



Loup Basin Public Health Department Community Health Assessment

Our Health Tells a Story

As individuals, our health tells a story about our lives. It's more than a medical condition or if we feel sick or well – **where we live, what we have access to, and what choices we make all add up to affect our personal health.**

As a community, our collective health tells an even bigger story, made up of all the individual stories of residents who live here. Understanding the broader story can help us learn more about what we are doing well and where we can better support ourselves, our friends, and our neighbors.

For our story to be one of opportunity, success, and health for all people, we have to start at the very beginning – making sure our community is a place where healthy choices are even possible. When we live in a place that makes healthy choices easier, our behaviors can change. Those daily behaviors form our life stories, building up to our outcomes.

If we work together, we can create better stories for our community, one chapter at a time. We might not be able to write the whole story all at once, but we can build on it over time with small steps to make our community a healthier place to live.

Mobilizing for Action through Planning and Partnerships 2.0

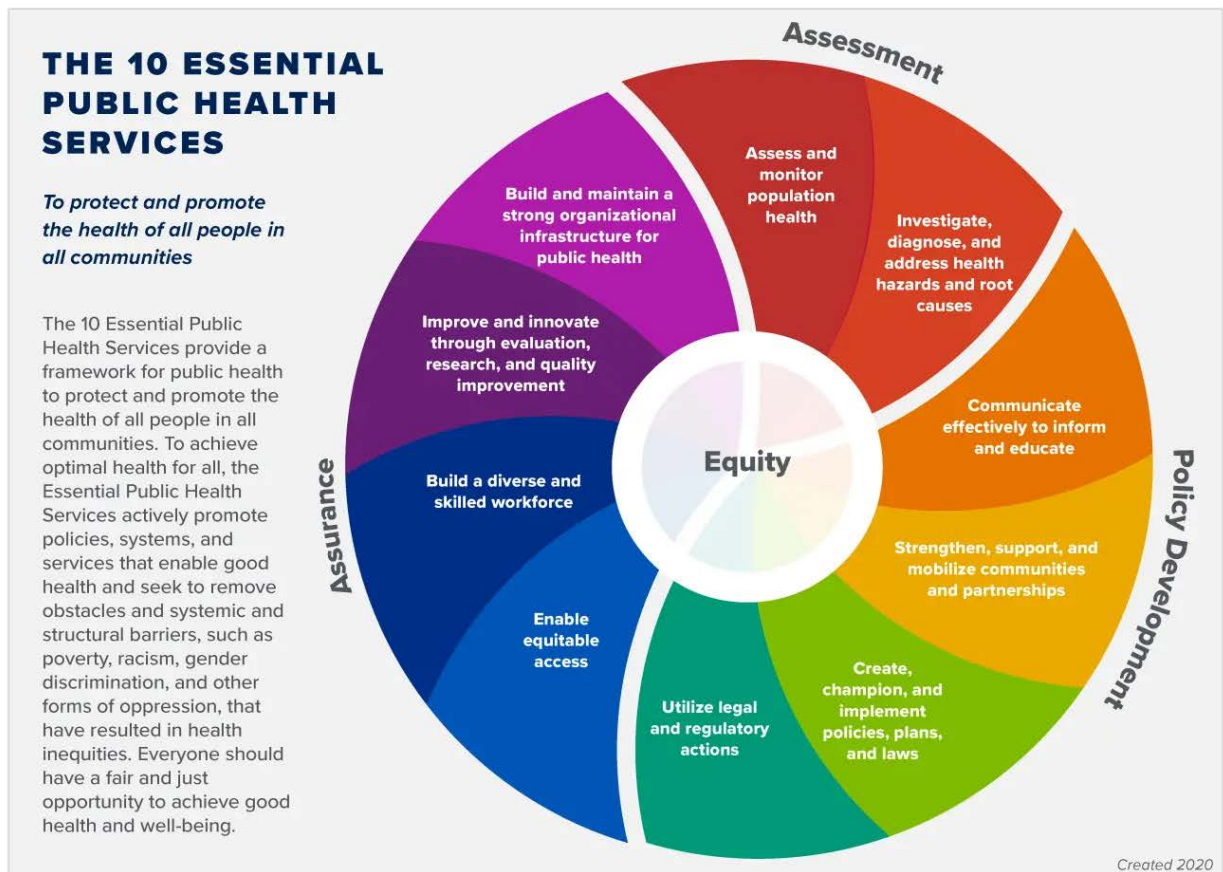
Loup Basin Public Health Department (LBPHD) utilized the MAPP 2.0 framework to identify key priorities and develop strategic approaches for addressing community health concerns. MAPP (Mobilizing for Action through Planning and Partnerships) is a well-established model created by the National Association of County and City Health Officials (NACCHO), widely adopted by communities nationwide since its introduction in 2001. At its core, the MAPP framework fosters collaboration among community members, stakeholders, and healthcare professionals to assess the community's overall health status, identify priority health issues, and recognize both strengths and gaps within the public health system. LBPHD's implementation of MAPP 2.0 involved one interconnected assessment designed to evaluate community health status, health systems, and strategic priorities across the district's service area. Although the MAPP 2.0 has three interrelated processes to assess the overall health, we chose to complete one assessment that encompasses all three in hopes to get better engagement from the community, community partners, healthcare providers and stakeholders. The three assessments are as follows:

- **Community Context Assessment:** The Community-Centered Assessment (CCA) is a qualitative tool that gathers insights from people with lived experience to improve the effectiveness of social systems. It goes beyond identifying needs by focusing on community strengths, values, and culture, ensuring that those most affected by inequities help shape meaningful change.
- **Community Status Assessment:** The Community Status Assessment (CSA) is a community-driven quantitative data assessment aimed at understanding the community's status. It helps communities move upstream and identify inequities beyond health behaviors and outcomes, including their association with social determinants of health and systems of power, privilege, and oppression.
- **Community Partners Assessment:** The Community Partners Assessment (CPA) is an assessment process that allows all the community partners involved in MAPP to critically look at 1) their own individual systems, processes, and capacities and 2) their collective capacity as a network/across all community partners to address health inequities.

What is a Community Health Assessment (CHA)?

One of the main duties of Loup Basin Public Health Department is assessing the health of our community so we know what action to take next. The information in this CHA gives us a better picture of our community's health, so we can work with government officials, partner with other organizations, create policy, and use resources to help improve the health of our residents.

If you're interested in learning more about our role in public health, the graphic below explains more about the services we provide.



via CDC, <https://www.cdc.gov/publichealthgateway/publichealthservices/essentialhealthservices.html>

We all deserve a long, healthy life

Life Expectancy

Our goal is for every person to live a long, healthy life. Unfortunately, this isn't always the case. One way to measure our community health is to look at life expectancy, which tells us how long an average person is expected to live at the time they are born. Communities with a longer life expectancy are usually those with more opportunities for health, whether through environment or personal choices. The life expectancy of residents in Loup Basin district is 79.2 years, which exceeds the national average and is consistent with the state average. Howard County, NE boasts the longest life expectancy at 81.5 years, with Garfield County being the lowest at 76.7 years old, which is below both the state and national averages.



Life Expectancy at Birth

79.2

Years

Loup Basin Public Health Department

79.2

Years

Nebraska

78.8

Years

United States of America

Sources: CDC NCHS USALEEP 2010-2015

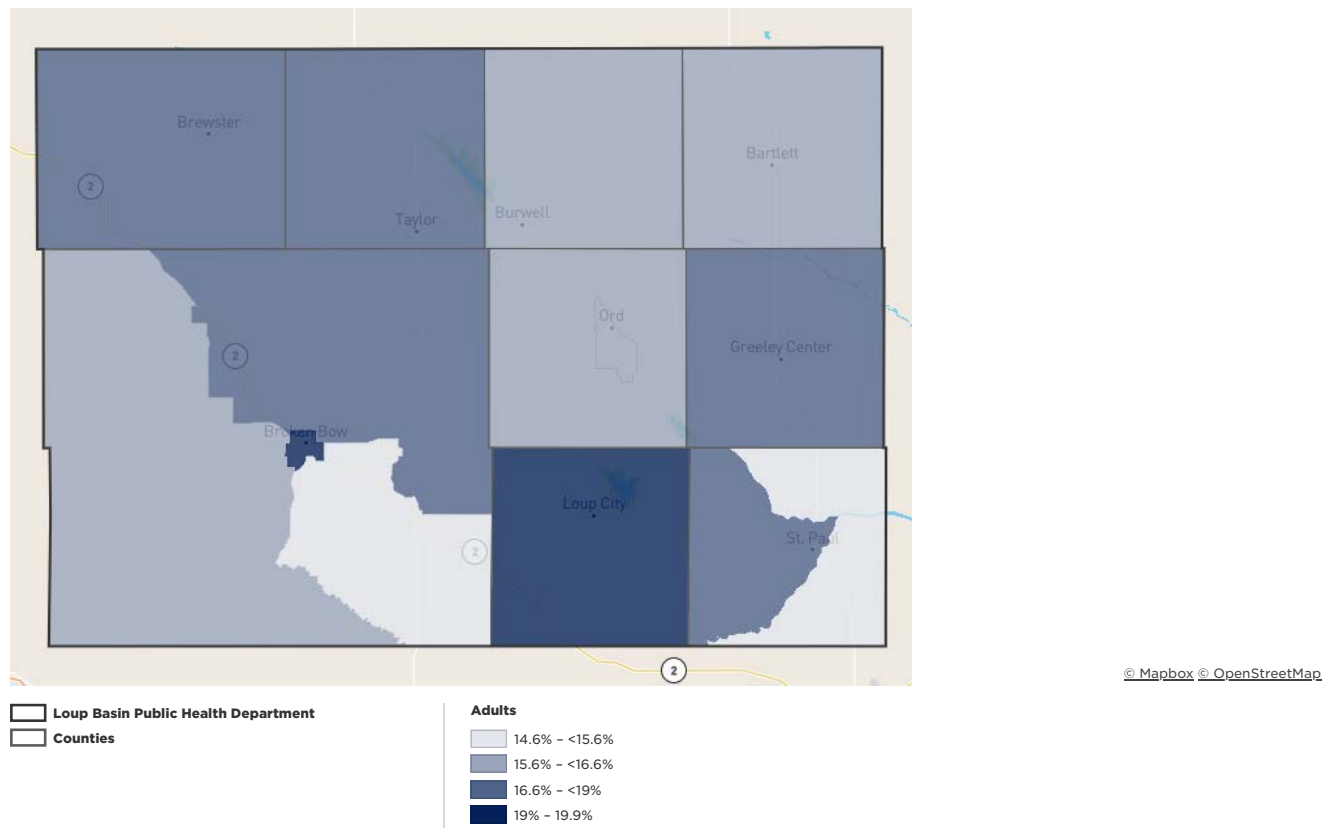
Geography	2010-2015 Life Expectancy at Birth
Blaine County, NE	No data
Custer County, NE	78.7
Garfield County, NE	76.7
Greeley County, NE	79.9
Howard County, NE	81.5
Loup County, NE	No data
Sherman County, NE	77.3
Valley County, NE	79.5
Wheeler County, NE	77.6
Loup Basin Public Health Department	79.2
Nebraska	79.2
United States of America	78.8

Sources: CDC NCHS USALEEP 2010-2015

Fair or Poor Health Among Adults

We can also listen to our neighbors and how they think of their own health. Knowing how many people rank their health as fair or poor is an important piece of assessing our community's well-being. **If our residents don't feel like they're in good health, there's more work to be done** to make sure our community is healthy.

Fair or Poor Health

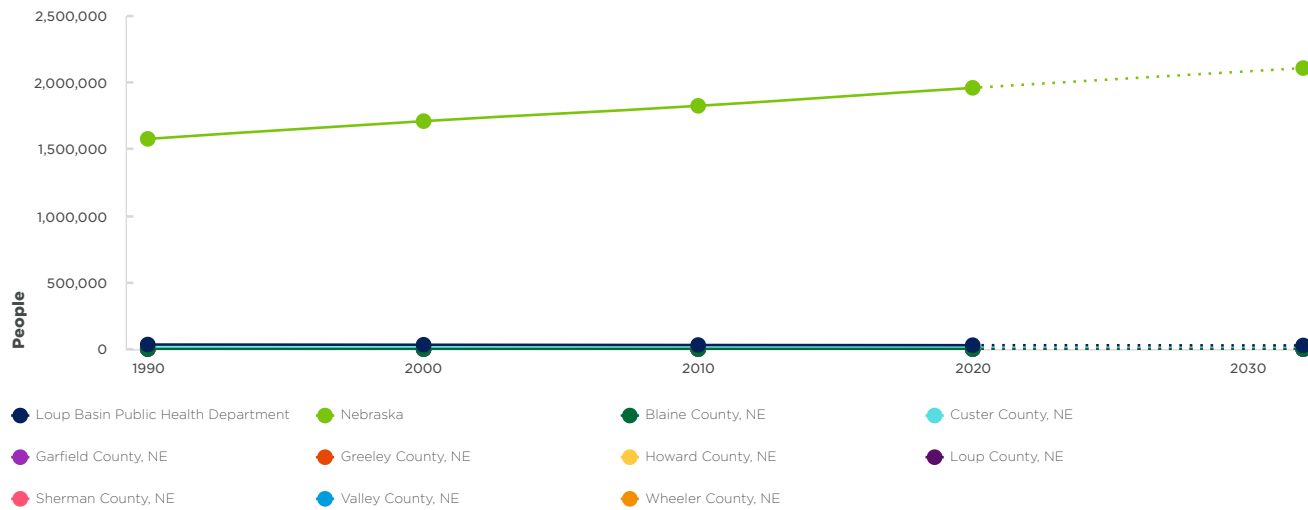


Demographics

Every member of our community should have the chance to live a healthy life. Knowing who lives here helps us figure out how to best serve our community and what extra support might be needed. Factors like age, race and ethnicity, sex, languages spoken, immigrant population, veterans, and disabilities are all important to understand the unique needs of our community.

Total Population

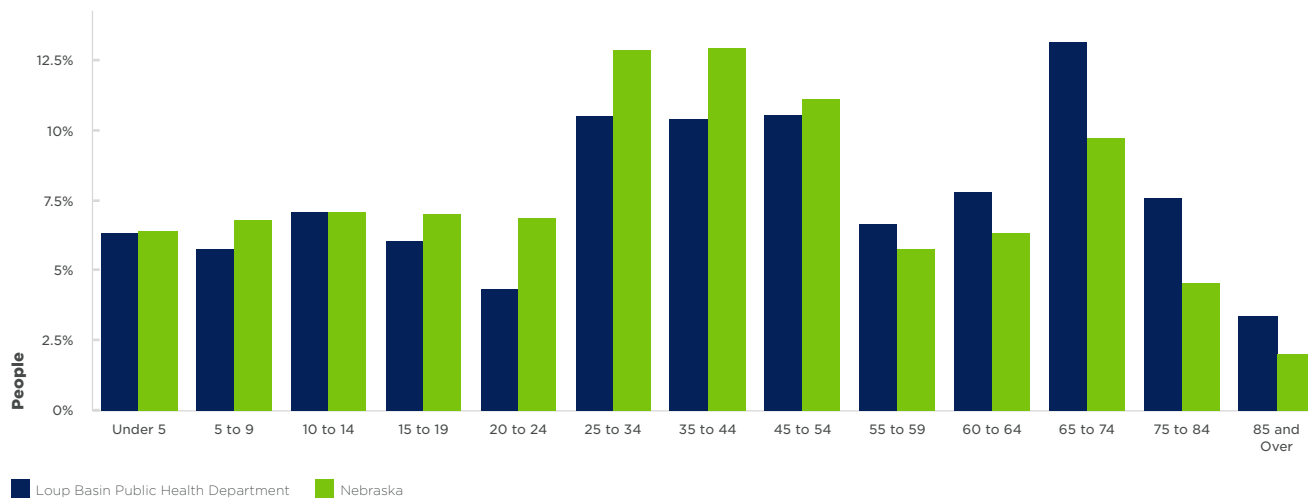
Total Population



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

Age

Population Age Distribution



Sources: US Census Bureau ACS 5-year 2019-2023

▲▼ Data Sources	▲▼ Blaine County, NE	▲▼ Custer County, NE	▲▼ Garfield County, NE	▲▼ Greeley County, NE	▲▼ Howard County, NE	▲▼ Loup County, NE	▲▼ Sherman County, NE
2019-2023 Under 5	5.7%	6.7%	4.8%	6.2%	6.8%	4.4%	5.8%
2019-2023 5 to 9	6.2%	5.7%	6.5%	6.2%	6.1%	5.1%	4.4%
2019-2023 10 to 14	6.5%	7.6%	6.6%	7.2%	7.6%	5.5%	7.3%
2019-2023 15 to 19	1%	6.2%	5.2%	6.5%	6.6%	7.4%	6.9%
2019-2023 20 to 24	2.3%	4.4%	6.1%	4.6%	4.2%	3%	3.8%
2019-2023 25 to 34	9.1%	11.4%	11%	9.6%	10.4%	11.7%	8.7%
2019-2023 35 to 44	5.7%	11.1%	9.8%	10.3%	11.3%	10.5%	9.2%
2019-2023 45 to 54	10.9%	10.3%	9.6%	9.2%	11%	13.7%	11.3%
2019-2023 55 to 59	12.5%	6.6%	3.7%	5.6%	7.3%	6%	6.4%
2019-2023 60 to 64	6%	7.7%	9.2%	8.8%	6.5%	5.7%	8.7%
2019-2023 65 to 74	16.6%	12.3%	12.9%	13.4%	12.5%	20%	15.1%
2019-2023 75 to 84	10.4%	7%	10.3%	7%	6.1%	5.9%	8.6%
2019-2023 85 and Over	7%	3%	4.4%	5.4%	3.6%	1.1%	3.7%

Sources: US Census Bureau ACS 5-year 2019-2023



Child Population

6,996

People ages 0 to 17

Loup Basin Public Health Department

484,750

People ages 0 to 17

Nebraska

Senior Population

7,221

People ages 65+

Loup Basin Public Health Department

322,165

People ages 65+

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

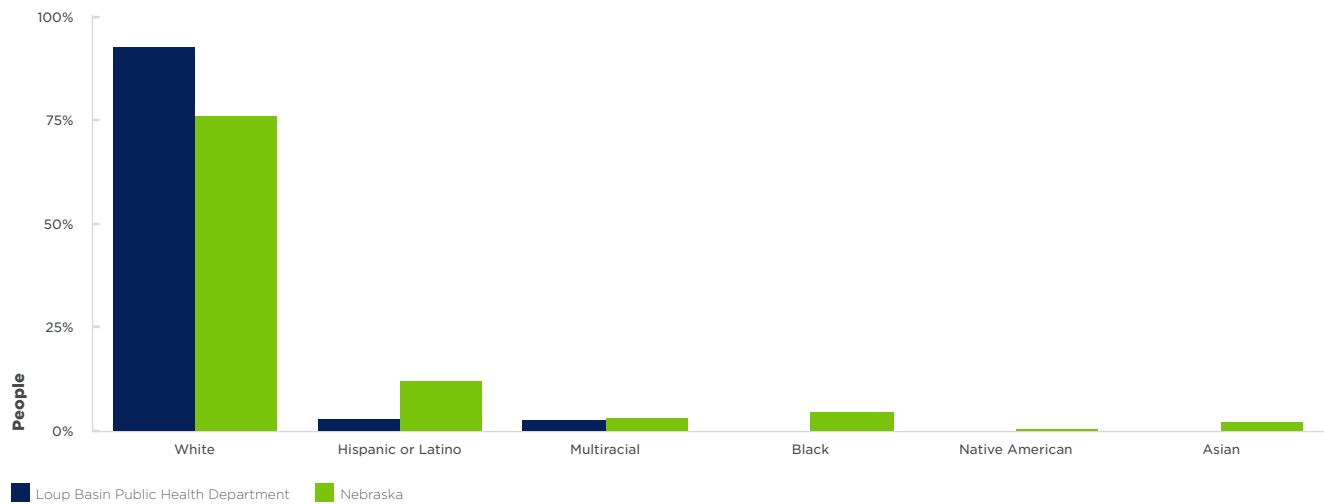
▲▼ Geography	▲▼ 2019-2023 Child Population	▲▼ 2019-2023 Senior Population
Blaine County, NE	75	131
Custer County, NE	2,552	2,347
Garfield County, NE	388	496
Greeley County, NE	519	571
Howard County, NE	1,648	1,440
Loup County, NE	119	152
Sherman County, NE	651	818
Valley County, NE	914	1,013
Wheeler County, NE	130	253
Loup Basin Public Health Department	6,996	7,221
Nebraska	484,750	322,165

Sources: US Census Bureau ACS 5-year 2019-2023

Race & Ethnicity

Loup Basin Public Health Department serves a region that is over 97% White (non-Hispanic), with limited racial and ethnic diversity. While we recognize the need to address health disparities among racially and ethnically diverse populations, current funding mechanisms often prioritize areas with more visible demographic diversity. As a result, rural jurisdictions like ours may face reduced access to resources aimed at addressing health equity, despite having significant disparities driven by geographic isolation, poverty, age, and limited healthcare access.

Race/Ethnicity



Sources: US Census Bureau ACS 5-year 2019-2023

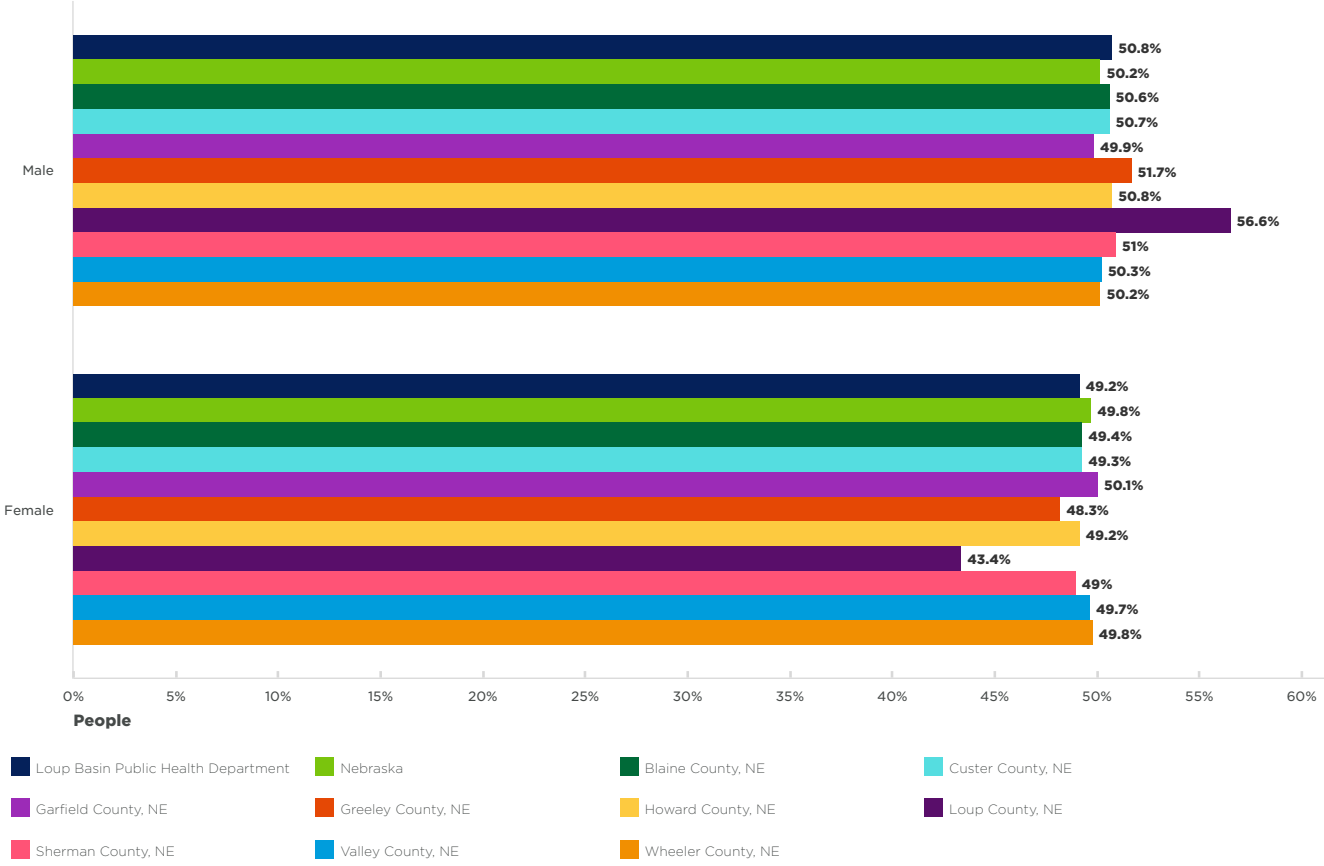
Race/Ethnicity

▲▼ Data Sources	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼	Loup County, NE ▲▼	Sherman County, NE
2019-2023 Black or African American	0%	0.5%	0.4%	0.6%	0.5%	0%	0.6%
2019-2023 Asian	0%	0.1%	0%	0%	0%	0%	0.3%
2019-2023 White	100%	92.4%	96.4%	92.5%	91.8%	86.2%	92.7%
2019-2023 Hispanic or Latino	0%	3.8%	2.1%	2.2%	3%	9.4%	2.6%
2019-2023 Native American	0%	0.6%	0%	0.6%	0%	0.9%	0.1%
2019-2023 Multiracial	0%	2.1%	1.1%	4%	4.7%	3.5%	3.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Sex

Sex



Sources: US Census Bureau ACS 5-year 2019-2023

Immigrants & Languages Spoken

Overall



Immigrant Population

1.6%
of People

Loup Basin Public Health Department

7.7%

of People
Nebraska

Limited English Proficiency

1.3%
of People ages 5+

Loup Basin Public Health Department

5.2%

of People ages 5+
Nebraska

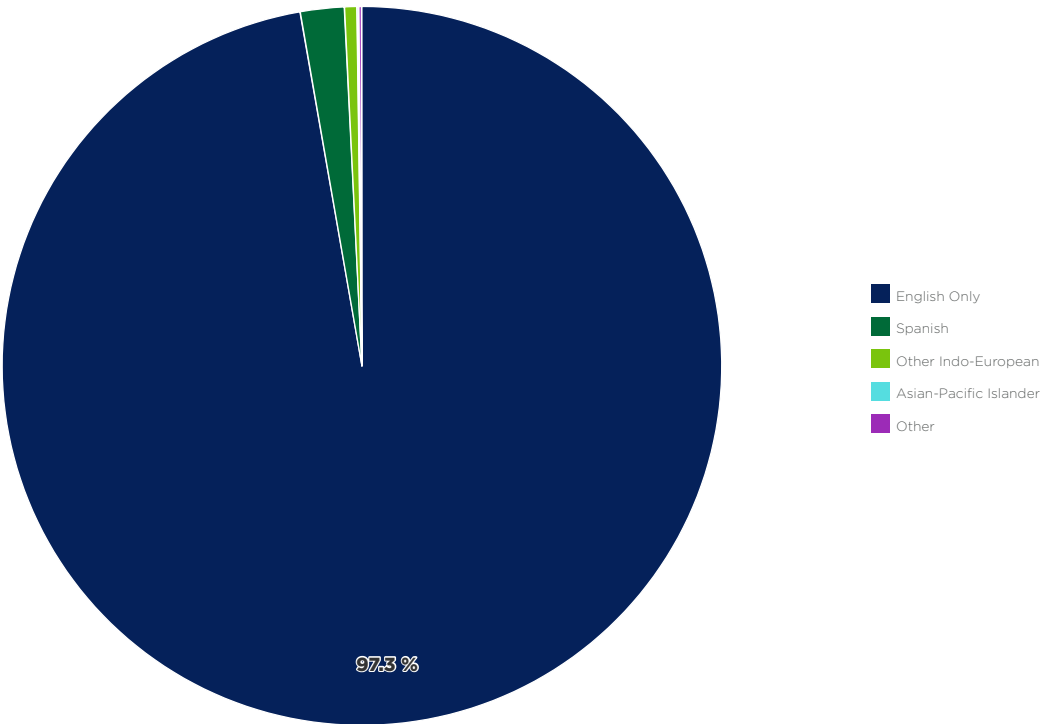
Sources: US Census Bureau ACS 5-year 2019-2023

Note: Limited English Proficiency is defined as speaking English less than "very well."

Geography	2019-2023 Immigrant Population	2019-2023 Limited English Proficiency
Blaine County, NE	0%	0%
Custer County, NE	2%	2.1%
Garfield County, NE	0.2%	0%
Greeley County, NE	1.2%	0.5%
Howard County, NE	1.7%	1.4%
Loup County, NE	2.8%	1.9%
Sherman County, NE	0.5%	0%
Valley County, NE	2%	0.8%
Wheeler County, NE	1.4%	1.5%
Loup Basin Public Health Department	1.6%	1.3%
Nebraska	7.7%	5.2%

Sources: US Census Bureau ACS 5-year 2019-2023

Language Spoken at Home Among People Ages 5+

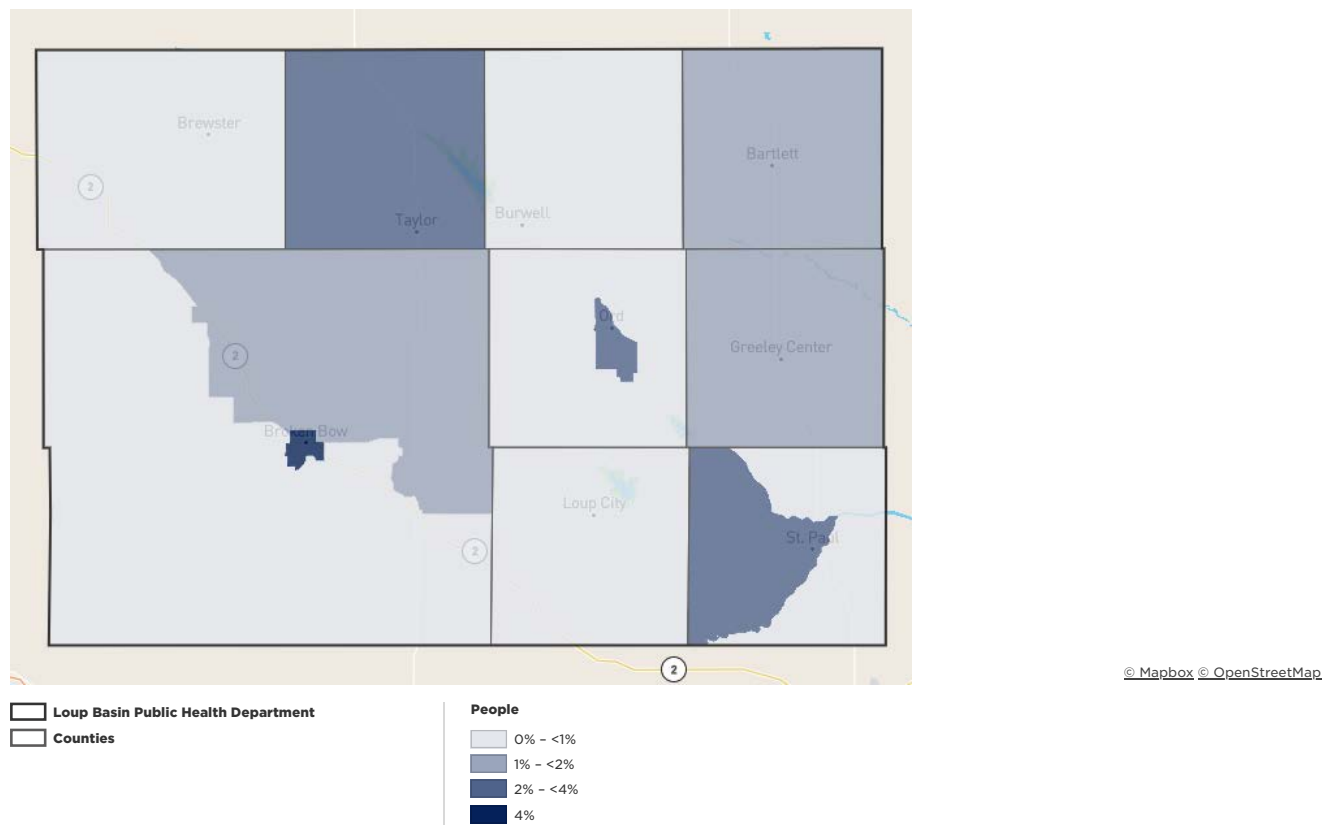


Loup Basin Public Health Department

Sources: US Census Bureau ACS 5-year 2019-2023

Map: Immigrant Population

Immigrant Population



Sources: US Census Bureau ACS 5-year 2019-2023

Veterans



Veterans

7.7%

of Civilians ages 18+

Loup Basin Public Health Department

7.2%

of Civilians ages 18+

Nebraska

Veterans

1,762

Civilians ages 18+

Loup Basin Public Health Department

105,516

Civilians ages 18+

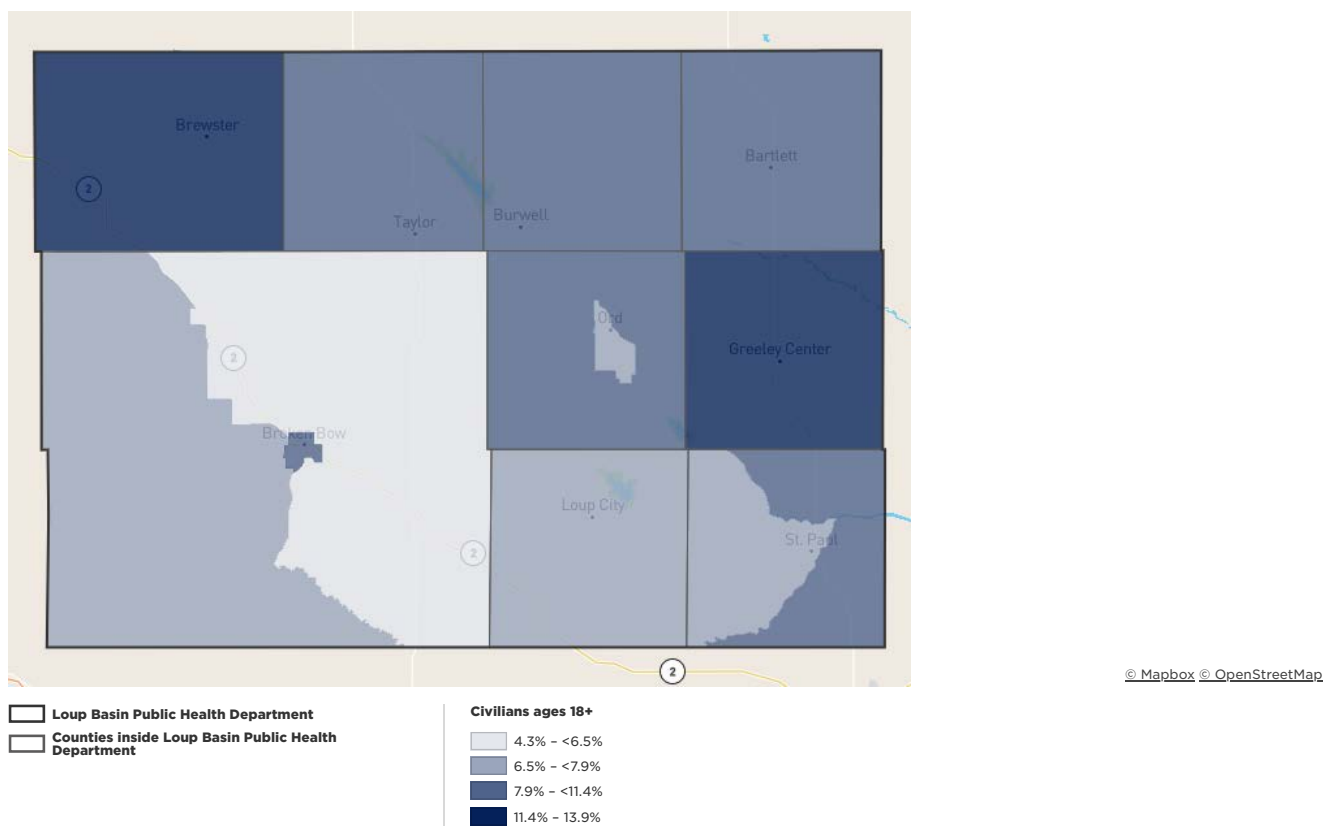
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Veterans (Percent)	2019-2023 Veterans (Population)
Blaine County, NE	13.9%	43
Custer County, NE	6.7%	532
Garfield County, NE	8.3%	117
Greeley County, NE	11.4%	193
Howard County, NE	7.7%	371
Loup County, NE	7.9%	35
Sherman County, NE	7.4%	173
Valley County, NE	7.6%	241
Wheeler County, NE	8.7%	57
Loup Basin Public Health Department	7.7%	1,762
Nebraska	7.2%	105,516

Sources: US Census Bureau ACS 5-year 2019-2023

Veteran Population



Sources: US Census Bureau ACS 5-year 2019-2023

People with Disabilities



Live with a Disability

15.2%

of People

Loup Basin Public Health Department

12.1%

of People

Nebraska

Live with a Disability

4,480

People

Loup Basin Public Health Department

235,106

People

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

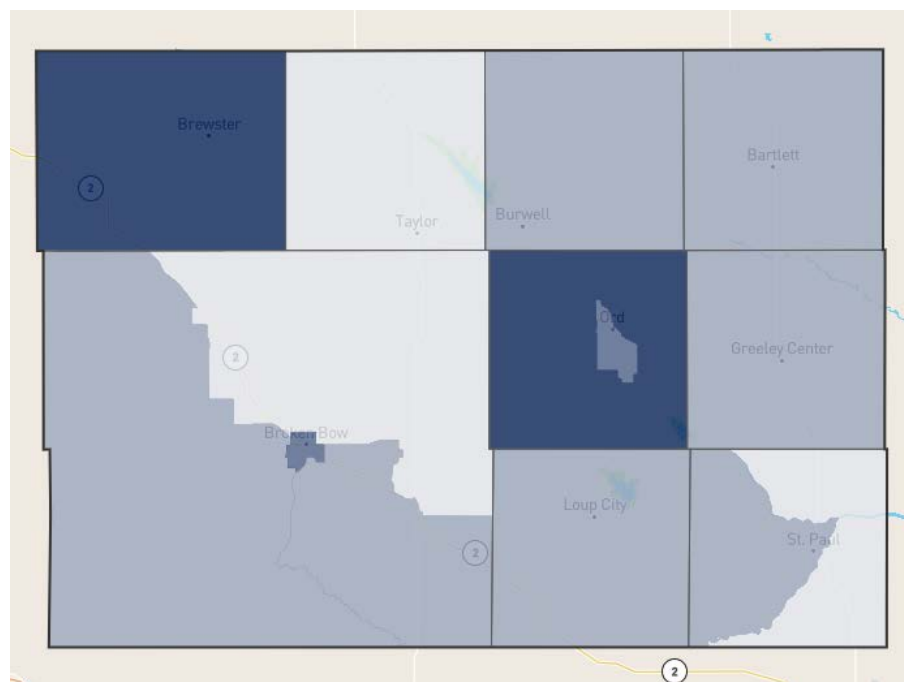
Note: Active-duty military and people living in institutional group quarters such as correctional facilities, skilled-nursing facilities, and other long-term care living arrangements are not reflected in this data.

Geography	2019-2023	2019-2023
	People living with a disability (Percent) ▲▼	People living with a disability (Population) ▲▼
Blaine County, NE	20.5%	79
Custer County, NE	14.9%	1,557
Garfield County, NE	14.9%	259
Greeley County, NE	15.3%	334
Howard County, NE	14.1%	905
Loup County, NE	12.1%	68
Sherman County, NE	14.4%	422
Valley County, NE	18.6%	753
Wheeler County, NE	13.1%	103
Loup Basin Public Health Department	15.2%	4,480
Nebraska	12.1%	235,106

Sources: US Census Bureau ACS 5-year 2019-2023

Note: Active-duty military and people living in institutional group quarters such as correctional facilities, skilled-nursing facilities, and other long-term care living arrangements are not reflected in this data.

People Living with Disabilities



© Mapbox © OpenStreetMap

Loup Basin Public Health Department
Counties inside Loup Basin Public Health Department

People

9.7% - <13.1%
13.1% - <17.7%
17.7% - <19.5%
19.5% - 20.5%

Sources: US Census Bureau ACS 5-year 2019-2023

Note: Active-duty military and people living in institutional group quarters such as correctional facilities, skilled-nursing facilities, and other long-term care living arrangements are not reflected in this data.

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Loup Basin
PUBLIC HEALTH DEPARTMENT

Loup Basin Public Health Department Community Health Assessment

How to Use This Dashboard

How you use this dashboard might depend on why you care about public health. The data provided serves many purposes, with useful information to help you understand the health of our community better.

If you're a **resident**, you may want to learn more about the health of our community to better help your family, neighbors, and friends. Using this data can help you learn about who lives in our community and the overall needs we have.

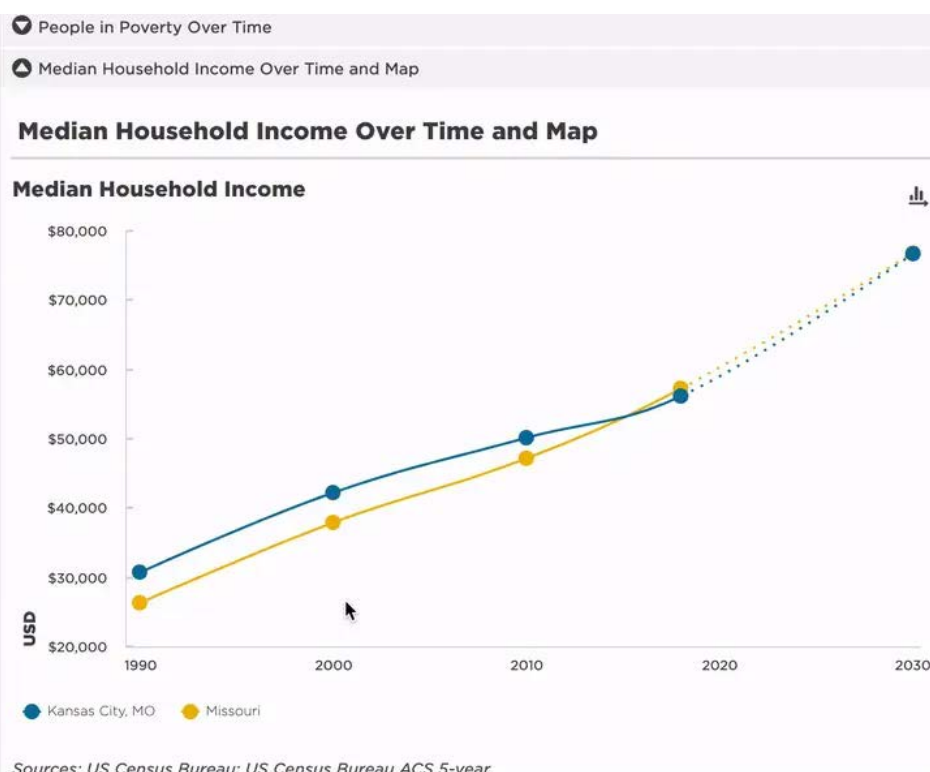
If you're a **community partner, health professional, or elected official**, you can use this dashboard to inform policy, priorities, supply information for grant applications, or learn more about where to allocate resources.

Dashboard Controls

To get the most use out of this data, here's how you can **see, save, and share** it:

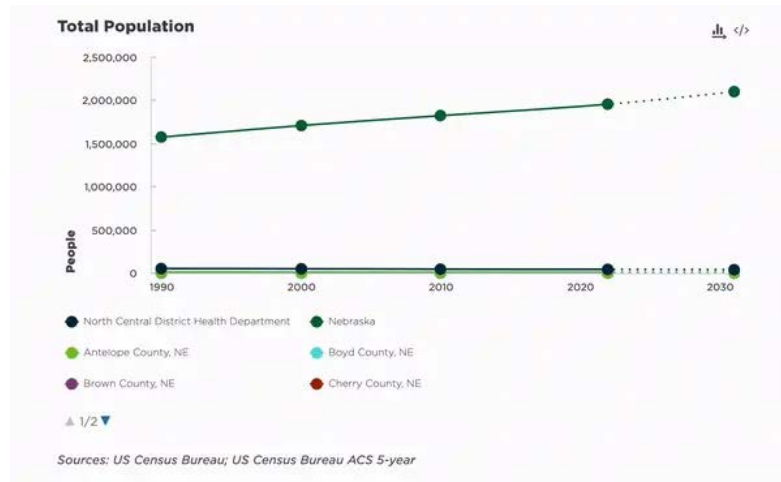
Collections

When more data points are available for a specific topic, you'll see a list of data headings with arrows to the left. **Click on the down arrow** to expand that section and view the data. You can close that section by clicking on the up arrow. A collection may include many presentation types, such as maps, charts, tables, and more.



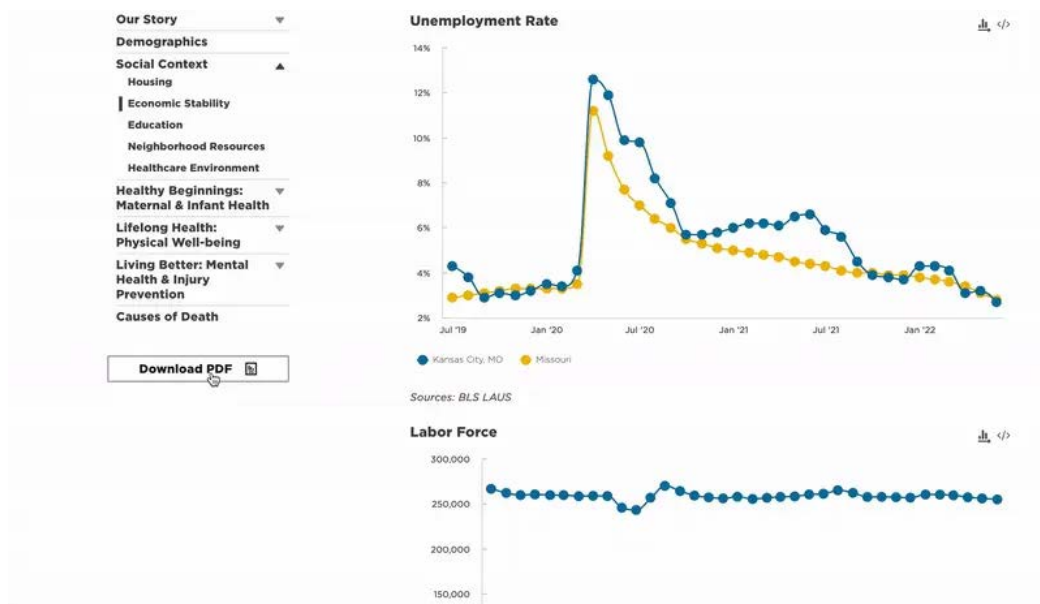
Using Dynamic Visualizations

Some visualizations may have a large contrast in values for different geographies. For example, the total population of the state compared to a county within that state. To view smaller values, **click on the elements in the legend** to add and remove geographies.



Saving Data

If you want to save the data for yourself, it can be saved as a PDF, CSV (spreadsheet), SVG or PNG (photos), or even GeoJSON (for GIS applications). To see what file types are available, **click on the bar graph icon** on the top right of that data visualization.



Embedding Data on Your Website

If you want to share data from the dashboard on a website, you can **click on the embed code icon** on the top right of that visualization. This will allow the people who visit your webpage to interact with dynamic visualizations rather than a static PNG or PDF.

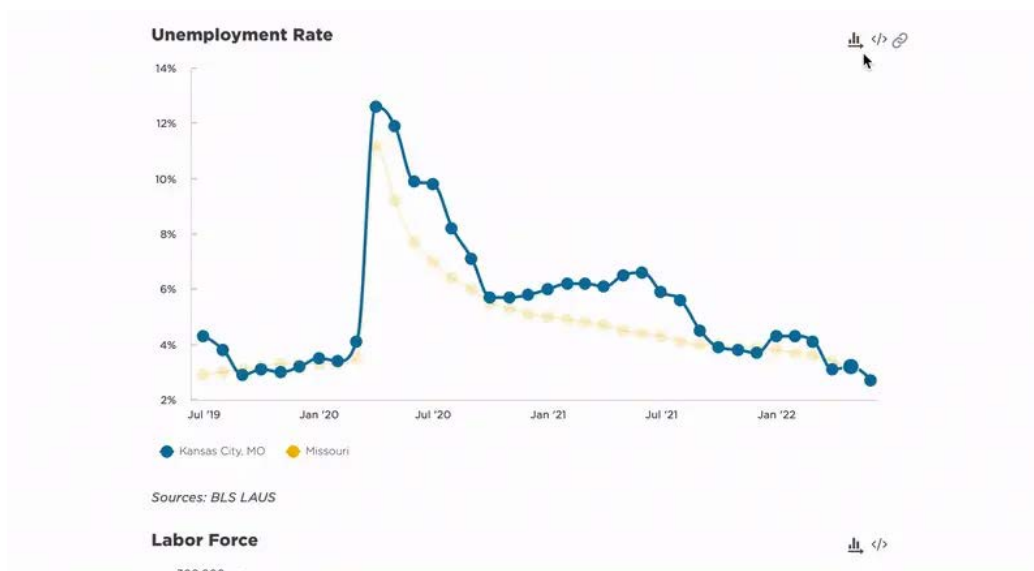


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Loup Basin Public Health Department Community Health Assessment

Executive Summary

The Loup Basin Public Health Department is committed to improving the health and well-being of all residents. This **Community Health Assessment (CHA)** provides a comprehensive overview of the county's health status, highlights key health challenges, and identifies priority areas for public health intervention. The CHA integrates both qualitative and quantitative data, providing a comprehensive and meaningful overview for community members.

It is conducted every three years to help align with our four area hospitals; Valley County Health System, Melham Memorial Medical Center, Howard County Medical Center, and Callaway Hospital. The CHA combines data from local, state, and national sources, along with input from community members, stakeholders, and partner organizations. The findings of this report form the foundation for future planning, including the development of the Community Health Improvement Plan (CHIP).

Key Findings

Top Health Priorities

- **Mental health emerged as the leading concern**, with 75% of respondents (using weighted data that represents the community) identifying it as a top three health issue in their county. This represents a steady increase from previous surveys conducted in 2015, 2018, and 2021.
- **Childcare access ranks second**, with 66% citing "finding affordable, quality childcare" as a major concern. This issue was not included in previous surveys.
- **Traditional health concerns remain significant**: Diabetes (41%), alcohol/drugs/tobacco use (38%), and cancer (22%) round out the top five health priorities.

Personal Health Experiences

When asked about major health issues experienced personally or by family members, **cancer topped the list with 28%** of those who completed the survey indicating this, followed by cardiovascular disease/heart issues (18%) and other physical health conditions (15%). Mental and behavioral health conditions affected 15% of respondents and/or their families, while diabetes impacted 12%.

Health Concerns

Residents expressed greatest concern about **access to quality healthcare** (21% of those who completed the survey indicated this) and **managing chronic health conditions** (21%). Healthcare costs and insurance concerns worried 16% of respondents, equally matched by concerns about maintaining healthy behaviors like exercise and proper nutrition.

Positive Health Behaviors

Physical activity was the most common healthy behavior reported by 72% of those who completed the survey, while **good nutrition practices** were cited by 47%.

Community Improvement Priorities

To create healthier neighborhoods, those who completed the survey most frequently requested:

- Better access to physical activity and recreation opportunities (25%)
- Increased access to affordable healthy food (20%)
- Improved environmental quality, including reduced chemical exposure and better air/water quality (11%)

Next Steps

The CHA findings will guide the creation of the **Community Health Improvement Plan (CHIP)**, which will outline specific goals, strategies, and measurable objectives. The health department will work closely with local organizations, healthcare providers, and residents to implement sustainable solutions and monitor progress.

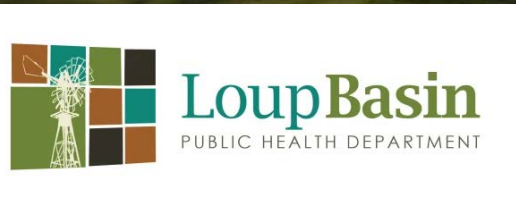
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Loup Basin Public Health Department Community Health Assessment

What Residents Are Saying

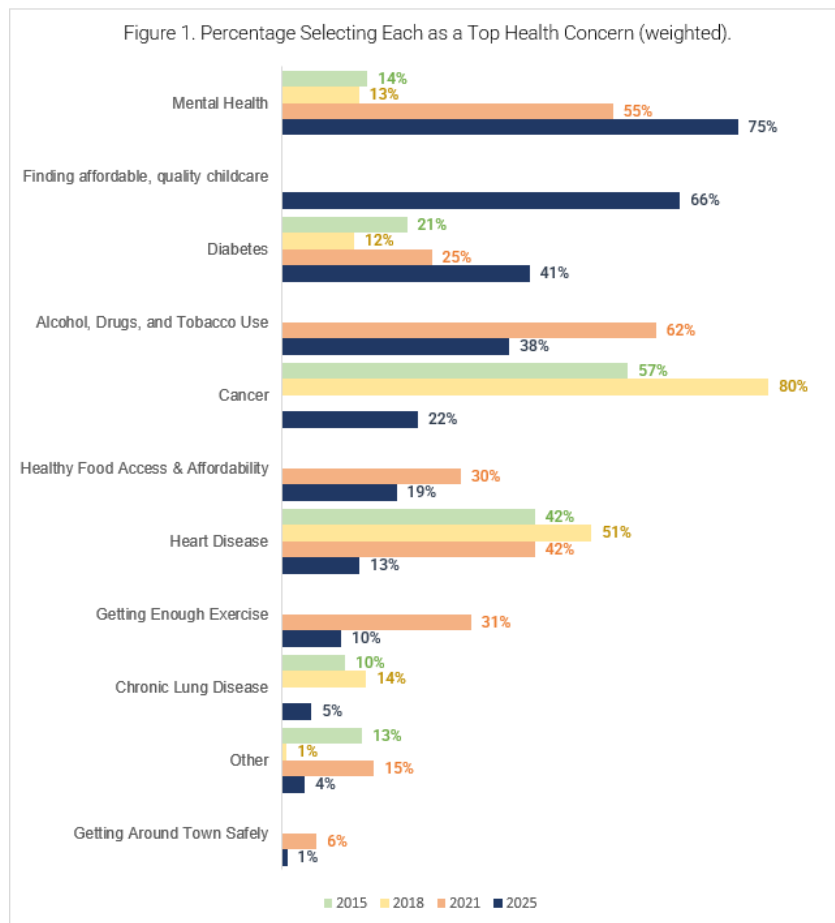
The Loup Basin Public Health Department conducted a comprehensive Community Health Needs Assessment in 2025, surveying 173 residents across nine counties in rural Nebraska. This assessment provides critical insights into community health priorities and informs planning for both the health department and four major hospitals in the region.

Key Findings

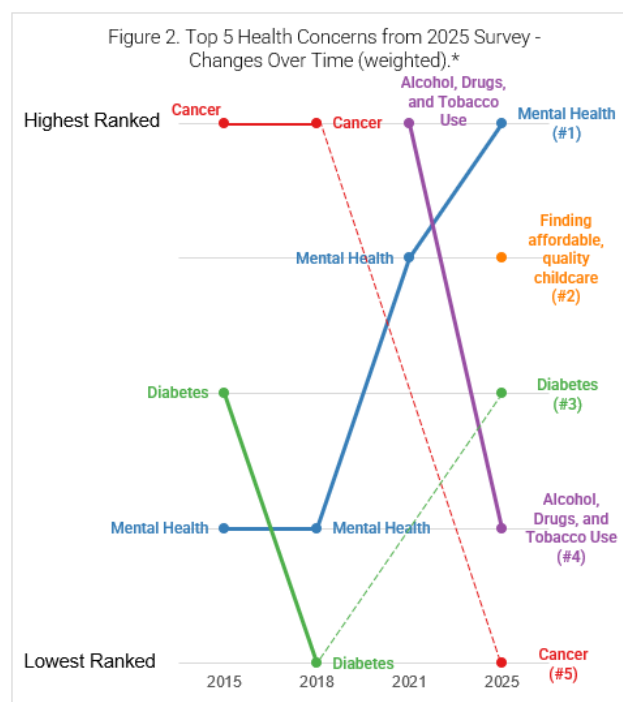
Top Health Priorities

- **Mental health emerged as the leading concern**, with 75% of respondents (using weighted data that represents the community) identifying it as a top three health issue in their county. This represents a steady increase from previous surveys conducted in 2015, 2018, and 2021.
- **Childcare access ranks second**, with 66% citing "finding affordable, quality childcare" as a major concern. This issue was not included in previous surveys.
- **Traditional health concerns remain significant**: Diabetes (41%), alcohol/drugs/tobacco use (38%), and cancer (22%) round out the top five health priorities.

Figure 1 shows the percentage of respondents who selected each of the following areas as a top three health concern in their county. In 2025, more than half of respondents selected mental health and finding affordable, quality childcare as one of their top three health concerns. Figure 1 also includes data from previous community health surveys done in 2015, 2018, and 2021, using weighted data for those years. Comparisons across years should be done with caution though as topics presented varied from year-to-year (bars are missing for years in which response options were not offered in that year).



Looking at the top five most selected health concerns from 2025 (mental health, childcare, diabetes, alcohol/drugs/tobacco use, and cancer), Figure 2 shows how the rankings for those topics changed over time. As shown in Figure 2, mental health steadily increased in ranking over the years, while cancer and alcohol/drugs/tobacco use decreased in ranking. Finding affordable, quality childcare was the second most highly ranked topic in 2025 but was not presented as an option in previous years and therefore has no previous data to compare to.



Personal Health Experiences

When asked about major health issues experienced personally or by family members, **cancer topped the list with 28%** of those who completed the survey indicating this, followed by cardiovascular disease/heart issues (18%) and other physical health conditions (15%). Mental and behavioral health conditions affected 15% of respondents and/or their families, while

diabetes impacted 12%.

Major Health Issues Experienced by You or Your Family

Responses from the open-ended question “What has been a major health issue you or your family has experienced?” were analyzed through an open-coding process, and a summary of the common themes identified in the responses is shown in Table 2. Data for this question are unweighted (not representative of the region, but represent those who participated in the survey). **Cancer, cardiovascular disease/heart issues, and physical and mental/behavioral health conditions/illnesses were among the most mentioned health issues.**

Table 2 Major Health Issue Summary - Number and Percent of Respondents by Theme (unweighted).		
Theme	Number	Percent
Cancer	49	28%
Cardiovascular disease/heart issues	31	18%
Other physical health conditions/illness	26	15%
Mental and behavioral health conditions/illness	26	15%
Diabetes	21	12%
Respiratory/lung conditions	13	8%
Healthcare access and affordability	13	8%
No major health concerns, N/A	13	8%
Environmental and social determinants of health; systemic issues	11	6%
Obesity/weight issues	8	5%
Substance use/abuse; addiction	7	4%
Family, death, and loss	5	3%
Childcare and family care challenges	5	3%
Infectious disease	2	1%

Health Concerns

Residents expressed greatest concern about **access to quality healthcare** (21% of those who completed the survey indicated this) and **managing chronic health conditions** (21%). Healthcare costs and insurance concerns worried 16% of respondents, equally matched by concerns about maintaining healthy behaviors like exercise and proper nutrition.

Responses from the open-ended question “What worries you most about your health or the health of your family?” were analyzed through an open-coding process, and a summary of the common themes identified in the responses is shown in Table 3. Data for this question are unweighted (not representative of the region, but represent those who participated in the survey). **Access to and availability of quality care, chronic health conditions, costs, and health maintenance behaviors were among the most mentioned health worries.**

Table 3 Health Worry Summary - Number and Percent of Respondents by Theme (unweighted).		
Theme	Number	Percent
Access and/or availability of quality care	37	21%
Chronic health conditions	37	21%
Costs, including for healthcare; health insurance concerns	27	16%
Health maintenance and behaviors (e.g., exercise, eating healthy, managing stress, prevention)	27	16%
Access to nutritious foods; food security	21	12%
Mental health concerns	14	8%
Environmental health risks	14	8%
Ageing and end-of-life concerns	12	7%
No concerns; N/A	12	7%
Mistrust in health system or information	11	6%
Social determinants of health and systemic issues, norms	9	5%
Vaccination concerns	5	3%
Respiratory disease, COVID	2	1%

Positive Health Behaviors

Physical activity was the most common healthy behavior reported by 72% of those who completed the survey, while **good nutrition practices** were cited by 47%.

Responses from the open-ended question “What is something you do to be healthy?” were analyzed through an open-coding process, and a summary of the common themes identified in the responses is shown in Table 4. Data for this question are unweighted (not representative of the region, but represent those who participated in the survey). **Physical activity and diet/nutrition were the most mentioned healthy behaviors.**

Table 4 Healthy Behaviors Summary - Number and Percent of Respondents by Theme (unweighted).		
Theme	Number	Percent
Physical activity	125	72%
Diet and nutrition	82	47%
Lifestyle and environment (going outside, hobbies, etc.)	18	10%
Preventive health and medical care	13	8%
Drink water	7	4%
Family and social habits	7	4%
Mental health habits	6	3%
Sleep	3	2%
Nothing, N/A	3	2%

Healthier Neighborhoods

Responses from the open-ended question “*What would make your neighborhood a healthier place for you or your family?*” were analyzed through an open-coding process, and a summary of the common themes identified in the responses is shown in Table 5. Data for this question are unweighted (not representative of the region, but represent those who participated in the survey). **Having better access to physical activity and recreation opportunities, increased access to affordable healthy food, and nothing were the most cited themes for making a healthier neighborhood.**

Table 5 Healthier Neighborhood Summary - Number and Percent of Respondents by Theme (unweighted).		
Theme	Number	Percent
More physical activity and recreation opportunities; better infrastructure	44	25%
Increased access to affordable healthy food	35	20%
Nothing, N/A, response not categorizable	35	20%
Reduce exposure to environmental chemicals/toxins, pests/animals; water & air quality improvements	19	11%
Increased access to quality health care, more affordable health care	12	7%
Better mental health care supports, availability, and awareness	9	5%
Safer driving behaviors	9	5%
Other health behaviors (e.g., smoking, vaccinations, neighborhood clean up, etc.)	9	5%
Social connectedness, community culture & engagement	9	5%
Accurate medical information, education	5	3%
Drug or law enforcement-related	5	3%
Affordable housing support	4	2%
More affordable childcare options	2	1%
Address noise disturbances	2	1%

Community Improvement Priorities

To create healthier neighborhoods, those who completed the survey most frequently requested:

- Better access to physical activity and recreation opportunities (25%)
- Increased access to affordable healthy food (20%)
- Improved environmental quality, including reduced chemical exposure and better air/water quality (11%)

Conclusion

The 2025 assessment highlights evolving health priorities across nine rural Nebraska counties, based on feedback from 173 residents. Mental health has emerged as the top concern (75%), marking a notable shift in rural health needs, followed by childcare access (66%), which underscores the impact of social determinants on health.

Traditional health issues like diabetes, substance use, and cancer remain significant, but the community also shows strengths—72% engage in regular physical activity, and 47% report good nutrition habits. Residents identified the need for improved physical activity infrastructure and better access to healthy food.

This assessment provides the Loup Basin Public Health Department and regional hospital partners with clear direction for the next phase of community health improvement. The data supports prioritizing mental health services, addressing childcare accessibility, and maintaining focus on chronic disease prevention while building on the community’s existing commitment to physical activity and healthy behaviors. The weighted demographic analysis ensures that future planning efforts reflect the true population distribution across the nine-county region, while the rich qualitative data from open-ended questions provides nuanced understanding of community needs and preferences.

Success in addressing these priorities will require continued collaboration between public health agencies, healthcare providers, community organizations, and residents themselves. The 2025 assessment establishes a solid foundation for evidence-based planning and community-driven health improvement initiatives that can meaningfully impact the health

and well-being of rural Nebraska families. By addressing the identified priorities through coordinated, community-centered approaches, the Loup Basin region can work toward a healthier future that supports both individual well-being and community resilience.

Demographics

There were a total of 173 respondents to the Loup Basin Community Survey in 2025. Table 1 shows information about the demographics of those who participated in the survey using the weighted and unweighted data. The unweighted data shows a notable overrepresentation of survey respondents from Valley and Garfield counties, relative to their smaller population sizes, and a significant underrepresentation of Custer County respondents. The weighting process provides a more balanced representation of participants across all counties included in the sample based on each county's population. Table 1 also shows that females were greatly overrepresented, with 93% of survey respondents being female; however, the weighted data provides a more balanced representation of gender. Race/ethnicity did not present notable representation concerns. Finally, a more balanced representation of people living in their residence for different amounts of time also resulted from the weighting based on demographic variables. While only 18% of those who participated in the survey reported living in their residence less than 5 years, this increased to 52% after weighting the data.

Table 1	Weighted	Unweighted
County		
Custer	50% (n=14,906)	15% (n=26)
Howard	21% (n=6,257)	5% (n=8)
Valley	13% (n=3,922)	36% (n=62)
Garfield	6% (n=1,722)	24% (n=42)
Sherman	5% (n=1,388)	9% (n=15)
Greeley	4% (n=1,064)	3% (n=6)
Wheeler	1% (n=348)	3% (n=5)
Loup	1% (n=269)	5% (n=8)
Blaine	<1% (n=12)	1% (n=1)
Gender		
Male	53% (n=15,754)	7% (n=12)
Female	47% (n=13,849)	93% (n=158)
Race/Ethnicity		
White	98% (n=29,421)	95% (n=165)
Hispanic/Latino	1% (n=211)	2% (n=3)
Other	1% (n=256)	3% (n=5)
Length of Residence		
0-5 years	52% (n=15,649)	18% (n=32)
5-10 years	3% (n=824)	9% (n=15)
10+ years	45% (n=13,415)	73% (n=126)

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Loup Basin Public Health Department

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Loup Basin Public Health Department Community Health Assessment

What impact has COVID-19 had on our community?

The effects of COVID-19 on our community are far-reaching, from economic to social to physical. People at higher risk for COVID-19 death often have other health conditions, such as obesity, diabetes, and lung disease. Preventing these physical illnesses can decrease the amount of people who die from COVID-19. What’s more, Black, Hispanic, and Native American populations are more likely to die from COVID-19 than white populations. This highlights a larger issue: too many Americans—specifically communities of color—often don’t have the same opportunities to be healthy as others.

Overall

♥ **COVID-19 Death Rate**
14.2
Deaths per 100,000 people
Nebraska

14.9
Deaths per 100,000 people
United States of America

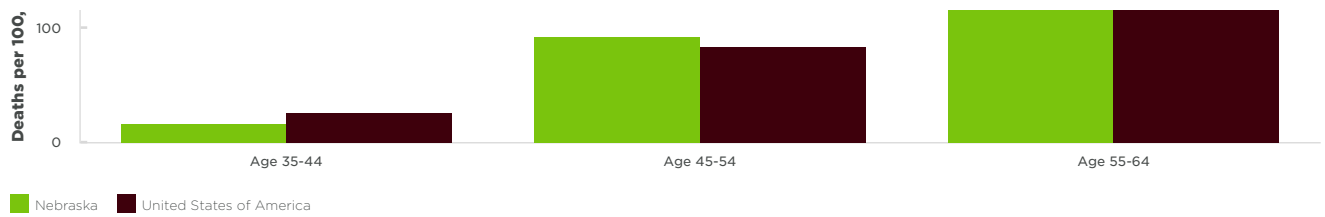
Sources: CDC WONDER Cause of Death 2023 Crude

by Race/Ethnicity

By Age

COVID-19 Death Rate by Age





Sources: CDC WONDER Cause of Death 2023 Crude

By Sex



COVID-19 Death Rate - Female

14.3

Deaths per 100,000 people
Nebraska

14.1

Deaths per 100,000 people
United States of America



COVID-19 Death Rate - Male

14.1

Deaths per 100,000 people
Nebraska

15.7

Deaths per 100,000 people
United States of America

Sources: CDC WONDER Cause of Death 2023 Crude

Learn more:

1. [Hill, Latoya, and Samantha Artiga. "COVID-19 Cases and Deaths by Race/Ethnicity: Current Data and Changes Over Time." Kauffman Family Foundation, 22 Aug. 2022. <https://www.kff.org/coronavirus-covid-19/issue-brief/covid-19-cases-and-deaths-by-race-ethnicity-current-data-and-changes-over-time/>](https://www.kff.org/coronavirus-covid-19/issue-brief/covid-19-cases-and-deaths-by-race-ethnicity-current-data-and-changes-over-time/)

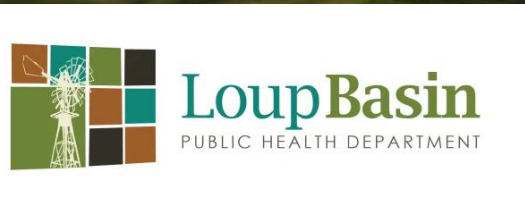
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Loup Basin Public Health Department Community Health Assessment

Where We Live Matters

Our health tells a story. That story starts with—and is continuously influenced by—our surroundings. Where we live, our education, how we travel to and from home, how much money we make, and more all add up to form our social context.

While some are personal choices, many behaviors are limited to or informed by what we have access to. **When we have more opportunities to make healthy choices, we're more likely to have better health outcomes.**

Unfortunately, not everyone has the same opportunities to make those healthy choices. Barriers that can last generations – such as not having jobs near you or grocery stores with fresh food in your neighborhood – can keep people stuck in patterns of poverty and poor health.

Health equity is the idea that all people should have the same access to the opportunities to lead healthy lives. It's the role of public health, healthcare providers, elected officials, and even community members to help remove the barriers that get in the way of everyone having a fair chance at a healthy life.

We should be able to breathe easy.

It's likely no surprise that the air we breathe affects our health. That air is affected by where we live and if things that cause poor air quality are nearby, such as heavy traffic, fires, and more.



Diesel Particulate Matter Level in Air

0.05

Micrograms per cubic meter

Loup Basin Public Health Department

0.14

Micrograms per cubic meter

Nebraska

Respiratory Hazard Environmental Justice Index

0.3

Loup Basin Public Health Department

4.3

Nebraska

Sources: EPA EJSCREEN 2023, 2024

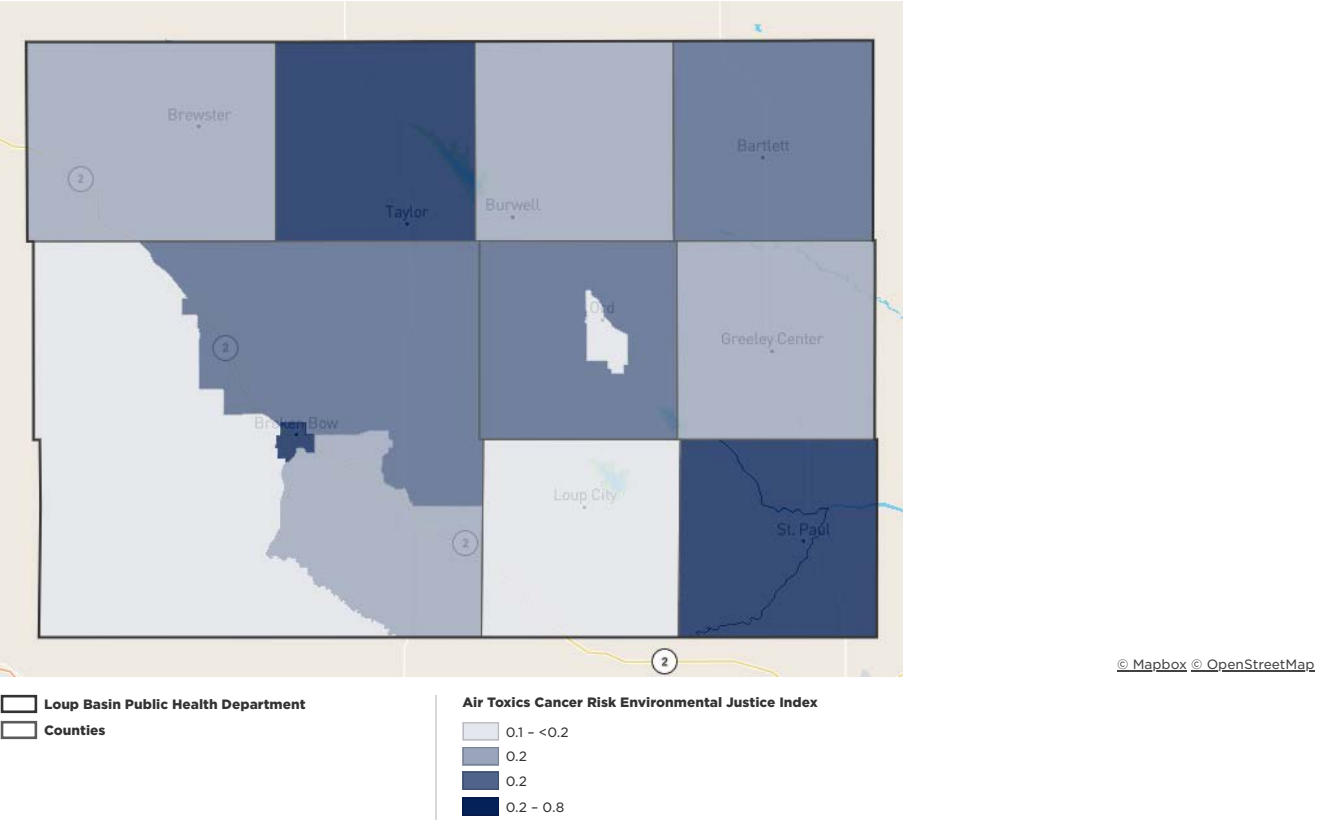
Respiratory Hazard Environmental Justice Index: the ratio of air toxic exposure concentration to health-based reference concentration weighted by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. As the value increases, the environmental justice in that area worsens.

Geography	2024 Diesel Particulate Matter Level in Air	2023 Respiratory Hazard Environmental Justice Index
Blaine County, NE	0	0.2
Custer County, NE	0.1	0.2
Garfield County, NE	0	0.2
Greeley County, NE	0	0.2
Howard County, NE	0.1	0.6
Loup County, NE	0	0.2
Sherman County, NE	0.1	0.2
Valley County, NE	0	0.2
Wheeler County, NE	0	0.2
Loup Basin Public Health Department	0.1	0.3
Nebraska	0.1	4.3

Sources: EPA EJSCREEN 2023, 2024

Respiratory Hazard Environmental Justice Index: the ratio of air toxic exposure concentration to health-based reference concentration weighted by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. As the value increases, the environmental justice in that area worsens.

Air Toxics Cancer Risk Environmental Justice Index



Sources: EPA EJSCREEN 2023

Air Toxics Cancer Risk Environmental Justice Index: the estimate of individual lifetime cancer risk from inhalation of air toxics multiplied by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. Lower values indicate lower relative individual lifetime cancer risk from inhalation of air toxics, while higher values indicate greater relative individual lifetime cancer risk from inhalation of air toxics.

Food is a basic human need.

All people should be able to eat food that fuels their bodies, yet many people struggle to find or afford any kind of food, let alone food that will help them be healthier. Poor diets lead to many serious diseases, but sometimes it's the only option available in a community. How far a family lives from healthy food options is one factor that limits their ability to

choose. This might affect older adults in more rural areas or lower income families who don't have a car who can't easily travel to other areas to purchase healthy food. Improving access to and the quality of the food we eat is an important step to make our community healthier.

Low Access Overall and by Select Characteristics



Have Low Access to Healthy Food

40.2%

People

Loup Basin Public Health Department

54.2%

People

Nebraska

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Geography	2019 Low Access to Healthy Food
Blaine County, NE	100%
Custer County, NE	61.9%
Garfield County, NE	10.1%
Greeley County, NE	66.2%
Howard County, NE	20.1%
Loup County, NE	39.9%
Sherman County, NE	20.1%
Valley County, NE	11.5%
Wheeler County, NE	89.1%
Loup Basin Public Health Department	40.2%
Nebraska	54.2%

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Low Access to Healthy Food by Select Characteristics

Geography	2019 Low Income People	2019 Housing Units without Vehicles
Loup Basin Public Health Department	40.3%	43.9%
Nebraska	52.6%	49.1%
Blaine County, NE	99.2%	90%
Custer County, NE	58.7%	66.8%
Garfield County, NE	9.9%	6.3%
Greeley County, NE	72.3%	82.6%
Howard County, NE	18.3%	15.7%
Loup County, NE	43.4%	50%
Sherman County, NE	18.2%	6.7%
Valley County, NE	13%	9.5%
Wheeler County, NE	88.6%	80%

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Low Income is defined as as either a poverty rate of 20 percent or more, or the median family income is 80 percent or less of the state or metro area median income

Low Access by Race or Ethnicity

Low Access to Healthy Food by Race or Ethnicity

▼ ▲ Data Sources	Loup Basin Public Health Department ▼ ▲	Nebraska ▼ ▲	Blaine County, NE ▼ ▲	Custer County, NE ▼ ▲	Garfield County, NE ▼ ▲	Greeley County, NE ▼ ▲	Howard County, NE ▼ ▲
2019 Asian	24.6%	58.8%	No data	66.7%	0%	50%	8.3%
2019 Black or African American	23.3%	57.2%	100%	35.7%	0%	25%	6.7%
2019 Hispanic or Latino	43.7%	53.2%	No data	66.7%	0%	72.5%	19.3%
2019 Multiracial or Other Race	41.7%	53.4%	100%	65.7%	20%	62.2%	16.8%
2019 Native American	32.4%	40.6%	No data	34.3%	No data	60%	27.3%
2019 Native Hawaiian and Pacific Islander	0%	53.3%	No data	No data	0%	No data	0%
2019 White	40.2%	54.1%	100%	62%	10.1%	66.5%	20.2%

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Data includes both Hispanic/Latino and non-Hispanic/Latino unless otherwise noted.

Low Access Among Children, Seniors

Low Access to Healthy Food by Select Age Groups

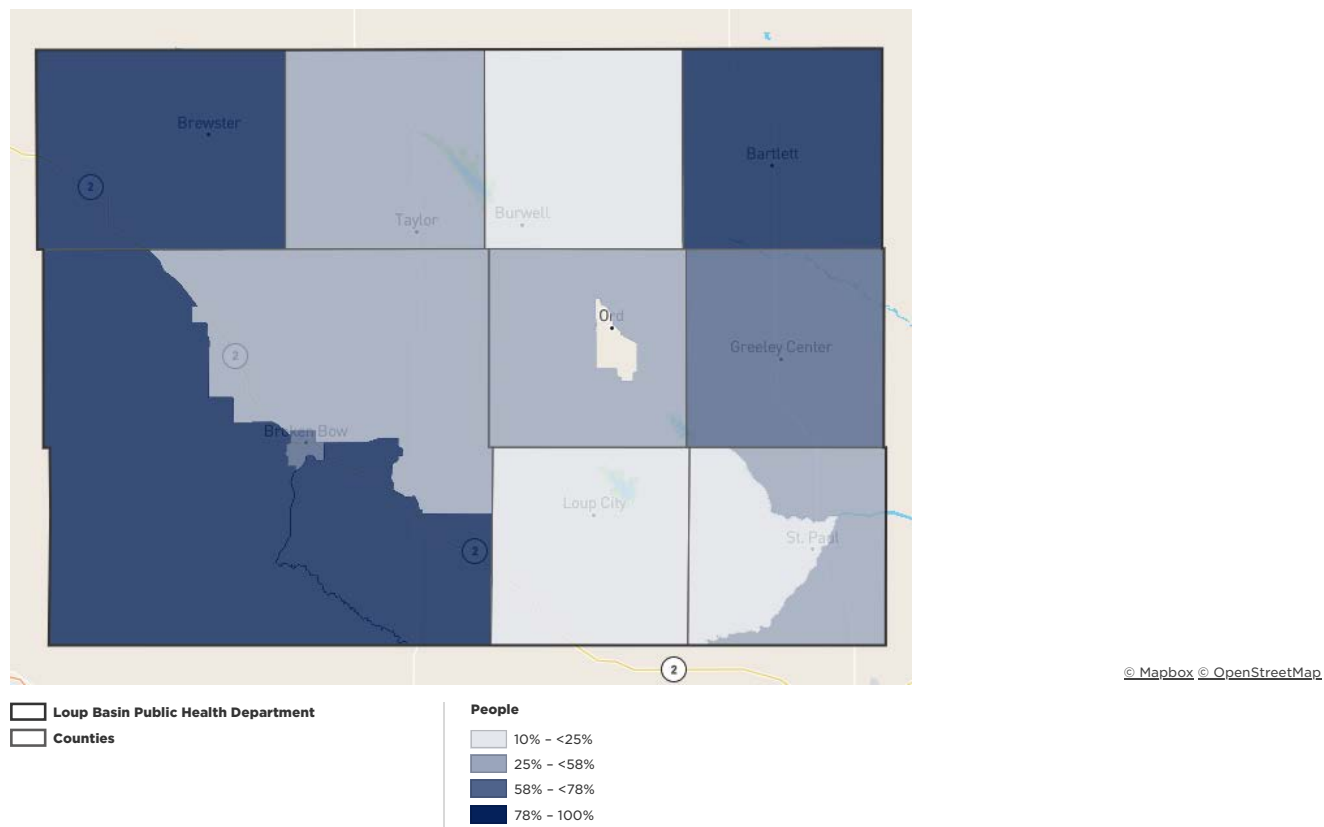
▼ ▲ Geography	2019 Children ages 0 to 17 ▼ ▲	2019 Seniors ages 65+ ▼ ▲
Loup Basin Public Health Department	39.7%	40.8%
Nebraska	54.5%	51.8%
Blaine County, NE	100%	100%
Custer County, NE	60.4%	66.9%
Garfield County, NE	9.3%	9.9%
Greeley County, NE	64.3%	65.1%
Howard County, NE	19.4%	19.4%
Loup County, NE	39.7%	32.1%
Sherman County, NE	23.1%	18.1%
Valley County, NE	10.2%	13.4%
Wheeler County, NE	82.6%	94.2%

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Map: People with Low Access

People with Low Access to Healthy Food



Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Food Insecurity



Sources: Feeding Amer. Map the Meal Gap 2023

Geography	2023 Food Insecurity
Blaine County, NE	16.8%
Custer County, NE	14.1%
Garfield County, NE	14.9%
Greeley County, NE	14.1%
Howard County, NE	12.8%
Loup County, NE	14.3%
Sherman County, NE	14.2%
Valley County, NE	15%
Wheeler County, NE	11.8%
Nebraska	14.5%

Sources: Feeding Amer. Map the Meal Gap 2023

Food Insecurity Rate



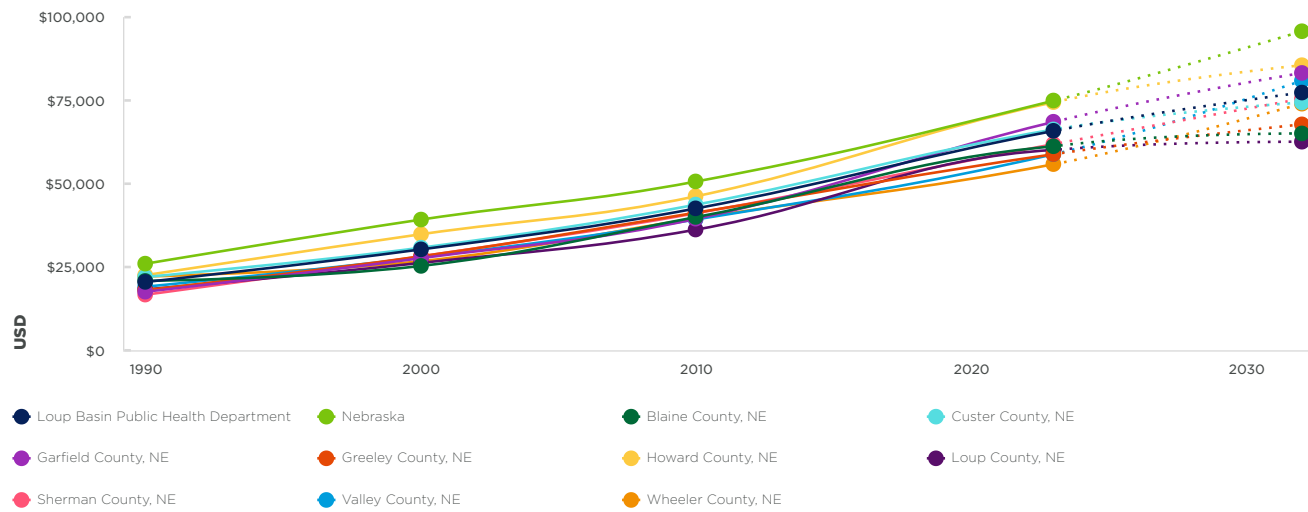
Sources: Feeding Amer. Map the Meal Gap 2023

Income affects our quality of life.

Earning a living wage means making enough money to be able to live in our community, including paying for safe shelter, food, and other basic needs. For people who work lower income jobs, this isn't always possible. When the cost to live in our community is high, or the jobs available don't pay enough, families have to choose between needs – paying their rent or buying food, getting medical care or having enough gas to get to work. **No one should have to choose between eating or having safe shelter.** When people can earn a fair wage, it affects their entire wellbeing.

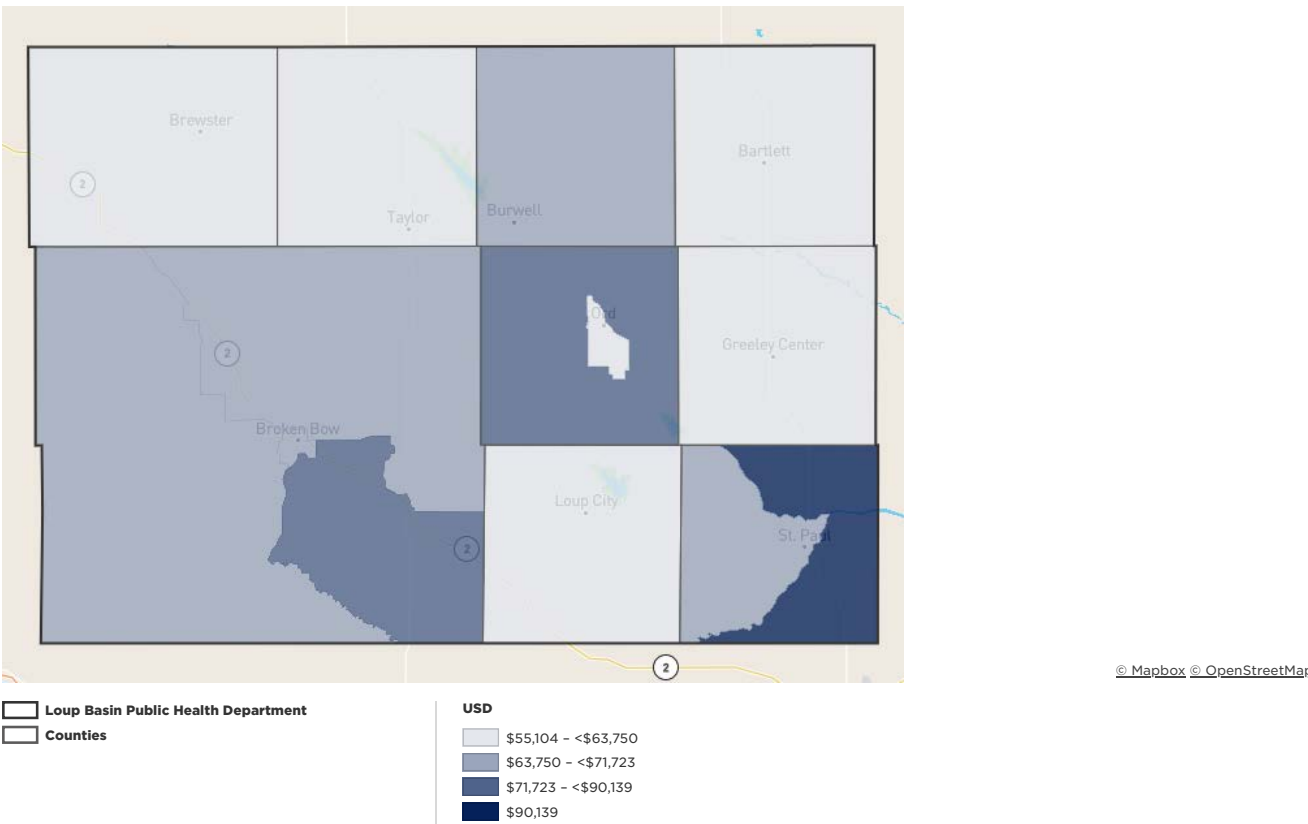
Median Household Income Over Time and Map

Median Household Income



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

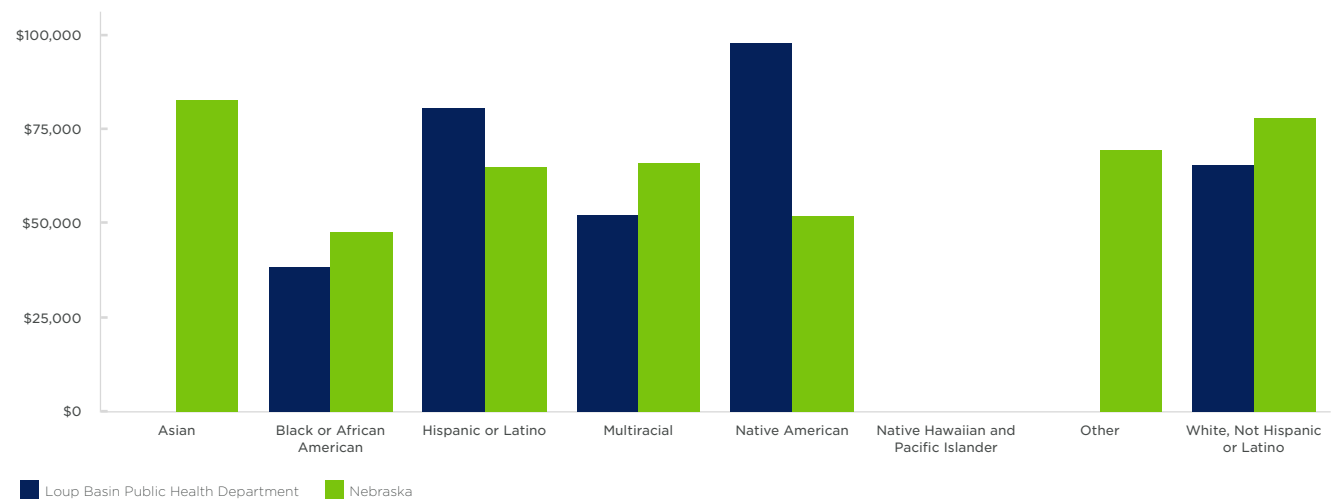
Median Household Income



Sources: US Census Bureau ACS 5-year 2019-2023

Median Household Income by Householder's Race/Ethnicity

Median Household Income by Race/Ethnicity



Sources: US Census Bureau ACS 5-year 2019-2023

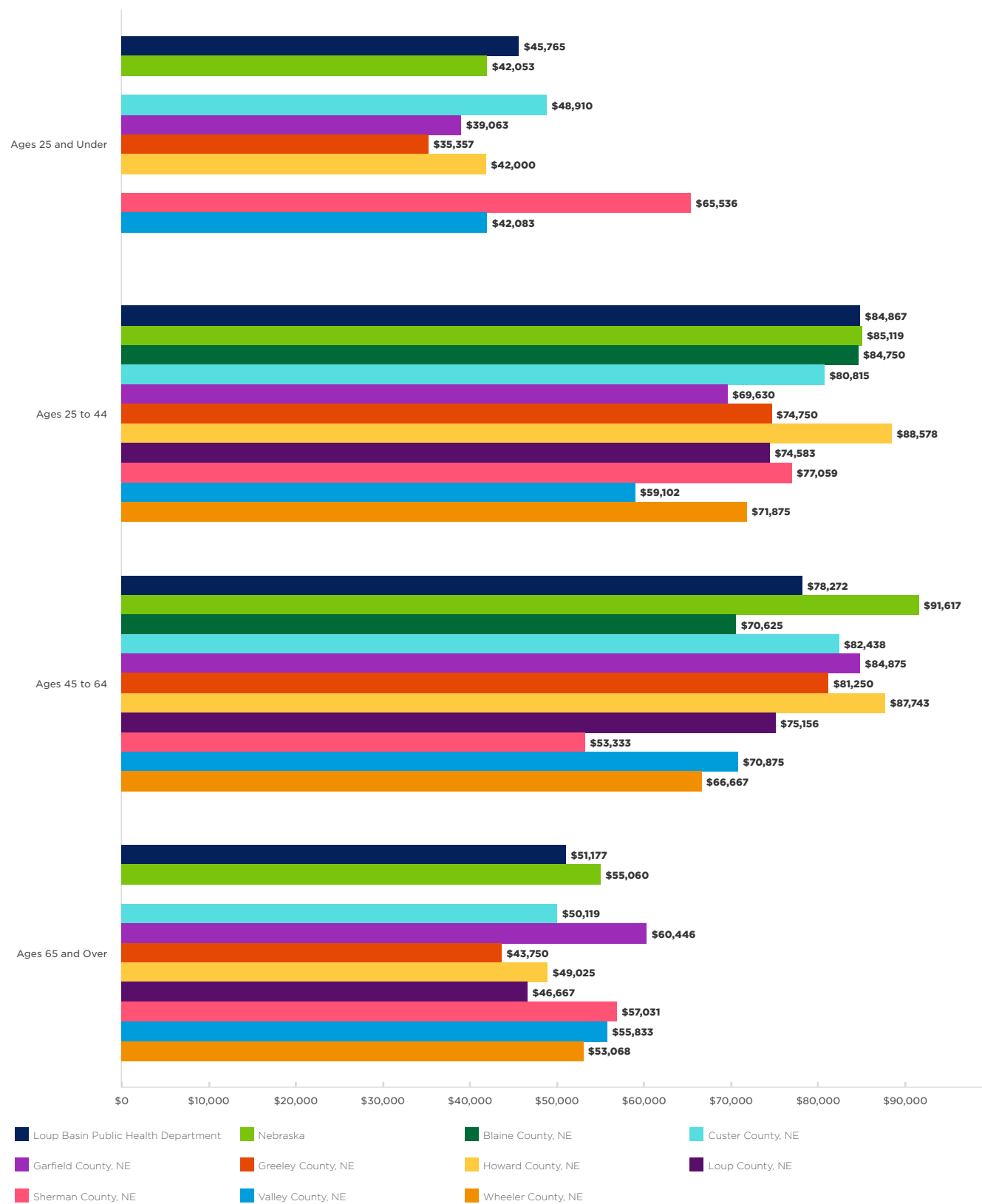
Note: unless otherwise indicated, data includes both Hispanic or Latino and non-Hispanic or Latino people.

▲▼ Data Sources	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼	Loup County, NE ▲▼	Sherman County, NE ▲▼
2019-2023 Asian	No data	No data	No data	No data	No data	No data	No data
2019-2023 Black or African American	No data	\$38,802	No data	No data	No data	No data	No data
2019-2023 Hispanic or Latino	No data	\$49,013	No data	No data	\$87,760	No data	\$13,580
2019-2023 Multiracial	No data	\$77,500	\$4,286	No data	\$48,879	No data	No data
2019-2023 Native American	No data	No data	No data	No data	No data	No data	No data
2019-2023 Native Hawaiian and Other Pacific Islander	No data	No data	No data	No data	No data	No data	No data
2019-2023 Other	No data	No data	No data	No data	\$88,542	No data	No data
2019-2023 White - Not Hispanic or Latino	\$61,250	\$67,045	\$68,833	\$59,567	\$75,026	\$54,205	\$63,079

Sources: US Census Bureau ACS 5-year 2019-2023

Median Household Income by Householder's Age

Median Household Income by Householder Age



Sources: US Census Bureau ACS 5-year 2019-2023

High housing costs prevent healthy choices.

Whether renting or owning a home, a family that spends a large portion of their income on housing doesn't have room left in their budget for the other things they need to survive, let alone thrive. If a family can't afford basic groceries, utility bills, clothing, and gas, things like healthy, fresh food or preventive healthcare are likely not within reach. When the burden of housing limits the personal choices we can make, our health suffers.

