



# **Downeast Maine Public Health District**

**Hancock and Washington County**

## **Annual District Report: 2024**

Downeast Public  
Health Council



**Public Health**  
Prevent. Promote. Protect.





## **EXECUTIVE SUMMARY**

Welcome to the 2024 Annual Report for the Downeast Maine Public Health District. This report will provide a snapshot of health issues impacting the people of our two counties. It will also introduce you to the people working in our district from our Maine CDC Public Health Unit to our district partners and our municipal local health officers. The report will summarize many of the programs and strategies that the district is using to meet our vision of having the healthiest communities in Maine.

## **INTRODUCTION**

The Downeast Public Health District is one of eight geographic public health districts in Maine, serving a population of approximately 86,000 in Hancock and Washington Counties that includes two jurisdictions of the Passamaquoddy Tribe. The District assures a working public health system through the delivery of the ten essential public health services. We actively promote a public health system built on collaboration that enables optimal health for all. In working with our district partners, we work together to remove systemic and structural barriers at the local level and strive for changes at the state and national level with the help of our advocates.

## **VISION**

Downeast Maine Communities are among the healthiest in the state.

## **MISSION**

Promote the health of all our communities by providing public health information, coordination, collaboration, and advocacy.

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Lighthouse on Rocky Cliff in Bar Harbor



**Report Date: November 11, 2024**  
**Authors: Kawther Mohamed and Alfred May**

# Public Health Unit

## **PUBLIC HEALTH NURSING**

Maine CDC Public Health Nurses are registered professional nurses, working to improve, preserve, and protect the health and quality of life for all Maine citizens. PHN staff include Stephanie Lavigne, Catherine MacDonald and Tammy Mitchell.

## **HEALTH INSPECTION**

Maine CDC Health Inspection Program exists to provide licensing and inspection services for a number of different types of businesses to protect the public's health. HIP staff include Weibley Dean.

## **DRINKING WATER PROGRAM**

Maine CDC Drinking Water Program provides the technical assistance and enforcement of drinking water standards under the Safe Drinking Water Act. DWP staff include Scott Whitney.

## **FIELD EPIDEMIOLOGY**

Maine CDC Field Epidemiologists work at the regional level to provide technical assistance and best practices in response to disease investigations and educational requests from healthcare, schools, businesses, and community organizations. FE staff include Maura Lockwood.

## **PUBLIC HEALTH EDUCATOR**

Maine CDC District Public Health Educators provide technical support and communication expertise in developing messaging and education materials relevant to national and state public health topics. PHE staff include Kawther Mohamed.

## **DISTRICT LIASON**

Maine CDC District Liaison provides leadership to the public health district, coordinates staff of the public health unit, provides technical assistance and training to local health officers, and responds to the policy and actions of the Maine CDC Director. DL staff include Alfred May.



# Downeast Public Health Council

## WHAT IS A PUBLIC HEALTH COUNCIL?

The Downeast Public Health Council is a representative, district-wide body formed to engage in collaborative planning and decision-making for the delivery of the ten Essential Public Health Services. The core principles of the district council are assessment, system change, partner mobilization, and assurance to be accountable to the standards and services.

## WHO WE ARE

2024 Executive Committee include Angela Fochesato, Chair; Tracy Parker, Vice Chair; Helen Burlock; Maria Donahue; Dante Zanon; and Andrew Sankey.

## 2024 MEETING DATES: ATTENDANCE RANGE 20 TO 40 PEOPLE

January 19; March 15; May 17; July 19; September 20; and November 15.

## 2024 COUNCIL COMMITTEES

### PRIMARY AND SECONDARY PREVENTION

- Increase number of opportunities for education on reducing risk factors for diabetes, cancer, and cardiovascular disease.
- Increase the percentage of screenings for pre-diabetes, cancer and hypertension/CVD.

### MENTAL HEALTH: PRIMARY CARE EDUCATION AND WORKFORCE DEVELOPMENT

- Increase awareness and education of mental health risk factors and to introduce a new community-based crisis response practice.

### EMERGENCY OPERATIONS RESPONSE & HEALTH CARE

- Increase the percentage of CMS-regulated healthcare facilities that meet CMS requirements for having and testing an emergency operations and response plan.

### OLDER ADULTS HEALTH AND SAFETY

- Increase the percentage of older adult home assessments to reduce risks of injuries and improve safety of homes.
- Increase the percentage of older adult dental assessments by implementing alternative forms of annual visits and promoting oral health home assessments.





