

Community Health Needs Assessment

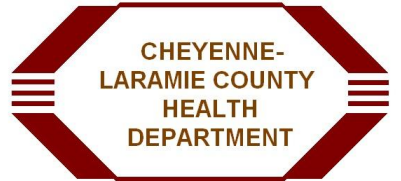
Laramie County | 2022



Cheyenne Regional



LARAMIE COUNTY
COMMUNITY PARTNERSHIP



CHEYENNE-
LARAMIE COUNTY
HEALTH
DEPARTMENT

MAIN AUTHORS

Amy Spieker, DrPH; Angela Vaughn, DHSc; Brittany Wardle, MPH; Shelbie Sherard

ACKNOWLEDGEMENTS

We appreciate the collaboration with Cheyenne-Laramie County Health Department, especially while they were on the front lines of a global pandemic. Thank you to Melissa Taylor, MPH for the design of this document. We are thankful to work with an engaged community and appreciate their participation in the needs assessment process.

STEERING COMMITTEE & ADVISORY COMMITTEE

Kathy Emmons, Director, Cheyenne-Laramie County Health Department
Sabrina Lane, Executive Director, Wyoming 2-1-1
Brianna Best, Data Management Manager, Cheyenne Regional
Emily Robinette, Public Information Officer, Cheyenne-Laramie County Health Department
Kasey Mullins, Nursing Director, Cheyenne-Laramie County Health Department
Rod Hottle, Community Impact Coordinator, United Way of Laramie County
Angela Vaughn, Community Health Project Manager, Cheyenne Regional
Brittany Wardle, Community Prevention Project Director, Cheyenne Regional
Shelbie Sherard, Community Outreach/Grant Specialist, Cheyenne Regional
Amy Spieker, Director of Community Health, Cheyenne Regional

COVER DESIGN

Photo by [Claud Richmond](#) on [Unsplash](#) Vedauwoo (an area of rocky outcrops) is located in southeastern Wyoming, north of Interstate 80, between Laramie and Cheyenne. Vedauwoo, according to some, is a version of the Arapaho word "bito'o'wu" meaning "earth-born".

SUGGESTED CITATION

2022 Laramie County Community Health Needs Assessment. Laramie County Community Partnership. April 2022.

TABLE OF CONTENTS

WHAT IS HEALTH?	5
HEALTH EQUITY & HEALTH DISPARITIES.....	5
DATA OUTCOMES IN THE SDOH FRAMEWORK	6
LARAMIE COUNTY DEMOGRAPHICS.....	7
SOCIAL AND COMMUNITY CONTEXT	8
ECONOMIC STABILITY	9
NEIGHBORHOOD & PHYSICAL ENVIRONMENT.....	10
EDUCATION ACCESS & QUALITY	11
FOOD	12
HEALTH CARE SYSTEM	13
HEALTH FACTORS & OUTCOMES.....	14
BACKGROUND	15
ESTABLISH STEERING & ADVISORY COMMITTEES.....	15
METHODS FOR DATA COLLECTION AND PRIORITY SELECTION	16
SELECTED PRIORITY AREAS	18
REFERENCES.....	19
APPENDIX A.....	22

EXECUTIVE SUMMARY

The Laramie County Community Partnership (LCCP) - a unique collaborative among multidisciplinary partners - created this community health needs assessment to serve as the foundation for our community health improvement efforts. Our mission is to maximize resources and influence change to improve conditions of well being for people in Laramie County.

A **community health needs assessment** (CHNA) is a “systematic examination of the health status indicators for a given population that is used to identify key problems and assets in a community.” A collaborative community approach that values input from a wide variety of partners is a critical component of a needs assessment.

For this assessment, a **social determinant of health framework** was utilized, recognizing the substantial impact social determinants have on people’s health and well-being. The categories included economic stability, neighborhood and physical environment, education, food, and healthcare systems.

IDENTIFIED PRIORITIES & GOALS

NEIGHBORHOOD & PHYSICAL ENVIRONMENT

Increase housing stability
Increase community safety within the community

HEALTHCARE SYSTEMS

Increase access to comprehensive care
Increase provider access through community partnerships

ECONOMIC STABILITY

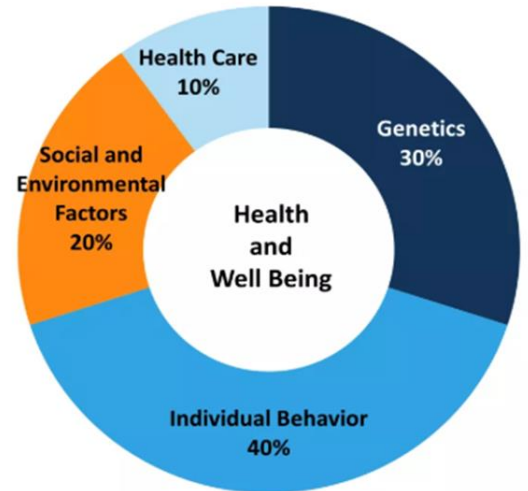
Increase partnerships and sustainable resources to support economic stability
Cultivate environments that increase workforce participation

WHAT IS HEALTH?

Health can be defined in many ways and is made up of several parts including genetics, individual behaviors, and the environment. When completing this assessment, LCCP chose to define health in the following ways:

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

Community Health is working to influence health where we live, learn, work, and play.



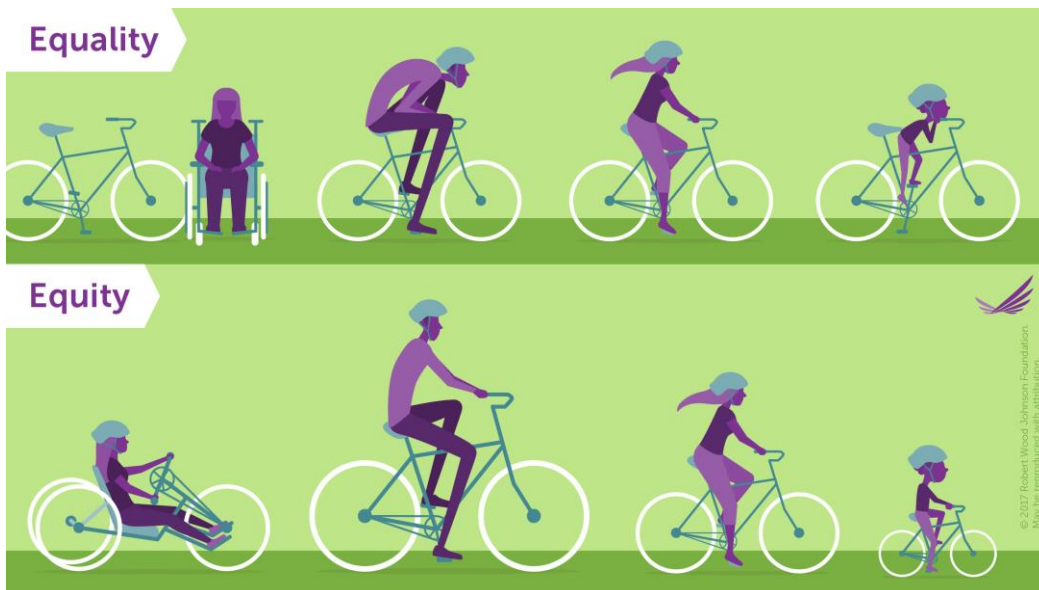
HEALTH EQUITY & HEALTH DISPARITIES

Health equity means that everyone has a fair and just opportunity to be as healthy as possible. Equity is different than equality. Equity means expanding opportunities for health and not assuming one approach will work universally.

Health disparities are differences in key determinants of health between groups of people defined by social, demographic, economic, environmental, or geographic conditions. Reducing disparities through policies, practices, and organizational systems can health improve health for all people.

