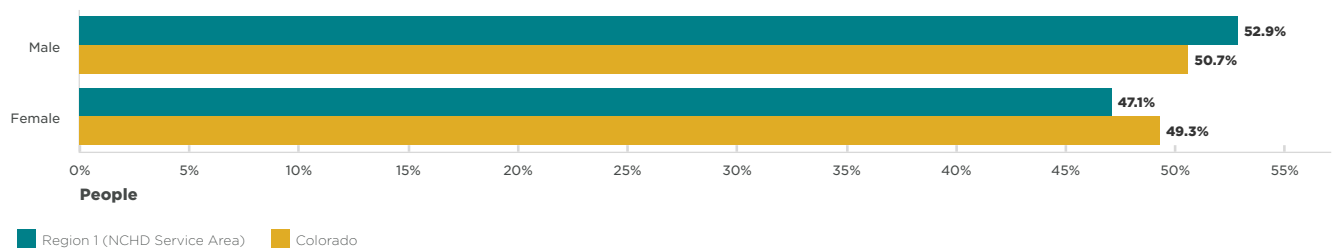
Sources: US Census Bureau ACS 5-year 2020-2024

Note: Hispanic or Latino includes any race. All other races in this chart are not Hispanic or Latino.

Sex

Sex and gender affect our health risks and how we interact with the world, from income to how we think about safety.

Sex



Sources: US Census Bureau ACS 5-year 2020-2024

People with Disabilities

Disabilities include physical difficulties, like trouble walking, and developmental and behavioral disabilities. The Americans with Disability Act was the first step toward creating fully accessible communities. We can build equity for people with disabilities by making it easier to access needed resources.



11.4%
of People
Colorado

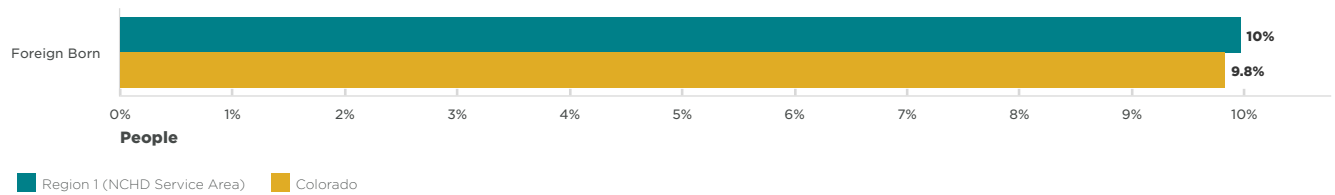
Sources: US Census Bureau ACS 5-year 2020-2024

Note: Data is for the civilian noninstitutionalized population, so it does not include those people living in long-term care living arrangements like correctional or skilled nursing facilities.

Immigrants

Migrant workers and immigrants, including those who are undocumented, deserve good health. Culturally appropriate care given in our primary languages breaks down barriers to health care. So does challenging stigma and policies limiting who can access public healthcare.

People Born as Non-US Citizens

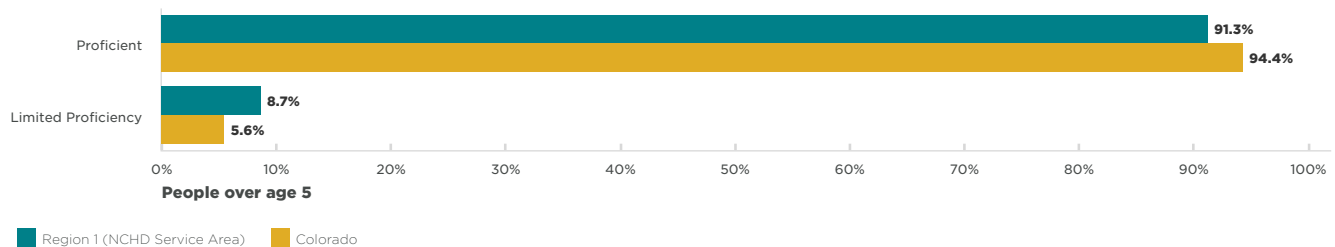


Sources: US Census Bureau ACS 5-year 2020-2024

Limited English Proficiency

People who have limited skill in English have a harder time finding quality care. Language barriers make healthcare stressful and add an extra step each time we need something as simple as a flu shot.

Ability to Speak English

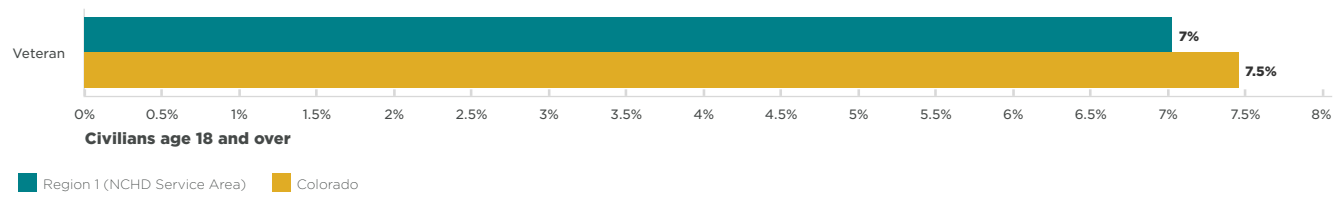


Sources: US Census Bureau ACS 5-year 2020-2024

Veterans

Those who have served in the Armed Forces often have unmet medical needs related to their service. Veterans experiencing homelessness or behavioral health needs face significant challenges to achieving health. Improving access to resources helps veterans achieve good health.

Veteran Status



Sources: US Census Bureau ACS 5-year 2020-2024

LGBTQ+

People who are LGBTQ+ often face discrimination at home, at work, and everywhere else—even the doctor's office. Unmet behavioral health needs and suicide rates are especially high. Keeping LGBTQ+ people safe from discrimination strengthens our families and communities.



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2020

How do **social factors** affect residents' opportunity for health?

Every resident should have the opportunity to make healthy choices. However, our choices are often limited or expanded based on where we live, where we work, and what resources we have access to. Understanding how social and economic factors impact our residents' opportunity for health is critical for making decisions that **expand opportunity for every resident**.



How are **income and poverty** affecting health?

Poverty is both a cause and a consequence of poor health. Poverty increases the chances of poor health. Poor health, in turn, traps communities in poverty. The cost of doctors' fees, prescriptions, and transportation to reach a health provider can be devastating for families living in poverty. Conversely, families with higher incomes can more easily purchase healthy foods and pay for health services and transportation.

Income and Poverty



Median Household Income

\$70,770

USD

Region 1 (NCHD Service Area)

\$95,470

USD

Colorado



Living in Poverty

15%

of People

Region 1 (NCHD Service Area)

9%

of People

Colorado

Sources: US Census Bureau ACS 5-year 2020-2024

Population Living in Poverty

Region 1 (NCHD Service Area)

People

- 3% - <11%
- 11% - <13%
- 13% - <16%
- 16% - 26%

Sources: US Census Bureau ACS 5-year 2020-2024

Poverty by Race/ Ethnicity



Living in Poverty

15%

of People

Region 1 (NCHD Service Area)

9%

of People

Colorado

Sources: US Census Bureau ACS 5-year 2020-2024

People Living in Poverty by Race/Ethnicity

Region 1 (NCHD Service Area)

Asian	46% of Asian Population
Black	8% of Black Population
Hispanic or Latino	21% of Hispanic or Latino Population
Multiracial	25% of Multiracial Population
Native American	15% of Native American Population
Native Hawaiian or Other Pacific Islander	0% of Hawaiian/Pacific Islander Population
Other Race	8% of Other Race Population
White (Not Hispanic or Latino)	12% of White (Not Hispanic or Latino) Population

Sources: US Census Bureau ACS 5-year 2020-2024

Income by Race/ Ethnicity



Median Household Income

\$70,770

USD

Region 1 (NCHD Service Area)

\$95,470

USD

Colorado

Sources: US Census Bureau ACS 5-year 2020-2024

Median Household Income by Race/Ethnicity of Householder

Region 1 (NCHD Service Area)

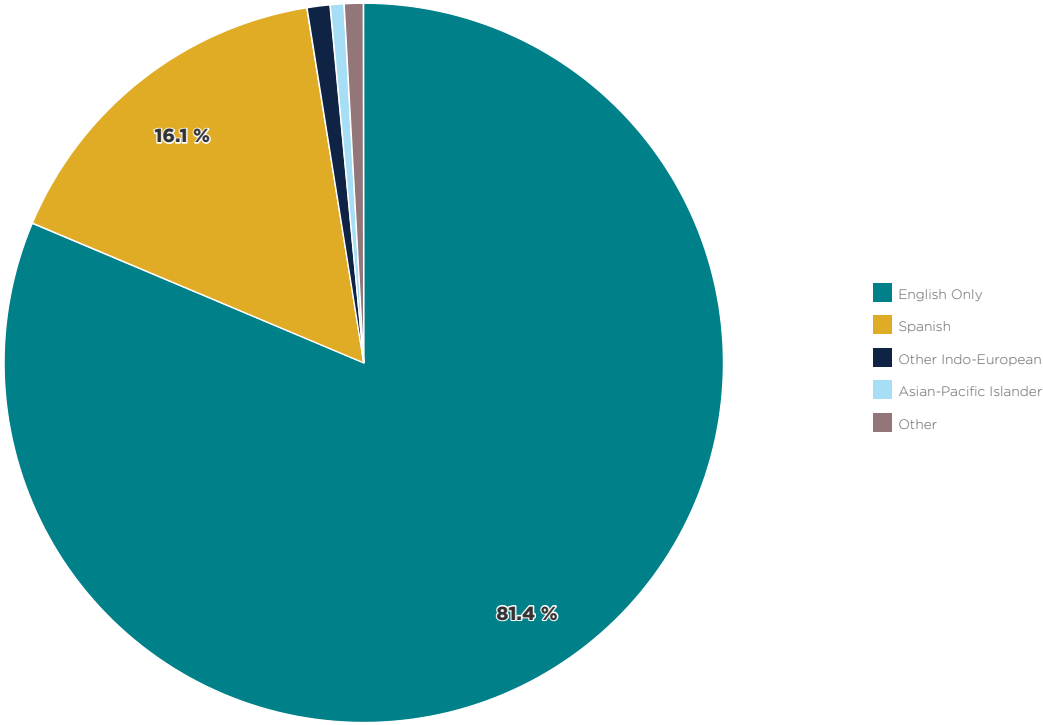
USD

Asian	No data
Black	No data
Hispanic or Latino	\$66,360
Multiracial	\$54,097
Native American	\$96,023
Native Hawaiian or Other Pacific Islander	No data
Other Race	\$88,554
White (Not Hispanic or Latino)	\$66,838

Sources: US Census Bureau ACS 5-year 2020-2024

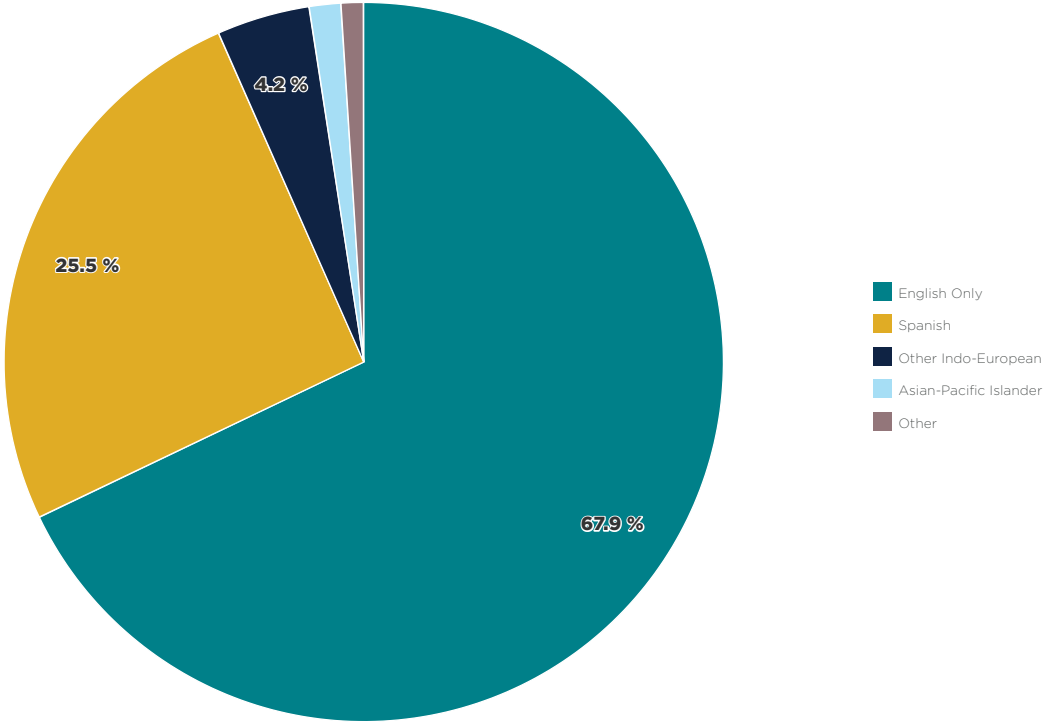
Poverty by Language Spoken

Language Spoken at Home by Total Population



Region 1 (NCHD Service Area)
Sources: US Census Bureau ACS 5-year 2020-2024

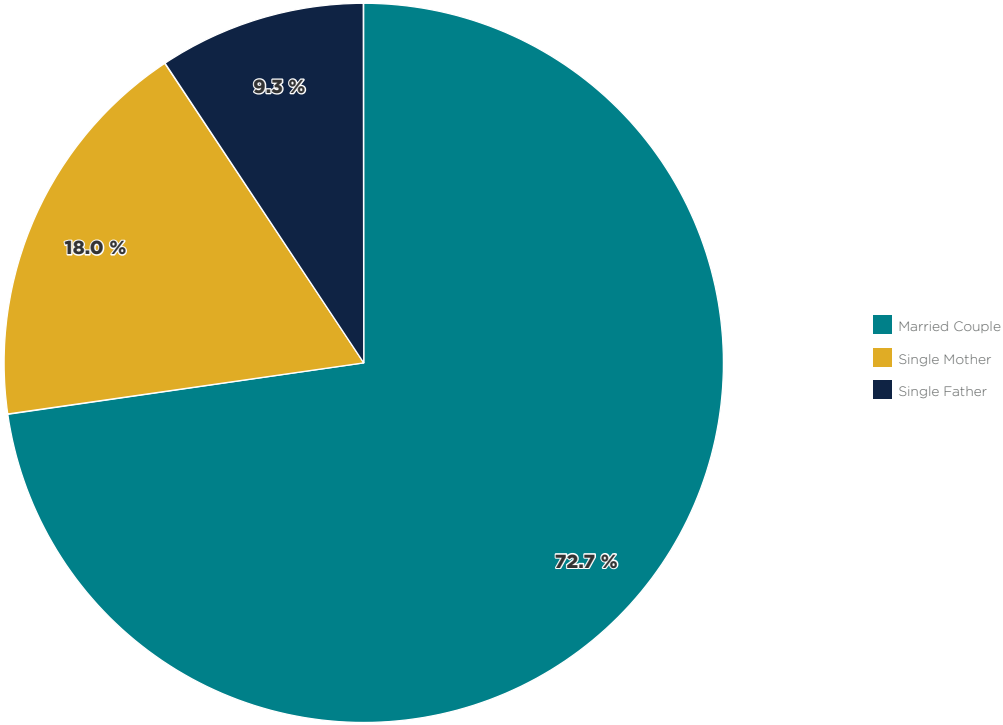
Language Spoken at Home by People Living in Poverty



