

GILPIN COUNTY PUBLIC HEALTH

MARCH 2024

GILPIN COUNTY'S COMMUNITY HEALTH IMPROVEMENT PLAN



2024-2028



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EXECUTIVE SUMMARY

In compliance with The Colorado Public Health Act of 2008, which charges local public health agencies with completing a community health assessment and then creating and implementing a public health improvement plan every five years, Gilpin County has recently completed a rigorous process and the results and recommendations are presented in the following plan.

The primary goals of this current public health improvement planning process were to collect information related to the health of county residents and then to create a plan designed to improve the health and wellness of Gilpin County residents. This process was guided by the Colorado Health Assessment and Planning System (CHAPS), which includes examining previously collected health data, prioritizing health issues, assessing capacity, and identifying strategies for improving health.

Gilpin County is located about 35 miles west of Denver and has roughly 6000 residents. The relatively small population size of the county and its rural mountain setting present some unique public health challenges. After a thorough process of examining Gilpin County's data, collecting additional data, and consulting with key local stakeholders, a prioritization process was undertaken. The community identified healthcare access, behavioral health, nicotine use, and environmental health as its four priorities for the next five years. The prioritization process determined which public health issues would have the highest likelihood of success in preventing or greatly lowering the chances of disability and/or death, and also looked at which issues we had the current resources and ability to address most successfully. The following document provides information about the health of Gilpin County residents and a detailed plan as to how the county will address the identified priorities.

ACKNOWLEDGEMENTS

The Gilpin County Community Health Improvement Plan is a collaborative effort of many organizations and providers in the community committed to improving the health of our residents. We would like to thank our partners and residents for their input, expertise and support. The following individuals and organizations have participated in the development of this plan and will play a key role in its implementation.

GILPIN COUNTY SENIOR LEADERSHIP TEAM

- Ray Rears, Gilpin County Manager
- Michael Carlson, Library
- Jennifer Cook, CSU Extension
- Rob Gutierrez, Community Development
- Joe Allaire, Finance
- Chanda Johnson, Human Resources
- Janey Barker, Human Services
- John Combs, Public Works
- Gabrielle Chisholm, Parks and Recreation
- Kevin Armstrong, Sheriff
- Marie Mornis, Commissioner
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- Sandy Hollingsworth, Commissioner

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- Janet Rasmussen, Vice President
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- Kate Watkins, MPH, Epidemiology Supervisor

COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

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- Gina Febbraro, Summit Cove Consultants
- Corinne Keller, Gilpin County Food Pantry
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- Arwen Ek, Holistic Homestead
- Anonymous county residents
- Anonymous students of Gilpin County School District RE-1



MISSION

The mission of Gilpin County Public Health is to promote, protect, and improve the health and wellbeing of all Gilpin County community members and of the environment in which they live.

VISION

Gilpin County Public Health will work in collaboration with fellow public health agencies and organizations across the state of Colorado to provide residents with the best health resources and information available. The goal of Gilpin County Public Health is to help our community achieve the highest possible standard of well being, and we strongly believe that health is a fundamental human right. We serve to promote and protect the quality of life for all Gilpin County residents, and to maintain the environment that we all share.

VALUES

- collaboration
- responsiveness
- innovation
- respect
- sustainability
- trustworthiness

PLAN DEVELOPMENT

Colorado's Public Health Act of 2008 requires all local public health agencies in the state to conduct a community health assessment and create a Community Health Improvement Plan (CHIP; for other acronyms, see p. 29) every five years. This is Gilpin County's third CHIP and outlines Gilpin County Public Health's (GCPH) priorities for years 2024-2028.

In order to create a CHIP, counties collect and analyze local population health data, examine the capacity and performance of the local public health system, and identify public health priorities, desired outcomes, and implementation strategies. This process directs local resources toward the most relevant and prevalent health issues, ensures that government agencies rely on evidence to make decisions, and guides the development of yearly work plans for public health staff.

COMMUNITY HEALTH ASSESSMENT

During the community health assessment, GCPH analyzed data related to current health outcomes and needs in the county. These data were systematically collected in the summer of 2023 by GCPH staff, volunteers, and contracted Jefferson County Public Health staff. The data were then analyzed for key themes by GCPH staff and a local graduate student of the Colorado School of Public Health.

Quantitative Data

Quantitative (numerical) data were gathered from public health surveillance systems such as the Behavioral Risk Factor Surveillance System and the Healthy Kids Colorado Survey, as well as other data sources like the U.S. Census Bureau's American Community Survey. Quantitative data give us objective,

measurable information about the incidence and prevalence of disease, disability, and mortality within the county and the surrounding region, as well as other factors that affect health, like the presence of contaminants in private wells or radon in homes. These data are presented in the Epidemiological Profile (p. 7).

Qualitative Data

Qualitative (descriptive) data were collected directly by GCPH from county residents and stakeholders through an anonymous health survey, key informant interviews, and a youth focus group. Collecting qualitative data allows community members to share in more detail their health needs and concern. Qualitative data also provides context on what types of goals and interventions may be appropriate for the population. An overview and key themes from these data are presented in the Community Engagement section (p. 17).

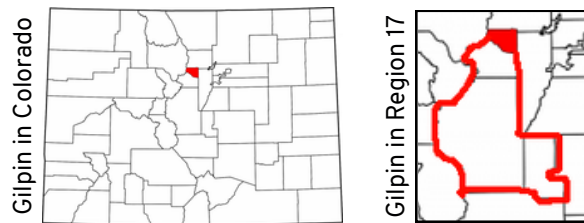
DEVELOPMENT OF PRIORITIES

After data collection and analysis, GCPH staff presented the information to the Gilpin County Public Health Advisory Board (GCPHAB), a group of local volunteers with public health expertise who are appointed by the Board of County Commissioners to assist and advise GCPH. The GCPHAB provided input on potential priorities, goals, and actions after weighing the level of need indicated by the data. After reviewing the board's input and assessing agency capacity, GCPH staff identified the final priorities for 2024-2028 and determined key goals and objectives for the first year of the plan. These priorities are presented in the final section (p. 25). See the appendices (p. 31-32) for more on community involvement and capacity assessment.

EPIDEMIOLOGICAL PROFILE

Established in 1861 as one of the first seventeen counties in the Colorado Territory, Gilpin County rests in the high country east of the Continental Divide. The county lies in North Central Colorado and covers about 150 square miles of mountainous land. The two main cities are Black Hawk and Central City both known for a distinguished mining history and currently for tourism and gaming. Gilpin County is bordered by Boulder, Jefferson, Grand and Clear Creek counties.

Due to Gilpin’s small population, much data in this report is regional rather than county-level. Gilpin County is part of Health Statistics Region 17, which includes Clear Creek, Park, and Teller counties. *In Gilpin County* refers to county-specific data; data for *the Gilpin Region* includes the other counties mentioned.



POPULATION DEMOGRAPHICS

Gilpin’s population has increased 13.38% since 2010. In 2021, an estimated 5,812 people resided in Gilpin County with 47.1% of the population identifying as female. The median age is 49.2 years, with 14.8% under 18 years old and 17.3% 65 years or older [1].