Cost Burdened Renters



Renters with Excessive Housing Costs

24.2%

Loup Basin Public Health Department

40.8%

Nebraska

All Occupied Housing Units with Excessive Housing Costs

19.7%

Loup Basin Public Health Department

25.4%

Nebraska

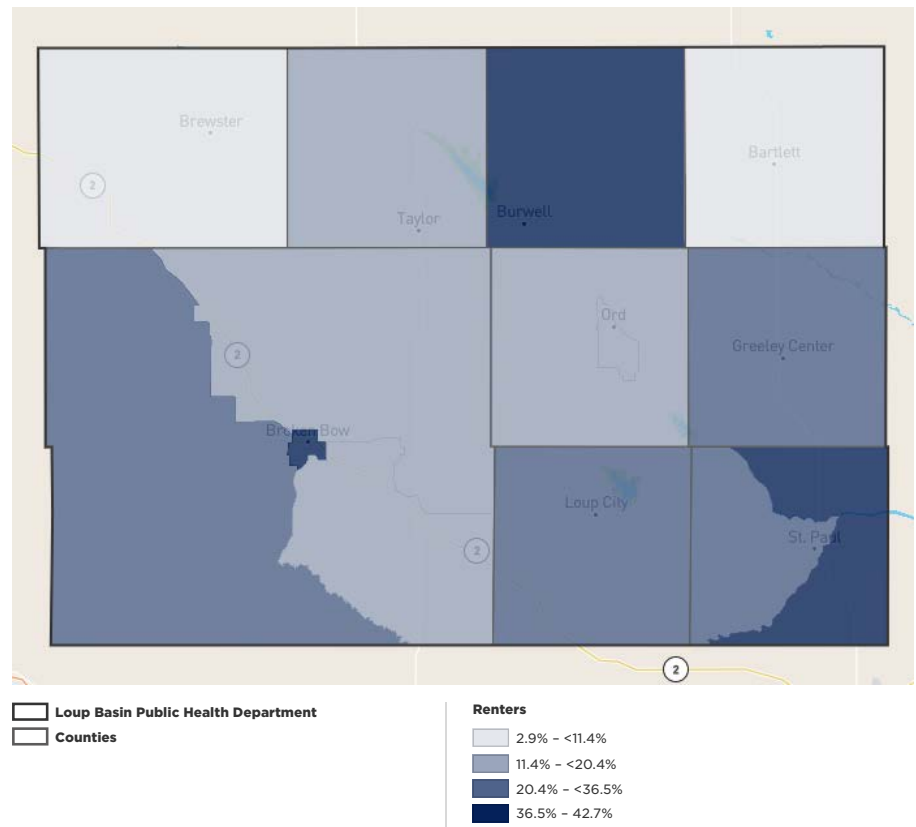
Sources: US Census Bureau ACS 5-year 2019-2023

Note: Housing costs of 30% or more of household income qualify as "excessive."

Geography	2019-2023 Excessive Housing Costs	2019-2023 Renter Excessive Housing Costs
Blaine County, NE	21.9%	7.3%
Custer County, NE	21.7%	28.3%
Garfield County, NE	26.8%	36.5%
Greeley County, NE	20%	20.4%
Howard County, NE	19.4%	27.5%
Loup County, NE	19.3%	13.1%
Sherman County, NE	19.6%	23.2%
Valley County, NE	12.8%	13%
Wheeler County, NE	16.2%	2.9%
Loup Basin Public Health Department	19.7%	24.2%
Nebraska	25.4%	40.8%

Sources: US Census Bureau ACS 5-year 2019-2023

Excessive Housing Costs for Renters



© Mapbox © OpenStreetMap

Sources: US Census Bureau ACS 5-year 2019-2023

Note: Housing costs of 30% or more of household income qualify as "excessive."

Cost Burdened Homeowners



Homeowners with Excessive Housing Costs

18.1%

Loup Basin Public Health Department

17.6%

Nebraska

All Occupied Housing Units with Excessive Housing Costs

19.7%

Loup Basin Public Health Department

25.4%

Nebraska

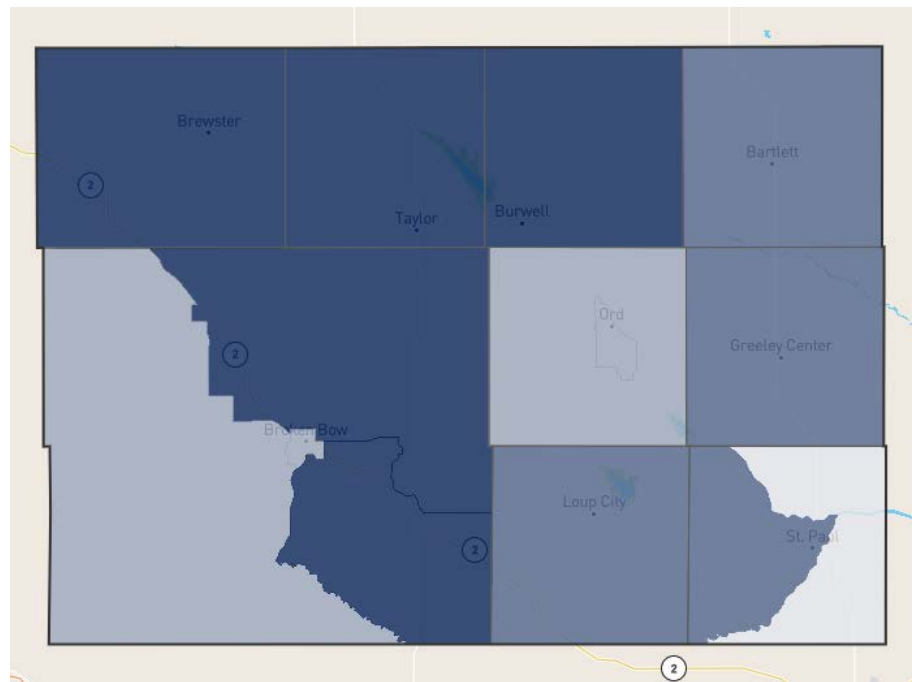
Sources: US Census Bureau ACS 5-year 2019-2023

Note: Housing costs of 30% or more of household income qualify as "excessive."

Geography	2019-2023 All Occupied Housing Units with Excessive Housing Costs	2019-2023 Homeowners with Excessive Housing Costs
Blaine County, NE	21.9%	27.7%
Custer County, NE	21.7%	19.1%
Garfield County, NE	26.8%	23.5%
Greeley County, NE	20%	19.9%
Howard County, NE	19.4%	16.5%
Loup County, NE	19.3%	22.4%
Sherman County, NE	19.6%	18.5%
Valley County, NE	12.8%	12.7%
Wheeler County, NE	16.2%	19.3%
Loup Basin Public Health Department	19.7%	18.1%
Nebraska	25.4%	17.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Excessive Housing Costs for Owners



© Mapbox © OpenStreetMap

Loup Basin Public Health Department
 Counties

Homeowners
9% - <12.3%
12.3% - <18.5%
18.5% - <22.4%
22.4% - 27.7%

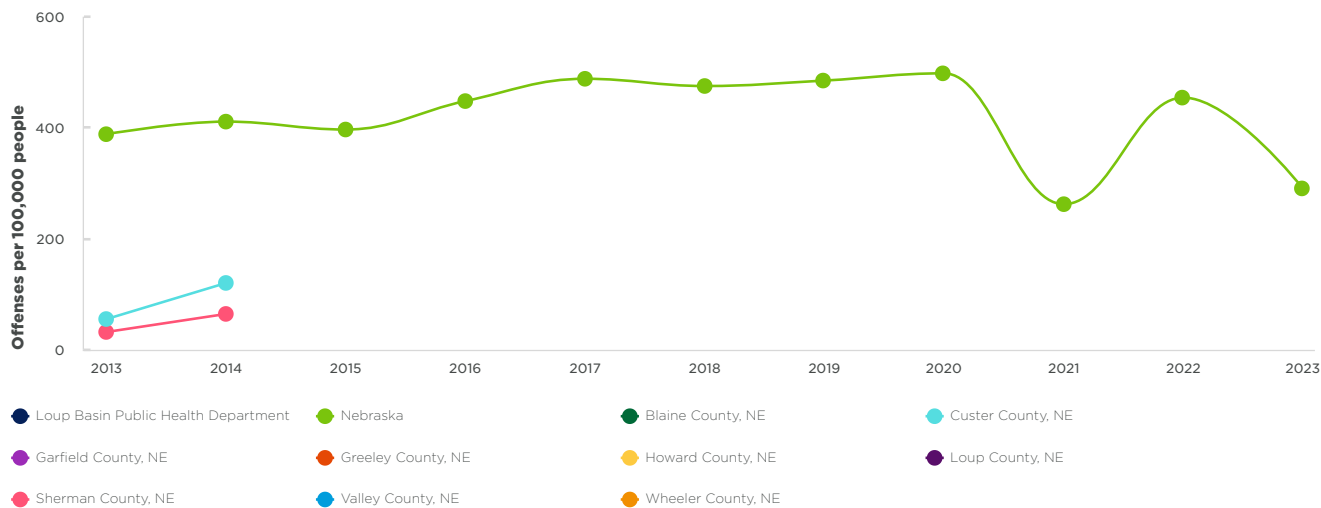
Sources: US Census Bureau ACS 5-year 2019-2023

Note: Housing costs of 30% or more of household income qualify as "excessive."

No one should have to live in fear.

People with mental illness are actually more likely to be a victim of a violent crime than to be a criminal. Mental illness doesn't cause violence. An individual's decision to commit a violent crime is informed by many factors, including past trauma. Trauma can be associated with higher levels of violence. If we can reduce the amount of traumatic life events a person experiences—including witnessing a violent crime themselves—we can make a difference. This might start with addressing poverty, unemployment, or access to safe housing. We can also help prevent crime before it happens by giving youth chances to connect with caring adults, access to a quality education starting in preschool, and family support to equip parents of young children. **Seeing crime as a community issue rather than an individual's bad decisions allows us to make real progress towards a safer community.**

Violent Crime Rate



Sources: FBI UCR

Law enforcement jurisdictions provide this data to the FBI each year; missing data or years will occur if that data has not been provided. This data represents reported crimes only. Data includes murder and nonnegligent manslaughter, rape, robbery, and aggravated assault.

Learn more:

1. "Social Determinants of Health," World Health Organization, <https://www.who.int/teams/social-determinants-of-health>
2. Braveman, Paula, and Laura Gottlieb. "The Social Determinants of Health: It's Time to Consider the Causes of the Causes." *Public Health Reports*, vol. 129, no. 1 suppl2, Jan. 2014, pp. 19-31. *SAGE Journals*, <https://doi.org/10.1177/003335491412915206>
3. Gómez, Cynthia A., et al. "Addressing Health Equity and Social Determinants of Health Through Healthy People 2030." *Journal of Public Health Management and Practice*, vol. 27, no. Supplement 6, Dec. 2021, pp. 249-57. *Journals.lww.com*, <https://doi.org/10.1097/PHH.0000000000001297>
4. Pesheva, Ekaterina. "ZIP Code or Genetic Code?" *Harvard Medical School News & Research*, 14 Jan. 2019, <https://hms.harvard.edu/news/zip-code-or-genetic-code>

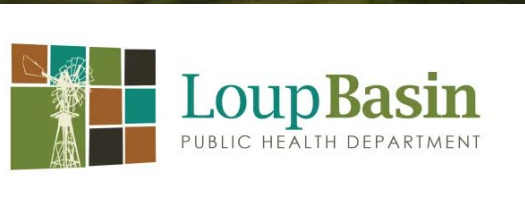
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Loup Basin Public Health Department

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Loup Basin Public Health Department Community Health Assessment

Let's set our communities up for success.

Economic and educational opportunity are both important drivers of community health. People with more education are said to live longer, have fewer serious illnesses, have better mental health, and less stress and economic struggles. We all should be able to make enough money to support our basic needs and buy some of what we want. Creating new job opportunities and supporting financial assistance for those looking to further their education will allow us to do what's most important. Taking care of our families, supporting other businesses in our neighborhood, and providing for ourselves.

Make our students want to stay.

When we keep children engaged in school through high school graduation, we can give them the tools, support, knowledge, and skills that lead to healthier lives. Students with lower reading skills in elementary school are more likely to drop out of high school than students with higher reading skills. Low-income families typically have less access to high-performing schools, which affects school performance and dropout rates. Making sure every student has the same opportunity to learn in a school with enough resources, taught by great teachers, free of violence, and with parents who are able to be involved is a matter of public concern. **Every child deserves that chance to learn.** Resourcing and supporting our K-12 schools is a key area we can help improve the quality of life for children in our community.

Enrollment

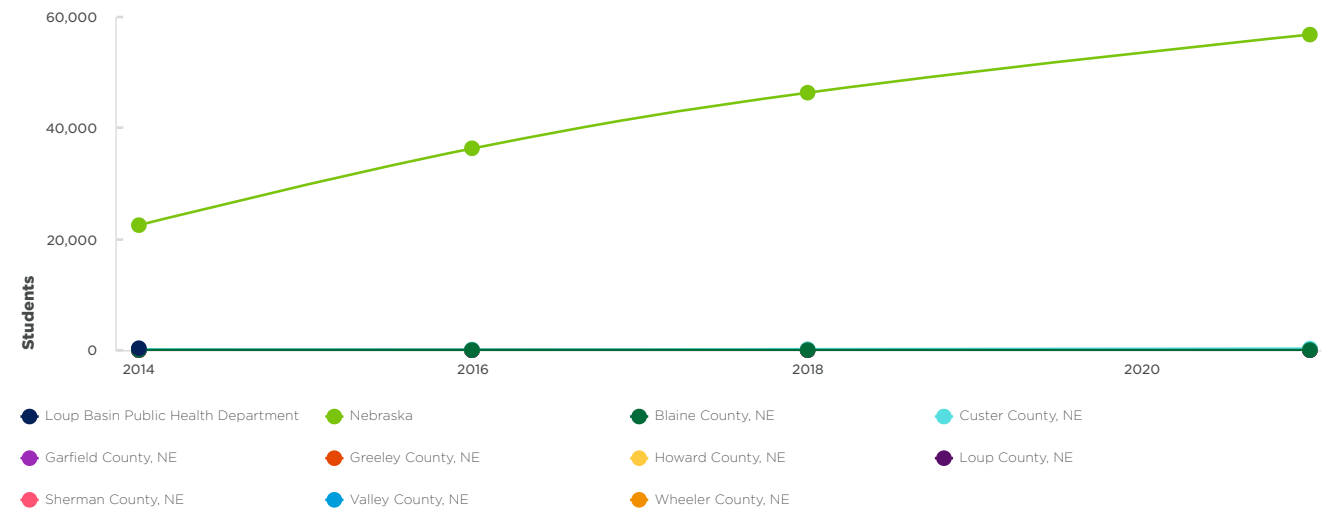
Children and Adolescents Enrolled in School by Age



Sources: US Census Bureau ACS 5-year 2019-2023

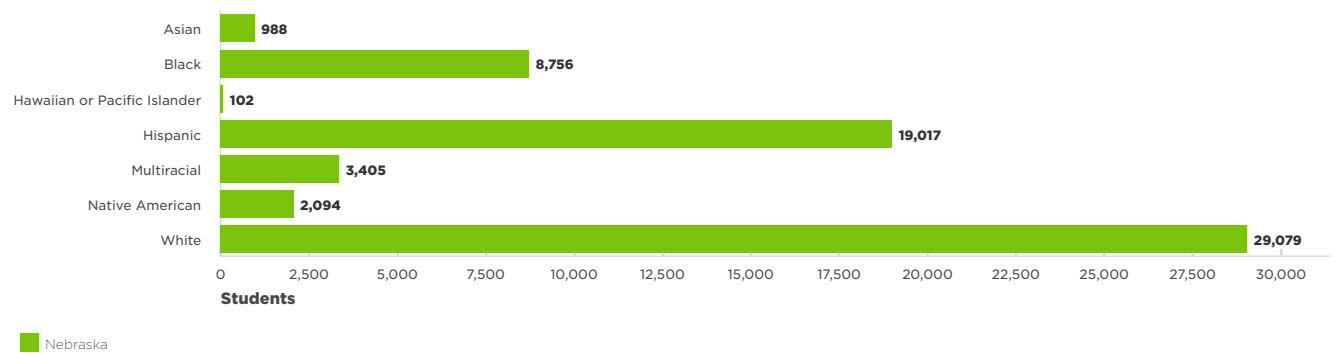
Chronically Absent Students

Chronically Absent Students



Sources: CRDC

Chronically Absent Students by Race/Ethnicity



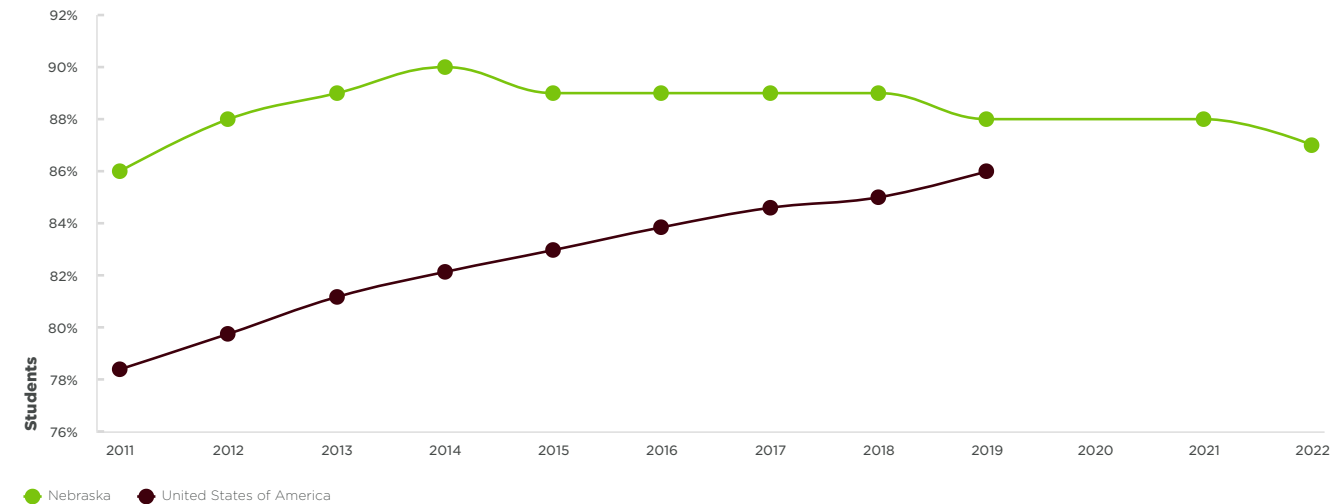
Sources: CRDC 2020-2021

Geography	2020-2021 Hispanic or Latino	2020-2021 Native American	2020-2021 Asian	2020-2021 Native Hawaiian and Pacific Islander	2020-2021 Black or African American	2020-2021 White	2020-2021 Multiracial
Blaine County, NE	No data	No data	No data	No data	No data	11	No data
Custer County, NE	22	No data	No data	No data	2	246	4
Garfield County, NE	No data	No data	No data	No data	No data	27	No data
Greeley County, NE	3	No data	No data	No data	No data	45	No data
Howard County, NE	13	No data	No data	No data	No data	127	No data
Loup County, NE	No data	No data	No data	No data	No data	5	No data
Sherman County, NE	2	2	No data	No data	No data	28	No data
Valley County, NE	9	No data	No data	No data	No data	83	No data
Wheeler County, NE	No data	No data	No data	No data	No data	No data	No data
Loup Basin Public Health Department	No data	No data	No data	No data	No data	No data	No data
Nebraska	19,017	2,094	988	102	8,756	29,079	3,405

Sources: CRDC 2020-2021

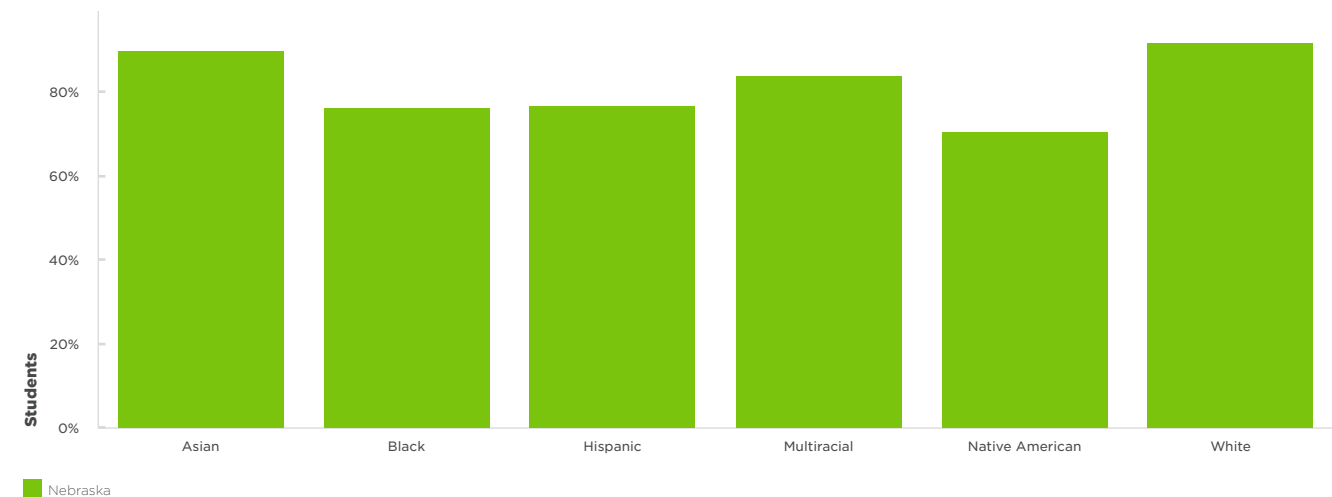
High School Graduation Rate

High School Graduation Rate



Sources: *EDFacts*

High School Graduation Rate by Race/Ethnicity



Sources: *EDFacts 2021-2022*

Homeless students

 **Homeless Students**
3,245.3
Nebraska

1,205,259
United States of America

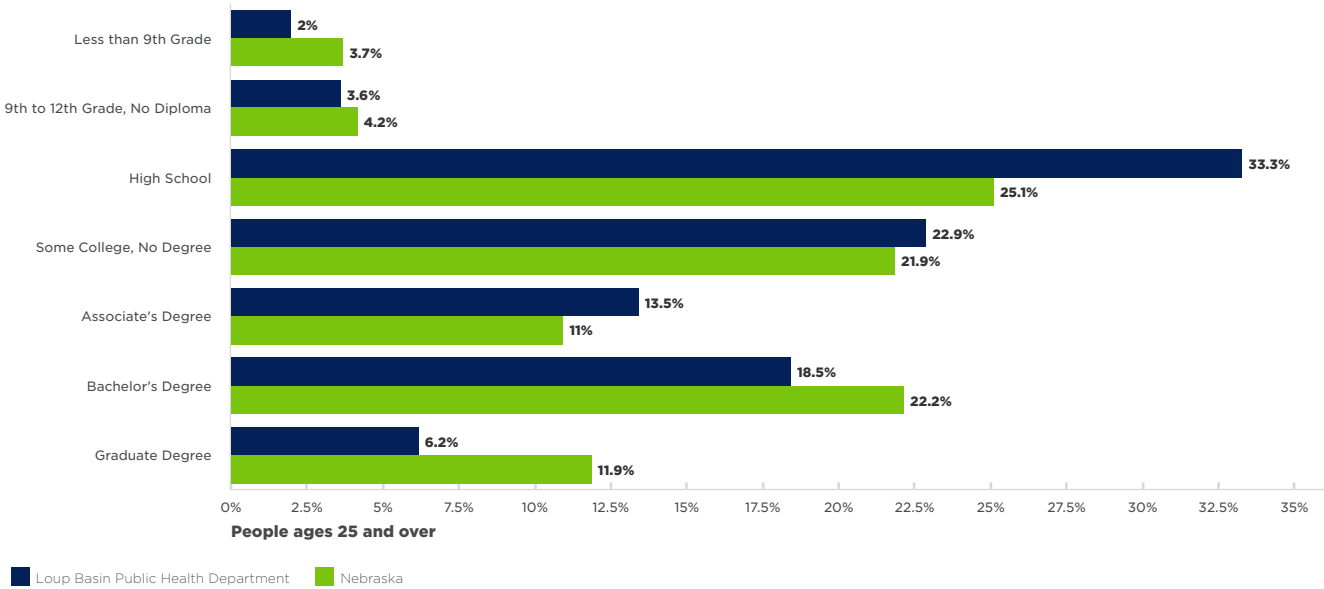
Sources: *EDFacts 2021-2022*

Equip them to keep going.

How much education we achieve is a major factor in our future career and income. A student's lifetime wealth increases by 15% for every year of high school they complete. With more education, we can make enough money to live in our community, have health insurance, and afford more than just the basics. **This is the quality of life we all deserve.**

Yet barriers still exist that prevent students from achieving as much education as they want. When information shows that one race or ethnicity achieves less schooling than another, it points to a larger issue—we aren’t all starting from the same place. Even when personal desire to continue learning is there, the cost of college, lack of support systems, knowledge of available options, and not being college-ready because of low quality schools are all reasons someone might not continue their education. **When more people are able to complete high school and beyond, our whole community is healthier.**

Highest Level of Education Completed



Sources: US Census Bureau ACS 5-year 2019-2023

▲▼ Data Sources	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼	Loup County, NE ▲▼	Sherman County, NE ▲▼
2019-2023 Less than 9th Grade	0.7%	2.3%	0.3%	3.3%	2.1%	0%	2.5%
2019-2023 9th to 12th Grade, No Diploma	3.3%	3.7%	4.2%	3.3%	2.7%	0%	6.2%
2019-2023 High School Degree	38.9%	31.4%	26.8%	37.7%	35.9%	33.3%	35.6%
2019-2023 Some College, No Degree	18.9%	21.6%	26%	19.3%	24.3%	20.5%	25.9%
2019-2023 Associate's Degree	12.6%	15.4%	10%	18.1%	12%	20.2%	10.9%
2019-2023 Bachelor's Degree	21.9%	18.7%	23.8%	12.8%	19%	17.9%	13.3%
2019-2023 Graduate Degree	3.7%	7%	8.9%	5.6%	3.9%	8.1%	5.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Bachelor’s Degree or Higher by Race/Ethnicity

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE
2019-2023 Total	24.7%	34.1%	25.6%	25.6%	32.7%	18.4%	23%
2019-2023 Asian	4.8%	44.2%	No data	0%	No data	No data	No data
2019-2023 Black or African American	2.9%	21.1%	No data	3.8%	0%	0%	No data
2019-2023 Hispanic or Latino	24.7%	15.6%	No data	9.5%	100%	60.7%	19.4%
2019-2023 Multiracial	22.5%	26.1%	No data	15.8%	0%	22.2%	38.4%
2019-2023 Native American	9.1%	13.5%	No data	2.9%	No data	10%	0%
2019-2023 Native Hawaiian and Pacific Islander	0%	24%	No data	0%	No data	No data	No data
2019-2023 Other	25.4%	13.5%	No data	13.3%	No data	60.7%	0%
2019-2023 White (Not Hispanic or Latino)	24.9%	36.7%	25.6%	26.6%	32.9%	17.7%	22.7%

Sources: US Census Bureau ACS 5-year 2019-2023
Note: unless otherwise indicated, data for each group includes both Hispanic or Latino people and non-Hispanic or Latino people.

Losing a job means losing so much more.

Not having a job affects many aspects of health and life, from worrying about housing and not being able to buy healthy food, to losing health insurance and the added stress of meeting daily needs that require a paycheck. Unemployment affects both our physical and mental health. When unemployment is high, we know our community is struggling, something needs to change, and increased support is needed.



Employed

63%

of Working-age population (age 16+)

Loup Basin Public Health Department

66.3%

of Working-age population (age 16+)

Nebraska

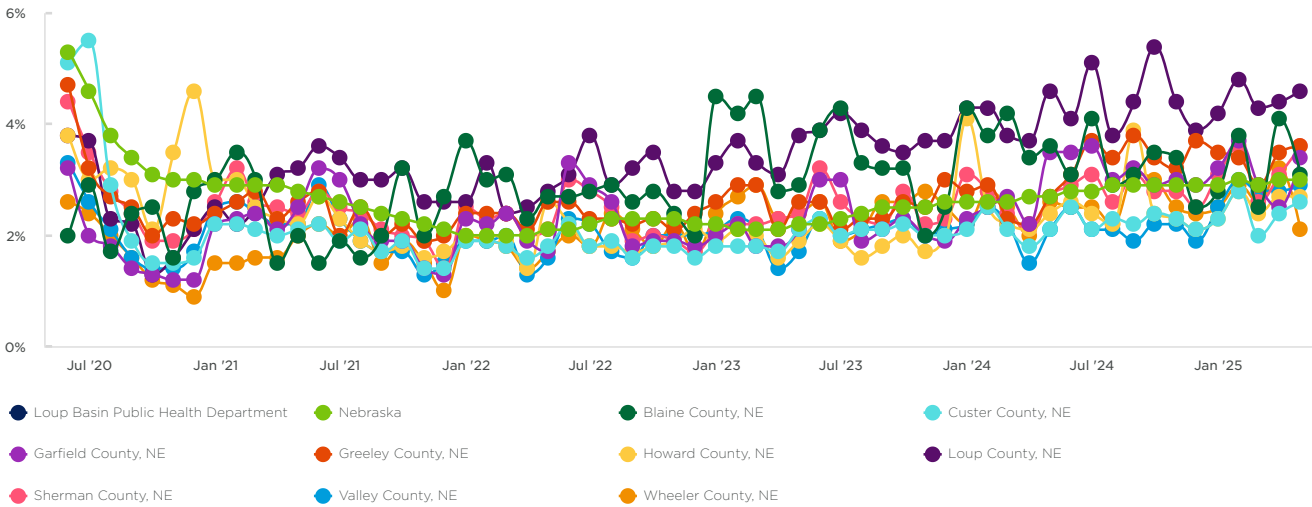
Sources: US Census Bureau ACS 5-year 2019-2023

Total Employed per capita

Blaine County, NE	8.3%
Custer County, NE	29.6%
Garfield County, NE	35.1%
Greeley County, NE	17.3%
Howard County, NE	
Loup County, NE	3.7%
Sherman County, NE	16.6%
Valley County, NE	30%
Wheeler County, NE	8.5%
Loup Basin Public Health Department	23.4%
Nebraska	47%

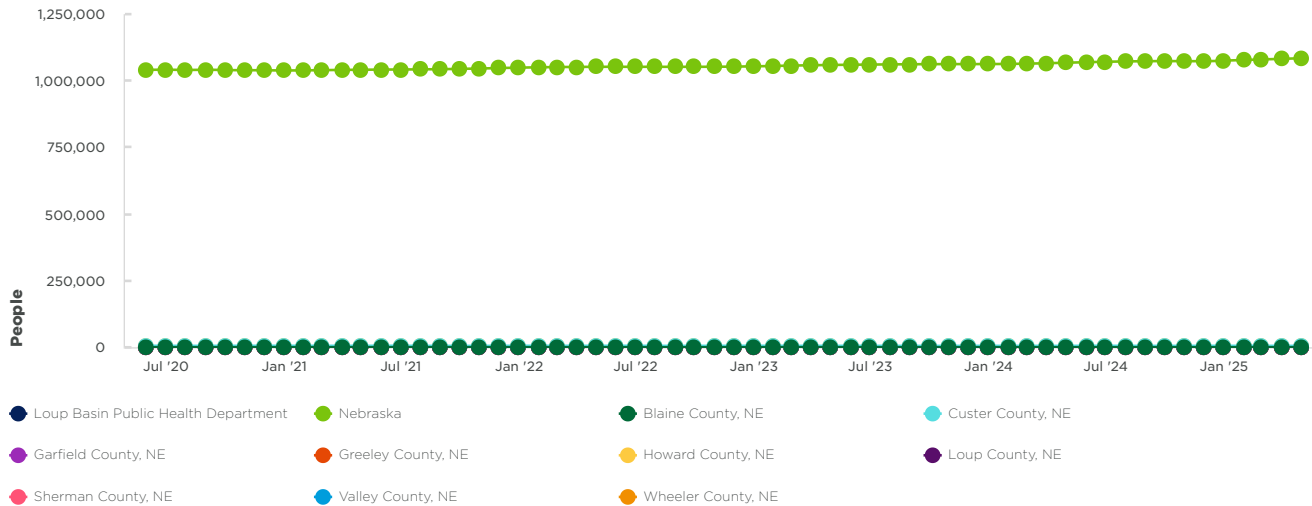
Sources: CBP 2023; US Census Bureau ACS 5-year 2019-2023

Unemployment Rate



Sources: BLS LAUS

Labor Force

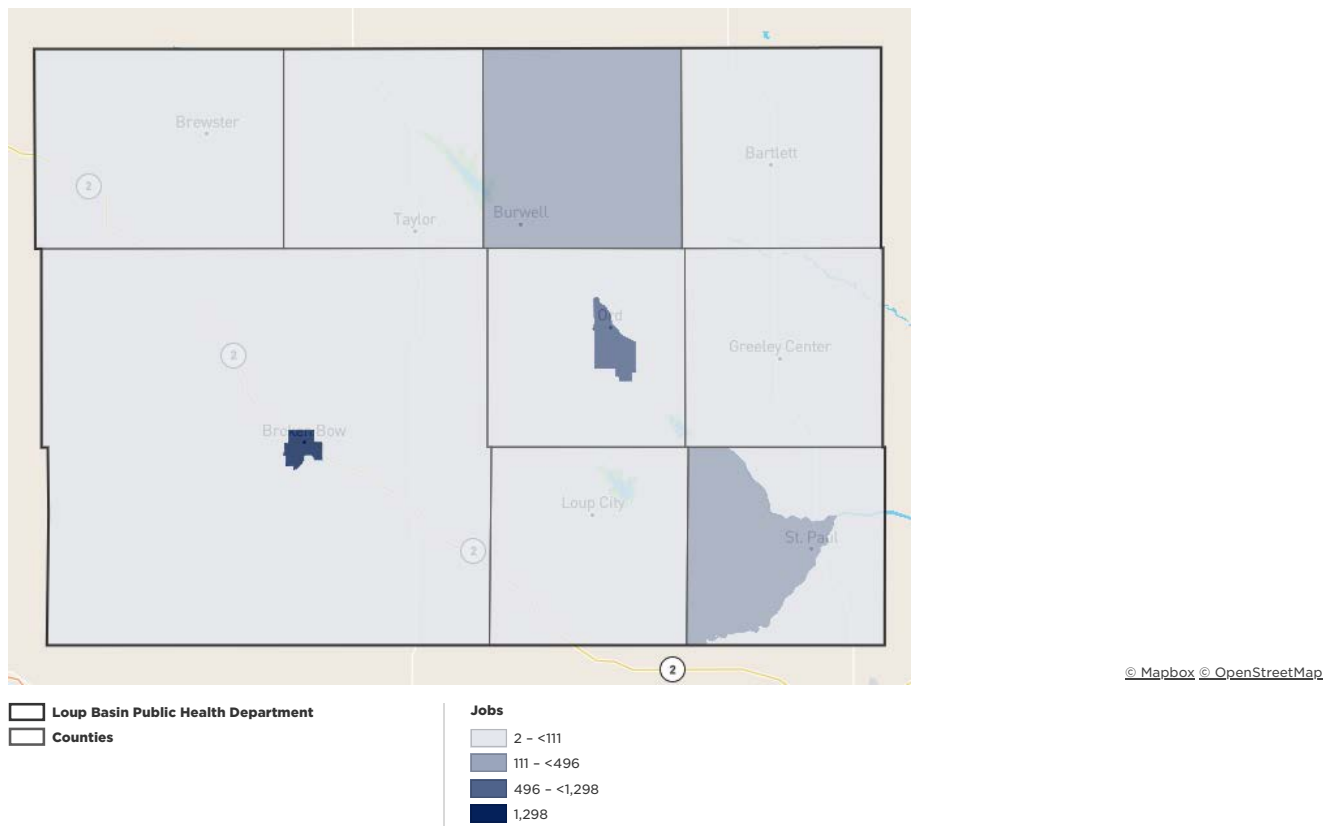


Sources: BLS LAUS

Drive time is lost time.

When we can travel freely to work, the doctor's office, healthy grocery stores, and parks, we're more likely to go. If those services and goods are inside our neighborhood, that's even better. When a task is challenging due to lack of a vehicle or long rides on public transportation, the effect on our health adds up. Without long commutes, we have more time to focus on living a healthy and fulfilled life.

Average Number of Jobs within a 30 Minute Public Transit



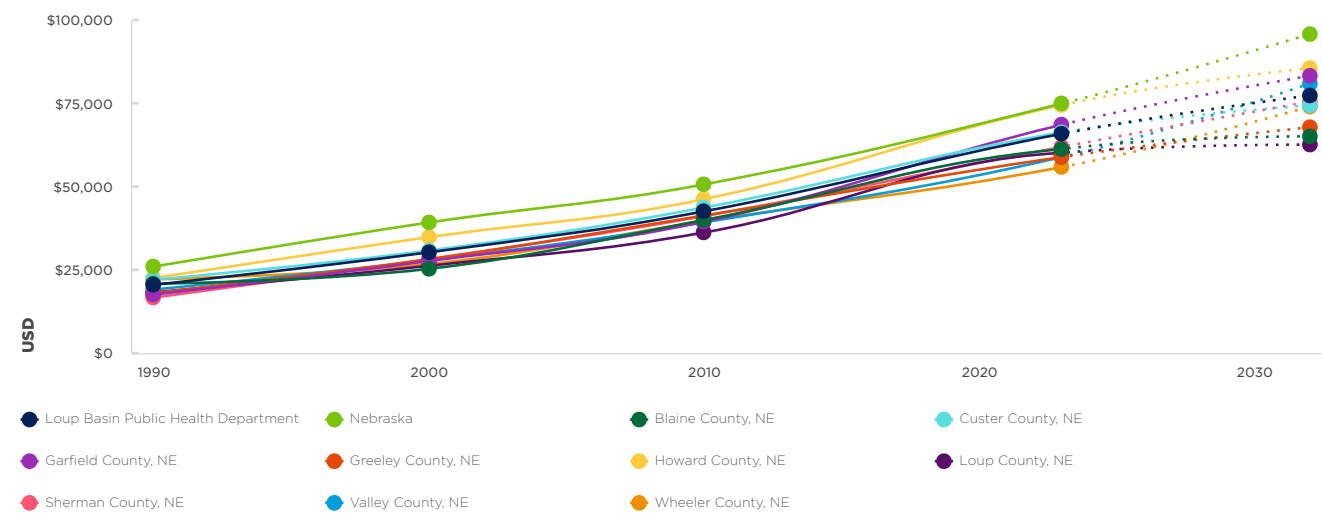
Sources: Access Across America Transit 2021

Income affects our quality of life.

Earning a living wage means making enough money to be able to live in our community, including paying for safe shelter, food, and other basic needs. For people who work lower income jobs, this isn't always possible. When the cost to live in our community is high, or the jobs available don't pay enough, families have to choose between needs – paying their rent or buying food, getting medical care or having enough gas to get to work. **No one should have to choose between eating or having safe shelter.** When people can earn a fair wage, it affects their entire wellbeing.

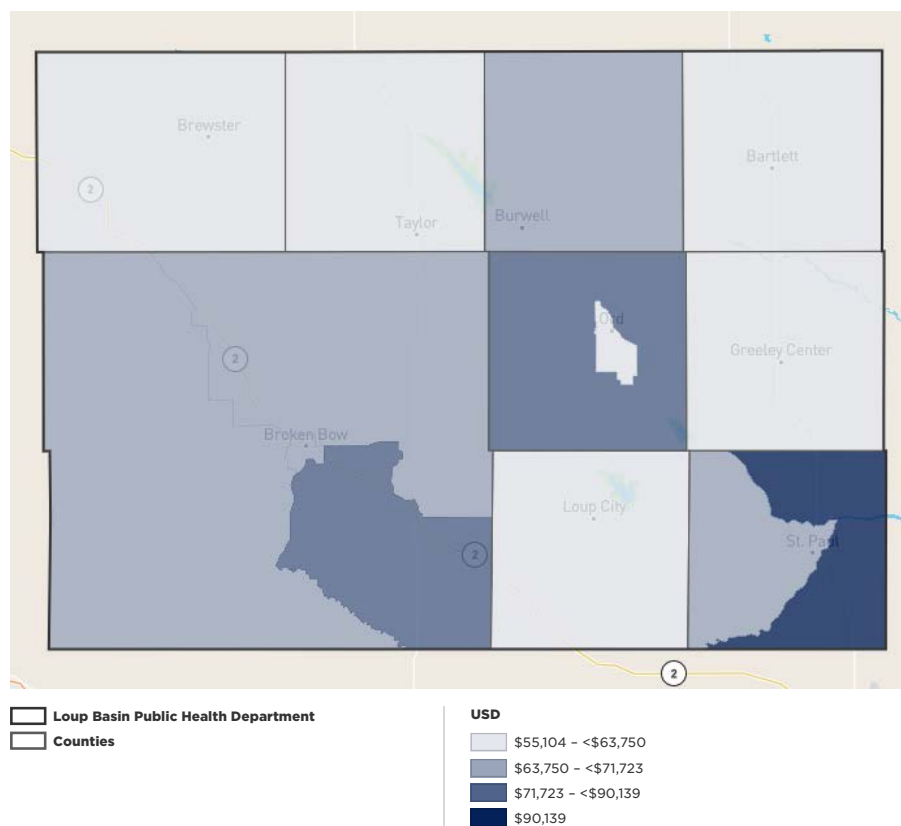
Median Household Income Over Time and Map

Median Household Income



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

Median Household Income

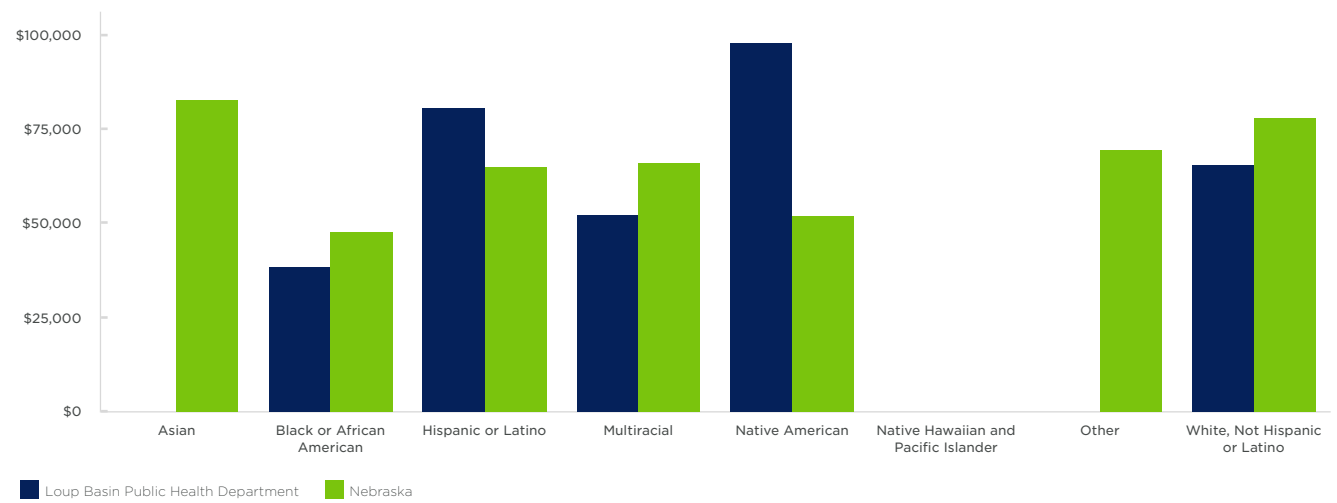


© Mapbox © OpenStreetMap

Sources: US Census Bureau ACS 5-year 2019-2023

Median Household Income by Householder's Race/Ethnicity

Median Household Income by Race/Ethnicity



Sources: US Census Bureau ACS 5-year 2019-2023

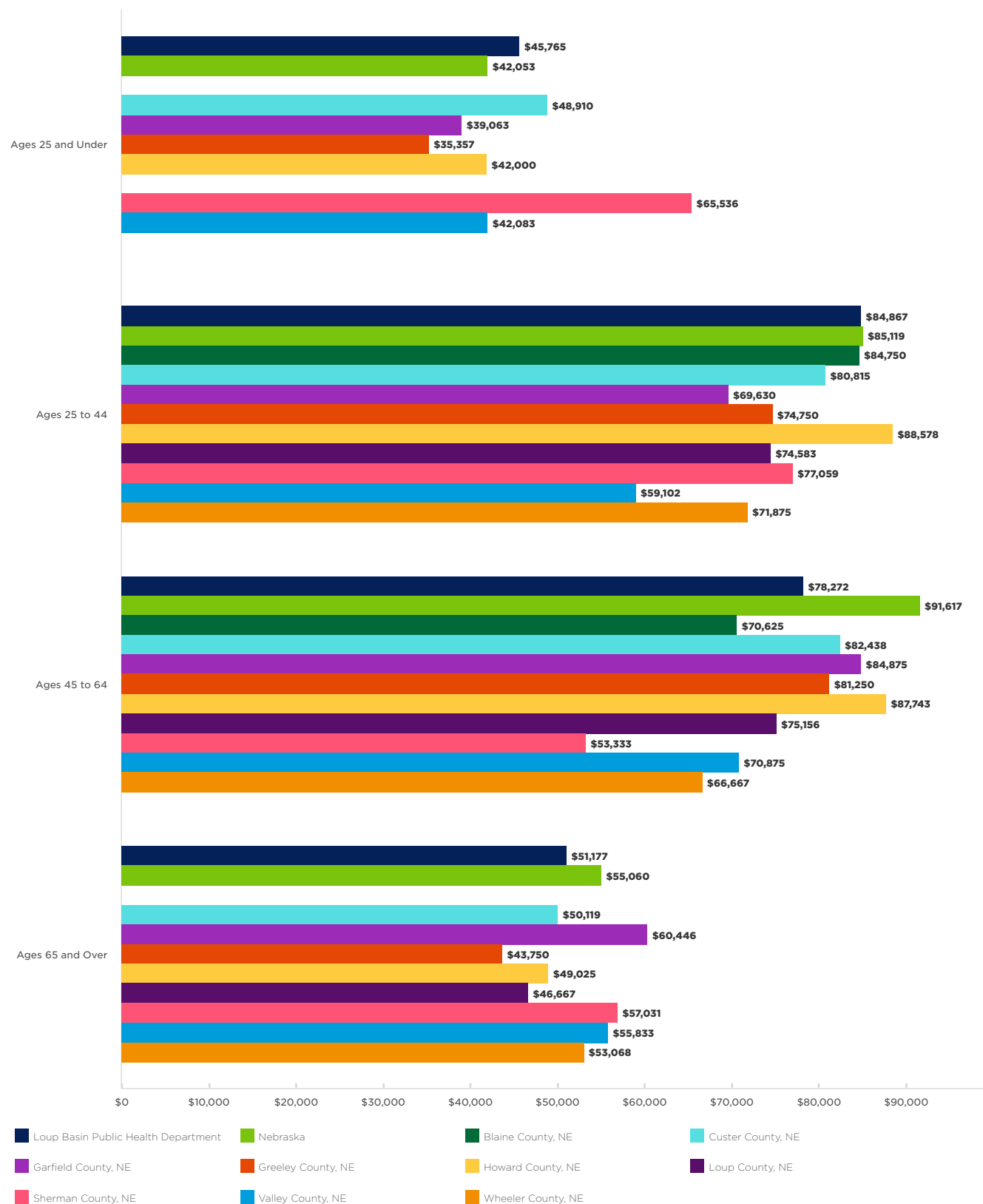
Note: unless otherwise indicated, data includes both Hispanic or Latino and non-Hispanic or Latino people.

▲▼ Data Sources	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼	Loup County, NE ▲▼	Sherman County, NE ▲▼
2019-2023 Asian	No data	No data	No data	No data	No data	No data	No data
2019-2023 Black or African American	No data	\$38,802	No data	No data	No data	No data	No data
2019-2023 Hispanic or Latino	No data	\$49,013	No data	No data	\$87,760	No data	\$13,580
2019-2023 Multiracial	No data	\$77,500	\$4,286	No data	\$48,879	No data	No data
2019-2023 Native American	No data	No data	No data	No data	No data	No data	No data
2019-2023 Native Hawaiian and Other Pacific Islander	No data	No data	No data	No data	No data	No data	No data
2019-2023 Other	No data	No data	No data	No data	\$88,542	No data	No data
2019-2023 White - Not Hispanic or Latino	\$61,250	\$67,045	\$68,833	\$59,567	\$75,026	\$54,205	\$63,079

Sources: US Census Bureau ACS 5-year 2019-2023

Median Household Income by Householder's Age

Median Household Income by Householder Age



Sources: US Census Bureau ACS 5-year 2019-2023

Learn more:

¹ [Zajacova, Anna, and Elizabeth M. Lawrence. "The Relationship between Education and Health: Reducing Disparities through a Contextual Approach." *Annual Review of Public Health*, vol. 39, Apr. 2018, pp. 273-89. PubMed Central. <https://doi.org/10.1146/annurev-publhealth-031816-044628>](https://doi.org/10.1146/annurev-publhealth-031816-044628)

2. ["Early Childhood: High Return on Investment." Center for High Impact Philanthropy - University of Pennsylvania, https://www.impact.upenn.edu/early-childhood-toolkit/why-invest/what-is-the-return-on-investment/](https://www.impact.upenn.edu/early-childhood-toolkit/why-invest/what-is-the-return-on-investment/)
3. [Hummer, Robert A., and Elaine M. Hernandez. "The Effect of Educational Attainment on Adult Mortality in the United States." *Population Bulletin*, vol. 68, no. 1, June 2013, pp. 1-16.](#)
4. [Picker, Les. *The Effects of Education on Health*. 3. National Bureau of Economic Research, Mar. 2007. https://www.nber.org/digest/mar07/effects-education-health.](https://www.nber.org/digest/mar07/effects-education-health)
5. [Zimmerman, E. and S. H. Woolf. 2014. *Understanding the Relationship Between Education and Health. NAM Perspectives. Discussion Paper, National Academy of Medicine, Washington, DC. https://doi.org/10.31478/201406a*](https://doi.org/10.31478/201406a)
6. [Oreopoulos, Philip. "Do Dropouts Drop out Too Soon? Wealth, Health and Happiness from Compulsory Schooling." *Journal of Public Economics*, vol. 91, Dec. 2007, pp. 2213-29. DOI.org \(Crossref\), https://doi.org/10.1016/j.jpubeco.2007.02.002.](https://doi.org/10.1016/j.jpubeco.2007.02.002)
7. [Wilson, S. H., and G. M. Walker. "Unemployment and Health: A Review." *Public Health*, vol. 107, no. 3, May 1993, pp. 153-62. ScienceDirect, https://doi.org/10.1016/S0033-3506\(05\)80436-6.](https://doi.org/10.1016/S0033-3506(05)80436-6)

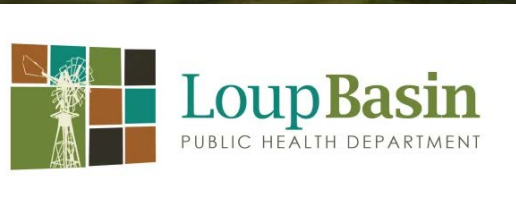
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Loup Basin Public Health Department

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Loup Basin Public Health Department Community Health Assessment

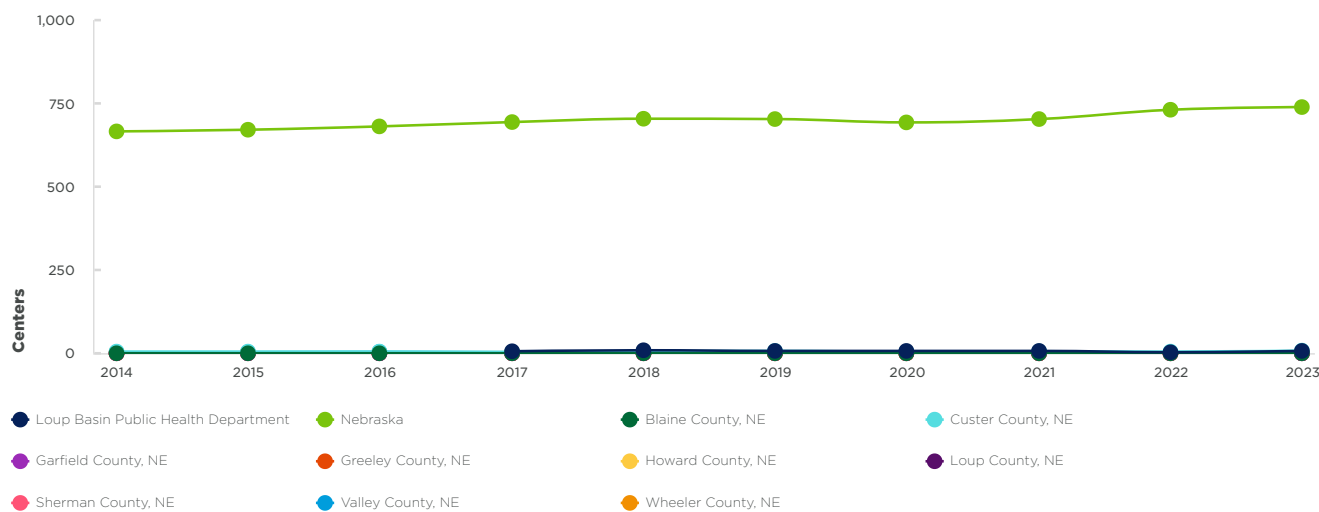
How We Start Matters

When mothers and babies are healthy, our entire community is better. To make sure every baby has the best start in life, we must also focus on the health of their mothers. A healthy life begins long before birth, starting with resources for parents before pregnancy and continuing with support and access to medical care before, during, and after their pregnancy. Making sure people in all areas of our community have equal chances for healthy pregnancies and births will give every baby the start to life they deserve.

Our children deserve quality childcare.

Finding trusted, reliable, and affordable childcare is a challenge for families no matter how much money they make. Having at least one parent employed is required for most families to provide for their children. A lack of childcare can lead to more women leaving the workforce, families slipping into poverty, and food insecurity for children. Access to affordable childcare helps parents keep their jobs and afford housing, giving them financial security and opportunity. They can then pay for consistent childcare, along with their housing, healthy food, and medical care—which all benefit health. Parents need access to quality childcare options close to where they live in order to keep a stable job and allow their children to thrive in safe, caring environments.

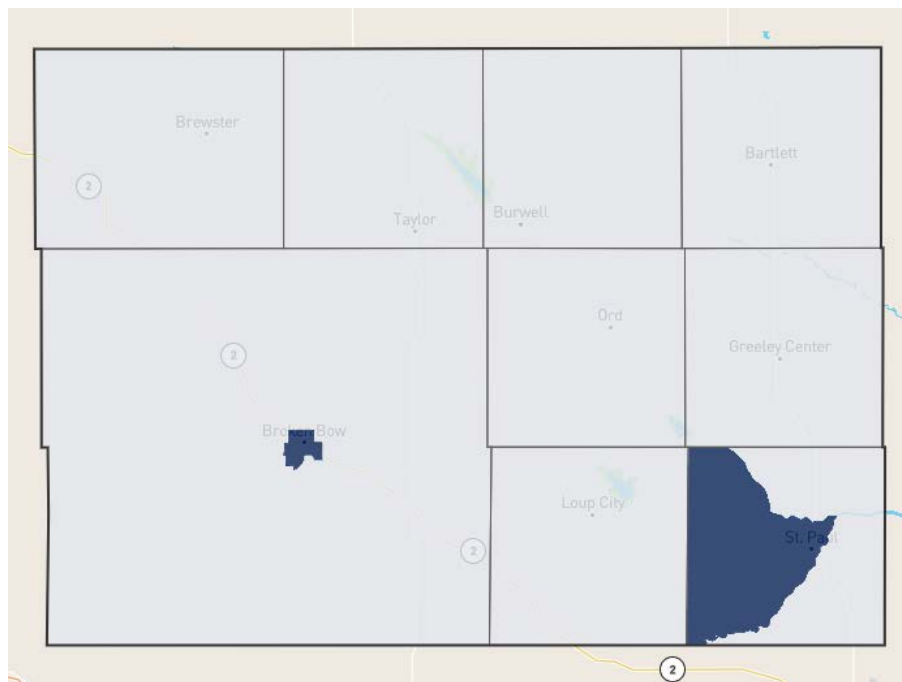
Child Care Centers Over Time



Sources: CBP

Note: If an area has fewer than 3 child care centers in a given year, data for those time periods is suppressed for that area. The businesses shown here typically care for preschoolers, but may offer pre-K or kindergarten educational programs as well as care for older children outside of school.

Child Care Centers



© Mapbox © OpenStreetMap

Loup Basin Public Health Department
 Counties

Child Care Centers
 0 - <3
 3 - 4

Sources: CBP 2023

Note: Data for ZIP Codes with fewer than 3 child care centers is suppressed. The businesses shown here typically care for preschoolers, but may offer pre-K or kindergarten educational programs as well as care for older children outside of school.

It takes a village to raise a child.

Parenting is a difficult task for anyone, and even more so for a single parent or grandparent raising a child. The health of caregivers and children can suffer because of the stress, increasing the risk for some chronic diseases or mental health issues. Single parents struggle more financially than families with more than one parent, affecting every area of life including health. Supporting caregivers in the important task of providing for children helps our entire community thrive.



Single Parent/Guardian Families with Children

31.5%

Families with children

Loup Basin Public Health Department

28.9%

Families with children

Nebraska



Single Parent/Guardian Families with Children

1,016

Families

Loup Basin Public Health Department

64,543

Families

Nebraska



WIC Authorized Stores

No data

Stores

Loup Basin Public Health Department

377

Stores

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023; USDA ERS FEA 2016

Geography	2019-2023 Single Householder Family with Children (Percent)	2019-2023 Single Householder Family with Children (Number)	2016 WIC Authorized Stores
Blaine County, NE	4.2%	1	No data
Custer County, NE	35.1%	454	5
Garfield County, NE	32%	48	1
Greeley County, NE	24.5%	58	2
Howard County, NE	23.5%	165	1
Loup County, NE	26.8%	15	No data
Sherman County, NE	42.3%	104	1
Valley County, NE	35%	165	3
Wheeler County, NE	13.3%	6	No data
Loup Basin Public Health Department	31.5%	1,016	No data
Nebraska	28.9%	64,543	377

Sources: US Census Bureau ACS 5-year 2019-2023; USDA ERS FEA 2016

Poverty Rate by Family Composition

Geography	2019-2023 Married Couple with Children	2019-2023 Single Females with Children	2019-2023 Single Males with Children
Loup Basin Public Health Department	4.4%	29.5%	7.7%
Nebraska	4.3%	32.4%	13.1%
Blaine County, NE	0%	100%	No data
Custer County, NE	4.5%	28.2%	5.2%
Garfield County, NE	2.9%	70%	61.1%
Greeley County, NE	10.6%	60%	0%
Howard County, NE	3.4%	11.1%	0%
Loup County, NE	0%	0%	0%
Sherman County, NE	7%	0%	23.5%
Valley County, NE	3.3%	55.8%	8.9%
Wheeler County, NE	0%	100%	0%

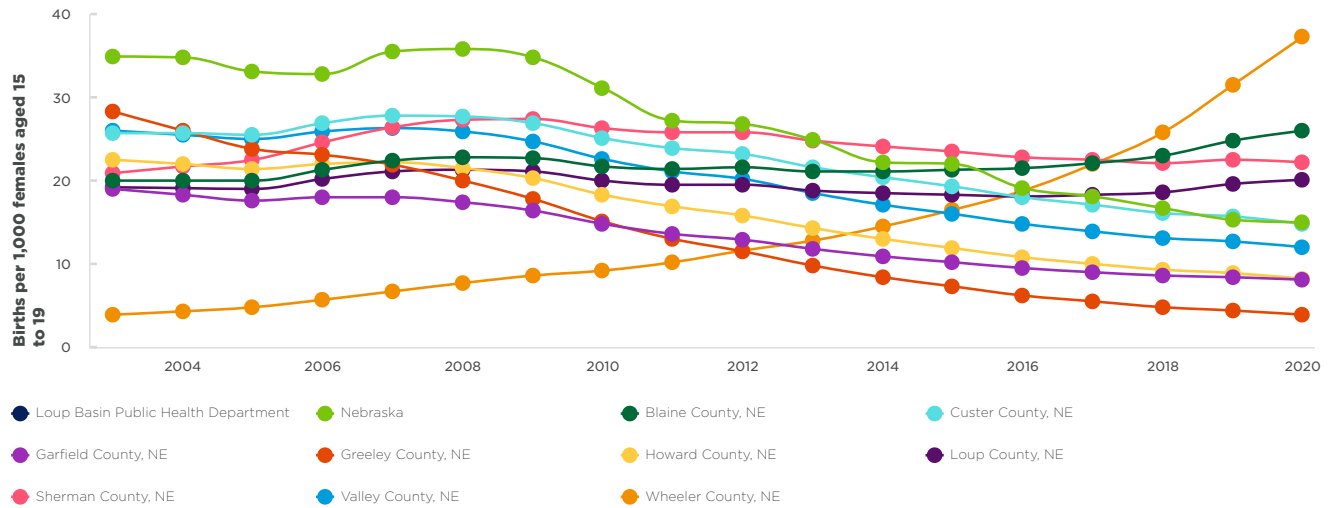
Sources: US Census Bureau ACS 5-year 2019-2023

This data represents the percent of each family type that is in poverty.

Address poverty to decrease teen births.

Teen pregnancies occur in all communities, but they are more likely to occur in areas of poverty. Programs or healthcare services that equip teens to make healthy choices can help, but research also shows factors like unemployment, lack of education, and low income are connected to higher teen birth rates. Meeting those needs can help reduce the difference in teen birth rate from one area to another, giving everyone an equal chance to prevent teen pregnancy. Sex education, access to contraception, healthcare for sexually transmitted infection, and sexual violence prevention can help lower teen pregnancy rates in our community.

Teen Birth Rate

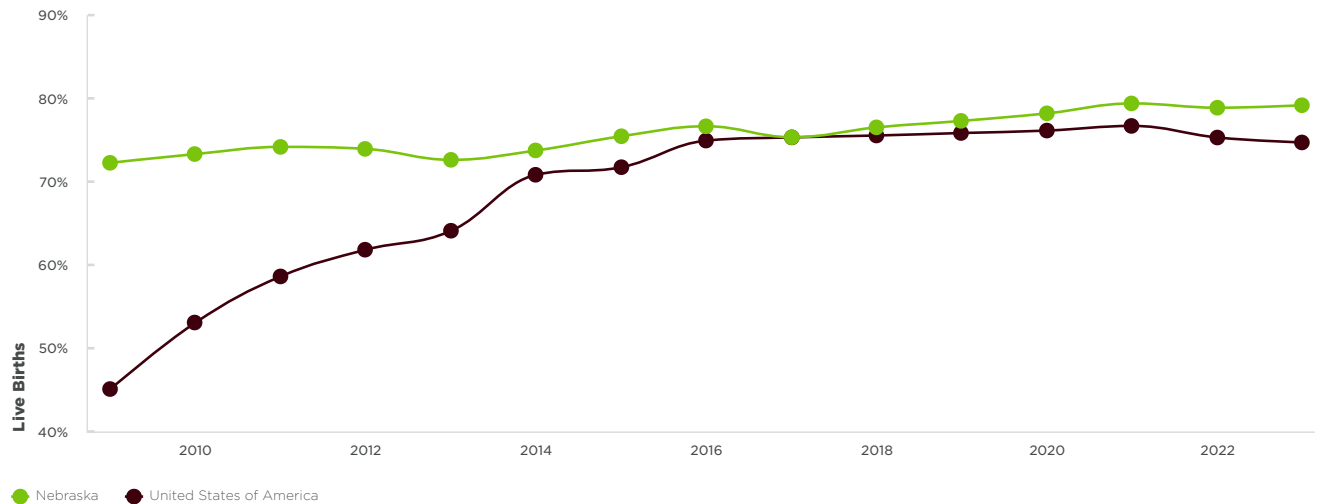


Sources: CDC

Healthy pregnancies lead to healthy births.

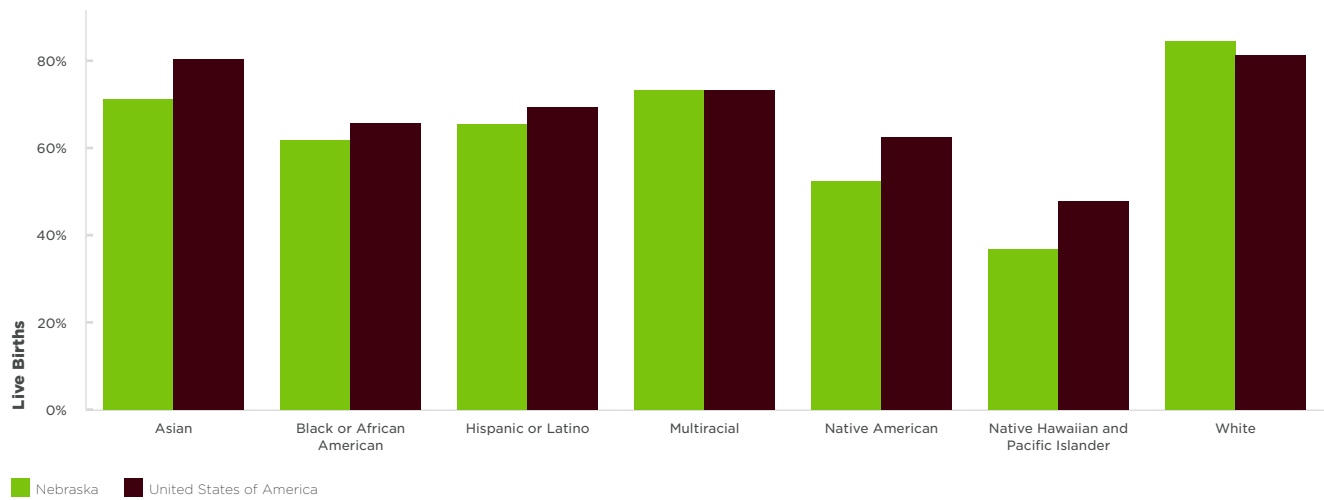
Regular visits to the doctor during pregnancy reduce the risks of pregnancy complications, helps prevent risks to the baby, and helps parents learn about healthy choices they can make along the way. For a mother to receive regular prenatal care, doctors must be easy to access, the care must be affordable, insurance must be available, and moms must have jobs that allow them to attend visits, which often take significant time over the course of a pregnancy. For parents who already face other barriers in life, including young parents or people in certain racial or ethnic groups, they may be even less likely to access healthcare early in pregnancy.

Prenatal Care Started in First Trimester



Sources: CDC WONDER Natality

Prenatal Care Started in First Trimester by Mother's Race/Ethnicity



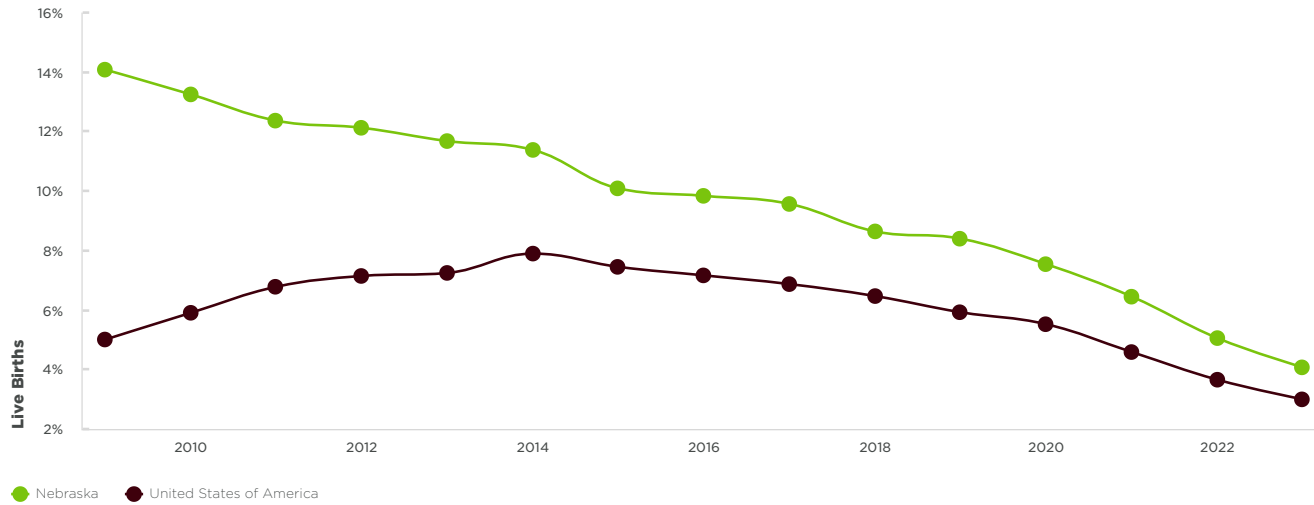
Sources: CDC WONDER Natality 2019-2023

Note: Unless otherwise indicated, all data is non-Hispanic or Latino.

Let’s help moms stop smoking.

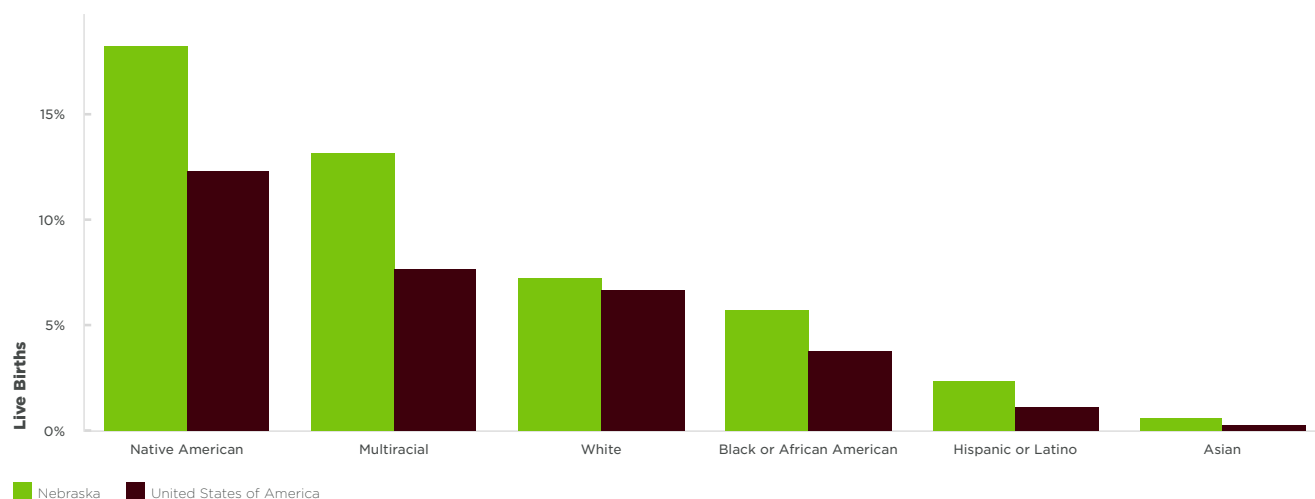
Nicotine is incredibly addictive. Quitting smoking is difficult for anyone, often taking multiple tries. When a woman becomes pregnant, stopping smoking is another challenge added to an already stressful time. However, stopping tobacco use is incredibly important for a safe pregnancy and baby. A mother who’s able to stop smoking will reduce the risk of preterm birth and low birth weight, but they need additional support. Counseling, substance use programming, social support, incentives, and more can all help a mom sustain the choice to quit smoking.

Tobacco Use During Pregnancy



Sources: CDC WONDER Natality

Tobacco Use During Pregnancy by Mother's Race/Ethnicity



Sources: CDC WONDER Natality 2019-2023

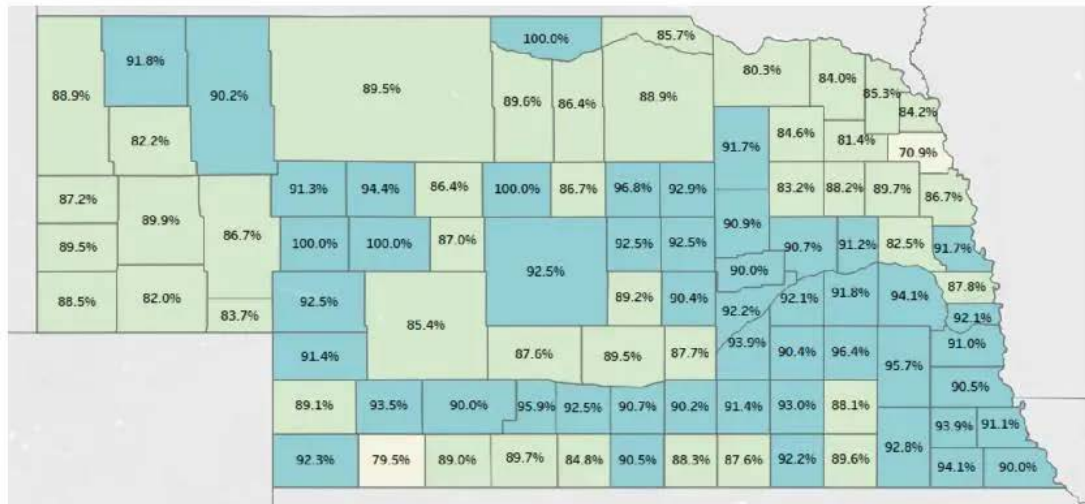
Note: Unless otherwise indicated, all data is non-Hispanic or Latino.

Breastfeeding moms need fewer barriers.

Every mother should be able to choose if breastfeeding or formula feeding is right for them, and should not be judged for their choice. However, not all mothers are physically able to breastfeed or live in an environment that makes breastfeeding a likely choice. Some may not have access to the information that breast milk provides ideal nutrition, can prevent illness, and reduces the mother's chance of developing some diseases. It also takes family, community, and financial support to make breastfeeding a reality. That support includes maternity leave, access to breast pumps and supplies, jobs that support mothers who need to pump during their shift, and community acceptance. If we want more babies to receive the best possible nutrition, we all have a role to play.

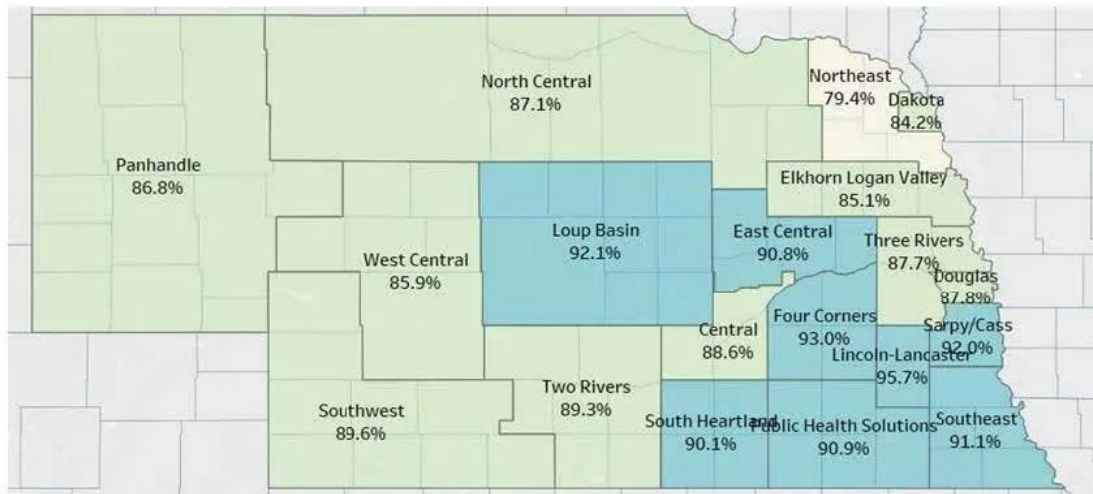
Breastfeeding Initiation by County

Breastfeeding Initiation by County

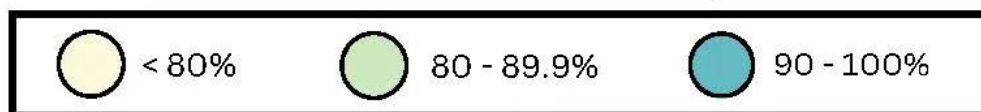


Source: United States Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics, Division of Vital Statistics, 2023 Natality Historic File

Breastfeeding Initiation by Health Department

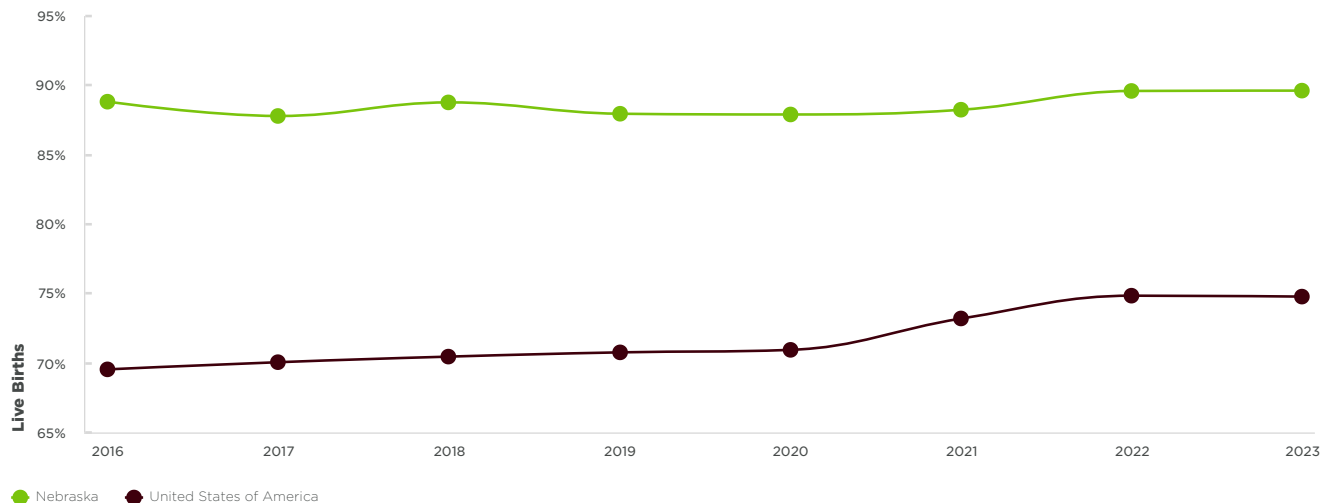


Source: United States Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics, Division of Vital Statistics, 2023 Natality Historic File



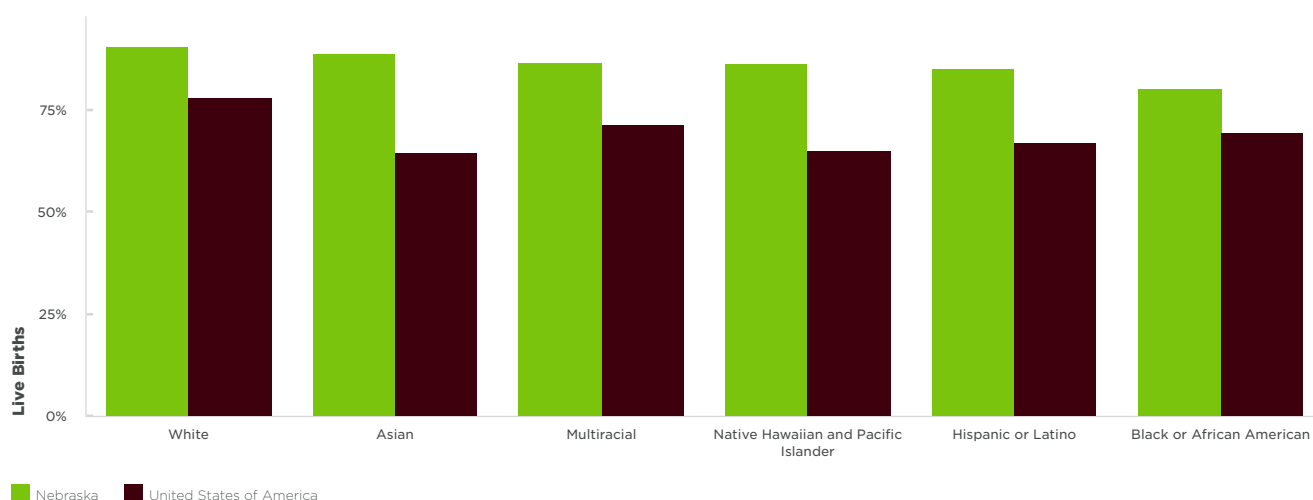
Adapted from Breastfeeding Support by Kansas County, Kansas Breastfeeding Coalition 2024.

Infants Breastfed Before Being Discharged from Hospital



Sources: CDC WONDER Natality

Infants Breastfed Before Being Discharged from Hospital by Mother's Race/Ethnicity



Sources: CDC WONDER Natality 2019-2023

Note: Unless otherwise indicated, all data is non-Hispanic or Latino.

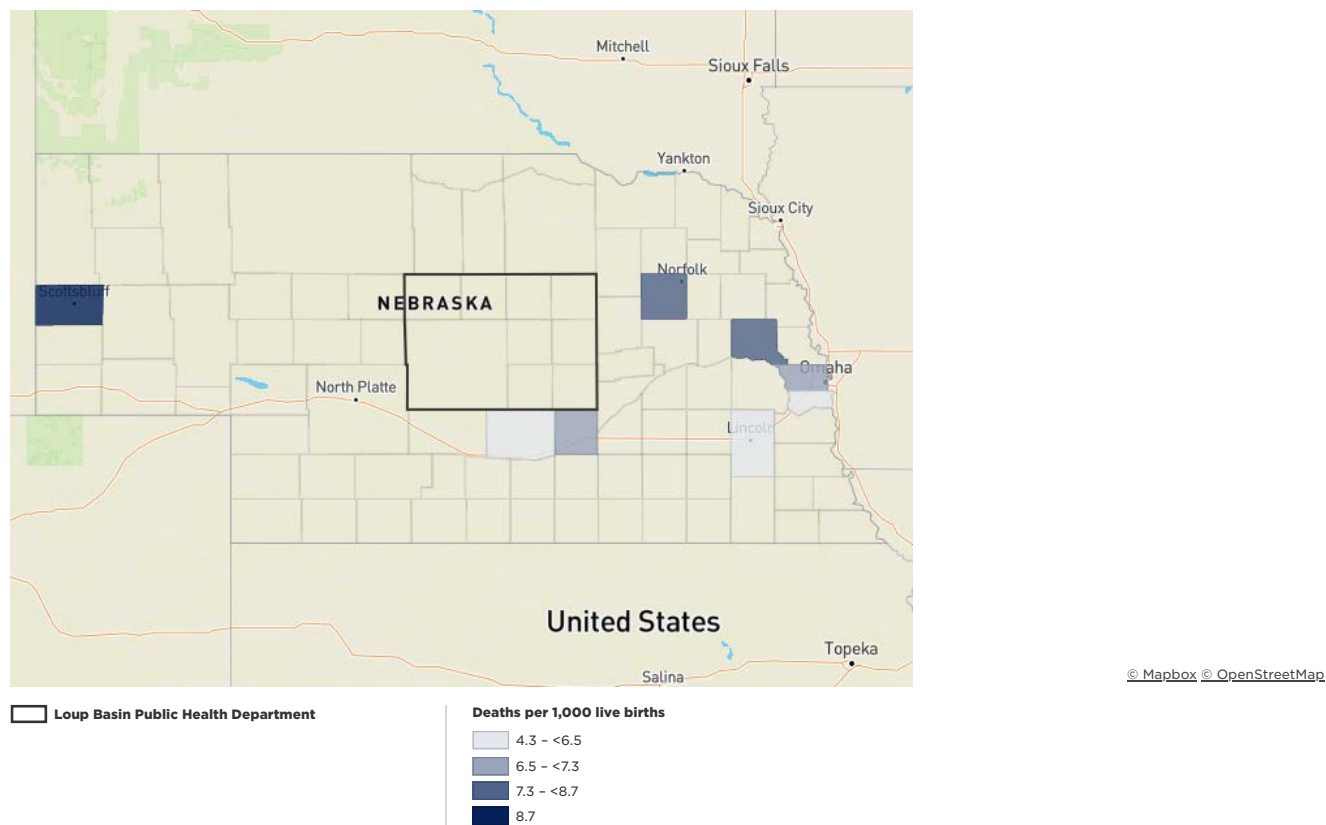
Every baby should have a chance.

Reducing infant mortality starts well before pregnancy with the mother's own health and continues with regular medical care throughout pregnancy. This is another piece of information that can show differences in healthcare access. Families in rural communities and Black families tend to have fewer doctors, hospitals, and other resources available where they live. Because of the lack of access, rural families can have higher rates of infant mortality than those in cities, and Black families can have higher rates than white families. No family should have to suffer the loss of a child. **Improving access to healthcare for every geographic region and racial or ethnic group benefits us all.**

♥ **5.7**
Deaths per 1,000 live births
Infant Mortality Rate
Nebraska

Sources: National Center for Health Statistics - Natality and Mortality Files 2016-2022 via RWJF County Health Rankings & Roadmaps 2025

Infant Mortality Rate



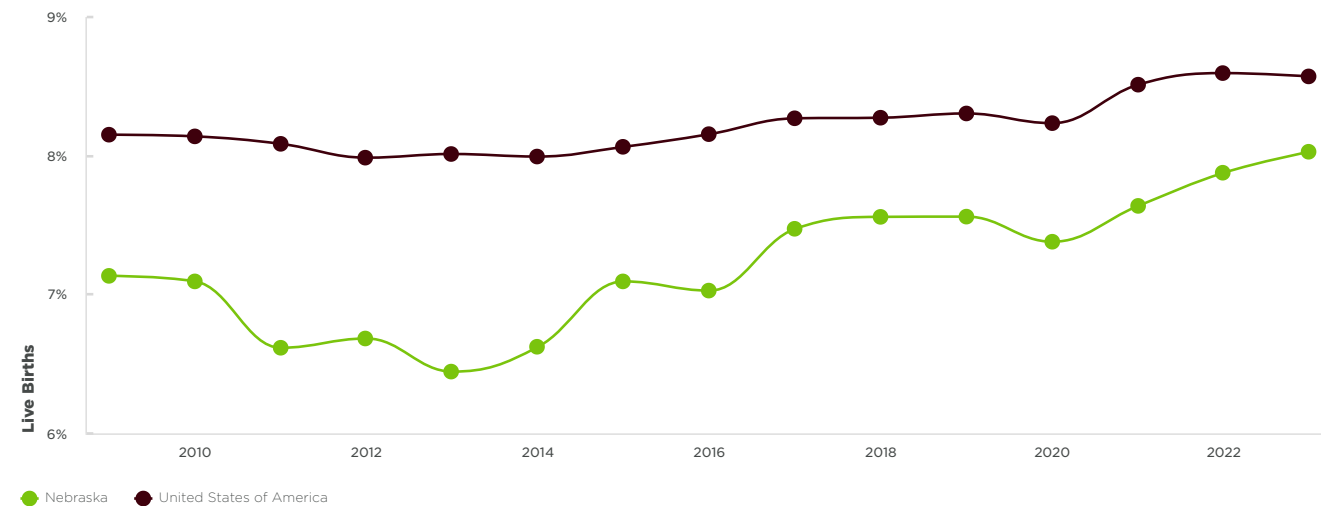
Sources: National Center for Health Statistics - Natality and Mortality Files 2016-2022 via RWJF County Health Rankings & Roadmaps 2025

A strong start paves the way for a healthy life.

Babies who are born preterm are more likely to have serious health complications, including low birth weight, that can impact their health for the rest of their lives. Factors such as a mother's age, ongoing health conditions, exposure to pollution, substance use, the effects of racism, and more increase the risk of a baby being born too early and with too low of a birth weight. When preterm births and low birth weight outcomes rise in our community, our families need better access to education, resources, and healthcare providers to help them deliver a healthy baby.

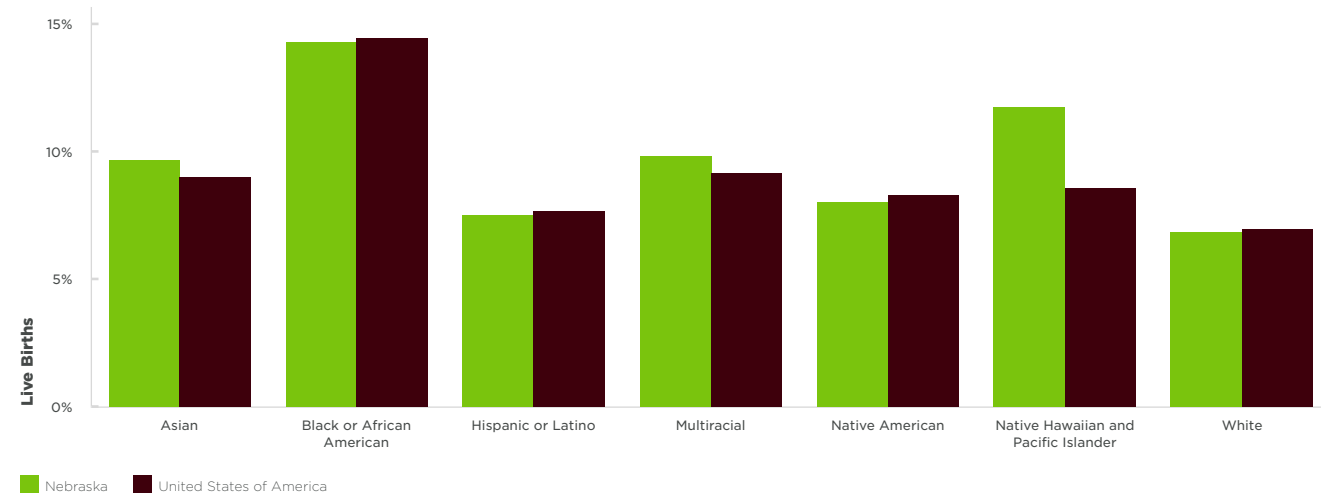
Low Birth Weight

Low Birth Weight



Sources: CDC WONDER Natality

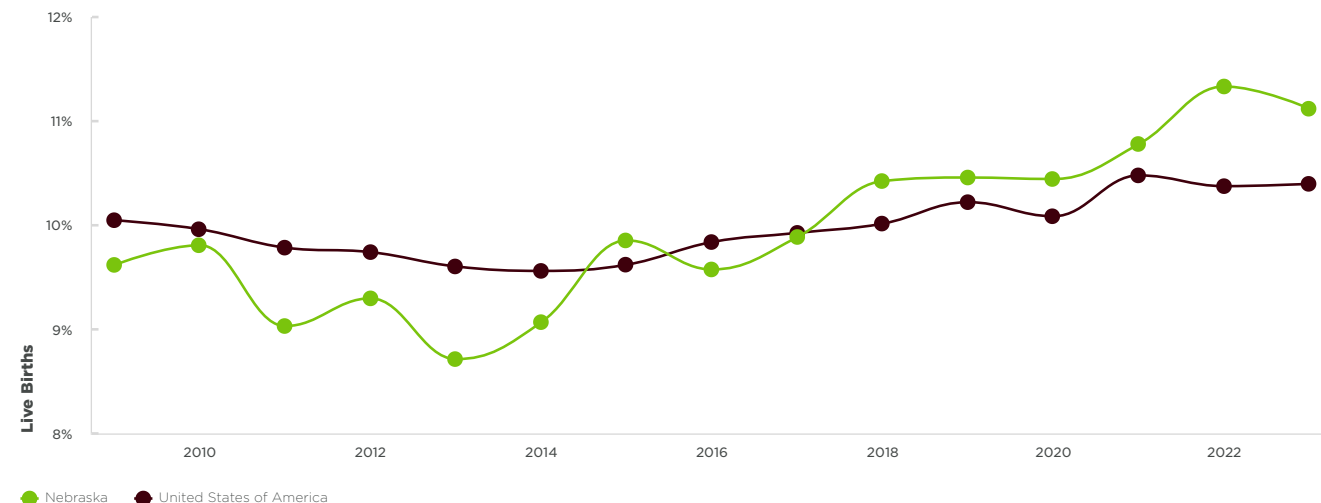
Low Birth Weight Rate by Mother's Race/Ethnicity



Sources: CDC WONDER Natality 2019-2023

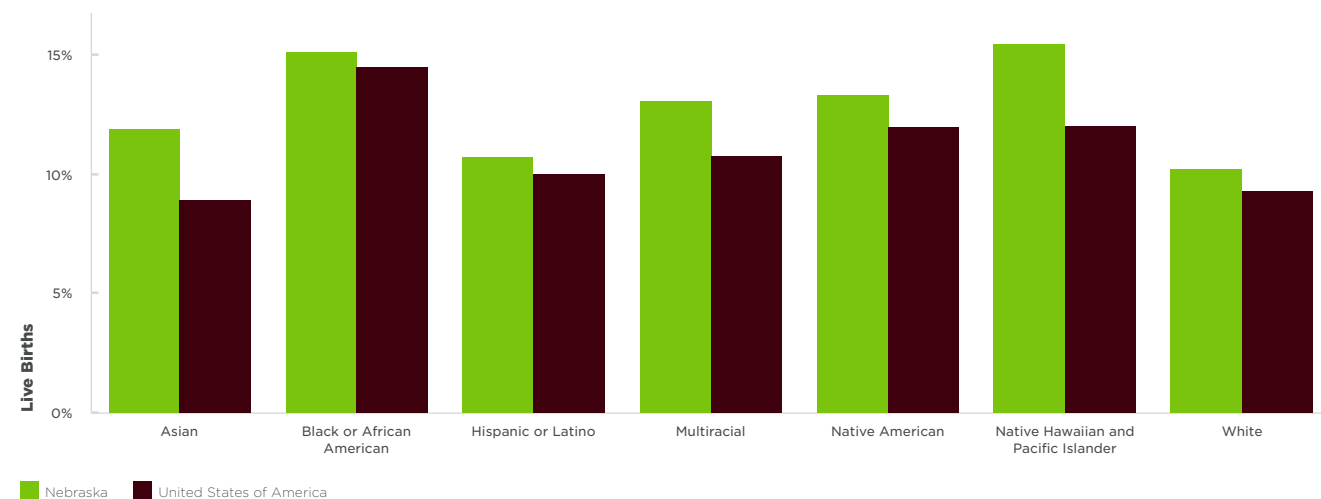
Preterm Births

Preterm Births



Sources: CDC WONDER Natality

Preterm Birth Rate by Mother's Race/Ethnicity



Sources: CDC WONDER Natality 2019-2023

Learn more:

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Loup Basin Public Health Department

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Loup Basin Public Health Department Community Health Assessment

We don't control every choice.

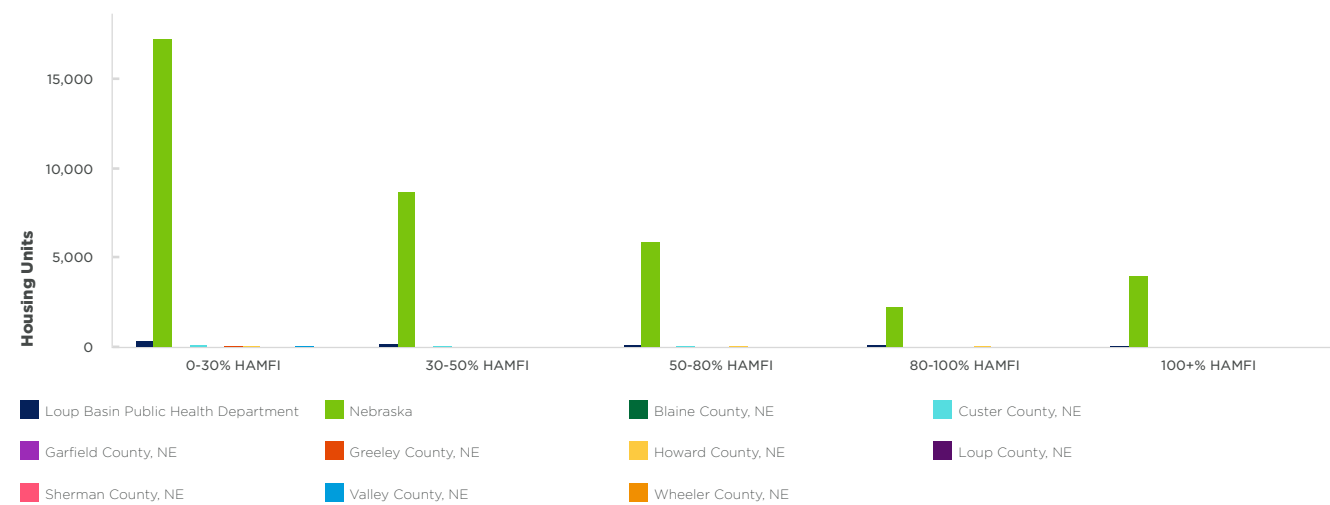
We all make health decisions every day, but our health behaviors are not only determined by personal choice. Many of our daily actions are limited by what's available—or not—in our neighborhoods. If we don't have the means to secure quality, affordable housing in safe neighborhoods, we are far less likely to exercise outside and are more prone to environmental hazards. All aspects of our physical environment intersect and affect our lifelong health.

We all deserve to be safe at home.

