WOOD COUNTY

2017 Nutrition and Physical Activity Health Assessment

Improving Community Health: Healthy Foods & Physical Activity
The members of the Wood County Health Partners are pleased to present this 2017 Physical Activity and Nutrition Health Assessment. This health assessment provides us with a snapshot of Wood County, as well as our state and nation. The data presented in this report provides valuable information to develop strategies that focus on wellness, activity, nutrition, and unmet community needs. The assessment gives additional insight in how these areas relate to our community structure and highlights opportunities for future initiatives.

Through collaboration with The Hospital Council of Northwest Ohio, every effort has been made to assure that this report contains valid and reliable data. Various efforts have been made in the past to identify and assess the varied physical activity and nutrition statistics of Wood County residents and this study represents a focused approach on these items. This study was developed amongst area agencies who can impact change in the health status of our county.

The Wood County Health Partners have made various commitments in order to ensure the success of this effort:

1. The assessment will not “sit on a shelf.” The identified areas of concern and recommendations will be followed up and acted on.

2. Initiatives will not be done in a vacuum. In order to be successful, any and all stakeholders will need to be involved in current and future efforts. Every agency dealing in some aspect of physical activity and nutrition in Wood County needs to be “at the table” and offering their particular areas of expertise and experience. These areas are so broad that they cannot be the sole responsibility of any one agency. There can be no “silos” in these efforts or there will be no success.

3. Wood County health assessments will continue to be repeated on a regular basis and data and results will be trended so that results can be compared. This will ensure that benchmarking can occur and improvements (or degradation) in measures can be noted.

4. The assessments will be flexible. As additional unmet needs are identified, or existing needs are met, the study itself must evolve to remain a meaningful and workable instrument for health planning in Wood County.

The Wood County Health Partners look forward to continuing to work together with the community to improve opportunities for physical activity and nutrition for Wood County residents of all ages.

Sincerely,

Wood County Health Partners
ACKNOWLEDGEMENTS

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This report has been commissioned by: Wood County Health Partners

Bowling Green State University
Children’s Resource Center
Dental Center of Northwest Ohio
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NorthWest Community Corrections Center
OSU Extension
Owens Community College
Safe Communities of Wood County
The Salvation Army of Northwest Ohio
United Way of Wood County
Wood County Alcohol, Drug Addiction and Mental Health Services Board
Wood County Board of Developmental Disabilities
Wood County Commissioners

Wood County Committee on Aging
Wood County Community Health and Wellness Center
Wood County Educational Service Center
Wood County Emergency Management Agency
Wood County Family and Children First Council
Wood County Health District
Wood County Hospital
Wood County Job & Family Services
Wood County Juvenile Court
Wood County Park District
Wood County Prevention Coalition
Wood County Reentry Coalition
Wood County Suicide Prevention Coalition
WSOS Community Action

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The 2017 Wood County Nutrition & Physical Activity Health Assessment is available on the following websites:

**Wood County Health District**
http://www.woodcountyhealth.org/

**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 Wood County adults (19 years of age and older), who participated in a county-wide nutrition and physical activity health assessment survey during February through March 2017. The findings are based on self-administered surveys using a structured questionnaire. The questions were modeled after the Moving to the Future Framework, as well as survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS), the Youth Risk Behavior Surveillance System (YRBSS), and the National Survey of Children’s Health (NSCH) developed by the Child and Adolescent Health Measurement Initiative. The Hospital Council of Northwest Ohio (HCNO) collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

DESIGN

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

INSTRUMENT DEVELOPMENT

Two online survey instruments were designed and pilot tested for this study through Survey Monkey: one for adult community members and one for key leaders in the community. As a first step in the design process, staff members from HCNO met to discuss potential sources of valid and reliable survey items that would be appropriate for identifying the opportunities and challenges in accessing healthy foods and physical activity opportunities within the county. The investigators decided to derive most of the adult and key leader survey items from the Moving to the Future framework. This decision was based on meeting the requirements outlined in the grant provided by the Ohio Department of Health.

The project coordinator from HCNO met with the Wood County Health Partners (WCHP). During this meeting, banks of potential survey questions from the Moving to the Future Framework, BRFSS, YRBSS, and NSCH surveys were reviewed and discussed. Based on input from the WCHP, the Project Coordinator composed drafts of surveys containing 75 items for the community survey, and 28 items for the key leader survey. The drafts were reviewed and approved by the committee.

PROCEDURE | Community & Key Leader Survey

Coalition members were asked to distribute the community survey link via social media (i.e. Facebook, Twitter, website, etc.) and send out to their email list servs and post to their websites. In addition, HCNO provided the coalition with a list of approximately 20 sectors that should participate in the key leader survey. Coalition members reached out to those sectors individually. The coalition was provided introduction language to use as a template prior to distributing both survey links as well as a press release template to distribute out to media outlets.

The community survey generated 456 completed surveys and the key leader survey generated 106 responses. Although this was a good response, data is not generalizable due to the survey methodology not being a true random sample.
Moving to the Future

Staff from Wood County Health District, along with HCNO staff, participated in six webinars coordinated by the ODH and Karen Probert, founder of Moving to the Future.

ODH secured grant funds to work on nutrition and physical activity and provided funding to local health departments through their Maternal and Child Health (MCH) grant. Grantees were required to use the Moving to the Future Framework.

Moving to the Future is an online resource that provides tools to the community for planning nutrition and physical activity programs. It places emphasis on changing policies and the environment. The online tools feature a planning guide that includes forms, worksheets and sample surveys, a forum network, and a member directory. The planning guide is a five-step process: Community Assessment; Priorities, Goals, and Objectives; Nutrition and Physical Activity Plan; Implementation; and Evaluation. This report serves as the community assessment and the starting point for all future priority selection and work.

For more information about Moving to the Future, go to: http://movingtothefuture.org/.

Alignment of State Health Improvement Plan (SHIP) and State Health Assessment (SHA)

Staff from HCNO referenced indicators from the Ohio State Health Assessment (SHA) and state health improvement plan (SHIP), when applicable. Examples of common indicators include, fruit and vegetable consumption, access to exercise opportunities, driving to work, etc. For those indicators that align with the SHA and SHIP, they will be marked with the state icon. 

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

Institutional Review Board (IRB) Exemption

The Wood County Health District submitted an application, along with the proposed surveys to the Ohio Department of Health’s Institutional Review Board (IRB) to secure approval. The assessment that was conducted was classified as a category #2: research involving the use of survey procedures that will not allow subjects to be identified, directly or through identifiers; and any disclosure of responses that could place subjects at risk or be damaging to their reputation.

Data Analysis

Individual responses were anonymous and confidential. Only group data is available. All data was analyzed by HCNO staff. Crosstabs were used to calculate descriptive statistics for the data presented in this report.

Limitations

As with all county assessments, it is important to consider the findings in light of all possible limitations. To work within the grant budget, the surveys were distributed by email and social media. Some populations are less likely to have internet access or a computer, such as the elderly population or those with low incomes. In using this survey process, the results are not generalizable to the entire community.
Key Findings

The 2017 health assessment identified that 70% of Wood County adults were overweight or obese based on Body Mass Index (BMI). The 2015 BRFSS indicates that 30% of Ohio and of U.S. adults were obese by BMI. Nearly two-fifths (35%) of Wood County adults were obese.

Adult Consumption

- In 2017, the health assessment indicated that two-thirds (70%) of Wood County adults were either overweight (35%) or obese (35%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.

- More than two-thirds (67%) of adults were trying to lose weight, (25%) were trying to maintain their current weight or keep from gaining weight and (1%) were trying to gain weight. Less than one-tenth (7%) of Wood County adults were not doing anything to lose or gain weight.

- Wood County adults did the following to lose weight or keep from gaining weight: drank more water (62%), ate less food, fewer calories, or foods low in fat (62%), exercised (60%), ate more fruits and vegetables (50%), skipped meals (13%), took diet pills, powders or liquids without a doctor’s advice (3%), went without eating 24 or more hours (2%), smoked cigarettes (1%), and vomited or took laxatives (1%).

