

# IN COLLABORATION WITH

COLORADO CANYONS

COMMUNITY HOSPITAL

ST. MARY'S MEDICAL CENTER

WEST SPRINGS HOSPITAL, INC.



Mesa County is unique in our collaborative approach to the community health needs assessment. Local non-profit hospitals and the public health agency release one comprehensive document every three years to meet the requirements of all agencies. This facilitates a more unified approach to health in our community.

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# **EXECUTIVE SUMMARY**

A Community Health Needs Assessment is a critical tool to understanding the health status of a population. It presents information and analysis on health indicators and identifies areas of concern. The three primary goals are to provide a current snapshot of the health status of Mesa County, to bring attention to areas of concern, and to fulfill assessment needs for all partners of our local public health system.

Mesa County Public Health leads the assessment process on behalf of public health partners every three years. Data from national, state, and local sources are included to provide a comprehensive picture of health in the community. A complete list of data sources organized by page is located at the end of the document.

This version of the assessment follows a public health framework adapted from the Bay Area Regional Health Inequities Initiative. In addition to considering traditional public health data related to injury, disease, and causes of death, the framework pulls in data related to social factors (gender, race/ethnicity), institutional factors (laws and regulations, government agencies, schools), and living conditions (physical environment, social environment, economic environment, service environment).

By focusing on various social and community factors, this assessment pays special attention to emerging public health practice. We believe that in order to solve our most difficult public health challenges, it is imperative to understand the population groups experiencing significant differences in health outcomes and the barriers impeding their access to resources and opportunities. This upstream approach to health will result in the development and implementation of targeted and sustainable strategies.

New to the assessment is an "Areas of Concern" table. This replaces what was previously referred to as "Winnable Battles". The table lists indicators that have an opportunity to be improved through community action. We intend for this table to guide prioritization of efforts in our community.

### A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES

MESA COUNTY PUBLIC HEALTH INEQUITIES INITIATIVE

**HEALTH.MESACOUNTY.US** 

#### **UPSTREAM DOWNSTREAM**



#### Social **Factors**

**Population** Age Race **Ethnicity** Demographics



#### Institutional **Factors**

**Corporations &** Businesses Schools & Universities **Child Care** Laws & Regulations





#### **Living Conditions**

### Access to Healthy

Foods Housing Air Quality

#### **Economic and Work Environment:**

Employment Income

#### **Physical Environment: Social Environment:**

Social Capital Civic Engagement Discrimination Crime & Violence

#### **Service Environment:**

Health Care Education Mental Health Child Care



#### Health **Behaviors**

**Nutrition Physical Activity** Immunizations **Alcohol & Other** Drugs Tobacco Use **Sexual Behavior** 



#### Disease & **Injury**

Communicable Disease **Chronic Disease** Injury



Causes of Death



Community Capacity Building Community Planning & Engagement Strategic Partnerships Civic Engagement Advocacy and Policy



**Emerging Public Health Practice** 

Current Public Health Practice

### **Areas of Concern**

The areas of concern table is a comprehensive list of indicators and critical aspects of overall health that can be improved through community action.

The table is divided by the six cross-cutting themes that make up our framework. As a whole, they recognize that optimal health is more than the absence of illness. Health is a state of complete well-being highly influenced by the social and physical conditions in which we live.

These areas are a guide for prioritizing efforts in our community. We recommend looking at them not in isolation but rather in relationship to each other to inform practice and funding.

#### SOCIAL FACTORS

These population groups are at greater disadvantage in Mesa County:

Children younger than 18 years of age (based on poverty)

Hispanics or Latinos (based on poverty, high school drop out, educational attainment)

Single females with children younger than 18 years of age (based on poverty)

Adults without a bachelor's degree (based on unemployment)

Clifton residents (based on poverty, SNAP & public assistance utilization, educational attainment and median household income)

#### INSTITUTIONAL FACTORS

Mesa County agencies lack the capacity to serve these needs:

Licensed child care facilities have the capacity to serve 14% of children 0 to 5 years of age

15% of the eligible population is enrolled in the Colorado Child Care Assistance program (CCCAP)

18% of residents are unable to get an appointment with a doctor as soon as one is needed

Western Colorado has 6 psychiatric beds per 100,000 residents

On average, there are 8-12 people on the wait list for inpatient psychiatric care

Mesa County spends less per child on education than Colorado and the U.S.

The local sales tax rate for Grand Junction, Fruita, and Palisade is lower than the average local sales tax rate for Colorado

Mesa County has 5.8 patrol deputies per 10,000 population

Clifton has the lowest percentage of adults who've earned at least a high school degree

Families with children need more than two times the federal poverty level to make ends meet

#### LIVING CONDITIONS

#### PHYSICAL ENVIRONMENT

There are five times as many fast food outlets as healthy food outlets

44% of Mesa County's population lives within 1/4 mile of public transportation

Less than a quarter of roads in Grand Junction have striped bike lanes

#### **ECONOMIC & WORK ENVIRONMENT**

18% of children are living in poverty

55% of households pay 30% or more of their income on rent

20% of homeless persons are younger than 18 years of age

10% of homeless persons are veterans

Mesa County's median household income is \$12,000 lower than Colorado

69% of children living in poverty are in a household led by a single female

Approximately half of households with children younger than 18 years of age are recieving SNAP benefits

Rental vacancies have been declining in Grand Junction since 2013

#### SOCIAL ENVIRONMENT

17 per 1,000 children (younger than 18 years) experience abuse/neglect

Arrests among juveniles (2,362 per 100,000) and adults (5,802 per 100,000) are significantly higher than Colorado.

Younger age groups were underrepresented in the 2016 general election

#### SERVICE ENVIRONMENT

11% of children and 18% of adults are eligible but not enrolled in health insurance

17% of adults (25+ years) have a bachelor's degree

Hispanic or Latino students are more likely to drop out of high school

34% of children (3 to 4 years) are enrolled in preschool

Use of mental health crisis services doubled in the past two years

#### **HEALTH BEHAVIORS**

14% of high school students report having five or more alcoholic drinks within a couple hours within the past 30 days

16% of high school students report having taken prescription drugs without a doctor's prescription one or more times in their lifetime

13% of high school students report trying marijuana for the first time before age 13

21% of adults (18+ years) currently use cigarettes

Teen pregnancy in Mesa County is consistently higher than in Colorado (22.3 per 1,000 females ages 15 to 19)

54% of children (5 to 14 years) do not get the recommended amount of physical activity per week

40% of adults (18+ years) report receiving a flu shot in the past 12 months

#### DISEASE & INJURY

Suicide hospitalization rate is significantly higher than Colorado (115.7 per 100,000)

The highest rate of suicide attempts occurred in young people ages 10 to 19 years (533 per 100,000)

19% of motor vehicles accidents that resulted in injury or death had alcohol or other sustances as a contributing factor

Incidence of lung & bronchus cancer is significantly higher than Colorado (53 per 100,000)

22% of children (5 to 14 years) are overweight or obese

60% of adults (18+ years) are overweight or obese

#### MORTALITY

Suicide rate (34.7 per 100,000) is more than double the rate of the nation (13.4 per 100,000)

Heart disease is the leading cause of death in Mesa County

# HEALTHY MESA COUNTY STRATEGIES FOR IMPROVEMENT



"There is a broad agreement that the problems we face are so complex that no person, nonprofit, corporation, or government agency has the power to solve them alone. Unfortunately, and all too often, when we as a society come together to address these problems, our different perspectives, programs, systems, and approaches often leave us polarized and divided, adding up to less than the sum of our parts."

The Civic Canopy



# Community Transformation

#### **BACKGROUND**

In early 2017, Mesa County Public Health (MCPH) convened a group of more than 60 individuals from a broad cross-section of community sectors. Nonprofit, health care, law enforcement, education, business, government, and religious organizations were among those represented. The Community Transformation Group (CTG) determined that in order to meaningfully impact outcomes in three key areas - education, health and the economy - the focus must first be on strengthening social connectedness in our community.

#### VISION

Colorado's Grand Valley is a vibrant, caring and connected community where each of us has the relationships and opportunities we need to thrive.

#### **METHODS**

More than 1,500 Mesa County residents completed a social capital survey, administered by MCPH during the summer of 2017. This survey was based on research around assessing social capital and addressed four areas: personal relationships, social network support, civic engagement, and trust and cooperative norms. Surveys were completed online, and MCPH staff also used tablet computers to engage many participants in person at community locations including the Mesa County Community Services Building and local grocery stores.

#### **PRIORITY 1**

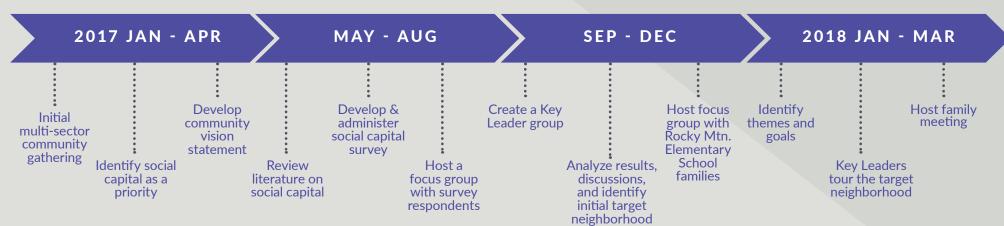
BUILD A SENSE OF COMMUNITY IN THE NEIGHBORHOOD

#### **PRIORITY 2**

WITH LOCAL
ORGANIZATIONS
TOWARD SOLUTIONS

#### **PRIORITY 3**

INCREASE PARTICIPATION IN NEIGHBORHOOD ACTIVITIES





#### **BACKGROUND**

Mesa County has approximately 158 child care facilities that can serve around 4,200 children.

With roughly 9,400 children between 0 and 5 years and an additional 12,500 children ages 6 to 13, our current capacity to provide care is only about 21%.

Maintaining current facilities at capacity is a challenge due to the lack of qualified staff; it is difficult to recruit employees into the child care profession due to low-paying wages, costly educational requirements, and the lack of local opportunities for training.

From the parent's perspective, specific barriers to utilizing high-quality child care include cost of care, proximity to home or work, lack of flexible hours, and trust.

#### VISION

Create a culture in which high-quality child care is a foundation to education and employment pathways. Increasing Mesa County's capacity to provide high-quality child care will have a positive impact on school readiness while building a child care industry that will attract and retain a skilled labor force.

#### **GOAL**

Increase the number of sustainable licensed child care slots from 4,200 to 8,000 by 2022 (91% increase). In order to do this, we must create a thriving local child care industry by preparing a skilled workforce, improving efficiencies, increasing profit, and engaging the local community.

#### STRATEGY 1

STRENGTHEN
THE CHILD CARE
WORKFORCE
THROUGH THE
DEVELOPMENT OF A
CAREER PIPELINE

#### STRATEGY 2

OPTIMIZE BUSINESS
EFFICIENCIES
THROUGH
CENTRALIZED
ADMINISTRATIVE
SERVICES

#### **STRATEGY 3**

GARNER SUPPORT FROM THE LOCAL BUSINESS COMMUNITY TO ACHIEVE SUSTAINABILITY

"Making quality child care available to all Mesa County families, regardless of their income or work situation, will improve overall school readiness, alleviate the stress that leads to child abuse, domestic violence, and suicide and make our communities more attractive to businesses looking to relocate to Mesa County."

Bernie Buescher - Board Chair, Colorado Children's Campaign

# **Suicide Prevention**

#### BACKGROUND

Mesa County has a suicide death rate of 34.7 per 100,000. This is more than double the rate of the United States (13.4 per 100,000) and significantly higher than the rate of Colorado (20.3 per 100,000). Mesa County's suicide death rate saw an increase between 2013 and 2016.

The Suicide Prevention Advisory Group adopted a community-wide plan in the Spring of 2017 to ensure resources and strategies are coordinated for the benefit of all community members and to ensure long-term sustainability of these efforts.

Partner agencies include: Mind Springs Health, Colorado Mesa University, St. Mary's Medical Center, Community Hospital, School District 51, Western Slope National Alliance on Mental Illness, and Mesa County Public Health.

#### VISION

Create an environment in which community members can openly discuss and obtain resources to reduce risk factors of, attempts of, and deaths by suicide.

#### GOAL

Utilize a data-driven and community-informed approach to decrease attempts and deaths by suicide, increase access to resources, reduce stigma associated with suicide and mental health, and increase community capacity for suicide prevention education.

#### STRATEGY 1

COLLECT & ANALYZE
DATA TO TRACK
TRENDS AND MAKE
DATA-INFORMED
DECISIONS

#### STRATEGY 2

ENHANCE AWARENESS
TO DESTIGMITIZE
BEHAVIORAL
HEALTH & SUICIDE
PREVENTION

#### STRATEGY 3

PROMOTE AND SUPPORT SUICIDE PREVENTION EDUCATION & RESILIENCY TRAINING

#### STRATEGY 4

PROVIDE
PROFESSIONAL
LEVEL TRAINING FOR
SUICIDE PREVENTION
AND POST VENTION

#### STRATEGY 5

ENHANCE AWARENESS
OF SAFE MESSAGING
WITH LOCAL MEDIA
WHEN REPORTING ON
SUICIDE ATTEMPTS
AND DEATHS

#### STRATEGY 6

OF BEHAVIORAL
HEALTH IN PRIMARY
CARE AND INCREASE
THE NUMBER OF
PSYCHIATRIC BEDS

#### **BACKGROUND**

In January of 2017, Mesa County Public Health (MCPH), in partnership with the City of Fruita, began implementing the Communities That Care (CTC) process in Fruita.

The CTC system is a way for community members to work together to prevent youth problem behaviors and adverse health outcomes. These outcomes include substance use, delinquency, teen pregnancy, school drop out, violence, and poor mental health.

#### VISION

A caring community that recognizes the value and potential of youth by creating positive opportunities that promote healthy lifestyles.

#### GOAL

Identify which risk factors, protective factors, and problem behaviors are of most concern in a community, and then implement evidence-based programs and strategies that address the community's unique needs.

#### **PRIORITY 1**

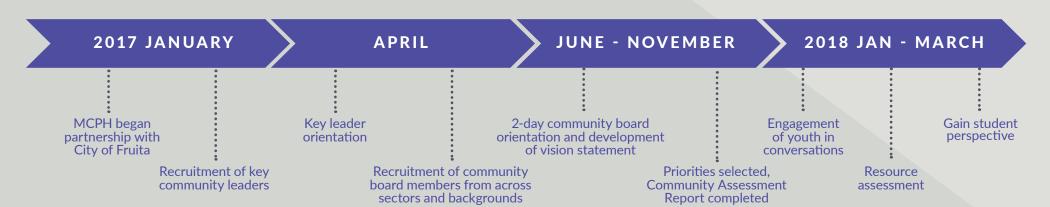
AVAILABILITY OF SUBSTANCES & LAWS AND NORMS FAVORABLE TOWARD SUBSTANCE USE

#### **PRIORITY 2**

LOW COMMITMENT TO SCHOOL

#### **PRIORITY 3**

COMMUNITY
OPPORTUNITIES
FOR PROSOCIAL
INVOLVEMENT



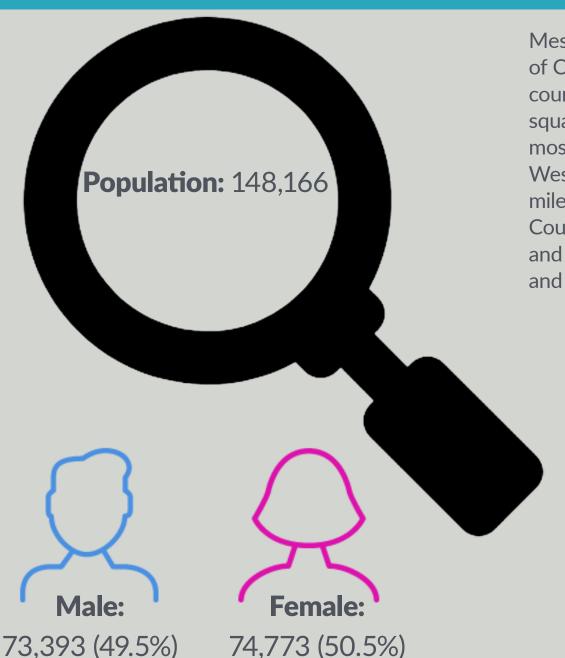
# **SOCIAL FACTORS**



# MESA COUNTY

GRAND JUNCTION FRUITA PALISADE CLIFTON

# **Mesa County Snapshot**



Mesa County is located on the western border of Colorado, 250 miles west of Denver. The county, one of 64 in Colorado, spans 3,313 square miles. The Grand Valley, which is the most densely populated area on Colorado's Western Slope, covers more than 38 square miles and has an elevation of 4,586 feet. Mesa County includes the cities of Grand Junction and Fruita, the towns of Collbran, De Beque, and Palisade, and smaller unincorporated areas.

Mesa County median age:

**38.8 years** 

Colorado median age:

**36.4 years** 

United States median age:

**37.7** years

# Mesa County Snapshot

Figure 1: Median Household Income by Zip Code (including Percent of	Change
between 2012 and 2016).	

	2012	2013	2014	2015	2016
Colorado	\$58,244	\$58,433	\$59,448	\$60,629	\$62,520
81501	\$35,080	\$36,717	\$34,361	\$34,788	\$35,115
81503	\$45,774	\$44,405	\$44,058	\$42,892	\$44,353
81504	\$55,475	\$52,238	\$51,849	\$51,382	\$51,979
81505	\$62,340	\$63,314	\$57,518	\$55,167	\$54,808
81506	\$61,255	\$60,913	\$56,187	\$54,368	\$48,713
81507	\$68,518	\$70,466	\$69,641	\$70,911	\$71,909
81520	\$41,328	\$36,558	\$34,954	\$35,969	\$33,816
81521	\$59,688	\$53,537	\$54,022	\$55,674	\$55,081
81523	\$50,517	\$51,280	\$66,167	\$69,451	\$85,635
81524	\$76,391	\$75,536	\$73,869	\$69,135	\$68,125
81525	\$72,841	\$68,250	\$49,135	\$40,104	\$41,556
81526	\$55,817	\$58,768	\$61,317	\$62,819	\$63,214
81527	\$51,458	\$56,204	\$56,250	\$61,304	\$62,088
81624	\$54,853	\$49,554	\$49,688	\$50,515	\$55,469
81630	\$62,708	\$52,955	\$46,250	\$46,250	\$52,500
81643	\$51,477	\$43,000	\$56,667	\$67,019	\$69,844
Percent Difference from 2012					

-44.9%

Percent Difference from 2012 69.5%

CLIFTON (81520) has the LOWEST

median
household
income (\$33,816)
and **GLADE PARK**(81523) has the

HIGHEST median household

income (\$85,635).

# MESA COUNTY DEMOGRAPHICS

Employed: 57.7%

Unemployed: 8.7%

Uninsured: 12.7%

### **Family Composition**



1 in 4 Mesa County households have one or more children (younger than 18 years of age).

Approximately 1 in 10 Mesa County residents received benefits from SNAP in the past 12 months.

# POVERTY LEVEL, 2016 Indicator Percent

FIGURE 2: PERCENTAGE OF FAMILIES LIVING BELOW

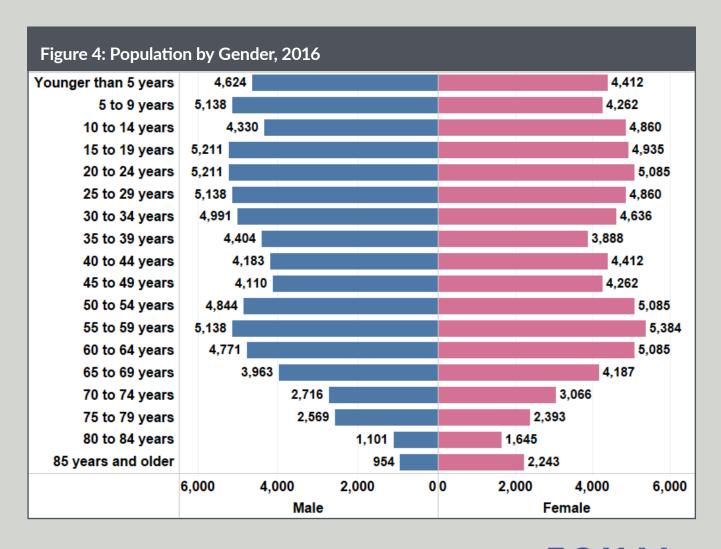
All families	12.0%
Married couples with children (younger than 18 years)	5.8%
Single female households with children (younger than 18 years)	50.0%

59% of Mesa County's population lives in Grand Junction.\*

\*Census County Division

FIGURE 3: POPULATION BY AGE AND CENSUS COUNTY DIVISION, 2016						
Jurisdiction Area	Total Population	18 Years and Older		ears and Older 65 Years and Older		Median Age
	Number	Number	Percent	Number	Percent	Years
Mesa County	148,166	114,977	77.6%	24,842	16.8%	38.8
Clifton	29,021	22,230	76.6%	4,063	14.0%	36.3
Collbran	2,379	1,901	79.9%	485	20.4%	44.6
De Beque	797	589	73.9%	138	17.3%	42.0
Fruita	23,719	17,667	74.5%	3818	16.1%	40.4
Glade Park- Gateway	2,269	1,938	85.4%	522	23.0%	56.6
Grand Junction	87,234	68,566	78.6%	15,440	17.7%	38.1
Whitewater- Kannah Creek	2,752	2,053	74.6%	388	14.1%	43.8
Colorado	5,359,295	4,110,579	76.7%	680,631	12.7%	36.4

As the population becomes older, there are MORE FEMALES than males because they are living longer.



Children and young adults have a relatively **EQUAL** amount of males and females.

On average, women are living

### 5 YEARS

longer than men in Mesa County.

Mesa County life expectancy (overall): **78.8 YEARS** 



Men: **76.4 YEARS** 

Colorado (overall): 80.2 YEARS\*

\*statistically better than Mesa County

Life expectancy is the number of years a person is expected to live at birth; it is the lifespan of an individual.



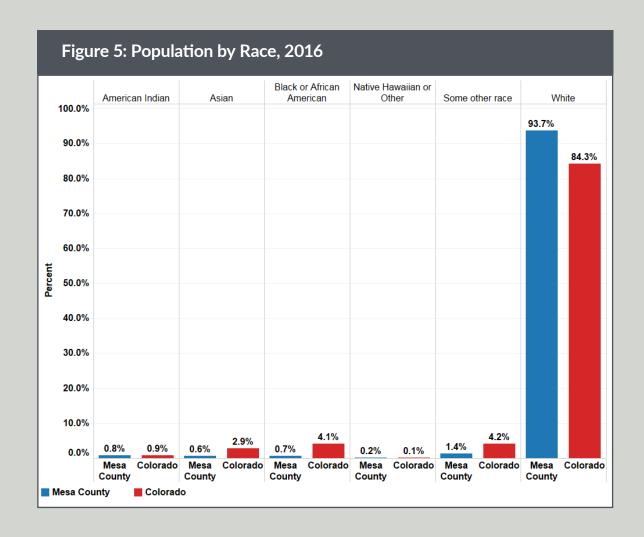
Women: **81.2 YEARS** 

US (overall): 79.1 YEARS

# MAJORITY

of Mesa County residents identify as white.

2.6% of residents identify as two or more races.



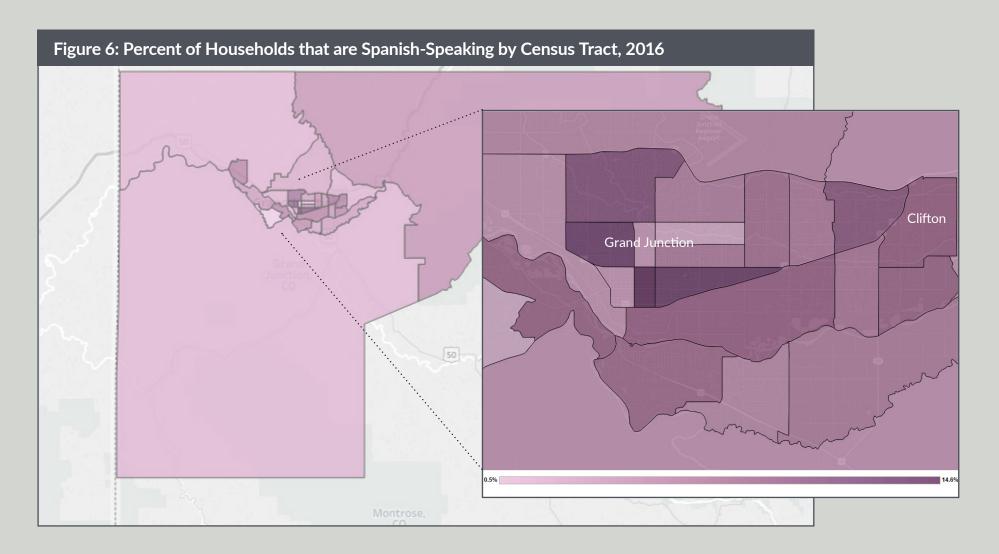
**Percent Hispanic** or Latino

14.0% 21.1% 17.3%

Mesa County

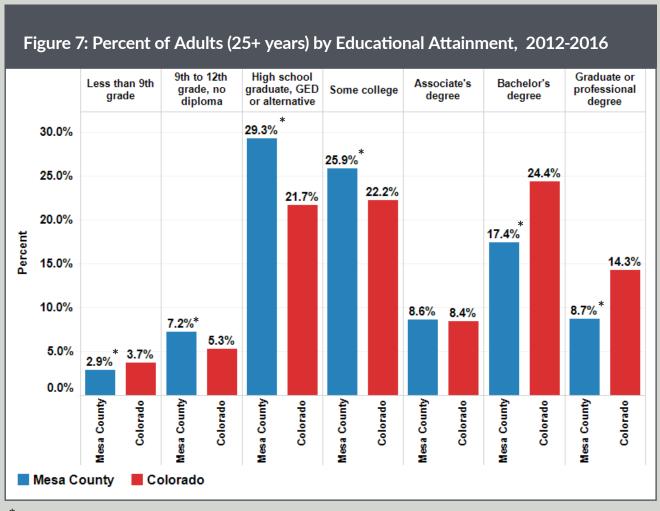
Colorado

**United States** 



The census tract located directly southwest of North Avenue and 12th Street has the **HIGHEST** percentage of households that are Spanish-speaking (**14.6%**).

Mesa County
adults are
LESS
LIKELY to
have earned
a bachelor's
degree or higher
than adults in
Colorado.



<sup>\*</sup>statistically different

### LOWEST

social capital
was observed
in Clifton and
Whitewater while
the HIGHEST
social capital was
observed in two
Grand Junction ZIP
codes, and in Loma.

Social Capital, as defined by the Aspen Institute, is "the formal and informal networks through which people develop meaningful connections to build economic security". Social capital can have a sustainable impact on economic stability, education, environmental conditions and social support.

A social capital survey was administered in Mesa County in 2017. For more information about the methods, see Appendix II.

FIGURE 8: COMBINED SOCIAL CAPITAL BY ZIP CODE			
ZIP Code	Area	Social Capital	
81520	Clifton	Very Limited	
81527	Whitewater	Very Limited	
81504	Fruitvale	Very Limited	
81526	Palisade	Limited	
81501	Grand Junction	Limited	
81503	Orchard Mesa	Positive	
81521	Fruita	Positive	
81507	Redlands	Positive	
81506	Grand Junction	Very Positive	
81505	Grand Junction	Very Positive	
81524	Loma	Very Positive	

### **Grand Junction**

Grand Junction is the largest city in Western Colorado. The city is in a river valley and gets its name from the confluence of the Gunnison and Colorado rivers. Grand Junction residents account for 59% of Mesa County's population.

**Total Population: 87,234** 

Median Age: 38.1 years

Median Household Income \$47,506

\$2,500 less than Mesa County

# GRAND JUNCTION DEMOGRAPHICS

Employed: 56.9%

Unemployed: 8.7%

Uninsured: 12.5%

Rent 30% or more: 57.4%

**Grand Junction has** 

**LIMITED** social capital.

### **Family Composition**









1 in 4 Grand Junction households have one or more children (younger than 18 years of age).

