

Why We Chose LaSalle, Gilcrest and Platteville

Each of the three communities have very similar characteristics regarding demographics, community character, limited access to fresh, healthy, affordable food choices, and a shared school district.

Food Deserts

Obesity and diet-related diseases such as diabetes and heart disease have become major public health concerns in recent years. Healthy Weld 2020 has been a leader in obesity prevention initiatives in Weld County since 2005 by creating healthy environments where residents work, learn, live and play.

LaSalle, Gilcrest and Platteville each lack a full service grocery store, making them among 9 identified food desert communities in Weld County. Food deserts lack sufficient access to a wide variety of healthy, fresh, and affordable foods that are essential for good health such as fresh fruits and vegetables, fresh meats/beans, dairy and whole grain products.

According to a national food access study conducted by the United States Department of Agriculture¹, obesity and diet-related diseases may be worse in some U.S. communities because access to affordable and nutritious foods is difficult (USDA, 2009). With the low availability of affordable and healthy food options, LaSalle, Gilcrest, and Platteville residents may be at greater risk than other residents in Weld County who do not live in a food desert.

Shared School District

All three communities are part of the Weld County RE-1 school district. Each community has an elementary school, LaSalle and Platteville have middle schools, and Gilcrest has the district's high school, as well as several athletic amenities (football fields and swimming pool), the FFA greenhouse, and the school district offices.

Table 1 All school services for LaSalle, Gilcrest and Platteville

	LaSalle	Gilcrest	Platteville
Elementary School	x	x	x
Middle School	x		x
High School		x	
Head Start		X	x

Additionally, according to the Colorado Department of Education none of the three communities has a public pre-kindergarten program. However, Gilcrest and Platteville have a Head Start program².

The School District Nutrition Services Department

Like many school districts in the county, Weld School District RE-1 has seen the need to improve the nutritional offerings provided to the students. For the past several years, the nutrition services director has been working to transition the

¹ United States Department of Agriculture (2009). Access to Affordable and Nutritious Food-Measuring and Understanding Food Deserts and Their Consequences: Report to Congress <http://www.ers.usda.gov/Publications/AP/AP036> accessed January 9, 2012

² CDI Head Start of Weld County http://weldcohs.org/index.php?option=com_content&view=article&id=24&Itemid=38 accessed January 10, 2012

district to using more locally grown and produced foods as well as more scratch cooking, thereby reducing the processed foods served to students.

All meals are planned and prepared out of the Valley High School (Gilcrest) full-service kitchen and transported to the satellite school kitchens for heating and serving. In 2010 the district began purchasing whole wheat cinnamon rolls from a local bakery and in 2011 participated in their first Farm to School procurement bid for produce. They also participate in the Weld School District 6 cooperative bidding process to allow them to purchase locally grown and processed foods at competitive rates. These combined activities, have allowed the Nutrition Services Department to increase their purchase of local foods and increase meals prepared by scratch cooking.

Regional Description from the 2010 Community Health Survey

Every three years, Weld County Department of Public Health and Environment conducts a community survey to assess the health status and health needs of county residents. The questionnaire asked residents about their perceived overall health and included questions about health status, health habits, lifestyle factors, screening rates, insurance coverage, and a variety of health-related perceptions and concerns. All survey responses are self-reported. In 2010, 3,383 residents returned usable surveys.

The information presented in Appendix A represents 157 respondents and is specific to the communities of Gilcrest, La Salle and Platteville. Several highlights from the results are noted below.

2010 U.S. Census Demographics

Demographically, all three communities are relatively equal in their population density and percentages for all age ranges; however, while LaSalle has a slightly higher population of residents 65 years and older, Gilcrest has a higher proportion of Hispanic or Latino residents to not Hispanic or Latino residents (see Table 2 below).

Table 2 U.S. Census Data 2010

	Gilcrest, CO		La Salle, CO		Platteville, CO		85 Corridor
	Number	Percent	Number	Percent	Number	Percent	Number
AGE							
Total population	1,034		1,955		2,485		5,474
Under 5 years	62	6.0	137	7.0	198	8.0	397
Median age (years)	33.6		36.4		33.5		
18 years and over	723	69.9	1,416	72.4	1,717	69.1	3,856
65 years and over	93	9.0	248	12.7	234	9.4	575
HISPANIC OR LATINO							
Hispanic or Latino (of any race)	574	55.5	685	35	968	39	2,227
Not Hispanic or Latino	460	44.5	1,270	65	1,517	61	3,247

Chronic Disease Risk Factors, Lifestyle Factors and Recreational Amenities

Table 3 Chronic disease factors for LaSalle, Gilcrest and Platteville

Chronic Disease Risk Factors

When residents were asked about the status of their health-related concerns, many of the self-reported responses are noted to be higher in the HWY 85 communities than in all of Weld County (see Table 2).

