



2026 COMMUNITY ENGAGEMENT & BEHAVIORAL HEALTH SURVEY REPORT

West Mountain Region
San Miguel & Montrose Counties, Colorado

Sponsored by

TRI-COUNTY HEALTH NETWORK

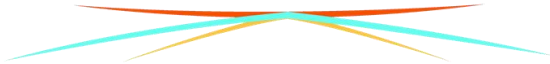


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INTRODUCTION

PROJECT OVERVIEW

Project Goals

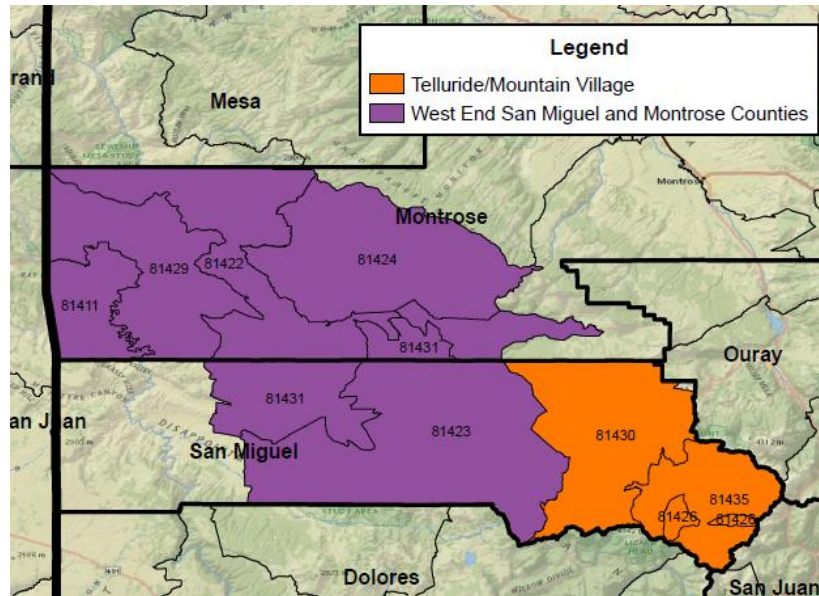
The 2026 PRC Community Engagement & Behavioral Health Survey — a follow-up to a similar study in 2024 — is a data-driven approach to measuring community engagement and behavioral health needs in the West Mountain Region of Colorado. Subsequently, this information may be used to inform decisions and guide efforts to improve community health and wellness.

This assessment was conducted on behalf of Tri-County Health Network by PRC, Inc. PRC is a nationally recognized healthcare consulting firm with extensive experience conducting community health and quality-of-life research in hundreds of communities across the United States since 1994.

Methodology

Community Definition

The targeted population for this survey effort was comprised of the ZIP Code–defined areas in and around the West Mountain Region in Colorado, including the subareas of Telluride/Mountain Village and western San Miguel and Montrose counties (known for purposes of this study as “West End”). The geographical definition of this community is outlined in the following map.



West Mountain Region, Colorado

Survey Instrument

The survey used for this effort was developed by the Katz Amsterdam Foundation to focus on actionable questions that might best measure community engagement and behavioral health needs. PRC further worked with Katz Amsterdam Foundation to establish final question formats and question flow for 39 core survey questions.

The final survey instrument used here consisted of the core questions plus 5 custom questions developed for the Tri-County Health Network and is very similar to the survey administered in 2024, allowing for data trending for most indicators.



Sample Approach & Design

To ensure the best representation of the population surveyed, a mixed-mode methodology was implemented. This included targeted surveys conducted by PRC by phone or through online questionnaires, as well as a community outreach component promoted by the study sponsors through a variety of communications, including QR codes and social media postings.

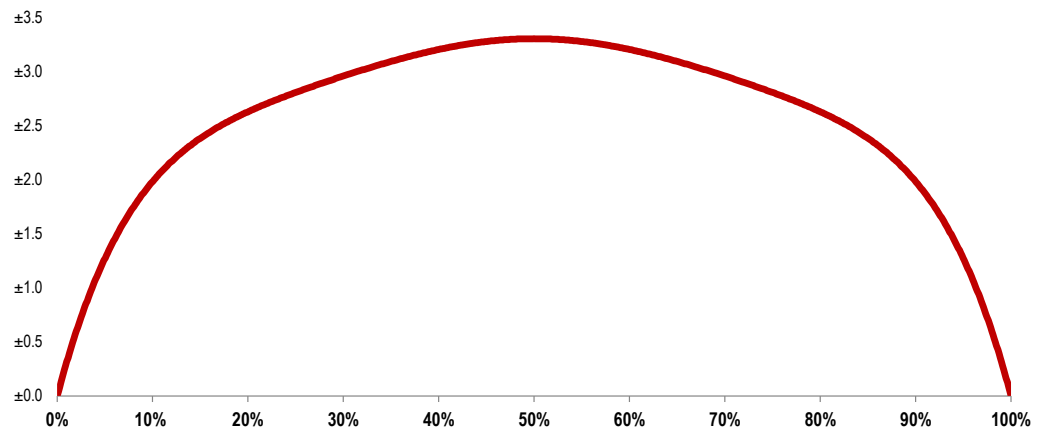
The final sample for this effort included **892 total surveys** among individuals age 18 and older in the West Mountain Region.

PRC SAMPLING ► PRC conducted 200 surveys over the phone or online among a random selection of households across the West Mountain Region.

COMMUNITY OUTREACH SURVEYS (Tri-County Health Network) ► In addition, PRC hosted an online version of the survey, and Tri-County Health Network used a variety of communication tools to drive residents to take the survey. Examples include press releases, social media advertising, posting on organizational websites, and email campaigns to community members and community partners. In all, a total of 692 surveys was achieved through these methods.

For statistical purposes, the maximum rate of error associated with a sample size of 892 respondents is $\pm 3.3\%$ at the 95 percent confidence level.

Expected Error Ranges for a Sample of 892 Respondents at the 95 Percent Level of Confidence



Note: • The "response rate" (the percentage of a population giving a particular response) determines the error rate associated with that response. A "95 percent level of confidence" indicates that responses would fall within the expected error range on 95 out of 100 trials.

Examples: • If 10% of the sample of 892 respondents answered a certain question with a "yes," it can be asserted that between 8.0% and 12.0% ($10\% \pm 2.0\%$) of the total population would offer this response.
• If 50% of respondents said "yes," one could be certain with a 95 percent level of confidence that between 46.7% and 53.3% ($50\% \pm 3.3\%$) of the total population would respond "yes" if asked this question.

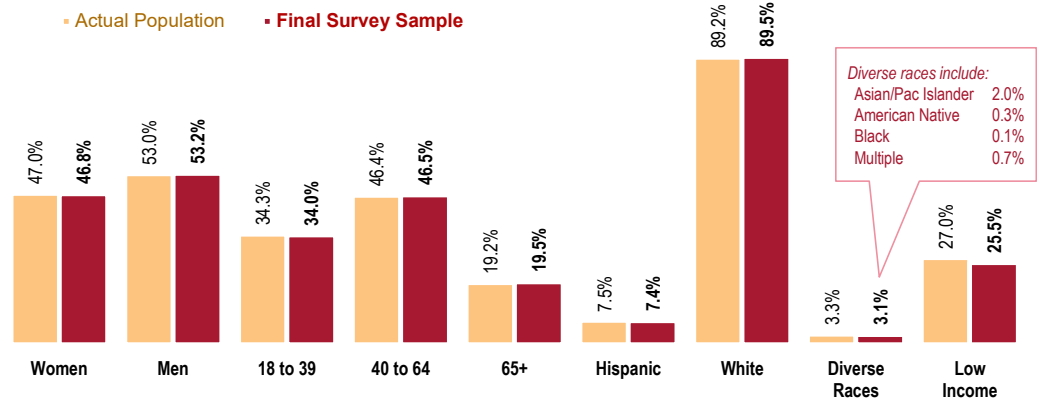
Sample Characteristics

Once all interviews were completed, these were combined and weighted to best reflect the community as a whole. To accurately represent the population studied, it is a common and preferred practice to "weight" the raw data to improve the representativeness of the sample. This is accomplished by adjusting the results of a random sample to match the geographic distribution and demographic characteristics of the population surveyed (poststratification), so as to eliminate any naturally occurring bias. Specifically, once the raw data are gathered, respondents are examined by key demographic characteristics (namely gender, age, race, ethnicity, and poverty status), and a statistical application package applies weighting variables that produce a sample which more closely matches the population for these characteristics. Thus, while the integrity of each individual's responses is maintained, one respondent's responses may contribute to the whole the same weight as, for example, 1.1 respondents. Another respondent, whose demographic characteristics may have been slightly oversampled, may contribute the same weight as 0.9 respondents.



The following charts outline the characteristics of samples for key demographic variables, compared to actual population characteristics revealed in census data. [Note that the sample consisted solely of area residents age 18 and older; children were not surveyed in this effort and are therefore not represented demographically in these charts.]

Population & Survey Sample Characteristics (West Mountain Region, 2026)



Sources: • US Census Bureau, 2016-2020 American Community Survey.
 • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc.
 Notes: • "Low Income" reflects those living under 200% of the federal poverty level, based on guidelines established by the US Department of Health & Human Services.
 • All Hispanic respondents are grouped, regardless of identity with any other race group. Race reflects those who identify with a single race category, without Hispanic origin. "Diverse Races" includes those who identify as Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian/Pacific Islander, or as being of multiple races, without Hispanic origin.

Additional sample information is provided in the **Community Sample Characteristics** section at the end of this report.

The sample design and the quality control procedures used in the data collection ensure that the sample is representative. Thus, the findings may be generalized to the total population of community members in the defined area with a high degree of confidence.

Benchmark Data

State-Level Comparisons

Statewide risk factor data are provided for select indicators where available through the *2024 BRFSS (Behavioral Risk Factor Surveillance System) Prevalence and Trends Data* published online by the Centers for Disease Control and Prevention.

National Comparisons

Comparisons to national data are provided where available through the *2026 PRC National Health Survey (PRC)*.

Determining Significance

Differences noted in this report represent those determined to be statistically significant. For these survey-derived indicators (which are subject to sampling error), statistical significance is determined based on confidence intervals (at the 95 percent confidence level), using question-specific samples and response rates.



SUMMARY OF FINDINGS

Key Findings

COMMUNITY LIFE

- Residents of the West Mountain Region appear to be **very highly engaged** in their communities:
 - Just over three-fourths of residents feel that they trust people in their community. However, this prevalence has decreased for the overall West Mountain Region since 2024.
 - About 70% feel that they invest time and effort into the community.
 - And 60% feel that their community is part of their identity.

Residents in the Telluride/Mountain Village area tend to be more engaged by these measures.

- Residents' perception that their community is a **“fair/poor” place in which to live** has increased (worsened) since 2024.
- A total of 22.2% of West Mountain Region residents worry about having a **stable place to live** for the next six months, a significant increase from 2024 findings. The prevalence is much higher in the Telluride/Mountain Village community.
- Nearly one in four adults in the region (24.2%) report **running out of food** in the past year (worsening since 2024). Adults in the West End are much more likely to report this issue.

SOCIAL SUPPORT

- 38.3% of adults are **lonely**, meaning that there are times when they lack companionship, feel left out, and/or feel isolated from others. The percentage is much higher than the national figure and is reported more often in the West End.

MENTAL HEALTH

- Two in three residents (66.4%) believe that their **communities are sympathetic** to those with mental health concerns, but fewer (50.7%) feel that **it is easy for residents to discuss** issues related to mental health. Residents of the West End are less likely to give a positive response for both issues.
- Residents of the West Mountain Region report a **high number of poor mental health days** in the past month (with 54.8% reporting three or more days per month on which their mental health was not good). The West Mountain Region percentage has increased significantly from 2024 survey findings. Current prevalence tends to be higher in women, younger adults, low-income residents, and those who identify as LGBTQ+.
- Most residents (78.6%) are **aware of local mental health resources** and most (82.1%) say that they would be **likely to seek mental health services locally** if needed. Likelihood of using such services is higher among residents of Telluride/Mountain Village.
- Among the nearly 40% of residents who have needed mental health services in the past year, nearly one in three reports being **unable to get needed services**; this was primarily due to cost/insurance issues, lack of providers, not knowing where to seek help, confidentiality concerns, and lack of time.
- Likelihood of using **teletherapy** for behavioral health has decreased significantly since 2024.



SUBSTANCE USE

- **Alcohol is strongly associated with social life** in the West Mountain Region — three-fourths of residents (75.1%) “strongly” or “somewhat agree” that alcohol is important to most peoples’ social lives in their locale, although this perception has decreased significantly since 2024.
- While it has decreased significantly, a **very high percentage of residents (33.4%) reports “excessive drinking”** — this means that they have had episodes of binge drinking in the past month and/or they average a high number of drinks per day over the past 30 days. Excessive drinking is twice as prevalent among respondents in Telluride/Mountain Village as among respondents in the West End.
- The **impact of substance use in peoples’ lives is widespread** — nearly three-fourths (West Mountain Region 74.4% vs. US 46.8%) say that their own life has been directly affected by someone’s substance use issue (their own or that of someone close to them).