Region 1 (NCHD Service Area)
Sources: US Census Bureau ACS 5-year 2020-2024

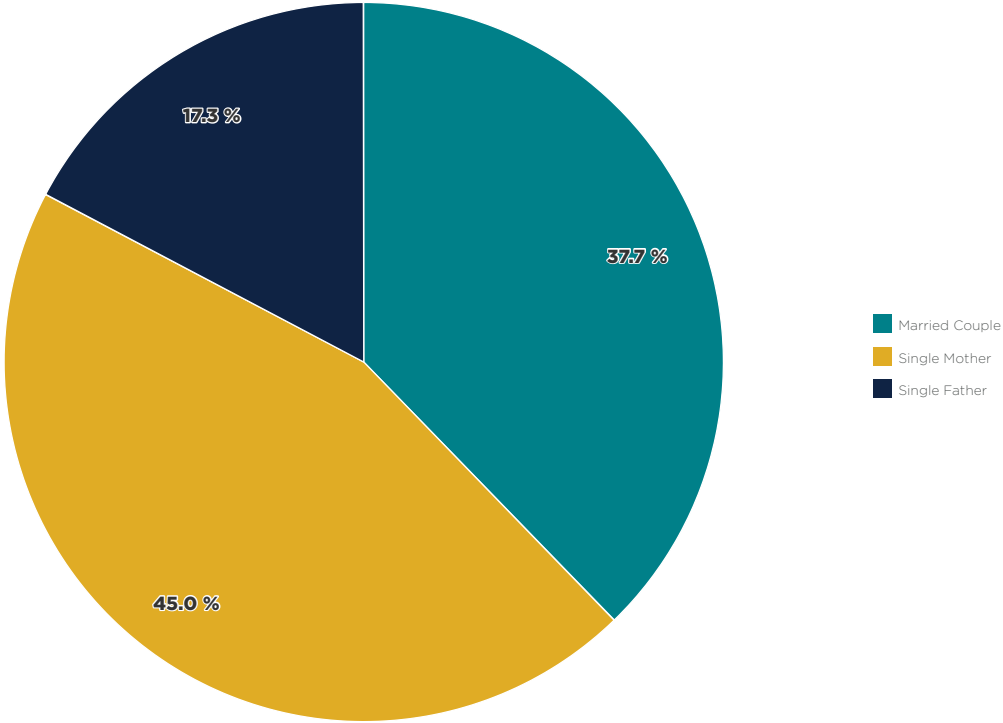
Poverty by Family Type

All Families with Children



Region 1 (NCHD Service Area)
Sources: US Census Bureau ACS 5-year 2020-2024

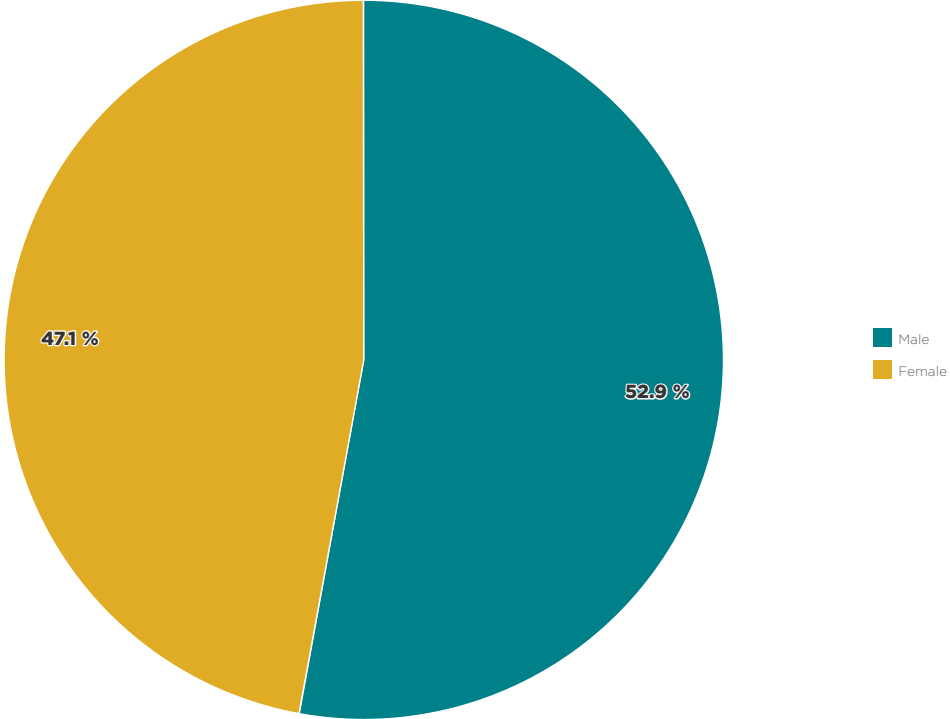
Families with Children Living in Poverty



Region 1 (NCHD Service Area)
Sources: US Census Bureau ACS 5-year 2020-2024

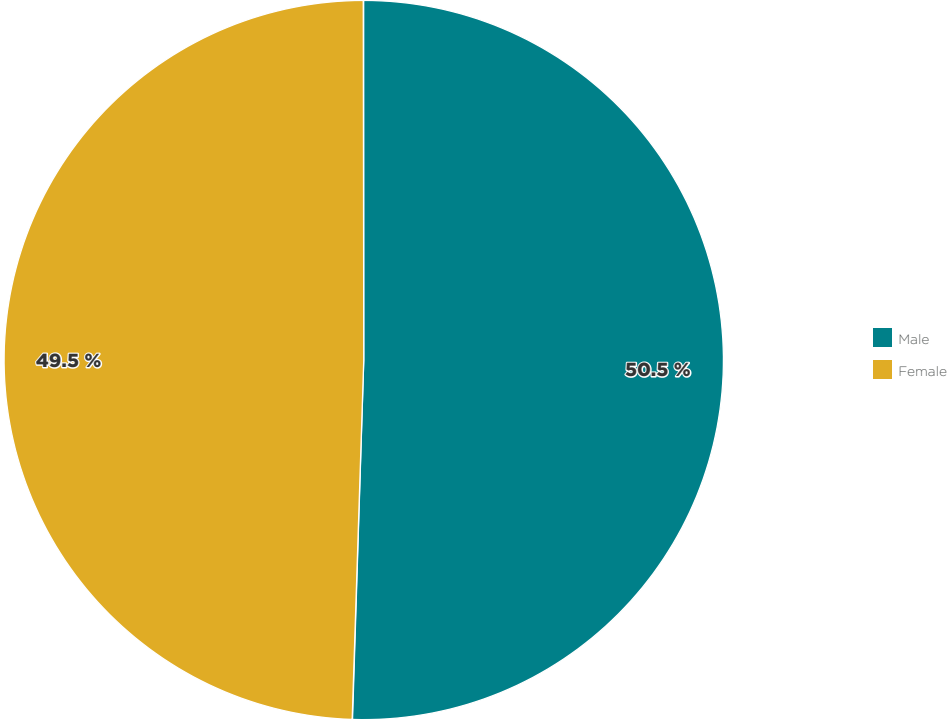
Poverty by Sex

Total Population by Sex



Region 1 (NCHD Service Area)
Sources: US Census Bureau ACS 5-year 2020-2024

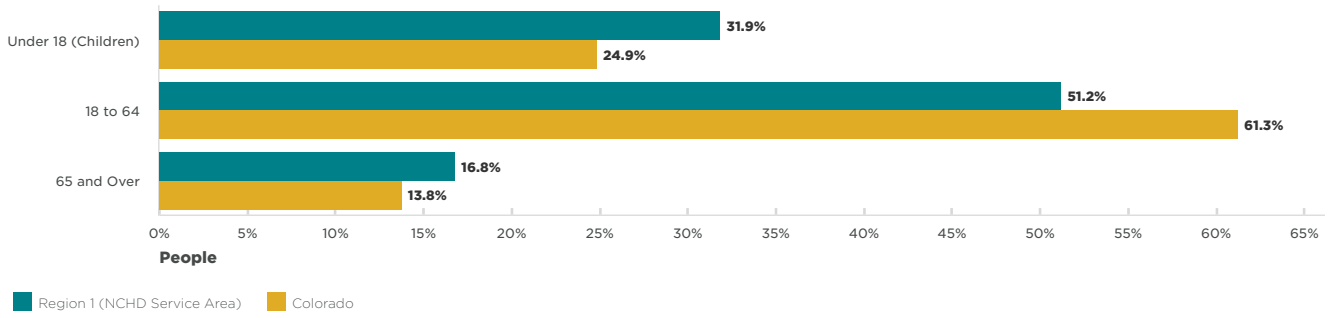
People Living in Poverty by Sex



Region 1 (NCHD Service Area)
Sources: US Census Bureau ACS 5-year 2020-2024

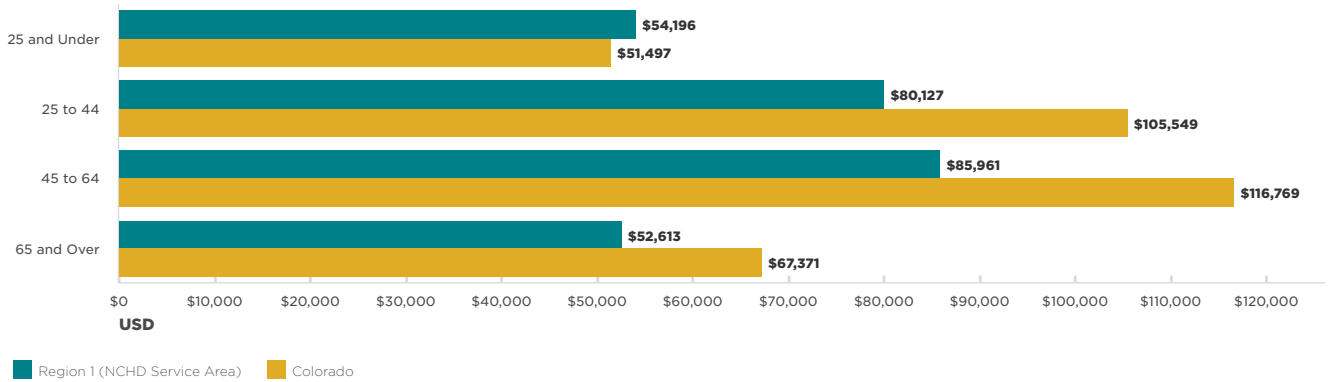
Income & Poverty by Age

People Living in Poverty by Age



Sources: US Census Bureau ACS 5-year 2020-2024

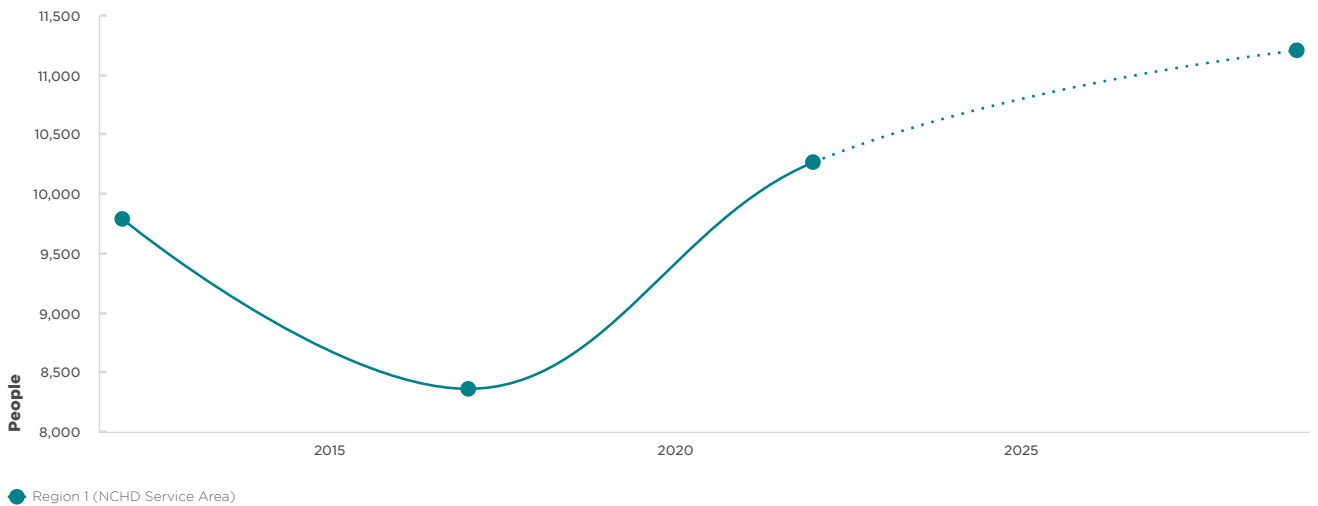
Median Income by Householder Age



Sources: US Census Bureau ACS 5-year 2020-2024

Poverty Over Time

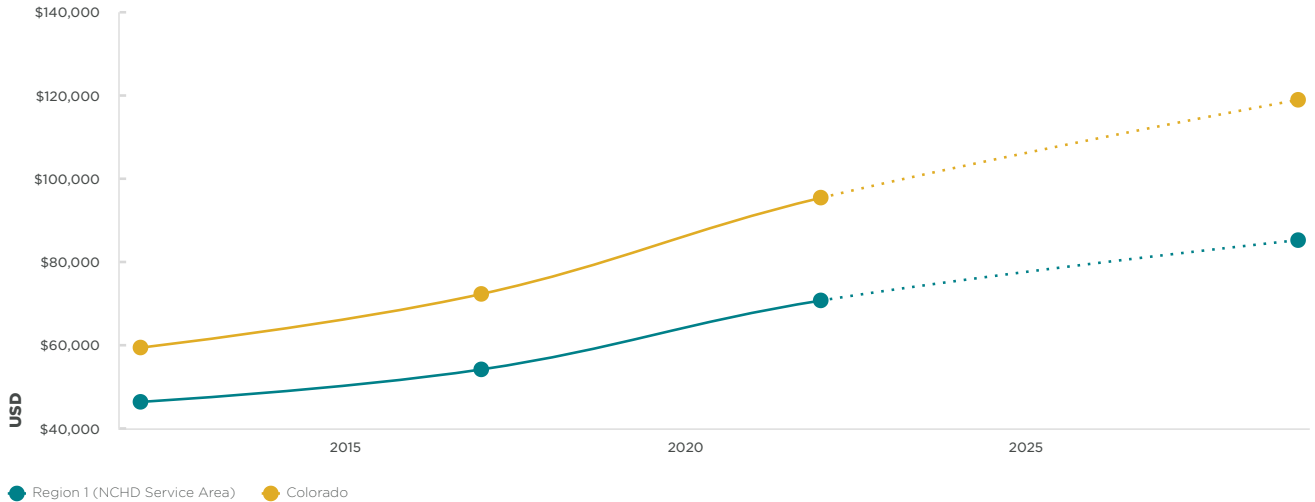
People Living in Poverty



Sources: US Census Bureau; US Census Bureau ACS 5-year

Household Income Over Time

Median Household Income



Sources: US Census Bureau; US Census Bureau ACS 5-year

Poverty Among Those Employed or in School



Living in Poverty

2,420

Employed people

Region 1 (NCHD Service Area)

146,154

Employed people

Colorado



Living in Poverty

2,632

Students

Region 1 (NCHD Service Area)

172,347

Students

Colorado

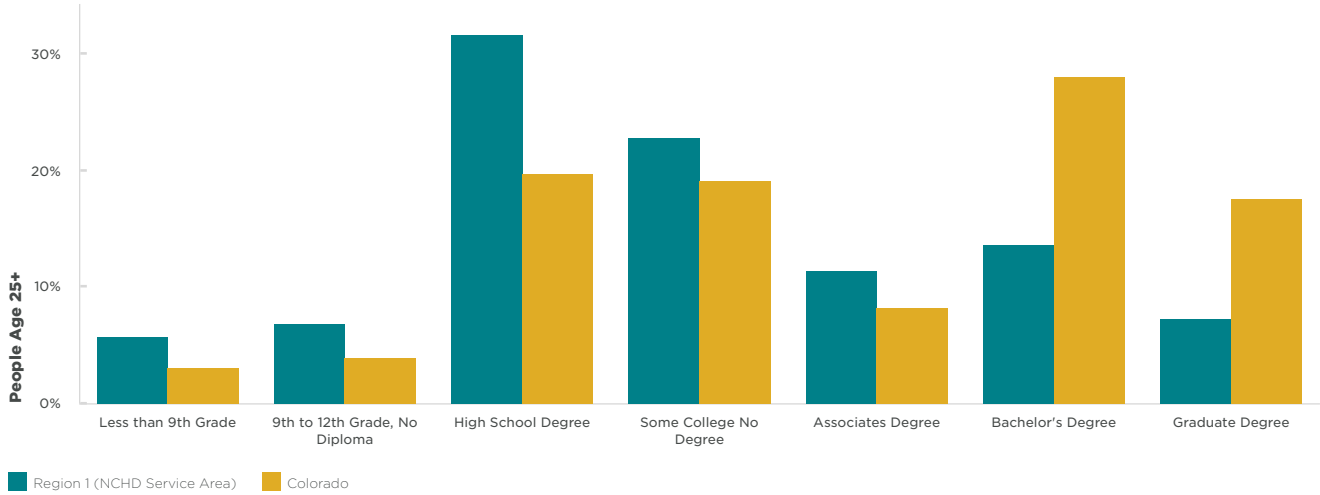
Sources: US Census Bureau ACS 5-year 2020-2024

How is **education** affecting health?

