

# Wood County Health Assessment 2012



Commissioned by  
Wood County Health Partners

# Foreword

The members of the Wood County Health Partners are pleased to present the 2012 Health Assessment. This comprehensive Community Health Assessment is the result of a strong commitment by dedicated community partners working together to improve the health and quality of life of Wood County residents.

The health assessment gives us a snapshot of our community as well as our state and nation. It is our wish that the data presented will provide valuable information to many organizations to develop strategies and implementation of services that will focus on wellness, access to care, and unmet community needs. It will provide insight into our community's structure in the areas of health and well-being.

This data will allow community stakeholders to write better grants, formulate strong strategic plans and answer a call to action. The result will be a community that will focus on wellness, improve the general health status, increase access to services and address unmet needs. It can influence our current course of action and support new areas of interest within the community.

However, when using this publication for planning purposes the process should look more in depth at the results, seek additional sources of information from service providers and identify the target population to put the findings in perspective.

This effort should continue to inspire the community to work together to remove barriers to health improvement. It is the Wood County Health Partners' wish that community groups will persevere in meeting the challenges presented by the findings in this assessment.

In conclusion, we want to express our appreciation to the many community leaders and organizations for their support and/or financial assistance in making this health assessment a reality and the Healthy Communities Foundation of the Hospital Council of Northwest Ohio for guiding this process.

Sincerely,

Wood County Health Partners

# Acknowledgements

## Funding for the Wood County Health Assessment Provided by:

Wood County Health District  
Wood County Hospital

## Commissioned by: Wood County Health Partners

Administration of Wood County Health District  
Behavioral Connections of Wood County  
Bowling Green State University  
Children's Resource Center  
Congregational Nurse Project  
National Association of Local Boards of Health (NALBOH)  
Wood County Alcohol, Drug Addiction and Mental Health  
Wood County Board of Developmental Disabilities  
Wood County Board of Health  
Wood County Committee on Aging  
Wood County Dentist  
Wood County District Advisory Council  
Wood County Economic Development Commission  
Wood County Educational Service Center  
Wood County Family & Child Abuse Prevention  
Wood County Health District  
Wood County Hospital  
Wood County Job & Family Services  
Wood County Juvenile Court  
Wood County Park District  
United Way of Wood County

The Wood County Health Partners would like to extend a special "thank you" to the ADAMHS Board and Wood County Educational Service Center for their collaboration with the schools and the ADAMHS survey.

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# Wood County Community Health Assessment

## *Executive Summary*

This executive summary provides an overview of health-related data for Wood County adults (19 years of age and older), youth (ages 12 through 18), and children (ages 0-11) who participated in a county-wide health assessment survey during 2012. The findings are based on self-administered surveys using a structured questionnaire. The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state *Behavioral Risk Factor Surveillance System* (BRFSS) and *Youth Risk Behavior Surveillance System* (YRBSS) and the *National Survey of Children's Health* (NSCH) developed by the Child and Adolescent Health Measurement Initiative. The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

## Primary Data Collection Methods

### **Design**

This community health assessment was cross-sectional in nature and included a written survey of adults, adolescents, and parents within Wood County. From the beginning, community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

### **Instrument Development**

Four survey instruments were designed and pilot tested for this study: one for adults, one for adolescents, one for parents of children ages 0-5, and one for parents of children ages 6-11. As a first step in the design process, health education researchers from the University of Toledo and staff members from the Hospital Council of NW Ohio met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of adults and adolescents. The investigators decided to derive the majority of the adult survey items from the BRFSS. The majority of the survey items for the adolescent survey were derived from the YRBSS. The majority of the survey items for the parents of children 0-11 were derived from the NSCH. This decision was based on being able to compare local data with state and national data.

The Project Coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Wood County. During these meetings, banks of potential survey questions from the BRFSS, YRBSS, and NSCH surveys were reviewed and discussed. Based on input from the Wood County planning committee, the Project Coordinator composed drafts of surveys containing 112 items for the adult survey, 73 items for the adolescent survey, 71 items for the 0-5 survey, and 79 items for the 6-11 survey. The drafts were reviewed and approved by health education researchers at the University of Toledo.

# Primary Data Collection Methods

## Sampling

### *Adult Survey*

Adults ages 19 and over living in Wood County were used as the sampling frame for the adult survey. Since U.S. Census Bureau age categories do not correspond exactly to this age parameter, the investigators calculated the population of those 18 years and over living in Wood County. There were 98,213 persons ages 18 and over living in Wood County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding margin of error of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5% margin of error of the survey findings.) A sample size of at least 383 adults was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Wood County was obtained from American Clearinghouse in Louisville, KY.

### *Adolescent Survey*

A sample size of 374 adolescents was needed to ensure a 95% confidence interval with a corresponding 5% margin of error. Students were randomly selected and surveyed in the schools.

### *Children 0-5 and 6-11 Surveys*

Children ages 0-11 residing in Wood County were used as the sampling frames for the surveys. Using U.S. Census Bureau data on the population of children ages 0-11, living in Wood County, it was determined that 8,355 children ages 0-5 and 9,082 children ages 6-11 reside in Wood County. The investigators conducted a power analysis based on a post-hoc distribution of variation in responses (70/30 split) to determine what sample size was needed to ensure a 95% confidence level with corresponding confidence interval of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5% margin of error). Because many of the items were identical between the 0-5 and 6-11 surveys, the responses were combined to analyze data for children 0-11. The sample size required to generalize to children ages 0-11 was 370. The random sample of mailing addresses of parents of children 0-11 from Wood County was obtained from American Clearinghouse in Louisville, KY.

## Procedure

### *Adult Survey*

Prior to mailing the survey to adults, an advance letter was mailed to 1,000 adults in Wood County. This advance letter was personalized, printed on Wood County Health Partners stationery and was signed by Pamela Butler, Health Commissioner, Wood County Health Department, and Stan Korducki, CEO, Wood County Hospital. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents’ confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Two weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Wood County Health Partners stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately two weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging them to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent two weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.



## Primary Data Collection Methods

The response rate for the mailing was 37% (n=360; CI=5.16). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

### *Adolescent Survey*

The survey was approved by all superintendents. Schools and grades were randomly selected. Each student in that grade had to have an equal chance of being in the class that was selected, such as a general English or health class. Classrooms were chosen by the school principal. Passive permission slips were mailed home to parents of any student whose class was selected to participate. The response rate was 97% (n=452). The survey contained 73 questions and had a multiple choice response format.

### *Children 0-5 and 6-11*

Prior to mailing the survey to parents of 0-11 year olds, an advance letter was mailed to 1,600 parents in Wood County. This advance letter was personalized, printed on Wood County Health Partners stationery and was signed by Pamela Butler, Health Commissioner, Wood County Health Department, and Stan Korducki, CEO, Wood County Hospital. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Two weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Healthy Wood County stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately two weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging them to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent two weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

Because much of the output combines identical items from the 0-5 and the 6-11 surveys, the number of returned surveys needed for power of the combined population (n=17,437) was 370 and this was exceeded by having a combined 515 surveys.

### **Data Analysis**

Individual responses were anonymous and confidential. Only group data are available. All data was analyzed by health education researchers at the University of Toledo using SPSS 17.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Wood County, the adult data collected was weighted by age, gender, race, and income using 2010 census data. Multiple weightings were created based on this information to account for different types of analyses. For more information on how the weightings were created and applied, see Appendix iii.

## Primary Data Collection Methods

### Limitations

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Wood County adult assessment had a high response rate. However, if any important differences existed between the respondents and the non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the population of Wood County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

Second, it is important to note that, although several questions were asked using the same wording as the CDC questionnaires and the NSCH questionnaire, the adult and parent data collection method differed. CDC adult data and NSCH child data were collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than as a mail survey. The youth CDC survey was administered in schools in a similar fashion as this county health assessment.

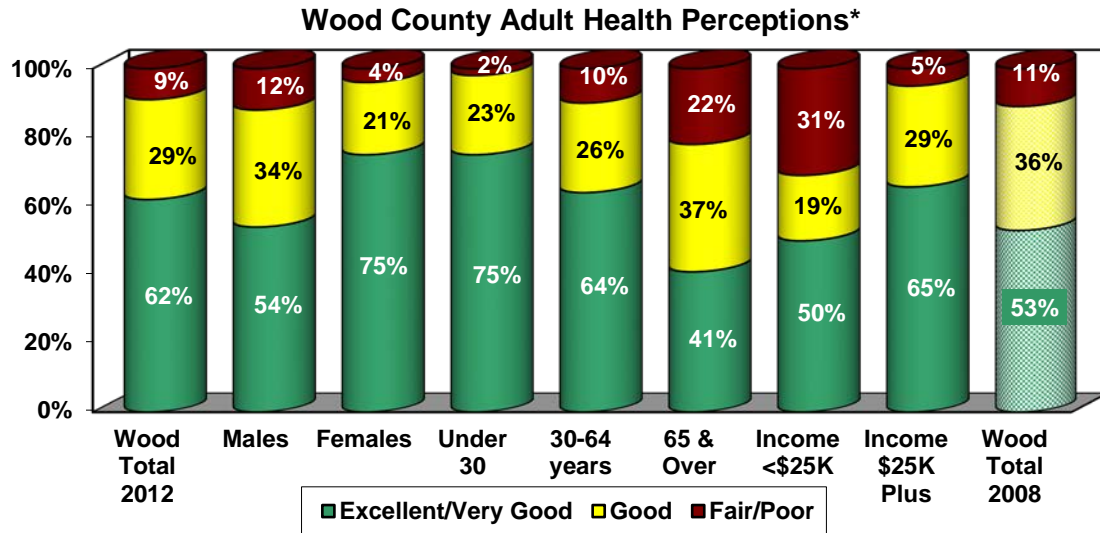
Third, this was the first time that parents of children ages 0-11 were surveyed in Wood County. Being a new instrument, there may have been questions that would be worded differently or additional items that would be asked the next time this assessment is completed.

Finally, this survey asked parents questions regarding their young children. Should enough parents feel compelled to respond in a socially desirable manner which is not consistent with reality, this would represent a threat to the internal validity of the results.

# Data Summary

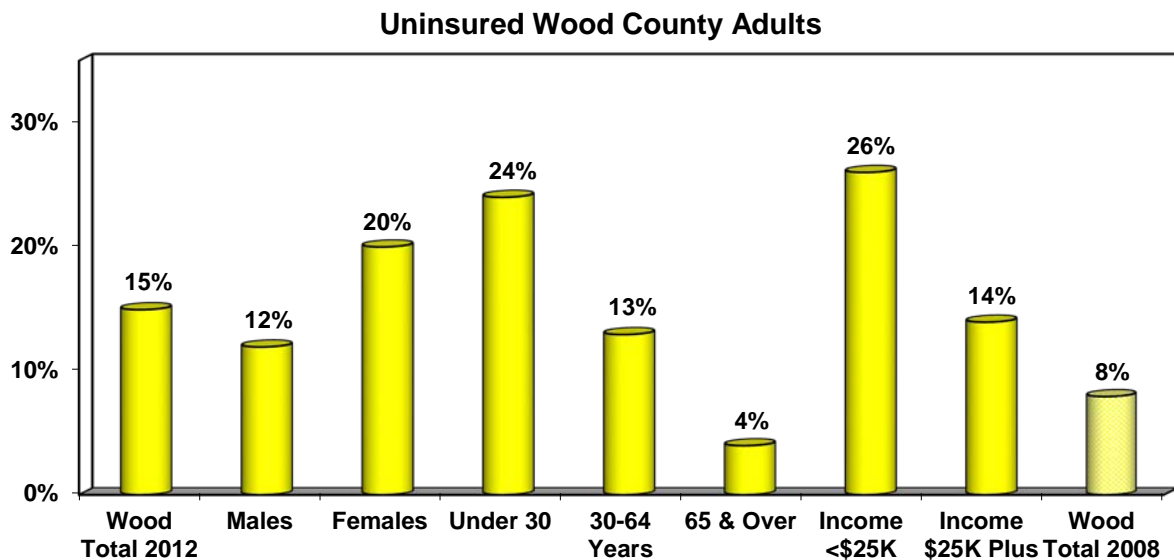
## Health Perceptions

In 2012, more than three-fifths (62%) of the Wood County adults rated their health status as excellent or very good. Conversely, 9% of the adults, increasing to 31% of those with lower household incomes, described their health as fair or poor.



## Health Care Coverage

The 2012 Health Assessment data has identified that 15% of Wood County adults were without health care coverage. Those most likely to be uninsured were adults under age 30 and those with an income level under \$25,000. In Wood County, 12.2% of residents live below the poverty level. (Source U.S. Census, American Community Survey 5 Year Estimates, 2006-2010)



# Data Summary

## Health Care Access

The 2012 Health Assessment project identified that 51% of adults visited a doctor for a routine checkup in the past year. 31% of adults visited an emergency room in the past year, increasing to 36% of those with lower household incomes. 76% of adults went outside Wood County for health care services in the past year.

## Cardiovascular Health

Heart disease (30%) and stroke (6%) accounted for 36% of all Wood County adult deaths from 2006-2008 (Source: ODH Information Warehouse). The 2012 Wood County Health Assessment found that nearly one-third (30%) of Wood County adults had been diagnosed with high blood pressure, 31% had high blood cholesterol, 30% were obese, and 11% were smokers, four known risk factors for heart disease and stroke.

## Cancer

Ohio Department of Health statistics indicate that from 2000-2008, a total of 1,984 Wood County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, healthy diet and exercise habits, and early detection may reduce overall cancer deaths.

## Diabetes

In 2012, 8% of Wood County adults had been diagnosed with diabetes.

## Arthritis

According to the Wood County survey data, 27% of Wood County adults were diagnosed with arthritis. According to the 2009 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they have arthritis.

## Asthma

According to the Wood County survey data, 13% of Wood County adults had been diagnosed with asthma.

### Wood County Leading Types of Death 2006-2008

**Total Deaths: 2,869**

1. Heart Disease (30% of all deaths)
2. Cancers (23%)
3. Stroke (6%)
4. Chronic Lower Respiratory Diseases (5%)
5. Accidents and Unintentional Injuries (5%)

(Source: ODH Information Warehouse, updated 4-15-10)

### Wood County Incidence of Cancer 2007

**All Types: 478 cases**

- ❖ Breast: 78 cases (16%)
- ❖ Prostate: 76 cases (16%)
- ❖ Lung and Bronchus: 65 cases (14%)
- ❖ Colon and Rectum: 55 cases (12%)
- ❖ Bladder: 14 cases (3%)

**From 2006-2008, there were 663 cancer deaths in Wood County.**

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse)

### Diabetes Facts

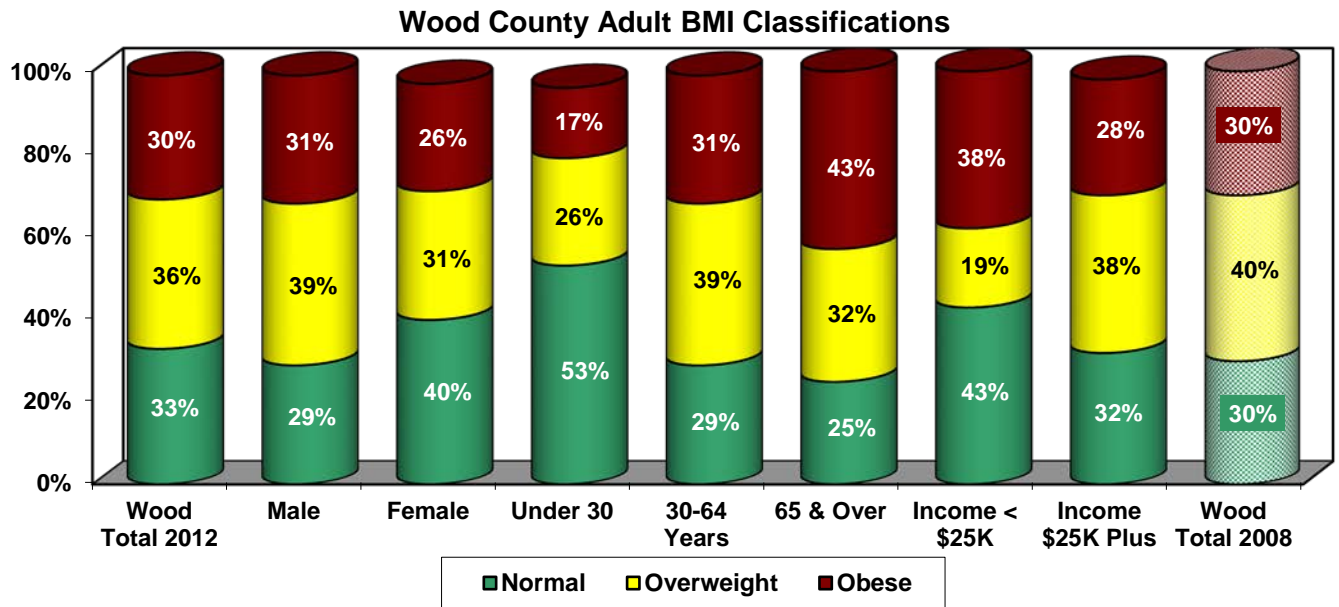
- ❖ Diabetes was the 6<sup>th</sup> leading cause of death in Wood County from 2006-2008.
- ❖ Diabetes was the 7<sup>th</sup> leading cause of death in Ohio from 2006-2008.
- ❖ From 2006-2008, the Wood County age-adjusted mortality rate per 100,000 for diabetes was 47.7 deaths for males (34.4 Ohio) and 28.6 (24.3 Ohio) deaths for females.

(Source: ODH, Information Warehouse, updated 4-15-10)

# Data Summary

## Adult Weight Status

The 2012 Health Assessment identified that 66% of Wood County adults were overweight or obese based on Body Mass Index (BMI). The 2010 BRFSS indicates that 30% of Ohio and 28% of U.S. adults were obese by BMI. Nearly one-third (30%) of Wood County adults were obese. Almost half (48%) of adults were trying to lose weight.



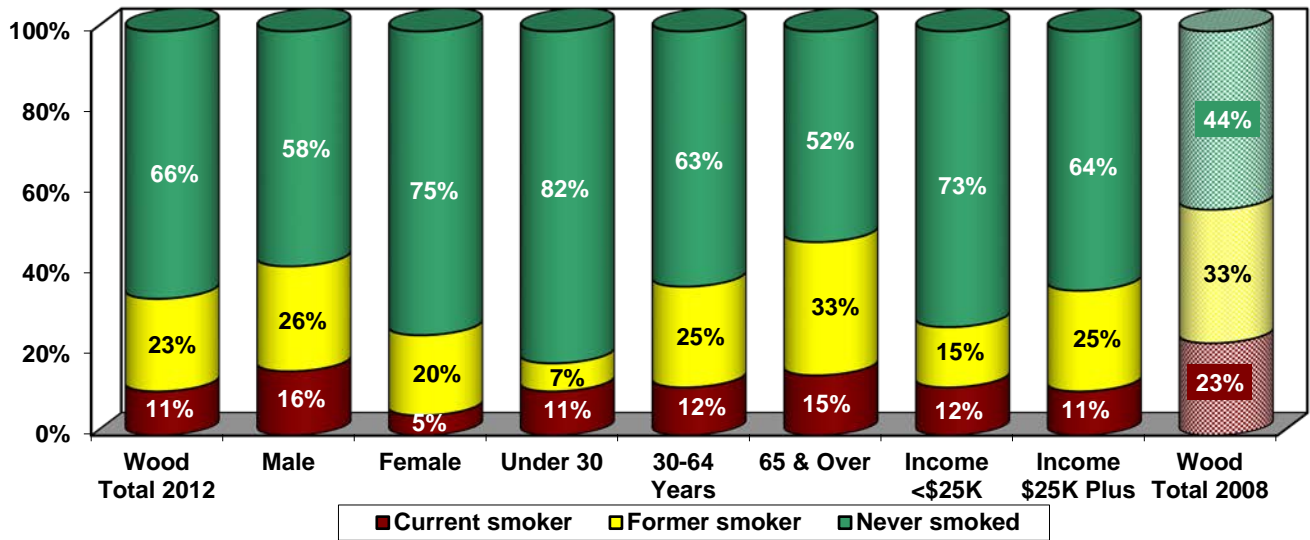
*(Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight)*

## Adult Tobacco Use

In 2012, 11% of Wood County adults were current smokers and 23% were considered former smokers. In 2011, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of disease and early death in the world, accounting for approximately 5.4 million premature deaths each year. ACS estimated that tobacco use would be linked to approximately one in five deaths in the U.S. *(Source: Cancer Facts & Figures, American Cancer Society, 2011)*

# Data Summary

## Wood County Adult Smoking Behaviors

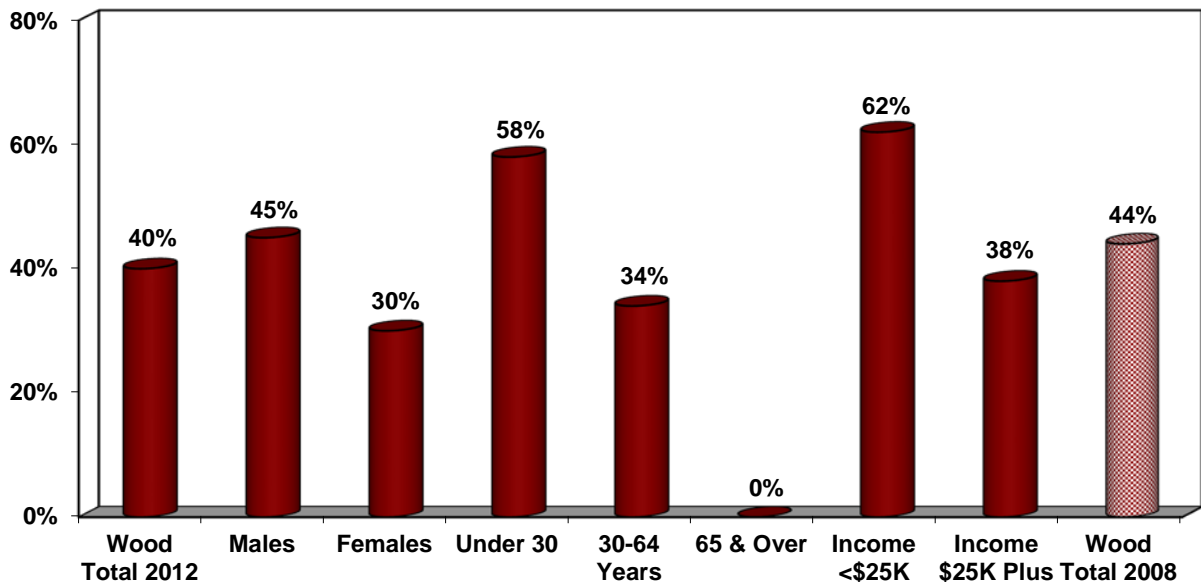


Respondents were asked:  
 "Have you smoked at least 100 cigarettes in your entire life?  
 If yes, do you now smoke cigarettes every day, some days or not at all?"

## Adult Alcohol Consumption

In 2012, the Health Assessment indicated that 16% of Wood County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 40% of adults who drank had five or more drinks (for males) and 4 or more drinks (for females) on one occasion (binge drinking) in the past month. Eight percent of adults drove after drinking perhaps too much alcohol.

## Wood County Adult Drinkers Who Binge Drank in Past Month\*

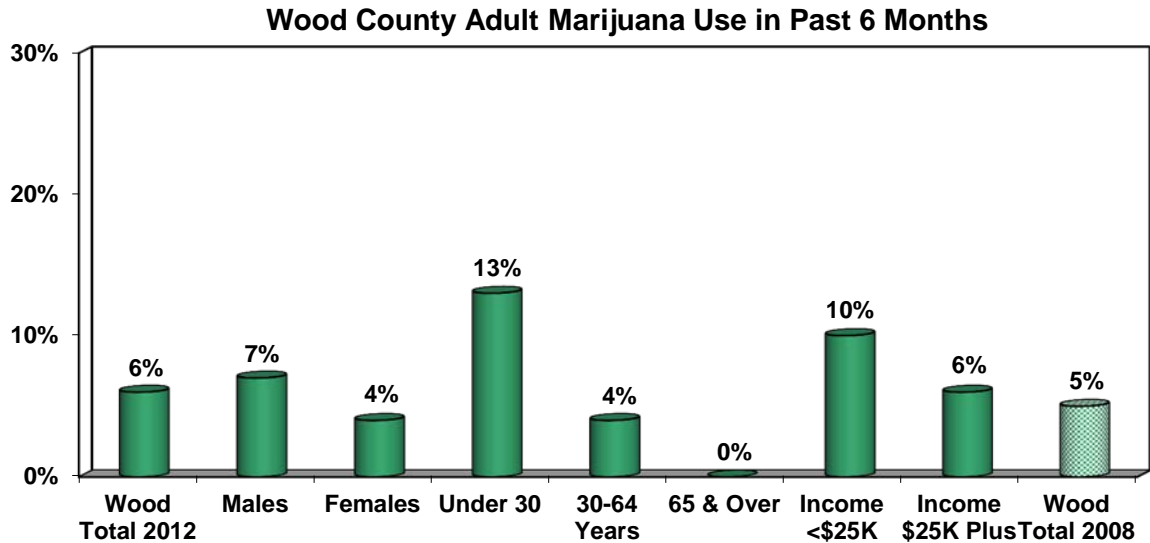


\*Based on adults who have drunk alcohol in the past month. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on an occasion. Adults must have reported drinking five or more drinks (for males) or four or more drinks (for females) on an occasion at least once in the previous month.

## Data Summary

### Adult Marijuana and Other Drug Use

In 2012, 6% of Wood County adults had used marijuana during the past 6 months. 10% of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

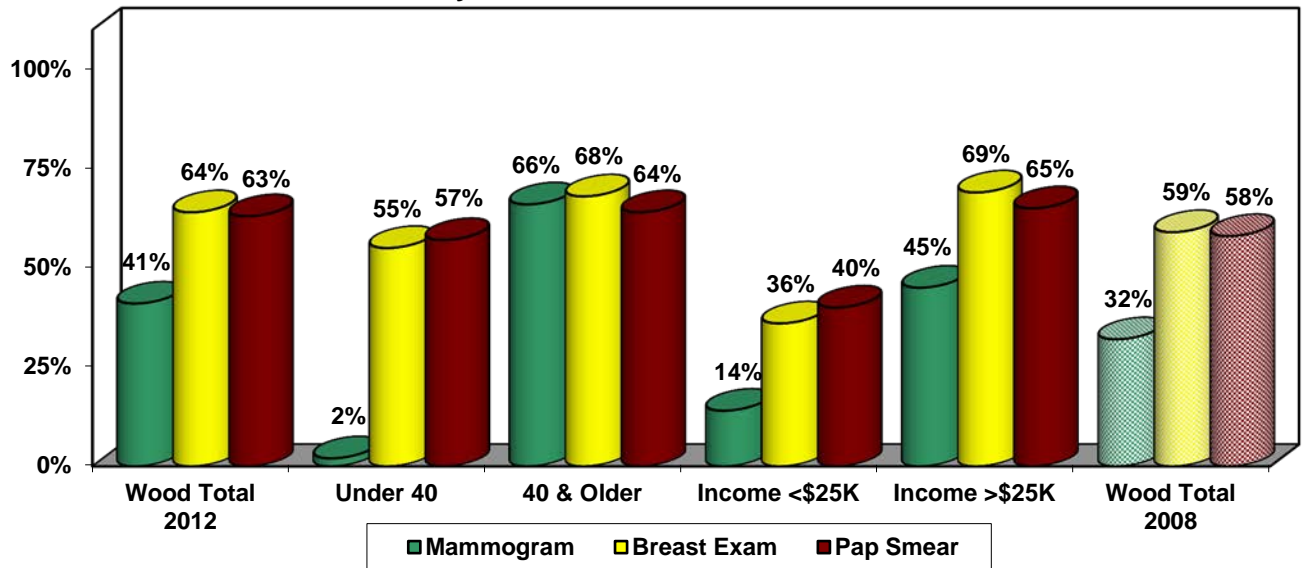


### Women's Health

In 2012, about two-thirds (66%) of Wood County women over the age of 40 reported having a mammogram in the past year. 64% of Wood County women ages 19 and over have had a clinical breast exam and 63% have had a Pap smear to detect cancer of the cervix in the past year. The Health Assessment determined that one-fifth (21%) of Wood County women had high blood pressure, 26% had high blood cholesterol, 26% were obese, and 5% were identified as smokers, known risk factors for cardiovascular diseases.

# Data Summary

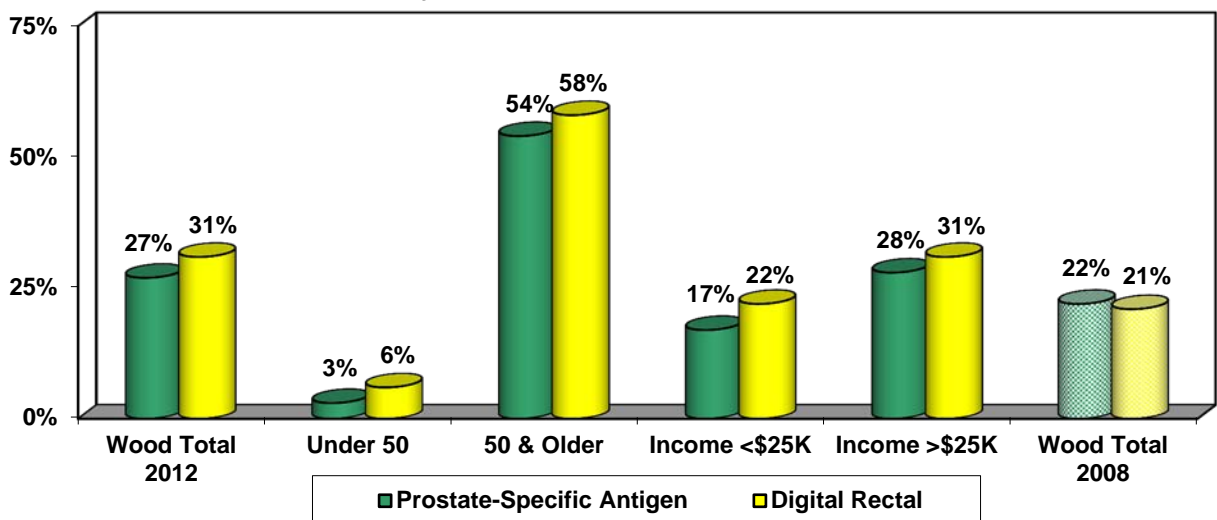
### Wood County Women's Health Exams Within the Past Year



## Men's Health

In 2012, more than half (54%) of Wood County males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. Nearly three-fifths (58%) of males over the age of 50 had a digital rectal exam in the past year. Major cardiovascular diseases (heart disease and stroke) accounted for 33% and cancers accounted for 25% of all male deaths in Wood County from 2006-2008. More than one-third (36%) of Wood County men had been diagnosed with high blood pressure, 34% had high blood cholesterol, and 16% were identified as smokers, which, along with obesity (31%), are known risk factors for cardiovascular diseases.

### Wood County Men's Health Exams Within the Past Year





## Data Summary

### Preventive Medicine and Health Screenings

Over one-third (34%) of adults had a flu shot during the past 12 months. 64% of adults ages 65 and over had a pneumonia vaccination at some time in their life.

### Adult Sexual Behavior & Pregnancy Outcomes

In 2012, over two-thirds (69%) of Wood County adults had sexual intercourse. Five percent of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs (*Source: CDC, STDs in Adolescents and Young Adults, 2010 STD Surveillance*).

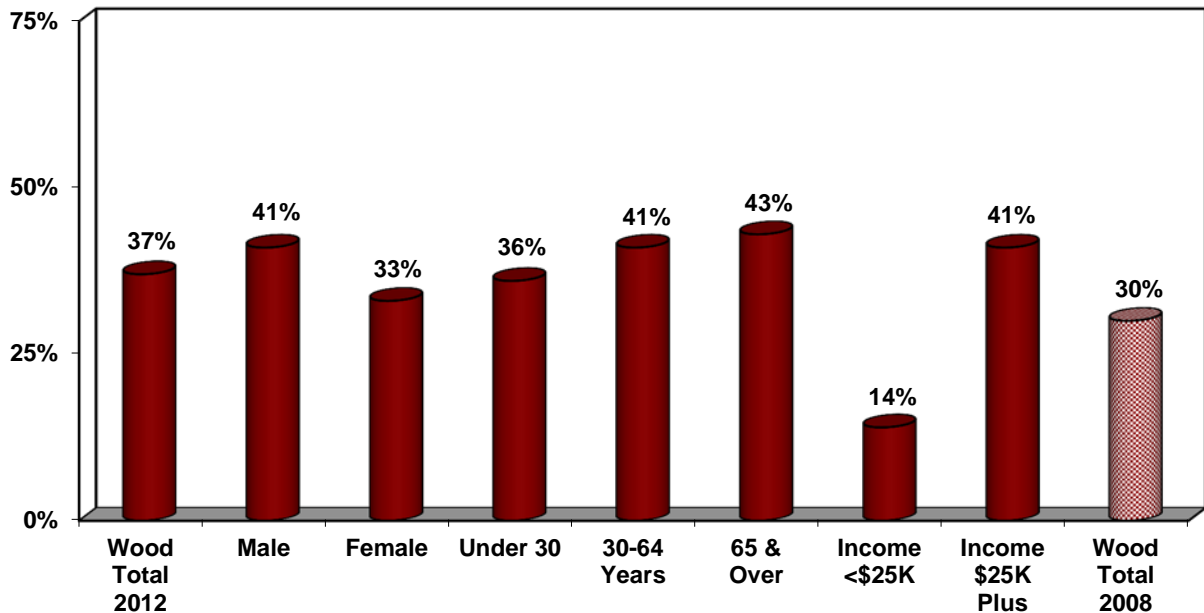
### Quality of Life

In 2012, 37% of Wood County adults were limited in some way because of a physical, mental or emotional problem.

### Social Context

In 2012, 3% of Wood County adults were threatened or abused in the past year. 37% of adults kept a firearm in or around their home.

**Wood County Adults With a Firearm in the Home**



### Environmental Health and Disaster Preparedness

Insects and mold were the two most important perceived environmental health issues that threatened Wood County adults' health in the past year.

# Data Summary

## Adult Mental Health and Suicide

In 2012, 13% of Wood County adults reported they considered attempting suicide at some time in their life. 12% of adults felt so sad or hopeless almost every day for two or more weeks that they stopped doing usual activities.

## Oral Health

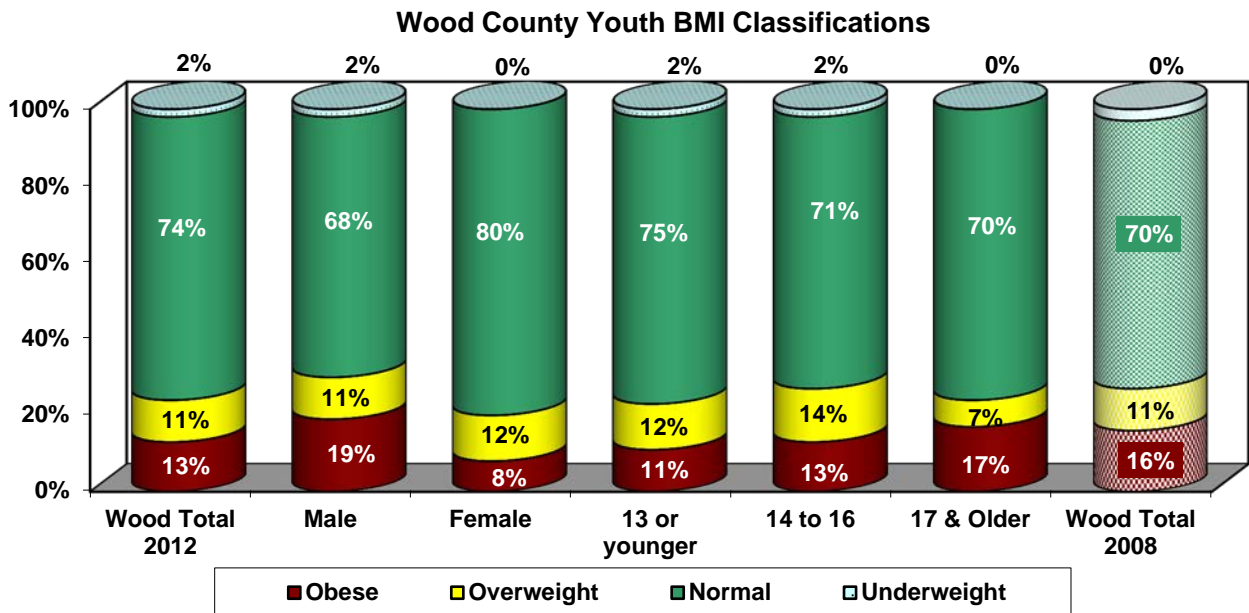
The 2012 Health Assessment project has determined that nearly three-fourths (74%) of Wood County adults had visited a dentist or dental clinic in the past year. The 2010 BRFSS reported that 70% of U.S. adults and 72% of Ohio adults had visited a dentist or dental clinic in the previous twelve months. Just over four-fifths (82%) of Wood youth in grades 6-12 had visited the dentist for a check-up, exam, teeth cleaning, or other dental work in the past year.

## Veteran's Affairs

The 2012 Health Assessment project identified that 16% of Wood County adults had a veteran in their household. 7% of Wood County veterans were diagnosed with Post Traumatic Stress Disorder (PTSD).

## Youth Weight Status

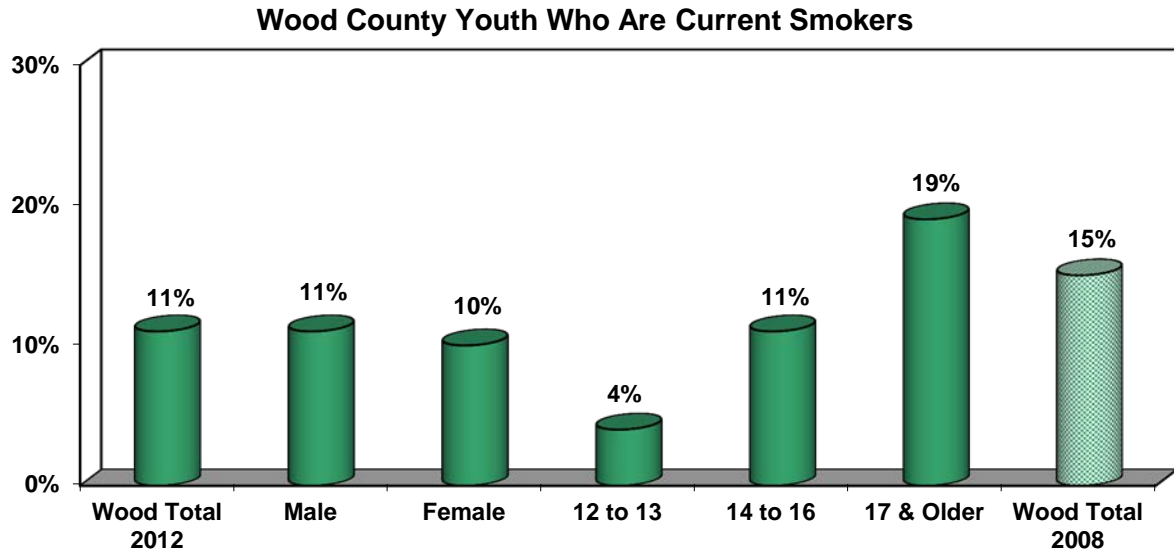
The 2012 Health Assessment identified that 13% of Wood County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 27% of Wood County youth reported that they were slightly or very overweight. 72% of youth were exercising for 60 minutes on 3 or more days per week.



## Data Summary

### Youth Tobacco Use

The 2012 Health Assessment identified that 11% of Wood County youth in grades 6-12 were smokers, increasing to 19% of those who were over the age of 17. Of those 6<sup>th</sup>-12<sup>th</sup> grade youth who currently smoked, 50% had tried to quit.



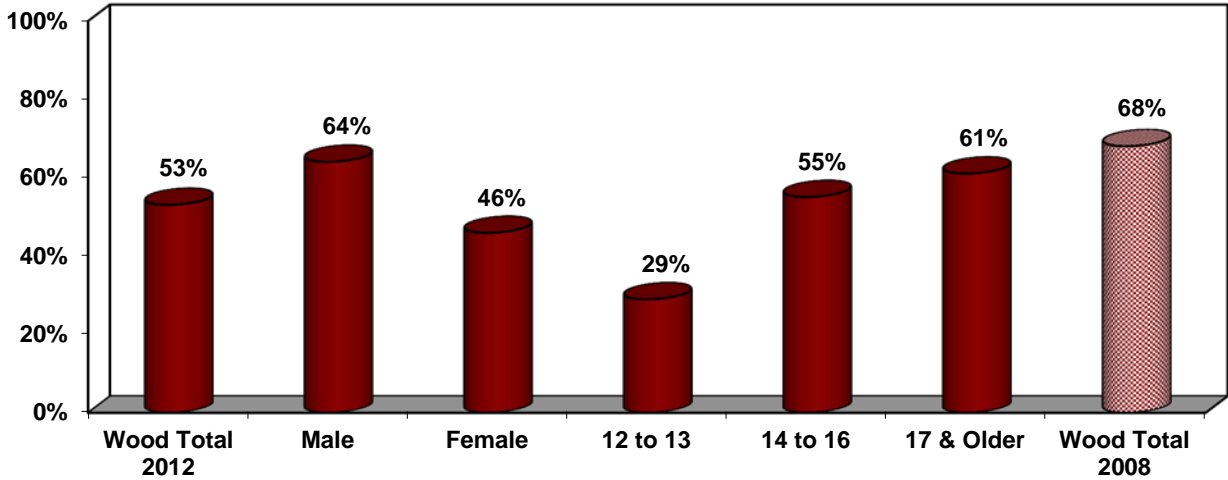
*Current smokers are those who have smoked at any time during the past 30 days.*

### Youth Alcohol Consumption

In 2012, the Health Assessment results indicated that 48% of Wood County youth had drunk at least one drink of alcohol in their life, increasing to 70% of youth seventeen and older. 40% of those who drank took their first drink at 12 years old or younger. More than one-fifth (23%) of all Wood County youth and nearly two-fifths (38%) of those over the age of 17 had at least one drink in the past 30 days. Over half (53%) of the youth who reported drinking in the past 30 days had at least one episode of binge drinking. 3% of all youth drivers had driven a car in the past month after they had been drinking alcohol.

## Data Summary

**Wood County Youth Current Drinkers Binge Drinking in Past Month\***

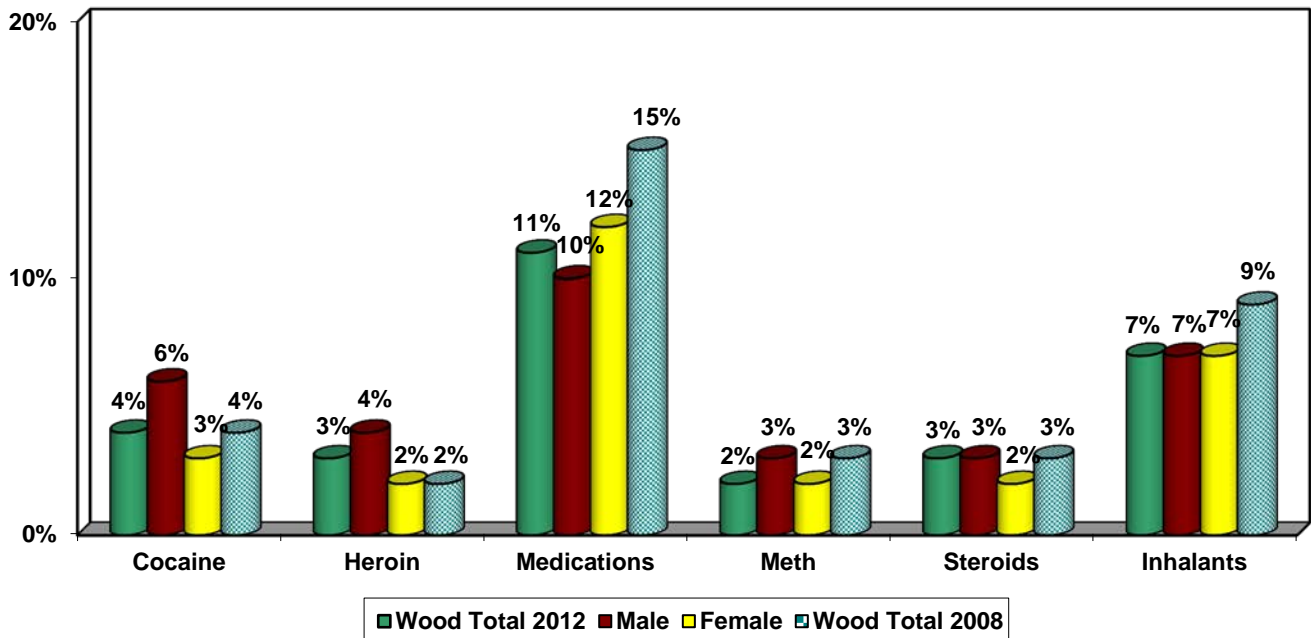


*\*Based on all current drinkers. Binge drinking for youth is defined as having five or more drinks on an occasion.*

## Youth Marijuana and Other Drug Use

In 2012, 12% of Wood County 6<sup>th</sup>-12<sup>th</sup> grade youth had used marijuana at least once in the past 30 days, increasing to 20% of those ages 17 and older. 11% of 6<sup>th</sup>-12<sup>th</sup> grade youth used medications that were not prescribed for them or took more than prescribed to get high, increasing to 18% of those over the age of 17.

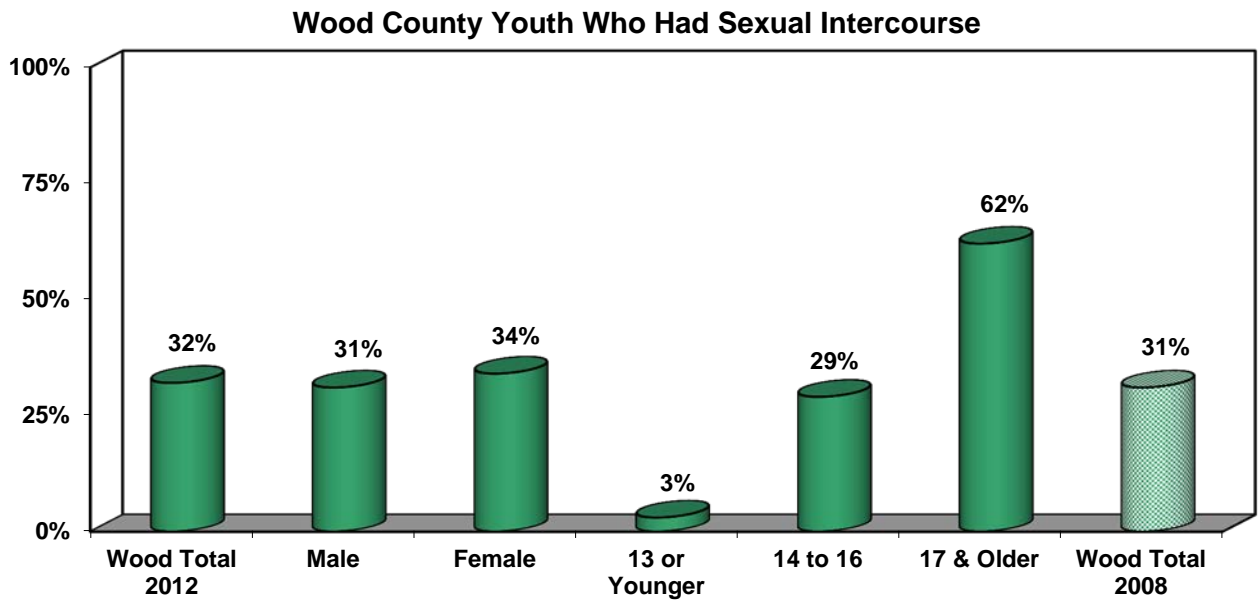
**Wood County Youth Lifetime Drug Use**



## Data Summary

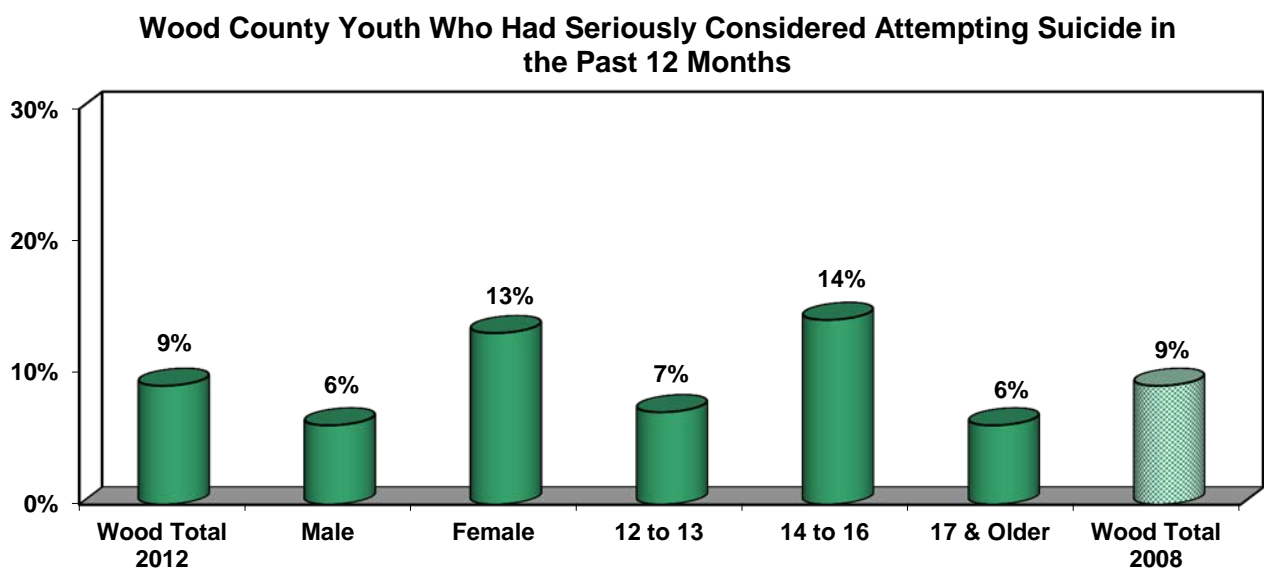
### Youth Sexual Behavior and Pregnancy Outcomes

In 2012, about one-third (32%) of Wood County youth had sexual intercourse, increasing to 62% of those ages 17 and over. 29% of youth had participated in oral sex. 25% of youth participated in sexting. Of those who were sexually active, 55% had multiple sexual partners.



### Youth Mental Health and Suicide

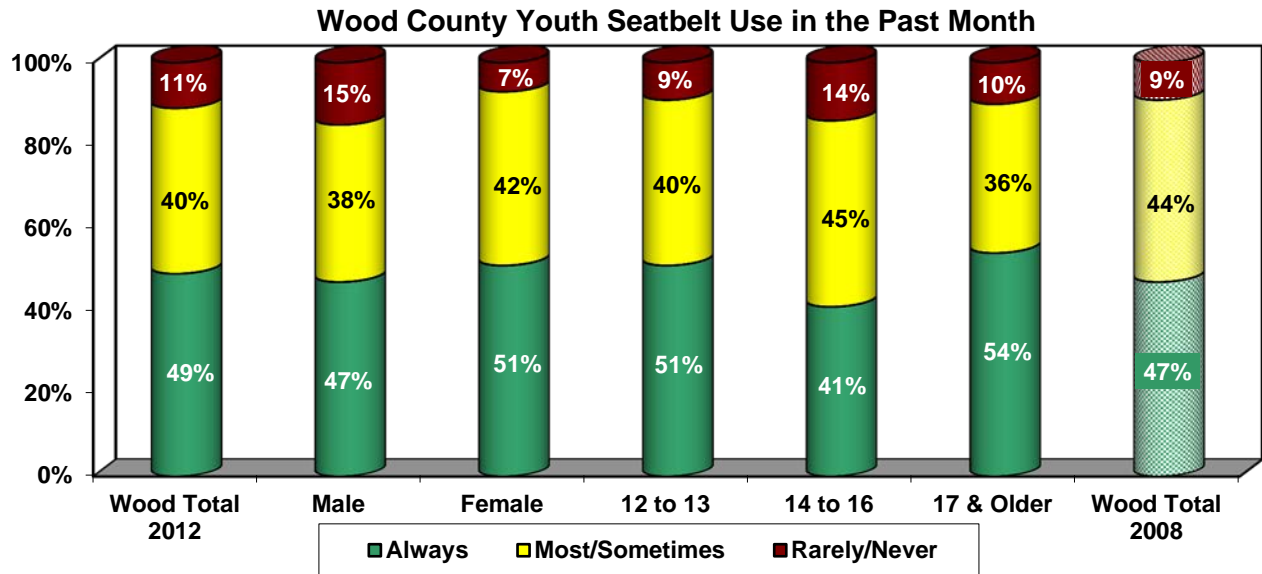
In 2012, the Health Assessment results indicated that 9% of Wood County youth had seriously considered attempting suicide in the past year and 4% admitted actually attempting suicide in the past year.



# Data Summary

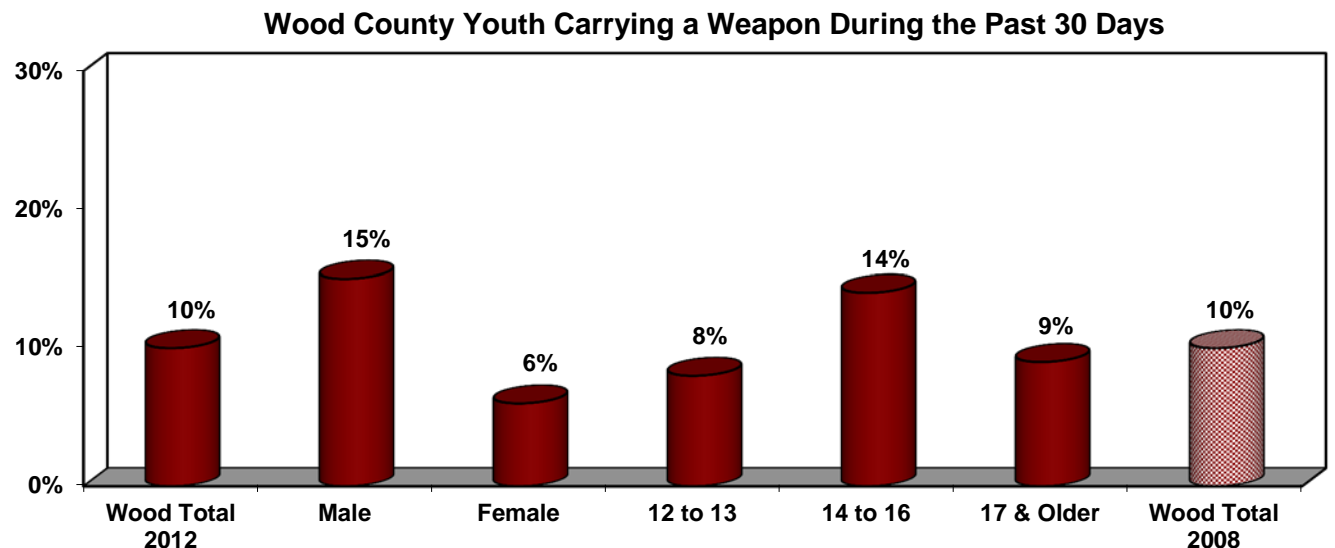
## Youth Safety

In 2012, 49% of Wood County youth self-reported that they always wore a seatbelt when riding in a car driven by someone else. 49% of youth drivers texted while driving.



## Youth Violence

In Wood County, 10% of youth had carried a weapon in the past month. 20% of youth had been in a physical fight in the past year. 20% of youth had purposefully hurt themselves. 42% of youth had been bullied in the past year.



## Data Summary

### **Children's Health and Functional Status**

In 2012, 81% of Wood County parents had taken their child ages 0-11 to the dentist in the past year. 12% of Wood County parents reported their child ages 0-11 had been diagnosed with asthma. 6% of parents reported their child had been diagnosed with ADD/ADHD.

### **Children's Health Insurance, Access and Utilization**

In 2012, 3% of Wood County parents reported their 0-11 year old did not have health insurance. 7% of parents reported they received benefits from the SNAP/food stamp program and 5% from the WIC program. 18% of parents reported they had taken their child to the hospital emergency room in the past year. 87% of parents had taken their child to the doctor for preventive care in the past year.

### **Early Childhood (0-5 Year Olds) Health**

The following information was reported by parents of 0-5 year olds. 90% of mothers got prenatal care within the first three months during their last pregnancy. 3% of mothers smoked during their last pregnancy. 26% of mothers never breastfed their child.

### **Middle Childhood (6-11 Year Olds) Health**

The following information was reported by Wood County parents of 6-11 year olds. In 2012, 41% of parents reported their child was bullied at some time in the past year. 87% of parents reported their child participated in extracurricular activities. 16% of parents reported their child had a MySpace or facebook account. 89% of parents reported their child had exercised for 60 minutes on three or more days in the past week.

### **Family Functioning, Neighborhood and Community Characteristics**

In 2012, Wood County parents reported their 0-11 year old child slept an average of 10.4 hours per night. 20% of parents reported they read to their child every day. 99% of parents reported their neighborhood was always or usually safe.

### **Parent Health**

In 2012, 11% of Wood County parents were uninsured. 33% of parents were overweight and 25% were obese. 10% of parents reported smoking every day.