Summary Tables: Comparisons With Benchmark Data
























The following tables provide an overview of indicators in the West Mountain Region. These data are grouped by topic.

Reading the Summary Tables

- In the following tables, West Mountain Region results are shown in the larger, gray column.
- The columns to the left of the regional column provide comparisons between the two subareas, identifying differences for each as “better than” (☀️), “worse than” (🌧️), or “similar to” (☁️) the opposing area.
- ■ The columns to the right of the West Mountain Region column provide trending (against baseline findings), as well as comparisons between community data and any available state and national findings. Again, symbols indicate whether the region compares favorably (☀️), unfavorably (🌧️), or comparably (☁️) to these external data.

Note that blank table cells signify that data are not available for that area and/or for that indicator.



























COMMUNITY LIFE & SOCIAL SUPPORT	DISPARITY BETWEEN SUBAREAS		West Mountain Region	vs. BENCHMARKS		
	Telluride/ Mountain Village	West End		vs. CO	vs. US	TREND
% Community Is a "Fair/Poor" Place to Live	 9.7	 15.2	11.8			 7.7
% Trust People in Community	 80.1	 71.9	77.0			 82.6
% Invest Time/Effort Into Community	 74.9	 61.2	69.8			 72.2
% Being a Community Member Is Part of Identity	 64.7	 52.9	60.2			 63.5
% Worry About Having a Stable Place to Live for the Next Six Months	 25.3	 17.1	22.2			 17.4
% "Often/Sometimes" Ran Out of Food in the Past Year	 20.8	 29.8	24.2		 26.3	 18.4
% Lonely	 34.9	 43.9	38.3		 29.0	 41.2

Note: In the section above, each subarea is compared against the other area. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.


better


similar


worse


























MENTAL HEALTH	DISPARITY BETWEEN SUBAREAS		West Mountain Region	vs. BENCHMARKS		
	Telluride/ Mountain Village	West End		vs. CO	vs. US	TREND
% People Are Sympathetic to Those With Mental Health Concerns (Strongly/Somewhat Agree)	 71.1	 58.8	66.4			 68.0
% Easy for Residents to Discuss Mental Health (Strongly/Somewhat Agree)	 59.0	 37.2	50.7			 49.8
% 3+ Days of Poor Mental Health in the Past Month	 55.4	 54.1	54.8			 48.4
% Needed Mental Health Services in Past Year	 41.2	 36.1	39.2			 39.9
% [Those Needing Services] Unable to Get Mental Health Services in Past Year	 28.0	 38.0	31.5			 32.2
% Aware of Local Mental Health Resources	 79.4	 77.2	78.6			 78.9
% "Very/Somewhat" Likely to Seek Mental Health Services Locally if Needed	 85.1	 77.1	82.1			 85.3
% "Very/Somewhat" Likely to Use Teletherapy for Behavioral Health	 80.1	 73.9	77.8			 82.5

Note: In the section above, each subarea is compared against the other area. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.


better







similar


worse

SUBSTANCE USE	DISPARITY BETWEEN SUBAREAS		West Mountain Region	vs. BENCHMARKS		
	Telluride/ Mountain Village	West End		vs. CO	vs. US	TREND
% Alcohol Is Important to Most People's Social Life (Strongly/Somewhat Agree)	 84.0	 60.5	75.1			 80.8
% Current Drinking	 77.9	 53.8	68.8		 55.5	 74.3
% Heavy Drinking	 22.6	 9.3	17.6		 11.6	 22.1
% Binge Drinking	 36.2	 19.1	29.7	 17.6	 22.8	 34.6
% Excessive Drinking	 41.8	 19.7	33.4	 19.5	 25.1	 39.2
% Personally Impacted by Substance Use	 76.5	 70.9	74.4		 46.8	 76.0

Note: In the section above, each subarea is compared against the other area. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

 better  similar  worse

ACCESS TO HEALTH CARE	DISPARITY BETWEEN SUBAREAS		West Mountain Region	vs. BENCHMARKS		
	Telluride/ Mountain Village	West End		vs. CO	vs. US	TREND
% [Age 18-64] Lack Health Insurance	 16.0	 13.2	15.0	 13.0	 8.5	 10.5

Note: In the section above, each subarea is compared against the other area. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

 better  similar  worse



COMMUNITY LIFE

COMMUNITY AS A PLACE TO LIVE

In the initial inquiry, respondents were asked the following question (for the purposes of this study, they were asked to consider their "community" to be their own neighborhood):

"Overall, how would you rate your community as a place to live? Would you say: excellent, very good, good, fair, or poor?"

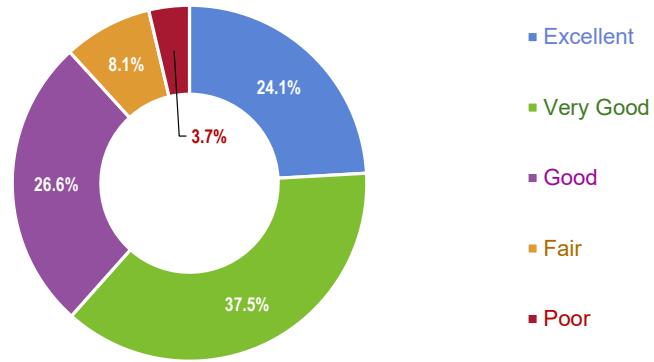
By and large, most residents in the West Mountain Region rate their community as an "excellent" or "very good" place to live.

However, 11.8% of area residents gave "fair/poor" ratings of their community as a place to live.

TREND ▶ Increasing significantly from 2024 findings.

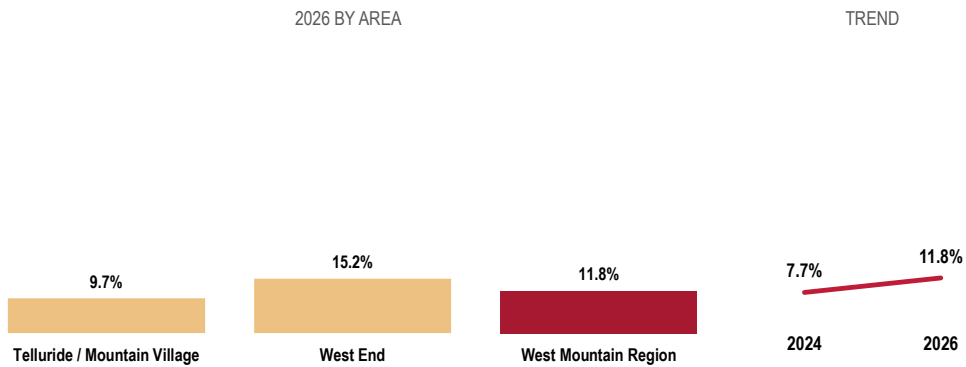
DISPARITY ▶ "Fair/poor" responses are higher among respondents in the West End. This is also reported more often among adults in low-income households and those who identify as LGBTQ+.

Rating of the Community as a Place to Live
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 4]
Notes: • Asked of all respondents.

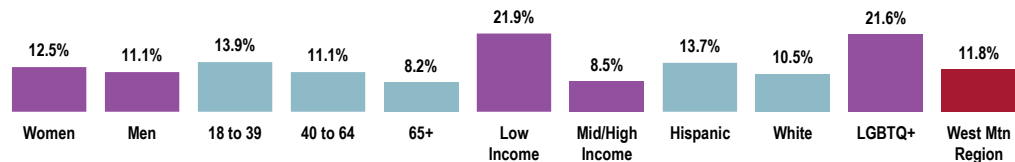
Perceive the Community as a "Fair" or "Poor" Place to Live
(West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 4]
Notes: • Asked of all respondents.



Perceive the Community as a “Fair” or “Poor” Place to Live (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 4]
Notes: • Asked of all respondents.

INCOME & RACE/ETHNICITY

INCOME ► Poverty descriptions and segmentation used in this report are based on administrative poverty thresholds determined by the US Department of Health & Human Services. These guidelines define poverty status by household income level and number of persons in the household (e.g., the 2025 guidelines place the poverty threshold for a family of four at \$32,150 annual household income or lower). In sample segmentation: “low income” refers to community members living in a household with defined poverty status or living just above the poverty level, earning up to twice (<200% of) the poverty threshold; “mid/high income” refers to those households living on incomes which are twice or more (≥200% of) the federal poverty level.

RACE & ETHNICITY ► In analyzing survey results, mutually exclusive race and ethnicity categories are used. All Hispanic respondents are grouped, regardless of identity with any other race group. Data are also detailed for individuals identifying with a race category, without Hispanic origin — while the survey data are representative of the full racial and ethnic makeup of the population, samples were not of sufficient size for independent analyses by all race groups.



COMMUNITY ENGAGEMENT

Trust

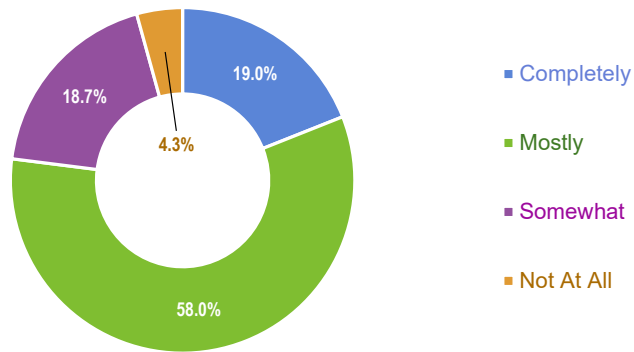
Community engagement was measured in the PRC Community Engagement & Behavioral Health Survey by asking respondents to report the degree of their sense of attachment to and identification with their local community.

A total of 77.0% of residents in the community (“completely” or “mostly”) feel that “I can trust people in this community.”

TREND ▶ Decreasing significantly since 2024.

DISPARITY ▶ More favorable among respondents in Telluride/Mountain Village.

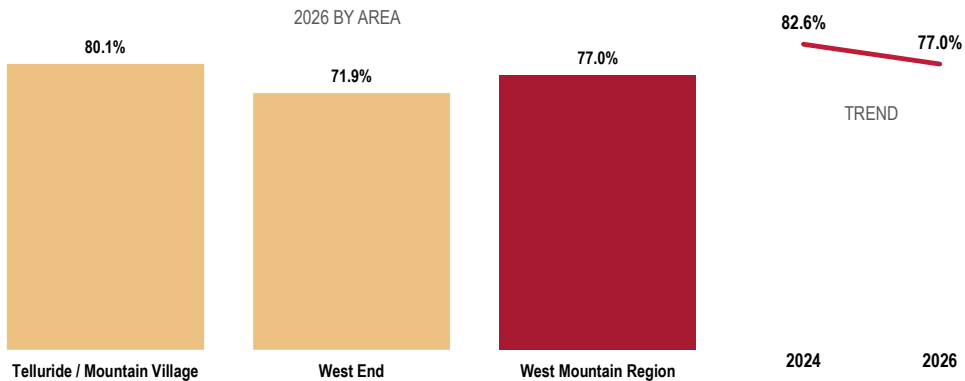
Feel That “I Can Trust People in This Community”
(West Mountain Region, 2026)



NOTE: In this report, text describes significant differences determined through statistical testing. The reader can assume that differences (against or among local findings) that are not mentioned are ones that are not statistically significant.

Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 5]
Notes: • Asked of all respondents.

Completely/Mostly Feel That “I Can Trust People in This Community”
(West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 5]
Notes: • Asked of all respondents.

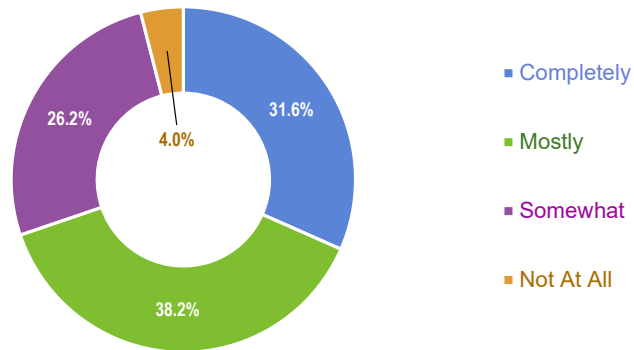


Time & Effort

69.8% of West Mountain Region residents (“completely” or “mostly”) feel that “I put a lot of time and effort into being part of this community.”