Residents with more education are more likely to have jobs that provide health-promoting benefits such as health insurance, paid leave, and retirement. Conversely, people with less education are more likely to work in occupations with few benefits. Low-income residents who are struggling to access basic necessities, such as food and shelter, are unable to prioritize their education and long-term goals and are often stuck in a generational cycle of poverty.

Educational Attainment

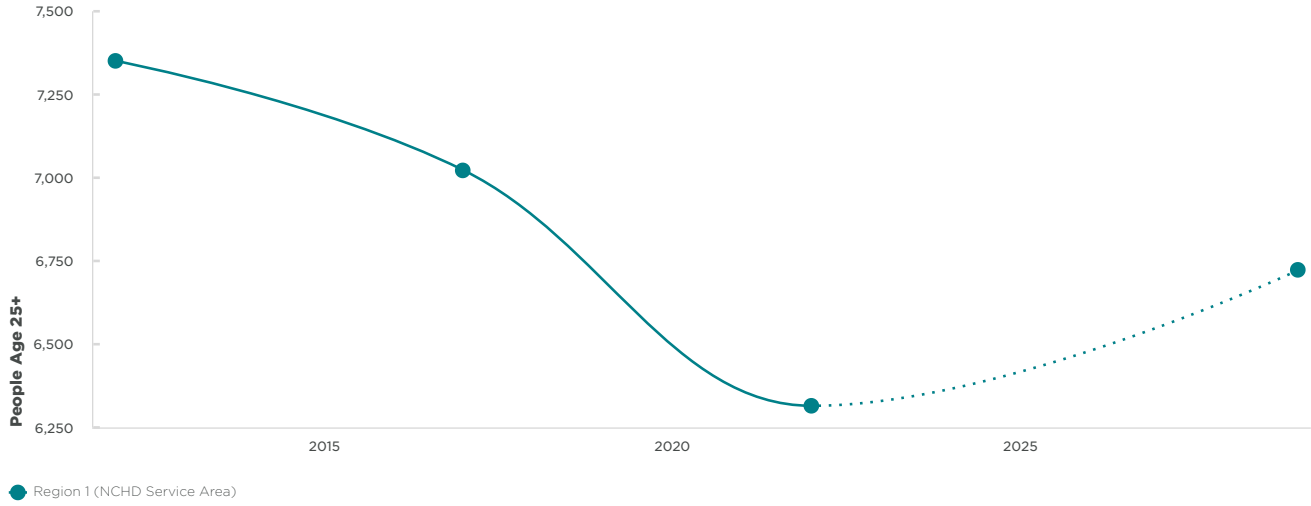
Highest Level of Education Completed



Sources: US Census Bureau ACS 5-year 2020-2024

Adults without High School Diploma

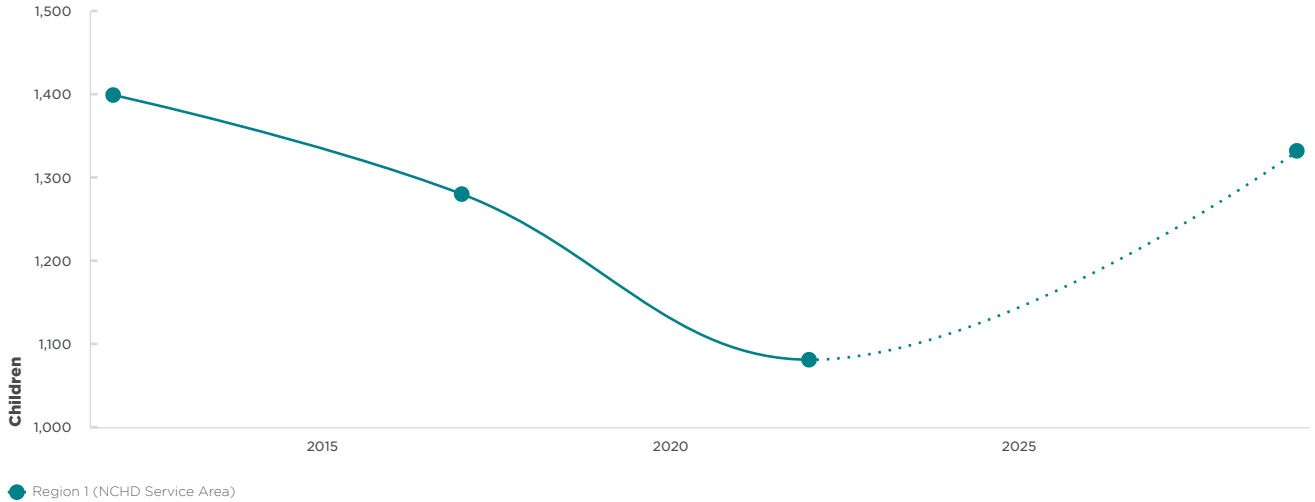
People without High School Diploma or Equivalent



Sources: US Census Bureau; US Census Bureau ACS 5-year

Preschool Enrollment Over Time

Children Enrolled in Nursery School or Preschool



Sources: US Census Bureau; US Census Bureau ACS 5-year

Population Age 3-4

Region 1 (NCHD Service Area)	Children
Enrolled in Nursery or Preschool	1,081
Population Age 3-4	1,782
Below Poverty Level and Enrolled in Nursery or Preschool	326

Sources: US Census Bureau ACS 5-year 2020-2024

How is unemployment affecting health?

Job insecurity and lack of benefits associated with employment make residents more vulnerable to poor health. Unemployment may contribute to housing instability, unmet medical needs, and inability to purchase healthy foods. Additionally, health-harming stress can accompany the social and economic hardship caused by unemployment.

Unemployment



Unemployment

5%

of People

Region 1 (NCHD Service Area)

5%

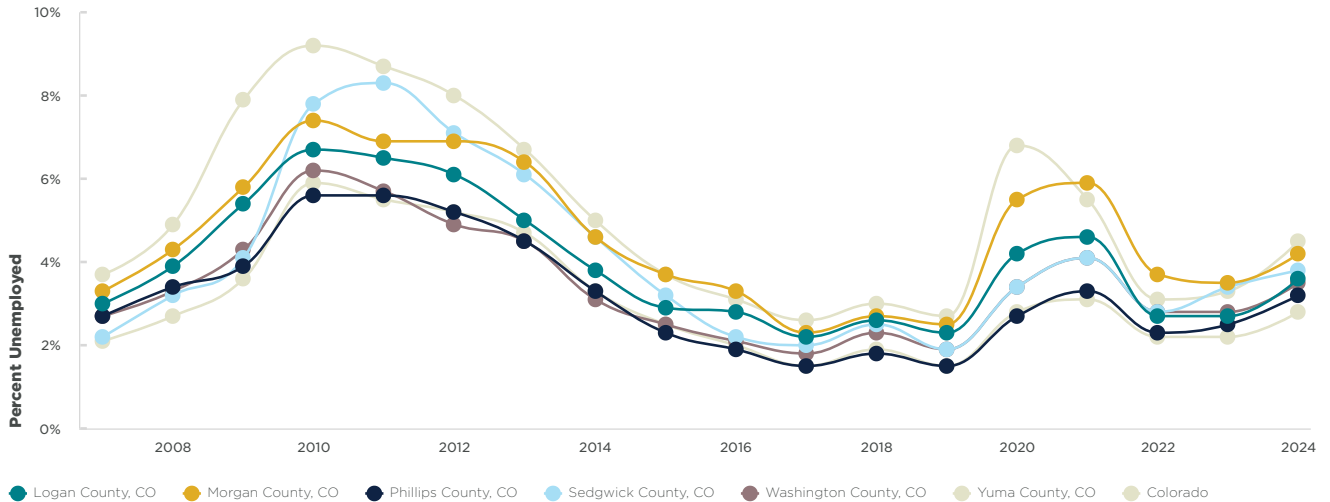
of People

Colorado

Sources: US Census Bureau ACS 5-year 2020-2024

Unemployment Over Time

Annual Average Unemployment Rate



Sources: BLS LAUS

How are housing costs affecting health?

Housing should represent a place of safety, stability, and shelter and not a place of stress, strain, or insecurity. When residents struggle to afford a place to live, that financial strain makes it harder to make other healthy choices, like eating a healthy diet or seeing a doctor when you're sick. Moreover, disruptive events, like suddenly losing your home, can become the trigger for a snowball of negative impacts on health, such as losing a job or health insurance, dropping out of school, or triggering mental health challenges.

Excessive Housing Costs



Home Rent is 30%+ of Income

41%

of Rented Homes

Region 1 (NCHD Service Area)

50%

of Rented Homes

Colorado



Homeowner Costs are 30%+ of Income

25%

of Owned Homes

Region 1 (NCHD Service Area)

25%

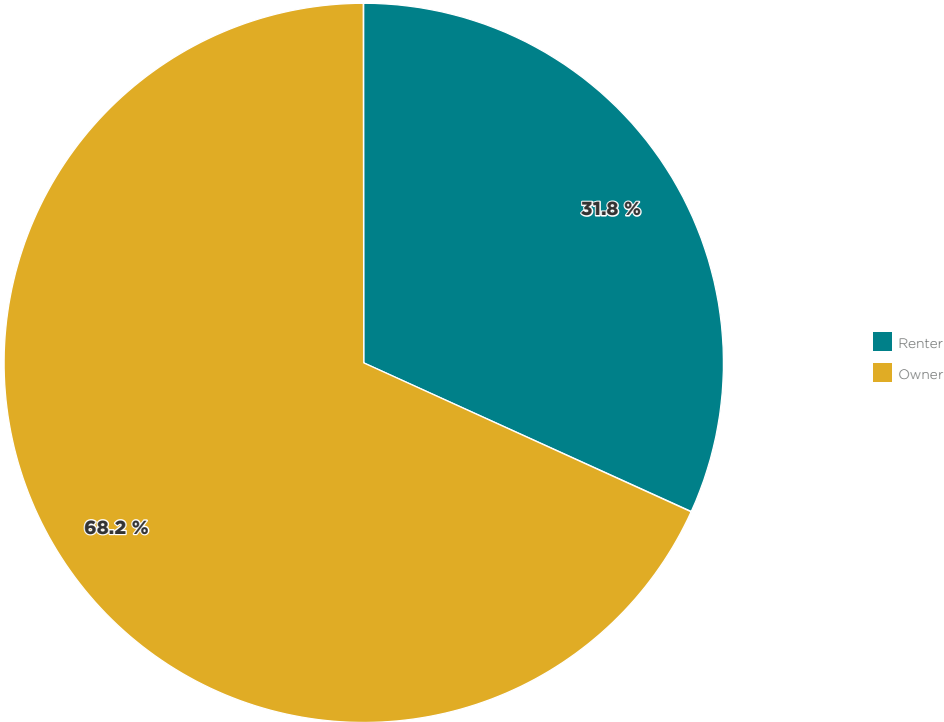
of Owned Homes

Colorado

Sources: US Census Bureau ACS 5-year 2020-2024

Homeownership Rate

Homeownership Rate



Region 1 (NCHD Service Area)
Sources: US Census Bureau ACS 5-year 2020-2024

Homeownership Rate

Region 1 (NCHD Service Area)

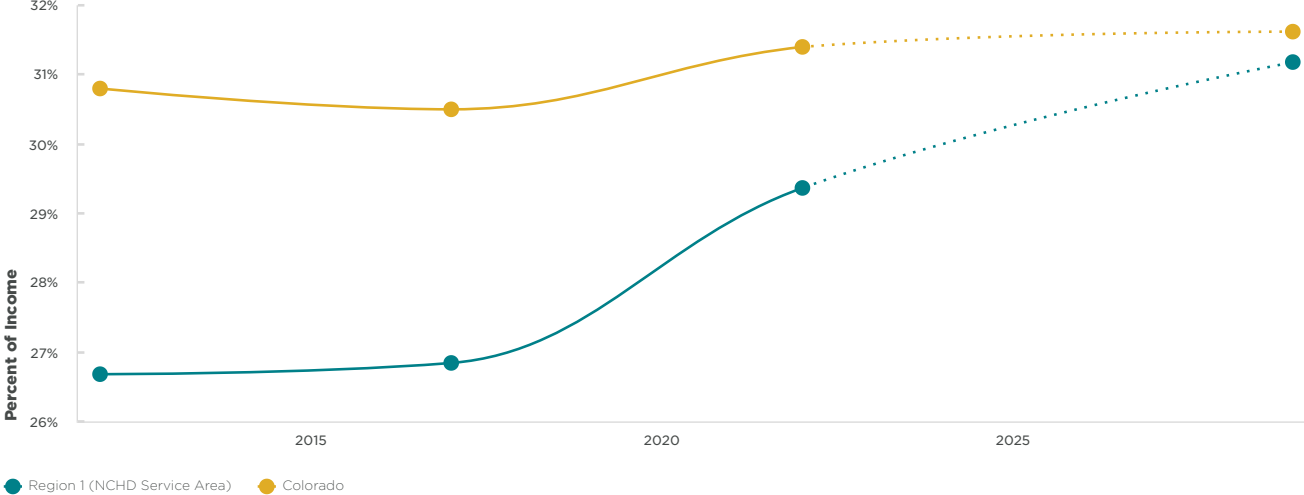
Owner Occupied Homes

- 48% - <61%
- 61% - <66%
- 66% - <72%
- 72% - 82%

Sources: US Census Bureau ACS 5-year 2020-2024

Housing Cost Over Time

Rental Costs as Percent of Income



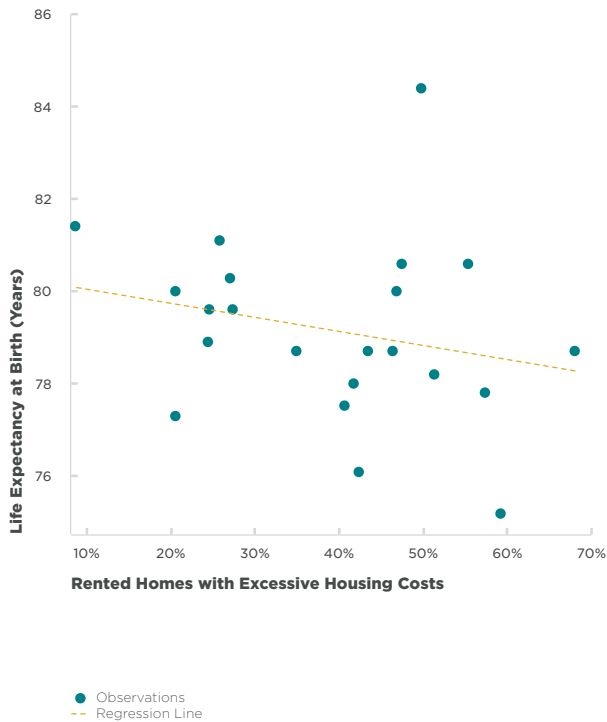
Sources: US Census Bureau; US Census Bureau ACS 5-year

Housing Costs vs. Life Expectancy

Each dot represents a neighborhood in our community:

Renters: Areas with a **high proportion of renters with excessive housing costs** are more likely to have **shorter life expectancy**.

Housing Cost vs Life Expectancy



There is not enough evidence to conclude that there is a significant relationship between these variables at the 95% confidence interval
Sources: CDC NCHS USALEEP 2010-2015; US Census Bureau ACS 5-year 2020-2024

As Percent of Rented Homes with Excessive Housing Costs increases, Life Expectancy at Birth tends to decrease.
There is a weak relationship between these two variables.

How are **potentially vulnerable populations** affected?

The characteristics included here should be used to understand potentially vulnerable populations, but are not meant to label any certain characteristic as inherently disadvantageous. Depending on community circumstances, these groups may face unique challenges to accessing healthcare, being active, or having a strong social support network.

