

# Wyandot County

## Community Health Status Assessment



*Examining the Health  
of Wyandot County*

# 2018

Completed on  
May 17<sup>th</sup>, 2018

Released on  
June 14<sup>th</sup>, 2018





# Foreword

Dear Community Member,

The members of the Wyandot County Health Alliance are pleased to present the 2018 Wyandot County Community Health Assessment. This comprehensive community health assessment is the result of mobilizing partnerships to improve community wellness and quality of life in Wyandot County.

We invite individuals, agencies, stakeholders, and community partners to take an active role in creating a better Wyandot County. Together we can use this data to formulate a new community health improvement plan for Wyandot County.

***Alone we can do so little. Together we can do so much. -Helen Keller***

The health assessment gives a snapshot of our community, as well as a comparison to the state and nation. It is our hope that the data presented in this report provides you valuable information for developing strategies, educating and implementing services focused on wellness, access to care, and unmet community needs. It provides additional insight into our health status, and it has the potential to play a significant role in influencing our course of action supporting health, wellness, and prevention in our community.

Comparing data from 2009, 2012, 2015, and 2018 will allow community partners and stake holders to quote trends, write more detailed grants, formulate strategic plans and be part of a movement that envisions "A Healthier Wyandot County."

The Wyandot County Health Alliance will use this information to strengthen its efforts to bring about healthy changes in our community. We hope this report will be a valuable tool to you as an agency or community member and encourage you to be part of the movement to improve health and wellness in this county we call home.

Sincerely,



Ty R. Shaull, President and CEO  
Wyandot Memorial Hospital



Barbara A. Mewhorter, Administrator  
Wyandot County Public Health

# Acknowledgements

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Wyandot County Department of Job and Family Services  
Wyandot County Public Health  
Wyandot County Skilled Nursing and Rehabilitation  
Wyandot Memorial Hospital

## **This report has been commissioned by the Wyandot County Health Alliance:**

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First National Bank of Sycamore  
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Open Door Resource Center  
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Waistline Risk Solutions  
Wyandot County Board of Developmental Disabilities  
Wyandot County Commissioners  
Wyandot County Department of Job and Family Services  
Wyandot County Public Health  
Wyandot Memorial Hospital  
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Wyandot County Prosecutor  
Wyandot County Safe Communities Grant

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Consultant

**To see Wyandot County data compared to other counties, please visit the Hospital Council of Northwest Ohio's Data Link website at:**

<http://www.hcno.org/community/data-indicator.html>

**The 2018 Wyandot County Health Assessment is available on the following websites:**

**Mental Health and Recovery Services Board of Seneca, Sandusky and Wyandot Counties**

<http://mhrsbsw.org/>

**Wyandot County Public Health**

<http://www.wyandothealth.com/>

**Hospital Council of Northwest Ohio**

<http://www.hcno.org/community/reports.html>

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# Executive Summary

This executive summary provides an overview of health-related data for Wyandot County adults (ages 19 and older) and youth (ages 12 through 18) who participated in a county-wide health assessment survey from January through March 2018. 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). The Hospital Council of Northwest Ohio (HCNO) 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 and adolescents within Wyandot 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

Two survey instruments were designed and pilot tested for this study: one for adults and one for adolescents in grades 6 through 12. As a first step in the design process, health education researchers from the University of Toledo and staff members from HCNO 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 most the adult survey items from the BRFSS and many of the adolescent survey items from the YRBSS. This decision was based on being able to compare local data with state and national data.

The project coordinator from the Hospital Council of Northwest Ohio conducted a series of meetings with the planning committee from Wyandot County. During these meetings, HCNO and the planning committee reviewed and discussed banks of potential survey questions. Based on input from the Wyandot County planning committee, the project coordinator composed drafts of surveys containing 112 items for the adult survey and 79 items for the adolescent survey. Health education researchers from the University of Toledo reviewed and approved the drafts.

### SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and older living in Wyandot County. There were 16,823 persons ages 19 and older living in Wyandot 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 376 adults was needed to ensure this level of confidence. The random sample of mailing addresses was obtained from Melissa Global Intelligence in Rancho Santa Margarita, California.

### SAMPLING | Adolescent Survey

Youth in grades 6 through 12 in Wyandot County public school districts were used as the sampling frame for the adolescent survey. Using the U.S. Census Bureau data, it was determined that approximately 2,216 youth ages 12 to 18 years old live in Wyandot County. A sample size of 328 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.

## **PROCEDURE | Adult Survey**

Prior to mailing the survey, an advance letter was mailed to 1,200 adults in Wyandot County. This advance letter was personalized; printed on Wyandot County Health Alliance letterhead; and signed by Barbara Mewhorter, Chairperson, Wyandot County Health Alliance. 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.

Three 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 Wyandot County Health Alliance letterhead) describing the purpose of the study, a questionnaire, a self-addressed stamped return envelope, and a \$2 incentive. Approximately three weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging the recipients to reply, another copy of the questionnaire, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the mailing was 38% (n=430; CI=± 4.67). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

## **PROCEDURE | Adolescent Survey**

The survey was approved by all participating 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 94% (n=433; CI=± 4.21).

## **DATA ANALYSIS**

Individual responses were anonymous. Only group data was available. All data was analyzed by health education researchers at the University of Toledo using SPSS 23.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Wyandot County, the adult data collected was weighted by age, gender, race, and income using 2016 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 IV.

## **LIMITATIONS**

As with all county health assessments, it is important to consider the findings with respect to all possible limitations. First, the Wyandot 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 Wyandot County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

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

Lastly, caution should be used when interpreting subgroup results, as the margin of error for any subgroup is higher than that of the overall survey.




## Secondary Data Collection Methods

HCNO collected secondary data from multiple sites, including county-level data, whenever possible. HCNO utilized sites such as the Behavioral Risk Factor Surveillance System (BRFSS), Youth Risk Behavior Surveillance System (YRBSS), numerous CDC sites, U.S. Census data, Healthy People 2020, among other national and local sources. All data is included as a citation in the section of the report with which it corresponds, and the URLs are available in the references at the end of this report. All primary data collected in this report is from the 2018 Wyandot County Community Health Assessment (CHA). All other data is cited accordingly.

## 2016 Ohio State Health Assessment (SHA)

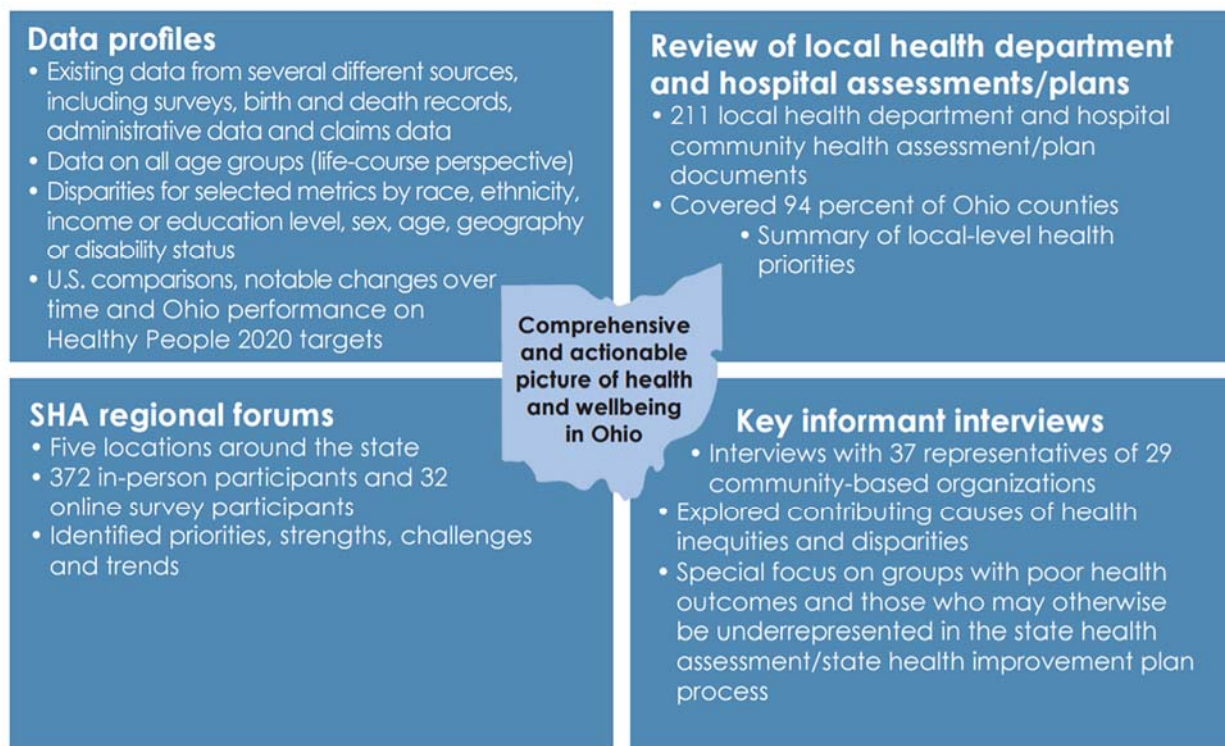
The 2016 Ohio State Health Assessment (SHA) provides data needed to inform health improvement priorities and strategies in the state. This assessment includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, a review of local health department and hospital assessments and plans, and key informant interviews.

Similar to the 2016 Ohio SHA, the 2018 Wyandot County Community Health Assessment (CHA) examined a variety of metrics from various areas of health including, but not limited to, health behaviors, chronic disease, access to health care, and social determinants of health. Additionally, the CHA studied themes and perceptions from local public health stakeholders from a wide variety of sectors. **Note: This symbol  will be displayed in the trend summary when an indicator directly aligns with the 2016 Ohio SHA.**

The interconnectedness of Ohio's greatest health challenges, along with the overall consistency of health priorities identified in this assessment, indicates many opportunities for collaboration between a wide variety of partners at and between the state and local level, including physical and behavioral health organizations and sectors beyond health. It is our hope that this CHA will serve as a foundation for such collaboration.

To view the full 2016 Ohio State Health Assessment, please visit: [http://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/chss/ship/SHA\\_FullReport\\_08042016.pdf?la=en](http://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/chss/ship/SHA_FullReport_08042016.pdf?la=en)

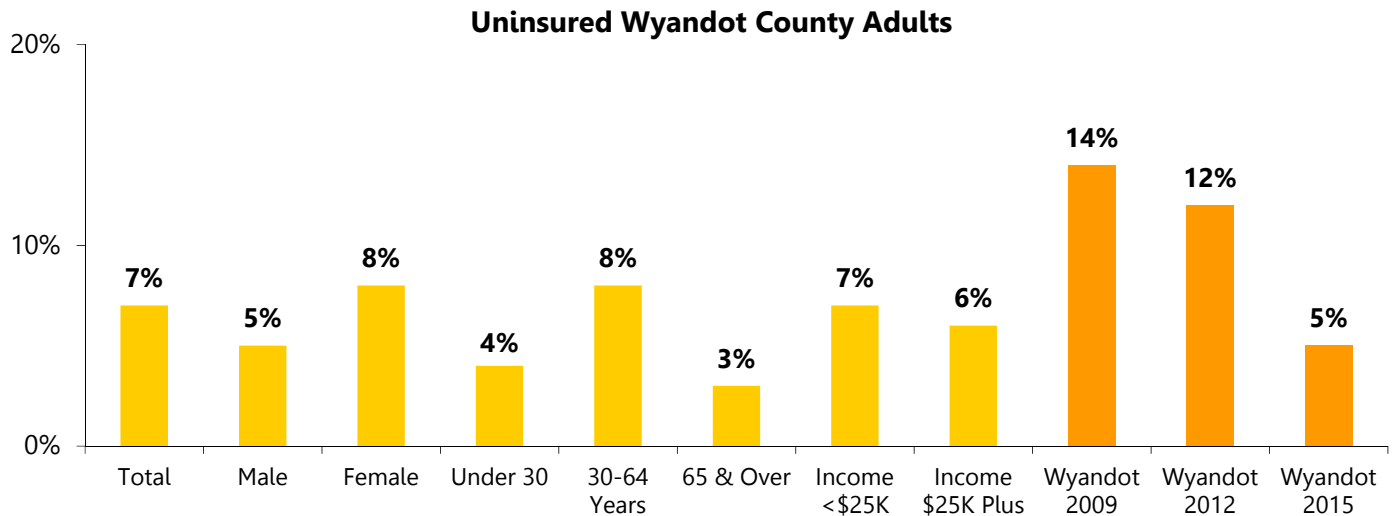
**FIGURE 1.1 | State Health Assessment (SHA) Sources of Information**



## Data Summary | Healthcare Access

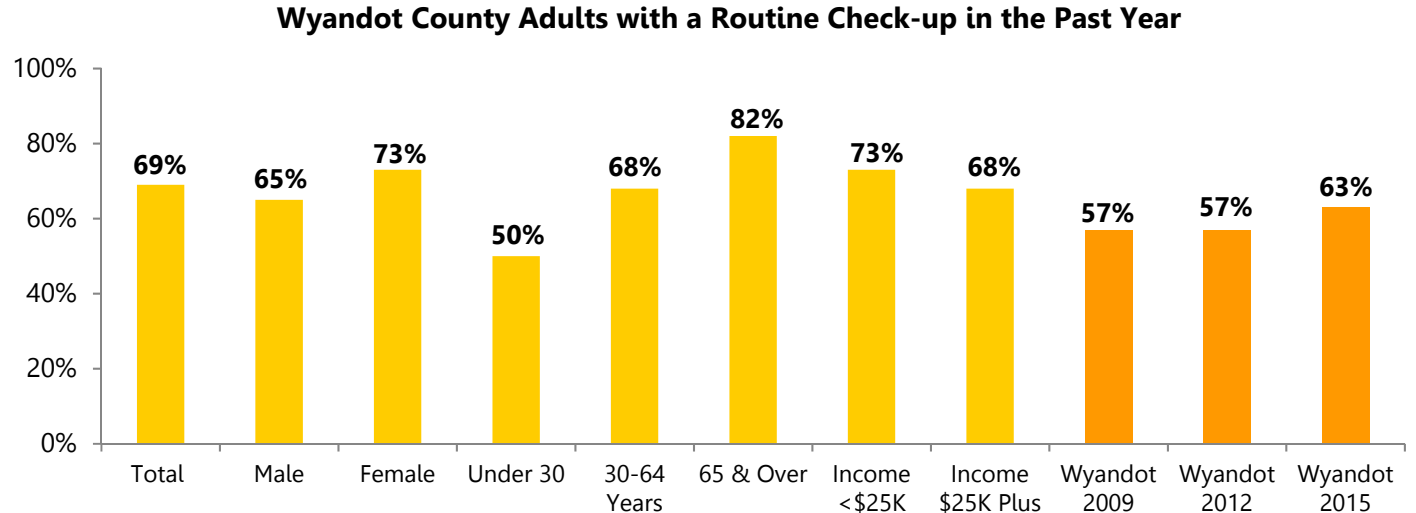
### HEALTHCARE COVERAGE

Seven percent (7%) of Wyandot County adults were without healthcare coverage. The top reason adults gave for being without healthcare coverage was that they could not afford to pay the insurance premiums (48%).



### ACCESS AND UTILIZATION

Sixty-nine percent (69%) of Wyandot County adults had visited a doctor for a routine checkup in the past year. Over three-fifths (64%) of adults went outside of Wyandot County for healthcare services in the past year.



*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

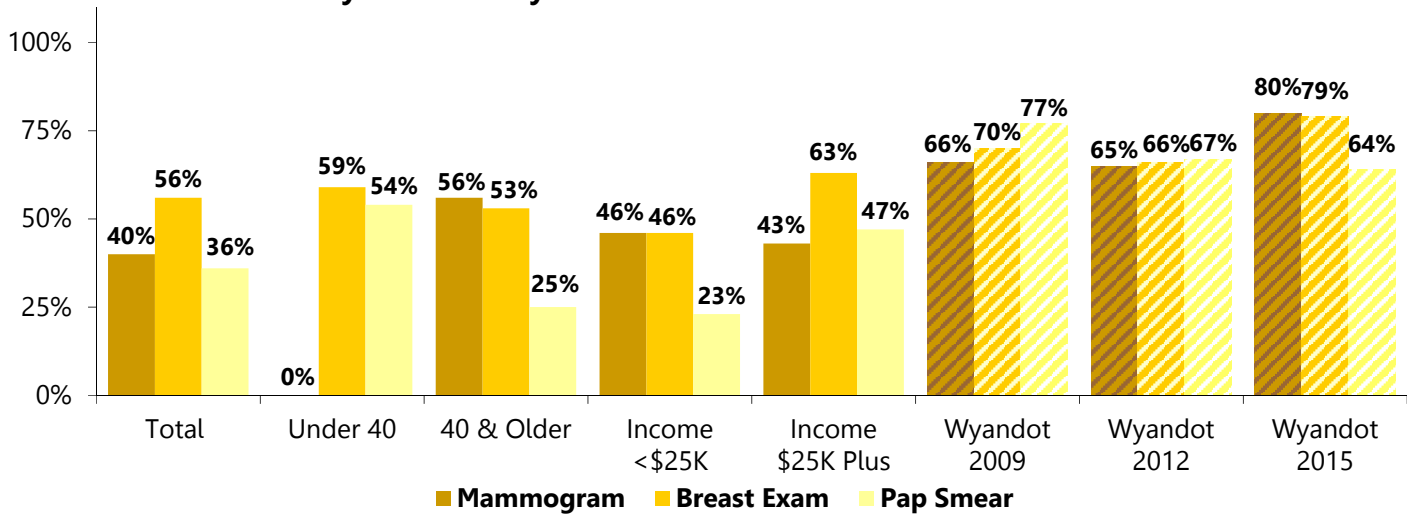
### PREVENTIVE MEDICINE

More than three-fourths (79%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Sixty-seven percent (67%) of Wyandot County adults had the MMR vaccine in their lifetime.

## WOMEN'S HEALTH

In 2018, more than half (56%) of Wyandot County women over the age of 40 reported having a mammogram in the past year. Fifty-six percent (56%) of women ages 19 and over had a clinical breast exam and 36% had a Pap smear to detect cancer of the cervix in the past year. Four percent (4%) of women survived a heart attack and 4% survived a stroke at some time in their life. Nearly half (48%) of Wyandot County women were obese, 38% had high blood cholesterol, 34% had high blood pressure, and 22% were identified as current smokers, known risk factors for cardiovascular diseases.

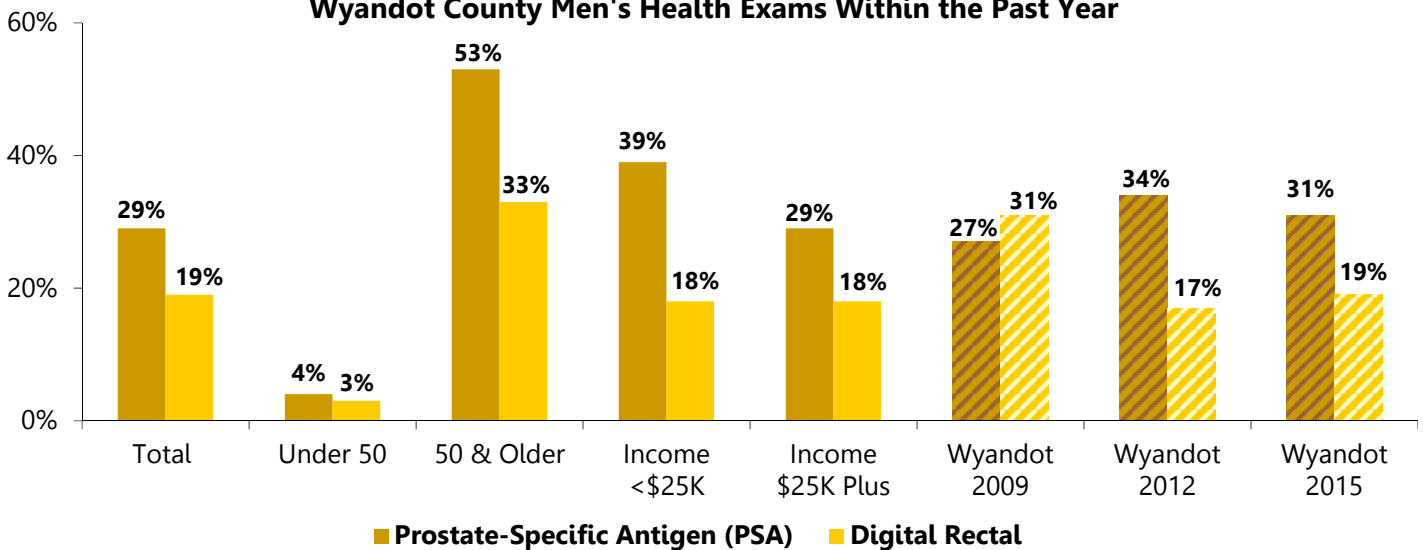
**Wyandot County Women's Health Exams Within the Past Year**



## MEN'S HEALTH

In 2018, 53% of Wyandot County males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. Six percent (6%) of men survived a heart attack and 4% survived a stroke at some time in their life. Forty-five percent (45%) of men had been diagnosed with high blood cholesterol, 42% had high blood pressure, and 16% were identified as current smokers, which, along with obesity (36%), are known risk factors for cardiovascular diseases.

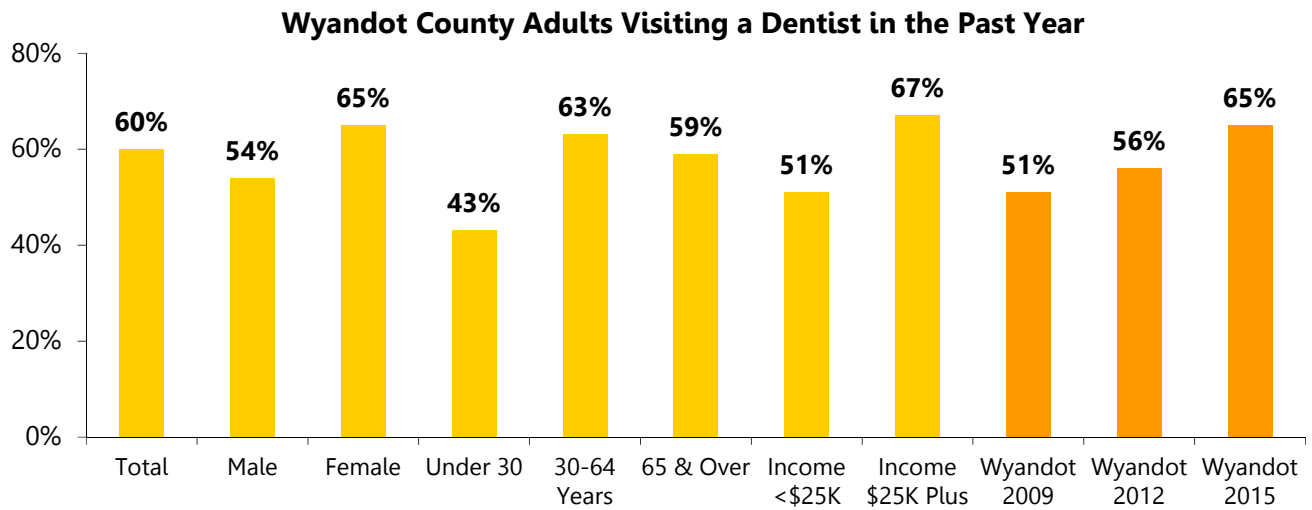
**Wyandot County Men's Health Exams Within the Past Year**



*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

## ORAL HEALTH

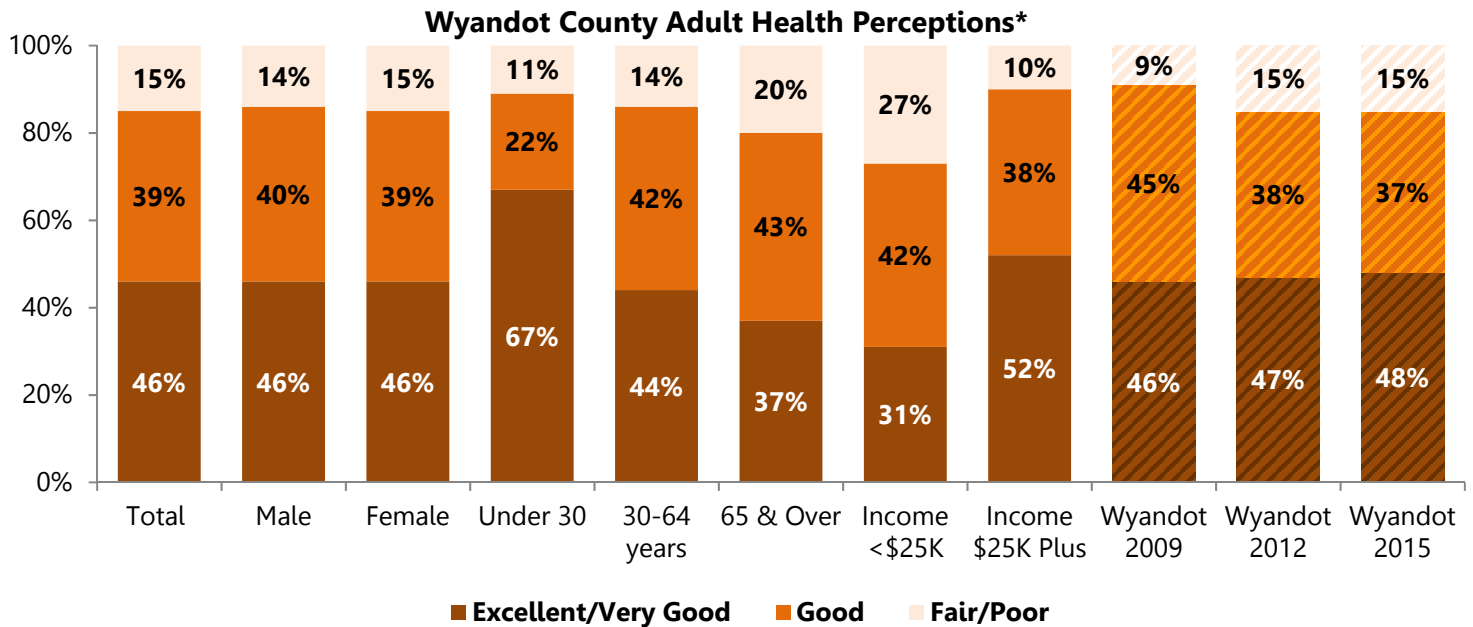
Three-fifths (60%) of Wyandot County adults visited a dentist or dental clinic in the past year. The 2016 BRFSS reported that 68% of Ohio and 66% of U.S. adults had visited a dentist or dental clinic in the previous 12 months.



*Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

**HEALTH STATUS PERCEPTIONS**

In 2018, almost half (46%) of Wyandot County adults rated their health status as excellent or very good. Conversely, 15% of adults described their health as fair or poor, increasing to 27% of those with incomes less than \$25,000.

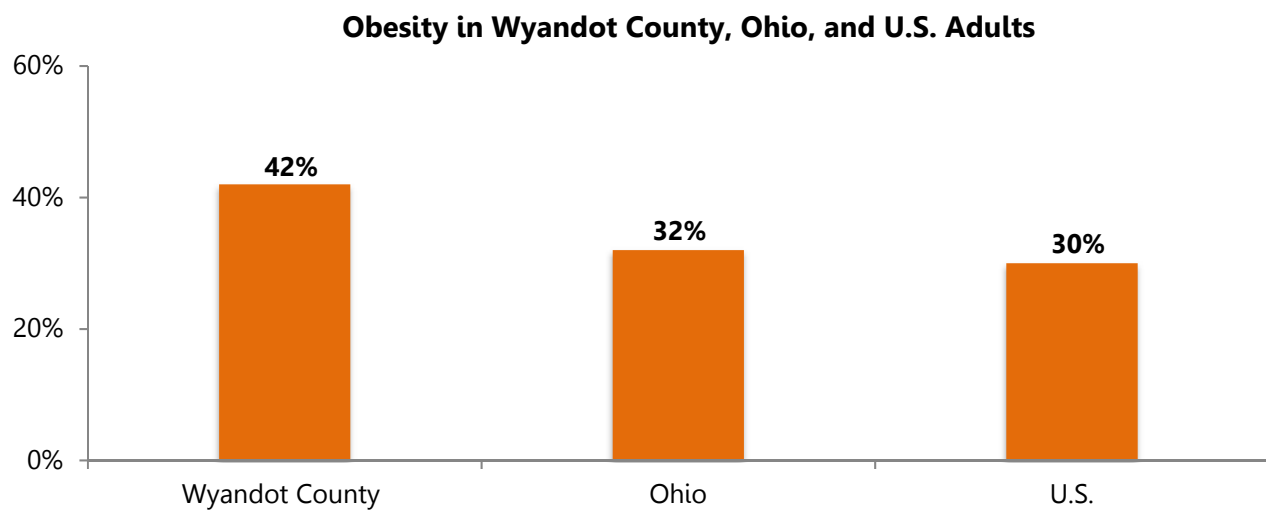


\*Respondents were asked: "Would you say that in general your health is excellent, very good, good, fair or poor?"

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

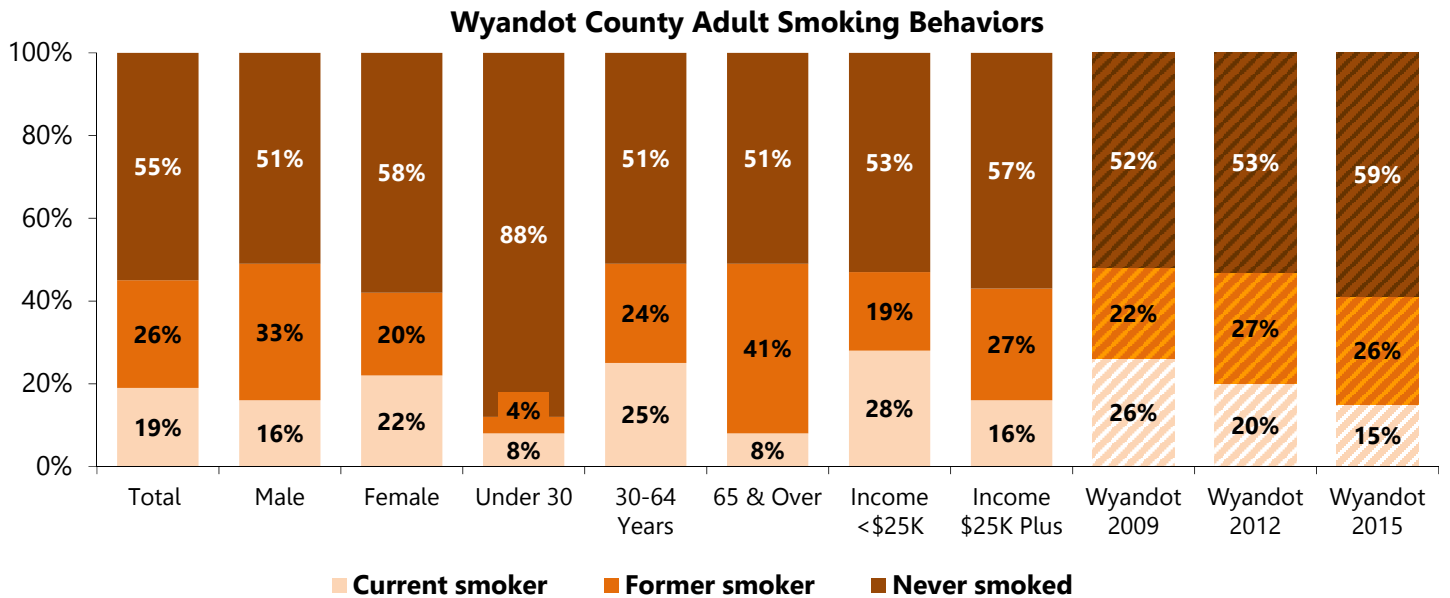
**ADULT WEIGHT STATUS**

Seventy-nine percent (79%) of Wyandot County adults were overweight or obese based on Body Mass Index (BMI). Nearly half (46%) of adults engaged in some type of physical activity or exercise for at least 30 minutes three or more days per week.



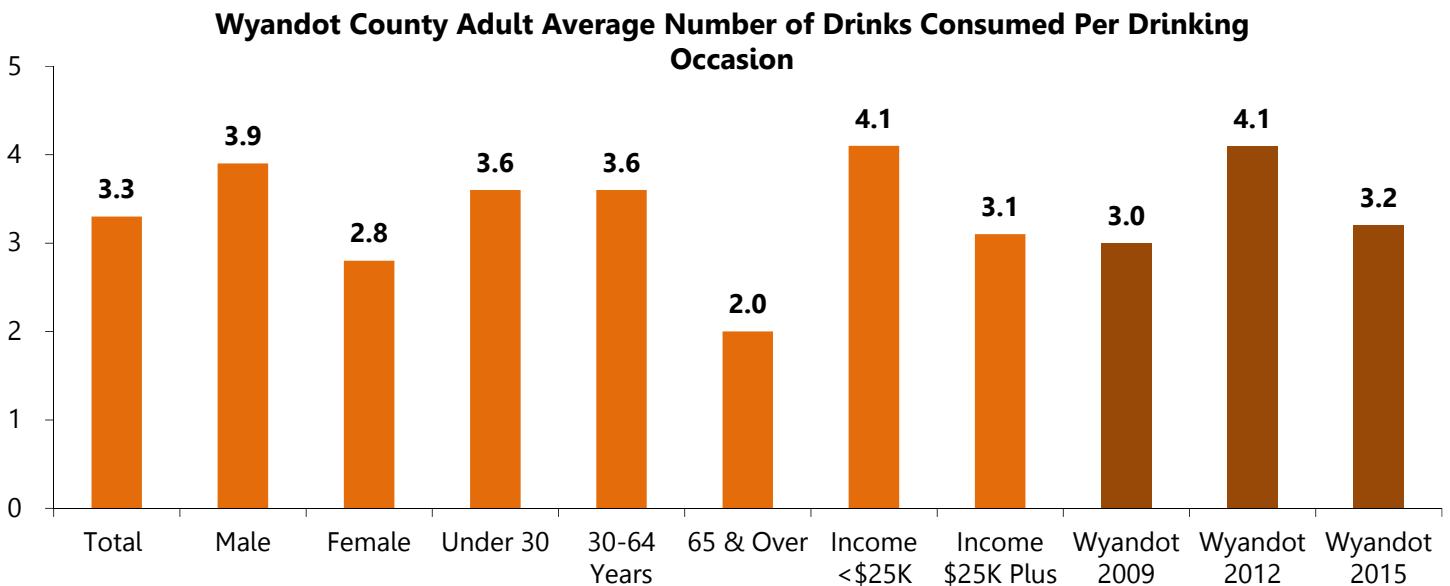
## ADULT TOBACCO USE

In 2018, 19% of Wyandot County adults were current smokers, and 26% were considered former smokers. Seven percent (7%) of adults used e-cigarettes in the past year. Half (50%) of adults did not know if e-cigarette vapor was harmful.



## ADULT ALCOHOL CONSUMPTION

Fifty-six percent (56%) of Wyandot County adults had at least one alcoholic drink in the past month and would be considered current drinkers. Nearly one-quarter (22%) of all adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers.

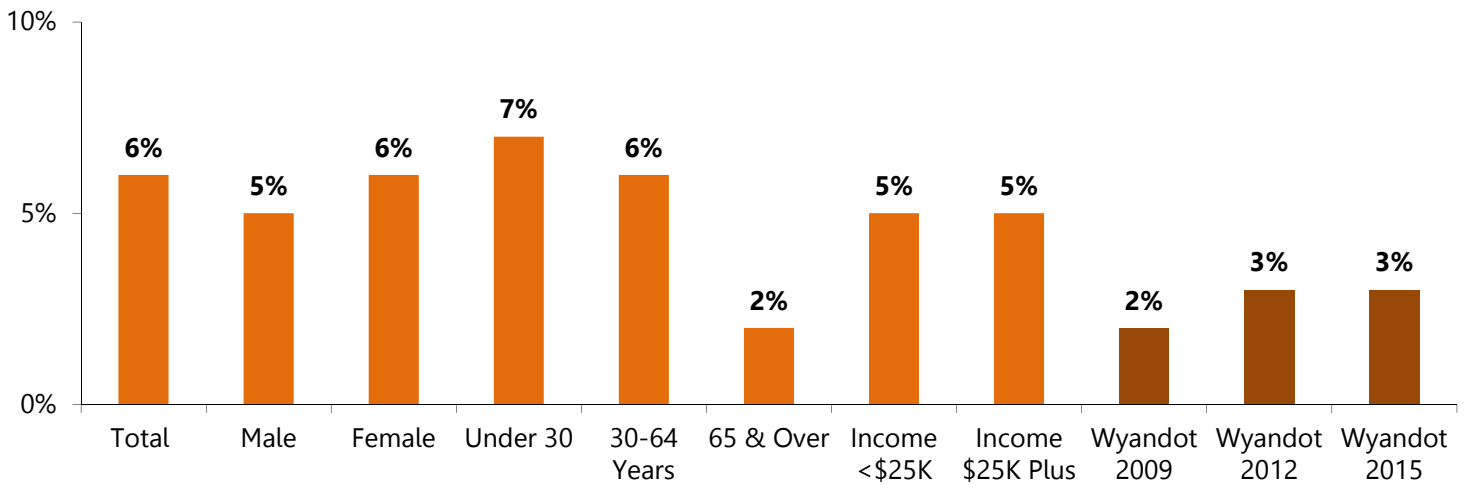


*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

## ADULT DRUG USE

In 2018, 6% of Wyandot County adults had used marijuana during the past 6 months. Seven percent (7%) 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.

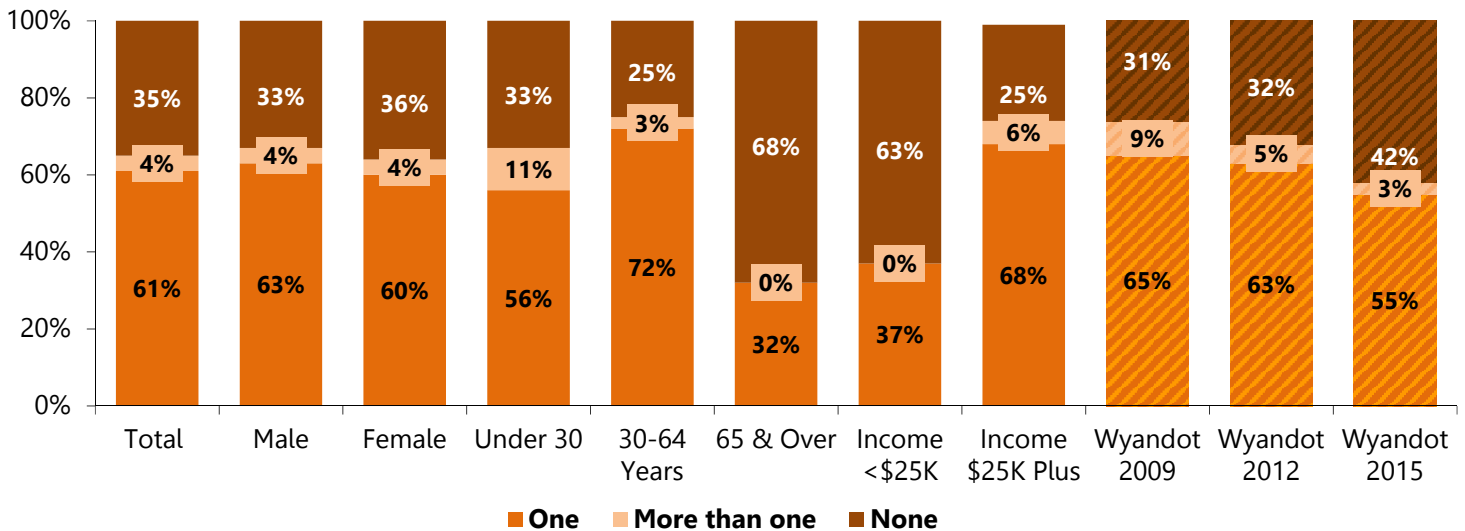
**Wyandot County Adult Marijuana Use in Past 6 Months**



## ADULT SEXUAL BEHAVIOR

In 2018, 65% of Wyandot County adults had sexual intercourse. Four percent (4%) of adults had more than one partner. Eight percent (8%) of adults had been forced to have sexual intercourse when they did not want to, increasing to 14% of females.

**Wyandot County Number of Sexual Partners in the Past Year\***



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

Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

## ADULT MENTAL HEALTH

In 2018, 3% of Wyandot County adults considered attempting suicide. Eleven percent (11%) of Wyandot County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems.

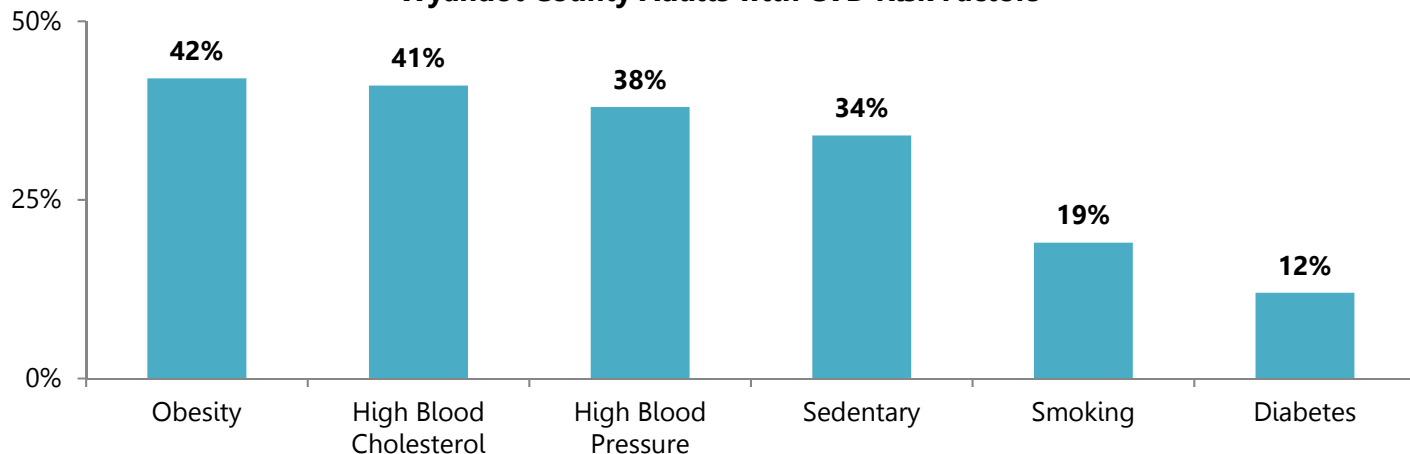


## Data Summary | Chronic Disease

### CARDIOVASCULAR HEALTH

In 2018, 5% of adults had survived a heart attack and 4% had survived a stroke at some time in their life. More than two-fifths (42%) of Wyandot County adults were obese, 41% had high blood cholesterol, 38% had high blood pressure, and 19% were current smokers, four known risk factors for heart disease and stroke.

**Wyandot County Adults with CVD Risk Factors**



### CANCER

In 2018, 15% of Wyandot County adults had been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) Ohio Public Health Data Warehouse indicates that from 2014 to 2016, a total of 168 Wyandot County residents died from cancer, the second leading cause of death in the county.

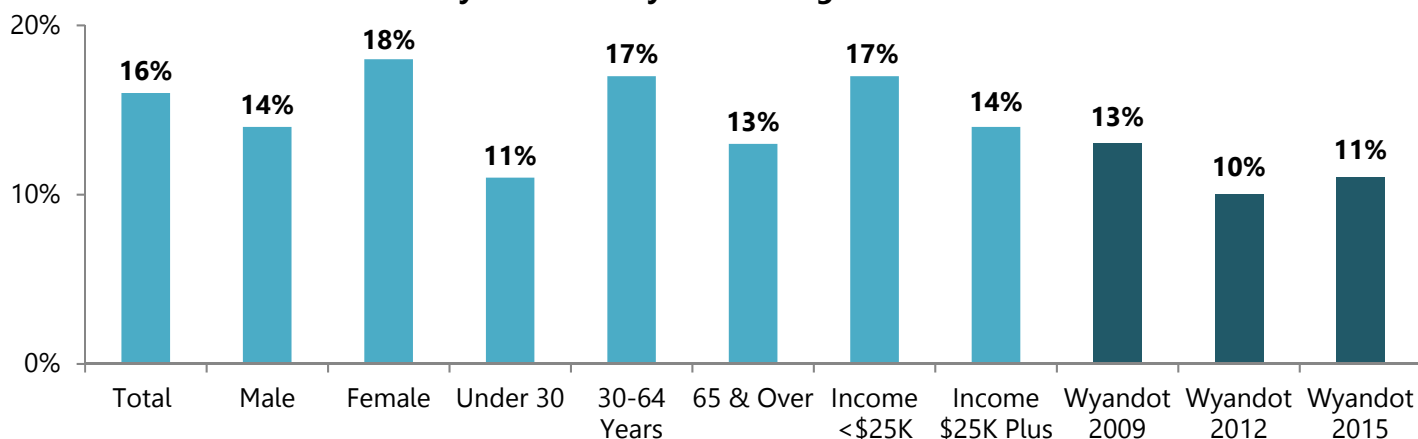
### ARTHRITIS

More than one-third (38%) of Wyandot County adults were diagnosed with arthritis. According to the 2016 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they had arthritis.

### ASTHMA

In 2018, 16% of Wyandot County adults had been diagnosed with asthma.

**Wyandot County Adults Diagnosed with Asthma**

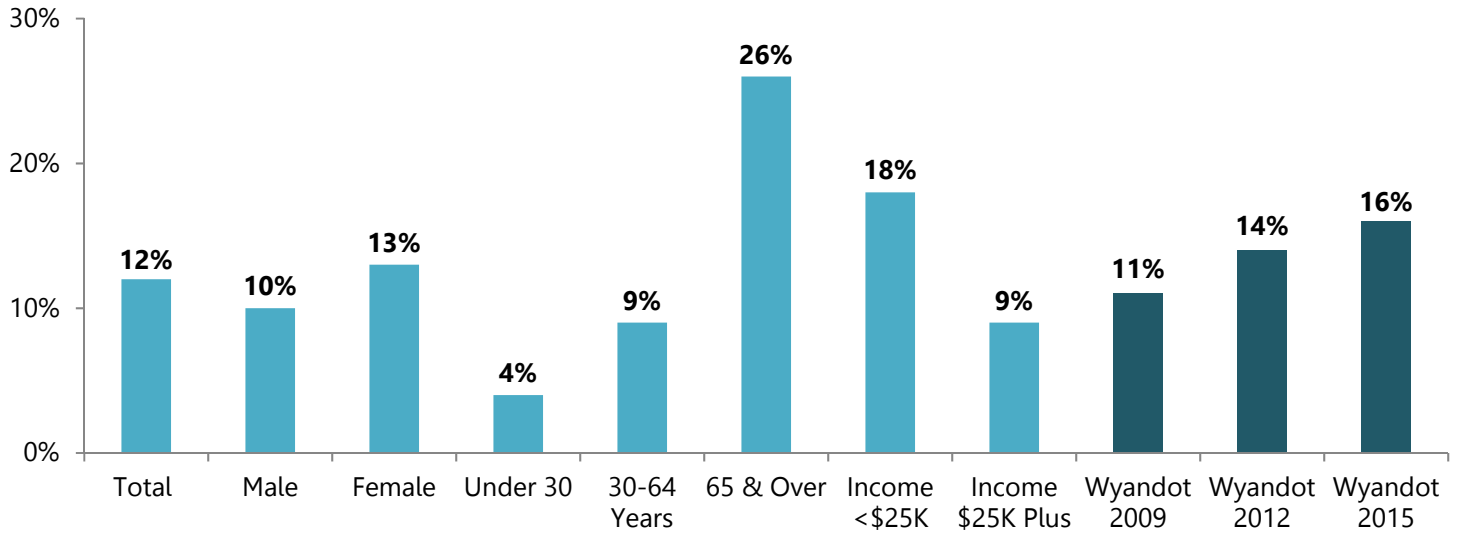


*Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

## DIABETES

In 2018, 12% of Wyandot County adults had been diagnosed with diabetes.

**Wyandot County Adults Diagnosed with Diabetes**

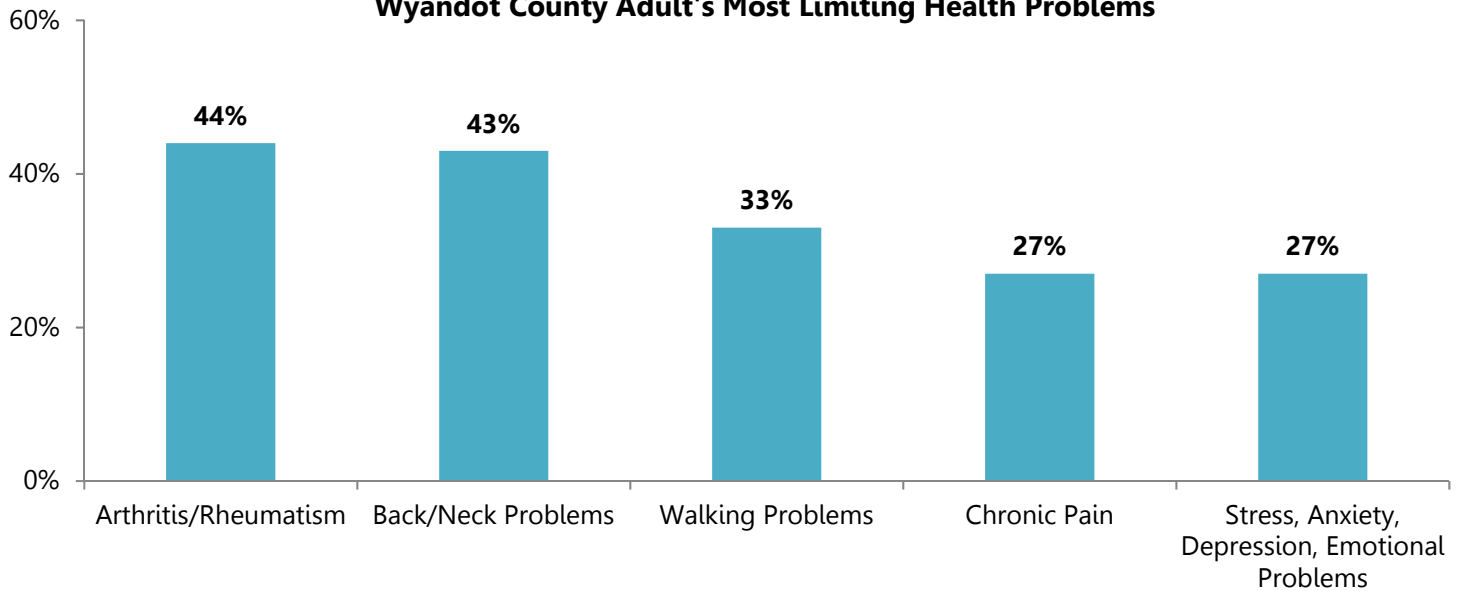


*Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

## QUALITY OF LIFE

In 2018, 28% of Wyandot County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were arthritis (44%); back or neck problems (43%); walking problems (33%); chronic pain (27%); and stress, anxiety, depression, or emotional problems (27%).

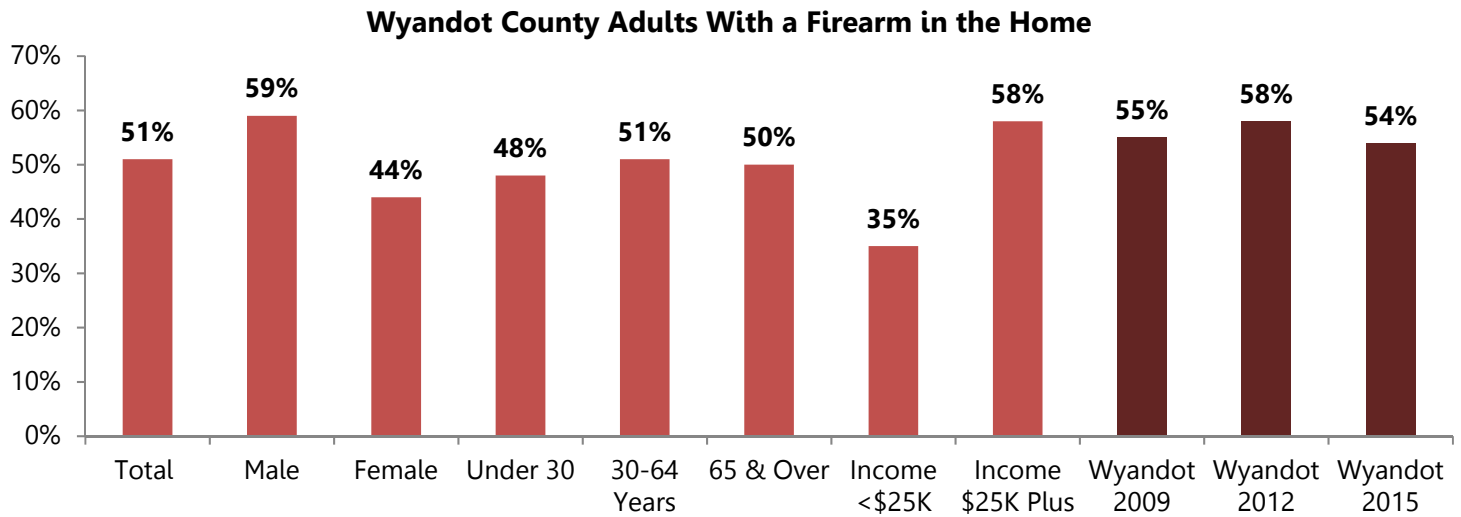
**Wyandot County Adult's Most Limiting Health Problems**



## Data Summary | Social Conditions

### SOCIAL DETERMINANTS OF HEALTH

In 2018, 3% of Wyandot County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Eleven percent (11%) of Wyandot County adults had experienced four or more Adverse Childhood Experiences (ACEs) in their lifetime. Nearly one-fifth (19%) of adults had experienced at least one issue related to food insecurity in the past year.



*Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

### ENVIRONMENTAL HEALTH

Wyandot County adults reported insects and mold (7%) as the top two environmental health issues that threatened their health in the past year. Eighty-five percent (85%) of adults had a working smoke detector in preparation for a disaster.

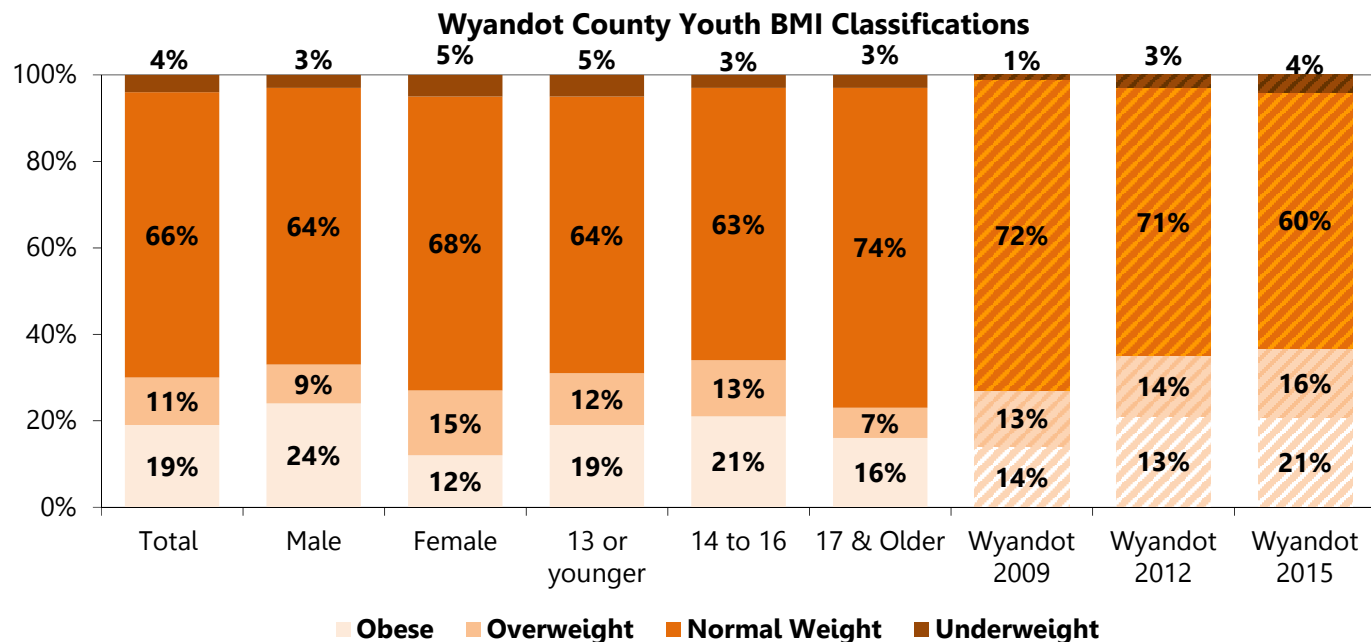
### PARENTING

Nearly three-fourths (74%) of parents discussed bullying with their 6-to-17-year-old in the past year. Eighty-eight percent (88%) of parents took their child to the doctor for regular visits in the past year. Seven percent (7%) of Wyandot County parents did not believe schools should offer sex education classes.

## Data Summary | Youth Health

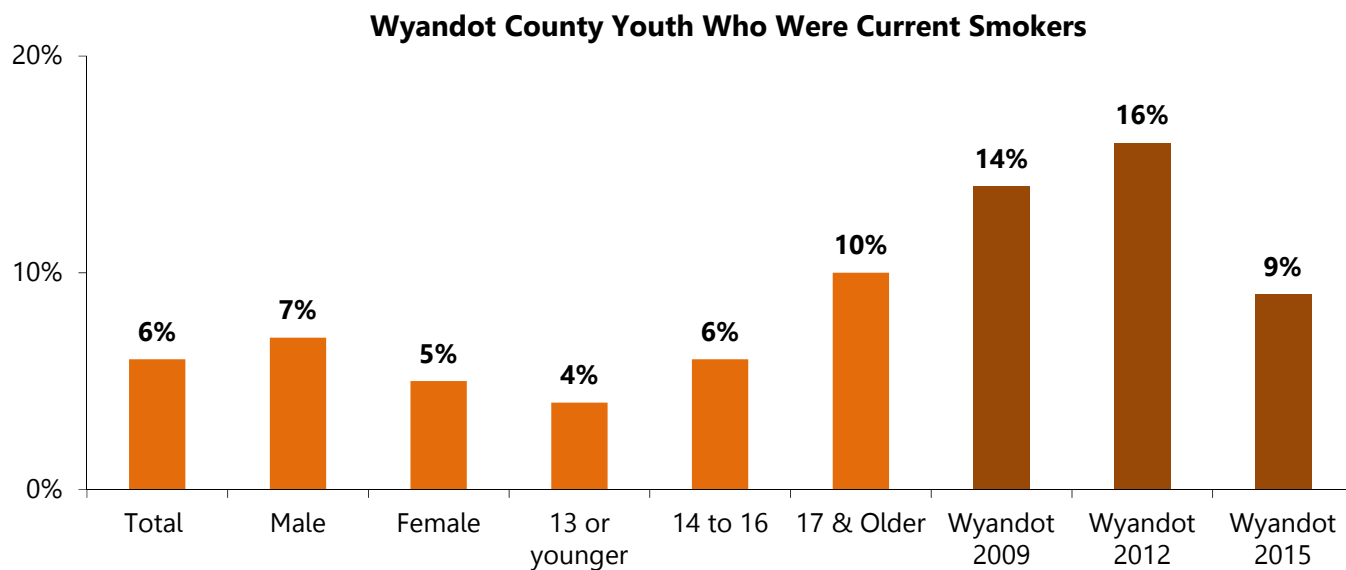
### YOUTH WEIGHT STATUS

Nearly one-fifth (19%) of Wyandot County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 32% of Wyandot County youth reported that they were slightly or very overweight. Sixty-nine percent (69%) of youth exercised for 60 minutes on three or more days per week.



### YOUTH TOBACCO USE

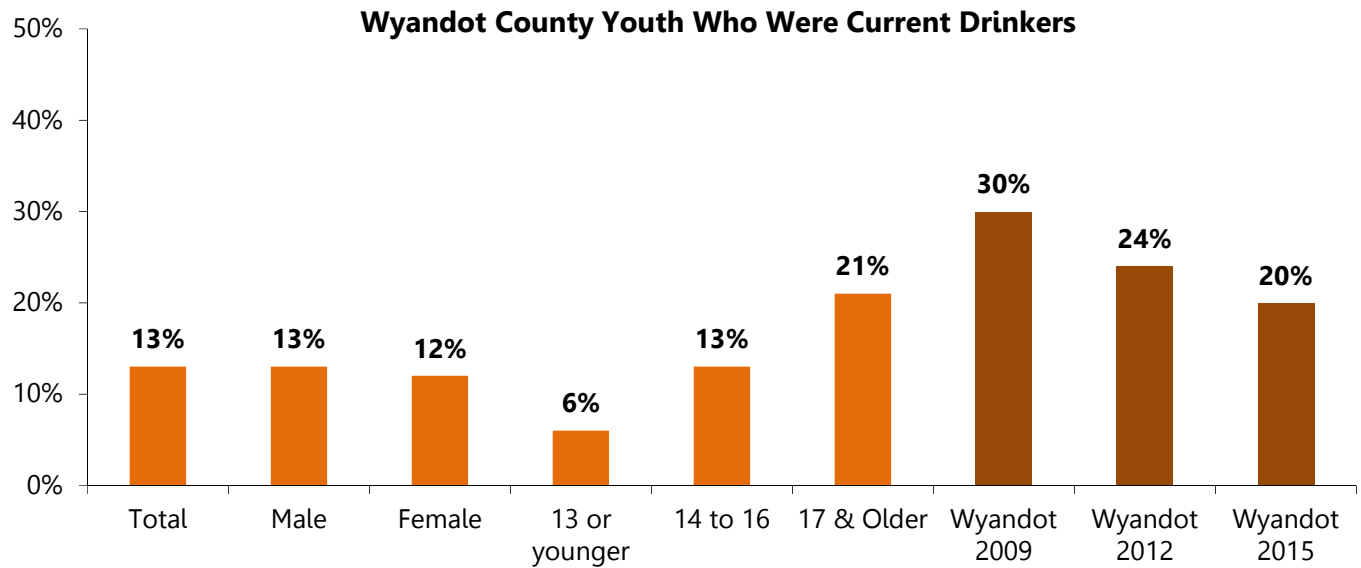
Six percent (6%) of Wyandot County youth were current smokers, increasing to 10% of those ages 17 and older. Twenty-three percent (23%) of those who had smoked a whole cigarette did so at 10 years old or younger.



*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

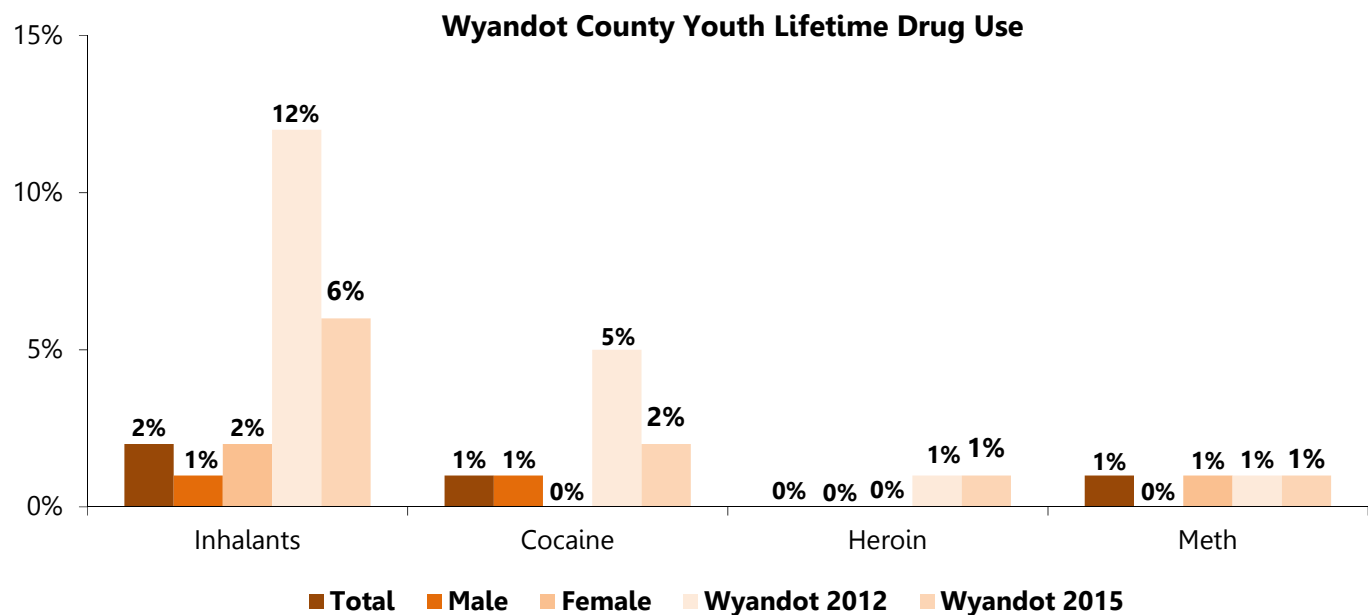
## YOUTH ALCOHOL CONSUMPTION

Over two-fifths (43%) of Wyandot County youth had drunk at least one drink of alcohol in their life, increasing to 65% of youth 17 and older. Thirteen percent (13%) of youth had at least one drink in the past 30 days, defining them as a current drinker. Of those who drank, 70% were defined as binge drinkers, increasing to 80% of those ages 17 and older.