65+ Population Characteristics

Of the approximately 1,007 residents age 65 and older, 8.2% live below the poverty level, compared to 7.4% of the population age 65 and older in Colorado [2]. In 2021, the median

annual income for Gilpin County households where the primary householder was age 65 or over was \$79,741, compared to \$58,270 in Colorado [3]. Among households in Gilpin County, 7.7% have a householder aged 65 or over living alone [4]. Among households with at least one person in the household over 60 years old, 48.0% received benefits from the Supplemental Nutrition Assistance Program (SNAP), a federal food assistance program [5].

Race and Ethnicity

The racial and ethnic breakdown shows the county is predominantly non-Hispanic white (88.2%) followed by Hispanic of any race (7.0%), Black or African American (1.8%), Asian American and Pacific Islander (1.7%), and American Indian and Alaska Native (0.9%) [6].

INCOME AND EDUCATION

The median household income between 2017-2021 was \$96,784 according to the U.S. Census Bureau [7]. The poverty threshold is determined annually by the federal government and depends on the number residing in the household. Eight percent of people in Gilpin live below the poverty threshold; 14.5% of children under 18 years live below the poverty threshold [2]. For students enrolled in public school in the 2021-2022 school year, 26.5% qualified for free and reduced lunch [8]. Gilpin County maintains a high level of education; 93.7% of the population 25 years old and over have a high school diploma or higher, 48.8% hold a bachelor’s degree or higher, 19.7% have some college, but no degree, and 14.2% hold a high school diploma or equivalent [9].

In 2022, Gilpin County had a 92.6% 4-year high school completion rate, compared to the state 4-year graduation rate of 82.3% [8]. There are several organizations in the county that provide scholarships to graduating seniors seeking higher education or technical training, including Gilpin County Education Foundation, Alan Green Foundation, City of Black Hawk, and Rotary Club.

EMPLOYMENT

According to the American Community Survey (2017-2021), of all individuals at least 16 years of age in the county, an average of 1.9% were unemployed, compared to a state measure of 4.6% [10]. From 2017-2021, among all workers 16 or older who did not work at home, 22.0% had a commute time of an hour or more to work compared to a state average of 7.2%.

TABLE 1. Industry for the civilian employed population 16 years and over [11]

| Industry | 2012-2016 (n = 3132) | 2017-2021 (n = 3741) | Change |
|---|-------------------------|-------------------------|--------|
| Agriculture, forestry, fishing and hunting, mining | 57 (1.8%) | 46 (1.2%) | → |
| Construction | 367 (11.7%) | 161 (4.3%) | ↓ |
| Manufacturing | 256 (8.2%) | 363 (9.7%) | ↑ |
| Wholesale trade | 64 (2.0%) | 17 (0.5%) | ↓ |
| Retail trade | 255 (8.1%) | 129 (3.4%) | ↓ |
| Transportation, warehousing, and utilities | 223 (7.1%) | 124 (3.3%) | ↓ |
| Information | 34 (1.1%) | 204 (5.5%) | ↑ |
| Finance, insurance, real estate, rental, and leasing | 40 (1.3%) | 98 (2.6%) | ↑ |
| Professional, scientific, management, administrative, waste management services | 277 (8.8%) | 474 (12.7%) | ↑ |
| Education, health care, social assistance | 429 (13.7%) | 814 (21.8%) | ↑ |
| Arts, entertainment, recreation, accommodation, and food services | 819 (26.1%) | 832 (22.2%) | ↓ |
| Public administration | 181 (5.8%) | 328 (8.8%) | ↑ |
| Other services | 130 (4.2%) | 151 (4.0%) | → |

The percentage of residents 16 and over that work in Gilpin has decreased in the past 10 years. Between 2017-2021, an average of 48.9% of workers 16 years and over worked in Gilpin County and 51.1% worked outside Gilpin County. In comparison, an average of 54.6% of workers had worked in Gilpin County and 44.8% had worked outside the county between 2012-2016 **[12]**.

There has been a slight increase in the number of Gilpinites who work from home. Between 2017-2021, an average of 13.3% of workers 16 years and over worked from home, compared to 12.6% between 2012-2016 **[12]**.

HOUSING

There are approximately 2,800 occupied housing units in Gilpin County (2017-2021). Of those units, 16% are renter occupied **[13]**. Housing costs (including rent/mortgage and utilities) should not exceed 30% of a household's total income, according to federal guidelines. In Gilpin County, 31% of households spent 30% or more of their monthly household income on housing costs **[14]**.

Between 2017-2021, an average of 0.7% of the occupied housing units were "mobile home or other type of housing" (not houses, duplexes, or apartments). There were 1.6% housing units which did not have complete plumbing facilities **[15]**.

For the 2019-2020 academic year, the Colorado Department of Education estimates that 0.20% of pre-kindergarten through 12th grade student in Gilpin County were identified as homeless **[16]**.

TOURISM

In 1990, a state-wide amendment passed that legalized limited-stakes gambling in Black Hawk and Central City. Both Black Hawk and Central City saw a major resurgence in their economies that continues to this day. Gaming has previously been perceived by residents as impacting local crime, safety concerns, and increased substance abuse. However, the casinos have also been identified as bringing in revenue, creating jobs and keep property taxes lower for Gilpin County residents.

In 2023, 42% of Gilpin County's budget came from gaming tax revenues **[17]**. While gambling is an important part of the economy, the goal of County leadership is to maintain a rural and natural setting that supports the health of the residents while minimizing any environmental impact associated with gambling and new developments.

PARKS AND RECREATION

Gilpin County's natural mountainous beauty attracts an estimated 100,000 visitors on weekends, mostly during the peak seasons of summer and fall. Outdoor recreation makes up much of the county's tourism, including camping and hiking in Arapaho and Roosevelt National Forests, James Peak Wilderness, and Golden Gate Canyon State Park, which contains 36 miles of trails offering a variety of opportunities for hiking, bicycling and horseback riding. Hunting and fishing opportunities include regularly stocked fishing ponds along park roads and in the backcountry in addition to small and big game hunting areas. There are numerous other areas within the county for residents and visitors to hike, camp and enjoy outdoor activities.

ACCESS TO NUTRITIOUS FOODS

Fruit and vegetable consumption is considered one of the key indicators for preventing most chronic diseases, including heart disease, cancer and diabetes. From 2017-2021, an average of 54.1% of adults in Gilpin County ate fruit at least one time per day, compared to 61.9% of people in Colorado; 86.3% of adults in the Gilpin County ate vegetables at least one time per day, compared to 81.4% in all of Colorado [18]. To maintain good health, adults should eat at least 3 to 4 ½- cup servings of fruit and 4 to 6 ½- cup servings of vegetables every day.

Between 2016 and 2021 an average of 6.2% of households in Gilpin County received Supplemental Nutrition Assistance Program (SNAP) benefits [5]. During the 2022-2023 school year, 29.2% of pre-kindergarten through 12th grade public school students were eligible for free and reduced breakfast and lunch [19].

