

Wood County

Community Health Status Assessment

2015



**Examining the Health
of Wood County**

FOREWORD

The members of the Wood County Health Partners are pleased to present the 2015 Wood County Community Health Assessment. This comprehensive Community Health Assessment is the result of a strong commitment by dedicated community partners working together to improve the health and quality of life of Wood County residents.

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

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

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

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

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

Sincerely,

Wood County Health Partners

FOREWORD

Funding for the Wood County Health Assessment Provided By:

Wood County Health District
Wood County Hospital

This report has been commissioned by the Wood County Health Partners:

Behavioral Connections of Wood County
Bowling Green State University
Children's Resource Center
Dental Center of Northwest Ohio
Family Services of Northwest Ohio
Lutheran Social Services of Northwestern Ohio
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

Project Management, Secondary Data, Data Collection, and Report Development

Hospital Council of Northwest Ohio

Britney L. Ward, MPH

Director of Community Health Improvement

Margaret Wielinski, MPH

Assistant Director of Community Health Improvement

Michelle Von Lehmden

Health Assessment Coordinator

Tessa Elliott

Graduate Assistant

Amy Nagle

Graduate Assistant

Derick Sekyere

Graduate Assistant

Anna Crisp

Undergraduate Assistant

Data Collection & Analysis

James H. Price, Ph.D., MPH

Emeritus Professor of Health Education
University of Toledo

Joseph A. Dake, Ph.D., MPH

Professor and Chair of Health Education
University of Toledo

Timothy R. Jordan, Ph.D., M.Ed.

Professor of Health Education
University of Toledo

To see Wood 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>.

Contact Information

Benjamin Batey, RN, MPH
Health Commissioner
Wood County Health District
1840 East Gypsy Lane Road
Bowling Green, Ohio 43402
(419) 354-2311

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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) and youth (ages 12 through 18) who participated in a county-wide health assessment survey during 2015. 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 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 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 survey instruments were designed and pilot tested for this study: one for adults and one for adolescents. As a first step in the design process, health education researchers from the University of Toledo and staff members from the Hospital Council of NW Ohio met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of adults and adolescents. The investigators decided to derive the majority of the adult survey items from the BRFSS. The majority of the survey items for the adolescent survey were derived from the YRBSS. This decision was based on being able to compare local data with state and national data.

The Project Coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Wood County. During these meetings, banks of potential survey questions from the BRFSS and YRBSS surveys were reviewed and discussed. Based on input from the Wood County planning committee, the Project Coordinator composed drafts of surveys containing 118 items for the adult survey and 76 items for the adolescent survey. The drafts were reviewed and approved by health education researchers at the University of Toledo.

SAMPLING | *Adult Survey*

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

SAMPLING | *Adolescent Survey*

A sample size of 373 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 to adults, an advance letter was mailed to 1,200 adults in Wood County. This advance letter was personalized, printed on Wood County Health Partners stationery and was signed by Benjamin Batey, Health Commissioner, Wood County Health District and Stan Korducki, CEO, Wood County Hospital. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

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

The response rate for the mailing was 44% (n=513; CI=±4.32). 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 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 93% (n=489; CI=±4.34)

DATA ANALYSIS

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

LIMITATIONS

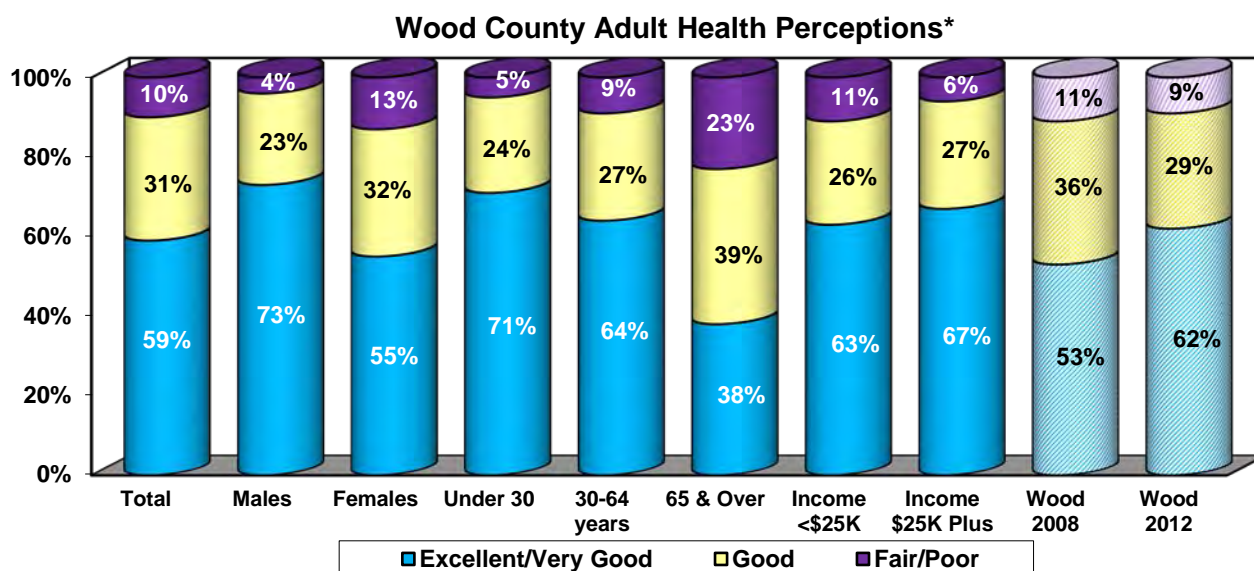
As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Wood County adult assessment had a high response rate. However, if any important differences existed between the respondents and the non-respondents regarding the questions asked,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

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

Data Summary

HEALTH PERCEPTIONS

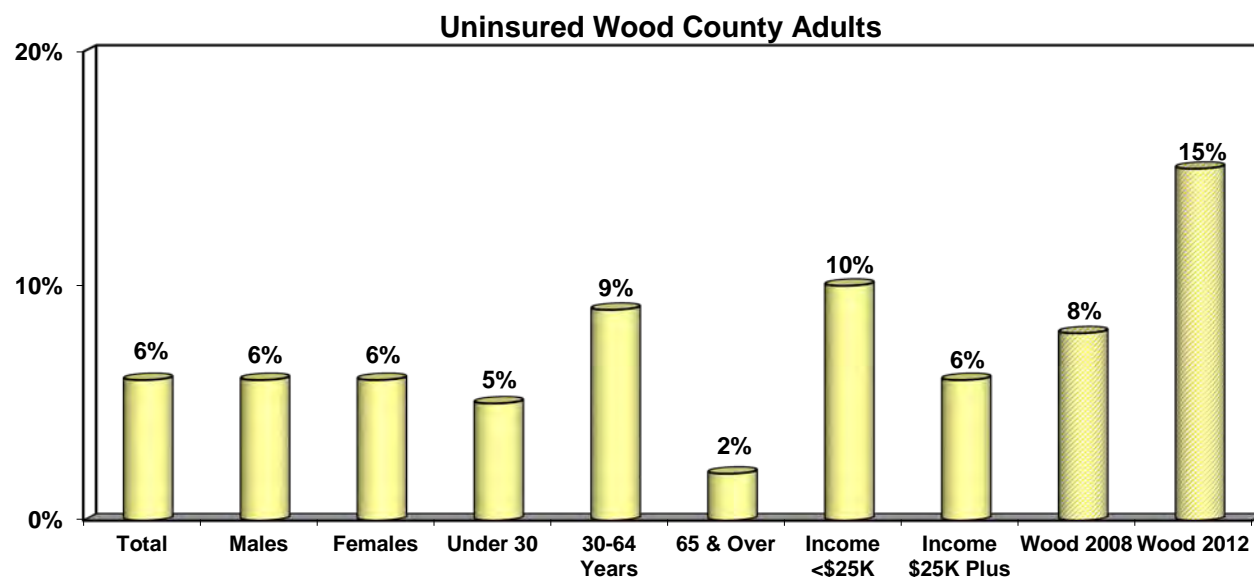
In 2015, more than half (59%) of the Wood County adults rated their health status as excellent or very good. Conversely, 10% of adults, increasing to 23% of those over the age of 65, described their health as fair or poor.



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

HEALTH CARE COVERAGE

The 2015 Health Assessment data has identified that 6% of Wood County adults were without health care coverage. Those most likely to be uninsured were adults ages 30-64 and those with an income level under \$25,000. In Wood County, 13.8% of residents live below the poverty level (Source: U.S. Census, American Community Survey 1 Year Estimate, 2013).



HEALTH CARE ACCESS

The 2015 Health Assessment project identified that 49% of Wood County adults had visited a doctor for a routine checkup in the past year. 68% of adults went outside of Wood County for health care services in the past year.

CARDIOVASCULAR HEALTH

Heart disease (22%) and stroke (4%) accounted for 26% of all Wood County adult deaths in 2013 (Source: ODH Information Warehouse). The 2015 Wood County Health Assessment found that 4% of adults had survived a heart attack and 3% had survived a stroke at some time in their life. More than one-fourth (26%) of Wood County adults had been diagnosed with high blood pressure, 30% had high blood cholesterol, 22% were obese, and 11% were smokers, four known risk factors for heart disease and stroke.

Wood County Leading Types of Death 2013 (Preliminary)

Total Deaths: 1,005

1. Heart Disease (22% of all deaths)
2. Cancer (16%)
3. Chronic Lower Respiratory Diseases (4%)
4. Stroke (4%)
5. Accidents, Unintentional Injuries (3%)

(Source: ODH Information Warehouse, 2013)

CANCER

In 2015, 12% of Wood County adults had been diagnosed with cancer at some time in their lives. The Centers for Disease Control and Prevention (CDC) indicates that from 2008-2012, a total of 1,125 Wood County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that not using tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages and early detection may reduce overall cancer deaths.

Wood County Incidence of Cancer, 2007-2011

All Types: 2,676 cases

- Prostate: 426 cases (16%)
- Breast: 374 cases (14%)
- Lung and Bronchus: 354 cases (13%)
- Colon and Rectum: 287 cases (11%)

In 2013, there were 239 cancer deaths in Wood County.

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 1/9/2014)

DIABETES

In 2015, 6% of Wood County adults had been diagnosed with diabetes.

ARTHRITIS

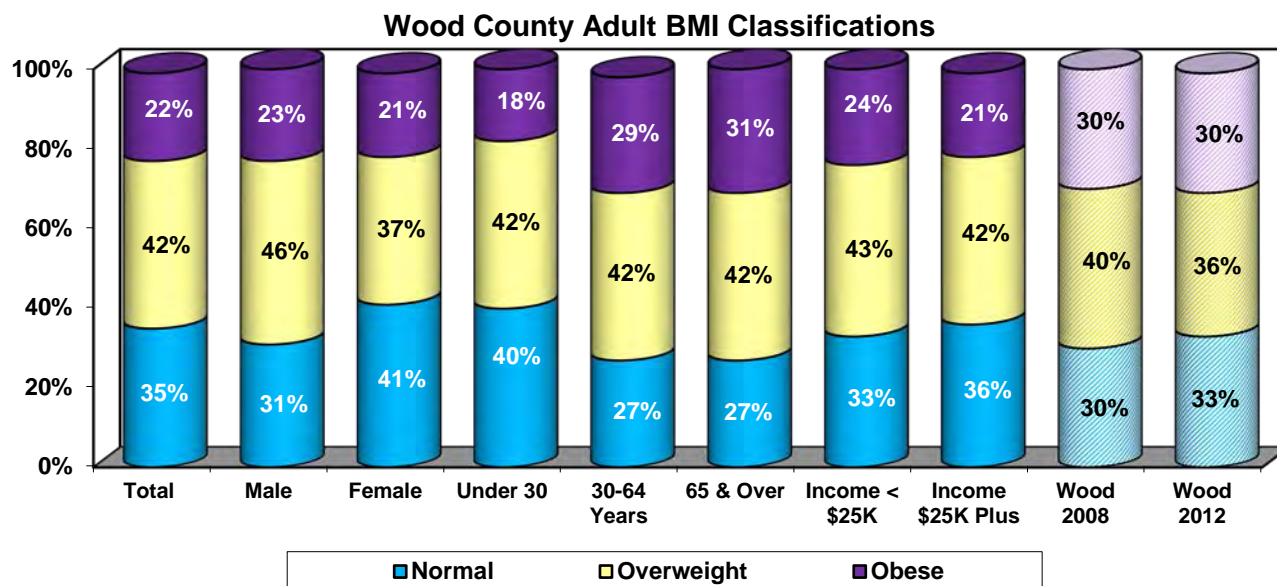
According to the Wood County survey data, 29% of Wood County adults were diagnosed with arthritis. According to the 2013 BRFSS, 30% of Ohio adults and 25% of U.S. adults were told they have arthritis.

ASTHMA

In 2015, 15% of Wood County adults had been diagnosed with asthma.

ADULT WEIGHT STATUS

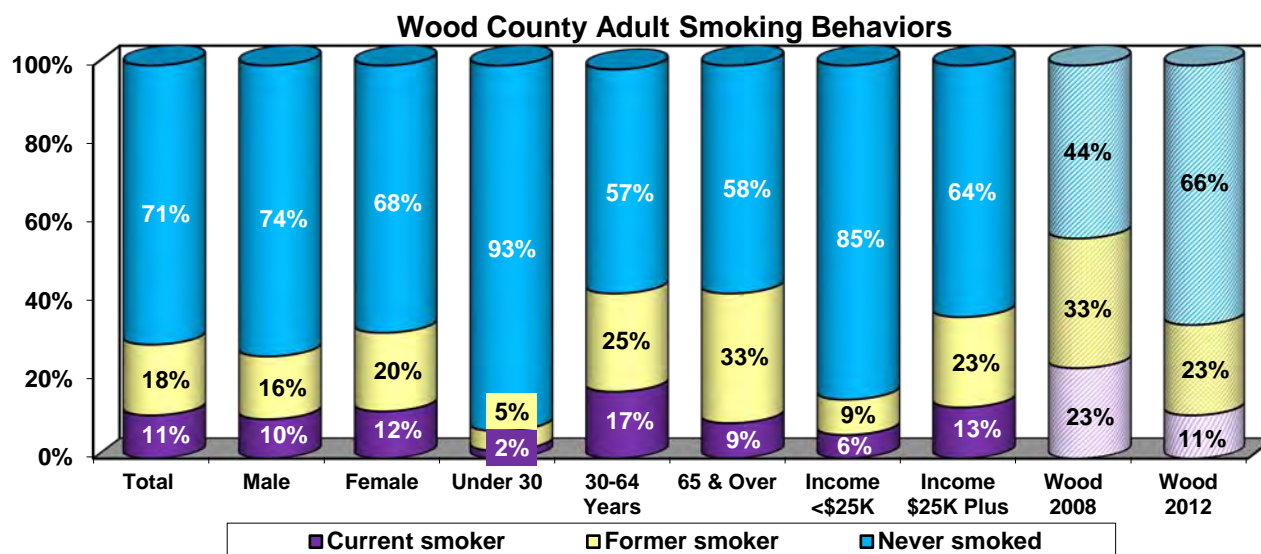
The 2015 Health Assessment identified that 64% of Wood County adults were overweight or obese based on Body Mass Index (BMI). The 2013 BRFSS indicates that 30% of Ohio and 29% of U.S. adults were obese by BMI. More than one-fifth (20%) of Wood County adults were obese. More than two-fifths (43%) of adults were trying to lose weight.



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

ADULT TOBACCO USE

In 2015, 11% of Wood County adults were current smokers and 18% were considered former smokers. In 2015, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of death worldwide, and is responsible for the deaths of approximately half of long-term users. Each year, tobacco use is responsible for almost 6 million premature deaths, 80% of which are in low-and middle-income countries, and by 2030, this number is expected to increase to 8 million (Source: Cancer Facts & Figures, American Cancer Society, 2015).



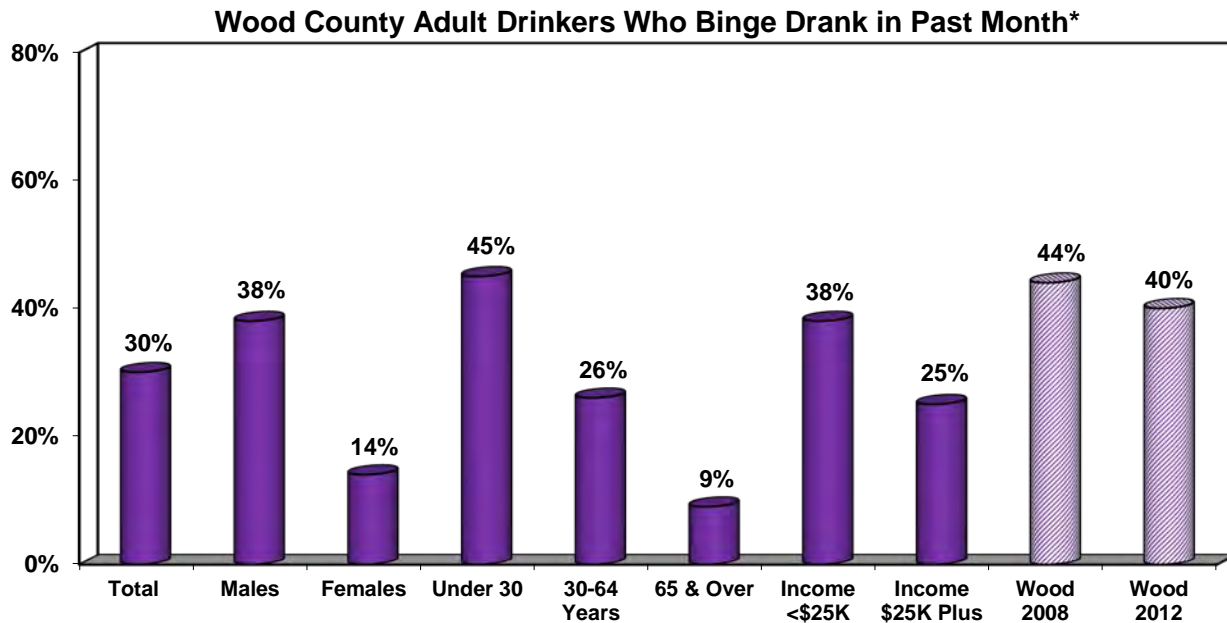
Respondents were asked:

"Have you smoked at least 100 cigarettes in your entire life?"

If yes, do you now smoke cigarettes every day, some days or not at all?"

ADULT ALCOHOL CONSUMPTION

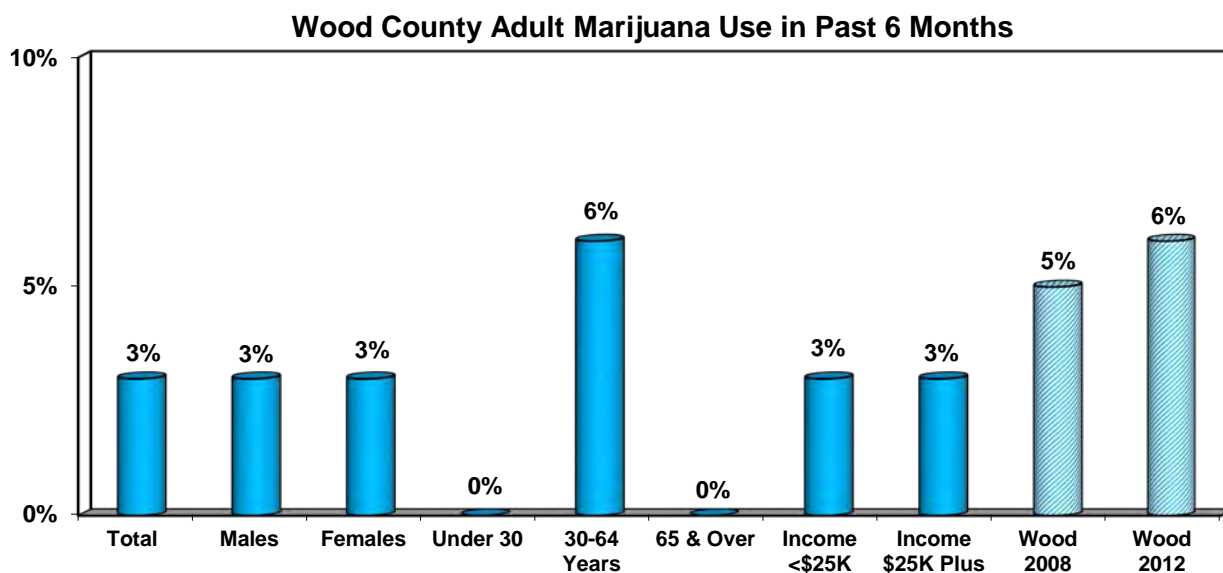
In 2015, the Health Assessment indicated that 13% of Wood County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 30% of adults who drank had five or more drinks (for males) and 4 or more drinks (for females) on one occasion (binge drinking) in the past month. Eight percent of adults drove after having perhaps too much to drink.



*Based on adults who have drunk alcohol in the past month. Binge drinking is defined as having five or more drinks (for males) or four or more drinks (for females) on an occasion.

ADULT MARIJUANA AND OTHER DRUG USE

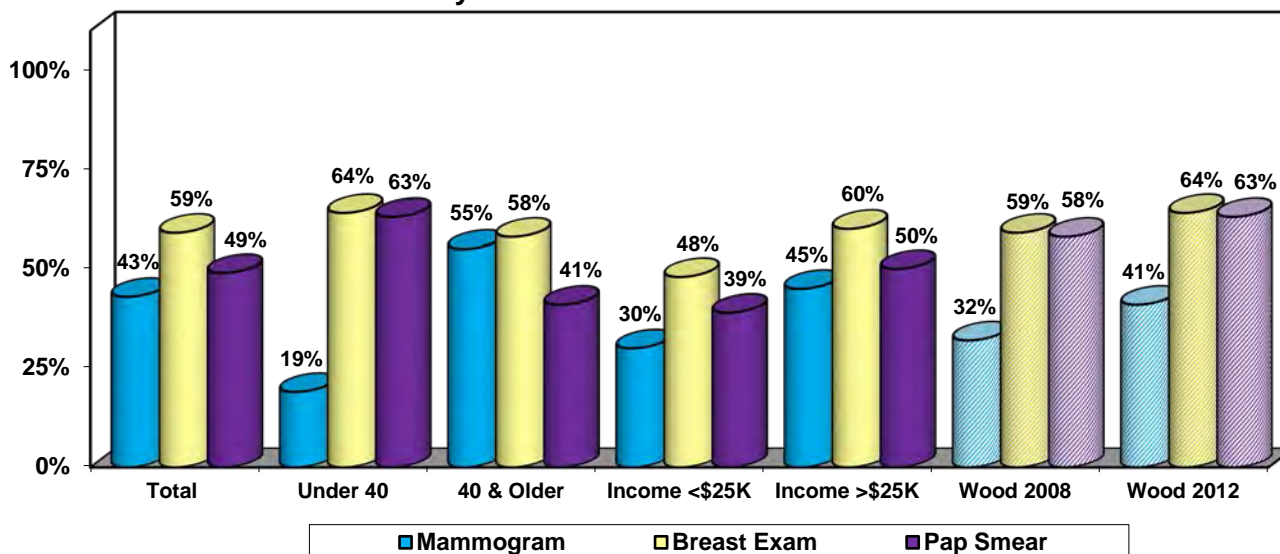
In 2015, 3% of Wood County adults had used marijuana during the past 6 months. 6% of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.



WOMEN'S HEALTH

In 2015, more than half (55%) of Wood County women over the age of 40 reported having a mammogram in the past year. 59% of Wood County women ages 19 and over had a clinical breast exam and 49% had a Pap smear to detect cancer of the cervix in the past year. The Health Assessment determined that 3% of women survived a heart attack and 4% survived a stroke at some time in their life. More than one-quarter (28%) had high blood pressure, 33% had high blood cholesterol, 21% were obese, and 12% were identified as smokers, known risk factors for cardiovascular diseases.

Wood County Women's Health Exams Within the Past Year



MEN'S HEALTH

In 2015, 45% of Wood County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. Major cardiovascular diseases (heart disease and stroke) accounted for 33% and cancers accounted for 25% of all male deaths in Wood County from 2010-2012. The Health Assessment determined that 3% of men survived a heart attack and 2% survived a stroke at some time in their life. Nearly one-fourth (24%) of men had been diagnosed with high blood pressure, 28% had high blood cholesterol, and 10% were identified as smokers, which, along with obesity (23%), are known risk factors for cardiovascular diseases.

PREVENTIVE MEDICINE AND HEALTH SCREENINGS

Over half (53%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. One-fourth (25%) of adults ages 50 and over had a colorectal cancer screening in the past 2 years.

ADULT SEXUAL BEHAVIOR & PREGNANCY OUTCOMES

In 2015, three-fifths (60%) of Wood County adults had sexual intercourse. Two percent of adults had more than one partner. Prevalence estimates suggest that young people aged 15-24 years acquire half of all new STDs and that 1 in 4 sexually active adolescent females have an STD, such as chlamydia or human papillomavirus (HPV) (Source: CDC, *STDs in Adolescents and Young Adults, 2014 STD Surveillance*).

QUALITY OF LIFE

In 2015, 25% of Wood County adults were limited in some way because of a physical, mental or emotional problem.

SOCIAL CONTEXT

In 2015, 2% of Wood County adults were threatened or abused in the past year (including physical, sexual, emotional, financial, and verbal abuse). 55% of adults reported gambling in the past year.

MENTAL HEALTH AND SUICIDE

In 2015, 5% of Wood County adults had a period of two or more weeks when they felt so sad or hopeless nearly every day that they stopped doing usual activities.

ORAL HEALTH

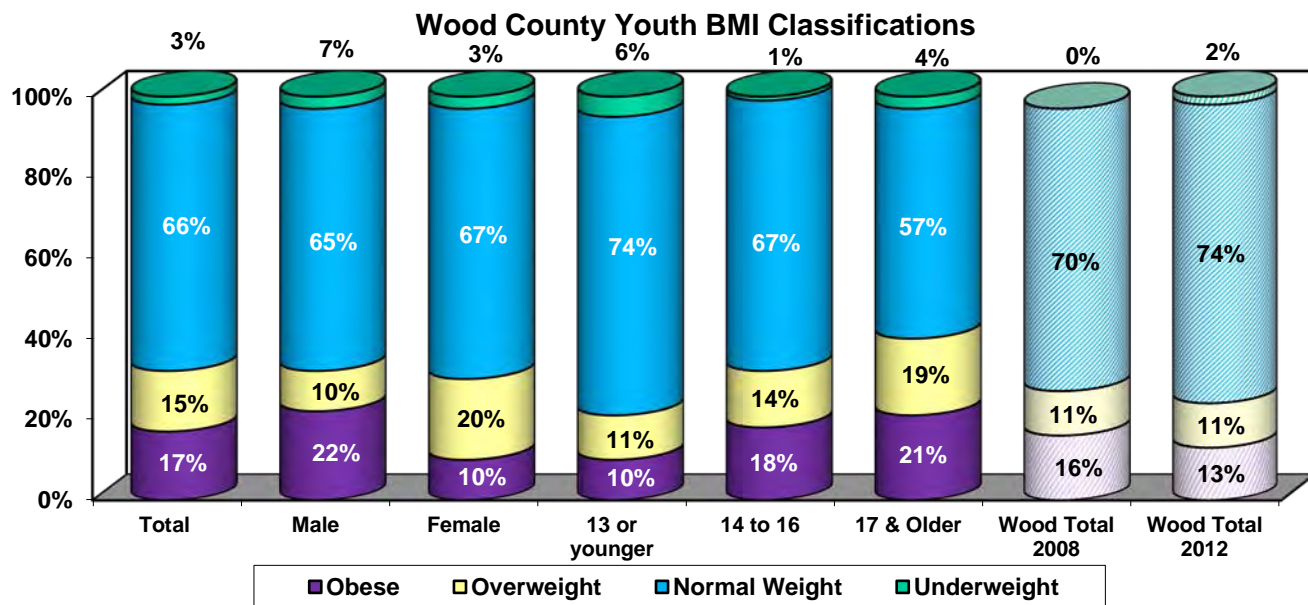
The 2015 Health Assessment project has determined that nearly three-fourths (74%) of Wood County adults had visited a dentist or dental clinic in the past year. The 2012 BRFSS reported that 67% of U.S. adults and 68% of Ohio adults had visited a dentist or dental clinic in the previous twelve months. More than three-fourths (79%) of Wood County youth in grades 6-12 had visited the dentist for a check-up, exam, teeth cleaning, or other dental work in the past year (2013 YRBS reported 75% for Ohio).

PARENTING

The 2015 Health Assessment project identified that 76% of parents had taken their child to the dentist in the past year. 81% of parents described their child's health as excellent or very good.

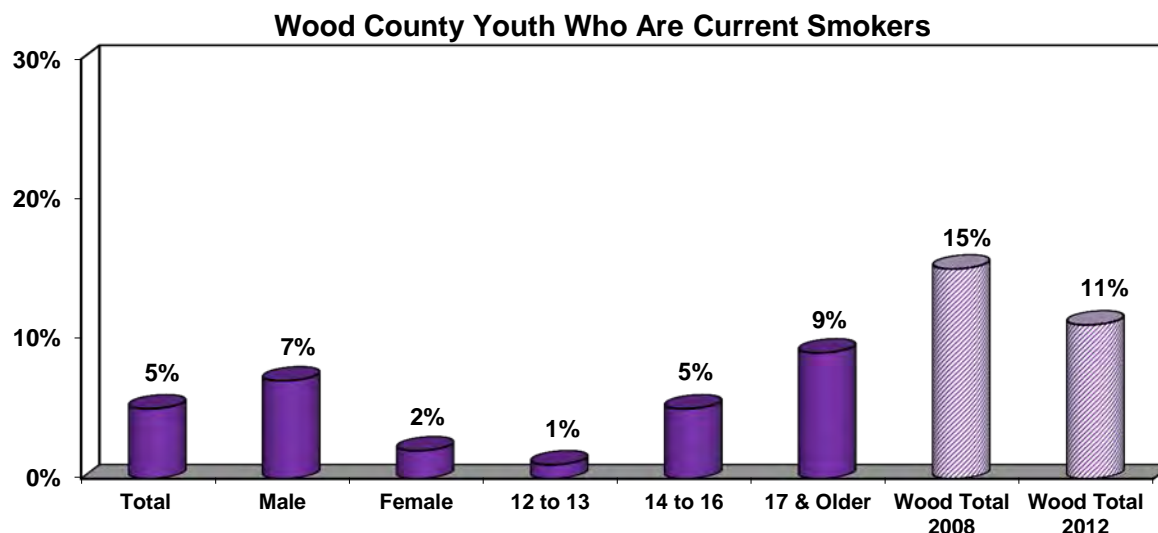
YOUTH WEIGHT STATUS

The 2015 Health Assessment identified that 17% of Wood County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 29% of Wood County youth reported that they were slightly or very overweight. 73% of youth were exercising for 60 minutes on 3 or more days per week. 91% of youth were involved in extracurricular activities.



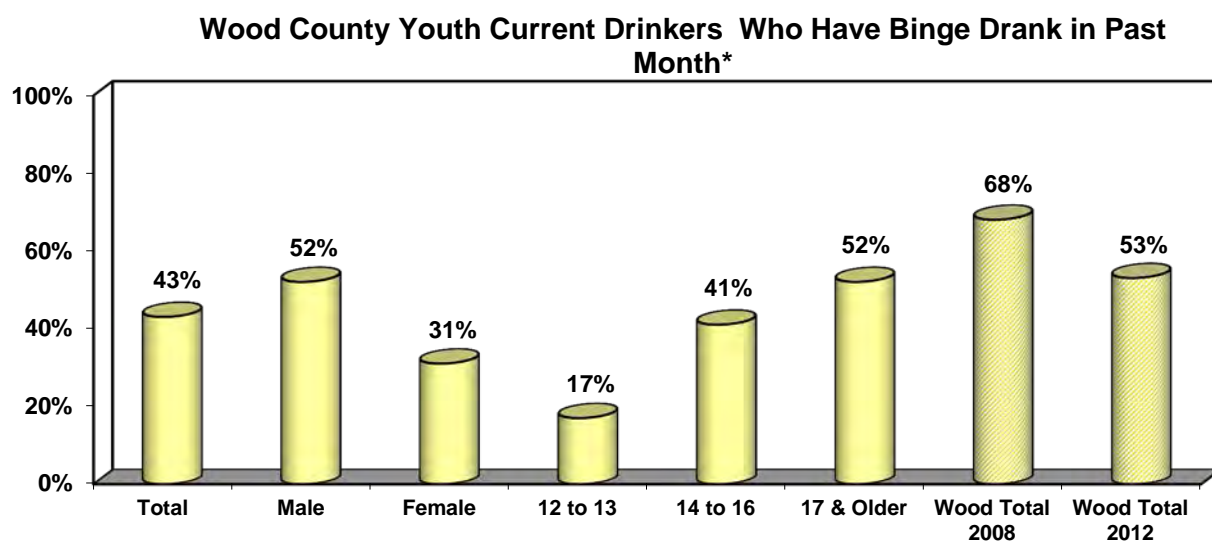
YOUTH TOBACCO USE

The 2015 Health Assessment identified that 5% of Wood County youth in grades 6-12 were smokers. 13% of current smokers smoked daily. More than four-fifths (87%) of Wood County youth reported that their parents would disapprove of them smoking cigarettes.



YOUTH ALCOHOL CONSUMPTION

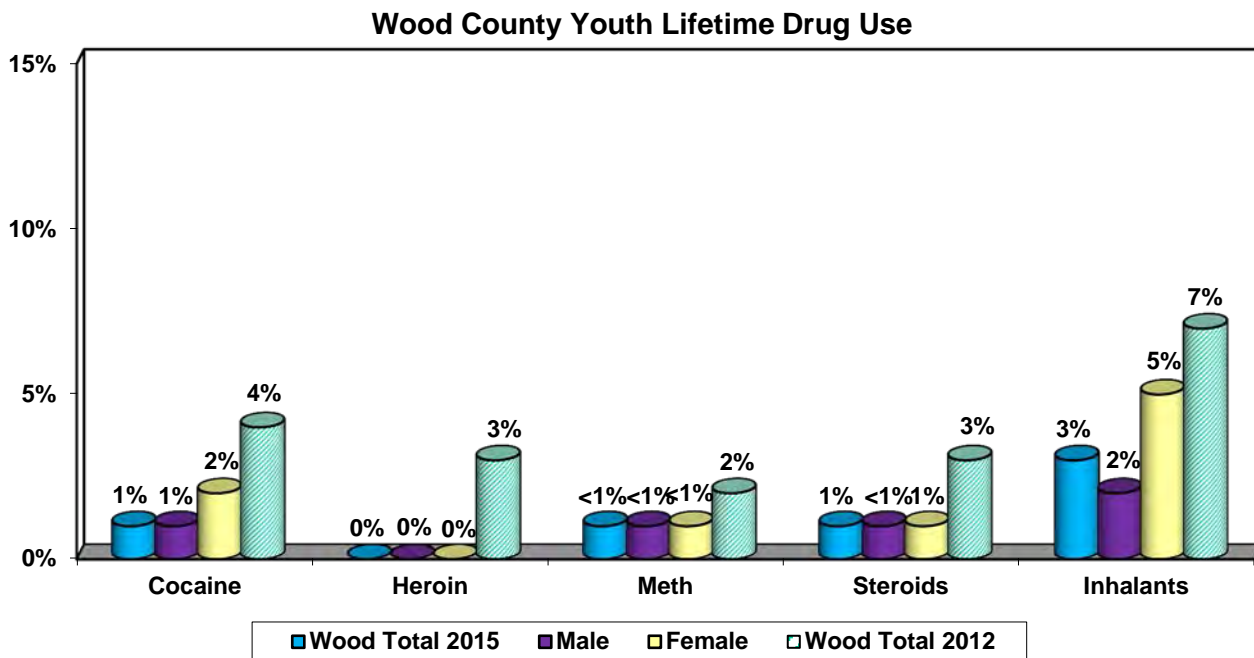
In 2015, the Health Assessment results indicated that 44% of Wood County youth in grades 6-12 had drank at least one drink of alcohol in their life, increasing to 70% of youth seventeen and older. 29% of those 6th-12th graders who drank, took their first drink at 12 years or younger. 16% of all Wood County 6th-12th grade youth and 28% of those over the age of 17 had at least one drink in the past 30 days. Over two-fifths (43%) of the 6th-12th grade youth who reported drinking in the past 30 days had at least one episode of binge drinking. 4% of all youth drivers had driven a car in the past month after they had been drinking alcohol.



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

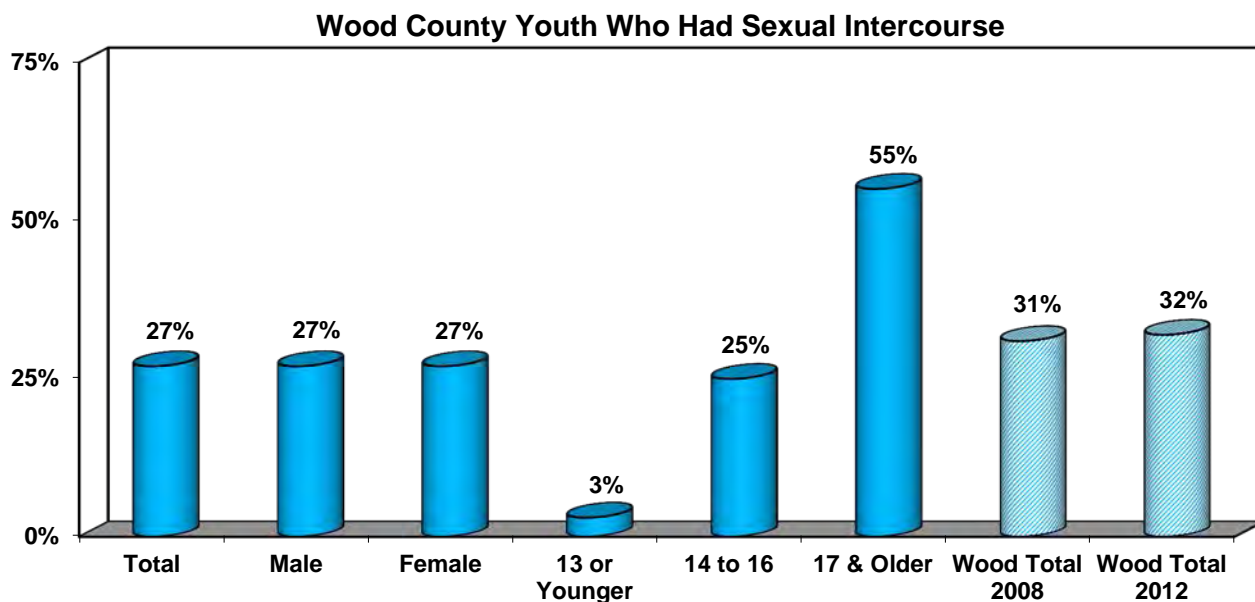
YOUTH MARIJUANA AND OTHER DRUG USE

In 2015, 8% of Wood County 6th-12th grade youth had used marijuana at least once in the past 30 days, increasing to 17% of those ages 17 and older. 6% of youth used medications that were not prescribed for them or took more than prescribed to get high at some time in their life, increasing to 8% of those over the age of 17.



YOUTH SEXUAL BEHAVIOR & PREGNANCY OUTCOMES

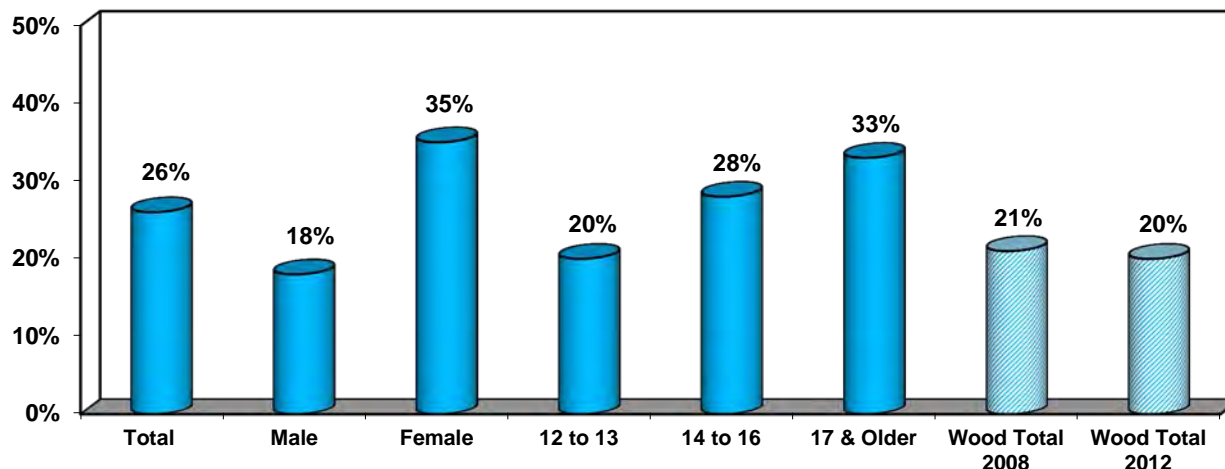
In 2015, over one-quarter (27%) of Wood County youth have had sexual intercourse, increasing to 55% of those ages 17 and over. 27% of youth had participated in oral sex and 6% had participated in anal sex. 26% of youth participated in sexting. Of those who were sexually active, 45% had multiple sexual partners. One Wood County school did not ask all sexual behavior questions.



YOUTH MENTAL HEALTH AND SUICIDE

In 2015, the Health Assessment results indicated that 16% of Wood County 6th-12th grade youth had seriously considered attempting suicide in the past year and 6% admitted actually attempting suicide in the past year.

Wood County Youth Who Felt Sad or Hopeless Almost Every Day for Two Weeks or More in a Row



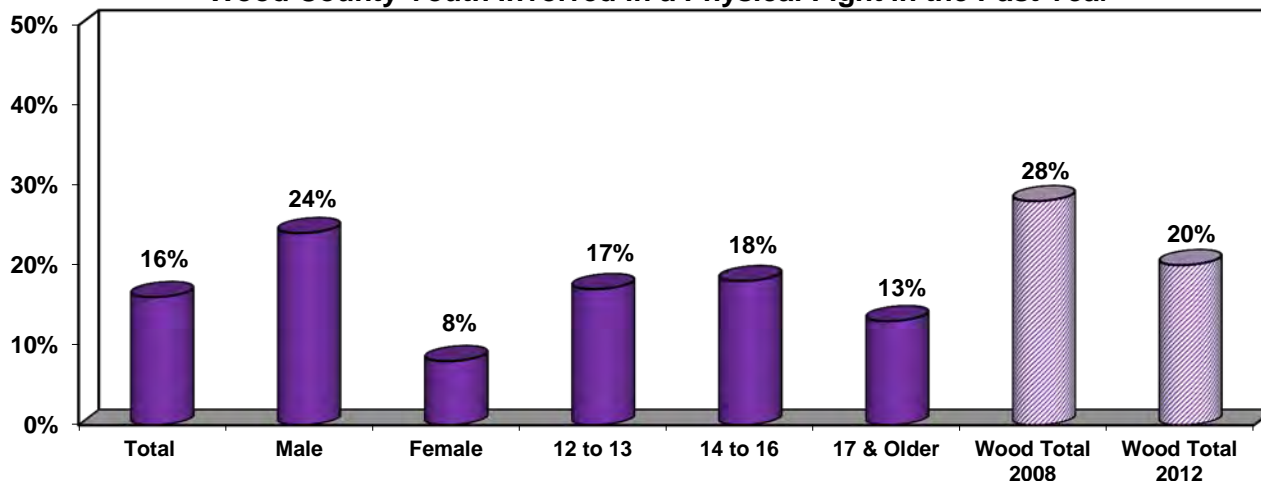
YOUTH SAFETY

In 2015, 13% of youth had ridden in a car driven by someone who had been drinking alcohol in the past month and 4% of youth drivers had driven after drinking alcohol. 42% of youth drivers texted while driving.

YOUTH VIOLENCE

In Wood County, 10% of youth had carried a weapon in the past month. 16% of youth had been involved in a physical fight in the past year. 38% of youth had been bullied in the past year and 22% had been bullied on school property.

Wood County Youth Involved in a Physical Fight in the Past Year



Adult | TREND SUMMARY

Adult Variables	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Health Status					
Rated health as excellent or very good	53%	62%	59%	50%	52%
Rated general health as fair or poor	11%	9%	10%	18%	17%
Rated their mental health as not good on four or more days	23%	29%	16%	N/A	N/A
Average days that physical health not good in past month	N/A	3.0	1.6	3.9**	3.7**
Average days that mental health not good in past month	N/A	3.8	1.9	3.9**	3.5**
Health Care Coverage					
Uninsured	8%	15%	6%	14%	17%
Arthritis, Asthma, & Diabetes					
Has been diagnosed with arthritis	33%	27%	29%	30%	25%
Has been diagnosed with diabetes	7%	8%	6%	11%	11%
Has been diagnosed with asthma	17%	13%	15%	14%	14%
Cardiovascular Health					
Had angina	N/A	N/A	4%	5%	4%
Had a heart attack	N/A	N/A	4%	5%	4%
Had a stroke	N/A	N/A	3%	4%	3%
Has been diagnosed with high blood pressure	35%	30%	26%	34%	31%
Has been diagnosed with high blood cholesterol	31%	31%	30%	38%	38%
Had blood cholesterol checked within the past 5 years	69%	69%	73%	78%	76%
Weight Status					
Obese	30%	30%	22%	30%	29%
Overweight	40%	36%	42%	35%	35%
Ate 5 or more servings of fruits/vegetables per day	N/A	16%	7%	21%***	23%***
Alcohol Consumption					
Had at least one alcoholic beverage in past month	63%	59%	68%	53%	55%
Binged in past month (5 or more drinks in a couple of hours on an occasion)	29%	24%	20%	17%	17%
Tobacco Use					
Current smoker (currently smoke some or all days)	23%	11%	11%	23%	19%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	33%	23%	18%	25%	25%
Tried to quit smoking	52%	44%	59%	N/A	N/A
Drug Use					
Adults who used marijuana in the past 6 months	5%	6%	3%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	6%	10%	6%	N/A	N/A
Adults who used other recreational drugs in the past 6 months	5%	6%	<1%	N/A	N/A

N/A - not available

* 2012 BFRSS Data, **2010 BRFSS Data, ***2009 BRFSS Data

Adult Variables	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Preventive Medicine					
Had a pneumonia vaccine (age 65 and older)	57%	64%	53%	71%	70%
Had a flu vaccine in the past year (ages 65 and over)	73%	64%	76%	63%	63%
Had a clinical breast exam in the past two years (age 40 and older)	70%	91%	74%	75%**	77%**
Had a mammogram in the past two years (age 40 and older)	67%	82%	73%	74%*	74%*
Had a pap smear in the past three years	75%	79%	68%	78%*	78%*
Had a digital rectal exam within the past year	21%	31%	9%	N/A	N/A
Had a PSA test in within the past two years (age 40 & over)	N/A	60%	55%	N/A	N/A
Quality of Life					
Limited in some way because of physical, mental or emotional problem	25%	37%	25%	21%	20%
Mental Health					
Two or more weeks in a row felt sad or hopeless	11%	12%	5%	N/A	N/A
Oral Health					
Adults who have visited the dentist in the past year	64%	74%	74%	68%*	67%*

N/A - not available

* 2012 BFRSS Data

**2010 BRFSS Data

Youth | TREND SUMMARY

Youth Variables	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2013 (9 th -12 th)
Weight Control						
Obese	16%	13%	17%	18%	13%	14%
Overweight	11%	11%	15%	16%	16%	17%
Described themselves as slightly or very overweight	30%	27%	29%	30%	28%	31%
Trying to lose weight	44%	48%	41%	43%	47%	48%
Exercised to lose weight	N/A	50%	43%	42%	61%‡	61%‡
Ate less food, fewer calories, or foods lower in fat to lose weight	N/A	32%	27%	29%	43%‡	39%‡
Went without eating for 24 hours or more	11%	6%	3%	5%	10%	13%
Took diet pills, powders, or liquids without a doctor's advice	5%	1%	1%	1%	5%	5%
Vomited or took laxatives	3%	1%	2%	3%	5%	4%
Ate 1 to 4 servings of fruits and vegetables per day	N/A	79%	80%	83%	85%‡	78%‡
Physically active at least 60 minutes per day on every day in past week	N/A	28%	28%	27%	26%	27%
Physically active at least 60 minutes per day on 5 or more days in past week	N/A	52%	49%	48%	48%	47%
Did not participate in at least 60 minutes of physical activity on any day in past week	N/A	11%	14%	16%	13%	15%
Watched TV 3 or more hours per day	43%	43%	35%	38%	28%	33%
Unintentional Injuries & Violence						
Carried a weapon in past month	10%	10%	10%	11%	14%	18%
Been in a physical fight in past year	28%	20%	16%	15%	20%	25%
Electronically/cyber bullied in past year	12%	13%	9%	9%	15%	15%
Bullied in past year	46%	42%	38%	36%	N/A	N/A
Bullied on school property in past year	N/A	N/A	22%	20%	21%	20%
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year	4%	6%	3%	3%	7%	9%‡
Mental Health						
Youth who had seriously considered attempting suicide in the past year	9%	9%	16%	19%	14%	17%
Youth who had attempted suicide in the past year	4%	4%	6%	6%	6%	8%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (of all youth)	1%	1%	2%	2%	1%	3%
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	21%	20%	26%	31%	26%	30%

* Comparative YRBS data for Ohio and U.S. is 2011, ‡ Comparative YRBS data for Ohio is 2007 and U.S. is 2009

N/A – Not available

TREND SUMMARY

Youth Variables	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th - 12 th)	U.S. 2013 (9 th - 12 th)
Alcohol Consumption						
Ever tried alcohol	61%	48%	44%	58%	71%*	66%
Current drinker	30%	23%	16%	23%	30%	35%
Binge drinker (of all youth)	21%	12%	7%	11%	16%	21%
Drank for the first time before age 13 (of all youth)	24%	18%	11%	12%	13%	19%
Rode with someone who was drinking	18%	17%	13%	14%	17%	22%
Drank and drove (of youth drivers)	6%	3%	4%	4%	4%	10%
Obtained the alcohol they drank by someone giving it to them	N/A	41%	33%	35%	38%	42%
Tobacco Use						
Ever tried cigarettes	35%	27%	21%	28%	52%*	41%
Current smokers	15%	11%	5%	7%	15%	16%
Tried to quit smoking (of youth smokers)	41%	55%	46%	45%	56%*	48%
Smoked cigarettes on 20 or more days during the past month(of all youth)	7%	3%	1%	2%	7%	6%
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	10%	9%	6%	6%	14%*	9%
Sexual Behavior						
Ever had sexual intercourse	31%	32%	27%	42%	43%	47%
Used a condom at last intercourse	74%	76%	69%	71%	51%	59%
Used birth control pills at last intercourse	28%	41%	33%	36%	24%	19%
Did not use any method to prevent pregnancy during last sexual intercourse	13%	11%	7%	6%	12%	14%
Had four or more sexual partners (of all youth)	7%	6%	6%	8%	12%	15%
Drank alcohol or used drugs before last sexual intercourse (of sexually active youth)	20%	18%	13%	12%	18%	22%
Had sexual intercourse before age 13 (of all youth)	4%	4%	3%	3%	4%	6%
Drug Use						
Youth who used marijuana in the past month	12%	12%	8%	13%	21%	23%
Ever used methamphetamines	3%	2%	<1%	1%	6%‡	3%
Ever used cocaine	4%	4%	1%	2%	4%	6%
Ever used heroin	2%	3%	0%	0%	2%	2%
Ever used steroids	3%	3%	1%	1%	3%	3%
Ever used inhalants	11%	7%	3%	4%	9%	9%
Ever misused medications	15%	11%	6%	8%	N/A	N/A
Ever used ecstasy/MDMA	N/A	4%	2%	2%	N/A	7%
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	13%	8%	5%	7%	20%	22%
Preventive Care						
Ridden with someone who had been drinking alcohol in past month	18%	17%	13%	14%	17%	22%
Drove a car after drinking alcohol (of all youth drivers)	6%	3%	4%	4%	4%	10%
Visited a dentist for a check-up within the past year	71%	82%	79%	79%	75%	N/A
Suffered blow or jolt to head	N/A	N/A	13%	15%	12%	N/A

* Comparative YRBS data for Ohio and U.S. is 2011, ‡ Comparative YRBS data for Ohio is 2007 and U.S. is 2009

N/A – Not available

Adult | HEALTH STATUS PERCEPTIONS

Key Findings

In 2015, more than half (59%) of the Wood County adults rated their health status as excellent or very good. Conversely, 10% of adults, increasing to 23% of those over the age of 65, described their health as fair or poor.