Ability to Speak English



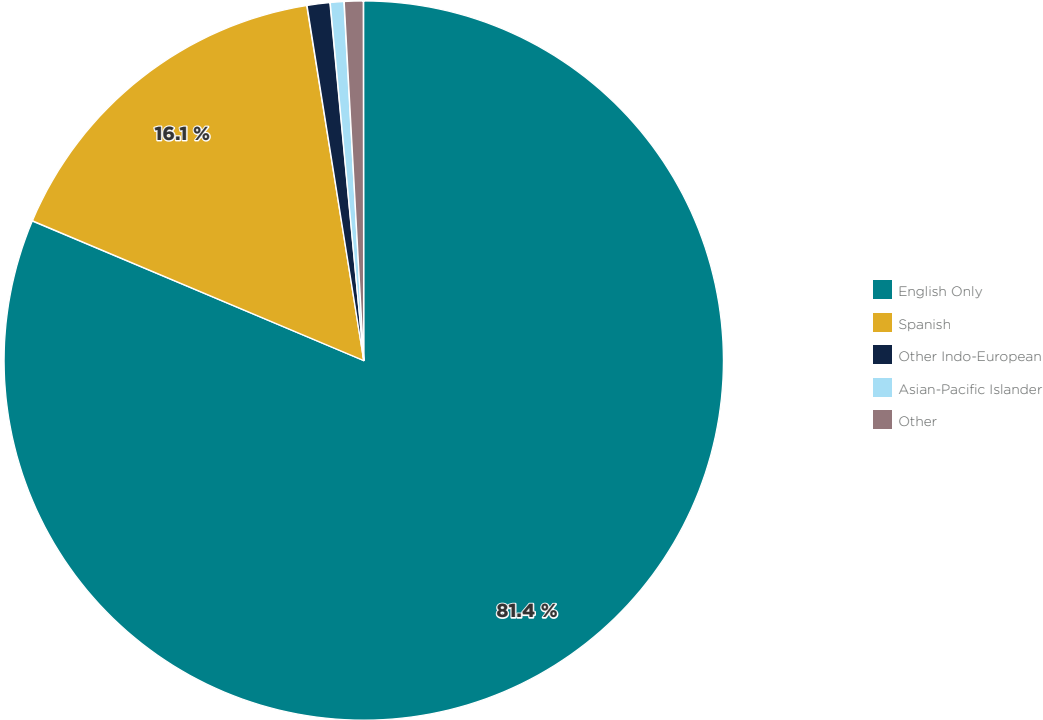
9%
of People
Speak English Less Than 'Very Well'
Region 1 (NCHD Service Area)



5,868
People
Speak English Less Than 'Very Well'
Region 1 (NCHD Service Area)

Sources: US Census Bureau ACS 5-year 2020-2024

Language Spoken at Home



Region 1 (NCHD Service Area)

Sources: US Census Bureau ACS 5-year 2020-2024

Are our residents able to stay healthy?

When we wait to treat diseases at a later stage, it is much more expensive. By building communities that **make the healthiest choice the easiest choice**, everyone wins. Prevention isn't about being in a doctor's office all the time, it's about the opportunity to eat good food, be outside, and connect with neighbors and friends. Most importantly, preventing disease isn't entirely about educating people to make the right choices. It's about **creating places where it's possible**.



How are **social & environmental factors** affecting residents' opportunity to stay healthy?

A primary care provider will screen for major health-related conditions, including obesity, high blood pressure, and diabetes. Health insurance is an important deciding factor when seeking medical treatment. In addition, access to healthy food and recreational facilities encourage lifestyle that prevents disease. Learn more on the [Society & Environment](#)² page.



Primary Care Physician Ratio

630.6

People per 1 Primary Care Physician

Colorado

1,180.8

People per 1 Primary Care Physician

Morgan County, CO

994.9

People per 1 Primary Care Physician

Logan County, CO

329.1

People per 1 Primary Care Physician

Sedgwick County, CO

374.7

People per 1 Primary Care Physician

Phillips County, CO

907.2

People per 1 Primary Care Physician

Yuma County, CO

2,415.5

People per 1 Primary Care Physician

Washington County, CO

Sources: NPES NPI 2025

What do **behavioral factors** reveal about residents' opportunity to stay healthy?

Health behaviors occur within the context of the social and environmental factors that a person is experiencing. Social factors, such as income, poverty, education, and economic opportunity are unfortunately entangled with behaviors, such as smoking and engaging in physical activity. Learn more on the [Behavioral Factors](#) page.



Physically Inactive

23%

People

Region 1 (NCHD Service Area)

18%

People

Colorado

Sources: CDC BRFSS PLACES 2023

What do **health outcomes** reveal about residents' opportunity to stay healthy?

Health outcomes are influenced by the healthcare environment, social context, and behaviors. Behaviors include dietary patterns, physical activity, inactivity, and medication use. These behaviors are influenced by the food and physical activity environment, education and skills, and food marketing and promotion. Learn more on the [Health Outcomes](#) page.



Obesity
30%
of Adults

Region 1 (NCHD Service Area)

26%
of Adults
Colorado

Sources: CDC BRFSS PLACES 2023

Resources

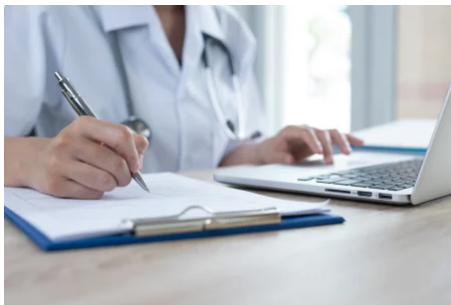
Learn more about how our community is addressing this health priority.



NCHD Communities That Care

Communities That Care (CTC) is a community-driven prevention process that is proven to reduce youth health and behavior issues. It is based on the premise/belief that communities are each unique. CTC helps local coalitions develop prevention plans that are specific to their community based on their community's level of behavioral health problems and risk and protective factors.

[Read More](#)



Tobacco Cessation Programs

If you are looking to quit, a clinician working with patients that use tobacco, or are simply looking for cessation information NCHD may have a program or resource that is right for you.

[Read More](#)

How are **social & environmental factors** affecting residents' opportunity to stay healthy?



Are residents able to access **primary care providers**?

A primary care provider will screen for major health-related conditions, including obesity, high blood pressure, and diabetes. If a resident already has a chronic condition, their primary care provider helps them manage it and improve their quality of life. Some geographic areas, populations, and facilities have too few primary care providers, designated as Health Professional Shortage Areas by the US Health Resources and Services Administration. With access to quality preventive healthcare, our residents can catch potential health problems at their earliest stages, improve lifestyle habits, and ultimately prevent chronic illnesses before they begin.

Primary Care Ratio



Primary Care Physician Ratio

630.6

People per 1 Primary Care Physician
Colorado

1,180.8

People per 1 Primary Care Physician
Morgan County, CO

994.9

People per 1 Primary Care Physician
Logan County, CO

329.1

People per 1 Primary Care Physician
Sedgwick County, CO

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People per 1 Primary Care Physician
Phillips County, CO

907.2

People per 1 Primary Care Physician
Yuma County, CO

2,415.5

People per 1 Primary Care Physician
Washington County, CO

Sources: NPPES NPI 2025

Primary Care Provider Ratio

Region 1 (NCHD Service Area)

People per 1 Primary Care Physician

- 329.1 - <907.2
- 907.2 - <1,180.8
- 1,180.8 - <2,415.5
- 2,415.5

Sources: NPPES NPI 2025

Primary Care Shortage Areas



No data

Out of 1,249 Census Tracts

Face a Shortage in Primary Care Providers

Colorado

Sources: HRSA HPSA 2025

Areas without Enough Primary Care Professionals

 Region 1 (NCHD Service Area)

Health Professional Shortage Areas for Primary Care

 No Shortage

Sources: HRSA HPSA 2025

Are residents covered by **health insurance**?

People with comprehensive health insurance coverage are more likely to seek preventative care, which prevents illnesses, diseases, and other health problems. Most health plans must cover a set of preventive services, such as screenings and immunizations, at no cost to the insured individual. While many employers offer health insurance to their employees, a substantial number of employers do not offer financially-achievable plans or do not offer any insurance at all. For uninsured workers, and their families, the costs of obtaining insurance coverage on their own can quickly become prohibitive.

Uninsured Population



Without Health Insurance

10%
of people

Region 1 (NCHD Service Area)

8%
of people
Colorado



Without Health Insurance

7,271
People

Region 1 (NCHD Service Area)

446,581
People
Colorado

Sources: US Census Bureau ACS 5-year 2020-2024

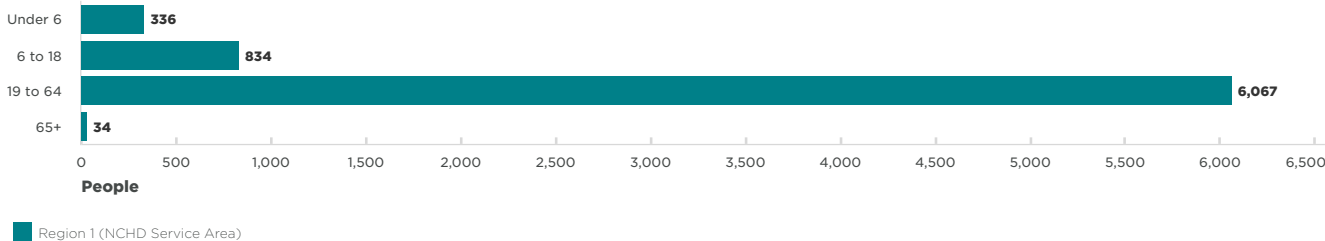
People without Health Insurance



Sources: US Census Bureau ACS 5-year 2020-2024

Age

Age of People without Health Insurance



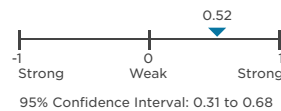
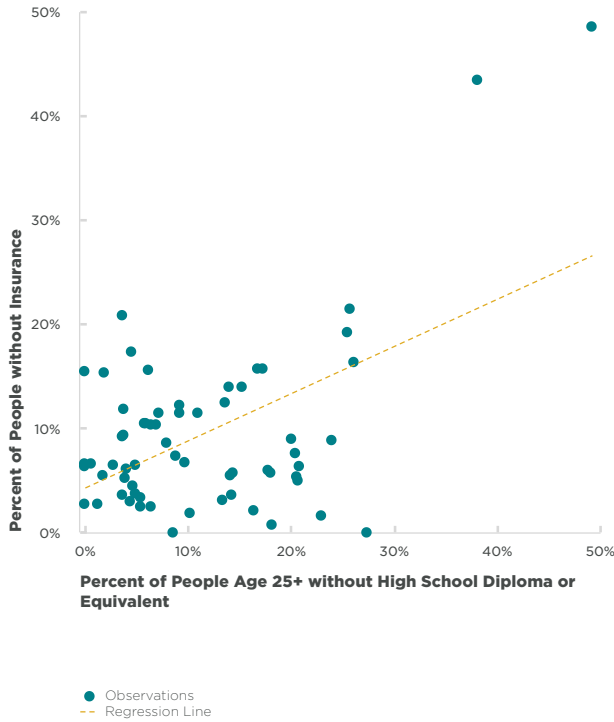
Sources: US Census Bureau ACS 5-year 2020-2024

Education & Health Insurance

Each dot represents a neighborhood in our community:

Areas with a **high proportion of adults without a high school diploma** are more likely to have a **high proportion of people without health insurance**.

Education vs Health Insurance



Sources: US Census Bureau ACS 5-year 2020-2024

As Percent of People Age 25+ without High School Diploma or Equivalent increases, Percent of People without Insurance tends to increase. There is a weak relationship between these two variables.

How does the prevalence of **fast food restaurants** influence residents' diets?

Swinging through the drive-thru offers the convenience of a cheap and easy meal, but what are the health impacts of meals that are often high in calories without other significant nutritional value? The prevalence of fast food restaurants reveals social norms around eating and quantifies the ease (or difficulty) of healthy decision-making.

Low Access to Healthy Food



Low Access to Grocery Store

20.9%

of People

Region 1 (NCHD Service Area)

21.5%

of People

Colorado

Sources: USDA ERS FARA 2019

Note: Low access is defined as 1+ mile from a grocery store in urban Census Tracts (2,500+ people) or 10+ miles from a grocery store in rural Census Tracts (less than 2,500 people)

People Far from Stores Selling Fresh Produce

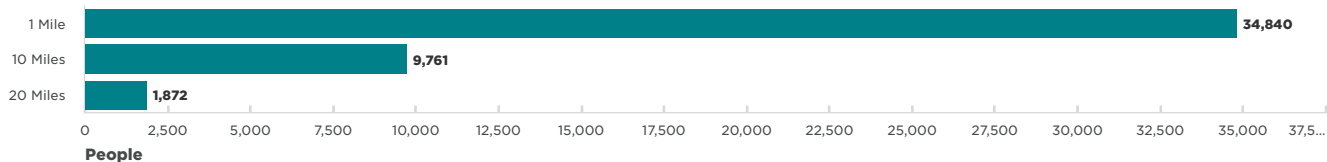
Region 1 (NCHD Service Area)

People



Sources: USDA ERS FARA 2019

People Far from Stores Selling Fresh Produce (1+ miles, 10+ miles, 20+ miles)

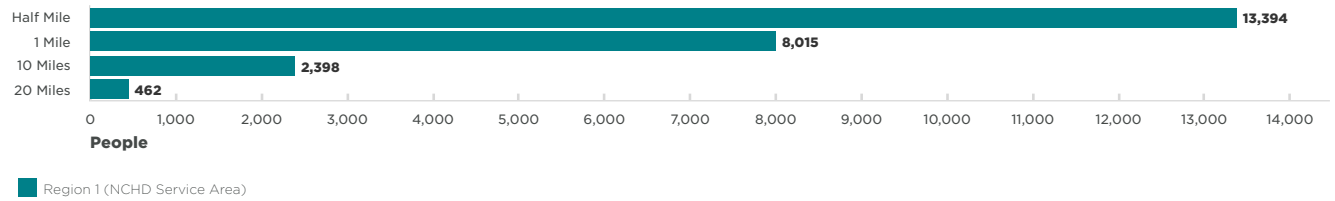


Region 1 (NCHD Service Area)

Sources: USDA ERS FARA 2019

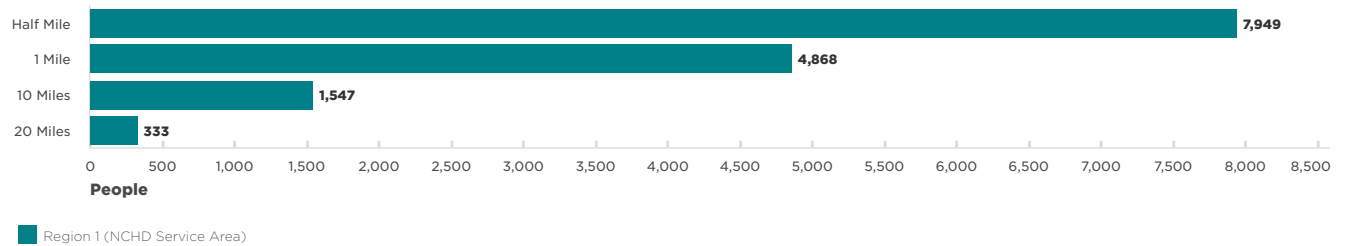
Age

Children Far from Stores Selling Fresh Produce



Sources: USDA ERS FARA 2019

Seniors Far from Stores Selling Fresh Produce



Sources: USDA ERS FARA 2019

Race/Ethnicity

Low Access to Stores Selling Fresh Produce by Race & Ethnicity

Region 1 (NCHD Service Area)

Asian	44.2%	of Asian Population
Black or African American	64.8%	of Black Population
Hawaiian or Pacific Islander	41.1%	of Native Hawaiian/Pacific Islander Population
Hispanic or Latino	35.8%	of Hispanic/Latino Population
Multiracial	32%	of Multiracial Population
Native American or Alaska Native	44.1%	of Native American/Alaska Native Population
White	49.6%	of White Population

Sources: USDA ERS FARA 2019

Note: 1+ mile from a grocery store in urban Census Tracts (2,500+ people) or 10+ miles from a grocery store in rural Census Tracts (less than 2,500 people)

Access to Resources



Low Access to Store

1,495

People with Low Incomes
Morgan County, CO

672

People with Low Incomes
Washington County, CO

582

People with Low Incomes
Yuma County, CO

120

People with Low Incomes
Sedgwick County, CO

73

People with Low Incomes
Phillips County, CO

1,797

People with Low Incomes
Logan County, CO

Sources: USDA ERS FEA 2019

Low Access to Store

5.3%

People with Low Income
Morgan County, CO

14%

People with Low Income
Washington County, CO

5.8%

People with Low Income
Yuma County, CO

5%

People with Low Income
Sedgwick County, CO

1.6%

People with Low Income
Phillips County, CO

7.9%

People with Low Income
Logan County, CO



Low Access to Store

151

Households with a Car
Morgan County, CO

27

Households with a Car
Phillips County, CO

30

Households with a Car
Washington County, CO

54

Households with a Car
Yuma County, CO

17

Households with a Car
Sedgwick County, CO

339

Households with a Car
Logan County, CO

Sources: USDA ERS FEA 2019

Low Access to Store

1.5%

of Households with a Car
Morgan County, CO

1.5%

of Households with a Car
Phillips County, CO

1.5%

of Households with a Car
Washington County, CO

1.4%

of Households with a Car
Yuma County, CO

1.6%

of Households with a Car
Sedgwick County, CO

4.2%

of Households with a Car
Logan County, CO



Low access to Store

383

Households Receiving SNAP Benefits

Morgan County, CO

82

Households Receiving SNAP Benefits

Washington County, CO

171

Households Receiving SNAP Benefits

Yuma County, CO

89

Households Receiving SNAP Benefits

Sedgwick County, CO

45

Households Receiving SNAP Benefits

Phillips County, CO

403

Households Receiving SNAP Benefits

Logan County, CO

Low Access to Store

3.7%

of Households Receiving SNAP Benefits

Morgan County, CO

4.1%

of Households Receiving SNAP Benefits

Washington County, CO

4.3%

of Households Receiving SNAP Benefits

Yuma County, CO

8.2%

of Households Receiving SNAP Benefits

Sedgwick County, CO

2.5%

of Households Receiving SNAP Benefits

Phillips County, CO

5%

of Households Receiving SNAP Benefits

Logan County, CO

Sources: USDA ERS FEA 2019

Who is struggling with food insecurity?