Gilpin County does not have any full service grocery stores. The closest full service food stores are in the adjacent towns of Nederland, Idaho Springs, and Golden. There were 6 convenience type food outlets and no fast food restaurants in Gilpin County at the time of this report. Both selected county leaders and parents in Gilpin County stated in focus groups that healthy food access was an important issue in our county.

ACTIVE LIVING

According to the CDC, for substantial health benefits adults should do at least 150 minutes a week of moderate-intensity, or 75 minutes a week of vigorous-intensity aerobic activity [20]. Aerobic activity should be performed in

episodes of at least 10 minutes, and preferably, it should be spread throughout the week. Adults also should do muscle-strengthening activities that are moderate or high-intensity and involve all major muscle groups on 2 or more days a week, as these activities provide additional health benefits. Children and adolescents should do 60 minutes (1 hour) or more of physical activity daily.

From 2015-2019, an average of 61.9% of adults in the Gilpin Region met current CDC guidelines for physical activity, compared to 59.5% of adults in Colorado [18]. In 2021, among high school students in the Gilpin County Region, 49.1% reported being physically active for at least an hour a day on at least five of the past seven days, which is the same as Colorado (49.0%) [21].



ACCESS TO HEALTH CARE

Between 2018-2020, among adults living in the Gilpin Region, an average of 66.6% reported having a regular health care provider, which is lower than the state percentage reported at 73.4% [18]. In 2019 in Gilpin County, 4.2% of adults aged 18-64 years did not have health insurance, compared to 10.8% of adults in Colorado. In 2019, 4.6% of children in Gilpin County did not have health insurance, compared to 5.7% in Colorado [22].

HEALTHY HOUSING

Just over 20% of the housing units in Gilpin County were built prior to 1960 and have a potential risk for lead- based paint exposure [23].

Radon

Radon is an odorless and colorless radioactive gas that is a byproduct of uranium breakdown in soil. Long-term exposure to radon gas is the leading cause of lung cancer in people who do not smoke tobacco. Most Colorado soils contain consistently high levels of radon. The EPA recommends mitigation if indoor air levels of radon are over 4 picocuries per liter (pCi/L).

Between 2005-2022, 350 radon tests were performed and 61.7% of homes in Gilpin County tested above the radon action level of 4 pCi/L. Throughout all of Colorado, 48.3% of radon tests were above 4 pCi/L [24].

Drinking Water

Most Gilpin County residents not residing in town get their water from private wells. Although most well water is of good quality, there are several possible contaminants, both naturally occurring and otherwise, which may affect the suitability of the water supply. See Table 2 for more details.

The City of Black Hawk and Central City residents rely primarily on public water systems. Information about public drinking water safety and methods for testing in Black Hawk and Central City is available online [25, 26].

FIGURE 1. Home radon test results by Colorado county, 2005-2022 [24]

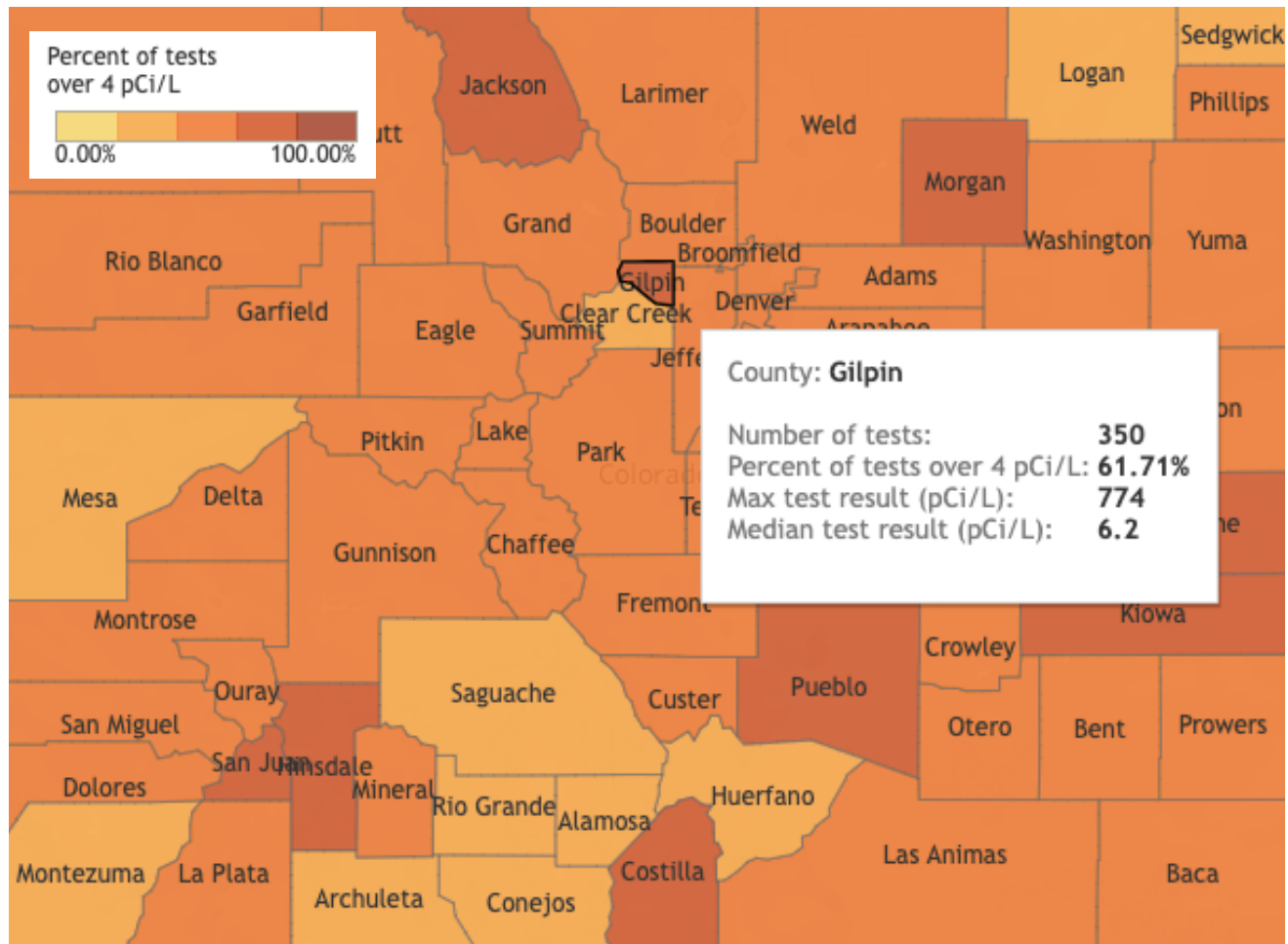


TABLE 2. Private wells with contaminants present in Gilpin County, 2011-2020 [27]

| Contaminant | % of private wells with contaminant present |
|---------------------|---|
| Coliform bacteria | 9.0% |
| Nitrates (>10 mg/L) | 2.0% |
| Arsenic (>10 ug/L) | 256 (8.2%) |

CHRONIC CONDITIONS

Between 2018-2020, the age-adjusted rate for hospitalizations due to heart disease among Gilpin County residents was 1,329.8 per 100,000 residents, compared to 2,024.9 for all Colorado residents. During the same time period the age-adjusted rate for hospitalizations due to heart attacks (acute myocardial infarction) in Gilpin County was 138.6 per 100,000 residents, compared to only 178.6 in Colorado [28]. One of the risk factors for heart disease is high blood cholesterol.