Adults Who Rated General Health Status Excellent or Very Good

- Wood County 59% (2015)
- Ohio 50% (2013)
- U.S. 52% (2013)

(Source: BRFSS 2013 for Ohio and U.S.)

General Health Status

- In 2015, more than half (59%) of Wood County adults rated their health as excellent or very good. Wood County adults with higher incomes (67%) were most likely to rate their health as excellent or very good, compared to 63% of those with incomes less than \$25,000.
- 10% of adults rated their health as fair or poor. The 2013 BRFSS has identified that 18% of Ohio and 17% of U.S. adults self-reported their health as fair or poor.
- Wood County adults were most likely to rate their health as fair or poor if they:
 - Were widowed (44%)
 - Had been diagnosed with diabetes (36%)
 - Had high blood pressure (25%) or high blood cholesterol (17%)
 - Were 65 years of age or older (23%)

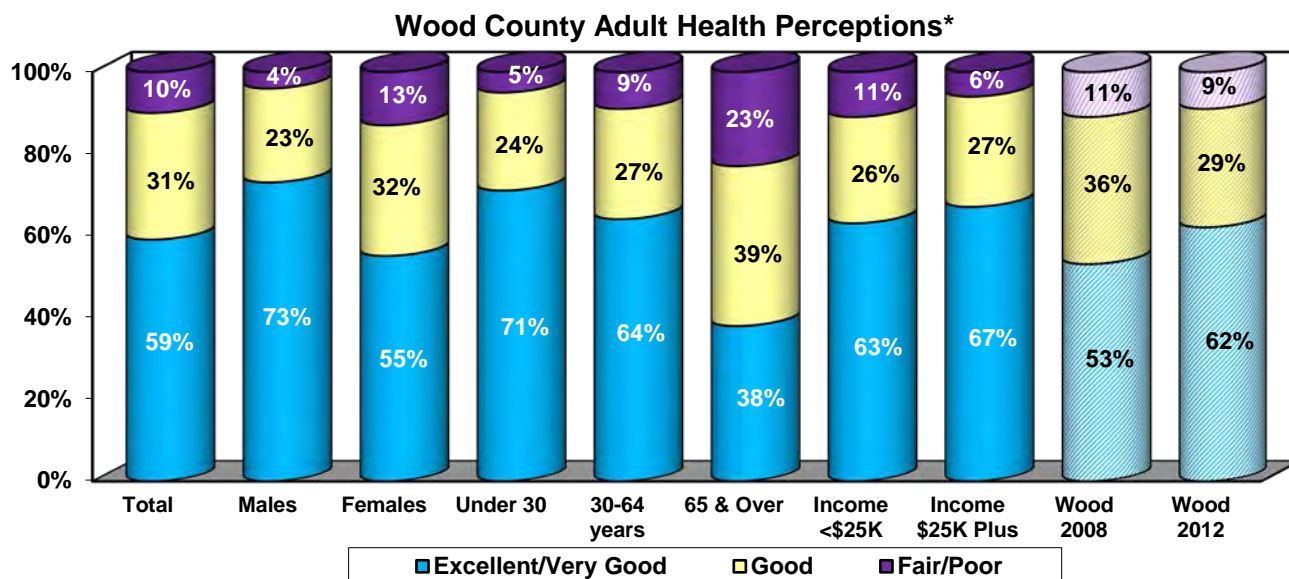
Physical Health Status

- In 2015, 14% of Wood County adults rated their physical health as not good on four or more days in the previous month.
- Wood County adults reported their physical health as not good on an average of 1.6 days in the previous month. Ohio and U.S. adults reported their physical health as not good on an average of 3.9 days and 3.7 days, respectively, in the previous month *(Source: 2010 BRFSS)*.
- Wood County adults were most likely to rate their physical health as not good if they:
 - Were female (20%)
 - Were 65 years of age or older (16%)

Mental Health Status

- In 2015, 16% of Wood County adults rated their mental health as not good on four or more days in the previous month.
- Wood County adults reported their mental health as not good on an average of 1.9 days in the previous month. Ohio and U.S. adults reported their mental health as not good on an average of 3.9 days and 3.5 days, respectively, in the previous month *(Source: 2010 BRFSS)*.
- About one-in-five (18%) adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.
- Wood County adults were most likely to rate their mental health as not good if they:
 - Were female (21%)
 - Were ages 30-64 (20%)

The following graph shows the percentage of Wood County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 59% of all Wood County adults, 71% of those under age 30, and 38% of those ages 65 and older rated their health as excellent or very good. The table shows the percentage of adults with poor physical and mental health in the past 30 days.



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

Health Status	No Days	1-3 Days	4-5 Days	6-7 Days	8 or More Days
Physical Health Not Good in Past 30 Days*					
Males	81%	11%	3%	1%	2%
Females	66%	11%	6%	4%	10%
Total	68%	13%	5%	2%	7%
Mental Health Not Good in Past 30 Days*					
Males	76%	12%	7%	0%	5%
Females	61%	12%	4%	3%	12%
Total	71%	9%	6%	2%	8%

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

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Rated health as excellent or very good	53%	62%	59%	50%	52%
Rated health as fair or poor	11%	9%	10%	18%	17%
Rated their mental health as not good on four or more days in the previous month	23%	29%	16%	N/A	N/A
Average days that physical health not good in past month	N/A	3.0	1.6	3.9*	3.7*
Average days that mental health not good in past month	N/A	3.8	1.9	3.9*	3.5*
Average days that poor physical or mental health kept them from doing their usual activities in the past month	N/A	2.6	1.3	2.3*	2.4*

N/A – Not available

*2010 BRFSS data

Adult | HEALTH CARE COVERAGE

Key Findings

The 2015 Health Assessment data has identified that 6% of Wood County adults were without health care coverage. Those most likely to be uninsured were adults ages 30-64 and those with an income level under \$25,000. In Wood County, 13.8% of residents live below the poverty level. (Source: U.S. Census, American Community Survey 1 Year Estimate, 2013)

General Health Coverage

- In 2015, 94% Wood County adults had health care coverage, leaving 6% who were uninsured. The 2013 BRFSS reports uninsured prevalence rates for Ohio (14%) and the U.S. (17%).
- In the past year, 6% of adults were uninsured, increasing to 9% of those ages 30-64 and 10% of those with incomes less than \$25,000.

6% of Wood County adults were uninsured.

- 9% of adults with children did not have healthcare coverage, compared to 5% of those who did not have children living in their household.
- The following types of health care coverage were used: employer (49%), someone else's employer (19%), Medicare (8%), self-paid plan (8%), Medicaid or medical assistance (5%), multiple-including private sources (5%), multiple-including government sources (2%), Health Insurance Market place (1%), military or VA (<1%), and other (3%).
- Wood County adult health care coverage includes the following: medical (95%), prescription coverage (90%), dental (74%), immunizations (72%), mental health (70%), outpatient therapy (69%), preventive care (68%), vision (65%), mental health counseling (60%), their spouse (54%), their children (47%), alcohol and drug treatment (42%), long-term care (32%), home care (31%), skilled nursing (31%), hospice (30%), and their partner (27%).

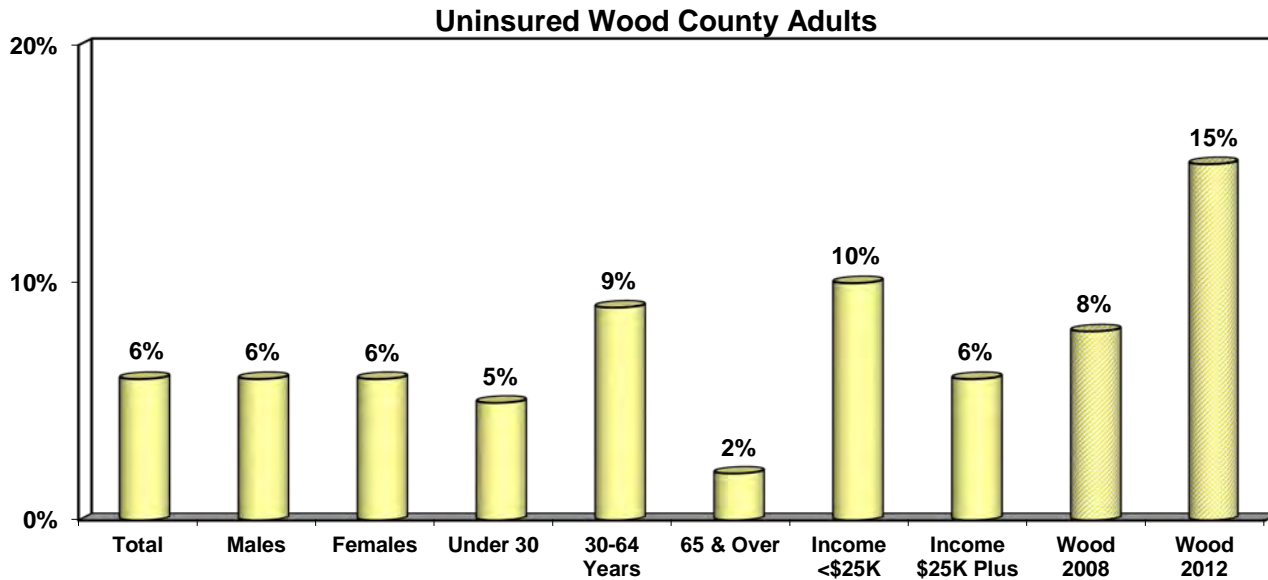
Wood County and Ohio Medicaid Statistics		
Calendar Year 2010	Wood County Residents Enrolled in Medicaid	Ohio Residents Enrolled in Medicaid
Average Members per Year Ages 0-18	7,684 (57%)	1,159,095 (55%)
Average Members per Year Ages 19-64	4,697 (35%)	787,749 (38%)
Average Members per Year Ages 65 and Over	1,012 (8%)	155,896 (7%)

*(Percent of Members Enrolled = Total Enrollment/Population per U.S. Census Bureau)

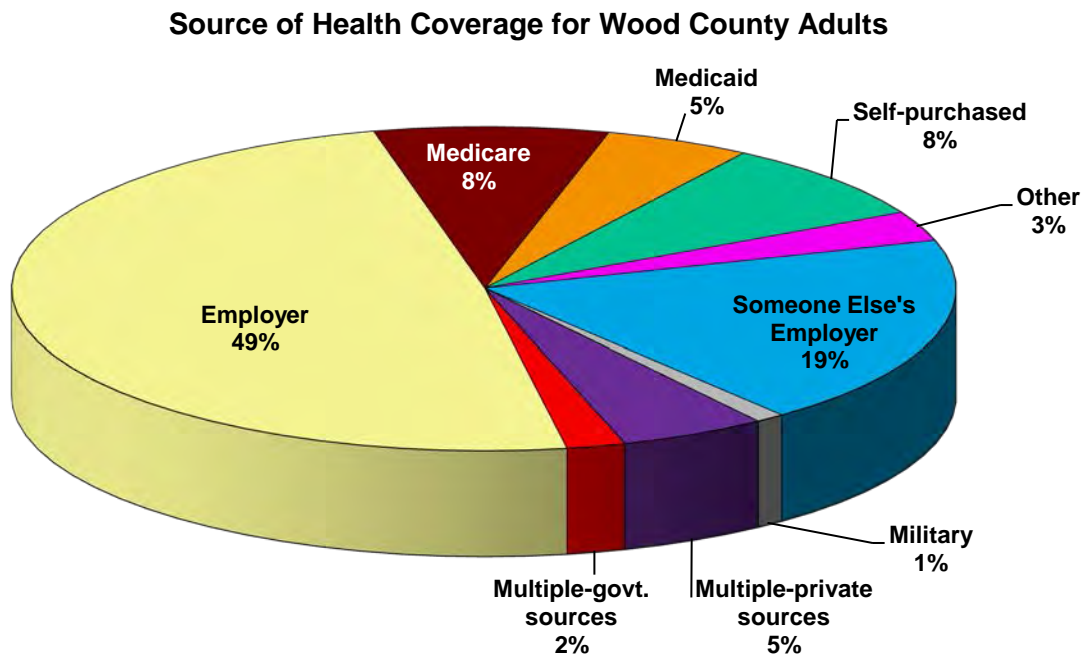
(Source: Ohio Department of Job & Family Services, Wood County 2008-2011 Profile, <http://jfs.ohio.gov/county/cntypro/pdf11/Wood.pdf>)

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Uninsured	8%	15%	6%	14%	17%

The following graph shows the percentages of Wood County adults who were uninsured by demographic characteristics. Examples of how to interpret the information in the graph includes: 6% of all Wood County adults were uninsured, 10% of adults with an income less than \$25,000 reported being uninsured and 5% of those under age 30 lacked health care coverage. The pie chart shows sources of Wood County adults' health care coverage.



10% of Wood County adults with incomes less than \$25,000 were uninsured.



Healthy People 2020 Access to Health Services (AHS)

Objective	Wood County 2015	Ohio 2013	U.S. 2013	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health care insurance	91% age 20-24 100% age 25-34 87% age 35-44 96% age 45-54 90% age 55-64	79% age 18-24 76% age 25-34 87% age 35-44 86% age 45-54 88% age 55-64	76% age 18-24 74% age 25-34 80% age 35-44 84% age 45-54 87% age 55-64	100%

*U.S. baseline is age-adjusted to the 2000 population standard
(Sources: Healthy People 2020 Objectives, 2013 BRFSS, 2015 Wood County Health Assessment)

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

Health Coverage Includes:	Yes	No	Don't Know
Medical	95%	0%	5%
Prescription Coverage	90%	1%	9%
Dental	74%	20%	6%
Immunizations	72%	3%	25%
Mental Health	70%	3%	27%
Outpatient Therapy	69%	2%	29%
Preventive Health	68%	5%	27%
Vision	65%	28%	6%
Mental Health Counseling	60%	4%	36%
Their Spouse	54%	26%	20%
Their Children	47%	30%	23%
Alcohol and Drug Treatment	42%	5%	53%
Long-Term Care	32%	15%	53%
Home Care	31%	10%	59%
Skilled Nursing	31%	10%	59%
Hospice	30%	8%	62%
Their Partner	27%	35%	38%

Ohio Medicaid Assessment Survey

- More than 2.3 million Ohioans were enrolled in Medicaid in December 2012.
- An estimated 1.5 million Ohioans do not have health insurance, and most of them are from working families.
- In Ohio, 593,912 residents were uninsured with income below 138 percent of poverty in 2010, and 5,309 of these residents were from Wood County.
- Medicaid plays a critical role in protecting the health of low-income Ohioans, but it leaves out many people. Like many states, Ohio does not extend Medicaid coverage to adults unless they have children or are disabled.

(Source: Office of Health Transformation, Extend Medicaid Coverage and Automate Enrollment, 1/31/2013, from: <http://healthtransformation.ohio.gov/LinkClick.aspx?fileticket=oid6Wo-y0gs%3D&tabid=160>)

Adult | HEALTH CARE ACCESS AND UTILIZATION

Key Findings

The 2015 Health Assessment project identified that 49% of Wood County adults had visited a doctor for a routine checkup in the past year. 68% of adults went outside of Wood County for health care services in the past year.

Health Care Access

- Nearly half (49%) of Wood County adults visited a doctor for a routine checkup in the past year, increasing to 74% of those over the age of 65.
- More than three-fifths (61%) of Wood County adults reported they had one person they thought of as their personal doctor or healthcare provider. 23% of adults had more than one person they thought of as their personal healthcare provider, and 14% did not have one at all.
- 66% of Wood County adults reported having a usual source of medical care.
- Reasons for not having a usual source of medical care included: had not needed a doctor (22%), had two or more usual places (17%), no insurance (9%), did not know where to go (5%), cost (3%), do not like/trust/ believe in doctors (1%), previous doctor unavailable/moved (1%), outstanding bill (1%), and other reasons (19%).
- Adults visited the following places for health care services: doctor's office (58%), multiple places- including doctor's office (11%), Internet (8%), urgent care center (7%), public health clinic or community health department (3%), hospital emergency room (2%), chiropractor (<1%), alternative therapies (<1%), multiple places- not including a doctor's office (<1%), and some other kind of place (1%). 8% of adults indicated they had no usual place for health care services.
- Adults reported last changing doctors: within the past year (10%), 1 to 2 years ago (11%), 2 to 3 years ago (8%), 3 to 5 years ago (13%), and 5 or more years ago (32%). 20% of adults reported having never changed doctors.
- Reasons for changing doctors included: provider moved or retired (33%), dissatisfied with former provider/liked new provider better (13%), changed residence or moved (12%), changed health care coverage (9%), medical care needs changed (6%), changed jobs (2%), former provider no longer reimbursed health care coverage (2%), owed money to former provider (1%), and other reasons (15%).
- Wood County adults had not received medical care in the past 12 months for the following reasons: no need to go (9%), cost/no insurance (4%), office was not open when they could get there (1%), too long of a wait for an appointment (1%), medical provider did not speak their language (<1%), too embarrassed to seek help (<1%), concerned about privacy (<1%), and other problems that prevented them from getting medical care (7%).

Health Care Access among Employed and Unemployed Adults

- In 2009–2010, 48.1% of unemployed adults aged 18–64 years had health insurance compared with 81.4% of employed adults.
- The unemployed were less likely to receive needed prescriptions due to cost than the employed in all insurance categories.
- Unemployed adults in 2009–2010 were more likely to have fair or poor health than employed adults across all categories of insurance coverage.

(Source: CDC, Access to Health Care, 2012, http://www.cdc.gov/nchs/fastats/access_to_health_care.htm)

- Wood County adults did not receive the following major care or preventive care because of cost: colonoscopy (8%), lab testing (6%), medication (6%), mammogram (4%), mental health services (4%), pap smear (3%), weight loss program (3%), PSA test (2%), surgery (2%) smoking cessation (2%), immunizations (2%), family planning services (<1%), and alcohol or drug treatment (<1%).
- Just over two-thirds (68%) of adults went outside of Wood County for the following health care services in the past year: primary care (28%), specialty care (25%), dental services (21%), obstetrics/gynecology/NICU (10%), pediatric care (6%), orthopedic care (4%), cardiac care (4%), mental health care (3%), cancer care (2%), counseling (2%), pediatric therapies (1%), hospice care (<1%), and other services (4%).
- Nearly one-fourth (23%) of adults did not get their prescriptions from their doctor filled in the past year, increasing to 45% of those who were uninsured.
- Of those who did not get their prescriptions filled, they gave the following reasons: they did not think they needed it (59%), they could not afford the out of pocket expense (18%), they stretched their current prescription by taking less than prescribed (14%), side effects (10%), their deductibles were too high (10%), their co-pays were too high (8%), they had a high HSA account deductible (7%), they did not have insurance (7%), their premiums were too high (4%), and they were taking too many medications (3%), there was no generic equivalent (2%), and they opted out of prescription coverage because they could not afford it (2%).
- Wood County adults had the following problems when they needed health care in the past year: had to change doctors because of their healthcare plan (5%), did not have enough money to pay for health care (4%), did not have insurance (4%), could not get appointments when they wanted them (3%), too busy to get the healthcare they needed (3%), could not find a doctor they were comfortable with (2%), could not find a doctor to take them as a patient (2%), healthcare plan did not allow them to see doctors in Wood County (1%), too embarrassed to seek help (1%), did not have child care (1%), did not get health services because they were concerned about their confidentiality (1%), did not have transportation (1%), and other problems that prevented them from getting health care (1%).
- Wood County adults had the following issues regarding their healthcare coverage: deductibles were too high (23%), co-pays were too high (14%), premiums were too high (13%), high HSA account deductible (9%), service not deemed medically necessary (6%), could not understand their insurance plan (5%), working with their insurance company (3%), limited visits (3%), provider is no longer covered (3%), service is no longer covered (2%), opted out of certain coverage because they could not afford it (2%), and opted out of certain coverage because they did not need it (1%).
- Wood County adults had the following transportation issues when they needed health services: no driver's license (2%), disabled (2%), no public transportation available/accessible (2%), limited public transportation available/accessible (1%), no car insurance (1%), could not afford gas (1%), no car (1%), car did not work (<1%), and other car issues/expenses (<1%).
- Wood County adults accessed information about their health or healthcare services from: their doctor (49%), multiple sources-including a doctor (16%), a family member or friend (14%), Internet searches (9%), multiple sources-not including a doctor (1%), newspaper articles or radio/television news stories (1%), advertisements or mailings from hospitals, clinics or doctor's offices (<1%), text messages (<1%), and other (2%).

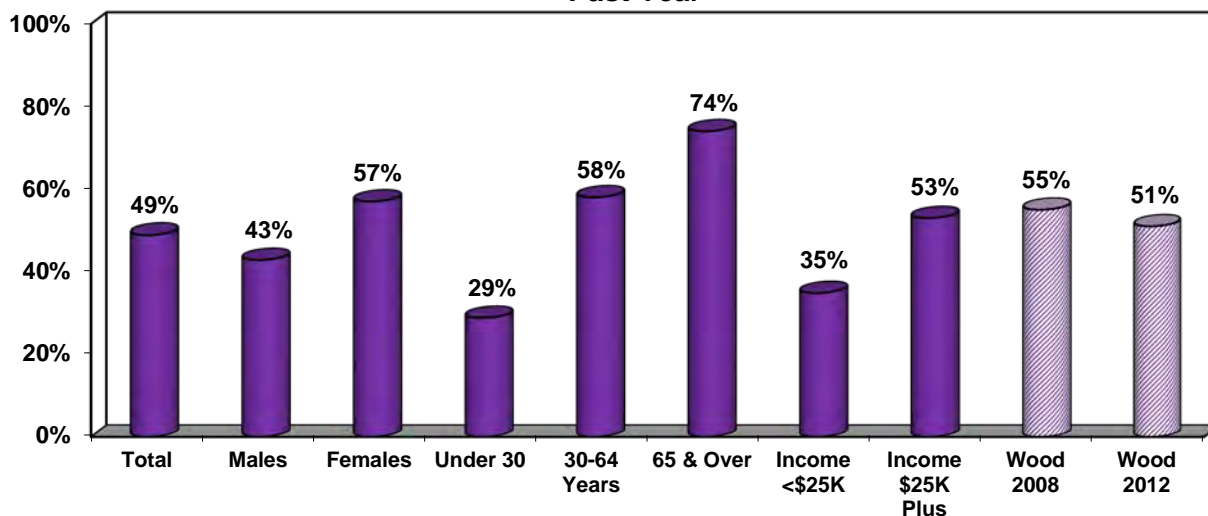
Availability of Services

- 13% of Wood County adults had 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, 41% looked for in-home care, 20% looked for an assisted living program, 20% looked for out-of-home placement, 11% looked for day care, and 8% looked for respite or overnight care.
- Wood County adults reported they had looked for the following programs for themselves or a loved one: depression, anxiety or mental health (16%), weight problem (7%), end-of-life/hospice care (5%), marital/family problems (4%), alcohol abuse (1%), drug abuse (1%), and gambling abuse (<1%).

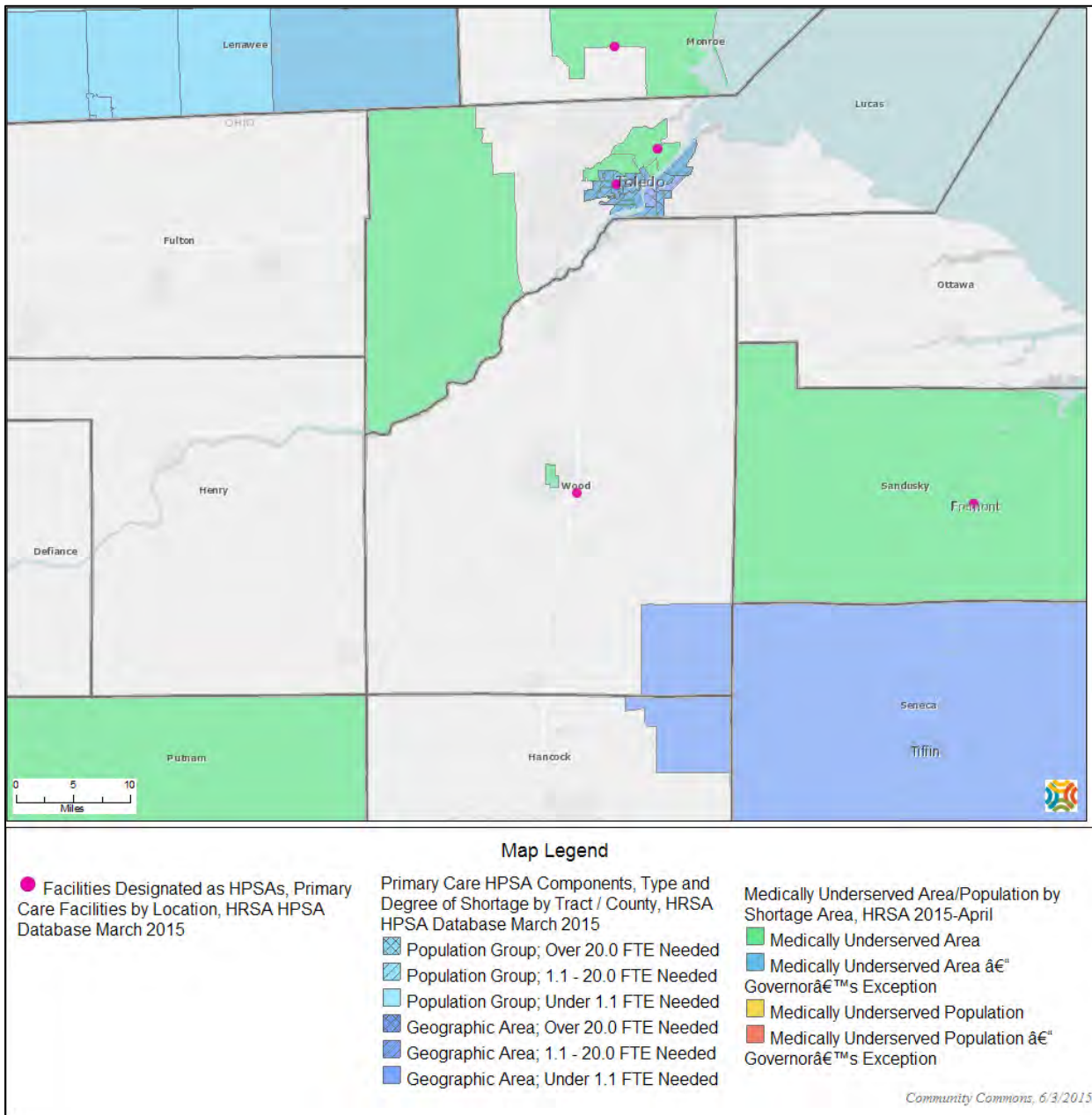
Wood County Adults Who Looked For Assistance Programs/Services

Types of Programs (% of all adults who looked for the programs)	Wood County adults who have looked but have <u>NOT</u> found a specific program	Wood County adults who have looked and have found a specific program
Depression or Anxiety (16% of all adults looked)	17%	83%
Weight Problem (7% of all adults looked)	31%	69%
End-of-Life/Hospice Care (5% of all adults looked)	4%	96%
Marital or Family Problems (4% of all adults looked)	26%	74%
Alcohol Abuse (1% of all adults looked)	40%	60%
Drug Abuse (1% of all adults looked)	50%	50%
Gambling Abuse (<1% of all adults looked)	0%	100%

Wood County Adults Visiting a Doctor for a Routine Check-up Within the Past Year

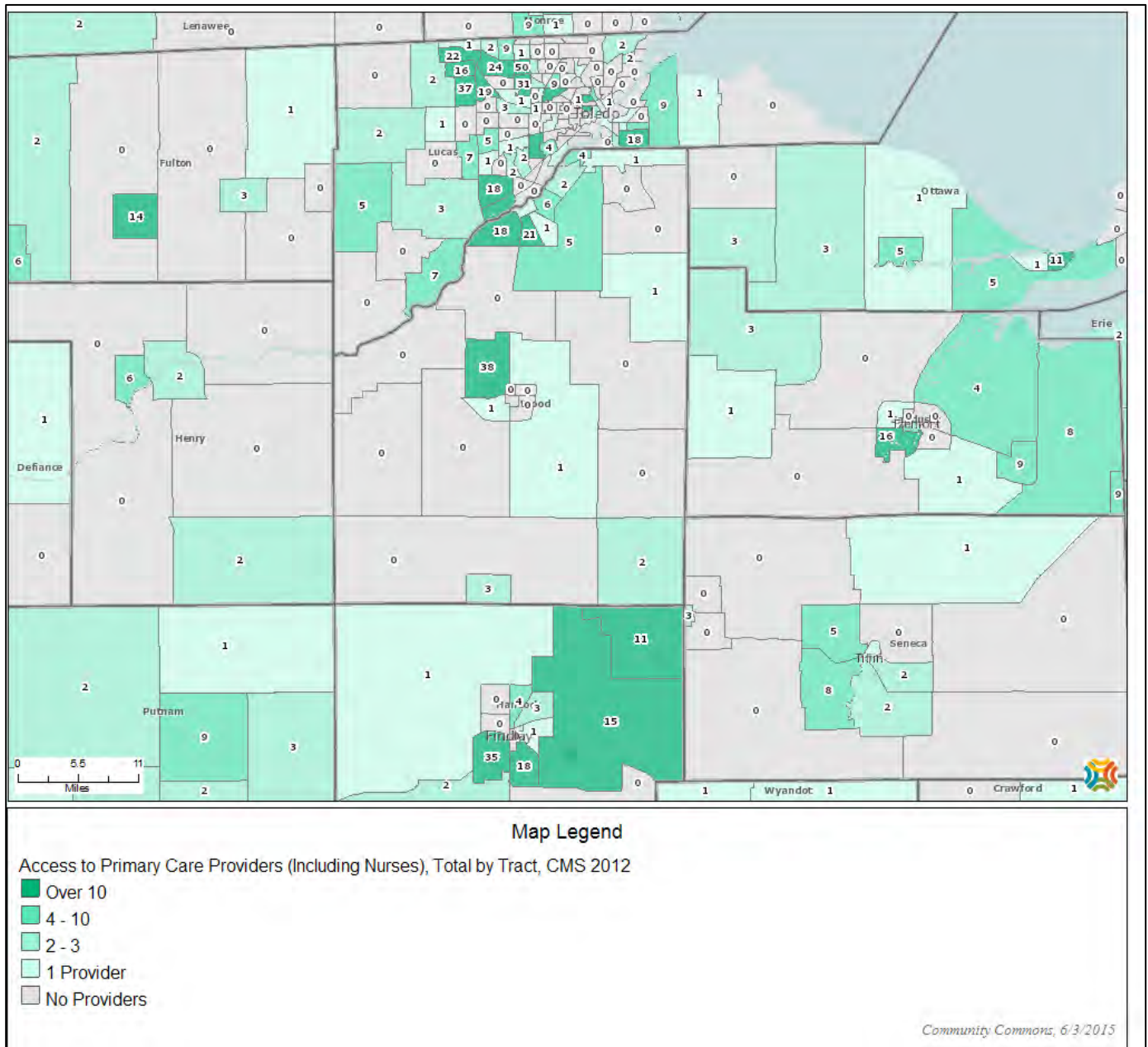


Health Professional Shortage Areas



(Source: Community Commons, updated 6/3/15)

Access to Primary Care Providers (including Nurses) by Census Tract



(Source: Community Commons, updated 6/3/15)

Adult | **CARDIOVASCULAR HEALTH**

Key Findings

Heart disease (22%) and stroke (4%) accounted for 26% of all Wood County adult deaths in 2013 (Source: ODH Information Warehouse). The 2015 Wood County Health Assessment found that 4% of adults had survived a heart attack and 3% had survived a stroke at some time in their life. More than one-fourth (26%) of Wood County adults had been diagnosed with high blood pressure, 30% had high blood cholesterol, 22% were obese, and 11% were smokers, four known risk factors for heart disease and stroke.

Heart Disease and Stroke

- In 2015, 4% of Wood County adults reported they had survived a heart attack or myocardial infarction, increasing to 15% of those over the age of 65.
- The average age of their first heart attack was 56.8 years old.
- 5% of Ohio and 4% of U.S. adults reported they had a heart attack or myocardial infarction in 2013 (Source: 2013 BRFSS).
- 3% of Wood County adults reported they had survived a stroke, increasing to 8% of those over the age of 65.
- The average age of their first stroke was 59.9 years old.
- 4% of Ohio and 3% of U.S. adults reported having had a stroke in 2013 (Source: 2013 BRFSS).
- 4% of adults reported they had angina or coronary heart disease, increasing to 16% of those over the age of 65.
- 5% of Ohio and 4% of U.S. adults reported having had angina or coronary heart disease in 2013 (Source: 2013 BRFSS).

High Blood Pressure (Hypertension)

- About one-fourth (26%) of adults had been diagnosed with high blood pressure. The 2013 BRFSS reports hypertension prevalence rates of 34% for Ohio and 31% for the U.S.
- 71% of adults with high blood pressure were taking medication for their high blood pressure
- 5% of adults were told they were pre-hypertensive/borderline high.
- 85% of adults had their blood pressure checked within the past year.
- Wood County adults diagnosed with high blood pressure were more likely to:
 - Have rated their overall health as fair or poor (77%)
 - Have been age 65 years or older (66%)
 - Have been classified as obese by Body Mass Index-BMI (43%)

Wood County Leading Types of Death 2013 (Preliminary)

Total Deaths: 1,005

1. Heart Disease (22% of all deaths)
2. Cancer (16%)
3. Chronic Lower Respiratory Diseases (4%)
4. Stroke (4%)
5. Accidents, Unintentional Injuries (3%)

(Source: ODH Information Warehouse, 2013)

Ohio Leading Types of Death 2013 (Preliminary)

Total Deaths: 110,001

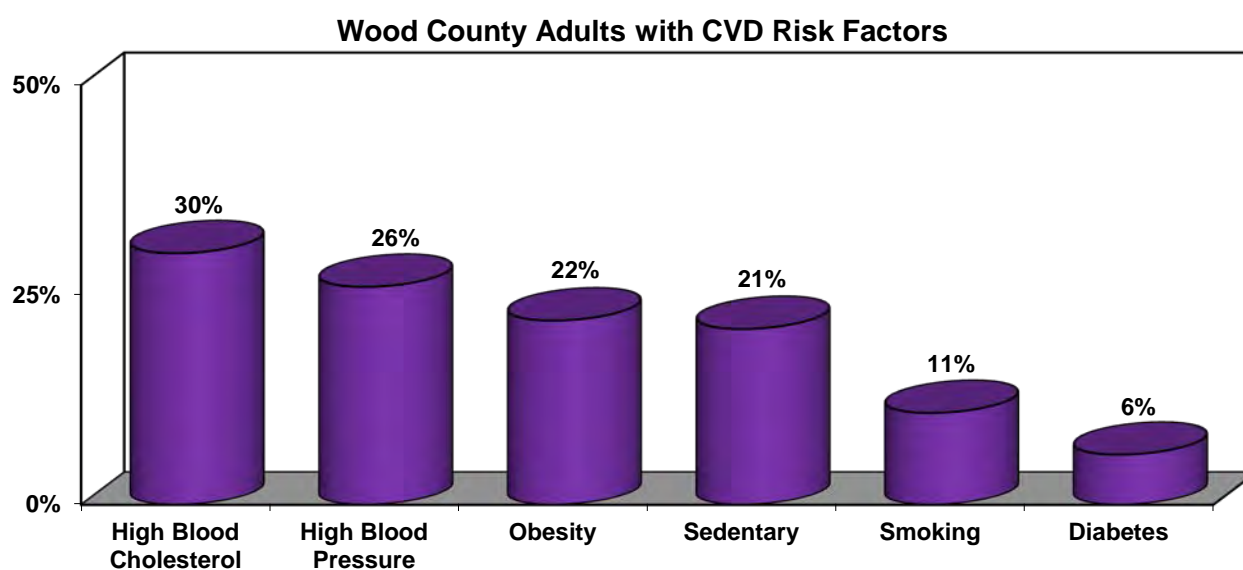
1. Heart Disease (17% of all deaths)
2. Cancers (15%)
3. Chronic Lower Respiratory Diseases (5%)
4. Stroke (4%)
5. Accidents, Unintentional Injuries (3%)

(Source: ODH Information Warehouse, 2013)

High Blood Cholesterol

- Almost one-third (30%) of adults had been diagnosed with high blood cholesterol. The 2013 BRFSS reported that 38% of Ohio and U.S. adults have been told they have high blood cholesterol.
- Nearly three-fourths (73%) of adults had their blood cholesterol checked within the past 5 years. The 2013 BRFSS reported 78% of Ohio and 76% of U.S. adults had their blood cholesterol checked within the past 5 years.
- Wood County adults with high blood cholesterol were more likely to:
 - Have been age 65 years or older (61%)
 - Have rated their overall health as fair or poor (61%)
 - Have been classified as obese by Body Mass Index-BMI (42%)

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



(Source: 2015 Wood County Health Assessment)

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Had angina	N/A	N/A	4%	5%	4%
Had a heart attack	N/A	N/A	4%	5%	4%
Had a stroke	N/A	N/A	3%	4%	3%
Had high blood pressure	35%	30%	26%	34%	31%
Had high blood cholesterol	31%	31%	30%	38%	38%
Had blood cholesterol checked within past 5 years	69%	69%	73%	78%	76%

N/A – Not available

Stroke Warning Signs and Symptoms

F.A.S.T. is an easy way to remember the sudden signs and symptoms of a stroke. When you can spot the signs, you'll know quickly that you need to call 9-1-1 for help. This is important because the sooner a stroke victim gets to the hospital, the sooner they'll get treatment. Being prompt can make a remarkable difference in their recovery. F.A.S.T is:

- **Face Drooping:** Does one side of the face droop or is it numb? Ask the person to smile.
- **Arm Weakness:** Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?
- **Speech Difficulty:** Is speech slurred, are they unable to speak, or are they hard to understand? Ask the person to repeat a simple sentence, like "the sky is blue." Is the sentence repeated correctly?
- **Time to call 911:** If the person shows any of these symptoms, even if the symptoms go away, call 9-1-1 and get them to the hospital immediately.

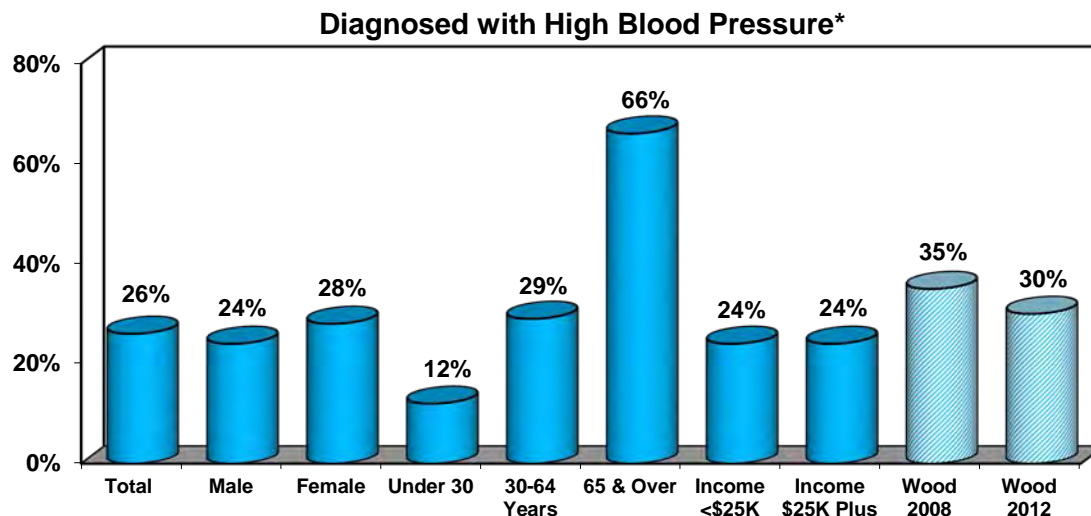
Beyond F.A.S.T- Other Symptoms to Know

- Sudden confusion or trouble understanding
- Sudden numbness or weakness of the leg
- Sudden severe headache with no known cause
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination

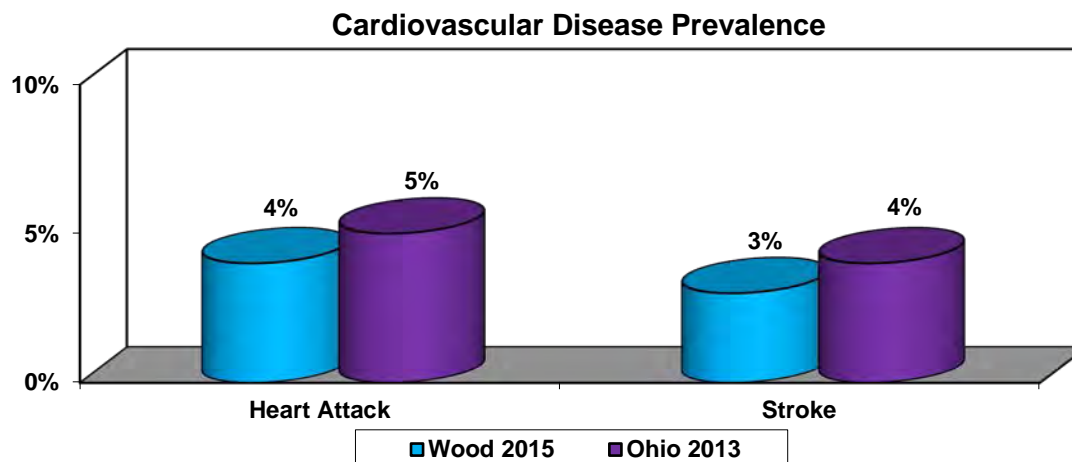
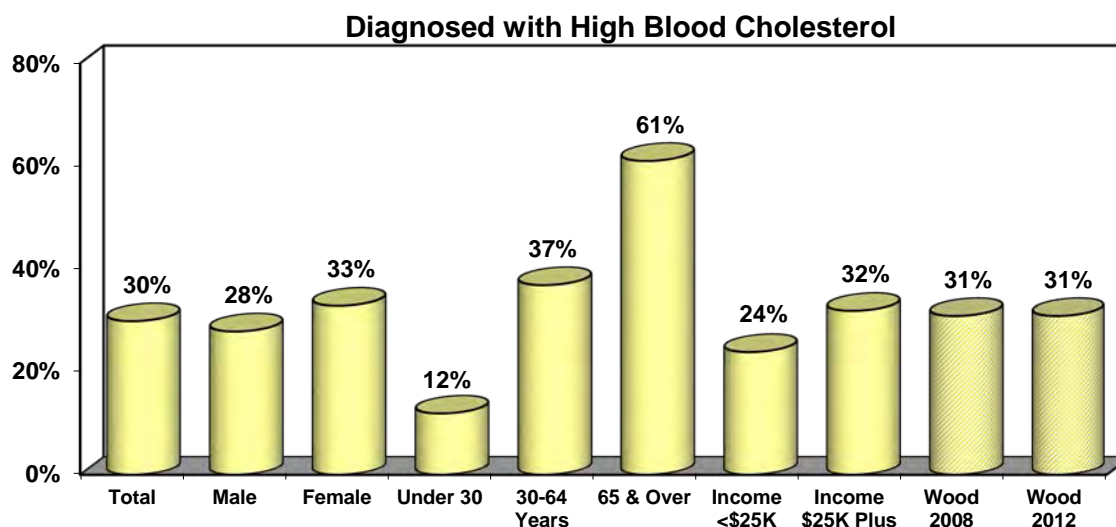


(Source: American Heart Association, Stroke Warning Signs and Symptoms, 2013, http://strokeassociation.org/STROKEORG/WarningSigns/Stroke-Warning-Signs-and-Symptoms_UCM_308528_SubHomePage.jsp)

The following graphs show the number of Wood County adults who have been diagnosed with high blood pressure, high blood cholesterol and cardiovascular disease prevalence. Examples of how to interpret the information on the first graph include: 26% of all Wood County adults have been diagnosed with high blood pressure, 24% of all Wood County males, 28% of all females, and 66% of those 65 years and older.



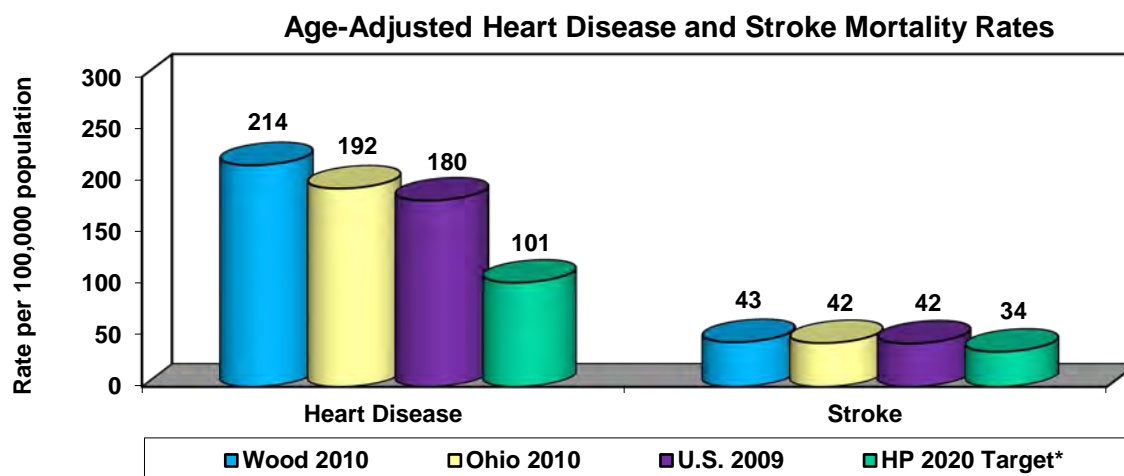
*Does not include respondents who indicated high blood pressure during pregnancy only.



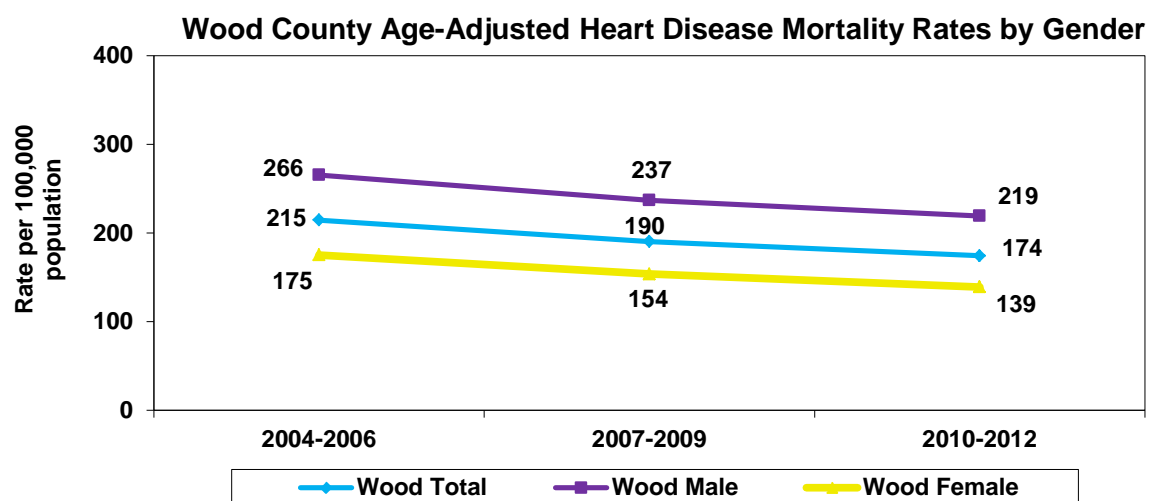
(Source: 2015 Wood Health Assessment and 2013 BRFSS)

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

- When age differences are accounted for, the statistics indicate that the 2010 Wood County heart disease mortality rate was higher than the figure for the state, the U.S. figure, and the Healthy People 2020 target.
- The Wood County age-adjusted stroke mortality rate for 2010 was similar to the state and the U.S. figure, and was higher the Healthy People 2020 target objective.
- From 2004-2012, the Wood County age-adjusted heart disease mortality rate has decreased.