## YOUTH DRUG USE

In 2018, 3% of Wyandot County youth had used marijuana at least once in the past 30 days, increasing to 8% of those ages 17 and over. Two percent (2%) of youth used prescription drugs not prescribed for them in the past month.

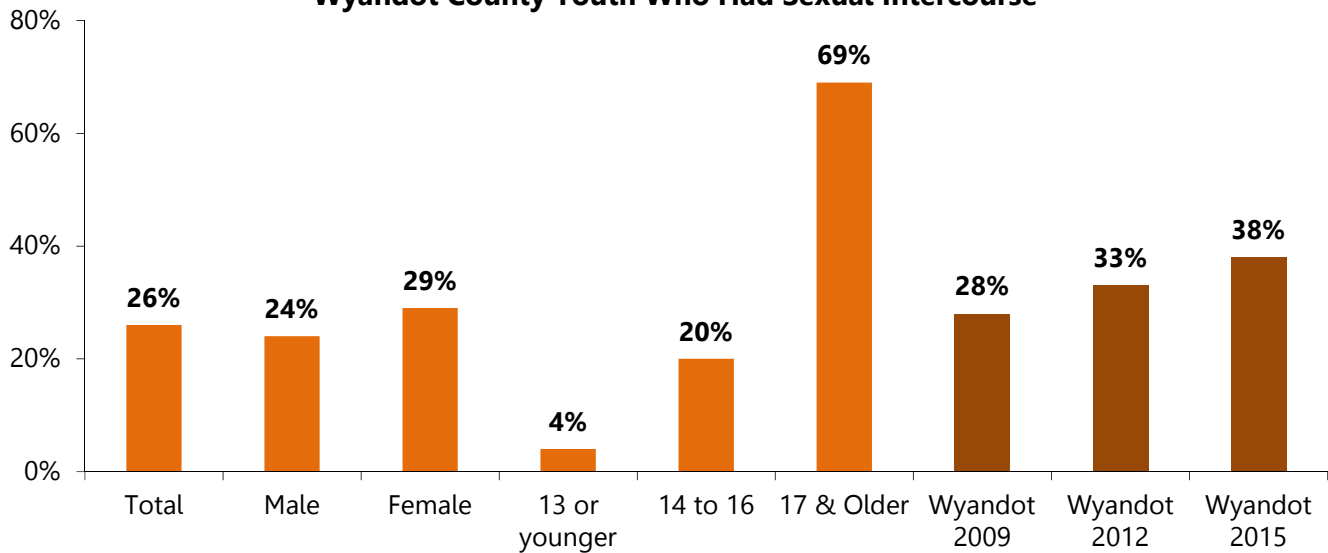


*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

## YOUTH SEXUAL BEHAVIOR

In 2018, 26% of Wyandot County youth had sexual intercourse. One-quarter (25%) of sexually active youth had four or more sexual partners. Nine percent (9%) of youth engaged in intercourse without a reliable method of protection. Nine percent (9%) of youth had not been taught about pregnancy prevention, sexually transmitted diseases, HIV/AIDS, or the use of condoms.

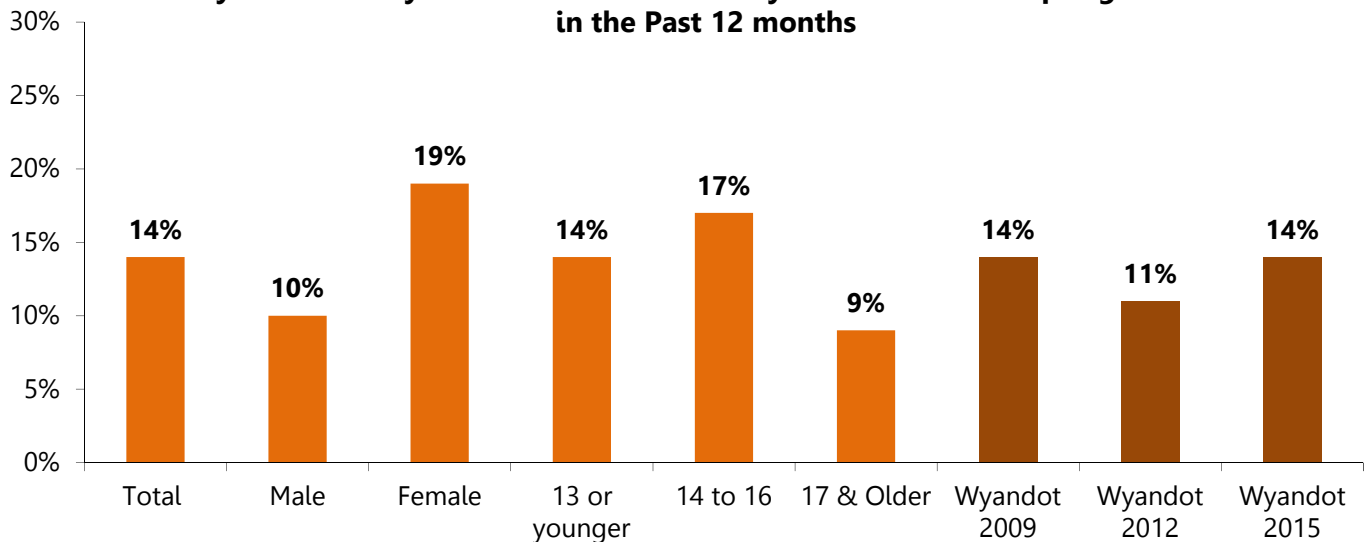
**Wyandot County Youth Who Had Sexual Intercourse**



## YOUTH MENTAL HEALTH

Fourteen percent (14%) of youth had seriously considered attempting suicide in the past year, and 11% attempted suicide in the past year. The top three causes for anxiety, stress or depression for Wyandot County youth were academic success (33%), fighting with friends (33%), and self-image (27%).

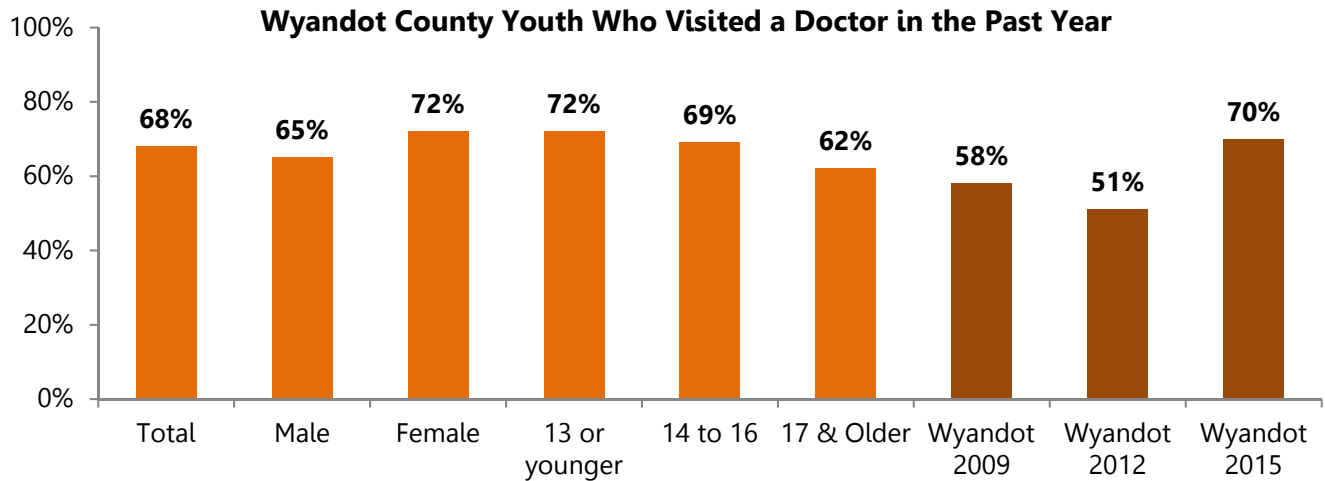
**Wyandot County Youth Who Had Seriously Considered Attempting Suicide in the Past 12 months**



*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

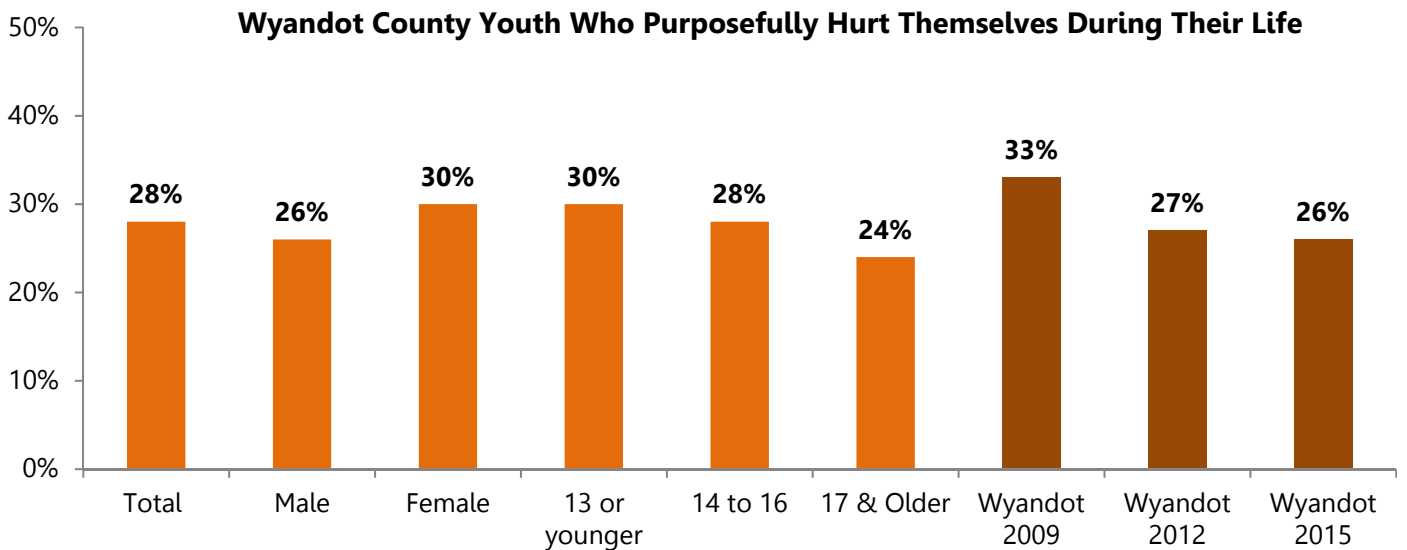
## YOUTH SOCIAL DETERMINANTS OF HEALTH

Nearly one-quarter (23%) of youth had three or more adverse childhood experiences (ACEs). Twenty-seven percent (27%) of Wyandot County youth drivers had texted while driving in the past 30 days. More than half of youth (54%) always wore a seatbelt when riding in a car driven by someone else.



## YOUTH VIOLENCE

Eleven percent (11%) of Wyandot County youth carried a weapon (such as a gun, knife or club) in the past month. Nearly one-fifth (19%) of youth had been involved in a physical fight, increasing to 23% of males. Forty-four percent (44%) of youth had been bullied in the past year.













*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

## YOUTH PERCEPTIONS


In 2018, 52% of Wyandot County youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day. Twenty-one percent (21%) of youth thought that there was no risk in harming themselves physically or in other ways if they smoke marijuana once or twice a week. Sixty-seven percent (67%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.

# Adult Trend Summary



Adult Variables	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Health Status</b>						
Rated health as excellent or very good	46%	47%	48%	46%	51%	52%
Rated general health as fair or poor 	9%	15%	15%	15%	18%	17%
<b>Healthcare Coverage, Access, and Utilization</b>						
Uninsured	14%	12%	5%	7%	7%	10%
Visited a doctor for a routine checkup in the past year 	57%	57%	63%	69%	75%	71%
<b>Arthritis, Asthma, &amp; Diabetes</b>						
Had been diagnosed with diabetes 	11%	14%	16%	12%	11%	11%
Had been diagnosed with arthritis	30%	37%	37%	38%	31%	26%
Had been diagnosed with asthma 	13%	10%	11%	16%	14%	14%
<b>Cardiovascular Health</b>						
Had angina or coronary heart disease 	6%	8%	5%	6%	5%	4%
Had a heart attack 	3%	5%	4%	5%	5%	4%
Had a stroke	1%	4%	8%	4%	4%	3%
Had been diagnosed with high blood pressure 	40%	44%	46%	38%	34%*	31%*
Had been diagnosed with high blood cholesterol	37%	41%	43%	41%	37%*	36%*
Had blood cholesterol checked within the past 5 years	63%	75%	79%	81%	78%*	78%*
<b>Weight Status</b>						
Overweight	39%	37%	29%	37%	35%	35%
Obese 	33%	40%	48%	42%	32%	30%
<b>Alcohol Consumption</b>						
Current drinker (drank alcohol at least once in the past month)	45%	47%	49%	56%	53%	54%
Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days) 	22%	19%	18%	22%	18%	17%
<b>Tobacco Use</b>						
Current smoker (currently smoke some or all days) 	26%	20%	15%	19%	23%	17%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	22%	27%	26%	26%	24%	25%
Tried to quit smoking (on at least one day in the past year)	82%	78%	46%	38%	N/A	N/A
<b>Drug Use</b>						
Adults who used marijuana in the past 6 months	2%	3%	3%	6%	N/A	N/A
Adults who used recreational drugs in the past 6 months	3%	3%	0%	3%	N/A	N/A
Adults who misused prescription medication in the past 6 months	2%	7%	11%	7%	N/A	N/A
<b>Sexual Behavior</b>						
Had more than one sexual partner in past year	5%	5%	3%	4%	N/A	N/A
Had ever engaged in sexual activity following alcohol or other drug use	N/A	12%	11%	13%	N/A	N/A

N/A - Not Available

\*2015 BRFSS Data

 Indicates alignment with Ohio State Health Assessment (SHA)




Adult Variables	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Preventive Medicine</b>						
<b>Had a flu shot in the past year</b> (age 65 and older) 	59%	N/A	71%	74%	57%	58%
<b>Had a pneumonia vaccine</b> (age 65 and older)	50%	47%	59%	79%	75%	73%
<b>Had a clinical breast exam in the past two years</b> (age 40 and older)	70%	66%	79%	67%	N/A	N/A
<b>Had a mammogram in the past two years</b> (age 40 and older)	66%	66%	80%	73%	74%	72%
<b>Had a Pap smear in the past three years</b>	77%	67%	64%	58%	82%*	80%*
<b>Had a PSA test in within the past year</b> (age 40 and over)	N/A	61%	58%	58%	39%	40%
<b>Had a digital rectal exam within the past year</b> (age 50 and over)	41%	30%	34%	33%	N/A	N/A
<b>Quality of Life</b>						
<b>Limited in some way because of physical, mental or emotional problem</b>	17%	27%	18%	28%	21%*	21%*
<b>Mental Health</b>						
<b>Considered attempting suicide in the past year</b>	1%	2%	2%	3%	N/A	N/A
<b>Oral Health</b>						
<b>Adults who had visited the dentist in the past year</b> 	51%	56%	65%	60%	68%	66%
<b>Adults who had one or more permanent teeth removed</b>	54%	49%	50%	47%	45%	43%
<b>Adults 65 years and older who had all their permanent teeth removed</b>	16%	19%	17%	18%	17%	14%


N/A - Not Available

\*2015 BRFSS

\*BRFSS for both Ohio and U.S. reports for women ages 21-65

 Indicates alignment with Ohio SHA


# Youth Trend Summary

Youth Variables	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Weight Control</b>							
<b>Obese</b> 	14%	21%	21%	19%	18%	13%	14%
<b>Overweight</b>	13%	14%	16%	11%	11%	16%	16%
<b>Described themselves as slightly or very overweight</b>	27%	32%	33%	32%	33%	28%	32%
<b>Tried to lose weight</b>	47%	46%	47%	52%	50%	47%	46%
<b>Exercised to lose weight</b> (in the past 30 days)	50%	53%	52%	60%	58%	N/A	N/A
<b>Ate less food, fewer calories, or foods lower in fat to lose weight</b> (in the past 30 days)	25%	28%	31%	34%	37%	N/A	N/A
<b>Went without eating for 24 hours or more</b> (in the past 30 days)	3%	5%	5%	4%	6%	10%	13%#
<b>Took diet pills, powders, or liquids without a doctor's advice</b> (in the past 30 days)	2%	2%	2%	1%	2%	5%	5%#
<b>Vomited or took laxatives</b> (in the past 30 days)	1%	2%	1%	2%	3%	5%	4%#
<b>Physically active at least 60 minutes per day on every day in past week</b>	28%	26%	35%	29%	33%	26%	27%
<b>Physically active at least 60 minutes per day on 5 or more days in past week</b>	51%	51%	60%	52%	58%	48%	49%
<b>Did not participate in at least 60 minutes of physical activity on any day in past week</b>	13%	11%	9%	18%	17%	13%	14%
<b>Watched 3 or more hours per day of television</b> (on an average school day)	41%	49%	36%	30%	27%	28%	25%
<b>Tobacco Use</b>							
<b>Ever tried cigarette smoking</b> (even one or two puffs)	36%	35%	26%	22%	31%	52%*	32%
<b>Currently smoker</b> (smoked on at least 1 day during the past 30 days)	14%	16%	9%	6%	9%	15%	11%
<b>Smoked a whole cigarette for the first time before the age of 13</b> (of all youth)	12%	11%	6%	7%	7%	14%*	7%
<b>Usually obtained cigarettes by buying them in a store or gas station</b> (of current smokers)	N/A	26%	9%	15%	20%	N/A	13%
<b>Alcohol Consumption</b>							
<b>Ever drank alcohol</b> (at least one drink of alcohol on at least 1 day during their life)	60%	57%	48%	43%	55%	71%*	63%
<b>Current Drinker</b> (at least one drink of alcohol on at least 1 day during the past 30 days)	30%	24%	20%	13%	18%	30%	33%
<b>Binge drinker</b> (drank 5 or more drinks within a couple of hours on at least 1 day during the past 30 days)	17%	16%	13%	9%	13%	16%	18%
<b>Drank for the first time before age 13</b> (of all youth)	30%	19%	12%	17%	13%	13%	17%
<b>Rode with a driver who had been drinking alcohol</b> (in a car or other vehicle on 1 or more occasion during the past 30 days)	21%	21%	13%	11%	6%	17%	20%
<b>Obtained the alcohol they drank by someone giving it to them</b> (of youth drinkers)	N/A	36%	40%	38%	37%	38%	44%

N/A – Not Available

\*Comparative YRBS data for Ohio is 2011

#Comparative data for U.S. is 2013

 Indicates alignment with Ohio SHA

Youth Variables	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Drug Use</b>							
<b>Used marijuana in the past month</b>	9%	6%	7%	3%	5%	21%	22%
<b>Prescription medication abuse in the past month</b>	N/A	7%	5%	2%	1%	N/A	N/A
<b>Ever used methamphetamines</b> (in their lifetime)	1%	1%	1%	1%	1%	N/A	3%
<b>Ever used cocaine</b> (in their lifetime)	4%	5%	2%	1%	<1%	4%	5%
<b>Ever used heroin</b> (in their lifetime)	1%	1%	1%	0%	0%	2%	2%
<b>Ever used inhalants</b> (in their lifetime)	8%	12%	6%	2%	1%	9%	7%
<b>Ever took steroids without a doctor's prescription</b> (in their lifetime)	N/A	N/A	N/A	0%	0%	3%	4%
<b>Ever used ecstasy</b> (also called MDMA in their lifetime)	N/A	3%	3%	1%	1%	N/A	5%
<b>Were offered, sold, or given an illegal drug on school property</b> (in the past 12 months)	5%	8%	6%	4%	5%	20%	22%
<b>Sexual Behavior*</b>							
<b>Ever had sexual intercourse</b>	28%	33%	38%	26%	42%	43%	41%
<b>Had sexual intercourse with four or more persons</b> (of all youth during their life)	7%	8%	7%	7%	11%	12%	12%
<b>Had sexual intercourse before the age 13</b> (for the first time of all youth)	4%	4%	2%	4%	2%	4%	4%
<b>Used a condom</b> (during last sexual intercourse)	67%	67%	67%	59%	61%	51%	57%
<b>Used birth control pills</b> (during last sexual intercourse)	49%	44%	46%	35%	38%	24%	18%
<b>Used an IUD</b> (during last sexual intercourse)	N/A	N/A	3%	2%	2%	2%	3%
<b>Used a shot, patch or birth control ring</b> (during last sexual intercourse)	N/A	N/A	17%	11%	12%	8%	5%
<b>Did not use any method to prevent pregnancy during last sexual intercourse</b>	7%	8%	7%	9%	9%	12%	14%
<b>Mental Health</b>							
<b>Felt sad or hopeless</b> (almost every day for 2 or more weeks in a row so that they stopped doing some usual activities in the past 12 months)	28%	18%	20%	29%	30%	26%	30%
<b>Seriously considered attempting suicide</b> (in the past 12 months)	14%	11%	14%	14%	16%	14%	18%
<b>Attempted suicide</b> (in the past 12 months)	6%	6%	4%	11%	13%	6%	9%
<b>Social Determinants of Health</b>							
<b>Always wore a seatbelt</b> (when riding in a car or other vehicle driven by someone else)	39%	44%	46%	54%	52%	N/A	N/A
<b>Rarely or never wore a seatbelt</b> (when riding in a car or other vehicle driven by someone else)	10%	12%	9%	5%	5%	8%	6%
<b>Visited a dentist within the past year</b> (for a check-up, exam, teeth cleaning, or other dental work)	64%	67%	77%	71%	72%	75%	74%
<b>Visited a doctor for a routine checkup in the past year</b>	58%	51%	70%	68%	65%	N/A	N/A

N/A – Not Available

\*Only students in grades 7<sup>th</sup>-12<sup>th</sup> were asked sexual health questions in 2012 and 2015

Youth Variables	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Violence</b>							
<b>Carried a weapon</b> (in the past 30 days)	14%	14%	9%	11%	9%	14%	16%
<b>Were in a physical fight</b> (in the past 12 months)	26%	26%	16%	19%	16%	20%	23%
<b>Did not go to school because they felt unsafe</b> (at school or on their way to or from school in the past 30 days)	4%	7%	3%	7%	7%	5%	6%
<b>Threatened or injured with a weapon on school property</b> (in the past 12 months)	5%	7%	5%	11%	12%	N/A	6%
<b>Experienced physical dating violence</b> (including being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with in the past 12 months)	7%	7%	4%	2%	3%	N/A	10%
<b>Hit, slapped, or physically hurt on purpose by an adult or caregiver in past year</b>	10%	6%	6%	3%	2%	N/A	N/A
<b>Electronically bullied</b> (in the past year)	9%	11%	10%	11%	9%	15%	16%
<b>Bullied</b> (in the past year)	47%	45%	45%	44%	40%	N/A	N/A
<b>Were bullied on school property</b> (during the past 12 months)	N/A	N/A	28%	30%	26%	21%	20%
<b>Purposefully hurt themselves in their life</b>	33%	27%	26%	28%	26%	N/A	N/A

N/A – Not Available

# Healthcare Access: Healthcare Coverage

## Key Findings

Seven percent (7%) of Wyandot County adults were without healthcare coverage. The top reason adults gave for being without healthcare coverage was that they could not afford to pay the insurance premiums (48%).

## Health Coverage

- In 2018, 93% Wyandot County adults had healthcare coverage.
- In the past year, 7% of adults were uninsured. The 2016 BRFSS reported uninsured prevalence rates as 7% for Ohio and 10% for the U.S.
- Six percent (6%) of adults with children did not have healthcare coverage, compared to 4% of those who did not have children living in their household.

### 7% of Wyandot County adults were uninsured.

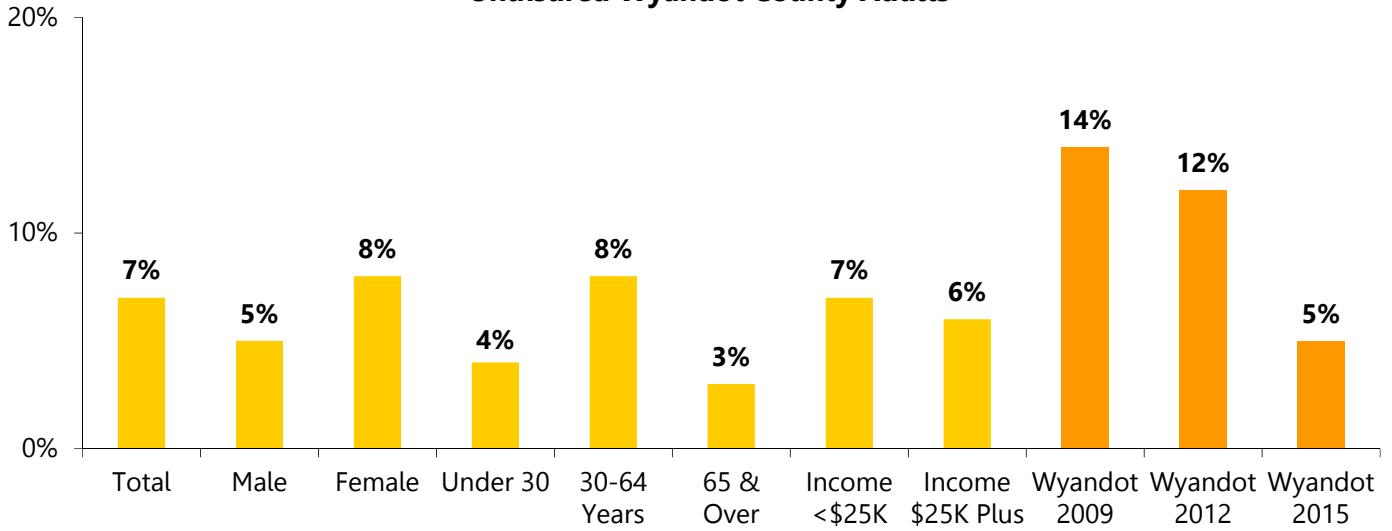
- Adults used the following types of health coverage: employer (52%); Medicare (23%); someone else's employer (8%); Medicaid or medical assistance (6%); self-paid plan (6%); Health Insurance Marketplace (2%); military or VA (1%); multiple, including private sources (1%); and multiple, including government sources (1%).
- Wyandot County adult healthcare coverage included the following: medical (95%), prescription coverage (88%), immunizations (73%), preventive health (73%), Wyandot County Physicians (72%), outpatient therapy (68%), vision (61%), dental (59%), mental health (50%), durable medical equipment (37%), alcohol and drug treatment (33%), skilled nursing/assisted living (28%), home care (25%), hospice (21%), and transportation (11%).
- The top 3 reasons uninsured adults gave for being without healthcare coverage were:
  - They could not afford to pay the insurance premiums (48%)
  - They lost their job or changed employers (31%)
  - Their employer does not offer/stopped offering coverage (17%)

*Note: Percentages do not equal 100% because respondents could select more than one reason*

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Uninsured</b>	14%	12%	5%	7%	7%	10%

The following graph shows the percentages of Wyandot County adults who were uninsured. Examples of how to interpret the information in the graph include: 7% of all Wyandot County adults were uninsured, including 7% of adults with incomes less than \$25,000 and 4% of those under age 30. The pie chart shows sources of Wyandot County adults' healthcare coverage.

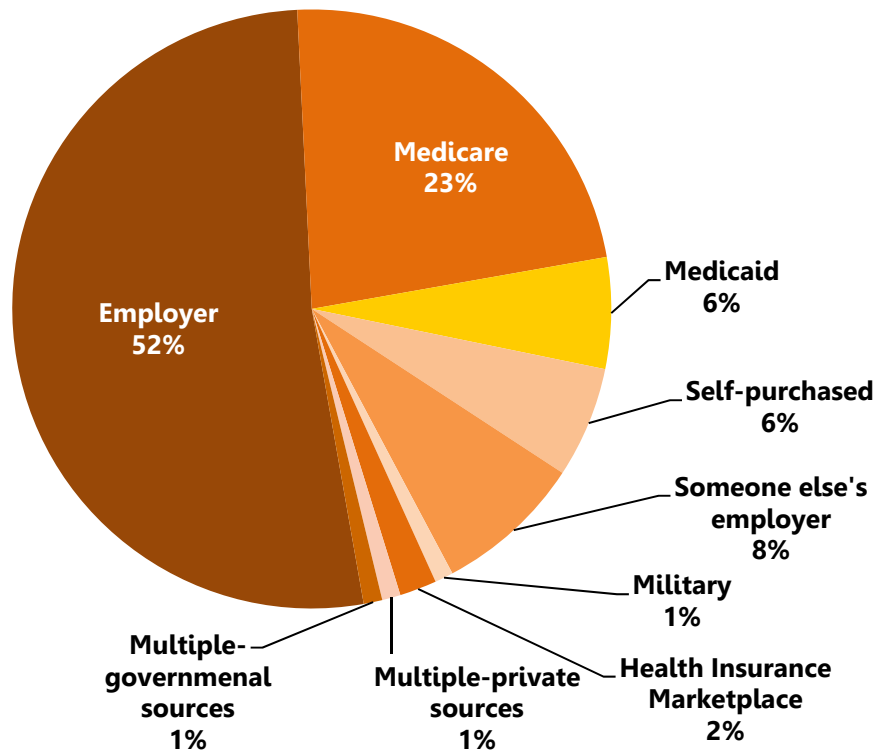
### Uninsured Wyandot County Adults



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

**7% of Wyandot County adults with incomes less than \$25,000 were uninsured.**

### Source of Health Coverage for Wyandot County Adults



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

Health Coverage Includes:	Yes	No	Don't Know
Medical	95%	1%	4%
Prescription Coverage	88%	7%	5%
Immunizations	73%	5%	22%
Preventive Health	73%	4%	23%
Wyandot County Physicians	72%	7%	21%
Outpatient Therapy	68%	3%	29%
Vision	61%	32%	7%
Dental	59%	35%	6%
Mental Health	50%	5%	45%
Durable Medical Equipment	37%	8%	55%
Alcohol and Drug Treatment	33%	12%	55%
Skilled Nursing/Assisted Living	28%	8%	64%
Home Care	25%	11%	64%
Hospice	21%	9%	70%
Transportation	11%	23%	66%

**Healthy People 2020  
Access to Health Services (AHS)**

Objective	Wyandot County 2018	Ohio 2016	U.S. 2016	Healthy People 2020 Target
<b>AHS-1.1: Persons under age of 65 years with health insurance</b>	90% age 20-24 93% age 25-34 95% age 35-44 95% age 45-54 87% age 55-64	90% age 18-24 89% age 25-34 91% age 35-44 94% age 45-54 94% age 55-64	85% age 18-24 84% age 25-34 87% age 35-44 90% age 45-54 93% age 55-64	100%

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

*Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

*(Sources: Healthy People 2020 Objectives, 2016 BRFSS, 2018 Wyandot County Health Assessment)*

# Healthcare Access: Access and Utilization

## Key Findings

*Sixty-nine percent (69%) of Wyandot County adults had visited a doctor for a routine checkup in the past year. Over three-fifths (64%) of adults went outside of Wyandot County for healthcare services in the past year.*

## Healthcare Access

- More than half (51%) of adults rated their satisfaction with their overall health care as excellent or very good. Conversely, 16% of adults rated their satisfaction with their health care as fair or poor.
- More than two-thirds (69%) of Wyandot County adults visited a doctor for a routine checkup in the past year, increasing to 82% of those over the age of 65. The 2016 BRFSS reported prevalence rates of 75% for Ohio and 71% for the U.S.
- Adults with healthcare coverage were more likely to have visited a doctor for a routine checkup in the past year (70%), compared to 50% of those without healthcare coverage.
- Eighty-six percent (86%) of Wyandot County adults reported they had one particular place they usually went if they were sick or needed advice about their health, decreasing to 70% of those under the age of 30 and 54% of those with no health care coverage.
- Wyandot County adults who did not receive medical care in the past 12 months reported the following reasons for not doing so: cost/no insurance (25%), inconvenient appointment times (10%), office was not open when they could get there (9%), too long of a wait for an appointment (6%), no childcare (3%), too embarrassed to seek help (1%), too long of a wait in waiting room (1%), no transportation (1%), provider did not take their insurance (1%), and other problems that prevented them from getting medical care (30%).
- Adults visited the following places for healthcare services or advice: doctor's office (64%), urgent care center (7%), Internet (5%), multiple places (5%), family and friends (3%), chiropractor (3%), hospital emergency room (2%), Department of Veteran's Affairs (VA) (1%), hospital outpatient department (<1%), in-store health clinic (<1%), and some other kind of place (<1%). Three percent (3%) of adults indicated they had no usual place for healthcare services.
- Sixty-four percent (64%) of adults went outside of Wyandot County for the following health care services in the past year: primary care (32%); dental services (27%); specialty care (24%); female health services (11%); dermatological care (8%); obstetrics/gynecology (8%); orthopedic care (7%); pediatric care (6%); ear, nose, and throat care (5%); cancer care (4%); cardiac care (4%); mental health care/counseling services (4%); podiatry care (4%); pediatric therapies (2%); hospice/palliative care (1%); addiction services (<1%); bariatric care (<1%); and other services (10%).
- One-third (33%) of adults did not get their prescriptions from their doctor filled in the past year, increasing to 54% of those who were uninsured.
- Of those who did not get their prescriptions filled, they gave the following reasons: too expensive (19%), they did not think they needed it (16%), side effects (8%), they stretched their current prescription by taking less than prescribed (8%), there was no generic equivalent (5%), they did not have insurance (4%), and they were taking too many medications (2%). Fifty-nine percent (59%) of adults had no prescriptions to be filled.

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Visited a doctor for a routine checkup in the past year</b>	57%	57%	63%	69%	75%	71%



## Availability of Services

- Ten percent (10%) of Wyandot 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, 10% looked for an assisted living program, 5% looked for out-of-home placement, and 3% looked for day care. Thirty-six percent (36%) of adults looked for multiple types of eldercare programs. Eighteen percent (18%) of adults looked for a program to assist in eldercare but did not utilize it.
- Wyandot County adults reported they had looked for the following programs for themselves or a loved one: depression, anxiety or mental health (14%); disability (5%); weight problems (5%); eldercare (4%); marital/family problems (3%); cancer support group/counseling (2%); end-of-life/hospice care (2%); family planning (2%); alcohol abuse (1%); drug abuse (<1%); and tobacco cessation (<1%). No adults reported looking for programs to assist with gambling abuse or detoxification for opiates/heroin.

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

Types of Programs (% of all adults who looked for the programs)	Wyandot County adults who have looked but have <b>NOT</b> found a specific program	Wyandot County adults who have looked and have found a specific program
<b>Depression or Anxiety</b> (14% of all adults looked)	27%	73%
<b>Disability</b> (5% of all adults looked)	26%	74%
<b>Weight Problem</b> (5% of all adults looked)	27%	73%
<b>Eldercare</b> (4% of all adults looked)	37%	63%
<b>Marital/Family Problems</b> (3% of all adults looked)	50%	50%
<b>Cancer Support Group/Counseling</b> (2% of all adults looked)	22%	78%
<b>Alcohol Abuse</b> (1% of all adults looked)	33%	67%

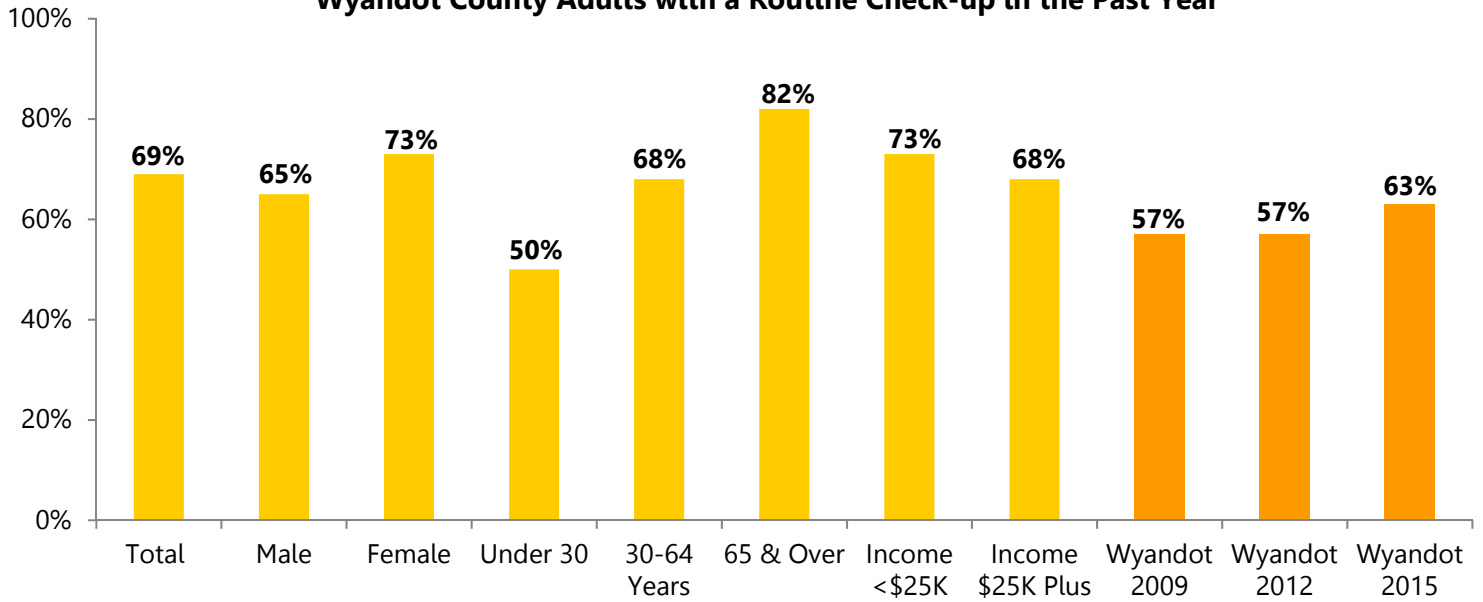
### Key Facts about the Uninsured Population

- Studies repeatedly demonstrate that the uninsured are less likely than those with insurance to receive preventive care and services for major health conditions and chronic diseases.
- Part of the reason for poor access among uninsured is that 50% do not have a regular place to go when they are sick or need medical advice.
- One in five (20%) nonelderly adults without coverage say that they went without care in the past year because of cost compared to 3% of adults with private coverage and 8% of adults with public coverage.
- In 2016, uninsured nonelderly adults were three times as likely as adults with private coverage to say that they postponed or did not get a needed prescription drug due to cost.
- Because people without health coverage are less likely than those with insurance to have regular outpatient care, they are more likely to be hospitalized for avoidable health problems and to experience declines in their overall health.

(Source: The Henry Kaiser Family Foundation, *Key Facts about the Uninsured Population*, 2017)

The following graph shows the percentage of Wyandot County adults who had a routine check-up in the past year. Examples of how to interpret the information include: 69% of all Wyandot County adults had a routine check-up in the past year, including 82% of those 65 years and older.

**Wyandot County Adults with a Routine Check-up in the Past Year**



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

# Healthcare Access: Preventive Medicine

## Key Findings

More than three-fourths (79%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Sixty-seven percent (67%) of Wyandot County adults had the MMR vaccine in their lifetime.

## Preventive Medicine

- Nearly half (49%) of Wyandot County adults had a flu vaccine during the past 12 months, increasing to 74% of adults ages 65 and over. The 2016 BRFSS reported that 57% of Ohio and 58% of U.S. adults ages 65 and over had a flu vaccine in the past year.
- One-third (33%) of adults have had a pneumonia vaccine in their life, increasing to 79% of those ages 65 and over. The 2015 BRFSS reported that 75% of Ohio and 73% of U.S. adults ages 65 and over had a pneumonia vaccine in their life.
- Wyandot County adults have had the following vaccines: MMR in their lifetime (67%), tetanus booster (including Tdap) in the past 10 years (67%), chicken pox vaccine in their lifetime (46%), hepatitis B vaccine in their lifetime (39%), Zoster (shingles) vaccine in their lifetime (20%), pertussis vaccine in the past 10 years (19%), and human papillomavirus (HPV) vaccine in their lifetime (8%).

## Preventive Health Screenings and Exams

- In the past year, 56% of Wyandot County women ages 40 and over have had a mammogram.
- In the past year, more than half (53%) of men ages 50 and over have had a PSA test.
- See the Women and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Wyandot County adults.

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Had a pneumonia vaccination (age 65 and over)	50%	47%	59%	79%	75%	73%
Had a flu vaccine in the past year (age 65 and over)	59%	N/A	71%	74%	57%	58%

N/A – Not Available

## Pneumococcal Vaccination: What Everyone Should Know

- Pneumococcal pneumonia (lung infection) is the most common serious form of pneumococcal disease. Symptoms include:
  - Fever and chills
  - Cough
  - Rapid breathing or difficulty breathing
  - Chest pain
- Older adults with pneumococcal pneumonia may experience confusion or low alertness, rather than the common symptoms listed above.
- Complications of pneumococcal pneumonia include the following:
  - Infection of the space between membranes that surround the lungs and chest cavity (empyema)
  - Inflammation of the sac surrounding the heart (pericarditis)
  - Blockage of the airway that allows air into the lungs (endobronchial obstruction), with collapse within the lungs (atelectasis) and collection of pus (abscess) in the lungs
- The Centers for Disease Control and Prevention (CDC) recommends all children younger than 2 years old and all adults 65 years or older receive the pneumococcal vaccination.

*(Source: CDC, Pneumococcal Disease, Symptoms and Complications, September 6, 2017 and CDC, Vaccines and Preventable Diseases, Pneumococcal Vaccination, December 6, 2017)*

**Healthy People 2020  
Immunization and Infectious Diseases (IID)**

Objective	Wyandot County 2018	Ohio 2016	U.S. 2016	Healthy People 2020 Target
<b>IID-13.1: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease</b>	79%	75%	73%	90%

*Note: U.S. baseline is age-adjusted to the 2000 population standard  
(Sources: Healthy People 2020 Objectives, 2016 BRFSS, 2018 Wyandot County Health Assessment)*

**Wyandot County Adults Having Discussed Healthcare Topics  
With Their Healthcare Professional in the Past 12 Months**

Healthcare Topics	Total 2015	Total 2018
<b>Family History</b>	N/A	40%
<b>Weight Control</b>	38%	38%
<b>Immunizations</b>	21%	37%
<b>Depression, Anxiety, or Emotional Problems</b>	14%	23%
<b>Safe Use of Prescription Medication</b>	N/A	23%
<b>Tobacco Use</b>	N/A	16%
<b>Bone Density</b>	N/A	15%
<b>Falls</b>	N/A	12%
<b>Injury Prevention Such as Safety Belt Use &amp; Helmet Use</b>	4%	8%
<b>Alcohol Use</b>	4%	7%
<b>Self-Testicular Exams</b>	N/A	7%
<b>Safe Use of Opiate-Based Pain Medication</b>	N/A	7%
<b>Family Planning</b>	N/A	6%
<b>Firearm Safety</b>	N/A	3%
<b>Domestic Violence</b>	1%	2%
<b>Illicit Drug Abuse</b>	1%	2%
<b>Sexually Transmitted Disease (STDs)</b>	N/A	2%
<b>Substance Abuse Treatment Options</b>	N/A	1%

*N/A – Not Available*

# Healthcare Access: Women's Health

## Key Findings

In 2018, more than half (56%) of Wyandot County women over the age of 40 reported having a mammogram in the past year. Fifty-six percent (56%) of women ages 19 and over had a clinical breast exam and 36% had a Pap smear to detect cancer of the cervix in the past year. Four percent (4%) of women survived a heart attack and 4% survived a stroke at some time in their life. Nearly half (48%) of Wyandot County women were obese, 38% had high blood cholesterol, 34% had high blood pressure, and 22% were identified as current smokers, known risk factors for cardiovascular diseases.

## Women's Health Screenings

- In 2018, 70% of women had a mammogram at some time, and one-third (40%) had this screening in the past year.
- More than half (56%) of women ages 40 and over had a mammogram in the past year, and 73% had one in the past two years. The 2016 BRFSS reported that 74% of women 40 and over in Ohio and 72% in the U.S. had a mammogram in the past two years.
- Most (95%) Wyandot County women have had a clinical breast exam at some time in their life, and 56% had one within the past year. Two-thirds (67%) of women ages 40 and over had a clinical breast exam in the past two years.
- Eighty-nine percent (89%) of Wyandot County women have had a Pap smear, and 36% reported having had the exam in the past year. Fifty-eight percent (58%) of women had a Pap smear in the past three years. The 2016 BRFSS indicated that 82% of Ohio and 80% of U.S. women had a Pap smear in the past three years.

## Pregnancy

- Twenty-four percent (24%) of Wyandot County women had been pregnant in the past five years.
- During their last pregnancy within the past five years, Wyandot County women took a multi-vitamin with folic acid during pregnancy (76%), had a prenatal appointment in the first three months (71%), took a multi-vitamin with folic acid pre-pregnancy (63%), had a dental exam (51%), experienced depression (24%), took folic acid during pregnancy (20%), took folic acid pre-pregnancy (17%), received WIC services (17%), and smoked cigarettes or used other tobacco products (5%).

## Women's Health Concerns

- Women used the following as their usual source of services for female health concerns: private gynecologist (55%), general or family physician (20%), nurse practitioner/physician assistant (7%), family planning clinic (3%), health department clinic (2%), midwife (1%), and some other kind of place (2%). Eleven percent (11%) indicated they did not have a usual source of services for female health concerns.
- In 2018, 4% of women had survived a heart attack and 4% had survived a stroke at some time in their life.
- From 2014 to 2016, major cardiovascular diseases (heart disease and stroke) accounted for 32% of all female deaths in Wyandot County (Source: Ohio Public Health Data Warehouse, 2014-2016).

### Wyandot County Female Leading Causes of Death, 2014 – 2016

**Total Female Deaths: 406**

1. Heart Disease (23% of all deaths)
2. Cancer (20%)
3. Stroke (9%)
4. Chronic Lower Respiratory Diseases (5%)
5. Diabetes (5%)

(Source: Ohio Public Health Data Warehouse, 2014-2016)

### Ohio Female Leading Causes of Death, 2014 – 2016

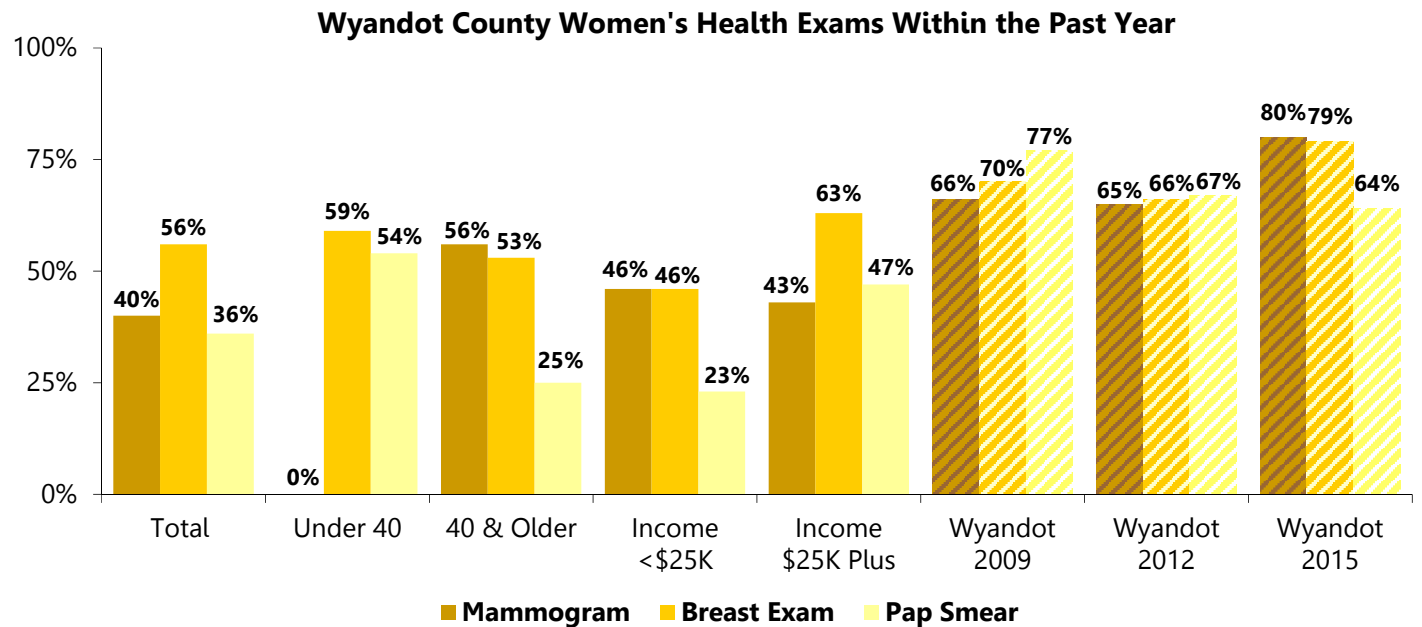
**Total Female Deaths: 176,669**

1. Heart Diseases (22% of all deaths)
2. Cancers (21%)
3. Chronic Lower Respiratory Diseases (6%)
4. Stroke (6%)
5. Alzheimer's disease (5%)

(Source: Ohio Public Health Data Warehouse, 2014-2016)

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Wyandot County, the 2018 health assessment identified that:
  - 78% of women were overweight or obese (2016 BRFSS reports 62% for Ohio and 59% for the U.S.)
  - 38% were diagnosed with high blood cholesterol (2015 BRFSS reports 36% for Ohio and 35% for the U.S.)
  - 34% were diagnosed with high blood pressure (2015 BRFSS reports 31% for Ohio and 30% for the U.S.)
  - 22% of all women were current smokers (2016 BRFSS reports 21% for Ohio and 14% for the U.S.)
  - 13% had been diagnosed with diabetes (2016 BRFSS reports 11% for Ohio and 11% for the U.S.)

The following graph shows the percentage of Wyandot County female adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 40% of Wyandot County females had a mammogram within the past year, 56% had a clinical breast exam, and 36% had a Pap smear.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

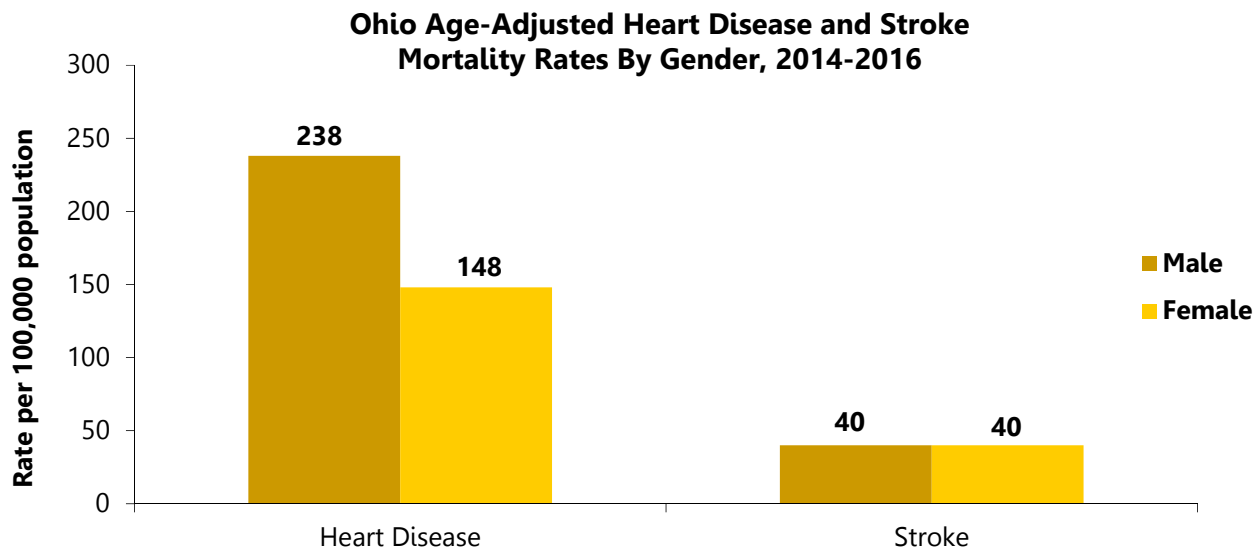
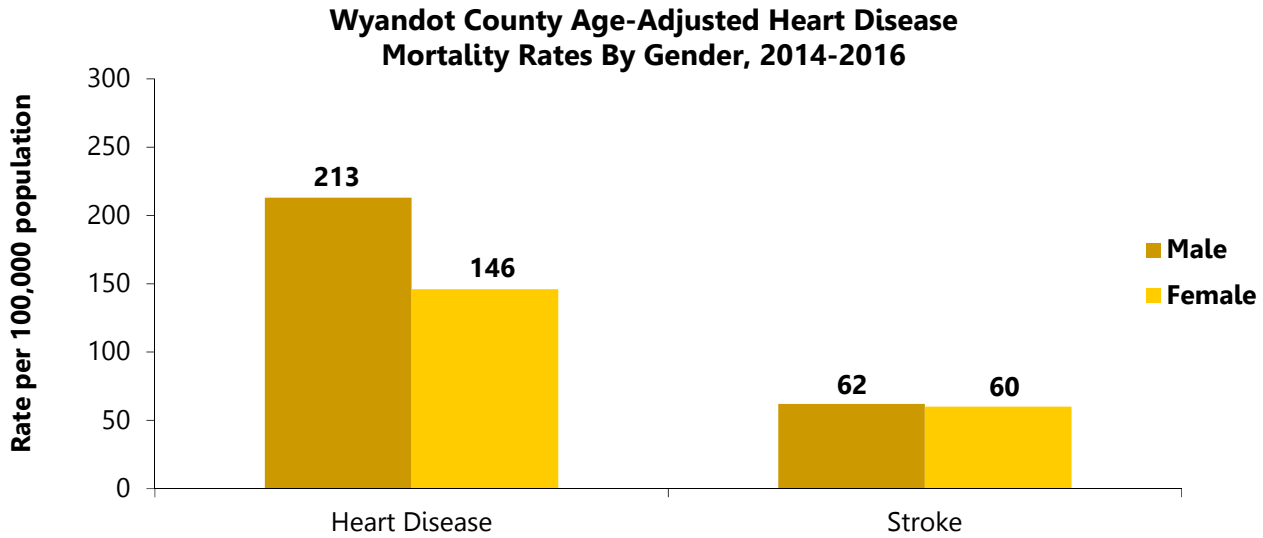
Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Had a clinical breast exam in the past two years (age 40 and over)	70%	66%	79%	67%	N/A	N/A
Had a mammogram in the past two years (age 40 and over)	66%	66%	80%	73%	74%	72%
Had a Pap smear in the past three years	77%	67%	64%	58%	82%*	80%*

N/A – Not Available

\*BRFSS for both Ohio and U.S. reports for women ages 21-65

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

- From 2014 to 2016, the Wyandot County and Ohio female age-adjusted mortality rates were lower than the male rate for heart disease.
- The Wyandot County female stroke mortality rate was slightly higher than the Ohio female rate from 2014 to 2016.

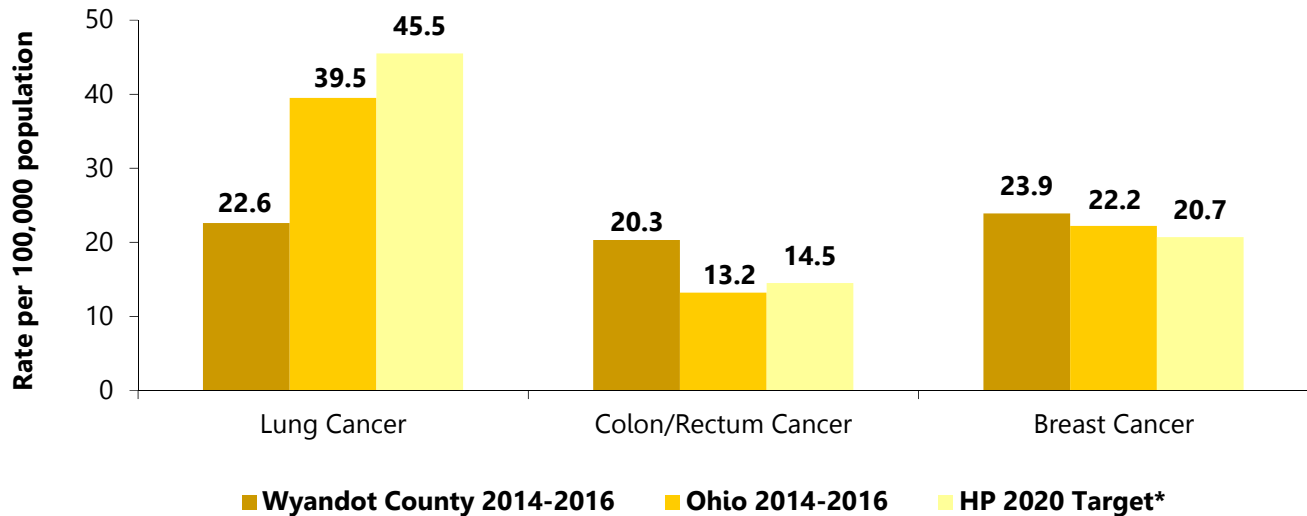


(Source: Ohio Public Health Data Warehouse, 2014-2016)

The following graph shows the Wyandot County and Ohio age-adjusted cancer mortality rates per 100,000 population for women with comparison to Healthy People 2020 objectives. The graph shows:

- From 2014 to 2016, the Wyandot County age-adjusted mortality rate for breast cancer was higher than both the Ohio rate and Healthy People 2020 target objective.

### Wyandot County Female Age-Adjusted Cancer Mortality Rates, 2014-2016



(Source: Ohio Public Health Data Warehouse, 2014-2016)

\*Note: The Lung and Colon/Rectum Cancer Healthy People 2020 target rates are not gender specific

### What Can I Do to Reduce My Risk of Breast Cancer?

Many factors can influence your breast cancer risk, and most women who develop breast cancer do not have any known risk factors or a history of the disease in their families. However, you can help lower your risk of breast cancer in the following ways:

- Keep a healthy weight.
- Exercise regularly (at least four hours a week).
- Get enough sleep.
- Don't drink alcohol, or limit alcohol drinks to no more than one per day.
- Avoid exposures to chemicals that can cause cancer (carcinogens).
- Try to reduce your exposure to radiation during medical tests like mammograms, X-rays, CT scans, and PET scans.
- If you are taking, or have been told to take, hormone replacement therapy or oral contraceptives (birth control pills), ask your doctor about the risks and find out if it is right for you.
- Breastfeed your babies, if possible.

If you have a family history of breast cancer or inherited changes in your BRCA1 and BRCA2 genes, you may have a higher breast cancer risk. Talk to your doctor about these ways of reducing your risk:

- Anti-estrogens or other medicines that block or decrease estrogen in your body.
- Surgery to reduce your risk of breast cancer
  - Prophylactic (preventive) mastectomy (removal of breast tissue).
  - Prophylactic (preventive) salpingo-oophorectomy (removal of the ovaries and fallopian tubes).

(Source: Centers for Disease Control and Prevention, What Can I Do to Reduce My Risk of Breast Cancer? Updated September 27, 2017)



## Excessive Alcohol Use and Risks to Women's Health

Although men are more likely to drink alcohol and drink in larger amounts, gender differences in body structure and chemistry cause women to absorb more alcohol, and take longer to break it down and remove it from their bodies (i.e., to metabolize it). In other words, upon drinking equal amounts, women have higher alcohol levels in their blood than men, and the immediate effects of alcohol occur more quickly and last longer in women than men. These differences also make it more likely that drinking will cause long-term health problems in women than men.

Women are more likely than men to experience the following as a result of drinking alcohol:

- **Liver Disease:** The risk of cirrhosis and other alcohol-related liver diseases is higher for women than for men.
- **Impact on the Brain:** Excessive drinking may result in memory loss and shrinkage of the brain. Research suggests that women are more vulnerable than men to the brain damaging effects of excessive alcohol use, and the damage tends to appear with shorter periods of excessive drinking for women than for men.
- **Impact on the Heart:** Studies have shown that women who drink excessively are at increased risk for damage to the heart muscle than men even for women drinking at lower levels.
- **Cancer:** Alcohol consumption increases the risk of cancer of the mouth, throat, esophagus, liver, colon, and breast among women. The risk of breast cancer increases as alcohol use increases.
- **Sexual Assault:** Binge drinking is a risk factor for sexual assault, especially among young women in college settings. Each year, about 1 in 20 college women are sexually assaulted. Research suggests that there is an increase in the risk of rape or sexual assault when both the attacker and victim have used alcohol prior to the attack.

*(Source: Centers for Disease Control and Prevention, Excessive Alcohol Use and Risks to Women's Health, March 7, 2016)*

# Healthcare Access: Men's Health

## Key Findings

In 2018, 53% of Wyandot County males over the age of 50 had a Prostate-Specific Antigen (PSA) test in the past year. Six percent (6%) of men survived a heart attack and 4% survived a stroke at some time in their life. Forty-five percent (45%) of men had been diagnosed with high blood cholesterol, 42% had high blood pressure, and 16% were identified as current smokers, which, along with obesity (36%), are known risk factors for cardiovascular diseases.

## Men's Health Screenings and Concerns

- More than two-fifths (45%) of Wyandot County males had a Prostate-Specific Antigen (PSA) test at some time in their life, and 29% had one in the past year.
- Sixty-seven percent (67%) of males age 40 and over had a PSA test at some time in their life, and 58% had one in the past two years.
- More than three-quarters (79%) of males age 50 and over had a PSA test at some time in their life, and 53% had one in the past year.
- Nearly half (47%) of men had a digital rectal exam in their lifetime, and 19% had one in the past year.
- One-third (33%) of males age 50 and over had a digital rectal exam in the past year.
- More than two-fifths (43%) of males age 50 and over had a performed a self-testicular exam at some time in their life, and 35% had done one in the past year.
- In 2018, 6% of men had a heart attack and 4% had a stroke at some time in their life.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, and diabetes. In Wyandot County, the 2018 health assessment identified that:
  - 81% of men were overweight or obese (2016 BRFSS reports 71% for Ohio and 71% for the U.S.)
  - 45% were diagnosed with high blood cholesterol (2015 BRFSS reports 38% for Ohio and 38% for U.S.)
  - 42% were diagnosed with high blood pressure (2015 BRFSS reports 38% for Ohio and 34% for U.S.)
  - 16% of all men were current smokers (2016 BRFSS reports 25% for Ohio and 19% for the U.S.)
  - 10% had been diagnosed with diabetes (2016 BRFSS reports 12% for Ohio and 11% for U.S.)
- From 2014 to 2016, major cardiovascular diseases (heart disease and stroke) accounted for 30% of all male deaths in Wyandot County *(Source: Ohio Public Health Data Warehouse, 2014-2016)*.
- From 2014 to 2016, the leading cancer deaths for Wyandot County males were lung and bronchus, colon and rectum. Statistics from the same period for Ohio males indicate that lung, colon and rectum, and prostate cancers were the leading cancer deaths *(Source: Ohio Public Health Data Warehouse, 2014-2016)*.