- In 2017, 52% of adults ate between 1 to 2 servings of fruits and vegetables per day; 34% ate between 3 to 4 servings; and 10% were eating 5 or more servings of fruits and vegetables per day. 4% of Wood County adults did not have any servings of fruits and vegetables. The American Cancer Society recommends that adults eat at least 2 ½ cups (5 servings) of fruits and vegetables per day to reduce the risk of cancer and to maintain good health. In 2013, 42% of Ohio adults consumed fruits less than one time daily and 26% consumed vegetables less than one time daily (Source: 2013 BRFSS).

- Ten percent (10%) of adults drank 10 or more servings of water per day. 20% drank between 7 to 9 servings, 33% drank 4 to 6 servings and 35% drank 1 to 3 servings of water per day. 2% reported they did not consume any water in a day. The Institute of Medicine, National Academy of Sciences recommends that men drink a total of 16 (cups/servings) and women drink a total of 11 (cups/servings) of total water a day. (Source: The Institute of Medicine, National Academy)

- Fourteen percent (14%) of adults drank soda pop (not diet), punch, Kool-Aid, sports drinks, energy drinks, or other sugar-sweetened drinks at least once per day in the past week. 43% of adults did not drink any sugar-sweetened beverages in the past week.

- Eighty-eight (88%) of adults ate out in a restaurant or brought home take-out food at least once in the past week, including 7% of adults who did so for 5 or more meals in the past week.

- Wood County adults reported the following reasons they chose the types of food they ate: taste/enjoyment (77%), cost (72%), healthiness of food (67%), ease of preparation/time (60%), what their family prefers (51%), availability (44%), food they were used to (41%), nutritional content (37%), calorie content (34%), organic (16%), artificial sweetener content (13%), genetically modified (11%), other food sensitivities (7%), gluten free (4%), health care provider’s advice (6%), lactose free (2%), and other reasons (3%).
The following pie charts show the average daily consumption of fruits/vegetables and water of Wood County adults. An example of how to interpret the information: 34% of all Wood County adults ate 3 to 4 servings of fruits and vegetables per day.

- In Wood County, 10% of adults ate the recommended 5 or more servings of fruits and vegetables per day.
- Ten percent (10%) of adults drank the recommended 10 servings or more of water per day.

Wood County Adults Average Daily Fruit and Vegetable Consumption*

- 1-2 servings: 52%
- 3-4 servings: 34%
- 0 servings: 4%
- 5 or more servings: 10%

*A serving size of fruits and vegetable is ½ cup.

Wood County Adults Average Daily Water Consumption*

- 0 servings: 2%
- 1-2 servings: 52%
- 3-4 servings: 34%
- 4-6 servings: 33%
- 7-9 servings: 20%
- 10 or more servings: 10%

*A serving size of water is 1 cup (8oz.)
Adult Access to Food

- Wood County adults purchased their fruit and vegetables from the following places: large grocery store (97%), Farmer’s Market (45%), grow their own/garden (39%), local grocery store (26%), mail order food service (3%), Dollar General/Store (2%), Community Supported Agriculture (CSA) (2%), corner/convenience store (1%), food pantry (1%), Mobile produce (1%), community gardens (<1%), and other places (2%)

- Adults reported the following food insecurity issues in consuming fruits and vegetables: too expensive (18%), did not like the taste (8%), did not know how to prepare (7%), no access (2%), no variety (2%), transportation (1%), and other barriers (6%). No one reported stores did not take electronic benefits transfer (EBT) as barriers.

- Wood County adults experienced the following food insecurity issues in the past 12 months: had to choose between paying bills and buying food (10%), was worried food would run out (4%), went hungry/ate less to provide more food for their family (4%), loss of income led to food insecurity (4%), they were hungry, but did not eat because they had no money for food (3%) and their food assistance was cut (1%).

In the past year, 10% of Wood County adults had to choose between paying bills and buying food.

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 & food insecurity.

Food Environment Index

Wood County had a food index measure of: 7.5
**Facts on Nutrition:**

Eating fruit provides many different health benefits. People who eat more vegetables and fruits as part of an overall healthy eating lifestyle, are more likely to have reduced risk of chronic diseases and illnesses. Fruits provide some of the following vital nutrients listed:

- **Potassium**
- **Dietary fiber**
- **Vitamin C**
- **Folate**

Focus on whole fruits like fresh, canned, frozen, or dried instead of juice. The sugar that is naturally found in fruit does not count as added sugar.

**10 Tips to keep fruit on your mind:**

- Keep a bowl of whole fruit on the table counter or in the fridge.
- Buy fresh fruits in the season when they are less expensive and peak at their flavor.
- Buy fruits that are dried frozen and canned in water or 100% juice and fresh as well.
- Make most of the fruit choices whole or cut up fruit to keep the benefits of the fiber.
- Add fruit to your breakfast (top cereal, add to pancakes, drink 100% juice or with yogurt).
- At lunch, pack a fruit or choose fruit from the salad bar.
- Enjoy fruit at dinner too as a side or on top of a main dish.
- Fruits make great snacks and are easy to carry/store as well.
- Set example for children by eating fruit every day with meals and snacks.
- Make sure to ALWAYS rinse fruits before preparing by running them under clean water and rubbing them to remove dirt and surface microorganisms.

*(source: ChooseMyPlate.gov, 10 Tips on Fruits)*

<table>
<thead>
<tr>
<th>Adult Comparisons</th>
<th>Bowling Green Zip code 43402 2017</th>
<th>Perrysburg Zip code 43551 2017</th>
<th>Wood County 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obese</td>
<td>37%</td>
<td>19%</td>
<td>35%</td>
</tr>
<tr>
<td>Overweight</td>
<td>33%</td>
<td>34%</td>
<td>35%</td>
</tr>
<tr>
<td>Trying to lose weight</td>
<td>67%</td>
<td>63%</td>
<td>67%</td>
</tr>
<tr>
<td>Consumed 5 or more fruits and vegetables</td>
<td>13%</td>
<td>11%</td>
<td>10%</td>
</tr>
<tr>
<td>Fruits &amp; vegetables too expensive</td>
<td>19%</td>
<td>10%</td>
<td>18%</td>
</tr>
<tr>
<td>Ate out in a restaurant 5 or more meals in the past week</td>
<td>42%</td>
<td>18%</td>
<td>7%</td>
</tr>
<tr>
<td>Had to choose between paying bills and buying food</td>
<td>12%</td>
<td>4%</td>
<td>10%</td>
</tr>
</tbody>
</table>
Soda Expenditures, Percent of Food-At-Home Expenditures, State Rank, 2014

(Source: Nielsen, Nielsen SiteReports: 2014 as compiled by Community Commons)
Fruit and Vegetable Expenditures, Percent of Food-At-Home Expenditures, State Rank, 2014

Map Legend

- 1st Quintile (Highest Expenditures)
- 2nd Quintile
- 3rd Quintile
- 4th Quintile
- 5th Quintile (Lowest Expenditures)
- No Data or Data Suppressed

(Source: Nielsen, Nielsen SiteReports: 2014 as compiled by Community Commons)
Food Desert Census Tract, .5Mi. / 10 Mi. Tract, FARA 2015

(Source: US Department of Agriculture, Economic, USDA - Food Access Research Atlas: 2010-2015, as compiled by Community Commons)
Key Findings

The 2017 health assessment identified that 5% of school-aged children ate the recommended 5 or more servings of fruits and vegetables per day and 12% of children ages 0-5 ate the recommended amount. 10% of mothers did not breastfeed their children.

Child Consumption (Ages 0-5)

The following information was reported by Wood County parents of children 0-5 years old.

- Five percent (5%) of Wood County children ages 0-5 ate 5 or more servings of fruits and vegetables per day; 54% ate 3 to 4 servings; and 31% ate 1 to 2 servings of fruits and vegetables per day. 4% of parents reported their child did not eat any fruits or vegetables.

- Nearly three-fourths (72%) of parents reported their child drank milk, lactose free milk, calcium fortified juice, or other calcium sources at least once per day in the past week.

- In 2010, The Institute of Medicine, National Academy of Sciences recommended children ages 1 to 3 years consume 700 milligrams of calcium daily.