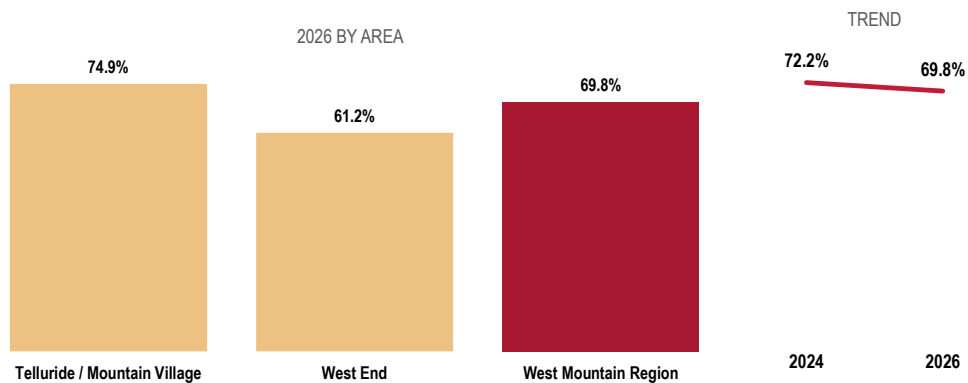
DISPARITY ► More favorable in Telluride/Mountain Village and reported more often among adults age 40 to 64.

Feel That “I Put a Lot of Time and Effort Into Being Part of This Community” (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 6]
 Notes: • Asked of all respondents.

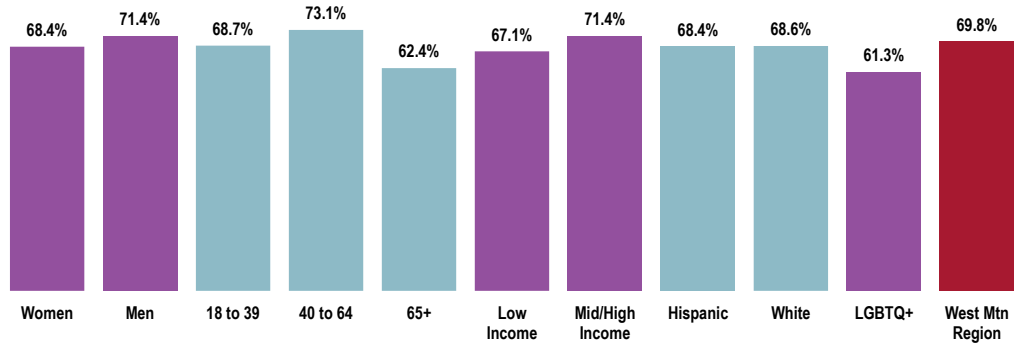
Completely/Mostly Feel That “I Put a Lot of Time and Effort Into Being Part of This Community” (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 6]
 Notes: • Asked of all respondents.



Completely/Mostly Feel That “I Put a Lot of Time and Effort Into Being Part of This Community” (West Mountain Region, 2026)



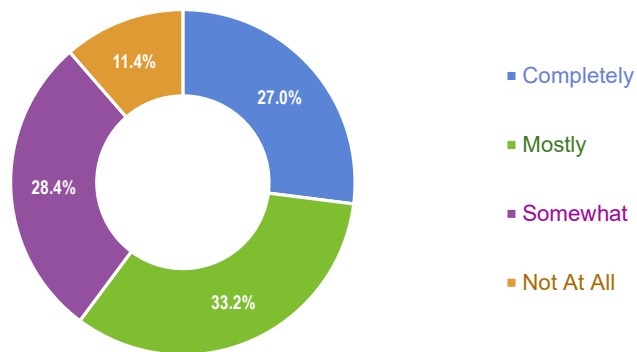
Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 6]
Notes: • Asked of all respondents.

Identity

60.2% of residents in the West Mountain Region (“completely” or “mostly”) feel that “being a member of this community is part of my identity.”

DISPARITY ► Higher in the Telluride/Mountain Village community and reported more often among men, older residents (age 65+), and those in the higher income breakout.

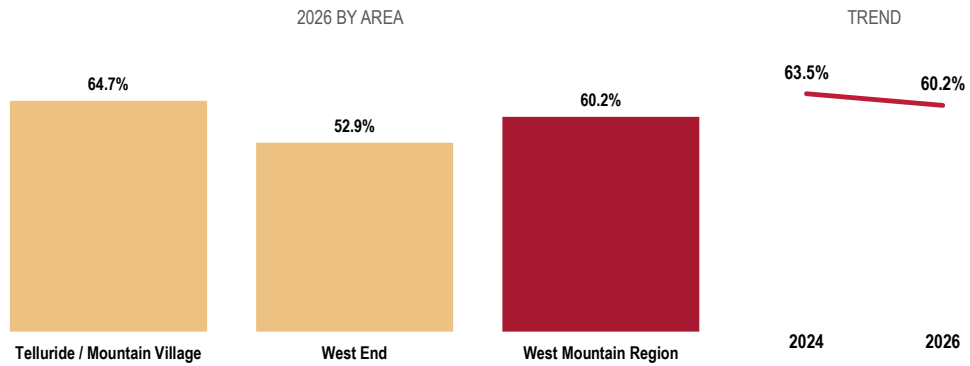
Feel That “Being a Member of This Community Is Part of My Identity” (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 7]
Notes: • Asked of all respondents.

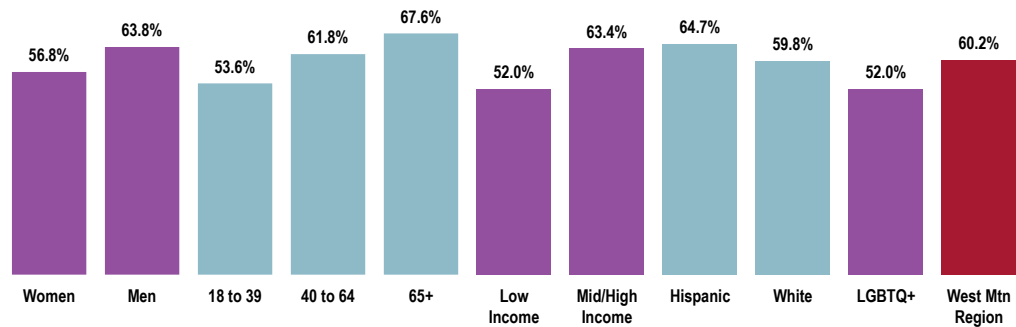


Completely/Mostly Feel That “Being a Member of This Community Is Part of My Identity” (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 7]
Notes: • Asked of all respondents.

Completely/Mostly Feel That “Being a Member of This Community Is Part of My Identity” (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 7]
Notes: • Asked of all respondents.

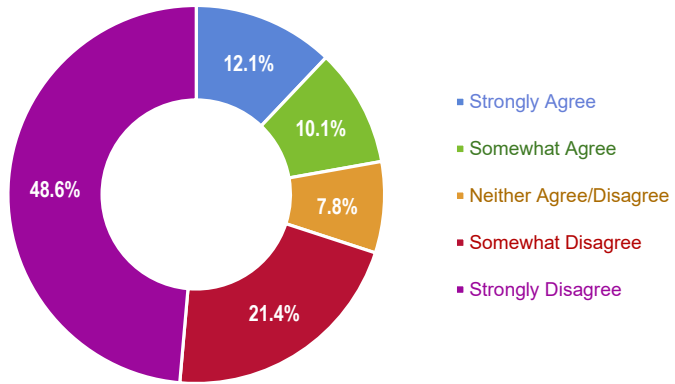


HOUSING INSTABILITY

“What is your level of agreement or disagreement with the following statement: ‘I worry about having a steady or consistent place to live over the next six months.’ Do you: strongly agree, agree, neither agree nor disagree, disagree, or strongly disagree?”

In all, 22.2% of area residents report that they worry about having a stable place to live over the next six months.

“I Worry About Having a Steady or Consistent Place to Live for the Next Six Months”
(West Mountain Region, 2026)

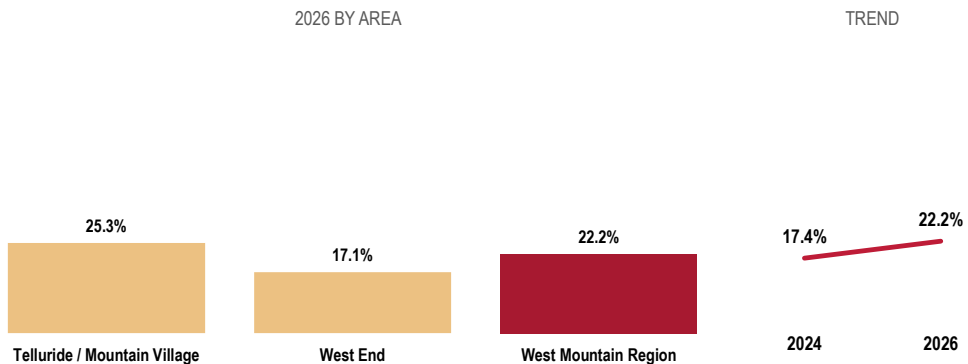


Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 303]
Notes: • Asked of all respondents.

TREND ► The prevalence has increased significantly since 2024.

DISPARITY ► Higher in Telluride/Mountain Village and reported more often among young adults, low-income residents, Hispanic residents, and those who identify as LGBTQ+.

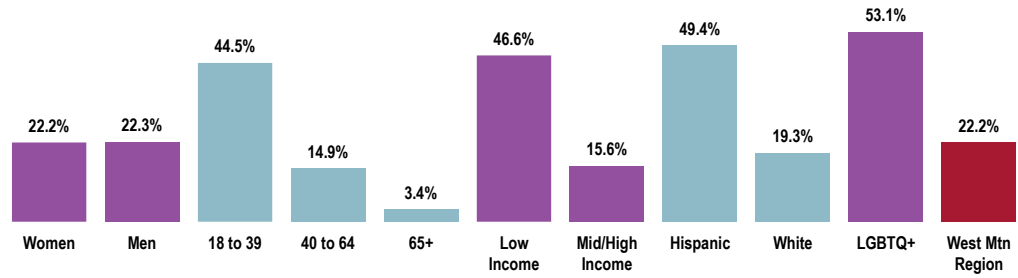
Strongly/Somewhat Agree: “I Worry About Having a Steady or Consistent Place to Live for the Next Six Months”
(West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 303]
Notes: • Asked of all respondents.



Strongly/Somewhat Agree: “I Worry About Having a Steady or Consistent Place to Live for the Next Six Months” (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 303]
Notes: • Asked of all respondents.

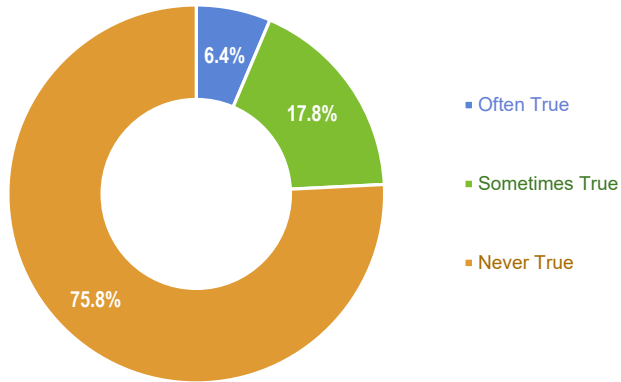


FOOD INSECURITY

“Please tell me whether this statement was ‘often true,’ ‘sometimes true,’ or ‘never true’ for you in the past 12 months. The statement is: The food that we bought just did not last, and we did not have money to get more.”

A total of 24.2% of regional respondents report that they “often” or “sometimes” ran out of food in the past year, without resources to buy more.

“The Food That We Bought Just Did Not Last, and We Did Not Have Money To Get More”
(West Mountain Region, 2026)



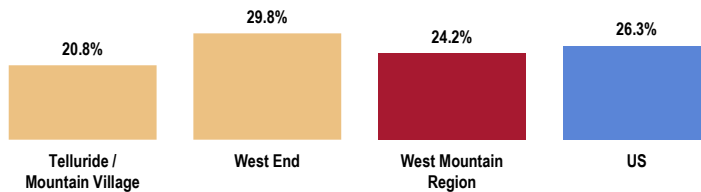
Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 304]
Notes: • Asked of all respondents.

TREND ► The prevalence has increased significantly since 2024.

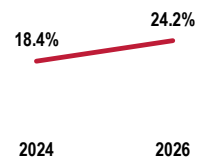
DISPARITY ► Higher among West End respondents and reported more often among women, young adults, low-income residents, Hispanic residents, and those who identify as LGBTQ+.

Often/Sometimes: “The Food That We Bought Just Did Not Last, and We Did Not Have Money To Get More”
(West Mountain Region)

2026 BY AREA



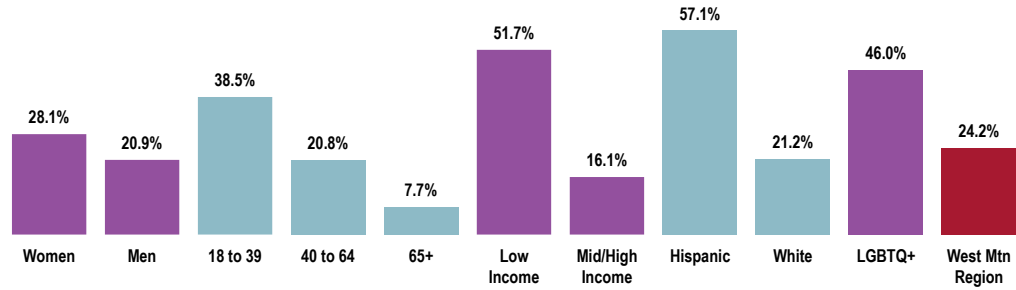
TREND



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 304]
• 2026 PRC National Health Survey, PRC, Inc.
Notes: • Asked of all respondents.



