COMPASS NOW 2015

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COMPASS NOW Chair

Doug Mormann

COMPASS NOW Coordinator

Aubrey Stetter-Hesselberg, Great Rivers United Way

Steering Committee

Pauline Byom, Mayo Clinic Health System Tracy Herlitzke, Cooperative Educational Service Agency (CESA) #4 Catherine Kolkmeier, La Crosse Medical Health Science Consortium Jenny Kuderer, Wisconsin Economic Development Corporation Jason Larsen, La Crosse Area Family Collaborative Mary Meehan-Strub, La Crosse County UW-Extension Joan Mueller, Mayo Clinic Health System Eric Prise, Tomah Memorial Hospital Heather Quackenboss, La Crosse Community Foundation Brenda Rooney, Gundersen Health System Sarah Spah, Mayo Clinic Health System Shelly Teadt, Couleecap Mary Kay Wolf, Great Rivers United Way

Community Council

Carol Abrahamzon, Mississippi Valley Conservancy Cecil Adams, African American Mutual Assistance Network Valjean Adams, Clara Fields Multicultural Literacy Program Toni Asher, Pump House Regional Arts Center Kim Cable, Couleecap Anna Cardarella, Western Dairyland Fai DeMark, Consumer Credit Counseling Service of La Crosse Mike Desmond, Boys & Girls Clubs of Greater La Crosse Lori Dubczak, Independent Living Resources Jackie Eastwood, La Crosse County Area Planning Committee Tom Faella, La Crosse County Administrative Center Ashlev Foreman, Marine Credit Union Charlie Handy, La Crosse County Planning/Community Development Mary Jacobson, Catholic Charities Ann Kappauf, New Horizons Shelter & Outreach Centers Lisa Luckey, La Crosse Area Family YMCA Audra Martine, Aging & Disability Resource Center of Western Wisconsin Julie Nelson, The Salvation Army of La Crosse Wes Revels, Great Rivers United Way Board of Directors Jamie Schloegel, Family & Children's Center Greg Stangl, La Crosse County Land Conservation Joshua Walden, Crossfire Erin Waldhart, WAFER Food Pantry Jason Witt, La Crosse County Human Services Department Sara Wrobel, Causeway Caregivers

Education Council

Cecil Adams, African American Mutual Assistance Network Valjean Adams, Clara Fields Multicultural Literacy Program William Colclough, University of Wisconsin-La Crosse Tracy Craker, Western Technical College Jerilyn Dinsmoor, La Crosse Promise John Hendricks, Sparta Area School District Tracy Herlitzke, Cooperative Educational Service Agency (CESA) #4 Karen Joos, Community Volunteer Pat Kerrigan, Viterbo University Laura Pettersen, Scenic Bluffs Area Health Education Center Kari Reyburn, Western Technical College Steve Salerno, School District of La Crosse Beth Theede, La Crescent-Hokah Public Schools Audra Wieser, The Parenting Place

Health Council

Sandra Brekke, St. Clare Health Mission Ben Crenshaw, Mayo Clinic Health System Jessie Cunningham, Vernon Memorial Healthcare Kayleigh Day, Monroe County Health Department Christine Dean, Gundersen St. Joseph's Hospital & Clinics Karen Ehle-Traastad, Vernon County UW-Extension Mari Freiberg, Scenic Bluffs Community Health Centers Lori Freit-Hammes, Mayo Clinic Health System Beth Hartung, Consultant, WFPRHA Sarah Havens, Gundersen Health System Beth Johnson, Vernon County Health Department Betty Joregenson, Mayo Clinic Health System Mary Koenig, Vernon Memorial Healthcare Keith Lease, Western Technical College Patricia Malone, Trempealeau County UW-Extension Mary Meehan-Strub, La Crosse County UW-Extension Heather Myhre, Houston County Health Department Sharon Nelson, Monroe County Health Department Eric Prise, Tomah Memorial Hospital Sarah Spah, Mayo Clinic Health System Cheryl Rhoda, Trempealeau County Health Department Brian Theiler, Gundersen Tri-County Hospital & Clinics

Income/Economic Council

TJ Brooks, University of Wisconsin-La Crosse Fai DeMark, Consumer Credit Counseling Service of La Crosse Catherine Emmanuelle, Trempealeau County UW-Extension Greg Flogstad, Mississippi River Regional Planning Commission Mari Freiberg, Scenic Bluffs Community Health Center Lorie Graff, Western Region for Economic Assistance IM Consortium Sandy Graves, La Crescent Area Healthy Community Partnership Todd Mandel, Couleecap Gina Merrell, Workforce Connections

Income/Economic Council (continued)

Caroline Neilsen, City of La Crosse Community Development Kate Noelke, University of Wisconsin-La Crosse Teresa Pierce, Workforce Connections Jennifer Slabaugh, Semcac Outreach & Emergency Services Program Laurie Strangman, University of Wisconsin-La Crosse Tricia Wavra, Western Region for Economic Assistance IM Consortium

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Survey Team

Robert Lynn, Gundersen Health System Brenda Rooney, Gundersen Health System Laurie Strangman, University of Wisconsin-La Crosse

Data Collection, Analysis and Reporting Support

Lindsey Menard, La Crosse County Human Services Department Brenda Rooney, Gundersen Health System Laurie Strangman, University of Wisconsin-La Crosse

Publication Design

Adrianne Olson, Great Rivers United Way

Editing & Publication Support

Catherine Kolkmeier, La Crosse Medical Health Science Consortium Brenda Rooney, Gundersen Health System

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Additional content available at: www.compassnow.org

1 OVERVIEW

Photo by: Emily Ernst, Abby Grall & Kara Van Kirk

COMPASS NOW 2015 is a joint effort of Great Rivers United Way, area healthcare organizations, area foundations, and county health departments to assess community needs, identify community resources, and encourage action to improve the quality of life for everyone in the community. COMPASS NOW has been a resource in the Great Rivers Region since the first needs assessment in 1995. Great Rivers United Way initiated this strategic endeavor as an agency transition from resource distribution to community solutions. This has resulted in focused Great Rivers United Way funding to the programs that answer the greatest needs. In addition, many community organizations use COMPASS NOW findings to shape their own priorities and support grant applications.

The wide-reaching efforts of the global economic crisis, coupled with federal mandates for the healthcare organizations to conduct community needs assessments, was the impetus to implement COMPASS NOW in 2012. The need to keep this report current and fulfill the partners' needs have led to an ongoing three-year process in which Great Rivers United Way works with a committed team of area experts to complete an assessment that can be adopted by its healthcare partners. The partnership operates in synergy, promoting greater collaboration among organizations working towards improving the health and well-being of the population.

The COMPASS NOW 2015 process used a variety of data collection methods to create an overall depiction of the issues facing our communities. These methods included a Random Household Survey, convenience survey, community conversations, and an extensive review of socioeconomic indicators, which provides an inventory of community resources. The data collected during COMPASS NOW 2012 guided the development of four pillar profiles. These are referred to as pillars because they create the building blocks for a better life. The pillars of COMPASS NOW 2015 are Community, Education, Income/Economic, and Health. The profiles describe our community with regards to the key issues of each area. Each profile pulls key indicator data and COMPASS survey results into a narrative format that is intended to provide a context to the data found in the indicator report, making the data easy to navigate. Additional reports on the household survey are included in the Appendix. The website www.compassnow.org has additional indicator reports with county-level data wherever possible.

The COMPASS NOW 2015 community needs assessment included a Random Household Survey to complement the socioeconomic indicators. The objective of the Random Household Survey was to increase the understanding of the community's needs and their perceptions of the main challenges facing the region. Results from this survey were examined by respondent characteristics as well as compared to the previous survey results. Of the 5,000 households that received the Random Household Survey, 791 were returned with responses analyzed.

In addition to the Random Household Survey, the COMPASS NOW 2015 community needs assessment also included a convenience sample that focused on specific subgroups in the Great Rivers Region. The overall objective of this sampling was to collect feedback from populations within the community that were potentially underrepresented in the Random Household Survey due to the small number in which they exist in the community. These smaller populations included, but were not limited to, African Americans, Hispanics, LGBT youth, youth at-risk, low-income adults, and senior citizens. Results from this survey were compared to the responses of the Random Household Survey respondents in an attempt to determine any significant differences that existed between the general population and those in smaller subgroups within the community. In total, 753 community members shared feedback through the convenience sample process.

Another way in which community feedback was gathered was through community conversations. These conversations were conducted in lieu of the focus groups that were conducted in the COMPASS NOW 2012 community needs assessment. These small group gatherings were a safe space in which community members could come together and share their thoughts and experiences about living in the Great Rivers Region. Additional information and a brief summary on the results of these community conversations can be found in the Appendix.

COMPASS councils were advisory groups of local experts in the fields of education, income, health, and a variety of community issues. These members collected and reviewed data, analyzed the survey results, and offered professional insights about topic-specific issues in the Great Rivers Region. After significant review of the data and survey results, priority issues were identified by COMPASS council members. These issues were then ranked by Council members using the criteria below:

- 1. How widespread is the issue in our community?
- 2. How serious are the effects of the issue in our community?
- 3. How important is the issue to the community?

The COMPASS NOW Steering Committee then applied its knowledge of the issues. The combination of COMPASS Council recommendations and the insights from the COMPASS NOW Steering Committee resulted in the identification of three top areas of need for each of the four Great Rivers United Way pillars.

COMPASS NOW provides guidance and should provide a foundation for action plans that solve problems, long term. Great Rivers United Way uses COMPASS NOW to guide its grant allocation process and develop its strategic plan. Healthcare organizations and county health departments use COMPASS NOW to develop their own community health improvement plans (CHIPs).

The COMPASS NOW 2015 partnership is made up of Great Rivers United Way, Gundersen Health System, Mayo Clinic Health System-La Crosse, Mayo Clinic Health System-Sparta, Otto Bremer Foundation, Gundersen St. Joseph's Hospital and Clinics, Tomah Memorial Hospital, Gundersen Tri-County Hospital and Clinics, Vernon Memorial Healthcare, La Crosse Community Foundation, La Crosse County Health Department, Monroe County Health Department, Trempealeau County Health Department, Vernon County Health Department, and Houston County Health Department.

4 EXECUTIVE SUMMARY

Photo by: Mercedes Fowler, Mackenzie Kalian & Lucas Quackenbush

COMPASS NOW 2015 is a joint effort of Great Rivers United Way, area healthcare organizations, area foundations, and county health departments to improve the quality of life for everyone in the community.

COMPASS NOW 2015 gathered information in four ways:

- Random Household Survey
- Convenience Survey

- Analysis of key socioeconomic indicators
- Community conversations with individuals who were otherwise underrepresented among Random Household Survey respondents

The most important element of the COMPASS NOW 2015 community needs assessment is the widespread community involvement. More than 1,700 people contributed to the results of this report. Completing either the Random Household Survey or Convenience Survey, participating in community conversations, or serving as a COMPASS NOW team member were vital components to the process. This COMPASS NOW Report also would not have been possible without the financial support of many partner organizations.

The COMPASS NOW process does not end with this report. The information collected will be the foundation for action plans that not only respond to needs but help solve problems, long term. With limited resources and increasing needs, now is the time to rethink how we as a community collaborate efficiently and effectively to solve our most profound problems. Our action plans must have solutions that will have a lasting impact on our communities so all residents may reach their full potential.

Thank you to all who participated for their support and dedication to the Great Rivers Region!

The Great Rivers Region is located in western Wisconsin and southeastern Minnesota.

Great Rivers Region: Demographics							
County/Demographic	La Crosse	Monroe	Trempealeau	Vernon	Houston		
Total Population	114,638	44,673	28,816	29,773	19,027		
Population in Poverty	14.0%	14.4%	11.9%	14.5%	10.9%		
Unemployment Rate	5.9%	6.3%	5.6%	5.5%	5.8%		
Uninsured Ages 18-64*	18.7%	22.3%	21.2%	28.3%	11.3%		
Uninsured Under age 18	2.7%	13.7%	10.0%	25.8%	3.1%		
Adults Ages 25+ with High School Education or Less	29.9%	27.9% 55.3%		55.7%	39.1%		
Primary Language Spoken in Home							
English	93.7%	91.1%	92.6%	88.6%	97.8%		
Spanish/Creole	1.4%	3.3%	4.6%	1.6%	0.8%		
Indo-European	1.2%	4.9%	2.5%	9.4%	1.2%		
Asian and Pacific Island	3.4%	0.3%	0.2%	0.4%	0.0%		
Other Languages	0.3%	0.3%	0.0%	0.0%	0.0%		

Source: http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml Population – 2010 Demographic Profile, U.S. Census

Unemployment Status, Education, and Language Spoken-2009-2013 American Community Survey 5-Year Estimates

Uninsured rates – source: http://www.countyhealthrankings.org/our-approach/health-factors/access-care 2015 County Health Rankings

Percentages of uninsured between the ages of 18- and 64-years-old are based on the averages of those employed, unemployed, and not in the labor force.

GREAT RIVERS UNITED WAY | AREAS OF NEED

The purpose of COMPASS NOW 2015 is to assess the needs in our community, identify community resources to address the most urgent needs, and to encourage action plans that have the potential to solve the identified community problems. Based on this needs assessment, Great Rivers United Way and community experts have identified the following areas of need.

The areas of need are not necessarily ranked in order of importance.

COMMUNITY

- Adverse Childhood Experiences (ACEs)
- Violence
- Environment
 - Built
 - Natural

EDUCATION

- Academic Readiness and Success
 - K-12
 - Post-Secondary Education
- Youth Resilience
- Workforce Readiness

INCOME/ECONOMIC

- Quality Housing
 - Affordability
 - Availability
- Poverty
- Jobs with Adequate Income

HEALTH

- Chronic Disease and Contributing Factors
- Mental Health and/or Substance Abuse
- Oral Health

RATIONALE | COMMUNITY AREAS OF NEED

Adverse Childhood Experiences (ACEs)

The Adverse Childhood Experiences (ACEs) Study is one of the largest investigations ever conducted to assess associations between childhood maltreatment and later-life health and well-being. The study's findings suggest that certain experiences (e.g., separation of

COMMUNITY

- Adverse Childhood Experiences (ACEs)
- Violence
- Environment
 - Built
 - Natural

parents, abuse, mentally ill household member, etc.) are major risk factors for the leading causes of illness and death, as well as poor quality of life. Realizing these connections is likely to improve efforts towards prevention and recovery.

An ACEs score is used to assess the amount of stress during childhood. It has been demonstrated that as the ACEs score increases, the risk for the following health problems rises in a strong and graded fashion:

- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease (HID)
- Liver disease

- Risk of intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Adolescent pregnancy

Many of the items on this list are common occurrences or problems in our communities. With the strong correlation between the above problems and high ACEs Scores, the COMPASS NOW 2015 Steering Committee felt that attention should be given to preventing ACEs. The focus on prevention strategies will decrease adverse experiences in childhood, thereby reducing the need for intervention services in older children, adolescents, and adults.

Violence

Violence manifests itself in many forms, including physical, sexual, emotional, psychological, and cultural violence.

Between 2009 and 2014, New Horizons Shelter & Outreach Centers, a local organization that provides shelter for individuals and families who have experienced domestic abuse, increased the number of shelter nights provided from 3,500 to 8,952. This dramatic increase – almost 156% over six years – is an indicator of the growing need for such services in our community. The Wisconsin Department of Justice reported 1,104 domestic violence incidents in 2012 for Wisconsin counties in the Great Rivers Region. Based on these trends, violence was determined to be a Community issue.

Environment

Availability of and access to the natural environment promotes overall well-being, improves cognitive function, improves recovery from surgery and illness, increases physical activity, and strengthens a sense of community by drawing people together and enhancing social connections. The natural environment is one of the greatest assets in the Great Rivers Region. Because of the impact the natural environment has on the physical, mental, and economic well-being of our region, and the vulnerability of the environment to degradation through development, pollution, and natural environment was selected as a priority Community issue.

How land is used and developed, such as traffic density, noise pollution, light pollution, and availability of alternative transportation options, can impact the physical, mental, and social health of the population through increased activity and social connectedness. Almost one-third of adults in the Great Rivers Region were determined obese, and about 23% of adults self-reported being physically inactive in 2012. Because of this and other data, the built environment is considered a priority Community issue.

COMMUNITY HIGHLIGHTS | COMPASS NOW 2015 RANDOM HOUSEHOLD SURVEY

- Overall, 35% of survey respondents rated their community as excellent as an overall place to live; however, 11% rated it "fair or poor."
- Approximately 40% of respondents rated efforts to prevent abuse or neglect in our community as "fair or poor."
- Nearly 50% of respondents rated the community as a place where people of different cultural/racial/ ethnic backgrounds are included in decision-making as "fair or poor," while only 7% rated this as "excellent."
- Almost 42% of respondents rated community efforts to protect the natural environment as "fair or poor," while less than 11% rated this as "excellent."

RATIONALE | EDUCATION AREAS OF NEED

Academic Readiness and Success

Participation in pre-kindergarten has been shown to strongly influence lifetime academic success. Because children have varying pre-kindergarten education experiences, they all enter school at different levels of preparedness. Approximately 38% of three- and four-year-olds were enrolled in pre-kindergarten

EDUCATION

- Academic Readiness and Success
 - K-12
 - Post-Secondary Education
- Youth Resilience
- Workforce Readiness

in the Great Rivers Region in 2012, which is much lower than the Wisconsin average of 44.6% and the Minnesota average of 46.3%.

College readiness refers to being prepared for postsecondary education or training experiences, including the ability to succeed at either two- or four-year institutions without the need for remedial coursework. Individuals who earn a postsecondary degree are less likely to endure poverty, are more likely to have an increased earning potential, have a higher likelihood that their children will attend a postsecondary institution, and are more likely to live longer and happier lives overall. Based on the data available and the professional insights of the Education Council, academic readiness was seen as a high priority Education issue for our community.

Youth Resilience

Research has determined that how youth respond to stressors (resilience) matters more than the stressor itself. Resilience is the ability to manage stress and function well even when faced with adversity and trauma. There is increasing evidence that the effects of toxic stress can be mitigated by experiences that help to build youths' resilience. These are experiences that:

- Foster a consistent relationship with at least one safe, caring, reliable, and competent adult who promotes high expectations and encourages self-improvement
- Encourage adolescent voice, choice, and personal responsibility
- Promote the development of self-regulation, -reflection, -confidence, -compassion, and character

Because many youth in the Great Rivers Region are experiencing stressors that challenge their resilience (e.g., family poverty, drug use/abuse, physical abuse, mental health issues, etc.), the Education Council determined youth resilience to be a priority area of need.

Workforce Readiness

A career provides a family-sustaining wage and pathways to advancement, and often requires postsecondary training or education. Workforce readiness means that a high school graduate has the knowledge and skills needed to qualify for and succeed in postsecondary job training and/or education (e.g., technical/vocational program, community college, apprenticeship, or significant on-the-job training) necessary for their chosen career. The Education Council felt this was a priority area of need for our community because, although postsecondary graduation rates for the Great Rivers Region are similar to state and national averages, there is concern that students are not always leaving these institutions prepared to be successful in the workforce.

EDUCATION HIGHLIGHTS | COMPASS NOW 2015 RANDOM HOUSEHOLD SURVEY

- The quality of early education opportunities was rated significantly lower in the COMPASS NOW 2015 Random Household Survey than it was in the 2011 survey.
- 27.5% of respondents rated the availability of birth-to-three education as "fair or poor."
- 22.3% of respondents rated the quality of schools grades 4K-12 as "fair or poor."
- 11.4% of respondents rated the quality of higher education as "fair or poor."

RATIONALE | INCOME/ECONOMIC AREAS OF NEED

Quality Housing

The U.S. Department of Housing and Urban Development defines "affordable housing" as costing no more than 30% of one's income. Those who pay more than this are considered cost-burdened and may have difficulty paying for other necessities (e.g., food, clothing, medical care, transportation).

INCOME/ECONOMIC

- Quality Housing
- Affordability
- Availability
- Poverty
- Jobs with Adequate Income

Poor housing conditions are associated with health conditions such as respiratory infections, asthma, lead poisoning, injuries, and mental health issues. Studies have shown that poor-quality housing is the most consistent and strongest predictor of emotional and behavioral problems in low-income children and youth, and stress is higher for individuals living in poor housing and poverty. Because of local data on the quality of housing in the region, the Income/Economic Council selected quality housing as a priority area of need.

Poverty

Individuals living in poverty are more likely to have developmental, learning, and intellectual disabilities. In 2012, approximately 12.2% of the Great Rivers Region was living in poverty. This is equal to or higher than the Wisconsin and Minnesota state averages. The median household income in the Great Rivers Region was also below state averages, and 37.3% of children received Free and Reduced Price school lunches in 2012.

The link between individuals living in poverty and the community impact can be clearly drawn. For example, someone living in poverty is less likely to reach the same educational attainment as someone not living in poverty. Therefore, it is more likely the person living in poverty will work a lower paying job, thus increasing the likelihood they will be on public assistance, ultimately costing the taxpayer more. By addressing the root causes of poverty, the community could ultimately decrease the financial and other costs society provides to assist those living in poverty. For these reasons, poverty was determined a priority need by the Income/ Economic Councils.

Jobs with Adequate Income

Simply having a job is not always sufficient to provide an adequate income for covering basic necessities. A minimum wage job frequently does not equate to an adequate income. Wisconsin's minimum wage in 2015 is \$7.25 per hour, well below the \$9.60 per hour necessary for an individual living in La Crosse County to meet basic needs, as estimated by MIT's Living Wage Calculator. The average household income in the Great Rivers Region in 2012 was approximately \$49,000, which is below the Wisconsin state average of \$59,126 and the Minnesota state average of \$53,046. Because the availability of jobs with adequate income was connected with other income and economic issues in the community, the Income/Economic Council determined this to be a priority area of need.

INCOME/ECONOMIC HIGHLIGHTS | COMPASS NOW 2015 RANDOM HOUSEHOLD SURVEY

- Approximately 25% of respondents rated their ability to pay for housing as "fair or poor."
- Over 58% of respondents rated the availability of jobs with wages that offer a good standard of living as "fair or poor."
- 57% of respondents rated the community efforts to reduce poverty as "fair or poor."

RATIONALE | HEALTH AREAS OF NEED

Chronic Disease and Contributors to Chronic Disease

Chronic diseases are those lasting three months or longer. Workers with chronic conditions are more likely

HEALTH

- Chronic Disease and Contributing Factors
- Mental Health and/or Substance Abuse
- Oral Health

EXECUTIVE SUMMARY

to miss work than peers without a chronic disease. The leading chronic diseases in the U.S. (heart disease, stroke, cancer, diabetes, and obesity) are largely preventable through lifestyle choices and behavior. Trends in the Great Rivers Region show opportunities for prevention of chronic disease. For instance, in 2010, less than 25% of adults in the Great Rivers Region reported consuming the recommended servings of fruits and vegetables. In addition, nearly 19% of Great Rivers Region community members reported smoking, a rate higher than both Minnesota and Wisconsin averages. Due to the high cost of treating these chronic and preventable illnesses, the Health Council determined this was a priority issue, with special attention needed to access to care and better understanding disparities throughout our community.

Mental Health and/or Substance Abuse

Despite there being limited mental health data available for our community or nationally, mental health was deemed a priority area of need in the Great Rivers Region. This is in part due to a growing awareness of the impact mental health issues can have on individuals and their community. According to the Centers for Medicare and Medicaid Services, in 2012, 17.3% of the Great Rivers Region's Medicare fee-for-service program users lived with depression. This is higher than the Wisconsin average of 15.6% and similar to the Minnesota average of 17.7%. Also, in 2015, the average mental health provider-to-patient ratio for the Great Rivers Region was 1,728 patients for every one mental health provider. This is extremely disproportionate to the Wisconsin and Minnesota ratios of 529:1 and 623:1 patients per provider. This shortage, in part, led the Health Council to select mental health as a priority area of need.

The abuse or misuse of a psychoactive substance, including alcohol and illicit drugs, can result in negative health outcomes. In 2012, there were 725 drug arrests for the possession of marijuana within the Wisconsin counties of the Great Rivers Region and 16 drug-related deaths in the entire Great Rivers Region. One of the mostly widely used and abused substances in the region is alcohol. Approximately 24% of adults reported excessive drinking in the past 30 days.

Mental illness and misuse of drugs and alcohol frequently occur together. Drug and alcohol misuse can sometimes worsen underlying mental illnesses, both during acute intoxication and during withdrawal from a substance. The fact that mental health and substance abuse are often linked led the Health Council to select both of these issues as a single priority area of need.

Oral Health

Oral health impacts all aspect of our lives but is often taken for granted or not considered to be as important as other health promotion practices. The mouth allows for a glimpse into one's overall health. It can show signs of nutritional deficiencies or general infection. Systemic diseases (those impacting the entire body) may first become apparent because of mouth lesions or other oral problems. Poor oral health can also lead to systemic diseases, such as cardiovascular disease, low birth weight, premature birth, diabetes, osteoporosis, and Alzheimer's disease. In 2014, 26% of Wisconsin Great Rivers Region adults reported not receiving a dental visit in the past twelve months. In the COMPASS 2012 Report, oral health was seen as an emerging health issue. Due to the lack of improvements in the number of providers offering low-cost services and the impact this can have on one's life, oral health was determined to be a high priority issue.

HEALTH HIGHLIGHTS | COMPASS NOW 2015 RANDOM HOUSEHOLD SURVEY

- Approximately 14% of respondents rated access to dental care as "fair or poor."
- Overall, 36% of respondents rated their ability to pay for dental care as "fair or poor."
- 23% of respondents rated opportunities for physical activity for adults as "fair or poor."
- 7% of respondents rated their overall mental health as "fair or poor," 13% rated access to mental health care as "fair or poor," and 39% rated their ability to pay for mental health care as "fair or poor."



14 | COMMUNITY

Photo by: Rachel Hoffmann & Jalin Lutze

A COMMUNITY PROFILE OF THE GREAT RIVERS REGION

Introduction

Residents of the Great Rivers Region are fortunate to live in an area with abundant natural resources, including lakes, rivers, wetlands, forests, and scenic bluffs. The region also offers rural areas with year-round recreation opportunities, such as hunting, skiing, fishing, and biking; as well as vibrant urban cities and villages with cultural opportunities, such as theaters, galleries, museums, and arts. Beyond the physical aspects of the area, residents also benefit from a strong sense of community. Cohesiveness, a sense of belonging, and shared ideals build a spirit of community that enhances society as a whole.

This portion of the COMPASS NOW Report offers a snapshot of the Great Rivers Region through a discussion of several factors related to community, the environment, and quality of life. The purpose of this profile is to highlight key indicators and present resident perceptions on a variety of issues facing our community, including the quality of the natural and built environment, public safety, care for vulnerable populations, and opportunities for cultural and leisure activities.

How do people rate their community as a place to live?

In the COMPASS NOW 2015 Random Household Survey, residents of each county were asked to rate their community as a place to live (see **Figure 1**). Overall, 89% of respondents rated their community as good or excellent. La Crosse, Vernon, and Houston Counties rated their community higher than Monroe and Trempealeau respondents. Many factors or community traits can affect how residents rate the overall quality of their community. The quality of the environment, services available to protect or assist citizens in their daily life, feeling safe, having opportunities to be entertained, having a sense of belonging, and knowing that people care for you can all contribute to a higher sense of a quality community.



Figure 1: The Community as a Place to Live

Source: COMPASS NOW 2015 Random Household Survey

More than two-thirds of respondents rated their community as excellent or good with regard to being a place where all people are treated respectfully, regardless of their race, culture, religion, gender, sexual orientation, income level or disability. However, just over 43% of respondents rated their community as fair or poor with regards to being a place where people of different cultural, racial, and ethnic backgrounds were included in decision-making (**Figure 2**). This suggests a need to further address issues of diversity and equality in our communities.

COMPASS NOW 2015

Figure 2: The Community as a Place that Respects Diversity



Quality of the Environment

Clean air is essential to our health and well-being, and the air we breathe impacts our quality of life. Air quality standards determined by the Federal Environmental Protection Agency (EPA) and Minnesota and Wisconsin Department of Natural Resources (DNR) help protect the public from high concentrations of air pollutants that can impact human health. Ozone, particulate matter, and sulfur dioxide contaminants are all well within standards in all five counties, and rate as some of the highest quality numbers in Wisconsin and Minnesota. In addition, all counties within the Great Rivers Region had fewer asthma-related ER visits than the state averages.

Water pollution degrades surface waters, making them unsafe for drinking, fishing, swimming, and other activities. Water pollution is monitored and controlled by regulating sources that discharge pollutants into waters of the United States. The EPA sets the discharge limits but also delegates regulatory authority to states that can then issue their own permits and set discharge limits that are at least as stringent as the EPAs. Many municipalities in the region are attempting to improve their stormwater runoff quality by implementing best management practices.

River, lake and stream water quality can impact the health, recreational interests, tourism, economy, and overall quality of life of an area's residents. States are responsible for listing waters that are impaired, not meeting their designated uses (fishing, swimming) due to pollutants, and submitting the lists to the EPA for review and approval.

All **municipal water systems** in the Great Rivers Region use groundwater as their source. Each municipality provides some level of treatment to the water before it reaches the public for use. Each community must test their drinking water periodically for various parameters, including inorganic minerals, man-made organic compounds, and bacteriological contaminants. Each of these water supply systems must meet EPA and Wisconsin or Minnesota DNR water quality standards. Within the Great Rivers Region, there are 47 municipal water systems that provide drinking water to residents. All 47 municipal water systems use chlorine to keep the water biologically safe throughout the distribution system. Other chemical treatments vary by county or municipality.

Because of the rural nature of the counties located in the Great Rivers Region, many residents rely on **private wells** to provide water for household use. The only way to determine the safety of the water for human or

livestock consumption is to have the water tested by the well user and sent to a certified laboratory in the region for analysis. There are a number of different reasons why private wells may become contaminated or observe changes in water quality. Some are due to natural causes, but many are caused by human activity. Because groundwater is actually precipitation that has infiltrated into the soil and rock, what we do on the land surface can often have a large effect on the quality of our groundwater resource and private wells.

The amount of **waste** a community produces can have a huge impact on the natural environment and the quality of life. Medication disposal is an emerging and complex issue. County health departments, in conjunction with county sheriffs and waste management departments, organize drug round-up days to assist in the collection of unused and expired over-the-counter and prescription drugs. Regulations imposed by the Drug Enforcement Agency limit the collection of controlled substances such as Vicodin, Oxycontin, Ritalin, and Valium, which are often the most dangerous to have in the home. The Heroin Task Force, established in La Crosse County in 2013, put up seven medication drop boxes that have diverted over 1,200 pounds of medications from local waste streams, also preventing these drugs from potential abuse. Between the medication drop boxes and other focused community efforts, there were over 7,000 pounds of prescription medications collected in 2015 alone.

Today's modern landfills are designed with environmental controls and must meet the DNR requirements. La Crosse County has both a waste-to-energy plant and a sanitary landfill. Most waste is taken to Xcel Energy's waste-to-energy plant, where it is burned to create energy. The plant processes more than 100,000 tons of waste per year. In 2013, nearly 57,511 tons – or 35.3% – of materials were separated from the waste stream and beneficially re-used. Large items are taken to the landfill, which spans 25 acres and can hold 1.8 million cubic yards of refuse. Houston County and part of Trempealeau County also use the waste-to-energy plant, and the La Crosse County Landfill. La Crosse County has a Household Hazardous Waste Facility where residents and businesses can take paint, batteries, chemicals, and electronic waste. La Crosse County's landfill receives more waste than any other county in the region, largely because of the industries located in the county, and the greater population. At current disposal rates, the landfill can continue to accept waste for approximately 30 more years.

How do people rate the quality of the environment?

Respondents of the COMPASS NOW 2015 Random Household Survey were asked to rate the quality of water in our rivers and lakes. The results can be found in **Figure 3**. Almost 65% of respondents said the quality of water in lakes and rivers was excellent or good.



Figure 3: Quality of Water in Rivers and Lakes

Efforts to protect the environment

Landfill waste is an inefficient use of resources, and since there is no national law that mandates **recycling**, state and local governments often introduce recycling requirements. Problematic recyclable materials include appliances, tires, batteries (lead acid), used oil, oil filters, fluorescent and HID lamps, and antifreeze. Non-problematic recyclable materials include textiles, cardboard, paper, aluminum, glass, plastic, carpet, pallets, latex paint, and organics.

Finding **alternative sources of energy** is a trend that is gaining momentum in the Great Rivers Region. Alternative, sustainable, or renewable energy is defined as generating energy in ways that does not use up natural resources or harm the environment. The most common forms of alternative energy development in our region are solar energy, wind energy, and biogas digestion (the conversion of methane gas into energy). These strategies both protect the environment and cut expenses for municipalities and businesses by becoming less dependent on electricity. The state of Wisconsin has registered and has partially funded over 2,200 projects since 2002 in the areas of biogas, biomass, solar electric, solar hot water, and wind projects.

Wind turbines or wind farms are emerging in the Great Rivers Region. Wind passing over a turbine creates rotary motion that turns an electric generator and creates electricity. While wind energy is clean, non-polluting, and non-depletable, the location of turbines requires careful consideration, requiring high open land where the winds are unimpeded by trees and buildings. Zoning and noise are other issues that require consideration. Despite this, in 2010, there were 104 business and residential wind energy projects listed on the Wisconsin's Focus on Energy website, including projects in Monroe and Vernon Counties. Since 2000, utility-scale wind generation in Wisconsin has grown by over 124%.

Solar energy is the conversion of light from the sun to electricity using photovoltaic (PV) cells. As light strikes the PV cell, it creates an electrical potential that generates a current of electricity. Even though there are many cloudy days in the upper Midwest, solar energy can still be a viable source of electricity. Wisconsin's Focus on Energy website identified over 1,000 solar electric and 970 solar hot water projects funded in the state over the past eight years. Businesses across the Great Rivers Region, particularly in La Crosse and Vernon Counties, are adding solar panels to building projects to assist in heating water, building or converting the energy into electricity.

Gundersen Health System began a project in 2009 to convert **waste biogas** from City Brewing Company in La Crosse into electricity. In addition, they partnered with the La Crosse County Landfill on a project that converts waste biogas created from the landfill and turns it into clean electricity that is sent to the power grid. The engine also creates heat used to warm buildings and water on the Onalaska campus, and has made that campus 100% energy independent.

Communities and businesses in the Great Rivers Region are also focused on **energy efficiency**. This would include using the least amount of energy, for example, updating to Energy Star appliances or ensuring that energy is not wasted by poor or outdated construction. Many new buildings in the Great Rivers Region are receiving LEED certification. LEED, or Leadership in Energy and Environmental Design, is an internationally recognized green building certification system. "LEED promotes sustainable building and development practices through a suite of rating systems that recognize projects that implement strategies for better environmental and health performance ¹."

Respondents of the COMPASS NOW 2015 Random Household Survey were asked to rate efforts in our community to protect the environment. The results are shown in **Figure 4**. For the entire region, 65% of community respondents felt their community was doing a good or excellent job in this area, while 63.2% of Trempealeau County respondents rated their county's efforts as fair/poor. La Crosse County respondents rated environmental protection as excellent more often than other counties.



Figure 4: Efforts to Protect the Environment

Source: COMPASS NOW 2015 Random Household Survey

The Built Environment

The term **built environment** refers to "the human-made surroundings that provide the setting for human activity, ranging in scale from personal shelter and buildings to neighborhoods and cities that can often include their supporting infrastructure, such as water supply or energy networks²." It is typically those community assets that planning commissions and zoning authorities have concerned themselves with for many years. However, more recent attention is being paid to the built environment, as research shows that it plays a huge role in the overall health and quality of life of the population. Components of built environment include the transportation system, neighborhood and housing developments, roads and bike paths, and availability of healthy food.

Transportation planning is assessed and coordinated by Regional Planning Commissions (RPC) and Metropolitan Planning Organizations (MPO). Short and long-range Metropolitan Transportation Plans have been developed for areas of the Great Rivers Region³. The La Crosse Area Planning Committee (LAPC) has been designated by the governors of Wisconsin and Minnesota as the MPO to perform transportation planning activities for most of La Crosse and Houston Counties.

In 2008, the Mississippi River RPC developed the "Regional Coordinated Public Transit-Human Services Transportation Plan⁴." This plan summarized transportation for La Crosse, Monroe, Trempealeau and Vernon Counties. Overall, the Great Rivers Region is served by many forms of transportation. The region, for the most part, is very rural, and providing transportation services to a rural community is challenging and expensive. In the region, few existing services are coordinated across county boundaries. Some informal cooperation between agencies has taken place but with minimal success. The MRRPC transportation plan summarized the largest transportation issues that are needed in the future to meet the increasing transportation needs of the region's population. They identified the following challenges:

- The homeless population is growing and lacks the ability to pay for a transportation pass.
- There is a lack of appropriate reimbursement for transportation to individuals who are on Medical Assistance.
- There is a negative impact of rising fuel costs on taxis and other forms of transportation, all of which become inaccessible for many residents due to the cost.
- There is a need for more wheelchair spaces on mini-buses.
- A more coordinated effort of informing people about transportation services available is needed.
- There are spatial mismatches. Many people, such as retail and warehouse workers, need transportation to and from work during hours when there may be limited services available.
- There is a lack of awareness by the general public and employers of transportation needs for low income individuals.
- Literacy is a problem for some populations that need transportation services.

There are general transportation fixed route services connecting areas of La Crosse, La Crescent and Onalaska. The Onalaska/Holmen/West Salem Public Transit (OHWSPT) is a demand-response, door-to-door public transportation system serving the citizens of the city of Onalaska and the villages of Holmen and West Salem. In 2009, the La Crosse County Aging Unit contracted with a third party to provide shared-ride taxi service to any resident in the town of Holland, the village of Bangor, and the village of Rockland. Find-A-Ride is a grant-funded transportation referral service administered by the La Crosse County Aging Unit. The service currently helps travelers connect to transportation services in La Crosse County, but plans are being made to do the same in Monroe, Trempealeau, and Vernon Counties in Wisconsin, as well as in the southeast portion of Minnesota and the northeast portion of Iowa. Additional public transit services available in the planning area include Semcac and the "33 Express." The aging unit provides transportation services to the elderly (60 years and older) and adults with disabilities throughout La Crosse County through the La Crosse County Minibus, and the Volunteer Driver Program (VDP). Several not-for-profit organizations and churches also provide some transportation services for their customers/clients.

According to data from the U.S. Census, the main method of commuting to work is driving a car alone. See **Table 1**. With increasing fuel prices and increased unemployment and poverty, transportation can provide a significant financial challenge. In Spring 2009, *Active Living La Crescent* conducted a survey of La Crescent residents to measure knowledge, attitudes, and behaviors related to active living and community design⁵. The survey revealed that 39% of the respondents walked or biked for functional purposes, and 3% walked or biked to work. More than half of the respondents stated they would be more active if bike facilities were available.

Table 1: Means of Transportation to Work (2009-2013)							
La Crosse Monroe Trempealeau Vernon Houston							
Drove Alone	87%	76%	81%	75.5%	80%		
Carpooled	10%	9.5%	8.5%	23.5%	8%		
Public	2%	14%	0.5%	0.5%	11%		
Other	1%	0.5%	10%	0.5%	1%		
Source: U.S. Census, Commuting (Journey to Work) Worker Flows, 2009-2013							

Complete streets is a policy that divides transportation dollars so that alternative transportation options are represented in any design, reconstruction or improving of roadways. This policy enables access and safety measures for all ages and abilities for all modes of transportation including auto, bicyclists, pedestrians, mass transit, and rail. The movement is an attempt to diversify the dependence of a single-use transportation system. The benefits of a complete streets policy include improved safety, encouragement of walking and bicycling for people of all ages, increased transportation capacity, and improved air quality⁶. A complete streets policy was passed in La Crosse County and several municipalities within the county in 2011. Although Complete Streets is funded in the Wisconsin state budget, there are currently efforts to repeal or de-fund the policy. In 2013, the Bicycle Federation of Wisconsin awarded La Crosse Silver-Level designation as a Bicycle Friendly Community (BFC) and named several Bicycle-Friendly Businesses (BFB). La Crosse now has the largest number of BFB's of any city in Wisconsin. The city of Onalaska received a Bronze-Level BFC designation, recognizing its commitment to investing in bicycling promotion, education programs, infrastructure, and pro-bicycling policies.

In addition to transportation and accessibility, the built environment is an important indicator of the **availability of healthy foods**. Farmers markets and community-supported agriculture (CSA) are sources of fresh foods in our community. In recent years, the Cameron Street Farmers Market in the city of La Crosse started accepting debit and Electronic Benefit Transfer cards (EBT), also known as "food stamps," for those enrolled in the Supplemental Nutrition Assistance Program (SNAP). This is a step forward in making healthy foods more affordable for community members enrolled in the SNAP program by allowing them to purchase local, organic, fresh, and seasonal foods.

The U.S. Census Bureau reported that, in 2010, between 10% and 21% of the Great Rivers Region had low food access. However, this range was still lower than both Wisconsin and Minnesota state averages of 23% and 31%. Research has shown that health is significantly poorer in areas where residents have poor-to-little access to healthy food. **Food deserts** are communities, particularly low-income areas, in which residents do not live in close proximity to affordable and healthy food retailers. Healthy food options in these communities are hard to find or are unaffordable. There are food deserts in urban, rural and tribal communities. Data from the U.S. Department of Agriculture's website shows food deserts exist in much of Vernon and Monroe Counties, and in a small area in the city of La Crosse.

How do people rate the built environment?

Respondents of the COMPASS NOW 2015 Random Household Survey were asked to rate the quality of several components of the built environment in their community. **Figure 5** shows the average score by county. La Crosse County respondents gave the highest average score of 2.71 out of 4 (with 4 being excellent). Overall, 14.4% of Great Rivers Region respondents rated bike routes as excellent, while 45.7% rated them as fair/poor.

Figure 5: Availability of Safe Bike Routes to School or Work, Mean Score by County and Overall Region Rating by Percent

Safe Bike Routes to School or Work: **Median Score** 2.71 2.46 2.43 2.38 2.35 1.97 La CHOSSE Trempealeau Montoe Houston Region Vernon





Scale: 1=Poor, 2=Fair, 3=Good, 4=Excellent

Source: COMPASS NOW 2015 Random Household Survey

Figure 6 shows how respondents rated the accessibility of convenient public transportation. La Crosse County respondents scored this the highest, while Trempealeau County rated the accessibility of public transportation lowest, at 1.52 points out of 4. Overall, only 10% of respondents rated this as excellent, while 44% rated public transportation accessibility as fair/poor. This question did not apply to 13% of respondents.

Figure 6: Accessibility of Convenient Public Transportation, Average Score by County and Overall Region by Percent







Scale: 1=Poor, 2=Fair, 3=Good, 4=Excellent

Source: COMPASS NOW 2015 Random Household Survey

Figure 7 shows how COMPASS NOW 2015 respondents rated their access to healthy food choices. La Crosse County respondents rated this highest on average, with a score of 3.48 points out of 4. In general, 88% of Great Rivers Region respondents rated access to healthy food choices as good or excellent.



Figure 7: Access to Healthy Food Choices

The safety of our communities

There are several ways to examine the safety of our communities. We can examine property crime rates or person-to-person crime rates. Deterrence to crime based on law enforcement presence is also critical. How safe we feel our community is and how much we trust one another to watch out for each other are also important when considering public safety. **Property crimes**, or property offenses, include burglary, theft, arson, motor vehicle theft, and criminal damage to property. These types of crimes do not involve face-toface confrontation between a perpetrator and a victim. Crime rate levels are dependent upon the willingness of victims to report crimes and are generally higher in more populated areas. Table 2 shows the number of property offenses in the Great Rivers Region from 2008 to 2012. Houston County saw the largest decrease from 207 total property offenses in 2008 to only 48 in 2012.

Source: COMPASS NOW 2015 Random Household Survey

Type of Offense and Year	La Crosse	Monroe	Trempealeau	Vernon	Houston
Total Property Crimes					
2008	3,056	955	326	319	207
2009	3,073	599	361	329	187
2010	2,799	1,026	399	256	128
2011	2,880	855	290	313	81
2012	3,181	1,130	298	261	48
Burglary			· · ·		
2008	462	187	66	72	45
2009	522	82	73	79	53
2010	531	168	102	67	24
2011	552	188	70	100	14
2012	656	175	68	56	12
Theft					
2008	2,462	728	238	217	151
2009	2,430	507	268	236	129
2010	2,157	813	280	173	46
2011	2,225	634	212	202	62
2012	2,449	917	221	194	32
Motor Vehicle Theft					•
2008	119	35	22	30	11
2009	108	7	20	11	4
2010	101	40	17	15	58
2011	99	32	8	10	4
2012	73	31	9	10	4
Arson					
2008	13	5	0	0	0
2009	13	3	0	3	1
2010	10	5	0	1	0
2011	4	1	0	1	1
2012	3	7	0	1	0

Law Enforcement Network, Crime in Wisconsin Report for years 2008 through 2013

Violent crimes involve face-to-face confrontations between a victim and a perpetrator. Violent crime offenses include murder, non-negligent manslaughter, forcible rape, robbery, and aggravated assault. Violent crimes can be committed with or without the use of a weapon. Similar to property crime, violent crimes are more common in more heavily populated areas, as seen when comparing La Crosse County to the rest of the Great Rivers Region (see **Figure 8**). The state of Minnesota categorizes violent crimes slightly differently from Wisconsin, which helps explain why much smaller Houston County has a comparable or higher violent crime rate than La Crosse County in most years. In general, counties in the Great Rivers Region have lower violent crime rates than both state averages.



*The state of Minnesota categorizes violent crimes slightly differently than Wisconsin, which may explain why Houston County has a comparable or higher rate than La Crosse County.
Sexual assault takes on many forms, including attacks such as rape or attempted rape, as well as any unwanted sexual contact, or threats. Some types of sexual acts which fall under the category of sexual assault include forced sexual intercourse (rape), sodomy (oral or anal sexual acts), child molestation, incest, fondling and attempted rape. Sexual assault in any form is often a devastating crime. Assailants can be strangers, acquaintances, friends, or family members. The National Institute of Justice estimates that 40-50% of perpetrators are sexual partners of the victim. Moreover, the National Crime Victimization Study: 2009-2013 Report, conducted by the U.S. Department of Justice, reported that 82% of all sexual assaults are conducted by someone the victim knows. Sexual assault is the most under-reported crime in America. Many factors contribute to under-reporting including shame and embarrassment, self-blame, fear of media exposure, fear of further injury or retaliation, and fear of a legal system that often puts the victim's behavior and history on trial. Forcible fondling is consistently the most common offense type. Table 3 shows the sexual assault rates in Wisconsin between 2006 and 2010.

Table 3: Sexual Assault Rates, Wisconsin (2006-2010)						
Year Rate per 100,000 population % Chang						
2006	95.1	N/A				
2007	92.5	+2.7%				
2008	82.6	-0.7%				
2009	82.2	-0.5%				
2010 85.9 +4.5%						
	n Sexual Assaults in Wisconsin Report, fressault rate calculated using population d	-				

Domestic abuse is defined by Wisconsin Statutes, s. 968.075, as the intentional infliction of physical pain, injury or illness, intentional impairment of physical condition, sexual assault, or a physical act that causes the other person to reasonably fear that any of these actions will occur. Domestic abuse applies to acts engaged in by an adult person against his or her spouse, former spouse, an adult with whom the person resides or formerly resided, or an adult with whom the person has a child in common. Domestic abuse can include physical, sexual, emotional, economic or psychological actions or threats of actions that influence an intimate partner. In 2012, there were 28,729 domestic abuse incidents reported to law enforcement and referred to Wisconsin district attorneys' offices. In 2011, Minnesota District Courts handled 27,288 domestic violence cases.