- One in ten (10%) children ages 0-5 drank 5 or more servings of water per day. 42% drank 3 to 4 servings per day, and 40% drank 1 to 2 servings of water per day. 8% of children did not drink any servings of water per day. The Institute of Medicine, National Academy of Sciences recommended that children ages 4-5 years old drink 7 cups/servings of total water per day. (Source: The Institute of Medicine, National Academy)

- Eight percent (8%) of Wood County children drank soda pop (not diet), punch, Kool-Aid, juice, or other fruit-flavored drinks at least once per day in the past week. 71% of children did not drink any soda pop or fruit flavored beverages in the past week.

- Mothers breastfed their child: more than 1 year (21%), 10 to 12 months (15%), 7 to 9 months (6%), 4 to 6 months (17%), less than 3 months (17%), still breastfeeding (10%) and never breastfed (10%).

Child Consumption (Grades Pre-K through high school)

The following information was reported by Wood County parents of school-age children from Pre-K through high school.

- Five percent (5%) of Wood County school-age children ate 5 or more servings of fruits and vegetables per day; 43% ate 3 to 4 servings; and 50% ate 1 to 2 servings of fruits and vegetables per day. 1% of parents reported their child did not eat any fruits and vegetables.

- One percent (1%) of Wood County school-age children drank 10 or more servings of water per day. 9% drank 7 to 9 servings, 37% drank 4 to 6 servings, and 49% drank 1 to 3 servings of water per day. 1% of children did not drink any water. The Institute of Medicine, National Academy of Science recommends that males ages 9-18 years old drink between 10-14 (cups/servings) and females ages 9-18 years old drink between 9-10 (cups/servings) of total water per day. (Source: The Institute of Medicine, National Academy)

- The 2015 YRBS reported 4% of high school youth in the U.S. did not drink water in the past 7 days.
**Child Consumption (Grades Pre-K through high school), continued**

- Wood County parents reported their school-age child consumed the following sources of calcium: milk (87%), yogurt (67%), calcium fortified juice (14%), lactose free milk (4%), calcium supplements (2%), other dairy products (50%), and other calcium sources (16%).

- Just over two-thirds (69%) of parents reported their school-age child drank milk, lactose free milk, calcium fortified juice, or other calcium sources at least once per day in the past week.

- The 2013 YRBS reported 18% of high school youth in Ohio did not drink milk in the past 7 days and the 2015 YRBS reported 22% for U.S. high school youth.

- Eleven percent (11%) of Wood County school-age children drank soda pop (not diet), punch, Kool-Aid, juice, sports drinks, energy drinks or other fruit-flavored drinks at least once per day in the past week. 37% of children did not drink any soda pop or fruit flavored beverages in the past week.

**Healthy School Environment**

*The following information was reported by Wood County parents of school age children from Pre-K through high school.*

- Wood County parents reported their child’s school participated in the following fundraising sales: cookie dough (33%), pizza kits (27%), magazines (24%), candy bars (19%), discount cards (16%), popcorn (10%), doughnuts (1%), jewelry (1%), and other (11%). No Wood County parent reported their child’s school participated in personal beauty or household storage sales. 1% reported their child was homeschooled.

- Wood County parents reported their child’s school promoted nutrition and physical activity through the following ways: physical education (72%), safe playground equipment (55%), bringing water bottles to school (51%), healthy cafeteria food choices (35%), healthy eating habits education (28%), after-school program (24%), salad bar in the cafeteria (14%), Safe Routes to School (13%), allow breakfast in the classroom (11%), school garden (11%), backpack program (6%), summer food program (2%), and Farm-to-School program (1%). 4% of parents reported their child’s school did not have a cafeteria.

- Wood County parents would support the following community improvement initiatives for their child’s school: increased physical education/recess time (68%), Farm-to-School program (58%), more nutrition education in the classroom (55%), healthier fundraising sales (44%), healthier vending machine items (44%), more playground equipment (39%), after-school program (34%), and Safe Routes to School program (28%).

**Cooking up Change**

- Launched in 2007, *Cooking up Change* is a dynamic culinary competition that challenges high school students in cities across the nation to create healthy, appealing school meals.

- 20 cities have hosted Cooking up Change competitions.

- 1,800+ student chefs have participated.

- 8,200,000+ student-designed meals have been served in school cafeterias across the country.

- The program helps students build valuable professional & team work skills.

(Source: Healthy Schools Campaign)
The following bar graph compares Wood County school fundraisers by type of items sold.

### Wood County School Fundraisers

<table>
<thead>
<tr>
<th>Item</th>
<th>Healthy</th>
<th>Unhealthy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jewelry</td>
<td>1%</td>
<td></td>
</tr>
<tr>
<td>Discount Cards</td>
<td>16%</td>
<td></td>
</tr>
<tr>
<td>Magazines</td>
<td>24%</td>
<td></td>
</tr>
<tr>
<td>Doughnuts</td>
<td>1%</td>
<td></td>
</tr>
<tr>
<td>Popcorn</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Candy Bars</td>
<td>19%</td>
<td></td>
</tr>
<tr>
<td>Pizza Kits</td>
<td>27%</td>
<td></td>
</tr>
<tr>
<td>Cookie Dough</td>
<td>33%</td>
<td></td>
</tr>
</tbody>
</table>
The Whole School, Whole Community, Whole Child (WSCC) model is an expansion and update of the Coordinated School Health (CSH) approach. The WSCC model focuses its attention on the child, emphasizes a school-wide approach, and acknowledges learning, health, and the school as being a part and reflection of the local community. Research shows that the health of students is linked to their academic achievement.

(Source: CDC, Adolescent and School Health)
New Healthy Snacking Standards Established by the United States Department of Agriculture (USDA)

The Healthy, Hunger-Free Kids Act of 2010 requires USDA to establish nutrition standards for all foods sold in schools—beyond the federally-supported meals programs. This new rule carefully balances science-based nutrition guidelines with practical and flexible solutions to promote healthier eating on campus. The rule draws on recommendations from the Institute of Medicine, existing voluntary standards already implemented by thousands of schools around the country, and healthy food and beverage offerings already available in the marketplace.

Before the New Standards
- Chocolate Sandwich Cookies (6 medium): 250 Total Calories
- Fruit Flavored Candies (2.2 oz. pkg.): 240 Total Calories
- Donut (1 large): 242 Total Calories
- Chocolate Bar (10 bar-1.6 oz.): 235 Total Calories
- Regular Cola (12 oz.): 136 Total Calories

- Empty Calories: 182

After the New Standards
- Peanuts (1 oz.): 170 Total Calories
- Light Popcorn (Snack Bag): 161 Total Calories
- Low-Fat Tortilla Chips (1 oz.): 118 Total Calories
- Granola Bar (3 packs, fruit, nuts): 95 Total Calories
- Fruit Cup (w/100% Juice) (Snack cup, 4 oz.): 68 Total Calories
- No-Calorie Flavored Water (12 fl. oz.): 0 Total Calories

- Empty Calories: 0

Calories from food components such as added sugars and solid fats that provide little nutritional value. Empty calories are part of total calories.

(Source: United States Department of Agriculture, USDA)
Households Receiving SNAP-Benefits, Percent by ZCTA, ACS 2011-2015

(Source: US Census Bureau, American Community Survey: 2010-14, as compiled by Community Commons)
Key Findings

The 2017 health assessment identified that 28% of Wood County adults engaged in some type of physical activity or exercise for at least 30 minutes on 5 or more days per week.

Adult Physical Activity

- In Wood County, 61% of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. More than one-quarter (28%) of adults exercised on 5 or more days per week. One-tenth (10%) of adults did not participating in any physical activity in the past week, including 2% who were unable to exercise.

- Wood County adults spent the most time doing the following physical activities in the past year: walking (45%), running/jogging (10%), exercise machines (9%), group exercise classes (5%), exercise videos (5%), strength training (5%), occupational exercise (3%), cycling (2%), swimming (2%), active video games (<1%), and other activities (9%). 3% of adults did not exercise at all, including 1% who were unable to do so.

- Reasons for not exercising included: time (47%), too tired (31%), weather (28%), laziness (26%), pain or discomfort (14%), could not afford a gym membership (13%), no child care (9%), no exercise partner (9%), did not know what activities to do (4%), no gym available (3%), physical impairments or challenges (2%), no walking, biking trails or parks (2%), poorly maintained/no sidewalks (1%), doctor advised them not to exercise (1%), and no transportation (<1%).