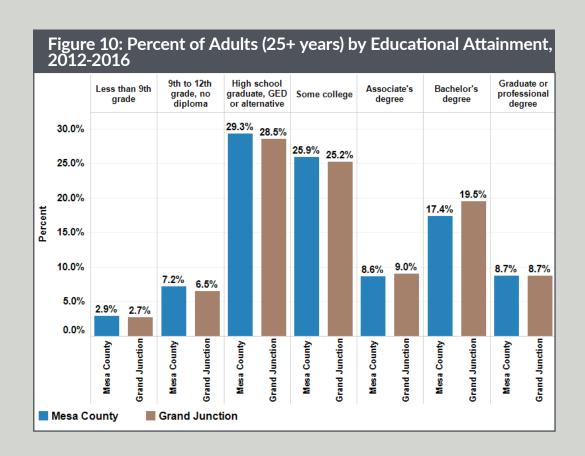
# FIGURE 9: PERCENTAGE OF FAMILIES LIVING BELOW POVERTY LEVEL, 2016

Indicator	Percent
All families	11.6%
Married couples with children (younger than 18 years)	4.8%
Single female households with children (younger than 18 years)	46.3%

Approximately 1 in 10 Grand Junction residents received SNAP benefits in the past 12 months.

# **Grand Junction**

Adults in Grand Junction who've earned a bachelor's degree earn about \$13,500 more per year than those who've earned only a high school degree.



Among adults in Grand Junction, **37%** have earned an associate's degree or higher.

### Fruita

Fruita is the second largest municipality in Mesa County. The city is well known for its outdoor recreation, including mountain biking, hiking, and rafting. Fruita residents account for 16% of Mesa County's population.

### **Total Population: 23,714**

\*Includes city and surrounding area

Median Age: 40.4 years

Median Household Income

\$57,271

\$7,200 more than Mesa County

# FRUITA DEMOGRAPHICS

Employed: 59.2%

Unemployed: 8.6%

Uninsured: 11.2%

Rent 30% or more: 51.9%

Fruita has **POSITIVE** 

social capital.

### **Family Composition**







1 in 3 Fruita households have one or more children (younger than 18 years of age).

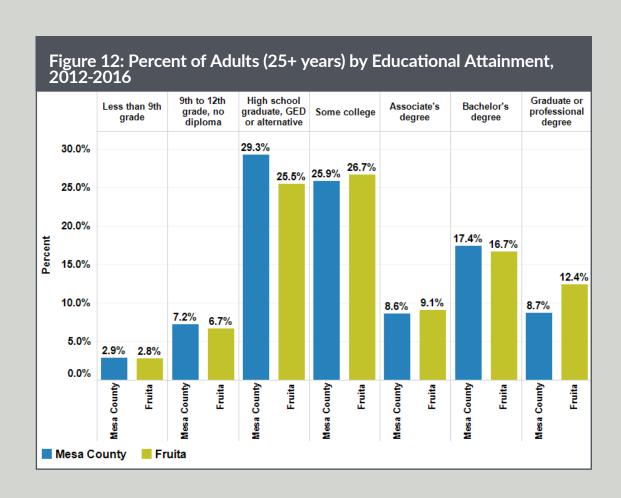
# FIGURE 11: PERCENTAGE OF FAMILIES LIVING BELOW POVERTY LEVEL, 2016

Indicator	Percent
All families	10.9%
Married couples with children (younger than 18 years)	7.6%
Single female households with children (younger than 18 years)	56.0%

Approximately 1 in 10 Fruita residents received SNAP benefits in the past 12 months.

# **Fruita**

Adults in Fruita who've earned a bachelor's degree earn about \$12,200 more per year than those who've earned only a high school degree.



Among adults in Fruita, 38% have earned an associate's degree or higher.

### **Palisade**

Known as the peach and wine capital of Colorado, Palisade sits along the Colorado River, which creates a temperate climate and ideal growing conditions. Palisade residents account for 2% of Mesa County's population.

**Total Population: 2,630** 

Median Age: 40.1 years

Median Household Income \$39,890

\$10,100 less than Mesa County

# PALISADE DEMOGRAPHICS

Employed: 59.6%

Unemployed: 5.1%

Uninsured: 13.6%

Rent 30% or more: 45.0%

Palisade has **LIMITED** social capital

# **Family Composition**







1 in 3 Palisade households have one or more children (younger than 18 years of age).

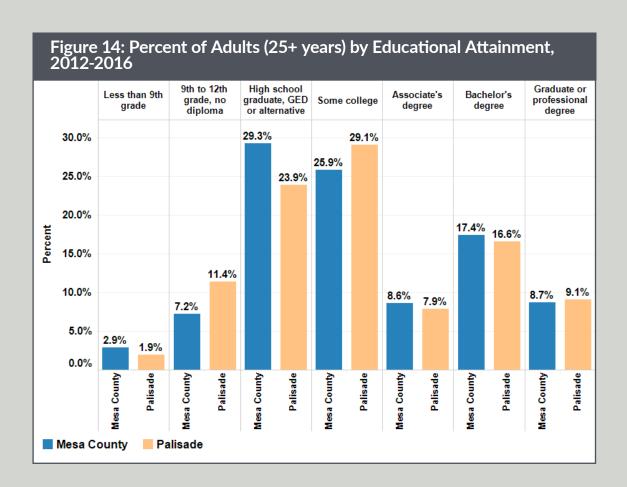
# FIGURE 13: PERCENTAGE OF FAMILIES LIVING BELOW POVERTY LEVEL, 2016

Indicator	Percent
All families	8.3%
Married couples with children (younger than 18 years)	2.7%
Single female households with children (younger than 18 years)	3.4%

Nearly **2** in **10** Palisade residents received SNAP benefits in the past 12 months.

# Palisade

Adults in Palisade who've earned a bachelor's degree earn about \$2,300 more per year than those who've earned only a high school degree.



Among adults in Palisade, 34% have earned an associate's degree or higher.

# Clifton

Considered a suburb of Grand Junction, Clifton is a small, unincorporated community. Clifton residents account for 14% of the County's population.

**Total Population: 20,021** 

Median Age: 32.9 years

Median Household Income \$37,223

\$12,800 less than Mesa County

# **CLIFTON DEMOGRAPHICS**

Employed: 60%

Unemployed: 12.0%

Uninsured: 18.2%

Rent 30% or more: 53.5%

Clifton has **VERY LIMITED** 

social capital

### **Family Composition**







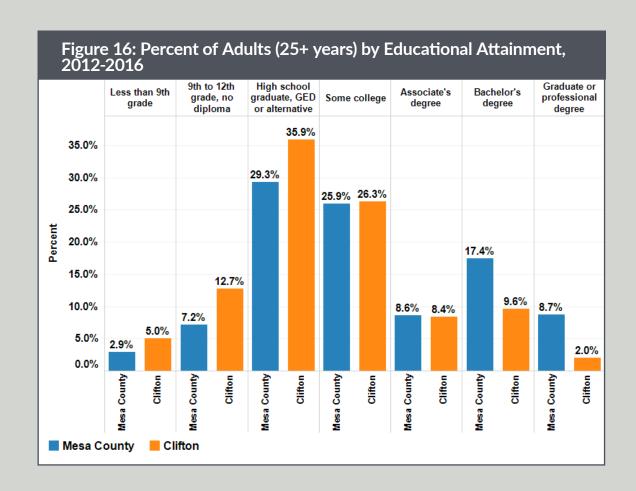
1 in 3 Clifton households have one or more children (younger than 18 years of age).

# FIGURE 15: PERCENTAGE OF FAMILIES LIVING BELOW POVERTY LEVEL, 2016

Indicator	Percent
All families	22.3%
Married couples with children (younger than 18 years)	5.0%
Single female households with children (younger than 18 years)	63.8%

Approximately 2 in 10 Clifton residents received SNAP benefits in the past 12 months.

Adults in Clifton who've earned a bachelor's degree earn about \$16,800 more per year than those who've earned only a high school degree.

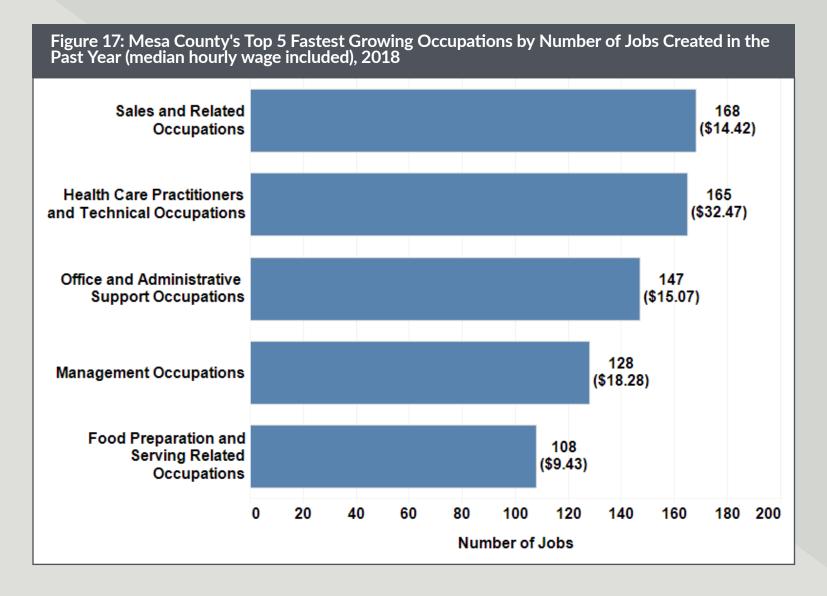


Among adults in Clifton, **20%** have earned an associate's degree or higher.

# INSTITUTIONAL FACTORS



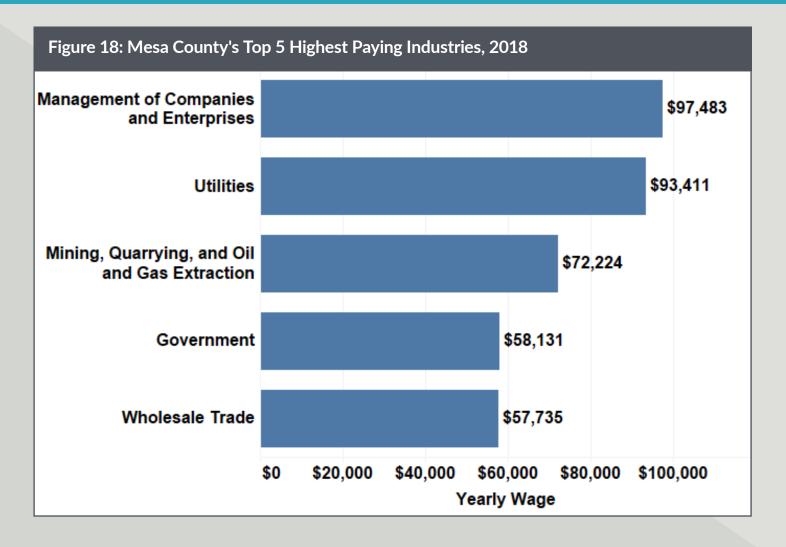
# **Corporations and Businesses**



# and HEALTH CARE

were the fastest growing occupations during the past year.

# **Corporations and Businesses**

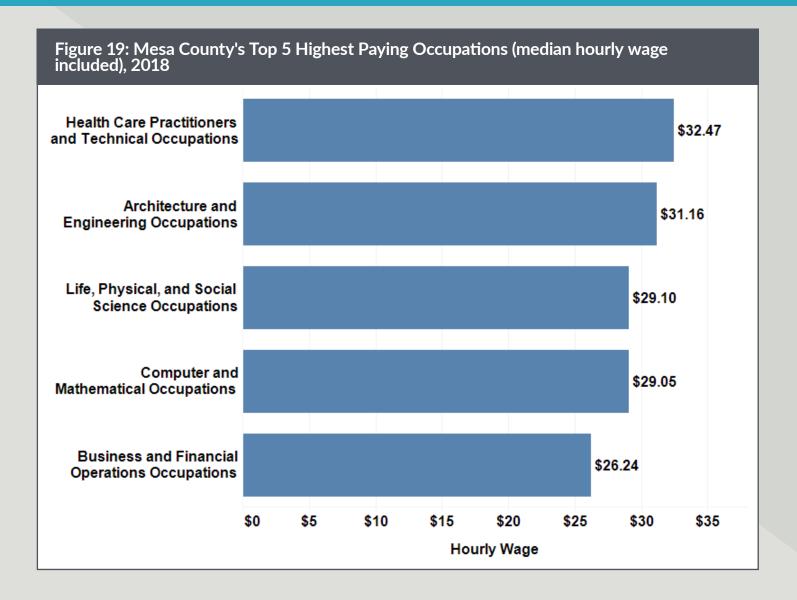


The average annual wages of the two highest industries are MORE THAN

Mesa County average earnings for all workers (\$42,800).

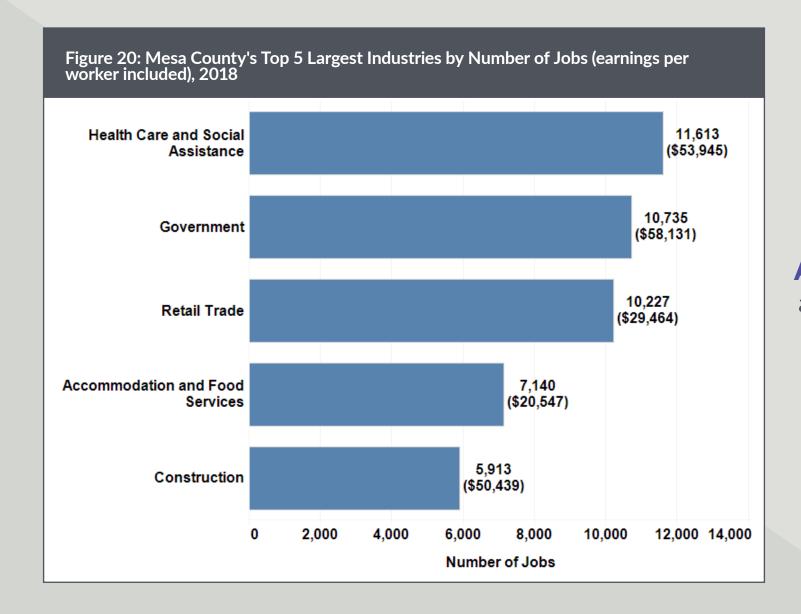
**DOUBLE** 

## **Corporations and Businesses**



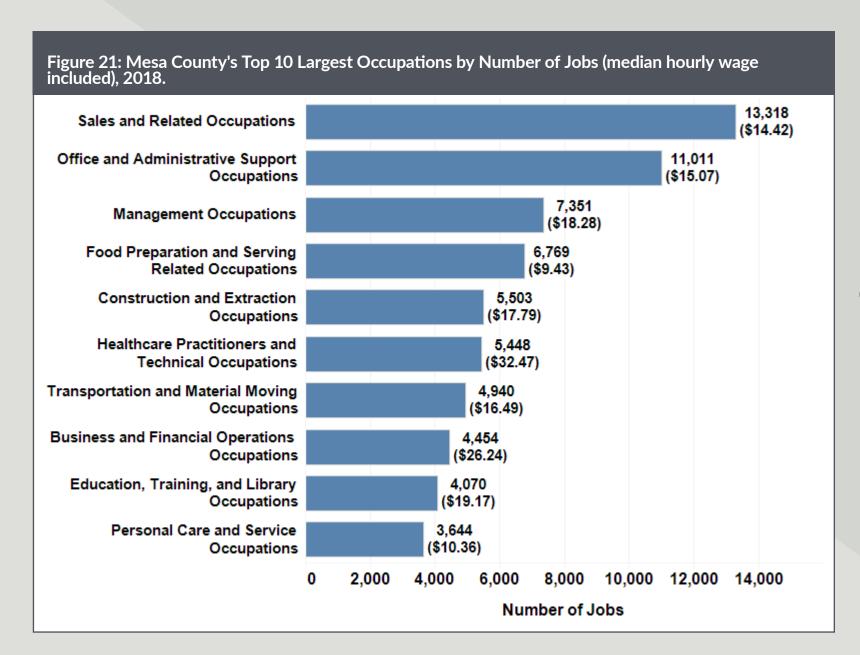
The highest paying occupations are in **HEALTH CARE**.

## **Corporations and Businesses**



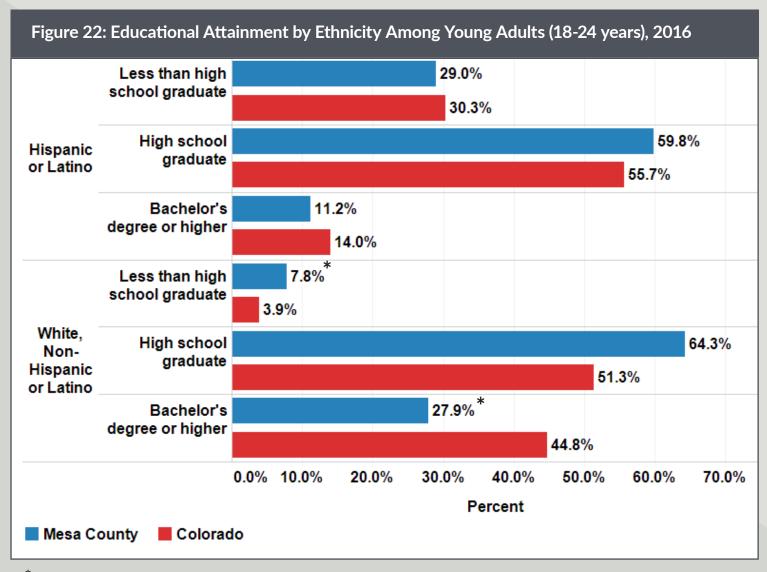
HEALTH
CARE AND
SOCIAL
ASSISTANCE
account for 13%
of jobs in Mesa
County.

## **Corporations and Businesses**



56%of jobsin MesaCounty payless than\$17.51per hour.

#### **Schools & Universities**



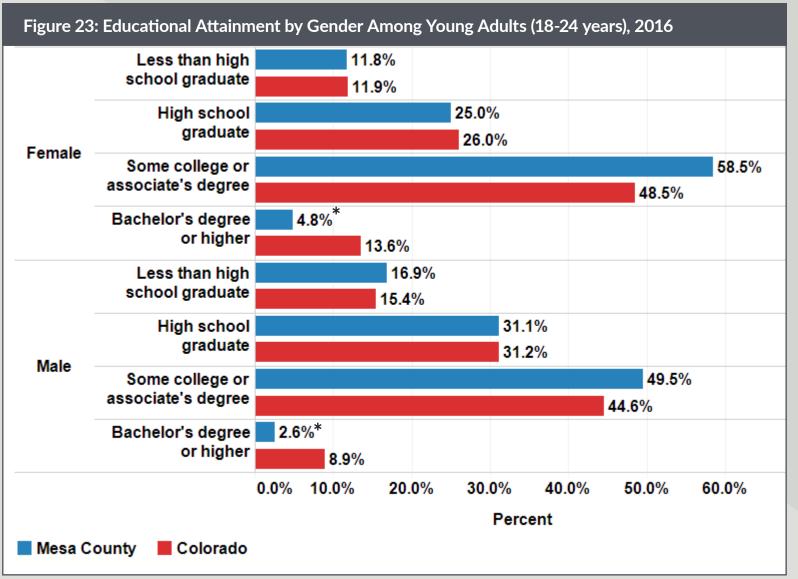
Adults who are white and non-Hispanic or Latino are

#### **TWICE**

as likely to
have earned
a bachelor's
degree or higher
compared to
adults who are
Hispanic or
Latino.

<sup>\*</sup>statistically different

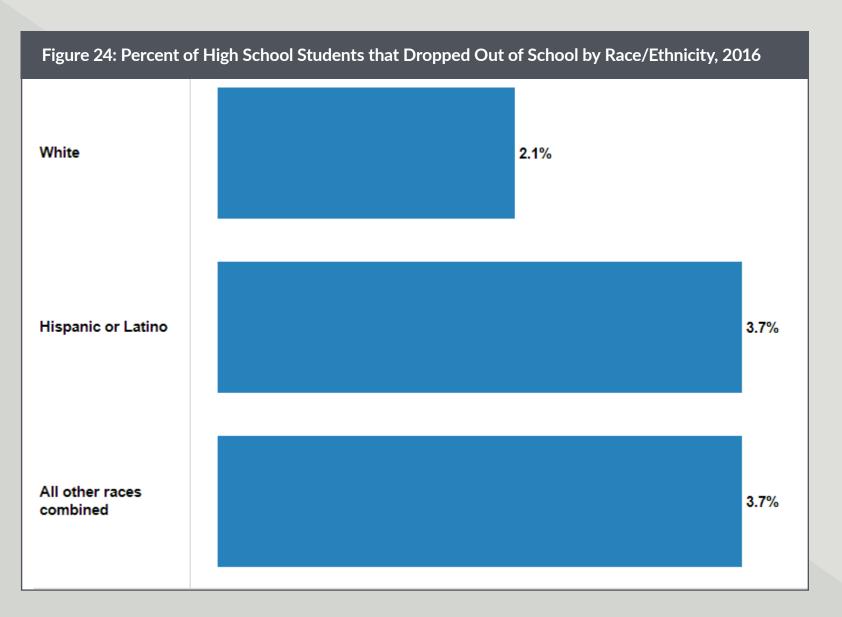
### **Schools & Universities**



Among
young adults,
88.3% of
women and
83.2%
of men have
completed
their high
school degree
or higher.

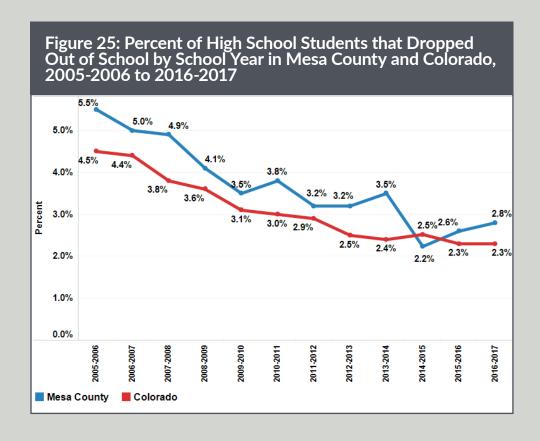
<sup>\*</sup>statistically different

#### **Schools & Universities**



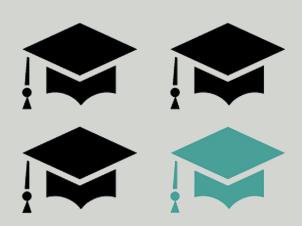
Students who are Hispanic or Latino or of any minority racial background are MORE LIKELY to drop out of high school than students who are white.

#### Education



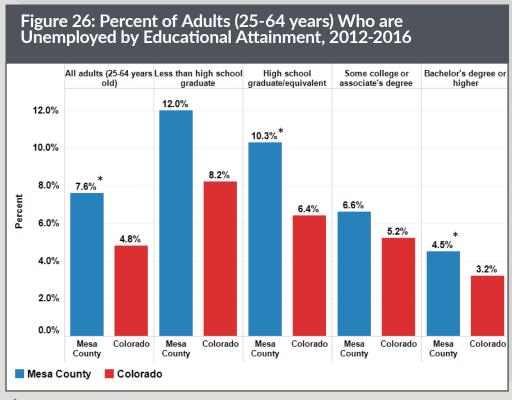
The percent of high school students dropping out of school has decreased by **NEARLY 50%** since 2005-2006 school year.

Mesa County is served by three school districts: Mesa County Valley School District 51, Plateau Valley School District 50, and De Beque School District 49-JT. In the 2016-2017 school year, there were 22,732 Mesa County students in the three districts. As the county's largest district, School District 51 educates approximately 97% of students living in Mesa County.



3 in 4 high school students graduated within 4 years.

#### Education



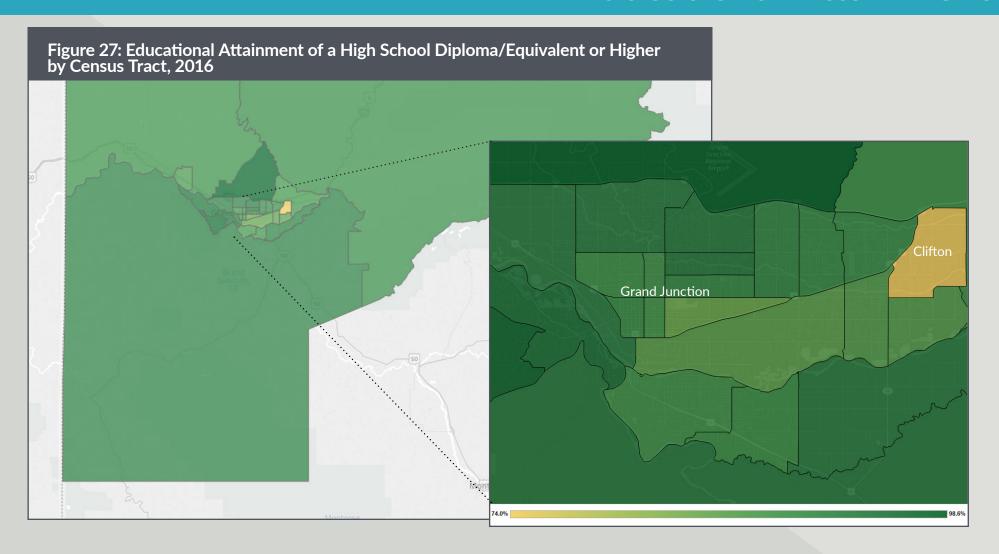
<sup>\*</sup>statistically different

**HIGHEST** unemployment is observed among adults who've earned **LESS THAN** a high school degree.

Higher education may be the best socioeconomic status predictor of good health. Education is a staple of a healthy, thriving community. It has been linked to increased income, less crime, less reliance on public services, reduced illness, and increased longevity.

Mesa County is home to Colorado Mesa University, which has a student population of approximately 11,000 and offers a variety of associate, bachelor and master degree programs.

## **Educational Attainment**



Clifton has the **LOWEST** percentage of adults who've earned at least a high school degree.

#### **Tax Rate**

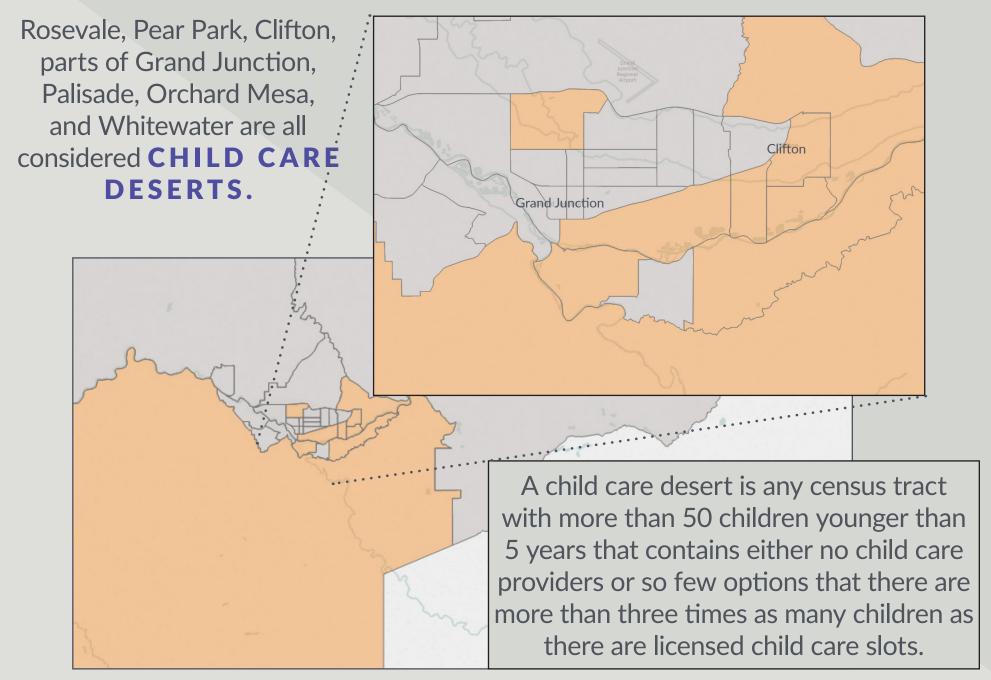
Colorado
has the
LOWEST,
non-zero state
sales tax rate
in the country
(2.9%).

A sales tax is a tax levied on the sales of goods and services. State and local governments acquire revenue through tax collection fees and licenses.