For vulnerable families, nutrition assistance can be the most effective stepping stone for stabilizing their economic situation and their health. SNAP (Supplemental Nutrition Assistance Program) helps families put more food on the table by increasing their food budget, and offers education on how to prepare healthy low-cost meals and make healthy choices.

Nutrition Assistance



Receive SNAP
16%

of Total Households

Region 1 (NCHD Service Area)

8%

of Total Households

Colorado



Receive SNAP
4,432

Households

Region 1 (NCHD Service Area)

200,905

Households

Colorado

Sources: US Census Bureau ACS 5-year 2020-2024



Eligible for Reduced-Price Lunch
16%

of Students

Sedgwick County, CO

16%

of Students

Washington County, CO

13%

of Students

Morgan County, CO

13%

of Students

Yuma County, CO

11%

of Students

Phillips County, CO

12%

of Students

Logan County, CO

10%

of Students

Colorado



Eligible For Free Lunch
38%

of Students

Sedgwick County, CO

37%

of Students

Washington County, CO

49%

of Students

Morgan County, CO

45%

of Students

Yuma County, CO

30%

of Students

Phillips County, CO

35%

of Students

Logan County, CO

37%

of Students

Colorado

Sources: USDA ERS FEA 2015

SNAP Stores



SNAP Authorized Stores

30

Stores

Morgan County, CO

7

Stores

Phillips County, CO

2

Stores

Sedgwick County, CO

2

Stores

Washington County, CO

9

Stores

Yuma County, CO

9

Stores

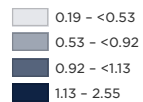
Logan County, CO

Sources: USDA ERS FEA 2023

Availability of SNAP Stores

 Region 1 (NCHD Service Area)

SNAP Authorized Stores per 1,000 People



Sources: USDA ERS FEA 2023

What do **behavioral factors** reveal about residents' opportunity to stay healthy?



Are residents getting enough **physical activity**?

Regular physical activity can produce long-term health benefits. It can help prevent chronic diseases such as heart disease, cancer, type 2 diabetes, and stroke. Physical activity also helps residents control their weight, strengthen muscles, improve sleep, relieve stress, and much more. In some communities in modern America, many people don't need to be physically active to navigate their daily life unless they choose to devote their free time to exercising.



Physically Inactive

23%

People

Region 1 (NCHD Service Area)

18%

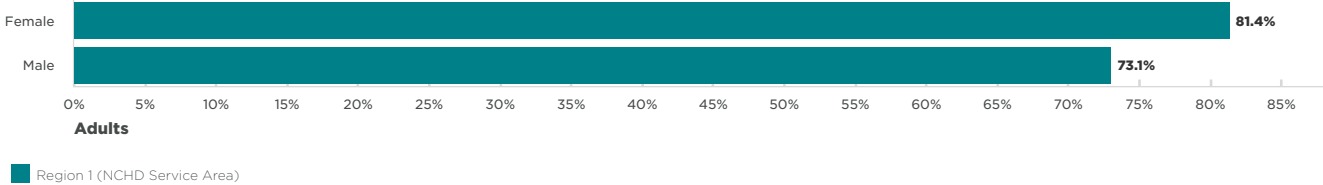
People

Colorado

Sources: CDC BRFSS PLACES 2023

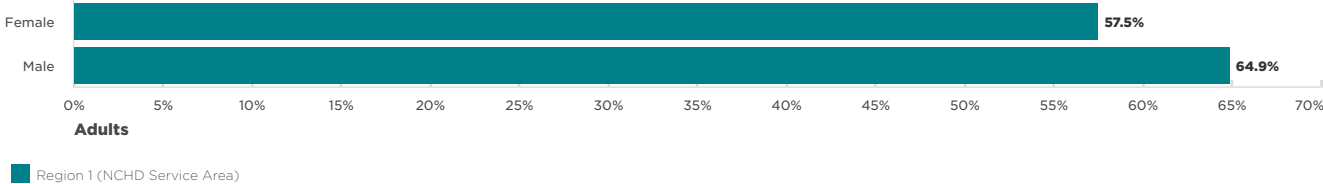
Fruit and Vegetable Consumption by Sex

Eat 1+ Serving of Fruit per Day by Sex



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2021

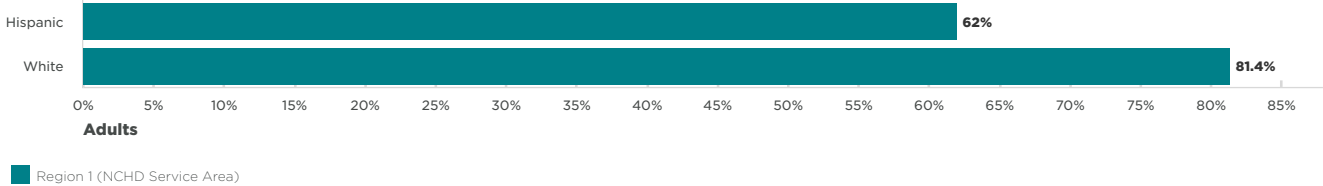
Eat 1+ Serving of Vegetables per Day by Sex



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2021

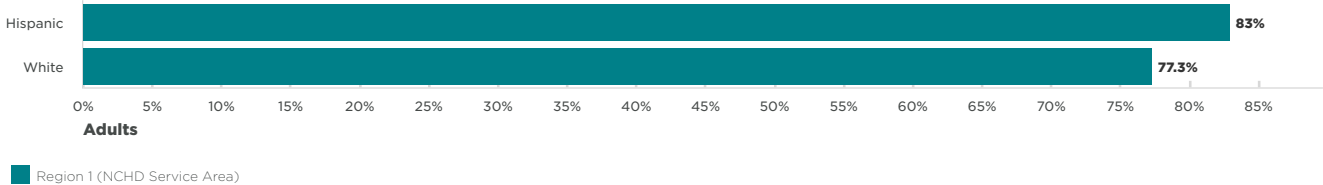
Fruit and Vegetable Consumption by Race

Eat 1+ Serving of Fruits per Day by Race & Ethnicity



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2021

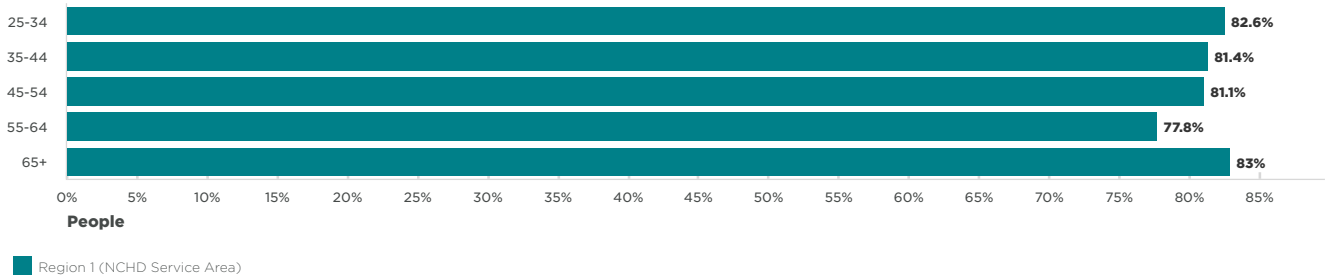
Eat 1+ Serving of Vegetables per Day by Race & Ethnicity



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2021

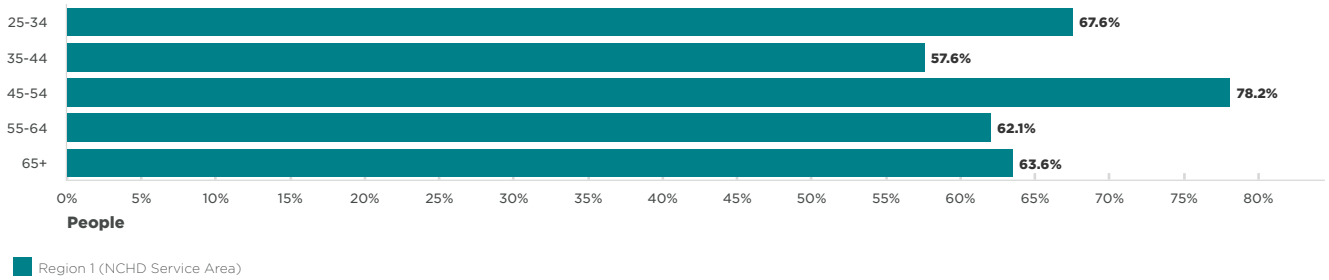
Fruit and Vegetable Consumption by Age

Eat 1+ Serving of Fruit per Day by Age



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2021

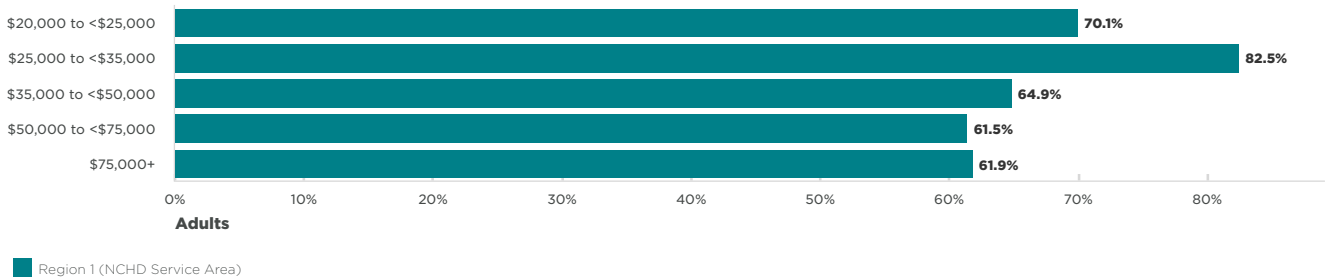
Eat 1+ Serving of Vegetables per Day by Age



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2021

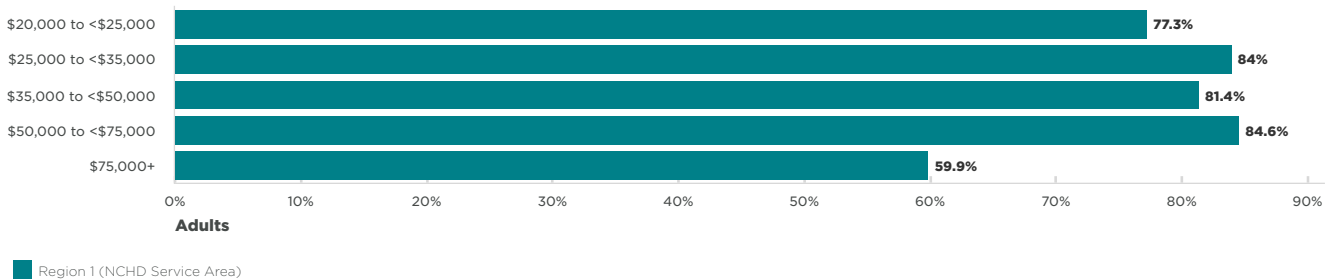
Fruit and Vegetable Consumption by Income

Eat 1+ Serving of Fruit per Day by Income



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2021

Eat 1+ Serving of Vegetables per Day by Income



Sources: Colorado Behavioral Risk Factor Surveillance System 2016-2021

How prevalent is **tobacco use** in our community?

Smoking harms nearly every organ of the body, causes many diseases, and reduces the health of smokers in general. People who smoke or chew tobacco are more likely than nonsmokers to develop heart disease, stroke, and lung or oral cancers. E-cigarettes, which often contain high levels of nicotine derived from tobacco, may also contain harmful substances such as heavy metals. Media, peer acceptance, and underestimated risk may compel people to begin smoking. Addiction to nicotine causes people to continue smoking and makes it difficult to stop.



Smoking Among Adults

15%

of People

Region 1 (NCHD Service Area)

11%

of People

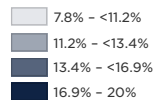
Colorado

Sources: CDC BRFSS PLACES 2023

Smoking Among Adults

 Region 1 (NCHD Service Area)

People



Sources: CDC BRFSS PLACES 2023



31.5%

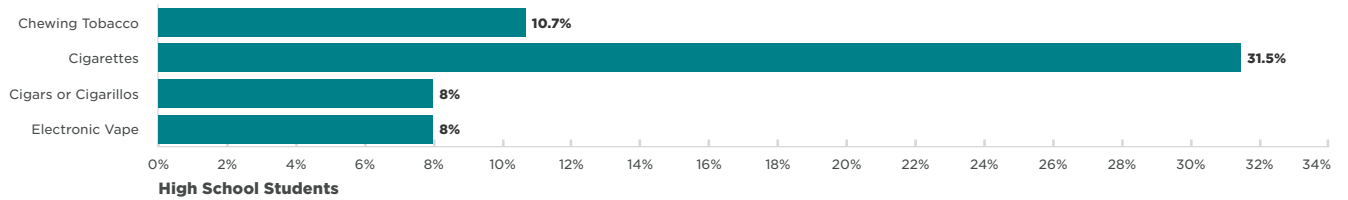
High School Students

Used Electronic Vape in Past 30 Days

Region 1 (NCHD)

Sources: Healthy Kids Colorado Survey 2019

Student Tobacco Use by Form of Tobacco Used



Region 1 (NCHD)

Sources: Healthy Kids Colorado Survey 2021

Is our community **vaccinated** against preventable diseases?

Vaccines are responsible for the control of many infectious diseases that were once common in the United States. The vaccinated community helps to protect those who are not vaccinated, a concept known as “herd immunity”. When 90–95 percent of a community is protected, it is nearly impossible for a vaccine-preventable disease to spread.



Vaccinated for Flu

0.2%

FFS Medicare Enrollees
Phillips County, CO

0.4%

FFS Medicare Enrollees
Logan County, CO

0.3%

FFS Medicare Enrollees
Morgan County, CO

0.1%

FFS Medicare Enrollees
Yuma County, CO

0.1%

FFS Medicare Enrollees
Sedgwick County, CO

0.2%

FFS Medicare Enrollees
Washington County, CO

0.5%

FFS Medicare Enrollees
Colorado

Sources: Mapping Medicare Disparities Tool 2023 via RWJF County Health Rankings & Roadmaps 2026 Supplemental Release

What do **health outcomes** reveal about residents' opportunity to stay healthy?



What is the **quality of life** in our community?

Good health is not only about living longer. Good health is about having a high quality of life, free from sickness or ill-health. One way to measure health's impact on quality of life is the average number of physically unhealthy days residents experience in a typical month. Unhealthy days lead to a lower quality of life, reduce productivity in the workplace, and increase a household's healthcare costs.



