

Introduction

“There is nothing like western Maine in all of the United States: five-hundred and seventy-five mountains over 1,000 feet in elevation; nine-hundred and sixty lakes; eight million acres of productive forestland; hundreds of miles of outstanding rivers; a rich architectural and historical heritage stretching back to pre-colonial times; and a people whose character and commitment sustain them in good times and bad.”¹ This assessment examines the health of one of the counties in western Maine, Franklin County, a county rich in natural beauty and human resources. When feasible, we have also included neighboring towns, especially Livermore and Livermore Falls, which are also served by the Healthy Community Coalition (HCC). Recently, however, Greater Franklin County has experienced economic hardships with the closing of wood products industries, dairy farms, and shoe factories. The 2000 U.S. Census shows that Franklin County has one of the highest unemployment rates in Maine and the median household income is lower than the state and national averages. Despite these economic troubles, employment growth is expected to continue in the service industries, such as hospitality, healthcare and education. The HCC can not capture all the diverse indicators that would make an impact on our community’s health; instead we have selected indicators that best describe our community’s health at this time.

About our Indicators

To prepare this assessment, we examined data currently available. Primarily, three reports helped us in choosing our indicators. First and foremost, we considered indicators that were important to our community and could be tracked over time. As a result, many of these variables are from the HCC “Community Health Assessment 2000—A Snapshot”. This report not only included secondary data, but also primary data from the annual HCC Farmington Fair Survey. Second, we considered indicators rated important in *HealthyMaine 2010*, the document produced by the Bureau of Health, Maine Department of Human Services, which reflects the consensus of state public health leaders on the key indicators of Maine’s health status. Third, we chose variables that addressed the priorities of the 2002 Community Health Visioning, a process that formulates priorities for improving community health in the HCC Service Area. The process engages residents and leaders alike in local meetings, community-wide surveys and a day-long conference about health issues and strategies available to

¹ Richard Barringer, Professor, University of Southern Maine, Edmund S. Muskie School of Public Services and Western Mountains Alliance Founding Board of Directors, from Western Mountains Alliance website, 4/7/03.

address those issues. The Community Health Visioning built a community consensus around seven main health priorities:

1. More Public Activities
2. Reduce Substance Abuse and Improve Mental Health
3. Support for Healthier Lifestyles
4. More and Better Jobs
5. More Attention on Problems of Teens
6. Clean Up Environment
7. Open a Pharmacy in the Northern Region

(The Community Health Visioning 2002 Report can be found on pages 51-56.)

Based on the above selection process, we organized our indicators into several sections in the report: demographics, leading causes of death, access to care, adult wellness, youth wellness, maternal and child health, and disease prevention. In each section, there is an introduction that summarizes the major findings, focusing on both positive and negative aspects of the community's health and comparing Greater Franklin County's health to the state and nation whenever possible. A table of indicators is also included in the introduction which compares Franklin County data to Maine and the health goals set by the Maine Bureau of Health for 2010.

A Final Note

In any diverse community, indicators cannot tell the personal stories of the individuals, families and businesses. Instead this report helps to raise questions about where we are and where we hope to be in the future. There are some geographical limitations. Since most available health data carves the state by county, this report primarily evaluates Franklin County, not the full service area of the HCC or Greater Franklin County (see Table 3). Finally, for some indicators, we were unable to find information on Franklin County because data is only available for the State as a whole.

The 2003 Community Health Assessment is a work in progress and one measure of our community's many successes, such as the lowest percentage of adults in Maine who smoke (17%). A life-saving success story since tobacco use is the single most preventable cause of death and disease in the United States. Franklin County's long history of integrating public health and medical practice has also resulted in reductions in cardiovascular mortality compared to the rest of Maine.