Sex offenders pose an ongoing risk of engaging in sex offenses even after being released from incarceration or commitment. By law, persons convicted of a sex offense have a reduced expectation of privacy because of the public's interest in safety. Sex offender registries publish the residential address of sex offenders under supervision and following the expiration of their sentence⁸. The registries serve as a means of monitoring and tracking the whereabouts of sex offenders in the community. The Wisconsin and Minnesota Department of Corrections maintain sex offender registries. The state of Wisconsin ranks fifth in the country for the highest number of sex offenders per population, while Minnesota has the least number of sex offenders of any state in the nation. **Table 4** shows the number of sex offenders in the Great Rivers Region. La Crosse County has the highest rate of sexual offenders, while Vernon County has the lowest.

Table 4: Number and Rate of Sex Offenders in the Region							
County	Number of Registered Sex Offenders	Rate of Sex Offenders per 10,000 Population					
La Crosse	279	30.6					
Monroe	53	16.1					
Trempealeau	27	12.4					
Vernon	3	1.4					
Houston 9 6.2							
Source: Wisconsin Department of Correction, Sex Offenders Registry; Minnesota Department of Corrections, Level 3 Predatory Offenders. Rate calculations based on 2010 U.S. Census data.							

Rates of traffic crash fatalities for Great Rivers Region residents from 2010-2014 are shown in **Table 5**. A traffic crash involves at least one motor vehicle and results in an injury or death to any person or damage to any property. Road traffic crashes are responsible for more harm than all other forms of transportation combined. Traffic crashes are generally placed into categories such as fatal, injury, and property damage. Traffic crashes are caused by many things, including driver fatigue, driver intoxication, bad weather events, failure of brake or steering systems, slow driver reaction-time, and roadway obstructions. In total, there were 24 traffic crash fatalities in the Great Rivers Region in 2014.

Table 5: Traffic Crash Fatalities, 2010-2014									
County	County 2010 2011 2012 2013 2014								
La Crosse	6	17	9	5	8				
Monroe	7	2	4	7	4				
Trempealeau	5	7	2	4	7				
Vernon	3	7	10	4	5				
Houston	1	1	1	2	0				
Source: Wi	sconsin Departn	nent of Transport	ation; Minnesota	a Department of	Safety				

How concerned are residents about safety?

In the COMPASS NOW 2015 Random Household Survey, residents were asked to rate a series of 18 concerns in the community. These results are shown in **Figure 9**. Of the concerns related to issues within the Community section, illegal drug use, bullying, prescription drug misuse, over-the-counter drug misuse, and domestic abuse, child abuse, and elder abuse were rated in the top half.



Figure 9: Rating of Community Concerns

Scale: No Concern=1; Very Concerned=4 Source: COMPASS NOW 2015 Random Household Survey

Table 6 shows a comparison of issues by county. Illegal drug use is the top rated concern by all counties. Alcohol use is second for La Crosse and Vernon Counties. Houston and Trempealeau Counties ranked identify theft as their second highest concern. Monroe County ranked prescription drug misuse as their second highest concern. The risk of foreclosure or bankruptcy is the lowest rated concern for all counties. COMMUNITY

	Table 6: Ranking of Community Concerns by County							
Rank	La Crosse	Monroe	Trempealeau	Vernon	Houston			
1	Illegal Drug Use	Illegal Drug Use	Illegal Drug Use	Illegal Drug Use	Illegal Drug Use			
2	Alcohol Use	Prescription Drug Misuse	Bullying/Identity Theft*	Alcohol Use	Bullying			
3	Prescription Drug Misuse	Alcohol Use	Bullying/Identity Theft*	Obesity	Identity Theft			
4	Identity Theft	Identity Theft	Funding for Schools	Identity Theft	Funding for Schools			
5	Bullying	Bullying	Obesity	Bullying	Alcohol Use			
6	Over-the Counter Drug Misuse	Over-the-Counter Drug Misuse	Alcohol Use	Funding for Schools	Obesity			
7	Domestic Abuse, Child Abuse, Elder Abuse	Domestic Abuse, Child Abuse, Elder Abuse	Domestic Abuse, Child Abuse, Elder Abuse	Domestic Abuse, Child Abuse, Elder Abuse	Domestic Abuse, Child Abuse, Elder Abuse			
8	Obesity	Obesity	Suicide	Tobacco Use	Suicide			
9	Funding for Schools	Funding for Schools	Tobacco Use	Prescription Drug Misuse	Over-the-Counter Drug Misuse			
10	Hunger	Sexual Abuse and Sexual Violence	Prescription Drug Misuse	Over-the-Counter Drug Misuse	Tobacco Use			
11	Sexual Abuse and Sexual Violence	Tobacco Use	Financial Problems Experienced by Local Governments	Sexual Abuse and Sexual Violence	Prescription Drug Misuse			
12	Suicide	Financial Problems Experienced by Local Governments	Over-the-Counter Drug Misuse	Hunger	Hunger			
13	Tobacco Use	Hunger	Sexual Abuse and Sexual Violence	Financial Problems Experienced by Local Governments	Financial Problems Experienced by Local Governments			
14	Financial Problems Experienced by Local Governments	Suicide	Hunger	Suicide	Sexual Abuse and Sexual Violence			
15	Gambling	Gambling	Gambling	Gambling	Excessive Personal Debt			
16	Risk of Losing Your Job	Excessive Personal Debt	Risk of Losing Your Job	Excessive Personal Debt	Gambling			
17	Excessive Personal Debt	Risk of Losing Your Job	Excessive Personal Debt	Risk of Losing Your Job	Risk of Losing Your Job			
18	Risk of Foreclosure and Bankruptcy	Risk of Foreclosure and Bankruptcy	Risk of Foreclosure and Bankruptcy	Risk of Foreclosure and Bankruptcy	Risk of Foreclosure and Bankruptcy			
	Source: COMPASS NOW 2015 Random Household Survey *Bullying and Identity Theft scored the same in Trempealeau County responses; therefore, they are listed in both the second and third place ranking.							

How people rate the safety of the community

Respondents of the COMPASS NOW 2015 Random Household Survey were asked to rate the safety of their community, including the quality of emergency and law enforcement services, safety of schools and neighborhoods, the community's ability to respond to safety threats, and overall efforts to prevent crime. **Figure 10** shows these details. Both safety of schools and safety of neighborhoods scored the highest. Efforts to prevent crime scored the lowest at 2.78 points out of a possible 4.



Figure 10: Rating of Quality of Public Safety Concerns

Care for Vulnerable Populations

Vulnerable populations include economically disadvantaged, racial and ethnic minorities, the uninsured, low-income children, elderly, and the homeless. A community can be evaluated on how it cares for these vulnerable populations. All people need a place to live and to call home.

A good quality of life depends on a housing supply that meets the demands of an increasing aging population. There are a variety of options for **senior living**. These can include senior apartments, a family household, living alone, and assisted living facilities. Independent living or senior apartments are designed specifically for independent senior adults who want to enjoy a lifestyle filled with recreational, educational, and social activities with other seniors. These facilities are designed for people who can live on their own but want the security and/or convenience of community living. Public housing authorities manage housing options for the elderly, as well for the disabled and low-income families. Limited options for a growing population often lead to housing projects losing their intended purpose. Assisted living facilities can be a freestanding part of a continuing care community that provides independent, assisted and nursing care affiliated with a nursing home. Assisted living facilities are often specialized services brought into independent retirement communities. It is difficult to gauge adequacy of housing opportunities in our communities since the occupancy rates can vary daily for some types of facility.

According the Bureau of Labor Statistics, about 43% of families had children under the age of 18 living with them. Although a variety of **child care** options exist, quality child care that is affordable may be difficult to find. The cost of child care varies depending on the type of child care setting, age, and number of children, and whether the childcare provider is certified, licensed, or unregulated. State government subsidies for

Scale: No Concern=1; Very Concerned=4 Source: COMPASS NOW 2015 Random Household Survey

regulated child care may be available for families with a gross income at or less than 185% of the poverty level. Childcare needs become more challenging and more costly for families with multiple children, and during summer months. Part-time child care can sometimes be difficult to find. There was a total of 5,580 licensed childcare slots in the Great Rivers Region in 2014. See **Table 7** for more.

Table 7: Number of Licensed Childcare Slots (2010-2014)									
County	County 2010 2011 2012 2013 2014								
La Crosse	3,832	4,263	4,317	4,052	4,140				
Monroe	649	673	731	642	580				
Trempealeau	577	614	552	522	536				
Vernon 537 345 356 340 324									
Source: KIDSCOUNT Data Center.									
	Но	ouston County da	ta was unavailab	le.					

Table 8 shows details related to the cost of child care in Wisconsin and Minnesota for 2012. Minnesota averages higher child care costs than the state of Wisconsin, most significantly for the cost of infant care.

Table 8: Annual Cost of Full-time Child Care in Wisconsin and Minnesota, 2012							
State	Number of Birth to 4-Year-Olds	Both Parents Working Full Time	Avg. Cost (Center), Infant	Avg. Cost (Center), 4-Year-Old	Avg. Cost (Childcare Center), Infant	Avg. Cost, (Family Childcare Center), 4-Year-Old	
Wisconsin	356,267	195,646	\$10,775	\$9,588	\$7,849	\$7,060	
Minnesota	5,279,601	210,497	\$13,579	\$10,470	\$7,686	\$6,947	
Source: Child Care Aware of America, Child Care in America, 2012 State Fact Sheets							

Abuse of Vulnerable Populations

Wisconsin law defines **elder abuse** as occurring when any person at or above the age of 60 has been subjected to any of the following four categories of abuse: physical abuse, material exploitation, neglect, and self-neglect. The National Center on Elder Abuse had expanded this to include sexual abuse, emotional abuse, and abandonment. Reporting elder abuse is voluntary and not required by medical professionals or other service providers. If an elderly person is legally competent, he or she may refuse an investigation. Shame, fear, and not knowing how to get help may result in an underreporting of elder abuse.

In the United States, the Centers for Disease Control and Prevention (CDC) and the Department of Children and Families (DCF) define **child maltreatment** as any act or series of acts of commission or omission by a parent or other caregiver that results in harm, potential for harm, or threat of harm to a child. Child abuse can occur in a child's home, or in the organizations, schools or communities the child interacts with. There are four major categories of child abuse: neglect, physical abuse, psychological/emotional abuse, and child sexual abuse.

The U.S. Administration for Children and Families reported that from 2008 to 2012, overall rates of victimization declined by 4.19%, from 9.5 to 9.2 per 1,000 children in the population. This results in an estimated 30,000 fewer victims in 2012 (686,000) compared with 2008 (716,000). **Figure 11** shows the number of child abuse and neglect reports per 1,000 people for the Great Rivers Region. La Crosse had the highest rates of child abuse and neglect reports; however, they were still lower than the state average.



Figure 11: Child Abuse and Neglect Reports (Rate per 1,000)

Source: The Annie E. Casey Foundation, KIDS Count Data Center. Minnesota and Houston data only include substantiated claims of abuse. Data for Minnesota and Houston was only available from 2011 and earlier.

Child abuse and neglect also make victims more susceptible to negative health outcomes later in life. The **Adverse Childhood Experiences (ACEs) Study** is one of the largest investigations ever conducted that assesses the associations between childhood maltreatment and later-life health and well-being. This study determined that certain negative experiences in childhood, including verbal and sexual abuse, separation or divorce of parents, living with a problem drinker or street drug user, not having enough to eat, and having a family member in prison, were correlated with a higher likelihood of developing negative health problems in adulthood, including alcoholism, depression, illicit drug use, adolescent pregnancy, and early initiation of smoking and sexual activity.

ACEs and their negative health impacts are reflected in many COMPASS NOW indicators such as rates of illegal drug use, domestic violence, and child abuse, as well as rates of chronic disease, obesity, smoking, and unhealthy behaviors. By exploring the root causes of both the ACEs themselves and their associated outcomes, and addressing them as a community, the Great Rivers Region can begin to impact the overall health of the community on a variety of fronts.

How people rate the care of vulnerable populations

Respondents of the COMPASS NOW 2015 Random Household Survey were asked to rate several items related to the community's care for vulnerable populations. These items included: a place that meets the needs of elderly, a place that meets the needs of persons with disabilities, availability of quality child care, ability to pay for quality child care, and efforts to prevent abuse or neglect. Overall, residents rated these items very similarly. **Figure 12** offers further details.


Figure 12: Rating of Community Concerns

Scale: No Concern=1; Very Concerned=4 Source: COMPASS NOW 2015 Random Household Survey

Opportunities to enhance culture/quality of life

Many of the qualities discussed in this report have an impact on the quality of life for citizens. In order for the community to attract citizens and keep them happy and thriving, it is important that the community offer a variety of cultural opportunities that can enhance quality of life.

In a society where lifelong learning is valued, public **libraries** play an important fundamental role. Public libraries provide educational and cultural opportunities for people of all ages. Libraries provide a variety of activities and a range of reading materials to accommodate diverse learners and learning styles. Libraries play an important role in supporting childhood education through creative and fun summer reading programs for children and young people. Public libraries also offer guidance and training in information search.

Funding for public libraries comes mainly from local, county, state, and federal sources. Adequate funding for public libraries enhances the quality of life in a community and also allows the library to offer programs, services, and updated collections. In challenging economic times, public libraries offer important cost saving services such as free internet and computer access and traditional circulated items such as books, DVDs, videos, and audiocassettes. Library services are difficult to measure, in part, because their benefits are often intangible. The amount of library materials circulated is an indication of utilization but does not fully measure library service usage.

Within the Great Rivers Region there are eight movie **theaters** and nine live theater venues for music, arts, and theater performances. In addition, most school districts have at least one theater performance each year, increasing the number of fine arts available to residents. The newest of these theaters is the Weber Center for Performing Arts, which had its grand opening in January 2013. The Weber Center is a collaborative venue, supporting the missions of La Crosse Community Theatre and Viterbo University. It serves as a performance and administrative center for La Crosse Community Theatre, providing opportunities for creativity and personal growth. It also serves as a performance and learning center expanding and advancing Viterbo's regional and national arts reputation. The American Alliance for Theatre and Education reports that participating in drama activities improves reading comprehension, both verbal and non-verbal, as well as communication skills⁹. Drama participants are also more likely to have higher rates of school attendance and less likely to drop out of school⁹.

Respondents of the COMPASS NOW Random Household Surveys were asked to rate several items related to the community's perception of leisure time opportunities in the community. **Figure 13** shows how Great Rivers Region respondents answered.



Figure 13: Availability of Leisure Time Opportunities

Source: COMPASS NOW 2015 Random Household Survey

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35 | EDUCATION

Photo by: Jordan Hyzer, Kenzie Kraus & Alecia Stevenson

AN EDUCATION PROFILE OF THE GREAT RIVERS REGION

Introduction

Education is important not only for professional development and advancement in the workforce, but it is an important indicator of the quality of life in a community. A community that provides access to a well-rounded education encourages the growth and development of its residents, giving them the tools to improve their prospects for a better life. Education is essential to economic growth and key to reducing poverty. Workers and community members with critical thinking skills can learn more quickly and communicate more effectively. Obtaining an education increases the opportunities for a longer, healthier life with higher lifetime earnings, and decreases the likelihood of homelessness, substance misuse, and financial instability.

This segment of the COMPASS NOW Report gives an overview of the education systems and their outcomes in the Great Rivers Region. The purpose of this profile is to highlight educational assets, current trends, and to present data and information regarding the numerous education-related challenges within our community.

Educational Needs

In the COMPASS NOW 2015 Random Household Survey, respondents from each county were asked to rate their community as a place that meets their family's educational needs. Overall, 71% of survey respondents gave an excellent or good rating to their community in this regard. This is down from the 2011 survey. **Figure 1** shows that a much larger percentage of La Crosse County residents rated their community as excellent in terms of meeting their educational needs than surrounding counties. There may be numerous reasons for this difference, including the wider variety of adult learning opportunities in La Crosse County. Many factors can affect how residents rate whether or not their community meets their educational needs. If we look at educational needs on a continuum of lifelong learning, the needs range from early pre-school through elementary, secondary, post-secondary, job training and professional development, and life and leisure enrichment.



Figure 1: A Place that Meets Your Family's Educational Needs

Learning Throughout Early Development

Child development refers to the changes that occur as a child grows and develops in relation to being physically healthy, mentally alert, emotionally sound, socially competent, and ready to learn¹. Research has shown that the first five years of life, especially the first three years, are critical to the development of a child's brain. These early experiences provide the base for the brain's organizational development and functioning throughout life¹. In addition, these experiences have direct impact on how children develop learning skills, along with social and emotional abilities. Children learn more quickly during these years than the other years in their lives. Love and nurturing during these years contribute to a sense of trust and security that can later translate into self-confidence¹. For optimal learning and growth, children benefit most from love, attention, encouragement, mental stimulation, and nutritious meals. Whether these learning experiences take place in formal or informal settings, quality of care during these early years has a direct impact on the quality of life during and after childhood. For families that enroll their children in child care, the Great Rivers Region has several rating programs that help parents choose a quality childcare facility.

YoungStar is a program of the Wisconsin Department of Children and Families that evaluates and rates the quality of care given by childcare providers, which helps parents choose the best child care for their kids; supports providers with tools and training to deliver high-quality early care; and sets a consistent standard for child care quality by using a 1- to 5-star rating system. In December of 2014, there was a total of 4,339 YoungStar-rated providers in the state of Wisconsin. Of those, 370 were 5-star providers².

The state of Minnesota offers **Parent Aware**, a voluntary star rating program that measures the quality of child care and early education programs throughout the state. Families can use these star ratings to help them identify childcare/early education providers who understand the latest best practices in early learning. In 2014, the Parent Aware Program of Minnesota included a total of 2,177 Parent Aware providers. More information regarding YoungStar and Parent Aware can be found in the COMPASS NOW 2015 Education Indicators.

Overall, 63.6% of the COMPASS NOW 2015 Random Household Survey respondents stated that they felt the early education opportunities in our community were good or excellent. More specifically, 55.9% of respondents stated that they felt the availability of birth-to-three education in our region was good or excellent. When looking specifically at respondents who are in childbearing years (21-50 years old), this number increases to over 86%.

Enrollment and School Funding

Enrollment in public schools is measured by counting the number of students enrolled in school on a particular day in September or October. In 2013, the Great Rivers Region had approximately **37,586** school aged students (PreK-12) in public schools, **3,451** students (K-12) in private schools, and **688** being homeschooled. Compared to the 2011 survey, this shows an increase in public school enrollment over other school choices. There are **27 public school districts** in the region with **119 public schools** and **46 private schools**.

Table 1 shows school enrollment by county for 2011 and 2013. Between these years, an increase in public school enrollment was seen in all counties except Trempealeau County, with most significant growth in Houston County. Private school enrollment varied by county, dropping most significantly in La Crosse County (4.32%). However, Monroe County experienced the largest increase in private school enrollment during this time (1.5%). Reporting of homeschooled students to the residential school district is required by the Wisconsin Department of Public Instruction. Amish schools are included in private school enrollment; however, their compliance with reporting varies. Homeschool enrollment dropped substantially in all Wisconsin counties of the Great Rivers Region in this two-year period.

Table 1: Public and Private School Enrollment									
	Public School Enrollment PK-12			Private School Enrollment PK-12			Homeschool Enrollment		
County	2011	2013	% Change	2011	2013	% Change	2011	2013	% Change
La Crosse	16,098	16,152	+0.34%	2,339	2,238	-4.32%	337	215	-36.2%
Monroe	7,046	7,006	-0.56%	668	678	+1.50%	293	189	-35.5%
Trempealeau	5,832	5,825	-0.12%	298	302	+1.34 %	152	99	-34.9%
Vernon	4,129	4,082	-1.14%	343	338	-1.46%	276	185	-33.0%
Houston 4,317 4,521 +4.73% 347 297 -14.4% N/A N/A N/A									
So	Sources: Wisconsin Department of Public Instruction, Minnesota Department of Education Information is reflective of 2011-2012 and 2013-2014 school years								

The public education system is a significant and essential investment in our communities. Providing sufficient resources to meet student needs is a constant and growing challenge for communities and school districts. Funding for public schools is set by a complex mechanism of state revenue limits, calculations of state aid, and local taxes. School districts may seek additional funds through a referendum. All levels of government – federal, state, and local – contribute to educational funding. Typically, state and local governments provide 44% each of all elementary and secondary funding for education. The federal government contributes approximately 12% of all direct expenditures³. Wisconsin has dramatically reduced the amount of state support for public schools in recent years. Between 2008 and 2015, the state cut support for investment in schools by 15% per student, which was a deeper cut than all but four other states. After a decade of cuts, the *Minnesota 2020 Report* shares how state aid is expected to jump by 7.8% per pupil. **Table 2** shows the percentage change in school aid to Wisconsin school districts from the 2012-2013 school year to the 2013-2014 school year.

Table 2: Percentage Change in State Aid Payments toWisconsin School Districts from 2012-2013 to 2013-2014					
School District	% Change				
Arcadia School District	+6.86%				
Bangor School District	-1.26%				
Blair-Taylor School District	-9.28%				
Caledonia Public School District	-1.68%				
Cashton School District	-2.00%				
De Soto Area School District	+16.23%				
Eleva-Strum School District	+6.36%				
Galesville-Ettrick-Trempealeau School District	+1.71%				
Hillsboro School District	-0.89%				
Holmen School District	-1.72%				
Houston Public School District	+0.89%				
Independence School District	-4.12%				
Kickapoo Area School District	-1.76%				
La Crescent-Hokah School District	-4.11%				
La Crosse School District	-5.45%				

La Farge School District	+21.21%				
Norwalk-Ontario-Wilton School District	+1.97%				
Onalaska School District	+0.06%				
Osseo-Fairchild School District	+0.34%				
Sparta Area School District	+3.46%				
Spring Grove School District	-12.00%				
Tomah Area School District	+0.75%				
Viroqua Area School District	+1.07%				
West Salem School District	-2.66%				
Westby Area School District	-2.74%				
Whitehall School District	+2.00%				
Source: Wisconsin Department Public Instruction					

The majority of school district expenses are instruction related, including teacher salaries and benefits, supplies, equipment, and textbooks. According to the National Center for Education Statistics, instruction related expenses made up approximately 64% of total expenditures during the 2011-2012 school year. Budget cuts to education impacts school staffing decisions, affordability of materials and technology, and professional development opportunities, and could result in cuts to courses. Budget cuts may also result in larger classes and fewer electives offerings.

Education administrators have a variety of measures to help identify the costs to educate a student each school year. **Total Current Educational Cost (TCEC)** attempts to identify overall instructional and instructional support service costs attributable to district resident students. It can generally be described as the cost of the district's General and Special Project funds, excluding transportation and facility acquisition expenditures; inter-fund transfers and revenues for instructional services the district provides to non-resident pupils such as tuition receipts, CESA (Cooperative Education Service Agency) and cooperative agreements; and state inter-district integration aid.

The **Total Education Cost (TEC)** is the TCEC plus transportation, expenditures for facility acquisitions charged to the General, Special Project, and Capital Expansion funds, and debt service principal and interest⁴. The TEC figure does not include the cost of food, or community service activities funded by fees. **Figure 2** shows the average TEC figures for each county along with state averages. During the 2013 academic year, TEC in the region ranged from \$9,710 in Houston County to \$12,231 in Vernon County.



In cooperation with the Wisconsin Association of School Business Officials Accounting Committee, the Department of Public Instruction (DPI) School Financial Services Team has developed several revenue benchmarks that can be used for informational and general analysis purposes. The **Comparative Cost per Member** can differ from one district to another and from one year to another. There may be several reasons for this variance – educational programming, pupil transportation requirements, increases or decreases in debt service expenditures, or having food and community service operations. **Figure 3** shows the average cost each county spent per member during that same year. This calculation is based on district resident pupil counts and does not reflect the actual number of pupils (resident and non-resident) in attendance in a district.



Source: Wisconsin Department of Public Instruction, Minnesota Department of Education

In the Great Rivers Region, approximately 13.8% of students were in an **Individualized Education Program** (IEP)⁵. Users of this program include students with autism, cognitive disabilities, emotional/behavioral disabilities, hearing impairments, orthopedic impairment, other health impairments, significant developmental delay, speech/language impairments, specific learning disabilities, traumatic brain injury, visual impairments, and the need for special education⁵. Public school districts are required to offer special education services for children ages 3-21. Expenses for services for students with severe and multiple disabilities are challenges for local school budgets.

Charter Schools and Alternative Education Programs

There is an increasing amount of choice in the Great Rivers Region when it comes to public education options. **Charter schools** are independent public schools that offer a choice to parents and students in the area of curriculum, teaching methodology, and classroom structure. Charter schools foster an environment of innovation and are created with the best elements of traditional public schools in mind. Each school is created through a contract or "charter" between the charter school body and the sponsoring school board. Charter schools employ licensed teachers, offer services to special needs students, and require students to take state assessment tests to assure academic accountability. Charter schools do not charge tuition. There are several charter schools in the Great Rivers Region. Laurel High School, Pleasant Ridge Elementary School, The School of Technology and Arts, Coulee Montessori Charter School, Monroe Alternative Charter School, Monroe Virtual Charter Middle School, Monroe Independent Virtual Charter High School, Viroqua Area Montessori School, and Youth Initiative High School are a few of the Wisconsin Charter schools within the Great Rivers Region. Houston County charter schools include La Crescent Montessori Academy and Ridgeway Community School.

School districts have also developed alternative education options focused on reaching **at-risk students** who were not succeeding in traditional school settings and are at-risk for not graduating. These schools may or may not be charter schools but all offer programs with a low student-to-teacher ratio, individualized instruction, and extra social support to create a positive learning atmosphere where students are more likely to succeed. Some of these schools include: Better Futures (Vernon County), Sparta Area Independent Learning School and the Robert Kupper Learning Center (Monroe County), Summit Learning Center (Houston County), and LaCrossroads (La Crosse County).

As another alternative to traditional K-12 education, some students are now able to participate in **online education**. Online education may offer flexibility for students, teachers, and parents, although its efficacy is still being tested. It can be an inexpensive supplement to existing curriculum. This method may offer more options for students as they explore what electives and career paths they are interested in. An example of an online school in the Great Rivers Region is the Minnesota Virtual Academy (MNVA), a K-12 online public school based in the Houston County School District that is one of the first statewide online programs in Minnesota. Since it was founded in 2002, it has developed over 130 courses, some of which include Advanced Placement (AP) courses and electives. Similar to some high schools in our region, students may earn college credit while attending. Wisconsin also has online school options. The Wisconsin Virtual School (WVS) partners with school districts throughout Wisconsin, including several in the Great Rivers Region, to offer online courses to middle and high school students. WVS has been operated out of CESA #9 since 2000 and has served over 25,000 students to date, with over half of Wisconsin's school districts participating in the program. The Wisconsin Department of Public Instruction has an agreement with the Wisconsin Virtual School to provide online courses and services to Wisconsin school districts as a partner in the Wisconsin Digital Learning Collaborative.

Early Childhood Education

Enrollment in school is mandated by law at the age of six. However, participation in high quality early childhood education before the age of five can have a positive influence on test scores, lower the rates of grade repetition and special education, and result in higher educational attainment⁶. Participation in early childhood is not mandated by law. Respondents of the COMPASS NOW 2015 Random Household Survey were asked to rate the availability of early education opportunities in their community. The results are shown in **Figure 4**.



Figure 4: Availability of Early Childhood Opportunities

Source: COMPASS NOW 2015 Random Household Survey

Nearly 64% of respondents rated the availability of early childhood opportunities as excellent or good; 8.6% (down from 12% in the 2011 survey) indicated the availability was fair or poor. Overall, the public preschool enrollment in the Great Rivers Region has increased or remained steady over the past five years. See **Figure 5**. All school districts in La Crosse, Monroe, Trempealeau, and Vernon Counties offer public preschool education. The structure of preschool programs varies throughout the region, with most districts offering a half-day schedule 4-5 days a week, and a few districts offering a full-day schedule 2-3 days a week.



Figure 5: 4K Enrollment

Not all preschool aged children have equal access to preschool education. Availability depends on location, cost, hours of operation, and numerous other variables. **Child Care Assistance Programs** are designed to assist income-eligible families in accessing quality child care by subsidizing a portion of their childcare costs. Minnesota's Child Care Assistance Program (CCAP) pays childcare costs for children up to age 12, and for children with special needs until age 14. Childcare costs may be paid for qualifying families while they go to work, look for work, or attend school. To qualify for CCAP, families must comply with child support enforcement if applicable for all children in the family. In 2014, Minnesota counties provided childcare assistance services for 30,339 children in an average month, with families receiving an average of \$1,276 per month⁷.

Wisconsin Shares Child Care Subsidy Program also helps families pay for child care. To be eligible, the family's gross monthly income must be equal to or less than 185-200% of the federal poverty level. Once that guideline is met, a parent or caregiver is able to enroll a child if they are participating in one of the following: unsubsidized work, high school, W-2 employment, approved employment skills training while employed in unsubsidized work, FoodShare Employment and Training (FSET) work search or work experience activities, or are a W-2 applicant participating in job search, training, or orientation activities⁸.

For those who do not qualify for financial assistance, cost can be a factor in deciding whether or not to take their child to preschool. For example, Houston County preschools charge anywhere from \$85 to \$195 per month. Some of Houston County's early childhood educational opportunities are offered through **Early Childhood Family Education**, which is open to all Minnesota families with children from birth to kindergarten entrance. The program is offered through Minnesota public school districts and is based on the idea that the family provides a child's first and most significant learning environment. ECFE provides transportation along regular school bus routes for participants when space is available, a reasonable sliding fee for participation in program including waived fees for those unable to pay, and home visits to families with multiple stresses (e.g.,no access to transportation, pregnant mothers on bedrest, first-time parents, families with several preschool-age children). In Houston County, Spring Grove works closely with the School District ECFE program.

Head Start is a publicly funded preschool option that provides low-income preschoolers with education, nutrition, health, and social services at community-based settings throughout the region. During the 2012-2013 program year, **596** children participated in Head Start in the Great Rivers Region, with **310** on waiting lists⁹. It is unknown whether the children on Head Start waiting lists are able to enroll in another preschool option or if they do not attend school at all. According to the U.S. Census, the number of families living in poverty in the Great Rivers Region has been rising since 2000. The largest increase was in Trempealeau County, where 4.9% of families were living in poverty in 2000, compared to 9.0% in 2012¹⁰. According to the 2009-2013 American Community Survey, 8.9% of the families in the Great Rivers Region live in poverty, and 14.6% of families with children under the age of 18 years old live in poverty. This number points to an increase in financially vulnerable populations in our community.

The Wisconsin Model Early Learning Standards (WMELS), developed by a partnership of the Department of Public Instruction, the Department of Health and Family Services, Head Start, Work Force Development, and the Early Childhood Collaborating Partners, provides a framework of developmental expectations for children from birth to first grade for families, professionals, and policy makers based on evidence-based research. The WMELS are intended to reflect a comprehensive approach to child development. However, 4K programs are not required to use the WMELS as a guideline, nor do the standards include benchmarks, a curriculum, or assessment tools. Apart from licensing requirements of childcare centers, preschool programs have the flexibility to design their curriculum based on their own adopted philosophy. That said, it is helpful for parents/guardians to research 4K programs before enrolling their child to ensure they agree with the program's vision, mission, and methods. **Screening and assessment** in early childcare environments can provide critical information to parents, caregivers and educators that can lead to identification, early intervention and improved outcomes for children, which allows teachers to teach more effectively and children to learn more successfully. Screening and assessment give teachers and parents a starting point for the child that makes it easier to measure how a student is progressing, if they are on track, or if they need extra help in certain areas. Programs such as birth-to-three are federally funded and mandated to provide services for children identified with disabilities and to coordinate with school districts for continuity and education planning. Although there are a number of early learning programs in the Great Rivers Region, one survey found that the use of developmental screening and assessment was inconsistent, and that barriers to assessment included lack of time, training, and assessment tools⁸.

What one considers to be key indicators for **school readiness** may vary greatly among parents, school districts, and states. Head Start defines school readiness as "children possessing the skills, knowledge, and attitudes necessary for success in school and later life learning." In 2007, Child Trends Data Bank's report *Early School Readiness: Indicators on Children and Youth* emphasized that school readiness is a multi-dimensional concept and that children who enter school with early skills, such as basic knowledge of math and reading, are more likely than their peers to experience later academic success, attain high levels of education, and secure employment¹¹. The National Education Goals Panel conceptualizes school readiness in five dimensions: physical well-being and motor development, social and emotional development, approaches to learning, language development (including early literacy), and cognition and general knowledge¹¹. **Table 3** summarizes a few key indicators that in a broader definition contribute to children's school readiness. The trends seen in the period 2008-2012 point to the challenges children face today and in the future.

Table 3: Comparison of School Readiness Factors by County 2009-2013								
County	Percent Uninsured 18 Years or Younger	Children Under 18 Living in Poverty	Free and Reduced Lunch	Percent of Births that were Teen Births	Births to Mothers Who Received Late/ Inadequate Prenatal Care			
La Crosse	2.6%	13.2%	30.9%	4.8%	77%			
Monroe	14.4%	22.3%	46.7%	6.2%	69%			
Trempealeau	9.4%	19.2%	40.7%	5.2%	68%			
Vernon	24.8%	21.3%	40.7%	3.6%	51%			
Houston	4.1%	16.1%	27.3%	N/A	N/A			

Source: U.S. Census Bureau, 2009-2013 5-Year American Community Survey; U.S. Department of Education's National Center for Education Statistics (NCES), Common Core of Data (CCD); 2000 U.S. Census, Summary File 3; 2010 U.S. Census Summary File 1; 2008-2012 U.S. Census American Community Survey (ACS); Kids Count, Annie E. Casey Foundation

The School Readiness Indicators Initiative started in 2005 and sought to develop a core set of indicators and found that school readiness needed to be more broadly defined than the knowledge of language and math. According to the Initiative, school readiness expectations should include not only all areas of child development: physical, cognitive, social, and emotional competence but also positive attitudes toward learning and community factors that influence children's learning. Children cannot enter school ready to learn unless their families and communities are also ready to provide an environment that is conducive to positive growth¹². Children who are unhealthy and experience barriers to accessing quality healthcare, or children who are hungry and live in a household where food security is tenuous, are likely to be less ready for school. Thus indicators such as percentage of children covered by health insurance, percentage of pregnant mothers accessing appropriate pre-natal care, household income, and percentage of children in poverty are as relevant to school readiness as basic measures of literacy and numeracy.

To ensure every child begins school on a path for success, the Minnesota Department of Education is revising a decade-long School Readiness Study: Developmental Assessment at Kindergarten Entrance. The purpose of the school readiness study is to assess entering kindergarten student proficiency across five domains of child development. The sample for the study is selected randomly and is large enough to ensure that the results are reliable and generalizable to the state population. The results of the study provide information on school readiness that can be fed back to parents, school teachers and administrators, childcare providers, policy makers, and the general public. During the 2012 assessment, 126 elementary schools participated, with a total of 7,539 children¹². This study was designed to capture a picture of the readiness of Minnesota children who are entering kindergarten and to track their readiness over time. The results from the 2012 study are summarized in Table 4. Students entering kindergarten in Wisconsin are assessed early in the school year in accordance with K-12 standards.

Table 4: 2012 Minnesota Kindergarten Readiness						
Child Development Domain	Percent Proficient					
Physical Development	73.3%					
The Arts	61.7%					
Personal & Social Development	60.3%					
Language & Literacy	60.2%					
Mathematical Thinking	57.6%					
Source: Minnesota Department of Education: School Readiness						
Note that categories are adjusted for stratified cluster sampling.						

4K-12 Education

The 2015 COMPASS NOW Random Household Survey asked respondents to rate the quality of the 4K-12 schools in their community, and results are shown below in Figure 6. Approximately 41% of respondents rated their 4K-12 schools as good and 32% rated schools as excellent.



Figure 6: Quality of 4K-12 Schools

There are several measures of student assessment that Wisconsin and Minnesota use to measure student attainment of subject-area proficiency. The Wisconsin Knowledge and Concepts Examination (WKCE) and the Minnesota Comprehensive Assessment (MCA) were developed by educators and designed to meet state and federal requirements and provide timely information that educators could use to inform

curricular and instructional decisions to improve student achievement. Administrators use assessment data as an accountability measure for school improvement. In addition to these state-developed standards, the Common Core State Standards Initiative is an effort to establish a shared set of clear educational standards for English language arts and mathematics that states can voluntarily adopt. Wisconsin adopted the Common Core State Standards for English language arts and mathematics in 2010, and Minnesota adopted the Common Core Standards for English language arts that same year. It is important to note that beginning with the 2012-2013 school year, the Wisconsin Department of Public Instruction had established performance standards (cut scores) for the WKCE reading and mathematics content areas to more closely align with national and international expectations of what is required to be college and career ready. The higher cut scores are comparable to the National Assessment of Educational Progress (NAEP) cut scores. Therefore, comparisons to previous years should not be made.

Reading proficiency is a key education indicator and the cornerstone of all learning. However, reading proficiency is consistently lower for students from low-income families and children of color¹³. In addition, there is a correlation between poverty, failure to read proficiently, and failure to graduate from high school¹³. The WKCE and MCA tests are administered to all students in grades 3-8 and grade 10. Figures 7 and 8 show the assessment scores for third and 10th grade reading from 2010-2012.

County averages of student scores show that a majority of students in the Great Rivers Region test similarly or higher than the rest of the state in both third and 10th grade. Since 2010, 10th grade reading test scores have increased in all five counties.



Figure 7: 3rd Grade Reading Results

Minnesota COMPASS, Minnesota Department of Education

Percent of 3rd graders who scored at or above proficient on the MCA-II test of Reading (Minnesota) and Percent of 3rd graders who scored at or above proficient on the WSAS test of Reading (Wisconsin). New standards in Reading were implemented in 2013 for both Minnesota and Wisconsin. Comparisons between years prior 2012 and after should not be made.



Mathematics proficiency is another key indicator of student achievement and is fundamental for daily functioning in our society. A study of high school females found that one difference between those who later dropped out of school and those who graduated was lower math scores among the former group¹⁴. The WKCE and MCA tests are administered to every student in grades 4-8 and grade 10 and 11. **Figures 9 and 10** show the assessment scores for fourth and 10th grade mathematics from 2012 to 2014.





Both fourth and 10th grade student reading score averages among the counties reflect that the majority of students test similarly or higher than state averages. Overall, a greater percentage of fourth grade students tested proficient or advanced in math than 10th grade students. High school students in both Wisconsin and Minnesota are required to complete at least three credits of math in order to graduate^{15,16}. Because of differences in curriculum, these scores should be compared at the school district level rather than the county level.

High school graduation rates are one measure of the state's elementary and secondary education system as well as the quality of the workforce. For most positions, employers require a diploma or the equivalent when hiring an employee. Lifetime earnings are higher (50-100% higher in lifetime income) and unemployment rates are lower for high school graduates¹⁷. High school graduates are also less likely to draw on state and federal income assistance programs and are less likely to be involved in the criminal system¹⁷.

Wisconsin and Minnesota rank as two of the highest states in the nation for graduation rates, with Wisconsin ranking third and Minnesota ranking seventh. Calculations for students who complete high school in an extended amount of time or receive high school equivalency diplomas are now available on the Wisconsin Department of Public Instruction and Minnesota Department of Education websites. County averages of **four-year graduation** rates in the Great Rivers Region ranged from **64-94%** for the 2012-2013 school year. Specific regional high school graduation rates can be found in **Figure 11**. All Wisconsin counties consistently scored higher than the Wisconsin state average; however, while the Minnesota state score average rose, Houston County average declined.

EDUCATION

	Figure 11. figh School Graduation Rates								
ion	100%								
% High School Completion	80%							- 1991 -	
ol Co	60%								
Scho	40%								
High	20%								
%	0%								
		La Crosse	Monroe	Trempealeau	Vernon	Wisconsin	Houston	Minnesota	
20	09-10	91.3%	90.3%	95.1%	89.8%	85.7%	77.2%	74.5%	
20	10-11	92.2%	90.3%	91.5%	90.2%	87.0%	72.3%	77.2%	
20	11-12	95.3%	93.3%	93.0%	96.1%	87.5%	69.5%	77.9%	
20	12-13	94.1%	93.3%	92.4%	91.8%	88.0%	64.7%	79.8%	
9	Source:	Wisconsin Depa	artment of Inst	truction; Minnes	ota Departme	nt of Education	, Minnesota Re	eport Card	
				ge of students wl	,	-	•		
				nct group of stud		-	-		
				raduation rate b			-		
tran	transfers into the cohort within the four year period minus transfers out of the cohort within the four year period.								

Figure 11: High School Graduation Rates

County graduation rates were calculated by averaging the completion rates of the school districts within each county. See Indicators for a specific list of school districts included in the data for each county.

The four-year rate is the percentage of students who complete within four years or less.

The **American College Test (ACT)** is designed to assess educational development and the ability to complete college level work. It is used nationally for college admissions and is one of the primary measures of college readiness. The ACT consists of four subject areas and a timed writing test. The 215-question, multiple-choice test covers English, mathematics, reading, science, and an optional writing section. It is an optional exam typically taken by college-bound students in their junior or senior years. The Scholastic Assessment Test (SAT), an alternative test that is reason-based instead of content-based, is required by some colleges.

Each portion of the ACT has a maximum score of 36. The composite score is the weighted average of the four (or five) subject-specific scores. In 2014, less than one-tenth of 1% of all students who took the ACT scored a perfect 36. Typically, students who take a rigorous college preparatory curriculum will score better on the ACT. Composite score averages are influenced by the percentage of students who opt to take the test – the greater the percentage, the lower the composite average. Students are allowed to retake the ACT, with only the most recent score being recorded¹⁸.

On average, 60-79% of graduating students in Wisconsin and Minnesota take the ACT. The ACT is not required for admission to two-year Minnesota and Wisconsin technical and career colleges. **Table 5** shows ACT scores for the Great Rivers Region for the past five years. Overall, students in the Great Rivers Region score similarly to the national average. Students in La Crosse County had the highest composite score in the region in 2013.

Table 5: Average ACT Scores (max. 36)								
County/Region	2009	2010	2011	2012	2013			
La Crosse	22.2	22.1	22.6	22.8	22.5			
Monroe	21.7	21.6	22.4	21.6	21.6			
Trempealeau	22.0	21.6	21.8	21.7	21.8			
Vernon	21.4	20.1	21.7	22.2	22.0			
WI State	22.3	22.1	22.2	22.1	22.2			
Houston	23.2	23.6	22.8	22.2	22.0			
MN State	22.7	22.9	22.9	22.8	23.0			
National	21.1	21.0	21.1	21.1	20.9			
Sou	ırce: Wisconsin Dep	partment of Instruc	tion, Minnesota De	partment of Educat	tion			

Student Services

Students come to school with basic needs, such as hunger, shelter, safety, or family support system, which can have a profound impact on the ability to be successful. It is also vital that students have a strong and positive relationship with at least one adult in their lives. This relationship helps children and teens develop high self-esteem, independence, and good decision-making skills. In one study of more than 3,300 teenagers, researchers found that teens who had the benefit of a mentor made significantly better choices about risky behaviors. These mentors can be parents, teachers, coaches, neighbors, ministers, or counselors¹⁹. Youth who work with a mentor are 27% less likely to start drinking and 46% less likely to use illegal drugs²⁰. Youth who have a mentor also show an overall reduction in depression symptoms²¹.

Some other examples of barriers to learning include mental illness, being uninsured, living in poverty, experiencing abuse, having a difficult home environment, and the use and/or abuse of drugs. Every two years a national survey of young people called the Youth Risk Behavior Survey (YRBS) is conducted by the CDC to monitor health risks. Between 2011 and 2013, students in grades 9-12 in the Great Rivers Region were surveyed using the YRBS and the Minnesota Student Survey. The results of the survey point to a number of alarming issues facing students today including **tobacco use**, **inhalant use**, **physical abuse by boyfriend or girlfriend**, **bullying on school property**, **electronic bullying**, **sexual activity**, and **attempting suicide**. These issues are discussed more extensively in the COMPASS Health profile but are worth mentioning here, as they affect education outcomes. **Table 6** summarizes YRBS findings on risky behaviors youth of the Great Rivers Region participate in.

Table 6: Select 2013 Youth Risk Behaviors								
YRBS Data	La Crosse	Monroe	Trempealeau	Vernon	WI	Houston		
	Tobacco Use							
Used tobacco products in past 30 days	19.8%	11.6%	10.2%	14.0%	8.0%	31.0%		
Smoked in past 30 days	13.5%	17.4%	12.6%	10.4%	12.0%	9.5%		
	Alcohol Use							
Binge drinking in past 30 days	15.8%	22.5%	16.5%	16.4%	18.4%	5.5%		
Drove after drinking in past 30 days	6.9%	8.8%	8.8%	7.6%	8.9%	N/A		

YRBS Data (cont.)	La Crosse	Monroe	Trempealeau	Vernon	WI	Houston
			Drug Use			
Marijuana use ever	33.2%	28.3%	23.3%	16.0%	31.2%	13.0% (used alcohol and marijuana in past 30 days)
Used inhalant ever	7.4%	9.0%	5.6%	5.2%	5.9%	N/A
Used ecstasy ever	5.2%	5.1%	4.3%	4.0%	N/A	N/A
Used prescription drug without a doctor's permission	16.1%	8.4%	13.1%	17.6%	14.9%	N/A
			Violence			
Were ever hit, slapped or physically hurt by their boyfriend or girlfriend during the past 12 months	12.4%	10.6%	8.8%	3.2%	8.5%	6.2%
Bullied on school property in past 12 month	29.5%	28.8%	32.1%	24.0%	22.7%	10.0%
Electronically bullied in past 12 months	N/A	21.5%	20.8%	16.8%	17.6%	13.0%
		S	exual Activity			
Ever had sex	38.2%	45.0%	36.3%	32.4%	35.3%	39.2%
		Ν	Nental Health		-	
Seriously considered suicide in past 12 months	16.8%	12.8%	12.2%	6.8%	13.2%	9.5%
Feeling sad or hopeless almost every day for 2 weeks	28.9%	23.9%	22.1%	15.2%	24.6%	30.5% (over last 12 months)
Hurt or injured yourself over the past 12 months without wanting to die	18.1%	15.7%	14.4%	10.0%	N/A	8.0%
Have attempted suicide	6.6%	6.8%	6.3%	3.6%	2.5%	5.0% (within last 12 months)
	ccd.cdc.gov/you ents this data at ate. As part of a (able by county u	thonline. Acces a state and nat CDC grant, the Y nless the count	sed on December ional level; howev	1, 2014; Minne ver, not all schoo for La Crosse (t voluntarily cor	esota Student Su ol districts in eac County in 2013. ⁻ npletes the onlir	rvey, 2013. The ch county were The YRBS is not ne survey.

Current cigarette use is defined as those who smoked at least one cigarette every day for 30 days. All high schools from La Crosse and Monroe counties participated in the online YRBS survey. The state of Wisconsin did not include a question regarding self-harm on the 2013 questionnaire.

Support for Youth

In addition to assessing risks, the YRBS also asks participants to disclose possible assets in their lives. These positive attributes include feelings of belonging, caring, and family support. The majority of students in the Great Rivers Region report having a strong support system. Such factors strongly contribute to growth and achievement. The results are summarized in **Table 7**.

Table 7: Youth Assets, YRBS Data						
Asset La Crosse Monroe Trempealeau Vernon Houston						
Family gives love and support	84.6%	78.5%	84.0%	84.0%	68.5%	
Teachers really care, give support, and encouragement	64.3%	46.7%	50.8%	64.4%	12%	
Feel like you belong at school	68.0%	56.1%	59.8%	69.2%	N/A	
Adult (teacher or other staff) at school you could talk to	70.6%	62%	65.0%	74.0%	N/A	

Source: Centers for Disease Control and Prevention (CDC). *1991-2013 High School Youth Risk Behavior Survey Data*. Available at http://nccd.cdc.gov/youthonline/. Accessed on December 1, 2014; Minnesota Student Survey, 2013.

Extra-Curricular Activities

Extra- and co-curricular activities can be participated in by students on or off school grounds and are not included in the mandatory curriculum requirements necessary for grade advancement. These activities have historically been enjoyed on a not-for-credit basis, although in recent years some schools have allowed students to earn credit for certain extra-curricular activities. Some co-curricular activities allow for enhanced physical development, additional learning, a creative outlet, and improved self-esteem; some assist in learning time management, encourage an atmosphere of community and teamwork, and can help reduce stress. One study found that participating in a wide range of extracurricular activities was generally related to having a higher proportion of academic peers and a smaller proportion of risky peers than individuals who were not involved in structured activities²².

