

FALL 2015

SKAGIT COUNTY POPULATION HEALTH TRUST ADVISORY COMMITTEE



QUALITY OF LIFE SURVEY  
HEALTH CARE  
ACCESS & QUALITY  
SUMMARY REPORT

# Table of Contents

<b>Table of Contents.....</b>	<b>1</b>
<b>Acknowledgements .....</b>	<b>2</b>
<b>Description of the Survey and Analysis .....</b>	<b>4</b>
<b>The People.....</b>	<b>6</b>
<b>HEALTH CARE ACCESS &amp; QUALITY SECTION .....</b>	<b>8</b>
<b>Health Insurance Coverage .....</b>	<b>9</b>
<b>Unintended Pregnancy .....</b>	<b>10</b>
<b>Medical Care.....</b>	<b>11</b>
<b>Dental Care.....</b>	<b>15</b>
<b>Mental Health.....</b>	<b>18</b>
<b>Substance Abuse.....</b>	<b>24</b>
<b>Employer Support.....</b>	<b>29</b>
<b>Appendix A: Overall Ranking of Top Desired Changes and Challenges .....</b>	<b>30</b>
<b>Appendix B: Participant Summary .....</b>	<b>36</b>



# Acknowledgements

This report is part of a Community Health Assessment process supported by the Population Health Trust Advisory Committee which serves in an advisory role to the County's Board of Health. The Board of Health is represented by Commissioner Kenneth Dahlstedt, Commissioner Ron Wesen, and Commissioner Lisa Janicki.

The Trust volunteers are committed to improving health for all Skagit people and making recommendations to the Board of Health about emerging issues. Members represent diverse community sectors and perspectives and are in service to the community.

For more information about The Population Health Trust Advisory Committee please visit <http://www.skagitcounty.net/Departments/PHTAC>

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# Description of the Survey and Analysis

## *Survey Purpose*

The Skagit County *Quality of Life Survey* was conducted as part of a broad community health assessment process for Skagit County, Washington.

The specific purpose of this survey was to capture perspectives on health challenges and perceived solutions from diverse individual members of the community. This information will complement other sources of information on community-wide population demographics and health status, as well as information from community leaders about opportunities for action to improve community health.

## *Survey Implementation*

The survey was modified from a proven Kitsap County survey, with additional ideas gleaned from Snohomish, Spokane and Benton-Franklin County surveys. It was further edited and modified by Skagit County Health Department staff in collaboration with a Population Health Trust Stakeholder group. The final instrument had 40 questions, including many with multiple response options or sub-parts. All but one response to this survey were quantitative.

This survey was available through a “SurveyMonkey” online survey program, and also as a printed paper survey. The printed version was translated into Spanish and distribution was led by Community Action in collaboration Sea Mar Community Health Centers.

The goal for recruitment was to obtain at least 750 surveys. To meet this goal, promotional activities included:

- A week long announcement was placed in the Skagit Valley Herald
- Posters and promotional office tents were sent to community organizations and libraries weeks prior to announcing the upcoming release
- All Population Health Trust members sent email announcements to their constituents several weeks prior to the survey
- The survey was posted on the County website and social media, and
- Several organizations re-posted on their websites

Promotional activities reached an estimated:

- More than 6,000 people by email
- More than 2,000 people through social media (Facebook, Twitter)
- More than 650 through meetings or in public settings
- More than 460 people through face-to-face distribution of paper copies (especially among disadvantaged populations)

The survey was promoted and data collected between June 21 and July 10, 2015. A total of 1,513 people participated.

## Methods for Analysis

The prevalence of different response options was reported throughout the report as percentages. These were done overall and by subgroups. A minimum of 50 respondents was required to report any results, to improve stability of estimates. When subgroups had fewer than 50 respondents, percentages were not reported and are noted with an “\*” throughout the report.

Chi-square tests were used to determine whether subgroups were significantly different from one another. Results were considered statistically significant if they reached the 95% confidence level ( $p\text{-value} < .05$ ). Data are interpreted in tables with the following symbols:

- indicates there are statistically significant differences that are “more positive” versus comparison groups (when measures have a desirable direction)
- ◐ indicates not significantly different from comparison groups (sometimes when groups are small, measured differences may be large but this symbol indicates they are not statistically significant in difference from the comparison group).
- indicates statistically significant differences that are “more negative” versus comparison groups (when measures have a desirable direction)

Groups were compared using a generally dichotomous approach as follows:

- Females and males were compared to each other
- Young adults (ages 18-29) were compared to other age groups overall (people 30 and older)
- Elders (ages 60+) were compared to other age groups overall (people under 60)
- The “Working Well” and “Struggling Families” defined groups were each compared with all other respondents (those not falling into the group, see first section of report for group definitions)
- Each race/ethnic group was compared to the remaining people in the group (e.g., Tribal community members were compared to all non-Tribal community members, Latinos were compared to non-Latinos, and whites were compared to non-whites)
- Skagit County Commissioner Districts were compared to each other (1 vs. 2, 1 vs. 3, and 2 vs. 3). Because this is a three-way comparison there are some footnotes for tables that describe which specifically were significant differences.

## Limitations

The results presented in this report are intended to contribute to a process of understanding the health and factors affecting health of people in Skagit County. The results should be considered as valuable contributions from a large set of people, but they may not apply to the entire community population or subgroups.

Every effort was made to support participation by large numbers of diverse community members, so that a variety of perspectives were included that would otherwise be absent (because it is not feasible for all community members to participate in the community assessment process). Because data were gathered using a convenience sample approach, rather than as the result of formal statistical sampling and study procedures, they are not generalizable to the entire community. Information from other sources such as the Census, Vital Statistics and public health surveillance system should be considered more reliable for describing overall characteristics of the Skagit County community.

More detail about the characteristics of survey participants is included as an Appendix in this report. This information is intended to help readers consider how results might be affected by participation patterns. Notably, participation was disproportionately higher among women and employed/well-educated community members (the “Working Well”). Readers should consider these influences when reviewing and interpreting results.

# The People

## Who participated in the survey?

- A total of 1,513 people participated in the survey
- As is typical for health assessments, more women than men participated (72% women, 26% men)
- Age groups were well-represented
  - 18% were adults under 29
  - 23% were 30-39
  - 17% were 40-49
  - 22% were 50-59
  - 20% were 60 or better
- Most had lived in the Skagit County area for a long time
  - 70% for 10 years or more
  - 5% for less than a year
- One-third had school-aged children in the home (34%)
- Most had at least some college education (75%) and most are employed (75%)
- Most were white non-Hispanic (76%)
- Many were classified as “living in poverty”<sup>1</sup> (37%)
- Most took the survey online (72%) but many took a paper version of the survey (28%)

## How do we use this information in terms of community planning?

We used this information to create some demographic “profiles” of key community groups. These profiles represent combinations of characteristics that may influence awareness, access or perceptions of different health-related factors.

**Readers should recall the dichotomous nature of these comparisons in the report: sometimes an estimate may be marked with the symbol for “more positive” or “more negative” despite not looking very different from that overall average.** This is because the symbols indicate difference from the comparison group.

- **Working Well** - 43% (523) are employed, have some college education, have medical insurance and an income of \$50,000 or more per year
- **Struggling Families** – 11% (143) have school-aged children in the home, are below the poverty threshold,<sup>1</sup> and said they were unable to access essentials at least sometime during the past year (food, clothes, housing or medication)
- **Young Adults** – 18% (233) are under 30
- **Elders** – 20% (253) are ages 60 or better
- **Tribal community members** – 4% (52) identified as American Indian or Alaska Native, alone or in combination with another race
- **Latinos** – 6% (69) said they were Hispanic, but not Indigenous Mexican
- **Indigenous Mexicans** – 10% (119) said they were Indigenous Mexicans, not Hispanics – from Mexico and may speak an indigenous language instead of Spanish
- **Skagit County Commissioner Districts 1,2,3** – 21% said they were from District 1 (Anacortes, Fidalgo Island, La Conner, Bayview, Bow, Edison, and north to the Whatcom County line), 45% from District 2 (Mount Vernon, Conway, and south to the Snohomish County line), and 34% from District 3 (Burlington, Sedro-Woolley, and all of eastern Skagit County).

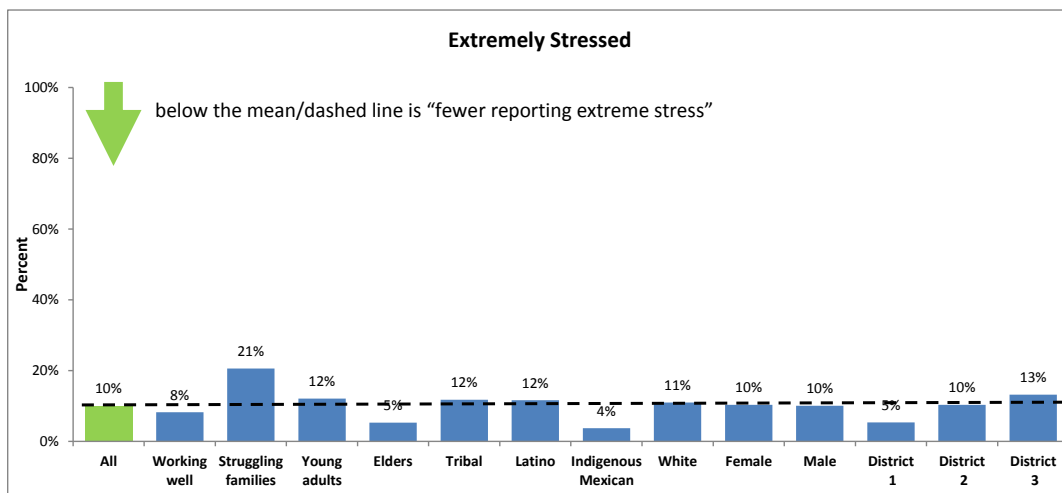
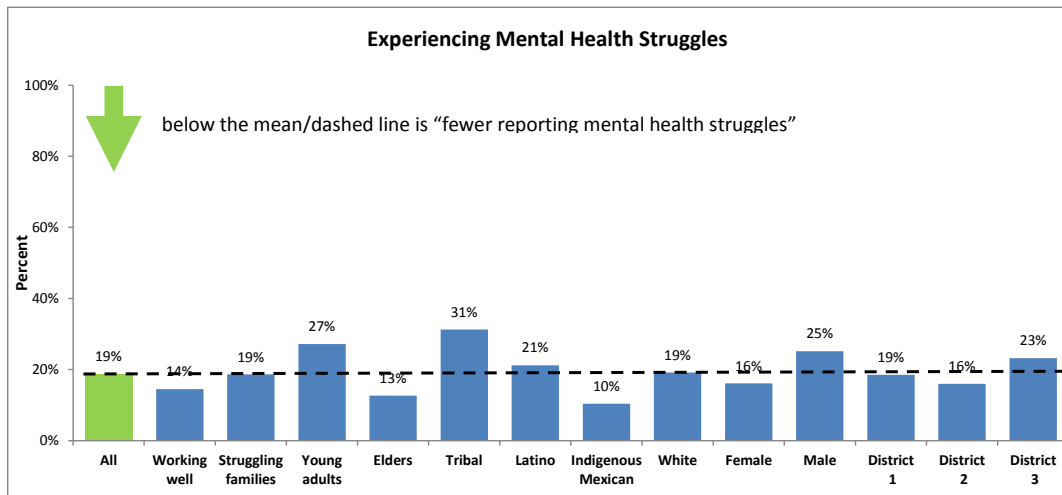
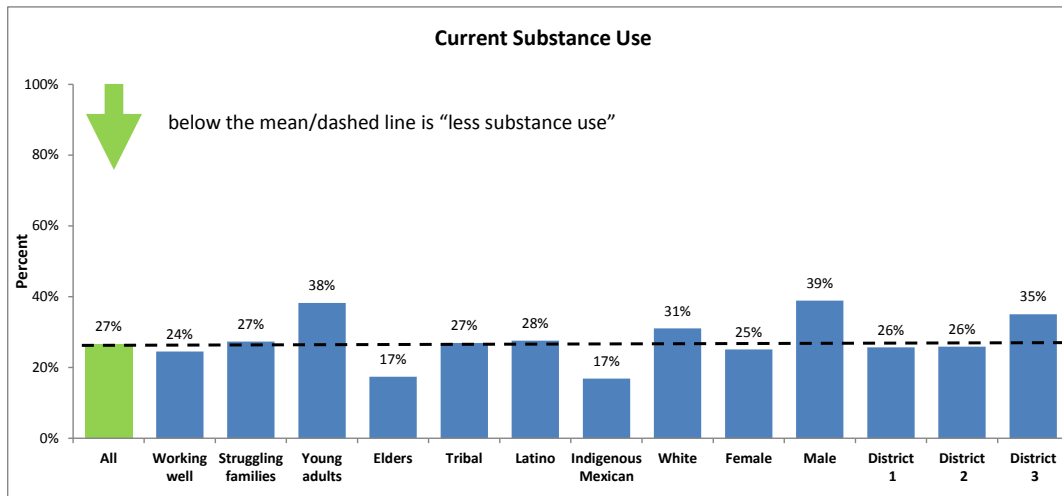
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<sup>1</sup> Annual household income and number of household members were applied to federal poverty level guidelines. We classified “poverty” as 150% of the federal guidelines. As an example, this means that a family of 4 people has an annual household income of \$36,375 or less.