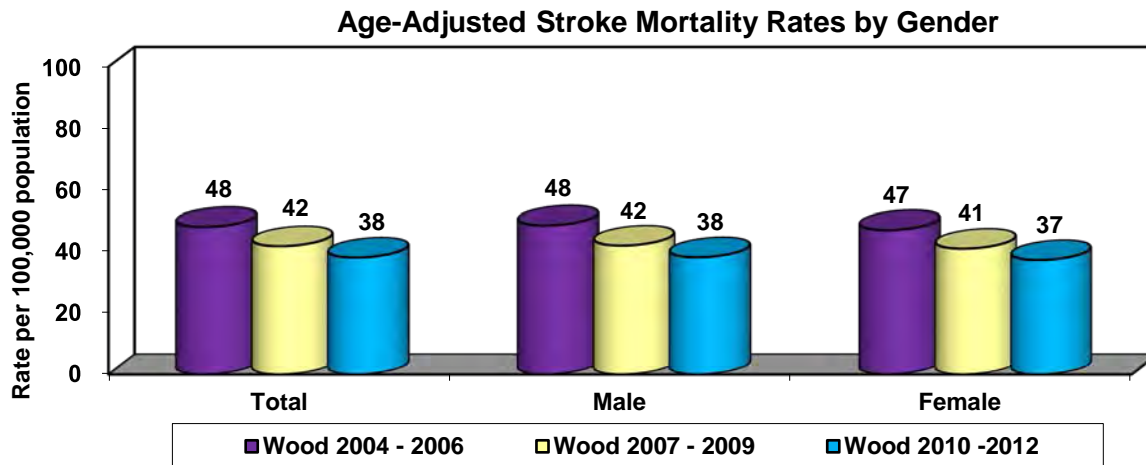
*The Healthy People 2020 Target objective for Coronary Heart Disease is reported for heart attack mortality.
(Source: ODH Information Warehouse, updated 5-23-12, Healthy People 2020)



(Source: CDC Wonder, Underlying Cause of Death, 2004-2012)

The following graph shows the age-adjusted mortality rates per 100,000 population stroke by gender.

- From 2004-2012, the Wood County stroke mortality rate was higher for males than for females.



(Source: CDC Wonder, About Underlying Cause of Death, 2004-2012)

Healthy People 2020 Objectives Heart Disease and Stroke (HDS)

Objective	Wood Survey Population Baseline	2013 U.S. Baseline*	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	26% (2015)	31% Adults age 18 and up	27%
HDS-6: Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	73% (2015)	76% Adults age 18 & up	82%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	30% (2015)	38% Adults age 20 & up with TBC>240 mg/dl	14%

*All U.S. figures age-adjusted to 2000 population standard.

(Source: Healthy People 2020, 2013 BRFSS, 2015 Wood County Health Assessment)

Adult | CANCER

Key Findings

In 2015, 12% of Wood County adults had been diagnosed with cancer at some time in their lives. The Centers for Disease Control and Prevention (CDC) indicates that from 2008-2012, a total of 1,125 Wood County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that not using tobacco products, maintaining a healthy weight, adopting a physically active lifestyle, eating more fruits and vegetables, limiting alcoholic beverages and early detection may reduce overall cancer deaths.

Wood County Incidence of Cancer, 2007-2011

All Types: 2,676 cases

- Prostate: 426 cases (16%)
- Breast: 374 cases (14%)
- Lung and Bronchus: 354 cases (13%)
- Colon and Rectum: 287 cases (11%)

In 2013, there were 239 cancer deaths in Wood County.

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 1/9/2014)

Adult Cancer

- 12% of Wood County adults were diagnosed with cancer at some point in their lives.
- Of those diagnosed with cancer, they reported the following types: other skin cancer (35%), prostate (19%), breast (14%), cervical (14%), melanoma (8%), colon (8%), multiple types (6%), endometrial (4%), ovarian (4%), thyroid (4%), lung (2%), Hodgkin's lymphoma (2%), leukemia (2%), liver (1%), and other types of cancer (2%).

12% of Wood County adults had been diagnosed with cancer at some time in their life.

Cancer Facts

- The Centers for Disease Control and Prevention (CDC) indicates that from 2008-2012, cancers caused 23% (1,125 of 4,856 total deaths) of all Wood County resident deaths. The largest percent (26%) of cancer deaths were from lung and bronchus cancer (Source: CDC Wonder).
- The American Cancer Society reports that smoking tobacco is associated with cancers of the mouth, lips, nasal cavity (nose) and sinuses, larynx (voice box), pharynx (throat), and esophagus (swallowing tube). Also, smoking has been associated with cancers of the lung, colorectal, stomach, pancreas, kidney, bladder, uterine cervix, ovary (mucinous) and acute myeloid leukemia. The 2015 health assessment project has determined that 11% of Wood County adults were current smokers and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer.

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Diagnosed with skin cancer	N/A	N/A	5%*	6%	6%
Diagnosed with any type of cancer, other than skin cancer	N/A	N/A	7%	7%	7%

N/A- Not available *Melanoma and other skin cancers are included for "diagnosed with skin cancer"

CANCER

A current smoker is defined as someone who has smoked over 100 cigarettes in their lifetime and currently smokes some or all days.

Lung Cancer

- The CDC reports that lung cancer (n=176) was the leading cause of male cancer deaths from 2008-2012 in Wood County. Cancer of the colon (n=47) male deaths and prostate cancer caused (n=48) male deaths during the same time period (Source: CDC Wonder).
- In Wood County, 10% of male adults were current smokers and 56% had stopped smoking for one or more days in the past 12 months because they were trying to quit (Source: 2015 Wood County Health Assessment).
- The CDC reports that lung cancer was the leading cause of female cancer deaths (n=117) in Wood County from 2008-2012 followed by breast (n=71) and colon (n=45) cancers (Source: CDC Wonder).
- Approximately 12% of female adults in the county were current smokers and 63% had stopped smoking for one or more days in the past 12 months because they were trying to quit (Source: 2015 Wood County Health Assessment).
- According to the American Cancer Society, smoking causes 90% 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 2015).

10% of Wood County male adults and 12% of female adults were current smokers.

Breast Cancer

- In 2015, 59% of Wood County females reported having had a clinical breast examination in the past year.
- 55% of Wood 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 2014).
- For women in their 20s and 30s, a clinical breast exam should be done at least once every 3 years. Mammograms for women in their 20s and 30s are based upon increased risk (e.g., family history, past breast cancer) and physician recommendation. Otherwise, annual mammography is recommended beginning at age 40 (Source: American Cancer Society, Facts & Figures 2015).

More than half (55%) of Wood County females over the age of 40 had a mammogram in the past year.

Colon and Rectum Cancer

- The CDC statistics indicate that colon, rectum, and anus cancer deaths accounted for 8% of all male and female cancer deaths from 2008-2012 in Wood County.
- The American Cancer Society reports several risk factors for colorectal cancer including: age; personal or family history of colorectal cancer, polyps, or inflammatory bowel disease; obesity; physical inactivity; a diet high in red or processed meat; alcohol use; long-term smoking; and possibly very low intake of fruits and vegetables.
- In the U.S., 90% of colon cancers occur in individuals over the age of 50. Because of this, the American Cancer Society suggests that every person over the age of 50 have regular colon cancer screenings. In 2015, 25% of Wood County adults over the age of 50 reported having been screened for colorectal cancers in the past 2 years.

The leading types of cancer diagnoses for Wood County adults were: other skin cancer (35%), prostate (19%), breast (14%), and cervical (14%).

Prostate Cancer

- CDC statistics indicate that prostate cancer deaths accounted for 8% of all male cancer deaths from 2008-2012 in Wood County.
- Incidence rates for prostate cancer are 60% higher in African Americans than in whites and are twice as likely to die of prostate cancer. In addition, about 60% of prostate cancers occur in men over the age of 65, and 97% occur in men 50 and older. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. 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 2015).

2015 Cancer Estimations

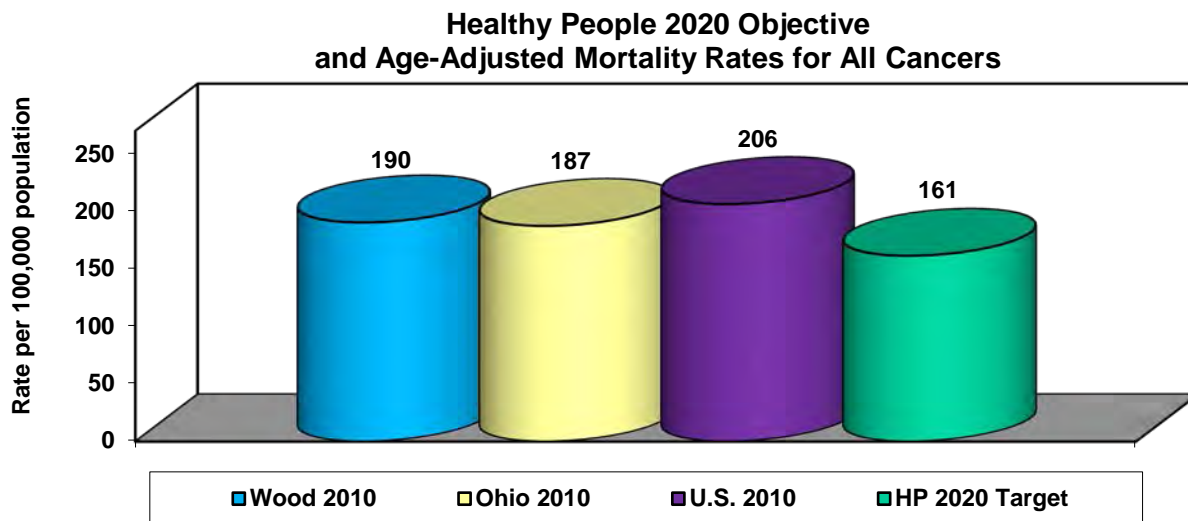
- In 2015, about 1,658,370 new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about one-quarter to one-third of the new cancer cases expected to occur in the U.S. in 2015 will be related to overweight or obesity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 589,430 Americans are expected to die of cancer in 2015.
- In 2015, about 171,000 cancer deaths will be caused by tobacco use.
- In Ohio, 65,010 new cases of cancer are expected, and 25,260 cancer deaths are expected.
- The Ohio female new breast cancer cases are expected to be 8,950.
- About 15% of all new cancer cases in Ohio are expected to be from lung and bronchus cancers.
- About 5,430 (8%) of all new cancer cases in Ohio are expected to be from colon and rectum cancers.
- The Ohio male, new prostate cancer cases are expected to be 8,150 (13%).

(Source: American Cancer Society, Facts and Figures 2015,

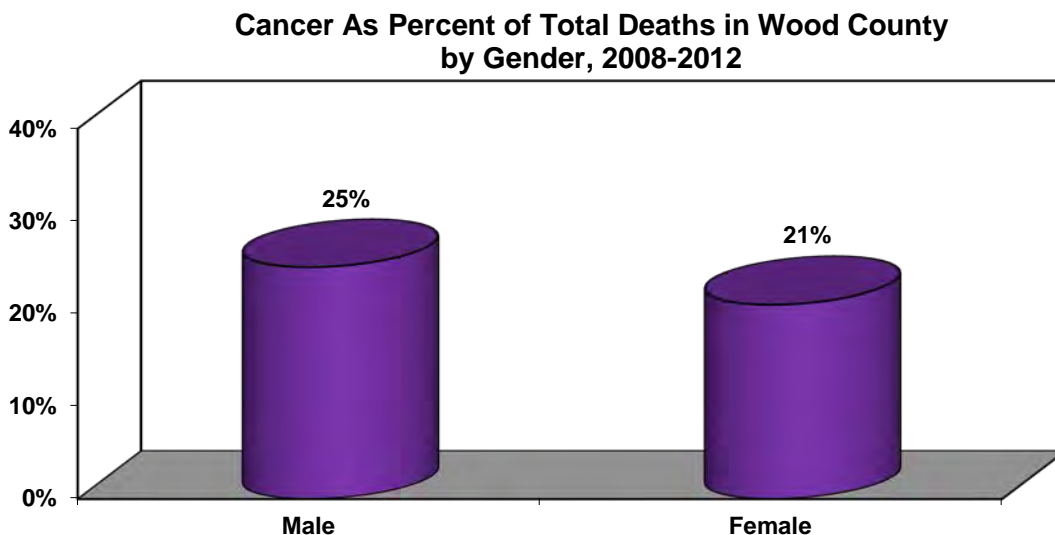
<http://www.cancer.org/acs/groups/content/@editorial/documents/document/acspc-044552.pdf>)

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

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



(Source: ODH Information Warehouse, updated 5-23-12; Healthy People 2020)



(Source: CDC Wonder, 2008-2012)

**Wood County Incidence of Cancer
2007-2011**

Type of Cancer	Number of Cases	Percent of Total Incidence of Cancer
Prostate	426	16%
Breast	374	14%
Lung and Bronchus	354	13%
Colon and Rectum	287	11%
Other/Unspecified	185	7%
Melanoma of Skin	131	5%
Bladder	111	4%
Non-Hodgkins Lymphoma	105	4%
Kidney and Renal Pelvis	92	3%
Thyroid	86	3%
Cancer and Corpus Uteri	79	3%
Pancreas	69	3%
Leukemia	60	2%
Oral Cavity & Pharynx	52	2%
Brain and CNS	44	2%
Ovary	43	2%
Stomach	31	1%
Esophagus	29	1%
Liver and Bile Ducts	28	1%
Multiple Myeloma	26	1%
Larynx	19	1%
Testis	16	<1%
Cancer of Cervix Uteri	15	<1%
Hodgkins Lymphoma	14	<1%
Total	2,676	100%

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 1/9/2014)

CANCER

Adult | DIABETES

Key Findings

In 2015, 6% of Wood County adults had been diagnosed with diabetes.

Diabetes

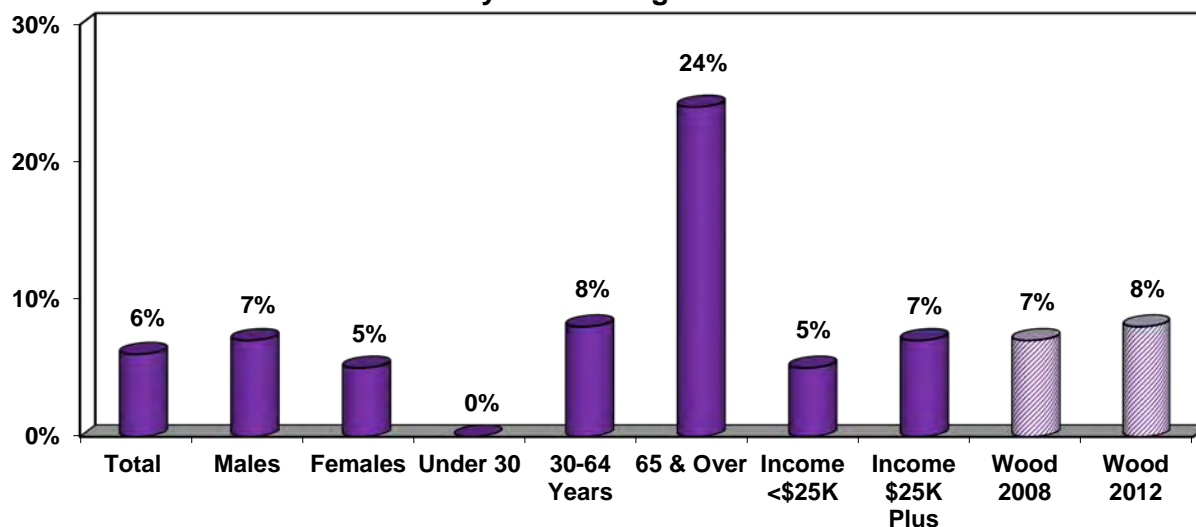
- The 2015 health assessment project has identified that 6% of Wood County adults had been diagnosed with diabetes, increasing to 24% of those over the age of 65. The 2013 BRFSS reports an Ohio and U.S. prevalence of 11%.
- 5% of adults had been diagnosed with pre-diabetes.
- Adults with diabetes were using the following to treat their diabetes: diabetes pills (86%), checking blood sugar (75%), diet control (68%), checking A1C (68%), exercise (46%), insulin (25%), and taking a class (11%).
- More than one-third (36%) of adults with diabetes rated their health as fair or poor.
- Wood County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 92% were obese or overweight
 - 85% had been diagnosed with high blood pressure
 - 74% had been diagnosed with high blood cholesterol

Diabetes Facts

- Nearly 26 million children and adults in the United States have diabetes.
- 79 million Americans have pre-diabetes.
- 1.9 million Americans are diagnosed with diabetes every year.
- Nearly 10% of the entire U.S. population has diabetes, including over 25% of seniors.
- As many as 1 in 3 American adults will have diabetes in 2050 if present trends continue.
- The economic cost of diagnosed diabetes in the U.S. is \$245 billion per year.
- 85.2% of people with type 2 diabetes are overweight or obese.
- Diabetes kills more Americans every year than AIDS and breast cancer combined.
- Diabetes is the primary cause of death for 71,382 Americans each year, and contributes to the death of 231,404 Americans annually.

(Source: American Diabetes Association, 2013 Fast Facts, <http://professional.diabetes.org/admin/UserFiles/0%20-%20Sean/FastFacts%20March%202013.pdf>)

Wood County Adults Diagnosed with Diabetes



Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Diagnosed with diabetes	7%	8%	6%	11%	11%

Diabetes Symptoms

The most common symptoms of type 1 and type 2 diabetes are:

TYPE 1 DIABETES

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

TYPE 2 DIABETES

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

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

Who is at Greater Risk for Type 2 Diabetes

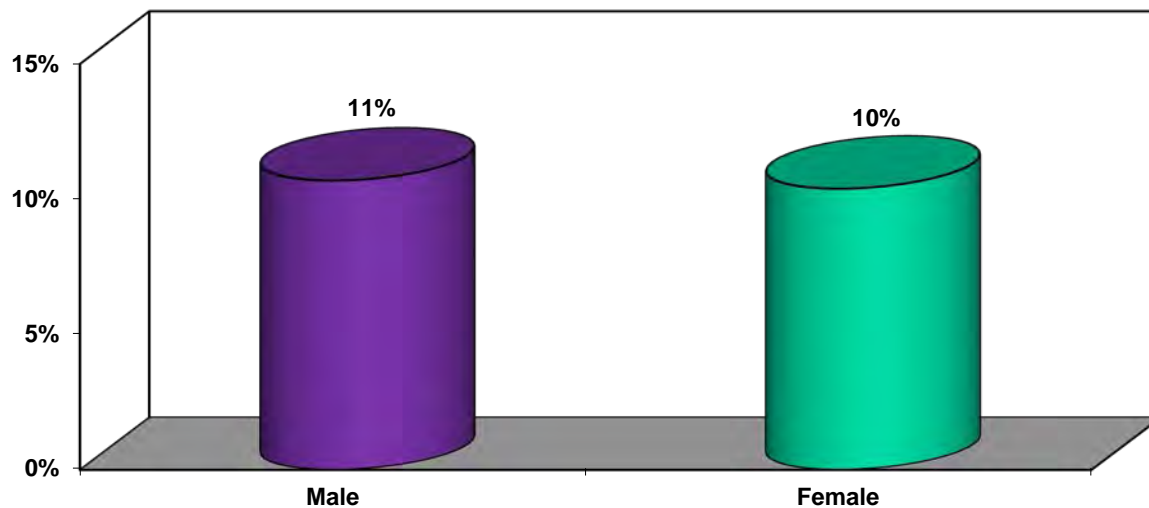
- People with impaired glucose tolerance (IGT) and/or impaired fasting glucose (IFG)
- People over age 45
- People with a family history of diabetes
- People who are overweight or obese
- People who do not exercise regularly
- People with low HDL cholesterol or high triglycerides, high blood pressure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

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

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

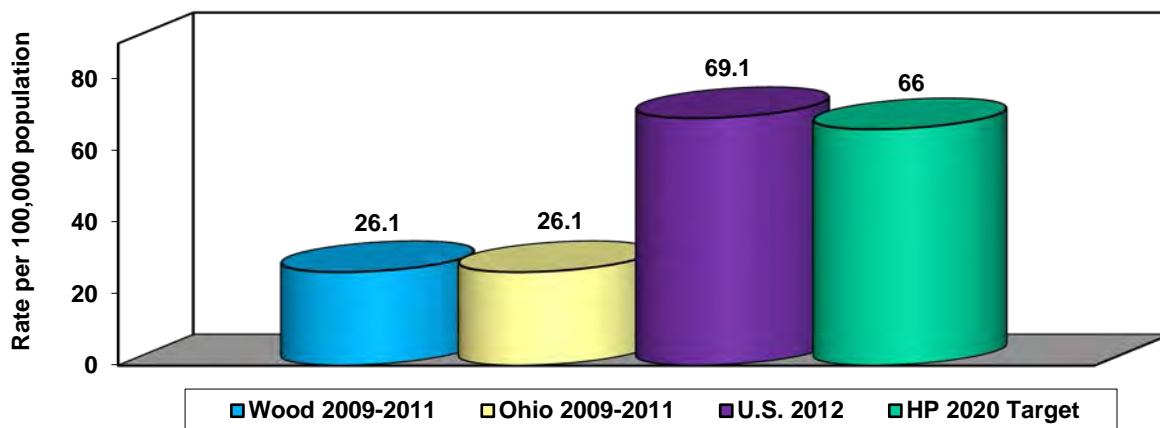
- In 2010, the prevalence of diabetes was slightly higher among males than females in Wood County.
- From 2009 to 2011, Wood County's age-adjusted diabetes mortality rate was equal to the Ohio rate, greater than the national rate, and less than the Healthy People 2020 target objective.

Wood County Prevalence of Diabetes by Gender, 2010



(Source: Network of Care: Health Indicators, Public Health Assessment and Wellness)

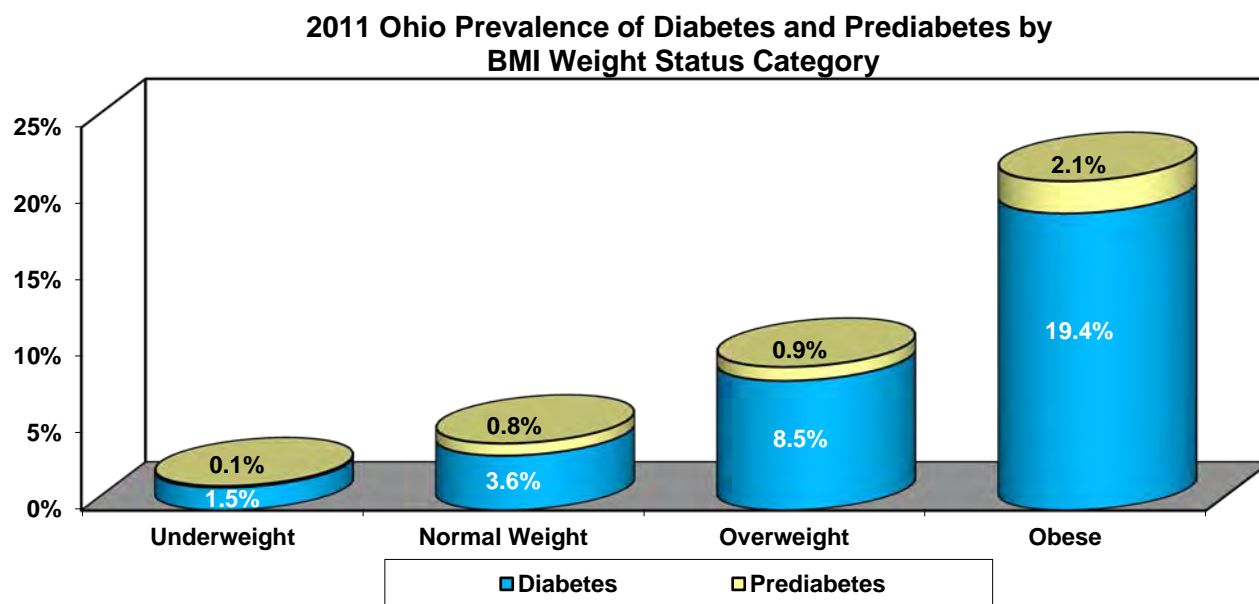
Healthy People 2020 Objective and Age-Adjusted Mortality Rates for Diabetes



(Source: Network of Care: Health Indicators, CDC, and Healthy People 2020)

The following graph shows the Ohio prevalence of diabetes and prediabetes by BMI weight status category. The following graph shows:

- The chance of developing diabetes and prediabetes increases relative to increases in BMI weight status category.



Overweight and Obese Type 2 Diabetes Risk by Sex in Ohio

Category	Increase in Risk
Overweight Men	2.4
Overweight Women	3.9
Obese Men	6.7
Obese Women	12.4

(Source: ODH, Obesity and Diabetes in Ohio 2013, from http://www.healthy.ohio.gov/~media/HealthyOhio/ASSETS/Files/diabetes/Obesity_Diabetes_Supp_2013.ashx)

Adult | ARTHRITIS

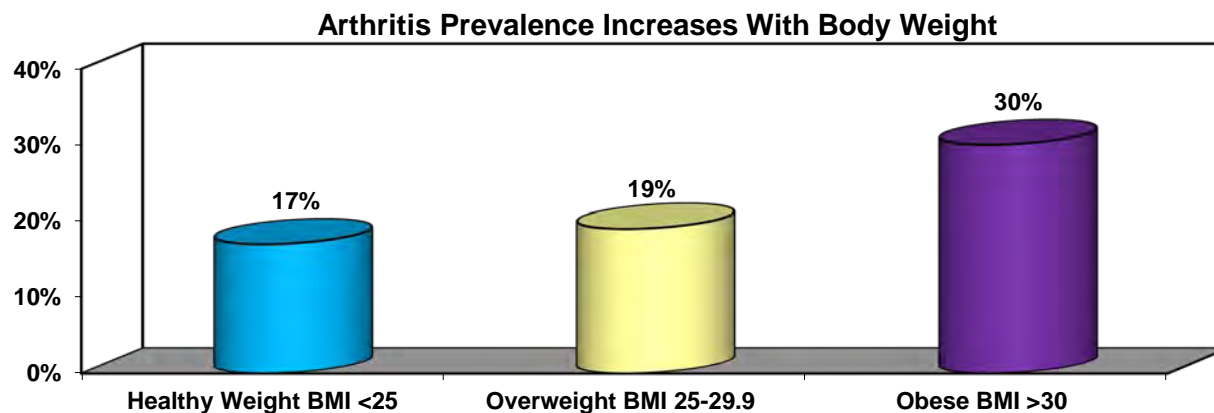
Key Findings

According to the Wood County survey data, 29% of Wood County adults were diagnosed with arthritis. According to the 2013 BRFSS, 30% of Ohio adults and 25% of U.S. adults were told they have arthritis.

29% of Wood County adults were told by a health professional that they had some form of arthritis, increasing to 68% of those over the age of 65.

Arthritis

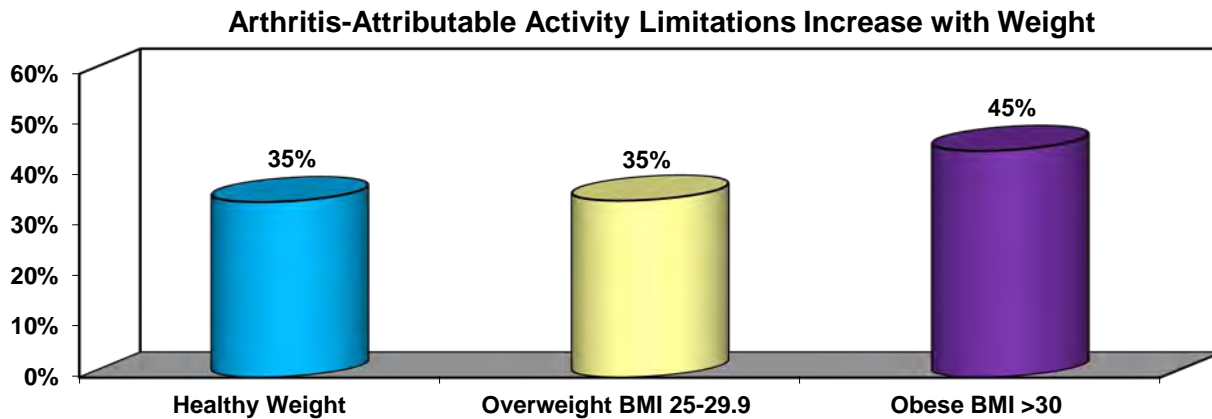
- More than one-fourth (29%) of Wood County adults were told by a health professional that they had some form of arthritis, increasing to 68% of those over the age of 65.
- According to the 2013 BRFSS, 30% of Ohio adults and 25% of U.S. adults were told they have arthritis.
- An estimated 50 million U.S. adults (about 1 in 5) report having doctor-diagnosed arthritis. About 1 in 3 of working age adults (aged 18-65) reported that arthritis limited their work. As the U.S. population ages, the number of adults with arthritis is expected to increase sharply to 67 million by 2030 (Source: CDC, *Arthritis at a Glance 2013*).
- 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).



(Source for graph: CDC Arthritis, *Morbidity and Mortality Weekly Report 2010*; 59(39):1261-1265)

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Diagnosed with arthritis	33%	27%	29%	30%	25%

25% of Wood County adults were limited in some way because of a physical, mental or emotional problem. Among those who were limited in some way, 46% were limited because of arthritis.



(Source for graph: CDC Arthritis, Morbidity and Mortality Weekly Report 2010; 59(39):999-1003)

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:

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

(Source: Centers for Disease Control and Prevention, Arthritis: Key Public Health Messages, www.cdc.gov/arthritis/basics/key.htm, updated June 19, 2014)

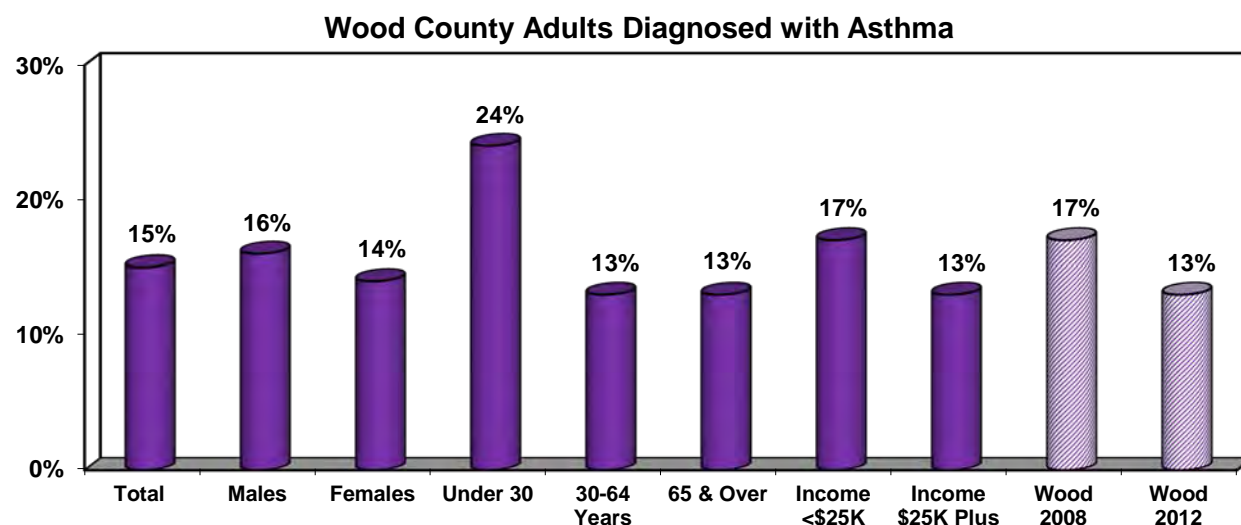
Adult | ASTHMA AND OTHER RESPIRATORY DISEASE

Key Findings

According to the Wood County survey data, 15% of adults had been diagnosed with asthma.

Asthma and Other Respiratory Disease

- In 2015, 15% of Wood County adults had been diagnosed with asthma.
- 14% of Ohio and U.S. adults have ever been diagnosed with asthma (Source: 2013 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, 2013).
- Chronic lower respiratory disease was the 3rd leading cause of death in Wood County and in Ohio, in 2013 (Source: ODH, Leading Causes of Death: 2013 Preliminary Data).

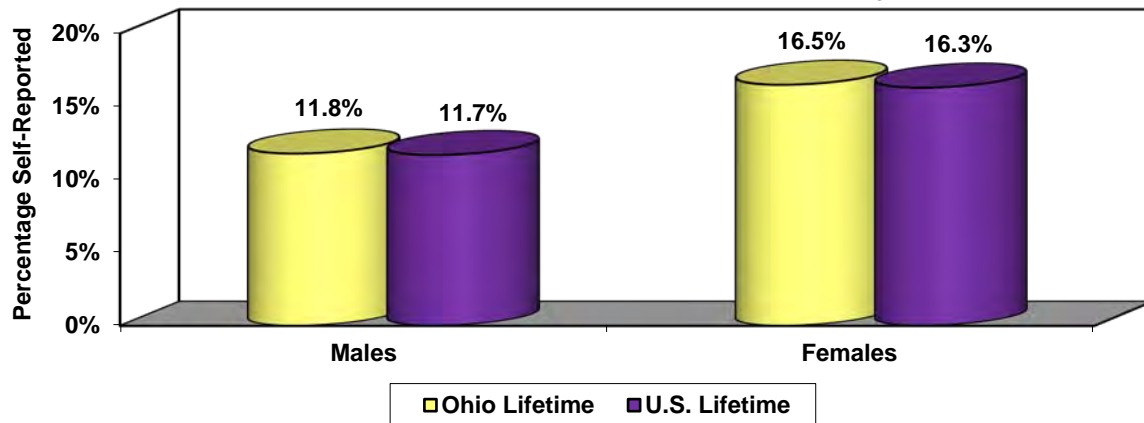


Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Had been diagnosed with asthma	17%	13%	15%	14%	14%

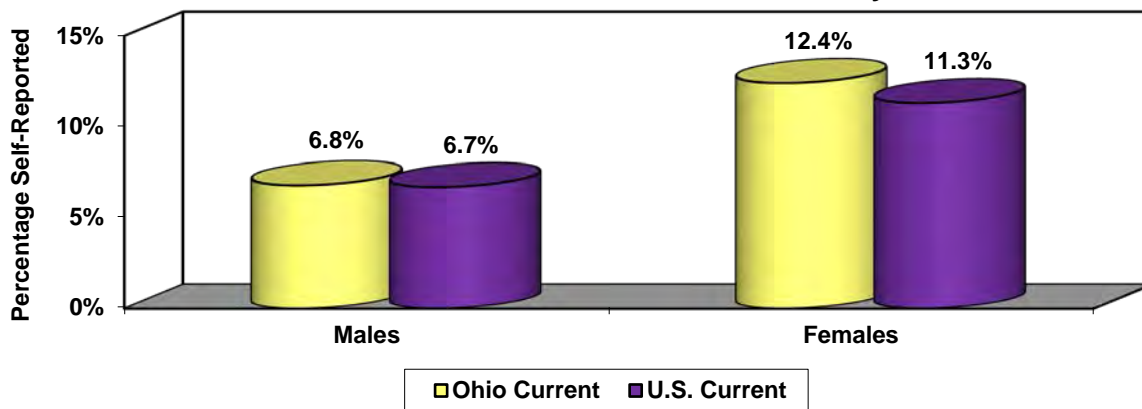
The following graphs demonstrate the lifetime and current prevalence rates of asthma by gender for Ohio and U.S. residents.

ASTHMA

Adult Lifetime Asthma Prevalence Rates By Gender



Adult Current Asthma Prevalence Rates By Gender



(Source for graphs: 2013 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 456,000 hospitalizations and 2.1 million emergency room visits annually.
- Patients with asthma reported 13.9 million visits to a doctor's office and 1.4 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, from: <http://acaai.org/news/facts-statistics/asthma>)

What Causes an Asthma Attack?

- **Tobacco Smoke:** People should never smoke near you, in your home, in your car, or wherever you may spend a lot of time if you have asthma. Tobacco smoke is unhealthy for everyone, especially people with asthma. If you have asthma and you smoke, quit smoking.
- **Dust Mites:** If you have asthma, dust mites can trigger an asthma attack. To prevent attacks, use mattress covers and pillowcase covers to make a barrier between dust mites and yourself. Do not use down-filled pillows, quilts, or comforters. Remove stuffed animals and clutter from your bedroom.
- **Outdoor Air Pollution:** This pollution can come from factories, automobiles, and other sources. Pay attention to air quality forecasts to plan activities when air pollution levels will be low.
- **Cockroach Allergens:** Get rid of cockroaches in your home by removing as many water and food sources as you can. Cockroaches are often found where food is eaten and crumbs are left behind. Cockroaches and their droppings can trigger an asthma attack, so vacuum or sweep areas that might attract cockroaches at least every 2 to 3 days.
- **Pets:** Furry pets can trigger an asthma attack. If you think a furry pet may be causing attacks, you may want to find the pet another home. If you can't or don't want to find a new home for a pet, keep it out of the person with asthma's bedroom.
- **Mold:** Breathing in mold can trigger an asthma attack. Get rid of mold in your home to help control your attacks. Humidity, the amount of moisture in the air, can make mold grow. An air conditioner or dehumidifier will help keep the humidity level low.
- **Smoke from Burning Wood or Grass:** Smoke from burning wood or other plants is made up of a mix of harmful gases and small particles. Breathing in too much of this smoke can cause an asthma attack. If you can, avoid burning wood in your home.
- **Other Triggers:** Infections linked to influenza (flu), colds, and respiratory syncytial virus (RSV) can trigger an asthma attack. Sinus infections, allergies, breathing in some chemicals, and acid reflux can also trigger attacks. Physical exercise, some medicines, bad weather, breathing in cold air, some foods, and fragrances can also trigger an asthma attack.

(Source: Centers for Disease Control, *Vital Signs, Asthma*, updated November 21, 2013, <http://www.cdc.gov/asthma/faqs.htm>)

Adult | WEIGHT STATUS

Key Findings

The 2015 Health Assessment identified that 64% of Wood County adults were overweight or obese based on Body Mass Index (BMI). The 2013 BRFSS indicates that 30% of Ohio and 29% of U.S. adults were obese by BMI. More than one-fifth (20%) of Wood County adults were obese. More than two-fifths (43%) of adults were trying to lose weight.

Adult Weight Status

- In 2015, the health assessment indicated that nearly two-thirds (64%) of Wood County adults were either overweight (42%) or obese (22%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.
- More than two-fifths (43%) of adults were trying to lose weight, 29% were trying to maintain their current weight or keep from gaining weight, and 6% were trying to gain weight.
- Wood County adults did the following to lose weight or keep from gaining weight: exercised (52%), ate less food, fewer calories, or foods low in fat (42%), ate a low-carb diet (13%), used a weight loss program (3%), smoked cigarettes (1%), took diet pills, powders or liquids without a doctor's advice (1%), participated in a prescribed dietary or fitness program (1%), went without eating 24 or more hours (<1%), took laxatives (<1%), bariatric surgery (<1%), and took prescribed medications (<1%).

22% of Wood County adults are obese.

Physical Activity

- In Wood County, 58% of adults were engaging in some type of physical activity or exercise for at least 30 minutes 3 or more days per week. 23% of adults were exercising 5 or more days per week. One-fifth (21%) of adults were not participating in any physical activity in the past week, including 1% who were unable to exercise.
- Wood County adults spent the most time doing the following physical activities in the past year: walking (31%), multiple types (27%), exercise machines (7%), strength training (7%), running/jogging (6%), cycling (3%), exercise videos (2%), group exercise classes (1%), active video games (1%), swimming (<1%), and other activities (7%). 8% of adults did not exercise at all, including <1% who were unable to do so.
- Reasons for not exercising included: time (29%), weather (22%), laziness (14%), too tired (12%), they chose not to exercise (11%), pain or discomfort (7%), could not afford a gym membership (6%), no sidewalks (5%), did not know what activities to do (3%), no gym available (2%), no walking or biking trails (2%), safety (1%), did not have child care (1%), doctor advised them not to exercise (1%), and other reasons (4%).
- The CDC recommends that adults participate in moderate exercise for at least 2 hours and 30 minutes every week or vigorous exercise for at least 1 hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, CDC also recommends muscle-strengthening activities that work all major muscle groups on 2 or more days per week (Source: CDC, *Physical Activity for Everyone*).
- On an average day, adults spent time doing the following: 2.4 hours watching television, 1.6 hours on the computer outside of work, 1.2 hours on their cell phone, and 0.4 hours playing video games.

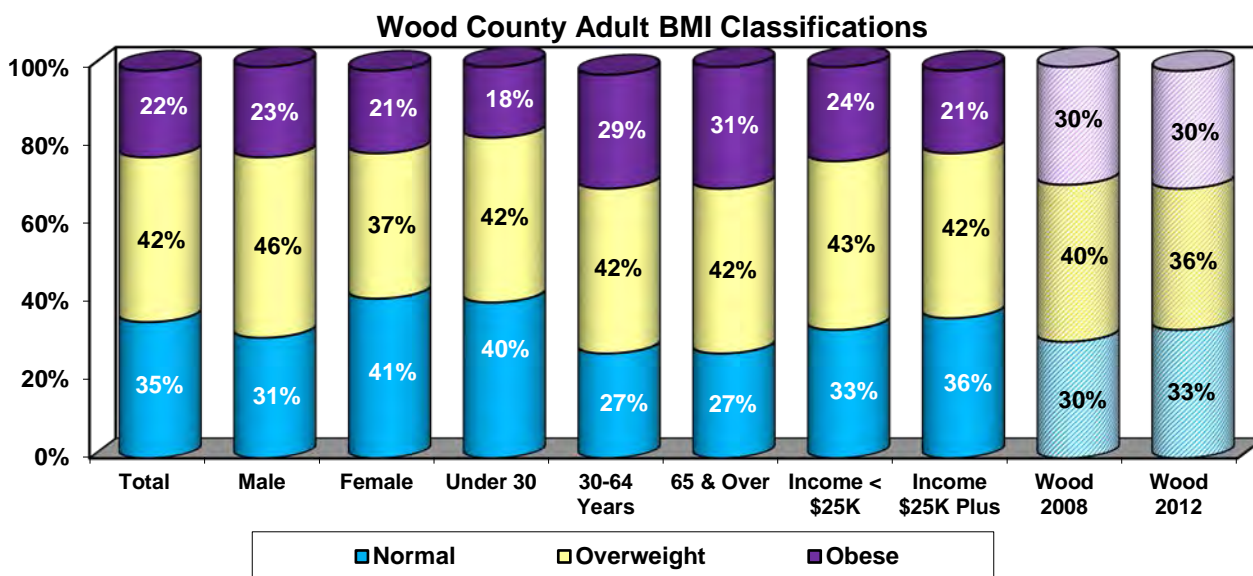
In Wood County, 58% of adults were engaging in some type of physical activity or exercise for at least 30 minutes 3 or more days per week.

Nutrition

- In 2015, 7% of adults were eating 5 or more servings of fruits and vegetables per day. 85% were eating between 1 and 4 servings per day. The American Cancer Society recommends that adults eat at least 2 ½ cups of fruits and vegetables per day to reduce the risk of cancer and to maintain good health. The 2009 BRFSS reported that only 21% of Ohio adults and 23% nationwide were eating the recommended number of servings of fruits and vegetables.
- Wood County adults reported the following reasons they chose the types of food they ate: taste (74%), enjoyment (65%), healthiness of food (60%), ease of preparation (55%), cost (51%), availability (49%), food they were used to (35%), time (32%), nutritional content (30%), calorie content (25%), what their spouse prefers (20%), what their child prefers (14%), if it is organic (8%), if it is genetically modified (5%), health care provider's advice (2%), and other reasons (2%).
- 15% of adults drank soda pop, punch, Kool-Aid, sports drinks, energy drinks, or other fruit-flavored drinks at least once per day, and 44% did not drink any of the above drinks in the past 7 days.
- Wood County adults reported that they ate most of their food at: home (76%), multiple places-including home (13%), restaurants (3%), work (3%), fast food (2%), and other places (3%).

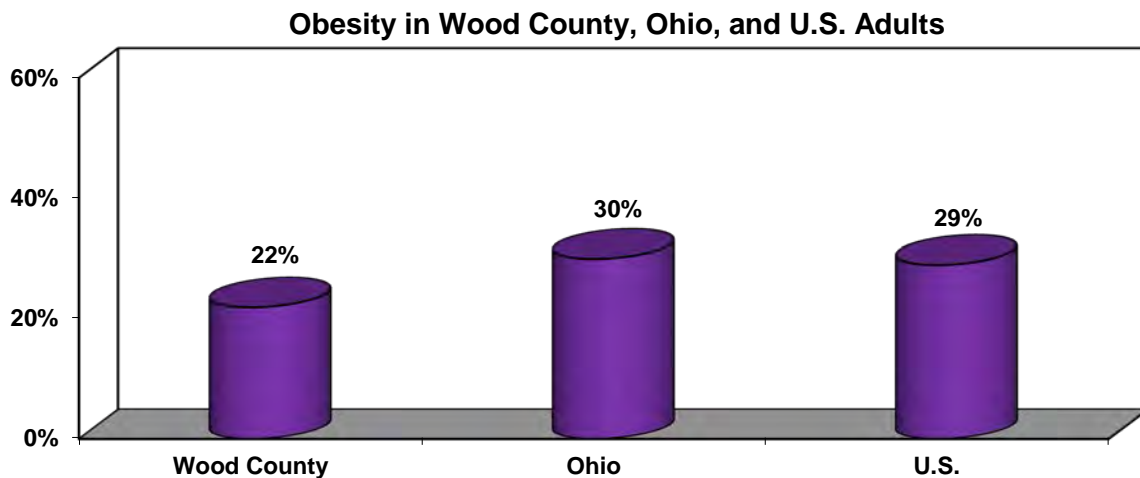
More than two-fifths (43%) of Wood County adults were trying to lose weight.

The following graph shows the percentage of Wood County adults who are overweight or obese by Body Mass Index (BMI). Examples of how to interpret the information include: 35% of all Wood County adults were classified as normal weight, 42% were overweight, and 22% were obese.



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

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



(Source: 2015 Wood County Health Assessment and 2013 BRFSS)

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Obese	30%	30%	22%	30%	29%
Overweight	40%	36%	42%	35%	35%
Ate 5 or more servings of fruits/vegetables per day	N/A	16%	7%	21%*	23%*

N/A – Not available

* 2009 BRFSS

Obesity Facts

- More than one-third of U.S. adults (34.9%) are obese.
- 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 (47.8%) followed by Hispanics (42.5%), non-Hispanic whites (32.6%), and non-Hispanic Asians (10.8%).
- In 2012, no state had a prevalence of obesity less than 20%.

(Source: CDC, *Adult Obesity Facts*, updated March 28, 2014, <http://www.cdc.gov/obesity/data/adult.html>)

Adult | TOBACCO USE

Key Findings

In 2015, 11% of Wood County adults were current smokers and 18% were considered former smokers. In 2014, the American Cancer Society (ACS) stated that tobacco use was the most preventable cause of death worldwide, and is responsible for the deaths of approximately half of long-term users. Each year, tobacco use is responsible for almost 6 million premature deaths, 80% of which are in low-and middle-income countries, and by 2030, this number is expected to increase to 8 million. (Source: Cancer Facts & Figures, American Cancer Society, 2014)

In 2015, 11% of Wood County adults were current smokers.

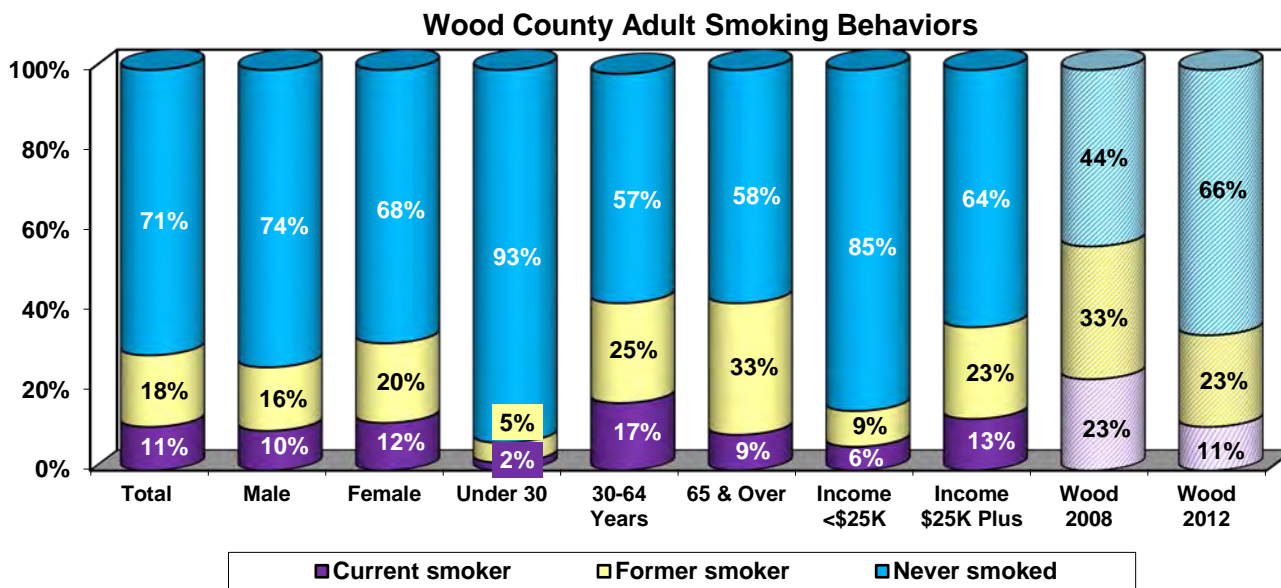
Adult Tobacco Use Behaviors

- The 2015 health assessment identified that one in nine (11%) Wood County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoke some or all days). The 2013 BRFSS reported current smoker prevalence rates of 23% for Ohio and 19% for the U.S.
- Nearly one-fifth (18%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). The 2013 BRFSS reported former smoker prevalence rates of 25% for Ohio and the U.S.
- Wood County adult smokers were more likely to:
 - Have rated their overall health as poor (18%)
 - Have been ages 30-64 (17%)
 - Be married (16%)
 - Have incomes more than \$25,000 (13%)
- Wood County adults used the following tobacco products in the past year: cigarettes (16%), cigars (8%), e-cigarettes (5%), hookah (3%), Black and Milds (2%), chewing tobacco (1%), snuff (1%), swishers (1%), cigarillos (1%), roll-your-own (1%), flavored cigarettes (1%), pipes (1%), little cigars (<1%), and snus (<1%).
- 59% of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Current smoker	23%	11%	11%	23%	19%
Former smoker	33%	23%	18%	25%	25%
Tried to quit smoking	52%	44%	59%	N/A	N/A

N/A – Not available

The following graph shows the percentage of Wood County adults who used tobacco. Examples of how to interpret the information include: 11% of all Wood County adults were current smokers, 18% of all adults were former smokers, and 71% had never smoked.