Between 2017-2021, an average of 90.7% of adults aged 20 and older in the Gilpin Region had a cholesterol screening in the past five years, compared to 85.0% of adults in Colorado. Among Gilpin County adults between 2017-2021, 31.6% had high cholesterol, which is the same as Colorado (32.0%) [18].

Between 2017-2021, an average of 29.4% adults in Gilpin County reported having high blood pressure, or hypertension, compared to 26.0% of adults in Colorado. The incidence of stroke was higher in Gilpin County than

Colorado between 2017-2021, with an average of 7.2% of adults in Gilpin County experiencing a stroke during that period, compared to 2.2% of adults in Colorado [18]

Disabilities

In Gilpin County, approximately 11.2% of the population has a disability, and 56.6% of the population age 65 and older have a disability [29]. Details about the types of disabilities can be found in Table 3.

TABLE 3. Percentage of population with a disability, 2021 [29]

| Type of disability | Gilpin | Colorado | U.S. |
|-------------------------------|--------|----------|------|
| Hearing difficulty | 4.0% | 3.5% | 3.5% |
| Vision difficulty | 0.5% | 2.0% | 2.3% |
| Cognitive difficulty | 4.7% | 4.4% | 5.1% |
| Ambulatory difficulty | 6.1% | 5.0% | 6.7% |
| Self-care difficulty | 2.4% | 1.8% | 2.6% |
| Independent living difficulty | 4.5% | 4.3% | 5.7% |

Diabetes

Almost nine percent (8.5%) of adults in the Gilpin Region were diagnosed with diabetes between 2012-2021, as compared to 7.0% in the state for the same time period [18]. Uncontrolled diabetes is a risk factor for blindness, limb amputations and kidney failure.

Cancer

In 2020, the age-adjusted rate of any type of cancer in Gilpin County was 295.6 per 100,000 population, which is lower than the state age-adjusted rate of 369.2 per 100,000 population. The age-adjusted rate for any cancer in Gilpin County was over two times higher for females (412.7 per 100,000) than for males (198.1 per 100,000). The top three types of cancer cases seen in Gilpin County in 2020 were:

- Breast cancer, age-adjusted rate of 257.0 per 100,000 female residents
- Prostate cancer, age-adjusted rate of 56.5 per 100,000 male residents
- Colorectal cancer, age-adjusted rate of 26.9 per 100,000 residents [30]

For more details, see Table 4.

| TABLE 4. Percentage of population screened for cancer, 2016-2020 [18] | | |
|---|--------|----------|
| Screening Type | Gilpin | Colorado |
| Mammogram (previous 2 years), females aged 40-49 | 78.3% | 51.8% |
| Mammogram (previous 2 years), females aged 50-74 | 52.2% | 72.1% |
| Pap smear (previous 3 years), females aged 21-65 | 73.2% | 75.4% |
| Colorectal cancer screening (meets guidelines), adults aged 50-75 | 60.6% | 73.5% |

Asthma

The percentage of adults who reported current asthma in Gilpin County was 7.1%% in 2019-2021 as compared to 10.4% for the state of Colorado in the same years [18]. In 2021, 12.7% of high school students in the Gilpin Region reported being ever told by a doctor or nurse that they had asthma, compared to 18.1% of high school students in Colorado [21].

ORAL HEALTH

The Behavioral Risk Factor Surveillance System (BRFSS) reports 68.9% of Gilpin County adults had a dental visit in the last year (2016-2020), which is similar to 67.2% of adults in Colorado. Only 39.0% of adults in Gilpin County have dental insurance, compared to 69.6% of adults in Colorado [18]. Among high school students in the Gilpin Region in 2021, 33.1% reported experiencing problems with their mouth or teeth in the last year, not including braces or injuries (compared to 26.7% of high school students in Colorado) [21].



MATERNAL AND CHILD HEALTH

In 2021, the birth rate in Gilpin County was 18.3 births per 1,000 women [31]. In Gilpin County in 2021, 14.6% of live births were low weight births (<2,500 grams) compared to 9.5% in Colorado. In 2021, 16.7% of births in Gilpin County were preterm (<37 weeks) compared to 9.8% in Colorado. According to the Vital Statistics Program at CDPHE, in 2021 no women from Gilpin County smoked during pregnancy, compared to 3.7% of women in Colorado [32, 33].

SEXUAL BEHAVIOR

From 2018-2020 in Gilpin County, 32.4% of pregnancies resulting in a live birth were unintended, compared to 36.9% of pregnancies in Colorado [34]. Among high school students in 2021 in the Gilpin Region, 36.2% reported ever having sexual intercourse, compared to 25.4% of high school students in Colorado. During this same time period, 9.4% of high school students in the Gilpin Region reported ever being forced to have sexual intercourse when they did not want to, compared to 5.7% of high school students in Colorado [21].

BULLYING

According to the Healthy Kids Colorado Survey in 2021, 16.4% of students in the Gilpin Region had been bullied on school property in the previous 12 months compared to 11.1% at the state level. Sixteen percent (16.4%) of students in the Gilpin Region had been bullied electronically in the previous 12 months, compared to 10.4% at the state level [21].

IMMUNIZATIONS

Between 2018-2020 in the Gilpin Region, an average of 52.8% of adults aged 65+ reported receiving a flu shot in the past year, compared to 65.0% of adults aged 65+ across the state [18]. As of July 1, 2023, 71.9% of Gilpin County residents had received at least one dose of any COVID-19 vaccine, 65.2% had completed any COVID-19 primary series of vaccines, and 20.1% had received 2 or more boosters or additional doses of any COVID-19 vaccine [35].

For the 2021-2022 school year, 98.2% of students in the Gilpin County school district were up to date on the required vaccinations [36].

MENTAL HEALTH

Between 2012-2021, an average of 18.2% of adults in the Gilpin Region reported ever having a depressive disorder, compared to 20.4% of adults in Colorado. During the same time period, an average of 8.5% of adults reported 14 or more poor mental health days in the past month in the Gilpin Region compared to 14.2% of adults in the state. Thirty-five (35%) of residents 18 or older were reported to ever have a depressive disorder compared to a state prevalence of 18%. Between 2012-2021, an average of 21.9% of adults in the Gilpin Region report receiving treatment for a mental health condition or emotional problem, compared to 14.3% of adults in Colorado [18].

In 2021, 48.1% of high school students in the Gilpin Region reported feeling so sad or hopeless almost every day for 2+ weeks in a row during the past year that they stopped doing usual activities, compared to 39.6% of high school students at the state level [21].



SUICIDE

For the reporting period 2004-2021, Gilpin County had total of 22 suicides. The most common method of suicide in the county, as well as the state, was the use of a firearm. Over half (59%) of those who committed suicide in Gilpin County from 2004-2021 used a firearm, compared with 50.2% of those that committed suicide in the state of Colorado during the same period. Alcohol was present in 75% of suicides that occurred in Gilpin County from 2004-2021 **[37]**.