Table 8 shows an average percentage of students that participate in academic, athletic, or music extracurricular activities in the Great Rivers Region. Participation in athletics was typically the most common in each school district, while participation in music was usually the least common in most schools.

Table 8: Students in Grades 6-12 in Extra-Curricular Activities							
County 2010-2011 2011-2012 2012-2013							
La Crosse	32.0%	36.0%	33.1%				
Monroe	46.8%	45.3%	46.3%				
Trempealeau	49.5%	63.0%	50.9%				
Vernon	Vernon 44.5% 44.8% 48.5%						
Source: Wisconsin Department of Public Instruction Percentages are based on average percentage of participation in academic, athletic, and music extra-curricular activities.							

As part of the COMPASS NOW 2015 Random Household Survey, respondents were asked to rate their community with regard to opportunities youth have to explore and participate in positive activities. Approximately 68% of respondents rated their community as good or excellent in this regard. Figure 12 shows ratings by county.



Figure 12: Opportunities for Youth to Explore Interests

Post-Secondary Education

Higher education is critical to success in our 21st century, globally competitive, knowledge-based economy. Employers are increasingly seeking a more educated workforce. Jobs that previously required a high-school diploma now require some postsecondary education, including two- and four-year degrees, certifications, and other industry recognized credentials. This trend will continue as more industries demand specific skills to compete effectively in a global and technology-based economy.

One of the most commonly measured benefits of achieving a higher education is earning potential. In 2011, the median earnings of individuals with a bachelor's degree were on average \$21,000 higher than those with only a high school education. The earning gap increases with age. For example, the gap between those with a bachelor's degree and those with a high school education increases 54% for 25- to 29-year-olds to 86% for 45- to 49-year-olds²³. College-educated adults and their children are also less likely to be obese, and mothers with higher levels of education tend to spend more time with their children (regardless of employment status). This group also has higher job satisfaction than those without a college education²³.

According to a report from the White House, the number of jobs requiring postsecondary education is rapidly growing. Of the 30 fastest growing occupations, more than half require postsecondary education. Figure 13 indicates educational attainment by county for the Great Rivers Region. Residents of La Crosse County had the highest rates of a high school diploma or higher, while Trempealeau County had the highest rates of residents with a high school diploma or less.



Higher Education Institutions of the Great Rivers Region

The Great Rivers Region is fortunate to have a great number of higher education choices, including the University of Wisconsin-La Crosse, Viterbo University, Western Technical College, and Globe University. Other nearby colleges and universities just outside the region include Chippewa Valley Technical College, Globe University-Eau Claire, Luther College, Saint Mary's University of Minnesota, University of Wisconsin-Eau Claire, University of Wisconsin-Richland, and Winona State University. Nearly 85% of respondents to the COMPASS NOW 2015 Random Household Survey rated the quality of higher education in the region as either good or excellent (see **Figure 14**).

The **University of Wisconsin-La Crosse**, part of the University of Wisconsin System, continues to position itself among the country's elite public universities. In 2014, fall enrollment reached a record 10,558 undergraduate and graduate students. UW-L offers 91 undergraduate programs and 25 graduate programs. Nearly 400 international students bring the world to campus. The University is divided into three colleges: Business Administration, Science and Health, and Liberal Studies. UW-L has consistently ranked among the state's top public or private higher education institution for master's degree institutions, according to U.S. News & World Report, for more than a decade. UW-L is also listed annually among Kiplinger's Top 100 Best Values, and in Spring 2014, the magazine also named UW-L No. 4 in a ranking of the 25 Best College Values Under \$30,000 a Year.

Viterbo University, a private Catholic university, is located in La Crosse, Wisconsin, and enrolls more than 2,000 undergraduate and 800 graduate students in over 70 programs. Viterbo's nursing program is one of the largest in Wisconsin and its offerings in education, business, science, and the arts enjoy a strong reputation. Many adult students seeking to access return-to-school and degree-completion options attend Viterbo. The University has also expanded its online programs for students needing or favoring the convenience of that format. Ten programs are now completely online. Nearly 7,200 alumni of Viterbo live and/or work in the Great Rivers Region's counties, adding to the economic, cultural, and educational vitality of their communities. As of Fall 2014, 39% of Viterbo's undergraduate enrollment is comprised of residents from the five-county area. Viterbo's undergraduate enrollment is comprised of 51% first-generation students – a strong indicator of Viterbo's commitment to improving the lives and opportunities of those seeking a college education.



Figure 14: Quality of Higher Education in the Community

Source: COMPASS NOW 2015 Random Household Survey

Western Technical College is state technical college and part of the Wisconsin Technical College System (WTCS). The system was created over 100 years ago to meet the training and education needs of specific regions throughout the state. Western's main campus is in La Crosse, but classes are offered throughout the region, including Black River Falls, Independence, Mauston, Sparta, Tomah, and Viroqua. Western offers more than 60 programs of study, including associate's degrees, technical diplomas, and certificates, as well as employment skills training.

The mission of the college is to provide relevant, high-quality education in a cooperative and sustainable environment that changes the lives of students and grows the communities that they serve.

Traditional students and adults returning to school choose Western for its programming and lower tuition costs. The goal is to keep tuition affordable while maintaining quality education and relevant technology. One way in which Western keeps education more affordable for students is its ability to transfer credits through articulation agreements, which allow students to complete an academic program or general education course at Western, and transfer those credits to another institution to complete their studies. Whatever the ultimate path of education or the investment, Western positively impacts the lives of its students. According to a six-month graduate follow-up survey:

- 93% of 2012 graduates had a job within six months of graduation
- 76% were employed in Western's district, and 87% were employed in Wisconsin
- 98% of graduates were satisfied or very satisfied with the education they received
- 34% were continuing their education

Globe University opened in 2009 and is located in Onalaska, Wisconsin. La Crosse Globe University (GU-La Crosse) is a member of the Globe Education Network (GEN). GEN consists of Globe University, Minnesota School of Business, Broadview University, Minnesota School of Cosmetology, The Institute of Production and Recording, and Duluth Business University. These private, for-profit school systems work together through a consortium agreement to provide students with easy transferability of credits if relocating, as well as increased options for course selection through online offerings.

The GU-La Crosse campus population is mostly centered in health science programs (Medical Assistant, Medical Administrative Assistant, Massage Therapy, and Veterinary Technology). Together, these programs comprise 53% of the total student population and account for over 50% of the faculty employed at the GU-La Crosse campus. The business, accounting, legal, information technology (IT), and criminal justice programs at the campus, while being smaller programs, are increasing in program population size from each quarter. La Crosse area employers offer potential placement opportunities consistent with the interest in health science programs. Globe University has placed over 82% of the graduates in their field of study upon graduation each year. Globe University is also ranked nationally as a top military-friendly school.

Cost of Higher Education

As has been discussed, obtaining a post-secondary degree is becoming increasingly more necessary when seeking employment. Cost is one of the barriers that is most commonly voiced by those seeking higher education. The cost of a college degree in the U.S. has increased 1,120% over the past 30 years, four times the rate of the consumer price index²². According to The College Board, an organization that prepares and administers standardized tests that are used in college admission and placement, the projected four-year tuition and fees for enrolling at a public university for an in-state resident in 2015 would cost approximately \$39,400. By the year 2033, it is estimated that the same scenario will cost \$94,800²³. These studies paint a clear picture as to why students are becoming increasingly indebted when investing in their education.

Figures 15-18 indicate the cost per year, graduation rates, loan default rate, and median borrowing level at higher education institutions in the Great Rivers Region. **Table 9** shows the change in average net cost at each institution from 2008-2010. The cost of education is an important consideration because of its effect on future debt. Students who do not have the luxury of extensive savings will require financial aid to cover the cost of college. Some forms of financial aid must be repaid after completing school regardless of whether the student completes his or her degree. This is an important consideration because depending on a graduate's ultimate occupation and salary, his or her debt may be difficult to pay off in a timely manner. The default rate of an institution is also an important consideration because it reflects the likelihood of students repaying their financial aid. Some lenders will not loan money to students attending institutions with high default rates. The graduation rate of an institution should also be considered when choosing a college or university. The percentage of college graduates at a given institution may be influenced by the size of an average college class, faculty hiring practices, quality of curriculum, age of the student, full- or part-time status, the amount spent per student, and availability of support staff.



Source: The White House College Score Card: U.S. Department of Education's Integrated Postsecondary Education Data System (IPEDS)

Net price is what undergraduate students pay after grants and scholarships are subtracted from the institution's cost of attendance.

Costs refer to the average net price for undergraduates at the institution for academic year 2011-12.

Table 9: Change in Average Net Cost, 2008-2010						
Institution	% Change					
Globe	0%					
UW-L	+10%					
Western	+6.7%					
Viterbo -6.2%						
Source: The White House College Score Card: U.S. Department of Education's Integrated Postsecondary Education Data System (IPEDS)						

Graduation rate data are based on first-time undergraduate students who enrolled full-time. This may not represent all undergraduates that attend an institution. For primarily bachelor's degree-granting institutions, the graduation rate displayed is for students beginning in Fall 2006 and seeking a bachelor's degree. For primarily associate's degree-granting institutions and primarily certificate-granting institutions, the graduation rate displayed is for students beginning in Fall 2009.

Of full-time students enrolled at the University of Wisconsin-La Crosse, 69.8% received their bachelor's degree within six years. During the Fall of 2012, 1,890 new freshmen were enrolled at UW-L. During the Fall of 2013, 1,636 (86.6%) of that same cohort were enrolled at UW-L. Of full-time students enrolled at Western Technical College, 36.3% graduated within 150% of the expected time for completion, and 17.3% transferred to another institution. Of full-time students enrolled at Viterbo, 52.8% received their bachelor's degree within six years, and 38% transferred to another institution. Globe data is unavailable due to the limited length of time the institution has been locally established.



Figure 16: Graduation Rates





Data in **Figure 18** represents all undergraduate borrowers who graduated or withdrew from the institution between July 1, 2011 and June 30, 2012. All federal loans for undergraduate study, including Parent PLUS loans, are included for this cohort of borrowers. Only the debt associated with the students' attendance at the institution is included in the calculation. The estimated monthly repayment amount has been calculated using the department's standard graduated repayment calculator based on an interest rate of 6.8%. See bullets below for details about institutions in the Great Rivers Region.

- Globe students typically borrow \$15,834 in federal loans for undergraduate study. The federal loan payment over 10 years for this amount is approximately \$182.22 per month.
- University of Wisconsin-La Crosse students typically borrow \$17,610 in federal loans for undergraduate study. The federal loan payment over 10 years for this amount is approximately \$202.66 per month.
- Viterbo students typically borrow \$22,500 in federal loans for undergraduate study. The federal loan payment over 10 years for this amount is approximately \$258.93 per month.
- Western students typically borrow \$9,074 in federal loans for undergraduate study. The federal loan payment over 10 years for this amount is approximately \$104.42 per month.



Source: The White House College Score Card: U.S. Department of Education's

National Student Loan Data System (NSLDS)

Job Skills Training and Continuing Education

Continually acquiring knowledge and developing skills is vital to succeed and advance in the workforce. Job skills training can involve learning or improving upon many skills including math, work ethic, verbal and written communication, or leadership and collaboration. Respondents of the COMPASS NOW 2015 Random Household Survey were asked to rate the opportunities in their job to gain knowledge or skills (**Figure 19**). Approximately 17% of respondents ranked this as excellent.

Figure 19: Opportunities in Your Job to Gain Knowledge or Skills, Percent

Poor/Fair Good Excellent

30.1%	14.9%	16.3%	11.5%	25.5%
39.8%	34.5%	40.8%	39.3%	38.3%
30.1%	50.6%	42.9%	49.2%	36.2%
La Crosse	Monroe	 Trempealeau	Vernon	Houston

Source: COMPASS NOW 2015 Random Household Survey

The importance of lifelong learning is not only visible in the workforce. Learning new skills throughout the lifespan develops abilities, adds openness and interest to life, and keeps skills current in an everchanging world. Respondents to the COMPASS NOW 2015 Random Household Survey were asked to rate the availability of community resources to learn new skills (**Figure 20**), and on average, 22% ranked this as excellent. Residents of the Great Rivers Region have several opportunities to explore job training and professional development outside of their employer through licensure and certification programs at Western Technical College, continuing education at UW-L, independent learning programs through UW-Extension, and job training programs offered by Workforce Connections, a non-profit organization largely funded by the Workforce Investment Act to provide training and employment assistance to displaced workers.



Figure 20: Community Resources to Learn New Skills

Source: COMPASS NOW 2015 Random Household Survey

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62 | INCOME/ECONOMIC

Photo by: Ashley Dechant, Ellie East & Kelsey Mazza

AN INCOME/ECONOMIC PROFILE OF THE GREAT RIVERS REGION

Introduction

The purpose of this section of the COMPASS NOW Report is to give an overview of the status of Income and Economic issues in the Great Rivers Region. Several representatives from organizations and agencies in our community guided Great Rivers United Way in updating and determining topics for this profile. These groups include: University of Wisconsin-Extension, Bluff Country Family Resources, Workforce Connections, Mississippi River Regional Planning Commission, Semcac Outreach and Emergency Services, University of Wisconsin-La Crosse, Neighbors in Action, and Couleecap. This section is not meant to duplicate what is already available elsewhere; instead, its focus is on the impact the economy has on our community.

Population

According to the 2012 American Community Survey, the five counties of the Great Rivers Region (La Crosse, Monroe, Trempealeau, and Vernon Counties in Wisconsin, and Houston County in Minnesota) have a **total population** of 237,113 people. Approximately 42% of the population is considered urban and 58% is considered rural. Every county in the region is more rural than it is urban, except for La Crosse County, which is only 17% rural, as shown in **Table 1**. These urban-rural classifications are important because of the impact to the region's planning, potential for economic development and growth, and how services are delivered.

Table 1: Population Distribution			
County	Rural	Urban	
La Crosse	17%	83%	
Monroe	42%	58%	
Trempealeau	90%	10%	
Vernon	86%	14%	
Houston	57%	43%	
Source: http://www.city-data.com (2012 data)			

Although the 2010 Census showed a drop in population growth for the Midwest as a whole, the Great Rivers Region has grown by approximately 8% over the past 14 years¹.

As shown in **Table 2**, Houston County is the only county in the region that experienced negative population growth in recent years. This reduction is mostly attributed to declining birth rates and a steady death rate. The county also had some net outward migration of its population. In the same time period, the population in the state of Wisconsin grew by 7.1%, while Minnesota's population grew by 10.2%. Table 2 shows population changes for each county in the region over the past 14 years.

Table 2: Population Change 2000-2013				
County/Region	2000	2013 Estimate	% Change	
La Crosse	107,120	116,713	+9.0%	
Monroe	40,899	45,298	+10.8%	
Trempealeau	27,010	29,582	+9.5%	
Vernon	28,056	30,329	+8.1%	
Houston	19,718	18,799	-4.7%	
Region Total	222,803	240,721	+8.0%	
WI State	5,363,675	5,742,713	7.1%	
MN State	4,919,479	5,420,380	10.2%	
US	281,421,906	316,128,839	12.3%	
Source: U.S. Census Bureau 2009-2013 5-Year American Community Survey				

According to the 2009-2013 American Community Survey, the **median age** of the Great Rivers Region was 40.3 years, which is higher than the state and national averages (WI=38.7 years, MN=37.6 years, U.S.=37.3 years). La Crosse County, influenced by the presence of four post-secondary institutions, has the youngest median age at 35.4 years.

To get a better sense of the **age distribution** in each county, we can compare age groups according to recent U.S. Census data. **Figure 1** shows the age distribution for each county. Monroe and Vernon Counties have the largest percentage of children under five, as well as the highest percentage of residents under the age of 20. This large segment of the population is dependent on investments that will help make them productive members of our community namely, education and adequate child care. The other three counties have an under five year old population at or below 6.5%, with approximately 26% of their county population under the age of 19. This percentage is very similar to the national average of 26.9%.



Figure 1: Percentage of Population by Age Group

Towards the other end of the age scale, those 50-64 represent the Baby Boomers in our region. All counties of the Great Rivers Region have a larger percentage of residents in this age group than the national average, except La Crosse County, which comes in slightly under the national average. Houston County has the highest percentage of residents over the age of 50 years old (40.6%), which is also significantly higher than the national average of 32%. These data help account for the increase in the median age and draw attention to the challenges and opportunities of aging communities. It is important to keep in mind that, in 2018, the first wave of Baby Boomers will turn 75 years old. Low maintenance housing, public transportation, and efficient health care are just some of the needs that aging communities are facing and will continue to face as large segments of the population age. Despite these increasing challenges, the positive contribution of older adults on our communities should not be overlooked. Older populations can provide rich intergenerational learning opportunities, be a source of community volunteers and community action. By 2030, one in five Americans will be over the age of 65, with 200,000 Americans estimated to become centenarians².

The racial make-up of the Great Rivers Region is predominately white with the largest ancestry groups in the region being German, Norwegian, and Irish³. The two largest non-European ethnic populations are Hispanic and Asian⁴. From 2000 to 2010, the Latino population has increased by 74% in Wisconsin, which is the highest percentage of increase in the last years⁵. The four Wisconsin counties that had a rate of growth higher than the state averages are La Crosse (76%), Monroe (124%), Trempealeau (595%), and Vernon (112%)⁶. The Hmong population, which is included in Asian measures, increased by nearly 1,000 citizens in La Crosse County, making 4.1% of the La Crosse County population of Hmong descent.

Housing

The majority of residents in the Great Rivers Region own their own home. According to the U.S. Census, La Crosse County has the highest percentage of renter occupied units, at 34.6% of the population, and Houston County has the lowest percentage of renters, at 19.1%. Since 2007, the number of **home sales** in the Great Rivers Region has been declining, with the exception of Houston County, which has remained fairly stagnant; however, there were some modest gains in all counties but La Crosse between 2009 and 2013. These details can be found in **Figure 2**.



Figure 2: Home Sales

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Another lead indicator of the economy in a community is the number of **building permits** issued because new residential housing construction and renovations often lead to additional types of economic growth. Locally, the Great Rivers Region has remained stable in the number of permits issued since 2009. **Figure 3** shows this information.



Figure 3: Number of New Building Permits

Table 3 shows the median home and rental values for our area. **Home and rental values** are often used as measurements to help indicate how the general economy is fairing. The Great Rivers Region is trending similarly to Wisconsin and Minnesota (62.9% increase), with a 60.1% increase in median home value between 2000 and 2012.

Table 3: Median Home and Rent Values				
County/Region	2000 Home Values	2012 Home Values	% Change	Rent/Month
La Crosse	\$94,400	\$153,600	+61.5%	\$726
Monroe	\$79,300	\$134,400	+59.0%	\$743
Trempealeau	\$81,200	\$133,300	+60.9%	\$618
Vernon	\$79,300	\$136,800	+58.0%	\$615
Houston	\$92,600	\$151,100	+61.3%	\$585
Wisconsin	\$109,900	\$169,000	+65.0%	\$759
Minnesota	\$118,100	\$194,300	+60.8%	\$819
Source: 2000 U.S. Census, Summary File 3; 2010 U.S. Census Summary File 1;				
2008-2012 U.S. Census American Community Survey (ACS),				
U.S. Census Bureau 2009-2013 5-Year American Community Survey				

A general rule of thumb is that a household should spend a maximum of 25% of their income on housing costs⁷. However, on average, 21% of both home owners and renters in the Great Rivers Region spend 25-34.9% of their income on housing. See **Table 4** for county-specific breakdowns for homeowners and **Table 5** for renters. **Table 4** shows that an average of 20.9% of homeowners in the Great Rivers Region spends 25-34.9% of their total income on housing costs, while 23.4% of homeowners spend 35% or more of total income on housing costs. **Table 5** shows that 21.4% of renters in the Great Rivers Region spend between 25-34.9% of total income on housing costs, while 33.6% of renters spend 35% or more of their total income on housing costs, while 33.6% of renters spend 35% or more of their total income on housing costs, while 33.6% of renters spend 35% or more of their total income on housing costs, while 33.6% of renters spend 35% or more of their total income on housing costs, while 33.6% of renters spend 35% or more of their total income on housing costs, while 33.6% of renters spend 35% or more of their total income on housing costs, while 33.6% of renters spend 35% or more of their total income on housing costs, while 33.6% of renters spend 35% or more of their total income on housing costs. Spending more than 25% of household income on housing costs impacts the amount of money available for emergencies, food, other debts, transportation expenses, and other unforeseen costs, as well as the ability to save for the future.

Table 4: Percentage of Income Homeowners Spend on Housing			
County/Region	25-34.9% of Income Spent on Housing	35% or More of Income Spent on Housing	
La Crosse	21.5%	23.7%	
Monroe	21.4%	22.0%	
Trempealeau	20.5%	24.2%	
Vernon	20.6%	26.6%	
Houston	20.5%	20.7%	
Wisconsin	21.5%	23.7%	
Minnesota	21.2%	22.0%	
United States	8.4%	11.8%	
Source II S. Census Bureau 2009-2013 5-Vear American Community Survey			

Source: U.S. Census Bureau 2009-2013 5-Year American Community Survey

Table 5: Percent of Income Renters Spend on Housing			
County/Region	25-34.9% of Income Spent on Housing	35% or More of Income Spent on Housing	
La Crosse	20.5%	39.8%	
Monroe	19.5%	32.6%	
Trempealeau	23.2%	26.1%	
Vernon	19.0%	33.4%	
Houston	24.7%	36.3%	
Wisconsin	20.5%	39.8%	
Minnesota	21.6%	40.0%	
United States	20.7%	43.2%	
Source: U.S. Census Bureau 2009-2013 5-Year American Community Survey			

Housing is generally considered affordable if the total cost, including rent or mortgage, property taxes, insurances and utilities, does not exceed 30% of the household income. According to the COMPASS NOW 2015 Random Household Survey, the majority of residents gave a rating of good or excellent with regards to the availability of affordable, quality housing in their community (see **Figure 4**). In addition, an average of 23% of homeowners and nearly 34% of renters in the Great Rivers Region spent 35% or more of their income on housing.


The age of a community's **housing stock** is an indicator of the type and quality of its housing. Older homes can contribute to the preservation of community history, are often centrally located, and thus are within walking distance to amenities, which could lower the amount of fossil fuel emissions into the environment⁸, and can often offer certain character and a more mature landscape than newer homes. However, older homes can also be difficult to maintain, can need expensive repairs (electric, plumbing, flooring), are sometimes more costly to heat and cool due to ineffective insulation, and potentially contain lead-based paint that when eaten or inhaled can cause harm to children. **Table 6** shows that about half of all housing units in the region were built prior to 1970 and may require more upkeep than newer homes. Many homes built before 1970 have been remodeled and some are now in better shape than newer homes.

Table 6: Housing Stock							
County	Total # of Housing Units	Units Built Pre-1970	% of Homes Pre-1970				
La Crosse	48,542	21,570	44%				
Monroe	19,267	8,700	45%				
Trempealeau	12,655	6,627	52%				
Vernon 13,720 7,413 54%							
Houston 8,588 4,545 53%							
Regional Total 102,772 48,855 48%							
Source: American Community Survey Estimates, 2009-2013							

In 2008, the U.S. economy entered an enormous mortgage crisis and more citizens faced foreclosure during this period than any other time in known history. Foreclosure have many causes. Unexpected debts or the loss of a job immediately following the purchase of a home can be so impactful that the homeowner is no longer able to make mortgage payments. Poor financial planning can result in an inability to sustain mortgage payments. Nonetheless, the majority of homeowners do everything within their means to keep their home, and foreclosure is most often approached as a last resort. **Figure 5** shows the number of foreclosures in our area over the past five years.



Despite this increase, only about 7% of COMPASS NOW 2015 Random Household Survey respondents indicated they were very concerned about foreclosure and bankruptcy in our area, although those earning incomes lower than \$25,000 annually rated this as much more of a concern. This is down significantly from COMPASS NOW 2012, in which 35% of respondents stated they were very concerned about foreclosure and bankruptcy. Concern about the risk of foreclosure and bankruptcy ranked lowest in this year's survey. **Figure 6** shows the rating of community economic concerns and **Table 7** showcases the rating of community issues by county.



Figure 5: Regional Foreclosures

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	Tab	le 7: Ranking of	Community Issu	ues by County	
Rank	La Crosse	Monroe	Trempealeau	Vernon	Houston
1	Illegal Drug Use				
2	Alcohol Use	Rx Drug Misuse	Identity Theft	Alcohol Use	Bullying
3	Rx Drug Misuse	Alcohol Use	Bullying	Obesity	Identity Theft
4	Identity Theft	Identity Theft	Funding for Schools	Identity Theft	Funding for Schools
5	Bullying	Bullying	Obesity	Bullying	Alcohol Use
6	Over-the Counter Drug Misuse	Over-the-Counter Drug Misuse	Alcohol Use	Funding for Schools	Obesity
7	Domestic Abuse, Child Abuse, Elder Abuse				
8	Obesity	Obesity	Suicide	Tobacco Use	Suicide
9	Funding for Schools	Funding for Schools	Tobacco Use	Rx Drug Misuse	Over-the-Counter Drug Misuse
10	Hunger	Sexual Abuse and Sexual Violence	Rx Drug Misuse	Over-the-Counter Drug Misuse	Tobacco Use
11	Sexual Abuse and Sexual Violence	Tobacco Use	Financial Problems - Local Governments	Sexual Abuse and Sexual Violence	Rx Drug Misuse
12	Suicide	Financial Problems - Local Governments	Over-the-Counter Drug Misuse	Hunger	Hunger
13	Tobacco Use	Hunger	Sexual Abuse and Sexual Violence	Financial Problems - Local Governments	Financial Problems - Local Governments
14	Financial Problems - Local Governments	Suicide	Hunger	Suicide	Sexual Abuse and Sexual Violence
15	Gambling	Gambling	Gambling	Gambling	Excessive Personal Debt
16	Risk of Losing Your Job	Excessive Personal Debt	Risk of Losing Your Job	Excessive Personal Debt	Gambling
17	Excessive Personal Debt	Risk of Losing Your Job	Excessive Personal Debt	Risk of Losing Your Job	Risk of Losing Your Job
18	Risk of Foreclosure and Bankruptcy				
		Source: COMPASS NO	W 2015 Random Hous	senola Survey	

Table 8 shows how survey respondents ranked the eight economic issues asked about in the COMPASS NOW household survey by county. Concern about financial problems experienced by local governments has dramatically decreased, moving from the second place in 2012 to 13th.

Table 8:	Table 8: Ranking of Economic Concerns by County out of 18 Topics								
Concern	Averages	La Crosse	Monroe	Trempealeau	Vernon	Houston			
Hunger	12	10	13	14	12	12			
Gambling	15	15	15	15	15	16			
Risk of Losing Your Job	17	16	17	16	17	17			
Risk of Foreclosure and Bankruptcy	18	18	18	19	18	18			
Excessive Personal Debt	16	17	16	17	16	15			
Financial Problems - Local Governments	13	14	12	11	13	13			
Funding for Local Schools	6	9	9	4	5	4			
Identity Theft	3	3	3	2	4	3			
	Source: C	COMPASS NOW 2	2015 Random H	lousehold Survey	/				

Homelessness in our community continues to remain widely hidden. Accurately determining how many people are homeless is difficult because homeless individuals utilize shelters or assistance programs on both a long-term and temporary basis. The U.S. Department of Housing and Urban Development (HUD) states that in 2013 there were 6,104 homeless people in the state of Wisconsin, and 8,214 in Minnesota. Although tracking the general homeless population can be difficult, the Wisconsin Department of Public Instruction and the Minnesota Department of Education attempt to collect data from each school district concerning the number of students attending school who are homeless.

During the 2013-2014 school year, La Crosse County had the highest number of **homeless students** at 263 students. During that same year, Trempealeau County had the lowest number of homeless students at 50 students. **Table 9** shows the number of homeless students enrolled in school over the past five years. Correspondingly, **Figure 7** shows the percentage of the student population that was homeless over the past five years. Monroe County consistently has the highest percentage of homeless students, with a high of 3.04% during the 2012-2013 academic year, while Trempealeau County has the lowest percentage.

Table 9: Number of Homeless Students Enrolled in School									
County	2009-2010 2010-2011 2011-2012 2012-2013 2013-2014								
La Crosse	147	207	193	238	263				
Monroe	179	180	206	205	204				
Trempealeau	Trempealeau 38 40 39 55 50								
Vernon 22 21 34 40 60									
Source: Wisconsin Department of Public Instruction Enrollment number recorded on 3rd Friday in September									



Couleecap, a non-profit agency working on a wide range of issues faced by low-income individuals, conducts a Point in Time Survey twice a year (January and July) to provide a snapshot of the number of people living in emergency shelters, transitional housing, and on the streets of our community. To do this, volunteers search parks, 24-hour businesses, parking lots, and bike trails for individuals who are homeless in Crawford, La Crosse, Monroe, and Vernon Counties. In the Point in Time Count held in January 2014, there were no homeless persons located. When this survey is conducted in July months, there are usually about 25 unsheltered persons located. When this survey was conducted in July 2014, throughout Couleecap's fourcounty service area (which does not include Trempealeau or Houston Counties), there were 378 individuals who were homeless⁹.

Industry and Employment

There is much variety among types of employment and compensation in the below industries. Some industries require rigorous education and training, whereas, others require very little starting knowledge about the vocation and allow for on-the-job training. The U.S. Census monitors earnings by industry, gender, educational attainment, and many other factors. **Table 10** shows the top ten industry sectors by reported earnings, and **Table 11** lists employers with the highest number of employees for each county in the region.

Table 10: Top Earnings by Industry					
1. Information					
2. Financial Activities					
3. Construction					
4. Manufacturing	Source: United States Department				
5. Goods-Producing	of Labor, Bureau of Labor Statistics,				
6. Professional and Business Services	Quarterly Census of Employment and Wages, Private, High-Level				
7. Education and Health Services	Industries, 2014 First Quarter				
8. Service-Providing					
9. Natural Resources and Mining					
10. Other Services					



Labor Force Participation Rate is the percentage of working-age persons in an economy who are employed or are unemployed but looking for work. Typically, working-age persons are between the ages of 16-64. Students, homemakers, and persons under the age of 64 who are retired are not counted in this measure¹⁰.

Table 12 indicates that the Great Rivers Region has a much higher percentage of people in the labor force than the U.S. average. Overall, the participation rate over the past five years has been between 92% and 95% for our region, whereas the U.S. average has fluctuated from between 63% and 65%.

Table 12: Labor Force Participation Rate								
County/Region	2009 2010 2011 2012 2013							
La Crosse	93.2%	93.6%	94.2%	94.7%	94.8%			
Monroe	92.2%	92.6%	93.3%	93.3%	93.5%			
Trempealeau	92.3%	92.9%	93.8%	94.6%	94.5%			
Vernon	92.1%	92.2%	93.2%	93.7%	93.9%			
Houston	91.8%	92.1%	92.8%	93.8%	94.0%			
Wisconsin	92.9%	92.3%	93.2%	94.3%	94.7%			
Minnesota	92.5%	92.3%	93.2%	94.3%	94.7%			
U.S.	65.7%	64.8%	64.2%	63.7%	63.0%			
Source: U.S. Department of Labor, U.S. Bureau of Labor Statistics All percentages are quarterly averages								

Household Income

Household income (**Table 13**) is a good measure of community's economic well-being. Household income is affected by geographic location, education level, number of employed members of the household, type of employment, and unemployment compensation. The **median household income** includes the income of the householder and all other individuals over the age of 15, whether or not they are related to the householder. Comparing median household incomes as opposed to average household income is generally considered more accurate, as median figures are less affected by outliers on the wage scale. Median household income for the Great Rivers Region has been consistently lower than that at the state and national level. Houston County comes closest to the national average, yet is still about 10% lower than the Minnesota median household income.

Table 13: Median Household Income							
County/Region	2009 Median Household Income	2012 Median Household Income	% Change				
La Crosse	\$49,505	\$50,771	+2.56%				
Monroe	\$49,473	\$48,768	-1.43%				
Trempealeau	\$44,997	\$48,624	+8.06%				
Vernon	\$40,644	\$44,676	+9.87%				
Houston	\$49,269	\$53,453	+8.49%				
Wisconsin	\$49,994	\$52,627	+5.27%				
Minnesota	\$55,621	\$59,126	+6.30%				
U.S. \$50,221 \$53,046 +5.63%							
Source: U.S. Census Bureau 2009-2013 5-Year American Community Survey Adjusted for inflation							

In the COMPASS NOW 2015 Random Household Survey, respondents were asked to rate their ability to meet their family's basic needs, such as food, housing, and clothing. While 72% of survey respondents gave a favorable (good or excellent) response to this question, nearly a quarter responded that it was either fair or poor (see **Figure 8**). This may signal that members of our community lack the wages that would allow them to satisfactorily meet the basic needs of themselves and/or their families. Just over half of all respondents gave a fair (36.2%) or poor (15.2%) rating to the availability of jobs with wages that offer a good standard of living. A mere 6% of respondents stated that our community did an excellent job of offering such jobs (see **Figure 9**). **Figure 10** illustrates respondents feedback regarding their ability to pay for a vehicle, **Figure 11** represents their ability to pay for education, and **Figure 12** represents ability to pay for housing.



Source: COMPASS NOW 2015 Random Household Survey

The number of **bankruptcies** is a measure of the economic health of a community. Job loss, increased medical bills, and costs associated with divorce and separation are the primary reasons for bankruptcy filings¹¹. **Table 14** shows bankruptcy rates in the Great Rivers Region counties, all of which are well below their respective state rates.

Table 14: 2013 Non-Business Bankruptcy Rates					
County/Region	Bankruptcies/1,000 People				
La Crosse	2.44				
Monroe	2.97				
Trempealeau	1.62				
Vernon	2.31				
Houston	1.70				
Wisconsin	5.10				
Minnesota 3.41					
Source: Administrative Office of U.S. Courts					

Poverty in our Region

Poverty is an extremely complex concept to define and to attempt to alleviate. Poverty is a result of the level of unemployment, length of unemployment, health status, level of educational attainment, and access to public services of a population. Most often, the poverty rate and rates of enrollment in financial assistance programs are used to measure poverty. Since poverty is such a multifaceted issue, these measurements are often inadequate at capturing the entire situation. Living in poverty can be extremely taxing on the individual, family, and community. There is a strong link between stress and socioeconomic status, and those of lower socioeconomic status often have higher levels of stress, which can have both acute and chronic health repercussions, such as high blood pressure and heart disease. Children who live in poverty suffer from greater health problems than those who don't, and more time spent in poverty worsens health outcomes¹². Poverty also impacts mental health both directly and indirectly. One study found that poorer economic conditions increase the risk for mental disability and psychiatric hospitalization¹³. Individuals living in poverty often lack hope, feel powerless, and feel isolated from the rest of society¹⁴.

The traditional U.S. standard for measuring poverty is the **poverty threshold** set by the U.S. Census. Based solely on food costs, the poverty threshold does not take into account other real costs families have today, including such needs as child care, health care, and transportation.

The Federal Poverty Level (FPL) set by the Department of Health and Human Services for a family of four in the United States in 2014 was \$23,850. A family of four that earns below that amount is considered "living in poverty¹⁵." **Table 15** compares the percentage of the Great Rivers Region population living in poverty in 2000 and 2012. Because this guideline underestimates how much it truly costs to raise a family, the Massachusetts Institute of Technology developed the Living Wage Calculator. This provides access to information about typical expenses and typical wages for multiple family demographics. The outputted calculations are state and county specific.

Table 15: Percent of Population Living in Poverty						
County/Region	2000	2012				
La Crosse	11%	14%				
Monroe	12%	15%				
Trempealeau	9%	12%				
Vernon	14%	16%				
Houston	7%	10%				
Five-County Average	11%	13%				
Wisconsin	9%	13%				
Minnesota	8%	11%				
United States 12% 15%						
Source: U.S. Census Bureau, 2009-2013	5-Year American C	ommunity Survey				

Table 16 shows the average living wage, poverty wage, and minimum wage for the state of Wisconsin. The living wage is the hourly rate that an individual must earn to support their family, if they are the sole provider and are working full-time (2,080 hours per year). Poverty wage is typically quoted as a gross annual income. It is a calculated wage that is low enough that it would put an individual or family at poverty level. Minimum wage is the same for all individuals within a specific state, regardless of how many dependents they may have. Minnesota information may be found at http://livingwage.mit.edu/states/27.

	Table 16: Living Wage, Poverty Wage & Minimum Wage Rates for Wisconsin Families								
Hourly Wages	1 Adult	1 Adult, 1 Child	1 Adult, 2 Children	1 Adult, 3 Children	2 Adults	2 Adults, 1 Child	2 Adults, 2 Children	2 Adults, 3 Children	
Living Wage	\$8.87	\$19.95	\$26.64	\$34.60	\$14.24	\$17.31	\$18.74	\$21.94	
Poverty Wage	\$5.21	\$7.00	\$8.80	\$10.60	\$7.00	\$8.80	\$10.60	\$12.40	
Minimum Wage	\$7.25	\$7.25	\$7.25	\$7.25	\$7.25	\$7.25	\$7.25	\$7.25	
	ç	Source: Massa	achusetts Inst	itute of Techn	ology Living V	Vage Calculat	or		

lecinology villg wage

	Table 17: Monthly Expenses for Wisconsin Families							
Monthly Expenses	1 Adult	1 Adult, 1 Child	1 Adult, 2 Children	1 Adult, 3 Children	2 Adults	2 Adults, 1 Child	2 Adults, 2 Children	2 Adults, 3 Children
Food	\$242	\$357	\$536	\$749	\$444	\$553	\$713	\$904
Child Care	\$0	\$638	\$1,223	\$1,829	\$0	\$0	\$0	\$0
Medical	\$140	\$375	\$407	\$390	\$296	\$362	\$339	\$349
Housing	\$523	\$741	\$741	\$962	\$607	\$741	\$741	\$962
Transportation	\$306	\$595	\$686	\$736	\$595	\$686	\$736	\$748
Other	\$67	\$167	\$234	\$318	\$119	\$151	\$171	\$197
Required Annual Income	\$18,445	\$41,487	\$55,408	\$71,971	\$29,617	\$36,000	\$38,989	\$45,632
	Sourc	ce: Massachu	usetts Institut	e of Technolo	gy-Living Wa	age Calculat	or	

Table 17 shows the typical monthly expenses in Wisconsin for different family types.

Figure 13 shows the percentage of children in the Great Rivers Region under the age of 18 who live in families with incomes below the Federal Poverty Level. Based on this U.S. Census data, the percentage of children living in poverty in La Crosse and Vernon Counties has decreased since the 2000 Census. The percentage of children living in poverty for Trempealeau and Houston Counties has increased, while Monroe County did not change significantly.

Figure 13: Percentage of Children Living in Poverty

An additional indicator for a community is the measure of food security. According to the U.S. Department



of Agriculture, "Food security for a household means access by all members at all times to enough food for an active, healthy life." **Food insecurity** is limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways. On a local level, one of the best ways our community measures food insecurity is participation in food assistance programs. These can include Food Share, Food Support, WIC, the National Lunch Program, and the use of food pantries. Figure 14 shows the number of Food Share (formally known as Food Stamps) participants in our area. FoodShare participants must meet certain income requirements. Resources can be used to buy foods such as breads, cereals, fruits, vegetables, meats, fish, poultry, dairy products, seeds, and plants to grow food. Funds can be accessed electronically through an Electronic Benefit Transfer (EBT) system. Although this program and others like it are assets to our community and offer assistance to those who need these services, to rely on statistics related to the use of these programs to reflect the true degree of need would be misguided. Limited access, availability, and social stigmas can limit the number of participants for these programs. Even so, the overall number of participants is increasing in our area.



Figure 14: Percentage of FoodShare Participants

Figure 15 shows the number of Free and Reduced Lunch Program (FRLP) participants in area schools. This is a federally regulated program that provides nutritious food to low-income students. It operates in over 100,000 public and private schools, as well as some childcare facilities. Participants qualifying for free meals are children from families at or below 130% of the Federal Poverty Level. Those between 130% and 185% poverty level are eligible for reduced-price meals, for which students will be charged no more than \$0.40. La Crosse and Monroe County participation is on the incline.



Figure 15: Free and Reduced Lunch Programs, Percent Participation

COMPASS NOW Random Household Survey respondents were asked to rate their community's efforts to reduce poverty and hunger (see **Figure 16** and **Figure 17**). The community views our overall efforts to reduce poverty as largely fair (37.4%) or poor (15.9%). Almost 50% of respondents said that local efforts to reduce hunger are good.







Source: COMPASS NOW 2015 Random Household Survey

INCOME/ECONOMIC

INCOME/ECONOMIC PROFILE | SOURCES CITED:

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A HEALTH PROFILE OF THE GREAT RIVERS REGION

Introduction

This portion of the COMPASS NOW Report serves as an overview of the Health of the Great Rivers Region. This segment is not meant to duplicate other available health reports but rather offer additional context to the COMPASS NOW 2015 community needs assessment and explore the influence health has on our community. It includes both a summary of the key health indicator data as well as related results from the COMPASS NOW 2015 Random Household Survey.

How healthy are we?

Measures of Overall Health

There are many measures that look at overall health of a population. Numerous organizations create and publish public reports on the overall health of specific states. One of the most widely known reports is "America's Health Rankings" by United Healthcare. In 2014, Minnesota was ranked third in the nation and Wisconsin was ranked seventh.

The World Health Organization (WHO) defines health as the state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity. This viewpoint has become increasingly accepted in recent decades. The health of a community depends on many different factors. These range from health behaviors, education, jobs, quality of health care, and the environment. The University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation have developed a national system of health rankings, by which every county within each state is ranked on data specific to their population¹. There are two rankings: an overall health outcomes score and an overall health factors score. The overall health outcomes measure indicates how long people live (mortality) and how healthy people feel while they are alive (morbidity). The health factors ranking is based on measures that are more predictive of future health outcomes – health behaviors, clinical care, socioeconomic factors, and the physical environment. The overall health outcomes, while Monroe County ranked lowest. Houston County ranked highest for the mortality ranking, while Monroe County ranked lowest. Vernon County ranked highest for the morbidity ranking, while Trempealeau County ranked lowest.

Table 1: 2015 County Health Rankings: Health Outcomes							
County*	Health Outcomes Ranking	Mortality Ranking	Morbidity Ranking				
La Crosse	19	25	18				
Monroe	54	58	41				
Trempealeau	43	38	48				
Vernon 27 41 8							
Houston	21	12	41				
Courses Count	ullealth Dankings Mak	ilizing Action Toward C	ommunity Hoolth				

Source: County Health Rankings, Mobilizing Action Toward Community Health. *Wisconsin counties' rankings are out of 72 counties and Minnesota's are out of 87 counties.

How healthy do we think we are we?

In the COMPASS NOW 2015 Random Household Survey, residents of the Great Rivers Region indicated their perception of the overall health of their community for both COMPASS NOW 2012 and COMPASS NOW 2015 (see **Figure 1** and **Figure 2**). In general, about 87% of the survey respondents rated the health of the people in their community as excellent or good. This is a considerable improvement from the 2011 survey, in which 76% rated their health as excellent or good. For county-specific response rates, see the report's Appendix.



Source: COMPASS NOW 2012 Random Household Survey, COMPASS NOW 2015 Random Household Survey

Local Birth and Death Rates

Birth and death rates are important indicators of a community's health. They can reflect general age-sex structure, fertility, economic prosperity, education, and quality of life within a community. Higher live birth rates can be directly linked to better medical attention throughout pregnancy and the birthing process. Lower death rates can be attributed to life-saving medications and procedures that ultimately help people live longer.

Wisconsin consistently has a lower **birth rate** than Minnesota. In 2014, there were 11.7 live births per 1,000 population in Wisconsin compared to 12.8 in Minnesota. Both continue to decline. Houston County was continuously lower than the state average. Vernon County consistently has higher birth rates than Wisconsin as a whole, while La Crosse County's rates are lower than Wisconsin. The Great Rivers Region's average birth rate was 12.4 births per 1,000 population.

Crude **death rates** are calculated in the same way as birth rates. Between 2008 and 2013, Minnesota, with an average of 7.4 deaths per 1,000, consistently had a lower death rate than Wisconsin, with an average of 8.3 deaths per 1,000 population. In general, all counties within the Great Rivers Region had higher death rates than corresponding state averages.

Caution: Due to the small population size in some of our counties, a few additional births or deaths each year could alter the rates that are given above.

What affects birth rates?

A number of important statistics should be considered when examining birth rates. These maternal and child health figures include teen pregnancy, low birth weight, prenatal care, and infant mortality. A data comparison of the Great Rivers Region is found in **Table 2**.

Table 2: Comparison of Maternal and Child Health Factors by County (Average Rates from 2010 through 2014)							
County/RegionTeen Birth Rate (per 1,000 Births)Low Birth Weight (%)1st Trimester Prenatal Care (%)Infant Mortality Rate 							
La Crosse	11.8	6.3	79.9	3.3			
Monroe	27.9	6.1	69.1	7.5			
Trempealeau	26.3	6.5	70.4	4.6			
Vernon	11.0	4.8	54.3	7.6			
Houston	12.4	3.3	86.4	8.4			
Wisconsin	22.1	7.1	77.5	5.9			
Minnesota	20.1	4.9	84.0	7.4			
Source: Wisconsin Department of Health Services, Wisconsin Public Health Profiles; Minnesota Department of Health,							

Irce: Wisconsin Department of Health Services, Wisconsin Public Health Profiles; Minnesota Department of Health Minnesota County Health Tables

For the purpose of this table, "teen" is defined as a woman under the age of 19 years old.

Teen pregnancy is an important factor, as it can lead to a huge economic and health strain on our society. Teen mothers and their children are less likely to complete high school and thus live at a poverty level. The negative health results of a teen pregnancy can include premature birth, a low birth weight infant, an increase in the infant death rate, child abuse and neglect, and father-absence. La Crosse and Vernon counties have lower teen birth rates than Wisconsin as a whole; however, Monroe and Trempealeau are both above the state average. Houston County has a lower teen birth rate than average in Minnesota.

Low birth weight is defined as a newborn weight of lower than 5 pounds, 8 ounces (2,500 grams). Many premature babies born before the thirty-seventh week of pregnancy have low birth weight. If a mother smokes, drinks alcohol, uses drugs, or has exposure to environmental toxins, the risk of low birth weight increases dramatically. In addition, the newborns face health risks such as respiratory illness and chronic lung disease, vision and hearing problems, and neuron-developmental impairments. Low birth weight deliveries are more common among women who begin prenatal care later in pregnancy, women with no health care coverage, lower socioeconomic status, and teens. All counties in the Great Rivers Region have birth weight rates that are lower than the state average.

Prenatal care that begins during the first trimester of a pregnancy has been shown to increase the odds of a healthy birth and a healthy baby. Medical conditions, environmental hazards, and lifestyle factors are just some of the risks that can be identified and addressed. The well-being of both mother and child is at risk when care is delayed or neglected altogether. Late prenatal care is related to low birth weight babies, pre-term deliveries, and an increase in infant mortality. Not only does early prenatal care improve the health of the mother and baby, but it has been shown to be cost effective in terms of health care. The Great Rivers Region average for mothers receiving first trimester prenatal care was approximately 72%, with Houston County being highest at 86.4%, and Vernon County having the lowest at 54.3%.

Prenatal care often includes identifying possible fetal problems and arranging modified prenatal care observation to best manage the outcome. Women who receive early prenatal care, preferably within the first trimester, are more likely to have a healthier pregnancy, delivery, and recovery overall. Prenatal care also

offers additional benefits to baby. One of these benefits includes a decreased likelihood of preterm labor, possibly resulting in a pre-term delivery. This is an important indicator of health because pre-term birth is the leading cause of newborn death and disability.