Physically Unhealthy Days in Past Month

4

Average Days

Colorado

5

Average Days

Logan County, CO

5

Average Days

Morgan County, CO

5

Average Days

Phillips County, CO

5

Average Days

Sedgwick County, CO

4

Average Days

Washington County, CO

5

Average Days

Yuma County, CO

Diabetes Deaths



36

Age-Adjusted Deaths per 100,000 People

Diabetes Death

Region 1 (NCHD)

Sources: CDPHE 2024



20

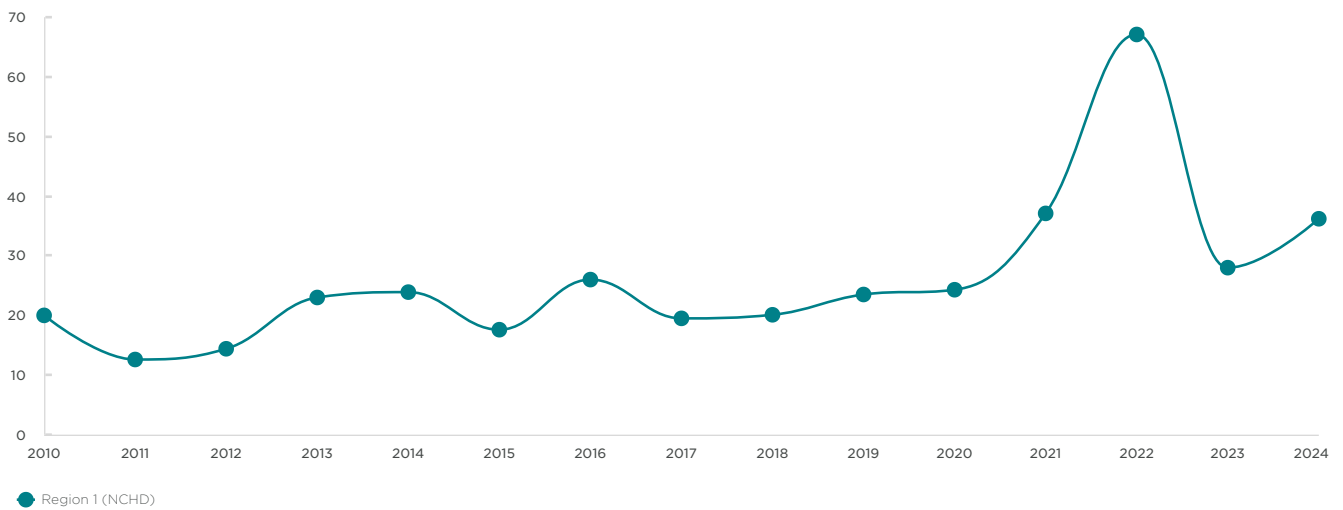
Deaths per 100,000 people

Diabetes Death Rate

Colorado

Sources: CDC WONDER Cause of Death 2024 Crude

Diabetes Death Rate Over Time



Sources: CDPHE

How is **chronic disease** affecting residents?

Chronic disease often limits quality of life and shortens lifespans. Regular exercise, abstaining from tobacco, limited alcohol consumption, and healthy diets reduce the risk of chronic heart disease and many other chronic health issues. Supporting healthy lifestyles, safe environments, and access to health care can limit cancer and chronic disease in our community as well as improve outcomes. For some people, chronic respiratory diseases are a minor nuisance. For others, respiratory diseases are a major problem that interferes with daily activities and may be life threatening.

Heart Disease



153

Age-Adjusted Deaths per 100,000 People
Heart Disease Deaths
Region 1 (NCHD)

Sources: CDPHE 2024

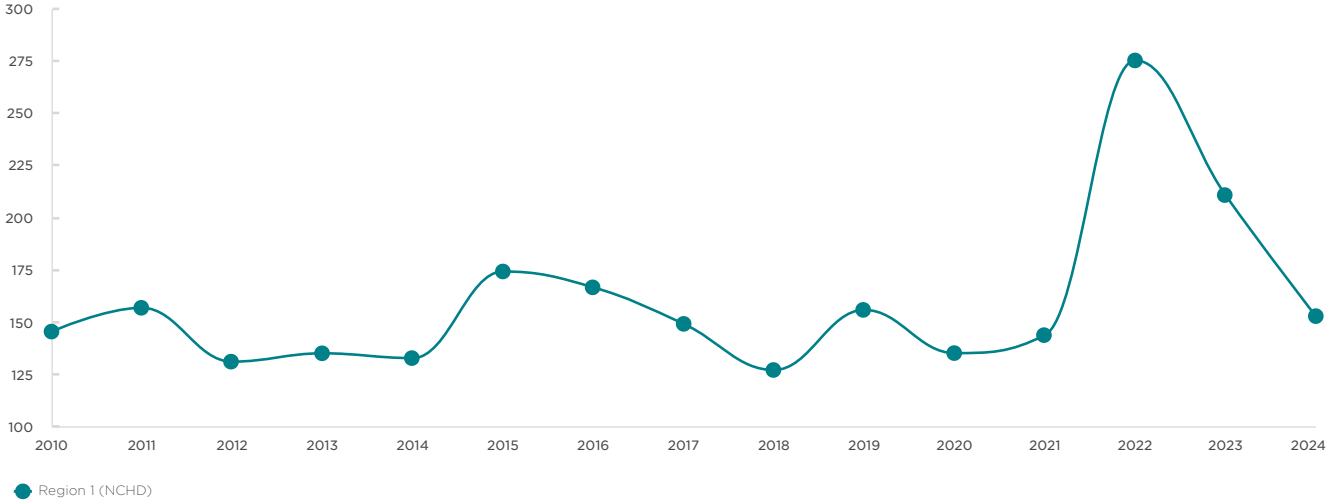


132

Deaths per 100,000 people
Heart Disease Deaths
Colorado

Sources: CDC WONDER Cause of Death 2024 Crude

Heart Disease Deaths Over Time



Sources: CDPHE

Cancer



168

Age-Adjusted Deaths per 100,000 People
Cancer Deaths
Region 1 (NCHD)

Sources: CDPHE 2024

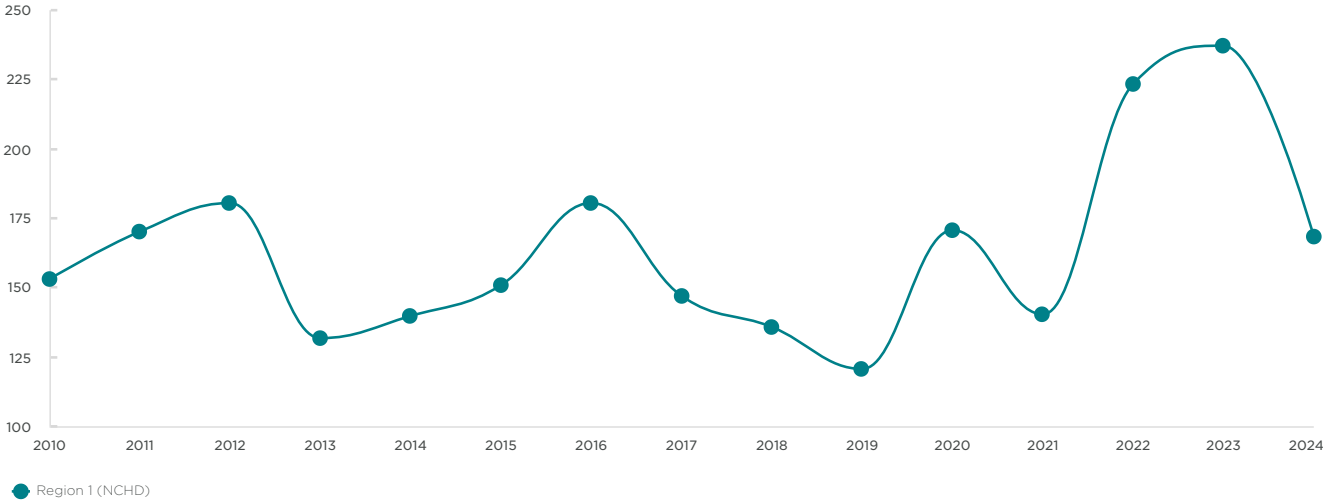


143

Deaths per 100,000 people
Cancer Deaths
Colorado

Sources: CDC WONDER Cause of Death 2024 Crude

Cancer Deaths Over Time



Sources: CDPHE

Accidental Unintentional Injuries



62

Age-Adjusted Deaths per 100,000 People

Accidental Unintentional Injury Deaths

Region 1 (NCHD)

Sources: CDPHE 2024



64

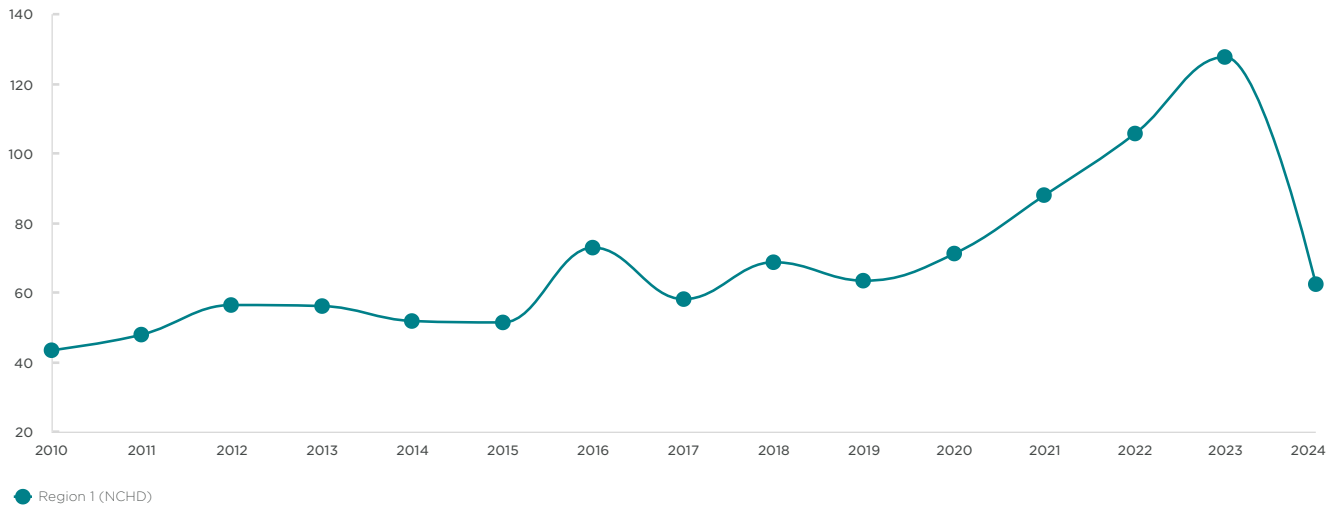
Deaths per 100,000 people

Accidental Unintentional Injury Deaths

Colorado

Sources: CDC WONDER Cause of Death 2024 Crude

Accidental Unintentional Injury Deaths Over Time



Sources: CDPHE

Chronic Lower Respiratory Disease



56

Age-Adjusted Deaths per 100,000 People

Chronic Lower Respiratory Disease Deaths

Region 1 (NCHD)

Sources: CDPHE 2024



40

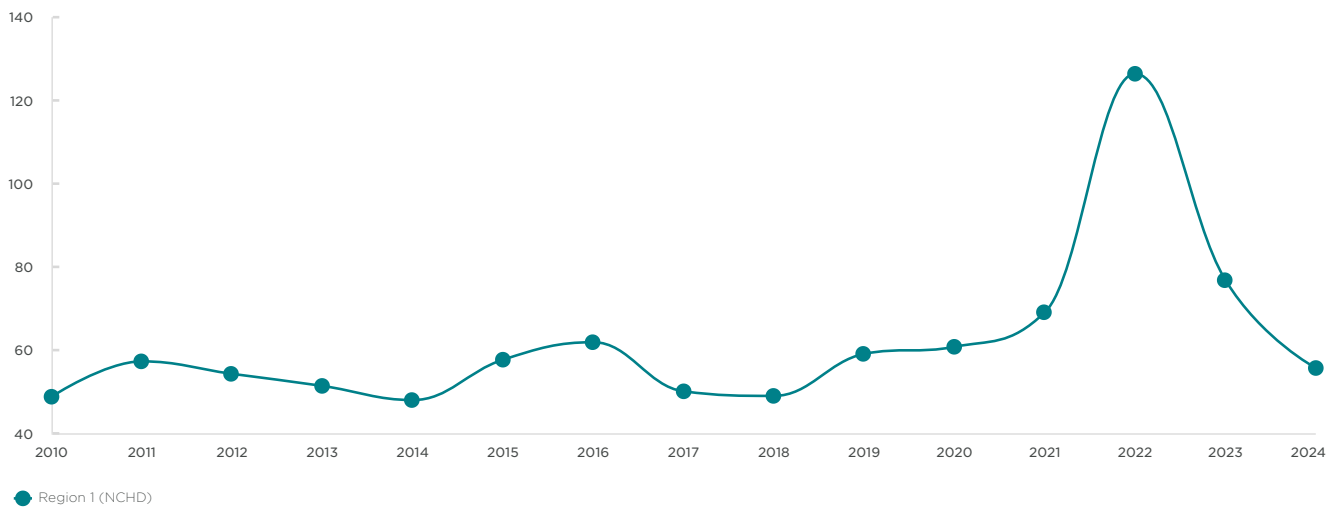
Deaths per 100,000 people

Chronic Lower Respiratory Disease Deaths

Colorado

Sources: CDC WONDER Cause of Death 2024 Crude

Chronic Lower Respiratory Disease Deaths Over Time



Sources: CDPHE

Which **hospitalization stays** could have been prevented?

When residents cannot access routine preventative healthcare check-ups, our community is forced to rely on expensive, late-state emergency care. With access to quality preventive healthcare, our residents can catch potential health problems at their earliest stages, improve lifestyle habits, and ultimately prevent these hospitalization stays.



Preventable Hospitalizations

2,099

Hospital Stays per 100,000 Medicare Enrollees

Sedgwick County, CO

1,905

Hospital Stays per 100,000 Medicare Enrollees

Yuma County, CO

2,711

Hospital Stays per 100,000 Medicare Enrollees

Phillips County, CO

2,444

Hospital Stays per 100,000 Medicare Enrollees

Morgan County, CO

1,686

Hospital Stays per 100,000 Medicare Enrollees

Colorado

1,912

Hospital Stays per 100,000 Medicare Enrollees

Washington County, CO

1,899

Hospital Stays per 100,000 Medicare Enrollees

Logan County, CO

Sources: Mapping Medicare Disparities Tool 2023 via RWJF County Health Rankings & Roadmaps 2026 Supplemental Release

Preventable Hospitalizations

Region 1 (NCHD Service Area)

Hospital Stays per 100,000 Medicare Enrollees



Sources: Mapping Medicare Disparities Tool 2023 via RWJF County Health Rankings & Roadmaps 2026 Supplemental Release

What are the **sexually transmitted disease** rates in our community?

Untreated sexually transmitted diseases (STDs) can lead to serious long-term health consequences, including infertility. STDs are acquired during unprotected sex with an infected partner. Social, economic, and behavioral factors can affect the spread of STDs. These factors may cause serious obstacles to STD prevention because of their influence on social

and sexual networks, access to care, willingness to seek care, and social norms regarding sex and sexuality.

HIV



People Living with HIV

281

People per 100,000 Residents Ages 13+
Colorado

212

People per 100,000 Residents Ages 13+
Logan County, CO

152

People per 100,000 Residents Ages 13+
Yuma County, CO

150

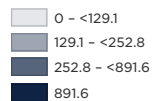
People per 100,000 Residents Ages 13+
Morgan County, CO

Sources: National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention 2023 via RWJF County Health Rankings & Roadmaps 2026 Supplemental Release
Note: Phillips County, CO, Washington County, CO and Sedgwick County, CO have no data available.