Health disparities and health equity are closely related. Health equity is the principle and action that motivates us to eliminate health disparities.

In health equity, one size does not fit all



DATA OUTCOMES IN THE SDOH FRAMEWORK

One way to evaluate health is by looking at the social determinants of health (SDOH). According to the World Health Organization, social determinants of health 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 and health.

This CHNA was developed using a social determinant of health framework, recognizing the substantial impact social determinants have on people’s health and well-being. We utilized the Kaiser Family Foundation’s Issue Brief, “Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity”, to guide the process. This allowed for clarity in defining the categories, directing baseline data collection, and prioritization of community health needs.

Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		Stress	
Support	Walkability				
	Zip code / geography				

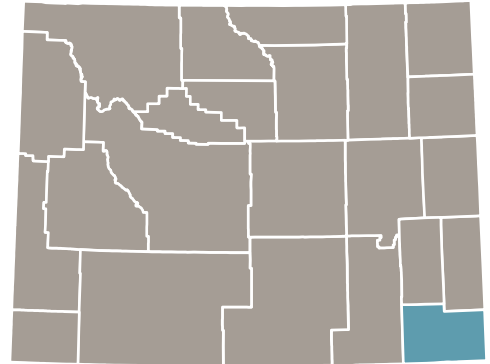
Health Outcomes
 Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

Addressing social determinants of health are crucial to improving health and reducing health disparities. Research shows SDOH impact a person's individual health more than any individual behaviors on their own such as diet, tobacco use, or exercise. For example, children born to parents who have not completed high school are more likely to live in an environment that poses barriers to health such as lack of safety, exposed garbage, and substandard housing. They also are less likely to have access to sidewalks, parks or playgrounds, recreation centers, or a library. By improving the conditions and environments we can make a greater impact on overall health.

LARAMIE COUNTY DEMOGRAPHICS

Laramie County is located in southeast Wyoming and based on population, is the largest of Wyoming’s 23 counties. It is home to the both the largest city by population and the state capitol—Cheyenne, F.E. Warren Air Force Base, as well as rural open spaces and towns.

Interstate 80—a major national freeway running from the east to west coast crosses Laramie County in the south. Interstate 25—a primarily north to south national freeway runs from the south border to the north. These two interstates intersect in Cheyenne.



Laramie County, Wyoming 2020 Demographics		
	Number	Percent
Total Population	100,512	
Persons under 5 years	6,332	6%
Persons over 65 years	16,584	16%
Female Persons	49,552	49%
Veterans (2015-2019)	10,592	11%
Race and Hispanic Origin		
White alone	92,371	92%
Black or African American alone	2,513	3%
American Indian and Alaska Native alone	1,106	1%
Asian alone	1,407	1%
Native Hawaiian and Other Pacific Islander alone	201	0%
Two or more races	3,015	3%
Hispanic or Latino	14,976	15%
White alone, not Hispanic or Latino	79,002	79%
Median Household Income (2016-2020)	\$69,369	

In 2020 the population of Laramie County, Wyoming was 100,512. Among residents, 6% are under the age of 5 and 16% are over the age of 65. The median age in Laramie county is 37 years.

Based on combined years 2015-2019, 11% of residents were Veterans. Slightly higher than the State (8%).

Laramie County has a slightly higher proportion of persons identifying as Hispanic or Latino than the State as a whole, 15% compared to 10%.

Based on the County Health Rankings & Roadmaps, Laramie County is ranked 5th out of 23 counties for health factors and 13th for health outcomes.



Median Income
\$69,369



Median Property Value
\$227,900

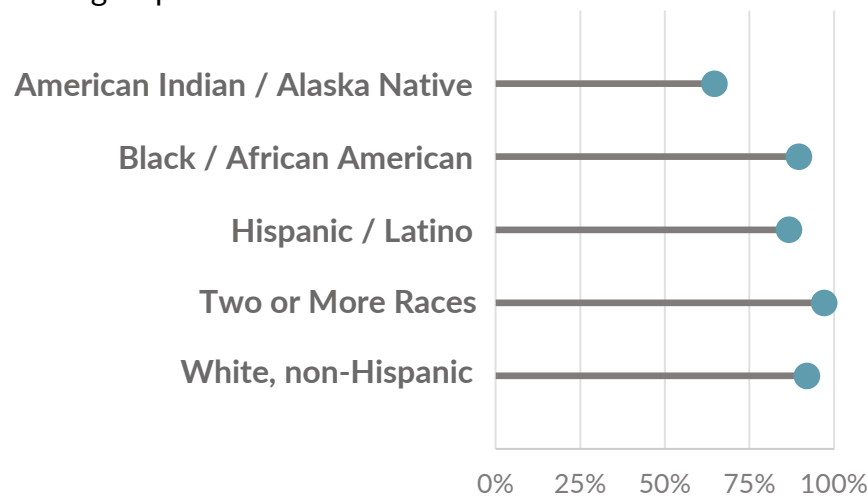
The County Health Rankings provide a snapshot of a community’s health and a starting point for investigating and discussing ways to improve health. Explore all the indicators that factor into the County Health Rankings for Laramie County and Wyoming at www.countyhealthrankings.org

SOCIAL AND COMMUNITY CONTEXT

The social and community context refers to the relationships in communities both in between people, such as between family, friends, co-workers and community members; as well as between individuals and institutions or systems within the communities where they live and work. Disparities in systems, which are out of an individuals' control, can have a negative impact on health.

Laramie County has systems that support positive relationships and connectedness.

86% of Laramie County Residents report having an internet subscription, however this access is not consistent across all racial groups.



81.1% The majority of Laramie County youth report they have an adult in their life they can talk to about their problems.

Wyoming: 83%

13.1 Laramie County has more social associations per 10,000 residents than the U.S.

Wyoming: 13.9

U.S.: 9.3

Disparities in systems, which are out of an individuals' control, can have a negative impact on health.

Racial and ethnic minority groups, throughout the United States, experience higher rates of illness and death compared to their White counterparts. In Laramie County, the life expectancy of non-Hispanic, Black / African American residents is almost four years lower than that of White residents.

17.3% Almost one in five people have depression in the Medicare population, slightly higher than the Wyoming rate.

Wyoming: 15.0%

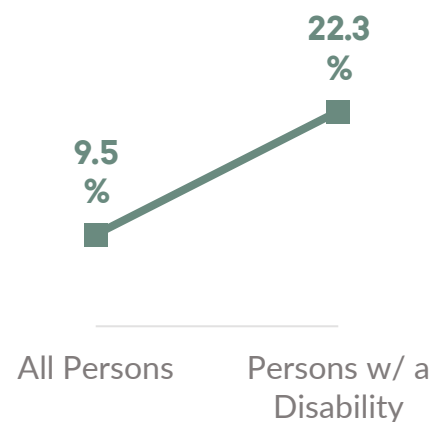
U.S.: 18.4%

23.0% Laramie County has more children living in single-parent households than both Wyoming and the U.S.

Wyoming: 18.0%

U.S.: 14.0%

Persons with a Disability have a higher rate of living in poverty than the overall population.



ECONOMIC STABILITY

In the United States, wealth is associated with health. Evidence increasingly suggests that health disparities exist not only between those at the top and bottom of the income distribution, but also between all the rungs of the economic ladder—creating a steady income-health gradient.

Laramie County has a lower unemployment rate, a lower rate of people living in poverty, and fewer individuals without healthcare coverage than both Wyoming and the United States.