Infant mortality is measured by the number of infant (one year of age or younger) deaths per 1,000 live births. The infant mortality rate (IMR) is a useful indicator, used worldwide, as a measure of health and development. Health conditions originating in the prenatal period account for about 50% of infant deaths. There are an assortment of prenatal health conditions that occur just before, during, or after birth, such as pregnancy complications; complications of the placenta, cord, and membranes; and unspecified prematurity and low birth weight. Other causes of infant death may be attributed to infections and parasitic diseases, accidents, SIDS, congenital malformations, deformations, and chromosomal anomalies.

Overall, the Great Rivers Region infant mortality rate is 5.0 deaths per 1,000 births, which is slightly higher than state averages. La Crosse and Trempealeau Counties are lower than state and national averages.

It is important to note that some religious or ethnic groups within the Great Rivers Region do not believe in medical care except in an emergency. This may affect statistics like initiation of prenatal care. It can be difficult, as a county, to change these cultural practices; however, it is important to focus on outcomes and intervene when necessary.

What are the primary causes of death in the region?

The primary causes of death for counties in the Great Rivers Region are shown in **Figure 3**. Most of these causes are from chronic diseases which have a preventable component to them. Age also plays a part in how we die. Typically, chronic disease is the leading cause of death in older adults. Injury, unintentional, and accidental causes are more common for deaths occurring in the younger population.

Figure 3: 2013 Leading Causes of Death (rates per 100,000)



Wisconsin Interactive Statistics on Health (WISH) data query system; Minnesota Department of Health, County Health Tables.

What are the primary illnesses in the Great Rivers Region?

Not only do **chronic diseases** play a role in deaths in our community, they are also the primary cause of illness. Chronic diseases such as heart disease, hypertension, high cholesterol, cancers, and lung diseases like asthma and Chronic Obstructive Pulmonary Disease (COPD) are all too common among our community members. In 2012, about half of American adults (117 million people) had one or more chronic health conditions. One out of four adults had two or more chronic health conditions². In 2012, there were 26.6 million adults diagnosed with heart disease³. Approximately 70 million (29%) American adults have high blood pressure⁴. Furthermore, one in every six U.S. adults had high cholesterol⁵. In 2011 it was determined that 300 of every 100,000 Americans develop cancer annually⁶. This gives the U.S. the seventh highest cancer rate in the world⁶. It was estimated that 12.7 million U.S. adults have COPD; however, close to 24 million U.S. adults have evidence of impaired lung function, indicating an under-diagnosis of COPD⁷.

In the early 1900s, **infectious diseases** were the cause of most of our illnesses and deaths. Deaths from pneumonia, tuberculosis, and diarrhea were the primary causes of death. With the advancement of immunizations, antibiotics, and other treatments, deaths from these causes have been greatly reduced. Several infectious diseases are reportable illnesses that are now monitored at a local and national level. Immunization compliance rates by county for school age children range from 70-90%. As previously indicated, some population-based cultural differences may lead to a need to modify public health and health care provider's strategies to ensure adequate immunization to prevent outbreaks of vaccine preventable illnesses.

Table 3: Rates for Reportable Infectious Diseases (Rate per 100,000 Population), 2012										
	La Crosse Monroe Trempealeau Vernon Houston WI MN									
Chlamydia	336.0	315.5	217.2	124.2	148.6	410.6	335.5			
Food and Waterborne Illnesses 44.8 62.1 68.7 60.0 53.1 45.0 39.7										
Vaccine Preventable	Vaccine Preventable 107.8 39.9 89.3 206.5 - 81.9 -									
Lyme Disease	23.7	80.0	62.5	120.9	47.8	25.4	16.9			

Table 3 shows a number of the infectious diseases that are monitored today.

Source: Wisconsin Department of Health Services, Public Health Profiles; Minnesota Department of Health, County Health Tables.

Rate calculations were conducted using population data from 2010 census.

Food and waterborne illnesses for Wisconsin counties include E.coli, Hepatitis A, Salmonellosis, Shigellosis, and Campylobacter enteritis. Food and waterborne illnesses for Minnesota and Houston County include Salmonellosis, Shigellosis, and Campylobacter enteritis. Vaccine preventable diseases for Wisconsin counties include Haemophilus influenza type b, Hepatitis A, Hepatitis B, Influenza, Measles, Mumps, and Pertussis. For cases reported as <5, 5 was the number used in calculations.

Risky sexual behavior leads to an increase in **sexually transmitted infection** (STI) and/or **sexually transmitted disease** (STD). Rates of STIs have declined significantly from the late 1980s when HIV/AIDS was a major concern. Prevention efforts for HIV included major educational efforts within the secondary and higher educational systems. These efforts significantly decreased the rates of all STIs. As treatment for HIV has improved, the focus on prevention of STIs has decreased and there has been a gradual increase in the STI rates as a result. Statistics on STDs are based on the three conditions that physicians are required to report: chlamydia, gonorrhea, and syphilis. These represent only a fraction of the true burden of STDs. Some common diseases such as human papilloma virus (HPV) and genital herpes are not reported to the CDC. In 2013, the CDC estimated that there were nearly 20 million new STIs each year, half of these are among

young people aged 15-24 years old. In total, STIs account for approximately \$16 billion in health care costs⁸. During the same year, the U.S. chlamydia rate was 446.6 per 100,000 people, a 1.5% decrease since 2012. In the Great Rivers Region, chlamydia rates are highest among La Crosse County residents, probably in part due to the large college-age population, who participate in risky sexual behaviors more than other age groups. These students are also more likely to be diagnosed and treated in their college community, rather than in their home community. The gonorrhea rate was 106.1 per 100,000 people.

Food and waterborne illnesses that are known to arise locally include salmonella, giardia, and hepatitis. Salmonella and hepatitis are usually caused by consuming contaminated food. Giardia can be spread from person-to-person or through contaminated water. Most food and waterborne illnesses cause minor diarrhea, nausea, and vomiting, though these symptoms can become severe. Over the past several years, the rates of and waterborne illnesses have decreased in our area; however, an accidental contamination of food at a large event can cause these statistics to spike.

Vaccine preventable illnesses that are reported and monitored include measles and pertussis. Pertussis, also known as whooping cough, is a bacterial respiratory infection characterized by severe spasms of coughing. Before the introduction of the vaccination in the 1940s, pertussis was a major cause of illness and death among infants. Since the introduction of the pertussis vaccination, case reports of this illness decreased more than 99%. However, an increasing number of pertussis cases have been reported to the CDC since the 1980s, especially among adolescents aged 10-19 years and adults⁹. It is also felt that pertussis is underreported since many people who develop the illness do not seek treatment. The best way for pertussis to be managed to a lower level in the community is to ensure that all adults are vaccinated for this by receiving the tetanus, diphtheria, and pertussis vaccine (Tdap) in place of the usual tetanus-diphtheria vaccine (Td). Due to religious, ethnic, or cultural differences within the region, immunization rates in some counties are not as high. There was a significant increase in pertussis cases between 2011 (34 cases) and 2012 (166 cases) for La Crosse County. Pertussis rates rose in all Great Rivers counties during that same time period. County health departments need to monitor outbreak rates and, when possible, develop appropriate solutions.

The bacterium *Borrelia burgdorferi* causes **Lyme disease**, which was first discovered in the 1980s¹⁰. It is common to the Great Rivers Region due to a specific tick (generally carried by white-tail deer) that spreads the disease. Disease prevention strategies include educating residents to identify the disease, how to properly remove ticks, and how to avoid being bitten. Lyme disease is treatable; however, those that go undiagnosed or are diagnosed later in the disease cycle have a slower recovery rate. In 2012, Vernon County had the highest rates of Lyme disease at 119.9 cases per 100,000 population.

Mental illnesses are common in the United States and throughout the world. The National Institute of Mental Health estimates 26.2% of Americans (ages 18 and older) suffer from a diagnosable mental illness in any given year¹¹. Even though mental disorders are widespread, the main burden of illness is typically concentrated in a much smaller proportion (about 6%) of the population; primarily, those who suffer from a serious mental illness. Additionally, mental disorders are the leading cause of disability in the U.S. for people ages 15 to 44. Mental illness has a significant impact on the workplace that often goes unrecognized. Mental illness causes more days of work loss and work impairment than chronic health conditions such as asthma, diabetes, and heart disease. Data surrounding the issues of mental illness is scarce. A recent project, "The Burden of Mental Illness for the La Crosse and the Surrounding Region," highlights some of the data that has been gathered to illustrate the picture of mental illness in the Great Rivers Region¹². More than half of all mental disorders and problems with substance abuse begin by the age of 14¹³. The most common mental disorder experienced among adolescents is depression, occurring in more than 25% of high school students surveyed¹⁴. Unfortunately, many teens do not seek treatment for their disorder for fear of being stigmatized by peers or others¹⁵. The rate of psychiatric hospitalizations has remained stable over the past three to five years (see **Figure 4**). Although hospitalizations are stable, health care charges are substantial

and rising. Charges for clinic and emergency room visits and hospital stays due to mental illnesses for 2009-2010 in our region were over \$52.4 million (approximately \$24.9 million in 2009, and \$27.6 million in 2010).



Figure 4: Rate of Psychiatric Hospitalizations for Wisconsin Counties, 2008-2012

Table 4 indicates the number of deaths by suicide in the counties of the Great Rivers Region for 2012-2014. Suicide is one of the leading causes of death among younger generations (11- to 24-year-olds), resulting in many years of productive life lost. This is measured by the statistic years of potential life lost (YPLL). La Crosse County had a record number of suicides in 2014; however, Trempealeau County has the highest rate of suicides between 2012 and 2014. "The Burden of Suicide in Wisconsin" report released in 2008 indicates a higher rate of suicide in Wisconsin than in neighboring states¹⁶.

Table 4: Suicide rate for 2012-2014 (all age groups)						
County	Deaths b (2012-	Years of Potential Life Lost (YPLL)				
	#	Rate/100,000	# of Years			
La Crosse	59	1,973				
Monroe	10	7.4	310			
Trempealeau	18	20.5	647			
Vernon	7	7.7	168			
Houston* 10 17.5 N/A						
Source: Wisconsin Department of Health Services, Wisconsin Public Health Profiles; Minnesota Department of Health, County Health Tables						

*The calculated rate of suicides per 100,000 population in Houston County is based on population estimates from the 2010 U.S. Census. The number of suicides in Houston County were those occurring between the years 2011 and 2013. **Oral health** is not only important for quality of life, but is related to the health of the rest of the body. The state of Wisconsin released "*The Burden of Oral Disease*" report in 2010¹⁷. The report states, "While Wisconsin has made sufficient progress in improving the overall health status of Wisconsinites, oral disease continues to be a key health concern for the state." There is little information available on the overall oral health of children and adults in the Great Rivers Region. What is available is at a state level. In 2008-2009, 26% of Wisconsin Head Start children had untreated tooth decay, compared to 19% nationally. Of Wisconsin adults ages 35-44, 75% have no tooth loss, compared with 38% nationally. Of Wisconsin adults aged 65-74, 15% are toothless, compared with 24% nationally. Regarding oral preventive care, 51% of children have had sealants on their molars (32% nationally), and 75% of children and adults had a dental visit within the past twelve months (45% nationally). According to the Wisconsin Family Health Survey, in 2015, 25.8% of Wisconsin counties in the Great Rivers Region did not receive a dental visit within the last twelve months. This was slightly higher than the state average of 24%.

Wisconsin counties within the Great Rivers Region vary on their availability of fluoridation, with the rural counties having more wells and private water systems (see **Table 5**).

Table 5: Percent of Population exposed to Fluoridation						
Country	% of Population Served with Fluoridated Water:					
County	Community Water Systems	All Water systems				
La Crosse	50-74.9%	50-74.9%				
Monroe	25-49.9%	0-24.9%				
Trempealeau	50-74.9%	25-49.9%				
Vernon	0-24.9%	0-24.9%*				
Houston	N/A N/A					
Source: Wisconsin Department of Health Services. 2010 Burden of Oral Disease in Wisconsin. Available at: http://www.google.com/url?q=http://www.dhs. wisconsin.gov/publications/P0/P00209.pdf N/A=Data not available for Houston County *0% of Vernon County Community Water Systems have fluoridated water.						

What are the underlying risk factors or causes of illnesses?

How Lifestyle Affects Health

There is a clear connection between certain lifestyles or health habits. These habits are known as modifiable risk factors and are considered to be the major causes of death today. Research has suggested that between 35 and 40% of all deaths are caused by these risk factors. **Table 6** shows the connection between the risk factors and chronic diseases.

Table 6: Relationship of Risk Factors to Chronic Disease							
Risk Factor	Heart Disease Stroke	Cancer	Diabetes	Chronic Lung Disease/Asthma	Injury & Violence		
Tobacco	Х	Х		Х			
Poor Diet and Physical Inactivity	х	х	Х				
Alcohol Consumption		Х			Х		
Excess Stress	Х				Х		
Lack of Preventative Care X X X X X							
Source: The Epidemic of Chronic Disease in Wisconsin. WI Department of Health Services. 2011. Available at https:// www.dhs.wisconsin.gov/publications/p0/p00238.pdf							

 Table 7 shows the actual causes of death in the Great Rivers Region.

Table 7: Actual Causes of Death in Great Rivers Region, 2012						
County	Cause of Death	Rate per 100,000				
	Cancer all types	191.9				
	Heart disease	150.9				
La Crosse	Stroke	52.3				
	Unintentional injuries (including motor vehicle accidents)	46.2				
	Chronic lower respiratory disease	44.5				
	Cancer all types	235.0				
	Heart disease	210.4				
Monroe	Chronic lower respiratory disease	56.0				
	Diabetes	53.7				
	Stroke	51.5				
	Cancer all types	225.6				
	Heart disease	215.2				
Trempealeau	Chronic lower respiratory disease	65.9				
	Stroke	48.6				
	Unintentional Injuries (including motor vehicle accidents)	38.2				
	Heart disease	228.4				
	Cancer all types	208.2				
Vernon	Unintentional Injuries (including motor vehicle accidents)	77.3				
	Stroke	53.7				
	Nephritis	40.3				
	Cancer all types	189.2				
	Heart disease	131.4				
Houston	Unintentional Injuries (including motor vehicle accidents)	73.6				
	Stroke	68.3				
	Pneumonia/influenza	47.3				
So	ource: Scorecard, Health Science Consortium, University of Wisconsin-La	Crosse				

How common are these behaviors among adults in the Great Rivers Region?

According to the 2015 County Health Rankings, La Crosse County ranked fourth for health behaviors. This rank is based on a combination of behavioral factors (smoking, obesity, exercises, food and exercise environment, alcohol use, STIs, and teen births). Monroe County ranked the lowest of all Great Rivers counties at 59th. See **Table 8** for more details.

Table 8: Select Health Risks by County						
County/Region	Health Behavior Ranking (2015)	Adult Smoking (2006-2012)	Adult Obesity 2011	Excessive Drinking (2006-2012)	Motor Vehicle Mortality Rate (per 100,000; 2006-2012)	
La Crosse	4	15%	23%	26%	9	
Monroe	59	23%	30%	26%	12	
Trempealeau	36	19%	30%	24%	18	
Vernon	48	23%	30%	23%	21	
Houston	8	13%	26%	22%	13	
Wisconsin	-	18%	29%	24%	11	
Minnesota	-	16%	26%	19%	9	
Source: County Health Rankings Wisconsin has 72 counties and Minnesota has 87 counties.						

Please note that the rates in **Table 8** are reported in the County Health Rankings for 2015. These rates represent a combination of several years worth of data. For example, adult smoking is based on data combined from 2006-2012. Excessive drinking is a combination of binge and excessive drinking over this time frame. These statistics come from the Behavior Risk Factor Surveillance Survey, a telephone survey of residents in La Crosse County. Unfortunately, survey numbers are too small to report a yearly rate with any confidence. Thus, any recent changes in the rates of these behaviors are not reflect in the number in **Table 6**. However, short of completing a new survey, these are the best estimates available.

Tobacco use is the leading cause of death in the United States, causing over 480,000 deaths in 2013, including nearly 42,000 deaths from secondhand smoke exposure. This is the equivalent of one in five deaths annually, or 1,300 deaths every day¹⁸. Tobacco use has declined nationally from 23.2% in 2000 to 17.3% in 2010. Wisconsin's tobacco use rate has also declined from 24% in 2000 to 19% in 2010, and Minnesota's rate went from 19.8% to 14.9%¹⁹.

Obesity, the second leading cause of death in the United States, has increased significantly from 2000 to 2010. This increase has occurred nationally as well as within Minnesota, Wisconsin, and the Great Rivers Region. According to the CDC, between 2011 and 2012, 69% of U.S. adults age 20 years and older were overweight; 35% of them were obese. In 2013, 49.4% of adults 18 years and over met the Physical Activity Guidelines, and 23.9% of adults 18 years and over met the guidelines for muscle strengthening²⁰. According to the CDC, in 2012, 29% of Great Rivers Region adults were obese. This is the same as the Wisconsin average and higher than the Minnesota average of 23%.

Obesity is a significant issue in all of the counties in our region. Several initiatives which attempt to address obesity issues have been launched in the Great Rivers Region. These efforts increase access to fresh and affordable fruits and vegetables and other whole grains, and increase the bikeability and walkability of our region. These programs are intended to have long-term effects on obesity. Unfortunately, there is little uniformity to these programs in all areas of the Great Rivers Region. Several areas within the Great

Rivers Region, mainly located in Vernon and Monroe Counties, have been labeled "food deserts." See the Community profile for more information on this.

Excessive and risky alcohol use has long been an issue of concern in the Great Rivers Region. It has been identified as a major problem in each of the previous COMPASS NOW Reports. Alcohol use has a deep-rooted culture in our community going back to the late 1800s, in part due to the strong role of the brewing industry in our region. According to the Centers for Disease Control (CDC), excessive alcohol use, either in the form of heavy drinking (more than two drinks per day on average for men, or more than one for women) or binge drinking (drinking five or more drinks on a single occasion for men, or four or more for women), can lead to increased risk of health problems such as liver disease and/or unintentional injuries²¹. Excessive alcohol use is the third leading cause of death for people in the United States each year. Rates of alcohol dependence and alcohol abuse continue to be higher in Wisconsin than throughout United States. Counties in the Great River Region have similar rates of heavy drinking and binge drinking. The environment plays an important role in whether or not these behaviors have a significant public health impact. Rural areas of our region have a greater chance of alcohol-related motor vehicle crashes, whereas urban areas of our region are more likely to see alcohol poisoning, drowning, and other acts of violence worsened by high alcohol concentrations.

In 2012, the Wisconsin Department of Health Services determined that there were 43 alcohol-related deaths in the Great Rivers Region; however, death is not the only unintended consequence of excessive and risky alcohol use. The average rate of alcohol-related hospitalizations in the Great Rivers Region in 2014 was 2.3 hospitalizations per 1,000 people. La Crosse County had the highest rate at 3.4, which was significantly higher than the state average of 2 per 1,000 population. In 2014, approximately 24.2% of adults in the Great Rivers Region reported excessively drinking in the past 30 days. This was similar to the Wisconsin average of 24%, but higher than the Minnesota average of 19%.

According to the *2011 National Hospital Ambulatory Medical Care Survey*, **motor vehicle crashes** (MVC) accounted for 33,804 deaths, or 10.7 deaths per 100,000 population. Unintentional injuries are the fourth leading cause of death in the United States, and motor vehicle crashes (MVC) top this category nationally. Rates of MVCs vary significantly between counties in the Great Rivers Region. As stated above, counties with a greater percent of their highways as county roads, such as Monroe, Trempealeau, Vernon, and Houston, have a higher crash rate than La Crosse County. These rates are also higher than Wisconsin and Minnesota. Rates of alcohol-related motor vehicle fatalities have also been higher in Wisconsin than throughout the United States for many years. Wisconsin has 1.5 times the national rate of arrests for operating a motor vehicle while intoxicated and more than three times other liquor law violations.

How common are risky behaviors among our youth?

High school youth in the Great Rivers Region were surveyed on various health risks by completing the Youth Risk Behavior Survey (YRBS) in Wisconsin or the Minnesota Student Survey in Houston County. Results of key health behaviors are shown in **Table 9**.

Tobacco use among students has been on the decline for many years. In the 1990s, over 40% of high school students reported smoking in the past 30 days. Today, 17.3% of the youth in the Great Rivers Region reported using tobacco in the past 30 days. Houston County had the highest rate at 31%, while Trempealeau County had the lowest rate at 10.2%.

According to national results of the 2013 YRBS survey, approximately 17.3% of youth in the Great Rivers Region binge drank in the past 30 days, and 8% drove after drinking. This is a significant concern, especially given the nature of many poorly lit and narrow rural roads in our area. The combination of high speed, inexperience driving, and alcohol are potentially very dangerous.

Marijuana and other drug use continue to be on the rise in Wisconsin over recent years. Of youth who participated in the YRBS in the Great Rivers Region, 22.8% reported having ever used marijuana. The highest rates were found in La Crosse County and the lowest rates were in Houston County.

Although the majority of students in the Great Rivers Region reported feeling safe at school, reports of **violence**, bullying, and especially cyber-bullying have increased since the last COMPASS NOW Report.

Many of the **high risk sexual behaviors** reported by high school students on the YRBS have decreased significantly since 1993; however, a significant percentage of students are still engaging in risky sexual behaviors. Between 30-45% of youth in the Great Rivers Region reported ever having sexual intercourse.

The percent of youth in our area reporting that they considered a **suicide** attempt in the past 12 months ranged from about 7% to as high as 17%. Females are more likely to report this than males. Students reporting they feel less connected to their school are also more likely to report considering suicide.

	Table 9: Select 2013 Youth Risk Behaviors							
YRBS Data	La Crosse	Monroe	Trempealeau	Vernon	WI	Houston		
		•	Tobacco Use		_			
Used tobacco products in past 30 days	19.8%	11.6%	10.2%	14.0%	8.0%	31.0%		
Smoked in past 30 days	13.5%	17.4%	12.6%	10.4%	12.0%	9.5%		
			Alcohol Use					
Binge drinking in past 30 days	15.8%	22.5%	16.5%	16.4%	18.4%	5.5%		
Drove after drinking in past 30 days	6.9%	8.8%	8.8%	7.6%	8.9%	N/A		
			Drug Use					
Marijuana use ever	33.2%	28.3%	23.3%	16.0%	31.2%	13.0% (used alcohol and marijuana in past 30 days)		
Used inhalant ever	7.4%	9.0%	5.6%	5.2%	5.9%	N/A		
Used ecstasy ever	5.2%	5.1%	4.3%	4.0%	N/A	N/A		
Used prescription drug without a doctor's permission	16.1%	8.4%	13.1%	17.6%	14.9%	N/A		
			Violence		1			
Were ever hit, slapped or physically hurt by their boyfriend or girlfriend during the past 12 months	12.4%	10.6%	8.8%	3.2%	8.5%	6.2%		

Bullied on school property in past 12 months	29.5%	28.8%	32.1%	24.0%	22.7%	10.0%
Electronically bullied in past 12 months	N/A	21.5%	20.8%	16.8%	17.6%	13%
		Se	xual Activity			
Ever had sex	38.2%	45.0%	36.3%	32.4%	35.3%	39.2%
	·	Μ	ental Health	·		
Seriously considered suicide in past 12 months	16.8%	12.8%	12.2%	6.8%	13.2%	9.5%
Feeling sad or hopeless almost every day for 2 weeks	28.9%	23.9%	22.1%	15.2%	24.6%	30.5% (over last 12 months)
Hurt or injured yourself over the past 12 months without wanting to die	18.1%	15.7%	14.4%	10.0%	N/A	8.0%
Have attempted suicide	6.6%	6.8%	6.3%	3.6%	2.5%	5.0% (within last 12 months)

Source: Centers for Disease Control and Prevention (CDC). 1991-2013 High School Youth Risk Behavior Survey Data. Available at http://nccd.cdc.gov/youthonline/. Accessed on December 1, 2014; Minnesota Student Survey, 2013.

The CDC website represents this data at a state and national level. However, not all school districts within each county were required to participate in this survey. As part of a CDC grant, the YRBS was collected for La Crosse County in 2013. The YRBS is not generally available by county unless the county or school district voluntarily completes the online survey. Current cigarette use is defined as those who smoked at least one cigarette every day for 30 days. All high schools from La Crosse and Monroe counties participated in the online YRBS survey. The State of Wisconsin did not include a question regarding self-harm on the 2013 questionnaire.

It is important to note that Wisconsin and Minnesota administer different surveys to their high school students. Students in grades 6, 9, and 12 from Houston County complete the Minnesota Student Survey every three years. Not all indicators were comparable to the YRBS. Not all questions are asked at every school or reported in the county summaries.

How concerned are we about these health risks?

In the COMPASS NOW 2015 Random Household Survey, residents were asked to rate a series of eighteen concerns in the community. These results are shown in **Figure 5**. Health issues such as illegal drug use, bullying, alcohol use, obesity, prescription drug misuse, and over-the-counter drug misuse all ranked in the top half of community concerns. A comparison of issues by county is also shown in **Table 10**. Illegal drug use was the top rated concern for all counties. Suicide was one of the lowest rated concerns for all counties except Houston County, which ranked suicide as their eighth highest community concern.

Figure 5: Rating of Community Concerns



Source: COMPASS NOW 2015 I	Random Household Survey
Scale: No Concern=1;	Very Concerned=4

Table 10: Ranking of Health Concerns by County out of 18 Topics							
Concern	All Counties	La Crosse	Monroe	Trempealeau	Vernon	Houston	
Illegal Drug Use	1	1	1	1	1	1	
Alcohol Use	4	2	3	6	2	5	
Obesity	5	8	8	5	3	6	
Prescription Drug Misuse	7	4	2	10	9	11	
Over-the-Counter Drug Misuse	9	6	6	12	10	9	
Tobacco Use	10	13	11	9	8	10	
Hunger	12	10	13	14	12	12	
Suicide	14	12	14	8	14	8	
	Source:	COMPASS NOW	2015 Random H	Household Surve	у		

What are we doing to manage our health?

Quality of Health Care

Many national and regional organizations measure the quality of our health care. Minnesota and Wisconsin have consistently ranked very high in most of these measurements. In 2013, according to the Agency for Healthcare Research and Quality (AHRQ), Minnesota ranked first nationally, while Wisconsin ranked third in 2013. Wisconsin did especially well, ranking in the top 10% of states, for several measures, including adults age 40 years and older with diabetes who received at least two hemoglobin A1c measures in a calendar year, hospital heart attack patients who received angioplasty within 90 minutes of arrival, and hospice

patients who received care consistent with their end-of-life wishes. Minnesota leads the nation in most of the AHRQ measures, including having the highest ranked hospital in the nation (Mayo Clinic in Rochester), lowering the number of uninsured by 41%, and being ranked the best state in the country for long-term care.

Within the state of Wisconsin, 19 of the largest health systems have partnered to create the Wisconsin Collaborative for Healthcare Quality (WCHQ)²². Founded in 2003, the collaborative began developing, sharing, and publishing measures of clinical quality that were critical to overall health care improvement. The participants stated, "We see performance measurement and public reporting as vital and dual mechanisms for promoting greater transparency, improvement, efficiency, and equity within health care." Sharing health system level results and learning from each other has had a significant impact on overall health care quality. Gundersen Health System and Mayo Clinic Health System are the two primary healthcare providers within the Great Rivers Region that participate in this collaborative. Both organizations provide data on all of their hospital and clinic encounters.

Quality of clinical care is one of the measures included in the "2015 County Health Rankings Report." The clinical care measures include seven specific measurements within two dimensions: access to care and quality of care. According to these measures, La Crosse County ranked second in Wisconsin, and Houston County ranked sixth in Minnesota (**Table 11**). Houston County has the lowest preventable hospital stay rate in the region, followed by La Crosse County. All counties have between 89-92% of their diabetic Medicare enrollees screened. Houston County has the highest mammography screening rate, while Vernon County the lowest.

Table 11: 2015 Quality of Clinical Care & Measures of Access to Care								
	La Crosse	Monroe	Trempealeau	Vernon	Houston			
Clinical Care Rank in State	2	48	43	65	6			
	Meas	ures of Quality	of Care					
Preventable hospitals stays (rate per 1,000 Medicare enrollees)	39	61	59	59	30			
Diabetic screening (% of diabetic Medicare enrollees screened)	92%	92%	92%	89%	91%			
Mammography screening (% of female Medicare enrollees screened)	75.3%	70.2%	74.1%	59.3%	76.0%			
Primary care providers (ratio of population to providers)	710:1	1,611:1	3,255:1	1,375:1	1,570:1			
Uninsured (% under 65 without insurance in 2012)	9%	13%	11%	14%	9%			
Dentists	1167:1	2265:1	4226:1	2757:1	2089:1			
Mental Health Providers	423:1	755:1	1972:1	820:1	4700:1			
Source: Cour	ity Health Ranking	gs, Mobilizing Ac	tion Toward Comn	nunity Health.				

Wisconsin counties' rankings are out of 72 counties. Minnesota's are out of 87 counties.

Access to Health Care

Two measures of access are identified in the County Health Rankings Report and are available for Great Rivers Region counties (see **Table 11**). These measures are the rate of uninsured adults (based on 2012 data)

and the number of people per primary care providers (based on 2012 data). La Crosse and Houston scored the highest on the rate of uninsured adults. La Crosse County scored highest on the number of people per primary care provider. Trempealeau had the highest patient to primary care provider ratio at 3,255:1.

Access to dental care is also difficult to measure. Several areas within the Great Rivers Region are designated to be Federal Health Professional Shortage areas for dental care. This indicates a shortage of dentists providing care to low income populations. These areas include Vernon, Monroe, and parts of Trempealeau counties.

Participants in the COMPASS NOW 2015 Random Household Survey rated access to health care as one of the highest strengths, scoring an average of 3.36 on a scale of 1 to 4. Overall, 56% of Great Rivers Region respondents rated access to health care as excellent, and 35% rated access to health care as good. Access to mental health also rated fairly high by participants, with 37.9% rating it as excellent and 55% rating it as good. Access to dental care was rated slightly lower overall, with 31.3% rating it as excellent and just under 53% rating it as good. Older adults rated overall access to health care higher than younger adults. Those with a higher level of education rated access to health care better than those with a lower level of education, as did those with higher incomes. Males and females rated access to health care equally (see **Figure 6**).



Source: COMPASS NOW 2015 Random Household Survey

Access to all health care services was a reoccurring topic for discussion at COMPASS Council meetings and community conversations. This was especially true for mental health services and dental care access. Access could mean proximity to home, availability of public transportation to these areas, hours of operation, and/or the ability to utilize insurance at the most convenient or preferred health care institution.

The cost of health care

The cost of health care is a topic that continues to be discussed and debated, even after the passing of the Affordable Care Act (ACA), which was created in an attempt to make health care more available for those with little or no coverage. According to the U.S. Department of Health and Human Services, in 2013, U.S. health care spending was about \$9,255 per resident and accounted for 17.4% of the Gross Domestic Product (GDP). The Robert Wood Johnson Foundation identified some factors that are driving the cost of health care in the U.S., including fee-for-service reimbursement; fragmented care delivery systems; administrative burden of providers, payers, and patients; aging population, rising rates of chronic disease and comorbidities; and lifestyle factors/health choices.

With the enactment of the Affordable Care Act, millions of previously uninsured individuals have gained insurance coverage by purchasing private insurance packages or receiving Medicaid. According to the Kaiser Family Foundation, some key points from the implementation of the ACA are:

- On average, an uninsured person will incur considerably lower medical expenses than someone who is insured for the full year. In 2013, the average uninsured person had half the amount of medical expenditures as the average insured person (\$2,443 versus \$4,876)²³.
- In 2013, the cost of "uncompensated care" provided to uninsured individuals was \$84.9 billion. Uncompensated care includes health care services without a direct source of payment. In addition, people who are uninsured paid an additional \$25.8 billion out-of-pocket for their care²³.
- The majority of uncompensated care (60%) is provided in hospitals. Community based providers (including clinics and health centers) and office-based physicians provide the rest, providing 26% and 14% of uncompensated care, respectively²³.
- In 2013, \$53.3 billion was paid to help providers offset uncompensated care costs. Most of these funds (\$32.8 billion) came from the federal government through a variety of programs, including Medicaid and Medicare, the Veterans Health Administration, and other programs. States and localities provided \$19.8 billion, and the private sector provided \$0.7 billion²³.

COMPASS NOW 2015 Random Household Survey respondents were asked to rate their ability to pay for health care, dental care, and mental health care in the Great Rivers Region. **Figure 7** shows these results. Female respondents rated their ability to pay for dental care worse than males. The ability to pay for health care, dental care, and mental health care was ranked lower by respondents under age 65, those without a college degree, and those earning lower incomes. There were no significant differences based on race.



Figure 7: Affordability of Health Care, Dental Care, and Mental Health Care

Source: COMPASS NOW 2015 Random Household Survey

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APPENDIX 1 Random Household Survey Report

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Introduction

The COMPASS NOW 2015 community needs assessment included a Random Household Survey to complement the socioeconomic indicators. The objective of the household survey was to increase the understanding of the community's needs and their perceptions of the main challenges facing the region. Results from this survey were examined by respondent characteristics as well as compared to the previous survey results.

Methods

The COMPASS NOW Random Household Survey was developed and tested by a team of research experts in 2007. The same survey was used in spring 2011 and again in fall 2014. The 2014 survey was nearly identical to the 2011 survey to allow for comparisons. The survey included 88 items with questions covering major areas of community life, including: health, income and the economy, public safety, care giving, education and lifelong learning, community environment, and community concerns. The majority of the survey questions asked respondents to rate certain aspects of their community. Each question had a four-level response scale where1=poor, 2=fair, 3=good, and 4=excellent. There was no undecided, neutral middle, or a response of 'I don't know.' A 'does not apply' response was added to questions pertaining to education, care giving, and economic aspects, in the event that the respondent could not answer the question because the situation didn't apply to them.

The survey was mailed to 5,000 randomly selected households in La Crosse, Monroe, Trempealeau, Vernon, and Houston Counties, which make up the Great Rivers Region. A mailing service was used to draw the sample and manage the mailing list. The number of surveys mailed in each county was proportional to the number of households in the county. The surveys were also sent proportionately to the male head of household and the female head of household according to the male/female distribution in each county with a slight oversampling of adults under age 50 and males over age 50 to increase the possible response from these age-gender demographics. **Table 1** shows the geographic distribution of the household survey and response rate for each county.

Table 1: Random Household Survey Response Rates by County							
County	# of Households Received Survey	# of Households Returned Survey*	Response Rate				
La Crosse	2400	435	18.1%				
Monroe	900	124	13.8%				
Trempealeau	600	69	11.5%				
Vernon	650	90	13.8%				
Houston	450	67	14.9%				
Total 5000 791 15.8%							
*Note: Six s	*Note: Six surveys were returned without county or ZIP code identification.						

Each randomly selected household received a postcard one week in advance of the survey release to inform recipients of the COMPASS NOW community needs assessment and encourage their participation. The postcard also explained that the survey was also available online via Survey Monkey. The household surveys were mailed out on September 2, 2014. Respondents were asked to return their survey in the enclosed postage-paid self-addressed envelope by September 30. The eight-page survey included a cover letter explaining the purpose of the survey and the confidentiality of participating, a return envelope, and a drawing ticket for five \$50 gift cards to any grocery store in the region. The only requirement for entering the drawing was to return a completed survey. Three weeks after the survey was mailed, a reminder post card was sent to the entire sample to remind them to return the survey.

Survey responses were entered into the secure Survey Monkey data entry site and then transferred into SAS for data analysis. The data was analyzed in aggregate and disaggregated by county. Data analysis was also carried out examining differences in demographic characteristics including county of residence, gender, age, education level, income level, and race. Frequencies and mean scores for each survey item were calculated. Based on the calculated mean scores, survey items were ranked for discussion and compared to 2011 survey means. County differences in mean scores were tested for significance using analysis of variance in order to make inferences about a variety of issues at the regional and county level. Analyses of demographic characteristics were examined by comparing frequencies using chi-square analysis.

Results

A total of 791 surveys were returned for a total response rate of 15.8%. Six respondents did not identify which county they lived in. There were 67 surveys completed online. This was a lower response rate than the 2011 survey, in which 22% of selected households returned a survey, but was closer to the response rate of the survey sent in 2007 (response rate of 13.3%).

Profile of the Respondents

The random selection of the household sample ensured that every household in the region had an equal chance of being selected to receive a survey. We compared the demographics of the survey respondents to 2010 U.S. Census data and to the 2011 respondents to see how similar or different the sample was. In general, we found some differences in the survey sample to both the Great Rivers Region and the previous survey. See **Table 2**.

Compared to the general population of the Great Rivers Region, the survey sample had more female respondents than male respondents. Of survey respondents, 65% were female and 33% were male, compared to the general population, where women and men are represented equally. The age range of the respondents was 21-97. The median age was 52, which was considerably older than the median age of the Great Rivers Region, but significantly younger than the respondents surveyed in 2011. These differences between the sample and the general population did not surprise the COMPASS steering committee, as it has been our experience that older adults are more likely to complete surveys, as are women when compared to men. We found that even though surveys were addressed to a male householder, female householders still tended to be the ones to complete the survey.

Similar to the general population, 94% of the survey respondents were Caucasian. The educational attainment of the respondents tended to be higher than that of the general population. Among the respondents, 25% had a high school diploma or less, 30% had vocational school training or some college, and 44% were college graduates or had postgraduate training. According to the U.S. Census, by comparison, 35% of the Great Rivers Region has a high school diploma, 32% has an associate's degree or some college and 23% have a bachelor's degree or higher. The educational attainment was also significantly higher in the current survey than in the 2011 survey.

A majority of respondents owned their home (86%) relative to respondents who were renters (statistically higher than the 2011 survey). By comparison, 70% of the Great Rivers Region are homeowners. Of 2014 respondents, 32% had dependent children living at home, compared to the regional average of 29%. This was also statistically higher than the 2011 survey.

Table 2: Demographics of Household Survey by Year						
Characteristics	2011 Respondents (N=1100)	2014 Respondents (N=791)	Difference in demographics			
Gender						
Male	357 (32.5%)	259 (33.0%)				
Female	729 (66.2%)	507 (64.7%)	0.6727			
Prefer not to say/didn't answer	14 (1.3%)	18 (2.3%)				
Age						
21-35	97 (9.1%)	114 (15.0%)				
36-50	190 (17.8%)	234 (30.8%)				
51-64	377 (35.3%)	199 (26.2%)	<0.0001			
65+	405 (37.9%)	212 (27.9%)				
Average age (sd)	59.76 (16.22)	53.94 (15.98)	<0.0001			
Race						
White	1053 (95.7%)	747 (94.4%)				
Non-white	21 (1.9%)	22 (2.8%)	0.2041			
Didn't answer	26 (2.3%)	22 (2.8%)				
Education		· · ·				
High school diploma or less	361 (32.8%)	200 (25.3%)				
Vocational or some college	328 (29.8%)	234 (29.6%)	0.0003			
College or advanced degree	396 (36.0%)	351 (44.4%)	0.0002			
Didn't answer	25 (2.3%)	6 (0.8%)				
Income						
<\$25,000	298 (27.1%)	111 (14.0%)				
\$25,001-\$75,000	522 (47.4%)	344 (43.5%)	<0.0001			
\$75,001+	211 (19.2%)	272 (34.4%)	(0.0001			
Didn't answer	69 (6.3%)	64 (8.1%)				
Children living at home (% yes)	253 (24.3%)	253 (32.4%)	<0.0001			
Ownership (% rent)	199 (18.5%)	106 (13.8%)	0.0066			
Work for pay						
Yes		498 (63.9%)				
No	Notaclical	80 (10.3%)				
No/looking for work	Not asked	18 (2.3%)				
Retired		184 (23.6%)				

Figure 1 shows a comparison of respondents' household incomes compared to the general population. In general, the survey had a slightly higher representation from the \$75,000-100,000 household income and less in the \$10,000-25,000 income level. Household income was also significantly higher for the respondents in 2014 compared to the 2011 survey.



Figure 1: Household Income - Survey Compared to Overall Population

Summary: The survey respondents were more likely to be female, slightly older, have a higher level of education, more likely to have children living in home, and have a slightly higher income than the population. Race was similar to the population. Differences in demographics between the 2011 and 2014 surveys could result in many differences in interpretation of the results to the previous study.

Overall Rating of the Community as a Place to Live

Before starting on the issues sections of the survey, respondents were asked in which county they lived. They were also asked to rate their community as a place to live. Overall, respondents rated their communities highly. La Crosse and Houston Counties were rated the highest, and Monroe and Trempealeau Counties were rated the lowest (see **Figure 2**). There was a significant decline in ratings of their community between 2011 and 2014 by respondents in Trempealeau and Monroe Counties. Overall, 35% of respondents reported their community was an excellent place to live, and 54% indicated it was a good place to live.



Figure 2: Thinking of your community, how would you rate the area as a place to live?

Response to this question varied by education: 43% of those with a college degree stated their community was excellent, compared to 27% of those with some college or vocational training, and 30% of those with a high school diploma or less. Responses also varied by income, with a similar pattern – those with higher income rated their community as a place to live higher than lower income groups.

Aspects of Health

Respondents were asked to rate access to health care, ability to pay for health care, and their overall health status. Results from the current survey are shown in **Figure 3**, ranked from highest to lowest rating, including the mean scores from the 2011 survey, when a comparable question was asked. Items with an asterisk (*) indicate a significant difference from 2011 to 2014.



Figure 3: Perception of Aspects of Health Within the Community



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Average scores for all aspects of health *improved statistically* from the 2011 to 2014 survey. The highest rated item in the health category was access to health care followed by access to dental care, with a mean score of 3.46 and 3.39 respectively. Overall, 56.4% of survey respondents rated their **access to health care** as excellent in their community, 35% indicated it was good, 6.5% rated it fair, and 2.2% rated access as poor. Access to dental care was also rated high by respondents. See **Figure 4**. Ability to pay for mental health care was rated the lowest by respondents. Over one-third of respondents rated the ability to pay for health care, mental health care or dental care as fair or poor. See **Figure 5**.



Overall, 6.9% of respondents reported that not everyone in their household had insurance. Of respondents, 27% also reported avoiding needed care because of the cost. Neither of these questions varied statistically by county, but did differ by gender, age, education, and income. See **Figure 6** for differences by household income. **See In-Depth Analysis for more detail on comparisons.**



Access to health care, dental care, mental health care, and access to healthy food choices varied by county of residence, but ability to pay and overall mental health and dental health status did not vary by county. La Crosse County residents rated access to health care, dental care, mental health, and healthy food choices all higher than residents from the other four counties. Houston County residents also rated access highly. See **Figure 7.** Nearly 28% of Trempealeau County residents rated access to health care as fair or poor, and 12% of Monroe County residents indicated this. Nearly 30% of Trempealeau County residents rated access to dental care or access to mental health care as fair or poor. About one-in-five respondents from Trempealeau County reported their overall health was fair or poor. This was nearly double the rate in the other counties. About 30% of respondents from Houston and La Crosse Counties indicated their health was excellent. **See In-Depth Analysis for more detail.**



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Aspects of health by demographic characteristics

See In-Depth Analysis for more detail.

Gender: Females rated their overall mental health lower than males. Females rated their ability to pay for healthy food choices lower than males. Females rated their ability to pay for dental care lower than males. Females were more likely than males to report that in the past month they avoided seeing a doctor because of cost (31% reported this, compared to 19% of males).

Age: Older adult respondents were more likely to rate their overall health as fair or poor than those under age 65. Older adult respondents were more likely to rate most other aspects of health more positively. Access to health care was rated higher among those 65 and up, and lowest among those 21-50 years. Access to mental health care was rated higher by those over age 65. Access to healthy food choices was rated highest among those ages 51-64 years and lowest among those 21-50 years. Respondents over age 65 were more likely to say their ability to pay for healthy food choices was good or excellent. Younger respondents (under age 65) all rated their ability to pay for health care, dental care and mental health care lower than those over age 65. Younger respondents were more likely to report avoiding care due to cost (37% reported this) compared to 8% of adults over age 65.

Education: In general, respondents with lower educational attainment rated all aspects of health lower than those with some post-secondary education. Those with some college or vocational training rated all aspects of health lower than those with a college or advanced degree, although those with some college/vocational training rated the overall mental health about the same as those with less education. Additionally, those with some college/vocational training rated their overall health similarly to those with less education. Those respondents with less education (less than a college degree) were less likely to report that everyone in the household has health insurance. Those with some college or vocational training were more likely to report avoiding care in the past 12 months due to cost.

Income: Respondents earning less than \$25,000 were more likely to rate all aspects of health lower than those earning over \$25,000. Those earning between \$25,000 and \$75,000 rated all aspects of health lower than those earning more than \$75,000. Those earning less than \$25,000 were more likely to report someone in the household was without health insurance (17%) compared to those earning \$25,000-75,000 (8%) and those earning more than \$75,000 (2%). Those earning less than \$75,000 were more likely to report avoiding care in the past year because of cost.

Race: There were no differences in rating of aspects of health by race, except for access to mental health care. Over 25% of non-white respondents rated their access to mental health care as fair or poor, compared to 12% of white respondents.

Aspects of Public Safety

Respondents were asked to rate aspects of public safety in their community. Results from the current survey are shown in **Figure 8** ranked from highest to lowest rating, including the mean scores from the 2011 survey when a comparable question was asked.



Figure 8: Perception of Aspects of Public Safety within the Community

1=Poor; 2=Fair; 3=Good; 4=Excellent

Quality of emergency services and safety of the neighborhood and schools were rated the highest, and efforts to prevent crime and respond to major safety threats were rated the lowest. Overall, 39% of respondents indicated that emergency services in their community were excellent; 52% indicated they were good. All responses were rated higher in 2014 compared to the survey in 2011, although these differences were *not statistically significant*.

Ratings of "quality of law enforcement" varied by county. Respondents from Vernon and La Crosse counties were more likely to rate this as excellent, and respondents from Trempealeau were more likely to rate it as fair or poor. Ratings of "efforts to prevent crime" also varied by county. Respondents from Vernon County rated this the highest, while respondents from Trempealeau, Houston and Monroe Counties rated this lower. Ratings of "quality of emergency services" varied by county. Respondents from La Crosse County were more likely to rate this as excellent. Ratings of "ability to respond to major safety threats" varied by county. Respondents from La Crosse County were more likely to rate this as excellent. See **Figure 9**. **See In-Depth Analysis for more detail on comparisons**.



Figure 9: Aspects of Public Safety by County

1=Poor; 2=Fair; 3=Good; 4=Excellent

Aspects of health by demographic characteristics

See In-Depth Analysis for more detail.

Gender: There were no significant differences in respondents' ratings of public safety, except for their community's ability to respond to safety threats. Females rated their community's ability to respond to safety threats lower than males.

Age: Respondents over the age of 65 rated most aspects of public safety higher than younger respondents.

Education: Respondents with college or advanced degrees rated the safety of the neighborhood higher than those with less than a college degree. Those respondents with a college degree were also more likely to rate the safety of the schools as excellent, compared to only 24% of those with less education.

Income: Respondents with lower income rated quality of law enforcement, safety of their neighborhood, safety of schools, and quality of law enforcement poorer than those with higher education.

Race: Slightly more non-white respondents rated the quality of emergency services as excellent compared to white respondents. Non-white respondents were more "polar," meaning more likely to rate the ability to respond to major safety threats as either fair/poor or excellent.

Aspects of Education

Respondents were asked to rate aspects of education in their community. Results from the current survey are shown in **Figure 10** ranked from highest to lowest rating, including the mean scores from the 2011 survey, when a comparable question was asked. Items with an asterisk (*) indicate a significant difference from 2011 to 2014.



Figure 10: Aspects of Education within the Community

All aspects of education were rated statistically higher by the current survey respondents compared with the 2011 respondents except for quality of early education opportunities. Quality of higher education was rated the highest, followed by quality of schools grades 4K-12. Over 50% of respondents indicated the quality of higher education was excellent, while nearly 40% indicated the quality of schools grades 4k-12 in the community was excellent. Only 21% of respondents indicated that birth to age 3 opportunities were excellent. An equal number indicated this was fair or poor. See Figure 11.