Often/Sometimes: “The Food That We Bought Just Did Not Last,
and We Did Not Have Money To Get More”
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 303]
Notes: • Asked of all respondents.



SOCIAL CONNECTIONS & LONELINESS

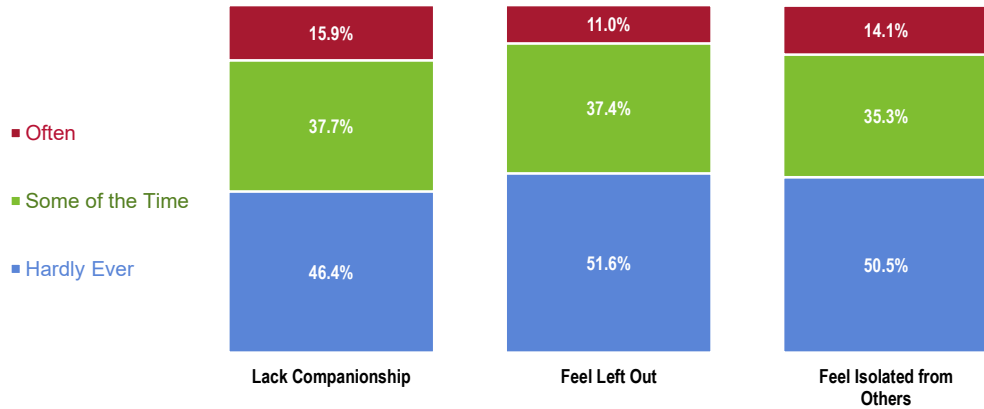
Adults taking part in the survey answered three questions as part of the loneliness index, asking how often (“often,” “some of the time,” or “hardly ever”) they feel:

- left out;
- isolated from others; or
- that they lack companionship.

The following charts outline the findings for these questions of those who fit the criteria of being “lonely” (here, “lonely” is defined as respondents who score 6-9 points in the series of three questions from the loneliness index. Points were awarded based on “hardly ever” (1), “some of the time” (2), or “often” (3) responses).

The following chart outlines responses to three questions used to define “loneliness” among residents in the West Mountain Region.

Loneliness Factors (West Mountain Region, 2026)



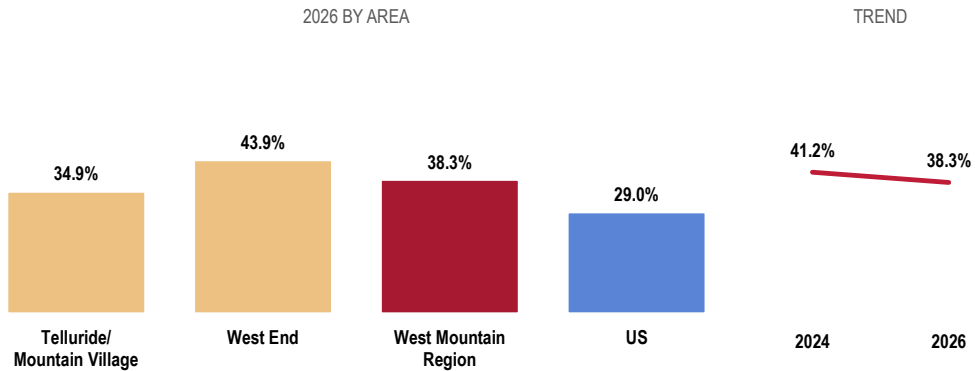
Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Items 8-10]
Notes: • Asked of all respondents.

Based on their responses to the three survey questions, 38.3% of residents in the West Mountain Region are found to be “lonely.”

BENCHMARK ► Well above the US prevalence.

DISPARITY ► Higher among West End residents and reported more often among women, young adults (under age 40), low-income residents, Hispanic residents, and those who identify as LGBTQ+.

Lonely (West Mountain Region)

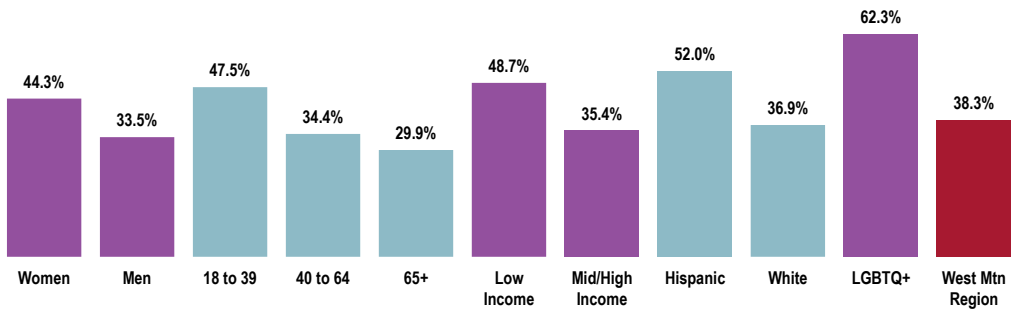


Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 42]
• 2026 PRC National Health Survey, PRC, Inc.
Notes: • Asked of all respondents.
• Here, “lonely” is defined as respondents who score 6-9 points in a series of three questions from the Loneliness Scale (regarding lacking companionship or feeling isolated or feeling left out). Points were awarded based on “hardly ever” (1), “some of the time” (2), or “often” (3) responses.



Lonely

(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 42]
 Notes: • Asked of all respondents.
 • Here, "lonely" is defined as respondents who score 6-9 points in a series of three questions from the Loneliness Scale (regarding lacking companionship or feeling isolated or feeling left out). Points were awarded based on "hardly ever" (1), "some of the time" (2), or "often" (3) responses.





MENTAL HEALTH

COMMUNITY ATTITUDES TOWARD MENTAL HEALTH

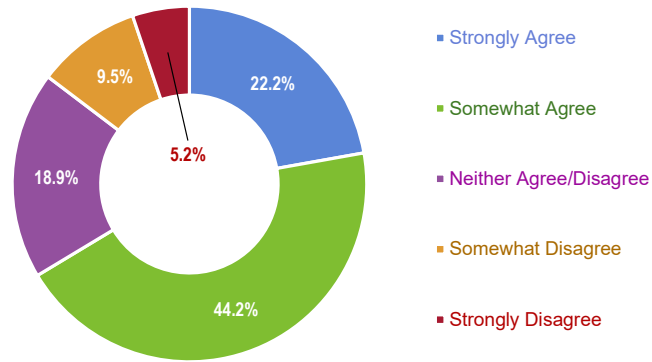
Caring & Sympathy Toward Those With Mental Health Issues

To gauge community attitudes toward mental health, respondents taking part in the survey were asked their level of agreement with the following statement:
 “People in this community are generally caring and sympathetic to people with mental health concerns.”

Two in three West Mountain Region residents (66.4%) agree that “people in this community are generally caring and sympathetic to people with mental health concerns.”

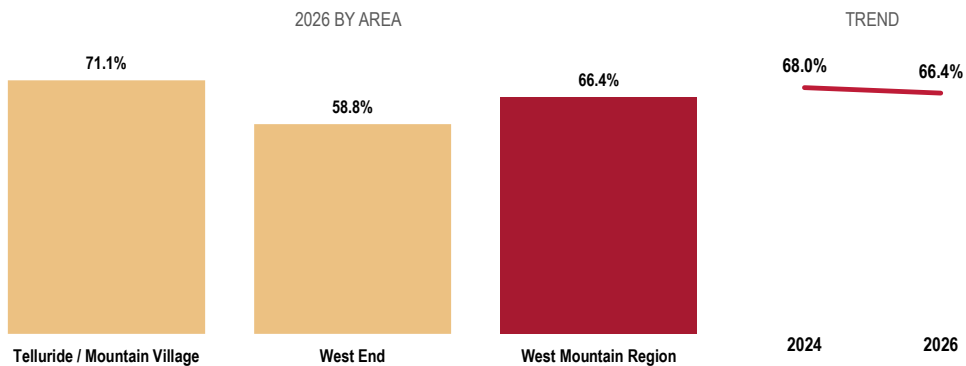
DISPARITY ► Higher in Telluride/Mountain Village (similar by demographic characteristics).

“People in This Community Are Generally Caring and Sympathetic to People With Mental Health Concerns”
 (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 11]
 Notes: • Asked of all respondents.

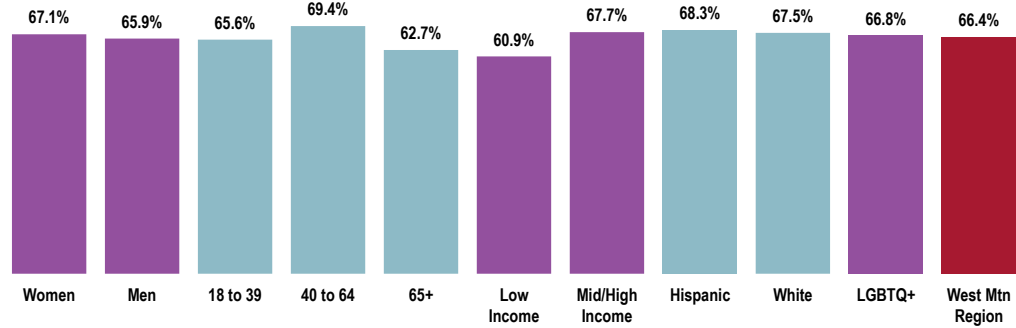
Strongly/Somewhat Agree: “People in This Community Are Generally Caring and Sympathetic to People With Mental Health Concerns”
 (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 11]
 Notes: • Asked of all respondents.



Strongly/Somewhat Agree: “People in This Community Are Generally Caring and Sympathetic to People With Mental Health Concerns” (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 11]
Notes: • Asked of all respondents.

Discussing Mental Health & Emotional Challenges

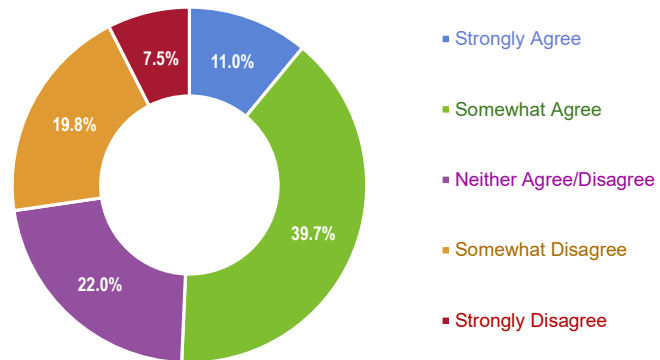
One-half of residents (50.7%) agrees that “it is easy for residents to talk about mental health or emotional challenges.”

DISPARITY ► Much higher in Telluride/Mountain Village. Notably high among Hispanic respondents.

Responding adults were further asked their level of agreement with the following statement:

“Generally, it is easy for people in this community to talk about mental health or emotional challenges.”

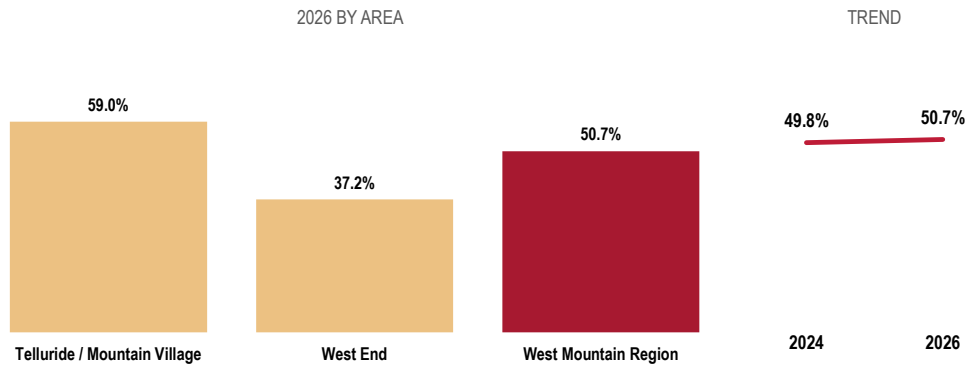
“It Is Easy for Residents to Talk About Mental Health or Emotional Challenges” (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 12]
Notes: • Asked of all respondents.