## Wyandot County Male Leading Causes of Death, 2014 – 2016

**Total Male Deaths: 360**

1. Cancers (24% of all deaths)
2. Heart Diseases (23%)
3. Chronic Lower Respiratory Diseases (9%)
4. Stroke (7%)
5. Accidents, Unintentional Injuries (6%)

*(Source: Ohio Public Health Data Warehouse, 2014-2016)*

## Ohio Male Leading Causes of Death, 2014 – 2016

**Total Male Deaths: 175,247**

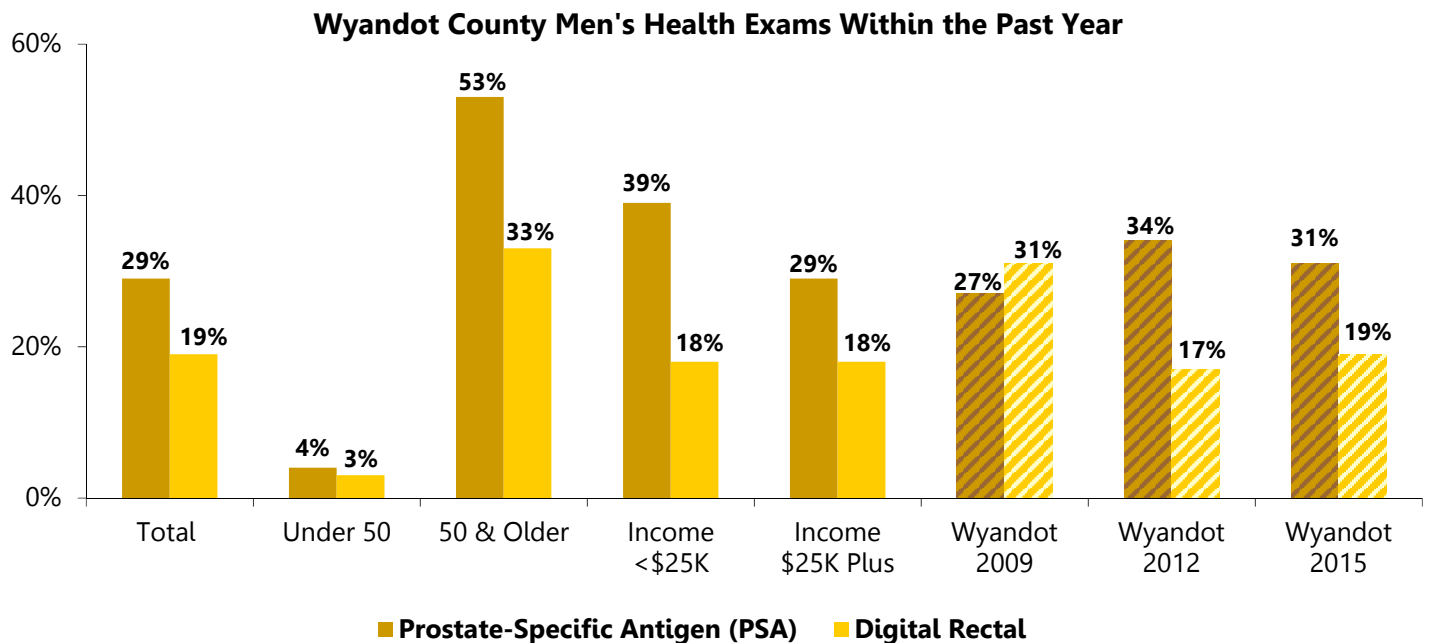
1. Heart Diseases (25% of all deaths)
2. Cancers (23%)
3. Accidents, Unintentional Injuries (8%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (4%)

*(Source: Ohio Public Health Data Warehouse, 2014-2016)*

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Had a PSA test in within the past two years (age 40 and over)	N/A	61%	58%	58%	39%	40%
Had a digital rectal exam within the past year (age 50 and over)	41%	30%	34%	33%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Wyandot County male adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 29% of Wyandot County males had a PSA test within the past year, and 19% had a digital rectal exam.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

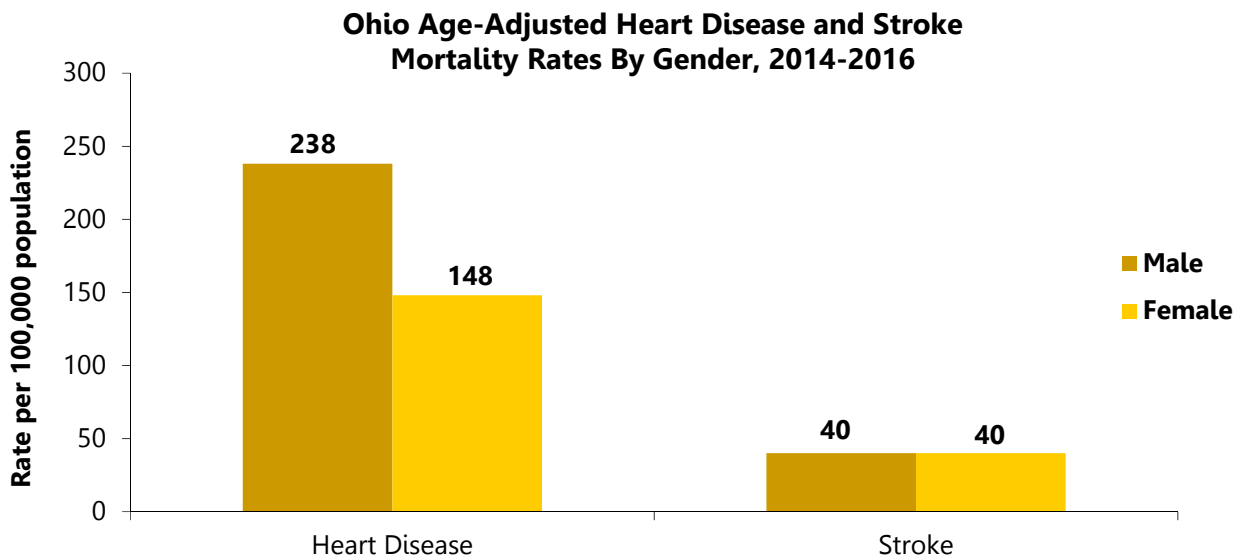
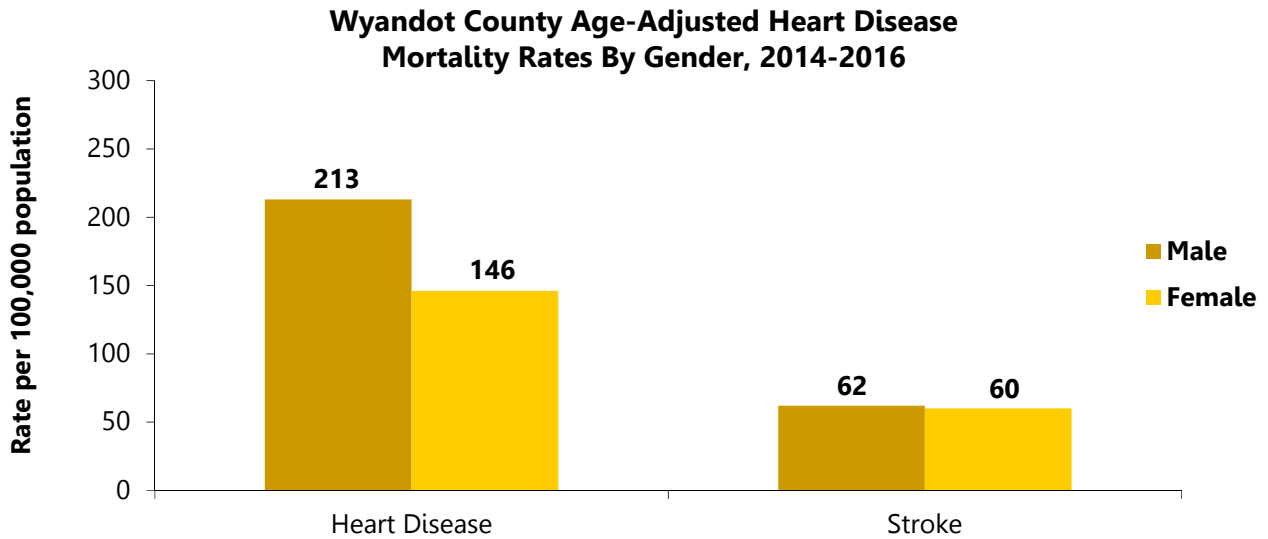
### U.S. Men's Health Data

- Approximately 12% of adult males ages 18 years or older reported fair or poor health.
- Seventeen percent (17%) of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 30% 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.
- Thirty-five percent (35%) of men 20 years and over are obese.
- There are 12% of males under the age of 65 without healthcare 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, May 3, 2017)

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

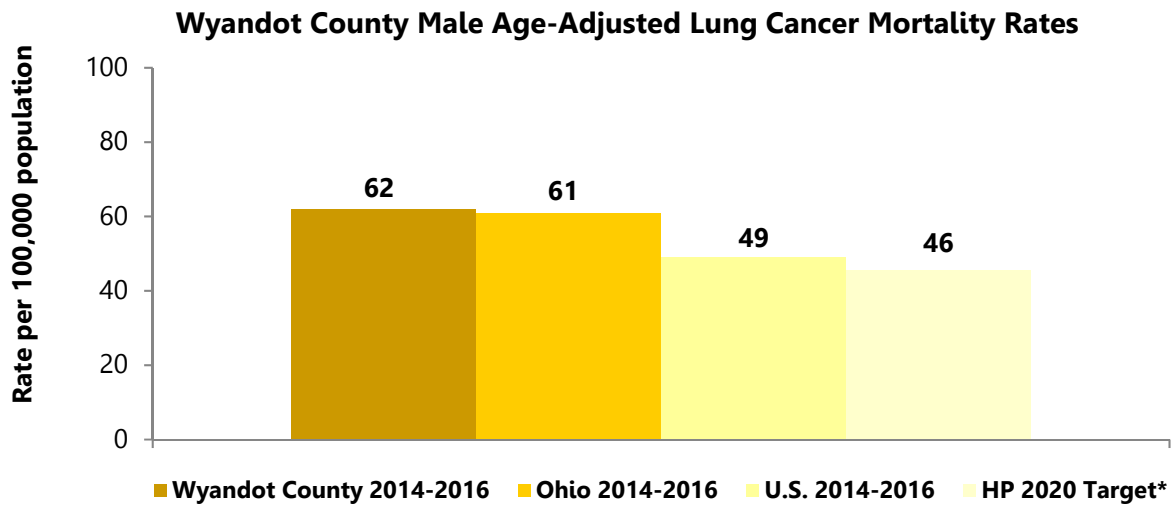
- From 2014 to 2016, the Wyandot County and Ohio male age-adjusted mortality rates were higher than the female rate for heart disease.
- The Wyandot County male age-adjusted stroke mortality rate was significantly higher than the Ohio male stroke mortality rate.



(Source: Ohio Public Health Data Warehouse, 2014-2016)

The following graph shows the Wyandot County, Ohio and U.S. age-adjusted lung cancer mortality rates per 100,000 population for men with comparison to the Healthy People 2020 objective. The graph shows:

- From 2014 to 2016, the Wyandot County age-adjusted mortality rate for male lung cancer was higher than the Ohio and U.S. rates, as well as the Healthy People 2020 target objective.



*\*Note: The Healthy People 2020 target rates are not gender specific  
(Sources: Ohio Public Health Data Warehouse, 2014-2016; CDC Wonder 2014-2016 and Healthy People 2020)*

### Prostate Cancer Awareness

- The prostate is a walnut-sized organ located just below the bladder and in front of the rectum in men. It produces fluid that makes up a part of semen. The prostate gland surrounds the urethra (the tube that carries urine and semen through the penis and out of the body).
- Prostate cancer is the most common non-skin cancer among American men. Prostate cancers usually grow slowly. Most men with prostate cancer are older than 65 years and do not die from the disease. Finding and treating prostate cancer before symptoms occur may not improve your health or help you live longer.
- Men can have different symptoms for prostate cancer. Some men do not have symptoms at all. Some symptoms of prostate cancer are difficulty starting urination, frequent urination (especially at night), weak or interrupted flow of urine, and blood in the urine or semen.
- There is no way to know for sure if you will get prostate cancer. The older a man is, the greater his risk for getting prostate cancer. Men also have a greater chance of getting prostate cancer if they are African-American or have a father, brother, or son who has had prostate cancer.
- Two tests are commonly used to screen for prostate cancer:
  - **Digital rectal exam (DRE):** A doctor or nurse inserts a gloved, lubricated finger into the rectum to estimate the size of the prostate and feel for lumps or other abnormalities.
  - **Prostate specific antigen test (PSA):** Measures the level of PSA in the blood. PSA is a substance made by the prostate. The levels of PSA in the blood can be higher in men who have prostate cancer. The PSA level may also be elevated in other conditions that affect the prostate.

*(Source: Centers for Disease Control and Prevention, Prostate Cancer Awareness, September 21, 2017)*

# Healthcare Access: Oral Health

## Key Findings

Three-fifths (60%) of Wyandot County adults visited a dentist or dental clinic in the past year. The 2016 BRFSS reported that 68% of Ohio and 66% of U.S. adults had visited a dentist or dental clinic in the previous 12 months.

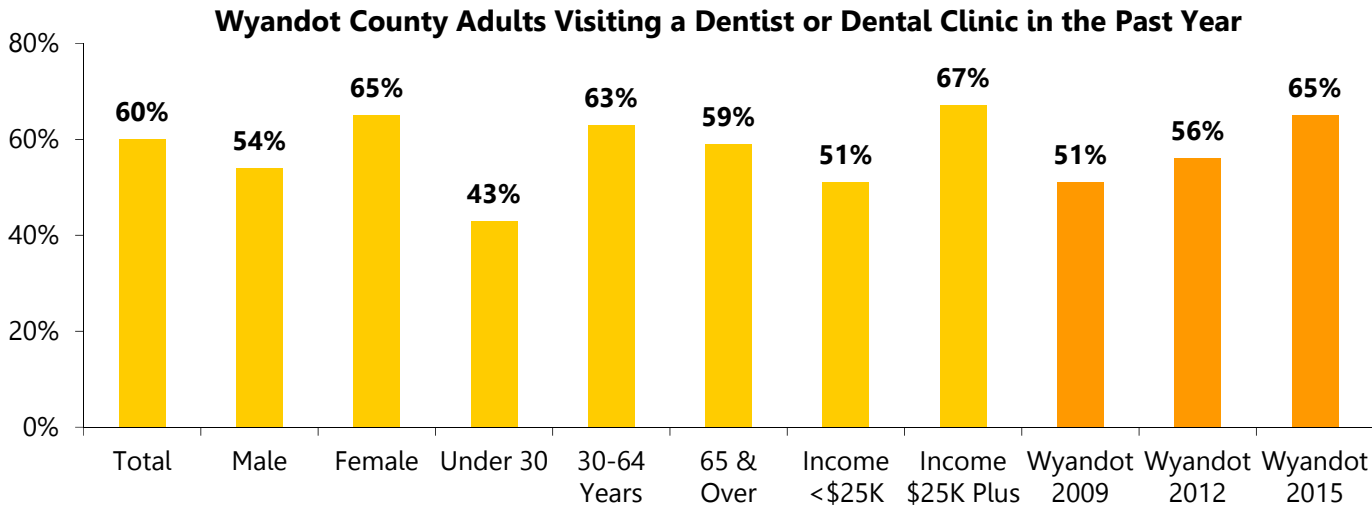
## Access to Dental Care

- In the past year, 60% of Wyandot County adults had visited a dentist or dental clinic, decreasing to 51% of those with incomes less than \$25,000 and 43% of those under the age of 30.
- The 2016 BRFSS reported that 68% of Ohio and 66% of U.S. adults had visited a dentist or dental clinic in the previous 12 months.
- More than three-fifths (61%) of Wyandot County adults with dental insurance had been to the dentist in the past year, compared to 46% of those without dental insurance.
- When asked the main reason for not visiting a dentist in the past year, 26% had no reason to go/had not thought of it; 20% had dentures; 19% said fear, apprehension, nervousness, pain, and dislike going; 18% said cost; 2% did not have/know a dentist; 2% used the emergency room for dental issues; and 1% said their dentist did not accept their medical coverage. Two percent (2%) of adults selected multiple reasons for not visiting a dentist in the past year.
- Nearly half (47%) of adults had one or more of their permanent teeth removed, increasing to 74% of those ages 65 and over. The 2016 BRFSS reported that 45% of Ohio and 43% of U.S. adults had one or more permanent teeth removed.
- Nearly one-in-five (18%) Wyandot County adults ages 65 and over had all of their permanent teeth removed. The 2016 BRFSS reported that 17% of Ohio adults and 14% of U.S. adults ages 65 and over had all of their permanent teeth removed.

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>					
<b>Males</b>	54%	10%	12%	17%	1%
<b>Females</b>	65%	6%	10%	15%	2%
<b>Total</b>	60%	8%	11%	16%	2%

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Adults who had visited the dentist in the past year</b>	51%	56%	65%	60%	68%	66%
<b>Adults who had one or more permanent teeth removed</b>	54%	49%	50%	47%	45%	43%
<b>Adults 65 years and older who had all their permanent teeth removed</b>	16%	19%	17%	18%	17%	14%

**The following graph shows the percentage of Wyandot County adults who had visited a dentist or dental clinic in the past year. Examples of how to interpret the information on the graph include: 60% of Wyandot County adults had been to the dentist in the past year, including 43% of those under the age of 30 and 51% of those with incomes less than \$25,000.**



*Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

### Facts About Adult Oral Health

- The baby boomer generation is the first where most people will keep their natural teeth over their entire lifetime. This is largely because of the benefits of water fluoridation and fluoride toothpaste. However, threats to oral health, including tooth loss, continue throughout life.
- The major risks for tooth loss are tooth decay and gum disease that may increase with age because of problems with saliva production; receding gums that expose “softer” root surfaces to decay-causing bacteria; or difficulties flossing and brushing because of poor vision, cognitive problems, chronic disease, and physical limitations.
- Although more adults are keeping their teeth, many continue to need treatment for dental problems. This need is even greater for members of some racial and ethnic groups—about 3 in 4 Hispanics and non-Hispanic black adults have an unmet need for dental treatment, as do people who are poor. These individuals are also more likely to report having poor oral health.
- In addition, some adults may have difficulty accessing dental treatment. For every adult aged 19 years or older without medical insurance, there are three who don’t have dental insurance.
- Oral health problems include the following: untreated tooth decay, gum disease, tooth loss, oral cancer, and chronic diseases such as arthritis, heart disease, and strokes.

*(Source: Centers for Disease Control and Prevention, Division of Oral Health, Adult Oral Health, October 23, 2017)*

# Health Behaviors: Health Status Perceptions

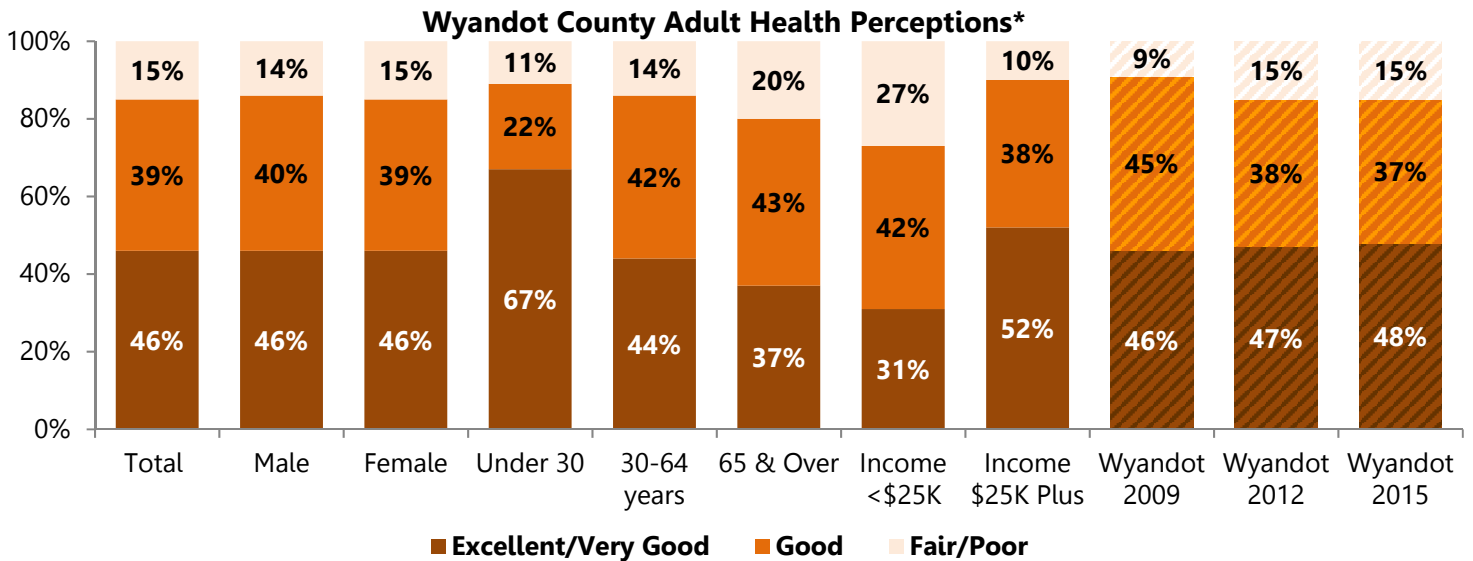
## Key Findings

In 2018, almost half (46%) of Wyandot County adults rated their health status as excellent or very good. Conversely, 15% of adults described their health as fair or poor, increasing to 27% of those with incomes less than \$25,000.

## General Health Status

- In 2018, nearly half (46%) of Wyandot County adults rated their health as excellent or very good. Wyandot County adults with higher incomes (52%) were most likely to rate their health as excellent or very good, compared to 31% of those with incomes less than \$25,000.
- Fifteen percent (15%) of adults rated their health as fair or poor. The 2016 BRFSS has identified that 18% of Ohio and 17% of U.S. adults self-reported their health as fair or poor.
- Wyandot County adults were most likely to rate their health as fair or poor if they:
  - Were separated (33%)
  - Had been diagnosed with diabetes (30%)
  - Had an annual household income under \$25,000 (27%)
  - Had high blood pressure (24%) or high blood cholesterol (23%)
  - Were 65 years of age or older (20%)

The following graph shows the percentage of Wyandot County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 46% of Wyandot County adults, 67% of those under age 30, and 37% of those ages 65 and older rated their health as excellent or very good.



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

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Rated health as excellent or very good	46%	47%	48%	46%	51%	52%
Rated health as fair or poor	9%	15%	15%	15%	18%	17%



# Health Behaviors: Adult Weight Status

## Key Findings

*Seventy-nine percent (79%) of Wyandot County adults were overweight or obese based on Body Mass Index (BMI). Nearly half (46%) of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week.*

## Adult Weight Status

- More than three-fourths (79%) of Wyandot County adults were either overweight (37%) or obese (42%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of preventable diseases.
- Wyandot County adults did the following to lose weight or keep from gaining weight: ate less food, fewer calories, or foods low in fat (40%); drank more water (35%); exercised (30%); ate a low-carb diet (11%); took diet pills, powders or liquids without a doctor's advice (3%); smoked cigarettes (3%); used a weight loss program (1%); took prescribed medications (1%); went without eating 24 or more hours (1%); participated in a prescribed dietary or fitness program (1%); had bariatric surgery (<1%); took laxatives (<1%); and received health coaching (<1%).

**42% of Wyandot County adults were obese.**

## Physical Activity

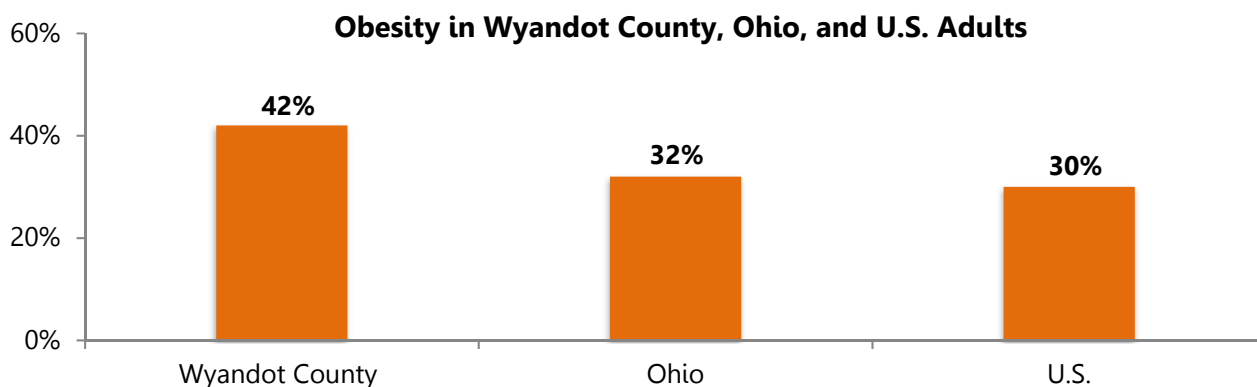
- Nearly half (46%) of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week; 27% of adults exercised 5 or more days per week; and 34% of adults did not participate in any physical activity in the past week, including 5% who were unable to exercise.
- 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 Recommendations, 2015*).
- Wyandot County adults spent the most time doing the following physical activities in the past year: walking (31%), exercise machines (4%), occupational exercise (4%), running/jogging (3%), exercise videos (2%), strength training (1%), active video games (<1%), swimming (<1%), and other activities (8%). Seventeen percent (17%) of adults did not exercise at all, including 2% who were unable to do so. One-fourth (25%) of adults participated in multiple types of physical activity.
- Reasons for not exercising included the following: time (25%); too tired (22%); laziness (21%); weather (18%); pain or discomfort (14%); did not like to exercise (13%); could not afford a gym membership (9%); no exercise partner (5%); did not know what activities to do (4%); no child care (3%); doctor advised them not to exercise (2%); lack of opportunities for those with physical impairments or challenges (2%); no gym available (2%); poorly maintained/no sidewalks (2%); no walking, biking trails or parks (1%); neighborhood safety (1%); and transportation (1%).
- When at work, Wyandot County adults reported doing the following: mostly sitting (21%), mostly heavy labor or physically demanding work (11%), mostly standing (11%), and mostly walking (10%). Seventeen percent (17%) reported what they did at work varied, and 30% of adults reported they were unemployed.

## Nutrition

- In 2018, 42% of adults ate between 1 to 2 servings of fruits and vegetables per day. Forty percent (40%) ate between 3 to 4 servings per day, and 14% ate 5 or more servings per day. Four percent (4%) of adults ate 0 servings of fruits and vegetables per day.

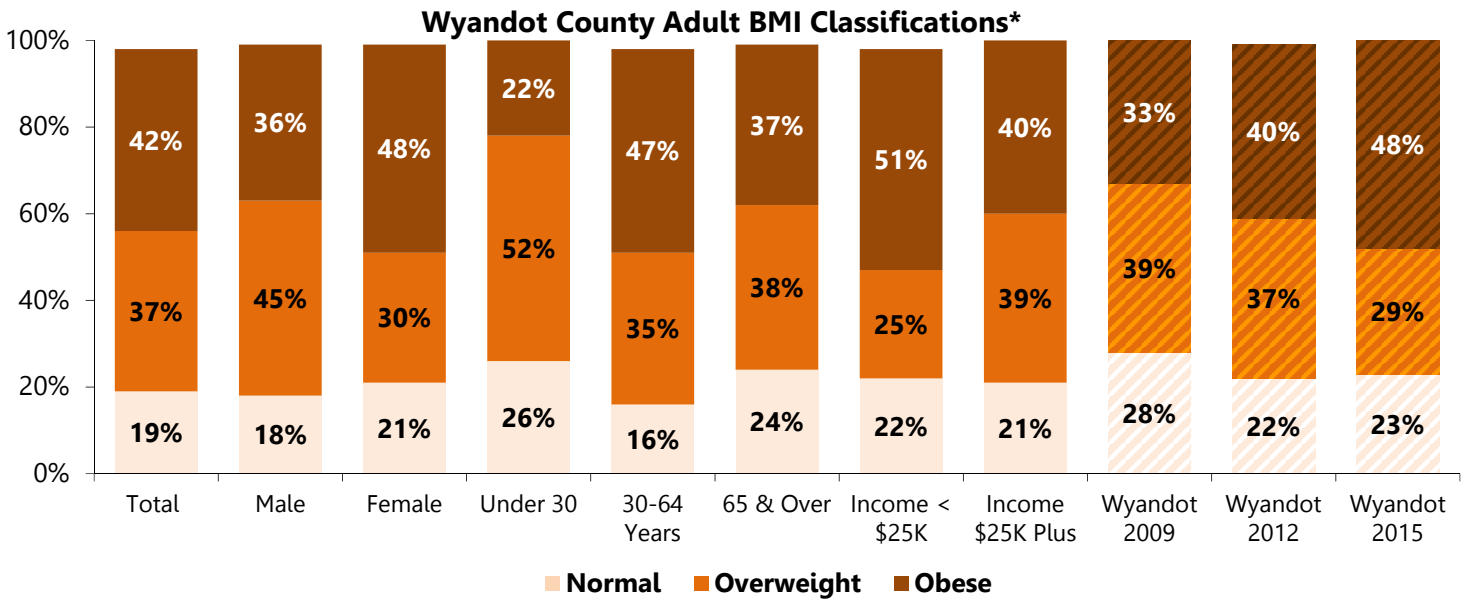
- Less than one percent (<1%) of Wyandot County adults ate 5 or more servings of fruit per day. Nine percent (9%) ate 3 to 4 servings of fruit per day, and 74% ate 1 to 2 servings per day. Sixteen percent (16%) of adults did not eat any fruit.
- One percent (1%) of adults ate 5 or more servings of vegetables per day. Fifteen percent (15%) ate 3 to 4 servings of vegetables per day, and 76% ate 1 to 2 servings per day. Seven percent (7%) of adults did not eat any vegetables.
- The American Cancer Society recommends that adults eat at least 2½ cups (five servings) of fruits and vegetables per day to reduce the risk of cancer and to maintain good health (Source: American Cancer Society, 2017).
- Two percent (2%) of adults consumed 5 or more servings of sugar-sweetened beverages per day. Ten percent (10%) drank 3 to 4 servings per day, 42% consumed 1 to 2 servings per day, and 46% consumed 0 servings per day.
- Eight percent (8%) of adults consumed 5 or more servings of caffeinated beverages per day. More than one-fourth (26%) consumed 3-to-4 servings per day, 42% consumed 1-to-2 servings of per day, and 24% drank 0 servings per day.
- When asked how far Wyandot County adults lived from fresh, healthy food, 35% reported more than 2 miles, 10% said 1-to-2 miles, 9% said ½ mile to 1 mile, 12% said ¼ mile to ½ mile, and 20% said less than ¼ mile.
- Wyandot County adults reported the following reasons they chose the types of food they ate: taste/enjoyment (66%), cost (54%), ease of preparation/time (47%), healthiness of food (43%), food they were used to (41%), availability (40%), what their family prefers (35%), nutritional content (21%), calorie content (18%), artificial sweetener content (6%), if it was organic (6%), if it was genetically modified (5%), health care provider’s advice (5%), if it was gluten free (3%), other food sensitivities (2%), if it was lactose free (2%), limitations set by WIC (1%), and other reasons (5%).
- Adults reported the following barriers to consuming healthy (i.e., non-processed, organic) foods: too expensive (27%), did not like the taste (8%), did not know how to prepare (6%), no variety (4%), no access (2%), store did not take Electronic Benefits Transfer (EBT) (<1%), and other barriers (3%).
- Wyandot County adults had access to wellness programs through their employer or spouse’s employer with the following features: health risk assessment (13%), lower insurance premiums for participation in wellness program (13%), free/discounted gym membership (12%), on-site health screenings (12%), free/discounted smoking cessation program (10%), gift cards or cash for participation in wellness program (9%), healthier food options in vending machines or cafeteria (9%), on-site fitness facility (7%), lower insurance premiums for positive changes in health status (6%), free/discounted weight loss program (6%), on-site health education classes (4%), and gift cards or cash for positive changes in health status (3%). Twenty-two percent (22%) of Wyandot County adults did not have access to any wellness programs.

**The following graph shows the percentage of Wyandot County adults who are obese compared to Ohio and U.S.**



(Source: 2018 Wyandot County Health Assessment and 2016 BRFSS)

The following graph shows the percentage of Wyandot County adults who are overweight or obese by Body Mass Index (BMI). Examples of how to interpret the information include: 19% of all Wyandot County adults were classified as normal weight, 37% were overweight, and 42% were obese.



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

Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

### Adult Obesity Facts

- Obesity-related conditions include heart disease, stroke, type 2 diabetes and certain types of cancer, some of the leading causes of preventable death.
- The estimated annual medical cost of obesity in the U.S. was \$147 billion in 2008 U.S. dollars; the medical costs for people who are obese were \$1,429 higher than those of normal weight.
- Non-Hispanic blacks have the highest age-adjusted rates of obesity (48.1%) followed by Hispanics (42.5%), non-Hispanic whites (34.5%), and non-Hispanic Asians (11.7%).
- Obesity is higher among middle age adults 40-59 years old (40.2%) than among younger adults, age 20-39 (32.3%) or adults over 60 or above (37%) adults.

(Source: CDC, Adult Obesity Facts, updated March 5, 2018)

### BMI Measurements

- Body Mass Index (BMI) is a person’s weight in kilograms divided by the square of height in meters.
- A high BMI can be an indicator of high body fat.
- BMI can be used to screen for weight categories that may lead to health problems but it is not diagnostic of the body fatness or health of any individual.

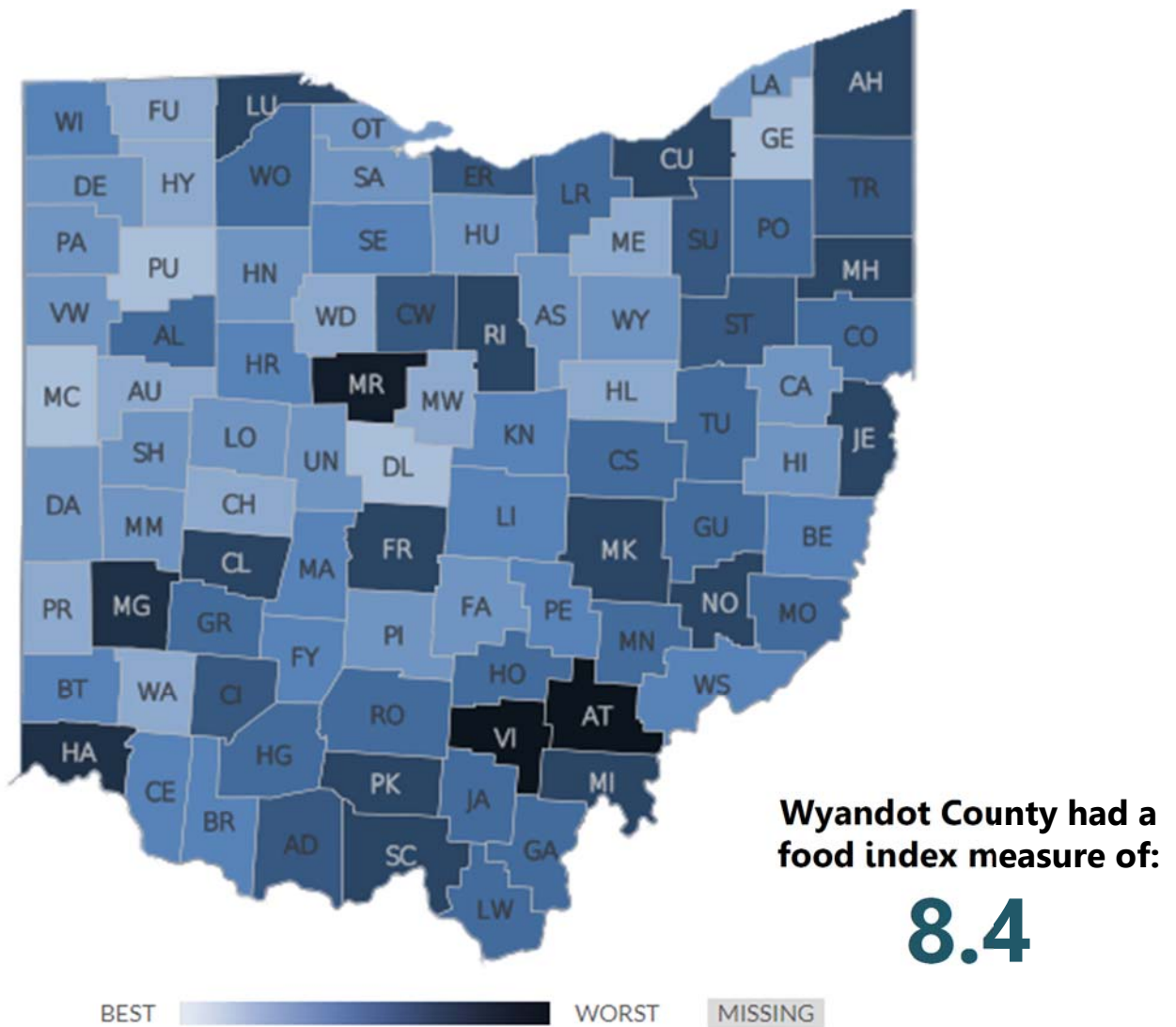
BMI	Weight Status
Below 18.5	Underweight
18.5 – 24.9	Normal or Healthy Weight
25.0 – 29.9	Overweight
30.0 and above	Obese

(Source: CDC, Healthy Weight, updated August 11, 2017)

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Obese</b>	33%	40%	48%	42%	32%	30%
<b>Overweight</b>	39%	37%	29%	37%	35%	35%

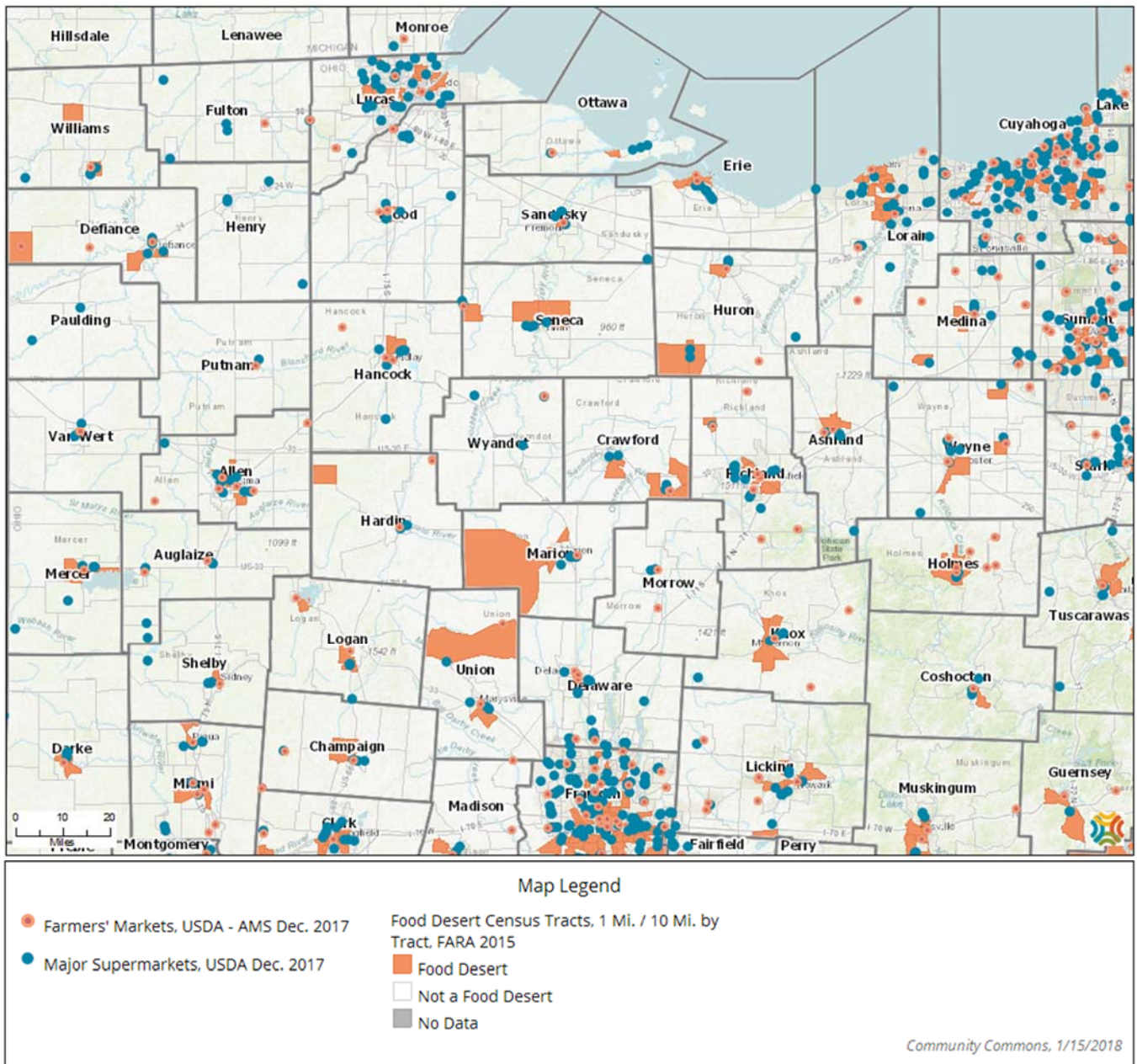
*The Food Environment Index measures the quality of the food environment in a county on a scale from 0 to 10 (zero being the worst value in the nation, and 10 being the best). The two variables used to determine the measure are limited access to healthy foods (i.e. the percentage of the population who are low income and do not live close to a grocery store) & food insecurity (i.e. the percentage of the population who did not have access to a reliable source of food during the past year).*

- The food environment index in Wyandot County is 8.4.
- The food environment index in Ohio is 6.6.



*(Source: USDA Food Environment Atlas, as compiled by County Health Rankings 2018)*

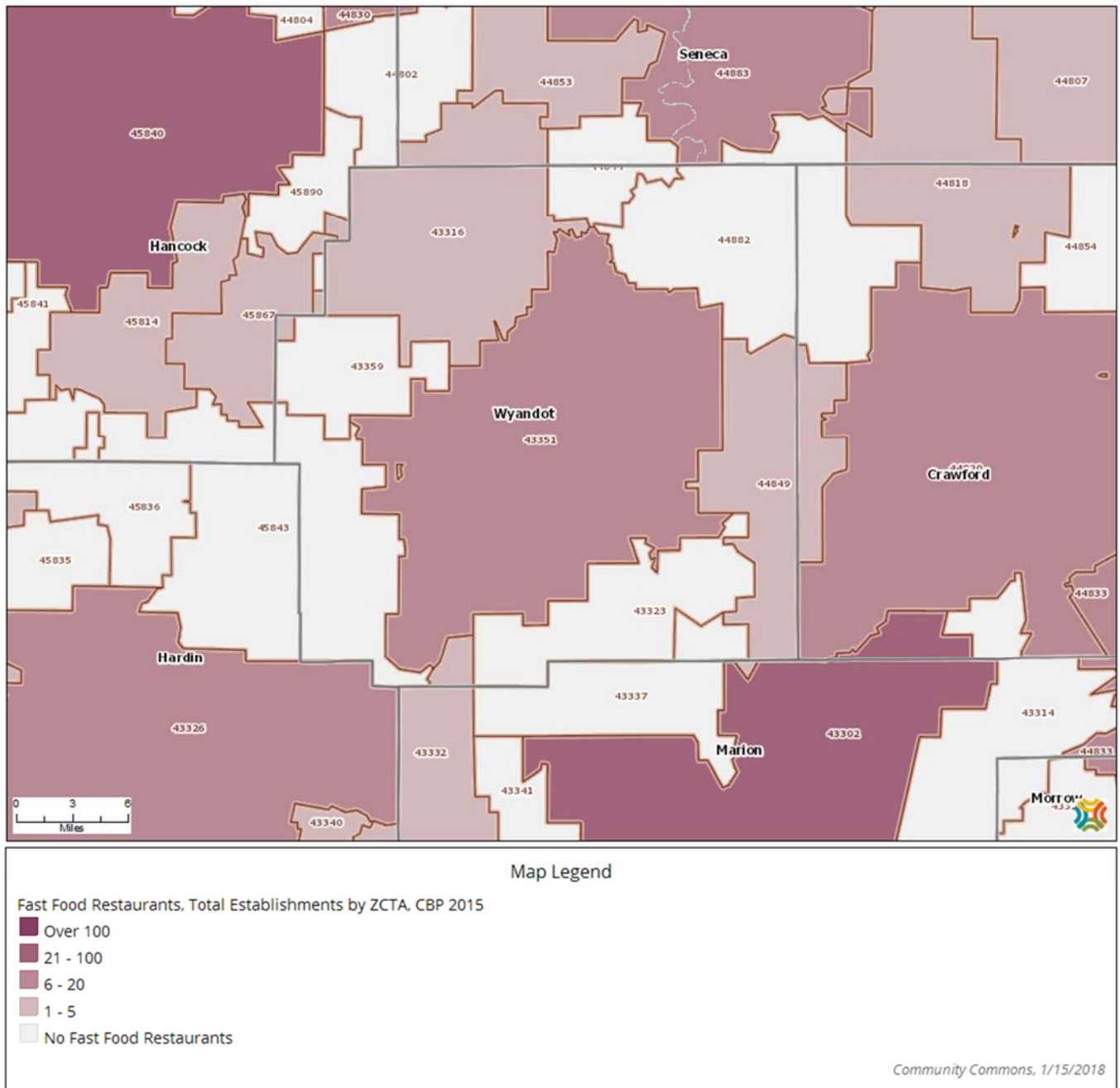
## Food Desert Census Tracts, Major Supermarkets and Farmer's Markets, 2017



(Sources: U.S. Department of Agriculture, Food and Nutrition Service and Agricultural Marketing Service, May 2016 and U.S. Department of Agriculture, Economic Research Service, USDA – Food Access Research Atlas: 2015, as compiled by Community Commons)

*Description of indicator: This indicator displays the location of Food Deserts across the United States based on conditions in 2015. The Healthy Food Financing Initiative (HFFI) Working Group considers a food desert as a low-income census tract where a substantial number or share of residents has low access to a supermarket or large grocery store. Furthermore, to qualify as a food desert tract, at least 33 percent of the tract's population or a minimum of 500 people in the tract must have low access to a supermarket or large grocery store. A low-income census tract is defined as any census tract where the poverty rate for that tract is at least 20 percent, or for tracts not located within a metropolitan area, the median family income for the tract does not exceed 80 percent of statewide median family income. Some census tracts that contain supermarkets or large grocery stores may meet the criteria of a food desert if a substantial number or share of people within that census tract is more than 1 mile (urban areas) or 10 miles (rural areas) from the nearest supermarket. Furthermore, some residents of food desert census tracts may live within 1 or 10 miles of a supermarket; these residents are not counted as low access and thus not counted in the total.*

## Fast Food Restaurants, Total Establishments by Zip Code Tract Area, 2015



(Source: U.S. Census Bureau, County Business Patterns: 2015, as compiled by Community Commons)

*Description of indicator: This indicator provides information about select businesses and establishments across the United States. Data are from the US Census Bureau's County Business Patterns data series, which classifies businesses using the North American Industry Classification System (NAICS). Map layers include county-level establishment totals and establishment rates per 100,000 population. The population figures used in this analysis are from the US 2010 Decennial Census.*

# Health Behaviors: Adult Tobacco Use

## Key Findings

In 2018, 19% of Wyandot County adults were current smokers, and 26% were considered former smokers. Seven percent (7%) of adults used e-cigarettes in the past year. Half (50%) of adults did not know if e-cigarette vapor was harmful.

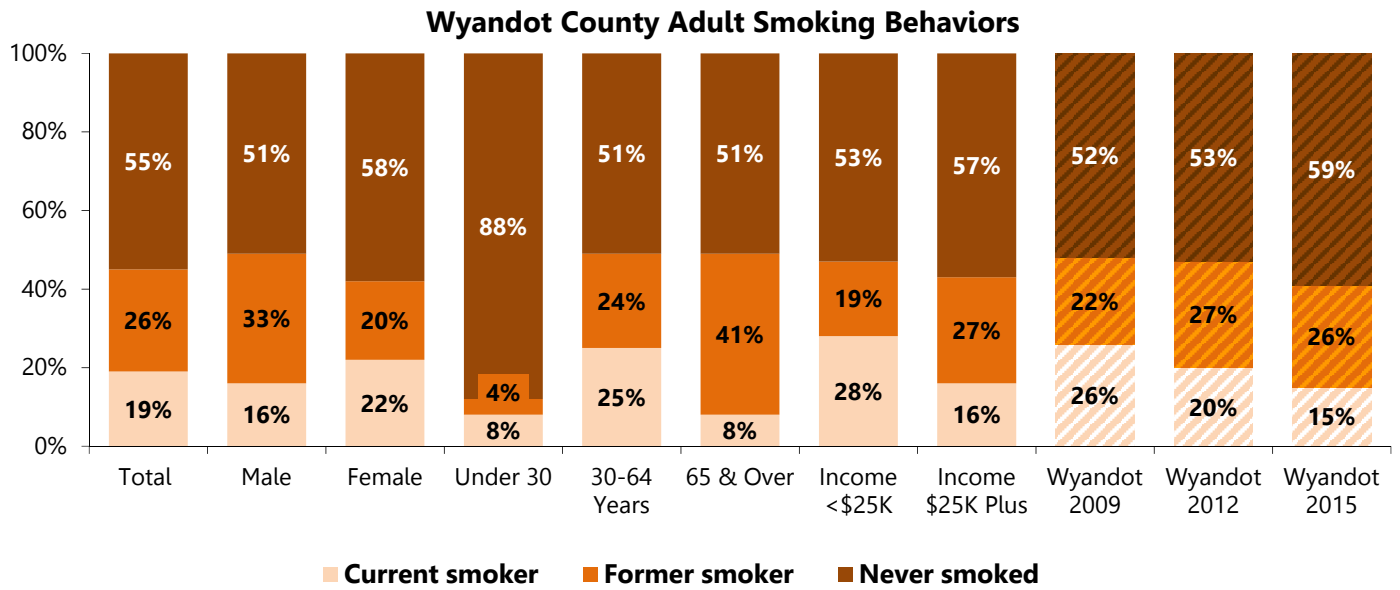
## Adult Tobacco Use Behaviors

- In 2018, nearly one-in-five (19%) Wyandot County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days). The 2016 BRFSS reported current smoker prevalence rates of 23% for Ohio and 17% for the U.S.
- More than one-quarter (26%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). The 2016 BRFSS reported former smoker prevalence rates of 24% for Ohio and 25% for the U.S.
- Wyandot County adult smokers were more likely to have:
  - Been a member of an unmarried couple (41%) or divorced (36%)
  - Rated their overall health as poor (31%)
  - Incomes less than \$25,000 (28%)
  - Been ages 30 to 64 (25%)
- Wyandot County adults used the following tobacco products in the past year: cigarettes (26%); e-cigarettes/vape pens (7%); chewing tobacco, snuff, dip, or Betel quid (7%); cigars (2%); little cigars (2%); pouch (2%); pipes (1%); cigarillos (1%); hookah (1%); and dissolvable tobacco (<1%).
- Thirty-eight percent (38%) of current smokers had stopped smoking for at least one day in the past year because they were trying to quit smoking.
- Wyandot County adults had the following rules/practices about smoking in their home: never allowed (77%), allowed anywhere (8%), allowed in certain rooms (6%), and not allowed when children are present (5%).
- Wyandot County adults had the following rules/practices about smoking in their car: never allowed (68%), allowed with windows open (8%), not allowed when children are present (7%), and allowed anywhere (5%).
- Two-fifths (40%) of adults believed e-cigarette vapor was harmful to themselves, and 37% believed it was harmful to others. Seven percent (7%) of adults did not believe e-cigarette vapor was harmful to anyone. Half (50%) of adults did not know if e-cigarette vapor was harmful.

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Current smoker</b> (currently smoke some or all days)	26%	20%	15%	19%	23%	17%
<b>Former smoker</b> (smoked 100 cigarettes in lifetime & now do not smoke)	22%	27%	26%	26%	24%	25%
<b>Tried to quit smoking</b> (on at least one day in the past year)	82%	78%	46%	38%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Wyandot County adults' smoking behaviors. Examples of how to interpret the information include: 19% of all Wyandot County adults were current smokers, 26% of all adults were former smokers, and 55% had never smoked.



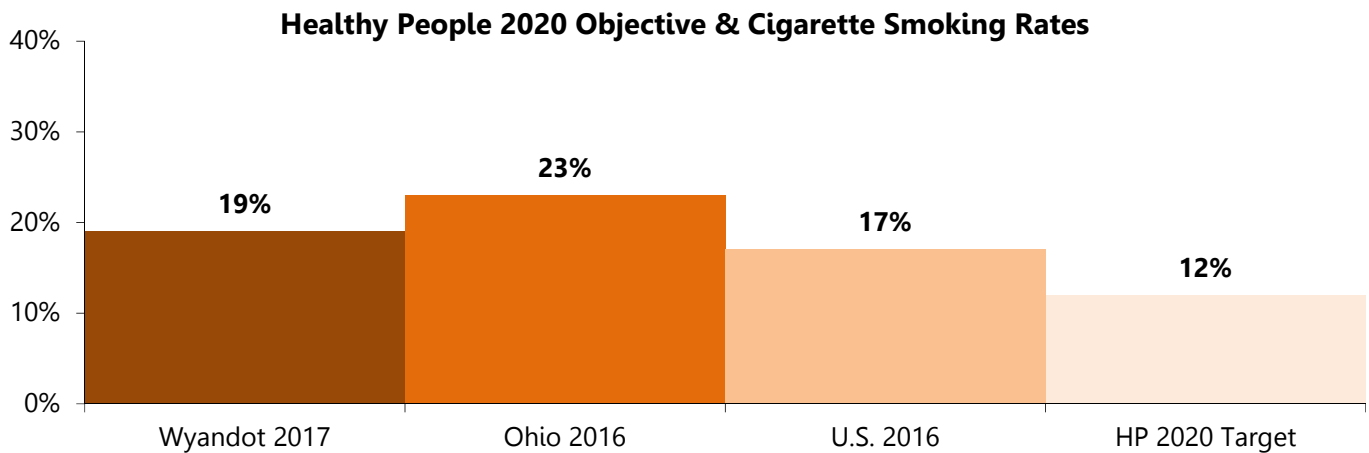
*Respondents were asked: "Have you smoked at least 100 cigarettes in your entire life? If yes, do you now smoke cigarettes every day, some days or not at all?"*

*Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

## 26% of Wyandot County adults indicated that they were former smokers.

The following graph shows Wyandot County, Ohio, and U.S. adult cigarette smoking rates. The BRFSS rates shown for Ohio and the U.S. were for adults 18 years and older. The graph shows:

- The Wyandot County adult cigarette smoking rate was lower than the Ohio rate but higher than the U.S. rate and the Healthy People 2020 target objective.



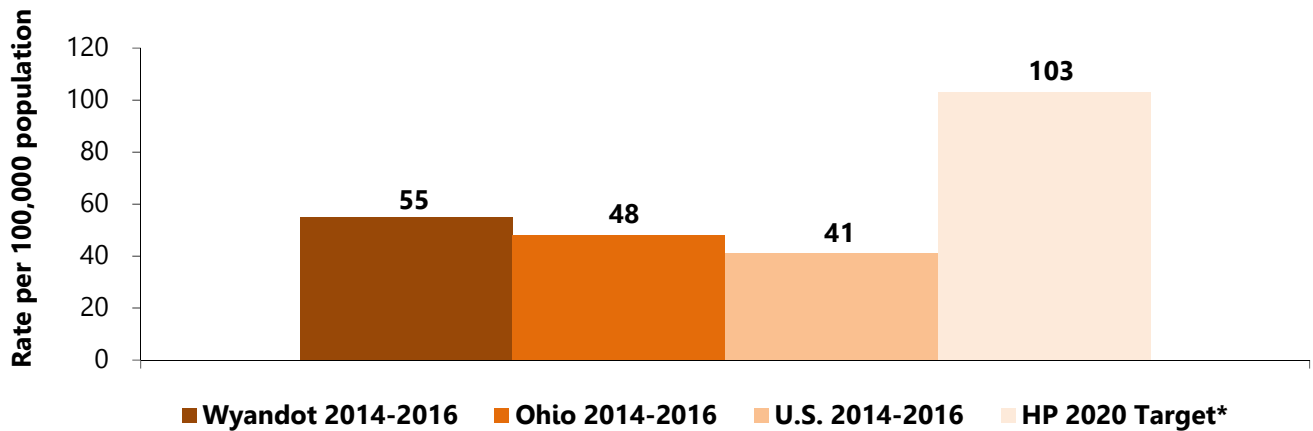
*(Source: 2018 Wyandot County Health Assessment, 2016 BRFSS and Healthy People 2020)*



The following graphs show Wyandot County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD), as well as lung and bronchus cancer in comparison with the Healthy People 2020 objective. These graphs show:

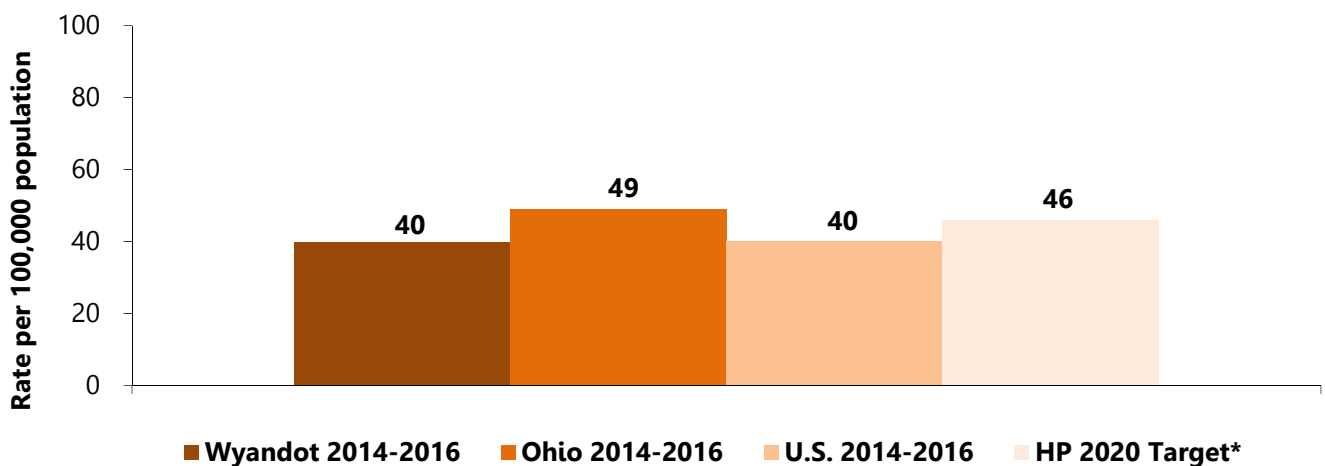
- From 2014 to 2016, Wyandot County’s age-adjusted mortality rate for chronic lower respiratory diseases was higher than the Ohio and U.S. rates, but lower than the HP 2020 target objective rate.
- Wyandot County’s age-adjusted mortality rate for lung and bronchus cancer was the same as the U.S. rate and lower than the Ohio rate and the Healthy People 2020 target objective.

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



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

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

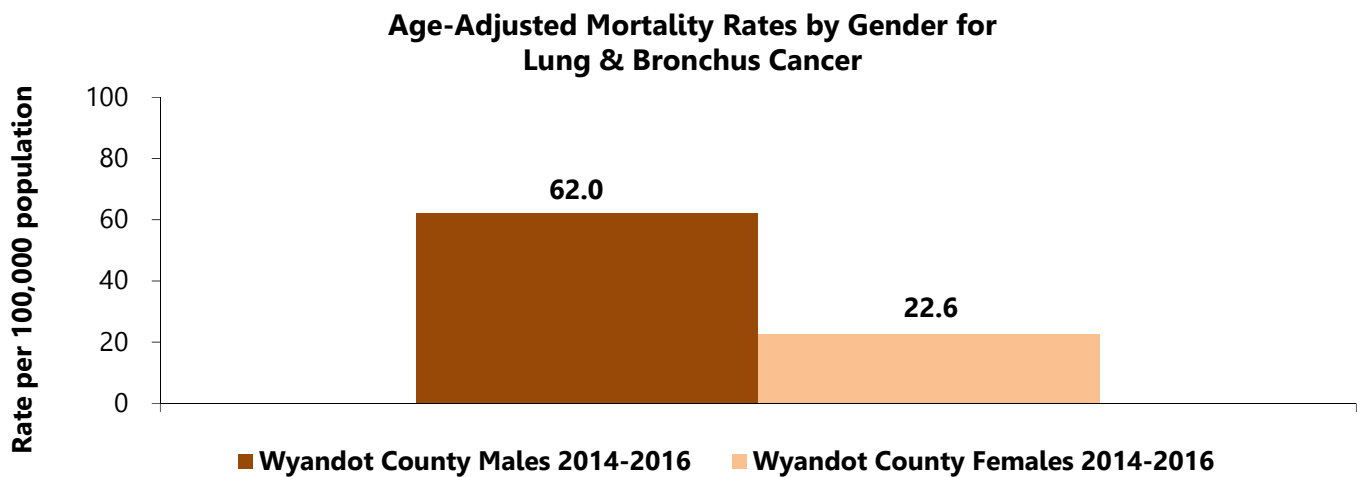


\*The Health People 2020 target objective only includes the age-adjusted lung cancer death rate

(Sources for graphs: Ohio Public Health Data Warehouse, 2014-2016, CDC Wonder, 2014-2016 and Healthy People 2020)

The following graph shows the Wyandot County age-adjusted mortality rates for lung and bronchus cancer by gender. The graph shows:

- Disparities existed by gender for Wyandot County lung and bronchus cancer age-adjusted mortality rates. The Wyandot County male rate was substantially higher than the female rate.



(Sources: Ohio Public Health Data Warehouse, 2014-2016)

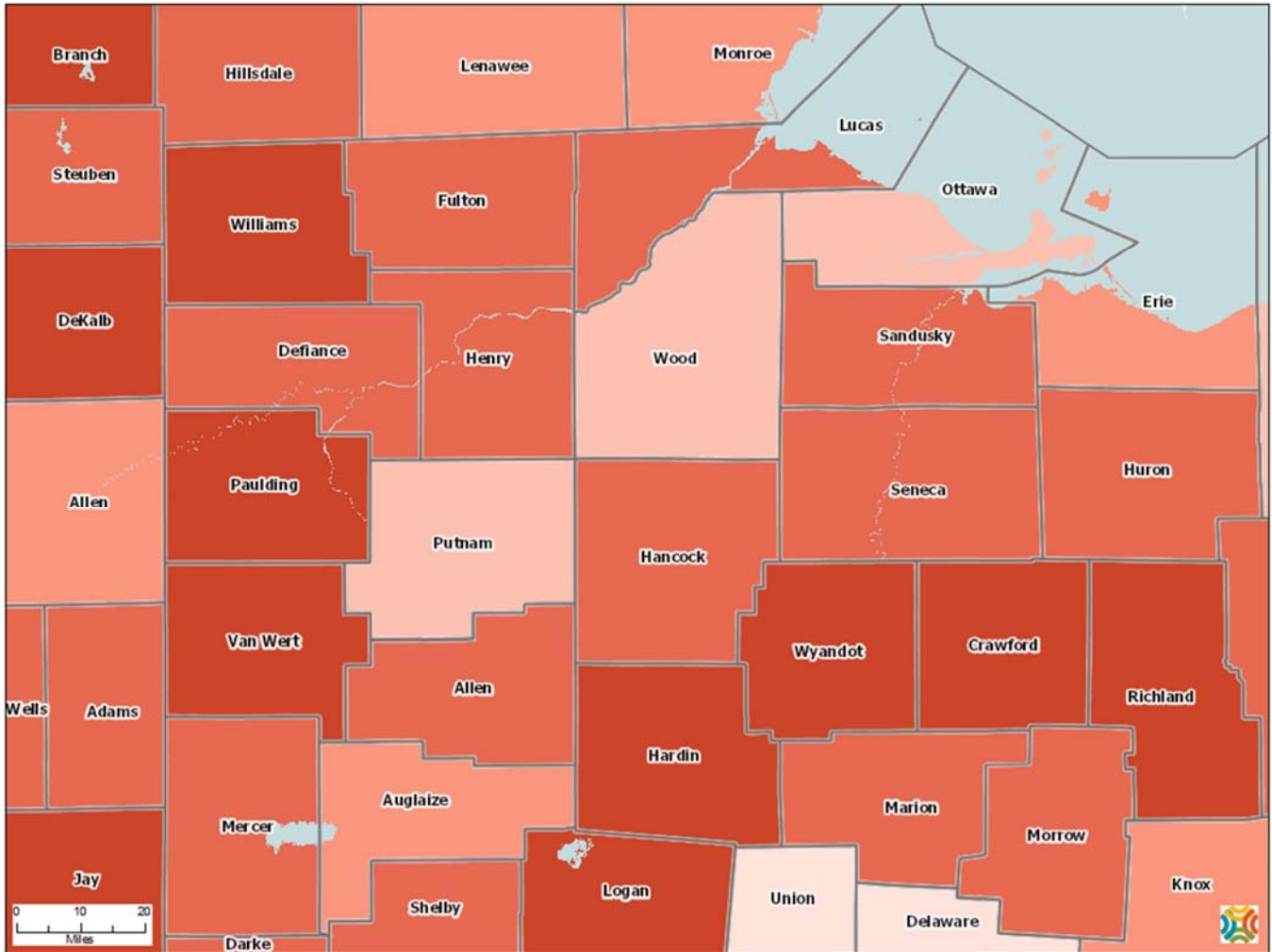
**In 2018, 19% of Wyandot County adults were current smokers.**

### Smoking and Other Health Risks

- Smoking can make it harder for a woman to become pregnant and can affect her baby's health before and after birth. Smoking increases risks for:
  - Preterm (early) delivery
  - Stillbirth (death of the baby before birth)
  - Low birth weight
  - Sudden infant death syndrome (known as SIDS or crib death)
  - Ectopic pregnancy
  - Orofacial clefts in infants
- Smoking can also affect men's sperm, which can reduce fertility and also increase risks for birth defects and miscarriage (loss of the pregnancy).
- Smoking can affect bone health.
  - Women past childbearing years who smoke have lower bone density (weaker bones) than women who never smoked and are at greater risk for broken bones.
- Smoking affects the health of your teeth and gums and can cause tooth loss.
- Smoking can increase your risk for cataracts (clouding of the eye's lens that makes it hard for you to see) and age-related macular degeneration (damage to a small spot near the center of the retina, the part of the eye needed for central vision).
- Smoking is a cause of type 2 diabetes mellitus and can make it harder to control. The risk of developing diabetes is 30-40% higher for active smokers than nonsmokers.
- Smoking causes general adverse effects on the body, including inflammation and decreased immune function.
- Smoking is a cause of rheumatoid arthritis.