## Wood County Comparison Summary

Youth Variables	Wood County 2008 (6-12 grade)	Wood County 2008 (9-12 grade)	Wood County 2012 (6-12 grade)	Wood County 2012 (9-12 grade)	Ohio 2011 (9-12 grade)	U.S. 2011 (9-12 grade)
<b>Weight Control</b>						
Obese	16%	16%	13%	16%	15%	13%
Overweight	11%	9%	11%	10%	15%	15%
Described themselves as slightly or very overweight	30%	29%	27%	27%	30%	29%
Trying to lose weight	44%	42%	48%	49%	N/A	N/A
Exercised to lose weight	N/A	N/A	50%	55%	61%*	61%*
Ate less food, fewer calories, or foods lower in fat to lose weight	N/A	N/A	32%	36%	43%*	39%*
Went without eating for 24 hours or more	11%	12%	6%	6%	13%	12%
Took diet pills, powders, or liquids without a doctor's advice	5%	6%	1%	2%	6%	5%
Vomited or took laxatives	3%	4%	1%	1%	6%	4%
Ate 1 to 4 servings of fruits and vegetables per day	N/A	N/A	79%	82%	85%*	78%*
Physically active at least 60 minutes per day on less than 7 days in past week	N/A	N/A	72%	74%	75%	71%
Physically active at least 60 minutes per day on less than 5 days in past week	N/A	N/A	49%	49%	55%	51%
Did not participate in at least 60 minutes of physical activity on any day in past week	N/A	N/A	11%	10%	16%	14%
Watched TV 3 or more hours per day	43%	46%	43%	44%	31%	32%
<b>Unintentional Injuries and Violence</b>						
Always wore a seatbelt	47%	49%	49%	49%	N/A	N/A
Rarely or never wore a seatbelt	9%	10%	11%	12%	17%	8%
Carried a weapon in past month	10%	12%	10%	11%	16%	17%
Involved in a physical fight in past year	28%	28%	20%	17%	31%	33%
Ever been bullied in the past year	46%	45%	42%	40%	N/A	N/A
Ever been electronically/cyber bullied in past year	12%	11%	13%	13%	15%	16%
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year	4%	6%	6%	7%	N/A	9%
Ever forced to have sexual intercourse	5%	7%	3%	3%	9%	8%
Seriously considered suicide in past year	9%	10%	9%	8%	14%	16%
Attempted suicide in past year	4%	5%	4%	4%	9%	8%
Felt sad or hopeless almost every day for 2 or more weeks in a row	21%	22%	20%	22%	27%	29%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (of all youth)	1%	1%	1%	1%	4%	2%

N/A – Not available

\*Comparative YRBSS data for Ohio is 2007 and U.S. is 2009



## Wood County Comparison Summary

Youth Variables	Wood County 2008 (6-12 grade)	Wood County 2008 (9-12 grade)	Wood County 2012 (6-12 grade)	Wood County 2012 (9-12 grade)	Ohio 2011 (9-12 grade)	U.S. 2011 (9-12 grade)
<b>Alcohol Use</b>						
Ever had at least one drink of alcohol in lifetime	61%	74%	48%	64%	71%	71%
Used alcohol during past month	30%	40%	23%	31%	38%	39%
Binged during past month (5 or more drinks in a couple of hours on an occasion)	21%	30%	12%	18%	24%	22%
Drank for the first time before age 13 (of all youth)	24%	22%	18%	15%	18%	21%
Rode with someone who was drinking in past month	18%	20%	17%	17%	21%	24%
Drank and drove	6%	8%	3%	4%	7%	8%
Obtained the alcohol they drank by someone giving it to them	N/A	N/A	41%	36%	N/A	40%
<b>Tobacco Use</b>						
Lifetime cigarette use (ever tried cigarette smoking, even 1 or 2 puffs)	35%	45%	27%	39%	52%	45%
Used cigarettes on one or more days in the past month	15%	22%	11%	16%	21%	18%
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	10%	13%	9%	9%	14%	10%
Smoked cigarettes on 20 or more days during the past month (of all youth)	7%	10%	3%	6%	10%	6%
Tried to quit smoking	39%	40%	50%	46%	56%	50%
<b>Sexual Behavior</b>						
Ever had sexual intercourse	31%	42%	32%	48%	45%*	47%
Had four or more sexual partners	7%	9%	6%	10%	18%	7%
Had sexual intercourse before age 13	4%	5%	4%	3%	6%	6%
Used a condom at last sexual intercourse	74%	76%	76%	77%	60%*	60%
Used birth control pills at last sexual intercourse	28%	29%	41%	44%	23%	18%
Did not use any method to prevent pregnancy during the last sexual intercourse	13%	12%	11%	11%	10%	13%
Drank alcohol or used drugs before last sexual intercourse	20%	21%	18%	20%	19%	22%
<b>Drug Use</b>						
Used marijuana in the past month	12%	18%	12%	16%	24%	23%
Used cocaine in their lifetime	4%	6%	4%	5%	7%	7%
Used heroin in their lifetime	2%	2%	3%	4%	3%	3%
Used methamphetamines in their lifetime	3%	4%	2%	3%	6%*	4%
Used steroids in their lifetime	3%	5%	3%	3%	4%	4%
Used prescription medication in order to get high or feel good	15%	20%	11%	17%	N/A	N/A
Used inhalants in order to get high in their lifetime	11%	11%	7%	7%	12%**	11%
Ever used ecstasy/MDMA	N/A	N/A	4%	4%	N/A	8%
Ever used a needle to inject an illegal drug into their body	1%	2%	2%	2%	3%	2%
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	13%	16%	8%	10%	24%	26%

N/A – Not available

\*2007 YRBS Data, \*\*2005 YRBS Data

## Wood County Comparison Summary

Adult Variables	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
<b>Health Status</b>				
Rated health as excellent or very good	53%	62%	53%	55%
Rated general health as fair or poor	11%	9%	16%	15%
Rated their mental health as not good on four or more days	23%	29%	N/A	N/A
Average days that physical health not good in past month	N/A	3.0	3.9	3.7
Average days that mental health not good in past month	N/A	3.8	3.9	3.5
Average days that poor physical or mental health kept them from doing their usual activities in past month	N/A	2.6	2.3	2.4
<b>Health Care Access/Coverage</b>				
Has health care coverage	92%	85%	87%	85%
Had one particular doctor they went to for health care	78%	70%	N/A	N/A
<b>Arthritis, Asthma, &amp; Diabetes</b>				
Has been diagnosed with arthritis	33%	27%	31%*	26%*
Has been diagnosed with asthma	17%	13%	14%	14%
Has been diagnosed with diabetes	7%	8%	11%	10%
<b>Cardiovascular Health</b>				
Has been diagnosed with high blood pressure	35%	30%	32%*	29%*
Has been diagnosed with high blood cholesterol	31%	31%	40%*	38%*
Had blood cholesterol checked within the past 5 years	N/A	69%	78%*	77%*
<b>Weight Status</b>				
Overweight	40%	36%	36%	36%
Obese	30%	30%	30%	28%
<b>Alcohol Consumption</b>				
Had at least one alcoholic beverage in past month	63%	59%	53%	55%
Binged in past month (drank 5 or more drinks for males and 4 or more for females on an occasion)	21%	24%	17%	15%
<b>Tobacco Use</b>				
Current smoker (currently smoke some or all days)	23%	11%	23%	17%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	33%	23%	25%	25%
<b>Marijuana &amp; Drug Use</b>				
Adults who used marijuana in the past 6 months	5%	6%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	6%	10%	N/A	N/A

*N/A – Not available*

*\*2009 BRFSS Data*

## Wood County Comparison Summary

Adult Variables	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
<b>Preventive Health</b>				
Had a flu shot in the past year (age 50 & over)	N/A	46%	52%	55%
Had a pneumonia vaccine in lifetime (age 65 & over)	57%	64%	69%	69%
Had a clinical breast exam in the past two years (age 40 & over)	70%	91%	75%	77%
Had a mammogram in the past two years (age 40 & over)	67%	82%	74%	76%
Had a pap smear in the past three years	75%	79%	82%	81%
Had a PSA test within the past two years (age 40 & over)	N/A	60%	54%	53%
Had a digital rectal exam within the past year	21%	31%	N/A	N/A
<b>Mental Health</b>				
Two or more weeks in a row when felt sad or hopeless	11%	12%	N/A	N/A
Considered attempting suicide in the past year	10%	2%	N/A	N/A
<b>Oral Health</b>				
Adults who have visited the dentist in the past year	64%	74%	72%	70%

*N/A – Not available*  
*\*2009 BRFSS Data*

## Wood County Comparison Summary

Child Comparisons	Wood County 2012 Ages 0-5	Ohio 2007 Ages 0-5	U.S. 2007 Ages 0-5	Wood County 2012 Ages 6-11	Ohio 2007 Ages 6-11	U.S. 2007 Ages 6-11
<b>Health and Functional Status</b>						
Rated health as excellent or very good	93%	91%	87%	92%	84%	84%
Diagnosed with asthma	7%	8%	9%	16%	21%	16%
Diagnosed with ADHD/ADD	1%	2%	1%	8%	9%	9%
Diagnosed with behavioral or conduct problems	2%	N/A	1%	3%	N/A	5%
Diagnosed with developmental delay or physical impairment	6%	2%	3%	4%	8%	6%
Diagnosed with anxiety problems	1%	N/A	1%	5%	N/A	3%
Diagnosed with hearing problems	2%	2%	2%	3%	4%	3%
<b>Health Insurance, Access and Utilization</b>						
Child was not covered by insurance at some time in the past year	2%	12%	15%	3%	11%	16%
Had public insurance	13%	32%	35%	9%	26%	28%
Been to doctor for preventive care	94%	96%	96%	83%	87%	85%
Dental care visit in past year	61%	51%	54%	94%	92%	90%
2 or more visits to the ER	7%	8%*	8%*	4%	6%*	4%*
Received all the medical care they needed	96%	99%*	99%*	95%	98%*	98%*
Have a personal doctor or nurse	85%	95%	94%	87%	95%	92%
<b>Family Functioning &amp; Neighborhood Characteristics</b>						
Family eat a meal together every day of the week	50%	55%	58%	33%	40%	47%
Neighborhood always/usually safe	99%	88%	85%	98%	84%	86%

N/A – Not available

\* 2003 national and state data

# Health Status Perceptions

## Key Findings

In 2012, more than three-fifths (62%) of the Wood County adults rated their health status as excellent or very good. Conversely, 9% of the adults, increasing to 31% of those with lower household incomes, described their health as fair or poor.

## General Health Status

- ◆ In 2012, more than three-fifths (62%) of Wood County adults rated their health as excellent or very good. Wood County adults with higher incomes (65%) were most likely to rate their health as excellent or very good, compared to 50% of those with incomes less than \$25,000.
- ◆ 9% of adults rated their health as fair or poor. The 2010 BRFSS has identified that 16% of Ohio and 15% of U.S. adults self-reported their health as fair or poor.
- ◆ Wood County adults were most likely to rate their health as fair or poor if they:
  - Were separated (40%)
  - Had an annual household income under \$25,000 (31%)
  - Had diabetes (29%)
  - Had high blood cholesterol (26%)
  - Were 65 years of age or older (22%)

### Adults Who Rated General Health Status Excellent or Very Good

- ◆ Wood County 62% (2012)
- ◆ Ohio 53% (2010)
- ◆ U.S. 55% (2010)

*(Source: 2010 BRFSS for Ohio and U.S. and 2012 Wood County Health Assessment)*

## Physical Health Status

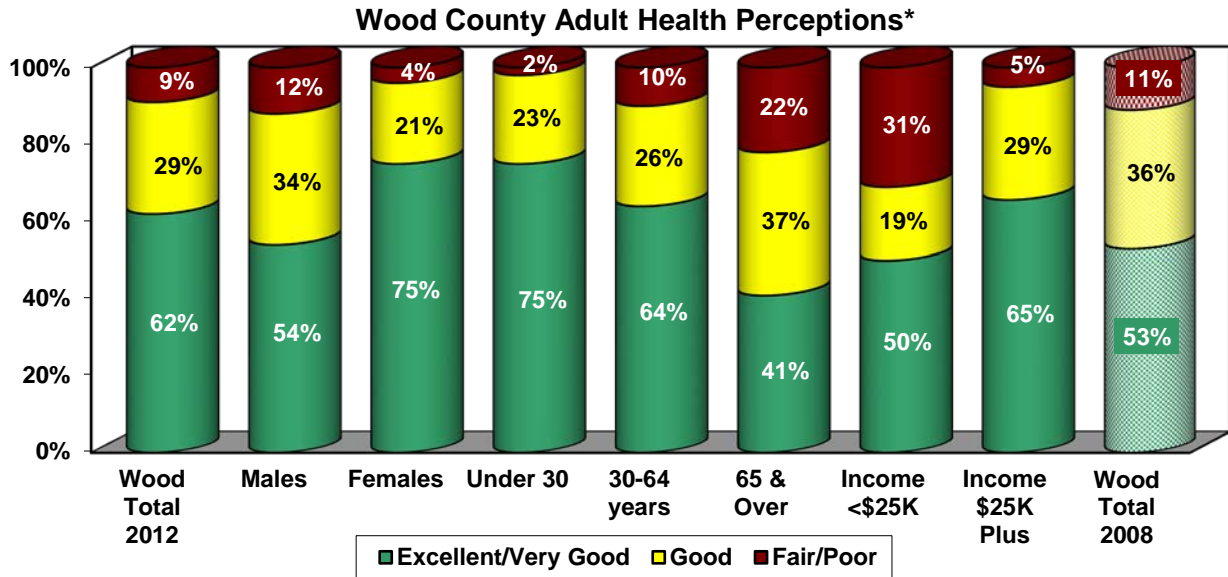
- ◆ In 2012, 17% of Wood County adults rated their physical health as not good on four days or more in the previous month.
- ◆ Wood County adults reported their physical health as not good on an average of 3.0 days in the previous month.
- ◆ Ohio and U.S. adults reported their physical health as not good on an average of 3.9 days and 3.7 days, respectively in the previous month *(Source: 2010 BRFSS)*.
- ◆ Wood County adults were most likely to rate their physical health as not good if they:
  - Had an annual household income under \$25,000 (28%)
  - Were ages 30-64 (24%)
  - Were female (21%)

## Mental Health Status

- ◆ In 2012, 29% of Wood County adults rated their mental health as not good on four days or more in the previous month.
- ◆ Wood County adults reported their mental health as not good on an average of 3.8 days in the previous month.
- ◆ Ohio and U.S. adults reported their mental health as not good on an average of 3.9 days and 3.5 days, respectively in the previous month *(Source: 2010 BRFSS)*.
- ◆ Wood County adults were most likely to rate their mental health as not good if they:
  - Were female (35%)
  - Were ages 30-64 (31%)
- ◆ Wood County adults reported that poor physical or mental health kept them from doing their usual activities on an average of 2.6 days in the previous month.
- ◆ Ohio and U.S. adults reported that poor physical or mental health kept them from doing their usual activities on an average of 2.4 days and 2.3 days, respectively in the previous month *(Source: 2010 BRFSS)*.

## Health Status Perceptions

The following graph shows the percentage of Wood County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 62% of all Wood County adults, 75% of those under age 30, and 41% of those ages 65 and older rated their health as excellent or very good. The table shows the percentage of adults with poor physical and mental health in the past 30 days.



\*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
<b>Physical Health Not Good in Past 30 Days*</b>					
Males	67%	15%	4%	1%	10%
Females	59%	16%	10%	5%	7%
Total	64%	16%	6%	2%	9%
<b>Mental Health Not Good in Past 30 Days*</b>					
Males	68%	5%	8%	4%	13%
Females	53%	7%	15%	2%	17%
Total	62%	6%	11%	3%	15%

\*Totals may not equal 100% as some respondents answered "Don't know/Not sure".

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Rated health as excellent or very good	53%	62%	53%	55%
Rated health as fair or poor	11%	9%	16%	15%
Rated their mental health as not good on four or more days	23%	29%	N/A	N/A
Average days that physical health not good in past month	N/A	3.0	3.9	3.7
Average days that mental health not good in past month	N/A	3.8	3.9	3.5
Average days that poor physical or mental health kept them from doing their usual activities in past month	N/A	2.6	2.3	2.4

N/A – Not available

# Health Care Coverage

## Key Findings

The 2012 Health Assessment data has identified that 15% of Wood County adults were without health care coverage. Those most likely to be uninsured were adults under age 30 and those with an income level under \$25,000. In Wood County, 12.2% of residents live below the poverty level. (Source U.S. Census, American Community Survey 5 Year Estimates, 2006-2010)

## General Health Coverage

- ◆ In 2012, most (85%) Wood County adults had health care coverage, leaving 15% who were uninsured. The 2010 BRFSS reports uninsured prevalence rates for Ohio (13%) and the U.S. (15%).
- ◆ In the past year 15% of adults were uninsured, increasing to 24% of those under the age of 30, and 26% of those with incomes less than \$25,000.
- ◆ 18% of adults with children did not have healthcare coverage, compared to 19% of those who did not have children living in their household.
- ◆ The following types of health care coverage were used: employer (44%), someone else's employer (27%), Medicare (9%), self-paid plan (7%), multiple-including private sources (7%), Medicaid or medical assistance (3%), military, CHAMPUS, TriCare, or VA (<1%), and other (2%).
- ◆ Wood County adult health care coverage included the following: medical (99%), prescription coverage (94%), dental (80%), their spouse (75%), preventive care (73%), vision (67%), immunizations (67%), their children (67%), mental health (65%), alcohol and drug treatment (43%), home care (24%), skilled nursing (23%), and hospice (20%).
- ◆ Wood County adults reported the following issues regarding their health care coverage: deductibles too high (28%), premiums too high (19%), co-pays too high (17%), opted out of certain coverage because they could not afford it (9%), high HSA account deductibles (6%), opted out of certain coverage because they did not need it (5%), could not understand their insurance plan (3%), and working with their insurance company (3%).

### Wood County and Ohio Medicaid Statistics

	Residents Enrolled in Medicaid	Annual Medicaid Expenditures*
<b>Wood County SFY 2009</b>	16,694	\$82,038,266
<b>State of Ohio SFY 2009</b>	2,407,572	\$13,162,469,167
<b>Wood County SFY 2008</b>	10,309	\$72,035,227
<b>State of Ohio SFY 2008</b>	1,789,934	\$11,962,683,659

\*Payments made directly to providers as well as capitation payments to HMOs  
(Source: Ohio Job & Family Services, Wood County 2008 & 2009 Profiles,  
<http://jfs.ohio.gov/County/cntypro/pd/08/Wood.pdf> &  
<http://jfs.ohio.gov/County/cntypro/Wood.pdf>)

### 2010 Wood County Health Care Statistics

- ◆ In 2010, 57.4% of all Wood County residents, ages 0-18 were enrolled in Medicaid.
- ◆ 35.1% of Wood County residents, ages 19-64 were enrolled in Medicaid during the same year.
- ◆ 7.6% of Wood County residents, ages 65 and over were enrolled in Medicaid during the same year.

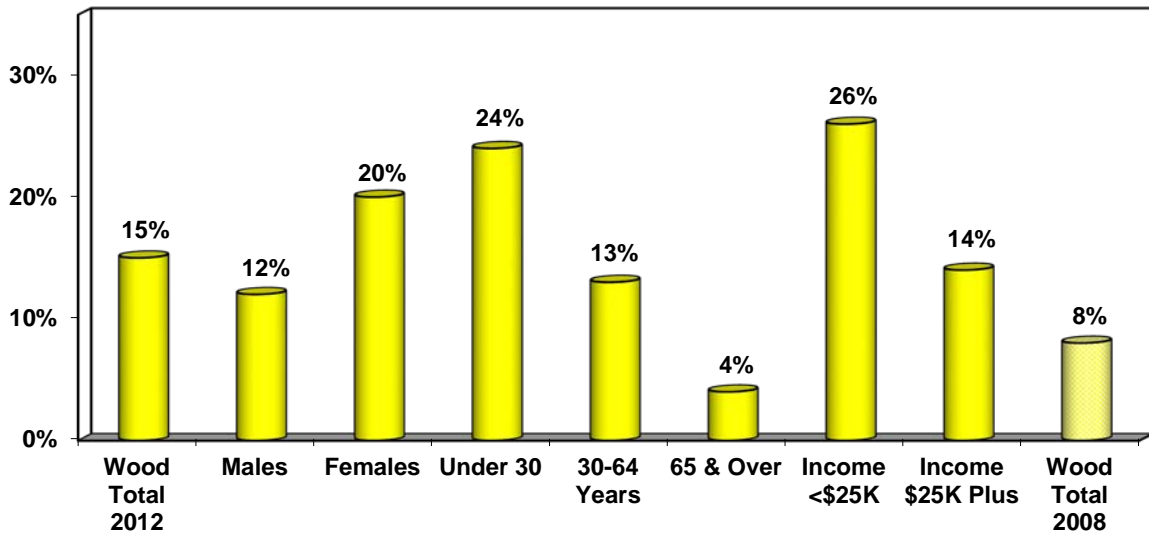
(Source: Job and Family Services- Wood County Job and Family Services Profile: <http://jfs.ohio.gov/County/cntypro/Wood.pdf>)

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Uninsured	8%	15%	13%	15%

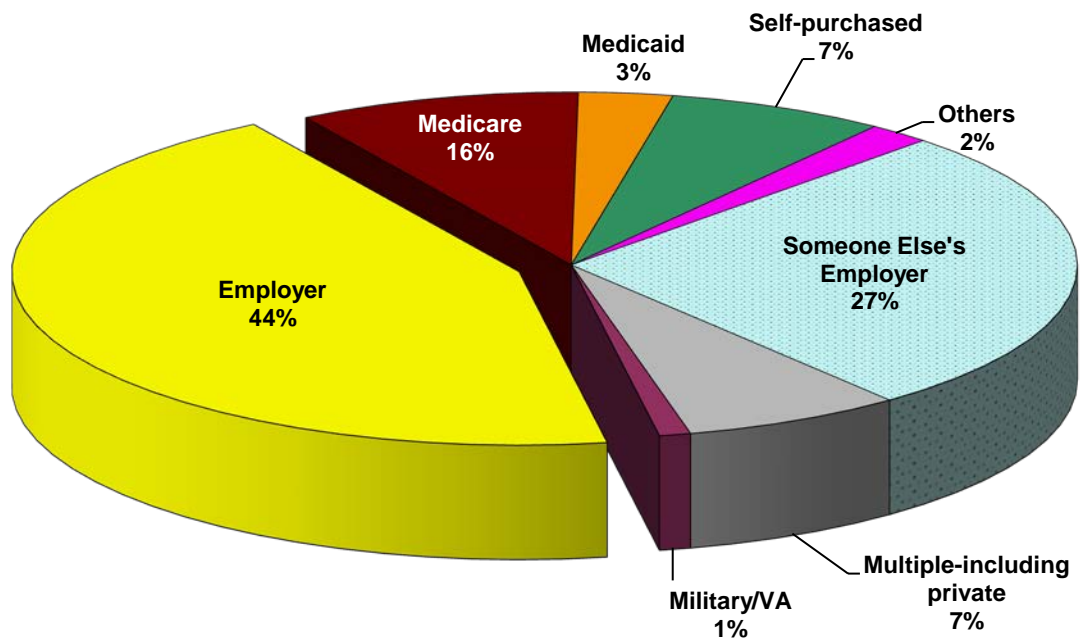
# Health Care Coverage

The following graph shows the percentages of Wood County adults who were uninsured by demographic characteristics. Examples of how to interpret the information in the first graph include: 15% of all Wood County adults were uninsured, 26% of adults with an income less than \$25,000 reported being uninsured and 24% of those under age 30 lacked health care coverage. The pie chart shows sources of Wood County adults' health care coverage

**Uninsured Wood County Adults**



**Source of Health Coverage for Wood County Adults**





## Health Care Coverage

The following chart shows what is included in Wood County adults' insurance coverage.

Health Coverage Includes:	Yes	No	Don't Know
Medical	99%	<1%	<1%
Dental	80%	18%	2%
Vision	67%	28%	5%
Mental Health	65%	6%	29%
Prescription Coverage	94%	3%	3%
Home Care	24%	17%	59%
Skilled Nursing	23%	15%	62%
Hospice	20%	12%	68%
Your Spouse	75%	17%	7%
Your Children	67%	27%	6%
Preventive Health	73%	2%	25%
Immunizations	67%	10%	23%
Alcohol and Drug Treatment	43%	6%	51%

### Healthy People 2020 Access to Quality Health Services

Objective	Wood County 2012	Ohio 2010	U.S. 2010	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health care insurance	76% age 20-24	69% age 18-24	74% age 18-24	100%
	77% age 25-34	85% age 25-34	80% age 25-34	
	82% age 35-44	87% age 35-44	85% age 35-44	
	86% age 45-54	87% age 45-54	87% age 45-54	
	92% age 55-64	98% age 55-64	89% age 55-64	

*\*U.S. baseline is age-adjusted to the 2000 population standard*

*(Sources: Health People 2020 Objectives, BRFSS, ODH Information Warehouse, 1-7-10, 2012 Wood County Health Assessment)*

#### 2010 Ohio Family Health Survey Results

- ❖ In Ohio, 19% of adults 18-64 years old and 5% of children were uninsured in 2010, compared respectively to 17% and 4% in 2008.
- ❖ In 2008, 13% of Wood County adults 18-64 years old and 3% of Wood County children were described as being uninsured in the report.
- ❖ In 2010, uninsured children had an 11.7 times higher rate of **not** having a usual source of care than insured children. Uninsured children had an almost 3 times higher rate of **not** having a usual source of coverage than uninsured adults.
- ❖ Among working age adults in Ohio, uninsured rates increased for all race and ethnic categories from the 2003/2004 OFHS through the 2010 OFHS. The largest uninsured rate increase since 2003/04 OFHS was for working age Latinos and Asian Americans (6.2 percent increase).
- ❖ In Ohio, uninsured individuals reported greater issues with access to care, unmet needs, and paying for care than the insured.

*(Source: (Source: 2008 and 2010 Ohio Family Health Survey Results, 03-08-2011)*

# Health Care Access and Utilization

## Key Findings

*The 2012 Health Assessment project identified that 51% of adults visited a doctor for a routine checkup in the past year. 31% of adults visited an emergency room in the past year, increasing to 36% of those with lower household incomes. 76% of adults went outside Wood County for health care services in the past year.*

## Health Care Access

- ◆ More than half (51%) of Wood County adults visited a doctor for a routine checkup in the past year, increasing to 64% of those over the age of 65.
- ◆ 50% of adults have seen a physician assistant or nurse practitioner for their health care needs in the past year. Of those who saw a physician assistant or nurse practitioner, 98% reported a positive experience and 2% reported a negative experience.
- ◆ More than two-thirds (70%) of Wood County adults reported they had one particular doctor or healthcare professional they go to for routine medical care, decreasing to 63% of those with incomes less than \$25,000. 19% of adults had more than one particular doctor or healthcare professional they go to for routine medical care, and 10% did not have one at all.
- ◆ 31% of Wood County adults visited a hospital emergency room in the past year, increasing to 36% of those with incomes less than \$25,000, and 39% of those over the age of 65.
- ◆ Reasons for not having a usual source of medical care included: no insurance/could not afford care (39%), had not needed a doctor (29%), two or more usual places (13%), did not like/trust/believe doctors (8%), previous doctor unavailable/moved (2%), did not know where to go (2%), and other reasons (4%).
- ◆ Wood County adults reported the following reasons for not receiving medical care: cost/no insurance (26%), office was not open when they could get there (8%), too long to wait for an appointment (1%), too long to wait in waiting room (1%), and other reasons (25%).
- ◆ 11% of Wood County adults changed doctors within the past year. 44% last changed doctors 5 or more years ago, and 16% have never changed doctors.
- ◆ Wood County adults gave the following reasons why they changed doctors the last time: provider moved or retired (20%), dissatisfied with former provider or liked new provider better (16%), changed residence or moved (14%), changed health care coverage (11%), medical care needs changed (4%), changed jobs (3%), former provider no longer reimbursed by their health care coverage (1%), owed money to former provider (<1%), and other reasons (12%).
- ◆ Wood County adults had the following problems when they needed health care in the past year: did not have enough money to pay for health care or insurance (12%), could not get appointments when they wanted them (9%), too busy to get the healthcare they needed (7%), too embarrassed to seek help (3%), could not find a doctor to take them as a patient (2%), could not find a doctor they were comfortable with (2%), did not have transportation (1%), were concerned about their confidentiality (<1%), and other problems that prevented them from getting health care (<1%).
- ◆ 76% of adults went outside of Wood County for the following health care services in the past year: specialty care (37%), primary care (27%), dental services (23%), obstetrics/gynecology/NICU (17%), mental health care (8%), cardiac care (7%), orthopedic care (5%), pediatric care (3%), cancer care (2%), and other services (7%).

## Predictors of Access to Health Care

Adults are more likely to have access to medical care if they:

- ◆ Earn a higher income
- ◆ Have a regular primary care provider
- ◆ Have health insurance
- ◆ Utilize preventive services in a clinic setting
- ◆ Have a college education
- ◆ Work for a large company

*(Source: Healthy People 2020 and CDC)*

## Health Care Access and Utilization

- ◆ Wood County adults did not receive the following major care or preventive care due to cost: medications (11%), pap smear (9%), colonoscopy (8%), mammogram (8%), surgery (6%), PSA test (5%), weight-loss program (4%), and smoking cessation (<1%).
- ◆ During the past year, Wood County adults did not get a prescription from their doctor filled because: they did not think they needed it (6%), they could not afford to pay the out-of-pocket expenses (5%), their co-pays were too high (3%), there was no generic equivalent of what was prescribed (2%), their deductibles were too high (2%), they had a high health savings account (HSA) deductible (2%), their premiums were too high (2%), they stretched their prescription by taking less than prescribed (1%), they opted out of prescription coverage because they could not afford it (1%), they were taking too many medications (1%), and they had no insurance (<1%). 85% of adults reported having all of their prescriptions filled.
- ◆ Wood County adults had the following transportation problems when they needed health care: could not afford gas (3%), no car (2%), no driver's license (2%), disabled (1%), no car insurance (<1%), and other car issues/expenses (2%).

### Availability of Services

- ◆ When Wood County adults were asked what programs they have looked for, for themselves or a loved one, demand was highest for the following programs: depression, anxiety, or mental health problems (26%), weight problems (10%), marital or family problems (10%), end-of-life/hospice care (9%), alcohol abuse (4%), and drug abuse (3%).
- ◆ 7% of Wood County adults have looked for a program to assist in care for the elderly (either in-home or out-of-home) for either themselves or a loved one. Of those who looked, 28% looked for in-home care, 12% looked for out-of-home placement, 8% looked for an assisted living program, 8% looked for adult day care, and 8% looked for respite or overnight care. 36% of adults looked for multiple alternatives.

### Wood County Adults Able to Access Assistance Programs/Services

Types of Programs (% of all adults who looked for the programs)	Wood County adults who have looked but have <u>NOT</u> found a specific program	Wood County adults who have looked and have found a specific program
<b>Depression, Anxiety or Mental Health Problem</b> (26% of all adults looked)	11%	89%
<b>Alcohol Abuse</b> (4% of all adults looked)	7%	93%
<b>Drug Abuse</b> (3% of all adults looked)	10%	90%
<b>Weight Problem</b> (10% of adults looked)	43%	57%
<b>Marital or Family Problems</b> (10% of adults looked)	18%	82%
<b>End-of-Life or Hospice Care</b> (9% of adults looked)	13%	87%

# Health Care Access and Utilization

## Healthy People 2020 Access to Quality Health Services

Objective	Wood County 2012	Healthy People 2020 Target
AHS-3: Increase the proportion of persons with a usual primary care provider	70%	84%

*\*U.S. baseline is age-adjusted to the 2000 population standard  
(Sources: Health People 2020 Objectives, 2012 Wood County Health Assessment)*

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Had one particular place they went to for health care	78%	70%	N/A	N/A

*N/A= Not Asked*

# Cardiovascular Health

## Key Findings

Heart disease (30%) and stroke (6%) accounted for 36% of all Wood County adult deaths from 2006-2008 (Source: ODH Information Warehouse). The 2012 Wood County Health Assessment found that nearly one-third (30%) of Wood County adults had been diagnosed with high blood pressure, 31% had high blood cholesterol, 30% were obese, and 11% were smokers, four known risk factors for heart disease and stroke.

## High Blood Pressure (Hypertension)

- ◆ Nearly one-third (30%) of Wood County adults had been diagnosed with high blood pressure. The 2009 BRFSS reports hypertension prevalence rates of 32% for Ohio and 29% for the U.S.
- ◆ 81% of those diagnosed with high blood pressure were taking medications for it.
- ◆ 85% of adults had their blood pressure checked within the past year.
- ◆ Wood County adults diagnosed with high blood pressure were more likely to:
  - Be age 65 years or older (75%)
  - Be classified as obese by Body Mass Index-BMI (47%)
  - Be males (36%)

## High Blood Cholesterol

- ◆ Nearly one-third (31%) of adults had been diagnosed with high blood cholesterol. The 2009 BRFSS reported that 40% of Ohio adults and 38% of U.S. adults have been told they have high blood cholesterol.
- ◆ Over two-thirds (69%) of adults had their blood cholesterol checked within the past 5 years. The 2009 BRFSS reported 78% of Ohio adults and 77% of U.S. adults had theirs checked within the past 5 years.
- ◆ Wood County adults with high blood cholesterol were more likely to:
  - Be age 65 years or older (54%)
  - Be classified as obese by Body Mass Index-BMI (38%)

## Heart Disease and Stroke

- ◆ 4% of Ohio and U.S. adults reported they had a heart attack or myocardial infarction in 2010 (Source: 2010 BRFSS).
- ◆ 3% of Ohio and U.S. adults reported having had a stroke in 2010 (Source: 2010 BRFSS).
- ◆ 4% of Ohio and U.S. adults reported having had angina or coronary heart disease in 2010 (Source: 2010 BRFSS).

### Wood County Leading Types of Death 2006-2008

**Total Deaths: 2,869**

1. Heart Disease (30% of all deaths)
2. Cancers (23%)
3. Stroke (6%)
4. Chronic Lower Respiratory Diseases (5%)
5. Accidents and Unintentional Injuries (5%)

*(Source: ODH Information Warehouse, updated 4-15-10)*

### Ohio Leading Types of Death 2006-2008

**Total Deaths: 322,264**

1. Heart Disease (25% of all deaths)
2. Cancers (23%)
3. Chronic Lower Respiratory Diseases (6%)
4. Stroke (5%)
5. Accidents, Unintentional Injuries (5%)

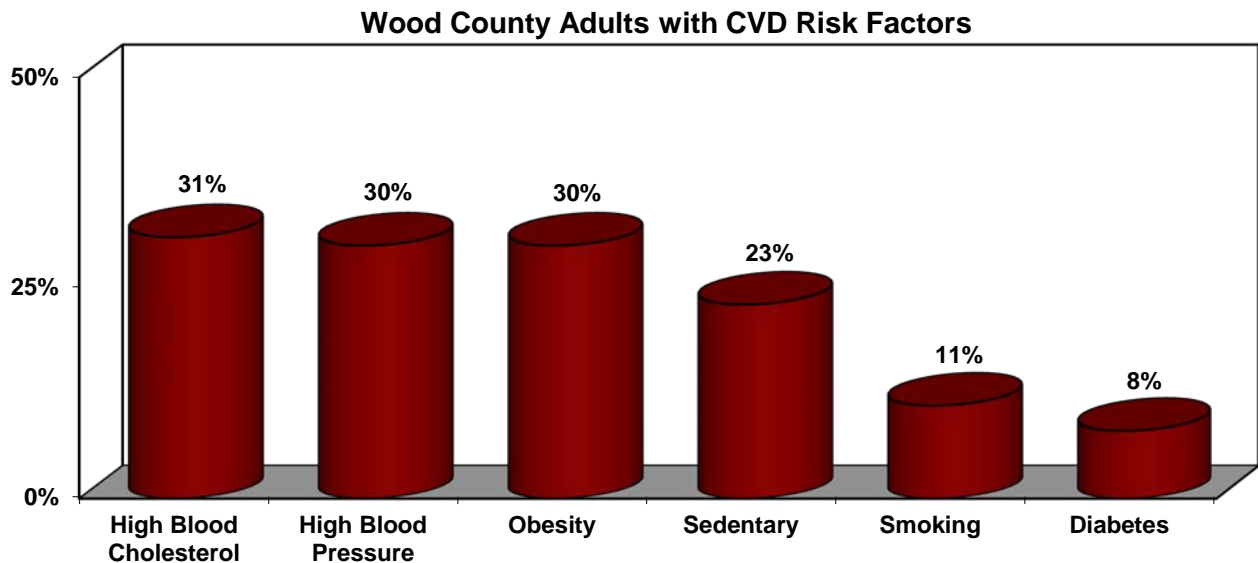
*(Source: ODH Information Warehouse, updated 4-15-10)*

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Had high blood pressure	35%	30%	32%*	29%*
Had high blood cholesterol	31%	31%	40%*	38%*
Had blood cholesterol checked within the past 5 years	69%	69%	78%*	77%*

*\*2009 BRFSS Data*

## Cardiovascular Health

The following graph demonstrates the percentage of Wood County adults who had major risk factors for developing cardiovascular disease (CVD). (Source: 2012 Wood County Health Assessment)



### Risk Factors for Cardiovascular Disease That Can Be Modified or Treated:

**Cholesterol** – As blood cholesterol rises, so does risk of coronary heart disease. When other risk factors (such as high blood pressure and tobacco smoke) are present, this risk increases even more. A person's cholesterol level is also affected by age, sex, heredity and diet.

**High Blood Pressure** – High blood pressure increases the heart's workload, causing the heart to thicken and become stiffer and causes the heart not to work properly. It also increases your risk of stroke, heart attack, kidney failure and congestive heart failure. When high blood pressure exists with obesity, smoking, high blood cholesterol levels or diabetes, the risk of heart attack or stroke increases several times.

**Obesity and Overweight** – People who have excess body fat — especially at the waist — are more likely to develop heart disease and stroke even if they have no other risk factors. Excess weight increases the heart's work. It also raises blood pressure and blood cholesterol and triglyceride levels, and lowers HDL ("good") cholesterol levels. Many obese and overweight people may have difficulty losing weight. But by losing even as few as 10 pounds, you can lower your heart disease risk.

**Smoking** – Smokers' risk of developing coronary heart disease is 2-4 times that of nonsmokers. People who smoke a pack of cigarettes a day have more than twice the risk of heart attack than people who have never smoked. People who smoke cigars or pipes seem to have a higher risk of death from coronary heart disease (and possibly stroke) but their risk is not as great as cigarette smokers. Exposure to other people's smoke increases the risk of heart disease even for nonsmokers.

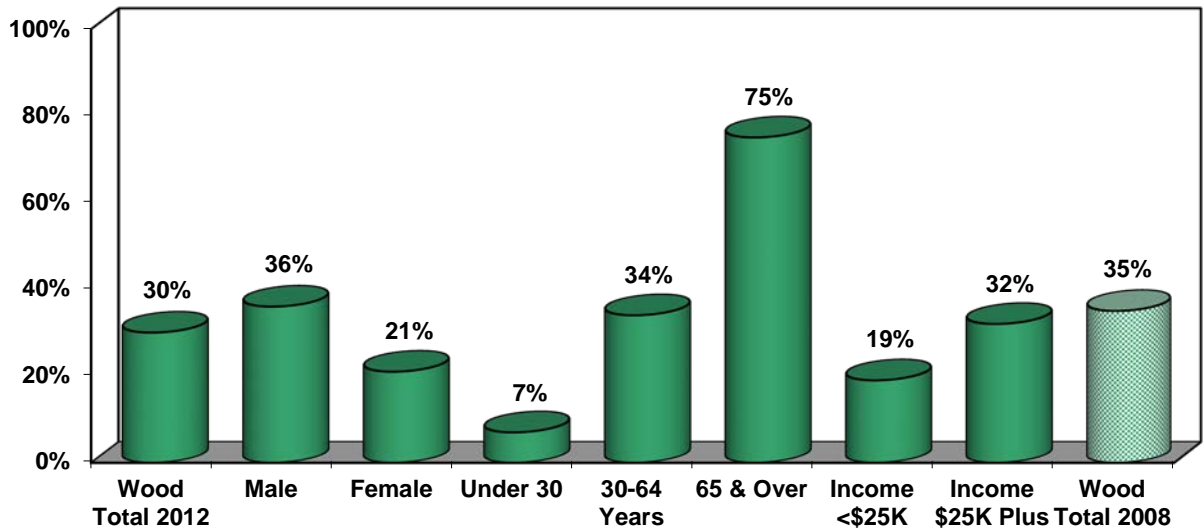
**Physical Inactivity** – An inactive lifestyle is a risk factor for coronary heart disease. Regular, moderate-to-vigorous physical activity helps prevent heart and blood vessel disease. However, even moderate-intensity activities help if done regularly and long term. Physical activity can help control blood cholesterol, diabetes and obesity, as well as help lower blood pressure in some people.

**Diabetes Mellitus** – Diabetes seriously increases your risk of developing cardiovascular disease. Even when glucose levels are under control, diabetes increases the risk of heart disease and stroke, but the risks are even greater if blood sugar is not well controlled. At least 65% of people with diabetes die of some form of heart or blood vessel disease. (Source: American Heart Association, Risk Factors for Coronary Heart Disease, 6-20-11)

## Cardiovascular Health

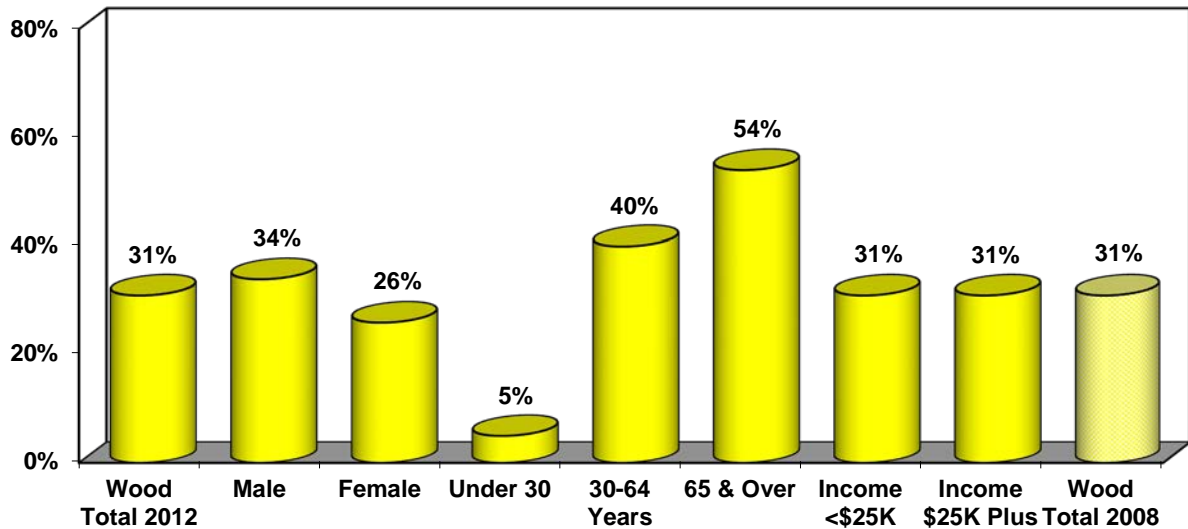
The following graphs show the number of Wood County adults who have been diagnosed with high blood pressure or high blood cholesterol. Examples of how to interpret the information on the first graph include: 30% of all Wood County adults have been diagnosed with high blood pressure, 36% of all Wood County males, 21% of all females, and 75% of those 65 years and older.

**Diagnosed with High Blood Pressure\***



*\*Does not include respondents who indicated high blood pressure during pregnancy only.*

**Diagnosed with High Blood Cholesterol**

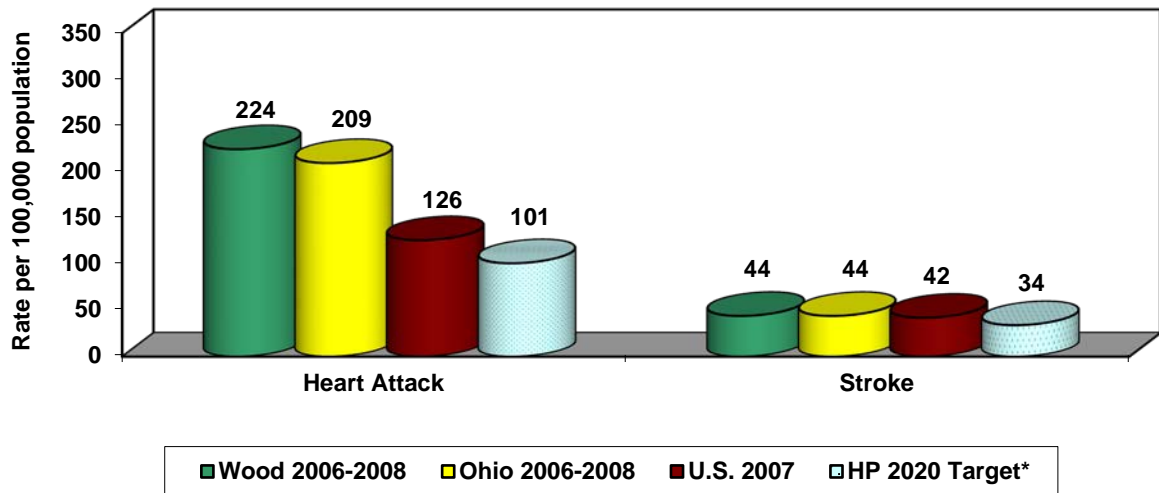


# Cardiovascular Health

The following graphs show the Wood County and Ohio age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender and race/ethnicity.

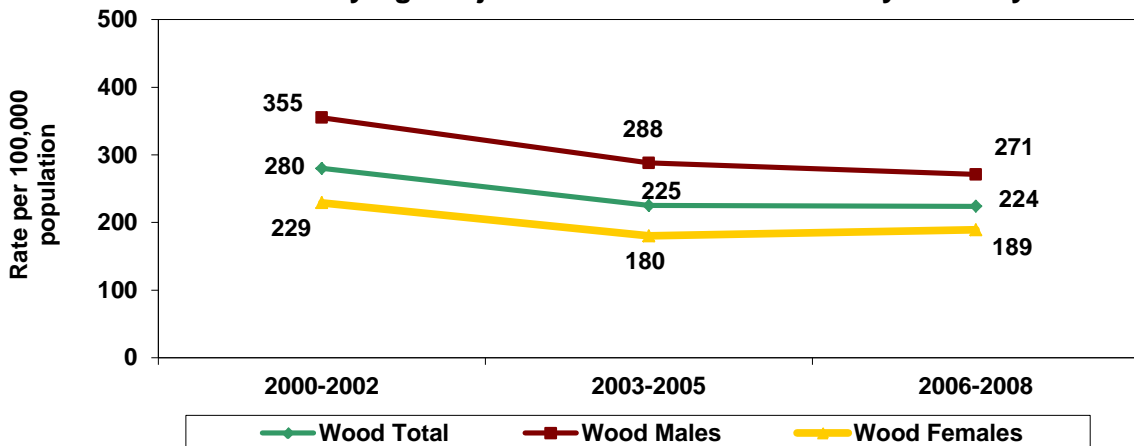
- ◆ When age differences are accounted for, the statistics indicate that from 2006-2008 the Wood County heart disease mortality rate was higher than the figure for the state, the U.S. figure and the Healthy People 2020 target.
- ◆ The Wood County age-adjusted stroke mortality rate for 2006-2008 was the same as the state, but greater than the U.S. figure and Healthy People 2020 target objective.
- ◆ Disparities exist for heart disease mortality rates by gender in Wood County.

**Age-Adjusted Heart Disease and Stroke Mortality Rates**



*\*The Healthy People 2020 Target objective for Coronary Heart Disease is reported for heart attack mortality.  
(Source: ODH Information Warehouse, updated 4-15-10, Healthy People 2020)*

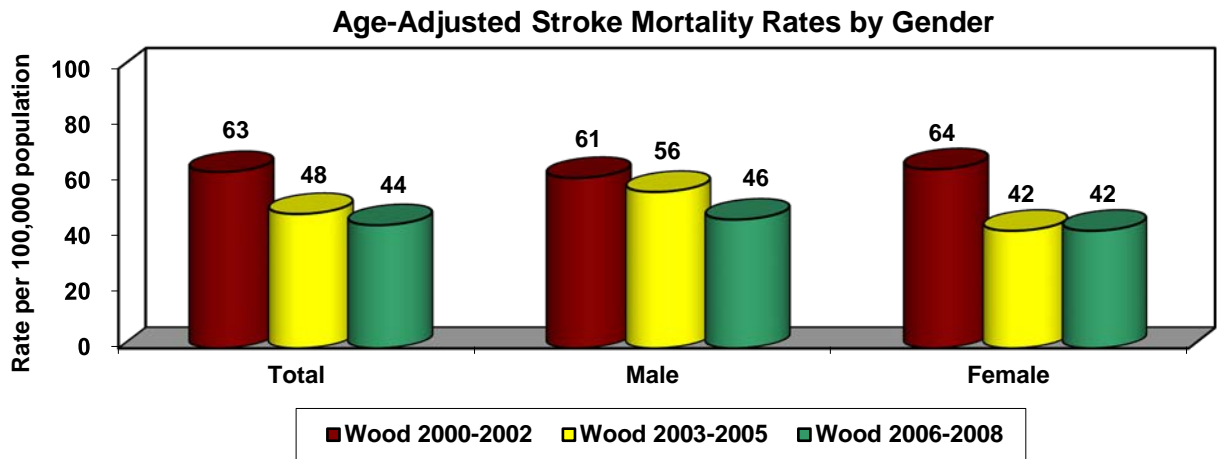
**Wood County Age-Adjusted Heart Disease Mortality Rates by Gender**



*(Source: ODH Information Warehouse, updated 4-15-10)*



# Cardiovascular Health



## Healthy People 2020 Objectives High Blood Pressure

Objective	Wood County 2012	U.S. Baseline*	Healthy People 2020 Target
HDS-4: Increase the portion of adults who have had their blood pressure measured within the preceding 2 years and can state whether it was normal or high	92%	91% Adults age 18 and up (2008)	93%
HDS-5: Reduce proportion of adults with hypertension	30%	29% Adults age 18 and up (2009)	27%

\*All U.S. figures age-adjusted to 2000 population standard.  
(Source: 2009 BRFSS, Healthy People 2020, 2012 Wood County Assessment)

## Blood Cholesterol

Objective	Wood County 2012	U.S. Baseline*	Healthy People 2020 Target
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	31%	38% Adults age 20 & up with TBC > 240 mg/dl (2009)	14%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	69%	77% Adults age 18 & up (2009)	82%

\*All U.S. figures age-adjusted to 2000 population standard.  
(Source: 2009 BRFSS, Healthy People 2020, 2012 Wood County Assessment)

# Cancer

## Key Findings

Ohio Department of Health statistics indicate that from 2000-2008, a total of 1,984 Wood County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, healthy diet and exercise habits, and early detection may reduce overall cancer deaths.

## Cancer Facts

- ◆ The Ohio Department of Health (ODH) vital statistics indicate that from 2000-2008, cancers caused 24% (1,984 of 8,422 total deaths) of all Wood County resident deaths. The largest percent (29%) of cancer deaths were from lung and bronchus cancer. (Source: ODH Information Warehouse)
- ◆ The American Cancer Society reports that smoking tobacco is associated with cancers of the mouth, lips, nasal cavity (nose) and sinuses, larynx (voice box), pharynx (throat), and esophagus (swallowing tube). Also, smoking has been associated with cancers of the lung, colorectal, stomach, pancreas, kidney, bladder, uterine cervix, ovary (mucinous) and acute myeloid leukemia. The 2012 health assessment project has determined that 11% of Wood County adults are current smokers and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer.

## Lung Cancer

- ◆ The Ohio Department of Health reports that lung cancer (n=337) was the leading cause of male cancer deaths from 2000-2008 in Wood County. Colorectal cancer caused 105 male deaths and prostate cancer caused 84 male deaths during the same time period.
- ◆ In Wood County, 16% of male adults are current smokers<sup>1</sup> and 40% have stopped smoking for one or more days in the past 12 months because they were trying to quit. (Source: 2012 Wood County Health Assessment)
- ◆ ODH reports that lung cancer was the leading cause of female cancer deaths (n=234) in Wood County from 2000-2008 followed by breast (n=148) and colon & rectum (n=117) cancers.
- ◆ Approximately 5% of female adults in the county are current smokers<sup>1</sup> and 57% have stopped smoking for one or more days in the past 12 months because they were trying to quit. (Source: 2012 Wood County Health Assessment)
- ◆ According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. In addition, individuals living with smokers have a 30% greater risk of developing lung cancer than those who do not have smokers living in their household. Working in an environment with tobacco smoke also increases the risk of lung cancer (Source: American Cancer Society Facts & Figures 2012).

## Breast Cancer

- ◆ In 2012, 64% of Wood County females reported having had a clinical breast examination in the past year.
- ◆ 66% of Wood County females over the age of 40 had a mammogram in the past year.
- ◆ If detected early, the 5-year survival rate for breast cancer is 90%. (Source: American Cancer Society Facts & Figures 2012)
- ◆ For women in their 20s and 30s, a clinical breast exam should be done at least once every 3 years. Mammograms for women in their 20s and 30s are based upon increased risk (e.g., family history, past breast cancer) and physician recommendation. Otherwise, annual mammography is recommended, beginning at age 40. (Source: American Cancer Society Facts & Figures 2012)

### Wood County Incidence of Cancer, 2007 All Types: 478 cases

- ❖ Breast: 78 cases (16%)
- ❖ Prostate: 76 cases (16%)
- ❖ Lung and Bronchus: 65 cases (14%)
- ❖ Colon and Rectum: 55 cases (12%)
- ❖ Bladder: 14 cases (3%)

**From 2006-2008, there were 663 cancer deaths in Wood County.**

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse)

<sup>1</sup>Have smoked over 100 cigarettes in lifetime and currently smoke some or all days.

# Cancer

## Colon and Rectum Cancer

- ◆ The American Cancer Society recognizes any cancer involving the esophagus, stomach, small intestine, colon, rectum, anus (anal canal & anorectum), liver, gallbladder or pancreas as a digestive cancer. Digestive cancers accounted for 22% of all cancer deaths in Wood County from 2000-2008. *(Source: ODH Information Warehouse)*
- ◆ The American Cancer Society reports several risk factors for colorectal cancer including: age; personal or family history of colorectal cancer, polyps, or inflammatory bowel disease; obesity; physical inactivity; a diet high in red or processed meat; alcohol use; long-term smoking; and possibly very low intake of fruits and vegetables.
- ◆ In the U.S., most cases of colon cancers occur in individuals over the age of 50. Because of this, the American Cancer Society suggests that every person over the age of 50 have regular colon cancer screenings. In 2012, 24% of Wood County adults over the age of 50 reported having been screened for colorectal cancers within the past 2 years.

## Prostate Cancer

- ◆ In 2012, 54% of Wood County males over the age of 50 had a PSA test in the past year.
- ◆ The Ohio Department of Health statistics indicate that prostate cancer deaths accounted for 8% of all male cancer deaths from 2000-2008 in Wood County.
- ◆ African American men are twice as likely as white American men to develop prostate cancer and are more likely to die of prostate cancer. In addition, about 62% of prostate cancers occur in men over the age of 65. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. Prostate cancer is more common in North America and Northwestern Europe than in Asia and South America. *(Source: Cancer Facts & Figures 2012, The American Cancer Society)*

### 2012 Cancer Estimations

- ❖ In 2012, about 1,638,910 new cancer cases are expected to be diagnosed.
- ❖ About 577,190 Americans are expected to die of cancer in 2012.
- ❖ In Ohio, 66,560 new cases of cancer are expected.
- ❖ Ohio female, new breast cancer cases are expected to be 8,990.
- ❖ 173,200 cancer deaths will be caused by tobacco use.
- ❖ About 15% of all new cancer cases in Ohio are expected to be from lung & bronchus cancers.
- ❖ About 9% of all new cancer cases in Ohio are expected to be from colon & rectum cancers.
- ❖ Ohio male, new prostate cancer cases are expected to be 8,560.
- ❖ In the U.S., 29% of male and 26% of female estimated cancer deaths are expected to be from lung & bronchus cancers.

*(Source: American Cancer Society, Facts and Figures 2012)*

# Cancer

## Wood County Cancer Deaths 2000-2008

Type of Cancer	Number of Cancer Deaths	Percent of Total Cancer Deaths
Trachea, Lung and Bronchus	571	29%
Colon, Rectum & Anus	222	11%
Other/Unspecified	216	11%
Breast	148	7%
Pancreas	99	5%
Non-Hodgkins Lymphoma	96	5%
Prostate	84	4%
Leukemia	77	4%
Bladder	61	3%
Ovary	56	3%
Brain and CNS	52	3%
Esophagus	47	2%
Kidney and Renal Pelvis	47	2%
Multiple Myeloma	39	2%
Liver and Bile Ducts	35	2%
Melanoma of Skin	28	1%
Lip, Oral Cavity & Pharynx	25	1%
Stomach	25	1%
Cancer of Corpus Uteri	25	1%
Cancer of Cervix Uteri	14	< 1%
Larynx	13	< 1%
Hodgkins Disease	4	< 1%
<b>Total</b>	<b>1,984</b>	<b>100%</b>

*(Source: ODH Information Warehouse, updated 4-15-10)*

## Wood County Number of Cancer Cases, 2000-2007

Year	All Sites	Breast	Colon & Rectum	Lung	Prostate
2000	494	72	65	69	61
2001	497	78	69	84	73
2002	521	80	49	78	67
2003	482	76	53	76	49
2004	493	66	61	76	56
2005	553	91	54	68	56
2006	499	58	61	77	83
2007	478	78	55	65	76

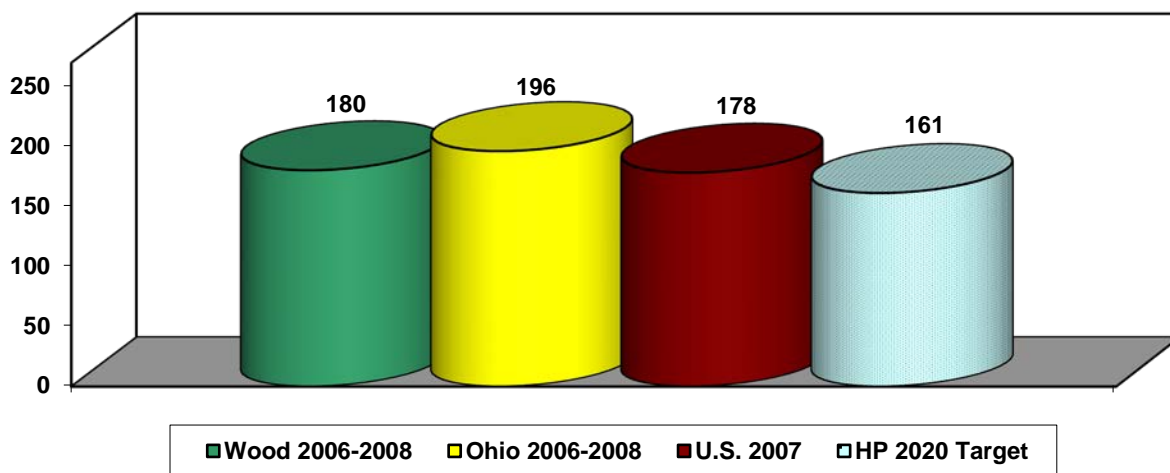
*(Source: Ohio Cancer Incidence Surveillance System, 2000-2007)*

# Cancer

The following graphs show the Wood County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population, 2000 standard) for all types of cancer in comparison to the Healthy People 2020 objective, and cancer as a percentage of total deaths in Wood County by gender. The graphs indicate:

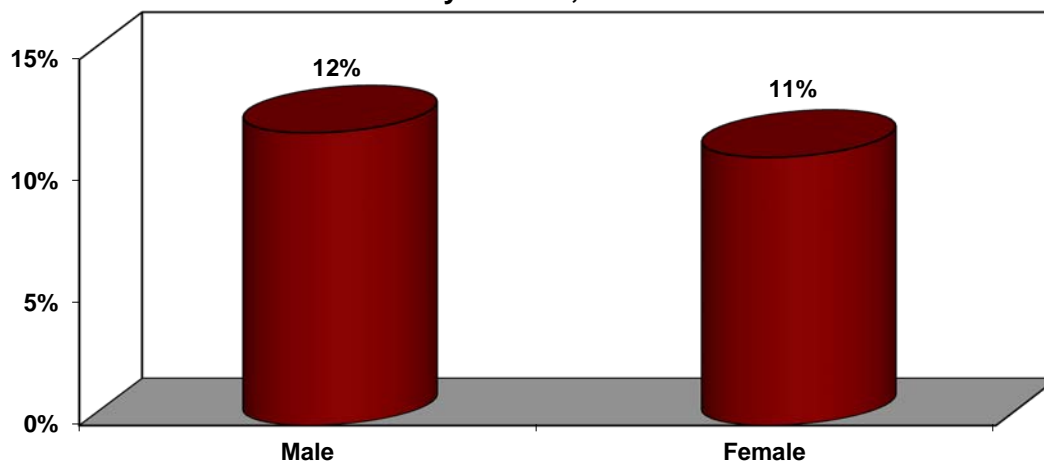
- ◆ When age differences are accounted for, Wood County had a lower cancer mortality rate than Ohio, but a higher rate than the U.S. and the Healthy People 2020 target objective.
- ◆ The percentage of Wood County males who died from all cancers was similar to the percentage of Wood County females who died from all cancers.

**Healthy People 2020 Objective  
and Age-Adjusted Mortality Rates for All Cancers\***



*\*Age-adjusted rates/ 100,000 population, 2000 standard  
(Source: ODH Information Warehouse, updated 4-15-10; Healthy People 2020)*

**Cancer As Percent of Total Deaths in Wood County  
by Gender, 2000-2008**



*(Source: ODH Information Warehouse, updated 4-15-10)*

# Diabetes

## Key Findings

In 2012, 8% of Wood County adults had been diagnosed with diabetes.

## Diabetes

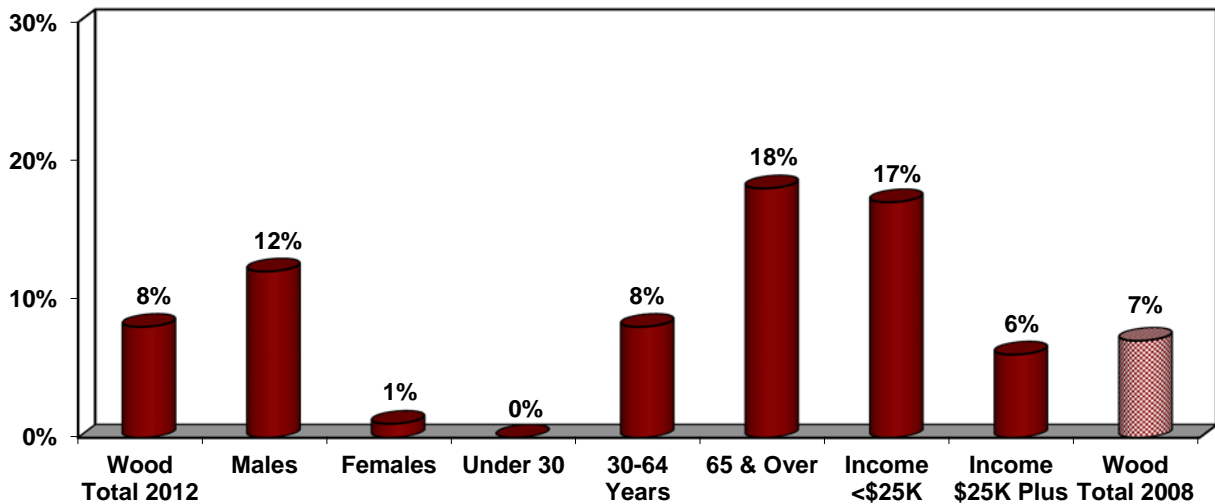
- ◆ The 2012 health assessment project has identified that 8% of Wood County adults had been diagnosed with diabetes, increasing to 18% of those over the age of 65. The 2010 BRFSS reports an Ohio prevalence of 11% and 10% for the U.S.
- ◆ 11% of adults had been diagnosed with pre-diabetes.
- ◆ Those with diabetes were using the following to treat it: diabetes pills (93%), diet control (36%), and insulin (7%).
- ◆ Over one-quarter (29%) of adults with diabetes rated their health as fair or poor.
- ◆ Wood County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  - 93% were classified as obese
  - 68% had been diagnosed with high blood pressure
  - 54% had been diagnosed with high blood cholesterol

## Diabetes Facts

- ❖ Diabetes was the 6<sup>th</sup> leading cause of death in Wood County from 2006-2008.
- ❖ Diabetes was the 7<sup>th</sup> leading cause of death in Ohio from 2006-2008.
- ❖ From 2006-2008, the Wood County age-adjusted mortality rate per 100,000 for diabetes was 45.9 deaths for males (34.5 Ohio) and 19.0 (24.4 Ohio) deaths for females.