HIV Prevalence Rate

 Region 1 (NCHD Service Area)

People per 100,000 Residents Ages 13+



Sources: National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention 2023 via RWJF County Health Rankings & Roadmaps 2026 Supplemental Release

Syphilis



Primary & Secondary Syphilis Rate

16

Cases per 100,000 Residents

Colorado

4.8

Cases per 100,000 Residents

Logan County, CO

0

Cases per 100,000 Residents

Washington County, CO

6.8

Cases per 100,000 Residents

Morgan County, CO

0

Cases per 100,000 Residents

Phillips County, CO

0

Cases per 100,000 Residents

Sedgwick County, CO

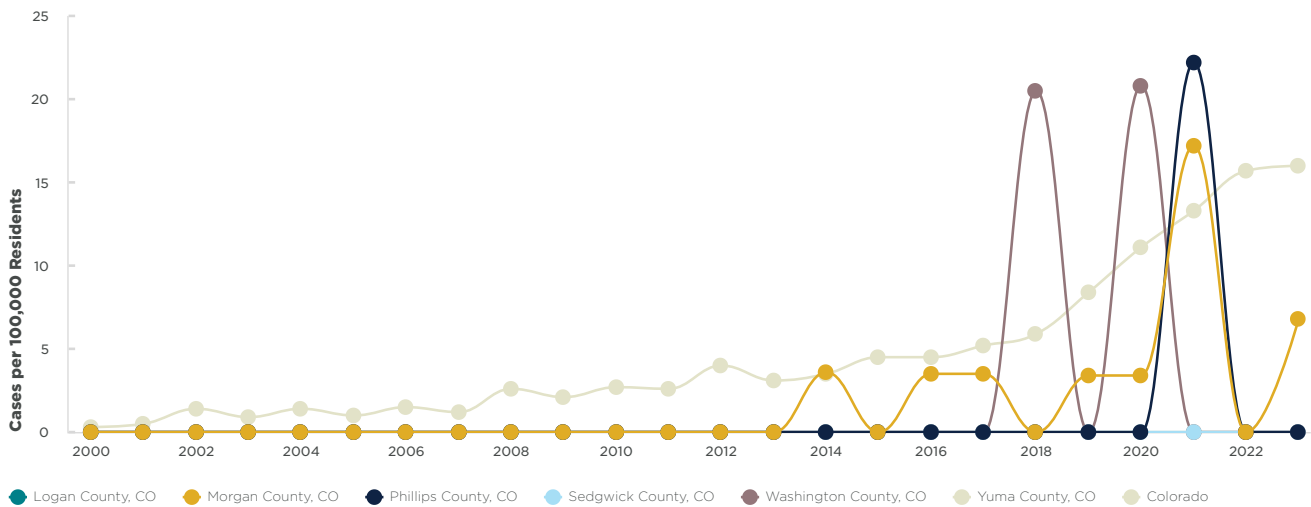
0

Cases per 100,000 Residents

Yuma County, CO

Sources: CDC NCHHSTP AtlasPlus 2023

Primary & Secondary Syphilis Rate Over Time



Sources: CDC NCHHSTP AtlasPlus

Gonorrhea



Gonorrhea Rate

128.7

Cases per 100,000 Residents

Colorado

67.7

Cases per 100,000 Residents

Morgan County, CO

10.1

Cases per 100,000 Residents

Yuma County, CO

53.3

Cases per 100,000 Residents

Logan County, CO

0

Cases per 100,000 Residents

Phillips County, CO

0

Cases per 100,000 Residents

Sedgwick County, CO

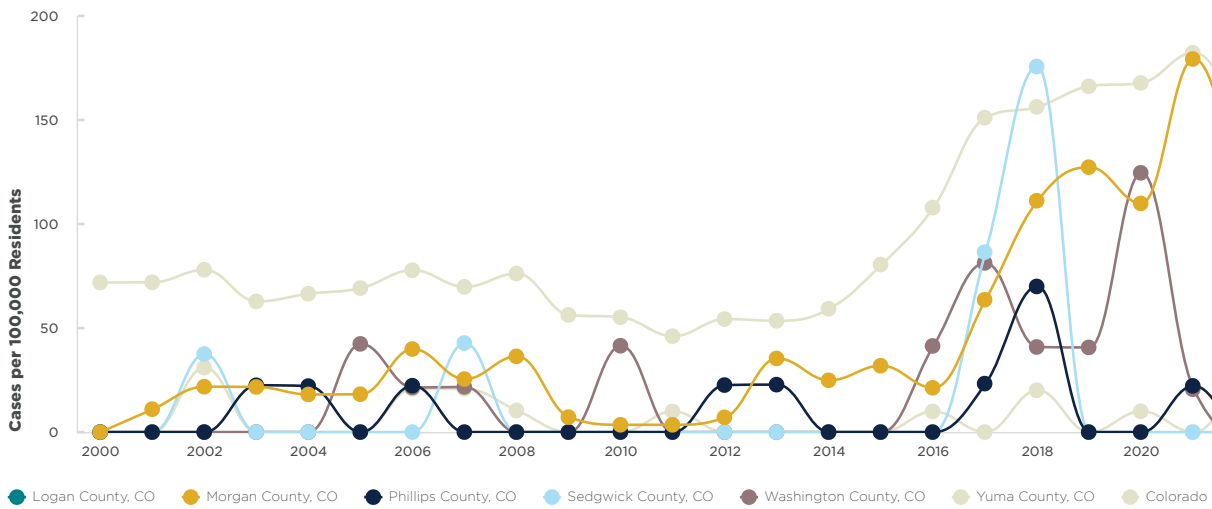
20.6

Cases per 100,000 Residents

Washington County, CO

Sources: CDC NCHSTP AtlasPlus 2023

Gonorrhea Rate Over Time



Sources: CDC NCHSTP AtlasPlus

Chlamydia



Chlamydia Rate

435.1

Cases per 100,000 Residents
Colorado

436.9

Cases per 100,000 Residents
Morgan County, CO

201.1

Cases per 100,000 Residents
Phillips County, CO

226.6

Cases per 100,000 Residents
Washington County, CO

172.4

Cases per 100,000 Residents
Yuma County, CO

223.1

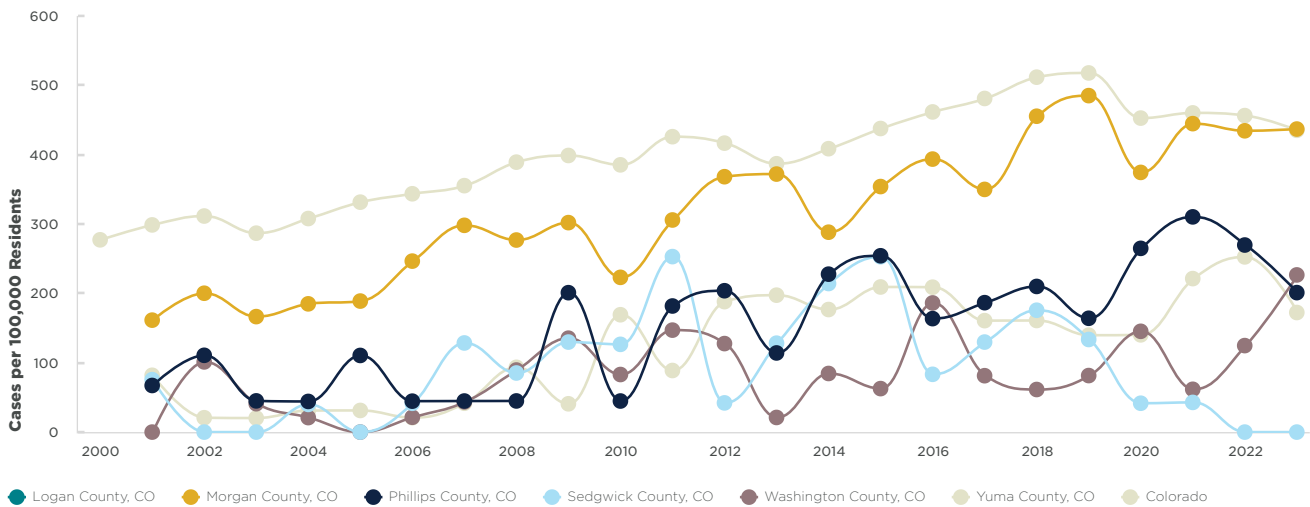
Cases per 100,000 Residents
Logan County, CO

0

Cases per 100,000 Residents
Sedgwick County, CO

Sources: CDC NCHSTP AtlasPlus 2023

Chlamydia Rate



Sources: CDC NCHSTP AtlasPlus

What is the state of **behavioral health & substance misuse** in our community?

Behavioral health affects physical and overall health and includes mental health, substance abuse, and suicide risk. Behavioral health issues are symptoms of real, physical conditions occurring in the brain and can be addressed through mental health programs, suicide prevention, and substance abuse interventions. **Behavioral health plays a vital role in our well being.**



How are **social & environmental factors** affecting behavioral health & substance misuse?

With access to mental health providers, residents can address their emotional, psychological, and social well-being. Improving mental health has positive effects for both the individual and the community. Learn more on the [Society & Environment](#) page.



Mental Health Provider Ratio

318.3

People per 1 Mental Health Provider

Colorado

1,017.9

People per 1 Mental Health Provider

Morgan County, CO

485.9

People per 1 Mental Health Provider

Logan County, CO

No data

People per 1 Mental Health Provider

Sedgwick County, CO

1,124

People per 1 Mental Health Provider

Phillips County, CO

1,425.6

People per 1 Mental Health Provider

Yuma County, CO

4,831

People per 1 Mental Health Provider

Washington County, CO

Sources: NPES NPI 2025

What do **behavioral factors** reveal about residents' opportunity for behavioral health & substance misuse prevention?

Health behaviors occur within the context of the social and environmental factors that a person is experiencing.

Substance abuse has been on the rise in recent years. Larger cultural factors, such as media representations of substance use, may play a role. Learn more on the [Behavioral Factors](#) page.



Excessive or Binge Drinking

16.4%

of Adults

Region 1 (NCHD Service Area)

18.9%

of Adults

Colorado

Sources: CDC BRFSS PLACES 2023

What do **health outcomes** reveal about residents' opportunity for lifelong behavioral health?

Health outcomes are influenced by the healthcare environment, social context, and behaviors. Deaths from overdose and vehicle crashes can be the result of multiple factors. However, increased education and safety can help reduce rates in the community. Learn more on the [Health Outcomes](#) page.



Suicide Death Rate

42

Age-Adjusted Deaths per 100,000 People

Morgan County, CO

29

Age-Adjusted Deaths per 100,000 People

Logan County, CO

30

Age-Adjusted Deaths per 100,000 People

Yuma County, CO

Sources: CDPHE 2024

Note: No data available for Phillips County, CO, Sedgwick County, CO, and Washington County, CO

Resources

Learn more about how our community is addressing this health priority.



Behavioral & Mental Health Services

NCHD is currently focusing on the behavioral/mental health of our communities through a three-pronged approach; Suicide Prevention, Man Therapy, and Pregnancy-related Depression.

[Read More](#)

How are **social & environmental factors** affecting residents' quality of life?



Are our residents able to access **mental health** services?

Mental health providers help residents with their emotional, psychological, and social well-being. Providers can help residents handle stress, build relationships, and make important choices. Treating a mental illness properly can improve quality of life, performance at work or school, physical health, and overall happiness. Some geographic areas, populations, and facilities have too few mental health providers and services, designated as Health Professional Shortage Areas by the Health Resources and Services Administration.



Mental Health Provider Ratio

318.3

People per 1 Mental Health Provider

Colorado

1,017.9

People per 1 Mental Health Provider

Morgan County, CO

485.9

People per 1 Mental Health Provider

Logan County, CO

No data

People per 1 Mental Health Provider

Sedgwick County, CO

1,124

People per 1 Mental Health Provider

Phillips County, CO

1,425.6

People per 1 Mental Health Provider

Yuma County, CO

4,831

People per 1 Mental Health Provider

Washington County, CO

Sources: NPPES NPI 2025

Mental Health Provider Ratio

 Region 1 (NCHD Service Area)

People per 1 Mental Health Provider

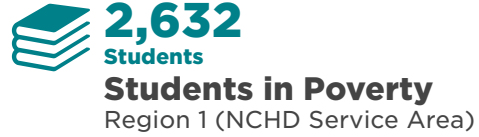
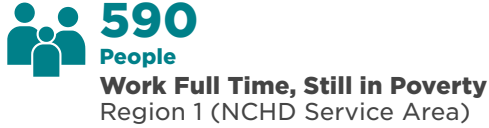


Sources: NPPES NPI 2025

How are **income & poverty** affecting mental health?

Poverty is both a cause and a consequence of poor mental health. The cost of doctors' fees, prescriptions, and transportation to reach a mental health provider can be devastating for families living in poverty. These issues and financial stressors then can take a toll on mental health. Untreated mental illness can lead to struggles at work and

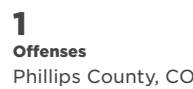
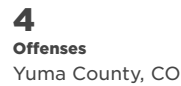
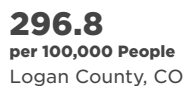
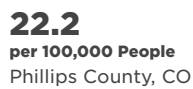
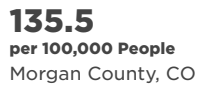
substance abuse. Approximately one fourth to one third of homeless people have a mental illness², which can make it more difficult to find stable housing.



Sources: US Census Bureau ACS 5-year 2020-2024

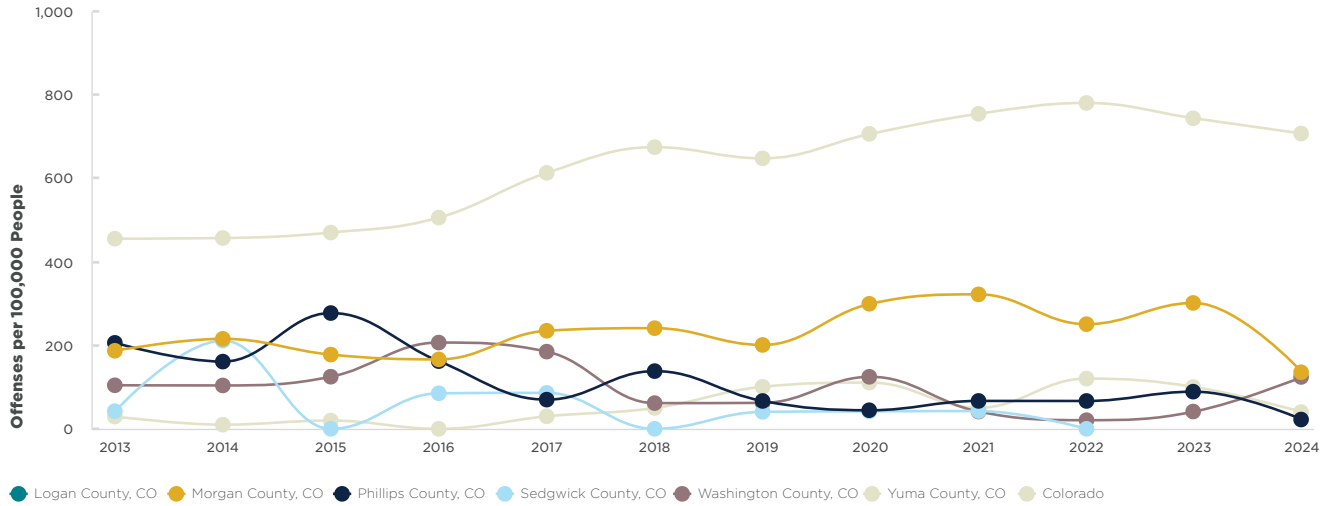
How prevalent is **violent crime** in our community?

Violent crime not only directly leads to injury, it could be harmful to mental health as well. Living near areas of high crime may increase rates of depression more than personal stress. Violent crime also increases the risk of behavioral problems, anxiety, aggression, and post-traumatic stress disorder among children. It can even put adults who grew up in high crime areas at greater risk for domestic abuse, substance use, unsafe driving, and risky sexual behavior.



Sources: FBI UCR 2024

Violent Crime Rate Over Time



Sources: FBI UCR

Are residents getting the **support** they need from our community?

Supportive, cohesive communities protect people against risk, foster trust, and ultimately promote community health. Studies show that residents who feel supported by their community experience improved family health, safety, and overall well-being while decreasing stress, poverty, and even racism. Conversely, those without community support experience challenges in childhood development, higher rates of chronic disease, and increased rates of mental health.



Member Associations

20

Associations per 10,000 Residents

Phillips County, CO

0

Associations per 10,000 Residents

Sedgwick County, CO

13

Associations per 10,000 Residents

Yuma County, CO

14

Associations per 10,000 Residents

Washington County, CO

11

Associations per 10,000 Residents

Morgan County, CO

9

Associations per 10,000 Residents

Colorado

10

Associations per 10,000 Residents

Logan County, CO

Sources: County Business Patterns 2023 via RWJF County Health Rankings & Roadmaps 2026 Supplemental Release

Note: Membership associations include civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations.

What do **behavioral factors** reveal about residents' opportunity for behavioral health & prevention of substance misuse?



How prevalent is **alcohol use** among youth in our community?