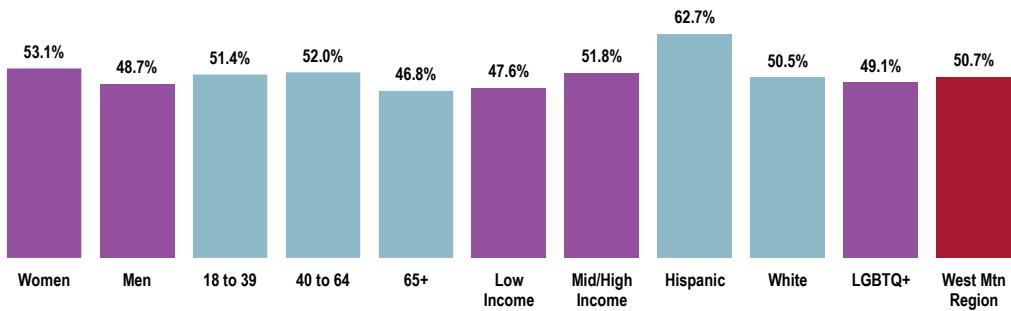


Strongly/Somewhat Agree: “It Is Easy for Residents to Talk About Mental Health or Emotional Challenges” (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 12]
Notes: • Asked of all respondents.

Strongly/Somewhat Agree: “It Is Easy for Residents to Talk About Mental Health or Emotional Challenges” (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 12]
Notes: • Asked of all respondents.



PERSONAL MENTAL HEALTH

Mental Health Status

“Still thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days would you say your mental health was NOT good?”

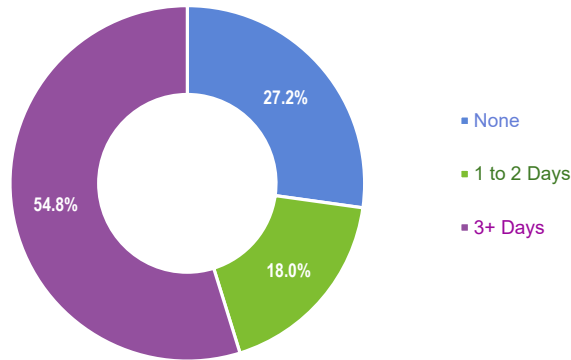
Thinking about their mental health, which includes stress, depression, and problems with emotion, 27.2% of surveyed residents reported no days of poor mental health in the past month.

However, 54.8% of West Mountain Region adults reported three or more days in the past 30 days when their mental health was not good.

TREND ▶ Marks a statistically significant increase since 2024.

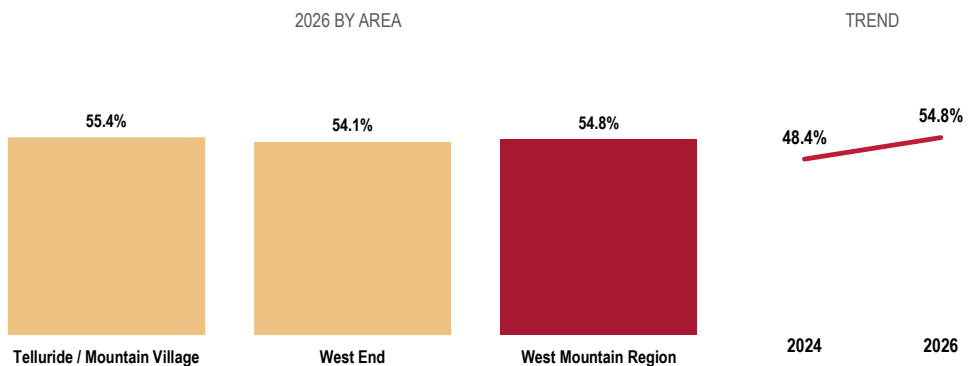
DISPARITY ▶ Reported much more often among women, young adults, those in low-income households, and LGBTQ+ residents.

Days of Poor Mental Health in the Past Month (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 18]
Notes: • Asked of all respondents.

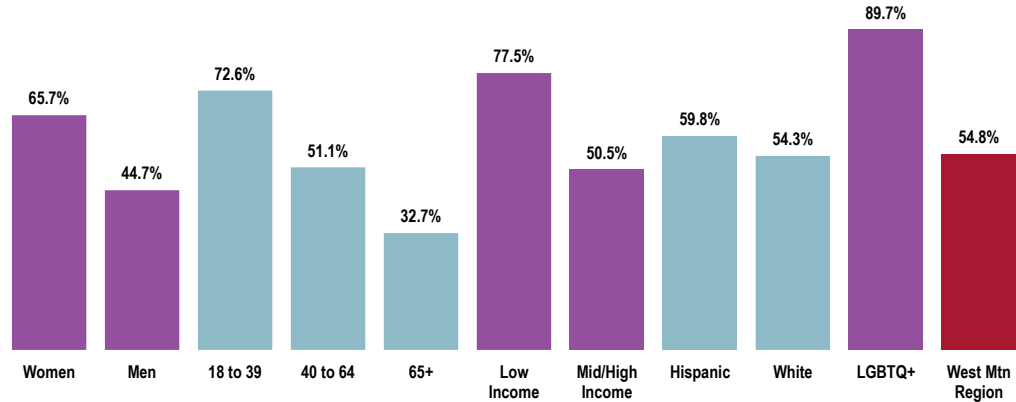
Three or More Days of Poor Mental Health in the Past Month (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 18]
Notes: • Asked of all respondents.



Three or More Days of Poor Mental Health in the Past Month (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 18]
Notes: • Asked of all respondents.

Need for Mental Health Services

39.2% of surveyed adults in the West Mountain Region say there was a time in the past year when they needed mental health services.

DISPARITY ▶ A need for mental health services was more often reported among women, young adults, low-income residents, and those who identify as LGBTQ+.

The leading types of services sought included treatment for anxiety/stress and depression, as well as mental health maintenance and various types of counseling/therapy.

Respondents were asked the following questions:

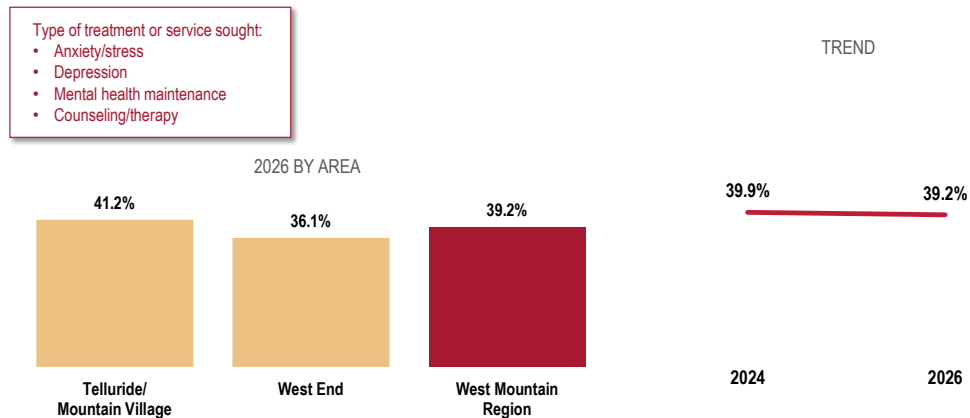
“During the past 12 months, was there any time when you needed mental health treatment or services for yourself?”

[IF YES] “Were you able to get the treatment or services that you needed?”

“What type of mental health treatment or services did you need most recently?”

[IF NO] “What would you say was the MAIN reason that you did NOT get these services?” (These respondents were given an opportunity to mention up to three reasons.)

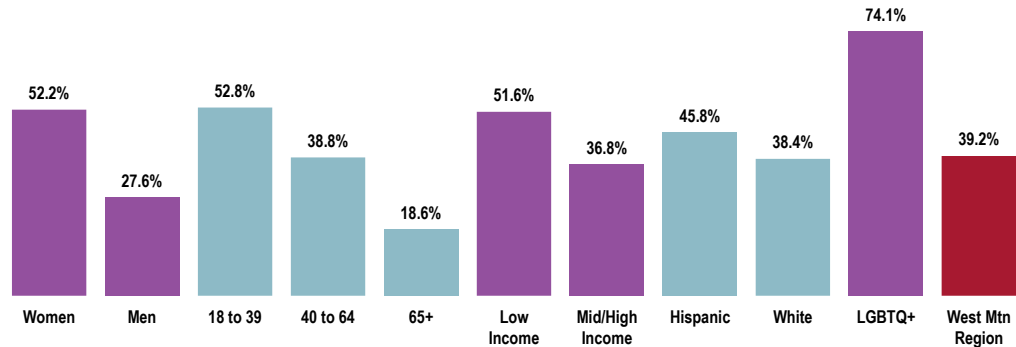
Have Needed Mental Health Services in the Past Year (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Items 13, 301]
Notes: • Asked of all respondents.



Needed Mental Health Services in the Past Year (West Mountain Region, 2026)

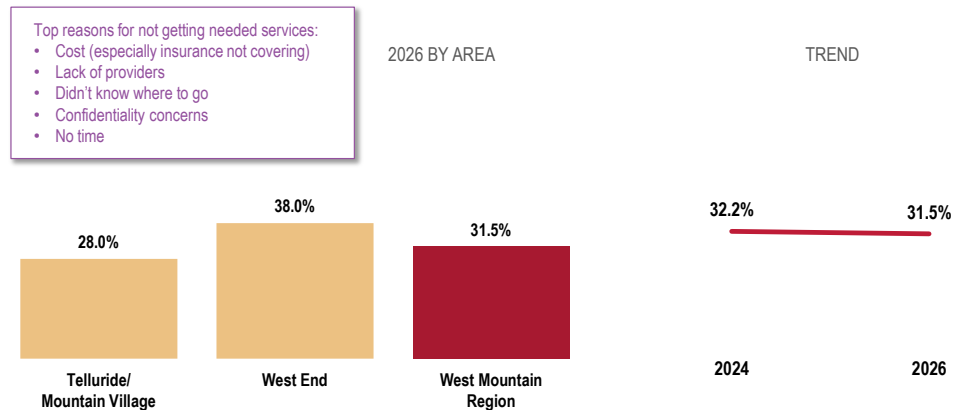


Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 13]
 Notes: • Asked of all respondents.

Among respondents needing mental health services in the past year, most were able to get the services they needed, while 31.5% were not.

Cost, lack of providers, not knowing where to go, confidentiality concerns, and lack of time were the main reasons given by those not getting the services they needed. (Cost-related reasons primarily related to insurance issues.)

NOT Able to Get the Services Needed (Among Those Needing Services; West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Items 14-17]
 Notes: • Asked of all respondents.

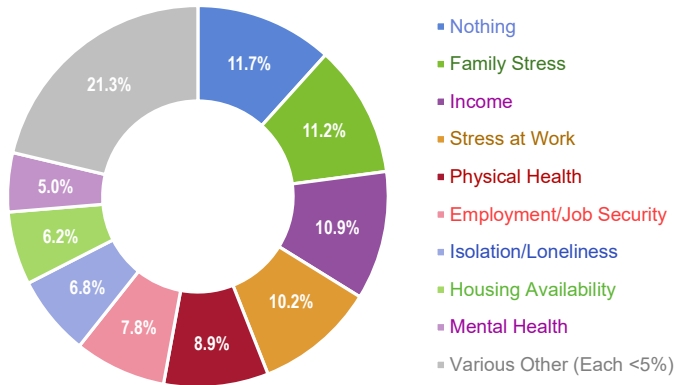


Greatest Challenge to Mental Well-Being

“In general, what do you feel creates the biggest challenge for your own mental well-being?”

When asked, 11.2% of survey respondents reported that the greatest challenge to their own mental well-being is **family stress**, followed by **income** (mentioned by 10.9%) and **stress at work** (10.2%).

Greatest Challenge to My Own Mental Well-Being
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 302]
Notes: • Asked of all respondents.



LOCAL RESOURCES FOR MENTAL HEALTH

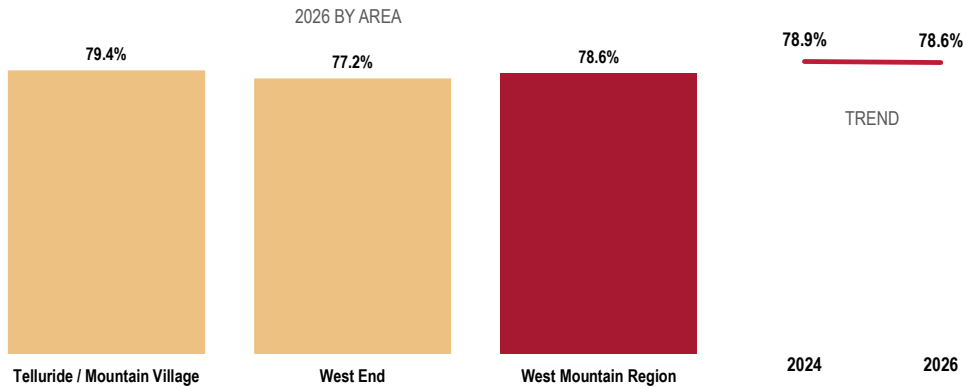
Awareness of Resources

“Are you aware of any providers, programs, or resources available in this community to help people with mental health concerns?”