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

59% of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.

Smoke-free Living: Benefits & Milestones

According to the American Heart Association and the U.S. Surgeon General, this is how your body starts to recover:

- In your first 20 minutes after quitting: your blood pressure and heart rate recover from the cigarette-induced spike.
- After 12 hours of smoke-free living: the carbon monoxide levels in your blood return to normal.
- After two weeks to three months of smoke-free living: your circulation and lung function begin to improve.
- After one to nine months of smoke-free living: clear and deeper breathing gradually returns as coughing and shortness of breath diminishes; you regain the ability to cough productively instead of hacking, which cleans your lungs and reduce your risk of infection.
- One year after quitting smoking, a person's risk of coronary heart disease is reduced by 50 percent.
- Five to 15 years after quitting smoking, a person's risk of stroke is similar to that of a nonsmoker.
- After 10 years of smoke-free living, your lung cancer death rate is about half that of a person who has continued to smoke. The risk of other cancers, such as throat, mouth, esophagus, bladder, cervix and pancreas decreases too.

(Source: AHA, Smoke-free Living: Benefits & Milestones, 2012, from:
http://www.heart.org/HEARTORG/GettingHealthy/QuitSmoking/QuittingSmoking/Smoke-free-Living-Benefits-Milestones_UCM_322711_Article.jsp)

Electronic Cigarettes Facts

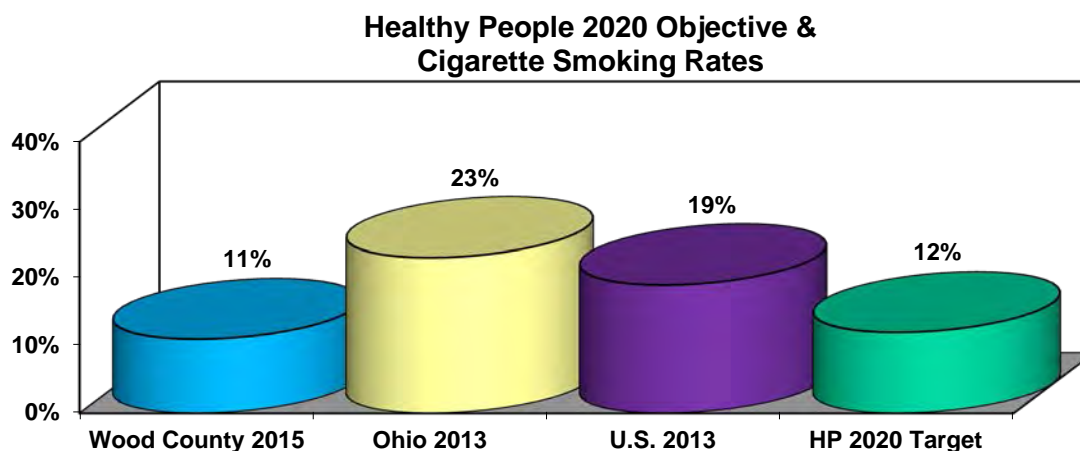
- Electronic cigarettes (e-cigarettes) are a type of electronic smoking device, resembling cigarettes. They can also look like pipes, pens, or USB memory sticks.
- E-cigarettes cost approximately \$30-60, and refill cartridges cost \$7-\$10. More recently, disposable e-cigarettes that “last up to two packs” are being sold for under \$10 in local and national convenience stores.
- Cartridges generally contain 10-20 mg of nicotine. However, as e-cigarettes are unregulated by the Food and Drug Administration (FDA), their contents and the level of these contents can be highly variable.
- Ever use of e-cigarettes is highest among current cigarette smoking adults in the U.S. and increased from 9.8% in 2010 to 21.2% in 2011 to 32% in 2012.
- Early studies by the FDA found varying levels of nicotine and other potentially harmful ingredients, including cancer-causing substances and di-ethylene glycol, which is found in anti-freeze. However, these substances were found at much lower levels than in traditional cigarettes.
- The awareness and use of electronic cigarettes are increasing. In 2011, 6 of 10 U.S. adults were aware of electronic cigarettes with 21% of smokers having ever used an electronic cigarette.
- Nicotine is found in both inhaled and exhaled vapor of electronic cigarettes. Studies have also found heavy metals, silicates, and cancer-causing compounds in exhaled e-cigarette vapor.

(Source: Philadelphia Department of Public Health, “Electronic Cigarette Fact sheet,” published February 2014, from: http://www.smokefreephilly.org/smokfree_philly/assets/File/Electronic%20Cigarette%20Fact%20Sheet_2_27_14.pdf & Legacy for Health, Tobacco Fact Sheet, May 2014, from: <http://www.legacyforhealth.org/content/download/582/6926/file/LEG-FactSheet-eCigarettes-JUNE2013.pdf>)

18% of Wood County adults indicated that they were former smokers.

The following graph shows Wood 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. This graph shows:

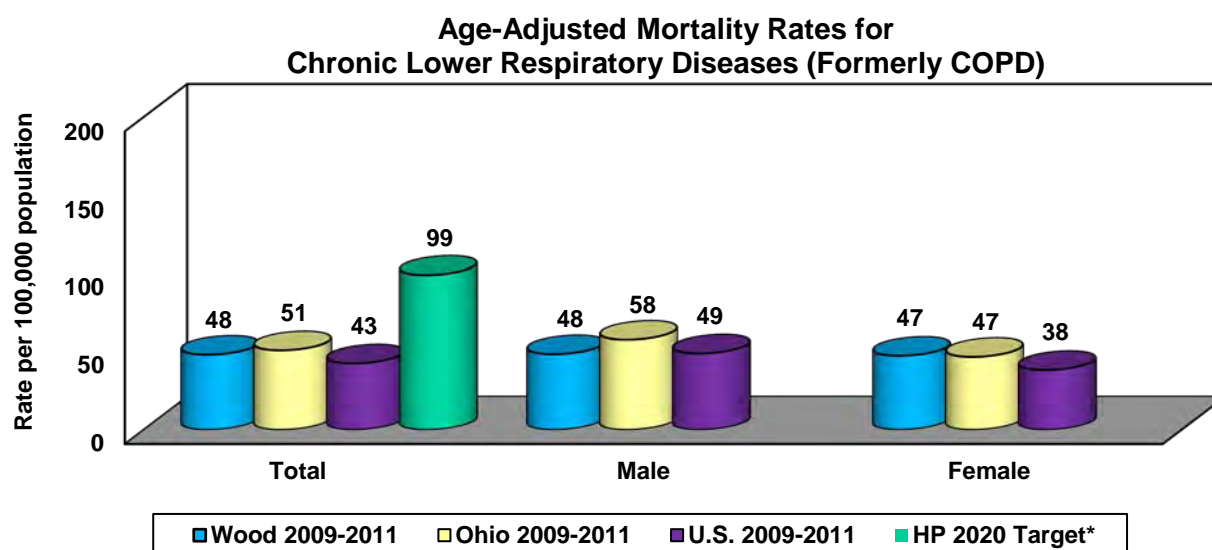
- Wood County adult cigarette smoking rate was lower than the Ohio and U.S. rates and the Healthy People 2020 Goal.



(Source: 2015 Wood County Health Assessment, 2013 BRFSS and Healthy People 2020)

The following graphs show Wood County, Ohio, and U.S. age-adjusted mortality rates per 100,000 population for chronic lower respiratory diseases (formerly COPD) in comparison with the Healthy People 2020 objective and the percentage of Wood County and Ohio mothers who smoked during pregnancy. These graphs show:

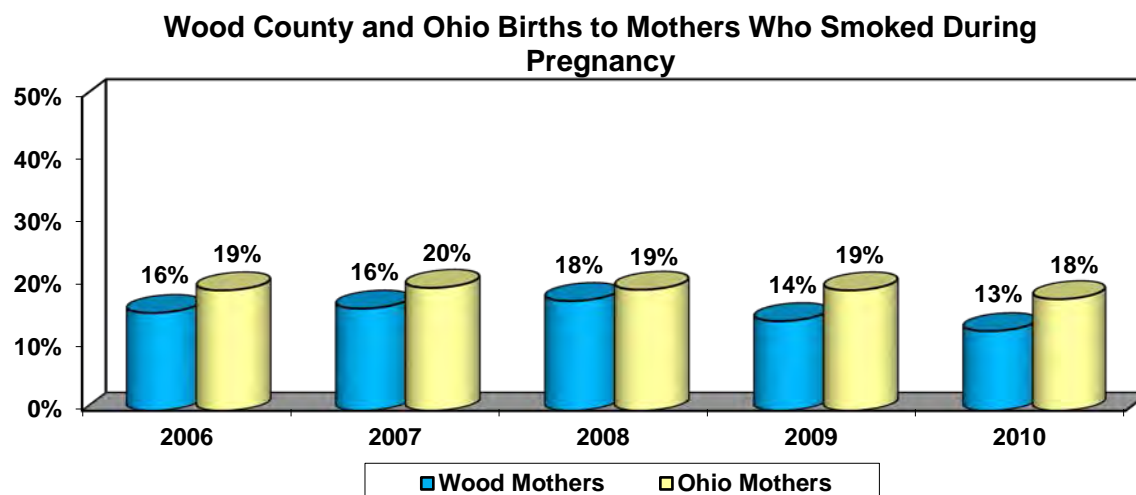
- From 2009-2011, Wood County's age-adjusted mortality rate for Chronic Lower Respiratory Disease was lower than the Ohio and the Healthy People 2020 target objective, but higher than the U.S. rate.
- Disparities existed by gender for chronic lower respiratory disease mortality rate. The 2009-2011 Wood County male rates were higher than the Wood County female rates.
- From 2006-2010 the percentage of mothers who smoked during pregnancy in Wood County was lower than the Ohio rate.



(Source: ODH Information Warehouse and Healthy People 2020)

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

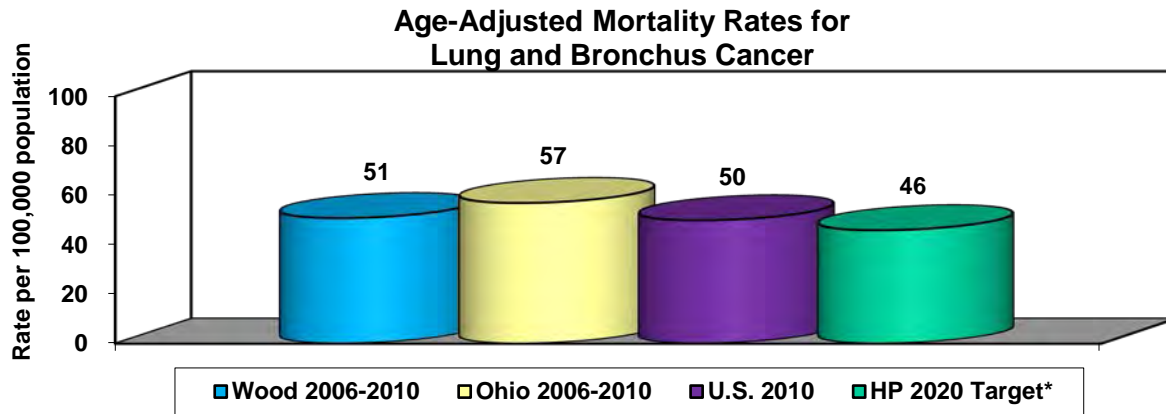
**HP2020 does not report different goals by gender.



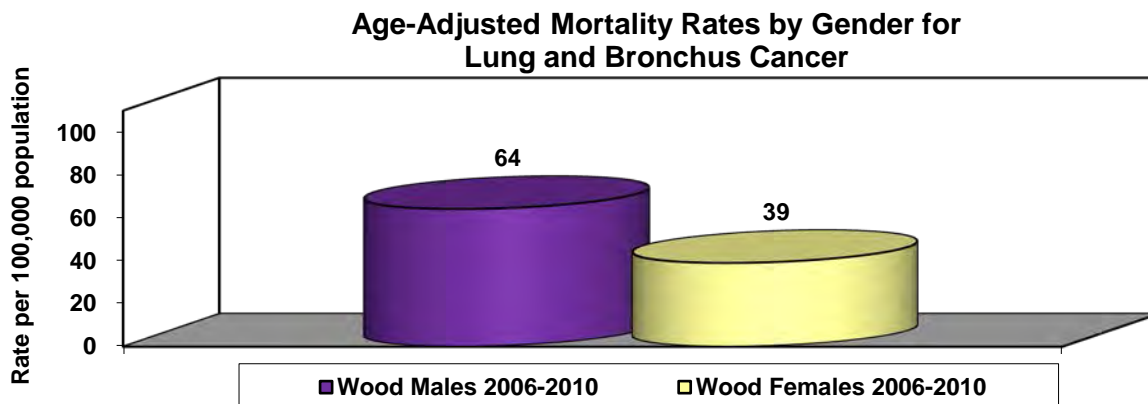
(Source: ODH Births, Vital Statistics Annual Birth Summaries by Year, 2006-2010)

The following graphs show Wood County, Ohio, and U.S. age-adjusted mortality rates per 100,000 population for lung and bronchus cancer in comparison with the Healthy People 2020 objective and Wood County mortality rates by gender. These graphs show:

- Disparities existed by gender for Wood County lung and bronchus cancer age-adjusted mortality rates. The 2006-2010 Wood male rates were substantially higher than the Wood female rates.



*Healthy People 2020 Target data is for lung cancer only
(Sources: Healthy People 2020, National Cancer Institute, ODH Information Warehouse, updated 2014)



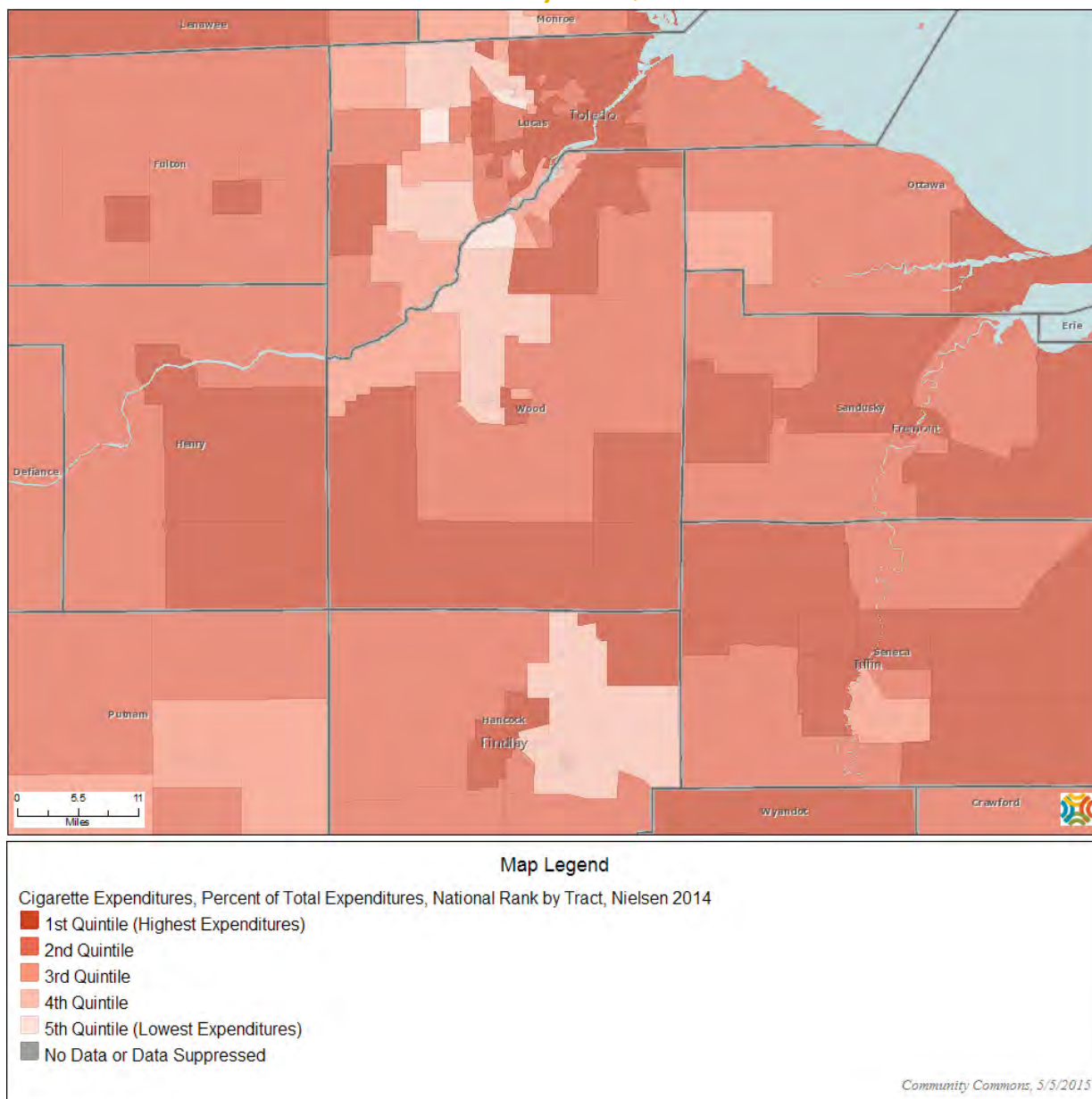
(Source: ODH Information Warehouse, updated 2014)

U.S. Adult Smoking Facts

- The percentage of American adults who smoke decreased from (20.9%) in 2005 to (19.3%) in 2010.
- About 1 in 5 (46.6 million) adults still smoke.
- 443,000 Americans die of smoking or exposure to secondhand smoke each year.
- More men (about 22%) than women (about 17%) smoke.
- Adults living below poverty level (29%) are more likely to smoke than adults living at or above poverty level (18%).
- Smoking rates are higher among people with a lower education level.

(Source: CDC, Vital Signs, Tobacco Use: Smoking & Secondhand Smoke, September 2011, <http://www.cdc.gov/VitalSigns/AdultSmoking/#LatestFindings>)

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



(Source: Community Commons, updated 12/9/2014)

ADULT TOBACCO

Adult | ALCOHOL CONSUMPTION

Key Findings

In 2015, the Health Assessment indicated that 13% of Wood County adults were considered frequent drinkers (drank an average of three or more days per week, per CDC guidelines). 30% of adults who drank had five or more drinks (for males) and 4 or more drinks (for females) on one occasion (binge drinking) in the past month. Eight percent of adults drove after having perhaps too much to drink.

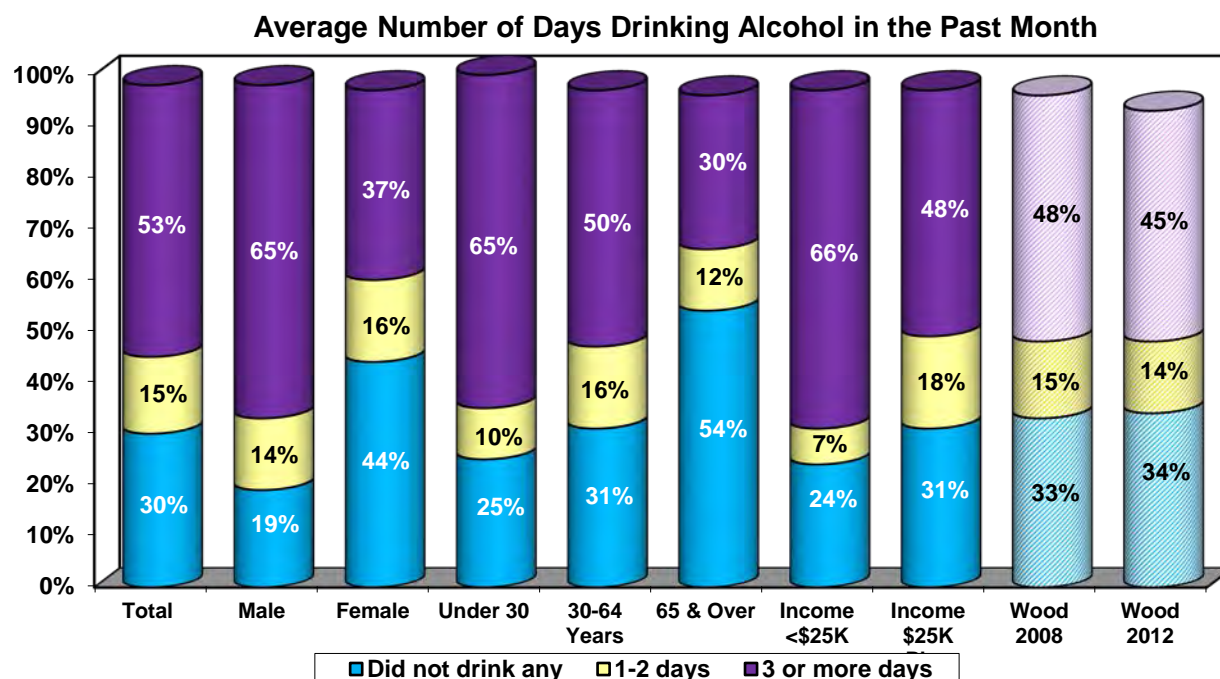
68% of Wood County adults had at least one alcoholic drink in the past month.

Adult Alcohol Consumption

- In 2015, 68% of the Wood County adults had at least one alcoholic drink in the past month, increasing to 75% of those under the age of 30 and 79% of males. The 2013 BRFSS reported current drinker prevalence rates of 53% for Ohio and 55% for the U.S.
- One-in-eight (13%) adults were considered frequent drinkers (drank on an average of three or more days per week).
- Of those who drank, Wood County adults drank 3.2 drinks on average, increasing to 4.6 drinks for those with incomes less than \$25,000.
- One-fifth (20%) Wood County adults were considered binge drinkers. The 2013 BRFSS reported binge drinking rates of 17% for Ohio and for the U.S.
- 30% of those current drinkers reported they had five or more alcoholic drinks (for males) or 4 or more drinks (for females) on an occasion in the last month and would be considered binge drinkers by definition.

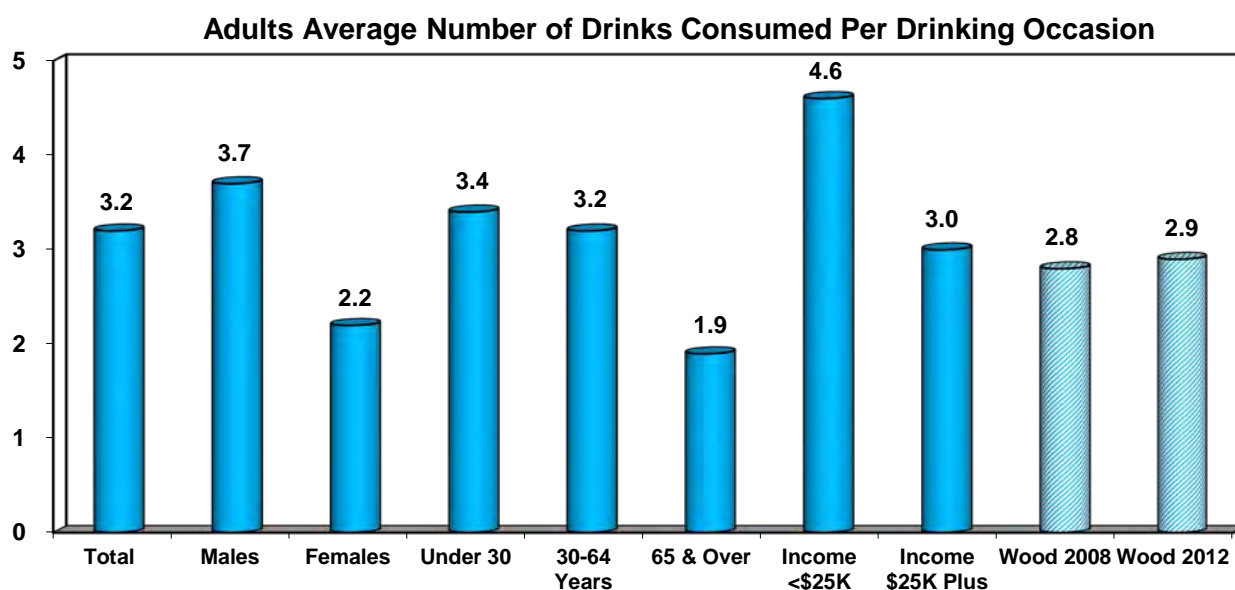
Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Drank alcohol at least once in past month	63%	59%	68%	53%	55%
Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)	29%	24%	20%	17%	17%

The following graphs show the percentage of Wood County adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 30% of all Wood County adults did not drink alcohol, 19% of Wood County males did not drink, and 44% of adult females reported they did not drink.



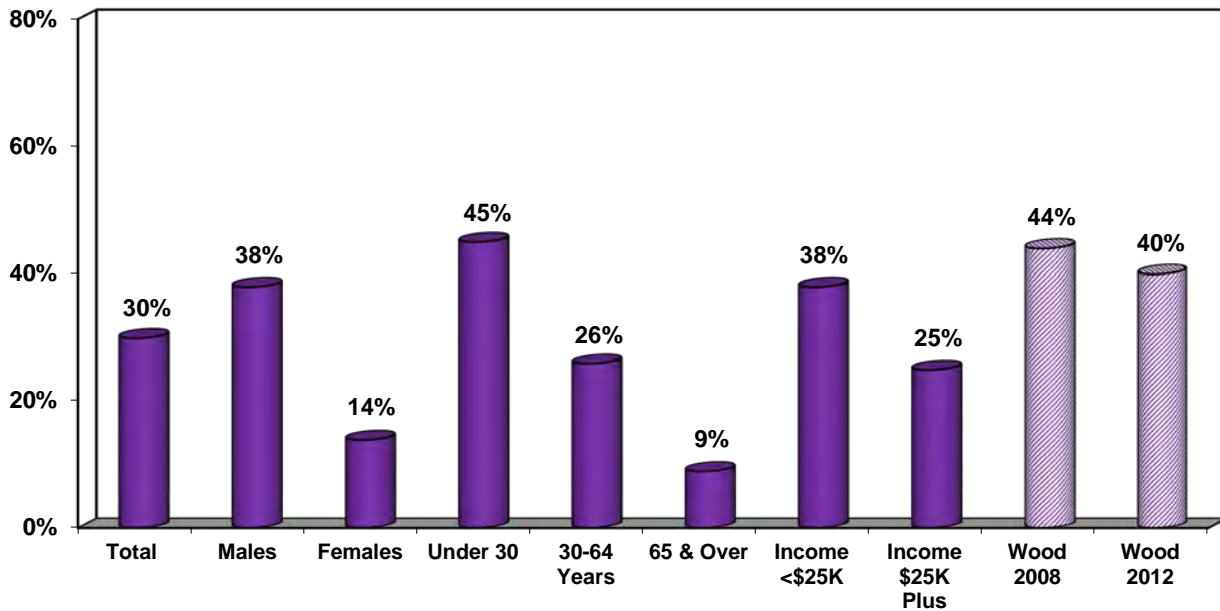
Percentages may not equal 100% as some respondents answered "don't know"

13% of Wood County adults were considered frequent drinkers (drank on an average of three or more days per week).



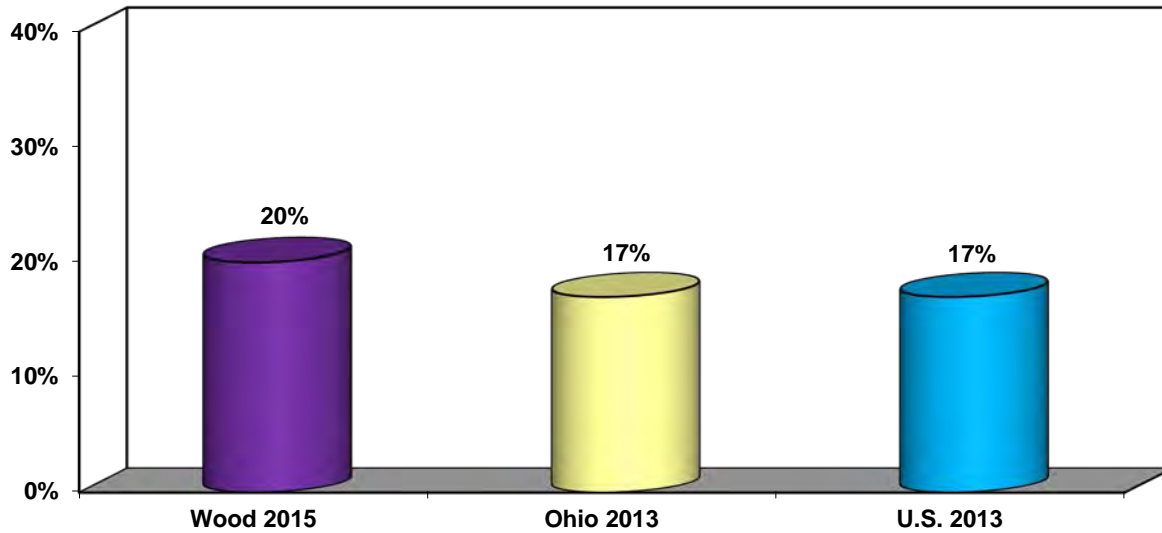
The following graphs show the percentage of Wood County drinkers who binge drank in the past month and a comparison of Wood County binge drinkers with Ohio and U.S.

Wood County Adult Drinkers Who Binge Drank in Past Month*



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

Adult Binge Drinkers*



(Source: 2013 BRFSS, 2015 Wood County Health Assessment)

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

The following table shows the cities of Bowling Green and Perrysburg, Wood County, and Ohio motor vehicle accident statistics.

	City of Bowling Green 2014	City of Perrysburg 2014	Wood County 2014	Ohio 2014
Total Crashes	573	698	3,635	281,074
Alcohol-Related Total Crashes	10	18	134	12,401
Fatal Injury Crashes	1	0	14	920
Alcohol-Related Fatal Crashes	0	0	1	270
Alcohol Impaired Drivers in Crashes	10	18	135	12,274
Injury Crashes	120	135	794	69,658
Alcohol-Related Injury Crashes	3	7	51	5,021
Property Damage Only	452	563	2,827	210,496
Alcohol-Related Property Damage Only	7	11	82	7,110
Deaths	1	0	15	1,007
Alcohol-Related Deaths	0	0	1	295
Total Non-Fatal Injuries	162	193	1,136	100,186
Alcohol-Related Injuries	5	8	66	6,985

(Source: Ohio Department of Public Safety, Crash Reports, Updated 5/5/15, Traffic Crash Facts)

Caffeinated Alcoholic Beverages

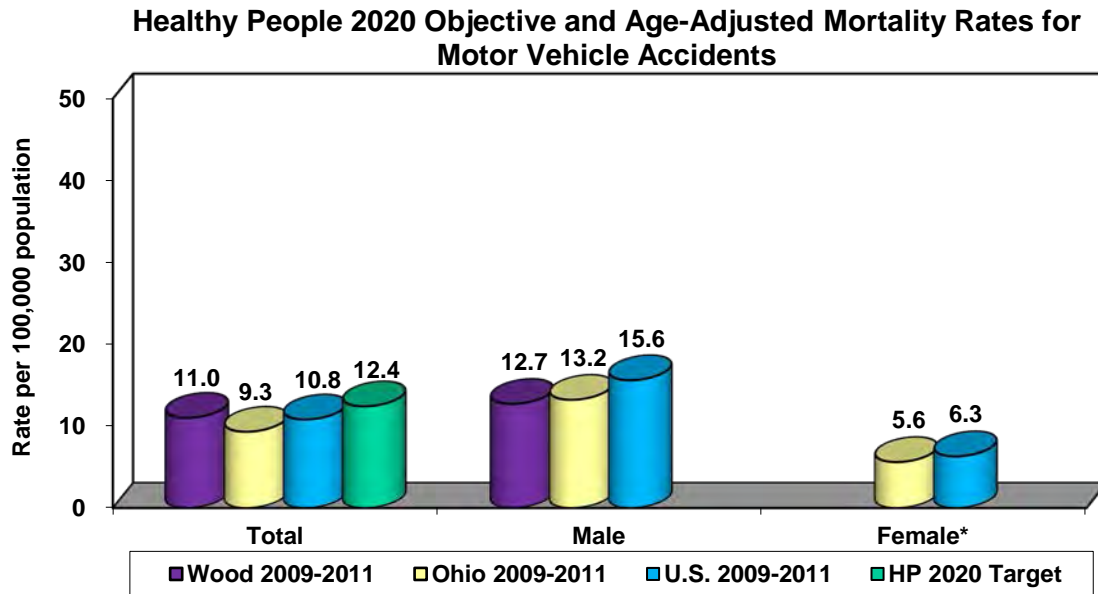
- Excessive alcohol consumption is responsible for about 88,000 deaths and 2.5 million years of potential life lost (YPLL) in the United States each year.
- Drinkers who consume alcohol mixed with energy drinks are 3 times more likely to binge drink than drinkers who do not report mixing alcohol with energy drinks.
- Drinkers who consume alcohol with energy drinks are about twice as likely as drinkers who do not report mixing to report being taken advantage of sexually, to report taking advantage of someone else sexually, and to report riding with a driver who was under the influence of alcohol.

(Source: CDC, Alcohol and Public Health, Fact Sheets, Caffeinated Alcoholic Beverages, March 2014, <http://www.cdc.gov/alcohol/fact-sheets/cab.htm>)

Motor Vehicle Accidents

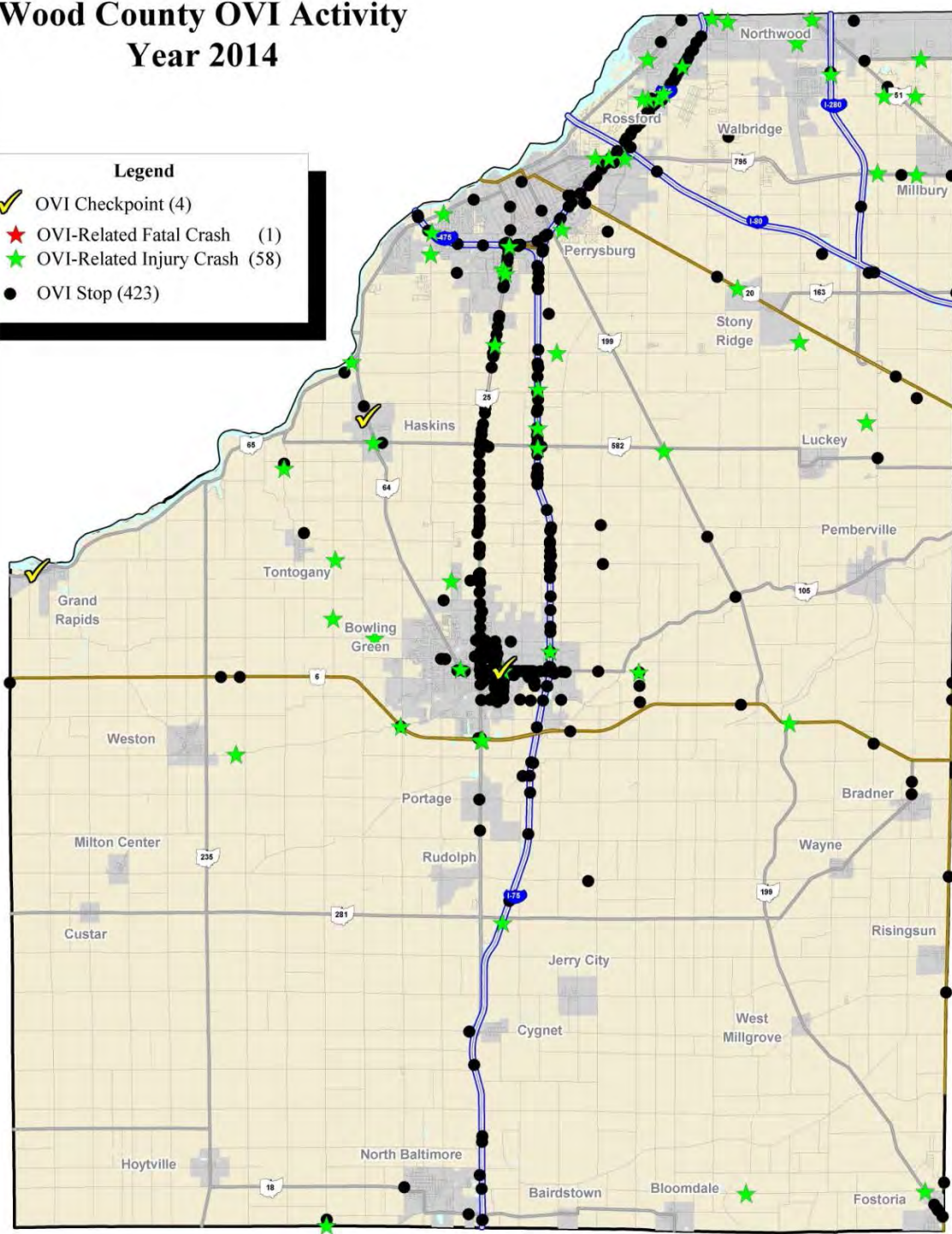
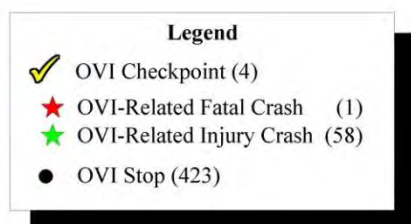
The following graph shows Wood County and Ohio age-adjusted motor vehicle accident mortality rates per 100,000 population with comparison to the Healthy People 2020 objective. The graph shows:

- From 2009-2011, the Wood County motor vehicle age-adjusted mortality rate of 11.0 deaths per 100,000 population was greater than the state rate and national rate, but below the Healthy People 2020 objective.
- The state and national age-adjusted motor vehicle accident mortality rate for males was higher than the female rate from 2009 to 2011.



**Data is statistically unavailable for Wood County female rates
(Source: Health Indicators Warehouse and Healthy People 2020)*

Wood County OVI Activity Year 2014

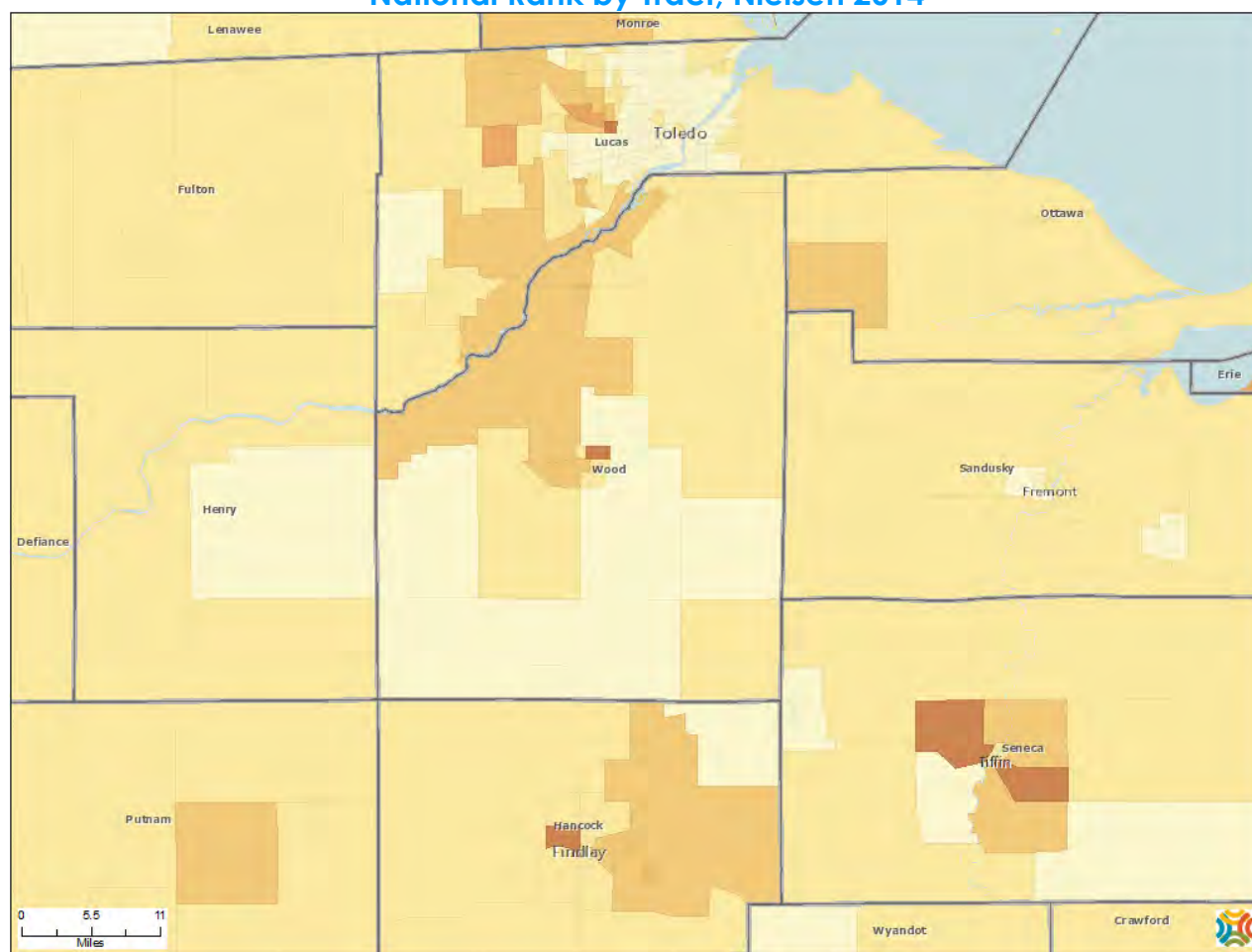


Data Source: ODPS Electronic Crash System;
OSHP Computer-Aided Dispatch (CAD) System
Map Design and Layout: OSHP Statistical Analysis Unit
Ohio State Highway Patrol
January 28, 2015



(Source: ODPS Electronic Crash System; OSHP Computer-Aided Dispatch (CAD) System, January 28, 2015)

Alcoholic Beverage Expenditures, Percent of Food-At Home Expenditures, National Rank by Tract, Nielsen 2014



Map Legend

Alcoholic Beverage Expenditures, Percent of Food-At-Home Expenditures, National Rank by Tract, Nielsen 2014

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

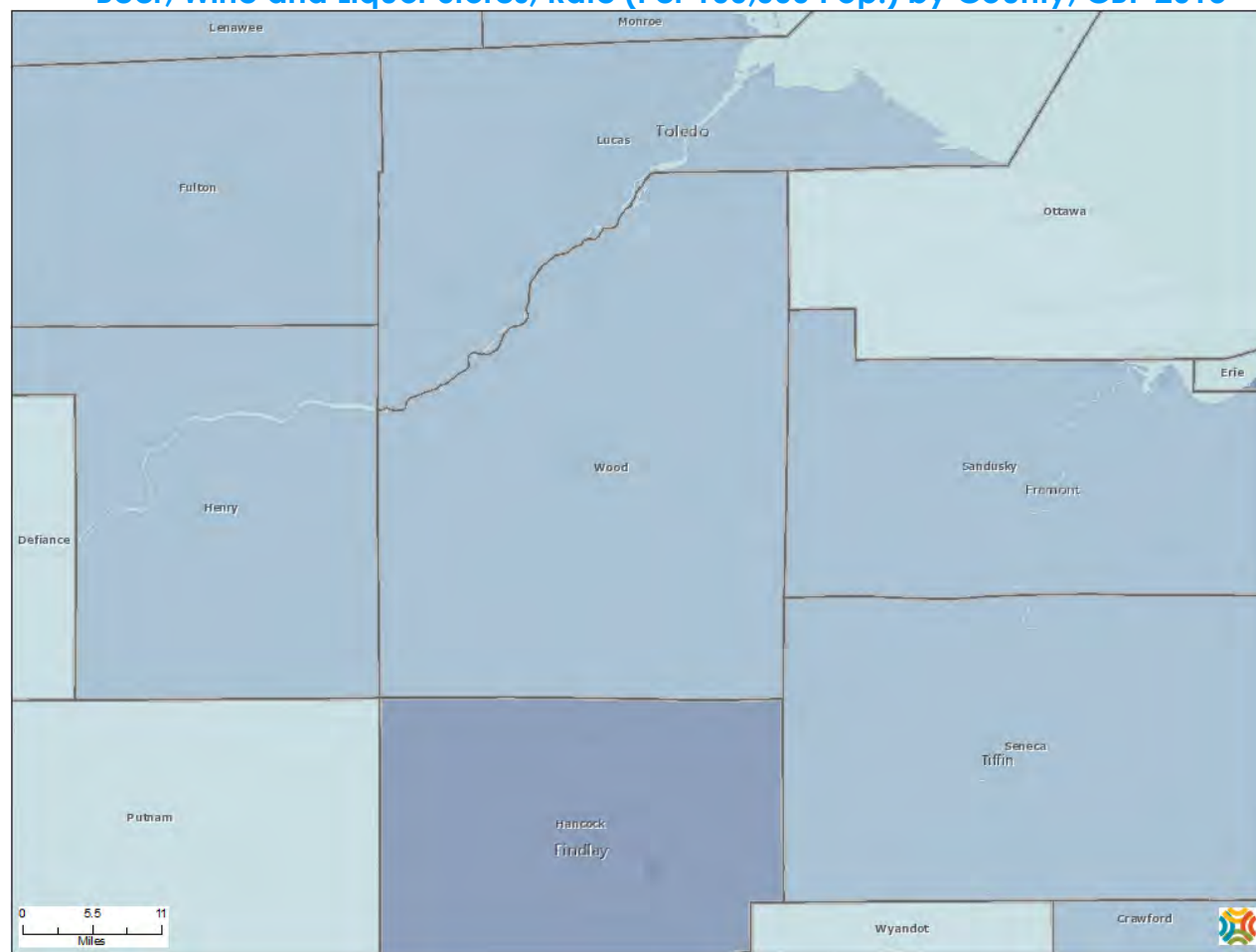
Community Commons, 5/5/2015

(Source: Community Commons, updated 5/5/15)

ADULT ALCOHOL



Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by County, CBP 2013



Map Legend

Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by County, CBP 2013

- Over 18.0
- 12.1 - 18.0
- 6.1 - 12.0
- Under 6.1
- No Beer, Wine, or Liquor Stores

Community Commons, 5/5/2015

CBP – County Business Patterns, U.S. Census Bureau

(Source: Community Commons, updated 5/5/15)

Adult | DRUG USE

Key Findings

In 2015, 3% of Wood County adults had used marijuana during the past 6 months. 6% 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

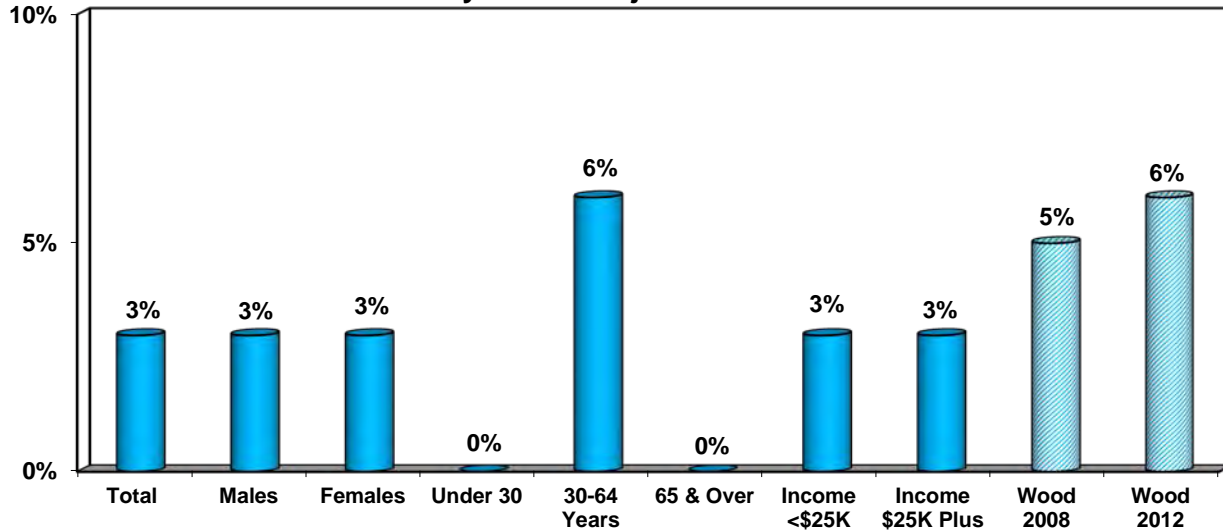
- 3% of Wood County adults had used marijuana in the past 6 months, increasing to 6% of those ages 30-64.
- Less than one percent (<1%) of Wood County adults reported using other recreational drugs in the past six months such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamines.
- When asked about their frequency of marijuana and other recreational drug use in the past six months, 18% of Wood County adults who used drugs did so almost every day, and 9% did so less than once a month.
- 6% 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 10% of females.
- When asked about their frequency of medication misuse in the past six months, 33% of Wood County adults who used these drugs did so almost every day, and 33% did so 1-to-3 days per month.
- 2% of Wood County adults have used a program or service to help with drug problems for either themselves or a loved one. Reasons for not using such a program included: had not thought of it (2%), transportation (1%), no program available (<1%), could not afford to go (<1%), fear (<1%), did not know how to find a program (<1%), and other reasons (2%). 94% of adults indicated they did not need a program or service to help with drug problems.
- Wood County adults indicated they did the following with their unused prescription medication: took as prescribed (36%), kept it (26%), threw it in the trash (16%), took it to the Medication Collection program (16%), flushed it down the toilet (12%), disposed in RedMed Box, Yellow Jug, etc. (3%), gave it away (<1%), and some other destruction method (9%).