# Downeast Public Health Council

2024 Downeast Public Health Council Membership	
Aroostook Mental Health Center	Jackson Lab
Beth C. Wright Cancer Resource Center	LHO Representative Hancock and Washington Counties
Brookline Fire Department	Maine CDC
Bucksport Bay Healthy Communities	Maine CDC Public Health Nursing
Bucksport Regional Health Center	Maine Youth Action Network
Calais Community Hospital	Maine Hospice Council
Caring Hands of Maine	Maine Mobile Health Program
Community Caring Collaborative	Maine Seacoast Mission
Community Health and Counseling Services Behavioral Health	Mano en Mano
Community Health and Counseling Services Home Care and Hospice	Medical Care Development
Community Health and Counseling Services Homeless Response Services	Mount Desert Island Hospital
Down East Community Hospital	Next Step Domestic Violence
Downeast Coastal Conservatory	Northern Light Blue Hill and Maine Coast Hospitals
Downeast Community Partners	Northern Light Health Systems
East Grand Health Center	Regional Medical Center at Lubec
Eastern Area Agency on Aging	School District Representative Hancock and Washington Counties
Eastern Maine Development Corporation	St. Croix Regional Family Health Center
Eastport Health Care Inc	Strategic Wisdom Partners
Hancock County Emergency Management Agency	Sunrise Opportunities
Hancock County Planning Commission	Sunrise County Economic Council
Harrington Family Health Center	Tribal Liaison
Healthy Acadia	University of Maine Machias
Health Equity Alliance (Downeast AIDs Network)	Washington County Community College
Healthy Peninsula	Washington County Council of Governments
Heart of Maine United Way	Washington County Emergency Management Agency

## 2024 INFRASTRUCTURE FUNDING

Federal funding, administered by Downeast Public Health Council, was distributed to Eastport Health Care to purchase new generators to minimize vaccine and patient medication loss due to power outages.

# Shared Community Health Needs Assessment

## HANCOCK COUNTY SELECTED INDICATORS

Indicator	Hancock County	Maine
People living in rural areas	100%	NA
Individuals living in poverty	10.3%	11.0%
Children living in poverty	13.1%	13.4%
Median household income	\$60,354.00	\$63,182.00
65+ living alone	30.2%	27.2%
Life expectancy	78.3	78.6
Overall death rate per 100,000	750.1	844.3
Uninsured	9.900%	7.400%
Maine Care enrollment	16.300%	27.300%
All cancer deaths per 100,000	153.6	159.9
Prostate cancer deaths per 100,000	19.3	19.9
Tobacco related cancer new cases per 100,000	138.2	137.2
Alcohol-associated new cancer cases per 100,000	142.4	135.4
Cardiovascular disease deaths per 100,00	186.0	200.4
Diabetes	8.3%	10.4%
Chronic obstructive pulmonary disease	7.9%	8.8%
Obesity adults	27.2%	31.9%
Food insecurity	12.7%	13.0%
Births to 15-19 year olds per 1,000	5.8	8.1
Smoked during pregnancy	9.4%	9.1%
Arthritis	34.5%	30.7%
Injury deaths per 100,000	95.6	99.4
Fall-related deaths per 100,000	12.1	17.5
Motor vehicle traffic crash deaths per 100,000	15.6	11.7
Suicide deaths per 100,000	17.1	18.3
Depression lifetime	23.9%	23.0%
Dentists visits in past year adults	67.3%	66.7%
Drug-induced deaths per 100,000	32.3	55.6
Alcohol-induced deaths per 100,000	12.0	18.6

Maine Shared CHNA 2024 Profile



MAINE SHARED CHNA DATA:  
[HTTPS://WWW.MAINE.GOV/DHHS/MECDC/PHDATA/MAINECHNA/HEALTH-PROFILES.SHTML](https://www.maine.gov/dhhs/mecdc/phdata/mainechna/health-profiles.shtml)

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# Shared Community Health Needs Assessment