Detailed descriptions and numbers of people within these groups are included in the Appendix.

## What do we know about their General Health?

Our community groups reported different experiences with common life challenges that can affect health: Current substance use, Current mental health struggles, and Extreme stress. Notably, although some groups may say they have fewer challenges (such as the Working Well), they represent a large portion of the total population and consequently are important to consider in community planning.





# HEALTH CARE ACCESS & QUALITY SECTION

# Health Insurance Coverage

## Health Insurance

The survey did not ask a question specifically about having health insurance, but did ask about what might prevent respondents from accessing health care.

- About 11% selected “no insurance” as a reason for not seeing a doctor or health care professional.

When asked about accessing other health-related services,

- About 14% selected “no insurance” as a reason for not seeing a dentist.
- About 7% selected “no insurance” as a reason for not seeing a mental health specialist.
- About 4% selected “no insurance” as a reason for not seeing a substance abuse specialist.

For more information about those not having insurance, see page 11.

# Unintended Pregnancy

The survey did not ask a question specifically about unintended pregnancy, but when asked to identify the top three changes they would make to improve health and well-being in Skagit County.

- About 7% selected “fewer unplanned pregnancies” as a top change to improve health in the county.

To see how this desired change ranks among other topics, see page 30.

# Medical Care

## Barriers to Medical Care Access

Among those who needed to see a doctor, the following reasons may prevent respondents from seeking those services.

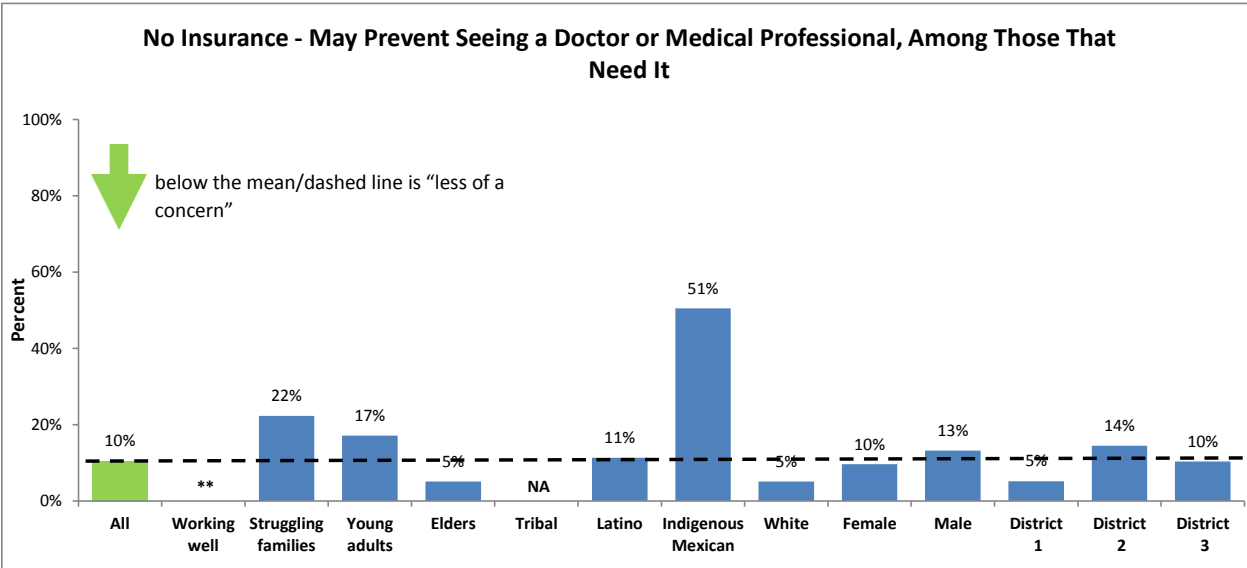
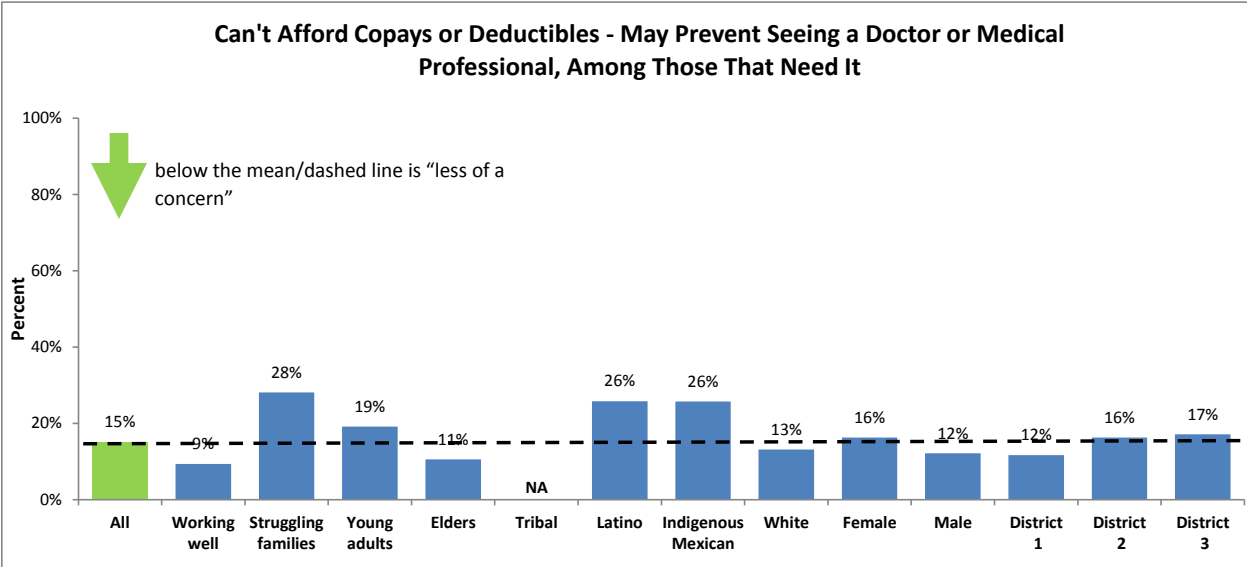
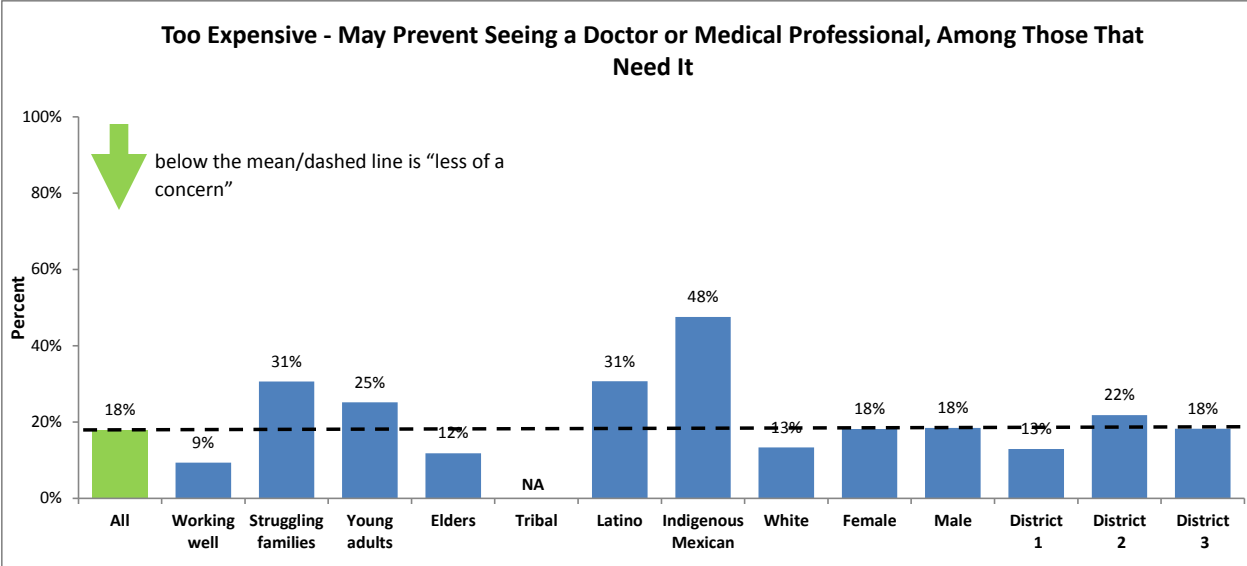
Some of our community groups reported different reasons that may prevent them from seeing a doctor or medical professional.