*(Source: ODH, Information Warehouse, updated 4-15-10)*

**Wood County Adults Diagnosed with Diabetes**



2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Diagnosed with diabetes	7%	8%	11%	10%

# Diabetes

## Diabetes Symptoms

Many people with type 2 diabetes never show any signs, but some people do show symptoms caused by high blood sugar. The most common symptoms of type 2 diabetes are:

### Type 1 Diabetes

- ❖ Frequent urination
- ❖ Unusual thirst
- ❖ Extreme hunger
- ❖ Unusual weight loss
- ❖ Extreme fatigue and irritability

### Type 2 Diabetes

- ❖ Any of the type 1 symptoms
- ❖ Blurred vision
- ❖ Tingling/numbness in hands or feet
- ❖ Recurring skin, gum, or bladder infections
- ❖ Cuts/bruises that are slow to heal
- ❖ Frequent infections

(Source: American Diabetes Association, *Diabetes Basics, Symptoms*, <http://www.diabetes.org/diabetes-basics/symptoms/>)

## Who is at Greater Risk for Type 2 Diabetes

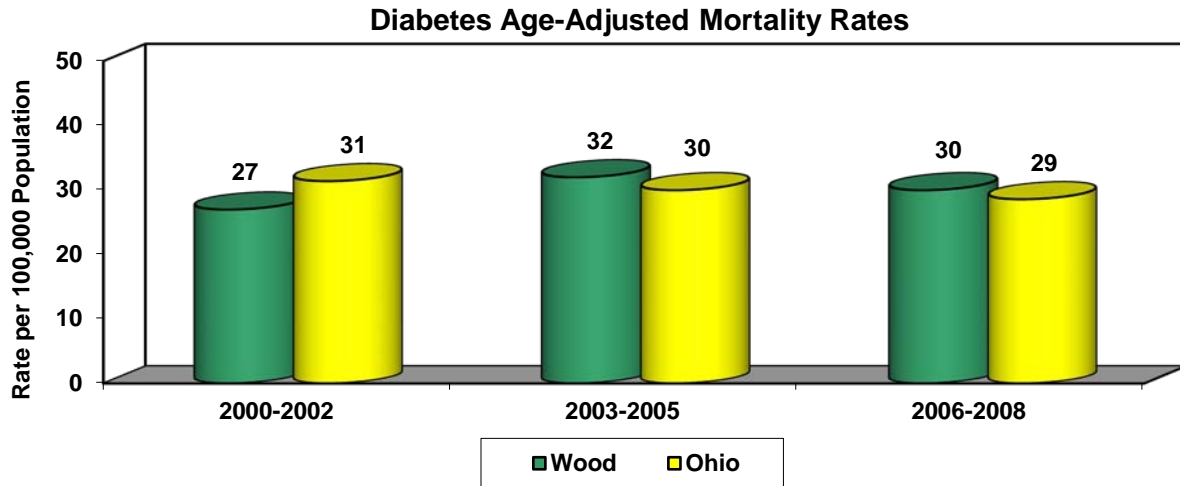
- ❖ People with impaired glucose tolerance (IGT) and/or impaired fasting glucose (IFG)
- ❖ People over age 45
- ❖ People with a family history of diabetes
- ❖ People who are overweight or obese
- ❖ People who do not exercise regularly
- ❖ People with low HDL cholesterol or high triglycerides, high blood pressure
- ❖ Certain racial and ethnic groups (e.g. Non-Hispanic Blacks, Hispanic/Latino Americans, Asian Americans and Pacific Islanders, and American Indians and Alaska Natives)
- ❖ Women who had gestational diabetes, or who have had a baby weighing 9 pounds or more at birth

(Source: American Diabetes Association, *Diabetes Basics, Your Risk: Who is at Greater Risk for Type 2 Diabetes*, <http://www.diabetes.org/diabetes-basics/prevention/risk-factors>)

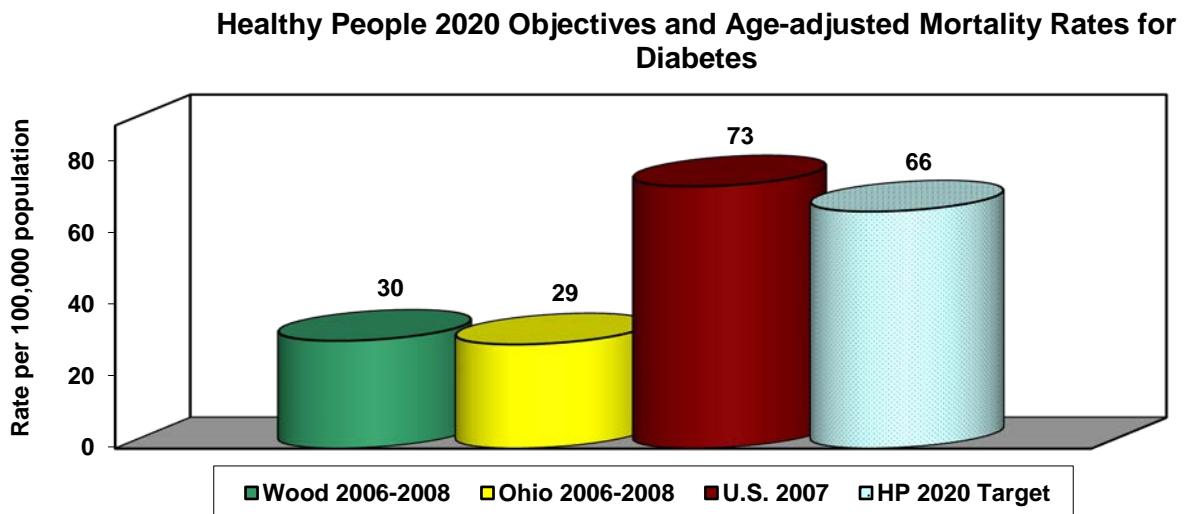
# Diabetes

The following graphs show age-adjusted mortality rates from diabetes for Wood County and Ohio residents with comparison to the Healthy People 2020 target objective.

- ◆ Wood County's age-adjusted diabetes mortality rate fluctuated from 2000 to 2008.
- ◆ From 2006 to 2008, both Wood County and Ohio's age-adjusted diabetes mortality rates were less than half of the national rate and the Healthy People 2020 target objective.



*(Source: ODH Information Warehouse, updated 4-15-10)*



*(Source: ODH Information Warehouse, updated 4-15-10 and Healthy People 2020, CDC)*



# Arthritis

## Key Findings

According to the Wood County survey data, 27% of Wood County adults were diagnosed with arthritis. According to the 2009 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they have arthritis.

## Arthritis

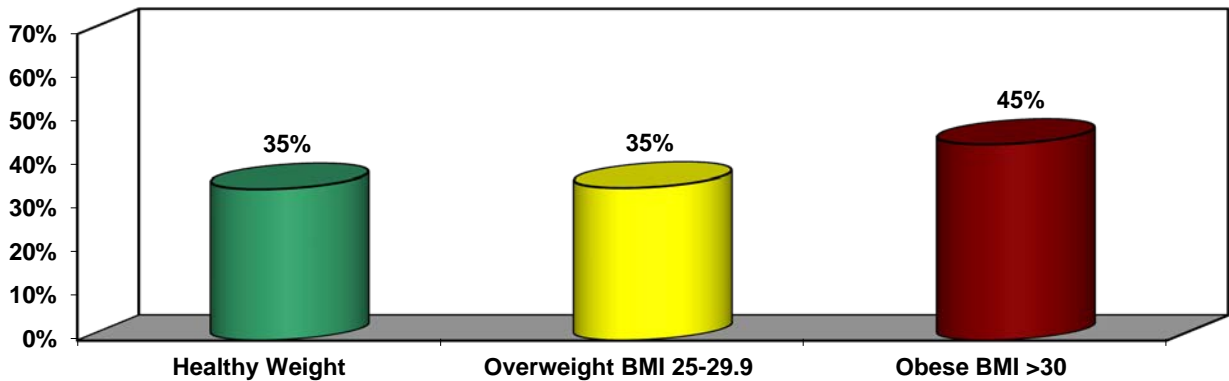
- ◆ More than one-quarter (27%) Wood County adults were told by a health professional that they had some form of arthritis, increasing to 62% of those over the age of 65.
- ◆ According to the 2009 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they had arthritis.
- ◆ About 1 in 5 U.S. adults have doctor diagnosed arthritis. Approximately 1 in 20 of working age adults reported that arthritis limited their work. (Source: CDC *Arthritis at a Glance 2011*)
- ◆ Adults are at higher risk of developing arthritis if they are female, have genes associated with certain types of arthritis, have an occupation associated with arthritis, are overweight or obese, and/or have joint injuries or infections. (Source: CDC)

## The Impact of Arthritis

- ◆ Arthritis is the most frequent cause of disability among adults in the United States, with osteoarthritis (OA) being the most common type.
- ◆ 67 million (25%) adults aged 18 years or older will have doctor-diagnosed arthritis by the year 2030.
- ◆ Data indicates that lack of exercise and age are marked risk factors for developing arthritis.
- ◆ Arthritis is a co-morbidity of diabetes, heart disease, high cholesterol, high blood pressure and obesity.
- ◆ Anxiety and depression can develop in people with diagnosed arthritis. Health care providers should screen all people with arthritis, for both anxiety and depression.

(Source: CDC, *Arthritis Data and Statistics, 2011*, [http://www.cdc.gov/arthritis/data\\_statistics.htm](http://www.cdc.gov/arthritis/data_statistics.htm) & Murphy, L.B. 2012. "Anxiety and depression among US adults with arthritis: Prevalence and correlates," <http://www.ncbi.nlm.nih.gov/pubmed/22550055>)

**Arthritis-Attributable Activity Limitations Increase with Weight**



(Source for graph: *Arthritis at a Glance 2011*, *Morbidity and Mortality Weekly Report 2010*; 59(39):999-1003.)

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2009	U.S. 2009
Diagnosed with arthritis	33%	27%	31%	26%

# Arthritis

## Healthy People 2020 Arthritis

Objective	Wood County 2012	Healthy People 2020 Target
AOCBC-2: Reduce the proportion of adults with doctor-diagnosed arthritis who experience a limitation in activity due to arthritis or joint symptoms	27%	36%

\*U.S. baseline is age-adjusted to the 2000 population standard  
(Sources: Health People 2020 Objectives, 2012 Wood County Health Assessment)

### Arthritis: Key Public Health Messages

Early diagnosis of arthritis and self-management activities can help people decrease their pain, improve function, and stay productive.

Key self-management activities include the following:

- ❖ **Learn Arthritis Management Strategies** –Learning techniques to reduce pain and limitations can be beneficial to people with arthritis. Self-management education, such as the *Arthritis Self-Management Program* (ASMP), or the *Chronic Disease Self-Management Program* (CDSMP) help you develop the skills and confidence to manage your arthritis on a day to day basis.
- ❖ **Be Active** –Research has shown that physical activity decreases pain, improves function, and delays disability. Make sure you get at least 30 minutes of moderate physical activity at least 5 days a week. You can get activity in 10-minute intervals.
- ❖ **Watch your weight** –The prevalence of arthritis increases with increasing weight. Research suggests that maintaining a healthy weight reduces the risk of developing arthritis and may decrease disease progression. A loss of just 11 pounds can decrease the occurrence (incidence) of new knee osteoarthritis and a modest weight loss can help reduce pain and disability.
- ❖ **See your doctor** –Although there is no cure for most types of arthritis, early diagnosis and appropriate management is important, especially for inflammatory types of arthritis. For example, early use of disease-modifying drugs can affect the course of rheumatoid arthritis. If you have symptoms of arthritis, see your doctor and begin appropriate management of your condition.
- ❖ **Protect your joints** –Joint injury can lead to osteoarthritis. People who experience sports or occupational injuries or have jobs with repetitive motions like repeated knee bending have more osteoarthritis. Avoid joint injury to reduce your risk of developing osteoarthritis.

(Source: Centers for Disease Control and Prevention, *Arthritis: Key Public Health Messages*, [www.cdc.gov/arthritis/basics/key.htm](http://www.cdc.gov/arthritis/basics/key.htm))

# Asthma and Other Respiratory Disease

## Key Findings

According to the Wood County survey data, 13% of Wood County adults had been diagnosed with asthma.

## Asthma and Other Respiratory Disease

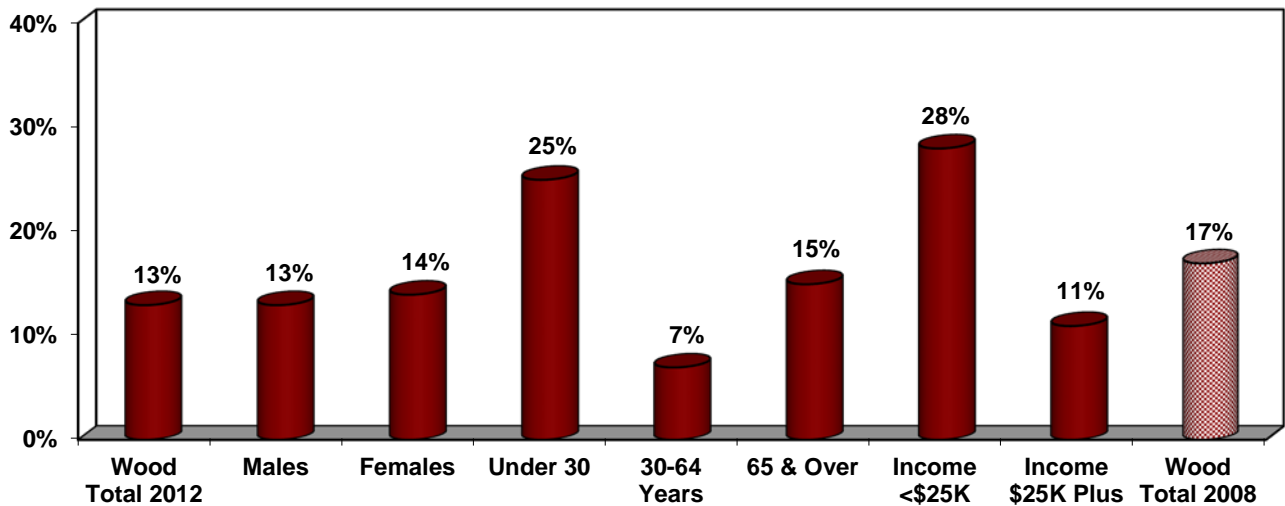
- ◆ In 2012, 13% of Wood County adults had been diagnosed with asthma, increasing to 25% of those under the age of 30 and 28% of those with incomes less than \$25,000.
- ◆ 14% of Ohio and U.S. adults have ever been diagnosed with asthma. *(Source: 2010 BRFSS)*
- ◆ There are several important factors that may trigger an asthma attack. Some of these triggers are secondhand smoke, dust mites, outdoor air pollution, cockroach allergens, pets, mold, infections linked to the flu, colds, and respiratory viruses. *(Source: CDC- National Center for Environmental Health, 2011)*
- ◆ Chronic lower respiratory disease was the 4<sup>th</sup> leading cause of death in Wood County and the 3<sup>rd</sup> leading cause of death in Ohio, from 2006-2008. *(Source: ODH, Information Warehouse)*

### Asthma Statistics

- ◆ Approximately 1 in 12 people had asthma in the U.S. in 2009
- ◆ 1 in 2 people with asthma had an asthma attack in 2008.
- ◆ Asthma rates for African American children increased about 50% from 2001-2009.
- ◆ 185 children and 3,262 adults died from asthma in 2007.
- ◆ Asthma cost the US about \$3,300 per person with asthma each year from 2002 to 2007 in medical expenses.
- ◆ More than half (59%) of children and one-third (33%) of adults who had an asthma attack missed school or work because of asthma in 2008.
- ◆ On average, in 2008 children missed 4 days of school and adults missed 5 days of work due to asthma.

*(Source: Centers for Disease Control, Vital Signs, Asthma in the US, Growing every year, <http://www.cdc.gov/VitalSigns/pdf/2011-05-vitalsigns.pdf>)*

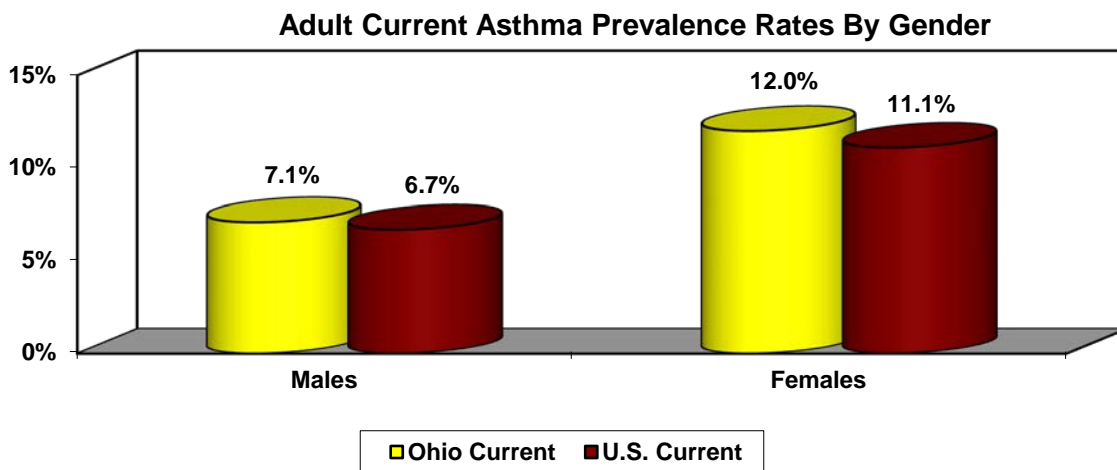
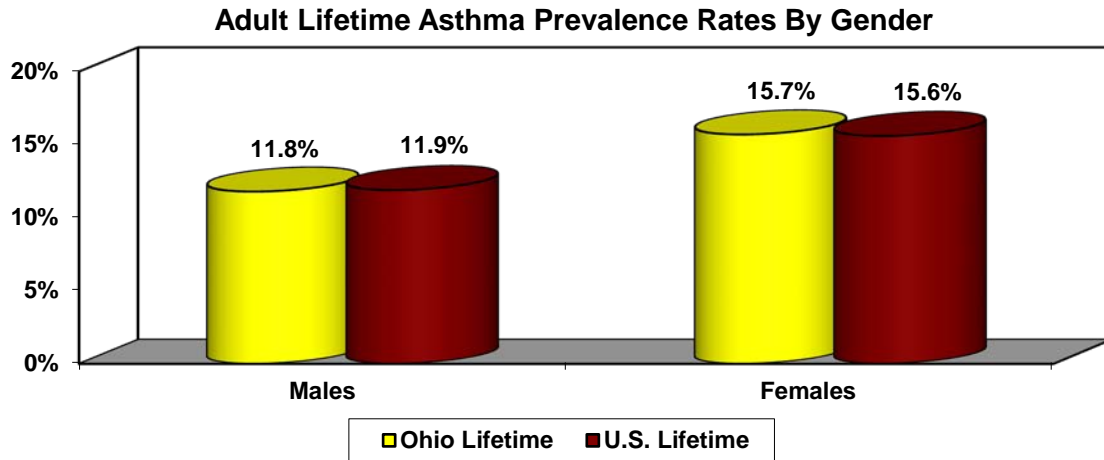
**Wood County Adults Diagnosed with Asthma**



2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Had been diagnosed with asthma	17%	13%	14%	14%

# Asthma and Other Respiratory Disease

The following graphs demonstrate the lifetime and current prevalence rates of asthma by gender for Ohio and U.S. residents.



(Source: 2010 BRFSS)

## Chronic Respiratory Conditions

- ❖ Asthma is a chronic lung disease that inflames and narrows airways. It can cause recurring periods of wheezing, chest tightness, shortness of breath and coughing.
- ❖ Chronic bronchitis is a condition where the bronchial tubes (the tubes that carry air to your lungs) become inflamed. Bronchitis can cause wheezing, chest pain or discomfort, a low fever, shortness of breath and a cough that brings up mucus. Smoking is the main cause of chronic bronchitis.
- ❖ Chronic Obstructive Pulmonary Disorder (COPD) is a disease that over time makes it harder to breathe. COPD can cause large amounts of mucus, wheezing, shortness of breath, chest tightness, and other symptoms. Smoking is the main cause of COPD.

(Source: National Heart, Lung, Blood Institute, 2011)

# Adult Weight Status

## Key Findings

The 2012 Health Assessment identified that 66% of Wood County adults were overweight or obese based on Body Mass Index (BMI). The 2010 BRFSS indicates that 30% of Ohio and 28% of U.S. adults were obese by BMI. Nearly one-third (30%) of Wood County adults were obese. Almost half (48%) of adults were trying to lose weight.

## Adult Weight Status

- ◆ In 2012, the health assessment indicated that almost two-thirds (66%) of Wood County adults were either overweight (36%) or obese (30%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.
- ◆ Nearly half (48%) of adults were trying to lose weight, 32% were trying to maintain their current weight or keep from gaining weight, and 3% were trying to gain weight.
- ◆ Wood County adults did the following to lose weight or keep from gaining weight: ate less food, fewer calories, or foods low in fat (54%), exercised (54%), ate a low-carb diet (11%), used a weight-loss program (6%), took diet pills, powders, or liquids without a doctor's advice (4%), went without eating 24 or more hours (3%), participated in a dietary or fitness program (1%), and smoked cigarettes (1%).

### Obesity Statistics

- ◆ More than 72 million U.S. adults are obese.
- ◆ Persons who are obese have medical costs that are \$1,429 higher than those who are normal weight.
- ◆ No state has an obesity rate less than 15%, the national goal.
- ◆ In nine states, over 30% of adults are obese.

(Source: CDC, Vital Signs, Adult Obesity: Obesity Rises Among Adults, <http://www.cdc.gov/VitalSigns/pdf/2010-08-vitalsigns.pdf>)

## Physical Activity

- ◆ In Wood County, 55% of adults were engaging in some type of exercise or physical activity for at least 30 minutes 3 or more days per week. 29% of adults were exercising 5 or more days per week. Nearly one-quarter (23%) of adults were not participating in any physical activity in the past week, including 2% who were unable to exercise.
- ◆ Wood County adults spent the most time doing the following types of exercise in the past year: walking (52%), exercise machines (17%), strength training (17%), running/jogging (16%), cycling (11%), exercise videos (6%), swimming (4%), active video games (3%), and other exercises (14%). 8% of adults did not exercise at all, including 3% who were unable to do so.
- ◆ Wood County adults gave the following reasons for not exercising: time (25%), no motivation (22%), too tired (19%), weather (12%), pain/discomfort (8%), choose not to exercise (7%), cost (5%), no sidewalks (2%), no walking or biking trails (2%), no gym available (2%), safety (1%), no child care (1%), did not know what activity to do (1%), doctor advised them not to exercise (1%), and other reasons (8%).
- ◆ The CDC recommends that adults participate in moderate exercise for at least 2 hours and 30 minutes every week or vigorous exercise for at least 1 hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, CDC also recommends muscle-strengthening activities that work all major muscle groups on 2 or more days per week. (Source: CDC, Physical Activity for Everyone)
- ◆ Wood County adults spent an average of 2.4 hours watching TV, 1.3 hours on their computer (outside of work), 1.1 hours on their cell phone, and 0.2 hours playing video games on an average day of the week.

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Obese	30%	30%	30%	28%
Overweight	40%	36%	36%	36%
Ate 5 or more servings of fruits/vegetables per day	N/A	16%	21%*	23%*

N/A – Not available  
\* 2009 BRFSS

## Adult Weight Status

### Nutrition

- ◆ In 2012, 16% of adults were eating 5 or more servings of fruits and vegetables per day. 81% were eating between 1 and 4 servings per day. The American Cancer Society recommends that adults eat 5-9 servings of fruits and vegetables per day to reduce the risk of cancer and to maintain good health. The 2009 BRFSS reported that only 21% of Ohio adults and 23% nationwide were eating the recommended number of servings of fruits and vegetables.
- ◆ Wood County adults consumed the following sources of calcium: milk (73%), yogurt (44%), other dairy products (43%), calcium supplements (23%), calcium fortified juice (16%), and other calcium sources (12%).
- ◆ Adults ate out in a sit-down restaurant an average of 1.3 times per week and had take-out food an average of 1.1 times per week.
- ◆ Wood County adults usually ate the following types of food: home-cooked meals (95%), frozen dinners (27%), restaurant food (26%), fast food (20%), junk food (15%), and organic food (10%).
- ◆ Wood County adults got most of their food from the following places: grocery store (98%), fast food (10%), restaurant (10%), convenience store (4%), church (1%), community food bank/pantry (<1%), and other places (4%).

### Healthy People 2020 Obesity

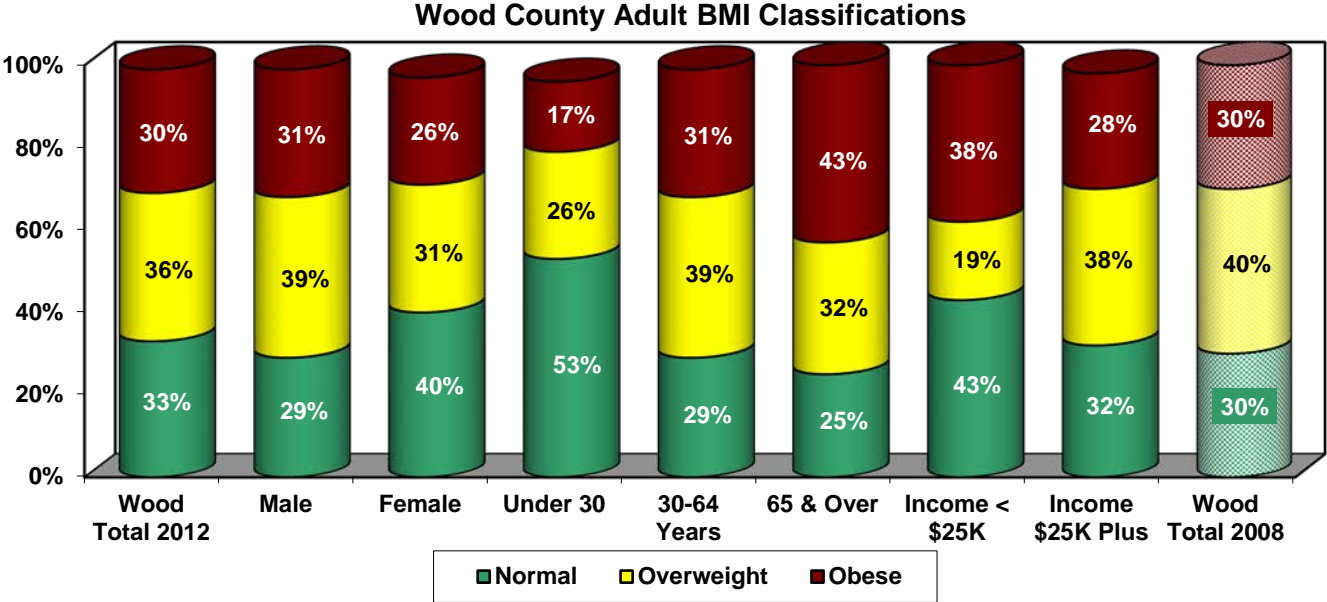
Objective	Wood County 2012	Ohio 2010	U.S. 2010	Healthy People 2020 Target
NWS-9: Reduce the proportion of adults who are obese	17% age 18-24 23% age 25-34 30% age 35-44 29% age 45-54 33% age 55-64 43% age 65+	26% age 18-24 24% age 25-34 31% age 35-44 33% age 45-54 39% age 55-64 27% age 65+	17% age 18-24 28% age 25-34 29% age 35-44 31% age 45-54 32% age 55-64 25% age 65+	31%

\*U.S. baseline is age-adjusted to the 2000 population standard

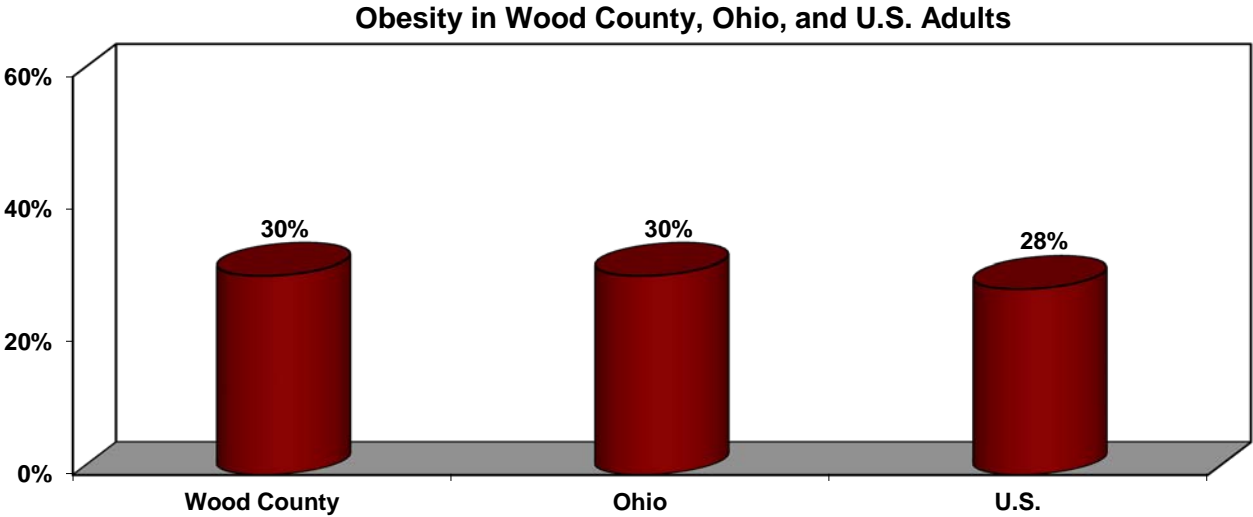
(Sources: Health People 2020 Objectives, BRFSS, ODH Information Warehouse, 1-7-10, 2012 Wood County Health Assessment)

# Adult Weight Status

The following graphs show the percentage of Wood County adults who are overweight or obese by Body Mass Index (BMI) and the percentage of Wood County adults who are obese compared to Ohio and U.S. Examples of how to interpret the information include: 33% of all Wood County adults were classified as normal weight, 36% were overweight, and 30% were obese.



*(Percentages may not equal 100% due to the exclusion of data for those who were classified as underweight)*



*(Source: 2012 Wood County Health Assessment and 2010 BRFSS)*

# Adult Tobacco Use

## Key Findings

*In 2012, 11% of Wood County adults were current smokers and 23% were considered former smokers. In 2011, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of disease and early death in the world, accounting for approximately 5.4 million premature deaths each year. ACS estimated that tobacco use would be linked to approximately one in five deaths in the U.S. (Source: Cancer Facts & Figures, American Cancer Society, 2011)*

## Adult Tobacco Use Behaviors

- ◆ The 2012 health assessment identified that one in nine (11%) Wood County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or all days). The 2010 BRFSS reported current smoker prevalence rates of 23% for Ohio and 17% for the U.S.
- ◆ Just under one-quarter (23%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). The 2010 BRFSS reported former smoker prevalence rates of 25% for Ohio and the U.S.
- ◆ Wood County adult smokers were more likely to:
  - Have been separated (60%)
  - Have been male (16%)
  - Have been 65 or older (15%)
- ◆ Wood County adults used the following other tobacco products in the past year: flavored cigarettes (19%), cigars (10%), Black and Milds (5%), e-cigarettes (4%), hookah (4%), little cigars (2%), chewing tobacco (2%), snuff (2%), swishers (1%), and cigarillos (1%).
- ◆ 44% of the current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.

### Tobacco Use and Health

- ◆ Tobacco use is the most preventable cause of death in the U.S. and in the world
- ◆ 87% of all lung cancers deaths and at least 30% of all cancer deaths in the U.S. can be attributed to smoking.
- ◆ When compared to non-smokers, the risk of developing lung cancer is 23 times higher in male smokers and 13 times higher in female smokers.
- ◆ Tobacco use is also associated with at least 20 types of cancer such as cervical, mouth, pharyngeal, esophageal, pancreatic, kidney and bladder.
- ◆ Tobacco use contributes to heart disease, stroke, bronchitis, emphysema, COPD, chronic sinusitis, severity of colds, pneumonia and low birth weight in infants.

*(Source: Cancer Facts & Figures, American Cancer Society, 2011)*

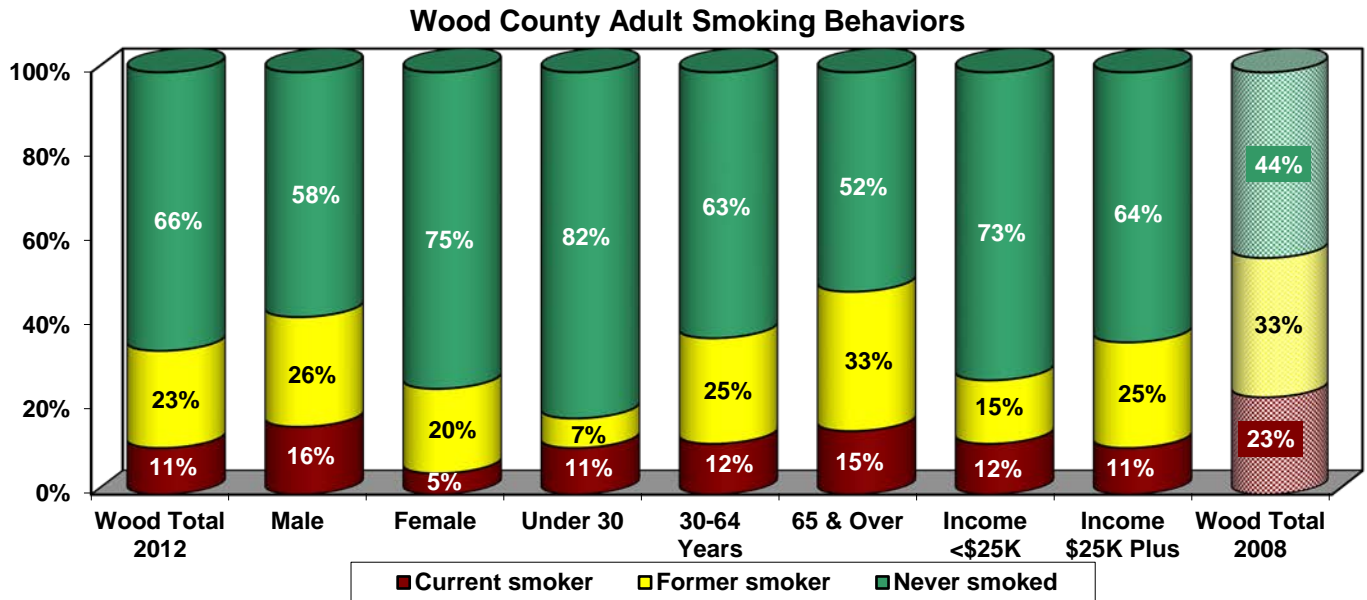
2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Current smoker	23%	11%	23%	17%
Former smoker	33%	23%	25%	25%
Tried to quit smoking	52%	44%	N/A	N/A

N/A – Not available



## Adult Tobacco Use

The following graph shows the percentage of Wood County adults who used tobacco. Examples of how to interpret the information include: 11% of all Wood County adults were current smokers, 23% of all adults were former smokers, and 66% had never smoked.



*Respondents were asked:  
 "Have you smoked at least 100 cigarettes in your entire life?  
 If yes, do you now smoke cigarettes every day, some days or not at all?"*

### Smoking and Tobacco Facts

- ❖ Tobacco use is the most preventable cause of death in the U.S.
- ❖ Approximately 49,000 deaths per year in the U.S. are from secondhand smoke exposure.
- ❖ Typically, smokers die 13 to 14 years earlier than non-smokers.
- ❖ In 2009, cigarette smoking was highest in prevalence in adults among American Indians/Native Americans (23%), followed by whites (22.1%), African Americans (21.3%), Hispanics (14.5%), and Asians (12.0%).
- ❖ Smoking costs over \$193 billion in lost productivity (\$97 billion) and health care expenses (\$96 billion) per year.
- ❖ In 2006, the cigarette industry spent more than \$34 million per day on advertising and promotional expenses.

*(Source: CDC: Fast Facts on Smoking and Tobacco Use, accessed from [http://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/fast\\_facts/index.htm](http://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm))*

### Costs of Tobacco Use

- ❖ The average price for a pack of cigarettes in the United States is \$5.98.
- ❖ If a pack-a-day smoker spent approximately \$6/pack, they would spend: \$42/week, \$168/month, or \$2,190/year.
- ❖ There are 98,213 adults in Wood County.
- ❖ 11% of Wood County adults indicated they were smokers. That is approximately 10,803 adults.
- ❖ If 10,803 adults spent \$2,190/year, then \$23,658,570 is spent a year on cigarettes in Wood County.

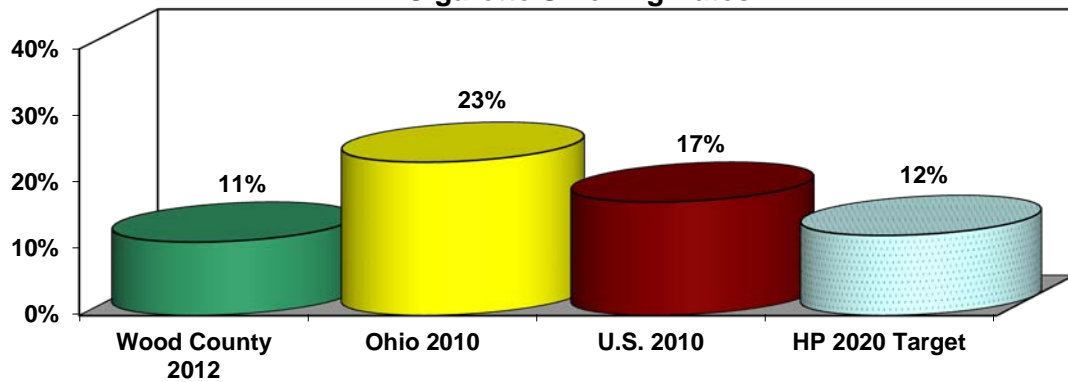
*(Source: Campaign for Tobacco-Free Kids, State Cigarette Excise Tax Rates & Rankings, accessed from: <http://www.tobaccofreekids.org/research/factsheets/pdf/0097.pdf> and 2012 Wood County Health Assessment)*

## Adult Tobacco Use

The following graphs show Wood County, Ohio, and U.S. adult cigarette smoking rates and age-adjusted mortality rates per 100,000 population for chronic lower respiratory diseases (formerly COPD) and trachea, bronchus and lung cancers in comparison with the Healthy People 2020 objectives. The BRFSS rates shown for Ohio and the U.S. were for adults 18 years and older. These graphs show:

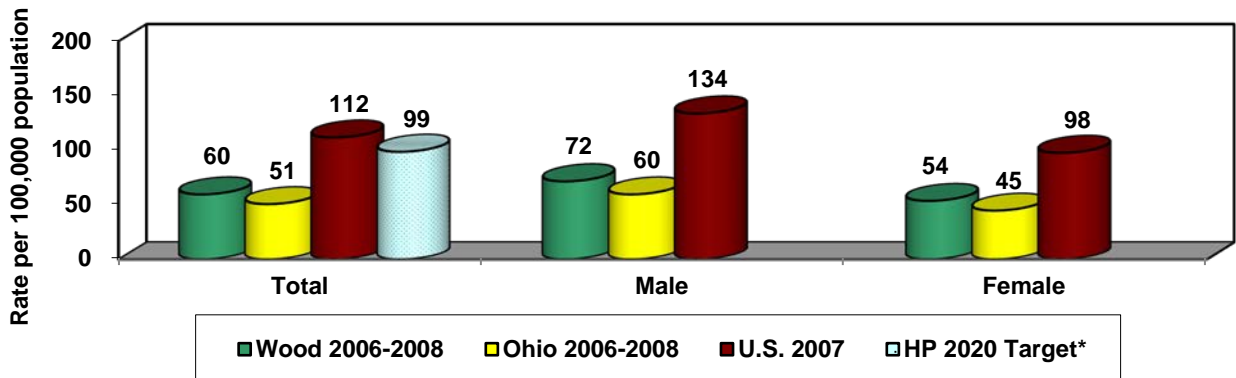
- ◆ Wood County adult cigarette smoking rate was lower than the rate for Ohio, the U.S. and Healthy People 2020 Goal.
- ◆ From 2006-2008, Wood County's age-adjusted mortality rate for Chronic Lower Respiratory Disease was higher than the Ohio rate, but lower than the U.S. rate and the Healthy People 2020 target objective.
- ◆ From 2006-2010 the percentage of mothers who smoked during pregnancy in Wood County fluctuated slightly from year to year, but was generally lower than the Ohio rate.
- ◆ Disparities existed by gender for Wood County trachea, bronchus, and lung cancer age-adjusted mortality rates, as well as chronic lower respiratory disease mortality rates. The 2006-2008 Wood male rates were higher than the Wood County female rates in both cases.

**Healthy People 2020 Objectives & Cigarette Smoking Rates**



*(Source: 2012 Wood County Health Assessment, BRFSS and Healthy People 2020)*

**Age-Adjusted Mortality Rates for Chronic Lower Respiratory Diseases (Formerly COPD)**



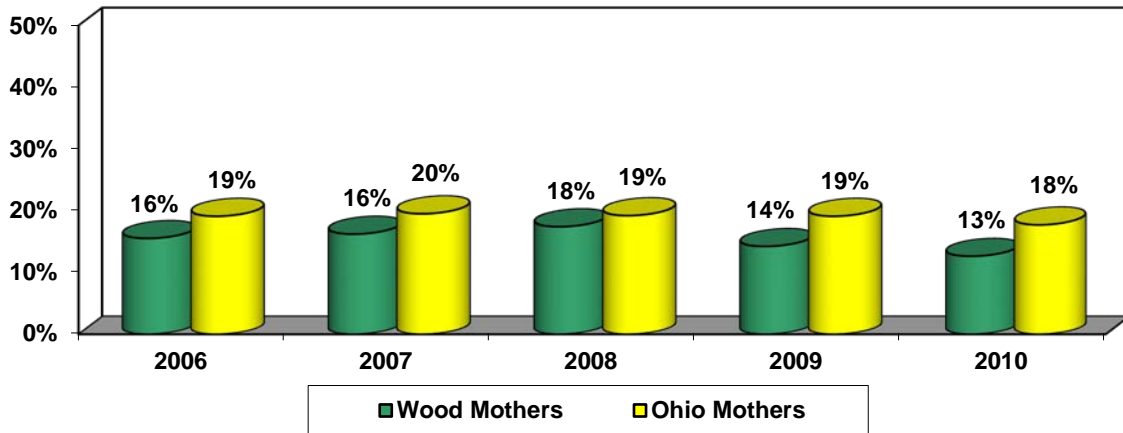
*(Source: ODH Information Warehouse and Healthy People 2020)*

*\* Healthy People 2020's target rate and the U.S. rate is for adults aged 45 years and older.*

*\*\*HP2020 does not report different goals by gender.*

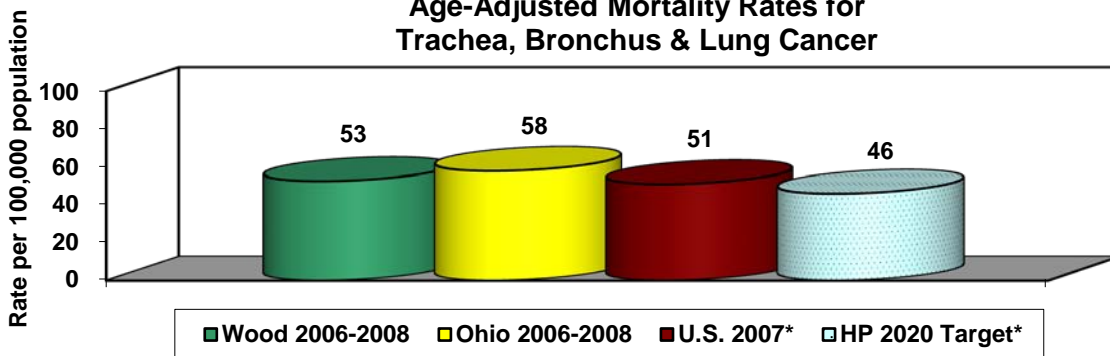
# Adult Tobacco Use

## Births to Mothers Who Smoked During Pregnancy



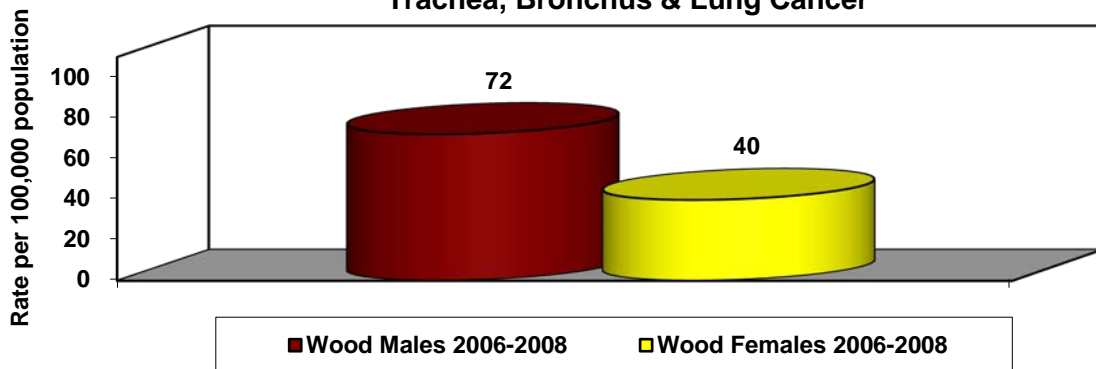
(Source: ODH Births, Vital Statistics Annual Birth Summaries by Year, 2005-2009)

## Age-Adjusted Mortality Rates for Trachea, Bronchus & Lung Cancer



\*Healthy People 2020 Target and U.S. 2007 data are for lung cancer only  
(Source: Healthy People 2020, ODH Information Warehouse, updated 4-15-10)

## Age-Adjusted Mortality Rates by Gender for Trachea, Bronchus & Lung Cancer



(Source: ODH Information Warehouse, updated 4-15-10)

# Adult Alcohol Consumption

## Key Findings

*In 2012, the Health Assessment indicated that 16% of Wood County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 40% of adults who drank had five or more drinks (for males) and 4 or more drinks (for females) on one occasion (binge drinking) in the past month. Eight percent of adults drove after drinking perhaps too much alcohol.*

## Adult Alcohol Consumption

- ◆ In 2012, more than half (59%) of the Wood County adults had at least one alcoholic drink in the past month, increasing to 63% of those with incomes more than \$25,000 and 65% of males. The 2010 BRFSS reported current drinker prevalence rates of 53% for Ohio and 55% for the U.S.
- ◆ One in six (16%) adults were considered frequent drinkers (drank on an average of three or more days per week).
- ◆ Of those who drank, Wood County adults drank 2.9 drinks on average, increasing to 4.2 drinks for those under 30.
- ◆ About one in four (24%) of all Wood County adults were considered binge drinkers. The 2010 BRFSS reported binge drinking rates of 17% for Ohio and 15% for the U.S.
- ◆ 40% of those current drinkers reported they had five or more alcoholic drinks (for males) or 4 or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition (See box above).
- ◆ 8% of adults reported driving after having perhaps too much to drink, increasing to 15% of those with incomes less than \$25,000.

### Binge Drinking

- ❖ Binge drinking is defined as men drinking five or more drinks or women drinking 4 or more drinks on one occasion or in a short period of time.
- ❖ The age group with the most binge drinkers is those 18-34 years old.
- ❖ The age group that binge drinks most often is those over the age of 65.
- ❖ More than 50% of the alcohol adults drink is done while binge drinking.
- ❖ More than 90% of the alcohol that youth drink is done while binge drinking.
- ❖ Most people who binge drink are not alcohol dependent or alcoholics.
- ❖ Binge drinking can lead to more than 54 different injuries and diseases, including car crashes, violence and STDs.

(Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Vital Signs, Binge Drinking, January 2012)

### Caffeinated Alcoholic Beverages

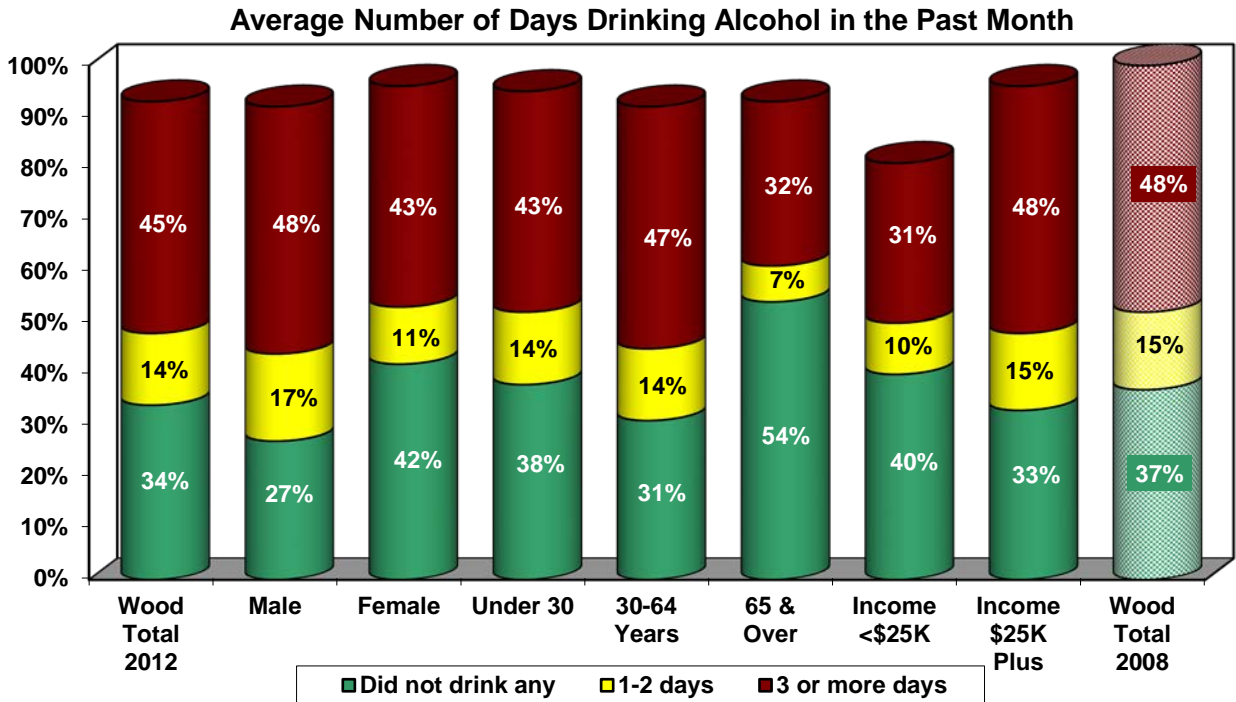
- ❖ Drinkers who consume alcohol mixed with energy drinks are 3 times more likely to binge drink than drinkers who do not report mixing alcohol with energy drinks.
- ❖ Drinkers who consume alcohol with energy drinks are about twice as likely as drinkers who do not report mixing to report being taken advantage of sexually, to report taking advantage of someone else sexually, and to report riding with a driver who was under than influence of alcohol.
- ❖ Currently, more than 25 brands of caffeinated alcoholic beverages are sold in retail alcohol outlets, including convenience stores.

(Source: CDC, Alcohol and Public Health, Fact Sheets, Caffeinated Alcoholic Beverages, July 2010, <http://www.cdc.gov/alcohol/fact-sheets/cab.htm>)

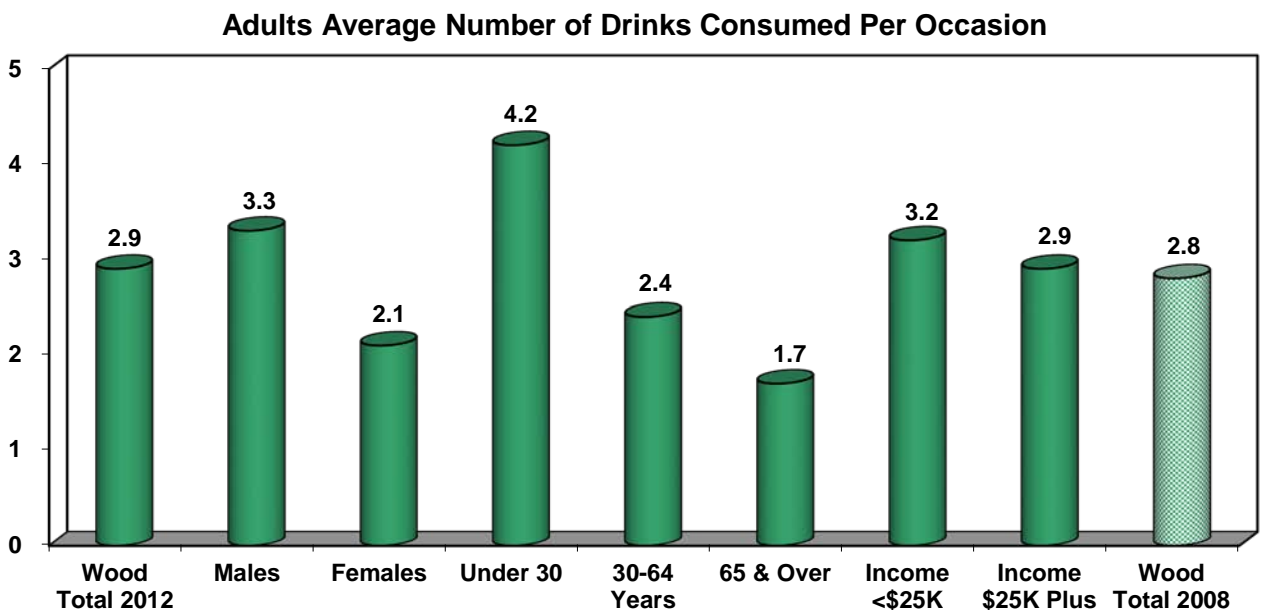
2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Drank alcohol at least once in past month	63%	59%	53%	55%
Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)	29%	24%	17%	15%

## Adult Alcohol Consumption

The following graphs show the percentage of Wood County adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 34% of all Wood County adults did not drink alcohol, 27% of Wood County males did not drink and 42% of adult females reported they did not drink.

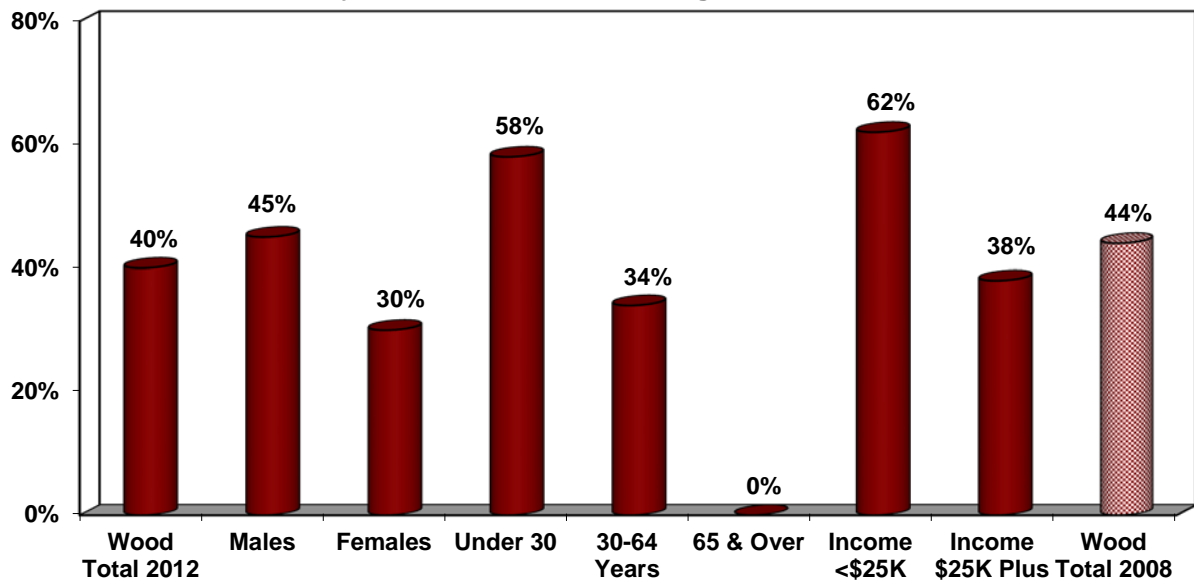


*Percentages may not equal 100% as some respondents answered "don't know"*



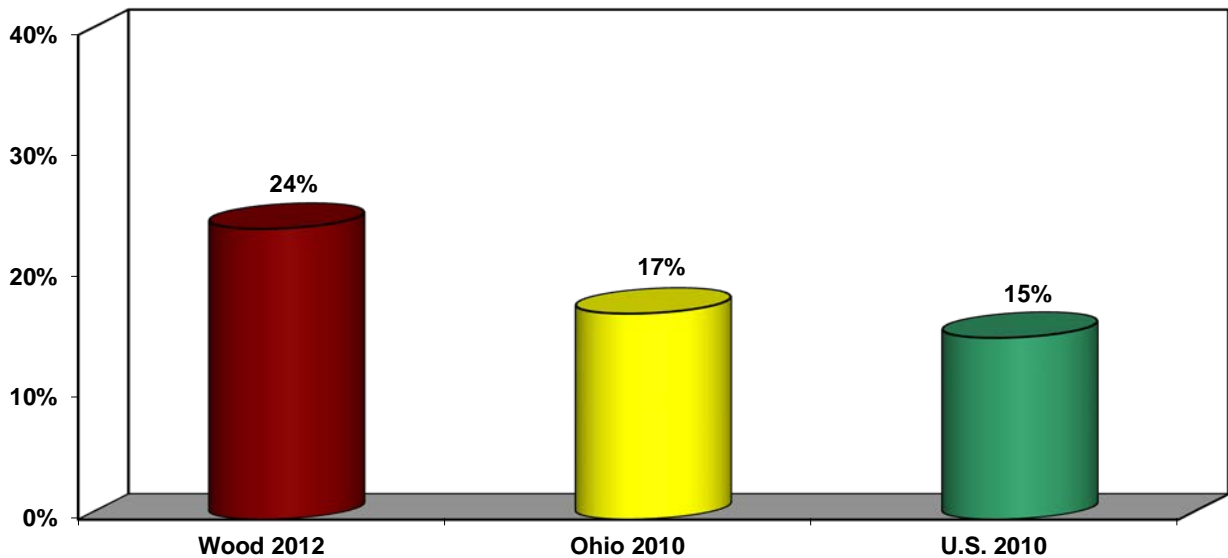
# Adult Alcohol Consumption

**Wood County Adult Drinkers Who Binge Drank in Past Month\***



\*Based on adults who have drunk alcohol in the past month. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on an occasion. Adults must have reported drinking five or more drinks (for males) or four or more drinks (for females) on an occasion at least once in the previous month.

**Adult Binge Drinkers\***



(Source: 2010 BRFSS, 2012 Wood County Health Assessment)

\*Based on all adults. Binge drinking is defined as males having five or more drinks on an occasion, females having four or more drinks on one occasion.

## Wood County Crash Statistics

The following table shows select cities in Wood County, Wood County, and Ohio motor vehicle accident statistics. The table shows:

- ◆ 29% of all fatal crashes in Wood County were alcohol-related compared to 36% in Ohio.