## WASHINGTON COUNTY SELECTED INDICATORS

Indicator	Washington County	Maine
People living in rural areas	100%	NA
Individuals living in poverty	18.7%	11.0%
Children living in poverty	22.6%	13.4%
Median household income	\$46,689.00	\$63,182.00
65+ living alone	31.9%	27.2%
Life expectancy	74.3	78.6
Overall death rate per 100,000	1,041	844.3
Uninsured	11.1%	7.4%
Maine Care enrollment	40.3%	27.3%
All cancer deaths per 100,000	190.4	159.9
Prostate cancer deaths per 100,000	34.4	19.9
Tobacco related cancer new cases per 100,000	175.8	137.2
Alcohol-associated new cancer cases per 100,000	174.7	135.4
Cardiovascular disease deaths per 100,000	269.9	200.4
Diabetes	13.0%	10.4%
Chronic obstructive pulmonary disease	13.3%	8.8%
Obesity adults	40.0%	31.9%
Food insecurity	17.1%	13.0%
Births to 15-19 year olds per 1,000	20.9	8.1
Smoked during pregnancy	19.0%	9.1%
Arthritis	38.6%	30.7%
Injury deaths per 100,000	165.5	99.4
Fall-related deaths per 100,000	24.5	17.5
Motor vehicle traffic crash deaths per 100,000	24.8	11.7
Suicide deaths per 100,000	28.4	18.3
Depression lifetime	24.7%	23.0%
Dentists visits in past year adults	56.3%	66.7%
Drug-induced deaths per 100,000	69.2	55.6
Alcohol-induced deaths per 100,000	22.3	18.6

Maine Shared CHNA 2024 Profile



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MAINE SHARED CHNA DATA:  
[HTTPS://WWW.MAINE.GOV/DHHS/MECDC/PHDATA/MAINECHNA/HEALTH-PROFILES.SHTML](https://www.maine.gov/dhhs/mecdc/phdata/mainechna/health-profiles.shtml)



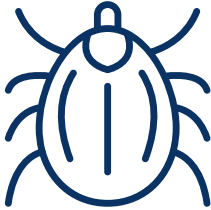
# Local Public Health System Assessment

<b>Downeast Public Health Council</b> <b>Priorities for 2024 based on Local Public Health System Assessment</b> <b>Focus on Hancock and Washington Counties</b>	
<b>Essential Public Health Service</b>	<b>Objectives/Strategies</b>
EPHS 1: Monitor health status to identify and solve community health problems	
EPHS 2: Diagnose and investigate health problems and health hazards	<ul style="list-style-type: none"> <li>• Increase access to primary care providers.</li> <li>• Increase emergency preparedness and response for FQHCs.</li> </ul>
EPHS 3: Inform, educate, and empower people about health issues	<ul style="list-style-type: none"> <li>• Reduce seeking mental health care in ED by broader use of Community Crisis services.</li> <li>• Increase cardiovascular screening.</li> <li>• Increase diabetes health promotion.</li> </ul>
EPHS 4: Mobilize community partnerships to identify and solve health problems	<ul style="list-style-type: none"> <li>• Increase access to all health services.</li> <li>• Promote mobile annual Medicare visits in home; increase safety assessment.</li> </ul>
EPHS 5: Develop policies and plans that support individual and community health efforts	<ul style="list-style-type: none"> <li>• Strengthen accessibility of community gardens to a wider population.</li> <li>• Improve distribution of fresh foods to local food security organizations.</li> </ul>
EPHS 6: Enforce laws and regulations that protect health and ensure safety	
EPHS 7: Link people to needed personal health services and assure the provision of health care when otherwise unavailable	<ul style="list-style-type: none"> <li>• Decrease the Dental ED rates for adults.</li> <li>• Decrease the fall-related injuries.</li> <li>• Decrease drug-affected infant rates.</li> <li>• Increase early treatment and prevention for mental health and substance use for youths.</li> <li>• Increase cancer screening rates.</li> </ul>
EPHS 8: Assure a competent public health and personal health care workforce	<ul style="list-style-type: none"> <li>• Increase access and awareness of mental health services.</li> <li>• Increase access to primary and preventive care by addressing healthcare workforce shortages.</li> </ul>
EPHS 9: Evaluate effectiveness, accessibility, and quality of personal and population-based health services	<ul style="list-style-type: none"> <li>• Identify opportunities to increase engagement with Maine Quit link.</li> </ul>
EPHS 10: Research for new insights and innovative solutions to health problems	<ul style="list-style-type: none"> <li>• Increase awareness of cancer death rates to public through media stories.</li> </ul>