Children in Poverty

12.5%

Wyoming: 11.6%
United States: 18.5%



Unemployment Rate

3.3%

Wyoming: 3.7%
United States: 5.2%



Persons in Poverty

9.5%

Wyoming: 10.1%
United States: 12.3%



Individuals without Healthcare Coverage

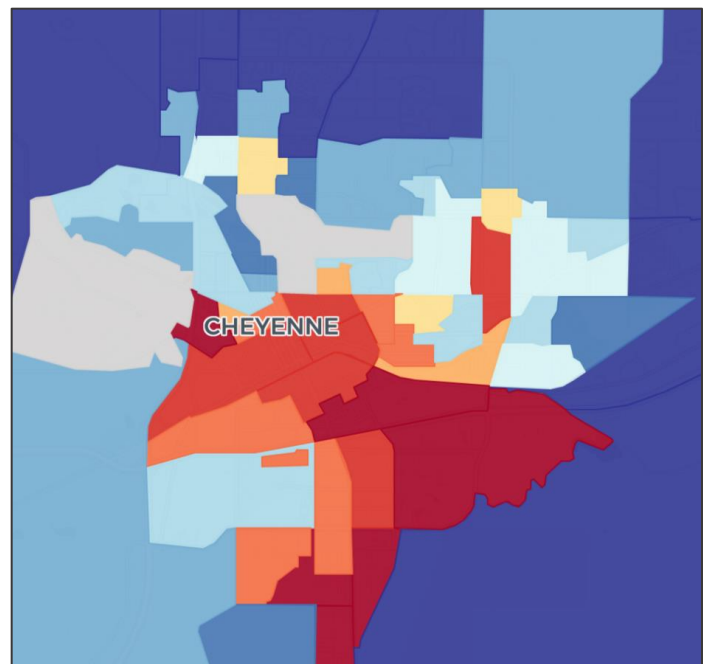
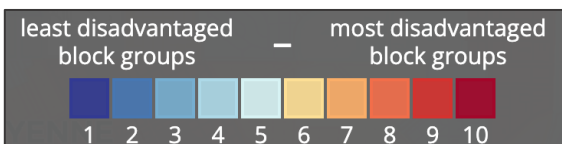
7.4%

Wyoming: 12.3%
United States: 9.2%

However, some neighborhoods in Cheyenne are disproportionately impacted by socioeconomic hardship.

Utilizing the area deprivation index created by the University of Wisconsin, it is clear that socioeconomic status across the city is not equal. Living in a disadvantaged neighborhood has been linked to poor health outcomes including higher rates of chronic disease and earlier average death.

Rates of **socioeconomic hardship** are concentrated primarily in the central and south sides of Cheyenne with **less hardship** in neighborhoods north of Pershing Ave.



NEIGHBORHOOD & PHYSICAL ENVIRONMENT

The neighborhood and physical environment consist of the condition of the physical surroundings where people live, learn, work, and play including housing, transportation, safety, parks, and playgrounds.

Affordable housing continues to be a challenge for Laramie County.

While more **Laramie County** residents own their home than **Wyoming** or **US** residents,



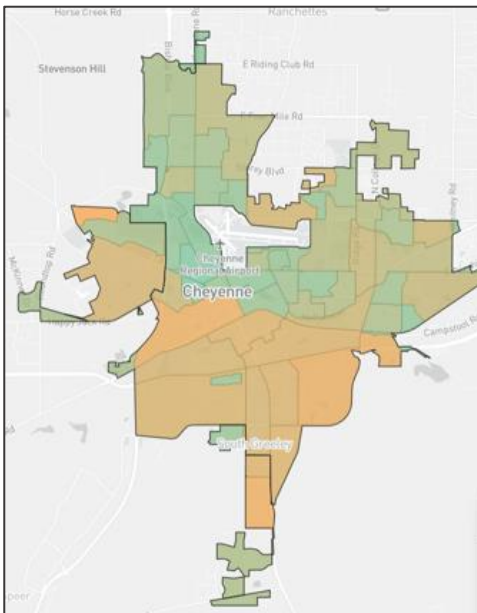
almost half of Laramie County renters pay over 30% of their income on rent, it continues to increase.

“Affordable housing should be at the top of the list.”
-LCCP member

Laramie County has lower rates of injury deaths than Wyoming but higher rates of crime.

All Injury Deaths	Unintentional Injury Deaths	Overall Crime Rate
86.9	50.7	9.5%
Wyoming: 97.8 United States: 77.7	Wyoming: 63 United States: 53.4	Wyoming: 10.1% United States: 12.3%

Even though 85% of Cheyenne residents live within a 10-minute walk of a park, access to green space is inequitable across Cheyenne.



Green space is associated with improved mental health and increased physical activity and home values.

A tree equity score indicates whether there are enough trees in a neighborhood for everyone to experience the health, economic, and climate benefits that trees provide. An equity score of 100 means the neighborhood has enough trees for the community.



The Tree Equity Score developed by American Forests can be used to reduce disparities by ensuring equitable tree coverage. Explore your Congressional District data at www.treeequityscore.org

EDUCATION ACCESS & QUALITY

Although the reasons for the link are not fully understood, research suggests that individuals with access to quality education live longer and have better health outcomes later in life than those without. Education can create better opportunities that positively impact health including finding employment that pays a living wage, time to exercise more regularly, ability to afford healthier food, access to healthcare and transportation to health services. On the other side, poor health can impact educational outcomes.

Almost 1 in 3 Laramie county youth report experiencing bullying at least once in the last year.

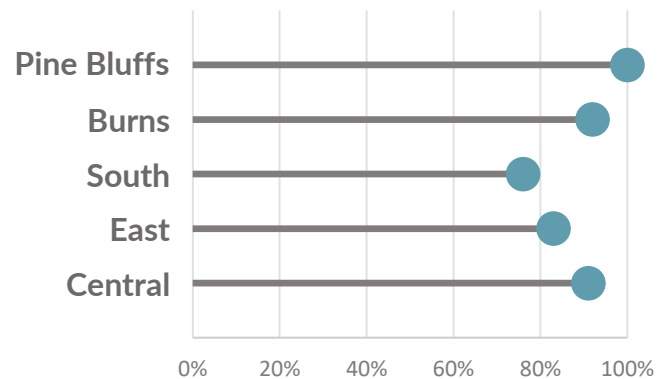


Children who routinely experience forms of social discrimination – like bullying – are more likely to struggle with math and reading. They’re also less likely to graduate from high school or go to college. This means they’re less likely to get safe, high-paying jobs and more likely to have health problems like heart disease, diabetes, and depression.

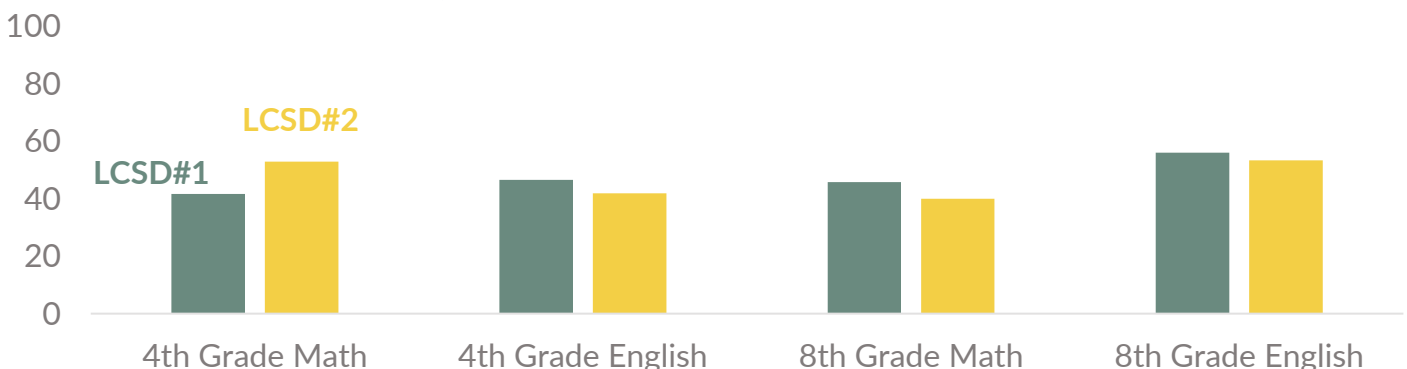
In LSCD#1 students were less likely to graduate if they:

- Received free and reduced lunch
- Had an Individualized Education Program (IEP)
- Experience homelessness
- Were male
- Were Hispanic, Black, or native

Laramie County High School Graduation Rates Remain High.