Youth who use substances may be more likely to experience school problems, such as higher absence and poor or failing grades. They may also face social problems, such as fighting and lack of participation in youth activities. Youth who use substances may be more likely to experience legal problems, physical problems, or disruption of normal growth and development. They are at a higher risk for suicide and homicide, substance-related car crashes and other unintentional injuries, or death from alcohol poisoning. Early initiation of substance use is linked to substance use disorders later in life.



Alcohol Use in Last 30 Days

32.1%

High School Students

Region 1 (NCHD Service Area)

29.6%

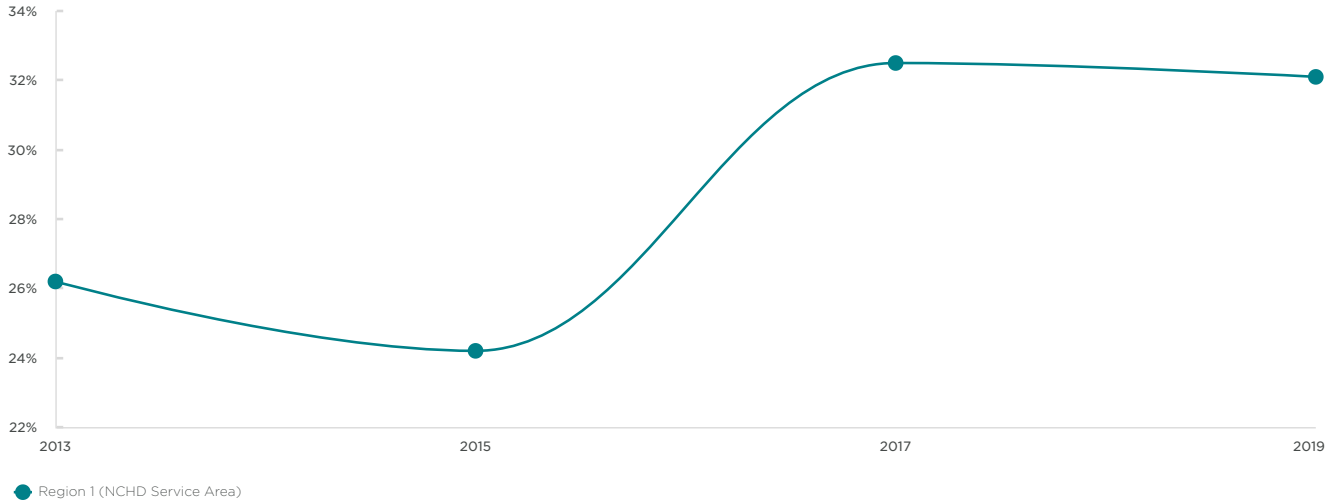
High School Students

Colorado

Sources: Healthy Kids Colorado Survey 2019

Youth Alcohol Use over Time

Alcohol Use in Last 30 Days Among High Schoolers



Sources: Healthy Kids Colorado Survey

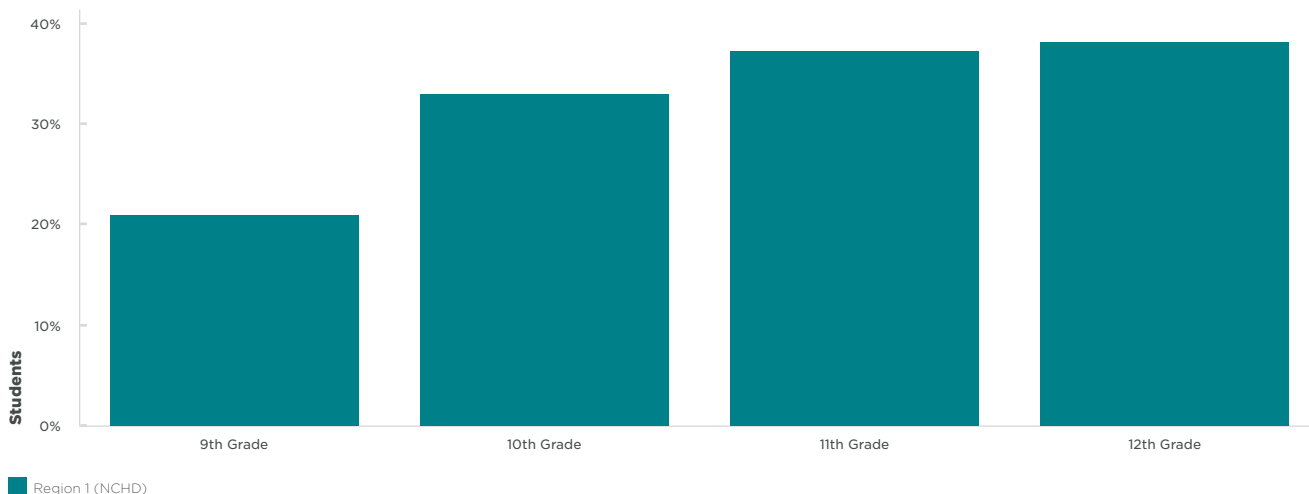
Youth Alcohol Use by Race

Alcohol Use in Last 30 Days Among High Schoolers by Race & Ethnicity

Sources: Healthy Kids Colorado Survey 2019

Youth Alcohol Use by Grade

Alcohol Use in Last 30 Days Among High Schoolers by Grade



Sources: Healthy Kids Colorado Survey 2019

How prevalent is **substance use** among youth in our community?

Youth who use substances may be more likely to experience school problems, such as higher absence and poor or failing grades. They may also face social problems, such as fighting and lack of participation in youth activities. Youth who use substances may be more likely to experience legal problems, physical problems, or disruption of normal growth and development. They are at a higher risk for suicide and homicide, substance-related car crashes and other unintentional injuries, or death from alcohol poisoning. Early initiation of substance use is linked to substance use disorders later in life.



Marijuana Use in Last 30 Days

15.8%

High School Students

Region 1 (NCHD Service Area)

20.6%

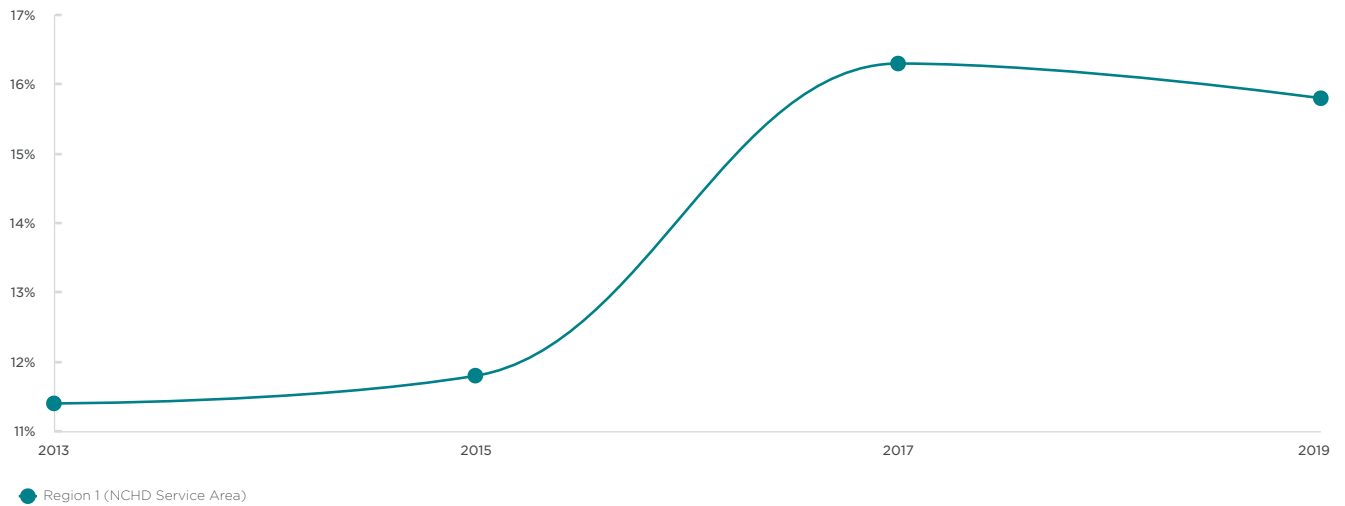
High School Students

Colorado

Sources: Healthy Kids Colorado Survey 2019

Youth Marijuana Use over Time

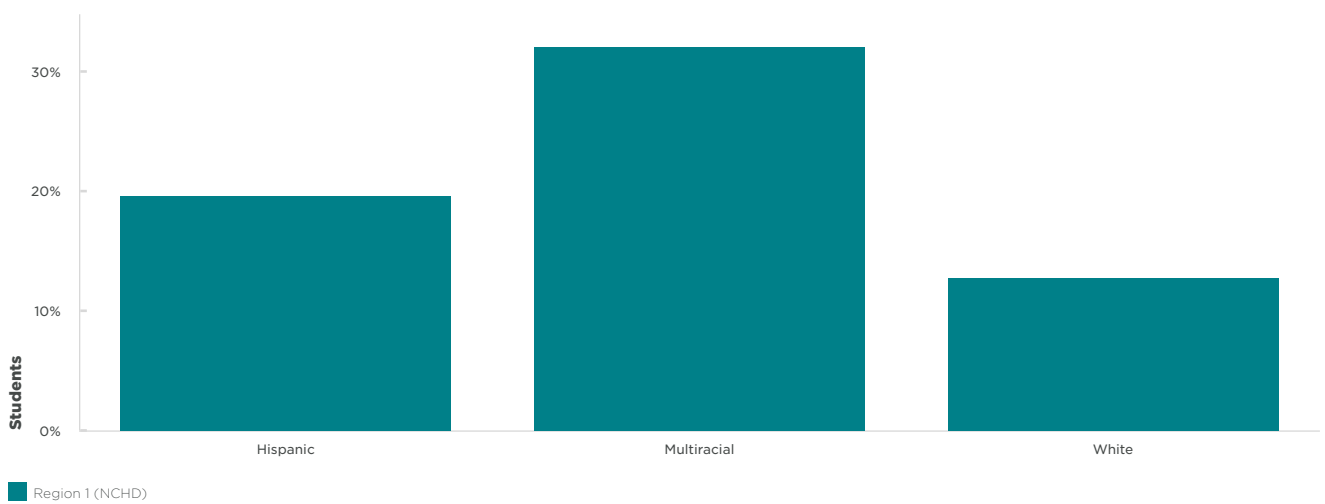
Marijuana Use in Last 30 Days Among High Schoolers



Sources: Healthy Kids Colorado Survey

Youth Marijuana Use by Race

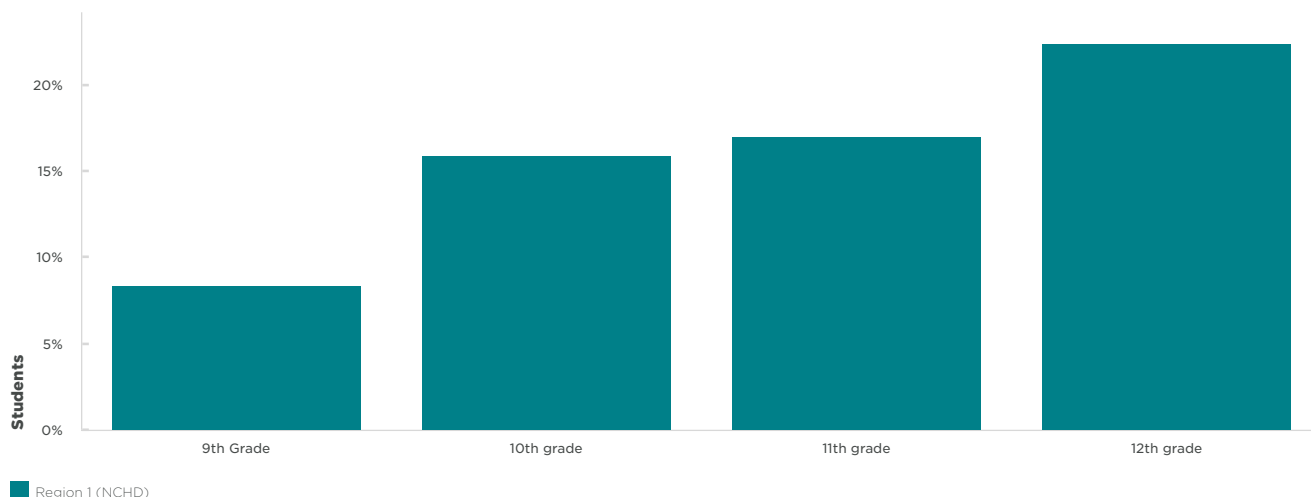
Marijuana Use in Last 30 Days Among High Schoolers by Race & Ethnicity



Sources: Healthy Kids Colorado Survey 2019

Youth Marijuana Use by Grade

Marijuana Use in Last 30 Days Among High Schoolers by Grade



Sources: Healthy Kids Colorado Survey 2019

How prevalent is binge drinking in our community?

Binge drinking is defined as raising your blood alcohol concentration level to .08 g/DL at least once per month. For men, this usually means about 5 drinks in one sitting, or for women 4 drinks in one sitting. People may binge drink due to peer pressure, to relax, and may be prone to binge drinking due to genetic factors. For those who binge drink often, consequences can be dire. Risks include injury, alcohol poisoning, heart disease and some cancers.



Excessive or Binge Drinking

16%

of Adults

Region 1 (NCHD Service Area)

19%

of Adults

Colorado

Sources: CDC BRFSS PLACES 2023

The communities that comprise the Northeast Colorado Health Department include those in Logan, Morgan, Phillips, Sedgwick, Washington, and Yuma county. Our unique population consists of primarily white residents with the highest concentration being those between 25-34 years old. Our health district has a slightly higher percentage of individuals living with a disability, 12.3% when compared with the whole of Colorado at 11.2%.

The international communities in our counties also make up a good portion of our residents, with 9.7% of the population being foreign born. 8% of the population in our counties has a limited English language proficiency compared with just 5.5% in all of Colorado. 7.7% of residents are veterans. 3.4% of adults in our six counties identify as LGBTQ+. It is important to note the rich diversity of our population in order to best meet the unique needs of our community with tailored health promotion campaigns and outreach programming.

As a health department, it is our mission to understand how social and economic factors impact the health of our residents. This knowledge is critical for making decisions that improve our residents' opportunities for enhancing their health outcomes. 13% of the population in our region is living in poverty compared to 9% of the population in all of Colorado. A high school diploma is the highest level of educational attainment that most residents achieve in our community compared to a bachelor's degree in all of Colorado. Those who are unemployed make up just 4% of the population in our region compared to 4% in all of Colorado.

The wellbeing of mothers and children is a fundamental building block for life-long health of those in our community. Access to prenatal health care helps decrease the risk of maternal deaths and complications from pregnancy. Approximately 17.7% of mothers in our region receive no prenatal care in the first trimester of their pregnancy or after. All of our counties had a lower percentage of babies born at a low birth rate, which can impact infant mortality, when compared to Colorado as a whole.

Preventative care is a major component of living a long healthy life. Scheduling regular check-ups, eating a balanced diet, and staying physically active are key to maintaining a healthy lifestyle. A low ratio of healthcare providers to residents and lack of transportation to doctor's appointments are barriers to lifelong health in our region. In our community, 22.7% of people identify as being physically inactive, compared to just 17.7% of people in Colorado as a whole. Obesity rates in our region are also higher than those representing the state total. 30% of adults in our region are obese compared to just 26% of obese adults in all of Colorado.

Behavioral health encompasses the choices we make which impact how optimally we function as a whole. Behavioral health not only includes our actions, but it also reflects the state of our mental well-being. Lack of accessibility to mental health care services is a barrier to behavioral health in our region. Our region has less excessive/binge drinkers, at 18%, than Colorado as a whole at 19.9%.

Identifying the most prevalent causes of death in our region allows us to understand how social, environmental, and behavioral factors may be negatively impacting the health of our residents. The lead cause of death in our community, according to age adjusted rates, is cancer. The most prevalent types of cancer in our region include breast, prostate, and lung cancer. Non-Hispanic white males are the population most likely to be impacted by cancer in our community. Heart disease is also a leading cause of death for our residents.

In order to progress as a health agency, it is imperative to gain a full-picture perspective of the barriers to health care and positive health outcomes that our residents face. In analyzing the data that reflects the physical, mental, environmental, and social well-being of our community we are able to create impactful programs that improve the quality of life of our residents. The community health assessment is essential to our primary mission of serving the communities that make up our 6 counties.