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Adults who used marijuana in the past 6 months	5%	6%	3%	N/A	N/A
Adults who used other recreational drugs in the past 6 months	5%	6%	<1%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	6%	10%	6%	N/A	N/A

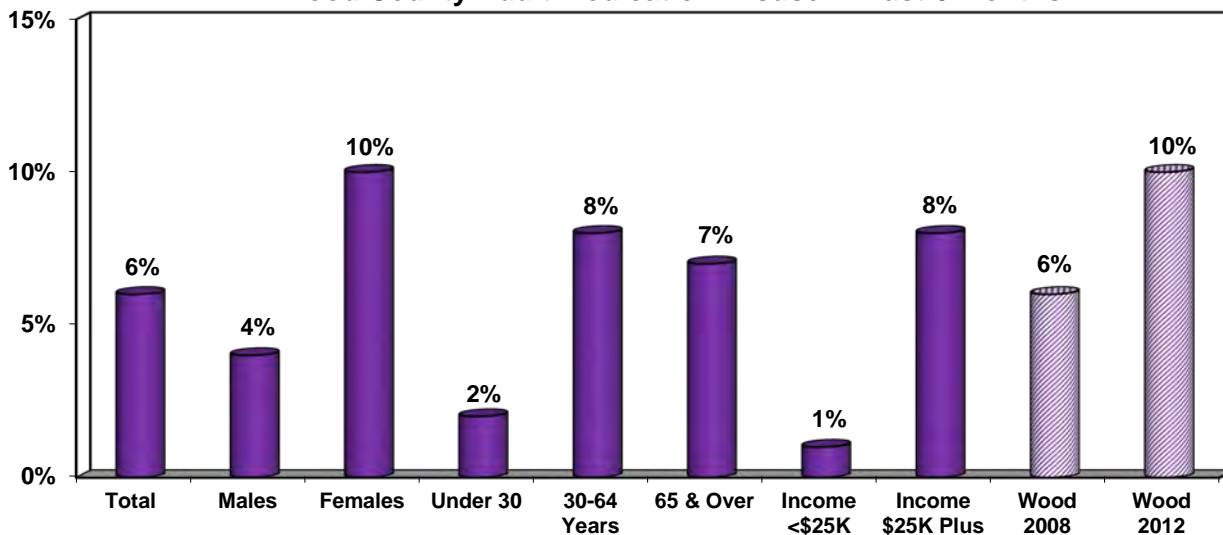
N/A – Not available

The following graphs are data from the 2015 Wood County Health Assessment indicating adult marijuana use in the past six months and medication misuse in the past six months. Examples of how to interpret the information include: 3% of all Wood County adults used marijuana in the past six months, 0% of adults under the age of 30 were current users, and 3% of adults with incomes less than \$25,000 were current users.

Wood County Adult Marijuana Use in Past 6 Months

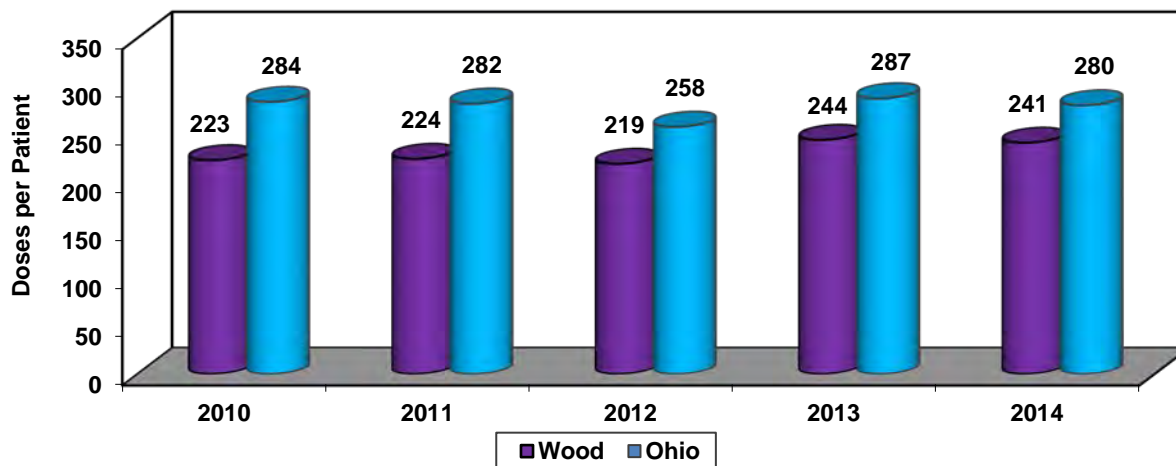


Wood County Adult Medication Misuse in Past 6 Months

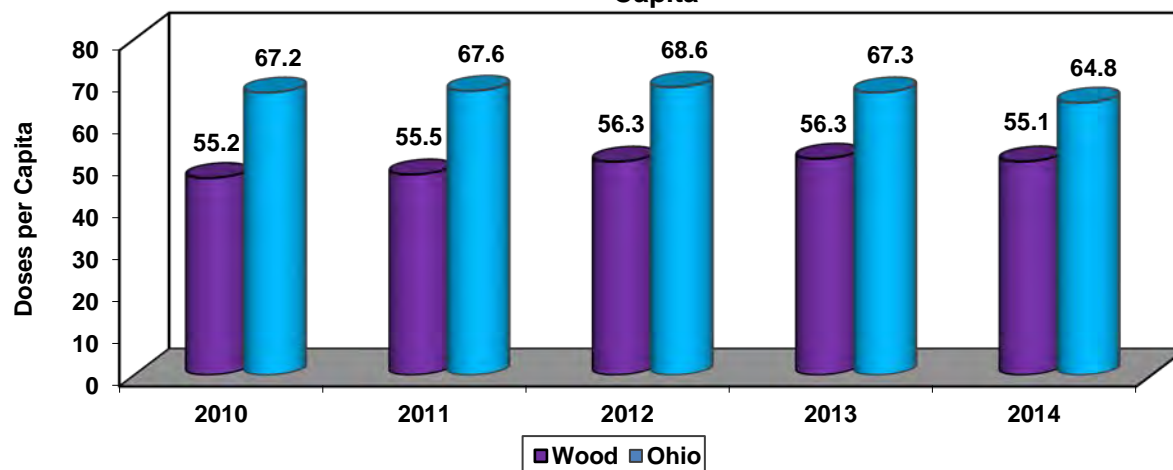


The following graphs are data from the Ohio Automated Prescription Reporting System indicating Wood County and Ohio Opiate and Pain Reliever doses per patient as well as Opiate and Pain Reliever doses per capita.

Wood County and Ohio Number of Opiate and Pain Reliever Doses Per Patient



Wood County and Ohio Number of Opiate and Pain Reliever Doses Per Capita

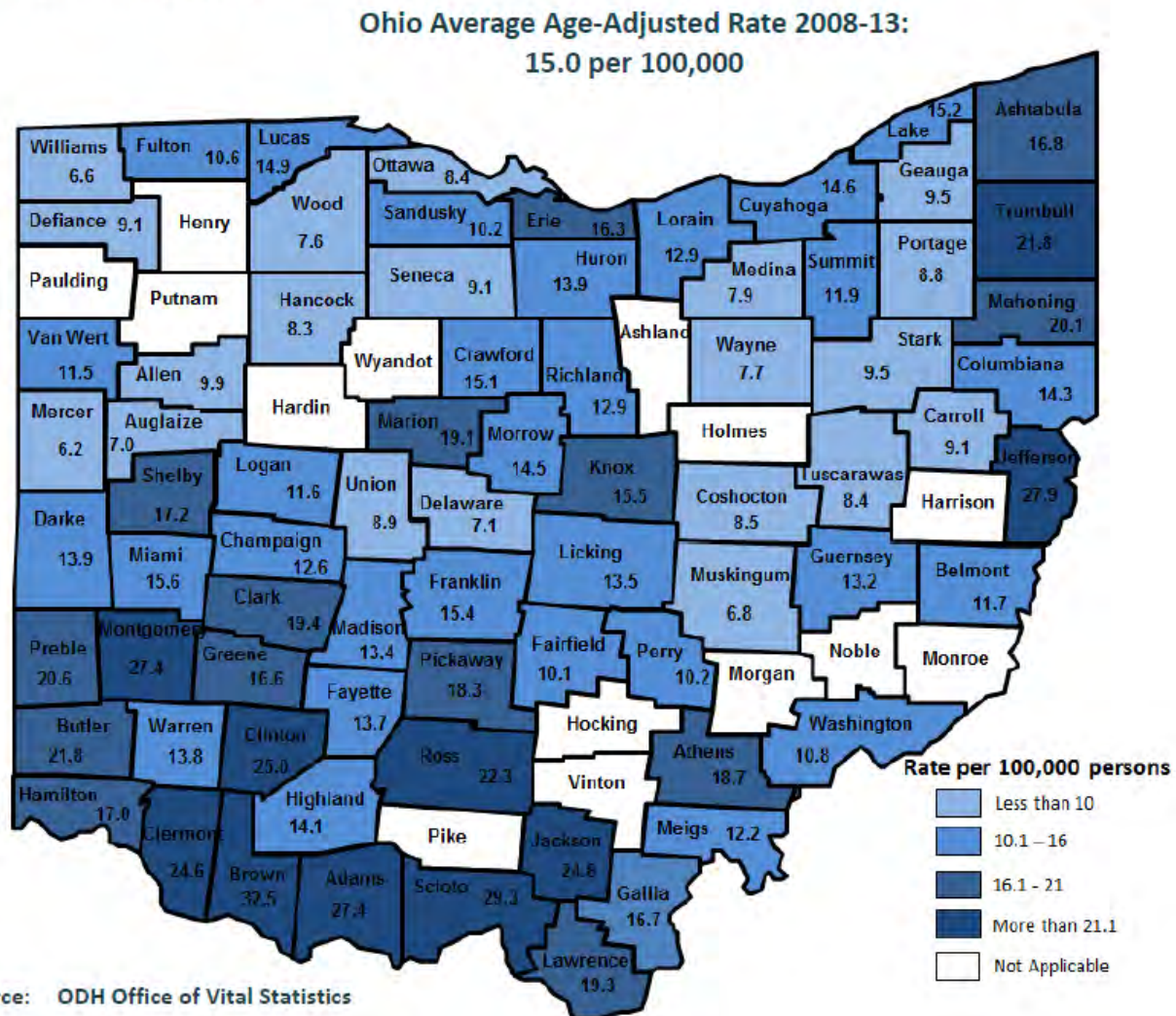


(Source: Ohio Automated Rx Reporting System, April 22, 2015, from: <https://www.ohiopmp.gov/portal/docs.aspx>)

Unintentional Drug Overdose Death Rates

- The average age-adjusted unintentional drug overdose death rate was 7.5 deaths per 100,000 in Wood County from 2008-2013.
- The average age-adjusted unintentional drug overdose death rate was 15.0 deaths per 100,000 in Ohio from 2008-2013.

Average, age-adjusted unintentional drug overdose death rate per 100,000, by county, Ohio residents, 2008-2013^{1,2}

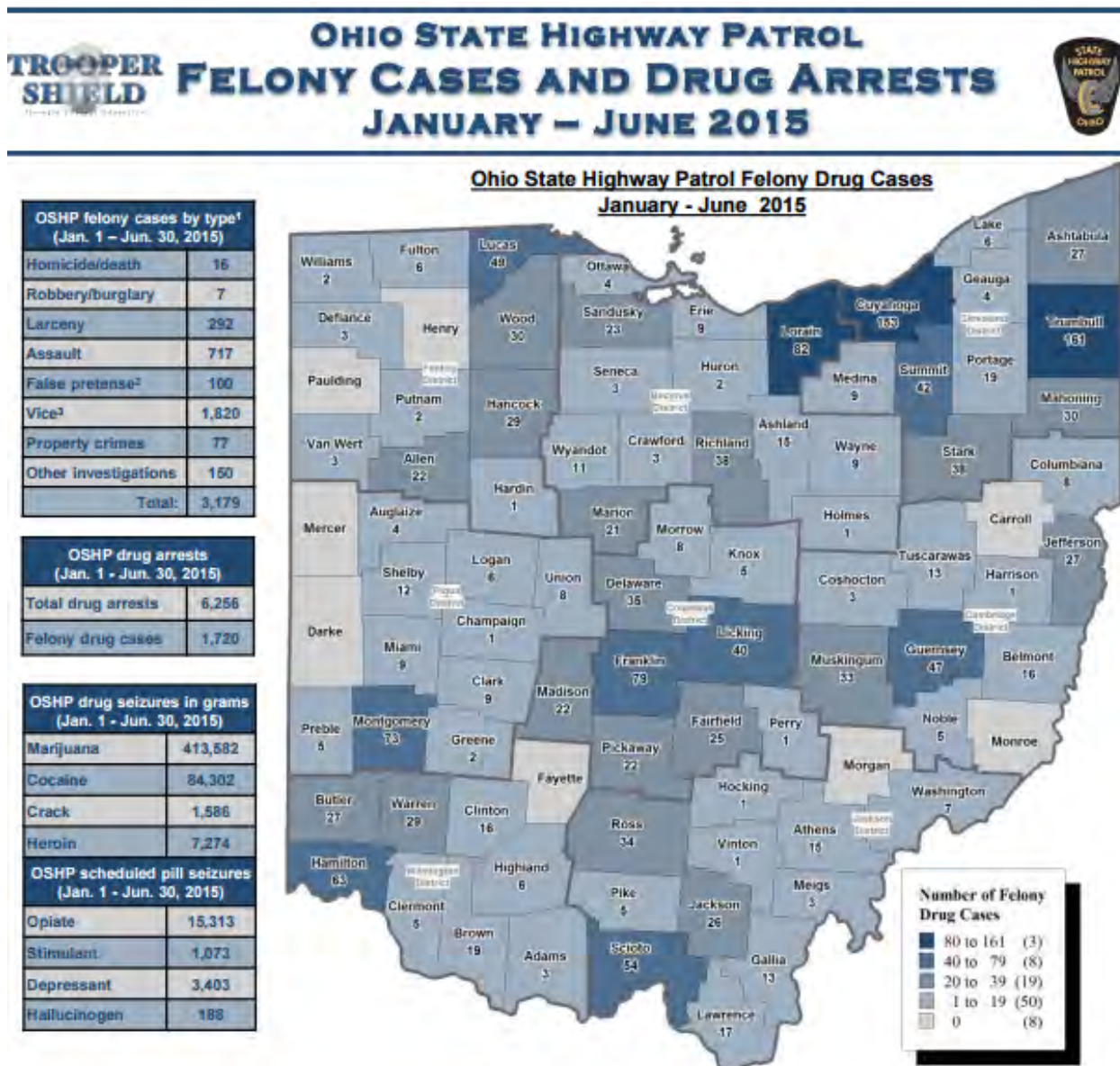


Source: ODH Office of Vital Statistics

(Source: Ohio Department of Health, Office of Vital Statistics, Unintentional Drug Overdose Death Rates for Ohio Residents by County, obtained from:
<http://www.healthy.ohio.gov/-/media/HealthyOhio/ASSETS/Files/injury%20prevention/CountyDrugData2013.pdf>)

Felony Cases and Drug Arrests January – June 2015

- Ohio State Highway Patrol (OSHP) investigated a wide range of felony offenses during the first half of 2015, including vice (1,820); assault (717); larceny (292); false pretense (100); property crimes (77); homicide/death (16); robbery/burglary (7); and various other types of felony offenses (150).
- OSHP Troopers made 6,256 total drug arrests during the first 6 months of 2015 – a 10% increase compared to 2014 and a 30% increase compared to the previous 3-year average (2012-2014).
- Of the 6,256 drug arrests, over one-quarter (1,720 or 27%) included one or more felony drug charges. This represents a 36% increase over the previous 3-year average (2012-2014).



(Source: Ohio State Highway Patrol, Felony Cases and Drug Arrests, January – June 2015, from <http://statepatrol.ohio.gov/>)

Adult | WOMEN'S HEALTH

Key Findings

In 2015, more than half (55%) of Wood County women over the age of 40 reported having a mammogram in the past year. 59% of Wood County women ages 19 and over had a clinical breast exam and 49% had a Pap smear to detect cancer of the cervix in the past year. The Health Assessment determined that 3% of women survived a heart attack and 4% survived a stroke at some time in their life. More than one-quarter (28%) had high blood pressure, 33% had high blood cholesterol, 21% were obese, and 12% were identified as smokers, known risk factors for cardiovascular diseases.

Women's Health Screenings

- In 2015, 72% of women had a mammogram at some time and more than two-fifths (43%) had this screening in the past year.
- More than half (55%) of women ages 40 and over had a mammogram in the past year and 73% had one in the past two years. The 2012 BRFSS reported that 74% of women 40 and over in the U.S. and 74% in Ohio, had a mammogram in the past two years.
- Most (88%) Wood County women have had a clinical breast exam at some time in their life and 59% had one within the past year. Nearly three-fourths (74%) of women ages 40 and over had a clinical breast exam in the past two years. The 2010 BRFSS reported that 77% of women 40 and over in the U.S. and 75% in Ohio, had a clinical breast exam in the past two years.
- This assessment has identified that 89% of Wood County women have had a Pap smear and 49% reported having had the exam in the past year. 68% of women had a pap smear in the past three years. The 2012 BRFSS indicated that 78% of U.S. and Ohio women had a pap smear in the past three years.

Pregnancy

- 19% of Wood County women had been pregnant in the past 5 years.
- During their last pregnancy, Wood County women: got a prenatal appointment in the first 3 months (78%), took a multi-vitamin (78%), took folic acid during pregnancy (61%), took folic acid pre-pregnancy (33%), experienced perinatal depression (11%), consumed alcoholic beverages (8%), and smoked cigarettes (6%).

Women's Health Concerns

- Women used the following as their usual source of services for female health concerns: private gynecologist (50%), general or family physician (31%), health department clinic (2%), multiple-including a private gynecologist (2%), and another facility outside Wood County (1%). 12% indicated they did not have a usual source of services for female health concerns.

Wood County Female Leading Types of Death, 2010 – 2012

1. Heart Diseases (29% of all deaths)
2. Cancers (22%)
3. Stroke (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Accidents (5%)

(Source: CDC Wonder, 2010-2012)

Ohio Female Leading Types of Death, 2010 – 2012

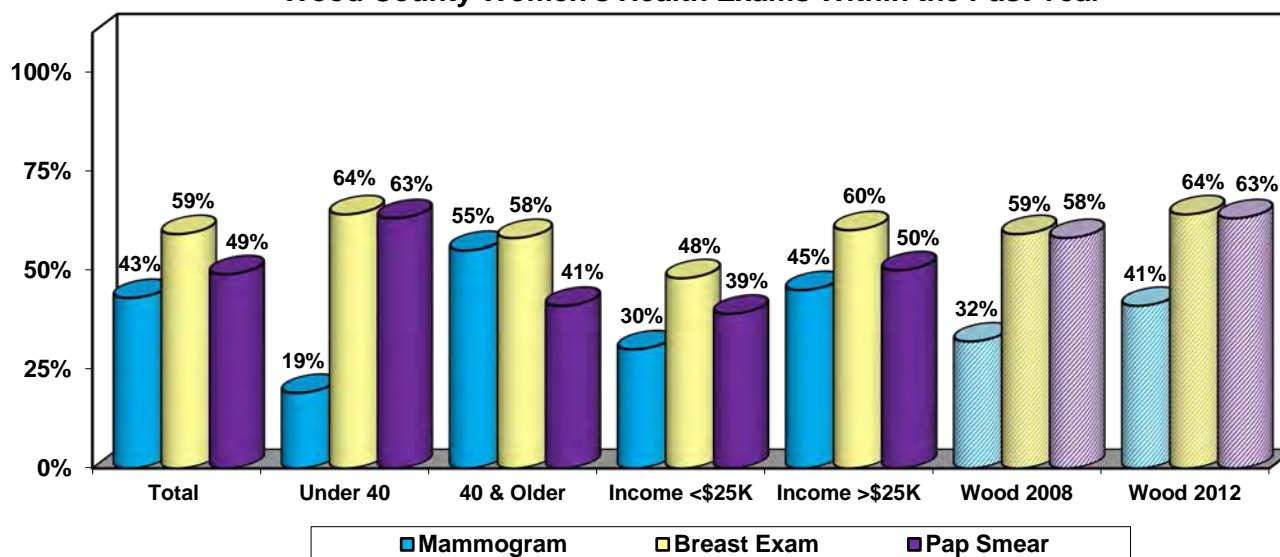
1. Heart Diseases (23% of all deaths)
2. Cancers (21%)
3. Chronic Lower Respiratory Diseases (7%)
4. Stroke (6%)
5. Alzheimer's disease (5%)

(Source: CDC Wonder, 2010-2012)

- In 2015, the health assessment determined that 3% of women had survived a heart attack and 4% had survived a stroke at some time in their life.
- From 2010-2012, major cardiovascular diseases (heart disease and stroke) accounted for 36% of all female deaths in Wood County (Source: CDC Wonder, Underlying Cause of Death).
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Wood County, the 2015 Health Assessment has identified that:
 - 58% were overweight or obese (58% U.S., 60% Ohio, 2013 BRFSS)
 - 33% were diagnosed with high blood cholesterol (37% U.S., 36% Ohio, 2013 BRFSS)
 - 28% were diagnosed with high blood pressure (30% U.S. and 32% Ohio, 2013 BRFSS)
 - 12% of all women were current smokers (17% U.S., 23% Ohio, 2013 BRFSS)
 - 5% had been diagnosed with diabetes (12% U.S., 12% Ohio, 2013 BRFSS)

The following graph shows the percentage of Wood County female adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 43% of Wood County females had a mammogram within the past year, 59% had a clinical breast exam, and 49% had a Pap smear.

Wood County Women's Health Exams Within the Past Year



Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Had a clinical breast exam in the past two years (age 40 & over)	70%	91%	74%	75%*	77%*
Had a mammogram in the past two years (age 40 & over)	67%	82%	73%	74%**	74%**
Had a pap smear in the past three years	75%	79%	68%	78%**	78%**

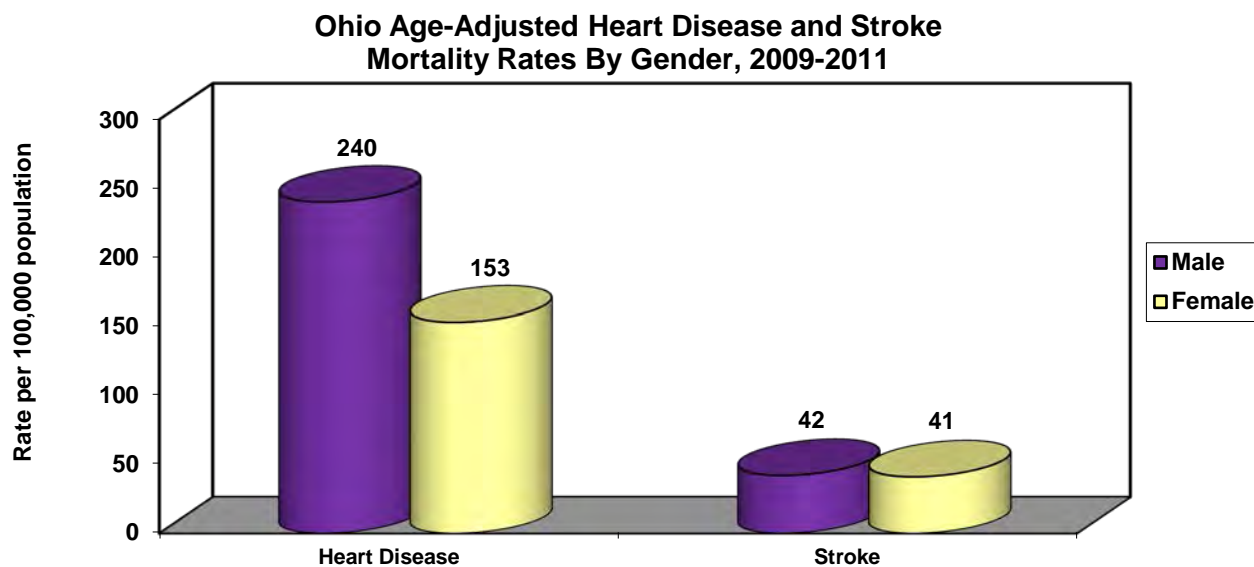
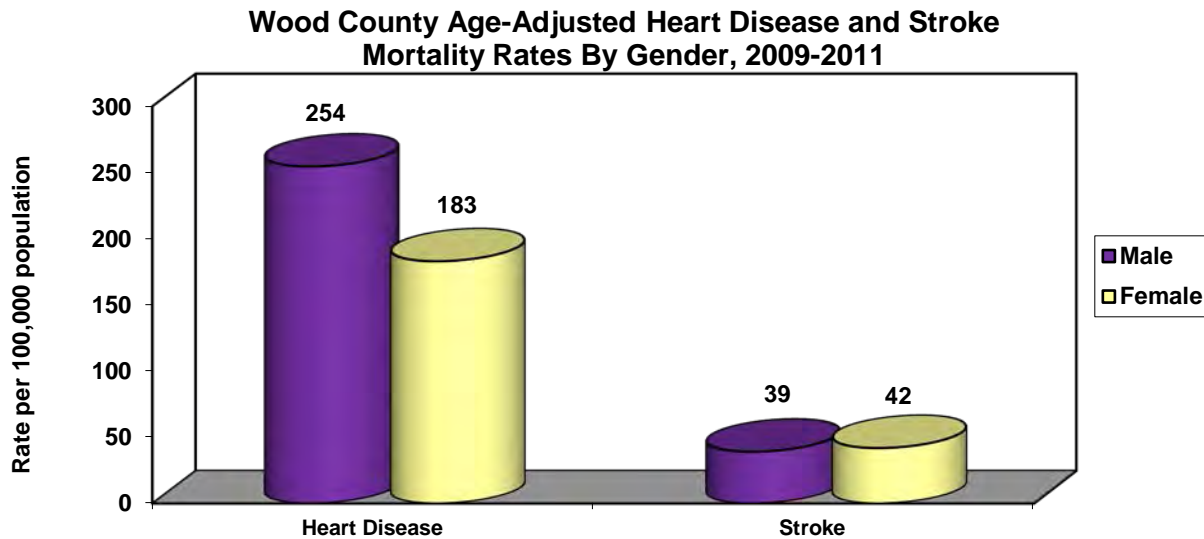
N/A – Not Available

*2010 BRFSS Data

** 2012 BRFSS Data

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

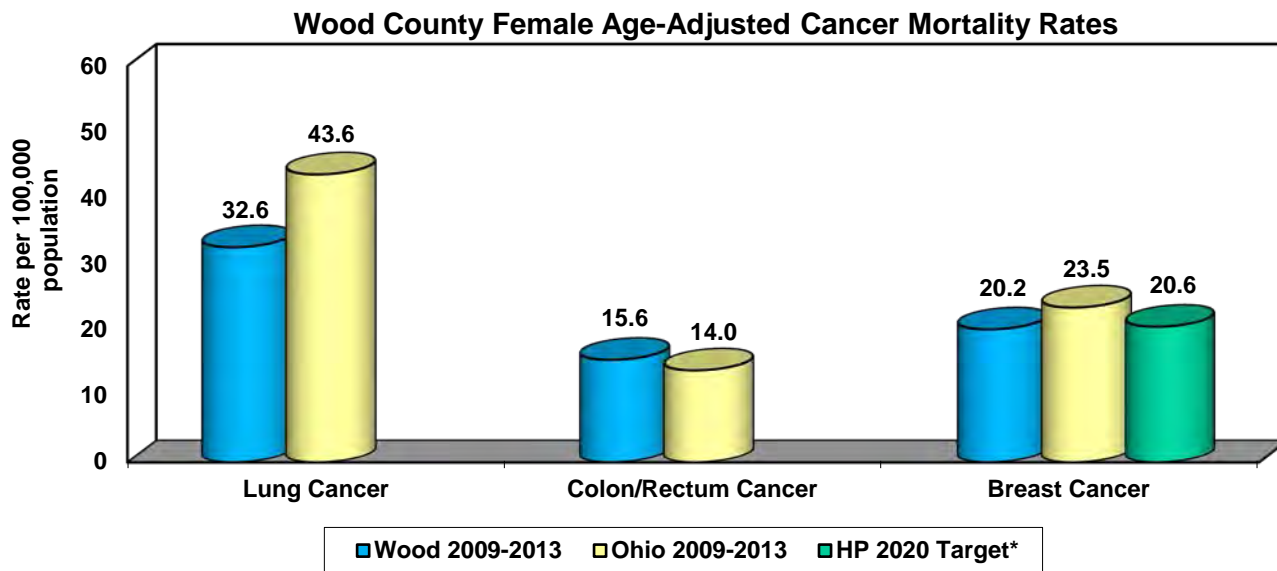
- From 2009-2011, the Wood County and Ohio female age-adjusted mortality rate was lower than the male rate for heart disease.
- The Wood County female heart disease mortality rate was higher than the Ohio female rate from 2009 to 2011.



(Source: Health Indicators Warehouse, 2009-2011)

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

- From 2009-2013, the Wood County age-adjusted mortality rate for female lung cancer and breast cancer was less than the Ohio rate, and the colon/rectum mortality rate was greater than the Ohio rate.



(Source: CDC Wonder 2009-2013 and Healthy People 2020)

Human Papilloma Virus (HPV and Vaccine)

- Approximately 79 million Americans are infected with human papillomavirus (HPV), an approximately 14 million people will become newly infected each year.
- Some HPV types can cause cervical, vaginal, and vulvar cancer among women, penile cancer among men, and anal and some oropharyngeal cancers among both men and women.
- Other HPV types can cause genital warts among both sexes. Each year in the United States an estimated 27,000 new cancers attributable to HPV occur, 17,600 among females (of which 10,400 are cervical cancer) and 9,300 among males (of which 7,200 are oropharyngeal cancers).
- There are, however, two HPV vaccines available (Gardasil® and Cervarix®) which protect against the types of HPV infection that cause most cervical cancers (HPV types 16 and 18). Both vaccines should be given as a three-shot series. Clinical trials and post-licensure monitoring data show that both vaccines are safe.
- CDC recommends HPV vaccination for the prevention of HPV infections responsible for most types of cervical cancer.

(Sources: Centers for Disease Control and Prevention, Vaccine Safety, Human Papillomavirus (HPV) Vaccine, updated August 18, 2014, from <http://www.cdc.gov/vaccinesafety/vaccines/HPV/Index.html>)

Binge Drinking: A Serious, Under Recognized Problem among Women and Girls

- Binge drinking for women is defined as consuming 4 or more alcohol drinks (beer, wine, or liquor) on an occasion.
- Binge drinking is a dangerous behavior but is not widely recognized as a women's health problem.
- Drinking too much results in about 23,000 deaths in women and girls each year.
- Binge drinking increases the chances of breast cancer, heart disease, sexually transmitted diseases, unintended pregnancy, and many other health problems.
- If women binge drink while pregnant, they risk exposing their developing baby to high levels of alcohol, increasing the chances the baby will be harmed by the mother's alcohol use.
- Drinking during pregnancy can lead to sudden infant death syndrome and fetal alcohol spectrum disorders.
- About 1 in 8 women aged 18 years and older and 1 in 5 high school girls binge drink. Women who binge drink do so frequently – about 3 times a month – and have about 6 drinks per binge.

(Sources: Centers for Disease Control and Prevention, Binge Drinking, October 2013, <http://www.cdc.gov/vitalsigns/BingeDrinkingFemale/index.html>)

Adult | MEN'S HEALTH

Key Findings

In 2015, 45% of Wood County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. Major cardiovascular diseases (heart disease and stroke) accounted for 33% and cancers accounted for 25% of all male deaths in Wood County from 2010-2012. The Health Assessment determined that 3% of men survived a heart attack and 2% survived a stroke at some time in their life. Nearly one-fourth (24%) of men had been diagnosed with high blood pressure, 28% had high blood cholesterol, and 10% were identified as smokers, which, along with obesity (23%), are known risk factors for cardiovascular diseases.

Men's Health Screenings and Concerns

- More than one-fourth (26%) of Wood County males had a Prostate-Specific Antigen (PSA) test at some time in their life and 15% had one in the past year.
- 72% of males age 50 and over had a PSA test at some time in their life, and 45% had one in the past year.
- 35% of men had a digital rectal exam in their lifetime and 9% had one in the past year.
- From 2010-2012, major cardiovascular diseases (heart disease and stroke) accounted for 33% of all male deaths in Wood County (Source: CDC Wonder).
- In 2015, the health assessment determined that 3% of men had a heart attack and 2% had a stroke at some time in their life.

9% of Wood County males had a digital rectal exam in the past year.

- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Wood County the 2015 health assessment has identified that:
 - 69% were overweight or obese (71% U.S., 71% Ohio, 2013 BRFSS)
 - 28% were diagnosed with high blood cholesterol (40% U.S., 40% Ohio, 2013 BRFSS)
 - 24% were diagnosed with high blood pressure (34% U.S., 36% Ohio, 2013 BRFSS)
 - 10% of all men were current smokers (22% U.S., 24% Ohio, 2013 BRFSS)
 - 7% had been diagnosed with diabetes (10% U.S., 10% Ohio, 2013 BRFSS)
- From 2006-2010, the leading cancer deaths for Wood County males were lung, prostate, and colon and rectum cancers. Statistics from the same period for Ohio males show lung, prostate, and colon and rectum cancers as the leading cancer deaths (Source: ODH Information Warehouse).

Wood County Male Leading Types of Death, 2010 – 2012

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

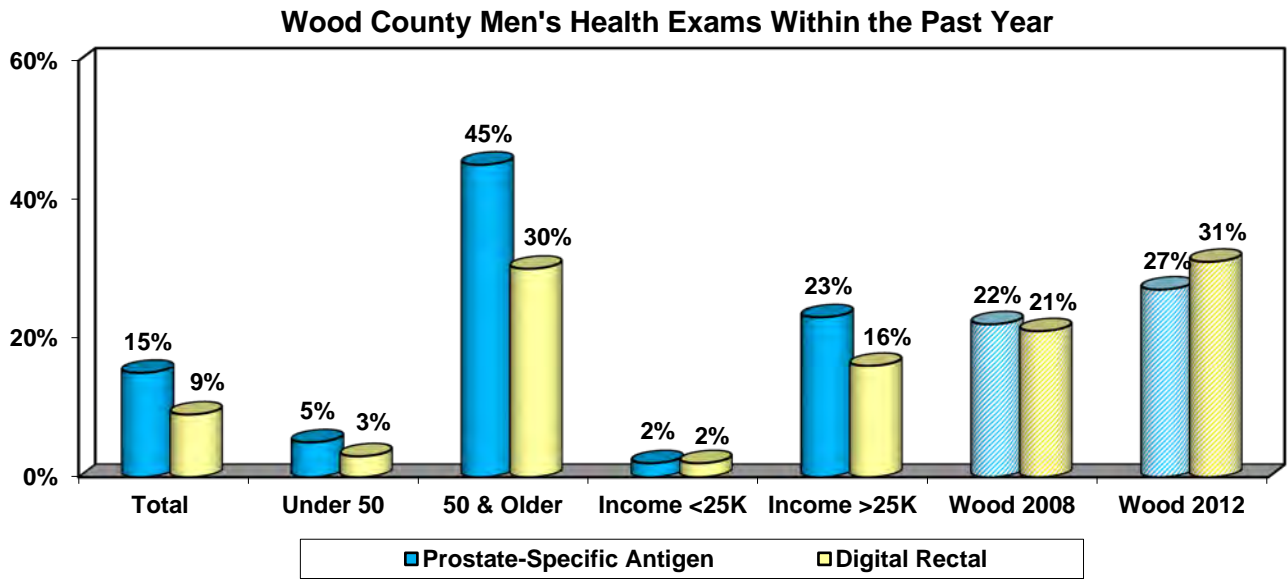
(Source: CDC Wonder, 2010-2012)

Ohio Male Leading Types of Death, 2010 – 2012

1. Heart Diseases (25% of all deaths)
2. Cancers (24%)
3. Chronic Lower Respiratory Diseases (6%)
4. Accidents, Unintentional Injuries (6%)
5. Stroke (4%)

(Source: CDC Wonder, 2010-2012)

The following graph shows the percentage of Wood County male adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 15% of Wood County males had a PSA test within the past year and 9% had a digital rectal exam.



Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Had a digital rectal exam within the past year	21%	31%	9%	N/A	N/A
Had a PSA test in within the past two years (age 40 & over)	N/A	60%	55%	N/A	N/A

N/A – Not Available

Men's Health Data

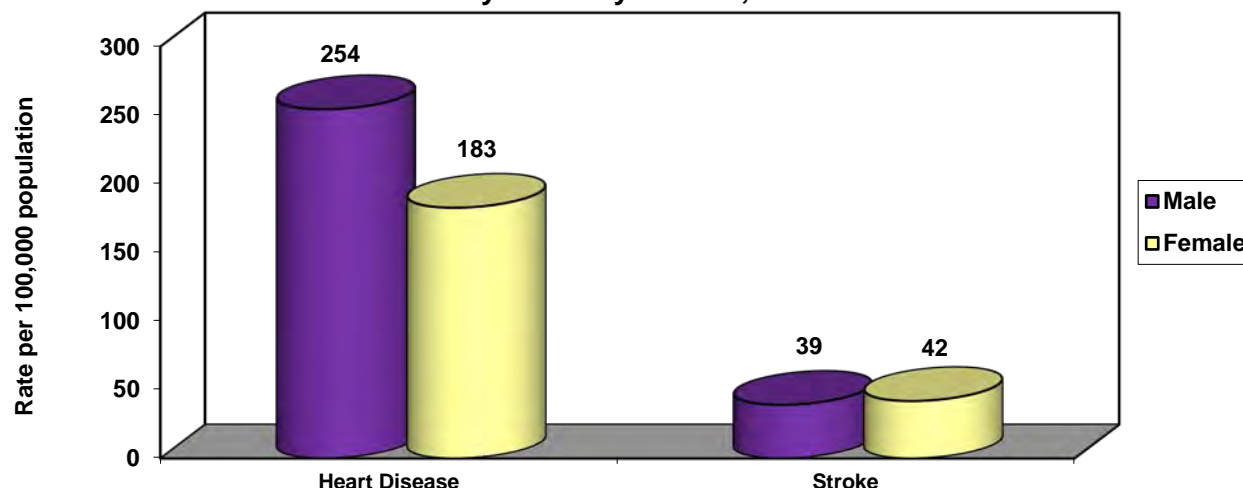
- Approximately 12% of adult males ages 18 years or older reported fair or poor health.
- 21% of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 31% had 5 or more drinks in 1 day at least once in the past year.
- Only 54% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- 35% of men 20 years and over are obese.
- There are 19% of males under the age of 65 without health care coverage.
- The leading causes of death for males in the United States are heart disease, cancer and accidents (unintentional injuries).

(Source: CDC, National Center for Health Statistics, Men's Health, Fast Stats, May 14, 2014, from http://www.cdc.gov/nchs/fastats/mens_health.htm)

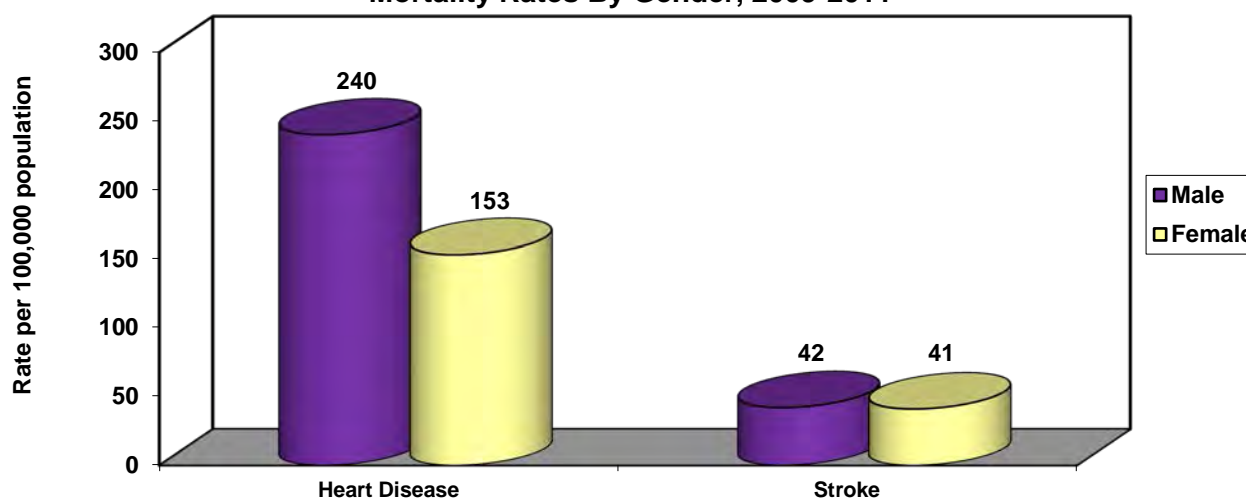
The following graphs show the Wood County and Ohio age-adjusted mortality rates per 100,000 population for cardiovascular diseases by gender. The graphs show:

- From 2009-2011, the Wood County and Ohio male age-adjusted mortality rate was higher than the female rate for heart disease.
- The Wood County male age-adjusted heart disease mortality rate was higher than the Ohio male rate.

Wood County Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2009-2011



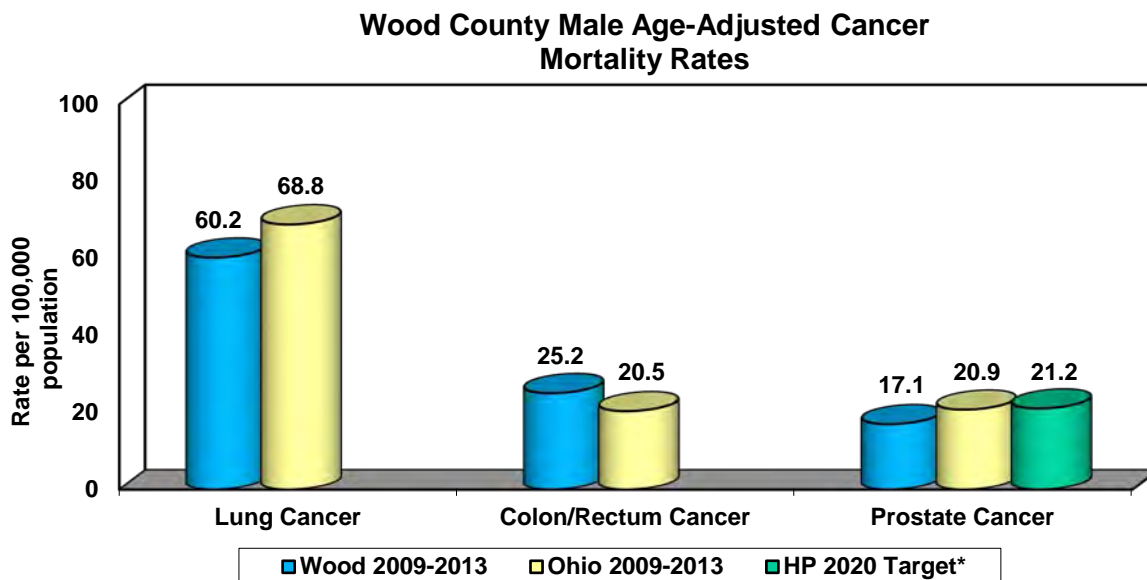
Ohio Age-Adjusted Heart Disease and Stroke Mortality Rates By Gender, 2009-2011



(Source: Health Indicators Warehouse, 2009-2011)

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

- From 2009-2013, the Wood County age-adjusted mortality rate for male lung cancer and prostate cancer was lower than the Ohio average, but the Wood County age-adjusted mortality rate for male colon/rectum cancer was higher than the Ohio rates.



*Note: the Healthy People 2020 target rates are not gender specific.
(Source: CDC 2009-2013 and Healthy People 2020)

Heart Health and Stroke Facts for Men

- Heart disease is the leading cause of death for men in the United States, killing 307,225 men in 2009—that's 1 in every 4 male deaths.
- Heart disease is the **leading cause** of death for men of most racial/ethnic groups in the United States, including African Americans, American Indians or Alaska Natives, Hispanics, and Whites. For Asian American or Pacific Islander men, heart disease is second only to cancer.
- About 8.5% of all White men, 7.9% of African American men, and 6.3% of Mexican American men have coronary heart disease.
- Half of the men who die suddenly of coronary heart disease have **no previous symptoms**. Even if you have no symptoms, you may still be at risk for heart disease.
- Between 70% and 89% of sudden cardiac events occur in men
- High blood pressure, high LDL cholesterol, and smoking are key risk factors for heart disease. About half of Americans (49%) have at least one of these three risk factors. Several other medical conditions and lifestyle choices can also put people at higher risk for heart disease, including:
 - Diabetes
 - Physical inactivity
 - Excessive Alcohol Use
 - Poor diet
 - Overweight and obesity

(Source: CDC, Men and Heart Disease Fact Sheet, August 26, 2013, from: http://www.cdc.gov/dhdsp/data_statistics/fact_sheets/fs_men_heart.htm)

Cancer and Men

- Every year, more than 300,000 men in America lose their lives to cancer.
- The most common kinds of cancer among men in the U.S. are skin cancer, prostate cancer, lung cancer, and colorectal cancer.
- Skin cancer is the most common cancer in the United States. Most cases of melanoma, the deadliest kind of skin cancer, are caused by exposure to ultraviolet (UV) light from the sun and tanning devices.
- More men in the U.S. die from lung cancer than any other type of cancer, and cigarette smoking accounts for 90% of lung cancer deaths.
- Smoking increases the risk of developing the following types of cancer: esophagus, pancreas, pharynx, larynx, lip, oral cavity, kidney, bladder, stomach, colorectum, and acute myeloid leukemia.
- In men, the following cancers are associated with being overweight: colorectal cancer, esophageal adenocarcinoma (a type of cancer of the tube that connects your throat to your stomach), and cancer of the kidney and pancreas. Adopting a lifestyle that includes healthy eating and regular physical activity can help lower the risk for several types of cancers.
- Prostate cancer is the most frequently diagnosed cancer in men aside from skin cancer. For unclear reasons, incidence rates are 63% higher in African Americans than in whites. It is the second most common cause of cancer death in men.

(Source: Center for Disease Control and Prevention, Cancer Prevention and Control, June 9, 2015, <http://www.cdc.gov/features/cancerandmen/>, and American Cancer Society, Cancer Facts & Figures 2015, <http://www.cancer.org/acs/groups/content/@editorial/documents/document/acspc-044552.pdf>)

Adult | PREVENTIVE MEDICINE AND ENVIRONMENTAL HEALTH

Key Findings

Over half (53%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. One-fourth (25%) of adults ages 50 and over had a colorectal cancer screening in the past 2 years.

Preventive Medicine

- More than half (52%) of Wood County adults had a flu vaccine during the past 12 months.
- Of those who had a flu vaccine, 99% had the shot and 1% had the nasal spray.
- 76% of Wood County adults ages 65 and over had a flu vaccine in the past 12 months. The 2013 BRFSS reported that 63% of U.S. and Ohio adults ages 65 and over had a flu vaccine in the past year.
- One-fourth (26%) of adults have had a pneumonia shot in their life, increasing to 53% of those ages 65 and over. The 2013 BRFSS reported that 70% of U.S. and 71% of Ohio adults ages 65 and over had a pneumonia shot in their life.
- Wood County adults have had the following vaccines: tetanus booster (including Tdap) in the past 10 years (47%), pneumonia vaccine in their lifetime (26%), Zoster (shingles) vaccine in their lifetime (15%), pertussis vaccine in the past 10 years (11%), and human papillomavirus vaccine in their lifetime (3%).

Preventive Health Screenings and Exams

- 25% of Wood County adults over the age of 50 reported having been screened for colorectal cancers in the past 2 years.
- Wood County adults had the following preventive screenings or exams in the past 2 years: vision (65%), breast cancer-female (57%), hearing (18%), skin cancer (15%), prostate cancer-male (14%), colorectal cancer (10%), osteoporosis (6%), and memory (2%).
- In the past year, 55% of Wood County women ages 40 and over have had a mammogram.
- See the Women and Men's Health Sections for further prostate, mammogram, clinical breast exam, and Pap smear screening test information for Wood County adults.

Skin Cancer Prevention Recommendations

- Seek shade, especially during midday hours.
- Wear clothing to protect exposed skin.
- Wear a hat with a wide brim to shade the face, head, ears, and neck.
- Wear sunglasses that wrap around and block as close to 100% of both UVA and UVB rays as possible.
- Use sunscreen with sun protective factor (SPF) 15 or higher, and both UVA and UVB protection.
- Avoid indoor tanning.

