

Lincoln County Community Needs Assessment Final Report 2014-2015

Conducted by Lincoln County Regional Planning Commission,
Healthy Lincoln County, CEI, and Midcoast Hunger Prevention
Funded by Maine Health Access Foundation

February 2015

Introduction/Background

In summer of 2013, the Maine Health Access Foundation (MeHAF) released a funding announcement to support a limited number of community health assessments in Maine. The primary objective of the grant was to identify 1 (no more than 2) health issues affecting the community. In addition, the community should describe their vision of this issue being successfully addressed. Unlike many other health assessments conducted throughout the state that focused on health indicators and gathering data from stakeholders, this health assessment was to focus on gathering qualitative data and information from populations that are vulnerable to health disparities.

Recognizing this funding as an opportunity for Lincoln County and acknowledging that the issues are multifaceted – including economic, social, and cultural factors, along with health factors – a consortium was established among Lincoln County Regional Planning Commission, CEI, Healthy Lincoln County, and Midcoast Hunger Prevention Program. The consortium's plan was funded. The plan outlined strategies for leveraging existing partnerships to reach populations vulnerable to health disparities for engaging in the assessment process and gathering information on their perspective of health issues affecting the community.

Criteria

Based on input and feedback from partner organizations that serve the Lincoln County community and work with marginalized populations, the follow criteria were identified to guide the selection of the health issue:

- Impact the least empowered in the community
- Focuses on a long term investment, prevention
- Choice comes from within the community
- Can do something about it
- Impacts all of Lincoln County
- Can be measured
- There is energy and resources around the issue
- There is evidence based models that can be used to address the issue
- People understand the issue
- The issue is tangible
- Issue will engage people and bring community together

History of Assessments and Key Findings in Lincoln County

Monitoring the health of the community is an essential public health service. Lincoln County has been the focus of diverse assessments for various reasons- health, economic, infrastructure, political, etc.

Below is a table of assessments conducted in Lincoln County's recent history and its key findings

Assessment	Basic Description	Lincoln County Strengths	Lincoln County Challenges
One Maine	Conducted by Lincoln County Health Care, (MaineHealth) 2011	<ul style="list-style-type: none"> - Strong maternal health outcomes suggesting high quality and accessible maternal care 	<ul style="list-style-type: none"> - High rates of substance abuse. - Data indicating significant mental health issues among population
Lincoln County Community Health Improvement Plan	Conducted by Healthy Lincoln County, (Healthy Maine Partnership—Maine CDC) 2010	Strong sense of place and community – neighbors helping neighbors	<ul style="list-style-type: none"> - Top health issues identified as obesity, substance abuse, and mental health
County Health Rankings	Prepared by University of Wisconsin across nation, 2014	<ul style="list-style-type: none"> - Lower than national and state averages for adult smoking and preventable hospital stay - Higher than average rate for access to exercise 	<ul style="list-style-type: none"> - High rates of adult drinking, injury deaths, and children in poverty - Low rates of women receiving mammography screenings
Maine Women's Fund Assessment	Conducted by Maine Women's Fund, 2014		<ul style="list-style-type: none"> - Challenges include access to resources (especially elderly and child care), lack of transportation options, feelings of isolation
Maine Report in Poverty	Prepared by Margaret Chase Policy Center, 2010	<ul style="list-style-type: none"> - Lower than state average of SNAP recipients 	<ul style="list-style-type: none"> - A -3.5% decrease in income between 2006-2010

Current Quantitative Data

(Source: Maine CDC at: <http://www.maine.gov/dhhs/mecdc/phdata/sha/index.shtml>)

Below are selected health indicators from the most recent Maine State Health Assessment 2012. A complete list of indicators can be found at the above link.