Most adults in the West Mountain Region (78.6%) are aware of local providers, programs, or resources available to help people with mental health needs.

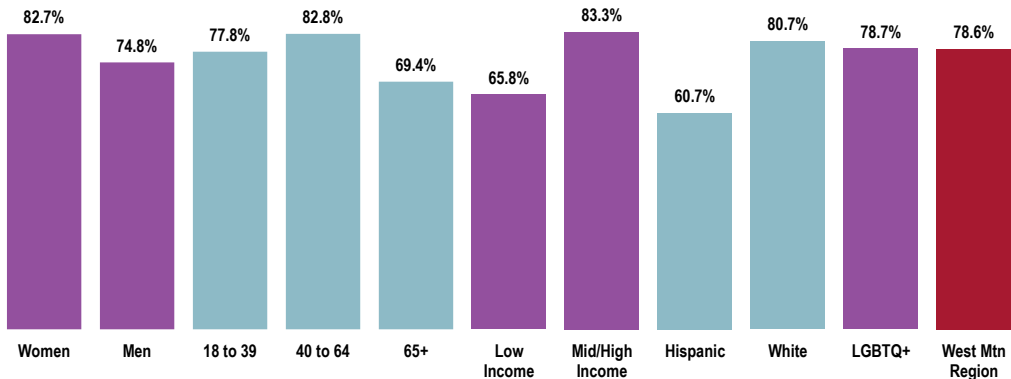
DISPARITY ▶ Reported more often among women, adults age 40 to 64, those in households with higher incomes, and White residents.

Aware of Local Resources for Mental Health (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 19]
Notes: • Asked of all respondents.

Aware of Local Resources for Mental Health (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 19]
Notes: • Asked of all respondents.



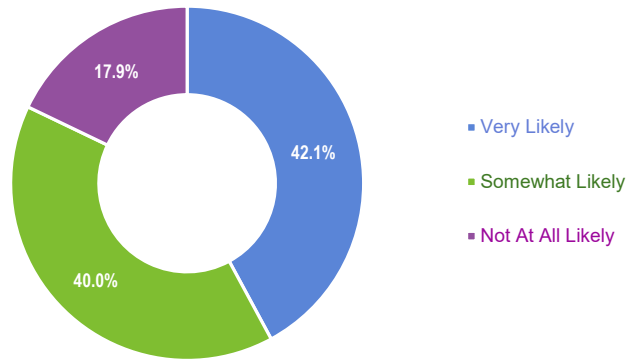
Likelihood of Using Local Resources

“If you needed mental health services in the future, how likely would you be to reach out to local providers, programs, or resources for help? Would you be: very likely, somewhat likely, or not at all likely?”

Most residents in the region (82.1%) say that, if they needed mental health services in the future, they would be “very” or “somewhat” likely to reach out to local providers, programs, or resources for help.

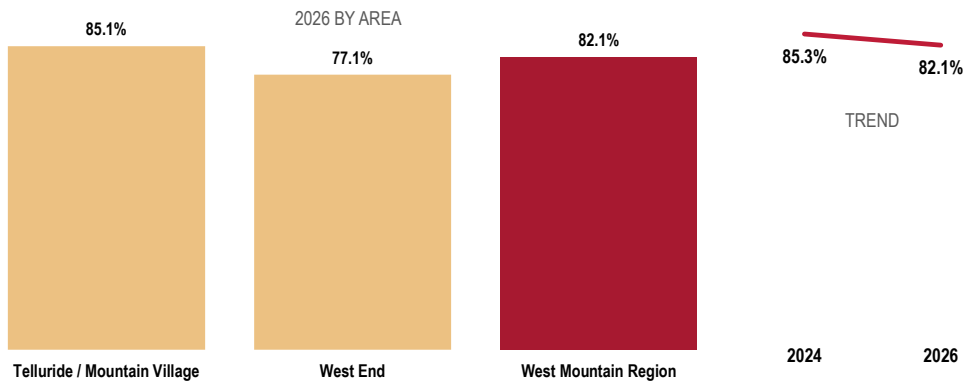
DISPARITY ▶ Higher in Telluride/Mountain Village. Reported more often among young respondents.

Likelihood of Seeking Mental Health Services Locally if Needed in the Future (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 20]
 Notes: • Asked of all respondents.

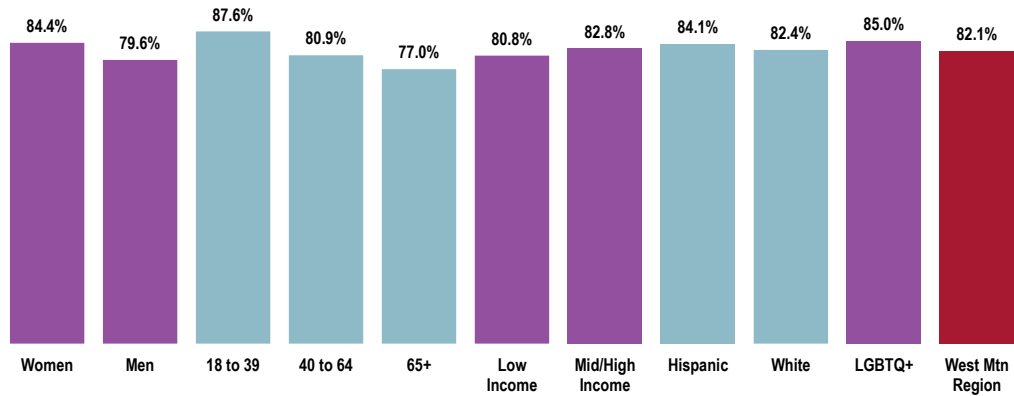
“Very/Somewhat” Likely to Seek Mental Health Services Locally if Needed in the Future (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 20]
 Notes: • Asked of all respondents.



“Very/Somewhat” Likely to Seek Mental Health Services Locally if Needed in the Future (West Mountain Region, 2026)



Sources: ● 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 20]
Notes: ● Asked of all respondents.

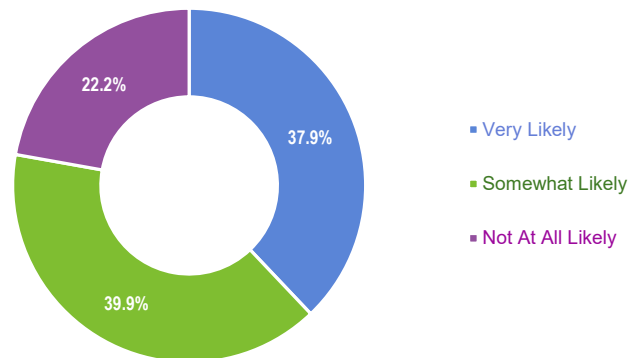
Likelihood of Using Teletherapy Services

77.8% of residents would be “very” or “somewhat” likely to use teletherapy visits for behavioral health support if needed and if these were available and affordable to them.

TREND ► The prevalence has decreased significantly since 2024.

DISPARITY ► Reported more often among women and adults under age 65.

Likelihood of Using Teletherapy for Mental Health or Substance Use Support if Needed and It Were Affordable (West Mountain Region, 2026)



Sources: ● 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 21]
Notes: ● Asked of all respondents.
● During a teletherapy visit, a patient uses a computer or smartphone to communicate with a mental health professional in real time without being face to face.

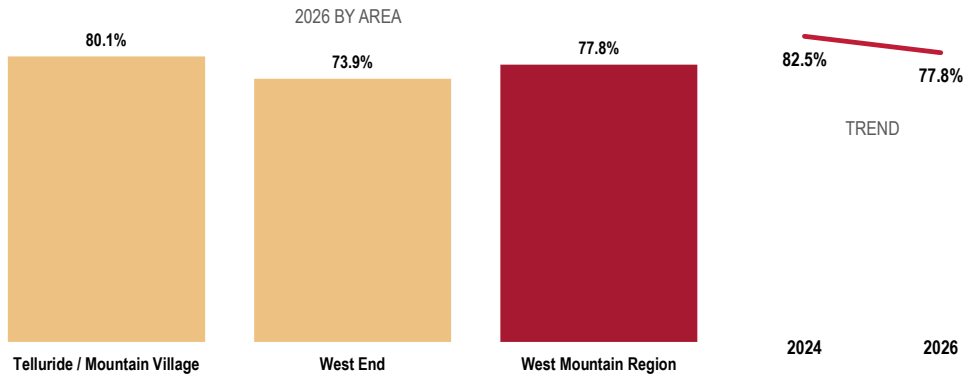
Respondents were read the following:

“Currently, mental health providers offer teletherapy visits, in which a patient uses a computer or smartphone to communicate with a mental health professional in real time without being face-to-face.

If teletherapy were available to you at a cost you could afford, how likely would you be to use this type of visit for mental health or substance use support? Would you be: very likely, somewhat likely, or not at all likely?”

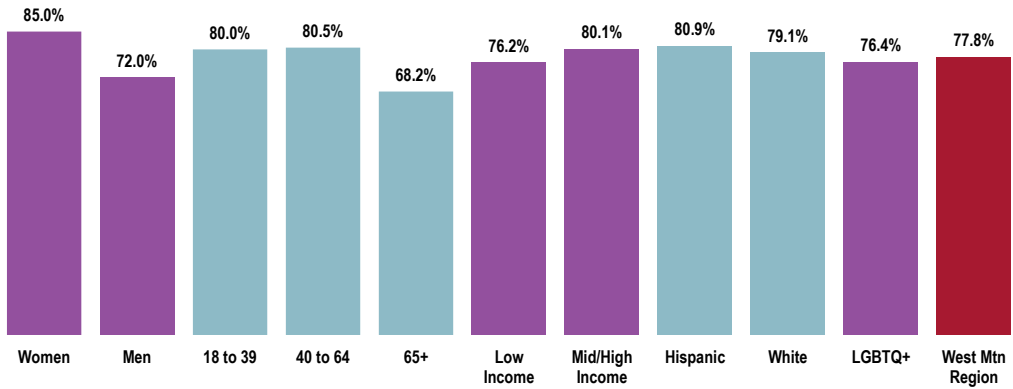


“Very/Somewhat” Likely to Use Teletherapy for Mental Health or Substance Use Support (West Mountain Region)



Sources: ● 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 21]
 Notes: ● Asked of all respondents.
 ● During a teletherapy visit, a patient uses a computer or smartphone to communicate with a mental health professional in real time without being face to face.

“Very/Somewhat” Likely to Use Teletherapy for Mental Health or Substance Use Support (West Mountain Region, 2026)



Sources: ● 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 21]
 Notes: ● Asked of all respondents.
 ● During a teletherapy visit, a patient uses a computer or smartphone to communicate with a mental health professional in real time without being face to face.





SUBSTANCE USE

ALCOHOL

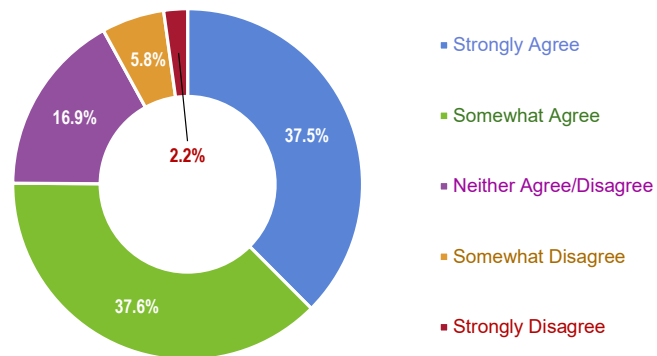
Community Perceptions of Alcohol

Three in four residents (75.1%) in the West Mountain Region (“strongly” or “somewhat”) agree that *“for most people in this community, alcohol is important to social life.”*

TREND ► Decreasing significantly from 2024 findings.

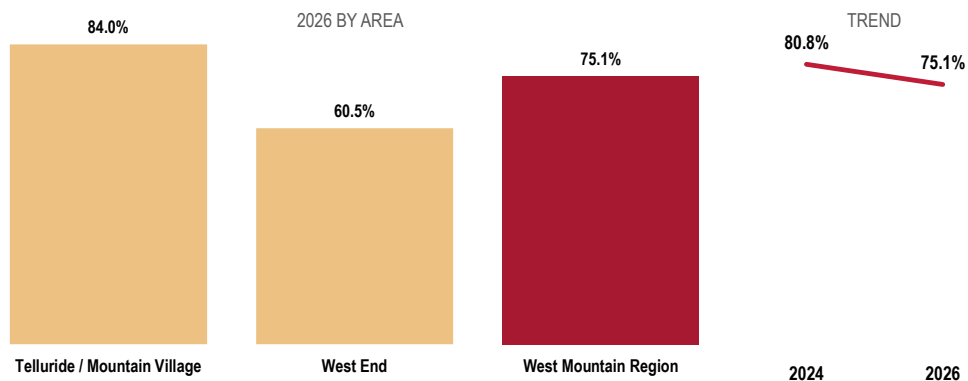
DISPARITY ► Much higher in Telluride/Mountain Village. Reported more often among adults under age 65 and those with higher incomes.