- Wood County employed adults spent the most time doing the following physical activities while at work: sitting (56%), walking (10%), heavy labor/physical work (1%), and activities varied (22%). 5% of Wood County adults reported they were unemployed or did not work and 5% reported they were retired.

- Wood County adults spent an average of 2.0 hours watching TV, 1.5 hours on their cell phone, 1.3 hours on the computer (outside of work), and 1.1 hours playing video games on an average day of the week.

Physical Activity Guidelines for Adults

Aerobic Activities

- 2 hours and 30 minutes (150 minutes) each week of moderate-intense activity
- 1 hour and 15 minutes (75 minutes) each week of vigorous-intense activity

Muscle Strengthening Activities

- All major muscle groups should be worked out 2 or more days per week. This includes legs, hips, back, abdomen, chest, shoulders, and arms.
- Exercises for each muscle group should be repeated 8 to 12 times per set.

(Source: Centers for Disease Control & Prevention, "Physical Activities Guidelines for Americans," fact sheet)
Access to Exercise Opportunities measures the percentage of individuals in a county who live reasonably close to a location for physical activity. Locations for physical activity are defined as parks or recreational facilities. Individuals who reside within three miles of a recreational facility are considered to have adequate access for opportunities for physical activity.

Access to Exercise Opportunities

55%
Of Wood County adults had access to exercise opportunities

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<tbody>
<tr>
<td>Physically active for at least 30 minutes on 3 or more days per week.</td>
<td>60%</td>
<td>66%</td>
<td>61%</td>
</tr>
</tbody>
</table>

(Source: ArcGIS Business Analyst, as compiled by County Health Rankings 2014)
Physical Inactivity, Adults Age 20+, Percent by County, CDC NCCDPHP 2013

Map Legend
No Leisure-Time Physical Activity, Adults Age 20+, Percent by County, CDC NCCDPHP 2013
- Over 25.0%
- 26.1 - 25.0%
- 23.1 - 26.0%
- Under 23.1%
- No Data or Data Suppressed

(Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Diabetes Atlas: 2013, as compiled by Community Commons)
Physical Activity | CHILD

Key Findings

The 2017 health assessment identified that more than three-fourths (76%) of Wood County school-aged children were physically active for at least 60 minutes on 3 or more days per week.

Child Physical Activity (Ages 0-5)

The following information was reported by Wood County parents of children 0-5 years old.

- Wood County children ages 0-5 spent an average of 1.4 hours watching TV, 1.0 hour on the computer/tablet/cellphone and 1.0 hours playing video games on an average day of the week.
- The 2011/2012 NSCH reported 9% of children ages 1-5 years in Ohio spent 1 to 3 hours per day on the computer, cell phone, or other electronic devices.

Child Physical Activity (Grades Pre-K through high school)

The following information was reported by Wood County parents of school age children from Pre-K through high school.

- More than three-fourths (76%) of parents reported their child was physically active for at least 60 minutes on 3 or more days per week. 42% reported their child had done so on 5 or more days and 12% said their child was physically active for at least 60 minutes every day per week. 4% reported no physical activity.
- Wood County school-age children spent an average of 1.9 hours on the cell phone, 1.6 hours watching TV, 1.4 hours playing video games and 1.3 hours on the computer (outside of school) on an average day of the week.
- Nearly one-fifth (16%) of Wood County school-age children spent 3 or more hours watching TV on an average day.
- The 2013 YRBS reported 28% of high school youth in Ohio spent 3 or more hours watching TV on an average day and the 2015 YRBS reported 25% for U.S. high school youth.
- When asked how far parents live from their child’s school, 40% of Wood County parents reported more than 2 miles, 18% said 1 to 2 miles, 10% said ½ mile to 1 mile, 16% said ¼ mile to ½ mile and 17% said less than ¼ mile.

Physical Activity Guidelines for Children and Adolescents

Children and adolescents should do 1 hour or more of physical activity each day. Within that 1 hour of physical activity, the following should be included:

- **Muscle-strengthening** on at least 3 days a week. They should be moderate to high levels of efforts and work the major muscle groups of the body.
- **Bone-strengthening** on at least 3 days of the week.
- Physical activities should be appropriate for their age, enjoyable, and varied.

(Source: Alliance for Healthier Generation)
Safe Routes to School

Safe Routes to School (SRTS) programs are sustained efforts by parents, schools, community leaders and local, state, and federal governments to improve the health and well-being of children by enabling and encouraging them to walk and bicycle to school.

SRTS projects make it safer for more children to walk and bicycle to school, which will help address the obesity crisis among children by creating increases in physical activity.

For more information, go to:
http://www.saferoutespartnership.org/healthy-communities/101/getting-started

Ways to Start a Safe Route to School in Your Community

1. Plan an Event
   - Start small and organize and event with a principal or teacher on board, and try hosting a Walk to School Day event.
   - Get a few families to walk together to school on a regular basis.
   - Gather stakeholders and update district policies.
   - THERE’S NO WRONG WAY TO GET STARTED!!

2. Build your task force
   - Involve a wide variety or array of representatives from your community.
   - Represent the interest of many different stakeholders from each school district to be advocates for school safety.
   - People to invite from the city/county and or county routes to engage would be:
     — Principal/Teachers
     — PTA
     — Students
     — Elected Officials
     — Engineers
     — Police
     — Health Officials

3. Create an Action Plan
   - Utilize the stakeholders to make informed decisions about the best strategies to get more student walking and biking.
   - Identify areas to be worked on for safer routes such as safety hazards and support.
   - Be armed with information and a timeline.

(Source: Safe Routes to School National Partnership, 2017)
Strategies for Recess in Schools
January 2017

Make Leadership Decisions
1. Identify and document recess policies.
2. Put documented recess policies into practice and revise as needed.
3. Develop a written recess plan.
4. Designate spaces for outdoor and indoor recess.
5. Establish weather guidelines to ensure student safety.
6. Train school staff and volunteers for recess.

Communicate and Enforce Behavioral and Safety Expectations
7. Establish and communicate behavior management strategies.
8. Teach conflict resolution skills.
9. Ensure that recess spaces and facilities meet recommended safety standards.

Create an Environment Supportive of Physical Activity During Recess
10. Provide adequate physical activity equipment.
11. Add markings to playground or physical activity areas.
12. Create physical activity zones.
13. Provide planned activities or activity cards.

Engage the School Community to Support Recess
15. Establish roles and responsibilities for supervising and facilitating recess.
16. Involve students in planning and leading recess.
17. Mobilize parents and others in the school community to support and sustain recess at school.

Gather Information on Recess
18. Track physical activity during recess.
19. Collect information on recess to show the effect on student and school outcomes.

(Source: CDC, Recess Planning in Schools)
**Built Environment I COMMUNITY**

**Key Findings**

_Nearly two-fifths (36%) of Wood County adults did not have sidewalks where they lived._

**Community Characteristics**

- Wood County adults reported they lived within 2 miles of the following: a park or green space (77%), grocery stores (57%) and recreation centers (46%).

- Ninety-four percent (94%) of adults reported their community was extremely or quite safe from crime. 5% said slightly safe. No one reported their community was not safe at all.

- Wood County adults had the following concerns for their community: drugs/alcohol (18%), heavy traffic (16%), no sidewalks accessible (14%), water quality (9%), loud noises (9%), crime (7%), bullying (5%), no place for kids to play (4%), air pollution (3%), lead issues (1%), and other (5%).

- Wood County adults traveled outside the county for the following: dine-in-restaurants (82%), parks (50%), grocery stores (44%), recreation centers (9%), gyms (5%), and other (18%).

**Roadways**

- Thirty-six percent (36%) of Wood County adults did not have sidewalks where they lived. Of those adults who did not have sidewalks, 57% lived in the country, 22% lived in town and 20% lived in the outskirts of town.

- Of those adults who had sidewalks, only 32% were connected to all streets. 54% were mostly connected, 12% had some that were connected, 2% had few streets that were connected.

- Wood County adults who had sidewalks, reported 12% were in excellent condition, 66% were in good condition, 12% were in poor condition, 9% were in fair condition and 1% did not know what condition their sidewalks were in.

- Thirty-seven percent (37%) of Wood County adults did not have bike trails in or around their community. Of those adults who did not have bike trails, 38% lived in town, 31% lived in the outskirts of town, and 31% lived in the country.

- Of those adults who had bike trails in or around their community, 97% had access to them.