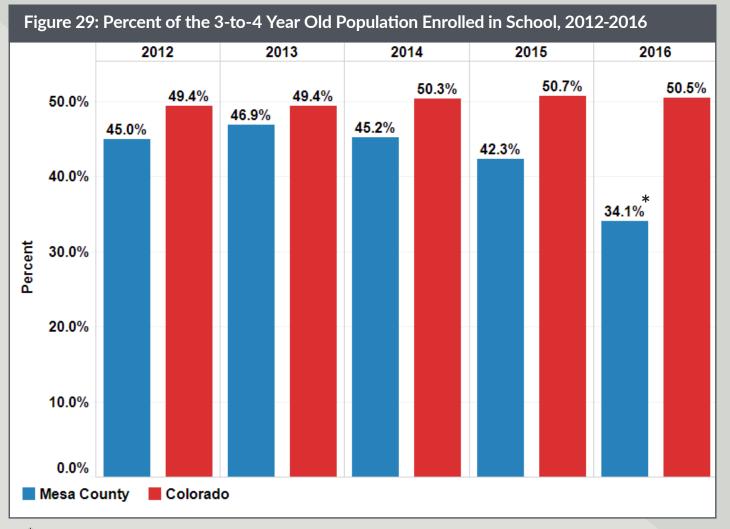
FIGURE 28: SALES TAX						
Indicator	Local Sales Tax Rate	Combined Sales Tax Rate				
Grand Junction	2.75%	8.02%				
Fruita	3.00%	8.27%				
Palisade	2.00%	7.27%				
Colorado (state average)	4.62%	7.52%				

Colorado has the third **HIGHEST** average local sales tax rate (4.62%).

# Child Care Desert Map



#### **Preschool Enrollment**



In Mesa County,

34% of the

3-to-4 year
old population
is enrolled in
school, which is
significantly lower
than the 51% in
Colorado.

<sup>\*</sup>statistically different

#### **Service Provider Ratios**

FIGURE 30: RATIO OF POPULATION TO SERVICE PROVIDERS						
Primary Care Physicians (MDs and DOs)	Mesa County	940:1				
	Colorado	1,240:1				
Dentists	Mesa County	1,390:1				
	Colorado	1,280:1				
Mental health providers	Mesa County	360:1				
	Colorado	330:1				

Mesa County's ratio of population to primary care physicians is among the **BEST** in Colorado.

Mesa County's ratio of population to dentists and mental health providers ranks in the MIDDLE among Colorado counties.

#### Law Enforcement per Capita

Mesa County: **5.8** patrol deputies per 10,000 population.

This is based on the number of patrol deputies and includes patrol, investigations, and school resource officers.

Grand Junction: **18.3** police officers per 10,000 population.

This includes officers who ordinarily carry a firearm and a badge, have full arrest powers, and are paid from governmental funds set aside specifically to pay sworn law enforcement.

Grand Junction law enforcement per capita is

**BETTER** than jurisdictions of similar size.



## **Spending on Education Child Care**

FIGURE 31: SPENDING PER CHIL (K-12)					
Mesa County	\$8,705				
Colorado	\$9,120				
United States	\$11,841				

Although cost of living in Mesa County is lower than in other parts of the state, the Colorado Child Care Assistance Program (CCCAP) subsidy reimbursement and tuition rates are also low. This results in providers that cannot meeting basic costs of care, even at lower quality levels.

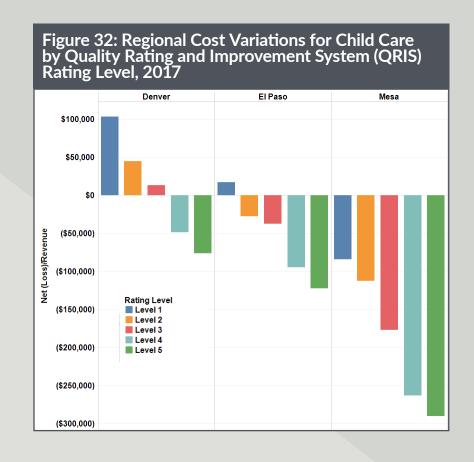
Mesa County spends **LESS** per child on education than Colorado and the U.S.

\$8 - \$12 MORE than school-aged care (\$26-\$32).

Child care costs vary more by

**QUALITY RATING LEVEL** 

for school-aged care than infant care.



# **Self-Sufficiency Standard**

The self-sufficiency standard defines the income realistically needed to support a family, without public or private assistance.

FIGURE 33: SELF-SUFFICIENCY STANDARD FOR MESA COUNTY, 2015								
Monthly Costs	Adult	Adult + Preschooler	Adult + Infant Preschool	Adult + Preschooler School-age	Adult + School-age Teenager	Adult + Infant + Preschooler + School-age	2 Adults + Infant + Preschooler	2 Adults + Preschooler School-age
Housing	\$585	\$779	\$779	\$779	\$779	\$1,148	\$779	\$779
Child Care	\$0	\$626	\$1,312	\$1,065	\$439	\$1,751	\$1,312	\$1,065
Food	\$262	\$397	\$521	\$599	\$692	\$705	\$747	\$821
Transportation	\$251	\$259	\$259	\$259	\$259	\$259	\$492	\$492
Health Care	\$146	\$413	\$423	\$434	\$464	\$444	\$474	\$484
Miscellaneous	\$124	\$247	\$329	\$314	\$263	\$431	\$380	\$364
Taxes	\$241	\$510	\$722	\$656	\$388	\$1,041	\$743	\$675
Earned Income Tax Credit (-)	\$0	-\$23	\$0	\$0	-\$158	\$0	\$0	\$0
Child Care Tax Credit	\$0	-\$60	-\$100	-\$100	-\$63	-\$100	-\$100	-\$100
Child Tax Credit	\$0	-\$83	-\$167	-\$167	-\$167	-\$250	-\$167	-\$167
Comparisons								
Annual Self-Sufficiency Wage	\$19,295	\$36,778	\$48,950	\$46,050	\$34,757	\$65,146	\$55,931	\$52,964
2018 Federal Poverty Level (FPL) for Household Size	\$12,140	\$16,460	\$16,460	\$16,460	\$16,460	\$25,100	\$25,100	\$20,780
Self-Sufficiency Wage/FPL	1.6	2.2	3.0	2.8	2.1	2.6	2.2	2.5

Families with children need more than **TWO TIMES** the federal poverty level to make ends meet.

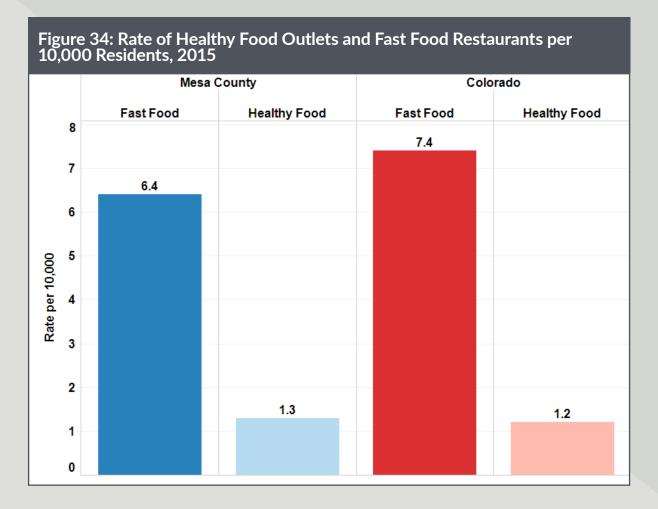
# LIVING CONDITIONS

PHYSICAL ENVIRONMENT ECONOMIC & WORK ENVIRONMENT SOCIAL ENVIRONMENT SERVICE ENVIRONMENT





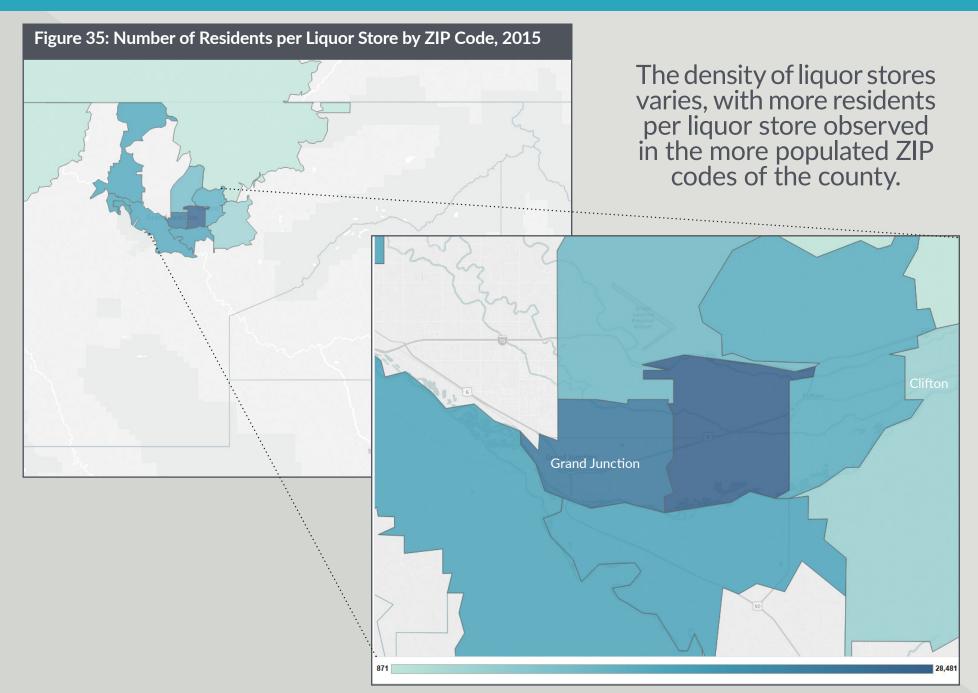
## **Access to Healthy Foods**



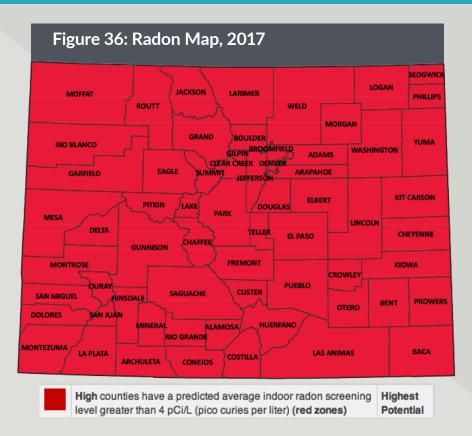


Having healthy foods available and affordable in food retail and food service settings allows people to make **HEALTHY FOOD CHOICES**.

### **Access to Alcohol**



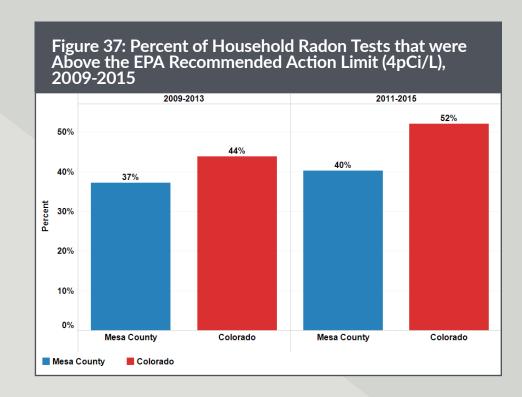
#### Radon



4 in 10 radon tests conducted in Mesa County were above the recommended level.

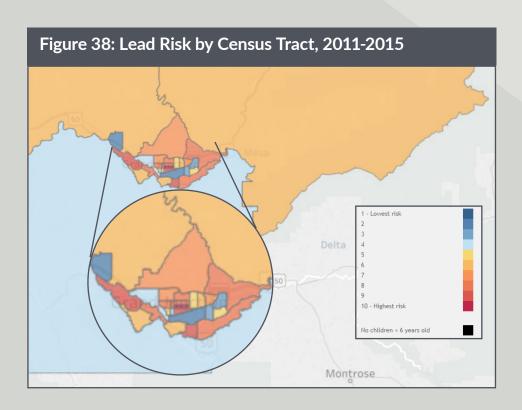
Radon, the second leading cause of lung cancer, is a radioactive gas that exists naturally in the environment. Some people are at greater risk of exposure at home, where it can get in through cracks in the floors and walls.

Testing is easy and inexpensive with radon test kits. St. Mary's Medical Center offers free radon testing kits to Mesa County residents.



## **Lead Exposure**

Lead exposure risk is based on the population of children younger than 6 YEARS and the two most common risk factors for lead poisoning, HOUSING AGE and POVERTY.

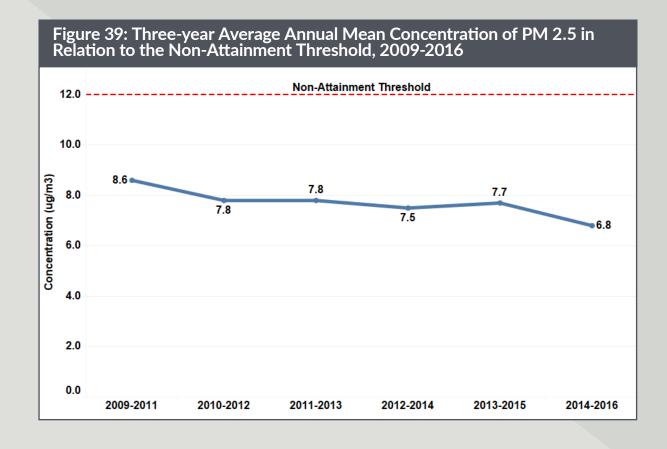


Lead exposure can cause severe illness as well as affect IQ, ability to pay attention, and academic achievement. The effects of lead exposure cannot be corrected. Children living at or below the poverty line and those living in housing built before 1978 are at the greatest risk for lead exposure. Lead-based paints were banned for use in housing in 1978. Houses built before the ban are likely to contain some lead.



The MOST
hazardous sources of
lead in the U.S. are
lead-based paints and
lead contaminated
dust.

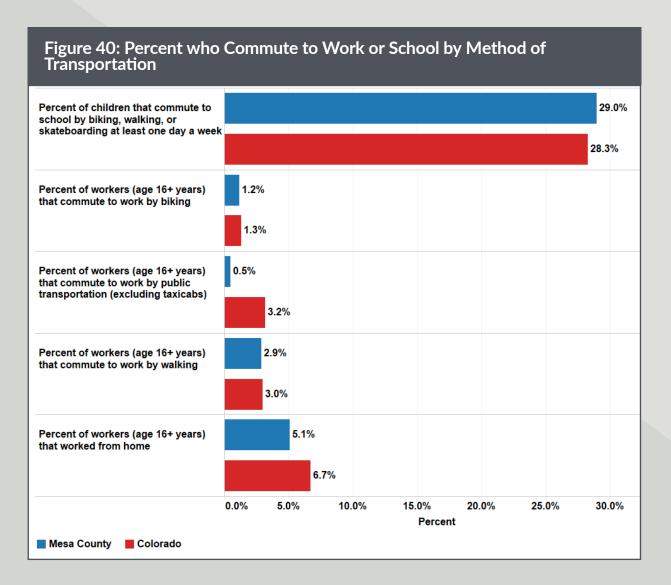
# **Air Quality**



Non-attainment occurs when the air quality is worse than the National Ambient Air Quality Standards. It is measured based on the concentration of fine particulate matter (PM) 2.5 in the air. PM 2.5 are fine particulate matter in the air that are 2.5 micrometers or smaller. Particle pollution is associated with worsening asthma symptoms, eye irritation, lung and throat irritation, lung cancer, and low birth weight for babies. Older adults, babies and children, and people with lung or heart disease are at higher risk.

Mesa County has remained **BELOW** the non-attainment threshold for the past **7** years.

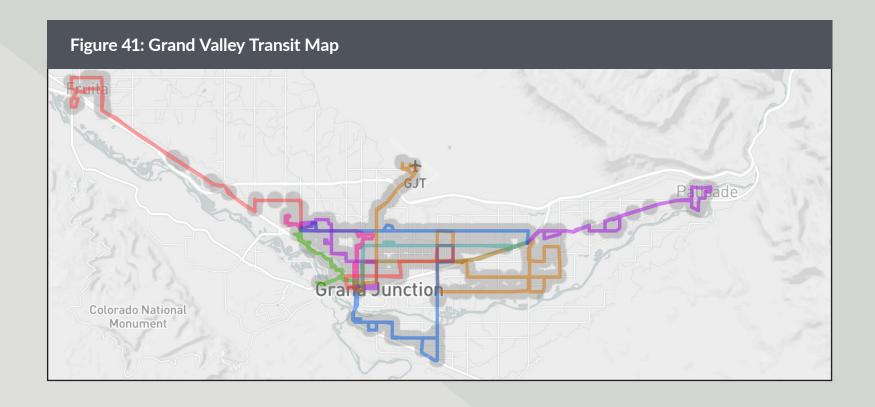
## **Transportation**



Of the **426**miles of road in
Grand Junction,
there are **104**miles of striped
bike lanes and **27** miles of
signed on-street
bike routes.

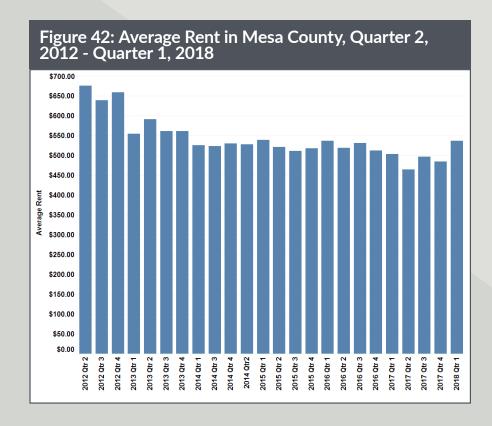
Opportunities exist to improve and promote alternative methods of commuting.

# **Active Transportation**



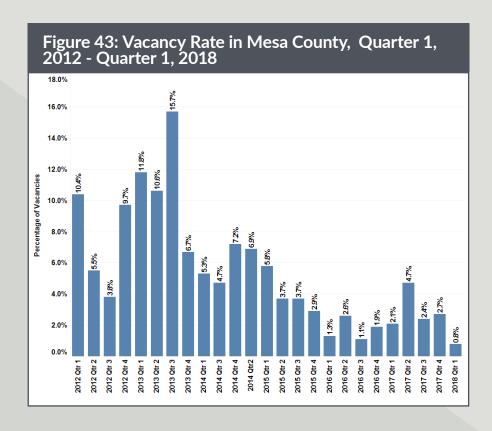
Approximately 44% of Mesa County's population lives within ¼ mile of public transportation. Of this population: 21.5% live in poverty, 14.9% are seniors (65+ years), 21.6% are youth (younger than 18 years), 15.7% have disabilities, and 7.8% have no vehicles.

# **Availability of Housing**





Rental vacancies have generally been declining in Grand Junction since 2013. The average rent in Grand Junction in early 2018 was \$536.79 (third lowest out of 33 areas). The average rent per square foot is the lowest in Grand Junction at 82 cents per square foot (compared to 17 other market areas/sub-areas).



# **ECONOMIC & WORK ENVIRONMENT**

#### WHAT IS IT?

Characteristics of economic health.

#### WHAT AFFECTS IT?

Employment, poverty, food security, and industry diversity.

# **Employment**

Number of jobs: 86,600

Average earnings: \$42,800

Employment status is closely linked with health and wellness. Employment provides the income, benefits, and stability necessary for a healthy life. Unemployment is associated with increased stress and blood pressure, the use of unhealthy coping behaviors such as drug or alcohol use, increased depression, and loss of health insurance.

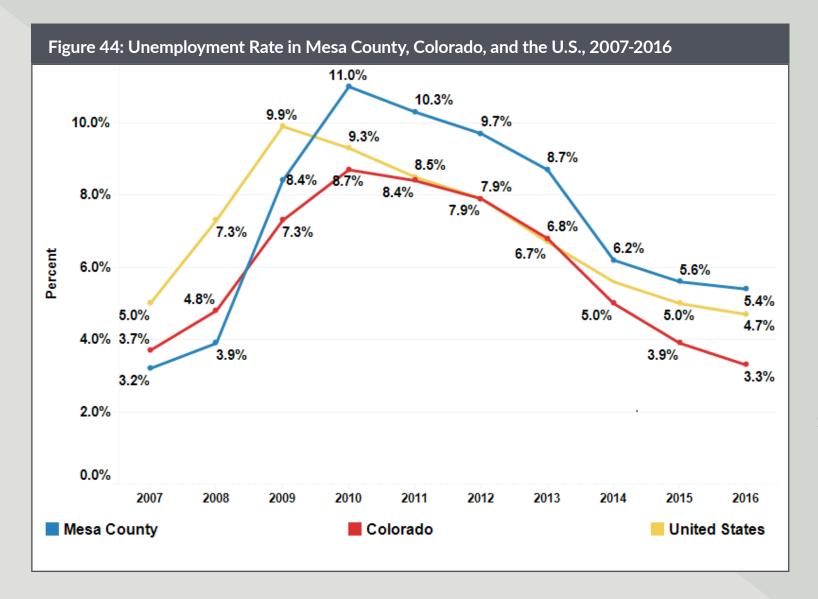
#### Three largest industries for employment in Mesa County

1. Health care and social services: 11,613 jobs

2. Government: 10,735 jobs

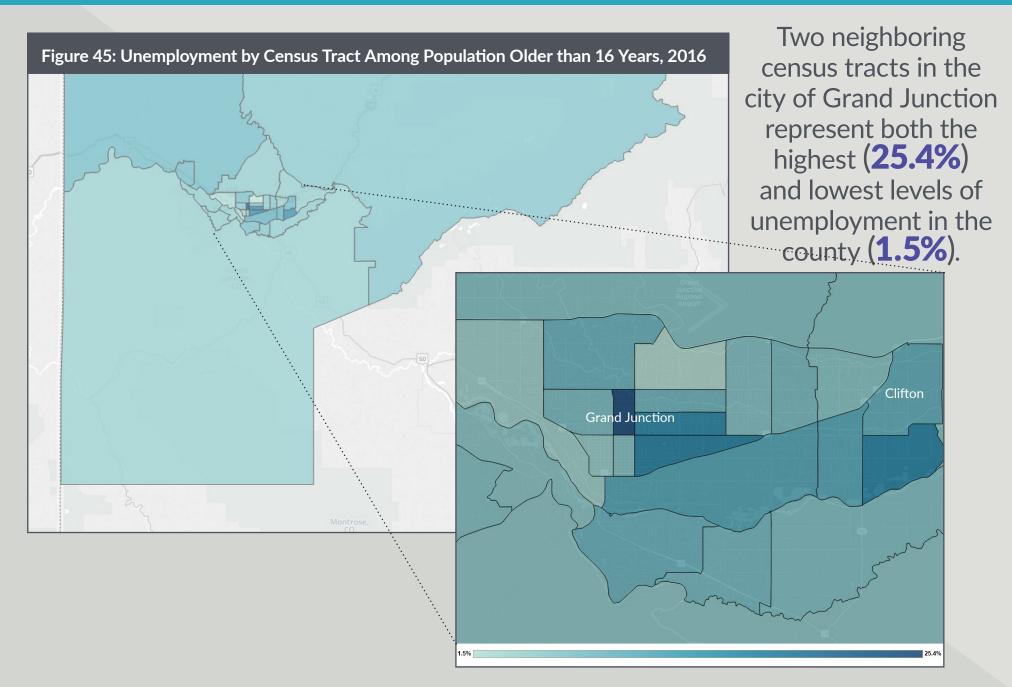
3. Retail trade: 10,227 jobs

## **Employment**

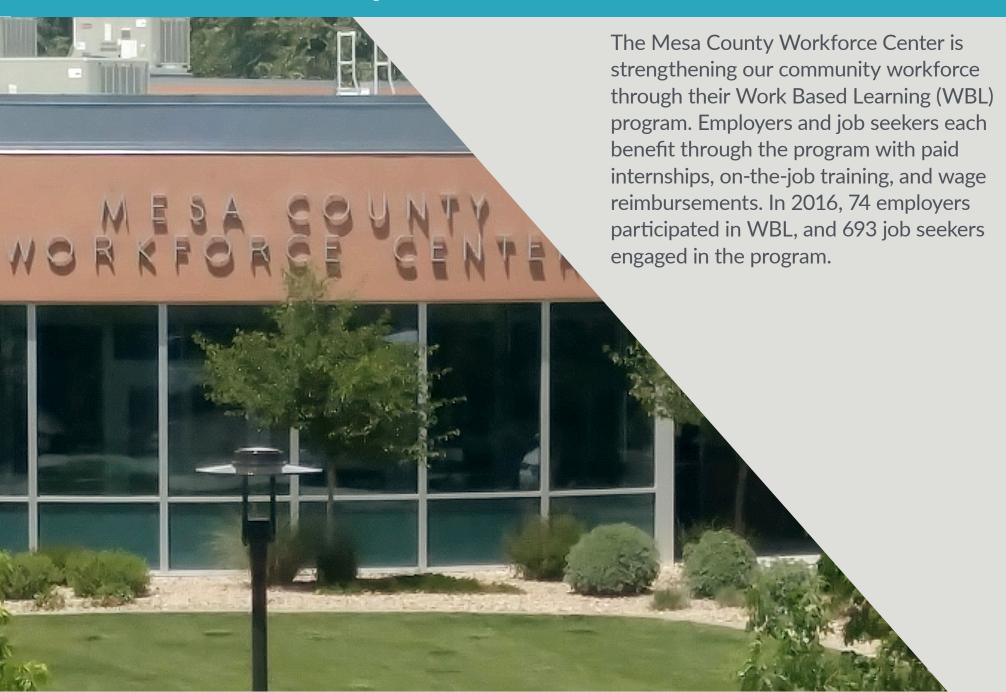


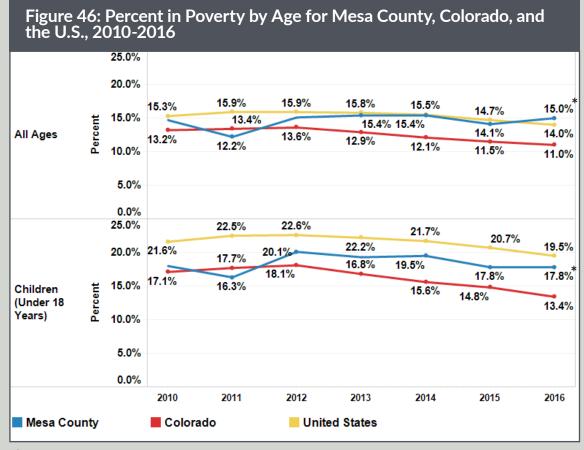
in Mesa County
continues to
DECLINE,
but remains
HIGHER
compared to the
state and nation.

# **Employment**



# **Workforce Development**





<sup>\*</sup>statistically different

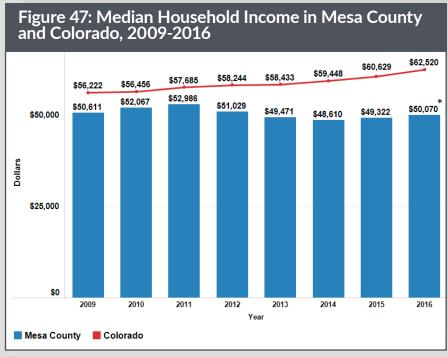


Approximately 1 in 5 children in Mesa County live in poverty.

In 2016, the Federal Poverty Level guidelines set the poverty threshold for a family of four at \$24,300. Poverty impacts the ability to afford goods and services, such as quality food and health care, and can force people to live in physical and social environments that negatively impact their health.

For adults, poverty can be linked to poor health and dying at a younger age.

The percentage of individuals living in poverty in Mesa County has remained consistently **HIGHER** than Colorado since 2012.