(CDC, Skin Cancer Prevention, Updated 2/15/2013, http://www.cdc.gov/cancer/skin/basic_info/prevention.htm)

Environmental Health

- 32% of Wood County adults used a septic tank for wastewater. Of those who had a septic tank, 61% had it pumped within the past 5 years, and 4% never had it pumped. 29% did not know the last time their septic tank had been pumped.
- Wood County adults indicated the following as the main source of their home water supply: city, county or town water system (78%), deep private well (15%), shallow private well (3%), pond (2%), and a small water system operated by a home association (<1%).
- Wood County adults indicated the following as their main method or way of getting information from authorities in a large-scale disaster or emergency: television (69%), internet (41%), cell phone (27%), social media (27%), radio (20%), friends/family (16%), newspaper (11%), neighbors (10%), and other methods (<1%).
- Wood County households had the following disaster preparedness supplies: working flashlight and working batteries (89%), cell phone (89%), cell phone with texting (86%), working smoke detector (86%), 3-day supply of nonperishable food for everyone in the household (61%), working battery-operated radio and working batteries (59%), 3-day supply of prescription medication for each person who takes prescribed medicines (55%), home land-line telephone (50%), 3-day supply of water for everyone in the household (1 gallon of water per person per day) (48%), generator (24%), communication plan (19%), family disaster plan (16%), and a disaster plan (11%).
- Wood County adults thought the following threatened their health in the past year.
 - Unsafe water supply/wells (18%)
 - Insects (15%)
 - Agricultural chemicals (8%)
 - Mold (6%)
 - Indoor air quality (4%)
 - Moisture issues (4%)
 - Rodents (3%)
 - Temperature regulation (3%)
 - Sewage/waste water problems (3%)
 - Chemicals found in products (3%)
 - Lice (3%)
 - Outdoor air quality (3%)
 - Fracking (3%)
 - Excess medications in home (3%)
 - Plumbing problems (2%)
 - Hazardous waste incidents (2%)
 - General living conditions (1%)
 - Safety hazards (1%)
 - Asbestos (1%)
 - Radiation (1%)
 - Cockroaches (1%)
 - Radon (1%)
 - Lead paint (<1%)
 - Sanitation issues (<1%)
 - Bed bugs (<1%)

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Had a pneumonia vaccination (ages 65 and over)	57%	64%	53%	71%	70%
Had a flu vaccine in the past year (ages 65 and over)	73%	64%	76%	63%	63%

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

HEALTHCARE TOPICS	Total 2015
Physical Activity or Exercise	30%
Weight, Dieting or Eating Habits	25%
Self-Breast or Self-Testicular Exam	20%
Immunizations	18%
Significance of Family History	15%
Depression, Anxiety, or Emotional Problems	13%
Quitting Smoking	6%
Sexual Practices Including Family Planning, STDs, AIDS, & Condom Use	6%
Injury Prevention Such As Safety Belt Use & Helmet Use	5%
Alcohol Use When Taking Prescription Drugs	5%
Alcohol Use	4%
Domestic Violence	3%
Illicit Drug Abuse	3%
Alternative Pain Therapy	3%

Wood County Adult Health Screening Results

GENERAL SCREENING RESULTS	Total Sample
Diagnosed with High Blood Cholesterol	30%
Diagnosed with High Blood Pressure	26%
Diagnosed with Diabetes	6%
Diagnosed with a Heart Attack	4%
Diagnosed with a Stroke	3%

(Percentages based on all Wood County adults surveyed)

Healthy People 2020

Immunization and Infectious Diseases (IID) - Pneumonia Vaccination

Objective	Wood County 2015	Ohio 2013	U.S. 2013	Healthy People 2020 Target
IID-13.1: Increase the percentage of non-institutionalized high-risk adults aged 65 years and older who are vaccinated against pneumococcal disease	53%	71%	70%	90%

**U.S. baseline is age-adjusted to the 2000 population standard
(Sources: Healthy People 2020 Objectives, 2015 Wood County Health Assessment)*

Basic Disaster Supplies Kit

A basic emergency supply kit could include the following recommended items:

- One gallon of water per person per day for at least three days, for drinking and sanitation.
- At least a three-day supply of non-perishable food.
- A working battery operated radio and working batteries.
- Flashlight and extra batteries.
- First aid kit.
- Whistle to signal for help.
- Dust mask to help filter contaminated air.
- Moist towelettes, garbage bags and plastic ties for personal sanitation.
- Cell phone with chargers, inverter or solar charger.
- Manual can opener for food.

(Source: Federal Emergency Management Agency (FEMA), Ready: Prepare. Basic Disaster Supplies Kit, Updated 3/13/2013. from: <http://www.ready.gov/basic-disaster-supplies-kit>)

Who Should Get a Yearly Flu Shot?

The following groups are recommended to get a yearly flu vaccine:

- All persons aged 6 months and older should be vaccinated annually.
- When vaccine supply is limited, vaccination efforts should focus on delivering vaccination to persons who:
 - Are aged 6 months through 4 years.
 - Are aged 50 years and older.
 - Have chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, neurologic, hematologic, or metabolic disorders (including diabetes mellitus).
 - Are or will be pregnant during the influenza season.
 - Are American Indians/Alaska Natives.
 - Are morbidly obese (body-mass index is 40 or greater).
 - Are health-care personnel.
 - Are household contacts and caregivers of children aged younger than 5 years and adults aged 50 years and older, with particular emphasis on vaccinating contacts of children aged younger than 6 months.
 - Are household contacts and caregivers of persons with medical conditions that put them at higher risk for severe complications from influenza.

(Source: CDC, Seasonal Influenza (Flu), Who Should Get Vaccinated Against Influenza, Updated in 2011, from: <http://www.cdc.gov/flu/protect/whoshouldvax.htm>)

Adult | SEXUAL BEHAVIOR AND PREGNANCY OUTCOMES

Key Findings

In 2015, three-fifths (60%) of Wood County adults had sexual intercourse. Two percent of adults had more than one partner. Prevalence estimates suggest that young people aged 15-24 years acquire half of all new STDs and that 1 in 4 sexually active adolescent females have an STD, such as chlamydia or human papillomavirus (HPV) (Source: CDC, STDs in Adolescents and Young Adults, 2014 STD Surveillance).

Adult Sexual Behavior

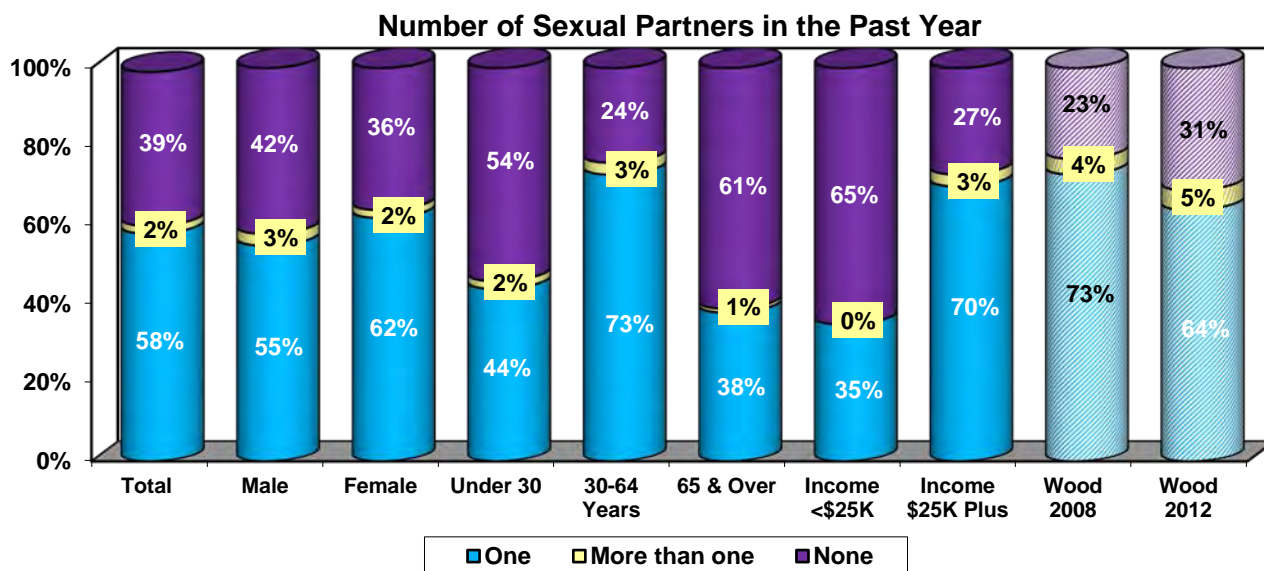
- 2% of adults reported they had intercourse with more than one partner in the past year.
- Wood County adults used the following methods of birth control: vasectomy (21%), they or their partner were too old (17%), condoms (17%), birth control pill (15%), tubes tied (12%), hysterectomy (10%), withdrawal (7%), infertility (3%), abstinence (2%), IUD (2%), rhythm method (1%), diaphragm (1%), shots (1%), and contraceptive implants (<1%).
- 12% of Wood County adults were not using any method of birth control.
- Wood County adults did not use birth control for the following reasons:
 - They or their partner had a hysterectomy/vasectomy/tubes tied (28%)
 - They or their partner were too old (18%)
 - They wanted to get pregnant (8%)
 - They did not think they or their partner could get pregnant (6%)
 - They or their partner were currently pregnant (3%)
 - They did not care if they or their partner got pregnant (2%)
 - They or their partner were currently breastfeeding (2%)
 - They or their partner did not like birth control/fear of side effects (1%)
 - They did not want to use birth control (1%)
 - Their partner did not want to use birth control (1%)
 - They or their partner had just had a baby (<1%)
- The following situations applied to Wood County adults in the past year: had anal sex without a condom (3%), tested for an STD (1%), thought they may have an STD (1%), and treated for an STD (1%).
- Wood County adults have been treated for the following sexually transmitted diseases (STDs) in the past 5 years: genital herpes (<1%), human papilloma virus (HPV) (<1%), and chlamydia (<1%).
- 6% of adults have engaged in sexual activity following alcohol or other drug use that they would not have done if sober.
- 5% of Wood County adults reported being forced to have sexual activity when they did not want to.

HIV in the United States

- More than 1.1 million people in the United States are living with HIV infection, and almost 1 in 6 (15.8%) are unaware of their infection.
- By race, African Americans face the most severe burden of HIV.
- The estimated incidence of HIV has remained stable overall in recent years, at about 50,000 new HIV infections per year.
- In 2011, an estimated 49,273 people were diagnosed with HIV infection in the United States. In that same year, an estimated 32,052 people were diagnosed with AIDS. Since the epidemic began, an estimated 1,155,792 people in the United States have been diagnosed with AIDS
- An estimated 15,529 people with an AIDS diagnosis died in 2010, and approximately 636,000 people in the United States with an AIDS diagnosis have died since the epidemic.

(Source: CDC, HIV in the United States: At a Glance, 12/3/2013, from: <http://www.cdc.gov/hiv/statistics/basics/ata glance.html>)

The following graph shows the sexual activity of Wood County adults. Examples of how to interpret the information in the graph include: 58% of all Wood County adults had one sexual partner in the last 12 months and 2% had more than one, and 55% of males had one partner in the past year.



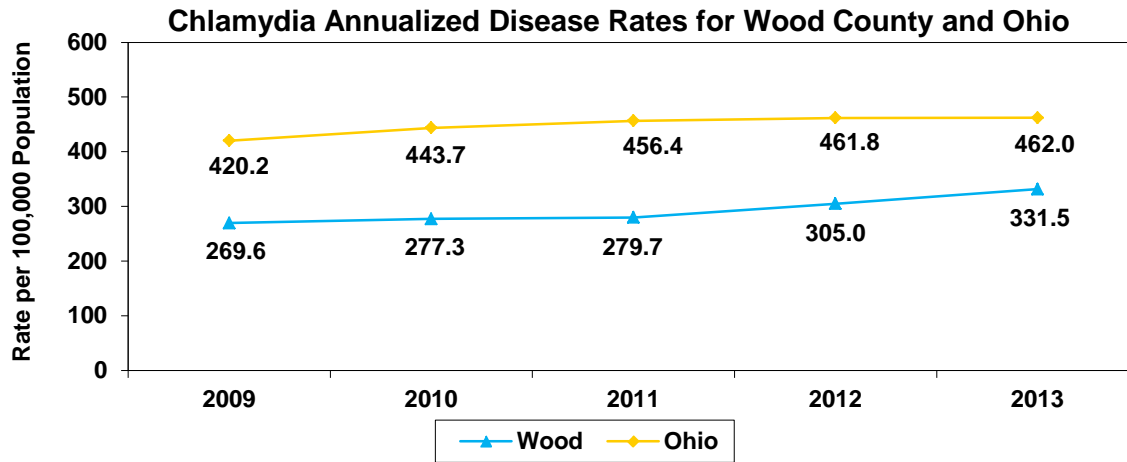
Respondents were asked: "During the past 12 months, with how many different people have you had sexual intercourse?"

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Had more than one sexual partner in past year	4%	5%	2%	N/A	N/A

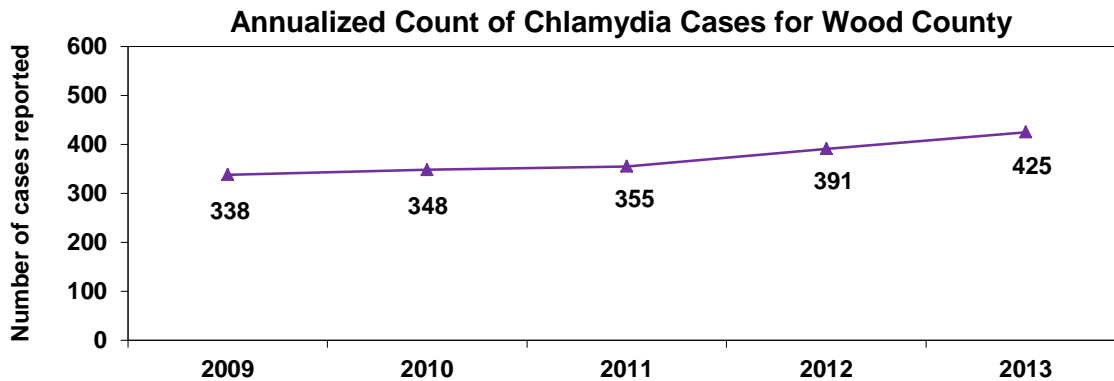
N/A – Not available

The following graphs show Wood County chlamydia disease rates per 100,000 population updated June 27, 2014 by the Ohio Department of Health. The graphs show:

- Wood County chlamydia rates increased from 2009 to 2013. Wood County rates remained below the Ohio rates.
- In 2012, the U.S. rate for new chlamydia cases was 456.7 per 100,000 population (Source: CDC, *STD Trends in the U.S., 2014*).



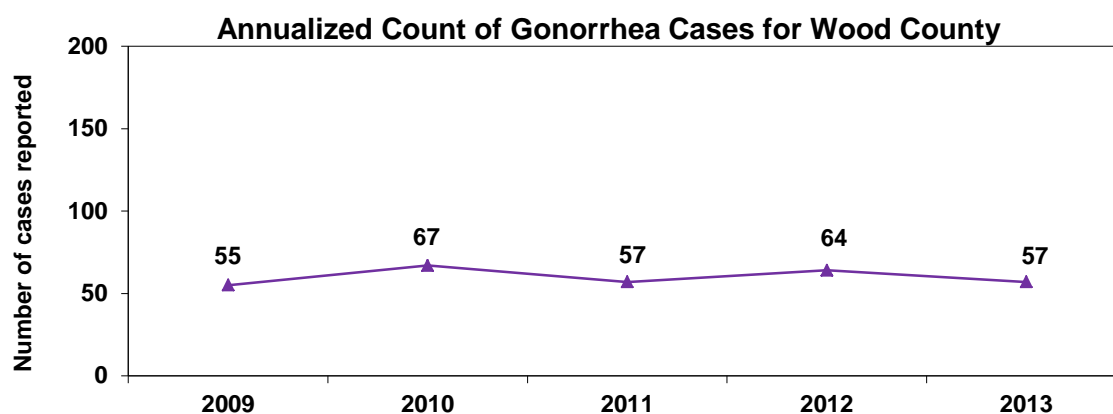
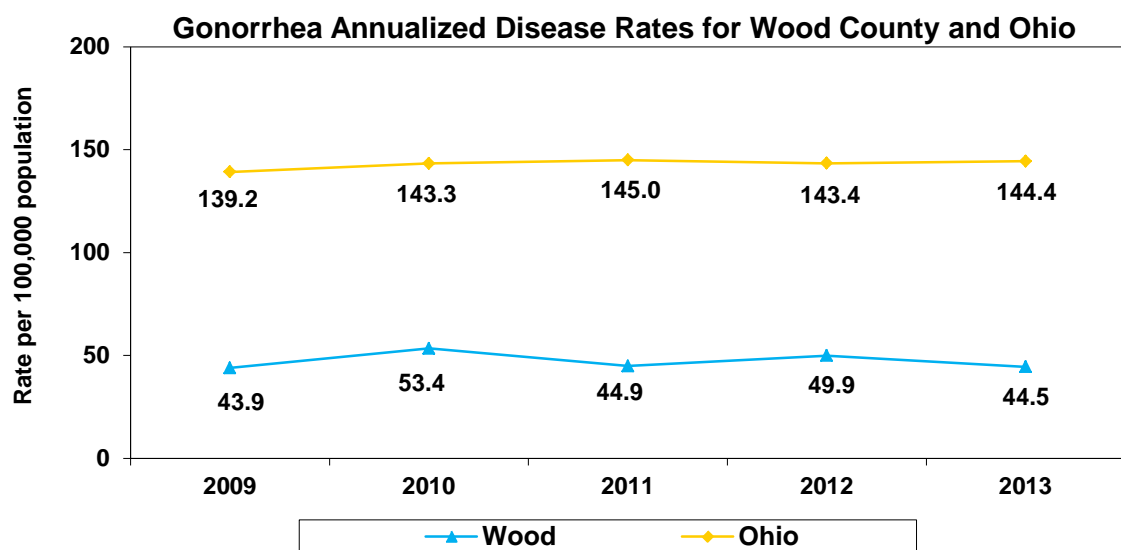
(Source for graph: ODH, STD Surveillance, data reported through 6-27-14)



(Source for graphs: ODH, STD Surveillance, data reported through 6-27-14)

The following graphs show Wood County gonorrhea disease rates per 100,000 population updated June 27, 2014 by the Ohio Department of Health. The graphs show:

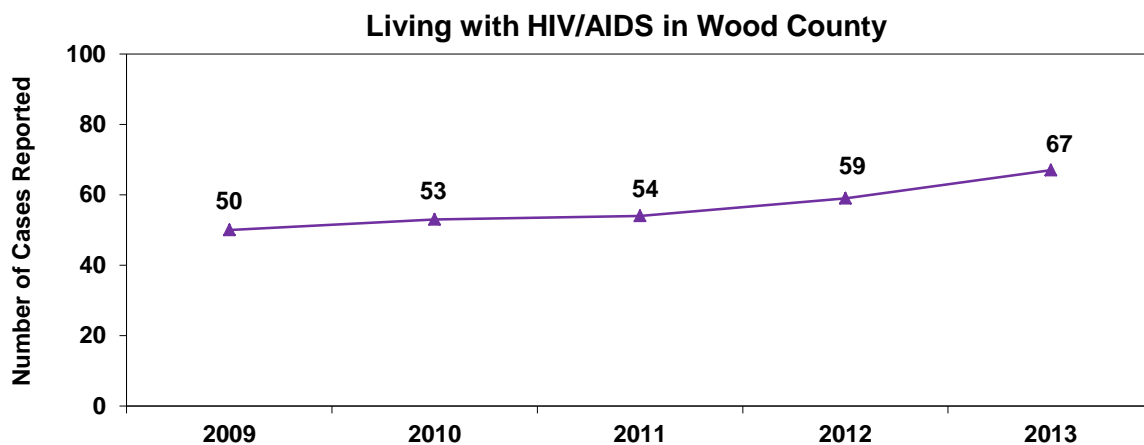
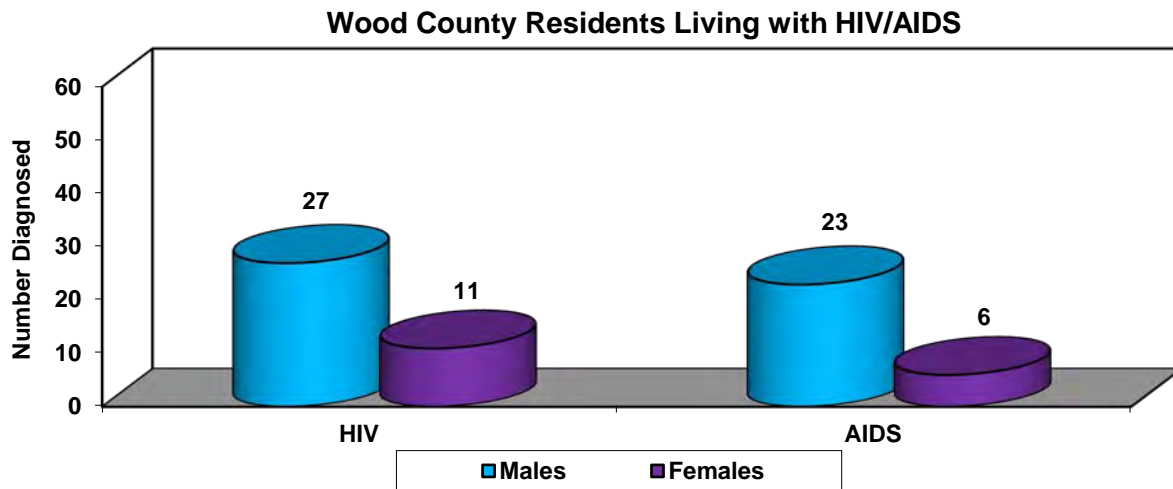
- The Wood County gonorrhea rate fluctuated from 2009 to 2013, and remained below the Ohio rate.
- The Ohio gonorrhea rate increased from 2009 to 2013.
- In 2012, the U.S. rate for new gonorrhea cases for the total population was 107.5 per 100,000 population (*Source: CDC, STD Trends in the U.S., 2014*).
- The Healthy People 2020 objective for gonorrhea is 257 new female and 198 new male cases per 100,000 population.



(Source for graphs: ODH, STD Surveillance, data reported through 6-27-2014)

The following graphs show the number of Wood County residents living with HIV/AIDS, updated December 31, 2013 by the Ohio Department of Health. The graphs show:

- The Wood County rate of 79.7 per 100,000 males living with HIV/AIDS was higher than the female rate of 26.0 per 100,000 population.
- From 2009-2013, the number of people living with HIV/AIDS in Wood County increased.

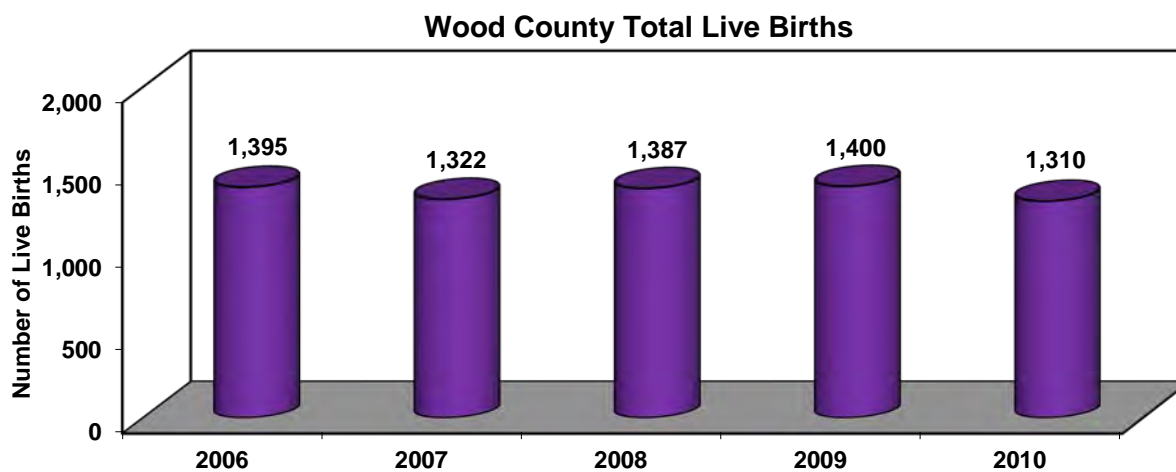
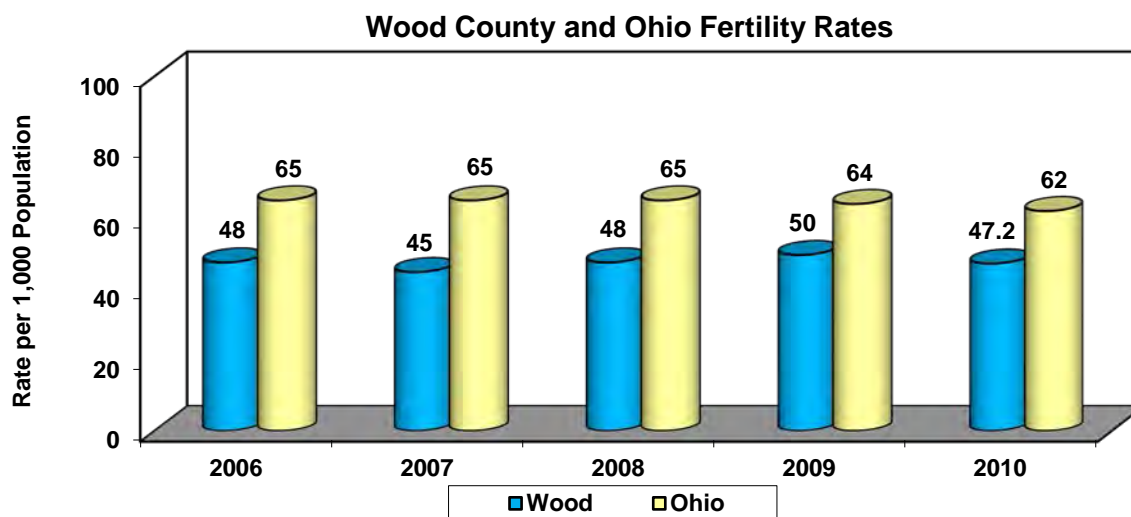


(Source for graphs: ODH HIV/AIDS Surveillance Program, Updated 12-31-13)

Pregnancy Outcomes

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

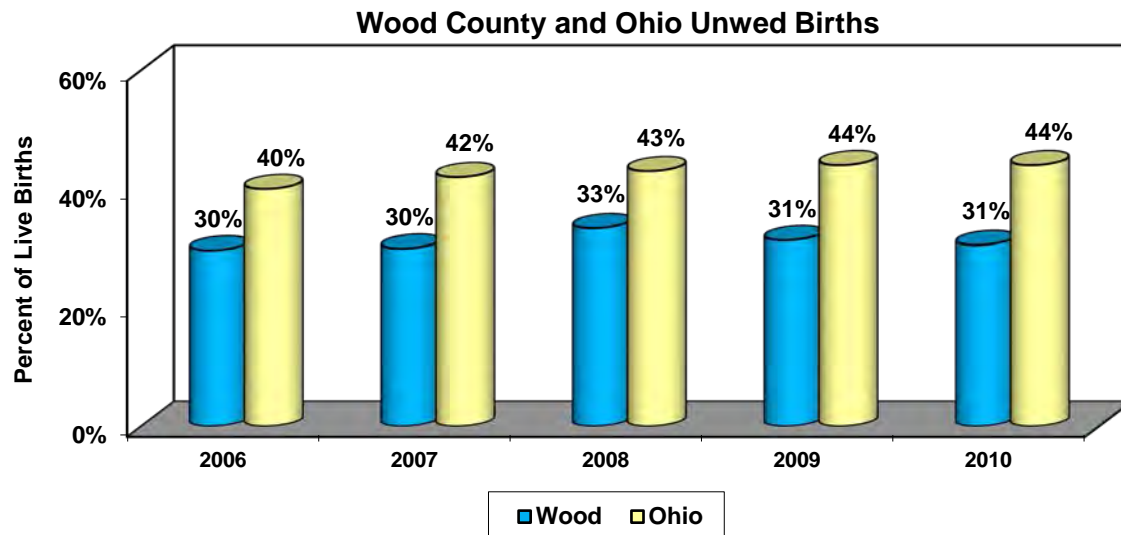
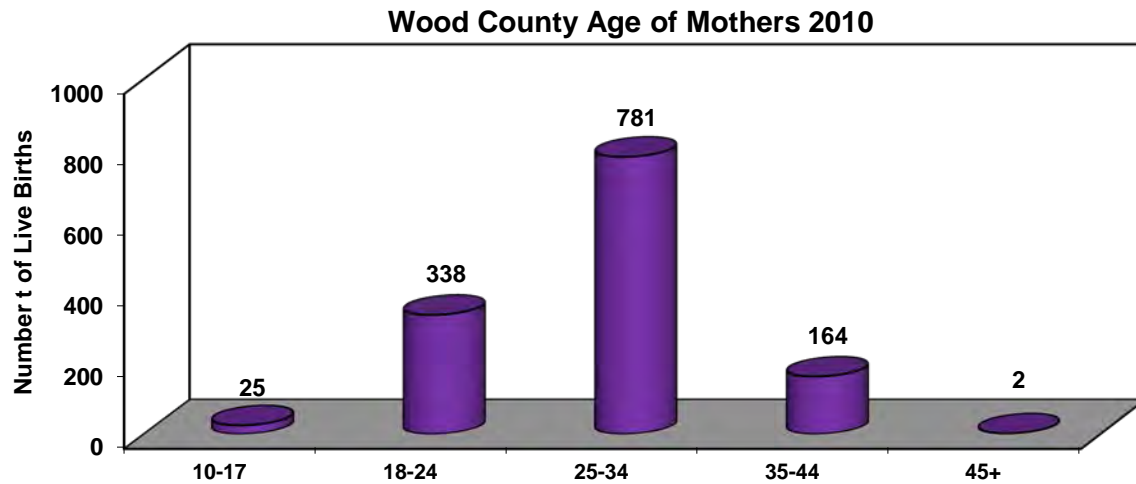
- In 2012, the U.S. fertility rate was 63.0 per 1,000 women ages 15-44 (Source: National Vital Statistics Report 2012).
- From 2006-2010, there was an average of 1,363 live births per year in Wood County.
- The Wood County fertility rates for 2006-2010 were less than the Ohio rates.



(Source for graphs: ODH Information Warehouse Updated 5-24-13)

The following graphs show Wood County total number of live births by age of the mother and Wood County and Ohio percentage of unwed births updated May 24, 2013 by the Ohio Department of Health. The graphs show:

- The majority (63%) of Wood County births were to mothers between 25-34 years old.
- The percentage of births to unwed mothers in Wood County fluctuated from year to year, but significantly remained below the Ohio percentage from 2006 to 2010.
- In 2012, 41% of U.S. births were to unwed mothers (*Source: National Vital Statistics Report 2012*).

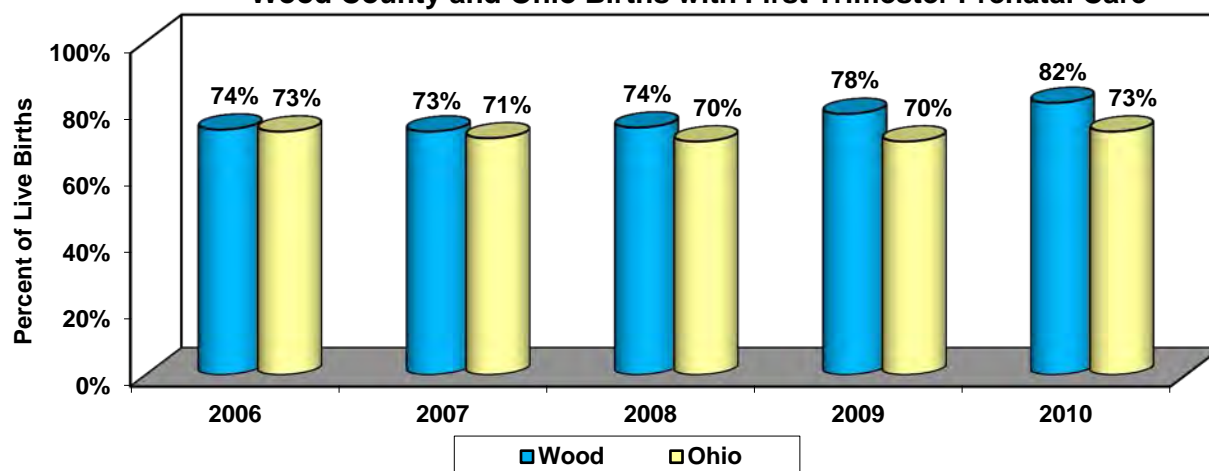


(Source for graphs: ODH Information Warehouse Updated 5-24-13)

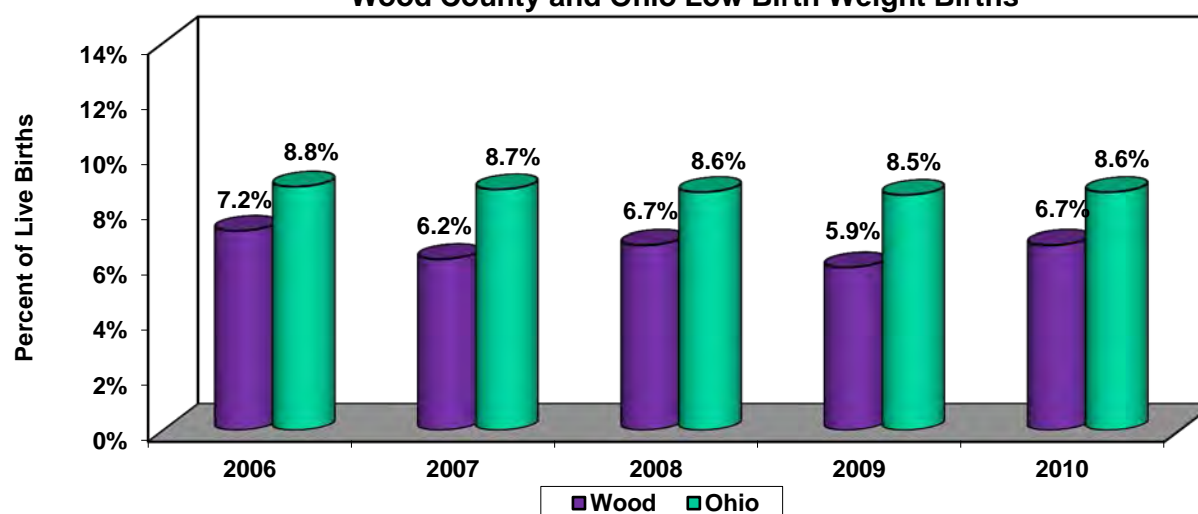
The following graphs show Wood County and Ohio percentage of births with first trimester prenatal care and low birth weight rates updated May 24, 2013 by the Ohio Department of Health. The graphs show:

- In 2010, 82% of Wood County mothers received prenatal care during the first trimester (*Source: ODH, Birth Statistics, 2010*).
- The percentage of Wood County low birth weight births are lower than Ohio and the U.S. percentages.
- In 2012, 8% of all U.S. live births were low birth weight births (*Source: National Vital Statistics Report 2012*).

Wood County and Ohio Births with First Trimester Prenatal Care



Wood County and Ohio Low Birth Weight Births*



*Low Birth Weight is defined as weighing less than 2,500 grams or 5 pounds, 8 ounces.
(Source for graphs: ODH Information Warehouse Updated 5-24-13)

Adult | QUALITY OF LIFE

Key Findings

In 2015, 25% of Wood County adults were limited in some way because of a physical, mental or emotional problem.

Impairments and Health Problems

- In 2015, one-fourth (25%) of Wood County adults were limited in some way because of a physical, mental or emotional problem (21% Ohio, 20% U.S., 2013 BRFSS), increasing to 48% of those with incomes less than \$25,000 and 50% of those ages 65 and older.
- Among those who were limited in some way, the following most limiting problems or impairments were reported: arthritis/rheumatism (46%), back or neck problems (35%), walking problems (22%), stress, depression, anxiety, or emotional problems (19%), sleep problems (17%), chronic pain (16%), lung/breathing problems (12%), heart problems (11%), high blood pressure (10%), diabetes (9%), hearing problems (7%), fractures, bone/joint injuries (7%), eye/vision problems (5%), incontinence (5%), mental health issue (5%), tobacco dependency (3%), mental health illness/disorder (2%), cancer (1%), stroke-related problems (1%), a developmental disability (1%), and a learning disability (1%).
- Wood County adults were responsible for providing regular care or assistance to the following: multiple children (15%), a friend, family member or spouse who has a health problem (7%), an elderly parent or loved one (6%), an adult child (3%), grandchildren (3%), someone with special needs (2%), a friend, family member or spouse with dementia (2%), a friend, family member or spouse with a mental health issue (1%), and children with discipline issues (1%).
- Wood County adults needed help with the following because of an impairment or health problem: shopping (6%), household chores (5%), transportation (5%), getting around for other purposes (4%), dressing (4%), doing necessary business (3%), getting around the house (2%), bathing (2%), childcare (1%), and eating (1%).

Simple Tips for Healthy Eyes

Follow these simple guidelines for maintaining healthy eyes:

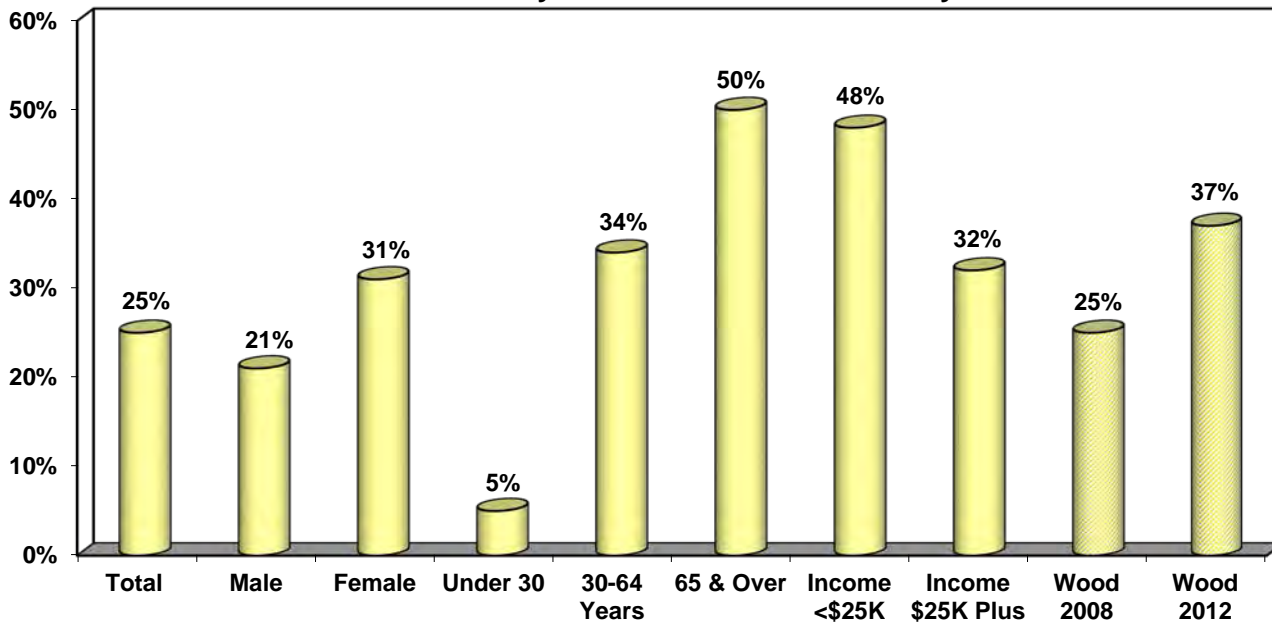
- Have a comprehensive dilated eye exam.
- Know your family's eye health history.
- Eat right to protect your sight.
- Wear sunglasses to protect your eyes from the sun's ultraviolet rays.
- Give your eyes a rest.
- Quit smoking or never start.
- Clean your hands and your contact lenses properly.

(Source: CDC, Vision Health Initiative, 2012, from: http://www.cdc.gov/visionhealth/basic_information/eye_healthtips.htm)

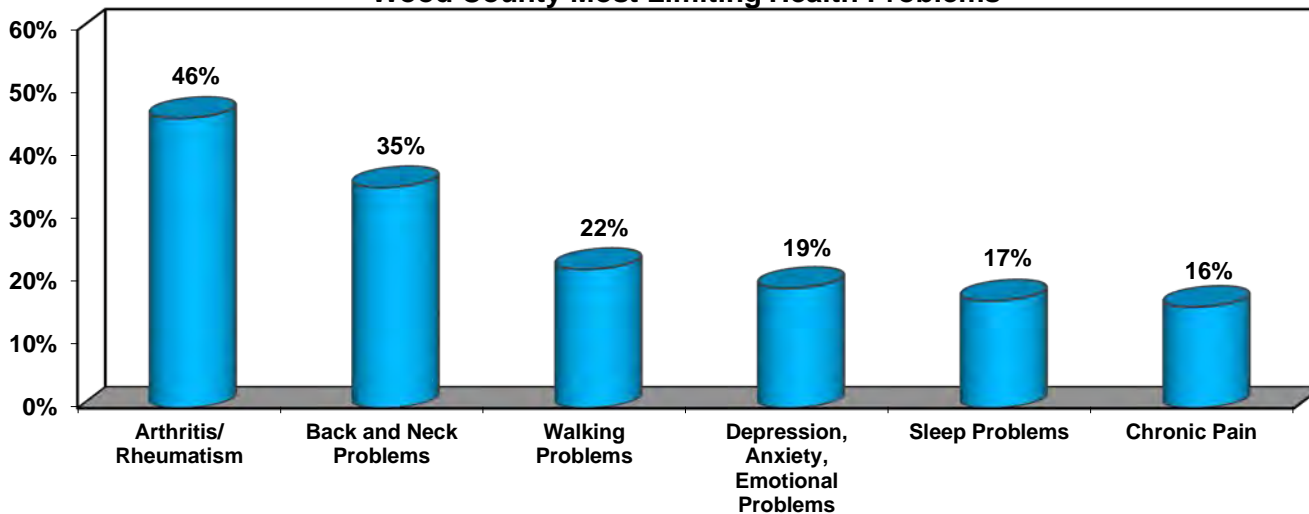
Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S 2013
Limited in some way because of a physical, mental, or emotional problem	25%	37%	25%	21%	20%

The following graphs show the percentage of Wood County adults that were limited in some way and the most limiting health problems. Examples of how to interpret the information shown on the graph include: 25% of Wood County adults are limited in some way, 21% of males, and 50% of those 65 and older.

Wood County Adults Limited in Some Way



Wood County Most Limiting Health Problems



Healthy People 2020
Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Wood County 2015	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	46%	36%

**U.S. baseline is age-adjusted to the 2000 population standard
 (Sources: Healthy People 2020 Objectives, 2015 Wood County Health Assessment)*

Hearing Loss in Older Adults

- Hearing loss is one of the most common conditions affecting older adults. Approximately 17 percent, or 36 million, of American adults report some degree of hearing loss.
- There is a strong relationship between age and reported hearing loss: 18 percent of American adults 45-64 years old, 30 percent of adults 65-74 years old, and 47 percent of adults 75 years old, or older, have a hearing impairment.
- Men are more likely to experience hearing loss than women.
- People with hearing loss may find it hard to have a conversation with friends and family. They may also have trouble understanding a doctor's advice, responding to warnings, and hearing doorbells and alarms.

(Source: NIH Senior Health, Hearing Loss, <http://nihseniorhealth.gov/hearingloss/hearinglossdefined/01.html>)

Adult | SOCIAL CONTEXT AND SAFETY

Key Findings

In 2015, 2% of Wood County adults were threatened or abused in the past year (including physical, sexual, emotional, financial, and verbal abuse). 55% of adults reported gambling in the past year.

Social Context

- 2% of Wood County adults were threatened or abused in the past year. They were threatened or abused by the following: a spouse or partner (100%), and someone else (63%).
- Wood County adults sought assistance for the following in the past year: free medical care (4%), rent/mortgage (4%), food (3%), home repair (3%), utilities (2%), personal debts (2%), transportation (1%), free tax preparation (1%), legal aid services (1%), credit counseling (<1%), and clothing (<1%).
- 14% of Wood County adults attempted to get assistance from a social service agency. They looked for assistance from the following: Job & Family Services (7%), WIC or health department (2%), welfare department (2%), 2-1-1/United Way (1%), legal aid (1%), church (1%), friend or family member (<1%), Personal Debts (<1%), and somewhere else (1%). 5% did not know where to look for assistance.
- Wood County adults talked to the following when dealing with personal problems: multiple people (45%), partner (29%), no one (11%), parents (5%), best friend (4%), brother/sister (2%), professional counselor/therapist (2%), their children (1%), pastor/priest (<1%), and other people (<1%).
- 55% of Wood County adults participated in the following gambling activities in the past 12 months: bought lottery tickets (44%), bought scratch-off tickets (28%), gambled in a casino (20%), bet money on sports teams (11%), played cards for money (9%), bet money on Keno (6%), bet or wagered on fantasy sports leagues or games (6%), bet money on games of person skill (pool, golf, bowling) (4%), gambled for money online (1%), played bingo for money (1%), and bet money at a racetrack (1%).
- Adults reported experiencing the following related to gambling: gambled while drunk or high (5%), lied to family members or others to hide their gambling (4%), and someone else expressed concern (2%).
- Wood County residents reported the following concerns in their community: school funding (29%), distracted driving (29%), unemployment (27%), drug use (24%), bullying (21%), youth substance abuse (21%), lack of affordable healthcare (20%), traffic (19%), DUI (18%), underemployment (17%), violence (16%), healthy eating (15%), opiate/prescription drug abuse (15%), senior/elder care (14%), physical fitness (13%), nutrition (12%), parents hosting/allowing underage drinking (11%), speeding (traffic) (10%), suicide prevention (10%), tobacco use (9%), homelessness (9%), bicycle safety (9%), disaster preparedness (8%), lack of affordable housing (8%), teen pregnancy (8%), chronic disease prevention (7%), sexting (7%), discrimination based on race, ethnicity, sexual orientation, etc. (6%), cancer prevention screening (5%), seat belt or restraint usage (5%), lack of affordable transportation (4%), lack of health education (4%), falls (3%), improperly cooking (food-borne illness) (3%), and gambling (3%).

- Wood County adults experienced the following in the past 12 months: a close family member went to the hospital (39%), death of a family member or close friend (27%), had bills they could not pay (13%), someone close to them had a problem with drinking or drugs (13%), moved to a new address (11%), someone in their household lost their job (10%), had their household income reduce by 50% (7%), someone in their household had their hours at work reduced (7%), someone in their household went to jail (5%), became separated or divorced (2%), were abused by someone physically, emotionally, sexually or verbally (2%), they or a family member were incarcerated (2%), were threatened by someone close to them (2%), had someone homeless living with them (2%), their child was threatened by someone close to them (1%), were homeless (<1%), failed a drug screen (<1%), were financially exploited (<1%), and were hit or slapped by their spouse or partner (<1%).
- Wood County adults experienced the following as a child: a parent or adult in their home swore at, insulted, or put them down (16%), lived with someone who was a problem drinker or alcoholic (15%), their parents became separated or were divorced (13%), lived with someone who was depressed, mentally ill, or suicidal (10%), a parent or adult in their home hit, beat, kicked, or physically hurt them (9%), someone at least 5 years older than them or an adult touched them sexually (6%), lived with someone who used illegal stress drugs, or who abused prescription medications (5%), their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (5%), someone at least 5 years older than them or an adult tried to make them touch them sexually (5%), lived with someone who served time or was sentenced to serve time in prison, jail or other correctional facility (3%), their parents were not married (2%), and someone at least 5 years older than them or an adult forced them to have sex (2%).
- 13% of Wood County adults had three or more adverse childhood experiences.

2% of Wood County adults were threatened or abused in the past year.

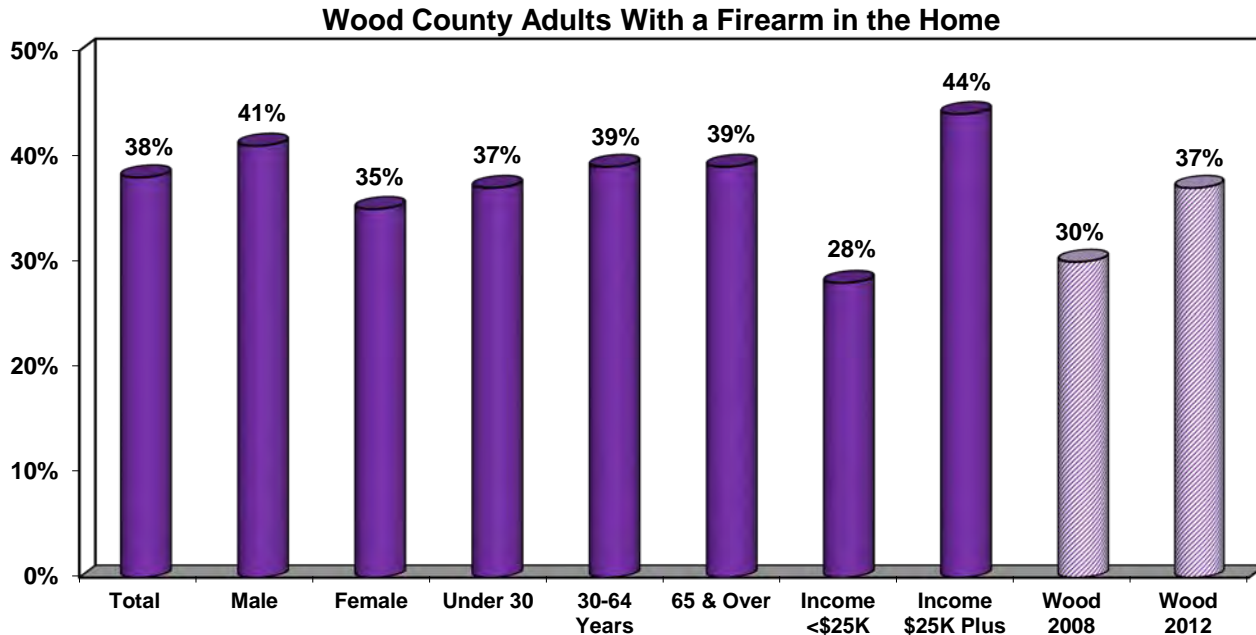
Safety

- More than one-third (38%) of Wood County adults kept a firearm in or around their home. 2% of adults reported they were unlocked and loaded.
- Wood County adults reported doing the following while driving: wearing a seatbelt (95%), talking on hand-held cell phone (47%), eating (42%), talking on hands-free cell phone (29%), texting (16%), using internet on their cell phone (4%), being under the influence of prescription drugs (3%), being under the influence of alcohol (2%), checking facebook on their cell phone (2%), reading (1%), and other activities (such as applying makeup, shaving, etc.) (1%).