- Wood County adults who had bike trails in or around their community, reported 31% were in excellent condition, 52% were in good condition, 1% were in poor condition, 2% were in fair condition, and 13% did not know what condition their bike trails were in.

- Wood County adults who had bike trails in or around their community, reported they were: were well lit (10%), not well lit (48%), and did not know (42%).

**Parks**

- Seven percent (7%) of Wood County adults did not have any parks available in or around their community. Of those adults who did not have parks, 82% lived in the country, 12% lived in the outskirts of town, and 6% lived in town.

- Of those adults who had parks available in or around their community, 63% reported there were 3 or more available. 23% had two parks available and 14% had one park available.

- Of those adults who had parks available in or around their community, 1% did not have access to them.
Parks, continued

- Wood County adults who had parks in or around their community, reported only 52% were handicapped accessible. 42% of adults did not know if their parks were handicapped accessible.

- Of those adults who had parks in or around their community, 27% were in excellent condition, 63% were in good condition, 3% were in poor condition, 5% were in fair condition, and 3% of adults did not know what condition the parks were in.

- More than one-quarter (26%) of Wood County adults, thought their parks were very safe. 66% reported their parks were quite safe, 1% said slightly safe, and <1% said not safe at all. 6% did know how safe their parks were.

- Of those adults who had parks in or around their community, 15% had visited them very often, increasing to 27% of those with school-age children. 37% visited them somewhat often, 41% not so often and 7% did not visit them at all.

Other Recreation Areas

- Just over one-fifth (21%) of Wood County adults did not have recreation centers in or around their community. Of those adults who did not have recreation centers, 41% lived in town, 38% lived in the country, and 21% lived in the outskirts of town.

- Of those adults who had recreation centers in or around their community, 31% reported there were 3 or more available. 31% had two available and 30% had one available.

- Of those adults who had recreation centers in or around their community, 12% visited them very often. 16% said somewhat often, 26% said not so often and 46% did not visit them at all. 7% did not know how many recreation centers were available.

The following graph shows the average distance Wood County adults were from the nearest grocery store, recreation centers, and parks/green space. Examples of how to interpret the information include: 14% of Wood County adults live 1 mile – 2 miles away from the nearest grocery store.

Wood County Adults Proximity to the Point of Interest

- **Parks/Green space**
  - 30% < 1/4 mile
  - 18% 1/4 mile – 1/2 mile
  - 13% 1/2 mile – 1 mile
  - 16% 1 mile – 2 miles
  - 21% > 2 miles

- **Recreation centers**
  - 6% < 1/4 mile
  - 8% 1/4 mile – 1/2 mile
  - 11% 1/2 mile – 1 mile
  - 22% 1 mile – 2 miles
  - 52% > 2 miles

- **Grocery store**
  - 6% < 1/4 mile
  - 13% 1/4 mile – 1/2 mile
  - 14% 1/2 mile – 1 mile
  - 23% 1 mile – 2 miles
  - 43% > 2 miles

*Percentages may not equal to 100% due to non-answered responses.*
### Workers Traveling to Work by Walking/Biking, 2011-2015

<table>
<thead>
<tr>
<th>Adult Comparisons</th>
<th>Bowling Green Zip code 43402 2017</th>
<th>Perrysburg Zip code 43551 2017</th>
<th>Wood County 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distance to the recreation center was more than 2 miles from home</td>
<td>31%</td>
<td>30%</td>
<td>52%</td>
</tr>
<tr>
<td>No parks in or around their community</td>
<td>2%</td>
<td>0%</td>
<td>7%</td>
</tr>
<tr>
<td>No recreation centers in or around their community</td>
<td>1%</td>
<td>2%</td>
<td>21%</td>
</tr>
</tbody>
</table>

(Source: US Census Bureau, American Community Survey: 2011-15, as compiled by Community Commons)
Key Findings

Fifty-seven percent (57%) of Wood County key leaders were concerned about drugs/alcohol in their community/county.

Community Characteristics

The following information was reported by Wood County key leaders from multiple sectors which included: medical professionals, public health workers, civic and community leaders, local politicians, etc. See appendix IV for further information.

- Most (99%) of Wood County key leaders reported their community/county was extremely or quite safe from crime. 1% said slightly safe. No one reported their neighborhood was not safe at all.
- Wood County key leaders had the following concerns for their community/county: drugs/alcohol (57%), bullying (19%), crime (18%), water quality (15%), heavy traffic (15%), no sidewalks accessible (11%), air pollutions (5%), loud noises (3%), lead issues (2%), gangs (1%), no place for kids to play (1%), and other (6%).

Roadways

- When asked if there were sidewalks available in their community/county, 57% of Wood County key leaders reported there were many available, 35% said some, 5% said few, and 3% said none were available.
- Key leaders reported sidewalks in their community/county were in: excellent condition (10%), good condition (68%), poor condition (6%), and fair condition (9%). 3% of key leaders did not know the conditions of their sidewalks.
- Sixteen percent (16%) of Wood County key leaders indicated they did not have bike trails in their community/county.
- Key leaders reported bike trails in their community/county were in: excellent condition (21%), good condition (47%), poor condition (1%), and fair condition (2%) and 13% of key leaders did not know the condition of their bike trails.
- Key leaders reported bike trails in their community/county were: well lit (8%), not well lit (32%), and 45% did not know.

Parks

- One percent (1%) of Wood County key leaders reported they did not have parks in their community/county.
- Key leaders reported the following availability of parks: 3 or more (80%), two (12%) and one (4%). 3% of key leaders did not know how many parks were available.
- Key leaders reported parks were in: excellent condition (45%), good condition (51%), poor condition (1%), fair condition (1%), and 2% of key leaders did not know the conditions of their parks.
- Key leaders reported 70% of parks were handicapped accessible.
- Key leaders reported 90% of parks were easily accessible by walking or biking.
- Wood County key leaders considered the parks to be: very safe (31%), quite safe (62%), and slightly safe (2%). No one reported that they considered the parks to be not safe at all. 5% of key leaders did not know the safety of their parks.
Other Recreation Areas

- Eighty-three percent (83%) of Wood County key leaders reported there were recreation centers available in their community/county.

- Key leaders reported the following availability of recreation centers: 3 or more (34%), two (18%), and one (26%). 9% did not know how many were available.

<table>
<thead>
<tr>
<th>Built Environment Comparisons</th>
<th>Community Response</th>
<th>Key Leader Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community safety (extremely or quite safe)</td>
<td>94%</td>
<td>99%</td>
</tr>
<tr>
<td>Park Safety (very or quite safe)</td>
<td>92%</td>
<td>93%</td>
</tr>
<tr>
<td>Condition of parks (excellent or good)</td>
<td>90%</td>
<td>96%</td>
</tr>
<tr>
<td>Condition of bike trails (excellent or good)</td>
<td>83%</td>
<td>68%</td>
</tr>
<tr>
<td>Condition of sidewalks (excellent or good)</td>
<td>78%</td>
<td>78%</td>
</tr>
<tr>
<td>Park availability (3 or more)</td>
<td>63%</td>
<td>80%</td>
</tr>
<tr>
<td>Recreation availability (3 or more)</td>
<td>31%</td>
<td>34%</td>
</tr>
</tbody>
</table>

Health Benefits to Having Parks and Trails

- Having access to places for physical activity like parks and trails motivates and encourages the community to engage in exercise more often.

- The closer someone lives to a park, the more likely they are to walk or bike to those places and use the resource for exercise.

- Only a small number of people live within half a mile of a park in the United States.

- People are also more likely to walk when they feel protected from traffic and safe crime hazards.

- The exercise you get from walking and biking to parks can have both environmental and personal health benefits. It can:
  - Control your weight
  - Reduce your risk of cardiovascular disease
  - Reduce your risk for type 2 diabetes
  - Reduce risk for some cancers
  - Improve mental health and mood
  - Improve your ability to do daily activities
  - May prevent falls, if you’re an older adult
  - Increase your chances of living longer

(Source: CDC 2014, Health Places: Parks Trails and Health, updated 6/15/2017)
Population with Park Access (Within ½ Mile), 2013

(Source: ESRI Map Gallery and OpenStreetMap, 2013, as compiled by Community Commons)
Safe Routes to Parks

Walkers are approximately 3x more likely to meet physical activity recommendations than non-walkers.