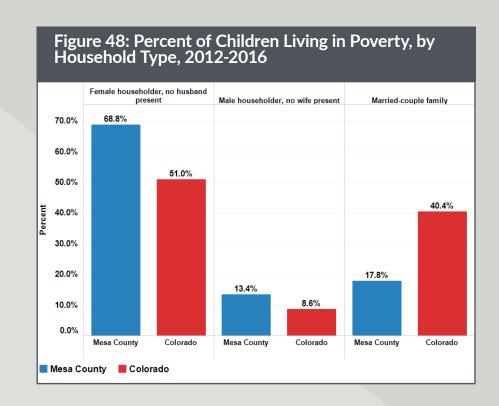


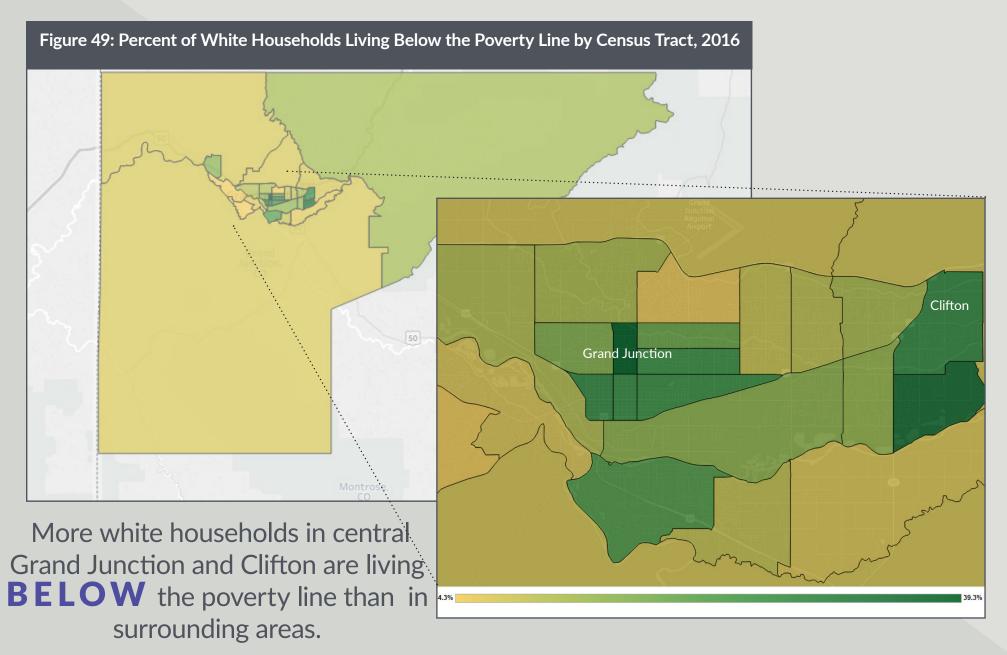
<sup>\*</sup>statistically different

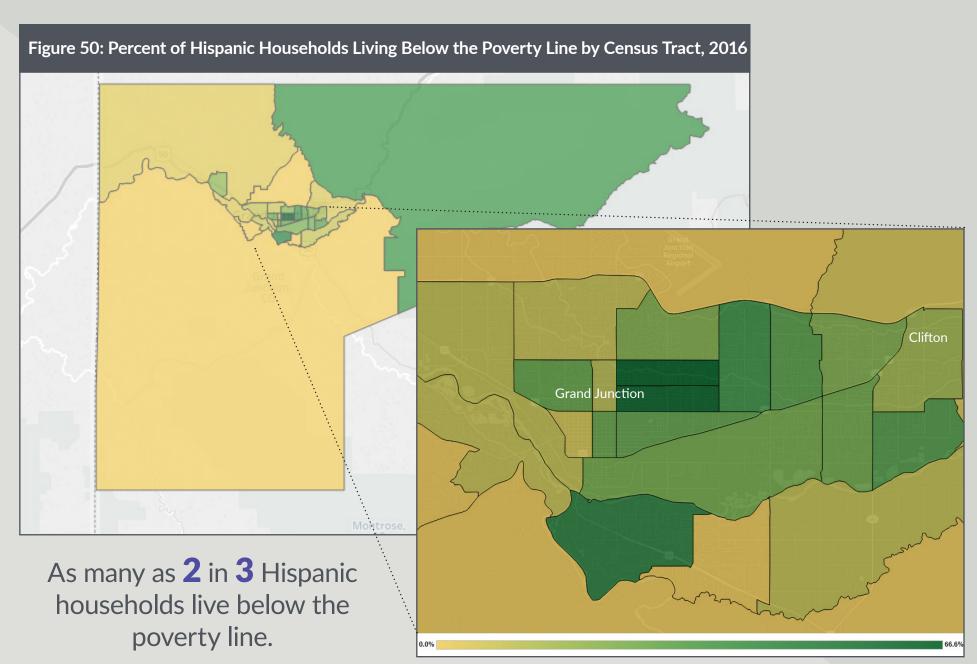
Mesa County's median household income is \$12,000 LOWER than Colorado.

7 in 10 children living in poverty live in a household led by a single female.

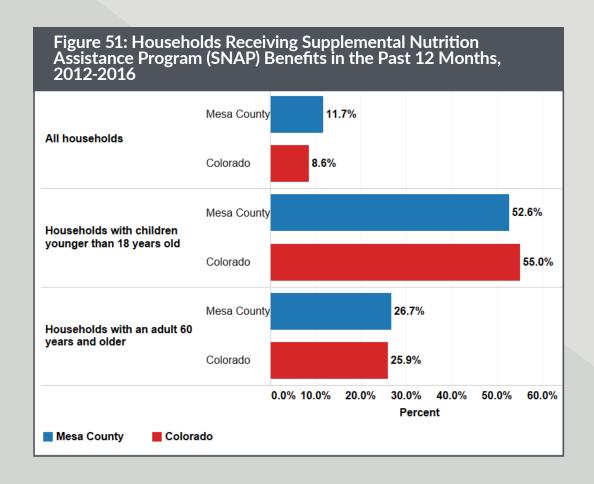
Growing up in poverty can have lasting impacts on individual health, increasing the risk for school failure, poor health outcomes, and teen pregnancy.







# **Food Security**

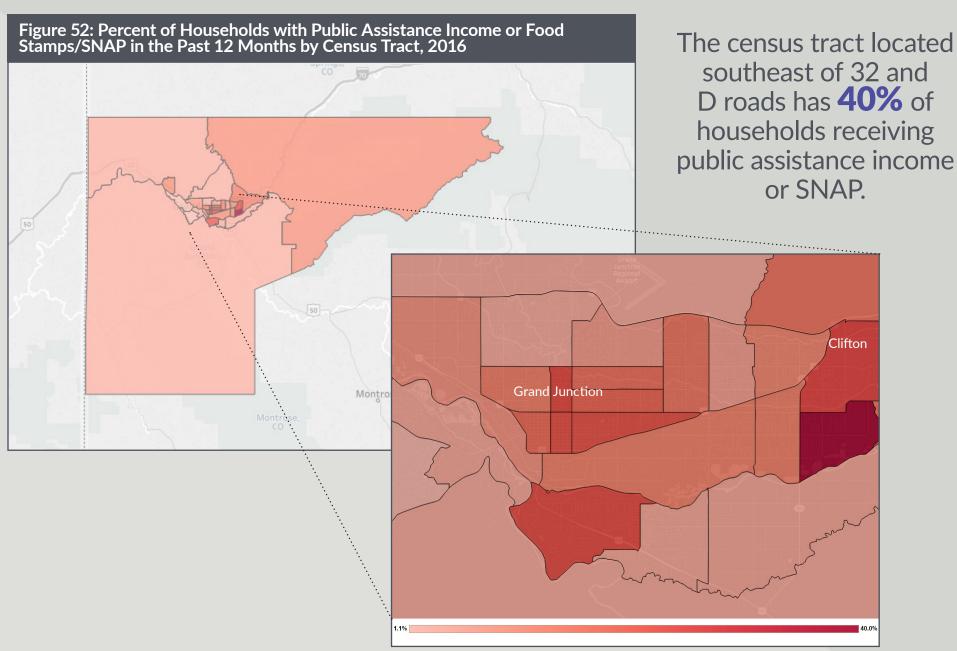


**SNAP** is associated with positive educational outcomes.

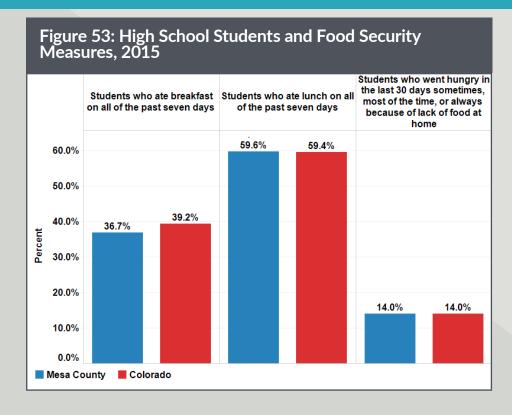
Food security means access by all people at all times to enough food for an active, healthy life. Individuals living with food insecurity may report reduced food intake, such as skipping meals, as well as reduced quality, variety, or desirability of the food to which they have access. Federal food and nutrition assistance programs are essential to protect vulnerable children and families against food insecurity.

Approximately **HALF** of households with children younger than 18 are receiving SNAP benefits in Mesa County.

# **Food Security**



### **Food Security**

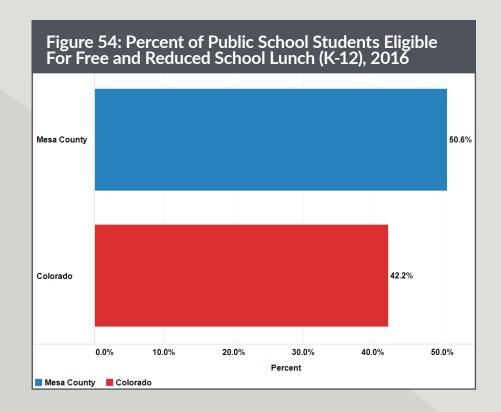


Free and reduced lunch eligibility is based on household size and income criteria.

**HALF** of students in Mesa County are eligible for free and reduced lunch.

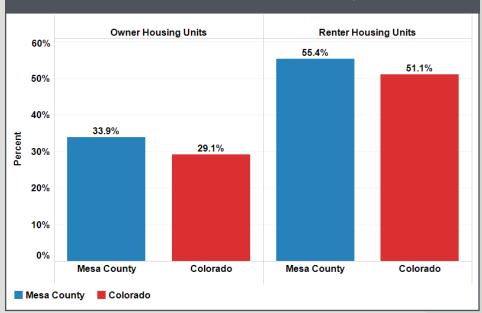
Skipping or missing meals is associated with decreased cognitive performance (alertness, attention, memory) among students.

1 in 3 high school students report eating breakfast every day.



### **Housing Stability**

Figure 55: Percent of Housing Units Where Monthly Housing Costs are 30% or More of Household Income, 2012-2016



#### MORE THAN HALF of

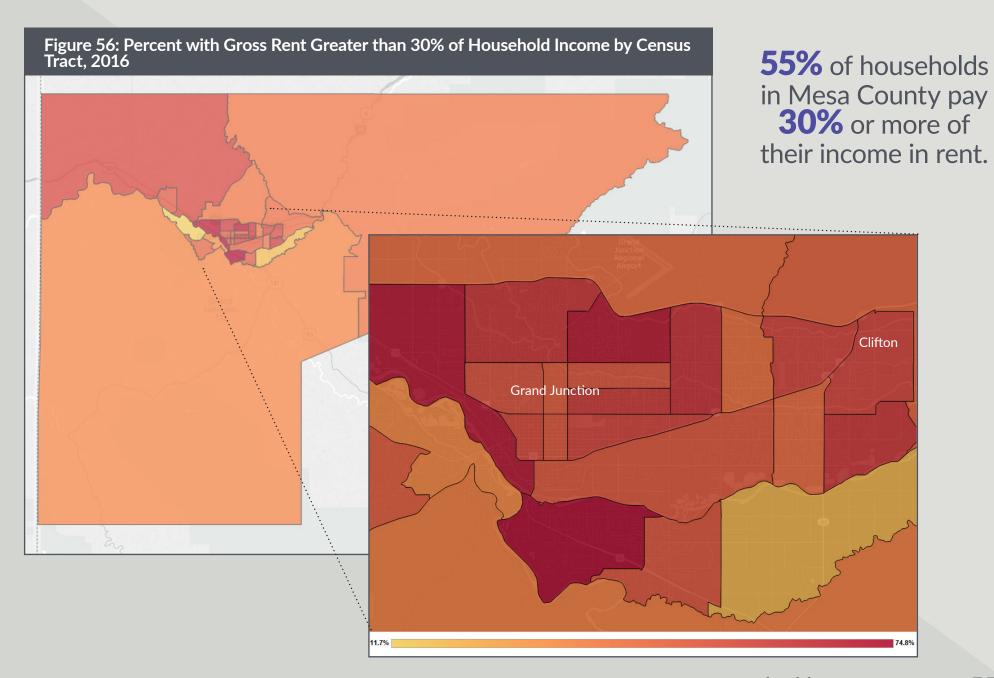
renters in Mesa County pay 30% or more of their income towards RENT.

Stable housing means having affordable, safe, and consistent access to shelter. Having stable housing can improve health outcomes, especially for people living with chronic illness. Individuals living in stable housing are better able to receive consistent health care, maintain treatment, and focus on health needs.

The threshold for considering housing to be affordable is 30% of family income, as set in 1981 by the U.S. Department of Housing and Urban Development. This is deemed to be the percentage of income a family can spend on housing and still afford other basic needs.

3 out of 10 homeowners pay 30% or more of their income toward their MORTGAGE.

## **Housing Cost**



#### Homelessness



Homelessness refers to a person without permanent housing. Several counties in Colorado participate in an annual Point in Time Study of Homelessness in their communities. The study is a snapshot of the burden of homelessness in Colorado. It likely only represents a fraction of the true burden due to the transient nature of the population. The most recent study was conducted in January 2017.



1 in 5 homeless persons in Mesa County are younger than 18 years.

#### Homelessness

### FIGURE 57: SELF-REPORTED DISABILITIES OF HOMELESS PERSONS IN MESA COUNTY

Indicator	Percent
Victim of domestic violence	25%
Serious mental illness	20%
Chronic physical illness	21%
Post-traumatic stress disorder (PTSD)	18%
Substance use	14%



1 in 10 homeless persons in Mesa County are veterans.

# 32% are chronically homeless.\*

\*As indicated by respondents living in shelters/on the street for a year or more OR who have been homeless on the streets 4+ times in the past 3 years AND reported at least one disability.

1 in 3 homeless persons are female.

### SOCIAL ENVIRONMENT

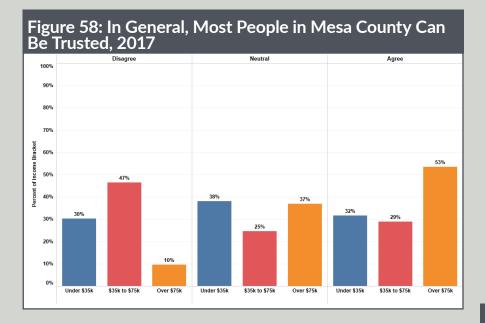
#### WHAT IS IT?

Characteristics of community dynamic and social capital.

#### WHAT AFFECTS IT?

Trust in the community and with law enforcement, relationships, civic engagement, and violence.

### **Trust and Relationships**



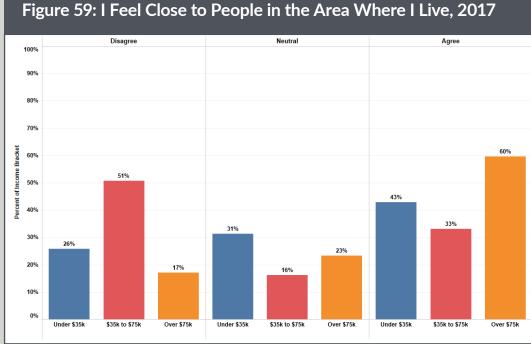
**HALF** of social capital survey (see appendix II) participants with an annual income of \$75,000 or greater believe most people in Mesa County can be trusted.

The highest satisfaction with neighbor relationships and feeling close to people nearby was observed among people earning more than

**\$75,000** annually.

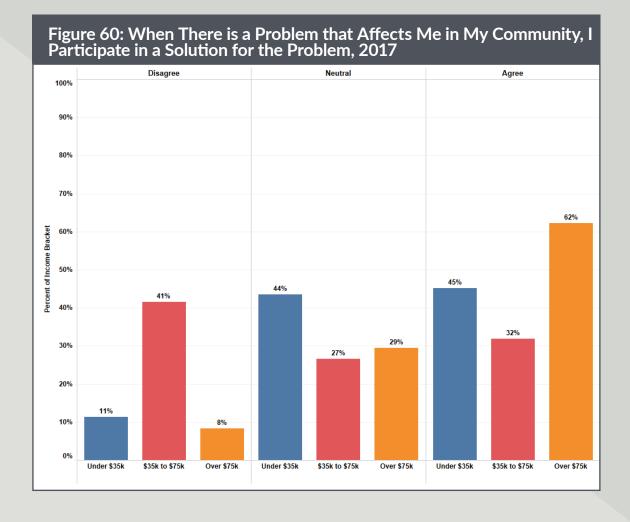


6 in 10 participants agreed with the statement, "I personally trust law enforcement in Mesa County".



health.mesacounty.us

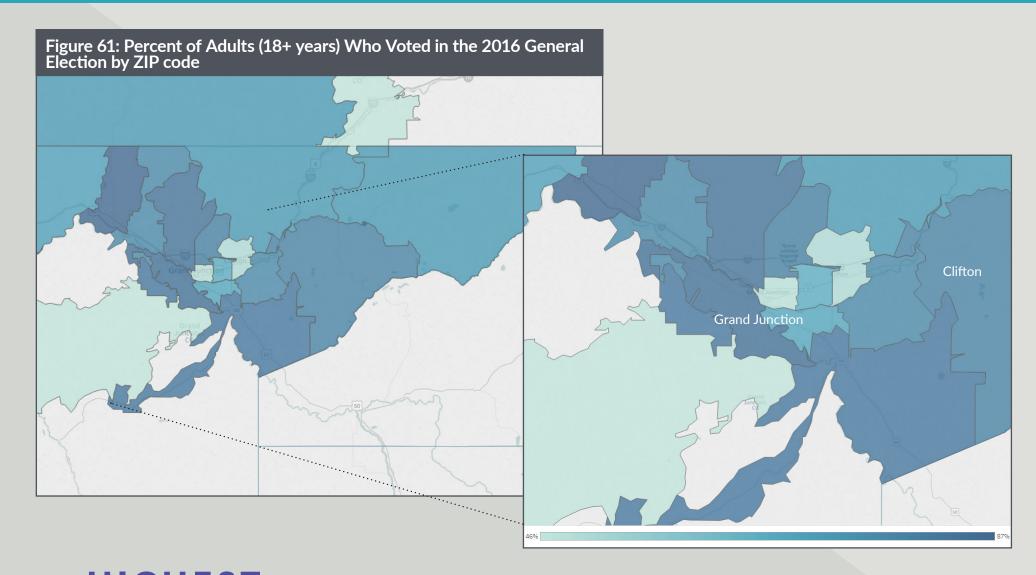
### **Civic Engagement**



Participants who earn more than \$75,000 annually were MORE LIKELY to report participating in community

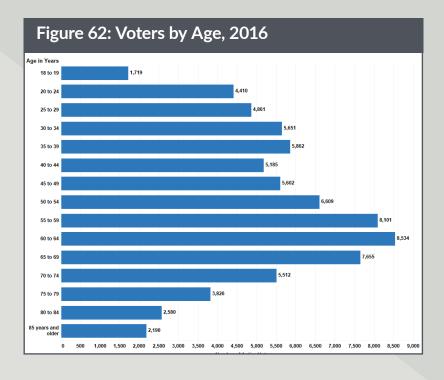
solutions.

More participants with an income between \$35,000 and \$75,000 report LACK OF PARTICIPATION in the solution for a community problem that affects them.



HIGHEST voter participation rates were observed in Loma and Grand Junction (81507 & 81505) while the LOWEST voter participation rates were in Glade Park.

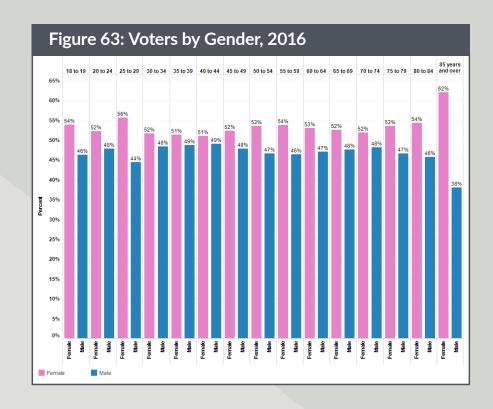
### Voting



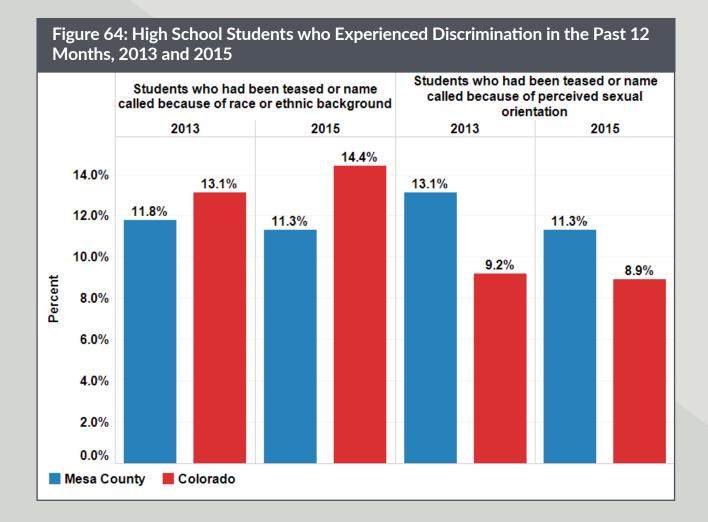


Nearly **7** in **10** registered voters cast a ballot in the 2016 general election.

In the 2016 general election, younger adults between the ages of 20-29 years were underrepresented. Additionally, the gender of voters did not align with the percent of men and women populations, particularly for adults 18-39 years.



#### Discrimination



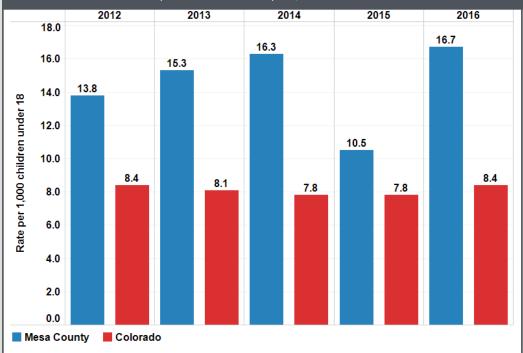
FEWER Mesa
County high school
students report being
teased because of race
or ethnic background
than Colorado high
school students.



#### Crime and Violence

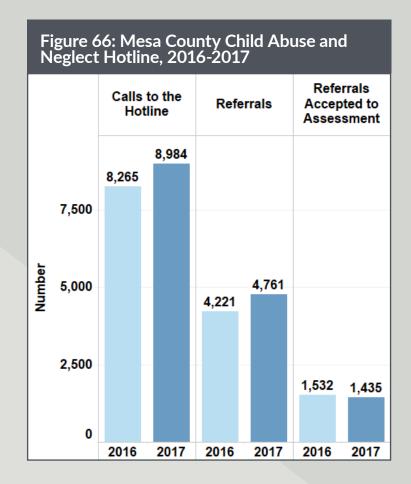
Figure 65: Incidence of Maltreatement of Children Younger than 18 years (including physical abuse, sexual abuse, emotional abuse and/or neglect)

The value is the number of unique substantiated cases per 1,000 children

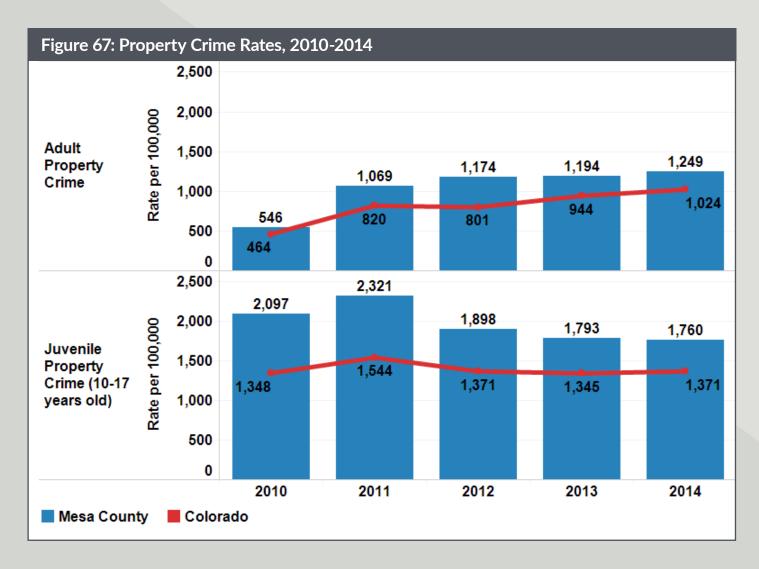


In 2017, **HALF** of all calls to the Abuse and Neglect Hotline resulted in a referral.

Child abuse or neglect is any act or series of acts of commission (words/actions that cause harm, potential harm or threat of harm) or omission (failure to provide needs or to protect from harm) by a parent or other caregiver that results in harm (real, potential, or threat) to a child.



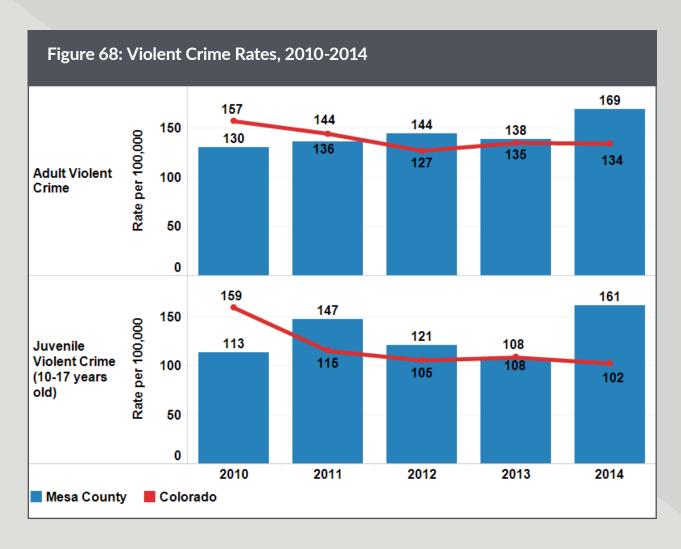
#### **Crime and Violence**



Property crime includes the offenses of burglary, larceny-theft, motor vehicle theft, and arson.

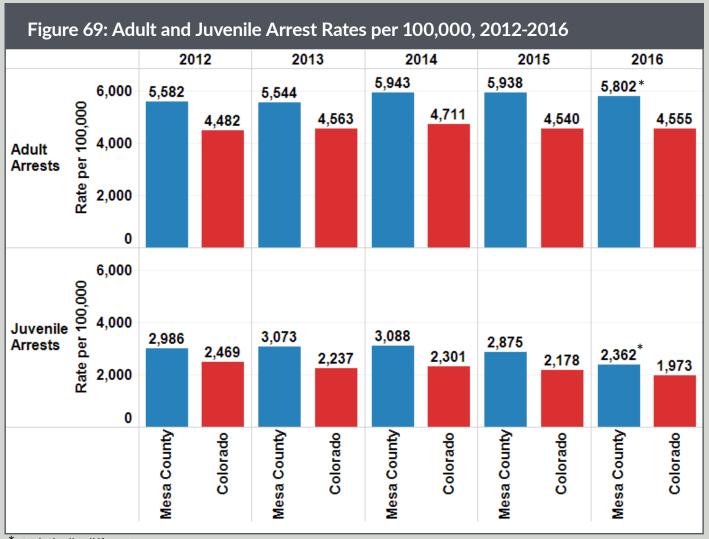


#### **Crime & Violence**



Violent crime is composed of four offenses: murder, non-negligent manslaughter, forcible robbery, and aggravated assault.





<sup>\*</sup>statistically different

The arrest rate for juveniles and adults was

#### SIGNIFICANTLY HIGHER

in 2016 compared to Colorado.

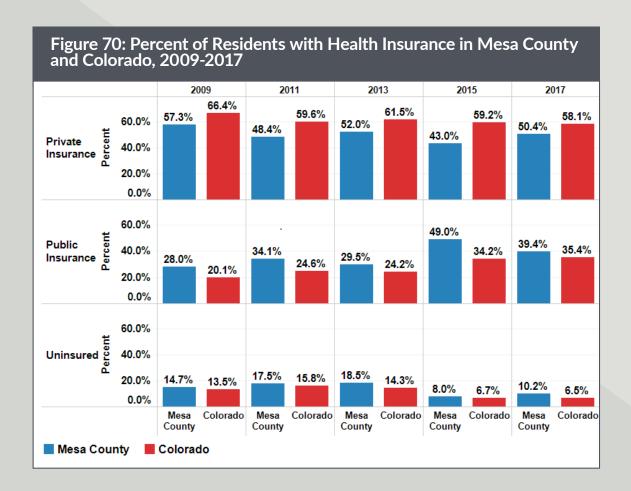
## SERVICE ENVIRONMENT

#### WHAT IS IT?

Characteristics of the social service system.