Figure 11: Quality of Education Across the Lifespan

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¹⁼Poor; 2=Fair; 3=Good; 4=Excellent

All ratings of "aspects of education" varied by county of residence. Most aspects were rated higher by La Crosse and Houston County respondents and rated lower by Monroe, Trempealeau or Vernon County respondents. **See In-Depth Analysis for more detail.** Opportunities in your job to gain knowledge or skills and community resources to learn new skills or other hobbies, by county, are shown in **Figure 12**. While Trempealeau County residents rated higher opportunities in your job to gain knowledge or skills, they rated community resources to learn new skills lower than residents from other counties.



Figure 12: Aspects of Skills Training by County of Residence

1=Poor; 2=Fair; 3=Good; 4=Excellent

Aspects of education by demographic characteristics

See In-Depth Analysis for more detail.

Gender: There were no differences in respondent's ratings of aspects of education by gender.

Age: There were only minor differences in how respondents of different ages rated educational aspects. Respondents 21 to 50 years rated the quality of schools (4K-12) lower than older adults. Although they were more likely to rate it as fair or poor, they were equally as likely to say it was excellent as other respondents. Respondents under age 65 were more likely to rate community resources to learn new skills as fair or poor, over 35% indicating this. One-third of adults over age 65 said this was excellent. *(This might be reflective of who is more likely to use these resources.)*

Education: Those with a higher level of education were more likely to rate many aspects of education higher than those with less education. There was no difference by education in rating of birth-to-three education, quality of schools (4K-12), or opportunities in your job to gain knowledge or skills.

Income: Respondents with lower income rated lower their community as a place that meets the family's educational needs than those with higher education. Respondents with lower education also rated the quality of higher education poorer than those with higher education. Finally, 52% of respondents with income less than \$25,000 rated opportunities in your job to gain knowledge or skills as fair or poor.

Race: Non-white respondents were more likely to rate the quality of schools 4K-12 as good, fair, or poor than white respondents. No other differences were noted for ratings of education by race.

Aspects of Quality of Life

Respondents were asked to rate aspects of quality of life in their community. Results from the current survey are shown in **Figure 13** ranked from highest to lowest rating, including the mean scores from the 2011 survey when a comparable question was asked. Items with an asterisk (*) indicate a significant difference from 2011 to 2014.

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1=Poor; 2=Fair; 3=Good; 4=Excellent

The highest rated aspect of quality of life in the community was library services, followed by opportunities to volunteer and physical recreational activities for adults. Library services ratings decreased slightly from the 2011 survey responses; however, this was not statistically significant. *Improvements* were seen in all other aspects of quality of life except for efforts to protect the natural environment, which worsened from the 2011 survey. All "aspects of quality of life" varied by county of residence. Most aspects were rated higher by La Crosse and Houston County respondents and rated lower by Monroe, Trempealeau, or Vernon County respondents. **See In-Depth Analysis for more detail.**

Aspects of quality of life by demographic characteristics

See In-Depth Analysis in Appendix for more detail.

Gender: Most aspects of quality of life were rated similarly between male and female respondents. Female respondents rated their community lower as a place where people are treated respectfully. Females also rated lower their community as a place where people of different cultural/racial/ethnic backgrounds are included in decision-making.

Age: There were many significant differences by age in ratings of aspects of quality of life in the community. In general, respondents over age 65 rated aspects of quality of life higher or better than younger adults. Ratings for physical recreation for adults and opportunities to volunteer did not differ by age.

Education: Those with a higher level of education were more likely to rate aspects of quality of life higher than those with less education. Ratings for safe routes to school and work and efforts to protect the natural environment did not differ by education level.

Income: There were only a few significant differences in quality of life ratings by household income. Respondents with a household income less than \$25,000 were more likely to rate leisure time opportunities, physical recreation for adults, and opportunities to volunteer as fair or poor.

Race: There were no differences in white and non-white respondent ratings for any of the aspects of quality of life.

Aspects of Care Giving in the Community

Respondents were asked to rate aspects of care giving in their community. Results from the current survey are shown in **Figure 14** ranked from highest to lowest rating, including the mean scores from the 2011 survey when a comparable question was asked. Items with an asterisk (*) indicate a significant difference from 2011 to 2014.



Figure 14: Aspects of Care Giving in the Community

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The highest rated aspects of care giving were availability of quality child care and a place that meets the needs of the elderly. *Improvements* were seen in all aspects of care giving from the 2011 survey, although this was not statistically significant for "a place that meets the needs of the elderly." All "aspects of care giving" varied by county of residence. Most aspects were rated higher by La Crosse and Houston County respondents and rated lower by Monroe, Trempealeau, or Vernon County respondents. **See In-Depth Analysis for more detail.** Availability of quality child care varied significantly by county, with Trempealeau County respondents rating it the lowest, but ability to pay for child care was rated consistently across counties. See **Figure 15**.



Figure 15: Ratings of Child Care by County

Aspects of care giving by demographic characteristics

See In-Depth Analysis for more detail.

Gender: Aspects of caregiving were rated similarly by male and female respondents, except for "the community as a place that meets the needs of the elderly." More males rated this as excellent (25%) compared to females (16%).

Age: There were no differences in ratings of aspects of caregiving in the community by age.

Education: Those with a high school diploma or less were more likely to rate as excellent their community as a place that meets the needs of the elderly. Those with less education were also more likely to rate as excellent help to stay in the home. Those with less education were more likely to rate as excellent their community as a place that meets the needs of persons with disabilities. Finally, those with a high school diploma or less education were more likely to rate as excellent a high school diploma or less education were more likely to rate as excellent efforts to prevent abuse or neglect; *they were, however, also more likely to say this was fair or poor.*

Income: Aspects of caregiving varied significantly by household income. Those earning less than \$25,000 were more likely to rate fair or poor ability to pay for child care, a place that meets the needs of the elderly, access to help to stay in the home, and a place that meets the needs of persons with disabilities. Those earning \$25,000-75,000 were more likely to rate fair or poor availability of quality child care and ability to pay for child care.

Race: There were no differences between white and non-white respondent ratings for any of the aspects of caregiving.

Aspects of the Economy

Respondents were asked to rate economic aspects of life in their community. Results from the current survey are shown in **Figure 16** ranked from highest to lowest rating, including the mean scores from the 2011 survey when a comparable question was asked. Items with an asterisk (*) indicate a significant difference from 2011 to 2014.



Figure 16: Economic Aspects of Life in their Community

1=Poor; 2=Fair; 3=Good; 4=Excellent

The lowest rated economic aspect was "availability of jobs with wages that offer a good standard of living." See **Figure 17**.



Overall, 58.4% of respondents rated this as fair (41.1%) or poor (17.3%). This was an *improvement* from responses in 2011. Statistical *improvements* were also seen in all aspects of the economy from the 2011 survey except ability to pay for education and accessibility of convenient public transportation. The rating of one's ability to pay for education *worsened* from the 2011 survey. The highest rated economic aspects of life in the community were ability to pay for their own vehicle, ability to pay for housing, and ability to meet basic needs. See **Figure 18** for ratings of ability to pay for vehicle, housing, basic needs, and education. Overall, about one-quarter rated their ability to meet these basic needs as excellent, about half rated these as good, and another quarter rated these as fair or poor. Ability to pay for education, however, was rated as fair or poor by 56%.



All economic aspects varied by county of residence except for ability to pay for housing. **See In-Depth Analysis for more detail.** Most aspects were rated higher by La Crosse and Houston County respondents and rated lower by Monroe, Trempealeau, or Vernon County respondents. Availability of jobs with wages that offer a good standard of living was rated highest for La Crosse and Trempealeau County residents and lowest for Vernon County residents. See **Figure 19**. Ability to pay for basic needs by county of residence is shown in **Figure 20**.









Economic Aspects of Life by demographic characteristics

See In-Depth Analysis in Appendix for more detail.

Gender: There were a few differences in ratings of economic issues by gender. Females rated the availability of resources to help budget lower than males. Females rated the ability to pay for education lower than males (60% of females rated this as fair or poor compared to 47% of males). Females also rated access to convenient public transportation as lower than males.

Age: Younger respondents rated several economic aspects poorer than older respondents. Younger adults rated the ability to meet basic needs, ability to pay for housing, and ability to pay for their own vehicle lower than older adults. Younger adults were more likely to rate the accessibility of convenient public transportation as fair or poor (52% to 59%) compared to adults over age 65 (41%). Younger adults were more likely to rate as fair or poor the availability of resources to help budget. Younger adults rated lower efforts to reduce poverty compared to older adults. Of adults age 51 to 64, 67% indicated this was fair or poor, compared to 60% of adults age 21 to 50, and 43% of adults over age 65.

Education: Those with a higher level of education rated most economic aspects in the community higher than those with less education. There was no difference by education in rating of accessibility of convenient public transportation.

Income: Economic aspects varied significantly by household income. Those earning less than \$25,000 were more likely to rate fair or poor availability of jobs that offer a good standard of living (77%), ability to meet the basic needs (51%), ability to pay for housing (50%), ability of resources to help budget (51%), ability to pay for education (78%), availability of services for people needing extra help (50%), ability to pay for own vehicle (53%) efforts to reduce poverty (67%), and efforts to reduce hunger (43%). There was no difference by income for rating of accessibility of convenient public transportation.

Race: Non-white respondents were more likely to rate the availability of services for people needing extra help as fair or poor compared to white respondents. Of non-white respondents, 65% indicated this compared to white respondents (37%). There were no other differences between white and non-white ratings for any of the other economic aspects.

Issues in the Community

Respondents were asked to indicate their level of concern for their community for 18 different issues. Results from the current survey are shown in **Figure 21** ranked from highest to lowest rating, including the mean scores from the 2011 survey, when a comparable question was asked. Items with an asterisk (*) indicate a significant difference from 2011 to 2014.

The top five concerns identified by respondents were: **illegal drug use**, **alcohol use**, **identity theft**, **bullying**, and **prescription drug misuse**. In 2011, the top five concerns were: illegal drug use, financial problems experienced by local governments, alcohol use, obesity, and domestic, child, and elder abuse. Compared to the 2011, survey six issues were statistically rated as more of a concern, six were rated as less of a concern, and four were not statistically different. See **Table 3**.

Table 3: Change in Rating of Concern on Issues							
StatisticallyStatisticallyHigher ConcernLower Concern		No Statistical difference	New to the survey				
 Illegal drug use Identity theft Prescription drug misuse Over-the-counter drug misuse Hunger Suicide 	 Tobacco use Financial problems experienced by local governments Gambling Excessive personal debt Risk of losing your job Risk of foreclosure and bankruptcy 	 Alcohol use (slightly lower) Domestic abuse, child abuse, elder abuse (slightly higher) Obesity (slightly lower) Sexual abuse and sexual violence (slightly higher) 	BullyingFunding for schools				



Figure 21: Concern for Issues in the Community

1=Poor; 2=Fair; 3=Good; 4=Excellent

Ranking of community issues by county are shown in **Table 4**. Illegal drug use was the top rated concern in all counties. Alcohol use, identity theft, and bullying were in the top 6 of highest rated concerns for all counties.

	Table 4: Ranking of Community Issues by County										
Rank	La Crosse	Monroe	Trempealeau	Vernon	Houston						
1	Illegal drug use	Illegal drug use	Illegal drug use	Illegal drug use	Illegal drug use						
2	Alcohol Use	Rx Drug Misuse	Identity Theft	Alcohol Use	Bullying						
3	Rx Drug Misuse	Alcohol Use	Bullying	Obesity	Identity Theft						
4	Identity Theft	Identity Theft	Funding for Schools	Identity Theft	Funding for Schools						
5	Bullying	Bullying	Obesity	Bullying	Alcohol Use						
6	Over-the-Counter Drug Misuse	Over-the-Counter Drug Misuse	Alcohol Use	Funding for Schools	Obesity						
7	Domestic Abuse, Child Abuse, Elder Abuse	Domestic Abuse, Child Abuse, Elder Abuse	Domestic Abuse, Child Abuse, Elder Abuse	Domestic Abuse, Child Abuse, Elder Abuse	Domestic Abuse, Child Abuse, Elder Abuse						
8	Obesity	Obesity	Suicide	Tobacco Use	Suicide						
9	Funding for Schools	Funding for SchoolsTobacco UseRx Drug Misuse		Over-the-Counter Drug Misuse							
10	Hunger	Sexual Abuse and Sexual Violence	Rx Drug Misuse	Over-the-Counter Drug Misuse	Tobacco Use						
11	Sexual Abuse and Sexual Violence	Tobacco Use	Financial Problems - Local Governments	Sexual Abuse and Sexual Violence	Prescription Drug Misuse						
12	Suicide	Financial Problems - Local Governments	Over-the-Counter Drug Misuse	Hunger	Hunger						
13	Tobacco Use	Hunger	Sexual Abuse and Sexual Violence	Financial Problems - Local Governments	Financial Problems - Local Governments						
14	Financial Problems - Local Governments	Suicide	Hunger	Suicide	Sexual Abuse and Sexual Violence						
15	Gambling	Gambling	Gambling	Gambling	Excessive Personal Debt						
16	Risk of Losing Your Job	Excessive Personal Debt	Risk of Losing Your Job	Excessive Personal Debt	Gambling						
17	Excessive Personal Debt	Risk of Losing Your Job	Excessive Personal Debt	Risk of Losing Your Job	Risk of Losing Your Job						
18	Risk of Foreclosure and Bankruptcy	Risk of Foreclosure and Bankruptcy	Risk of Foreclosure and Bankruptcy	Risk of Foreclosure and Bankruptcy	Risk of Foreclosure and Bankruptcy						

Issues of Concern by demographic characteristics

See In-Depth Analysis for more detail. See Table 5 for ranking of top concerns by demographic characteristics.

Gender: Rating of community issues varied between males and females. Females rated obesity, alcohol use, and bullying as a bigger issue in the community compared to males. Males rated identity theft as a bigger issue in the community.

Age: Adults over age 65 rated hunger, tobacco use, alcohol use, over-the-counter drug misuse, illegal drug use, gambling, funding for schools, identity theft, sexual abuse and violence, domestic, child, and elder abuse, and suicide as greater community issues than younger adults. Adults less than 65 rated risk of losing your job, risk of foreclosure and bankruptcy, and excessive personal debt as greater community issues than older adults.

Education: Those with a high school diploma or less rated the following as a bigger problem in the community than those with more education: tobacco use, alcohol use, over-the-counter and prescription drug misuse, gambling, risk of losing your job, risk of foreclosure, identity theft, sexual abuse and violence, domestic, child, and elder abuse, and suicide. Those with some college or vocational training were more likely than those with higher education to rate as a significant issue: risk of losing your job, risk of foreclosure, and excessive personal debt. Those with a college or advanced degree rated obesity as a bigger problem in the community than those with less education.

Income: Those earning less than \$25,000 ranked most all the issues as more significant issues than other income groups: hunger, tobacco use, alcohol use, over the counter drug misuse, prescription drug misuse, gambling, risk of losing your job, risk of foreclosure and bankruptcy, excessive personal debt, financial problems experienced by local governments, sexual abuse and violence, bullying, domestic, child, and elder abuse, and suicide were all rated as higher concerns.

Race: Non-white respondents rated alcohol use, and risk of losing your job as bigger issues in the community.

Rank		ider	nity Issues by D	Age	
	Male	Female	21-50	51-64	65+
1	Illegal drug use	Illegal drug use	Illegal drug use	Illegal drug use	Illegal drug use
2	Identity Theft	Alcohol Use	Bullying	Identity Theft	Identity Theft
3	Rx Drug Misuse	Bullying	Obesity	Alcohol use	Alcohol Use
4	Alcohol Use	Obesity	Alcohol Use	Rx Drug Misuse	Bullying
5	Domestic Abuse, Child Abuse, Elder Abuse	Rx Drug Misuse	Rx Drug Misuse	Domestic Abuse,	
Rank		Education	1	Ra	ice
	<high school<="" td=""><td>Vocational/ Some college</td><td>College degree+</td><td>White</td><td>Non-White</td></high>	Vocational/ Some college	College degree+	White	Non-White
1	Illegal drug use	Illegal drug use	Illegal drug use	Illegal drug use	Illegal drug use
2	Identity Theft	Identity Theft	Alcohol Use	Alcohol Use	Alcohol Use
3	Rx Drug Misuse	Bullying	Obesity	Identity Theft	Bullying
4	Over-the-counter drug misuse	Alcohol Use	Rx Drug Misuse	Bullying	Rx Drug Misuse
5	Alcohol Use	Domestic Abuse, Child Abuse, Elder Abuse	Bullying	Rx Drug Misuse	Over-the-counter drug misuse
Rank		Income			
	<\$25,000	\$25,000-75,000	\$75,000+		
1	Illegal drug use	Illegal drug use	Illegal drug use		
2	Alcohol Use	Alcohol Use	Alcohol Use		
3	Bullying	Identity Theft	Identity Theft		
4	Domestic Abuse, Child Abuse, Elder Abuse	Bullying	Obesity		
5	Rx Drug Misuse	Rx Drug Misuse	Bullying		

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COUNTY COMPARISONS

OVERALL RATING OF COMMUNITY AS A PLACE TO LIVE	La Crosse 435 (55.4%)	Monroe 124 (15.8%)	Trempealeau 69 (8.8%)	Vernon 90 (11.5%)	Houston 67 (8.5%)	Difference in rating by county		
Poor/fair	7.4%	20.8%	25.4%	8.0%	9.2%			
Good	50.0%	63.3%	53.7%	61.4%	49.2%	<0.0001		
Excellent	42.6%	15.8%	20.9%	30.7%	41.5%			
Mean Score	Mean Score 3.35 2.93 2.88 3.22 3.32 <0.0001							
Trempealeau County respondents rated their community as a place to live lower than the other communities. 25% indicated their community rated fair or poor on this.								

ASPECTS OF HEALTH	La Crosse 435 (55.4%)	Monroe 124 (15.8%)	Trempealeau 69 (8.8%)	Vernon 90 (11.5%)	Houston 67 (8.5%)	Difference in rating by county
Overall health						
Poor/fair	10.9%	12.1%	19.1%	10.0%	17.9%	
Good	60.1%	76.6%	58.8%	71.1%	53.7%	0.0008
Excellent	29.0%	11.3%	22.1%	18.9%	28.4%	
Mean Score	3.18	2.98	2.99	3.09	3.09	0.0084
Overall mental health		·				
Poor/fair	6.7%	6.4%	10.1%	5.6%	9.0%	
Good	54.0%	58.9%	52.2%	57.8%	52.2%	0.8221
Excellent	39.3%	34.7%	37.7%	36.7%	38.8%	
Mean Score	3.14	3.27	3.28	3.31	3.30	0.9271
Overall dental health						
Poor/fair	13.7%	18.6%	23.2%	22.2%	16.4%	
Good	52.7%	52.4%	52.2%	47.8%	53.7%	0.3751
Excellent	33.6%	29.0%	24.6%	30.0%	29.9%	
Mean Score	3.17	3.06	2.91	3.00	3.07	0.0545
Access to health care						
Poor/fair	5.1%	11.4%	27.5%	9.0%	7.5%	
Good	30.6%	45.5%	31.9%	41.6%	37.3%	<0.0001
Excellent	64.4%	43.1%	40.6%	49.4%	55.2%	
Mean Score	3.58	3.28	3.10	3.39	3.43	<0.0001
Access to mental hea	lth care		·	·		
Poor/fair	11.2%	16.0%	29.5%	16.0%	17.2%	<0.0001
Good	35.3%	53.6%	32.8%	53.1%	37.5%	
Excellent	53.5%	30.4%	37.7%	30.9%	45.3%	
Mean Score	3.43	3.10	3.07	3.09	3.22	<0.0001

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Access to dental care						
Poor/fair	6.7%	12.9%	28.9%	14.4%	6.0%	
Good	31.6%	45.2%	30.4%	42.2%	38.8%	<0.0001
Excellent	61.7%	41.9%	40.6%	43.3%	55.2%	
Mean Score	3.52	3.23	3.01	3.24	3.46	<0.0001
Access to healthy food	d choices	1	1		J	<u>I</u>
Poor/fair	21.2%	19.4%	26.1%	15.7%	9.0%	
Good	37.4%	47.6%	39.1%	37.1%	44.8%	<0.0001
Excellent	55.9%	33.1%	34.8%	47.2%	46.3%	
Mean Score	3.48	3.11	3.03	3.29	3.34	<0.0001
Ability to pay for healt	th care		1			
Poor/fair	34.1%	45.2%	33.9%	32.6%	34.3%	
Good	43.2%	38.7%	45.6%	50.6%	46.3%	0.6008
Excellent	22.7%	16.1%	20.6%	16.9%	19.4%	
Mean Score	2.80	2.60	2.75	2.74	2.73	0.2936
Ability to pay for ment	tal health care	1	1			1
Poor/fair	37.0%	45.8%	37.5%	39.5%	37.9%	
Good	42.9%	41.7%	37.5%	46.5%	45.5%	0.4437
Excellent	20.1%	12.5%	25.0%	14.0%	16.7%	
Mean Score	2.74	2.51	2.75	2.60	2.65	0.1209
Ability to pay for dent	al care					
Poor/fair	33.7%	40.3%	41.2%	37.8%	32.8%	
Good	44.9%	44.4%	38.2%	47.8%	47.8%	0.6738
Excellent	21.4%	15.3%	20.6%	14.4%	19.4%	
Mean Score	2.77	2.60	2.62	2.62	2.70	0.3154
Ability to pay for healt	thy food choic	es				
Poor/fair	23.1%	32.3%	29.4%	23.6%	25.8%	
Good	50.6%	50.8%	47.1%	52.8%	45.5%	0.3397
Excellent	26.3%	16.9%	23.5%	23.6%	28.8%	
Mean Score	3.00	2.77	2.84	2.93	2.97	0.0652
Quality of water in the	e rivers and lak	kes in your com	imunity			
Poor/fair	34.9%	31.7%	40.3%	27.8%	47.8%	
Good	51.5%	60.2%	44.8%	51.1%	43.3%	0.0397
Excellent	13.6%	8.1%	14.9%	21.1%	9.0%	
Mean Score	2.73	2.74	2.70	2.90	2.49	0.0231
Everyone have insurance (% yes)	93.9%	92.7%	92.8%	87.6%	93.4%	0.2751
Avoid seeing a doctor in past 12 months because of cost (% yes)	26.6%	29.0%	24.6%	29.2%	27.3%	0.4461

- Access to health care, dental care, mental health care, and access to healthy food choices varied by county of residence, but ability to pay and overall mental health and dental health did not vary by county.
 - La Crosse County residents rated access to health care, dental care, mental health, and healthy food choices all higher than residents from the other four counties.
 - Houston County residents also rated access highly.
 - Nearly 28% of Trempealeau County residents rated access to health care as fair or poor, and 12% of Monroe County residents indicated this.
 - Nearly 30% of Trempealeau County residents rated access to dental care or access to mental health care as fair or poor.
- About one-in-five respondents from Trempealeau County reported their overall health was fair or poor. This was nearly double the rate in the other counties. About 30% of respondents from Houston and La Crosse Counties indicated their health was excellent.

ASPECTS OF PUBLIC SAFETY	La Crosse 435 (55.4%)	Monroe 124 (15.8%)	Trempealeau 69 (8.8%)	Vernon 90 (11.5%)	Houston 67 (8.5%)	Difference in rating by county	
Quality of law enforce	ement						
Poor/fair	14.2%	22.4%	33.8%	14.4%	28.4%		
Good	64.5%	64.5%	55.9%	61.1%	55.2%	0.0028	
Excellent	21.4%	12.1%	10.3%	24.4%	16.4%		
Mean Score	3.05	2.85	2.72	3.08	2.82	<0.0001	
Efforts to prevent crir	ne		^			^	
Poor/fair	22.3%	27.6%	32.8%	17.8%	28.4%		
Good	60.1%	61.8%	61.2%	61.1%	58.2%	0.0002	
Excellent	17.6%	10.6%	6.0%	21.1%	13.4%]	
Mean Score	2.64	2.78	2.69	3.02	2.72	0.0013	
Quality of emergency	/ services					<u>`</u>	
Poor/fair	6.0%	12.1%	14.7%	11.1%	13.6%		
Good	50.8%	53.2%	52.9%	53.3%	54.6%	0.0451	
Excellent	43.2%	34.7%	32.4%	35.6%	31.8%		
Mean Score	3.37	3.22	3.18	3.22	3.18	0.0103	
Safety of neighborho	od			· · · · · · · · · · · · · · · · · · ·		<u>`</u>	
Poor/fair	9.7%	12.2%	17.4%	7.8%	7.6%		
Good	58.2%	59.4%	55.1%	57.8%	59.1%	0.2129	
Excellent	32.0%	28.5%	27.5%	34.4%	33.3%		
Mean Score	3.21	3.15	3.10	3.26	3.21	0.5412	
Safety of schools							
Poor/fair	7.5%	11.4%	13.2%	8.0%	9.1%		
Good	63.2%	62.6%	58.8%	65.9%	59.1%	0.9041	
Excellent	29.3%	26.0%	27.9%	26.1%	31.8%		
Mean Score	3.21	3.14	3.13	3.18	3.21	0.6809	

Ability to respond to major safety threats							
Poor/fair	19.5%	33.1%	37.3%	33.0%	26.9%		
Good	64.1%	57.3%	52.2%	54.5%	61.2%	0.0223	
Excellent	16.4%	9.7%	10.5%	12.5%	11.9%		
Mean Score	2.95	2.73	2.69	2.74	2.79	0.0011	

• Rating of quality of law enforcement varied by county.

• Respondents from Vernon and La Crosse County were more likely to rate this as excellent, and respondents from Trempealeau were more likely to rate it as fair or poor.

- Ratings of efforts to prevent crime varied by county.
- Respondents from Vernon County rate this the highest, while respondents from Trempealeau, Houston and Monroe Counties rated this lower.
- Rating of quality of emergency services varied by county.
 - Respondents from La Crosse County were more likely to rate this as excellent.
 - Rating of ability to respond to major safety threats varied by county.
 - Respondents from La Crosse County were more likely to rate this as excellent, and respondents from Trempealeau were more likely to rate it as fair or poor.

ASPECTS OF EDUCATION	La Crosse 435 (55.4%)	Monroe 124 (15.8%)	Trempealeau 69 (8.8%)	Vernon 90 (11.5%)	Houston 67 (8.5%)	Difference in rating by county
A place that meets yo	our family's edu	icational needs	5			
Poor/fair	6.9%	21.9%	23.2%	17.1%	19.7%	
Good	41.4%	56.3%	55.4%	55.7%	42.9%	<.0001
Excellent	51.7%	21.9%	21.4%	27.1%	37.5%	
Mean Score	3.43	2.98	2.93	3.10	3.16	<.0001
Birth-to-three educat	ion					
Poor/fair	13.1%	24.4%	52.8%	37.3%	15.4%	
Good	52.7%	57.0%	34.0%	40.3%	59.6%	<.0001
Excellent	34.2%	18.6%	13.2%	22.4%	25.0%	
Mean Score	3.18	2.91	2.40	2.73	3.06	<.0001
Early education oppo	ortunities					
Poor/fair	7.4%	10.4%	27.3%	25.0%	7.4%	
Good	48.7%	54.0%	52.7%	47.1%	57.4%	<.0001
Excellent	44.0%	35.6%	20.0%	27.9%	35.2%	
Mean Score	3.36	3.23	2.86	3.00	3.26	<.0001
Quality of schools - 4	K-12					
Poor/fair	6.2%	14.6%	18.0%	14.9%	8.8%	
Good	44.5%	60.4%	59.0%	52.7%	54.4%	<.0001
Excellent	49.3%	25.0%	23.0%	32.4%	36.8%	
Mean Score	3.41	3.10	2.98	3.15	3.28	<.0001

Quality of higher edu	cation					
Poor/fair	2.3%	24.5%	18.3%	24.3%	14.0%	
Good	32.7%	47.2%	50.0%	43.2%	40.4%	۰.0001
Excellent	65.0%	28.3%	31.7%	32.4%	45.6%	
Mean Score	3.62	2.99	3.05	3.03	3.23	<.0001
Opportunities in your	job to gain kn	owledge or ski	lls			
Poor/fair	30.1%	50.6%	42.9%	49.2%	36.2%	
Good	39.8%	34.5%	40.8%	39.3%	38.3%	0.0003
Excellent	30.1%	14.9%	16.3%	11.5%	25.5%	
Mean Score	2.90	2.44	2.71	2.43	2.74	۰.0001
Community resources	s to learn new s	skills				
Poor/fair	21.8%	52.6%	64.1%	49.4%	24.2%	
Good	48.6%	34.2%	23.4%	36.7%	46.8%	۰.0001
Excellent	29.5%	13.2%	12.5%	13.9%	29.0%	
Mean Score	3.03	2.47	2.20	2.48	2.95	<.0001
All aspects of edu	ucation varied by	/ county of resid	ence. Most aspe	cts were rated	higher by La Cro	sse and

• All aspects of education varied by county of residence. Most aspects were rated higher by La Crosse and Houston County respondents and rated lower by Monroe, Trempealeau or Vernon County respondents.

ASPECTS OF QUALITY OF LIFE	La Crosse 435 (55.4%)	Monroe 124 (15.8%)	Trempealeau 69 (8.8%)	Vernon 90 (11.5%)	Houston 67 (8.5%)	Difference in rating by county
Leisure time opportu	inities					
Poor/fair	19.2%	39.8%	51.5%	35.6%	25.8%	
Good	51.5%	49.6%	36.8%	48.9%	48.5%	<.0001
Excellent	29.3%	10.6%	11.8%	15.5%	28.7%	
Mean Score	3.08	2.65	2.44	2.70	2.95	<.0001
Opportunities for you	uth to explore i	nterests and pa	articipate in pos	sitive activitie	s	
Poor/fair	21.1%	44.3%	52.9%	44.3%	45.5%	
Good	57.3%	45.9%	36.8%	44.3%	42.4%	<.0001
Excellent	21.6%	9.8%	10.3%	11.4%	12.1%	
Mean Score	2.99	2.57	2.32	2.61	2.61	<.0001
Opportunities to enjo	by fine arts and	cultural exper	iences			
Poor/fair	19.0%	62.1%	69.1%	57.8%	31.8%	
Good	48.2%	34.7%	20.6%	30.0%	43.9%	۰.0001
Excellent	32.9%	3.2%	10.3%	12.2%	24.2%	
Mean Score	3.11	2.22	2.06	2.37	2.83	<.0001
Physical recreation f	or adults					
Poor/fair	11.8%	34.2%	52.9%	34.4%	26.2%	
Good	47.2%	51.2%	32.4%	45.6%	44.6%	۰.0001
Excellent	41.0%	14.6%	14.7%	20.0%	29.2%	
Mean Score	3.27	2.76	2.51	2.74	2.95	<.0001

Safe bike routes to so	hool or work					
Poor/fair	37.8%	50.4%	73.5%	54.5%	47.7%	
Good	44.1%	38.8%	20.6%	34.1%	44.6%	<.0001
Excellent	18.2%	10.7%	5.9%	11.4%	7.7%	
Mean Score	2.71	2.46	1.97	2.35	2.43	۰.0001
Library services in you	ur community			•		
Poor/fair	11.4%	17.9%	30.9%	18.9%	15.2%	
Good	47.4%	62.6%	42.7%	53.3%	60.6%	۰.0001
Excellent	41.1%	19.5%	26.5%	27.8%	24.2%	
Mean Score	3.29	3.01	2.87	3.04	3.06	۰.0001
Efforts to protect the	natural enviror	nment				
Poor/fair	27.1%	44.7%	63.2%	32.6%	40.9%	
Good	55.3%	49.6%	27.9%	52.8%	53.0%	۰.0001
Excellent	17.6%	5.7%	8.8%	14.6%	6.1%	
Mean Score	2.86	2.52	2.18	2.73	2.55	۰.0001
Opportunities to volu	nteer			• •		
Poor/fair	7.7%	20.5%	38.8%	36.7%	13.9%	
Good	53.1%	60.7%	49.3%	41.1%	55.4%	۰.0001
Excellent	39.2%	18.9%	11.9%	22.2%	30.8%	
Mean Score	3.31	2.97	2.70	2.78	3.12	۰.0001
A place where people	are treated re	spectfully				
Poor/fair	27.5%	37.1%	39.7%	31.5%	35.4%	
Good	57.9%	50.0%	54.4%	56.2%	58.5%	0.004
Excellent	14.6%	12.9%	5.9%	12.4%	6.2%	
Mean Score	2.83	2.69	2.49	2.75	2.65	0.0027
A place where people	of different cu	Iltural/racial/e	thnic backgrou	nds are incluo	ded in decisior	-making
Poor/fair	38.2%	43.8%	55.2%	47.7%	63.5%	
Good	50.4%	47.9%	40.3%	45.4%	31.8%	0.0078
Excellent	11.5%	8.3%	4.5%	7.0%	4.7%	
Mean Score	2.66	2.57	2.34	2.44	2.29	0.0002

ASPECTS OF CAREGIVING	La Crosse 435 (55.4%)	Monroe 124 (15.8%)	Trempealeau 69 (8.8%)	Vernon 90 (11.5%)	Houston 67 (8.5%)	Difference in rating by county		
Availability of quality	Availability of quality child care							
Poor/fair	23.4%	27.1%	66.7%	51.0%	23.8%			
Good	54.7%	50.0%	25.6%	34.7%	57.1%	<0.0001		
Excellent	21.9%	22.9%	7.7%	14.3%	19.1%			
Mean Score	2.96	2.90	2.23	2.53	2.90	<0.0001		

Ability to pay for child	d care					
Poor/fair	51.4%	49.0%	58.6%	44.2%	32.4%	
Good	32.6%	46.9%	27.6%	51.2%	55.9%	0.0465
Excellent	16.0%	4.1%	13.8%	4.7%	11.8%	
Mean Score	2.53	2.41	2.34	2.42	2.71	0.4140
A place that meets th	e needs of the	elderly				
Poor/fair	23.8%	35.7%	48.4%	40.8%	35.5%	
Good	55.2%	45.5%	35.5%	40.7%	53.2%	<0.000
Excellent	21.0%	18.8%	16.1%	18.5%	11.3%	
Mean Score	2.94	2.73	2.45	2.67	2.63	<0.0001
Access to help to stay	/ in the home			·		
Poor/fair	31.9%	36.0%	48.3%	42.5%	45.6%	
Good	47.9%	45.4%	44.8%	43.9%	38.6%	0.0074
Excellent	20.2%	18.6%	6.9%	13.6%	15.8%	
Mean Score	2.85	2.74	2.41	2.56	2.63	0.0014
A place that meets th	e needs of per	sons with disa	bilities			
Poor/fair	27.1%	40.9%	58.0%	43.2%	44.2%	
Good	54.6%	43.6%	33.9%	46.0%	44.3%	0.0002
Excellent	18.3%	15.5%	8.1%	10.8%	11.5%	
Mean Score	2.89	2.69	2.37	2.58	2.61	<0.0002
Efforts to prevent abu	use or neglect					
Poor/fair	26.2%	38.3%	59.3%	43.6%	32.2%	
Good	55.8%	47.7%	25.4%	43.7%	58.1%	0.0001
Excellent	18.0%	14.0%	15.3%	12.7%	9.7%	
Mean Score	2.88	2.68	2.42	2.62	2.68	<0.000
Availability of service	s that meet th	e needs of abu	sed	`		
Poor/fair	26.0%	45.6%	64.9%	48.5%	38.6%	
Good	55.5%	46.5%	28.1%	42.9%	50.9%	<0.000
Excellent	18.5%	7.9%	7.0%	8.6%	10.5%]
Mean Score	2.89	2.51	2.26	2.46	2.61	<0.000

• Respondents from Trempealeau and Vernon Counties rated availability of quality child care significantly poorer than respondents from the other counties. Two-thirds of residents from Trempealeau rate this as fair or poor. Half of residents from Vernon County reported this. Of La Crosse and Monroe County respondents, 22-23% reported this was excellent.

• Ability to pay for child care was rated higher by La Crosse and Houston County residents. More La Crosse County residents rated it as excellent (16%); however, over half of residents also rated it as fair or poor. Over 58% of respondents from Trempealeau rated ability to pay for child care as fair or poor.

• La Crosse County respondents rated their community higher as a place that meets the needs of the elderly, access to help to stay in the home, a place that meets the needs of persons with disabilities, efforts to prevent abuse or neglect, and availability of services that meet the needs of abused, than respondents from other counties.

• Over half of Trempealeau County respondents rated access to help to stay in the home, a place that meets the needs of persons with disabilities, efforts to prevent abuse or neglect, and availability of services that meet the needs of abused as fair or poor.
ECONOMIC ASPECTS	La Crosse 435 (55.4%)	Monroe 124 (15.8%)	Trempealeau 69 (8.8%)	Vernon 90 (11.5%)	Houston 67 (8.5%)	Difference in rating by county
Availability of jobs w	ith wages that	offer a good st	andard of living			
Poor/fair	51.8%	66.0%	51.6%	75.9%	69.5%	
Good	40.4%	27.4%	35.9%	20.5%	25.4%	0.0013
Excellent	7.8%	6.6%	12.5%	3.6%	5.1%	
Mean Score	2.43	2.19	2.42	1.99	2.15	<0.0001
Ability to meet basic	needs					
Poor/fair	22.5%	32.8%	31.8%	29.2%	21.5%	
Good	47.1%	48.7%	45.5%	51.7%	53.9%	0.0289
Excellent	30.4%	18.5%	22.7%	19.1%	24.6%	
Mean Score	3.05	2.77	2.80	2.83	2.94	0.0040
Ability to pay for hou	using			·		
Poor/fair	21.8%	31.1%	28.6%	28.7%	23.4%	
Good	48.9%	49.1%	47.6%	48.3%	43.8%	0.1768
Excellent	29.3%	19.8%	23.8%	23.0%	32.8%	
Mean Score	3.04	2.82	2.89	2.89	2.98	0.0704
Availability of resour	rces to help bug	lget				•
Poor/fair	30.6%	39.6%	57.7%	40.0%	29.0%	
Good	54.4%	51.5%	36.5%	50.0%	58.1%	0.0017
Excellent	15.0%	8.9%	5.8%	10.0%	12.9%	
Mean Score	2.79	2.61	2.29	2.57	2.69	0.0002
Ability to pay for edu	ication					
Poor/fair	50.8%	59.8%	60.9%	67.2%	61.2%	
Good	33.4%	32.9%	23.9%	26.2%	28.6%	0.123
Excellent	15.8%	7.3%	15.2%	6.6%	10.2%	
Mean Score	2.49	2.18	2.33	2.13	2.20	0.0100
Availability of servic	es for people n	eeding extra he	elp	·		
Poor/fair	33.3%	46.7%	48.2%	42.0%	40.7%	
Good	51.3%	44.6%	46.4%	52.2%	52.5%	0.0269
Excellent	15.4%	8.7%	5.4%	5.8%	6.8%	
Mean Score	2.77	2.50	2.43	2.51	2.58	0.0008
Accessibility of conv	enient public tr	ansportation		·		·
Poor/fair	34.3%	72.4%	84.6%	72.4%	61.9%	
Good	50.8%	21.9%	11.5%	17.1%	34.9%	<0.0001
Excellent	14.9%	5.7%	3.9%	10.5%	3.2%	
Mean Score	2.71	1.89	1.52	1.93	2.13	<0.0001

Ability to pay for owr	n vehicle					
Poor/fair	22.8%	28.9%	39.1%	27.4%	23.1%	
Good	46.4%	47.1%	37.5%	50.0%	52.3%	0.083
Excellent	30.8%	24.0%	23.4%	22.6%	24.6%	
Mean Score	3.07	2.85	2.72	2.87	2.95	0.0047
Efforts to reduce pov	verty					
Poor/fair	49.8%	65.0%	78.7%	65.0%	57.4%	
Good	43.1%	29.9%	19.7%	30.0%	39.3%	0.0015
Excellent	7.1%	5.1%	1.6%	5.0%	3.3%	
Mean Score	2.45	2.16	2.00	2.15	2.30	<0.0001
Efforts to reduce hur	iger					
Poor/fair	30.2%	36.6%	54.6%	37.6%	32.8%	
Good	51.7%	51.7%	39.1%	50.6%	53.1%	0.0256
Excellent	18.1%	11.7%	6.3%	11.8%	14.1%	
Mean Score	2.83	2.66	2.38	2.62	2.75	0.0003

• Trempealeau County residents were more likely to rate availability of jobs with wages that offer a good standard of living as excellent compared to respondents from other counties.

- Trempealeau County residents were more likely to rate fair or poor:
 - Ability to meet basic needs
 - Availability of resources to help budget
 - Availability of services for people needing extra help
 - Accessibility of convenient public transportation
 - Efforts to reduce poverty
 - Efforts to reduce hunger
- Monroe County residents rated fair or poor:
 - Availability of jobs with wages that offer a good standard of living
 - Ability to meet basic needs
 - Availability of services for people needing extra help
 - Accessibility of convenient public transportation
 - Efforts to reduce poverty
 - Vernon County residents rated fair or poor:
 - Availability of jobs with wages that offer a good standard of living
 - Availability of resources to help budget
 - Availability of services for people needing extra help
 - Accessibility of convenient public transportation
 - Efforts to reduce poverty
- La Crosse County respondents were more likely to rate excellent:
 - Ability to meet basic needs
 - Availability of services for people needing extra help
 - Efforts to reduce hunger

ISSUES IN THE COMMUNITY	La Crosse 435 (55.4%)	Monroe 124 (15.8%)	Trempealeau 69 (8.8%)	Vernon 90 (11.5%)	Houston 67 (8.5%)	Difference in rating by county
	Mean (rank)	Mean (rank)	Mean (rank)	Mean (rank)	Mean (rank)	
Hunger	2.71 (10)	2.55 (13)	2.48 (14)	2.54 (12)	2.45 (12)	0.0537
Obesity	2.81 (8)	2.88 (8)	2.72 (5)	2.86 (3)	2.75 (6)	0.7825
Tobacco Use	2.59 (13)	2.75 (11)	2.63 (9)	2.69 (8)	2.49 (10)	0.4143
Alcohol Use	3.00 (2)	2.98 (3)	2.71 (6)	2.88 (2)	2.78 (5)	0.2038
Over-the-Counter Drug Misuse	2.85 (6)	2.96 (6)	2.51 (12)	2.67 (10)	2.52 (9)	0.0019
Prescription Drug Misuse	2.93 (4)	3.05 (2)	2.59 (10)	2.68 (9)	2.46 (11)	<.0001
Illegal drug use	3.36 (1)	3.34 (1)	3.07 (1)	3.02 (1)	3.03 (1)	0.0005
Gambling	2.06 (15)	2.26 (15)	2.07 (15)	2.15 (15)	1.83 (16)	0.0514
Risk of Losing Your Job	2.02 (16)	1.83 (17)	1.94 (16)	2.07 (17)	1.67 (17)	0.0505
Risk of Foreclosure and Bankruptcy	1.79 (18)	1.73 (18)	1.65 (19)	1.87 (18)	1.58 (18)	0.2971
Excessive Personal Debt	1.98 (17)	2.00 (16)	1.92 (17)	2.10 (16)	1.95 (15)	0.8396
Financial Problems Experienced by Local Governments	2.54 (14)	2.73 (12)	2.53 (11)	2.48 (13)	2.39 (13)	0.1583
Funding for Schools	2.73 (9)	2.79 (9)	2.76 (4)	2.74 (5)	2.82 (4)	0.9426
Identity Theft	2.92 (3)	2.98 (3)	2.94 (2)	2.79 (4)	2.86 (3)	0.6292
Sexual Abuse and Sexual Violence	2.68 (11)	2.76 (10)	2.49 (13)	2.61 (11)	2.34 (14)	0.0297
Bullying	2.88 (5)	2.97 (5)	2.94 (2)	2.74 (5)	3.00 (2)	0.3957
Domestic Abuse, Child Abuse, Elder Abuse	2.84 (7)	2.93 (7)	2.68 (7)	2.74 (5)	2.68 (7)	0.2349
Suicide	2.60 (12)	2.44 (14)	2.66 (8)	2.35 (14)	2.55(8)	0.1212

• Respondents from Houston County rated over the counter drug misuse, prescription drug misuse, illegal drug use and sexual abuse and violence as less of a community issue than respondents from other counties.

• La Crosse County residents rated illegal drug use, alcohol use and identity theft as the top three issues in the community.

• Monroe County residents rated illegal drug use, prescription drug misuse, alcohol use and identity theft as the top three issues in the community.

- Trempealeau County residents rated illegal drug use, identity theft, bullying, and funding for schools as the top three issues in the community.
- Vernon County residents rated illegal drug use, alcohol use, and obesity as the top three issues in the community.
- Houston County residents rated illegal drug use, bullying, and identity theft as the top three issues in the community.

GENDER COMPARISONS

ASPECTS OF HEALTH	Male 251 (33.6%)	Female 497 (66.4%)	Difference in rating by gender
Overall health	· · ·		
Poor/fair	15.9%	10.1%	
Good	62.0%	64.8%	0.1276
Excellent	22.1%	25.1%	
Overall mental health			
Poor/fair	6.6%	6.5%	
Good	47.7%	59.1%	0.0094
Excellent	45.7%	34.4%	
Overall dental health			
Poor/fair	20.6%	14.0%	
Good	49.0%	54.5%	0.0885
Excellent	30.4%	31.5%	
Access to health care			
Poor/fair	9.3%	8.1%	
Good	33.9%	35.7%	0.6108
Excellent	56.8%	56.2%	
Access to mental health care			
Poor/fair	12.5%	12.1%	
Good	40.4%	43.3%	0.8696
Excellent	47.1%	44.6%	
Access to dental care			
Poor/fair	10.1%	10.4%	
Good	37.8%	34.9%	0.3647
Excellent	52.1%	54.7%	
Access to healthy food choices			
Poor/fair	8.9%	12.9%	
Good	39.1%	40.1%	0.6897
Excellent	52.0%	47.0%	
Ability to pay for health care			
Poor/fair	32.8%	37.1%	
Good	41.4%	44.8%	0.0991
Excellent	25.8%	18.1%	
Ability to pay for mental health care			
Poor/fair	38.1%	38.8%	
Good	39.3%	45.1%	0.0573
Excellent	22.6%	16.1%	

Ability to pay for dental care			
Poor/fair	36.5%	35.1%	
Good	40.0%	47.6%	0.0341
Excellent	23.5%	17.3%	
Ability to pay for healthy food choices			
Poor/fair	20.2%	27.2%	
Good	48.8%	51.5%	0.0164
Excellent	31.0%	21.3%	
Everyone have insurance (% yes)	92.6%	93.2%	0.7618
Avoid seeing a doctor in past 12 months because of cost (% yes)	18.6%	31.4%	0.0002

• Females rated their overall mental health lower than males.

• Males were more likely to rate their overall mental health as excellent (46%), whereas females were more likely to rate their mental health as good (59%).

- A similar number of males and females rated their overall mental health as fair/poor (6.5%).
- Females rate their ability to pay for healthy food choices lower than males.
- Males were more likely to say their ability to pay for healthy food was excellent (31%) compared to 21% of females.
- Females were more likely to indicate this was good or fair/poor.
- Females rated their ability to pay for dental care lower than males.
- Males were more likely to say their ability to pay for dental care was excellent (24%) compared to 17% of females that indicated this.
- Females were more likely to indicate their ability to pay for dental care was good.
- A similar number of males and females indicated their ability to pay for dental care was fair/poor (35-36%).
- Females were more likely than males to report that in the past month they avoided seeing a doctor because of cost (31% reporting this, compared to 19% of males).