Among high school students in the Gilpin Region in 2021, 24.2% reported seriously considering attempting suicide in the past year (17.1% in Colorado), and 13.1% reported attempting suicide at least once in the past year (7.2% in Colorado) **[21]**.

CRIME

According to the Colorado Bureau of Investigation, Gilpin County has higher rates of adult and juvenile violent crime. In 2021, the adult violent crime rate in Gilpin County was 227.1 per 100,000 adults, compared to 207.4 per 100,000 in Colorado. The juvenile violent crime rate was 179.5 per 100,000 10-17-year-olds, compared to 120.1 per 100,000 in Colorado **[38]**.

SUBSTANCE MISUSE

The average annual age-adjusted rate of drug overdose emergency department visits among Gilpin County residents due to overdoses involving all drugs from 2016 to 2021 was 151.6 per 100,000 residents, which is less than the state rate of 192.0, although this difference is not statistically significant **[39]**. From 2020-2021, the average annual age-adjusted rate of drug overdose deaths (from any drug) in Gilpin County was 51.9 per

100,000 residents, which is larger than the state age-adjusted rate of 28.3 **[40]**. Among high school students in the Gilpin Region in 2021, 93.2% report never using any drugs in their life, compared to 95.3% of high school students in Colorado **[21]**.



Marijuana Use

For the reporting period of 2019-2021, 20.6% of Gilpin County residents had used marijuana 1 or more times in the past 30 days compared to a state measure of 19.0% **[18]**. Among high school students in the Gilpin Region, 35.8% report using marijuana at least once in their life (compared to 26.1% at the state level) and 21.4% report using marijuana at least once in the past 30 days (compared to 13.3% at the state level) **[21]**.



Tobacco and Nicotine Use

Between 2018-2020, an average of 18.2% of adults in the Gilpin County Region reported currently smoking cigarettes, compared to 14.0% of adults in Colorado. During this same time period, 6.5% of adults reported using e-cigarettes in the Gilpin Region, compared to 7.0% of adults in Colorado **[18]**. 6.3% of high school students in the region smoked cigarettes in the last 30 days compared to 3.3% of high school students across the state. 21.8% of high school students in the Gilpin Region reported using an electronic vapor product in the past 30 days compared to 16.1% of high school students across Colorado **[21]**.

Alcohol Use

Between 2019-2021, 24.4% of Gilpin County adults over age 18 reported binge drinking* compared to 18.7% in Colorado, and 5.8% reported heavy drinking** compared to 7.3% in Colorado [18]. In 2021, 19.0% of regional high school students reported first drinking alcohol before the age of 13, compared to 15.0% statewide. 13.0% of high schoolers reported binge drinking at least once in the past 30 days, compared to 12.5% statewide [21].

**Binge drinking is defined as 4+ drinks on one occasion for women and 5+ drinks on one occasion for men.*

***Heavy drinking is defined as 8+ drinks per week for women and 15+ drinks per week for men.*



COMMUNITY ENGAGEMENT

In addition to quantitative epidemiological data, GCPH also directly collected qualitative data on the health issues that residents and workers of Gilpin County consider most important. Effective community engagement techniques that solicit input from a large, representative sample of county residents are important in the community health assessment and planning process so that public resources are channeled toward public health interventions that will impact issues that residents are most concerned with. Community engagement also helps public health practitioners decide on goals and actions that are achievable, practical, and culturally informed. For example, if there are high rates of substance misuse within a region but low utilization of existing behavioral health services, public health workers should explore why residents with substance misuse issues are not utilizing those services to fully understand the problem before allocating resources and taking action to address it.

RESIDENT SURVEY

Over 240 Gilpin residents responded to a community health survey in summer 2023. GCPH staff and volunteers distributed the survey via mail to all Gilpin County post codes, online through social media and emails to county employees, and in person at County buildings and during the 2023 County Fair. Key data from the survey are on p. 18.

KEY INFORMANT INTERVIEWS

GCPH staff and volunteers identified and interviewed more than 20 key stakeholders who represent various government agencies, community-based organizations, populations,

and interests within the county in order to further explore potential health issues. The involvement of these subject matter experts, or ‘key informants,’ allowed GCPH staff to analyze what resources and opportunities currently exist in the county, as well as resident needs that are not being met, gaps in offered services, and potential for collaboration between organizations. Themes from these interviews are presented on p. 20.

YOUTH FOCUS GROUP

A GCPH volunteer convened a focus group of 7 youth from Gilpin County School District RE-1 to elicit community strengths, challenges, and other factors relating to youth health. Themes from this group are presented on p. 23.