	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
○ = less of a concern vs. comparison group														
◐ = similar														
● = more of a concern vs. comparison group														
Too expensive	18%	○	●	●	◐	*	●	●	○	◐	◐	○	●	◐
Can't afford copays or deductibles	15%	○	●	◐	◐	*	●	●	○	◐	◐	◐	◐	◐
No insurance	10%	**	●	●	◐	*	◐	●	○	◐	◐	○	●	●
Too busy	9%	◐	◐	◐	◐	*	◐	●	○	◐	◐	◐	◐	◐
Don't have a provider	8%	○	●	●	◐	*	◐	●	○	◐	◐	◐	◐	◐
Change or loss of insurance	8%	○	●	◐	◐	*	◐	●	◐	◐	◐	◐	◐	◐
No transportation	5%	○	◐	●	◐	*	◐	●	○	○	●	○	○	●
Nervous or scared to go	4%	○	●	●	◐	*	◐	●	○	◐	◐	◐	◐	◐
Don't like my provider	3%	◐	◐	◐	◐	*	◐	◐	◐	◐	◐	◐	○	●

\*NA - Results were suppressed due to small numbers, there were fewer than 50 participants in the group. Note: only those who needed services were included in this table (total n=1,189).

\*\* The definition of "Working well" includes having insurance, so results are not presented for this group.





## Lack of Money for Medicine

Respondents reported how often they did not have enough money to pay for essentials such as medicine in the past year:

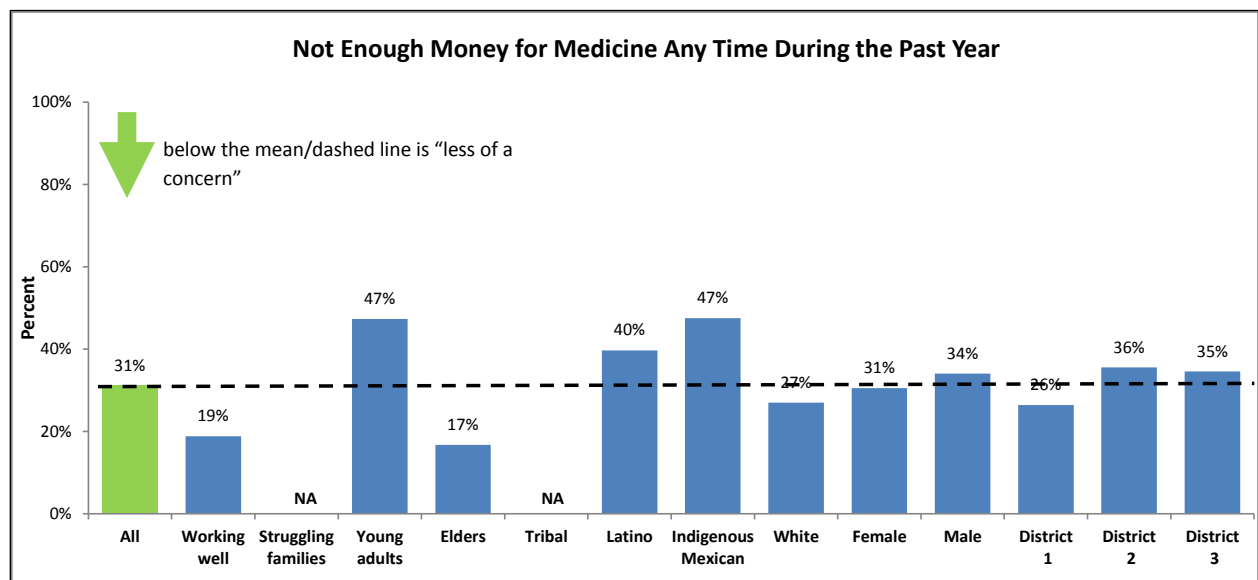
- 12% said “less than a month”
- 8% said “a couple of months”
- 5% said “half of the year”
- 5% said “the whole year”

Our community groups reported different levels of not having enough money to pay for medicine at any time during the past year.

	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
Not enough money for medicine any time during the year	31%	○	**	●	○	*	◐	●	○	◐	◐	○	◐	●

\*NA - Results were suppressed due to small numbers, there were fewer than 50 participants in the group.

NOTE: participants who said “I don’t know” were excluded from this analysis (after exclusion, total n=1,347).



## Medical Care - Top Challenges & Desired Changes to Improve Wellness

When asked to identify the top three changes they would make to improve health and well-being in Skagit County:

- About 20% selected “better access to affordable health care” overall.
- Among our community groups, Elders, Indigenous Mexicans, Males and District 2 selected “better access to affordable health care” as one of the most common three changes they would make.

When asked to identify the five biggest day-to-day challenges that they or their families face:

- About 20% selected “health problems.”
- About 10% selected “health care access.”

The survey included a question about the biggest challenges for parent/caregivers of young children (ages 0 to 5).

- Among parents with school age children, about 16% selected “lack of information about child health/development.”
- About 13% selected “lack of medical, mental health or dental providers for their children” within their biggest challenges.

The survey included a question about the biggest challenges for high school age children.

- Among parents with school age children, about 31% selected “unhealthy or unstable home life.”
- About 27% selected “maintaining physical health” within their biggest challenges.

The survey also included a question about the biggest challenges for seniors.

- Among Elders (those 60 years and older), about 52% selected “cost of needed assistance/care.”
- About 50% selected “managing health problems,” and about 31% selected “getting good health care” within their biggest challenges.

To see how these challenges and changes rank among other topics, see page 30.

# Dental Care

## Barriers to Dental Care Access

Among those who needed dental services, the following reasons might prevent respondents from seeking those services (participants could choose more than one reason).

Some of our community groups reported different reasons that might prevent them from seeing a dentist.

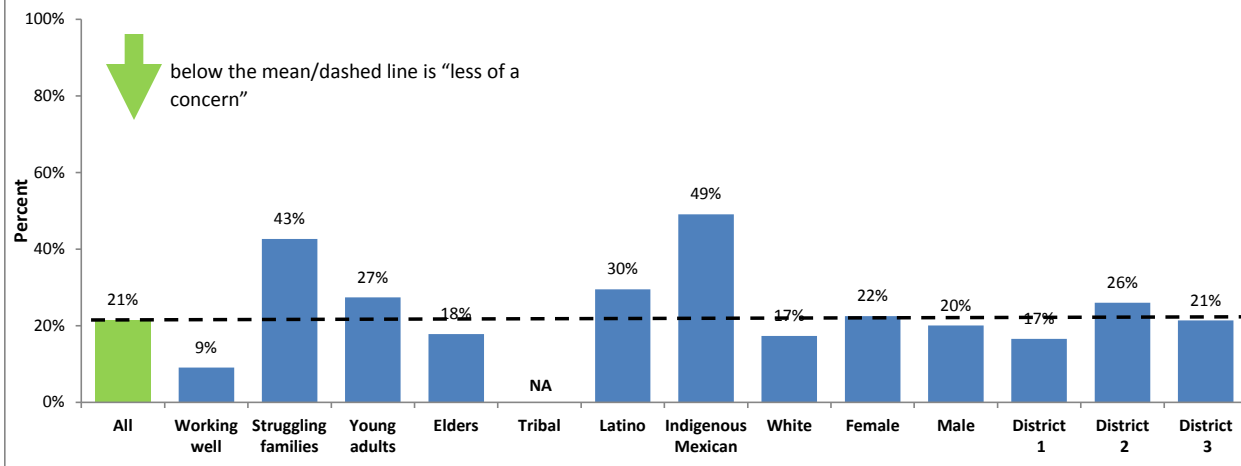
	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
○ = less of a concern vs. comparison group														
◐ = similar														
● = more of a concern vs. comparison group														
Too expensive	21%	◐	●	●	◐	*	◐	●	◐	◐	◐	○	●	◐
No insurance	14%	◐	●	◐	◐	*	◐	●	◐	◐	◐	○	●	◐
Can't afford copays or deductibles	12%	◐	●	◐	◐	*	●	●	◐	◐	◐	○	●	●
Too busy	8%	◐	◐	●	◐	*	◐	●	◐	◐	◐	○	●	◐
Don't have a provider	7%	◐	●	●	◐	*	◐	●	◐	◐	◐	○	●	●
Change or loss of insurance	7%	◐	●	●	◐	*	◐	●	◐	◐	◐	○	◐	◐
Nervous or scared to go	6%	◐	◐	●	◐	*	◐	◐	◐	●	○	◐	◐	◐
No transportation	3%	◐	◐	●	◐	*	◐	●	◐	◐	◐	○	●	●
Don't like my provider	2%	◐	◐	●	◐	*	◐	◐	◐	◐	◐	◐	◐	◐

\*NA – Results were suppressed due to small numbers, there were fewer than 50 participants in the group.

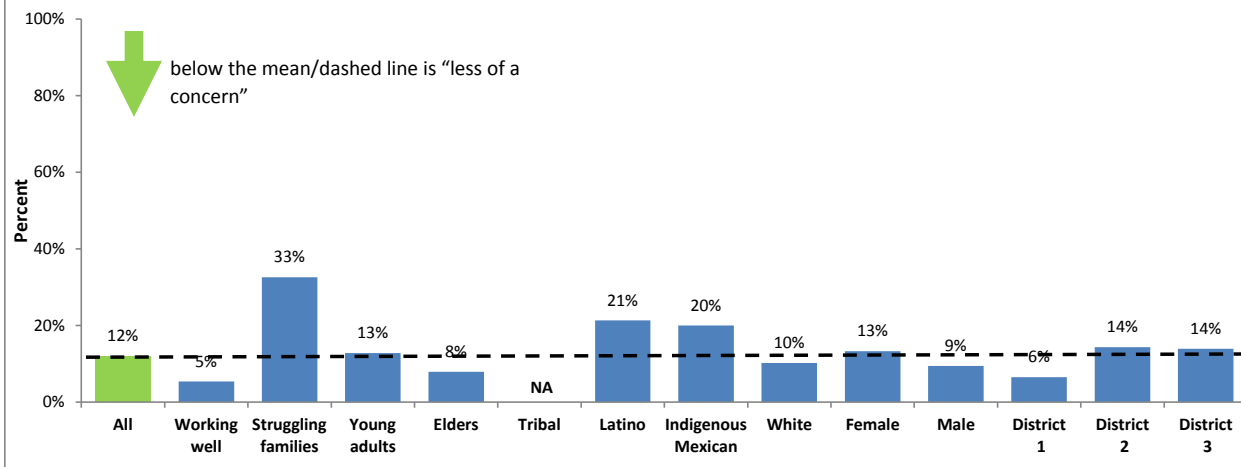
NOTE: results include only those who needed services (after exclusions, total n=1,266).