Indicator	Year	Lincoln County	State
Acute Myocardial Infarction Deaths (age adjusted)	2007-2011	21.2%	34.2%
Adults Aged 18 Years or Older Who Have Received A Flu Shot	2012	48.5%	47.1%
Adults Ever Diagnosed With Anxiety	2010	12.1%	17.2%
Adults Ever Diagnosed With Depression	2010	20.4%	21.1%
Adults Ages 18 Year and Over With 6 or More Teeth Lost Due to Tooth Decay or Gum Disease	2010	18.7%	
Adults 18 Year and Over Who Not received Some Type of Dental Care in the Past Year	2010	25.8%	
Adults with Diabetes	2010	8.4%	8.7%
Adults with Disabilities	2009-2011	15.5%	15.5%
Alcohol-induced Deaths, Adults (age adjusted)	2007-2011	9.5%	7.5%
Did Not Use Alcohol Use in Last 3 Months of Pregnancy	2007-2011	84.7%	92.8%
Asthma Among Children- Lifetime	2006-2010	12.1%	13.5%
Heavy Alcohol Consumption Among Adults	2010	6.1%	5.2%
Binge Drinking Among Middle School Students	2011	3.8%	2.8%
Cancer Deaths (all cancer, age adjusted)	2006-2010	168.1	187.7
Cancer Incidence (all cancer, age adjusted)	2007-2009	450.4	496.7
Children with Elevated Blood Lead levels aged 0-17 months	2006-2010	1.2%	1%
Chronic Lower Respiratory Disease Deaths (age adjusted)	2007-2011	40.0	47.1
Women Aged 50 Years or Older Who Have Had a Mammogram in 2 Years	2010	84.2%	83.6%
Women Aged 18 Years or Older Who Have Had a PAP Smear in Past 3 Years	2010	85.9%	85%
Smoking Status Among Adults- Current Smokers	2010	16.1%	18.2%
Overweight Adults	2010	43.7%	36.7%
Physical Activity Among Middle School students	2011	58%	50.7%
Pre-Term Births	2010-2011	8.7%	8.1%
Cost Related Barriers to Healthcare for Adults	2010	6.4%	10.4%
Five or More Fruits and Vegetables a Day	2010	33.7%	28%
Lyme Disease Incidence	2011	154.9	75.7
Motor Vehicle Deaths (age adjusted)	2007-2011	16.6	11.2
Health Insurance Coverage	2009-2011	11.6%	10.3%
Poverty	2007-2011	9.8%	12.8%
Average Life Expectancy	2010	77.2 male/81.7 female	76.5 male/80.9 female

Leading Causes of Death in Lincoln County, 2011

Cause of death	Number	Crude rate		Age-adjusted rate	
		Rate	95% CI	Rate	95% CI
Lincoln					
1 Malignant neoplasms (C00-C97)	90	263.0	211.5 - 323.2	152.5	122.2 - 189.7
2 Diseases of heart (I00-I09,I11,I13,I20-I51)	74	216.2	169.8 - 271.4	119.2	93.3 - 151.9
3 Unintentional injuries (V01-X59,Y85-Y86)	23	67.2	42.6 - 100.8	49.0	29.5 - 77.3
4 Cerebrovascular diseases (I60-I69)	22	64.3	40.3 - 97.3	35.1	21.9 - 55.6
5 Alzheimer's disease (G30)	21	61.4	38.0 - 93.8	33.9	20.9 - 54.3
6 Chronic lower respiratory diseases (J40-J47)	16	46.8 [†]	26.7 - 75.9 [†]	26.3[†]	15.0 - 45.3 [†]

Crude rates refer to calculations using the actual data. Because age can alter results and not allow for comparison among geographical areas, the data is age adjusted.