Around half of 4th and 8th grade students in Laramie County are proficient or advanced in math and English.



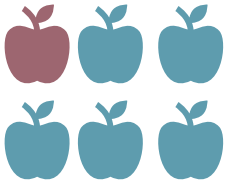
FOOD

Access to nutritious food is an important social determinant of health. **Food insecurity** means having limited or uncertain access to adequate food. Adults who are food insecure are at an increased risk of developing chronic diseases. Children who are food insecure are at risk for developmental issues, with lasting effects in adulthood.

Access to healthy food is a challenge for some Laramie County residents.



One in three (34.8%) individuals in Laramie County have low access to a grocery store.



One in six (16.4%) patients at Cheyenne Regional worried food would run out before they had money to buy more.

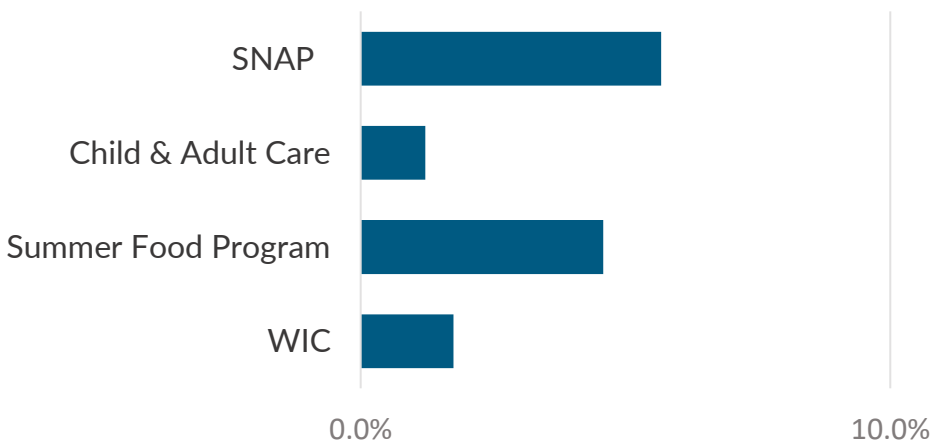


One in ten (11.2%) individuals in Laramie County are food insecure.

There are 19 food pantries, emergency food or commodity food services located in Cheyenne.

Although Food Assistance Services are available, a small portion of Laramie County residents participate.

The percent of Laramie County participants in.....



43.5% of LCSD#1 & **40.0%** of LCSD#2 students participated in the free and reduced lunch program.

HEALTH CARE SYSTEM

Access to quality healthcare has a profound effect on every aspect of a person’s health. Regular and reliable access to health services can prevent disease and disability, lead to detection and treatment of illnesses and other health conditions, increase quality of life and reduce the likelihood of premature death.

Uninsured adults are less likely than adults with any kind of health coverage to:

- Receive preventive and screening services and less likely to receive these services on a timely basis
- Receive an early cancer diagnosis
- Manage chronic health conditions
- Take prescribed medication
- Begin dialysis early
- Take effective HIV treatment
- Receive mental health services
- Be admitted to the hospital for traumatic injuries

Wyoming, and Laramie County face barriers in providing healthcare.



Laramie County is a Health Care Provider Shortage Area for Behavioral Health Professionals,



Centers for Medicare and Medicaid Services Quality Rating for Cheyenne Regional Medical Center



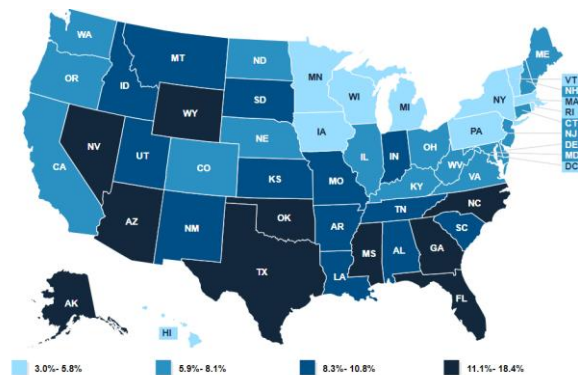
There are no adolescent inpatient behavioral health services in Laramie County.

Cheyenne Regional Quality Metrics:

- 2.7% of patients left without being seen in the ED
- 15.3% readmission rate

Wyoming (14.8%) has the 5th highest uninsured rate among adults in the US (10.9%)

11.8% of Laramie County Adults Under 65 are uninsured.



HEALTH FACTORS & OUTCOMES

Health factors are things that influence the health of people including behaviors, clinical care, social and economic factors and environmental factors. **Health outcomes** describe how long people live, and how health people feel when they are alive and can be used to evaluate the health of a community.

Unhealthy substance use behaviors impact quality of life across the ages for Laramie County Residents.



41% of LCSD #1 high school students have vaped within the past 30 days.



13% of Laramie County men have used smokeless tobacco within the past 30 days.



19% of Laramie County adults smoke.



34% of driving deaths in Laramie County involved alcohol.

Health outcomes can be used to evaluate community health and monitor progress towards improving health.

10%

Low birth weight

Low birth weight is when a baby is born weighing less than 5lbs 8oz. In communities this can be an indicator of community maternal health. One in ten babies born in Laramie county are low birth weight (9% WY).

15%

Fair or poor health

Self-reported health status is a way to measure people's health-related quality of life. In Laramie County almost one in six residents say they are in poor or fair health (15% WY).

7,600

Premature death

Premature death is the sum of the years of life lost annually by persons who suffered early death before age 75 per 100,000 population. In Laramie County premature death is higher than Wyoming (7,200 WY).

BACKGROUND

The Laramie County Community Partnership (LCCP) - a unique collaborative among multidisciplinary partners - created this community health needs assessment to serve as the foundation for our community health improvement efforts. Our mission is to maximize resources and influence change to improve conditions of well being for people in Laramie County.

Hospital community benefit requirements within the Patient Protection and Affordable Care Act of 2010 (ACA) highlight non-profit hospitals' obligation to invest in community needs. The ACA requires all non-profit hospitals to develop a community health needs assessment with an evidence-based planning and prioritization process. The CHNA is a key component of the Cheyenne-Laramie County Health Department strategic plan and subsequent Public Health Accreditation journey.

The identified priority community needs are: neighborhood and physical environment, health care system, and economic stability. An important piece of context is "who is the community?" For this assessment, we defined our community as the residents of Laramie County.

ESTABLISH STEERING & ADVISORY COMMITTEES

During the CHNA process, we established a steering committee with stakeholders from the community (external) and an advisory committee with individuals from Cheyenne Regional Medical Center (Cheyenne Regional) (internal). The Steering Committee consisted of partners from Wyoming 211, United Way, Cheyenne Laramie County Health Department, and Cheyenne Regional. Throughout the process the Laramie County Community Partnership (LCCP) and the Action Teams were an integral part of the decision-making process for priority areas and key actions.

At the initial meeting with the advisory committee, a Gantt chart was created and the chart was followed during the process. This was very helpful to keep both committees on track and reach deadlines. Recurring meetings were scheduled for the steering committee to discuss the process, data collection and decide on needs. When it came to researching data, the Social Determinants of Health were used, and the steering committee was tasked with collecting data.