(Source: CDC, *Smoking & Tobacco Use, Smoking and Other Health Risks*, updated May 15, 2017)

## Cigarette Expenditures, Percent of Total Expenditures, National Rank by Tract, Nielsen, 2014\*



*(Source: Community Commons, Nielsen, Nielsen SiteReports: 2014, as compiled by Community Commons)*

*Description of indicator: To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map.*

*\*Tobacco expenditures indicate cigarettes only; cigars and other tobacco products are not included*

# Health Behaviors: Adult Alcohol Consumption

## Key Findings

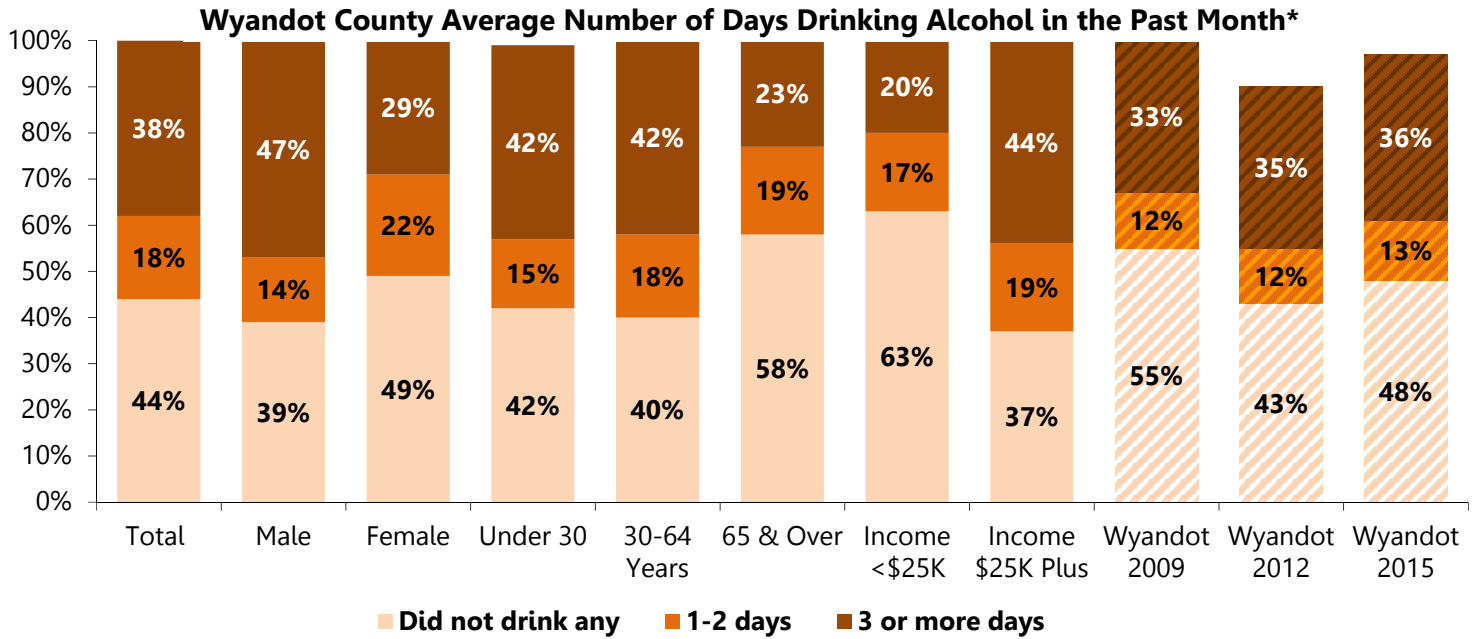
*Fifty-six percent (56%) of Wyandot County adults had at least one alcoholic drink in the past month and would be considered current drinkers. Nearly one-quarter (22%) of all adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers.*

## Adult Alcohol Consumption

- Fifty-six percent (56%) of Wyandot County adults had at least one alcoholic drink in the past month, increasing to 63% of those with incomes more than \$25,000. The 2016 BRFSS reported current drinker prevalence rates of 53% for Ohio and 54% for the U.S.
- Of those who drank, Wyandot County adults drank 3.3 drinks on average, increasing to 4.1 drinks for those with incomes less than \$25,000.
- Nearly one-quarter (22%) of Wyandot County adults 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 (the 2016 BRFSS reported binge drinking rates of 18% for Ohio and 17% for the U.S.). Of those who drank in the past month, 44% had at least one episode of binge drinking.
- About one-fifth (19%) of adults reported driving after having any alcoholic beverages in the past 30 days, increasing to 25% of those with incomes more than \$25,000.
- In the past month, 3% of Wyandot County adults reported driving a motor vehicle after having 5 or more alcoholic drinks.
- Wyandot County adults reported that as a result of drinking, they or someone in their household placed themselves in dangerous situations (1%), failed to fulfill obligations at home (<1%), failed to fulfill obligations at work (<1%), had legal problems (<1%), and got a DUI (<1%).
- Wyandot County adults experienced the following in the past six months: drove a vehicle or other equipment after having any alcoholic beverage (14%); drank more than they expected (6%); used prescription drugs while drinking (3%); spent a lot of time drinking (3%); drank more to get the same effect (2%); continued to drink despite problems caused by drinking (1%); gave up other activities to drink (1%); tried to quit or cut down but could not (1%); failed to fulfill duties at work, home, or school (1%); placed themselves or their family in harm (1%); had legal problems (<1%); and drank to ease withdrawal symptoms (<1%).

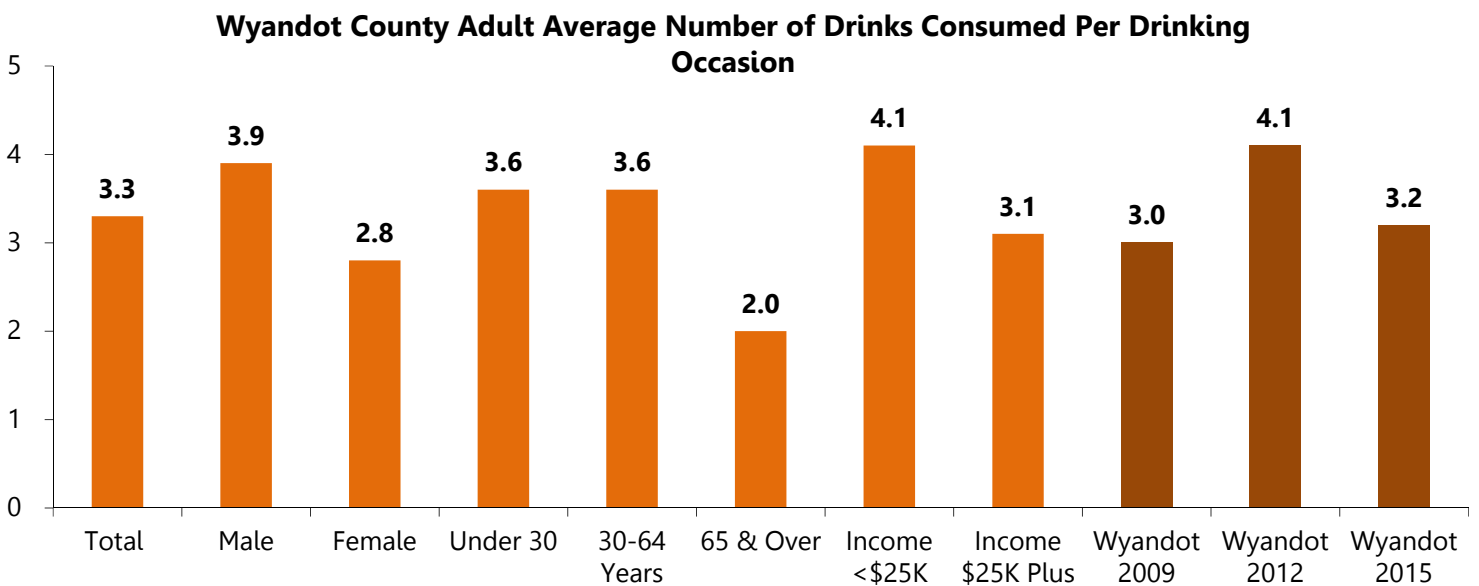
Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Current drinker</b> (drank alcohol at least once in the past month)	45%	47%	49%	56%	53%	54%
<b>Binge drinker</b> (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days)	22%	19%	18%	22%	18%	17%

The following graphs show the percentage of Wyandot County adults who consumed alcohol and the amount consumed on average in the past month. Examples of how to interpret the information shown on the first graph include: 44% of all Wyandot County adults did not drink alcohol in the past month, including 39% of males and 49% of females.



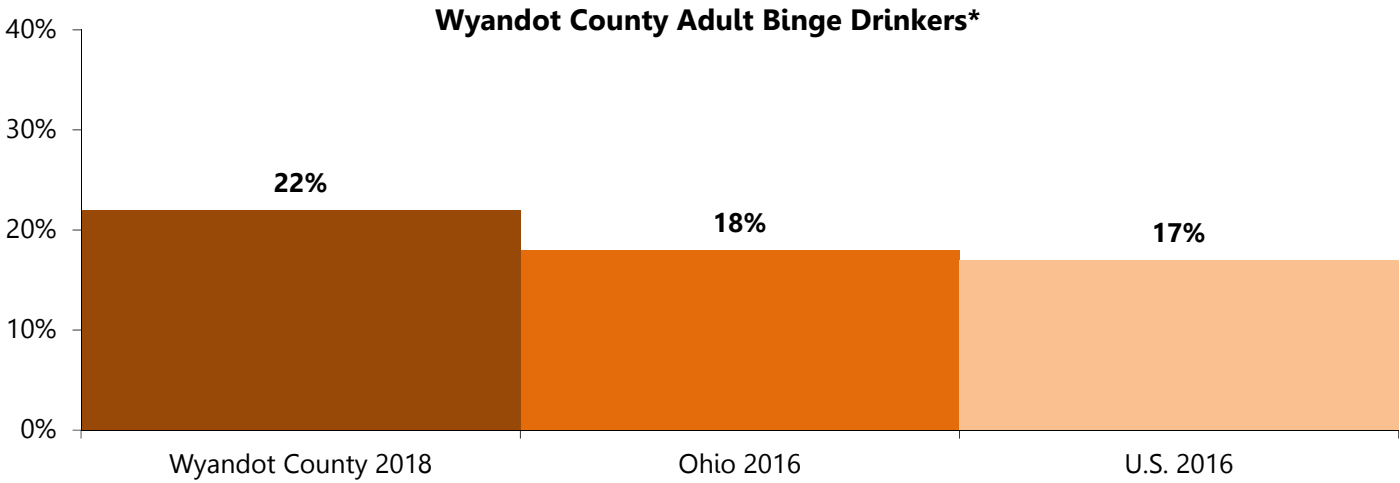
\*Percentages may not equal 100% as some respondents answered, "Don't Know"  
 Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

**56% of Wyandot County adults had at least one alcoholic drink in the past month.**



The following graph shows a comparison of Wyandot County binge drinkers with Ohio and U.S. binge drinkers. The graph indicates:

- In 2018, Wyandot County had a larger percentage of binge drinkers in comparison to Ohio and U.S. rates.



*\*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.*

*(Source: 2016 BRFSS, 2018 Wyandot County Health Assessment)*

### Economic Costs of Excessive Alcohol Use

- Excessive alcohol consumption cost the United States \$249 billion in 2010. This cost amounts to about \$2.05 per drink, or about \$807 per person.
- Costs due to excessive drinking largely resulted from losses in workplace productivity (72% of the total cost), health care expenses (11%), and other costs due to a combination of criminal justice expenses, motor vehicle crash costs, and property damage.
- Excessive alcohol use cost states and DC a median of 3.5 billion in 2010, ranging from \$488 million in North America to \$35 billion in California.
  - Excessive alcohol consumption cost Ohio \$8.5 billion in 2010. This cost amounts to \$2.10 per drink or \$739 per person.
- Binge drinking, defined as consuming 4 or more drinks per occasion for women or 5 or more drinks per occasion for men, was responsible for 77% of the cost of excessive alcohol use in all states and DC.
- About \$2 of every \$5 of the economic costs of excessive alcohol use were paid by federal, state, and local governments.

*(Source: CDC, Alcohol and Public Health – Excessive Drinking, updated June 15, 2017)*

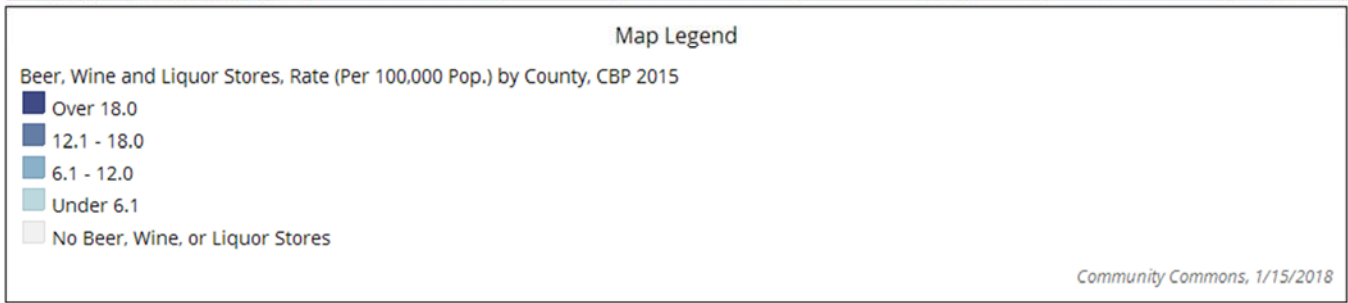
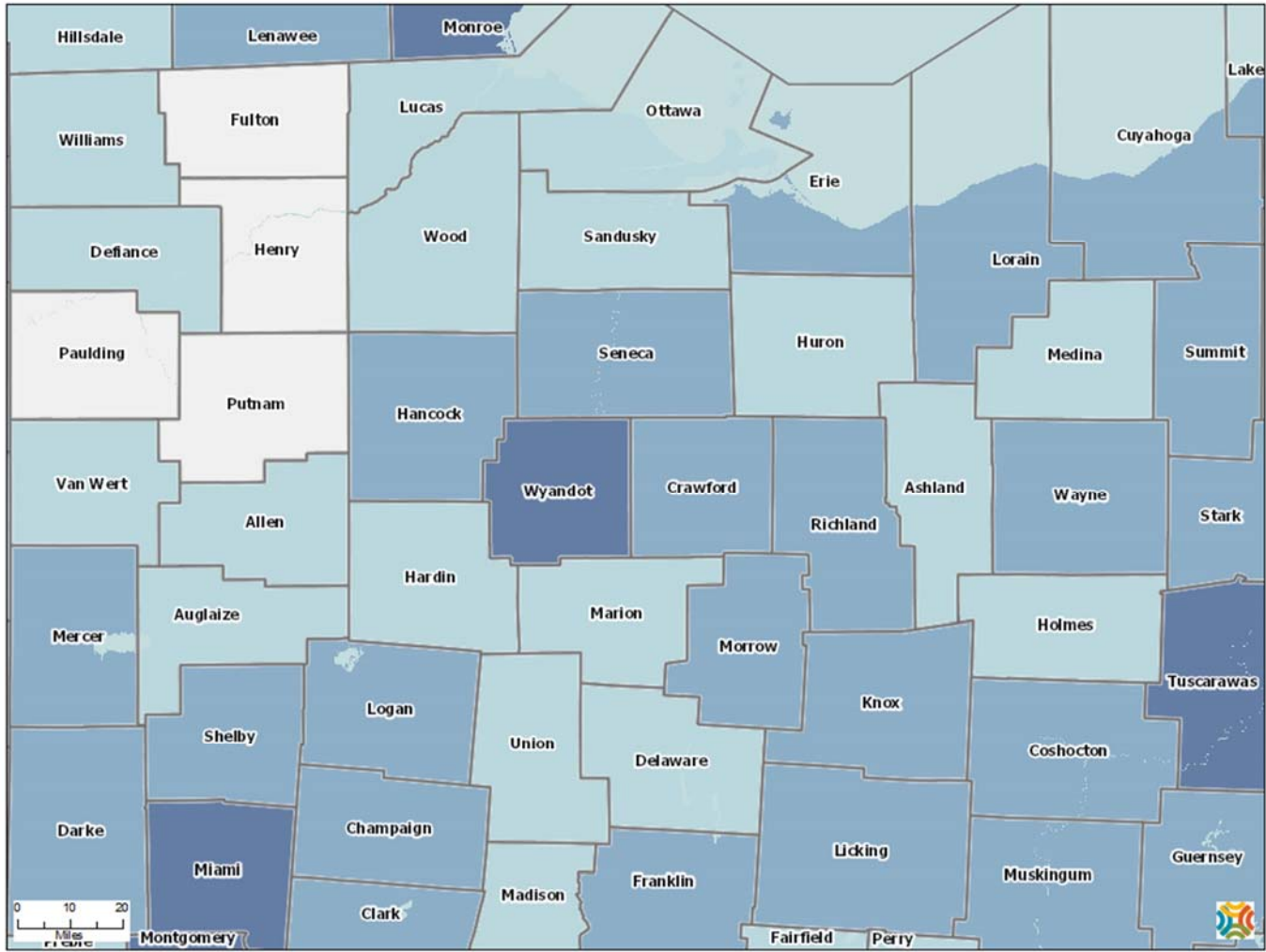
*The following table shows the cities of Carey and Upper Sandusky, Wyandot County, and Ohio motor vehicle accident statistics. The table shows:*

- Three percent (3%) of the total crashes in Wyandot County in 2017 were alcohol-related, compared to 4% for Ohio.
- Of the total number of alcohol-related crashes (20) in Wyandot County, 65% were property damage only, 35% were non-fatal injury, and 0% were fatal injury.
- There were 11,662 alcohol-related crashes in Ohio in 2017. Of those crashes, 56% were property damage only, 41% were non-fatal injury, and 3% were fatal injury.

	City of Carey 2017	City of Upper Sandusky 2017	Wyandot County 2017	Ohio 2017
<b>Total Crashes</b>	34	111	601	296,089
<b>Alcohol-Related Total Crashes</b>	3	2	20	11,662
<b>Fatal Injury Crashes</b>	0	0	3	1,089
<b>Alcohol-Related Fatal Crashes</b>	0	0	0	287
<b>Alcohol Impaired Drivers in Crashes</b>	3	2	20	11,410
<b>Injury Crashes</b>	7	18	90	73,840
<b>Alcohol-Related Injury Crashes</b>	0	0	7	4,793
<b>Property Damage Only</b>	27	93	508	221,160
<b>Alcohol-Related Property Damage Only</b>	3	2	13	6,582
<b>Deaths</b>	0	0	3	1,174
<b>Alcohol-Related Deaths</b>	0	0	0	303
<b>Total Non-Fatal Injuries</b>	9	25	127	106,566
<b>Alcohol-Related Injuries</b>	0	0	7	6,731

*(Source: Ohio Department of Public Safety, Crash Reports, Updated 1/30/18, Traffic Crash Facts)*

## Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by Zip Code, Census Business Patterns (CBP), 2015

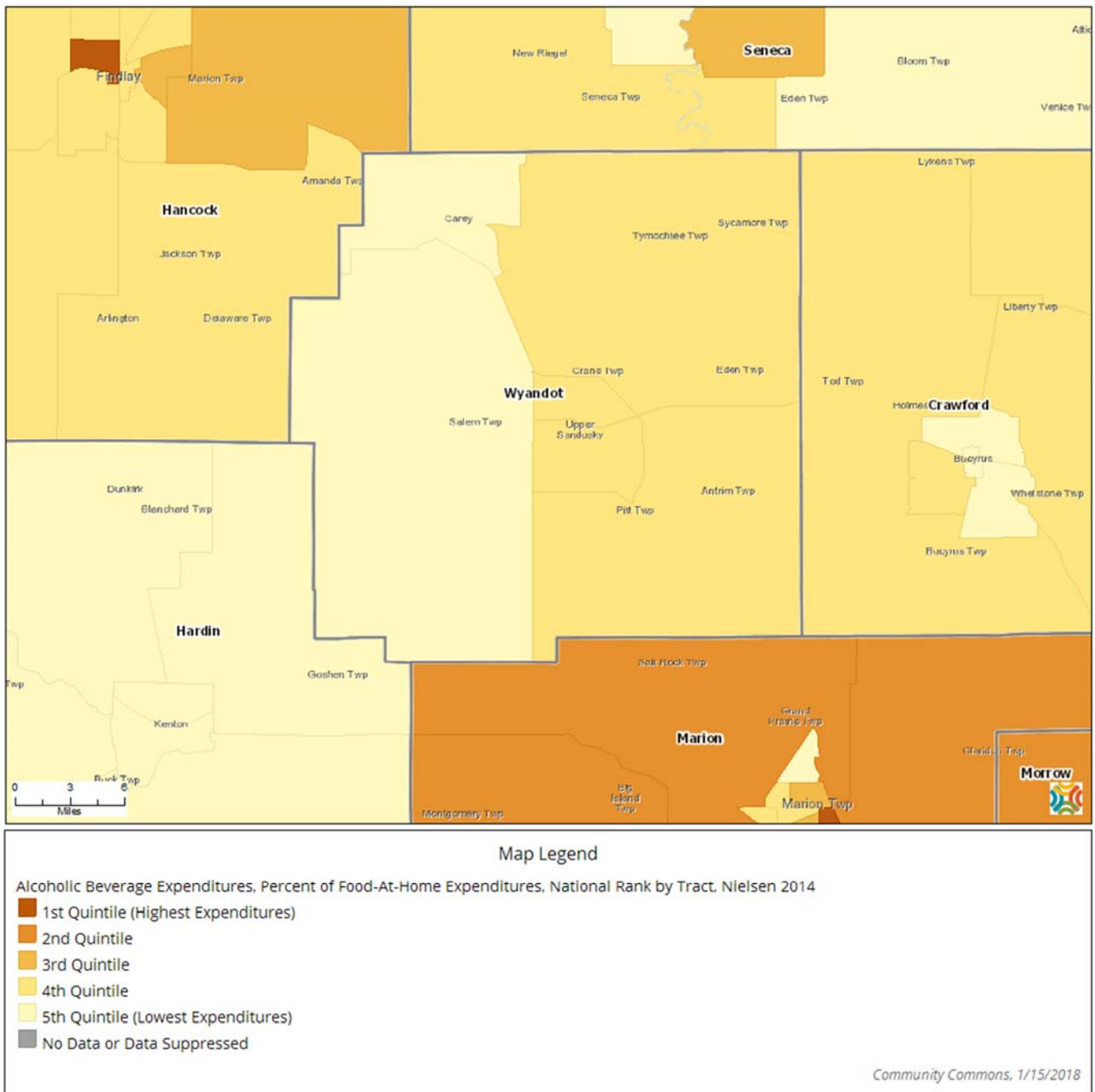


(Source: U.S. Census Bureau, County Business Patterns: 2015 as compiled by Community Commons)

*Description of indicator: Data are from the US Census Bureau's County Business Patterns data series, which classifies businesses using the North American Industry Classification System (NAICS). Map layers include county-level establishment totals and establishment rates per 100,000 population.*



## Alcohol Beverage Expenditures, National Rank by Tract, Nielsen, 2014

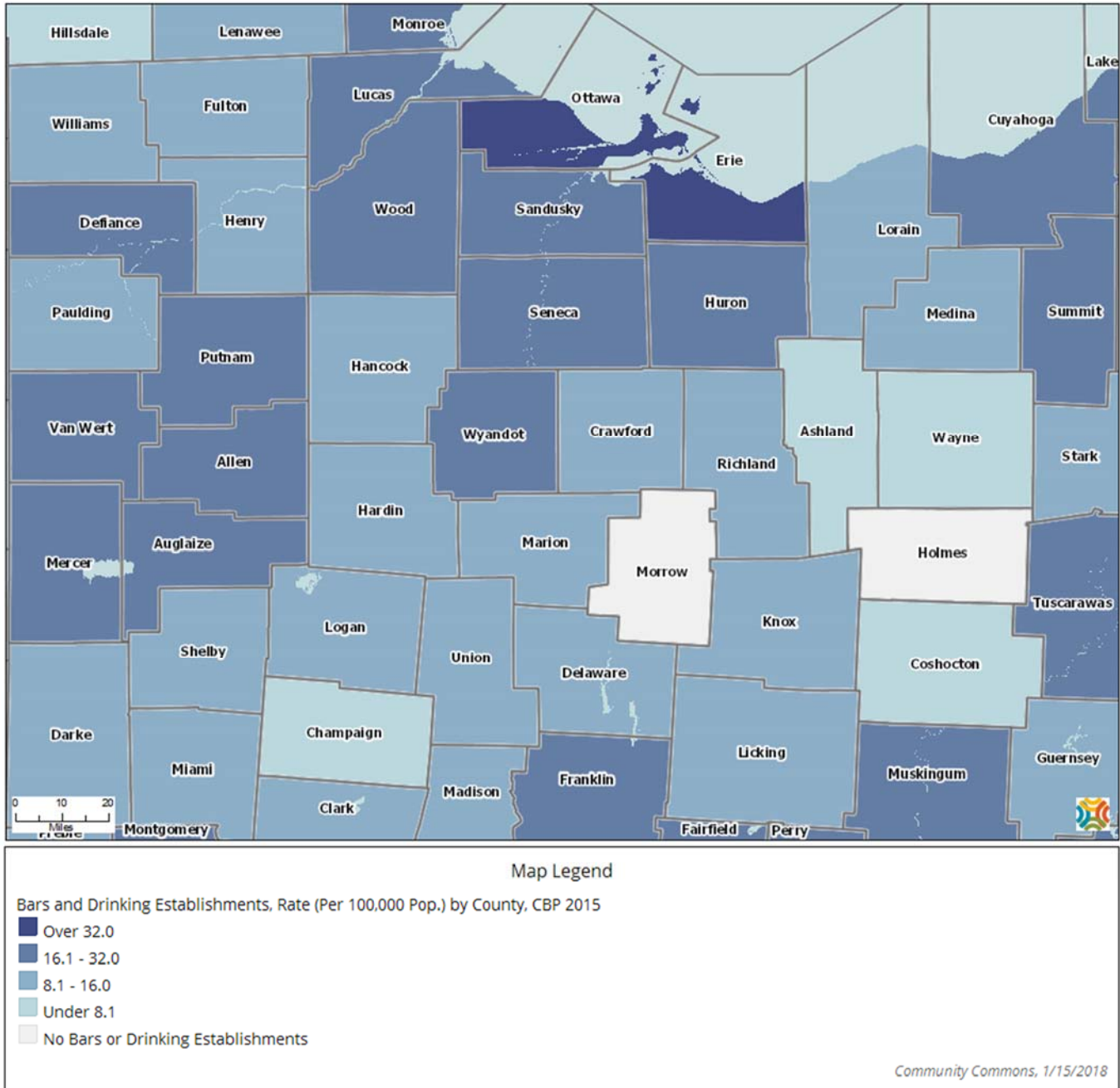


(Source: Nielsen, Nielsen SiteReports: 2014 as compiled by Community Commons)

Description of indicator: Census tract level average and aggregated total household expenditures and category expenditures were acquired from the 2011 Nielsen Consumer Buying Power (CBP) SiteReports. To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map. Additional attributes include each tract's within-state rank and quintile.

\*Alcohol expenditures included in this category are any beer, wine, and liquor purchased for consumption at home. Alcohol purchased at restaurants and bars is not included.

## Bars and Drinking Establishments, Rate (Per 100,000 Pop.) by County, Census Business Patterns (CBP), 2015



(Source: U.S. Census Bureau, County Business Patterns: 2015 as compiled by Community Commons)

Description of indicator: Data are from the US Census Bureau's County Business Patterns data series, which classifies businesses using the North American Industry Classification System (NAICS). Map layers include county-level establishment totals and establishment rates per 100,000 population. The population figures used in this analysis are from the US 2010 Decennial Census.

# Health Behaviors: Adult Drug Use

## Key Findings

*In 2018, 6% of Wyandot County adults had used marijuana during the past 6 months. Seven percent (7%) 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

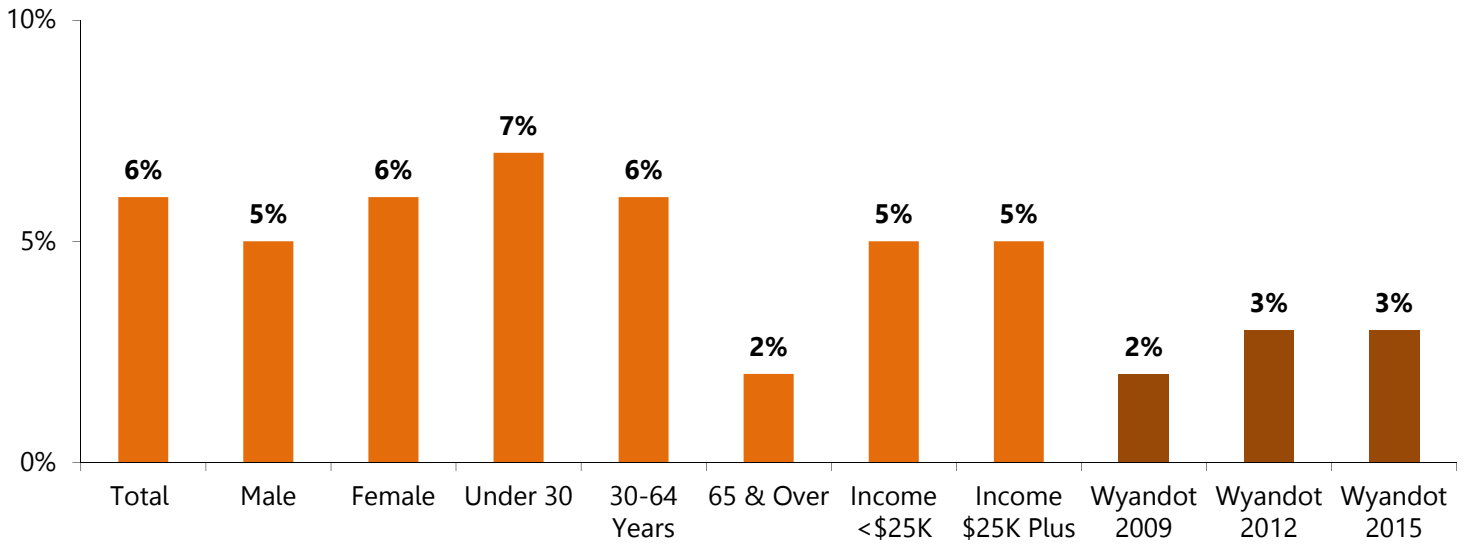
- Six percent (6%) of Wyandot County adults had used marijuana in the past 6 months.
- Three percent (3%) of Wyandot County adults reported using other recreational drugs in the past 6 months such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamines.
- Seven percent (7%) of 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 11% of those with incomes less than \$25,000.
- Wyandot County adults who misused prescription medications obtained them from the following sources: primary care physician (74%), free from friend or family member (12%), multiple doctors (9%), an OB/GYN (5%), and ER or urgent care doctor (3%).
- Wyandot County adults indicated they did the following with their unused prescription medication: took all medication as prescribed (21%), threw it in the trash (13%), kept it (12%), flushed it down the toilet (11%), took it to the Medication Collection program (9%), took it to the sheriff's office (8%), took it in on Drug Take Back Days (6%), kept in a locked cabinet (2%), disposed in a RedMed Box or Yellow Jug (1%), used a mailer to ship it back to the pharmacy (<1%), and gave it away (<1%). Forty-six percent (46%) of adults did not have unused medication.
- Wyandot County adults reported that as a result of using drugs, they or someone in their household had legal problems (2%), had drove a car (2%), failed a drug screen (1%), failed to fulfill obligations at work or home (1%), overdosed and required EMS/hospitalization (<1%), and used farm machinery or equipment (<1%).
- Two percent (2%) of adults used a program or service to help with an alcohol or drug problem for themselves or a loved one. Reasons for not using such a program included the following: had not thought of it (2%), could not afford to go (1%), stigma of seeking drug services (1%), did not want to miss work (1%), did not want to get in trouble (<1%), and fear (<1%). Ninety-six percent (96%) of adults indicated such a program was not needed.

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
<b>Adults who used marijuana in the past 6 months</b>	2%	3%	3%	6%	N/A	N/A
<b>Adults who used recreational drugs in the past 6 months</b>	3%	3%	0%	3%	N/A	N/A
<b>Adults who misused prescription medication in the past 6 months</b>	2%	7%	11%	7%	N/A	N/A

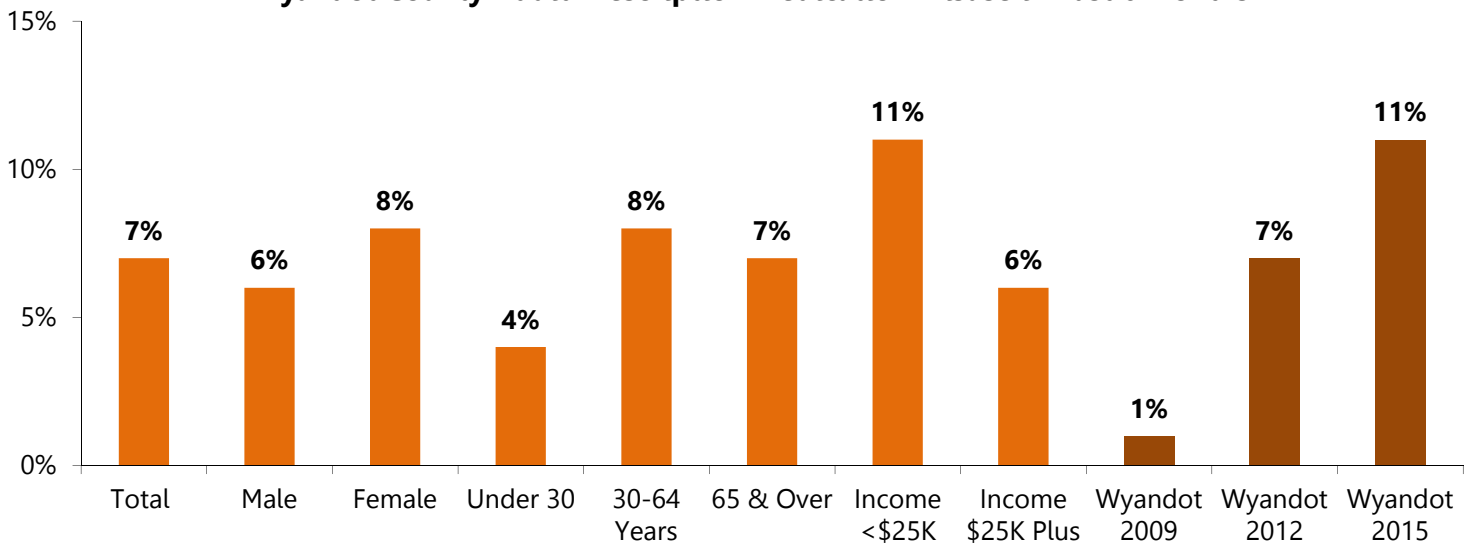
N/A – Not Available

The following graphs indicate adult marijuana and prescription medication misuse during the past 6 months. Examples of how to interpret the information include: 6% of Wyandot County adults used marijuana in the past 6 months, including 7% of those under the age of 30 and 5% of those with incomes less than \$25,000.

### Wyandot County Adult Marijuana Use in Past 6 Months



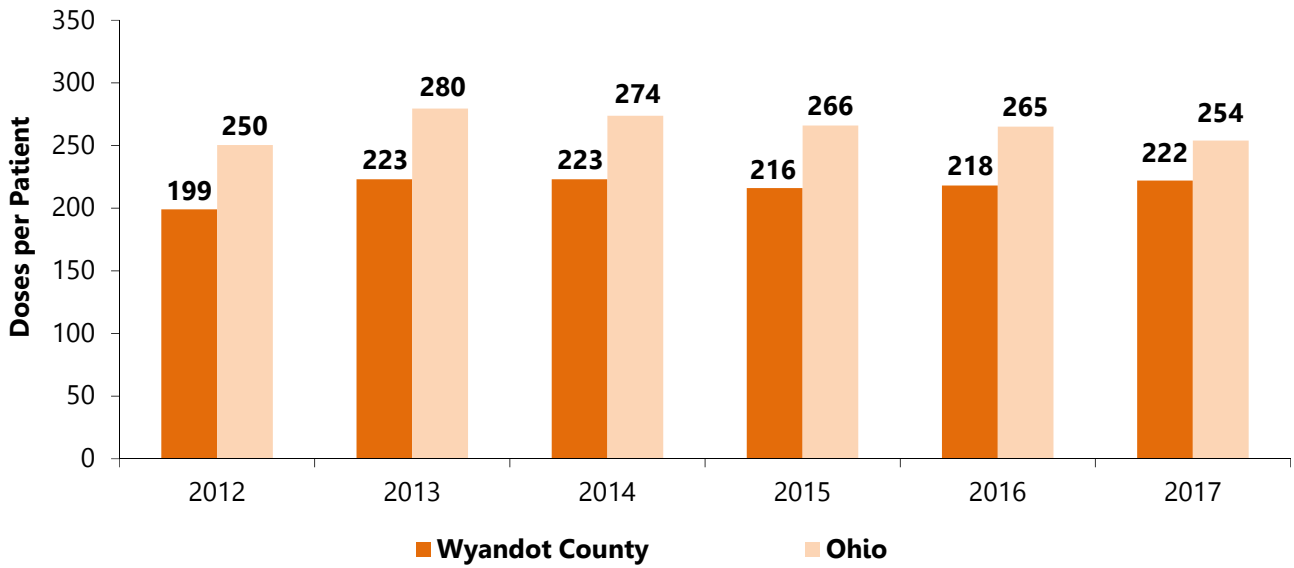
### Wyandot County Adult Prescription Medication Misuse in Past 6 Months



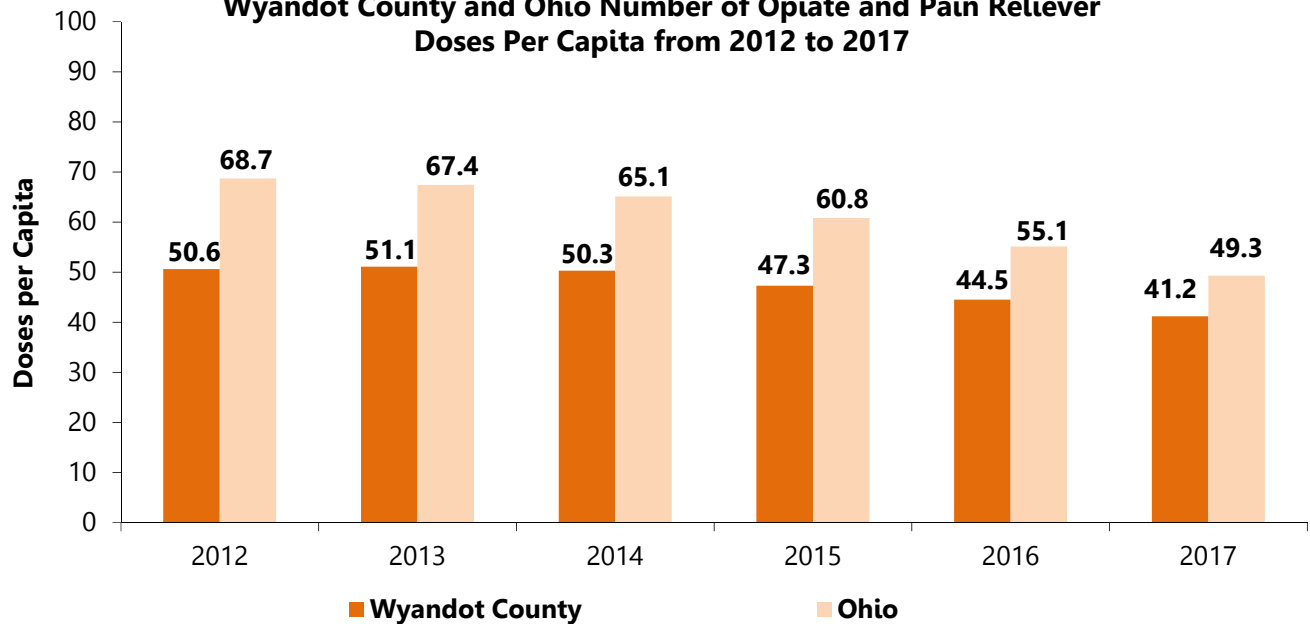
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graphs are data from the Ohio Automated Prescription Reporting System (OARRS) indicating Wyandot County and Ohio opiate and pain reliever doses per patient, as well as doses per capita.

**Wyandot County and Ohio Number of Opiate and Pain Reliever Doses Per Patient from 2012 to 2017**

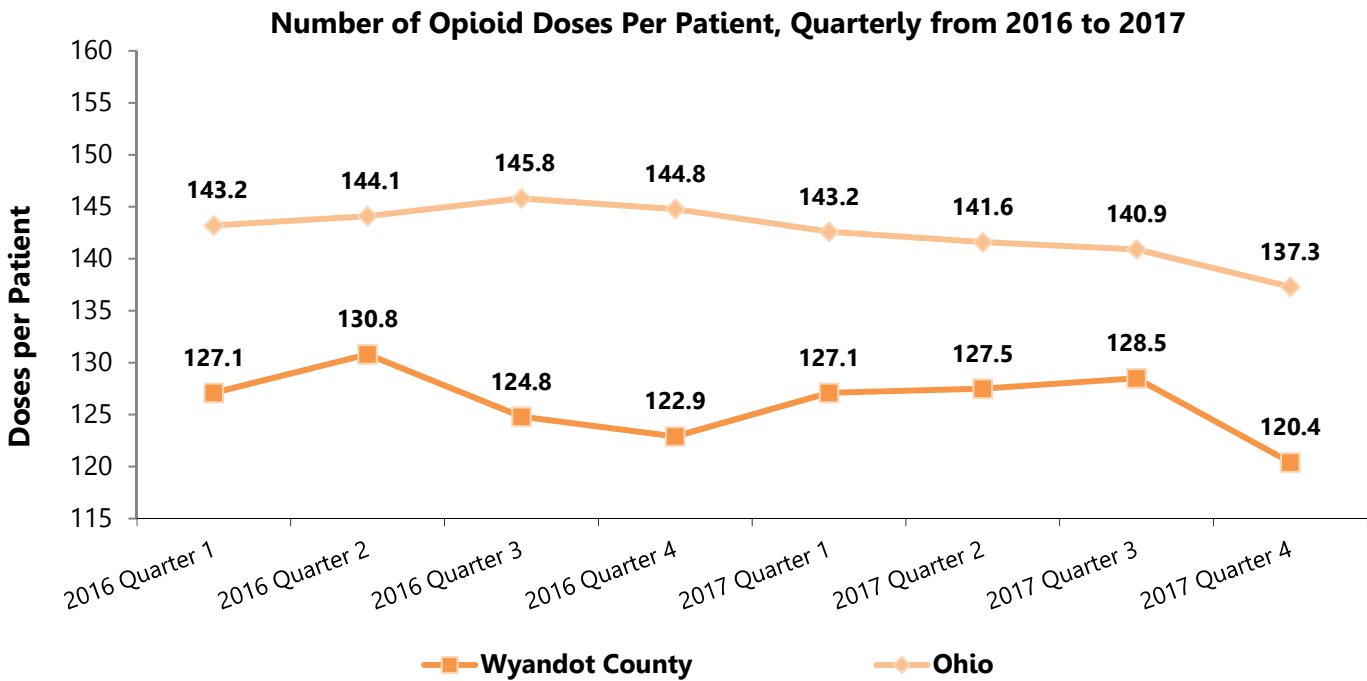
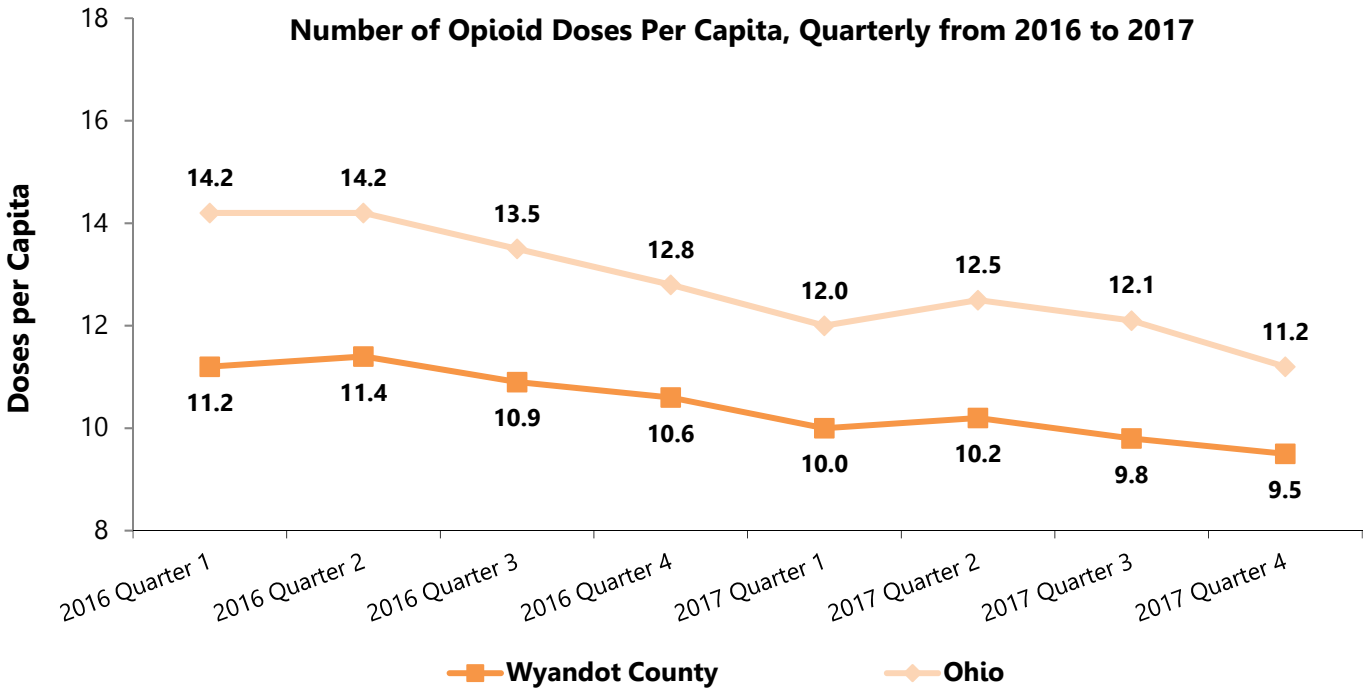


**Wyandot County and Ohio Number of Opiate and Pain Reliever Doses Per Capita from 2012 to 2017**



(Source for graphs: Ohio's Automated Rx Reporting System, 2012-2017, retrieved on 1/29/18)

The following graphs show Wyandot County and Ohio quarterly opiate and pain reliever doses per patient and doses per capita.



(Source for graphs: Ohio's Automated Rx Reporting System, 2016-2017, retrieved on 1/29/18)

## Ohio's New Limits on Prescription Opiates

- The opioid epidemic is undeniably a major public health issue that Ohio has been addressing since 2012. Furthering steps to save lives, Ohio has updated its policies in limiting opiate prescriptions, especially acute pain. With the highlights of Ohio's new opiate prescribing limits below, Ohio hopes to reduce opiate doses by 109 million per year:
  - No more than seven days of opiates can be prescribed for adults; no more than five days of opiates can be prescribed for minors.
  - The total morphine equivalent dose (MED) of a prescription for acute pain cannot exceed an average of 30 MED per day.
  - Health care providers can prescribe opiates in excess of the new limits only if they provide a specific reason in the patient's medical record. Unless such a reason is given, a health care provider is prohibited from prescribing opiates that exceed Ohio's limits.
  - Prescribers will be required to include a diagnosis or procedure code on every controlled substance prescription, which will be entered into Ohio's prescription monitoring program, OARRS.
  - The new limits do not apply to opioids prescribed for cancer, palliative care, end-of-life/hospice care or medication-assisted treatment for addiction.
  - The new limits will be enacted through rules passed by the State Medical Board, Board of Pharmacy, Dental Board and Board of Nursing.
- Since 2012, Ohio has reduced opiate prescriptions by 20% yet more needs to be done to reduce the possibility of opiate abuse to those who are prescribed.

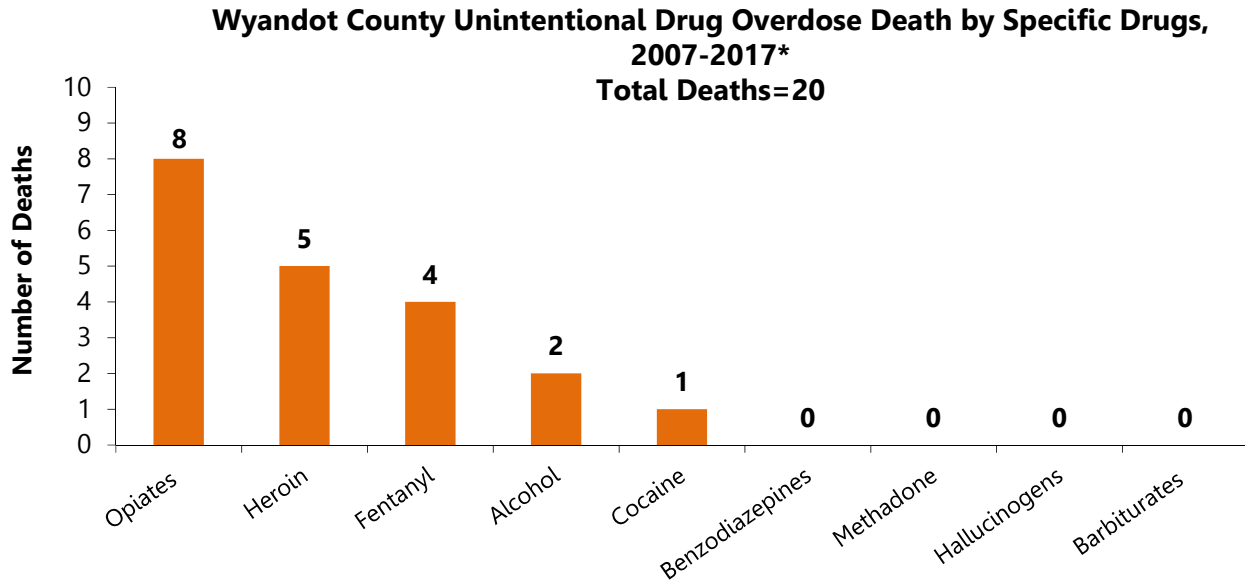
*(Source: Ohio Mental Health and Addiction Services; New Limits on Prescription Opiates Will Save Lives and Fight Addiction, updated March 31, 2017)*

## Ohio Automated Rx Reporting System (OARRS)

- OARRS has been collecting information from all Ohio-licensed pharmacies and Ohio personal licensed prescribers regarding outpatient prescriptions for controlled substance since 2006.
  - All data reported is updated every 24 hours and is maintained in a secure database.
- OARRS aims to be a reliable tool in addressing prescription drug diversion and abuse.
- With many features such as a patient care tool, epidemic early warning system, drug diversion and insurance fraud investigation tool, OARRS is the only statewide electronic database that helps prescribers and pharmacists avoid potential life-threatening drug interactions.
  - OARRS also works in limiting patients who "doctor shop" which refers to individuals fraudulently obtaining prescriptions from multiple health care providers for the same or multiple prescription for abuse or illegal distribution.
- Additionally, OARRS is also used for investigating and identifying health care professionals with continual inappropriate prescribing and dispensing to patients, and then aids in law enforcement cases against such acts.

*(Source: Ohio Automated RX Reporting System; What is OARRS?, updated August 15, 2017)*

The following graph shows the number of unintentional drug overdose deaths by specific drugs from 2007 to 2017 in Wyandot County.



*\*Data for 2017 is incomplete and subject to change  
(Source for graph: Ohio Public Health Data Warehouse, 2007-2017 updated 1/24/18)*

### Abuse of Prescription (Rx) Drugs

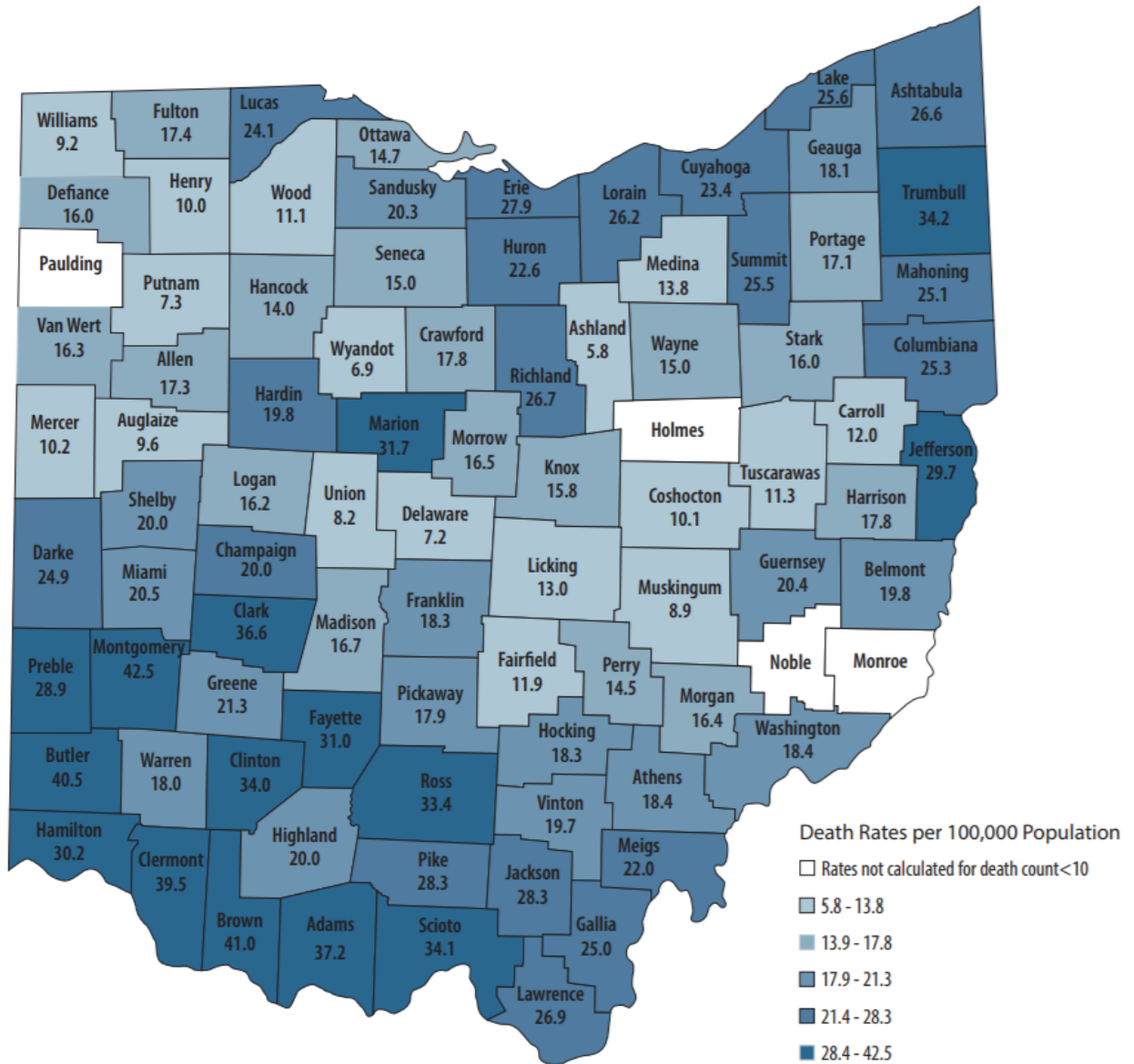
- Young adults (age 18 to 25) are the biggest abusers of prescription (Rx) opioid pain relievers, ADHD, stimulants, and anti-anxiety drugs.
- Reasons for abusing these drugs include: getting high, relieving pain, studying better, dealing with problems, losing weight, feeling better, increasing alertness, and having a good time with friends.
- In 2014, more than 1,700 young adults died from prescription drug (mainly opioid) overdoses- more than died from overdoses of any other drug, including heroin and cocaine combined- and many needed emergency treatment.
- Among young adults, for every death due to Rx drug overdose, there were 22 treatment admissions and 119 emergency room visits.

*(Source: National Institute on Drug Abuse, Abuse of Prescription (Rx) Drugs Affects Young Adults Most, February 2016)*



## Average Age-Adjusted Unintentional Drug Overdose Death Rate Per 100,000 Population, by County, 2011-2016

- The Ohio age-adjusted unintentional drug overdose death rate from 2011 to 2016 was 23.1 deaths per 100,000 population.
- Wyandot County's age-adjusted unintentional drug overdose death rate from 2011 to 2016 was 6.9 deaths per 100,000 population.



(Sources: "2016 Ohio Drug Overdoses Data: General Findings," Ohio Department of Health; Ohio Department of Health, Bureau of Vital Statistics; analysis conducted by ODH Violence and Injury Prevention Program; U.S. Census Bureau (Vintage 2016 population estimates))

Note: Includes Ohio residents who died due to unintentional drug poisoning (underlying cause of death ICD-10 codes X40-X44). Rate suppressed if < 10 total deaths for 2011-2016.

# Health Behaviors: Adult Sexual Behavior

## Key Findings

*In 2018, 65% of Wyandot County adults had sexual intercourse in the past year. Four percent (4%) of adults had more than one partner. Eight percent (8%) of adults had been forced to have sexual intercourse when they did not want to, increasing to 14% of females.*

## Adult Sexual Behavior

- Over three-fifths (65%) of Wyandot County adults had sexual intercourse in the past year. Four percent (4%) of adults reported they had intercourse with more than one partner in the past year, increasing to 11% of those under the age of 30.
- Wyandot County adults used the following methods of birth control: vasectomy (20%), they or their partner were too old (19%), hysterectomy (17%), tubes tied (17%), condoms (12%), birth control pill (11%), ovaries or testicles removed (6%), withdrawal (6%), IUD (3%), abstinence (2%), infertility (2%), rhythm method (2%), and shots (2%).
- Nine percent (9%) of Wyandot County adults did not use any method of birth control.
- The following situations applied to Wyandot County adults: had sex without a condom in the past year (30%), had anal sex without a condom in the past year (4%), had sex with someone they met on social media (3%), were forced to have sex (3%), tested for an STD in the past year (2%), had four or more sexual partners in the past year (2%), had sex with someone they did not know (2%), had sexual activity with someone of the same gender (1%), tested positive for HPV (1%), treated for an STD in the past year (<1%), and tested positive for Hepatitis C (<1%).
- Eight percent (8%) of adults had been forced to have sexual intercourse when they did not want to, increasing to 12% of those with incomes less than \$25,000 and 14% of females.
- Thirteen percent (13%) of adults had engaged in sexual activity following alcohol or other drug use that they would not have done if sober.

## Contraceptive Use in the United States

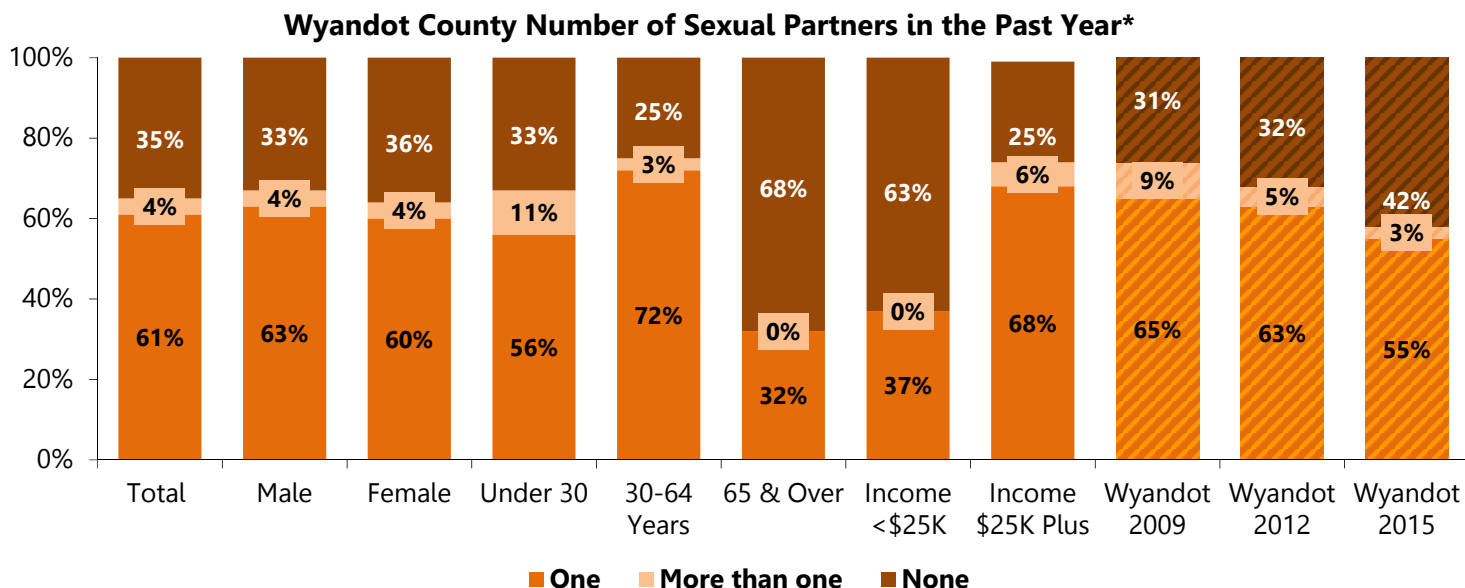
- Sixteen percent (16%) of women aged 15-44 are currently using birth control pills.
- Eight percent (8%) of women aged 15-44 are currently using long-acting reversible contraception such as an Intrauterine device or contraceptive implant.
- Fourteen percent (14%) of women aged 15-44 are currently using female sterilization.
- Five percent (5%) of women aged 15-44 are currently using male sterilization.