“For Most People in This Community, Alcohol Is Important to Social Life”
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 22]
Notes: • Asked of all respondents.

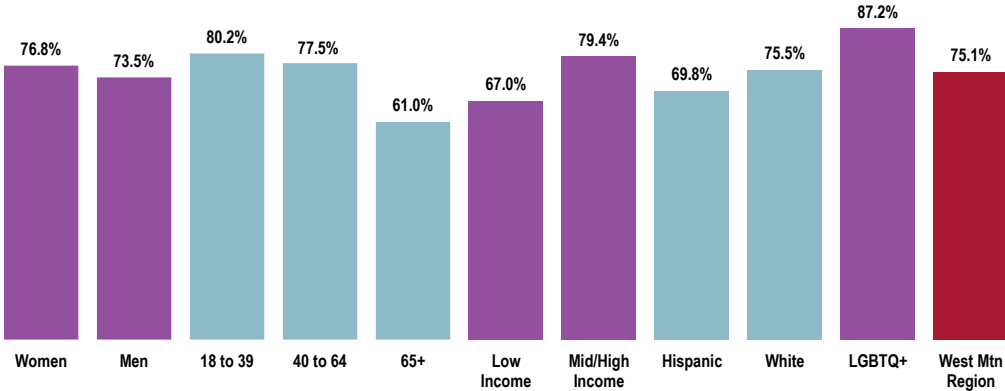
Strongly/Somewhat Agree: “For Most People in This Community, Alcohol Is Important to Social Life”
(West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 22]
Notes: • Asked of all respondents.



Strongly/Somewhat Agree: “For Most People in This Community, Alcohol Is Important to Social Life”
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 22]
Notes: • Asked of all respondents.



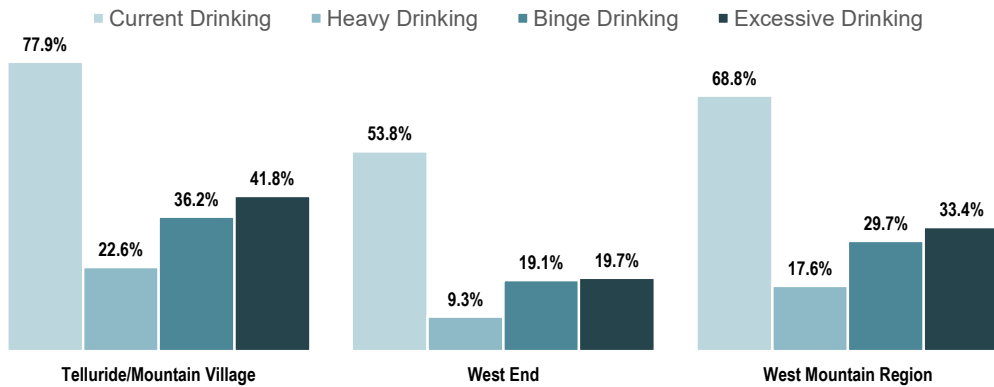
Personal Alcohol Use

DEFINITIONS

- **Current drinking** is having at least one drink of alcohol in the past 30 days.
- **Heavy drinking** is having more than two drinks per day on average (for men) or more than one drink per day on average (for women) during the past 30 days.
- **Binge drinking** is having 5 or more drinks on a single occasion (for men) or 4 or more drinks on a single occasion (for women) during the past 30 days.
- **Excessive drinking** includes either heavy drinking or binge drinking (as defined above) in the past 30 days.

More than two-thirds (68.8%) of West Mountain Region residents report some alcohol use in the past 30 days, and one-third (33.4%) reports engaging in “excessive drinking.”

Alcohol Use (West Mountain Region, 2026)



- Sources:
- 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Items 50-52, 54]
- Notes:
- Asked of all respondents.
 - **Current drinking** is consumption of at least one drink of alcohol in the past 30 days.
 - **Heavy drinking** is having more than two drinks per day on average (for men) or more than one drink per day on average (for women) during the past 30 days.
 - **Binge drinking** is having 5 or more drinks on a single occasion (for men) or 4 or more drinks on a single occasion (for women) during the past 30 days.
 - **Excessive drinking** includes those who report either heavy drinking or binge drinking in the past 30 days.



Excessive Drinking

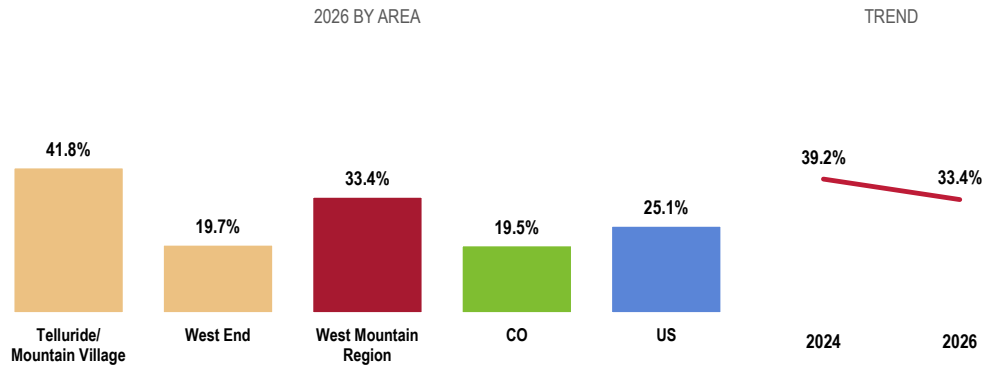
The following further outlines West Mountain Region data for the prevalence of **excessive drinking**.

BENCHMARK ▶ Well above the Colorado and US percentages.

TREND ▶ Decreasing significantly since 2024.

DISPARITY ▶ More than twice as high in Telluride/Mountain Village as in the West End. Higher among men, young adults, and LGBTQ+ residents.

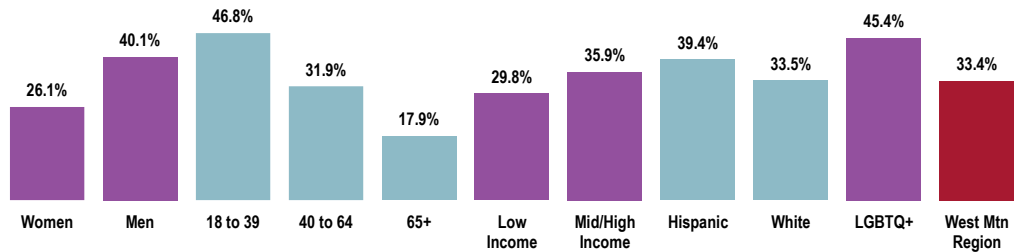
Excessive Drinking (West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 54]
 • Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC): 2024 data.
 • 2026 PRC National Health Survey; PRC, Inc.

Notes: • Asked of all respondents.
 • Excessive drinking reflects the number of persons aged 18+ who drank more than two drinks per day on average (for men) or more than one drink per day on average (for women) OR who drank 5 or more drinks during a single occasion (for men) or 4 or more drinks during a single occasion (for women) during the past 30 days.

Excessive Drinking (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 54]
 Notes: • Asked of all respondents.
 • Excessive drinking reflects the number of persons aged 18+ who drank more than two drinks per day on average (for men) or more than one drink per day on average (for women) OR who drank 5 or more drinks during a single occasion (for men) or 4 or more drinks during a single occasion (for women) during the past 30 days.



PERSONAL IMPACT OF SUBSTANCE USE

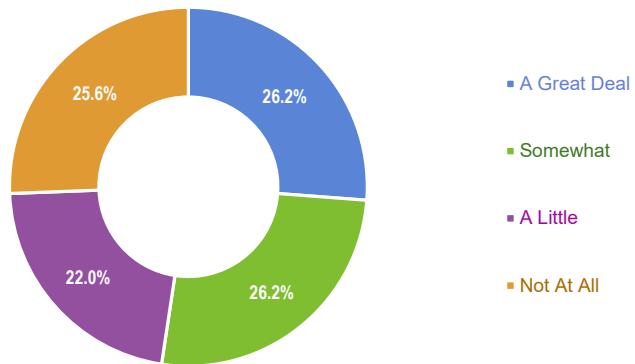
“To what degree has your life been negatively affected by your own or someone else’s substance use issues, including alcohol, prescription, and other drugs? Would you say: a great deal, somewhat, a little, or not at all?”

In the West Mountain Region, nearly three in four residents (74.4%) say that their lives have been directly affected by substance use — either their own or someone else’s — to some degree (“a little,” “somewhat,” or “a great deal”).

BENCHMARK ▶ Well above the national figure.

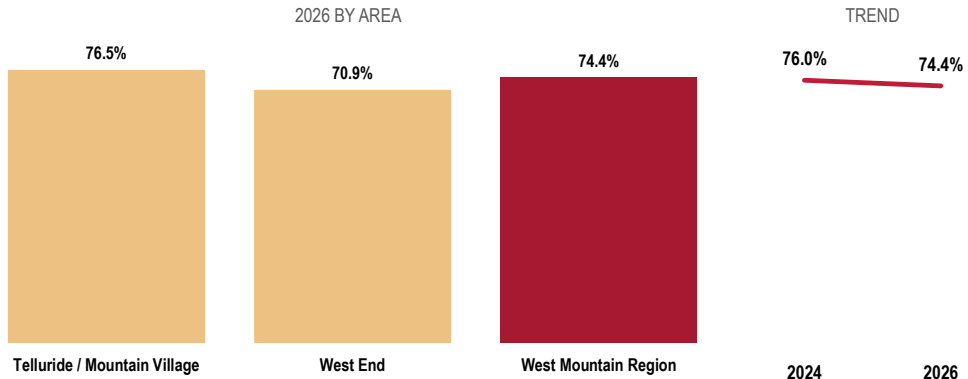
DISPARITY ▶ Reported more often among young adults, White residents, and LGBTQ+ residents.

Degree to Which Life Has Been Negatively Affected by Substance Use (by Self or Others)
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 26]
Notes: • Asked of all respondents.

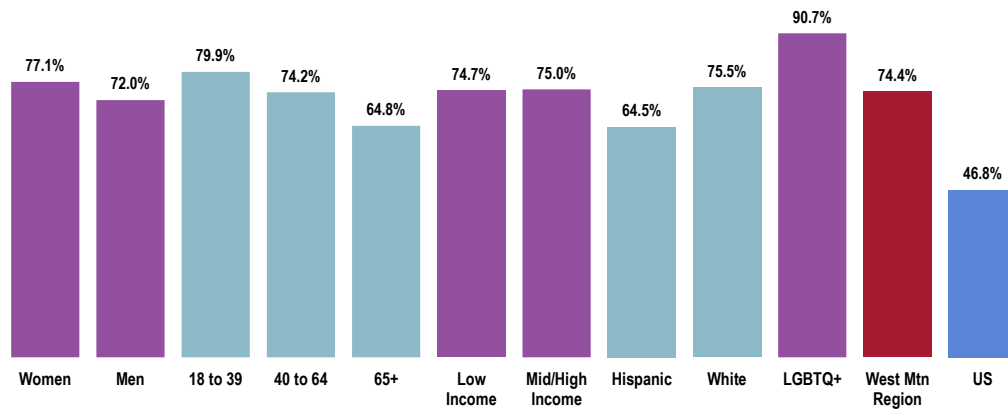
Life Has Been Negatively Affected by Substance Use (by Self or Someone Else)
(West Mountain Region)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 26]
Notes: • Asked of all respondents.
• Includes those responding “a great deal,” “somewhat,” or “a little.”



Life Has Been Negatively Affected by Substance Use (by Self or Someone Else) (West Mountain Region, 2026)



Sources:

- 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 26]
- 2026 PRC National Health Survey, PRC, Inc.

 Notes:

- Asked of all respondents.
- Includes those responding "a great deal," "somewhat," or "a little."



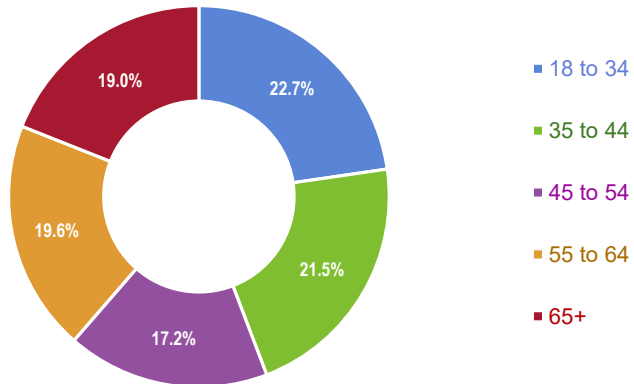


COMMUNITY SAMPLE CHARACTERISTICS

Charts in the following section detail the sample characteristics for the West Mountain Region community. Note that the samples closely match the actual population of the region in terms of gender, age, race/ethnicity, and income level.