Assessment Methodology

When considering methodology for data gathering, the project was built on two primary values. The first was to hear from the marginalized population who held various points of view on their experiences with health disparities. The second was to meet the population where they were at. The following strategies were implemented as part of the Community Health Assessment:

- **Qualitative Data Collection**

- Stakeholder Network Analysis: Existing resources, partners, organizations, leaders, and other entities in Lincoln County were identified and organized by type of industry and population they serve. The result was a comprehensive directory with organization name and contact information.
- Focus Groups: Focus groups were conducted to gather information directly from the marginalized population, particularly with the populations determined to be a priority, including elderly, youth, and people living in/borderline poverty. For comfort of the population and logistical purposes, focus groups were held with groups that were already meeting for various reasons. Focus groups included meeting with non-traditional students from University of Maine, Rockland (April 30 with 2 Lincoln County students); teenage mothers from Passages Program (May 27 with 2 students); and aging population attending a luncheon at Spectrum Generations (May 21, 2014 estimated 25 people). Participants were asked their perspective about:

▪ Definition of health	▪ Identification of health issues
▪ Definition of community	▪ Contributing factors affecting the health issues
▪ Strengths of their community	▪ Resources to improve health
▪ Challenges of their community	
- Key Informant Interviews (phone calls): In response to a press release, 6 community members contacted the project consultant to discuss their experiences and feedback on the community.
- Note: Efforts were made to coordinate focus groups and distribute surveys at Two Bridges Jail. Administration was contacted and voiced support. After repeated attempts to schedule the activities, administrators did not return communication.

- **Quantitative**

- Surveys: A 1 page, 2 sided survey was developed and distributed throughout the county, particularly targeting marginalized populations. In addition, information about the survey was

included in local press and distributed via new email distribution list from the directory created at initial stakeholder meeting (including all municipalities). Press release did result in some self-selected participants.

Targeted populations and entities included:

- Food pantries- Waldoboro, Wiscasset, Newcastle, Whitefield
- Food assistance voucher program in Boothbay and Boothbay Harbor
- Head Start and Childcare Sites – Wiscasset, Newcastle, Whitefield
- Sheepscot Valley Health Center, Whitefield
- Family Planning – Damariscotta
- YMCA- Damariscotta
- Wiscasset Recreation Center
- Summer Food Service Program – Jefferson,
- Healthy Kids Program- countywide
- Town of Somerville

Assessment Results

The following are results of data analysis.

Focus Group and Interviews:

Observations Made from Discussions	Strengths of Lincoln County	Challenges of Lincoln County
<ul style="list-style-type: none"> • Many people want to talk about their community and how to make it better. • People feel like problem is too big, have no control. • Vulnerable populations are focused on surviving each day. • My problems are also the problems of the community. • Passionate/angry about lack of transportation. People are passionate about lack of transportation to not just get to medical care but to family, friends, food, socializing, events. • We have leaders in the community, but we need to tap into them. • Didn't talk politics. • Walking is important to elderly. They determine their own physical and social health and that of others on their ability to walk. • People struggle with understanding how they can be part of the solution. 	<ul style="list-style-type: none"> • People are ready to help when you are in crisis. • It is a safe, quiet community and beautiful place to live. • Schools care about students. • Have healthcare options. • Spectrum Generations is a significant resource and support for the elderly. • There are things good things going on, but need to expand on it. • People want to get involved in activities. • People live here because they appreciate the area. • Outside spaces (parks, trails) are seen as valuable resources. 	<ul style="list-style-type: none"> • People leave Lincoln County because of lack of easily accessible resources. • People cannot get to where they need to go, HUGE burden. • There are not enough community events (not targeted at tourists). • Parents need to be more involved in children's lives- grandparents too. • Kids do not have structure and guidance. This leads to lots of screen time. • It is a community divided. (Route 1, hospital, haves and have nots) • Priority health issues include: obesity, access to healthcare, and mental health. • Lack of resources for mental health care, dental care (for MaineCare), and substance abuse treatment. • People are easily stigmatized- "poor", "drug addicts", "from Waldoboro". • Alcohol abuse a significant problem that you can hide. • Because of the high proportion of elderly people in Lincoln County, see many issues related to aging.