*(Source: CDC, National Center for Health Statistics, Contraceptive Use, Last Updated July 15, 2016)*

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Had more than one sexual partner in past year	5%	5%	3%	4%	N/A	N/A
Had ever engaged in sexual activity following alcohol or other drug use	N/A	12%	11%	13%	N/A	N/A

N/A – Not Available

*The following graph shows the number of sexual partners Wyandot County adults had in the past year. Examples of how to interpret the information in the graph include: 61% of all Wyandot County adults had one sexual partner in the past 12 months, and 4% had more than one; additionally, 63% 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?"  
 Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

### Understanding Sexual Violence

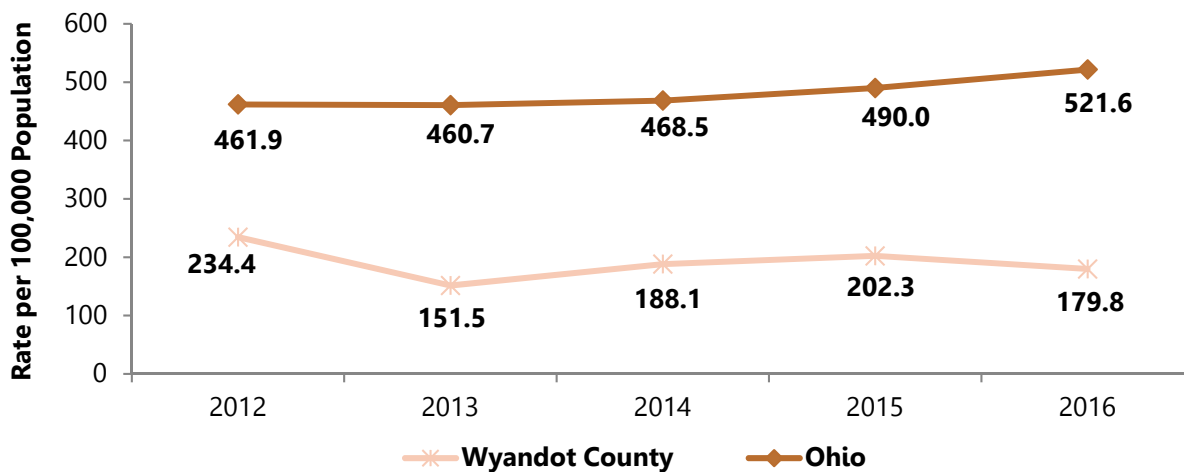
- Sexual violence refers to any sexual activity where consent is not obtained or freely given.
- Anyone can experience or perpetrate sexual violence.
  - Most victims of sexual violence are female.
  - Perpetrators are usually someone known to the victim.
- There are many types of sexual violence including unwanted touching, unwanted sexual penetration, sexual harassment, and threats.
- Sexual violence is a significant problem in the United States, even though many cases are not reported.
  - 7.3% of high school students reported having been forced to have sex
  - An estimated 20 to 25% of college women in the U.S. were victims of attempted or completed rape during their college career
  - About 1 in 5 women and 1 in 59 men in the U.S. have been raped at some time in their lives
- Sexual violence can negatively impact health in many ways including chronic pain and STD's and is also linked to negative health behaviors including tobacco, drug, and alcohol abuse.
- The ultimate goal is to stop sexual violence before it begins. Many activities are needed to accomplish this goal including:
  - Engaging middle and high school students in skill-building activities that address healthy sexuality.
  - Helping parents identify and address violent attitudes and model healthy relationships.
  - Engaging youth and adults as positive bystanders to speak up against sexism and violence supportive behaviors and intervene when they see someone at risk.
  - Creating and enforcing policies at work, school, and other places that address sexual harassment.
  - Implementing evidence-based prevention strategies in schools and communities.

*(Source: CDC, Sexual Violence, last updated April 4, 2017)*

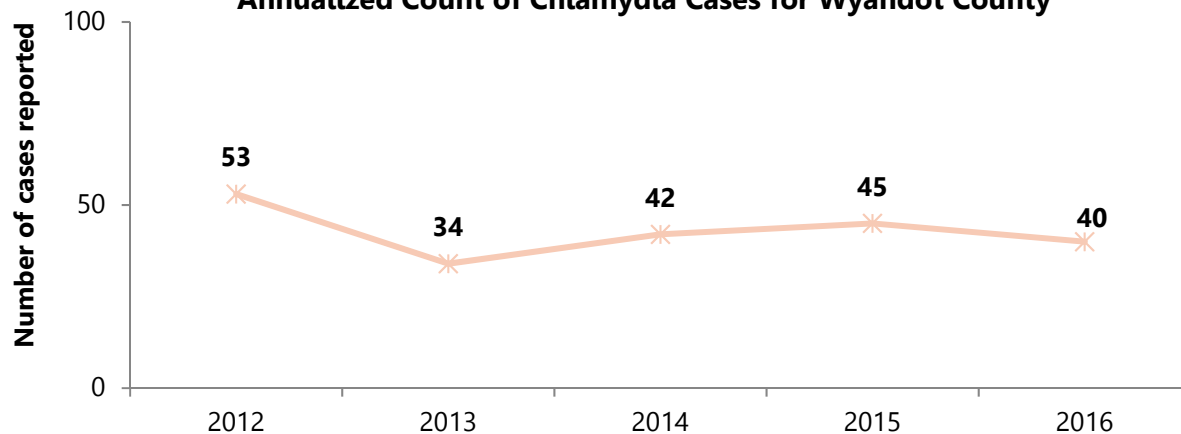
The following graphs show Wyandot County chlamydia disease rates per 100,000 population and the number of chlamydia disease cases. The graphs show:

- Wyandot County chlamydia rates fluctuated from 2012 to 2016.
- The number of chlamydia cases in Wyandot County decreased from 2015 to 2016.

**Chlamydia Annualized Disease Rates for Wyandot County and Ohio**



**Annualized Count of Chlamydia Cases for Wyandot County**

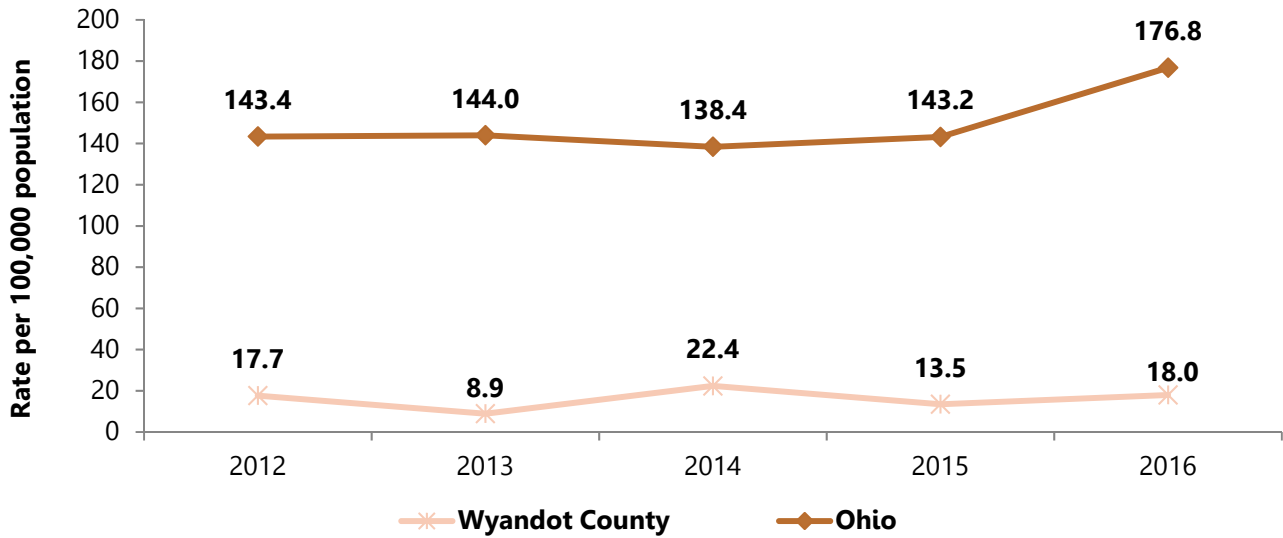


(Source for graphs: ODH, STD Surveillance, data reported through 5/7/17, updated on 1/25/18)

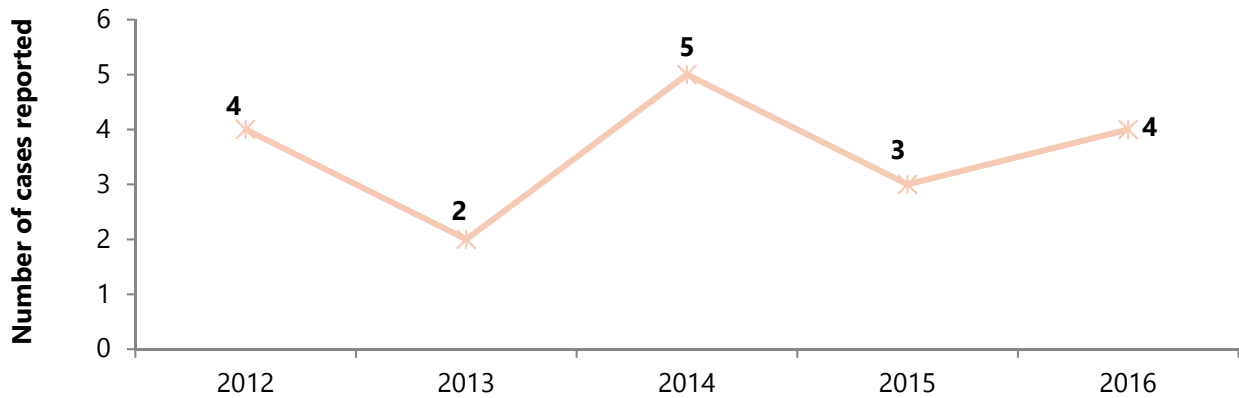
The following graphs show Wyandot County gonorrhea disease rates per 100,000 population and the number of gonorrhea disease cases. The graphs show:

- The Wyandot County gonorrhea rate fluctuated from 2012 to 2016.
- The number of gonorrhea cases in Wyandot County varied from 2012 to 2016.

**Gonorrhea Annualized Disease Rates for Wyandot County and Ohio**



**Annualized Count of Gonorrhea Cases for Wyandot County**

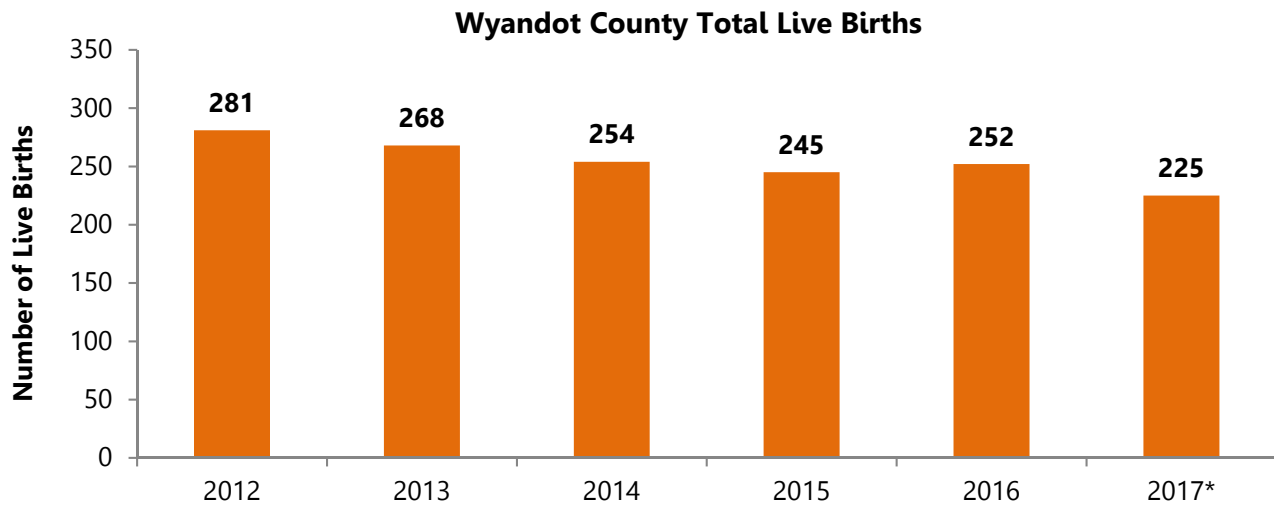


(Source for graphs: ODH, STD Surveillance, data reported through 5/7/17, updated on 1/25/18)

## Pregnancy Outcomes

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

- From 2012 to 2017, there was an average of 254 live births per year in Wyandot County.



*\*Data for 2017 is partial and incomplete, and should be used with caution  
(Source: ODH, Ohio Public Health Data Warehouse Updated 3/29/18)*

# Health Behaviors: Adult Mental Health

## Key Findings

*In 2018, 3% of Wyandot County adults considered attempting suicide. Eleven percent (11%) of Wyandot County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems.*

## Adult Mental Health

- Wyandot County adults experienced the following almost every day for two weeks or more in a row when they were feeling sad, blue, or depressed: had trouble sleeping/slept too much (26%); felt fatigued, no energy (25%); woke up before they wanted (16%); felt worthless or hopeless (15%); had trouble thinking or concentrating (15%); felt extremely restless or slowed down (14%); lost interest in most things (13%); weight or appetite changed (13%); thought about death or suicide (5%); and attempted suicide (<1%).
- Three percent (3%) of Wyandot County adults considered attempting suicide in the past year.
- Two percent (2%) of adults made a plan about how they would attempt suicide in the past year.
- Less than one percent (<1%) of adults reported attempting suicide in the past year.
- Wyandot County adults reported they or a family member were diagnosed with, or treated for, the following mental health issues: depression (25%), anxiety or emotional problems (22%), an anxiety disorder (14%), attention deficit disorder (ADD/ADHD) (9%), post-traumatic stress disorder (PTSD) (6%), bipolar (6%), autism spectrum (3%), developmental disability (3%), alcohol and illicit drug abuse (3%), other trauma (2%), eating disorder (2%), problem gambling (1%), life-adjustment disorder/issue (<1%), and some other mental health disorder (5%). Twenty-two percent (22%) of adults indicated they or a family member had taken medication for one or more mental health issues.
- Wyandot County adults indicated the following caused them anxiety, stress, or depression: financial stress (34%), job stress (30%), death of close family member or friend (20%), marital/dating relationship (18%), poverty/no money (18%), fighting at home (16%), sick family member (13%), raising/caring for children (11%), other stress at home (11%), family member with mental illness (7%), caring for a parent (6%), unemployment (5%), divorce/separation (3%), not having enough to eat (3%), not feeling safe in the community (1%), not feeling safe at home (<1%), sexual orientation/gender identity (<1%), not having a place to live (<1%), and other causes (9%).
- Wyandot County adults dealt with stress in the following ways: talked to someone they trust (37%), listened to music (33%), prayer/meditation (31%), slept (30%), ate more or less than normal (30%), worked on a hobby (23%), exercised (21%), worked (20%), drank alcohol (12%), smoked tobacco (12%), took it out on others (10%), used prescription drugs as prescribed (5%), talked to a professional (4%), used illegal drugs (2%), misused prescription drugs (<1%), and other ways (13%).
- Eleven percent (11%) of Wyandot County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems. Reasons for not using such a program included the following: had not thought of it (9%), stigma of seeking mental health services (6%), could not afford to go (5%), fear (5%), other priorities (5%), did not know how to find a program (2%), co-pay/deductible too high (2%), took too long to get in to see a doctor (1%), and other reasons (3%). Three-fifths (60%) of adults indicated they did not need such a program.
- Wyandot County adults would do the following if they knew someone who was suicidal: talk to them (73%), try to calm them down (51%), call a crisis line (41%), call 9-1-1 (38%), call their spiritual leader (20%), take them to the emergency room (20%), call a friend (18%), text a crisis line (6%), and do nothing (3%).

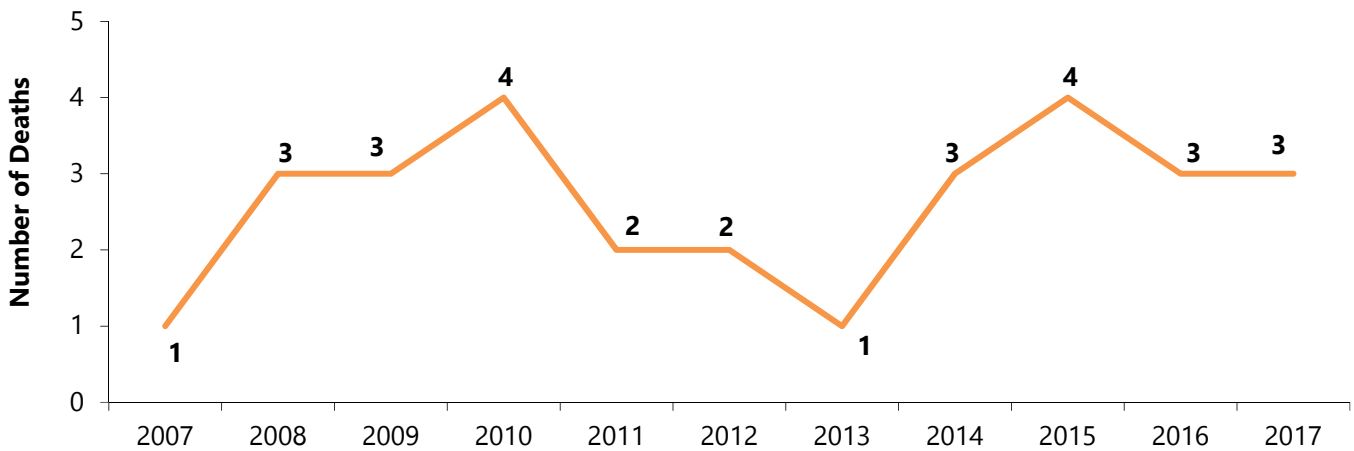
Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Considered attempting suicide in the past year	1%	2%	2%	3%	N/A	N/A

N/A – Not Available

The graph below shows the Wyandot County suicide counts by year. The graph shows:

- From 2007 to 2017, there was an average of 2.6 suicides per year in Wyandot County.

**Wyandot County Number of Suicide Deaths By Year  
2007-2017\***  
Total Deaths = 29



*\*Data for 2017 is partial and incomplete, and should be used with caution  
(Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 1/15/18)*

### National Suicide Statistics

- 44,965 people in the U.S. died from suicide, and 1,124,125 people attempted suicide in the 2016.
- An average of one person killed themselves every 11.7 minutes
- Suicide is the 10<sup>th</sup> ranking cause of death in the U.S.
- For every female death by suicide, there are 3.4 male deaths.
- In 2016, there were 1,707 suicide deaths in Ohio.
- The leading suicide methods included:
  - Firearm suicides (51.0%)
  - Suffocation/Hanging (25.9%)
  - Poisoning (14.9%)
  - Cutting/Piercing (1.9%)
  - Drowning (1.1%)

*(Sources: American Association of Suicidology, Facts & Statistics, 2016 retrieved March 2018)*



# Chronic Disease: Cardiovascular Health

## Key Findings

In 2018, 5% of adults had survived a heart attack and 4% had survived a stroke at some time in their life. More than two-fifths (42%) of Wyandot County adults were obese, 41% had high blood cholesterol, 38% had high blood pressure, and 19% were current smokers, four known risk factors for heart disease and stroke.

## Heart Disease and Stroke

- Five percent (5%) of adults reported they had survived a heart attack or myocardial infarction, increasing to 14% of those over the age of 65.
- Five percent (5%) of Ohio and 4% of U.S. adults reported they had a heart attack or myocardial infarction in 2016 (Source: 2016 BRFSS).
- Four percent (4%) of Wyandot County adults reported they had survived a stroke, increasing to 7% of those over the age of 65.
- Four percent (4%) of Ohio and 3% of U.S. adults reported having had a stroke in 2016 (Source: 2016 BRFSS).
- Six percent (6%) of adults reported they had angina or coronary heart disease, increasing to 11% of those over the age of 65.
- Five percent (5%) of Ohio and 4% of U.S. adults reported having had angina or coronary heart disease in 2016 (Source: 2016 BRFSS).
- Three percent (3%) of adults reported they had congestive heart failure, increasing to 6% of those with incomes less than \$25,000 and 7% of those over the age of 65.

## High Blood Pressure (Hypertension)

- More than one-third (38%) of adults had been diagnosed with high blood pressure. The 2015 BRFSS reports hypertension prevalence rates of 34% for Ohio and 31% for the U.S.
- Seven percent (7%) of adults were told they were pre-hypertensive/borderline high.
- Eight-nine percent (89%) of adults had their blood pressure checked within the past year.
- Wyandot County adults diagnosed with high blood pressure were more likely to have:
  - Been ages 65 years or older (70%)
  - Rated their overall health as fair or poor (64%)
  - Been classified as obese by Body Mass Index (48%)
  - Incomes less than \$25,000 (45%)

### Wyandot County Leading Causes of Death 2014-2016

**Total Deaths: 766**

- Heart Disease (23% of all deaths)
- Cancer (22%)
- Stroke (8%)
- Chronic Lower Respiratory Diseases (7%)
- Accidents, Unintentional Injuries (5%)

(Source: Ohio Public Health Data Warehouse, 2014-2016)

### Ohio Leading Causes of Death 2014-2016

**Total Deaths: 352,105**

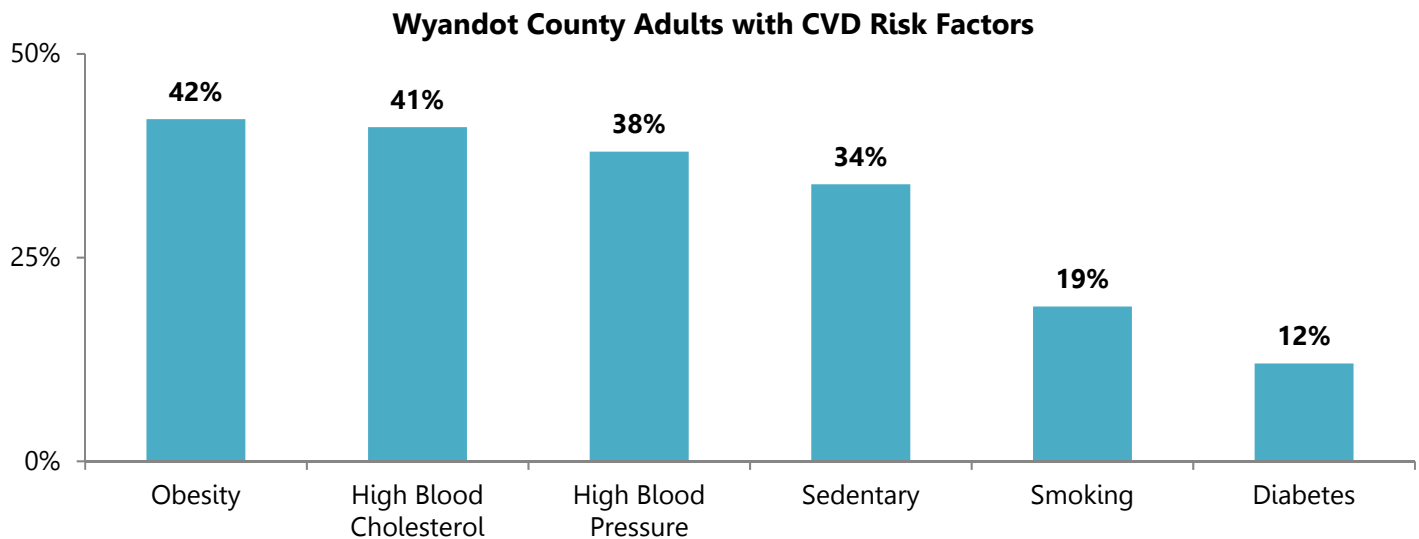
- Heart Disease (23% of all deaths)
- Cancers (22%)
- Chronic Lower Respiratory Diseases (6%)
- Accidents, Unintentional Injuries (6%)
- Stroke (5%)

(Source: Ohio Public Health Data Warehouse, 2014-2016)

## High Blood Cholesterol

- More than two-fifths (41%) of adults had been diagnosed with high blood cholesterol. The 2015 BRFSS reported that 37% of Ohio and 36% of U.S. adults have been told they have high blood cholesterol.
- More than four-fifths (81%) of adults had their blood cholesterol checked within the past 5 years. The 2015 BRFSS reported 78% of Ohio and U.S. adults had their blood cholesterol checked within the past 5 years.
- Wyandot County adults with high blood cholesterol were more likely to have:
  - Rated their overall health as fair or poor (67%)
  - Been ages 65 years or older (57%)
  - Incomes less than \$25,000 (55%)
  - Been classified as obese by Body Mass Index-BMI (44%)

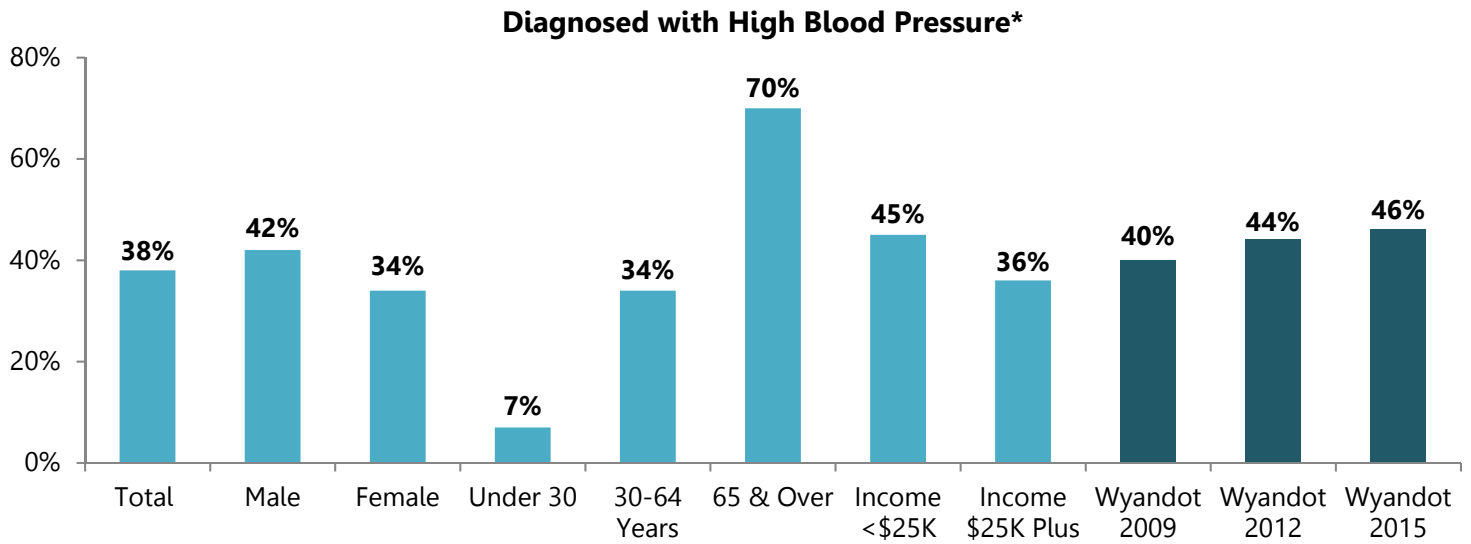
*The following graph shows the percentage of Wyandot County adults who had major risk factors for developing cardiovascular disease (CVD).*



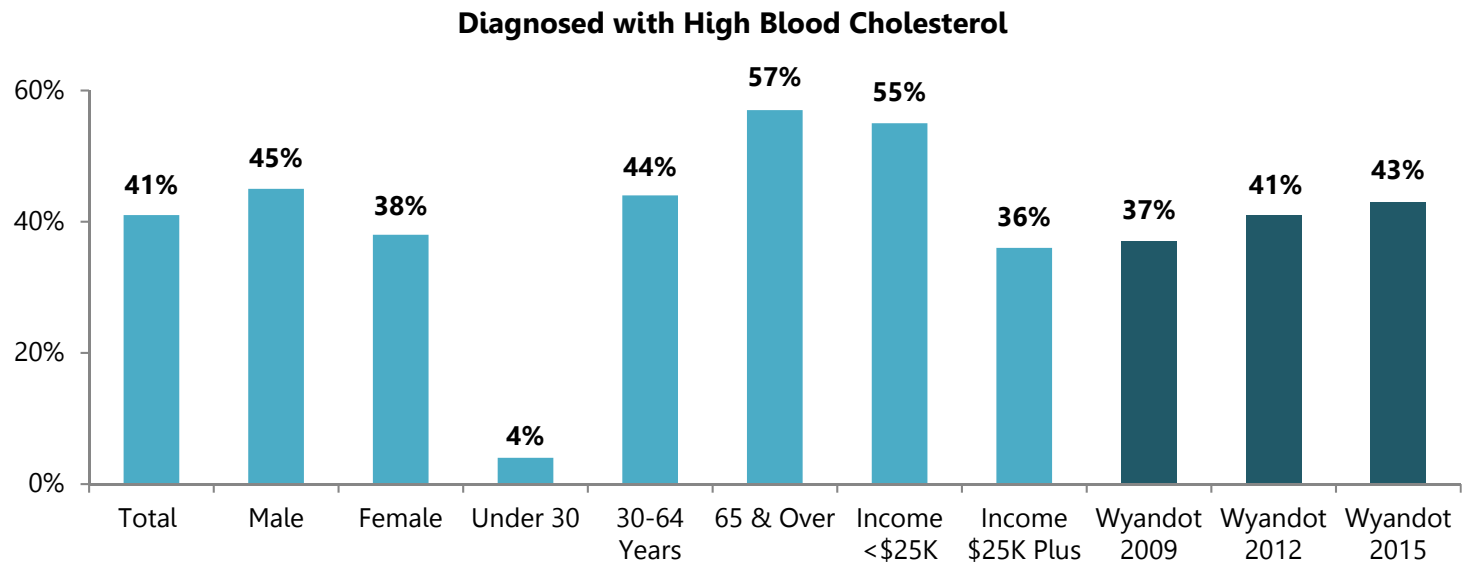
Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Had angina or coronary heart disease	6%	8%	5%	6%	5%	4%
Had a heart attack	3%	5%	4%	5%	5%	4%
Had a stroke	1%	4%	8%	4%	4%	3%
Had high blood pressure	40%	44%	46%	38%	34%*	31%*
Had high blood cholesterol	37%	41%	43%	41%	37%*	36%*
Had blood cholesterol checked within past 5 years	63%	75%	79%	81%	78%*	78%*

\*2015 BRFSS Data

The following graphs show the number of Wyandot County adults who have been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 38% of all Wyandot County adults have been diagnosed with high blood pressure, including 42% of males and 70% of those 65 and older.



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



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

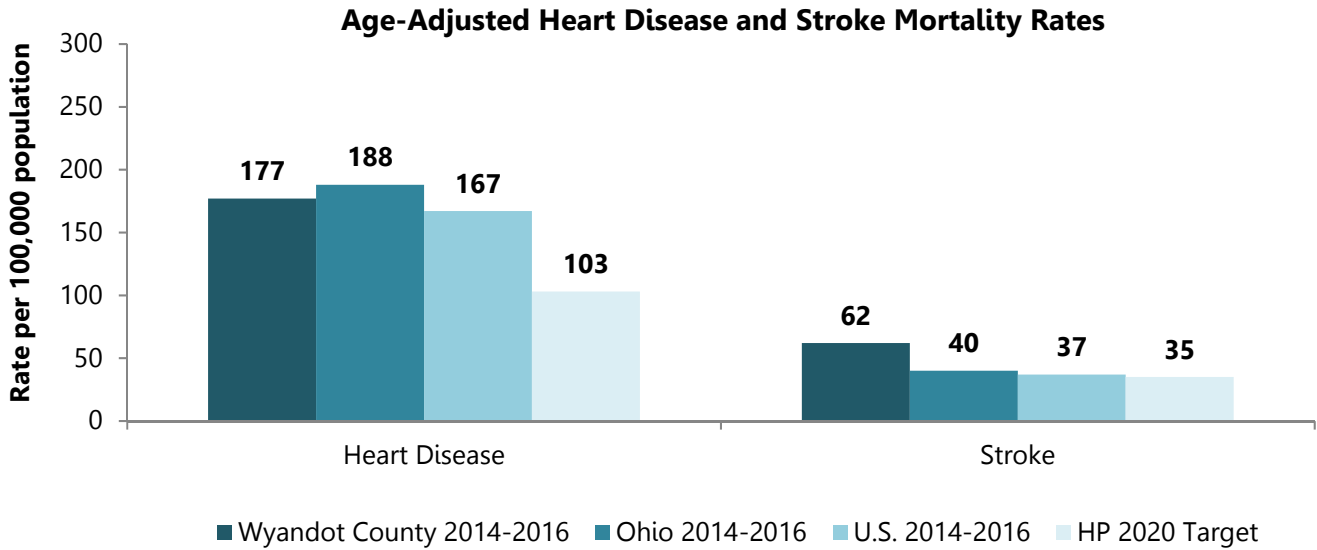
### Wyandot County Adult Health Screening Results

General Screening Results	Total Sample
Diagnosed with high blood cholesterol	41%
Diagnosed with high blood pressure	38%
Diagnosed with diabetes	12%
Survived a heart attack	5%
Survived a stroke	4%

\*Percentages based on all Wyandot County adults surveyed

The following graph shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke. The graph shows:

- When age differences are accounted for, the statistics indicate that from 2014 to 2016, the Wyandot County heart disease mortality rate was lower than the Ohio rate, but higher than the U.S. rate and Healthy People 2020 target objective.
- The Wyandot County age-adjusted stroke mortality rate was higher than the state and U.S. rates as well as the Healthy People 2020 target objective from 2014 to 2016.



(Source: Ohio Public Health Data Warehouse, 2014-2016, CDC Wonder, 2014-2016 and Healthy People 2020)

### Healthy People 2020 Objectives Heart Disease and Stroke

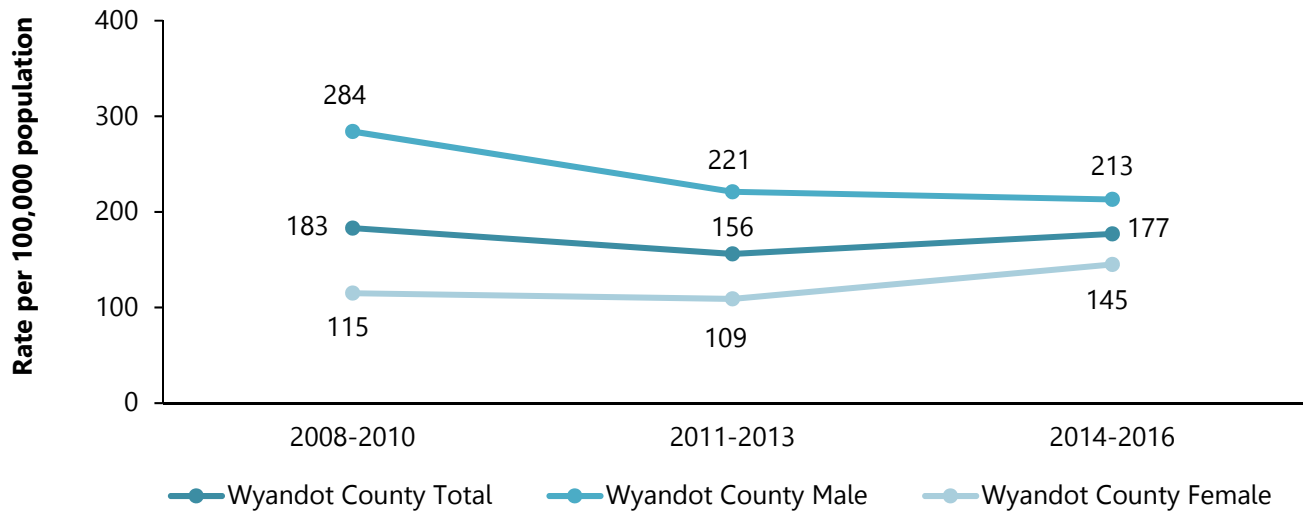
Objective	Wyandot Survey Population Baseline	2015 U.S. Baseline	Healthy People 2020 Target
<b>HDS-5: Reduce proportion of adults with hypertension</b>	38% (2018)	31% Adults age 18 and up	27%
<b>HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years</b>	81% (2018)	78% Adults age 18 & up	82%
<b>HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)</b>	41% (2018)	38% Adults age 20+ with TBC > 240 mg/dl	14%

Note: All U.S. figures age-adjusted to 2000 population standard.  
 (Sources: 2018 Wyandot County Health Assessment, 2016 BRFSS, Healthy People 2020)

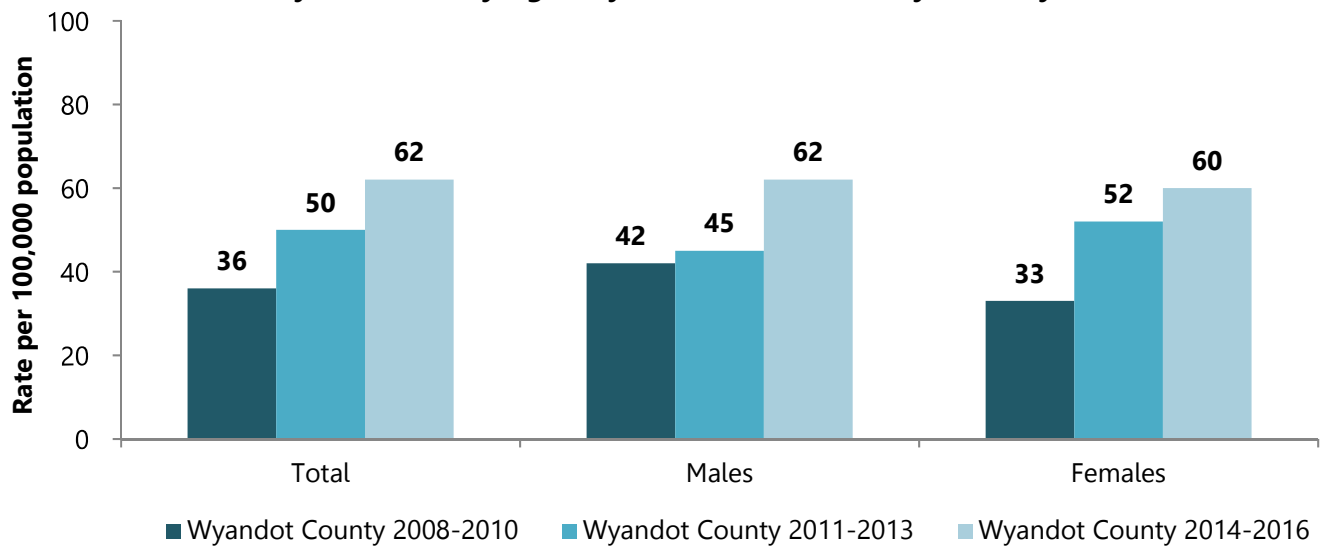
The following graphs shows the age-adjusted mortality rates per 100,000 population for heart disease and stroke by gender. The graphs show:

- From 2008 to 2016, the total Wyandot County age adjusted heart disease mortality rate, as well as the female rate, increased.
- From 2008 to 2016, the Wyandot County stroke mortality rate increased for both genders.

### Wyandot County Age-Adjusted Heart Disease Mortality Rates by Gender



### Wyandot County Age-Adjusted Stroke Mortality Rates by Gender



(Source for graphs: Ohio Public Health Data Warehouse, 2008-2016)

# Chronic Disease: Cancer

## Key Findings

In 2018, 15% of Wyandot County adults had been diagnosed with cancer at some time in their life. The Ohio Department of Health (ODH) Ohio Public Health Data Warehouse indicates that from 2014 to 2016, a total of 168 Wyandot County residents died from cancer, the second leading cause of death in the county.

## Adult Cancer

- Fifteen percent (15%) of Wyandot County adults were diagnosed with cancer at some point in their lives, increasing to 30% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: breast (26%), other skin cancer (21%), prostate (17%), melanoma (13%), cervical (12%), testicular (7%), leukemia (5%), colon (3%), liver (3%), head and neck (2%), Hodgkin's lymphoma (2%), bladder (2%), lung (2%), rectal (2%), renal (2%), and other types of cancer (7%). Three percent (3%) of adults were diagnosed with multiple types of cancer.

## Cancer Facts

- The Ohio Public Health Data Warehouse indicates that from 2014 to 2016, cancers caused 22% (168 of 766 total deaths) of all Wyandot County resident deaths. The largest percent (23%) of 2014 to 2016 cancer deaths were from lung and bronchus cancers (Source: Ohio Public Health Data Warehouse, 2014-2016).
- 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; colon and rectum; stomach; pancreas; kidney; bladder; uterine; cervix; ovary (mucinous); and acute myeloid leukemia (blood and bone marrow) (Source: American Cancer Society, Facts & Figures 2018).
- The American Cancer Society states that about 609,640 Americans are expected to die of cancer in 2018. Cancer is the second leading cause of death in the U.S., exceeded only by heart disease. Nearly 1 of every 7 deaths is associated with cancer (Source: American Cancer Society, Facts & Figures 2018).

## Lung Cancer

- Sixteen percent (16%) of Wyandot County male adults were current smokers, and 35% had stopped smoking for one or more days in the past 12 months because they were trying to quit.
- Approximately 22% of female adults in the county were current smokers, and 40% had stopped smoking for one or more days in the past 12 months because they were trying to quit.
- The largest percent (23%) of 2014 to 2016 cancer deaths in Wyandot County were from lung and bronchus cancers (Source: Ohio Public Health Data Warehouse, 2014-2016).
- The Ohio Department of Health (ODH) reports that lung and bronchus cancer (n=27) was the leading cause of male cancer deaths from 2014-2016 in Wyandot County. Cancer of the colon and rectum (n=10) and prostate cancer caused (n=8) male deaths during the same time (Source: Ohio Public Health Data Warehouse, 2014-2016).
- ODH reports that lung and bronchus cancer and breast cancer were the leading cause of female cancer deaths (n=12) in Wyandot County from 2014 to 2016, followed by colon and rectum (n=11) and pancreas (n=6) cancers. (Source: Ohio Public Health Data Warehouse, 2014-2016).
- According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers (Source: American Cancer Society, Facts & Figures 2018).

## Wyandot County Incidence of Cancer, 2011-2015

**All Types: 653 cases**

- Lung and Bronchus: 106 cases (16%)
- Breast: 89 (14%)
- Colon and Rectum: 69 cases (11%)
- Prostate: 69 cases (11%)

**From 2014-2016, there were 168 cancer deaths in Wyandot County.**

*(Source: Ohio Cancer Incidence, ODH Ohio Public Health Data Warehouse. Updated 1/15/18)*

## Breast Cancer

- In 2018, 56% of Wyandot County females reported having had a clinical breast examination in the past year.
- More than half (56%) of Wyandot County females over the age of 40 had a mammogram in the past year.
- The 5-year relative survival for women diagnosed with localized breast cancer (cancer that has not spread to lymph nodes or other locations outside the breast) is 99% *(Source: American Cancer Society, Facts & Figures 2018)*.
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommended that those 40 to 44 years of age have the choice of annual mammography, those 45 to 54 have an annual mammography, and those 55 years of age and older may transition to biennial or continue annual mammography. Women should continue mammography as long as their overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual screening using magnetic resonance imaging (MRI) in addition to mammography is recommended, typically starting at age 30 *(Source: American Cancer Society, Facts & Figures 2018)*.

**15% of Wyandot County adults had been diagnosed with cancer at some time in their life.**

## Prostate Cancer

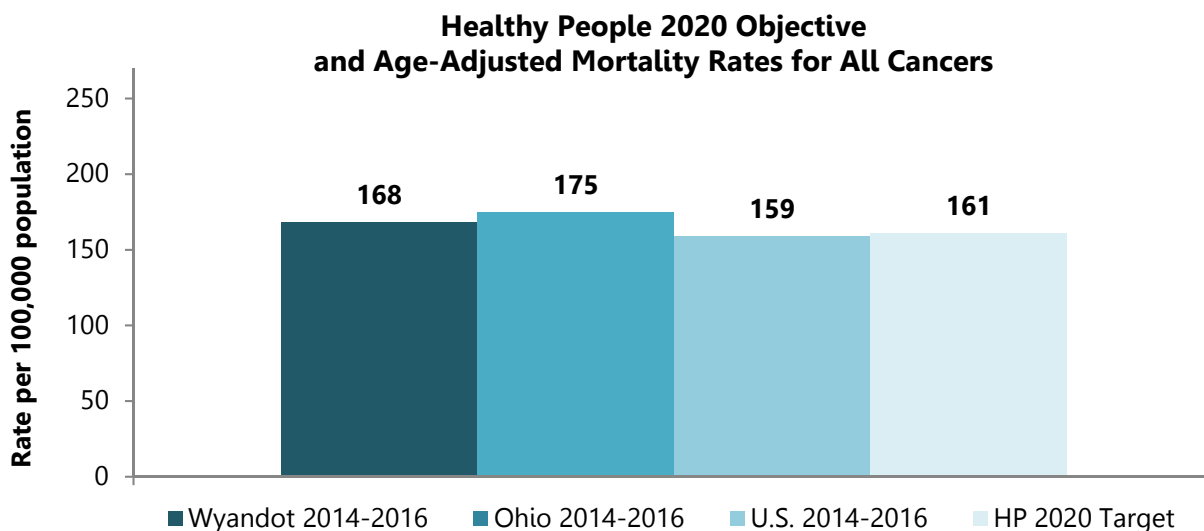
- More than two-fifths (45%) of Wyandot County males had a Prostate-Specific Antigen (PSA) test at some time in their life, and 29% had one in the past year.
- Nearly half (47%) of men had a digital rectal exam in their lifetime, and 19% had one in the past year.
- ODH statistics indicate that prostate cancer deaths accounted for 9% of all male cancer deaths from 2014 to 2016 in Wyandot County *(Source: Ohio Public Health Data Warehouse, 2014-2016)*.
- Incidence rates for prostate cancer are 74% higher in African Americans than in whites, and they are twice as likely to die of prostate cancer. Other risk factors include increased age, African ancestry, a family history of the disease and certain inherited genetic conditions. African American men and Caribbean men of African descent have the highest documented prostate cancer incidence rates in the world *(Source: American Cancer Society, Facts & Figures 2018)*.

## Colon and Rectum Cancers

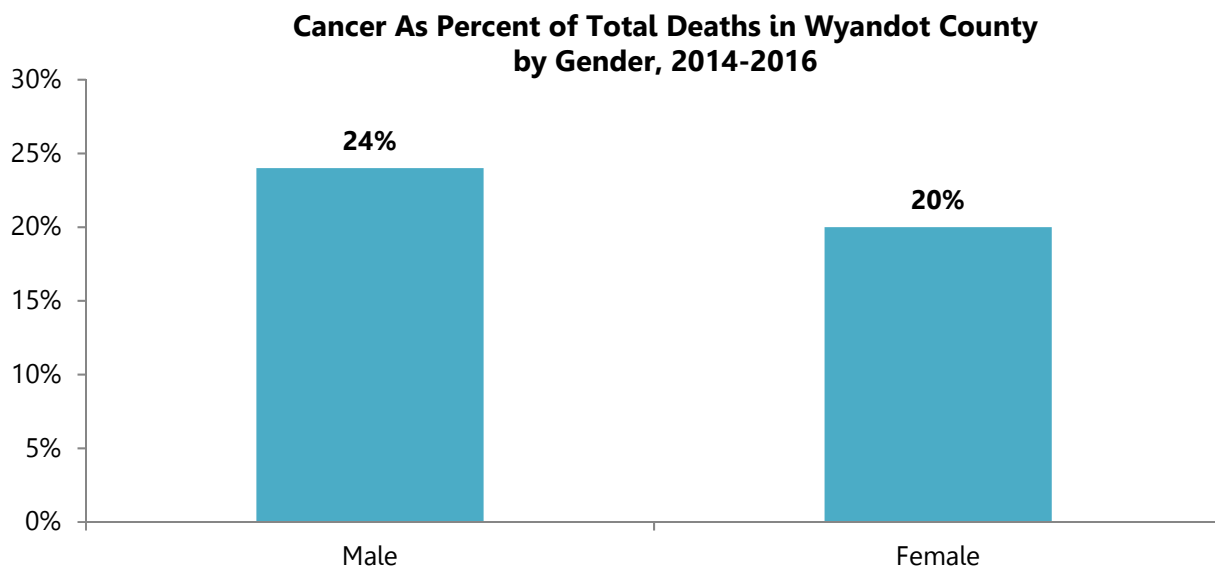
- ODH indicates that colon and rectum cancer deaths accounted for 13% of all male and female cancer deaths from 2014 to 2016 in Wyandot County *(Source: Ohio Public Health Data Warehouse, 2014-2016)*.
- The American Cancer Society reports several risk factors for colorectal cancer including age; personal 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 *(Source: American Cancer Society, Facts & Figures 2018)*.

The following graphs show the Wyandot 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 the percent of total cancer deaths in Wyandot County. The graphs show:

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



(Source: Ohio Public Health Data Warehouse, 2014-2016, CDC Wonder, 2014-2016, Healthy People 2020)



(Source: Ohio Public Health Data Warehouse, 2014-2016)



## Wyandot County Incidence of Cancer, 2011-2015

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer	Age-Adjusted Rate
Lung and Bronchus	106	16%	71.0
Breast	89	14%	64.7
Colon and Rectum	69	11%	45.6
Prostate	69	11%	94.8
Other/Unspecified	55	8%	36.7
Uterus	27	4%	33.4
Kidney and Renal Pelvis	27	4%	19.2
Non-Hodgkins Lymphoma	26	4%	19.9
Thyroid	25	4%	19.6
Melanoma of Skin	21	3%	14.1
Bladder	20	3%	12.1
Leukemia	19	3%	13.8
Oral Cavity & Pharynx	18	3%	13.2
Pancreas	17	3%	10.9
Cervix	10	2%	20.1
Liver and Bile Ducts	9	1%	5.7
Hodgkins Lymphoma	9	1%	6.6
Esophagus	7	1%	4.7
Stomach	7	1%	5.1
Multiple Myeloma	6	1%	3.9
Larynx	6	1%	3.5
Ovary	4	1%	N/A
Brain and CNS	4	1%	N/A
Testis	3	<1%	N/A
<b>Total</b>	<b>653</b>	<b>100%</b>	<b>450.2</b>

*(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 3/28/18)*

### 2018 Cancer Estimates

- In 2018, about 1,735,350 million new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about eighteen percent of the new cancer cases expected to occur in the U.S. in 2018 will be related to overweight or obesity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 609,640 Americans are expected to die of cancer in 2018.
- Almost one third of cancer deaths are attributed to smoking.
- In 2018, estimates predict that there will be 56,590 new cases of cancer and 25,740 cancer deaths in Ohio.
- Of the new cancer cases, approximately 10,760 (16%) will be from lung and bronchus cancers and 5,550 (8%) will be from colon and rectum cancers.
- About 10,610 new cases of female breast cancer are expected in Ohio.
- New cases of male prostate cancer in Ohio are expected to be 5,810 (8%).

*(Source: American Cancer Society, Facts and Figures 2018)*

# Chronic Disease: Arthritis

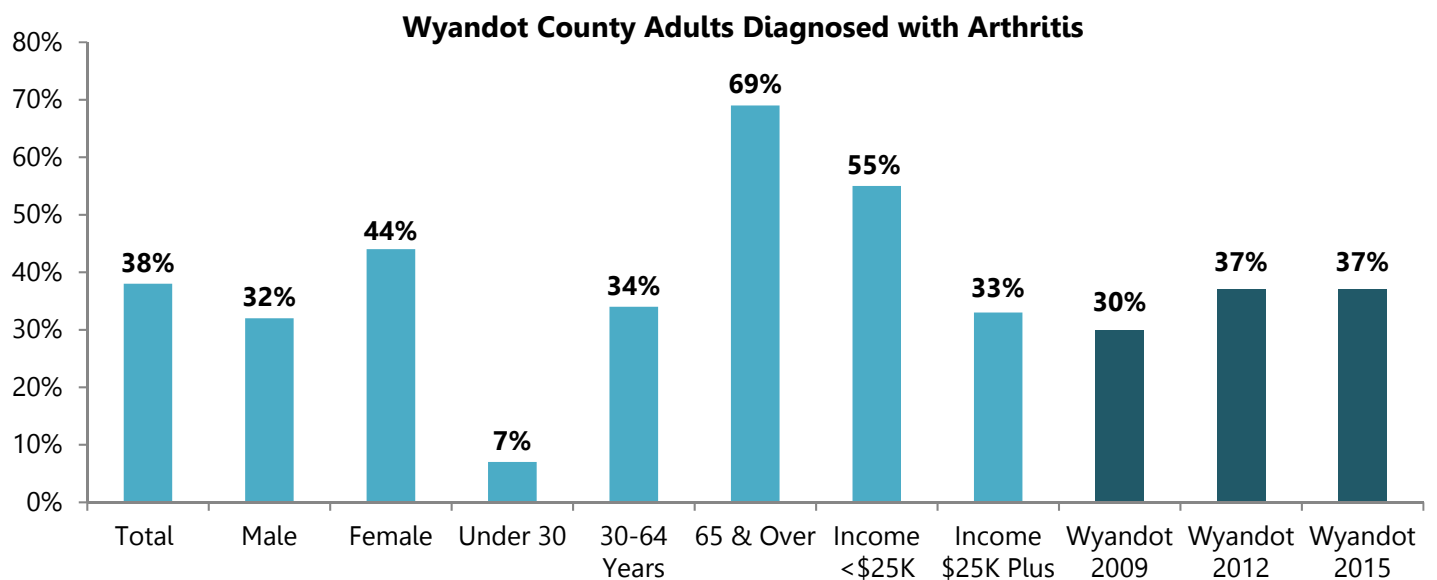
## Key Findings

More than one-third (38%) of Wyandot County adults were diagnosed with arthritis. According to the 2016 BRFSS 31% of Ohio adults and 26% of U.S. adults were told they had arthritis.

## Arthritis

- More than one-third (38%) of Wyandot County adults were told by a health professional that they had some form of arthritis, increasing to 69% of those over the age of 65. According to the 2016 BRFSS, 31% of Ohio adults and 26% of U.S. adults were told they had arthritis.
- Wyandot County adults were told by a health professional that they had the following: rheumatoid arthritis (5%), gout (5%), fibromyalgia (5%), and lupus (1%).
- More than four-fifths (82%) of adults diagnosed with arthritis were overweight or obese.
- 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, 2016).
- An estimated 54 million U.S. adults (about 23%) report having doctor-diagnosed arthritis. By 2040, over 78 million people will have arthritis. Arthritis is more common among women (24%) than men (18%), and it affects all racial and ethnic groups. Arthritis commonly occurs with other chronic diseases, like diabetes, heart disease, and obesity, and can make it harder for people to manage these conditions (Source: CDC, Arthritis at a Glance, March 2017).

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Had been diagnosed with arthritis	30%	37%	37%	38%	31%	26%



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

## 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:
  - 1. Learn Arthritis Management Strategies** – Arthritis management strategies provide those with arthritis with the skills and confidence to effectively manage their condition. Self-Management Education has proven to be valuable for helping people change their behavior and better manage their arthritis symptoms. Interactive workshops such as the Arthritis Self-Management Program and the Chronic Disease Self-Management Program are low-cost (about \$25 – \$35) and available in communities across the country. Attending one of these programs can help a person learn ways to manage pain, exercise safely, and gain control of arthritis.
  - 2. 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.
  - 3. 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.
  - 4. 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.
  - 5. 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, Updated July 2017)*

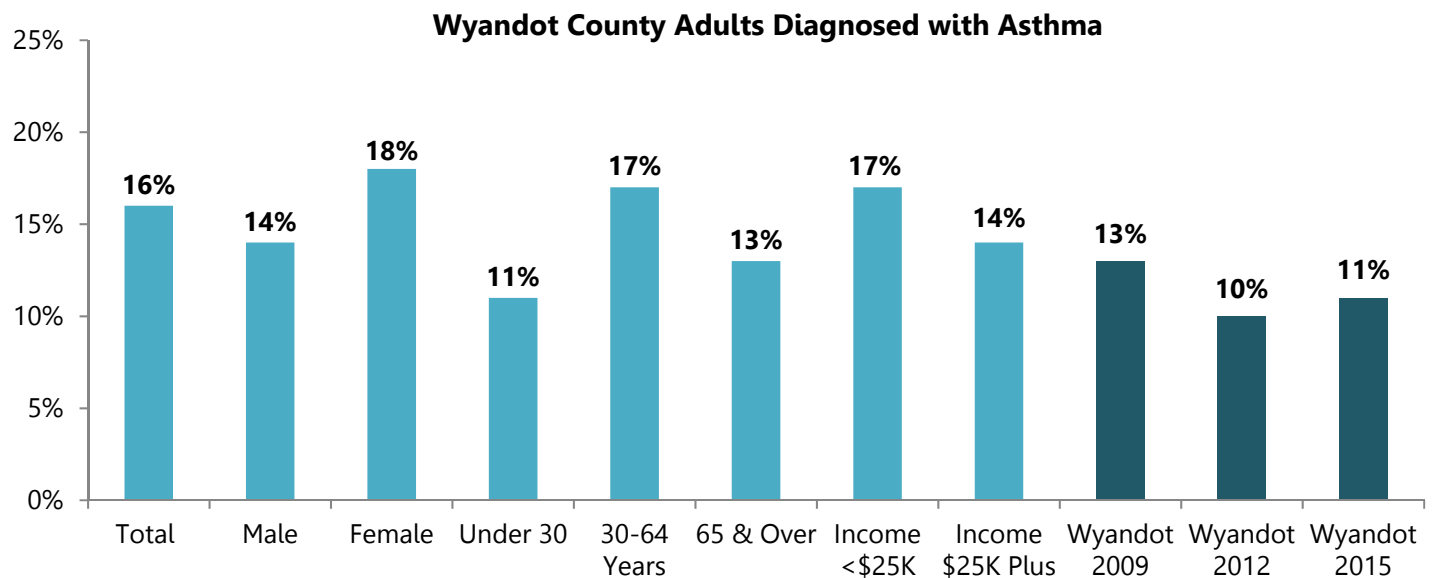
# Chronic Disease: Asthma

## Key Findings

In 2018, 16% of Wyandot County adults had been diagnosed with asthma.

## Asthma and Other Respiratory Disease

- In 2018, 16% of Wyandot County adults had been diagnosed with asthma.
- Fourteen percent (14%) of Ohio and U.S. adults have ever been diagnosed with asthma (Source: 2016 BRFSS).
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke; dust mites; outdoor air pollution; cockroach allergens; pets; mold; smoke from burning wood or grass; infections linked to the flu, colds, and respiratory viruses (Source: CDC, 2017).
- Chronic lower respiratory disease was the fourth leading cause of death in Wyandot County and the third leading cause of death in Ohio from 2014 to 2016 (Source: Ohio Public Health Data Warehouse, 2014-2016).

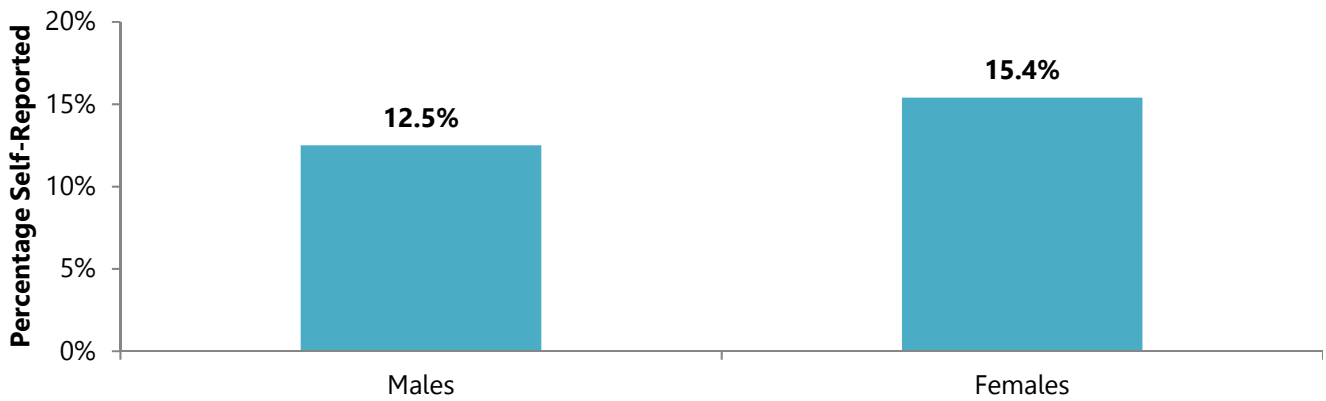


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

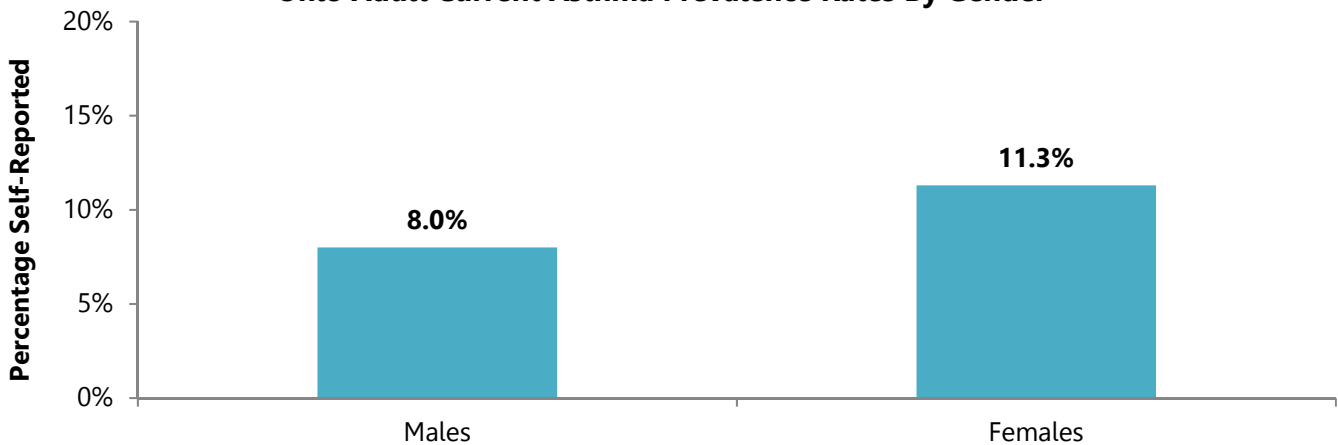
Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Had been diagnosed with asthma	13%	10%	11%	16%	14%	14%

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

**Ohio Adult Lifetime Asthma Prevalence Rates By Gender**



**Ohio Adult Current Asthma Prevalence Rates By Gender**



(Source: 2016 BRFSS)

### Asthma Facts

- The number of Americans with asthma grows every year. Currently, 26 million Americans have asthma.
- Asthma mortality is almost 4,000 deaths per year.
- Asthma results in 439,000 hospitalizations and 1.8 million emergency room visits annually.
- Patients with asthma reported 14.2 million visits to a doctor’s office and 1.3 million visits to hospital outpatient departments.
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

(Source: American College of Allergy, Asthma, & Immunology, Asthma Facts, updated 4/22/16)

# Chronic Disease: Diabetes

## Key Findings

In 2018, 12% of Wyandot County adults had been diagnosed with diabetes.

## Diabetes

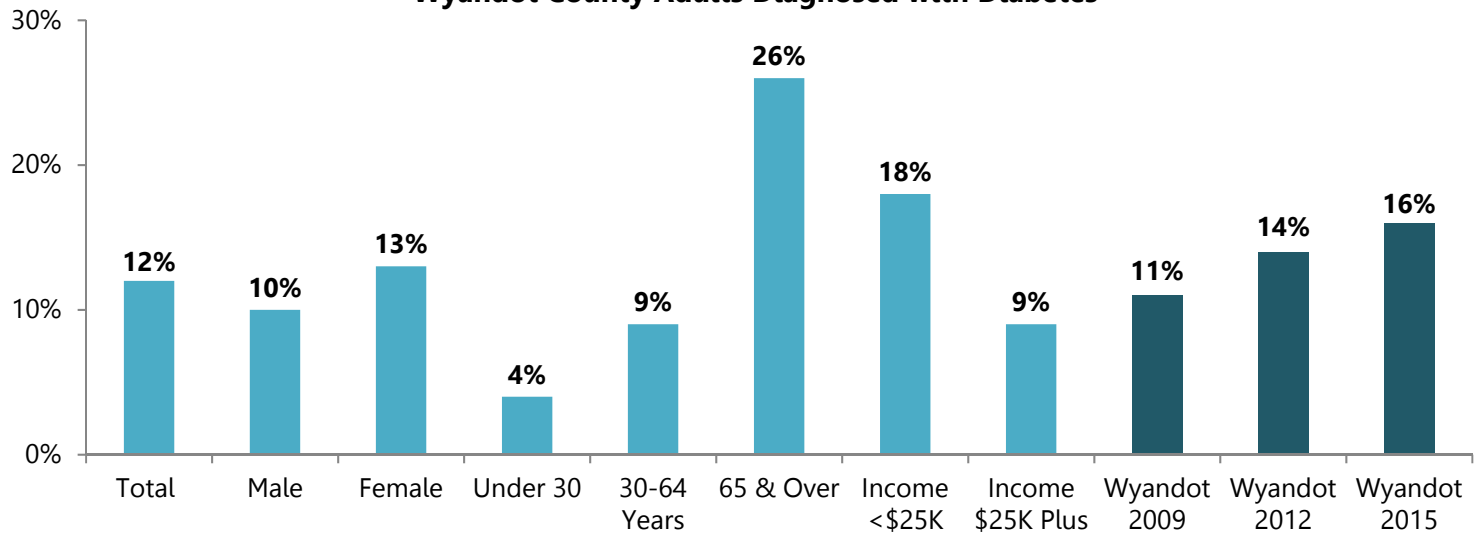
- Twelve percent (12%) of Wyandot County adults had been diagnosed with diabetes, increasing to 26% of those over the age of 65. The 2016 BRFSS reports an Ohio and U.S. prevalence of 11%.
- Six percent (6%) of adults had been diagnosed with pre-diabetes.
- Almost one-third (30%) of adults with diabetes rated their health as fair or poor.
- Wyandot County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
  - 89% were obese or overweight
  - 78% had been diagnosed with high blood pressure
  - 69% had been diagnosed with high blood cholesterol

## Diabetes by the Numbers

- 30.3 million** US adults have diabetes, and 1 in 4 of them don't know they have it.
- Diabetes is the **seventh leading cause** of death in the US.
- Diabetes is the **No. 1** cause of kidney failure, lower-limb amputations, and adult-onset blindness.
- In the last **20 years**, the number of adults diagnosed with diabetes has more than **tripled** as the American population has aged and become more overweight or obese.