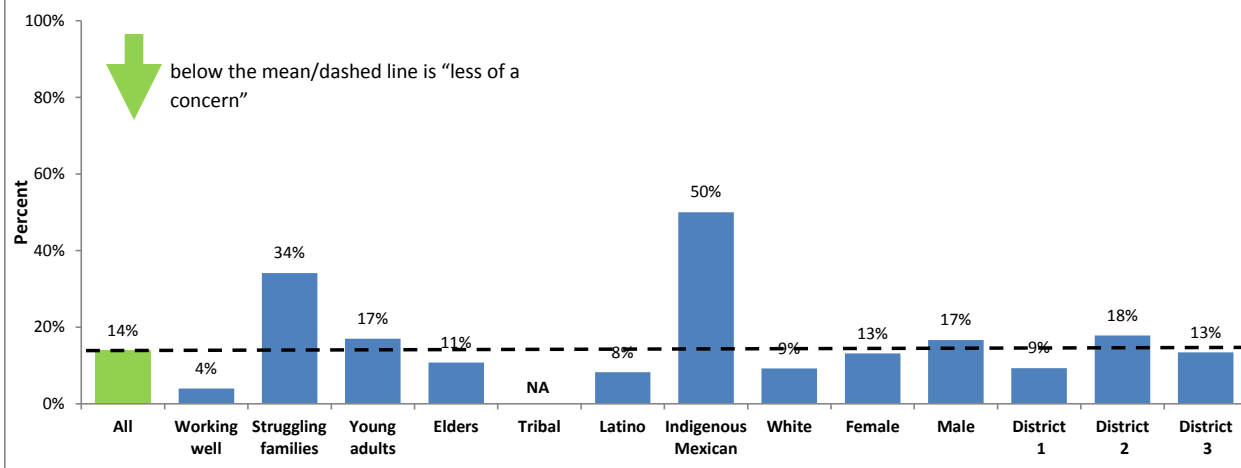
### Too Expensive - May Prevent Seeing a Dentist, Among Those That Need It



### Can't Afford Copays or Deductibles - May Prevent Seeing a Dentist, Among Those That Need It



### No Insurance - May Prevent Seeing a Dentist, Among Those That Need It



## Dental Care - Top Challenges & Desired Changes to Improve Wellness

When asked to identify the top three changes they would make to improve health and well-being in Skagit County:

- About 14% selected “better access to affordable dental care” among their top recommended changes.

To see how this desired change ranks among other topics, see page 30.

# Mental Health

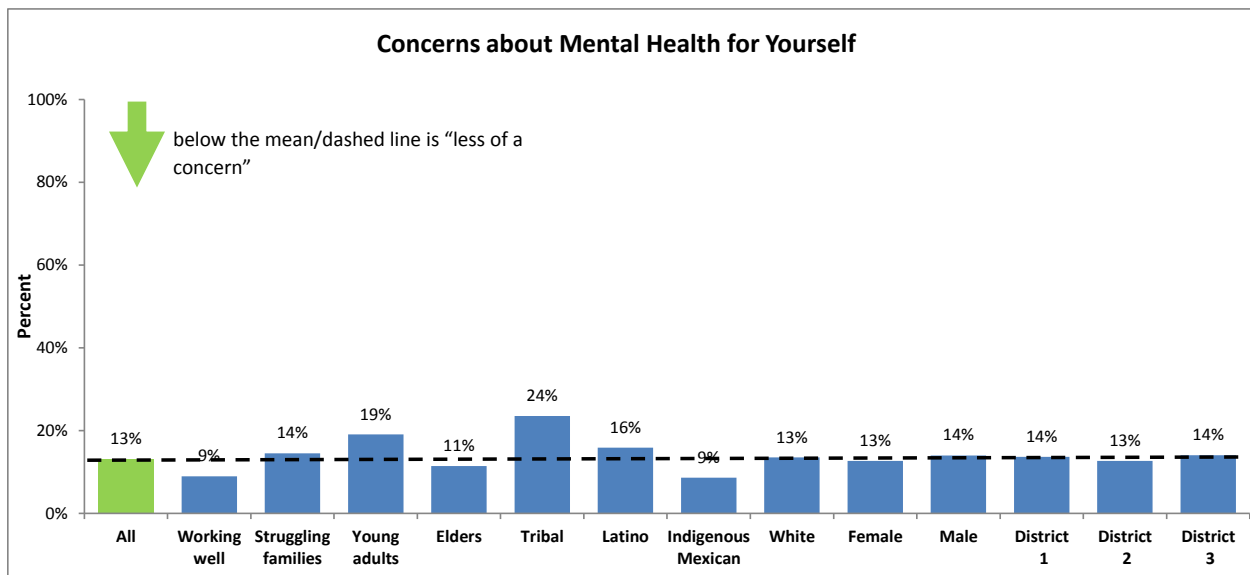
## Personal Concerns about Mental Health

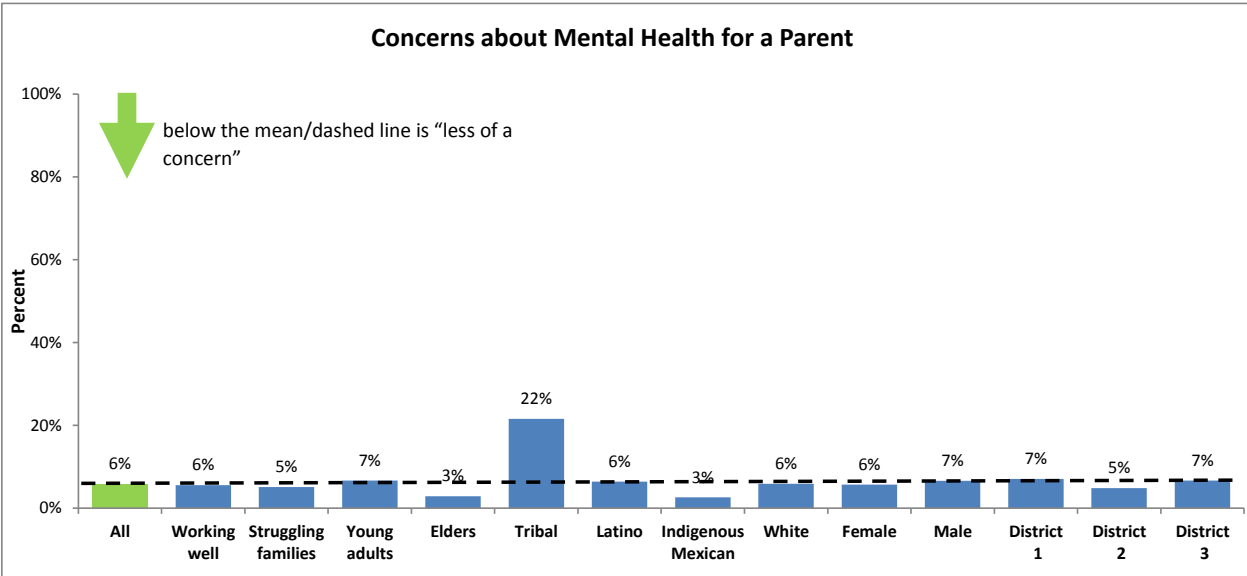
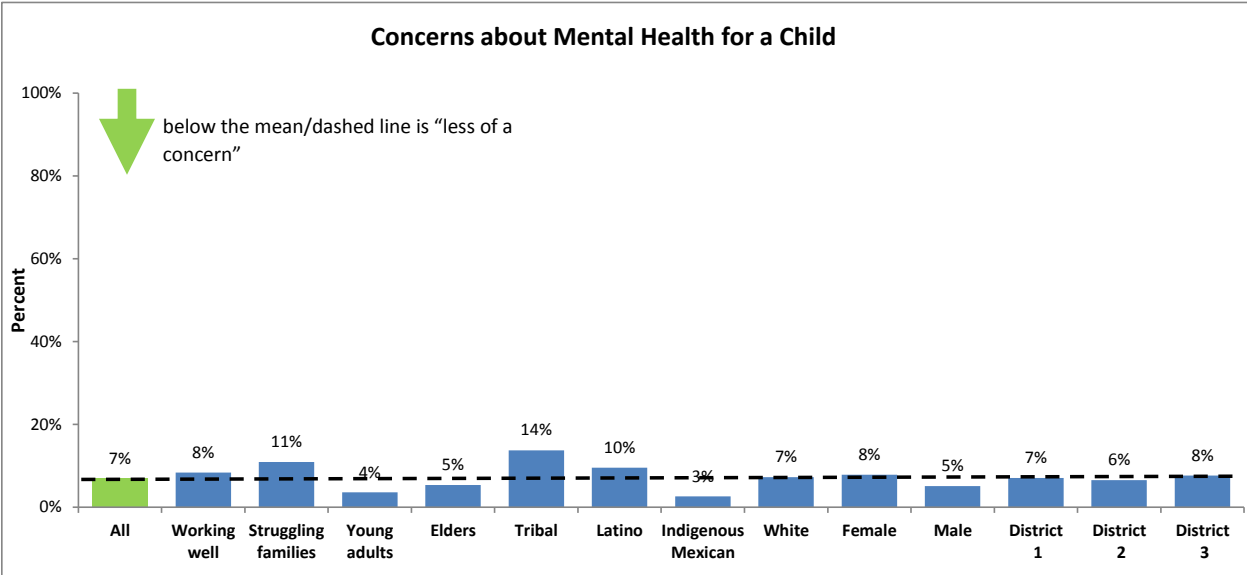
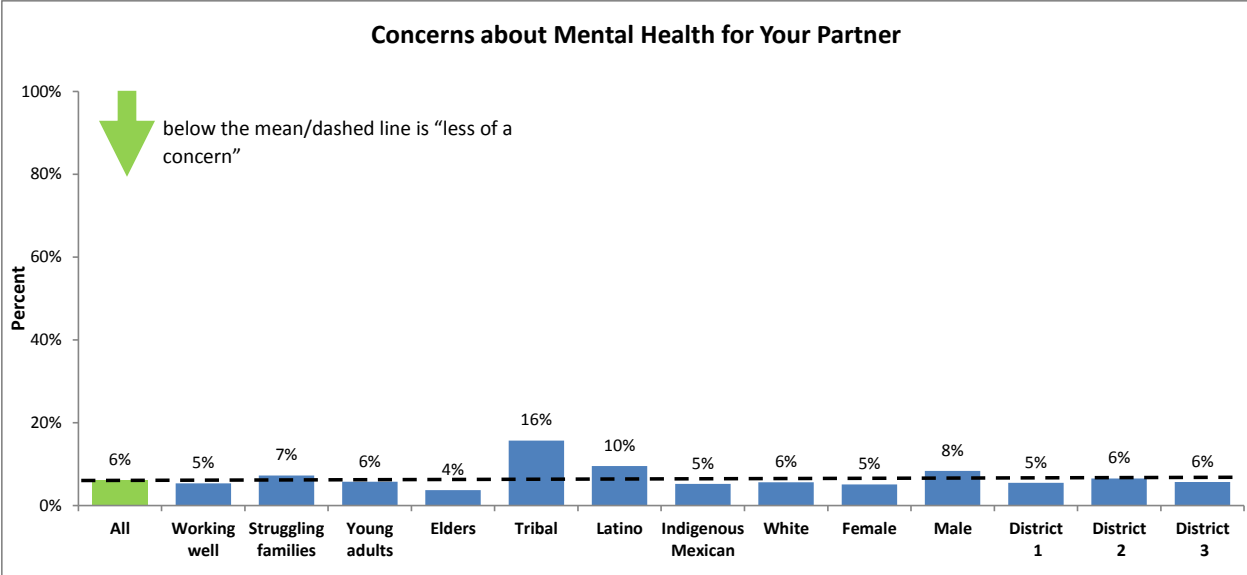
In addition to the asking if respondents were experiencing mental health struggles (see the chart on page 7), the survey also asked if they were concerned about the mental health of the following groups of people in the past year.