# Infectious Diseases

## EPI SNAP SHOT (MAINE STATE)



2,652 Lyme



35 Animal Rabies



16,552 Positive Influenza  
Reports (2022-2023)

## HANCOCK COUNTY MAINE REPORTABLE INFECTIOUS DISEASE

Condition	County		District		State	
	Count	Rate	Count	Rate	Count	Rate
<i>Anaplasma phagocytophilum</i>	78	137.6	94	106.7	824	59.5
Babesiosis	23	40.6	26	29.5	193	13.9
Campylobacteriosis	12	21.2	14	15.9	215	15.5
<i>Chlamydia trachomatis</i> infection	81	142.9	122	138.4	3137	226.4
Giardiasis	8	14.1	12	13.6	99	7.1
Gonorrhea	16	28.2	18	20.4	621	44.8
Hepatitis C, chronic	29	51.1	58	65.8	1336	96.4
Invasive Pneumococcal Disease	8	14.1	10	11.3	167	12.1
Lyme disease	363	640.2	457	518.5	2652	191.4
Salmonellosis	8	14.1	12	13.6	150	10.8

Counts of confirmed and probable cases. Rates of confirmed and probable cases per 100,000 people

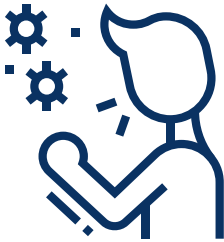


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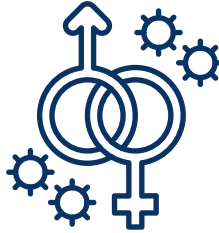
ANNUAL REPORT 2022, MAINE REPORTABLE INFECTIOUS DISEASES SUMMARY:  
[HTTPS://WWW.MAINE.GOV/DHHS/MECDC/INFECTIOUS-  
DISEASE/EPI/PUBLICATIONS/#ANNUALREPORTS](https://www.maine.gov/dhhs/mecdc/infectious-disease/eipi/publications/#annualreports)

# Infectious Diseases

## EPI SNAP SHOT (MAINE STATE)



79 Pertussis



112 Syphilis



25 Legionellosis

## WASHINGTON COUNTY MAINE REPORTABLE INFECTIOUS DISEASE

Condition	County		District		State	
	Count	Rate	Count	Rate	Count	Rate
<i>Anaplasma phagocytophilum</i>	16	50.9	94	106.7	824	59.5
Babesiosis	3	9.5	26	29.5	193	13.9
Campylobacteriosis	2	6.4	14	15.9	215	15.5
<i>Chlamydia trachomatis</i> infection	41	130.4	122	138.4	3137	226.4
Giardiasis	4	12.7	12	13.6	99	7.1
Gonorrhea	2	6.4	18	20.4	621	44.8
Hepatitis C, chronic	29	92.2	58	65.8	1336	96.4
Invasive Pneumococcal Disease	2	6.4	10	11.3	167	12.1
Lyme disease	94	299	457	518.5	2652	191.4
Salmonellosis	4	12.7	12	13.6	150	10.8

Counts of confirmed and probable cases. Rates of confirmed and probable cases per 100,000 people



ANNUAL REPORT 2022, MAINE REPORTABLE INFECTIOUS DISEASES SUMMARY:  
[HTTPS://WWW.MAINE.GOV/DHHS/MECDC/INFECTIOUS-DISEASE/EIPI/PUBLICATIONS/#ANNUALREPORTS](https://www.maine.gov/dhhs/mecdc/infectious-disease/eipi/publications/#annualreports)

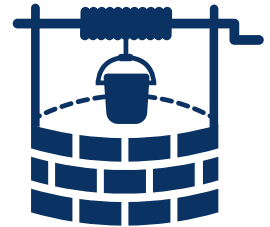
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# Environmental Health

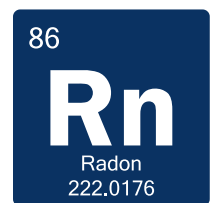
## PRIVATE WELL WATER

More than fifty percent of households in Maine get their drinking water from private wells. Unlike community drinking water systems that are regulated under the Safe Drinking Water Act, private wells are the responsibility of the homeowner and the chief means of determining the quality of that well is through testing-annually for bacteria and nitrates, and periodically for natural contaminants like arsenic. Our district has worked with municipalities and tribal jurisdictions to hold 'well water testing days' as a means of assuring safe and clean drinking water sources.