(Source: CDC, Diabetes by the Numbers, Updated: July 1, 2017)

Wyandot County Adults Diagnosed with Diabetes

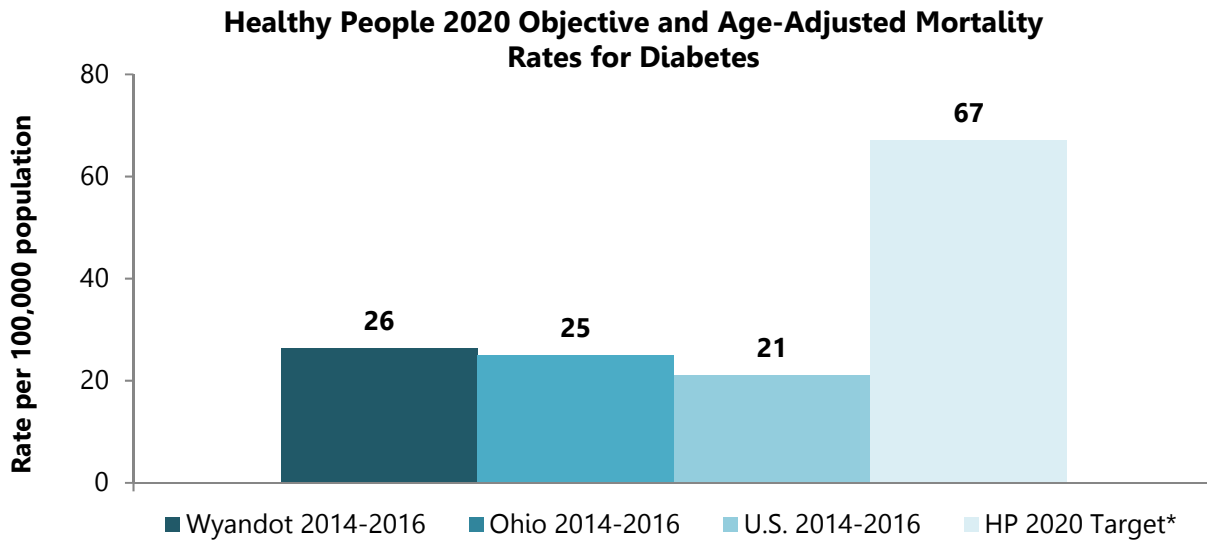


Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S. 2016
Had been diagnosed with diabetes	11%	14%	16%	12%	11%	11%

The following graph shows the Wyandot County, Ohio and U.S. age-adjusted mortality rates (per 100,000 population, 2000 standard) for diabetes in comparison to the Healthy People 2020 objective. The graph shows:

- When age differences are accounted for, Wyandot County had a higher diabetes mortality rate than Ohio and the U.S. but a lower mortality rate than the Healthy People 2020 objective.



*\*Note: The Healthy People 2020 rate is for all diabetes-related deaths  
(Source: Ohio Public Health Data Warehouse, 2014-2016, CDC Wonder, 2014-2016, Healthy People 2020)*

### Types of Diabetes

Diabetes is a chronic disease that affects how your body turns food into energy. There are three main types of diabetes: type 1, type 2 and gestational diabetes (diabetes while pregnant).

- **Type 1 diabetes** is caused by an autoimmune reaction (the body attacks itself by mistake) that stops your body from making insulin. About 5% of the people who have diabetes have type 1. Symptoms of type 1 diabetes often develop quickly. It's usually diagnosed in children, teens, and young adults. If you have type 1 diabetes, you'll need to take insulin every day to survive. Currently, no one knows how to prevent type 1 diabetes.
- **Type 2 diabetes** is when the body doesn't use insulin well and is unable to keep blood sugar at normal levels. Most people with diabetes—9 in 10—have type 2 diabetes. It develops over many years and is usually diagnosed in adults (though increasingly in children, teens, and young adults). Symptoms sometimes go unnoticed. Type 2 diabetes can be prevented or delayed with healthy lifestyle changes, such as losing weight if you're overweight, healthy eating, and getting regular physical activity.
- **Gestational diabetes** develops in pregnant women who have never had diabetes. Babies born to women with gestational diabetes could be at higher risk for health complications. Gestational diabetes usually goes away after the baby is born but increases the mothers risk for type 2 diabetes later in life. The baby is more likely to become obese as a child or teen, and more likely to develop type 2 diabetes later in life too.

*(Source: CDC, About Diabetes, Updated: July 1, 2017)*

# Chronic Disease: Quality of Life

## Key Findings

In 2018, 28% of Wyandot County adults were limited in some way because of a physical, mental or emotional problem. The most limiting health problems were arthritis (44%); back or neck problems (43%); walking problems (33%); chronic pain (27%); and stress, anxiety, depression, or emotional problems (27%).

## Impairments and Health Problems

- More than one-fourth (28%) of Wyandot County adults were limited in some way because of a physical, mental or emotional problem (21% Ohio and 21% U.S., 2015 BRFSS), increasing to 40% of those with incomes less than \$25,000.
- Among those who were limited in some way, the following most limiting problems or impairments were reported: arthritis/rheumatism (44%); back or neck problems (43%); walking problems (33%); chronic pain (27%); stress, depression, anxiety, or emotional problems (27%); lung/breathing problems (24%); chronic illness (19%); fractures, bone/joint injuries (18%); fitness level (17%); sleep problems (12%); mental health illness/disorder (8%); hearing problems (7%); eye/vision problems (6%); memory loss (6%); confusion (4%); dental problems (2%); developmental disability (2%); learning disability (2%); and other impairments/problems (8%).
- Wyandot County adults needed help with the following because of an impairment or health problem: household chores (10%), shopping (8%), getting around for other purposes (6%), meal preparation (6%), bathing (4%), doing necessary business (4%), dressing (3%), getting around the house (3%), eating (1%), and other (1%).

Adult Comparisons	Wyandot County 2009	Wyandot County 2012	Wyandot County 2015	Wyandot County 2018	Ohio 2016	U.S 2016
Limited in some way because of a physical, mental, or emotional problems	17%	27%	18%	28%	21%*	21%*

\*2015 BRFSS

## Healthy People 2020

### Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Wyandot County 2018	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	44%	36%

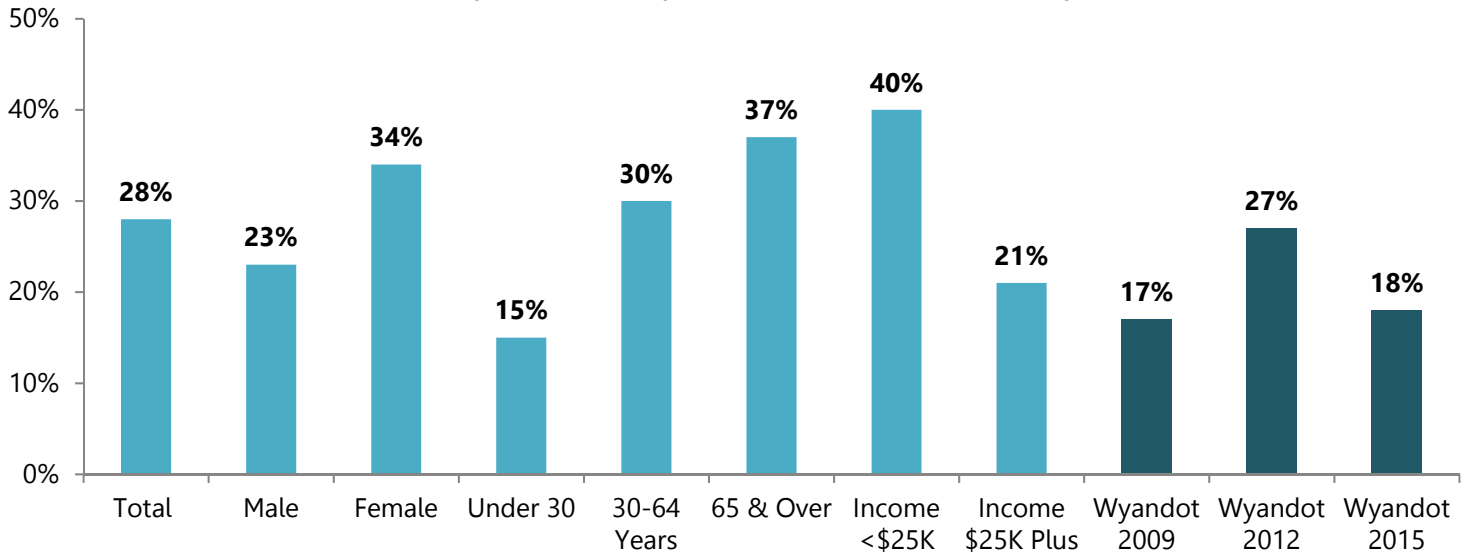
Note: U.S. baseline is age-adjusted to the 2000 population standard

(Sources: Healthy People 2020 Objectives, 2018 Wyandot County Health Assessment)



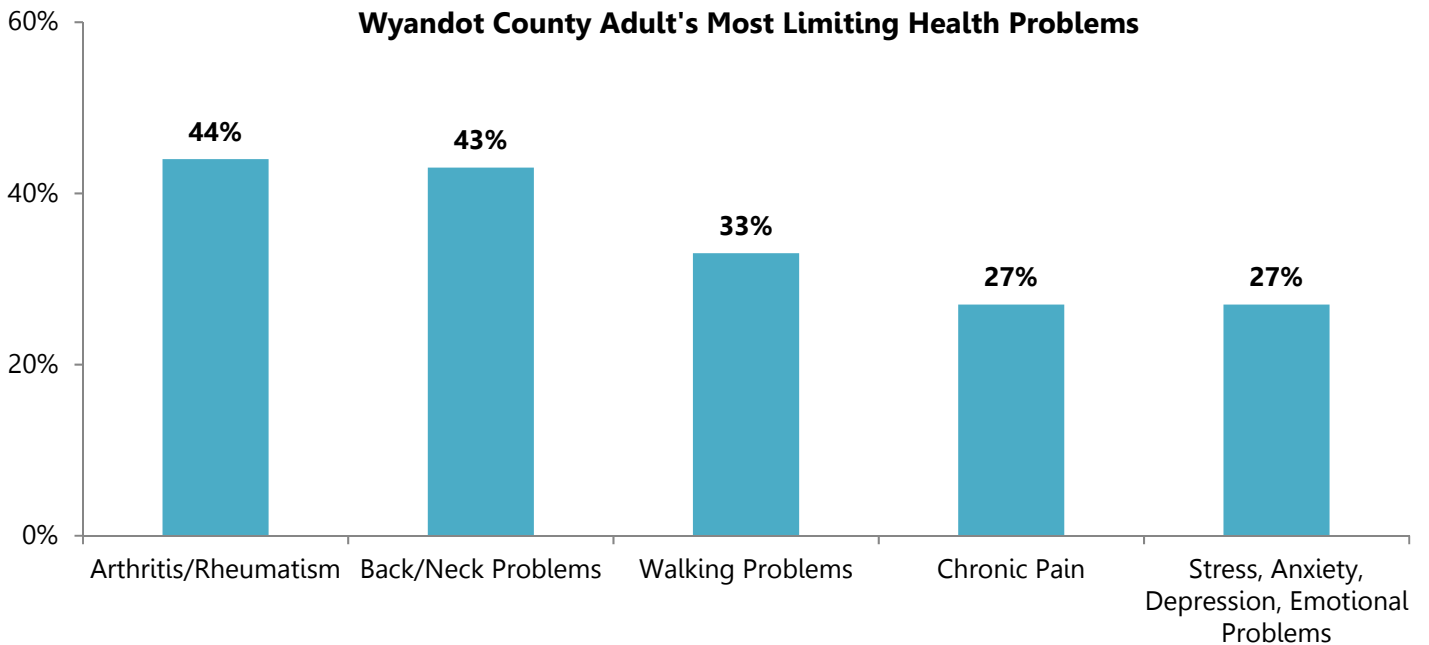
The following graphs show the percentage of Wyandot County adults that were limited in some way and the most limiting health problems. Examples of how to interpret the information shown on the first graph include: 28% of Wyandot County adults were limited in some way, including 37% of those 65 and older and 40% of those with incomes less than \$25,000.

### Wyandot County Adults Limited in Some Way



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

### Wyandot County Adult's Most Limiting Health Problems



# Social Conditions: Social Determinants of Health

## Key Findings

In 2018, 3% of Wyandot County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Eleven percent (11%) of Wyandot County adults had four or more Adverse Childhood Experiences (ACEs) in their lifetime. Nearly one-fifth (19%) of adults had experienced at least one issue related to food insecurity in the past year.

## Healthy People 2020

Healthy People 2020 developed five key determinants as a “place-based” organizing framework. These five determinants include:

- Economic stability
- Education
- Social and community context
- Health and health care
- Neighborhood and built environment



## Economic Stability

- Wyandot County adults received assistance for the following in the past year: healthcare (13%), Medicare (10%), food (10%), prescription assistance (8%), dental care (7%), mental illness issues (7%), utilities (6%), home repair (5%), free tax preparation (5%), rent/mortgage (4%), transportation (3%), credit counseling (3%), diapers (2%), employment (2%), drug or alcohol addiction (2%), affordable childcare (1%), emergency shelter (1%), gambling addiction (1%), homelessness (1%), legal aid services (1%), clothing (1%), unplanned pregnancy (1%), and post-incarceration transition issues (1%).
- Nearly one-fifth (19%) of adults experienced at least one of the following food insecurity issues in the past year: had to choose between paying bills and buying food (13%), worried food might run out (7%), their food assistance was cut (5%), went hungry/ate less to provide more food for their family (5%), did not eat because they did not have enough money for food (3%), and loss of income led to food insecurity issues (2%).
- The median household income in Wyandot County was \$55,590. The U.S. Census Bureau reports median income levels of \$52,357 for Ohio and \$57,617 for the U.S. (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2016).
- Nine percent (9%) of all Wyandot County residents were living in poverty, and 11% of children and youth ages 0-17 were living in poverty (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2016).
- The unemployment rate for Wyandot County was 3.1 as of March 2018 (Source: Ohio Department of Job and Family Services, Office of Workforce Development, Bureau of Labor Market Information).
- There were 9,881 housing units. The owner-occupied housing unit rate was 73%. Rent in Wyandot County cost an average of \$636 per month (Source: U.S. Census Bureau, American Community Survey, 2012-2016).

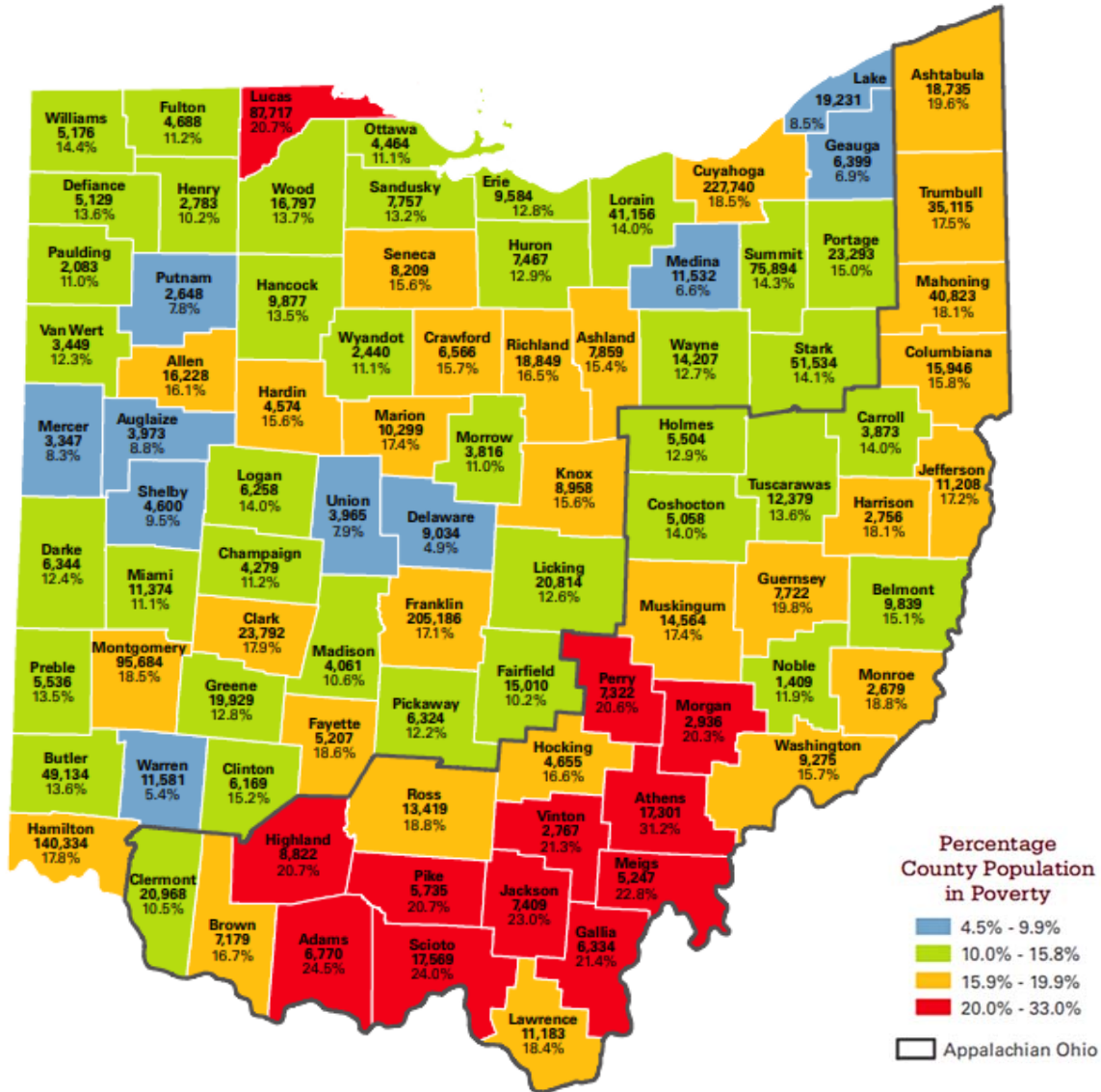
## Education

- Ninety percent (90%) of Wyandot County adults 25 years and over had a high school diploma or higher (Source: U.S. Census Bureau, American Community Survey, 2012-2016).
- Fifteen percent (15%) of Wyandot County adults 25 years and over had at least a bachelor's degree (Source: U.S. Census Bureau, American Community Survey, 2012-2016).

The map below shows the variation in poverty rates across Ohio during the 2012-16 period.

- The 2012 to 2016 American Community Survey 5-year estimates report that approximately 1,639,636 Ohio residents, or 14.5% of the population, were in poverty.
- From 2012 to 2016, 11% of Wyandot County residents were in poverty.

### Estimated Poverty Rates in Ohio by County (2012-2016)



(Source: 2012-2016 American Community Survey 5-year estimates, as compiled by Ohio Development Services Agency, Office of Research, Ohio Poverty Report, February 2018)

### Health and Health Care

- In the past year, 7% of Wyandot County adults were uninsured.
- More than half (51%) of adults rated their satisfaction with their overall health care as excellent or very good. Conversely, 16% of adults rated their satisfaction with their health care as fair or poor.
- See the Health Perceptions, Health Care Coverage, and Health Care Access sections for further health and health care information for Wyandot County adults.

## Social and Community Context

- Four percent (4%) of adults were threatened in the past year. They were threatened by the following: a spouse or partner (44%), someone outside the home (38%), and someone else (31%).
- Three percent (3%) of adults were abused in the past year. They were abused by the following: someone outside the home (58%), a spouse or partner (25%), and someone else (8%). Of those who were abused, they were abused in the following ways: verbally (50%), emotionally (31%), physically (19%), and through electronic methods (13%).
- Wyandot County adults reported the following adverse childhood experiences (ACEs): their parents became separated or were divorced (20%); a parent or adult in their home swore at, insulted, or put them down (19%); lived with someone who was a problem drinker or alcoholic (15%); lived with someone who was depressed, mentally ill, or suicidal (13%); their family did not look out for each other, feel close to each other, or support each other (8%); someone at least 5 years older than them or an adult touched them sexually (8%); a parent or adult in their home hit, beat, kicked, or physically hurt them (7%); their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (7%); someone at least 5 years older than them or an adult tried to make them touch them sexually (5%); lived with someone who used illegal stress drugs, or who abused prescription medications (4%); their parents were not married (2%); lived with someone who served time or was sentenced to serve time in prison, jail or other correctional facility (2%); someone at least 5 years older than them or an adult forced them to have sex (2%); and they did not have enough to eat, had to wear dirty clothes, and had no one to protect them (1%).
- One-in-nine (11%) adults experienced 4 or more ACEs.

## Social Determinants of Health

- Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.
- Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as “place.” In addition to the more material attributes of “place,” the patterns of social engagement and sense of security and well-being are also affected by where people live.
- Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.
- Understanding the relationship between how population groups experience “place” and the impact of “place” on health is fundamental to the social determinants of health—including both social and physical determinants.

*(Source: HealthyPeople2020, Retrieved May 19 2017)*

### Behaviors of Wyandot County Adults

*Experienced 4 or More ACEs vs. Did Not Experience Any ACEs*

Adult Behaviors	Experienced 4 or More ACEs	Did Not Experience Any ACEs
<b>Classified as overweight or obese by BMI</b>	89%	77%
<b>Current drinker</b> (had at least one alcoholic beverage in the past month)	49%	51%
<b>Binge drinker</b> (drank 5 or more drinks for males and 4 or more for females on an occasion)	48%	38%
<b>Current smoker</b> (currently smoke on some or all days)	40%	12%
<b>Had an income less than \$25,000</b>	27%	19%
<b>Medication misuse in the past 6 months</b>	12%	5%
<b>Contemplated suicide in the past 12 months</b>	7%	1%
<b>Used recreational drugs in the past 6 months</b>	4%	2%

## Adverse Childhood Experiences (ACEs)

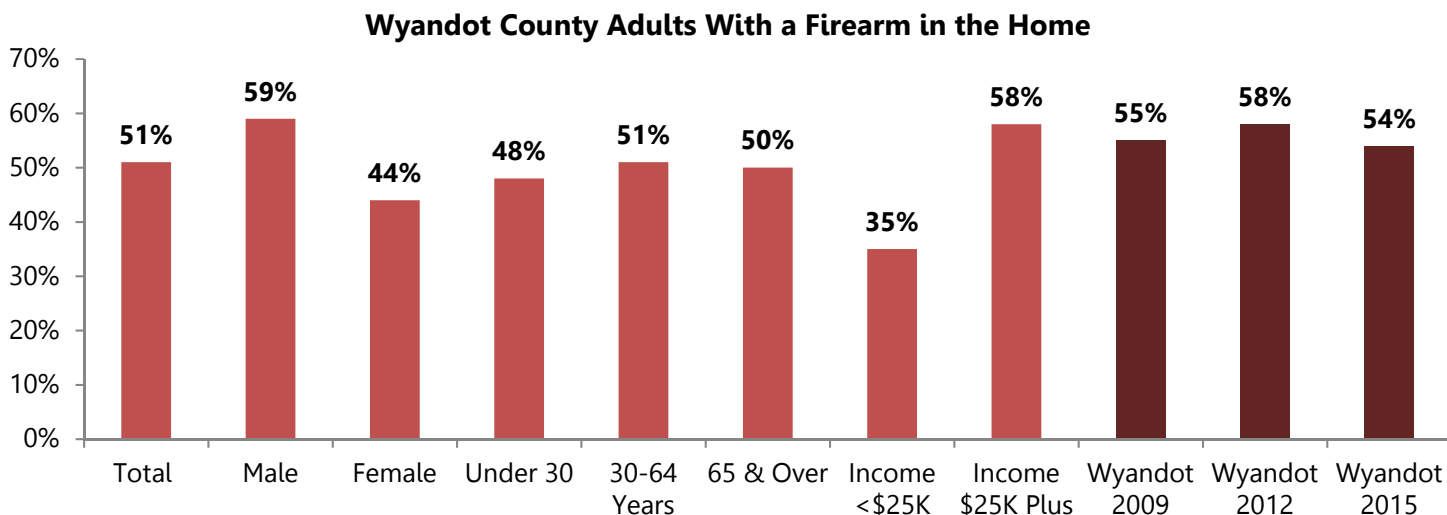
- Childhood abuse, neglect, and exposure to other traumatic stressors which we term adverse childhood experiences (ACE) are common. The most common are separated or divorced parents, verbal, physical or sexual abuse, witness of domestic violence, and having a family member with depression or mental illness.
- According to the CDC, 59% of people surveyed in five states in 2009 reported having had at least one ACE while 9% reported five or more ACEs.
- The short and long-term outcomes of these childhood exposures include a multitude of health and social problems such as:
  - Depression
  - Fetal death
  - Illicit drug use
  - Liver disease
  - STDs
  - Multiple sexual partners
  - Alcoholism and alcohol abuse
  - COPD
  - Unintended pregnancies
  - Suicide attempts
  - Early initiation of smoking
  - Risk for intimate partner violence
- Given the high prevalence of ACEs, additional efforts are needed at the state and local level to reduce and prevent childhood maltreatment and associated family dysfunction in the US.
- Studies are finding that there is a repetitive dose-response relationship between ACE and levels of exposure. A dose-response means that as the dose of the stressor increases, the intensity of the outcome will increase as well. As the number of ACEs increase so does the risk for the following:
  - Myocardial Infarction
  - Mental Distress
  - Unemployment
  - Diabetes
  - Asthma
  - Disability
  - Stroke
  - Lowered educational attainment

*(Source: Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System Survey ACE Data, 2009-2014. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2015)*

## Neighborhood and Built Environment

- More than half (51%) of Wyandot County adults kept a firearm in or around their home. Four percent (4%) of adults reported they were unlocked and loaded.
- Eleven percent (11%) of adults had the following transportation issues: could not afford gas (3%), no car (3%), did not feel safe to drive (2%), disabled (2%), suspended/no driver's license (2%), limited public transportation available or accessible (1%), no public transportation available or accessible (1%), no car insurance (<1%), and other car issues/expenses (2%).
- Wyandot County adults reported doing the following while driving: eating (41%), talking on hand-held cell phone (31%), talking on hands-free cell phone (22%), texting (14%), not wearing a seatbelt (12%), using internet on their cell phone (5%), being under the influence of alcohol (3%), being under the influence of prescription drugs (1%), reading (<1%), being under the influence of recreational drugs (<1%), and other activities (such as applying makeup, shaving, etc.) (3%).

*The following graph shows the percentage of Wyandot County adults that had a firearm in or around the home. Examples of how to interpret the information shown on the graph include: 51% of all Wyandot County adults had a firearm in or around the home, including 59% of males, and 48% of those under 30 years old.*



### Victims of Gun Violence in America

- More than 100,000 people are shot in murders, assaults, suicides & suicide attempts, accidents or by police intervention in America in an average year.
  - 35,141 people die from gun violence and 81,114 people survive gun injuries.
- Every day, an average of 318 people is shot in America. Of those 318 people, 96 people die and 222 are shot, but survive.
  - Of the 318 people who are shot every day, an average of 46 are children and teens.
  - Of the 96 people who die, 34 are murdered, 59 are suicides, 1 die accidentally and 1 with an unknown intent and 1 by legal intervention.
  - Of the 222 people who are shot but survive, 164 are from assault, 45 are shot accidentally, 10 are suicide attempts, and 3 are legal interventions.

*(Source: Brady Campaign to Prevent Gun Violence, "There Are Too Many Victims of Gun Violence" Fact Sheet, February 2018)*

### Veterans' Affairs

- More than one-third (35%) of Wyandot County adults reported that someone in their immediate family had served in the military in the past 10 to 20 years.
- As a result of military service during the past 10 to 20 years, the following have affected veterans' immediate family members: post-traumatic stress disorder (PTSD) (6%), major health problems due to injury (3%), access to medical care at a VA facility (3%), marital problems (3%), problems getting VA benefits (3%), problems getting information on VA eligibility and applying (1%), access to mental health treatment (1%), incarceration/re-entry (1%), and access to substance/drug abuse treatment (1%). Ninety-two percent (92%) did not have any problems listed.

# Social Conditions: Environmental Conditions

## Key Findings

Wyandot County adults reported insects and mold (7%) as the top two environmental health issues that threatened their health in the past year. Eighty-five percent (85%) of adults had a working smoke detector in preparation for a disaster.

## Environmental Health

- Wyandot County adults thought the following threatened their health in the past year:
  - Insects (7%)
  - Mold (7%)
  - Agricultural chemicals (4%)
  - Rodents (4%)
  - Temperature regulation (4%)
  - Moisture Issues (3%)
  - Plumbing problems (3%)
  - Air quality (2%)
  - Bed bugs (2%)
  - Chemicals found in products (1%)
  - Lead paint (1%)
  - Safety hazards (1%)
  - Sewage/waste water problems (1%)
  - Unsafe water supply/wells (1%)
  - Asbestos (<1%)
  - Cockroaches (<1%)
  - Lice (<1%)
  - Radon (<1%)
  - Sanitation Issues (<1%)

## Disaster Preparedness

- Wyandot County households had the following disaster preparedness supplies: working smoke detector (85%), cell phone (84%), working flashlight and working batteries (82%), cell phone with texting (80%), computer/tablet (73%), 3-day supply of prescription medication for each person who takes prescribed medicines (51%), 3-day supply of nonperishable food for everyone in the household (50%), working battery-operated radio and working batteries (49%), 3-day supply of water for everyone in the household (1 gallon of water per person per day) (38%), generator (32%), home land-line telephone (32%), communication plan (20%), disaster plan (13%), and a family disaster plan (12%).
- Adults indicated the following as their main method or way of getting information from authorities in a large-scale disaster or emergency: television (75%), friends/family (70%), radio (70%), internet (66%), social media (58%), Emergency Alert System (58%), neighbors (48%), newspapers (38%), and other methods (2%).

# Social Conditions: Parenting

## Key Findings

Nearly three-fourths (74%) of parents discussed bullying with their 6-to-17 year-old in the past year. Eighty-eight percent (88%) of parents took their child to the doctor for regular visits in the past year. Seven percent (7%) of Wyandot County parents did not believe schools should offer sex education classes.

## Parenting

- In the past year, parents took their child to the doctor for the following: regular visits (88%), dental visits (86%), ear infections (24%), injuries (21%), asthma (14%), behavioral problems (8%), head lice (2%), and other visits (68%).
- Wyandot County parents reported their child spent the following unsupervised time after school on an average school day: no unsupervised time (64%), less than one hour (21%), 1 to 2 hours (12%), and 3 to 4 hours (4%).
- Parents thought the following should be covered in school sex education classes: abstinence and refusal skills (76%), birth control and the use of condoms (69%), biology (65%), and other topics (9%). Seven percent (7%) of parents did not believe schools should offer sex education classes.
- Wyandot County parents reported the following barriers to childcare: cost (25%), trust in staff (25%), hours of operation (16%), if the childcare facility is licensed (12%), kids-to-teacher ratio (12%), location (11%), available times (10%), flexibility of the number of days/hours (7%), and before and after school transportation (7%).
- Parents discussed the following sexual health and other health topics with their 6-to-17-year-old in the past year:
  - Bullying (74%)
  - Weight status (70%)
  - Career plan/post-secondary education (66%)
  - Social media issues (60%)
  - Body image (55%)
  - Volunteering (54%)
  - Dating and relationships (52%)
  - Negative effects of alcohol/tobacco/illegal drugs/misusing prescription drugs (49%)
  - Abstinence/how to refuse sex (47%)
  - Refusal skills/peer pressure (47%)
  - Anxiety/depression/suicide (36%)
  - Birth control/condom use/safer sex/STD prevention (36%)
  - School/legal consequences of using tobacco/alcohol/other drugs (30%)
  - Energy drinks (20%)
- Wyandot County adults approved of their child doing the following: drinking alcohol (2%), parents allowing or giving alcohol to minors in their home (2%), and consuming alcohol and driving a child (2%).



# Youth Health: Weight Status

## Key Findings

Nearly one-fifth (19%) of Wyandot County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 32% of Wyandot County youth reported that they were slightly or very overweight. Sixty-nine percent (69%) of youth exercised 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 fat changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- Nearly one-fifth (19%) of Wyandot County youth were classified as obese by Body Mass Index (BMI) calculations (YRBS reported 13% for Ohio in 2013 and 14% for the U.S. in 2015), 11% of youth were classified as overweight (YRBS reported 16% for Ohio in 2013 and 16% for the U.S. in 2015), 66% were normal weight, and 4% were underweight.
- About one-third (32%) of youth described themselves as being either slightly or very overweight (2013 YRBS reported 28% for Ohio and 2015 YRBS reported 32% for the U.S.).
- Over half (52%) of all youth were trying to lose weight, increasing to 61% of Wyandot County female youth (compared to 45% of males) (YRBS reported 47% for Ohio in 2013 and 46% for the U.S. in 2015).
- Youth did the following to lose or keep from gaining weight in the past 30 days:
  - Exercised (60%)
  - Drank more water (51%)
  - Ate more fruits (38%)
  - Ate less food, fewer calories, or foods lower in fat (34%)
  - Ate more vegetables (27%)
  - Skipped meals (17%)
  - Went without eating for 24 hours or more (4%) (YRBS reported 10% for Ohio and 13% for the U.S. in 2013)
  - Vomited or took laxatives (2%) (YRBS reported 5% for Ohio and 4% for the U.S. in 2013)
  - Took diet pills, powders, or liquids without a doctor's advice (1%) (YRBS reported 5% for Ohio and 5% for the U.S. in 2013)
  - Smoked cigarettes or e-cigarettes to lose weight (1%)
  - Used illegal drugs (1%)
- Twenty-eight percent (28%) of youth did not do anything to lose or keep from gaining weight.

## Nutrition

- Nine percent (9%) of youth reported they went to bed hungry on at least one day because their family did not have enough money for food. Two percent (2%) of youth went to bed hungry every night of the week.
- Wyandot County youth reported that their families got most of their food from the following locations: grocery store (92%), fast food restaurant (3%), farmer's market (2%), convenience/corner store (1%), food pantry (<1%), and other locations (1%).

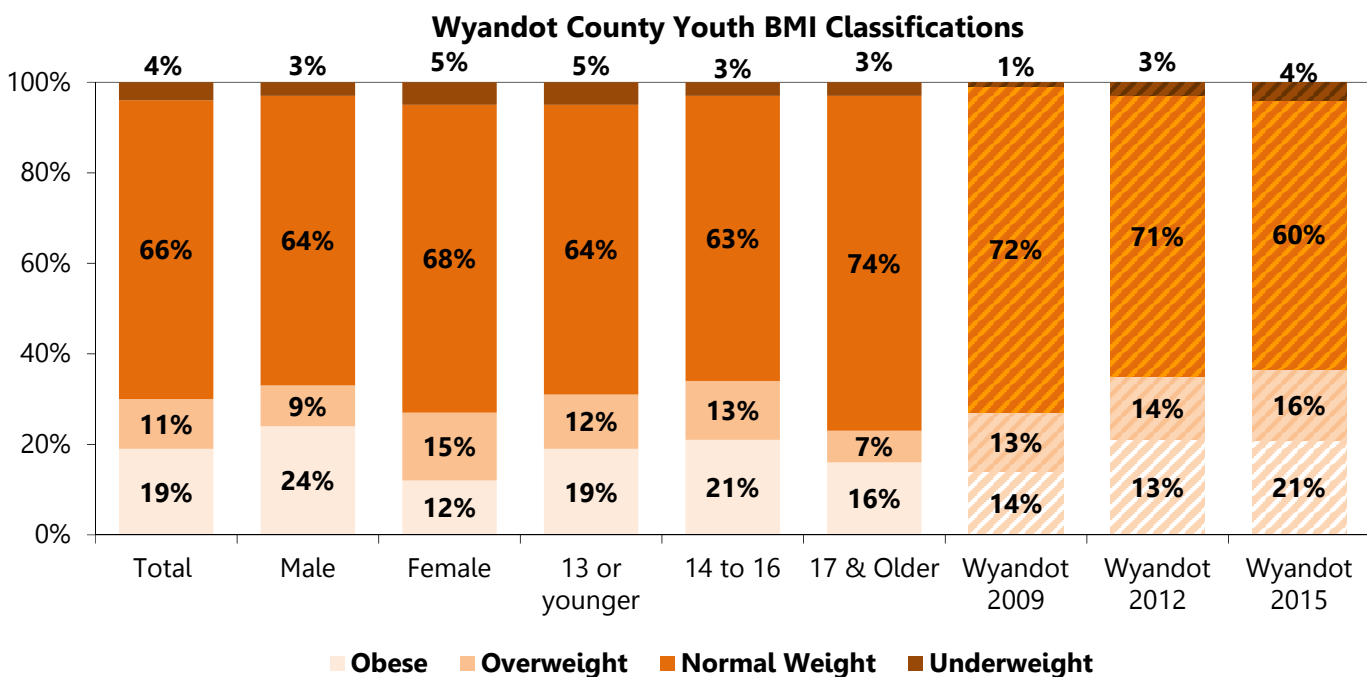
## Physical Activity

- Over half (53%) of Wyandot County youth participated in a sports or intramural program, and 38% of youth exercised outside of school.
- Sixty-nine percent (69%) of 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 (2013 YRBS reports 48% for Ohio and 2015 YRBS reports 49% for the U.S.), and 29% did so every day in the past week (2013 YRBS reports 26% for Ohio and 2015 YRBS reports 27% for the U.S.). Nearly one-fifth (18%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week (2013 YRBS reports 13% for Ohio and 2015 YRBS reports 14% for the U.S.).

- The CDC recommends that children and adolescents participate in at least 60 minutes of physical activity 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.
- Wyandot County youth spent an average of 3.8 hours on electronic devices, 2.9 hours spending time with family, 2.1 hours watching TV, 1.4 hours doing homework, 1.9 hours playing video games, and 0.8 hours reading on an average day of the week.
- Nearly one-third (30%) of youth spent three or more hours watching TV on an average day (2013 YRBS reported 28% for Ohio and the 2015 YRBS reported 25% for the U.S.).

Wyandot County youth did the following to lose weight in the past 30 days:	Percent
Exercised	60%
Drank more water	51%
Ate more fruits	38%
Ate less food, fewer calories, or foods lower in fat	34%
Ate more vegetables	27%
Skipped meals	17%
Went without eating for 24 hours	4%
Vomited or took laxatives	2%
Took diet pills, powders, or liquids without a doctor's advice	1%
Smoked cigarettes	1%
Used illegal drugs	1%

The following graph shows the percentage of Wyandot County youth who were classified as obese, overweight, normal weight or underweight according to Body Mass Index (BMI) by age. Examples of how to interpret the information in the graph include: 66% of all Wyandot County youth were classified as normal weight, 19% were obese, 11% were overweight, and 4% were underweight for their age and gender.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

## Healthy People 2020 Nutrition and Weight Status (NWS)

Objective	Wyandot County 2018	Ohio 2013	U.S. 2015	Healthy People 2020 Target
<b>NWS-10.4 Reduce the proportion of children and adolescents aged 2 to 19 years who are considered obese</b>	19% (6-12 Grade)  18% (9-12 Grade)	13% (9-12 Grade)	14% (9-12 Grade)	15%

*Note: The Healthy People 2020 target is for children and youth aged 2-19 years.*

*(Sources: Healthy People 2020 Objectives, 2013 Ohio YRBS, 2015 U.S. YRBS, 2018 Wyandot County Health Assessment)*

Youth Comparisons	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Obese</b>	14%	21%	21%	19%	18%	13%	14%
<b>Overweight</b>	13%	14%	16%	11%	11%	16%	16%
<b>Described themselves as slightly or very overweight</b>	27%	32%	33%	32%	33%	28%	32%
<b>Tried to lose weight</b>	47%	46%	47%	52%	50%	47%	46%
<b>Exercised to lose weight</b> (in the past 30 days)	50%	53%	52%	60%	58%	N/A	N/A
<b>Ate less food, fewer calories, or foods lower in fat to lose weight</b> (in the past 30 days)	25%	28%	31%	34%	37%	N/A	N/A
<b>Went without eating for 24 hours or more</b> (in the past 30 days)	3%	5%	5%	4%	6%	10%	13%#
<b>Took diet pills, powders, or liquids without a doctor's advice</b> (in the past 30 days)	2%	2%	2%	1%	2%	5%	5%#
<b>Vomited or took laxatives</b> (in the past 30 days)	1%	2%	1%	2%	3%	5%	4%#
<b>Physically active at least 60 minutes per day on every day in past week</b>	28%	26%	35%	29%	33%	26%	27%
<b>Physically active at least 60 minutes per day on 5 or more days in past week</b>	51%	51%	60%	52%	58%	48%	49%
<b>Did not participate in at least 60 minutes of physical activity on any day in past week</b>	13%	11%	9%	18%	17%	13%	14%
<b>Watched 3 or more hours per day of television</b> (on an average school day)	41%	49%	36%	30%	27%	28%	25%

*N/A – Not Available*

*#Comparative data for U.S. is 2013*

## Health Effects of Childhood Obesity

Childhood obesity has both immediate and long-term effects on health and well-being.

### Immediate health effects:

- Obese youth are more likely to have risk factors for cardiovascular disease, such as high cholesterol or high blood pressure. In a population-based sample of 5- to 17-year-olds, 70% of obese youth had at least one risk factor for cardiovascular disease.
- Obese adolescents are more likely to have prediabetes, a condition in which blood glucose levels indicate a high risk for development of diabetes.
- Children and adolescents who are obese are at greater risk for bone and joint problems, sleep apnea, and social and psychological problems such as stigmatization and poor self-esteem.

### Long-term health effects:

- Children and adolescents who are obese are likely to be obese as adults and are therefore more at risk for adult health problems such as heart disease, type 2 diabetes, stroke, several types of cancer, and osteoarthritis. One study showed that children who became obese as early as age 2 were more likely to be obese as adults.
- Overweight and obesity are associated with increased risk for many types of cancer, including cancer of the breast, colon, endometrium, esophagus, kidney, pancreas, gall bladder, thyroid, ovary, cervix, and prostate, as well as multiple myeloma and Hodgkin's lymphoma.

*(Sources: CDC, Childhood Overweight and Obesity, Updated: 12/15/16)*

# Youth Health: Tobacco Use

## Key Findings

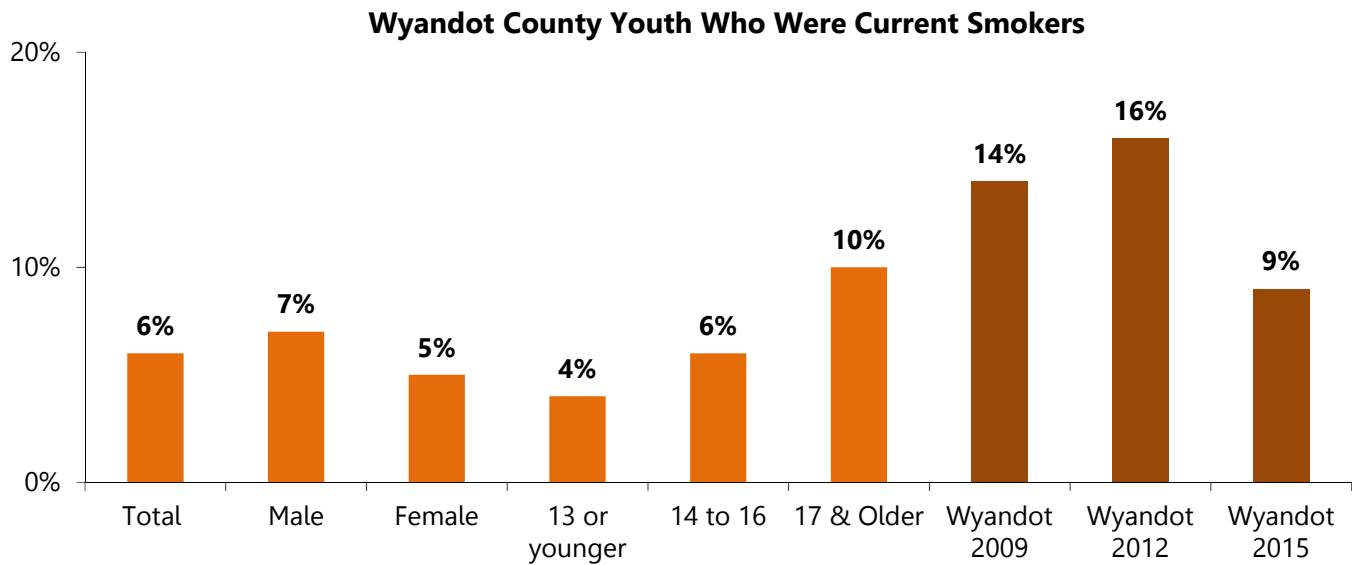
*Six percent (6%) of Wyandot County youth were current smokers, increasing to 10% of those ages 17 and older. Twenty-three percent (23%) of those who had smoked a whole cigarette did so at 10 years old or younger.*

**14% of Wyandot County youth used e-cigarettes in the past year.**

## Youth Tobacco Use Behaviors

- Over one-fifth (22%) of Wyandot County youth had tried cigarette smoking, increasing to 35% of those ages 17 and older (YRBS reported 32% for the U.S. in 2015).
- Seven percent (7%) of all youth had smoked a whole cigarette for the first time before the age of 13 (YRBS reported 7% for the U.S. in 2015).
- About one-quarter (23%) of those who had smoked a whole cigarette did so at 10 years old or younger, and another 14% had done so by 12 years old. The average age of onset for smoking was 13.0 years old.
- Nearly one-third (29%) of youth had used an electronic vapor product in their life. One-in-nine (11%) youth had done so at 12 years old or younger, 26% between the ages of 13 and 14, and 63% tried an electronic vapor product between the ages of 15 and 18. The average age of onset was 14.9 years old.
- Three percent (3%) of all youth had tried an electronic vapor product for the first time before the age of 13.
- Six percent (6%) of youth were current smokers, having smoked at some time in the past 30 days (YRBS reported 15% for Ohio in 2013 and 11% for the U.S. in 2015).
- Forty-two percent (42%) youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past 30 days.
- Youth used the following forms of tobacco in the past year: e-cigarettes (14%); cigarettes (11%); chewing tobacco, snuff, or dip (6%); cigars (4%); Swishers (4%); Black and Milds (4%); pouch [snus] (2%); cigarillos (2%); hookah (1%); little cigars (1%); and dissolvable tobacco products (<1%).
- Twenty-four percent (24%) of youth smokers borrowed cigarettes from someone else, 21% took them from a family member, 18% said some person 18 years or older gave them the cigarettes, 15% indicated they bought cigarettes from a store or gas station (2015 YRBS reported 13% for the U.S.), 14% gave someone else money to buy them cigarettes, and 42% got them some other way. No one reported getting them from a vending machine.
- More than half (55%) of Wyandot County youth were exposed to second hand smoke. Youth reported being exposed to second hand smoke in the following places: home (33%), another relative's home (24%), in the car (23%), at a friend's home (16%), fairgrounds (13%) and the park/ball field (9%).

The following graph shows the percentage of Wyandot County youth who were current smokers. Examples of how to interpret the information include: 6% of all Wyandot County youth were current smokers, including 7% of males and 5% of females.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between current smokers and participating in risky behaviors, as well as other activities and experiences. Examples of how to interpret the information include: 81% of current smokers participated in extracurricular activities, compared to 91% of non-current smokers.

**Behaviors of Wyandot County Youth**  
Current Smokers vs. Non-Current Smokers

Youth Behaviors	Current Smoker	Non-Current Smoker
<b>Currently participate in extracurricular activities</b>	81%	91%
<b>Had sexual intercourse</b> (in their lifetime)	68%	24%
<b>Seriously considered attempting suicide</b> (in the past 12 months)	56%	11%
<b>Experienced 3 or more adverse childhood experiences (ACEs)</b> (in their lifetime)	50%	21%
<b>Bullied</b> (in the past 12 months)	44%	44%
<b>Had at least one drink of alcohol</b> (in the past 30 days)	42%	11%
<b>Attempted suicide</b> (in the past 12 months)	20%	11%
<b>Used marijuana</b> (in the past 30 days)	4%	3%

"Current smokers" indicate youth who self-reported smoking at any time during the past 30 days.

## Healthy People 2020 Tobacco Use (TU)

Objective	Wyandot County 2018	Ohio 2013	U.S. 2015	Healthy People 2020 Target
<b>TU-2.2 Reduce use of cigarettes by adolescents (past month)</b>	6% (6-12 Grade)  9% (9-12 Grade)	15% (9-12 Grade)	11% (9-12 Grade)	16%

*Note: The Healthy People 2020 target is for youth in grades 9-12.*

*(Sources: Healthy People 2020 Objectives, 2013 Ohio YRBS, 2015 U.S. YRBS, 2018 Wyandot County Health Assessment)*

Youth Comparisons	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Ever tried cigarette smoking</b> (even one or two puffs)	36%	35%	26%	22%	31%	52%*	32%
<b>Current smoker</b> (smoked on at least 1 day during the past 30 days)	14%	16%	9%	6%	9%	15%	11%
<b>Smoked a whole cigarette for the first time before the age of 13</b> (of all youth)	12%	11%	6%	7%	7%	14%*	7%
<b>Usually obtained cigarettes by buying them in a store or gas station</b> (of current smokers)	N/A	26%	9%	15%	20%	N/A	13%

*\*Comparative YRBS data for Ohio is 2011*

*N/A – Not Available*

### E-Cigarette Use Among Youth and Young Adults

- E-cigarettes are now the most commonly used tobacco product among youth, surpassing conventional cigarettes in 2014.
- E-cigarette aerosol is not harmless “water vapor”. It can contain harmful and potentially harmful constituents, including nicotine. Nicotine exposure during adolescence can cause addiction and can harm the developing adolescent brain.
- The most recent estimates available show that 13.5% of middle school students (2015), 37.7% of high school students (2015), and 35.8% of young adults (2013–2014) had ever used an e-cigarette.
- Among middle and high school students, both ever and past-30-day e-cigarette use have more than tripled since 2011.
- The most recent data available show that the prevalence of past-30-day use of e-cigarettes is similar among high school students (16% in 2015, 13.4% in 2014) and young adults 18–24 years of age (13.6% in 2013–2014) compared to middle school students (5.3% in 2015, 3.9% in 2014) and adults 25 years of age and older (5.7% in 2013–2014).
- In 2015, 58.8% of high school students who were current users of combustible tobacco products were also current users of e-cigarettes.
- E-cigarette products can be used as a delivery system for cannabinoids and potentially for other illicit drugs. More specific surveillance measures are needed to assess the use of drugs other than nicotine in e-cigarettes.

*(Source: U.S. Department of Health and Human Services, A Report of the Surgeon General, 2016)*

# Youth Health: Alcohol Consumption

## Key Findings

*Over two-fifths (43%) of Wyandot County youth had drunk at least one drink of alcohol in their life, increasing to 65% of youth 17 and older. Thirteen percent (13%) of youth had at least one drink in the past 30 days, defining them as a current drinker. Of those who drank, 70% were defined as binge drinkers, increasing to 80% of those ages 17 and older.*

## Youth Alcohol Consumption

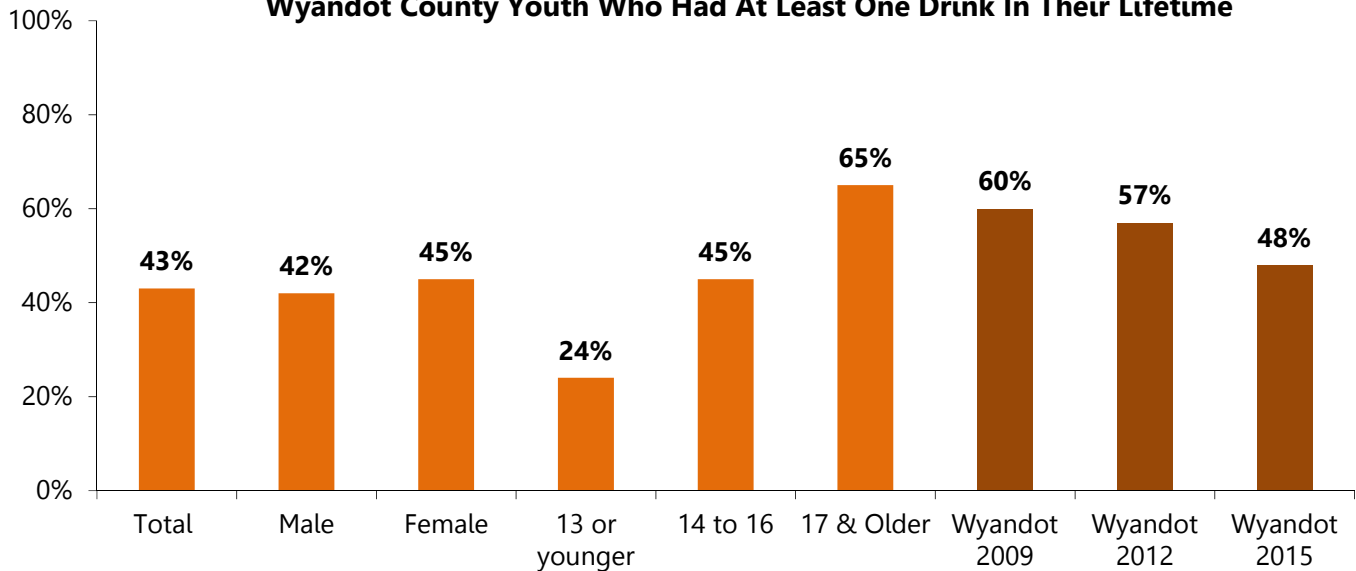
- Over two-fifths (43%) of youth had at least one drink of alcohol in their life, increasing to 65% of those ages 17 and older (2015 YRBS reports 63% for the U.S.).
- One-in-eight (13%) of youth had at least one drink in the past 30 days, increasing to 21% of those ages 17 and older (YRBS reports 30% for Ohio in 2013 and 33% for the U.S. in 2015).
- Based on all youth surveyed, 9% had five or more alcoholic drinks on an occasion in the last month and would be considered binge drinkers, increasing to 17% of those ages 17 and older (YRBS reports 16% for Ohio in 2013 and 18% for the U.S. in 2015). Of those who drank, 70% were defined as binge drinkers, increasing to 80% of those ages 17 and older.
- Of all youth, 17% had drunk alcohol for the first time before the age of 13 (YRBS reports 13% for Ohio in 2013 and 17% for the U.S. in 2015).
- Nearly two-fifths (39%) of youth who reported drinking at some time in their life had their first drink at 12 years old or younger, 23% took their first drink between the ages of 13 and 14, and 37% started drinking between the ages of 15 and 18. The average age of onset was 12.8 years old.
- Youth drinkers reported they got their alcohol from the following: someone gave it to them (38%) [2013 YRBS reports 38% for Ohio and the 2015 YRBS reports 44% for the U.S.]; a parent gave it to them (31%); someone older bought it (27%); an older friend or sibling bought it for them (11%); took it from a store or family member (3%); bought it in a liquor store, convenience store, supermarket, discount store, or gas station (2%); a friend's parent gave it to them (2%); and some other way (19%). No one reported using a fake ID.
- During the past month, 11% of all Wyandot County youth had ridden in a car driven by someone who had been drinking alcohol (YRBS reports 17% for Ohio in 2013 and 20% for the U.S. in 2015).

**In 2018, 13% of Wyandot County youth had at least one drink in the past 30 days.**



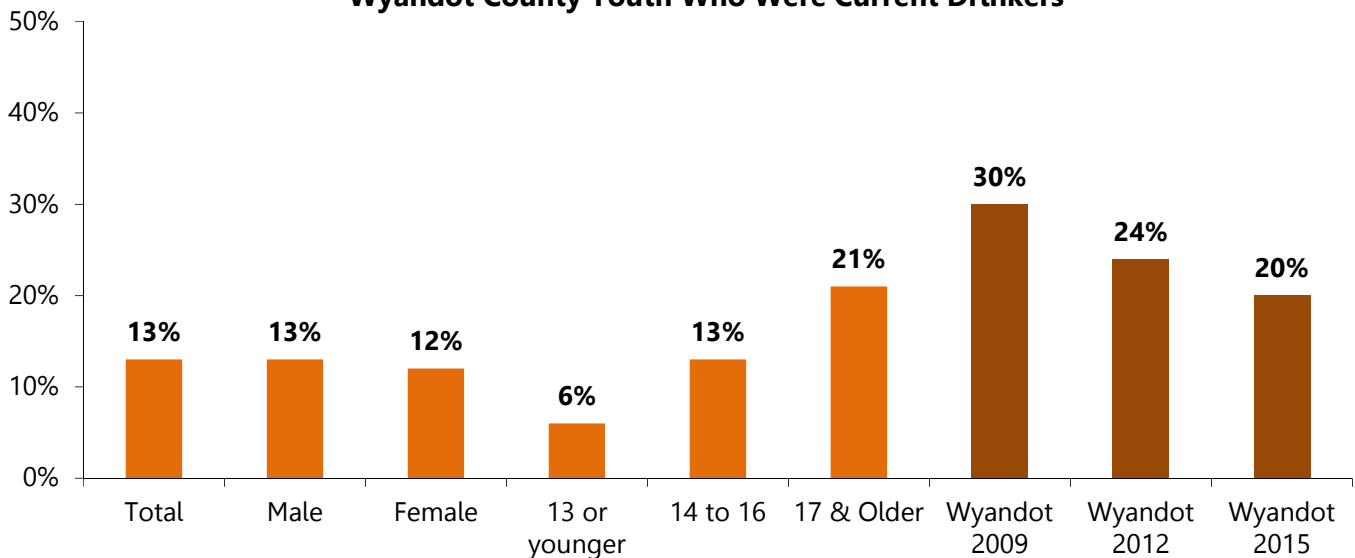
The following graphs show the percentage of Wyandot County youth who drank in their lifetime and who were current drinkers. Examples of how to interpret the information include: 43% of all Wyandot County youth had drank at some time in their life, including 42% of males and 45% of females.

### Wyandot County Youth Who Had At Least One Drink In Their Lifetime



Based on all Wyandot County youth surveyed, 9% were defined as binge drinkers.

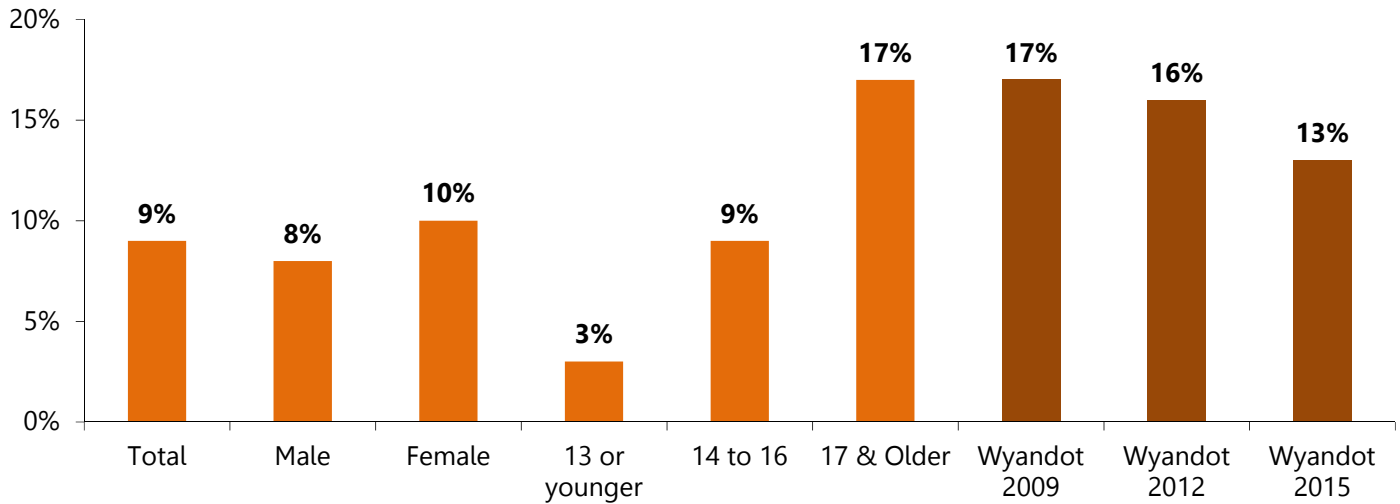
### Wyandot County Youth Who Were Current Drinkers



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows the percentage of youth who binge drank in the past month. Examples of how to interpret the information include: 9% of youth binge drank, including 8% of males and 10% of females.

### Wyandot County Youth Binge Drinking in Past Month



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between current drinkers and participating in risky behaviors, as well as other activities and experiences. Examples of how to interpret the information include: 90% of current drinkers participated in extracurricular activities, compared to 90% of non-current drinkers.

### Behaviors of Wyandot County Youth Current Drinkers vs. Non-Current Drinkers

Youth Behaviors	Current Drinker	Non-Current Drinker
Currently participate in extracurricular activities	90%	90%
Bullied (in the past 12 months)	62%	41%
Had sexual intercourse (in their lifetime)	58%	22%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	43%	20%
Seriously considered attempting suicide (in the past 12 months)	27%	12%
Smoked cigarettes (in the past 30 days)	21%	4%
Attempted suicide (in the past 12 months)	21%	10%
Used marijuana (in the past 30 days)	15%	1%
Misused prescription medication (in the past 30 days)	2%	1%

"Current drinker" indicate youth who self-reported having had at least one drink of alcohol during the past 30 days.

## Healthy People 2020 Substance Abuse (SA)

Objective	Wyandot County 2018	Ohio 2013	U.S. 2015	Healthy People 2020 Target
<b>SA-14.4 Reduce the proportion of persons engaging in binge drinking during the past month</b>	9% (6-12 Grade)  13% (9-12 Grade)	16% (9-12 Grade)	18% (9-12 Grade)	9%

*Note: The Healthy People 2020 target is for youth aged 12-17 years.  
(Sources: Healthy People 2020 Objectives, 2013 Ohio YRBS, 2015 U.S. YRBS, 2018 Wyandot County Health Assessment)*

Youth Comparisons	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Ever drank alcohol</b> (at least one drink of alcohol on at least 1 day during their life)	60%	57%	48%	43%	55%	71%*	63%
<b>Current Drinker</b> (at least one drink of alcohol on at least 1 day during the past 30 days)	30%	24%	20%	13%	18%	30%	33%
<b>Binge drinker</b> (drank 5 or more drinks within a couple of hours on at least 1 day during the past 30 days)	17%	16%	13%	9%	13%	16%	18%
<b>Drank for the first time before age 13</b> (of all youth)	30%	19%	12%	17%	13%	13%	17%
<b>Rode with a driver who had been drinking alcohol</b> (in a car or other vehicle on 1 or more occasion during the past 30 days)	21%	21%	13%	11%	6%	17%	20%
<b>Obtained the alcohol they drank by someone giving it to them</b> (of youth drinkers)	N/A	36%	40%	38%	37%	38%	44%

*N/A-Not Available*

*\*Comparative YRBS data for Ohio is 2011*

## Underage Drinking in the U.S.

Excessive drinking is responsible for more than 4,300 deaths among underage youth each year, and cost the U.S. \$24 billion in economic costs in 2010.

On average, underage drinkers consume more drinks per drinking occasion than adult drinkers.

In 2010, there were approximately 189,000 emergency room visits by persons under age 21 for injuries and other conditions linked to alcohol.