	City of Bowling Green 2011	City of Perrysburg 2011	Wood County 2011	Ohio 2011
Total Crashes	617	633	3,419	292,711
Alcohol-Related Total Crashes	20	22	147	12,654
Fatal Crashes	2	1	14	941
Alcohol-Related Fatal Crashes	0	0	4	341
Alcohol Impaired Drivers in Crashes	19	22	146	12,536
Injury Crashes	122	115	730	72,427
Alcohol-Related Injury Crashes	6	3	55	5,220
Property Damage Only	493	517	2,675	219,343
Alcohol-Related Property Damage Only	14	19	88	7,093
Deaths	2	1	15	1,015
Alcohol-Related Deaths	0	0	4	368
Total Non-Fatal Injuries	183	161	1,112	106,277
Alcohol-Related Injuries	13	6	86	7,575

*(Source: Ohio Department of Public Safety, Crash Reports, 2011 Traffic Crash Facts)*

### Healthy People 2020 Binge Drinking

Objective	Wood County 2012	Ohio 2010	U.S. 2010	Healthy People 2020 Target
SA 14.3: Reduce the proportion of persons engaging in binge drinking during the past 30 days—Adults aged 18 years and older	36% age 18-24 20% age 25-34 36% age 35-44 16% age 45-54 14% age 55-64 0% age 65+	30% age 18-24 30% age 25-34 20% age 35-44 16% age 45-54 9% age 55-64 4% age 65+	22% age 18-24 23% age 25-34 19% age 35-44 15% age 45-54 10% age 55-64 3% age 65+	24%

\*U.S. baseline is age-adjusted to the 2000 population standard

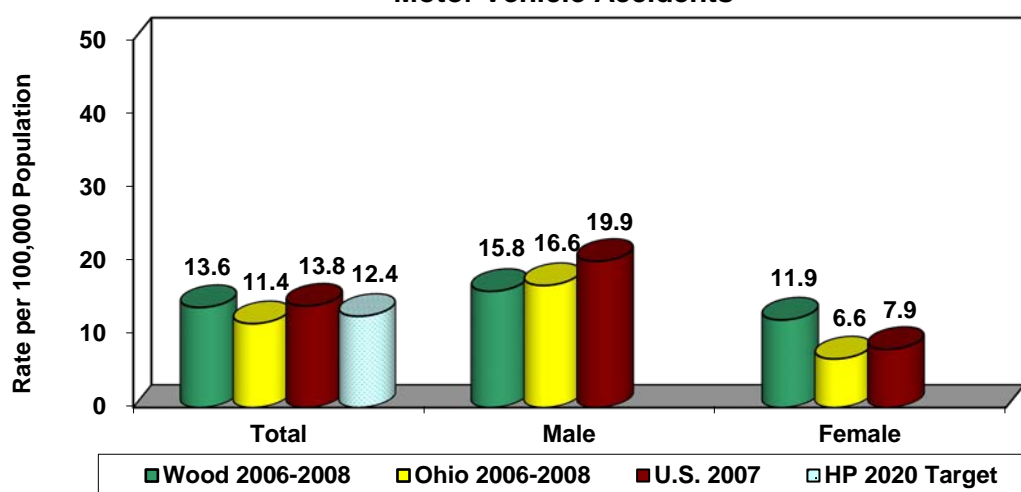
*(Sources: Health People 2020 Objectives, BRFSS, ODH Information Warehouse, 1-7-10, 2012 Wood County Health Assessment)*

## Motor Vehicle Accidents

The following graphs show Wood County and Ohio age-adjusted motor vehicle accident mortality rates per 100,000 population with comparison to Healthy People 2020 objectives. The graphs show:

- ◆ From 2006-2008, the Wood County motor vehicle age-adjusted mortality rate of 13.6 deaths per 100,000 population was greater than the state rate, less than the national rate, and greater than the Healthy People 2020 objective.
- ◆ The Wood County age-adjusted motor vehicle accident mortality rate for males is higher than the female rate from 2006 to 2008.
- ◆ 29 Wood County males died of motor vehicle accidents from 2006-2008 while 23 Wood County females died of motor vehicle accidents during the same period.

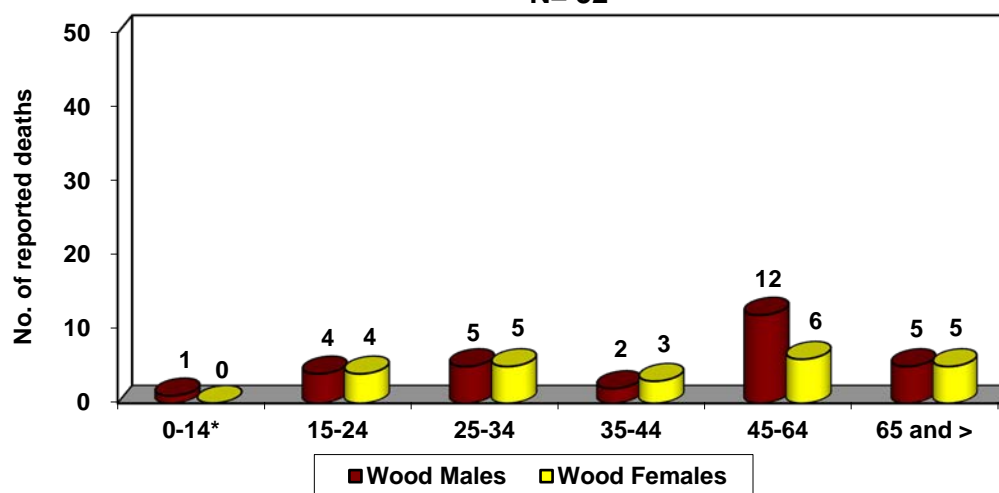
**Healthy People 2020 Objective and Age-Adjusted Mortality Rates for Motor Vehicle Accidents**



*(Source: ODH Information Warehouse, updated 4-15-10 and Healthy People 2020)*

**Wood County Number of Motor Vehicle Deaths By Age and Gender, 2006-2008**

N= 52



\* ODH Information Warehouse found zero motor vehicle accident deaths for ages 1 to 4, and found records for 1 death for ages 5 to 14  
*(Source: ODH Information Warehouse, updated 4-15-10)*



# Adult Marijuana and Other Drug Use

## Key Findings

*In 2012, 6% of Wood County adults had used marijuana during the past 6 months. 10% of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.*

## Adult Drug Use

- ◆ 6% of Wood County adults had used marijuana in the past 6 months, increasing to 13% of those under 30.
- ◆ 6% of Wood County adults reported using other recreational drugs such as cocaine, heroin, LSD, inhalants, Ecstasy, and methamphetamines.
- ◆ When asked about their frequency of marijuana and other recreational drugs in the past six months, 45% of Wood County adults who used drugs did so almost every day, and 35% did so less than once a month.
- ◆ One in ten (10%) adults had used medication not prescribed for them or they took more than prescribed to feel good or high and/or more active or alert during the past 6 months, increasing to 22% of those ages 65 and older.
- ◆ When asked about their frequency of medication misuse in the past six months, 18% of Wood County adults who used these drugs did so almost every day, and 46% did so less than once a month.
- ◆ Wood County adults indicated they disposed of unused prescription medication in the following ways: took as prescribed (44%), threw them in the trash (29%), kept them (22%), flushed them down the toilet (20%), took them to a medication collection program (10%), and sold them (1%).
- ◆ As a result of using drugs, 4% of adults reported they or their family member had failed to fulfill obligations at work or home, was placed in a dangerous situation, or had legal problems.

## Drug-Related Emergency Department Visits

- ❖ In the U.S. in 2009, there were nearly 4.6 million drug-related emergency department (ED) visits. Almost one half (2.1 million) were attributed to drug misuse or abuse.
- ❖ The misuse or abuse of pharmaceuticals resulting in ED visits occurred at a rate of 405.4 visits per 100,000 population, compared with a rate of 317.1 per 100,000 population for illicit drugs.
- ❖ Alcohol was a factor in the drug misuse or abuse accounting for less than one third (31.8%) or 650,000 visits.

(Source: SAMHSA, Drug Abuse Warning Network Report, December 28, 2010, <http://oas.samhsa.gov/2k10/DAWN034/EDHighlightsHTML.pdf>)

## Prescription Painkiller Overdoses in the U.S. Facts

- ❖ Approximately 12 million Americans (ages 12 and older) reported a non-medical use of prescription painkillers in the past year in 2010.
- ❖ Almost half of all ER visits in 2009 were due to people misusing or abusing prescription painkillers.
- ❖ There were enough prescription painkillers that were prescribed in 2010 to medicate every American adult around the clock for a month.
- ❖ The number of prescription painkiller overdoses deaths is greater than the deaths from heroin and cocaine combined.
- ❖ Nonmedical use of prescription painkillers costs health insurers up to \$72.5 billion annually in direct medical costs.

(Source: CDC, National Center for Injury Prevention and Control, Prescription Painkiller Overdoses in the U.S., obtained from: <http://www.cdc.gov/VitalSigns/pdf/2011-11-vitalsigns.pdf>)

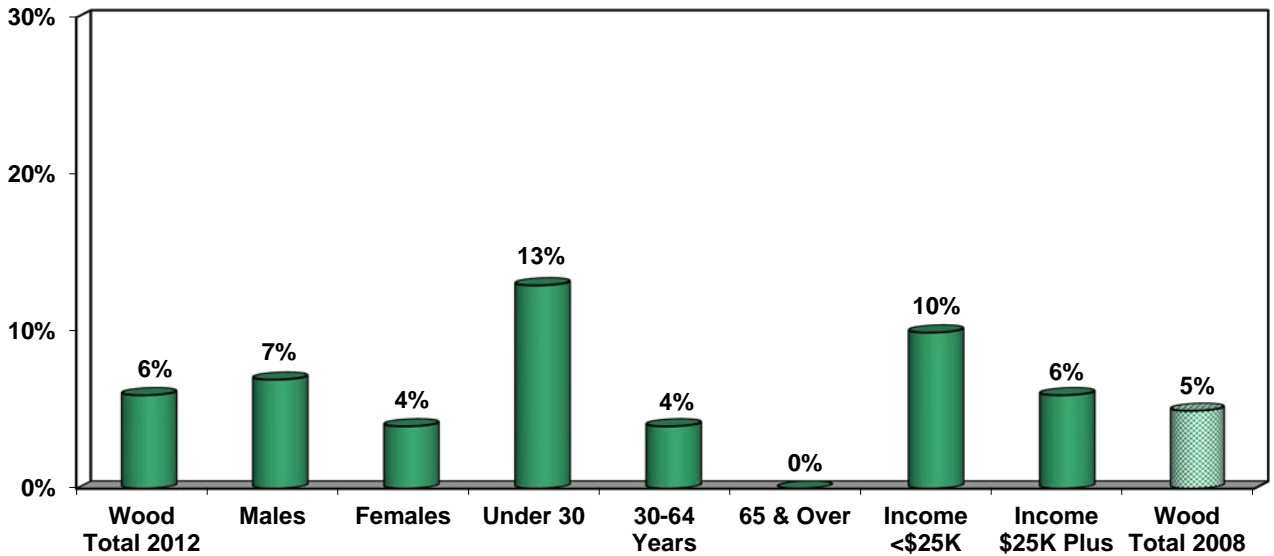
2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Adults who used marijuana in the past 6 months	5%	6%	N/A	N/A
Adults who used recreational drugs in the past 6 months	5%	6%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	6%	10%	N/A	N/A

*N/A – Not available*

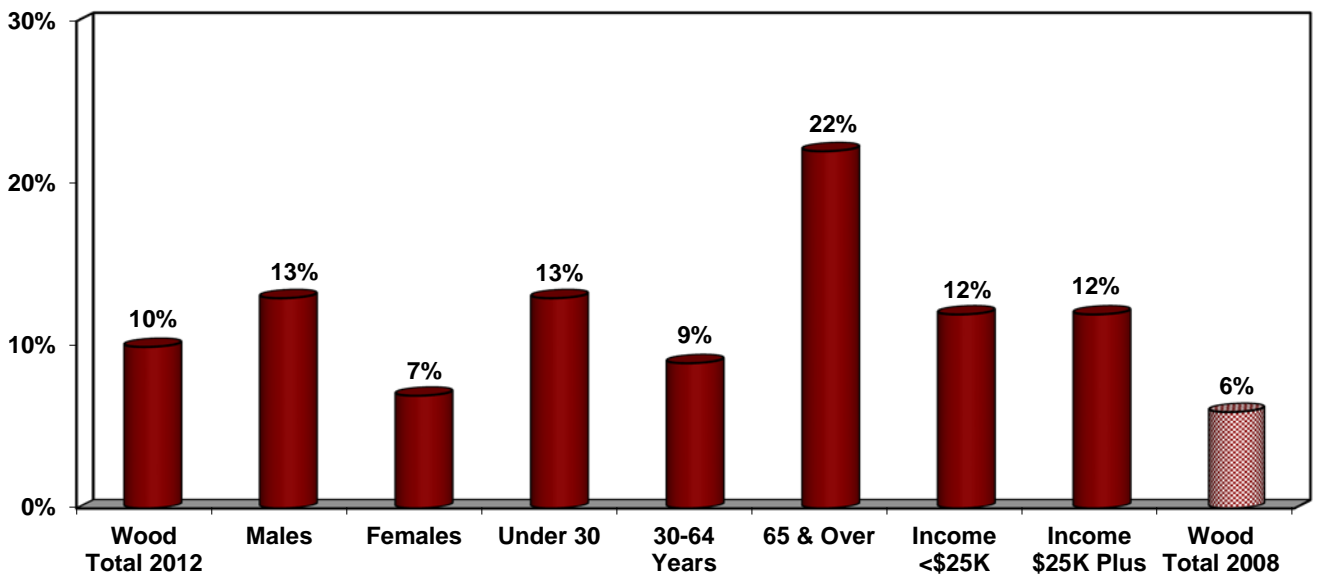
## Adult Marijuana and Other Drug Use

The following graphs are data from the 2012 Wood County Health Assessment indicating adult marijuana use in the past six months and medication misuse. Examples of how to interpret the information include: 6% of all Wood County adults used marijuana in the past six months, 13% of adults under the age of 30 were current users, and 10% of adults with incomes less than \$25,000 were current users.

**Wood County Adult Marijuana Use in Past 6 Months**



**Wood County Adult Medication Misuse in Past 6 Months**



# Women's Health

## Key Findings

*In 2012, about two-thirds (66%) of Wood County women over the age of 40 reported having a mammogram in the past year. 64% of Wood County women ages 19 and over have had a clinical breast exam and 63% have had a Pap smear to detect cancer of the cervix in the past year. The Health Assessment determined that under one-fifth (21%) of Wood County women had high blood pressure, 26% had high blood cholesterol, 26% were obese, and 5% were identified as smokers, known risk factors for cardiovascular diseases.*

## Women's Health Screenings

- ◆ In 2012, 59% of women had a mammogram at some time in their life and more than two-fifths (41%) had this screening in the past year.
- ◆ About two-thirds (66%) of women ages 40 and over had a mammogram in the past year and 82% had one in the past two years. The 2010 BRFSS reported that 75% of women 40 and over in the U.S. and 74% in Ohio, had a mammogram in the past two years.
- ◆ Most (89%) Wood County women have had a clinical breast exam at some time in their life and 64% had one within the past year.
- ◆ Most (91%) women ages 40 and over had a clinical breast exam in the past two years. The 2010 BRFSS reported that 77% of women 40 and over in the U.S. and 75% in Ohio, had a clinical breast exam in the past two years.
- ◆ This assessment has identified that 91% of Wood County women have had a Pap smear and 63% reported having had the exam in the past year. 79% of women had a pap smear in the past three years. The 2010 BRFSS indicated that 81% of U.S. and 82% of Ohio women had a pap smear in the past three years.
- ◆ 60% of Wood county women have done a self-breast exam in the past year.
- ◆ Wood County females listed the following as their usual source of services for female health concerns: private gynecologist (71%), general or family physician (15%), the health department clinic (2%), a family planning clinic (1%), and some other place (1%). 10% of women did not have a usual source for female health concerns.

## Women's Health Concerns

- ◆ Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Wood County, the 2012 Health Assessment has identified that:
  - 5% of all women were current smokers (16% U.S., 22% Ohio, 2010 BRFSS)
  - 57% were overweight or obese (57% U.S., 59% Ohio, 2010 BRFSS)
  - 26% were diagnosed with high blood cholesterol (36% U.S., 37% Ohio, 2009 BRFSS)
  - 21% were diagnosed with high blood pressure (28% U.S. and 30% Ohio, 2009 BRFSS)
  - 1% have been diagnosed with diabetes (10% U.S., 11% Ohio, 2010 BRFSS)

### Wood County Female Leading Types of Death 2006 - 2008

1. Heart Diseases (30% of all deaths)
2. Cancers (21%)
3. Stroke (7%)
4. Alzheimer's Disease (5%)
5. Chronic Lower Respiratory Diseases (5%)

*(Source: ODH Information Warehouse, updated 4-15-10)*

### Ohio Female Leading Types of Death 2006 - 2008

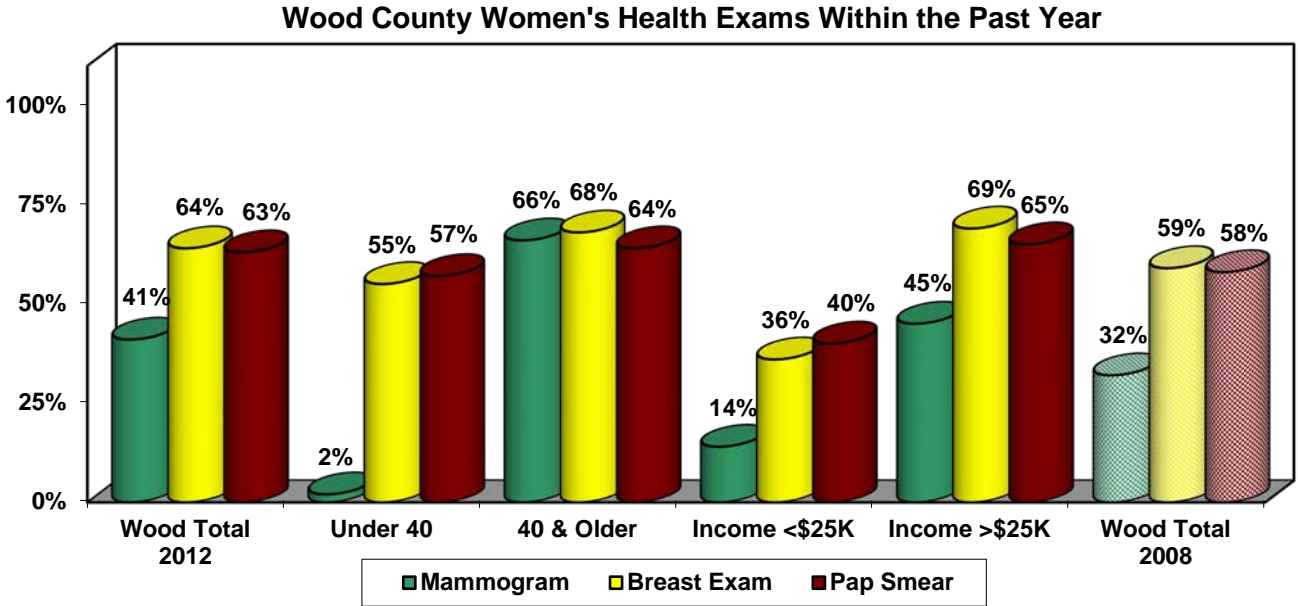
1. Heart Diseases (25% of all deaths)
2. Cancers (22%)
3. Stroke (6%)
4. Chronic Lower Respiratory Diseases (6%)
5. Alzheimer's Disease (5%)

*(Source: ODH Information Warehouse, updated 4-15-10)*

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Had a mammogram in the past two years (age 40 & over)	67%	82%	74%	75%
Had a clinical breast exam in the past two years (age 40 & over)	70%	91%	75%	77%
Had a pap smear in the past three years	75%	79%	82%	81%

## Women's Health

The following graph shows the percentage of Wood County female adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 41% of Wood County females have had a mammogram within the past year, 64% have had a clinical breast exam, and 63% have had a Pap smear.



### Healthy People 2020 Cervical Cancer Screening

Objective	Wood County 2012	Ohio 2010	U.S. 2010	Healthy People 2020 Target
C-15: Increase the proportion of women who receive a cervical cancer screening based on the most recent guidelines (Ages 21-65, pap smear in the past 3 years)	80% age 25-34 100% age 35-44 93% age 45-54 91% age 55-64	88% age 25-34 87% age 35-44 85% age 45-54 80% age 55-64	91% age 25-34 90% age 35-44 86% age 45-54 83% age 55-64	93%

\*U.S. baseline is age-adjusted to the 2000 population standard  
(Sources: Health People 2020 Objectives, BRFSS, ODH Information Warehouse, 1-7-10, 2012 Wood County Health Assessment)

### Cancer and Women

- ❖ More women in the U.S. die from lung cancer than any other type of cancer. The most important thing you can do to prevent lung cancer is not to start smoking, or to quit if you smoke.
- ❖ Breast cancer is the most common cause of cancer and the second most common cause of cancer deaths in American women. Mammograms are the best way to find breast cancer early, before it can be felt, and when it is easier to treat.
- ❖ Colorectal cancer is the third leading cause of cancer deaths in America women. Screening tests can find precancerous polyps so they can be removed before they turn into cancer. Everyone should be tested for colorectal cancer regularly, starting at age 50.
- ❖ Gynecologic cancers (cervix, ovaries, and uterus) can be prevented by pap tests, which can find abnormal cells and detect cancer early.

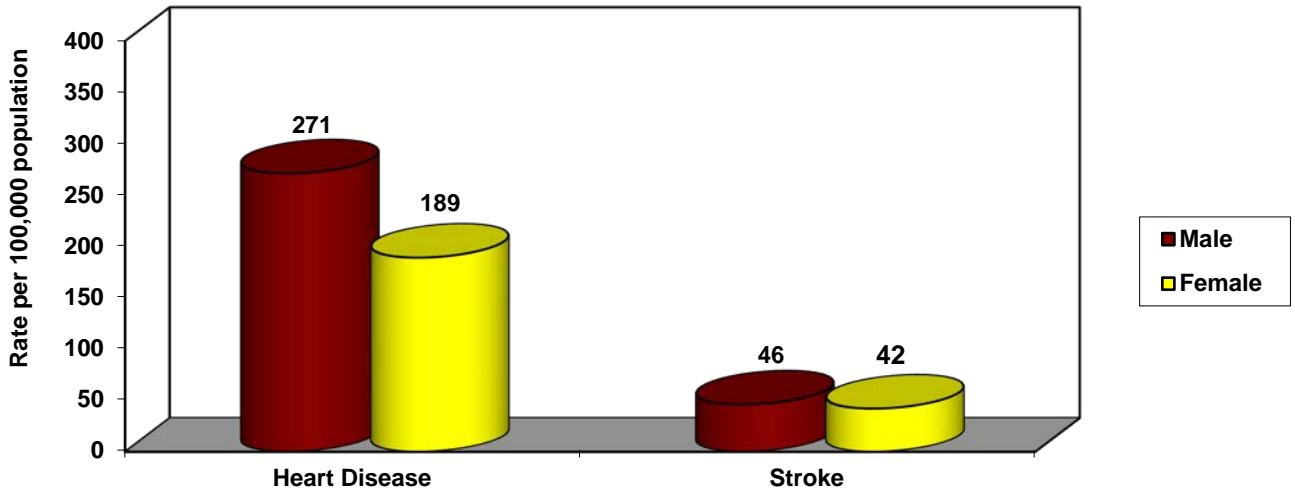
(Source: Center for Disease Control and Prevention, National Cancer Institute, 2010)

# Women's Health

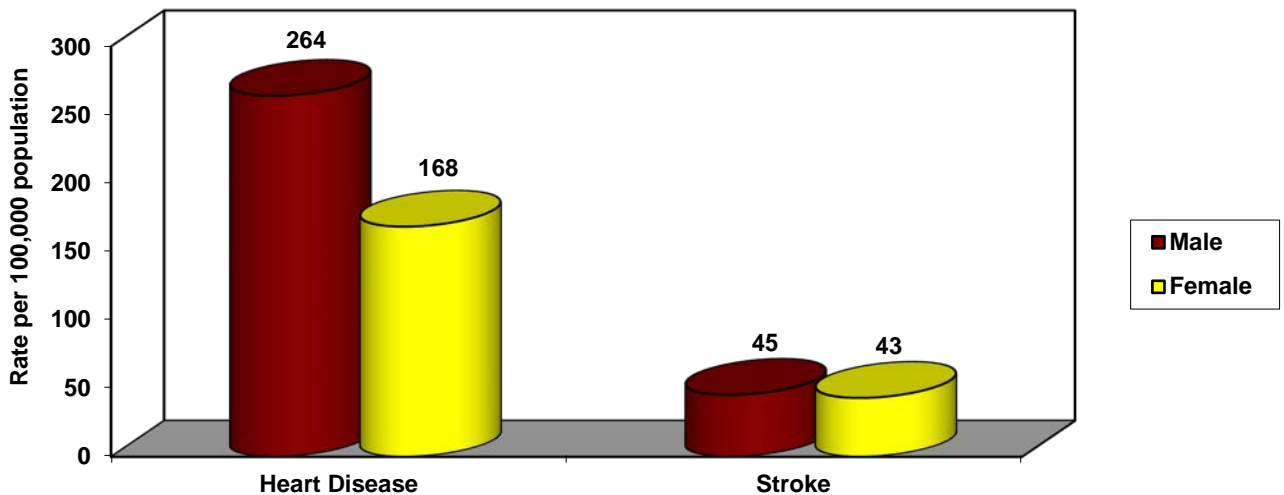
The following graphs show the Wood County and Ohio age-adjusted mortality rates per 100,000 population for cardiovascular diseases. The graphs show:

- ◆ From 2006-2008, the Wood County and Ohio female age-adjusted mortality rate was lower than the male rate for both heart disease and stroke.
- ◆ The Wood County female heart disease mortality rate was higher than the Ohio female rate.

**Wood County Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2006-2008**



**Ohio Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2006-2008**

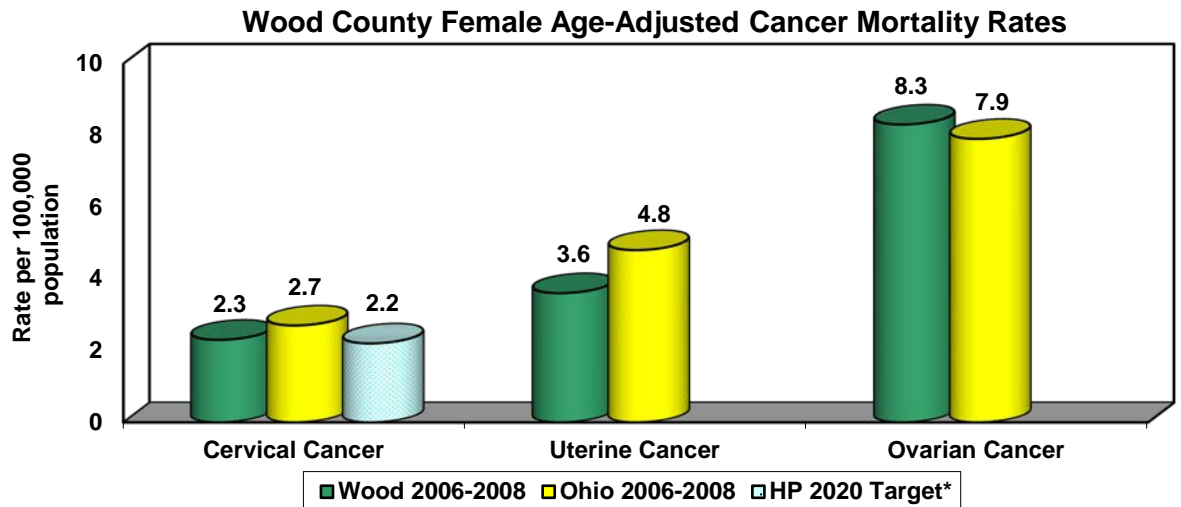
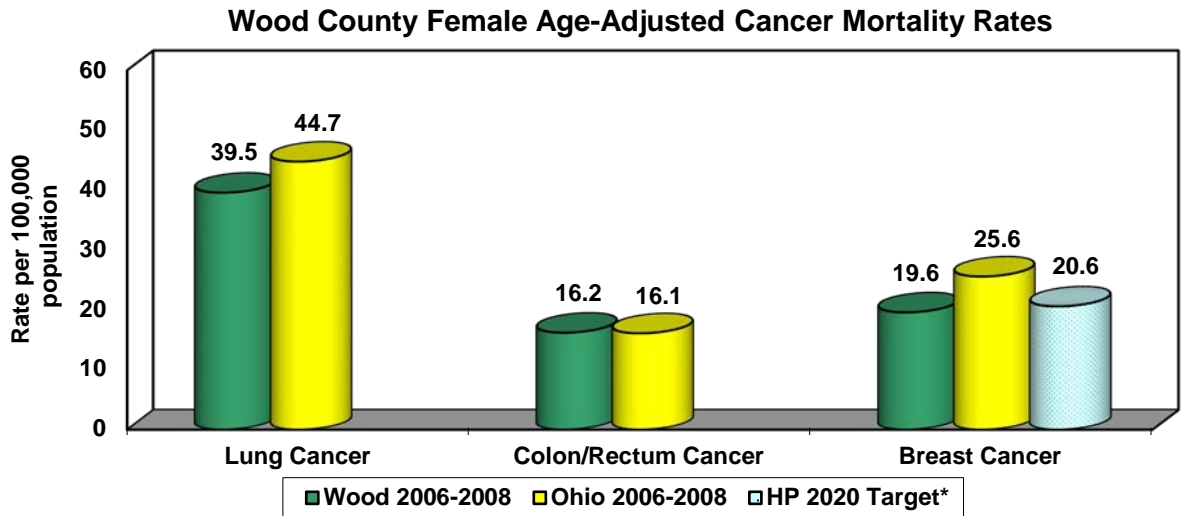


*(Source for graphs: ODH Information Warehouse, updated 4-15-10)*

## Women's Health

The following graphs show the Wood County age-adjusted mortality rates per 100,000 population for women's health with comparison to Healthy People 2020 objectives when available. The graphs show:

- ◆ From 2006-2008, the Wood County age-adjusted mortality rate for female lung cancer was less than the Ohio rate.
- ◆ From 2006-2008, the Wood County age-adjusted breast cancer mortality rate was less than the Ohio rate and the Healthy People 2020 target objective.
- ◆ The Wood County age-adjusted cervical and uterine cancer mortality rates for 2006-2008 were both lower than the state rate, while ovarian cancer mortality rate was higher.



*\*Note: Healthy People 2020 target rates are not gender specific; Healthy People 2020 Targets may not be available for all diseases. (Source: ODH Information Warehouse, updated 4-15-10, and Healthy People 2020)*

# Men's Health

## Key Findings

In 2012, more than half (54%) of Wood County males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. Nearly three-fifths (58%) of males over the age of 50 had a digital rectal exam in the past year. Major cardiovascular diseases (heart disease and stroke) accounted for 33% and cancers accounted for 25% of all male deaths in Wood County from 2006-2008. More than one-third (36%) of Wood County men had been diagnosed with high blood pressure, 34% had high blood cholesterol, and 16% were identified as smokers, which, along with obesity (31%), are known risk factors for cardiovascular diseases.

## Men's Health Screenings

- ◆ More than two-fifths (42%) of Wood County males had a Prostate-Specific Antigen (PSA) test at some time in their life and 27% had one in the past year.
- ◆ Over half (54%) of men had a digital rectal exam in their lifetime and 31% had one in the past year.
- ◆ Three-fifths (60%) of men ages 40 and over had a PSA test in the past two years. The 2010 BRFSS reported that 53% of men 40 and over in the U.S. and 54% in Ohio, had a PSA test in the past two years.
- ◆ 80% of males age 50 and over had a PSA test at some time in their life, and 54% had one in the past year.
- ◆ 89% of males age 50 and over had a digital rectal exam at some time in their life, and 58% have had one in the past year.
- ◆ About one in four (24%) men had done a self-testicular exam in the past year.

## Men's Health Concerns

- ◆ From 2006-2008, major cardiovascular diseases (heart disease and stroke) accounted for 33% of all male deaths in Wood County *(Source: ODH Information Warehouse)*.
- ◆ Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Wood County the 2012 health assessment has identified that:
  - 16% of all men were current smokers (19% U.S., 23% Ohio, 2010 BRFSS)
  - 70% were overweight or obese (71% U.S., 73% Ohio, 2010 BRFSS)
  - 34% were diagnosed with high blood cholesterol (40% U.S., 43% Ohio, 2009 BRFSS)
  - 36% were diagnosed with high blood pressure (30% U.S., 33% Ohio, 2009 BRFSS)
  - 12% have been diagnosed with diabetes (9% U.S., 10% Ohio, 2010 BRFSS)
- ◆ From 2006-2008, the leading cancer deaths for Wood County males were lung, colorectal, prostate, Non-Hodgkins Lymphoma, and pancreatic cancers *(Source: ODH Information Warehouse)*. Statistics from the same period for Ohio males show lung, prostate, colorectal, pancreas, and esophagus cancers as the leading cancer deaths.

### Wood County Male Leading Types of Death 2006 - 2008

1. Heart Diseases (28% of all deaths)
2. Cancers (25%)
3. Accidents, Unintentional Injuries (6%)
4. Chronic Lower Respiratory Diseases (6%)
5. Diabetes Mellitus (5%)

*(Source: ODH Information Warehouse, updated 4-15-10)*

### Ohio Male Leading Types of Death 2006 - 2008

1. Heart Diseases (26% of all deaths)
2. Cancers (25%)
3. Chronic Lower Respiratory Diseases (6%)
4. Accidents, Unintentional Injuries (6%)
5. Stroke (4%)

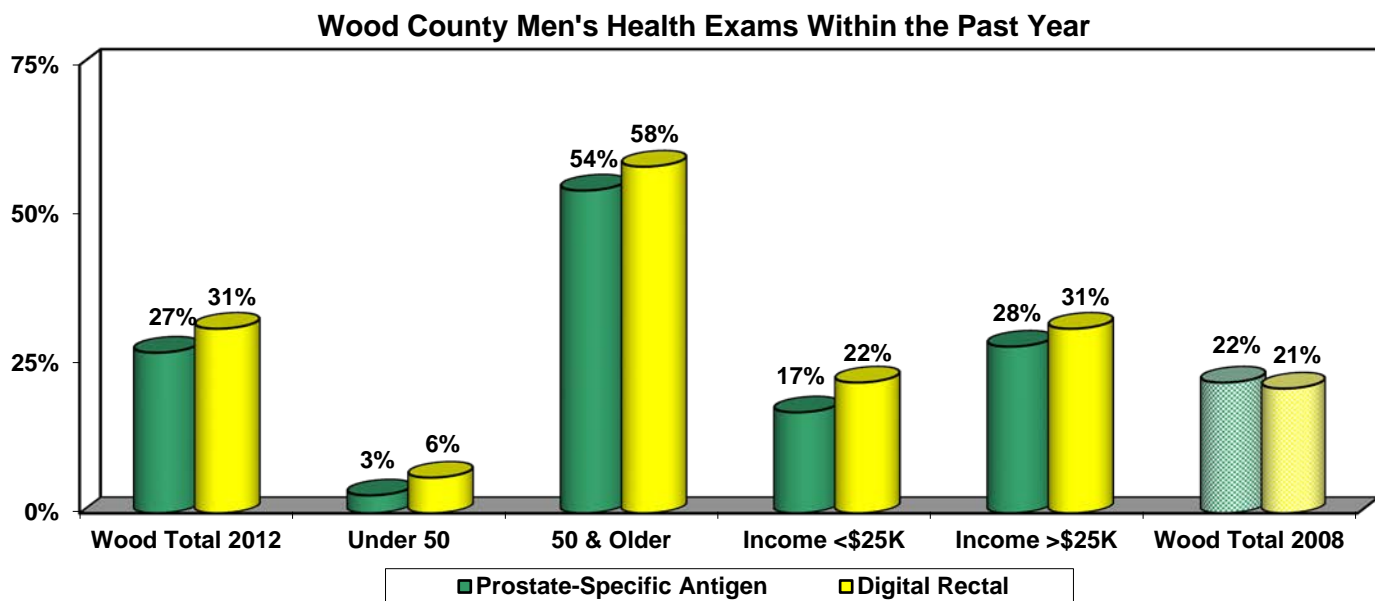
*(Source: ODH Information Warehouse, updated 4-15-10)*

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Had a PSA test in within the past two years (age 40 & over)	N/A	60%	54%	53%
Had a digital rectal exam within the past year	21%	31%	N/A	N/A

N/A – Not available

## Men's Health

The following graph shows the percentage of Wood County males surveyed that have had a PSA test and digital rectal exam in the past year. Examples of how to interpret the information shown on the graph include: 27% of Wood County males have had a PSA test within the past year and 31% have had a digital rectal exam.



### Men's Health Data

- ❖ Approximately 12% of adult males aged 18 years or older reported fair or poor health.
- ❖ 22% of adult males in the U.S. currently smoke.
- ❖ Of the adult males in the U.S., 31.5% had 5 or more drinks in 1 day at least once in the past year.
- ❖ Only 52% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- ❖ There are 20% of males under the age of 65 without health care coverage.
- ❖ The leading causes of death for males in the United States are heart disease, cancer and accidents (unintentional injuries).

*(Source: CDC, National Center for Health Statistics, Men's Health, Fast Stats, 2/18/2011 from [http://www.cdc.gov/nchs/fastats/mens\\_health.htm](http://www.cdc.gov/nchs/fastats/mens_health.htm))*

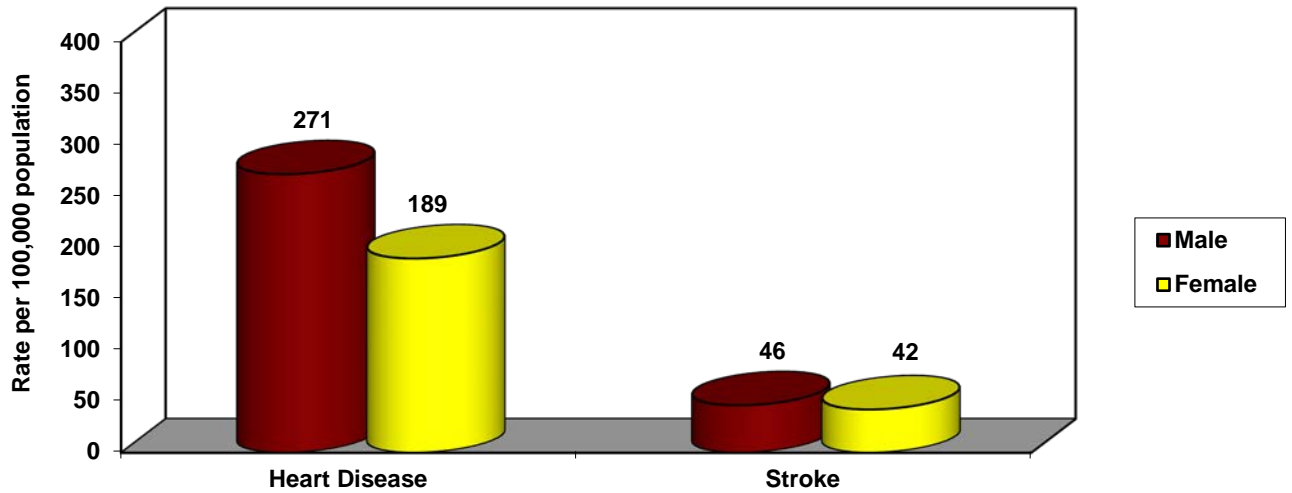


# Men's Health

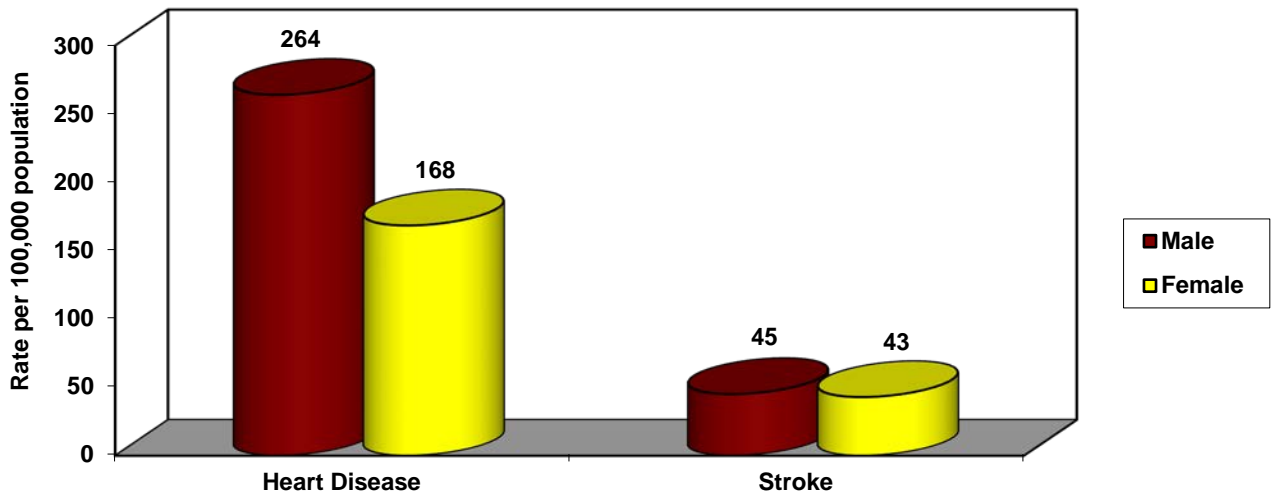
The following graphs show the Wood County and Ohio age-adjusted mortality rates per 100,000 population for men's cardiovascular diseases. The graphs show:

- ◆ From 2006-2008, the Wood County and Ohio male age-adjusted mortality rate was higher than the female rate for both heart disease and stroke.
- ◆ The Wood County male age-adjusted heart disease and stroke mortality rates were higher than the Ohio male rates.

**Wood County Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2006-2008**



**Ohio Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2006-2008**

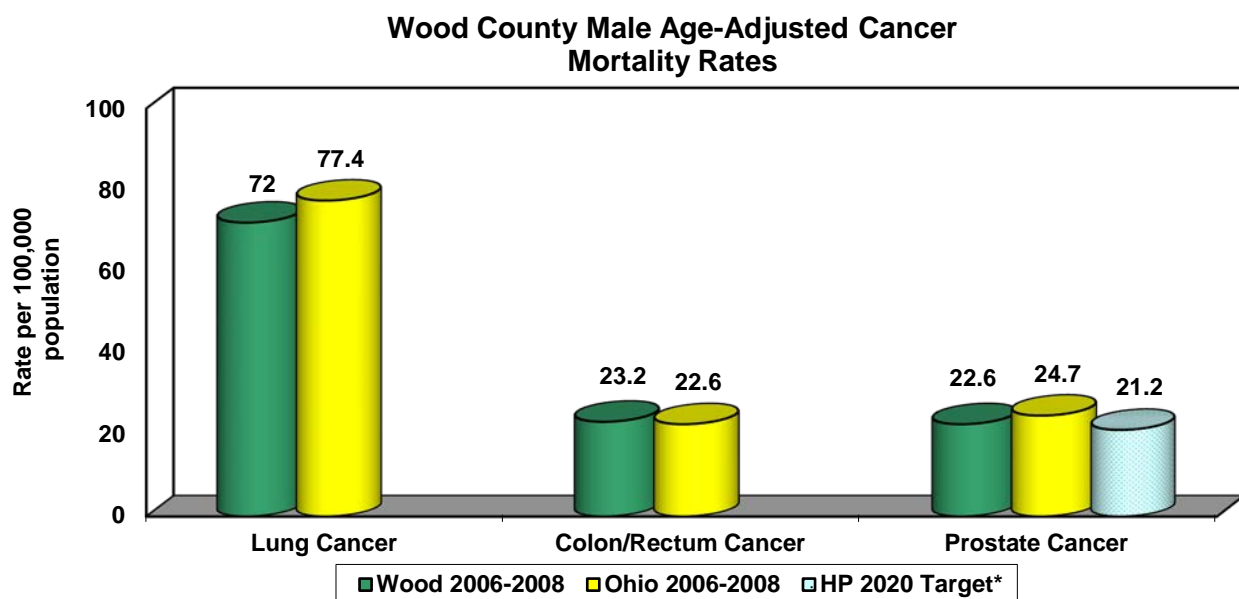


*(Source for graphs: ODH Information Warehouse, updated 4-15-10)*

## Men's Health

The following graph shows the Wood County age-adjusted mortality rates per 100,000 population for men's health with comparison to Healthy People 2020 objectives. The graph shows:

- ◆ From 2006-2008, the Wood County age-adjusted mortality rate for male lung cancer was lower than the Ohio rate.
- ◆ The age-adjusted prostate cancer mortality rate in Wood County for 2006-2008 was lower than the Ohio rate but higher than the Healthy People 2020 objective.



*\*Note: the Healthy People 2020 target rates are not gender specific.  
(Source: ODH Information Warehouse and Healthy People 2020)*

### Cancer and Men

- ❖ More men in the U.S. die from lung cancer than any other type of cancer. The most important thing you can do to prevent lung cancer is not to start smoking, or to quit if you smoke.
- ❖ Prostate cancer is the most common cancer in men in the U.S., not counting skin cancer. It is the second most common cause of cancer death in men. While all men are at risk for prostate cancer, some factors increase risk. These include:
  - older age
  - family history of prostate cancer
  - being African American
- ❖ Colorectal cancer is the third leading cause of cancer deaths in America men. Screening tests can find precancerous polyps so they can be removed before they turn into cancer. Everyone should be tested for colorectal cancer regularly, starting at age 50.

*(Source: Center for Disease Control and Prevention, National Cancer Institute, 2010)*

# Adult Preventive Medicine and Health Screenings

## Key Findings

Over one-third (34%) of adults had a flu shot during the past 12 months. 64% of adults ages 65 and over had a pneumonia vaccination at some time in their life.

## Preventive Medicine

- ◆ Over one-third (34%) of Wood County adults had a flu vaccine during the past 12 months, increasing to 64% of those ages 65 and over.
- ◆ Of those who had a flu vaccine, 100% had the shot and no one reported having the nasal spray.
- ◆ 46% of those ages 50 and older received a flu vaccine in the past year. The 2010 BRFSS reported that 55% of U.S. and 52% of Ohio adults ages 50 and over had a flu vaccine in the past year.
- ◆ Almost one-quarter (22%) of adults have had a pneumonia shot in their life, increasing to 64% of those ages 65 and over. The 2010 BRFSS reported that 69% of U.S. and 69% of Ohio adults ages 65 and over have had a pneumonia shot in their life.

### Screening for Colorectal Cancer

- ◆ Colorectal cancer is the 3<sup>rd</sup> most common cancer in adults and the 2<sup>nd</sup> leading cause of cancer deaths of men and women in the U.S.
- ◆ Screening tests look to remove polyps and lesions in the colon that can prevent colorectal cancer.
- ◆ *The American Cancer Society* recommends that those 50 years and older should be screened using the following screening recommendations:
  - Fecal occult blood test (FOBT) every year
  - Sigmoidoscopy every 5 years
  - Colonoscopy every 10 years

(Source: American Cancer Society, Colorectal Cancer Early Detection, last medical review, 2012, <http://www.cancer.org/acs/groups/cid/documents/webcontent/003170-pdf.pdf>)

## Preventive Health Screenings and Exams

- ◆ One in nine (11%) adults had a colorectal cancer screening within the past two years, increasing to 24% of those ages 50 and over.
- ◆ 20% of adults received preventive testing for skin cancer within the past two years, increasing to 25% of those ages 65 and over.
- ◆ 18% of females were tested for osteoporosis within the past two years.
- ◆ 16% of adults received screening for their hearing within the past two years, increasing to 20% of males.
- ◆ 3% of adults received screening for their memory within the past two years, increasing to 4% of those ages 65 and over.
- ◆ 59% of adults received preventive testing for vision within the past two years, increasing to 67% of those ages 65 and over and 69% of females.
- ◆ In the past year, 66% of Wood County women ages 40 and over have had a mammogram.
- ◆ In the past year, 54% of men ages 50 and over had a Prostate-Specific Antigen (PSA) test.
- ◆ See the Women and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Wood County adults.

2008/2012 Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Had a flu shot in the past year (ages 50 & over)	N/A	46%	52%	55%
Had a pneumonia vaccination (ages 65 and over)	57%	64%	69%	69%

*N/A – Not available*

# Adult Preventive Medicine and Health Screenings

## Wood County Adult Health Screening Results

GENERAL SCREENING RESULTS	Total Sample
Diagnosed with High Blood Pressure	30%
Diagnosed with High Blood Cholesterol	31%
Diagnosed with Diabetes	8%

*(Percentages based on all Wood County adults surveyed)*

## Wood County Adults Having Discussed Healthcare Topics With Their Healthcare Professional in the Past 12 Months

HEALTHCARE TOPICS	Total 2008	Total 2012
DiETING or Eating Habits	36%	32%
Physical Activity or Exercise	39%	34%
Injury Prevention Such As Safety Belt Use & Helmet Use	10%	2%
Drug Use	1%	2%
Alcohol Use	4%	6%
Alcohol Use When Taking Prescription Drugs	N/A	7%
Quitting Smoking	13%	8%
Sexual Practices Including Family Planning, STDs, AIDS, & Condom Use	10%	9%
Depression, Anxiety, or Emotional Problems	N/A	18%
Domestic Violence	4%	1%
Mental Health Issues	N/A	9%
Significance of Family History	N/A	19%

*\*N/A – Question not asked*

## Healthy People 2020 Pneumonia Vaccination

Objective	Wood County 2012	Ohio 2010	U.S. 2010	Healthy People 2020 Target
IID-13.1: Increase the percentage of Non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease	55% age 65-74 86% age 75+	63% age 65-74 75% age 75+	63% age 65-74 77% age 75+	90%

*\*U.S. baseline is age-adjusted to the 2000 population standard*

*(Sources: Health People 2020 Objectives, BRFSS, ODH Information Warehouse, 1-7-10, 2012 Wood County Health Assessment)*

# Adult Sexual Behavior and Pregnancy Outcomes

## Key Findings

*In 2012, over two-thirds (69%) of Wood County adults had sexual intercourse. Five percent of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs (Source: CDC, STDs in Adolescents and Young Adults, 2010 STD Surveillance).*

## Adult Sexual Behavior

- ◆ Over two-thirds (69%) of Wood County adults had sexual intercourse in the past year.
- ◆ 5% of adults reported they had intercourse with more than one partner in the past year, increasing to 16% of those under the age of 30.
- ◆ Wood County adults used the following methods of birth control: vasectomy (24%), tubes tied (15%), condoms (14%), birth control pill (14%), hysterectomy (12%), withdrawal (7%), rhythm method (7%), abstinence (6%), IUD (2%), diaphragm (2%), contraceptive implants (<1%), and emergency contraception (<1%).
- ◆ 8% of Wood County adults were not using any method of birth control.
- ◆ Wood County adults did not use birth control for the following reasons:
  - They or their partner had a hysterectomy/vasectomy/tubes tied (33%)
  - They or their partner is post-menopausal (13%)
  - They did not think they or their partner could get pregnant (4%)
  - Religious preferences (4%)
  - They or their partner had just had a baby (3%)
  - Their partner is currently pregnant (3%)
  - They did not care if they or their partner got pregnant (3%)
  - They or their partner is currently breast-feeding (2%)
  - They did not want to use birth control (1%)
  - They or their partner did not like birth control/had a fear of side effects (1%)
  - No regular partner (1%)
  - They wanted to get pregnant (1%)
  - They could not pay for birth control (1%)
  - Their partner did not want to use birth control (<1%)
  - They had a same-sex partner (<1%)
- ◆ 5% of adults had been forced to participate in sexual activity when they did not want to, increasing to 9% of females and 10% of those with incomes less than \$25,000.
- ◆ 15% of adults engaged in sexual activity following alcohol or other drug use that they would not have done if sober, increasing to 24% of those under 30 and 24% of those with incomes less than \$25,000.
- ◆ 2% of adults have been treated for a sexually transmitted or venereal disease in the past five years, increasing to 13% of those who have had 2 or more sexual partners in the past year.
- ◆ Wood County adults made the following sexual behavior changes in the past year due to what they know about STDs, including HIV:
  - Now have sexual intercourse with only the same partner (34%)
  - Always use condoms for protection (8%)
  - Decreased the number of sexual partners or became abstinent (1%)
  - Did not make any changes (59%)

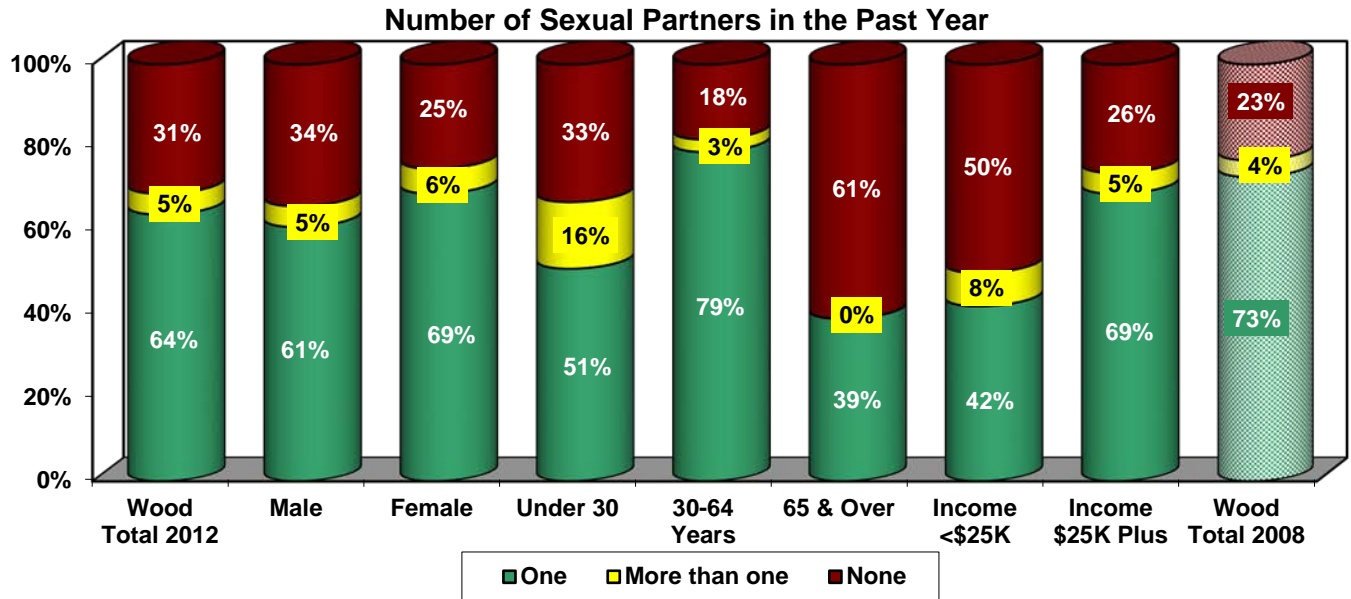
## STDs and the Elderly

- ◆ Older people are at increasing risk for HIV/AIDS and other STDs.
- ◆ People age 50 and older represent almost one-fourth of all people with HIV/AIDS in the U.S
- ◆ In general, older Americans have been less exposed to education and prevention messages, which may contribute to less STD testing.
- ◆ In addition, older people are less likely than younger people to talk about their sex lives or drug use with their doctors.
- ◆ Finally, older people often mistake the symptoms of HIV/AIDS and other STDs for the aches and pains of normal aging, contributing to less testing.

(Source: (National Prevention Information Network, 2012, <http://www.cdcnpin.org/scripts/population/elderly.asp>)

## Adult Sexual Behavior and Pregnancy Outcomes

The following graph shows the sexual activity of Wood County adults. Examples of how to interpret the information in the graph include: 64% of all Wood County adults had one sexual partner in the last 12 months and 5% had more than one, and 61% of males had one partner in the past year.



*Respondents were asked: "During the past 12 months, with how many different people have you had sexual intercourse?"*

### United States 2010 Sexually Transmitted Disease Surveillance Profile

- ❖ Chlamydia case reports have been increasing steadily over the past 20 years, and in 2010, 1.3 million chlamydia cases were reported. This was the largest number of cases ever reported to CDC for any condition, with a case rate of 426.0 per 100,000 population and a 5.1% increase from 2009.
- ❖ Gonorrhea cases increased slightly from 2009 to 2010, with more than 300,000 cases reported in 2010. Cephalosporins remain the only class of antibiotics recommended for the treatment of gonorrhea.
- ❖ Studies from 2003-2005 show that there was an overall high-risk HPV prevalence of 23%. Differences in HPV infection by age groups were observed, such as 35% in those aged 14-19 year olds, 29% in those aged 20-29, 13% in those 30-39 year olds, 11% in those aged 40-49, and 6.3% in those aged 50-65 year olds.

*(Source: CDC, Sexually Transmitted Diseases, 2010 Sexually Transmitted Diseases Surveillance, National Profile, <http://www.cdc.gov/std/stats10/default.htm>)*

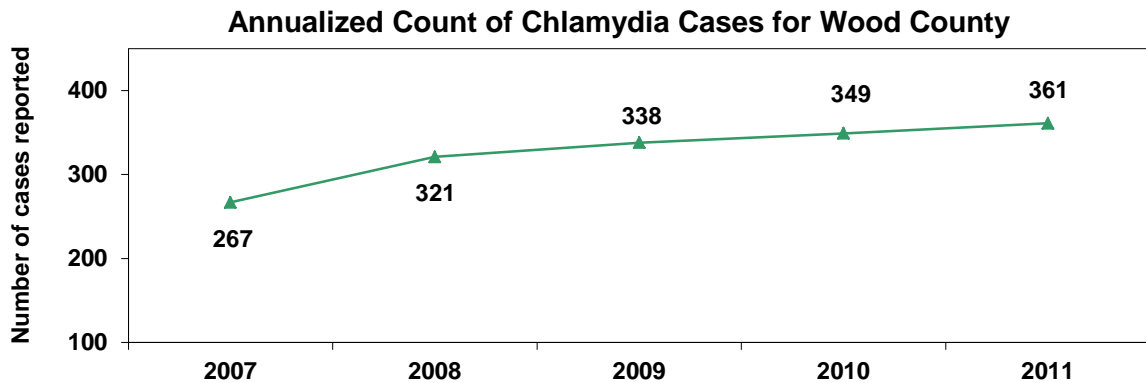
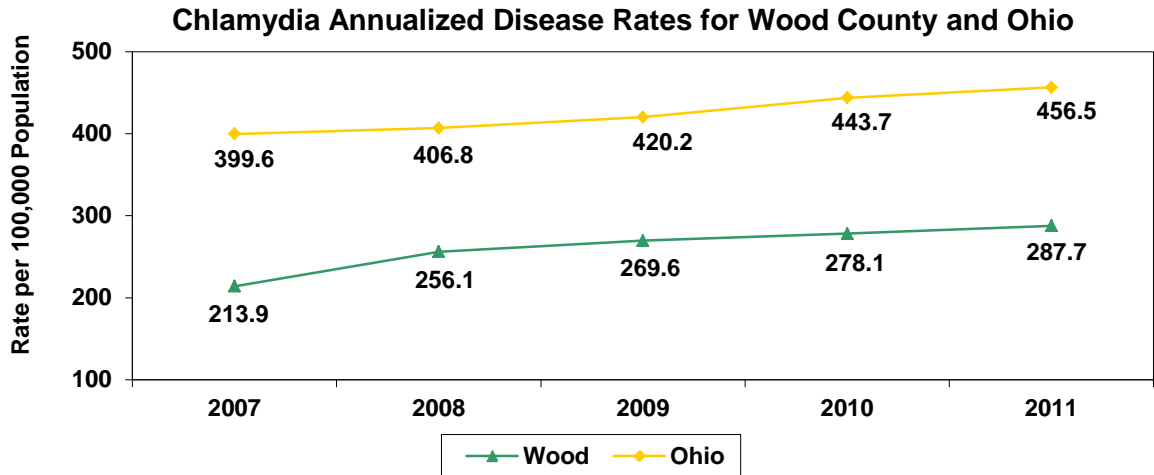
2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Had more than one sexual partner in past year	4%	5%	N/A	N/A

*N/A – Not available*

## Adult Sexual Behavior and Pregnancy Outcomes

The following graphs show Wood County chlamydia and gonorrhea disease rates per 100,000 population updated April 18, 2012 by the Ohio Department of Health. The graphs show:

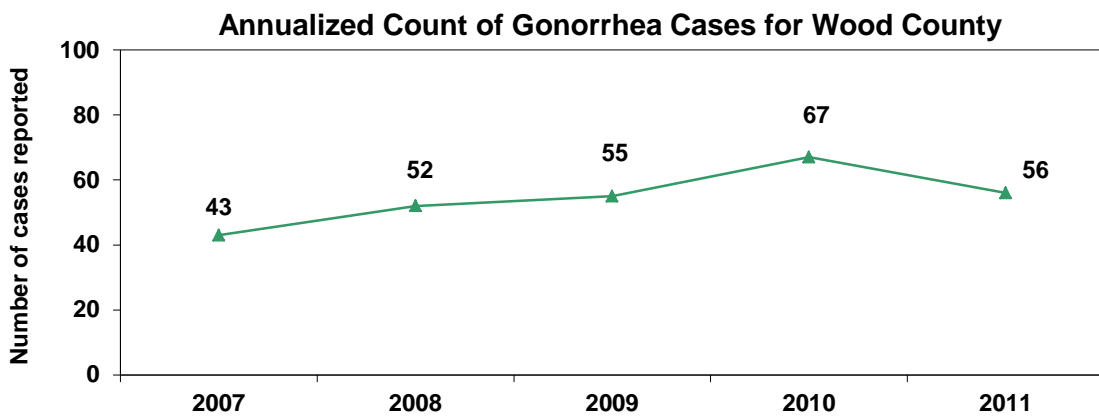
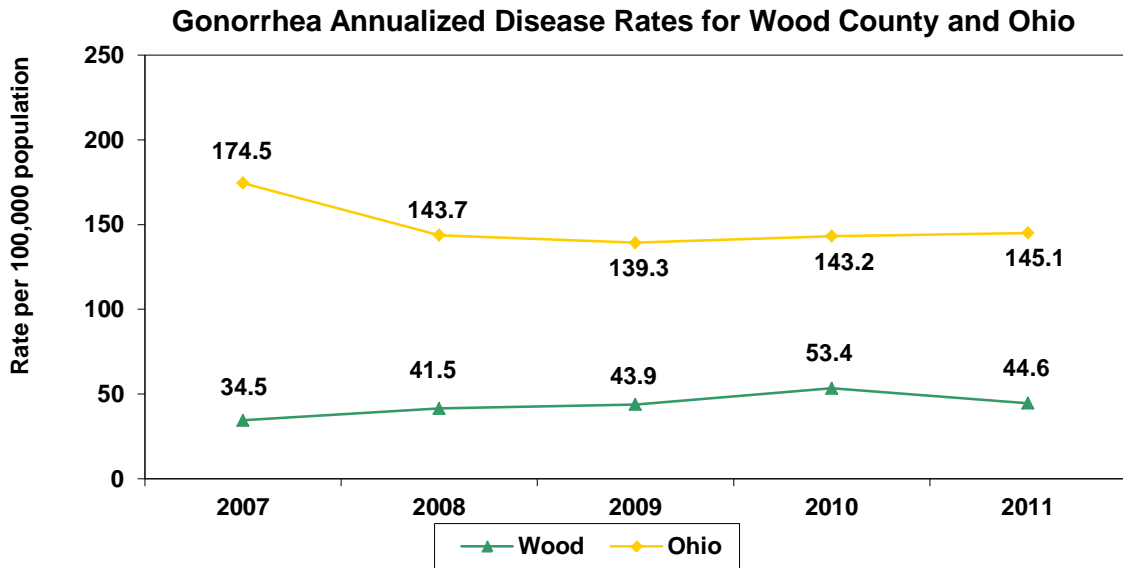
- ◆ Wood County chlamydia rates increased from 2007 to 2011. Wood County rates remained below the Ohio rates.
- ◆ In 2010, the U.S. rate for new chlamydia cases was 426.0 per 100,000 population. *(Source: CDC, Sexually Transmitted Diseases Surveillance, 2010)*



*(Source for graphs: ODH, STD Surveillance, data reported through 4-18-12)*

## Adult Sexual Behavior and Pregnancy Outcomes

- ◆ The Wood County and Ohio gonorrhea rates fluctuated from 2007 to 2011.
- ◆ In 2010, the U.S. rate for new gonorrhea cases for the total population was 100.8 per 100,000 population. *(Source: CDC, Sexually Transmitted Diseases Surveillance, 2010)*
- ◆ The Healthy People 2020 Objective for gonorrhea is 257 new female and 198 new male cases per 100,000 population.