Veterans' Affairs

- As a result of military service during the past 10-15 years, the following have affected veterans' immediate family members: had problems getting VA benefits (13%), had problems getting information on VA eligibility and applying (10%), access to medical care at a VA facility (7%), post-traumatic stress disorder (PTSD) (5%), access to medical care at a non-VA facility (3%), major health problems due to injury (2%), marital problems (2%), and could not find/keep a job (2%). 72% did not have any problems listed.

The following graph shows the percentage of Wood County adults that had a firearm in the home. Examples of how to interpret the information shown on the first graph include: 38% of all Wood County adults kept a firearm in their home, 41% of males, and 39% of those ages 30-64 kept a firearm in their home.



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.
 - 31,537 people die from gun violence and 71,386 people survive gun injuries.
- Every day, an average of 282 people is shot in America. Of those 282 people, 86 people die and 196 are shot, but survive.
 - Of the 282 people who are shot every day, an average of 50 are children and teens.
 - Of the 86 people who die, 32 are murdered, 51 are suicides, 2 die accidentally and 1 with an unknown intent.
 - Of the 196 people who are shot but survive, 140 are from assault, 43 are shot accidentally, 10 are suicide attempts, 2 are police interventions and 1 with an unknown intent.

(Source: Brady Campaign to Prevent Gun Violence, "There Are Too Many Victims of Gun Violence" fact sheet, retrieved from:

<http://www.bradiycampaign.org/sites/default/files/GunDeathandInjuryStatSheet3YearAverageFINAL.pdf>)

Ohio State Patrol Activity Statistics

- The table below shows activity that has been produced by the Ohio State Highway Patrol for Wood County from 1/1/2014 through 12/9/2014.
- The table also shows a previous year comparison for the same time frame.

Year to Date Activity	2013	2014
Enforcement Stops	8,344	9,127
Non-Enforcement Activity	19,222	18,580
Warnings	8,870	8,173
Motorist Assists	6,610	6,490
Crashes Investigated	670	1,068
OVI Enforcement	455	389
Driving Under Suspension Enforcement	265	270
Seat Belt Enforcement	738	791
Commercial Vehicle Enforcement	1,189	945
Case Investigations Initiated	225	157
Felony Arrests	94	66
Felony Warrants Served	21	15
Misdemeanor Summons Issued	233	198
Misdemeanor Warrants Served	56	61
Drug Violations	212	171
Identity Theft Enforcements	4	2
Resisting Arrest Violations	17	10
Weapons Violations	8	5

(Source: Ohio State Highway Patrol Statistics, Wood County Activity Statistics, Updated 12/9/2014, obtained from: <http://www.statepatrol.ohio.gov/statistics/statspage.asp?Area1=26&B2=Submit>)

Distracted Driving

- Distracted driving is driving while doing another activity that takes your attention away from driving. Distracted driving can increase the chance of a motor vehicle crash.
- Each day, more than 9 people are killed and more than 1,060 people are injured in crashes that were reported to involve a distracted driver.
- In 2011, 3,331 people were killed in crashes involving a distracted driver. An additional 387,000 people were injured in motor vehicle crashes involving a distracted driver in 2011
- 69% of drivers in the U.S. ages 18-64 reported that they had talked on their cell phone while driving, and 31% reported that they had read or sent text messages or email messages while driving at least once within the last 30 days.
- Nearly half of all U.S. high school students aged 16 years or older text or email while driving.

(Source: CDC, Distracted Driving, updated October 10, 2014, http://www.cdc.gov/motorvehiclesafety/distracted_driving/index.html)

Ohio State Highway Patrol Statistics

- Below are the yearly activity summaries and officer complaints from 2009-2013.
- In 2013 there were 64,468 total crashes in the state of Ohio.

Crashes Investigated	2009	2010	2011	2012	2013	5 Year Total
Total Crashes	67,695	69,077	66,628	64,561	64,468	333,429
Fatal	494	514	499	535	468	2,510
Injury	20,271	20,741	20,118	19,498	18,586	99,214
Property/Unknown	46,930	47,822	46,011	44,528	46,414	231,705

Traffic Enforcement	2009	2010	2011	2012	2013	5 Year Total
Total Contacts	1,428,830	1,386,383	1,404,060	1,495,564	1,582,694	7,307,531
Enforcement	523,525	514,247	512,125	567,858	601,371	2,719,126
Non-Enforcement	915,305	872,136	891,935	927,706	981,323	4,588,405
OVI Arrests	24,254	22,090	23,747	24,529	24,128	118,748
Speed Citations	318,543	325,423	323,477	362,821	381,500	1,711,765
Safety Belt Citations	98,039	86,623	84,176	91,595	97,463	457,896
Driver License Citations	26,019	25,367	25,656	28,299	32,344	137,685
Traffic Warnings	410,659	371,085	367,739	409,029	440,349	1,998,861
Motorist Assists	324,906	308,573	312,104	304,293	291,837	1,541,713

Crime Enforcement	2009	2010	2011	2012	2013	5 Year Total
Cases	11,191	11,209	9,040	9,244	9,975	50,659
Stolen Vehicles Recovered	673	676	653	735	654	3,391
Drug Arrests	5,327	5,665	6,164	7,644	9,628	34,428
Illegal Weapon Arrests	315	332	362	395	568	1,972
Resisting Arrests	733	682	726	721	731	3,593

(Source: OSHP Computer-Aided Dispatch (CAD) System and DPS Electronic Crash Record System. Updated: 01/30/2014)

Traffic Stop Data

- This data is compiled from all traffic stops in which a citation, inspection, warning, or vehicle defect notice was issued by Ohio State Highway Patrol Troopers in 2013.

Crime Enforcement	Asian	Black	Hispanic	White	Unknown	Total
Traffic Stop Contracts	13,558	131,805	21,701	818,994	4,278	991,001

(Source: OSHP Computer-Aided Dispatch (CAD) System and DPS Electronic Crash Record System. Updated: 01/30/2014)

Complaint Data

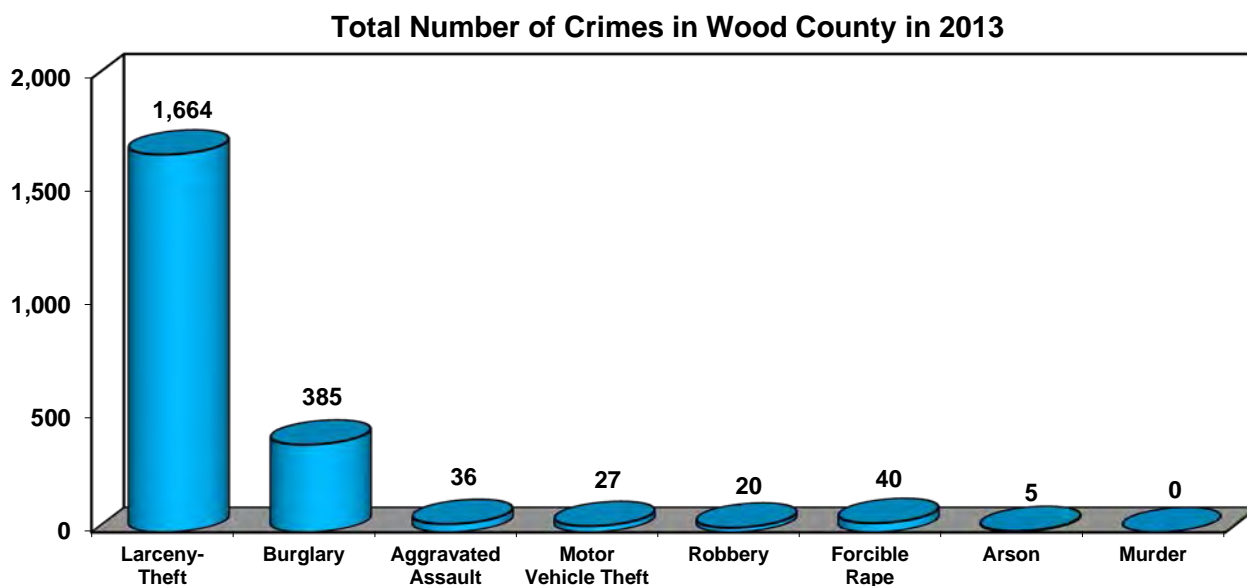
- This data represents all citizen complaints filed with the Ohio State Highway Patrol from January – December 2013.
- In 2013, there were a total of 30 filed citizen complaints.

	Citizen Complaints Filed	Chargeable Findings	Non- Chargeable Findings
Harassment	2	0	2
Sexual Harassment	0	0	0
Racial Harassment	0	0	0
Improper or Unfair Enforcement Practices	1	0	1
Arrest Complaint	6	1	5
Mistakes and/or Poor Quality Reports	0	0	0
Failure to Assist Public	1	1	0
Improper Vehicle Operation	1	1	0
Dishonesty, Untruthfulness, Falsification	0	0	0
Improper Use of Electronic Equipment	0	0	0
Personal Activity of Employee	1	0	1
Failure to Act	0	0	0
Care of Recovered Property	0	0	0
Excessive Force	0	0	0
Other Agency / Beyond Our Control	0	0	0
Negligence by Employee	2	0	2
Improper Interaction with Other Public Service Agencies	0	0	0
Verbal Abuse	2	2	0
Unprofessional Demeanor (attitude)	7	4	3
Racially Biased Traffic Stop or Enforcement	1	0	1
Personal Conduct while Off Duty	1	0	1
Misuse of LEADS	0	0	0
Lost or Damaged Property	0	0	0
Request for Bribes or Gratuities by Employee	4	3	1
Use of Position for Personal Gain	1	0	1
Conducting Personal Business While on Duty	0	0	0
Total Complaints	30	12	18

(Source: Ohio State Highway Patrol Statistics, obtained from: <http://www.statepatrol.ohio.gov/statistics/statspage2.asp>)

Crime Data

- In 2013, the total population in Wood County was 114,116.
- There were a total of 2,085 property crimes and 87 violent crimes in 2013.



(Source: Office of Criminal Justice Services, Crime Statistics and Crime Reports, 2013, from http://www.ocjs.ohio.gov/crime_stats_reports.stm)

Arrests/Incarceration Data

- In July 2015, the total inmate population in the state of Ohio was 50,403.
- In FY 2015, the total budget was \$1,619,085,171. The budget has increased \$19,390,404 since FY 2014.
- The average daily cost per inmate in 2015 was \$62.57, and the annual budget is \$22,836.34.

Ohio Department of Rehabilitation and Correction Counts	2015
Inmates Under 18 Years of Age	38
Inmates Over 50 Years of Age	8,071
Pregnant Females	53
Mothers/Babies in the ABC Nursery	9
Inmates Serving Life Without Parole (LWOP)	531

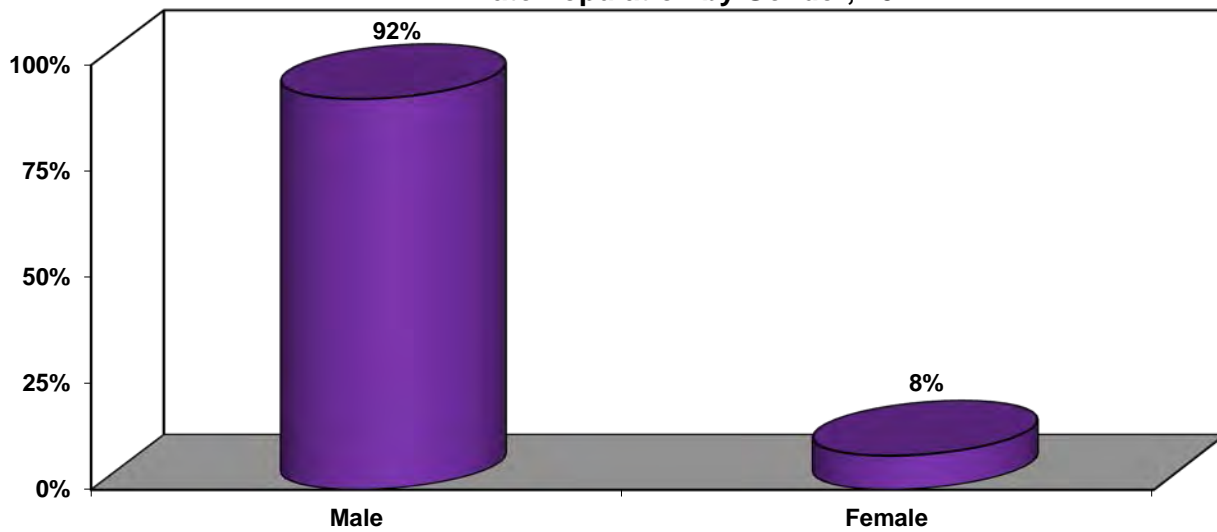
Age Range of Offender Population	2012
Male	37.09 years
Female	35.11 years
Average Stay in Prison	2.26 years

(Source: Ohio Department of Rehabilitation and Correction, Fact Sheet, July 2015, from <http://www.drc.ohio.gov/web/Reports/FactSheet/July%202015.pdf>)

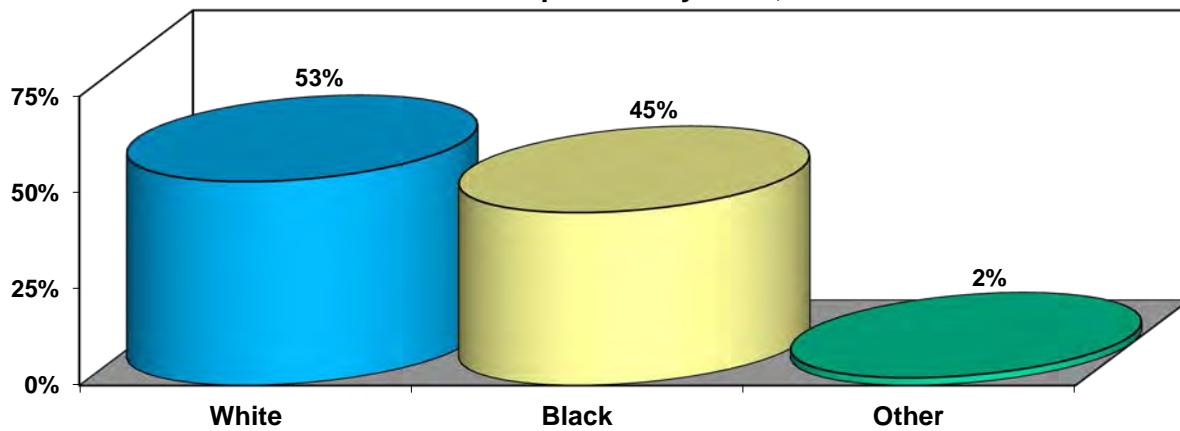
The following graphs show the Ohio inmate population in 2012 by gender and race. These graphs show:

- The percentage of Ohio males who are incarcerated is extremely higher than the percentage of females.
- More than half of the Ohio population that is incarcerated is White, followed by African Americans at 45%.

Inmate Population by Gender, 2012



Inmate Population by Race, 2012



(Source: Ohio Department of Rehabilitation and Correction, Fact Sheet, July 2015, from <http://www.drc.ohio.gov/web/Reports/FactSheet/July%202015.pdf>)

Adult | MENTAL HEALTH AND SUICIDE

Key Findings

In 2015, 5% of Wood County adults had a period of two or more weeks when they felt so sad or hopeless nearly every day that they stopped doing usual activities.

Adult Mental Health

- In the past year, 5% of Wood County adults had a period of two or more weeks when they felt so sad or hopeless nearly every day that they stopped doing usual activities, increasing to 11% of those ages 30-64.
- 11% of Wood 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: stigma of seeking mental health services (3%), could not afford to go (2%), co-pay/deductible too high (2%), did not know how to find a program (2%), other priorities (2%), could not get to the office (1%), fear (1%), and other reasons (5%). 78% of adults indicated they did not need such a program.

Suicide Facts

- 38,364 people in the U.S. died from suicide, and 959,100 people attempted suicide in the 2010.
- Every 13.7 minutes an average of one person kills themselves, and every 32 seconds a person attempts suicide in the United States.
- Suicide is the 10th ranking cause of death in the U.S.
- For every female death by suicide, there are 3.7 male deaths.
- In 2010, there were 1,439 suicide deaths in Ohio.
- The leading suicide methods included:
 - Firearm suicides (50.5%)
 - Suffocation/Hanging (24.7%)
 - Poisoning (17.2%)
 - Cutting/Piercing (1.8%)
 - Drowning (1.1%)

(Sources: American Association of Suicidology, Statistics, September 21, 2012, from: <http://www.suicidology.org/resources/facts-statistics-current-research/suicide-statistics>)

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Two or more weeks in a row felt sad or hopeless	11%	12%	5%	N/A	N/A

N/A – Not available

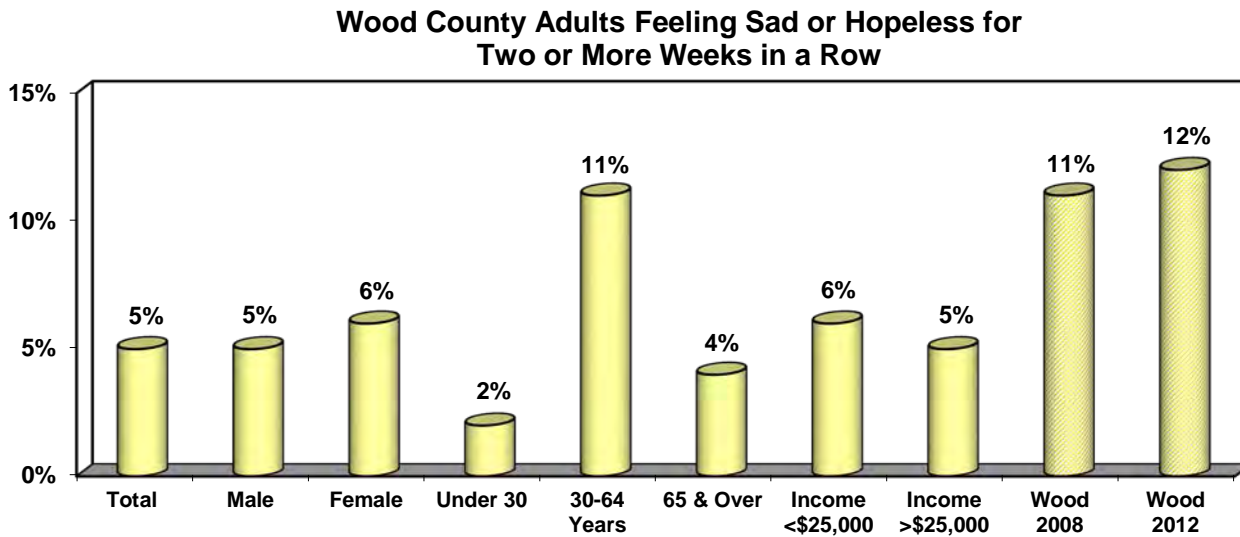
Mental Health Services in Ohio

(Ohio Facts 2012, FY 2011*)

- In FY 2011, mental health services spending totaled \$1.33 billion in Ohio. In FY 2011, state hospitals served 6,730 individuals at a cost of \$214.6 million. Average daily cost per resident was \$602.
- In FY 2011, Ohio's 50 community-based behavioral health boards served over 360,000 individuals throughout the state.
- In FY 2011, approximately 268,500 individuals received Medicaid mental health services through ODMH.

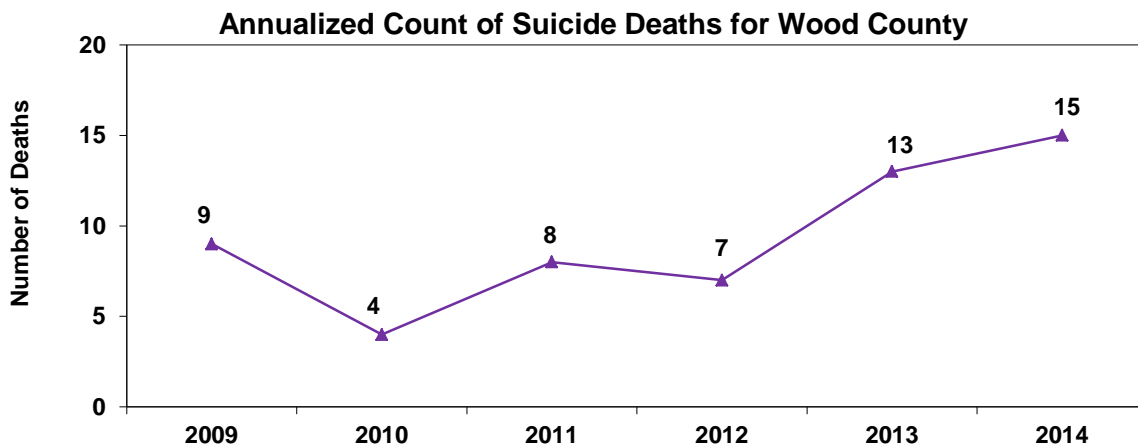
(Sources: U.S. Department of Health and Human Services, Ohio Department of Mental Health, <http://www.lsc.state.oh.us/fiscal/ohiofacts/sept2012/health&humanservices.pdf>)

The following graph shows Wood County adults who felt sad or hopeless for two or more weeks in a row in the past year. Examples of how to interpret the information in the graph include: 5% of all Wood County adults felt sad or hopeless for two or more weeks in a row, 5% of males, and 6% of females.



The following graph shows the Wood County suicide counts. The graph shows:

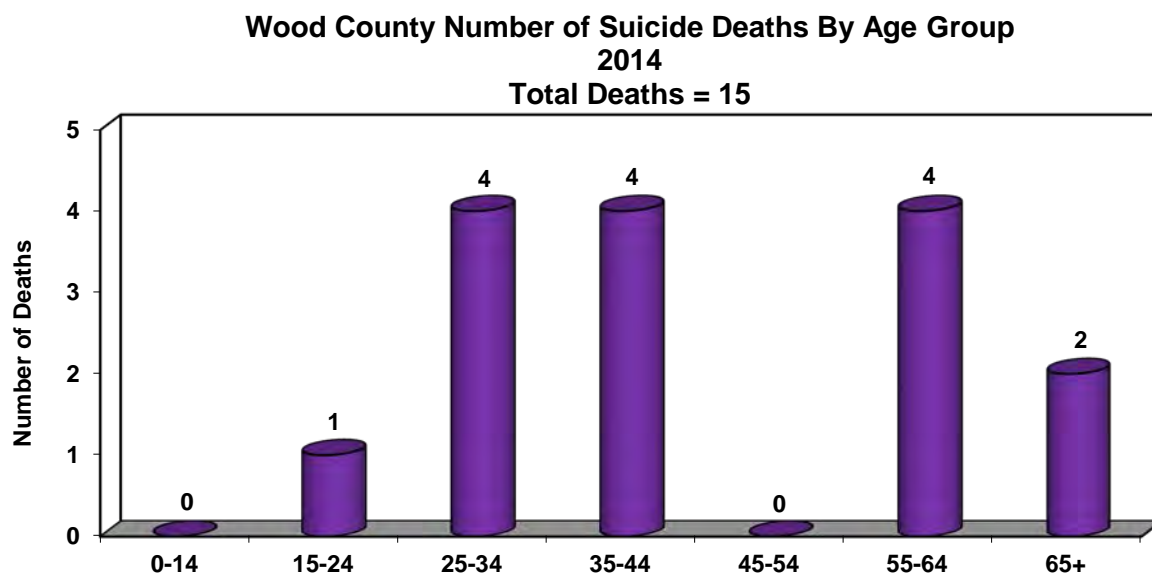
- The Wood County suicide count fluctuated from year to year.
- From 2009-2015 there have been 56 suicide deaths in Wood County.



(Source: Wood County Death Certificates, updated as of April 29, 2015)

The following graph shows the 2014 Wood County suicide counts by age group. The graph shows:

- In 2014, 40% of all Wood County suicide deaths occurred to those ages 55 years old or older.



(Source: Wood County Death Certificates, updated as of April 29, 2015)

Warning Signs for Suicide

More than 90 percent of people who kill themselves are suffering from one or more psychiatric disorders, in particular:

- Major depression
- Bipolar depression
- Schizophrenia
- Drug abuse and dependence
- Alcohol abuse and dependence
- Post-Traumatic Stress Disorder (PTSD)
- Eating disorders
- Personality disorders

The core symptoms of major depression are a “down” or depressed mood most of the day or a loss of interest or pleasure in activities that were previously enjoyed for at least two weeks, as well as:

- Changes in sleeping patterns
- Change in appetite or weight
- Intense anxiety, agitation, restlessness
- Fatigue or loss of energy
- Decreased concentration, indecisiveness, or poorer memory
- Feelings of hopelessness, worthlessness, self-reproach or excessive or inappropriate guilt
- Recurrent thoughts of suicide

Prevention: Take it Seriously

Fifty to 75% of all suicides give some warning of their intentions to a friend or family member. Recognize the *Imminent Dangers*:

- Threatening to hurt or kill oneself
- Talking or writing about death, dying, or suicide
- Looking for ways to kill oneself (weapons, pills, or other means)
- Has made plans or preparations for a potentially serious attempt

(Source: American Foundation for Suicide Prevention, *When You Fear Someone May Take Their Life*, <https://www.afsp.org/>)

Adult and Youth | ORAL HEALTH

Key Findings

The 2015 Health Assessment project has determined that nearly three-fourths (74%) of Wood County adults had visited a dentist or dental clinic in the past year. The 2012 BRFSS reported that 67% of U.S. adults and 68% of Ohio adults had visited a dentist or dental clinic in the previous twelve months. More than three-fourths (79%) of Wood County youth in grades 6-12 had visited the dentist for a check-up, exam, teeth cleaning, or other dental work in the past year (2013 YRBS reported 75% for Ohio).

Wood County Dental Care Resources – 2012

- Number of licensed dentists- 44
- Number of primary care dentists- 35
- Ratio of population per dentist- 2,914:1
- Number of dentists who treat Medicaid patients- 17
- Ratio of Medicaid population per dentist who treats Medicaid patients- 1,007:1

(Source: ODH Ohio Oral Health Surveillance System, 2012)

Access to Dental Care

- In the past year, 74% of Wood County adults had visited a dentist or dental clinic, decreasing to 69% of adults with annual household incomes less than \$25,000 and 63% of those over the age of 65.
- The 2012 BRFSS reported that 67% of U.S. adults and 68% of Ohio adults had visited a dentist or dental clinic in the previous twelve months.
- More than three-fourths (76%) of Wood County adults with dental insurance have been to the dentist in the past year, compared to 71% of those without dental insurance.
- 3% of adults indicated they skipped meals due to mouth, tooth or gum pain/discomfort.
- When asked the main reason for not visiting a dentist in the last year, 24% said cost, 22% had no oral health problems, 12% had not thought of it, 9% said fear, apprehension, nervousness, pain, and dislike going, 9% indicated multiple issues- including cost and insurance issues, 5% had other priorities, 1% did not have/know a dentist, 1% could not get into a dentist, 1% said their dentist did not accept their medical coverage, and 1% could not find a dentist to who took Medicaid.
- Wood County youth last saw a dentist for a check-up, exam, teeth cleaning, or other dental work: less than a year ago (79%), 1 to 2 years ago (8%), 2 to or more years ago (4%), never (1%), and do not know (9%).

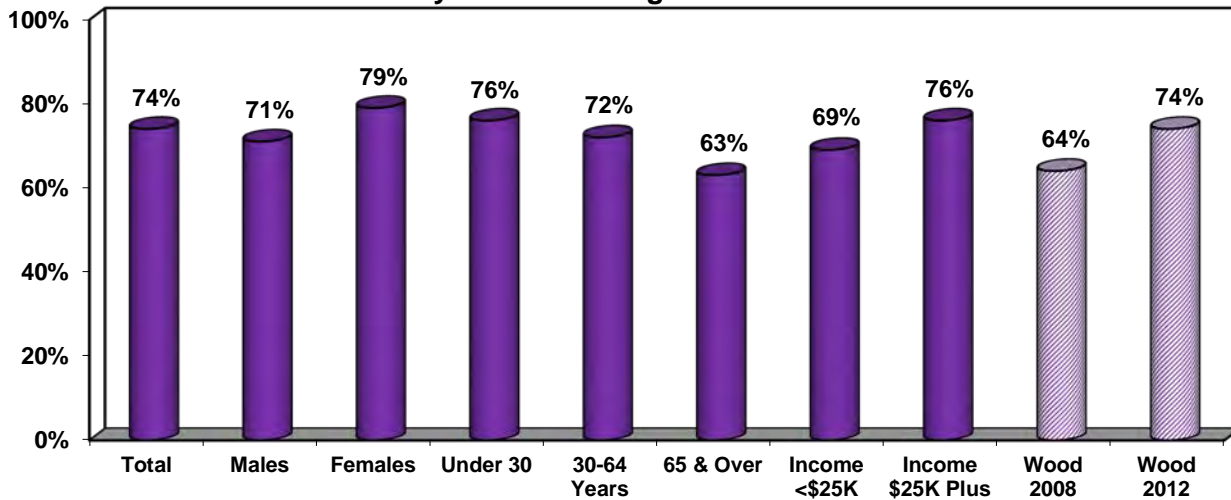
What You Can Do to Maintain Good Oral Health

- Drink fluoridated water and use fluoride toothpaste. Fluoride's protection against tooth decay works at all ages.
- Take care of your teeth and gums. Thorough tooth brushing and flossing to reduce dental plaque can prevent gingivitis—the mildest form of gum disease.
- Avoid tobacco. In addition to the general health risks posed by tobacco, smokers have 4 times the risk of developing gum disease compared to non-smokers.
- Limit alcohol. Heavy use of alcohol is a risk factor for oral and throat cancers.
- Eat wisely. Adults should avoid snacks full of sugars and starches.
- Visit the dentist regularly. Check-ups can detect early signs of oral health problems and can lead to treatments that will prevent further damage, and in some cases, reverse the problem.

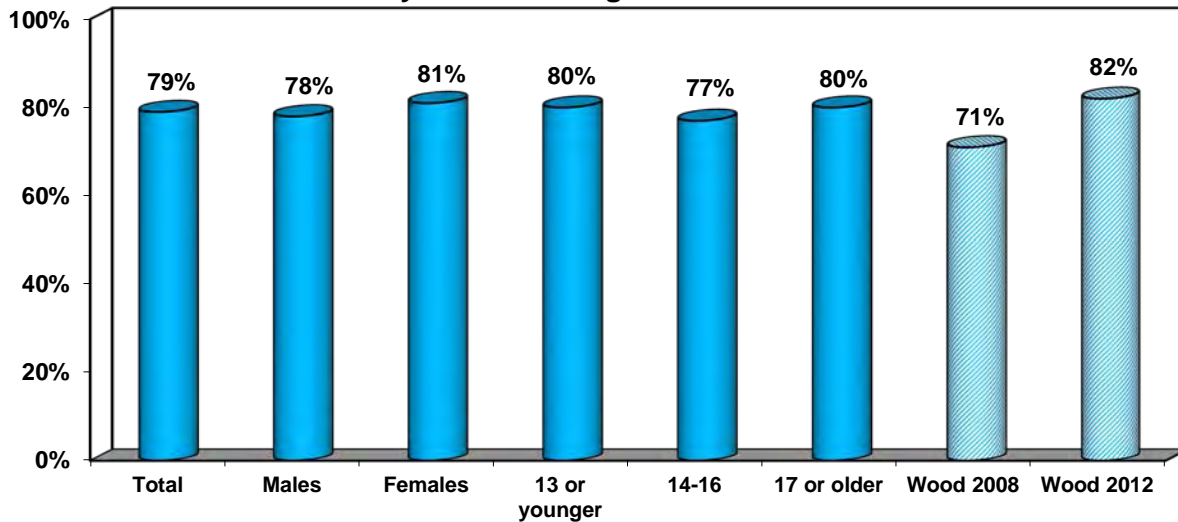
(Source: CDC: Oral Health for Adults, July 2013, from:
http://www.cdc.gov/OralHealth/publications/factsheets/adult_oral_health/adults.htm)

The following graphs provide information about the frequency of Wood County adult and youth dental visits. Examples of how to interpret the information on the first graph include: 74% of all Wood County adults had been to the dentist in the past year, 76% of those under the age of 30, and 69% of those with incomes less than \$25,000.

Wood County Adults Visiting a Dentist in the Past Year



Wood County Youth Visiting a Dentist in the Past Year



Adult Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never
Time Since Last Visit to Dentist/Dental Clinic					
Males	71%	10%	11%	6%	1%
Females	79%	4%	7%	9%	0%
Total	74%	8%	10%	7%	1%

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

Adult Comparisons	Wood County 2008	Wood County 2012	Wood County 2015	Ohio 2013	U.S. 2013
Adults who have visited the dentist in the past year	64%	74%	74%	68%*	67%*

**2012 BRFSS Data*

Oral Health in Older Adults

- Older adults are at risk for getting cavities, gum disease and mouth cancer – and these may not cause any pain or discomfort until they are advanced.
- Everyone needs to see their dentist for a checkup at least once a year – preferably more often.
- People without natural teeth are at risk for mouth cancer as well as gum problems. Denture wearers need to have their mouth and their dentures checked at least once a year.
- As with many other cancers, older adults are more likely to get mouth cancer than younger people.
- Everyone is at a greater risk of getting mouth cancer if they use tobacco, drink alcohol a lot, or are repeatedly exposed to the sunlight.
- Severe gum disease has also been associated with pneumonia in long-term care patients, heart disease, stroke, and poor diabetic control.
- Periodontal disease can be prevented by:
 - Cleaning your teeth and gums thoroughly every day.
 - Getting regular checkups from your dentist.
 - Following the advice of your dentist and dental hygienist.

(Source: American Dental Association: Oral Longevity Questions and Answers, from: <http://www.ada.org/en/>)

Adult | PARENTING

Key Findings

The 2015 Health Assessment project identified that 76% of parents had taken their child to the dentist in the past year. 81% of parents described their child's health as excellent or very good.

Parenting

- 76% of parents said that their child had been to the dentist within the past year, 6% had been within the past two years and 2% had been within the past five years.
- 8% of parents have been told by a doctor or health professional that their child was overweight or obese.
- 81% of parents described their child's health as excellent or very good. Conversely, 3% of parents described their child's health as fair or poor.
- In the past 5 years, parents breastfed their child: 2 weeks or less (15%), 3 to 6 weeks (3%), 7 weeks to 3 months (9%), 4 months to 6 months (6%), 6 months to 9 months (17%), and more than 9 months (25%). 23% of parents indicated they never breastfed their child.

Tips for Parents – Ideas to Help Children Maintain a Healthy Weight

- Encourage healthy eating habits by providing fruits, vegetables, whole grains, low-fat or non-fat dairy products, and lean meats and proteins for your family.
- Find ways to make your family's favorite dishes in a healthier way.
- Limit or reduce the consumption of calorie-rich, sugary and/or saturated fat in your home.
- Adding physical activity into the family's routine will lead to it becoming a healthy habit. Some examples of moderate intensity physical activity include brisk walking, playing tag, jumping rope, playing soccer, swimming and dancing.
- Encourage fun activities to reduce the amount of sedentary time watching TV, playing video games or on the computer.
- The goal is to reduce the rate of weight gain in overweight and obese children and teens while still accounting for normal growth and development. Children and teens should not be placed on a diet without consulting a doctor.

(Source: CDC, Healthy Weight, "Tips for Parents – Ideas to Help Children Maintain a Healthy Weight", <http://www.cdc.gov/healthyweight/children/index.html>, November 25, 2014)

How to Talk to your Teen about Safe Sex

- Talk calmly and honestly about safe sex.
- Practice talking about safe sex with another adult before approaching your adolescent.
- Listen to your adolescent and answer his/her questions honestly.
- Topics that are appropriate for a safe sex discussion may include: STDs and prevention, peer pressure to have sex, birth control, different forms of sexuality, and date rape.

(Source: American Academy of Pediatrics (AAP), Safer Sex Guidelines, <http://www.ipch.org/DiseaseHealthInfo/HealthLibrary/adolescent/safesex.html>)

Youth | WEIGHT STATUS

Key Findings

The 2015 Health Assessment identified that 17% of Wood County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 29% of Wood County youth reported that they were slightly or very overweight. 73% of youth were exercising for 60 minutes on 3 or more days per week. 91% of youth were involved in extracurricular activities.

Youth Weight Status

- BMI for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific as children's body fatness changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- In 2015, 17% of youth were classified as obese by Body Mass Index (BMI) calculations (2013 YRBS reported 13% for Ohio and 14% for the U.S.). 15% of youth were classified as overweight (2013 YRBS reported 16% for Ohio and 17% for the U.S.). 66% were normal weight, and 3% were underweight.

17% of Wood County youth were classified as obese.

- 29% of youth described themselves as being either slightly or very overweight (2013 YRBS reported 28% for Ohio and 31% for the U.S.).
- Over-two-fifths (41%) of all youth were trying to lose weight, increasing to 52% of Wood County female youth (compared to 33% of males) (2013 YRBS reported 47% for Ohio and 48% for the U.S.).
- Wood County youth reported doing the following to lose weight or keep from gaining weight in the past 30 days:
 - 43% of youth exercised.
 - 37% of youth drank more water.
 - 27% of youth ate less food, fewer calories, or foods lower in fat.
 - 25% of youth ate more fruits and vegetables.
 - 12% of youth skipped meals.
 - 3% reported going without eating for 24 hours or more (2013 YRBS reported 10% for Ohio and 13% for the U.S.).
 - 2% vomited or took laxatives (2013 YRBS reported 5% for Ohio and 4% for the U.S.).
 - 1% reported taking diet pills, powders, or liquids without a doctor's advice (2013 YRBS reported 5% for Ohio and the U.S.).
 - <1% reported smoking to lose weight.

Nutrition

- 13% of Wood County youth ate 5 or more servings of fruits and vegetables per day. 80% ate 1 to 4 servings of fruits and vegetables per day.
- 28% of youth drank soda pop (not diet), punch, Kool-Aid, sports drinks, energy drinks or other fruit flavored drinks at least once per day during the past week.
- 26% of youth reported they drank energy drinks for the following reasons: to stay awake (43%), to get pumped up (16%), to help them perform (15%), before games or practice (15%), to mix with alcohol (7%), and some other reason (50%).

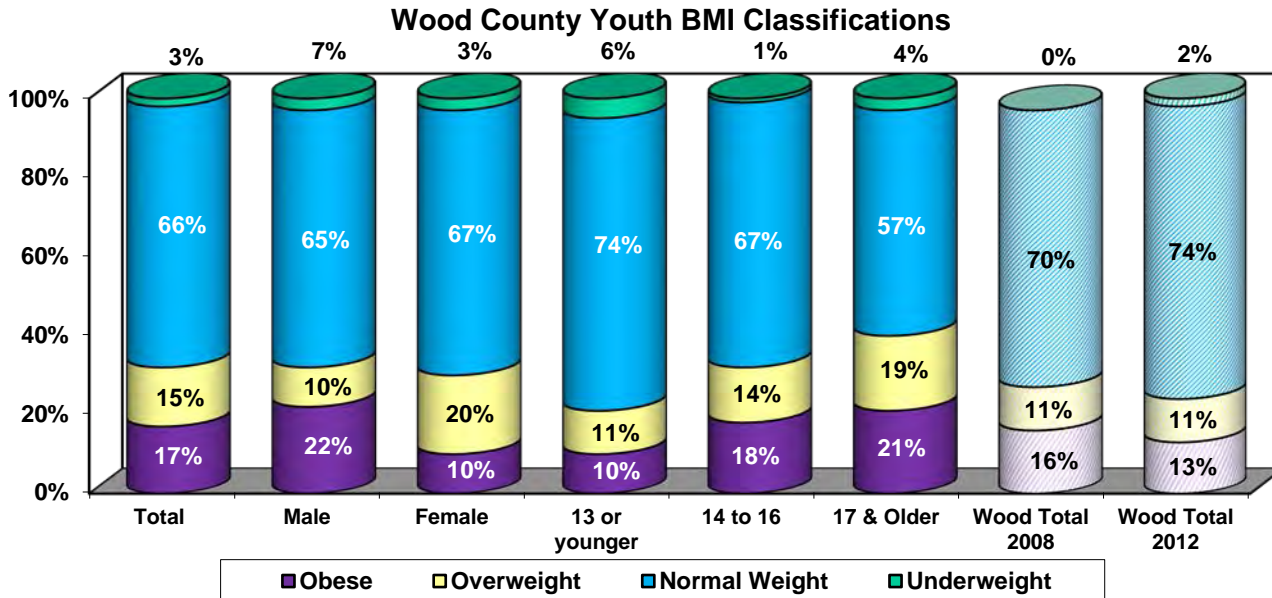
- Wood County youth consumed the following sources of calcium daily: milk (82%), yogurt (37%), other dairy products (33%), calcium-fortified juice (9%), calcium supplements (7%) and other calcium sources (16%).
- Youth reported they ate most of their food at the following places: home (86%), from a fast food place (2%), school (1%), a restaurant (1%) and a convenience store (<1%).

Physical Activity

- About three-fourths (73%) of Wood County youth participated in at least 60 minutes of physical activity on 3 or more days in the past week. 49% did so on 5 or more days in the past week (2013 YRBS reports 48% for Ohio and 47% for the U.S.), and 28% did so every day in the past week (2013 YRBS reports 26% for Ohio and 27% for the U.S.). 14% 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 15% for the U.S.).
- The CDC recommends that children and adolescents participate in at least 60 minutes of physical activity per day. As part of their 60 minutes per day; aerobic activity, muscle strengthening, and bone strengthening are three distinct types of physical activity that children should engage in, appropriate to their age. Children should participate in each of these types of activity on at least three days per week.
- Wood County youth spent an average of 3.4 hours on their cell phone, 2.3 hours watching TV, 1.9 hours on their computer/tablet and 1.5 hours playing video games on an average day of the week.
- Over one-third (35%) of youth spent 3 or more hours watching TV on an average day (2013 YRBS reported 28% for Ohio and 33% for the U.S.).
- 91% of youth participated in extracurricular activities. They participated in the following: sports or intramural programs (56%), exercising (outside of school) (42%), school club or social organization (39%), church or religious organization (22%), church youth group (20%), caring for siblings after school (19%), part-time job (15%), babysitting for other kids (15%), volunteering in the community (14%), caring for parents or grandparents (2%) or some other organized activity (Scouts, 4H, etc.) (14%).

Wood County 6 th -12 th Grade Youth did the following to lose weight in the past 30 days:	Percent
Exercised	43%
Drank more water	37%
Ate less food, fewer calories, or foods lower in fat	27%
Ate more fruits and vegetables	25%
Skipped meals	12%
Went without eating for 24 hours	3%
Vomited or took laxatives	2%
Took diet pills, powders, or liquids without a doctor's advice	1%
Smoked cigarettes	<1%

The following graph shows the percentage of Wood County youth who were classified as obese, overweight, normal weight, or underweight by Body Mass Index (BMI). Examples of how to interpret the information in the graph include: 66% of all Wood County youth were classified as normal weight, 17% were obese, 15% were overweight, and 3% were underweight for their age and gender.

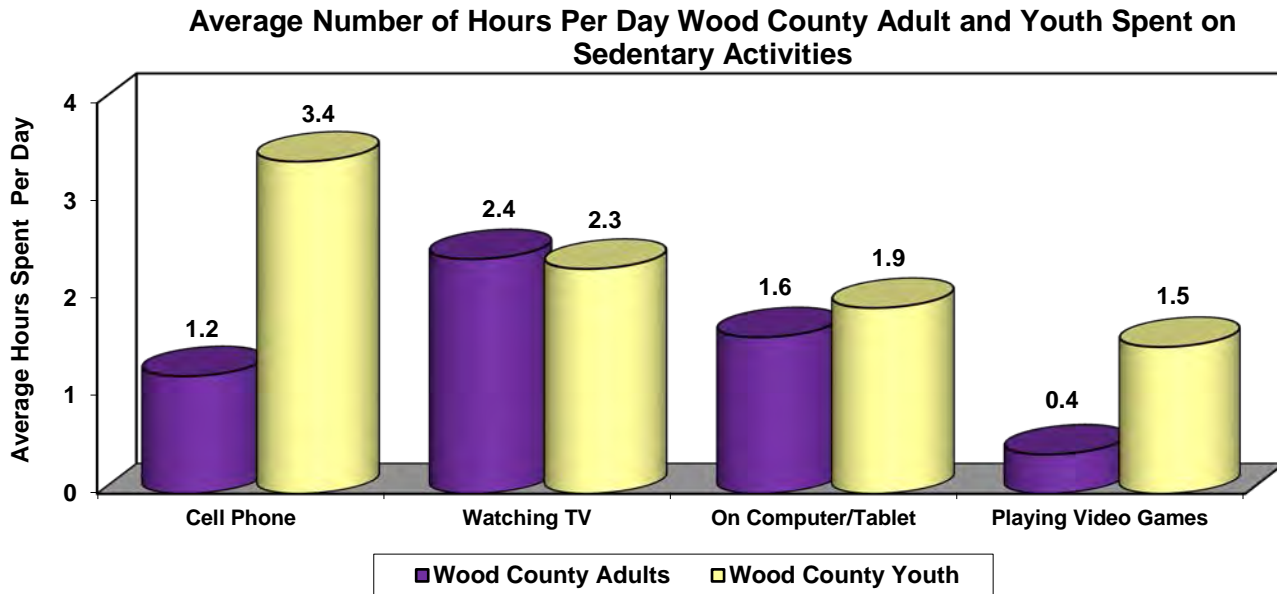


Physical Activity Facts

- Regular physical activity in childhood and adolescence improves strength and endurance, helps build healthy bones and muscles, helps control weight, reduces anxiety and stress, increases self-esteem, and may improve blood pressure and cholesterol levels.
- The U.S. Department of Health and Human Services recommends that young people ages 6–17 years participate in at least 60 minutes of physical activity daily.
- The percentage of high school students who attended physical education classes daily decreased from 42% in 1991 to 25% in 1995 and remained stable at that level until 2011 (31%).
- Regular physical activity:
 - Helps build and maintain healthy bones and muscles.
 - Helps reduce the risk of developing obesity and chronic diseases, such as diabetes, cardiovascular disease, and colon cancer.
 - Reduces feelings of depression and anxiety and promotes psychological well-being.
 - May help improve students' academic performance, including academic achievement and academic behavior.

(Sources: CDC, Adolescent and School Health, Updated: 2/19/2013, from: <http://www.cdc.gov/healthyyouth/physicalactivity/facts.htm>)

The following graph shows the average number of hours spent per day in sedentary activities for Wood County adults and youth. Examples of how to interpret the information in the graph include: Wood County youth spent an average of 3.4 hours on their cell phone per day, compared to 1.2 hours for adults.



Youth Comparisons	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2013 (9 th -12 th)
Obese	16%	13%	17%	18%	13%	14%
Overweight	11%	11%	15%	16%	16%	17%
Described themselves as slightly or very overweight	30%	27%	29%	30%	28%	31%
Trying to lose weight	44%	48%	41%	43%	47%	48%
Exercised to lose weight	N/A	50%	43%	42%	61%†	61%†
Ate less food, fewer calories, or foods lower in fat to lose weight	N/A	32%	27%	29%	43%†	39%†
Went without eating for 24 hours or more	11%	6%	3%	5%	10%	13%
Took diet pills, powders, or liquids without a doctor's advice	5%	1%	1%	1%	5%	5%
Vomited or took laxatives	3%	1%	2%	3%	5%	4%
Ate 1 to 4 servings of fruits and vegetables per day	N/A	79%	80%	83%	85%†	78%†
Physically active at least 60 minutes per day on every day in past week	N/A	28%	28%	27%	26%	27%
Physically active at least 60 minutes per day on 5 or more days in past week	N/A	52%	49%	48%	48%	47%
Did not participate in at least 60 minutes of physical activity on any day in past week	N/A	11%	14%	16%	13%	15%
Watched TV 3 or more hours per day	43%	43%	35%	38%	28%	33%

† Comparative YRBS data for Ohio is 2007 and U.S. is 2009

N/A – Not available

Youth | TOBACCO USE

Key Findings

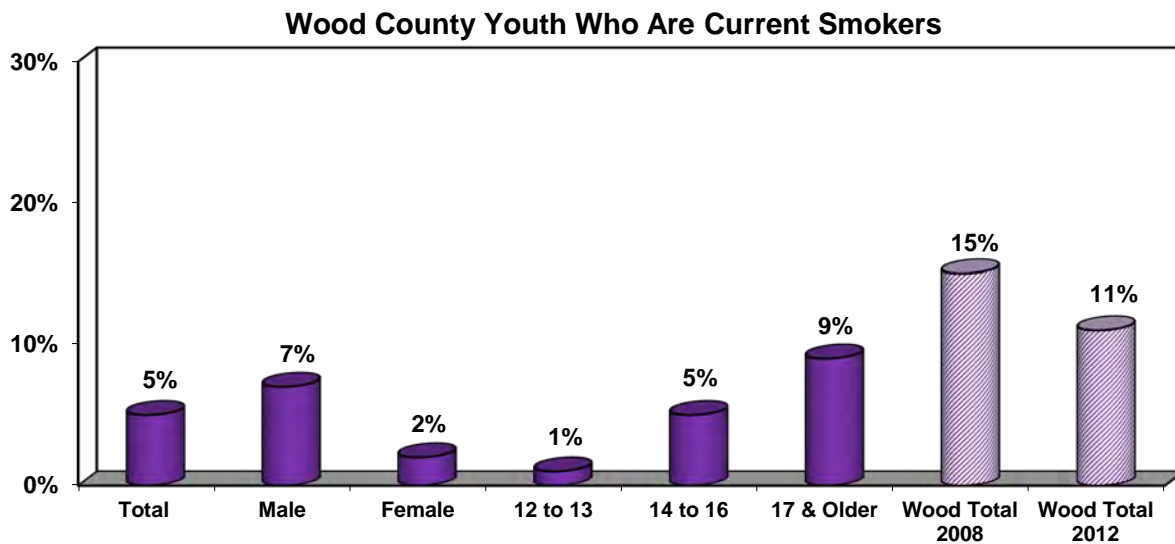
The 2015 Health Assessment identified that 5% of Wood County youth in grades 6-12 were smokers. 13% of current smokers smoked daily. More than four-fifths (87%) of Wood County youth reported that their parents would disapprove of them smoking cigarettes.