Youth who drink alcohol are more likely to experience:

- School problems, such as higher absence and poor or failing grades.
- Social problems, such as fighting and lack of participation in youth activities.
- Legal problems, such as arrest for driving or physically hurting someone while drunk.
- Physical problems, such as hangovers or illnesses.
- Unwanted, unplanned, and unprotected sexual activity.
- Disruption of normal growth and sexual development.
- Physical and sexual assault.
- Alcohol-related car crashes and other unintentional injuries, such as burns, falls, and drowning.
- Higher risk for suicide and homicide.
- Memory problems.
- Abuse of other drugs.
- Changes in brain development that may have life-long effects.
- Death from alcohol poisoning.

In general, the risk of youth experiencing these problems is greater for those who binge drink than for those who do not binge drink,

Youth who start drinking before age 15 years are five times more likely to develop alcohol dependence or abuse later in life than those who begin drinking at or after age 21 years.

*(Source: CDC, Alcohol and Public Health, updated on October 20, 2016)*

# Youth Health: Drug Use

## Key Findings

*In 2018, 3% of Wyandot County youth had used marijuana at least once in the past 30 days, increasing to 8% of those ages 17 and over. Two percent (2%) of youth used prescription drugs not prescribed for them in the past month.*

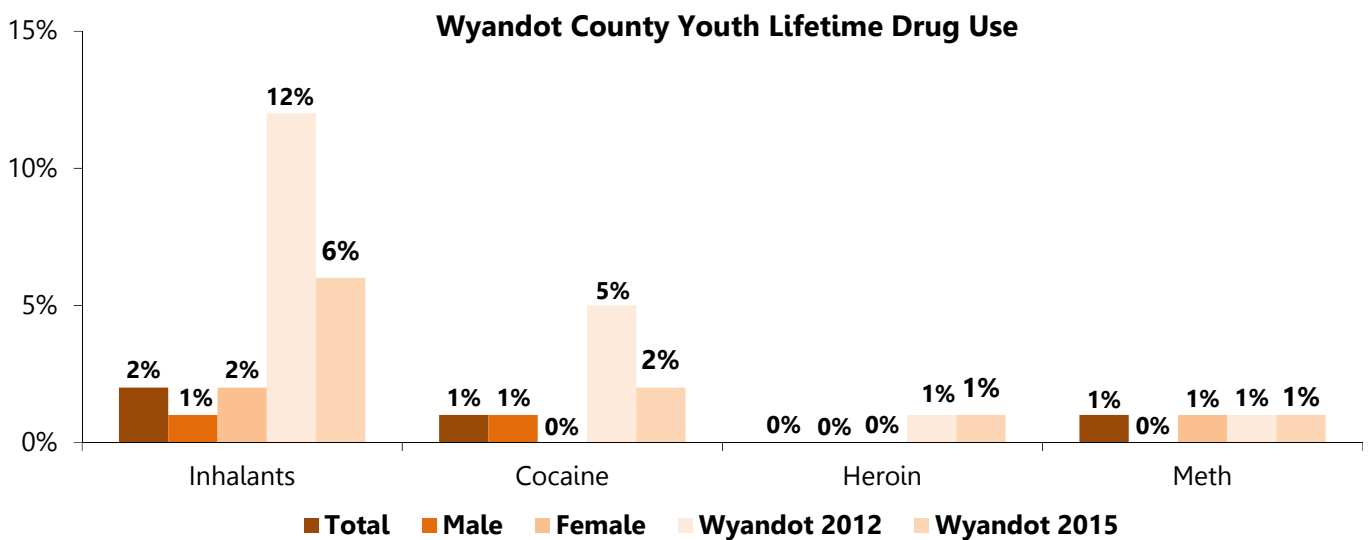
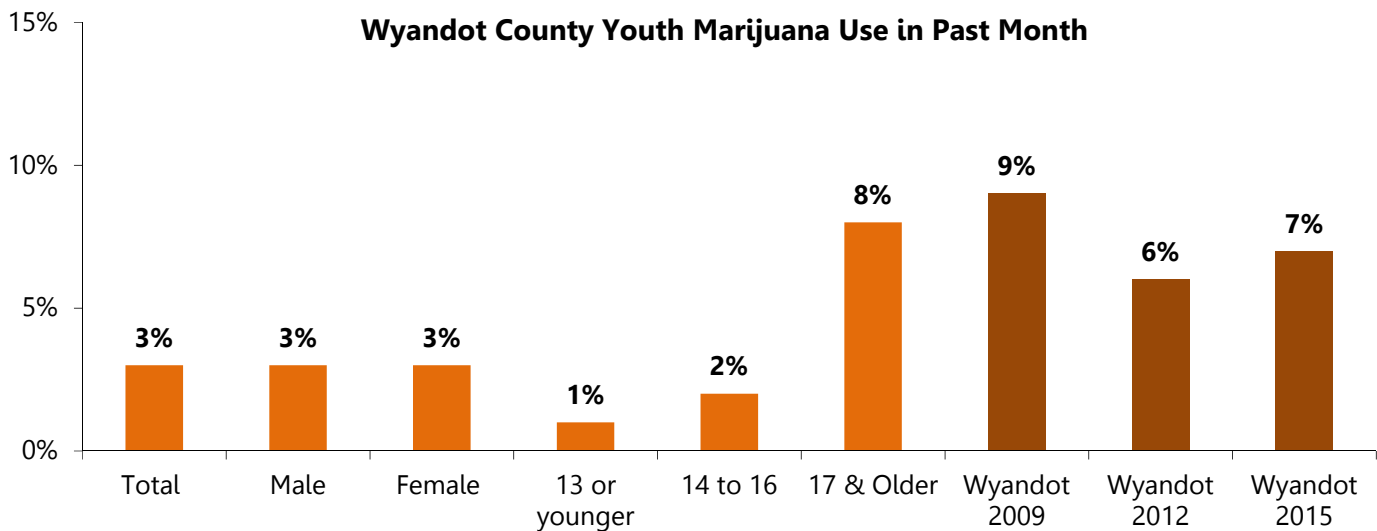
## Youth Drug Use

- In 2018, 3% of all Wyandot County youth had used marijuana at least once in the past 30 days, increasing to 8% of those ages 17 and over. The YRBS found a prevalence of 21% for Ohio youth in 2013 and 22% for U.S. youth in 2015.
- Over one-third (35%) of youth who tried marijuana did so by the age of 13. The average age of onset was 14.2 years old.
- In the past month, 2% of youth reported using prescriptions drugs not prescribed for them.
- Wyandot County youth agreed with the following: medical marijuana should be legalized (40%), using marijuana leads to using other drugs (38%), marijuana is addictive (35%), and recreational marijuana should be legalized (27%).
- Wyandot County youth had tried the following in their life:
  - Posh/salvia/synthetic marijuana (4%)
  - Inhalants (2%) (YRBS reported 9% for Ohio in 2013 and 7% for the U.S. in 2015)
  - Hallucinogenic drugs (2%)
  - Liquid THC (1%)
  - Cocaine (1%) (YRBS reported 4% for Ohio in 2013 and 5% for U.S. in 2015)
  - Ecstasy/MDMA/Molly (1%) (YRBS reported 5% for the U.S. in 2015)
  - K2/spice (1%)
  - Methamphetamines (1%) (YRBS reported 3% for the U.S. in 2015)
  - Misused over-the-counter medications (<1%)
  - Misused cough syrup (<1%)
  - No one reported using Heroin (0%) (YRBS reported 2% for Ohio in 2013 and 2% for the U.S. in 2015)
  - Steroids (0%) (YRBS reported 3% for Ohio in 2013 and 4% for the U.S. in 2015)
  - Bath salts (0%)
  - Went to a pharm party (0%)
  - GhB (0%)
  - Carfentanil/Fentanyl (0%)
  - Misused hand sanitizer (0%)
- Youth who misused prescription medications got them in the following ways: a parent gave it to them (67%), the internet (22%) and bought it from a friend (11%). No one reported getting prescription medication from a friend, another family member, taking them from a family member or friend or buying them from someone else.
- During the past 12 months, 4% of all Wyandot County youth reported that someone had offered, sold, or given them an illegal drug on school property (YRBS reports 20% for Ohio in 2013 and 22% for the U.S. in 2015).
- Youth reported using the following on school property during the school day: e-cigarettes (2%), chewing tobacco (2%), cigarettes (1%), prescription drugs not prescribed for them (1%), alcohol (1%), and illegal drugs (<1%).
- Youth indicated the following reasons for not using drugs: parents would be upset (60%), personal values (54%), legal consequences (45%), being kicked out of extra-curricular activities (40%), health problems (34%), friends would not approve (32%), random student drug testing (22%), and other (27%).

## Accessibility of Substances to Wyandot County Youth

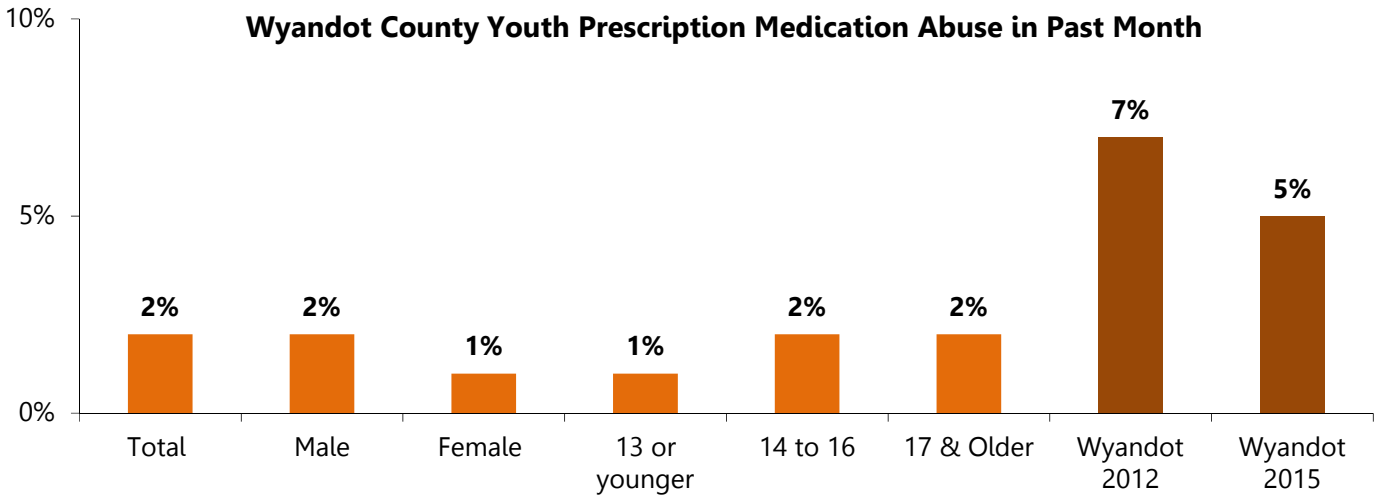
Substance	Available	Not Available	Don't Know
<b>Alcohol</b>	48%	38%	14%
<b>Tobacco</b>	41%	47%	12%
<b>E-cigarettes</b>	25%	61%	14%
<b>Marijuana</b>	16%	69%	15%
<b>Prescription drugs not prescribed to you</b>	16%	66%	18%
<b>Synthetic drugs (ex. K2, Spice, etc.)</b>	2%	78%	20%
<b>Methamphetamines</b>	1%	81%	18%
<b>Heroin</b>	1%	84%	15%

*The following graphs indicate youth marijuana use in the past 30 days and youth lifetime drug use. Examples of how to interpret the information include: 3% of youth have used marijuana in the past 30 days, including 8% of those 17 and older.*



*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

The following graph shows youth prescription medication abuse in the past 30 days. Examples of how to interpret the information include: 2% of youth have misused prescription medication in the past 30 days, including 2% of males and 1% of females.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between current marijuana use and participating in risky behaviors, as well as other activities and experiences. Examples of how to interpret the information include: 92% of current marijuana users participated in extracurricular activities, compared to 91% of non-current marijuana users.

**Behaviors of Wyandot County Youth**  
*Current Marijuana Use vs. Non-Current Marijuana Use*

Youth Behavior	Current Marijuana User	Non-Current Marijuana User
<b>Currently participate in extracurricular activities</b>	92%	91%
<b>Had at least one drink of alcohol</b> (in the past 30 days)	67%	11%
<b>Bullied</b> (in the past 12 months)	58%	43%
<b>Experienced 3 or more adverse childhood experiences (ACEs)</b> (in their lifetime)	50%	22%
<b>Seriously considered attempting suicide</b> (in the past 12 months)	33%	13%
<b>Attempted suicide</b> (in the past 12 months)	17%	12%
<b>Smoked cigarettes</b> (in the past 30 days)	8%	6%

"Current marijuana use" indicates youth who self-reported using marijuana at any time during the past 30 days.

Youth Comparisons	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Used marijuana in the past month</b>	9%	6%	7%	3%	5%	21%	22%
<b>Prescription medication abuse in the past month</b>	N/A	7%	5%	2%	1%	N/A	N/A
<b>Ever used methamphetamines</b> (in their lifetime)	1%	1%	1%	1%	1%	N/A	3%
<b>Ever used cocaine</b> (in their lifetime)	4%	5%	2%	1%	<1%	4%	5%
<b>Ever used heroin</b> (in their lifetime)	1%	1%	1%	0%	0%	2%	2%
<b>Ever used inhalants</b> (in their lifetime)	8%	12%	6%	2%	1%	9%	7%
<b>Ever took steroids without a doctor's prescription</b> (in their lifetime)	N/A	N/A	N/A	0%	0%	3%	4%
<b>Ever used ecstasy</b> (also called MDMA in their lifetime)	N/A	3%	3%	1%	1%	N/A	5%
<b>Were offered, sold, or given an illegal drug on school property</b> (in the past 12 months)	5%	8%	6%	4%	5%	20%	22%

N/A-Not Available

## Youth Prescription (Rx) Drug Misuse

Prescription drug misuse has become a large public health problem, because misuse can lead to addiction, and even overdose deaths. For teens, it is a growing problem:

- After marijuana and alcohol, prescription drugs are the most commonly misused substances by Americans age 14 and older.
- Teens misuse prescription drugs for many reasons, including to get high, to stop pain, or because they think it will help them with school work.
- Many teens get prescription drugs they misuse from friends and relatives, sometimes without the person knowing.
- Boys and girls tend to misuse some types of prescription drugs for different reasons. For example, boys are more likely to misuse prescription stimulants to get high, while girls tend to misuse them to stay alert or to lose weight.

(Source: National Institute on Drug Abuse for Teens, Prescription Drugs, revised January 2018)



# Youth Health: Sexual Behavior

## Key Findings

*In 2018, 26% of Wyandot County youth had sexual intercourse. One-quarter (25%) of sexually active youth had 4 or more sexual partners. Nine percent (9%) of youth engaged in intercourse without a reliable method of protection. Nine percent (9%) of youth had not been taught about pregnancy prevention, sexually transmitted diseases, HIV/AIDS, or the use of condoms.*

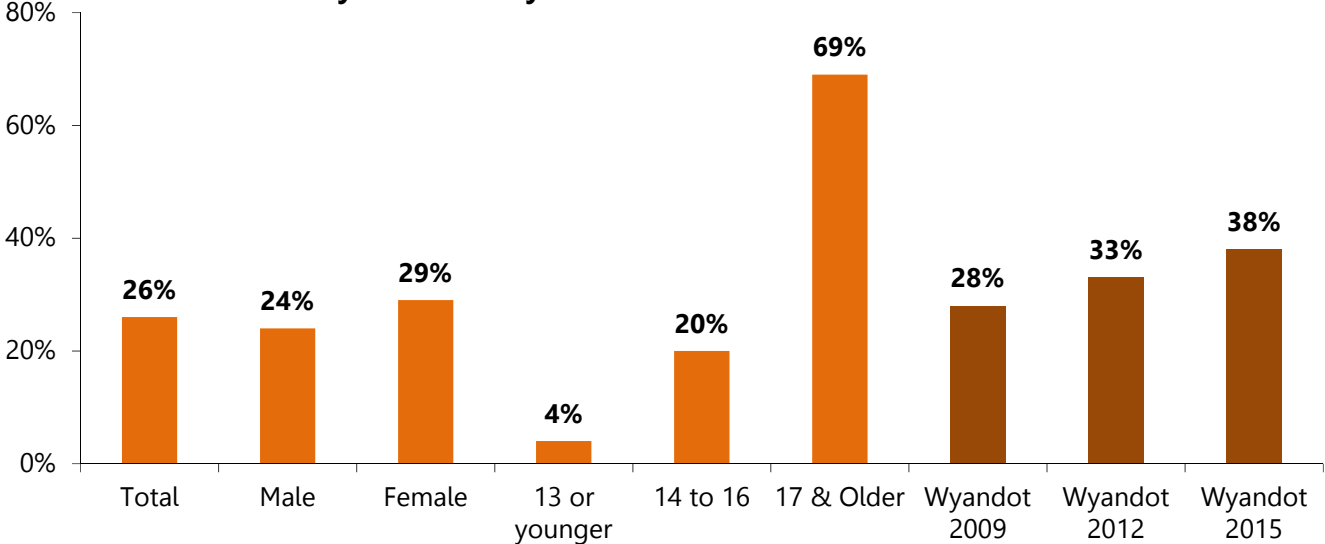
## 26% of Wyandot County youth had sexual intercourse.

### Youth Sexual Behavior

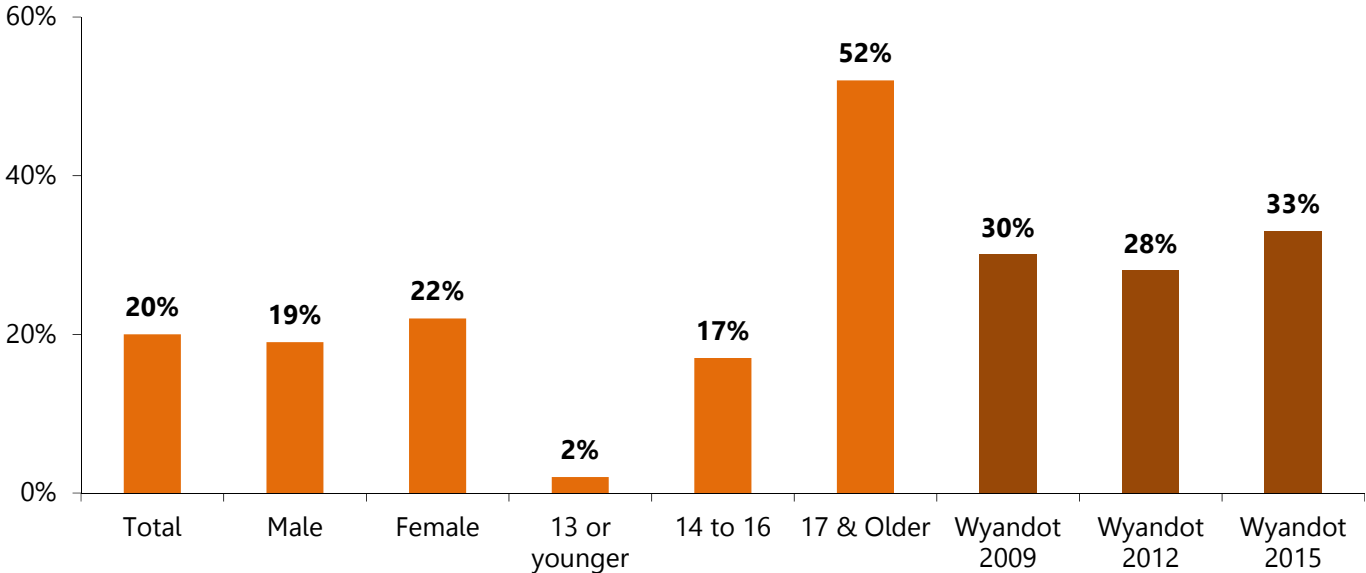
- Twenty-six percent (26%) of Wyandot County youth had sexual intercourse, increasing to 69% of those ages 17 and over. (The YRBS reports 43% for Ohio in 2013 and 41% for U.S. in 2015).
- One-fifth (20%) youth had participated in oral sex, increasing to 52% of those ages 17 and over.
- Five percent (5%) of youth had participated in anal sex, increasing to 13% of those ages 17 and over.
- One-quarter (25%) of youth had participated in sexting, increasing to 48% of those ages 17 and over.
- Almost one-third (29%) of youth had viewed pornography, increasing to 39% of males and 43% of those ages 17 and over.
- Of sexually active youth, 37% had one sexual partner and 69% had multiple partners.
- One-quarter (25%) of sexually active youth had 4 or more sexual partners.
- Seven percent (7%) of all youth had 4 or more sexual partners (YRBS reports 12% for Ohio in 2013 and 12% for the U.S. in 2015).
- Of sexually active youth, 15% had done so by the age of 13, and another 47% had done so by 15 years of age. The average age of onset was 14.9 years old.
- Of all youth, 4% were sexually active before the age of 13 (YRBS reports 4% for Ohio in 2013 and 4% for the U.S. in 2015)
- Almost three-fifths (59%) of youth who were sexually active used condoms to prevent pregnancy; 35% used birth control pills; 21% used the withdrawal method; 11% used a shot, patch or birth control ring; and 2% used an IUD. Three percent (3%) of youth reported they were gay or lesbian. However, 9% engaged in intercourse without a reliable method of protection, and 9% reported they were unsure.
- Wyandot County youth had experienced the following: had sexual contact with a female (16%); had sexual contact with a male (10%); wanted to get pregnant (1%); had an abortion (1%); been pregnant (1%); tried to get pregnant (1%); been treated for an STD (1%); had a miscarriage (1%); had sex in exchange for something of value such as food, drugs, shelter or money (<1%); had a child (<1%); and got someone pregnant (<1%).
- In the past month, youth reported the following situations: received a text or e-mail with a revealing or sexual photo of someone (15%); texted, e-mailed, or posted electronically a revealing or sexual photo of themselves (10%); and discovered that a revealing or sexual photo of themselves was texted, e-mailed, or posted electronically without their permission (2%).
- Youth learned about pregnancy prevention, sexually transmitted diseases, HIV/AIDS, and the use of condoms from school (81%), their parents (60%), their friends (27%), their doctor (27%), the internet or social media (26%), their siblings (13%), church (7%), and somewhere else (6%). Nine percent (9%) of youth had not been taught about these subjects.

The following graphs show the percentage of Wyandot County youth who participated in sexual intercourse and oral sex. Examples of how to interpret the information include: 26% of all Wyandot County youth had sexual intercourse, including 24% of males, and 29% of females.

**Wyandot County Youth Who Had Sexual Intercourse**



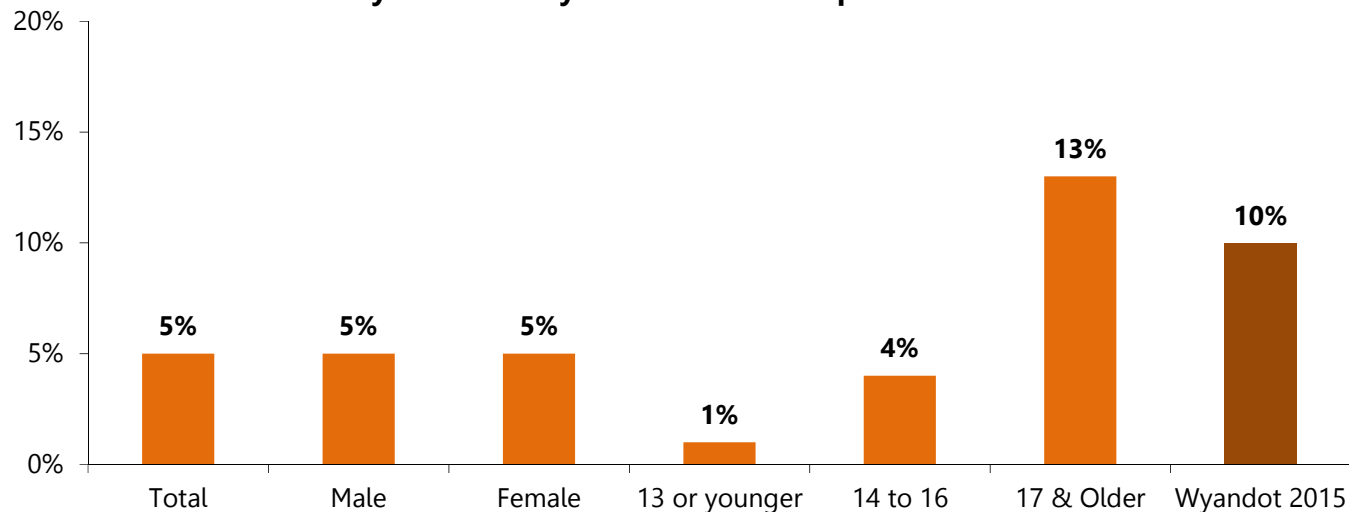
**Wyandot County Youth Who Participated in Oral Sex**



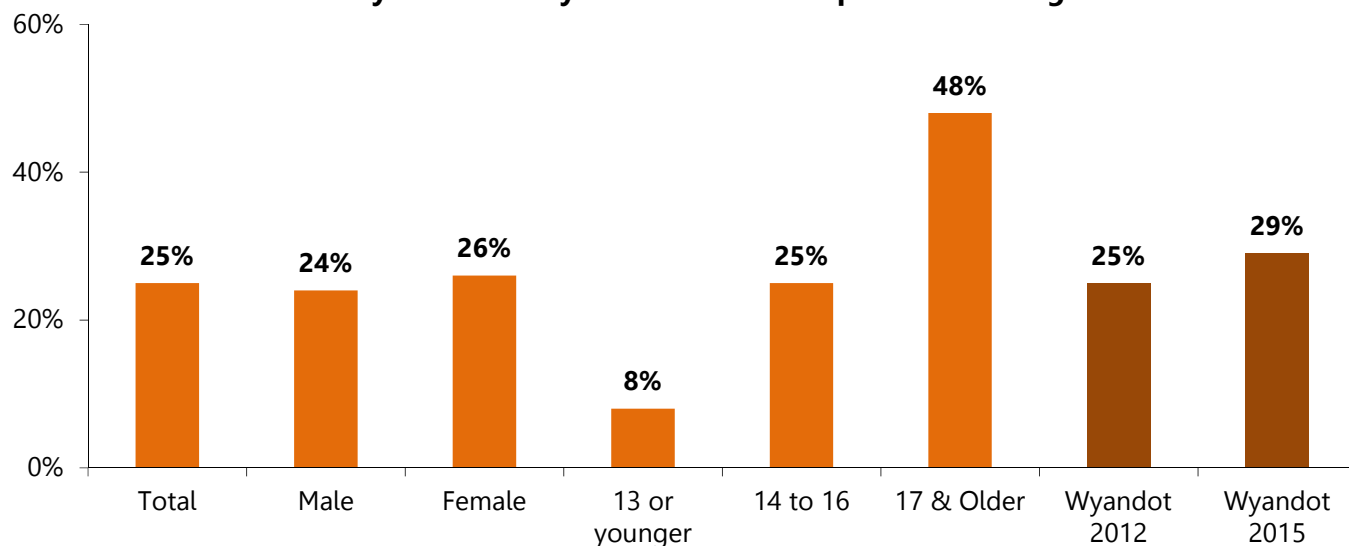
Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

*The following graphs show the percentage of Wyandot County youth who participated in anal sex and sexting. Examples of how to interpret the information include: 5% of all Wyandot County youth had anal sex, including 13% of those 17 and older.*

**Wyandot County Youth Who Participated in Anal Sex**



**Wyandot County Youth Who Participated in Sexting**



*Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

Youth Comparisons	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (7 <sup>th</sup> -12 <sup>th</sup> )*	Wyandot County 2015 (7 <sup>th</sup> -12 <sup>th</sup> )*	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Ever had sexual intercourse</b>	28%	33%	38%	26%	42%	43%	41%
<b>Had sexual intercourse with four or more persons</b> (of all youth during their life)	7%	8%	7%	7%	11%	12%	12%
<b>Had sexual intercourse before the age 13</b> (for the first time of all youth)	4%	4%	2%	4%	2%	4%	4%
<b>Used a condom</b> (during last sexual intercourse)	67%	67%	67%	59%	61%	51%	57%
<b>Used birth control pills</b> (during last sexual intercourse)	49%	44%	46%	35%	38%	24%	18%
<b>Used an IUD</b> (during last sexual intercourse)	N/A	N/A	3%	2%	2%	2%	3%
<b>Used a shot, patch or birth control ring</b> (during last sexual intercourse)	N/A	N/A	17%	11%	12%	8%	5%
<b>Did not use any method to prevent pregnancy during last sexual intercourse</b>	7%	8%	7%	9%	9%	12%	14%

N/A – Not Available

\*Only students in grades 7<sup>th</sup>-12<sup>th</sup> were asked sexual health questions in 2012 and 2015

## Sexual Risk Behavior

Many young people engage in sexual risk behaviors that can result in unintended health outcomes. For example, among U.S. high school students surveyed in 2015:

- Only 10% of sexually experienced students have ever been tested for HIV.
- 41% had ever had sexual intercourse.
- 30% had had sexual intercourse during the previous 3 months, and, of these
  - 43% did not use a condom the last time they had sex.
  - 14% did not use any method to prevent pregnancy.
  - 21% had drunk alcohol or used drugs before last sexual intercourse.

Sexual risk behaviors place adolescents at risk for HIV infection, other sexually transmitted diseases (STDs), and unintended pregnancy:

- Young people (aged 13-24) accounted for an estimated 21% of all new HIV diagnoses in the United States in 2016.
- Among young people (aged 13-24) diagnosed with HIV in 2014, 81% were gay and bisexual males.
- Half of the nearly 20 million new STDs reported each year are among young people, between the ages 15 to 24
- Nearly 210,000 babies were born to teen girls aged 15-19 years in 2016.

(Source: CDC, *Adolescent and School Health*, updated April 11, 2018)

# Youth Health: Mental Health

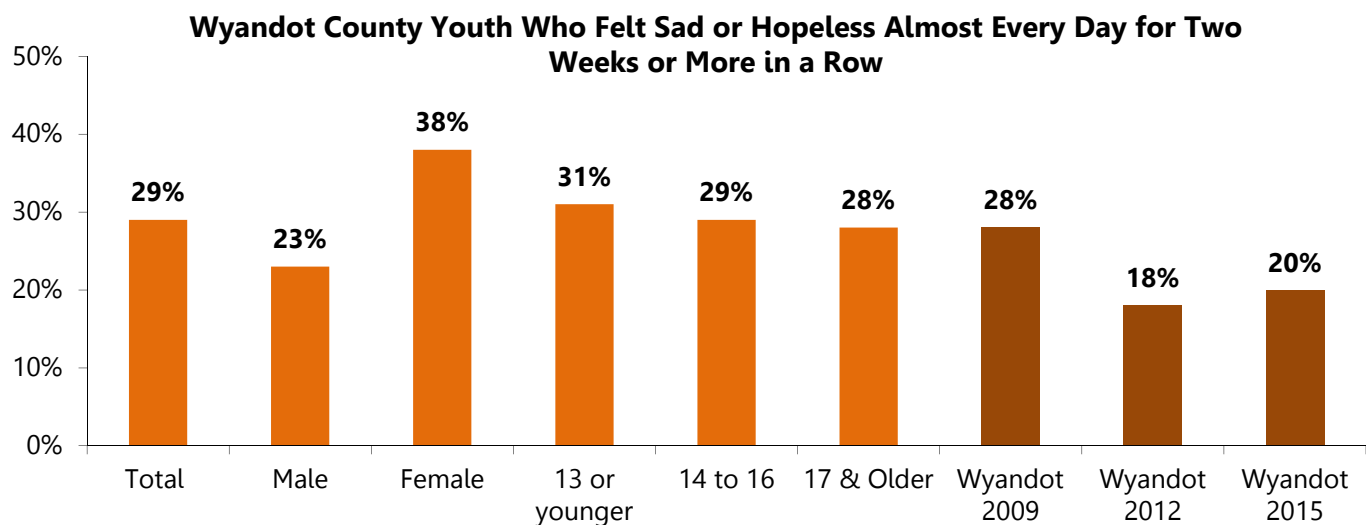
## Key Findings

Fourteen percent (14%) of youth had seriously considered attempting suicide in the past year, and 11% attempted suicide in the past year. The top three causes for anxiety, stress or depression for Wyandot County youth were academic success (33%), fighting with friends (33%), and self-image (27%).

## Youth Mental Health

- Over one-quarter (29%) 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, increasing to 38% of females (YRBS reported 26% for Ohio in 2013 and 30% for the U.S. in 2015).
- Fourteen percent (14%) of youth reported they had seriously considered attempting suicide in the past 12 months, increasing to 19% of females (YRBS reported 14% for Ohio and 18% for the U.S. in 2015).
- In the past year, 11% of youth had attempted suicide. Six percent (6%) of youth had made more than one attempt. The YRBS reported a suicide attempt prevalence rate of 9% for U.S. youth in 2015 and 6% for Ohio youth in 2013.
- Youth reported the following caused them anxiety, stress or depression: academic success (33%), fighting with friends (33%), self-image (27%), sports (26%), death of close family member or friend (26%), fighting at home (24%), being bullied (23%), stress at home (23%), peer pressure (22%), breakup (20%), dating relationship (20%), parent divorce/separation (16%), caring for younger siblings (13%), sick parent (7%), poverty/no money (6%), alcohol or drug use in the home (3%), sexual orientation (2%), not having enough to eat (2%), not having a place to live (2%), and other (17%).
- Youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (50%); hobbies (36%); texting someone (34%); talking to a peer (28%); talking to someone in their family (27%); exercising (27%); eat more or less than normal (26%); eating (26%); using social media (17%); breaking something (16%); praying/reading the Bible (14%); shopping (8%); writing in a journal (6%); and drinking alcohol, smoking/using tobacco, using illegal drugs (4%). Nearly one-fifth (18%) of youth reported they did not have anxiety, stress, or depression.

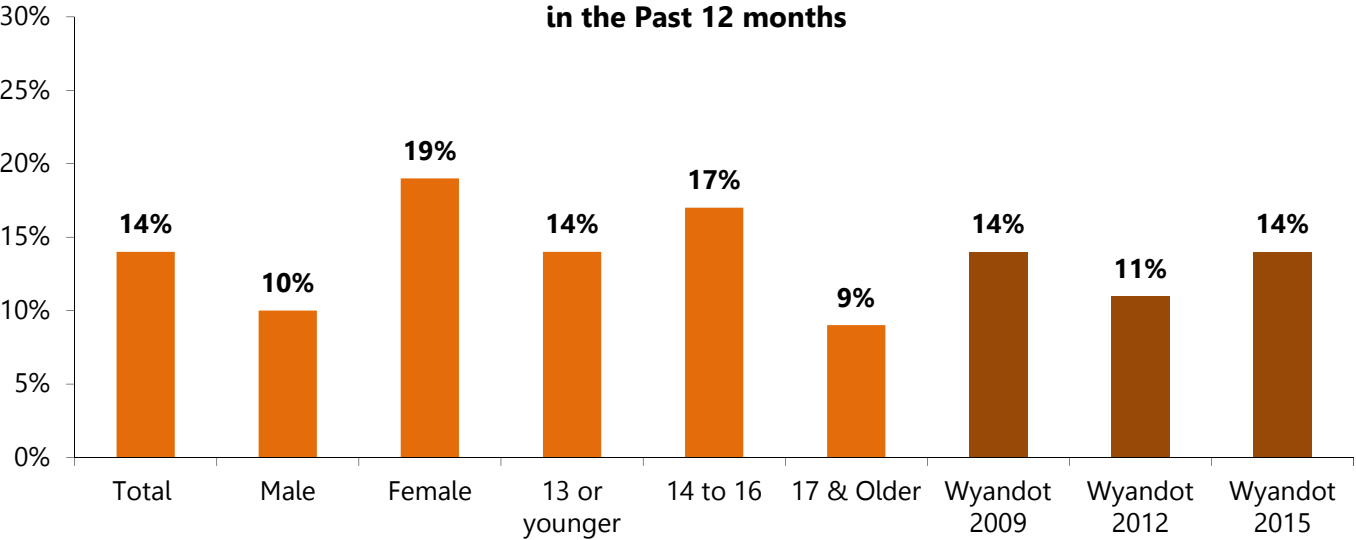
*The following graph shows Wyandot County youth who felt sad or hopeless every day for two weeks or more in a row. Examples of how to interpret the information include: 29% of youth felt sad or hopeless almost every day for two weeks or more in a row, including 23% of males and 38% of females.*



*Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.*

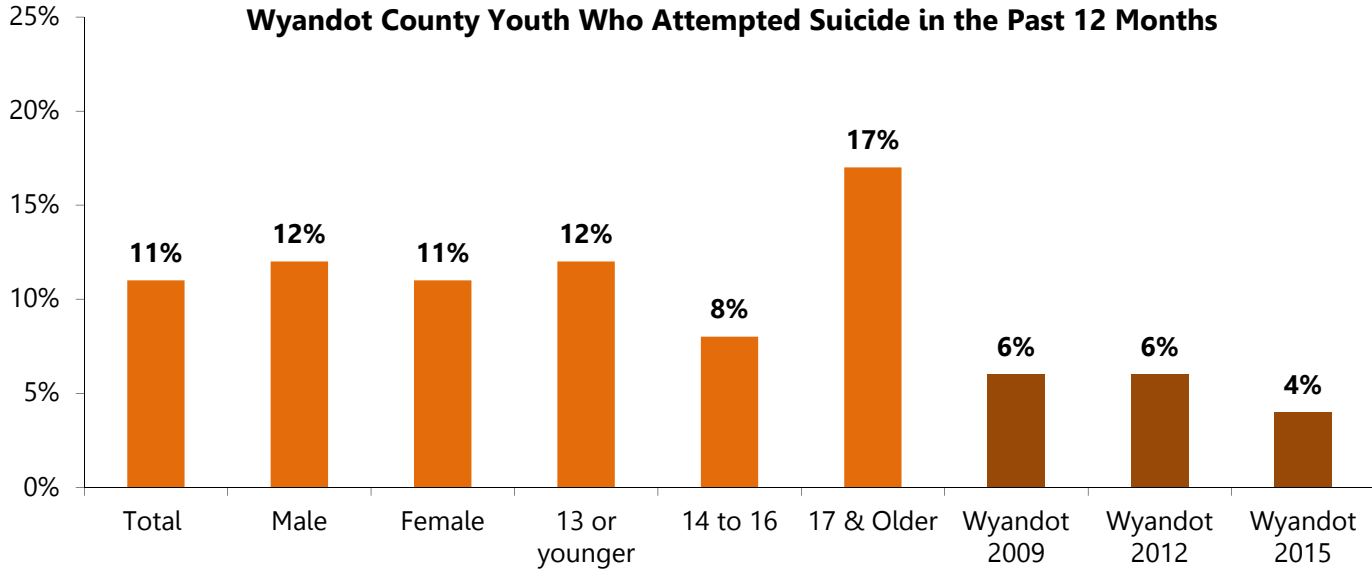
The following graphs show Wyandot County youth who had seriously considered attempting suicide in the past year and had attempted suicide in the past year. Examples of how to interpret the information include: 14% of youth seriously considered attempting suicide in the past year, including 10% of males and 19% of females.

**Wyandot County Youth Who Had Seriously Considered Attempting Suicide in the Past 12 months**



**29% of Wyandot County 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.**

**Wyandot County Youth Who Attempted Suicide in the Past 12 Months**



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

*The table below indicates correlations between those who contemplated suicide in the past 12 months and participating in risky behaviors, as well as other activities and experiences. Examples of how to interpret the information include: 76% of those who contemplated suicide were bullied in the past 12 months, compared to 38% of those who did not contemplate suicide.*

### Behaviors of Wyandot County Youth Contemplated Suicide vs. Did Not Contemplate Suicide

Youth Behaviors	Contemplated Suicide	Did Not Contemplate Suicide
<b>Bullied</b> (in the past 12 months)	76%	38%
<b>Smoked cigarettes</b> (in the past 30 days)	25%	3%
<b>Had at least one drink of alcohol</b> (in the past 30 days)	24%	11%
<b>Used marijuana</b> (in the past 30 days)	7%	2%

*“Contemplated suicide” indicates youth who self-reported seriously considering attempting suicide in the past year.*

Youth Comparisons	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Felt sad or hopeless</b> (almost every day for 2 or more weeks in a row so that they stopped doing some usual activities in the past 12 months)	28%	18%	20%	29%	30%	26%	30%
<b>Seriously considered attempting suicide</b> (in the past 12 months)	14%	11%	14%	14%	16%	14%	18%
<b>Attempted suicide</b> (in the past 12 months)	6%	6%	4%	11%	13%	6%	9%

### Youth Depression: Signs and Symptoms

- Occasionally being sad or feeling hopeless is a part of every child’s life. However, some children feel sad or uninterested in things that they used to enjoy, or feel helpless or hopeless in situations where they could do something to address the situations. When children feel persistent sadness and hopelessness, they may be diagnosed with depression.
- Examples of behaviors often seen when children are depressed include
  - Feeling sad, hopeless, or irritable a lot of the time
  - Not wanting to do or enjoy doing fun things
  - Changes in eating patterns – eating a lot more or a lot less than usual
  - Changes in sleep patterns – sleeping a lot more or a lot less than normal
  - Changes in energy – being tired and sluggish or tense and restless a lot of the time
  - Having a hard time paying attention
  - Feeling worthless, useless, or guilty
  - Self-injury and self-destructive behavior
- Extreme depression can lead a child to think about suicide or plan for suicide. For youth ages 10-24 years, suicide is the leading form of death.
- Some children may not talk about helpless and hopeless thoughts, and they may not appear sad. Depression might also cause a child to make trouble or act unmotivated, so others might not notice that the child is depressed or may incorrectly label the child as a trouble-maker or lazy.

*(Source: CDC, Children’s Mental Health: Anxiety and Depression, March 15, 2018)*

# Youth Health: Social Determinants of Health

## Key Findings

Nearly one-quarter (23%) of youth had three or more adverse childhood experiences (ACEs). Twenty-seven percent (27%) of Wyandot County youth drivers had texted while driving in the past 30 days. More than half of youth (54%) always wore a seatbelt when riding in a car driven by someone else.

## Personal Health

- Sixty-eight percent (68%) of Wyandot County youth had visited the doctor for a routine check-up in the past year. Three percent (3%) of youth said they had never been to the doctor for a routine check-up.
- Youth last saw a dentist for a check-up, exam, teeth cleaning, or other dental work at the following frequencies: less than a year ago (71%), (YRBS reported 75% for Ohio in 2013 and 74% for the U.S. in 2015), 1 to 2 years ago (9%), more than 2 years ago (4%), never (2%), and do not know (14%).

## Personal Safety

- In the past month, youth drivers did the following while driving: wore a seatbelt (88%), ate (45%), talked on their cell phone (38%), drove while tired or fatigued (33%), texted (27%), used their cell phone other than for talking or texting (26%), applied makeup (3%), read (2%), misused prescription drugs (1%) and used marijuana (1%). No one reported drinking alcohol or using illegal drugs while driving.
- Nearly one-fifth (18%) of youth drivers had more than one distraction while driving.
- Nine percent (5%) of Wyandot County youth rarely or never wore a seatbelt when riding in a car driven by someone else (YRBS reported 8% for Ohio in 2013 and 6% for the U.S. in 2015).
- Ninety percent (90%) of Wyandot County youth had a social media or online gaming account.
- Of those who had an account, they reported the following:
  - Their account was currently checked private (49%)
  - They knew all of their “friends” (46%)
  - They knew all of the people they play online (23%)
  - Their parents had their password (19%)
  - Their friends had their password (10%)
  - They were bullied because of their accounts (8%)
  - They had been asked to meet someone they met online (6%)
  - They share personal information (6%)
  - They had participated in sexual activity with someone they met online (3%)
  - Their parents did not know they have an account (3%)
- Over two-fifths (42%) of youth who had a social media or online gaming account believed that sharing information online is dangerous.

## U.S. Teen Drivers

- Motor vehicle crashes are the leading cause of death for U.S. teens.
- In 2015, about 2,333 teens aged 16-19 died from motor vehicle injuries.
  - That means that six teens aged 16-19 died every day from motor vehicle injuries.
- 221,313 teens aged 16-19 were treated in emergency departments for injuries suffered in motor-vehicle crashes in 2014.
- The risk of motor vehicle crashes is higher among 16-19-year-olds than among any other age group. In fact, per mile driven, teen drivers aged 16-19 are nearly three times more likely than drivers aged 20 and older to be in a fatal crash.
- In 2014, the motor vehicle death rate for male drivers and passengers ages 16-19 was two times that of their female counterparts.
- The presence of teen passengers increases the crash risk of unsupervised teen drivers; this risk increases with the number of teen passengers.
- In 2013, young people aged 15-19 represented only 7% of the U.S. population. However, they accounted for 11% (\$10 billion) of the total costs of motor vehicle injuries.

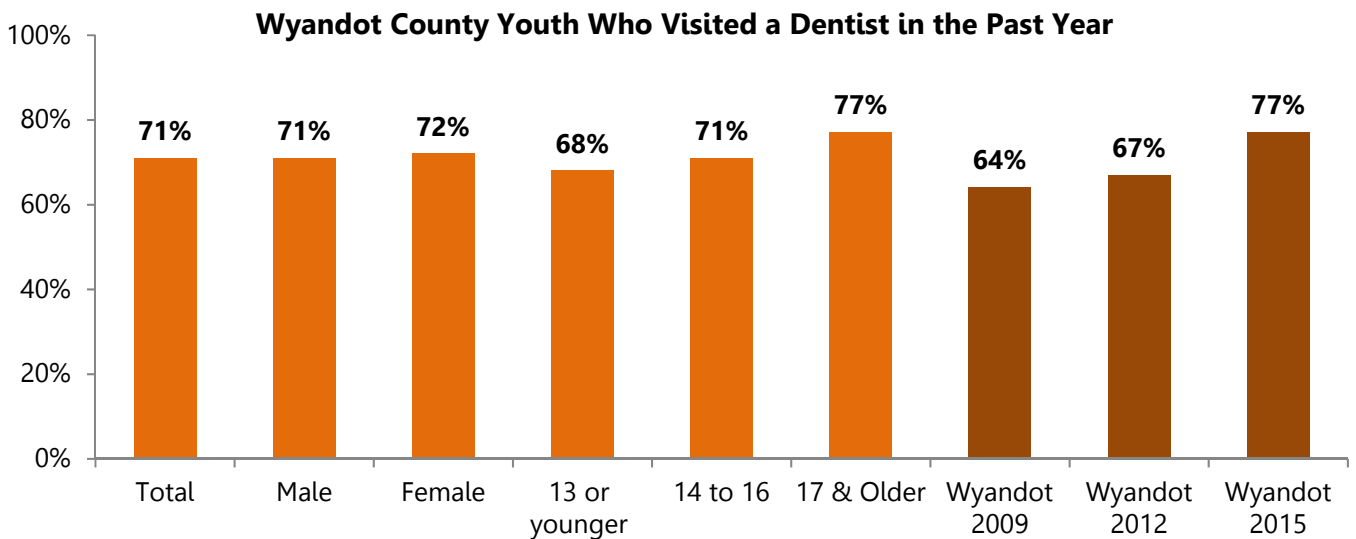
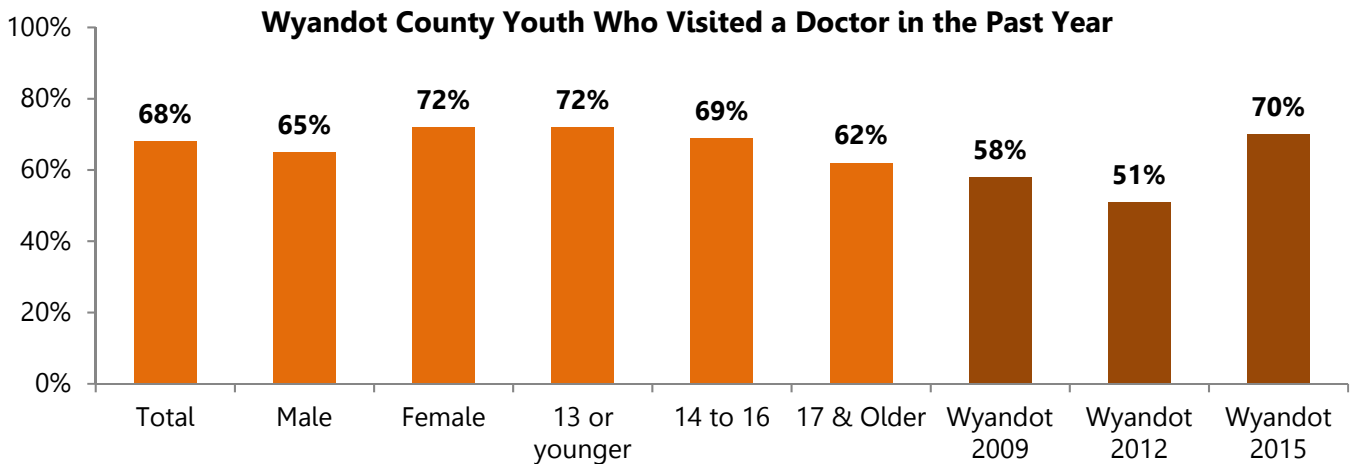
(Source: CDC, *Teen Drivers: Get the Facts*, Updated October 16, 2017)



Youth Comparisons	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Always wore a seatbelt</b> (when riding in a car or other vehicle driven by someone else)	39%	44%	46%	54%	52%	N/A	N/A
<b>Rarely or never wore a seatbelt</b> (when riding in a car or other vehicle driven by someone else)	10%	12%	9%	5%	5%	8%	6%
<b>Visited a dentist within the past year</b> (for a check-up, exam, teeth cleaning, or other dental work)	64%	67%	77%	71%	72%	75%	74%
<b>Visited a doctor for a routine checkup in the past year</b>	58%	51%	70%	68%	65%	N/A	N/A

N/A-Not Available

The following graphs show Wyandot County youth who visited a doctor and who visited a dentist in the past year. Examples of how to interpret the information include: 68% of youth had visited a doctor in the past year, including 65% of males and 72% of females.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

## Neighborhood and Built Environment

- Wyandot county youth reported living with the following people: both parents (51%), mother and step-father (15%), mother only (11%), mother and father separately via joint custody (10%), father and step-mother (10%), grandparents (4%), mother and her partner (4%), father only (3%), father and his partner (2%), another relative (2%), guardians/foster parents (1%) and on their own or with friends (1%).

## Social and Community Context

- Wyandot County youth reported having at least one adult they could talk to and look up to in the following places: home (87%), school (75%), their community (66%), and church (43%).
- Ninety percent (90%) of youth participated in extracurricular activities. They participated in the following: school club or social organization (29%), caring for siblings after school (21%), church or religious organization (20%), part-time job (18%), church youth group (16%), volunteering in the community (15%), babysitting for other kids (13%), caring for parents or grandparents (2%), or some other organized activity (Scouts, 4H, etc.) (19%).
- More than half (56%) of youth reported the following adverse childhood experiences (ACEs): parents became separated or were divorced (36%); parents or adults in home swore at them, insulted them or put them down (25%); family did not look out for each other, feel close to each other, or support each other (17%); parents were not married (14%); lived with someone who was depressed, mentally ill or suicidal (11%); lived with someone who was a problem drinker or alcoholic (11%); lived with someone who served time or was sentenced to serve in prison or jail (11%); parents or adults in home abused them (7%); lived with someone who used illegal drugs or misused prescription drugs (7%); parents or adults in the home abused each other (6%); did not have enough to eat, had to wear dirty clothes, and had no one to protect them (3%); an adult or someone 5 years older than them touched them sexually (2%); an adult or someone 5 years older than them made them touch them sexually (1%); and an adult or someone 5 years older than them forced them to have sex (1%).
- Nearly one-quarter (23%) of youth had experienced three or more ACEs.

*The table below indicates correlations between those who experienced 3 or more ACEs in their lifetime and participating in risky behaviors, as well as other activities and experiences. Examples of how to interpret the information include: 88% of those who experienced 3 or more ACEs participated in extracurricular activities, compared to 93% of those who did not experience any ACEs.*

### Behaviors of Wyandot County Youth

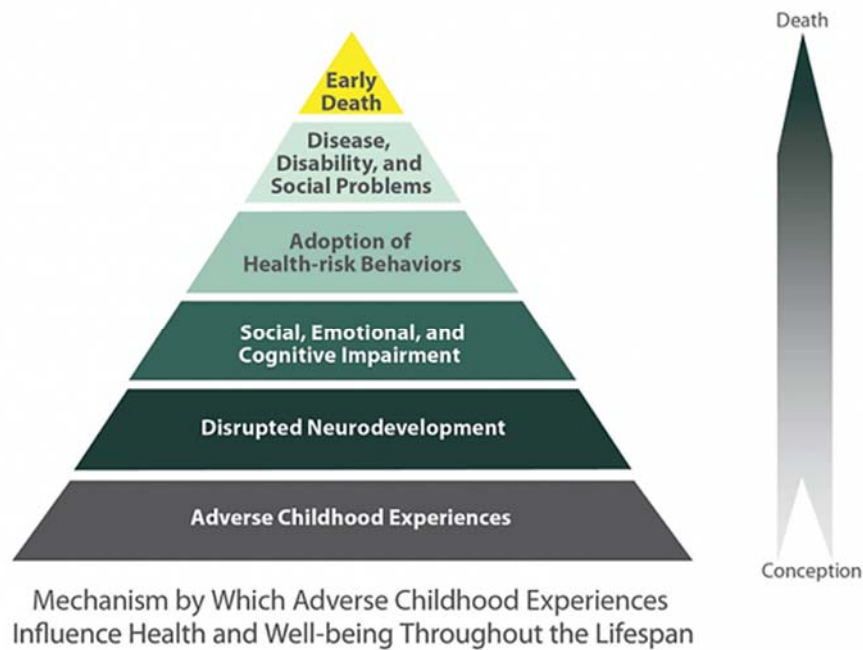
*Experienced 3 or More ACEs vs. Did Not Experience Any ACEs*

Youth Behaviors	Experienced 3 or More ACEs	Did Not Experience Any ACEs
<b>Currently participate in extracurricular activities</b>	88%	93%
<b>Bullied</b> (in the past 12 months)	71%	27%
<b>Had sexual intercourse</b> (in their lifetime)	35%	26%
<b>Had at least one drink of alcohol</b> (in the past 30 days)	23%	5%
<b>Smoked cigarettes</b> (in the past 30 days)	13%	4%
<b>Used marijuana</b> (in the past 30 days)	7%	1%

*"ACEs" indicate youth who self-reported having experienced three or more adverse childhood experiences in their lifetime.*

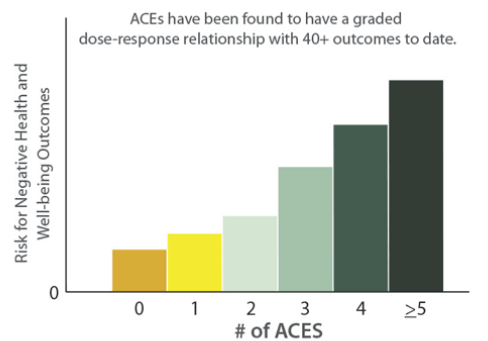
## Adverse Childhood Experiences (ACEs)

- Childhood abuse, neglect, and exposure to other traumatic stressors which we term adverse childhood experiences (ACEs) are common. The most common are separated or divorced parents, verbal, physical or sexual abuse, witness of domestic violence, and having a family member with depression or mental illness.
- The short and long-term outcomes of these childhood exposures include a multitude of health and social problems such as:
  - Depression
  - Fetal death
  - Illicit drug use
  - Liver disease
  - Alcoholism and alcohol abuse
  - COPD
  - Unintended pregnancies
  - Suicide attempts
  - Risk for intimate partner violence
  - Multiple sexual partners
  - STDs
  - Early initiation of smoking
- Given the high prevalence of ACEs, additional efforts are needed at the state and local level to reduce and prevent childhood maltreatment and associated family dysfunction in the US.



## ACEs can have lasting effects on....

-  Health (obesity, diabetes, depression, suicide attempts, STDs, heart disease, cancer, stroke, COPD, broken bones)
-  Behaviors (smoking, alcoholism, drug use)
-  Life Potential (graduation rates, academic achievement, lost time from work)



(Source: CDC, Adverse Childhood Experiences, June 2016)

# Youth Health: Violence

## Key Findings

*Eleven percent (11%) of Wyandot County youth carried a weapon (such as a gun, knife or club) in the past month. Nearly one-fifth (19%) of youth had been involved in a physical fight, increasing to 23% of males. Forty-four percent (44%) of youth had been bullied in the past year.*

## Violence-Related Behaviors

- Eleven percent (11%) of youth carried a weapon (such as a gun, knife or club) in the past 30 days (YRBS reported 14% for Ohio in 2013 and 16% for the U.S. in 2015), increasing to 16% of males
- Seven percent (7%) of youth did not go to school on one or more days because they did not feel safe at school or on their way to or from school (YRBS reported 5% for Ohio in 2013 and 6% for the U.S. in 2015).
- One-in-nine (11%) youth were threatened or injured with a weapon on school property in the past year (2015 YRBS reported 6% for the U.S.).

## Physical and Sexual Violence

- In the past year, 19% of youth had been involved in a physical fight (YRBS reported 20% for Ohio in 2013 and 23% for the U.S. in 2015), increasing to 23% of males
- Of those who had been in a physical fight, 55% had been in a fight on more than one occasion.
- Wyandot County youth reported the following ever hit, slapped, or physically hurt them on purpose in the past 12 months: parent or caregiver (3%), boyfriend or girlfriend (2%) (2015 YRBS reported 10% for the U.S.), other adult (1%), and other teen or student (15%).
- Twenty-eight percent (28%) of youth purposefully hurt themselves in their life by cutting, scratching, burning, hitting or biting, increasing to 30% of females.
- Six percent (6%) of youth had been forced to participate in a sexual activity when they did not want to, increasing to 11% of females.

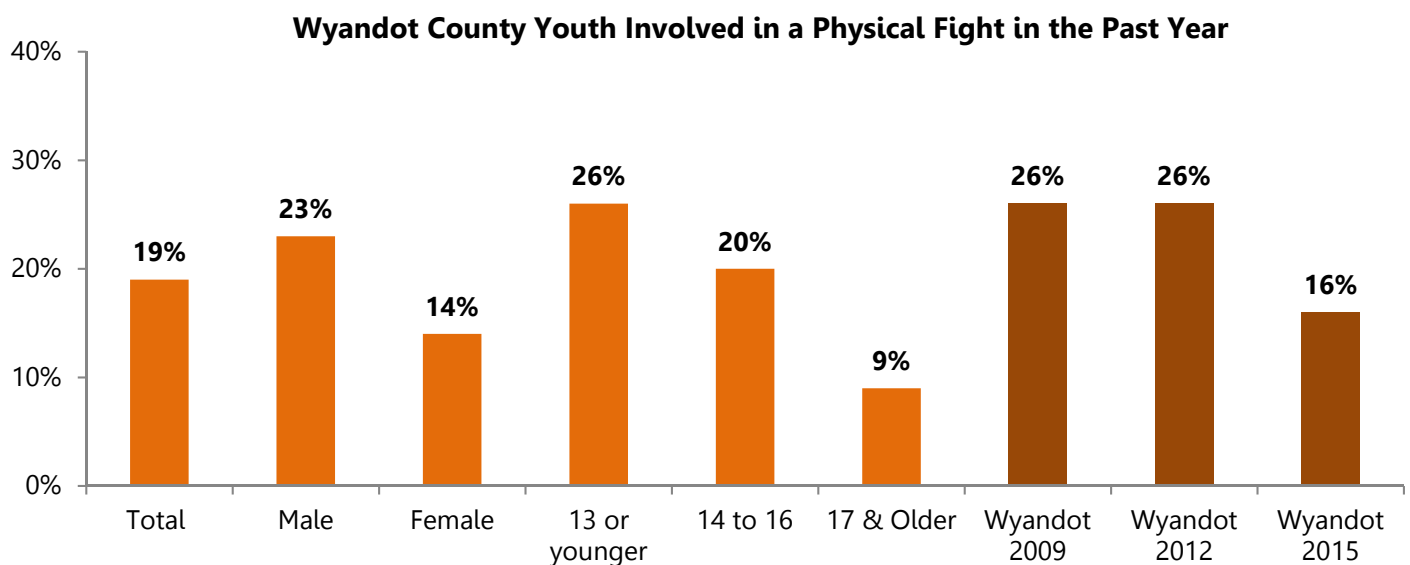
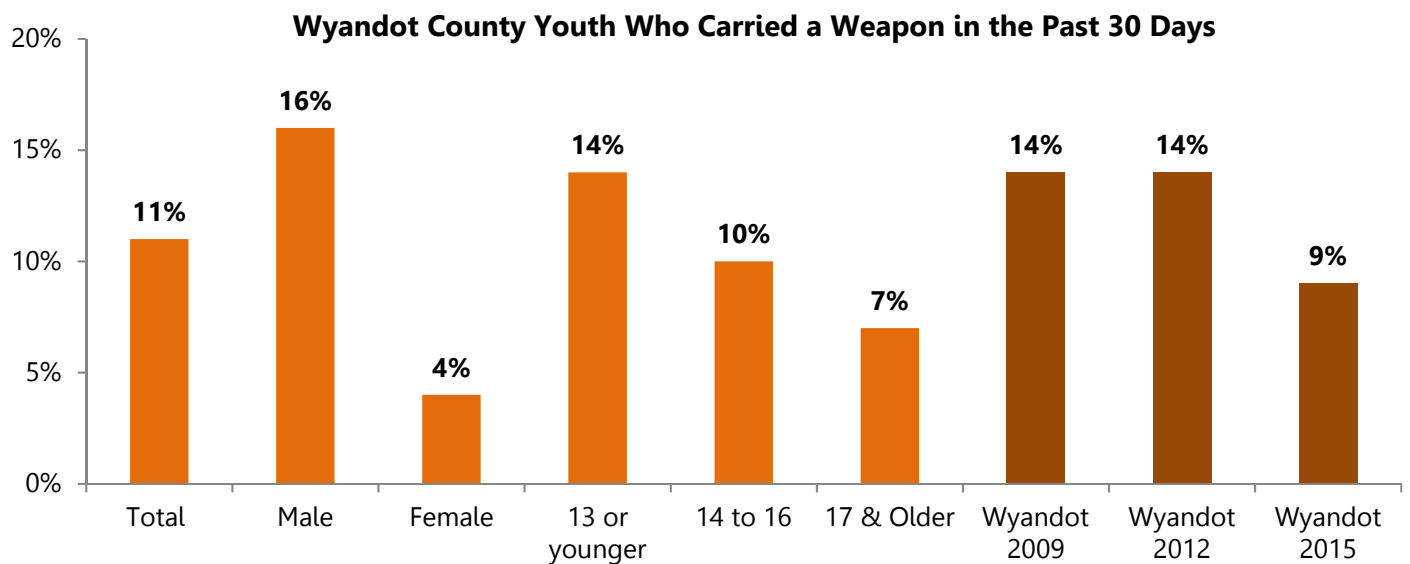
## Bullying

- Forty-four percent (44%) of youth had been bullied in the past year. The following types of bullying were reported:
  - 30% of youth were verbally bullied (teased, taunted or called harmful names)
  - 23% of youth were indirectly bullied (spread mean rumors about them or kept them out of a “group”)
  - 11% of youth were cyber bullied (teased, taunted or threatened by e-mail or cell phone) (YRBS reported 15% for Ohio in 2013 and 16% for the U.S. in 2015)
  - 9% of youth were physically bullied (were hit, kicked, punched or people took their belongings)
  - 1% of youth were sexually bullied (used nude or semi-nude pictures to pressure someone to have sex that did not want to, blackmail, intimidate, or exploit another person)
- In the past year, 30% of youth had been bullied on school property (YRBS reported 21% for Ohio in 2013 and 20% for the U.S. in 2015).