Homes that are unsafe put people's health at risk. Safety is more than lack of crime in a neighborhood—it includes the physical structure of the home and whether or not it's safe to be there every day. People with lower incomes and from underserved areas may not have options other than homes with maintenance and safety issues that expose them to health risks. Unsafe homes, such as those with lead paint, may have negative effects on childhood development and can lead to many long-term health issues.

Presence of Severe Housing Problems by Owner vs Renter and Income

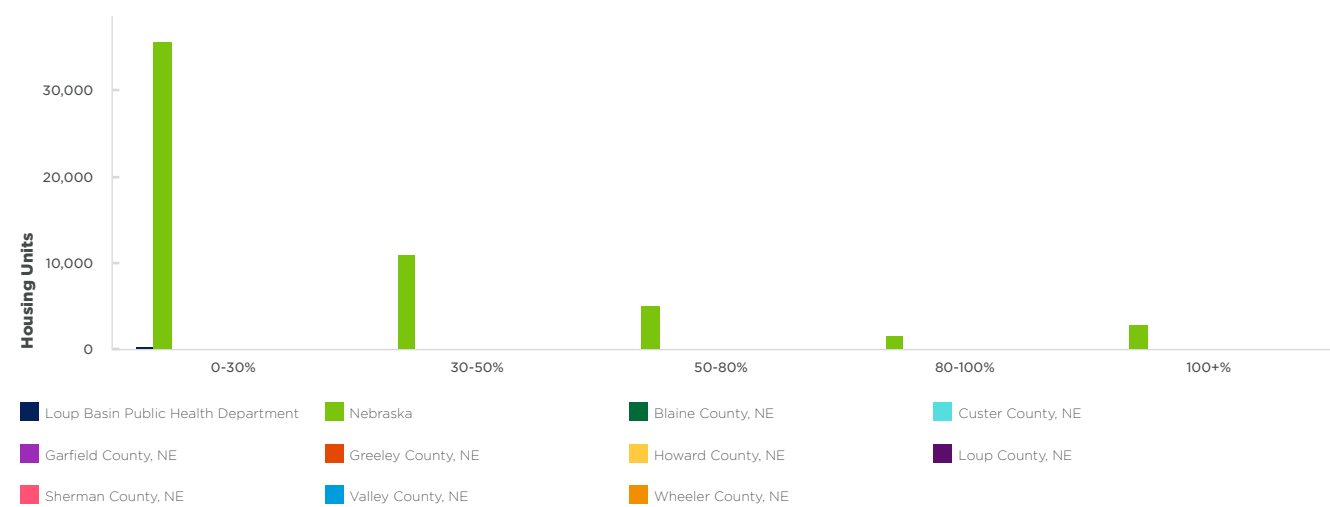
Owner-Occupied Homes with at Least 1 Severe Housing Problem by Owner Income



Sources: HUD CHAS 2017-2021

Severe Housing Problems include 1) lack complete kitchen facilities; 2) lack complete plumbing facilities; 3) household is severely overcrowded; and 4) household is severely cost burdened. HUD Area Median Family Income (HAMFI) is the median family income calculated by HUD for each jurisdiction in order to determine Fair Market Rents (FMRs) and income limits for HUD programs.

Renter-Occupied Homes with at Least 1 Severe Housing Problem by Renter Income

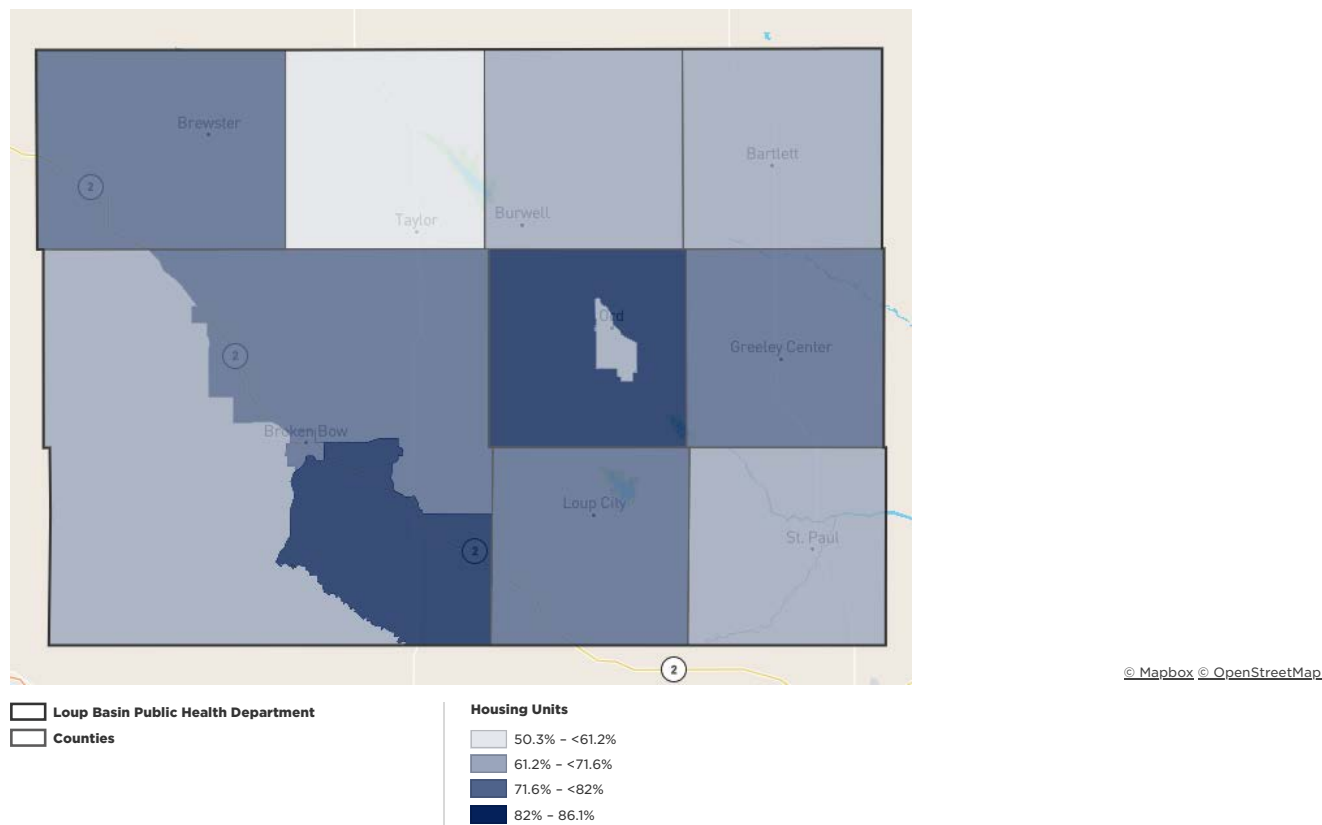


Sources: HUD CHAS 2017-2021

Severe Housing Problems include 1) lack complete kitchen facilities; 2) lack complete plumbing facilities; 3) household is severely overcrowded; and 4) household is severely cost burdened. HUD Area Median Family Income (HAMFI) is the median family income calculated by HUD for each jurisdiction in order to determine Fair Market Rents (FMRs) and income limits for HUD programs.

Map: Housing Units with Potential for Lead Paint

Housing Units with Potential for Lead Paint



Sources: US Census Bureau ACS 5-year 2019-2023

Playing outside is good for you.

From childhood to adulthood, being active and outdoors is good for your health. Playing, walking, running, or cycling at parks and green spaces are free ways to help prevent illness. Our neighborhoods should allow residents to engage in outdoor activity for improved physical, mental, and social wellbeing. Access to nature also has potential to improve health outcomes for people in lower income areas, giving them the same chance to be healthy as people who live in other areas.



Walkability Index

6

on a scale of 1 to 20

Loup Basin Public Health Department

9.2

on a scale of 1 to 20

Nebraska

Area Dedicated to Parks

No data

Loup Basin Public Health Department

3.5%

Nebraska

Sources: EPA 2021; openICPSR NaNDA 2018

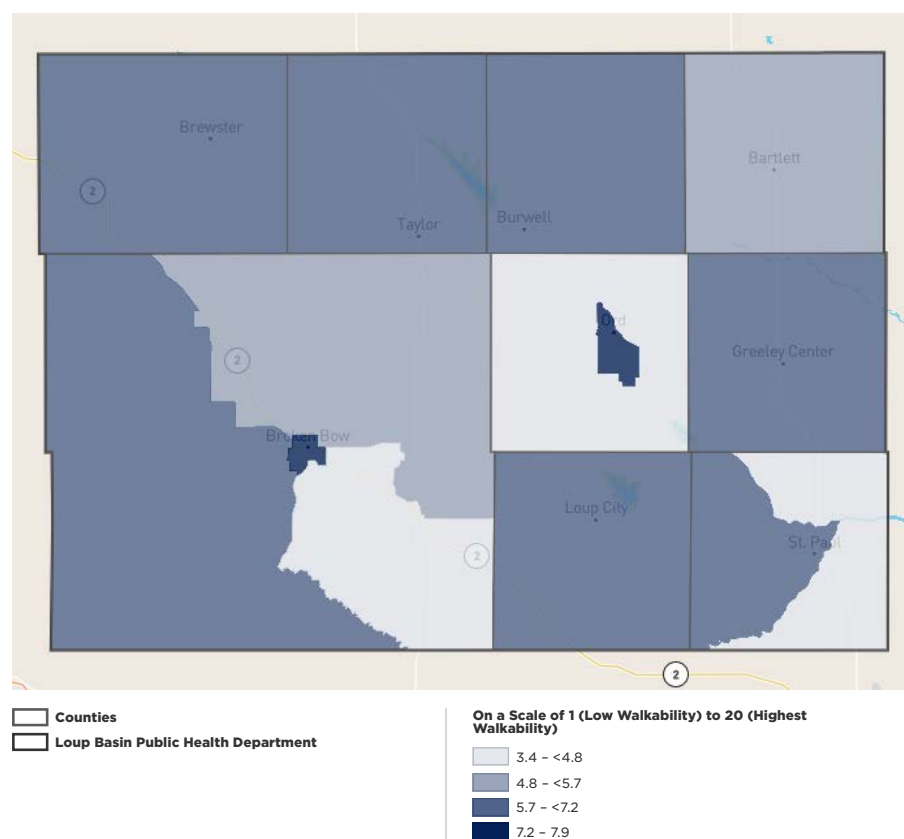
Note: Walkability improves as scores approach 20.

Geography	2021 Walkability Index	2018 Percent Area Covered by Parks
Blaine County, NE	6.7	2.3%
Custer County, NE	6	0.2%
Garfield County, NE	5.8	0%
Greeley County, NE	6	0%
Howard County, NE	5.6	0%
Loup County, NE	6.2	0%
Sherman County, NE	6.5	0%
Valley County, NE	5.9	0%
Wheeler County, NE	4.8	0%
Loup Basin Public Health Department	6	No data
Nebraska	9.2	3.5%

Sources: EPA 2021; openICPSR NaNDA 2018

Map: Walkability

Walkability Index



© Mapbox © OpenStreetMap

Sources: EPA 2021

Map: Percent Park Area

Area Dedicated to Parks



A long commute takes a daily toll.

When we can't afford to live where we work, we are more likely to have long commute times. Any time spent driving or riding public transit to work is lost time for creating social connection with our families, friends, and neighbors. The stress of rush hour also affects our mental health, and time spent sitting in traffic affects us physically. By improving job opportunities, access to services, and housing costs in our community, we can reduce daily stress and give people time back to connect with others, move their bodies, and other activities that impact their overall well-being.

Long Commute (30+ minutes), Drive Alone

20.4%

Commuters

Loup Basin Public Health Department

16.5%

Commuters

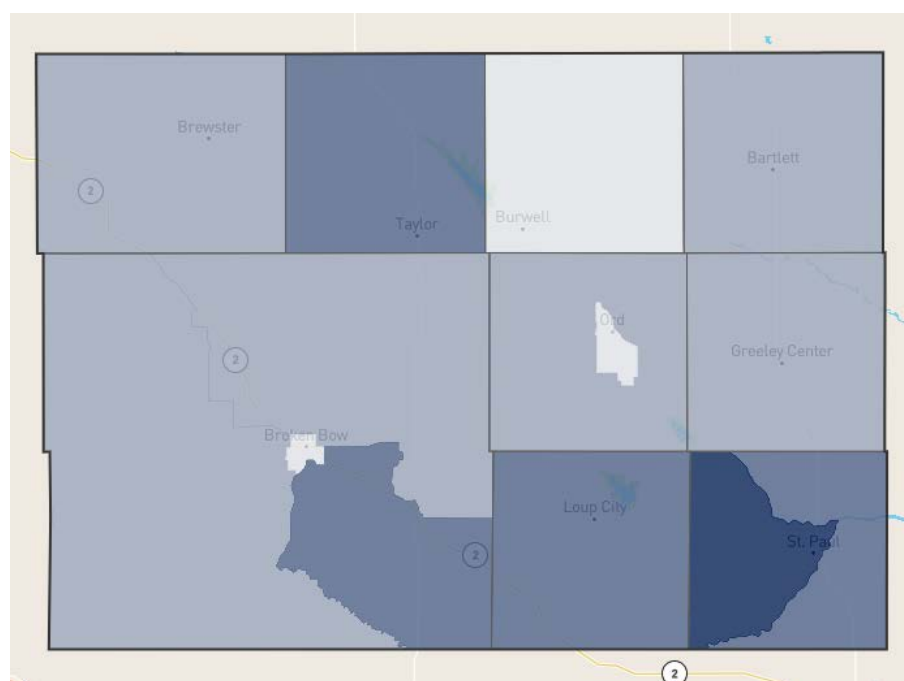
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

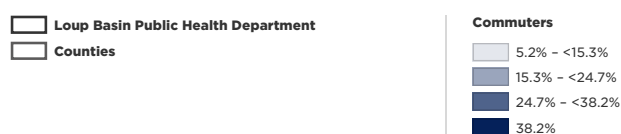
Geography	
Blaine County, NE	17.1%
Custer County, NE	15.9%
Garfield County, NE	9.5%
Greeley County, NE	19%
Howard County, NE	35.5%
Loup County, NE	27.4%
Sherman County, NE	24.8%
Valley County, NE	10.7%
Wheeler County, NE	20.7%
Loup Basin Public Health Department	20.4%
Nebraska	16.5%

Sources: US Census Bureau ACS 5-year 2019-2023

Long Commute (30+ Minutes) Driving Alone



© Mapbox © OpenStreetMap



Sources: US Census Bureau ACS 5-year 2019-2023

We should be able to get where we need to go.

When we can travel freely to work, the doctor's office, healthy grocery stores, and parks, we're more likely to go. If those services and goods are inside our neighborhood, that's even better. When a task is challenging due to lack of a vehicle the effect on our health adds up.



Lack Access to a Vehicle

4.4%

of Occupied Housing Units

Loup Basin Public Health Department

5.2%

of Occupied Housing Units

Nebraska

Lack Access to a Vehicle

555

Occupied housing units

Loup Basin Public Health Department

41,151

Occupied housing units

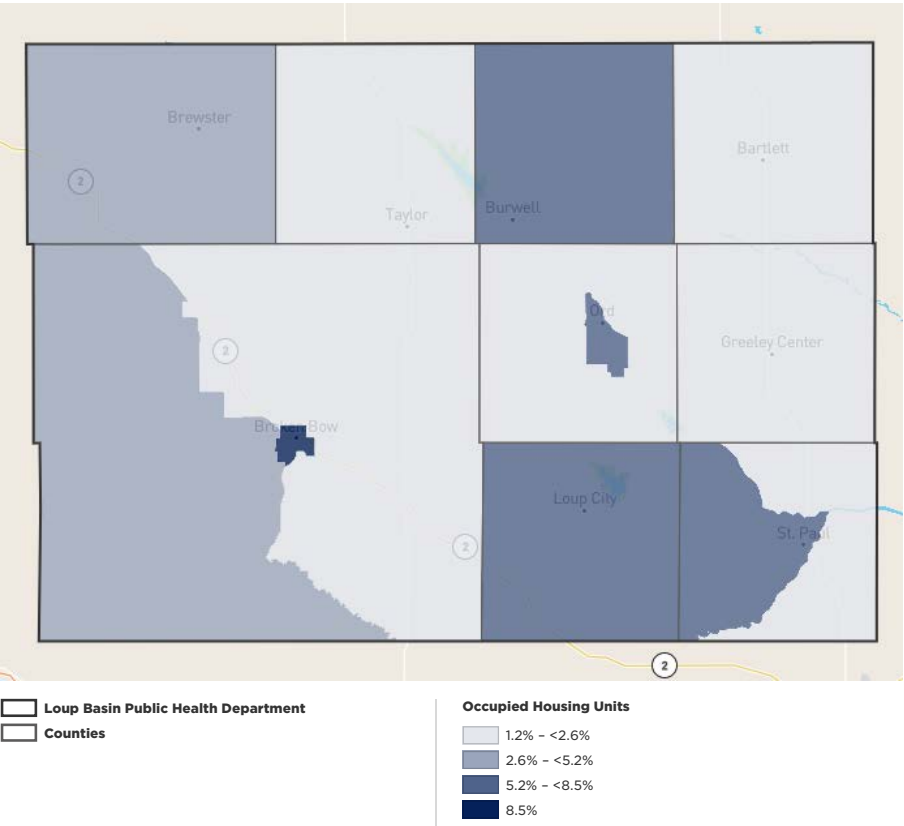
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Lack Access to a Vehicle (Percent)	2019-2023 Lack Access to a Vehicle (Number)
Blaine County, NE	2.6%	5
Custer County, NE	4.8%	213
Garfield County, NE	5.5%	41
Greeley County, NE	2.1%	20
Howard County, NE	4.9%	123
Loup County, NE	1.2%	3
Sherman County, NE	5.5%	71
Valley County, NE	4%	73
Wheeler County, NE	1.7%	6
Loup Basin Public Health Department	4.4%	555
Nebraska	5.2%	41,151

Sources: US Census Bureau ACS 5-year 2019-2023

Lack of Vehicle Access



Loup Basin Public Health Department
Counties

Occupied Housing Units

1.2% - <2.6%

2.6% - <5.2%

5.2% - <8.5%

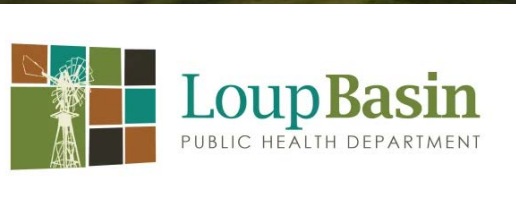
8.5%

Sources: US Census Bureau ACS 5-year 2019-2023

Loup Basin Public Health Department

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Loup Basin Public Health Department Community Health Assessment

Healthcare and healthy lifestyle options shouldn't be a luxury.

When it comes to our health, preventing illness and long-lasting disease saves us time, money, and hardship. Treating or trying to cure a disease is much more costly. Our behaviors over time can help prevent health issues from even happening, including not smoking, eating well, getting enough sleep, exercise, and going to the doctor for regular check-ups. Getting the high-quality medical care we need helps us stay healthy and live longer. It also lowers the amount of lost days of productivity, learning, and earning an income. **When we focus on prevention**—getting proactive healthcare before we're in an emergency situation—**our community is even healthier.**

Smoking is deadly.

Smoking is the number one cause of preventable death and affects nearly every organ in the body. The earlier someone smokes the more likely they are to become addicted, a concerning fact since smoking usually starts in youth. Alternative smoking options such as e-cigarettes introduce even more challenges. The most risky and inexpensive tobacco products are often advertised and sold in low-income areas, causing even greater health risk to a community already facing more barriers. Programs and policies that support healthy choices and help someone stop smoking are an important piece to prevent disease in our community.



Smoke Regularly

14.9%

Adults

Loup Basin Public Health Department

14.2%

Adults

Nebraska

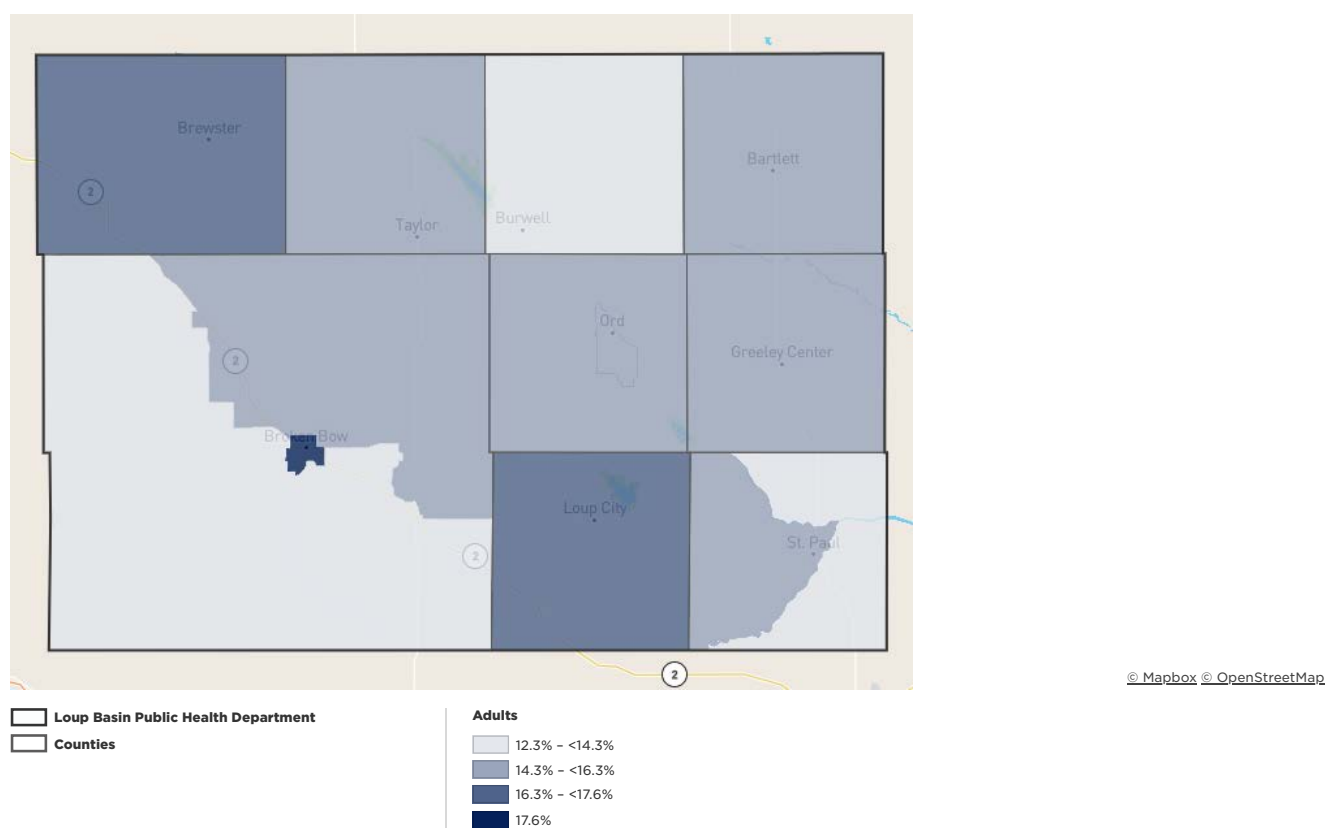
Sources: CDC BRFSS PLACES 2022

This data represents the share of adults who have smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days.

Geography	
Blaine County, NE	16.7%
Custer County, NE	15.6%
Garfield County, NE	12%
Greeley County, NE	14.9%
Howard County, NE	13.5%
Loup County, NE	13.7%
Sherman County, NE	17.2%
Valley County, NE	13.9%
Wheeler County, NE	15.3%
Loup Basin Public Health Department	14.9%
Nebraska	14.2%

Sources: CDC BRFSS PLACES 2022

Smoking Regularly



Sources: CDC BRFSS PLACES 2022

This data represents the share of adults who have smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days.

Forward movement benefits everyone.

From childhood through adulthood, physical activity is a key factor to improve physical and mental health and prevent disease. However, many of us are not as active as we might want to be with lack of time and energy, low social support, or limited access to a safe place to exercise on the list of barriers. Creating a community where exercise is available for all people might include creating more parks and greenspaces, adding bicycle lanes, ensuring safe walking paths, equipping people to walk or bike to work, and more.

Overview



Physical Inactivity

27.4%

of Adults

Loup Basin Public Health Department

25.2%

of Adults

Nebraska

Active Commuters who Walk, Bike, or Take Public Transit

5.5%

of Commuters

Loup Basin Public Health Department

3.5%

of Commuters

Nebraska

Sources: CDC BRFSS PLACES 2022; US Census Bureau ACS 5-year 2019-2023

Physical inactivity represents the proportion of adults who report no physical activity outside of work in the past month.

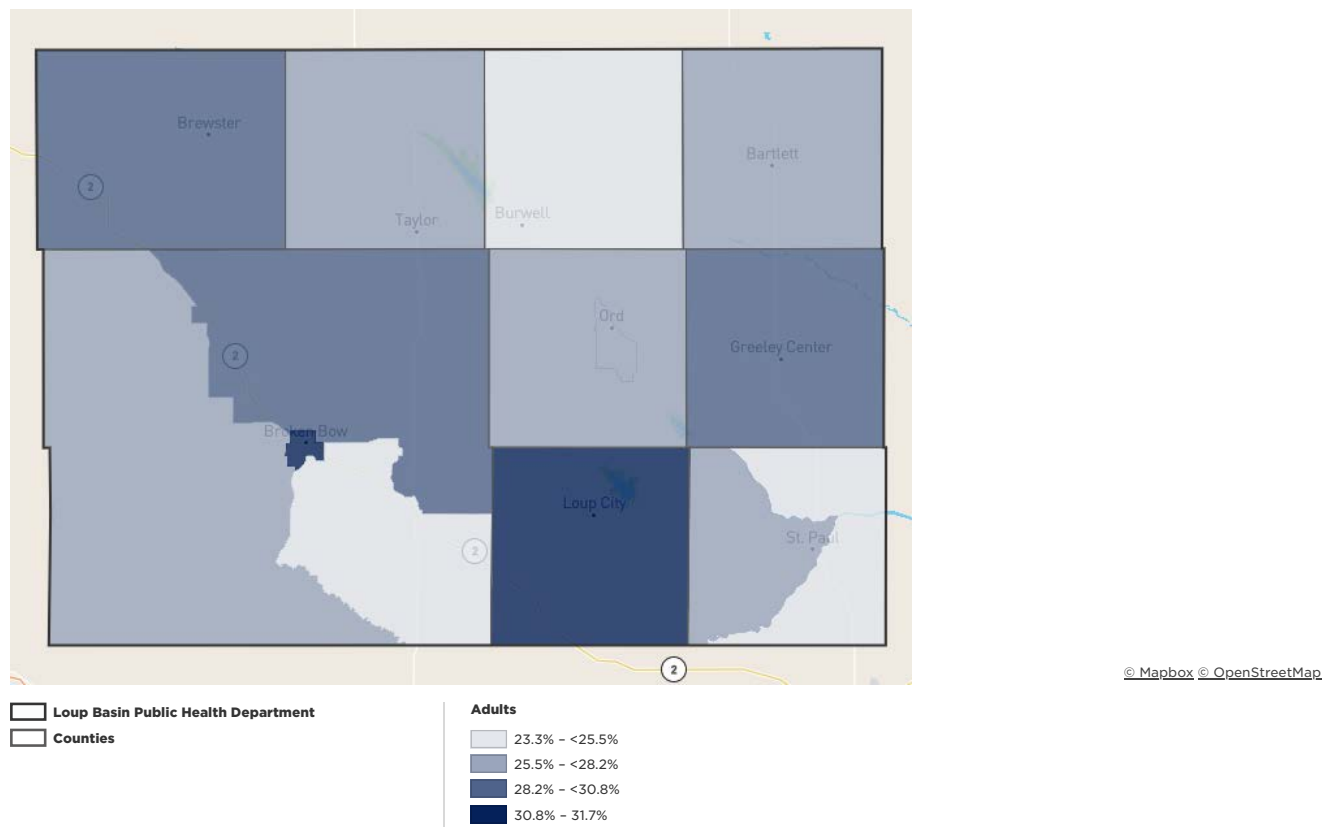
Geography	2022 Physical Inactivity	2019-2023 Active Commuters who Walk, Bike, or Take Public Transit
Blaine County, NE	30.1%	25.3%
Custer County, NE	28%	4.7%
Garfield County, NE	23.9%	13.3%
Greeley County, NE	26.8%	9.9%
Howard County, NE	24.7%	2.5%
Loup County, NE	26.6%	13.5%
Sherman County, NE	32%	4.3%
Valley County, NE	26.6%	2.8%
Wheeler County, NE	28.5%	12.2%
Loup Basin Public Health Department	27.4%	5.5%
Nebraska	25.2%	3.5%

Sources: CDC BRFSS PLACES 2022; US Census Bureau ACS 5-year 2019-2023

Physical inactivity represents the proportion of adults who report no physical activity outside of work in the past month.

Map: Physical Inactivity

Physical Inactivity

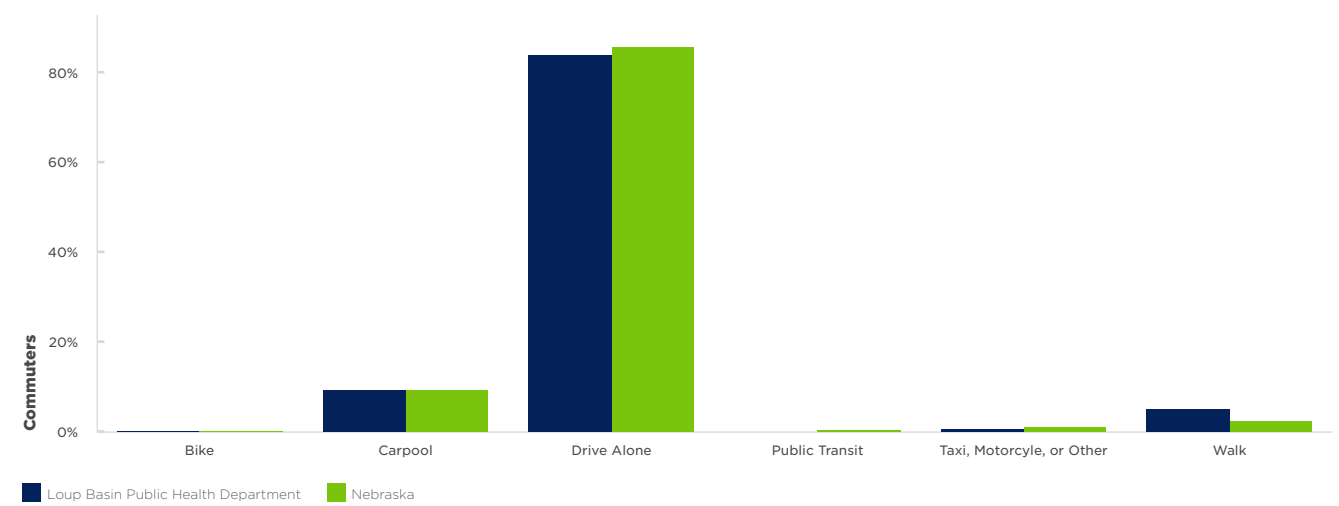


Sources: CDC BRFSS PLACES 2022

Physical inactivity represents the proportion of adults who report no physical activity outside of work in the past month.

Transportation Method to Travel to Work

Method of Transportation to Work



Sources: US Census Bureau ACS 5-year 2019-2023

▲ Data Sources ▼	Blaine County, NE ▲ ▼	Custer County, NE ▲ ▼	Garfield County, NE ▲ ▼	Greeley County, NE ▲ ▼	Howard County, NE ▲ ▼	Loup County, NE ▲ ▼	Sherman County, NE ▲ ▼
2019-2023 Bike	0%	0.7%	0%	0%	0%	0%	0%
2019-2023 Walk	25.3%	3.9%	13.3%	9.9%	2.5%	13.5%	4%
2019-2023 Taxicab, Motorcycle, or Other Means	2.9%	0.8%	0.9%	1.1%	1.7%	0%	0.5%
2019-2023 Drive Alone	66.5%	83.8%	75.7%	81.2%	88.4%	80.9%	84.7%
2019-2023 Carpool	5.3%	10.7%	10.1%	7.8%	7.3%	5.6%	10.5%
2019-2023 Public Transit	0%	0%	0%	0%	0%	0%	0.3%

Sources: US Census Bureau ACS 5-year 2019-2023

Prevention is better than treatment.

We’ve heard that finding a problem before it gets worse is a great way to improve our health. This reduces our risk for disease and death, but many people still don’t get this kind of healthcare. The barriers might include cost, not having a relationship with a primary care provider, and distance from healthcare services. Educating people about the benefits of proactive healthcare and reducing the cost, distance, and time burden for them to receive this care can improve individual lives and the burden on our healthcare system.

Doctor Checkup in Past Year



Doctor Checkup in Past Year

75.7%

of Adults

Loup Basin Public Health Department

74.1%

of Adults

Nebraska

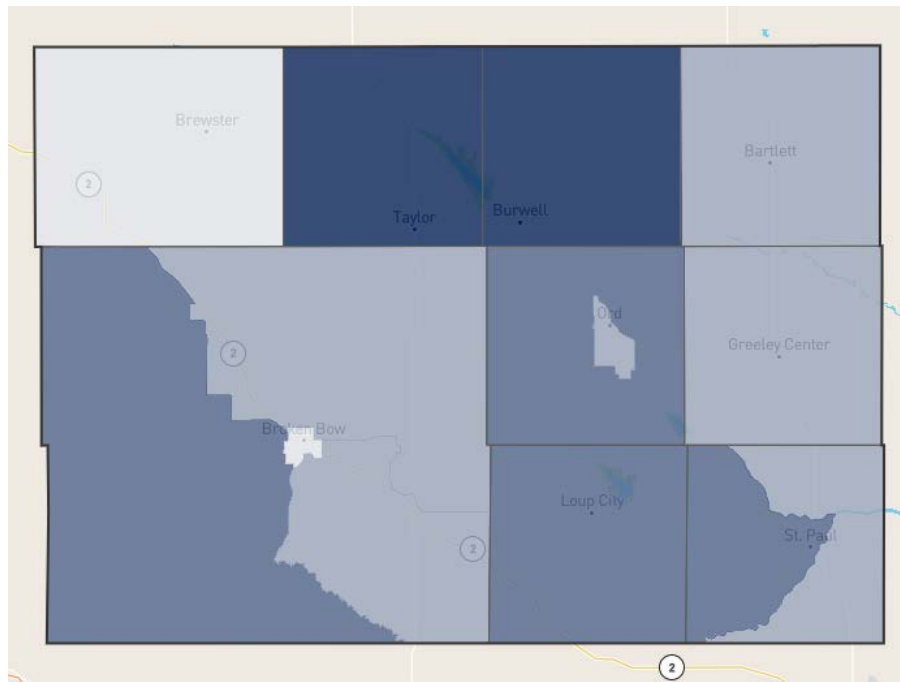
Sources: CDC BRFSS PLACES 2022

This data represents the proportion of adults who report having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, condition) in the previous year.

Geography	2022 Doctor Checkup in Past Year Among Adults
Blaine County, NE	74.9%
Custer County, NE	74.6%
Garfield County, NE	77.1%
Greeley County, NE	74.9%
Howard County, NE	76%
Loup County, NE	77.4%
Sherman County, NE	75.3%
Valley County, NE	75.5%
Wheeler County, NE	76.4%
Loup Basin Public Health Department	75.7%
Nebraska	74.1%

Sources: CDC BRFSS PLACES 2022

Doctor Checkup in Past Year



© Mapbox © OpenStreetMap

Loup Basin Public Health Department
Counties

Adults
74.3% - <75.4%
75.4% - <75.8%
75.8% - <76.6%
76.6% - 77.2%

Sources: CDC BRFSS PLACES 2022

This data represents the proportion of adults who report having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, condition) in the previous year.

Preventive Care Utilization

▲▼ Data Sources	▲▼ Loup Basin Public Health Department	▲▼ Nebraska	▲▼ Blaine County, NE	▲▼ Custer County, NE	▲▼ Garfield County, NE	▲▼ Greeley County, NE	▲▼ Howard County, NE
2022 Colorectal Cancer Screening Among Adults 50 to 75	65.1%	62.8%	65%	62.1%	66.7%	58.9%	62.4%
2020 Core Preventive Services for Men 65+	43.7%	49.3%	45.9%	41%	44.9%	46.7%	45.6%
2020 Core Preventive Services for Women 65+	35.1%	40.1%	35.5%	34.7%	33.7%	36.1%	38.6%
2022 Dental Visit Among Adults	64%	64.6%	61.1%	62.3%	68.8%	63.8%	66.1%
2020 Pap Smear Among Women 21 to 65	81.7%	81.5%	81.1%	80.5%	80.9%	79.5%	81.7%
2022 Mammography Among Women 50 to 74	73.8%	75.2%	73.5%	71.9%	78.3%	77.8%	76%

Sources: CDC BRFSS PLACES 2020, 2022

Not everyone can get insurance.

People who have insurance are more likely to get the healthcare services and medication they need when they need it. However, insurance can be complex, tied to employment, and is sometimes not financially doable. Residents who don't have insurance for any number of reasons may not be able to live healthy lives.

People Covered by Insurance



Have Health Insurance

93.4%

People

Loup Basin Public Health Department

92.6%

People

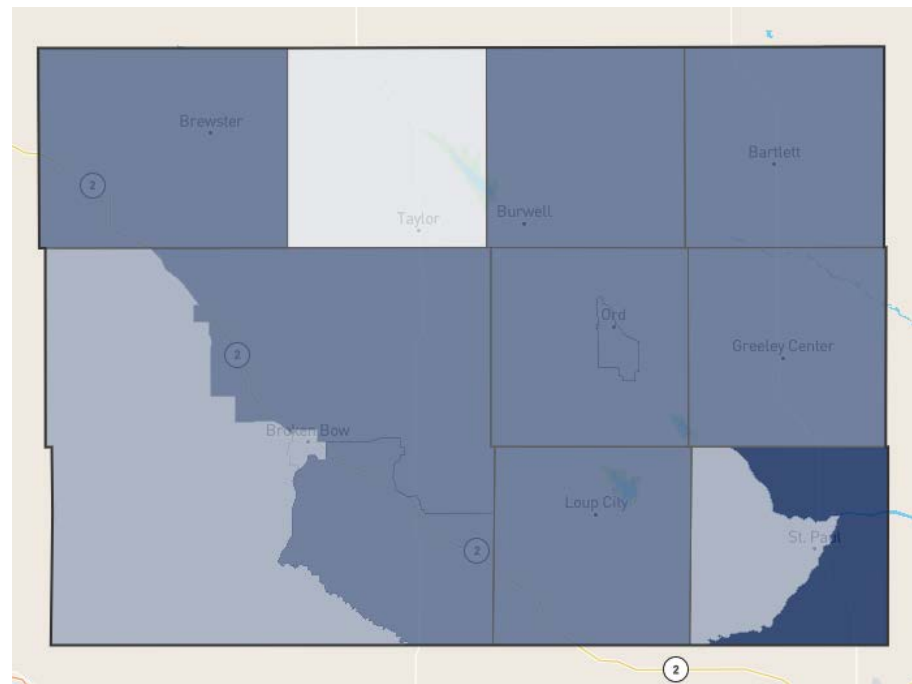
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 People With Health Insurance
Blaine County, NE	94.3%
Custer County, NE	92.8%
Garfield County, NE	94.5%
Greeley County, NE	95.5%
Howard County, NE	93%
Loup County, NE	87.9%
Sherman County, NE	94.1%
Valley County, NE	94%
Wheeler County, NE	95.4%
Loup Basin Public Health Department	93.4%
Nebraska	92.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Health Insurance Coverage



© Mapbox © OpenStreetMap

☐ Loup Basin Public Health Department
☐ Counties

People

87.9% - <90.9%
90.9% - <93.4%
93.4% - <98.1%
98.1%

Sources: US Census Bureau ACS 5-year 2019-2023

People Covered by Insurance by Race/Ethnicity

Insurance Status by Race/Ethnicity

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼
2019-2023 Insured Asian People	95.8%	93%	No data	50%	No data	No data	No data
2019-2023 Insured Black People	57.5%	86.8%	No data	100%	0%	25%	6.1%
2019-2023 Insured Hispanic or Latino People	76.9%	80.3%	No data	77.3%	100%	100%	70.1%
2019-2023 Insured Multiracial People	87.5%	86.3%	No data	81.9%	57.9%	98.9%	99.7%
2019-2023 Insured Native American People	92.7%	79.7%	No data	100%	No data	84.6%	100%
2019-2023 Insured Native Hawaiian and Pacific Islander People	100%	84.4%	No data	100%	No data	No data	No data
2019-2023 Insured Other People	77.8%	78.1%	No data	93.3%	100%	100%	47.1%
2019-2023 Insured White (Not Hispanic or Latino) People	94.3%	95%	94.3%	93.6%	94.9%	95.8%	93.9%

Sources: US Census Bureau ACS 5-year 2019-2023

Note: Unless otherwise indicated, data for each group includes both Hispanic or Latino people and non-Hispanic or Latino people.

People Covered by Insurance by Age

Health Insurance Status by Age

▲▼ Geography	2019-2023 Insured People Under Age 6 ▲▼	2019-2023 Insured People Ages 6 to 18 ▲▼	2019-2023 Insured People Ages 19 to 64 ▲▼	2019-2023 Insured People Ages 65+ ▲▼
Loup Basin Public Health Department	98.3%	93%	90.2%	99.4%
Nebraska	95.8%	94.7%	89.5%	99.4%
Blaine County, NE	100%	100%	87.7%	100%
Custer County, NE	97.9%	93.1%	89%	99.9%
Garfield County, NE	100%	91.1%	92%	100%
Greeley County, NE	96%	99.2%	92.2%	99.5%
Howard County, NE	100%	88.5%	91.8%	97.4%
Loup County, NE	100%	91.5%	79.4%	100%
Sherman County, NE	97.6%	95.2%	90.4%	99.7%
Valley County, NE	99.3%	96.4%	89.7%	100%
Wheeler County, NE	91.5%	92.3%	93.7%	100%

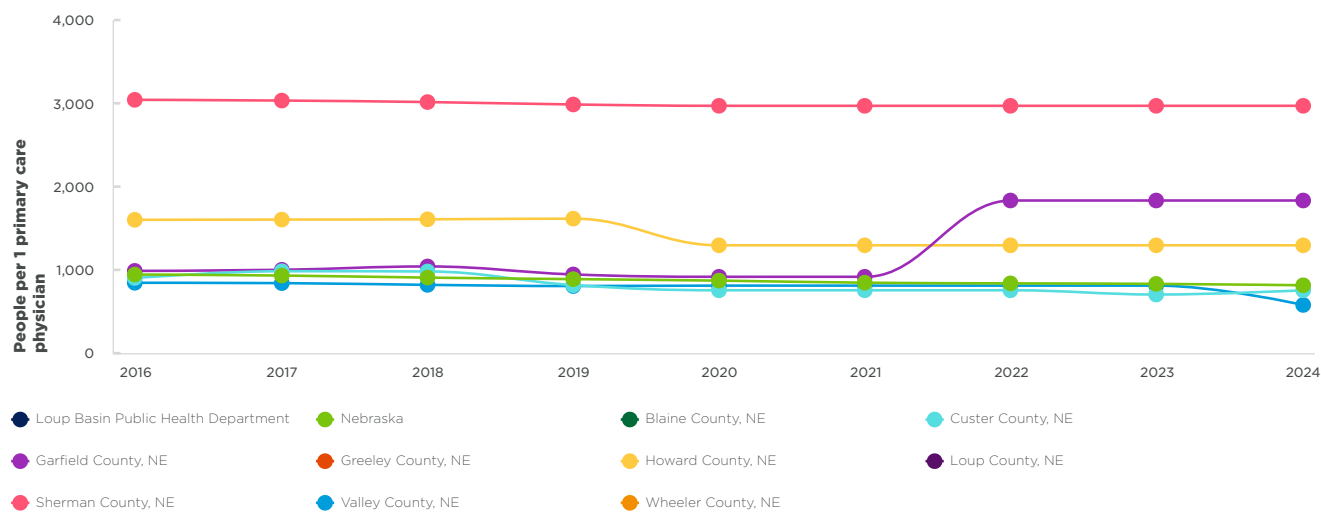
Sources: US Census Bureau ACS 5-year 2019-2023

Primary care is the first line of defense.

A primary care provider is a doctor or practitioner who can look at your health as a whole, managing your care and sometimes even preventing the need for medical specialists. Having a primary care provider leads to positive health outcomes because it often includes more proactive health care visits, such as annual check-ups. Creating more

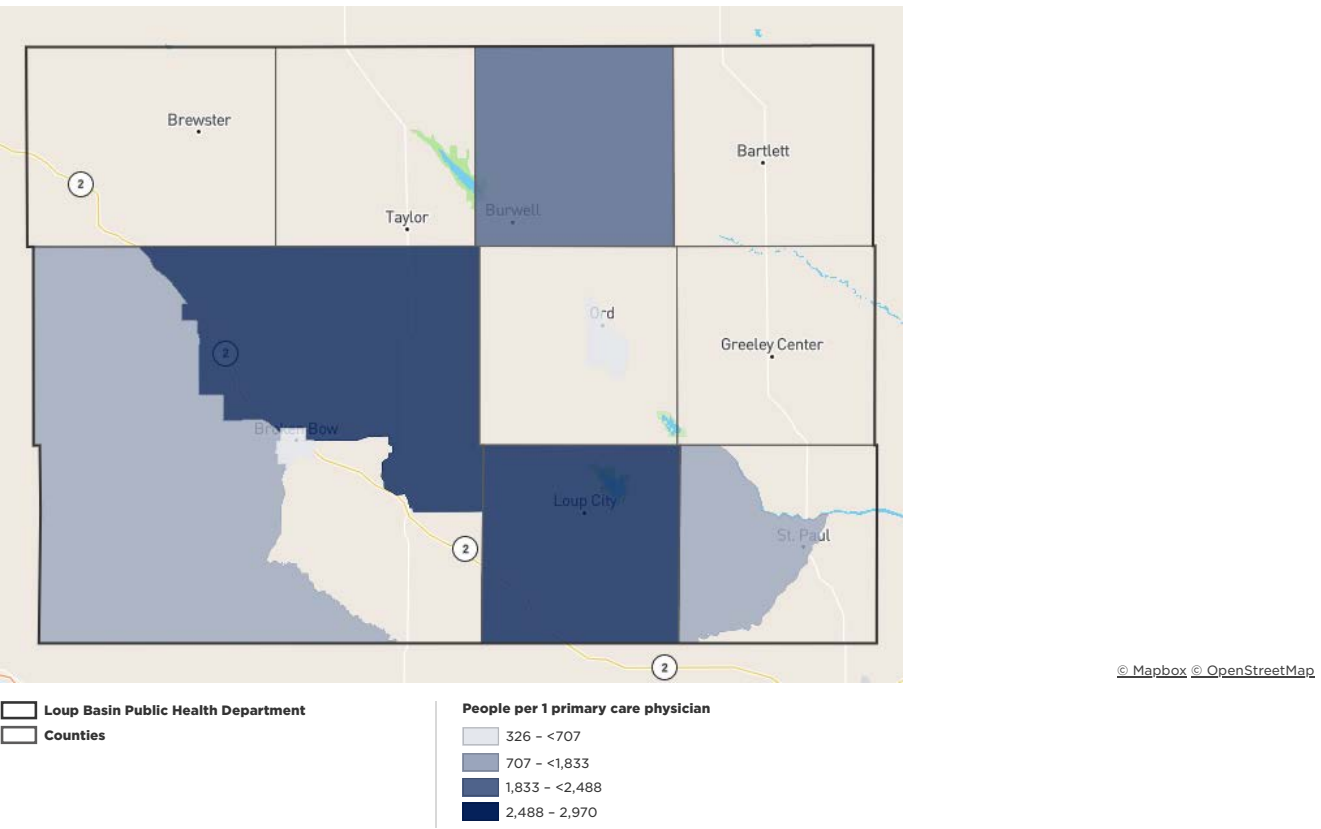
opportunities for relationships with primary care providers helps us focus on prevention, rather than costly treatment.

Primary Care Physician Ratio



Sources: NPPES NPI

Primary Care Physician Ratio



Sources: NPPES NPI 2024

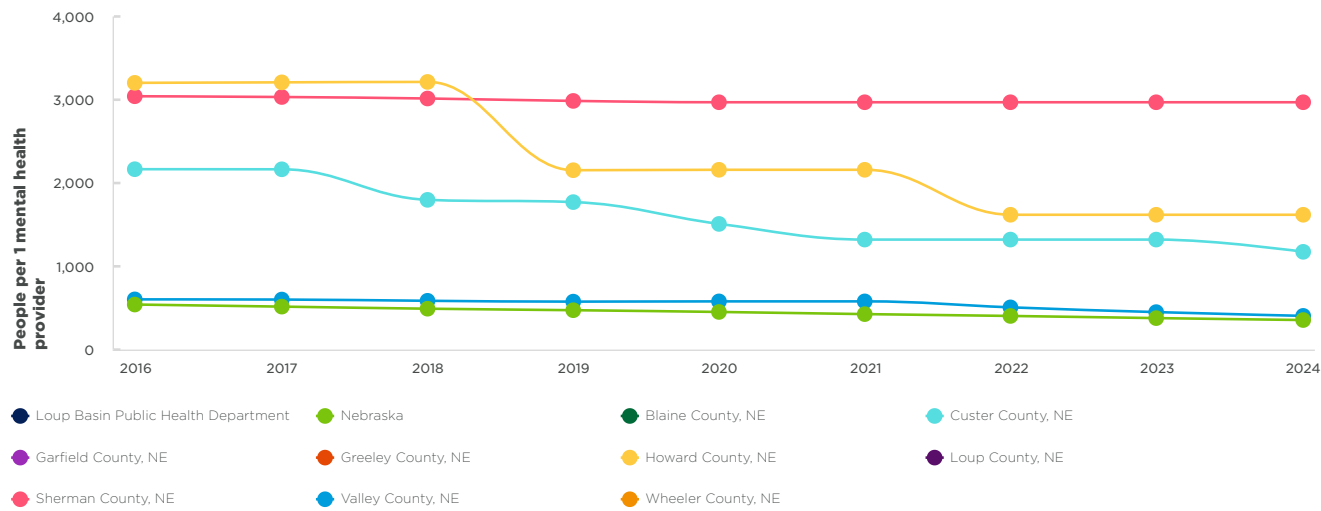
Areas with no data have 0 primary care physicians.

Mental health should be equal to physical health.

Mental healthcare should be easier to find in our community, as mental and physical health go hand-in-hand. We can't focus on one without the other. While healthcare access in general can be a challenge, mental healthcare is especially difficult because of a lack of services or social stigmas that still exist. We don't think twice about seeking medical care for a broken arm or other physical need, yet many people delay getting help for their mental health because of outdated ideas about why it happens, what it means, and who struggles with it. 1 in 5 adults in the U.S. live with mental illness. In addition to those with diagnosed conditions, many people can benefit from mental health services at some point in life.

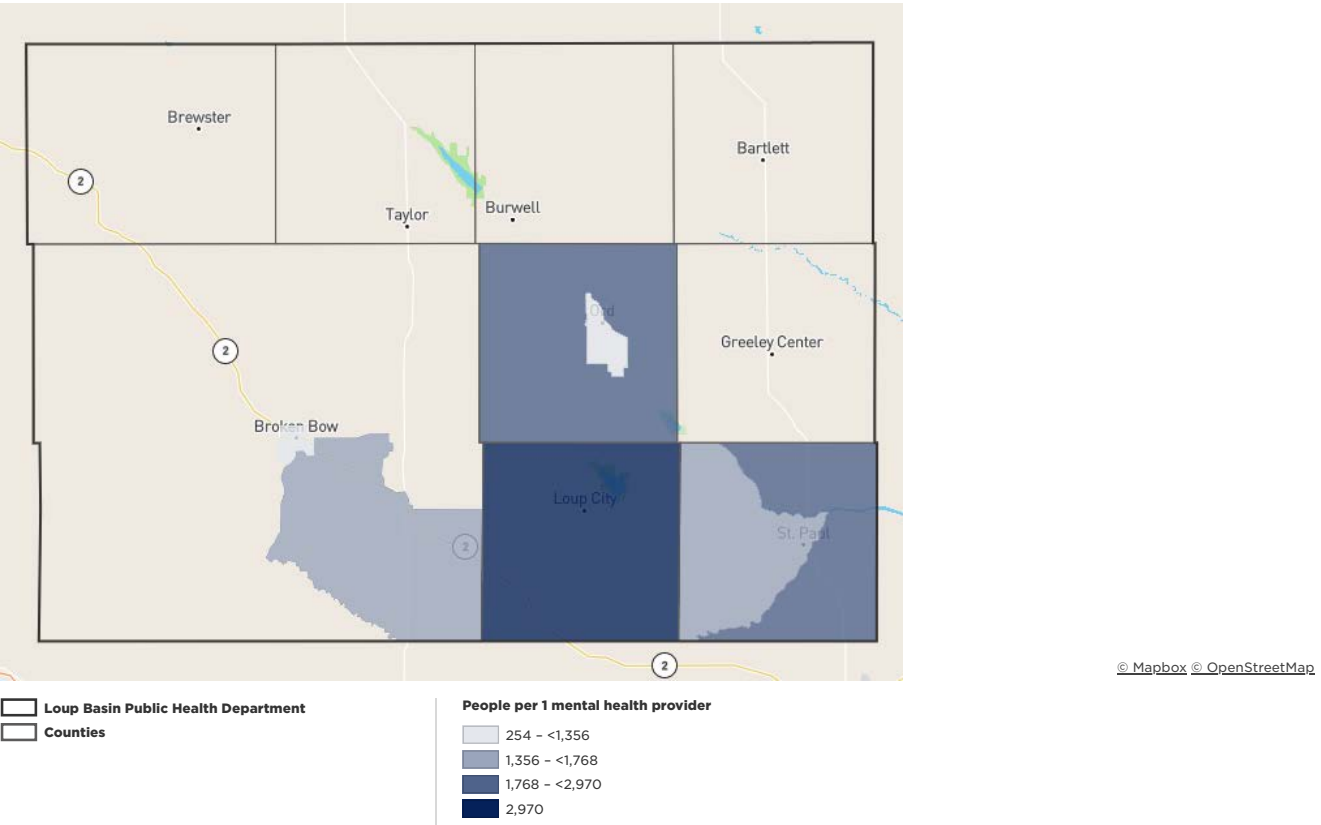
The more we talk about mental health, share resources, and remove barriers for people to access mental health providers, the healthier our community will be.

Mental Health Provider Ratio



Sources: NPPES NPI

Mental Health Provider Ratio



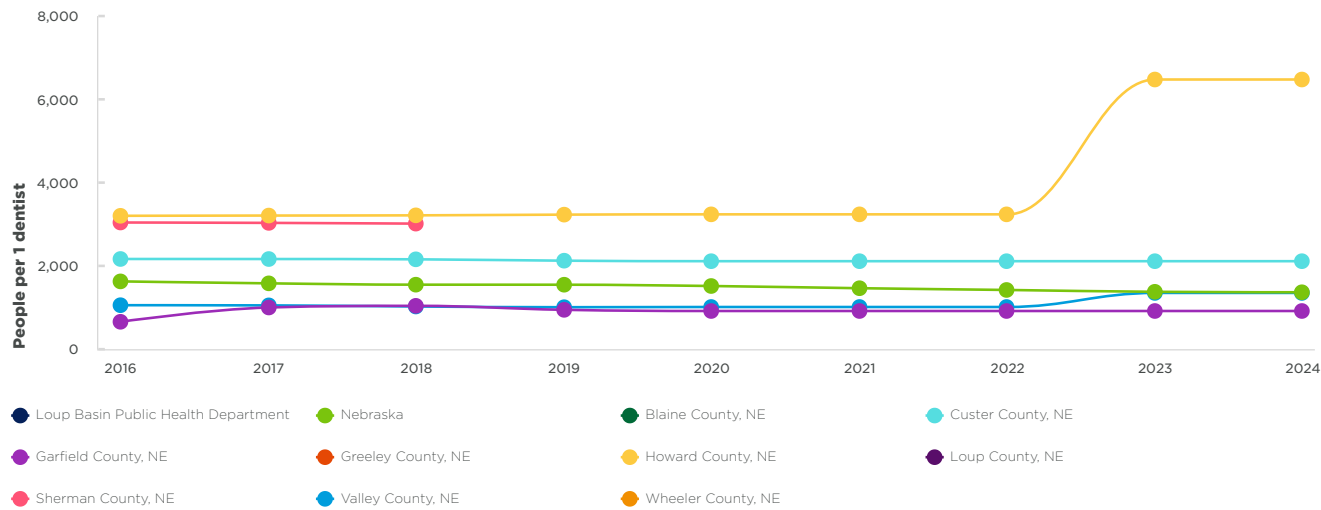
Sources: NPPES NPI 2024

Areas with no data have 0 mental health providers.

Dental health highlights the root of the problem.

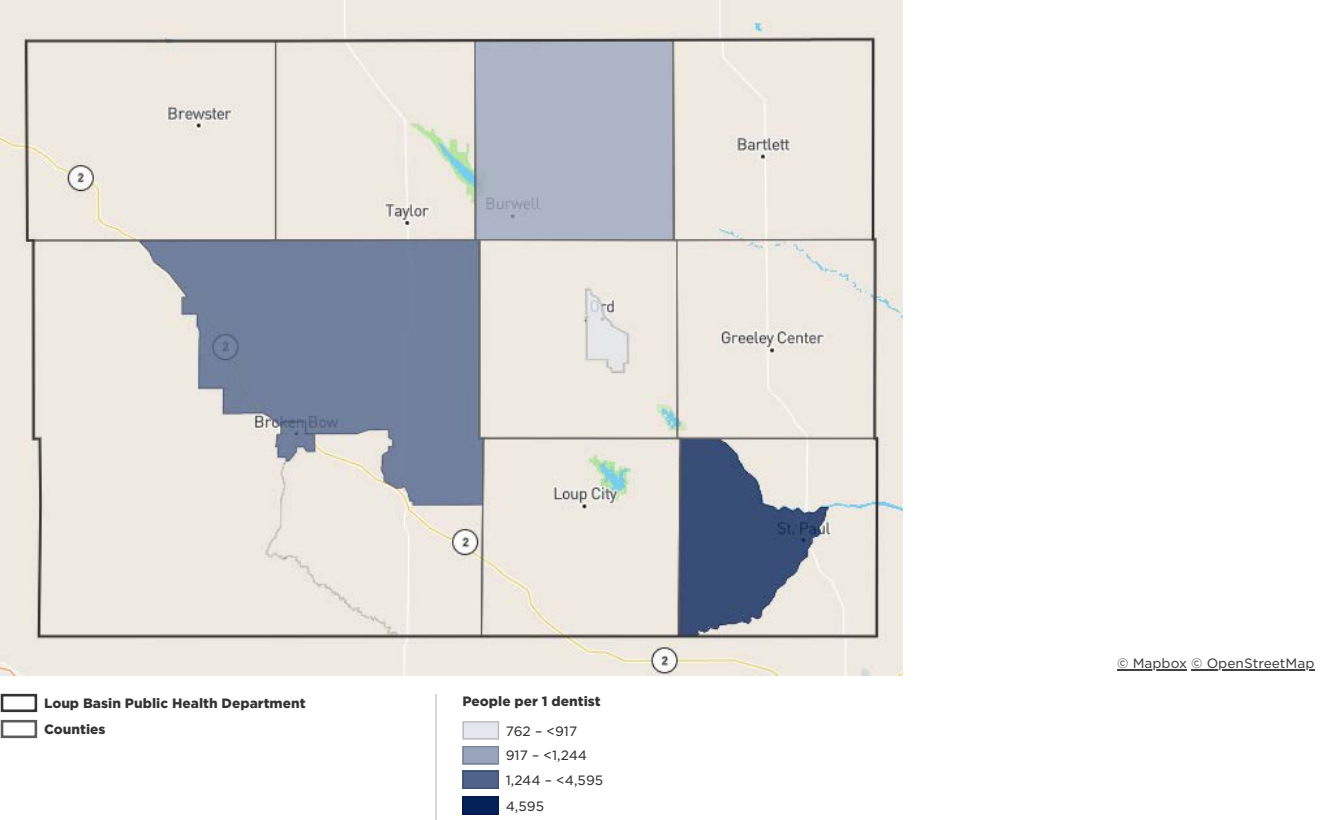
Dental health doesn't just tell us about proper brushing of teeth and gums. Poor dental health can point to social inequalities, as underserved populations are more likely to have greater dental needs. Poor dental health is also linked with other diseases, such as diabetes and obesity, because they share risk factors such as smoking or sugary diets. Increasing dental care services in our community is another way to improve health.

Dentist Ratio



Sources: NPPES NPI

Dentist Ratio



Sources: NPPES NPI 2024
Areas with no data have 0 dentists.

Learn more:

1. CDC. "How You Can Prevent Chronic Diseases." Centers for Disease Control and Prevention, 4 Nov. 2022. <https://www.cdc.gov/chronicdisease/about/prevent/index.htm>

2. DHHS. "Preventive Care." Healthy People 2030. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/preventive-care>

3. Institute of Medicine (US) Roundtable on Evidence-Based Medicine. "6. Missed Prevention Opportunities." The Healthcare Imperative: Lowering Costs and Improving Outcomes: Workshop Series Summary, edited by Pierre L. Yong et al., National Academies Press, 2010. www.ncbi.nlm.nih.gov/books/NBK53914/

4. Spillane, Torra E., and July M. Merizier. "Study Looks at Tobacco Marketing in Low-Income Communities." Columbia Mailman School of Public Health, 5 Dec. 2018. <https://www.publichealth.columbia.edu/public-health-now/news/study-looks-tobacco-marketing-low-income-communities>

5. NIH. "How Can We Prevent Tobacco Use?" NIH National Institute on Drug Abuse, 12 Apr. 2021. <https://nida.nih.gov/publications/research-reports/tobacco-nicotine-e-cigarettes/how-can-we-prevent-tobacco-use>

6. CDC. "Physical Activity Basics." Centers for Disease Control and Prevention, 8 July 2022. <https://www.cdc.gov/physicalactivity/basics/index.htm>.[↗]
7. CDC. "Overcoming Barriers to Physical Activity." Centers for Disease Control and Prevention, 16 June 2022. <https://www.cdc.gov/physicalactivity/basics/adding-pa/barriers.htm>.[↗]
8. Institute of Medicine (US) Committee on the Consequences of Uninsurance. "3. Effects of Health Insurance on Health." *Care Without Coverage: Too Little, Too Late*. National Academies Press (US), 2002. <https://www.ncbi.nlm.nih.gov/books/NBK220636/>.[↗]
9. "Access to Primary Care." *Healthy People 2020*. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/access-to-primary>.[↗]
10. Coombs, Nicholas C., et al. "Barriers to Healthcare Access among U.S. Adults with Mental Health Challenges: A Population-Based Study." *SSM - Population Health*, vol. 15, June 2021, p. 100847. PubMed Central. <https://doi.org/10.1016/j.ssmph.2021.100847>.[↗]
11. Knaak, Stephanie, et al. "Mental Illness-Related Stigma in Healthcare." *Healthcare Management Forum*, vol. 30, no. 2, Mar. 2017, pp. 111-16. PubMed Central. <https://doi.org/10.1177/0840470416679413>.[↗]
12. "Mental Illness." National Institute of Mental Health (NIMH). <https://www.nimh.nih.gov/health/statistics/mental-illness>.[↗]
13. Northridge, Mary E., et al. "Disparities in Access to Oral Health Care." *Annual Review of Public Health*, vol. 41, Apr. 2020, pp. 513-35. PubMed Central. <https://doi.org/10.1146/annurev-publhealth-040119-094318>.[↗]

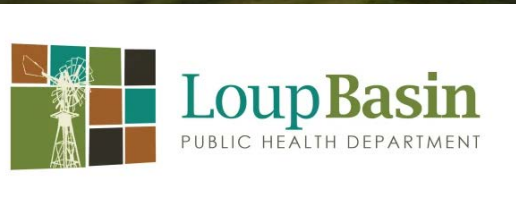
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Loup Basin Public Health Department

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Loup Basin Public Health Department Community Health Assessment

Food is a basic human need.

All people should be able to eat food that fuels their bodies, yet many people struggle to find or afford any kind of food, let alone food that will help them be healthier. Poor diets lead to many serious diseases, but sometimes it's the only option available in a community. How far a family lives from healthy food options is one factor that limits their ability to choose. This might affect older adults in more rural areas or lower income families who don't have a car who can't easily travel to other areas to purchase healthy food. Improving access to and the quality of the food we eat is an important step to make our community healthier.

Low Access Overall and by Select Characteristics



Have Low Access to Healthy Food

40.2%

People

Loup Basin Public Health Department

54.2%

People

Nebraska

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Geography	2019 People With Low Access to Healthy Food
Blaine County, NE	100%
Custer County, NE	61.9%
Garfield County, NE	10.1%
Greeley County, NE	66.2%
Howard County, NE	20.1%
Loup County, NE	39.9%
Sherman County, NE	20.1%
Valley County, NE	11.5%
Wheeler County, NE	89.1%
Loup Basin Public Health Department	40.2%
Nebraska	54.2%

Sources: USDA ERS FARA 2019

Low Access to Healthy Food by Select Characteristics

Geography	2019 Low Income People	2019 Housing Units without Vehicles
Loup Basin Public Health Department	40.3%	43.9%
Nebraska	52.6%	49.1%
Blaine County, NE	99.2%	90%
Custer County, NE	58.7%	66.8%
Garfield County, NE	9.9%	6.3%
Greeley County, NE	72.3%	82.6%
Howard County, NE	18.3%	15.7%
Loup County, NE	43.4%	50%
Sherman County, NE	18.2%	6.7%
Valley County, NE	13%	9.5%
Wheeler County, NE	88.6%	80%

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Low Income is defined as either a poverty rate of 20 percent or more, or the median family income is 80 percent or less of the state or metro area median income

Low Access by Race or Ethnicity

Low Access to Healthy Food by Race or Ethnicity

▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼
2019 Asian	24.6%	58.8%	No data	66.7%	0%	50%	8.3%
2019 Black or African American	23.3%	57.2%	100%	35.7%	0%	25%	6.7%
2019 Hispanic or Latino	43.7%	53.2%	No data	66.7%	0%	72.5%	19.3%
2019 Multiracial or Other Race	41.7%	53.4%	100%	65.7%	20%	62.2%	16.8%
2019 Native American	32.4%	40.6%	No data	34.3%	No data	60%	27.3%
2019 Native Hawaiian and Pacific Islander	0%	53.3%	No data	No data	0%	No data	0%
2019 White	40.2%	54.1%	100%	62%	10.1%	66.5%	20.2%

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Data includes both Hispanic/Latino and non-Hispanic/Latino unless otherwise noted.

Low Access Among Children, Seniors

Low Access to Healthy Food by Select Age Groups

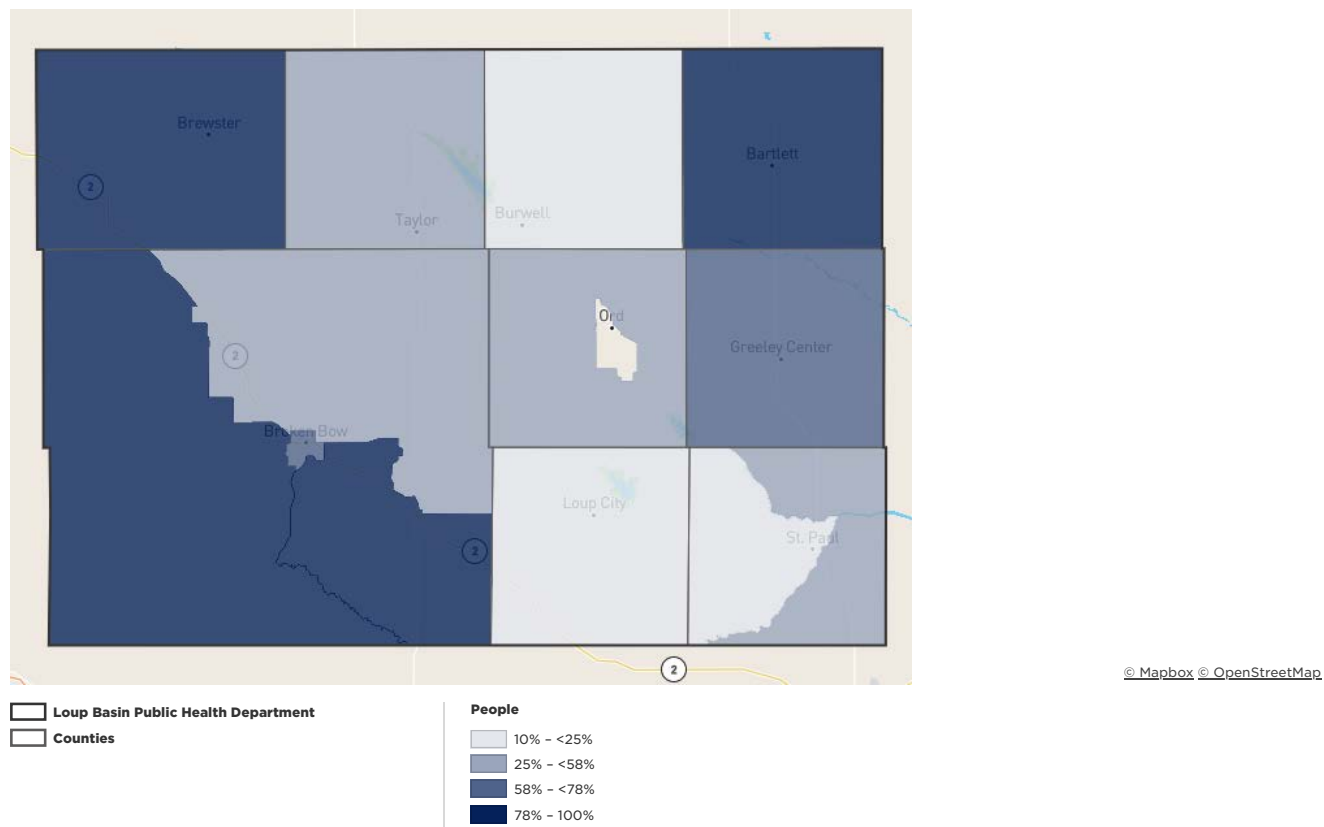
▼ Geography	2019 Children ages 0 to 17 ▲▼	2019 Seniors ages 65+ ▲▼
Loup Basin Public Health Department	39.7%	40.8%
Nebraska	54.5%	51.8%
Blaine County, NE	100%	100%
Custer County, NE	60.4%	66.9%
Garfield County, NE	9.3%	9.9%
Greeley County, NE	64.3%	65.1%
Howard County, NE	19.4%	19.4%
Loup County, NE	39.7%	32.1%
Sherman County, NE	23.1%	18.1%
Valley County, NE	10.2%	13.4%
Wheeler County, NE	82.6%	94.2%

Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Map: People with Low Access

People with Low Access to Healthy Food



Sources: USDA ERS FARA 2019

Low access is defined as living more than 1/2 mile in urban areas or more than 10 miles in rural areas from a supermarket, wholesale club, supercenter, or grocery store.

Food Insecurity

 **14.5%**
of People
Food Insecurity
Nebraska

Sources: Feeding Amer. Map the Meal Gap 2023

Food Insecurity Rate



Sources: Feeding Amer. Map the Meal Gap 2023

Where we buy food makes a difference.

Food affects so much about our lives. Like blood vessels that reach every part of our bodies, our food system reaches every part of our society. How and where we get food affects our health, education, economy, and more. If we want to make healthy choices but can't easily find or afford fresh food, we are unlikely to make that choice. Low income neighborhoods often have more unhealthy options such as fast food or gas stations, leading to choices that are higher in fat, salt, and sugar. Eating a regular diet with those options can lead to heart disease, stroke, and increase risk for some types of cancer. Just as people in rural areas might not have many options available, lower income areas in cities also might not have access. Making sure healthy food options are available allows us all to have an equal chance at good physical health throughout life.

Purchasing Options

Geography	2016 Fast Food Restaurants per 1,000 People	2016 Grocery Stores	2016 Supercenters / Club Stores
Nebraska	0.43	420	49
Blaine County, NE	0	0	0
Custer County, NE	0.46	6	0
Garfield County, NE	0	1	0
Greeley County, NE	0	2	0
Howard County, NE	0.16	2	0
Loup County, NE	0	0	0
Sherman County, NE	0.33	2	0
Valley County, NE	0.48	3	0
Wheeler County, NE	0	0	0

Sources: USDA ERS FEA 2016

Help fight hunger with SNAP.

The cost of groceries, especially fresh produce, is rising and sometimes we may need help purchasing healthy food. Programs like SNAP (Supplemental Nutrition Assistance Program) help fight hunger and equip families to make healthy choices. This program has been linked to lower healthcare costs and improved health outcomes for those who use it. SNAP helps people get enough food to eat, including children from lower income households who are at high risk for not having enough food without this help. When families receive this assistance and have stores in their community that allow them to use it, fewer people are going to bed hungry at night.



Receive SNAP Benefits

7.2%

of Households

Loup Basin Public Health Department

8%

of Households

Nebraska

Don't Receive SNAP Benefits

70.2%

of Households in Poverty

Loup Basin Public Health Department

66%

of Households in Poverty

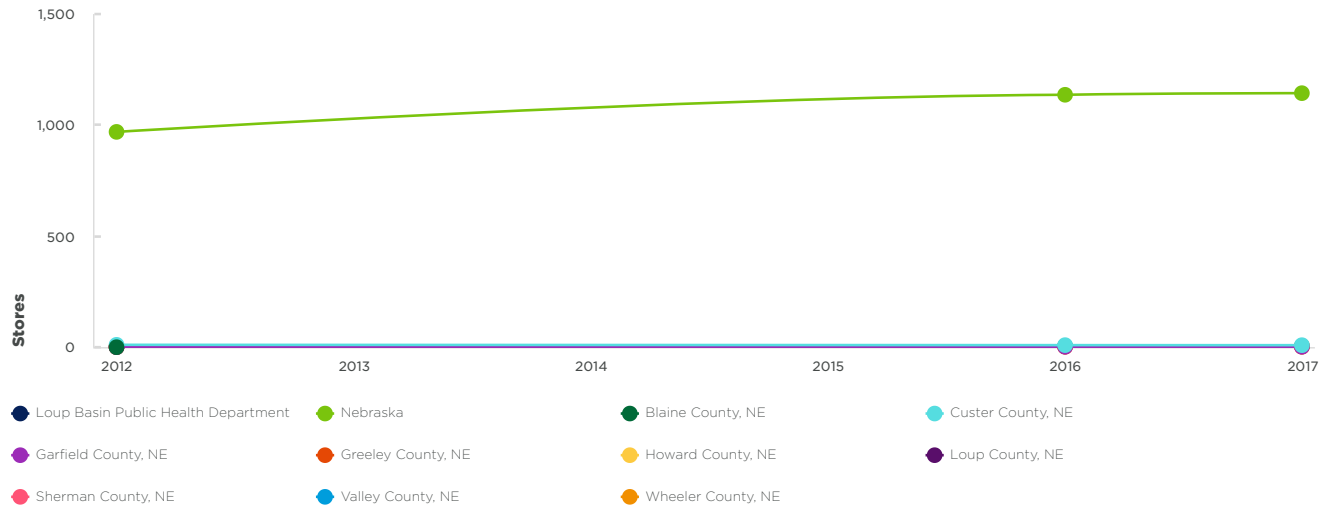
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Households Receiving SNAP	2019-2023 Households Not Receiving SNAP Below Poverty Level
Blaine County, NE	0%	100%
Custer County, NE	8.4%	56.9%
Garfield County, NE	3.3%	80%
Greeley County, NE	5%	81.8%
Howard County, NE	8%	66.5%
Loup County, NE	7.6%	92.5%
Sherman County, NE	4.8%	83.7%
Valley County, NE	9.2%	69.3%
Wheeler County, NE	3.1%	95.7%
Loup Basin Public Health Department	7.2%	70.2%
Nebraska	8%	66%

Sources: US Census Bureau ACS 5-year 2019-2023

SNAP Authorized Stores



Sources: USDA ERS FEA

Learn more:

1. [CDC. "Healthy Food Environments: Improving Access to Healthier Food." Centers for Disease Control and Prevention, 10 Sept. 2020. <https://www.cdc.gov/nutrition/healthy-food-environments/improving-access-to-healthier-food.html>.](https://www.cdc.gov/nutrition/healthy-food-environments/improving-access-to-healthier-food.html)
2. [CDC. "Health Equity." Centers for Disease Control and Prevention, 20 Sept. 2022. <https://www.cdc.gov/nccddhp/dnpao/health-equity/index.html>.](https://www.cdc.gov/nccddhp/dnpao/health-equity/index.html)
3. [DHHS. "Access to Foods That Support Healthy Dietary Patterns." Healthy People 2030. <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/access-foods-support-healthy-dietary-patterns>.](https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/access-foods-support-healthy-dietary-patterns)
4. [CDC. "Poor Nutrition | CDC." Centers for Disease Control and Prevention, 8 Sept. 2022. <https://www.cdc.gov/chronicdisease/resources/publications/factsheets/nutrition.htm>.](https://www.cdc.gov/chronicdisease/resources/publications/factsheets/nutrition.htm)
5. [Hilmers, Angela, et al. "Neighborhood Disparities in Access to Healthy Foods and Their Effects on Environmental Justice." American Journal of Public Health, vol. 102, no. 9, Sept. 2012, pp. 1644-54. PubMed Central <https://doi.org/10.2105/AJPH.2012.300865>.](https://doi.org/10.2105/AJPH.2012.300865)
6. [Carlson, Steven, and Brynne Keith-Jennings. SNAP Is Linked with Improved Nutritional Outcomes and Lower Health Care Costs. Center on Budget and Policy Priorities, 17 Jan. 2018. <https://www.cbpp.org/research/food-assistance/snap-is-linked-with-improved-nutritional-outcomes-and-lower-health-care>.](https://www.cbpp.org/research/food-assistance/snap-is-linked-with-improved-nutritional-outcomes-and-lower-health-care)

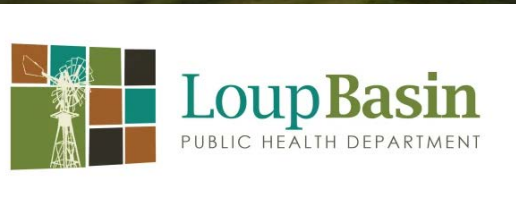
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Loup Basin Public Health Department Community Health Assessment

How We Respond Matters

When we look at the main causes of death in our community, we see a pretty clear picture: many causes are preventable. Our community can do better to support everyone who lives here. Prevention isn't just about educating each person to make good choices. **It's about creating a place where those choices are even possible.**

This is the story we want to write in our community. One where everyone has equal access to great healthcare. Where safe housing is affordable for all. Where families have access to outdoor spaces, and kids have fresh food on the table. In this story, people are able to live close to where they work. We want the story to end with equally fulfilling lives for ourselves, our families, and our neighbors.

Achieving this kind of story begins with creating a place where healthy choices are possible. As with any health journey, we might have to start small. We can't tackle the whole problem all at once, but we can start now with one step forward. When we work together, we can make a difference and rewrite our story so everyone has the same chance at a healthy life.

Let's help people have better, longer lives.

When we understand leading causes of death, we can learn more about the barriers to health our community is facing and who's more likely to experience those challenges. Our context, including what we have access to in our community, informs our behaviors. Those behaviors lead to outcomes like causes of death. Almost every health condition can benefit from better access, more resources, and increased prevention before the issue leads to death. By improving our context and supporting healthier behaviors, we can work together to help lengthen and improve the quality of life for all residents.

	Life Expectancy at Birth
79.2	
Years	
Loup Basin Public Health Department	
79.2	
Years	
Nebraska	
78.8	
Years	
United States of America	

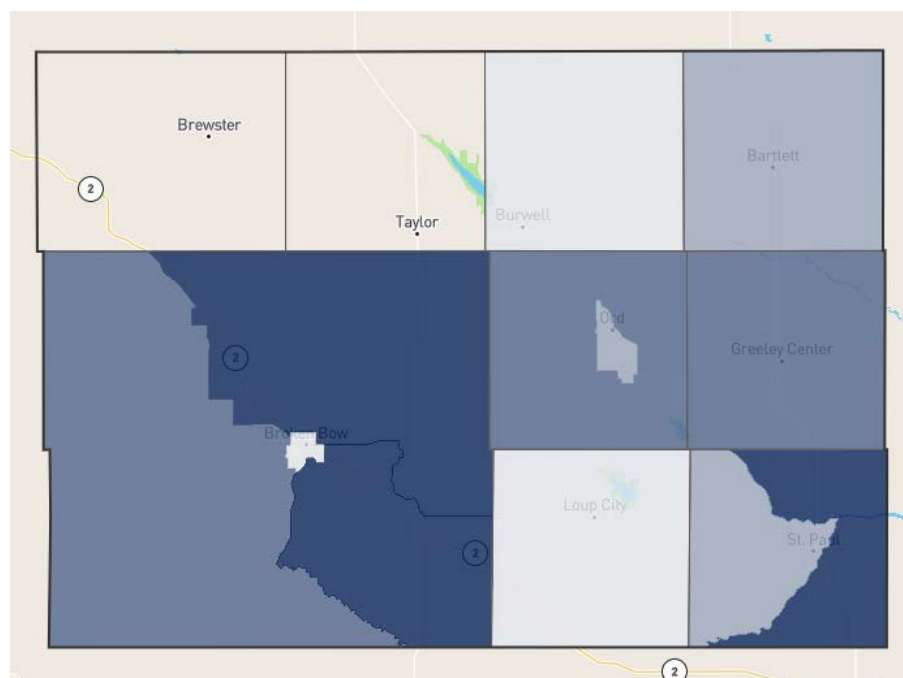
Sources: CDC NCHS USALEEP 2010-2015

Geography

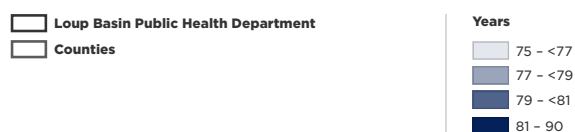
Blaine County, NE	No data
Custer County, NE	78.7
Garfield County, NE	76.7
Greeley County, NE	79.9
Howard County, NE	81.5
Loup County, NE	No data
Sherman County, NE	77.3
Valley County, NE	79.5
Wheeler County, NE	77.6
Loup Basin Public Health Department	79.2
Nebraska	79.2
United States of America	78.8

Sources: CDC NCHS USALEEP 2010-2015

Life Expectancy at Birth



© Mapbox © OpenStreetMap

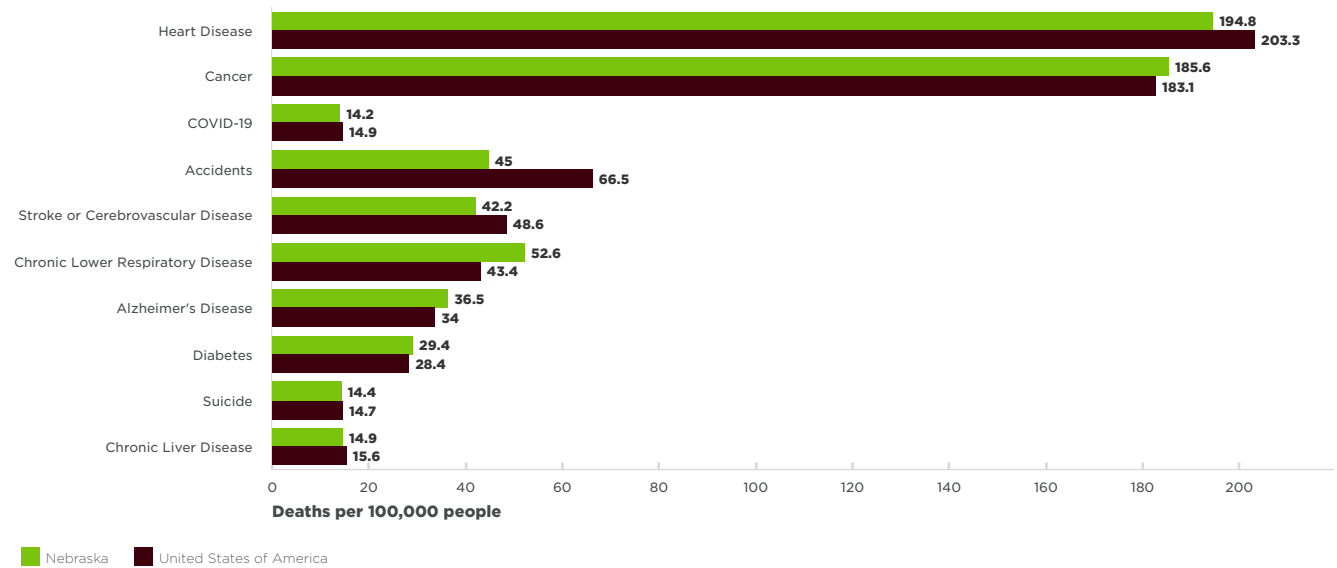


Sources: CDC NCHS USALEEP 2010-2015

Leading Causes of Death by Race & Ethnicity

Note: Leading causes of death by race and ethnicity utilizes data over a three year period to improve data availability and reliability. At present, COVID death data is not available for all three years. As a result, COVID death rates by race and ethnicity are located in a separate, single-year bar chart.

Leading Causes of Death

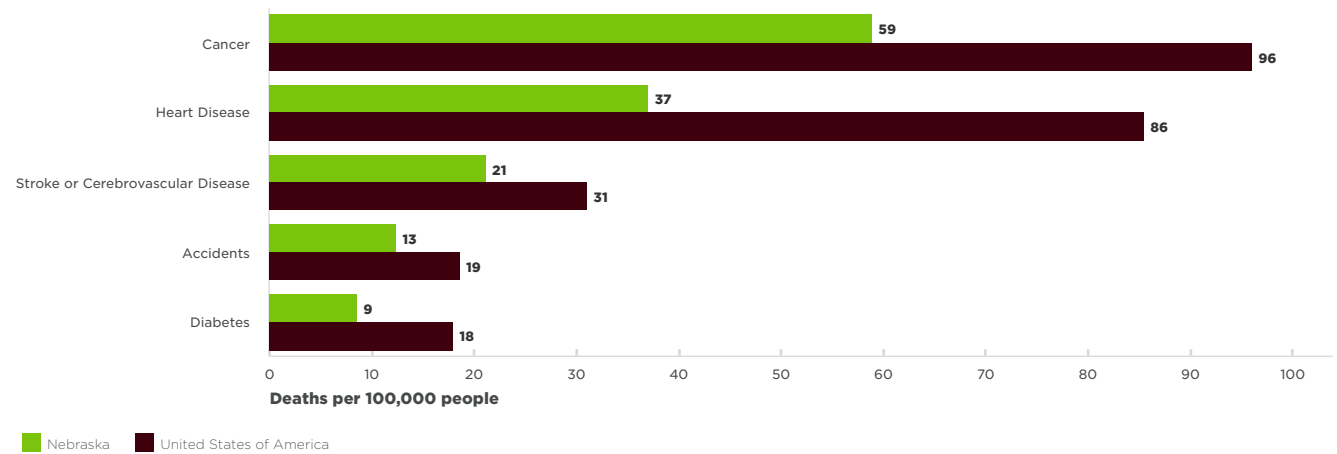


Sources: CDC WONDER Cause of Death 2023 Crude

This data is sorted from highest to lowest based on national top causes of death.

Asian

Leading Causes of Death Among Asians

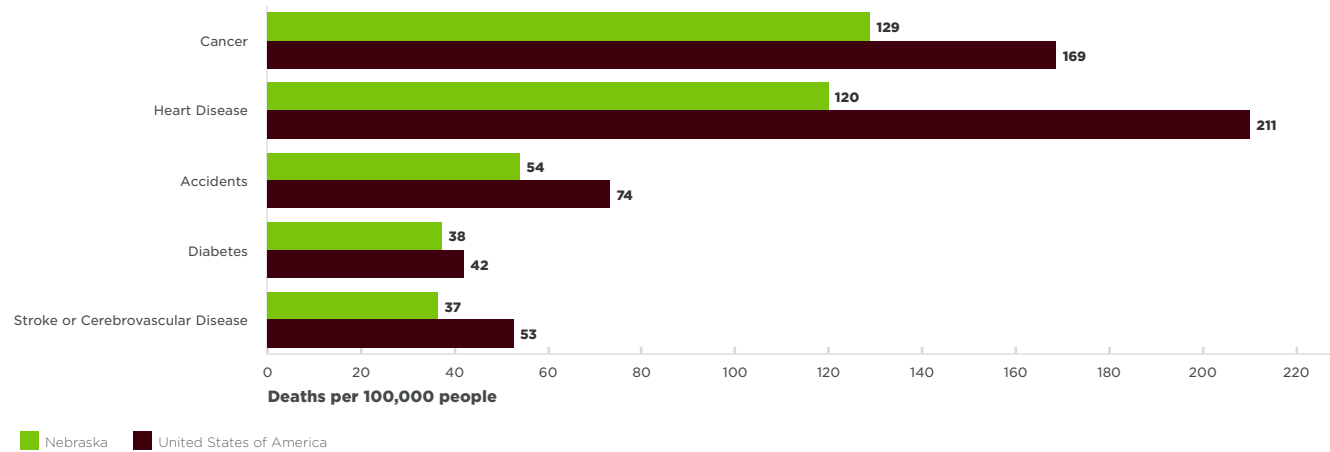


Sources: CDC WONDER Cause of Death 2019-2023 Crude

This data is sorted from highest to lowest based on national top causes of death for Asians.

Black or African American

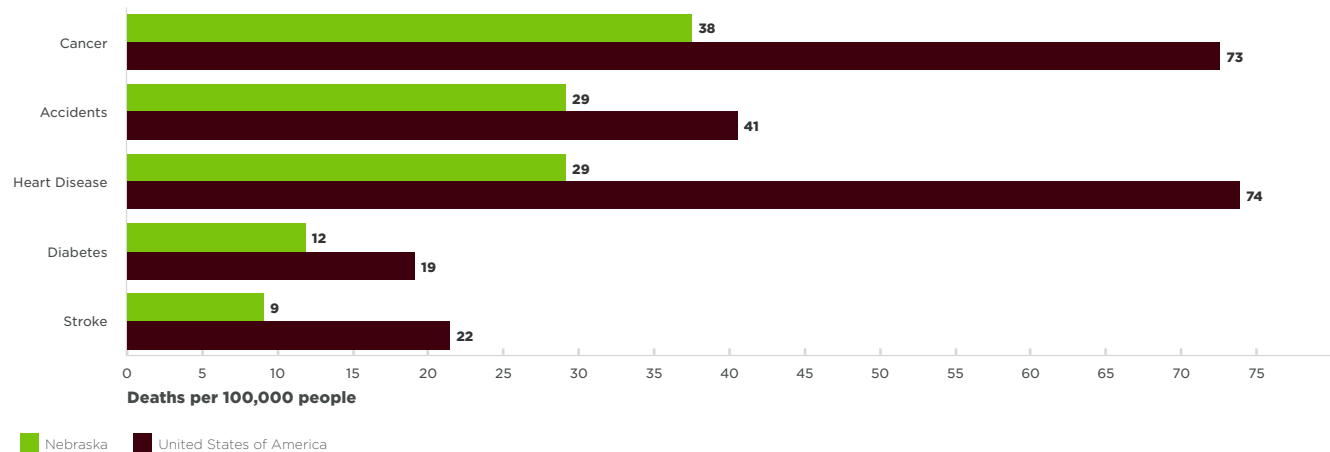
Leading Causes of Death Among Black/African Americans



Sources: CDC WONDER Cause of Death 2019-2023 Crude
This data is sorted from highest to lowest based on national top causes of death for Black/African Americans.

Hispanic or Latino

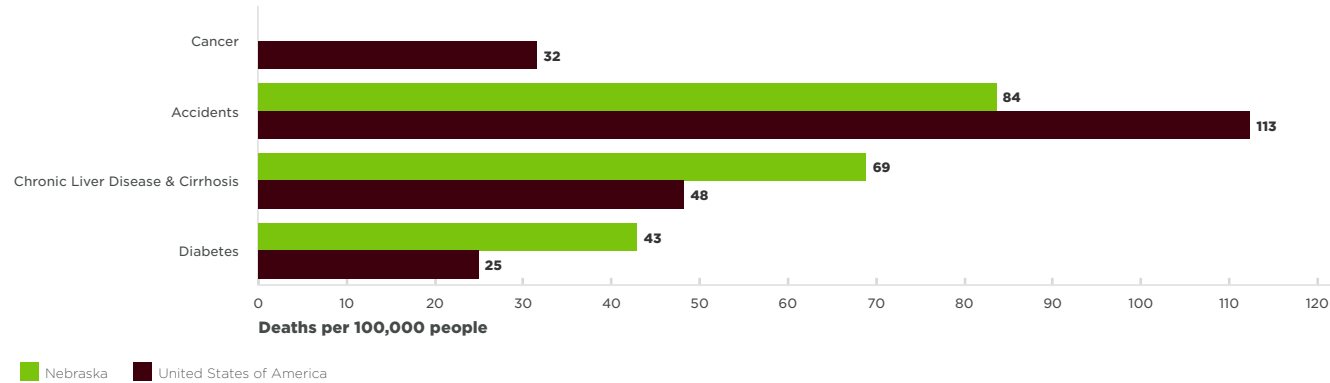
Leading Causes of Death Among Hispanic/Latinos



Sources: CDC WONDER Cause of Death 2019-2023 Crude
This data is sorted from highest to lowest based on national top causes of death for Hispanics or Latinos.

Native American

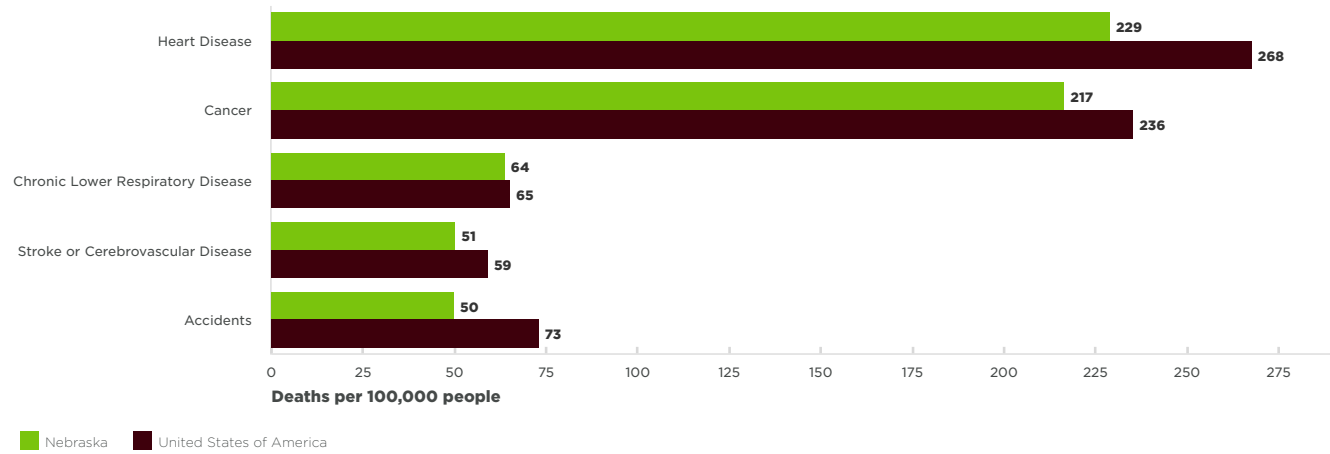
Leading Causes of Death Among Native Americans



Sources: CDC WONDER Cause of Death 2019-2023 Crude
This data is sorted from highest to lowest based on national top causes of death for Native Americans.

White

Leading Causes of Death Among Non-Hispanic Whites



Sources: CDC WONDER Cause of Death 2019-2023 Crude

This data is sorted from highest to lowest based on national top causes of death for whites.

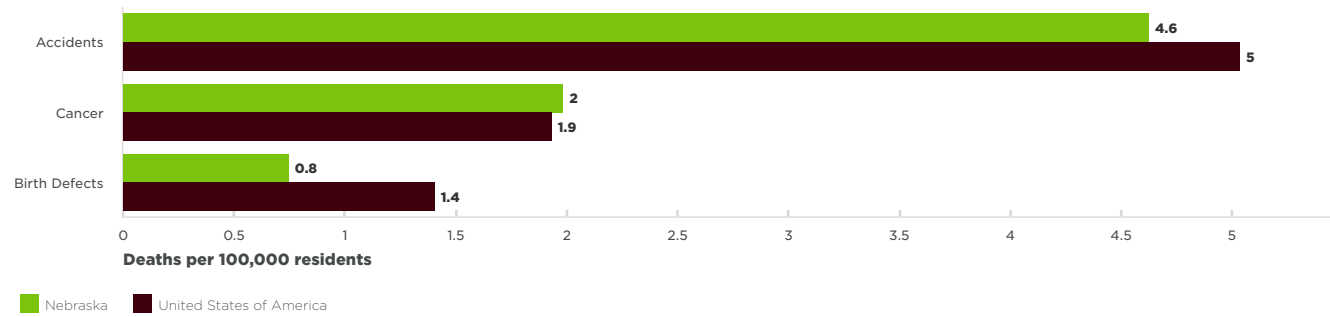
COVID Death Rate by Race & Ethnicity

Leading Causes of Death by Age

Note: Leading causes of death by age utilizes data over a three year period to improve data availability and reliability. At present, COVID death data is not available for all three years. As a result, COVID death rates by age are located in a separate, single-year bar chart.