Some of our community groups reported different levels of concern about mental health for the following in the past year.

	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
○ = less of a concern vs. comparison group														
◐ = similar														
● = more of a concern vs. comparison group														
Yourself	13%	○	◐	●	◐	●	◐	◐	◐	◐	◐	◐	◐	◐
Your Partner	6%	◐	◐	○	◐	◐	◐	○	◐	◐	◐	◐	◐	◐
A Child	7%	◐	◐	◐	◐	●	◐	◐	○	○	●	◐	◐	◐
A Parent	6%	◐	◐	◐	◐	●	◐	◐	◐	◐	◐	◐	◐	◐

*NOTE: This is among all respondents, not all may have a partner, a child or a parent.*







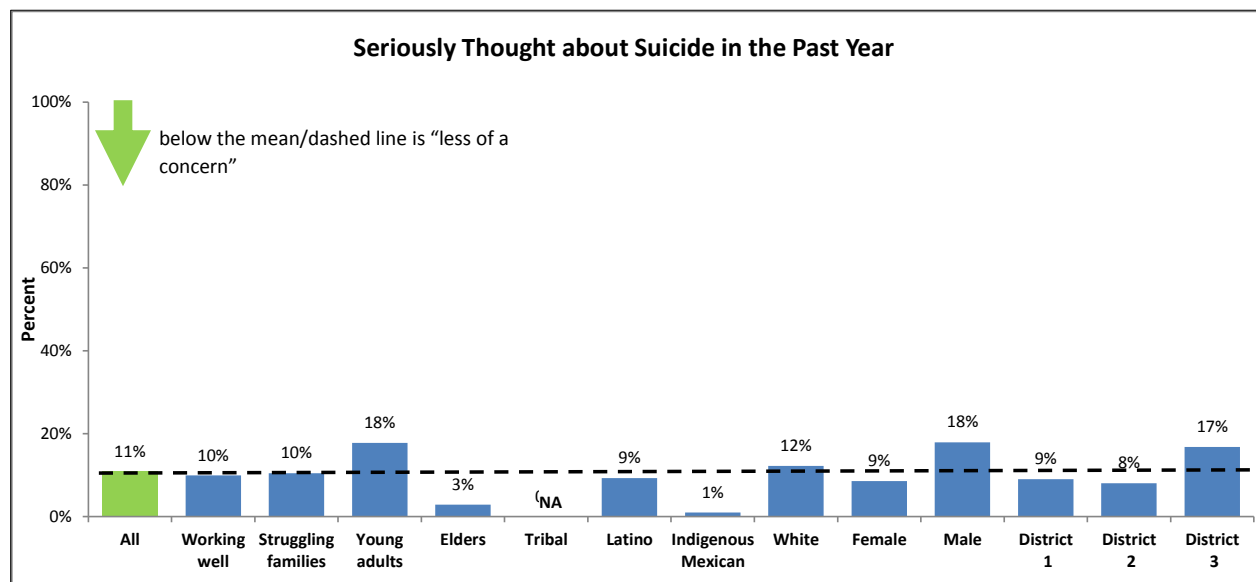
## Suicidal Thoughts

About 11% of respondents reported that they seriously thought about killing themselves in the past year.

Some of our community groups reported different levels of considering suicide in the past year.

	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
Seriously considered suicide in the past year	11%	◐	◐	●	○	*	◐	○	●	○	●	○	○	●

\*NA – Results were suppressed due to small numbers, there were fewer than 50 people in this group who answered the question.



## Barriers to Mental Health Care Access

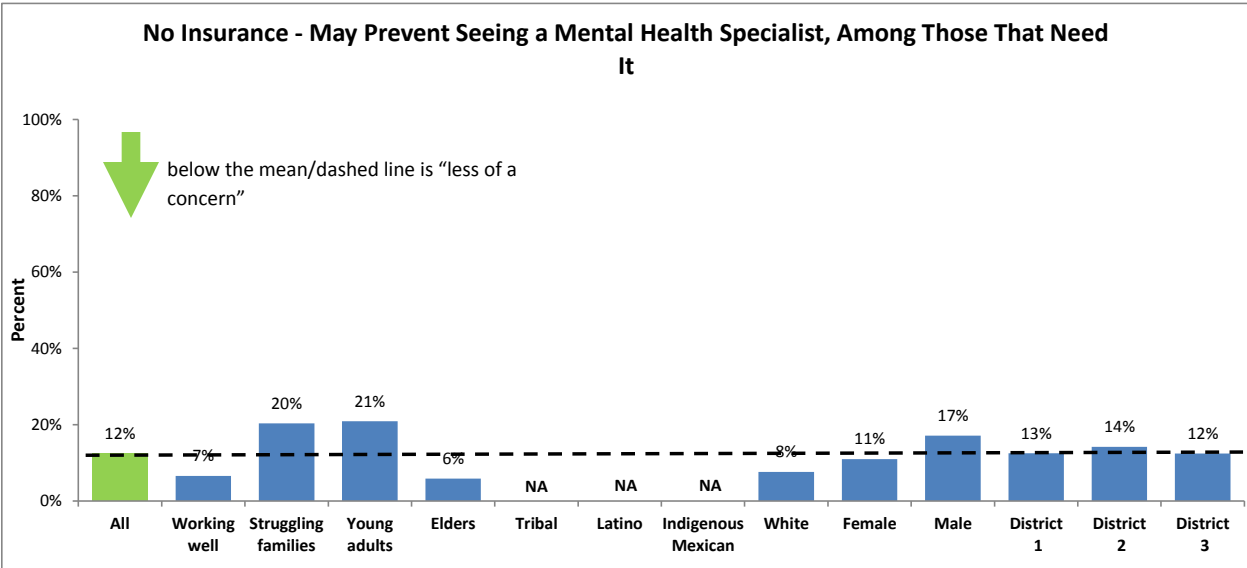
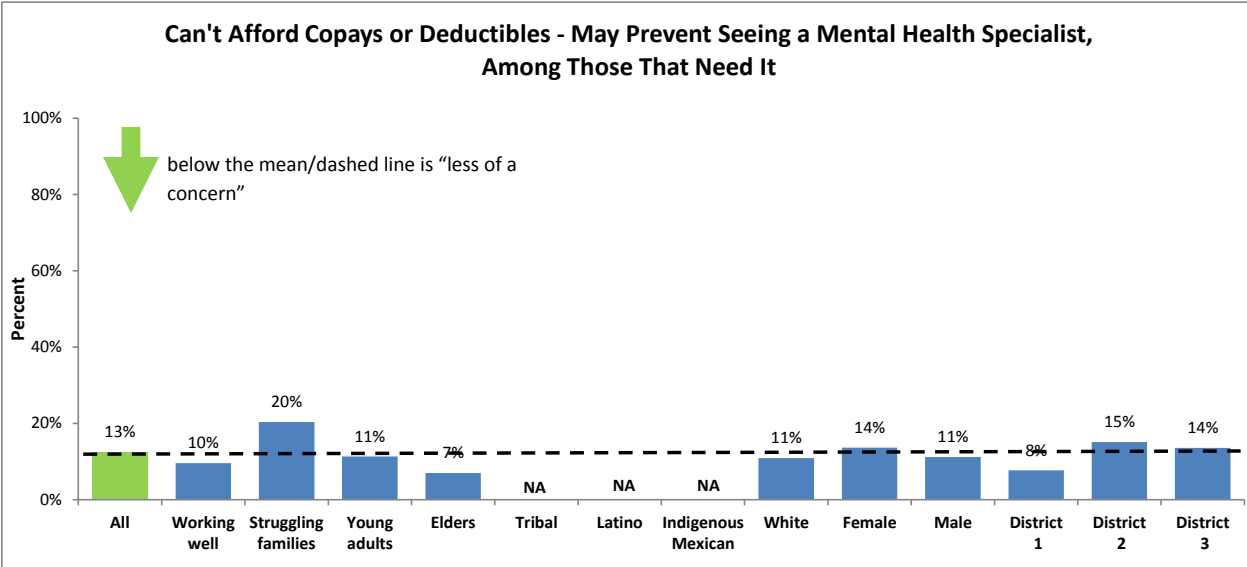
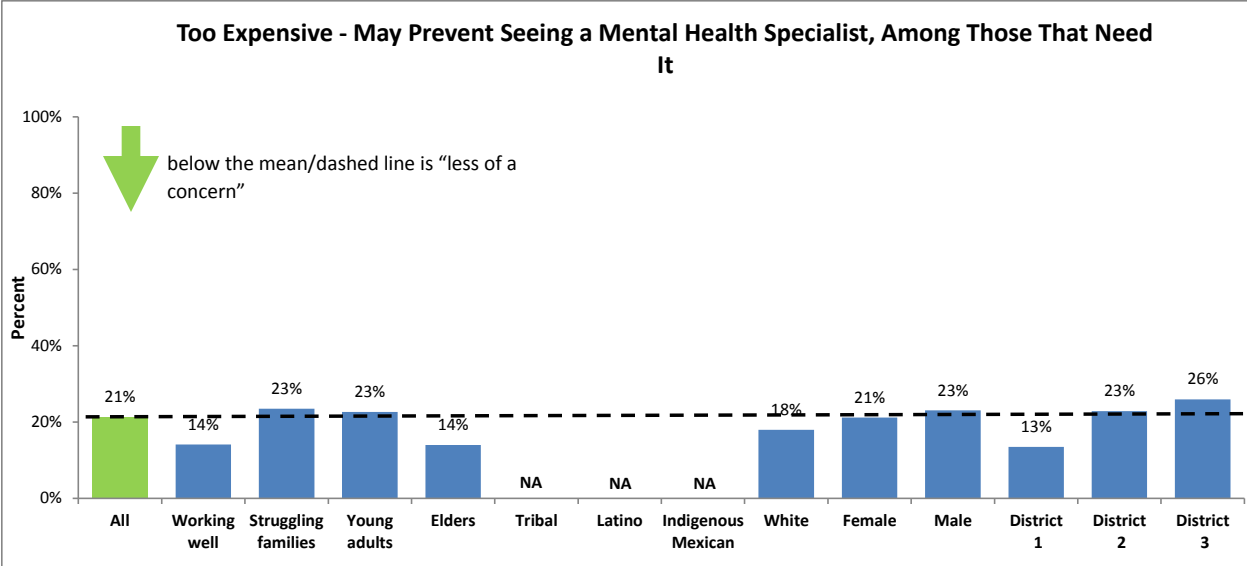
Among those who needed mental health services, the following reasons might prevent respondents from seeking those services (participants could choose more than one reason).

Some of our community groups reported different reasons that might prevent them from seeing a mental health specialist.