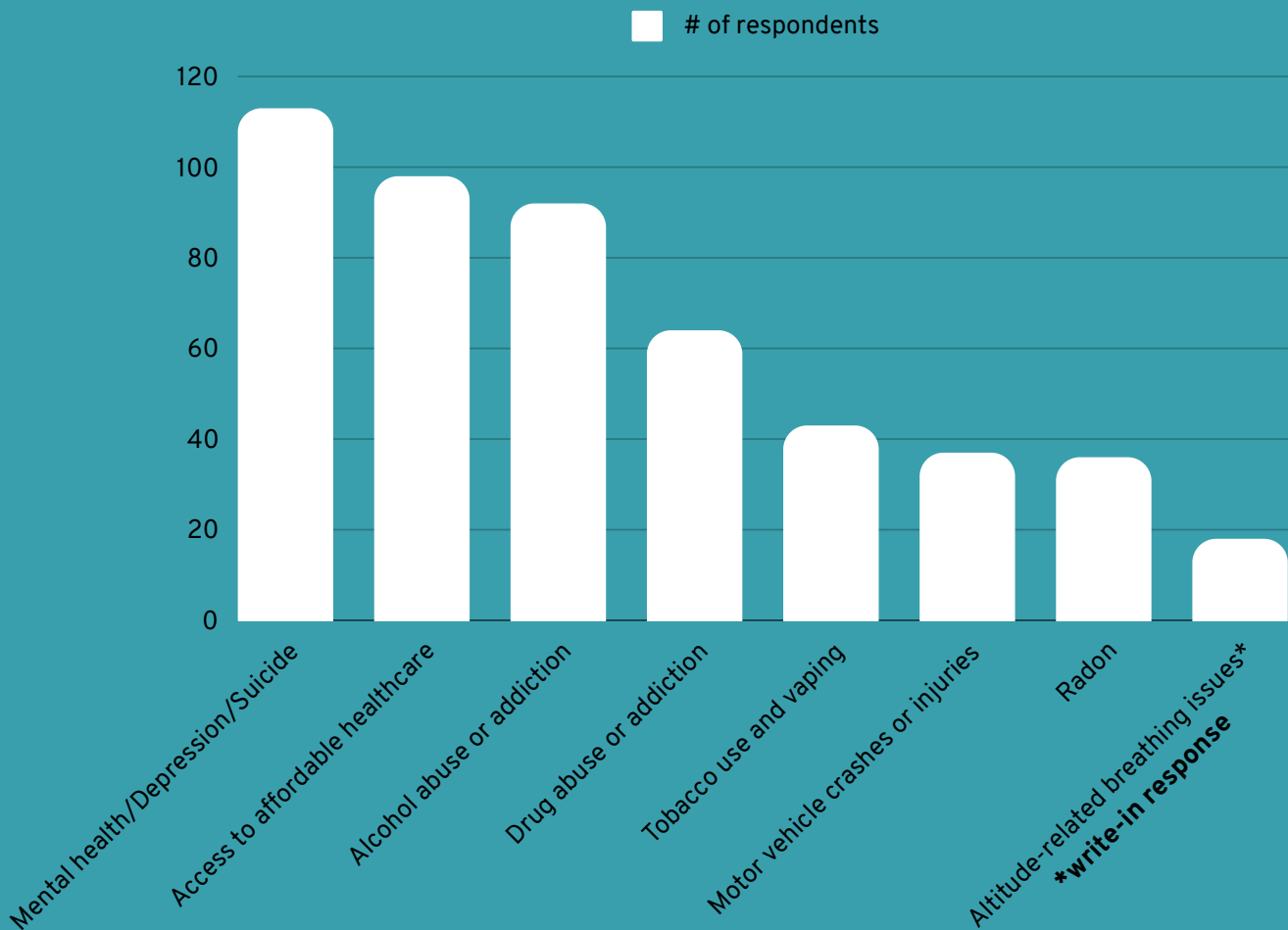


RESIDENT SURVEY

Over **240** Gilpin residents completed a survey about the health issues they thought were the most important and impactful in the county. The sample was proportionately similar to the racial demographics of the county; however, only 4% of respondents identified as Hispanic/Latino, slightly lower than U.S. Census estimates of 7% of county residents [6]. The sample was also disproportionately college-educated (75%, compared to 49% of county residents [9]), disproportionately seniors (31%, compared to 17% [1]), and included disproportionately few Medicaid members (6%, compared to 24% as of June 2023 [41]).

Top 8 Most Important Health Problems Affecting The County, According to Residents

Each respondent could pick up to 3 of 14 options, including a write-in option.



“Raising kids here is challenging. There are very limited options for daycare, school and pediatric healthcare, though we are SUPER thankful that Clinica is here now. More food options that are family friendly would also be helpful.”

10% of respondents said they worry about or experience running out of food.

"I worry future Gilpin may become more noisy, developed, and 'touristy' than the quiet place I picked for retirement. Need to find a balance between services offered and keeping the peace and relative isolation that mental balance needs to stay healthy."

"Would be great if we could offer incentives to encourage a grocer to purchase, construct, and operate a small store or if we could offer incentives for the local convenience stores to expand."

"OVERALL, I LOVE LIVING UP HERE. HOWEVER, DRUG AND ALCOHOL ABUSE ALONG WITH THE REMOTE NATURE OF THE COUNTY AND MEDICAL EMERGENCIES IS A CHALLENGE, ESPECIALLY FOR OLDER PEOPLE."

"Cost of living/property values are becoming an increasing barrier to financial wellness."

32% of respondents did not know about Clinica, Gilpin's new health clinic.

"MORE ACTIVITIES FOR KIDS ALL YEAR ROUND."

62% of respondents considered wildfire risk to be one of the top 3 safety problems.

"There needs to be more information shared with potential property buyers and builders regarding well water, septic systems, radon, soil issues due to prior mining in the area."



KEY INFORMANT INTERVIEWS

GCPH staff and volunteers conducted key informant interviews with 21 stakeholders who reside and/or work in Gilpin County. These interviews included representation from:

- Gilpin County Commissioners
- Gilpin County Manager
- Gilpin County Sheriff's Office
- Gilpin County Food Pantry
- Gilpin County Parks and Recreation
- Gilpin County School District RE-1
- Gilpin Ambulance Authority
- Timberline Fire Department
- Central City
- Jefferson Center (behavioral health care provider)
- Holistic Homestead (nonprofit addressing food security)
- Eagles' Nest (early child care provider)
- Clinica (health care provider)
- Former state senator
- Parents of children enrolled in Gilpin schools
- Casino workers
- Small business owner

BEHAVIORAL HEALTH

11 key informants brought up behavioral health as a major concern, which includes **mental health**, **suicidality**, and **substance misuse**. Informants talked about the impact of **social isolation** on county residents, particularly for youth and seniors, but emphasized that this issue affects all ages. They expressed a desire to see more **opportunities for prosocial involvement**, increased **access** to behavioral health care, and a reduction in **stigma** so that people suffering from these issues, and their families, can seek help.

"Mental health is impacting people's day-to-day ability to function and be present... If you have a member of the family or child suffering from suicide or addiction, it creates chaos."

CONNECTING RESIDENTS IN NEED WITH RESOURCES

Several informants spoke about "**frequent flyers**" who have regular contact with paramedics, the fire department, and/or law enforcement for emergencies. These residents need **longer-term support**, resources, and help in accessing medical care, but receive no coordination of services or follow-up. Some pass away without ever getting resources that are already present in the county. Awareness of these services – and warm hand-offs between agencies – have a key role to play in addressing the issue.

"I FEEL LIKE THERE'S THIS RESOURCE DISCONNECT WHEN WE HAVE PEOPLE THAT NEED HELP. WE WANT TO HELP, BUT WE DON'T KNOW HOW TO HELP."

ACCESS TO HEALTH CARE

8 key informants identified access to health care as one of the most important health issues. Informants were most concerned with access to **primary care**, including **physical health** and **behavioral health**. Some named **secondary care** (medical specialists), **tertiary care** (hospitals), and other services (such as a pharmacy, dental care, and immunizations) as ongoing accessibility needs. Many informants emphasized the need to **raise awareness** about Clinica’s primary care location and services in Gilpin County, which opened in July 2022, and Jefferson Center’s in-county behavioral health services.

“I THINK THE ASSUMPTION A LOT OF THE TIME, BECAUSE WE’RE SUCH A SMALL COMMUNITY, IS THESE RESOURCES ARE NOT AVAILABLE TO THEM HERE.”

“People aren’t necessarily going to want to go anywhere outside of the county just to seek medical care... you know, what I see is folks with more chronic conditions tend to get really, really sick and then they call 911.”

ACCESS TO AFFORDABLE, NUTRITIOUS FOOD

6 key informants identified access to affordable, nutritious food as an important issue. Gilpin County has no full-service grocery store. No stores accept WIC benefits. GCPH has limited capacity to address food insecurity and supports the following community efforts:

- Gilpin County Human Services provides the **Gilpin County Food Pantry**, which is open to all residents, regardless of income. As of December 2023, it is open once a week and also upon request. The pantry also offers a summer lunch box program for children.
- Gilpin County Human Services provides the **Senior Lunch Program** at the Gilpin County Community Center several times per week and the **Meals on Wheels** program.
- **Food Bank of the Rockies** provides a mobile food pantry once a month in Central City.
- The **Mountain Backpacks** program is a joint initiative between Gilpin County Parks and Recreation, the Rotary Club, and Gilpin County School District RE-1, with support from Evergreen Mountain Backpacks, to provide free backpacks of weekend food to families.
- **Gilpin County CSU Extension** operates a community garden and offers education on mountain horticulture. Gardeners can rent summer plots and participate in CSU’s Grow and Give program to donate their produce to the Gilpin County Food Pantry.
- The **Holistic Homestead** is a Gilpin-based nonprofit addressing health and wellness that currently operates a co-op market. As of December 2023, the co-op sells fresh produce and bulk produce and is open 6 days a week under limited hours. The Holistic Homestead also operates a Community Food Share, a Pay-What-You-Can Café, a farmer’s market, and a food bank, among other programs.