Age 1-14

Leading Causes of Death Age 1-14

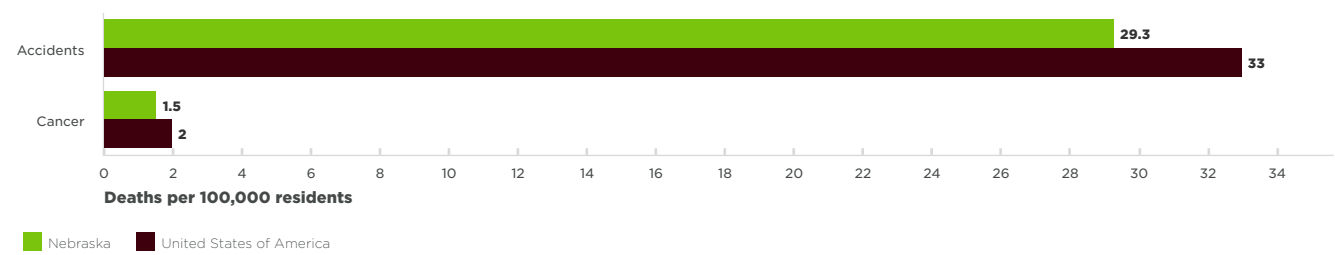


Sources: CDC WONDER Cause of Death 2019-2023 Crude

This data is sorted from highest to lowest based on national top causes of death for ages 1-14.

Age 15-24

Leading Causes of Death Age 15-24

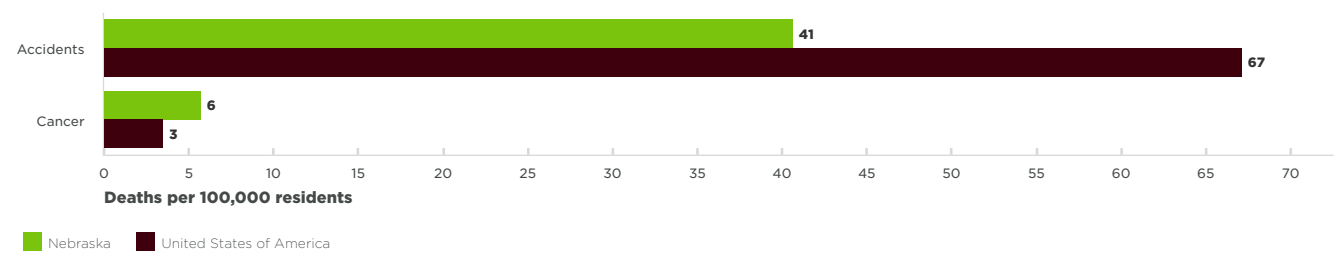


Sources: CDC WONDER Cause of Death 2019-2023 Crude

This data is sorted from highest to lowest based on national top causes of death for ages 15-24.

Age 25-34

Leading Causes of Death Age 25-34

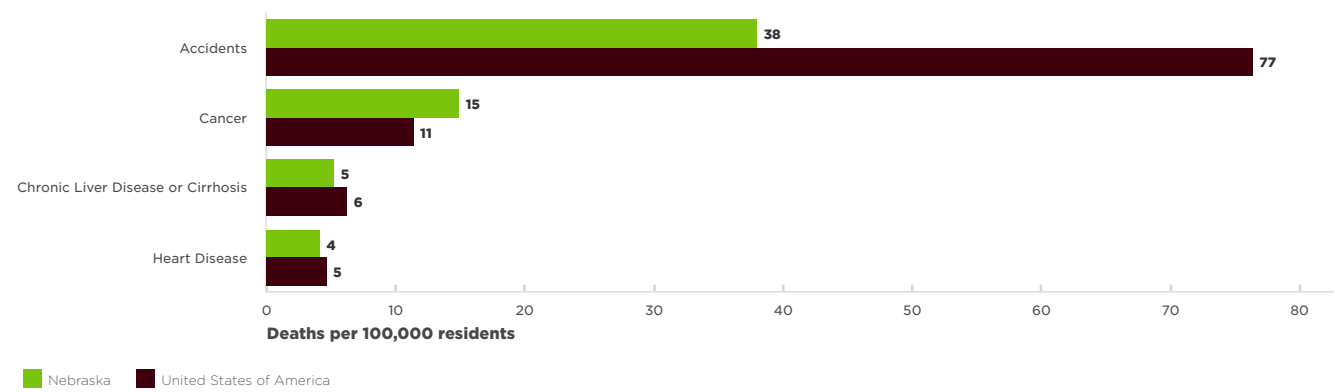


Sources: CDC WONDER Cause of Death 2019-2023 Crude

This data is sorted from highest to lowest based on national top causes of death for ages 25-34.

Age 35-44

Leading Causes of Death Age 35-44

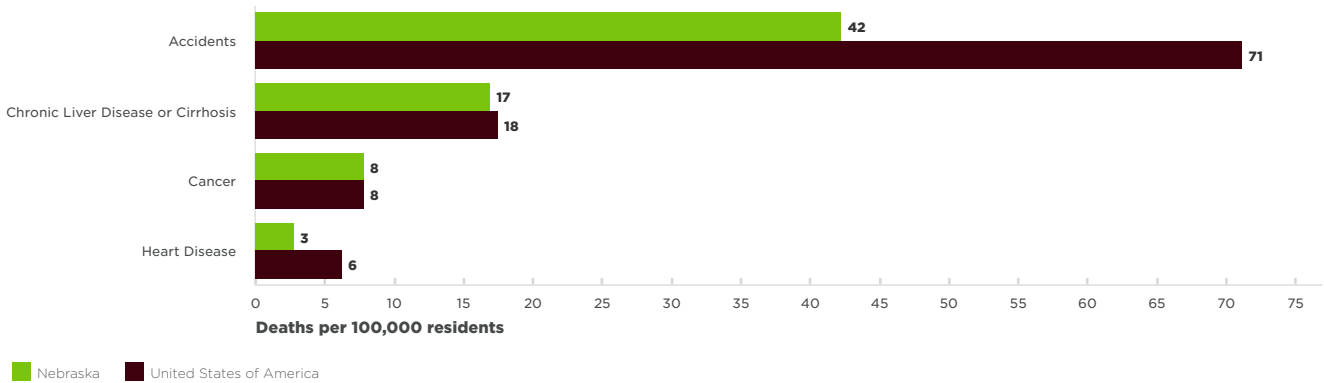


Sources: CDC WONDER Cause of Death 2019-2023 Crude

This data is sorted from highest to lowest based on national top causes of death for ages 35-44.

Age 45-54

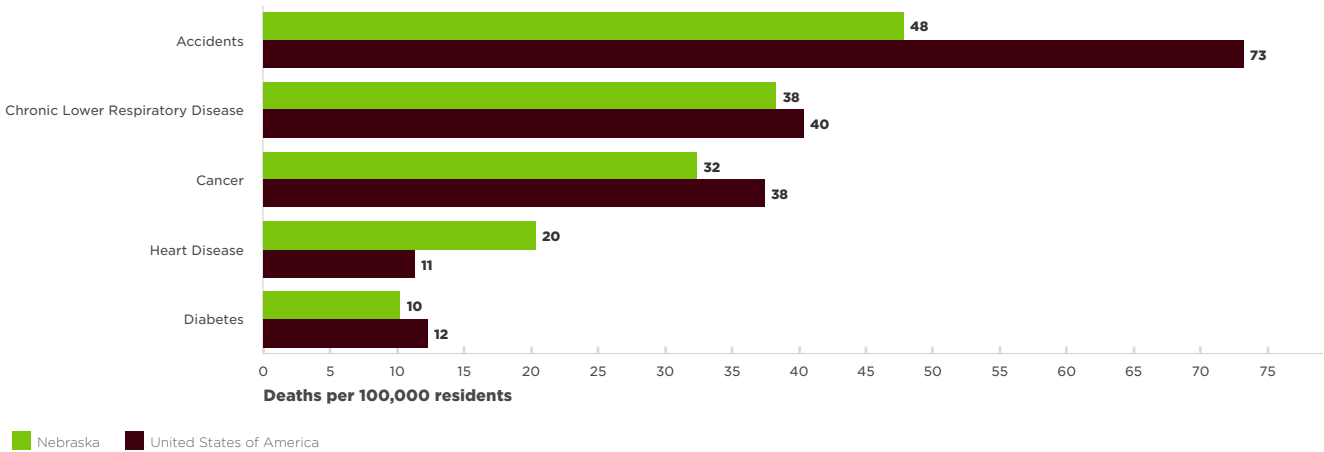
Leading Causes of Death Age 45-54



Sources: CDC WONDER Cause of Death 2019-2023 Crude
This data is sorted from highest to lowest based on national top causes of death for ages 45-54.

Age 55-64

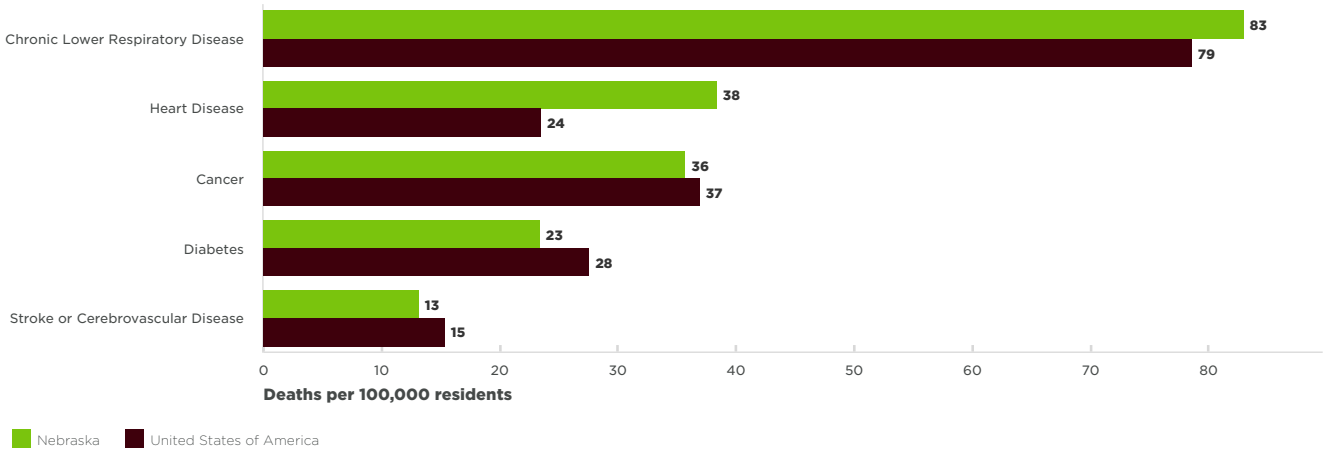
Leading Causes of Death Age 55-64



This data is sorted from highest to lowest based on national top causes of death for ages 55-64.

Age 65-74

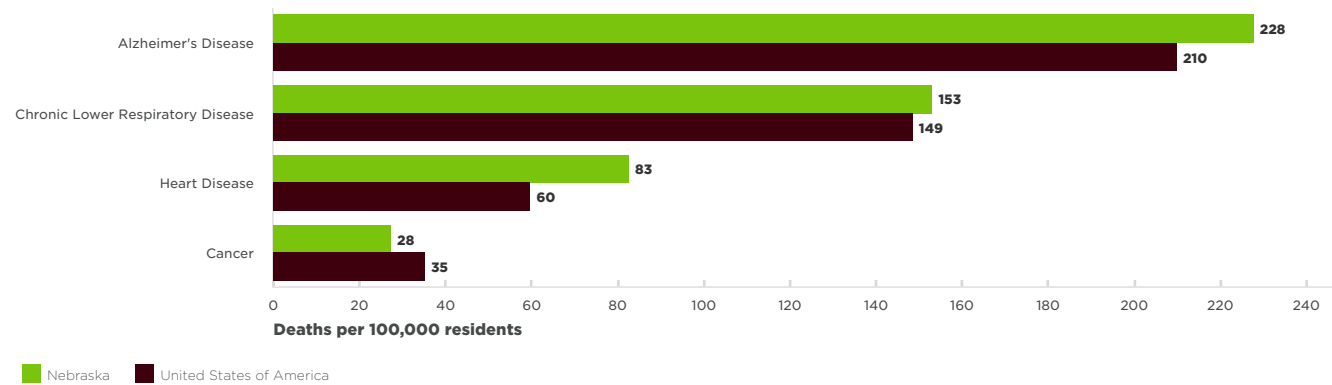
Leading Causes of Death Age 65-74



Sources: CDC WONDER Cause of Death 2019-2023 Crude
This data is sorted from highest to lowest based on national top causes of death for ages 65-74.

Age 75-84

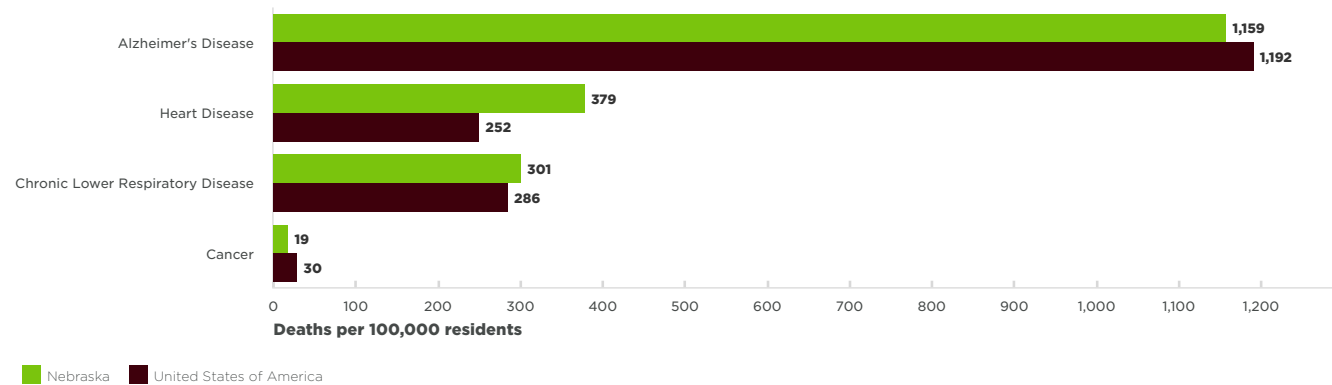
Leading Causes of Death Age 75-84



Sources: CDC WONDER Cause of Death 2019-2023 Crude
This data is sorted from highest to lowest based on national top causes of death for ages 75-84.

Age 85+

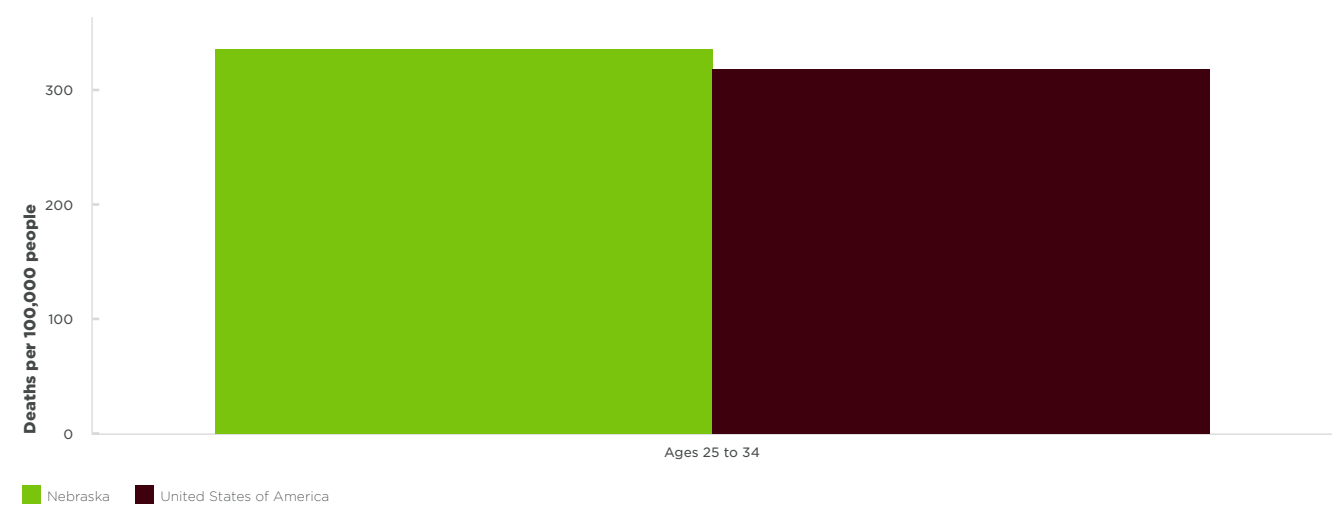
Leading Causes of Death Age 85+



Sources: CDC WONDER Cause of Death 2019-2023 Crude
This data is sorted from highest to lowest based on national top causes of death for ages 85+.

COVID Death Rate by Age

COVID-19 Deaths by Age

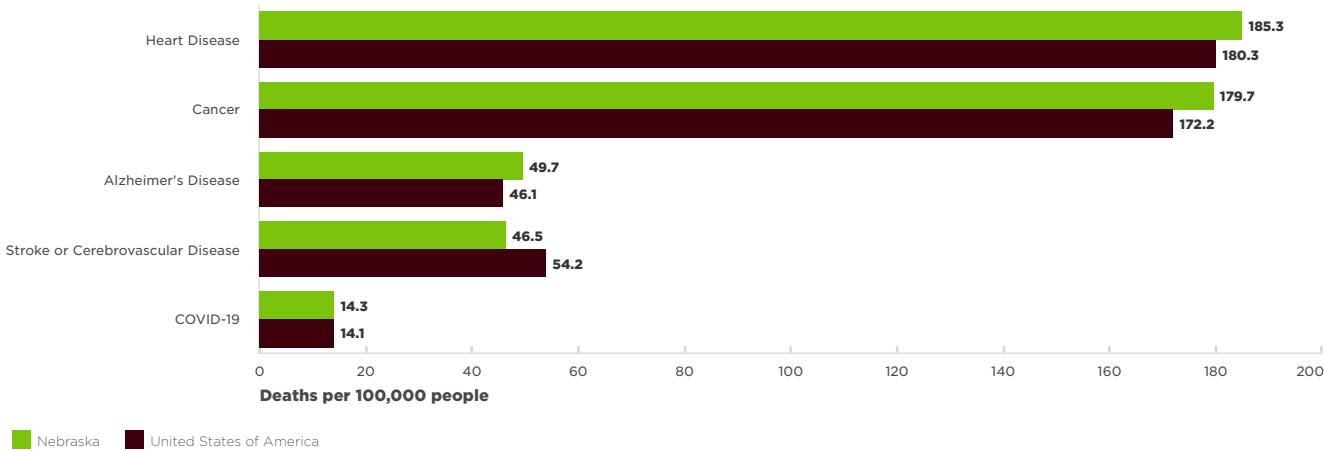


Sources: CDC WONDER Cause of Death 2023 Crude

Leading Causes of Death by Sex

Females

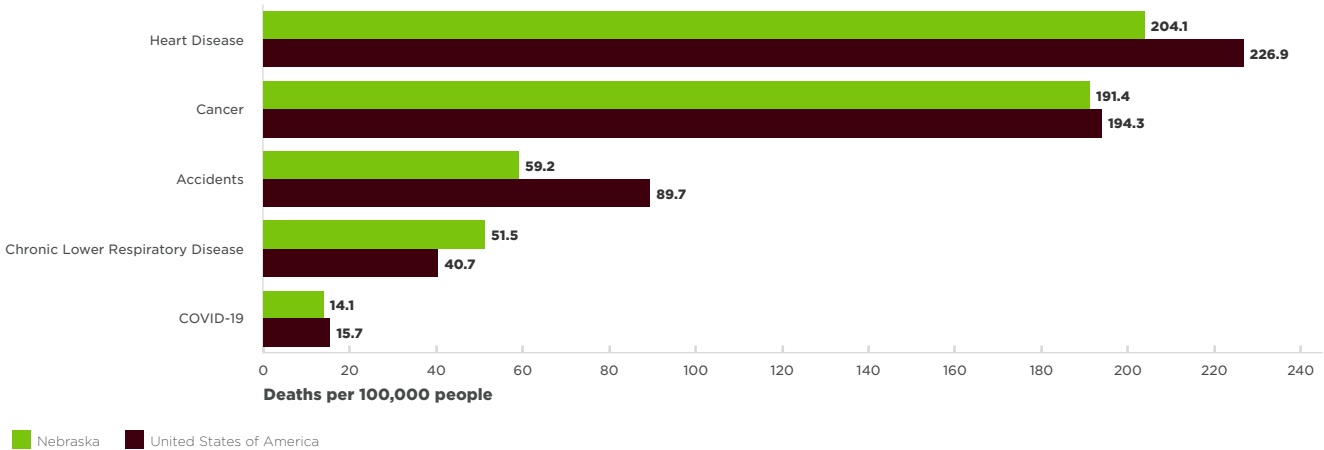
Leading Causes of Death Among Females



Sources: CDC WONDER Cause of Death 2023 Crude
This data is sorted from highest to lowest based on national top causes of death for females.

Males

Leading Causes of Death Among Males



Sources: CDC WONDER Cause of Death 2023 Crude
This data is sorted from highest to lowest based on national top causes of death for males.

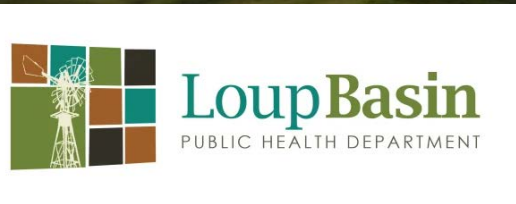
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Loup Basin Public Health Department Community Health Assessment

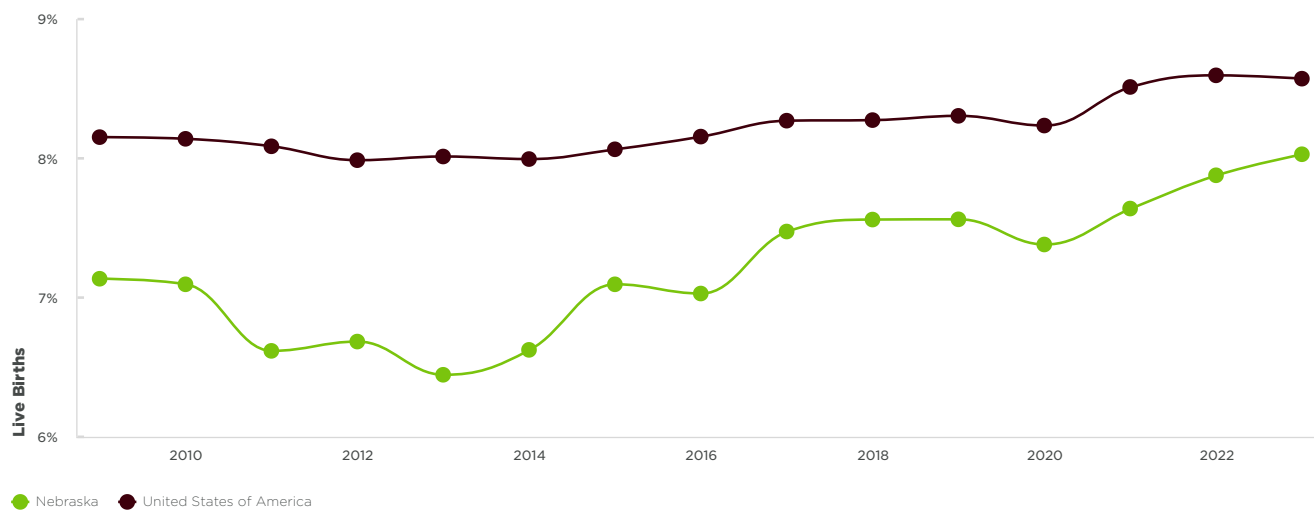
Preventing illness leads to better outcomes.

Healthy outcomes are about more than just the absence of illness and how long we live—it’s about our overall well-being. Improving outcomes in our community means looking at the whole person and meeting their needs in all areas of life. It means giving all people the chance to have a healthy context that encourages healthy behaviors, preventing health problems before they even start.

A strong start paves the way for a healthy life.

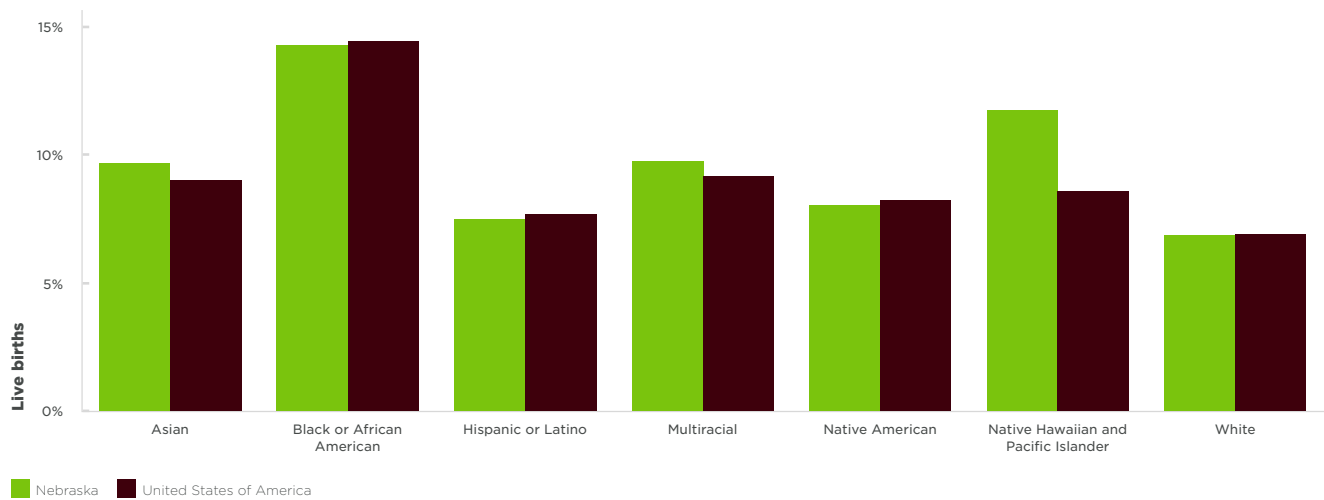
Babies who are born preterm are more likely to have serious health complications, including low birth weight, that can impact their health for the rest of their lives. Factors such as a mother’s age, ongoing health conditions, exposure to pollution, substance use, the effects of racism, and more increase the risk of a baby being born too early and with too low of a birth weight. When preterm births and low birth weight outcomes rise in our community, our families need better access to education, resources, and healthcare providers to help them deliver a healthy baby.

Low Birth Weight



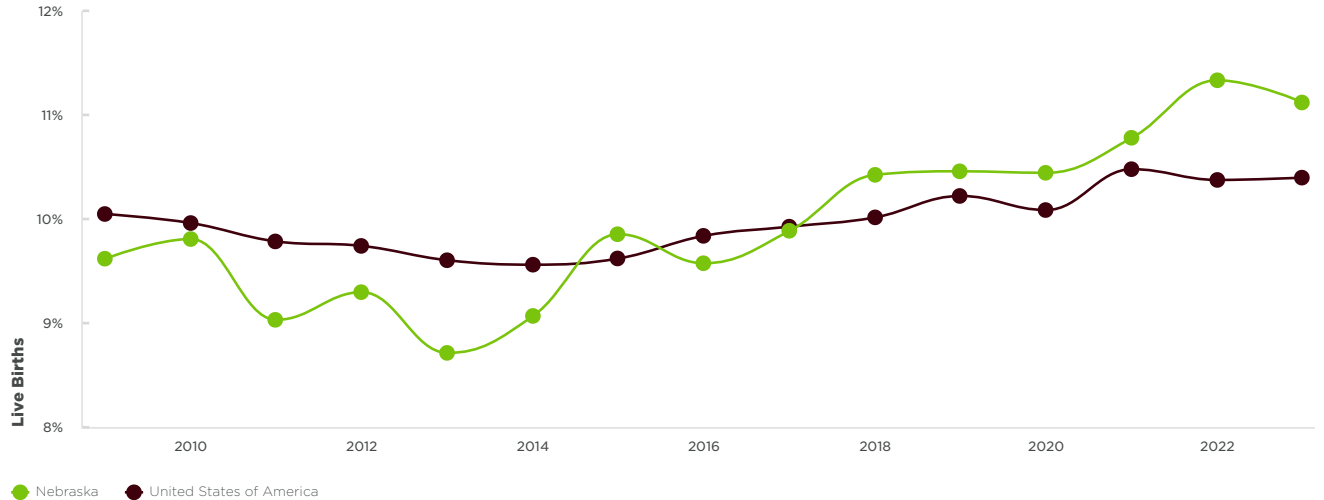
Sources: CDC WONDER Natality

Low Birth Weight Births by Race/Ethnicity



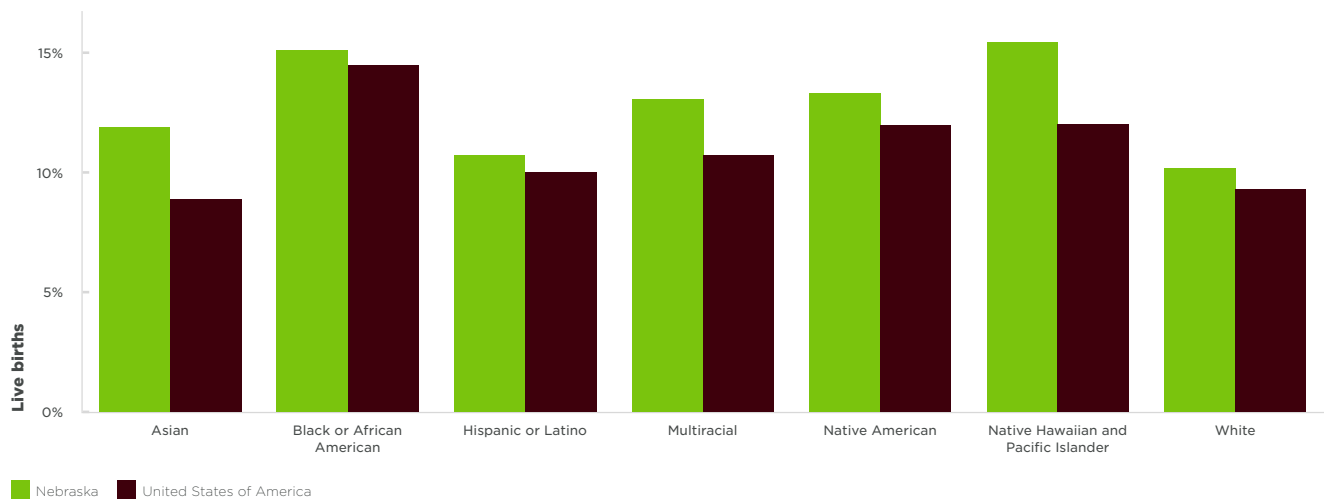
Sources: CDC WONDER Natality 2019-2023
Note: All data represents non-Hispanic or Latino people except the Hispanic or Latino bar.

Preterm Births



Sources: CDC WONDER Natality

Preterm Birth Rate by Mother's Race/Ethnicity



Sources: CDC WONDER Natality 2019-2023
Note: All data represents non-Hispanic or Latino people except the Hispanic or Latino bar.

Chronic conditions are difficult to manage.

When our community experiences high levels of chronic disease, something needs to change. Many chronic illnesses can be more common, detected later, and have more serious outcomes for people in rural communities, people with disabilities, older adults, and people of color. These communities tend to have less access to healthy choices and more barriers to lifelong health. Making changes that lower chronic disease risk gives everyone a better chance at a healthy life.

Chronic Conditions Overview

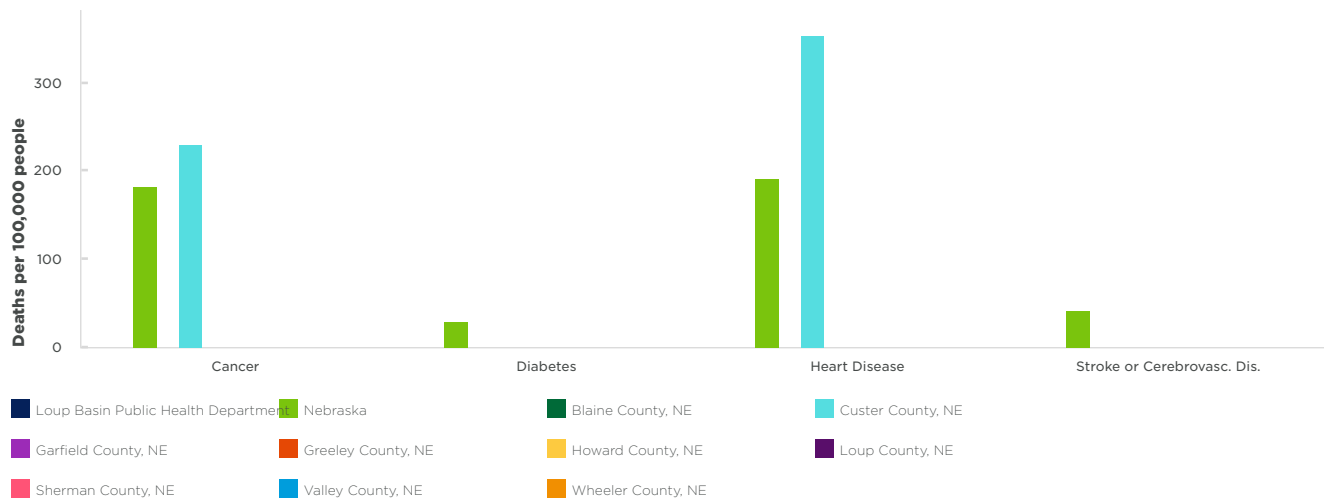
▲ ▼ Data Sources	Loup Basin Public Health Department ▲ ▼	Nebraska ▲ ▼	Blaine County, NE ▲ ▼	Custer County, NE ▲ ▼	Garfield County, NE ▲ ▼	Greeley County, NE ▲ ▼	Howard County, NE
2022 Poor Physical Health Among Adults	12.8%	11.4%	13.8%	12.8%	11.5%	12%	11.8%
2022 Obesity Among Adults	38.6%	37.2%	40.2%	38.5%	36.3%	37.1%	37.5%
2022 Diagnosed Diabetes Among Adults	12.7%	10.9%	13.6%	12.7%	12.2%	12.2%	11.5%
2022 Cancer (except skin) Among Adults	10.5%	8%	10%	10.2%	11.5%	10.6%	9.9%
2022 Coronary Heart Disease Among Adults	9.2%	6.8%	9.2%	9%	9.2%	8.7%	8.1%
2022 Stroke Among Adults	4.2%	3.2%	4.3%	4.1%	4%	3.8%	3.7%
2021 High Blood Pressure Among Adults	37.6%	30.4%	36.3%	37.1%	38.1%	37.6%	37.5%

Sources: CDC BRFSS PLACES 2021, 2022

It's not just how long we live, but how we live.

Opportunities to eat good food, exercise regularly, and get the medical care we need when we need it allow us to live full lives. The quality of that lifetime is just as important as how long it lasts. Every person deserves to experience a high quality of life. Making healthy choices easier no matter a person's location or income will improve our entire community.

Chronic Disease Death Rates



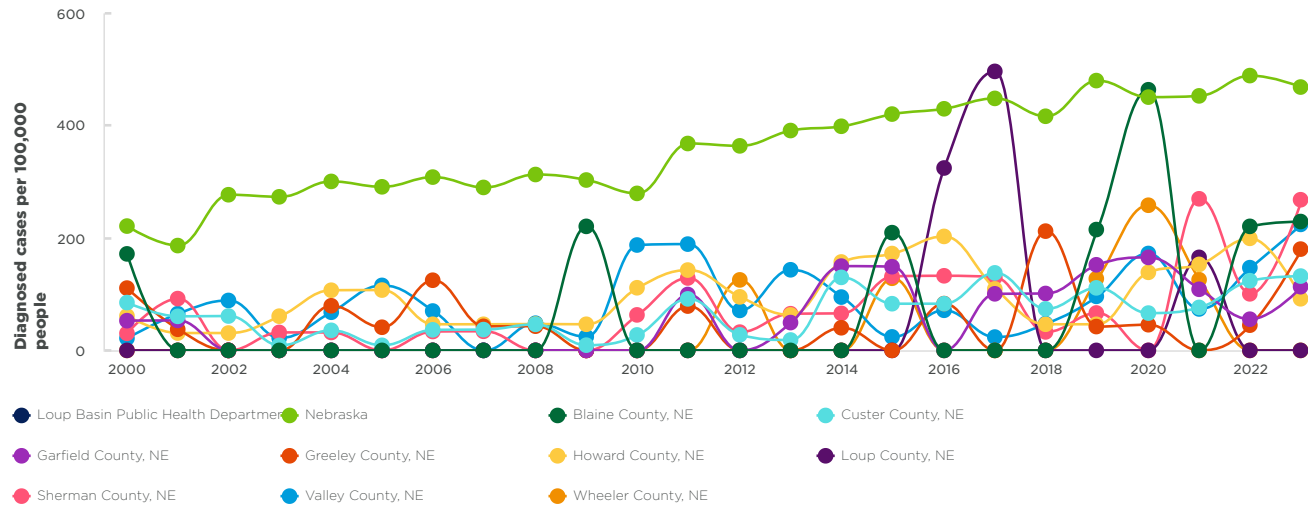
Sources: CDC WONDER Cause of Death 2021 Crude
Note: "Cerebrovasc. Dis." is short for "Cerebrovascular Disease."

Change the environment to change the rate of STIs.

Sexual health is another way to look at our community’s health and access to needed services. When an environment doesn’t allow for access to quality healthcare, well-paying jobs, or the opportunity for education, sexual health is even more challenging. Improving those factors first, educating, and creating community-based programs to help prevent STIs can help.

Chlamydia

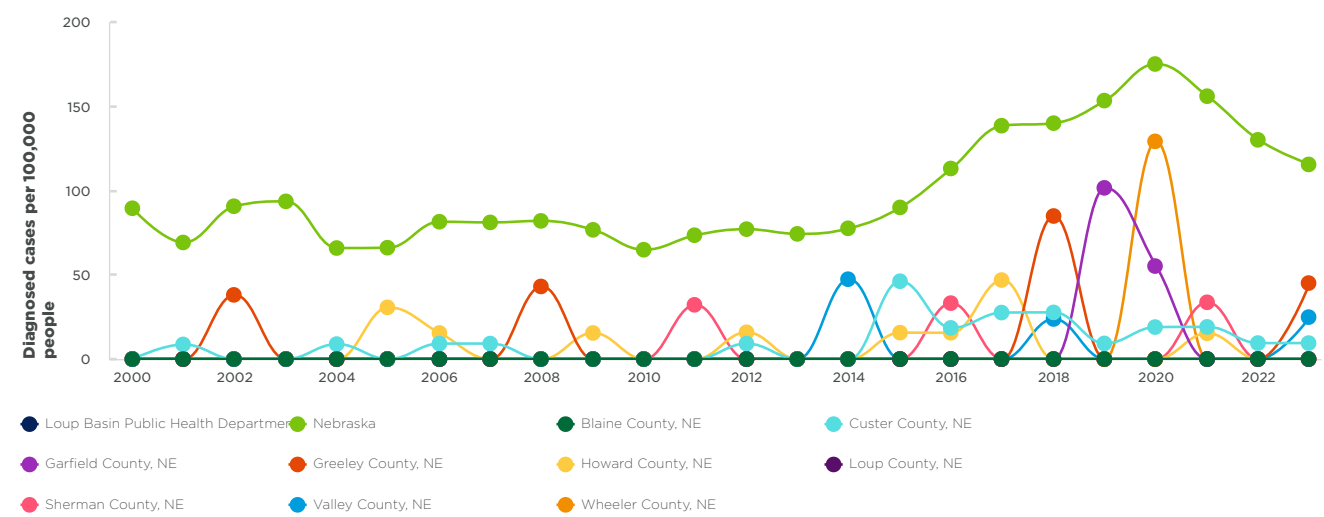
Chlamydia Rate



Sources: CDC NCHHSTP AtlasPlus

Gonorrhea

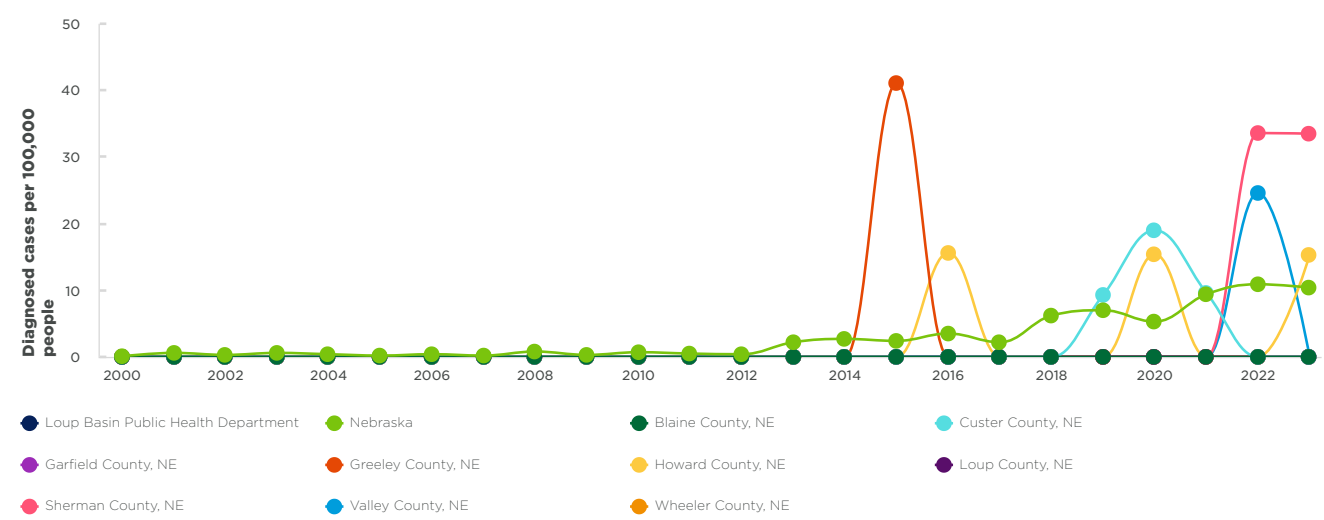
Gonorrhea Rate



Sources: CDC NCHHSTP AtlasPlus

Syphilis

Primary and Secondary Syphilis Rate

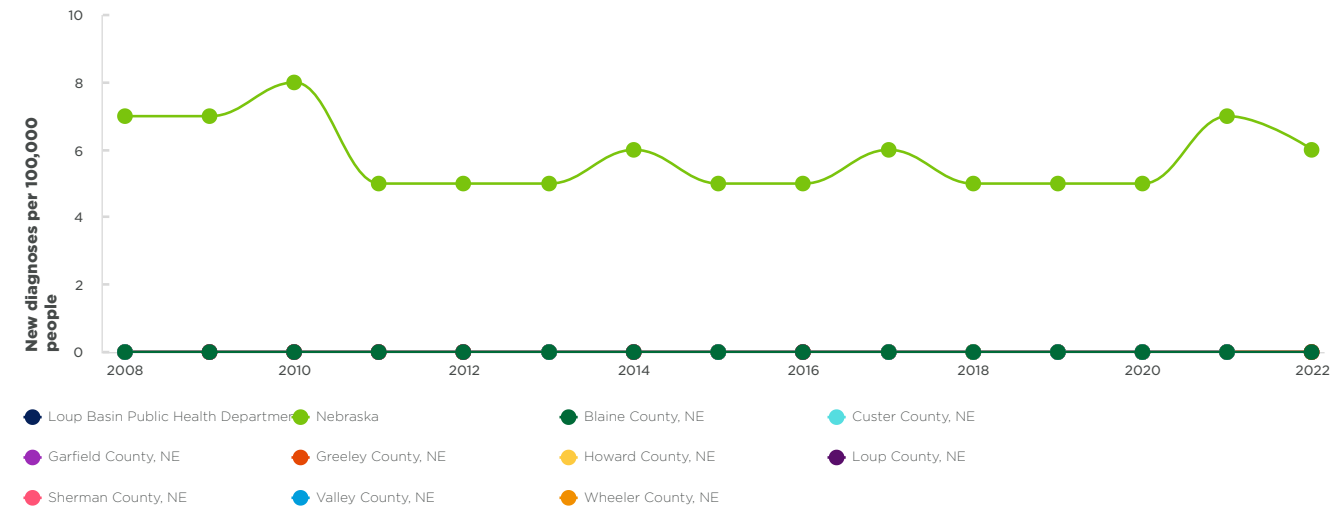


Sources: CDC NCHHSTP AtlasPlus

Primary and secondary syphilis represent the symptomatic and earliest stages of infection.

HIV New Diagnoses

HIV New Diagnoses Rate



Sources: AIDSVue Emory University

We need support in every way.

We can take action as a community to increase support and strategies to help improve mental and behavioral health outcomes. When we understand lifelong impacts, like how low income as a child may lead to increased depression as an adult, we see how interconnected our experiences and environments are to both current and future mental health. To give everyone equal opportunities to access the right resources and mental and behavioral healthcare, we need to work together to create more community-based services, remove barriers to getting help, and increase the diversity of mental health care providers.



Have Been Diagnosed with Depression

17.1%
of Adults

Loup Basin Public Health Department

17.7%

of Adults
Nebraska

Have Poor Mental Health

13.4%
of Adults

Loup Basin Public Health Department

14.1%

of Adults
Nebraska

Sources: CDC BRFSS PLACES 2022

Poor mental health describes adults who report their mental health was not good on 14 or more of the past 30 days.

▲▼ Geography	2022 Diagnosed Depression Among Adults ▲▼	2022 Poor Mental Health Among Adults ▲▼
Blaine County, NE	17.9%	14.4%
Custer County, NE	17.5%	13.8%
Garfield County, NE	16.1%	12%
Greeley County, NE	16.8%	13.5%
Howard County, NE	16.7%	13.2%
Loup County, NE	16.4%	12.7%
Sherman County, NE	17.2%	13.9%
Valley County, NE	16.4%	13%
Wheeler County, NE	16.4%	12.7%
Loup Basin Public Health Department	17.1%	13.4%
Nebraska	17.7%	14.1%

Sources: CDC BRFSS PLACES 2022

Causes of Death

▲▼ Geography	2021 Drug Overdose Death Rate ▲▼	2023 Crude Suicide Death Rate ▲▼	2023 Crude Suicide Death Rate - Male ▲▼	2023 Crude Suicide Death Rate - Female ▲▼	2019-2023 Crude Suicide Death Rate Age 18-64 ▲▼
Loup Basin Public Health Department	No data	No data	No data	No data	No data
Nebraska	11.4	14.4	23.9	4.7	20.5
Blaine County, NE	9.1	No data	No data	No data	No data
Custer County, NE	9.3	No data	No data	No data	No data
Garfield County, NE	11.8	No data	No data	No data	No data
Greeley County, NE	9.8	No data	No data	No data	No data
Howard County, NE	9.9	No data	No data	No data	No data
Loup County, NE	9.3	No data	No data	No data	No data
Sherman County, NE	8.6	No data	No data	No data	No data
Valley County, NE	10.3	No data	No data	No data	No data
Wheeler County, NE	9	No data	No data	No data	No data

Sources: CDC 2021; CDC WONDER Cause of Death 2019-2023 Crude, 2023 Crude

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Loup Basin
PUBLIC HEALTH DEPARTMENT

Loup Basin Public Health Department Community Health Assessment

Maternal and Infant Data

The preterm birth rate in Nebraska was **11.1%** in 2023, lower than the rate in 2022

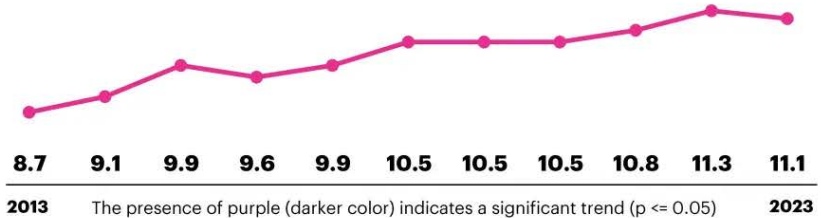
**PRETERM
BIRTH
GRADE**

D

US RATE NE RATE NE RANK

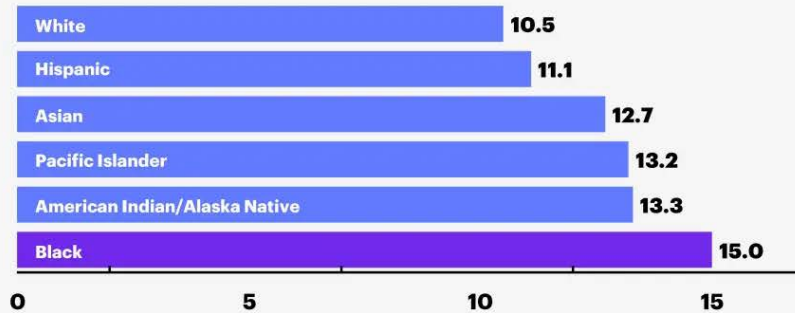


Percentage of live births born preterm



The preterm birth rate among babies born to Black birthing people is **1.2x higher** than the rate among all other babies

Preterm birth rate by race/ethnicity, 2021-2023



**DISPARITY
RATIO 1.25**

This data is intended to highlight disparities in outcomes related to race/ethnicity and should serve as a starting point for discussions about addressing systemic racism and inequality.

Note: The disparity ratio is a summary measure of the gap between the racial/ethnic group with the lowest rate of preterm birth compared to all others. A value closer to 1 is most desirable, with 1 indicating no disparity. The United States preterm birth disparity ratio is 1.29.

Chronic health conditions make people more likely to have a preterm birth

The tiles display the 2023 preterm birth rate for babies born to birthing people with each chronic condition (in blue) and percentage of all births exposed to each condition (in parentheses).



Note: More than one condition can occur at the same time. All conditions occur prior to pregnancy. US preterm birth rates for birthing people with each condition are as follows: smoking: 15.5%; hypertension: 23.3%; unhealthy weight: 12.3%; and diabetes: 28.8%.

Source: National Center for Health Statistics, Natality data, 2013-2023.

NEBRASKA

The infant mortality rate **increased in the last decade; In 2022, 142 babies died** before their first birthday

INFANT MORTALITY RATE

5.8

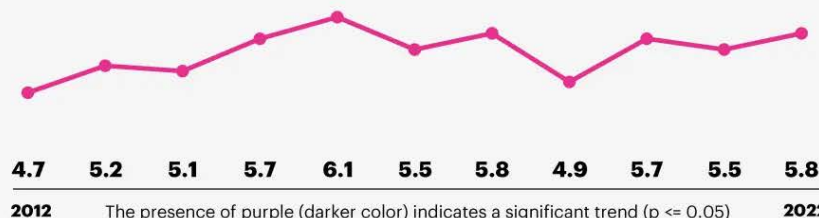
US RATE

5.6

NE RANK

26

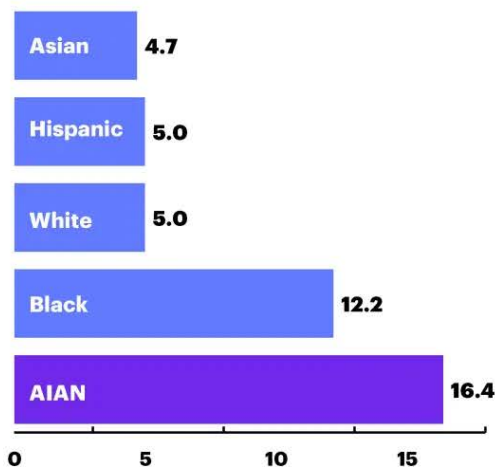
Rate per 1,000 live births



The infant mortality rate among babies born to **AIAN birthing people is 2.8x** the state rate

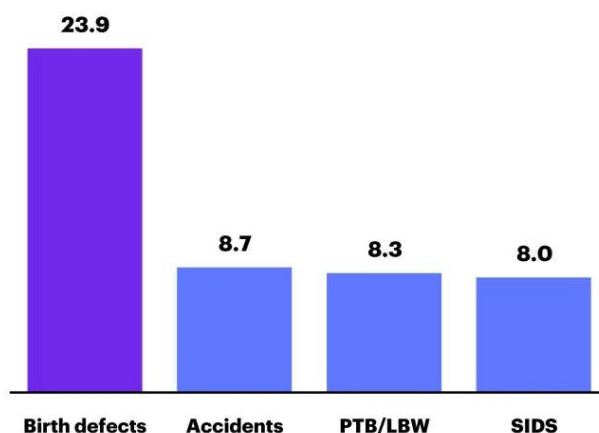
Infant mortality rate

Rate per 1,000 live births by maternal race/ethnicity, 2020-2022



Leading causes of infant death

Percent of total deaths by underlying cause, 2020-2022

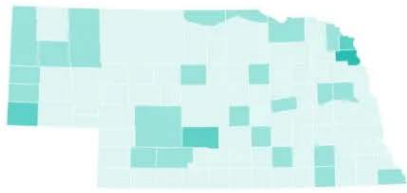


Notes: PI = Pacific Islander; AIAN = American Indian/Alaska Native; PTB/LBW = preterm birth and low birth weight; SIDS = sudden infant death syndrome. Other causes account for 51.1% of infant deaths.

Source: National Center for Health Statistics, Period Linked Birth/Infant Death data, 2012-2022.

NEBRASKA

Maternal Vulnerability Index by county



The Maternal Vulnerability Index is used to understand where and why birthing people may be more likely to have poor health outcomes

Birthing people in Nebraska are most vulnerable to poor outcomes due to the following factors:



Reproductive healthcare



General healthcare

Source: Surgo Health, Maternal Vulnerability Index (MVI), 2024.
<https://mvi.surgoventures.org/>

Exposure to extreme heat or air pollution can increase the risk of poor maternal and infant health outcomes, including preterm birth

Community and individual risk mitigation efforts can help reduce the risk of exposure to extreme heat and poor air quality.

Birthing people can check their local heat risk and air quality at:
<http://www.cdc.gov/heatrisk>

22
DAYS



EXTREME HEAT

This shows the average number of days in the year that birthing people were at risk for exposure to extreme heat.

6
DAYS



POOR AIR QUALITY

This shows the average number of days in the year that birthing people were at risk for exposure to poor air quality.

Source: Centers for Disease Control and Prevention National Environmental Public Health Tracking Network, Historical Temperature and Heat Index, 2023; Environmental Protection Agency, Air Quality Statistics by County, 2023. See technical notes for more details.

The measures below are important indicators for how Nebraska is supporting the health of birthing people

25.1
PER 100,000 BIRTHS



MATERNAL MORTALITY

This shows the death rate of birthing people from complications of pregnancy or childbirth that occur during the pregnancy or within 6 weeks after the pregnancy ends.

22.9
PERCENT



LOW-RISK CESAREAN BIRTH

This shows Cesarean births for first-time moms, carrying a single baby, positioned head-first, and at least 37 weeks pregnant.

12.6
PERCENT



INADEQUATE PRENATAL CARE

Percentage of birthing people who initiated care in the fifth month or later or less than 50% of the appropriate number of visits for the infant's gestational age.

Source: National Center for Health Statistics, Mortality data, 2018-2022. National Center for Health Statistics, Natality data, 2023.

THE 2024 MARCH OF DIMES REPORT CARD: THE STATE OF MATERNAL AND INFANT HEALTH FOR AMERICAN FAMILIES

© 2024 March of Dimes

References:

March of Dimes. (2024, November). *2024 March of Dimes report card for Nebraska* [State report card]. March of Dimes.
<https://www.marchofdimes.org/peristats/reports/nebraska/report-card>¹

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Loup Basin Public Health Department Community Health Assessment

Decreasing risk factors improves lives.

When our community experiences high levels of chronic disease, something needs to change. Many chronic illnesses can be more common, detected later, and have more serious outcomes for people in rural communities, people with disabilities, older adults, and people of color. These are communities that tend to have less access to healthy choices and more barriers to lifelong health. Providing resources to remove more risk factors gives everyone an equal chance at a healthy life and reduces the likelihood of serious diseases.

Low Access to Healthy Food

40.2%

of People

Loup Basin Public Health Department

54.2%

of People

Nebraska

Sources: USDA ERS FARA 2019

Low access is defined as 1/2 mile urban and 10 miles rural.

Geography	2019 Low Access to Healthy Food
Blaine County, NE	100%
Custer County, NE	61.9%
Garfield County, NE	10.1%
Greeley County, NE	66.2%
Howard County, NE	20.1%
Loup County, NE	39.9%
Sherman County, NE	20.1%
Valley County, NE	11.5%
Wheeler County, NE	89.1%
Loup Basin Public Health Department	40.2%
Nebraska	54.2%

Sources: USDA ERS FARA 2019

Low access is defined as 1/2 mile urban and 10 miles rural.



Percent of Households Receiving Food Stamps/ SNAP

7.2%

Loup Basin Public Health Department

8%

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Percent of Households Receiving Food Stamps/SNAP
Blaine County, NE	0%
Custer County, NE	8.4%
Garfield County, NE	3.3%
Greeley County, NE	5%
Howard County, NE	8%
Loup County, NE	7.6%
Sherman County, NE	4.8%
Valley County, NE	9.2%
Wheeler County, NE	3.1%
Loup Basin Public Health Department	7.2%
Nebraska	8%

Sources: US Census Bureau ACS 5-year 2019-2023

Obesity Among Adults

38.6%

People

Loup Basin Public Health Department

37.2%

People

Nebraska

Sources: CDC BRFSS PLACES 2022

Geography	2022 Obesity Among Adults
Blaine County, NE	40.2%
Custer County, NE	38.5%
Garfield County, NE	36.3%
Greeley County, NE	37.1%
Howard County, NE	37.5%
Loup County, NE	38.1%
Sherman County, NE	39.5%
Valley County, NE	40%
Wheeler County, NE	38.4%
Loup Basin Public Health Department	38.6%
Nebraska	37.2%

Sources: CDC BRFSS PLACES 2022

Cancer (except skin) Incidence Among Adults
10.5%
People
Loup Basin Public Health Department

8%
People
Nebraska

Cancer Death Rate
No data
Deaths per 100,000 people
Loup Basin Public Health Department

185.6
Deaths per 100,000 people
Nebraska

Sources: CDC BRFSS PLACES 2022; CDC WONDER Cause of Death 2023 Crude

Geography	2022 Cancer (except skin) Among Adults	2023 Crude Cancer Death Rate
Blaine County, NE	10%	No data
Custer County, NE	10.2%	No data
Garfield County, NE	11.5%	No data
Greeley County, NE	10.6%	No data
Howard County, NE	9.9%	No data
Loup County, NE	11.5%	No data
Sherman County, NE	10.7%	No data
Valley County, NE	10.4%	No data
Wheeler County, NE	11.9%	No data
Loup Basin Public Health Department	10.5%	No data
Nebraska	8%	185.6

Sources: CDC BRFSS PLACES 2022; CDC WONDER Cause of Death 2023 Crude

Diagnosed Diabetes Incidence Among Adults
12.7%
People
Loup Basin Public Health Department

10.9%
People
Nebraska

Diabetes Death Rate
No data
Deaths per 100,000 people
Loup Basin Public Health Department

29.4
Deaths per 100,000 people
Nebraska

Sources: CDC BRFSS PLACES 2022; CDC WONDER Cause of Death 2023 Crude

Geography	2022 Diagnosed Diabetes Among Adults	2023 Crude Diabetes Death Rate
Blaine County, NE	13.6%	No data
Custer County, NE	12.7%	No data
Garfield County, NE	12.2%	No data
Greeley County, NE	12.2%	No data
Howard County, NE	11.5%	No data
Loup County, NE	13.8%	No data
Sherman County, NE	14.1%	No data
Valley County, NE	12.6%	No data
Wheeler County, NE	14%	No data
Loup Basin Public Health Department	12.7%	No data
Nebraska	10.9%	29.4

Sources: CDC BRFSS PLACES 2022; CDC WONDER Cause of Death 2023 Crude



Coronary Heart Disease Incidence Among Adults

9.2%

People

Loup Basin Public Health Department

6.8%

People

Nebraska



Heart Disease Death Rate

No data

Deaths per 100,000 people

Loup Basin Public Health Department

194.8

Deaths per 100,000 people

Nebraska

Sources: CDC BRFSS PLACES 2022; CDC WONDER Cause of Death 2023 Crude

Geography	2022 Coronary Heart Disease Among Adults	2023 Crude Heart Disease Death Rate
Blaine County, NE	9.2%	No data
Custer County, NE	9%	245.7
Garfield County, NE	9.2%	No data
Greeley County, NE	8.7%	No data
Howard County, NE	8.1%	No data
Loup County, NE	10%	No data
Sherman County, NE	10.5%	No data
Valley County, NE	9.4%	No data
Wheeler County, NE	10.3%	No data
Loup Basin Public Health Department	9.2%	No data
Nebraska	6.8%	194.8

Sources: CDC BRFSS PLACES 2022; CDC WONDER Cause of Death 2023 Crude



Stroke Incidence Among Adults

4.2%

People

Loup Basin Public Health Department

3.2%

People

Nebraska



Stroke / Cerebrovascular Disease Death Rate

No data

Deaths per 100,000 people

Loup Basin Public Health Department

42.2

Deaths per 100,000 people

Nebraska

Sources: CDC BRFSS PLACES 2022; CDC WONDER Cause of Death 2023 Crude

Geography	2022 Stroke Among Adults	2023 Crude Stroke Death Rate
Blaine County, NE	4.3%	No data
Custer County, NE	4.1%	No data
Garfield County, NE	4%	No data
Greeley County, NE	3.8%	No data
Howard County, NE	3.7%	No data
Loup County, NE	4.4%	No data
Sherman County, NE	4.8%	No data
Valley County, NE	4.2%	No data
Wheeler County, NE	4.6%	No data
Loup Basin Public Health Department	4.2%	No data
Nebraska	3.2%	42.2

Sources: CDC BRFSS PLACES 2022; CDC WONDER Cause of Death 2023 Crude

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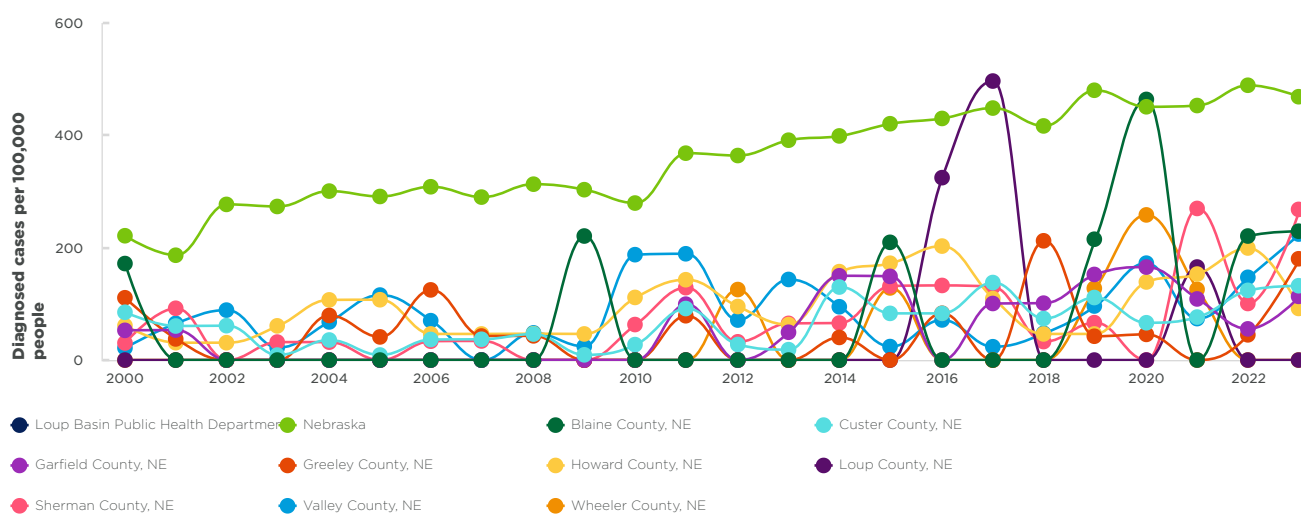
Loup Basin Public Health Department Community Health Assessment

Change the environment to change the rate of STIs.

Sexual health is another way to look at our community's health and access to needed services. Studies show certain racial and ethnic groups have higher rates of sexually transmitted infections (STIs) than white populations. This isn't because of their heritage, but by other factors that people of color often face. When an environment doesn't allow for access to quality healthcare, well-paying jobs, or the opportunity for education, sexual health is even more challenging. Our community can help by improving those factors first, while also educating on personal health from a young age and creating community-based programs to help prevent STIs.

Chlamydia

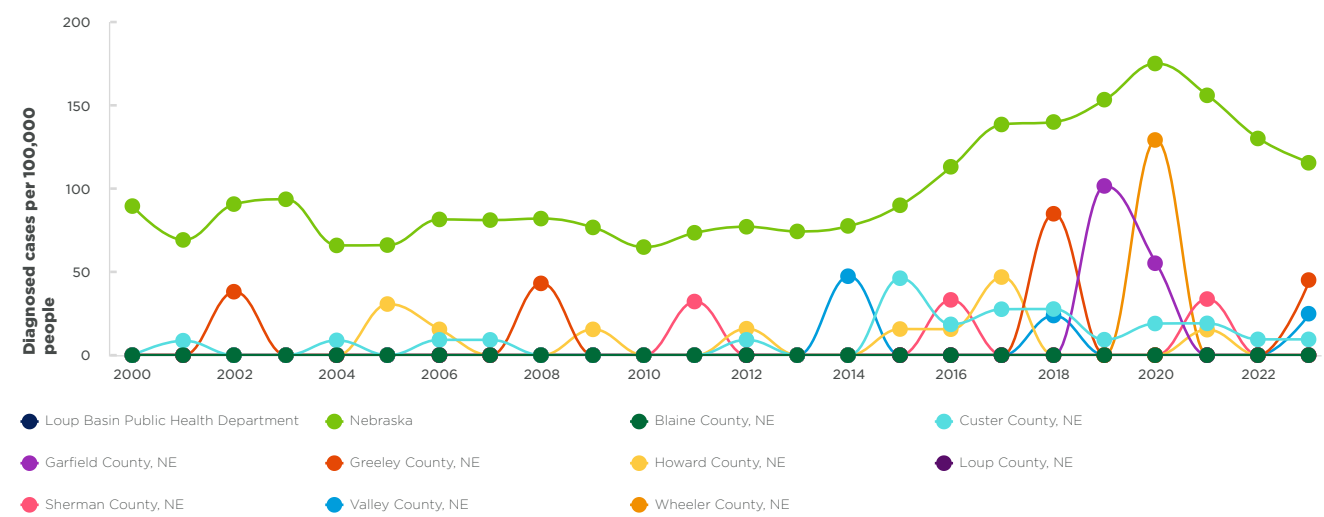
Chlamydia Rate



Sources: CDC NCHSTP AtlasPlus

Gonorrhea

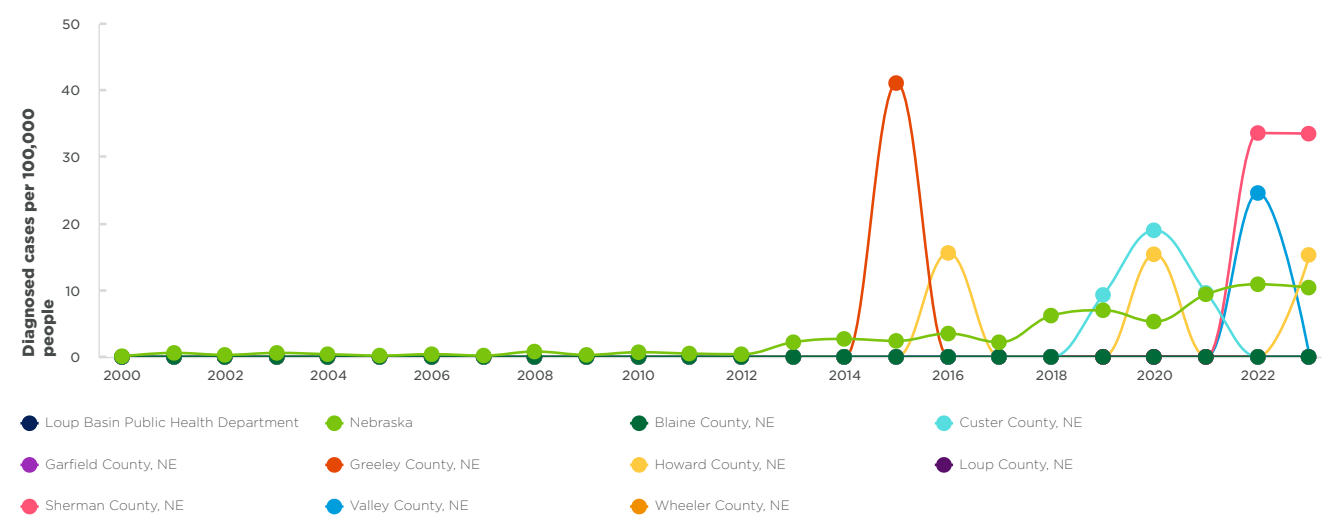
Gonorrhea Rate



Sources: CDC NCHHSTP AtlasPlus

Syphilis

Primary and Secondary Syphilis Rate

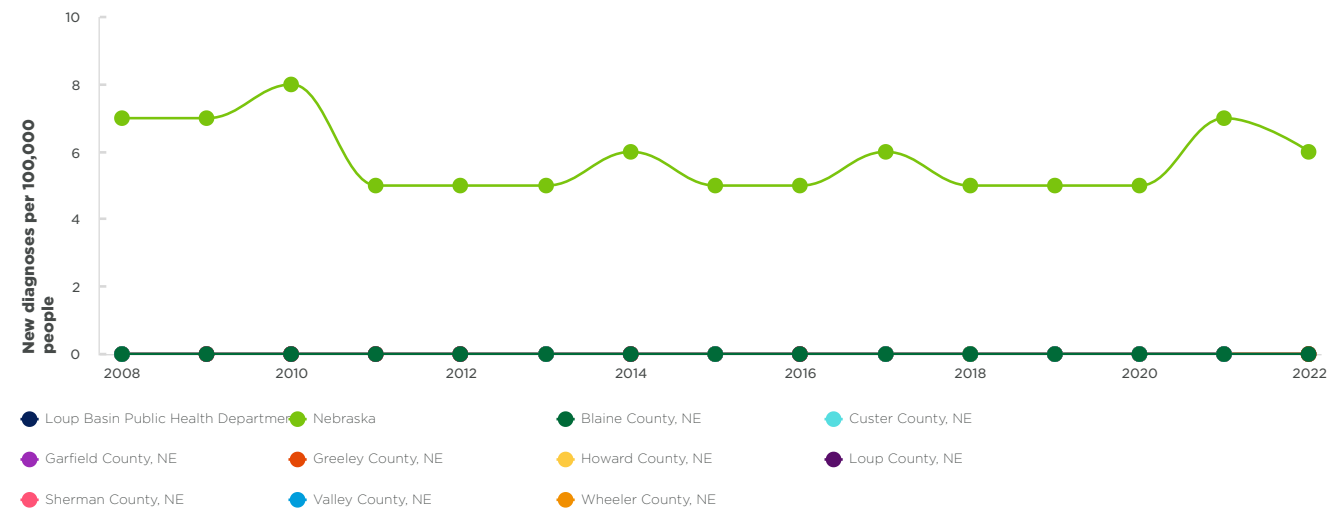


Sources: CDC NCHHSTP AtlasPlus

Primary and secondary syphilis represent the symptomatic and earliest stages of infection.

HIV New Diagnoses

HIV New Diagnoses Rate



Sources: AIDSvu Emory University

Learn more:

1. CDC. "STD Health Equity." Centers for Disease Control and Prevention, 18 Oct. 2022. <https://www.cdc.gov/std/health-disparities/default.htm>.

2. CDC. "CDC Community Approaches to Reducing Sexually Transmitted Diseases." Centers for Disease Control and Prevention, 8 June 2020. <https://www.cdc.gov/std/health-disparities/cars.htm>.

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We need support in every way.

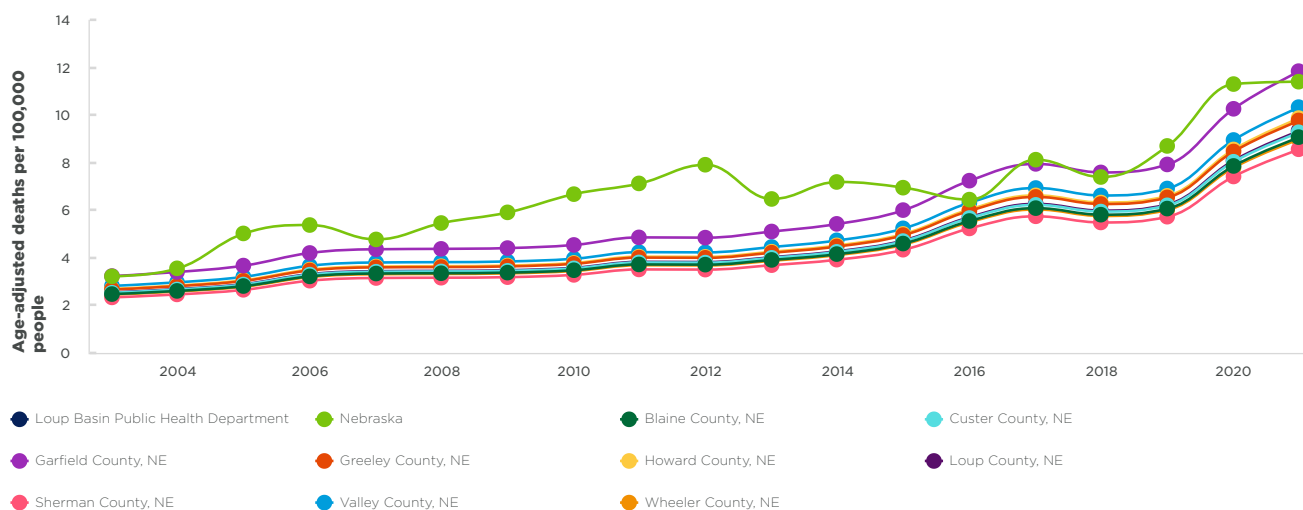
We can take action as a community to increase the support and strategies to help improve health outcomes, such as preventing injuries or decreasing suicide. When we understand lifelong impacts, like how low income as a child may lead to increased depression as an adult, we see how interconnected our experiences and environments are to both current and future mental health. To give everyone equal opportunities to access the right resources and mental and behavioral healthcare, we need to work together to create more community-based services, remove barriers to getting help, and increase the diversity of mental health care providers.

Mental and behavioral health-related deaths are preventable.

Mental and behavioral health issues are serious. Deaths related to these challenges are preventable, but it takes all of us to play a part. Providing better treatment and resources is a key part of prevention. This can include supporting people financially or with their housing, improving access to professional help, encouraging peer and community-based programs, and teaching coping skills and mental health education early to set people up for success. Losing one life is too many. And when we see a rise in mental health-related deaths, our community must come together to save lives before it's too late.

Drug Overdose Death Rate

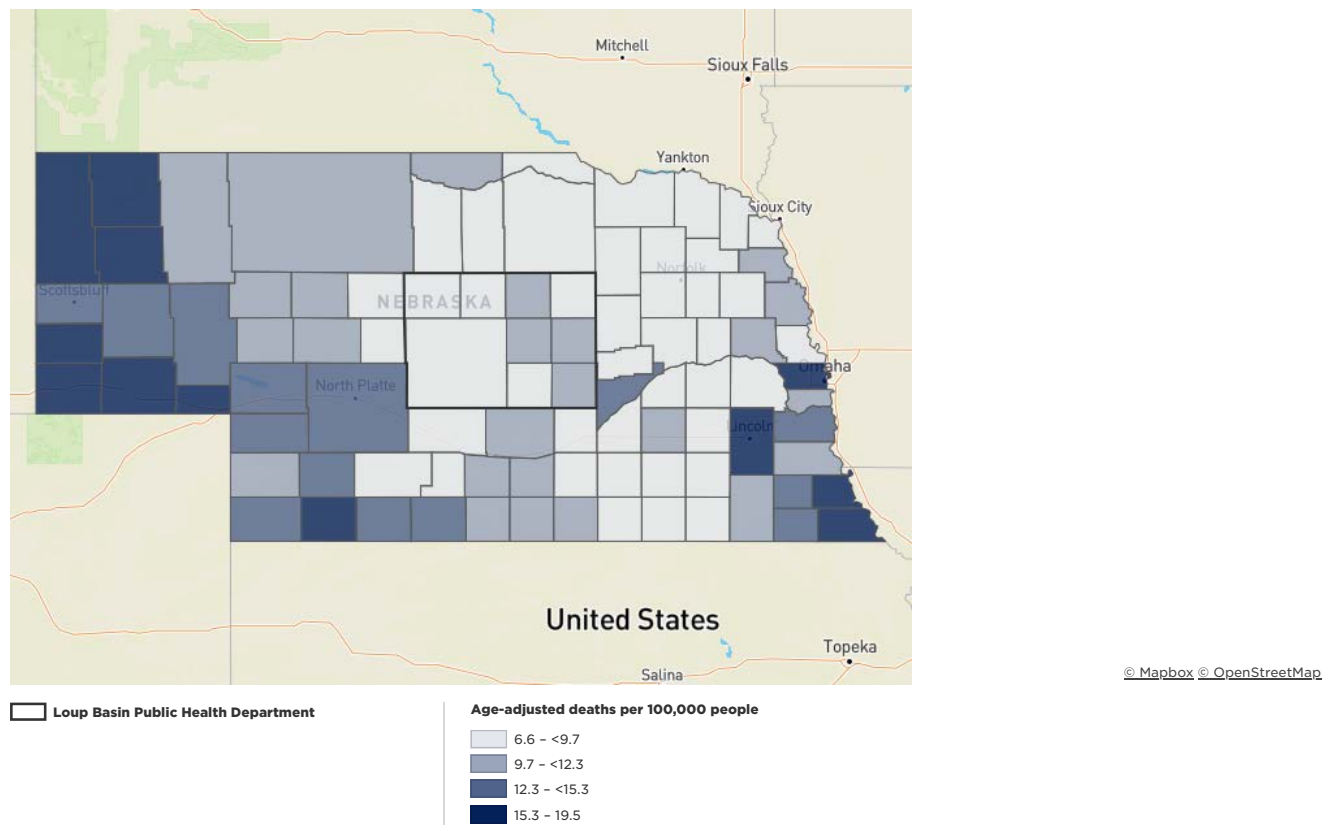
Drug Overdose Death Rate



Sources: CDC

Map: Drug Overdose Death Rate by County

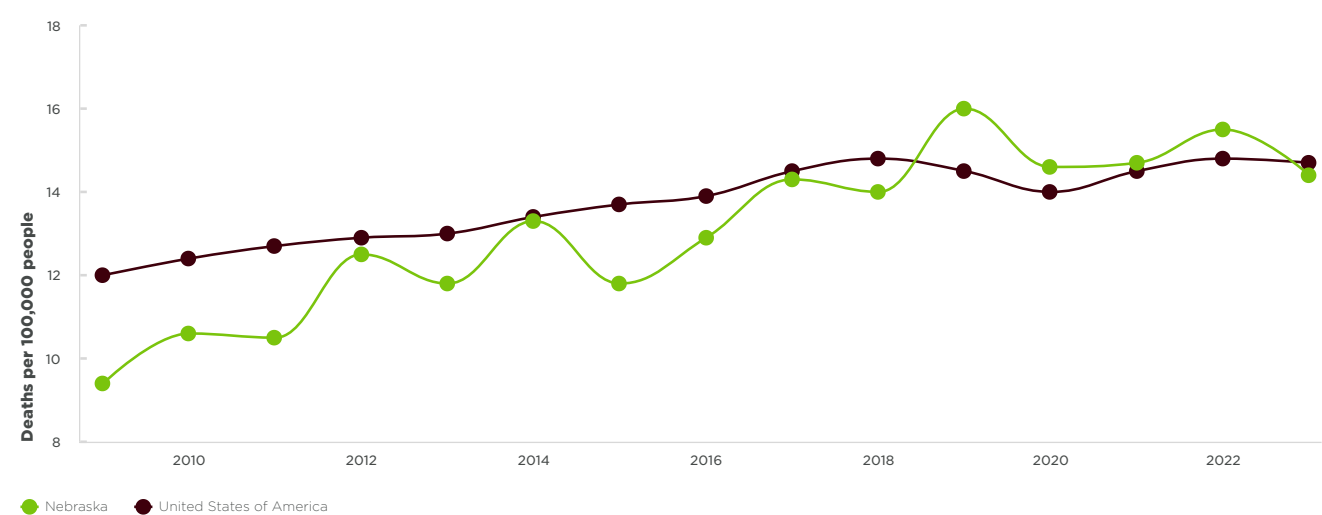
Drug Overdose Death Rate



Sources: CDC 2021

Suicide Death Rate

Suicide Death Rate



Sources: CDC WONDER Cause of Death

Suicide Death Rate by Sex

Suicide Death Rate Among Females

4.7

Deaths per 100,000 people
Nebraska

6.1

Deaths per 100,000 people
United States of America

Suicide Death Rate Among Males

23.9

Deaths per 100,000 people
Nebraska

23.6

Deaths per 100,000 people
United States of America

Sources: CDC WONDER Cause of Death 2023 Crude

Suicide Death Rate by Age

Suicide Death Rate by Age

▼ Data Sources	Nebraska ▼	United States of America ▼
2019-2023 Crude Age 1-14	1	1
2019-2023 Crude Age 15-24	15.7	14.1
2019-2023 Crude Age 25-34	21.3	18.6
2019-2023 Crude Age 35-44	22	18.3
2019-2023 Crude Age 45-54	22	18.8
2019-2023 Crude Age 55-64	19.1	18.1
2019-2023 Crude Age 65-74	13.2	15.4
2019-2023 Crude Age 75-84	14	19.3
2019-2023 Crude Age 85+	15.3	21.8

Sources: CDC WONDER Cause of Death 2019-2023 Crude

Deaths per 100,000 people within each age range

Suicide Death Rate by Race & Ethnicity

Suicide Death Rate by Race & Ethnicity

▼ Data Sources	Nebraska ▼	United States of America ▼
2019-2023 Crude Asian	7.9	7
2019-2023 Crude Black or African American	10.3	8.5
2019-2023 Crude Hispanic or Latino	7.9	7.7
2019-2023 Crude Native American	43.1	25.1
2019-2023 Crude White	16.6	18.8

Sources: CDC WONDER Cause of Death 2019-2023 Crude

Age-adjusted deaths per 100,000 people within each group

Note: All groups are not Hispanic or Latino unless otherwise listed.

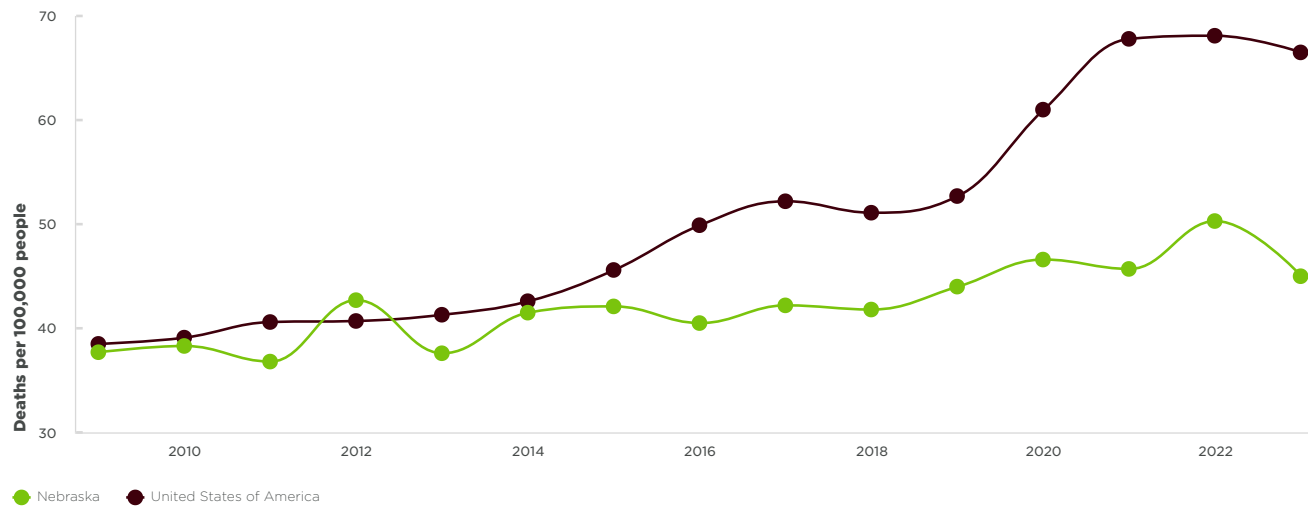
Support gives a safety net.

Loup Basin’s District is primarily an agricultural, ranching community with many dirt roads. Work-related injuries are not uncommon occurrences. Increasing education on safe work practices, safe driving, etc. can benefit the whole community.

Injuries can be prevented with more community support. From education on safe driving to substance use recovery programs, we can help reduce injuries and give our residents a better chance at long, healthy lives. Our mental and behavioral health can also affect how likely we are to be in an accident or injure ourselves. Mental disorders are associated with an increased risk of injury. Early diagnosis of a mental health disorder may help reduce this number, as well as ongoing mental health and community support.

Accidents Death Rate

Accidents Death Rate



Sources: CDC WONDER Cause of Death

Accidents Death Rate by Sex

Accidents Death Rate Among Females

30.6
Deaths per 100,000 people
Nebraska

43.8
Deaths per 100,000 people
United States of America

Accidents Death Rate Among Males

59.2
Deaths per 100,000 people
Nebraska

89.7
Deaths per 100,000 people
United States of America

Sources: CDC WONDER Cause of Death 2023 Crude

Accidents Death Rate by Age

Accidents Death Rate by Age

▲▼ Data Sources	Nebraska ▲▼	United States of America ▲▼
2019-2023 Crude Age 1-14	4.6	5
2019-2023 Crude Age 15-24	29.3	33
2019-2023 Crude Age 25-34	40.7	67.2
2019-2023 Crude Age 35-44	38	76.5
2019-2023 Crude Age 45-54	42.3	71.3
2019-2023 Crude Age 55-64	47.9	73.3
2019-2023 Crude Age 65-74	59.5	62.9
2019-2023 Crude Age 75-84	120	121.8
2019-2023 Crude Age 85+	410	411.1

Sources: CDC WONDER Cause of Death 2019-2023 Crude
Deaths per 100,000 within each age range

Accidents Death Rate by Race & Ethnicity

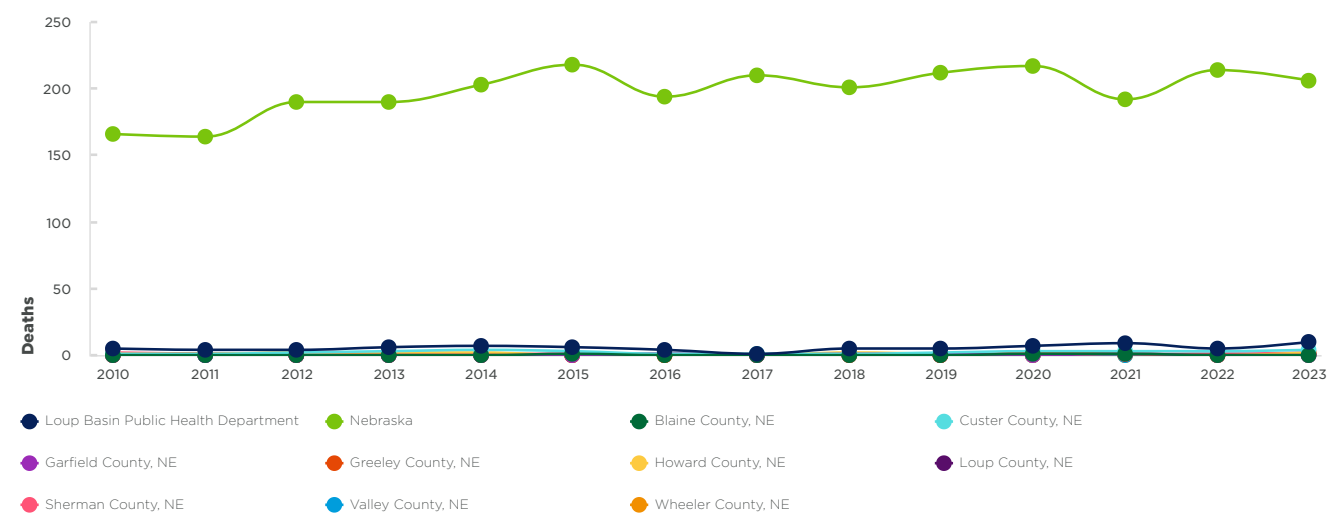
Accidents Death Rate by Race & Ethnicity

▲▼ Data Sources	Nebraska ▲▼	United States of America ▲▼
2019-2023 Crude Asian	12.5	18.7
2019-2023 Crude Black or African American	54.2	73.6
2019-2023 Crude Hispanic or Latino	29.2	40.6
2019-2023 Crude Native American	83.8	112.5
2019-2023 Crude White	50	73.2

Sources: CDC WONDER Cause of Death 2019-2023 Crude
Age-adjusted deaths per 100,000 people within each group
Note: All groups are not Hispanic or Latino unless otherwise listed.

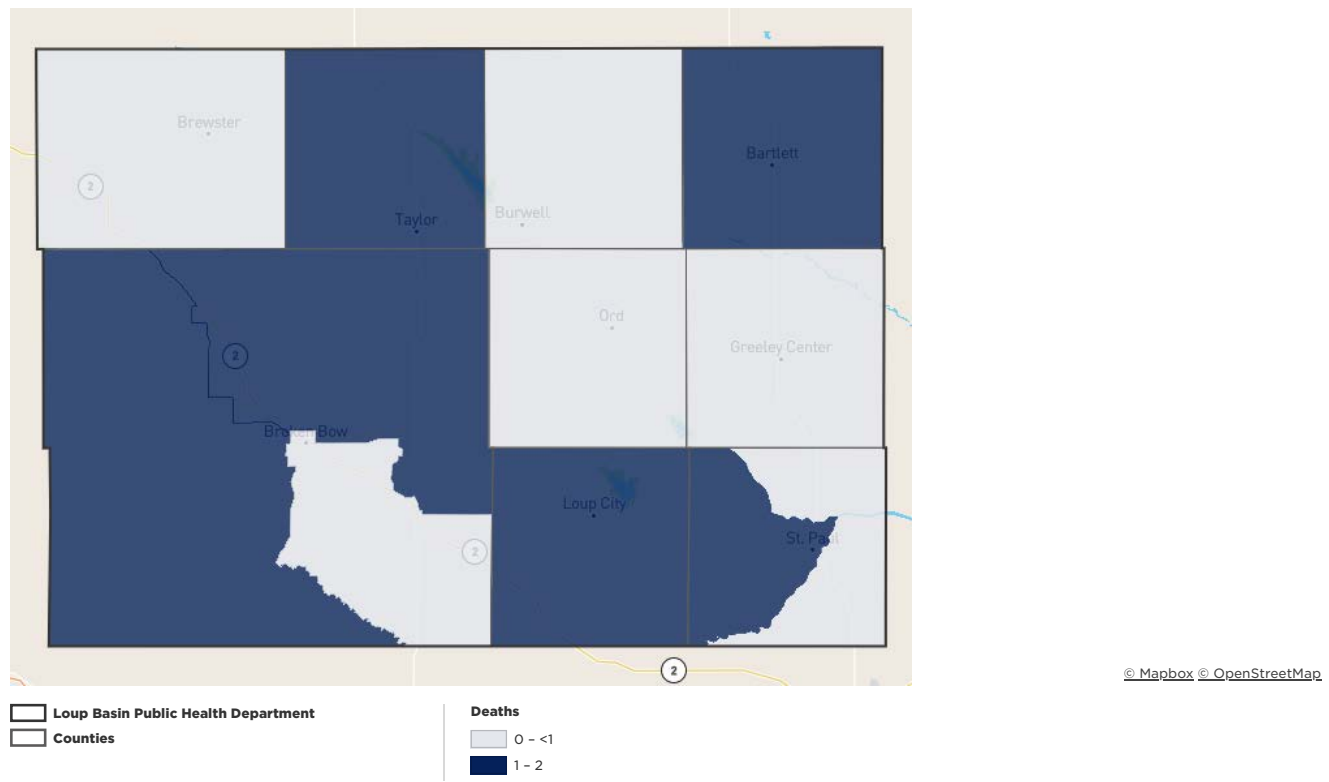
Motor Vehicle Crash Fatalities

Motor Vehicle Crash Fatalities



Sources: NHTSA FARS

Motor Vehicle Crash Fatalities



Sources: NHTSA FARS 2023

Fatal Crashes Involving Drunk, Distracted, or Drowsy Drivers

Fatal Motor Vehicle Accidents by Selected Factors

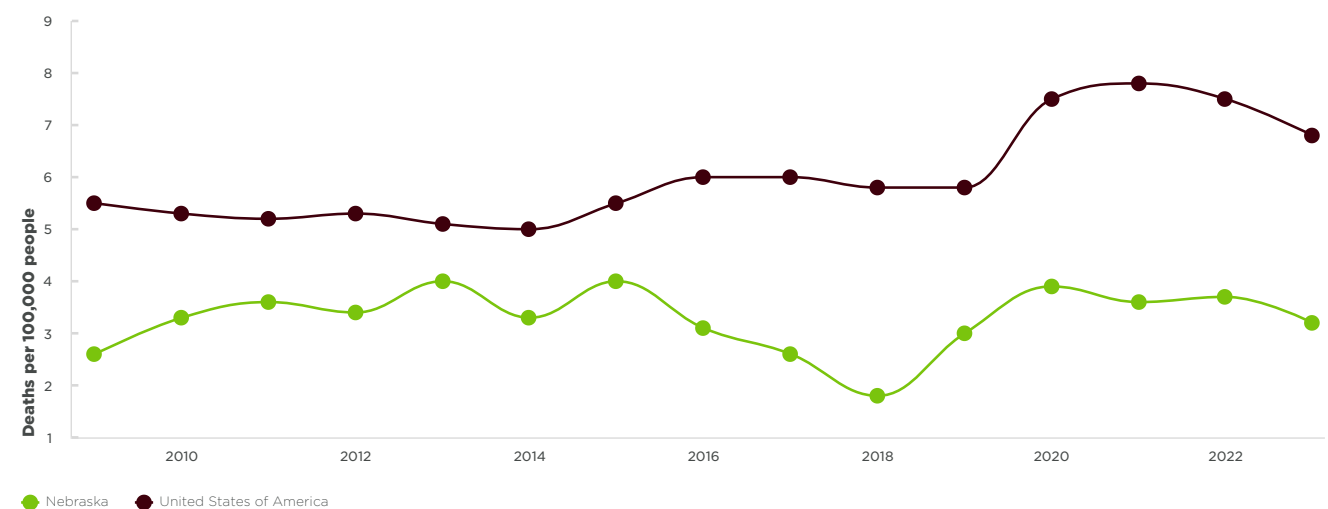


Sources: NHTSA FARS 2023

We must start early to stop violence.