#### WHAT AFFECTS IT?

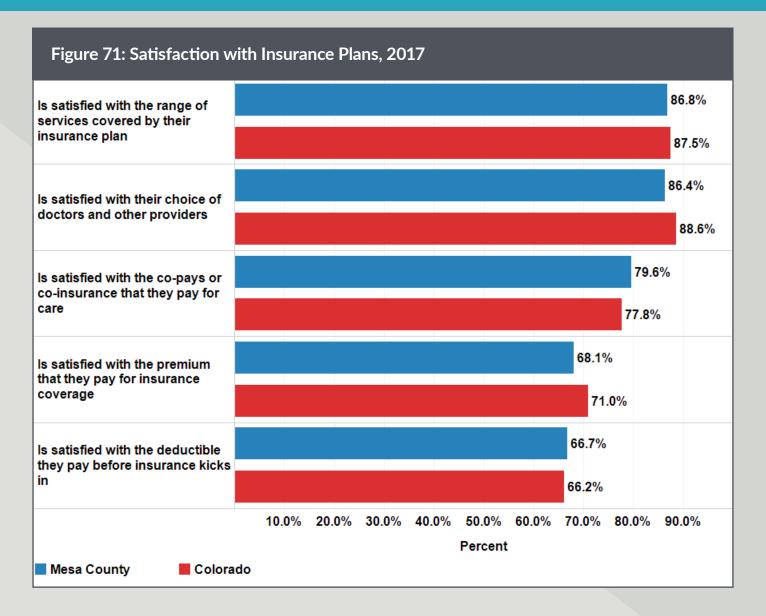
Health insurance coverage, access and barriers to health care, mental health, availability of child care, high school drop out rates, and educational attainment.



The Affordable Care Act requires individuals to have either public or private health insurance. Public health insurance coverage includes Medicaid, Medicare, and Child Health Plan Plus (CHP+).

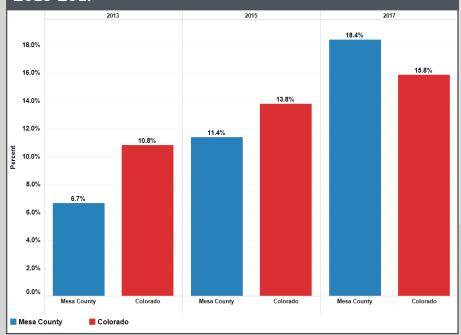
Medicare provides coverage for adults 65+ years, adults with certain disabilities, and persons with End State Renal Disease. Medicaid and CHP+ provide insurance for low-income families based on the Federal Poverty Level. Private insurance can be employer-sponsored or purchased on the health insurance marketplace.

Between 2015 and 2017, there was an INCREASE in residents with private insurance and a DECREASE in those with public insurance.



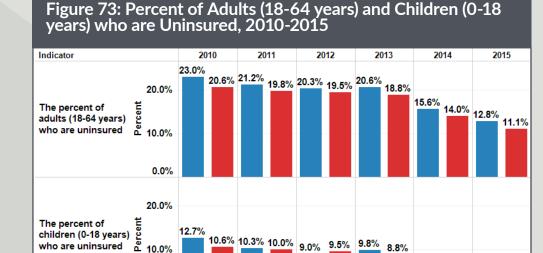
A MAJORITY of residents are satisfied with the range of services covered by their insurance plan.

Figure 72: Percent who lost Coverage or Switched from One Type of Insurance to Another in the Past 12 Months, 2013-2017



In 2017, **1** in **5** residents reported losing or switching health insurance in the past 12 months.

Between 2010 and 2015, the percent of adults and children who were uninsured **DECREASED**, likely due to the expansion of Medicaid coverage.



0.0%

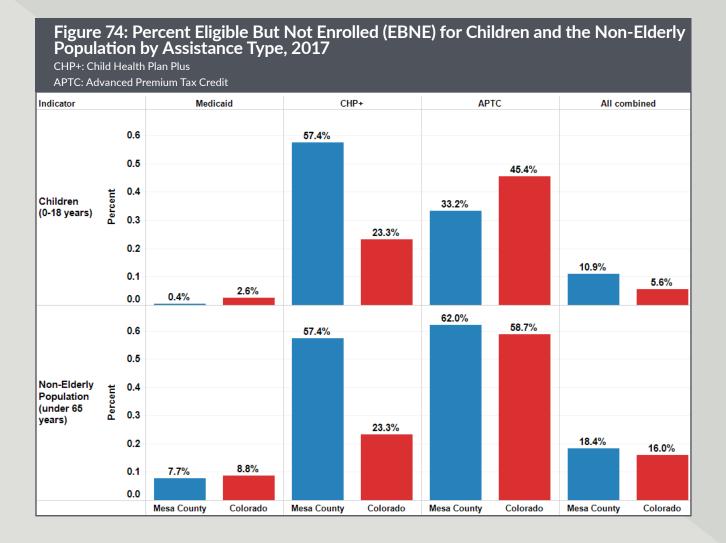
Mesa County Colorado

Mesa County

Colorado

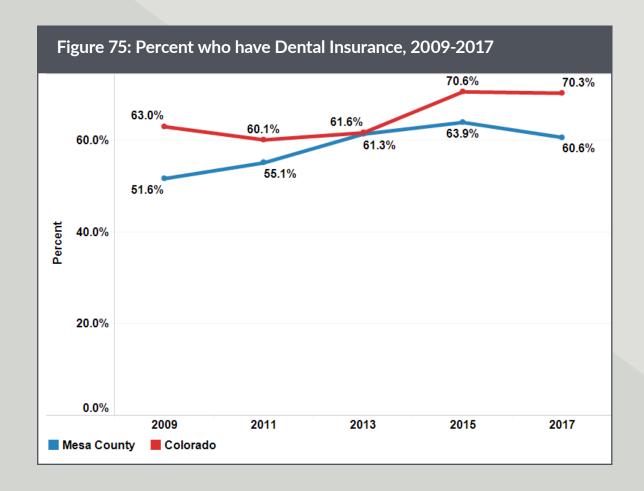
6.2% 5.9% 5.5%

Mesa County

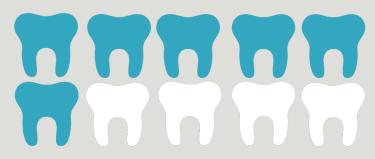


Health insurance coverage is an important factor in access and use of health care. Health insurance makes medical care more affordable when it's needed most, and having access to medical care means that care is more likely to be received without delay. Lack of health insurance can leave people with aggravated health issues and/or expensive medical bills.

1 in 10 children and nearly 2 in 10 adults (younger than 65) are eligible, but not enrolled in health insurance in Mesa County.



Dental insurance lowers out-of-pocket costs and promotes routine preventive care.



6 in 10 Mesa County residents have dental insurance.

Mesa County has five hospitals, all of that aim to meet the needs of residents in Western Colorado and Eastern Utah. The hospitals serve as a regional health care hub for 538,384 residents in all counties in western Colorado and three counties in eastern Utah.





#### Colorado Canyons

A full-service Critical Access Hospital with 25 beds. Colorado Canyons is a Level IV trauma and emergency care center, and the only Medicaid facility in the Grand Valley, which can immediately switch a hospital room from acute care status to skilled care status. Located in the heart of Fruita, Colorado Canyons has been serving the health care needs of the Lower Valley since 1946.



#### Community Hospital

A non-profit, fully accredited facility with 60 licensed beds.

This hospital is a Level III trauma center with full outpatient diagnostic services and inpatient care. They also offer labor and delivery services and emergency care.

Community Hospital partners with the University of Utah and Huntsman Cancer Institute to offer comprehensive cancer care, including medical and radiation oncology treatment.



Department of Veterans Affairs (VA)

The VA medical center is a federal health facility with 53 acute and long-term beds. They provide inpatient and ambulatory medicine, surgery, and psychiatric services to all veterans.



St. Mary's Medical Center

A non-profit, fully-accredited facility with more than 350 beds.

This medical center is a Level II trauma center with air emergency transport services, and a Level III neonatology center.

They also offer acute rehabilitation, open-heart surgery, brain and spine surgery, and labor and delivery services. St. Mary's is a certified stroke and chest pain center, as well as an accredited comprehensive community cancer program.

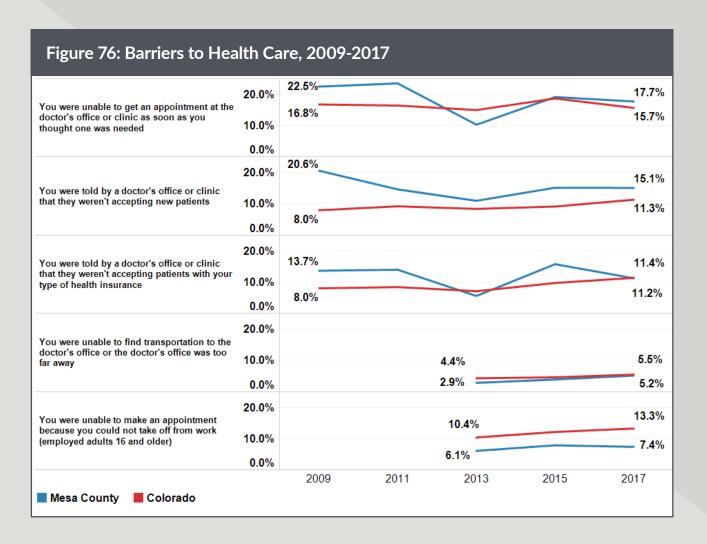


West Springs Hospital, Inc.

A non-profit facility in Grand Junction and the only psychiatric hospital on the Western Slope.

The hospital has a 32-bed capacity and is expanding to 64 beds in January 2019.

They provide inpatient treatment for psychiatric disorders and offer special programs and accommodations for children and adolescents.

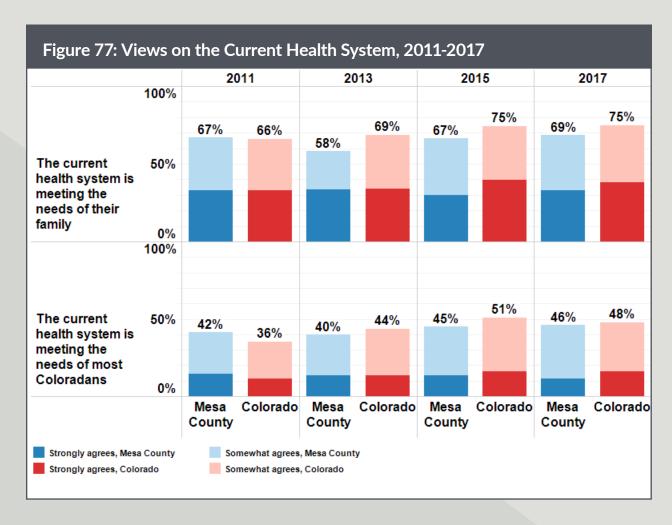


Access to comprehensive, quality health care services is important for promoting and maintaining health, preventing and managing disease, reducing unnecessary disability and premature death, and achieving health equity for all Americans.

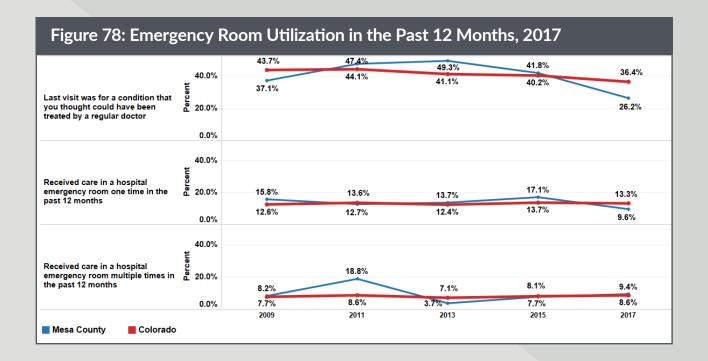
By understanding the specific barriers to care and common attitudes, and behaviors and beliefs regarding utilization of health care, stakeholders can work to improve health outcomes in Mesa County residents.

Inability to get an appointment as soon as needed was identified as the **TOP BARRIER** to receiving care.

Nearly HALF
of Mesa County
residents think
the current
health care
system is
meeting the
needs of most
Coloradans.



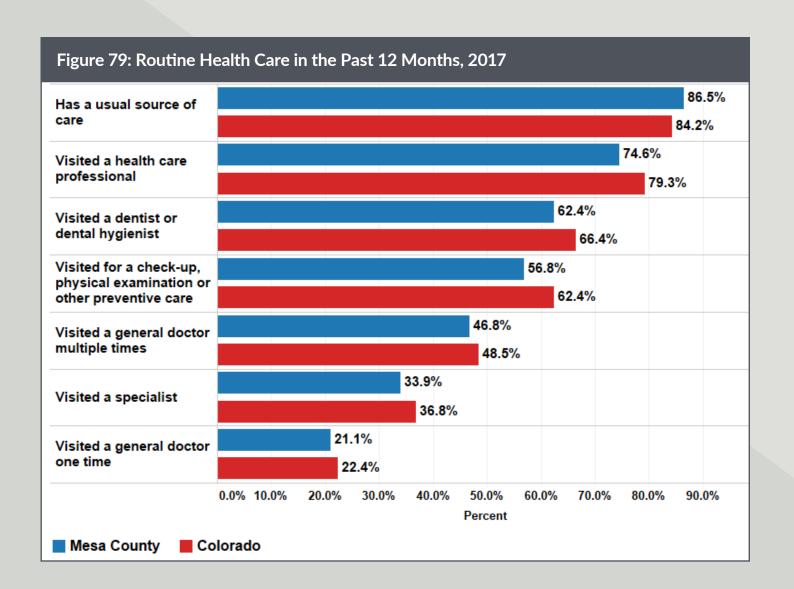
2 in 3 Mesa County residents think the current health system is meeting the needs of their family.



1 in 4 visits to the emergency department could have been treated by a regular doctor. This represents nearly a 50%

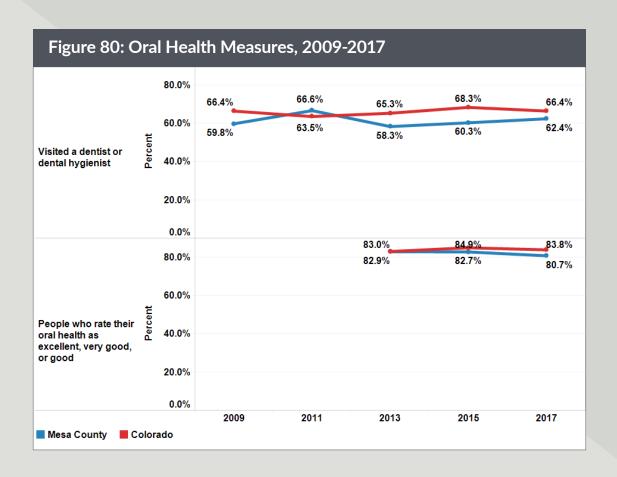
DECREASE since 2013

People with a usual source of care are more likely to have better health outcomes and experience less disparities. They can develop relationships with their providers, thereby improving communication, trust, and appropriate care. Service and coverage each have a significant impact on utilization of high-cost settings such as emergency departments and urgent care facilities.



1 in 4 Mesa County residents did not visit a health care professional in the past 12 months.

Routine health care utilization has remained **STABLE** since 2009.



Oral health refers to the health of a person's mouth. Diseases that affect other parts of the body may first be spotted in the mouth. Maintaining good oral health is an essential part of overall health and quality of life. Serious consequences are related to poor oral health including cavities, gum disease, tooth loss, and oral cancers.



**FEWER** children (1 to 14 years) in Mesa County have fair or poor condition of their teeth than Colorado. 2 out of 3 residents visited a dentist in the past 12 months.

#### **Mental Health**

#### FIGURE 81: MENTAL HEALTH INDICATORS IN MESA COUNTY AND COLORADO, 2013-2015

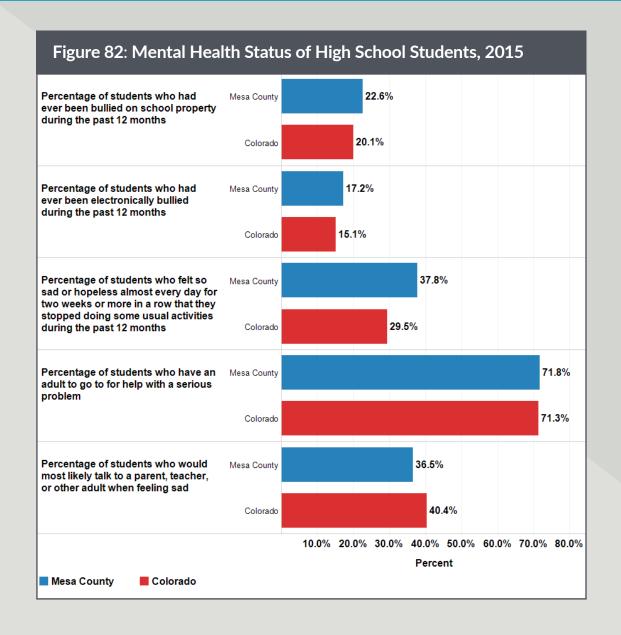
Indicator	Mesa County	Colorado
Age-adjusted rate of mental health diagnosed hospitalizations (per 100,000 population), 2013-2015	2,736.6*	2,833.8
Average number of days in the past 30 days when their mental health was not good (adults aged 18+ years), 2013-2015	3.6	3.3
Average number of days of poor physical or mental health that kept them from doing usual activities, such as self-care, work, or recreation (adults aged 18+ years), 2013-2015	2.2	2.1
Percent of parents who reported behavioral or mental health problems in children aged 1 to 14 years, 2013-2015	12.4%	19.9%
Percent of women who often or always felt down, depressed, sad, or hopeless since the new baby was born (Postpartum Depressive Symptoms), 2012-2014	16.3%	9.6%

Nearly **1** in **5** new mothers report postpartum depressive symptoms.

Mental health is a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. Emerging evidence suggests that positive mental health has an association with improved health outcomes. Indicators of mental health include emotional, psychological, and social well-being.

<sup>\*</sup>Statistically different

#### Mental Health



Nearly **3** out of **4** high school students report having a trusted adult to go to for help with a serious problem.

Youth who have a trusted adult in their lives are **LESS LIKELY** to engage in risky behavior, such as using drugs and alcohol.

1 in 5 high school students report being bullied at school.

#### Mental Health

The new, expanded West Springs Hospital facility is expected to open in January 2019. The capacity will double to 64 beds.

There are not enough psychiatric hospital beds on the Western Slope, which means a gap in receiving assistance. Sometimes, patients are kept in the emergency department, or held in jail when they're in need of psychiatric care due to lack of beds. The average length of stay for an inpatient at West Springs is seven days. On average, there are 8-12 people on the wait list for inpatient care.

Mind Springs Health, connected with West Springs Hospital, is the local community mental health center. Mind Springs services include a crisis service line, outpatient counseling and therapy, a women's recovery center for drug and alcohol transitional living, peer services, and family services.

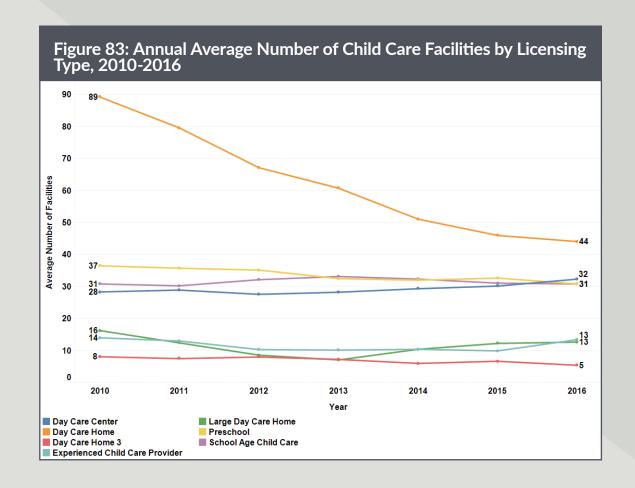
There has been an INCREASE in the number of adolescents needing a psychiatric hospital stay (11% of admissions in 2014 to 20% in 2017).

Crisis service use has DOUBLED in the past 2 years.

Western Slope: 6 psychiatric beds/100,000 residents

Colorado: 19 psychiatric beds/100,000 residents

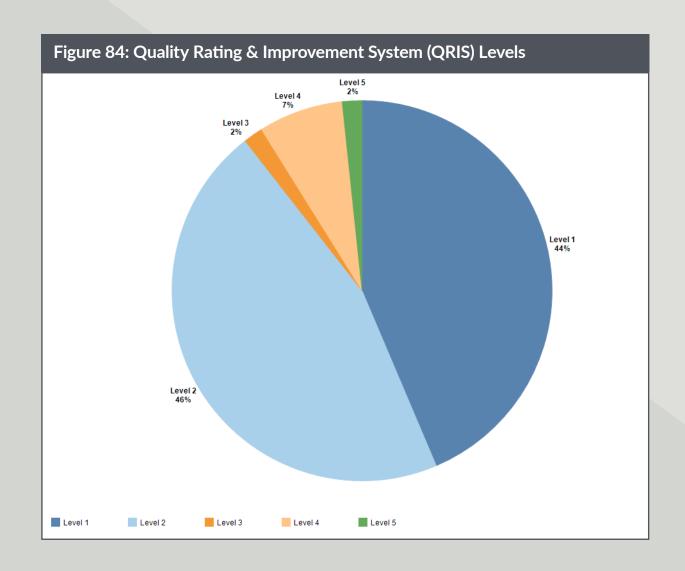
#### **Child Care**



Child care facilities are licensed by the Division of Early Care and Learning, including child care centers, resident camps, child care homes, and school-age child care centers. Since April 2016, Mesa County has had an average of 158 licensed child care facilities. When at licensed capacity, approximately 4,200 children can receive care. There is an unmet need for child care in Mesa county. In six zip codes, there are more than 30 children (ages 0 to 13 years) for every child care space.

While the number of most facility types has remained relatively stable, family child care homes have **DECREASED BY 50%** since 2010.

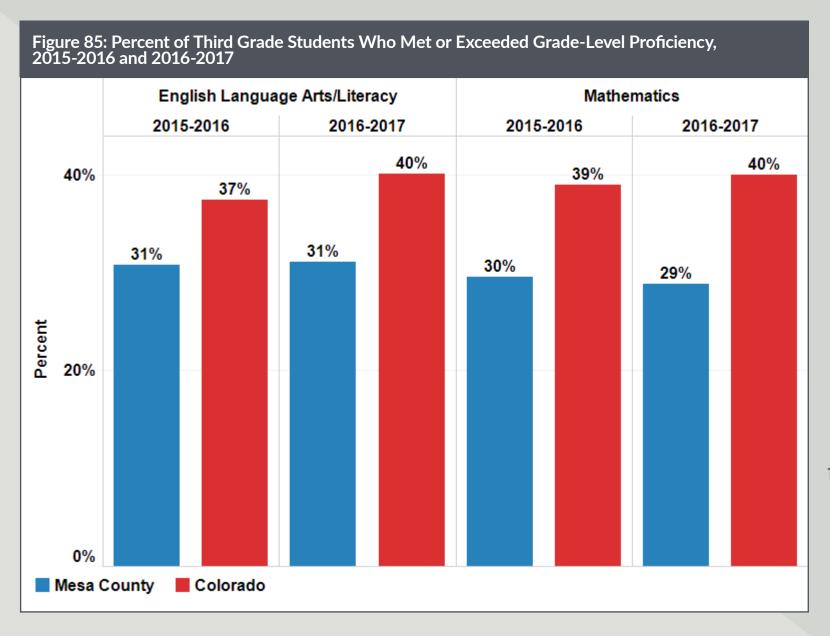
#### Education



Licensed child care facilities, except school-age care, are accredited by the Colorado Shines **Quality Rating and Improvement** System (QRIS). Each facility is rated on a scale of one to five, one qualifying as a basic program and five qualifying as exceptional. All licensed child care, excluding school-aged care programs, qualify for QRIS and are initially rated at a Level 1. Higher levels are evaluated on workforce qualifications, family partnerships, leadership, management & administration, learning environment, and child health.

Only **12** (10%) licensed child care facilities have a QRIS of level 3 or higher.

### **Education**



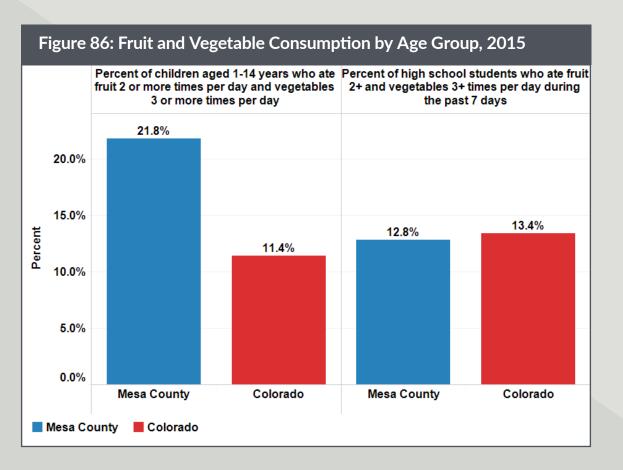
#### **FEWER**

Mesa County 3rd grade students met or exceeded proficiency in English and math compared to the state.

# **HEALTH BEHAVIORS**



#### **Nutrition**

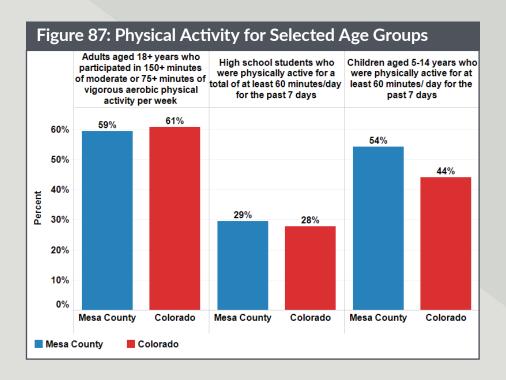


Opportunities exist to INCREASE fruit and vegetable consumption among children and teens in Mesa County.

Good nutrition is an important part of leading a healthy lifestyle. Combined with physical activity, diet can help a person reach and maintain a healthy weight, reduce the risk of chronic diseases (such as heart disease and cancer), and promote overall health.



## **Physical Activity**



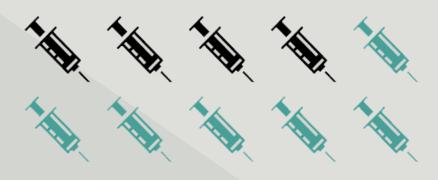
#### FIGURE 88: PHYSICAL HEALTH INDICATORS IN MESA COUNTY AND COLORADO, 2013-2015

Indicator	Mesa County	Colorado
Average number of days in the past 30 days when their physical health was not good (adults aged 18+ years)	3.7	3.4
Average number of days of poor physical or mental health that kept them from doing usual activities, such as self-care, work, or recreation (adults aged 18+ years)	2.2	2.1
Average number of days of poor physical or mental health that kept them from doing usual activities, such as self-care, work, or recreation (adults aged 65+ years)	3.0	2.2

Regular physical health includes aerobic activity, muscle strengthening, and bone strengthening. These activities help improve overall health and fitness as well as reduce the risk for chronic diseases. such as cardiovascular disease and type 2 diabetes. Children should get 60 or more minutes of aerobic activity every day and muscle and bone strengthening 3 days per week. It is recommended that adults get at least 2 hours and 30 minutes of moderate-intensity aerobic activity (or 75 minutes of vigorous-intensity) every week and 2 or more days of muscle strengthening. Highest physical activity was observed among adults in Mesa County: lowest among high school students.

A MAJORITY of high school students report not getting the recommended amount of physical activity per week.

#### **Immunizations**



4 in 10 adults (aged 18+ years) report receiving a flu shot in the past 12 months.

Healthy People 2020 Influenza Immunization Goal for Adults Aged 18+ Years

70%

Mesa County has a long way to go to achieve the Healthy People 2020 goal of 70%.

Immunizations have greatly improved health in the United States. Many diseases are no longer common in the United States, largely because vaccines are available to prevent them. It is important to continue to immunize against these diseases because they persist around the world. Vaccine-preventable diseases can be very serious and may require hospitalization for severe illness.



6 in 10 older adults (aged 65+ years) report receiving a flu shot in the past 12 months.