## Types of Bullying Wyandot County Youth Experienced in Past Year

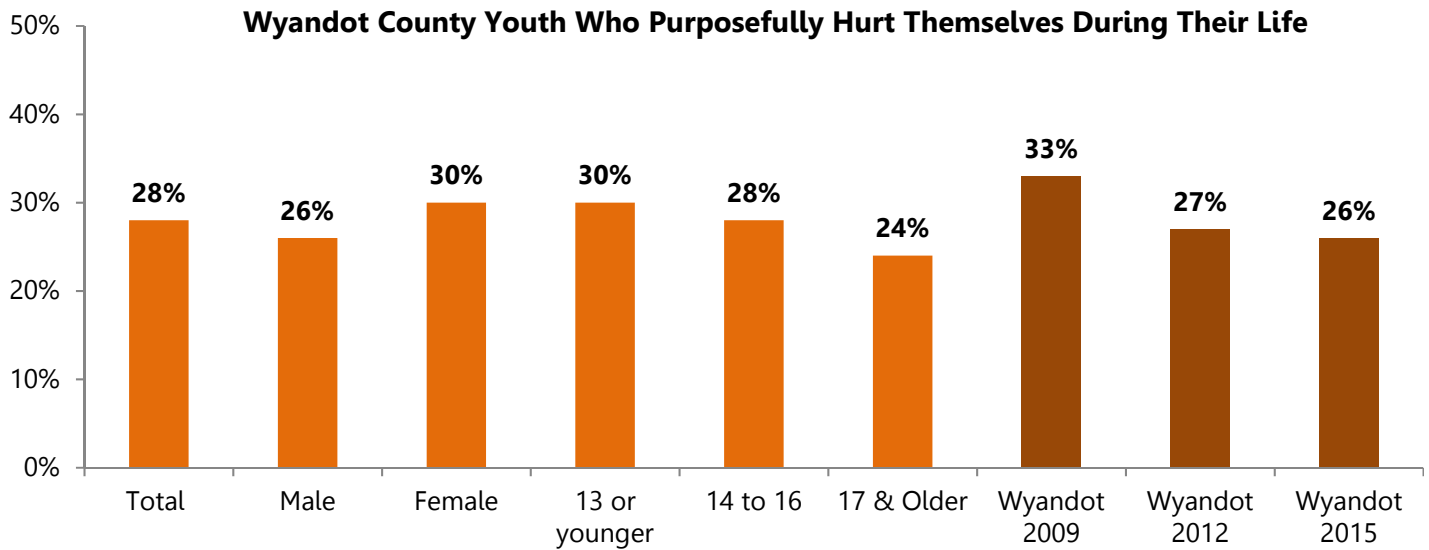
Youth Behaviors	Total	Male	Female	13 or younger	14-16 Years old	17 and older
Verbally Bullied	30%	26%	36%	33%	31%	27%
Indirectly Bullied	23%	17%	31%	23%	24%	24%
Cyber Bullied	11%	7%	16%	15%	9%	9%
Physically Bullied	9%	8%	9%	12%	9%	4%
Sexually Bullied	1%	<1%	1%	1%	1%	1%

The following graphs shows Wyandot County youth who carried a weapon in the past 30 days and youth who were involved in a physical fight in the past year. Examples of how to interpret the information include: 11% of youth had carried a weapon in the past 30 days, including 16% of males and 4% of females.



Note for graphs: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The following graph shows Wyandot County youth who purposefully hurt themselves during their life. Examples of how to interpret the information include: 28% of youth had purposefully hurt themselves in their life, including 26% of males and 30% of females.



Note: Caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey.

The table below indicates correlations between those who were bullied in the past 12 months and participating in risky behaviors, as well as other activities and experiences. Examples of how to interpret the information include: 90% of those who were bullied participated in extracurricular activities, compared to 91% of those who were not bullied.

### Behaviors of Wyandot County Youth Bullied vs. Non-Bullied

Youth Behavior	Bullied	Non-Bullied
Currently participate in extracurricular activities	90%	91%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	38%	12%
Overweight or obese	33%	29%
Seriously considered attempting suicide (in the past 12 months)	25%	6%
Had at least one drink of alcohol (in the past 30 days)	18%	9%
Carried a weapon (in the past 30 days)	11%	10%
Smoked cigarettes (in the past 30 days)	7%	6%
Used marijuana (in the past 30 days)	4%	2%

## Healthy People 2020 Injury and Violence Prevention (IVP)

Objective	Wyandot County 2018	Ohio 2013	U.S. 2015	Healthy People 2020 Target
<b>IVP-35 Reduce bullying among adolescents</b>	30% (6-12 Grade)  26% (9-12 Grade)	21% (9-12 Grade)	20% (9-12 Grade)	18%

*Note: The Healthy People 2020 target is for youth in grades 9-12 who reported they were bullied on school property in the past year.*

*(Sources: Healthy People 2020 Objectives, 2013 Ohio YRBS, 2015 U.S. YRBS, 2018 Wyandot County Health Assessment)*

Youth Comparisons	Wyandot County 2009 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2012 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2015 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (6 <sup>th</sup> -12 <sup>th</sup> )	Wyandot County 2018 (9 <sup>th</sup> -12 <sup>th</sup> )	Ohio 2013 (9 <sup>th</sup> -12 <sup>th</sup> )	U.S. 2015 (9 <sup>th</sup> -12 <sup>th</sup> )
<b>Carried a weapon</b> (in the past 30 days)	14%	14%	9%	11%	9%	14%	16%
<b>Were in a physical fight</b> (in the past 12 months)	26%	26%	16%	19%	16%	20%	23%
<b>Did not go to school because they felt unsafe</b> (at school or on their way to or from school in the past 30 days)	4%	7%	3%	7%	7%	5%	6%
<b>Threatened or injured with a weapon on school property</b> (in the past 12 months)	5%	7%	5%	11%	12%	N/A	6%
<b>Experienced physical dating violence</b> (including being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with in the past 12 months)	7%	7%	4%	2%	3%	N/A	10%
<b>Hit, slapped, or physically hurt on purpose by an adult or caregiver in past year</b>	10%	6%	6%	3%	2%	N/A	N/A
<b>Electronically bullied</b> (in the past year)	9%	11%	10%	11%	9%	15%	16%
<b>Bullied</b> (in the past year)	47%	45%	45%	44%	40%	N/A	N/A
<b>Were bullied on school property</b> (during the past 12 months)	N/A	N/A	28%	30%	26%	21%	20%
<b>Purposefully hurt themselves in their life</b>	33%	27%	26%	28%	26%	N/A	N/A

*N/A – Not Available*

# Youth Health: Perceptions

## Key Findings

*In 2018, 52% of Wyandot County youth thought there was a great risk in harming themselves if they smoked one or more packs of cigarettes per day. Twenty-one percent (21%) of youth thought that there was no risk in harming themselves physically or in other ways if they smoke marijuana once or twice a week. Sixty-seven percent (67%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day.*

## Perceived Risk of Drug Use

- Over half (52%) of Wyandot County youth thought there was a great risk in harming themselves physically or in other ways if they smoked one or more packs of cigarettes per day. Nine percent (9%) of youth thought that there was no risk for smoking one or more packs of cigarettes per day.
- Over one-quarter (27%) of youth thought there was a great risk in harming themselves physically or in other ways if they drank five or more alcoholic beverages once or twice a week. Six percent (6%) of youth thought that there was no risk in drinking five or more alcoholic beverages once or twice a week.
- Almost one-third (29%) of youth thought there was great risk in harming themselves physically or in other ways if they smoked marijuana once or twice a week. About one-fifth (21%) of youth thought that there was no risk if they smoked marijuana once or twice a week.
- Fifty-six percent (56%) of youth thought there was a great risk in harming themselves physically or in other ways if they used prescription drugs that were not prescribed for them. Four percent (4%) of youth thought that there was no risk in misusing prescription drugs.

## Degree of Disapproval of Use by Parents

- About four-fifths (79%) of Wyandot County youth reported their parents would feel it was very wrong for them to smoke tobacco.
- Sixty-seven percent (67%) of youth reported their parents would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day, decreasing to 50% of those ages 17 and older.
- Eighty-three percent (83%) of youth reported their parents would feel it was very wrong for them to smoke marijuana.
- Eighty-eight percent (88%) of youth reported their parents would feel it was very wrong for them to misuse prescription medications.

## Degree of Disapproval of Use by Peers

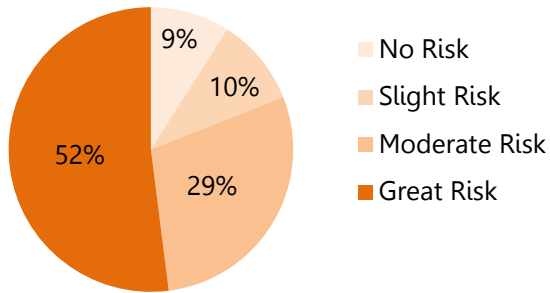
- About half (51%) of Wyandot County youth reported their peers would feel it was very wrong for them to smoke cigarettes, increasing to 73% of youth under the age of 13.
- Almost half (48%) of youth reported their peers would feel it was very wrong for them to have one or two drinks of an alcoholic beverage nearly every day, decreasing to 18% of those ages 17 and older.
- Nearly three-fifths (56%) of youth reported their peers would feel it was very wrong for them to use marijuana.
- Seventy-one percent (71%) of youth reported their peers would feel it was very wrong for them to misuse prescription medications.



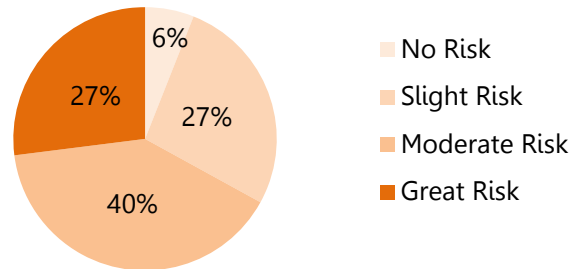
## Perceived Risk of Drug Use

*How much do you think people risk harming themselves if they:*

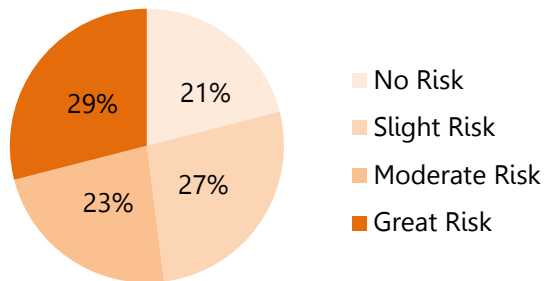
**Smoke one or more packs of cigarettes per day**



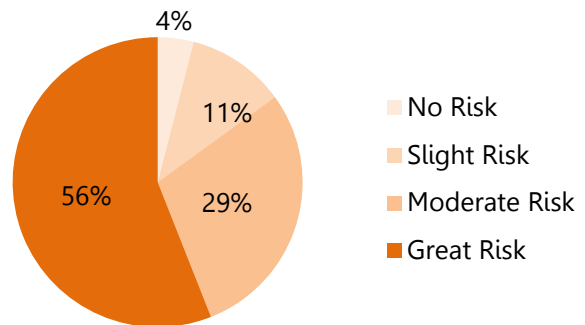
**Have five or more drinks of an alcoholic beverage once or twice a week**



**Smoke marijuana once or twice a week**



**Misuse prescription drugs**

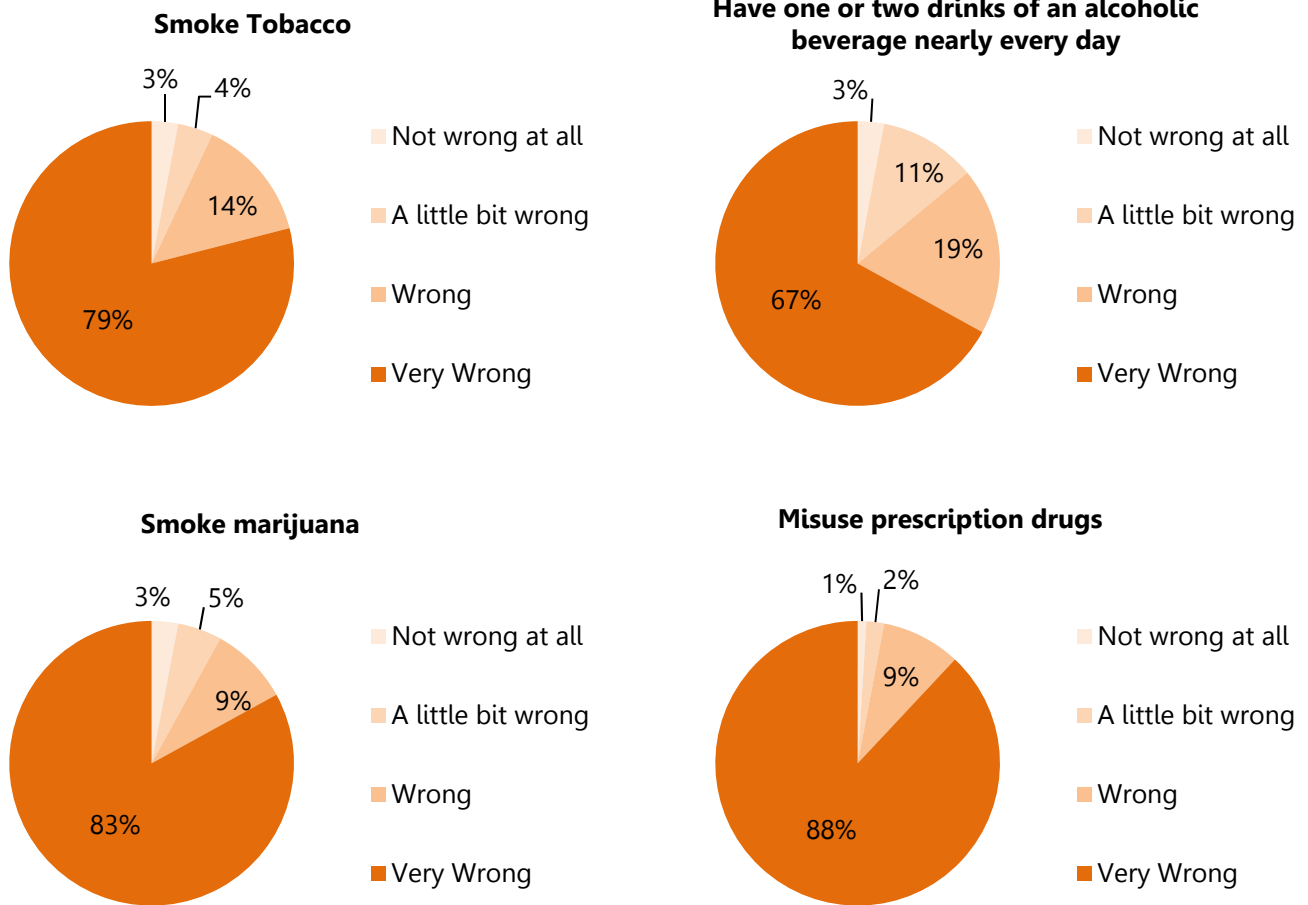


## Perceived Great Risk of Substance Use

How much do you think people risk harming themselves if they:	Total	Female	Male	13 or younger	14-16 years old	17 or older
Smoke one or more packs of cigarettes per day	52%	55%	49%	54%	48%	56%
Have five or more drinks of an alcoholic beverage once or twice a week	27%	30%	24%	30%	27%	22%
Smoke marijuana once or twice a week	29%	33%	26%	48%	28%	8%
Misusing prescription drugs	56%	61%	52%	56%	57%	53%

## Degree of Disapproval by Parents

How wrong do your parents feel it would be for you to do the following:



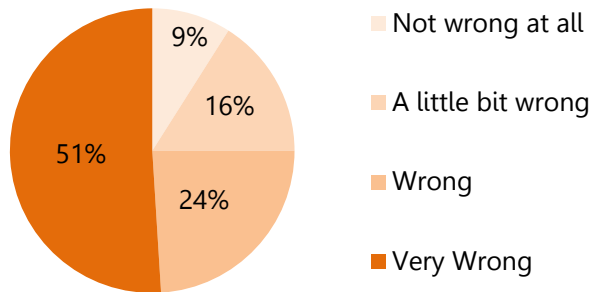
## Perceived Degree of Great Disapproval by Parents

Parents feel it would be very wrong for you to do the following:	Total	Female	Male	13 or younger	14-16 years old	17 or older
Smoke tobacco	79%	84%	75%	92%	81%	58%
Having one or two drinks of an alcoholic beverage nearly every day	67%	75%	62%	78%	69%	50%
Smoke marijuana	83%	87%	80%	92%	86%	65%
Misusing prescription drugs	88%	88%	87%	87%	89%	85%

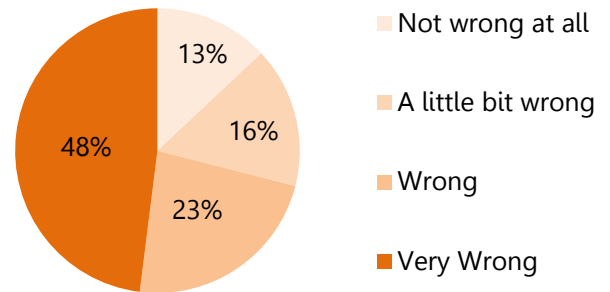
## Degree of Disapproval by Peers

How wrong do your friends feel it would be for you to do the following:

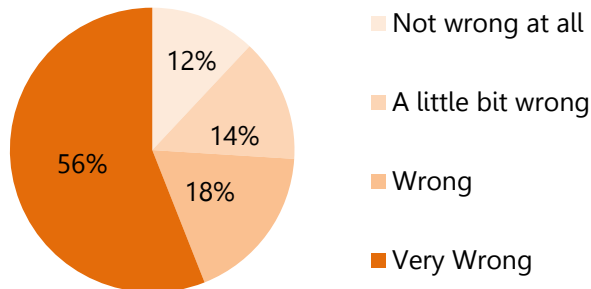
**Smoke Tobacco**



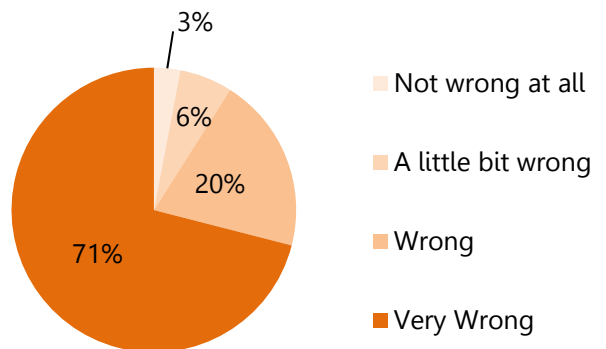
**Have one or two drinks of an alcoholic beverage nearly every day**



**Smoke marijuana**



**Misuse prescription drugs**



## Perceived Degree of Great Disapproval by Peers

Friends feel it would be very wrong for you to do the following:	Total	Female	Male	13 or younger	14-16 years old	17 or older
<b>Smoke tobacco</b>	51%	62%	42%	73%	48%	30%
<b>Having one or two drinks of an alcoholic beverage nearly every day</b>	48%	55%	42%	69%	49%	18%
<b>Smoke marijuana</b>	56%	64%	49%	82%	54%	26%
<b>Misusing prescription drugs</b>	71%	77%	66%	79%	69%	65%

## Appendix I: Health Assessment Information Sources

Source	Data Used	Website
2016 Ohio Drug Overdoses Data: General Findings, Ohio Department of Health; Ohio Department of Health, Bureau of Vital Statistics; analysis conducted by ODH Violence and Injury Prevention Program; U.S. Census Bureau (Vintage 2016 population estimates)	<ul style="list-style-type: none"> <li>Average Age-Adjusted Unintentional Drug Overdose Death Rate Per 100,000 Population, by County, 2011-2016</li> </ul>	<a href="http://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/health/injury-prevention/2016-Ohio-Drug-Overdose-Report-FINAL.pdf">www.odh.ohio.gov/-/media/ODH/ASSETS/Files/health/injury-prevention/2016-Ohio-Drug-Overdose-Report-FINAL.pdf</a>
American Association of Suicidology	<ul style="list-style-type: none"> <li>National Suicide Statistics</li> </ul>	<a href="http://www.suicidology.org/portals/14/docs/resources/factsheets/2015/2015datapgsv1.pdf?ver=2017-01-02-220151-870">www.suicidology.org/portals/14/docs/resources/factsheets/2015/2015datapgsv1.pdf?ver=2017-01-02-220151-870</a>
American Cancer Society, Cancer Facts and Figures 2018	<ul style="list-style-type: none"> <li>2018 Cancer Facts, Figures, and Estimates</li> </ul>	<a href="http://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2018/cancer-facts-and-figures-2018.pdf">www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2018/cancer-facts-and-figures-2018.pdf</a>
American Cancer Society (ACS), 2017	<ul style="list-style-type: none"> <li>ACS Guidelines for Nutrition and Physical Activity</li> </ul>	<a href="http://www.cancer.org/healthy/eat-healthy-get-active/acs-guidelines-nutrition-physical-activity-cancer-prevention/guidelines.html">www.cancer.org/healthy/eat-healthy-get-active/acs-guidelines-nutrition-physical-activity-cancer-prevention/guidelines.html</a>
American College of Allergy, Asthma & Immunology, 2016	<ul style="list-style-type: none"> <li>Asthma Facts</li> </ul>	<a href="http://acaai.org/news/facts-statistics/asthma">http://acaai.org/news/facts-statistics/asthma</a>
CDC, About Diabetes	<ul style="list-style-type: none"> <li>Types of Diabetes</li> <li>Diabetes by the Numbers</li> </ul>	<a href="http://www.cdc.gov/diabetes/basics/diabetes.html">www.cdc.gov/diabetes/basics/diabetes.html</a>
CDC, Arthritis	<ul style="list-style-type: none"> <li>Arthritis Key Public Health Messages</li> </ul>	<a href="http://www.cdc.gov/arthritis/about/key-messages.htm">www.cdc.gov/arthritis/about/key-messages.htm</a>
American Heart Association, 2015, Your Non-Smoking Life	<ul style="list-style-type: none"> <li>Smoke-Free Living: Benefits and Milestones</li> </ul>	<a href="http://www.heart.org/HEARTORG/HealthyLiving/QuitSmoking/YourNonSmokingLife/Your-Non-Smoking-Life_UCM_307931_Article.jsp#.WlUBx66nGM8">www.heart.org/HEARTORG/HealthyLiving/QuitSmoking/YourNonSmokingLife/Your-Non-Smoking-Life_UCM_307931_Article.jsp#.WlUBx66nGM8</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 – 2016 Adult Ohio and U.S. Correlating Statistics</li> </ul>	<a href="http://www.cdc.gov">www.cdc.gov</a>
Brady Campaign to Prevent Gun Violence	<ul style="list-style-type: none"> <li>Victims of Gun Violence</li> </ul>	<a href="http://www.bradiycampaign.org/sites/default/files/Brady-Campaign-5Year-Gun-Deaths-Injuries-Stats_02-22-2018.pdf">www.bradiycampaign.org/sites/default/files/Brady-Campaign-5Year-Gun-Deaths-Injuries-Stats_02-22-2018.pdf</a>
CDC, Alcohol and Public Health	<ul style="list-style-type: none"> <li>Underage Drinking</li> </ul>	<a href="http://www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm">www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm</a>

Source	Data Used	Website
CDC, Alcohol and Public Health, Excessive Drinking	<ul style="list-style-type: none"> <li>Economic Costs of Excessive Alcohol Use</li> </ul>	<a href="http://www.cdc.gov/alcohol/data-stats.htm">www.cdc.gov/alcohol/data-stats.htm</a>
CDC, Alcohol and Public Health, Fact Sheets – Excessive Alcohol Use and Risks to Women’s Health	<ul style="list-style-type: none"> <li>Excessive Alcohol Use and Risks to Women’s Health</li> </ul>	<a href="http://www.cdc.gov/alcohol/fact-sheets/womens-health.htm">www.cdc.gov/alcohol/fact-sheets/womens-health.htm</a>
CDC, Breast Cancer	<ul style="list-style-type: none"> <li>What Can I do to Reduce My Risk of Breast Cancer?</li> </ul>	<a href="https://www.cdc.gov/cancer/breast/basic_info/prevention.htm">https://www.cdc.gov/cancer/breast/basic_info/prevention.htm</a>
CDC, Cancer Prevention and Control	<ul style="list-style-type: none"> <li>Prostate Cancer Awareness</li> </ul>	<a href="http://www.cdc.gov/cancer/dcpc/resources/features/prostatecancer/index.htm">www.cdc.gov/cancer/dcpc/resources/features/prostatecancer/index.htm</a>
CDC, Healthy Weight	<ul style="list-style-type: none"> <li>Body Mass Index (BMI)</li> </ul>	<a href="http://www.cdc.gov/healthyweight/assessing/bmi/index.html">www.cdc.gov/healthyweight/assessing/bmi/index.html</a>
CDC, National Center for Health Statistics	<ul style="list-style-type: none"> <li>Men’s Health</li> </ul>	<a href="http://www.cdc.gov/nchs/fastats/mens-health.htm">www.cdc.gov/nchs/fastats/mens-health.htm</a>
	<ul style="list-style-type: none"> <li>Contraceptive Use</li> </ul>	<a href="http://www.cdc.gov/nchs/fastats/contraceptive.htm">www.cdc.gov/nchs/fastats/contraceptive.htm</a>
CDC, Oral Health, 2017	<ul style="list-style-type: none"> <li>Facts About Adult Oral Health</li> </ul>	<a href="http://www.cdc.gov/oralhealth/basics/adult-oral-health/index.html">www.cdc.gov/oralhealth/basics/adult-oral-health/index.html</a>
CDC, Overweight & Obesity	<ul style="list-style-type: none"> <li>Adult Obesity Facts</li> </ul>	<a href="http://www.cdc.gov/obesity/data/adult.html">www.cdc.gov/obesity/data/adult.html</a>
	<ul style="list-style-type: none"> <li>Childhood Obesity Facts</li> </ul>	<a href="http://www.cdc.gov/obesity/data/childhood.html">www.cdc.gov/obesity/data/childhood.html</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">www.cdc.gov/physicalactivity/everyone/guidelines/adults.html</a>
CDC, Vaccines and Preventable Diseases, 2017	<ul style="list-style-type: none"> <li>Pneumococcal Vaccination: What Everyone Should Know</li> </ul>	<a href="http://www.cdc.gov/vaccines/vpd/pneumo/public/index.html">www.cdc.gov/vaccines/vpd/pneumo/public/index.html</a>
		<a href="http://www.cdc.gov/pneumococcal/about/symptoms-complications.html">www.cdc.gov/pneumococcal/about/symptoms-complications.html</a>
CDC, Smoking and Tobacco Use, 2017	<ul style="list-style-type: none"> <li>Smoking and Other Health Risks</li> </ul>	<a href="http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm">www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm</a>
CDC, Violence Prevention, Sexual Violence	<ul style="list-style-type: none"> <li>Understanding Sexual Violence</li> </ul>	<a href="http://www.cdc.gov/violenceprevention/pdf/SV-Factsheet.pdf">www.cdc.gov/violenceprevention/pdf/SV-Factsheet.pdf</a>
CDC, Violence Prevention	<ul style="list-style-type: none"> <li>Adverse Childhood Experiences</li> </ul>	<a href="http://www.cdc.gov/violenceprevention/acestudy/index.html">www.cdc.gov/violenceprevention/acestudy/index.html</a>
CDC Wonder, About Underlying Cause of Death, 2008-2016	<ul style="list-style-type: none"> <li>U.S. comparison statistics</li> </ul>	<a href="http://wonder.cdc.gov/ucd-icd10.html">http://wonder.cdc.gov/ucd-icd10.html</a>
Community Commons	<ul style="list-style-type: none"> <li>Food Desert Census Tracts, Major Supermarkets and Farmer’s Markets</li> <li>Fast Food Restaurants</li> <li>Cigarette Expenditures</li> <li>Alcohol Beverage Expenditures</li> <li>Beer, Wine and Liquor Stores</li> <li>Bars and Drinking Establishments</li> </ul>	<a href="http://www.communitycommons.org/">www.communitycommons.org/</a>
County Health Rankings	<ul style="list-style-type: none"> <li>Food Environment Index</li> </ul>	<a href="http://www.countyhealthrankings.org/">www.countyhealthrankings.org/</a>
Healthy People 2020: U.S. Department of Health & Human Services	<ul style="list-style-type: none"> <li>All Healthy People 2020 Target Data Points</li> <li>Predictors of Access to Health Care</li> </ul>	<a href="http://www.healthypeople.gov/2020/topicsobjectives2020">www.healthypeople.gov/2020/topicsobjectives2020</a>
	<ul style="list-style-type: none"> <li>Social Determinants of Health</li> </ul>	<a href="http://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health">www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health</a>

Source	Data Used	Website
The Henry Kaiser Family Foundation	<ul style="list-style-type: none"> <li>Key Facts about the Uninsured Population</li> </ul>	<a href="http://www.kff.org/report-section/the-uninsured-a-primer-2013-4-how-does-lack-of-insurance-affect-access-to-health-care/">www.kff.org/report-section/the-uninsured-a-primer-2013-4-how-does-lack-of-insurance-affect-access-to-health-care/</a>
National Institutes of Health, National Institute on Drug Abuse for Teens, 2018	<ul style="list-style-type: none"> <li>Abuse of Prescription (Rx) Drugs</li> </ul>	<a href="https://teens.drugabuse.gov/drug-facts/prescription-drugs">https://teens.drugabuse.gov/drug-facts/prescription-drugs</a>
Ohio Medicaid Assessment Survey (OMAS), 2015	<ul style="list-style-type: none"> <li>Unmet needs in Dental Care</li> <li>Unmet needs in Prescription Medication</li> </ul>	<a href="http://grcapps.osu.edu/dashboards/OMAS/adult/">http://grcapps.osu.edu/dashboards/OMAS/adult/</a>
Ohio Department of Health (ODH), Ohio Public Health Data Warehouse, 2008-2016	<ul style="list-style-type: none"> <li>Wyandot County and Ohio Leading Causes of Death</li> <li>Wyandot County and Ohio Age-Adjusted Mortality Rates</li> <li>Wyandot County and Ohio Age-Adjusted Cancer Mortality Rates</li> <li>Unintentional Drug Overdose Death by Specific Drug</li> <li>Wyandot County Total Live Births</li> <li>Wyandot County Number of Suicide Deaths</li> </ul>	<a href="http://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/Mortality">http://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/Mortality</a>
Ohio Department of Public Safety, 2017	<ul style="list-style-type: none"> <li>Cash Statistics: Local, County and State Crash Reports</li> </ul>	<a href="https://services.dps.ohio.gov/Crashstatistics/CrashReports.aspx">https://services.dps.ohio.gov/Crashstatistics/CrashReports.aspx</a>
Ohio Automated Rx Reporting System (OARRS), 2012-2016	<ul style="list-style-type: none"> <li>Wyandot County and Ohio Number of Opiate and Pain Reliever Doses Per Patient</li> <li>Wyandot County and Ohio Number of Opiate and Pain Reliever Doses Per Capita</li> <li>Number of Opioid Doses Per Capita and Patient – Quarterly</li> <li>Ohio Automated Rx Reporting System (OARRS)</li> </ul>	<a href="http://www.ohiopmp.gov/Default.aspx">www.ohiopmp.gov/Default.aspx</a>
Ohio Mental Health and Addiction Services (OMAS), 2017	<ul style="list-style-type: none"> <li>Ohio's New Limits on Prescription Opiates</li> </ul>	<a href="http://mha.ohio.gov/Portals/0/assets/OhioMHAS%20News%20Now/March%2031%202017%20News%20Now.pdf">http://mha.ohio.gov/Portals/0/assets/OhioMHAS%20News%20Now/March%2031%202017%20News%20Now.pdf</a>
Ohio Department of Health (ODH), STD Surveillance, 2012-2016	<ul style="list-style-type: none"> <li>Wyandot County and Ohio Chlamydia and Gonorrhea Annualized Disease Rates</li> <li>Wyandot County Chlamydia and Gonorrhea Cases</li> </ul>	<a href="http://www.odh.ohio.gov/odhprograms/stdsurv/stdsur1.aspx">www.odh.ohio.gov/odhprograms/stdsurv/stdsur1.aspx</a>

Source	Data Used	Website
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	<ul style="list-style-type: none"> <li>• American Community Survey 5-year estimate, 2012-2016</li> <li>• Ohio and Wyandot County 2016 Census Demographic Information</li> <li>• Ohio and U.S. Health Insurance Sources</li> <li>• Small Area Income and Poverty Estimates</li> <li>• Federal Poverty Thresholds</li> </ul>	www.census.gov
U.S. Department of Health and Human Services	<ul style="list-style-type: none"> <li>• E-cigarette Use Among Youth and Young Adults: A Report of the Surgeon General, 2016</li> </ul>	<a href="https://e-cigarettes.surgeongeneral.gov/documents/2016_SGR_Exec_Summ_508.pdf">https://e-cigarettes.surgeongeneral.gov/documents/2016_SGR_Exec_Summ_508.pdf</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	<ul style="list-style-type: none"> <li>• 2009 - 2016 youth Ohio and U.S. correlating statistics</li> </ul>	<a href="https://nccd.cdc.gov/youthonline/app/">https://nccd.cdc.gov/youthonline/app/</a>

## Appendix II: Acronyms and Terms

<b>AHS</b>	<b>Access to Health Services</b> , Topic of Healthy People 2020 objectives
<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>Adult Binge Drinking</b>	Consumption of five alcoholic beverages or more (for males) or four or more alcoholic beverages (for females) on one occasion.
<b>AOCBC</b>	<b>Arthritis, Osteoporosis, and Chronic Back Conditions</b>
<b>BMI</b>	<b>Body Mass Index</b> is defined as the contrasting measurement/relationship of weight to height.
<b>BRFSS</b>	<b>Behavior Risk Factor Surveillance System</b> , an adult survey conducted by the CDC.
<b>CDC</b>	<b>Centers for Disease Control and Prevention</b> .
<b>Current Smoker</b>	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
<b>CY</b>	<b>Calendar Year</b>
<b>FY</b>	<b>Fiscal Year</b>
<b>HCNO</b>	<b>Hospital Council of Northwest Ohio</b>
<b>HDS</b>	<b>Heart Disease and Stroke</b> , Topic of Healthy People 2020 objectives
<b>HP 2020</b>	<b>Healthy People 2020</b> , 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>IID</b>	<b>Immunizations and Infectious Diseases</b> , Topic of Healthy People 2020 objectives
<b>N/A</b>	Data is not available.
<b>ODH</b>	<b>Ohio Department of Health</b>
<b>OSHP</b>	<b>Ohio State Highway Patrol</b>
<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 YRBS 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 <b>P</b> otential <b>L</b> ife <b>L</b> ost before age 65. Indicator of premature death.
<b>Youth BMI Classifications</b>	<p><b>Underweight</b> is defined as BMI-for-age <math>\leq</math> 5<sup>th</sup> percentile</p> <p><b>Overweight</b> is defined as BMI-for-age 85<sup>th</sup> percentile to &lt; 95<sup>th</sup> percentile.</p> <p><b>Obese</b> is defined as <math>\geq</math> 95<sup>th</sup> percentile.</p>
<b>YRBS</b>	Youth <b>R</b> isk <b>B</b> ehavior <b>S</b> urvey, a youth survey conducted by the CDC

# Appendix III: School Participation

*The following schools were randomly chosen and agreed to participate in the 2018 Wyandot County Health Assessment:*

**Carey Exempted Village Schools**

Carey Junior High School

**Mohawk Local Schools**

Mohawk Elementary School

Mohawk High School

**Upper Sandusky Exempted Village Schools**

Upper Sandusky Middle School

Upper Sandusky High School

# Appendix IV: Methods for Weighting the 2018 Wyandot County Health 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 2018 Wyandot County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Wyandot County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), Age (8 different age categories), and income (9 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Wyandot 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 2018 Wyandot County Survey and the 2016 Census Estimates from the American Community Survey.

<u>Sex</u>	<u>2018 Wyandot Survey</u>		<u>2016 Census</u>		<u>Weight</u>
	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	235	55.03513	11,090	49.59971	0.901237
Female	192	44.96487	11,269	50.40029	1.120881

In this example, it shows that there was a larger portion of males in the sample compared to the actual portion in Wyandot County. The weighting for males was calculated by taking the percent of males in Wyandot County (based on Census information) (49.59971%) and dividing that by the percent found in the 2018 Wyandot County sample (55.03513%) [ $49.59971 / 55.03513 =$  weighting of 0.901237 for males]. The same was done for females [ $50.40029 / 44.96487 =$  weighting of 1.120881 for females]. Thus, males' responses are weighted less by a factor of 0.901237 and females' responses weighted heavier by a factor of 1.120881.

This same thing was done for each of the 21 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 1.84486 [ $1.12088$  (weight for females)  $\times$   $0.98504$  (weight for White)  $\times$   $1.41906$  (weight for age 35-44)  $\times$   $1.17747$  (weight for income \$50-\$75k)]. Thus, each individual in the 2017 Wyandot 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 23.0) 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.

Category	Wyandot County Sample	%	2016 Census	%	Weighting Value
<b>Sex:</b>					
Male	235	55.03513	11,090	49.59971	0.901237
Female	192	44.96487	11,269	50.40029	1.120881
<b>Age:</b>					
20 to 34 years	59	13.88235	3,639	21.93226	1.57987
35 to 44 years	50	11.76471	2,770	16.69479	1.41906
45 to 54 years	66	15.52941	3,074	18.52700	1.19303
55 to 59 years	41	9.64706	1,569	9.45636	0.98023
60 to 64 years	51	12.00000	1,529	9.21528	0.76794
65 to 74 years	84	19.76471	2,144	12.92189	0.65379
75 to 84 years	58	13.64706	1,300	7.83510	0.57412
85+ years	16	3.76471	567	3.41731	0.90772
<b>Race:</b>					
White	414	96.95550	21,354	95.50517	0.98504
Non-White	13	3.04450	1,005	4.49483	1.47638
<b>Household Income:</b>					
Less than \$10,000	7	1.76768	477	5.80928	3.28639
\$10k-\$15k	25	6.31313	508	6.18682	0.97999
\$15k-\$25k	57	14.39394	1,079	13.14091	0.91295
\$25k-\$35k	53	13.38384	978	11.91085	0.88994
\$35k-\$50	60	15.15152	1,482	18.04896	1.19123
\$50k-\$75k	82	20.70707	2,002	24.38193	1.17747
\$75k-\$100k	54	13.63636	1,310	15.95421	1.16998
\$100k-\$150k	46	11.61616	163	1.98514	0.17089
\$150k or more	12	3.03030	212	2.58190	0.85203

**Note:** The weighting ratios are calculated by taking the ratio of the proportion of the population of Wyandot County in each subcategory by the proportion of the sample in the Wyandot County survey for that same category.

\*Wyandot County population figures taken from the 2016 Census estimates.

## Appendix V: Wyandot County Sample Demographic Profile\*

Adult Variable	2018 Wyandot County Adult Survey Sample	Wyandot County Census 2012-2016 (5-year estimate)	Ohio Census 2016
<b>Age</b>			
20-29	10.5%	10.5%	13.4%
30-39	17.4%	11.8%	12.3%
40-49	20.6%	12.9%	12.2%
50-59	17.4%	14.3%	14.2%
60 plus	33.0%	24.8%	22.9%
<b>Race/Ethnicity</b>			
White	96.9%	98.0%	84.1%
Black or African American	0.4%	0.7%	14.2%
American Indian and Alaska Native	1.4%	0.2%	0.8%
Asian	0.4%	1.0%	2.6%
Other	1.1%	0.8%	1.2%
Hispanic Origin (may be of any race)	0.5%	2.6%	3.6%
<b>Marital Status†</b>			
Married Couple	58.8%	56.0%	47.4%
Never been married/member of an unmarried couple	18.2%	23.6%	32.5%
Divorced/Separated	21.9%	13.1%	13.8%
Widowed	9.4%	7.2%	6.3%
<b>Education†</b>			
Less than High School Diploma	3.3%	9.7%	10.0%
High School Diploma	38.5%	48.0%	33.3%
Some college/College graduate	57.6%	42.3%	56.7%
<b>Income (Families)</b>			
\$14,999 and less	7.1%	4.8%	7.7%
\$15,000 to \$24,999	11.8%	6.6%	6.8%
\$25,000 to \$49,999	24.8%	25.8%	21.2%
\$50,000 to \$74,999	20.7%	24.2%	20.4%
\$75,000 or more	28.6%	38.6%	44.1%

\* 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 Wyandot 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.

Youth Variable	2018 Youth Survey Sample
<b>Age</b>	
12 years old or younger	16.4%
13 years old	15.3%
14 years old	15.0%
15 years old	16.7%
16 years old	13.9%
17 years old	12.7%
18 years old or older	10.0%
<b>Gender</b>	
Male	57.8%
Female	42.2%
<b>Race/Ethnicity</b>	
White	93.3%
American Indian and Alaska Native	7.9%
Black or African American	2.1%
Asian	1.4%
Hispanic or Latino	6.3%
Native Hawaiian or Other Pacific Islander	0.5%
<b>Grade Level</b>	
Middle School (6-8)	43.1%
High School (9-12)	56.8%
<b>Individual Grade Level</b>	
6 <sup>th</sup> grade	11.8%
7 <sup>th</sup> grade	16.7%
8 <sup>th</sup> grade	14.6%
9 <sup>th</sup> grade	16.2%
10 <sup>th</sup> grade	15.3%
11 <sup>th</sup> grade	11.6%
12 <sup>th</sup> grade	13.7%

\* Percents may not equal 100% due to missing data (non-responses) and/or multiple response questions.

# Appendix VI: Demographics and Household Information

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

Age	Total	Males	Females
<b>Wyandot County</b>	<b>22,615</b>	<b>11,186</b>	<b>11,429</b>
<b>0-4 years</b>	<b>1,440</b>	<b>748</b>	<b>692</b>
1-4 years	1,153	613	540
< 1 year	287	135	152
1-2 years	558	305	253
3-4 years	595	308	287
<b>5-9 years</b>	<b>1,516</b>	<b>773</b>	<b>743</b>
5-6 years	623	324	299
7-9 years	893	449	444
<b>10-14 years</b>	<b>1,565</b>	<b>842</b>	<b>723</b>
10-12 years	922	505	417
13-14 years	643	337	306
12-18 years	2,216	1,160	1,194
<b>15-19 years</b>	<b>1,509</b>	<b>771</b>	<b>738</b>
15-17 years	980	502	478
18-19 years	529	269	260
20-24 years	1,120	565	555
25-29 years	1,258	618	640
30-34 years	1,308	684	624
35-39 years	1,445	732	713
40-44 years	1,458	731	727
45-49 years	1,638	851	787
50-54 years	1,744	842	902
55-59 years	1,587	818	769
60-64 years	1,347	643	704
65-69 years	1,000	482	518
70-74 years	859	405	454
75-79 years	692	281	411
80-84 years	561	215	346
85-89 years	371	139	232
90-94 years	141	36	105
95-99 years	46	8	38
100-104 years	10	2	8
105-109 years	0	0	0
110 years & over	0	0	0
<b>Total 85 years and over</b>	<b>568</b>	<b>185</b>	<b>383</b>
<b>Total 65 years and over</b>	<b>3,680</b>	<b>1,568</b>	<b>2,112</b>
<b>Total 19 years and over</b>	<b>18,662</b>	<b>9,008</b>	<b>9,654</b>

# WYANDOT COUNTY PROFILE

## *General Demographic Characteristics (Source : U.S. Census Bureau, Census 2016)*

### *2012-2016 ACS 5-year estimate*

#### **Total Population**

2016 Total Population	22,359
2000 Total Population	22,908

#### **Largest City-Upper Sandusky**

2016 Total Population	6,917	100%
2000 Total Population	6,533	100%

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

Total Population	22,359	100%
White Alone	21,731	97.1%
Hispanic or Latino (of any race)	580	2.6%
Asian	174	0.8%
Two or more races	176	0.8%
African American	93	0.4%
Other	188	0.8%

#### **Population By Age 2010**

Under 5 years	1,274	5.7%
5 to 17 years	4,002	17.9%
18 to 24 years	1,677	7.5%
25 to 44 years	5,232	23.4%
45 to 64 years	6,171	27.6%
65 years and more	4,024	18.0%

#### **Median age (years)**

**41.7**

#### **Household By Type**

Total Households	9,144	100%
Family Households (families)	6,130	67.0%
With own children <18 years	2,374	26.0%
Married-Couple Family Households	4,848	53.0%
With own children <18 years	1,628	17.8%
Female Householder, No Husband Present	882	9.6%
With own children <18 years	544	5.9%
Non-family Households	3,014	33.0%
Householder living alone	2,369	25.9%
Householder 65 years and >	1,069	11.7%

Households With Individuals < 18 years	2,716	29.7%
Households With Individuals 60 years and >	3,667	40.1%

Average Household Size	2.41 people
Average Family Size	2.90 people



**General Demographic Characteristics, continued**  
**(Source : U.S. Census Bureau, Census 2016)**

**2012-2016 ACS 5-year estimate**

Median Value of Owner-Occupied Units	\$111,500
Median Monthly Owner Costs (With Mortgage)	\$1,033
Median Monthly Owner Costs (Not Mortgaged)	\$383
Median Gross Rent for Renter-Occupied Units	\$636
Median Rooms Per Housing Unit	6.2
Total Housing Units	9,881
No Telephone Service	221
Lacking Complete Kitchen Facilities	59
Lacking Complete Plumbing Facilities	2

**Selected Social Characteristics**  
**(Source : U.S. Census Bureau, Census 2016)**

**2012-2016 ACS 5-year estimates**

**School Enrollment**

Population 3 Years and Over Enrolled In School	5,219	100%
Nursery & Preschool	382	7.3%
Kindergarten	311	6.0%
Elementary School (Grades 1-8)	2,383	45.7%
High School (Grades 9-12)	1,227	23.5%
College or Graduate School	916	17.6%

**Educational Attainment**

Population 25 Years and Over	15,415	100%
< 9 <sup>th</sup> Grade Education	465	3.0%
9 <sup>th</sup> to 12 <sup>th</sup> Grade, No Diploma	1,032	6.7%
High School Graduate (Includes Equivalency)	7,399	48.0%
Some College, No Degree	2,684	17.4%
Associate Degree	1,580	10.2%
Bachelor's Degree	1,582	10.3%
Graduate Or Professional Degree	673	4.4%

Percent High School Graduate or Higher	*(X)	90.3%
Percent Bachelor's Degree or Higher	*(X)	14.6%

\*(X) – Not available

**Selected Social Characteristics, Continued**  
(Source : U.S. Census Bureau, Census 2016)

**2012-2016 ACS 5-year estimate**

**Marital Status**

Population 15 Years and Over	18,067	100%
Never Married	4,264	23.6%
Now Married, Excluding Separated	10,118	56.0%
Separated	325	1.8%
Widowed	1,301	7.2%
Female	1,010	11.0%
Divorced	2,042	11.3%
Female	1,111	12.1%

**Veteran Status**

Civilian Veterans 18 years and over	1,578	9.2%
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**Disability Status of the Civilian Non-Institutionalized Population**

Total Civilian Noninstitutionalized Population	22,096	100%
With a Disability	2,911	13.2%
Under 18 years	5,270	23.9%
With a Disability	287	1.3%
18 to 64 years	13,035	59.0%
With a Disability	1,213	5.5%
65 Years and Over	3,791	17.2%
With a Disability	1,411	6.4%

**Selected Economic Characteristics**  
(Source: U.S. Census Bureau, Census 2016)

**2012-2016 5-year estimates**

**Employment Status**

Population 16 Years and Over	17,670	100%
In Labor Force	11,532	65.3%
Not In Labor Force	6,138	34.7%
Females 16 Years and Over	8,989	50.8%
In Labor Force	5,371	59.8%

Population Living with Own Children <6 Years	1,522	100%
All Parents In Family In Labor Force	1,110	72.9

**Class of Worker**

Employed Civilian Population 16 Years and Over	10,893	100%
Private Wage and Salary Workers	9,149	84.0%
Government Workers	1,220	11.2%
Self-Employed Workers in Own Not Incorporated Business	507	4.7%
Unpaid Family Workers	17	0.2%

**Median Earnings**

Male, Full-time, Year-Round Workers	\$41,558
Female, Full-time, Year-Round Workers	\$35,328

***Selected Economic Characteristics, Continued***  
***(Source: U.S. Census Bureau, Census 2015)***

***2012-2016 ACS 5-year estimate***

***Occupations***

Employed Civilian Population 16 Years and Over	10,893	100%
Production, Transportation, and Material Moving	3,266	30.0%
Management, business, science, and art occupations	2,749	25.2%
Sales and Office Occupations	1,927	17.7%
Service Occupations	1,666	15.3%
Natural Resources, Construction, and Maintenance	1,285	11.8%

***Leading Industries***

Employed Civilian Population 16 Years and Over	10,893	100%
Manufacturing	3,219	29.6%
Educational, health and social services	2,142	19.7%
Trade (retail and wholesale)	1,297	11.9%
Arts, entertainment, recreation, accommodation, and food	765	7.0%
Construction	717	6.6%
Agriculture, forestry, fishing and hunting, and mining	515	4.7%
Other services (except public administration)	502	4.6%
Professional, scientific, management, administrative, and waste management services	475	4.4%
Transportation and warehousing, and utilities	478	4.4%
Public administration	365	3.4%
Finance, insurance, real estate and rental and leasing	344	3.2%
Information	74	0.7%

**Selected Economic Characteristics, Continued**  
**(Source: U.S. Census Bureau, Census 2016)**

**2012-2016 ACS 5-year estimate**

**Income In 2016**

Households	9,144	100%
< \$10,000	477	5.2%
\$10,000 to \$14,999	508	5.6%
\$15,000 to \$24,999	1,079	11.8%
\$25,000 to \$34,999	978	10.7%
\$35,000 to \$49,999	1,482	16.2%
\$50,000 to \$74,999	2,002	21.9%
\$75,000 to \$99,999	1,310	14.3%
\$100,000 to \$149,999	933	10.2%
\$150,000 to \$199,999	163	1.8%
\$200,000 or more	212	2.3%

**Median Household Income** **\$50,723**

**Income In 2016**

Families	6,130	100%
< \$10,000	138	2.3%
\$10,000 to \$14,999	156	2.5%
\$15,000 to \$24,999	405	6.6%
\$25,000 to \$34,999	674	11.0%
\$35,000 to \$49,999	905	14.8%
\$50,000 to \$74,999	1,481	24.2%
\$75,000 to \$99,999	1,179	19.2%
\$100,000 to \$149,999	870	14.2%
\$150,000 to \$199,999	156	2.5%
\$200,000 or more	166	2.7%

**Median Household Income (families)** **\$61,779**

**Per Capita Income In 2012-2016** **\$25,064**

**Poverty Status In 2016**

**Number Below Poverty Level**      **% Below Poverty Level**

Families	*(X)	6.7%
Individuals	*(X)	11.1%

\*(X) – Not available

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

	<b>Income</b>	<b>Rank of Ohio Counties</b>
BEA Per Capita Personal Income 2016	\$38,872	39 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2015	\$38,713	38 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2014	\$37,741	35 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2013	\$36,969	34 <sup>th</sup> of 88 counties
BEA Per Capita Personal Income 2012	\$35,180	39 <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, 2012 to 2016**

Category	Wyandot	Ohio
Population in poverty	11.1%	15.4%
< 125% FPL (%)	15.4%	19.9%
< 150% FPL (%)	21.6%	24.3%
< 200% FPL (%)	32.0%	33.3%
Population in poverty (2000)	5.5%	10.6%

*(Source: The Ohio Poverty Report, Ohio Development Services Agency, February 2018, <http://www.development.ohio.gov/files/research/P7005.pdf>)*

**Employment Statistics\***

Category	Wyandot	Ohio
Labor Force	12,700	5,790,400
Employed	12,300	5,540,800
Unemployed	400	249,600
Unemployment Rate* in March 2018	3.1	4.3
Unemployment Rate* in February 2018	3.5	4.8
Unemployment Rate* in March 2017	3.9	5.3

*\*Rate equals unemployment divided by labor force.*

*(Source: Ohio Department of Job and Family Services, May2018 retrieved from <http://ohiolmi.com/laus/current.htm>)*

### Estimated Poverty Status in 2016

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval
<b>Wyandot County</b>				
All ages in poverty	1,881	1,505 to 2,257	8.6%	6.9 to 10.3
Ages 0-17 in poverty	556	428 to 684	11.3%	8.7 to 13.9
Ages 5-17 in families in poverty	378	287 to 469	10.4%	7.9 to 12.9
Median household income	\$55,590	\$51,968 to \$59,212		
<b>Ohio</b>				
All ages in poverty	1,639,636	1,614,177 to 1,665,095	14.5%	14.3 to 14.7
Ages 0-17 in poverty	521,730	506,894 to 536,566	20.4%	19.8 to 21.0
Ages 5-17 in families in poverty	348,713	335,691 to 361,735	18.7%	18.0 to 19.4
Median household income	\$52,357	\$52,083 to \$52,631		
<b>United States</b>				
All ages in poverty	44,268,996	44,022,086 to 44,515,906	14.0%	13.9 to 14.1
Ages 0-17 in poverty	14,115,713	13,976,345 to 14,255,081	19.5%	19.3 to 19.7
Ages 5-17 in families in poverty	9,648,486	9,548,767 to 9,748,205	18.3%	18.1 to 18.5
Median household income	\$57,617	\$57,502 to \$57,732		

(Source: U.S. Census Bureau, Small Area Income and Poverty Estimates)

### Federal Poverty Thresholds in 2017 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	\$12,752					
1 Person 65 and >	\$11,756					
2 people Householder < 65 years	\$16,414	\$16,895				
2 People Householder 65 and >	\$14,816	\$16,831				
3 People	\$19,173	\$19,720	\$19,749			
4 People	\$25,283	\$25,696	\$24,858	\$24,944		
5 People	\$30,490	\$30,933	\$29,986	\$29,253	\$28,805	
6 People	\$35,069	\$35,208	\$34,482	\$33,787	\$32,753	\$32,140
7 People	\$40,351	\$40,603	\$39,734	\$39,129	\$38,001	\$36,685
8 People	\$45,129	\$45,528	\$44,708	\$43,990	\$42,971	\$41,678
9 People or >	\$54,287	\$54,550	\$53,825	\$53,216	\$52,216	\$50,840

(Source: U. S. Census Bureau, Poverty Thresholds 2017)

## Appendix VII: County Health Rankings

	Wyandot County	Ohio	U.S.
<b>Health Outcomes</b>			
<b>Premature death.</b> Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2014-2016)	6,200	7,700	6,700
<b>Overall health.</b> Percentage of adults reporting fair or poor health (age-adjusted) (2016)	16%	17%	16%
<b>Physical health.</b> Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2016)	3.7	4.0	3.7
<b>Mental health.</b> Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2016)	4.0	4.3	3.8
<b>Maternal and infant health.</b> Percentage of live births with low birthweight (< 2500 grams) (2010-2016)	7%	9%	8%
<b>Health Behaviors</b>			
<b>Tobacco.</b> Percentage of adults who are current smokers (2016)	20%	23%	17%
<b>Obesity.</b> Percentage of adults that report a BMI of 30 or more (2014)	34%	32%	28%
<b>Food environment.</b> Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2015)	8.4	6.6	7.7
<b>Physical activity.</b> Percentage of adults aged 20 and over reporting no leisure-time physical activity (2014)	29%	26%	23%
<b>Active living environment.</b> Percentage of population with adequate access to locations for physical activity (2016)	63%	85%	83%
<b>Drug and alcohol abuse.</b> Percentage of adults reporting binge or heavy drinking (2016)	18%	19%	18%
<b>Drug and alcohol abuse and injury.</b> Percentage of driving deaths with alcohol involvement (2012-2016)	41%	34%	29%
<b>Infectious disease.</b> Number of newly diagnosed chlamydia cases per 100,000 population (2015)	201.3	489.3	478.8
<b>Sexual and reproductive health.</b> Teen birth rate per 1,000 female population, ages 15-19 (2010-2016)	33	28	27

(Source: 2018 County Health Rankings for Wyandot County, Ohio and U.S. data)

	Wyandot County	Ohio	U.S
<b>Clinical Care</b>			
<b>Coverage and affordability.</b> Percentage of population under age 65 without health insurance (2015)	8%	8%	11%
<b>Access to health care/medical care.</b> Ratio of population to primary care physicians (2015)	4,450:1	1,310:1	1,320:1
<b>Access to dental care.</b> Ratio of population to dentists (2016)	3,690:1	1,660:1	1,480:1
<b>Hospital utilization.</b> Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2015)	59	57	49
<b>Diabetes.</b> Percentage of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring (2014)	87%	85%	85%
<b>Cancer.</b> Percentage of female Medicare enrollees ages 67-69 that receive mammography screening (2014)	69%	61%	63%
<b>Social and Economic Environment</b>			
<b>Education.</b> Percentage of ninth-grade cohort that graduates in four years (2014-2015)	93%	81%	83%
<b>Education.</b> Percentage of adults ages 25-44 years with some post-secondary education (2012-2016)	52%	65%	65%
<b>Employment, poverty, and income.</b> Percentage of population ages 16 and older unemployed but seeking work (2016)	3.7%	4.9%	4.9%
<b>Employment, poverty, and income.</b> Percentage of children under age 18 in poverty (2016)	11%	20%	20%
<b>Employment, poverty, and income.</b> Ratio of household income at the 80th percentile to income at the 20th percentile (2012-2016)	3.9	4.8	5.0
<b>Family and social support.</b> Percentage of children that live in a household headed by single parent (2012-2016)	31%	36%	34%
<b>Family and social support.</b> Number of membership associations per 10,000 population (2015)	22.5	11.3	9.3
<b>Violence.</b> Number of reported violent crime offenses per 100,000 population (2012-2014)	81	290	380
<b>Injury.</b> Number of deaths due to injury per 100,000 population (2012-2016)	64	75	65

(Source: 2018 County Health Rankings for Wyandot County, Ohio and U.S. data)



	Wyandot County	Ohio	U.S.
<b>Physical Environment</b>			
<b>Air, water, and toxic substances.</b> Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2012)	11.3	11.3	8.7
<b>Air, water, and toxic substances.</b> Indicator of the presence of health-related drinking water violations. 1 - indicates the presence of a violation, 0 - indicates no violation (FY 2013-2014)	No	N/A	N/A
<b>Housing.</b> Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities (2009-2013)	11%	15%	19%
<b>Transportation.</b> Percentage of the workforce that drives alone to work (2011-2015)	85%	83%	76%
<b>Transportation.</b> Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2011-2015)	27%	30%	35%

*(Source: 2018 County Health Rankings for Wyandot County, Ohio and U.S. data)*

*N/A – Data is not available*

# Appendix VIII: Focus Groups and Key Informant Interviews

## Overview

In 2018, the Wyandot County General Health District facilitated focus groups and oversaw the key stakeholder and informant interview process for the *Community Themes and Strengths Assessment* from February 28, 2018 to April 3, 2018. The following briefly summarizes the outcomes from the research that was collected. To see the full assessment please contact Barbara Mewhorter from the Wyandot County Health Department at (419) 294-3852.

The goals of the Community Themes and Strengths Assessment was to determine what was important to Wyandot County residents, how they perceive the quality of life in Wyandot County, and identify local resources that can be used to improve the community's health. To better inform this process, the leadership included a community engagement component to hear community thoughts and perspectives. Individuals from Wyandot County were engaged through either a focus group or a one-on-one interview process. The information from the one-on-one interviews and the focus groups will help the leadership team identify both strengths and gaps in the local health care system that can be addressed in the County's Community Health Improvement Plan for the future.

Specifically, the research project included:

1. Utilizing focus group and key informant interview question protocols, to collect data and complete analysis. Providing key informant interview and documentation training to community partners.
2. Facilitating a final approach, and documentation of the planned focus group populations and key informant interview groups among the various populations and stakeholder groups audiences identified by Wyandot County Public Health.
3. Producing focus group summary reports (one for each session conducted) including information regarding key informant interview participant statistics, analyzed data, and necessary recommendations, where possible.
4. Preparing a report summary that synthesizes the major themes identified through the focus group and key informant interviews

## Approach

Wyandot County Public Health examines health care services, businesses, agencies and the public to ensure that there is continuity of services for the population. Our goal is to understand the capacity and the barriers within the health care system. Our survey analysis will provide us with data to identify (1) gaps in service (2) availability of service (3) root causes for the service/availability gaps (4) possible solutions and (5) a commitment to re-examine health care services on an on-going basis.

Assessing Health Equity in our community has brought to light many factors that can contribute to lack of access to health care, including insurance status, transportation, travel distance, availability of a regular source of care, wait time for appointments, and office wait times. Social conditions also influence access to health care, including: education and literacy level, language barriers, knowledge of the importance of symptoms, trust in the health care system, and employment leave flexibility. Once the barriers and gaps in service are identified, strategies will be developed and implemented to address them and improve access to health care services. We have a commitment to revisit the Health Equity Assessment as part of our Community Health Assessment (CHA).

The *Community Themes and Strengths Assessment* project was designed to hear the needs of the local community capturing insights from specific population groups identified in the 2018 Community Health Assessment as experiencing barriers to health care services:

- Residents with lower incomes
- Residents age 65 years and older
- Residents with chronic disease(s)
- Spanish speaking residents
- Families with children with serious medical issues or developmental delays

A pre-focus group survey was utilized to collect anonymous data on each participant represented that included demographics and profile information. Staff members from Wyandot County Public Health conducted key informant interviews with a variety of local residents and service providers, representing the following community sectors:

- Faith-based
- Education
- Elected Officials
- Community Organizations
- Health Care
- Business

### Community Themes and Strengths Assessment Questionnaires

In order to identify Community Themes and Strengths, focus group and key informant questionnaires were developed using the Mobilizing for Action through Planning and Partnerships (MAPP) strategic planning model. Interviewers utilized the same questionnaires during the interviews to attempt to obtain qualitative data for the project. To view the full list of questions that were asked in the full assessment please contact Barbara Mewhorter from the Wyandot County Health Department at (419) 294-3852.

### Participant Profile

The following tables shows the participant profiles for the Focus Groups and Key Informant Interviews.

Focus Group Audience	Number of Participants
Low Income	18
Chronic Disease	14
Spanish-Speaking	10
Seniors	11
Families with Children with Special Needs	1
<b>Total Participants</b>	<b>54</b>

Key Informant Audience	Number of Interviews
Faith-based	3
Elected Official	2
Business	3
Health Care	2
Interpreter	1
Community Organization	1
Education	1
<b>Total Participants</b>	<b>13</b>

### Overview of Emerging Themes

The following summary findings represent an overview of emerging themes derived from the focus group meeting and key informant interviews conducted by Wyandot County Public Health Staff between February 28, 2018 and April 3, 2018. The community themes identified below may not be the only conclusions one might extract from data collected.

### ***Focus Group Themes Summary***

Overall, focus group participants believed that their community is clean, safe and cares about kids.

A majority of participants feel that the local healthcare system provides timely, centralized, excellent care, and that the addition of the Urgent Care is a benefit. While people were happy with the physicians available at Wyandot Memorial Hospital, they would prefer later weekday, and Saturday, office hours to accommodate their needs. This is especially important to individuals that do not have flexible employers or children in school. Also, the provision of additional bilingual staff (Spanish), particularly during Urgent Care hours, was mentioned as a possible way to improve services to patients.

Although participants were always able to obtain referrals for specialized care, the lack of locally available specialists was a recurring theme. Types of care mentioned included highly specialized pediatric care and some cardiac care, which require travel outside of the county.

The affordability of healthcare services was an issue for people with no insurance or insurance with a high deductible. Barriers to obtaining and using insurance included the insurance application process, cost, and approval process to obtain service. Although Medicaid is available for children on an income based level, it does not cover all services, supplies, or medication without dispute. The availability of flexible payment plans, due to the high cost of some services, was mentioned as a potential solution.

Improving the availability of local transportation options was a recurring theme among respondents. The absence of a cab or bus service, or consistently reliable community transportation, means most people rely on their own vehicles, family, friends, or interpreter for transportation. Although gas voucher assistance is available through many local agencies, free or low-cost transportation was identified as being a potential benefit.

### ***Key Informant Themes Summary***

Participants in key informant groups were overwhelmingly proud of the community and believe that Wyandot County is a great place to live, and that people and organizations support each other.

The primary concerns identified in the community related to drugs, obesity, and mental health issues; however, drugs were the most significant concern. Informants believe the availability of mental health and addiction services in the community should be a priority to address these issues, particularly for the youth. Obtaining additional financial resources, broad based community support, and altering existing attitudes were all seen as needs to effectively address the issues.

Maintaining a strong local economy and an effective workforce were also identified as a priority to maintaining a healthy community, as it affects individual families, the community as a whole, and local governments. The current lack of financial resources available locally, particularly to small local governments, was also identified as a concern. The lack of local resources was primarily attributed to the rural nature of the County and limited State funding.

Overall, the key informants were aware of existing community partnerships; however, responses were typically grouped together as healthcare organizations, community organizations, or governmental agencies. Most also believed they were active in community partnerships, based upon their position within their agency.

Although a few persons polled stated they were unsure about what would excite them enough to become involved, many stated that information sharing via public group forums in recreation and learning centers would be beneficial.