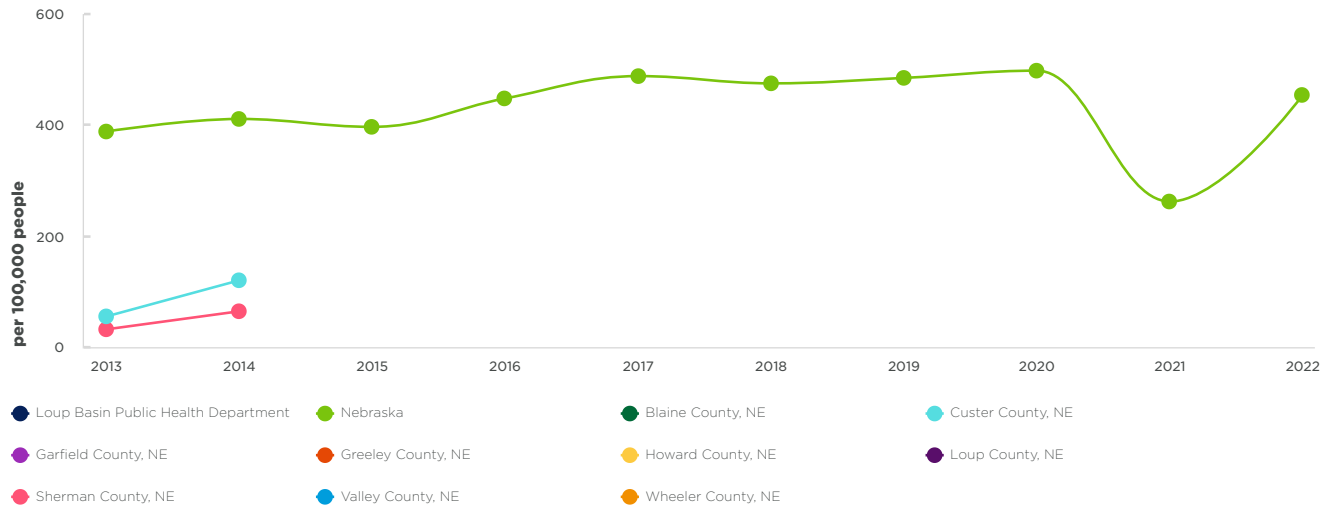
Social and economic factors affect violence rates most often. This is good news if we want to see positive change. To stop the cycle of violence, we must look at the social and economic factors that inform why a person might be at risk for violence in the first place. Our relationships, jobs, schools, where we live, youth resources, and what we have access to all play a role. Mental health support can also help people before they become victims of violent crime, such as in cases of intimate partner violence. Victims or witnesses of such violence will need layers of support. It's important to remember that no one treatment fits for all situations. Addressing the many individual, family, peer, and community risk factors that are related to increased violence will make our community a safer place to live.

Homicides



Sources: CDC WONDER Cause of Death

Violent Crime Rates



Sources: FBI UCR

Learn more:

1. Sims, Jacqueline, and Rebekah Levine Coley. "Examining Economic Risks in Adolescents' Families, Neighborhoods, and Schools: Implications for Mental and Behavioral Health in Early Adulthood." *Journal of Adolescent Health*, vol. 70, no. 5, May 2022, pp. 774-80. ScienceDirect, <https://doi.org/10.1016/j.jadohealth.2021.11.020>.
2. Alves-Bradford, Jean-Marie, et al. "Mental Health Equity in the Twenty-First Century: Setting the Stage." *The Psychiatric Clinics of North America*, vol. 43, no. 3, Sept. 2020, pp. 415-28. PubMed, <https://doi.org/10.1016/j.psc.2020.05.001>.
3. CDC. "About Mental Health." Centers for Disease Control and Prevention, 28 June 2021, <https://www.cdc.gov/mentalhealth/learn/index.htm>.
4. McGuire, Thomas G., and Jeanne Miranda. "Racial and Ethnic Disparities in Mental Health Care: Evidence and Policy Implications." *Health Affairs (Project Hope)*, vol. 27, no. 2, Mar. 2008, pp. 393-403. PubMed Central, <https://doi.org/10.1377/hlthaff.27.2.393>.
5. CDC. "Prevention Strategies | Suicide." Centers for Disease Control and Prevention, 11 Oct. 2022, <https://www.cdc.gov/suicide/prevention/index.html>.
6. Shadloo, Behrang, et al. "Psychiatric Disorders Are Associated with an Increased Risk of Injuries: Data from the Iranian Mental Health Survey (IranMHS)." *Iranian Journal of Public Health*, vol. 45, no. 5, May 2016, pp. 623-35.
7. Cameron, Cate M., et al. "Mental Health: A Cause or Consequence of Injury? A Population-Based Matched Cohort Study." *BMC Public Health*, vol. 6, May 2006, p. 114. PubMed Central, <https://doi.org/10.1186/1471-2458-6-114>.
8. Stuart, Heather. "Violence and Mental Illness: An Overview." *World Psychiatry*, vol. 2, no. 2, June 2003, pp. 121-24.
9. Warshaw, Carole, and Phyllis Brashler. "Mental Health Treatment for Survivors of Intimate Partner Violence." *Intimate Partner Violence: A Health-Based Perspective*, edited by C Mitchell and D Anglin, Oxford University Press, 2009, pp. 335-87.
10. CDC. "Risk and Protective Factors | Violence Prevention | Injury Center." Centers for Disease Control and Prevention, 2 Mar. 2020, <https://www.cdc.gov/violenceprevention/youthviolence/riskprotectivefactors.html>.

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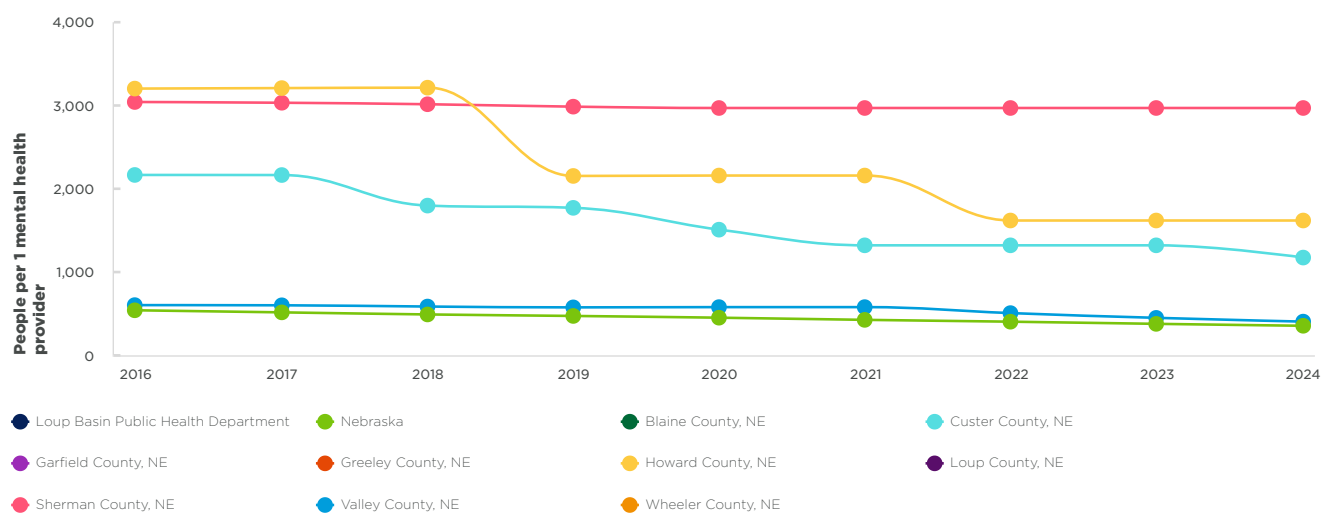
How We Connect Matters

One in five adults in the United States struggles with their mental health at some point in life. And every one of us *has* mental health, just as we all have physical health. It's time we talk openly about mental and behavioral health. We likely wouldn't be afraid to tell someone we have a broken arm, but when it comes to mental health issues, outdated ideas about why it happens can keep people from seeking help.

Connection makes a difference. Connection to ourselves helps us recognize when we need to ask for help. Strong relationships with other people can reduce mental health struggles. Connection within our community means more people know where to turn when they need help. These many forms of connection can improve our quality of life and even prevent death.

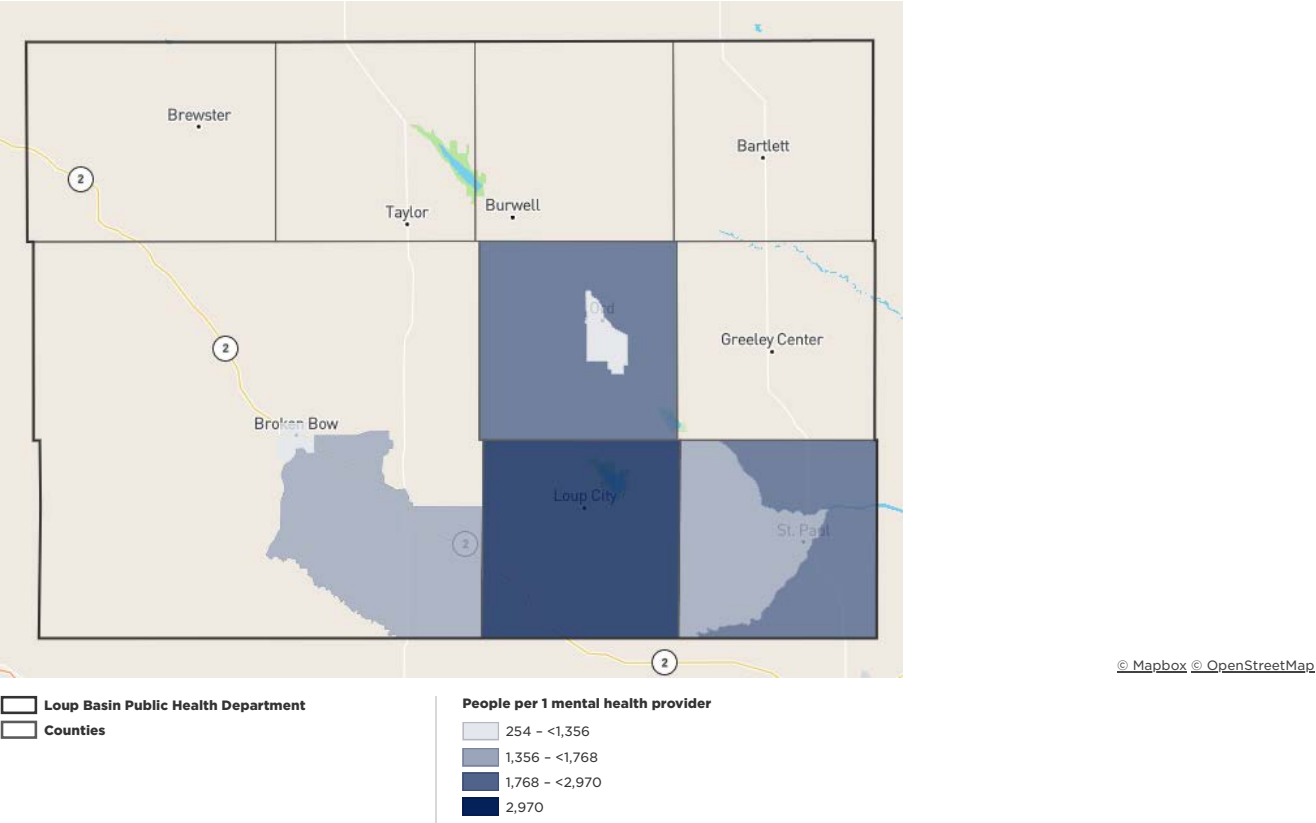
Mental Healthcare Environment

Mental Health Provider Ratio



Sources: NPPES NPI

Mental Health Provider Ratio



Sources: NPPES NPI 2024
Areas with no data have 0 mental health providers.

Drug Overdose Deaths

Drug Overdose Death Rate
11.4
Age-adjusted deaths per 100,000 people
Nebraska

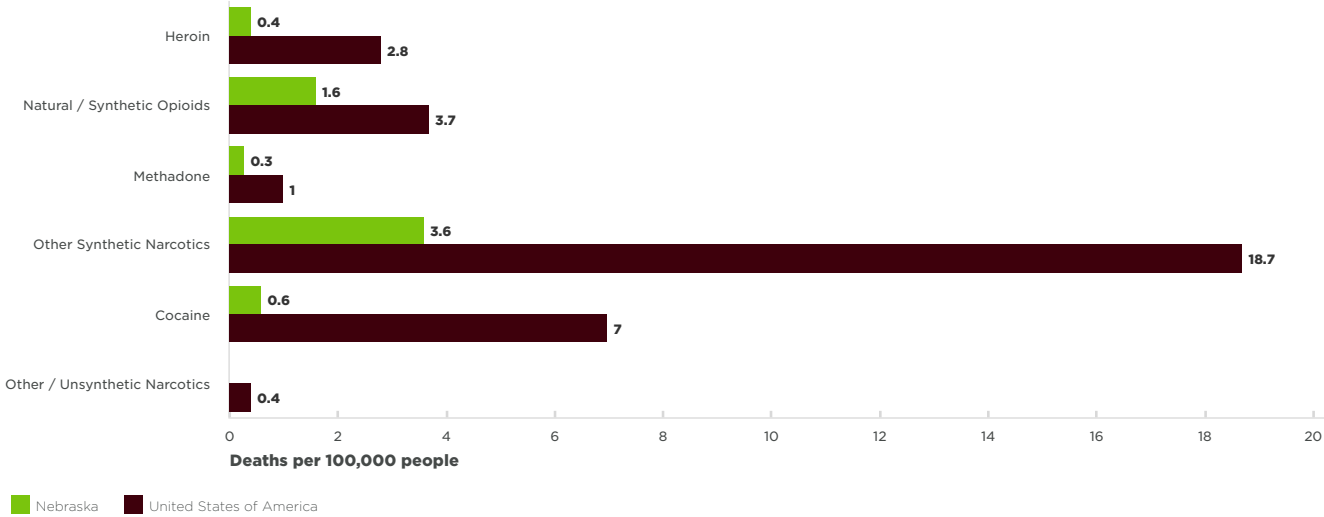
32.4
Age-adjusted deaths per 100,000 people
United States of America

Sources: CDC 2021

Geography	2021 Drug Overdose Death Rate
Blaine County, NE	9.1
Custer County, NE	9.3
Garfield County, NE	11.8
Greeley County, NE	9.8
Howard County, NE	9.9
Loup County, NE	9.3
Sherman County, NE	8.6
Valley County, NE	10.3
Wheeler County, NE	9
Nebraska	11.4

Sources: CDC 2021

Drug Overdose Deaths by Involved Substance



Sources: CDC WONDER Cause of Death 2019-2023 Crude

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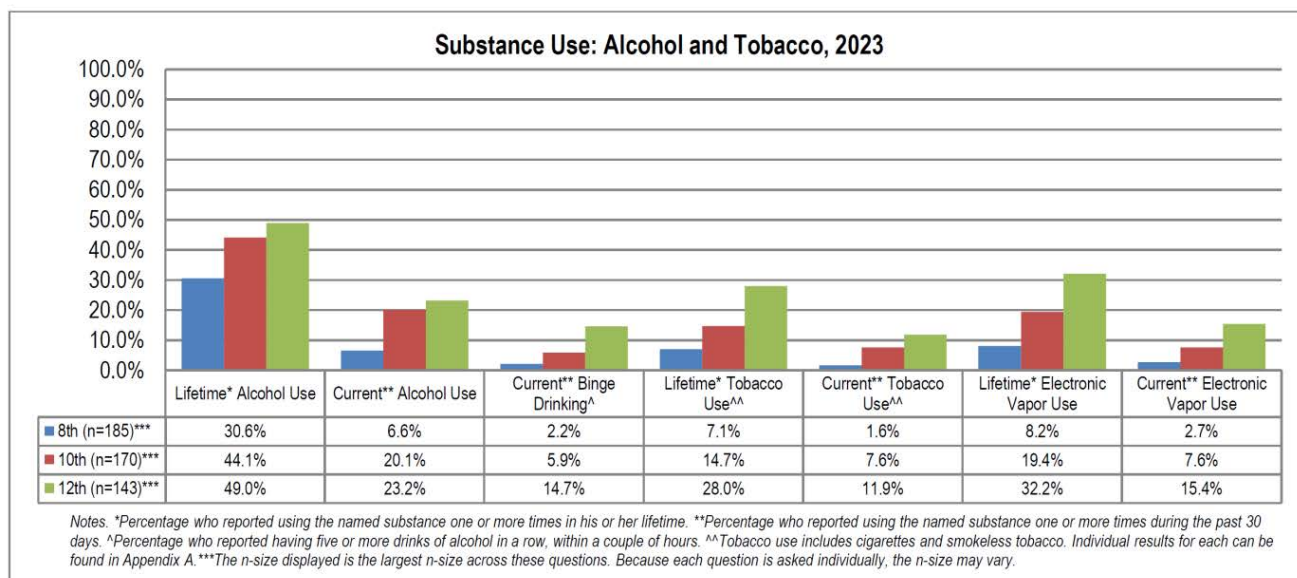
Loup Basin Public Health Department Community Health Assessment

Youth Behavioral Health

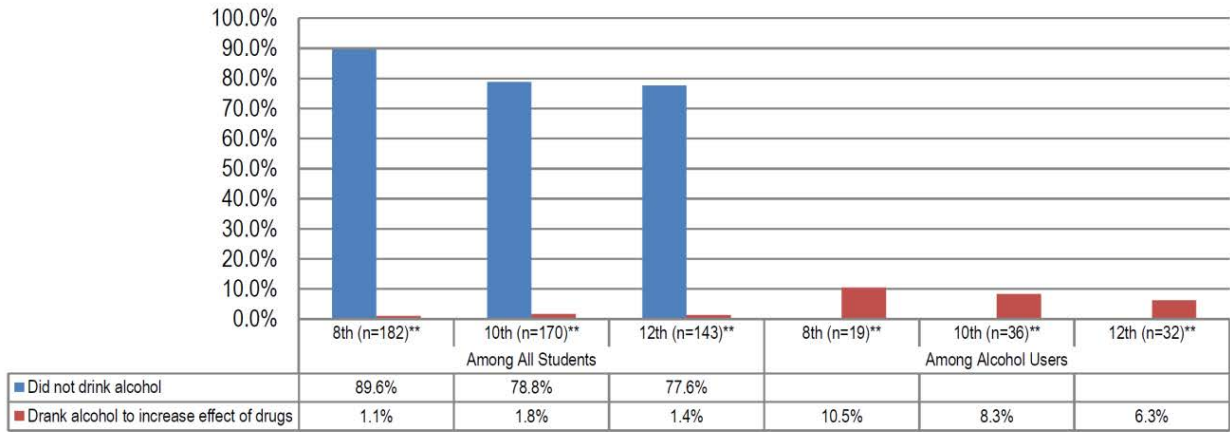
This data summarizes findings from the 2023 Nebraska Risk and Protective Factor Student Survey (NRPFSS). The NRPFSS targets Nebraska students in grades 8, 10, and 12 with a goal of providing schools and communities with local-level data. As a result, the NRPFSS is implemented as a census survey, meaning that every public and non-public school with an eligible grade can choose to participate.

Therefore, data presented in this report are not to be considered a representative statewide sample. This data below is related to children within Loup Basin Public Health Department's nine-county jurisdiction.

Substance Use:

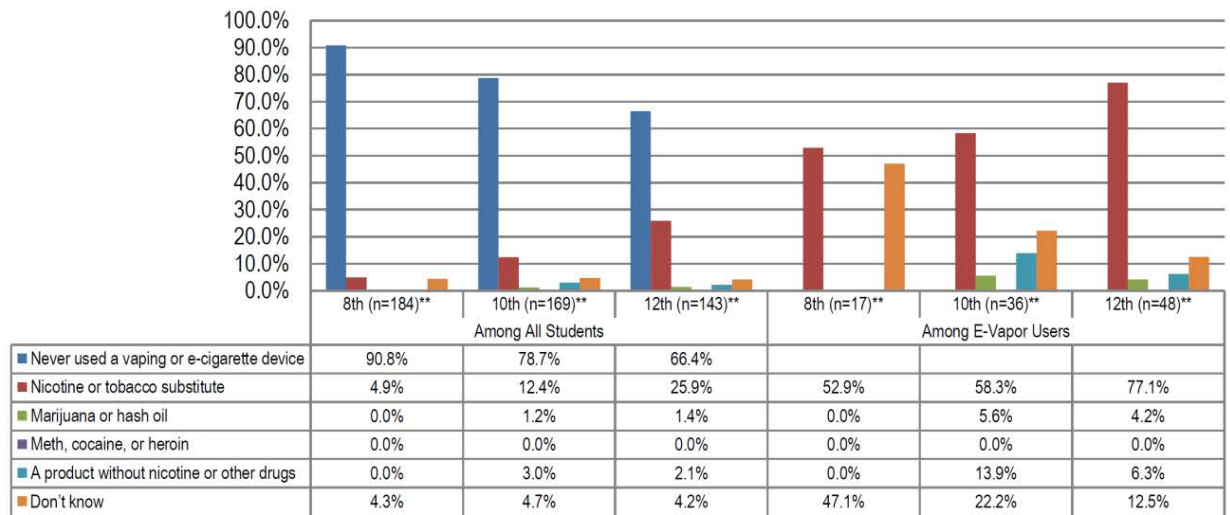


Percentage Reporting Drinking Alcohol to Increase Effect of Some Other Drug, AMONG Students who Reported Drinking in the Past 30 Days*, 2023



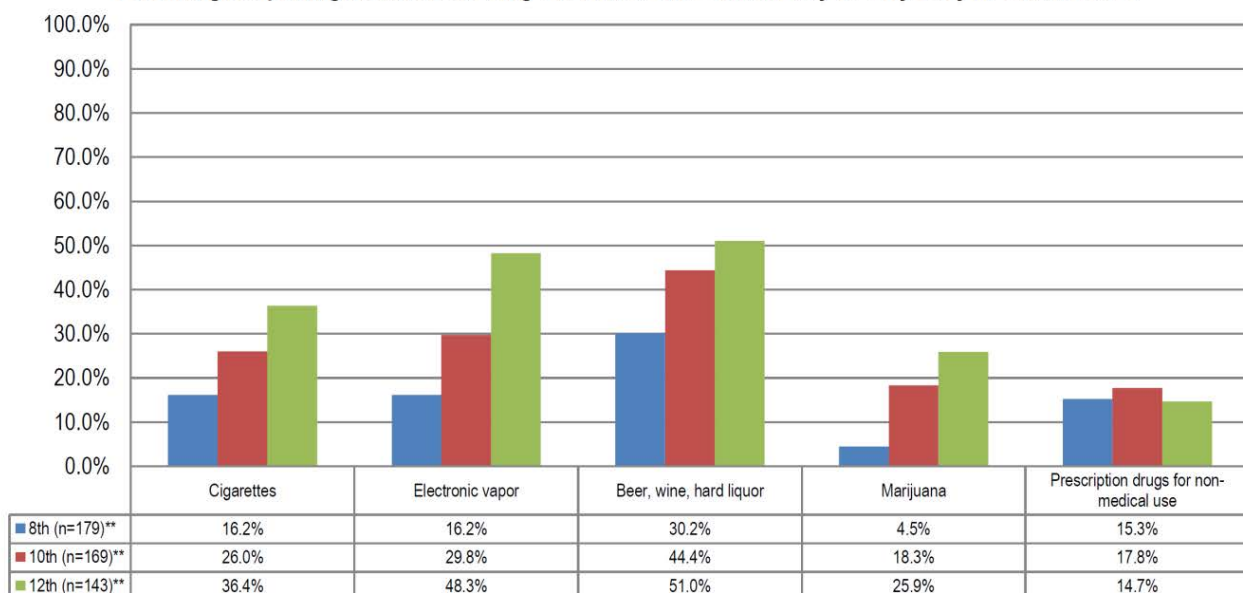
Notes: *Among past 30 day alcohol users, the percentage who reported drinking alcohol one or more times to increase the effect of some of other drug or drugs during the past 30 days. **The n-size displayed is the largest n-size across these questions. Because each question is asked individually, the n-size may vary.

Type of Mist Inhaled in Electronic Vaporizer, AMONG Students who Reported Using an E-cigarette or Vaping Device*, 2023



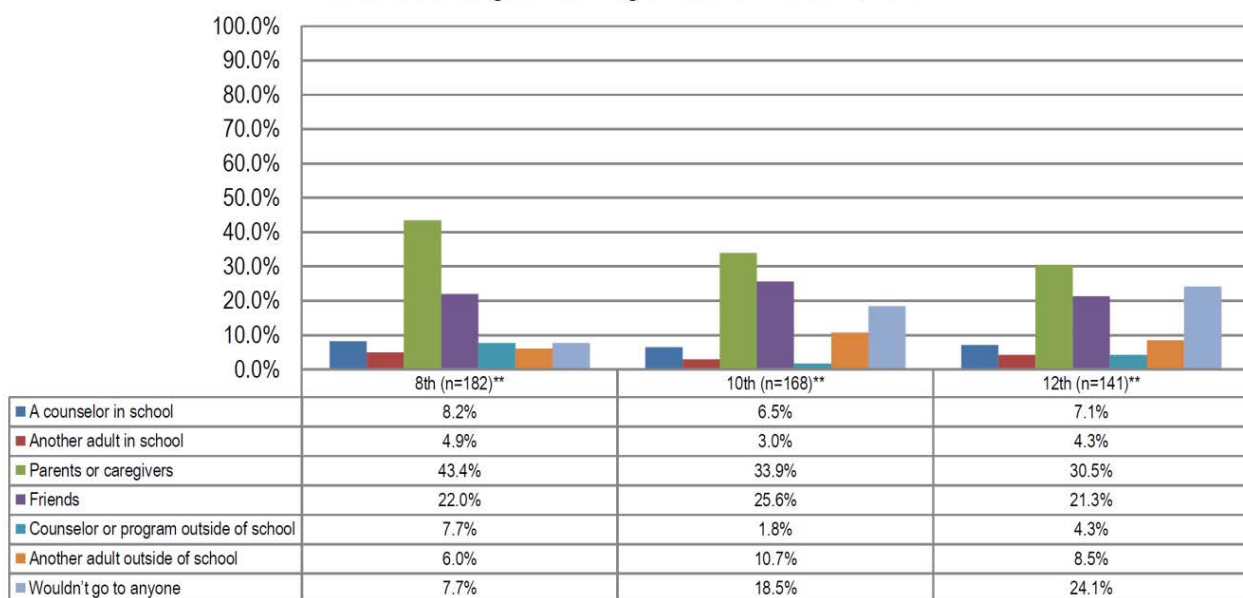
Notes: *Among past 30 day alcohol users, the percentage who reported drinking alcohol one or more times to increase the effect of some of other drug or drugs during the past 30 days. **The n-size displayed is the same for all people given that type of mist inhaled is asked as one question.

Percentage Reporting that the Following Substances are Sort of Easy or Very Easy to Obtain*, 2023



Note. *Percentage who reported it is sort of or very easy to obtain each substances based on the following scale: Very hard, Sort of hard, Sort of easy, Very easy. Based on the question "If you wanted to, how easy would it be for you to get: <insert substance use behavior>." **The n-size displayed is the largest n-size across these questions. Because each question is asked individually, the n-size may vary.

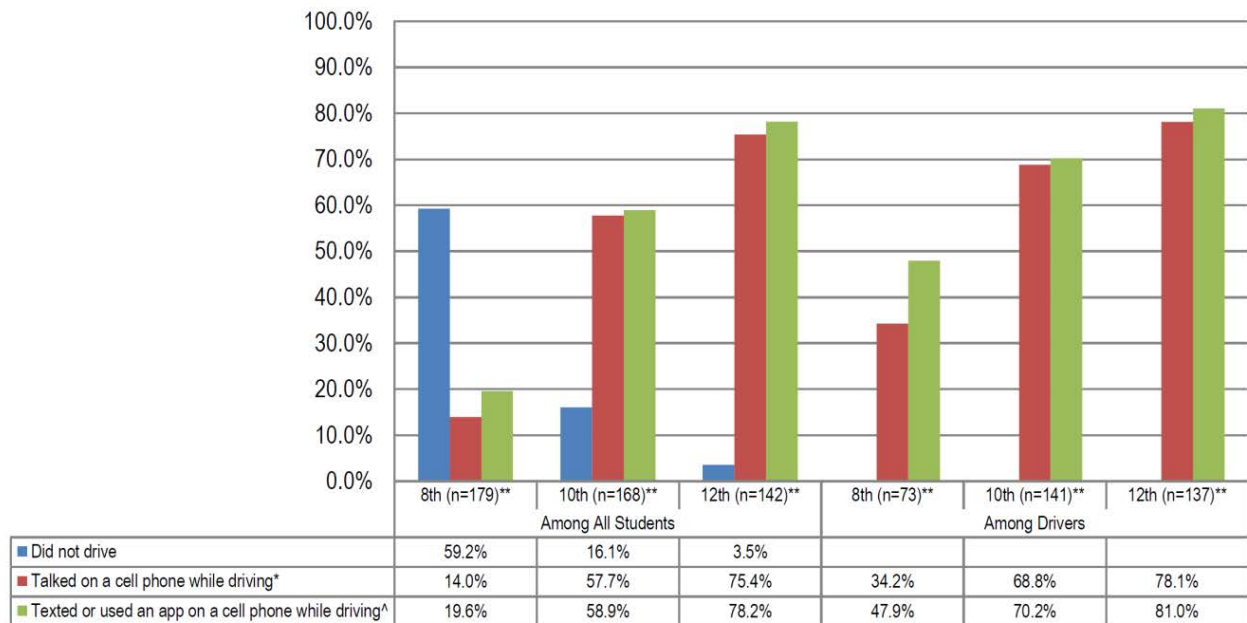
First Person to go to for Drug or Alcohol Problem*, 2023



Notes. *Based on the question "If you had a drug or alcohol problem and needed help, who is the first person you would go to?" **The n-size displayed is the same given that asking who for help is asked as one question.

Transportation Safety:

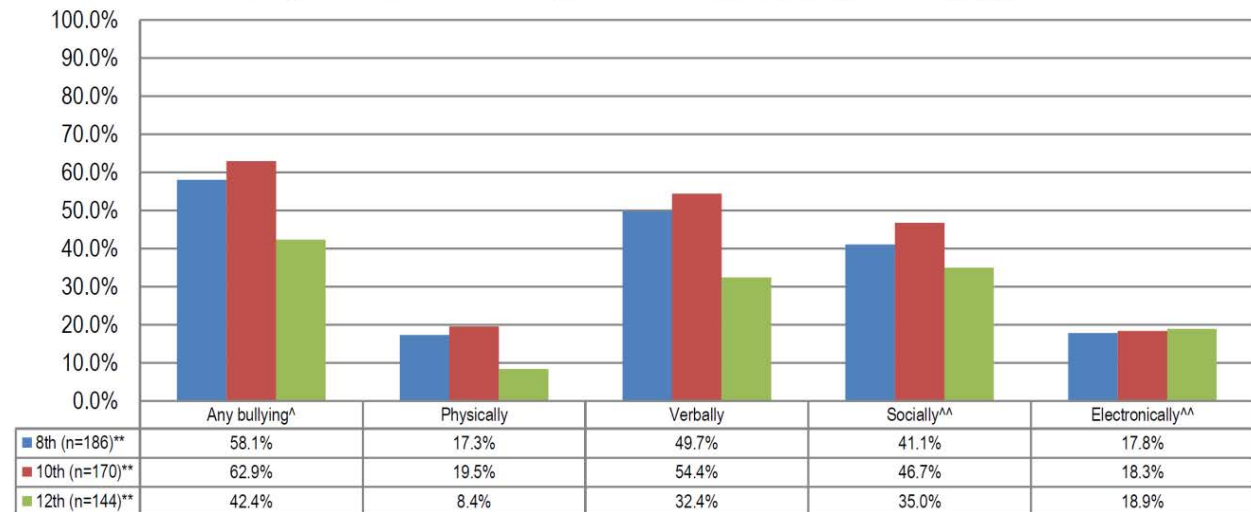
Past 30-Day Distracted Driving, AMONG Students who Reported Driving during the Past 30 Days, 2023



Notes. *Percentage who reported talking on a cell phone while driving a car or other vehicle in the past 30 days. ^Percentage who reported one or more occurrences of texting or using an app on a cell phone while driving a car or other vehicle. **The n-size displayed is the largest n-size across these questions. Because each question is asked individually, the n-size may vary.

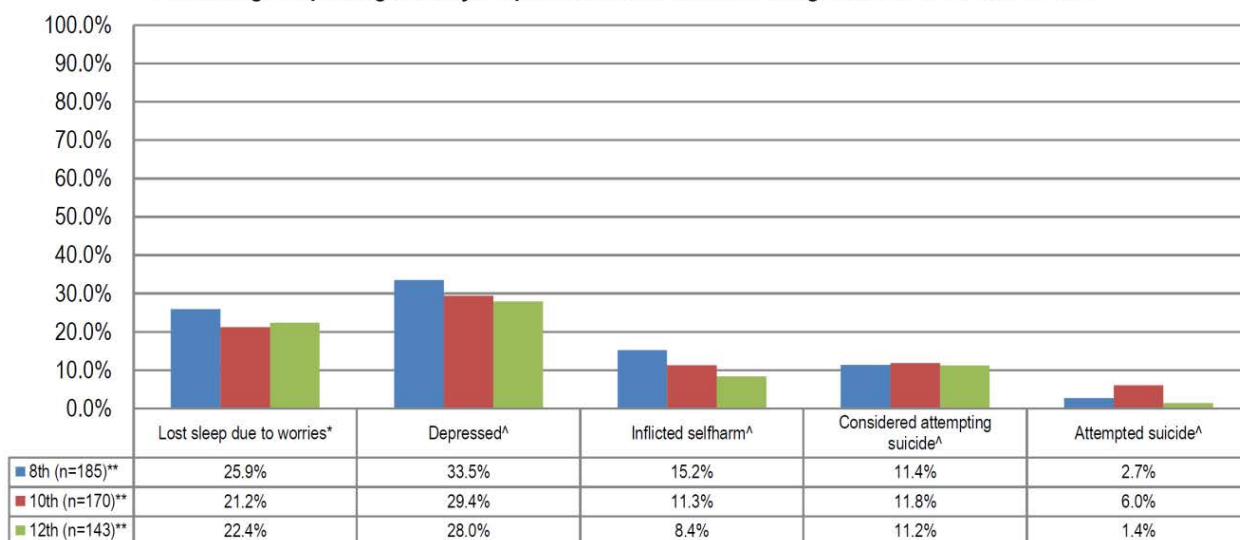
Bullying & Mental Health:

Percentage that were Bullied during the Past 12 Months, by Type of Bullying*, 2023



Note. *Percentage who reported one or more occurrences of each type of bullying. ^Percentage of students who reported one or more occurrences of one or more of these types of bullying. **The n-size displayed is the largest n-size across these questions. Because each question is asked individually, the n-size may vary. ^^Examples of being bullied socially can be being excluded from a group or having gossip or rumors spread about the student; examples of being bullied electronically can be being threatened or embarrassed through e-mail, text messages, or social media.

Percentage Reporting Anxiety, Depression, and Suicide during the Past 12 Months, 2023



Notes. *Percentage who reported during the past 12 months being so worried about something they could not sleep well at night most of the time or always based on the following scale: Never, Rarely, Sometimes, Most of the time, Always. ^Percentage who reported "Yes" to the question "During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?", the question "During the past 12 months, did you hurt or injure yourself on purpose without wanting to die?", the question "During the past 12 months, did you ever seriously consider attempting suicide?", and the question "During the past 12 months, did you actually attempt suicide?". **The n-size displayed is the largest n-size across these questions. Because each source is asked individually, the n-size may vary.

References:

Bureau of Sociological Research. (2023). *Nebraska Risk and Protective Factor Student Survey: Results for 2023, Profile Report: Loup Basin Public Health Department*. University of Nebraska-Lincoln. Sponsored by Nebraska Department of Health and Human Services, Division of Behavioral Health. <https://bosr.unl.edu/sharp/>

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Substance use recovery requires a community response.

It's been shown that about half of individuals who have mental illness at some point in life will also struggle with a substance use disorder. By increasing the layers of support available for everyone in the community, including peer groups, professional help, and educating family and friends, people who struggle with substance use can find a path toward recovery.

Drug Overdose Death Rate Over Time

Drug Overdose Death Rate



Sources: CDC

Map: Drug Overdose Death Rate



Sources: CDC 2021

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Let's give the right care at the right time.

Being mentally well allows us to complete daily tasks, succeed in school or at work, make other healthy choices, and form strong relationships. It's important to remember that anyone can experience poor mental health throughout life, even without being diagnosed with a mental illness. Black and Hispanic populations have the same or lower rates of many mental illnesses compared to white populations. However, if Black and Hispanic people do become mentally ill, they tend to have more serious illnesses with symptoms that last longer.

Less access to mental health services, lower quality of care providers, and high cost of treatment are all factors. When our mental health suffers for short or long periods of time, it affects the rest of our life. Treating mental health equal to physical health starts with prevention efforts. This could mean more education or addressing foundational issues that can lead to poor mental health, including job loss or struggling to pay for basic needs. Making sure everyone has equal access to the right care at the right time can stop poor mental health from becoming worse.

Overview



Poor Mental Health

13.4%

Adults

Loup Basin Public Health Department

14.1%

Adults

Nebraska

Diagnosed Depression

17.1%

Adults

Loup Basin Public Health Department

17.7%

Adults

Nebraska

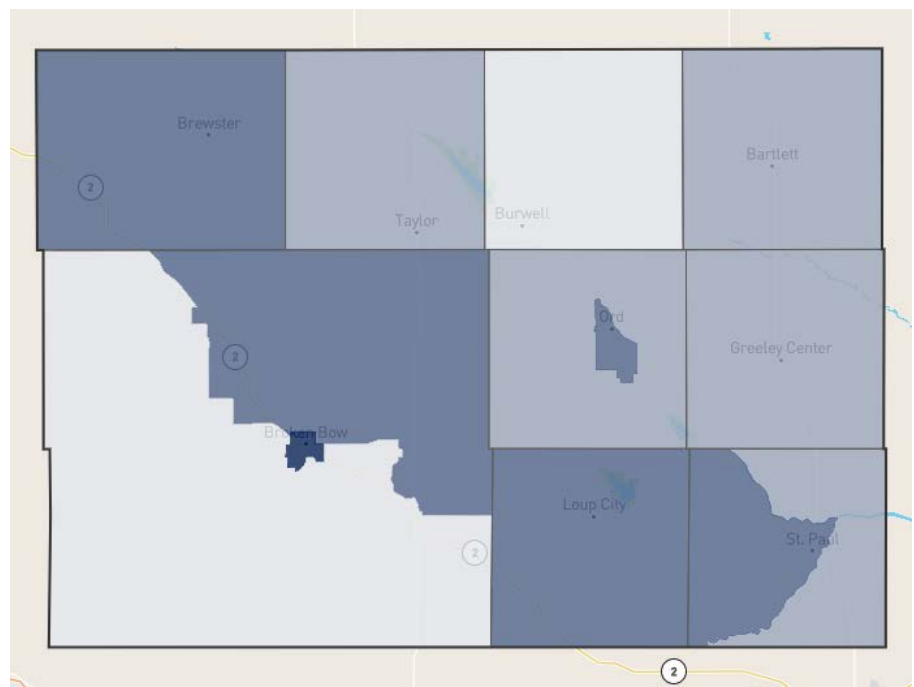
Sources: CDC BRFSS PLACES 2022

Geography	2022	2022
	Poor Mental Health Among Adults	Diagnosed Depression Among Adults
Blaine County, NE	14.4%	17.9%
Custer County, NE	13.8%	17.5%
Garfield County, NE	12%	16.1%
Greeley County, NE	13.5%	16.8%
Howard County, NE	13.2%	16.7%
Loup County, NE	12.7%	16.4%
Sherman County, NE	13.9%	17.2%
Valley County, NE	13%	16.4%
Wheeler County, NE	12.7%	16.4%
Loup Basin Public Health Department	13.4%	17.1%
Nebraska	14.1%	17.7%

Sources: CDC BRFSS PLACES 2022

Map: Poor Mental Health

Poor Mental Health



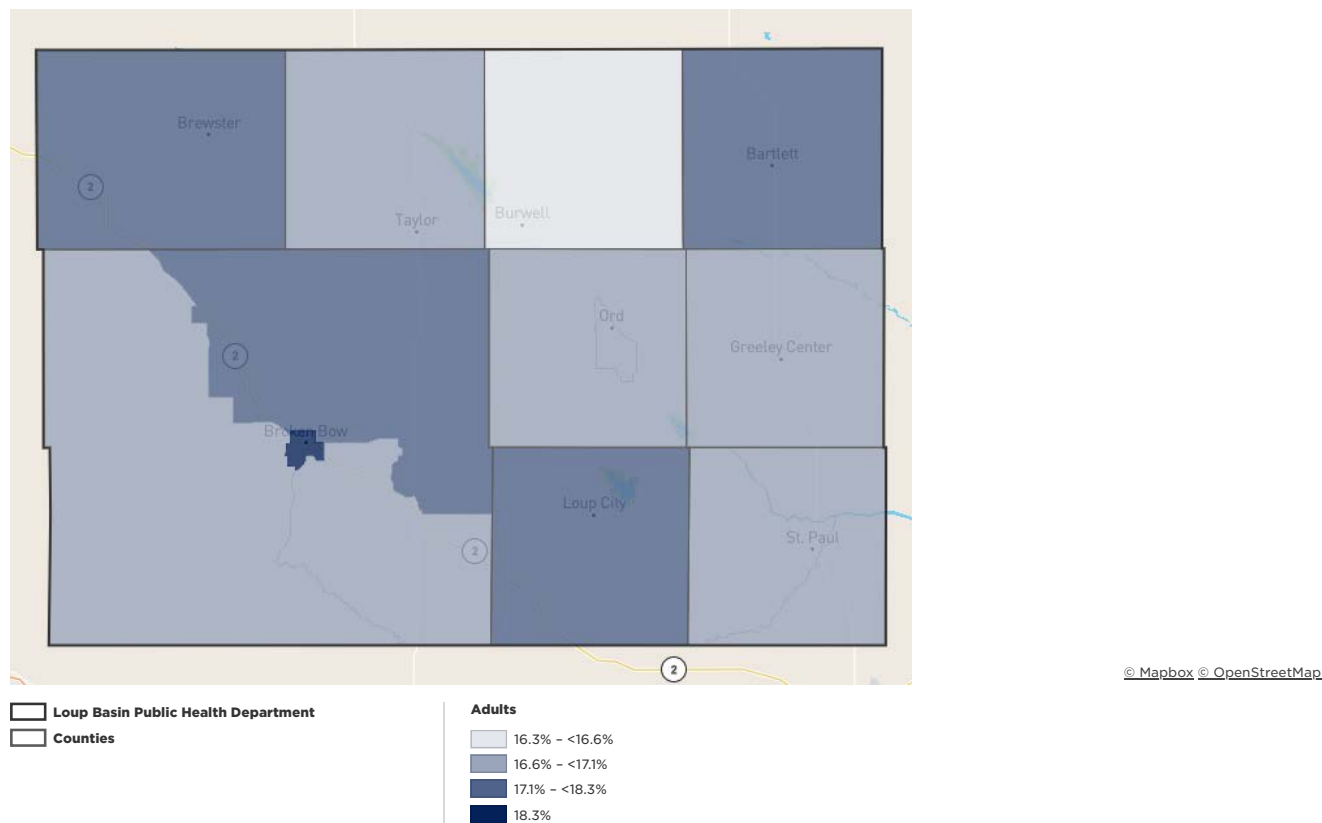
© Mapbox © OpenStreetMap



Sources: CDC BRFSS PLACES 2022

Map: Diagnosed Depression

Diagnosed Depression



Sources: CDC BRFSS PLACES 2022

We all need a good night's rest.

Sleep is needed to recharge the brain and body, and without enough sleep a person is more likely to struggle with mental health challenges. Getting enough sleep helps us control our emotions and behaviors, and poor sleep makes it even more challenging to handle the stress life brings. Sleep health is an often overlooked way we can improve health outcomes and our quality of life, but making a difference requires addressing the causes of people getting too little sleep. Shift work, drinking caffeine or alcohol, mental health conditions, too much noise or light, and the inability to control the temperature where you sleep all have an impact. At least one of these factors may be a reality for many people in our community.



Less Than 7 Hours Sleep

30.5%

Adults

Loup Basin Public Health Department

31.4%

Adults

Nebraska

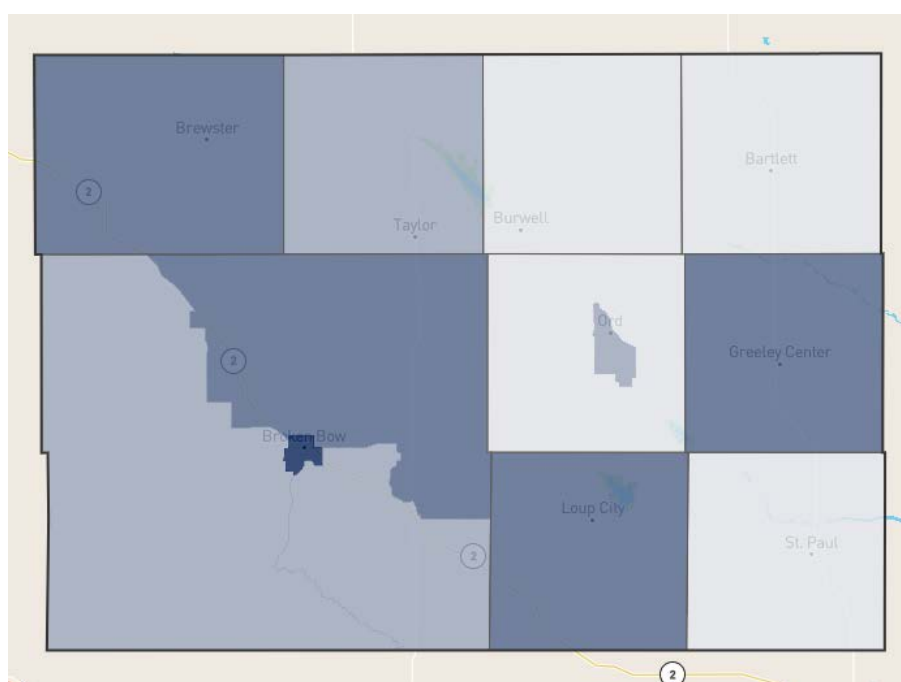
Sources: CDC BRFSS PLACES 2022

Geography

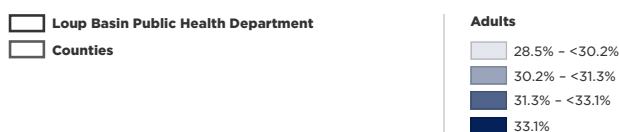
Blaine County, NE	32.6%
Custer County, NE	31.7%
Garfield County, NE	27.9%
Greeley County, NE	31.5%
Howard County, NE	28.8%
Loup County, NE	29.7%
Sherman County, NE	31.3%
Valley County, NE	29.6%
Wheeler County, NE	29.8%
Loup Basin Public Health Department	30.5%
Nebraska	31.4%

Sources: CDC BRFSS PLACES 2022

Insufficient Sleep



© Mapbox © OpenStreetMap



Sources: CDC BRFSS PLACES 2022

Loneliness is a serious health concern.

Social isolation comes with serious risks, including higher rates of depression and early death. One study says that loneliness and social isolation are twice as harmful to our physical and mental health than obesity. This problem affects everyone, no matter their age. Youth who aren't connected to our community have an increased risk of violence, substance use, and may struggle in school or work. Our aging parents and grandparents who live alone are at an even higher risk. Isolation may also be caused by other barriers, such as speaking a different language than your neighbors. Providing more chances for people of all ages to connect through community programs or other resources can help keep everyone in our community feeling cared for and connected.

Overview



Seniors Living Alone

27.5%

People age 65+

Loup Basin Public Health Department

30.2%

People age 65+

Nebraska

Language Isolation: Limited English Speaking Households

0.9%

Households

Loup Basin Public Health Department

2.5%

Households

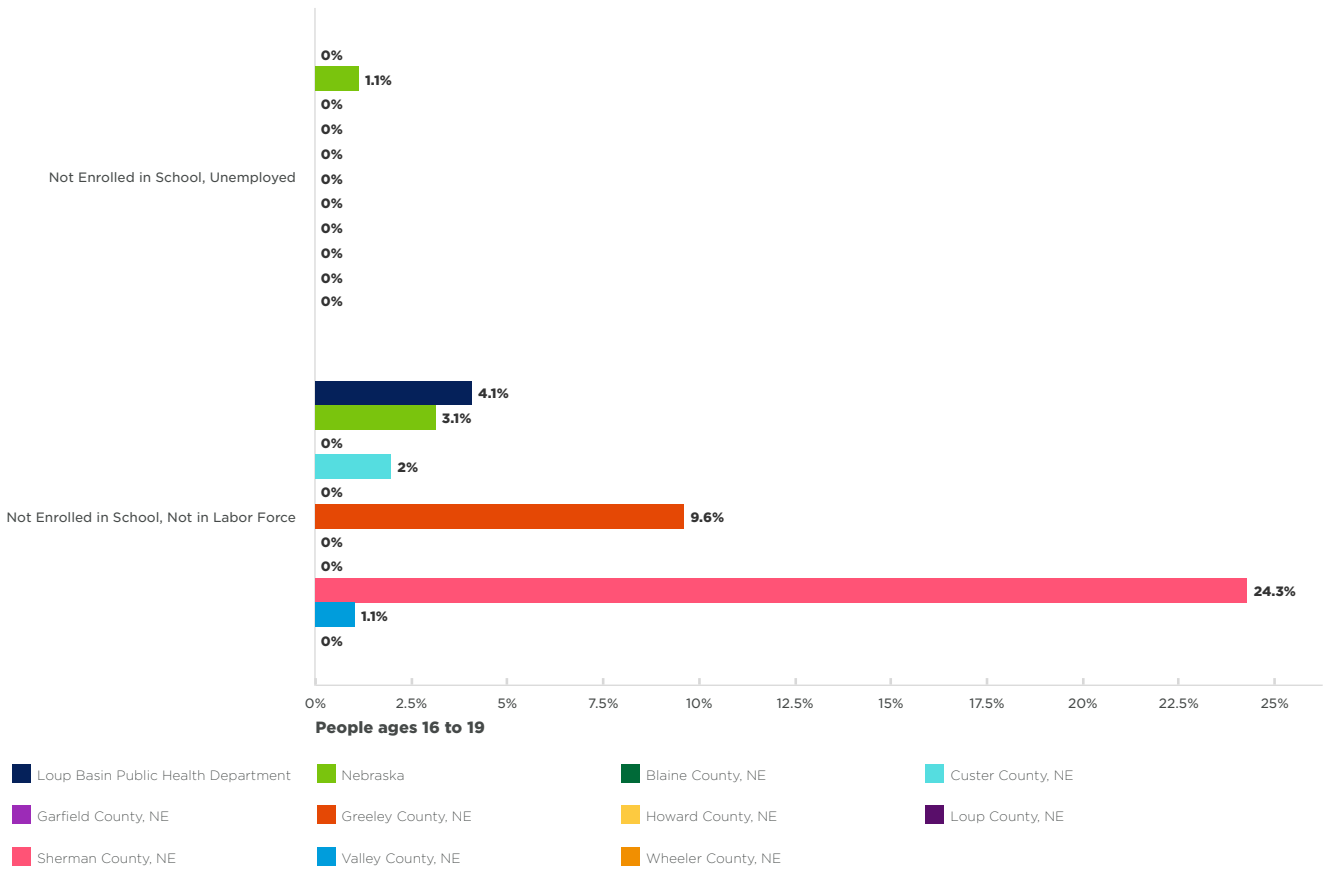
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Seniors Living Alone	2019-2023 Language Isolation
Blaine County, NE	32.8%	0%
Custer County, NE	29.4%	2%
Garfield County, NE	22.4%	0%
Greeley County, NE	31.5%	0.2%
Howard County, NE	26.8%	0.5%
Loup County, NE	22.4%	0%
Sherman County, NE	29.3%	0%
Valley County, NE	23%	0.2%
Wheeler County, NE	26.5%	1.1%
Loup Basin Public Health Department	27.5%	0.9%
Nebraska	30.2%	2.5%

Sources: US Census Bureau ACS 5-year 2019-2023

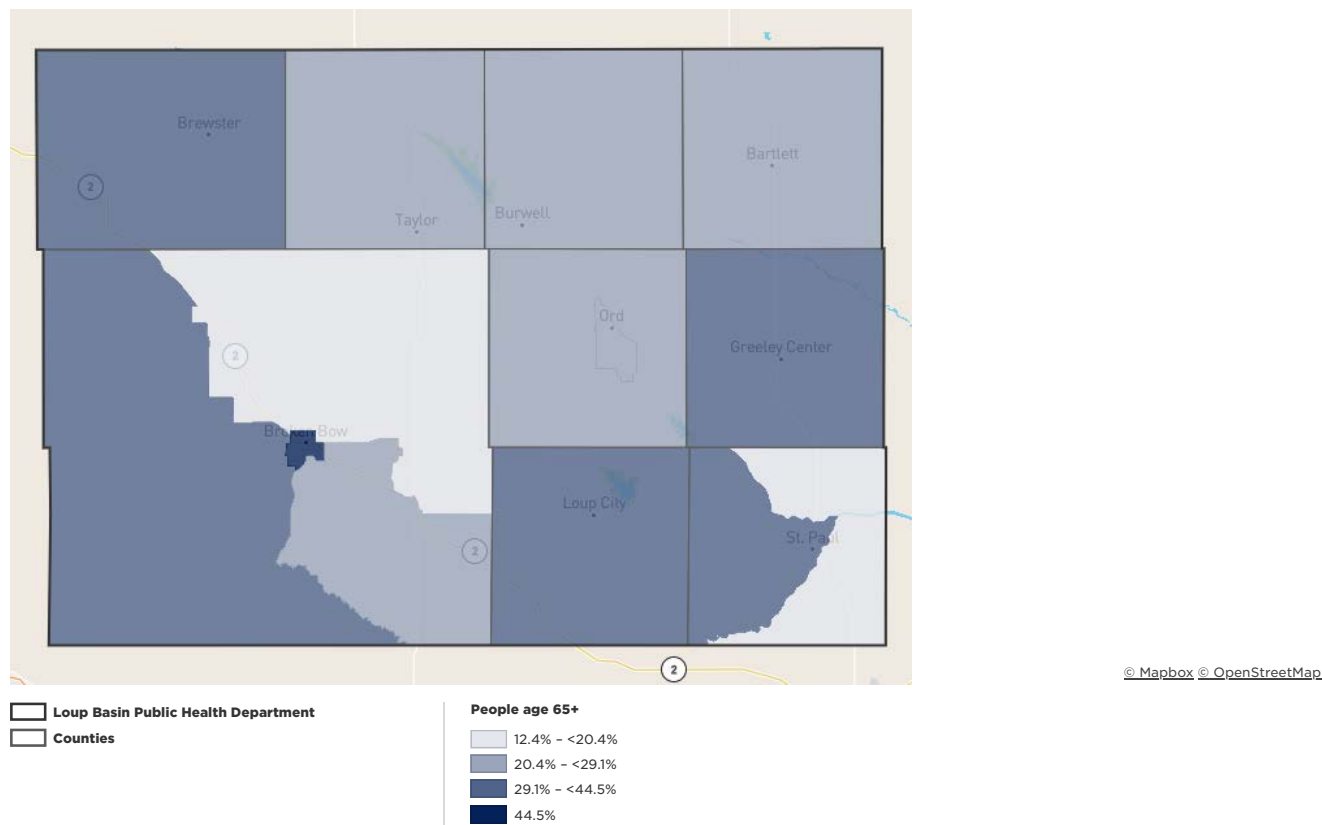
Disconnected Youth (Age 16-19)



Sources: US Census Bureau ACS 5-year 2019-2023

Map: Seniors Living Alone

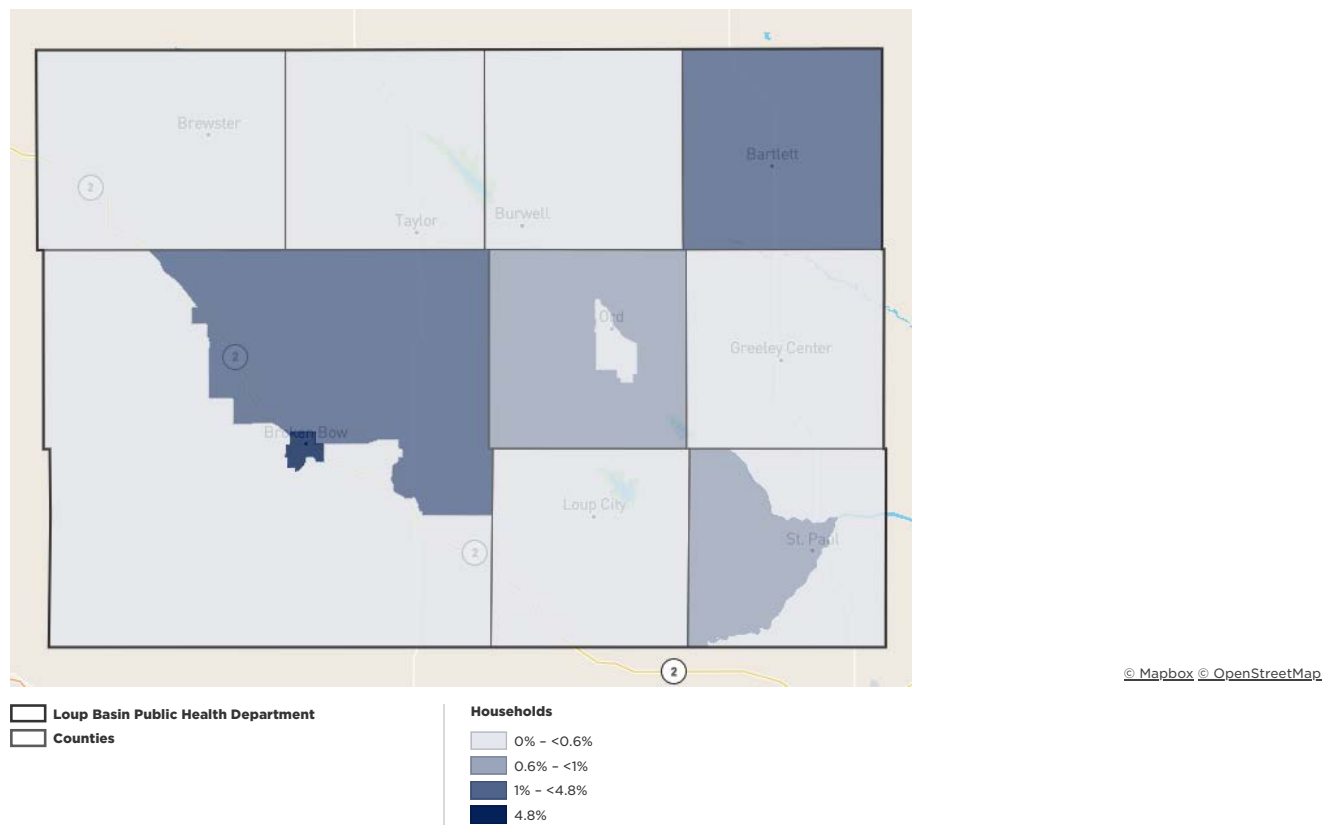
Seniors Living Alone



Sources: US Census Bureau ACS 5-year 2019-2023

Map: Language Isolation

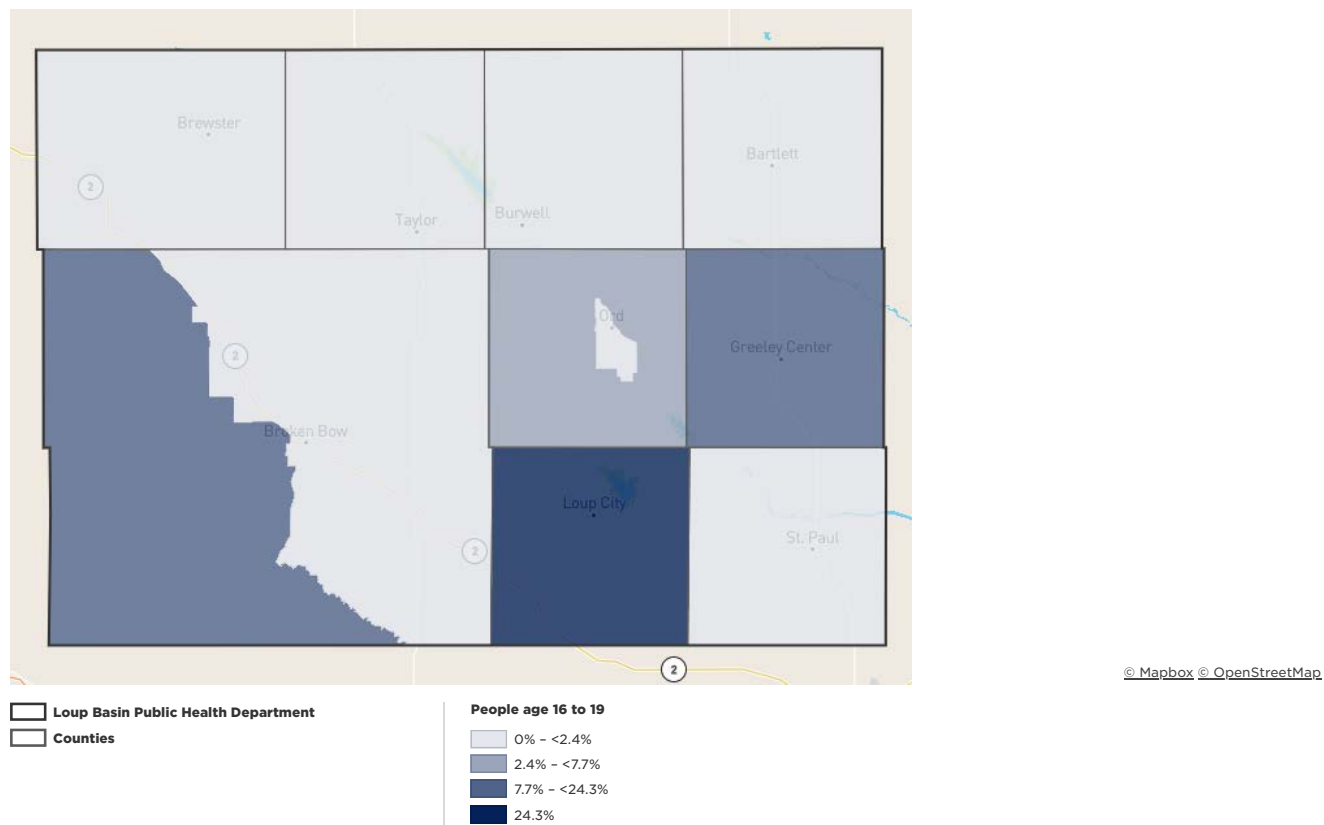
Language Isolation



Sources: US Census Bureau ACS 5-year 2019-2023

Map: Disconnected Youth

Disconnected Youth: Not in School or Labor Force



Sources: US Census Bureau ACS 5-year 2019-2023

Let's protect our youth from bullying.

Bullying is the most widespread form of youth violence and needs our attention. People who bully, victims, and bystanders are all negatively impacted by this trauma. It can lead to low self-esteem, self-harm, depression, struggles in school, and long-term effects on a person's life. The risk factors are as vast as the types of bullying, including appearance, race, disabilities, gender, mental health, and social challenges. For those who already struggle with mental health, behavioral health, or social isolation, bullying only makes it worse. Our community's response needs to include increased prevention of bullying as well as better support and intervention for youth who have experienced or witnessed bullying.

Students Reporting Being Bullied

Geography	2021-2022 On Basis of Disability	2021-2022 On Basis of Sex	2021-2022 On Basis of Race, Color, or National Origin
Nebraska	131	477	337
Blaine County, NE	0	0	0
Custer County, NE	0	0	0
Garfield County, NE	0	0	0
Greeley County, NE	0	0	0
Howard County, NE	0	0	1
Loup County, NE	0	0	0
Sherman County, NE	0	0	0
Valley County, NE	0	0	0
Wheeler County, NE	0	0	0

Sources: CRDC 2021-2022

Students Reporting Being Bullied on Basis of Sex by Sex

Geography	2021-2022 Male	2021-2022 Female
Nebraska	156	321
Blaine County, NE	0	0
Custer County, NE	0	0
Garfield County, NE	0	0
Greeley County, NE	0	0
Howard County, NE	0	0
Loup County, NE	0	0
Sherman County, NE	0	0
Valley County, NE	0	0
Wheeler County, NE	0	0

Sources: CRDC 2021-2022

Students Reporting Being Bullied on Basis of Race, Color, or National Origin by Race or Ethnicity

Geography	2021-2022 Asian	2021-2022 Black	2021-2022 Hispanic	2021-2022 Multiracial	2021-2022 Native American	2021-2022 Native Hawaiian or Pacific Islander	2021-2022 White
Nebraska	17	106	69	46	9	0	90
Blaine County, NE	0	0	0	0	0	0	0
Custer County, NE	0	0	0	0	0	0	0
Garfield County, NE	0	0	0	0	0	0	0
Greeley County, NE	0	0	0	0	0	0	0
Howard County, NE	0	0	1	0	0	0	0
Loup County, NE	0	0	0	0	0	0	0
Sherman County, NE	0	0	0	0	0	0	0
Valley County, NE	0	0	0	0	0	0	0
Wheeler County, NE	0	0	0	0	0	0	0

Sources: CRDC 2021-2022

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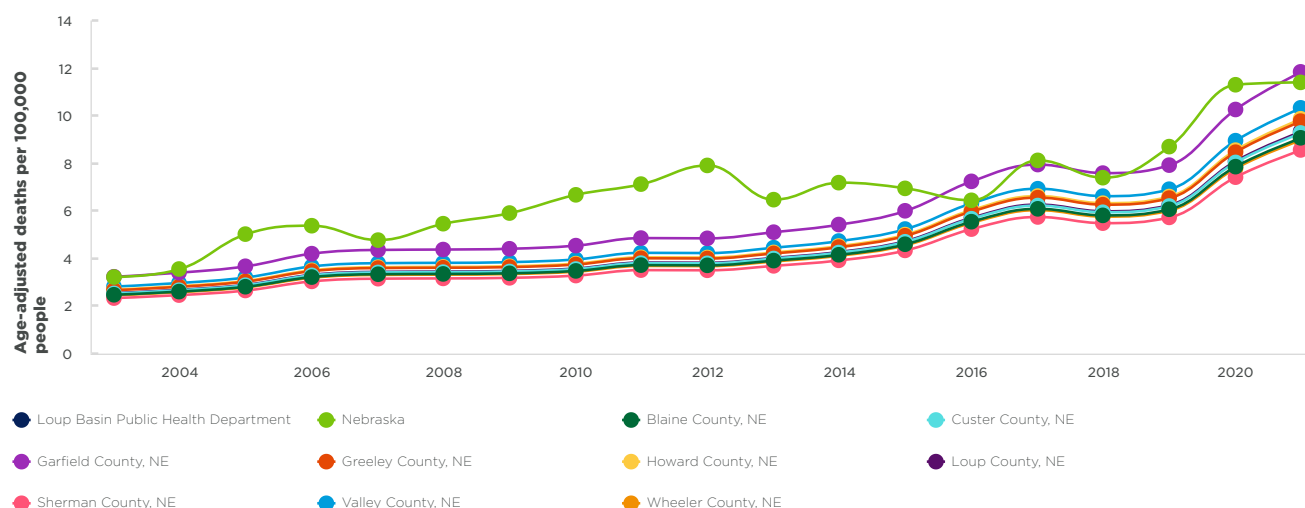


Loup Basin Public Health Department Community Health Assessment

Opioid Report

Drug Overdose Death Rate

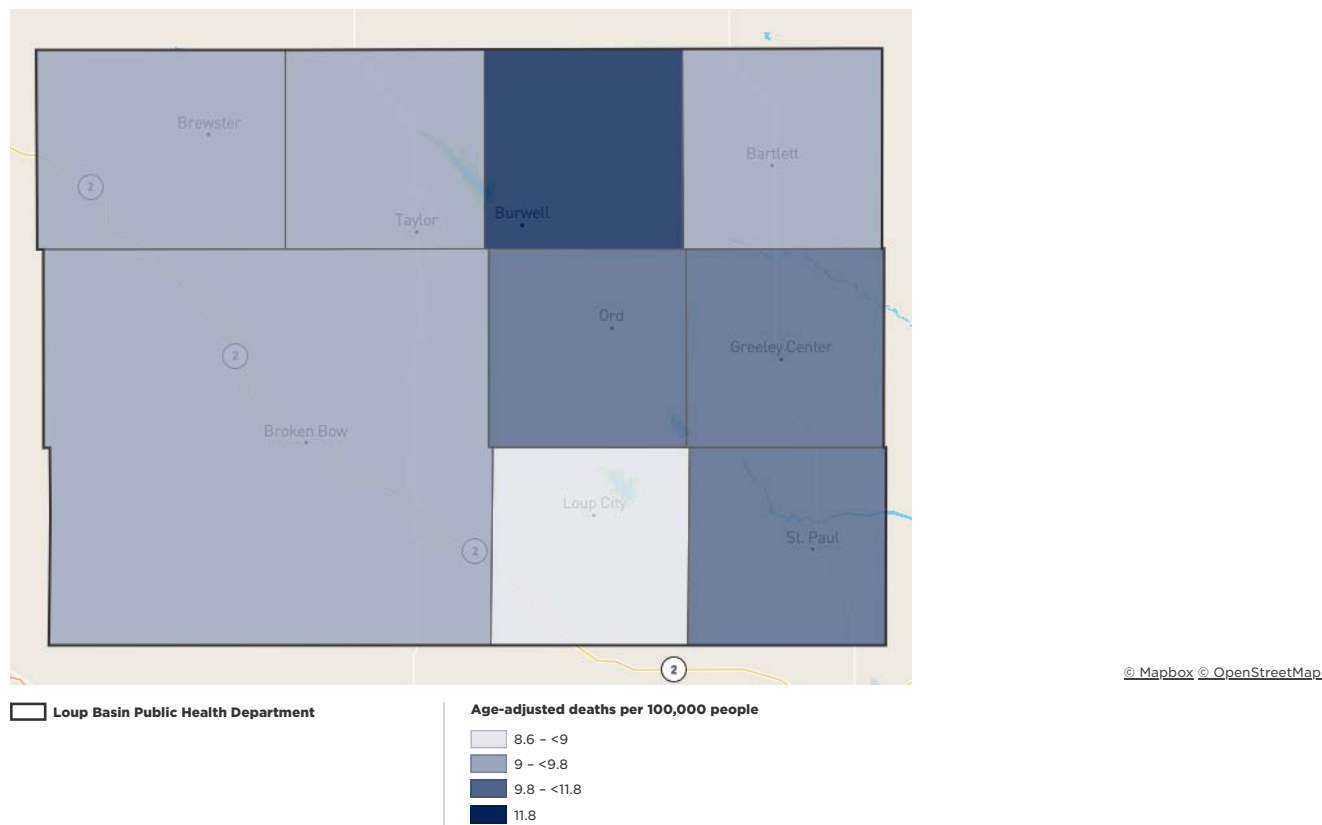
Drug Overdose Death Rate



Sources: CDC

Map: Drug Overdose Death Rate by County

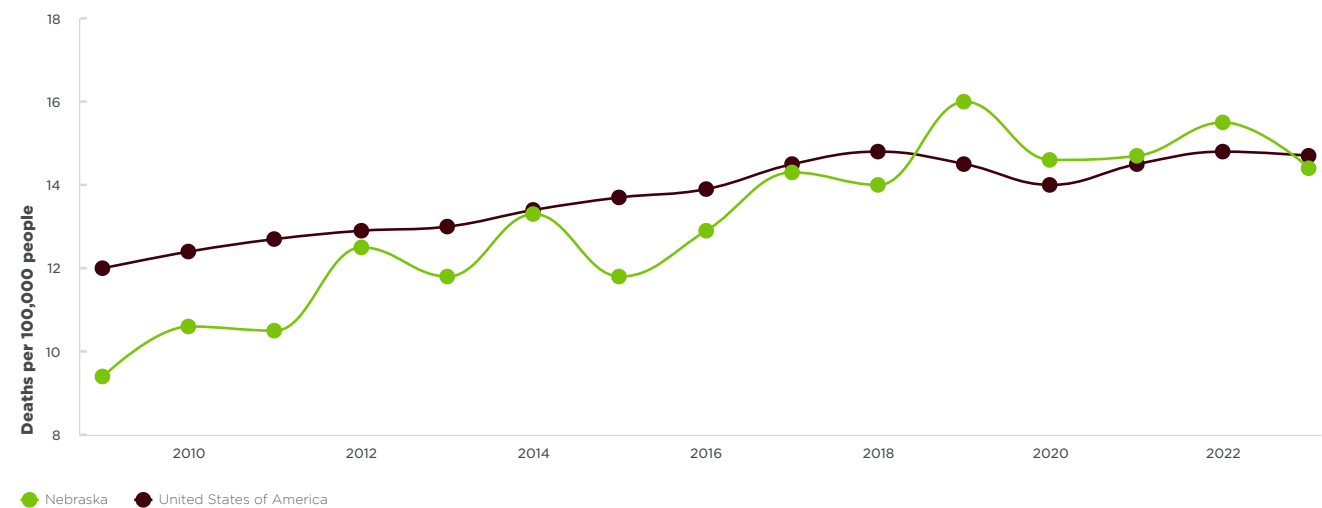
Drug Overdose Death Rate



Sources: CDC 2021

Suicide Death Rate

Suicide Death Rate



Sources: CDC WONDER Cause of Death

Suicide Death Rate by Sex



Suicide Death Rate Among Females

4.7

Deaths per 100,000 people
Nebraska

6.1

Deaths per 100,000 people
United States of America

Suicide Death Rate Among Males

23.9

Deaths per 100,000 people
Nebraska

23.6

Deaths per 100,000 people
United States of America

Sources: CDC WONDER Cause of Death 2023 Crude

Suicide Death Rate by Age

Suicide Death Rate by Age

▼ Data Sources	Nebraska ▼	United States of America ▼
2019-2023 Crude Age 1-14	1	1
2019-2023 Crude Age 15-24	15.7	14.1
2019-2023 Crude Age 25-34	21.3	18.6
2019-2023 Crude Age 35-44	22	18.3
2019-2023 Crude Age 45-54	22	18.8
2019-2023 Crude Age 55-64	19.1	18.1
2019-2023 Crude Age 65-74	13.2	15.4
2019-2023 Crude Age 75-84	14	19.3
2019-2023 Crude Age 85+	15.3	21.8

Sources: CDC WONDER Cause of Death 2019-2023 Crude

Deaths per 100,000 people within each age range

Suicide Death Rate by Race & Ethnicity

Suicide Death Rate by Race & Ethnicity

▼ Data Sources	Nebraska ▼	United States of America ▼
2019-2023 Crude Asian	7.9	7
2019-2023 Crude Black or African American	10.3	8.5
2019-2023 Crude Hispanic or Latino	7.9	7.7
2019-2023 Crude Native American	43.1	25.1
2019-2023 Crude White	16.6	18.8

Sources: CDC WONDER Cause of Death 2019-2023 Crude

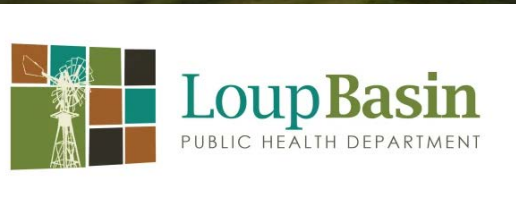
Age-adjusted deaths per 100,000 people within each group

Note: All groups are not Hispanic or Latino unless otherwise listed.

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Unlocking the Opioid Crisis

Opioids aggravate existing social, economic, and personal challenges across all types of communities. A resident may have opioid use disorder if they have a compulsive urge to use opioids, even if not medically necessary.

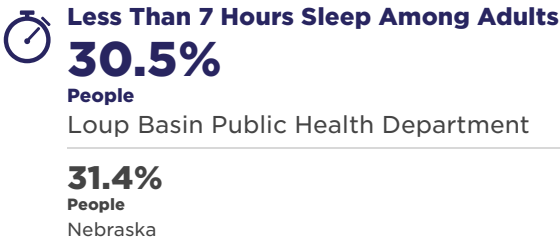
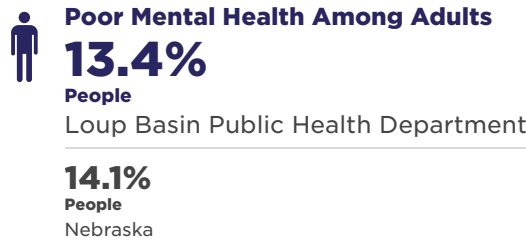
Substance use disorders are a consequence of complicated relationships between genetics and psychological and environmental conditions. Because of this, the indicators below will not be comprehensive, but they will help your community begin to address conditions that make opioid addiction more likely.

In this report, we'll examine key aspects of vulnerability to opioid-related substance use disorder in our community, including:

- Mental Health
- Hopelessness
- Social Isolation
- Education
- Behaviors
- Accessibility
- Drug Overdose Death Rates

Mental Health

At their core, opioids give people a temporary refuge from their **physical and psychological pain**. Opioid tolerance and dependence can develop after [just five days](#)[↗], and people with an untreated psychiatric disorder are at [greater risk](#)[↗] for developing opioid addiction.



Sources: CDC BRFSS PLACES 2022

Geography	2022 Poor Mental Health Among Adults	2022 Less Than 7 Hours Sleep Among Adults
Blaine County, NE	14.4%	32.6%
Custer County, NE	13.8%	31.7%
Garfield County, NE	12%	27.9%
Greeley County, NE	13.5%	31.5%
Howard County, NE	13.2%	28.8%
Loup County, NE	12.7%	29.7%
Sherman County, NE	13.9%	31.3%
Valley County, NE	13%	29.6%
Wheeler County, NE	12.7%	29.8%
Loup Basin Public Health Department	13.4%	30.5%
Nebraska	14.1%	31.4%

Sources: CDC BRFSS PLACES 2022

Hopelessness

Some psychological pain is community-wide. These measures help identify hopelessness in situations where getting ahead seems impossible.

These indicators [contribute to poor mental health](#) and lack of sleep.

Hopelessness

Geography	2019-2023 People Below Poverty Level	2019-2023 Unemployment Rate
Loup Basin Public Health Department	8.4%	2.6%
Nebraska	10.3%	3%
Blaine County, NE	10.6%	1%
Custer County, NE	8.6%	2.9%
Garfield County, NE	11.7%	1.8%
Greeley County, NE	11.2%	2.3%
Howard County, NE	5.4%	3.4%
Loup County, NE	8.2%	0%
Sherman County, NE	9.5%	4.6%
Valley County, NE	9.3%	0.4%
Wheeler County, NE	5.2%	1.7%

Sources: US Census Bureau ACS 5-year 2019-2023

Social Isolation

Social isolation can create and feed into feelings of hopelessness and build the perception that no one cares or wants to help. Commute means of transportation and walkability scores are proxies for the built environment's ability to encourage frequent connections among community members, reducing social isolation.

A lengthy commute and commuting alone can negatively impact mental health and limit residents' opportunities to forge social connections. Walkability may improve happiness and satisfaction and [reduce loneliness](#). Walkability scores range between 1 and 20; the lower the score, the less walkable the area.

Total Population

Total Population
29,846
People
Loup Basin Public Health Department

1,965,926
People
Nebraska

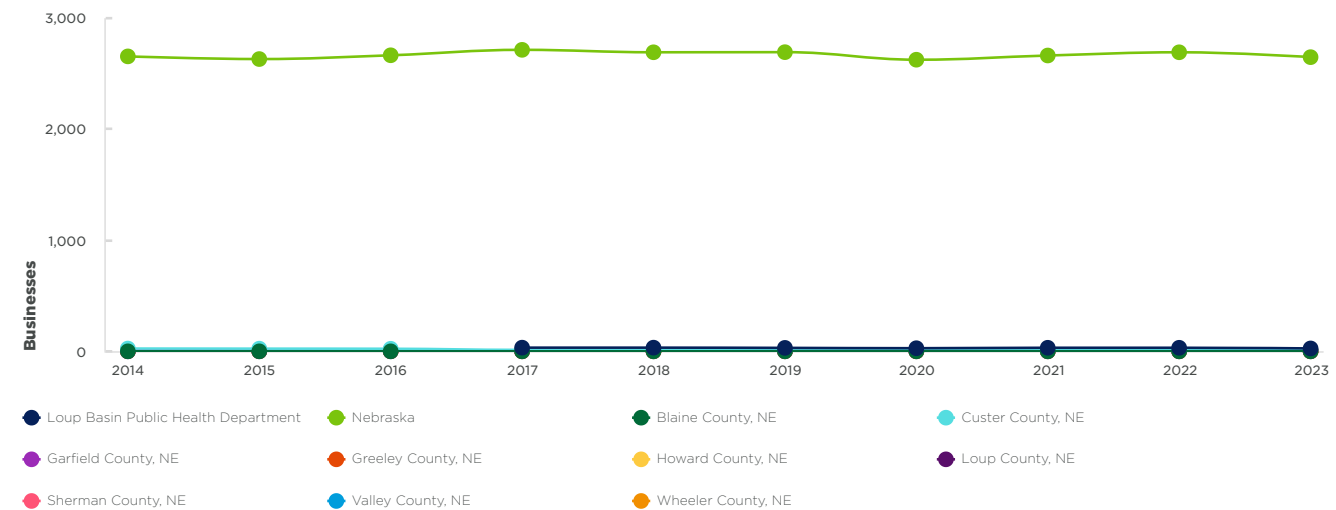
Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Total Population
Blaine County, NE	385
Custer County, NE	10,544
Garfield County, NE	1,797
Greeley County, NE	2,211
Howard County, NE	6,492
Loup County, NE	564
Sherman County, NE	2,974
Valley County, NE	4,094
Wheeler County, NE	785
Loup Basin Public Health Department	29,846
Nebraska	1,965,926

Sources: US Census Bureau ACS 5-year 2019-2023

Social Association

Social Association

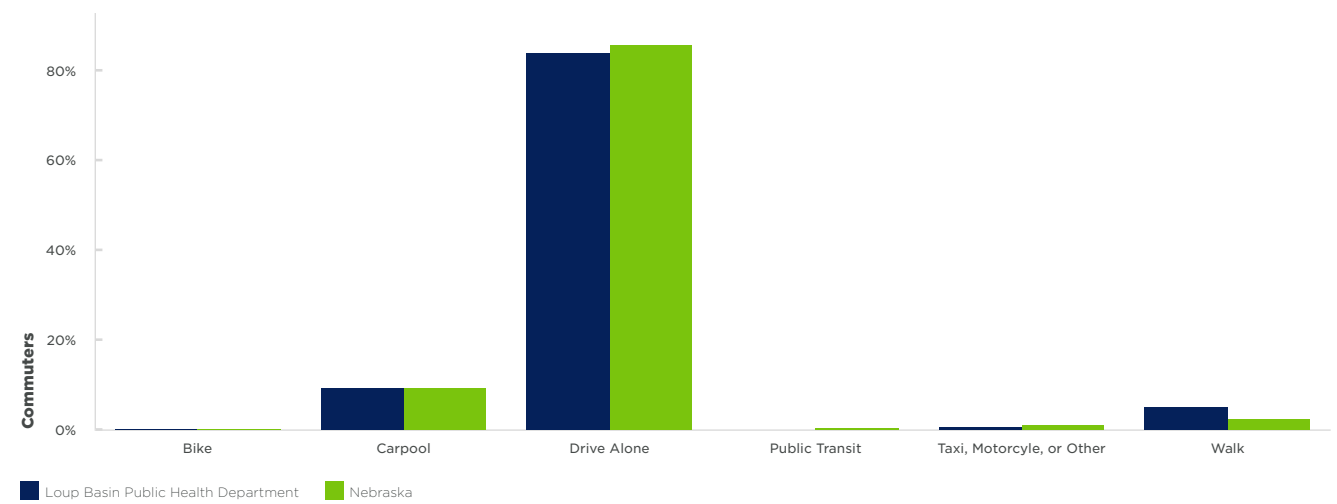


Sources: CBP

This data includes membership organizations such as civic organizations, bowling centers, golf clubs, fitness and recreational centers, sports teams, religious organizations, political organizations, labor unions, business associations, and professional organizations.

Commute Types

Method of Transportation to Work



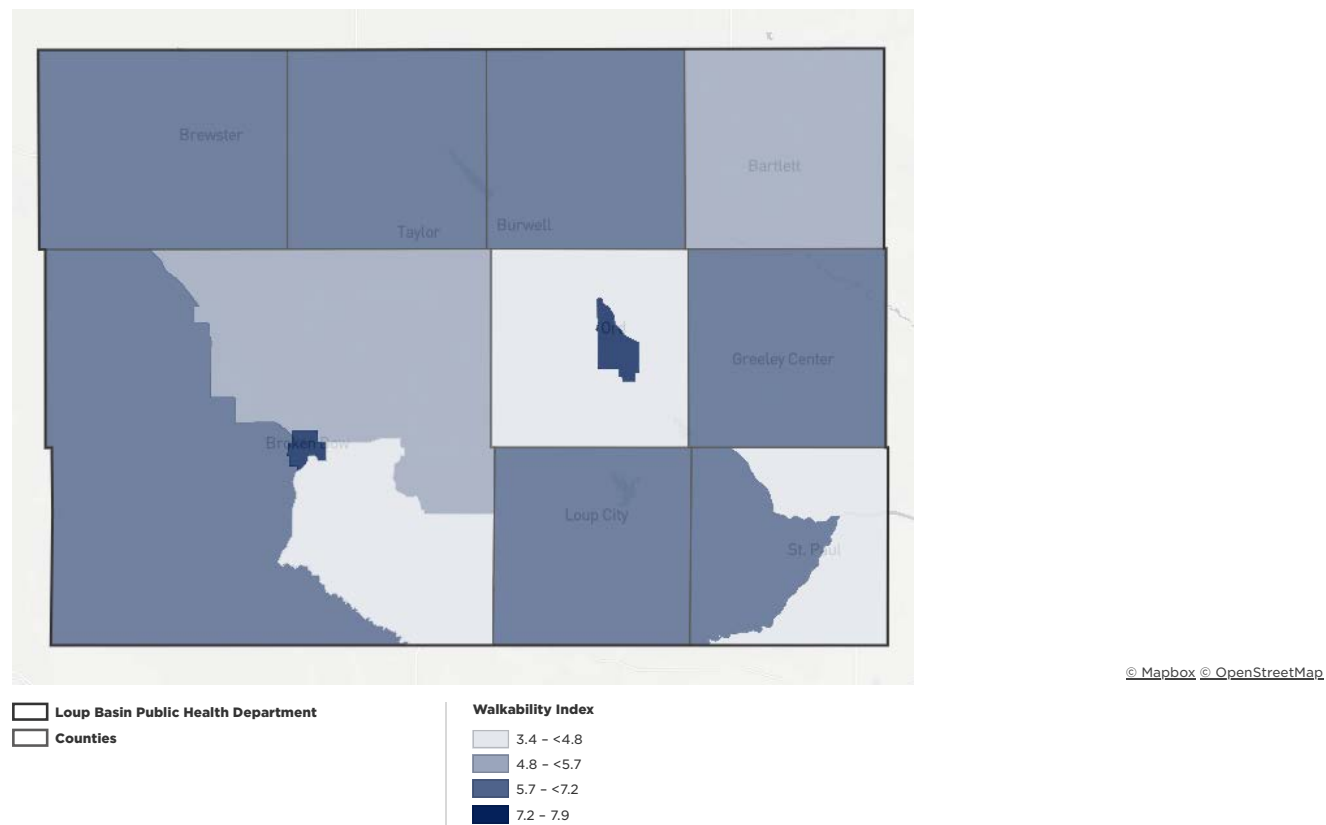
Sources: US Census Bureau ACS 5-year 2019-2023

▲▼ Data Sources	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼	Loup County, NE ▲▼	Shermar County, NE ▲▼
2019-2023 Bike	0%	0.7%	0%	0%	0%	0%	0%
2019-2023 Walk	25.3%	3.9%	13.3%	9.9%	2.5%	13.5%	4%
2019-2023 Taxicab, Motorcycle, or Other Means	2.9%	0.8%	0.9%	1.1%	1.7%	0%	0.5%
2019-2023 Drive Alone	66.5%	83.8%	75.7%	81.2%	88.4%	80.9%	84.7%
2019-2023 Carpool	5.3%	10.7%	10.1%	7.8%	7.3%	5.6%	10.5%
2019-2023 Public Transit	0%	0%	0%	0%	0%	0%	0.3%

Sources: US Census Bureau ACS 5-year 2019-2023

Walkability

Walkability Index



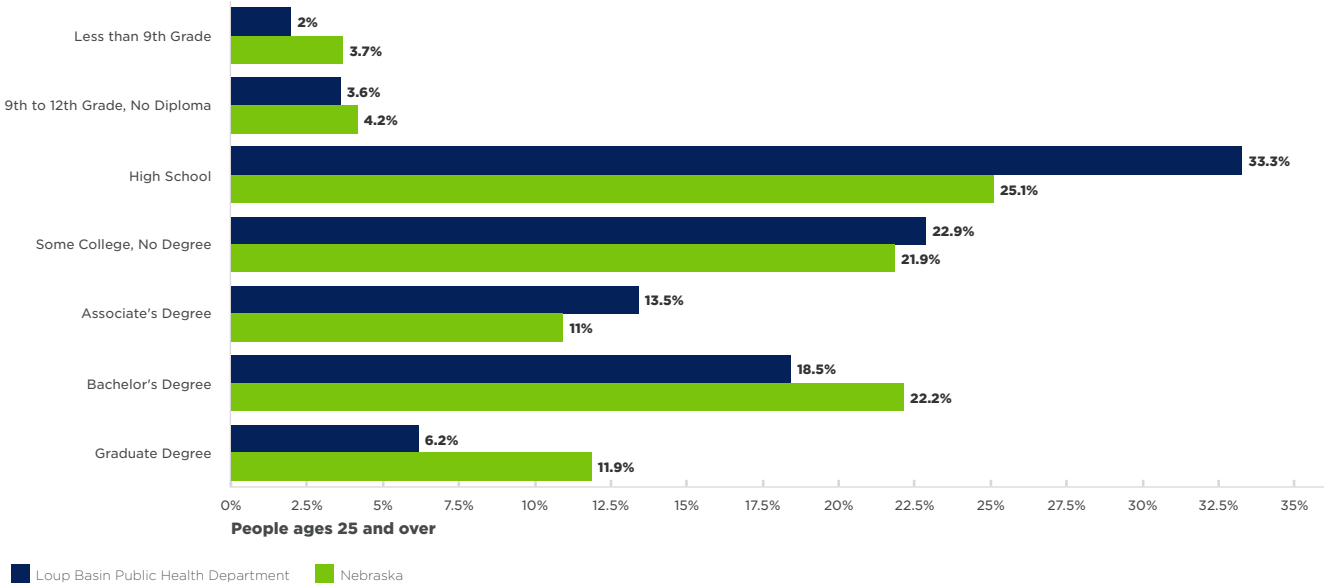
Sources: EPA 2021

Education

Education is a key aspect of substance use disorder, both as a prevention method and as a risk factor based on educational attainment.

Young adults not attending college [may have a greater rate of opioid use](#)[↗]. In addition, lower levels of educational attainment could also be related to [higher rates of opioid prescriptions](#)[↗] in the emergency room. Education can play into hopelessness too, especially if a resident's education does not match their income.

Highest Level of Education Completed



Sources: US Census Bureau ACS 5-year 2019-2023

▼ ▲ Data Sources	Blaine County, NE ▼ ▲	Custer County, NE ▼ ▲	Garfield County, NE ▼ ▲	Greeley County, NE ▼ ▲	Howard County, NE ▼ ▲	Loup County, NE ▼ ▲	Sherman County, NE
2019-2023 Less than 9th Grade	0.7%	2.3%	0.3%	3.3%	2.1%	0%	2.5%
2019-2023 9th to 12th Grade, No Diploma	3.3%	3.7%	4.2%	3.3%	2.7%	0%	6.2%
2019-2023 High School Degree	38.9%	31.4%	26.8%	37.7%	35.9%	33.3%	35.6%
2019-2023 Some College, No Degree	18.9%	21.6%	26%	19.3%	24.3%	20.5%	25.9%
2019-2023 Associate's Degree	12.6%	15.4%	10%	18.1%	12%	20.2%	10.9%
2019-2023 Bachelor's Degree	21.9%	18.7%	23.8%	12.8%	19%	17.9%	13.3%
2019-2023 Graduate Degree	3.7%	7%	8.9%	5.6%	3.9%	8.1%	5.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Behaviors

Isolation and hopelessness are informed by and interact with residents’ behaviors, including risk-taking such as criminal activity. With opioids, tobacco use is a key behavior that increases the risk for addiction.

Nicotine provides short-term pain relief, but smoking may lead to [more intense chronic pain](#)[↗] over time. Tobacco use is more common among people who use prescription opioids for nonmedical purposes.

Smoke Regularly

14.93%

of Adults

Loup Basin Public Health Department

14.17%

of Adults

Nebraska

Binge Drinking Among Adults

17.3%

People

Loup Basin Public Health Department

19.2%

People

Nebraska

Sources: CDC BRFSS PLACES 2022

Geography	2022 Regular Smoking Among Adults	2022 Binge Drinking Among Adults
Blaine County, NE	16.7%	17.4%
Custer County, NE	15.6%	16.8%
Garfield County, NE	12%	16.6%
Greeley County, NE	14.9%	17.7%
Howard County, NE	13.5%	18.4%
Loup County, NE	13.7%	16.2%
Sherman County, NE	17.2%	17%
Valley County, NE	13.9%	18.1%
Wheeler County, NE	15.3%	16%
Loup Basin Public Health Department	14.9%	17.3%
Nebraska	14.2%	19.2%

Sources: CDC BRFSS PLACES 2022

Accessibility

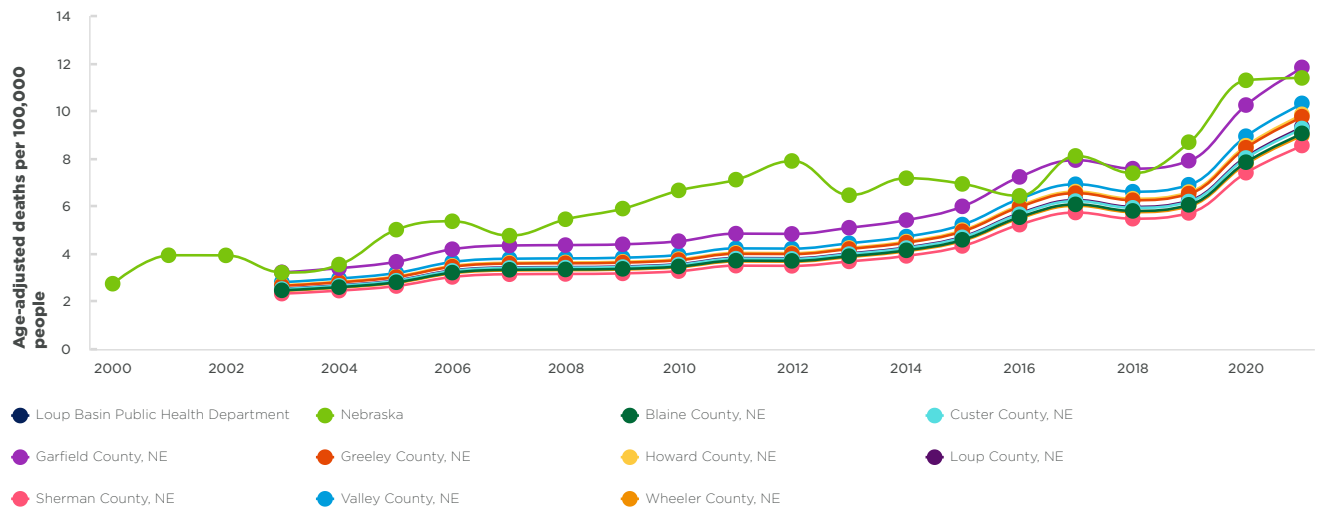
The conditions for addiction can exist without resulting in a substance use disorder. Access to opioids is the missing piece that catalyzes these conditions into a potentially dangerous combination. Current insurance plans tend to [make opioids cheap and enable their use](#) as a first step in treating chronic pain.

Outcomes

For too many, the ultimate outcome of substance use disorder is death. Once people can no longer access prescription opioids, they often turn to illegal substances which may be laced with substances that could create a dependence on other types of drugs or cause an accidental overdose.

Opioid and other drug use rise and fall together. With the potential to form addictions to other substances, limiting overdose deaths to opioids obscures the total impact of opioid use disorder.