#### **Immunizations**

## FIGURE 89: MESA COUNTY VALLEY SCHOOL DISTRICT 51, IMMUNIZATION RECORD STATUS, 2016-2017

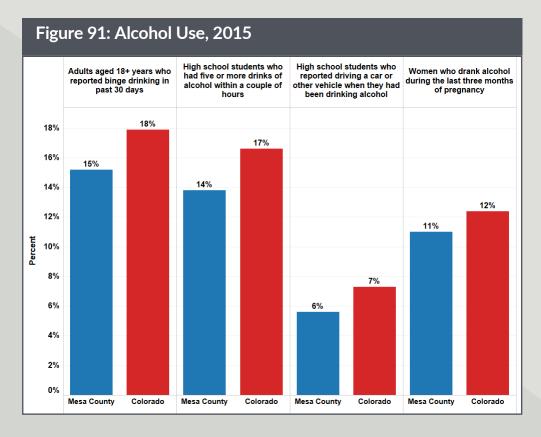
Immunization Status	Percent
Average Up-To-Date	91.6%
Average Exemption	1.2%
Average Incomplete Records	3.2%
Average No Record	4.1%

#### FIGURE 90: MESA COUNTY VALLEY SCHOOL DISTRICT 51 IMMUNIZATION RATES, 2016-2017

Immunization	Percent Up-To-Date
Hepatitis B	94%
Diphtheria-Tetanus-Pertussis (DTaP)	93%
Polio	93%
Measles-Mumps-Rubella (MMR)	93%
Varicella (Chicken pox)	87%
Tetanus-Diptheria-Pertussis (Tdap)	86%

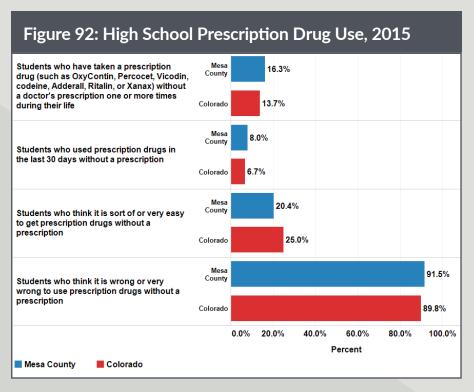
Maintaining a **HIGH** level of vaccination coverage is critical to ensuring a **LOW** rate of vaccine-preventable disease in schools.

#### **Alcohol & Other Drugs**

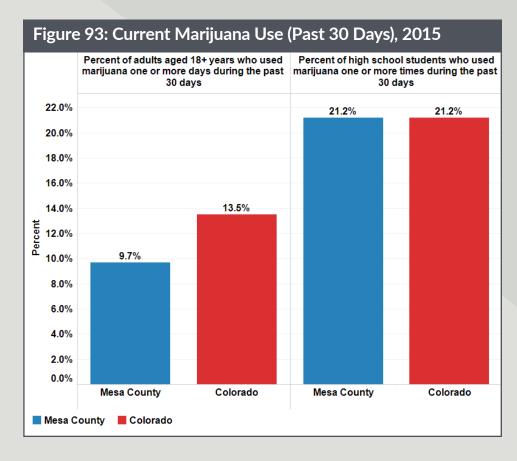




1 in 5 high school students think it's easy to get prescription drugs without a prescription.

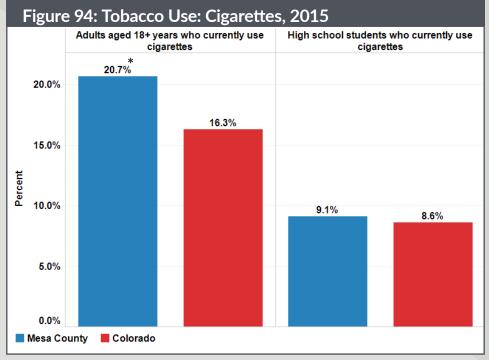


#### Tobacco & Marijuana Use



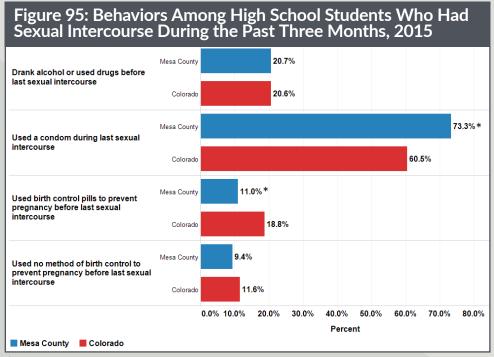
The percent of adults currently using cigarettes is **SIGNIFICANTLY HIGHER** in Mesa County than in Colorado.

More high school students in Mesa County report trying marijuana for the first time **BEFORE AGE 13** than in Colorado (12.6% and 9.2% respectively).

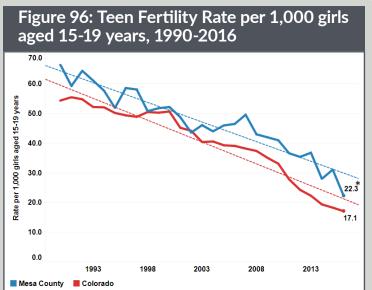


<sup>\*</sup>statistically different

#### **Sexual Behavior**



<sup>\*</sup> statistically different



Sexual health is defined as a state of physical, emotional, mental, and social well-being in relation to sexuality. Public health efforts in sexual health include STD prevention, reproductive health care, sexual violence prevention, and healthy pregnancy.

MORE Mesa County high school students report using a condom during last intercourse compared to the state.

Teen fertility rates \*\*
continue to **DECLINE** in
Mesa County and the state.

<sup>\*\*</sup>Teen fertility rate is the number of live births to females age 15-19 for every 1,000 females in that age group.

# **DISEASE AND INJURY**



#### FIGURE 97: INCIDENCE RATE PER 100,000 OF THE TOP FIVE REPORTABLE DISEASES IN MESA COUNTY COMPARED TO COLORADO, 2016

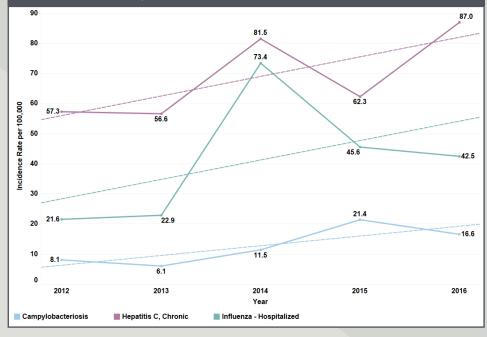
Morbidity	Mesa County	Colorado
Chlamydia	363.6	434.8
Chronic Hepatitis C	87.0	90.9
Hospitalized Influenza	42.5	35.8
Gonorrhea	40.5	107.5
Campylobacteriosis	16.6	19.9

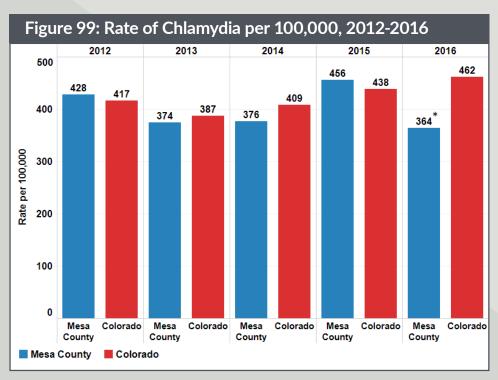
The rates of chronic hepatitis C, hospitalized influenza, and campylobacterosis are

INCREASING.

A communicable disease is an illness caused by an infectious agent or its toxins that is spread from an infected person or an animal, vector, or the environment. In Colorado, there are more than 80 conditions reportable to Public Health. Health care providers and laboratories are required to report these conditions to their local public health agency for prompt recognition and follow-up.

Figure 98: Incidence Rate of Campylobacterosis, Chronic Hepatitis C, Chronic, and Hospitalized Influenza per 100,000 with Trend Lines, 2012-2016

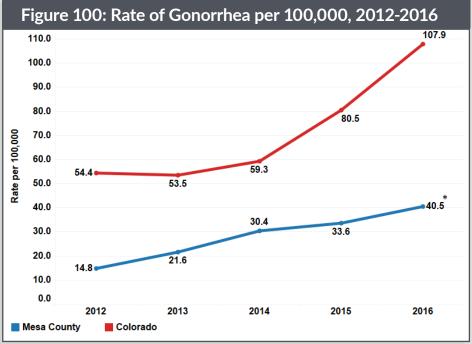




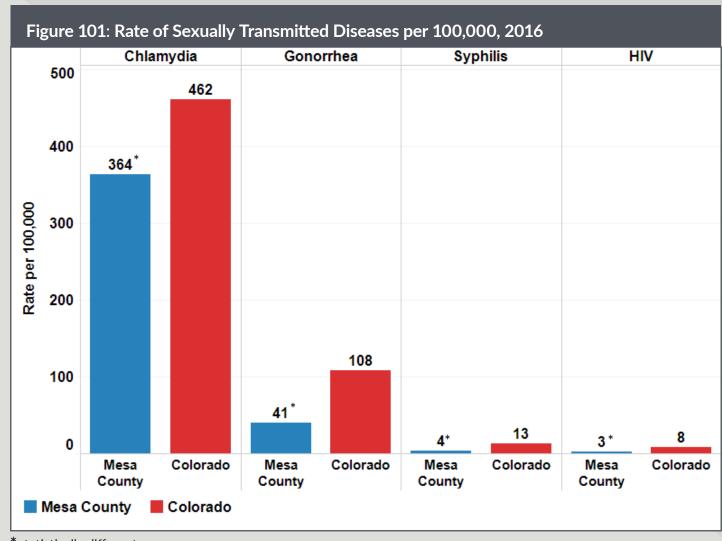
<sup>\*</sup>statistically different

CHLAMYDIA and GONORRHEA are the top two STDs reported in Mesa County and Colorado.

Chlamydia and gonorrhea are sexually transmitted diseases. Anyone having unprotected sex is at risk. However, young adults are at higher risk of contracting chlamydia. Annual testing is recommended for sexually active women younger than 25 years, older women at higher risk (i.e. new or multiple partners), and sexually active gay or bisexual men and women.



<sup>\*</sup>statistically different



The incidence rate of chlamydia, gonorrhea, syphilis, and HIV is **LOWER** in Mesa County compared to Colorado.

<sup>\*</sup>statistically different

Rabies is a disease most often transmitted through the bite of a rabid animal, such as bats, raccoons, skunks, and foxes. Rabies is fatal nearly 100% of the time once symptoms are present. A vaccine is available and used when a person is bitten by an animal that may be rabid or could have been exposed to a bat. In 2017, three bats tested positive for rabies in Mesa County. Therefore, even though human rabies deaths are rare in the United States, there is still a risk of being exposed.

All positive rabies tests occurred between the months of **MAY** and **OCTOBER** in 2017.

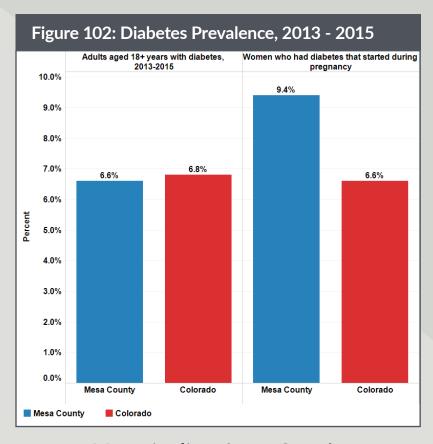
Average Number of Animal Tests per Year, 2008-2017

30

#### Positive Animal Rabies Tests, 2008-2017



Since 2008, all positive animal rabies tests in Mesa County were in **BATS**.



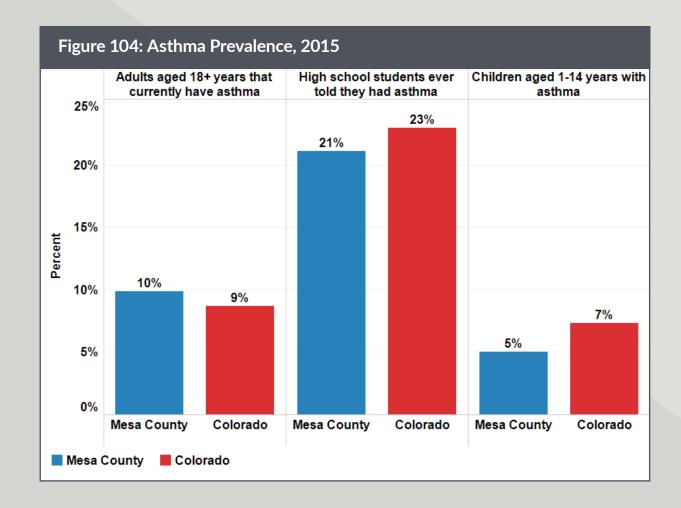
According to the U.S. National Center for Health Statistics, chronic disease is a disease that lasts three months or longer. Diabetes is a chronic disease that impacts how your body changes food into energy, which can lead to serious health problems, such as heart disease, vision loss, and kidney disease. Heart disease is the leading cause of death for men and women in the United States. Risk factors include high blood pressure, high LDL cholesterol, and smoking. Being overweight and physical inactivity are risk factors for diabetes and heart disease.

Hospitalizations for three cardiovascular concerns are LOWER in Mesa County than the state.

Chronic diseases account for MOST of the health care costs in the U.S.

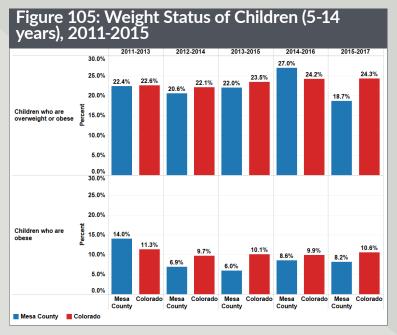
#### FIGURE 103: AGE-ADJUSTED RATE OF HOSPITALIZATION FOR SELECTED MORBIDITIES PER 100,000, 2013-2015

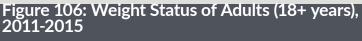
Morbidity	Mesa County	Colorado	Significant Difference (p<0.05)
Heart disease	1,836.6	2,156.9	Better
Congestive heart failure	540.5	666.5	Better
Acute myocardial infarction	143.7	155.3	Not Different
Stroke	206.5	250.6	Better

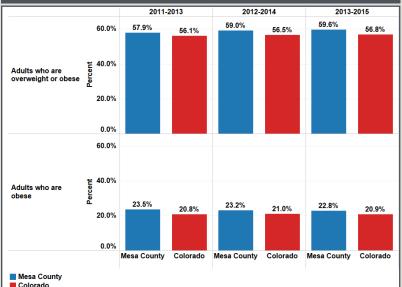


Asthma is a disease that affects the lungs, causing episodes of wheezing, breathlessness, and chest tightness. Risk of developing asthma is related to genetic factors and associated with exposure to allergens and other environmental conditions.

1 in 5 high school students report having asthma.

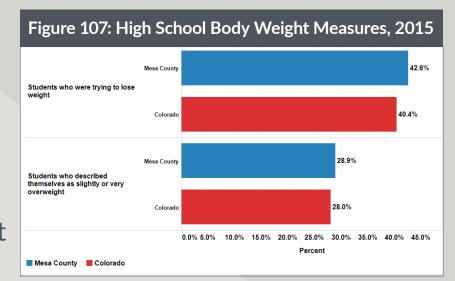


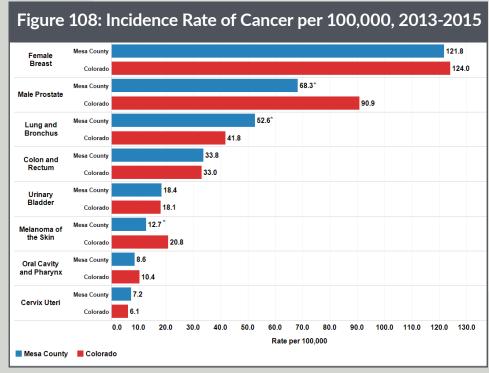




Nearly
3 out of
5 Mesa
County
adults are
overweight
or obese.

Although Colorado is one of the fittest states in the nation, obesity is a concern. Childhood obesity puts kids at risk of poor health and quality of life due to conditions such as: high blood pressure and cholesterol, breathing problems including asthma and sleep apnea, psychological problems like anxiety and depression, low self-esteem, and social problems. Children who are obese are more likely to be obese as an adult. Obesity in adulthood is associated with increased risk of all causes of death, heart disease, type 2 diabetes, sleep apnea, mental illness, stroke, and other serious disease and health conditions.



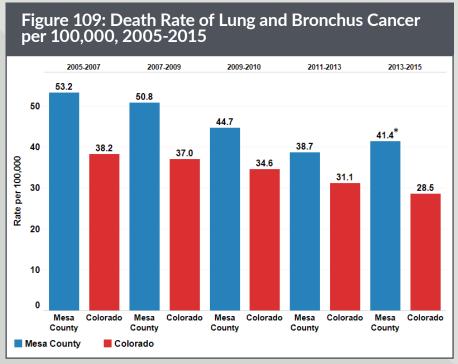


<sup>\*</sup>statistically different

There were **MORE** lung and bronchus cancer cases in Mesa County than in Colorado.

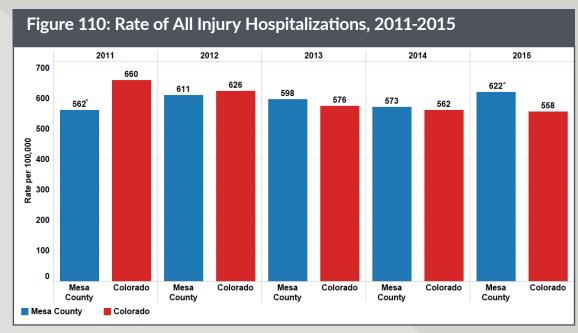
There were **FEWER** cases of prostate cancer and melanoma of the skin in Mesa County than in Colorado.

Although the cancer rate is declining, it still remains a leading cause of illness and death in Mesa County. Half of cancer deaths are preventable through healthy lifestyle and dietary choices, screenings, and vaccinations. Screenings are an important tool in detecting colon, cervical, and breast cancers. Screening rates for these cancers are below the Healthy People 2020 goals.



<sup>\*</sup>statistically different

#### Injury

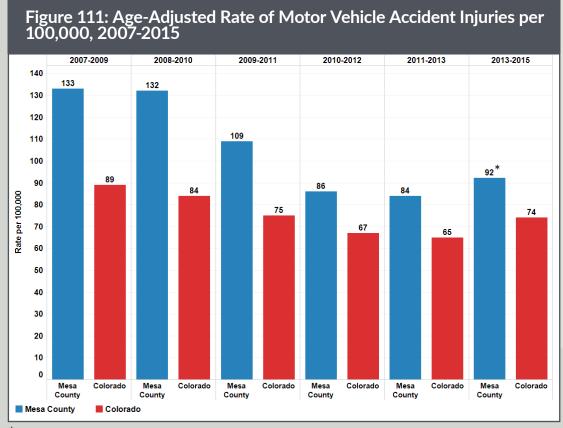


\*statistically different

Injury is a public health concern that can be fatal or nonfatal and unintentional or intentional. Causes of unintentional injury include falls, motor vehicle crashes, and poisonings. Unintentional injury is the fourth leading cause of death in the United States and the leading cause for individuals aged 1 to 44 years. Suicide and homicide, examples of intentional injury, are the second and third leading causes of death for individuals ages 15 to 34 years.

Between 2011-2015, the rates of injury hospitalizations in Mesa County were HIGHER for individuals ages 15 to 19 and 25 to 44 years, but LOWER for individuals aged 65+ years compared to Colorado.

## **Injury**



Injuries from motor vehicle accidents are **DECLINING**, but Mesa County remains statistically higher than Colorado.

Between 2012-2016, there was an average of **2,570** motor vehicle crashes per year.

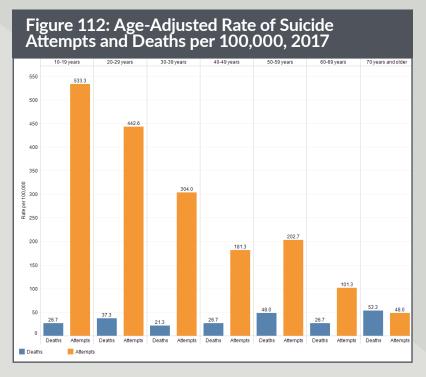
In 2016, among crashes resulting in injury or death, the **TOP** contributing factors were: 1) Other\*\* (25%) 2) DUI (19%) 3) Aggressive Driving (19%).

<sup>\*\*</sup>Other includes smaller categories such as medical condition, unfamiliarity with area, emotionally upset driver.



<sup>\*</sup>statistically different

#### **Suicide Attempts**



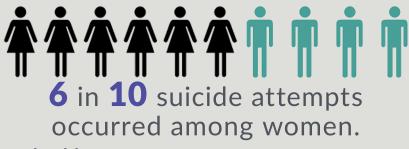
#### Age-adjusted rate of suicide hospitalizations

per 100,000 population, 2013-2015

115.7\* Mesa County \* statistically different

52.0

Colorado



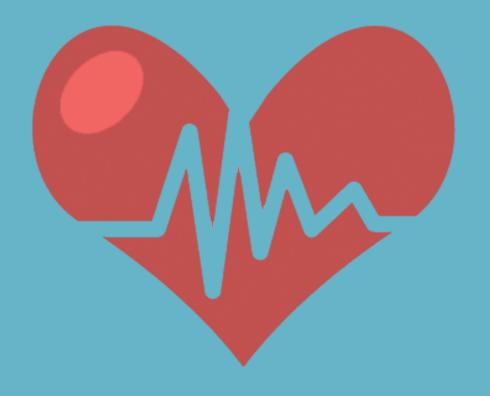
To better characterize this critical issue in the community, MCPH piloted an active surveillance system in local emergency departments to track suicide attempts for six months. Data collection occurred between April 2, 2017 and September 16, 2017 from the five hospitals located in the county. Real-time data was utilized to inform community prevention efforts.

#### MORE THAN 50% of

suicide attempts resulting in an emergency department visit in 2017 were among people younger than **30** years.

The highest rate of suicide attempts was observed among young people ages 10-19 years.

# **MORTALITY**



#### **Causes of Death**

## FIGURE 113: AGE-ADJUSTED RATE PER 100,000 OF THE TOP TEN CAUSES OF DEATH IN MESA COUNTY COMPARED TO COLORADO, 2016

Cause of Death	Mesa County	Colorado	Significant Difference (p<0.05)
All causes	757.1	661.2	Worse
Heart disease	170.2	127.4	Worse
Malignant neoplasms	142.1	136.0	Not Different
Unintentional injuries*	60.0	50.1	Not Different
Chronic lower respiratory disease	59.0	45.8	Worse
Alzheimer's disease	51.1	34.0	Worse
Cerebrovascular disease	36.3	34.6	Not Different
Suicide	34.7	20.3	Worse
Diabetes mellitus	19.4	16.1	Not Different
Chronic liver disease and cirrhosis	17.4	12.3	Not Different
Other disease of respiratory system	14.2	9.5	Not Different

<sup>\*</sup>Though the incidence rate is higher, fewer deaths were caused by unintentional injuries than chronic lower respiratory disease and Alzheimer's disease.

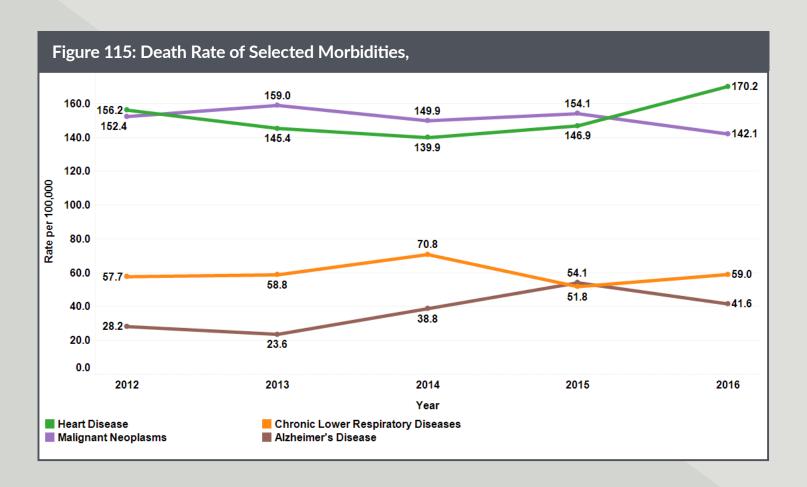
# **HEART DISEASE** is the leading cause of death in Mesa County.

Years of potential life lost (YPLL) helps to understand the illnesses and injuries occurring in our community that are disproportionately taking healthy years off of our lives.

## FIGURE 114: AGE-ADJUSTED RATE PER 100,000 OF THE LEADING CAUSES OF YPLL BY AGE 65 IN MESA COUNTY COMPARED TO COLORADO, 2016

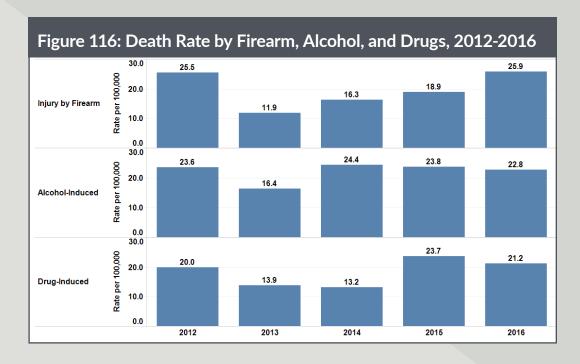
Cause	Mesa County	Colorado
Unintentional injuries	1,074.6	794.5
Malignant neoplasms	542.4	443.9
Suicide	524.7	473.9
Heart disease	272.5	299.4
Perinatal period conditions	246.9	251.2
Chronic liver disease and cirrhosis	171.5	146.9
Homicide/legal intervention	173.2	127.9
Congenital malformations, deformations, and chromosomal abnormalities	129.0	146.7
Chronic lower respiratory diseases	250.6	44.1

#### **Causes of Death**



#### HEART DISEASE and MALIGNANT NEOPLASMS (cancer) continue to be the leading causes of death in Mesa County and the United States.

#### **Causes of Death**



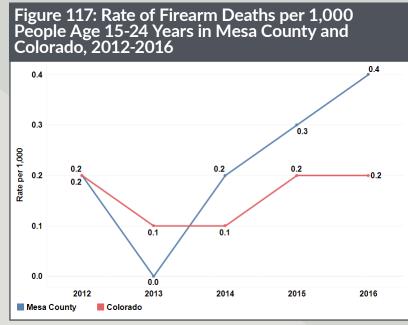
Deaths by firearm, alcohol-induced and drug-induced, are

INCREASING.

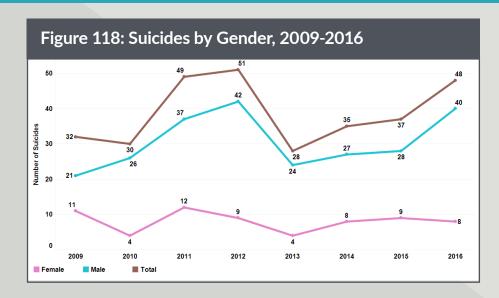
The rate of firearm deaths among young adults in Mesa County

**INCREASED** 

between 2013 and 2016.



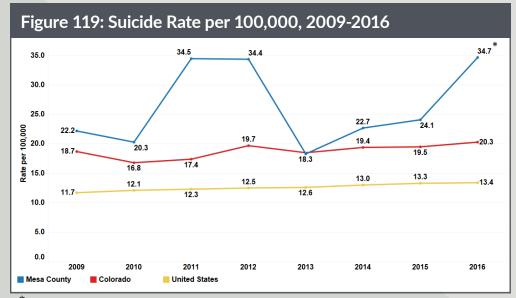
### **Deaths by Suicide**



Suicide is the 10th leading cause of death in the United States and the 7th in Mesa County. This important public health issue in Mesa County has lasting effects on individuals, families, and the community as a whole. This is a complex issue, influenced by a multitude of factors. One common factor is the presence of alcohol and/or drugs at the time of death. In 2016, Mesa County saw a peak in deaths by suicide. There were 48 deaths, which was a 30% increase from 37 in 2015.

The suicide death rate in Mesa County is more than **DOUBLE** the rate of the United States and is consistently **HIGHER** than the state.