ASPECTS OF PUBLIC SAFETY	Male	Female	Difference in rating
ASPECTS OF PUBLIC SAFELT	251 (33.6%)	497 (66.4%)	by gender
Quality of law enforcement			
Poor/fair	20.4%	16.6%	
Good	56.8%	66.1%	0.0876
Excellent	22.8%	17.3%	
Efforts to prevent crime			
Poor/fair	26.0%	22.3%	
Good	58.5%	62.1%	0.6782
Excellent	15.5%	15.6%	
Quality of emergency services			
Poor/fair	11.2%	7.4%	
Good	50.2%	52.7%	0.3609
Excellent	38.6%	39.9%	
Safety of neighborhood			
Poor/fair	12.8%	8.7%	
Good	55.3%	59.6%	0.1477
Excellent	31.9%	31.7%	

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Safety of schools			
Poor/fair	10.2%	8.2%	
Good	58.2%	64.2%	0.3228
Excellent	31.6%	27.6%	
Ability to respond to major safety threats			
Poor/fair	24.1%	25.1%	
Good	57.6%	63.1%	0.0345
Excellent	18.3%	11.8%	

• There were no significant differences in respondents' ratings of safety except for their community's ability to respond to safety threats.

• Females rated their community's ability to respond to safety threats lower than males. Only 12% of female respondents said this was excellent, compared to 18% of males.

	Male	Female	Difference in rating
ASPECTS OF EDUCATION	251 (33.6%)	497 (66.4%)	by gender
A place that meets your family's education	nal needs		,
Poor/fair	11.8%	12.4%	
Good	48.1%	46.2%	0.3517
Excellent	40.1%	41.4%	
Birth-to-three education			
Poor/fair	23.6%	19.9%	
Good	47.9%	53.1%	0.6696
Excellent	28.5%	27.0%	
Early education opportunities			
Poor/fair	14.0%	6.8%	
Good	46.1%	56.7%	0.2752
Excellent	39.9%	36.5%	
Quality of schools - 4K-12			
Poor/fair	10.9%	8.5%	
Good	45.5%	53.1%	0.3318
Excellent	43.6%	38.4%	
Quality of higher education			
Poor/fair	9.8%	10.2%	
Good	37.3%	38.7%	0.4555
Excellent	52.9%	51.1%]
Opportunities in your job to gain knowled	ge or skills		
Poor/fair	35.0%	37.0%	
Good	39.7%	39.0%	0.8895
Excellent	25.3%	24.0%	

Community resources to learn new skills					
Poor/fair	32.3%	33.6%			
Good	44.0%	42.0%	0.5888		
Excellent	23.7%	24.4%			
There were no differences in respondents' ratings of schests of education by gonder					

• There were no differences in respondents' ratings of aspects of education by gender.

	Male	Female	Difference in rating
ASPECTS OF QUALITY OF LIFE	251 (33.6%)	497 (66.4%)	by gender
Leisure time opportunities			1
Poor/fair	26.7%	27.6%	
Good	47.7%	51.2%	0.5847
Excellent	25.6%	21.2%	
Opportunities for youth to explore interest	s and participate in po	ositive activities	·
Poor/fair	30.5%	32.9%	
Good	52.3%	50.8%	0.6564
Excellent	17.2%	16.3%	
Opportunities to enjoy fine arts and cultur	al experiences		
Poor/fair	35.2%	35.5%	
Good	41.9%	40.9%	0.5133
Excellent	22.9%	23.6%	
Physical recreation for adults			
Poor/fair	21.0%	22.5%	
Good	46.3%	47.7%	0.806
Excellent	32.7%	29.8%	
Safe bike routes to school or work			
Poor/fair	46.1%	45.7%	
Good	38.3%	40.4%	0.8647
Excellent	15.6%	13.9%	
Library services in your community			
Poor/fair	15.1%	15.3%	
Good	54.7%	49.8%	0.4634
Excellent	30.2%	34.9%	
Efforts to protect the natural environment			
Poor/fair	34.2%	34.6%	
Good	50.2%	52.7%	0.4587
Excellent	15.6%	12.7%	
Opportunities to volunteer			
Poor/fair	16.4%	16.0%	
Good	51.6%	53.5%	0.9299
Excellent	32.0%	30.5%	

A place where people are treated respectfully				
Poor/fair	25.8%	33.4%		
Good	57.4%	56.1%	0.0049	
Excellent	16.8%	10.5%		
A place where people of different cultural,	racial/ethnic backgrou	unds are included in d	ecision-making	
Poor/fair	37.4%	46.4%		
Good	49.2%	46.3%	0.0085	
Excellent	13.4%	7.3%		
Most aspects of quality of life were rated similarly between male and female respondents				

Most aspects of quality of life were rated similarly between male and female respondents.
 Female respondents rated their community lower as a place where people are treated respondents.

Female respondents rated their community lower as a place where people are treated respectfully.

• One-third of females rated their community as fair or poor, compared to 25% of males.

• Females also rated their community lower as a place where people of different cultural/racial/ethnic backgrounds are included in decision-making.

• Of females, 46% rated their community as fair or poor, 46% rated it as good.

	Male	Female	Difference in rating
ASPECTS OF CAREGIVING	251 (33.6%)	497 (66.4%)	by gender
Availability of quality child care			
Poor/fair	26.0%	34.0%	
Good	51.2%	47.9%	0.282
Excellent	22.8%	18.1%	
Ability to pay for child care		• •	
Poor/fair	46.3%	60.7%	
Good	38.0%	29.4%	0.4472
Excellent	15.7%	9.9%	
A place that meets the needs of the elderly	y	• •	
Poor/fair	27.7%	32.7%	
Good	47.2%	51.6%	0.0308
Excellent	25.1%	15.7%	
Access to help to stay in the home			
Poor/fair	34.5%	38.1%	
Good	43.8%	46.5%	0.1409
Excellent	21.7%	15.4%	
A place that meets the needs of persons w	vith disabilities		
Poor/fair	35.8%	35.6%	
Good	44.7%	51.1%	0.1691
Excellent	19.5%	13.3%]
Efforts to prevent abuse or neglect			
Poor/fair	29.4%	36.0%	
Good	51.6%	49.8%	0.2273
Excellent	19.0%	14.2%	

Availability of services that meet the needs of abused					
Poor/fair 30.3% 39.6%					
Good	0.0858				
Excellent 16.8% 12.5%					
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Aspects of caregiving were rated similarly by male and female respondents except the community as a place that meets the needs of the elderly. • More males rated this as excellent (25%) compared to females (16%). •

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	Male	Female	Difference in rating			
ECONOMIC ASPECTS	251 (33.6%)	497 (66.4%)	by gender			
Availability of jobs with wages that offer a	Availability of jobs with wages that offer a good standard of living					
Poor/fair	55.6%	60.0%	0.7097			
Good	36.7%	33.0%				
Excellent	7.7%	7.0%				
Ability to meet basic needs						
Poor/fair	23.3%	26.1%	0.2294			
Good	46.2%	50.4%				
Excellent	30.5%	23.5%				
Ability to pay for housing						
Poor/fair	21.7%	25.7%	0.4664			
Good	48.3%	49.1%				
Excellent	30.0%	25.2%				
Availability of resources to help budget						
Poor/fair	30.2%	37.1%	0.0077			
Good	50.7%	53.3%				
Excellent	19.1%	9.6%				
Ability to pay for education		_				
Poor/fair	47.3%	59.8%	0.0078			
Good	34.6%	29.5%				
Excellent	18.1%	10.7%				
Availability of services for people needing	extra help					
Poor/fair	34.0%	39.6%				
Good	51.6%	49.9%	0.3632			
Excellent	14.4%	10.5%				
Accessibility of convenient public transport	rtation					
Poor/fair	48.3%	51.2%				
Good	35.8%	39.7%	0.0293			
Excellent	15.9%	9.1%				

Ability to pay for own vehicle					
Poor/fair	22.9%	24.5%			
Good	45.8%	49.7%	0.2307		
Excellent	31.3%	25.8%			
Efforts to reduce poverty					
Poor/fair	56.4%	57.1%			
Good	36.8%	37.5%	0.7866		
Excellent	6.8%	5.4%			
Efforts to reduce hunger					
Poor/fair	33.7%	34.6%			
Good	53.1%	49.2%	0.682		
Excellent	13.2%	16.2%			

• There were few differences in ratings of economic issues by gender.

• Females rated the availability of resources to help budget lower than males; 9% reported this as excellent, compared to 19% of males.

• Females also rated the ability to pay for education lower than males; 60% rated this as fair or poor compared to 47% of males.

• Females also rated access to convenient public transportation as lower than males; 9% rated this as excellent and 51% as fair or poor, compared to 16% of males rating it as excellent, and 48% saying it was fair or poor.

ISSUES IN THE COMMUNITY	Male 251 (33.6%)	Female 497 (66.4%)	Difference in rating by gender
	Mean (rank)	Mean (rank)	
Hunger	2.57 (12)	2.68 (10)	0.1238
Obesity	2.70 (9)	2.87 (4)	0.0185
Tobacco Use	2.57 (12)	2.66 (11)	0.2039
Alcohol Use	2.82 (4)	3.00 (2)	0.0316
Over-the-Counter Drug Misuse	2.81 (6)	2.79 (8)	0.7710
Prescription Drug Misuse	2.86 (3)	2.86 (5)	0.9337
Illegal drug use	3.31 (1)	3.25 (1)	0.3696
Gambling	2.16 (15)	2.06 (14)	0.1713
Risk of Losing Your Job	1.94 (17)	1.97 (16)	0.7222
Risk of Foreclosure and Bankruptcy	1.73 (18)	1.77 (17)	0.6431
Excessive Personal Debt	1.95 (16)	2.01 (15)	0.4275
Financial Problems Experienced by Local Governments	2.64 (11)	2.51 (13)	0.0798
Funding for Schools	2.80 (7)	2.72 (9)	0.2746
Identity Theft	3.02 (2)	2.85 (6)	0.0242
Sexual Abuse and Sexual Violence	2.69 (10)	2.62 (11)	0.3443
Bullying	2.80 (7)	2.95 (3)	0.0400
Domestic Abuse, Child Abuse, Elder Abuse	2.82 (4)	2.82 (7)	0.9564
Suicide	2.50 (14)	2.57 (12)	0.3735

• Females rated obesity, alcohol use, and bullying as a bigger issue in the community compared to males.

• Males rated identity theft as a bigger issue in the community.

• Ranking of community issues varied between males and females.

• Males rated illegal drug use, identity theft, and prescription drug misuse as the top three issues facing the community.

• Females rated illegal drug use, alcohol use, and bullying as the top three issues facing the community.

AGE COMPARISONS

	21-50 years	51-64 years	65+ years	Difference in
ASPECTS OF HEALTH	338 (45.6%)	192 (25.9%)	211 (28.5%)	rating by age
Overall health				
Poor/fair	9.6%	12.1%	17.6%	
Good	61.7%	63.3%	66.2%	0.0014
Excellent	28.7%	24.6%	16.2%	
Overall mental health				
Poor/fair	8.9%	5.0%	4.3%	
Good	56.8%	57.8%	52.1%	0.0549
Excellent	34.3%	37.2%	43.6%	
Overall dental health				
Poor/fair	15.6%	18.1%	16.5%	
Good	53.8%	54.8%	49.8%	0.8540
Excellent	30.6%	27.1%	33.7%	
Access to health care				
Poor/fair	11.3%	8.5%	1.9%	
Good	39.0%	30.2%	34.1%	0.0006
Excellent	49.7%	61.3%	64.0%	
Access to mental health care				
Poor/fair	15.0%	14.1%	6.7%	
Good	44.4%	36.2%	45.4%	0.0254
Excellent	40.6%	49.7%	47.9%	
Access to dental care				
Poor/fair	13.3%	10.0%	5.1%	
Good	37.0%	32.2%	37.3%	0.0573
Excellent	49.7%	57.8%	57.6%	
Access to healthy food choices				
Poor/fair	15.8%	10.6%	6.2%	
Good	40.4%	35.4%	42.1%	0.0119
Excellent	43.8%	54.0%	51.7%	
Ability to pay for health care				
Poor/fair	40.8%	42.1%	20.4%	
Good	43.9%	36.6%	51.0%	۰.0001
Excellent	15.3%	21.3%	28.6%	
Ability to pay for mental health ca	re			
Poor/fair	41.0%	42.2%	31.2%	
Good	44.5%	37.5%	46.2%	0.0167
Excellent	14.5%	20.3%	22.6%	

Ability to pay for dental care				
Poor/fair	38.0%	40.4%	25.9%	
Good	44.4%	38.9%	52.9%	0.0039
Excellent	17.6%	20.7%	21.2%	
Ability to pay for healthy food cho	oices			
Poor/fair	31.4%	30.3%	10.0%	
Good	49.9%	44.4%	56.5%	٠.0001
Excellent	18.7%	25.3%	33.5%	
Everyone have insurance (% yes)	91.0%	94.4%	95.7%	0.0744
Avoid seeing a doctor in past 12 months because of cost (% yes)	38.6%	28.1%	7.6%	<.0001

• Older adult respondents were more likely to rate their overall health as fair or poor than those under age 65, although they did not differ from the younger respondents on their rating of their overall dental or mental health care.

- Older adult respondents were more likely to rate most aspects of health more positively.
- Access to health care was rated higher among those 65+ and lowest among those 21-50 years.
- Access to mental health care was rated higher by those over age 65 (93% said it was good or excellent); 15% of those under age 65 rate their access to mental health care as fair or poor.
- Access to healthy food choices was rated highest among those ages 51-64 years and lowest among those 21-50 years.
- Those respondents over age 65 were more likely to say their ability to pay for healthy food choices was good or excellent. Nearly one-third of adults under age 65 stated that their ability to pay for healthy food choices was fair or poor. Only 10% of respondents over age 65 indicated this.
- Younger respondents (under age 65) all rated their ability to pay for health care, dental care and mental health care lower than those over age 65.
- Younger respondents were more likely to report avoiding care due to cost (37% reported this) compared to 8% of adults over age 65.

ASPECTS OF PUBLIC SAFETY	21-50 years 338 (45.6%)	51-64 years 192 (25.9%)	65+ years 211 (28.5%)	Difference in rating by age
Quality of law enforcement				
Poor/fair	21.2%	19.2%	11.3%	
Good	60.8%	67.2%	62.3%	0.0037
Excellent	18.0%	13.6%	26.4%	
Efforts to prevent crime				
Poor/fair	26.8%	25.2%	15.7%	
Good	58.9%	65.2%	61.1%	0.001
Excellent	14.3%	9.6%	23.2%	
Quality of emergency services				
Poor/fair	8.8%	10.1%	6.2%	
Good	57.4%	53.0%	42.9%	0.0046
Excellent	33.8%	36.9%	50.9%	

Safety of neighborhood				
Poor/fair	11.9%	12.7%	5.2%	
Good	59.4%	53.5%	60.5%	0.0605
Excellent	28.7%	33.8%	34.3%	
Safety of schools				
Poor/fair	12.2%	9.3%	2.4%	
Good	59.7%	59.8%	69.6%	0.0035
Excellent	28.1%	30.9%	28.0%	
Ability to respond to major safety	threats			
Poor/fair	27.0%	29.2%	16.9%	
Good	58.9%	58.5%	67.6%	0.0999
Excellent	14.1%	12.3%	15.5%	

• Respondents over the age of 65 rated most quality of public safety aspects higher than younger respondents.

• Of respondents over age 65, 26% rated quality of law enforcement as excellent compared to 13 to 18% of those younger than 65.

• Of older adults, 23% rated efforts to prevent crime as excellent compared to 9 to 14% of younger adults.

• Over half of adults over age 65 rated the quality of emergency services as excellent compared to one third of younger adults.

• Respondents 21 to 50 years of age were more likely to rate safety of schools as fair or poor (12%) than older adults.

ASPECTS OF EDUCATION	21-50 years	51-64 years	65+ years	Difference in
ASPECTS OF EDUCATION	338 (45.6%)	192 (25.9%)	211 (28.5%)	rating by age
A place that meets your family's e	ducational needs			
Poor/fair	13.0%	12.7%	9.6%	
Good	43.5%	51.6%	50.7%	0.463
Excellent	43.5%	35.7%	39.7%	
Birth-to-three education				
Poor/fair	23.1%	26.7%	15.1%	
Good	49.8%	45.8%	57.6%	0.1788
Excellent	27.1%	27.5%	27.3%	1
Early education opportunities				
Poor/fair	13.8%	13.0%	7.3%	
Good	46.7%	50.4%	57.4%	0.3384
Excellent	39.5%	36.6%	35.3%	
Quality of schools - 4K-12				
Poor/fair	13.1%	8.4%	4.4%	
Good	46.0%	53.9%	53.9%	0.0404
Excellent	40.9%	37.7%	41.7%	1
Quality of higher education			·	
Poor/fair	12.3%	9.0%	7.8%	
Good	39.2%	40.1%	33.5%	0.2936
Excellent	48.5%	50.9%	58.7%	

Opportunities in your job to gain knowledge or skills					
Poor/fair	37.1%	40.5%	31.1%		
Good	37.4%	37.8%	44.6%	0.7738	
Excellent	25.5%	21.7%	24.3%		
Community resources to learn new	w skills				
Poor/fair	36.4%	37.2%	25.3%		
Good	45.5%	37.8%	40.8%	0.0026	
Excellent	18.1%	25.0%	33.9%		

• There were only minor differences in how respondents of different ages rated educational aspects.

• Respondents 21 to 50 years rated the quality of schools (4K-12) lower than older adults; 13% rated it as fair or poor compared to 8% of adults 51 to 64 years, and 4% of adults of 65 years. Although those 21 to 50 years old were more likely to rate it as fair or poor, they were equally as likely to say it was excellent as other respondents.

• Respondents under age 65 were more likely to rate community resources to learn new skills as fair or poor, over 35% indicating this. One-third of adults over age 65 said this was excellent. This might be reflective of who is more likely to use these resources.

	21-50 years	51-64 years	65+ years	Difference in
ASPECTS OF QUALITY OF LIFE	338 (45.6%)	192 (25.9%)	211 (28.5%)	rating by age
Leisure time opportunities				
Poor/fair	31.4%	28.3%	21.4%	0.0730
Good	49.3%	44.4%	54.0%	
Excellent	19.3%	27.3%	24.6%	
Opportunities for youth to explore	e interests and par	ticipate in positive	activities	
Poor/fair	34.6%	36.4%	24.5%	
Good	49.3%	44.1%	60.3%	0.0486
Excellent	16.1%	19.5%	15.2%	
Opportunities to enjoy fine arts a	nd cultural experie	nces		
Poor/fair	42.4%	39.1%	21.8%	<0.0001
Good	38.3%	39.1%	47.4%	
Excellent	19.3%	21.8%	30.8%	
Physical recreation for adults				
Poor/fair	21.9%	24.4%	21.9%	
Good	49.9%	42.6%	44.3%	0.4211
Excellent	28.2%	33.0%	33.8%	
Safe bike routes to school or work	K			
Poor/fair	46.7%	51.8%	36.7%	
Good	40.0%	31.8%	48.8%	0.0133
Excellent	13.3%	16.4%	14.5%	
Library services in your communit	Ly			
Poor/fair	19.0%	15.5%	9.1%	
Good	50.6%	54.6%	48.8%	0.008
Excellent	30.4%	29.9%	42.1%	

Efforts to protect the natural environment				
Poor/fair	38.0%	38.4%	25.9%	
Good	49.6%	48.0%	58.7%	0.0484
Excellent	12.4%	13.6%	15.4%	
Opportunities to volunteer				
Poor/fair	16.8%	17.8%	14.4%	
Good	56.2%	49.0%	50.2%	0.4342
Excellent	27.0%	33.2%	35.4%]
A place where people are treated	respectfully			
Poor/fair	36.9%	33.6%	19.0%	
Good	53.9%	53.1%	64.8%	0.0004
Excellent	9.2%	13.3%	16.2%	
A place where people of different cultural/racial/ethnic backgrounds are included in decision-making				
Poor/fair	45.9%	48.7%	34.1%	
Good	46.2%	43.0%	54.2%	0.0012
Excellent	7.9%	8.3%	11.7%	
• There were many significant differences by age in ratings of aspects of quality of life in the community				

• There were many significant differences by age in ratings of aspects of quality of life in the community.

• Respondents over age 65 rated opportunities for youth to explore interests and participate in positive activities higher than younger adults.

• Respondents over age 65 rated opportunities to enjoy fine arts and cultural experiences higher than younger adults; 42% of adults under age 50 indicated this was fair or poor.

• Respondents over age 65 rated safe bike routes to school or work higher than younger adults; 52% of adults ages 51 to 64 indicated this was fair or poor, and 47% of adults under age 50 indicated this.

• Older adults rated the library services in their community higher than younger adults.

• Older adults rated the efforts to protect the natural environment higher than younger adults.

• Adults over age 65 rated the community higher as a place where people are treated respectfully compared to younger adult respondents; 19% of adults over age 65 indicated this was fair or poor compared to 33-36% of younger adults.

• Similarly, older adults rated their community higher as a place where people of different cultural/racial/ ethnic backgrounds are included in decision-making than younger adults.

ASPECTS OF CAREGIVING	21-50 years 338 (45.6%)	51-64 years 192 (25.9%)	65+ years 211 (28.5%)	Difference in rating by age
Availability of quality child care				
Poor/fair	31.8%	33.7%	24.3%	
Good	46.6%	47.7%	58.6%	0.7366
Excellent	21.6%	18.6%	17.1%	
Ability to pay for child care				
Poor/fair	44.6%	56.5%	52.3%	
Good	41.7%	31.9%	40.9%	0.4233
Excellent	13.7%	11.6%	6.8%	

A place that meets the needs of the elderly					
Poor/fair	31.3%	34.4%	25.8%		
Good	50.9%	48.6%	50.8%	0.3288	
Excellent	17.8%	17	23.4%		
Access to help to stay in the home	5				
Poor/fair	38.2%	38.4%	31.9%		
Good	48.9%	42.7%	45.2%	0.122	
Excellent	12.9%	18.9%	22.9%		
A place that meets the needs of p	ersons with disabi	lities			
Poor/fair	35.1%	38.9%	32.1%		
Good	53.0%	45.5%	48.4%	0.1541	
Excellent	11.9%	15.6%	19.5%		
Efforts to prevent abuse or negled	:t				
Poor/fair	32.2%	36.4%	31.3%		
Good	53.7%	47.7%	50.6%	0.4915	
Excellent	14.1%	15.9%	18.1%		
Availability of services that meet the needs of abused					
Poor/fair	34.5%	39.2%	33.9%		
Good	50.8%	49.1%	51.2%	0.723	
Excellent	14.7%	11.7%	14.9%		
• There were no differences in ratings of aspects of caregiving in the community by age					

• There were no differences in ratings of aspects of caregiving in the community by age.

ECONOMIC ASPECTS	21-50 years	51-64 years	65+ years	Difference in		
	338 (45.6%)	192 (25.9%)	211 (28.5%)	rating by age		
Availability of jobs with wages that	at offer a good stan	dard of living				
Poor/fair	52.9%	63.2%	64.9%			
Good	39.5%	28.4%	31.3%	0.0525		
Excellent	7.6%	8.4%	3.8%			
Ability to meet basic needs						
Poor/fair	27.8%	31.0%	14.9%			
Good	48.6%	41.6%	56.7%	0.0056		
Excellent	23.6%	27.4%	28.4%			
Ability to pay for housing	Ability to pay for housing					
Poor/fair	26.6%	28.9%	15.9%			
Good	49.3%	43.2%	54.3%	0.0066		
Excellent	24.1%	27.9%	29.8%			

Availability of resources to help b	udget			
Poor/fair	38.8%	41.5%	20.8%	
Good	50.6%	45.1%	62.4%	0.0015
Excellent	10.6%	13.4%	16.8%	
Ability to pay for education				
Poor/fair	56.6%	58.2%	47.6%	
Good	32.9%	26.0%	36.9%	0.1200
Excellent	10.5%	15.8%	15.5%	
Availability of services for people	needing extra help)		
Poor/fair	40.1%	42.3%	29.3%	
Good	50.2%	47.0%	54.5%	0.0853
Excellent	9.7%	10.7%	16.2%	
Accessibility of convenient public	transportation			
Poor/fair	51.8%	58.7%	40.9%	
Good	38.9%	33.7%	41.4%	0.0055
Excellent	9.3%	7.6%	17.7%	
Ability to pay for own vehicle				
Poor/fair	26.3%	30.1%	13.2%	
Good	49.4%	43.4%	52.5%	0.0023
Excellent	24.3%	26.5%	34.3%	
Efforts to reduce poverty				
Poor/fair	59.5%	67.2%	43.1%	
Good	34.0%	29.6%	50.8%	0.0002
Excellent	6.5%	3.2%	6.1%	
Efforts to reduce hunger				
Poor/fair	34.8%	38.7%	28.7%	
Good	49.3%	48.2%	56.9%	0.3563
Excellent	15.9%	13.1%	14.4%	

• Younger respondents rated several economic aspects poorer than older respondents.

• Younger adults rated the ability to meet basic needs lower than older adults.

• Younger adults were more likely to indicate ability to pay for housing was fair or poor compared to older adults.

• Younger adults were more likely to rate as fair or poor the availability of resources to help budget.

• Younger adults were more likely to rate the accessibility of convenient public transportation as fair or poor (52% to 59%) compared to adults over age 65 (41%).

• Younger adults rated lower their ability to pay for their own vehicle than older adults.

• Younger adults rated lower efforts to reduce poverty, compared to older adults; 67% of adults age 51 to 64 indicated this was fair or poor compared to 60% of adults age 21 to 50, and 43% of adults over age 65.

ISSUES IN THE COMMUNITY	21-50 years	51-64 years	65+ years	Difference in
ISSUES IN THE COMMUNITY	338 (45.6%)	192 (25.9%)	211 (28.5%)	rating by age
	Mean (rank)	Mean (rank)	Mean (rank)	
Hunger	2.50 (10)	2.70 (10)	2.74 (12)	0.0039
Obesity	2.81 (3)	2.74 (9)	2.88 (8)	0.3416
Tobacco Use	2.46 (12)	2.64 (12)	2.87 (9)	<.0001
Alcohol Use	2.80 (4)	2.93 (3)	3.11 (3)	0.0015
Over-the-Counter Drug Misuse	2.64 (7)	2.86 (7)	2.96 (5)	0.0004
Prescription Drug Misuse	2.76 (5)	2.93 (3)	2.93 (7)	0.0558
Illegal drug use	3.14 (1)	3.34 (1)	3.36 (1)	0.007
Gambling	1.87 (17)	2.12 (15)	2.41 (15)	<.0001
Risk of Losing Your Job	2.04 (16)	2.11 (16)	1.66 (17)	<.0001
Risk of Foreclosure and Bankruptcy	1.87 (17)	1.74 (18)	1.60 (18)	0.0046
Excessive Personal Debt	2.17 (15)	2.00 (17)	1.68 (16)	<.0001
Financial Problems Experienced by Local Governments	2.46 (12)	2.56 (14)	2.67 (14)	0.0503
Funding for Schools	2.63 (8)	2.83 (8)	2.86 (10)	0.0096
Identity Theft	2.62 (9)	3.13 (2)	3.15 (2)	<.0001
Sexual Abuse and Sexual Violence	2.47 (11)	2.69 (11)	2.83 (11)	<.0001
Bullying	2.82 (2)	2.87 (6)	2.99 (4)	0.1533
Domestic Abuse, Child Abuse, Elder Abuse	2.65 (6)	2.92 (5)	2.96 (5)	<.0001
Suicide	2.41 (14)	2.58 (13)	2.70 (13)	0.0030

• Adults over age 65 rated hunger, tobacco use, alcohol use, over-the-counter drug misuse, illegal drug use, gambling, funding for schools, identity theft, sexual abuse and violence, domestic, child, and elder abuse, and suicide as greater community issues than younger adults.

• Adults less than 65 rated risk of losing your job, risk of foreclosure and bankruptcy, and excessive personal debt as greater community issues than older adults.

• Ranking of community issues varied by age.

• Respondents age 21 to 50 rated illegal drug use, bullying, and obesity as the top three issues facing the community.

• Respondents age 51 to 64 rated illegal drug use, identity theft, and prescription drug misuse as the top three issues facing the community.

• Respondents over the age of 65 rated illegal drug use, identity theft, and alcohol use as the top three issues facing the community.

EDUCATION COMPARISONS

ASPECTS OF HEALTH	High School grad or less 199 (25.6%)	Some college/voc. 230 (29.5%)	College or adv. degree 350 (44.9%)	Difference in rating by education
Overall health		1	1	1
Poor/fair	15.6%	17.3%	7.7%	
Good	68.8%	68.5%	56.5%	<0.0001
Excellent	15.6%	14.2%	35.8%	
Overall mental health				
Poor/fair	7.5%	7.7%	6.6%	
Good	60.0%	62.7%	47.4%	0.0035
Excellent	32.5%	29.6%	46.0%	
Overall dental health			` 	
Poor/fair	26.1%	21.5%	7.4%	
Good	54.3%	56.9%	48.6%	<0.0001
Excellent	19.6%	21.6%	44.0%	
Access to health care				
Poor/fair	10.6%	10.7%	6.3%	
Good	45.2%	34.8%	29.6%	<0.0001
Excellent	44.2%	54.5%	64.1%	
Access to mental health care				
Poor/fair	15.1%	14.6%	12.2%	
Good	49.7%	45.0%	35.4%	0.0002
Excellent	35.2%	40.4%	52.4%	
Access to dental care				
Poor/fair	13.1%	12.0%	8.0%	
Good	43.2%	39.9%	28.6%	<0.0001
Excellent	43.7%	48.1%	63.4%	
Access to healthy food choices				
Poor/fair	14.6%	14.3%	8.0%	
Good	47.7%	42.4%	34.2%	0.0002
Excellent	37.7%	43.3%	57.8%	1
Ability to pay for health care				
Poor/fair	41.4%	47.4%	25.2%	
Good	47.0%	36.6%	46.1%	<0.0001
Excellent	11.6%	16.0%	28.7%	
Ability to pay for mental health ca	re			
Poor/fair	47.1%	50.2%	27.0%	
Good	42.0%	37.1%	46.9%	<0.0001
Excellent	10.9%	12.7%	26.1%	

Ability to pay for dental care				
Poor/fair	46.4%	44.8%	24.6%	
Good	45.0%	41.7%	46.3%	<0.0001
Excellent	8.6%	13.5%	29.1%	
Ability to pay for healthy food cho	vices			
Poor/fair	29.4%	36.4%	16.0%	
Good	53.3%	46.4%	50.6%	<0.0001
Excellent	17.3%	17.2%	33.4%	
Everyone have insurance (% yes)	91.4%	90.5%	95.7%	0.0304
Avoid seeing a doctor in past 12 months because of cost (% yes)	24.6%	37.0%	22.0%	0.0008

• In general, respondents with lower educational attainment rated all aspects of health lower than those with some post-secondary education.

• Those with some college or vocational training rated all aspects of health lower than those with a college or advanced degree.

• Those with some college/vocational training rated the overall mental health about the same as those with less education. Only 30% rated their mental health as excellent compared to 33% of those with less education, and 46% of those with more education.

• Those with some college/vocational training rated their overall health similarly to those with less education.

• Those respondents with less education (less than a college degree) were less likely to report that everyone in the household has health insurance.

• Those with some college or vocational training were more likely to report avoiding care in the past 12 months due to cost; 37% reported this versus those with less education (25%) or those with more education (22%).

ASPECTS OF PUBLIC SAFETY	High School grad or less 199 (25.6%)	Some college/voc. 230 (29.5%)	College or adv. degree 350 (44.9%)	Difference in rating by education	
Quality of law enforcement					
Poor/fair	21.7%	21.8%	14.6%		
Good	57.6%	63.7%	64.4%	0.0555	
Excellent	20.7%	14.5%	21.0%		
Efforts to prevent crime					
Poor/fair	23.2%	25.7%	23.3%		
Good	61.6%	61.4%	59.4%	0.4918	
Excellent	15.2%	12.9%	17.3%		
Quality of emergency services					
Poor/fair	7.6%	11.2%	8.0%		
Good	49.0%	53.2%	52.9%	0.5940	
Excellent	43.4%	35.6%	39.1%		

Safety of neighborhood				
Poor/fair	10.6%	13.3%	8.1%	
Good	64.0%	62.2%	52.0%	0.0009
Excellent	25.4%	24.5%	39.9%	
Safety of schools				
Poor/fair	5.1%	13.0%	8.1%	
Good	71.3%	62.3%	58.1%	0.0073
Excellent	23.6%	24.7%	33.8%	
Ability to respond to major safety	threats			
Poor/fair	20.6%	29.7%	25.0%	
Good	64.4%	56.3%	61.6%	0.2840
Excellent	15.0%	14.0%	13.4%	

• Respondents with college or advanced degree rated the safety of the neighborhood higher than those with less than a college degree.

• Of respondents with a college degree, 40% rated the safety of their neighborhood as excellent compared to 25% of those with less education.

• Those respondents with a college degree were also more likely to rate the safety of the schools as excellent compared to only 24% of those with less education.

ASPECTS OF EDUCATION	High School grad or less	Some college/voc.	College or adv. degree	Difference in rating by
	199 (25.6%)	230 (29.5%)	350 (44.9%)	education
A place that meets your family's e	ducational needs			
Poor/fair	16.1%	14.6%	10.0%	
Good	55.2%	51.9%	40.0%	0.0005
Excellent	28.7%	33.5%	50.0%	
Birth-to-three education				
Poor/fair	22.6%	27.2%	18.1%	
Good	54.0%	49.4%	50.0%	0.093
Excellent	23.4%	23.4%	31.9%	
Early education opportunities				
Poor/fair	10.7%	12.3%	12.3%	
Good	55.3%	59.5%	42.5%	0.0149
Excellent	34.0%	28.2%	45.2%	
Quality of schools - 4K-12				
Poor/fair	12.3%	11.5%	7.2%	
Good	51.3%	55.5%	46.9%	0.0681
Excellent	36.4%	33.0%	45.9%	1
Quality of higher education				-
Poor/fair	13.0%	11.6%	8.0%	
Good	45.6%	43.2%	31.3%	<.0001
Excellent	41.4%	45.2%	60.7%	

Opportunities in your job to gain knowledge or skills				
Poor/fair	41.2%	40.9%	33.1%	
Good	41.9%	34.4%	40.1%	0.2004
Excellent	16.9%	24.7%	26.8%	
Community resources to learn new	w skills			
Poor/fair	32.3%	38.7%	31.5%	
Good	45.5%	38.2%	43.4%	0.0495
Excellent	22.2%	23.1%	25.1%	

• Those with a higher level of education were more likely to rate aspects of education higher.

• 50% rated a place that meets your family's educational needs as excellent (compared to 29-34% of less educated)

• 45% rated early education opportunities as excellent (compared to 28-34% of less educated)

• 61% rated quality of higher education as excellent (compared to 41-45% of less educated)

• 25% rated community resources to learn new skills as excellent (compared to 22-23% of less educated)

ASPECTS OF QUALITY OF LIFE	High School grad or less	Some college/voc.	College or adv. degree	Difference in rating by education
	199 (25.6%)	230 (29.5%)	350 (44.9%)	education
Leisure time opportunities		r	r	1
Poor/fair	31.0%	33.2%	22.5%	
Good	48.7%	50.0%	49.9%	<.0001
Excellent	20.3%	16.8%	27.6%	
Opportunities for youth to explore	e interests and par	ticipate in positive	activities	
Poor/fair	33.8%	38.9%	27.5%	
Good	51.8%	48.5%	51.9%	0.0157
Excellent	14.4%	12.6%	20.6%	
Opportunities to enjoy fine arts a	nd cultural experie	nces		
Poor/fair	42.6%	38.2%	30.5%	
Good	43.2%	44.2%	38.2%	٠.0001
Excellent	14.2%	17.6%	31.3%	
Physical recreation for adults				
Poor/fair	31.3%	28.7%	14.3%	
Good	47.2%	48.5%	44.4%	<.0001
Excellent	21.5%	22.8%	41.3%	
Safe bike routes to school or work	K			I
Poor/fair	41.5%	47.7%	47.4%	
Good	44.0%	38.6%	37.9%	0.735
Excellent	14.5%	13.7%	14.7%	
Library services in your communit	V			
Poor/fair	12.3%	17.3%	15.5%	
Good	56.1%	58.0%	44.3%	0.0039
Excellent	31.6%	24.7%	40.2%	

Efforts to protect the natural environment				
Poor/fair	32.0%	35.6%	36.4%	
Good	52.8%	52.4%	50.4%	0.2572
Excellent	15.2%	12.0%	13.2%	
Opportunities to volunteer				
Poor/fair	16.8%	19.1%	13.7%	
Good	55.8%	55.7%	49.6%	0.0069
Excellent	27.4%	25.2%	36.7%	
A place where people are treated	respectfully			
Poor/fair	29.1%	32.5%	31.6%	
Good	54.1%	59.7%	55.6%	0.0364
Excellent	16.8%	7.8%	12.8%	
A place where people of different cultural/racial/ethnic backgrounds are included in decision-making				
Poor/fair	37.9%	43.2%	46.9%	
Good	52.1%	48.9%	43.6%	0.0304
Excellent	10.0%	7.9%	9.5%	

• Those with a higher level of education were more likely to rate aspects of quality of life higher than those with less education. Those with a college or advanced degree:

- 28% indicated leisure time opportunities were excellent (compared to 17-20% with less education).
- 20% indicated opportunities for youth to explore interests and participate in positive activities as excellent (compared to 13-14% with less education).
- 31% rated excellent opportunities to enjoy fine arts and cultural experiences (compared to 14-17% with less education stating this).
- 41% indicated physical recreation for adults was excellent (compared to 22% of those with less education).
- 40% indicated the library services were excellent compare to 25-30% of those with less education.
- 37% rated opportunities to volunteer as excellent (compared to 25-27% of those with less education).
- Those with a high school degree or less were more likely to rate their community as a place where people were treated respectfully as excellent (17%) and rated higher the community as a place where people of different cultural/racial/ethnic backgrounds are included in decision-making.

ASPECTS OF CAREGIVING	High School grad or less	Some college/voc.	College or adv. degree 350 (44.9%)	Difference in rating by education
	199 (25.6%)	230 (29.5%)	550 (44.9%)	education
Availability of quality child care		1		
Poor/fair	27.7%	36.1%	30.8%	
Good	53.5%	43.7%	50.0%	0.4824
Excellent	18.8%	20.2%	19.2%	
Ability to pay for child care				
Poor/fair	52.0%	58.6%	41.0%	
Good	37.3%	33.3%	43.6%	0.0513
Excellent	10.7%	8.1%	15.4%	

A place that meets the needs of the elderly				
Poor/fair	28.7%	34.8%	30.2%	0.0037
Good	46.3%	46.6%	54.7%	
Excellent	25.0%	18.6%	15.1%	
Access to help to stay in the hom	e			
Poor/fair	38.5%	41.7%	32.4%	
Good	39.1%	42.3%	52.7%	0.0323
Excellent	22.4%	16.0%	14.9%	
A place that meets the needs of p	ersons with disabi	lities		
Poor/fair	38.4%	41.5%	30.1%	
Good	41.8%	43.5%	57.4%	0.0073
Excellent	19.8%	15.0%	12.5%	
Efforts to prevent abuse or negle	ct		` 	
Poor/fair	34.0%	39.9%	29.3%	
Good	45.3%	46.0%	57.1%	0.0463
Excellent	20.7%	14.1%	13.6%	
Availability of services that meet the needs of abused				
Poor/fair	37.4%	38.3%	34.5%	0.1704
Good	46.2%	46.8%	53.8%	
Excellent	16.4%	14.9%	11.7%	

• Those with a high school diploma or less were more likely to rate as excellent their community as a place that meets the needs of the elderly; 25% indicated this compared to 15-18% of recipients of higher education.

• Those with less education were also more likely to rate as excellent help to stay in the home; 22% indicated this compared to 15-16% of recipients of higher education.

• Those with less education were more likely to rate as excellent their community as a place that meets the needs of persons with disabilities; 20% rated this as excellent compared to 13-15% of recipients of higher education

• Those with a high school diploma or less education were more likely to rate as excellent efforts to prevent abuse or neglect. They were, however, also more likely to say this was fair or poor.

ECONOMIC ASPECTS	High School grad or less 199 (25.6%)	Some college/voc. 230 (29.5%)	College or adv. degree 350 (44.9%)	Difference in rating by education
Availability of jobs with wages the	at offer a good star	ndard of living		
Poor/fair	66.3%	61.9%	52.6%	
Good	28.8%	33.7%	37.0%	0.0007
Excellent	4.9%	4.4%	10.4%	
Ability to meet basic needs				
Poor/fair	31.3%	33.9%	17.5%	
Good	56.8%	48.0%	43.7%	<.0001
Excellent	11.9%	18.1%	38.8%	

Ability to pay for housing				
Poor/fair	29.0%	35.9%	15.2%	
Good	58.7%	43.6%	45.8%	٠.0001
Excellent	12.3%	20.5%	39.0%	
Availability of resources to help bu	ıdget			
Poor/fair	37.4%	38.9%	41.2%	
Good	56.0%	51.5%	40.2%	0.0002
Excellent	6.6%	9.6%	18.6%	
Ability to pay for education				
Poor/fair	68.1%	66.7%	43.5%	
Good	27.6%	26.2%	36.2%	٠.0001
Excellent	4.3%	7.1%	20.3%	
Availability of services for people r	needing extra help	0		
Poor/fair	43.9%	46.5%	29.4%	0.0006
Good	44.6%	45.0%	56.6%	
Excellent	11.5%	8.5%	14.0%	
Accessibility of convenient public t	transportation			
Poor/fair	51.4%	49.0%	51.5%	
Good	34.9%	41.3%	37.8%	0.7097
Excellent	13.7%	9.7%	10.7%	
Ability to pay for own vehicle				
Poor/fair	29.2%	35.0%	14.9%	
Good	56.0%	41.7%	48.3%	۰.0001
Excellent	14.8%	23.3%	36.8%	
Efforts to reduce poverty				
Poor/fair	57.4%	62.2%	53.7%	
Good	38.6%	32.7%	39.4%	0.0359
Excellent	4.0%	5.1%	6.9%	
Efforts to reduce hunger				
Poor/fair	37.3%	40.1%	29.1%	
Good	51.7%	47.8%	52.1%	0.0216
Excellent	11.0%	12.1%	18.8%	

• Those with a higher level of education rate most economic aspects in the community higher than those with less education. They rated higher:

• Availability of jobs with wages that offer a good standard of living

- Ability to meet basic needs
- Ability to pay for housing
- Availability of resources to help budget
- Ability to pay for education
- Availability of services for people needing extra help
- Ability to pay for own vehicle
- Efforts to reduce poverty, and efforts to reduce hunger.
- There was no difference by education in rating of accessibility of convenient public transportation.

ISSUES IN THE COMMUNITY	High School grad or less	Some college/voc.	College or adv. degree	Difference in rating by education
	199 (25.6%)	230 (29.5%)	350 (44.9%)	euucation
	Mean (rank)	Mean (rank)	Mean (rank)	
Hunger	2.74 (12)	2.59 (11)	2.59 (10)	0.1413
Obesity	2.78 (9)	2.68 (8)	2.93 (3)	0.0068
Tobacco Use	2.85 (8)	2.51 (14)	2.58 (11)	0.001
Alcohol Use	3.02 (5)	2.79 (4)	2.97 (2)	0.0337
Over-the-Counter Drug Misuse	3.04 (4)	2.66 (10)	2.74 (8)	0.0002
Prescription Drug Misuse	3.05 (3)	2.74 (6)	2.83 (4)	0.0044
Illegal drug use	3.32 (1)	3.24 (1)	3.25 (1)	0.664
Gambling	2.30 (15)	2.03 (17)	2.00 (15)	0.0012
Risk of Losing Your Job	2.05 (16)	2.07 (16)	1.83 (17)	0.0072
Risk of Foreclosure and Bankruptcy	1.88 (18)	1.89 (18)	1.61 (18)	0.0002
Excessive Personal Debt	2.03 (17)	2.14 (15)	1.86 (16)	0.0047
Financial Problems Experienced by Local Governments	2.68 (14)	2.57 (12)	2.47 (13)	0.0551
Funding for Schools	2.75 (11)	2.69 (7)	2.79 (6)	0.463
Identity Theft	3.10 (2)	3.00 (2)	2.74 (7)	<.0001
Sexual Abuse and Sexual Violence	2.78 (9)	2.67 (9)	2.55 (12)	0.0272
Bullying	3.01 (6)	2.91 (3)	2.82 (5)	0.0825
Domestic Abuse, Child Abuse, Elder Abuse	3.01 (6)	2.78 (5)	2.74 (8)	0.0055
Suicide	2.73 (13)	2.54 (13)	2.45 (14)	.0053

Those with a college or advanced degree rated the following as a bigger problem in the community than those ٠ with less education: obesity.

- Those with a high school diploma or less rate the following as a bigger problem in the community than those with more education: tobacco use, alcohol use, over-the-counter and prescription drug misuse, gambling, risk of losing your job, risk of foreclosure, identity theft, sexual abuse and violence, domestic, child and elder abuse, and suicide.
- Those with some college or vocational training were more like than those with higher education to rate as a ٠ significant issue: risk of losing your job, risk of foreclosure, and excessive personal debt.
- Those with a high school diploma or less rate illegal drug use, identity theft, and prescription drug misuse as ٠ the top three issues.
- Those with some college or vocational training rated as the top three issues in the community: illegal drug use, ٠ identity theft, and bullying.
- Those with a college or advanced degree ranked as the top three issues: illegal drug use, alcohol use, and ٠ obesity.

INCOME COMPARISONS

	<\$25,000	\$25,000-\$75,000	\$75,000+	Difference in
ASPECTS OF HEALTH	109 (15.1%)	341 (47.3%)	271 (37.6%)	rating by income
Overall health				
Poor/fair	28.2%	13.1%	4.8%	
Good	62.7%	65.7%	60.1%	<0.0001
Excellent	9.1%	21.2%	35.1%	
Overall mental health				
Poor/fair	14.4%	8.8%	2.6%	
Good	64.0%	58.1%	47.0%	<0.0001
Excellent	21.6%	33.1%	50.4%	
Overall dental health				
Poor/fair	38.1%	19.2%	5.9%	
Good	44.6%	55.1%	50.0%	<0.0001
Excellent	17.3%	25.7%	44.1%	
Access to health care				
Poor/fair	18.0%	7.6%	6.0%	
Good	45.1%	36.4%	28.6%	<0.0001
Excellent	36.9%	56.0%	65.4%	
Access to mental health care				
Poor/fair	25.3%	12.8%	8.3%	
Good	41.1%	45.3%	36.7%	<0.0001
Excellent	33.6%	41.9%	55.0%	
Access to dental care				
Poor/fair	26.3%	9.9%	4.8%	
Good	36.4%	39.5%	28.2%	<0.0001
Excellent	37.3%	50.6%	67.0%	
Access to healthy food choices				
Poor/fair	22.9%	10.0%	7.8%	
Good	50.5%	42.1%	33.2%	<0.0001
Excellent	26.6%	47.9%	59.0%	
Ability to pay for health care				
Poor/fair	57.2%	43.9%	18.6%	
Good	37.3%	39.8%	48.3%	<0.0001
Excellent	5.5%	16.3%	33.1%	
Ability to pay for mental health ca	are			
Poor/fair	62.7%	48.7%	18.5%	
Good	32.7%	36.7%	52.1%	<0.0001
Excellent	4.6%	14.6%	29.4%	

Ability to pay for dental care				
Poor/fair	65.8%	44.0%	15.5%	
Good	28.8%	42.2%	51.5%	<0.0001
Excellent	5.4%	13.8%	33.0%	
Ability to pay for healthy food ch	oices			
Poor/fair	47.3%	32.3%	9.6%	
Good	43.6%	48.7%	52.2%	<0.0001
Excellent	9.1%	19.0%	38.2%	
Everyone have insurance (% yes)	83.3%	91.8%	97.8%	<0.0001
Avoid seeing a doctor in past 12 months because of cost (% yes)	32.4%	32.2%	20.2%	0.0004

• Respondents earning less than \$25,000 were more likely to rate all aspects of health lower than those earning over \$25,000.

• Those earning between \$25,000 and \$75,000 rated all aspects of health lower than those earning more than \$75,000.

• Those earning less than \$25,000 were more likely to report someone in the household is without health insurance (17%) compared to those earning \$25,000-75,000 (8%) and those earning more than \$75,000 (2%).

• Those earning less than \$75,000 were more likely to report avoiding care in the past year because of cost.