While not medically substantiated in this survey, the responses do give an indication of the potential chronic disease risk factors affecting LaSalle, Gilcrest and Platteville residents and give an indication of programs that can be offered to educate and assist residents to improving their health.

Nutrition education and meal preparation on a budget classes, and health screening and education programs are prime examples that present lifestyle enrichment.

Chronic Disease Risk Factor	85 Corridor Communities	All Weld County
No high school diploma	17%	9%
Less than \$25,000 income	23%	19%
No insurance	25%	15%
Hypertension	33%	23%
High cholesterol	30%	25%
Diabetes	10%	7%
Depression	16%	16%
Current smoker	17%	13%
Eat less than 5 or more fruits/veggies per day	71%	69%
Low or no physical activity	39%	46%
Overweight or obese	72%	62%

Table 4 LaSalle, Gilcrest and Platteville lifestyle factor concerns

Lifestyle Factor	Very to Moderately Concerned
OVERALL ENVIRONMENT	
Population growth	55%
Environmental quality	61%
HEALTH AND/OR SOCIAL	
Availability of recreation opportunities	62%
Overweight or obesity (epidemic)	65%
Youth tobacco use	69%
Teen sex	82%
Alcohol abuse	76%
Drug abuse	74%
VIOLENCE & SAFETY	
Domestic violence	73%
Child abuse	77%
Youth crime/gangs	82%
Neighborhood safety	78%
Bike/pedestrian safety	64%
Unsafe traffic conditions	63%

Lifestyle Factors

The community health survey also asked residents to rate their level of concern on three lifestyle factors: 1) environmental, 2) health and/or social and 3) violence and safety.

Table 4 shows the LaSalle, Gilcrest and Platteville responses to those lifestyle factors. All factors except ‘population growth’ were rated above 60 percent.

A significant number of surveyed residents were very to moderately concerned about the health and/or social factors as well as the violence & safety factors.

Parks and Recreation Facilities

Residents were asked to consider how valuable the creation, improvement and/or maintenance of parks and recreational amenities were to them. Realizing that community needs varied widely the question was purposely broad to include all forms of recreation (ball fields, trails. etc).

Seventy-two percent (72%) of LaSalle, Gilcrest and Platteville residents found them extremely or very valuable (Table 5).

Table 5 Parks and recreational facilities value for LaSalle, Gilcrest and Platteville residents

How valuable is creation, improvement, and/or maintenance of parks and recreation facilities to you?	
	Percent
Not at all	4.5
Slightly or moderately	23.5
Extremely or very	72.0
Total	100.0

HWY 85 Health Impact Assessment Process

A total of 29 individual interviews were done and three citizen-based informal polling surveys were done. Table 6 outlines the interviews by type and location. In addition, the following secondary data has been analyzed:

- Colorado Department of Education 2010 K-12 Free/Reduced Eligibility data
- Hunger Free Colorado Summer Meal site data.
- Feeding America’s Map the Meal Gap site
- Weld Food Bank
- United States Department of Agriculture Report to Congress, Administrative Publication No. (AP-036), 2009.
- CDI Head Start of Weld County
- Weld County Community Health Survey 2010
- Colorado Office of Economic Development and International Trade – LaSalle and Weld County
- ESRI Business Analyst Online: Retail MarketPlace Profiles for each town (6/9/11)
- LaSalle and Platteville public comments from their respective Comprehensive Plan updates (LaSalle – 1999, Platteville – 2010)
- Weld County 2012 Health Status Report & Community Health Improvement Plan.

Table 6 Summary of Key Informant Interviews

	Platteville	LaSalle	Gilcrest	Region applicable	Totals
Key informant interviews	6	7	5	2	20
Summer meal program	1			1	2
Planning meetings					
Town Administration interviews	2	2	1		5
Public comment reviews	1	1			2
Community surveys (at town festivals)	1	1	1		3
Totals	11	11	7	3	

In addition to the adult-focused individual interviews, informal community surveys were conducted at each Town’s summer festival. These informal surveys were conducted through a simple bean survey process, and were designed to allow children younger than 18 and adults to express their opinions. The survey was limited to 2 topics – food access and physical activity interests. Healthy Weld 2020 staff manned the booth for several hours during the festival’s park activities, and participants were given granola bars and cold water for taking part in the survey. All surveys were well received and attended.

The health impact assessment focuses on five areas that are health indicators for each community –food programs, physical activity programs, special populations (teens, seniors and vulnerable residents), social capital, and economic development.

Food Programs

A unique situation is occurring across the country where the problems of food insecurity (uncertain or limited access to safe and healthy food) and chronic nutrition-related diseases and obesity are existing side by side, sometimes within the same household³.