Age-Adjusted Drug Overdose Death Rate



Sources: CDC

Time Range: 2000-2021

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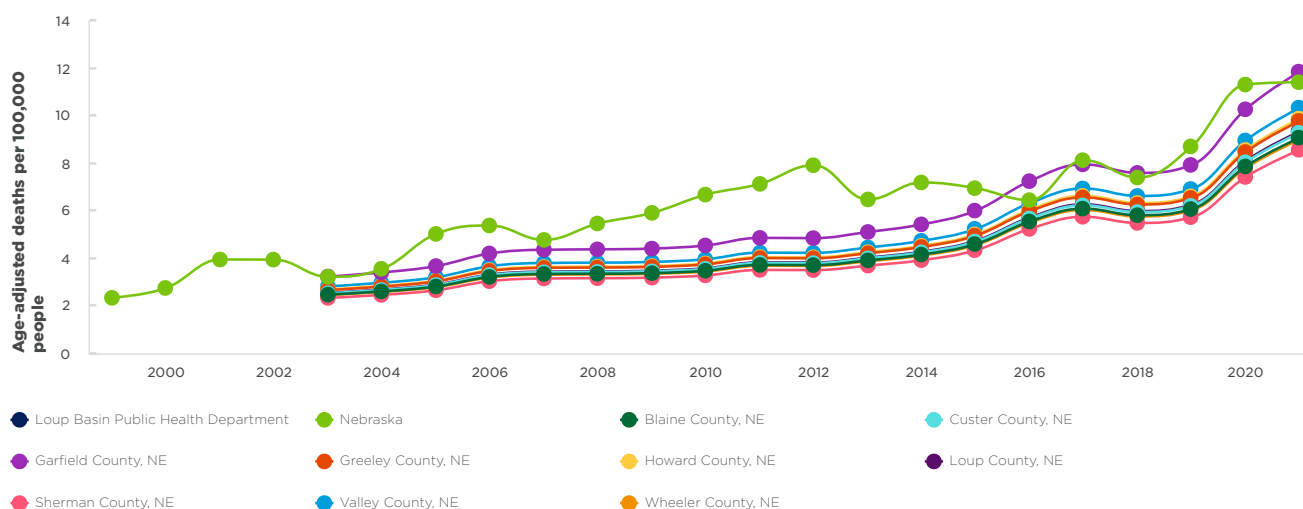
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Substance use recovery requires a community response.

It's been shown that about half of individuals who have mental illness at some point in life will also struggle with a substance use disorder. By increasing the layers of support available for everyone in the community, including peer groups, professional help, and educating family and friends, people who struggle with substance use can find a path toward recovery.

Drug Overdose Death Rate Over Time

Drug Overdose Death Rate



Sources: CDC

Map: Drug Overdose Death Rate



Sources: CDC 2021

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We should be able to breathe easy.

It's likely no surprise that the air we breathe affects our health. That air is affected by where we live and if things that cause poor air quality are nearby, such as heavy traffic, fires, and more.



Diesel Particulate Matter Level in Air
0.05
Micrograms per cubic meter
Loup Basin Public Health Department

0.14
Micrograms per cubic meter
Nebraska

Respiratory Hazard Environmental Justice Index
0.3
Loup Basin Public Health Department

4.3
Nebraska

Sources: EPA EJSCREEN 2023, 2024

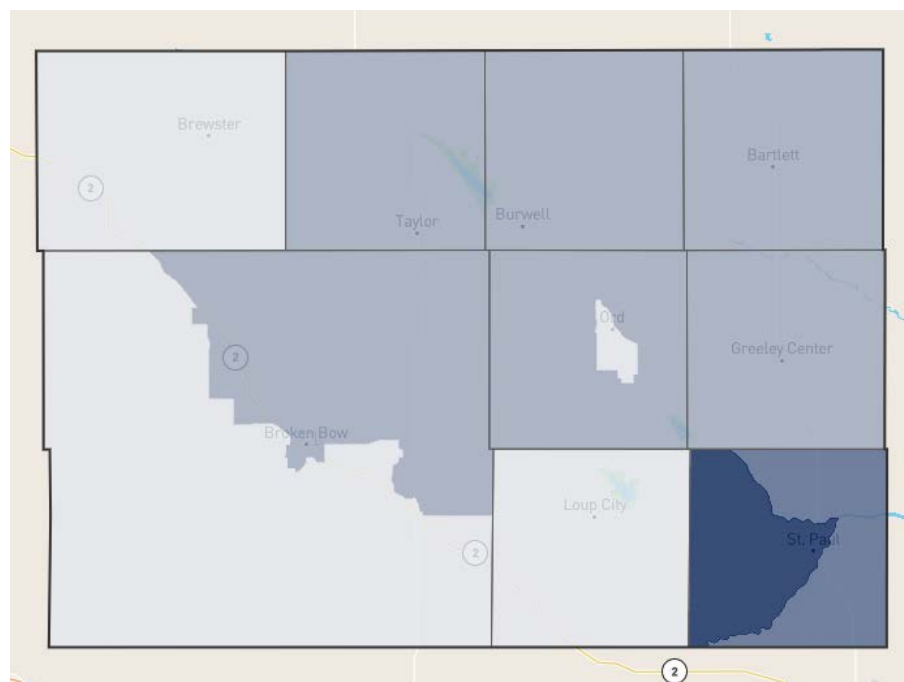
Respiratory Hazard Environmental Justice Index: the ratio of air toxic exposure concentration to health-based reference concentration weighted by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. As the value increases, the environmental justice in that area worsens.

Geography	2024 Diesel Particulate Matter Level in Air	2023 Respiratory Hazard Environmental Justice Index
Blaine County, NE	0	0.2
Custer County, NE	0.1	0.2
Garfield County, NE	0	0.2
Greeley County, NE	0	0.2
Howard County, NE	0.1	0.6
Loup County, NE	0	0.2
Sherman County, NE	0.1	0.2
Valley County, NE	0	0.2
Wheeler County, NE	0	0.2
Loup Basin Public Health Department	0.1	0.3
Nebraska	0.1	4.3

Sources: EPA EJSCREEN 2023, 2024

Respiratory Hazard Environmental Justice Index: the ratio of air toxic exposure concentration to health-based reference concentration weighted by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. As the value increases, the environmental justice in that area worsens.

Air Toxics Cancer Risk Environmental Justice Index



© Mapbox © OpenStreetMap

 Loup Basin Public Health Department
 Counties

Air Toxics Cancer Risk Environmental Justice Index

 0.1 - <0.2
 0.2 - <0.6
 0.6 - <0.8
 0.8

Sources: EPA EJSCREEN 2023

Air Toxics Cancer Risk Environmental Justice Index: the estimate of individual lifetime cancer risk from inhalation of air toxics multiplied by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. Lower values indicate lower relative individual lifetime cancer risk from inhalation of air toxics, while higher values indicate greater relative individual lifetime cancer risk from inhalation of air toxics.

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Micrograms per cubic meter
Loup Basin Public Health Department

0.14
Micrograms per cubic meter
Nebraska

Respiratory Hazard Environmental Justice Index
0.3
Loup Basin Public Health Department

4.3
Nebraska

Sources: EPA EJSCREEN 2023, 2024

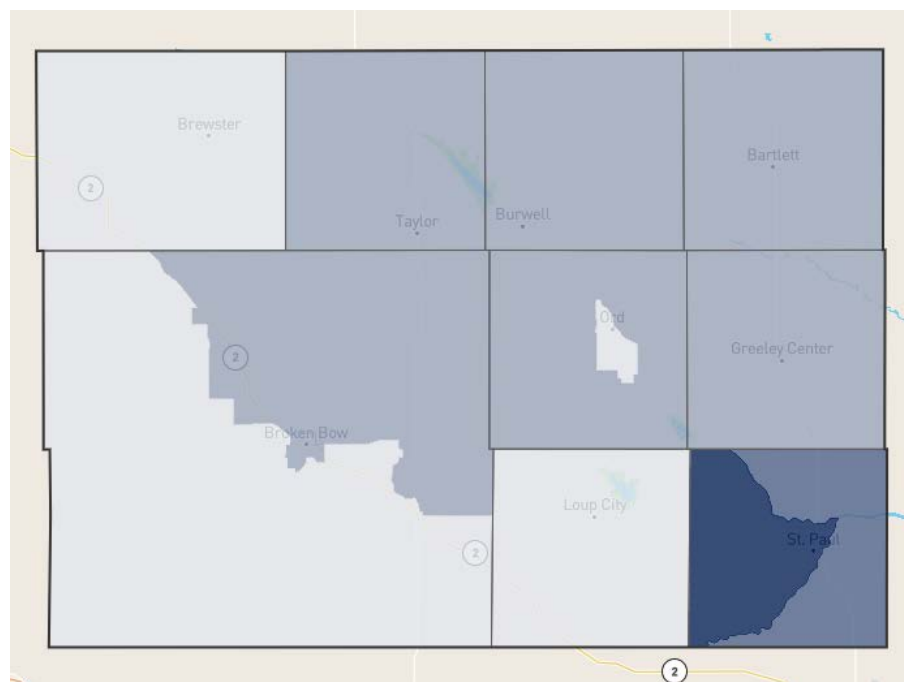
Respiratory Hazard Environmental Justice Index: the ratio of air toxic exposure concentration to health-based reference concentration weighted by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. As the value increases, the environmental justice in that area worsens.

Geography	2024 Diesel Particulate Matter Level in Air	2023 Respiratory Hazard Environmental Justice Index
Blaine County, NE	0	0.2
Custer County, NE	0.1	0.2
Garfield County, NE	0	0.2
Greeley County, NE	0	0.2
Howard County, NE	0.1	0.6
Loup County, NE	0	0.2
Sherman County, NE	0.1	0.2
Valley County, NE	0	0.2
Wheeler County, NE	0	0.2
Loup Basin Public Health Department	0.1	0.3
Nebraska	0.1	4.3

Sources: EPA EJSCREEN 2023, 2024

Respiratory Hazard Environmental Justice Index: the ratio of air toxic exposure concentration to health-based reference concentration weighted by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. As the value increases, the environmental justice in that area worsens.

Air Toxics Cancer Risk Environmental Justice Index



© Mapbox © OpenStreetMap

 Loup Basin Public Health Department
 Counties

Air Toxics Cancer Risk Environmental Justice Index

 0.1 - <0.2
 0.2 - <0.6
 0.6 - <0.8
 0.8

Sources: EPA EJSCREEN 2023

Air Toxics Cancer Risk Environmental Justice Index: the estimate of individual lifetime cancer risk from inhalation of air toxics multiplied by the proportion of the population identified as low-income or belonging to an ethnic/racial minority group. Lower values indicate lower relative individual lifetime cancer risk from inhalation of air toxics, while higher values indicate greater relative individual lifetime cancer risk from inhalation of air toxics.

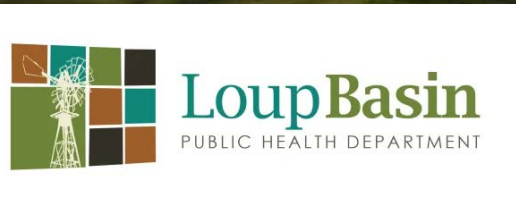
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Loup Basin Public Health Department

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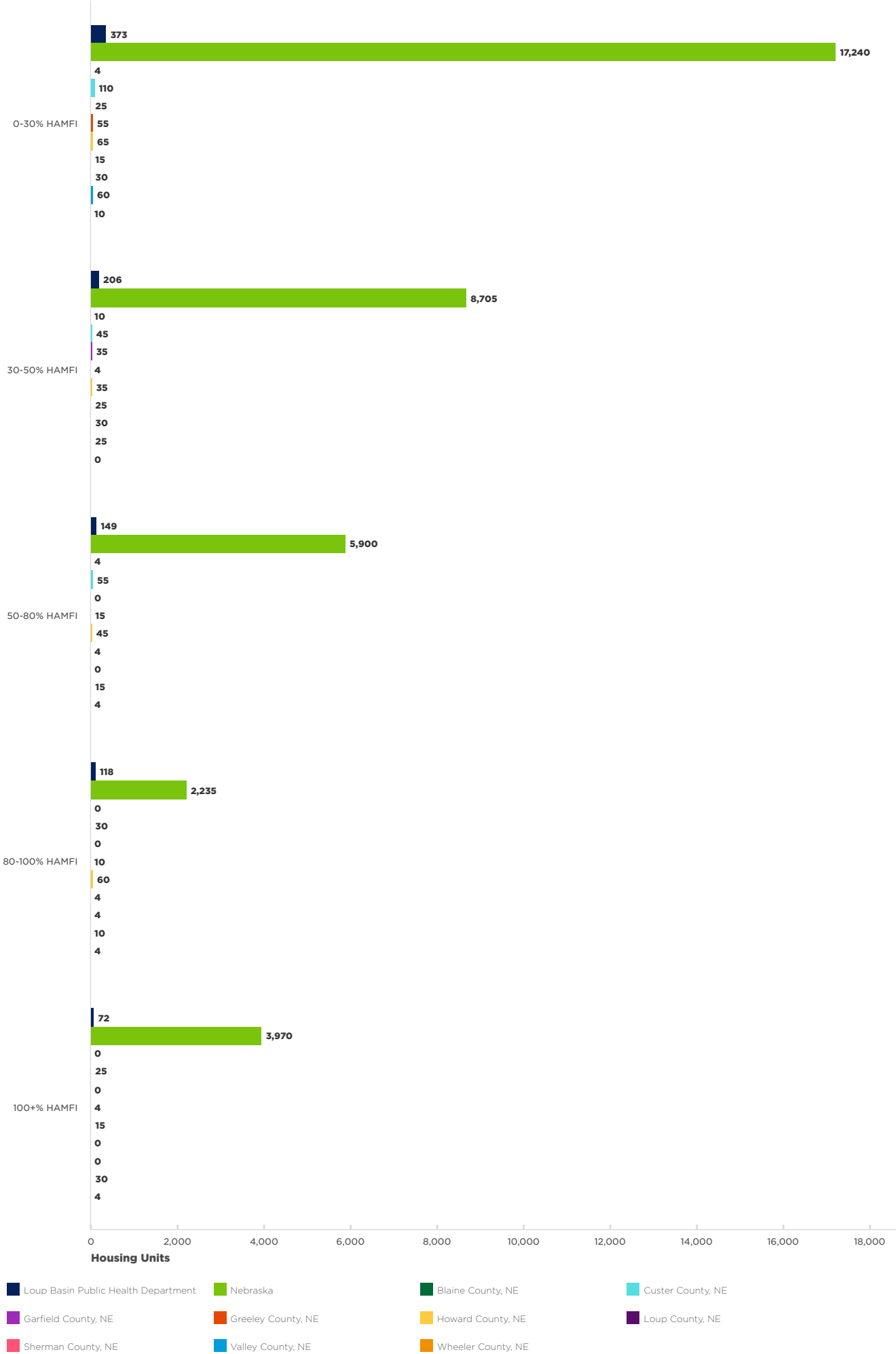
Loup Basin Public Health Department Community Health Assessment

We all deserve to be safe at home.

Homes that are unsafe put people's health at risk. Safety is more than lack of crime in a neighborhood—it includes the physical structure of the home and whether or not it's safe to be there every day. People with lower incomes and from underserved areas may not have options other than homes with maintenance and safety issues that expose them to health risks. Unsafe homes, such as those with lead paint, may have negative effects on childhood development and can lead to many long-term health issues.

Presence of Severe Housing Problems by Owner vs Renter and Income

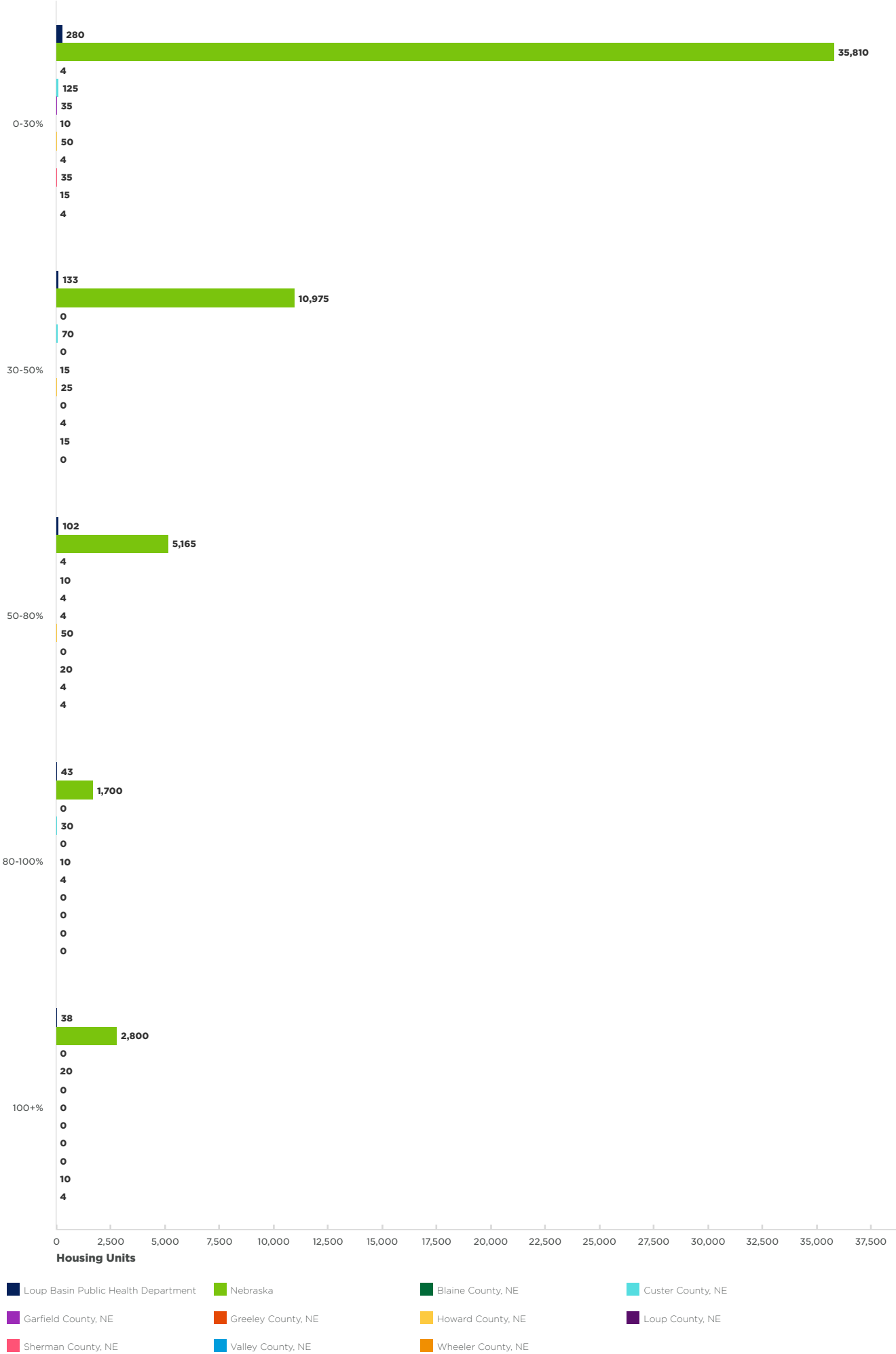
Owner-Occupied Homes with at Least 1 Severe Housing Problem by Owner Income



Sources: HUD CHAS 2017-2021

Severe Housing Problems include 1) lack complete kitchen facilities; 2) lack complete plumbing facilities; 3) household is severely overcrowded; and 4) household is severely cost burdened. HUD Area Median Family Income (HAMFI) is the median family income calculated by HUD for each jurisdiction in order to determine Fair Market Rents (FMRs) and income limits for HUD programs.

Renter-Occupied Homes with at Least 1 Severe Housing Problem by Renter Income

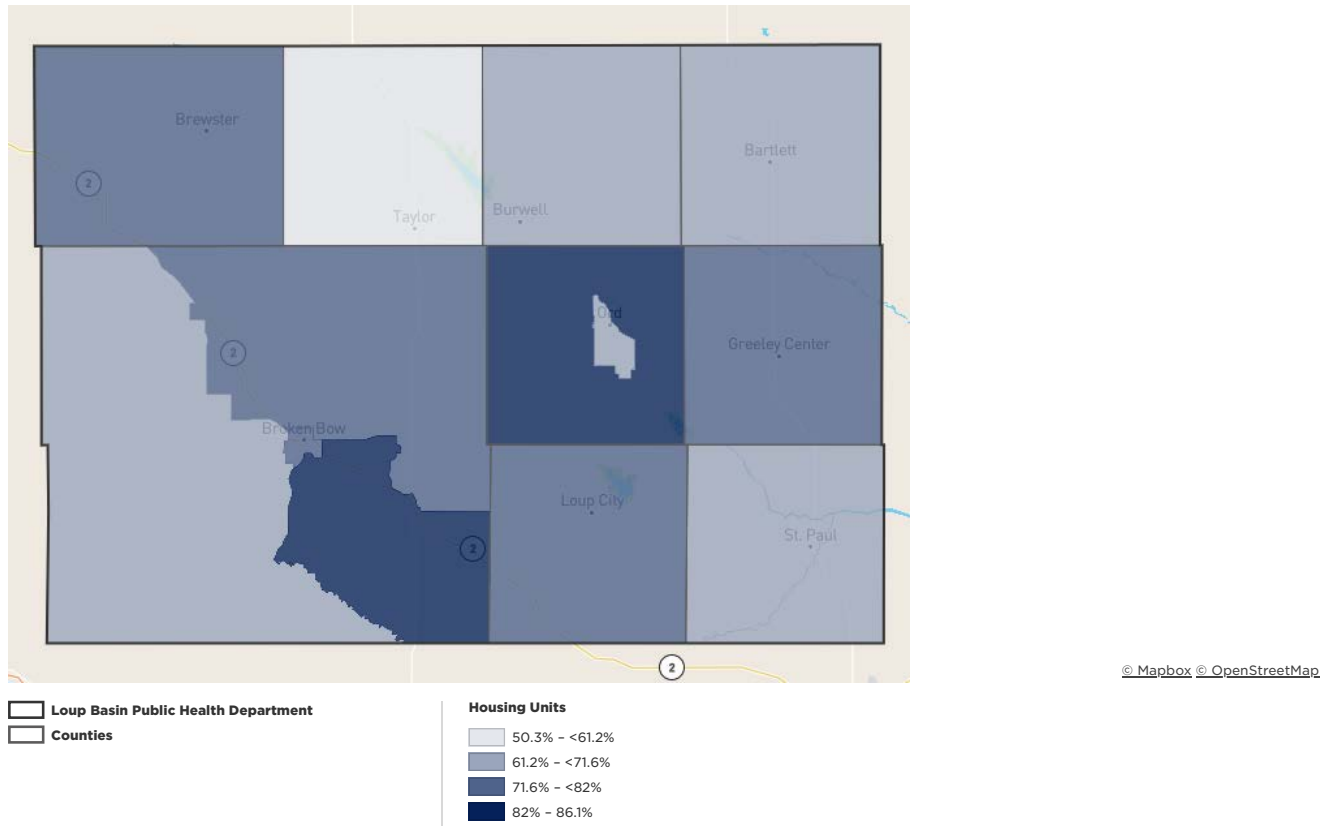


Sources: HUD CHAS 2017-2021

Severe Housing Problems include 1) lack complete kitchen facilities; 2) lack complete plumbing facilities; 3) household is severely overcrowded; and 4) household is severely cost burdened. HUD Area Median Family Income (HAMFI) is the median family income calculated by HUD for each jurisdiction in order to determine Fair Market Rents (FMRs) and income limits for HUD programs.

Map: Housing Units with Potential for Lead Paint

Housing Units with Potential for Lead Paint



Sources: US Census Bureau ACS 5-year 2019-2023

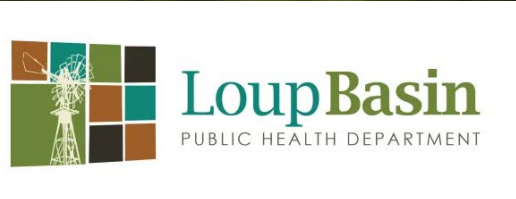
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Loup Basin Public Health Department Community Health Assessment

Preventing illness leads to better outcomes.

Healthy outcomes are about more than just the absence of illness and how long we live—it's about our overall well-being. Improving outcomes in our community means looking at the whole person and meeting their needs in all areas of life. It means giving all people the chance to have a healthy context that encourages healthy behaviors, preventing health problems before they even start.

Healthcare Environment

People Covered by Insurance



Have Health Insurance

93.4%

People

Loup Basin Public Health Department

92.6%

People

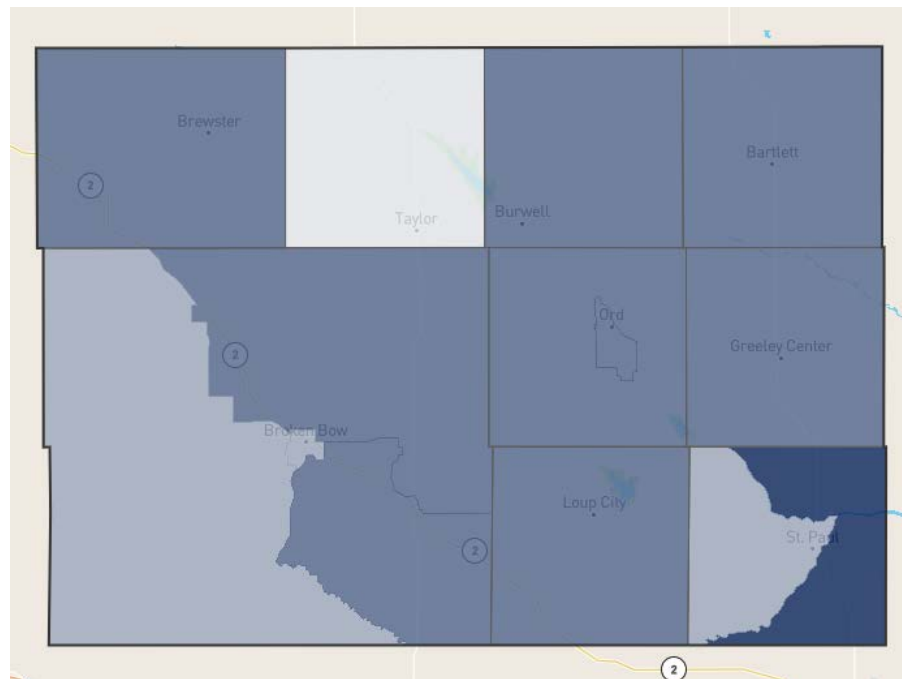
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Population With Health Insurance
Blaine County, NE	94.3%
Custer County, NE	92.8%
Garfield County, NE	94.5%
Greeley County, NE	95.5%
Howard County, NE	93%
Loup County, NE	87.9%
Sherman County, NE	94.1%
Valley County, NE	94%
Wheeler County, NE	95.4%
Loup Basin Public Health Department	93.4%
Nebraska	92.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Health Insurance Coverage



© Mapbox © OpenStreetMap

Loup Basin Public Health Department
Counties

People

87.9% - <90.9%

90.9% - <93.4%

93.4% - <98.1%

98.1%

Sources: US Census Bureau ACS 5-year 2019-2023

People Covered by Insurance by Race/Ethnicity

Insurance Status by Race/Ethnicity

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼
2019-2023 Insured Asian People	95.8%	93%	No data	50%	No data	No data	No data
2019-2023 Insured Black People	57.5%	86.8%	No data	100%	0%	25%	6.1%
2019-2023 Insured Hispanic or Latino People	76.9%	80.3%	No data	77.3%	100%	100%	70.1%
2019-2023 Insured Multiracial People	87.5%	86.3%	No data	81.9%	57.9%	98.9%	99.7%
2019-2023 Insured Native American People	92.7%	79.7%	No data	100%	No data	84.6%	100%
2019-2023 Insured Native Hawaiian and Pacific Islander People	100%	84.4%	No data	100%	No data	No data	No data
2019-2023 Insured Other People	77.8%	78.1%	No data	93.3%	100%	100%	47.1%
2019-2023 Insured White (Not Hispanic or Latino) People	94.3%	95%	94.3%	93.6%	94.9%	95.8%	93.9%

Sources: US Census Bureau ACS 5-year 2019-2023

Note: Unless otherwise indicated, data for each group includes both Hispanic or Latino people and non-Hispanic or Latino people.

People Covered by Insurance by Age

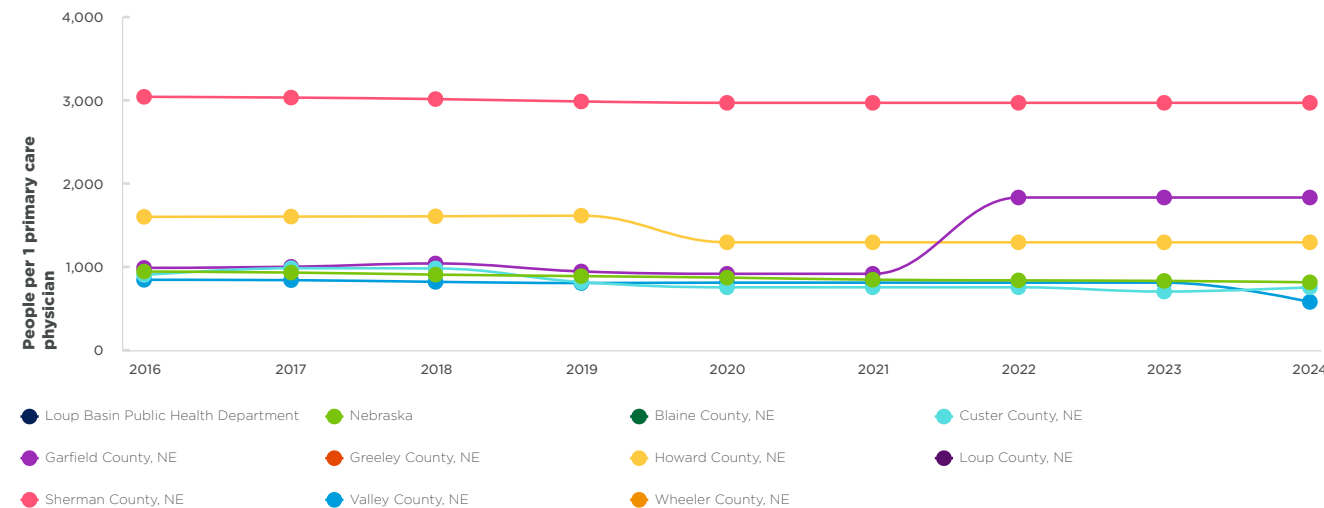
Health Insurance Status by Age

▲▼ Geography	2019-2023 Insured People Under Age 6 ▲▼	2019-2023 Insured People Ages 6 to 18 ▲▼	2019-2023 Insured People Ages 19 to 64 ▲▼	2019-2023 Insured People Ages 65+ ▲▼
Loup Basin Public Health Department	98.3%	93%	90.2%	99.4%
Nebraska	95.8%	94.7%	89.5%	99.4%
Blaine County, NE	100%	100%	87.7%	100%
Custer County, NE	97.9%	93.1%	89%	99.9%
Garfield County, NE	100%	91.1%	92%	100%
Greeley County, NE	96%	99.2%	92.2%	99.5%
Howard County, NE	100%	88.5%	91.8%	97.4%
Loup County, NE	100%	91.5%	79.4%	100%
Sherman County, NE	97.6%	95.2%	90.4%	99.7%
Valley County, NE	99.3%	96.4%	89.7%	100%
Wheeler County, NE	91.5%	92.3%	93.7%	100%

Sources: US Census Bureau ACS 5-year 2019-2023

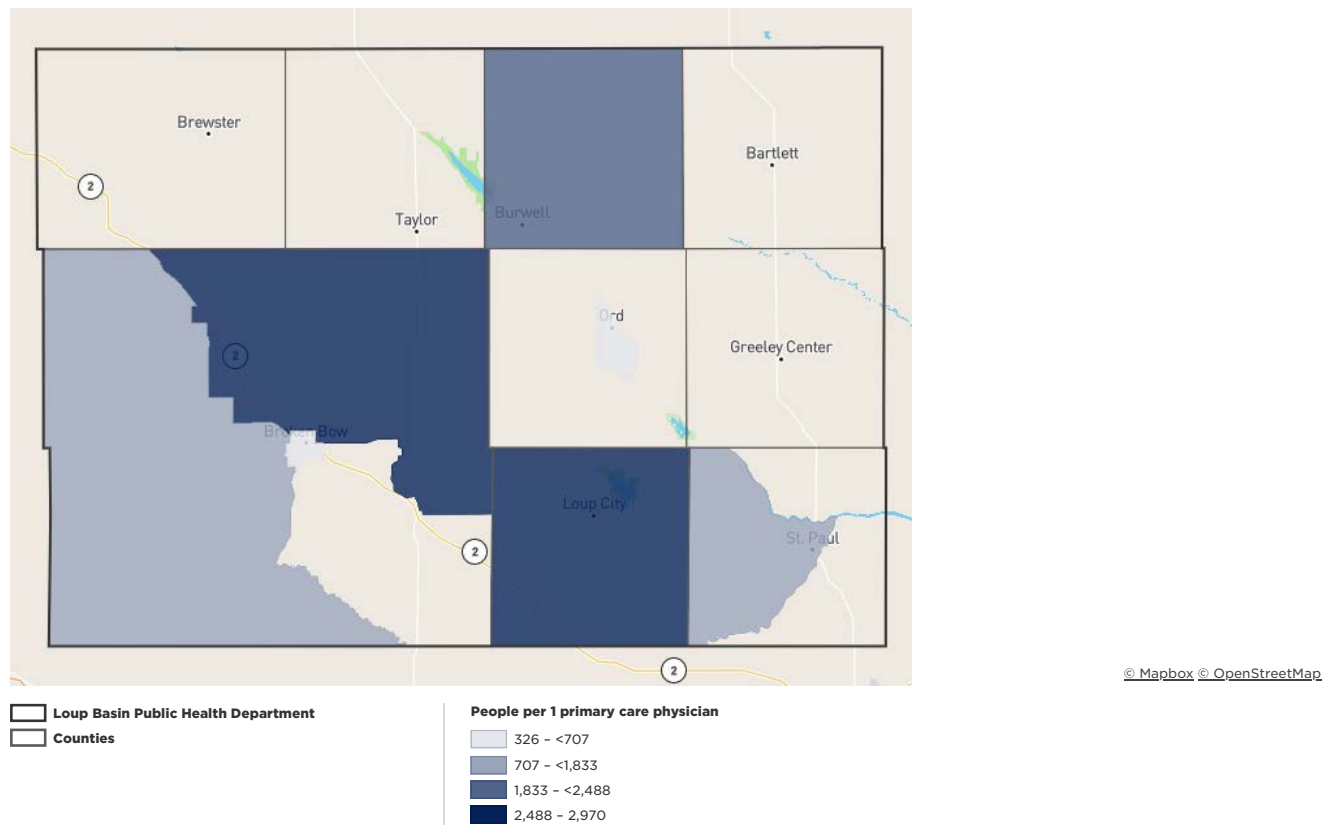
Primary Care Physician Ratio

Primary Care Physician Ratio



Sources: NPPES NPI

Primary Care Physician Ratio

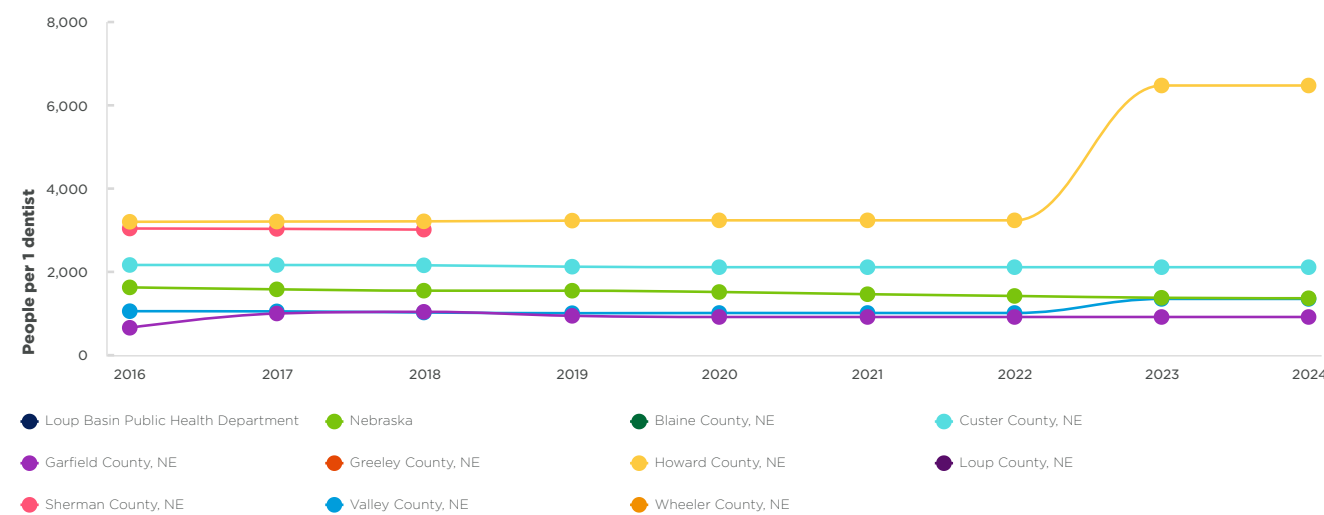


Sources: NPPES NPI 2024

Areas with no data have 0 primary care physicians.

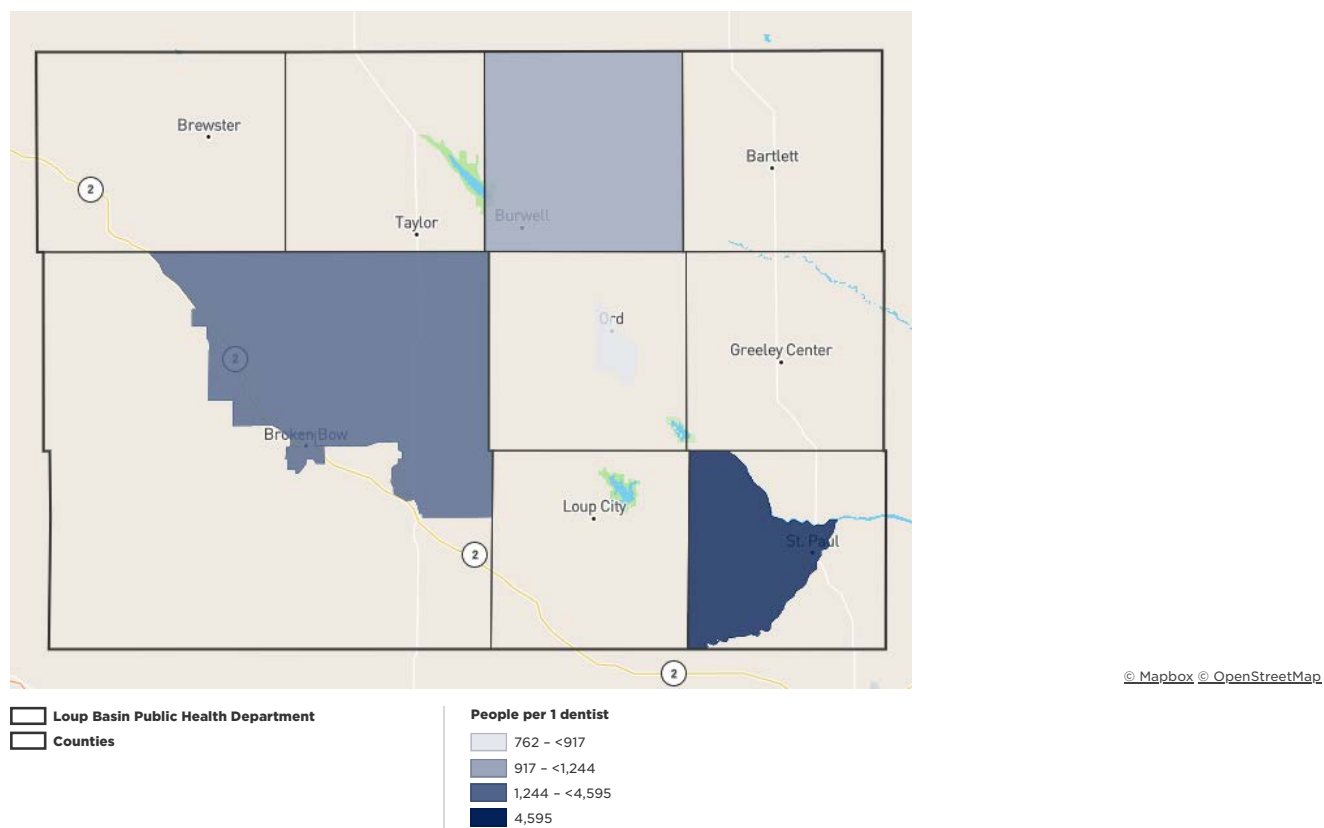
Dentist Ratio

Dentist Ratio



Sources: NPPES NPI

Dentist Ratio



Sources: NPPES NPI 2024

Areas with no data have 0 dentists.

Social Factors

Poverty Overall



Below Poverty Level

8.4%

of People

Loup Basin Public Health Department

10.3%

of People

Nebraska

Below Poverty Level

2,471

People

Loup Basin Public Health Department

197,300

People

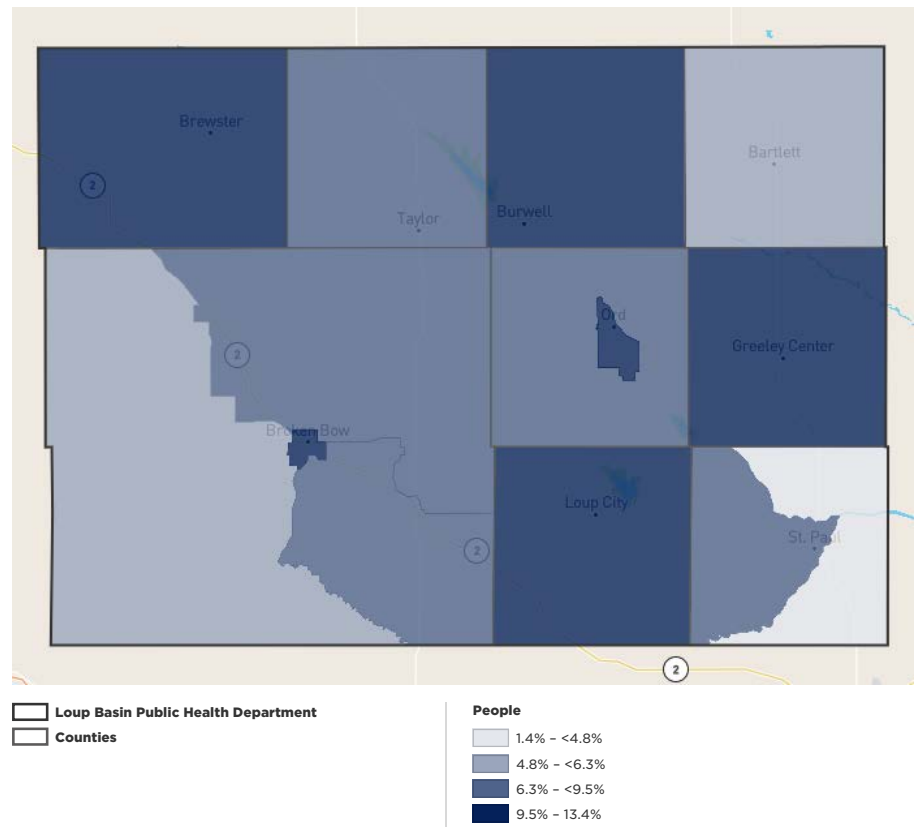
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 People Below Poverty Level (Percent)	2019-2023 People Below Poverty Level (Number)
Blaine County, NE	10.6%	41
Custer County, NE	8.6%	900
Garfield County, NE	11.7%	201
Greeley County, NE	11.2%	244
Howard County, NE	5.4%	348
Loup County, NE	8.2%	46
Sherman County, NE	9.5%	277
Valley County, NE	9.3%	373
Wheeler County, NE	5.2%	41
Loup Basin Public Health Department	8.4%	2,471
Nebraska	10.3%	197,300

Sources: US Census Bureau ACS 5-year 2019-2023

Poverty Rate



Sources: US Census Bureau ACS 5-year 2019-2023

Poverty by Race/Ethnicity

Poverty Rate by Race and Ethnicity

▼ ▲ Data Sources	Loup Basin Public Health Department ▼ ▲	Nebraska ▼ ▲	Blaine County, NE ▼ ▲	Custer County, NE ▼ ▲	Garfield County, NE ▼ ▲	Greeley County, NE ▼ ▲	Howard County, NE ▼ ▲
2019-2023 Asian	0%	9.5%	No data	0%	No data	No data	No data
2019-2023 Black or African American	8.4%	24.1%	No data	18.9%	0%	0%	0%
2019-2023 Hispanic or Latino	13.9%	15.8%	No data	9.9%	0%	100%	0%
2019-2023 Multiracial	9.9%	14.4%	No data	21.5%	47.4%	0%	0%
2019-2023 Native American	12.2%	23.1%	No data	20.6%	No data	15.4%	0%
2019-2023 Native Hawaiian and Pacific Islander	0%	23.6%	No data	0%	No data	No data	No data
2019-2023 Other	8.6%	15.3%	No data	0%	0%	100%	0%
2019-2023 White, Not Hispanic or Latino	8.2%	8.3%	10.6%	8.1%	11.5%	10.4%	5.9%

Sources: US Census Bureau ACS 5-year 2019-2023

Note: Unless otherwise indicated, data includes both Hispanic or Latino and non-Hispanic or Latino people.

Poverty by Age

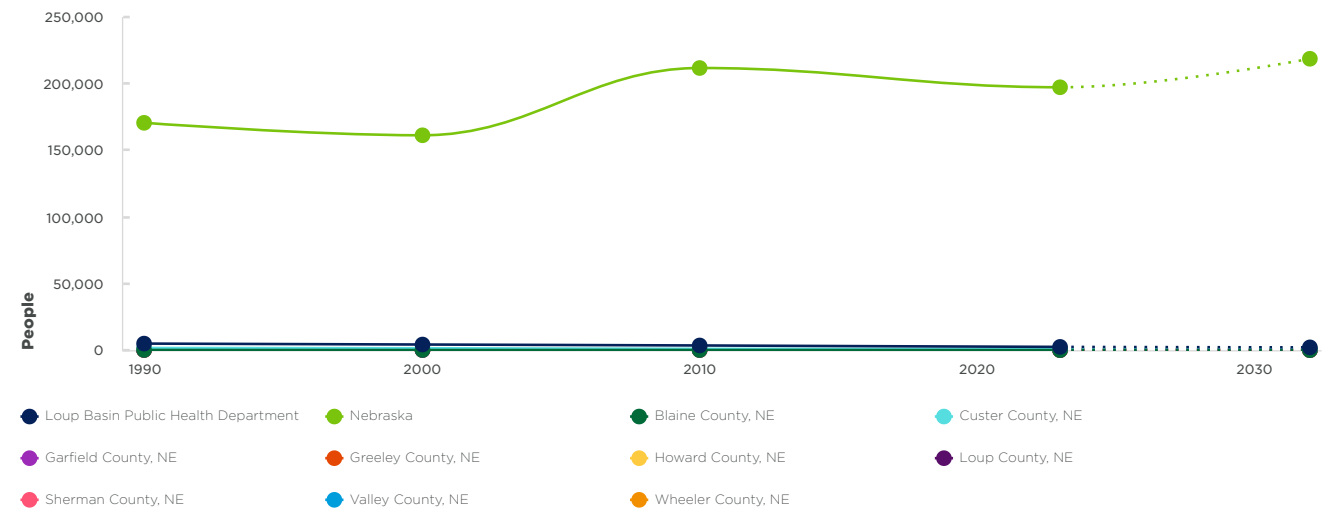
Poverty Rate by Age

▼ ▲ Data Sources	Loup Basin Public Health Department ▼ ▲	Nebraska ▼ ▲	Blaine County, NE ▼ ▲	Custer County, NE ▼ ▲	Garfield County, NE ▼ ▲	Greeley County, NE ▼ ▲	Howard County, NE ▼ ▲
2019-2023 Under Age 5	12.3%	12.9%	13.6%	9.1%	8.1%	26.5%	5%
2019-2023 Age 5	21.7%	13.9%	100%	39.7%	10.5%	17.5%	0%
2019-2023 Ages 6 to 11	11.2%	11.7%	4.9%	15.4%	25.7%	11.1%	4.7%
2019-2023 Ages 12 to 14	2.8%	10.2%	0%	2.4%	0%	22.4%	0%
2019-2023 Age 15	1.5%	10.2%	No data	3.8%	0%	0%	1.5%
2019-2023 Ages 16 to 17	8.9%	10.2%	0%	15.1%	0%	10.4%	9.8%
2019-2023 Ages 18 to 24	9%	19.8%	55.6%	5.7%	16.9%	14.6%	3.9%
2019-2023 Ages 25 to 34	10%	10.1%	2.9%	9.3%	14.2%	24.4%	3.4%
2019-2023 Ages 35 to 44	7.1%	7.8%	0%	10.9%	16.9%	4.8%	3.1%
2019-2023 Ages 45 to 54	5.8%	7.4%	0%	4.8%	0%	2.5%	4.9%
2019-2023 Ages 55 to 64	6.3%	8.2%	9.9%	4.6%	12.1%	4.4%	9.7%
2019-2023 Ages 65 to 74	6.6%	7.9%	10.9%	6%	7.5%	3.4%	7%
2019-2023 Ages 75 and Over	13.1%	10.6%	19.4%	13.3%	13.8%	17.5%	7.7%

Sources: US Census Bureau ACS 5-year 2019-2023

People in Poverty Over Time

People Below Poverty Level



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

Health Behaviors



Doctor Checkup in Past Year

75.7%

of Adults

Loup Basin Public Health Department

74.1%

of Adults

Nebraska

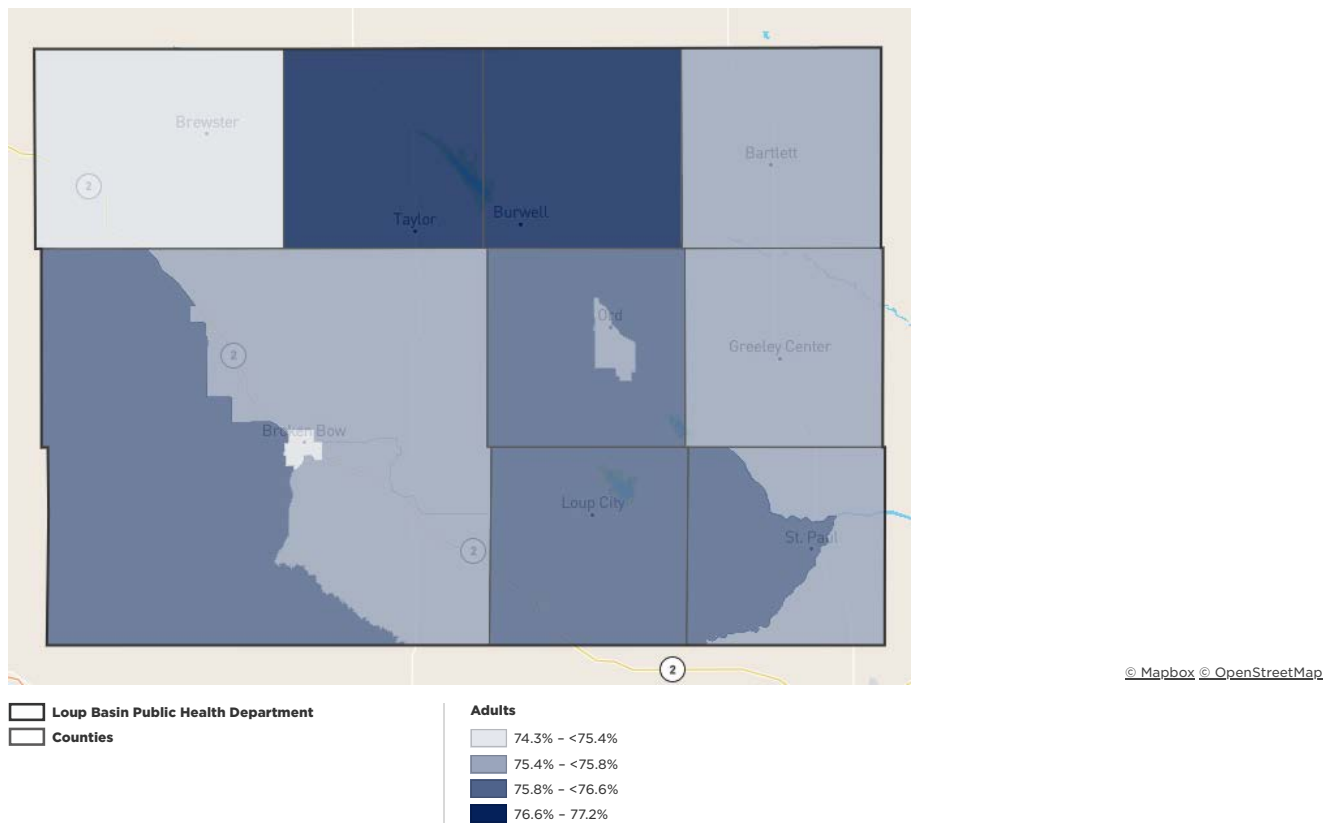
Sources: CDC BRFSS PLACES 2022

This data represents the proportion of adults who report having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, condition) in the previous year.

Geography	2022 Doctor Checkup in Past Year Among Adults
Blaine County, NE	74.9%
Custer County, NE	74.6%
Garfield County, NE	77.1%
Greeley County, NE	74.9%
Howard County, NE	76%
Loup County, NE	77.4%
Sherman County, NE	75.3%
Valley County, NE	75.5%
Wheeler County, NE	76.4%
Loup Basin Public Health Department	75.7%
Nebraska	74.1%

Sources: CDC BRFSS PLACES 2022

Doctor Checkup in Past Year

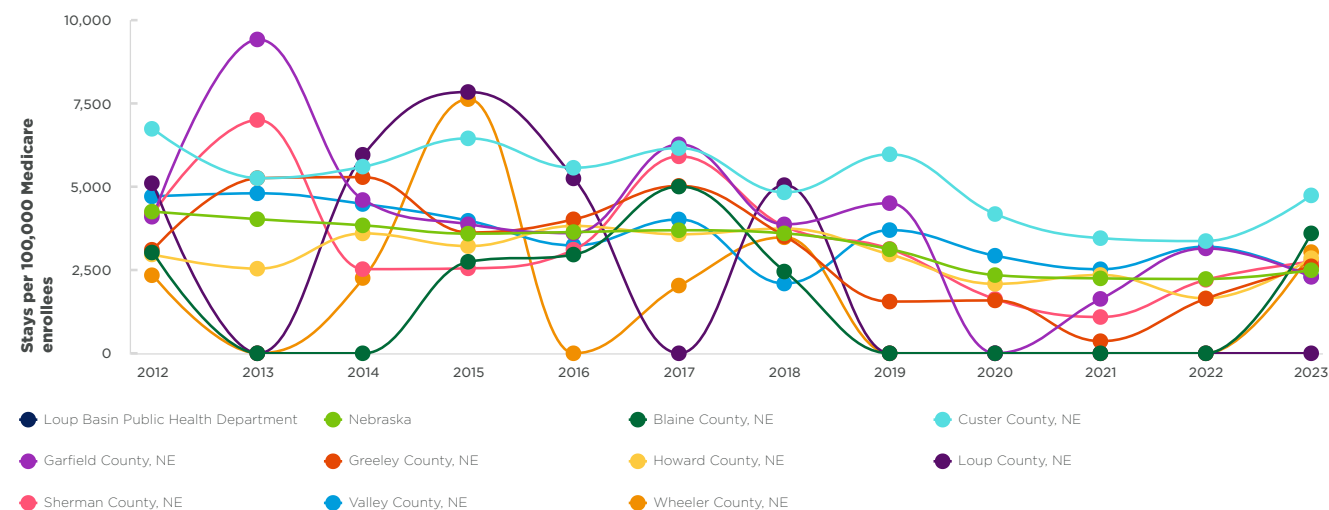


Sources: CDC BRFSS PLACES 2022

This data represents the proportion of adults who report having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, condition) in the previous year.

Preventable Poor Health Outcomes

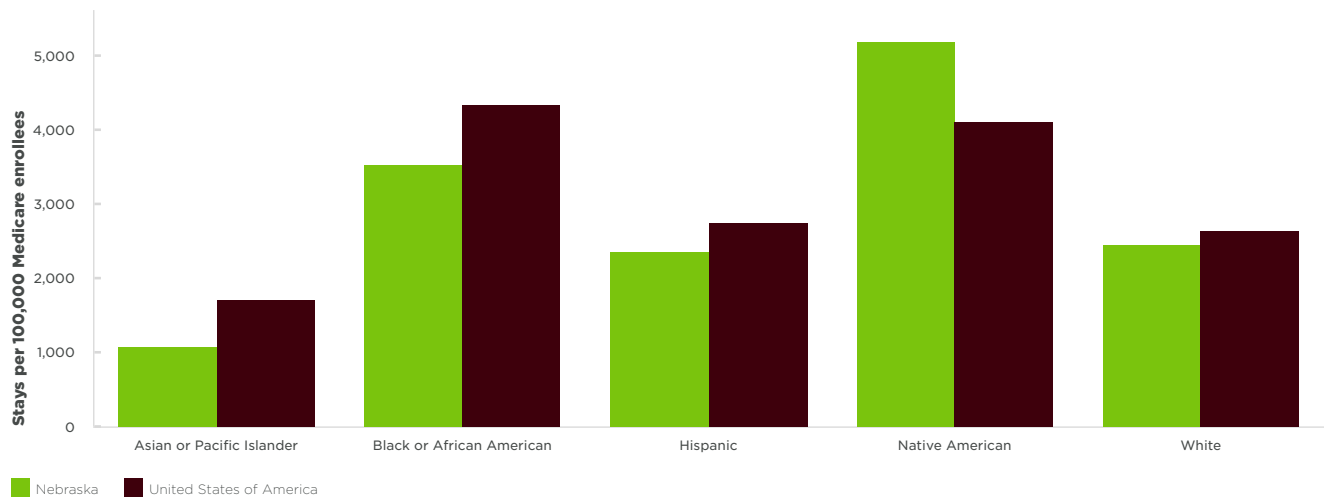
Medicare Preventable Hospital Stays



Sources: CMS MMD

Note: Preventable hospital stays include diabetes (complications, uncontrolled diabetes, and diabetes-related amputations), perforated appendix, COPD or asthma in older adults, hypertension, heart failure, dehydration, bacterial pneumonia, and UTIs. Appendix and dehydration are not included after 2019.

Medicare Preventable Hospital Stays by Race/Ethnicity



Sources: CMS MMD 2023

Note: Preventable hospital stays after 2019 include diabetes (complications, uncontrolled diabetes, and diabetes-related amputations), COPD or asthma in older adults, hypertension, heart failure, bacterial pneumonia, and UTIs.

▲ Data Sources ▼	Blaine County, NE ▲ ▼	Custer County, NE ▲ ▼	Garfield County, NE ▲ ▼	Greeley County, NE ▲ ▼	Howard County, NE ▲ ▼	Loup County, NE ▲ ▼	Sherman County, NE
2022 White	0	3,400	3,159	1,646	1,666	0	2,216
2022 Black or African American	No data	No data	No data	No data	No data	No data	No data
2022 Asian or Pacific Islander	No data	No data	No data	No data	No data	No data	No data
2022 Hispanic or Latino	No data	No data	No data	No data	No data	No data	No data
2022 Native American	No data	No data	No data	No data	No data	No data	No data

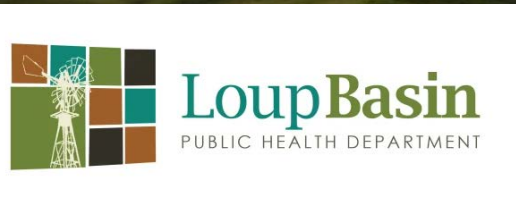
Sources: CMS MMD 2022

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Loup Basin Public Health Department Community Health Assessment

Healthcare shouldn't be a luxury.

Getting the high-quality medical care we need helps us stay healthy and live longer. It also lowers the amount of lost days of productivity, learning, and earning an income. **When we focus on prevention**—getting proactive healthcare before we're in an emergency situation—**our community is even healthier.**

Not everyone can get insurance.

People who have insurance are more likely to get the healthcare services and medication they need when they need it. However, insurance can be complex, tied to employment, and is sometimes not financially doable. Residents who don't have insurance for any number of reasons may not be able to live healthy lives.

People Covered by Insurance



Have Health Insurance

93.4%

People

Loup Basin Public Health Department

92.6%

People

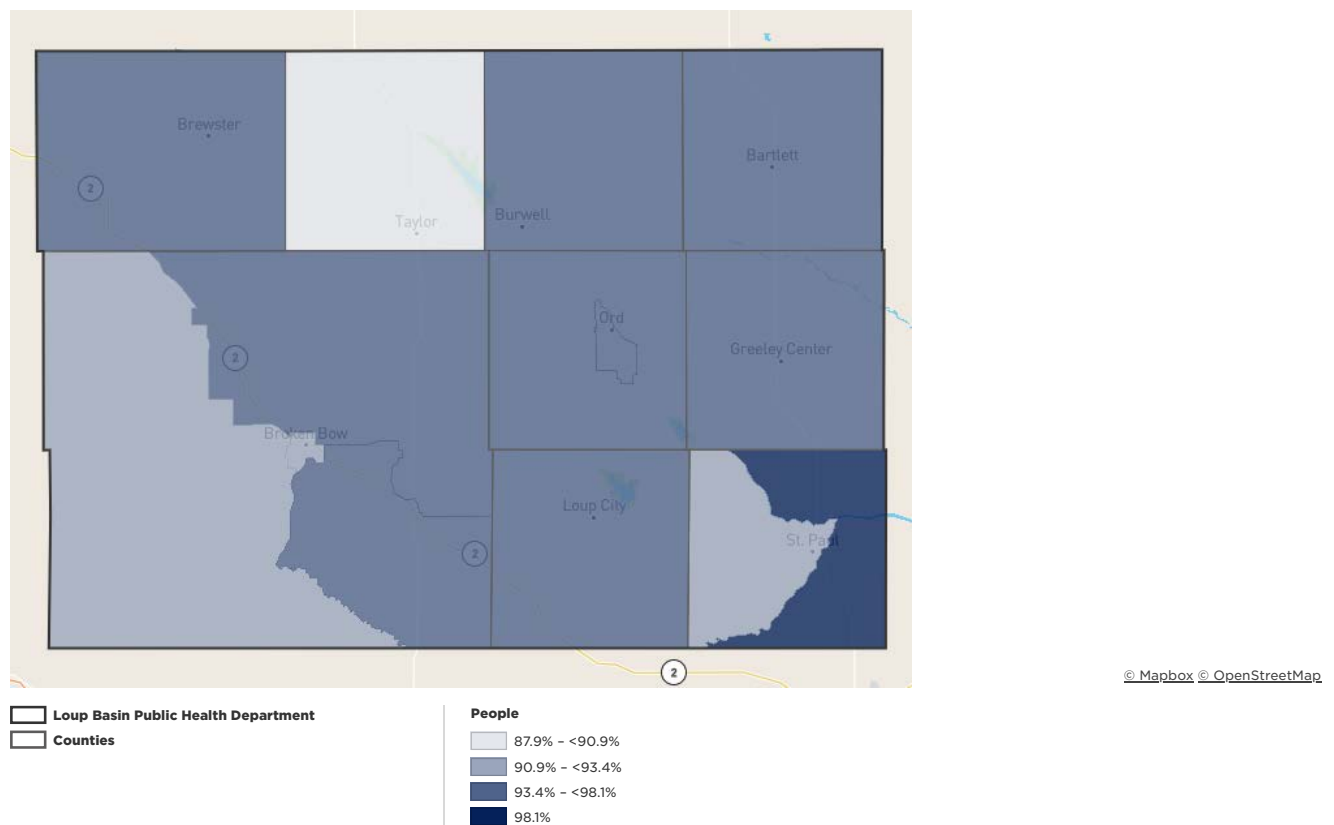
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 People With Health Insurance
Blaine County, NE	94.3%
Custer County, NE	92.8%
Garfield County, NE	94.5%
Greeley County, NE	95.5%
Howard County, NE	93%
Loup County, NE	87.9%
Sherman County, NE	94.1%
Valley County, NE	94%
Wheeler County, NE	95.4%
Loup Basin Public Health Department	93.4%
Nebraska	92.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Health Insurance Coverage



Sources: US Census Bureau ACS 5-year 2019-2023

People Covered by Insurance by Race/Ethnicity

Insurance Status by Race/Ethnicity

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼
2019-2023 Insured Asian People	95.8%	93%	No data	50%	No data	No data	No data
2019-2023 Insured Black People	57.5%	86.8%	No data	100%	0%	25%	6.1%
2019-2023 Insured Hispanic or Latino People	76.9%	80.3%	No data	77.3%	100%	100%	70.1%
2019-2023 Insured Multiracial People	87.5%	86.3%	No data	81.9%	57.9%	98.9%	99.7%
2019-2023 Insured Native American People	92.7%	79.7%	No data	100%	No data	84.6%	100%
2019-2023 Insured Native Hawaiian and Pacific Islander People	100%	84.4%	No data	100%	No data	No data	No data
2019-2023 Insured Other People	77.8%	78.1%	No data	93.3%	100%	100%	47.1%
2019-2023 Insured White (Not Hispanic or Latino) People	94.3%	95%	94.3%	93.6%	94.9%	95.8%	93.9%

Sources: US Census Bureau ACS 5-year 2019-2023

Note: Unless otherwise indicated, data for each group includes both Hispanic or Latino people and non-Hispanic or Latino people.

People Covered by Insurance by Age

Health Insurance Status by Age

▲▼ Geography	2019-2023 Insured People Under Age 6 ▲▼	2019-2023 Insured People Ages 6 to 18 ▲▼	2019-2023 Insured People Ages 19 to 64 ▲▼	2019-2023 Insured People Ages 65+ ▲▼
Loup Basin Public Health Department	98.3%	93%	90.2%	99.4%
Nebraska	95.8%	94.7%	89.5%	99.4%
Blaine County, NE	100%	100%	87.7%	100%
Custer County, NE	97.9%	93.1%	89%	99.9%
Garfield County, NE	100%	91.1%	92%	100%
Greeley County, NE	96%	99.2%	92.2%	99.5%
Howard County, NE	100%	88.5%	91.8%	97.4%
Loup County, NE	100%	91.5%	79.4%	100%
Sherman County, NE	97.6%	95.2%	90.4%	99.7%
Valley County, NE	99.3%	96.4%	89.7%	100%
Wheeler County, NE	91.5%	92.3%	93.7%	100%

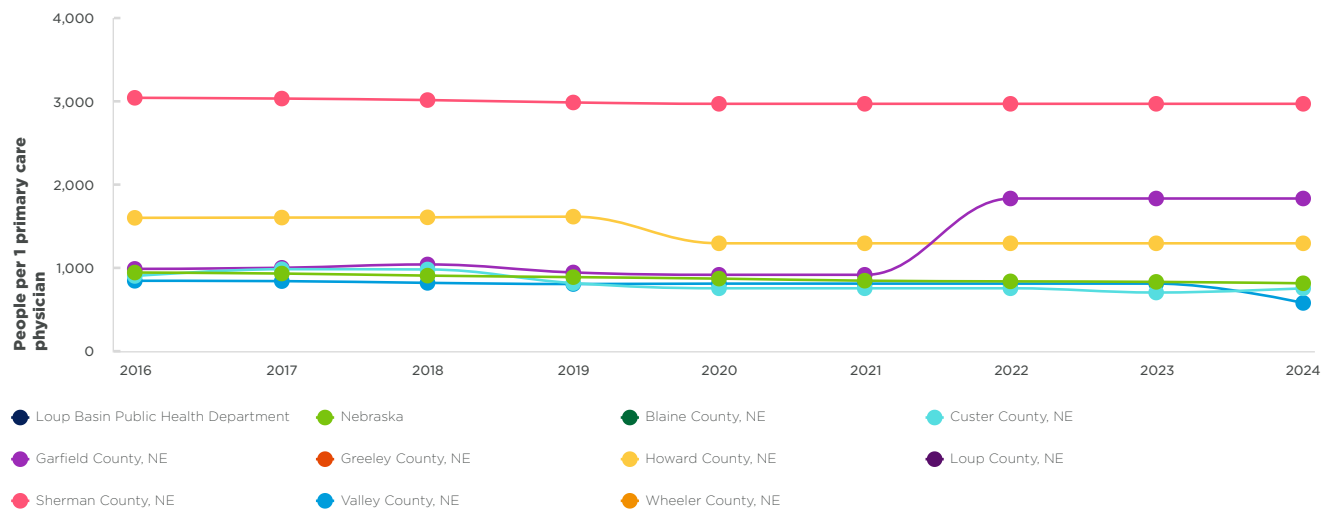
Sources: US Census Bureau ACS 5-year 2019-2023

Primary care is the first line of defense.

A primary care provider is a doctor or practitioner who can look at your health as a whole, managing your care and sometimes even preventing the need for medical specialists. Having a primary care provider leads to positive health outcomes because it often includes more proactive health care visits, such as annual check-ups. Creating more

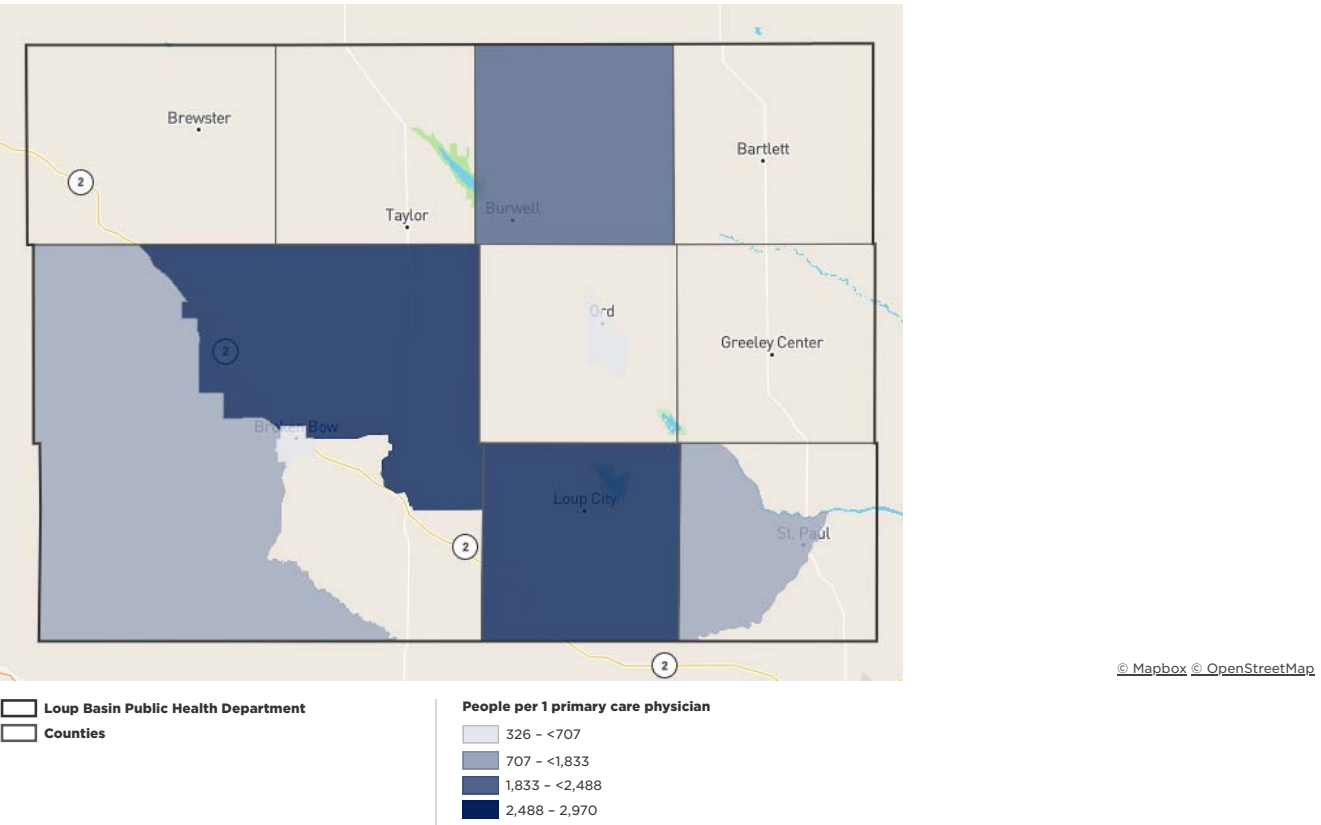
opportunities for relationships with primary care providers helps us focus on prevention, rather than costly treatment.

Primary Care Physician Ratio



Sources: NPPES NPI

Primary Care Physician Ratio



Sources: NPPES NPI 2024

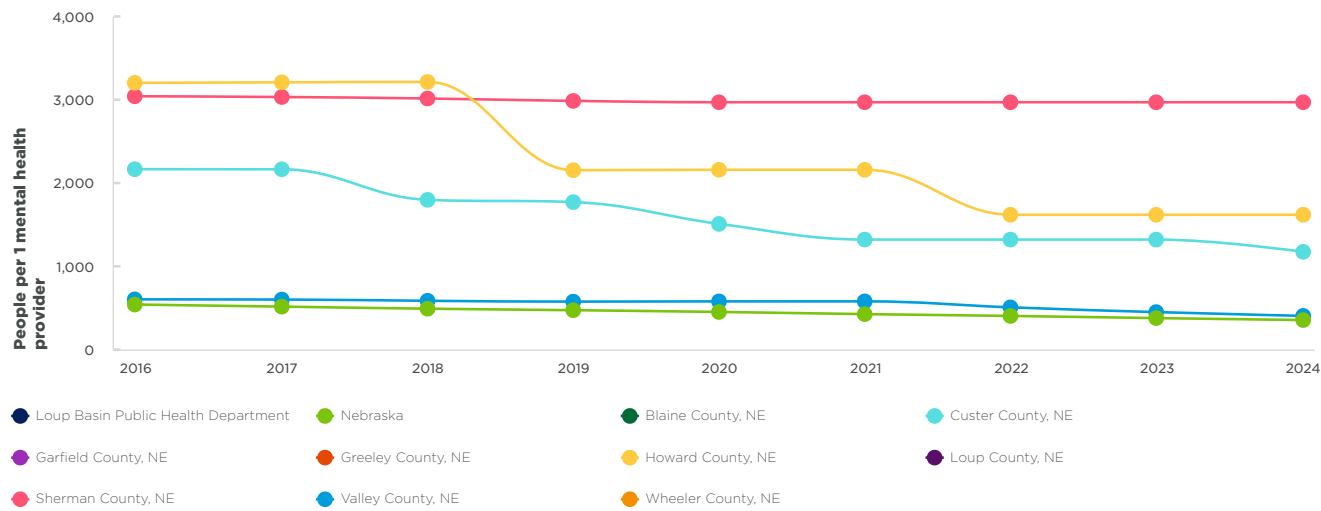
Areas with no data have 0 primary care physicians.

Mental health should be equal to physical health.

Mental healthcare should be easier to find in our community, as mental and physical health go hand-in-hand. We can't focus on one without the other. While healthcare access in general can be a challenge, mental healthcare is especially difficult because of a lack of services or social stigmas that still exist. We don't think twice about seeking medical care for a broken arm or other physical need, yet many people delay getting help for their mental health because of outdated ideas about why it happens, what it means, and who struggles with it. 1 in 5 adults in the U.S. live with mental illness. In addition to those with diagnosed conditions, many people can benefit from mental health services at some point in life.

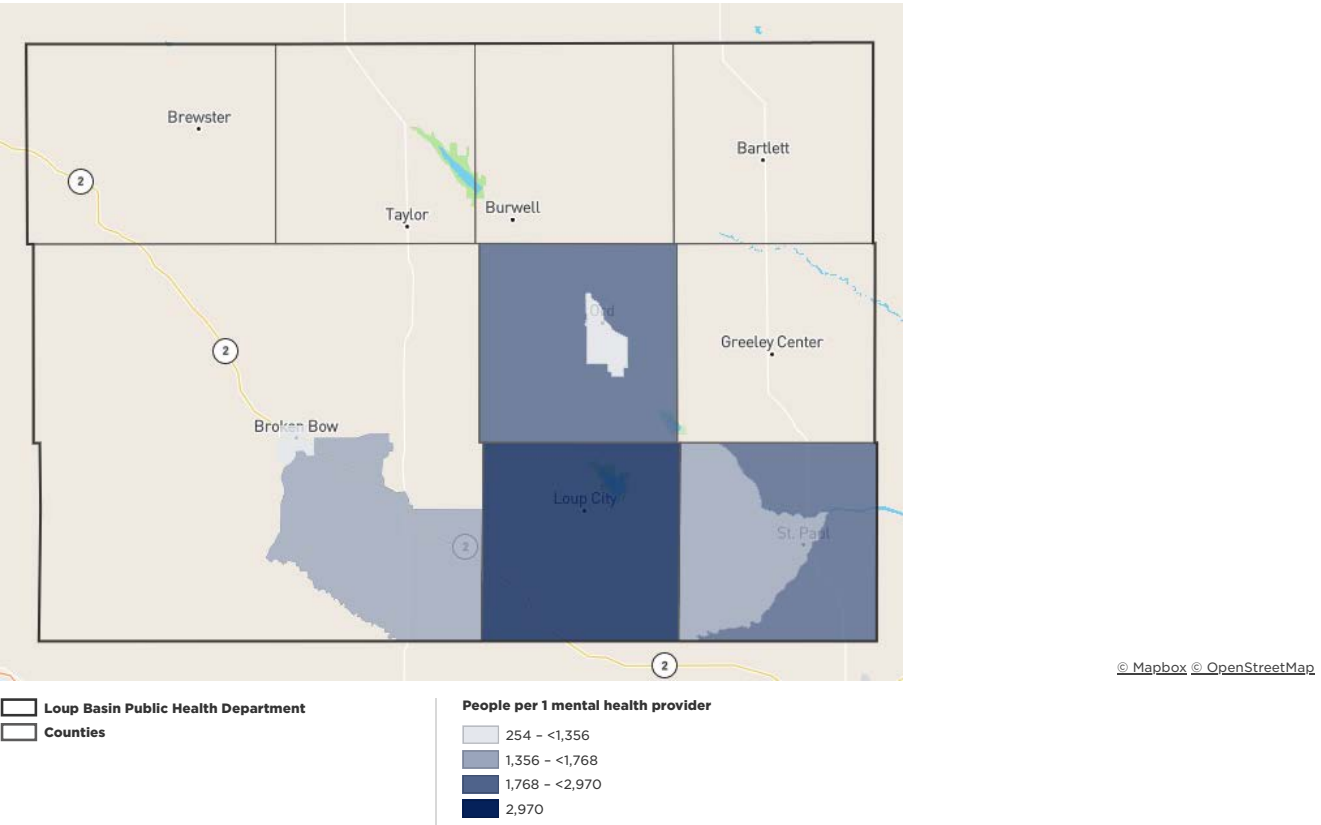
The more we talk about mental health, share resources, and remove barriers for people to access mental health providers, the healthier our community will be.

Mental Health Provider Ratio



Sources: NPPES NPI

Mental Health Provider Ratio



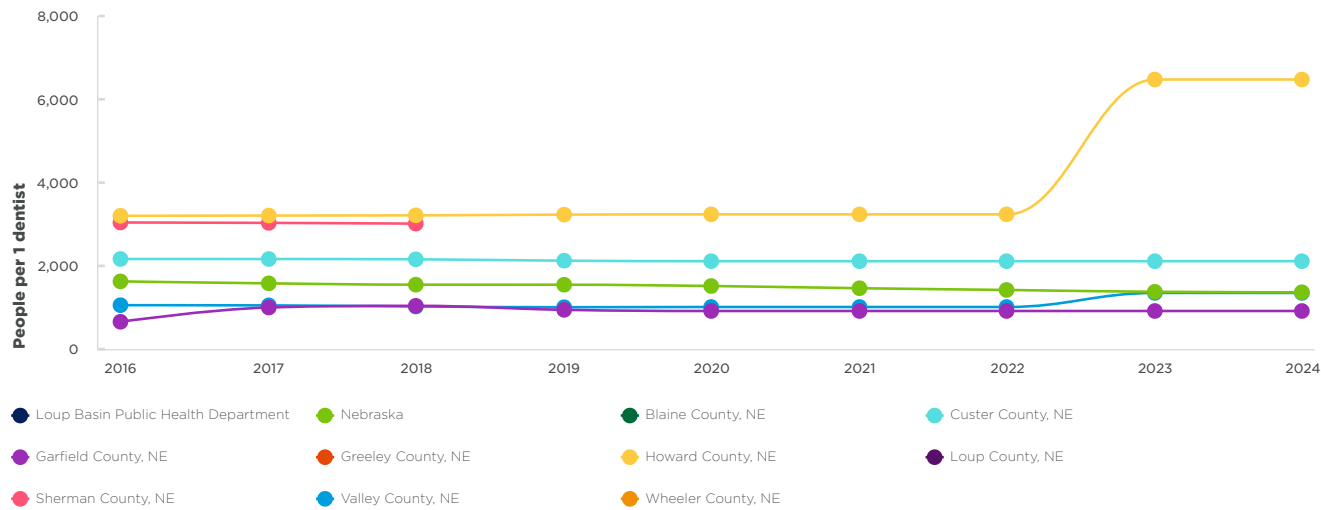
Sources: NPPES NPI 2024

Areas with no data have 0 mental health providers.

Dental health highlights the root of the problem.

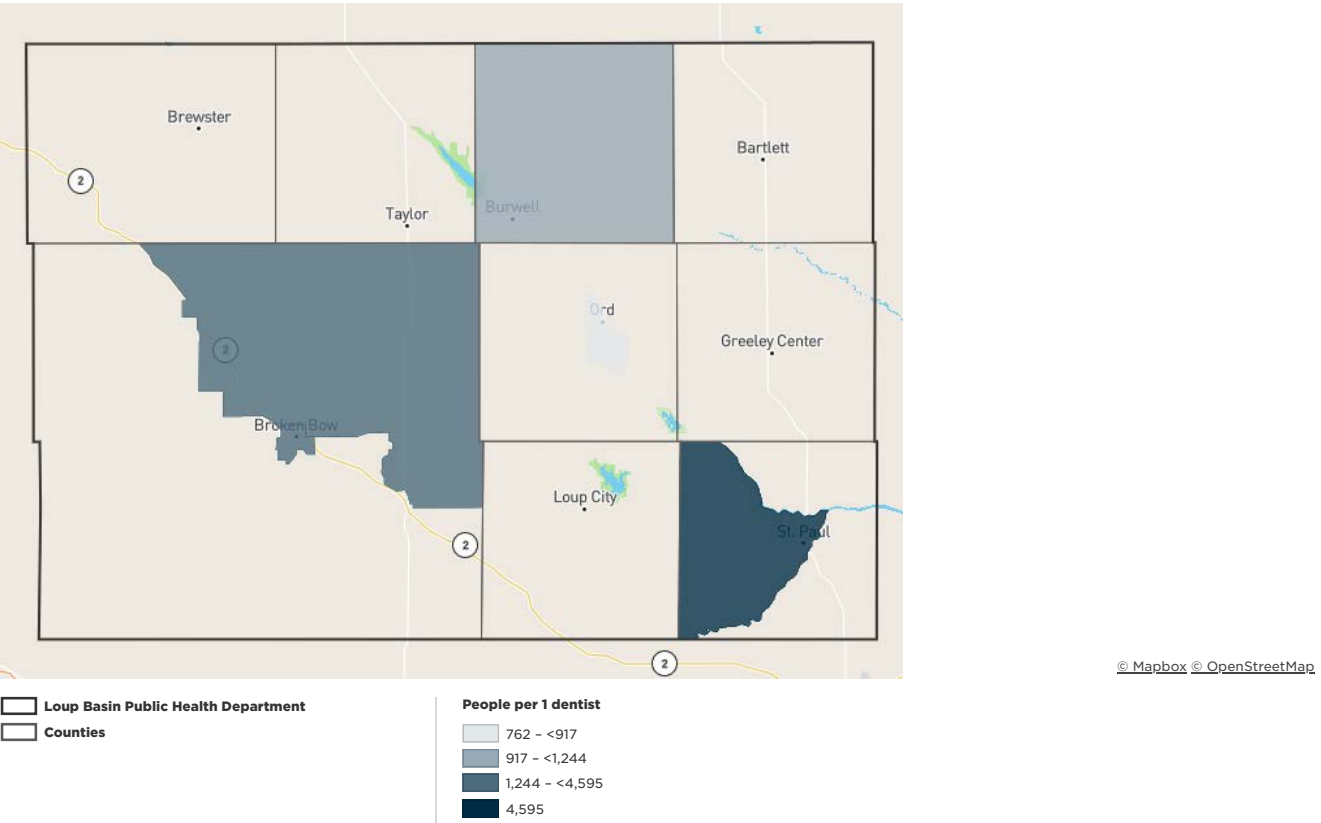
Dental health doesn't just tell us about proper brushing of teeth and gums. Poor dental health can point to social inequalities, as underserved populations are more likely to have greater dental needs. Poor dental health is also linked with other diseases, such as diabetes and obesity, because they share risk factors such as smoking or sugary diets. Increasing dental care services in our community is another way to improve health.

Dentist Ratio



Sources: NPPES NPI

Dentist Ratio



Sources: NPPES NPI 2024

Areas with no data have 0 dentists.

Learn more:

1. Institute of Medicine (US) Committee on the Consequences of Uninsurance. "3. Effects of Health Insurance on Health." Care Without Coverage: Too Little, Too Late. National Academies Press (US). 2002. <https://www.ncbi.nlm.nih.gov/books/NBK220636/>
2. "Access to Primary Care." Healthy People 2020. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/access-to-primary>.
3. Coombs, Nicholas C., et al. "Barriers to Healthcare Access among U.S. Adults with Mental Health Challenges: A Population-Based Study." SSM - Population Health, vol. 15, June 2021, p. 100847. PubMed Central, <https://doi.org/10.1016/j.ssmph.2021.100847>.
4. Knaak, Stephanie, et al. "Mental Illness-Related Stigma in Healthcare." Healthcare Management Forum, vol. 30, no. 2, Mar. 2017, pp. 111-16. PubMed Central, <https://doi.org/10.1177/0840470416679413>.
5. "Mental Illness." National Institute of Mental Health (NIMH). <https://www.nimh.nih.gov/health/statistics/mental-illness>.

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Loup Basin
PUBLIC HEALTH DEPARTMENT

Loup Basin Public Health Department Community Health Assessment

Maternal and Prenatal Care

WHERE YOU LIVE MATTERS:
MATERNITY CARE IN
NEBRASKA

INTRODUCTION

With over 3.5 million births in the United States annually, and rising rates of maternal mortality and morbidity, there is ample opportunity to improve maternal outcomes across the country.¹ More than 2 million women of childbearing age live in maternity care deserts, areas without access to birthing facilities or maternity care providers. Access to maternity care is essential for preventing poor health outcomes and eliminating health disparities. This report expands on the 2022 Nowhere to Go: Maternity Care Deserts Across the U.S. report² by taking a deeper dive into state level data and examining additional barriers that impact access to care. This data can be used to inform policies and practice recommendations in each state.

This report presents data on several important factors: levels of maternity care access and maternity care deserts by county; distance to birthing hospitals; availability of family planning services; community level factors associated with prenatal care usage as well as the burden and consequences of chronic health conditions across the state. While not an exhaustive list, each of these topics contribute to the complexity of maternity care access in each state. Working to improve access to maternity care by bringing awareness to maternity care deserts and other factors that limit access is one way in which March of Dimes strives to reduce preventable maternal mortality and morbidity for all pregnant people.

KEY FINDINGS

- In Nebraska, 51.6 percent of counties are defined as maternity care deserts compared to 32.6 percent in the U.S.
- 15.9 percent of women had no birthing hospital within 30 minutes compared to 9.7 percent in the U.S.
- Overall, women in Nebraska have a very high vulnerability to adverse outcomes due to the availability of reproductive healthcare services.
- 12.7 percent of birthing people received no or inadequate prenatal care, less than the U.S. rate of 14.8 percent.
- Women with chronic health conditions have a 63 percent increased likelihood of preterm birth compared to women with none.

ACCESS TO MATERNITY CARE IN NEBRASKA

Access to care during pregnancy and around the time of birth is not consistently available across the country. Hospital closures and a shortage of providers are driving changes in maternity care access, especially within rural areas and among Black, Indigenous, and people of color (BIPOC).³ The level of maternity care access within each county is classified across Nebraska by the availability of birthing facilities, maternity care providers, and the percent of uninsured women (see table). The map shows that in Nebraska, 51.6 percent of counties are defined as maternity care deserts compared to 32.6 percent of counties in the U.S. overall.

FINDINGS

- In Nebraska, there was a 8% decrease in the number of birthing hospitals between 2020 and 2019.
- In Nebraska, there were 2,073 babies born in maternity care deserts, 8.4% of all births.
- 22.7% of babies were born to women who live in rural counties, while 7.7% of maternity care providers practice in rural counties in Nebraska.



DEFINITIONS OF MATERNITY CARE DESERT AND LEVEL OF MATERNITY CARE ACCESS

Definitions	Maternity care deserts	Low access	Moderate access	Full access*
Hospitals and birth centers offering obstetric care	zero	<2	<2	≥2
Obstetric providers (obstetrician, family physician*, CNM/CM per 10,000 births)	zero	<60	<60	≥60
Proportion of women 18-64 without health insurance	any	≥10%	<10%	any



Sources: U.S. Health Resources and Services Administration (HRSA), Area Health Resources Files, 2022; American Board of Family Medicine, 2017-2020; National Center for Health Statistics, 2021 final natality data.

Note: CNM/CM = certified nurse midwives/certified midwives. *A county is full access if it meets one or more of the criteria. †Includes family physicians who provide obstetric care.

WHERE YOU LIVE MATTERS: MATERNITY CARE DESERTS AND THE CRISIS OF ACCESS AND EQUITY

March of Dimes recommends state policy actions that address access to care; see: <https://marchofdimes.org/mcdr-ne>

For details on data sources and calculations, see Technical Notes: <https://www.marchofdimes.org/peristats/maternitycaretechnotes>

NEBRASKA

DISTANCE TO MATERNITY CARE

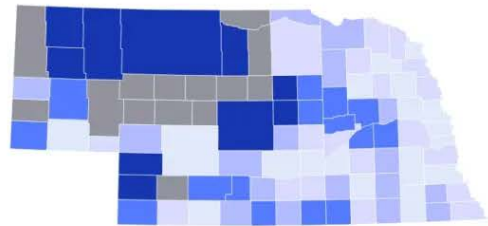
The farther a woman travels to receive maternity care, the greater the risk of maternal morbidity and adverse infant outcomes, such as stillbirth and NICU admission.^{4,5} Furthermore, longer travel distances to care can cause financial strain on families and increased prenatal stress and anxiety.⁶ The distance a woman must travel to access care becomes a critical factor during pregnancy, at the time of birth, and in the case of emergencies. Nationwide closures of birthing hospitals have contributed to increased distance and travel time to care, especially in rural areas.⁶

Mapping software was utilized to calculate distance, in miles and minutes, under normal traffic conditions and using real-world travel routes. The map indicates the average distance to the closest birthing hospital throughout Nebraska. Commonly used thresholds of 30- and 60-minute driving times were applied to measure the percent of birthing people with timely access to care.⁴ This information can help identify areas where resources are needed to improve access to care. Overall, in the U.S. women travel 9.7 miles to their nearest birthing hospital.

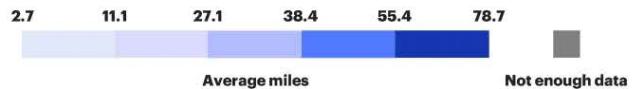
FINDINGS

- In Nebraska, women travel 12.2 miles and 16.5 minutes, on average, to their nearest birthing hospital.
- Women living in counties with the highest travel times (top 20 percent) could travel up to 78.7 miles and 79.7 minutes, on average, to reach their nearest birthing hospital.
- Under normal traffic conditions, 2.3% of women live over 60 minutes from their nearest birthing hospital compared to 1.0% in the U.S.
- 15.9% of women in Nebraska had no birthing hospital within 30 minutes.
- In rural areas across Nebraska, 60.3% of women live over 30 minutes from a birthing hospital compared to 3.2% of women living in urban areas.
- Women living in maternity care deserts traveled 3.3 times farther than women living in areas with full access to maternity care in Nebraska.

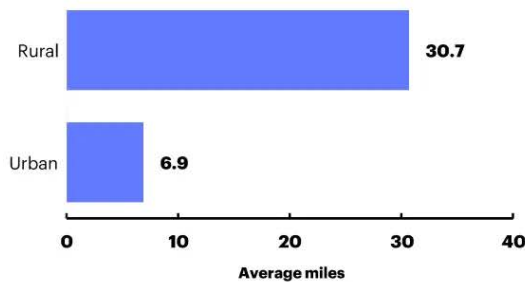
DISTANCE TO BIRTHING HOSPITAL BY COUNTY



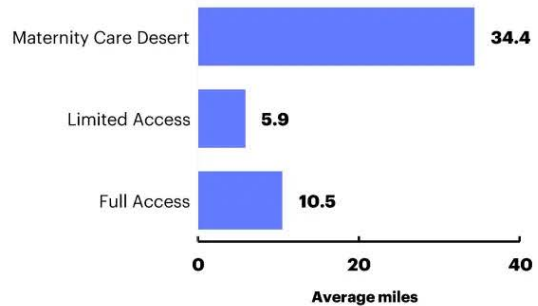
On average, women in Nebraska travel 12.2 miles to the nearest birthing hospital.



DISTANCE TO CARE BY RURALITY



DISTANCE TO CARE BY MATERNITY CARE ACCESS



Sources: Healthcare Cost and Utilization Project State Inpatient Database, Nebraska. Agency for Healthcare Research and Quality, 2019. Web. 1 Nov 2022. American Hospital Association, 2021; American Board of Family Medicine, 2017-2020; U.S. Health Resources and Services Administration (HRSA), Area Health Resources Files, 2022.

WHERE YOU LIVE MATTERS: MATERNITY CARE DESERTS AND THE CRISIS OF ACCESS AND EQUITY

March of Dimes recommends state policy actions that address access to care; see: <https://marchofdimes.org/mcdr-ne>
For details on data sources and calculations, see Technical Notes: <https://www.marchofdimes.org/peristats/maternalcaretechnotes>

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NEBRASKA

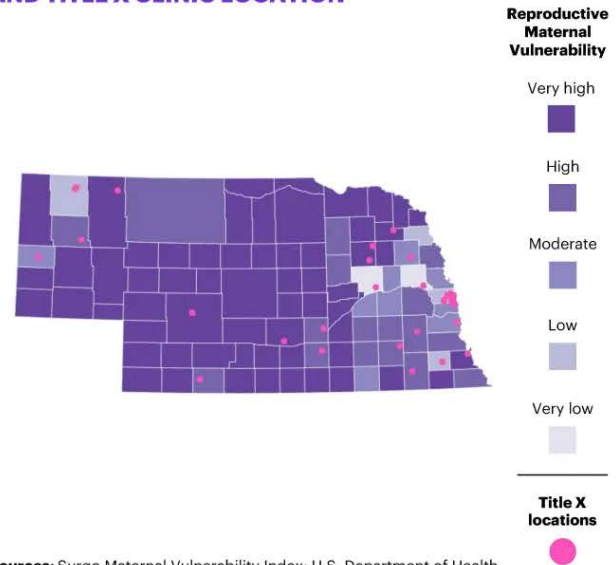
AVAILABILITY OF FAMILY PLANNING SERVICES

Access to family planning services allows for people to achieve their goals around having children, including the timing of and spacing between pregnancies.⁷ An unexpected pregnancy or too little time between pregnancies can lead to serious health consequences, including preterm birth, depression, and anxiety.^{8,9} Providing access to affordable contraceptives is a strategy to help people attain their family planning goals.¹⁰ Title X clinics are federally funded healthcare sites that provide low-cost reproductive healthcare services including contraceptives, wellness exams, and breast and cervical cancer screenings.¹¹ The map displays Title X locations and areas where women are vulnerable to poor outcomes due to lack of access to reproductive health services. County level risk data are derived from Surgo's U.S. Maternal Vulnerability Index (MVI), where a darker color indicates greater vulnerability.¹² Overall, women in Nebraska have a very high vulnerability to adverse outcomes due to the availability of reproductive healthcare services.

FINDINGS

- There are 10.4 Title X clinics per 100,000 women in Nebraska compared to 5.3 per 100,000 in the U.S. overall.
- Women living in 83.9% of counties in Nebraska have a very high or high vulnerability to adverse outcomes.
- On average, people living in maternity care deserts in Nebraska, travel 3.8 times farther to reach their nearest Title X clinic compared to people living in full access counties.

REPRODUCTIVE MATERNAL VULNERABILITY AND TITLE X CLINIC LOCATION



Sources: Surgo Maternal Vulnerability Index; U.S. Department of Health & Human Services, Office of Population Affairs, Title X Family Planning Directory (March 2023); United States Census Bureau, "S1301: Fertility," American Community Survey, 2017–2021. Web. 1 Nov 2022.