*(Source for graphs: ODH, STD Surveillance, data reported through 4-18-12)*

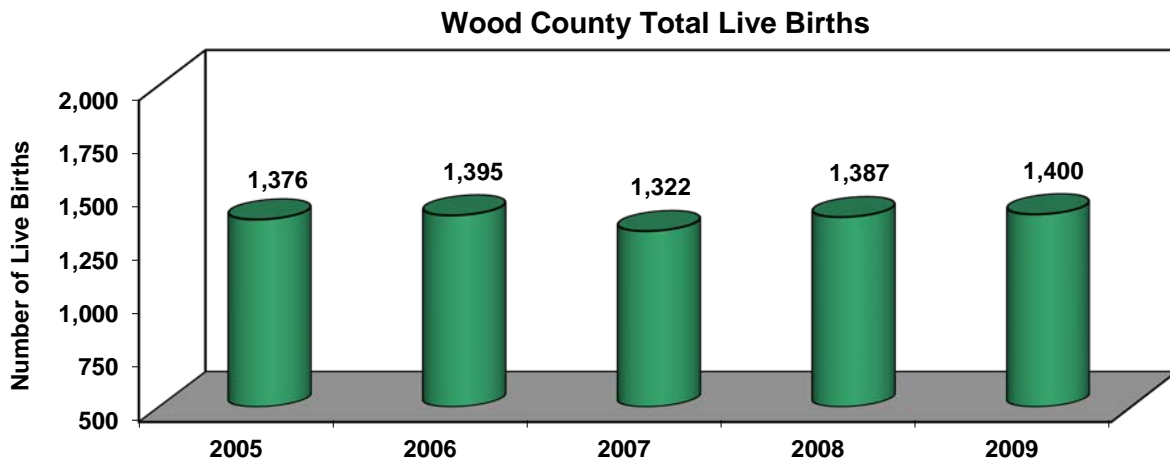
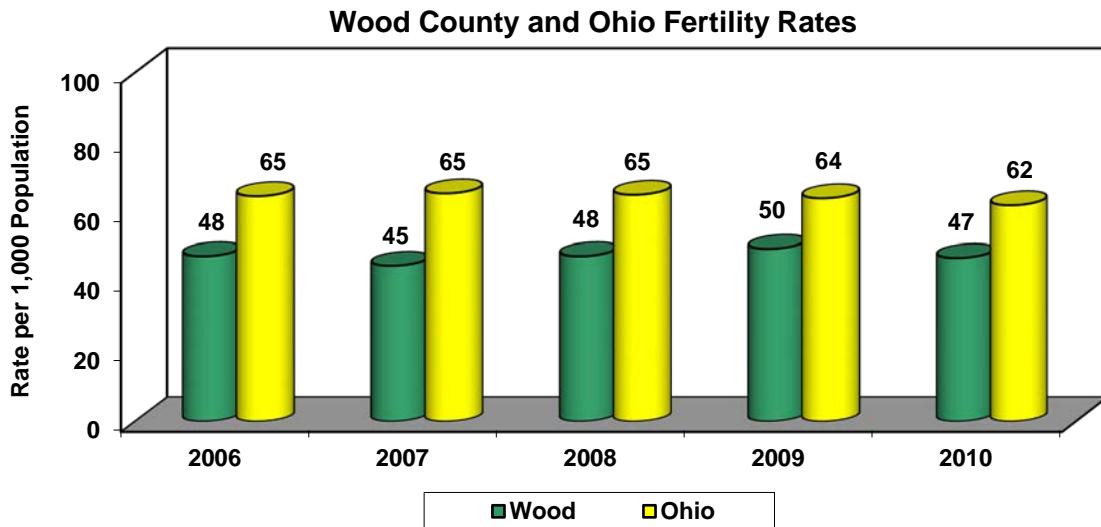


# Adult Sexual Behavior and Pregnancy Outcomes

## Pregnancy Outcomes

\*Please note that the pregnancy outcomes data includes all births to adults and adolescents.

- ◆ From 2005-2009, there was an average of 1,376 live births per year in Wood County.
- ◆ In 2010, the U.S. fertility rate was 64.7 per 1,000 women ages 15-44 (Source: National Center for Health Statistics, CDC, 2010).



(Source for graphs: ODH Information Warehouse Updated 1-13-12)

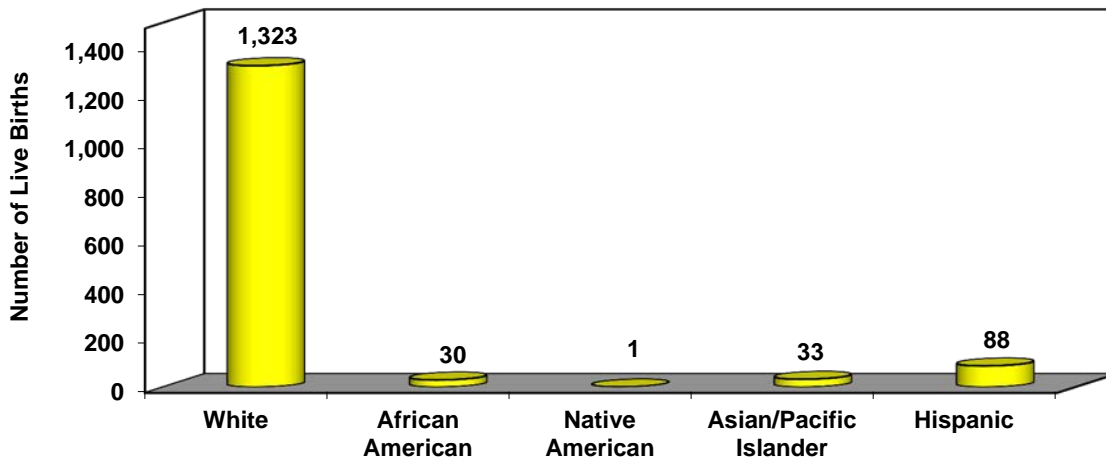
# Adult Sexual Behavior and Pregnancy Outcomes

## Pregnancy Outcomes

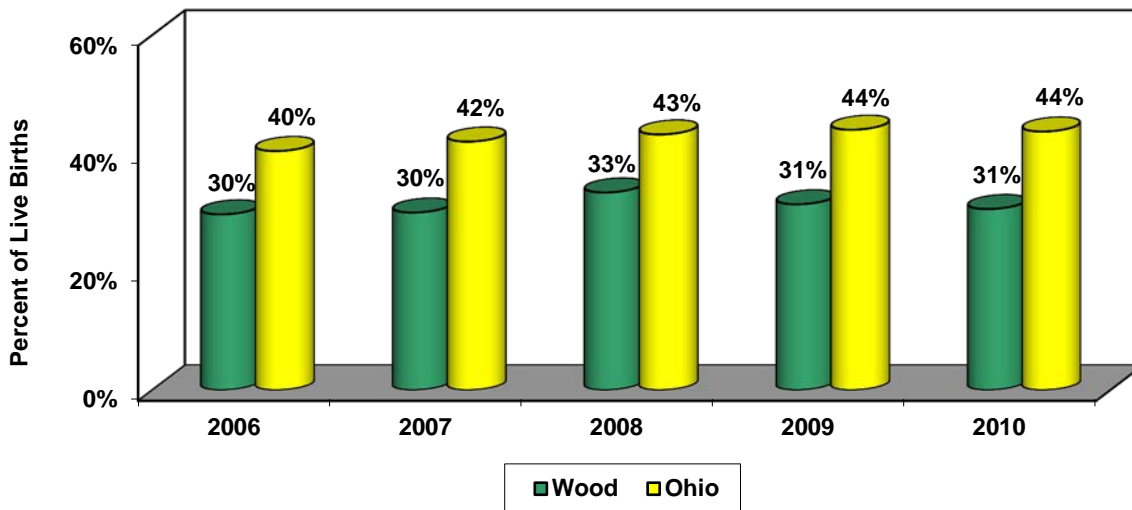
*\*Please note that the pregnancy outcomes data includes all births to adults and adolescents.*

- ◆ The percentage of births to unwed mothers in Wood was below the Ohio percentage each year from 2006 to 2010, and fluctuated during the five year period.
- ◆ In 2009, 41% of U.S. births were to unwed mothers. *(Source: National Center for Health Statistics 2009)*

**Wood County Total Live Births By Race/Ethnicity  
2008**



**Wood County and Ohio Unwed Births**



*(Source for graphs: ODH Information Warehouse Updated 1-13-12)*

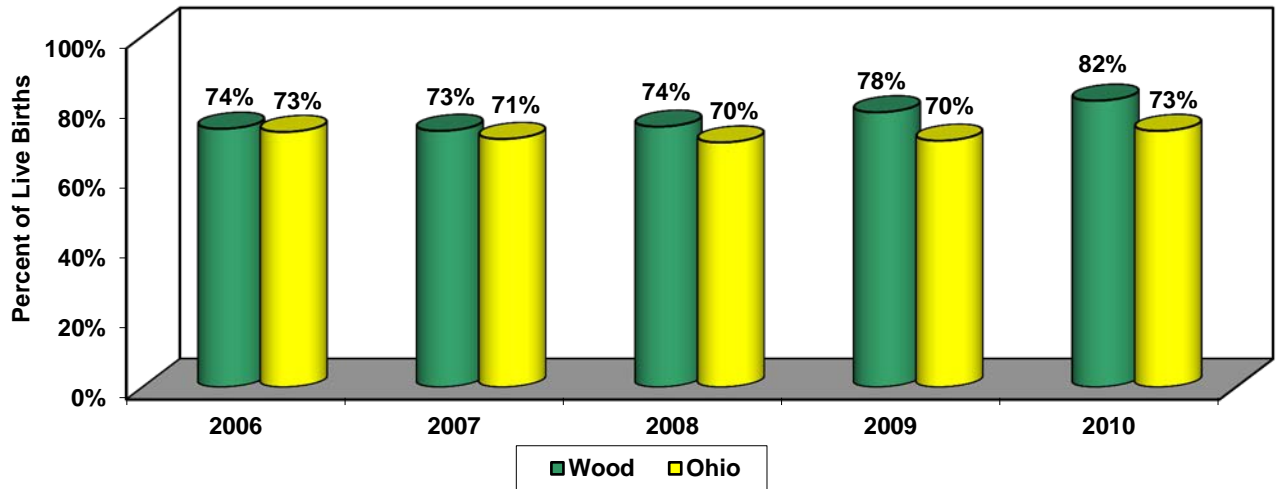
# Adult Sexual Behavior and Pregnancy Outcomes

## Pregnancy Outcomes

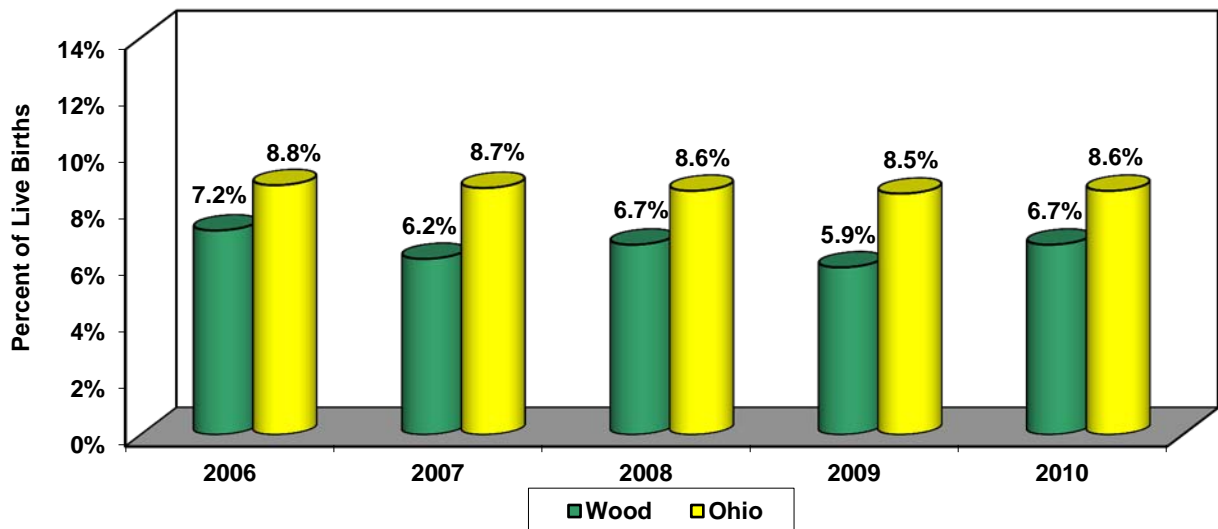
*\*Please note that the pregnancy outcomes data includes all births to adults and adolescents*

- ◆ In 2010, 73% of Ohio mothers received prenatal care during the first trimester. (ODH, Birth Statistics, 2010)
- ◆ In 2009, 8.2% of all U.S. live births were low birth weight births. (Source: National Center for Health Statistics 2009)

### Wood County and Ohio Births with First Trimester Prenatal Care



### Wood County and Ohio Low Birth Weight Births\*



*\*Low Birth Weight is defined as weighing less than 2,500 grams or 5 pounds, 8 ounces.  
(Source for graphs: ODH Information Warehouse Updated 1-13-12)*

# Quality of Life

## Key Findings

*In 2012, 37% of Wood County adults were limited in some way because of a physical, mental or emotional problem.*

## Impairments and Health Problems

- ◆ More than one-third (37%) Wood County adults were limited in some way because of a physical, mental or emotional problem. 22% Ohio adults and 21% of U.S. adults are limited in some way because of a physical, mental or emotional problem (2010 BRFSS).
- ◆ The following impairments or health problems limited Wood County adults' activities: back or neck problems (13%), arthritis (11%), walking problems (9%), depression/anxiety (9%), emotional problems (6%), fractures, bone/joint injuries (5%), heart problems (4%), lung/breathing problems (4%), eye/vision problems (4%), high blood pressure (3%), diabetes (2%), hearing problems (2%), cancer (2%), used a cane (2%), used a wheelchair (1%), and stroke-related problems (1%).
- ◆ Wood County adults needed help with the following: bathing (6%), doing necessary business (5%), dressing (5%), household chores (4%), shopping (4%), eating (4%), and getting around the house (3%).

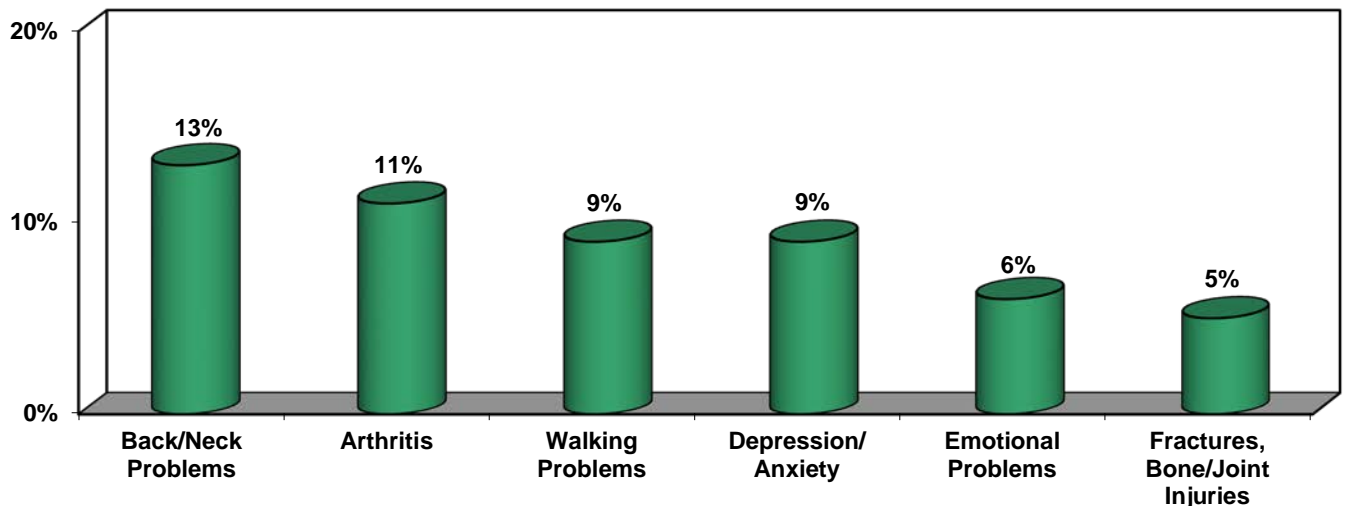
### Back Pain Prevention

The best things you can do to prevent back pain are:

- ◆ Exercise often and keep your back muscles strong.
- ◆ Maintain a healthy weight or lose weight if you weigh too much.
- ◆ Make sure you are getting enough calcium and vitamin D every day. This is very important to keep bones strong.
- ◆ Try to stand up straight and avoid heavy lifting when you can. If you do lift something heavy, bend your legs and keep your back straight.

(Source: National Institutes of Health, National Institute of Arthritis and Musculoskeletal and Skin Diseases.  
[http://www.niams.nih.gov/Health\\_Info/Back\\_Pain/back\\_pain\\_ff.asp](http://www.niams.nih.gov/Health_Info/Back_Pain/back_pain_ff.asp), updated 9/09)

**Wood County Most Limiting Health Problems**



2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Limited in some way due to physical, emotional, or mental problems	25%	37%	22%	21%

## Social Context and Safety

### Key Findings

*In 2012, 3% of Wood County adults were threatened or abused in the past year. 37% of adults kept a firearm in or around their home.*

### Social Context and Safety

- ◆ Wood County adults experienced the following situations in the past year: a close family member had to go in the hospital (38%), had bills they could not pay (17%), moved to a new address (11%), someone close to them had a problem with drinking or drugs (9%), someone in the household lost their job (8%), someone in the household went to jail (3%), someone in the household was homeless (1%), became separated or divorced (1%), was hit or slapped by a spouse or partner (1%), and was involved in a physical fight (<1%).
- ◆ 3% of Wood County adults were threatened or abused in the past year. They were threatened or abused by the following: a spouse or partner (20%), another family member (20%), and someone else (60%).
- ◆ Wood County adults sought assistance for the following in the past year: credit counseling (4%), rent/mortgage (3%), home repair (3%), food (2%), free tax preparation (2%), and legal aid services (1%).
- ◆ One in ten (10%) Wood County adults attempted to get assistance from a social service agency. They attempted to get assistance from the following: Welfare/Job & Family Services (46%), Children’s Resource Center (19%), the health department (19%), Family Services (12%), Behavioral Connections (8%), a friend or family member (7%), Senior Center (4%), and somewhere else (19%). 22% of adults looked for assistance but did not receive any.
- ◆ Over one-third (37%) of Wood County adults kept a firearm in or around their home. 2% of adults reported they were unlocked and loaded.
- ◆ Of those with firearms, 66% have them for hunting or sport, 53% have them for protection, 27% collect them, 6% have them for work, and 13% have them for some other reason.
- ◆ When dealing with personal problems, Wood County adults talk to the following people about their concerns: partner (i.e., spouse, fiancé, girlfriend/boyfriend) (54%), best friend (42%), brother/sister (33%), parents (32%), their children (17%), religious/spiritual leader (13%), professional counselor/therapist (12%), physician (4%), social worker (3%), grandparents (3%), and someone else (5%). 17% had no one they could talk to about their personal problems.

### Domestic Violence in Wood County

- ◆ In 2010, there were 314 domestic violence incidents where Domestic Violence (DV), Protection Order, or Consent Agreement charges were filed in Wood County.
- ◆ There were 17 DV incidents where other charges were filed, but not DV, Protection Order, or Consent Agreement.
- ◆ There were 304 DV incidents where no charges were filed or incident did not meet the DV incident criteria.

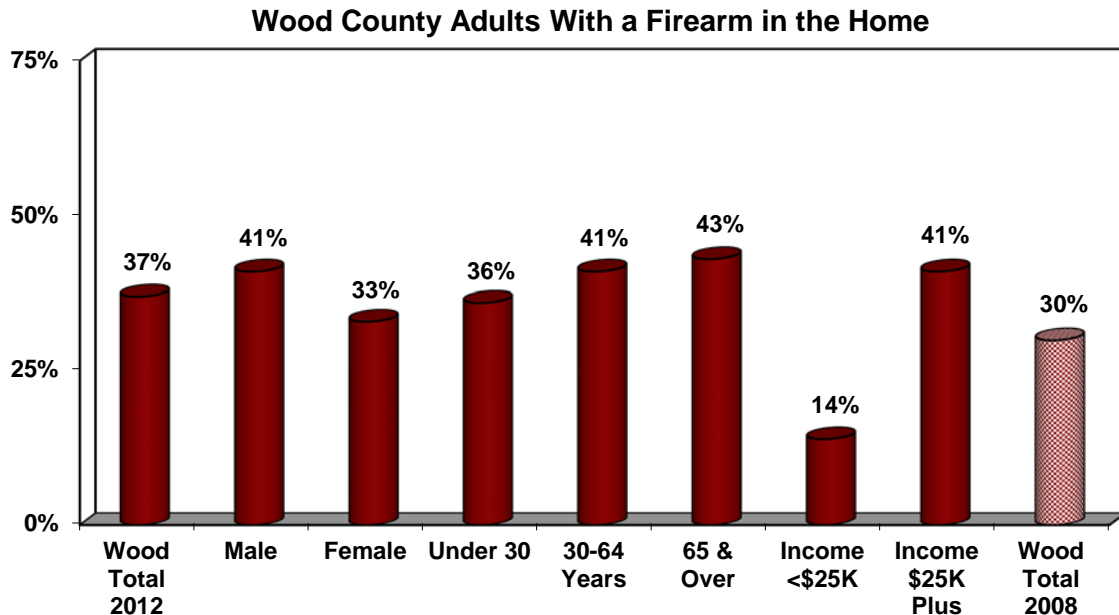
(Source: Ohio Attorney General’s Office, 2010 Domestic Violence Report, [http://www.ohioattorneygeneral.gov/files/Publications/Publications-for-Victims/Domestic-Violence-Reports-\(1\)/2010-Domestic-Violence-Reports](http://www.ohioattorneygeneral.gov/files/Publications/Publications-for-Victims/Domestic-Violence-Reports-(1)/2010-Domestic-Violence-Reports))

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Firearms kept in or around their home	30%	37%	N/A	N/A
Sought social service agency for assistance	12%	10%	N/A	N/A

*N/A – Not available*

## Social Context and Safety

The following graph shows the percentage of Wood County adults that had a firearm in the home. Examples of how to interpret the information shown on the first graph include: 37% of all Wood County adults kept a firearm in their home, 41% of males, and 36% of those under 30 kept a firearm in their home.



### Firearm Injury Prevention

According to The American College of Emergency Physicians (ACEP), the improper use of firearms results in death and injury. Below are some of the College supported efforts to prevent firearm-related injuries and deaths:

- ❖ Aggressively enforce current laws against illegal possession, purchase, sale, or use of firearms;
- ❖ Encourage the creation and evaluation of community and school-based education programs targeting the prevention of firearm injuries;
- ❖ Educate the public about the risks of improperly stored firearms, especially in the home;
- ❖ Increase funding for the development, evaluation, and implementation of evidence-based programs and policies to reduce firearm-related injury and death;
- ❖ Work with stakeholders to develop comprehensive strategies to prevent firearm injury and death.

*(Source: Firearm Injury Prevention, Annals of Emergency Medicine, v. 57 issue 6, 2011, p. 691)*

# Environmental Health and Disaster Preparedness

## Key Findings

*Insects and mold were the two most important perceived environmental health issues that threatened Wood County adults' health in the past year.*

## Environmental Health

- ◆ Wood County adults thought the following threatened their health in the past year:
  - Insects (12%)
  - Mold (9%)
  - Rodents or mice (5%)
  - Outdoor air pollution (5%)
  - Temperature regulation (5%)
  - Indoor tobacco smoke (4%)
  - Chemicals found in household products (3%)
  - Plumbing problems (3%)
  - Lead paint (3%)
  - Safety hazards (2%)
  - Unsafe water supply (2%)
  - Asbestos (2%)
  - Unsafe food (1%)
  - Carbon monoxide poisoning (1%)
  - Bed Bugs (1%)
  - Sewage water problems (<1%)
  - Radon (<1%)
  - Excess medications in the home (<1%)

## Disaster Preparedness

- ◆ Wood County households had the following disaster preparedness supplies: cell phone (91%), working flashlight and working batteries (87%), 3-day supply of nonperishable food for everyone who lives there (53%), 3-day supply of prescription medication for each person who takes prescribed medicines (44%), working battery-operated radio and working batteries (43%), 3-day supply of water for everyone in the household (1 gallon of water per person per day) (27%), disaster plan (14%), and communication plan (6%).
- ◆ Wood County adults would use the following as their main method or way of communicating with relatives and friends in a large-scale disaster or emergency: cell phones (90%), regular home phones (18%), email (17%), 2-way radios (2%), automatic notifications from health department (1%), and other (3%).

## Health Effects from Biological Contaminants

Common biological contaminants include mold, dust mites, pet dander, droppings and body parts from cockroaches, rodents, and other pests, insects, viruses and bacteria.

### Health Effects:

- ◆ Allergic reactions including hypersensitivity pneumonitis and asthma. Infectious illnesses such as influenza, measles, and chicken pox are transmitted through the air.
- ◆ Molds and mildews release disease-causing toxins and cause symptoms such as sneezing, watery eyes, coughing, shortness of breath, dizziness, lethargy, fever, and digestive problems

### Reducing Exposure:

- ◆ Install and use exhaust fans
- ◆ Ventilate the attic and crawl spaces to prevent moisture build-up
- ◆ Clean appliances according to manufacturer's instructions
- ◆ Thoroughly clean and dry water-damaged carpets and building materials, or consider removal and replacement
- ◆ Keep the house clean. House pollutants can be reduced through regular cleaning
- ◆ Clean and disinfect the basement floor drain regularly

(Source: EPA, U.S. Environmental Protection Agency, Biological Pollutants, <http://www.epa.gov/iaq/biologic.html>, updated June 2012)

## Recommended Items to Include in a Basic Emergency Supply Kit

- ◆ Water, one gallon of water per person per day for at least 3 days, for drinking and sanitation
- ◆ Battery-power or hand crank radio and a NOAA Weather Radio with tone alert and extra batteries
- ◆ Wrench or pliers to turn off utilities
- ◆ First aid kit
- ◆ Dust mask, to help filter contaminated air and plastic sheeting and duct tape to shelter-in-place
- ◆ Food, at least a 3 day supply of non-perishable food
- ◆ Can opener for food (if kit contains canned food)
- ◆ Flashlight and extra batteries
- ◆ Moist towelettes, garbage bags and plastic ties for personal sanitation
- ◆ Whistle to signal for help
- ◆ Local maps
- ◆ Cell phone with chargers

Source: Federal Emergency Management Agency (FEMA), Ready: Prepare. Plan. Stay Informed., Emergency Supply List, <http://www.ready.gov/america/downloads/checklist3.pdf>

# Mental Health and Suicide

## Key Findings

*In 2012, 13% of Wood County adults reported they had considered attempting suicide at some time in their life. 12% of adults felt so sad or hopeless almost every day for two or more weeks that they stopped doing usual activities.*

## Adult Mental Health

- ◆ In the past year, 12% of Wood County adults felt so sad or hopeless every day for two or more weeks in a row that they stopped doing usual activities.
- ◆ 13% of Wood County adults considered attempting suicide in their lifetime and 2% of adults considered attempting suicide in the past year.
- ◆ 2% of adults attempted suicide in their lifetime and no one reported attempting suicide in the past year.

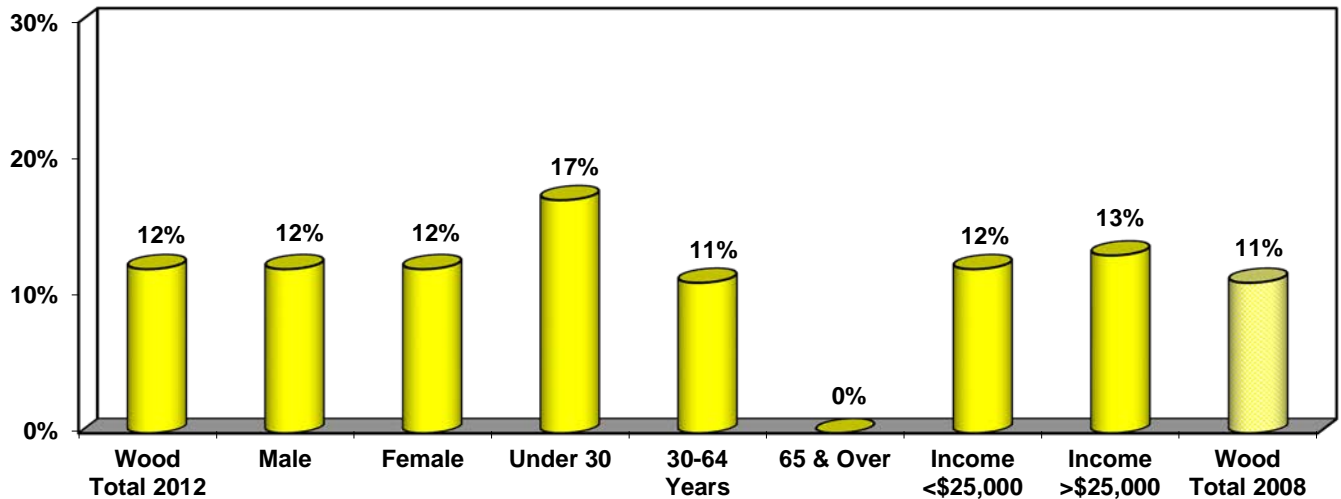
## Mental Health Services in Ohio

*(Ohio Facts 2010, FY 2009\*)*

- ◆ In FY 2009, mental health services spending totaled \$1.34 billion in Ohio.
- ◆ In FY 2009, Ohio's 50 community-based mental health boards served 325,000 individuals throughout the state. These boards included 47 alcohol & drug addiction and mental health service boards and three county mental health service boards.
- ◆ In FY 2009, state hospitals served 6,790 individuals at a cost of \$217.7 million. Average daily cost per resident was \$589.
- ◆ An average of 109,000 individuals each month received Medicaid mental health services through ODMH.

(Sources: U.S. Department of Health and Human Services, Ohio Department of Mental Health, <http://www.lsc.state.oh.us/fiscal/ohiofacts/sep2010/healthandhumanservices.pdf>)

**Wood County Adults Feeling Sad or Hopeless for Two or More Weeks in a Row**



2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Two or more weeks in a row when felt sad or hopeless	11%	12%	N/A	N/A
Considered attempting suicide in the past year	10%	2%	N/A	N/A

*N/A – Not available*

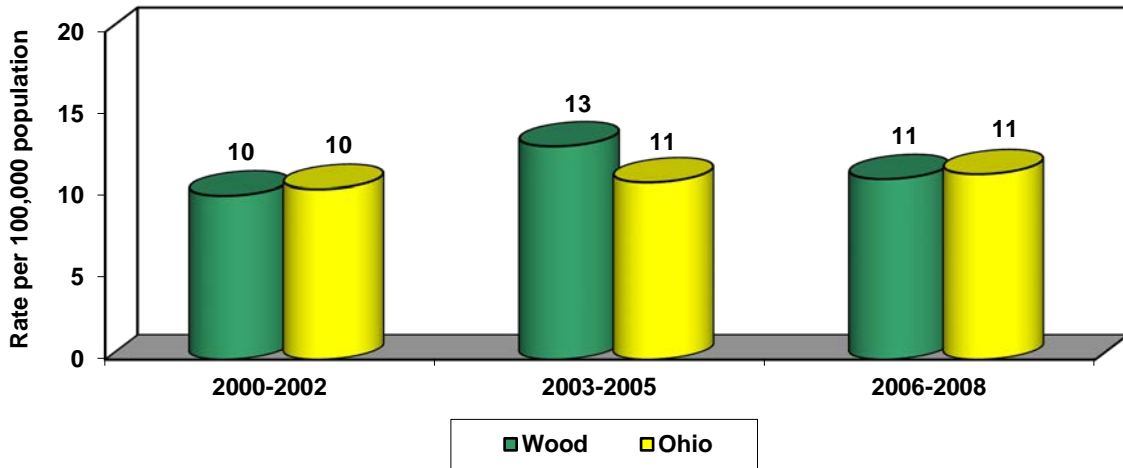


# Mental Health and Suicide

The following graphs show the Ohio and Wood County age-adjusted suicide mortality rates per 100,000 population and the number of suicide deaths by age group for the county. The graphs show:

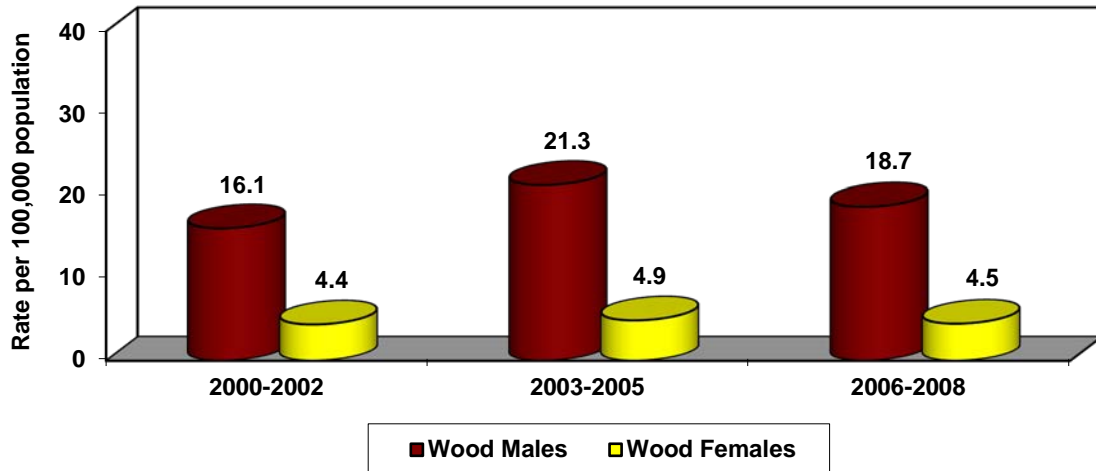
- ◆ The Wood County age-adjusted suicide mortality rate fluctuated from 2000-2008.
- ◆ The Wood County male age-adjusted suicide rate consistently exceeded the female rate from 2000 to 2008.
- ◆ From 2006-2008, 24% of all Wood County suicide deaths occurred to those ages 35-44 years old.

**Wood County and Ohio Age-Adjusted Suicide Mortality Rates**



*(Source: ODH Information Warehouse, updated 4-15-10)*

**Wood County Age-Adjusted Suicide Mortality Rates by Gender**

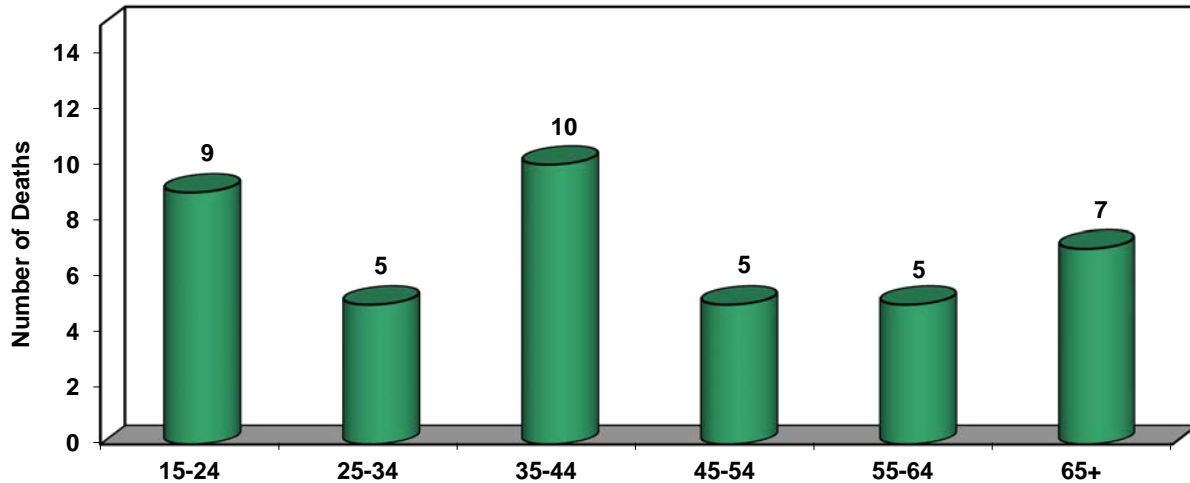


*(Source: ODH Information Warehouse, updated 4-15-10)*

# Mental Health and Suicide

## Wood County Number of Suicide Deaths By Age Group 2006-2008

Total Deaths = 41



*(Source: ODH Information Warehouse, updated 4-15-10)*

### Risk Factors and Warning Signs of Suicide

Although suicide is often difficult to predict, a few risk factors include:

- |   |                            |
|---|----------------------------|
| ❖ Mental Health disorder, especially depression                 | ❖ Substance abuse          |
| ❖ Prior suicide attempt   | ❖ Has experienced violence |
| ❖ Feeling socially isolated                                     | ❖ Stressful life events    |
| ❖ Experiences poor parent/child communication                   | ❖ Has medical condition    |
| ❖ Has access to lethal suicide methods (for instance, firearms) | ❖ Served jail/prison time  |

Recognizing Warning Signs of Suicide in Others

- |  |   |
|--|---|
| ❖ Feelings of despair or hopelessness  | ❖ Taking care of business- preparing for the family's welfare         |
| ❖ Drug or alcohol abuse  | ❖ Rehearsing suicide or seriously discussing specific suicide methods |
| ❖ Shows signs of improvement, but in reality, relief comes from having made decision to commit suicide |   |

*(Source: CDC, National Depression and Manic Depression Association)*

### Wood County, Ohio, and U.S. Mental Health and Suicide Facts

- ❖ In 2010, 86% of suicides were male in Wood County.
- ❖ In Wood County, the 35-44 age group had the highest number of suicides in 2010.
- ❖ In 2009, the state of Ohio ranked 43 in the nation for suicide deaths, with a rate of 10.2 per 100,000 population.
- ❖ In 2009, suicide ranked as the 10<sup>th</sup> leading cause of death in the United States.

*(Sources: Ohio Suicide Prevention Foundation, 2012, <http://obiospf.org/countymain.php?countyid=52&GO=GO> & McIntosh, J.L. (for the American Association of Suicidology). (2012). U.S.A. suicide: 2009 official final data. Washington, DC: American Association of Suicidology, dated January 12, 2012, from [www.suicidology.org](http://www.suicidology.org))*

# Oral Health

## Key Findings

The 2012 Health Assessment project has determined that nearly three-fourths (74%) of Wood County adults had visited a dentist or dental clinic in the past year. The 2010 BRFSS reported that 70% of U.S. adults and 72% of Ohio adults had visited a dentist or dental clinic in the previous twelve months. Just over four-fifths (82%) of Wood County youth in grades 6-12 had visited the dentist for a check-up, exam, teeth cleaning, or other dental work in the past year.

## Access to Dental Care

- ◆ In the past year, 74% of Wood County adults had visited a dentist or dental clinic, decreasing to 55% of adults with annual household incomes less than \$25,000. The 2010 BRFSS reported that 70% of U.S. adults and 72% of Ohio adults had visited a dentist or dental clinic in the previous twelve months.
- ◆ When asked how long it had been since their last visit to a dentist or dental clinic, 9% of Wood County adults reported that it had been more than one year but less than two years, 8% reported that it had been more than two years but less than five years, and 6% responded it had been five or more years ago.
- ◆ When asked the main reason for not visiting a dentist in the last year, 39% said cost, 30% had no dental insurance, 19% said fear, apprehension, nervousness, pain, and dislike going, 18% had no reason to go, 10% did not have/know a dentist, 9% had other priorities, and 5% had not thought of it.
- ◆ Wood County adults received their routine dental care at the following places: a dentist (75%) and a dental clinic (4%).
- ◆ In the past year, 82% of Wood County youth in grades 6-12 had visited the dentist for a check-up, exam, teeth cleaning, or other dental work. 8% responded more than one year but less than 2 years, and 2% responded more than 2 years ago.

### Wood County Dental Care Resources – 2010

- ◆ Number of licensed dentists- 44
- ◆ Number of primary care dentists- 35
- ◆ Ratio of population per dentist- 2,850:1
- ◆ Number of dentists who treat Medicaid patients- 11
- ◆ Ratio of Medicaid population per dentist who treats Medicaid patients- 1,369:1

*(Source: ODH Ohio Oral Health Surveillance System, 2010)*

Adult Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never
<b>Time Since Last Visit to Dentist/Dental Clinic</b>					
Males	69%	11%	9%	9%	0%
Females	81%	6%	7%	4%	0%
Total	74%	9%	8%	6%	0%

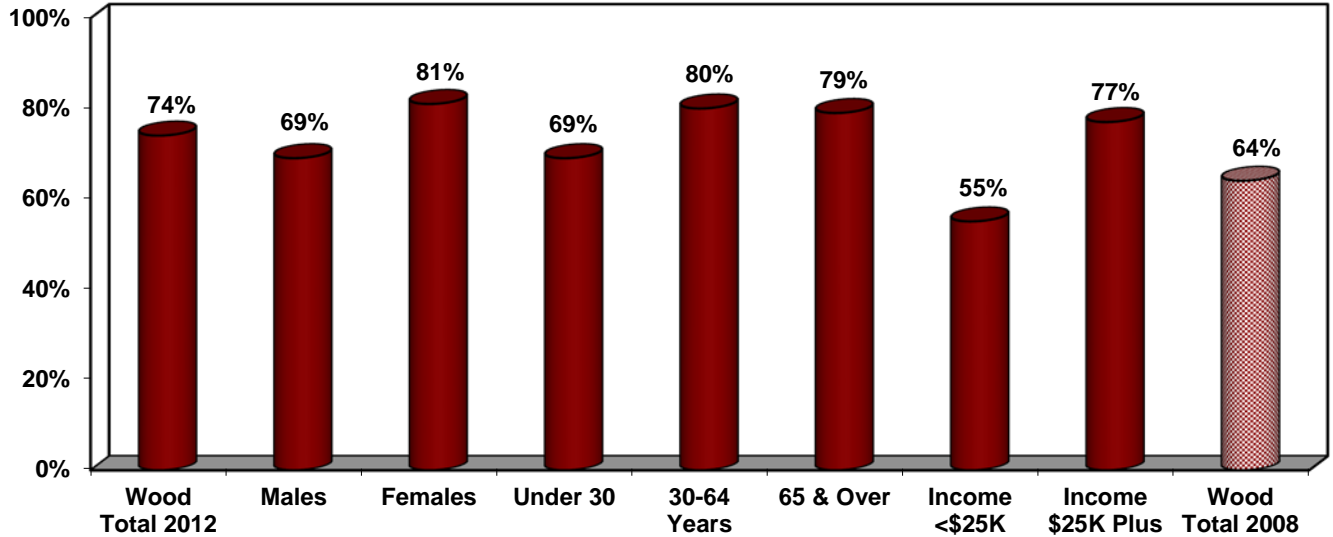
*Totals may not equal 100% as some respondents answered do not know.*

2008/2012 Adult Comparisons	Wood County 2008	Wood County 2012	Ohio 2010	U.S. 2010
Adults who have visited the dentist in the past year	64%	74%	72%	70%

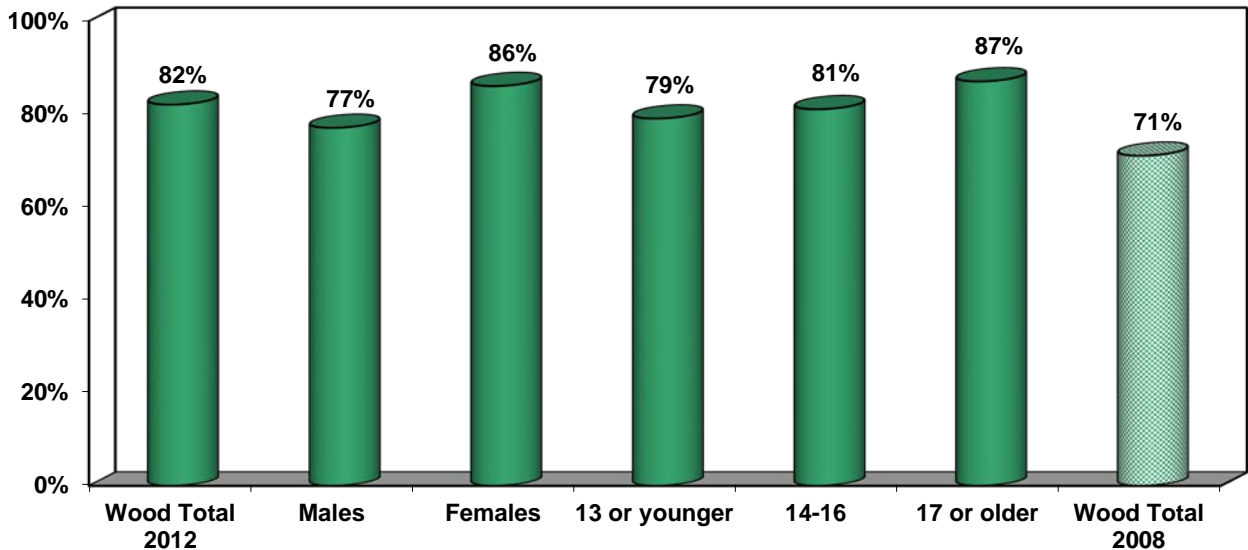
## Oral Health

The following graphs provide information about the frequency of Wood County adult and youth dental visits. Examples of how to interpret the information on the first graph include: 74% of all Wood County adults had been to the dentist in the past year, 69% of those under the age of 30 and 55% of those with incomes less than \$25,000.

**Wood County Adults Visiting a Dentist in the Past Year**



**Wood County Youth Visiting a Dentist in the Past Year**



# Veteran's Affairs

## Key Findings

The 2012 Health Assessment project identified that 16% of Wood County adults had a veteran in their household. 7% of Wood County veterans were diagnosed with Post Traumatic Stress Disorder (PTSD).

## Veteran's Affairs

- ◆ One in six (16%) Wood County adults had a veteran in their household.
- ◆ Of those Wood County residents who had a veteran in the household, the following affected their immediate family:
  - High anxiety levels (13%)
  - Received a diagnosis of Post-Traumatic Stress Disorder (PTSD) (7%)
  - Problems with access to medical care (7%)
  - Marital problems (5%)
  - Could not find/keep a job (4%)
  - Housing issues (2%)
- ◆ 7% of Wood County adults with a veteran in their household have needed services for the issues listed above. Of those who needed services, 33% received services, and 67% reported the VA hospital was too far away.

### What is PTSD?

- ❖ Posttraumatic stress disorder (PTSD) occurs among Veterans after traumatic events such as:
  - Combat exposure
  - Terrorist attack
- ❖ Symptoms usually include reliving the event (re-experiencing symptoms); avoiding situations that remind you of the event; feeling numb; and feeling keyed up (called hyperarousal)
- ❖ Sufferers usually experience feelings of hopelessness, shame, despair, depression, anxiety, substance abuse, chronic pain, employment problems, and/or relationship problems
- ❖ Treatments include cognitive behavioral therapy (CBT), cognitive processing therapy (CPT), prolonged exposure therapy (PE), and eye movement desensitization and reprocessing therapy (EMDR).
- ❖ Medications can be effective as well. Selective serotonin reuptake inhibitor (SSRI) and Prazosin can be found helpful.

(Source: United States Department of Veterans Affairs, "What is PTSD?" <http://www.ptsd.va.gov/public/pages/what-is-ptsd.asp>, updated May, 2012)

## Veterans in Wood County

- ❖ The U.S. Census Bureau's, American Community Survey 1-year estimates (2010) indicated that there were 9,280 civilian veterans ages 18 and older living in Wood County.
  - Of the 9,280 veterans, 97% were male and 3% were female.
- ❖ Veterans ages 35 to 54 had the highest prevalence of 29%; followed by 25% of those ages 55 to 64 and 22% of those 75 years and over.
- ❖ 99% of the veteran population was white.
- ❖ The median income of the veteran population was \$37,044.
- ❖ 78% of the 9,280 employed veterans worked in the labor force.
- ❖ 11% of the veteran population was unemployed.
- ❖ 1.8% of 9,280 veterans were living below the federal poverty threshold.
- ❖ 20% of 9,280 veterans were living with a disability.

(Source: U.S. Census Bureau, 2008-2010 American Community Survey 3-year estimates, [http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_10\\_3YR\\_S2101&prodType=table](http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_10_3YR_S2101&prodType=table))

# Youth Weight Status

## Key Findings

The 2012 Health Assessment identified that 13% of Wood County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 27% of Wood County youth reported that they were slightly or very overweight. 72% of youth were exercising for 60 minutes on 3 or more days per week.

## Youth Weight Status

- ◆ BMI for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific as children's body fatness changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- ◆ In 2012, 13% of youth were classified as obese by Body Mass Index (BMI) calculations (2011 YRBS reported 15% for Ohio and 13% for the U.S.). 11% of youth were classified as overweight, (2011 YRBS reported 15% for Ohio, and 15% for the U.S.). 74% were normal weight, and 2% were underweight.
- ◆ 27% of youth described themselves as being either slightly or very overweight (2011 YRBS reported 30% for Ohio and 29% for the U.S.).
- ◆ Nearly half (48%) of all youth were trying to lose weight, increasing to 54% of Wood County female youth (compared to 41% of males).
- ◆ Wood County youth reported doing the following to lose weight or keep from gaining weight in the past 30 days:
  - 50% of youth exercised
  - 32% of youth ate less food, fewer calories, or foods lower in fat
  - 6% of all youth reported going without eating for 24 hours or more (2011 YRBS reported 13% for Ohio and 12% for the U.S.)
  - 2% reported smoking to lose weight
  - 1% vomited or took laxatives (2011 YRBS reported 6% for Ohio and 4% for the U.S.)
  - 1% reported taking diet pills, powders, or liquids without a doctor's advice (2011 YRBS reported 6% for Ohio and 5% for the U.S.)

### Soft Drinks & Adolescent Weight

- ◆ Empty calories from added sugars and solid fats contribute to 40% of daily calories for children and adolescents aged 2–18 years, affecting the overall quality of their diets. Approximately half of these empty calories come from 6 sources: soda, fruit drinks, dairy desserts, grain desserts, pizza, and whole milk.
- ◆ Adolescents drink more full-calorie soda per day than milk. Males aged 12–19 years drink an average of 22 ounces of full-calorie soda per day, more than twice their intake of fluid milk (10 ounces), and females drink an average of 14 oz. of full-calorie soda and only 6 oz. of fluid milk.

(Source: CDC, Adolescent and School Health, <http://www.cdc.gov/healthyyouth/nutrition/facts.htm>, 9-15-11)

Wood County 6 <sup>th</sup> -12 <sup>th</sup> Grade Youth did the following to lose weight in the past 30 days:	Percent
Exercised	50%
Ate less food, fewer calories, or foods lower in fat	32%
Went without eating for 24 hours	6%
Smoked cigarettes	2%
Vomited or took laxatives	1%
Took diet pills, powders, or liquids without a doctor's advice	1%

## Youth Weight Status

### Nutrition

- ◆ 17% of Wood County youth ate 5 or more servings of fruits and vegetables per day. 79% ate 1 to 4 servings of fruits and vegetables per day.
- ◆ Wood County youth consumed the following sources of calcium daily: milk (88%), yogurt (60%), other dairy products (49%), calcium-fortified juice (22%), calcium supplements (10%), and other calcium sources (14%).
- ◆ Most (98%) youth reported eating dinner. 95% reported eating lunch, and 72% reported eating breakfast.
- ◆ Wood County youth reported eating most of their food at the following places: home (75%), fast food (3%), restaurant (3%), school (2%), and convenience store (<1%).
- ◆ 45% of youth reported drinking energy drinks for the following reasons: to stay awake (28%), to get pumped up (16%), to help them perform (8%), before games or practice (7%), to mix with alcohol (5%), and some other reason (21%).

### Physical Activity

- ◆ 72% of Wood County youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. 52% did so on 5 or more days in the past week and 28% did so every day in the past week. 13% of youth did not participate in at least 60 minutes of physical activity on any day in the past week (2011 YRBS reports 16% for Ohio and 14% for the U.S.).
- ◆ 72% of Wood County youth were physically active at least 60 minutes per day on less than 7 days, (2011 YRBS reported 75% for Ohio and 71% for the U.S.) and 49% were physically active at least 60 minutes per day on less than 5 days (2011 YRBS reported 55% for Ohio and 51% for the U.S.).
- ◆ The CDC recommends that children and adolescents participate in at least 60 minutes of physical activity per day. As part of their 60 minutes per day; aerobic activity, muscle strengthening, and bone strengthening are three distinct types of physical activity that children should engage in, appropriate to their age. Children should participate in each of these types of activity on at least three days per week.
- ◆ Wood County youth spent an average of 4.0 hours on their cell phone, 2.7 hours watching TV, 2.4 hours playing video games, and 2.3 hours on the computer on an average day of the week. 43% of youth spent 3 or more hours watching TV on an average day (2011 YRBS reported 31% for Ohio and 32% for the U.S.).
- ◆ 86% of youth participated in extracurricular activities. They participated in the following: sports or intramural programs (50%), school club or social organization (40%), church youth group (19%), church or religious organization (18%), part-time job (18%), babysitting for other kids (18%), volunteering in the community (16%), caring for siblings after school (16%), or some other organized activity (Scouts, 4H, etc.) (13%).

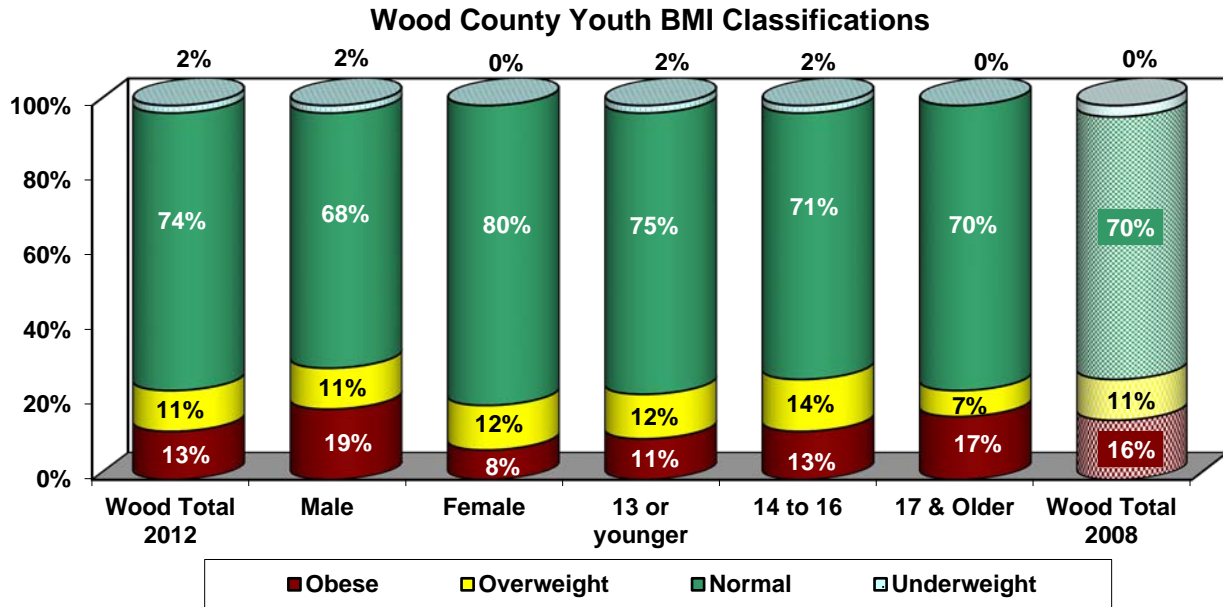
#### National School Lunch Program/Free and Reduced Lunches

- ❖ The National School Lunch Program (NSLP) is a program to provide reduced-cost or free school lunch meals to qualified students through subsidies to schools.
- ❖ The majority of support provided to schools participating in the program comes in the form of a cash reimbursement for each meal served.
- ❖ In 2010, 31% of Wood County school-aged children received a free or reduced lunch.
- ❖ In 2010, 44% of Ohio school-aged children received a free or reduced lunch.

(Source: The Annie E. Casey Foundation, KIDS COUNT Data Center, [datacenter.kidscount.org](http://datacenter.kidscount.org))

## Youth Weight Status

The following graph shows the percentage of Wood County youth who were classified as obese, overweight, normal, or underweight by Body Mass Index (BMI). Examples of how to interpret the information in the first graph include: 74% of all Wood County youth were classified as normal weight, 13% were obese, 11% were overweight, and 2% were calculated to be underweight for their age and gender.