METHODS FOR DATA COLLECTION AND PRIORITY SELECTION

Establish a Structure

For the 2022 CHNA, LCCP worked over an 11-month period, June 2021 through May 2022, to design the assessment, collect and analyze data, meet with stakeholders, and draft the final report. The steering committee identified the need to review both quantitative and qualitative data with the intent of understanding both the landscape of health within the community as well as a deeper dive into the experiences of specific communities of interest. Driven by the social determinants of health framework, we analyzed many quantitative data sources to gain a deeper understanding of demographic, socioeconomic, health behavior, and health factors for our community.

Gather and Analyze Data

Members of the committee gathered quantitative data from primary and secondary data sources. Sources used included national level sources like the American Community Survey from the United States Census, County Health Rankings, the Bureau of Labor Statistics, United States Department of Agriculture, and Medicare. Local data was also used including Wyoming Department of Education, Wyoming Department of Health, Wyoming 2-1-1, Cheyenne Regional Medical Center, and COMEA Shelter. Quantitative data allowed for a description of each of the SDOH categories within Laramie County. Where data was available comparisons were made to state and national indicators and reviewed by demographic characteristics. A full list of data collected can be found in Appendix A.

Throughout the needs assessment process, updates were provided to the LCCP membership and opportunity for input on measures and process was encouraged at monthly meetings, via email, and through online surveys.

Select Priorities

In the fall of 2021, the results of the quantitative data analysis were presented to a wide array of community stakeholders. Community partners were invited to presentations at each of the four LCCP Action Team meetings as well as a broader public meeting. Meetings were held with both virtual and in person options. During these presentations, the data was presented on the demographics of Laramie County, each of the six social determinants of health, as well as health factors and health outcomes as defined by the County Health Rankings. Community members provided feedback on general knowledge of the health needs, areas where they wanted to learn more, and opportunities for further analysis.

In addition to presentations of the quantitative data, we conducted a series of focus groups and feedback sessions to seek input from community-based groups, local leaders, and other stakeholders. Focus groups and feedback included involvement from teens and people with behavioral health concerns.

Following the collection and presentation of data, LCCP members voted on the biggest priority issues within Laramie County. Voting occurred during the December LCCP meeting using the MentiMeter tool. For those unable to attend in person, a Google Form collected rankings for one week following the in-person meeting. The votes from the two methods were combined to provide the overall rankings of the six SDOH categories and the sub-categories. Rankings were one through six with one representing the highest priority; therefore, the lowest cumulative score was the highest priority. A total of 68 community members voted on the priority areas.

The final rankings of priorities were:

Neighborhood and Physical Environment (i.e. housing, transportation)	3.08
Health Care System (i.e. health coverage, quality of care)	3.09
Economic Stability (i.e. employment, income)	3.09
Community and Social Context (i.e. support systems, stress)	3.40
Food (i.e. hunger, access to healthy options)	3.77
Education (i.e. literacy, language)	4.48

Neighborhood and Physical Environment: Housing	1.39
Neighborhood and Physical Environment: Transportation	2.64
Neighborhood and Physical Environment: Safety	3.02
Neighborhood and Physical Environment: Walkability	4.26
Neighborhood and Physical Environment: Zip code/geography	4.89
Neighborhood and Physical Environment: Parks	5.15

Health Care System: Health coverage	1.80
Health Care System: Provider availability	2.04
Health Care System: Quality of care	2.49
Health Care System: Provider linguistic and cultural competency	3.65

Economic Stability: Employment	2.55
Economic Stability: Income	2.71
Economic Stability: Expenses	3.21
Economic Stability: Support	3.89
Economic Stability: Debt	3.89
Economic Stability: Medical bills	4.44

The committee selected the top three priority areas to focus on in the coming three-year cycle based on the tied scores between priorities two and three. Within each of the three priority categories the top two ranked issues were used to framework in the Community Health Improvement Plan. This CHNA focused on gathering community perspectives on how the healthcare system and partners can use policy and systems level changes to address the three priority areas.

SELECTED PRIORITY AREAS & GOALS

Through the voting process, three priorities were selected and subcategorized. The three priorities selected through quantitative and qualitative data collection were neighborhood and physical environment, healthcare system, and economic stability. Within each of these three priority areas, two goals were identified.

Neighborhood and physical environment includes issues such as housing stability, neighborhood safety, transportation, walkability, distribution of green space, and zip code disparities. As it pertains to neighborhood and physical environment, the goals identified for this category were:

- ✓ **increase housing stability**
- ✓ **increase community safety within the county**

Healthcare system encompasses healthcare coverage, provider availability, provider linguistic and cultural competency, and quality of care. The two highest priority areas that were selected for this included:

- ✓ **increase access to comprehensive care**
- ✓ **increase provider access through community partnerships**

The category of **economic stability** includes employment, income, medical bills, and overall financial support. The two goals identified for increasing economic stability within the county were:

- ✓ **increase partnerships and sustainable resources to support economic stability for county residents**
- ✓ **cultivate environments that increase workforce participation**

REFERENCES

NEIGHBORHOOD & PHYSICAL ENVIRONMENT

American Forests. Tree Equity Score. 2021. www.treeequityscore.org

Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 2018-2020 on CDC WONDER Online Database, released in 2021. Data are from the Multiple Cause of Death Files, 2018-2020, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at <http://wonder.cdc.gov/mcd-icd10-expanded.html> on Apr 27, 2022 7:57:09 PM

The Trust for Public Land. ParkServe: Cheyenne Wyoming. 2021. <https://www.tpl.org/city/cheyenne-wyoming>

U.S. Census Bureau (2021). QuickFacts: Wyoming; Laramie County, Wyoming. Retrieved from [<https://www.census.gov/quickfacts/fact/table/WY,laramiecountywyoming/PST045221>].

United States Department of Justice, Federal Bureau of Investigation. (2022). Crime in the United States, 2019. <https://ucr.fbi.gov/crime-in-the-u.s/2019/crime-in-the-u.s.-2019>

EDUCATION ACCESS & QUALITY

U.S. Department of Health and Human Services. Office of Disease Prevention and Health Promotion. Healthy People 2030: Education Access and Quality. Accessed April 2022. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/education-access-and-quality>

Wyoming Department of Education. Assessment Reports: ELL Proficiency Rates by District and School. 2020-2021. <https://edu.wyoming.gov/data/assessment-reports/>

Wyoming Survey and Analysis Center. University of Wyoming, Wyoming Prevention Needs Assessment. 2020. www.pnasurvey.org

FOOD

Feeding America. Map the Meal Gap. 2019. <https://map.feedingamerica.org/county/2019/overall/wyoming/county/laramie>

Economic Research Service. U.S. Department of Agriculture. Food Environment Atlas. 2011-2016. <https://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas/>

Wyoming Department of Education. School Lunch Program. 2020-2021. <https://edu.wyoming.gov/for-district-leadership/nutrition/school-lunch/>

REFERENCES

HEALTH CARE SYSTEM

U.S. Census Bureau (2021). QuickFacts: Wyoming; Laramie County, Wyoming. Retrieved from [<https://www.census.gov/quickfacts/fact/table/WY,laramiecountywyoming/PST045221>].

Wyoming Department of Health. 2018 Wyoming State Health Assessment.

<https://health.wyo.gov/publichealth/office-of-performance-improvement-and-health-equity/sha/>

HEALTH FACTORS & OUTCOMES

Wyoming Survey and Analysis Center. University of Wyoming, Wyoming Prevention Needs Assessment. 2020. www.pnasurvey.org

University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2022. www.countyhealthrankings.org.

REFERENCES

WHAT IS HEALTH?

Image: Kiser Family Foundation, <https://files.kff.org/attachment/issue-brief-beyond-health-care>

Samantha Artiga and Elizabeth Hinton. Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity. Kiser Family Foundation, 2018.

Braveman P, Arkin E, Orleans T, Proctor D, and Plough A. What Is Health Equity? And What Difference Does a Definition Make? Princeton, NJ: Robert Wood Johnson Foundation, 2017.