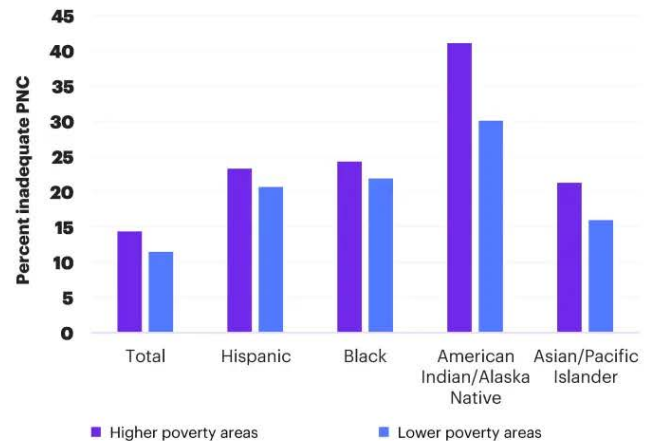
DISPARITIES IN PRENATAL CARE

Early and regular prenatal care (PNC) is an important strategy for reducing the risk of pregnancy complications and adverse birth outcomes.¹³ Historically, BIPOC have lower rates of adequate PNC and may be less likely to receive services such as important health screenings and appropriate monitoring of baby's growth.^{14,15} Community level factors, such as poverty, create barriers to accessing care that can worsen the disparity in PNC usage among BIPOC.¹⁶ The impact of poverty on PNC usage was assessed by examining the percent of women receiving inadequate PNC in areas of high and low poverty. In Nebraska, 12.7 percent of women received inadequate PNC compared to 14.8 percent in the U.S.

FINDINGS

- 1.4% of BIPOC did not receive PNC in areas of high poverty.
- Among BIPOC, those living in areas of high poverty have a 35% increased likelihood of inadequate PNC when compared to those living in areas of low poverty.
- American Indian/Alaska Native women living in areas of high poverty are 1.4 times more likely to receive inadequate PNC compared to those in areas of low poverty.

INADEQUATE PRENATAL CARE BY RACE/ETHNICITY AND POVERTY



Sources: National Center for Health Statistics, 2019-2021 final natality data; United States Census Bureau, "B13010," American Community Survey, 2021. Web. Nov 2022.

Note: Inadequate PNC is defined as no prenatal care or care that began during or after the fifth month of pregnancy or that included less than half of the appropriate number of visits for the infant's gestational age. Missing groups are suppressed.

WHERE YOU LIVE MATTERS: MATERNITY CARE DESERTS AND THE CRISIS OF ACCESS AND EQUITY

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NEBRASKA

CHRONIC HEALTH CONDITIONS AND PRETERM BIRTH

Having a chronic health condition before pregnancy increases the risk of pregnancy and postpartum complications. Preterm birth (PTB), a delivery before 37 weeks gestation, is one example of a complication that can lead to serious health impacts. The burden of chronic health conditions among birthing people is increasing across the U.S.^{17,18} Access to healthcare before, during, and after pregnancy is important for appropriate management of chronic health conditions. At the time of birth, women with chronic conditions and their babies may need access to higher-level care, such as specialized providers, hospitals with the ability to perform a Cesarean birth, or hospitals with NICUs. Examining the chronic health burden (CHB) across Nebraska and its relationship to adverse outcomes provides information needed to make important changes that can result in targeted resource allocation, prevention, and appropriate disease management.

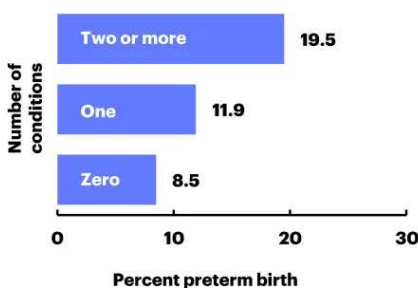
The percent of birthing people with one or more chronic conditions was calculated for each county in Nebraska and overall. The following conditions were included due to their availability in birth record data and established association with PTB: pre-pregnancy hypertension and diabetes, smoking, and being underweight or obese before pregnancy. The map describes the county level CHB in relation to the PTB rate. Areas shaded in purple have both a high CHB, greater than the overall state percent, and a high rate of PTB, defined as greater than the national target of 9.4 percent.¹⁹ In Nebraska, the PTB rate was 10.8 percent, compared to 10.5 percent in the U.S. overall in 2021.

FINDINGS

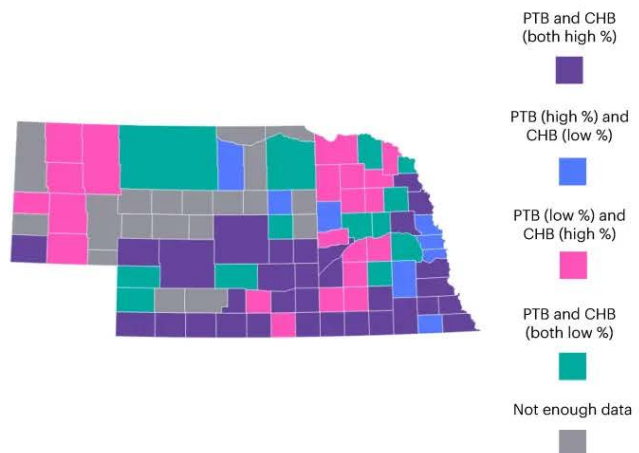
- In Nebraska, 38.5% of women had one or more chronic health conditions compared to 37.8% in the U.S. overall.
- Women with one or more chronic health conditions have a 63% increased likelihood of having a preterm birth compared to those without any chronic health conditions.
- 36.6% of counties in Nebraska have a high burden of chronic health conditions and a high rate of preterm birth.

CHRONIC HEALTH BURDEN (CHB) AND PRETERM BIRTH (PTB) BY COUNTY

PRETERM BIRTH BY NUMBER OF CHRONIC HEALTH CONDITIONS



Source: National Center for Health Statistics, 2017–2021 final natality data.



Note: The burden of chronic health conditions is the percent of birthing people in each county with one or more chronic conditions. Data for counties with less than 10 preterm births or women with chronic health conditions are excluded from map.

SUMMARY

All women deserve healthcare which is safe, effective, timely, efficient and equitable. Consistent and equitable access to maternity care helps women maintain optimal health as well as reduce the risk of experiencing complications during pregnancy and the postpartum period. Several factors influence maternity care access for women across the U.S. By assessing distance to care and the availability of maternity care providers, hospitals and family planning services, this report provides insight into several physical components that affect a person's ability to receive care. In addition, examining community level factors associated with access to care and identifying vulnerable populations provides greater context around barriers to receiving appropriate care. Together this information can lead decision makers, public health professionals, clinicians and researchers to advocate for policies and resources that increase maternity care access across each state.

By addressing these factors, states may move closer to eliminating pregnancy-related deaths and complications. Telehealth, through various platforms, equips maternal health providers with the tools to better facilitate care before, during and after pregnancy and has been shown to not only increase access but also improves patient engagement and treatment.²⁰ March of Dimes fully supports Congress, governmental regulating agencies and states to act and make telehealth provisions balanced and permanent. Evidence-based telehealth services and other innovative solutions are explored in greater depth on page 5.

WHERE YOU LIVE MATTERS: MATERNITY CARE DESERTS AND THE CRISIS OF ACCESS AND EQUITY

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For details on data sources and calculations, see Technical Notes: <https://www.marchofdimes.org/peristats/maternalcaretechnotes>

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References:

March of Dimes. (2023). *Where You Live Matters: Maternity Care Deserts and the Crisis of Access and Equity in Nebraska* [PDF]. March of Dimes. <https://www.marchofdimes.org/peristats/assets/s3/reports/mcd/Maternity-Care-Report-Nebraska.pdf>

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Prevention is better than treatment.

We've heard that finding a problem before it gets worse is a great way to improve our health. This reduces our risk for disease and death, but many people still don't get this kind of healthcare. The barriers might include cost, not having a relationship with a primary care provider, and distance from healthcare services. Educating people about the benefits of proactive healthcare and reducing the cost, distance, and time burden for them to receive this care can improve individual lives and the burden on our healthcare system.

Doctor Checkup in Past Year



Doctor Checkup in Past Year

75.7%

of Adults

Loup Basin Public Health Department

74.1%

of Adults

Nebraska

Sources: CDC BRFSS PLACES 2022

This data represents the proportion of adults who report having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, condition) in the previous year.

Geography	2022 Doctor Checkup in Past Year Among Adults
Blaine County, NE	74.9%
Custer County, NE	74.6%
Garfield County, NE	77.1%
Greeley County, NE	74.9%
Howard County, NE	76%
Loup County, NE	77.4%
Sherman County, NE	75.3%
Valley County, NE	75.5%
Wheeler County, NE	76.4%
Loup Basin Public Health Department	75.7%
Nebraska	74.1%

Sources: CDC BRFSS PLACES 2022

Loup Basin Public Health Department
 Counties

Adults
 74.3% - <75.4%
 75.4% - <75.8%
 75.8% - <76.6%
 76.6% - 77.2%

This data represents the proportion of adults who report having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, condition) in the previous year.

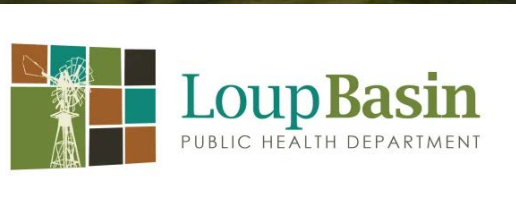
▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howar County, NE ▲▼
2022 Colorectal Cancer Screening Among Adults 50 to 75	65.1%	62.8%	65%	62.1%	66.7%	58.9%	62.4%
2020 Core Preventive Services for Men 65+	43.7%	49.3%	45.9%	41%	44.9%	46.7%	45.6%
2020 Core Preventive Services for Women 65+	35.1%	40.1%	35.5%	34.7%	33.7%	36.1%	38.6%
2022 Dental Visit Among Adults	64%	64.6%	61.1%	62.3%	68.8%	63.8%	66.1%
2020 Pap Smear Among Women 21 to 65	81.7%	81.5%	81.1%	80.5%	80.9%	79.5%	81.7%
2022 Mammography Among Women 50 to 74	73.8%	75.2%	73.5%	71.9%	78.3%	77.8%	76%

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Loup Basin Public Health Department Community Health Assessment

Health Equity

Health equity is the idea that all people should have the same access to the opportunities to lead healthy lives. It's the role of public health, healthcare providers, elected officials, and even community members to help remove the barriers that get in the way of everyone having a fair chance at a healthy life.

This report explores minority health related disparities in your area by examining the following social determinant of health domains:

1. **Economic Stability**
2. **Educational Attainment**
3. **Healthcare Access**
4. **Neighborhood & Built Environment**
5. **Social & Community Context**

Economic Stability: Health shouldn't depend on how much money you make.

Economic opportunity includes our ability to work in the community where we live, making enough money to buy what we need and some of what we want. This allows us to take care of our families, support other businesses in our neighborhood, and provide for ourselves.

Median Income of Householder by Race/Ethnicity

Geography	2019-2023 White	2019-2023 Black or African American	2019-2023 Hispanic or Latino	2019-2023 Alaska Native	2019-2023 Asian	2019-2023 Native Hawaiian and Other Pacific Islander
Loup Basin Public Health Department	\$65,955	\$38,750	\$80,933	\$98,250	No data	No data
Nebraska	\$77,418	\$48,201	\$65,399	\$52,121	\$83,105	No data
Blaine County, NE	\$61,250	No data	No data	No data	No data	No data
Custer County, NE	\$66,788	\$38,802	\$49,013	No data	No data	No data
Garfield County, NE	\$68,833	No data	No data	No data	No data	No data
Greeley County, NE	\$59,567	No data	No data	No data	No data	No data
Howard County, NE	\$74,754	No data	\$87,760	No data	No data	No data
Loup County, NE	\$54,205	No data	No data	No data	No data	No data
Sherman County, NE	\$63,110	No data	\$13,580	No data	No data	No data
Valley County, NE	\$58,902	No data	No data	No data	No data	No data
Wheeler County, NE	\$55,179	No data	\$99,375	No data	No data	No data

Sources: US Census Bureau ACS 5-year 2019-2023

Poverty

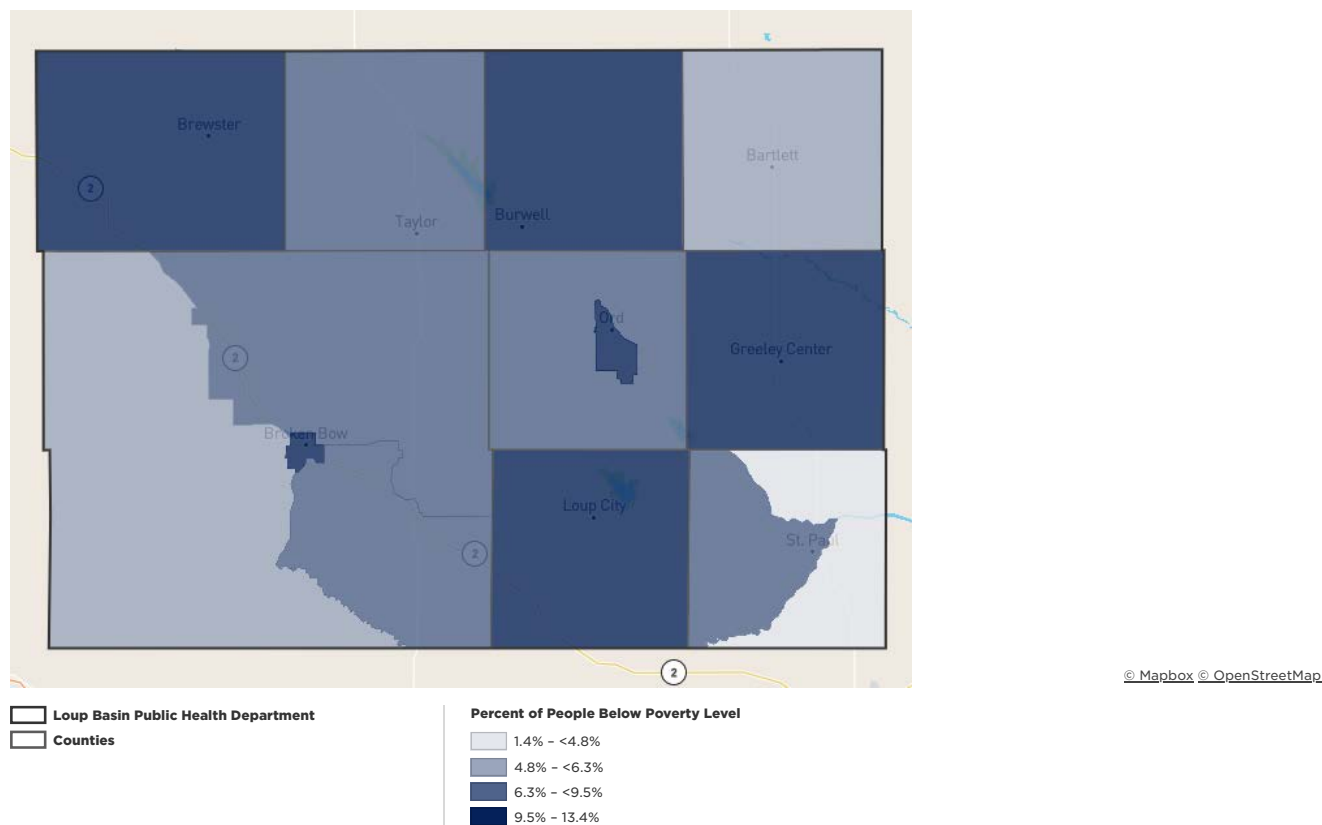
 **Total Population Below Poverty Level**
8.4%

Loup Basin Public Health Department

10.3%
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

People Below Poverty Level



Sources: US Census Bureau ACS 5-year 2019-2023

Unemployment

Unemployment Rate

2.6%

Loup Basin Public Health Department

3%
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

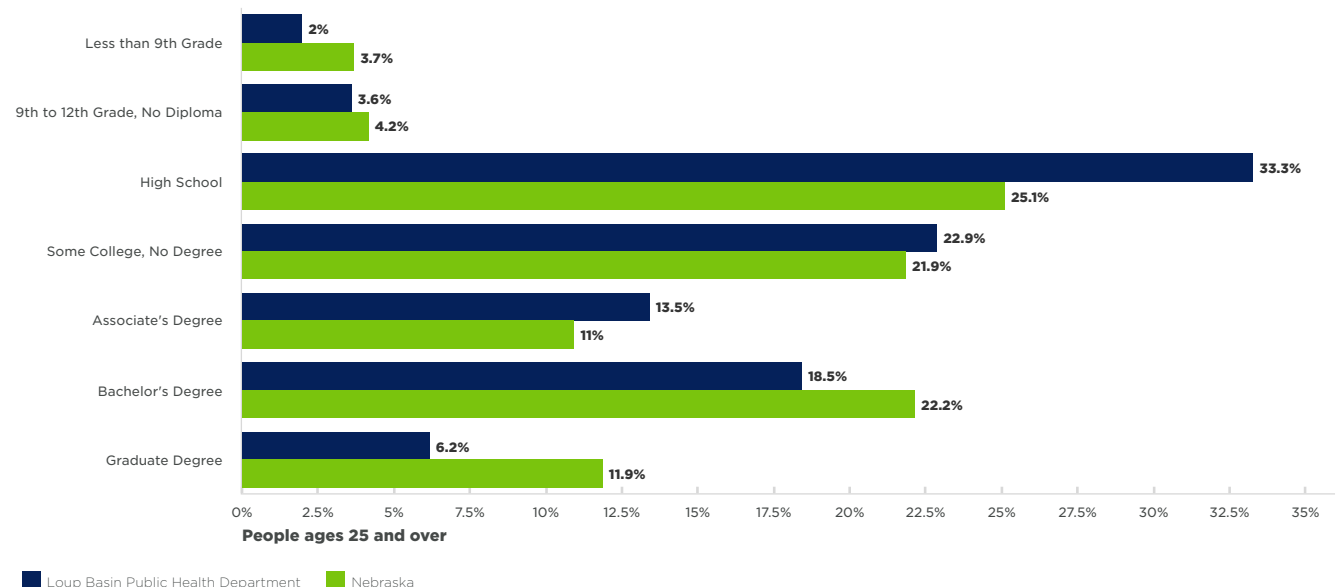
Geography	2019-2023
	Unemployment Rate
Blaine County, NE	1%
Custer County, NE	2.9%
Garfield County, NE	1.8%
Greeley County, NE	2.3%
Howard County, NE	3.4%
Loup County, NE	0%
Sherman County, NE	4.6%
Valley County, NE	0.4%
Wheeler County, NE	1.7%
Loup Basin Public Health Department	2.6%
Nebraska	3%

Sources: US Census Bureau ACS 5-year 2019-2023

Educational Attainment: Education opens doors. Let's unlock them.

Learning leads to opportunities – this has been widely studied over time. The more education a person is able to receive, the better their chances are for success, which includes health. People with more education are said to live longer, have fewer serious illnesses, have better mental health, and less stress and economic struggles.

Highest Level of Education Completed



Sources: US Census Bureau ACS 5-year 2019-2023

▲▼ Data Sources	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼	Loup County, NE ▲▼	Sherman County, NE
2019-2023 Less than 9th Grade	0.7%	2.3%	0.3%	3.3%	2.1%	0%	2.5%
2019-2023 9th to 12th Grade, No Diploma	3.3%	3.7%	4.2%	3.3%	2.7%	0%	6.2%
2019-2023 High School Degree	38.9%	31.4%	26.8%	37.7%	35.9%	33.3%	35.6%
2019-2023 Some College, No Degree	18.9%	21.6%	26%	19.3%	24.3%	20.5%	25.9%
2019-2023 Associate's Degree	12.6%	15.4%	10%	18.1%	12%	20.2%	10.9%
2019-2023 Bachelor's Degree	21.9%	18.7%	23.8%	12.8%	19%	17.9%	13.3%
2019-2023 Graduate Degree	3.7%	7%	8.9%	5.6%	3.9%	8.1%	5.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Bachelor's Degree or Higher by Race/Ethnicity

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE
2019-2023 Total	24.7%	34.1%	25.6%	25.6%	32.7%	18.4%	23%
2019-2023 Asian	4.8%	44.2%	No data	0%	No data	No data	No data
2019-2023 Black or African American	2.9%	21.1%	No data	3.8%	0%	0%	No data
2019-2023 Hispanic or Latino	24.7%	15.6%	No data	9.5%	100%	60.7%	19.4%
2019-2023 Multiracial	22.5%	26.1%	No data	15.8%	0%	22.2%	38.4%
2019-2023 Native American	9.1%	13.5%	No data	2.9%	No data	10%	0%
2019-2023 Native Hawaiian and Pacific Islander	0%	24%	No data	0%	No data	No data	No data
2019-2023 Other	25.4%	13.5%	No data	13.3%	No data	60.7%	0%
2019-2023 White (Not Hispanic or Latino)	24.9%	36.7%	25.6%	26.6%	32.9%	17.7%	22.7%

Sources: US Census Bureau ACS 5-year 2019-2023

Note: unless otherwise indicated, data for each group includes both Hispanic or Latino people and non-Hispanic or Latino people.

Healthcare Access: Healthcare shouldn't be a luxury.

Getting the high-quality medical care we need helps us stay healthy and live longer. It also lowers the amount of lost days of productivity, learning, and earning an income. **When we focus on prevention**—getting proactive healthcare before we're in an emergency situation—**our community is even healthier.**

People Covered by Insurance



Have Health Insurance

93.4%

People

Loup Basin Public Health Department

92.6%

People

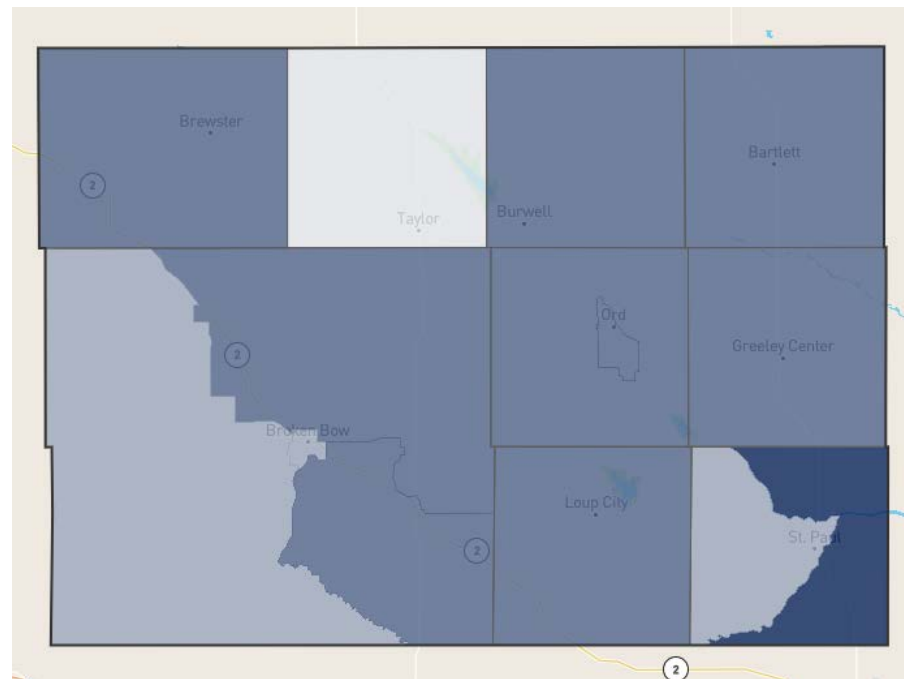
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023
	People With Health Insurance
Blaine County, NE	94.3%
Custer County, NE	92.8%
Garfield County, NE	94.5%
Greeley County, NE	95.5%
Howard County, NE	93%
Loup County, NE	87.9%
Sherman County, NE	94.1%
Valley County, NE	94%
Wheeler County, NE	95.4%
Loup Basin Public Health Department	93.4%
Nebraska	92.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Health Insurance Coverage



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☐ Loup Basin Public Health Department
☐ Counties

People

- 87.9% - <90.9%
- 90.9% - <93.4%
- 93.4% - <98.1%
- 98.1%

Sources: US Census Bureau ACS 5-year 2019-2023

People Covered by Insurance by Race/Ethnicity

Insurance Status by Race/Ethnicity

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼
2019-2023 Insured Asian People	95.8%	93%	No data	50%	No data	No data	No data
2019-2023 Insured Black People	57.5%	86.8%	No data	100%	0%	25%	6.1%
2019-2023 Insured Hispanic or Latino People	76.9%	80.3%	No data	77.3%	100%	100%	70.1%
2019-2023 Insured Multiracial People	87.5%	86.3%	No data	81.9%	57.9%	98.9%	99.7%
2019-2023 Insured Native American People	92.7%	79.7%	No data	100%	No data	84.6%	100%
2019-2023 Insured Native Hawaiian and Pacific Islander People	100%	84.4%	No data	100%	No data	No data	No data
2019-2023 Insured Other People	77.8%	78.1%	No data	93.3%	100%	100%	47.1%
2019-2023 Insured White (Not Hispanic or Latino) People	94.3%	95%	94.3%	93.6%	94.9%	95.8%	93.9%

Sources: US Census Bureau ACS 5-year 2019-2023

Note: Unless otherwise indicated, data for each group includes both Hispanic or Latino people and non-Hispanic or Latino people.

People Covered by Insurance by Age

Health Insurance Status by Age

▲▼ Geography	2019-2023 Insured People Under Age 6 ▲▼	2019-2023 Insured People Ages 6 to 18 ▲▼	2019-2023 Insured People Ages 19 to 64 ▲▼	2019-2023 Insured People Ages 65+ ▲▼
Loup Basin Public Health Department	98.3%	93%	90.2%	99.4%
Nebraska	95.8%	94.7%	89.5%	99.4%
Blaine County, NE	100%	100%	87.7%	100%
Custer County, NE	97.9%	93.1%	89%	99.9%
Garfield County, NE	100%	91.1%	92%	100%
Greeley County, NE	96%	99.2%	92.2%	99.5%
Howard County, NE	100%	88.5%	91.8%	97.4%
Loup County, NE	100%	91.5%	79.4%	100%
Sherman County, NE	97.6%	95.2%	90.4%	99.7%
Valley County, NE	99.3%	96.4%	89.7%	100%
Wheeler County, NE	91.5%	92.3%	93.7%	100%

Sources: US Census Bureau ACS 5-year 2019-2023

Neighborhood & Build Environment: Our neighborhoods should help, not harm.

Just as neighbors live in community with one another, our neighborhoods themselves should be a place of connection – physically, emotionally, and even digitally. **The ability to get where we need to go, breathe freely, enjoy life with others, and connect to the rest of the world online all add to our quality of life.**



People in Households with a Computer and Internet Subscription

87.8%

of People

Loup Basin Public Health Department

92.8%

of People

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 People With a Computer and Internet Subscription
Blaine County, NE	83.4%
Custer County, NE	87.3%
Garfield County, NE	88.6%
Greeley County, NE	90.2%
Howard County, NE	90%
Loup County, NE	90.2%
Sherman County, NE	85.6%
Valley County, NE	86.7%
Wheeler County, NE	81.1%
Loup Basin Public Health Department	87.8%
Nebraska	92.8%

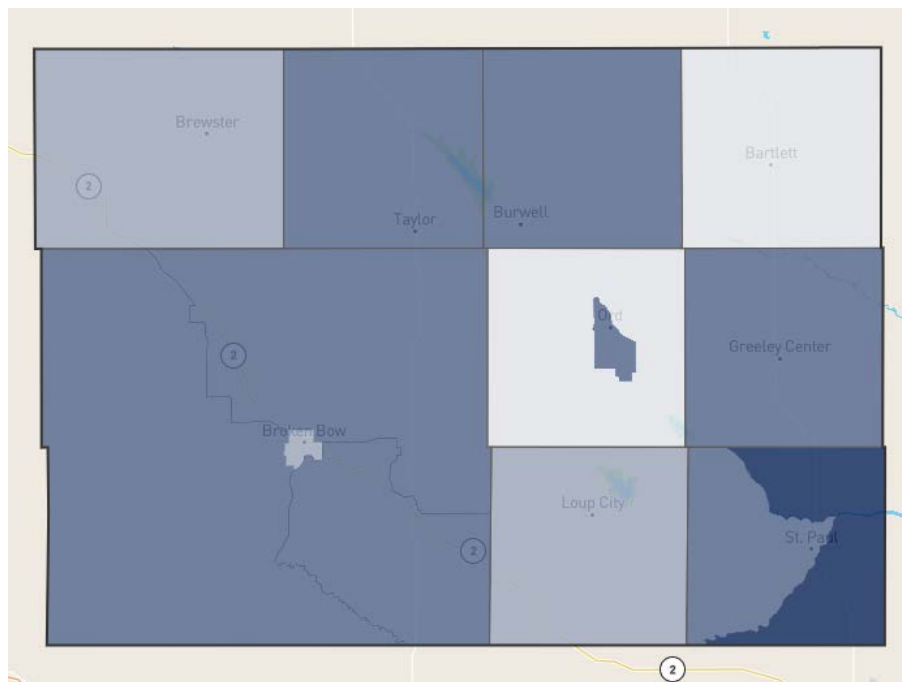
Sources: US Census Bureau ACS 5-year 2019-2023

Students with Access to a Computer and Internet by Grade Level

Geography	2019-2023 Pre-K to 4th Grade	2019-2023 5th to 8th Grade	2019-2023 9th to 12th Grade	2019-2023 Undergraduate or Higher
Loup Basin Public Health Department	94.5%	99.1%	94.7%	90.1%
Nebraska	96.6%	96.8%	96.8%	95.6%
Blaine County, NE	100%	100%	100%	42.9%
Custer County, NE	95.6%	97.9%	91.6%	92.7%
Garfield County, NE	81.8%	100%	95.3%	97.2%
Greeley County, NE	99.4%	99.1%	92.2%	97.3%
Howard County, NE	94.2%	100%	99.3%	99%
Loup County, NE	100%	100%	63.9%	100%
Sherman County, NE	98.2%	100%	100%	87.5%
Valley County, NE	93.3%	99%	97.6%	86.1%
Wheeler County, NE	98.2%	100%	100%	26.5%

Sources: US Census Bureau ACS 5-year 2019-2023

People in Households with a Computer and Internet Subscription



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Loup Basin Public Health Department
 Counties

People

	81.1% - <83.4%
	83.4% - <88.2%
	88.2% - <94.5%
	94.5%

Sources: US Census Bureau ACS 5-year 2019-2023

Social & Community Context: We're wired for connection.

Having social support isn't just good for our mental health—it can even affect our physical well-being. Social support makes up a big part of our **context**, the building block for many of our decisions related to health. As our world becomes more digitally connected, staying personally connected to the community around us is even more important for our health. Communities that provide access to mental health care providers and encourage and enable connection amongst families, friends, and neighbors are creating an environment where positive mental health can grow.

Overview



Seniors Living Alone

27.5%

People age 65+

Loup Basin Public Health Department

30.2%

People age 65+

Nebraska

Language Isolation: Limited English Speaking Households

0.9%

Households

Loup Basin Public Health Department

2.5%

Households

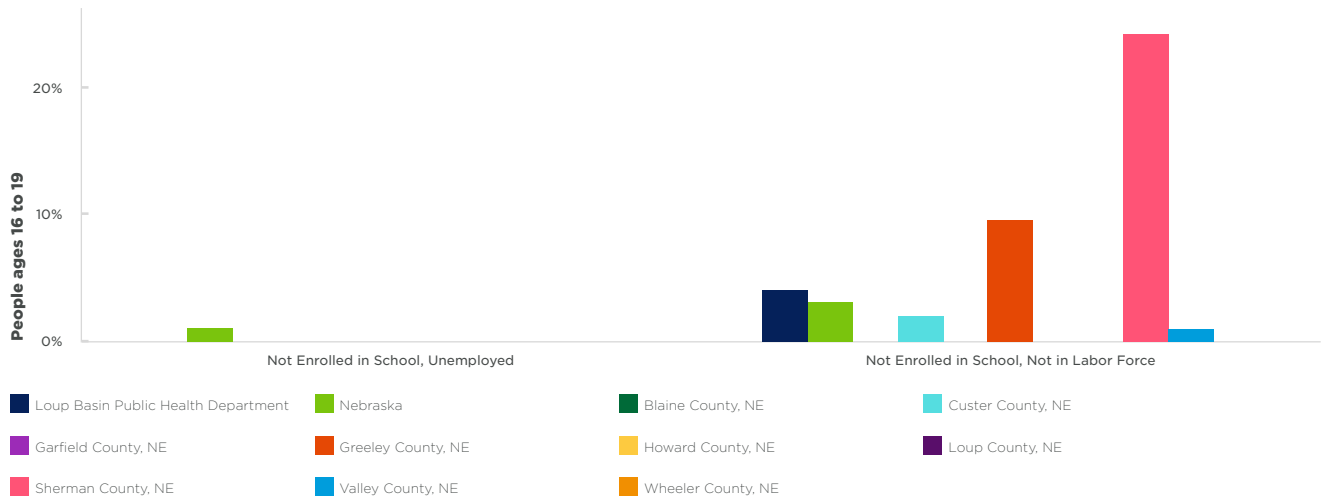
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Seniors Living Alone	2019-2023 Linguistic Isolation
Blaine County, NE	32.8%	0%
Custer County, NE	29.4%	2%
Garfield County, NE	22.4%	0%
Greeley County, NE	31.5%	0.2%
Howard County, NE	26.8%	0.5%
Loup County, NE	22.4%	0%
Sherman County, NE	29.3%	0%
Valley County, NE	23%	0.2%
Wheeler County, NE	26.5%	1.1%
Loup Basin Public Health Department	27.5%	0.9%
Nebraska	30.2%	2.5%

Sources: US Census Bureau ACS 5-year 2019-2023

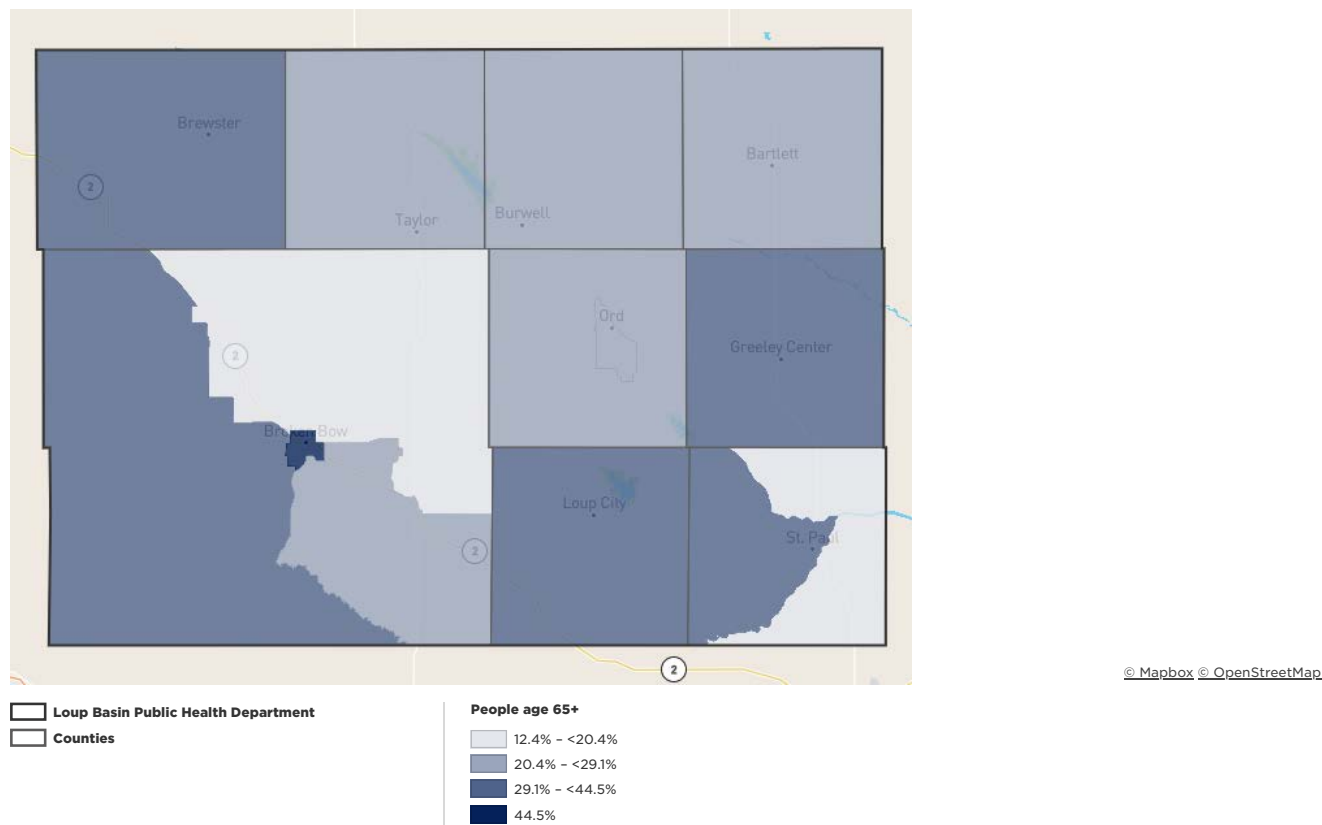
Disconnected Youth (Age 16-19)



Sources: US Census Bureau ACS 5-year 2019-2023

Map: Seniors Living Alone

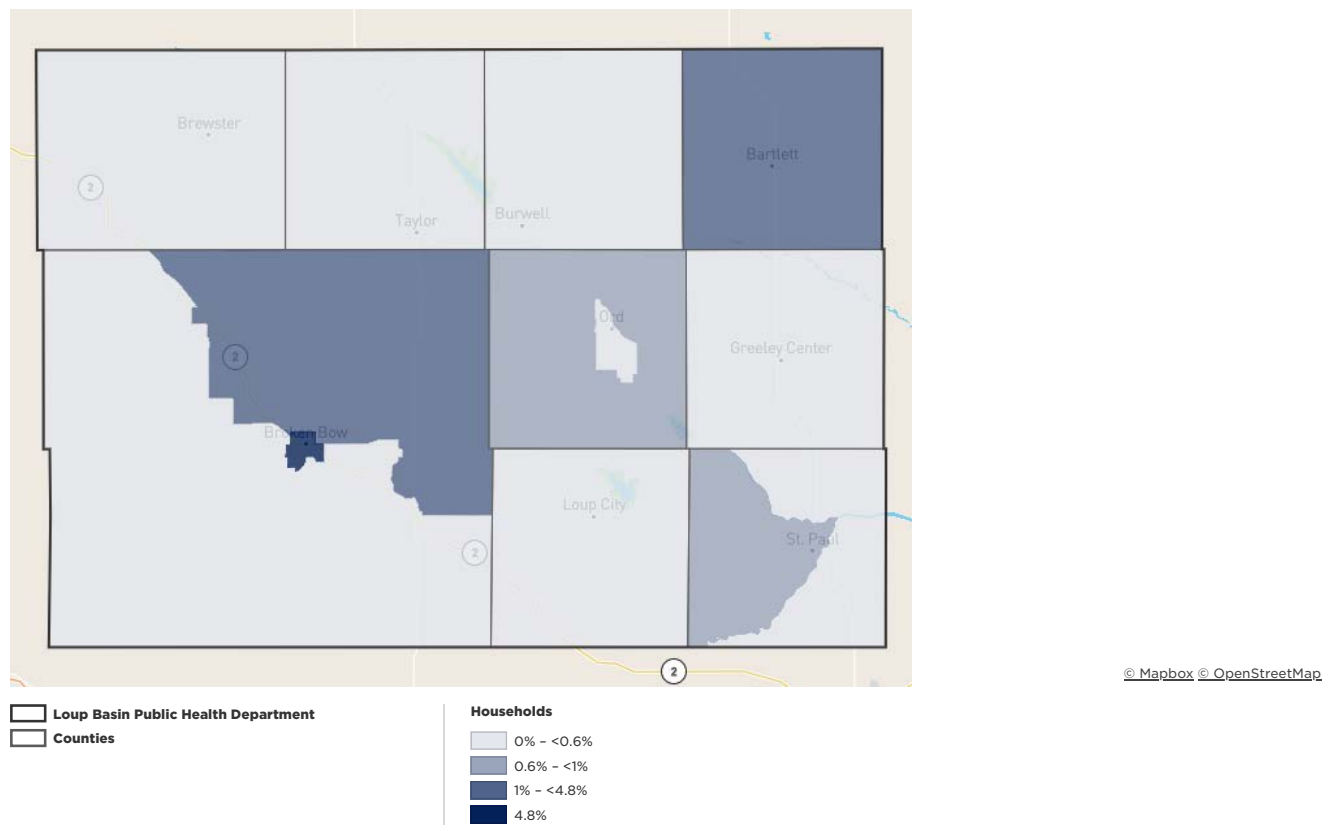
Seniors Living Alone



Sources: US Census Bureau ACS 5-year 2019-2023

Map: Language Isolation

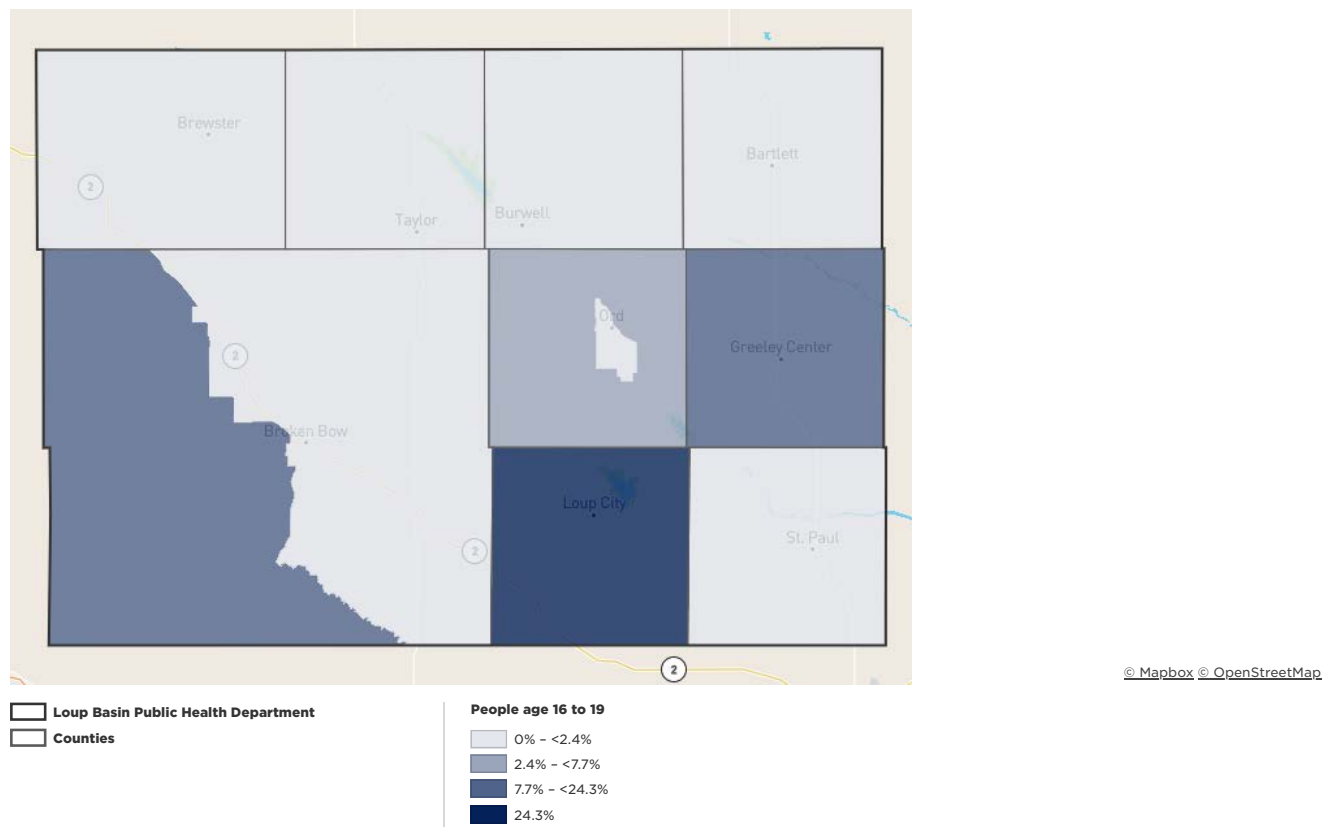
Language Isolation



Sources: US Census Bureau ACS 5-year 2019-2023

Map: Disconnected Youth

Disconnected Youth: Not in School or Labor Force



Sources: US Census Bureau ACS 5-year 2019-2023

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Loup Basin Public Health Department

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Loup Basin
PUBLIC HEALTH DEPARTMENT

Loup Basin Public Health Department Community Health Assessment

Social Determinants of Health

Key Indicators for Social Determinants of Health in Your Community

Public health professionals now know that the social and economic conditions where people live and work affect individual and community health. These conditions range from access to healthcare to neighborhood safety and are closely connected to factors such as household income and educational attainment. These factors are known as [Social Determinants of Health](#).¹

In this report, we'll examine key indicators for social determinants of health in your community:

- Race-Related Barriers to Health
- Low Income Populations
- Access to Jobs
- Educational Attainment
- Additional Vulnerable Populations

What are social determinants of health?

Social determinants of health (SDOH) are the nonmedical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, racism, climate change, and political systems.

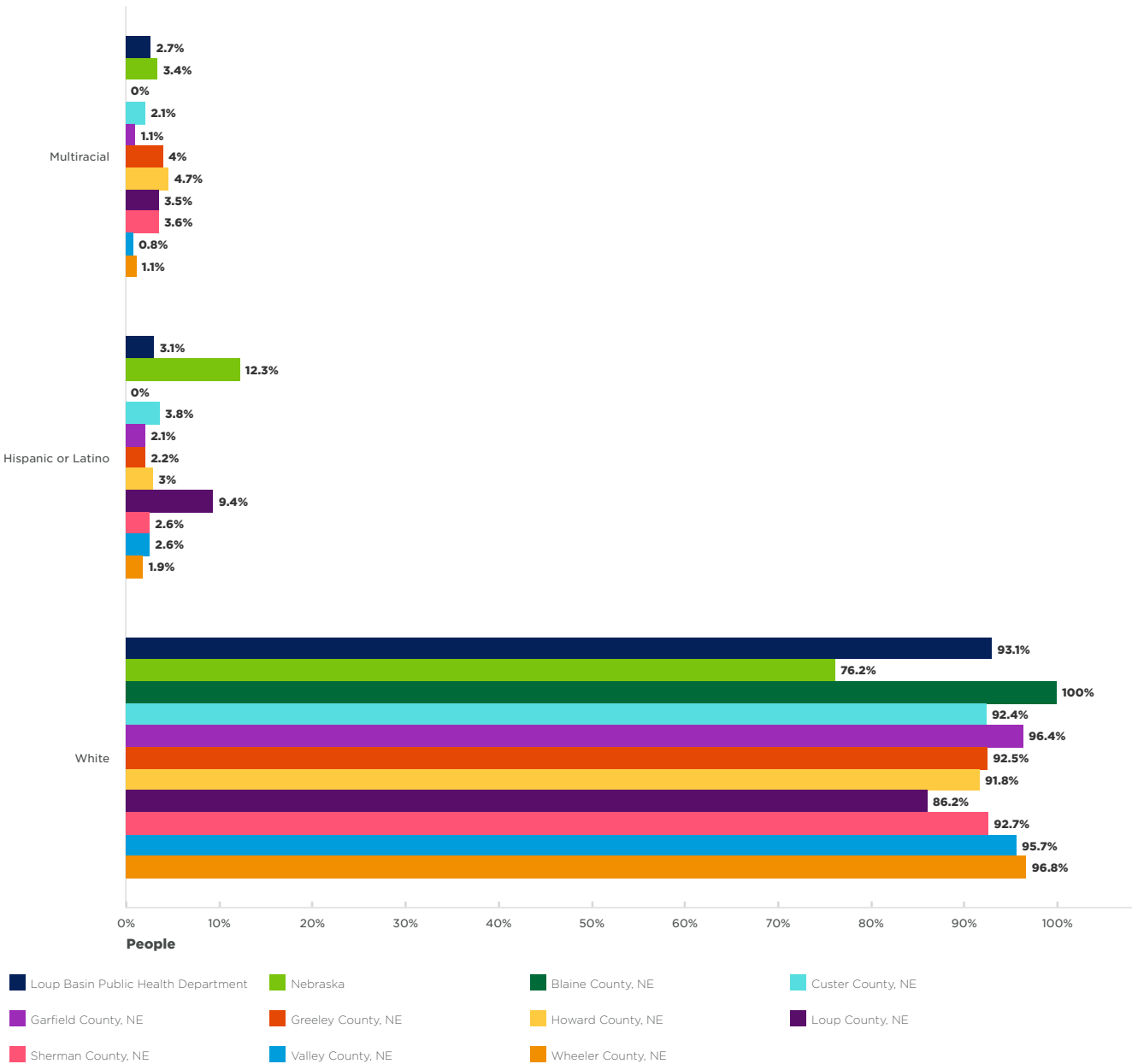
SDOH are one of three priority areas for [Healthy People 2030](#)², along with health equity and health literacy. Healthy People 2030 sets data-driven national objectives in [five key areas of SDOH](#)³: healthcare access and quality, education access and quality, social and community context, economic stability, and neighborhood and built environment. Some examples of SDOH included in Healthy People 2030 are safe housing, transportation, and neighborhoods; polluted air and water; and access to nutritious foods and physical health opportunities.

What are race-related barriers to health?

In many communities, People of Color (POC) face greater barriers to opportunity. These barriers are due in part to historical policies and patterns of development that have marginalized many communities of color. People facing poverty and other socioeconomic challenges face barriers to health regardless of their race. However, the analyses below

compare each metric to POC populations to identify where economic hardship intersects with race-related barriers to health.

Race/Ethnicity Totals



Sources: US Census Bureau ACS 5-year 2019-2023
All groups are not inclusive of Hispanic or Latino individuals unless noted otherwise.

Where are low incomes a barrier to health?

The U.S. Census identifies individuals with a household income of up to 200% of the poverty level as low income. Low income residents in communities with high income inequality face greater health risks. They are more likely to face barriers to healthy choices, such as longer distances to healthy food or affordable healthcare, and are more likely to be exposed to environmental risks, such as low-quality housing.



Percent of Population Below Poverty Level

8.4%

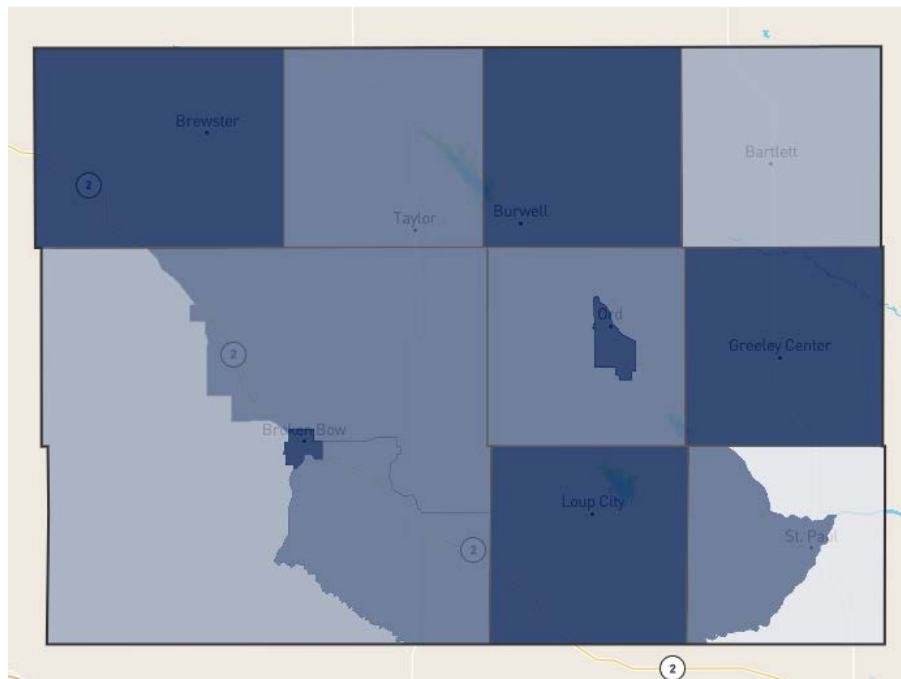
Loup Basin Public Health Department

10.3%

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Low Income Population



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Loup Basin Public Health Department
 Counties

People Below Poverty Level
1.4% - <4.8%
4.8% - <6.3%
6.3% - <9.5%
9.5% - 13.4%

Sources: US Census Bureau ACS 5-year 2019-2023

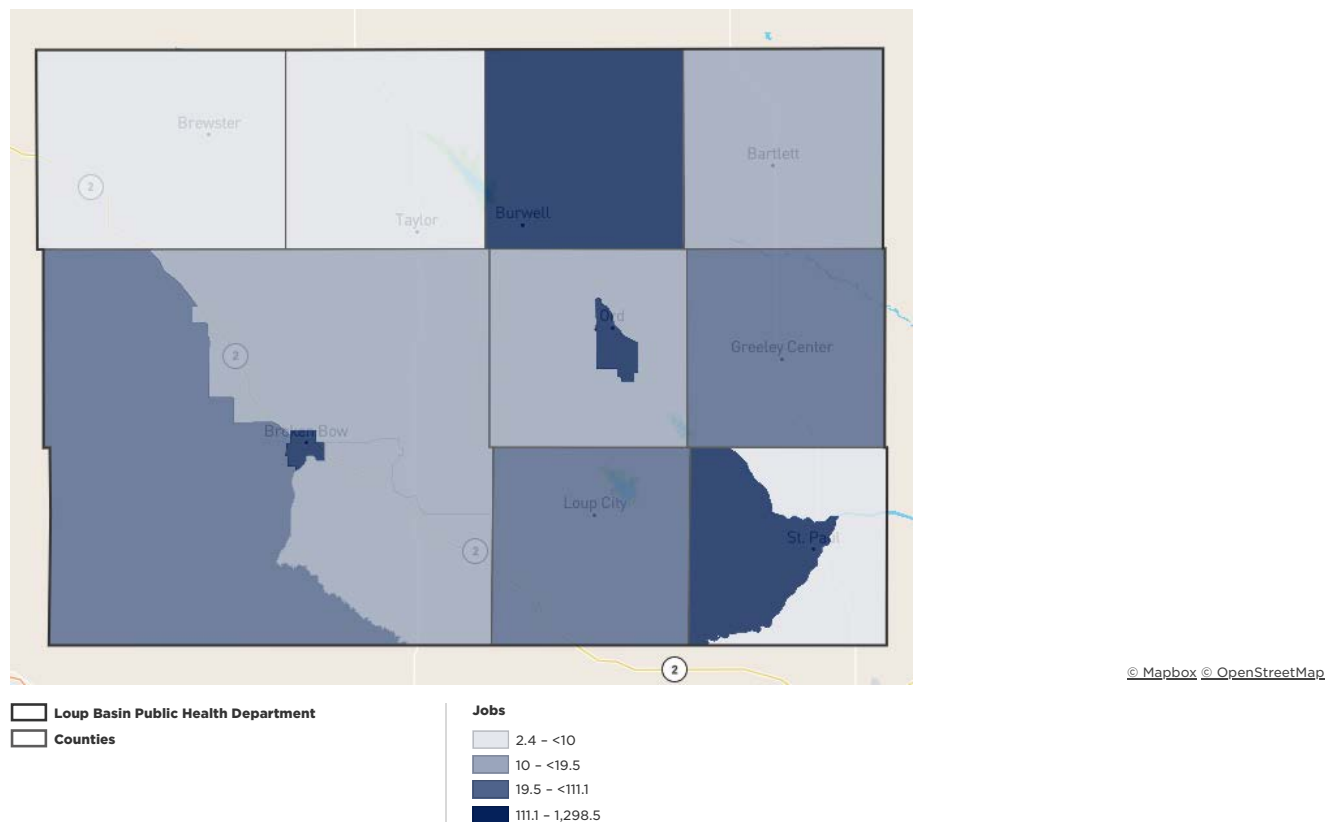
How accessible are jobs in your community?

Employment is the very foundation of economic opportunity. Unemployment makes it difficult, if not impossible, to meet life's basic needs and even a brief period of unemployment can [negatively impact an individual's earnings](#) for up to 20 years. Job access below is measured two ways: by job density as the number of jobs per acre and the density of middle-skill jobs in your area. Middle skill jobs often provide better wages than lower skill jobs, but also often require training or education beyond high school.

Geography	2021 Average Number of Jobs within a 30 Minute Public Transit
Loup Basin Public Health Department	288.1
Nebraska	1,259.4
Blaine County, NE	3
Custer County, NE	156.1
Garfield County, NE	109
Greeley County, NE	28.4
Howard County, NE	79
Loup County, NE	7.8
Sherman County, NE	46
Valley County, NE	136.7
Wheeler County, NE	12.2

Sources: Access Across America Transit 2021

Average Number of Jobs Within a 30 Minute Public Transit



Sources: Access Across America Transit 2021; LODES Version 8.0 2022; US Census Bureau 2023; US Census Bureau ACS 5-year 2019-2023

How many residents have access to educational opportunities?

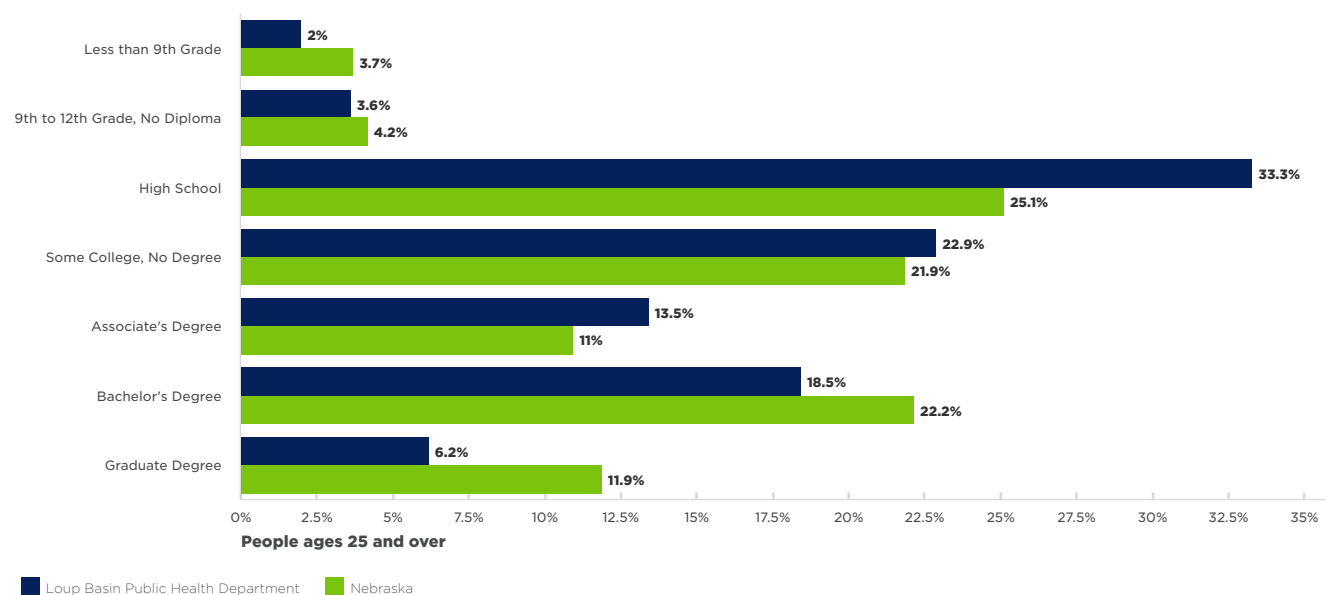
Education improves nearly every factor impacting an individual's health. Literacy and the ability to understand health information is correlated with longer lifespans, greater educational attainment improves economic opportunity, and high school graduation is a critical predictor for whether an individual will be exposed to violent crime in their lifetime. Lifelong educational outcomes begin in preschool. Enrollment in a high quality preschool or nursery school often predicts lifelong educational and health outcomes.

Pre-School Enrollment

Geography	2019-2023 Enrolled in Nursery or Preschool	2019-2023 Population Age 3 to 4
Loup Basin Public Health Department	599	789
Nebraska	32,910	52,683
Blaine County, NE	0	15
Custer County, NE	171	268
Garfield County, NE	47	27
Greeley County, NE	48	50
Howard County, NE	190	176
Loup County, NE	6	15
Sherman County, NE	55	87
Valley County, NE	59	103
Wheeler County, NE	23	48

Sources: US Census Bureau ACS 5-year 2019-2023

Highest Level of Education Completed



Sources: US Census Bureau ACS 5-year 2019-2023

▲▼ Data Sources	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼	Loup County, NE ▲▼	Sherman County, NE
2019-2023 Less than 9th Grade	0.7%	2.3%	0.3%	3.3%	2.1%	0%	2.5%
2019-2023 9th to 12th Grade, No Diploma	3.3%	3.7%	4.2%	3.3%	2.7%	0%	6.2%
2019-2023 High School Degree	38.9%	31.4%	26.8%	37.7%	35.9%	33.3%	35.6%
2019-2023 Some College, No Degree	18.9%	21.6%	26%	19.3%	24.3%	20.5%	25.9%
2019-2023 Associate's Degree	12.6%	15.4%	10%	18.1%	12%	20.2%	10.9%
2019-2023 Bachelor's Degree	21.9%	18.7%	23.8%	12.8%	19%	17.9%	13.3%
2019-2023 Graduate Degree	3.7%	7%	8.9%	5.6%	3.9%	8.1%	5.6%

Sources: US Census Bureau ACS 5-year 2019-2023

How many residents face additional health vulnerabilities?

Many factors besides income impact an individual's ability to live to a long, healthy life. Some groups face unique needs and challenges that make them particularly vulnerable to health risks or barriers. The chart below provides a breakdown of the vulnerable populations in your area. **Vulnerable populations include persons:**

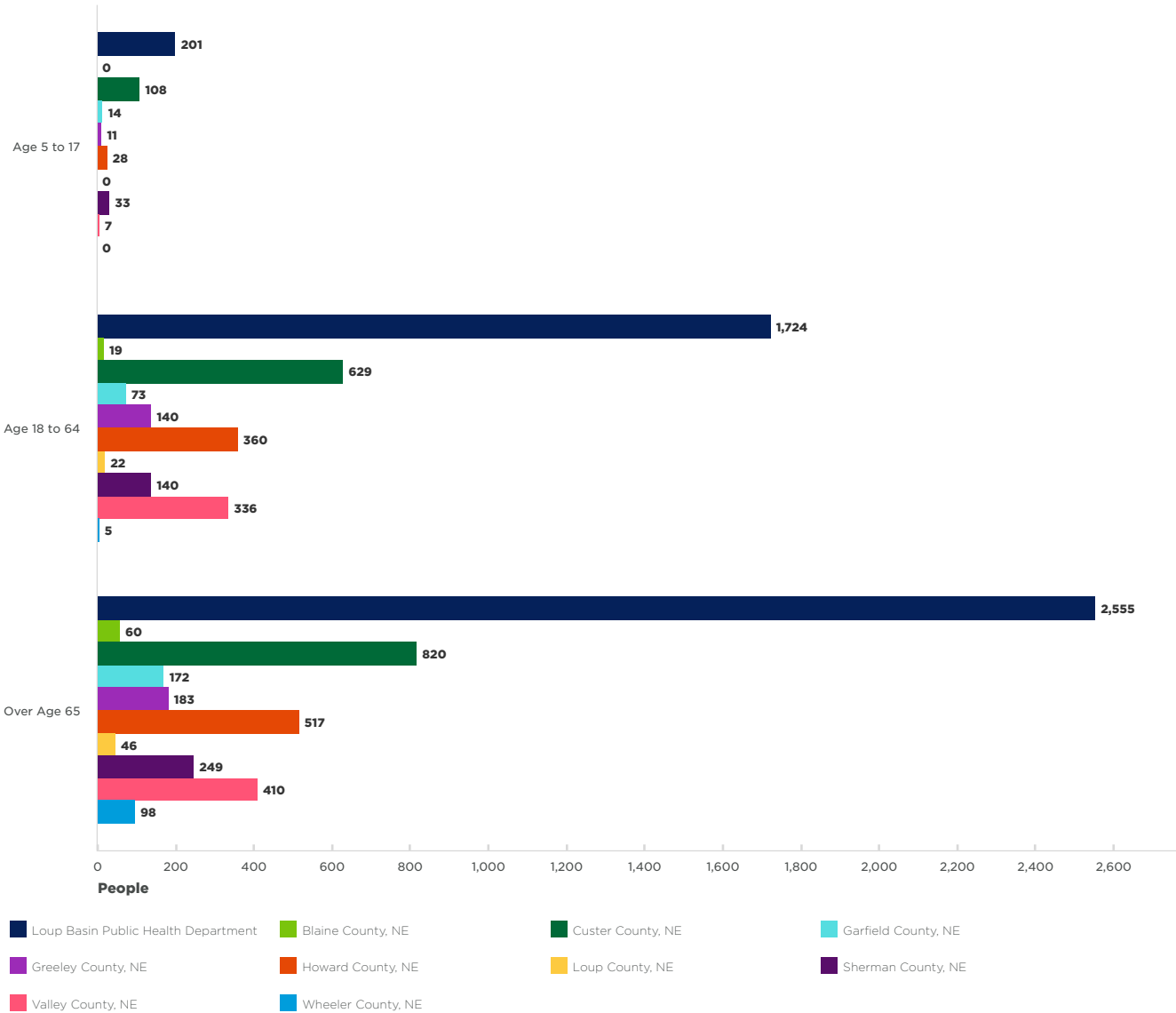
- under age 5
- over age 65
- persons with a disability
- persons below poverty level
- speak English less than very well (limited English proficiency)

Vulnerable Populations

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE
2019-2023 Population Age Under 5	1,898	127,005	22	705	86	136	442
2019-2023 Population Age 65 and Over	7,221	322,165	131	2,347	496	571	1,440
2019-2023 Population Living with a Disability	15.2%	12.1%	20.5%	14.9%	14.9%	15.3%	14.1%
2019-2023 Educational Attainment: Less than 9th Grade	2%	3.7%	0.7%	2.3%	0.3%	3.3%	2.1%
2019-2023 People Below Poverty Level	8.4%	10.3%	10.6%	8.6%	11.7%	11.2%	5.4%
2019-2023 Ability to Speak English Less Than Very Well	1.3%	5.2%	0%	2.1%	0%	0.5%	1.4%

Sources: US Census Bureau ACS 5-year 2019-2023

Disability by Age



Sources: US Census Bureau ACS 5-year 2019-2023

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Loup Basin Public Health Department

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Loup Basin Public Health Department Community Health Assessment

Neighborhood Opportunity Snapshot

Everyone deserves to live in a healthy and inclusive community. Unfortunately, too many of our life outcomes—including our access to capital, quality schools, vibrant businesses, long-term health, and more—are [predicted by our zip code](#)[↗]. Where we live often determines how long we live, the money we can make, and the opportunities we can access. To change these outcomes, we use a holistic and comprehensive approach to investing in all assets of a strong and healthy neighborhood.

This Neighborhood Opportunity Snapshot is part of our approach. It includes key data that we use to collaboratively build fair and inclusive outcomes with our partners, neighborhood residents, and other stakeholders. We recognize that creating fair outcomes requires specifying the barriers that need overcoming and who and where will benefit as a result of our work. Data helps us identify these existing barriers while understanding potential audiences and places that can benefit from our work.

Data helps us:

- illuminate disparities between and within communities
- establish an understanding of opportunities using standard measures
- bring new partners to the table around shared goals
- provide relevant comparisons and benchmarks
- promote accountability to improve outcomes

Step One: *Turn Data Into Information*

Data, by itself, cannot solve the disparities we see in our communities. It cannot tell us why those disparities still exist or point us to a definitive solution. Data cannot objectively represent the lived experiences of residents or describe the unique, local assets they engage with every day.

Instead, **data is a tool we use to help us design more inclusive solutions**. How do we do that? By turning data into useful information that informs our decisions. The example below uses the Robert Wood Johnson Foundation's "[One Size Does Not Fit All](#)"[↗] infographic to demonstrate how designing solutions without enough information will lead to inequitable outcomes. Instead, data gives us more information so that we can build more equitable solutions.

Equality



Source: Visualizing Health Equity: One Size Does Not Fit All Infographic, Robert Wood Johnson Foundation, <https://www.rwjf.org/en/library/infographics/visualizing-health-equity.html>

Equity



Source: Visualizing Health Equity: One Size Does Not Fit All Infographic, Robert Wood Johnson Foundation, <https://www.rwjf.org/en/library/infographics/visualizing-health-equity.html>

1. Population and Demographic Change

What is the demographic makeup of the area? How have populations changed over time?



Total Population

29,846

Loup Basin Public Health Department

1,965,926

Nebraska



BIPOC Population

6.9%

Loup Basin Public Health Department

23.8%

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

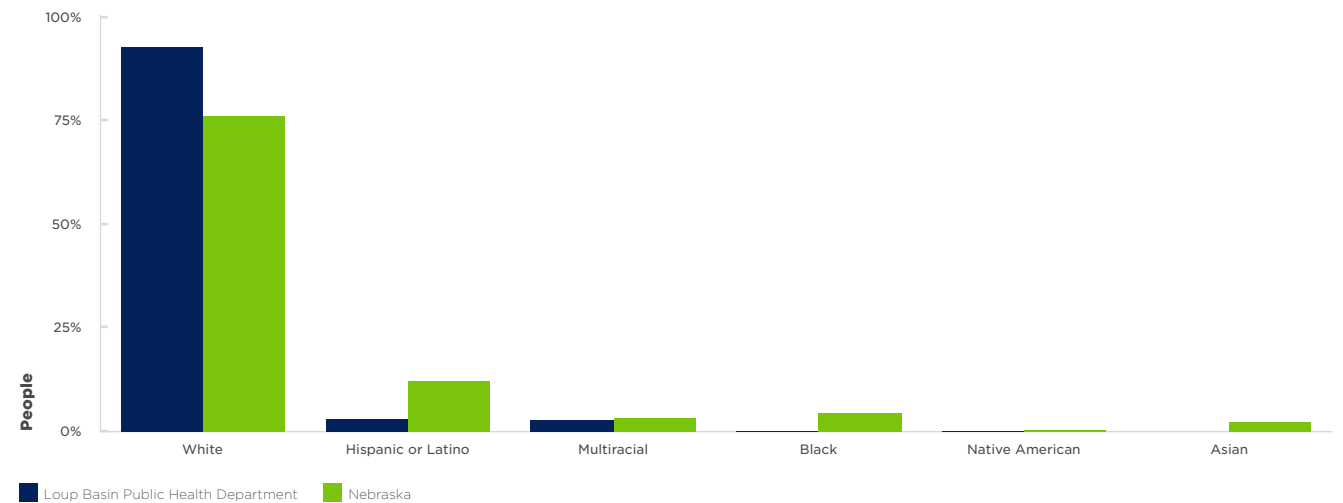
Note: BIPOC (Black, Indigenous, and People of Color) Population is calculated by taking the total population minus the white (not Latino, not Hispanic) population.

Geography	2019-2023 Total Population	2019-2023 BIPOC Population
Blaine County, NE	385	0%
Custer County, NE	10,544	7.6%
Garfield County, NE	1,797	3.6%
Greeley County, NE	2,211	7.5%
Howard County, NE	6,492	8.2%
Loup County, NE	564	13.8%
Sherman County, NE	2,974	7.3%
Valley County, NE	4,094	4.3%
Wheeler County, NE	785	3.2%
Loup Basin Public Health Department	29,846	6.9%
Nebraska	1,965,926	23.8%

Sources: US Census Bureau ACS 5-year 2019-2023

Note: BIPOC Population is calculated by taking the total population minus the white (not Latino, not Hispanic) population.

Race/Ethnicity



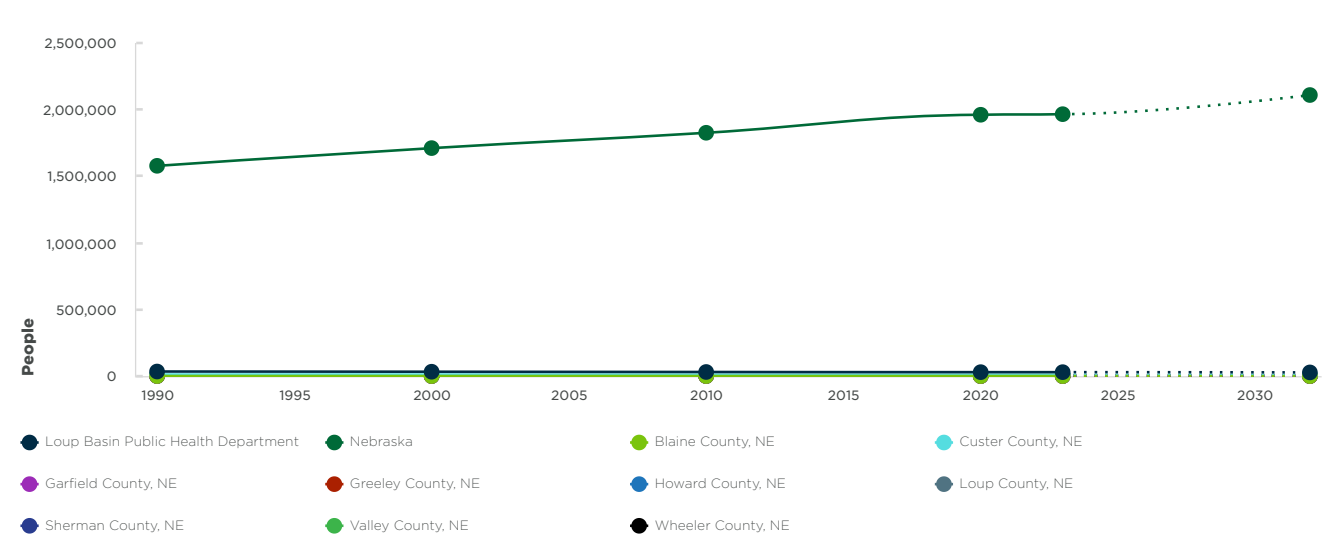
Sources: US Census Bureau ACS 5-year 2019-2023

Race & Ethnicity

Data Sources	Blaine County, NE	Custer County, NE	Garfield County, NE	Greeley County, NE	Howard County, NE	Loup County, NE	Sherman County, NE
2019-2023 Black or African American	0%	0.5%	0.4%	0.6%	0.5%	0%	0.6%
2019-2023 Asian	0%	0.1%	0%	0%	0%	0%	0.3%
2019-2023 White	100%	92.4%	96.4%	92.5%	91.8%	86.2%	92.7%
2019-2023 Hispanic or Latino	0%	3.8%	2.1%	2.2%	3%	9.4%	2.6%
2019-2023 Native American	0%	0.6%	0%	0.6%	0%	0.9%	0.1%
2019-2023 Multiracial	0%	2.1%	1.1%	4%	4.7%	3.5%	3.6%

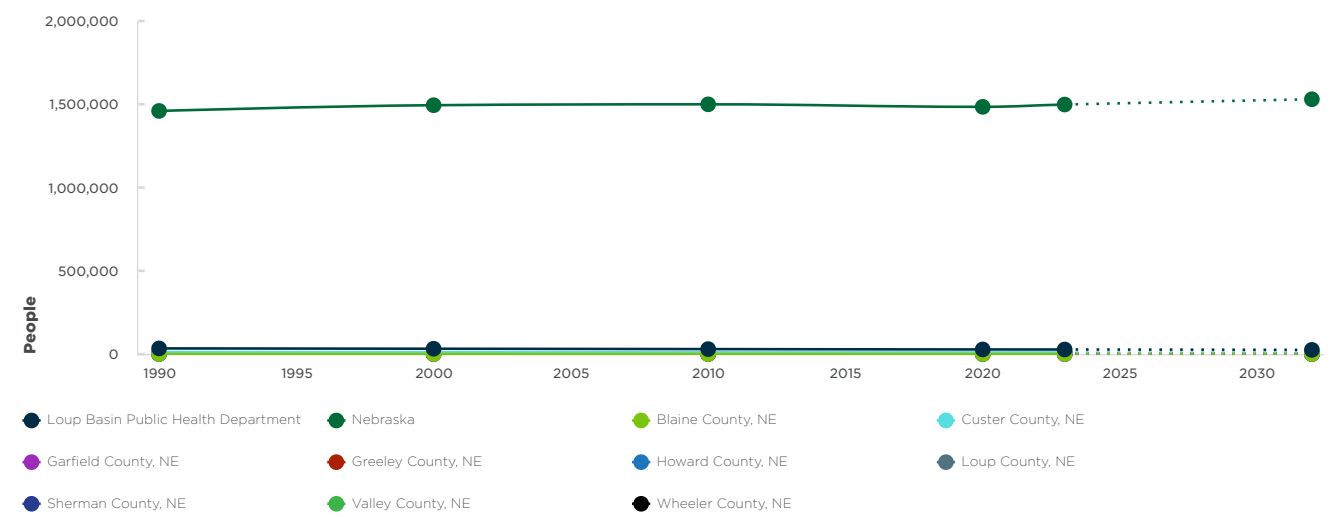
Sources: US Census Bureau ACS 5-year 2019-2023

Total Population Change



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

Trend: White (non-Hispanic) Population

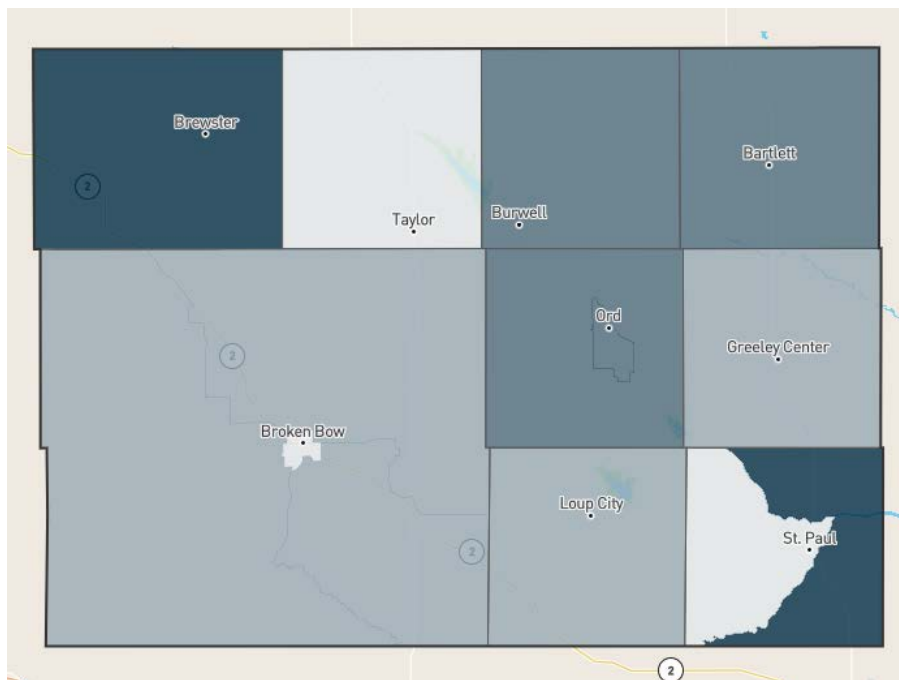


Sources: US Census Bureau; US Census Bureau ACS 5-year

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 White (Not Hispanic or Latino)
Blaine County, NE	100%
Custer County, NE	92.4%
Garfield County, NE	96.4%
Greeley County, NE	92.5%
Howard County, NE	91.8%
Loup County, NE	86.2%
Sherman County, NE	92.7%
Valley County, NE	95.7%
Wheeler County, NE	96.8%
Loup Basin Public Health Department	93.1%
Nebraska	76.2%

Sources: US Census Bureau ACS 5-year 2019-2023



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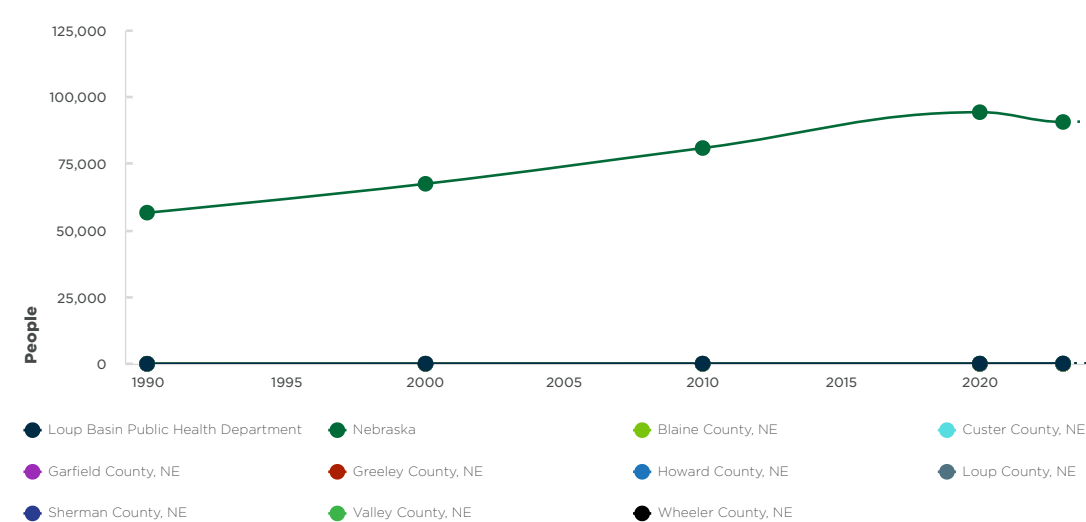
 Loup Basin Public Health Department
 Counties

Race/Ethnicity: White (non-Hispanic) per capita

86.2% - <92.5%
 92.5% - <95.6%
 95.6% - <98.6%
 98.6% - 100%

Sources: EPA Smart Location Database 2019; US Census Bureau ACS 5-year 2019-2023

Trend: Black or African American (non-Hispanic) Population



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



Black (Not Hispanic or Latino)

0.4%

of Total population

Loup Basin Public Health Department

4.6%

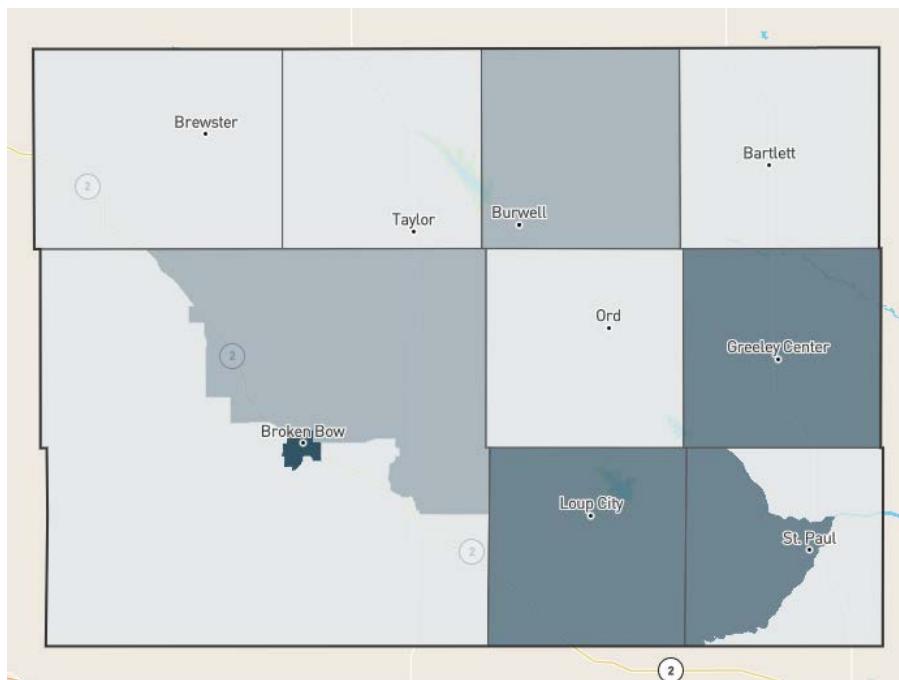
of Total population

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Black (Not Hispanic or Latino)
Blaine County, NE	0%
Custer County, NE	0.5%
Garfield County, NE	0.4%
Greeley County, NE	0.6%
Howard County, NE	0.5%
Loup County, NE	0%
Sherman County, NE	0.6%
Valley County, NE	0%
Wheeler County, NE	0%
Loup Basin Public Health Department	0.4%
Nebraska	4.6%

Sources: US Census Bureau ACS 5-year 2019-2023



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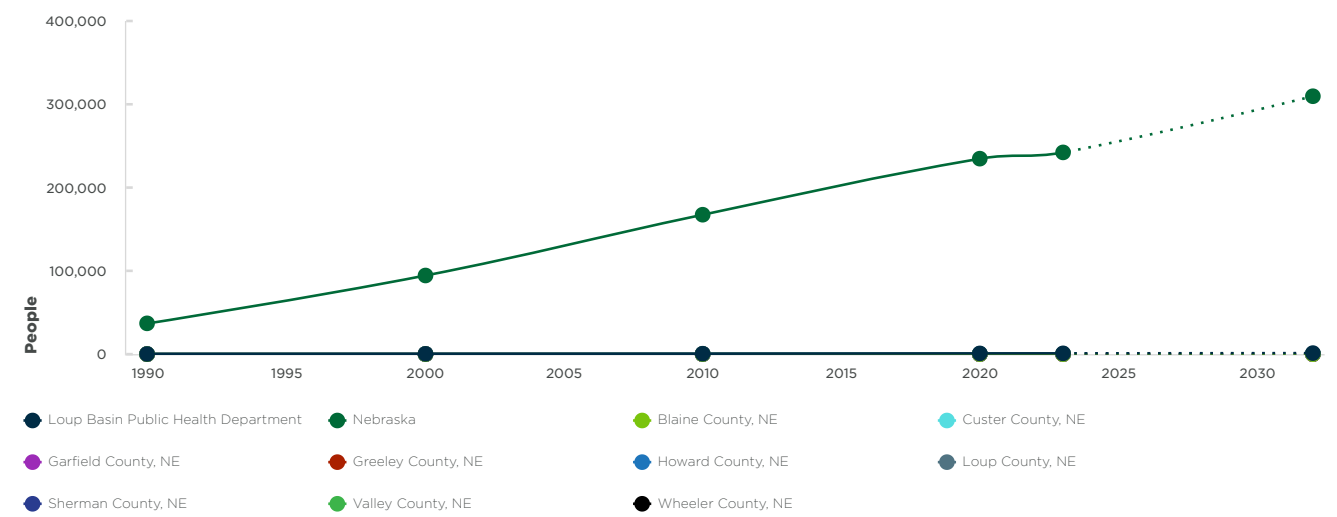
Loup Basin Public Health Department
Counties

Black (Not Hispanic or Latino)

- 0% - <0.2%
- 0.2% - <0.6%
- 0.6% - <1.2%
- 1.2%

Sources: EPA Smart Location Database 2019; US Census Bureau ACS 5-year 2019-2023

Trend: Hispanic or Latino Population



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



Hispanic or Latino

3.1%

of Total population

Loup Basin Public Health Department

12.3%

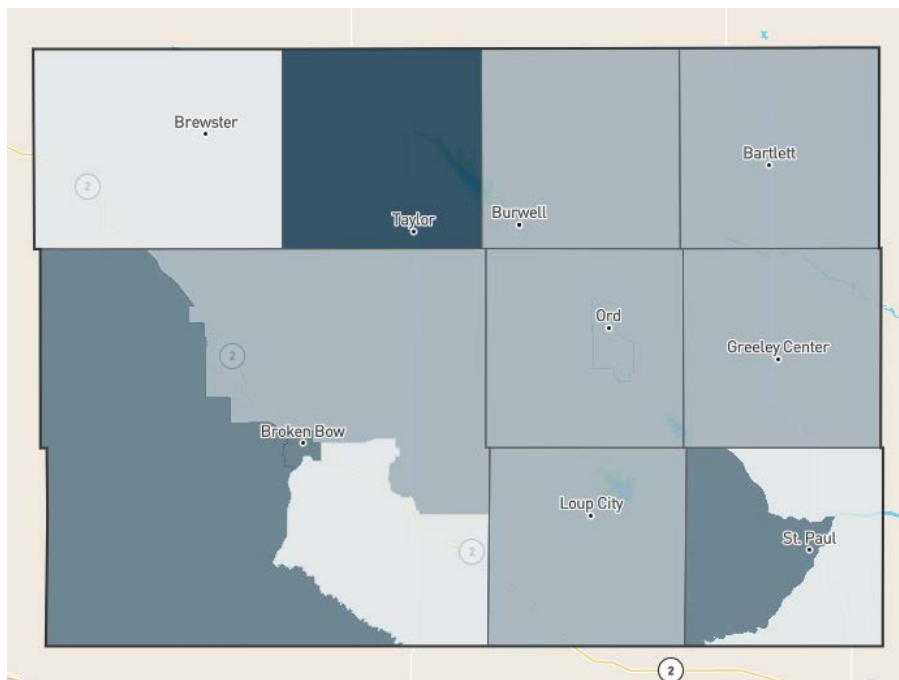
of Total population

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Hispanic or Latino
Blaine County, NE	0%
Custer County, NE	3.8%
Garfield County, NE	2.1%
Greeley County, NE	2.2%
Howard County, NE	3%
Loup County, NE	9.4%
Sherman County, NE	2.6%
Valley County, NE	2.6%
Wheeler County, NE	1.9%
Loup Basin Public Health Department	3.1%
Nebraska	12.3%

Sources: US Census Bureau ACS 5-year 2019-2023



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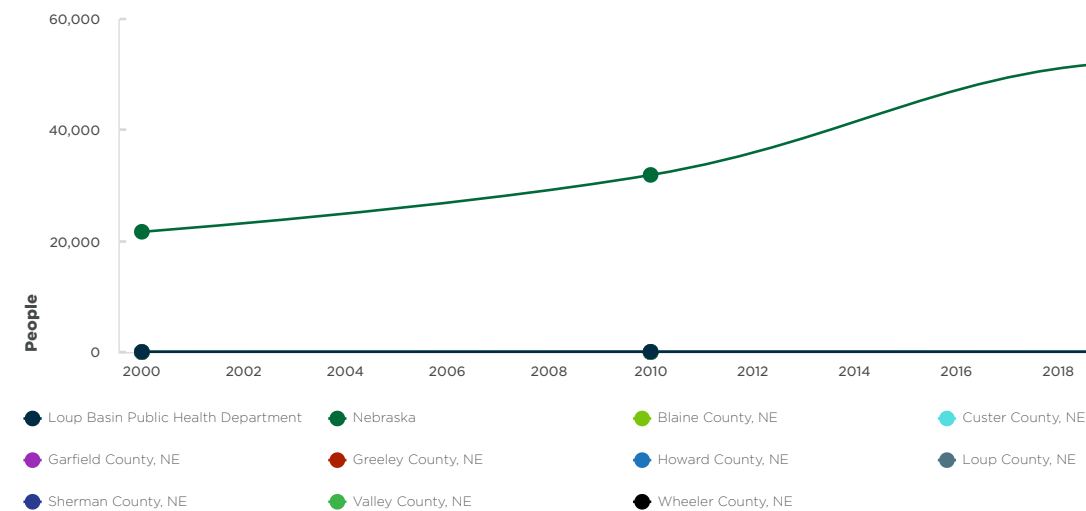
Loup Basin Public Health Department
 Counties

Hispanic or Latino

	0% - <1.8%
	1.8% - <3.6%
	3.6% - <9.4%
	9.4%

Sources: EPA Smart Location Database 2019; US Census Bureau ACS 5-year 2019-2023

Trend: Asian (non-Hispanic) Population



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



Asian (Not Hispanic or Latino)

0.1%

of Total Population

Loup Basin Public Health Department

2.5%

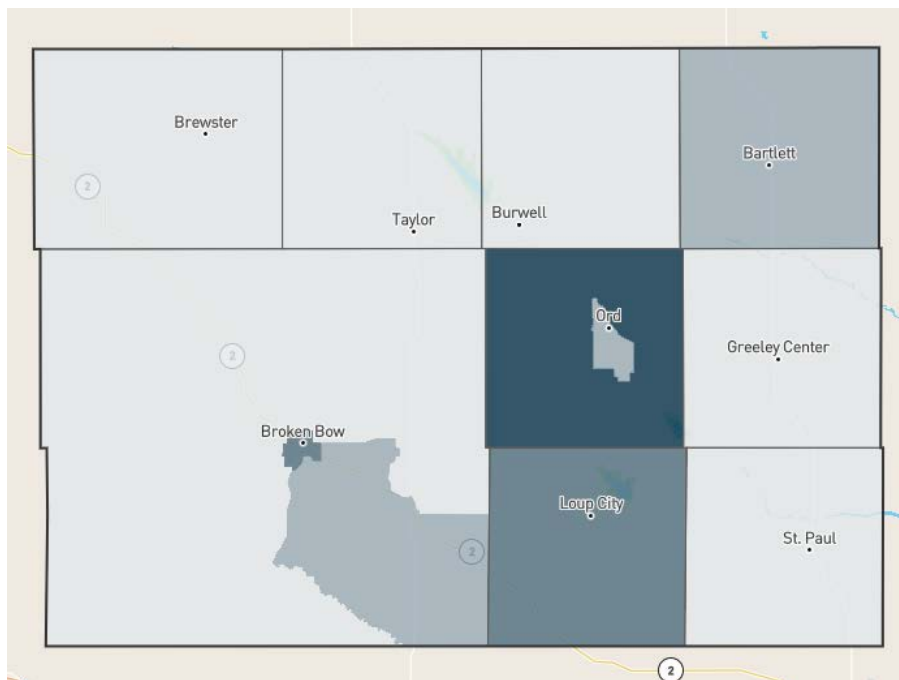
of Total Population

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Asian (Not Hispanic or Latino)
Blaine County, NE	0%
Custer County, NE	0.1%
Garfield County, NE	0%
Greeley County, NE	0%
Howard County, NE	0%
Loup County, NE	0%
Sherman County, NE	0.3%
Valley County, NE	0.3%
Wheeler County, NE	0.1%
Loup Basin Public Health Department	0.1%
Nebraska	2.5%

Sources: US Census Bureau ACS 5-year 2019-2023



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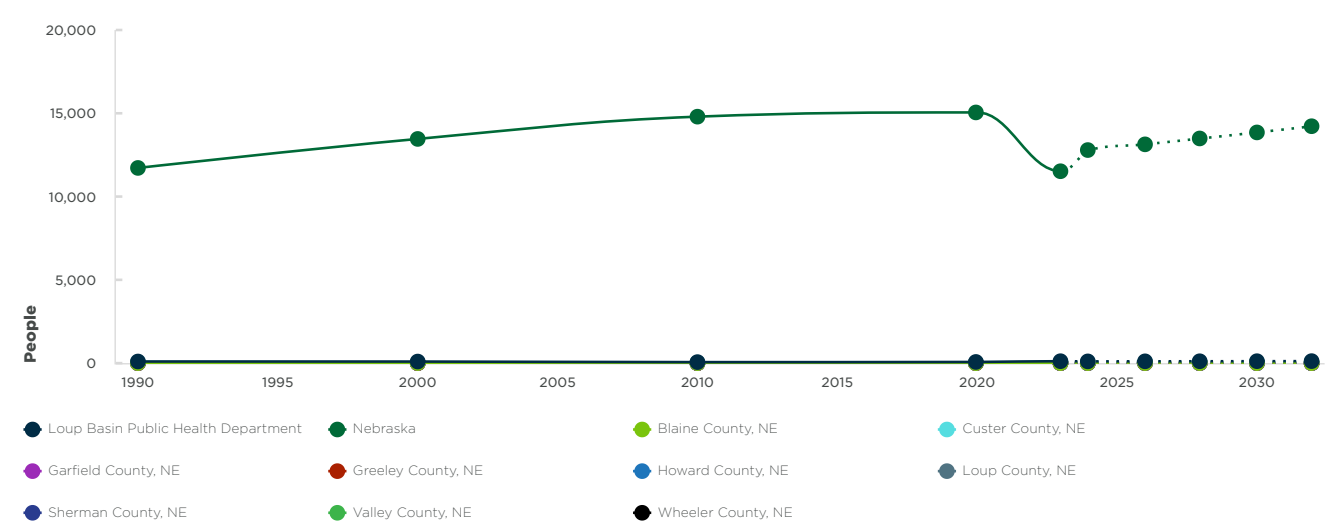
Loup Basin Public Health Department
 Counties

Asian (Not Hispanic or Latino)

	0% - <0.1%
	0.1% - <0.3%
	0.3% - <0.5%
	0.5%

Sources: EPA Smart Location Database 2019; US Census Bureau ACS 5-year 2019-2023

Trend: American Native (non-Hispanic) Population



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



American Native (Not Hispanic or Latino)

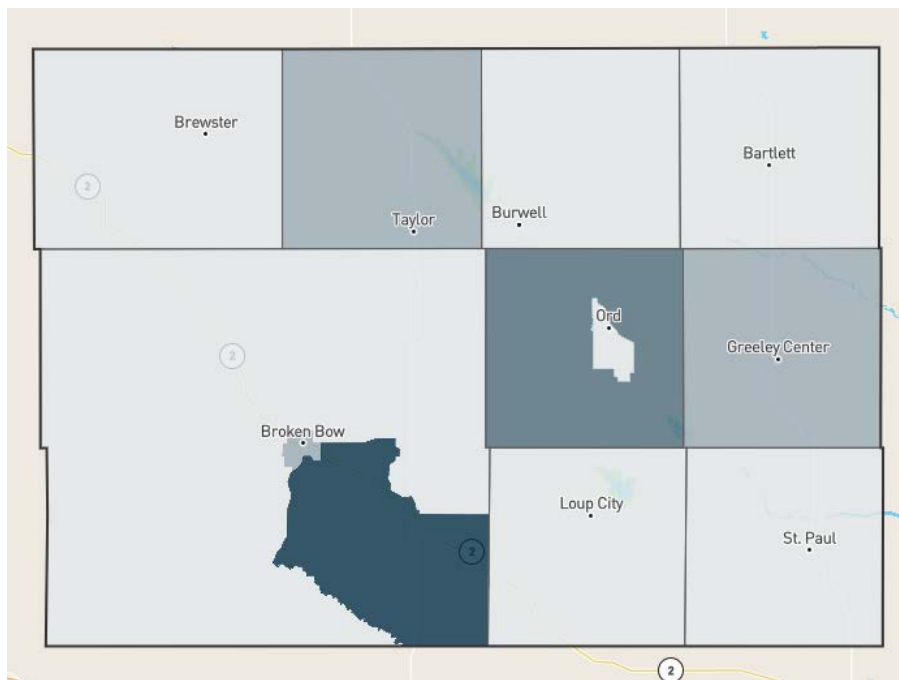
0.4%
Loup Basin Public Health Department

0.6%
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography		2019-2023 American Indian (Not Hispanic or Latino)
Blaine County, NE		0%
Custer County, NE		0.6%
Garfield County, NE		0%
Greeley County, NE		0.6%
Howard County, NE		0%
Loup County, NE		0.9%
Sherman County, NE		0.1%
Valley County, NE		0.7%
Wheeler County, NE		0%
Loup Basin Public Health Department		0.4%
Nebraska		0.6%

Sources: US Census Bureau ACS 5-year 2019-2023



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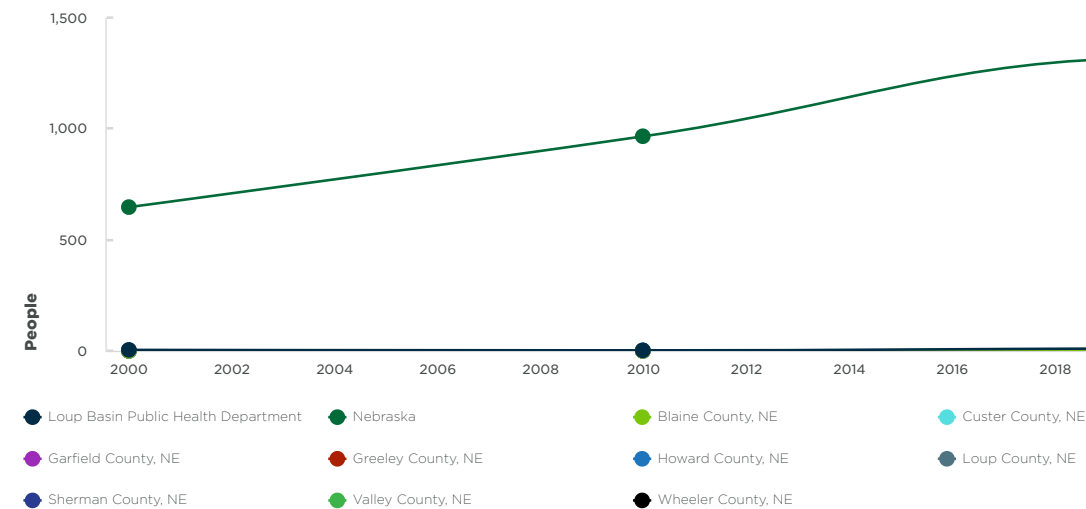
 Loup Basin Public Health Department
 Counties

American Native (Not Hispanic or Latino)

- 0% - <0.5%
- 0.5% - <1.6%
- 1.6% - <2.9%
- 2.9%

Sources: EPA Smart Location Database 2019; US Census Bureau ACS 5-year 2019-2023

Trend: Hawaiian or Other Pacific Islander (non-Hispanic) Population



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



Hawaiian or Other Pacific Islander (Not Hispanic or Latino)

0%
of Total population
Loup Basin Public Health Department

0%
of Total population
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
Blaine County, NE	0%
Custer County, NE	0.1%
Garfield County, NE	0%
Greeley County, NE	0%
Howard County, NE	0%
Loup County, NE	0%
Sherman County, NE	0%
Valley County, NE	0%
Wheeler County, NE	0%
Loup Basin Public Health Department	0%
Nebraska	0%

Sources: US Census Bureau ACS 5-year 2019-2023



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Loup Basin Public Health Department
 Counties

Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
 0% - <0.4%
 0.4%

Sources: EPA Smart Location Database 2019; US Census Bureau ACS 5-year 2019-2023

2. Employment and Access to Income

Which areas have the highest concentrations of jobs and livable wages? What are the local barriers to employment?