2008/2012 Youth Comparisons	Wood County 2008 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2008 (9 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2011 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2011 (9 <sup>th</sup> -12 <sup>th</sup> )
Obese	16%	16%	13%	16%	15%	13%
Overweight	11%	9%	11%	10%	15%	15%
Described themselves as slightly or very overweight	30%	29%	27%	27%	30%	29%
Trying to lose weight	44%	42%	48%	49%	N/A	N/A
Exercised to lose weight	N/A	N/A	50%	55%	61%*	61%*
Ate less food, fewer calories, or foods lower in fat to lose weight	N/A	N/A	32%	36%	43%*	39%*
Went without eating for 24 hours or more	11%	12%	6%	6%	13%	12%
Took diet pills, powders, or liquids without a doctor's advice	5%	6%	1%	2%	6%	5%
Vomited or took laxatives	3%	4%	1%	1%	6%	4%
Ate 1 to 4 servings of fruits and vegetables per day	N/A	N/A	79%	82%	85%*	78%*
Physically active at least 60 minutes per day on less than 7 days in past week	N/A	N/A	72%	74%	75%	71%
Physically active at least 60 minutes per day on less than 5 days in past week	N/A	N/A	49%	49%	55%	51%
Did not participate in at least 60 minutes of physical activity on any day in past week	N/A	N/A	11%	10%	16%	14%
Watched TV 3 or more hours per day	43%	46%	43%	44%	31%	32%

N/A – Not available

\* Comparative YRBSS data for Ohio is 2007 and U.S. is 2009



# Youth Tobacco Use

## Key Findings

*The 2012 Health Assessment identified that 11% of Wood County youth in grades 6-12 were smokers, increasing to 19% of those who were over the age of 17. Of those 6<sup>th</sup> -12<sup>th</sup> grade youth who currently smoked, 50% had tried to quit.*

## Youth Tobacco Use Behaviors

- ◆ The 2011 YRBS reports that 52% of youth in Ohio had tried cigarette smoking (2011 YRBS reports 45% of U.S. youth) and the 2012 health assessment indicated that 27% of Wood County youth had done the same.
- ◆ 18% of Wood County youth who smoked reported smoking a whole cigarette at 10 years old or younger, and over two-fifths (43%) had done so by the age of 12. The average age of onset for smoking was 13.1 years old.
- ◆ 9% of all Wood County youth had smoked a whole cigarette for the first time before the age of 13 (2011 YRBS reported that 14% of youth in Ohio had smoked a whole cigarette for the first time before age 13 and 2011 YRBS reported 10% for the U.S).
- ◆ In 2012, 11% of Wood County youth were current smokers, having smoked at some time in the past 30 days (2011 YRBS reported 21% for Ohio and 18% for the U.S). Almost one-fifth (19%) of those ages 17 years and older were current smokers, compared to 4% of 12-13 year olds and 11% of 14-16 year olds.
- ◆ Of those who smoked, 29% smoked less than 1 cigarette per day and 2% smoked 20 or more cigarettes per day.
- ◆ 15% of current smokers smoked cigarettes daily.
- ◆ 3% of all Wood County youth smoked cigarettes on 20 or more days during the past month (2011 YRBS reported that 10% of youth in Ohio smoked cigarettes on 20 or more days during the past month and 6% for the U.S).
- ◆ Nearly three-fourths (71%) of the Wood County youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past 30 days.
- ◆ 38% of youth smokers borrowed cigarettes from someone else, 31% asked someone else to buy them cigarettes, 29% indicated they bought cigarettes from a store or gas station, 23% said a person 18 years or older gave them the cigarettes, 17% took them from a store or family member, and 19% got them some other way.
- ◆ Wood County youth used the following forms of tobacco the most in the past year: cigarettes (15%), Black and Milds (13%), hookah (8%), swishers (8%), chewing tobacco or snuff (7%), cigars (7%), flavored cigarettes (5%), cigarillos (3%), e-cigarette (3%), snus (2%), little cigars (1%), and bidis (1%).
- ◆ Half (50%) of Wood County 6<sup>th</sup>-12<sup>th</sup> grade youth who smoked had tried to quit smoking in the past year (2011 YRBS reported 56% for Ohio and 50% for the U.S).

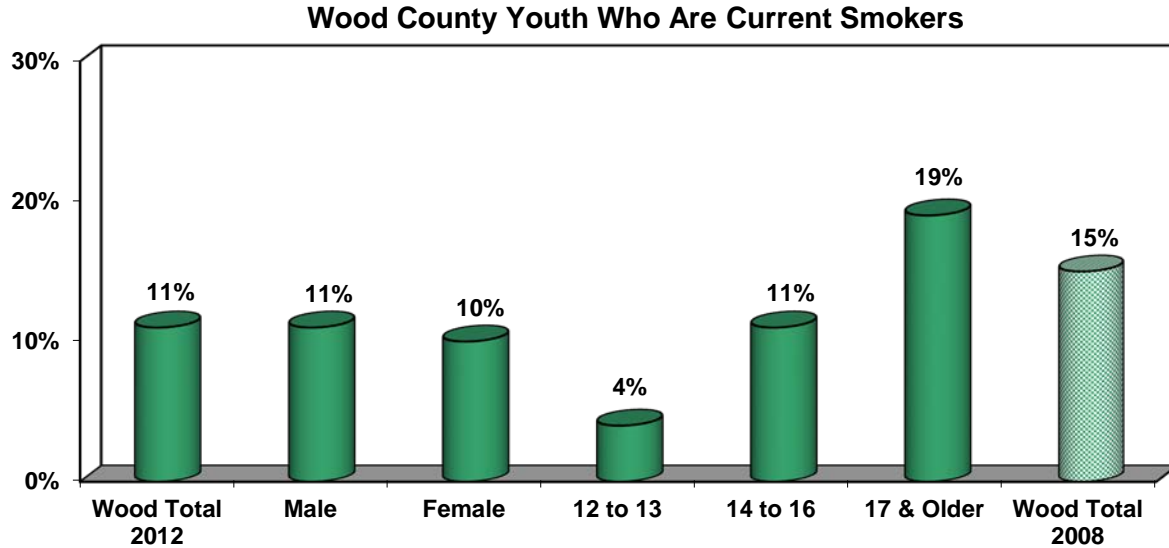
## Tobacco Sales and Promoting to Youth

- ◆ All states have laws making it illegal to sell cigarettes to anyone under the age of 18, yet 14% of students under the age of 18 who currently smoke cigarettes reported they usually obtained their own cigarettes by buying them in a store or gas station during the 30 days before the survey.
- ◆ Cigarette companies spent more than \$15.2 billion in 2003 to promote their products.
- ◆ Children and teenagers constitute the majority of all new smokers, and the industry's advertising and promotion campaigns often have special appeal to these young people.
- ◆ 83% of young smokers (aged 12-17) choose the three most heavily advertised brands.

(Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Tobacco Use and Health of Youth People, <http://www.cdc.gov/healthyyouth/tobacco/facts.htm>, retrieved 11-3-11)

# Youth Tobacco Use

The following graph shows the percentage of Wood County youth who smoke cigarettes. Examples of how to interpret the information include: 11% of all Wood County youth were current smokers, 11% of males smoked, and 10% of females were current smokers.



*Current smokers are those who have smoked at any time during the past 30 days.*

### Behaviors of Wood Youth

*Current Smokers vs. Non-Current Smokers*

Youth Behaviors	Current Smoker	Non-Current Smoker
Have been in a physical fight in the past 12 months	40%	17%
Attempted suicide in the past 12 months	13%	3%
Have had at least one drink of alcohol in the past 30 days	71%	17%
Have used marijuana in the past 30 days	58%	6%
Participated in extracurricular activities	75%	87%

*Current smokers are those youth surveyed who have self-reported smoking at any time during the past 30 days.*

2008/2012 Youth Comparisons	Wood County 2008 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2008 (9 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (6 <sup>th</sup> - 12 <sup>th</sup> )	Wood County 2012 (9 <sup>th</sup> - 12 <sup>th</sup> )	Ohio 2011 (9 <sup>th</sup> - 12 <sup>th</sup> )	U.S. 2011 (9 <sup>th</sup> - 12 <sup>th</sup> )
Ever tried cigarettes	35%	45%	27%	39%	52%	45%
Current smokers	15%	22%	11%	16%	21%	18%
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	10%	13%	9%	9%	14%	10%
Smoked cigarettes on 20 or more days during the past month (of all youth)	7%	10%	3%	6%	10%	6%
Tried to quit smoking	39%	40%	50%	46%	56%	50%

# Youth Alcohol Consumption

## Key Findings

*In 2012, the Health Assessment results indicated that 48% of Wood County youth had drunk at least one drink of alcohol in their life, increasing to 70% of youth seventeen and older. 40% of those who drank took their first drink at 12 years old or younger. More than one-fifth (23%) of all Wood County youth and nearly two-fifths (38%) of those over the age of 17 had at least one drink in the past 30 days. Over half (53%) of the youth who reported drinking in the past 30 days had at least one episode of binge drinking. 8% of all youth drivers had driven a car in the past month after they had been drinking alcohol.*

## Youth Alcohol Consumption

- ◆ In 2012, the Health Assessment results indicate that nearly half (48%) of all Wood County youth (ages 12 to 18) had at least one drink of alcohol in their life, increasing to 70% of those ages 17 and older (2011 YRBS reports 71% for Ohio and 71% for the U.S.).
- ◆ More than one-fifth (23%) of youth had at least one drink in the past 30 days, increasing to 38% of those ages 17 and older (2011 YRBS reports 38% for Ohio and 39% for the U.S.).
- ◆ Of those who drank, 53% had five or more alcoholic drinks on an occasion in the last month and would be considered binge drinkers by definition, increasing to 61% of those over the age of 17.
- ◆ Based on all youth surveyed, 12% were defined as binge drinkers, increasing to 23% of those ages 17 and older (2011 YRBS reports 24% for Ohio and 22% for the U.S.).
- ◆ 9% of Wood County youth who reported drinking in the past 30 days drank on at least 10 or more days during the month.
- ◆ Two-fifths (40%) of Wood County youth who reported drinking at sometime in their life had their first drink at 12 years old or younger. 26% took their first drink between the ages of 13 and 14, and 34% drank between the ages of 15 and 18. The average age of onset was 12.9 years old.
- ◆ Of all Wood County youth, 18% had drunk alcohol for the first time before the age of 13 (2011 YRBS reports 18% for Ohio and 21% for the U.S.).
- ◆ Wood County youth drinkers reported they got their alcohol from the following: someone gave it to them (41%), (2011 YRBS reports 40% for the U.S.), someone older bought it for them (40%), a parent gave it to them (23%), took it from a store of family member (11%), a friend's parent gave it to them (11%), bought it with a fake ID (3%), bought it in a liquor store/ convenience store/gas station (3%), bought it at a restaurant/bar/club (2%), bought it at a public event (concert/sporting event) (2%), and some other way (27%).
- ◆ 12% of Wood County youth drinkers repeatedly failed to fulfill obligations at work or home, placed themselves in dangerous situations, or had legal problems as a result of drinking.
- ◆ Wood County youth experienced the following in the past six months: drank more than expected (7%), had to drink more to get the same effect (5%), gave up other activities to drink (3%), spent a lot of time drinking (2%), drank to ease withdrawal symptoms (2%), tried to quit or cut down but could not (1%), and continued to drink despite problems caused by drinking (1%).
- ◆ During the past month 17% of all Wood County youth had ridden in a car driven by someone who had been drinking alcohol (2011 YRBS reports 21% for Ohio and 24% for the U.S.).
- ◆ 3% of all youth had driven a car in the past month after they had been drinking alcohol (2011 YRBS reports 7% for Ohio and 8% for the U.S.).
- ◆ 8% of youth drivers had driven a car in the past month after they had been drinking alcohol.

## Underage Drinking in Ohio

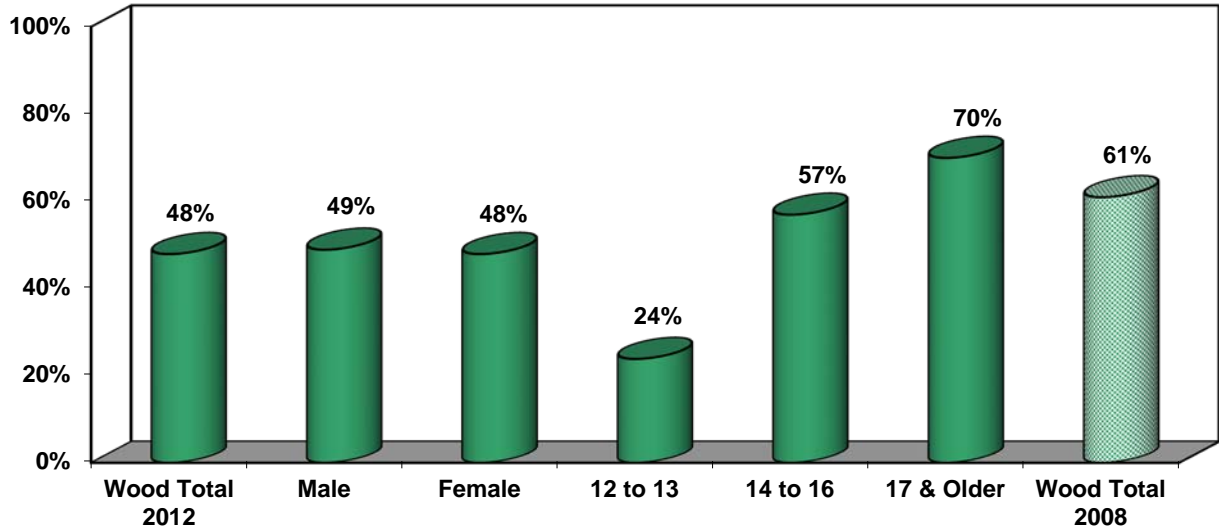
- ◆ The price for underage drinking on Ohio residents was \$2.9 billion in 2010.
- ◆ The figure of \$2.9 billion translates to a cost of \$2,596 per year for each youth in Ohio or \$3.19 per drink consumed underage.
- ◆ In 2009, there were 4,178 youth ages 12-20 who were admitted to an alcohol treatment program in Ohio, which was 11% of all alcohol abuse treatment admissions.
- ◆ Approximately 1,253 teen pregnancies and 36,019 teens engaging in risky sex can be attributed to underage drinking in 2009.
- ◆ In 2009, around 31 traffic fatalities and 1,872 nonfatal injuries were associated with driving after underage drinking.

*(Source: Pacific Institute for Research and Evaluation (PIRE) with funding from the Office of Juvenile Justice and Delinquency Prevention, Underage Drinking in Ohio: The Facts, September 2011, <http://www.udetc.org/factsheets/OH.pdf>)*

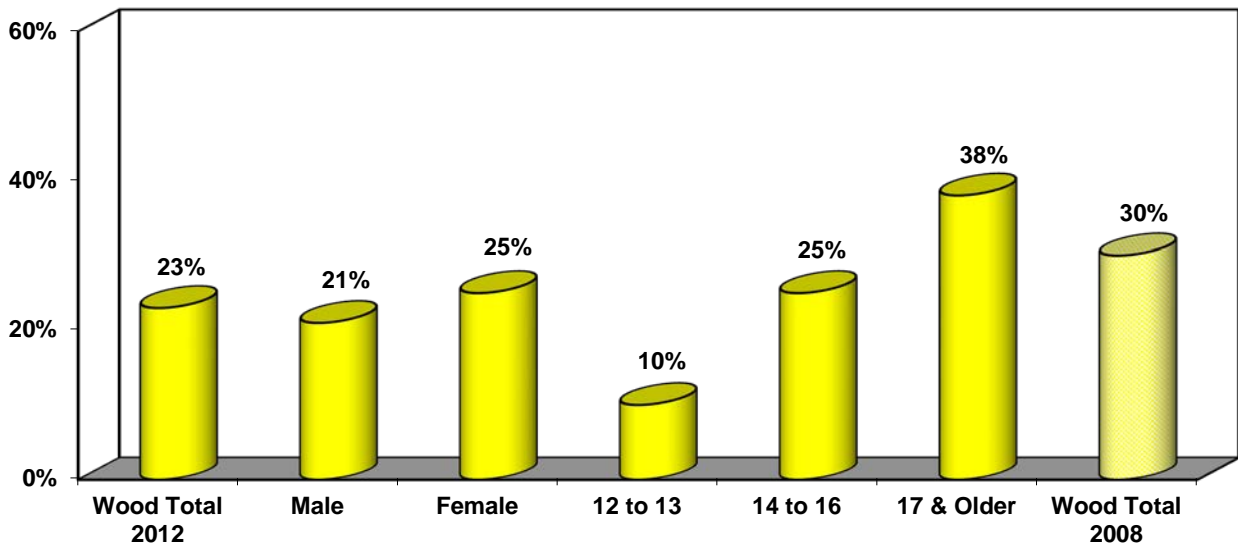
# Youth Alcohol Consumption

The following graphs show the percentage of Wood County youth who have drunk in their lifetime and those who are current drinkers. Examples of how to interpret the information include: 48% of all Wood County youth have drunk at some time in their life: 49% of males and 48% of females.

### Wood County Youth Having At Least One Drink In Their Lifetime



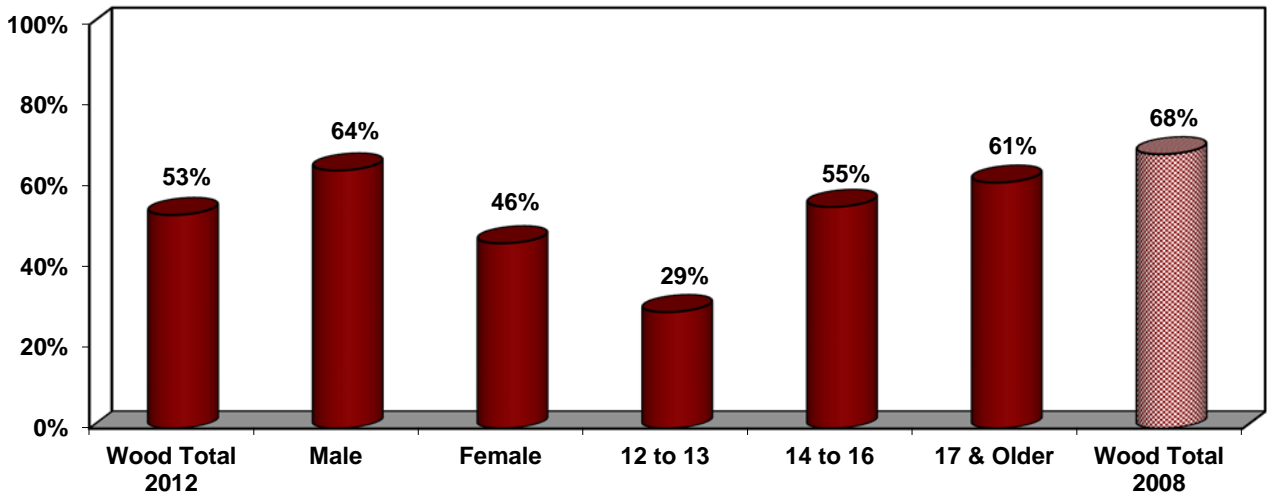
### Wood County Youth Who Are Current Drinkers



## Youth Alcohol Consumption

The following graph shows the percentage of Wood County youth who were binge drinkers. Examples of how to interpret the information include: 53% of current drinkers binge drank in the past month, 64% of males, and 46% of females had binge drank. The table shows differences in specific risk behaviors between current drinkers and non-current drinkers.

**Wood County Youth Current Drinkers Binge Drinking in Past Month\***



*\*Based on all current drinkers. Binge drinking is defined as having five or more drinks on an occasion.*

### Behaviors of Wood Youth

*Current Drinkers vs. Non-Current Drinkers*

Youth Behaviors	Current Drinker	Non-Current Drinker
Have been in a physical fight in the past 12 months	31%	16%
Attempted suicide in the past 12 months	7%	3%
Have smoked in the past 30 days	33%	4%
Have used marijuana in the past 30 days	40%	3%
Participated in extracurricular activities	85%	86%

*Current drinkers are those youth surveyed who have self-reported drinking at any time during the past 30 days.*

2008/2012 Youth Comparisons	Wood County 2008 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2008 (9 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2011 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2011 (9 <sup>th</sup> -12 <sup>th</sup> )
Ever tried alcohol	61%	74%	48%	64%	71%	71%
Current drinker	30%	40%	23%	31%	38%	39%
Binge drinker	21%	30%	12%	18%	24%	22%
Drank for the first time before age 13 (of all youth)	24%	22%	18%	15%	18%	21%
Rode with someone who was drinking	18%	20%	17%	17%	21%	24%
Drank and drove	6%	8%	3%	4%	7%	8%
Obtained the alcohol they drank by someone giving it to them	N/A	N/A	41%	36%	N/A	40%

*N/A – Not available*

# Youth Marijuana and Other Drug Use

## Key Findings

*In 2012, 12% of Wood County 6<sup>th</sup> -12<sup>th</sup> grade youth had used marijuana at least once in the past 30 days, increasing to 20% of those ages 17 and older. 11% of 6<sup>th</sup> - 12<sup>th</sup> grade youth used medications that were not prescribed for them or took more than prescribed to get high, increasing to 18% of those over the age of 17.*

## Youth Drug Use

- ◆ In 2012, 12% of all Wood County youth had used marijuana at least once in the past 30 days, increasing to 20% of those over the age of 17. The 2011 YRBS found a prevalence of 24% for Ohio youth and a prevalence of 23% for U.S. youth who had used marijuana one or more times during the past 30 days.
- ◆ 11% of Wood County youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at sometime in their lives, increasing to 18% of those over the age of 17.
- ◆ Wood County youth have tried the following sometime during their life:
  - 8% K2/spice/posh/salvia/synthetic marijuana
  - 7% of youth used inhalants (2011 YRBS reports 11% for U.S.)
  - 4% used cocaine (2011 YRBS reports 7% for Ohio and 7% for U.S.)
  - 4% used ecstasy/MDMA (2011 YRBS reports 8% for U.S.)
  - 3% used steroids (2011 YRBS reports 4% for Ohio and 4% for U.S.)
  - 3% used heroin (2011 YRBS reports 3% for Ohio 3% for U.S.)
  - 2% used methamphetamines (2011 YRBS reports 4% for U.S.)
  - 2% misused over-the-counter medication
  - 1% used bath salts
  - 1% pharm party/skittles
  - 1% used GhB
- ◆ During the past 12 months, 8% of all Wood County youth reported that someone had offered, sold, or given them an illegal drug on school property, increasing to 10% of high school youth (2011 YRBS reports 24% for Ohio and 26% for the U.S.).
- ◆ 2% of youth have used a needle to inject an illegal drug in their body (2011 YRBS reports 3% for Ohio and 2% for the U.S.).
- ◆ Of those youth who used alcohol, drugs and tobacco, they indicated the following would keep them from seeking help to quit: do not think it would help (80%), possibility of getting in trouble (22%), do not know where to get help (10%), paying for it (5%), and time (5%).

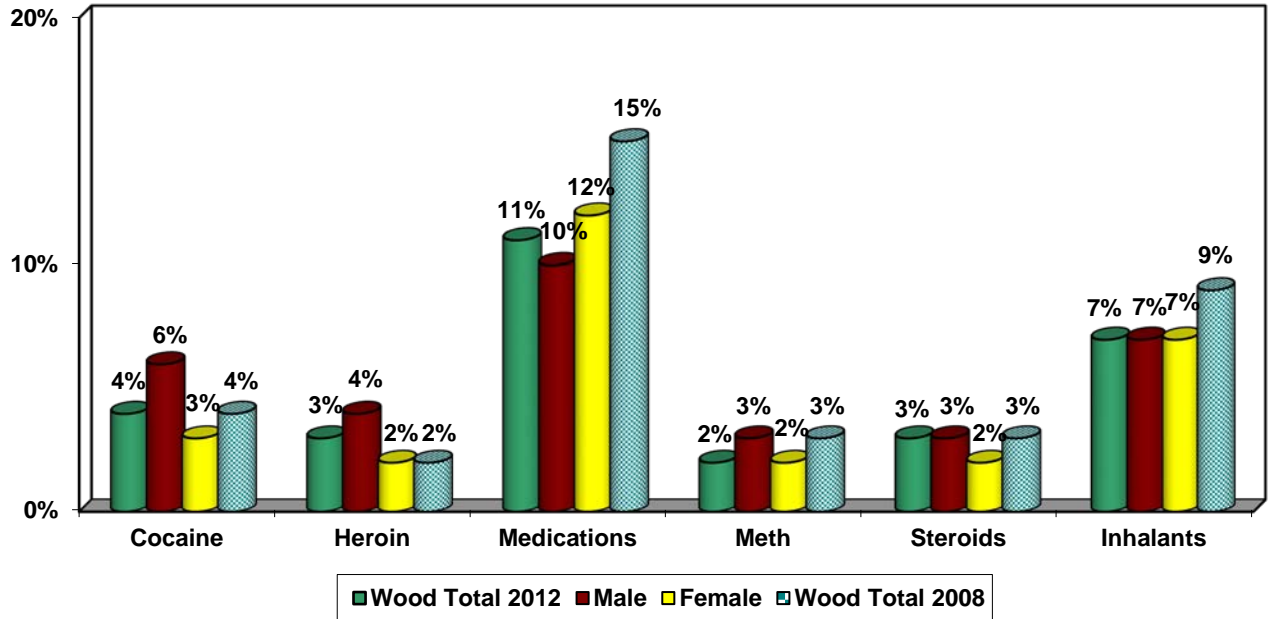
## Synthetic Marijuana

- ❖ “K2” and “Spice” are street names for synthetic marijuana.
- ❖ K2 or Spice is a mixture of herbs or other plant materials that have been sprayed with artificial chemicals that are supposed to mimic the effects of marijuana.
- ❖ The physical signs of using synthetic marijuana are very troubling and include increased agitation, profuse sweating, pale skin, vomiting and uncontrolled/spastic body movements.
- ❖ While these drugs may be “new” to many parents, more than one in 10 American high school seniors used synthetic marijuana in the prior year according to the “Monitoring the Future” study, conducted by the University of Michigan.
- ❖ Calls to poison control centers for exposure to synthetic marijuana doubled between 2010 and 2011 and is on track to continue rising in 2012.

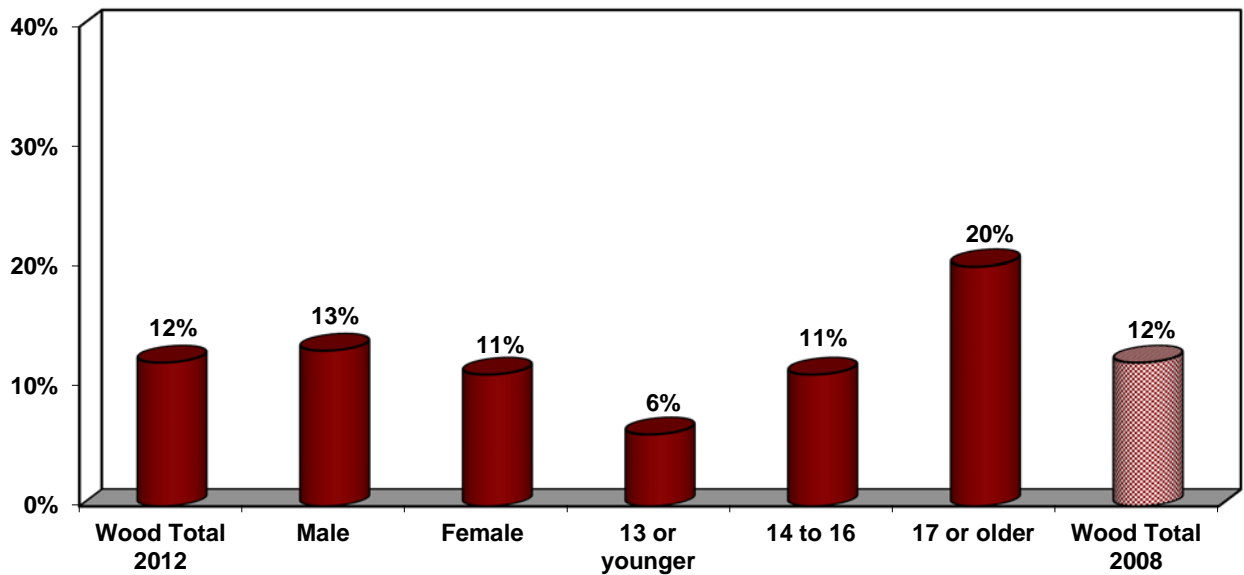
*(Source: The Partnership At Drugfree.Org, Parents 360 Synthetic Drugs : Bath Salts, K2/Spice : A Guide for parents and other influencers, www.drugfree.org, 2-16-12)*

# Youth Marijuana and Other Drug Use

## Wood County Youth Lifetime Drug Use



## Wood County Youth Marijuana Use in Past Month



## Youth Marijuana and Other Drug Use

2008/2012 Youth Comparisons	Wood County 2008 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2008 (9 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (6 <sup>th</sup> - 12 <sup>th</sup> )	Wood County 2012 (9 <sup>th</sup> - 12 <sup>th</sup> )	Ohio 2011 (9 <sup>th</sup> - 12 <sup>th</sup> )	U.S. 2011 (9 <sup>th</sup> - 12 <sup>th</sup> )
Youth who used marijuana in the past month	12%	18%	12%	16%	24%	23%
Ever used methamphetamines	3%	4%	2%	3%	6%*	4%
Ever used cocaine	4%	6%	4%	5%	7%	7%
Ever used heroin	2%	2%	3%	4%	3%	3%
Ever used steroids	3%	5%	3%	3%	4%	4%
Ever used ecstasy/MDMA	N/A	N/A	4%	4%	N/A	8%
Ever used inhalants	11%	11%	7%	7%	12%**	11%
Ever misused medications	15%	20%	11%	17%	N/A	N/A
Ever used a needle to inject an illegal drug into their body	1%	2%	2%	2%	3%	2%
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	13%	16%	8%	10%	24%	26%

*N/A – Not available*

*\*2007 YRBS Data*

*\*\*2005 YRBS Data*

### 2010 National Survey on Drug Use and Health (NSDUH)

- ❖ Rates of current illicit drug use remained stable from 2009 (10%) to 2010 (10.1%) among youths aged 12 to 17 for all drugs, but were higher than the rate in 2008 (9.3%)
- ❖ The rate of current marijuana use among youths aged 12 to 17 decreased from 8.2% in 2002 to 7.4% in 2010.
- ❖ The rate of current misuse of prescription drugs declined from 4% in 2002 to 3% in 2010 for those youth ages 12 to 17 years old.
- ❖ The rate for young adults ages 18-25 who reported driving under the influence of illicit drugs in the past year was 12.7% in 2010.
- ❖ Of those youth aged 12 to 17 who were illicit drug users, they used the following drugs: inhalants (1.1%), hallucinogens (0.9%) and cocaine (0.2%).

*(Source: Department of Health and Human Services, SAMHSA, NSDUH, 2010)*



# Youth Sexual Behavior and Teen Pregnancy Outcomes

## Key Findings

*One middle school did not ask sexual health questions and one high school asked limited sexual health questions. In 2012, about one-third (32%) of Wood County youth have had sexual intercourse, increasing to 62% of those ages 17 and over. 29% of youth had participated in oral sex. 25% of youth participated in sexting. Of those who were sexually active, 55% had multiple sexual partners.*

## Youth Sexual Behavior

- ◆ One middle school did not ask sexual health questions, and one high school asked limited sexual health questions.
- ◆ Nearly one-third (32%) of Wood County youth have had sexual intercourse, increasing to 62% of those ages 17 and over. The 2011 YRBS reports that 47% of U.S. youth have had sexual intercourse.
- ◆ 29% of youth had participated in oral sex, increasing to 55% of those ages 17 and over.
- ◆ 25% of youth had participated in sexting, increasing to 35% of those ages 17 and over.
- ◆ 25% of youth had viewed pornography, increasing to 34% of males.
- ◆ Of those youth who were sexually active in their lifetime, 45% had one sexual partner and 55% had multiple partners. 10% of all Wood County high school youth had 4 or more partners (2011 YRBS reports 18% for Ohio and 15% for the U.S.).
- ◆ Of those youth who were sexually active, 22% had done so by the age of 13. Another 41% had done so by 15 years of age. The average age of onset was 14.9 years old.
- ◆ Of all high school youth, 4% were sexually active before the age of 13 (2011 YRBS reports 6% for Ohio and 6% for the U.S.).
- ◆ Of the youth who were sexually active, 18% had drunk alcohol or used drugs before their last sexual encounter, increasing to 20% of those over the age of 17 (2011 YRBS reports 19% for Ohio and 22% for the U.S.).
- ◆ Wood County youth had experienced the following: wanted to get pregnant (3%), had a miscarriage (2%), got someone pregnant (1%), had an STD (1%), had a child (1%), been pregnant (1%), tried to get pregnant (1%), had sex in exchange for something of value (1%), and had an abortion (<1%).
- ◆ More than three-fourths (76%) of youth who were sexually active used condoms to prevent pregnancy; (2011 YRBS reports 60% for the U.S), 41% used birth control pills, (2011 YRBS reports 23% for Ohio and 18% for the U.S), 16% used the withdrawal method, 2% used Depo-Provera, and 6% used some other method. However, 11% were engaging in intercourse without a reliable method of protection (2011 YRBS reports 10% for Ohio and 13% for the U.S.).

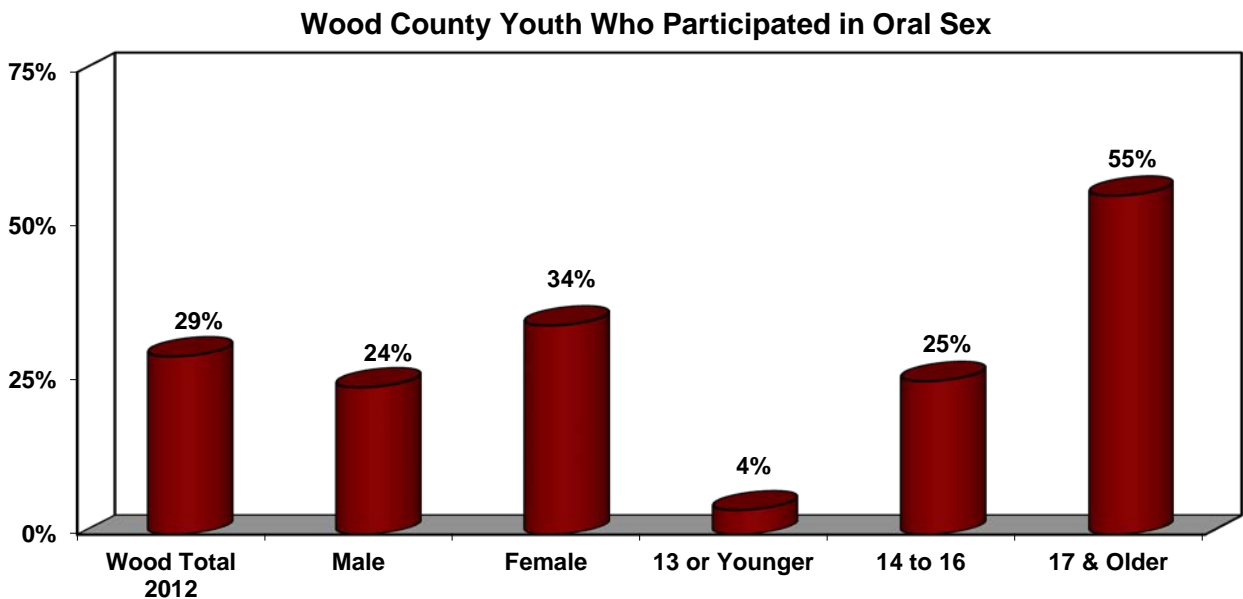
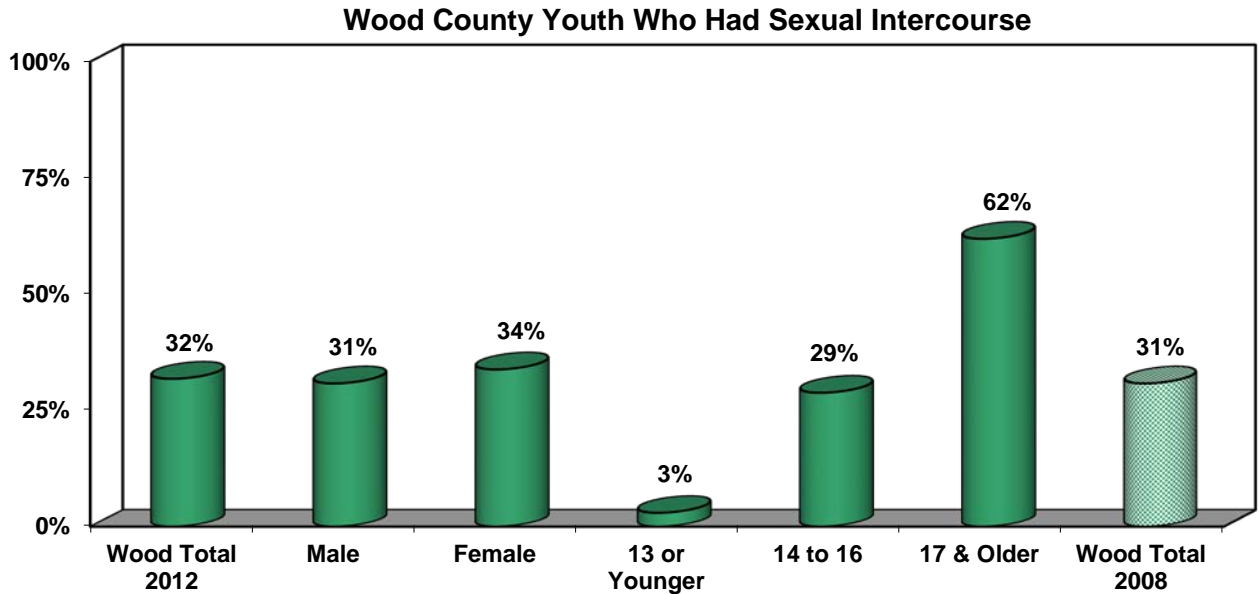
## Facts About “Sexting”

- ❖ One in five teen girls (22%) say they have electronically sent, or posted online, nude or semi-nude images of themselves.
- ❖ Almost one in five teen boys (18%) say they have sent or posted nude/semi-nude images of themselves.
- ❖ One-third (33%) of teen boys and one-quarter (25%) of teen girls say they have had nude/semi-nude images—originally meant to be private—shared with them.
- ❖ 15% of teens who have sent sexually suggestive content such as text messages, email, photographs or video say they have done so with someone *they only know online*.

(Source: National Campaign to Prevent Teen Pregnancy, 2012, obtained from: [http://www.thenationalcampaign.org/sextech/PDF/SexTech\\_PressReleaseFIN.pdf](http://www.thenationalcampaign.org/sextech/PDF/SexTech_PressReleaseFIN.pdf))

## Youth Sexual Behavior and Teen Pregnancy Outcome

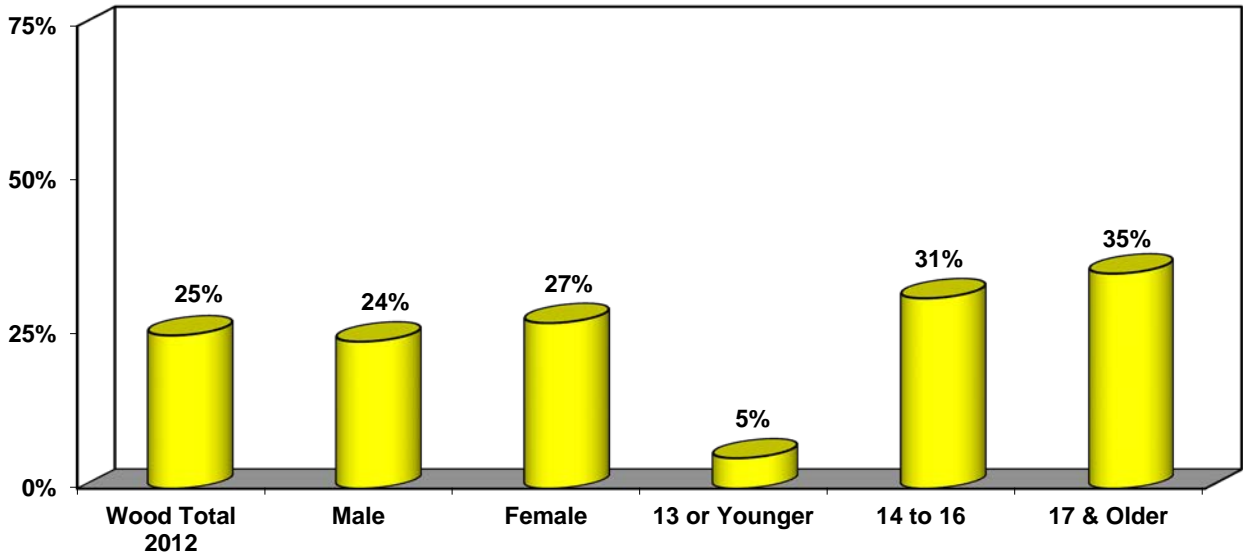
The following graph shows the percentage of Wood County youth who participated in sexual intercourse and oral sex. Examples of how to interpret the information include: 32% of all Wood County youth had sexual intercourse, 31% of males, and 34% of females had sex.



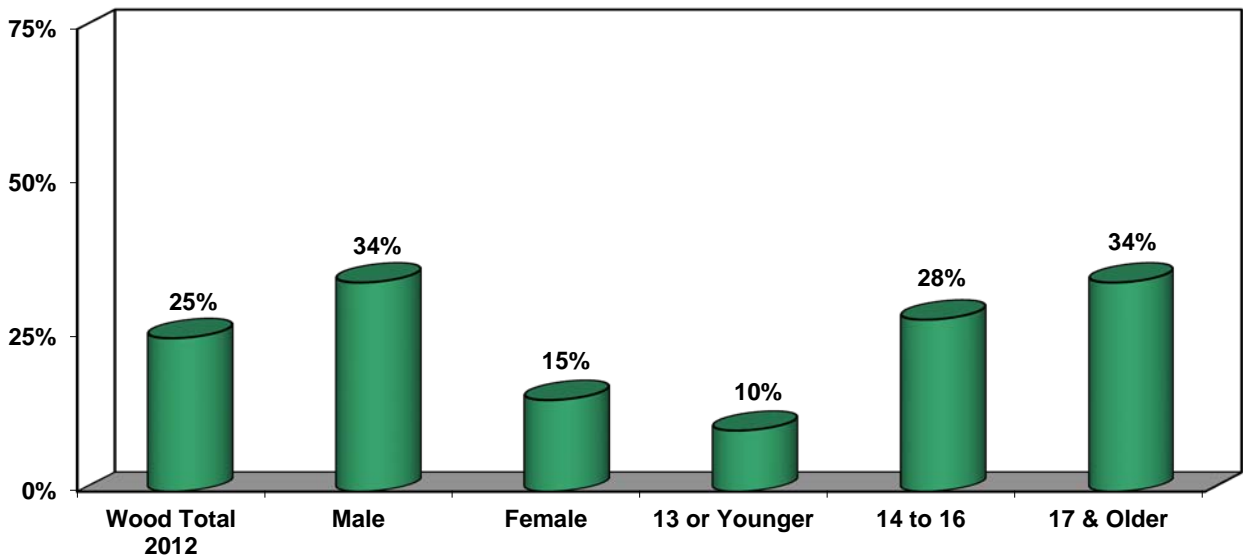
# Youth Sexual Behavior and Teen Pregnancy Outcomes

The following graphs show the percentage of Wood County youth who participated in sexting and viewed pornography. Examples of how to interpret the information include: 25% of all Wood County youth participated in sexting, 24% of males, and 27% of females.

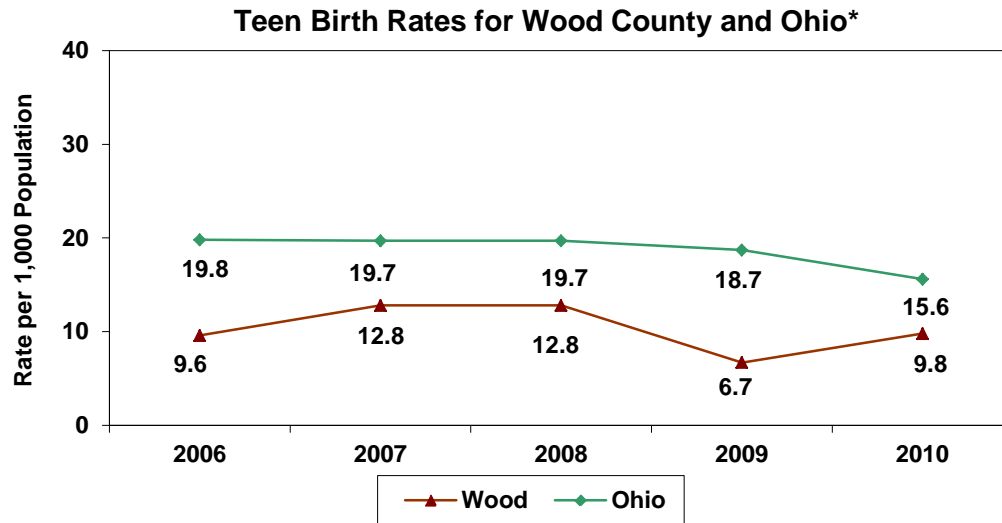
### Wood County Youth Who Participated in Sexting



### Wood County Youth Who Viewed Pornography



# Youth Sexual Behavior and Teen Pregnancy Outcome



\*Teen birth rates include women ages 15-17  
 (Source: Ohio Department of Health Information Warehouse Updated 4-12-12)

2008/2012 Youth Comparisons	Wood County 2008 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2008 (9 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (6 <sup>th</sup> - 12 <sup>th</sup> )	Wood County 2012 (9 <sup>th</sup> - 12 <sup>th</sup> )	Ohio 2011 (9 <sup>th</sup> - 12 <sup>th</sup> )	U.S. 2011 (9 <sup>th</sup> - 12 <sup>th</sup> )
Ever had sexual intercourse	31%	42%	32%	48%	45%*	47%
Used a condom at last intercourse	74%	76%	76%	77%	60%*	60%
Used birth control pills at last intercourse	28%	29%	41%	44%	23%	18%
Did not use any method to prevent pregnancy during last sexual intercourse	13%	12%	11%	11%	10%	13%
Had four or more sexual partners	7%	9%	6%	10%	18%	15%
Drank alcohol or used drugs before last sexual intercourse	20%	21%	18%	20%	19%	22%
Had sexual intercourse before the age of 13	4%	5%	4%	3%	6%	6%

\*2007 YRBS data

# Youth Mental Health and Suicide

## Key Findings

*In 2012, the Health Assessment results indicated that 9% of Wood County youth had seriously considered attempting suicide in the past year and 4% admitted actually attempting suicide in the past year.*

## Youth Mental Health

- ◆ In 2012, 9% of Wood County youth reported they had seriously considered attempting suicide in the past 12 months. 8% of high school youth had seriously considered attempting suicide, compared to the 2011 YRBS rate of 16% for U.S. youth and a rate of 14% for Ohio youth.
- ◆ In the past year, 4% of Wood County youth had attempted suicide and 2% had made more than one attempt. The 2011 YRBS reported a suicide attempt prevalence rate of 8% for U.S. youth and a 9% rate for Ohio youth.
- ◆ Of those who attempted suicide, 17% had to be treated by a doctor or nurse as a result of a related injury, poisoning or overdose.
- ◆ Of all Wood County youth, 1% had to be treated by a doctor or nurse as a result of a related injury, poisoning or overdose due to a suicide attempt (2011 YRBS reported 4% for Ohio and 2% for the U.S.).
- ◆ One-fifth (20%) of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities (2011 YRBS reported 27% for Ohio and 29% for the U.S.).
- ◆ When Wood County youth are dealing with feelings of depression or suicide, they usually talk to the following: best friend (26%), girlfriend/boyfriend (13%), parent/guardian (12%), brother/sister (10%), teacher (5%), professional counselor (4%), school counselor (4%), coach (3%), pastor/priest/religious leader (2%), youth minister (1%), scout master/club advisor (<1%), and someone else (5%).
- ◆ Wood County youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (41%), texting someone (33%), hobbies (28%), talking to a peer (25%), exercising (24%), eating (21%), talking to an adult (19%), praying (17%), using social media (16%), shopping (12%), writing in a journal (8%), breaking something (7%), smoking/using tobacco (7%), drinking alcohol (6%), reading the Bible (5%), self-harm (4%), using illegal drugs (4%), using prescribed medication (4%), vandalism/violent behavior (3%), talking to a medical professional (3%), using un-prescribed medication (1%), and gambling (1%).

### 2011 Ohio Suicide Statistics for Youth Grades 9-12

- ◆ 14% of Ohio youth seriously considered attempting suicide in the 12 months prior to the survey.
- ◆ 15% of Ohio youth made a plan about how they would attempt suicide in the 12 months prior to the survey.
- ◆ 9% of youth had attempted suicide one or more times in the 12 months prior to the survey.
- ◆ 4% of youth had a suicide attempt that resulted in an injury, poisoning, or an overdose that had to be treated by a doctor or nurse in the 12 months prior to the survey.

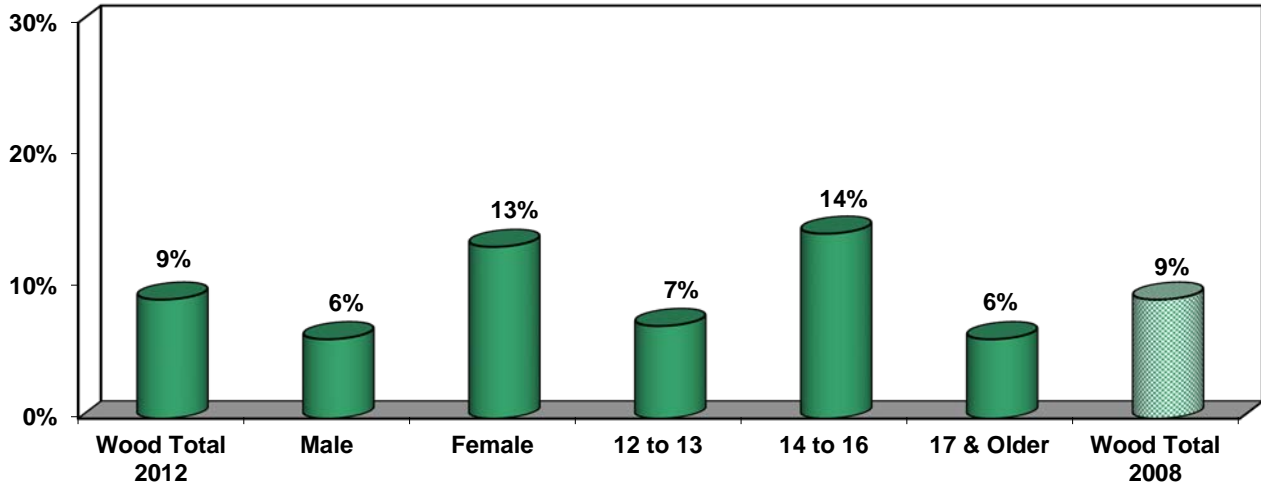
*(Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, 2011 YRBSS, Unintentional Injuries and Violence)*

2008/2012 Youth Comparisons	Wood County 2008 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2008 (9 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2011 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2011 (9 <sup>th</sup> -12 <sup>th</sup> )
Youth who had seriously considered suicide in past year	9%	10%	9%	8%	14%	16%
Youth who had attempted suicide in past year	4%	5%	4%	4%	9%	8%
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	21%	22%	20%	22%	27%	29%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (of all youth)	1%	1%	1%	1%	4%	2%

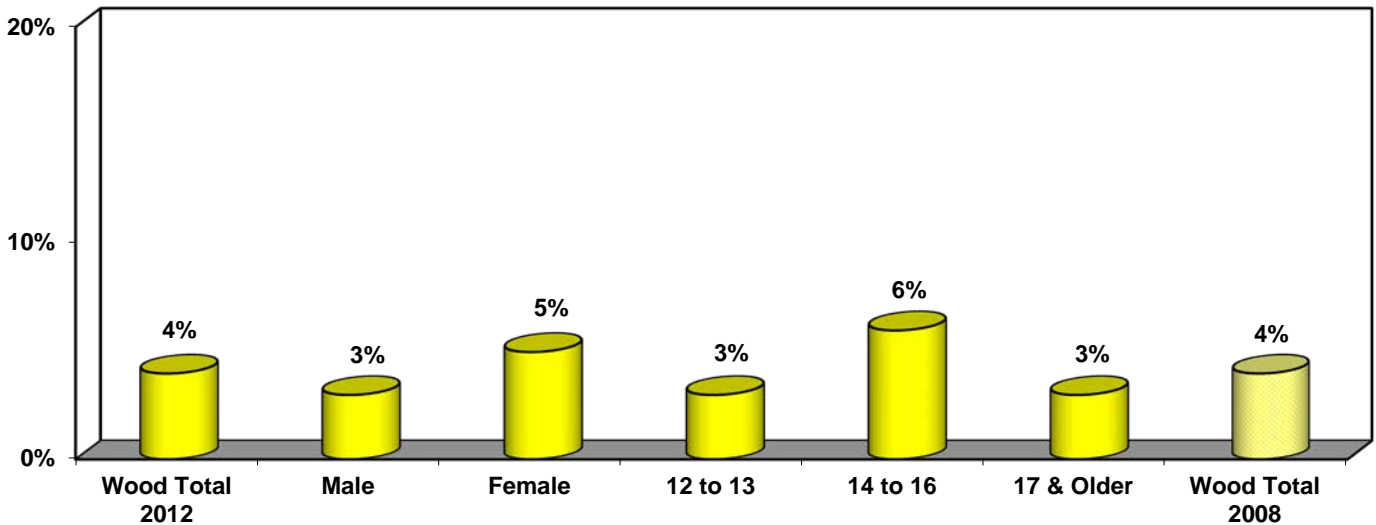
# Mental Health and Suicide

The following graphs show the percentage of Wood County youth who had seriously considered attempting suicide in the past 12 months (i.e., the first graph shows that 9% of all youth had seriously considered attempting suicide, 6% of males and 13% of females).

**Wood County Youth Who Had Seriously Considered Attempting Suicide in the Past 12 Months**



**Wood County Youth Who Attempted Suicide in Past 12 Months**



## Recognizing Warning Signs of Suicide in Others

- ❖ Feelings of despair or hopelessness
- ❖ Taking care of business-preparing for the family's welfare
- ❖ Drug or alcohol abuse
- ❖ Rehearsing suicide or seriously discussing specific suicide methods
- ❖ Shows signs of improvement, but in reality, relief comes from having made the decision to commit suicide

*(Source: CDC, National Depression and Manic Depression Association)*

# Youth Safety

## Key Findings

*In 2012, 49% of Wood County youth self-reported that they always wore a seatbelt when riding in a car driven by someone else. 64% of youth drivers talked on their cell phone and 49% texted while driving.*

## Personal Safety

- ◆ Nearly half (49%) of youth always wore a seatbelt when riding in a car driven by someone else, increasing to 54% of those ages 17 and older.
- ◆ 11% of youth rarely or never wore a seatbelt when riding in a car driven by someone else (2011 YRBS reported 17% for Ohio and 8% for the U.S.).
- ◆ In the past 30 days, 17% of youth had ridden in a car driven by someone who had been drinking alcohol, (2011 YRBS reported 21% for Ohio and 24% for the U.S.) and 3% had driven a car themselves after drinking alcohol (2011 YRBS reported 7% for Ohio and 8% for the U.S.).
- ◆ Wood County youth drivers did the following while driving: wore a seatbelt (85%), talked on their cell phone (64%), ate (52%), texted (49%), checked Facebook on their cell phone (18%), used the Internet on their cell phone (17%), used cell phone for other things (11%), applied makeup (9%), and read (5%).
- ◆ 7% of youth played the choking game.
- ◆ 16% of youth have used a tanning booth or bed, increasing to 37% of those ages 17 and older. 8% of youth used a tanning bed or booth only on special occasions and 2% used it every day.
- ◆ Nearly four-fifths (79%) of youth had a MySpace, Facebook or other social network account. Of those who had an account, they reported the following: they knew all of the people in “my friends” (62%), their account was currently checked private (57%), their parents monitored their account (29%), their parents had their password (24%), they had problems as a result of their account (9%), they had been asked to meet someone they met online (7%), their friends had their password (5%), and they have participated in sexual activity with someone they met online (3%).
- ◆ Two-thirds (67%) of youth had been to the doctor for a routine check-up in the past year.
- ◆ More than four-fifths (81%) of youth had been to the dentist for a check-up, exam, teeth cleaning or other dental work in the past year.
- ◆ Half (50%) of Wood County youth described their grades in school as mostly A’s; 34% described their grades as mostly B’s, 11% mostly C’s, 4% mostly D’s and <1% mostly F’s.

### Wood County Youth (Ages 0-14) Leading Causes of Death 2006-2008

**Total Deaths: 37**

- ◆ Accidents, Unintentional Injuries
- ◆ Cancers
- ◆ Septicemia

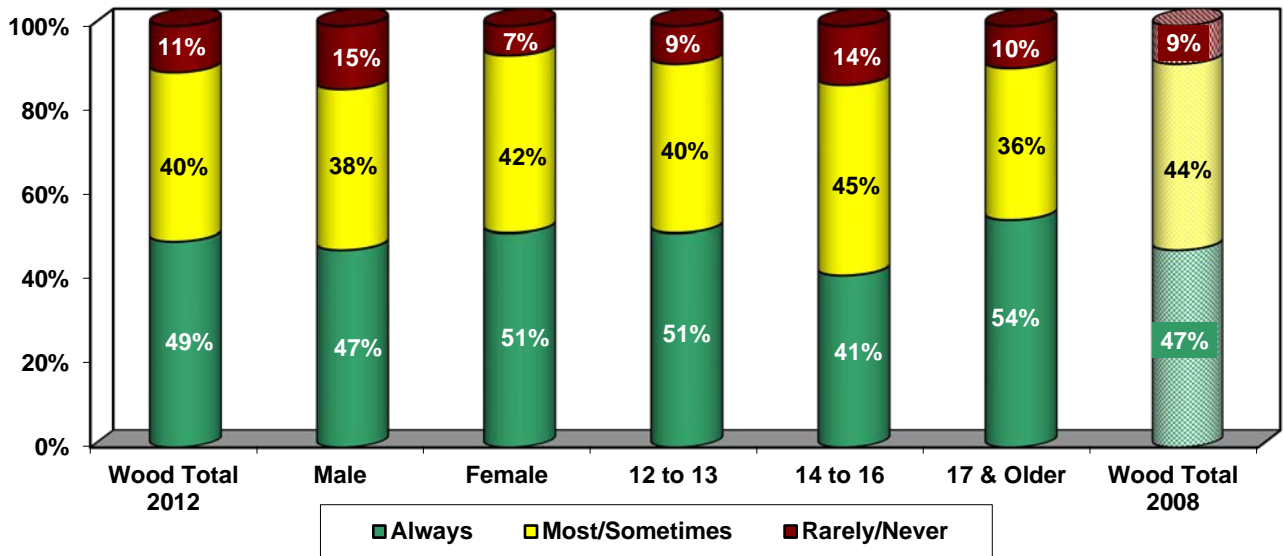
*(Source: ODH Information Warehouse, updated 4-15-10)*

2008/2012 Youth Comparisons	Wood County 2008 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2008 (9 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2011 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2011 (9 <sup>th</sup> -12 <sup>th</sup> )
Always wore a seatbelt	47%	49%	49%	49%	N/A	N/A
Rarely or never wore a seatbelt	9%	10%	11%	12%	17%	8%
Rode in a car driven by someone who had been drinking alcohol in past month	18%	20%	17%	17%	21%	24%
Drove a car after drinking alcohol	6%	8%	3%	4%	7%	8%

*N/A – Not available*

# Youth Safety

Wood County Youth Seatbelt Use in the Past Month



## Warning Signs for the “Choking Game”

**Common names for this game** – Blackout, Fainting Game, Space Monkey, Dream Game, Suffocation Roulette, Pass-Out Game, Flat Liner, California Choke, Space Cowboy, Airplaning, Purple Dragon, and many more

- ❖ Suspicious mark on side of the neck sometimes hidden by wearing turtlenecks, scarves and up-turned collars
- ❖ Changes in personality, such as overly aggressive or agitated
- ❖ Any straps, rope, or belt lying around without any reason
- ❖ Headaches
- ❖ Loss of concentration
- ❖ A flushed face
- ❖ Bloodshot eyes
- ❖ A thud in the bedroom or against a wall
- ❖ Any questions about the effects or dangers of strangulation

*(Source: Choking Game Education, [www.deadlygameschildrenplay.com](http://www.deadlygameschildrenplay.com))*



# Youth Violence Issues

## Key Findings

*In Wood County, 10% of youth had carried a weapon in the past month. 20% of youth had been in a physical fight in the past year. 20% of youth had purposefully hurt themselves. 42% of youth had been bullied in the past year.*

## Violence-Related Behaviors

- ◆ In 2012, 10% of Wood County youth had carried a weapon (such as a gun, knife or club) in the past 30 days, increasing to 15% of males (2011 YRBS reported 16% for Ohio and 17% for the U.S.).
- ◆ 20% of youth had purposefully hurt themselves at some time in their lives. They did so in the following ways: cutting (13%), scratching (9%), hitting (8%), biting (7%), burning (4%), and self-embedding (2%).
- ◆ 42% of youth had been bullied in the past year. The following types of bullying were reported:
  - 33% were verbally bullied (teased, taunted or called you harmful names)
  - 24% were indirectly bullied (spread mean rumors about you or kept you out of a “group”)
  - 13% were cyber bullied (teased, taunted or threatened by e-mail or cell phone) (2011 YRBS reported 15% for Ohio and 16% for the U.S.)
  - 13% were physically bullied (you were hit, kicked, punched or people took your belongings)
- ◆ In the past year, 20% of youth had been involved in a physical fight; 13% on more than one occasion (2011 YRBS reported 31% for Ohio and 33% for the U.S.).
- ◆ 6% of youth reported a boyfriend or girlfriend hit, slapped, or physically hurt them on purpose in the past 12 months, (2011 YRBS reported 9% for the U.S.) increasing to 9% of those over the age of 17.
- ◆ 8% of youth reported an adult or caregiver hit, slapped, or physically hurt them on purpose in the past 12 months.
- ◆ Wood County youth had been forced to engage in the following: touched in an unsafe sexual way (7%), sexual intercourse (3%), other sexual activity (3%), and oral sex (2%).