HEALTH EQUITY & HEALTH DISPARITIES

Image: Robert Wood Johnson Foundation, <https://www.rwjf.org/en/library/infographics/visualizing-health-equity.html>

Braveman P, Arkin E, Orleans T, Proctor D, and Plough A. What Is Health Equity? And What Difference Does a Definition Make? Princeton, NJ: Robert Wood Johnson Foundation, 2017.

DATA OUTCOMES IN THE SDOH FRAMEWORK

Image: Image: Kiser Family Foundation, <https://files.kff.org/attachment/issue-brief-beyond-health-care>

Gopal K. Singh, Mohammad Siahpush, and Michael D. Kogan, "Neighborhood Socioeconomic Conditions, Built Environments, and Childhood Obesity," *Health Affairs* 29, no. 3 (March 2010):503-512, doi: 10.1377/hlthaff.2009.0730.

LARAMIE COUNTY DEMOGRAPHICS

U.S. Census Bureau (2021). QuickFacts: Wyoming; Laramie County, Wyoming. Retrieved from [<https://www.census.gov/quickfacts/fact/table/WY,laramiecountywyoming/PST045221>].

University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2022. www.countyhealthrankings.org.

ECONOMIC STABILITY

U.S. Census Bureau (2021). QuickFacts: Wyoming; Laramie County, Wyoming. Retrieved from [<https://www.census.gov/quickfacts/fact/table/WY,laramiecountywyoming/PST045221>].

Kind AJH, Buckingham W. [Making Neighborhood Disadvantage Metrics Accessible: The Neighborhood Atlas](#). *New England Journal of Medicine*, 2018. 378: 2456-2458. DOI: 10.1056/NEJMp1802313. PMID: PMC6051533. AND University of Wisconsin School of Medicine Public Health. 2015 Area Deprivation Index v2.0. Downloaded from <https://www.neighborhoodatlas.medicine.wisc.edu/> May 23, 2019.

APPENDIX A. DATA TABLES

Laramie County, Wyoming 2020 Demographics	Number	Percent
Total Population	100,512	
Persons under 5 years	6,332	6.3%
Persons over 65 years	16,584	16.5%
Female persons	49,552	49.3%
Veterans (2015-2019)	10265	10.50%
Race and Hispanic Origin		
White alone	92,371	91.9%
Black or African American alone	2,513	2.5%
American Indian and Alaska Native alone	1,106	1.1%
Asian alone	1,407	1.4%
Native Hawaiian and Other Pacific Islander alone	201	0.2%
Two or more races	3,015	3.0%
Hispanic or Latino	14,976	14.9%
White alone, not Hispanic or Latino	79,002	78.6%
Median household income (in 2019)	\$66,910.0 0	
Median Property Value	\$227,900	

Laramie County and Wyoming QuickFacts data are derived from: Population Estimates, American Community Survey, Census of Population and Housing, Current Population Survey, Small Area Health Insurance Estimates, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits.

<https://www.census.gov/quickfacts/fact/table/WY,laramiecoun tywyoming/PST045221>

Social Integration Indicators	Year	Data Source	Laramie County	Wyoming	United States
Social Integration					
Households with an internet subscription	2015-2019	LCHM	85.9%	83.9%	83.0%
Persons with a Disability	2019	LCHM	12.4%	13.2%	12.7%
Persons with a Disability living in poverty	2015-2019	LCHM	22.3%	21.8%	26.1%
Support Systems Community Engagement					
Social Associations per 10,000	2018	LCHM, CHR	13.10	13.90	9.30
Percent of youth with adult they can talk to about their problems	2018	PNA	81.1%	83.0%	
Discrimination					
Population over 65	2019	LCHM	16.5%	17.1%	16.5%
Depression: Medicare Population	2018	LCHM	17.3%	15.0%	18.4%
People 65+ Living Below the Poverty Level	2015-2019	LCHM	8.3%	8.0%	9.3%
Persons with a Disability (5-year)	2015-2019	LCHM	13.2%	13.1%	12.6%
Single-Parent Households	2015-2019	LCHM	22.8%	18.4%	25.5%
Children in Single-Parent Households	2015-2019	CHR	23.0%	18.0%	14.0%
Foreign Born Persons	2011-2015	LCHM	3.1%	3.6%	13.2%
Mothers who Received Less than Adequate Prenatal Care	2020	LCHM	22.1%	24.0%	23.6%
Teen Birth Rate (live births/1000 females aged 15-19)	2018	LCHM	24	24.4	17.4
Population White	2019	LCHM	91.9%	92.5%	76.3%
Stress					
Frequent Physical Distress	2018	LCHM	11.5%	10.5%	11.0%
Frequent Mental Distress	2018	LCHM	12.7%	12.7%	13.0%
Domestic Violence Incidence per 1,000 Child Abuse Reports	2018	LCHM	0.4	3.2	
	2015	LCHM	1,351		
Suicide Death Rate (per 100,000)	2009-2019	WDH	25.1	29.4	14.5
Violent Crime	2014 & 2016	CHR	200	220	
Firearm Fatalities (per 100,000)	2015-2019	CHR	110	20	
Injury Deaths (per 100,000)	2015-2019	CHR	86	95	

Laramie County and Wyoming County Health Rankings are taken from University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021. www.countyhealthrankings.org
Laramie County Health Matters. Community Health Dashboard. Accessed April 2022.
<https://www.laramiecountyhealthmatters.org/index.php?module=indicators&controller=index>
Wyoming Department of Health. Suicide and Self-Harm Dashboard. Accessed April 2022.
<https://sites.google.com/wyo.gov/wyoinjurydata/suicide-and-self-harm>

Economic Stability Indicators	Year	Data Source	Laramie County	Wyoming	United States
Employment					
Unemployment rate	August 2021	DOE/BLS	3.3%	3.7%	5.20%
Income					
Persons in Poverty	2019	Census	9.5%	10.1%	12.30%
Children in Poverty	2019	Census	12.50%	11.60%	18.50%
Median Household Income	2019	Census	\$70,567	\$65,003	\$65,721
Expenses					
Without healthcare coverage	2019	Census	7.40%	12.30%	9.20%
Debt					
Percentage of people with medical debt in collections	July 2021	SIEPR			17.80%
Mean medical debt per person	July 2021	SIEPR/Census		\$994-\$3,661	\$2,424
Medical bills					
Per capita health spending	2014 published	CMS		\$8,302	\$8,045

Wyoming Department of Workforce Services (DOE), Research & Planning. Civilian Labor Force, Employment and Unemployment--by place of residence. 2022. <https://doe.state.wy.us/lmi/news.htm>

U.S. Bureau of Labor Statistics (BLS). The Economics Daily: Unemployment rate drops to 5.2 percent in August 2021. Sept. 2021. <https://www.bls.gov/opub/ted/2021/unemployment-rate-drops-to-5-2-percent-in-august-2021.htm#:~:text=The%20unemployment%20rate%20declined%20by,large%20decrease%20in%20July%202021.>

U.S. Census Bureau. Laramie County, Wyoming. Accessed April 2022.

<https://data.census.gov/cedsci/profile?g=0500000US56021>

Stanford Institute on Economic Policy Research (SIEPR). Research Highlight, Health, Inequality: America's medical debt is much worse than we think. <https://siepr.stanford.edu/news/americas-medical-debt-much-worse-we-think>

U.S. Census Bureau. Who has Medical Debt in the U.S.. Accessed April 2022.

<https://www.census.gov/library/stories/2021/04/who-had-medical-debt-in-united-states.html>

Centers for Medicaid and Medicare Services (CMS). NHE Fact Sheet. Accessed April 2022.