TRANSPORTATION

4 key informants identified access to transportation as a major impediment to health and wellbeing, including access to food, health care, social opportunities, and other services. Most Gilpin residents are reliant on personal vehicles.

- The **Black Hawk & Central City Tramway** free shuttle service operates within Black Hawk and Central City but only has stops at casinos.
- Via Mobility Services's **Mountain Rides** is a free shuttle service that connects Rollinsville to western Boulder County (Nederland and Ward).
- Gilpin County Human Services provides **scheduled senior transportation** for scheduled senior luncheons, weekly grocery shopping, and medical/dental visits, as well as **scheduled veteran transportation** for medical appointments.
- **Health First Colorado (Medicaid)** members may access free non-emergent medical transportation to medically necessary services if they have no other options.
- Local for-profit **Peaceful Rides** provides scheduled rides.

"I had someone walk four miles to his [medical] appointment the other day."

AFFORDABLE HOUSING

3 key informants named affordable housing as a major issue, particularly for seniors, families, and the workforce.

"THERE'LL BE ONE PLACE [A FAMILY GETS] SETTLED, GET THE KIDS IN SCHOOL, AND THEN THE OWNER OF THE HOME WANTS TO SELL OR RAISE THEIR RENT. AND THEN THEY'RE LIKE, 'OKAY, NOW WHAT DO WE DO? WHERE DO WE GO?' IT'S ADDING A LOT OF ADDITIONAL STRESS. AS A FAMILY, THAT'S REALLY IMPORTANT TO BE ABLE TO HAVE A STABLE HOME."

PRIVATE WELLS AND OWTS

3 key informants named private wells and on-site wastewater treatment systems (OWTS, commonly known as septic systems) as a major environmental health issue. Multiple informants spoke about **contaminants in private wells** and **unregulated OWTS**. Several informants named Rollinsville in northern Gilpin County as a site of particular concern.

HEALTH EDUCATION

2 key informants indicated a need for more health education in the community about nutrition, mental health, senior issues, caregiving, radon, and other topics.



YOUTH FOCUS GROUP

7 middle and high school students from Gilpin School District RE-1 participated in a focus group in August 2023. The group was mostly white but included multiple youth of color. There were male, female, and gender nonconforming youth. Multiple students were queer (non-heterosexual). The majority lived in unincorporated Gilpin County and several students resided in Black Hawk or Central City. The group did not include NMSHS students.

“At a certain point, the only thing you can really do in Gilpin is go to a casino and gamble all of your life’s savings.”

Their concerns largely reflected the problems that adult Gilpin residents identified, as well as issues indicated by epidemiological data. Youth mentioned the following as issues:

- mental health**
- transportation**
- affordable housing**
- lack of job opportunities**
- substance misuse**
- access to health care**
- casino culture**
- lack of out-of-school opportunities**
- internet access**
- access to nutritious foods**

“There’s not really any therapy up here and if you want to go to therapy, it’s all in town. Also, kids aren’t being heard. If they have a problem, some parents will be like, ‘oh you’re just going through a phase.’”

"I like that, in Gilpin, we have a small community in which I know everybody."

Multiple youth expressed that they enjoyed living in a **small community**. They also enjoy their proximity to **nature** and their existing **social connections**.

Their greatest concern is the **lack of opportunities** they have for jobs, socialization, and recreation. They point to this as a key factor for both **poor mental health** and **substance misuse** in Gilpin.



"Kids just don't have to do anything to do, because there's not really anything to do here."

Their comments support quantitative data from recent statewide surveys [21]. As of 2021, high school students in our region had the **highest rates in all of Colorado** for:

- marijuana use in the past 30 days
- e-cigarette use in the past 30 days
- ever trying cigarettes
- access to substances
- in-school bullying
- online bullying
- signs of depression
- suicide attempts

48% of our region's high school students reported signs of depression in the last year, compared to **40%** statewide.

24% of our region's high school students seriously considered attempting suicide in the last year, compared to **17%** statewide.



"If you're really stressed out and you don't have a good coping mechanism, drugs are a way that some people I know do to get away from reality and to escape that void."

2024-2028 HEALTH PRIORITIES

#1: RADON

Issue: High levels of radon in Gilpin County homes. See page 11 for details.

Goal: Increase residential radon testing and mitigation.

2024 Objectives:

- Increase the number of homes tested for radon.
- Increase the number of high radon homes to be mitigated.

2024 Strategies:

- Increase awareness of radon as a cancer risk through educational messages on county webpages, in local newspapers and county events.
- Provide free radon test kits to all residents who request one.
- Follow-up by telephone and in writing on all test results over the EPA action level of 4 pc/L.
- Provide information on certified radon mitigators who service Gilpin County.
- Inform residents about financial assistance available for mitigation.
- Determine baseline of homes being tested in 2023 and 2024.
- Ask residents who mitigate to share their experience for a feature story.

Partners:

- Gilpin County Library
- CSU Extension Office
- CDPHE (Radon Grant)

2024-2028 HEALTH PRIORITIES

#2: TOBACCO AND NICOTINE

Issue: Tobacco and nicotine addiction. See page 15 for details.

Goal: Decrease nicotine use, including vaping, in youth and adults.

2024 Objectives:

- Increase the number of Gilpin residents who utilize cessation programs.
- Assist local middle and high school students who are addicted to nicotine to quit.
- Provide prevention education to 3rd and 5th graders in both schools.

2024 Strategies:

- Promote through free and paid media available resources for cessation.
- Provide low-income and residents with behavioral disorders specific resources for cessation.
- Work with schools to develop policies for students caught smoking or vaping that assist them to quit.
- Teach Botvin Lifeskills Program at Gilpin School.

Partners:

- Gilpin County Schools
- Gilpin County Community Center
- Clinica
- Colorado Regional Health Connector Program

2024-2028 HEALTH PRIORITIES

#3: SAFE DRINKING WATER

Issue: Access to safe drinking water. See pages 11 and 12 for details.

Goal: Increase the number of residents who test their well water annually.

2024 Objectives:

- Increase number of residents who test with Gilpin Public Health.
- Increase the number of residents who do more comprehensive well water testing with CDPHE lab.
- Investigate the possibility of expanding our testing menu to include nitrates.

2024 Strategies:

- Educate existing residents about private well water issue and testing options.
- Provide information to new residents about having a private well.
- Educate residents who test their water with our lab about their results.
- Call all residents whose water tests positive for E.coli same day to insure they stop using their water until remediated.

Partners:

- CDPHE
- CSU Extension
- Gilpin County Library

2024-2028 HEALTH PRIORITIES

#4: BEHAVIORAL HEALTH

Issue: Behavioral health and substance misuse and addiction. See pages 14-16 for details.