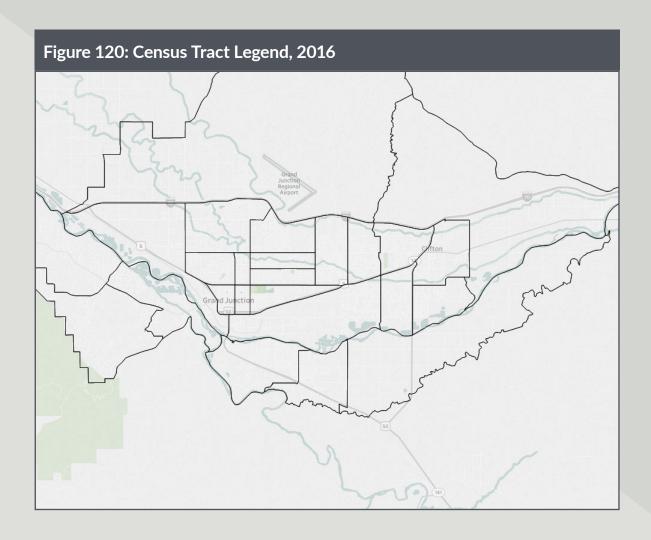
More **MEN** die by suicide than women each year.



<sup>\*</sup>statistically different

#### **Appendix I: Census Tract**

Census Tract - Small, relatively permanent statistical subdivisions of a county that are updated by local participants prior to each decennial census as part of the Census Bureau's Participant Statistical Areas Program. The primary purpose of census tracts is to provide a stable set of geographic units for the presentation of statistical data.



### **Appendix II: Social Capital**

Mesa County Public Health administered a Social Capital Survey in 2017 that was completed by more than 1,500 residents. The survey collected information about social capital experiences along with information about respondent demographics and residence location. Collected data were analyzed to answer three questions:

- Components of Social Capital: What are the components of social capital that are most meaningful to local residents?
- Influence of Demographics: Are these components influenced by residents' age, gender, education, and income?
- Social Capital and Geographics: Are these components influenced by where in the area residents reside?

A score for each survey respondent was calculated for six social capital components (connections with friends, connections with family and relatives, connections with people elsewhere, community trust, community approval, and participation in community life). Components were identified with factor analysis, a statistical method that reviews the correlations among survey items and groups them when respondents answer in the same way. The social capital component scores were added together for an indicator of combined social capital.

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16	MESA COUNTY SNAPSHOT: POPULATION, MEDIAN AGE	U.S. CENSUS BUREAU (2016). ACS DEMOGRAPHIC AND HOUSING ESTIMATES, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP05&PRODTYPE=TABLE
17	FIGURE 1: MEDIAN HOUSEHOLD INCOME BY ZIP CODE	U.S. CENSUS BUREAU (2016). INCOME IN THE PAST 12 MONTHS (IN 2016 INFLATION-ADJUSTED DOLLARS), 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1901&PRODTYPE=TABLE
18	EMPLOYED AND UNEMPLOYED	U.S. CENSUS BUREAU (2016). EMPLOYMENT STATUS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTM-L?PID=ACS_16_5YR_S2301&PRODTYPE=TABLE
18	UNINSURED	U.S. CENSUS BUREAU (2016). SELECTED CHARACTERISTICS OF HEALTH INSURANCE COVERAGE IN THE UNITED STATES, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S2701&PRODTYPE=TABLE
18	SNAP BENEFITS	U.S. CENSUS BUREAU (2016). SELECTED ECONOMIC CHARACTERISTICS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP03&PRODTYPE=TABLE
18	HOUSEHOLDS WITH CHILDREN YOUNGER THAN 18 YEARS	U.S. CENSUS BUREAU (2016). HOUSEHOLDS AND FAMILIES, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW. XHTML?PID=ACS_16_5YR_S1101&PRODTYPE=TABLE
18	FIGURE 2: PERCENTAGE OF FAMILIES LIVING BELOW POVERTY LEVEL	U.S. CENSUS BUREAU (2016). SELECTED ECONOMIC CHARACTERISTICS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP03&PRODTYPE=TABLE.
19	FIGURE 3: POPULATION BY AGE AND JURISDICTION AREA	U.S. CENSUS BUREAU (2016). AGE AND SEX, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTM-L?PID=ACS_16_5YR_S0101&PRODTYPE=TABLE
20	FIGURE 4: POPULATION BY GENDER	U.S. CENSUS BUREAU (2016). AGE AND SEX, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTM-L?PID=ACS_16_5YR_S0101&PRODTYPE=TABLE
21	LIFE EXPECTANCY DATA	VIZHUB. (2018) US HEALTH MAP. [DATA QUERY]. RETRIEVED FROM: HTTPS://VIZHUB.HEALTHDATA.ORG/ SUBNATIONAL/USA
22	FIGURE 5: POPULATION BY RACE	U.S. CENSUS BUREAU (2016). ACS DEMOGRAPHIC AND HOUSING ESTIMATES, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP05&PRODTYPE=TABLE
22	PERCENT HISPANIC OR LATINO	U.S. CENSUS BUREAU (2016). ACS DEMOGRAPHIC AND HOUSING ESTIMATES, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP05&PRODTYPE=TABLE
23	FIGURE 6: PERCENT OF SPANISH-SPEAKING HOUSEHOLDS	U.S. CENSUS BUREAU (2016). LINGUISTIC ISOLATION, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTM-L?PID=ACS_16_5YR_S1602&PRODTYPE=TABLE
24	FIGURE 7: ADULTS BY EDUCATIONAL ATTAINMENT	U.S. CENSUS BUREAU (2016). EDUCATIONAL ATTAINMENT, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW. XHTML?PID=ACS_16_5YR_S1501&PRODTYPE=TABLE

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25	FIGURE 8: COMBINED SOCIAL CAPITAL BY ZIP CODE	MESA COUNTY PUBLIC HEALTH. (2017). MESA COUNTY HEALTH DEPARTMENT SOCIAL CAPITAL SURVEY DATA ANALYSIS SIX COMPONENTS OF SOCIAL CAPITAL. GRAND JUNCTION, CO: JERRY EVANS
26	POPULATION AND MEDIAN AGE	U.S. CENSUS BUREAU (2016). AGE AND SEX, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTM-L?PID=ACS_16_5YR_S0101&PRODTYPE=TABLE
26	MEDIAN HOUSEHOLD INCOME	U.S. CENSUS BUREAU (2016). MEDIAN HOUSEHOLD INCOME IN THE PAST 12 MONTHS (IN 2016 INFLATION-AD- JUSTED DOLLARS) UNIVERSE: HOUSEHOLDS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTM- L?PID=ACS_16_5YR_B19013&PRODTYPE=TABLE
26	EMPLOYED AND UNEMPLOYED	U.S. CENSUS BUREAU (2016). EMPLOYMENT STATUS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S2301&PRODTYPE=TABLE
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26	HOUSEHOLDS PAYING 30% OR MORE ON RENT	U.S. CENSUS BUREAU (2016). SELECTED HOUSING CHARACTERISTICS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP04&PRODTYPE=TABLE
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27	EARNINGS	U.S. CENSUS BUREAU (2016). EARNINGS IN THE PAST 12 MONTHS (IN 2016 INFLATION-ADJUSTED DOLLARS), 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S2001&PRODTYPE=TABLE
27	FIGURE 10: ADULTS BY EDUCATIONAL ATTAINMENT	U.S. CENSUS BUREAU (2016). EDUCATIONAL ATTAINMENT, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1501&PRODTYPE=TABLE
28	POPULATION AND MEDIAN AGE	U.S. CENSUS BUREAU (2016). AGE AND SEX, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTM-L?PID=ACS_16_5YR_S0101&PRODTYPE=TABLE
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29	FIGURE 12: ADULTS BY EDUCATIONAL ATTAINMENT	U.S. CENSUS BUREAU (2016). EDUCATIONAL ATTAINMENT, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1501&PRODTYPE=TABLE
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32	POPULATION AND MEDIAN AGE	U.S. CENSUS BUREAU (2016). AGE AND SEX, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S0101&PRODTYPE=TABLE
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32	HOUSEHOLDS PAYING 30% OR MORE ON RENT	U.S. CENSUS BUREAU (2016). SELECTED HOUSING CHARACTERISTICS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP04&PRODTYPE=TABLE
32	HOUSEHOLDS WITH CHILDREN YOUNGER THAN 18 YEARS	U.S. CENSUS BUREAU (2016). HOUSEHOLDS AND FAMILIES, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1101&PRODTYPE=TABLE
32	FIGURE 15: PERCENTAGE OF FAMILIES LIVING BELOW POVERTY LEVEL	U.S. CENSUS BUREAU (2016). SELECTED ECONOMIC CHARACTERISTICS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP03&PRODTYPE=TABLE
32	SNAP BENEFITS	U.S. CENSUS BUREAU (2016). SELECTED ECONOMIC CHARACTERISTICS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP03&PRODTYPE=TABLE.
33	EARNINGS	U.S. CENSUS BUREAU (2016). EARNINGS IN THE PAST 12 MONTHS (IN 2016 INFLATION-ADJUSTED DOLLARS), 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S2001&PRODTYPE=TABLE.

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33	FIGURE 16: ADULTS BY EDUCATIONAL ATTAINMENT	U.S. CENSUS BUREAU (2016). EDUCATIONAL ATTAINMENT, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1501&PRODTYPE=TABLE
35	FIGURE 17: FASTEST GROWING OCCUPATIONS	MESA COUNTY WORKFORCE CENTER. (2018). MESA COUNTY ECONOMIC OVERVIEW, MARCH 2018. GRAND JUNCTION, CO
36	FIGURE 18: HIGHEST PAYING INDUSTRIES	MESA COUNTY WORKFORCE CENTER. (2018). MESA COUNTY ECONOMIC OVERVIEW, MARCH 2018. GRAND JUNCTION, CO
37	FIGURE 19: HIGHEST PAYING OCCUPATIONS	MESA COUNTY WORKFORCE CENTER. (2018). MESA COUNTY ECONOMIC OVERVIEW, MARCH 2018. GRAND JUNCTION, CO
38	FIGURE 20: LARGEST INDUSTRIES	MESA COUNTY WORKFORCE CENTER. (2018). MESA COUNTY ECONOMIC OVERVIEW, MARCH 2018. GRAND JUNCTION, CO
39	FIGURE 21: LARGEST OCCUPATIONS	MESA COUNTY WORKFORCE CENTER. (2018). MESA COUNTY ECONOMIC OVERVIEW, MARCH 2018. GRAND JUNCTION, CO
39	CALLOUT "56% OF JOBS"	MESA COUNTY WORKFORCE CENTER, PERSONAL COMMUNICATION, MAY 22, 2018
40	FIGURE 22: EDUCATIONAL ATTAINMENT BY ETHNICITY	U.S. CENSUS BUREAU (2016). EDUCATIONAL ATTAINMENT, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1501&PRODTYPE=TABLE
41	FIGURE 23: EDUCATIONAL ATTAINMENT BY GENDER	U.S. CENSUS BUREAU (2016). EDUCATIONAL ATTAINMENT, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1501&PRODTYPE=TABLE
42	FIGURE 24: HIGH SCHOOL DROP OUT BY RACE/ ETHNICITY	COLORADO DEPARTMENT OF EDUCATION. (2016-2017). DROPOUT RATES BY DISTRICT AND RACE/ETHNICITY [DATA FILE]. RETRIEVED FROM HTTPS://WWW.CDE.STATE.CO.US/CDEREVAL/DROPOUTCURRENT
43	FIGURE 25: PERCENT OF HIGH SCHOOL STUDENTS THAT DROPPED OUT OF SCHOOL BY SCHOOL YEAR	COLORADO DEPARTMENT OF EDUCATION. (2016-2017). DROPOUT RATES BY DISTRICT AND RACE/ETHNICITY [DATA FILE]. RETRIEVED FROM HTTPS://WWW.CDE.STATE.CO.US/CDEREVAL/DROPOUTCURRENT
43	CALLOUT: "3 IN 4"	COLORADO DEPARTMENT OF EDUCATION. (2016-2017). GRADUATION AND COMPLETERS BY DISTRICT, GENDER, AND RACE/ETHNICITY [DATA FILE]. RETRIEVED FROM HTTP://WWW.CDE.STATE.CO.US/CDEREVAL/GRADRATECURRENT
44	FIGURE 26: PERCENT OF ADULTS WHO ARE UNEMPLOYED BY EDUCATIONAL ATTAINMENT	U.S. CENSUS BUREAU (2016). EMPLOYMENT STATUS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S2301&PRODTYPE=TABLE
44	TEXT "HIGHER EDUCATION MAY"	MA WINKLEBY, DE JATULIS, E FRANK, AND SP FORTMANN. STANFORD CENTER FOR RESEARCH IN DISEASE PREVENTION, STANFORD UNIVERSITY SCHOOL OF MEDICINE, PALO ALTO, CA 94304-1885. "SOCIOECONOMIC STATUS AND HEALTH: HOW EDUCATION, INCOME, AND OCCUPATION CONTRIBUTE TO RISK FACTORS FOR CARDIOVASCULAR DISEASE.", AMERICAN JOURNAL OF PUBLIC HEALTH 82, NO. 6 (JUNE 1, 1992): PP. 816-820

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45	FIGURE 27: EDUCATIONAL ATTAINMENT OF A HIGH SCHOOL DIPLOMA/EQUIVALENT OR HIGHER	U.S. CENSUS BUREAU (2016). EDUCATIONAL ATTAINMENT, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1501&PRODTYPE=TABLE
46	FIGURE 28: SALES TAX	"TAX FOUNDATION. (N.D.). STATE AND LOCAL SALES TAX RATES 2018. [DATA MAP]. RETRIEVED APRIL 06, 2018, FROM HTTPS://TAXFOUNDATION.ORG/STATE-AND-LOCAL-SALES-TAX-RATES-2018/ SALES, USE, AND LODGING TAXES. (N.D.). RETRIEVED APRIL 06, 2018, FROM HTTP://WWW.GJCITY.ORG/CITY-GOVERNMENT/FINANCIAL-OPERATIONS/SALES-USE-AND-LODGING-TAXES/ AVAALARA. (N.D.). RETRIEVED APRIL 06, 2018, FROM HTTPS://WWW1.AVALARA.COM/TAXRATES/EN/STATE-RATES/COLORADO/CITIES/FRUITA/AVAALARA. (N.D.). RETRIEVED APRIL 06, 2018, FROM HTTPS://WWW1.AVALARA.COM/TAXRATES/EN/STATE-RATES/COLORADO/CITIES/PALISADE/"
46	CALLOUT "COLORADO HAS THE"	TAX FOUNDATION. (N.D.). STATE AND LOCAL SALES TAX RATES 2018. RETRIEVED APRIL 06, 2018, FROM HTTPS://TAXFOUNDATION.ORG/STATE-AND-LOCAL-SALES-TAX-RATES-2018/
46	TEXT "A SALES TAX"	U.S. DEPARTMENT OF THE TREASURY. (2018, MAY 25). RESOURCE CENTER: STATE AND LOCAL TAXES. RETRIEVED FROM HTTPS://WWW.TREASURY.GOV/RESOURCE-CENTER/FAQS/TAXES/PAGES/STATE-LOCAL. ASPX
47	CHILD CARE DESERT	CENTER FOR AMERICAN PROGRESS. (2018). [INTERACTIVE MAP SHOWING CHILD CARE DESERTS BY CENSUS TRACT]. CHILD CARE DESERT MAP. RETRIEVED FROM HTTPS://CHILDCAREDESERTS.ORG/?STATE=CO
48	FIGURE 29: PERCENT OF THE 3 AND 4 YEAR OLD POPULATION ENROLLED IN SCHOOL	U.S. CENSUS BUREAU (2016). SCHOOL ENROLLMENT, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1401&PRODTYPE=TABLE
49	FIGURE 30: RATIO OF POPULATION TO SERVICE PROVIDERS	ROBERT WOOD JOHNSON FOUNDATION. (2018). COUNTY HEALTH RANKINGS & ROADMAPS. RETRIEVED FROM HTTP://WWW.COUNTYHEALTHRANKINGS.ORG/APP/COLORADO/2018/RANKINGS/MESA/COUNTY/OUTCOMES/OVERALL/SNAPSHOT
49	LAW ENFORCEMENT PER CAPITA: GRAND JUNCTION	GOVERNING. (2016). POLICE EMPLOYMENT, OFFICERS PER CAPITA RATES FOR U.S. CITIES. RETRIEVED FROM HTTP://WWW.GOVERNING.COM/GOV-DATA/SAFETY-JUSTICE/POLICE-OFFICERS-PER-CAPITA-RATES-EMPLOYMENT-FOR-CITY-DEPARTMENTS.HTML
49	LAW ENFORCEMENT PER CAPITA: MESA COUNTY	MESA COUNTY SHERIFF'S OFFICE, PERSONAL COMMUNICATION, MAY 14, 2018
50	FIGURE 31: SPENDING PER CHILD (K-12)	EDUCATION WEEK. (2018). EDUCATION COUNTS. [DATA QUERY]. RETRIEVED FROM: HTTP://WWW. EDCOUNTS.ORG/CREATETABLE/STEP1.PHP?CLEAR=1
50	CHILD CARE COSTS	SNYDER, M. (2018, MARCH). SNAPSHOT OF MESA COUNTY PANEL. PRESENTATION AT THE ASPEN INSTITUTE ASCEND FELLOWS MEETING, GRAND JUNCTION, CO
50	FIGURE 32: REGIONAL COST VARIATIONS OF THE COST OF EARLY CARE AND EDUCATION BY QUALITY RATING LEVEL	EARLY MILESTONES COLORADO. (2017). BEARING THE COST OF EARLY CARE AND EDUCATION IN COLORADO: AN ECONOMIC ANALYSIS. COLORADO: FRANKO M, BRODSKY A, WACKER A, ESTRADA M
50	TEXT "ALTHOUGH COST OF"	EARLY MILESTONES COLORADO. (2017). BEARING THE COST OF EARLY CARE AND EDUCATION IN COLORADO: AN ECONOMIC ANALYSIS. COLORADO: FRANKO M, BRODSKY A, WACKER A, ESTRADA M

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51	FIGURE 33: SELF-SUFFICIENCY STANDARD FOR MESA COUNTY	PEARCE, DM (JUNE 2015). THE SELF-SUFFICIENCY STANDARD FOR COLORADO 2015. RETRIEVED FROM HTTP://CCLPONLINE.ORG/WP-CONTENT/UPLOADS/2015/06/SSS-FINAL.PDF
51	TEXT "THE SELF-SUFFICIENCY"	PEARCE, DM (JUNE 2015). THE SELF-SUFFICIENCY STANDARD FOR COLORADO 2015. RETRIEVED FROM HTTP://CCLPONLINE.ORG/WP-CONTENT/UPLOADS/2015/06/SSS-FINAL.PDF
51	FEDERAL POVERTY LEVEL FOR HOUSEHOLD SIZE	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, OFFICE OF THE ASSISTANT SECRETARY FOR PLANNING AND EVALUATION. (2018, MAY 22). POVERTY GUIDELINES. RETRIEVED FROM HTTPS://ASPE.HHS.GOV/POVERTY-GUIDELINES
54	FIGURE 34: RATE OF HEALTHY FOOD OUTLETS VS. FAST FOOD RESTAURANTS	COLORADO DEPARTMENT OF HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
54	CALLOUT "HAVING HEALTHY FOODS"	DIVISION OF NUTRITION, PHYSICAL ACTIVITY, AND OBESITY, NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION. (2017, MARCH 14). HEALTHY FOOD ENVIRONMENTS. RETRIEVED FROM HTTPS://WWW.CDC.GOV/OBESITY/STRATEGIES/HEALTHY-FOOD-ENV.HTML
55	FIGURE 35: NUMBER OF RESIDENTS PER BEER, WINE, AND LIQUOR STORE BY ZIP CODE	U.S. CENSUS BUREAU. (2015). 2015 ZIP CODE BUSINESS PATTERNS. RETRIEVED FROM: HTTPS://FACTFINDER. CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=BP_2015_00CZ2&PROD-TYPE=TABLE
56	FIGURE 36: RADON MAP AND LEGEND	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2018). COLORADO RADON ZONES. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-RADON-ZONES
56	CALLOUT "4 IN 10"	COLORADO ENVIRONMENTAL PUBLIC HEALTH TRACKING. (2018). [DATA VISUALIZATION OF INDOOR RADON TEST RESULTS BY COUNTY IN COLORADO]. AVERAGE INDOOR RADON RESULTS CHART (2005-2017). RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/COEPHT/RADON-DATA
56	TEXT "RADON, THE SECOND"	NATIONAL CENTER FOR ENVIRONMENTAL HEALTH, DIVISION OF ENVIRONMENTAL HAZARDS AND HEALTH EFFECTS. (2018, JANUARY 8). PROTECT YOURSELF AND YOUR FAMILY FROM RADON. RETRIEVED FROM HTTPS://WWW.CDC.GOV/FEATURES/PROTECT-HOME-RADON/INDEX.HTML
56	FIGURE 37: HOUSEHOLD RADON TESTS	COLORADO DEPARTMENT OF HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
57	FIGURE 38: LEAD RISK MAP	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT, TARGETED LEAD OUTREACH TOOL. (2018). [DATA VISUALIZATION OF LEAD EXPOSURE RISK BY COUNTY IN COLORADO]. LEAD EXPOSURE RISK. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/LEAD-OUTREACH-TOOL
57	TEXT "LEAD EXPOSURE CAN"	NATIONAL CENTER FOR ENVIRONMENTAL HEALTH, DIVISION OF EMERGENCY AND ENVIRONMENTAL HEALTH SERVICES. (2017, JANUARY 26). PREVENT CHILDHOOD LEAD POISONING. RETRIEVED FROM HTTPS://WWW.CDC.GOV/NCEH/LEAD/INFOGRAPHIC.HTM
58	FIGURE 39: NON-ATTAINMENT	ENVIRONMENTAL PROTECTION AGENCY.(2017). AIR DATA - CONCENTRATION PLOT. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.EPA.GOV/OUTDOOR-AIR-QUALITY-DATA/AIR-DATA-CONCENTRATION-PLOT

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59	FIGURE 40: COMMUTE TO WORK OR SCHOOL	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
59	TEXT "OF THE 426"	CITY OF GRAND JUNCTION (2015). 2015 BICYCLE FRIENDLY COMMUNITY APPLICATION. GRAND JUNCTION, CO
60	FIGURE 41: GRAND VALLEY TRANSIT MAP	REMIX AUTOMATIC TITLE VI ANALYSIS (V2.0)
60	TEXT "APPROXIMATELY 44% OF"	REMIX AUTOMATIC TITLE VI ANALYSIS (V2.0)
61	FIGURE 42: AVERAGE RENT	GRAND JUNCTION HOUSING AUTHORITY, PERSONAL COMMUNICATION, [DATA FILE], MAY 3, 2018
61	FIGURE 43: VACANCY RATE	THROUPE, R, VON STROH, J (2018). FIRST QUARTER 2018 COLORADO MULTI-FAMILY HOUSING VACANCY AND RENTAL SURVEY. DENVER, CO: COLORADO DIVISION OF HOUSING AND COLORADO ECONOMIC AND MANAGEMENT ASSOCIATES
61	RENTAL DATA	THROUPE, R, VON STROH, J (2018). FIRST QUARTER 2018 COLORADO MULTI-FAMILY HOUSING VACANCY AND RENTAL SURVEY. DENVER, CO: COLORADO DIVISION OF HOUSING AND COLORADO ECONOMIC AND MANAGEMENT ASSOCIATES
63	LARGEST INDUSTRIES FOR EMPLOYMENT, NUMBER OF JOBS, AVERAGE EARNINGS	MESA COUNTY WORKFORCE CENTER. (2018). MESA COUNTY ECONOMIC OVERVIEW, MARCH 2018. GRAND JUNCTION, CO
63	TEXT "EMPLOYMENT PROVIDES THE"	ROBERT WOOD JOHNSON FOUNDATION. (2013, JANUARY 13). STABLE JOBS = HEALTHIER LIVES INFOGRAPHIC. RETRIEVED FROM HTTPS://WWW.RWJF.ORG/EN/LIBRARY/INFOGRAPHICS/INFOGRAPHICSTABLE-JOBSHEALTHIER-LIVES.HTML
64	FIGURE 44: UNEMPLOYMENT RATE	BUREAU OF LABOR AND STATISTICS. (2017). LOCAL AREA UNEMPLOYMENT STATISTICS: MULTI-SCREEN DATA SERCH. [DATA TABLE]. RETRIEVED FROM HTTPS://WWW.BLS.GOV/DATA/#UNEMPLOYMENT
65	FIGURE 45: UNEMPLOYMENT BY CENSUS TRACT AMONG POPULATION OLDER THAN 16 YEARS	U.S. CENSUS BUREAU (2016). EMPLOYMENT STATUS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S2301&PRODTYPE=TABLE
66	WORKFORCE DATA	MESA COUNTY WORKFORCE CENTER, PERSONAL COMMUNICATION, APRIL 30, 2018
67	FIGURE 46: POVERTY BY AGE	U.S. CENSUS BUREAU (2016). SMALL AREA INCOME AND POVERTY ESTIMATES. [DATA TABLE]. RETRIEVED FROM HTTPS://WWW.CENSUS.GOV/DATA-TOOLS/DEMO/SAIPE/SAIPE.HTML?S_APPNAME=SAIPE&MAP_YEARSELECTOR=2016&MAP_GEOSELECTOR=AA_C
67	TEXT "POVERTY IMPACTS PEOPLE'S"	U.S. CENSUS BUREAU (2016). SMALL AREA INCOME AND POVERTY ESTIMATES. [DATA TABLE]. RETRIEVED FROM HTTPS://WWW.CENSUS.GOV/DATA-TOOLS/DEMO/SAIPE/SAIPE.HTML?S_APPNAME=SAIPE&MAP_YEARSELECTOR=2016&MAP_GEOSELECTOR=AA_C

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67	TEXT "FOR ADULTS, POVERTY"	NATIONAL CENTER FOR HEALTH STATISTICS. (2012). HEALTH, UNITED STATES, 2011: WITH SPECIAL FEATURE ON SOCIOECONOMIC STATUS AND HEALTH. HYATSVILLE, MD 2012
68	FIGURE 47: MEDIAN HOUSEHOLD INCOME	U.S. CENSUS BUREAU (2016). INCOME IS THE PAST 12 MONTHS (IN 2016 INFLATION-ADJUSTED DOLLARS). RETRIEVED FROM HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW. XHTML?PID=ACS_16_5YR_S1901&PRODTYPE=TABLE
68	FIGURE 48: CHILDREN LIVING IN POVERTY	U.S. CENSUS BUREAU (2016). POVERTY STATUS IN THE PAST 12 MONTHS OF RELATED CHILDREN UNDER 18 YEARS BY FAMILY TYPE BY AGE OF RELATED CHILDREN UNDER 18 YEARS, UNIVERSE: RELATED CHILDREN UNDER 18 YEARS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_B17006&PRODTYPE=TABLE
68	TEXT "GROWING UP IN"	NATIONAL CENTER FOR HEALTH STATISTICS. (2012). HEALTH, UNITED STATES, 2011: WITH SPECIAL FEATURE ON SOCIOECONOMIC STATUS AND HEALTH. HYATSVILLE, MD 2012
69	FIGURE 49: PERCENT OF WHITE HOUSEHOLDS LIVING BELOW THE POVERTY LINE BY CENSUS TRACT	U.S. CENSUS BUREAU (2016). POVERTY STATUS IN THE PAST 12 MONTHS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1701&PRODTYPE=TABLE
70	FIGURE 50: PERCENT OF HISPANIC HOUSEHOLDS LIVING BELOW THE POVERTY LINE BY CENSUS TRACT	U.S. CENSUS BUREAU (2016). POVERTY STATUS IN THE PAST 12 MONTHS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S1701&PRODTYPE=TABLE
71	FIGURE 51: HOUSEHOLDS RECEIVING FOOD STAMPS	U.S. CENSUS BUREAU (2016). FOOD STAMPS/SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP), 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM HTTPS://FACTFINDER. CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_S2201&PRODTYPE=TABLE
71	TEXT "FOOD SECURITY MEANS"	UNITED STATES DEPARTMENT OF AGRICULTURE, ECONOMIC RESEARCH SERVICE. (2017, SEPTEMBER 6). OVERVIEW: FOOD SECURITY IN THE U.S. RETRIEVED FROM HTTPS://WWW.ERS.USDA.GOV/TOPICS/FOOD-NU-TRITION-ASSISTANCE/FOOD-SECURITY-IN-THE-US/
71	TEXT: "INDIVIDUALS LIVING WITH"	UNITED STATES DEPARTMENT OF AGRICULTURE. (2017, OCTOBER 04). USDA'S LABELS DESCRIBE RANGES OF FOOD SECURITY. RETRIEVED FROM HTTPS://WWW.ERS.USDA.GOV/TOPICS/FOOD-NUTRITION-ASSISTANCE/FOOD-SECURITY-IN-THE-US/DEFINITIONS-OF-FOOD-SECURITY/
71	CALLOUT "SNAP IS ASSOCIATED"	EXECUTIVE OFFICE OF THE PRESIDENT OF THE UNITED STATES. (2015). LONG-TERM BENEFITS OF THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM. RETRIEVED FROM HTTPS://OBAMAWHITEHOUSE. ARCHIVES.GOV/SITES/WHITEHOUSE.GOV/FILES/DOCUMENTS/SNAP_REPORT_FINAL_NONEMBARGO.PDF
72	FIGURE 52: PERCENT OF HOUSEHOLDS WITH PUBLIC ASSISTANCE INCOME OR FOOD STAMPS/SNAP IN THE PAST 12 MONTHS BY CENSUS TRACT	U.S. CENSUS BUREAU (2016). PUBLIC ASSISTANCE INCOME OR FOOD STAMPS/SNAP IN THE PAST 12 MONTHS FOR HOUSEHOLDS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTM-L?PID=ACS_16_5YR_B19058&PRODTYPE=TABLE
73	FIGURE 53: HIGH SCHOOL STUDENTS AND FOOD SECURITY MEASURES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). HEALTHY KIDS COLORADO SURVEY. [DATA REQUEST]. HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/HKCS
73	FIGURE 54: FREE AND REDUCED SCHOOL LUNCH	COLORADO DEPARTMENT OF EDUCATION. (2017-2018). 2017-2018 K-12 FREE AND REDUCED LUNCH ELIGIBILITY BY DISTRICT. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.CDE.STATE.CO.US/CDEREVAL/PUPILCURRENT