<https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NHE-Fact-Sheet>

Neighborhood and Physical Environment Indicators	Year	Data Source	Laramie County	Wyoming	United States
Housing					
Homeownership	2015-2019	Census	63.8%	58.5%	52.6%
Cost burdened rental households (>30% income on housing)	2015-2019	Census	46.9%	41.3%	49.6%
Median Household Gross Rent	2015-2019	Census	\$950	\$855	\$1,062
Transportation					
No Vehicle Available	2015-2019	Census	1.6%	1.5%	4.3%
Safety					
Overall crime rate (per 1,000)	2019	DCI	49.3	25.4	
Violent crime rate (per 100,000)				217	379
Injury Deaths (per 100,000)	2018-2020	CDC WONDER	86.9	97.8	77.7
Unintentional Injury Deaths (per 100,000)	2018-2020	CDC WONDER	50.5	639	54.9
Parks, Playgrounds, Walkability					
Tree Equity Index	2018	American Forests	73		
Residents that live within a 10 minute walk of park	2020	The Trust for Public Land	86.0%		55.0%
Land used for parks and recreation	2020	The Trust for Public Land	5.0%		15.0%
Neighborhood and Physical Environment - Community Data					
Clients served	2021	COMEIA Shelter	400		
Percent of clients with income at program exit*	2021	COMEIA Shelter	32.8%		
Uninsured clients	2021	COMEIA Shelter	57.3%		
Clients employed on program exit	2021	COMEIA Shelter	8.5%		

*not all clients that have been served have left the program

American Forests. Tree Equity Score. 2021. www.treeequityscore.org

COMEIA (Cooperative Ministry for Emergency Assistance). <http://www.comeashelter.org/>

Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 2018-2020 on CDC WONDER Online Database, released in 2021. Data are from the Multiple Cause of Death Files, 2018-2020, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed at <http://wonder.cdc.gov/mcd-icd10-expanded.html> on Apr 27, 2022 7:57:09 PM

The Trust for Public Land. Cheyenne Wyoming. Accessed April 2022. www.tpl.org/city/cheyenne-wyoming

U.S. Census Bureau. Laramie County, Wyoming Community Profile. Accessed April 2022.

<https://data.census.gov/cedsci/profile?g=0500000US56021>

United States Department of Justice, Federal Bureau of Investigation. Uniform Crime Report. (2022). Crime in the United States, 2019. <https://ucr.fbi.gov/crime-in-the-u.s/2019/crime-in-the-u.s.-2019>

Education Indicators	Year	Data Source	Laramie County	Wyoming	United States
Educational Attainment					
High school graduate or higher (age 25+)	2015-2019	Census	93.0%		
Bachelor's degree or higher (age 25+)	2015-2019	Census	28.5%		
Bullying					
Percent of youth (6th, 8th, 10th, and 12th) who reported being bullied at school at least once in the past year	2018	PNA	28.6%	32.0%	

U.S. Census Bureau. Laramie County, Wyoming Community Profile. Accessed April 2022.

<https://data.census.gov/cedsci/profile?g=0500000US56021>

Wyoming Department of Education. Assessment Reports: ELL Proficiency Rates by District and School. 2020-2021. <https://edu.wyoming.gov/data/assessment-reports/>

Wyoming Survey and Analysis Center. University of Wyoming, Wyoming Prevention Needs Assessment. 2020. www.pnasurvey.org

Wyoming Assessment Data

School Year	District Name	Grade	Subject	Number of Students Tested	Participation Rate	Percent Basic and Below	Percent Proficient and Advanced
4th Grade Math							
2020-21	Laramie #1	4	Math	1000 - 1009	95.9%	58.4%	41.6%
2020-21	Laramie #1	4	Math Free/Reduced Lunch	370 - 379	95.9%	73.5%	26.5%
2020-21	Laramie #2	4	Math	80 - 89	98.9%	47.1%	52.9%
2020-21	Laramie #2	4	Math Free/Reduced Lunch	20 - 29	100.0%	66.7%	33.3%
2020-21	Wyoming	4	Math	6740 - 6749	97.9%	50.2%	49.8%
2020-21	Wyoming	4	Math Free/Reduced Lunch	2190 - 2199	97.3%	65.1%	34.9%
4th Grade English Arts							
2020-21	Laramie #1	4	English Language Arts (ELA)	1000 - 1009	96.0%	53.5%	46.5%
2020-21	Laramie #1	4	English Language Arts (ELA) Free/Reduced Lunch	370 - 379	96.1%	69.3%	30.8%
2020-21	Laramie #2	4	English Language Arts (ELA)	80 - 89	97.7%	58.1%	41.9%
2020-21	Laramie #2	4	English Language Arts (ELA) Free/Reduced Lunch	20 - 29	100.0%	79.2%	20.8%
2020-21	Wyoming	4	English Language Arts (ELA)	6750 - 6759	98.0%	51.3%	48.7%
2020-21	Wyoming	4	English Language Arts (ELA) Free/Reduced Lunch	2200 - 2209	97.5%	66.7%	33.3%

8th Grade Math

2020-21 Laramie #1	8	Math	1020 - 1029	90.8%	55.4%	44.6%
2020-21 Laramie #1	8	Math Free/Reduced Lunch	330 - 339	90.9%	72.9%	27.1%
2020-21 Laramie #2	8	Math	70 - 79	98.7%	60.0%	40.0%
2020-21 Laramie #2	8	Math Free/Reduced Lunch	20 - 29	100.0%	78.6%	21.4%
2020-21 Wyoming	8	Math	7290 - 7299	95.7%	49.1%	50.9%
2020-21 Wyoming	8	Math Free/Reduced Lunch	2200 - 2209	95.0%	63.9%	36.1%

8th Grade English Arts

2020-21 Laramie #1	8	English Language Arts (ELA)	1010 - 1019	90.7%	44.0%	56.0%
2020-21 Laramie #1	8	English Language Arts (ELA) Free/Reduced Lunch	330 - 339	90.3%	60.4%	39.6%
2020-21 Laramie #2	8	English Language Arts (ELA)	70 - 79	98.7%	46.7%	5333.0%
2020-21 Laramie #2	8	English Language Arts (ELA) Free/Reduced Lunch	20 - 29	100.0%	64.3%	35.7%
2020-21 Wyoming	8	English Language Arts (ELA)	7300 - 7309	95.9%	39.4%	60.7%
2020-21 Wyoming	8	English Language Arts (ELA) Free/Reduced Lunch	2200 - 2209	95.3%	54.7%	45.3%

U.S. Census Bureau. Laramie County, Wyoming Community Profile. Accessed April 2022.

<https://data.census.gov/cedsci/profile?g=0500000US56021>

Wyoming Department of Education. Assessment Reports: ELL Proficiency Rates by District and School. 2020-2021. <https://edu.wyoming.gov/data/assessment-reports/>

Wyoming Survey and Analysis Center. University of Wyoming, Wyoming Prevention Needs Assessment. 2020. www.pnasurvey.org