		All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
	○ = less of a concern vs. comparison group														
	◐ = similar														
	● = more of a concern vs. comparison group														
Too expensive	21%	◐	◐	◐	◐	*	*	*	*	◐	◐	◐	○	●	●
No insurance	12%	◐	◐	●	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Can't afford copays or deductibles	13%	◐	◐	◐	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Too busy	11%	◐	◐	◐	◐	*	*	*	*	◐	○	●	◐	◐	◐
Don't have a provider	11%	◐	◐	◐	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Change or loss of insurance	8%	◐	◐	◐	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Nervous or scared to go	7%	◐	◐	●	◐	*	*	*	*	◐	◐	◐	○	●	●
No transportation	7%	◐	◐	●	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Don't like my provider	4%	◐	◐	◐	◐	*	*	*	*	◐	◐	◐	◐	◐	◐

\*NA – results were suppressed due to small numbers, there were fewer than 50 participants in the group.

NOTE: results include only those participants who needed services (total n=567).



## Mental Health - Top Challenges & Desired Changes to Improve Wellness

When asked to identify the top three changes they would make to improve health and well-being in Skagit County:

- About 16% selected “better access to affordable mental health care” overall, and
- About 8% selected “more help with stress and/or emotional trauma” overall.
- Among our community groups, the Working well and District 1 selected “better access to affordable mental health care” as one of the most common three changes they would make.

When asked to identify the five biggest day-to-day challenges that they or their families face:

- About 49% selected “stress” and
- About 10% selected “mental health” among their biggest challenges.
- All of our community groups, except Indigenous Mexicans, selected “stress” as one of the most common three challenges that they face day-to-day.

The survey included a question about the biggest challenges for parent/caregivers of young children (ages 0 to 5).

- Among parents with school age children, about 13% selected “lack of medical, mental health or dental providers for their children” in their biggest challenges.

The survey included a question about the biggest challenges for high school age children.

- Among parents with school age children, about 33% selected “maintaining emotional health.”
- About 28% selected “pressure to succeed,” and about 20% selected “suicidal thoughts or attempts” within their biggest challenges.

The survey also included a question about the biggest challenges for seniors.

- Among Elders (those 60 years and older), about 49% selected “social isolation/being lonely” in their biggest challenges.

To see how these challenges and desired changes rank among other topics, see page 30.

# Substance Abuse

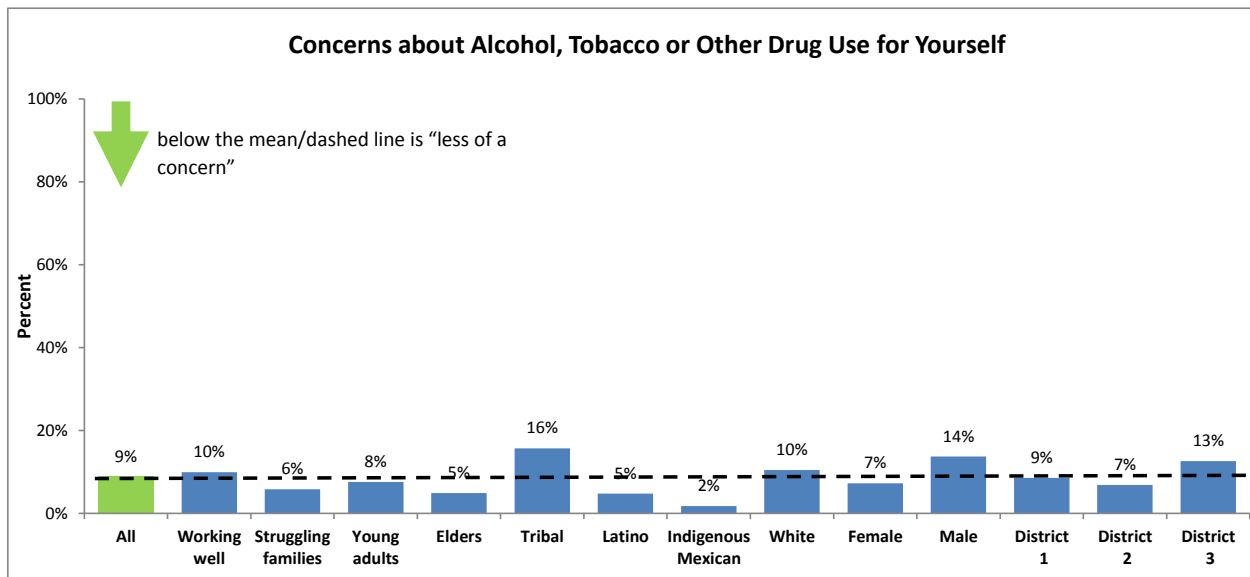
## Personal Concerns about Substance Use

In addition to the asking if respondents were currently using substances (see the chart on page 7), the survey also asked if they were concerned about the use of alcohol, tobacco or other drugs among the following groups of people in the past year.

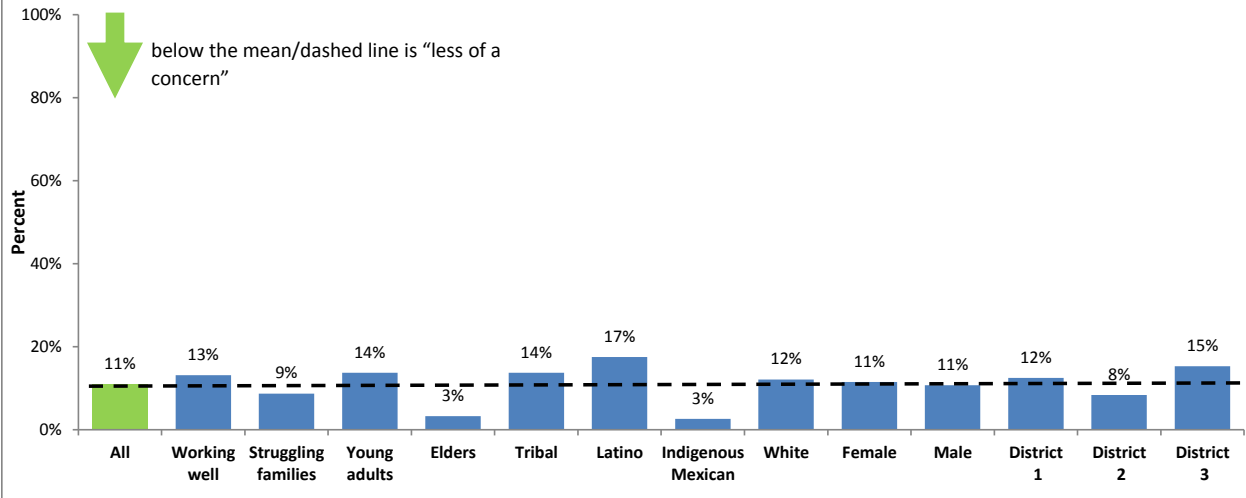
Some of our community groups reported different levels of concern about substance use for the following in the past year.

	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
○ = less of a concern vs. comparison group														
◐ = similar														
● = more of a concern vs. comparison group														
Yourself	9%	◐	◐	◐	○	◐	◐	○	●	○	●	◐	○	●
Your Partner	11%	◐	○	◐	◐	◐	◐	○	◐	○	●	●	○	●
A Child	8%	◐	◐	◐	○	◐	◐	○	◐	◐	◐	◐	○	●
A Parent	6%	◐	◐	●	○	◐	◐	○	◐	◐	◐	●	○	●

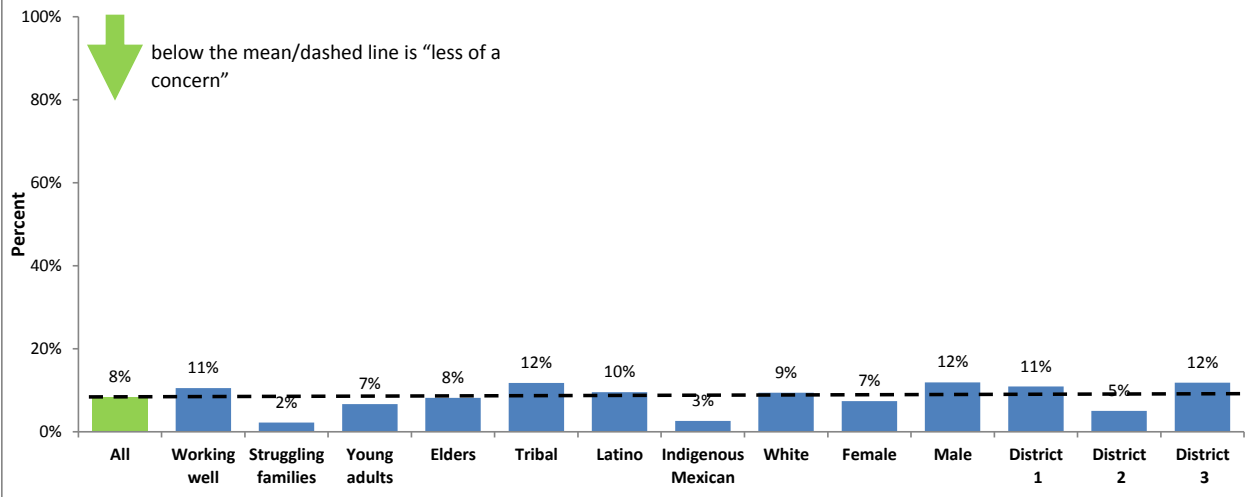
NOTE: This is among all respondents, not all have a partner, a child or a parent.



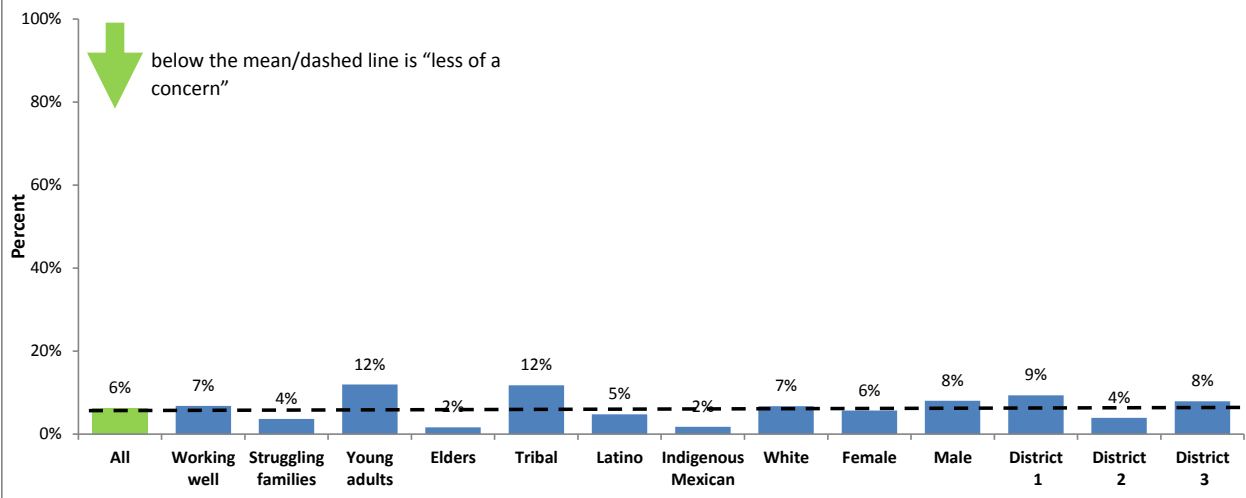
### Concerns about Alcohol, Tobacco or Other Drug Use for Your Partner