AGE

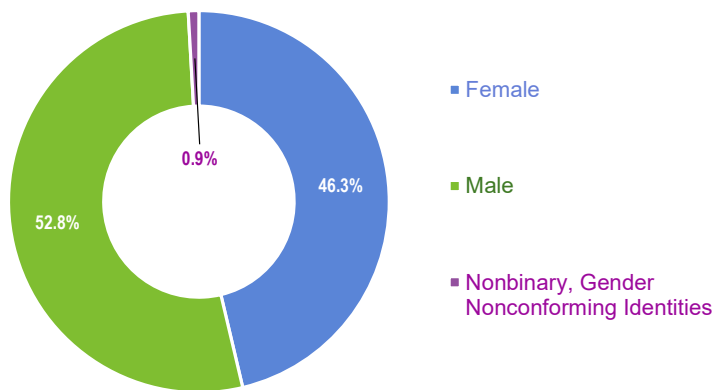
Age of Respondent
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 27]
Notes: • Asked of all respondents.

GENDER

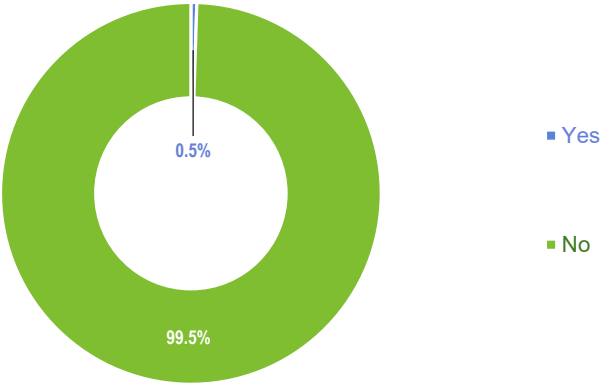
Self-Identified Gender
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 3]
Notes: • Asked of all respondents.



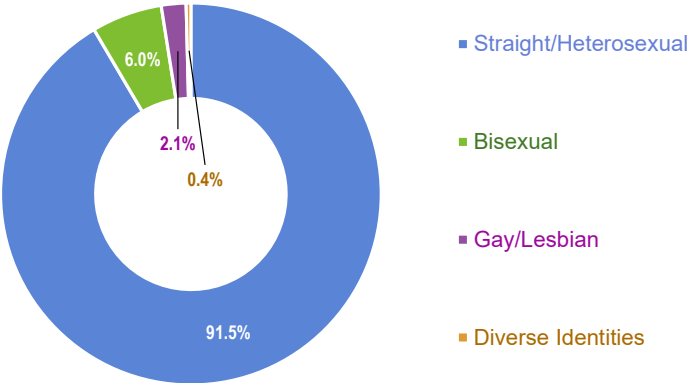
Transgender (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 29]
 Notes: • Asked of all respondents.

SEXUAL ORIENTATION

Self-Identified Sexual Orientation (West Mountain Region, 2026)

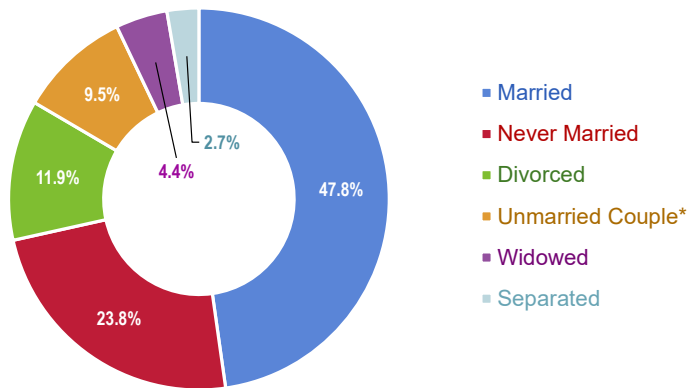


Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 28]
 Notes: • Asked of all respondents.



MARITAL STATUS

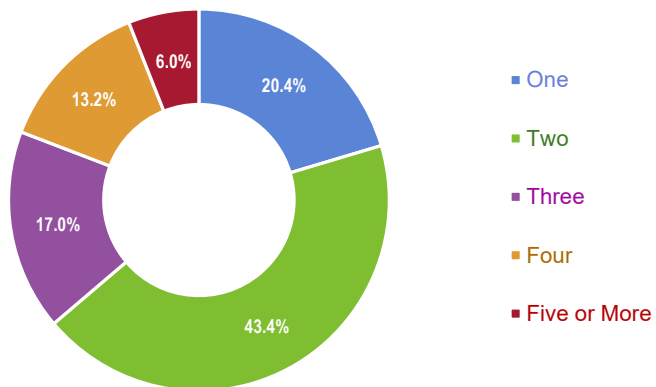
Marital Status
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 35]
Notes: • Asked of all respondents.
• *Includes those who are members of an unmarried couple or are in a domestic partnership/civil union.

HOUSEHOLD SIZE

Total Household Members
(West Mountain Region, 2026)

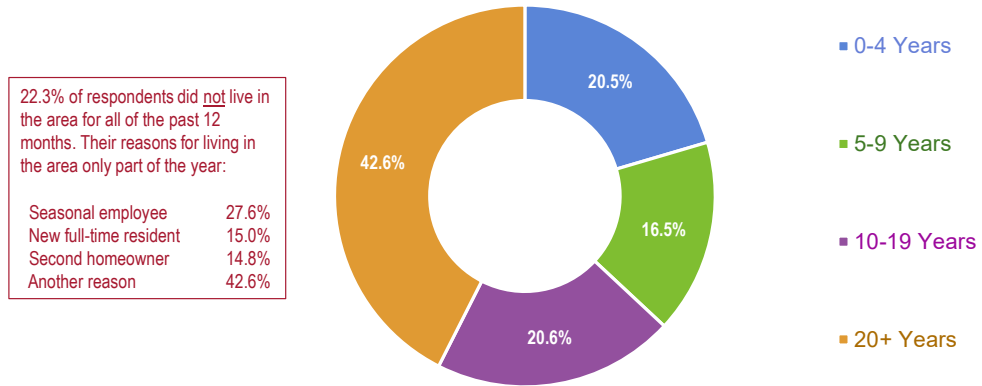


Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 30]
Notes: • Asked of all respondents.



RESIDENCY

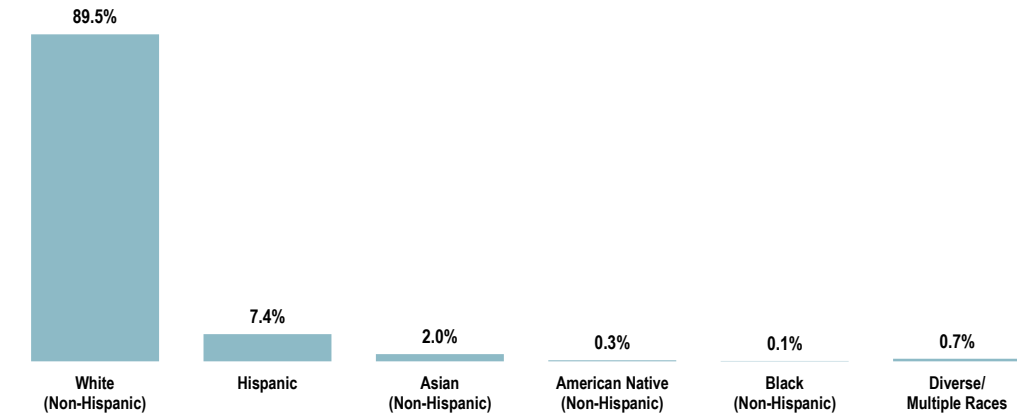
Number of Years Living in the Area
(West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Items 31-32, 305]
Notes: • Asked of all respondents.

RACE & ETHNICITY

Self-Identified Race/Ethnicity
(West Mountain Region, 2026)

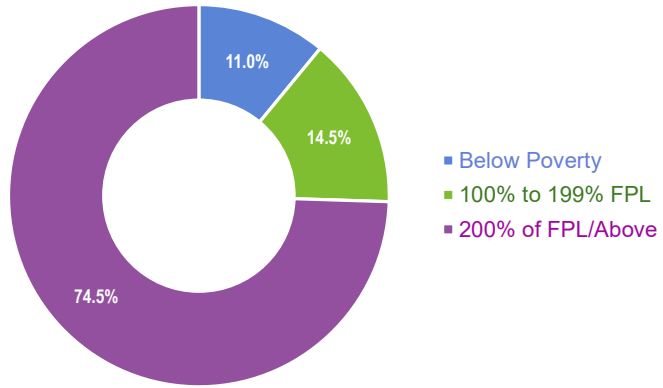


Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 62]
Notes: • Asked of all respondents.



INCOME

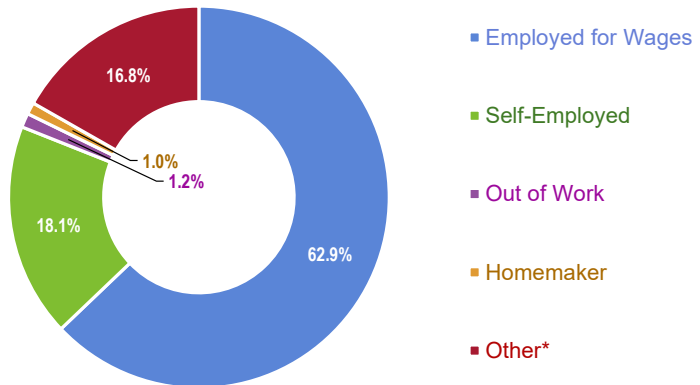
Household Income Relative to Federal Poverty Level (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 65]
Notes: • Asked of all respondents.

EMPLOYMENT

Employment Status (West Mountain Region, 2026)



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 38]
Notes: • Asked of all respondents.
• *Includes students, retirees, and those who are unable to work.



HEALTH INSURANCE COVERAGE (AGE 18-64)

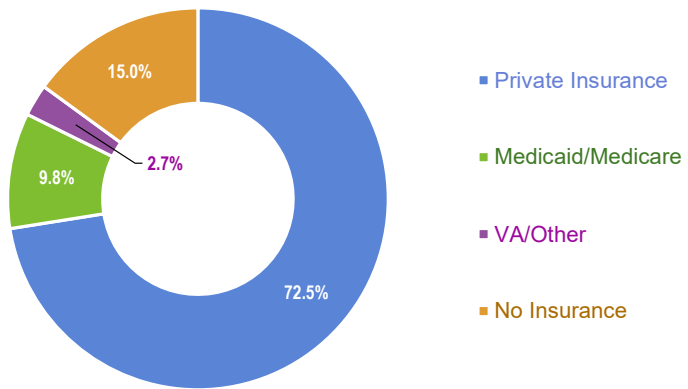
While most West Mountain Region residents age 18 to 64 have health care insurance coverage through private insurance or government-sponsored insurance, 15.0% are without any coverage whatsoever.

BENCHMARK ▶ Well above the US prevalence.

TREND ▶ Increasing significantly since 2024.

DISPARITY ▶ Reported more often among young adults, those in low-income households, Hispanic residents, and those who identify as LGBTQ+.

Insurance Coverage
(Adults Age 18 to 64; West Mountain Region, 2026)

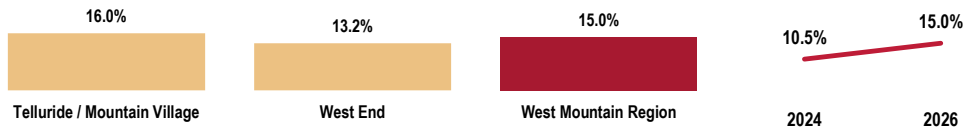


Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 55]
Notes: • Asked of all respondents.

Lack of Health Care Insurance Coverage (Adults Age 18-64; West Mountain Region)

2026 BY AREA

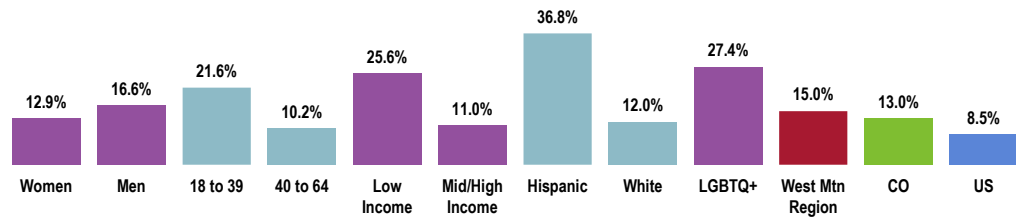
TREND



Sources: • 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 55]
• 2026 PRC National Health Survey; PRC, Inc.
Notes: • Represents respondents under age 65.



Lack of Health Care Insurance Coverage (Adults Age 18-64; West Mountain Region, 2026)



Sources:

- 2026 PRC Community Engagement & Behavioral Health Survey; PRC, Inc. [Item 55]
- 2026 PRC National Health Survey, PRC, Inc.
- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC); 2024 data.

Notes:

- Asked of all respondents under the age of 65.