Physical activity can reduce risk of diseases such as:
- depression
- coronary heart disease
- osteoporosis
- obesity
- as well as stroke, Type 2 Diabetes and some cancers.

Walking is the most popular aerobic activity

Parks Promote Walking

People living within a 10-minute walking distance of a park have higher levels of physical activity and lower rates of obesity.

Group walking in nature can significantly lower depression, stress and enhance mental well-being.

Five Essential Elements to Safe Routes to Parks

When people can safely walk to parks, it provides more opportunity for physical activity and greater access to open space.

Safety
- Safety elements (e.g., lighting, traffic) must be included for pedestrian routes.

Convenience
- Walking routes to parks should be no longer than a 10-minute walk.

Access & Design
- Proper design, signage, ADA compliance, and multiple entry points benefit all users.

Conditions
- Sidewalks and trails should be inviting, comfortable, and safe for all users.

The Park
- Facilities, amenities and programs at the park should reflect the needs of the community.

(Source: National Recreation and Parks Association, 2016)
Key Findings

Two-fifths (40%) of Wood County adults had access to health risk assessments through their employer or spouse’s employer.

Worksite Wellness

- Wood County adults had access to the following programs through their employer or spouse’s employer: health risk assessment (40%); free/discounted gym membership (33%); lower insurance premiums for participating in a wellness program (31%); free/discounted smoking cessation program (22%); free/discounted weight loss program (18%); gift cards for participating in wellness program (15%); on-site health screenings (14%); lower insurance premiums for change in health status (11%); on-site health education classes (7%); gift cards/cash for positive changes in health status (5%); on-site fitness facility (5%); healthier food options in vending machines or cafeteria (4%); and other (5%). 17% did not have access to any wellness program.

- Wood County adult employers promoted work-site wellness through the following: encourage walking during breaks (21%); offer sugar-free beverages (12%); provide healthy food choices in the cafeteria (8%); provide healthy food options in vending machines (7%); and 11% did not know. 54% of Wood County adults employers did not do any of these to promote work-site wellness.

Food Retail Environment

- When asked what type of grocery stores were available in their community Wood County adults reported the following: convenience stores (85%), large grocery chains (83%), Farmer’s Markets (66%), and locally-owned food stores (52%).

- When asked what type of restaurants were available in their community, Wood County adults reported the following: local diners (87%), fast-food restaurants (83%), dine-in/family style restaurants (77%), bakery/café shops (76%), and food trucks (18%).

Community Wellness

- Wood County adults reported that faith-based organizations in their community offered the following: food pantries (68%), community meals (49%), youth sports programs (33%), indoor/outdoor playgrounds (19%), wellness support groups/programs (13%), health screenings (9%), free walking/gym time (5%), nutrition/physical activity education programs (4%), and cooking demonstrations (3%).

- Adults reported that their local hospital(s) and health center(s) offered the following services: health risk assessments (39%), nutrition counseling (37%), weight loss and weight management counseling (36%), health plan incentives for participating in a wellness program (9%), and fitness facility (7%).

- Wood County adults reported their local school districts offered the following at their schools: an outdoor playground accessible to the public (32%), an outdoor/indoor track accessible to the public (28%), school garden (6%), food pantries (4%), health screenings (2%), and healthy cooking demonstrations (1%). No one reported their local schools offered produce markets.
Key Findings

Forty-four percent (44%) of Wood County key leaders reported employers offered health risk assessments to their employees.

Worksite Wellness

The following information was reported by Wood County key leaders from multiple sectors which included: medical professionals, public health workers, civic and community leaders, local politicians, etc. See appendix IV for further information.

- Wood County key leaders reported employers offered the following to their employees: health risk assessment (44%), free/discounted gym membership (42%), free/discounted smoking cessation program (34%), lower insurance premiums for participating in wellness programs (27%), free/discounted weight loss program (26%), encourage walking during lunch breaks (20%), on-site health screenings (18%), gifts cards/cash for participating in wellness programs (16%), offer sugar-free beverages (16%), on-site health education classes (12%), healthier food options in vending machines/cafeteria (12%), healthy food policy (6%), lower insurance premiums for positive changes in health status (4%), on-site fitness facility (4%), and gift cards/cash for positive changes in health status (3%).

- Wood County key leaders reported employers promoted work-site wellness through the following ways: offer sugar-free beverages (46%), encourage walking during breaks (24%), provide healthy food choices in the cafeteria (16%), and provide healthy food options in vending machines (13%).

- When asked if employers in their community/county offered wellness opportunities, 53% of key leaders said few, 4% said most and 3% said none.

Community Wellness

- When asked what type of grocery stores were available in their community/county, key leaders reported the following: convenience stores (88%), large grocery store chains (82%), Farmer’s Markets (65%), locally-owned food stores (49%), and other (2%).

- When asked what type of restaurants were available in their community/county, key leaders reported the following: local diners (92%), fast-food restaurants (87%), dine-in/family style chain restaurants (83%), bakery/café shops (79%), food trucks (15%), and other (3%).

- Wood County key leaders reported that faith-based organizations in their community/county offered the following: food pantries (80%), community meals (57%), youth sports programs (40%), indoor/outdoor playgrounds (28%), wellness support groups/programs (22%), health screenings (15%), nutrition/physical activity education programs (8%), free walking/gym time (6%), and cooking demonstrations (2%).

<table>
<thead>
<tr>
<th>Worksite Wellness</th>
<th>Wood County 2016</th>
<th>Wood County 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offered fitness center memberships</td>
<td>44%</td>
<td>42%</td>
</tr>
<tr>
<td>Provided healthy foods in vending machines</td>
<td>33%</td>
<td>12%</td>
</tr>
<tr>
<td>Healthy food choices available in the cafeteria</td>
<td>29%</td>
<td>16%</td>
</tr>
</tbody>
</table>
The following bar graphs compares Wood County community key leaders and the community responses to their perceptions about their community.

**Your Community is a Good Place to Live and/or Raise Children**

- **Key Leaders**
  - Strongly Agree: 53%
  - Agree: 45%
  - Neutral: 2%
  - Disagree: 7%
  - Strongly Disagree: 1%

- **Community**
  - Strongly Agree: 49%
  - Agree: 43%
  - Neutral: 7%
  - Disagree: 1%
  - Strongly Disagree: 1%

**Your Community Has a Variety of Resources for Promoting a Healthy Lifestyle**

- **Key Leaders**
  - Strongly Agree: 32%
  - Agree: 47%
  - Neutral: 16%
  - Disagree: 5%

- **Community**
  - Strongly Agree: 22%
  - Agree: 43%
  - Neutral: 28%
  - Disagree: 6%
  - Strongly Disagree: 1%
Community Improvement Initiatives

<table>
<thead>
<tr>
<th>Which community improvement initiatives would you support?</th>
<th>Community Response</th>
<th>Key Leader Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>More locally-grown foods/Farmer’s Markets</td>
<td>63%</td>
<td>59%</td>
</tr>
<tr>
<td>Bike/walking trail accessibility</td>
<td>53%</td>
<td>48%</td>
</tr>
<tr>
<td>Local agencies partnering with grocery stores to provide low cost healthy foods</td>
<td>47%</td>
<td>37%</td>
</tr>
<tr>
<td>Community gardens</td>
<td>45%</td>
<td>39%</td>
</tr>
<tr>
<td>New and/or updated parks</td>
<td>41%</td>
<td>35%</td>
</tr>
<tr>
<td>Neighborhood safety</td>
<td>38%</td>
<td>34%</td>
</tr>
<tr>
<td>Sidewalk accessibility</td>
<td>38%</td>
<td>37%</td>
</tr>
<tr>
<td>New and/or updated recreation centers</td>
<td>35%</td>
<td>26%</td>
</tr>
<tr>
<td>Safe roadways</td>
<td>34%</td>
<td>40%</td>
</tr>
<tr>
<td>School-based initiatives (i.e. Safe Routes to School, nutrition education, etc.)</td>
<td>N/A</td>
<td>49%</td>
</tr>
</tbody>
</table>

Survey Respondents Additional Comments

The following qualitative data came from community members who took the survey.

Community Responses

“Need programs designed around the importance of the family. Strong family’s make strong communities.”