### Concerns about Alcohol, Tobacco or Other Drug Use for a Child



### Concerns about Alcohol, Tobacco or Other Drug Use for a Parent



## Barriers to Substance Abuse Service Access

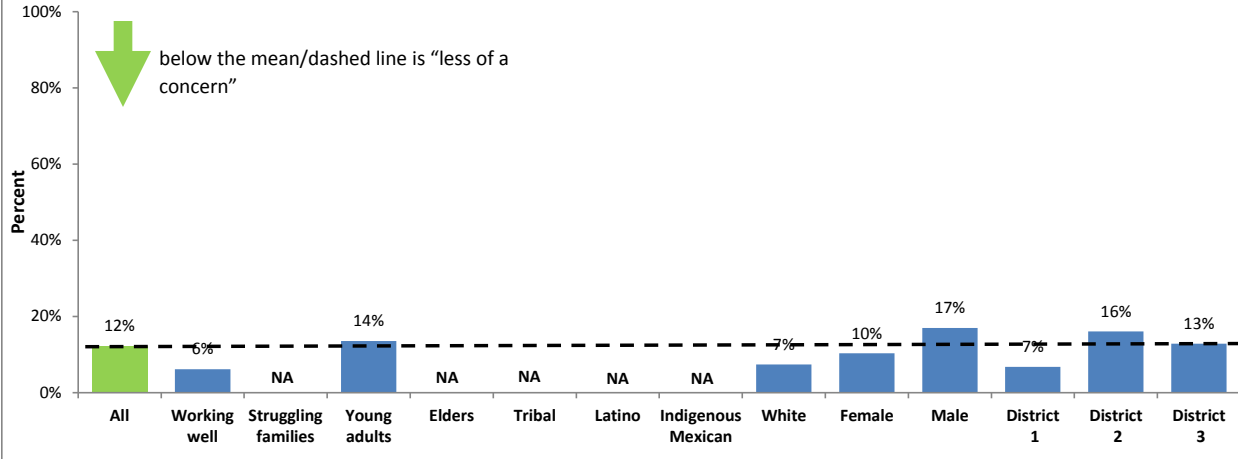
Among those who needed substance use services, the following reasons might prevent respondents from seeking those services (344 respondents).

Some of our community groups reported different reasons that might prevent them from seeing a substance abuse specialist, although the relatively small number of people in this analysis does not allow for finding many significant differences.

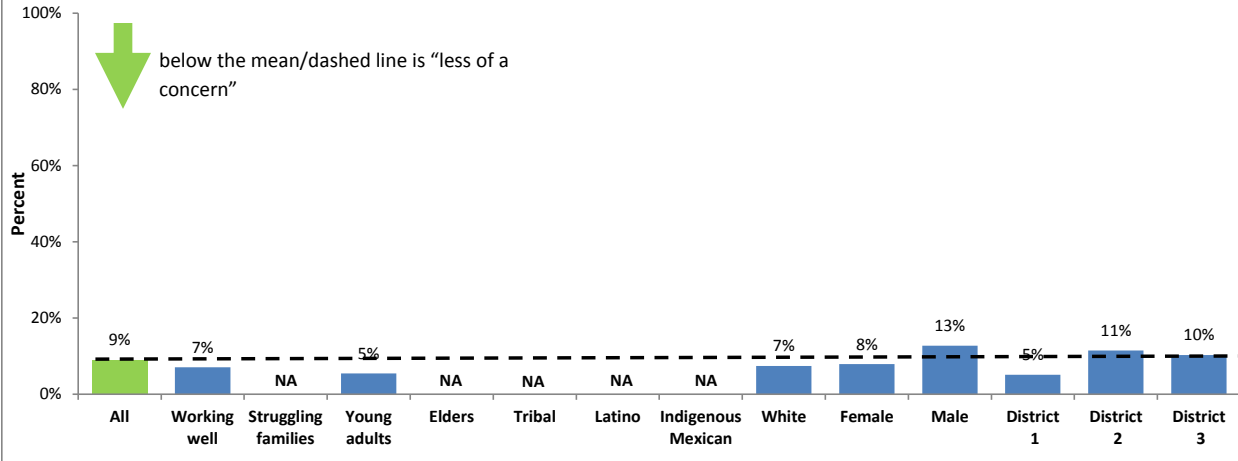
	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
○ = less of a concern vs. comparison group ◐ = similar ● = more of a concern vs. comparison group														
Too expensive	12%	◐	*	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
No insurance	12%	◐	*	◐	*	*	*	*	◐	○	●	◐	◐	◐
Can't afford copays or deductibles	9%	◐	*	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Too busy	5%	◐	*	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Don't have a provider	5%	◐	*	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Change or loss of insurance	6%	◐	*	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
Nervous or scared to go	7%	◐	*	◐	*	*	*	*	◐	◐	◐	◐	◐	◐
No transportation	3%	◐	*	◐	*	*	*	*	◐	◐	◐	○	○	●
Don't like my provider	2%	◐	*	◐	*	*	*	*	◐	◐	◐	◐	◐	◐

\*NA – results were suppressed due to small numbers, there were fewer than 50 participants in the group when only looking at those who needed services (total n=344).

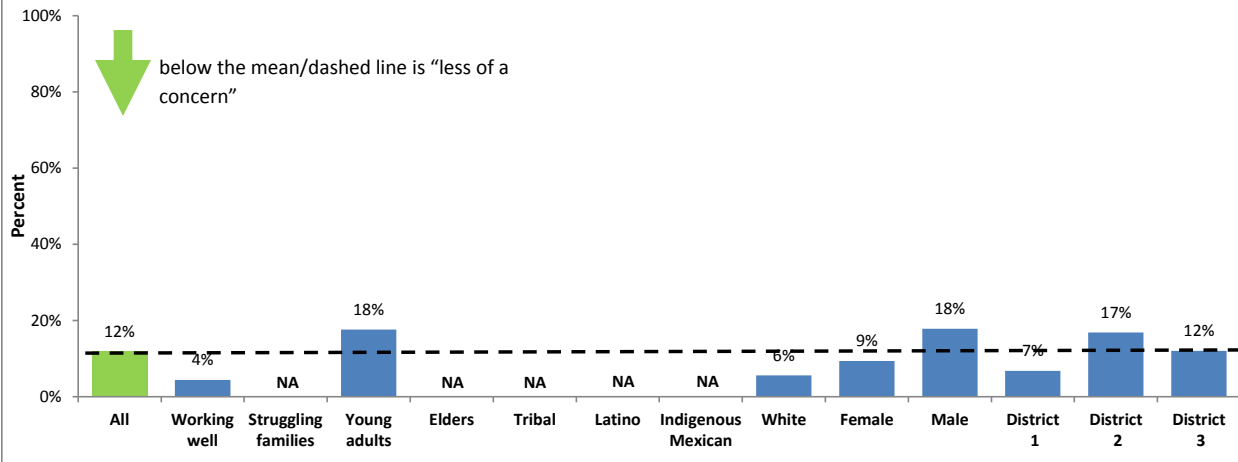
**Too Expensive - May Prevent Seeing a Substance Abuse Specialist, Among Those That Need It**



**Can't Afford Copays or Deductibles - May Prevent Seeing a Substance Abuse Specialist, Among Those That Need It**



**No Insurance - May Prevent Seeing a Substance Abuse Specialist, Among Those That Need It**





## Substance Use - Top Challenges & Desired Changes to Improve Wellness

When asked to identify the top three changes they would make to improve health and well-being in Skagit County:

- About 7% selected “better access to affordable substance abuse treatment.”
- None selected “less alcohol and/or substance use” as among their top three changes.

When asked to identify the five biggest day-to-day challenges that they or their families face:

- About 4% selected “alcohol or drug use” among their biggest challenges.

The survey included a question about the biggest challenges for parent/caregivers of young children (ages 0 to 5).

- Among parents with school age children, about 13% selected “lack of medical, mental health or dental providers for their children” within their biggest challenges.

The survey also included a question about the biggest challenges for high school age children.

- Among parents with school age children, about 49% selected “substance use” in their biggest challenges.

To see how this desired challenges and changes rank among other topics, see page 30.

# Employer Support

## Paid Sick Leave and the Ability to Stay Home When Sick

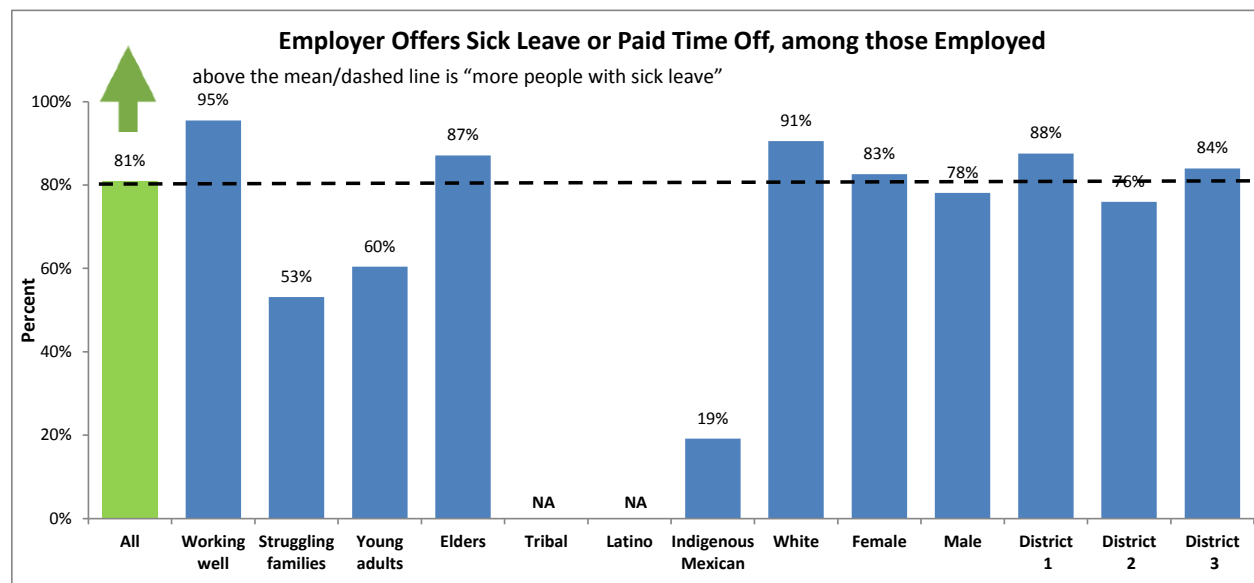
Among those employed for wages, 81% of respondents get sick leave or paid time off.

Some of our community groups reported different levels of having sick leave or paid time off.

	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
○ = more with sick leave vs. comparison group														
◐ = similar														
● = less with sick leave vs. comparison group														
Have paid sick leave or time off	81%	○	●	●	◐	*	*	●	○	◐	◐	○	●	○

\*NA – results were suppressed due to small numbers, there were fewer than 50 participants in the group answering this question.

NOTE: this question was only asked among those who were employed for wages (total n=912).