STATEMENT: As grandparents, we have a role in raising our grandchildren to not sit in front of a screen and to become good people. Meet them off the bus, play a game, read to them, be a part of their life.

STATEMENT: I am only 15 years old with no driver's license. After I had my baby, I left my family's home in Lincoln County and moved to Rockland so I could be closer to the things I need.

STATEMENT: I am angry that there isn't any transportation to get where I need to go and visit friends. I am in my 80's and I cannot drive. I am stuck in my home alone.

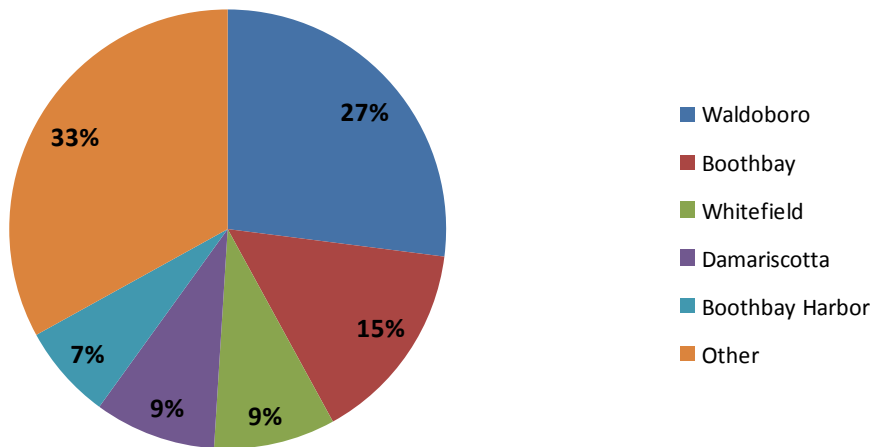
Survey: Raw data for the survey is available via an excel spreadsheet that lists individual responses. Contact Lincoln County Regional Planning Commission for access to data. Number of total responses: 303



Survey Observations

- People's issues were the community's issues
- Health issues were medical issues
- People really have not spent time thinking about their community: what it is, what is good/not so good
- People operating in survival mode.
- Sensitive to issues- obesity
- Do not feel like they have any power
- Some questions were complex for the population
- Helping each other
- Security in seeing same volunteers

Municipalities



Other Municipalities Include:

- Alna (1)
- Bremen (7)
- Bristol (15)
- Dresden (2)
- Edgecomb (6)
- Jefferson (7)
- Newcastle (13)
- Nobleboro (15)
- Somerville (6)
- South Bristol (4)
- Southport (4)
- Walpole (5)
- Westport (1)
- Wiscasset (9)
- Woolwich (1)

Race/Ethnicity:

Answer Options	Response Percent	Response Count
Hispanic	1.4%	4
American Indian/Alaska Native	2.8%	8
Asian	0.7%	2
Black or African American	0.0%	0
Native Hawaiian or Pacific Islander	0.7%	2
White	97.2%	277
Other (please specify)		2
<i>answered question</i>		285
<i>skipped question</i>		18

You are:

Answer Options	Response Percent	Response Count
Lived in Maine whole life	63.3%	155
Moved to Maine	36.7%	90
Seasonal worker	0.0%	0
Summertime Maine resident	0.0%	0
Other (please specify)		4
<i>answered question</i>		245
<i>skipped question</i>		58

What is your gender?		
Answer Options	Response Percent	Response Count
Male	28.7%	71
Female	71.7%	177
Other (please specify)	3	
<i>answered question</i>		247
<i>skipped question</i>		56

What age group are you in?		
Answer Options	Response Percent	Response Count
18 or Under	1.0%	3
19 - 24 years old	4.5%	13
24-29 years old	6.2%	18
30-39 years old	15.5%	45
40-49 years old	14.1%	41
50-59 years old	15.5%	45
60-69 years old	19.2%	56
70 years and older	24.1%	70
<i>answered question</i>		291
<i>skipped question</i>		12