ASPECTS OF PUBLIC SAFETY	<\$25,000	\$25,000-\$75,000	\$75,000+	Difference in
	109 (15.1%)	341 (47.3%)	271 (37.6%)	rating by income
Quality of law enforcement				
Poor/fair	27.2%	20.7%	10.0%	
Good	55.5%	59.2%	70.3%	0.0004
Excellent	17.3%	20.1%	19.7%	
Efforts to prevent crime				
Poor/fair	20.9%	26.7%	20.8%	0.3341
Good	61.8%	59.2%	62.5%	
Excellent	17.3%	14.1%	16.7%	
Quality of emergency services		·		
Poor/fair	13.6%	8.4%	7.0%	
Good	44.6%	53.4%	52.8%	0.2874
Excellent	41.8%	38.2%	40.2%]
Safety of neighborhood				
Poor/fair	16.5%	10.0%	7.7%	
Good	56.0%	60.9%	53.9%	0.0029
Excellent	27.5%	29.1%	38.4%	

Safety of schools				
Poor/fair	10.1%	8.5%	7.9%	
Good	66.7%	65.6%	56.3%	0.042
Excellent	23.2%	25.9%	35.8%	
Ability to respond to major safet	y threats			
Poor/fair	25.5%	27.5%	21.4%	
Good	58.5%	58.5%	64.4%	0.686
Excellent	16.0%	14.0%	14.2%	
Quality of law enforcement				
Poor/fair	27.2%	20.7%	10.0%	
Good	55.5%	59.2%	70.3%	0.0004
Excellent	17.3%	20.1%	19.7%	
Descendents with lower income rated quality of low enforcement, sofety of their neighborhood, and sofety of				

• Respondents with lower income rated quality of law enforcement, safety of their neighborhood, and safety of schools as poorer than those with higher education.

	<\$25,000	\$25,000-\$75,000	\$75,000+	Difference in
ASPECTS OF EDUCATION	109 (15.1%)	341 (47.3%)	271 (37.6%)	rating by income
A place that meets your family's	educational needs			
Poor/fair	22.8%	11.4%	9.8%	
Good	44.3%	51.9%	40.2%	0.0006
Excellent	32.9%	36.7%	50.0%	
Birth-to-three education				
Poor/fair	23.3%	20.4%	21.7%	
Good	50.7%	54.6%	46.3%	0.5546
Excellent	26.0%	25.0%	32.0%	
Early education opportunities				
Poor/fair	10.9%	11.6%	13.4%	
Good	52.1%	54.4%	43.5%	0.2782
Excellent	37.0%	34.0%	43.1%	
Quality of schools - 4K-12				
Poor/fair	15.4%	9.5%	8.9%	
Good	56.4%	48.7%	48.3%	0.1843
Excellent	28.2%	41.8%	42.8%	
Quality of higher education				
Poor/fair	15.3%	10.1%	8.6%	
Good	38.5%	40.1%	32.3%	0.0060
Excellent	46.2%	49.8%	59.1%	

Opportunities in your job to gain knowledge or skills				
Poor/fair	51.7%	41.0%	30.6%	
Good	36.2%	36.4%	40.6%	0.0003
Excellent	12.1%	22.6%	28.8%	
Community resources to learn ne	ew skills			
Poor/fair	35.7%	34.7%	30.9%	
Good	39.0%	42.3%	43.2%	0.0853
Excellent	25.3%	23.0%	25.9%	

• Respondents with lower income rated their community as a place that meets the family's educational needs lower than those with higher education.

• Respondents with lower education also rated the quality of higher education poorer than those with higher education.

• Finally, 52% of respondents with income less than \$25,000 rated opportunities in your job to gain knowledge or skills as fair or poor; 41% of individuals earning \$25,000-75,000 indicated this, whereas 31% of respondents indicated this.

ASPECTS OF QUALITY OF LIFE	<\$25,000	\$25,000-\$75,000	\$75,000+	Difference in	
	109 (15.1%)	341 (47.3%)	271 (37.6%)	rating by income	
Leisure time opportunities					
Poor/fair	39.9%	30.7%	20.6%		
Good	40.7%	48.5%	52.6%	0.0039	
Excellent	19.4%	20.8%	26.8%		
Opportunities for youth to explor	re interests and pa	rticipate in positive	activities		
Poor/fair	29.9%	34.2%	30.1%		
Good	53.3%	49.6%	52.4%	0.9498	
Excellent	16.8%	16.2%	17.5%		
Opportunities to enjoy fine arts a	Opportunities to enjoy fine arts and cultural experiences				
Poor/fair	39.1%	36.1%	34.2%		
Good	40.9%	43.1%	37.9%	0.1368	
Excellent	20.0%	20.8%	27.9%		
Physical recreation for adults	Physical recreation for adults				
Poor/fair	33.9%	22.0%	18.1%		
Good	45.0%	51.0%	41.3%	0.0001	
Excellent	21.1%	27.0%	40.6%		
Safe bike routes to school or work					
Poor/fair	43.4%	45.0%	45.9%		
Good	41.5%	40.6%	40.4%	0.8218	
Excellent	15.1%	14.4%	13.7%		

Library services in your community				
Poor/fair	16.5%	14.4%	16.6%	
Good	46.8%	54.3%	47.8%	0.4332
Excellent	36.7%	31.3%	35.6%	
Efforts to protect the natural env	ironment			
Poor/fair	36.6%	33.2%	34.9%	
Good	45.0%	55.7%	49.3%	0.1074
Excellent	18.4%	11.1%	15.8%	
Opportunities to volunteer				
Poor/fair	25.7%	13.9%	15.1%	
Good	47.7%	58.4%	47.6%	<.0001
Excellent	26.6%	27.7%	37.3%	
A place where people are treated	l respectfully			
Poor/fair	40.4%	29.5%	29.8%	
Good	44.0%	59.3%	57.0%	0.1225
Excellent	15.6%	11.2%	13.2%	
A place where people of different cultural/racial/ethnic backgrounds are included in decision-making				
Poor/fair	43.0%	43.8%	44.1%	
Good	46.7%	47.2%	45.9%	0.8882
Excellent	10.3%	9.0%	10.0%	
 Respondents with a household income (\$25,000 were more likely to report leisure time opportunities were fair. 				

• Respondents with a household income <\$25,000 were more likely to report leisure time opportunities were fair or poor.

• Respondents with a household income <\$25,000 were more likely to rate physical recreation for adults as fair or poor.

• Respondents earning <\$25,000 were also more likely to report opportunities to volunteer was fair or poor.

ASPECTS OF CAREGIVING	<\$25,000	\$25,000-\$75,000	\$75,000+	Difference in
	109 (15.1%)	341 (47.3%)	271 (37.6%)	rating by income
Availability of quality child care				
Poor/fair	33.4%	28.9%	32.5%	
Good	43.1%	54.3%	45.0%	0.0476
Excellent	23.5%	16.8%	22.5%	
Ability to pay for child care				
Poor/fair	67.5%	60.6%	29.7%	
Good	20.9%	31.4%	52.3%	<0.0001
Excellent	11.6%	8.0%	18.0%	
A place that meets the needs of the elderly				
Poor/fair	34.3%	30.2%	29.7%	
Good	36.3%	51.9%	55.3%	0.0242
Excellent	29.4%	17.9%	15.0%	

Access to help to stay in the home				
Poor/fair	40.9%	38.8%	34.2%	
Good	33.3%	45.9%	51.1%	0.0056
Excellent	25.8%	15.3%	14.7%	
A place that meets the needs of	persons with disab	ilities		
Poor/fair	45.0%	34.8%	31.9%	
Good	31.0%	52.1%	53.9%	0.0011
Excellent	24.0%	13.1%	14.2%	
Efforts to prevent abuse or negle	ct			
Poor/fair	35.7%	34.2%	31.5%	
Good	43.9%	50.9%	54.5%	0.0408
Excellent	20.4%	14.9%	14.0%	
Availability of services that meet the needs of abused				
Poor/fair	43.5%	36.9%	31.7%	
Good	40.2%	49.8%	54.7%	0.2674
Excellent	16.3%	13.3%	13.6%	
Aspects of caregiving varied significantly by household income.				

Those earning less than \$25,000 were more likely to rate fair or poor:

• Ability to pay for child care

•

• A place that meets the needs of the elderly

• Access to help to stay in the home

• A place that meets the needs of persons with disabilities

Those earning \$25,000-75,000 were more likely to rate fair or poor:

• Availability of quality child care

• Ability to pay for child care

ECONOMIC ASPECTS	<\$25,000	\$25,000-\$75,000	\$75,000+	Difference in	
	109 (15.1%)	341 (47.3%)	271 (37.6%)	rating by income	
Availability of jobs with wages th	at offer a good sta	ndard of living			
Poor/fair	77.1%	65.3%	46.1%		
Good	15.7%	30.1%	42.5%	<0.0001	
Excellent	7.2%	4.6%	11.4%		
Ability to meet basic needs	Ability to meet basic needs				
Poor/fair	51.0%	34.1%	8.9%		
Good	37.0%	49.2%	48.0%	<0.0001	
Excellent	12.0%	16.7%	43.1%		
Ability to pay for housing					
Poor/fair	49.5%	34.2%	7.2%		
Good	38.6%	47.7%	48.9%	<0.0001	
Excellent	11.9%	18.1%	43.9%		

Availability of resources to help l	oudget				
Poor/fair	50.5%	36.8%	28.4%		
Good	40.0%	55.3%	50.7%	<0.0001	
Excellent	9.5%	7.9%	20.9%		
Ability to pay for education		I			
Poor/fair	78.0%	65.8%	37.6%		
Good	19.1%	27.9%	38.1%	<0.0001	
Excellent	2.9%	6.3%	24.3%		
Availability of services for people	e needing extra hel	p	-		
Poor/fair	50.0%	43.3%	28.6%		
Good	39.4%	45.9%	57.9%	<0.0001	
Excellent	10.6%	10.8%	13.5%		
Accessibility of convenient public	c transportation				
Poor/fair	50.5%	50.0%	52.4%		
Good	31.6%	40.3%	36.9%	0.1546	
Excellent	17.9%	9.7%	10.7%		
Ability to pay for own vehicle					
Poor/fair	53.1%	28.2%	11.4%		
Good	34.4%	50.6%	47.7%	<.0001	
Excellent	12.5%	21.2%	40.9%		
Efforts to reduce poverty					
Poor/fair	66.7%	59.0%	53.7%		
Good	26.0%	36.6%	39.0%	0.0002	
Excellent	7.3%	4.4%	7.3%		
Efforts to reduce hunger					
Poor/fair	42.8%	34.6%	30.1%		
Good	42.9%	53.6%	49.0%	0.0027	
Excellent	14.3%	11.8%	20.9%		

• Economic aspects varied significantly by household income.

• Those earning <\$25,000 were more likely to rate fair or poor:

• Availability of jobs that offer a good standard of living (77%)

- Ability to meet the basic needs (51%)
- Ability to pay for housing (50%)
- Ability of resources to help budget (51%)
- Ability to pay for education (78%)
- Availability of services for people needing extra help (50%)
- Ability to pay for own vehicle (53%)
- Efforts to reduce poverty (67%)
- Efforts to reduce hunger (43%)

ISSUES IN THE COMMUNITY	<\$25,000	\$25,000-\$75,000	\$75,000+	Difference in
ISSUES IN THE COMMUNITY	109 (15.1%)	341 (47.3%)	271 (37.6%)	rating by income
	Mean (rank)	Mean (rank)	Mean (rank)	
Hunger	2.83 (12)	2.65 (10)	2.56 (10)	0.0362
Obesity	2.91 (9)	2.80 (7)	2.82 (4)	0.5321
Tobacco Use	2.85 (11)	2.63 (12)	2.56 (10)	0.0398
Alcohol Use	3.21 (2)	2.93 (2)	2.84 (2)	0.0047
Over-the-Counter Drug Misuse	3.04 (7)	2.82 (6)	2.68 (9)	0.0063
Prescription Drug Misuse	3.07 (5)	2.85 (5)	2.78 (6)	0.0381
Illegal drug use	3.37 (1)	3.26 (1)	3.25 (1)	0.4561
Gambling	2.42 (16)	2.13 (15)	1.88 (15)	<.0001
Risk of Losing Your Job	2.34 (17)	2.06 (16)	1.73 (17)	<.0001
Risk of Foreclosure and Bankruptcy	2.25 (18)	1.82 (18)	1.53 (18)	<.0001
Excessive Personal Debt	2.52 (15)	2.06 (16)	1.74 (16)	<.0001
Financial Problems Experienced by Local Governments	2.71 (13)	2.58 (13)	2.43 (14)	0.0194
Funding for Schools	2.68 (14)	2.74 (9)	2.76 (7)	0.7234
Identity Theft	3.06 (6)	2.89 (3)	2.84 (3)	0.1281
Sexual Abuse and Sexual Violence	2.97 (8)	2.63 (11)	2.53 (12)	0.0005
Bullying	3.18 (3)	2.86 (4)	2.82 (4)	0.0026
Domestic Abuse, Child Abuse, Elder Abuse	3.18 (3)	2.79 (8)	2.73 (8)	<.0001
Suicide	2.87 (10)	2.56 (14)	2.45 (13)	0.0013

Those earning less than \$25,000 ranked most all the issues as more significant issues than other income • groups: hunger, tobacco use, alcohol use, over the counter drug misuse, prescription drug misuse, gambling, risk of losing your job, risk of foreclosure and bankruptcy, excessive personal debt, financial problems experienced by local governments, sexual abuse and violence, bullying, domestic, child and elder abuse, and suicide were all rated as higher concerns.

Respondents earning less than \$25,000 rated illegal drug use, alcohol use, and domestic, child, and elder ٠ abuse as the top three community issues.

Respondents earning over \$25,000 rated illegal drug use, alcohol use, and identity theft as the top three • community issues

RACIAL COMPARISONS

	White	Non-White	Difference in rating
ASPECTS OF HEALTH	740 (97.2%)	21 (2.8%)	by race
Overall health			
Poor/fair	12.5%	9.1%	
Good	63.2%	68.2%	0.2978
Excellent	24.3%	22.7%	
Overall mental health			
Poor/fair	6.9%	9.1%	
Good	55.2%	59.1%	0.1297
Excellent	37.9%	31.8%	
Overall dental health			
Poor/fair	16.5%	9.5%	
Good	52.0%	81.0%	0.063
Excellent	31.5%	9.5%	
Access to health care			
Poor/fair	8.6%	4.5%	
Good	35.0%	50.0%	0.4889
Excellent	56.4%	45.5%	
Access to mental health care			
Poor/fair	12.2%	25.5%	
Good	42.8%	28.6%	0.0190
Excellent	45.0%	45.9%	
Access to dental care			
Poor/fair	10.5%	9.1%	
Good	35.8%	31.8%	0.6644
Excellent	53.7%	59.1%	
Access to healthy food choices			
Poor/fair	11.2%	13.6%	
Good	40.5%	27.3%	0.5303
Excellent	48.3%	59.1%	
Ability to pay for health care			
Poor/fair	35.6%	45.4%	
Good	43.6%	45.5%	0.5614
Excellent	20.8%	9.1%	
Ability to pay for mental health care			
Poor/fair	38.7%	49.9%	
Good	42.5%	45.5%	0.3688
Excellent	18.8%	4.6%	
Ability to pay for dental care			
---	-------	-------	--------
Poor/fair	35.8%	45.4%	
Good	44.5%	50.0%	0.1909
Excellent	19.7%	4.6%	
Ability to pay for healthy food choices			
Poor/fair	25.4%	31.8%	
Good	49.8%	54.6%	0.6562
Excellent	24.8%	13.6%	
Everyone have insurance (% yes)	93.0%	95.5%	0.6531
Avoid seeing a doctor in past 12 months because of cost (% yes)	27.1%	22.7%	0.8041

• There were no differences in rating of aspects of health by race except for access to mental health care.

• Over 25% of non-white respondents rated their access to mental health care as fair or poor, compared to 12% of white respondents. Only 29% of non-white respondents indicated the access to mental health care was good compared to 43% of with respondents indicating this.

• Caution should be taken when examining these results due to the small number of non-white compared to white respondents.

	White	Non-White	Difference in rating
ASPECTS OF PUBLIC SAFETY	740 (97.2%)	21 (2.8%)	by race
Quality of law enforcement		·	
Poor/fair	18.3%	31.9%	
Good	62.7%	54.5%	0.2341
Excellent	19.0%	13.6%	
Efforts to prevent crime			
Poor/fair	23.4%	40.9%	
Good	61.2%	50.0%	0.2064
Excellent	15.4%	9.1%	
Quality of emergency services			
Poor/fair	8.8%	9.0%	
Good	52.6%	45.5%	0.0496
Excellent	38.6%	45.5%	
Safety of neighborhood		·	
Poor/fair	10.2%	13.7%	
Good	58.0%	72.7%	0.2295
Excellent	31.8%	13.6%	
Safety of schools			
Poor/fair	8.6%	13.6%	
Good	62.8%	68.2%	0.1061
Excellent	28.6%	18.2%	

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Ability to respond to major safety threats			
Poor/fair	25.2%	30.0%	
Good	60.9%	55.0%	0.0292
Excellent	13.9%	15.0%	

• Slightly more non-white respondents rated the quality of emergency services as excellent compared to white respondents.

• Non-white respondents were more "polar," Meaning more likely to rate the ability to respond to major safety threats as either fair/poor or excellent.

• Caution should be taken when examining these results due to the small number of non-white compared to white respondents.

White	Non-White	Difference in rating	
740 (97.2%)	21 (2.8%)	by race	
onal needs	1		
12.1%	26.3%		
47.4%	42.1%	0.3138	
40.5%	31.6%		
21.9%	11.1%		
51.0%	66.7%	0.519	
27.1%	22.2%		
12.1%	0.0%		
50.9%	66.7%	0.3814	
37.0%	33.3%		
9.6%	11.1%		
50.3%	61.1%	0.0154	
40.1%	27.8%		
Quality of higher education			
10.4%	4.7%		
37.8%	42.9%	0.6004	
51.8%	52.4%		
dge or skills			
37.0%	44.5%		
38.5%	44.4%	0.6194	
24.5%	11.1%		
34.1%	33.3%		
41.8%	47.6%	0.9422	
24.1%	19.1%		
	740 (97.2%) onal needs 12.1% 47.4% 40.5% 21.9% 51.0% 27.1% 27.1% 12.1% 50.9% 37.0% 37.0% 9.6% 50.3% 40.1% 9.6% 50.3% 40.1% 10.4% 37.8% 51.8% dge or skills 37.0% 38.5% 24.5%	740 (97.2%) 21 (2.8%) mal needs 26.3% 47.4% 42.1% 40.5% 31.6% 21.9% 11.1% 51.0% 66.7% 27.1% 22.2% 12.1% 0.0% 50.9% 66.7% 37.0% 33.3% 9.6% 11.1% 50.3% 61.1% 40.1% 27.8% 10.4% 4.7% 37.8% 42.9% 51.8% 52.4% dge or skills 37.0% 37.0% 44.5% 38.5% 44.4% 24.5% 11.1%	

Non-white respondents were more likely to rate the quality of schools 4K-12 as good, fair or poor, than white respondents.

Caution should be taken when examining these results due to the small number of non-white compared to white respondents.

	White	Non-White	Difference in rating
ASPECTS OF QUALITY OF LIFE	740 (97.2%)	21 (2.8%)	by race
Leisure time opportunities			
Poor/fair	27.7%	31.8%	
Good	49.1%	59.1%	0.2403
Excellent	23.2%	9.1%	
Opportunities for youth to explore interest	ts and participate in p	ositive activities	
Poor/fair	32.7%	22.7%	
Good	50.5%	68.2%	0.3287
Excellent	16.8%	9.1%	
Opportunities to enjoy fine arts and cultur	al experiences		
Poor/fair	35.8%	36.3%	
Good	41.2%	45.5%	0.9432
Excellent	23.0%	18.2%	
Physical recreation for adults			
Poor/fair	23.6%	4.5%	
Good	46.0%	59.1%	0.2157
Excellent	30.4%	36.4%	
Safe bike routes to school or work			
Poor/fair	45.8%	40.9%	
Good	39.8%	45.5%	0.9605
Excellent	14.4%	13.6%	
Library services in your community			
Poor/fair	15.5%	9.1%	
Good	51.3%	40.9%	0.2458
Excellent	33.2%	50.0%	
Efforts to protect the natural environment			
Poor/fair	35.4%	27.2%	
Good	51.4%	54.6%	0.5057
Excellent	13.2%	18.2%	
Opportunities to volunteer			
Poor/fair	16.1%	9.1%	
Good	53.3%	59.1%	0.8007
Excellent	30.6%	31.8%	

A place where people are treated respectfully			
Poor/fair	30.8%	27.4%	
Good	57.2%	49.9%	0.3297
Excellent	12.0%	22.7%	
A place where people of different cultural/racial/ethnic backgrounds are included in decision-making			
Poor/fair	43.5%	45.5%	
Good	47.6%	40.9%	0.6965
Excellent	8.9%	13.6%	
• There were no differences between white and non-white ratings for any of the aspects of quality of life.			

Caution should be taken when examining these results due to the small number of non-white compared to white respondents.

ASPECTS OF CAREGIVING	White	Non-White	Difference in rating
ASPECTS OF CAREGIVING	740 (97.2%)	21 (2.8%)	by race
Availability of quality child care			
Poor/fair	31.3%	30.7%	
Good	49.0%	46.2%	0.9779
Excellent	19.7%	23.1%	
Ability to pay for child care			
Poor/fair	47.9%	66.7%	
Good	40.5%	8.3%	0.0791
Excellent	11.6%	25.0%	
A place that meets the needs of the elder	ly		
Poor/fair	30.9%	33.4%	
Good	49.8%	57.1%	0.6241
Excellent	19.3%	9.5%	
Access to help to stay in the home			
Poor/fair	36.7%	46.7%	
Good	45.8%	40.0%	0.8487
Excellent	17.5%	13.3%	
A place that meets the needs of persons v	with disabilities		
Poor/fair	35.4%	50.0%	
Good	49.2%	38.9%	0.6338
Excellent	15.4%	11.1%	
Efforts to prevent abuse or neglect			
Poor/fair	33.6%	40.0%	
Good	50.6%	45.0%	0.4041
Excellent	15.8%	15.0%	

Availability of services that meet the needs of abused			
Poor/fair	36.6%	35.0%	
Good	49.7%	45.0%	0.8306
Excellent	13.7%	20.0%	

•

There were no differences between white and non-white ratings for any of the aspects of caregiving. Caution should be taken when examining these results due to the small number of non-white compared to • white respondents.

	White	Non-White	Difference in rating
ECONOMIC ASPECTS	740 (97.2%)	21 (2.8%)	by race
Availability of jobs with wages that offer a	a good standard of livin	ıg	
Poor/fair	58.8%	52.6%	
Good	34.0%	47.4%	0.2415
Excellent	7.2%	0.0%	
Ability to meet basic needs			
Poor/fair	25.4%	30.0%	
Good	48.1%	60.0%	0.1904
Excellent	26.5%	10.0%	
Ability to pay for housing			
Poor/fair	24.7%	26.3%	
Good	47.5%	68.4%	0.0866
Excellent	27.8%	5.3%	
Availability of resources to help budget			
Poor/fair	34.8%	31.5%	
Good	52.0%	63.2%	0.6616
Excellent	13.2%	5.3%	
Ability to pay for education			
Poor/fair	54.3%	83.3%	
Good	32.1%	11.1%	0.0685
Excellent	13.6%	5.6%	
Availability of services for people needing	g extra help		
Poor/fair	37.4%	64.7%	
Good	50.9%	35.3%	0.0120
Excellent	11.7%	0.0%	
Accessibility of convenient public transpo	ortation		
Poor/fair	51.8%	23.5%	
Good	37.1%	64.7%	0.0947
Excellent	11.1%	11.8%	

Ability to pay for own vehicle			
Poor/fair	24.5%	22.2%	
Good	47.7%	61.1%	0.4143
Excellent	27.8%	16.7%	
Efforts to reduce poverty			
Poor/fair	57.2%	65.4%	
Good	37.2%	34.6%	0.5344
Excellent	5.6%	0.0%	
Efforts to reduce hunger			
Poor/fair	34.2%	47.4%	
Good	51.0%	42.1%	0.5237
Excellent	14.8%	10.5%	
Non-white respondents were more likely to rate the availability of carvises for people people and ing extra help as			

• Non-white respondents were more likely to rate the availability of services for people needing extra help as fair or poor compared to white respondents; 65% of non-white respondents indicated this compared to white respondents

• There were no other differences between white and non-white ratings for any of the economic aspects.

• Caution should be taken when examining these results due to the small number of non-white compared to white respondents.

ISSUES IN THE COMMUNITY	White 740 (97.2%)	Non-White 21 (2.8%)	Difference in rating by race
	Mean (rank)	Mean (rank)	
Hunger	2.62 (12)	2.73 (11)	0.5761
Obesity	2.82 (6)	2.81 (9)	0.9444
Tobacco Use	2.64 (10)	2.71 (12)	0.7194
Alcohol Use	2.92 (2)	3.41 (2)	0.0204
Over-the-Counter Drug Misuse	2.78 (8)	3.14 (5)	0.0947
Prescription Drug Misuse	2.85 (5)	3.18 (4)	0.1119
Illegal drug use	3.26 (1)	3.50 (1)	0.2207
Gambling	2.09 (15)	1.95 (17)	0.5177
Risk of Losing Your Job	1.94 (17)	2.43 (15)	0.0306
Risk of Foreclosure and Bankruptcy	1.75 (18)	1.86 (18)	0.6163
Excessive Personal Debt	1.98 (16)	2.14 (16)	0.4871
Financial Problems Experienced by Local Governments	2.55 (13)	2.77 (10)	0.2797
Funding for Schools	2.76 (9)	2.68 (13)	0.7236
Identity Theft	2.91 (3)	2.91 (7)	0.9834
Sexual Abuse and Sexual Violence	2.64 (11)	2.82 (8)	0.3904
Bullying	2.88 (4)	3.23 (3)	0.0958
Domestic Abuse, Child Abuse, Elder Abuse	2.81 (7)	3.05 (6)	0.2546
Suicide	2.54 (14)	2.68 (13)	0.4963

• Non-white respondents rated alcohol use and risk of losing your job as bigger issues in the community.

• White respondents rated illegal drug use, alcohol use, and identity theft as the top three issues in the community.

• Non-white respondents rated illegal drug use, alcohol use, and bullying as the top three issues in the community

• Caution should be taken when examining these results due to the small number of non-white compared to white respondents.

APPENDIX 3 RANDOM HOUSEHOLD SURVEY RESPONSES | COMBINED

DEMOGRAPHICS

Ν	791
Gender	
Male	259 (33.0%)
Female	507 (64.7%)
Prefer not to say	18 (2.3%)
Age	
21-35	114 (15.0%)
36-50	234 (30.8%)
51-64	199 (26.2%)
65+	212 (27.9%)
Average Age	Mean=53.94; SD=15.98; Median=52
Race/Ethnicity	
White	747 (97.1%)
Black	7 (0.9%)
Native American	2 (0.3%)
Hmong	1 (0.1%)
Other Asian	1 (0.1%)
Hispanic	11 (1.4%)
Household Size	
1 person	109 (14.1%)
2 people	360 (46.4%)
3-4 people	230 (29.6%)
5+ people	77 (9.9%)
Minors Living at Home (% yes)	253 (32.4%)
Caregiver (% yes)	209 (26.8%)
Highest Level of Education	
<high diploma<="" school="" td=""><td>28 (3.6%)</td></high>	28 (3.6%)
High School Grad	172 (21.9%)
Vocational	92 (11.7%)
Some College	142 (18.1%)
College Graduate	209 (26.6%)
Post College Graduation	142 (18.1%)
Years Lived in Community	
<5 years	67 (8.5%)
6-10 years	111 (14.1%)
10+ years	390 (49.5%)
always	220 (27.9%)
Living Arrangement (% rent)	106 (13.8%)

Household Income		
<\$10,000	30 (4.1%)	
\$10,000-25,000	81 (11.1%)	
\$25,000-50,000	179 (24.6%)	
\$50,000-75,0000	165 (22.7%)	
\$75,000-100,000	151 (20.8%)	
>\$100,000	121 (16.6%)	
Work for Pay		
Yes	498 (63.9%)	
No	80 (10.3%)	
No/looking for work	18 (2.3%)	
Retired	184 (23.6%)	
Volunteer (% yes)	444 (57.1%)	

OVERALL SURVEY RESPONSES

How would you rate your community as a Poor	• • •
	1.2% (9)
Fair	10.1% (78)
Good	53.6% (414)
Excellent	35.1% (271)
Thinking of the following aspects of HEA how would you rate: (Q4)	NLTH in the area in which you live and work
Your overall health (q4a)	
Poor	1.0% (8)
Fair	11.5% (90)
Good	63.4% (498)
Excellent	24.2% (190)
Your mental health (q4b)	
Poor	0.6% (5)
Fair	6.5% (51)
Good	55.0% (434)
Excellent	37.9% (299)
Your dental health (q4c)	
Poor	4.7% (37)
Fair	11.7% (92)
Good	52.4% (412)
Excellent	31.3% (246)
Your access to health care (q4d)	
Poor	2.2% (17)
Fair	6.5% (51)
Good	35.0% (275)
Excellent	56.4% (443)
Your access to mental health care (q4e)	
Poor	3.1% (23)
Fair	9.7% (71)
Good	42.0% (309)
Excellent	45.2% (333)
Your access to dental care (q4f)	
Poor	4.3% (34)
Fair	6.1% (48)
Good	35.7% (281)
Excellent	53.9% (425)

Your access to healthy food choices (q4g)		
Poor	1.9% (15)	
Fair	9.7% (76)	
Good	39.9% (313)	
Excellent	48.5% (380)	
Your ability to pay for health care (q4h)		
Poor	9.9% (78)	
Fair	25.7% (202)	
Good	43.7% (343)	
Excellent	20.6% (162)	
Your ability to pay for mental health care (q4i)		
Poor	11.4% (88)	
Fair	27.3% (210)	
Good	42.9% (330)	
Excellent	18.3% (141)	
Your ability to pay for dental care (q4j)		
Poor	13.0% (102)	
Fair	22.8% (179)	
Good	44.8% (351)	
Excellent	19.4% (152)	
Your ability to pay for healthy food choices (q4k)	-	
Poor	5.6% (44)	
Fair	19.9% (156)	
Good	50.0% (393)	
Excellent	24.6% (193)	
The quality of water in rivers and lakes in your community (q4l)		
Poor	5.3% (41)	
Fair	29.9% (233)	
Good	51.5% (402)	
Excellent	13.3% (104)	
Everyone in household has medical insurance (q20) (% no)	6.9% (54)	
Avoided care in past 12 months because of cost (q21) (% yes)	27.1% (212)	

Thinking of the following aspects of PUBLIC SAFETY in your community, how would you rate: (Q5)		
The overall quality of law enforcement (q5a)		
Poor	2.9% (23)	
Fair	15.7% (123)	
Good	62.5% (123)	
Excellent	19.0% (149)	
Efforts to prevent crime (q5b)		
Poor	3.4% (27)	
Fair	20.5% (161)	
Good	60.6% (475)	
Excellent	15.4% (121)	
The overall quality of emergency services (q5c)		
Poor	0.5% (4)	
Fair	8.4% (66)	
Good	51.9% (407)	
Excellent	39.2% (308)	
The safety of your neighborhood (q5d)		
Poor	1.5% (12)	
Fair	8.8% (69)	
Good	58.2% (456)	
Excellent	31.5% (247)	
The safety of schools in your community (q5e)		
Poor	0.6% (5)	
Fair	8.1% (63)	
Good	62.7% (488)	
Excellent	28.5% (222)	
Your community's ability to respond to major safety three	eats (q5f)	
Poor	3.4% (26)	
Fair	22.0% (170)	
Good	60.7% (469)	
Excellent	14.0% (108)	

Thinking of the following aspects of EDUCATI learning in your community, how would you r	
Your community as a place that meets your fa	mily's educational needs (q6a)
Poor	1.7% (13)
Fair	8.8% (69)
Good	38.2% (300)
Excellent	33.1% (260)
does not apply	18.3% (144)
The availability of birth-to-three education (q	(6b)
Poor	4.1% (32)
Fair	11.3% (89)
Good	36.3% (285)
Excellent	19.6% (154)
does not apply	28.8% (226)
The availability of early education opportunit	ies (q6c)
Poor	1.7% (13)
Fair	6.9% (54)
Good	36.5% (287)
Excellent	27.1% (213)
does not apply	27.9% (219)
The quality of schools - 4K-12 in your commu	nity (q6d)
Poor	1.7% (13)
Fair	6.2% (49)
Good	40.6% (319)
Excellent	32.1% (252)
does not apply	19.4% (152)
The quality of higher education (q6e)	
Poor	2.7% (21)
Fair	6.5% (51)
Good	33.8% (266)
Excellent	45.6% (359)
does not apply	11.4% (90)
Opportunities in your job to gain knowledge	or skills (q6f)
Poor	8.8% (69)
Fair	17.3% (136)
Good	27.5% (216)
Excellent	17.1% (134)
does not apply	29.3% (230)

The availability of community resources to learn new skills (q6g)	
Poor	9.0% (71)
Fair	22.1% (174)
Good	39.2% (308)
Excellent	22.1% (174)
does not apply	7.5% (59)

The availability of leisure time opportunities	s (q7a)
Poor	5.0% (39)
Fair	22.8% (179)
Good	49.4% (388)
Excellent	22.8% (179)
Opportunities for youth to explore interests (q7b)	and participate in positive activities
Poor	5.3% (41)
Fair	27.2% (211)
Good	50.8% (394)
Excellent	16.8% (130)
Opportunities to enjoy fine arts and cultural	l experiences (q7c)
Poor	10.6% (83)
Fair	25.2% (198)
Good	41.1% (323)
Excellent	23.2% (182)
Opportunities for physical recreation for ad	ults (q7d)
Poor	4.7% (37)
Fair	18.0% (141)
Good	46.3% (363)
Excellent	31.0% (243)
The availability of safe bike routes to schoo	l or work (q7e)
Poor	14.4% (112)
Fair	31.3% (243)
Good	39.9% (310)
Excellent	14.4% (112)
The quality of library services in your comm	unity (q7f)
Poor	2.2% (17)
Fair	13.1% (102)
Good	51.3% (400)
Excellent	33.5% (261)
The efforts to protect the natural environme	nt (q7g)
Poor	8.3% (65)
Fair	26.5% (208)
Good	51.5% (404)
Excellent	13.7% (107)

Opportunities to volunteer in your community (q7h)		
Poor	2.3% (18)	
Fair	13.8% (108)	
Good	52.9% (413)	
Excellent	31.0% (242)	
A place where people are treated respectfully, regardless of their race, culture, religion, gender, sexual orientation, income level, disability or age (q7i)		
Poor	5.9% (46)	
Fair	25.3% (198)	
Good	56.2% (440)	
Excellent	12.6% (99)	
A place where people of different cultural/racial/ethnic backgrounds are included in decision-making (q7j)		
Poor	9.1% (70)	
Fair	34.3% (264)	
Good	47.2% (363)	
Excellent	9.4% (72)	

Thinking of the following aspects of CARE you rate: (Q8)	GIVING in your community, how would
The availability of quality child care (q8a)	
Poor	2.9% (23)
Fair	13.3% (104)
Good	25.4% (198)
Excellent	10.1% (79)
Does not apply	48.3% (377)
Your ability to pay for child care (q8b)	
Poor	5.7% (44)
Fair	15.2% (118)
Good	16.7% (130)
Excellent	5.2% (40)
Does not apply	57.3% (445)
Your community as a place that meets the	needs of elderly persons (q8c)
Poor	6.6% (52)
Fair	20.3% (159)
Good	43.2% (339)
Excellent	16.4% (129)
Does not apply	13.5% (106)
Your access to help you or a family membe	r needs to stay in the home (q8d)
Poor	5.2% (41)
Fair	21.0% (164)
Good	32.3% (253)
Excellent	12.3% (96)
Does not apply	29.3% (229)
Your community as a place that meets the	needs of persons with disabilities (q8e)
Poor	4.2% (33)
Fair	25.6% (200)
Good	40.7% (318)
Excellent	12.8% (100)
Does not apply	16.7% (130)
Efforts to prevent abuse or neglect of vulne	erable people (q8f)
Poor	5.2% (40)
Fair	23.5% (182)
Good	43.0% (333)
Excellent	13.4% (104)
Does not apply	14.9% (115)

The availability of services that meet the needs of abused children and adults(q8g)	
Poor	6.3% (49)
Fair	22.8% (178)
Good	39.7% (310)
Excellent	11.2% (87)
Does not apply	20.0% (156)

Thinking of the following ECONOMIC ASPECTS of life in your community, how would you rate: (Q9) The availability of jobs with wages that offer a good standard of living (q9a) Poor 15.2% (119) Fair 36.2% (283) Good 30.0% (235) Excellent 6.4% (50) Does not apply 12.3% (96) The ability you have to meet basic needs (q9b) Poor 5.4% (42) Fair 19.5% (152) Good 47.% (366) Excellent 25.3% (197) Does not apply 2.8% (22) Your ability to pay for housing (q9c) Poor 4.9% (38) Fair 18.8% (146) Good 46.2% (359) Excellent 25.7% (200) Does not apply 4.4% (34) The availability of resources to help you budget (q9d) Poor 7.1% (55) Fair 22.3% (173) Good 43.7% (339) Excellent 10.7% (83) Does not apply 16.2% (126) Your ability to pay for education (q9e) Poor 14.9% (116) Fair 24.8% (193) Good 22.5% (175) Excellent 9.3% (72) Does not apply 28.4% (221)

The availability of services for people needing extra help (q9f)		
Poor	6.6% (51)	
Fair	24.9% (193)	
Good	41.3% (320)	
Excellent	9.6% (74)	
Does not apply	17.7% (137)	
The accessibility of convenient public transpor	tation (q9g)	
Poor	21.9% (171)	
Fair	22.4% (175)	
Good	33.3% (260)	
Excellent	9.7% (76)	
Does not apply	12.6% (98)	
Your ability to pay for own vehicle (q9h)		
Poor	6.2% (48)	
Fair	17.2% (134)	
Good	46.4% (362)	
Excellent	26.5% (207)	
Does not apply	3.8% (30)	
Efforts to reduce poverty in your community (q	9i)	
Poor	15.9% (122)	
Fair	37.4% (287)	
Good	34.7% (266)	
Excellent	5.4% (41)	
Does not apply	6.7% (51)	
Efforts to reduce hunger in your community (q9	Pj)	
Poor	7.2% (56)	
Fair	26.0% (201)	
Good	48.9% (378)	
Excellent	14.4% (111)	
Does not apply	3.5% (27)	

How concerned are you about the following issues in your community?	
(1=no concern, 4=very concerned) (Q10)	
	Mean
Hunger	2.62
Obesity	2.82
Tobacco use	2.62
Alcohol use	2.92
Over the counter drug misuse	2.79
Prescription drug misuse	2.85
Illegal drug use	3.27
Gambling (in-person or online)	2.08
Risk of losing your job	1.96
Risk of foreclosure and bankruptcy	1.76
Excessive personal debt	1.99
Financial problems experienced by local governments	2.55
Funding for schools	2.75
Identity theft	2.91
Sexual abuse and sexual violence	2.64
Bullying	2.89
Domestic abuse, child abuse, elder abuse	2.82
Suicide	2.55

APPENDIX 4 CONVENIENCE SURVEY RESULTS

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Comparisons between Random Household and Convenience Survey	199
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Select responses for Solicited Surveys	224

Note: Individuals surveyed at the WAFER location were asked a portion of the convenience survey questions, not all. The questions that were asked focused primarily on community and income issues. The reduction in the number of questions asked was made in an attempt to increase the number of individuals participating in the convenience survey. These discrepancies can be found in the tables in which WAFER feedback is not given.

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CONVENIENCE SURVEY TABLES

Demographics:	Random Sample		Convenier	nce Sample	Difference between surveys (P-value)
Number in survey	79	91	753		
County					
Houston	67	8.5%	38	5.0%	
La Crosse	435	55.0%	497	66.0%	
Monroe	124	15.7%	88	11.7%	0.0001
Trempealeau	69	8.7%	59	7.8%	
Vernon	90	11.4%	57	7.6%	
Gender					
Male	259	32.7%	208	27.6%	
Female	507	64.1%	511	67.9%	0.1215
Prefer not to say	18	2.3%	34	4.5%	
Age	1				
14-35	114	14.4%	348	46.2%	
36-50	234	29.6%	183	24.3%	0.0001
51-64	199	25.2%	135	17.9%	
65+	212	26.8%	50	6.6%	
Average	SD=1	=53.94 15.98 an=52	Mean=38.68 SD=16.56 median=36		
Race					
White	747	94.4%	561	74.5%	
Black	7	0.9%	37	4.9%	
Native American	2	0.3%	9	1.2%	
Hmong	1	0.1%	33	4.4%	0.0001
Other Asian	1	0.1%	5	0.7%	
Hispanic	11	1.4%	49	6.5%	
Combination	0	0.0%	3	0.4%	_
Household Size					
1 person	109	13.8%	83	11.0%	
2 people	360	45.5%	196	26.0%	0.0001
3-4 people	237	30.0%	255	33.9%	
5+ people	77	9.7%	131	17.4%	
Minors living at home (% yes)	253	32.0%	331	44.0%	0.0001
Caregiver (% yes)	209	26.4%	157	20.8%	0.2169

Education					
<hs diploma<="" th=""><th>28</th><th>3.5%</th><th>92</th><th>12.2%</th><th></th></hs>	28	3.5%	92	12.2%	
HS Grad	172	21.7%	117	15.5%	
Vocational	92	11.6%	38	5.0%	0.0001
Some College	142	18.0%	156	20.7%	0.0001
College Graduate	209	26.4%	193	25.6%	
Post-College Graduation	142	18.0%	109	14.5%	
Live in community					
<5 years	67	8.5%	147	19.5%	
6-10 years	111	14.0%	118	15.7%	0.0001
10+ years	390	49.3%	238	31.6%	0.0001
Always	220	27.8%	146	19.4%	
Ownership (% rent)	106	13.4%	353	46.9%	0.0001
Income					
<\$10,000	30	3.8%	140	18.6%	
\$10,000-25,000	81	10.2%	154	20.5%	
\$25,000-50,000	179	22.6%	123	16.3%	0.0001
\$50,000-75,0000	165	20.9%	114	15.1%	0.0001
\$75,000-100,000	151	19.1%	81	10.8%	
>\$100,000	121	15.3%	75	10.0%	
Work for pay		• •			
Yes	498	63.0%	482	64.0%	
No	80	10.1%	97	12.9%	0.0001
No/looking for work	18	2.3%	77	10.2%	0.0001
Retired	184	23.3%	47	6.2%	
Volunteer (% yes)	444	57.1%	419	55.6%	0.335
Language version					
English	791	100%	714	94.8%	
Spanish			30	4.0%	0.0001
Hmong			9	1.2%	

Where Convenience Survey Completed:	N	%
African American Mutual Assistance Network	10	1.3%
Bluff Country Family Resources	1	0.1%
Boys & Girls Clubs of Greater La Crosse	16	2.1%
Couleecap	35	4.6%
Crossfire	18	2.4%
Families First of Monroe County	2	0.3%
GALAXY Youth Group	11	1.5%
Hillview Terrance Assisted Living; Carroll Heights Senior Apartments	7	0.9%
Hmong New Year Celebration	13	1.7%
La Crosse County WIC Clinic (Learner Support and Transition Division of Western class)	11	1.5%
Lugar de Reunion	17	2.3%
Neighborhood City Church	3	0.4%
Options Clinic	97	12.9%
St. Clare Health Mission	1	0.1%
Trempealeau County WIC Clinic	29	3.9%
Turned Leaf Festival	5	0.7%
WAFER Food Pantry	69	9.2%
Western Technical College	22	2.9%
YWCA La Crosse	32	4.2%
Unknown or personally completed	354	47.0%

OVERALL RATING OF COMMUNITY AS A PLACE TO LIVE	Random Sample		Convenier	ice Sample	Difference between surveys
Fair/poor	87	11.0%	132	17.5%	
Good	414	52.3%	404	53.7%	0.0001
Excellent	271	34.3%	196	26.0%	
Mean Score	3.23		3.07		0.0001

ASPECTS OF HEALTH	Random	Sample	Convenience Sample		Difference between surveys
Overall health (q4a)					
Fair/poor	98	12.4%	144	19.1%	
Good	498	63.0%	431	57.2%	0.0012
Excellent	190	24.0%	173	23.0%	
Mean Score	3.	11	3	.02	0.0080
Mental health (q4b)					
Fair/poor	56	7.1%	147	19.5%	
Good	434	54.9%	370	49.1%	0.0001
Excellent	299	37.8%	224	29.7%	
Mean Score	3.	30	3	9.06	0.0001
Dental health (q4c)					
Fair/poor	129	16.3%	209	27.8%	
Good	412	52.1%	351	46.6%	0.0001
Excellent	246	31.1%	182	24.2%	
Mean Score	3.	10	2.88		0.0001
Access to health care (q4d)					
Fair/poor	68	8.6%	132	17.5%	
Good	278	35.1%	311	41.3%	0.0001
Excellent	443	56.0%	302	40.1%	
Mean Score	3.	46	3	3.18	0.0001
Access to mental health care (q4e)					
Fair/poor	94	11.9%	143	19.0%	
Good	309	39.1%	258	34.3%	0.0001
Excellent	333	42.1%	160	21.2%	
Mean Score	3.	29	2	.95	0.0001
Access to dental care (q4f)					
Fair/poor	82	10.4%	207	27.5%	
Good	281	35.5%	281	37.3%	0.0001
Excellent	425	53.7%	253	33.6%	
Mean Score	3.	39	2	.94	0.0001

Access to healthy food choices (q4	g)				
Fair/poor	91	11.5%	155	20.6%	
Good	313	39.6%	309	41.0%	0.0001
Excellent	380	48.0%	270	35.9%	
Mean Score	3.	35	3	.12	0.0001
Ability to pay for health care (q4h)			1		I
Fair/poor	280	35.4%	341	45.3%	
Good	343	43.4%	258	34.3%	0.0001
Excellent	162	20.5%	119	15.8%	
Mean Score	2.	75	2	.50	0.0001
Ability to pay for mental health ca	re (q4i)				
Fair/poor	298	37.7%	337	44.8%	
Good	330	41.7%	260	34.5%	0.0045
Excellent	141	17.8%	118	15.7%	
Mean Score	2.	68	2	.50	0.0002
Ability to pay for dental care (q4j)					
Fair/poor	281	35.5%	350	46.5%	
Good	351	44.4%	249	33.1%	0.0001
Excellent	152	19.2%	118	15.7%	
Mean Score	2.	71	2	.46	0.0001
Ability to pay for healthy food (q4)	<)				-
Fair/poor	200	25.3%	267	35.5%	
Good	393	49.7%	303	40.2%	0.0001
Excellent	193	24.4%	150	19.9%	
Mean Score	2.	94	2	.74	0.0001
Quality of water in rivers and lakes	s (q4l)			7	
Fair/poor	274	34.6%	298	39.6%	
Good	402	50.8%	329	43.7%	0.0310
Excellent	104	13.1%	107	14.2%	
Mean Score	2.73 2.65			.65	0.0500
Everyone have insurance (q20) % no	54	6.9%	147	19.5%	0.0001
Avoid care in past 12 months because of cost (q21) % yes	212	27.1%	259	34.4%	0.0001