Feeding America has developed a Map the Meal Gap project⁴ to help understand what hunger looks like at the local community level. This interactive map currently reflects 2009 adult and child food insecurity data. From Feeding America's Map the Meal Gap we can learn about Weld County hunger as a whole compared to Colorado. Table 7 summarized the overall food insecurity rate of Colorado and Weld County and Table 8 summarized the childhood food insecurity rate for Colorado and Weld County.

Table 7 Overall Food Insecurity Rate for Colorado and Weld County (Feeding America, 2009)

	Overall Food Insecurity Rate	Income Bands within Food Insecure Population		
		Below SNAP 130% Poverty Threshold	Between 130-185% Poverty	Above 185% Poverty Threshold
Colorado	14.3%	42%	16%	42%
Weld	15.2%	44%	20%	36%

Table 8 Child Food Insecurity for Colorado and Weld County (Feeding America, 2009)

	Child Food Insecurity Rate	Estimated Program Eligibility Among Food Insecure Children*	
		Income-Eligible for Federal Nutrition Programs	Likely Ineligible for Federal Nutrition Programs
Colorado	22.7%	57%	43%
Weld	25.1%	60%	40%

* Percent of food insecure children living households with incomes above or below 185% of the federal poverty guideline for 2009. Eligibility for federal child nutrition programs is determined in part by this income.

Hunger is not restricted to age, ethnicity, education, employment status or neighborhood. Anyone having trouble making ends meet can be considered food insecure. According to Weld Food Bank, 1 in 8 Coloradans struggle with hunger.⁵ From their most recent Hunger Study results, many WFB households receiving food assistance include children and seniors, have at least one working adult in the home, have received some post high school or college education, or had to choose between food and other necessities.⁶

The food insecurity issue is also evidenced in the Weld RE-1 School District that serves LaSalle, Gilcrest and Platteville. The Colorado Department of Education 2010 K-12 Free/Reduced Eligibility data showed that the free/reduced eligibility for the school district was 56.8%. All three elementary schools had free/reduced eligibility rates between 61% and 71.2%, the middle schools between 53.7% and 60.8%, and the high school with a rate of 42.4%.

³ <http://www.medicalnewstoday.com/releases/28630.php> accessed February 15, 2012

⁴ Feeding America, <http://feedingamerica.org/hunger-in-america/hunger-studies/map-the-meal-gap.aspx> accessed December 27, 2011

⁵ Weld Food Bank, About Hunger <http://www.weldfoodbank.org/LearnAboutHunger.aspx> accessed December 27, 2011.

⁶ Weld Food Bank, The Changing Face of Hunger <http://www.weldfoodbank.org/LearnAboutHunger/Hunger101/ChangingFaceofHunger.aspx> accessed December 28, 2011.

Additionally, the school principals interviewed confirmed there is likely more food insecurity than is recognized, especially at the elementary school level. School staff becomes aware of food assistance needs with students through interactions; parents do not openly ask for food assistance, but will ask for assistance with school supplies.

All schools participate in the free and reduced lunch and breakfast program, and beginning Fall 2011 each elementary school participated in the Weld Food Bank sponsored Back Pack program. Student participation in the free/reduced lunch and breakfast programs is not highly utilized for several suspected reasons: school bus arrivals do not allow enough time to eat before reporting to class, and for older kids, it is a more social activity (are my friends doing it?).

Existing Local Food Programs

Key informant interviews and research revealed that LaSalle, Gilcrest and Platteville have varied food assistance programs, with Platteville having the most organized (and most utilized) food pantry, associated with the Weld Food Bank. LaSalle Ministry Alliance operates a food pantry not affiliated with the Weld Food Bank that is supported by community and church donations. This food pantry is open on an as-needed basis and does not appear to be well recognized or advertised. Various school and community food drives, holiday baskets and community meal opportunities round out the food assistance programs in all three communities. A summary of existing local food programs by community can be found in Table 9.

Table 9 Summary of Existing Local Food Programs by Community (HWY 85 Health Impact Assessment Interviews, 2010)

	LaSalle	Gilcrest	Platteville
Food Pantry	x		x
Emergency Food Pantry		x	x
Senior Meal Program			x
Community Meals	x		x
Community Food Drives	x	x	
School Food Drives	x	x	x
Holiday Baskets	x	x	x
Community-sponsored Before/After School Snacks	x		

Food Access Community Identified Needs

During each community’s summer festival residents were asked what type of food access improvement options they would support in their community. The same question and four options were offered on each community survey. Supporting a farmer’s market was the overall food access theme in each community. A summary of the results can be found in Table 10 below. Individual community results and applicable key informant comments are noted in the community sections later in this report.

Table 10 Summary of food access needs by community

	LaSalle	Gilcrest	Platteville
Food Access	<ul style="list-style-type: none"> farmer’s market 	<ul style="list-style-type: none"> farmer’s market affordable cooking and nutrition classes 	<ul style="list-style-type: none"> Farmer’s market community gardens