“It would be nice if builders would stop putting in garden restrictions for new home developments. I want a garden but my HOA prevents it.”

“More parks are always a nice addition.”

“The libraries in our areas are excellent and should be commended.”

“Focus on school lunches, including reducing waste, increasing recycling and composting.”

“I live in a community that is small. I need to drive 10+ miles for anything except parks.”

“Our country roads are too narrow for increased traffic loads. Also speed limits need to be posted and enforced.”

“The aquatic center at city park needs improvements to facility and programs geared towards older children who would still like to go to the city pool, but feel “out aged” and relegated to a small area in the diving pool.”

“A lot of people can’t afford a membership to the recreation center or local gyms, I am one of those people.”

“Need a safe streets project - BG is not safe for kids to ride to school. Downtown does not support bikes. No pool at the Community Center! Not enough hours of availability at Community Center.”

“West Indiana road does not have a bike or walk access into town. Some parts of the sidewalk have tree branches growing over the sidewalk.”

“Our neighborhood, Country Meadows, Lake Township, does not have street lights. To walk in the evening is very dangerous with how dark it is and sidewalks are very uneven.”

“Really wish we could get the discount for the pool and the community center offered to WIC participants.”

“There are no produce stores and produce in grocery stores are low quality and limited in selection.”

“Sidewalk quality is a problem. Many trip hazards exist where sidewalks are uneven or cracked. I wish Pemberville would contract with a cement company to provide/repair/replace sidewalks. I believe if they organized this, it would provide people with an affordable option to replace problem areas. I personally called to replace two squares and was told it was cost prohibitive because of how little I needed done, would not even quote a price.”

“Would like to have access to indoor walking during winter months without a gym membership fee. The mall is not accessible.”

“More safe crosswalks are needed by schools and crossing main roads on the west side of town. Community needs to do global long-term planning for bike infrastructure. Not enough bike lanes.”

“An affordable dog park would be helpful and an encouragement to getting outside.”

“I would like to see more running/jogging trails of distances greater than 2 miles at local parks.”
Survey Respondents Additional Comments, continued

The following qualitative data came from key leaders who took the survey.

<table>
<thead>
<tr>
<th>Key Leaders Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Need more family based recreation areas for families with children of multiple ages. Most recreational area programs cost too much for young children.”</td>
</tr>
<tr>
<td>“Target school lunches. Eliminate soda vending machines. Increase taxes on fast food/high-calorie food to subsidize vegetables/fruit.”</td>
</tr>
<tr>
<td>“Due to rapid population increase, the roads have severe traffic problems. There are many rural roads that are too small and narrow. The 50mph speed limit is not posted (it is assumed). In other words; too many cars going too fast on narrow country roads. It is getting worse!”</td>
</tr>
<tr>
<td>“Would really like to see bike paths in northern Wood County in the townships. I do realize that the width and depth of the ditches can make this a challenge though.”</td>
</tr>
<tr>
<td>“The US Bicycle Route System which is being assisted by TMACOG and ODOT will be going through our Village of Walbridge. We are excited by this and will promote and look at improving our Village to facilitate safe passage.”</td>
</tr>
<tr>
<td>“Need more emphasis on recycling and energy reduction/alternative energy.”</td>
</tr>
<tr>
<td>“Need more biking options &amp; support by city council &amp; Wood County Park District! While the BG Community Center is a nice facility, it is not accessible to bikers/kids without cars. The community needs more sponsored “5K”-type activities.”</td>
</tr>
</tbody>
</table>
# Appendix I INFORMATION SOURCES

<table>
<thead>
<tr>
<th>Source</th>
<th>Data Used</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centers for Disease Control and Prevention, Division of Adolescent &amp; School Health</td>
<td>• Whole School, Whole Community, Whole Child Model</td>
<td><a href="https://www.cdc.gov/healthyyouth/factsheets.htm">https://www.cdc.gov/healthyyouth/factsheets.htm</a></td>
</tr>
<tr>
<td>Centers for Disease Control and Prevention, Division of Healthy Schools</td>
<td>• Strategies for Recess in Schools</td>
<td><a href="https://www.cdc.gov/healthyschools/physicalactivity/pdf/2016_12_16_SchoolRecessStrategies_508.pdf">https://www.cdc.gov/healthyschools/physicalactivity/pdf/2016_12_16_SchoolRecessStrategies_508.pdf</a></td>
</tr>
<tr>
<td>Centers for Disease Control and Prevention, Division of Healthy Places</td>
<td>• Parks, Trails, and Health</td>
<td><a href="https://www.cdc.gov/healthplaces/healthtopics/parks.htm">https://www.cdc.gov/healthplaces/healthtopics/parks.htm</a></td>
</tr>
<tr>
<td>Centers for Disease Control and Prevention, Division of Physical Activity</td>
<td>• Physical Activity Guidelines for Adults</td>
<td><a href="https://www.cdc.gov/physicalactivity/index.htm">https://www.cdc.gov/physicalactivity/index.htm</a></td>
</tr>
<tr>
<td>County Health Rankings</td>
<td>• Food Environment Index</td>
<td><a href="http://www.countyhealthrankings.org/app/ohio/2017/measure/factors/132/map">http://www.countyhealthrankings.org/app/ohio/2017/measure/factors/132/map</a></td>
</tr>
<tr>
<td>Choose My Plate.Gov</td>
<td>• Fruit and Nutrition Facts</td>
<td><a href="https://choosemyplate-prod.azureedge.net/focus-on-fruits">https://choosemyplate-prod.azureedge.net/focus-on-fruits</a></td>
</tr>
<tr>
<td>Community Commons</td>
<td>• Soda Expenditures</td>
<td><a href="http://www.communitycommons.org/">www.communitycommons.org/</a></td>
</tr>
<tr>
<td>Healthy Schools Campaign</td>
<td>• Cooking Up Change</td>
<td><a href="https://healthyschoolscampaign.org/programsf/national/cooking-up-change-national/">https://healthyschoolscampaign.org/programsf/national/cooking-up-change-national/</a></td>
</tr>
<tr>
<td>National Recreation and Parks Association</td>
<td>• Safe Routes to Parks</td>
<td><a href="https://www.nrpa.org/uploadedFiles/nrpa.org/Grants_and_Partners/Health_and_Livability/Safe-Routes-to-Parks-Infographic.pdf">https://www.nrpa.org/uploadedFiles/nrpa.org/Grants_and_Partners/Health_and_Livability/Safe-Routes-to-Parks-Infographic.pdf</a></td>
</tr>
<tr>
<td>The Institute of Medicine, National Academy of Sciences</td>
<td>• Dietary Water Intake</td>
<td><a href="http://national-academies.org/">http://national-academies.org/</a></td>
</tr>
</tbody>
</table>
# Appendix II  ACRONYMS AND TERMS