ASPECTS OF PUBLIC SAFETY	Random	Sample	Convenience Sample		Difference between surveys
Quality of law enforcement (q5a)					
Fair/poor	146	18.5%	193	28.2%	
Good	491	62.1%	363	53.0%	0.0001
Excellent	149	18.8%	121	17.7%	
Mean Score	2.	97	2.	83	0.0003
Efforts to prevent crime (q5b)					
Fair/poor	188	23.8%	188	27.4%	
Good	478	60.4%	381	55.6%	0.2047
Excellent	121	15.3%	103	15.0%	
Mean Score	2.	88	2.	81	0.0835
Quality of emergency services (q5	c)				
Fair/poor	70	8.8%	72	10.5%	
Good	407	51.5%	384	56.1%	0.0026
Excellent	308	38.9%	201	29.3%	
Mean Score	3.	30	3.19		0.0009
Safety of neighborhood (q5d)					
Fair/poor	81	10.2%	121	17.7%	
Good	456	57.6%	357	52.1%	0.0001
Excellent	247	31.2%	195	28.5%	
Mean Score	3.	20	3.	07	0.0010
Safety of schools (q5e)					
Fair/poor	68	8.6%	94	13.7%	
Good	488	61.7%	392	57.2%	0.0065
Excellent	222	28.1%	188	27.4%	
Mean Score	3.	19	3.	11	0.0227
Ability to respond to major safety	threats (q5f)				
Fair/poor	196	24.8%	171	25.0%	
Good	469	59.3%	369	53.9%	0.1773
Excellent	108	13.7%	112	16.4%	
Mean Score	2.	85	2.	87	0.5625

ASPECTS OF EDUCATION	Random Sample Convenience Sample			Difference between surveys				
A place that meets your family's educational needs (q6a)								
Fair/poor	82	10.4%	82	12.0%				
Good	300	37.9%	268	39.1%	0.5974			
Excellent	260	32.9%	217	31.7%				
Mean Score	3.	26	3	3.22	0.3840			
Birth-to-three education (q6b)								
Fair/poor	121	15.3%	102	14.9%				
Good	285	36.0%	255	37.2%	0.8431			
Excellent	154	19.5%	144	21.0%				
Mean Score	3.	00	3	3.05	0.3036			
Early education opportunities (q6c	:)							
Fair/poor	67	8.5%	67	9.8%				
Good	287	36.3%	257	37.5%	0.8144			
Excellent	213	26.9%	188	27.4%				
Mean Score	3.	23	3	3.21	0.6207			
Quality of schools - 4K-12 (q6d)								
Fair/poor	62	7.8%	80	11.7%				
Good	319	40.3%	275	40.1%	0.0769			
Excellent	252	31.9%	216	31.5%				
Mean Score	3.	28	3	3.21	0.0946			
Quality of higher education (q6e)			_					
Fair/poor	72	9.1%	69	10.1%				
Good	266	33.6%	223	32.6%	0.7774			
Excellent	359	45.4%	306	44.7%				
Mean Score	3.	38	3	3.37	0.7738			
Opportunities in your job to gain k	nowledge o	or skills (q6	f)					
Fair/poor	205	25.9%	189	27.6%				
Good	216	27.3%	244	35.6%	0.3352			
Excellent	134	16.9%	138	20.1%				
Mean Score	2.	75	2	2.81	0.2455			
Community resources to learn new	skills (q6g	()						
Fair/poor	245	31.0%	210	30.7%				
Good	308	38.9%	270	39.4%	0.8996			
Excellent	174	22.0%	143	20.9%				
Mean Score	2.	80	2	2.80	0.9919			

ASPECTS OF QUALITY OF LIFE	Random Sample Convenience Sample			Difference between surveys					
Leisure time opportunities (q7a)									
Fair/poor	218	27.6%	209	30.5%					
Good	388	49.1%	332	48.5%	0.2347				
Excellent	179	22.6%	133	19.4%					
Mean Score	2.	90	2.	.82	0.0484				
Opportunities for youth to explore interests and participate in positive activities (q7b)									
Fair/poor	252	31.9%	200	29.2%					
Good	394	49.8%	345	50.4%	0.4824				
Excellent	130	16.4%	124	18.1%					
Mean Score	2.	79	2.	.83	0.3200				
Opportunities to enjoy fine arts an	d cultural e	xperiences	(q7c)						
Fair/poor	281	35.5%	241	35.2%					
Good	323	40.8%	289	42.2%	0.2189				
Excellent	182	23.0%	128	18.7%					
Mean Score	2.	77	2.	73	0.4342				
Physical recreation for adults (q7d)								
Fair/poor	178	22.5%	150	21.9%					
Good	363	45.9%	315	46.0%	0.9468				
Excellent	243	30.7%	203	29.6%					
Mean Score	3.	04	3.	03	0.9487				
Safe bike routes to school or work	(q7e)								
Fair/poor	355	44.9%	270	39.4%					
Good	310	39.2%	283	41.3%	0.1278				
Excellent	112	14.2%	112	16.4%					
Mean Score	2.	54	2.	65	0.0193				
Library services in your community	r (q7f)								
Fair/poor	119	15.0%	118	17.2%					
Good	400	50.6%	348	50.8%	0.3042				
Excellent	261	33.0%	203	29.6%					
Mean Score	3.	16	3.	11	0.1693				
Efforts to protect the natural enviro	onment (q7	g)							
Fair/poor	273	34.5%	285	41.6%					
Good	404	51.1%	296	43.2%	0.0077				
Excellent	107	13.5%	88	12.8%					
Mean Score	2.	71	2.	60	0.0175				

Opportunities to volunteer (q7h)								
Fair/poor	126	15.9%	144	21.0%				
Good	413	52.2%	331	48.3%	0.0268			
Excellent	242	30.6%	190	27.7%				
Mean Score	3.	13	3.	04	0.0308			
A place where people are treated re	espectfully	(q7i)						
Fair/poor	244	30.8%	295	43.1%				
Good	440	55.6%	291	42.5%	0.0001			
Excellent	99	12.5%	85	12.4%				
Mean Score	2.76		2.	58	0.0001			
A place where people of different cultural/racial/ethnic backgrounds are included in decision-making (q7j)								
Fair/poor	334	42.2%	339	49.5%				
Good	363	45.9%	252	36.8%	0.0021			
Excellent	72	9.1%	72	10.5%				
Mean Score	2.	57	2.	44	0.0031			

ASPECTS OF CAREGIVING	Random	Sample	Convenience Sample		Difference between surveys			
Availability of quality child care (q8a)								
Fair/poor	127	16.1%	118	17.2%				
Good	198	25.0%	187	27.3%	0.9950			
Excellent	79	10.0%	74	10.8%				
Mean Score	2.8	32	2	.81	0.8083			
Ability to pay for child care (q8b)								
Fair/poor	162	20.5%	196	28.6%				
Good	130	16.4%	120	17.5%	0.2544			
Excellent	40	5.1%	41	6.0%				
Mean Score	2.50		2	.39	0.1034			
A place that meets the needs of the	e elderly (q	8c)						
Fair/poor	211	26.7%	167	24.4%				
Good	339	42.9%	263	38.4%	0.9870			
Excellent	129	16.3%	100	14.6%				
Mean Score	2.8	30	2	.81	0.8557			
Access to help to stay in the home	(q8d)							
Fair/poor	205	25.9%	175	25.5%				
Good	253	32.0%	221	32.3%	0.9438			
Excellent	96	12.1%	79	11.5%				
Mean Score	2.7	73	2	.74	0.8823			

A place that meets the needs of persons with disabilities (q8e)						
Fair/poor	233	29.5%	182	26.6%		
Good	318	40.2%	278	40.6%	0.3454	
Excellent	100	12.6%	100	14.6%		
Mean Score	2.	75	2.8		0.1925	
Efforts to prevent abuse or neglect (q8f)						
Fair/poor	222	28.1%	177	25.8%		
Good	333	42.1%	289	42.2%	0.6391	
Excellent	104	13.1%	97	14.2%		
Mean Score	2.	76	2.8		0.3663	
Availability of services that meet the needs of abused (q8g)						
Fair/poor	227	28.7%	185	27.0%		
Good	310	39.2%	104	15.2%	0.0110	
Excellent	87	11.0%	116	16.9%		
Mean Score	2.	70		.80	0.0337	

ECONOMIC ASPECTS	Random Sample Convenience Sample		Difference between surveys			
Availability of jobs with wages that offer a good standard of living (q9a)						
Fair/poor	402	50.8%	397	52.7%		
Good	235	29.7%	231	30.7%	0.7198	
Excellent	50	6.3%	58	7.7%		
Mean Score	2.31 2.3		.31	0.9081		
Ability to meet basic needs (q9b)						
Fair/poor	194	24.5%	226	30.0%		
Good	366	46.3%	325	43.2%	0.0060	
Excellent	197	24.9%	145	19.3%		
Mean Score	2.	95	2.81		0.0013	
Ability to pay for housing (q9c)						
Fair/poor	184	23.3%	258	34.3%		
Good	359	45.4%	289	38.4%	0.0001	
Excellent	200	25.3%	132	17.5%		
Mean Score	2.	97	2.71		0.0001	
Availability of resources to help bu	dget (q9d)					
Fair/poor	228	28.8%	252	33.5%		
Good	339	42.9%	296	39.3%	0.0531	
Excellent	83	10.5%	101	13.4%		
Mean Score	2.	69	2	.69	0.8834	
Ability to pay for education (q9e)						
Fair/poor	309	39.1%	355	47.1%		
Good	175	22.1%	183	24.3%	0.7083	
Excellent	72	9.1%	86	11.4%		
Mean Score	2.37 2.32		0.4336			
Availability of services for people n	-		ef)	1		
Fair/poor	244	30.8%	251	33.3%	0.0013	
Good	320	40.5%	284	37.7%		
Excellent	74	9.4%	121	16.1%		
Mean Score	2.65		2.72		0.1407	
Accessibility of convenient public t		ion (q9g)				
Fair/poor	346	43.7%	299	39.7%	0.0001	
Good	260	32.9%	256	34.0%		
Excellent	76	9.6%	132	17.5%		
Mean Score	2.	35	2.59		0.0001	

Ability to pay for own vehicle (q9h)						
Fair/poor	182	23.0%	306	40.6%		
Good	362	45.8%	258	34.3%	0.0001	
Excellent	207	26.2%	117	15.5%		
Mean Score	2.	97 2.58		.58	0.0001	
Efforts to reduce poverty (q9i)						
Fair/poor	409	51.7%	387	51.4%		
Good	266	33.6%	267	35.5%	0.6504	
Excellent	41	5.2%	47	6.2%		
Mean Score	2.	2.32		.35	0.5017	
Efforts to reduce hunger (q9j)						
Fair/poor	257	32.5%	266	35.3%		
Good	378	47.8%	320	42.5%	0.1533	
Excellent	111	14.0%	116	15.4%		
Mean Score	2.	73	2.72		0.7916	

ISSUES IN THE COMMUNITY	Random Sample Convenience San		Difference between surveys
Hunger	2.62	2.58	0.3171
Obesity	2.82	2.67	0.0035
Tobacco Use	2.62	2.57	0.2912
Alcohol Use	2.92	2.87	0.2419
Over-the-Counter Drug Misuse	2.79	2.65	0.0071
Prescription Drug Misuse	2.85	2.81	0.3637
Illegal drug use	3.27	3.02	0.0001
Gambling	2.08	1.92	0.0010
Risk of Losing Your Job	1.96	2.04	0.1362
Risk of Foreclosure and Bankruptcy	1.76	1.91	0.0028
Excessive Personal Debt	1.99	2.22	0.0001
Financial Problems Experienced by Local Governments	2.55	2.35	0.0001
Funding for Schools	2.75	2.59	0.0021
Identity Theft	2.91	2.42	0.0001
Sexual Abuse and Sexual Violence	2.64	2.62	0.6596
Bullying	2.89	2.84	0.3049
Domestic Abuse, Child Abuse, Elder Abuse	2.82	2.80	0.7464
Suicide	2.55	2.62	0.1781
COMPARISONS BY HOW SAMPLE WAS SELECTED

Demographics:	Solicited Sample	Voluntary Sample	Difference between surveys (P-value)
Number in survey	493 (65.5%)	260 (34.5%)	
County			
Houston	3.5%	8.1%	
La Crosse	71.7%	59.1%	
Monroe	9.6%	16.2%	0.0001
Trempealeau	9.4%	5.4%	
Vernon	5.8%	11.2%	
Gender			- I
Male	30.3%	26.4%	0.07/0
Female	69.7%	73.6%	0.2749
Age			
14-50	77.9%	67.3%	
51-64	14.0%	27.9%	0.0001
65+	8.2%	4.8%	
Race			
White	76.3%	88.0%	0.0002
Non-white	23.7%	12.0%	
Household Size			
1 person	15.2%	8.1%	
2 people	24.8%	36.8%	0.0006
3+ people	60.0%	55.0%	
Minors living at home (% yes)	51.2%	50.6%	0.8865
Caregiver (% yes)	22.7%	26.0%	0.3428
Education			
<hs grad<="" td=""><td>40.1%</td><td>11.6%</td><td></td></hs>	40.1%	11.6%	
Vocational/some college	34.8%	15.1%	0.0001
College graduate+	25.1%	76.4%	_
Live in community			
<10 years	46.4%	32.4%	
10+ years	26.9%	51.4%	0.0001
Always	26.7%	16.2%	
Ownership (% rent)	64.7%	25.2%	0.0001
Income			· · · · · · · · · · · · · · · · · · ·
<\$50,000	77.3%	32.6%	0.0001
\$50,0000+	22.7%	67.5%	0.0001

Work for pay			
Yes	57.7%	87.3%	
No/retired	28.2%	7.3%	0.0001
No/looking for work	14.2%	5.4%	
Volunteer (% yes)	52.8%	77.9%	0.0001
Language version			
English	92.1%		
Spanish	6.1%	100%	
Hmong	1.8%		

OVERALL RATING OF COMMUNITY AS A PLACE TO LIVE	Solicited Sample	Voluntary Sample	Difference between surveys
Fair/poor	20.2%	14.0%	
Good	55.2%	55.3%	0.0528
Excellent	24.6%	30.7%	
Mean Score	3.03	3.14	0.0378

ASPECTS OF HEALTH	Solicited Sample	Voluntary Sample	Difference between surveys
Overall health (q4a)			
Fair/poor	21.7%	14.7%	
Good	57.7%	57.5%	0.0178
Excellent	20.7%	27.8%	
Mean Score	2.96	3.12	0.0035
Mental health (q4b)			
Fair/poor	22.6%	14.7%	
Good	49.4%	51.0%	0.0214
Excellent	28.0%	34.4%	
Mean Score	3.00	3.17	0.0051
Dental health (q4c)			
Fair/poor	33.3%	18.5%	
Good	44.3%	52.9%	0.0001
Excellent	22.4%	28.6%	
Mean Score	2.79	3.05	0.0001
Access to health care (q4d)			
Fair/poor	20.6%	12.4%	
Good	43.4%	38.6%	0.0007
Excellent	36.0%	49.0%	
Mean Score	3.10	3.32	0.0006
Access to mental health care (q4e)			
Fair/poor	25.1%	27.8%	
Good	46.1%	45.6%	0.8379
Excellent	28.9%	26.7%	
Mean Score	2.97	2.89	0.4450
Access to dental care (q4f)			
Fair/poor	32.9%	18.6%	
Good	39.1%35.7	%	0.0001
Excellent	28.0%	45.7%	
Mean Score	2.81	3.19	0.0001

Access to healthy food choices (q4	g)		
Fair/poor	24.1%	15.6%	
Good	44.8%	37.1%	0.0001
Excellent	31.2%	47.3%	
Mean Score	3.03	3.29	0.0001
Ability to pay for health care (q4h)		-	
Fair/poor	52.9%	37.8%	
Good	32.5%	42.1%	0.0005
Excellent	14.6%	20.1%	
Mean Score	2.39	2.71	0.0001
Ability to pay for mental health car	e (q4i)		
Fair/poor	53.2%	36.4%	
Good	32.0%	44.2%	0.0001
Excellent	14.9%	19.4%	
Mean Score	2.38	2.70	0.0001
Ability to pay for dental care (q4j)			
Fair/poor	55.1%	37.6%	
Good	30.9%	14.5%	0.0001
Excellent	13.9%	20.9%	
Mean Score	2.34	2.69	0.0001
Ability to pay for healthy food (q4k)		
Fair/poor	40.7%	30.5%	
Good	41.0%	44.1%	0.0109
Excellent	18.3%	25.4%	
Mean Score	2.66	2.88	0.0016
Quality of water in rivers and lakes	(q4l)		
Fair/poor	42.9%	36.4%	
Good	42.9%	48.5%	0.2291
Excellent	14.3%	15.1%	
Mean Score	2.61	2.72	0.0695
Everyone have insurance (q20) % no	24.7%	12.8%	0.0001
Avoid care in past 12 months because of cost (q21) % yes	34.7%	37.2%	0.04955

ASPECTS OF PUBLIC SAFETY	Solicited Sample	Voluntary Sample	Difference between surveys
Quality of law enforcement (q5a)			
Fair/poor	31.3%	24.0%	
Good	52.5%	55.4%	0.0886
Excellent	16.2%	20.5%	
Mean Score	2.79	2.91	0.0593
Efforts to prevent crime (q5b)			
Fair/poor	28.7%	26.9%	
Good	54.7%	59.9%	0.3417
Excellent	16.6%	13.2%	
Mean Score	2.82	2.80	0.6617
Quality of emergency services (q5	ic)		
Fair/poor	9.1%	13.9%	
Good	62.3%	52.5%	0.0272
Excellent	28.6%	33.6%	
Mean Score	3.19	3.19	0.9907
Safety of neighborhood (q5d)			
Fair/poor	20.8%	13.5%	
Good	53.1%	52.9%	0.0206
Excellent	26.1%	33.6%	
Mean Score	3.02	3.16	0.0225
Safety of schools (q5e)			
Fair/poor	15.2%	12.0%	
Good	58.3%	57.9%	0.3812
Excellent	26.5%	30.1%	
Mean Score	3.09	3.15	0.2352
Ability to respond to major safety	threats (q5f)		
Fair/poor	25.8%	26.9%	
Good	55.7%	58.0%	0.5499
Excellent	18.5%	15.2%	
Mean Score	2.90	2.84	0.3375

ASPECTS OF EDUCATION	Solicited Sample	Voluntary Sample	Difference between surveys
A place that meets your family's e	ducational needs (q6a))	
Fair/poor	13.6%	15.8%	
Good	51.5%	40.7%	0.0433
Excellent	35.0%	43.4%	
Mean Score	3.20	3.26	0.3291
Birth-to-three education (q6b)			
Fair/poor	21.2%	19.1%	
Good	48.8%	53.9%	0.5329
Excellent	30.0%	27.0%	
Mean Score	3.06	3.04	0.8506
Early education opportunities (q6	c)		
Fair/poor	12.1%	14.6%	
Good	49.0%	51.9%	0.4149
Excellent	38.9%	33.5%	
Mean Score	3.25	3.16	0.1401
Quality of schools - 4K-12 (q6d)			
Fair/poor	15.6%	11.6%	
Good	48.1%	48.2%	0.3574
Excellent	36.3%	10.2%	
Mean Score	3.18	3.25	0.2557
Quality of higher education (q6e)			
Fair/poor	10.8%	12.7%	
Good	39.2%	34.3%	0.4421
Excellent	50.0%	53.0%	
Mean Score	3.36	3.39	0.6759
Opportunities in your job to gain l	knowledge or skills (q6	f)	
Fair/poor	36.3%	28.5%	
Good	40.5%	46.0%	0.1480
Excellent	23.2%	25.5%	
Mean Score	2.76	2.89	0.1126
Community resources to learn new	v skills (q6g)		
Fair/poor	33.9%	33.5%	
Good	42.7%	44.2%	0.9237
Excellent	23.4%	22.3%	
Mean Score	2.80	2.80	0.9889

ASPECTS OF QUALITY OF LIFE	Solicited Sample	Voluntary Sample	Difference between surveys
Leisure time opportunities (q7a)			-
Fair/poor	33.7%	26.6%	
Good	48.4%	50.6%	0.0946
Excellent	17.8%	22.8%	
Mean Score	2.76	2.91	0.0185
Opportunities for youth to explore	interests and participa	te in positive activities	(q7b)
Fair/poor	30.4%	29.1%	
Good	50.1%	53.9%	0.5987
Excellent	19.5%	17.1%	
Mean Score	2.83	2.83	0.9536
Opportunities to enjoy fine arts an	d cultural experiences	(q7c)	
Fair/poor	38.1%	34.4%	
Good	43.1%	45.2%	0.6144
Excellent	18.8%	20.5%	
Mean Score	2.70	2.78	0.2175
Physical recreation for adults (q7d)		
Fair/poor	24.3%	19.6%	
Good	48.8%	46.2%	0.1583
Excellent	27.9%	34.2%	
Mean Score	2.97	3.13	0.0175
Safe bike routes to school or work	(q7e)		
Fair/poor	36.7%	46.7%	
Good	44.6%	39.4%	0.0288
Excellent	18.7%	13.9%	
Mean Score	2.71	2.56	0.0349
Library services in your community	/ (q7f)		
Fair/poor	19.2%	15.2%	
Good	51.0%	53.7%	0.4177
Excellent	29.8%	31.1%	
Mean Score	3.09	3.14	0.4221
Efforts to protect the natural enviro	onment (q7g)		
Fair/poor	40.5%	45.9%	
Good	46.4%	40.9%	003395
Excellent	13.1%	13.2%	
Mean Score	2.62	2.57	0.4061

Opportunities to volunteer (q7h)			
Fair/poor	24.4%	17.4%	
Good	49.3%	50.6%	0.0660
Excellent	46.4%	32.1%	
Mean Score	2.98	3.14	0.0081
A place where people are treated r	espectfully (q7i)		
Fair/poor	39.4%	51.2%	
Good	44.8%	41.2%	0.0010
Excellent	15.8%	7.7%	
Mean Score	2.68	2.43	0.0002
A place where people of different ((q7j)	cultural/racial/ethnic ba	ackgrounds are included	l in decision-making
Fair/poor	44.3%	61.8%	
Good	42.1%	31.7%	0.0001
Excellent	13.6%	6.6%	
Mean Score	2.57	2.24	0.0001

ASPECTS OF CAREGIVING	Solicited Sample	Voluntary Sample	Difference between surveys
Availability of quality child care (q	8a)		
Fair/poor	59.7%	33.3%	
Good	49.3%	49.3%	0.6077
Excellent	21.0%	17.3%	
Mean Score	2.86	2.74	0.1857
Ability to pay for child care (q8b)			
Fair/poor	52.6%	58.2%	
Good	36.0%	30.1%	0.4994
Excellent	11.4%	11.6%	
Mean Score	2.42	2.35	0.4886
A place that meets the needs of th	e elderly (q8c)		
Fair/poor	28.7%	35.6%	
Good	48.1%	51.9%	0.0061
Excellent	23.3%	12.5%	
Mean Score	2.89	2.70	0.0080
Access to help to stay in the home	(q8d)		
Fair/poor	32.0%	44.6%	
Good	48.5%	43.5%	0.0091
Excellent	19.6%	12.0%	
Mean Score	2.83	2.59	0.0018
A place that meets the needs of pe	ersons with disabilities	(q8e)	
Fair/poor	28.6%	38.2%	
Good	50.0%	49.1%	0.0087
Excellent	21.4%	12.7%	
Mean Score	2.90	2.67	0.0006
Efforts to prevent abuse or neglect	: (q8f)		
Fair/poor	27.0%	38.1%	
Good	53.1%	48.7%	0.0100
Excellent	19.9%	13.3%	
Mean Score	2.90	2.66	0.0004
Availability of services that meet t	he needs of abused (qa	3g)	
Fair/poor	28.7%	38.0%	
Good	48.8%	44.4%	0.0538
Excellent	22.5%	17.5%	
Mean Score	2.88	2.69	0.0092

ECONOMIC ASPECTS	Solicited Sample	Voluntary Sample	Difference between surveys
Availability of jobs with wages that	t offer a good standard	of living (q9a)	
Fair/poor	60.4%	53.5%	
Good	30.8%	38.6%	0.1134
Excellent	8.8%	7.9%	
Mean Score	2.28	2.35	0.3465
Ability to meet basic needs (q9b)			
Fair/poor	35.4%	27.4%	
Good	46.2%	47.6%	0.0385
Excellent	18.5%	25.0%	
Mean Score	2.75	2.91	0.0167
Ability to pay for housing (q9c)			
Fair/poor	42.0%	30.9%	
Good	41.3%	44.7%	0.0055
Excellent	16.6%	24.4%	
Mean Score	2.63	2.86	0.0010
Availability of resources to help bu	udget (q9d)		
Fair/poor	40.8%	35.4%	
Good	44.4%	47.7%	0.3929
Excellent	14.8%	16.9%	
Mean Score	2.65	2.74	0.1859
Ability to pay for education (q9e)			
Fair/poor	58.9%	53.5%	
Good	27.7%	32.2%	0.3991
Excellent	13.5%	14.4%	
Mean Score	2.25	2.44	0.0229
Availability of services for people	needing extra help (q9	Ð	
Fair/poor	38.7%	37.5%	
Good	42.3%	45.1%	0.7635
Excellent	19.0%	17.5%	
Mean Score	2.72	2.72	0.9664
Accessibility of convenient public	transportation (q9g)		
Fair/poor	38.7%	52.5%	
Good	37.4%	37.1%	0.0001
Excellent	23.9%	10.4%	
Mean Score	2.71	2.36	0.0001

Ability to pay for own vehicle (q9h)				
Fair/poor	51.8%	32.8%		
Good	34.6%	43.7%	0.0001	
Excellent	13.6%	23.5%		
Mean Score	2.44	2.83	0.0001	
Efforts to reduce poverty (q9i)				
Fair/poor	53.1%	59.0%		
Good	39.8%	35.1%	0.3245	
Excellent	7.1%	6.0%		
Mean Score	2.37	2.29	0.2341	
Efforts to reduce hunger (q9j)				
Fair/poor	36.8%	39.9%		
Good	45.6%	45.6%	0.5087	
Excellent	17.6%	14.5%		
Mean Score	2.74	2.68	0.3832	

ISSUES IN THE COMMUNITY	Solicited Sample	Voluntary Sample	Difference between surveys
Hunger	2.46	2.80	0.1032
Obesity	2.56	2.86	0.0334
Tobacco Use	2.54	2.62	0.5351
Alcohol Use	2.75	3.07	0.0261
Over-the-Counter Drug Misuse	2.57	2.80	0.0413
Prescription Drug Misuse	2.68	3.04	0.0017
Illegal drug use	2.89	3.25	0.0001
Gambling	1.91	1.94	0.4258
Risk of Losing Your Job	2.02	2.09	0.4385
Risk of Foreclosure and Bankruptcy	1.94	1.85	0.0983
Excessive Personal Debt	2.25	2.17	0.0481
Financial Problems Experienced by Local Governments	2.28	2.45	0.1745
Funding for Schools	2.44	2.84	0.0001
Identity Theft	2.38	2.50	0.087
Sexual Abuse and Sexual Violence	2.57	2.70	0.7439
Bullying	2.82	2.88	0.7881
Domestic Abuse, Child Abuse, Elder Abuse	2.70	2.98	0.1146
Suicide	2.59	2.66	0.6849

RESPONSES FROM SELECTED SURVEYS - DEMOGRAPHICS

County	Couleecap	Options	WAFER	YWCA	Trempealeau
N	32	94	68	28	29
Houston	0%	2%	1%	0%	-
La Crosse	75%	75%	97%	96%	-
Monroe	6%	9%	0%	4%	-
Trempealeau	0%	4%	0%	0%	100%
Vernon	19%	10%	1%	0%	
Gender	ľ				
Male	35%	15%	31%	4%	29%
Female	65%	85%	69%	96%	71%
Age					
14-50	66%	100%	50%	96%	92%
51-64	28%	0%	38%	4%	4%
65+	6%	0%	12%	0%	4%
Race			· · · · · · · · · · · · · · · · · · ·		
White	100%	91%	82%	89%	56%
Non-white	0%	9%	18%	11%	44%
Household size	ľ				
1 person	50%	16%	0%	4%	4%
2 people	22%	34%	38%	14%	8%
3+ people	28%	50%	62%	82%	88%
Minors living at home (% yes)	45%	33%	50%	72%	84%
Caregiver (% yes)	28%	13%	13%	18%	13%
Education	I				
<hs grad<="" td=""><td>44%</td><td>23%</td><td>53%</td><td>54%</td><td>63%</td></hs>	44%	23%	53%	54%	63%
College/Voc	41%	56%	30%	8%	21%
College Graduate+	16%	20%	17%	38%	16%
Live in community	1		, ,		
<10	50%	53%	63%	36%	73%
10+ years	19%	21%	25%	25%	9%
Always	31%	26%	12%	39%	18%
Ownership (% rent)	91%	74%	83%	57%	74%
Income	L. L		1		
< \$50,000	100%	85%	93%	67%	90%
\$50,000+	0%	15%	7%	33%	10%
Work for pay					
Yes	60%	76%	28%	67%	65%
No	23%	14%	54%	15%	22%
No/looking for work	17%	10%	18%	19%	13%

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OVERALL COMMUNITY RATING/ASPECTS OF HEALTH

County	Couleecap	Options	WAFER	YWCA	Trempealeau
Overall place to live	e (q3)				
Fair/poor	7%	14%	27%	14%	8%
Good	53%	62%	62%	54%	81%
Excellent	40%	24%	11%	32%	11%
Mean	3.30	3.10	3.00	2.85	3.15
Overall health (q4a)				
Fair/poor	47%	9%	39%	25%	11%
Good	41%	66%	46%	61%	78%
Excellent	12%	25%	15%	14%	11%
Mean	2.56	3.13	2.67	2.89	3.00
Mental health (q4b)		11		-1
Fair/poor	34%	21%	28%	41%	7%
Good	47%	49%	44%	44%	70%
Excellent	19%	30%	28%	15%	22%
Mean	2.78	3.05	2.94	2.67	3.07
Dental health (q4c)			J I		
Fair/poor	41%	30%	50%	22%	25%
Good	44%	51%	32%	52%	61%
Excellent	16%	20%	18%	26%	14%
Mean	2.59	2.85	2.47	3.03	2.82
Access to health ca	re (q4d)		<u> </u>		
Fair/poor	16%	27%	29%	7%	14%
Good	45%	45%	36%	59%	64%
Excellent	39%	28%	35%	33%	21%
Mean	3.19	2.94	2.97	3.22	3.33
Access to mental he	ealth care (q4e)		11		
Fair/poor	19%	28%	28%	15%	19%
Good	52%	49%	42%	59%	70%
Excellent	29%	23%	31%	26%	11%
Mean	3.00	2.88	2.97	3.07	2.85
Access to dental ca	re (q4f)		11		
Fair/poor	26%	26%	54%	30%	26%
Good	45%	52%	27%	52%	63%
Excellent	29%	23%	19%	19%	11%
Mean	2.97	2.86	2.42	2.78	2.70
Access to healthy fo					
Fair/poor	19%	23%	38%	24%	15%
Good	42%	44%	37%	60%	74%

Excellent	39%	33%	25%	16%	11%
Mean	3.16	3.06	2.78	2.84	2.96
Ability to pay for health	care (q4h)				
Fair/poor	43%	61%	66%	52%	42%
Good	30%	32%	18%	37%	50%
Excellent	27%	7%	16%	11%	8%
Mean	2.53	2.21	2.19	2.26	2.60
Ability to pay for menta	l health care (q	4i)			`
Fair/poor	45%	60%	62%	44%	58%
Good	31%	34%	16%	41%	38%
Excellent	24%	5%	22%	15%	4%
Mean	2.48	2.14	2.26	2.52	2.27
Ability to pay for dental	care (q4j)				<u>`</u>
Fair/poor	48%	61%	66%	38%	52%
Good	31%	32%	15%	46%	41%
Excellent	21%	6%	19%	15%	7%
Mean	2.41	2.18	2.18	2.58	2.37
Ability to pay for health	y food (q4k)				
Fair/poor	46%	41%	56%	20%	19%
Good	39%	46%	25%	60%	74%
Excellent	16%	14%	19%	20%	7%
Mean	2.58	2.65	2.38	2.96	2.78
Quality of water in river	s and lakes (q4	l)			
Fair/poor	56%	34%	47%	24%	44%
Good	34%	50%	33%	56%	56%
Excellent	9%	16%	20%	20%	0%
Mean	2.41	2.75	2.55	2.92	2.40
Everyone have insurance (q20) % no	10%	32%	28%	22%	52%
Avoid care in past 12 months because of cost (q21) % yes	30%	52%	33%	46%	23%

ASPECTS OF PUBLIC HEALTH

Note: In an attempt to increase convenience survey participation, individuals at the WAFER location completed a condensed survey with questions that focused on community and income issues. These discrepancies can be found in the tables in which WAFER data is not provided.

County	Couleecap	Options	WAFER	YWCA	Trempealeau
Quality of law enforcen	nent (q5a)			·	
Fair/poor	6%	26%	-	36%	22%
Good	47%	59%	-	57%	59%
Excellent	22%	15%	-	7%	19%
Mean	2.84	2.86	-	2.68	2.96
Efforts to prevent crime	e (q5b)				
Fair/poor	25%	25%	-	37%	24%
Good	53%	56%	-	56%	60%
Excellent	22%	20%	-	7%	16%
Mean	2.91	2.90	-	2.63	2.84
Quality of emergency s	ervices (q5c)				
Fair/poor	9%	10%	-	4%	0%
Good	56%	66%	-	81%	67%
Excellent	34%	24%	-	15%	33%
Mean	3.25	3.11	-	3.08	3.33
Safety of neighborhoo	d (q5d)				
Fair/poor	19%	18%	-	37%	8%
Good	50%	52%	-	56%	70%
Excellent	31%	31%	-	7%	22%
Mean	3.09	3.11	-	2.67	3.11
Safety of schools (q5e)	Ì				
Fair/poor	3%	9%	-	19%	4%
Good	63%	67%	-	81%	81%
Excellent	33%	24%	-	0%	15%
Mean	3.30	3.14	-	2.81	3.11
Ability to respond to m	ajor safety threa	ıts (q5f)			
Fair/poor	28%	20%	-	35%	26%
Good	53%	57%	-	50%	52%
Excellent	19%	23%	-	15%	22%
Mean	2.91	3.00	-	2.81	2.96

ASPECTS OF EDUCATION

County	Couleecap	Options	WAFER	YWCA	Trempealeau
A place that meets you	r family's educa	tional needs (q	6a)		
Fair/poor	4%	10%	-	18%	15%
Good	44%	55%	-	64%	59%
Excellent	52%	35%	-	18%	26%
Mean	3.48	3.25	-	3.00	3.07
Birth-to-three education	on (q6b)				
Fair/poor	5%	22%	-	18%	23%
Good	53%	55%	-	65%	58%
Excellent	42%	23%	-	18%	19%
Mean	3.37	3.02	-	3.00	2.92
Early education opport	unities (q6c)				
Fair/poor	11%	13%	-	10%	0%
Good	42%	52%	-	65%	59%
Excellent	47%	35%	-	25%	41%
Mean	3.37	3.22	-	3.15	3.41
Quality of schools - 4K	-12 (q6d)	1	<u> </u>		-
Fair/poor	0%	14%	-	19%	8%
Good	43%	51%	-	62%	58%
Excellent	57%	35%	-	19%	34%
Mean	3.57	3.21	-	2.95	3.27
Quality of higher educ	ation (q6e)		· · · ·		
Fair/poor	7%	9%	-	8%	21%
Good	30%	31%	-	56%	63%
Excellent	63%	60%	-	36%	16%
Mean	3.56	3.49	-	3.24	2.88
Opportunities in your j	ob to gain know	ledge or skills ((q6f)		
Fair/poor	32%	38%	-	24%	48%
Good	36%	41%	-	43%	39%
Excellent	32%	21%	-	33%	13%
Mean	2.88	2.69	-	3.05	2.61
Community resources	o learn new skil	ls (q6g)			
Fair/poor	26%	31%	-	20%	48%
Good	48%	48%	-	56%	44%
Excellent	26%	21%	-	24%	8%
Mean	2.97	2.80	-	3.04	2.48

ASPECTS OF QUALITY OF LIFE

County	Couleecap	Options	WAFER	YWCA	Trempealeau
Leisure time opportuni	ties (q7a)	-			
Fair/poor	34%	33%	-	37%	27%
Good	41%	51%	-	48%	62%
Excellent	25%	17%	-	15%	12%
Mean	2.88	2.78	-	2.70	2.77
Opportunities for yout	h to explore inte	rests and partic	cipate in positi	ve activities (q7b)	
Fair/poor	19%	31%	-	26%	32%
Good	48%	50%	-	56%	60%
Excellent	32%	19%	-	18%	8%
Mean	3.13	2.81	-	2.89	2.68
Opportunities to enjoy	fine arts and cu	ltural experient	ces (q7c)		
Fair/poor	22%	39%	-	26%	40%
Good	50%	42%	-	56%	52%
Excellent	28%	20%	-	19%	8%
Mean	3.06	2.70	-	2.89	2.52
Physical recreation for	adults (q7d)				
Fair/poor	13%	18%	-	26%	40%
Good	44%	54%	-	48%	40%
Excellent	44%	28%	-	26%	20%
Mean	3.28	3.06	-	3.00	2.64
Safe bike routes to sch	ool or work (q7e	e)	• •	• •	
Fair/poor	9%	31%	-	46%	44%
Good	56%	48%	-	31%	48%
Excellent	34%	21%	-	23%	8%
Mean	3.19	2.82	-	2.65	2.44
Library services in you	r community (q7	ſf)			
Fair/poor	6%	14%	-	15%	32%
Good	56%	57%	-	59%	48%
Excellent	38%	29%	-	26%	20%
Mean	3.31	3.16	-	3.11	2.84
Efforts to protect the n	atural environm	ent (q7g)			
Fair/poor	31%	40%	-	38%	44%
Good	56%	48%	-	46%	44%
Excellent	13%	13%	-	15%	12%
Mean	2.75	2.60	-	2.65	2.56

Opportunities to volunt	eer (q7h)				
Fair/poor	22%	17%	-	15%	46%
Good	44%	58%	-	54%	42%
Excellent	34%	25%	-	31%	12%
Mean	3.09	3.04	-	3.15	2.54
A place where people a	re treated respe	ectfully (q7i)			
Fair/poor	31%	41%	-	38%	20%
Good	38%	44%	-	42%	60%
Excellent	31%	16%	-	19%	20%
Mean	2.97	2.67	-	2.69	3.00
A place where people of	f different cultu	ral/racial/ethni	c backgrounds	are included in de	cision-making
(q7j)					
Fair/poor	21%	42%	-	37%	36%
Good	55%	45%	-	44%	48%
Excellent	24%	13%	-	19%	16%
Mean	2.97	2.61	-	2.67	2.76

ASPECTS OF CARE-GIVING

County	Couleecap	Options	WAFER	YWCA	Trempealeau
Availability of quali	ty child care (q8a)		· ·		
Fair/poor	7%	24%	-	24%	24%
Good	43%	57%	-	65%	72%
Excellent	50%	19%	-	12%	4%
Mean	3.36	2.92	-	2.88	2.80
Ability to pay for ch	ild care (q8b)				÷
Fair/poor	43%	57%	-	40%	42%
Good	29%	34%	-	60%	50%
Excellent	29%	9%	-	0%	8%
Mean	2.64	2.40	-	2.60	2.58
A place that meets	the needs of the eld	erly (q8c)	· · · · ·		
Fair/poor	5%	30%	-	36%	27%
Good	48%	48%	-	55%	62%
Excellent	48%	22%	-	9%	11%
Mean	3.43	2.87	-	2.55	2.85
Access to help to st	ay in the home (q8o	ł)	· · ·		
Fair/poor	29%	32%	-	12%	20%
Good	33%	46%	-	88%	72%
Excellent	38%	22%	-	0%	8%
Mean	3.00	2.89	-	2.82	2.80
A place that meets	the needs of person	s with disabili	ties (q8e)		
Fair/poor	11%	26%	-	32%	40%
Good	57%	58%	-	59%	48%
Excellent	32%	16%	-	9%	12%
Mean	3.21	2.89	-	2.68	2.72
Efforts to prevent a	buse or neglect (q8	Ð			
Fair/poor	14%	24%	-	44%	24%
Good	61%	55%	-	52%	60%
Excellent	25%	21%	-	4%	16%
Mean	3.04	2.96	-	2.61	2.88
Availability of servi	ces that meet the n	eeds of abused	l (q8g)		
Fair/poor	15%	27%	-	30%	32%
Good	38%	49%	-	57%	52%
Excellent	46%	23%	-	13%	16%
Mean	3.31	2.88	-	2.74	2.72

ECONOMIC ASPECTS

County	Couleecap	Options	WAFER	YWCA	Trempealeau
Availability of jobs wi	ith wages that off	er a good stand	lard of living (q	19a)	
Fair/poor	52%	58%	65%	74%	64%
Good	39%	33%	21%	19%	28%
Excellent	10%	9%	14%	7%	8%
Mean	2.35	2.35	2.25	2.19	2.36
Ability to meet basic	needs (q9b)				
Fair/poor	25%	33%	49%	42%	36%
Good	56%	54%	38%	38%	52%
Excellent	19%	13%	13%	19%	12%
Mean	2.84	2.74	2.54	2.58	2.72
Ability to pay for hou	sing (q9c)				
Fair/poor	45%	40%	54%	44%	52%
Good	45%	47%	27%	44%	44%
Excellent	10%	13%	19%	12%	4%
Mean	2.42	2.62	2.52	2.44	2.52
Availability of resour	ces to help budge	t (q9d)			
Fair/poor	29%	36%	40%	40%	50%
Good	52%	49%	38%	44%	50%
Excellent	19%	14%	22%	17%	0%
Mean	2.84	2.71	2.75	2.64	2.50
Ability to pay for edu	cation (q9e)				
Fair/poor	54%	58%	70%	54%	68%
Good	35%	26%	16%	31%	27%
Excellent	12%	16%	14%	15%	5%
Mean	2.27	2.30	1.98	2.35	2.09
Availability of service	es for people need	ing extra help	(q9f)		
Fair/poor	23%	34%	46%	42%	42%
Good	42%	50%	30%	46%	46%
Excellent	36%	16%	24%	12%	12%
Mean	3.10	2.76	2.68	2.58	2.54
Accessibility of conve	enient public trans	sportation (q9g	<u>s</u>)	·	
Fair/poor	16%	37%	31%	35%	58%
Good	39%	41%	31%	50%	42%
Excellent	45%	22%	38%	15%	0%
Mean	3.19	2.72	2.97	2.73	2.13

Ability to pay for own vehicle (q9h)								
Fair/poor	60%	44%	66%	46%	56%			
Good	40%	41%	20%	46%	36%			
Excellent	0%	15%	14%	8%	8%			
Mean	2.10	2.57	2.25	2.46	2.44			
Efforts to reduce pover	t y (q9i)							
Fair/poor	29%	57%	55%	56%	64%			
Good	61%	37%	32%	32%	36%			
Excellent	10%	7%	12%	12%	0%			
Mean	2.68	2.37	2.37	2.44	2.24			
Efforts to reduce hunge	er (q9j)							
Fair/poor	16%	46%	26%	48%	40%			
Good	59%	44%	35%	36%	48%			
Excellent	25%	10%	38%	16%	12%			
Mean	3.03	2.60	3.06	2.64	2.60			

ISSUES IN THE COMMUNITY

County	Couleecap	Options	WAFER	YWCA	Trempealeau
Hunger	2.55	2.17	2.87	2.43	1.84
Obesity	2.35	2.59	2.81	2.42	2.32
Tobacco Use	2.61	2.52	2.74	2.24	2.04
Alcohol Use	2.84	2.85	2.65	2.81	2.16
Over the counter drug misuse	2.71	2.44	2.82	2.38	2.04
Prescription drug misuse	2.77	2.66	2.81	2.56	2.08
Illegal drug use	2.94	2.81	2.88	2.96	2.26
Gambling	2.10	1.74	2.25	1.70	1.88
Risk of losing your job	2.17	1.97	2.17	2.00	2.13
Risk of foreclosure and bankruptcy	1.70	1.91	2.06	2.26	1.96
Excessive personal debt	2.30	2.47	2.50	2.26	2.09
Financial problems experienced by local governments	2.32	2.05	2.60	2.19	1.90
Funding for schools	2.26	2.16	2.56	2.31	2.09
Identity theft	2.35	2.10	2.78	2.26	2.13
Sexual abuse and sexual violence	2.81	2.43	2.75	2.59	1.96
Bullying	2.84	2.60	2.86	2.78	2.54
Domestic abuse, child abuse, elder abuse	2.90	2.56	2.85	2.81	2.29
Suicide	2.74	2.47	2.72	2.70	2.04

APPENDIX 5 COMMUNITY CONVERSATIONS

One of the ways in which community feedback was collected was through five separate community conversations. These conversations were conducted in lieu of the focus groups that were conducted in the COMPASS NOW 2012 community needs assessment. These small group gatherings were a safe space in which community members could come together and share their thoughts and experiences about living in the Great Rivers Region. Below is information about these conversations, as well as the main topics discussed by participants.

* Indicates the most recurrently identified community asset or need by participants.

COMMUNITY CONVERSATION #1

Date: May 14, 2015 Time: 6:00 to 8:00 p.m. Location: Southside Community Center, 1300 S. 6th St., La Crosse, WI 54601

Target Audience/Participant: African American Community

Identified Community Needs:

- Alcohol and drug use
- Children with no direction/guidance*
- Community Communication*
- Education*
- Racial Relations

Additional Feedback/Comments:

Participants recognized the need for more community outlets by youth and youth mentoring coming directly form positive peers within the neighborhoods vs. outsiders coming in to work with youth. Also, the group felt more faith-based, neighborhood-focused opportunities to keep youth on a positive path would be helpful.

COMMUNITY CONVERSATION #2

Date: June 26, 2015 Time: 5:30 to 7:00 p.m. Location: Boys & Girls Clubs of Greater La Crosse, 811 8th St. S., La Crosse, WI 54601

Target Audience/Participant: Low-Income Adults

Identified Community Assets:

- Neighborhood
- Resources*
- School

Identified Community Needs:

- Bullying
- Crime
- Housing*
- Jobs*
- Parks
- Roads*
- Trains

COMMUNITY CONVERSATION #3

Date: June 26, 2015 Time: 5:30 to 7:00 p.m. Location: Boys & Girls Clubs of Greater La Crosse, 811 8th St. S., La Crosse, WI 54601

Target Audience/Participant: Youth At-Risk

Identified Community Assets:

- Activities*
- Environment
- Friends
- Safety*
- Schools*

Identified Community Needs:

- Activities
- Schools*
- Environment*
- Friends

COMMUNITY CONVERSATION #4

Date: October 1, 2015 Time: 6:00 to 8:00 p.m. Location: Lugar de Reunion, 201 E. Franklin St., Room B3, Sparta, WI 54656

Target Audience/Participant: Hispanic Community

Identified Community Assets:

- Healthy food choices/farmer's market
- Clean community
- Safe community
- Good education system for children
- Having a community center for the Hispanic community

Identified Community Needs:

- Child Care
- Transportation
- Safety
- Adult Education
- Health
- Respect
- The need for more interpreters
- Access to healthy food
- The need for more recreational activities

Additional Feedback/Comments:

- Abuse
- At-risk youth
- Food availability
- Jobs with adequate income
- Poverty
- Substance use, abuse, and dependency

COMMUNITY CONVERSATION #5

Date: October 2, 2015 Time: 10:00 a.m. to 12:00 p.m. Location: Lugar de Reunion, 201 E. Franklin St., Room B3, Sparta, WI 54656

Target Audience/Participant: Hispanic Community

Identified Community Assets:

- Support for Hispanic community
- Work opportunities
- Children's education

Identified Community Needs:

- Child Care
- Access to driver's license
- Training for immigrants
- Discrimination (police and in the workforce)
- Education
- The need for more bilingual people and interpreters at places of business, clinics, and hospitals
- Accessible banks

Additional Feedback/Comments:

- At-risk youth
- Availability of quality housing
- Discrimination towards Hispanics
- Drivers licensing limit barriers to obtaining
- Food availability
- Help with housing repairs
- Jobs with adequate income
- Medical health
- Need for more personal bilingual instructors in public hospitals
- Organization that helps pay medical bills for those who cannot pay
- Poverty
- Substance use, abuse and dependency