Total Jobs

10,640

Jobs by workplace location

Loup Basin Public Health Department

965,539

Jobs by workplace location

Nebraska



Unemployment Rate

2.6%

of total labor force

Loup Basin Public Health Department

3%

of total labor force

Nebraska



Median Household Income

\$65,890

USD

Loup Basin Public Health Department

\$74,985

USD

Nebraska

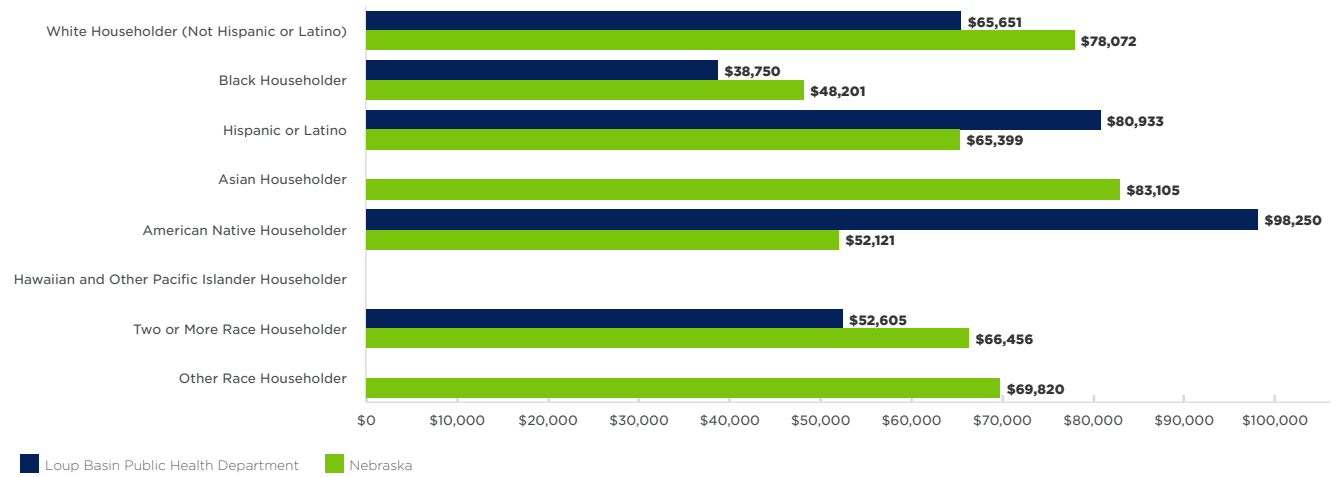
Sources: EPA Smart Location Database 2019; US Census Bureau ACS 5-year 2019-2023

▲ ▼ Geography	2022 Number of Jobs ▲ ▼	2019-2023 Unemployment Rate ▲ ▼	2019-2023 Median Household Income ▲ ▼
Blaine County, NE	105	1%	\$61,250
Custer County, NE	4,562	2.9%	\$66,310
Garfield County, NE	740	1.8%	\$68,611
Greeley County, NE	677	2.3%	\$58,894
Howard County, NE	1,533	3.4%	\$74,508
Loup County, NE	102	0%	\$60,156
Sherman County, NE	707	4.6%	\$61,935
Valley County, NE	1,766	0.4%	\$58,902
Wheeler County, NE	299	1.7%	\$55,893
Loup Basin Public Health Department	10,491	2.6%	\$65,890
Nebraska	968,682	3%	\$74,985

Sources: *LODES Version 8.0 2022*; *US Census Bureau ACS 5-year 2019-2023*

Income Disparities

Median Household Income by Race/Ethnicity

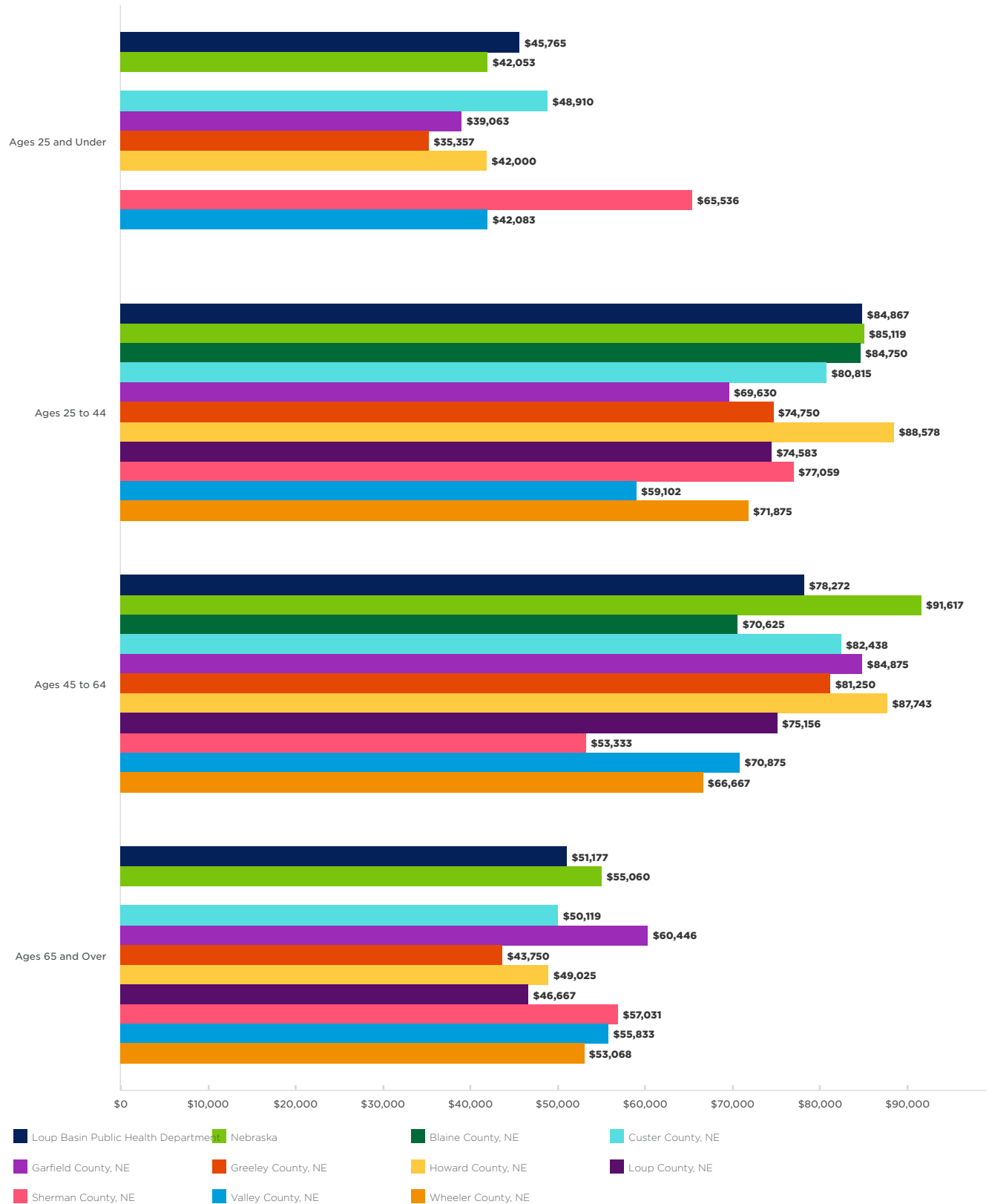


Sources: US Census Bureau ACS 5-year 2019-2023

▲▼ Data Sources	▲▼ Blaine County, NE	▲▼ Custer County, NE	▲▼ Garfield County, NE	▲▼ Greeley County, NE	▲▼ Howard County, NE	▲▼ Loup County, NE	▲▼ Sherman County, NE
2019-2023 Asian	No data	No data	No data	No data	No data	No data	No data
2019-2023 Black or African American	No data	\$38,802	No data	No data	No data	No data	No data
2019-2023 Hispanic or Latino	No data	\$49,013	No data	No data	\$87,760	No data	\$13,580
2019-2023 Multiracial	No data	\$77,500	\$4,286	No data	\$48,879	No data	No data
2019-2023 Native American	No data	No data	No data	No data	No data	No data	No data
2019-2023 Native Hawaiian and Other Pacific Islander	No data	No data	No data	No data	No data	No data	No data
2019-2023 Other	No data	No data	No data	No data	\$88,542	No data	No data
2019-2023 White, Not Hispanic or Latino	\$61,250	\$67,045	\$68,833	\$59,567	\$75,026	\$54,205	\$63,075

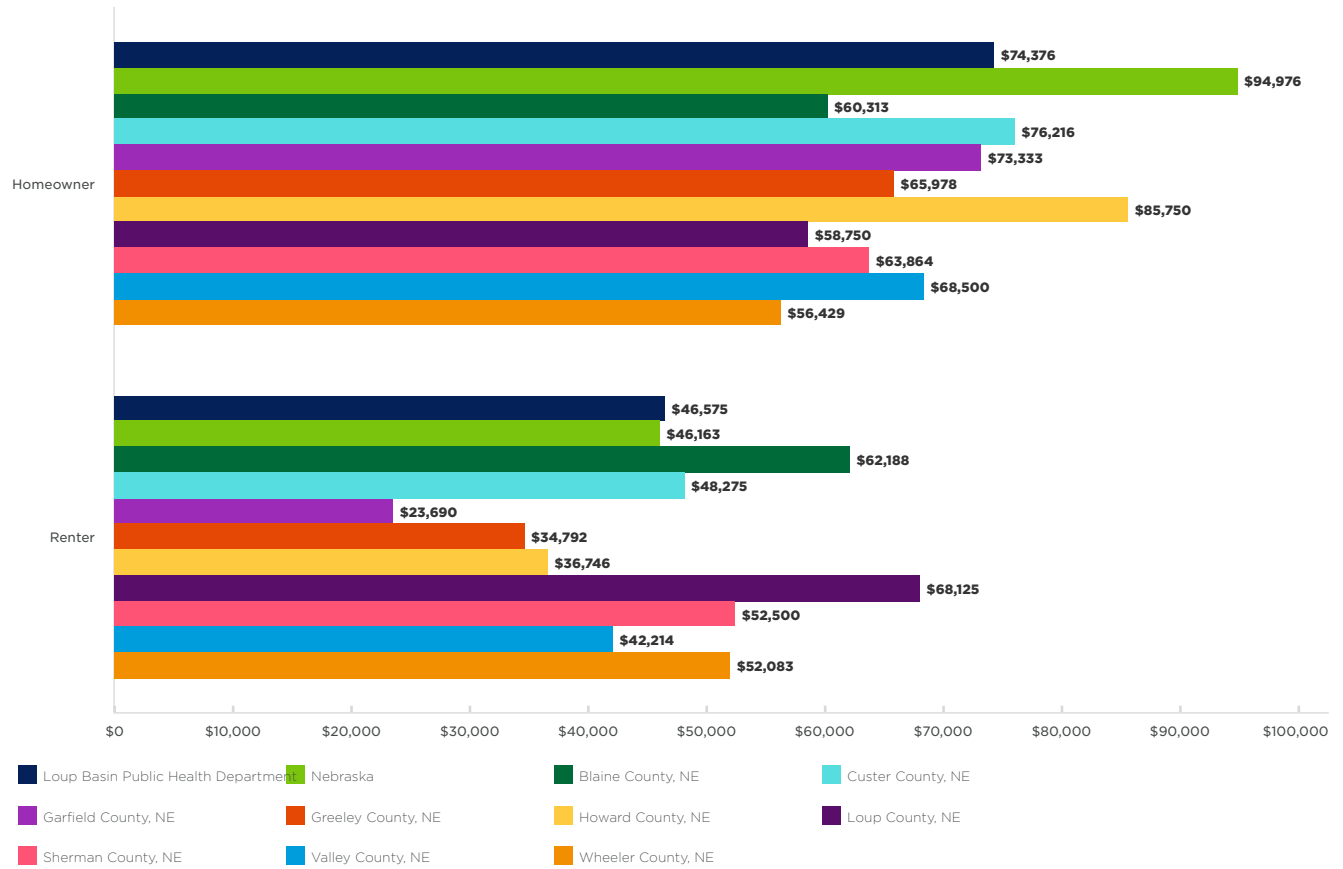
Sources: US Census Bureau ACS 5-year 2019-2023

Median Household Income by Householder Age



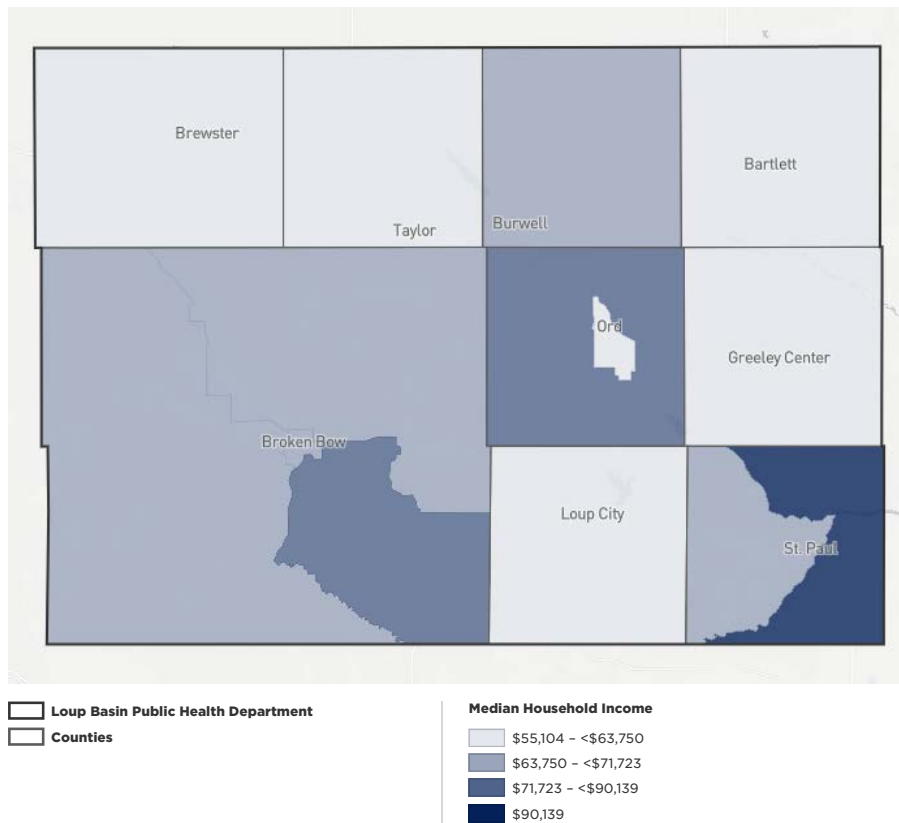
Sources: US Census Bureau ACS 5-year 2019-2023

Median Household Income by Homeowner vs Renter



Sources: US Census Bureau ACS 5-year 2019-2023

Median Household Income

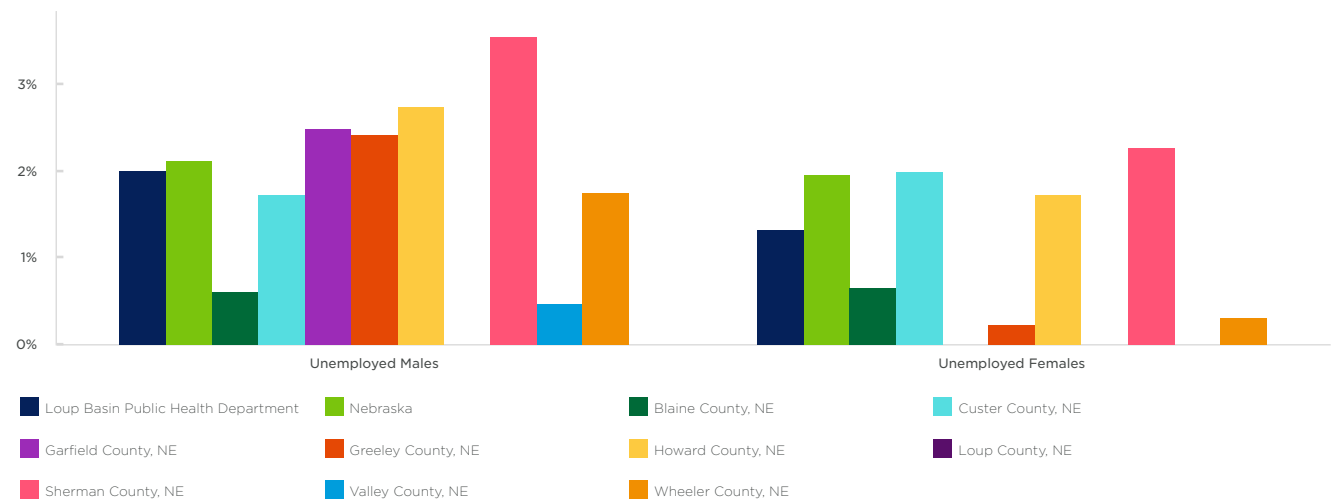


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Sources: US Census Bureau ACS 5-year 2019-2023

Employment Disparities

Unemployment Rate by Sex



Sources: US Census Bureau ACS 5-year 2019-2023

Unemployment Rate by Race/Ethnicity

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼
2019-2023 Asian	25%	3.7%	No data	No data	No data	No data	No data
2019-2023 Black or African American	5.6%	8.8%	No data	0%	No data	0%	No data
2019-2023 Multiracial	3.7%	3.8%	No data	4.7%	0%	0%	1.5%
2019-2023 Other	0%	4.2%	No data	0%	0%	No data	0%
2019-2023 Native American	0%	8.7%	No data	0%	No data	0%	No data
2019-2023 Native Hawaiian and Other Pacific Islander	No data	4.7%	No data	No data	No data	No data	No data
2019-2023 White	2.6%	2.4%	1%	2.9%	1.9%	2.4%	3.5%

Sources: US Census Bureau ACS 5-year 2019-2023

3. Housing Stability and Affordability

What does the local housing market look like? How affordable is housing for renters and homeowners?



Cost Burdened Homeowners

18.1%

Loup Basin Public Health Department

17.6%

Nebraska



Cost Burdened Renters

24.2%

Loup Basin Public Health Department

40.8%

Nebraska



Total Homeowners

9,246

Occupied Housing Units

Loup Basin Public Health Department

523,603

Occupied Housing Units

Nebraska



Total Renters

3,311

Occupied Housing Units

Loup Basin Public Health Department

263,282

Occupied Housing Units

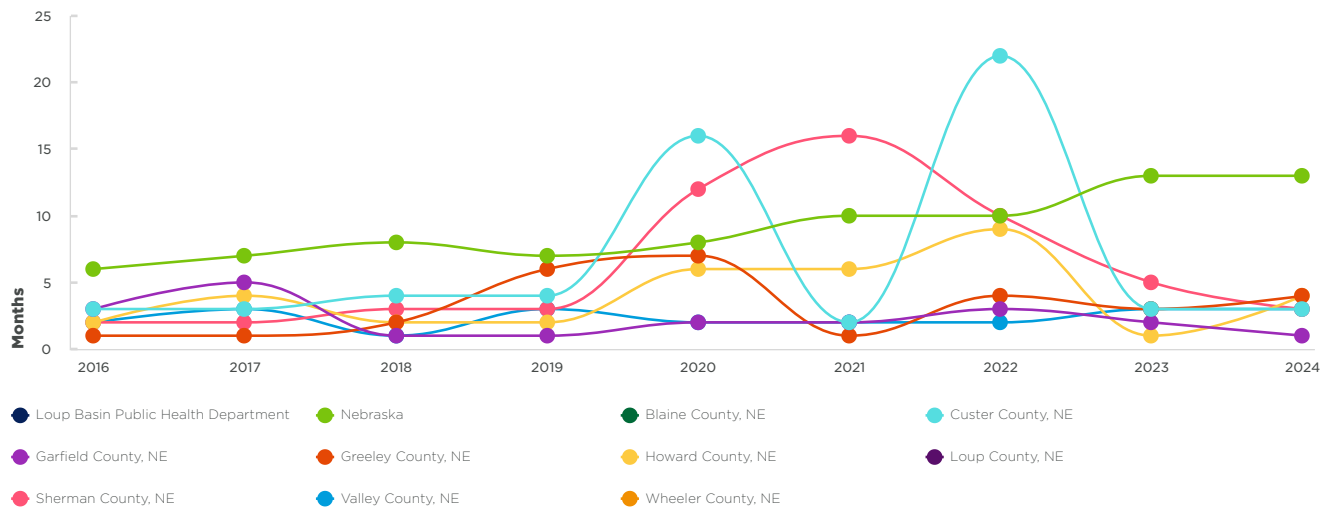
Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 Renter Excessive Housing Costs	2019-2023 Homeowner Excessive Housing Costs
Blaine County, NE	7.3%	27.7%
Custer County, NE	28.3%	19.1%
Garfield County, NE	36.5%	23.5%
Greeley County, NE	20.4%	19.9%
Howard County, NE	27.5%	16.5%
Loup County, NE	13.1%	22.4%
Sherman County, NE	23.2%	18.5%
Valley County, NE	13%	12.7%
Wheeler County, NE	2.9%	19.3%
Loup Basin Public Health Department	24.2%	18.1%
Nebraska	40.8%	17.6%

Sources: US Census Bureau ACS 5-year 2019-2023

Average Months on Waiting List for HUD Assisted Housing Units



Sources: HUD Picture Subsidized HH

4. Educational Readiness and Outcomes

How prepared are our youth for tomorrow's workforce? Where are local conditions resulting in poor outcomes?



Total Student Enrollment

319,188

Students

Nebraska

48,336,884

Students

United States of America

Sources: CRDC 2021-2022

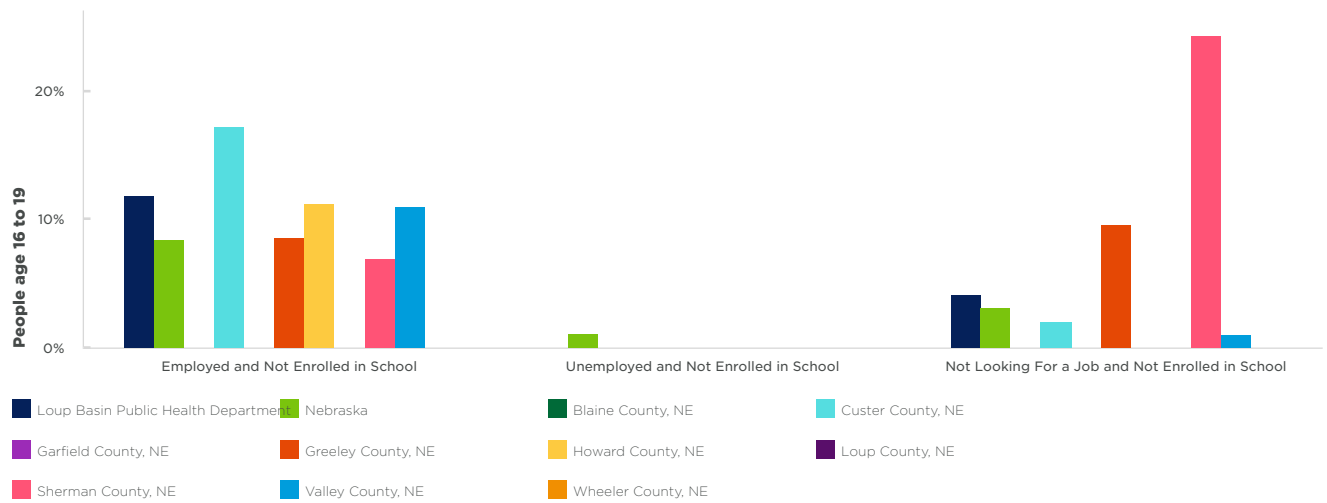
Student Overview

Enrollment Status by Grade

▲ Data Sources ▼	Loup Basin Public Health Department ▲ ▼	Nebraska ▲ ▼	Blaine County, NE ▲ ▼	Custer County, NE ▲ ▼	Garfield County, NE ▲ ▼	Greeley County, NE ▲ ▼	Howard County, NE ▲ ▼
2019-2023 Nursery or Preschool	599	32,910	0	171	47	48	190
2019-2023 Kindergarten	302	25,637	5	149	9	25	37
2019-2023 Grades 1 to 4	1,216	105,739	18	335	114	105	276
2019-2023 Grades 5 to 8	1,587	108,865	12	562	81	111	43
2019-2023 Grades 9 to 12	1,760	111,229	11	706	86	116	40
2019-2023 Undergraduate	647	99,708	5	205	54	65	137
2019-2023 Graduate or Professional School	278	31,309	2	31	55	9	63

Sources: US Census Bureau ACS 5-year 2019-2023

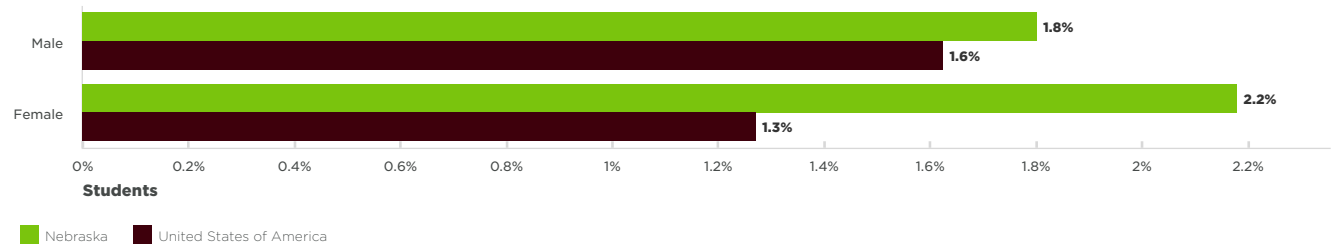
Disconnected Youth (Age 16-19)



Sources: US Census Bureau ACS 5-year 2019-2023

Children and Students by Sex

Chronically Absent Students by Sex



Sources: CRDC 2020-2021, 2021-2022

5. Community Health and Wellbeing

Where are there differences in health within communities? How might health outcomes be related to other community factors?



Life Expectancy at Birth

79.2
Years

Loup Basin Public Health Department

79.2
Years

Nebraska

78.8
Years

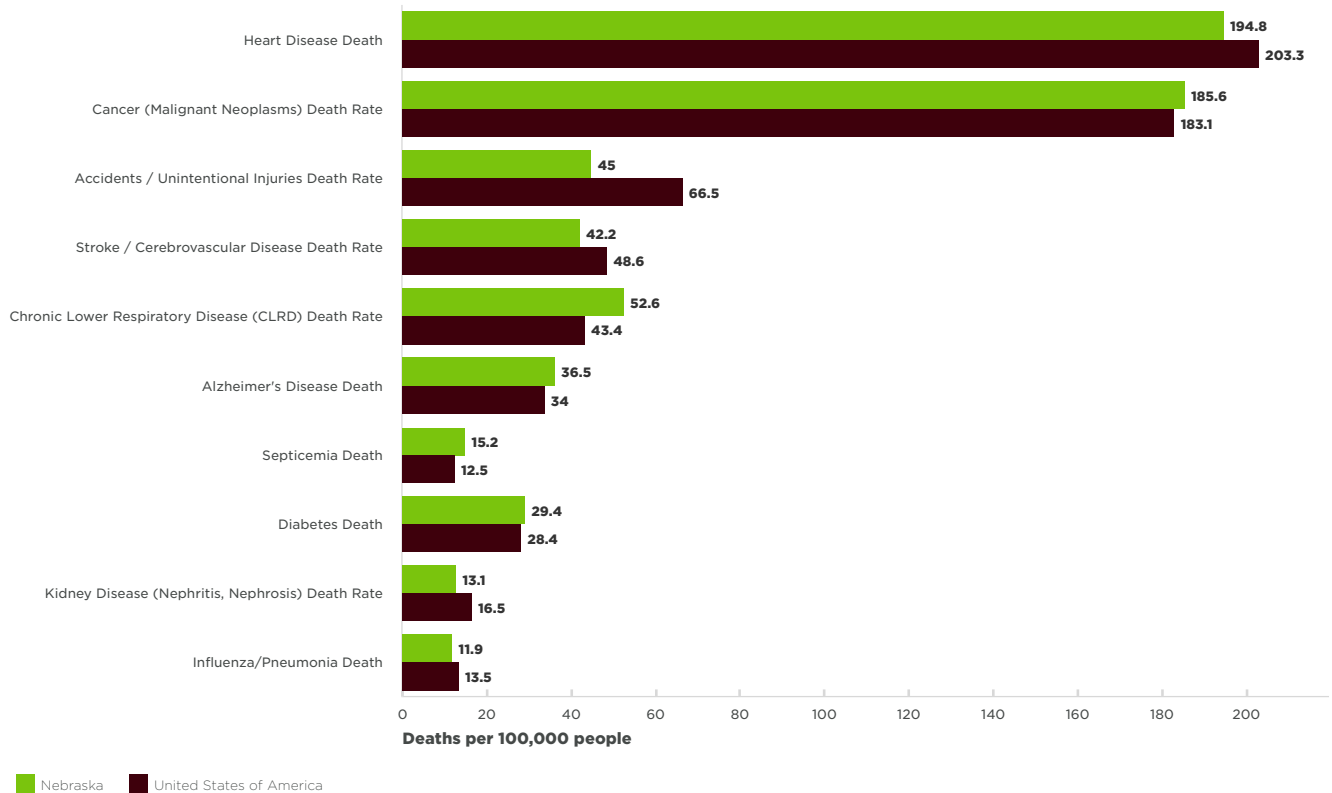
United States of America

Sources: CDC NCHS USALEEP 2010-2015

Geography	2010-2015 Life Expectancy at Birth
Blaine County, NE	No data
Custer County, NE	78.7
Garfield County, NE	76.7
Greeley County, NE	79.9
Howard County, NE	81.5
Loup County, NE	No data
Sherman County, NE	77.3
Valley County, NE	79.5
Wheeler County, NE	77.6
Loup Basin Public Health Department	79.2
Nebraska	79.2
United States of America	78.8

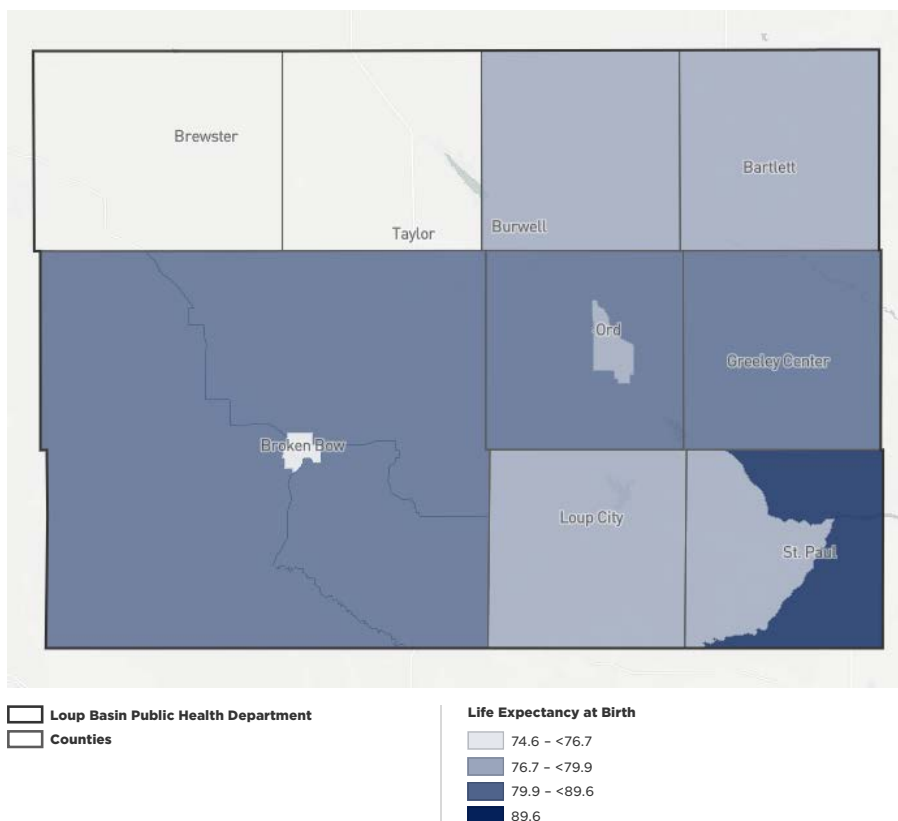
Sources: CDC NCHS USALEEP 2010-2015

Top 10 Statewide Causes of Death



Sources: CDC WONDER Cause of Death 2023 Crude

Life Expectancy at Birth by Census Tract



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Sources: CDC NCHS USALEEP 2010-2015

Access to Healthy Food



Low Access to Healthy Food

40.2%

Of People

Loup Basin Public Health Department

54.2%

Of People

Nebraska

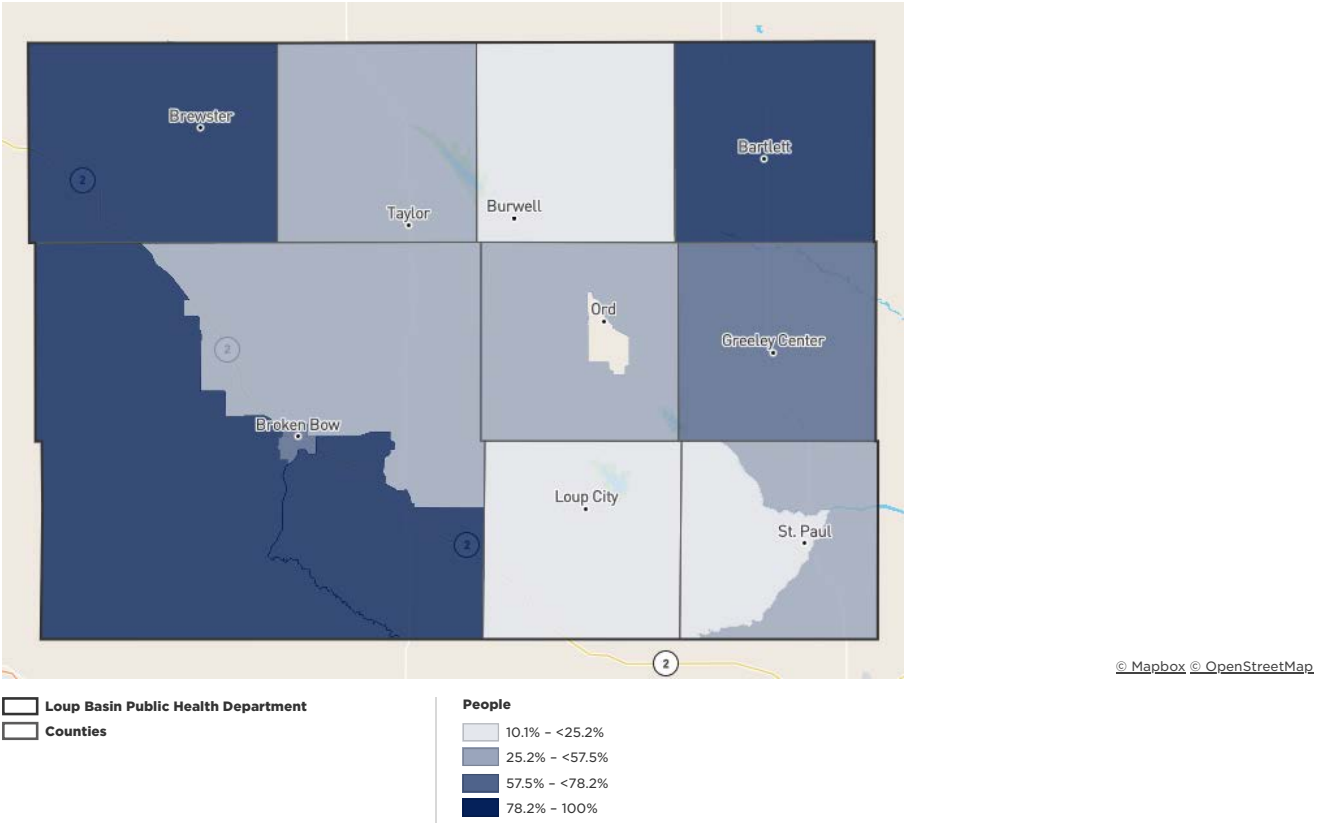
Sources: USDA ERS FARA 2019

Note: Low access is defined as people living 1/2 miles from access point in urban areas and 10 miles in rural areas.

Geography	2019 Low Access to Healthy Food
Blaine County, NE	100%
Custer County, NE	61.9%
Garfield County, NE	10.1%
Greeley County, NE	66.2%
Howard County, NE	20.1%
Loup County, NE	39.9%
Sherman County, NE	20.1%
Valley County, NE	11.5%
Wheeler County, NE	89.1%
Loup Basin Public Health Department	40.2%
Nebraska	54.2%

Sources: USDA ERS FARA 2019

Low Access to Healthy Food



Sources: USDA ERS FARA 2019

Note: Low healthy food census tracts is defined as individuals within the area being far from (1/2 mile in urban areas and 10 miles in rural areas) a supermarket, wholesale club, supercenter, or grocery store.

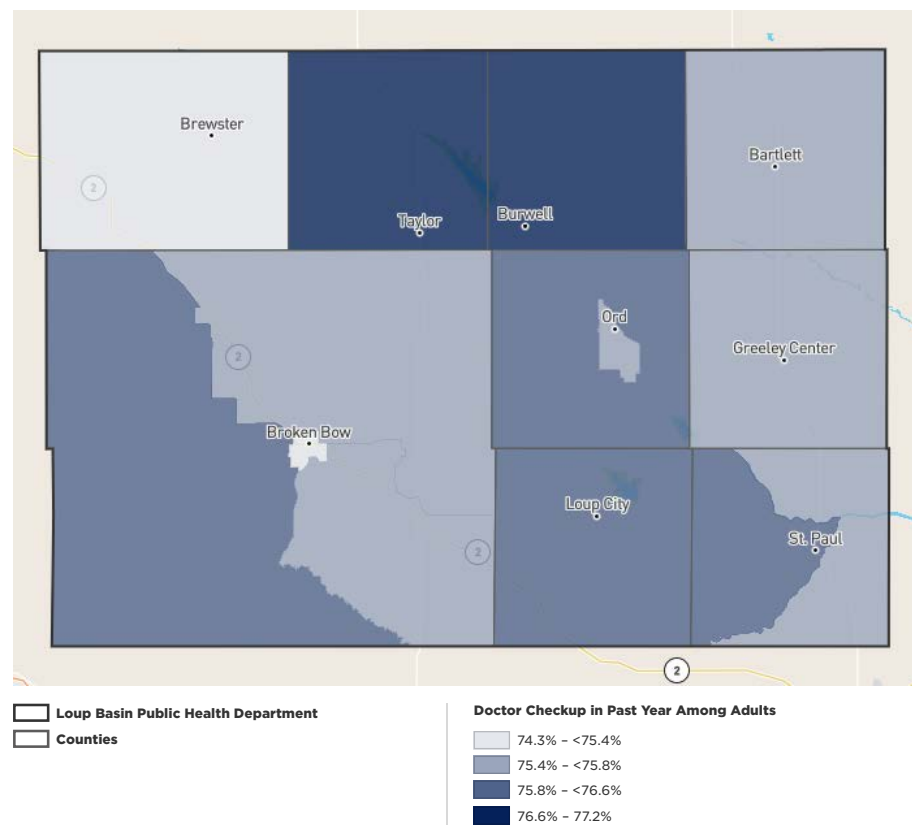
Health Behaviors

Selected Health Behaviors

Geography	2022 Doctor Checkup in Past Year	2022 Dental Visit	2022 Insufficient Sleep	2022 Currently Smoking	2022 Insufficient Physical Activity	2022 Binge Drinking	2022 Core Preventive Services for Women 65 and Over
Loup Basin Public Health Department	75.7%	64%	30.5%	14.9%	27.4%	17.3%	35.1%
Nebraska	74.1%	64.6%	31.4%	14.2%	25.2%	19.2%	40.1%
Blaine County, NE	74.9%	61.1%	32.6%	16.7%	30.1%	17.4%	35.5%
Custer County, NE	74.6%	62.3%	31.7%	15.6%	28%	16.8%	34.7%
Garfield County, NE	77.1%	68.8%	27.9%	12%	23.9%	16.6%	33.7%
Greeley County, NE	74.9%	63.8%	31.5%	14.9%	26.8%	17.7%	36.1%
Howard County, NE	76%	66.1%	28.8%	13.5%	24.7%	18.4%	38.6%
Loup County, NE	77.4%	65.8%	29.7%	13.7%	26.6%	16.2%	39.1%
Sherman County, NE	75.3%	60.3%	31.3%	17.2%	32%	17%	34.7%
Valley County, NE	75.5%	64.8%	29.6%	13.9%	26.6%	18.1%	33.2%
Wheeler County, NE	76.4%	63.9%	29.8%	15.3%	28.5%	16%	34.9%

Sources: CDC BRFSS PLACES 2020, 2022

Doctor Checkup in Past Year Among Adults



© Mapbox © OpenStreetMap

Sources: CDC BRFSS PLACES 2022

Health Outcomes

Poor Physical Health
12.8%
of adults

Loup Basin Public Health Department

11.4%
of adults

Nebraska

Poor Mental Health
13.4%
of adults

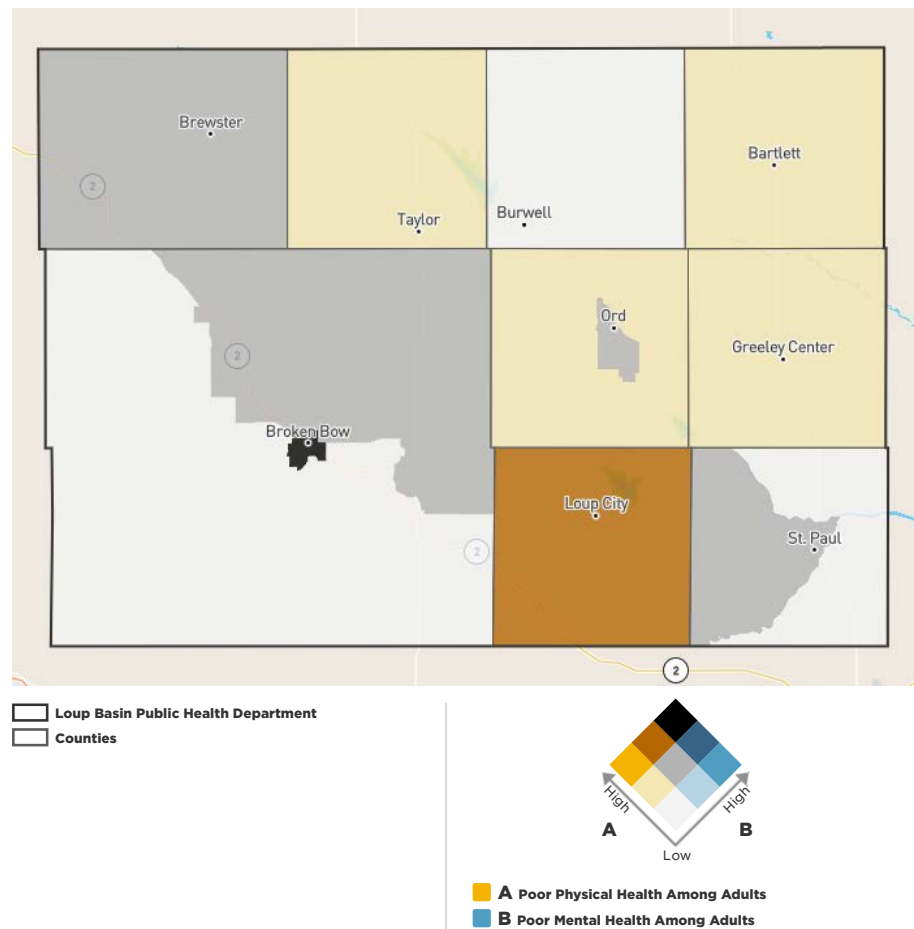
Loup Basin Public Health Department

14.1%
of adults

Nebraska

Sources: CDC BRFSS PLACES 2022

Poor Physical (Yellow) and Poor Mental (Blue) Health by Census Tract



© Mapbox © OpenStreetMap

Sources: CDC BRFSS PLACES 2022

Cause of Death: Heart Disease

Coronary Heart Disease Among Adults

9.2%

of Adults

Loup Basin Public Health Department

6.8%

of Adults

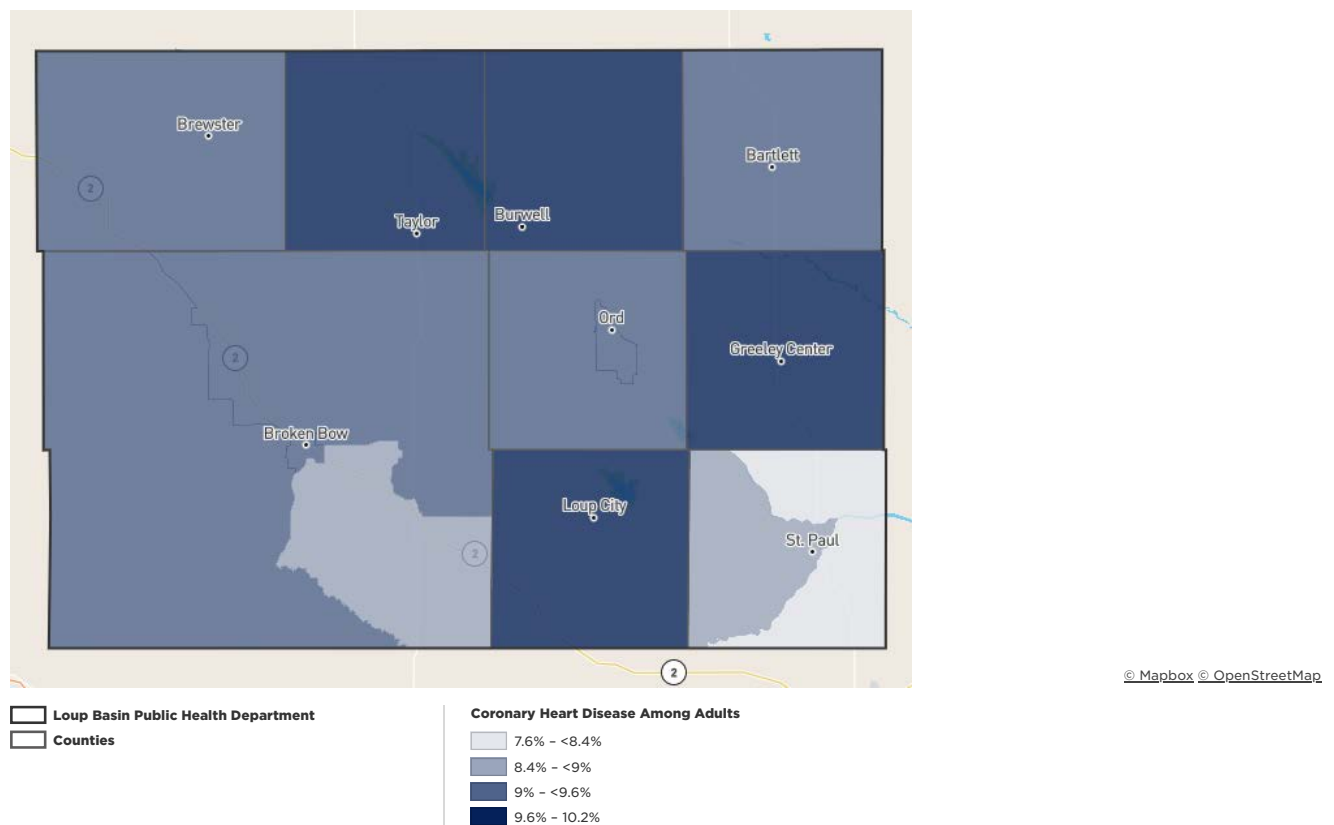
Nebraska

Sources: CDC BRFSS PLACES 2022

Geography	2022 Coronary Heart Disease Among Adults
Blaine County, NE	9.2%
Custer County, NE	9%
Garfield County, NE	9.2%
Greeley County, NE	8.7%
Howard County, NE	8.1%
Loup County, NE	10%
Sherman County, NE	10.5%
Valley County, NE	9.4%
Wheeler County, NE	10.3%
Loup Basin Public Health Department	9.2%
Nebraska	6.8%

Sources: CDC BRFSS PLACES 2022

Prevalence of Heart Disease among Adults



Sources: CDC BRFSS PLACES 2022

Cause of Death: Cancer

Cancer (except skin) Among Adults

10.5%

of Adults

Loup Basin Public Health Department

8%

of Adults

Nebraska

Sources: CDC BRFSS PLACES 2022

Geography	2022 Cancer (except skin) Among Adults
Blaine County, NE	10%
Custer County, NE	10.2%
Garfield County, NE	11.5%
Greeley County, NE	10.6%
Howard County, NE	9.9%
Loup County, NE	11.5%
Sherman County, NE	10.7%
Valley County, NE	10.4%
Wheeler County, NE	11.9%
Loup Basin Public Health Department	10.5%
Nebraska	8%

Sources: CDC BRFSS PLACES 2022

Prevalence of Cancer Among Adults

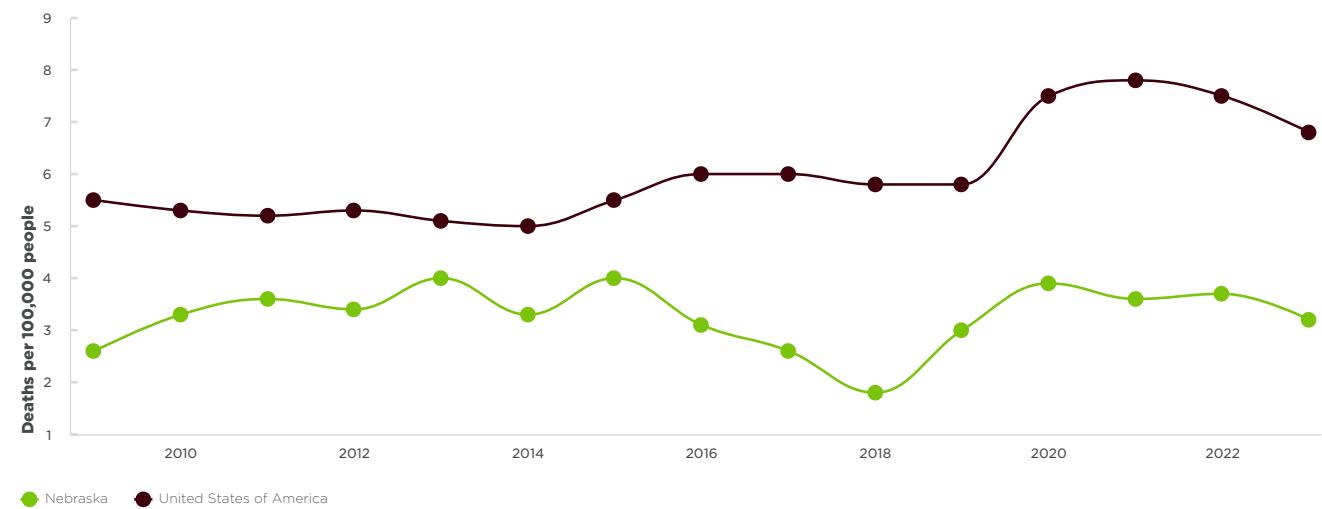


Sources: CDC BRFSS PLACES 2022

Causes of Death: Homicide, Suicide, & Overdose Deaths

Homicide Death Rate

Homicide Death Rate over Time



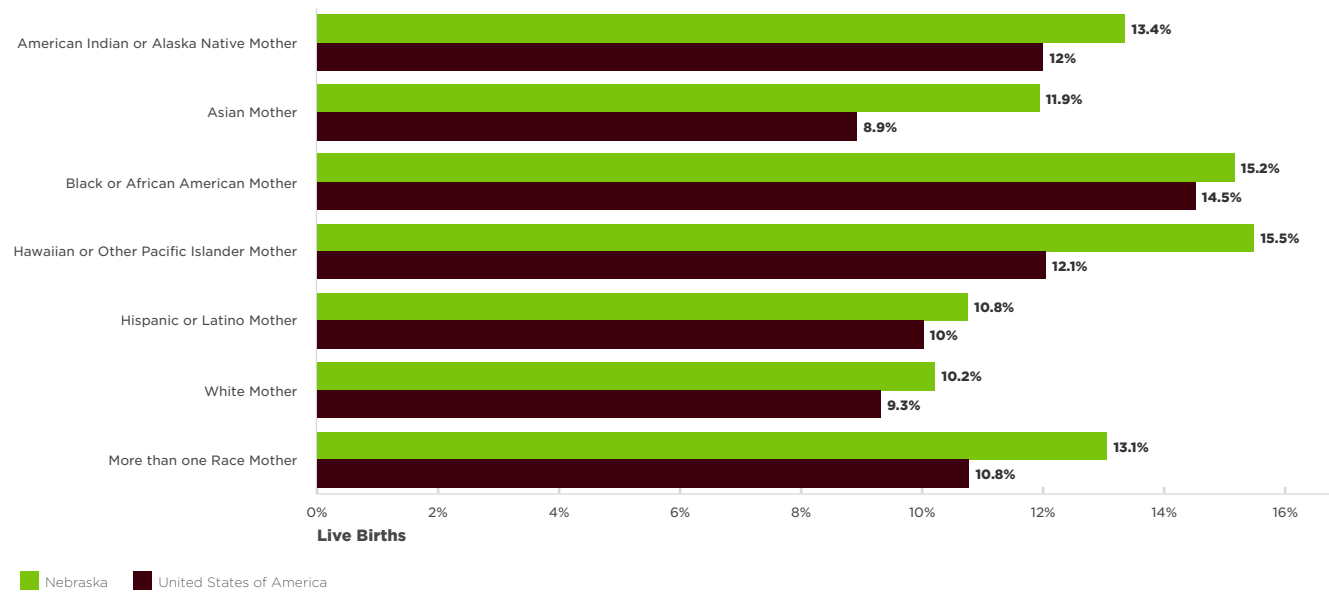
Sources: CDC WONDER Cause of Death

Homicide Death Rate by Race/Ethnicity

Note: all data is for non-Hispanic or Latino unless otherwise listed

Preterm Birth Rate by County and Race/Ethnicity

Preterm Birth Rate by Mother's Race/Ethnicity

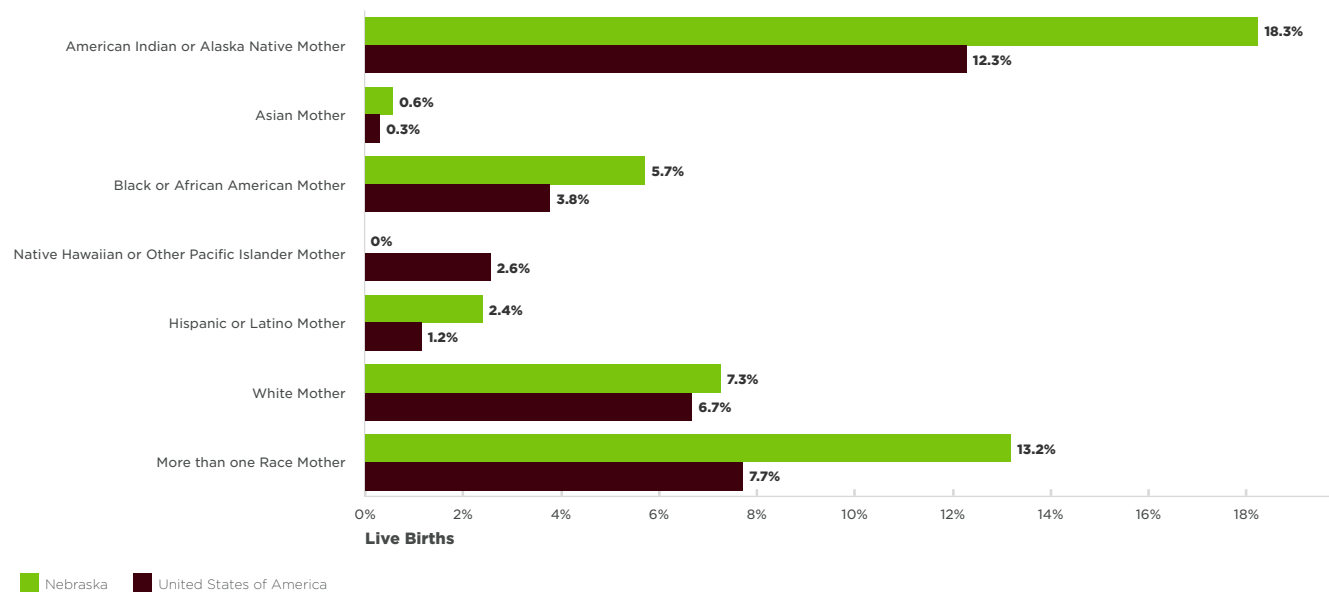


Sources: CDC WONDER Natality 2019-2023

Data is unavailable for Native Hawaiian or Pacific Islander births due to small population size which limits accuracy of estimates.

Births with Tobacco Used During Pregnancy

Births with Tobacco Used During Pregnancy by Race / Ethnicity



Sources: CDC WONDER Natality 2019-2023

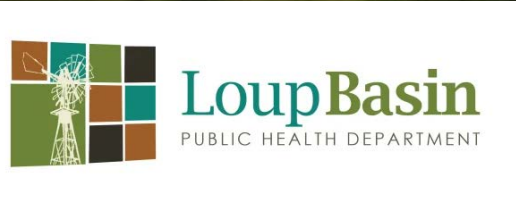
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Loup Basin Public Health Department

For more information about the work we're doing in our community or to contact us, please visit <https://lbphd.socs.net/>

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Loup Basin Public Health Department Community Health Assessment

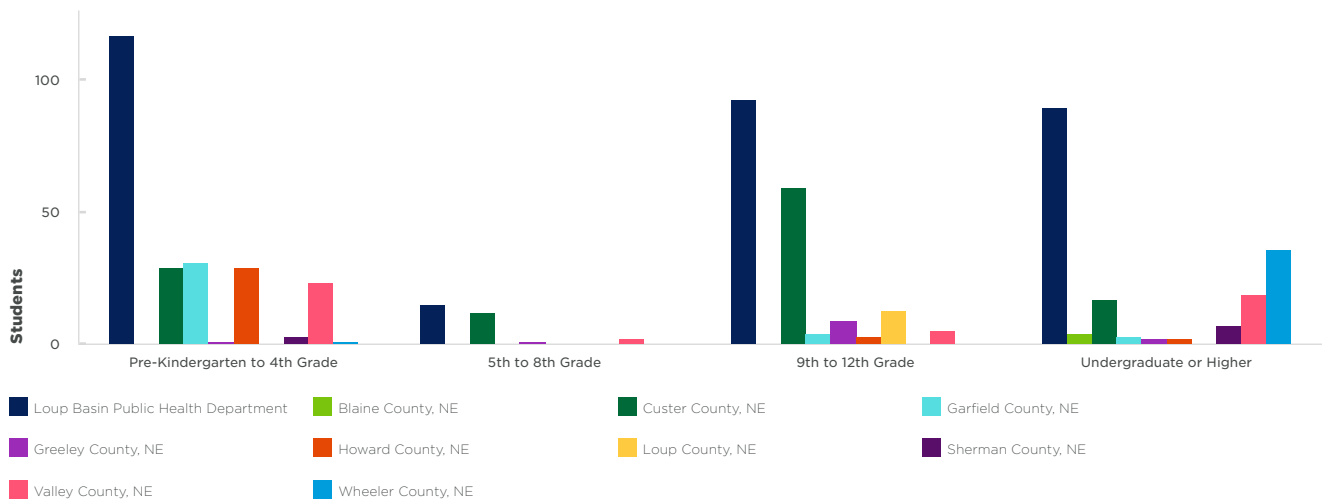
Digital Access

- Lack of access to the internet and/or devices limits a person’s access to critical services that are housed online. People in rural areas are the most affected by this.
- Data about the demographics of people that do not have access to the internet or devices can help to target areas of need.
- Advocacy for the expansion of broadband can help to address the digital divide.

Online Education and Information

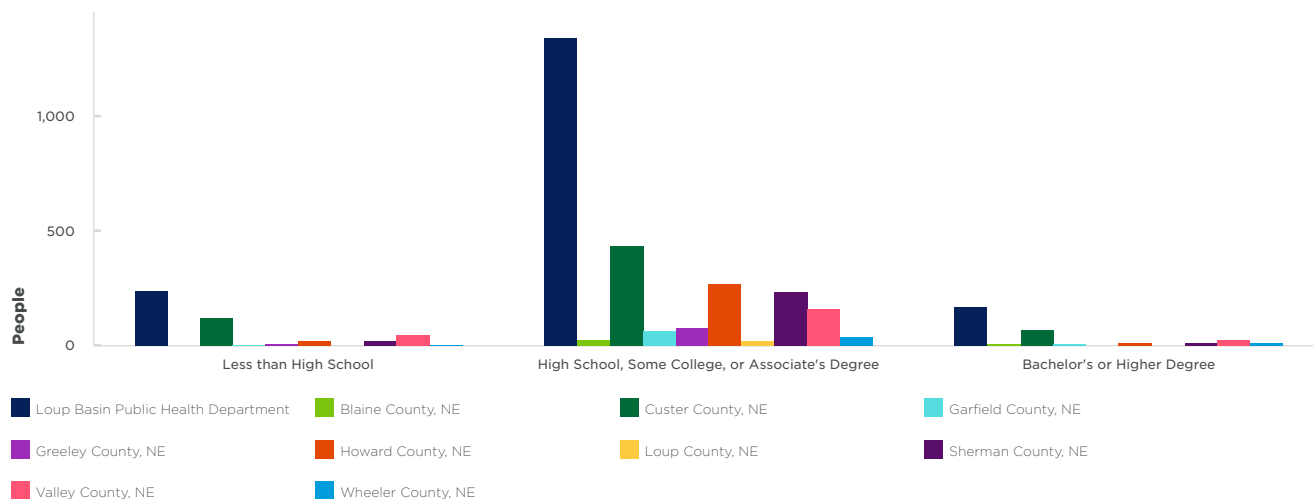
Since the beginning of the COVID-19 public health emergency, hybrid and online education has become more common. People with access to a reliable device and internet are [more likely to succeed](#) in an online education environment. Additionally, having a higher educational attainment can help to afford internet.

Students Without an Internet Subscription or Computer by Grade



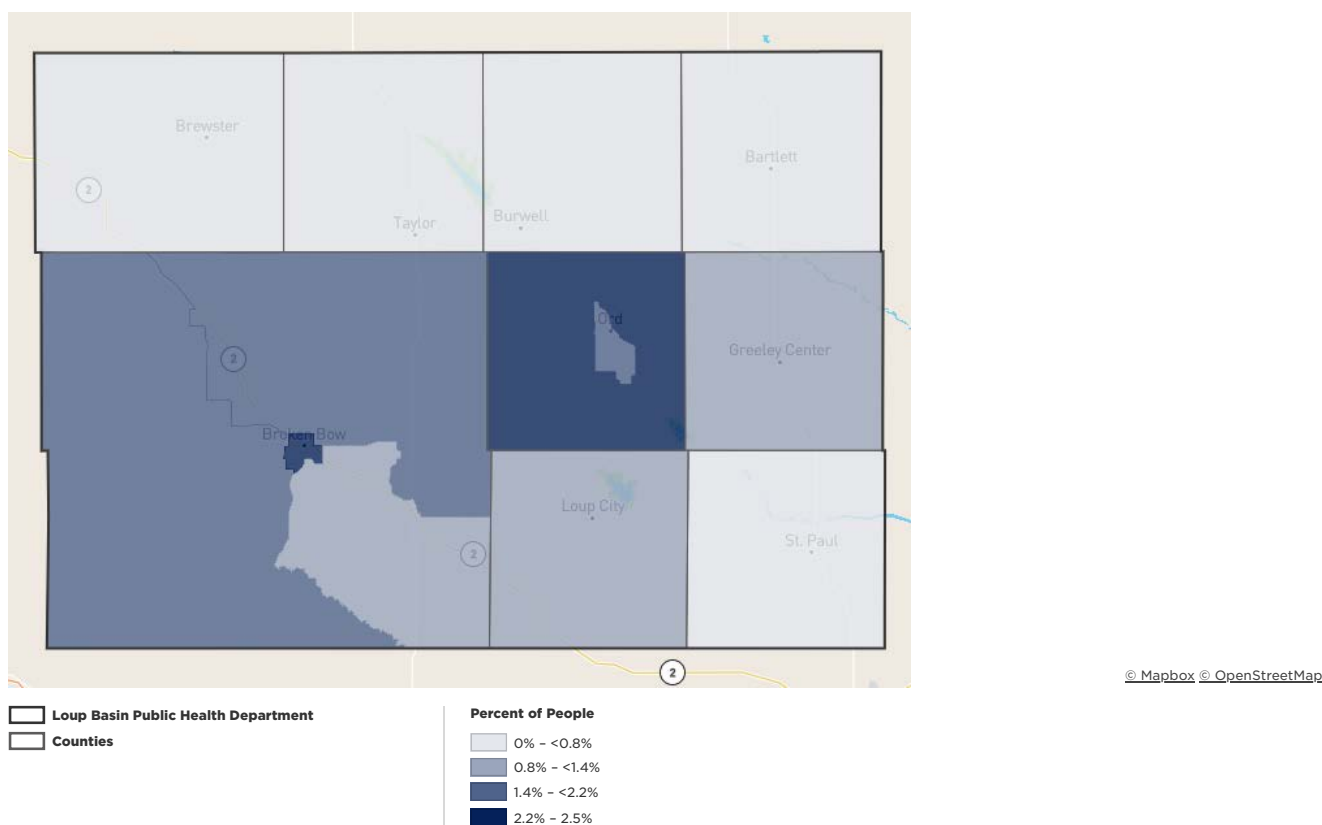
Sources: US Census Bureau ACS 5-year 2019-2023

People Without Computer by Educational Attainment Status



Sources: US Census Bureau ACS 5-year 2019-2023

Households Without Computers



Sources: US Census Bureau ACS 5-year 2019-2023

Digital Connectivity and the Digital Divide

Digital connectivity is necessary for students, parents, and the general public to access the resources needed for schooling, social services, and work. However, not everyone has equal access to digital technology and services. A quality internet connection, for example, requires purchasing multiple devices and paying monthly service providers. Not every household can afford those expenses. Additionally, there are gaps in how children and adults access, learn, and utilize digital technologies in their lives. This means millions of people in the United States are still excluded from connecting digitally.

This report explores digital inclusion helping answer 3 questions:

- 1. **Where is the digital divide?**
- 2. **What factors impact the digital divide?**
- 3. **Who are most negatively impacted?**

Where is the digital divide?

Households without access to both a computer and an internet service provider are excluded from digital connection. Additionally, those with smartphones as their only computer are limited to mobile-only experiences and are excluded from tasks requiring larger screens and improved functionality. The data presented below helps target where these divides exist.

No Internet Access

15.5%

of total households

Loup Basin Public Health Department

7.5%

of total households

Nebraska

No Computer

11.5%

of total households

Loup Basin Public Health Department

5.4%

of total households

Nebraska

No Internet Access or Computer

12.2%

of People

Loup Basin Public Health Department

7.2%

of People

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023 No Internet Access	2019-2023 No Computer	2019-2023 No Internet Access or Computer
Blaine County, NE	18.8%	15.6%	16.6%
Custer County, NE	15.1%	11.7%	12.7%
Garfield County, NE	15.6%	8.3%	11.4%
Greeley County, NE	12.8%	8%	9.8%
Howard County, NE	14.7%	11.4%	10%
Loup County, NE	13.3%	6.8%	9.8%
Sherman County, NE	20.6%	16.2%	14.4%
Valley County, NE	14.9%	10.4%	13.3%
Wheeler County, NE	17.5%	15.9%	18.9%
Loup Basin Public Health Department	15.5%	11.5%	12.2%
Nebraska	7.5%	5.4%	7.2%

Sources: US Census Bureau ACS 5-year 2019-2023

What factors impact the digital divide?

Two factors that exclude communities from digital connectivity are **poverty and proximity**. If a household cannot afford a computer and an internet service provider, they are excluded. Also, if a household does not reside in an area with quality internet service, they are also excluded. View the [FCC's broadband speed guide](#) for more information on quality service.

Households Below Poverty Level

10.4%

of Households

Loup Basin Public Health Department

11.1%

of Households

Nebraska

Severely Cost Burdened

20.5%

of low income households

Loup Basin Public Health Department

23.3%

of low income households

Nebraska

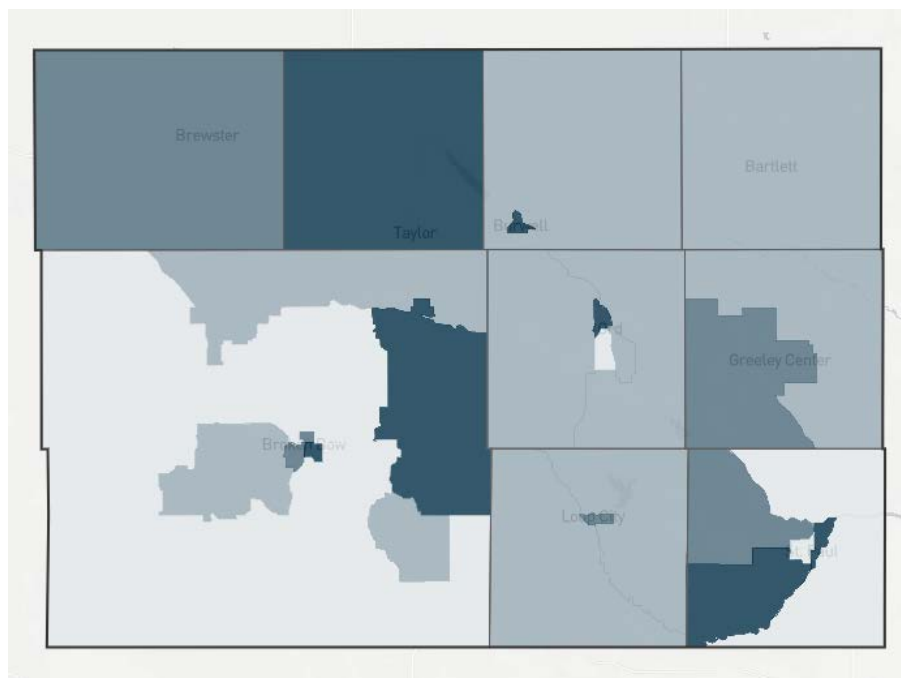
Sources: HUD CHAS 2017-2021; US Census Bureau ACS 5-year 2019-2023

Note: Severely cost burdened are those households (owner or renter) whose monthly housing costs (including utilities) exceed 30% of their monthly income. Low income are those households (owner or renter) who earn up to 80% of the US Housing and Urban Development Area Median Family Income (HAMFI).

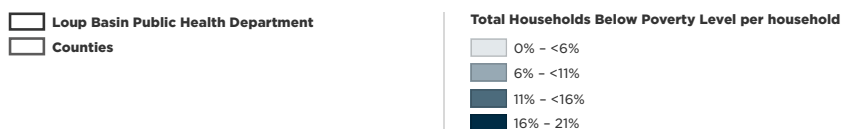
Geography	2019-2023 Households Below Poverty Level	2017-2021 Low Income Households Severely Cost Burdened
Blaine County, NE	14.6%	21.4%
Custer County, NE	9.4%	20.4%
Garfield County, NE	16.7%	26.6%
Greeley County, NE	10.5%	16.8%
Howard County, NE	9%	25%
Loup County, NE	16.1%	33.1%
Sherman County, NE	10.9%	20.7%
Valley County, NE	11.3%	13.4%
Wheeler County, NE	6.4%	11.6%
Loup Basin Public Health Department	10.4%	20.5%
Nebraska	11.1%	23.3%

Sources: HUD CHAS 2017-2021; US Census Bureau ACS 5-year 2019-2023

Households Below Poverty by Census Block Group



© Mapbox © OpenStreetMap



Sources: US Census Bureau ACS 5-year 2019-2023

Who are most negatively impacted?

All households without access to digital connectivity are negatively impacted. However, some populations can be more vulnerable to longer-term impacts such as children enrolled in school, families with young children, and persons of color. Scroll through the pages below to explore more.

Enrolled in Kindergarten to Grade 12

4,865

Students

Loup Basin Public Health Department

351,470

Students

Nebraska

Children in Households Under Age 18 Without Computer

1%

of Children

Loup Basin Public Health Department

0.8%

of Children

Nebraska

Sources: US Census Bureau ACS 5-year 2019-2023

Geography	2019-2023	2019-2023
	Enrolled in Kindergarten to Grade 12	Children in Households Under Age 18 Without Computer
Blaine County, NE	46	0%
Custer County, NE	1,752	1.3%
Garfield County, NE	290	0%
Greeley County, NE	357	1.7%
Howard County, NE	1,145	1.6%
Loup County, NE	77	0%
Sherman County, NE	444	0.5%
Valley County, NE	695	0.2%
Wheeler County, NE	59	0%
Loup Basin Public Health Department	4,865	1%
Nebraska	351,470	0.8%

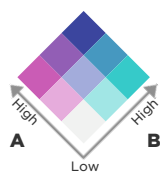
Sources: US Census Bureau ACS 5-year 2019-2023

Dark Purple: Overlapping Students Enrolled in K-12 and Children Without A Computer



© Mapbox © OpenStreetMap

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 Counties



A Enrolled in Kindergarten to Grade 12
B Children Without a Computer

Sources: US Census Bureau ACS 5-year 2019-2023

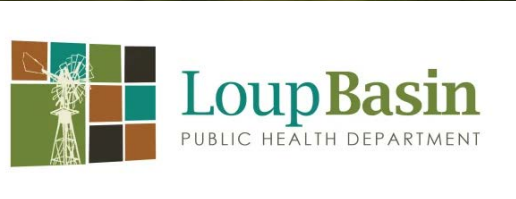
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Disability Overview

Disabilities include physical difficulties, like trouble walking, and developmental and behavioral disabilities. Anyone could become disabled at any time for a short or long period of time, and may experience challenges working, accessing healthcare, and more. We can improve the health and wellness of individuals with disabilities by making it easier to access resources and services when and where they're needed, ["in a way that is responsive to their needs and preferences."](#)¹²

People Living With a Disability

Population Living with a Disability



Live with a Disability

15.2%

of People

Loup Basin Public Health Department

12.1%

of People

Nebraska

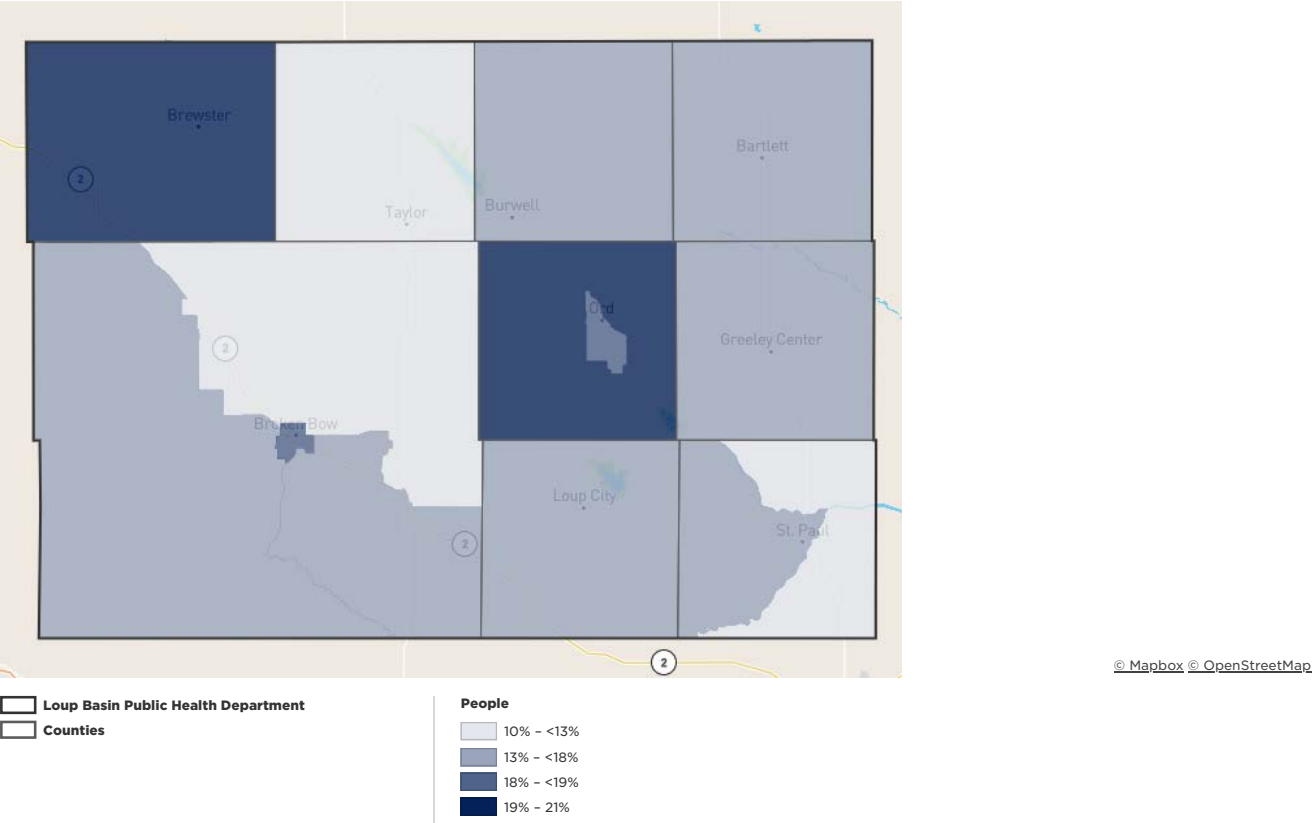
Sources: US Census Bureau ACS 5-year 2019-2023

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

Geography	2019-2023 People Living With a Disability
Blaine County, NE	20.5%
Custer County, NE	14.9%
Garfield County, NE	14.9%
Greeley County, NE	15.3%
Howard County, NE	14.1%
Loup County, NE	12.1%
Sherman County, NE	14.4%
Valley County, NE	18.6%
Wheeler County, NE	13.1%
Loup Basin Public Health Department	15.2%
Nebraska	12.1%

Sources: US Census Bureau ACS 5-year 2019-2023

People Living With Disabilities



Sources: US Census Bureau ACS 5-year 2019-2023

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

People Living With a Disability - by Type

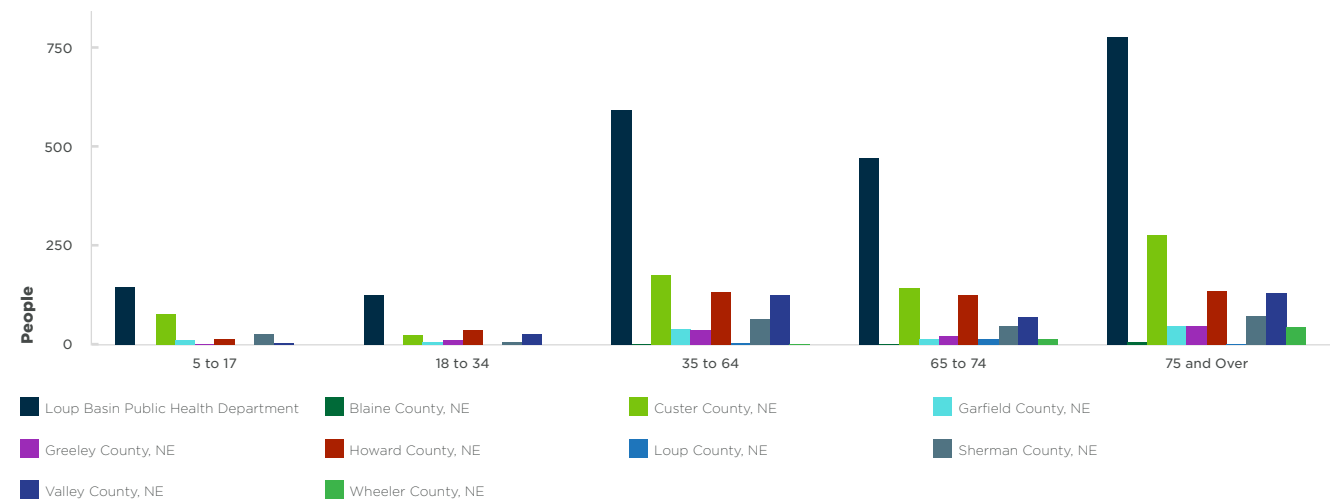
Types of Disabilities

▲▼ Data Sources	Loup Basin Public Health Department ▲▼	Nebraska ▲▼	Blaine County, NE ▲▼	Custer County, NE ▲▼	Garfield County, NE ▲▼	Greeley County, NE ▲▼	Howard County, NE ▲▼
2019-2023 Vision Difficulty	728	39,959	7	235	19	78	206
2019-2023 Hearing Difficulty	1,816	74,509	35	604	132	184	335
2019-2023 Cognitive Difficulty	1,310	87,996	3	487	66	91	262
2019-2023 Ambulatory Difficulty	2,217	102,683	52	764	102	139	445
2019-2023 Independent Living Difficulty	1,325	71,174	1	486	84	91	306
2019-2023 Self-Care Difficulty	751	34,367	0	281	17	29	193

Sources: US Census Bureau ACS 5-year 2019-2023

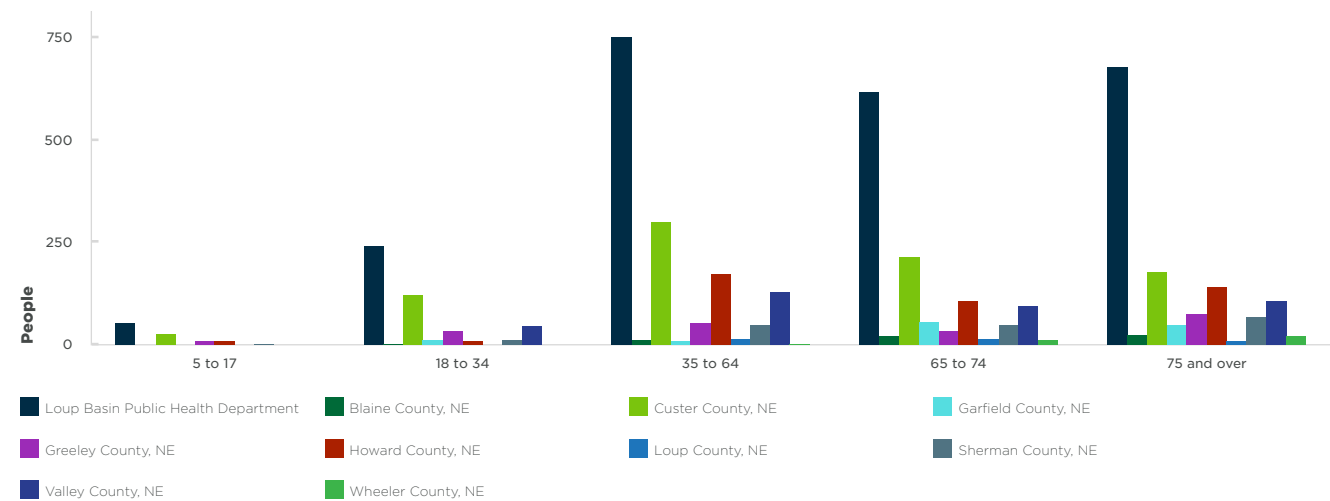
People Living With a Disability - by Sex and Age

Females with Disability by Age Group



Sources: US Census Bureau ACS 5-year 2019-2023

Males with Disability by Age Group



Sources: US Census Bureau ACS 5-year 2019-2023

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LBPHD is currently in the process of implementing their 2025-2028 Community Health Improvement Plan. Please stay tuned for this tab to be updated.

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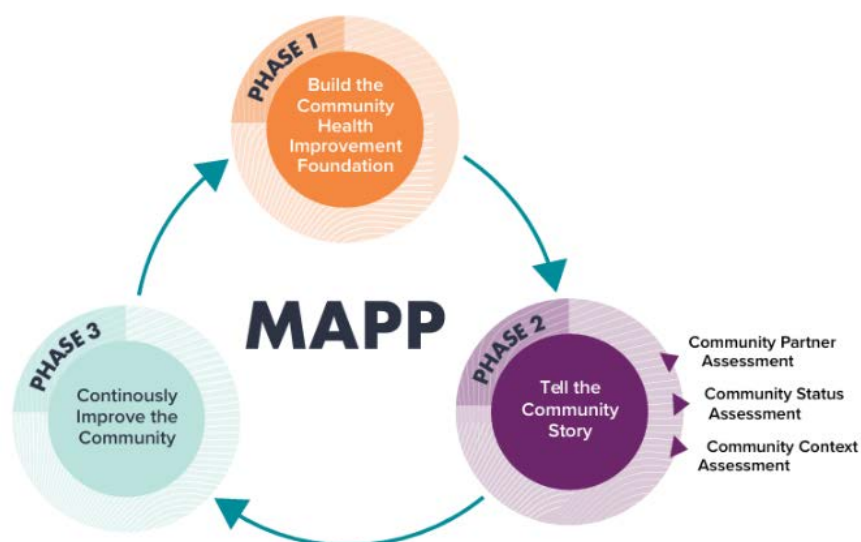
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Mobilizing for Action through Planning and Partnerships



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Partnerships

LBPHD would like to extend our sincere appreciation to all the partners and stakeholders who contributed their time, expertise, and insight throughout the Community Health Assessment and Improvement process—their collaboration was instrumental in identifying priorities, shaping strategies, and advancing the health and well-being of our community.

Callaway District Hospital
Howard County Medical Center
Jennie M. Melham Memorial Medical Center
Valley County Health System

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Data Sources and Indicators

Indicator	Data Source
Age Totals	US Census
Respiratory Hazard Environmental Justice Index	EPA Environmental Justice
Air Toxics Cancer Risk Environmental Justice Index	EPA Environmental Justice
Average Months on Waiting List for HUD Assisted Housing Units	HUD Picture of Subsidized Household
Average Number of Jobs Within a 30 Minute Public Transit	Univ of MN Access Across America
Population With Bachelor's Degree or Higher Education	US Census
Binge Drinking Among Adults	CDC
Black, Indigenous, and People of Color (BIPOC) Population	US Census
Births With Prenatal Care Started in First Trimester	CDC
Births With Tobacco Use During Pregnancy	CDC
Bullying on Basis of Disability	CRDC
Bullying on Basis of Race, Color, or National Origin	CRDC
Bullying on Basis of Sex	CRDC
Cancer (Except Skin) Among Adults	CDC
Causes of Death	CDC
Child Population	US Census
Childcare Centers	CBP
Chlamydia Rate	CDC
Chronically Absent Students	CRDC
Colorectal Cancer Screening Among Adults	CDC
Commute Means of Transportation	US Census
Core Preventive Services for Men 65 and Over	CDC
Core Preventive Services for Women 65 and Over	CDC
Coronary Heart Disease Among Adults	CDC
COVID-19 Deaths	CDC
Dental Visit Among Adults	CDC
Dentist Ratio	NPPES
Diagnosed Depression Among Adults	CDC
Diagnosed Diabetes Among Adults	CDC
Diesel Particulate Matter Level in Air	EPA Environmental Justice
Disconnected Youth	US Census
Doctor Checkup in Past Year Among Adults	CDC
Drug Overdose Death Rate	CDC
Educational Attainment	US Census
Employment	US Census
Enrolled In Nursery or Preschool	US Census
Enrollment Ages 3-4	US Census
Enrollment by Age	US Census
Excessive Housing Costs by Tenure (Owner Vs Renter)	US Census
Excessive Housing Costs Overall	US Census
Fair Or Poor Health	CDC
Fast Food Restaurants per 1,000 People	USDA ERS Food Environment Atlas

Fatal Motor Vehicle Crashes by Reason for Crash [↗]	NHTSA FARS
Fatal Motor Vehicle Crashes Total [↗]	NHTSA FARS
Food Insecurity [↗]	Map the Meal Gap 2021
Foreign Born (Immigrants) [↗]	US Census
Gonorrhea Rate [↗]	CDC
Grocery Stores [↗]	USDA ERS Food Environment Atlas
Health Insurance Status [↗]	US Census
High Blood Pressure Among Adults [↗]	CDC
High School Graduation Rate [↗]	Department of Education EDFacts
HIV New Diagnoses Rate [↗]	AIDSvU Emory University Rollins School of Public Health
Homeless Students [↗]	Department of Education EDFacts
Homeownership [↗]	US Census
Homicides [↗]	CDC
Households in Poverty Not Receiving SNAP [↗]	US Census
Households Receiving SNAP [↗]	US Census
Housing Units with No Vehicles with Low Access to Healthy Food [↗]	USDA ERS Food Access Research Atlas
Housing Units with Potential for Lead Paint [↗]	US Census
Infant Breastfed At Discharge [↗]	CDC
Infant Mortality Rate	NCHS Natality and Mortality Files via RWJF CHR
Insufficient Sleep [↗]	CDC
Labor Force Participation Rate [↗]	US Census
Language Spoken at Home [↗]	US Census
Life Expectancy at Birth [↗]	CDC NCHS
Limited English Proficiency [↗]	US Census
Linguistic Isolation [↗]	US Census
Long Commute Drive Alone [↗]	US Census
Low Birth Weight [↗]	CDC
Low Income People By Combined Urban/Rural Distance With Low Access To Healthy Food [↗]	USDA ERS Food Access Research Atlas
Mammography Among Women 50 To 74 [↗]	CDC
Median Household Income [↗]	US Census
Social Associations [↗]	CBP
Mental Health Provider Ratio [↗]	NPPES
No Leisure-Time Physical Activity Among Adults [↗]	CDC
Obesity Among Adults [↗]	CDC
Pap (Papanicolaou) Smear Test Among Women 21 To 65 [↗]	CDC
People by Combined Urban/Rural Distance with Low Access to Healthy Food [↗]	USDA ERS Food Access Research Atlas
People in Households with Computer and Internet Subscription [↗]	US Census
People Living with Disabilities [↗]	US Census
Percent Area Covered By Parks [↗]	openICPSR NaNDA
Poor Mental Health Among Adults [↗]	CDC

Poor Physical Health Among Adults	CDC
Poverty by Family Type and Presence of Children	US Census
People Below Poverty Level	US Census
Presence of Severe Housing Problems by Tenure And HAMFI	HUD CHAS
Preterm Births	CDC
Preventable Hospitalizations	CMS
Primary And Secondary Syphilis Rate	CDC
Primary Care Physician Ratio	NPPES
Race/Ethnicity Totals	US Census
Regular Smoking Among Adults	CDC
Senior Population	US Census
Seniors Living Alone	US Census
Sex Totals	US Census
Single-Parent Households	US Census
SNAP Authorized Stores	USDA ERS Food Environment Atlas
Stroke Among Adults	CDC
Students With Access to a Computer and Internet Subscription	US Census
Supercenters/Club Stores	USDA ERS Food Environment Atlas
Teen Birth Rate	CDC
Total Jobs	LEHD LODS
Total Population	US Census
Unemployment	BLS
Vehicles Available for Occupied Housing Unit - No Vehicles	US Census
Veterans	US Census
Violent Crime Rate	FBI UCR
Walkability	EPA Walkability
WIC Authorized Stores	USDA ERS Food Environment Atlas
Peri Stats Report Card	March of Dimes
NRPFSS	Bureau of Sociological Research
Maternity Care Report	March of Dimes

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