What is your annual household income? You plus people living in the house	What is your annual household income? You plus people living in the house	What is your annual household income? You plus people living in the house
Answer Options	Response Percent	Response Count
under \$10,000 a year	31.0%	85
\$10,001 - \$19,000 a year	25.2%	69
\$20,000 - \$29,000 a year	15.0%	41
\$30,000 - \$39,000 a year	8.4%	23
\$40,000 - \$49,000 a year	3.6%	10
\$50,000 a year or greater	16.8%	46
<i>answered question</i>		274
<i>skipped question</i>		29

What is the last year of school you completed?		
Answer Options	Response Percent	Response Count
6th Grade	0.0%	0
8th Grade	5.4%	13
12th Grade	36.9%	89
Completed some college	21.6%	52
Completed Associate college degree	11.6%	28
Completed Bachelor college degree	16.2%	39
Completed graduate school	12.0%	29
Other (please specify)		11
<i>answered question</i>		241
<i>skipped question</i>		62

What communities do you belong to? (Check all that apply)		
Answer Options	Response Percent	Response Count
Church, Temple, Mosque, Sangha, spiritual group	31.40%	86
Neighborhood	30.70%	84
Work	30.30%	83
Volunteer	29.90%	82
School	29.90%	82
Older Adults Group	17.90%	49
Fishing Community	13.50%	37
Lobstering Community	8.40%	23
I don't feel part of a community	8.40%	23
Artist Community	8.40%	23
Sports	7.30%	20
Civic Organization (Rotary, Lions, Masons, etc.)	6.90%	19
Card Playing Group	4.70%	13
Gardening Club	4.00%	11
Snowmobiling	2.60%	7
Gay, Lesbian, Bisexual Transgender Community	2.20%	6
ATV Club	0.00%	0
Other (please specify)		41
<i>answered question</i>		274
<i>skipped question</i>		29

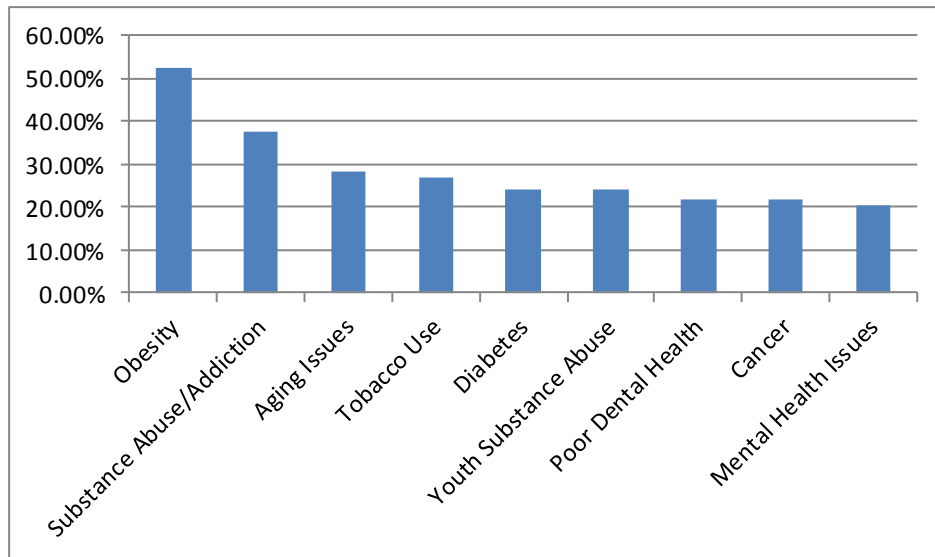
What is 1 thing you like about your community?	What is 1 thing you dislike about your community?
Nice, quiet, friendly, safe, close knit community	People know your personal business, lack of privacy and anonymity
Beautiful environment, scenery	Not enough- shopping, sidewalks, non-tourist things to do, jobs, home health
People are there to help	Distance from resources and things to do, need to drive everywhere, no transportation
Resources- libraries, hospital, church events, farmer markets, community dinners	Lack of diversity, people of “my age”
	Lack of support for youth
	Taxes
	No hospital