Among those who can't stay home when they need to, the most common reasons were that there is "no one to cover their position if they are gone" (27%); they "can't afford to stay home" (25%); and they "believe in going to work unless I am told by my doctor or employer to stay home" (23%).

# Appendix A: Overall Ranking of Top Desired Changes and Challenges

Respondents were asked to select the top three things they would change to improve health and well-being in Skagit County and were asked four questions about the top challenges that specific groups face. Desired changes and challenges are presented in most sections of this report, but are also presented here to show each issue ranks among the other changes and challenges.

Among our community groups, a check is used designate the most common changes or challenges that were selected by that group.

## Top 3 Changes to Improve Health and Well-being in Skagit County

Topic	✓ = selected as group's 3 most common changes														Included in the Following Report Sections
	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3	
More affordable housing	28%		✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	Social & Economic, Physical Environment
More/better jobs	23%	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓	✓	Social & Economic
Better access to affordable health care	20%		✓		✓			✓			✓		✓		Health Care Access & Quality
Less poverty	18%							✓		✓				✓	Social & Economic
More parks and/or bike paths	17%	✓							✓						Physical Environment, Health Behaviors
Better access to affordable mental health care	16%	✓										✓			Health Care Access & Quality, Health Behaviors
More opportunities for physical activity	16%						✓								Physical Environment, Health Behaviors
More healthy food	15%			✓			✓								Physical Environment, Health Behaviors

Topic	✓ = selected as group's 3 most common changes													Included in the Following Report Sections	
	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2		District 3
Safe communities/less violence	14%					✓									Social & Economic, Physical Environment, Health Behaviors
Better access to affordable dental care	14%														Health Care Access & Quality
Higher level of education among all residents	12%														Social & Economic
Better access to affordable child care	10%														
Stronger sense of community	10%														Social & Economic
More kids graduating from high school	10%						✓								Social & Economic
More public transportation options	9%														
More help with stress and/or emotional trauma	8%														Health Care Access & Quality, Health Behaviors
Better access to affordable substance abuse treatment	7%														Health Care Access & Quality, Health Behaviors
Parenting help for parents of young children	7%														
Less discrimination	7%														
Fewer unplanned pregnancies	7%														
Healthier environment (air, water)	6%														Physical Environment
Child/elder abuse or neglect	4%														
Less alcohol and/or substance use	0%														Health Care Access & Quality, Health Behaviors

## 5 Biggest Personal Day-to-Day Challenges

Topic	✓ = selected as group's 5 most common challenges													Included in the Following Report Sections	
	All	Working well	Struggling families	Young adults	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2		District 3
Stress	49%	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	Health Care Access & Quality
Time	44%	✓		✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	
Income	42%	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	Social & Economic
Physical activity	36%	✓			✓	✓	✓			✓	✓	✓	✓	✓	Physical Environment, Health Behaviors
Healthy food	22%	✓					✓				✓				Physical Environment, Health Behaviors
Employment	22%		✓	✓		✓		✓		✓			✓		Social & Economic
Health problems	20%				✓							✓		✓	Health Care Access & Quality
Housing	16%		✓	✓				✓							Social & Economic, Physical Environment
Child care	14%		✓					✓							
Education	13%														Social & Economic
Meeting basic needs	12%														Social & Economic
Health care access	10%							✓							Health Care Access & Quality
Social support	10%														Social & Economic
Mental health	10%														Health Care Access & Quality, Health Behaviors
Elder care	9%														
Transportation	9%														
Safety	8%														Social & Economic, Physical Environment, Health Behaviors
Single parenting	6%														
Pollution	6%														Physical Environment
Legal problems	4%														
Alcohol or drug use	4%														Health Care Access & Quality, Health Behaviors

## Biggest Challenges for Parents with Young Children

Topic	✓ = selected as group's 5 most common challenges			Included in the Following Report Sections
	All	With School Age Children	Without School Age Children	
Cost of child care	49%	✓	✓	Social & Economic
Single parenting	30%	✓	✓	
Quality child care	29%	✓	✓	
Child care options	27%	✓	✓	
Lack of awareness of available community resources	24%	✓	✓	
Lack of education/information about parenting	21%			
Lack of free, full-day kindergarten	19%			Social & Economic
Lack of information about child health/development	18%			
Lack of medical, mental health or dental providers for their children	17%			Health Care Access & Quality
Transportation	16%			Physical Environment
Lack of community support	15%			Social & Economic
Lack of opportunities to meet other parents	13%			
Lack of family activities	13%			
Lack of information about kindergarten preparation	10%			

## Biggest Challenges for High School Age Youth

Topic	✓ = selected as group's 5 most common challenges			Included in the Following Report Sections
	All	With School Age Children	Without School Age Children	
Bullying	46%	✓	✓	Social & Economic
Substance use	49%	✓	✓	Health Care Access & Quality, Health Behaviors
Abuse or misuse of technology (texting, internet, games, etc.)	40%	✓	✓	Health Behaviors
Unhealthy or unstable home life	40%	✓	✓	Health Care Access & Quality
Lack of involved, supportive, positive role models	33%		✓	
Maintaining emotional health	32%	✓		Health Care Access & Quality, Health Behaviors
Pressure to succeed	26%			Health Care Access & Quality, Health Behaviors
Maintaining physical health	25%			Physical Environment, Health Care Access & Quality, Health Behaviors
Lack of afterschool or extracurricular activities	24%			Physical Environment, Health Behaviors
Suicidal thoughts or attempts	20%			Health Care Access & Quality, Health Behaviors
Staying in school	20%			Social & Economic
Lack of quality education	17%			Social & Economic
Lack of transportation	10%			

## Biggest Challenges for Seniors

Topic	✓ = selected as group's 5 most common challenges			Included in the Following Report Sections
	All	Elders - 60 or Older	Under Age 60	
Living on a fixed income	49%	✓	✓	Social & Economic
Social isolation/being lonely	41%	✓	✓	Social & Economic, Health Care Access & Quality, Health Behaviors
Managing health problems	38%	✓	✓	Health Care Access & Quality
Cost of needed assistance/care	38%	✓	✓	Social & Economic
Support to age in place (live independently)	30%	✓	✓	Social & Economic, Physical Environment
Transportation	28%			
Getting good health care	25%			Health Care Access & Quality
Housing	22%			Social & Economic, Physical Environment
Quality senior care	21%			
Food	19%			Physical Environment, Health Behaviors
Lack of recreational or social activities	15%			Physical Environment, Health Behaviors
Safety outside the home	14%			Social & Economic, Physical Environment, Health Behaviors



# Appendix B: Participant Summary

Characteristics of the 1,513 total survey participants are summarized here. Readers might use this information to consider how the responses reported in the survey could be biased by the characteristics of the respondents. For example, more women than men took the survey (73% vs. 27%). This was true for all subgroups as well (e.g., 82% of participants in the “struggling families” group were women vs. 18% men), so the impact of having more female respondents should be somewhat consistent in all subgroups as well as overall.

Survey Respondents by Community Groups  % (number)	All	% (number) within each row group who belong to other groups														
		Working well	Struggling families	Young adults	Middle aged	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3	
All	100% (1513)	43% (523)	11% (143)	18% (233)	62% (808)	20% (253)	4% (52)	6% (69)	10% (119)	79% (958)	73% (957)	27% (347)	21% (265)	45% (560)	34% (417)	
<b>Income and Employment<sup>2</sup></b>																
Working well	43% (523)	-	-	7% (39)	74% (386)	19% (97)	3% (14)	5% (24)	0% (2)	91% (469)	70% (368)	30% (155)	25% (124)	41% (203)	33% (163)	
Struggling families	11% (143)	-	-	24% (35)	74% (106)	1% (2)	6% (7)	11% (14)	24% (29)	56% (69)	82% (115)	18% (26)	7% (10)	48% (66)	45% (62)	
<b>Age</b>																
Young adults (18-29)	18% (233)	18% (39)	15% (35)	-	-	-	4% (8)	9% (18)	25% (51)	63% (129)	77% (176)	23% (53)	12% (27)	54% (121)	34% (76)	
Middle aged (30-59)	62% (808)	50% (386)	14% (106)	-	-	-	4% (31)	6% (47)	8% (58)	80% (608)	73% (585)	27% (221)	20% (149)	45% (346)	35% (268)	
Elders (60+)	20% (253)	42% (97)	1% (2)	-	-	-	5% (12)	2% (4)	2% (6)	88% (214)	73% (185)	27% (68)	35% (85)	36% (87)	30% (72)	
<b>Race/Ethnicity</b>																

<sup>2</sup> See “methods” section for definitions of these subgroups

Survey Respondents by Community Groups  % (number)	All	% (number) within each row group who belong to other groups													
		Working well	Struggling families	Young adults	Middle aged	Elders	Tribal	Latino	Indigenous Mexican	White	Female	Male	District 1	District 2	District 3
Tribal	4% (52)	28% (14)	14% (7)	16% (8)	61% (31)	24% (12)	-	-	-	-	63% (32)	37% (19)	37% (18)	31% (15)	33% (16)
Latino	6% (69)	38% (24)	21% (14)	26% (18)	68% (47)	6% (4)	-	-	-	-	75% (52)	25% (17)	12% (8)	64% (43)	24% (16)
Indigenous Mexican	10% (119)	2% (2)	25% (29)	44% (51)	50% (58)	5% (6)	-	-	-	-	67% (78)	33% (39)	4% (5)	57% (67)	39% (46)
White	79% (958)	51% (469)	7% (69)	14% (129)	64% (608)	23% (214)	-	-	-	-	75% (715)	25% (241)	25% (229)	40% (361)	35% (314)
<b>Gender</b>															
Female	73% (957)	41% (368)	13% (115)	19% (176)	62% (585)	20% (185)	4% (32)	6% (52)	9% (78)	80% (715)	-	-	21% (190)	43% (397)	36% (328)
Male	27% (347)	48% (155)	8% (26)	16% (53)	65% (221)	20% (68)	6% (19)	5% (17)	12% (39)	74% (241)	-	-	23% (75)	50% (160)	27% (87)
<b>Commissioner District</b>															
District 1	21% (265)	49% (124)	4% (10)	10% (27)	57% (149)	33% (85)	7% (18)	3% (8)	2% (5)	88% (229)	72% (190)	28% (75)	-	-	-
District 2	45% (560)	39% (203)	12% (66)	22% (121)	62% (346)	16% (87)	3% (15)	9% (43)	14% (67)	73% (361)	71% (397)	29% (160)	-	-	-
District 3	34% (417)	42% (163)	15% (62)	18% (76)	64% (268)	17% (72)	4% (16)	4% (16)	11% (46)	78% (314)	79% (328)	21% (87)	-	-	-
<b>Survey administration</b>															
Online	72% (1,090)	58% (512)	5% (47)	11% (104)	66% (598)	22% (203)	4% (36)	5% (44)	0% (3)	90% (811)	75% (685)	25% (230)	27% (237)	40% (342)	33% (283)
Paper	28% (423)	3% (11)	25% (96)	33% (129)	54% (210)	13% (50)	5% (16)	8% (25)	36% (116)	46% (147)	70% (272)	30% (117)	7% (28)	57% (218)	35% (134)