<table>
<thead>
<tr>
<th>ACRONYM</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACS</td>
<td>American Community Survey</td>
</tr>
<tr>
<td>BMI</td>
<td>Body Mass Index is defined as the contrasting measurement/relationship of weight to height.</td>
</tr>
<tr>
<td>BRFSS</td>
<td>Behavior Risk Factor Surveillance System, an adult survey conducted by the CDC.</td>
</tr>
<tr>
<td>CDC</td>
<td>Centers for Disease Control and Prevention.</td>
</tr>
<tr>
<td>ESR</td>
<td>ESRI’s ArcGIS map gallery provides a platform for viewing and downloading various public-use datasets.</td>
</tr>
<tr>
<td>FARA</td>
<td>Food Access Research Atlas presents an overview of food access indicators for populations using different measures of supermarket accessibility.</td>
</tr>
<tr>
<td>WCHP</td>
<td>Wood County Health Partners</td>
</tr>
<tr>
<td>HCNO</td>
<td>Hospital Council of Northwest Ohio</td>
</tr>
<tr>
<td>NCCDPHP</td>
<td>Centers for Disease Control and Prevention’s National Center for Chronic Disease Prevention and Health Promotion</td>
</tr>
<tr>
<td>NCES CCD</td>
<td>National Center for Education Statistics - Common Core of Data</td>
</tr>
<tr>
<td>NSCH</td>
<td>National Survey of Children’s Health</td>
</tr>
<tr>
<td>N/A</td>
<td>Data is not available.</td>
</tr>
<tr>
<td>ODH</td>
<td>Ohio Department of Health</td>
</tr>
<tr>
<td>OSM</td>
<td>OpenStreetMap is a collaborative project to create a free editable map of the world.</td>
</tr>
<tr>
<td>SHA</td>
<td>State Health Assessment</td>
</tr>
<tr>
<td>SHIP</td>
<td>State Health Improvement Plan</td>
</tr>
<tr>
<td>SNAP</td>
<td>Supplemental Nutrition Assistance Program; SNAP participation is a measure of households and not of total population; if any person in the household received food stamps/SNAP, the household is included in the count</td>
</tr>
<tr>
<td>USDA</td>
<td>United States Department of Agriculture</td>
</tr>
<tr>
<td>YRBS</td>
<td>Youth Risk Behavior Survey, a youth survey conducted by the CDC</td>
</tr>
<tr>
<td>ZCTA</td>
<td>ZIP Code Tabulation Areas, generalized areal representations of United States Postal Service (USPS) ZIP Code service areas.</td>
</tr>
<tr>
<td>Variable</td>
<td>2017 Community Survey Sample</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
</tr>
<tr>
<td>20 years or younger</td>
<td>0.4%</td>
</tr>
<tr>
<td>21-29</td>
<td>12.7%</td>
</tr>
<tr>
<td>30-39</td>
<td>25.4%</td>
</tr>
<tr>
<td>40-49</td>
<td>22.5%</td>
</tr>
<tr>
<td>50-59</td>
<td>23.2%</td>
</tr>
<tr>
<td>60 plus</td>
<td>15.5%</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>76.3%</td>
</tr>
<tr>
<td>Male</td>
<td>22.8%</td>
</tr>
<tr>
<td>Transgender</td>
<td>0.6%</td>
</tr>
<tr>
<td><strong>Race/Ethnicity</strong></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>97.1%</td>
</tr>
<tr>
<td>Hispanic Origin (may be of any race)</td>
<td>1.9%</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>0.4%</td>
</tr>
<tr>
<td>Asian</td>
<td>0.4%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>0.0%</td>
</tr>
<tr>
<td>Native Hawaiian/other Pacific Islander</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other</td>
<td>1.3%</td>
</tr>
<tr>
<td><strong>Marital Status</strong>†</td>
<td></td>
</tr>
<tr>
<td>Married Couple</td>
<td>68.4%</td>
</tr>
<tr>
<td>Never been married/member of an unmarried couple</td>
<td>17.9%</td>
</tr>
<tr>
<td>Divorced/Separated</td>
<td>9.6%</td>
</tr>
<tr>
<td>Widowed</td>
<td>3.9%</td>
</tr>
<tr>
<td><strong>Living Area</strong></td>
<td></td>
</tr>
<tr>
<td>In town</td>
<td>57.8%</td>
</tr>
<tr>
<td>Out in the country</td>
<td>23.9%</td>
</tr>
<tr>
<td>The outskirts of town</td>
<td>17.1%</td>
</tr>
<tr>
<td><strong>Income (Families)</strong></td>
<td></td>
</tr>
<tr>
<td>$14,999 and less</td>
<td>3.6%</td>
</tr>
<tr>
<td>$15,000 to $24,999</td>
<td>3.6%</td>
</tr>
<tr>
<td>$25,000 to $49,999</td>
<td>18.04%</td>
</tr>
<tr>
<td>$50,000 to $74,999</td>
<td>19.8%</td>
</tr>
<tr>
<td>$75,000 or more</td>
<td>45.9%</td>
</tr>
</tbody>
</table>

*The percent’s reported are the actual percent within each category who responded to the survey. Percent’s may not add to 100% due to missing data (non-responses).
## Appendix III
COMMUNITY SAMPLE DEMOGRAPHIC PROFILE

<table>
<thead>
<tr>
<th>Variable</th>
<th>2017 Community Survey Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zip Codes</td>
<td></td>
</tr>
<tr>
<td>43402</td>
<td>41.9%</td>
</tr>
<tr>
<td>43551</td>
<td>16.8%</td>
</tr>
<tr>
<td>43450</td>
<td>3.5%</td>
</tr>
<tr>
<td>43466</td>
<td>3.5%</td>
</tr>
<tr>
<td>45872</td>
<td>2.8%</td>
</tr>
<tr>
<td>43569</td>
<td>2.8%</td>
</tr>
<tr>
<td>43451</td>
<td>2.8%</td>
</tr>
<tr>
<td>43522</td>
<td>2.3%</td>
</tr>
<tr>
<td>43511</td>
<td>2.1%</td>
</tr>
<tr>
<td>43462</td>
<td>2.1%</td>
</tr>
<tr>
<td>43457</td>
<td>1.8%</td>
</tr>
<tr>
<td>43619</td>
<td>1.4%</td>
</tr>
<tr>
<td>43413</td>
<td>1.4%</td>
</tr>
<tr>
<td>43525</td>
<td>1.4%</td>
</tr>
<tr>
<td>43465</td>
<td>1.4%</td>
</tr>
<tr>
<td>43406</td>
<td>1.2%</td>
</tr>
<tr>
<td>44830</td>
<td>1.2%</td>
</tr>
<tr>
<td>44817</td>
<td>1.2%</td>
</tr>
<tr>
<td>43460</td>
<td>0.9%</td>
</tr>
<tr>
<td>43443</td>
<td>0.7%</td>
</tr>
<tr>
<td>43414</td>
<td>0.5%</td>
</tr>
<tr>
<td>43529</td>
<td>0.5%</td>
</tr>
<tr>
<td>43565</td>
<td>0.5%</td>
</tr>
<tr>
<td>43447</td>
<td>0.2%</td>
</tr>
<tr>
<td>43437</td>
<td>0.2%</td>
</tr>
<tr>
<td>43463</td>
<td>0.2%</td>
</tr>
<tr>
<td>43552</td>
<td>0.2%</td>
</tr>
<tr>
<td>43516</td>
<td>0.2%</td>
</tr>
<tr>
<td>Other</td>
<td>4.6%</td>
</tr>
</tbody>
</table>

* The percent’s reported are the actual percent within each category who responded to the survey. Percent’s may not add to 100% due to missing data (non-responses).
## WOOD COUNTY KEY LEADER SAMPLE DEMOGRAPHIC PROFILE*

<table>
<thead>
<tr>
<th>Variable</th>
<th>2017 Key Leader Survey Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Represented Agencies</strong></td>
<td></td>
</tr>
<tr>
<td>Government employees</td>
<td>33.0%</td>
</tr>
<tr>
<td>Elected Officials</td>
<td>21.7%</td>
</tr>
<tr>
<td>Local Health Departments</td>
<td>13.2%</td>
</tr>
<tr>
<td>Non-profit agencies</td>
<td>10.4%</td>
</tr>
<tr>
<td>Schools &amp; other education providers</td>
<td>9.4%</td>
</tr>
<tr>
<td>Hospitals</td>
<td>6.6%</td>
</tr>
<tr>
<td>Law enforcement</td>
<td>5.7%</td>
</tr>
<tr>
<td>Social service agency</td>
<td>4.7%</td>
</tr>
<tr>
<td>Community-based health &amp; human service agencies</td>
<td>3.7%</td>
</tr>
<tr>
<td>Employers &amp; Businesses</td>
<td>2.8%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>2.8%</td>
</tr>
<tr>
<td>Advocacy/Coalition groups that specifically deal with health &amp; wellness</td>
<td>1.9%</td>
</tr>
<tr>
<td>Reentry Coalitions</td>
<td>1.9%</td>
</tr>
<tr>
<td>Family and Children First Council (FCFC)</td>
<td>1.9%</td>
</tr>
<tr>
<td>Other</td>
<td>16.0%</td>
</tr>
<tr>
<td><strong>Primarily Represented</strong></td>
<td></td>
</tr>
<tr>
<td>County</td>
<td>60.0%</td>
</tr>
<tr>
<td>City</td>
<td>21.6%</td>
</tr>
<tr>
<td>Village</td>
<td>11.8%</td>
</tr>
<tr>
<td>Township</td>
<td>6.9%</td>
</tr>
</tbody>
</table>

* The percent’s reported are the actual percent within each category who responded to the survey. Percent’s may not add to 100% due to missing data (non-responses).