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73	TEXT "SKIPPING OR MISSING"	NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION, DIVISION OF POPULATION HEALTH. (2014, MAY). HEALTH AND ACADEMIC ACHIEVEMENT. RETRIEVED FROM HTTPS://WWW.CDC.GOV/HEALTHYYOUTH/HEALTH_AND_ACADEMICS/PDF/HEALTH-ACADEMIC-ACHIEVEMENT.PDF
74	FIGURE 55: HOUSING COSTS 30% OR MORE OF INCOME	U.S. CENSUS BUREAU (2016). SELECTED HOUSING CHARACTERISTICS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP04&PRODTYPE=TABLE
74	TEXT "STABLE HOUSING MEANS"	JOHN HOPKINS CENTER FOR HEALTH EQUITY. (2018). STABLE HOUSING. RETRIEVED FROM HTTPS://WWW. JHSPH.EDU/RESEARCH/CENTERS-AND-INSTITUTES/JOHNS-HOPKINS-CENTER-FOR-HEALTH-EQUITY/ABOUT/ INFLUENCES_ON_HEALTH/STABLE_HOUSING.HTML
75	FIGURE 56: GROSS RENT GREATER THAN 30% OF HOUSEHOLD INCOME BY CENSUS TRACT	U.S. CENSUS BUREAU (2016). SELECTED HOUSING CHARACTERISTICS, 2012-2016 AMERICAN COMMUNITY SURVEY 5-YEAR ESTIMATES. RETRIEVED FROM: HTTPS://FACTFINDER.CENSUS.GOV/FACES/TABLESERVICES/JSF/PAGES/PRODUCTVIEW.XHTML?PID=ACS_16_5YR_DP04&PRODTYPE=TABLE
76	TEXT "HOMELESSNESS REFERS TO"	NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL. (2018). WHAT IS THE OFFICIAL DEFINITION OF HOMELESSNESS? RETRIEVED FROM HTTPS://WWW.NHCHC.ORG/FAQ/OFFICIAL-DEFINITION-HOMELESSNESS/
76	TEXT "SEVERAL COUNTIES IN"	COLORADO COALITION FOR THE HOMELESS (2017). 2017 HOMELESS POINT IN TIME STUDY, SHELTERED AND UNSHELTERED COUNT. RETRIEVED FROM HTTPS://WWW.COLORADOCOALITION.ORG/SITES/DEFAULT/FILES/2017-06/2017%20PIT%20REPORT.PDF
76	CALLOUT: "1 IN 5: AND "TOTAL NUMBER OF"	COLORADO COALITION FOR THE HOMELESS (2017). 2017 HOMELESS POINT IN TIME STUDY, SHELTERED AND UNSHELTERED COUNT. RETRIEVED FROM HTTPS://WWW.COLORADOCOALITION.ORG/SITES/DEFAULT/FILES/2017-06/2017%20PIT%20REPORT.PDF
77	FIGURE 57: DISABILITIES OF HOMELESS PERSONS	COLORADO COALITION FOR THE HOMELESS (2017). 2017 HOMELESS POINT IN TIME STUDY, SHELTERED AND UNSHELTERED COUNT. RETRIEVED FROM HTTPS://WWW.COLORADOCOALITION.ORG/SITES/DEFAULT/FILES/2017-06/2017%20PIT%20REPORT.PDF
77	CALLOUTS	COLORADO COALITION FOR THE HOMELESS (2017). 2017 HOMELESS POINT IN TIME STUDY, SHELTERED AND UNSHELTERED COUNT. RETRIEVED FROM HTTPS://WWW.COLORADOCOALITION.ORG/SITES/DEFAULT/FILES/2017-06/2017%20PIT%20REPORT.PDF
79	FIGURE 58: MOST PEOPLE CAN BE TRUSTED	MESA COUNTY PUBLIC HEALTH. (2017). SOCIAL CAPITAL SURVEY. GRAND JUNCTION, CO
79	FIGURE 59: I FEEL CLOSE TO PEOPLE IN THE AREA WHERE I LIVE	MESA COUNTY PUBLIC HEALTH. (2017). SOCIAL CAPITAL SURVEY. GRAND JUNCTION, CO
79	CALLOUTS	MESA COUNTY PUBLIC HEALTH. (2017). SOCIAL CAPITAL SURVEY. GRAND JUNCTION, CO
80	FIGURE 60: WHEN THERE IS A PROBLEM THAT AFFECTS ME IN MY COMMUNITY, I PARTICIPATE IN A SOLUTION FOR THE PROBLEM	MESA COUNTY PUBLIC HEALTH. (2017). SOCIAL CAPITAL SURVEY. GRAND JUNCTION, CO
81	FIGURE 61: PERCENT OF ADULTS WHO VOTED IN THE 2016 GENERAL ELECTION BY ZIP CODE	MESA COUNTY ELECTIONS, PERSONAL COMMUNICATION, [DATA FILE], APRIL 6, 2018
82	FIGURE 62: VOTERS BY AGE	MESA COUNTY ELECTIONS, PERSONAL COMMUNICATION, [DATA FILE], APRIL 6, 2018

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82	CALLOUT: "NEARLY 7 IN"	MESA COUNTY CLERK AND RECORDER. (2017). ELECTION SUMMARY REPORT. RETRIEVED FROM HTTPS://CLERK.MESACOUNTY.US/SITEASSETS/ELECTIONSUMMARYREPORT.PDF
82	FIGURE 63: VOTERS BY GENDER	MESA COUNTY ELECTIONS, PERSONAL COMMUNICATION, [DATA FILE], APRIL 6, 2018
83	FIGURE 64: HIGH SCHOOL STUDENTS EXPERIENCING DISCRIMINATION	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). HEALTHY KIDS COLORADO SURVEY. [DATA REQUEST]. HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/HKCS
84	FIGURE 65: MALTREATMENT OF CHILDREN YOUNGER THAN 18 YEARS	THE ANNIE E. CASEY FOUNDATION. KIDS COUNT DATA CENTER. RETRIEVED FROM HTTPS://DATACENTER. KIDSCOUNT.ORG/DATA/TABLES/445-CHILD-ABUSE-RATE-PER-1000#DETAILED
84	TEXT: "CHILD ABUSE OR"	NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL, DIVISION OF VIOLENCE PREVENTION. (2016, APRIL 5). CHILD ABUSE AND NEGLECT: DEFINITIONS. RETRIEVED FROM HTTPS://WWW.CDC.GOV/VIOLEN-CEPREVENTION/CHILDMALTREATMENT/DEFINITIONS.HTML
84	FIGURE 66: MESA COUNTY ABUSE AND NEGLECT HOTLINE	SNYDER, M. (2018, MARCH). SNAPSHOT OF MESA COUNTY PANEL. PRESENTATION AT THE ASPEN INSTITUTE ASCEND FELLOWS MEETING, GRAND JUNCTION, CO
85	FIGURE 67: PROPERTY CRIME RATES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
85	TEXT "PROPERTY CRIME INCLUDES"	U.S. DEPARTMENT OF JUSTICE, FEDERAL BUREAU OF INVESTIGATION. (2016). PROPERTY CRIME. RETRIEVED FROM HTTPS://UCR.FBI.GOV/CRIME-IN-THE-U.S/2016/CRIME-IN-THE-U.S2016/TOPIC-PAGES/ PROPERTY-CRIME
86	FIGURE 68: VIOLENT CRIME RATES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
86	TEXT "VIOLENT CRIME IS"	U.S. DEPARTMENT OF JUSTICE, FEDERAL BUREAU OF INVESTIGATION. (2016). VIOLENT CRIME. RETRIEVED FROM HTTPS://UCR.FBI.GOV/CRIME-IN-THE-U.S/2016/CRIME-IN-THE-U.S2016/TOPIC-PAGES/VIOLENT-CRIME
87	FIGURE 69: ADULT AND JUVENILE ARREST RATES	COLORADO BUREAU OF INVESTIGATION. (2017). AGENCY STATISTICS. [DATA TABLE]. RETRIEVED FROM HTTP://CRIMEINCO.CBI.STATE.CO.US/CIC2K15/
89	FIGURE 70: RESIDENTS WITH HEALTH INSURANCE	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
89	TEXT "THE AFFORDABLE CARE"	HEALTHCARE.GOV. (2017). MINIMUM ESSENTIAL COVERAGE. RETRIEVED FROM HTTPS://WWW.HEALTHCARE. GOV/GLOSSARY/MINIMUM-ESSENTIAL-COVERAGE/
90	FIGURE 71: SATISFACTION WITH INSURANCE PLANS	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA

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91	FIGURE 72: LOST COVERAGE OR SWITCHED FROM ONE TO ANOTHER	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
91	FIGURE 73: PERCENT OF ADULTS AND CHILDREN WHO ARE UNINSURED	U.S. CENSUS BUREAU (2016). SMALL AREA HEALTH INSURANCE ESTIMATES. [DATA TABLE]. RETRIEVED FROM HTTPS://WWW.CENSUS.GOV/DATA-TOOLS/DEMO/SAHIE/SAHIE.HTML
92	FIGURE 74: ELIGIBLE BUT NOT ENROLLED	COLORADO HEALTH INSTITUTE. (2017). ELIGIBLE BUT NOT ENROLLED (EBNE) TOTAL. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
93	FIGURE 75: PERCENT WHO HAVE DENTAL INSURANCE	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
96	FIGURE 76: BARRIERS TO HEALTH CARE	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
96	TEXT "ACCESS TO COMPREHENSIVE"	OFFICE OF DISEASE PREVENTION AND HEALTH PROMOTION. (2017). HEALTHY PEOPLE 2020: ACCESS TO HEALTH SERVICES. RETRIEVED FROM HTTPS://WWW.HEALTHYPEOPLE.GOV/2020/TOPICS-OBJECTIVES/TOPIC/ACCESS-TO-HEALTH-SERVICES
97	FIGURE 77: VIEWS ON THE CURRENT HEALTH SYSTEM	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
98	FIGURE 78: EMERGENCY ROOM UTILIZATION IN THE PAST 12 MONTHS	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
99	FIGURE 79: ROUTINE HEALTH CARE IN THE PAST 12 MONTHS	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
100	FIGURE 80: ORAL HEALTH MEASURES	COLORADO HEALTH INSTITUTE. (2017). COLORADO HEALTH ACCESS SURVEY - REGIONAL DATA. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COLORADOHEALTHINSTITUTE.ORG/DATA
100	CALLOUT "FEWER CHILDREN (1 TO 14 YEARS)"	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
101	FIGURE 81: MENTAL HEALTH INDICATORS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
101	TEXT "MENTAL HEALTH IS A STATE OF"	HEALTHYPEOPLE.GOV. (2018, APRIL 6). MENTAL HEALTH. RETRIEVED FROM HTTPS://WWW.HEALTHYPEOPLE. GOV/2020/LEADING-HEALTH-INDICATORS/INFOGRAPHIC/MENTAL-HEALTH-4
102	FIGURE 82: MENTAL HEALTH STATUS OF HIGH SCHOOL STUDENTS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). HEALTHY KIDS COLORADO SURVEY. [DATA REQUEST]. HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/HKCS

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103	DATA ON NEED FOR PSYCHIATRIC CARE	WEST SPRINGS HOSPITAL, PERSONAL COMMUNICATION, FEBRUARY 20, 2018
104	FIGURE 83: ANNUAL AVERAGE NUMBER OF CHILD CARE FACILITIES BY LICENSING TYPE	COLORADO OFFICE OF EARLY CHILDHOOD, PERSONAL COMMUNICATION, [DATA FILE], FEBRUARY 12, 2018
105	FIGURE 84: QUALITY RATING AND IMPROVEMENT SYSTEM (QRIS) LEVELS	COLORADO OFFICE OF EARLY CHILDHOOD. (2017). REPORTS AND DATA. [DATA FILE]. HTTP://COLORADOOFFI-CEOFEARLYCHILDHOOD.FORCE.COM/OEC/OEC_RESOURCES?P=RESOURCES&S=REPORTS-AND-DATA&LANG=EN
106	FIGURE 85: ENGLISH AND MATH PROFICIENCY	MESA COUNTY VALLEY SCHOOL DISTRICT 51, PERSONAL COMMUNICATION, [DATA FILE], MAY 23, 2017
108	FIGURE 86: FRUIT AND VEGETABLE CONSUMPTION BY AGE GROUP	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
108	TEXT "GOOD NUTRITION IS"	HHS.GOV, PRESIDENT'S COUNCICL ON SPORTS, FITNESS AND NUTRITION. (2017, JANUARY 26). IMPORTANCE OF GOOD NUTRITION. RETRIEVED FROM HTTPS://WWW.HHS.GOV/FITNESS/EAT-HEALTHY/IMPORTANCE-OF-GOOD-NUTRITION/INDEX.HTML
109	FIGURE 87: PHYSICAL ACTIVITY FOR SELECTED AGE GROUPS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
109	FIGURE 88: PHYSICAL HEALTH INDICATORS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
109	TEXT "IT IS RECOMMENDED"	CENTERS FOR DISEASE CONTROL AND PREVENTION, DIVISION OF CANCER PREVENTION AND CONTROL. (2016, NOVEMBER 29). CURRENT PHYSICAL ACTIVITY GUIDELINES. RETRIEVED FROM HTTPS://WWW.CDC.GOV/CANCER/DCPC/PREVENTION/POLICIES_PRACTICES/PHYSICAL_ACTIVITY/GUIDELINES.HTM
110	CALLOUT "4 IN 10 ADULTS"	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
110	CALLOUT "6 IN 10 ADULTS"	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
110	CALLOUT "HEALTHY PEOPLE 2020"	HEALTHYPEOPLE.GOV. (2018, APRIL 6). IMMUNIZATION AND INFECTIOUS DISEASE. RETRIEVED FROM HTTPS://WWW.HEALTHYPEOPLE.GOV/2020/TOPICS-OBJECTIVES/TOPIC/IMMUNIZATION-AND-INFECTIOUS-DISEASES/OBJECTIVES
111	FIGURE 89: IMMUNIZATION RECORD STATUS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). SCHOOL AND CHILD CARE IMMUNIZATION DATA 2016-2017. RETRIEVED FROM HTTPS://WWW.COHEALTHDATA.DPHE.STATE.CO.US/DATA/DETAILS/1#BYSCHOOLDISTRICT
111	FIGURE 90: IMMUNIZATION RATES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). SCHOOL AND CHILD CARE IMMUNIZATION DATA 2016-2017. RETRIEVED FROM HTTPS://WWW.COHEALTHDATA.DPHE.STATE.CO.US/DATA/DETAILS/1#BYSCHOOLDISTRICT

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112	FIGURE 91: ALCOHOL USE	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
112	FIGURE 92: HIGH SCHOOL PRESCRIPTION DRUG USE	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). HEALTHY KIDS COLORADO SURVEY. [DATA REQUEST]. HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/HKCS
113	FIGURE 93: CURRENT MARIJUANA USE	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). HEALTHY KIDS COLORADO SURVEY. [DATA REQUEST]. HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/HKCS
113	FIGURE 94: TOBACCO USE: CIGARETTES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
113	TEXT "MORE HIGH SCHOOL STUDENTS"	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). HEALTHY KIDS COLORADO SURVEY. [DATA REQUEST]. HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/HKCS
114	FIGURE 95: BEHAVIORS AMONG HIGH SCHOOL STUDENTS WHO HAD SEXUAL INTERCOURSE	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). HEALTHY KIDS COLORADO SURVEY. [DATA REQUEST]. HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/HKCS
114	FIGURE 96: TEEN FERTILITY	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). MESA COUNTY BIRTH AND DEATHS. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COHEALTHDATA.DPHE.STATE.CO.US/
114	TEXT "SEXUAL HEALTH IS DEFINED"	CENTERS FOR DISEASE CONTROL AND PREVENTION, NATIONAL CENTER FOR HIV/AIDS, VIRAL HEPATITIS, STD, AND TB PREVENTION. (2016, OCTOBER 4). SEXUAL HEALTH. RETRIEVED FROM HTTPS://WWW.CDC.GOV/SEXUALHEALTH/DEFAULT.HTML
116	FIGURE 97: INCIDENCE RATE OF TOP FIVE REPORTABLE DISEASES	"COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO ELECTRONIC DISEASE REPORTING SYSTEM. [RESTRICTED DATA QUERY]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/REPORT-A-DISEASE COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). STI/HIV FIVE-YEAR TREND TABLES BY COUNTY. [DATA FILE]. RETRIEVED FROM HTTPS://DRIVE.GOOGLE.COM/DRIVE/FOLDERS/101FT92UHMQ-6F5AEV6DIS2WUN900KU451"
116	FIGURE 98: INCIDENCE RATE OF CAMPYLO- BACTERIOSIS, CHRONIC HEPATITIS C, AND HOSPITALIZED INFLUENZA	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO ELECTRONIC DISEASE REPORTING SYSTEM. [RESTRICTED DATA QUERY]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/REPORT-A-DISEASE
116	TEXT "A COMMUNICABLE DISEASE"	CENTERS FOR DISEASE CONTROL AND PREVENTION, DIVISION OF TUBERCULOSIS ELIMINATION (2010, OCTOBER 8). DEFINITIONS FOR CONSIDERATION. RETRIEVED FROM HTTPS://WWW.CDC.GOV/TB/PROGRAMS/LAWS/MENU/DEFINITIONS.HTM
117	FIGURE 99: RATE OF CHLAMYDIA	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). STI/HIV FIVE-YEAR TREND TABLES BY COUNTY. [DATA FILE]. RETRIEVED FROM HTTPS://DRIVE.GOOGLE.COM/DRIVE/FOLDERS/101FT92UHMQ-6F5AEV6DIS2WUN900KU451
117	FIGURE 100: RATE OF GONORRHEA	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). STI/HIV FIVE-YEAR TREND TABLES BY COUNTY. [DATA FILE]. RETRIEVED FROM HTTPS://DRIVE.GOOGLE.COM/DRIVE/FOLDERS/101FT92UHMQ-6F5AEV6DIS2WUN900KU451
117	TEXT "ANYONE HAVING UNPROTECTED"	NATIONAL CENTER FOR HIV/AIDS, VIRAL HEPATITIS, STD, AND TB PREVENTION, DIVISION OF STD PREVENTION (2017, SEPTEMBER 26). CHLAMYDIA - CDC FACT SHEET (DETAILED). RETRIEVED FROM HTTPS://WWW.CDC.GOV/STD/CHLAMYDIA/STDFACT-CHLAMYDIA-DETAILED.HTM

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118	FIGURE 101: RATE OF SEXUALLY TRANSMITTED DISEASES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). STI/HIV FIVE-YEAR TREND TABLES BY COUNTY. [DATA FILE]. RETRIEVED FROM HTTPS://DRIVE.GOOGLE.COM/DRIVE/FOLDERS/101FT92UHMQ-6F5AEV6DIS2WUN900KU451
118	TEXT "THE INCIDENCE OF GONORRHEA"	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). STI/HIV FIVE-YEAR TREND TABLES BY COUNTY. [DATA FILE]. RETRIEVED FROM HTTPS://DRIVE.GOOGLE.COM/DRIVE/FOLDERS/101FT92UHMQ-6F5AEV6DIS2WUN900KU451
119	DATA ON RABIES TESTING	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO ELECTRONIC DISEASE REPORTING SYSTEM. [RESTRICTED DATA QUERY]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/REPORT-A-DISEASE
120	FIGURE 102: DIABETES PREVALENCE	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
120	FIGURE 103: RATE OF HOSPITALIZATION FOR SELECTED MORBIDITIES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
120	CALLOUT "CHRONIC DISEASES ACCOUNT FOR"	CENTERS FOR DISEASE CONTROL AND PREVENTION, NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION. (2017, JUNE 28). CHRONIC DISEASE OVERVIEW. RETRIEVED FROM HTTPS://WWW.CDC.GOV/CHRONICDISEASE/OVERVIEW/INDEX.HTM
120	TEXT "ACCORDING TO THE U.S"	CENTERS FOR DISEASE CONTROL AND PREVENTION, NATIONAL CENTER FOR HEALTH STATISTICS. (2013) SUMMARY HEALTH STATISTICS FOR THE U.S. POPULATION: NATIONAL HEALTH INTERVIEW SURVEY, 2012. RETRIEVED FROM HTTP://WWW.CDC.GOV/NCHS/DATA/SERIES/SR_10/SR10_259.PDF
121	FIGURE 104: ASTHMA PREVALENCE	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
122	FIGURE 105: WEIGHT STATUS OF CHILDREN	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
122	FIGURE 106: WEIGHT STATUS OF ADULTS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
122	FIGURE 107: HIGH SCHOOL BODY WEIGHT MEASURES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). HEALTHY KIDS COLORADO SURVEY. [DATA REQUEST]. HTTPS://WWW.COLORADO.GOV/PACIFIC/CDPHE/HKCS
122	TEXT "CHILDHOOD OBESITY PUTS KIDS"	NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION, DIVISION OF NUTRITION, PHYSICAL ACTIVITY, AND OBESITY. (2016, DECEMBER 15). CHILDHOOD OBESITY CCAUSES AND CONSEQUENCES. RETRIEVED FROM HTTPS://WWW.CDC.GOV/OBESITY/CHILDHOOD/CAUSES.HTML
123	FIGURE 108: INCIDENCE RATE OF CANCER	COLORADO CENTRAL CANCER REGISTRY, PERSONAL COMMUNICATION, [DATA FILE], MARCH 21, 2017
123	FIGURE 109: DEATH RATE FOR CANCER OF THE LUNGS AND BRONCHUS	COLORADO CENTRAL CANCER REGISTRY, PERSONAL COMMUNICATION, [DATA FILE], MARCH 21, 2017
123	TEXT "HALF OF CANCER DEATHS"	CENTERS FOR DISEASE CONTROL AND PREVENTION, NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION (2017, NOVEMBER 13). CANCER: PREVENTING ONE OF THE NATION'S LEADING CAUSES OF DEATH. RETRIEVED FROM HTTPS://WWW.CDC.GOV/CHRONICDISEASE/RESOURCES/PUBLICATIONS/AAG/DCPC.HTM

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124	FIGURE 110: RATE OF ALL INJURY HOSPITALIZATIONS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). INJURY HOSPITALIZATIONS. [DATA QUERY]. RETRIEVED FROM HTTP://WWW.CHD.DPHE.STATE.CO.US/COHID/TOPICS.ASPX?Q=INJURY_HOSPITALIZATIONS
124	TEXT "UNINTENTIONAL INJURY IS THE FOURTH"	NATIONAL CENTER FOR HEALTH STATISTICS. (2017). NUMBER OF DEATHS FOR LEADING CAUSES OF DEATH. [DATA LIST]. RETRIEVED FROM HTTPS://WWW.CDC.GOV/NCHS/FASTATS/DEATHS.HTM
124	CALLOUT "BETWEEN 2011-2015"	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). INJURY HOSPITALIZATIONS. [DATA QUERY]. RETRIEVED FROM HTTP://WWW.CHD.DPHE.STATE.CO.US/COHID/TOPICS.ASPX?Q=INJURY_HOSPITALIZATIONS
125	FIGURE 111: RATE OF MOTOR VEHICLE ACCIDENT INJURIES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). INJURY HOSPITALIZATIONS. [DATA QUERY]. RETRIEVED FROM HTTP://WWW.CHD.DPHE.STATE.CO.US/COHID/TOPICS.ASPX?Q=INJURY_HOSPITALIZATIONS
125	CALLOUT: "BETWEEN 2012-2016" AND "IN 2016"	COLORADO DEPARTMENT OF TRANSPORTATION (2018). [INTERACTIVE MAP SHOWING COUNTY-LEVEL MOTOR VEHICLE CRASH DATA]. COUNTY DASHBOARD. RETRIEVED FROM HTTPS://COHEALTHVIZ.DPHE.STATE. CO.US/T/PSDVIP-MHPPUBLIC/VIEWS/COLORADOMOTORVEHICLECRASHPROBLEMIDREPORT/COLORADOMOTORVEHICLEDASHBOARD?:IID=3&:ISGUESTREDIRECTFROMVIZPORTAL=Y&:EMBED=Y
126	FIGURE 112: RATE OF SUICIDE ATTEMPTS AND SUICIDE ATTEMPT DATA	MESA COUNTY PUBLIC HEALTH. MESA COUNTY SUICIDE ATTEMPT SURVEILLANCE, [DATA FILE]. APRIL 10, 2018
126	CALLOUT "AGE-ADJUSTED RATE OF SUICIDE HOSPITALIZATIONS"	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
128	FIGURE 113: RATE OF TOP TEN CAUSES OF DEATH	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
128	FIGURE 114: RATE OF LEADING CAUSES OF YPLL	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). COLORADO HEALTH INDICATORS. [DATA FILE ACCESSED ON THE DOWNLOAD COUNTY DATASETS TAB]. RETRIEVED FROM HTTPS://WWW. COLORADO.GOV/PACIFIC/CDPHE/COLORADO-HEALTH-INDICATORS
129	FIGURE 115: DEATH RATE OF SELECTED MORBIDITIES	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). MESA COUNTY BIRTH AND DEATHS. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COHEALTHDATA.DPHE.STATE.CO.US
130	FIGURE 116: DEATH RATE BY FIREARM, ALCOHOL, AND DRUGS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). MESA COUNTY BIRTH AND DEATHS. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COHEALTHDATA.DPHE.STATE.CO.US
130	FIGURE 117: RATE OF FIREARM DEATHS AMONG YOUNG ADULTS	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2012-2016). MESA COUNTY BIRTHS AND DEATHS. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COHEALTHDATA.DPHE.STATE.CO.US
131	FIGURE 118: SUICIDES BY GENDER	MESA COUNTY CORONER. (2017). 2016 SUICIDE REPORT. [DATA FILE]. RETRIEVED FROM HTTPS://CORONER. MESACOUNTY.US/ANNUAL-REPORTS/
131	FIGURE 119: SUICIDE RATE	COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT. (2017). MESA COUNTY BIRTH AND DEATHS. [DATA FILE]. RETRIEVED FROM HTTPS://WWW.COHEALTHDATA.DPHE.STATE.CO.US/
131	TEXT "SUICIDE IS THE 10TH LEADING"	NATIONAL CENTER FOR HEALTH STATISTICS. (2017). NUMBER OF DEATHS FOR LEADING CAUSES OF DEATH. [DATA LIST]. RETRIEVED FROM HTTPS://WWW.CDC.GOV/NCHS/FASTATS/DEATHS.HTM
132	CENSUS TRACT DESCRIPTION	U.S. CENSUS BUREAU. (2018). GEOGRAPHIC TERMS AND CONCEPTS - CENSUS TRACT. RETRIEVED FROM HTTPS://WWW.CENSUS.GOV/GEO/REFERENCE/GTC/GTC_CT.HTML