Food Security Indicators	Year	Data Source	Laramie County	Wyoming	United States
Access to Grocery Stores					
Low access to store	2015	USDA	34.80%	25.18%	
SNAP households, low access to store	2015	USDA	2.99%		
Children, low access to store	2015	USDA	8.49%		
Seniors, low access to store	2015	USDA	3.62%		
Food Insecurity					
Food Insecurity rate	2019	Feeding America	11.2% (11,060)	11.7% (67,750)	10.9% (35,207,000)
Above other Nutrition program threshold of 185% poverty	2019	Feeding America	45%	44%	31%
Between 130%-185% poverty	2019	Feeding America	13%	15%	19%
Below SNAP threshold of 130%	2019	Feeding America	42%	41%	50%
Average Meal Cost	2019	Feeding America	\$3.23	\$3.12	\$3.13
Food Assistance					
SNAP participants (% pop), 2017*	2017	USDA	5.67%		
SNAP benefits per capita, 2017	2017	USDA	7.46%		
SNAP participants (% eligible pop), 2016*	2016	USDA	56%		
National School Lunch Program participants (% children), 2017*	2017	USDA	49.46%		
Students eligible for free lunch (%), 2015	2015	USDA	32.92%		
Students eligible for reduced-price lunch (%), 2015	2015	USDA	10.20%		
School Breakfast Program participants (% children), 2017*	2017	USDA	15.57%		
Summer Food Service Program participants (% children), 2017*	2017	USDA	4.58%		
WIC redemptions per capita, 2016	2016	USDA	12.32%		
WIC participants (% pop), 2017*	2017	USDA	1.75%		
WIC infant and children participants (% infant & children), 2016*	2016	USDA	21.30%		
WIC women participants (% women), 2016*	2016	USDA	2.38%		
Child & Adult Care (% pop), 2017*	2017	USDA	1.22%		
Free and Reduced					
Enrollment	2016-2017	WDE	15037	93261	
Free and Reduced Eligibility	2016-2017	WDE	6502	36051	
Percent Free and Reduced	2016-2017	WDE	41.72%	38.66%	
Food Pantries, Emergency Food, Commodity Food	2021	WY211	19		

Feeding America. Map the Meal Gap. 2019.

<https://map.feedingamerica.org/county/2019/overall/wyoming/county/laramie>

Economic Research Service. U.S. Department of Agriculture. Food Environment Atlas (USDA). 2011-2016.

<https://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas/>

Wyoming Department of Education (WDE). School Lunch Program. 2020-2021. <https://edu.wyoming.gov/for-district-leadership/nutrition/school-lunch/>

Wyoming 211. <https://wy211.communityos.org/>

Health Care System Indicators	Year	Data Source	Laramie County		Wyoming	United States
			Count	%		
Health Coverage (Hospitalized at CRMC)	Jul 20 - Jun 21	Vizient				
Commercial/Private			2624	27.51%		
Medicaid			1228	12.87%		
Medicare			3838	40.23%		
Military			1003	10.51%		
Other			30	0.31%		
Self-Pay - Uninsured			783	8.21%		
Workers Compensation			33	0.35%		
Health Coverage	2019	Census				
Civilian noninstitutionalized population			96,057			
With health insurance coverage			88,994	92.60%		
With private health insurance			74,133	77.20%		
With public coverage			28,290	29.50%		
No health insurance coverage			7,063	7.40%		
Civilian noninstitutionalized population under 19 years			24,336			
No health insurance coverage			1,473	6.10%		
Civilian noninstitutionalized population 19 to 64 years			55,331			
In labor force:			45,458			
Employed:			44,342			
With health insurance coverage			39,938	90.10%		
With private health insurance			38,322	86.40%		
With public coverage			3,045	6.90%		
No health insurance coverage			4,404	9.90%		
Unemployed:			1,116			
With health insurance coverage			891	79.80%		
With private health insurance			357	32.00%		
With public coverage			534	47.80%		
No health insurance coverage			225	20.20%		
Not in labor force:			9,873			
With health insurance coverage			8,912	90.30%		
With private health insurance			6,650	67.40%		
With public coverage			3,277	33.20%		
No health insurance coverage			961	9.70%		

Health Care System Indicators	Year	Data Source	Laramie County		Wyoming	United States
			Count	%		
Provider Availability						
Access to Care (BRFSS) No insurance Not able to see doctor Do not have PCP	2018	State of WY Health Assessment	No county data		13.70%	
					14.40%	
					31.10%	
Primary Care (from State Health Assessment)						
Primary Care (physicians practicing in rural counties)	2018	State of WY Health Assessment	No county data		67.7 per 100,000	54.5 per 100,000
Mental Care (psychiatrists practicing in rural county)					4.7 per 100,000	3.4 per 100,000
Dental Care (dentists practicing)					57.2 per 100,000	42.8 per 100,000
Community Hospital Quality (Publicly Reported)						
CMS Star Rating	2021	Medicare	3/5			
HCAHPS Patient Survey Rating			3/5			
ED Left without Being Seen					3.2%	2.0%
Complication rate					4.0%	2.4%
Risk Adjusted Mortalities			154.95			159.03
Readmissions				15.3%		15.5%
Nursing Homes						
Life Care	2021	Medicare				
Overall			5 star			
Health inspections			4 star			
Staffing			4 star			
Quality of Care			5 star			
Polaris						
Overall			1 star			
Health inspections			1 star			
Staffing			3 star			
Quality of Care			3 star			
Home Health						
Encompass	2021	Medicare	4 star			
Frontier			3.5 star			
CRMC HH			2 star			
Continue Care			2 star			

Health Care System Indicators	Year	Data Source	Laramie County Count	Wyoming %	United States
Hospice Care	2021	Medicare			
Davis Overall Rating			86.0%	81.0%	
Davis Would Recommend			94.0%	94.0%	
Davis Timely Help			83.0%	78.0%	
Davis Quality (% patients getting at least one visit from RN, MD or PA in last 3 days of life)			90.5%	82.6%	
Inpatient Acute Rehab ARU - % Successful return home	2021	Medicare	62.9%	64.5%	
Long term care None in Laramie County					

Medicare. Find and Compare Healthcare Providers, Hospitals, and Nursing Homes. Accessed April 2022.

<https://www.medicare.gov/care-compare/?providerType=Hospital&redirect=true>

U.S. Census Bureau. Laramie County, Wyoming. Accessed April 2022.

<https://data.census.gov/cedsci/profile?g=0500000US56021>

Vizient Inc. Member-driven healthcare Performance Indicators. Cheyenne Regional. 2022

Wyoming Department of Health. 2018 Wyoming State Health Assessment. <https://health.wyo.gov/publichealth/office-of-performance-improvement-and-health-equity/sha/>

Health Outcomes and Health Factors	Laramie County	Wyoming
County Ranking		
Health Outcomes	15	
Health Factors	10	
Length of Life		
<u>Premature death</u>	7600	7200
Quality of Life		
<u>Poor or fair health</u>	15%	15%
<u>Poor physical health days</u>	3.8	3.5
<u>Poor mental health days</u>	3.9	4.0
<u>Low birthweight</u>	10%	9%
Health Behaviors		
<u>Adult smoking</u>	19%	19%
<u>Food environment index</u>	30%	29%
<u>Physical inactivity</u>	23%	23%
<u>Access to exercise opportunities</u>	71%	76%
<u>Excessive drinking</u>	18%	20%
<u>Alcohol-impaired driving deaths</u>	34%	30%
<u>Sexually transmitted infections</u>	396.60	374.40
<u>Teen births</u>	28	26
Clinical Care		
<u>Uninsured</u>	10%	12%
<u>Primary care physicians</u>	1,390:1	1,470:1
<u>Dentists</u>	1,200:1	1,450:1
<u>Mental health providers</u>	240:01:00	290:01:00
<u>Preventable hospital stays</u>	4,271	3,421
<u>Mammography screening</u>	42%	36%
<u>Flu vaccinations</u>	48%	44%
Social & Economic Factors		
<u>High school completion</u>	93%	93%
<u>Some college</u>	70%	67%
<u>Unemployment</u>	3.50%	3.60%
<u>Children in poverty</u>	11%	12%
<u>Income inequality</u>	4	4.3
<u>Children in single-parent households</u>	23%	18%
<u>Social associations</u>	13.1	13.8
<u>Violent crime</u>	206	220
<u>Injury deaths</u>	86	95

Health Outcomes and Health Factors	Laramie County	Wyoming
Physical Environment		
Air pollution - particulate matter	5.5	4.2
Severe housing problems	11%	12%
Driving alone to work	81%	77%
Long commute - driving alone	8%	15%

Laramie County and Wyoming County Health Rankings are taken from University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2021.

www.countyhealthrankings.org