## INDOOR RADON

Radon is the second leading cause of lung cancer and the primary cause for those who have never smoked tobacco products. Radon is prevalent in some areas of Maine due to geology and the gas percolates up through the soil into basements and homes. Radon can be tested using an air collection canister, and if high values are found in air, it is recommended to also conduct a radon water test. Our district is working with research and community partners to promote radon testing in schools and communities.



## ENVIRONMENTAL HEALTH STATISTICS

Indicator	Hancock County	Washington County	Maine
Children with Lead Poisoning	1.50%	2.30%	2.20%
	2018-2022	2018-2022	2018-2022
Adults living in households with private wells tested for arsenic	57.40%	46.80%	52.70%
	2016-2019 & 2021	2016-2019 & 2021	2016-2019 & 2021
Adults living in households tested for radon	32.30%	18.70%	34.90%
	2016-2019 & 2021	2016-2019 & 2021	2016-2019 & 2021



MAINE SHARED CHNA DATA:  
[HTTPS://WWW.MAINE.GOV/DHHS/MECDC/PHDATA/MAINECHNA/HEALTH-PROFILES.SHTML](https://www.maine.gov/dhhs/mecdc/phdata/mainechna/health-profiles.shtml)



# Communication

## NEWSLETTER

The Downeast Public Health District issues a monthly newsletter with various content from the Maine CDC, U.S. CDC, American Cancer Society and more. The newsletter include health topics consistent with the National Health Observances, Public Health News, Training Opportunities, Events and Public Health Advisories published by the Health Alert Network (HAN).



3,713 SUBSCRIBERS



3,456 DELIVERED



1,882 OPENS



2,204 CLICKS

## FACEBOOK

The Downeast Public Health Council manages a Facebook page where posts on current National Health Observances, News, Trainings and Events are published. The page focuses on delivering public health messages and engaging with community partners by liking published posts, reposting and sharing content.



556 FOLLOWERS



23.20% MEN



76.80% WOMEN



78 REACH



19 ENGAGEMENTS

## PASSMAQUODDY HEALTH FAIR AT SIPAYIK/PLEASANT POINT



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# Emergency Preparedness

## HEALTH CARE COALITION- DOWNEAST CHAPTER

The Downeast HCC function is to plan, coordinate, and provide or support health services during a public health emergency. It works collaboratively on emergency preparedness, mitigation, response, and recovery activities to assure optimal coverage and response under the guidance of the Statewide Steering Committee. The Downeast HCC has over 90 members from various health sectors with **Danielle Day** from MDI Hospital as the District Chair and Representative and **Alfred May**, Downeast DL as the Vice Chair.



## DOWNEAST MEDICAL RESERVE CORPS

The Downeast Maine MRC Unit #2644 is a volunteer-powered entity that brings together medical, public health, and community members that possess essential allied health skills where all members have a willingness to serve in strengthening public health, improving emergency response capabilities, and building community resiliency through trainings, exercises and operational deployments. **Barbara MacPike** is our unit coordinator.



## POINT LEPREAU: RADIOLOGICAL IMPACTS

Point Lepreau Nuclear Generating Station is a nuclear power station located in New Brunswick, Canada about thirty miles northeast of the US border town of Lubec, Maine. It is the only nuclear generating facility located in Atlantic Canada and the only operating station outside of Ontario. The facility consists of a single CANDU type nuclear reactor, having a net capacity of 660 MW. Eastern Washington County is located in one of the impact zones surrounding the site and could also be a potential evacuation route during or after a radiation leak or accident.



## DISTRICT TRAININGS

During 2024, our district used Point Lepreau as a focus for a series of trainings on health impacts of radiation exposures and responding to a radiation event as well as a course on medical countermeasures in planning a point of dispensing (POD) site and a tabletop exercise on a radiation release from Point Lepreau.



# Local Health Officers

## MAINE'S LOCAL HEALTH OFFICER

Maine's Local Health Officers (or "LHOs") have a long and proud tradition of serving Maine's local communities, with a role established in 1885 by Maine Statute. LHOs are appointed by their municipality and serve locally and have an important role in the coordination between state and local public health.

## LHO ROLE

The LHO's role and duties are outlined in Title 22 M.R.S.A. §454-A. The LHO has four primary functions: Overall health resource to the community; Mediator-problem solver; Investigator-Enforcer; Reporter to municipal leadership (Select Board, Manager) on community's public health status; and Reporter to Maine CDC on any perceived local public health threats.