Goals:

- Increase the number of residents who seek treatment for substance addiction, including alcohol and illicit drugs.
- Increase utilization of behavioral supports, programs and services by youth and low income residents.

2024 Objectives:

- Reduce rates of suicide and accidental overdose.
- Inform and increase accessibility of available behavioral health services.
- Develop and implement tools and training for first responders to assist residents in need of support.
- Support and collaborate on development of co-responder program.

2024 Strategies:

- Host community trainings for residents and first responders on Mental Health First Aid, and Suicide Prevention.
- Collaborate with Jefferson Center regularly to promote services and identify and reduce barriers to access.
- Develop Program for first responders and hold regular meetings to collaborate.
- Distribute and educate about the use of Narcan and Fentanyl Test Strips.
- Participate, support and promote new programs and services funded by the Gateways to the Rockies Opioid Council (GROC) settlement.

Partners:

- | | |
|----------------------------------|------------------------------|
| • Jefferson Center | • Gilpin Ambulance Authority |
| • Gilpin County Human Services | • Timberline Fire |
| • Clinica | • Gilpin Public Library |
| • Gilpin County Community Center | • GROC Grantees |
| • Gilpin County Sheriff's Office | |

2024-2028 HEALTH PRIORITIES

#5: COMMUNICABLE DISEASES

Issue: Communicable disease prevention. See page 14 for details.

Goals:

- Increase immunization rates for required childhood and seasonal adult vaccines.
- Prevent foodborne illnesses.

2024 Objectives:

- Develop an immunization program for seasonal adult and pediatric routine immunizations.
- Conduct inspections, education and training on foodborne illness prevention with all retail food licensees.
- Complete FDA-NEHA audit of retail food program.
- Investigate and track all foodborne illness complaints.

2024 Strategies:

- Investigate partnership with Clinica and/or another local public health agency with clinical services available
- Schedule vaccine van from CDPHE to come to Gilpin 3-4 times during later summer and early fall.

Partners:

- Clinica and/or another public health agency
- CDPHE
- Food and Drug Administration (FDA) and National Environmental Health Association (NEHA)

2024-2028 HEALTH PRIORITIES

#6: ENVIRONMENT

Issue: Environmental contamination (septic systems and lead).

Goals:

- Increase compliance with state and local onsite wastewater treatment regulations (OWTS).
- Increase the number of infants and children (up to age 6) who have had blood lead testing.

2024 Objectives:

- Educate homeowners about OWTS operations, maintenance and service.
- Educate parents about the childhood lead exposure risks.

2024 Strategies:

- Evaluate and clarify county OWTS regulations for revision in 2025.
- Host 2 community meetings to increase awareness and prompt testing.
- Utilize print and social media for education about lead exposure in homes and Gilpin Superfund area.

Partners:

- Gilpin County Community Development
- Gilpin CSU Extension
- Gilpin County Library
- CDPHE
- Environmental Protection Agency (EPA)

APPENDIX A

CAPACITY ASSESSMENT AND PARTNERSHIPS

Following a unanimous decision by the Board of Health, Gilpin County Public Health (GCPH) ended our intergovernmental agreement with Jefferson County at the end of December 2023. Following this transition, much of the support that we receive for core services has shifted to CDPHE. This includes Emergency Preparedness and Communicable Disease Control, which have both moved from a regional model to primarily being directed by individual local public health agencies (LPHAs) with additional assistance provided by the State. We are considered fully staffed with three full-time employees; a Public Health Director, Environmental Health Specialist, and a Community Health Specialist. In addition to position specific duties, each employee shares the responsibility of administrative support as we do not have a staff member dedicated to this role. We do not have the capacity to serve as a clinical agency due to limited staff capacity, and we rely on partner organizations to provide mandated clinical services such as immunizations, family planning and maternal/childcare, and prevention resources. In 2022, Gilpin County established its first Federally Qualified Healthcare Center (FQHC), Clinica, which provides residents with healthcare services that were previously unavailable within the county. As a rural LPHA serving a community of approximately 5,800 residents, financial services dedicated to core public health services largely comes in the form of grants. Many of our efforts in specific areas including tobacco control, emergency planning, and retail food regulation are primarily grant funded, as are staffing and training expenses. GCPH has benefited from recent increases in PH funding; however, this funding is not permanent. Future capacity for staff will be re-evaluated as funding streams change in the future.

As a small, rural health agency, Gilpin County Public Health relies on the coordination of local, regional, and state partners to provide services and accomplish health goals. Networking with other LPHAs and attending collaborative meetings and trainings has allowed us to expand the reach and depth of our impact. We also receive dedicated staff support from CDPHE for communicable disease control and emergency planning, which are important areas for that valuable partnership and expertise. While Gilpin County's CHIP priorities are unique, our goals align closely with those of our close county public health neighbors and with those of CDPHE.

APPENDIX B

COMMUNITY INVOLVEMENT IN PROCESS

Gilpin County's CHIP development and implementation process included input and leadership from a variety of community stakeholders. A significant part of the CHIP involved collecting qualitative data through resident surveys, key informant interviews, and a youth focus group. The knowledge collected through these methods provided insight into the most impactful health issues facing different populations within the community. The Public Health Advisory Board was also crucial in the development and implementation of the CHIP. The board is made up of individuals who work or live in the county. They include two nurses, a Medicaid representative, our regional health connector, our community center youth program manager, and representatives from Clinica, Gilpin's federally qualified healthcare center, and Jefferson Center, our mental health partner organization. The board met once a month during the development of the CHIP and continues to meet regularly to discuss prioritization and implementation strategies.

ACRONYMS

- **ACS:** American Community Survey
- **BCPH:** Boulder County Public Health
- **BHPD:** Black Hawk Police Department
- **BRFSS:** Behavioral Risk Factor Surveillance System
- **CCCPH:** Clear Creek County Public Health
- **CDE:** Colorado Department of Education
- **CDPHE:** Colorado Department of Public Health and Environment
- **CHIP:** Community Health Improvement Plan
- **CSU Extension:** Colorado State University Extension
- **CU Anschutz:** University of Colorado at Anschutz
- **EPA:** Environmental Protection Agency
- **GAA:** Gilpin Ambulance Authority
- **GCHS:** Gilpin County Human Services
- **GCPH:** Gilpin County Public Health
- **GCPHAB:** Gilpin County Public Health Advisory Board
- **GCPL:** Gilpin County Public Library
- **GCPR:** Gilpin County Parks and Recreation
- **GCSO:** Gilpin County Sheriff's Office
- **GROC:** Gateway to the Rockies Opioid Council
- **Gilpin RE-1:** Gilpin County School District RE-1
- **HKCS:** Healthy Kids Colorado Survey
- **HSR17:** Health Statistics Region 17, comprising Gilpin County, Clear Creek County, Park County, and Teller County
- **NMSHS:** Nederland Middle-Senior High School
- **SNAP:** Supplemental Nutrition Assistance Program
- **WIC:** Special Supplemental Nutrition Program for Women, Infants, and Children

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All photos taken by Katherine Harvey.