Check the 3 things that health means the most to you:

Answer Options	Response Percent	Response Count
Good nutrition	67.90%	201
Having friends, family	43.90%	130
Getting exercise	41.20%	122
Plenty of sleep	41.20%	122
Emotional well being	37.80%	112
Getting regular check-ups	26.00%	77
Walking	18.20%	54
Getting preventive screenings (mammograms, colonoscopy, PAP)	16.20%	48
No disease	11.10%	33
Having a regular doctor	8.80%	26
Clean environment	8.40%	25
Not doing illegal drugs	4.40%	13
Other (please specify)		37
<i>answered question</i>		296
<i>skipped question</i>		7

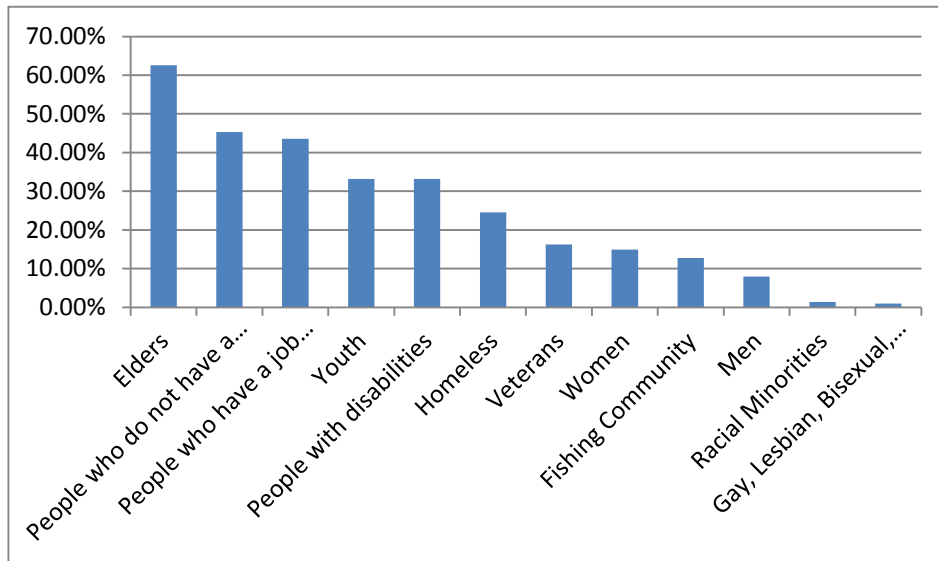
Check off the 3 health issues that you think are affecting your community the most:

Answer Options	Response Percent	Response Count
Obesity	52.70%	154
Substance Abuse/Addiction	37.70%	110
Aging Issues	28.10%	82
Tobacco Use	27.10%	79
Diabetes	24.30%	71
Youth Substance Abuse	24.00%	70
Poor Dental Health	21.60%	63
Cancer	21.60%	63
Mental Health Issues	20.50%	60
Lyme Disease	14.70%	43
Youth Alcohol Binge Drinking	11.00%	32
Teenage Pregnancy	10.30%	30
Heart Disease	9.90%	29
Car Accidents	9.20%	27
Dementia/Alzheimer's	7.20%	21
Stroke	3.80%	11
Suicide	3.80%	11
Poor Infant Health	3.40%	10
Sexually Transmitted Diseases	2.40%	7
Injuries	2.10%	6
Homicide	1.70%	5
Infectious Diseases	1.00%	3
Low Vaccine Rates	0.70%	2
Injuries at work	0.30%	1
Other (please specify)		9
<i>answered question</i>		292
<i>skipped question</i>		11