### Facts Concerning Youth Violence

- ❖ Youth violence is defined by the CDC as “harmful behaviors that can start early and continue into young adulthood.”
- ❖ In 2007, 5,764 youth ages 10-24 were murdered, averaging 16 per day.
- ❖ Emergency rooms treated in excess of 656,000 youth ages 10-24 for physical assault injuries in 2006.
- ❖ Approximately 20% of U.S. high school youth reported being bullied on school property in 2011.
- ❖ In 2011, 5% of U.S. high school youth took a weapon to school in the past month.

(Source: CDC, Understanding Youth Violence Fact Sheet, 2010, [www.cdc.gov/violenceprevention/pdf/yy-factsheet-a.pdf](http://www.cdc.gov/violenceprevention/pdf/yy-factsheet-a.pdf))

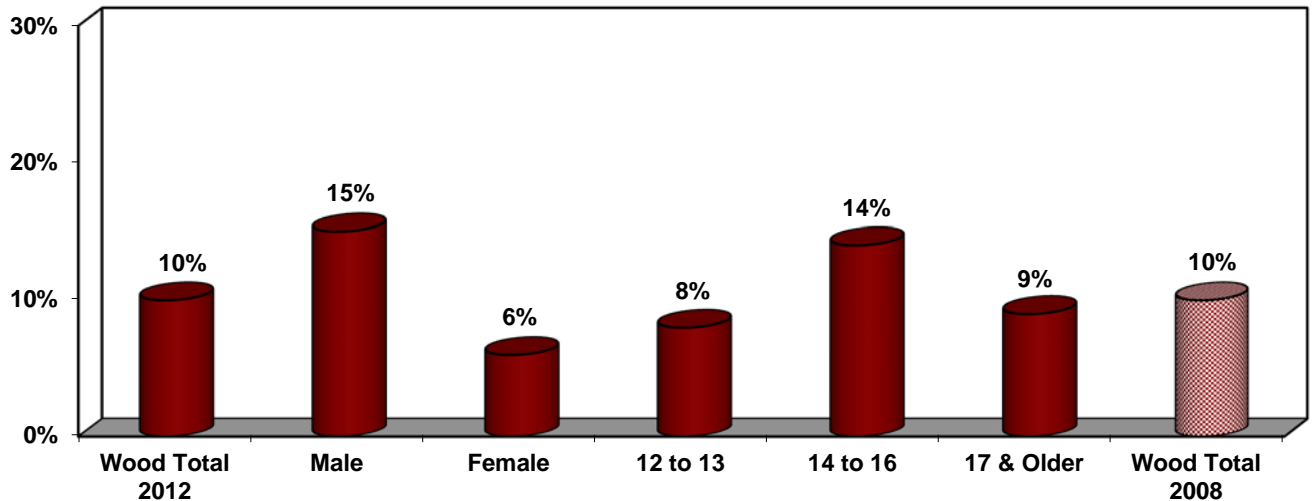
2008/2012 Youth Comparisons	Wood County 2008 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2008 (9 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wood County 2012 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2011 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2011 (9 <sup>th</sup> -12 <sup>th</sup> )
Carried a weapon in past month	10%	12%	10%	11%	16%	17%
Been in a physical fight in past year	28%	28%	20%	17%	31%	33%
Bullied in the past year	46%	45%	42%	40%	N/A	N/A
Electronically/cyber bullied in past year	12%	11%	13%	13%	15%	16%
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year	4%	6%	6%	7%	N/A	9%
Ever physically forced to have sexual intercourse	5%	7%	3%	3%	9%	8%

*N/A – Not available*

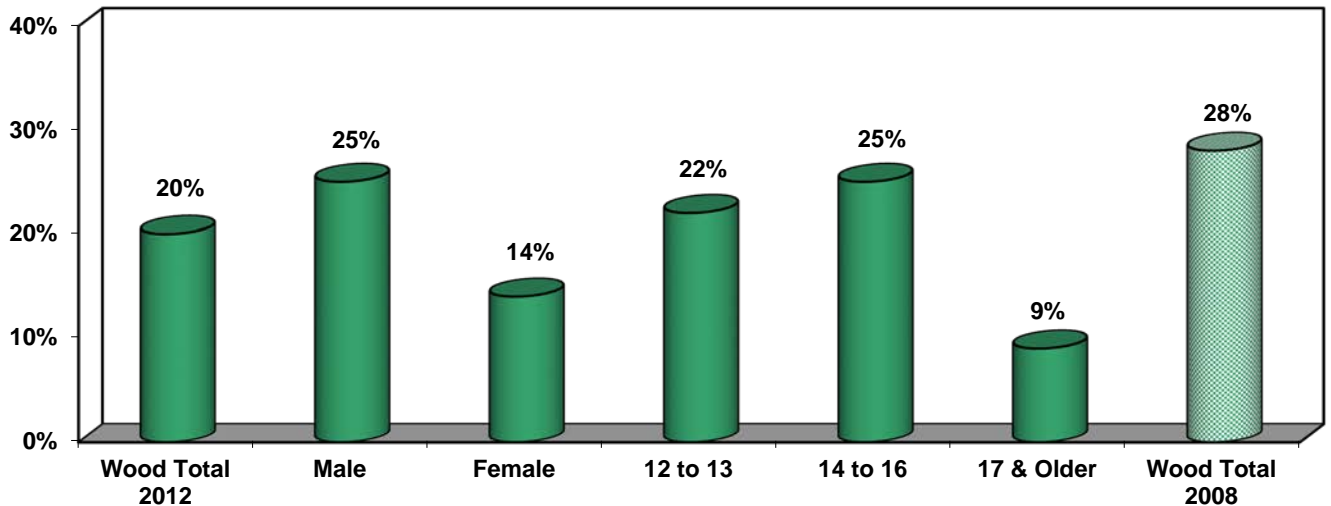
## Youth Violence Issues

The following graphs show Wood County youth carrying a weapon in the past 30 days and those involved in a physical fight in the past year. The graphs show the number of youth in each segment giving each answer (i.e., the first graph shows that 10% of all youth carried a weapon in the past 30 days, 15% of males and 6% of females).

**Wood County Youth Carrying a Weapon During the Past 30 Days**



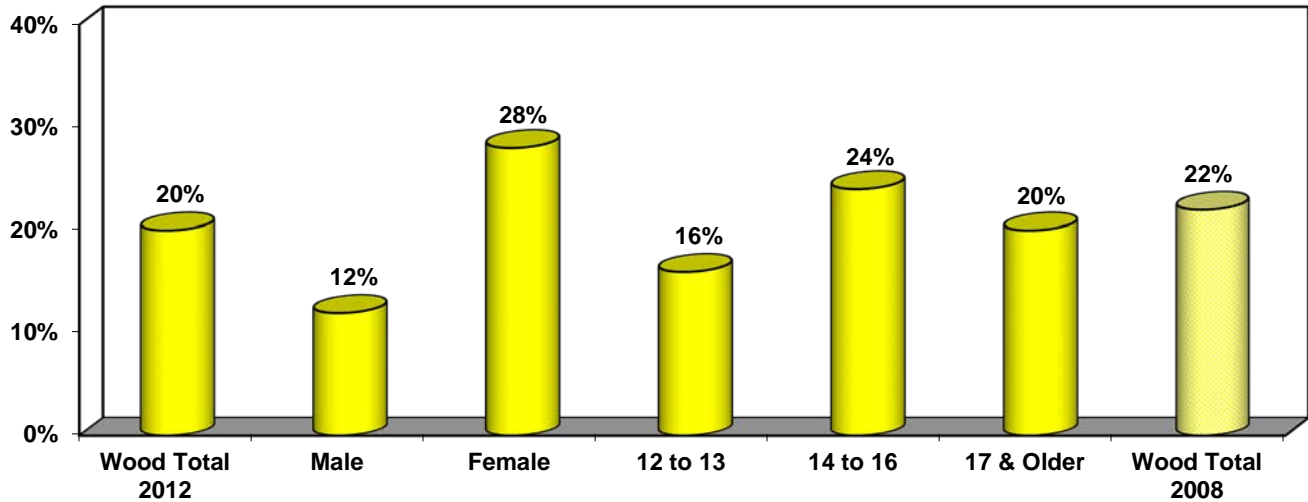
**Wood County Youth Who Had Been Involved in a Physical Fight in the Past Year**



## Youth Violence Issues

The following graph shows Wood County youth who purposefully hurt themselves at some time in their life. The graphs show the number of youth in each segment giving each answer (i.e., the first graph shows that 20% of all youth hurt themselves at some time in their life, 12% of males and 28% of females).

**Wood County Youth Who Purposefully Hurt Themselves During Their Life**



**Types of Bullying Wood County Youth Experienced in Past Year**

Youth Behaviors	Total	Male	Female	13 or younger	14-16 Years old	17 and older
Physically Bullied	13%	14%	11%	18%	13%	5%
Verbally Bullied	33%	28%	39%	35%	35%	28%
Indirectly Bullied	24%	15%	33%	24%	28%	19%
Cyber Bullied	13%	6%	20%	11%	12%	16%

### Types of Bullying

- ❖ **Verbal Bullying:** Any bullying that is done by speaking. Calling names, teasing, threatening somebody, and making fun of others are all forms of verbal bullying.
- ❖ **Indirect Bullying:** A form of bullying that involves mean rumors being spread about someone or keeping someone out of a “group”.
- ❖ **Physical Bullying:** Any bullying that hurts someone's body or damages their possessions. Stealing, shoving, hitting, fighting, and destroying property all are types of physical bullying.
- ❖ **Cyber Bullying:** Any bullying that happens over any technological device. This includes email, instant messaging, social networking sites (such as Facebook), text messages, and cell phones.

*(Source: RESPECT, Bullying Definitions, obtained from: <http://www.respect2all.org/parents/bullying-definitions>)*

# Children's Health and Functional Status

## Key Findings

In 2012, 81% of Wood County parents had taken their child ages 0-11 to the dentist in the past year. 12% of Wood County parents reported their child ages 0-11 had been diagnosed with asthma. 6% of parents reported their child had been diagnosed with ADD/ADHD.

## Health of Children ages 0-11

- ◆ In 2012, 15% of children were classified as obese by Body Mass Index (BMI) calculations. 11% of children were classified as overweight, 44% were normal weight, and 30% were underweight.
- ◆ More than half (59%) of Wood County parents of 0-11 year olds rated their child's health as excellent. 1% of parents rated their child's health as fair or poor.
- ◆ 49% of children had a seasonal flu vaccine (54% received a shot and 46% received nasal spray).
- ◆ 81% of children had been to the dentist in the past year, increasing to 94% of 6-11 year olds.
- ◆ Parents gave the following reasons for not getting dental care for their child: child was not old enough to go to the dentist (9%), costs too much (3%), no insurance (3%), child refused to go (1%), not in the habit of going to the dentist (1%), did not know they needed to go (1%), treatment was ongoing (<1%), health plan problem (<1%), could not find a dentist who accepts their insurance (<1%), inconvenient times/could not get an appointment (<1%), did not know where to go for treatment (<1%), fear, apprehension, or pain (<1%), and other (2%).
- ◆ Parents reported their child had the following allergies:
  - Pollen (8%)
  - Ragweed (6%)
  - Grasses (5%)
  - Cats (5%)
  - Dogs (4%)
  - House dust mites (4%)
  - Milk/dairy products (3%)
  - Mold (3%)
  - Peanuts (2%)
  - Wheat (2%)
  - Tree nuts (2%)
  - Soy (1%)
  - Eggs (1%)
  - Fungi (1%)
  - Horses (1%)
  - Bees (<1%)
  - Strawberries (<1%)
  - Gluten (<1%)
  - Fish (<1%)
  - Shellfish (<1%)
  - Red dye (<1%)
  - Other (5%)
- ◆ 3% of children had an epi-pen for their allergy.
- ◆ A doctor told Wood County parents their 0-11 year-old child had the following at some time:
  - Asthma (12%)
  - ADD/ADHD (6%)
  - Developmental delay/physical impairment (5%)
  - Bone/joint/muscle problems (4%)
  - Pneumonia (4%)
  - Learning disability (4%)
  - Behavioral/conduct problem (3%)
  - Birth defect (3%)
  - Anxiety problems (3%)
  - Hearing problems (3%)
  - Vision problems that cannot be corrected with glasses (3%)
  - Genetic disease (2%)
  - Urinary tract infection (2%)
  - Head injury (2%)
  - Digestive tract infection/disorder (1%)
  - Autism (1%)
  - Asperger's/Pervasive development disorder (1%)
  - Epilepsy (1%)
  - Cancer (1%)
  - Diabetes (<1%)
  - Depression problems (<1%)

## National Survey of Children's Health 2007

- ❖ 8% of Ohio children ages 0-5 were diagnosed with asthma, increasing to 21% of 6-11 year olds.
- ❖ 2% of Ohio children ages 2-5 were diagnosed with ADD/ADHD, increasing to 9% of 6-11 year olds.

(Source: National Survey of Children's Health, 2007  
<http://nchsdata.org>)

## Children's Health and Functional Status

- ◆ Wood County parents thought that their child had difficulties with one or more of the following: concentration (12%), emotions (8%), behavior (6%), learning (5%), and being able to get along with people (2%).
- ◆ The above difficulties were being managed in the following ways: family and friends (62%), school or day care (37%), child's doctor (20%), other professional (14%), and a mental health professional (8%). 15% of parents indicated their child did not need help, and 4% did not know where to get help.
- ◆ 5% of parents reported their child took prescription medication for depression, anxiety, ADHD, behavior problems, etc.
- ◆ 8% of parents reported their child currently had asthma. Of those parents who reported their child had asthma, 50% indicated their child took asthma medication in the past day.
- ◆ 40% of children have been tested for lead poisoning, increasing to 68% of those with annual incomes less than \$25,000.
- ◆ Parents of Wood County children ages 0-11 reported that their children consumed the following sources of calcium daily: milk (92%), yogurt (55%), other dairy products (37%), calcium fortified juice (17%), calcium supplements (3%), and other calcium sources (9%).
- ◆ Parents reported their child had the following for breakfast: cereal (83%), milk (73%), fruit or fruit juice (40%), toast (39%), eggs (31%), yogurt (28%), Pop Tart, donut, or other pastry (26%), oatmeal (23%), bacon, sausage, or ham (19%), nothing (1%), pizza (<1%) pop (<1%), and something else (14%). 2% of parents reported their child rarely ate breakfast. 4% of children ate at the school breakfast program.
- ◆ 90% of parents reported their child was physically active for at least 60 minutes on 3 or more days in the past week. 36% had done so every day of the week.
- ◆ Wood County children spent an average of 2.5 hours watching TV, 0.9 hours playing video games, 0.8 hours on the computer, and 0.2 hours on a cell phone on an average day of the week.

Child Comparisons	Wood County 2012 Ages 0-5	Ohio 2007 Ages 0-5	U.S. 2007 Ages 0-5	Wood County 2012 Ages 6-11	Ohio 2007 Ages 6-11	U.S. 2007 Ages 6-11
Rated health as excellent or very good	93%	91%	87%	92%	84%	84%
Diagnosed with asthma	7%	8%	9%	16%	21%	16%
Diagnosed with ADHD/ADD	1%	2%	1%	8%	9%	9%
Diagnosed with behavioral or conduct problems	2%	N/A	1%	3%	N/A	5%
Diagnosed with developmental delay or physical impairment	6%	2%	3%	4%	8%	6%
Diagnosed with anxiety problems	1%	N/A	1%	5%	N/A	4%
Diagnosed with vision problems that cannot be corrected	1%	N/A	1%	5%	N/A	2%
Diagnosed with bone, joint, or muscle problems	3%	1%	2%	4%	3%	3%
Diagnosed with hearing problems	2%	N/A	2%	3%	N/A	3%
Diagnosed with epilepsy	1%	N/A	<1%	1%	N/A	1%
Diagnosed with a head injury	1%	N/A	<1%	2%	N/A	2%
Diagnosed with autism	1%	N/A	1%	1%	N/A	2%
Diagnosed with diabetes	1%	N/A	<1%	<1%	N/A	<1%

*N/A – Not available*

# Children's Health and Functional Status

## Children's Dental Health

- ❖ Dental care is the number one unmet health care need for children of all family incomes across Ohio as well as for all races and ethnicities.
- ❖ Severe dental problems can result in poor performance or absence from school.
- ❖ Of Ohio children ages 0-17, 17% do not have insurance for dental care.
- ❖ 13% of Ohio children ages 0-17 have had a recent toothache.
- ❖ For Ohio Medicaid consumers ages 0-3, 12% had a dental visit in 2008. For Ohio Medicaid consumers ages 3-18, 42% had a dental visit in 2008.
- ❖ In 2008, 9% of Wood County residents under the age of 18 had never been to the dentist.
- ❖ Even though low-income children ages 0-18 in Ohio had higher rates of dental coverage, they were less likely to have a dental visit in the past year. 68% of low-income children ages 0-18 (200% FPL or less) had a dental visit in the past year, 82% of higher-income children had a dental visit within the past year.

*(Source: ODH, Ohio Oral Health Surveillance System, 2010,  
<http://publicapps.odh.ohio.gov/oralhealth/ReportsDisplay.aspx?Report=BOHSReport&Format=pdf&CountyName=Wood&ReportVersion=2010>)*

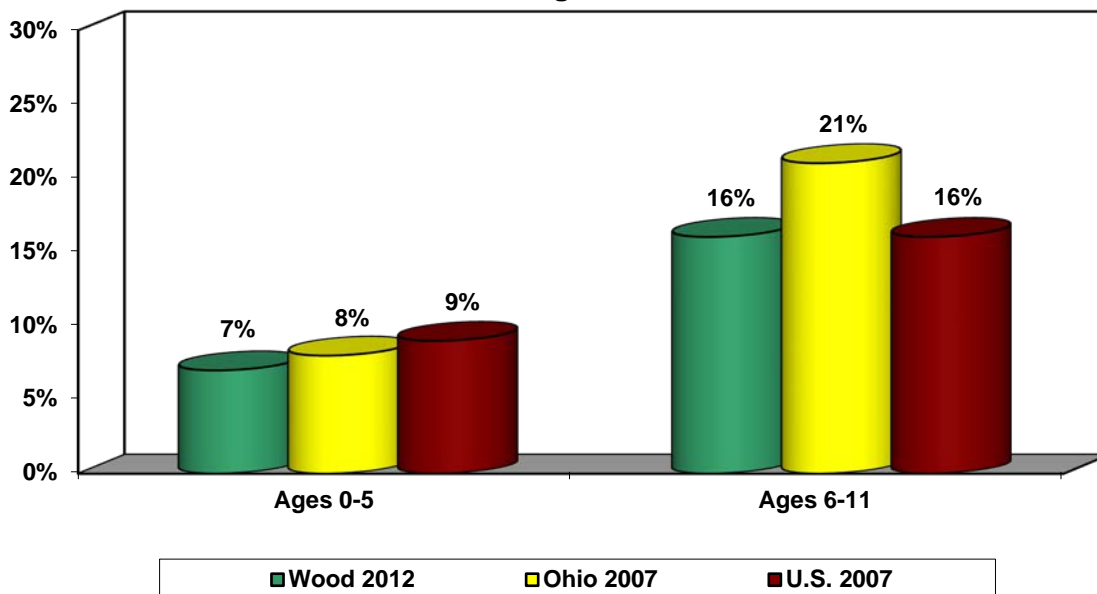
## Asthma

- ◆ In 2007, 29% of U.S. children with food allergy also had reported asthma compared with 12% of children without food allergy.
- ◆ 8% of U.S. children ages 0-4 have asthma, while 14% of children ages 5-14 have asthma.

*(Source: CDC, National Center for Health Statistics Data Brief, Food Allergy Among U.S. Children: Trends in Prevalence and Hospitalizations, October 2008)*

The following graph shows that Wood County has a smaller percent of children ages 0-5 who are diagnosed with asthma than both Ohio and the U.S. For children ages 6-11, Wood County has an equal percent who are diagnosed with asthma compared to the U.S., but a smaller percent diagnosed than Ohio.

**Children Diagnosed with Asthma**



## Children's Health and Functional Status

### Children's Health

- ❖ About 30 to 50 percent of students with ADHD will also have a learning disability.
- ❖ If a child has cortex-based disorders, emotional regulatory disorders, or chronic motor and/or vocal tic disorder the child has up to a 50 percent chance that he or she will have at least one of the others as well. Cortex-based disorders are learning, language, and/or motor disabilities. Emotional regulatory disorders are anxiety disorders, which may include panic attacks, depression, anger-control disorders, and obsessive-compulsive disorder.
- ❖ About 1 out of every 33 babies is born with a major birth defect.
- ❖ The causes of about 70% of birth defects are unknown.
- ❖ Most birth defects happen during early pregnancy; before the woman knows she is pregnant.
- ❖ Parents who have a child with an Autism Spectrum Disorder (ASD) have a 2 to 8 percent chance of having a second child with an ASD.
- ❖ About 40% of children with an ASD do not talk at all. Another 25 to 30 percent have some words at 12 to 18 months of age and lose them. Others may speak, but not until later in childhood.
- ❖ ASD is reported to occur in all racial, ethnic, and socioeconomic groups, yet are on average 4 to 5 times more likely to occur in boys rather than in girls.

*(Source: CDC, Learning Disabilities Association of America, National Birth Defects Prevention Network)*

### Children's Nutrition

- ❖ Healthy eating contributes to overall healthy growth and development, including healthy bones, skin, and energy levels; and a lowered risk of dental caries, eating disorders, constipation, malnutrition, and iron deficiency anemia.
- ❖ Hunger and food insufficiency in children are associated with poor behavioral and academic functioning.
- ❖ 39% of children ages 2-17 meet the USDA's dietary recommendations for fiber.
- ❖ Less than 40% of U.S. children and adolescents meet the U.S. dietary guidelines for saturated fat.
- ❖ Of U.S. children ages 2-5 100% get the total recommended amount of fruit, grains, and milk. While 73% get the total recommended amount of meat and beans, only 44% get the total recommended amount of vegetables. Of U.S. children ages 6-11 100% get the total recommended amount of grains, 58% get the total recommended amount of fruit, 46% get the total recommended amount of vegetables, 87% get the total recommended amount of milk, and 78% get the total recommended amount of meat and beans.
- ❖ Overweight and obesity, influenced by poor diet and inactivity, are significantly associated with an increased risk of diabetes, high blood pressure, high cholesterol, asthma, joint problems, and poor health status. The prevalence of obesity among children ages 6-11 has more than doubled in the past 20 years. Overweight children and adolescents are more likely to become overweight or obese adults. One study has shown that children who became obese by the age of eight were more severely obese as adults.

*(Source: CDC, [childstats.gov](http://childstats.gov))*

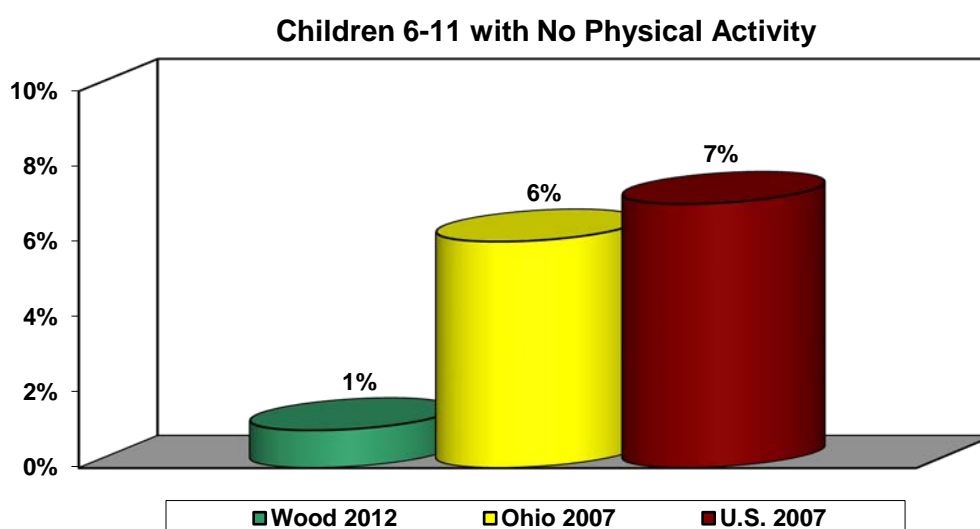
## Children's Health and Functional Status

### Physical Activity

- ◆ In 2007, 6% of Ohio children ages 6-11 haven't participated in physical activity for at least 20 minutes in the past week. During the past week, 15% of Ohio children ages 6-11 have participated in physical activity for at least 20 minutes 1 to 3 days, 37% have participated in physical activity for at least 20 minutes 4 to 6 days, and 42% have participated in physical activity for at least 20 minutes every day.

(Source: National Survey of Children's Health, Data Resource Center)

The following graph shows that Wood County children ages 6-11 participate in some type of physical activity more than both Ohio and U.S. children. Although the percent of Ohio children who do not participate in any physical activity is close to the percent of children in the U.S., Wood County has a much smaller percent of children ages 6-11 who participate in no physical activity.



### TV, Video Games, and Computer Usage

- ❖ The average time Wood County children ages 0-11 spend watching TV is 2.5 hours, and the average time playing video games is 0.9 hours.
- ❖ For parents of Ohio children ages 6-11, 6% have no rules about what programs their children can watch.
- ❖ Wood County children ages 0-11 used a computer for an average of 0.8 hours on an average day. Ohio children ages 6-11 use a computer on an average weekday for purposes other than school work for the following: no time (24%), less than an hour (39%), 1-3 hours (27%), and more than 3 hours (2%). 8% of Ohio children ages 6-11 do not own a computer.

(Source: National Survey of Children's Health, Data Resource Center)



# Children's Health Insurance, Access, Utilization and Medical Home

## Key Findings

*In 2012, 3% of Wood County parents reported their 0-11 year old did not have health insurance. 7% of parents reported they received benefits from the SNAP/food stamp program and 5% from the WIC program. 18% of parents reported they had taken their child to the hospital emergency room in the past year. 87% of parents had taken their child to the doctor for preventive care in the past year.*

## Health Insurance

- ◆ 3% of parents reported that their child did not have health insurance.
- ◆ Wood County children had the following types of health insurance: parent's employer (63%), Medicaid (10%), someone else's employer (18%), self-pay (3%), multiple-including private (3%), and Medicare (1%).
- ◆ Parents reported their child's health insurance covered the following: doctor visits (99%), prescription coverage (98%), hospital stays (98%), well visits (97%), immunizations (94%), dental (91%), mental health (80%), and vision (77%).

## National Survey of Children's Health 2007

- ◆ 12% of 0-5 year old and 11% of 6-11 year old Ohio children were without insurance at some time in the past year.
- ◆ 32% of 0-5 year old and 26% of 6-11 year old Ohio children had public insurance.
- ◆ 96% of 0-5 year old and 87% of 6-11 year old Ohio children had been to the doctor for preventive care in the past year.

## Access and Utilization

- ◆ In the past year, parents reported that someone in the household received the following: benefits from free or reduced cost breakfast or lunches at school (14%), mental health treatment (8%), SNAP/food stamps (7%), WIC program (5%), Help Me Grow (5%), cash assistance from a welfare program (2%), Head Start/Early Head Start (2%), subsidized childcare through Wood County Job & Family Services (1%), and substance abuse treatment (<1%).
- ◆ 4% of parents reported their child did not get all of the medical care they needed in the past year. They gave the following reasons: costs too much (3%), no insurance (2%), health plan problem (1%), treatment is ongoing (1%), no referral (<1%), doctor did not know how to treat/provide care (<1%), did not know where to go for treatment (<1%), could not find a doctor who accepted child's insurance (<1%), inconvenient times/could not get appointment (<1%), and other reasons (<1%).
- ◆ 4% of parents reported their child did not get all of the prescription medications they needed in the past year. They gave the following reasons: costs too much (2%), no insurance (1%), health plan problem (1%), treatment is ongoing (<1%), could not find a doctor who accepted child's insurance (<1%), did not know where to go for treatment (<1%), no referral (<1%), and other reasons (<1%).
- ◆ About one-fifth (18%) of parents took their child to the hospital emergency room for health care in the past year, increasing to 37% of parents with incomes less than \$25,000. 2% of children had been to the ER three or more times in the past year. 39% of those parents who reported taking their child to the emergency room reported it was because of an accident, injury or poisoning.
- ◆ 2% of children received mental health care or counseling.
- ◆ 81% of children visited a dentist in the past year, increasing to 94% of those ages 6-11.
- ◆ 98% of parents reported their child had received all of the recommended immunizations for his/her age.

# Children's Health Insurance, Access, Utilization and Medical Home

## Medical Home

- ◆ Wood County parents reported the following as the place they usually go if their child is sick or they need advice about their child's health: doctor's office (95%), multiple places-including a doctor's office (2%), hospital emergency room (2%), and an urgent care center (1%).
- ◆ 86% of parents reported they had one or more people they think of as their child's personal doctor or nurse.
- ◆ 87% of children had visited their health care provider for preventive care in the past year, decreasing to 76% of those with incomes less than \$25,000.
- ◆ 24% of parents reported their child's doctor thought their child needed to see a specialist.
- ◆ Parents reported their child needed the following type of specialists, special services or equipment: ear, nose and throat doctor (11%), speech therapy (6%), medical equipment (4%), physical therapy (4%), occupational therapy (3%), counseling (3%), special education (2%), cardiologist (2%), mental health counselor/therapist (2%), mental health (1%), genetic doctor (1%), endocrinologist (1%), out-of-home care (<1%), and an oncologist (<1%).

Child Comparisons	Wood County 2012 Ages 0-5	Ohio 2007 Ages 0-5	U.S. 2007 Ages 0-5	Wood County 2012 Ages 6-11	Ohio 2007 Ages 6-11	U.S. 2007 Ages 6-11
Had public insurance	13%	32%	35%	9%	26%	28%
Been to doctor for preventive care in past year	94%	96%	96%	83%	87%	86%
Dental care visit in past year	61%	51%	54%	94%	92%	90%
2 or more visits to the ER	7%	8%*	8%*	4%	6%*	4%*
Received all the medical care they needed	96%	99%*	99%*	95%	98%*	98%*
Have a personal doctor or nurse	85%	95%	94%	87%	95%	92%

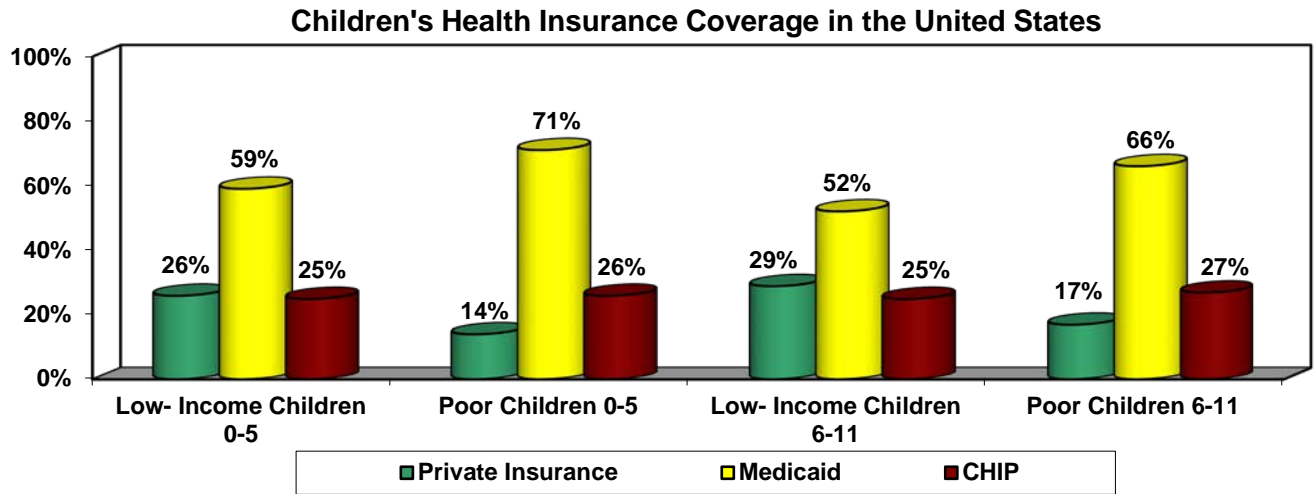
\* 2003 national and state data

## Low-Income Families and Health Insurance

- ◆ As children get older they are more likely to become uninsured.
- ◆ In the United States, 14% of children ages 0-5 from low-income families are uninsured; also, 14% of children ages 0-5 from poor families are uninsured. 16% of children ages 6-11 from low-income families are uninsured, and 17% of children ages 6-11 from poor families are uninsured. For children ages 12-17, 19% of those from low-income families, and 20% of those from poor families are uninsured. *(Source: National Center for Children in Poverty), Basic Facts About Low-income Children, 2009, Released October 2010)*

The following graph shows the percent of low-income children that have different types of health insurance or no health insurance. The graph also shows the percent of poor children that have different types of health insurance or no health insurance. The types of health insurance include uninsured, private insurance, Medicaid, or Children Health Insurance Program (CHIP). Low-income is 100-200% of the Federal Poverty Level (FPL), while poor is 0-99% of the FPL. Children that have more than one type of health insurance are included in both percentages. Children that are in poor families are more likely to be uninsured or on Medicaid than those of low-income families. Children of low-income families are more likely than those of poor families to be on private insurance. Children of low-income families are just as likely as those of poor families to be covered by CHIP.

## Children's Health Insurance, Access, Utilization and Medical Home



*(Source: National Center for Children in Poverty, Basic Facts About Low-income Children, 2009, Released October 2010)*

### Unmet Medical Needs in the United States

- ❖ Children in near-poor families were more likely to have unmet medical needs and to have delayed medical care than children in poor families or children in families that are not poor.
- ❖ 3% of children were unable to get needed medical care because the family could not afford it, and 5% of children had medical care delayed because of worry about the cost.
- ❖ Children in single-mother families were more likely to have been unable to get medical care compared with children in two-parent families or in single-father families.
- ❖ 15% of uninsured children had not had contact with a doctor or other health professional in more than two years (including those that had never had contact) compared with only 2% of children with private insurance.

*(Source: National Health Interview Survey, 2008)*

### Prescription Use in the United States

- ❖ 13% of U.S. children had a health problem in 2008 for which prescription medication had been taken regularly for at least three months. 16% of children ages 12-17, 14% of children ages 5-11, and 7% of children ages 0-5 were on regular prescription medication.
- ❖ 13% of White children, 12% of African American children, and 8% of Asian children were on regular prescription medication.
- ❖ 15% of children with Medicaid or other public health insurance, 13% of children with private insurance, and 6% of uninsured children have been on regular prescription medication for at least three months.

*(Source: National Health Interview Survey, 2008)*

## Children's Health Insurance, Access, Utilization and Medical Home

### Emergency Room Visits in the United States

- ❖ In 2008, 14% of the U.S. population had an emergency room visit in the past year. 7% of U.S. children had two or more emergency room visits in the past year.
- ❖ 12% of children in single-mother families had two or more visits to an emergency room in the past year, while only 6% of children in two-parent families had two or more visits to an emergency room in the past year.
- ❖ 11% of children with Medicaid or other public insurance had two or more emergency room visits in the past year. 6% of uninsured children had two or more emergency room visits in the past year. 5% of children with private health insurance had two or more emergency room visits in the past year.

*(Source: National Health Interview Survey, 2008)*

## Early Childhood (0-5 year olds)

### Key Findings

*The following information was reported by parents of 0-5 year olds. 90% of mothers got prenatal care within the first three months during their last pregnancy. 3% of mothers smoked during their last pregnancy. 26% of mothers never breastfed their child.*

### Early Childhood

- ◆ The following information was reported by Wood County parents of 0-5 year olds.
- ◆ During their last pregnancy, mothers did the following: got prenatal care within the first 3 months (90%), took a multi-vitamin (87%), took folic acid (61%), experienced depression during or after (11%), stopped taking prescribed medication for mental health issues (5%), smoked cigarettes (3%), used alcohol (1%), used drugs not prescribed for them (1%), and experienced domestic violence (<1%).
- ◆ Mothers breastfed their child: more than 9 months (25%), 4 to 9 months (17%), 7 weeks to 3 months (10%), 3 to 6 weeks (13%), 2 weeks or less (8%), still breastfeeding (2%), and never breastfed (26%).
- ◆ 35% of parents of 0-5 year olds reported reading to their child every day, 32% read almost every day, 22% a few times a week, 8% a few times a month and 1% reported a few times per year.
- ◆ Parents reported discussing the following safety concerns with their 0-5 year old: not talking to strangers (50%), water safety (45%), bike helmets (45%), falls (44%), burns (39%), good touch/bad touch (35%), furniture falling (32%), poisoning (28%), and firearms (17%).
- ◆ Parents reported their child regularly attended the following in the past month: nursery school, pre-school, or kindergarten (48%), child care in their home provided by a relative (41%), child care outside of their home provided by a relative (38%), a child care center (26%), family-based child care outside of their home (25%), child care in their home provided by a babysitter (23%), elementary school (4%), and head start or early start program (3%).
- ◆ Parents were very concerned about the following: having enough time for their child (11%), child's academic achievement (7%), relationship with child (6%), learning difficulties (3%), sleep issues (2%), child's talking skills (2%), how child copes with stress (1%), child's anxiety (1%), child's self-esteem (1%), violence in home, school, or neighborhood (1%), child crawling/walking/running (1%), risky behaviors (1%), and being bullied by classmates (1%).
- ◆ Children 0-5 years old were more likely than children 6-11 years old to:
  - Have gone to the emergency room in the past year (22% compared to 16% of 6-11).
  - Have visited a doctor for preventive care in the past year (94% compared to 83% of 6-11).
  - Have needed to see a specialist (27% compared to 23% of 6-11).
  - Have public insurance (13% compared to 9% of 6-11).

### National Survey of Children's Health 2007

- ◆ 50% of Ohio and 48% of U.S. parents of 0-5 year olds read to their child every day.
- ◆ 17% of Ohio and 13% of U.S. parents of 0-5 year olds reported their child watched 4 or more hours of TV each day.
- ◆ 35% of Ohio and 25% of U.S. parents of 0-5 year olds never breastfed their child.

(Source: National Survey of Children's Health, 2007 <http://nschdata.org>)

Child Comparisons	Wood County 2012 0-5 years	Ohio 2007 0-5 years	U.S. 2007 0-5 years
Parent reads to child every day	35%	50%	48%
Spent 4 or more hours watching TV	21%	17%*	13%*
Never breastfed their child	26%	35%	25%

\* Children ages 1-5 years old

## Early Childhood (0-5 years old)

### Children in Ohio and the U.S.

- ❖ A child is born into poverty every 33 seconds in the United States. Every 16 minutes a child is born into poverty in Ohio.
- ❖ Every 35 seconds a child is abused or neglected in the United States, in Ohio a child is abused or neglected every 13 minutes.
- ❖ Ohio has a slightly larger percent of poor children and children living in extreme poverty than the United States. The percent of poor children in Ohio is 19%, while poor children living in the U.S. is 18%. The percent of children living in extreme poverty in Ohio is 9%, while in the U.S. is 8%.
- ❖ 34% of two year olds in the U.S. are not fully immunized, while only 22% of two year olds in Ohio aren't fully immunized.
- ❖ 15% of 3 year olds in the U.S. and 15% of 3 year olds in Ohio are enrolled in state preschool, Head Start, or special education programs. 39% of 4 year olds in the U.S. and 21% of 4 year olds in Ohio are enrolled in state preschool, Head Start, or special education programs.

*(Sources: Children's Defense Fund)*

### Sleep and SIDS

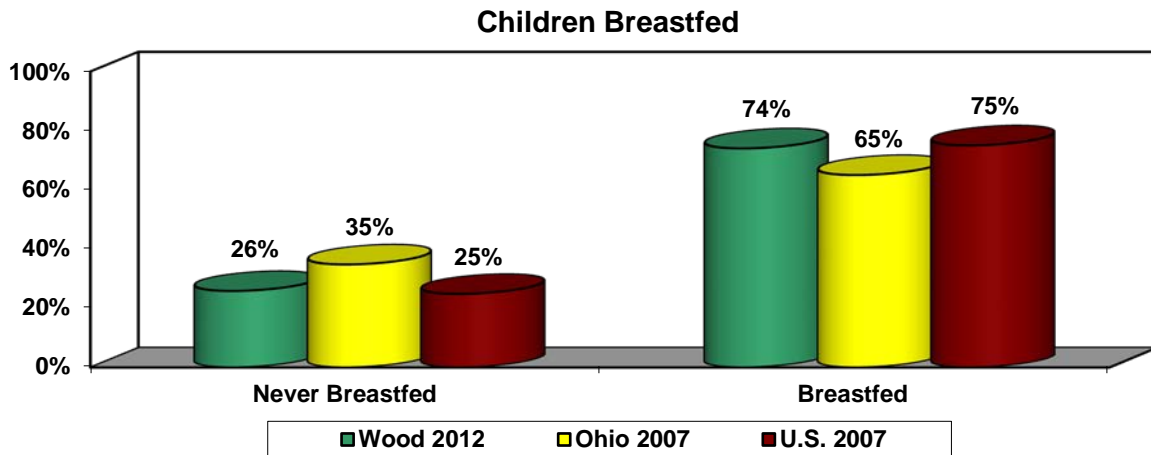
- ❖ Babies should be placed on his/her back with face and head clear of blankets and other soft items. Doctors have not found an increase in choking or other problems in infants who sleep on their backs.
- ❖ Sudden Infant Death Syndrome (SIDS) is the leading cause of death in children between one month and one year. SIDS is most likely to occur between two and three months, it also occurs more often in males than females. Native American infants are three times more likely than Caucasians to die of SIDS and African-Americans are two to three times more likely than Caucasians to die of SIDS.
- ❖ SIDS is likely to occur if an infant is sleeping on his/her stomach, using a soft or unsafe bed, has loose bedding materials like blankets and pillows, overheating due to clothing, blankets or room temperature, mother's age is younger than 20 years, mother smoked during pregnancy, mother received late or no prenatal care, child was born with a premature or low birth weight, or the baby is exposed to secondhand smoke.
- ❖ Side sleeping infants is not as safe as back sleeping. Infants who sleep on their sides can roll onto their stomachs; which puts them at a greater risk for SIDS.
- ❖ Studies show that pacifiers may protect against SIDS. Pacifiers are recommended from one month for breast-fed infants to one year. The pacifier should be used when placing the baby down to sleep, but should not be reinserted once the infant falls asleep. If the infant refuses the pacifier, he/she should not be forced to take it. Pacifiers should be cleaned regularly and should not be coated with sweet substances.

*(Source: National Sleep Foundation)*

## Early Childhood (0-5 years old)

### Breastfeeding

The following graph shows the percent of infants who have been breastfed or given breast milk from Wood County, Ohio, and U.S. The U.S. and Wood County are similar percents, and Wood County has a larger percent than Ohio of children who have been breastfed for any length of time. The graph also shows the percent of children from Wood County, Ohio, and the U.S. who have never been breastfed or given breast milk. Ohio has the largest percent of children never breastfed, following Wood County, and the U.S. has the smallest percent never breastfed or given breast milk.



*(Source: National Survey of Children's Health, Data Resource Center)*

### Benefits of Breakfast for Children

- ❖ Breakfast provides children with the energy and essential nutrients they need to concentrate on school work and learn. Studies show that breakfast provides as much as 25 percent of the recommended daily allowance for key nutrients, such as calcium, protein, vitamins A and B6, magnesium, iron and zinc.
- ❖ Research shows that children who eat breakfast have higher achievement scores, lower rates of absence and tardiness, and increased concentration in the classroom.
- ❖ Another important benefit of breakfast for children is that establishing the healthy habit of eating breakfast early in life could stave off many adulthood health problems associated with poor diet, such as diabetes and obesity.
- ❖ A drop in blood sugar can mean a decline in energy level and the onset of hunger symptoms like a stomachache or headache, which interfere with learning.

*(Sources : Meals Matter, Dairy Council of California)*

### Child Care

- ❖ Children ages 0-5 from single-mother households are more likely to have a parent who cut back or quit working in the past year due to child care issues (19%), than children in two-parent households (11%).
- ❖ Of children ages 0-5 who needed child care, 67% have parents who made different arrangements for care at the last minute due to circumstances beyond their control.

*(Source: Data Resource Center for Child & Adolescent Health, [childhealthdata.gov](http://childhealthdata.gov))*

## Middle Childhood (6-11 years old)

### Key Findings

*The following information was reported by Wood County parents of 6-11 year olds. In 2012, 41% of parents reported their child was bullied at some time in the past year. 87% of parents reported their child participated in extracurricular activities. 16% of parents reported their child had a MySpace or facebook account. 89% of parents reported their child had exercised for 60 minutes on three or more days in the past week.*

### Middle Childhood

- ◆ The following information was reported by Wood County parents of 6-11 year olds.
- ◆ Parents reported their child spent the following unsupervised time after school on an average school day: no unsupervised time (78%), less than one hour (15%), and 1-2 hours (7%).
- ◆ Parents discussed the following topics with their 6-11 year olds: bullying (69%), eating habits (65%), screen time (TV or computer) (65%), negative effects of tobacco (57%), refusal skills (55%), negative effects of alcohol (46%), tobacco (43%), alcohol (36%), gun safety (34%), negative effects of marijuana and other drugs (32%), body image (31%), violence (31%), marijuana and other drugs (29%), dating and relationships (9%), abstinence and how to refuse sex (6%), condoms, safer sex and STD prevention (2%), and birth control (2%).
- ◆ Parents were very concerned about the following: child's academic achievement (9%), having enough time for their child (8%), learning difficulties (6%), relationship with child (5%), how child copes with stress (5%), child's anxiety (5%), child's self-esteem (5%), bullying (4%), screen time (4%), child getting along with others (2%), child's talking skills (2%), child's depression (2%), Internet use (2%), violence in home, school, or neighborhood (2%), cell phone and technology use (1%), child crawling/walking/running (1%), sleep issues (1%), risky behaviors (<1%), substance abuse (<1%), and eating disorders (<1%).
- ◆ Parents reported discussing the following safety concerns with their 6-11 year olds: not talking to strangers (66%), good touch/bad touch (51%), bike helmets (50%), water safety (48%), firearms (34%), falls (27%), burns (26%), poisoning (25%), and furniture falling (16%).
- ◆ 74% of parents reported they felt their child was always safe at school. 23% reported usually, 1% reported sometimes, and <1% reported they felt their child was never safe at school.
- ◆ 41% of parents reported their child was bullied in the past year. 7% of parents reported they did not know if their child was bullied. The following types of bullying were reported:
  - 30% were verbally bullied (teased, taunted or called you harmful names)
  - 13% were indirectly bullied (spread mean rumors about you or kept you out of a "group")
  - 9% were physically bullied (you were hit, kicked, punched or people took your belongings)
  - 0% were cyber bullied (teased, taunted or threatened by e-mail or cell phone)
- ◆ Children were enrolled in the following types of schools: public (85%), private (12%), home-schooled (2%), and charter (1%).
- ◆ 87% of parents reported their child participated in extracurricular activities in the past year. Their child participated in the following: a sports team or sports lessons (74%), a club or organization (30%), a religious group (26%), Boys/Girls club (3%), and some other organized activity (26%).

### National Survey of Children's Health 2007

- ❖ 8% of Ohio and 5% of U.S. parents of 6-11 year olds reported their child missed 11 or more days of school due to an illness or injury.
- ❖ 14% of Ohio and 9% of U.S. parents of 6-11 year olds reported their child watched 4 or more hours of TV or played video games each day.
- ❖ 15% of Ohio and 9% of U.S. parents of 6-11 year olds reported their child spent time home alone without an adult.

*(Source: National Survey of Children's Health, 2007 <http://nschdata.org>)*



## Middle Childhood (6-11 years old)

- ◆ 22% of parents reported their child spent 4 or more hours watching TV, 9% spent 4 or more hours playing video games, and 4% played on the computer for 4 or more hours on an average day after school.
- ◆ 89% of parents of 6-11 year olds reported their child was physically active for at least 60 minutes on 3 or more days in the past week. 57% had done so on 5 or more days.
- ◆ One in six (16%) parents reported their child had a MySpace or facebook account. Of those who had an account, they reported the following: they had their child's password (80%), they knew all of the people in their child's "my friends" (56%), their child's account was checked private (48%), and their child had a problem as a result of their account (7%). No parents reported that their child's friends had their passwords.
- ◆ Parents reported their child missed school an average of 4.1 times in the past school year because of illness or injury.
- ◆ Children 6-11 years old were more likely than children 0-5 years old to:
  - Have been diagnosed with asthma (16% compared to 7% of 0-5).
  - Have ADD or ADHD (8% compared to 1% of 0-5).
  - Have gone to the dentist in the past year (94% compared to 61% of 0-5).
  - Have a personal doctor or nurse (87% compared to 85% of 0-5).

Child Comparisons	Wood County 2012 6-11 Years	Ohio 2007 6-11 Years	U.S. 2007 6-11 Years
Child participated in 1 or more activities	87%	85%	79%
Child did not miss any days of school because of illness or injury	13%	16%	22%
Child missed school 11 days or more because of illness or injury	2%	8%	5%
No physical activity	1%	6%	7%
Parent felt child was usually/always safe at school	97%	92%	93%

## Middle Childhood (6-11 years old)

### Helmet Safety

- ❖ More than 70% of children ages 5-14 regularly ride a bicycle.
- ❖ Each year, approximately 140 children are killed as bicyclists, and sustain more than 275,000 nonfatal bicycle injuries. An estimated 75% of fatal head injuries could have been prevented with a helmet.
- ❖ National usage of bicycle helmets ranges from 15 to 25%.
- ❖ More children ages 5-14 are seen in hospital emergency rooms for injuries related to biking than any other sport.
- ❖ For motor vehicle-related bicycle crashes, 69% of deaths occur between May and October, 58% of deaths occur at non-intersection locations, and 70% of deaths occur between 2 and 8 pm.
- ❖ In 2004, an estimated number of 18,743 head injuries were treated in emergency rooms due to skateboarding.

*(Source: Safe Kids USA)*

### MySpace and Facebook

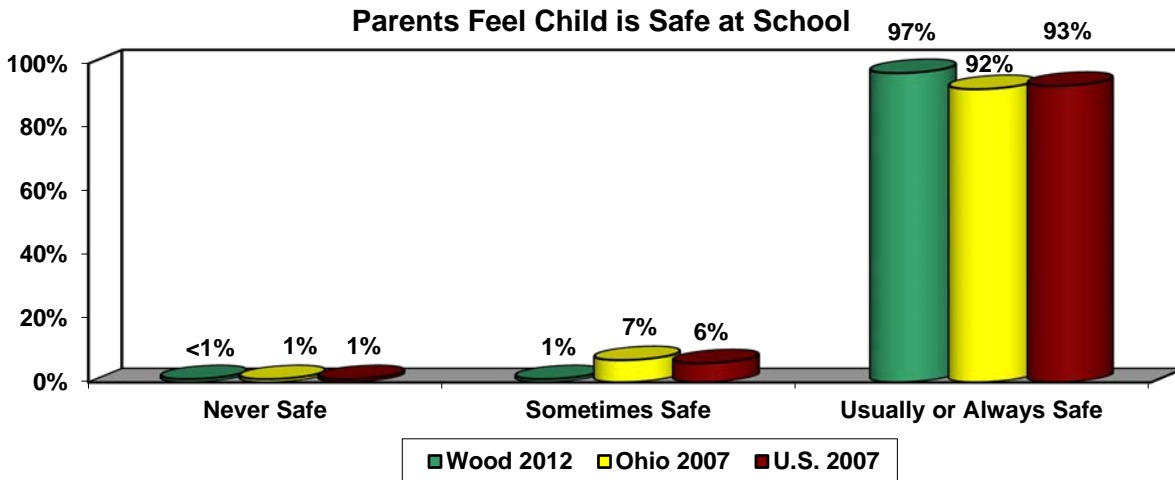
- ❖ 55% of teens have profiles on a social networking website. Of 10-17 years old with social profiles, 34% posted their real names, telephone numbers, home addresses, or the names of their schools. 45% had posted their date of birth or ages, and 18% had posted pictures of themselves.
- ❖ When signing up for MySpace, you are asked for your date of birth, if you are not over the age of 13 it will come up and say “We’re sorry. Based on the information you have submitted to us, you are ineligible to register on MySpace.” Also, when you click “signup free” you are agreeing to the Terms of Use, which under the first section states “By using the MySpace Services, you represent and warrant that ... you are 13 years of age or older... Your profile may be deleted and your Membership may be terminated without warning, if we believe that you are under 13 years of age...”
- ❖ Facebook will also asks for your date of birth, if you are not over the age of 13 it will come up and say “Sorry, you are ineligible to sign up for Facebook.” Also when you click “sign up” you are agreeing that you have read and agree to the Terms of Use, which under section 4 states “You will not use Facebook if you are under 13.”

*(Source: U.S. Department of Education, Facebook, MySpace)*

## Middle Childhood (6-11 years old)

### Safe Schools

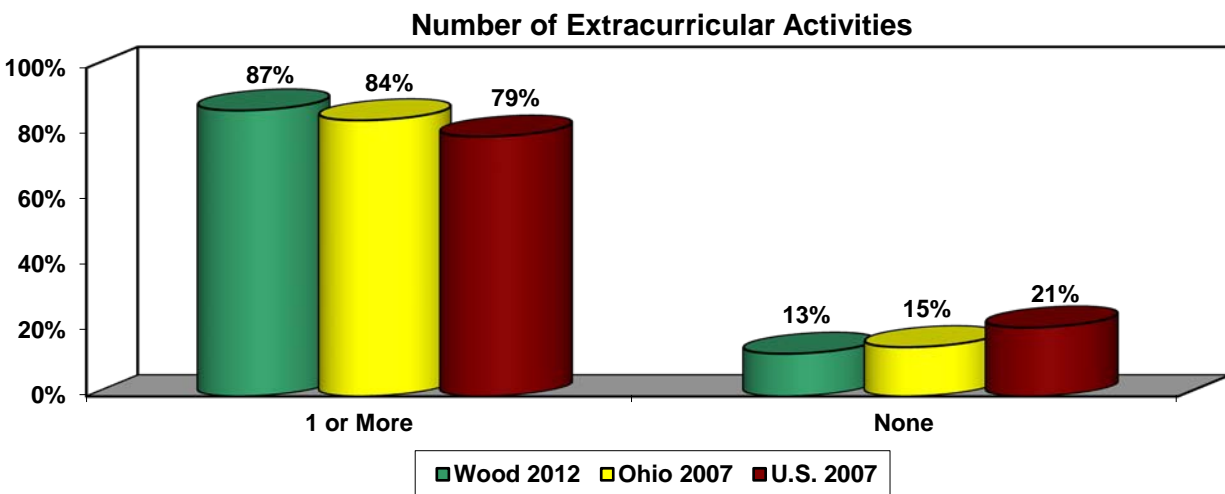
The following graph shows whether Wood parents, Ohio parents, and U.S. parents feel their child's school is never, sometimes, or usually/always safe.



*(Source: National Survey Children's Health, Data Resource Center)*

### Extracurricular Activities

The following graph shows the percent of children in Wood County, Ohio, and the U.S. who participate in at least one or more extracurricular activities, and those who do not participate in any. Wood County has more participants than Ohio and U.S.



*(Source: Nation Survey of Children's Health, Data Resource Center)*

### Unhappy, Sad, and Depressed Children

- ❖ U.S. parents reported their child being unhappy, sad, or depressed. 52% reported never, 31% reported rarely, 16% reported sometimes, and 2% reported usually/always.
- ❖ Ohio parents also reported their child being unhappy, sad, or depressed. 46% reported never, 32% reported rarely, 19% reported sometimes, and 3% reported usually/always.

*(Source: National Survey of Children's Health, Data Resource Center)*

# Family Functioning, Neighborhood and Community Characteristics

## Key Findings

*In 2012, Wood County parents reported their 0-11 year old child slept an average of 10.4 hours per night. 20% of parents reported they read to their child every day. 99% of parents reported their neighborhood was always or usually safe.*

## Family Functioning

- ◆ 63% of parents reported they were coping with the day-to-day demands of parenthood very well. 35% reported somewhat well and 2% reported not very well.
- ◆ Wood County parents reported they were faced with the following day-to-day demands of parenthood: demands of multiple children (47%), financial burdens (29%), child has special needs (7%), loss of freedom (6%), being a single parent (6%), difficulty with lifestyle changes (5%), child has chronic medical condition (4%), other adult children living at home (3%), child has mental health issue (2%), caring for elderly parent (2%), spouse deployed in military (1%), postpartum depression (<1%), and other demands (8%).
- ◆ Parents reported they read to their child: every day (20%) almost every day (26%), a few times a week (19%), a few times a month (8%) and a few times a year (2%). 22% of parents reported their child read to him/herself, and 2% reported never reading to their child.
- ◆ 1% of parents reported their child went to bed hungry at least one day per week because they did not have enough food. <1% reported their child went to bed hungry every night.
- ◆ 40% of parents reported that every family member who lived in their household ate a meal together every day of the week, increasing to 50% of parents of 0-5 year olds. Families ate a meal together an average of 6.1 times per week.
- ◆ 28% of parents reported their child attended religious service one to three times per month and 38% reported four or more times per month. 33% reported their child has never attended a religious service. Parents reported their child attended religious services an average of 2.5 times per month.
- ◆ Parents reported the average time their child woke up was 7:08 a.m. and the average time they went to bed was 8:46 p.m. The average child slept 10.4 hours per night. 2007 NSCH results showed 71% of Ohio and 72% of U.S. children ages 6-11 got enough sleep in the past week.
- ◆ Parents reported their child was disciplined in the following ways:
  - Took away privileges (77%)
  - Time out (67%)
  - Yelled (39%)
  - Redirected to other activities (34%)
  - Grounded (29%)
  - Spanked (13%)
  - Child had not been disciplined (3%)
  - Mouth washed out (2%)
  - Other (6%)

## National Survey of Children's Health 2007

- ◆ 55% of Ohio and 58% of U.S. parents of 0-5 year olds reported their family ate a meal together every night of the week.
- ◆ 37% of 0-5 year old and 34% of 6-11 year old Ohio children lived in a household with someone who smokes.

*(Source: National Survey of Children's Health, 2007 <http://nschdata.org>)*

## Neighborhood and Community Characteristics

- ◆ Parents reported their neighborhood was: always safe (66%), usually safe (33%), sometimes safe (1%). No parents reported that their neighborhood was never safe for their child to go out and play. 53% of those with incomes less than \$25,000 reported their neighborhood as always safe, as compared to 67% of those with higher incomes.
- ◆ Wood County children have moved to a new address an average of 0.8 times in their life. 53% of children have never moved to a new address.

## Family Functioning, Neighborhood and Community Characteristics

- ◆ Parents sought information about current health issues in their community from the following: doctor/health care provider (75%), newspaper (38%), television (33%), neighbor/friend (25%), websites (25%), local radio station (20%), Facebook (8%), cable channel announcements (4%), church bulletin (3%), Twitter (1%), and somewhere else (9%).
- ◆ Parents did the following while driving in the past 30 days: wore a seatbelt (88%), talked on their cell phone (81%), ate (55%), texted (16%), applied makeup (5%), used the Internet on their cell phone (4%), checked Facebook or Twitter on their cell phone (3%), used cell phone for other things (2%), read (1%), and drank alcohol (<1%).
- ◆ Wood County parents had the following rules about smoking in their home: no one is allowed to smoke inside their home at any time (85%), smoking is not allowed when children are present (5%), smoking is allowed in some rooms only (3%), and smoking is allowed anywhere (3%).
- ◆ Wood County parents had the following rules about smoking in their car: no one is allowed to smoke inside their car at any time (78%), smoking is not allowed when children are present (7%), smoking is allowed as long as a window is open (5%) and smoking is allowed at any time (2%).