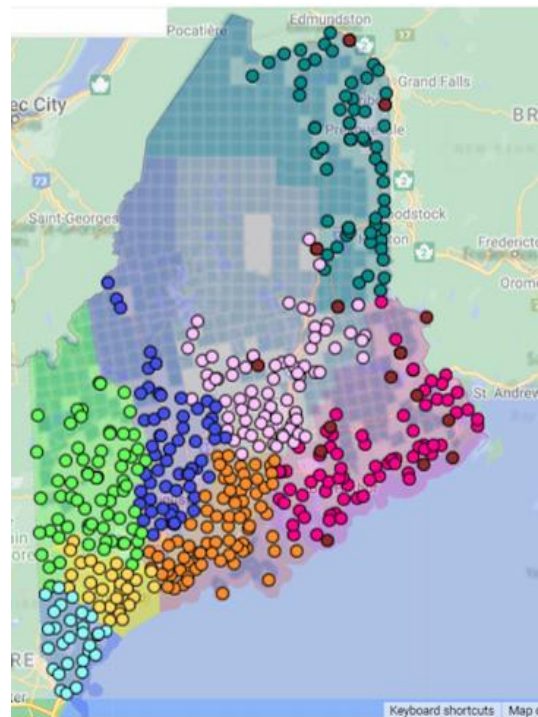
## DOWNEAST DISTRICT LHO

The Downeast Public Health District has 85 municipalities with 80 Local Health Officers. **Alfred May**, the Downeast Public Health District Liaison, is responsible for coordinating technical assistance and training of Local Health Officers.

**Heather Sneff** is our statewide LHO Coordinator, providing expertise in training and building information supports through our website.

## LHO TYPES OF COMPLAINTS

- Drinking Water: well water contamination and community water system breakdowns.
- Dangerous Buildings.
- Excess filth/garbage on properties.
- Rodent/Animal home invasion.
- Unlawful dumping.
- Indoor Living Moisture/Mold Issues.
- Landlord - Tenant Issues.
- Dead animals.
- Malfunctioning septic systems.



LHOs map



# Maine Prevention Network

## INTRODUCTION

Maine Prevention Network is a collaboration between the Maine CDC Tobacco and Substance Use Prevention and Control Programs, Maine CDC Chronic Disease Programs (Obesity Prevention), and Public Health Districts.

Community partners work in schools and communities to implement evidence-based preventative programs for Substance Use, Tobacco, Healthy Eating and Active Living (HEAL), and Youth Engagement and Empowerment.

**Healthy Acadia** was selected to provide Maine Prevention Network programming, effective January 2023, across the Downeast District.

## FOCUS AREAS



## PROGRAM ACTIVITIES

The **HEAL** activities aim to reduce obesity by promoting healthy eating choices, providing affordable access to healthy foods, supporting daily physical activity, and promoting breastfeeding best practices in schools and communities. It also focuses on enhancing the nutritional environment and standards of care in early childhood education sites.

The **Substance Use Prevention** activities aim to prevent high-risk substance use, including alcohol, cannabis, and prescription drugs, by implementing primary prevention strategies across the lifespan; strengthening collaboration among communities, nonprofit agencies, and governments through annual meetings and technical assistance; and addressing disparities in Maine's high-priority populations through leadership and life skills programs, and Restorative Schools TA to encourage alternatives to suspension.

**Tobacco Prevention** activities involve changing cultural norms, restricting youth access to tobacco products, strengthening tobacco-free policies in schools, and supporting legislative efforts to reduce tobacco appeal. Additional activities include preventing secondhand smoke exposure in households and public places, promoting tobacco treatment services through Maine QuitLink and My Life My Quit, and ensuring objectives are inclusive and tailored to populations with a disparate burden of tobacco use and exposure.



MORE ON MAINE PREVENTION NETWORK:  
[HTTPS://WWW.MAINE.GOV/DHHS/MECDC/PHDATA/MAINECHNA/HEALTH-PROFILES.SHTML](https://www.maine.gov/dhhs/mecdc/phdata/mainechna/health-profiles.shtml)



## CONTACT DETAILS

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Maine CDC

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District Public Health Educator  
Downeast Public Health District  
Hancock and Washington County  
Maine CDC

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