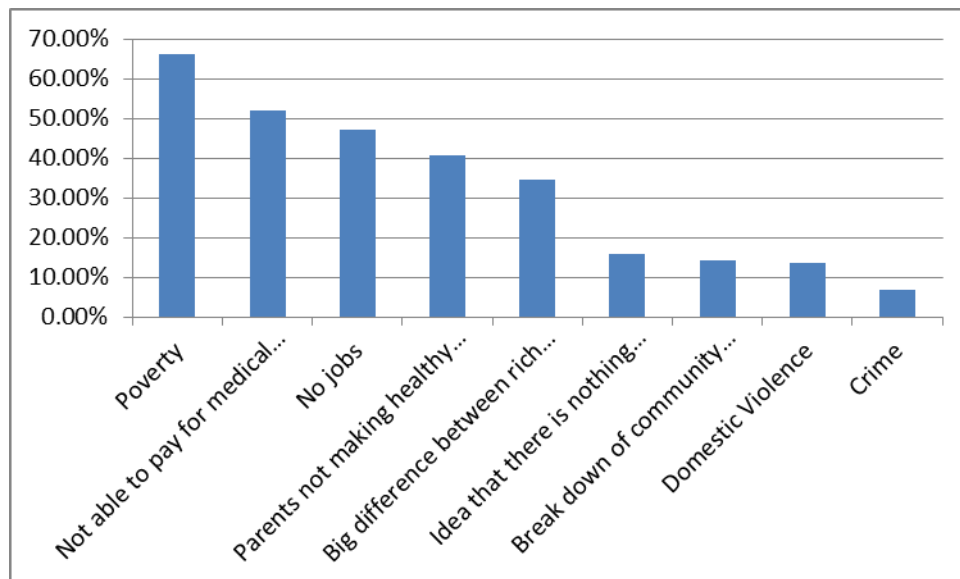
Check off 3 groups that are most affected by health issues in your community:

Answer Options	Response Percent	Response Count
Elders	62.60%	181
People who do not have a job living in poverty	45.30%	131
People who have a job living in poverty	43.60%	126
Youth	33.20%	96
People with disabilities	33.20%	96
Homeless	24.60%	71
Veterans	16.30%	47
Women	14.90%	43
Fishing Community	12.80%	37
Men	8.00%	23
Racial Minorities	1.40%	4
Gay, Lesbian, Bisexual, Transgender	1.00%	3
Other (please specify)		11
answered question		289
skipped question		14



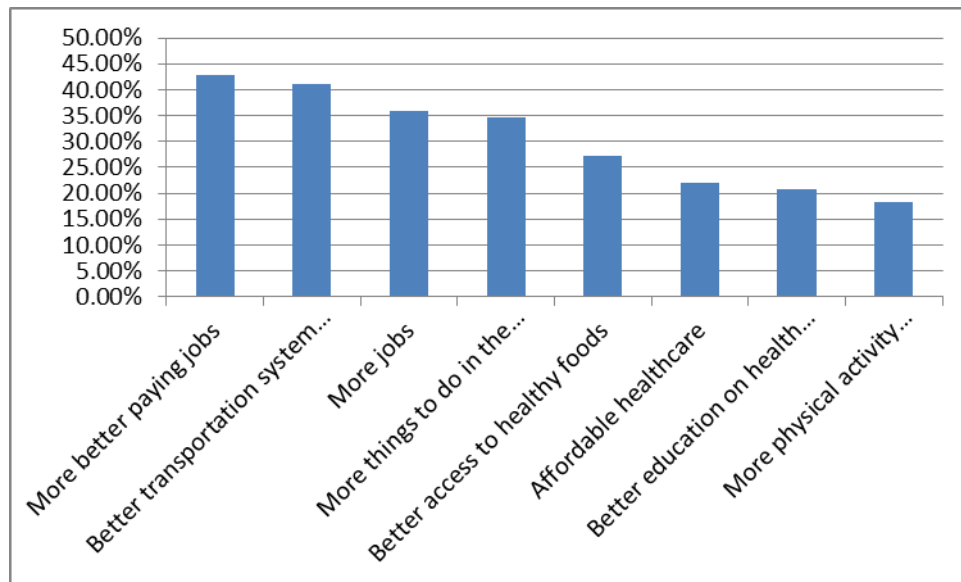
Check off 3 things that contribute to poor health in the community the most:

Answer Options	Response Percent	Response Count
Poverty	66.10%	195
Not able to pay for medical costs	51.90%	153
No jobs	47.10%	139
Parents not making healthy choices for their children	40.70%	120
Big difference between rich and poor in the community	34.60%	102
Idea that there is nothing better out there	15.90%	47
Break down of community and people coming together	14.20%	42
Domestic Violence	13.60%	40
Crime	6.80%	20
Other (please specify)		17
answered question		295
skipped question		8



Check off the 3 things that you think could make your community healthier

Answer Options	Response Percent	Response Count
More better paying jobs	42.90%	124
Better transportation system and options	41.20%	119
More jobs	36.00%	104
More things to do in the community	34.60%	100
Better access to healthy foods	27.30%	79
Affordable healthcare	22.10%	64
Better education on health issues	20.80%	60
More physical activity programs	18.30%	53
Taking away stigma about mental health	13.50%	39
Youth are valued as community members	10.00%	29
More mental health counselors	9.00%	26
More dentists	8.70%	25
More doctors	7.60%	22
Better paying jobs	3.80%	11
Cleaner environment	3.50%	10
Other (please specify)		23
<i>answered question</i>		289
<i>skipped question</i>		14



Key Findings

Based on assessment observations and results, the following are key findings:

- Generally, people report being part of a community. One third report being part of a spiritual community, neighborhood, work, school, and volunteer communities. This information can be useful in targeting groups for information gathering, information sharing, and mobilizing partnerships through groups/communities that exist and people identify with.
- Survey results indicate that people see health as more than accessing medical care, but also through their own choices- good nutrition, getting enough exercise, and getting enough sleep- to their social connections and emotional wellbeing. This view of health can be used to leverage people’s interests in improving their health and that of their community. People are more motivated to engage if it is about something they value.
- Half the people that were surveyed chose obesity as one of the top three health issues in Lincoln County.
- Access to activities essential and basic for health (medical care, food, prescriptions, therapy, etc.) is a significant barrier for community members of all ages. But to live a full, happy, healthy life, people recognize the need to be able to access social interaction as well.
- Organizations work tirelessly to address social service, healthcare, and educational needs, but many resources and agencies are located are outside of Lincoln County.
- Youth do not feel valued or empowered.
- The community is aware of the link between health and economics. They recognize that if you live in poverty or at risk of living in poverty, you have poor health.

- When data was analyzed for under 40 years old population who completed the survey as compared to the total population that completed the survey, the following are results:

Question	Under 40 years old	Total survey
Health issue	Top choices: obesity and substance abuse tied at 45%; poor dental health; mental health; tobacco; youth substance abuse	Top choices: obesity (53%); substance abuse (38%); aging issues
Population most affected	Top choices: Youth, elders, people with disabilities tied with working poor	Top choices: elders; people in poverty; people with disabilities
Make community healthier	Top choice: More things to do in community (42%)	Top Choice: Better transportation (41%)

- When data was compared among household income amounts, survey results indicate possible differences in opinion. Generally, all income levels agreed on what health means to them and the top health issues. For contributing factors, lower household incomes felt more strongly that the difference between the rich and the poor was a contributing factor. Higher income groups reported that poor parental decisions were a contributing factor. Also of interest, higher income level respondents reported that better education on health issues would improve health more than lower income respondents. These results should be interpreted cautiously since the number of respondents with a household income only represents 20% of respondents.