Child Comparisons	Wood County 2012 0-5 Years	Ohio 2007 0-5 Years	U.S. 2007 0-5 Years	Wood County 2012 6-11 Years	Ohio 2007 6-11 Years	U.S. 2007 6-11 Years
Family eats a meal together every day of the week	50%	55%	58%	33%	40%	47%
Child never attends religious services	37%	35%	32%	31%	14%	15%
Neighborhood is usually or always safe	99%	88%	85%	98%	84%	86%

### Child and Parent Relationships

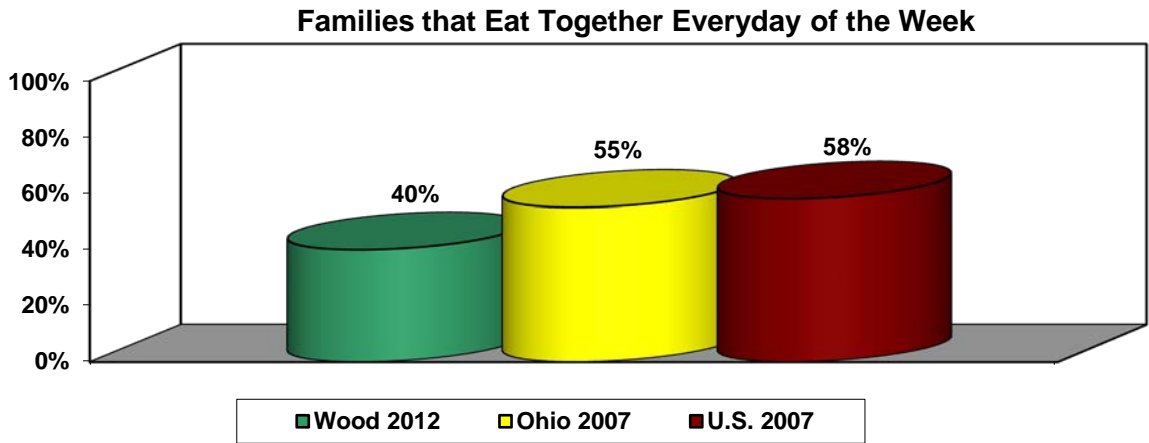
- ◆ 70% of U.S. children ages 6-17 have parents with whom they can share ideas very well or talk with them about things that matter.
- ◆ 60% of U.S. parents of children ages 0-17 are coping very well with the demands of parenting.
- ◆ 87% of U.S. parents of children ages 0-17 have someone to go to for emotional help with parenting.
- ◆ 10 % of U.S. children live with parents who experience high levels of stress from parenting. High stress is reported more often by the parents of children living in single-mother households. Also, children with special health care needs have parents who are twice as likely to report high levels of stress.

*(Source: Data Resource Center for Child & Adolescent Health, [childhealthdata.org](http://childhealthdata.org))*

# Family Functioning, Neighborhood and Community Characteristics

## Family Dinners

The following graph shows the percent of Wood County families that eat a meal together every day of the week along with the percent of Ohio families and the percent of U.S. families. U.S. families as a whole have the largest percent, followed closely by Ohio families. Wood County families have the lowest percent for eating a meal together every day of the week.



*(Source: National Survey of Children's Health, Data Resource Center and Wood County Health Assessment)*

## Families that Read to Children Everyday

- ❖ 55% of children ages 3-5 in the United States get read to everyday by a family member.
- ❖ Race affects the percent that read to their child every day. 67% for White, 60% for Asian and Pacific Islander, 35% for Black, and 37% for Hispanics.
- ❖ The parents' marital status also has a large effect: 61.9% for two parent families that are married, while two parent families that are unmarried is 24%, and 43% for one parent families.
- ❖ Mothers that have a bachelor's degree or higher are more likely to read to their children than mothers with any other amount of education.
- ❖ Children that have mothers that work less than 35 hours a week are the ones most likely to get read to everyday (63%). Mothers that are not in the labor force are the next with 58%. 51% of mothers that work more than 35 hours per week, and mothers that are looking for work have the lowest percentage for reading to their children everyday with only 40%.

*(Source: childstats.gov)*

## Smoke Alarms

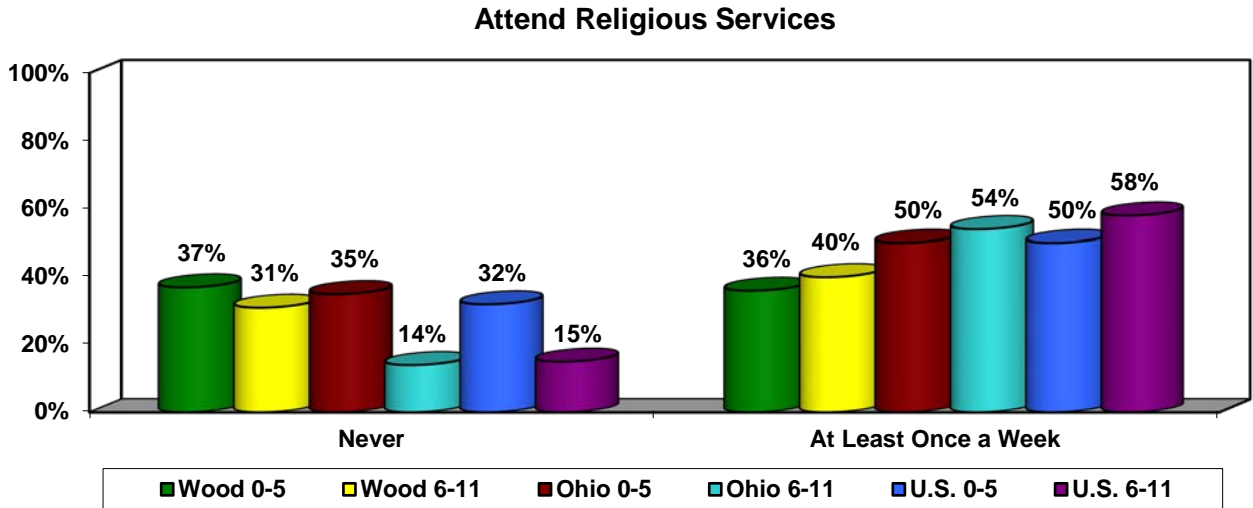
- ❖ 96% of American homes have at least one smoke alarm; however, no smoke alarms were present or did not operate in 41% of the reported fires between 2003 and 2006.
- ❖ In fires considered large enough to activate the alarm, hardwired smoke alarms operated 91% of the time, while battery-powered smoke alarms operated 75% of the time.
- ❖ Over half of the reasons that a smoke alarm failed to go off for fires between 2003 and 2006 was because the battery was disconnected or missing. 22% failed because the battery was dead, and only 8% failed because the hardwired power failed, shut-off or was disconnected.

*(Source: National Fire Protection Association)*

# Family Functioning, Neighborhood and Community Characteristics

## Religious Service Attendance

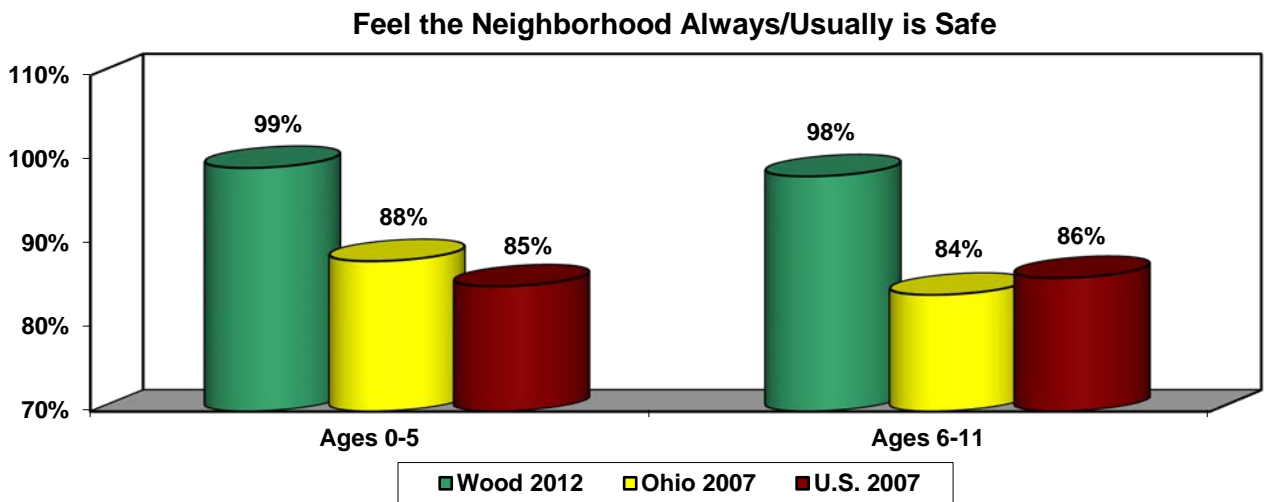
The following chart shows the percent of Wood County, Ohio, and U.S. children ages 0-5 and 6-11 that attend religious services at least once a week and those that have never attended a religious service or do not attend religious services. Wood County has a smaller percent that attends religious services at least once a week than Ohio and U.S.



*(Source: National Survey of Children's Health, Data Resource Center and Wood County Health Assessment)*

## Neighborhood Safety

The following graph shows the percent of Wood County, Ohio, and U.S. parents who feel their neighborhood is always or usually safe. Wood County has the largest percent of parents for the 6-11 age group who feel that their neighborhood is always/usually safe. Ohio has a larger percent of parents who feel their neighborhood is always/usually safe for children ages 0-5 than all parents in the U.S. However, a smaller percent of Ohio parents feel their neighborhood is always/usually safe for children ages 6-11, compared to U.S. parents of children ages 6-11.



*(Source: National Survey of Children's Health, Data Resource Center)*

## Family Functioning, Neighborhood and Community Characteristics

### Firearm Safety in the United States

- ❖ In 2004, 2% of children that died as a result of a home injury were killed by unintentional shootings in the home. 75% of these children were between the ages 5 and 14.

*(Source: Safe Kids USA)*

### Ohio and U.S. Children Secondhand Smoke Exposure

- ❖ 63% of Ohio children ages 0-5 do not have anyone that smokes in their household. 27% has someone in their household that smokes, but does not smoke inside the child's house. 10% have someone that smokes in their household and smokes inside the child's house.
- ❖ 66% of Ohio children ages 6-11 don't have anyone that smokes in their household. 18% have someone that smokes in their household, but doesn't smoke inside the child's home. 16% have someone that smokes in the household, and smokes inside the home of the child.
- ❖ For U.S. children ages 0-5, 74% have no one that smokes in their household. 21% have someone that smokes in their household, but does not smoke inside the house. 5% have someone that smokes in the household, and smokes inside the child's home
- ❖ For U.S. children ages 6-11, 75% have no one that smokes in their household. 18% have someone that smokes in their household, but does not smoke inside the house. 8% have someone that smokes in the household, and smokes inside the child's house.

*(Source: National Survey of Children's Health, Data Resource Center)*

### Nationwide Smoking Rules

- ❖ 30% of people that live in households with no smoking rules have smoked at some point in their lives. While for people that have some smoking rules in their household 24% have smoked at some point in their lives. For people that live in houses where no smoking was allowed at all only 12% have smoked at some point.
- ❖ 27% of people that live in households without smoking rules currently smoke. 19% of people that live in houses with some smoking rules currently smoke; while only 9% of people that live in houses where smoking isn't allowed currently smoke.

*(Source: CDC, Impact of Home Smoking Rules on Smoking Patterns Among Adolescents and Young Adults)*



## Parent Health

### Key Findings

*In 2012, 11% of Wood County parents were uninsured. 33% of parents were overweight and 25% were obese. 10% of parents reported smoking every day.*

### Parent Health

- ◆ Those filling out the survey had the following relationship to the child: mother (74%), father (24%), grandparent (2%) and aunt or uncle (<1%).
- ◆ More than three-fourths (78%) of parents rated their health as excellent or very good, decreasing to 29% of parents with incomes less than \$25,000. 4% of parents had rated their health as fair or poor.
- ◆ 78% of parents rated their mental and emotional health as excellent or very good, and 3% rated their mental and emotional health as fair or poor.
- ◆ 2% of mothers of 0-5 year olds rated their mental and emotional health as fair or poor. No fathers of 0-5 year olds rated their mental and emotional health as fair or poor. 5% of mothers and 1% of fathers of 6-11 year olds rated their mental or emotional health as fair or poor.
- ◆ 11% of parents were uninsured, increasing to 16% of parents with incomes less than \$25,000.
- ◆ 58% of parents were either overweight (33%) or obese (25%). 42% were normal weight, and <1% were underweight.
- ◆ 7% of parents were physically active for at least 30 minutes every day of the week. 57% were physically active 3 or more days a week, and 17% were not physically active at all, including 3% who were unable to exercise.
- ◆ Wood County parents described their current smoking status as: smoked everyday (10%), smoked most days of the week (1%), smoked a few days of the week/on the weekends (3%), and did not smoke at all (86%).
- ◆ In the past year, parents missed work on average due to the following: child's illness or injury (1.4 days), child's medical appointments (0.4 days), asthma (0.1 days), and child's behavioral or emotional problems (0.1 days).
- ◆ 36% of parents had a seasonal flu vaccine (96% received a shot and 4% received nasal spray).

### National Survey of Children's Health 2007

- ❖ 22% of mothers of 0-5 year olds and 15% of mothers of 6-11 year olds in Ohio were sedentary (not exercising in the past week).
- ❖ 22% of fathers of 0-5 year olds and 13% of fathers of 6-11 year olds in Ohio were sedentary (not exercising in the past week).

*(Source: National Survey of Children's Health, 2007 <http://nschdata.org>)*

Child Comparisons	Wood County 2012 Ages 0-5	Ohio 2007 Ages 0-5	U.S. 2007 Ages 0-5	Wood County 2012 Ages 6-11	Ohio 2007 Ages 6-11	U.S. 2007 Ages 6-11
Mother's mental or emotional health is fair/poor	2%	5%	6%	5%	8%	8%
Father's mental or emotional health is fair/poor	0%	5%	4%	1%	5%	5%

## Parent Health

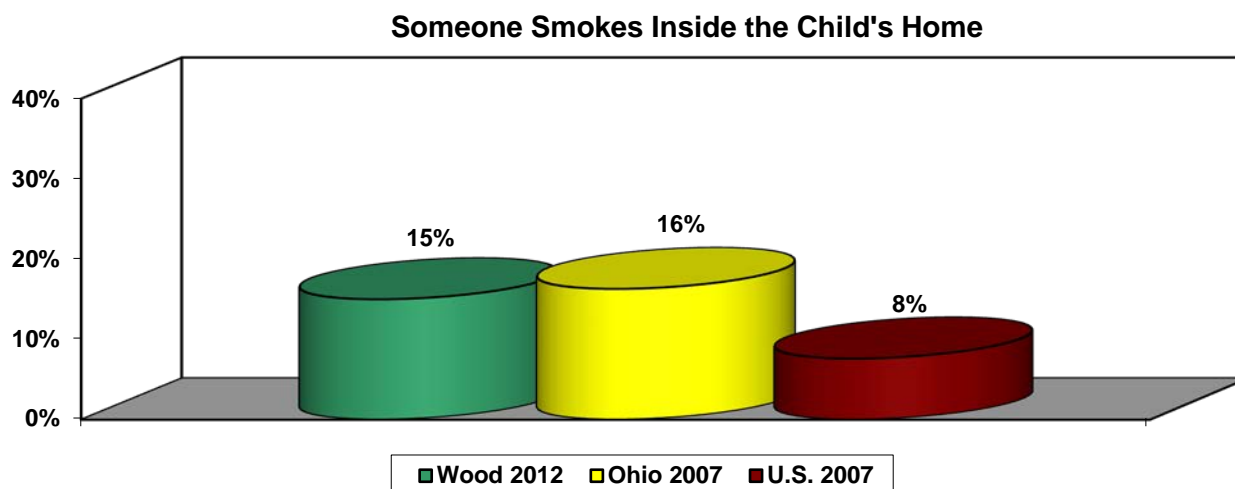
### Parent's Health

- ❖ 57% of children have mothers who are in excellent or very good physical and mental health (of children with a living mother in their household). Children with special health care needs are less likely to have mothers who are in excellent or very good health (48% vs. 59% for children without special health care needs).
- ❖ 63% of children have fathers who are in excellent or very good physical and mental health (of children with a living father in their household). Children with special health care needs are less likely to have fathers who are in excellent or very good health (58% vs. 64% for children without special health care needs).
- ❖ A child who lives with a mother or father who exercises for at least 20 minutes on four or more days per week is more likely to also exercise at least four days per week. Of children who live with their mothers, 33% have mothers who exercise four or more days per week. Of children who live with their fathers, 45% have fathers who exercise four or more days per week.
- ❖ Higher household income increases the likelihood that a child will exercise regularly. For children living with their mother that does not exercise four or more days a week that are between 0-99% FPL, 46% exercise regularly, while for children living with their mother that does not exercise four or more days a week that are 400% FPL, 66% exercise regularly. For children between 0-99% FPL and have mothers that exercise regularly 69% also exercise regularly, and for children at 400% FPL and have mothers that exercise regularly 80% also exercise regularly.

(Source: [childhealthdata.org](http://childhealthdata.org), Data Resource Center for Child & Adolescent Health)

## Smoking in Home of a Child

The following graph compares the percentage of parents in Wood County who allow people to smoke inside their home with those of Ohio and the U.S. Wood County is almost two times more likely to allow someone to smoke in the house of a child than all of the U.S.



(Source: 2007 National Survey of Children's Health, Data Resource Center, 2012 Wood Health Assessment)

## Wood County Health Assessment Information Sources

Source	Data Used	Website
American Association of Suicidology	<ul style="list-style-type: none"> <li>◆ 2009 Ohio and U.S. suicide statistics</li> </ul>	<a href="http://www.suicidology.org">http://www.suicidology.org</a>
American Cancer Society, Cancer Facts and Figures 2011 & 2012. Atlanta: ACS, 2011 & 2012	<ul style="list-style-type: none"> <li>◆ 2011, 2012 Cancer facts, figures, and estimates</li> <li>◆ ACS cancer detection guidelines</li> <li>◆ Cancer risk factors</li> <li>◆ Nutrition recommendations</li> <li>◆ Screening recommendations</li> <li>◆ Tobacco Use and Health</li> </ul>	<a href="http://www.cancer.org">www.cancer.org</a>
American Diabetes Association	<ul style="list-style-type: none"> <li>◆ Type 1 and 2 Diabetes</li> <li>◆ Risk factors for diabetes</li> </ul>	<a href="http://www.diabetes.org">www.diabetes.org</a>
American Heart Association. <i>Risk Factors for Coronary Heart Disease</i> , 2011	<ul style="list-style-type: none"> <li>◆ Risk factors for Cardiovascular Disease that can be modified or treated</li> </ul>	<a href="http://www.americanheart.org">www.americanheart.org</a>
Annals of Emergency Medicine, v. 57, issue 6, 2011, p. 691	<ul style="list-style-type: none"> <li>◆ Firearm Injury Prevention</li> </ul>	<a href="http://journals.ohiolink.edu/ejc/pdf.cgi/EJC_Article.pdf?issn=01960644&amp;issue=v57i0006&amp;article=691_fip">http://journals.ohiolink.edu/ejc/pdf.cgi/EJC_Article.pdf?issn=01960644&amp;issue=v57i0006&amp;article=691_fip</a>
The Annie E. Casey Foundation, KIDS COUNT Data Center	<ul style="list-style-type: none"> <li>◆ Free and Reduced Lunch Data</li> </ul>	<a href="http://www.datacenter.org">www.datacenter.org</a>
<i>Arthritis at a Glance, 2011</i> , Centers for Disease Control & Prevention, <i>Morbidity and Mortality Weekly Report 2010; 59(39):999-1003</i>	<ul style="list-style-type: none"> <li>◆ What Can Be Done to Target Arthritis?</li> <li>◆ Arthritis statistics</li> </ul>	<a href="http://www.cdc.gov/chronicdisease/resources/publications/AAG/arthritis.htm">http://www.cdc.gov/chronicdisease/resources/publications/AAG/arthritis.htm</a>
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	<ul style="list-style-type: none"> <li>◆ 2009 - 2010 adult Ohio and U.S. correlating statistics</li> </ul>	<a href="http://www.cdc.gov">www.cdc.gov</a>
Center for Disease Control and Prevention	<ul style="list-style-type: none"> <li>◆ Arthritis</li> <li>◆ Asthma triggers</li> <li>◆ Binge drinking</li> <li>◆ Caffeinated alcoholic beverages</li> <li>◆ Fast facts on smoking and tobacco use</li> <li>◆ Human Papilloma Virus (HPV) and Vaccine</li> <li>◆ Obesity statistics</li> <li>◆ Predictors of access to health care</li> <li>◆ Preventing seasonal flu</li> <li>◆ Sexually transmitted diseases</li> </ul>	<a href="http://www.cdc.gov">www.cdc.gov</a>
CDC, Adolescent & School Health	<ul style="list-style-type: none"> <li>◆ Soft Drinks &amp; Adolescent Weight</li> </ul>	<a href="http://www.cdc.gov/healthyyouth/nutrition/facts.htm">http://www.cdc.gov/healthyyouth/nutrition/facts.htm</a>
CDC, Impact of Home Smoking Rules on Smoking Patterns Among Adolescents and Young Adults	<ul style="list-style-type: none"> <li>◆ Smoking Rules</li> </ul>	<a href="http://www.cdc.gov/pcd/issues/2006/apr/05_0028.htm">www.cdc.gov/pcd/issues/2006/apr/05_0028.htm</a>
CDC, National Cancer Institute, 2010	<ul style="list-style-type: none"> <li>◆ Cancer and Women</li> <li>◆ Cancer and Men</li> </ul>	<a href="http://www.cancer.gov/">http://www.cancer.gov/</a>

## Wood County Health Assessment Information Sources

Source	Data Used	Website
CDC, National Center for Chronic Disease Prevention and Health Promotion	<ul style="list-style-type: none"> <li>◆ Tobacco Use and Health of Young People</li> </ul>	<a href="http://www.cdc.gov/healthyouth/tobacco/facts.htm">http://www.cdc.gov/healthyouth/tobacco/facts.htm</a>
CDC, National Center for Health Statistics, 2009 and 2010	<ul style="list-style-type: none"> <li>◆ Leading Causes of Death in U.S.</li> <li>◆ Men's Health</li> <li>◆ U.S. female fertility rate</li> <li>◆ U.S. births to unwed mothers</li> <li>◆ U.S. low birth weight, live births</li> </ul>	<a href="http://www.cdc.gov/nchs/data/dvs/deaths_2009_release.pdf">http://www.cdc.gov/nchs/data/dvs/deaths_2009_release.pdf</a>
CDC, National Center for Health Statistics Data Brief, Food Allergy Among U.S. Children: Trends in Prevalence and Hospitalizations, 2008	<ul style="list-style-type: none"> <li>◆ Children &amp; Asthma</li> </ul>	N/A
CDC, National Center for Injury Prevention & Control	<ul style="list-style-type: none"> <li>◆ Prescription painkiller overdoses in the U.S.</li> </ul>	<a href="http://www.cdc.gov/VitalSigns/pdf/2011-11-vitalsigns.pdf">http://www.cdc.gov/VitalSigns/pdf/2011-11-vitalsigns.pdf</a>
CDC, National Center for Injury Prevention & Control, Suicide Fact Sheet	<ul style="list-style-type: none"> <li>◆ Suicide Risk Factors</li> <li>◆ Suicide Protective Factors</li> <li>◆ Teen Suicide Signals</li> </ul>	<a href="http://www.cdc.gov/violenceprevention/suicide/">www.cdc.gov/violenceprevention/suicide/</a>
CDC, National Depressive and Manic Depression Association	<ul style="list-style-type: none"> <li>◆ Warning Signs of Suicide</li> </ul>	N/A
CDC, Physical Activity for Everyone	<ul style="list-style-type: none"> <li>◆ Physical activity recommendations</li> </ul>	<a href="http://www.cdc.gov/physicalactivity/everyone/guidelines/adults.html">http://www.cdc.gov/physicalactivity/everyone/guidelines/adults.html</a>
CDC, Sexually Transmitted Diseases Surveillance, 2010	<ul style="list-style-type: none"> <li>◆ U.S. Chlamydia and Gonorrhea rates</li> <li>◆ STD's in adolescents and young adults</li> <li>◆ U.S. STD surveillance profile, 2010</li> </ul>	<a href="http://www.cdc.gov/std/stat/s10/default.htm">http://www.cdc.gov/std/stat/s10/default.htm</a>
CDC, Stigma of Mental Illness, 2011	<ul style="list-style-type: none"> <li>◆ Stigma of mental illness, based on 2007 BRFSS data</li> </ul>	<a href="http://www.cdc.gov/mentalhealth/data_stats/mental-illness.htm">http://www.cdc.gov/mentalhealth/data_stats/mental-illness.htm</a>
CDC, <i>Vital Signs</i> , Division of Nutrition, Physical Activity and Obesity, published August 2010	<ul style="list-style-type: none"> <li>◆ Obesity rising among American adults</li> </ul>	<a href="http://www.cdc.gov/VitalSigns/pdf/2010-08-vitalsigns.pdf">http://www.cdc.gov/VitalSigns/pdf/2010-08-vitalsigns.pdf</a>
CDC, <i>Vital Signs</i> , Office of Smoking and Health, published September 2010	<ul style="list-style-type: none"> <li>◆ Smoking and second hand smoke</li> </ul>	<a href="http://www.cdc.gov/VitalSigns/pdf/2010-09-vitalsigns.pdf">http://www.cdc.gov/VitalSigns/pdf/2010-09-vitalsigns.pdf</a>
CDC, Understanding Youth Violence	<ul style="list-style-type: none"> <li>◆ Facts Concerning Youth Violence</li> </ul>	<a href="http://www.cdc.gov/violenceprevention/pdf/yv-factsheet-a.pdf">http://www.cdc.gov/violenceprevention/pdf/yv-factsheet-a.pdf</a>
CDC, Vaccines & Preventable Diseases, May 2011	<ul style="list-style-type: none"> <li>◆ Human Papillomavirus (HPV) Vaccine</li> </ul>	<a href="http://www.cdc.gov/vaccines">http://www.cdc.gov/vaccines</a>
Campaign for Tobacco Free Kids, State Cigarette Excise Tax Rates & Rankings, July 2012	<ul style="list-style-type: none"> <li>◆ Costs of tobacco</li> </ul>	<a href="http://www.tobaccofreekids.org/research/factsheets/pdf/0097.pdf">http://www.tobaccofreekids.org/research/factsheets/pdf/0097.pdf</a>
Children's Defense Fund	<ul style="list-style-type: none"> <li>◆ Poverty &amp; abuse statistics of children in Ohio and the U.S.</li> </ul>	<a href="http://www.childrensdefense.org">www.childrensdefense.org</a>
Child Statistics	<ul style="list-style-type: none"> <li>◆ Children's Nutrition</li> <li>◆ Families that Read to Children Every Day</li> </ul>	<a href="http://www.childstats.gov">www.childstats.gov</a>

## Wood County Health Assessment Information Sources

Source	Data Used	Website
Choking Game Education	◆ Warning Signs for the “Choking Game”	<a href="http://www.deadlygameschildrenplay.com">www.deadlygameschildrenplay.com</a>
Dairy Council of California, Meals Matter	◆ Benefits of breakfast for children	<a href="http://www.mealsmatter.org">www.mealsmatter.org</a>
Data Resource Center for Child & Adolescent Health	◆ Child Care ◆ Child & Parent Relationships ◆ Parent Health	<a href="http://www.childhealthdata.gov">www.childhealthdata.gov</a>
FASTATS A to Z, U.S. Department of Health & Human Services, Centers for Disease Control & Prevention, National Center for Health Statistics, Division of Data Services	◆ U.S. mortality statistics ◆ U.S. predictors of access to health care ◆ U.S. birth rates	<a href="http://www.cdc.gov/nchs/fastats">www.cdc.gov/nchs/fastats</a>
Healthy People 2020: U.S. Department of Health & Human Services	◆ All Healthy People 2020 target data points ◆ Some U.S. baseline statistics ◆ Predictors of access to health care	<a href="http://www.healthypeople.gov/2020/topicsobjectives2020">http://www.healthypeople.gov/2020/topicsobjectives2020</a>
Healthy Youth: Tobacco, CDC	◆ Tobacco Sales & Promoting to Youth	<a href="http://www.cdc.gov/healthyyouth/tobacco/facts.htm">http://www.cdc.gov/healthyyouth/tobacco/facts.htm</a>
Learning Disabilities Association of America	◆ Children’s Health: ADHD, ASD	<a href="http://www.ldanatl.org">www.ldanatl.org</a>
National Birth Defect Prevention Network	◆ Birth Defects	<a href="http://www.nbdpn.org">www.nbdpn.org</a>
National Cancer Institute, 2010	◆ Cancer and women ◆ Cancer and men	<a href="http://www.cancer.gov">www.cancer.gov</a>
The National Campaign	◆ Facts about “Sexting”	<a href="http://www.thenationalcampaign.org/sextech/PDF/Sextech_PressReleaseFIN.pdf">http://www.thenationalcampaign.org/sextech/PDF/Sextech_PressReleaseFIN.pdf</a> , 2011
National Center for Children in Poverty, 2009	◆ Basic Facts about Low Income Children	<a href="http://www.nccp.org">www.nccp.org</a>
National Center for Environmental Health, CDC, 2011	◆ Asthma Triggers	<a href="http://www.cdc.gov/nceh/">http://www.cdc.gov/nceh/</a>
National Center for Immunization and Respiratory Diseases (NCIRD)	◆ Facts sheet - good health habits for preventing seasonal flu	<a href="http://www.cdc.gov/ncird/">http://www.cdc.gov/ncird/</a>
National Fire Protection Association	◆ Smoke Alarms	<a href="http://www.nfpa.org/">www.nfpa.org/</a>
National Health Interview Survey, 2008	◆ Unmet medical needs in the US ◆ Prescriptions ◆ Emergency Room Visits	<a href="http://www.cdc.gov/nchs/nhis.htm">www.cdc.gov/nchs/nhis.htm</a>
National Heart, Lung, and Blood Institute, 2011	◆ Chronic respiratory conditions	<a href="http://www.nhlbi.nih.gov/">http://www.nhlbi.nih.gov/</a>
National Institute on Drug Abuse	◆ Commonly abused prescription drugs	<a href="http://www.nida.nih.gov">www.nida.nih.gov</a>
National Institute of Health, National Institute of Arthritis and Musculoskeletal and Skin Diseases	◆ Back pain prevention	<a href="http://www.niams.nih.gov/Health_Info/Back_Pain/back_pain_ff.asp">http://www.niams.nih.gov/Health_Info/Back_Pain/back_pain_ff.asp</a> , updated 9/09
National Sleep Foundation	◆ Sleep & SIDS	<a href="http://www.sleepfoundation.org">www.sleepfoundation.org</a>

## Wood County Health Assessment Information Sources

Source	Data Used	Website
National Survey of Children's Health, 2007	<ul style="list-style-type: none"> <li>◆ Asthma, ADHD</li> <li>◆ Physical Activity</li> <li>◆ TV, Video Games &amp; Computer Usage</li> <li>◆ Insurance Status</li> <li>◆ Safe Schools</li> <li>◆ Extracurricular Activities</li> <li>◆ Unhappy, Sad or Depressed Children</li> <li>◆ Attending Religious Services</li> <li>◆ Neighborhood Safety</li> <li>◆ Children &amp; Smoking</li> <li>◆ Smoking in Home of a Child</li> </ul>	<a href="http://nschdata.org">http://nschdata.org</a>
Ohio Attorney General's Office, 2010 Domestic Violence Report	<ul style="list-style-type: none"> <li>◆ Domestic violence in Wood County</li> </ul>	<a href="http://www.ohioattorneygeneral.gov/files/Publications/Publications-for-Victims/Domestic-Violence-Reports-(1)/2010-Domestic-Violence-Reports">http://www.ohioattorneygeneral.gov/files/Publications/Publications-for-Victims/Domestic-Violence-Reports-(1)/2010-Domestic-Violence-Reports</a>
Ohio Department of Health, Information Warehouse	<ul style="list-style-type: none"> <li>◆ Wood County and Ohio mortality statistics</li> <li>◆ Wood County and Ohio birth statistics</li> <li>◆ Wood County and Ohio sexually transmitted diseases</li> <li>◆ HIV/AIDS surveillance program</li> <li>◆ Statistics re: access to health services</li> </ul>	<a href="http://www.odh.state.oh.us">www.odh.state.oh.us</a>
Ohio Department of Health, Ohio Cancer Incidence Surveillance System	<ul style="list-style-type: none"> <li>◆ Wood County and Ohio cancer mortality</li> <li>◆ Wood County and Ohio cancer incidence 2000-2007 data</li> </ul>	<a href="http://www.odh.state.oh.us">www.odh.state.oh.us</a>
Ohio Department of Health, Ohio Oral Health Surveillance System	<ul style="list-style-type: none"> <li>◆ Wood County oral health resources</li> </ul>	<a href="http://publicapps.odh.ohio.gov/oralhealth/default.aspx">http://publicapps.odh.ohio.gov/oralhealth/default.aspx</a>
Ohio Department of Job & Family Services	<ul style="list-style-type: none"> <li>◆ Poverty statistics</li> <li>◆ Wood County and Ohio Medicaid statistics</li> <li>◆ Wood County Medicaid statistics 2010</li> </ul>	<a href="http://jfs.ohio.gov/County/countypro/Wood.pdf">http://jfs.ohio.gov/County/countypro/Wood.pdf</a>
Ohio Department of Public Safety	<ul style="list-style-type: none"> <li>◆ 2011 Traffic Crash Facts</li> <li>◆ Wood County and Ohio crash facts</li> </ul>	<a href="http://www.state.oh.us/odps">www.state.oh.us/odps</a>
Ohio Family Health Survey Results, 2008 & 2010	<ul style="list-style-type: none"> <li>◆ Wood County and Ohio uninsured rates</li> </ul>	<a href="http://grc.osu.edu/ofhs/">http://grc.osu.edu/ofhs/</a>
Ohio Oral Health Surveillance System, 2010	<ul style="list-style-type: none"> <li>◆ Children's Dental Health</li> </ul>	<a href="http://publicapps.odh.ohio.gov/oralhealth/ReportsDisplay.aspx?Report=BOHSReport&amp;Format=pdf&amp;CountyName=Wood&amp;ReportVersion=2010">http://publicapps.odh.ohio.gov/oralhealth/ReportsDisplay.aspx?Report=BOHSReport&amp;Format=pdf&amp;CountyName=Wood&amp;ReportVersion=2010</a>
Ohio Suicide Prevention Foundation	<ul style="list-style-type: none"> <li>◆ Wood County suicide facts 2010</li> </ul>	<a href="http://ohiospf.org">http://ohiospf.org</a>

## Wood County Health Assessment Information Sources

Source	Data Used	Website
Pacific Institute for Research and Evaluation, "Underage Drinking in Ohio: The Facts," September 2011	◆ Underage drinking in Ohio fact sheet	<a href="http://www.udetc.org/factsheets/OH.pdf">http://www.udetc.org/factsheets/OH.pdf</a>
The Partnership at Drugfree.org, Parents 360, 2012	◆ Synthetic Drugs: Bath Salts, K2/Spice A guide for parents and other influencers	<a href="http://www.drugfree.org">www.drugfree.org</a>
Respect2All	◆ Types of Bullying	<a href="http://www.respect2all.org/parents/bullying-definitions">www.respect2all.org/parents/bullying-definitions</a>
Safe Kids USA	◆ Car Seats & Booster Seats ◆ Children's Safety in Cars ◆ Helmet Safety ◆ Firearm Safety	<a href="http://www.safekids.org">www.safekids.org</a>
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	◆ American Community Survey 5 year estimates, 2006-2010 ◆ Ohio and Wood County 2010 Census demographic information	<a href="http://www.census.gov">www.census.gov</a>
U.S Department of Education	◆ Facebook & MySpace	<a href="http://www.ed.gov">www.ed.gov</a>
U.S. Department of Health and Human Services, Ohio Department of Mental Health	◆ Mental Health Services in Ohio, 2010, FY 2009*	<a href="http://www.lsc.state.oh.us/fiscal/ohiofacts/sep2010/healthhumanservices.pdf">http://www.lsc.state.oh.us/fiscal/ohiofacts/sep2010/healthhumanservices.pdf</a>
U. S. Department of Health and Human Services, SAMHSA, NSDUH, 2010	◆ Drug abuse warning network report, December 2010 ◆ National Survey on Drug Use and Health ◆ U.S Youth Perception of Risk	<a href="http://www.samhsa.gov/data/NSDUH/2k10NSDUH/2k10Results.htm#2.2">http://www.samhsa.gov/data/NSDUH/2k10NSDUH/2k10Results.htm#2.2</a>
Youth Risk Behavior Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, Centers for Disease Control	◆ 2005 - 2009 youth Ohio and U.S. correlating statistics	<a href="http://www.cdc.gov">www.cdc.gov</a>

## List of Acronyms and Terms

<b>Adult</b>	Defined as 19 years of age and older.
<b>Age-Adjusted Mortality Rates</b>	Death rate per 100,000 adjusted for the age distribution of the population.
<b>Binge drinking</b>	Consumption of five alcoholic beverages or more (for males) or four alcoholic beverages or more (for females) on one occasion.
<b>BMI</b>	Body Mass Index is defined as the contrasting measurement/relationship of weight to height.
<b>BRFSS</b>	Behavior Risk Factor Surveillance System, an adult survey conducted by the CDC.
<b>CDC</b>	Centers for Disease Control and Prevention.
<b>Current Smoker</b>	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
<b>Crude Mortality Rates</b>	Number of deaths/estimated mid-year population times 100,000.
<b>HCF</b>	Healthy Communities Foundation of the Hospital Council of Northwest Ohio.
<b>HP 2020</b>	Healthy People 2020, a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.
<b>Health Indicator</b>	A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.
<b>High Blood Cholesterol</b>	240 mg/dL and above
<b>High Blood Pressure</b>	Systolic $\geq 140$ and Diastolic $\geq 90$
<b>N/A</b>	Data not available.
<b>NSCH</b>	National Survey of Children's Health



## List of Acronyms and Terms

<b>ODH</b>	Ohio Department of Health
<b>Race/Ethnicity</b>	<b>Census 2010:</b> U.S. Census data consider race and Hispanic origin separately. Census 2010 adhered to the standards of the Office of Management and Budget (OMB), which define Hispanic or Latino as “a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.” Data are presented as “Hispanic or Latino” and “Not Hispanic or Latino.” Census 2010 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other Pacific Islander. Data reported, “White alone” or “Black alone”, means the respondents reported only one race.
<b>Weapon</b>	Defined in the YRBSS as “a weapon such as a gun, knife, or club”
<b>Youth</b>	Defined as 12 through 18 years of age
<b>YPLL/65</b>	Years of Potential Life Lost before age 65. Indicator of premature death.
<b>Youth BMI Classifications</b>	<b>Underweight</b> is defined as BMI-for-age $\leq 5^{\text{th}}$ percentile. <b>Overweight</b> is defined as BMI-for-age $85^{\text{th}}$ percentile to $< 95^{\text{th}}$ percentile. <b>Obese</b> is defined as $\geq 95^{\text{th}}$ percentile.
<b>YRBSS</b>	Youth Risk Behavior Surveillance System, a youth survey conducted by the CDC

## Methods for Weighting the 2012 Wood County Assessment Data

Data from sample surveys have the potential for bias if there are different rates of response for different segments of the population. In other words, some subgroups of the population may be more represented in the completed surveys than they are in the population from which those surveys are sampled. If a sample has 25% of its respondents being male and 75% being female, then the sample is biased towards the views of females (if females respond differently than males). This same phenomenon holds true for any possible characteristic that may alter how an individual responds to the survey items.

In some cases, the procedures of the survey methods may purposefully over-sample a segment of the population in order to gain an appropriate number of responses from that subgroup for appropriate data analysis when investigating them separately (this is often done for minority groups). Whether the over-sampling is done inadvertently or purposefully, the data needs to be weighted so that the proportioned characteristics of the sample accurately reflect the proportioned characteristics of the population. In the 2012 Wood County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Wood County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), Age (7 different age categories), and income (7 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Wood County within the specific category and dividing that by the percent of the sample within that same specific category. Using sex as an example, the following represents the data from the 2012 Wood County Survey and the 2010 Census.

<u>Sex</u>	<u>2012 Wood Survey</u>		<u>2010 Census</u>		<u>Weight</u>
	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	188	54.022989	61,347	48.8867461	0.90492488
Female	160	45.977011	64,141	51.1132539	1.11171327

In this example, it shows that there was a slightly larger portion of males in the sample compared to the actual portion in Wood County. The weighting for males was calculated by taking the percent of males in Wood County (based on Census information) (48.8867461%) and dividing that by the percent found in the 2012 Wood County sample (54.022989%) [ $48.8867461 / 54.022989 =$  weighting of 0.90492488 for males]. The same was done for females [ $51.1132539 / 45.977011 =$  weighting of 1.11171327 for females]. Thus males' responses are weighted less by a factor of 0.90492488 and females' responses weighted heavier by a factor of 1.11171327.

## Methods for Weighting the 2012 Wood County Assessment Data

This same thing was done for each of the 18 specific categories as described above. For example, a respondent who was female, White, in the age category 35-44, and with a household income in the \$50-\$75k category would have an individual weighting of 1.518836 [0.948961 (weight for females) x 1.039546 (weight for White) x 1.366806 (weight for age 45-54) x 0.961541 (weight for income \$25-\$35k)]. Thus, each individual in the 2012 Wood County sample has their own individual weighting based on their combination of age, race, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

Multiple sets of weightings were created and used in the statistical software package (SPSS 14.0) when calculating frequencies. For analyses done for the entire sample and analyses done based on subgroups other than age, race, sex, or income – the weightings that were calculated based on the product of the four weighting variables (age, race, sex, income) for each individual. When analyses were done comparing groups within one of the four weighting variables (e.g., smoking status by race/ethnicity), that specific variable was not used in the weighting score that was applied in the software package. In the example smoking status by race, the weighting score that was applied during analysis included only age, sex, and income. Thus a total of eight weighting scores for each individual were created and applied depending on the analysis conducted. The weight categories were as follows:

- 1) **Total weight** (product of 4 weights) – for all analyses that did not separate age, race, sex, or income.
- 2) **Weight without sex** (product of age, race, and income weights) – used when analyzing by sex.
- 3) **Weight without age** (product of sex, race, and income weights) – used when analyzing by age.
- 4) **Weight without race** (product of age, sex, and income weights) – used when analyzing by race.
- 5) **Weight without income** (product of age, race, and sex weights) – used when analyzing by income.
- 6) **Weight without sex or age** (product of race and income weights) – used when analyzing by sex and age.
- 7) **Weight without sex or race** (product of age and income weights) – used when analyzing by sex and race.
- 8) **Weight without sex or income** (product of age and race weights) – used when analyzing by sex and income.

## Methods for Weighting the 2012 Wood County Assessment Data

Category	Wood Sample	%	2010 Census *	%	Weighting Value
<b>Sex:</b>					
Male	188	54.022989	61,347	48.8867461	0.90492488
Female	160	45.977011	64,141	51.1132539	1.11171327
<b>Age:</b>					
20-24	184	53.958944	14,229	15.4674812	0.28665278
25-34	31	9.090909	14,630	15.9033840	1.74937223
35-44	11	3.225806	14,903	16.2001457	5.02204516
45-54	48	14.076246	17,699	19.2395074	1.36680667
55-59	22	6.451613	8,323	9.0474275	1.40235127
60-64	16	4.692082	6,820	7.4136076	1.58002511
65-74	22	6.451613	8,073	8.7756677	1.36022850
75-84	7	2.052786	5,165	5.6145576	2.73509165
85+	0	0.000000	2,151	2.3382214	1.00000000
<b>Race:</b>					
White	314	89.714286	125,488	93.2621847	1.03954664
Non-White	36	10.285714	9,066	6.7378153	0.65506538
<b>Household Income</b>					
Less than \$10,000	29	9.324759	3,426	7.0441648	0.75542595
\$10k-\$15k	20	6.430868	2,136	4.3918085	0.68292623
\$15k-\$25k	27	8.681672	5,379	11.0597089	1.27391461
\$25k-\$35k	35	11.254019	5,263	10.8212024	0.96154113
\$35k-\$50	36	11.575563	6,670	13.7141212	1.18474769
\$50k-\$75k	56	18.006431	9,727	19.9995888	1.11069145
\$75k or more	108	34.726688	16,035	32.9694054	0.94939677
<p>Note: The weighting ratios are calculated by taking the ratio of the proportion of the population of Wood County in each subcategory by the proportion of the sample in the Wood County survey for that same category.</p> <p>* Wood County population figures taken from the 2010 Census.</p>					

## Wood County Schools

The following schools were randomly chosen and agreed to participate in the 2012 Wood County Health Assessment:

### **Bowling Green City**

Bowling Green Middle School  
Bowling Green High School

### **Eastwood Local**

Eastwood Middle School  
Eastwood High School

### **Elmwood Local**

Elmwood High School

### **Lake Local**

Lake Middle School  
Lake High School

### **North Baltimore Local**

North Baltimore High School

### **Northwood Local**

Northwood High School

### **Otsego Local**

Otsego Junior High School

### **Perrysburg Exempted Village**

Perrysburg Junior High School  
Perrysburg High School

### **Rossford Exempted Village**

Rossford Junior High School  
Rossford High School

## Wood County Sample Demographic Profile\*

Variable	2012 Survey Sample	Wood County Census 2010	Ohio Census 2010
<b>Age</b>			
20-29	56.6%	17.6%	12.8%
30-39	5.0%	11.4%	12.2%
40-49	7.8%	12.8%	14.0%
50-59	13.4%	13.8%	14.5%
60 plus	12.6%	17.7%	19.9%
<b>Race / Ethnicity</b>			
White	89.6%	92.8%	82.7%
Black or African American	1.4%	2.4%	12.2%
American Indian and Alaska Native	2.0%	0.2%	0.2%
Asian	0.8%	1.5%	1.7%
Other	3.6%	1.3%	1.1%
Hispanic Origin (may be of any race)	2.5%	4.5%	3.1%
<b>Marital Status†</b>			
Married Couple	43.1%	47.5%	47.9%
Never been married/member of an unmarried couple	51.6%	34.0%	33.5%
Divorced/Separated	3.7%	12.8%	27.5%
Widowed	1.1%	5.7%	13.0%
<b>Education†</b>			
Less than High School Diploma	2.0%	7.7%	11.9%
High School Diploma	15.1%	30.2%	35.2%
Some college/ College graduate	81.0%	62.2%	52.9%
<b>Income (Families)</b>			
\$14,999 and less	13.7%	5.7%	14.7%
\$15,000 to \$24,999	7.6%	8.7%	12.7%
\$25,000 to \$49,999	19.9%	21.8%	27.0%
\$50,000 to \$74,999	15.7%	19.7%	18.8%
\$75,000 or more	30.3%	41.7%	26.8%

\* The percents reported are the actual percent within each category who responded to the survey. The data contained within the report however are based on weighted data (weighted by age, race, sex, and income). Percents may not add to 100% due to missing data (non-responses).

† The Ohio and Wood County Census percentages are slightly different than the percent who responded to the survey. Marital status is calculated for those individuals 15 years and older. Education is calculated for those 25 years and older.

# Demographics

## Wood County Population by Age Groups and Gender U.S. Census 2010

Category	Total	Males	Females
<b>Wood County</b>	<b>125,488</b>	<b>61,347</b>	<b>64,141</b>
<b>0-4 years</b>	<b>6,847</b>	<b>3,521</b>	<b>3,326</b>
1-4 years	5,501	2,823	2,678
< 1 year	1,346	698	648
1-2 years	2,691	1,373	1,318
3-4 years	2,810	1,450	1,360
<b>5-9 years</b>	<b>7,496</b>	<b>3,921</b>	<b>3,575</b>
5-6 years	2,990	1,558	1,432
7-9 years	4,506	2,363	2,143
<b>10-14 years</b>	<b>7,875</b>	<b>3,992</b>	<b>3,883</b>
10-12 years	4,715	2,397	2,318
13-14 years	3,160	1,595	1,565
12-18 years	12,433	6,196	6,237
<b>15-19 years</b>	<b>11,277</b>	<b>5,442</b>	<b>5,835</b>
15-17 years	5,057	2,605	2,452
18-19 years	6,220	2,837	3,383
20-24 years	14,229	7,043	7,186
25-29 years	7,746	3,966	3,780
30-34 years	6,884	3,427	3,457
35-39 years	7,463	3,733	3,730
40-44 years	7,440	3,677	3,763
45-49 years	8,611	4,159	4,452
50-54 years	9,088	4,478	4,610
55-59 years	8,323	4,066	4,257
60-64 years	6,820	3,331	3,489
65-69 years	4,601	2,165	2,436
70-74 years	3,472	1,562	1,910
75-79 years	2,910	1,275	1,635
80-84 years	2,255	901	1,354
85-89 years	1,420	503	917
90-94 years	594	158	436
95-99 years	121	25	96
100-104 years	15	2	13
105-109 years	1	0	1
110 years & over	0	0	0
<b>Total 85 years and over</b>	<b>2,151</b>	<b>688</b>	<b>1,463</b>
<b>Total 65 years and over</b>	<b>15,389</b>	<b>6,591</b>	<b>8,798</b>
<b>Total 19 years and over</b>	<b>95,618</b>	<b>46,133</b>	<b>49,485</b>

# Wood County Profile

## *General Demographic Characteristics* (Source: U.S. Census Bureau, Census 2010)

### ***Total Population***

2010 Total Population	125,488	
2000 Total Population	121,065	

### Largest City-Bowling Green

2010 Total Population	30,028	100%
2000 Total Population	29,636	100%

### ***Population By Race/Ethnicity***

Total Population	125,488	100%
White Alone	116,422	92.8%
Hispanic or Latino (of any race)	5,663	4.5%
African American	3,022	2.4%
American Indian and Alaska Native	286	0.2%
Asian	1,943	1.5%
Two or more races	2,179	1.7%
Other	1,599	1.3%

### ***Population By Age***

Under 5 years	6,847	5.5%
5 to 17 years	20,428	16.4%
18 to 24 years	20,449	16.3%
25 to 44 years	29,533	23.5%
45 to 64 years	32,842	38.4%
65 years and more	15,389	12.3%
<b>Median age (years)</b>	<b>35.3</b>	

### ***Household By Type***

Total Households	49,043	100%
Family Households (families)	30,923	63.1%
With own children <18 years	13,310	27.1%
Married-Couple Family Households	24,587	50.1%
With own children <18 years	9,632	19.6%
Female Householder, No Husband Present	4,403	9.0%
With own children <18 years	2,594	5.3%
Non-family Households	18,120	36.9%
Householder living alone	13,502	27.5%
Householder 65 years and >	4,409	9.0%
Households With Individuals < 18 years	14,485	29.5%
Households With Individuals 65 years and >	10,798	22.0%

Average Household Size	2.43 people
Average Family Size	2.98 people



# Wood County Profile

## *General Demographic Characteristics, Continued* (Source: U.S. Census Bureau, Census 2010)

*2010 ACS 1-year estimates*

Median Value of Owner-Occupied Units	\$149,500
Median Monthly Owner Costs (With Mortgage)	\$1,302
Median Monthly Owner Costs (Not Mortgaged)	\$452
Median Gross Rent for Renter-Occupied Units	\$673
Median Rooms Per Housing Unit	6.0
Total Housing Units	53,361
No Telephone Service	950
Lacking Complete Kitchen Facilities	170
Lacking Complete Plumbing Facilities	140

## *Selected Social Characteristics* (Source: U.S. Census Bureau, Census 2010)

*2010 ACS 1-year estimates*

### *School Enrollment*

Population 3 Years and Over Enrolled In School	43,138	100%
Nursery & Preschool	1,985	4.6%
Kindergarten	1,922	4.5%
Elementary School (Grades 1-8)	12,254	28.4%
High School (Grades 9-12)	6,864	15.9%
College or Graduate School	20,113	46.6%

### *Educational Attainment*

Population 25 Years and Over	77,700	100%
< 9 <sup>th</sup> Grade Education	1,526	2.0%
9 <sup>th</sup> to 12 <sup>th</sup> Grade, No Diploma	4,410	5.7%
High School Graduate (Includes Equivalency)	23,497	30.2%
Some College, No Degree	17,618	22.7%
Associate Degree	8,599	11.1%
Bachelor's Degree	13,361	17.2%
Graduate Or Professional Degree	8,689	11.2%

Percent High School Graduate or Higher	*(X)	92.4%
Percent Bachelor's Degree or Higher	*(X)	28.4%

\*(X) – Not available

# Wood County Profile

## *Selected Social Characteristics, Continued* (Source: U.S. Census Bureau, Census 2010)

*2010 ACS 1-year estimates*

### ***Marital Status***

Population 15 Years and Over	103,650	100%
Never Married	35,275	34.0%
Now Married, Excluding Separated	49,235	47.5%
Separated	2,109	2.0%
Widowed	5,887	5.7%
Female	4,797	4.6%
Divorced	11,144	10.8%
Female	6,576	6.3%

### ***Grandparents As Caregivers***

Grandparent Living in Household with 1 or more own grandchildren <18 years	1,947	100%
Grandparent Responsible for Grandchildren	697	35.8%

### ***Veteran Status***

Civilian Veterans 18 years and over	9,280	9.4%
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### ***Disability Status of the Civilian Non-institutionalized Population***

Total Civilian Noninstitutionalized Population	124,239	100%
With a Disability	11,719	9.4%
Under 18 years	27,244	100%
With a Disability	837	3.1%
18 to 64 years	82,062	100%
With a Disability	7,195	8.8%
65 Years and Over	14,933	100%
With a Disability	3,687	24.7%

## *Selected Economic Characteristics* (Source: U.S. Census Bureau, Census 2010)

*2010 ACS 1-year estimates*

### ***Employment Status***

Population 16 Years and Over	101,601	100%
In Labor Force	66,993	65.9%
Not In Labor Force	34,608	34.1%
Females 16 Years and Over	52,805	100%
In Labor Force	32,539	61.6%
Population Living With Own Children <6 Years	7,824	100%
All Parents In Family In Labor Force	13,630	73.8%

# Wood County Profile

## *Selected Economic Characteristics, Continued* (Source: U.S. Census Bureau, Census 2010)

*2010 ACS 1-year estimates*

### **Occupations**

Employed Civilian Population 16 Years and Over	57,825	100%
Management, Professional, and Related Occupations	21,376	37.0%
Sales and Office Occupations	14,952	25.9%
Service Occupations	9,082	15.7%
Production, Transportation, and Material Moving Occupations	8,604	14.9%
Natural Resources, Construction, and Maintenance Occupations	3,811	6.6%

### ***Leading Industries***

Employed Civilian Population 16 Years and Over	57,825	100%
Educational, health and social services	17,059	29.5%
Trade (retail and wholesale)	8,631	14.9%
Manufacturing	9,656	16.7%
Arts, entertainment, recreation, accommodation, and food services	4,550	7.9%
Professional, scientific, management, administrative, and waste management services	4,161	7.2%
Transportation and warehousing, and utilities	2,785	4.8%
Finance, insurance, real estate and rental and leasing	2,146	3.7%
Other services (except public administration)	3,043	5.3%
Construction	2,407	4.2%
Public administration	1,932	3.3%
Information	1,162	2.0%
Agriculture, forestry, fishing and hunting, and mining	293	0.5%

### ***Class of Worker***

Employed Civilian Population 16 Years and Over	57,825	100%
Private Wage and Salary Workers	44,392	76.8%
Government Workers	10,227	17.7%
Self-Employed Workers in Own Not Incorporated Business	3,206	5.5%
Unpaid Family Workers	0	0.0%

### ***Median Earnings***

Male, Full-time, Year-Round Workers	\$53,795
Female, Full-time, Year-Round Workers	\$34,944

# Wood County Profile

## *Selected Economic Characteristics, Continued* (Source: U.S. Census Bureau, Census 2010)

*2010 ACS 1-year estimates*

### *Income In 2010*

Households	47,242	100%
< \$10,000	3,322	7.0%
\$10,000 to \$14,999	2,333	4.9%
\$15,000 to \$24,999	6,689	14.2%
\$25,000 to \$34,999	5,712	12.1%
\$35,000 to \$49,999	6,376	13.5%
\$50,000 to \$74,999	8,026	17.0%
\$75,000 to \$99,999	6,170	13.1%
\$100,000 to \$149,999	6,185	13.1%
\$150,000 to \$199,999	1,614	3.4%
\$200,000 or more	815	1.7%

### *Median Household Income*

***\$47,485***

### *Income In 2010*

Families	30,425	100%
< \$10,000	1,743	5.7%
\$10,000 to \$14,999	712	2.3%
\$15,000 to \$24,999	2,652	8.7%
\$25,000 to \$34,999	3,037	10.0%
\$35,000 to \$49,999	3,592	11.8%
\$50,000 to \$74,999	6,000	19.7%
\$75,000 to \$99,999	5,548	18.2%
\$100,000 to \$149,999	4,915	16.2%
\$150,000 to \$199,999	1,459	4.8%
\$200,000 or more	767	2.5%

### *Median Household Income (families)*

***\$65,448***

### *Per Capita Income In 2010*

***\$23,873***

### **Poverty Status In 2010**

	<i>Number Below Poverty Level</i>	<i>% Below Poverty Level</i>
Families	*(X)	9.8%
Individuals	*(X)	14.1%

\*(X) – Not available

# Wood County Profile

## *Selected Economic Characteristics, Continued* (Source: U.S. Bureau of Economic Analysis)

### *Bureau of Economic Analysis (BEA) Per Capita Personal Income Figures*

	Income	Rank of Ohio counties
BEA Per Capita Personal Income 2009	\$35,341	15 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2008	\$35,734	15 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2007	\$34,217	18 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2006	\$32,614	19 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2000	\$27,545	22 <sup>nd</sup> of 88 counties
BEA Per Capita Personal Income 1999	\$26,586	20 <sup>th</sup> of 88 counties

(BEA PCPI figures are greater than Census figures for comparable years due to deductions for retirement, Medicaid, Medicare payments, and the value of food stamps, among other things)

### Poverty Rates, 5-year averages 2005 to 2009

Category	Wood	Ohio
Overall (%)	12.5%	13.6%
Children under 18 (%)	9.9%	17.6%
Age 65 and over (%)	7.4%	8.5%
< 50% FPL, i.e. severe poverty (%)	5.7%	6.2%
< 200% FPL, i.e. below self-sufficiency (%)	26.7%	30.9%

(Source: *The State of Poverty in Ohio 2011*, Ohio Association of Community Action Agencies, 2011 Annual Report, [http://www.oacaa.org/index\\_337\\_103526955.pdf](http://www.oacaa.org/index_337_103526955.pdf))

### Employment Statistics

Category	Wood	Ohio
Labor Force	65,500	5,844,400
Employed	60,700	5,414,000
Unemployed	4,800	430,400
Unemployment Rate* in July 2012	7.3	7.4
Unemployment Rate* in June 2012	7.5	7.4
Unemployment Rate* in July 2011	8.8	9.0

\*Rate equals unemployment divided by labor force.  
(Source: Ohio Department of Job and Family Services, July 2012)

# Wood County Profile

## Estimated Poverty Status in 2010

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval
<b>Wood County</b>				
All ages in poverty	15,265	13,230 to 17,300	12.8%	11.1 to 14.5
Ages 0-17 in poverty	3,707	3,024 to 4,390	13.9%	11.3 to 16.5
Ages 5-17 in families in poverty	2,546	2,100 to 2,992	12.8%	10.6 to 15.0
Median household income	\$49,344	46,358 to 52,330		
<b>Ohio</b>				
All ages in poverty	1,771,404	1,746,640 to 1,796,168	15.8%	15.6 to 16.0
Ages 0-17 in poverty	619,354	604,905 to 633,803	23.1%	22.6 to 23.6
Ages 5-17 in families in poverty	407,567	394,584 to 420,550	20.8%	20.1 to 21.5
Median household income	\$45,151	44,860 to 44,860		
<b>United States</b>				
All ages in poverty	42,215,956	45,975,650 to 46,456,262	15.3%	15.2 to 15.4
Ages 0-17 in poverty	15,749,129	15,621,395 to 15,876,863	21.6%	21.4 to 21.8
Ages 5-17 in families in poverty	10,484,513	10,394,015 to 10,575,011	19.8%	19.6 to 20.0
Median household income	\$50,046	49,982 to 50,110		

(Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, <http://www.census.gov/hhes/www/saipe/county.html>)

## Federal Poverty Thresholds in 2011 by Size of Family and Number of Related Children Under 18 Years of Age

Size of Family Unit	No Children	One Child	Two Children	Three Children	Four Children	Five Children
1 Person <65 years	\$11,702					
1 Person 65 and >	\$10,788					
2 people Householder < 65 years	\$15,063	\$15,504				
2 People Householder 65 and >	\$13,596	\$15,446				
3 People	\$17,595	\$18,106	\$18,123			
4 People	\$23,201	\$23,581	\$22,811	\$22,891		
5 People	\$27,979	\$28,386	\$27,517	\$26,844	\$26,434	
6 People	\$32,181	\$32,309	\$31,643	\$31,005	\$30,056	\$29,494
7 People	\$37,029	\$37,260	\$36,463	\$35,907	\$34,872	\$33,665
8 People	\$41,414	\$41,779	\$41,027	\$40,368	\$39,433	\$38,247
9 People or >	\$49,818	\$50,059	\$49,393	\$48,835	\$47,917	\$46,654

(Source: U. S. Census Bureau, Poverty Thresholds 2011, <http://www.census.gov/hhes/www/poverty/data/threshld/index.html>)