In 2015, 5% of Wood County youth were current smokers, having smoked at some time in the past 30 days.

Youth Tobacco Use Behaviors

- The 2015 health assessment indicated that 21% of Wood County youth had tried cigarette smoking (2013 YRBS reported 41% for the U.S.).
- 14% of those who had smoked a whole cigarette did so at 10 years old or younger, and another 26% had done so by 12 years old. The average age of onset for smoking was 13.4 years old.
- 6% of all Wood County youth had smoked a whole cigarette for the first time before the age of 13 (2013 YRBS reported 9% for the U.S.).
- In 2015, 5% of Wood County youth were current smokers, having smoked at some time in the past 30 days (2013 YRBS reported 15% for Ohio and 16% for the U.S.).
- 13% of current smokers smoked cigarettes daily.
- 1% of all Wood County youth smoked cigarettes on 20 or more days during the past month (2013 YRBS reported that 7% of youth in Ohio smoked cigarettes on 20 or more days during the past month and 6% for the U.S.).
- Over two-fifths (43%) of Wood County youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past 30 days.
- 37% of youth smokers borrowed cigarettes from someone else, 37% indicated they bought cigarettes from a store or gas station (2013 YRBS reported 18% for the U.S.), 23% gave someone else money to buy them cigarettes, 17% said a person 18 years or older gave them the cigarettes 10% took them from a family member, and 17% got them some other way. No one reported getting them from the internet, a vending machine or taking them from a store.
- Wood County youth used the following forms of tobacco the most in the past year: e-cigarette (13%), hookah (12%), cigarettes (9%), Black and Milds (7%), swishers (4%), chewing tobacco or snuff (4%), flavored cigarettes (3%), cigars (3%), cigarillos (2%), snus (2%), little cigars (<1%), bidis (<1%) and dissolvable tobacco products (<1%).
- Nearly half (46%) of Wood County 6th-12th grade youth who smoked in the past year had tried to quit smoking (2013 YRBS reported 48% for the U.S.).
- More than four-fifths (87%) of Wood County youth reported that their parents would disapprove of them smoking cigarettes and 74% of youth reported that their friends would disapprove of them smoking cigarettes.

The following graph shows the percentage of Wood County youth who smoke cigarettes. Examples of how to interpret the information include: 5% of all Wood County youth were current smokers, 7% of males smoked, and 2% of females were current smokers.



6% of all Wood County youth had smoked a whole cigarette for the first time before the age of 13.

Behaviors of Wood County Youth

Current Smokers vs. Non-Current Smokers

Youth Behaviors	Current Smoker	Non-Current Smoker
Parent disapproves of smoking	87%	76%
Participated in extracurricular activities	83%	91%
Have used marijuana in the past 30 days	57%	6%
Have had at least one drink of alcohol in the past 30 days	43%	14%
Had 3 or more adverse childhood experiences	41%	19%
Have been bullied in the past 12 months	39%	37%
Misused prescription medications in the past 30 days	35%	4%
Attempted suicide in the past 12 months	17%	5%

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

Youth Comparisons	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2013 (9 th -12 th)
Ever tried cigarettes	35%	27%	21%	28%	52%*	41%
Current smokers	15%	11%	5%	7%	15%	16%
Tried to quit smoking (of those youth who smoked in the past year)	41%	55%	46%	45%	56%*	48%
Smoked cigarettes on 20 or more days during the past month (of all youth)	7%	3%	1%	2%	7%	6%
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	10%	9%	6%	6%	14%*	9%

* Comparative YRBS data for Ohio is 2011

Electronic Cigarettes and Teenagers in the U.S.

- The percentage of U.S. middle and high school students who tried electronic cigarettes more than doubled from 2011 to 2012.
- E-cigarettes look like regular cigarettes, but they are operated by battery. An atomizer heats a solution of liquid, flavorings, and nicotine that creates a mist that is inhaled.
- The percentage of high school students who had ever used e-cigarettes rose from 4.7% in 2011 to 10% in 2012. In the same time period, high school students using e-cigarettes within the past 30 days rose from 1.5% to 2.8%.
- The percentage of middle school students who had ever used e-cigarettes also doubled from 1.4% to 2.7%.
- Altogether, as of 2012 more than 1.78 million middle and high school students in the US had tried e-cigarettes.
- 76% of current young e-cigarette users also smoked regular cigarettes. Some experts fear that e-cigarettes may encourage children to try regular cigarettes.
- Nicotine is a highly addictive drug. Many teens that start with e-cigarettes may be condemned to struggling with a lifelong addiction to nicotine and conventional cigarettes."

(Source: CDC, Press Release, September 5, 2013, <http://www.cdc.gov/media/releases/2013/p0905-ecigarette-use.html> & ACS, *Electronic Cigarette Use Doubles Among Teenagers*, September 9, 2013, <http://www.cancer.org/cancer/news/electronic-cigarette-use-doubles-among-teenagers>)

Youth | ALCOHOL CONSUMPTION

Key Findings

In 2015, the Health Assessment results indicated that 44% of Wood County youth in grades 6-12 had drank at least one drink of alcohol in their life, increasing to 70% of youth seventeen and older. 29% of those 6th-12th graders who drank, took their first drink at 12 years or younger. 16% of all Wood County 6th-12th grade youth and 28% of those over the age of 17 had at least one drink in the past 30 days. Over two-fifths (43%) of the 6th-12th grade youth who reported drinking in the past 30 days had at least one episode of binge drinking. 4% of all youth drivers had driven a car in the past month after they had been drinking alcohol.

In Wood County in 2015, 16% of youth had at least one drink in the past 30 days.

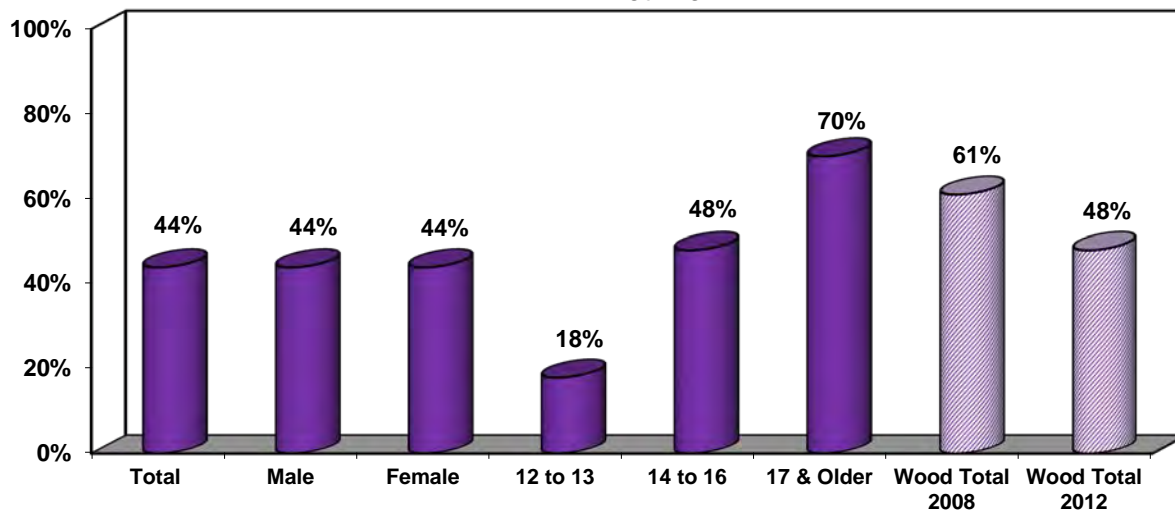
Youth Alcohol Consumption

- In 2015, the Health Assessment results indicated that nearly half (44%) of all Wood County youth (ages 12 to 18) had at least one drink of alcohol in their life, increasing to 70% of those ages 17 and older (2013 YRBS reports 66% for the U.S.).
- 16% of youth had at least one drink in the past 30 days, increasing to 28% of those ages 17 and older (2013 YRBS reports 30% for Ohio and 35% for the U.S.).
- Based on all youth surveyed, 7% were defined as binge drinkers, increasing to 14% of those ages 17 and older (2013 YRBS reports 16% for Ohio and 21% for the U.S.).
- Of those who drank, 43% had five or more alcoholic drinks on an occasion in the last month and would be considered binge drinkers by definition, increasing to 52% of males.
- Over one-quarter (29%) of Wood County youth who reported drinking at some time in their life had their first drink at 12 years old or younger; 27% took their first drink between the ages of 13 and 14, and 45% started drinking between the ages of 15 and 18. The average age of onset was 13.5 years old.
- Of all Wood County youth, 11% had drunk alcohol for the first time before the age of 13 (2013 YRBS reports 13% of Ohio youth drank alcohol for the first time before the age of 13 and 19% for the U.S.).
- Wood County youth drinkers reported they got their alcohol from the following: someone older bought it (34%), someone gave it to them (33%) (2013 YRBS reports 38% for Ohio and 42% for the U.S.), a parent gave it to them (23%), took it from a store or family member (11%), a friend's parent gave it to them (5%), bought it in a liquor store/ convenience store/gas station (2%), bought it at a public event (2%), bought it at a restaurant/bar/club (1%), and some other way (10%). No one reported using a fake ID to buy alcohol.
- During the past month 13% of all Wood County youth had ridden in a car driven by someone who had been drinking alcohol (2013 YRBS reports 17% for Ohio and 22% for the U.S.).
- 4% of youth drivers had driven a car in the past month after they had been drinking alcohol (2013 YRBS reports 4% for Ohio and 10% for the U.S.).
- More than three-fourths (81%) of Wood County youth reported that their parents would disapprove of them drinking alcohol and 57% reported their friends would disapprove of them drinking alcohol.

- During the past six months youth had experienced the following: drank more than expected (3%), had drank more alcohol to get the same effect (2%), gave up other activities to drink (1%), drank to ease withdrawal symptoms (1%), spent a lot of time drinking (<1%), tried to quit or cut down on their drinking (but couldn't) (<1%) and continued to drink despite problems cause by drinking (<1%).

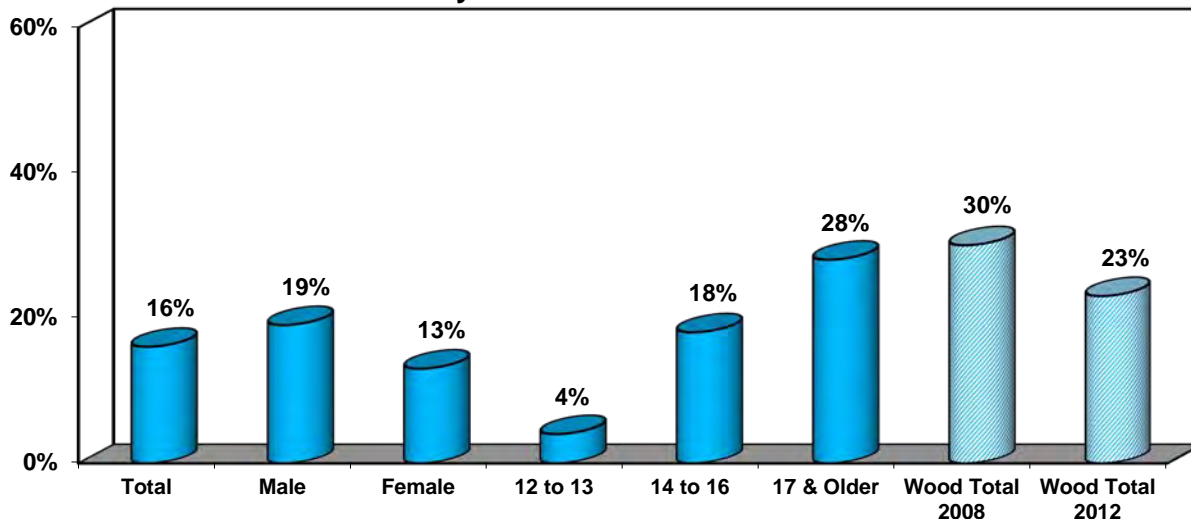
The following graphs show the percentage of Wood County youth who have drank in their lifetime and those who are current drinkers. Examples of how to interpret the information include: 44% of all Wood County youth have drank of alcohol at some time in their life: 44% of males and 44% of females.

Wood County Youth Having At Least One Drink of Alcohol In Their Lifetime



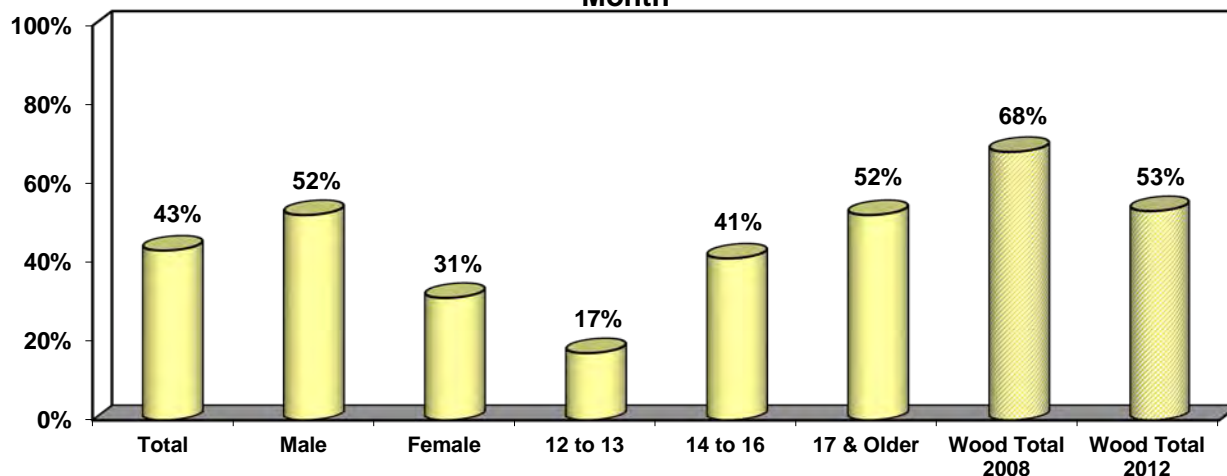
Based on all Wood County youth surveyed, 7% were defined as binge drinkers.

Wood County Youth Who Are Current Drinkers



The following graph shows the percentage of Wood County youth who were binge drinkers. Examples of how to interpret the information include: 43% of current drinkers binge drank in the past month, 52% of males, and 31% of females had binge drank. The table shows differences in specific risk behaviors between current drinkers and non-current drinkers.

Wood County Youth Current Drinkers Who Binge Drank in Past Month*



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

23% of Wood County youth drinkers reported they got their alcohol from a parent giving it to them.

Behaviors of Wood County Youth
Current Drinkers vs. Non-Current Drinkers

Youth Behaviors	Current Drinker	Non-Current Drinker
Participated in extracurricular activities	93%	90%
Parent disapproves of drinking alcohol	74%	82%
Have been bullied in the past 12 months	44%	37%
Have used marijuana in the past 30 days	39%	3%
Have had 3 or more adverse childhood experiences	32%	18%
Misused prescription medications in the past 30 days	19%	3%
Have smoked cigarettes in the past 30 days	14%	3%
Attempted suicide in the past 12 months	9%	5%

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

Of all Wood County youth, 11% had drunk alcohol for the first time before the age of 13.

Youth Comparisons	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2013 (9 th -12 th)
Ever tried alcohol	61%	48%	44%	58%	71%*	66%
Current drinker	30%	23%	16%	23%	30%	35%
Binge drinker (of all youth)	21%	12%	7%	11%	16%	21%
Drank for the first time before age 13 (of all youth)	24%	18%	11%	12%	13%	19%
Rode with someone who was drinking	18%	17%	13%	14%	17%	22%
Drank and drove (of youth drivers)	6%	3%	4%	4%	4%	10%
Obtained the alcohol they drank by someone giving it to them	N/A	41%	33%	35%	38%	42%

* Comparative YRBS data for Ohio is 2011

N/A – Not available

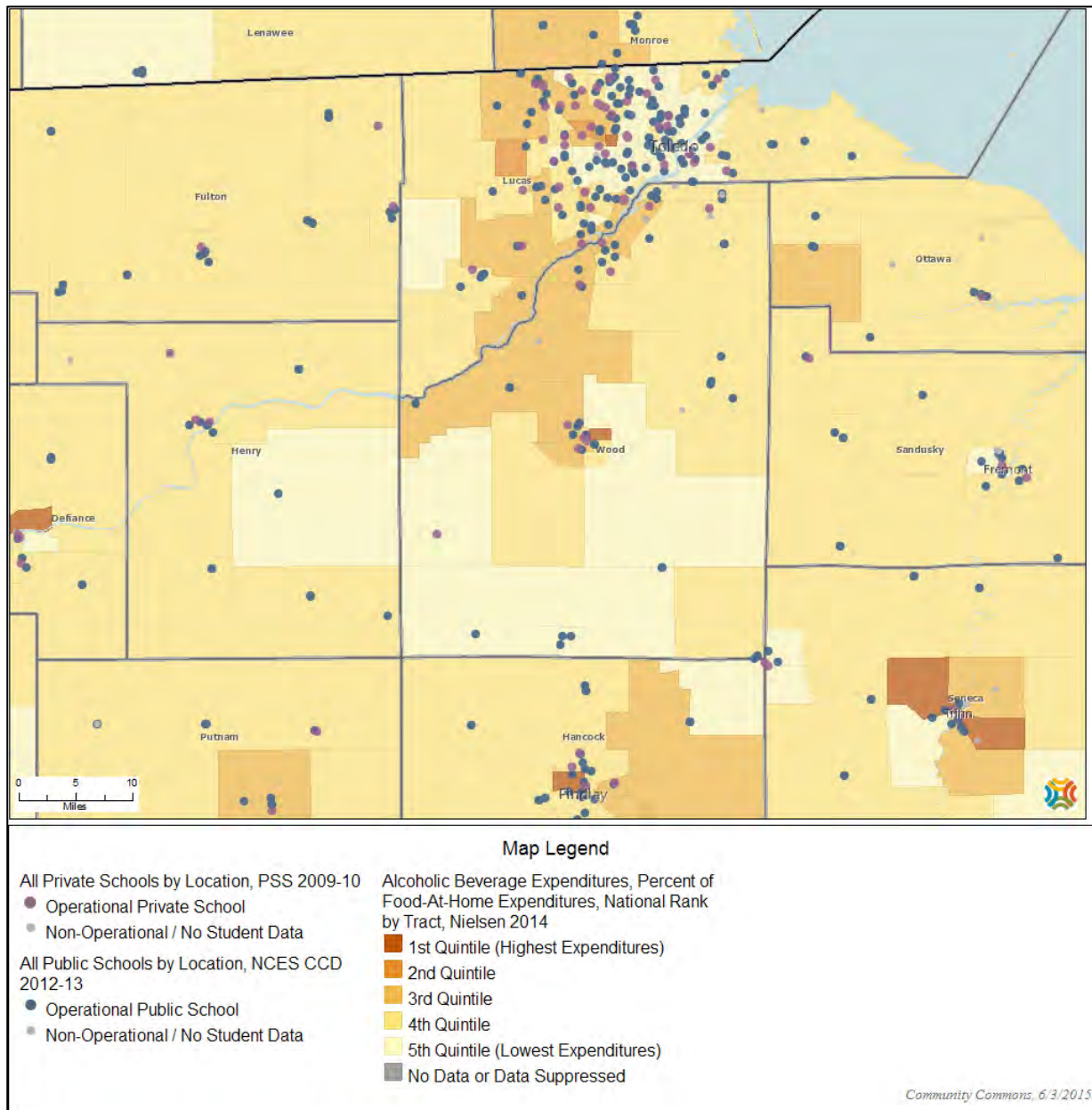
Teen Binge Drinking: All Too Common

Risks Associated with Binging:

- It is estimated that alcohol consumption is responsible for about 80,000 deaths in the US each year.
- Binge drinking has also been associated with many health problems, including:
 - Heart disease
 - Stroke
 - Cancer
 - Liver disease
 - Chemical dependency
 - Pregnancy
 - STDs
 - Alcohol poisoning
- MRI scans of the brains of teens that drank heavily showed damaged nerve tissue compared to those who did not.
- Studies have shown that alcohol can cause long-term damage to the brain and impair memory, coordination and movement.

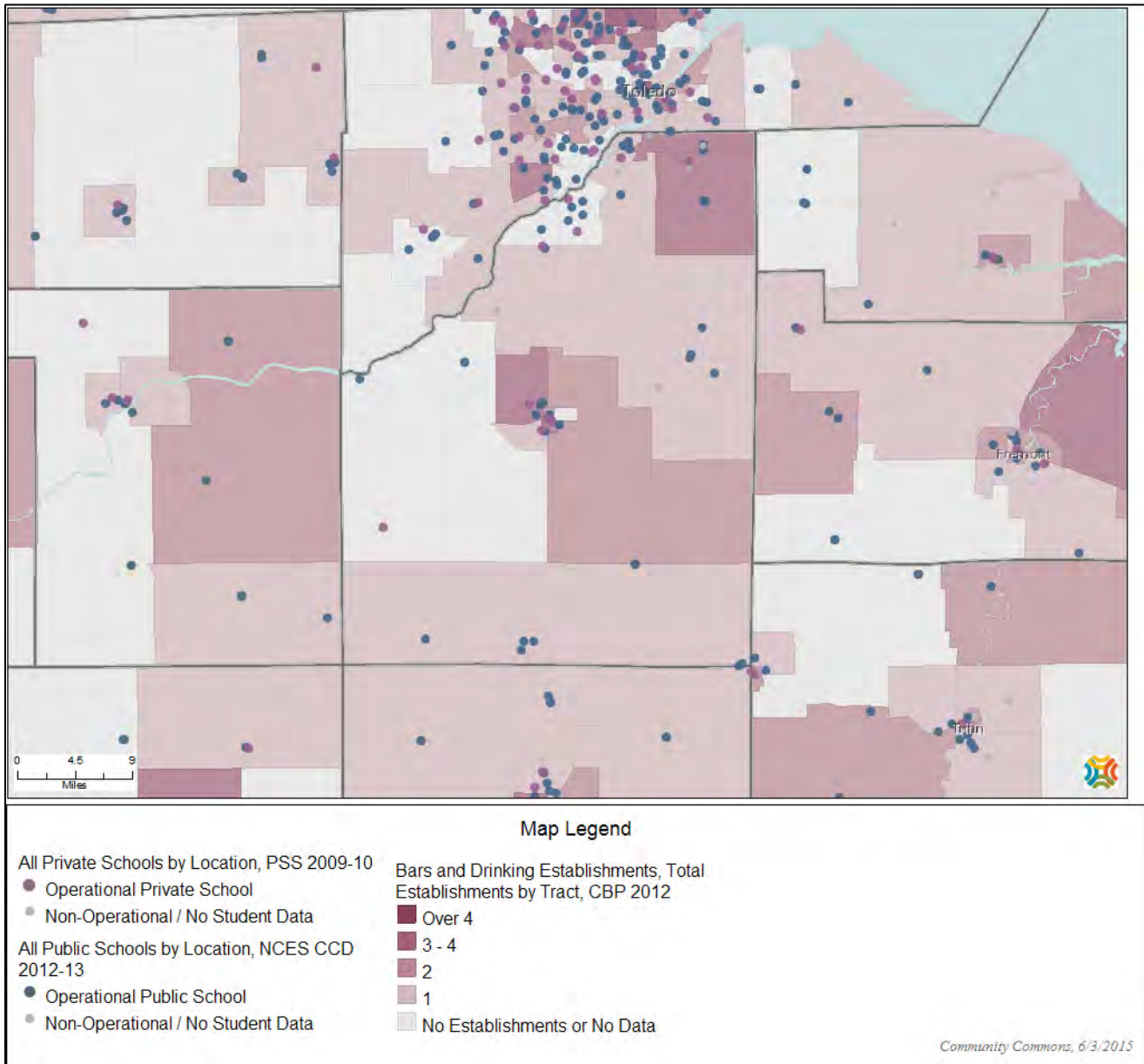
(Source: Psychology Today, Teen Angst, Teen Binge Drinking: All Too Common, 1/26/2013, from: <http://www.psychologytoday.com/blog/teen-angst/201301/teen-binge-drinking-all-too-common>)

Alcoholic Beverage Expenditures in Proximity to Schools



(Source: Community Commons, updated 6/3/15)

Beer, Wine and Liquor Stores, Total Number in Proximity to Schools, County Business Patterns 2012



(Source: Community Commons, updated 6/3/15)

Youth | DRUG USE

Key Findings

In 2015, 8% of Wood County 6th-12th grade youth had used marijuana at least once in the past 30 days, increasing to 17% of those ages 17 and older. 6% of youth used medications that were not prescribed for them or took more than prescribed to get high at some time in their life, increasing to 8% of those over the age of 17.

Youth Drug Use

- In 2015, 8% of all Wood County youth had used marijuana at least once in the past 30 days, increasing to 17% of those over the age of 17. The 2013 YRBS found a prevalence of 21% for Ohio youth and a prevalence of 23% for U.S. youth.
- 6% Wood County youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at some time in their lives, increasing to 8% of those over the age of 17.
- Wood County youth have tried the following in their life:
 - 3% of youth used inhalants, (2013 YRBS reports 9% for Ohio and U.S.)
 - 2% used ecstasy/MDMA (2013 YRBS reports 7% for the U.S.)
 - 2% used K2/spice
 - 1% misused cough syrup
 - 1% used cocaine, (2013 YRBS reports 4% for Ohio and 6% for U.S.)
 - 1% used steroids, (2013 YRBS reports 3% for Ohio and U.S.)
 - 1% misused over-the-counter medications
 - 1% used posh/salvia/synthetic marijuana
 - 1% used liquid THC
 - 1% used bath salts
 - <1% used methamphetamines, (2013 YRBS reports 3% for the U.S.)
 - <1% had been to a pharm party/used skittles
 - <1% used Cloud 9
 - No one reported using GhB
 - No one reported misusing hand sanitizer
 - No one reported using heroin, (2013 YRBS reports 2% for Ohio and U.S.)
- During the past 12 months, 5% of all Wood County youth reported that someone had offered, sold, or given them an illegal drug on school property (2013 YRBS reports 20% for Ohio and 22% for the U.S.).
- The following would keep youth from seeking help for alcohol, tobacco or other drug use: the possibility of getting in trouble (19%), time (9%), not knowing where to go (6%), paying for treatment (4%), and transportation (2%). 72% reported they don't think they need help.

Drug Facts: Drugged Driving

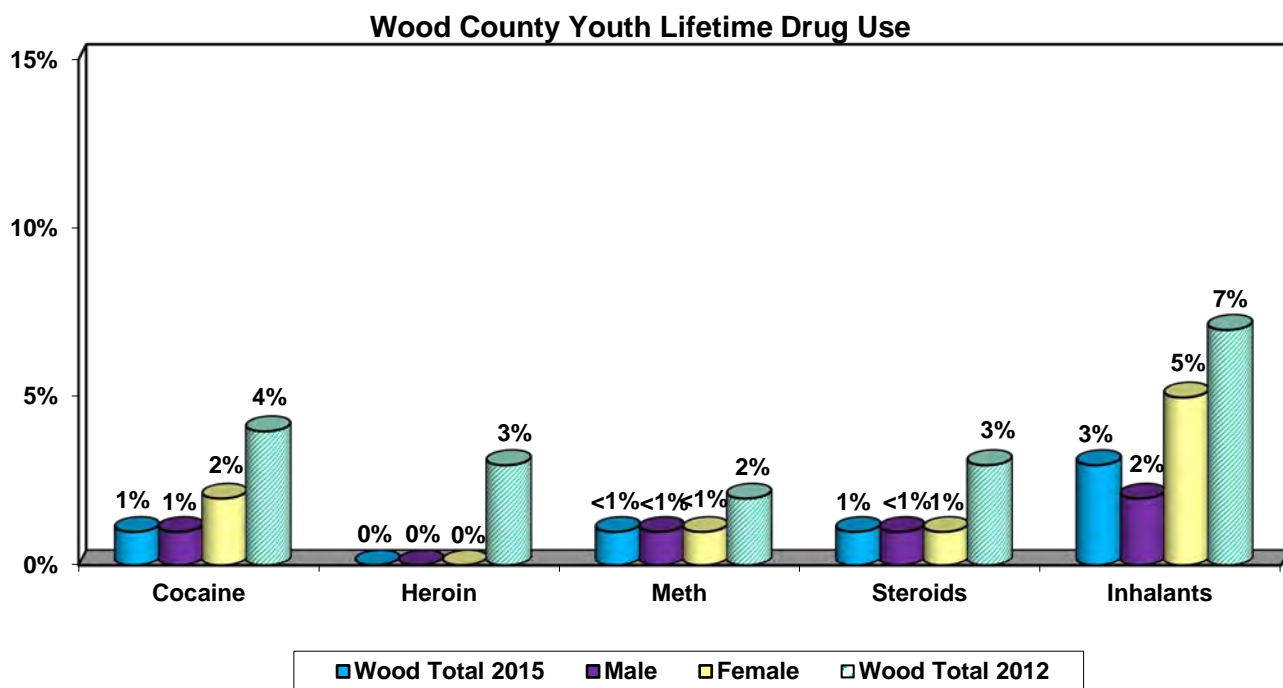
- Vehicle accidents are the leading cause of death among youth people aged 16 to 19. When teens' relative lack of driving experience is combined with the use of marijuana or other substances that affect cognitive and motor abilities, the results can be tragic.
- According to the 2013 National Survey on Drug Use and Health (NSDUH), an estimated 9.9 million people aged 12 or older reported driving under the influence of illicit drugs during the year prior to being surveyed.
- After alcohol, THC (delta-9-tetrahydrocannabinol), the active ingredient in marijuana is the substance most commonly found in the blood of impaired drivers, fatally injured drivers, and motor vehicle crash victims. Studies in several localities have found that approximately 4 to 14 percent of drivers who sustained injury or died in traffic accidents tested positive for THC.

(Source: National Institute on Drug Abuse, The Science of Drug Abuse & Addiction: Drug Facts: Drugged Driving, <http://www.drugabuse.gov/publications/drugfacts/drugged-driving>, revised 12-14)

YOUTH DRUG USE

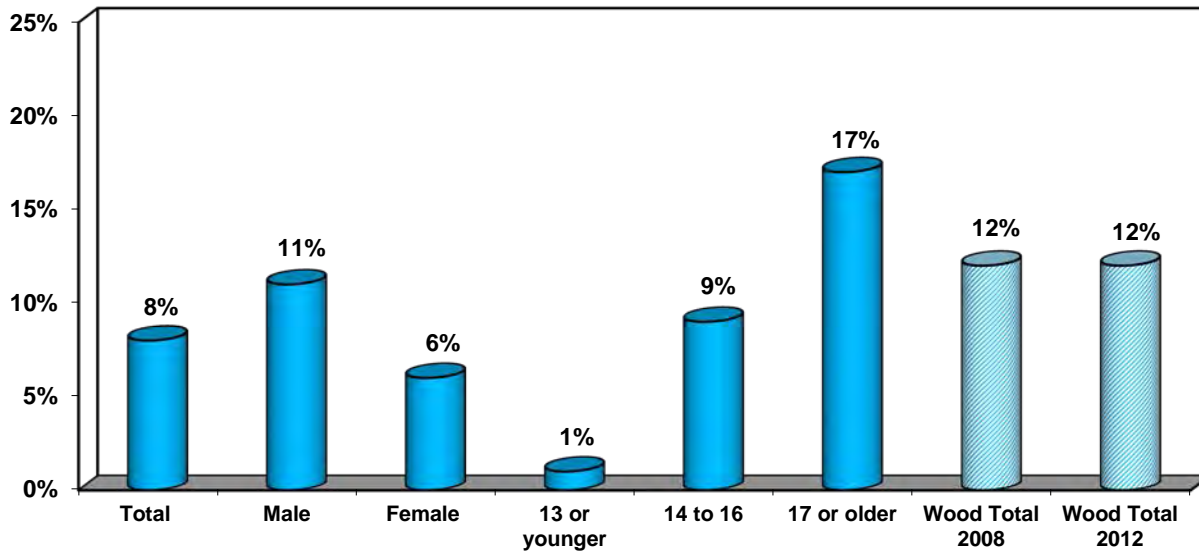
- Youth reported their parents would disapprove of them doing the following: misusing prescription drugs (86%) and using marijuana (85%).
- Youth reported their friends would disapprove of them doing the following: misusing prescription drugs (80%) and using marijuana (68%).
- Youth reported that they would put themselves at a greater health risk if they did any of the following: smoke cigarettes (70%), drink alcohol and then drive (69%), text while driving (67%), drink alcohol (64%), use marijuana (56%), bully others (54%), carry a weapon (53%), participate in sexual intercourse (44%), and participate in other sexual activities (44%). 26% of youth reported that none of the above would put them at a greater health risk.

The following graph is data from the 2015 Wood County Health Assessment indicating youth lifetime drug use. Examples of how to interpret the information include: 1% of youth have used cocaine at some point in their lives, and 3% of youth have used inhalants at some point in their life.

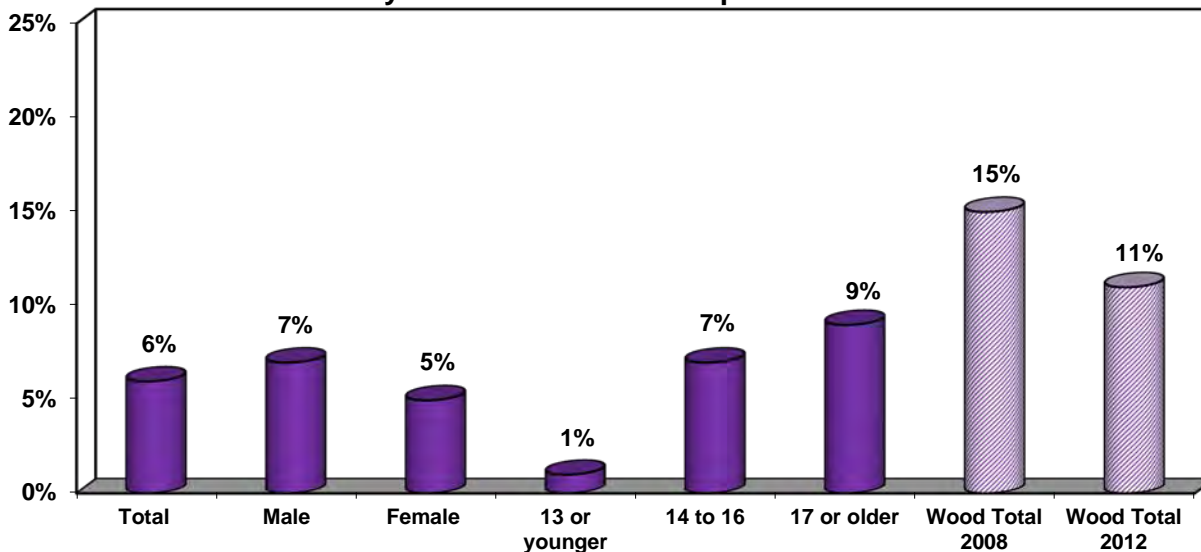


The following graph is data from the 2015 Wood County Health Assessment indicating youth marijuana use in the past month and lifetime prescription medication abuse. Examples of how to interpret the information include: 8% of youth have misused marijuana in the past month, 11% of males and 6% of females.

Wood County Youth Marijuana Use in Past Month



Wood County Youth Lifetime Prescription Medication Abuse



YOUTH DRUG USE

Youth Comparisons	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2013 (9 th -12 th)
Youth who used marijuana in the past month	12%	12%	8%	13%	21%	23%
Ever used methamphetamines	3%	2%	<1%	1%	6%‡	3%
Ever used cocaine	4%	4%	1%	2%	4%	6%
Ever used heroin	2%	3%	0%	0%	2%	2%
Ever used steroids	3%	3%	1%	1%	3%	3%
Ever used inhalants	11%	7%	3%	4%	9%	9%
Ever misused medications	15%	11%	6%	8%	N/A	N/A
Ever used ecstasy/MDMA	N/A	4%	2%	2%	N/A	7%
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	13%	8%	5%	7%	20%	22%

‡ Comparative YRBS data for Ohio is 2007

N/A – Not available

Youth | SEXUAL BEHAVIOR AND TEEN PREGNANCY OUTCOMES

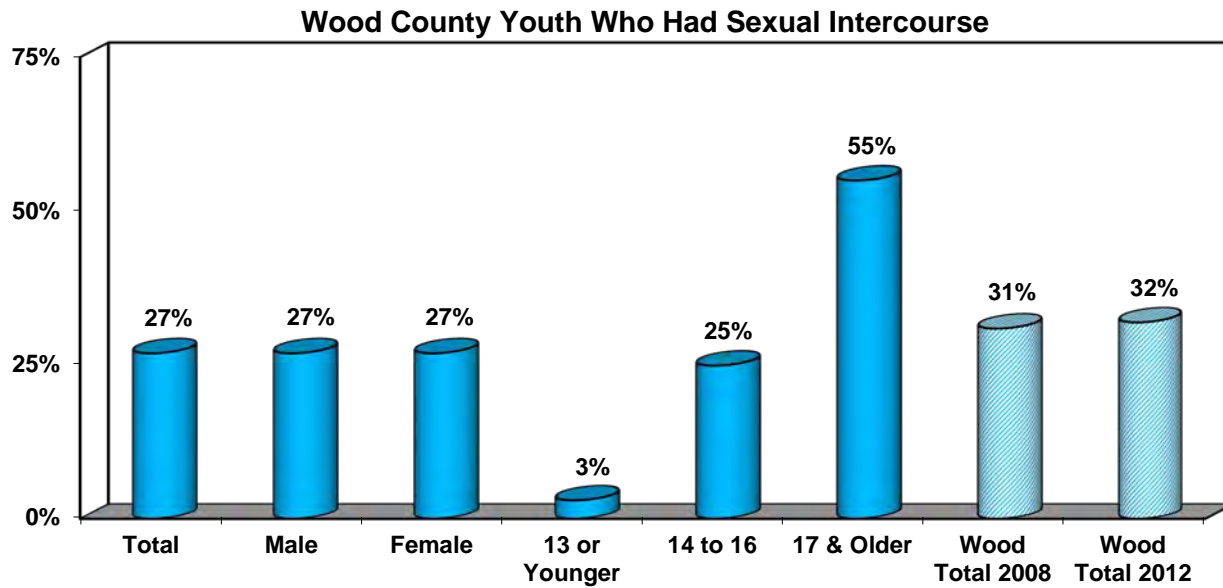
Key Findings

In 2015, over one-quarter (27%) of Wood County youth have had sexual intercourse, increasing to 55% of those ages 17 and over. 27% of youth had participated in oral sex and 6% had participated in anal sex. 26% of youth participated in sexting. Of those who were sexually active, 45% had multiple sexual partners. One Wood County school did not ask all sexual behavior questions.

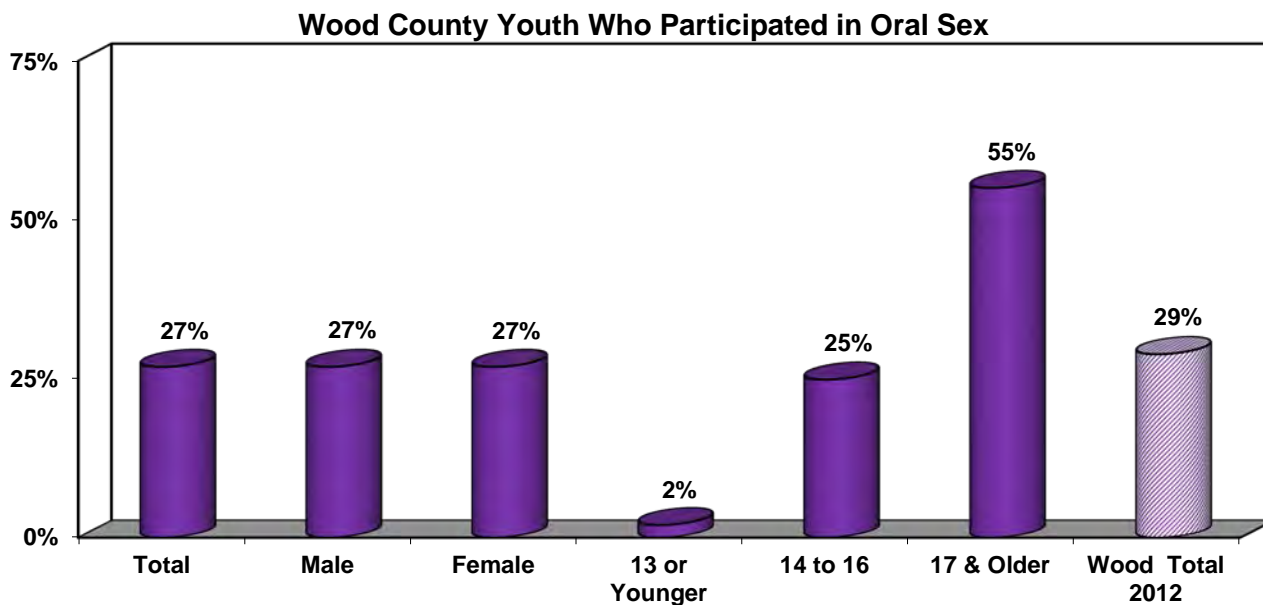
Youth Sexual Behavior

- One Wood County school district did not ask all sexual behavior questions.
- Over one-quarter (27%) of Wood County youth have had sexual intercourse, increasing to 55% of those ages 17 and over (The 2013 YRBS reports 43% for Ohio and 47% of U.S. youth have had sexual intercourse).
- 27% of youth had participated in oral sex, increasing to 55% of those ages 17 and over.
- 6% of youth had participated in anal sex, increasing to 13% of those ages 17 and over.
- 26% of youth had participated in sexting, increasing to 47% of those ages 17 and over.
- 27% of youth had viewed pornography, increasing to 36% of males and 46% of those ages 17 and over.
- Of those youth who were sexually active in their lifetime, 55% had one sexual partner and 45% had multiple partners.
- 22% of all Wood County sexually active youth had 4 or more partners (2013 YRBS reports 28% for Ohio).
- 6% of all Wood County youth had 4 or more sexual partners (2013 YRBS reports 12% for Ohio and 15% for the U.S.).
- Of those youth who were sexually active, 19% had done so by the age of 13. Another 40% had done so by 15 years of age. The average age of onset was 14.9 years old.
- Of all youth, 3% were sexually active before the age of 13 (2013 YRBS reports 4% for Ohio and 6% for the U.S.).
- Of the youth who were sexually active, 13% had drunk alcohol or used drugs before their last sexual encounter (2013 YRBS reports 18% for Ohio and 22% for the U.S.).
- 69% of youth who were sexually active used condoms to prevent pregnancy, 33% used birth control pills, 5% used the withdrawal method, 3% used a shot, patch or birth control ring and 2% used some other method. 4% reported they were gay or lesbian. No one reported using an IUD. However, 7% were engaging in intercourse without a reliable method of protection and 4% reported they were unsure.
- Wood County youth had experienced the following: wanted to get pregnant (2%), been pregnant (1%), had a miscarriage (1%), got someone pregnant (1%), tried to get pregnant (1%), had sex in exchange for something of value such as food, drugs, shelter or money (<1%), had been treated for an STD (<1%), had an abortion (<1%) and had a child (<1%).

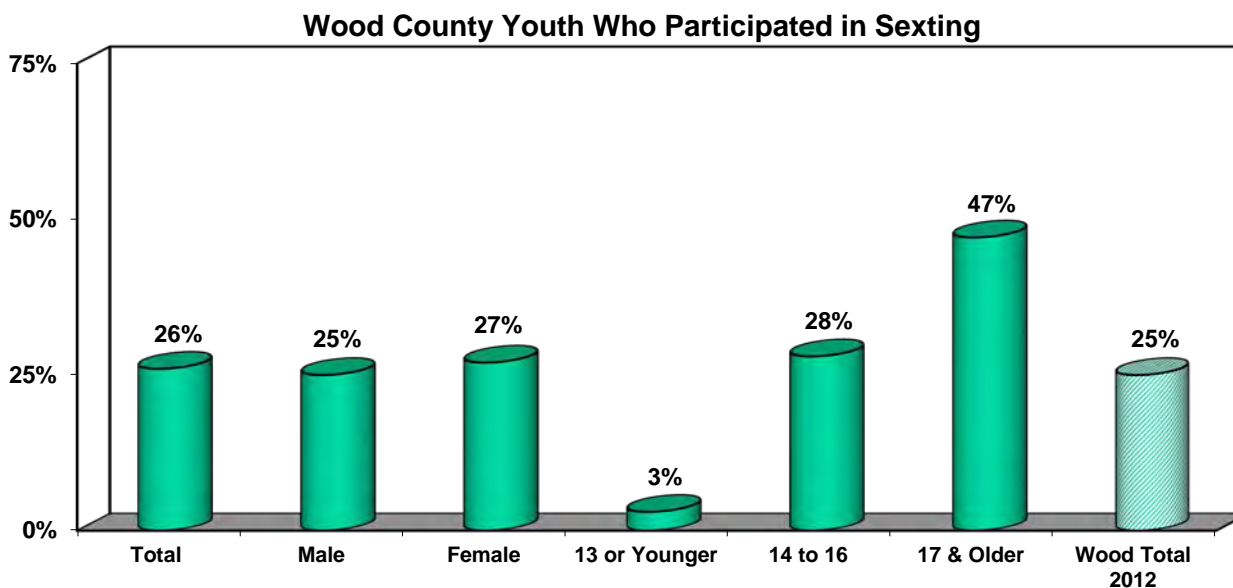
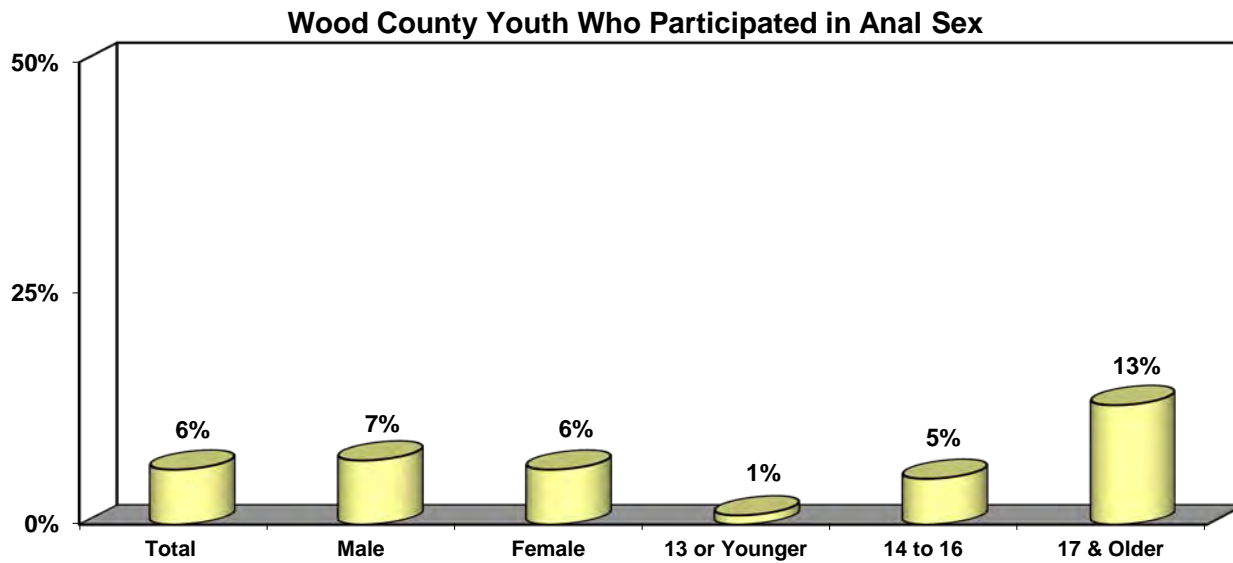
The following graphs show the percentage of Wood County youth who participated in sexual intercourse and oral sex. Examples of how to interpret the information include: 27% of all Wood County youth had sexual intercourse, 27% of males, and 27% of females had sex.



7% of Wood County youth who were sexually active were not using a reliable method of protection to prevent pregnancy.



The following graphs show the percentage of Wood County youth who participated in anal sex and sexting. Examples of how to interpret the information include: 6% of all Wood County youth participated in anal sex, 7% of males, and 6% of females.



Youth Comparisons	Wood County 2008 (6 th –12 th)	Wood County 2012 (6 th –12 th)	Wood County 2015 (6 th –12 th)	Wood County 2015 (9 th –12 th)	Ohio 2013 (9 th –12 th)	U.S. 2013 (9 th –12 th)
Ever had sexual intercourse	31%	32%	27%	42%	43%	47%
Used a condom at last intercourse	74%	76%	69%	71%	51%	59%
Used birth control pills at last intercourse	28%	41%	33%	36%	24%	19%
Did not use any method to prevent pregnancy during last sexual intercourse	13%	11%	7%	6%	12%	14%
Had four or more sexual partners (of all youth)	7%	6%	6%	8%	12%	15%
Drank alcohol or used drugs before last sexual intercourse (of sexually active youth)	20%	18%	13%	12%	18%	22%
Had sexual intercourse before age 13 (of all youth)	4%	4%	3%	3%	4%	6%

Youth | MENTAL HEALTH AND SUICIDE

Key Findings

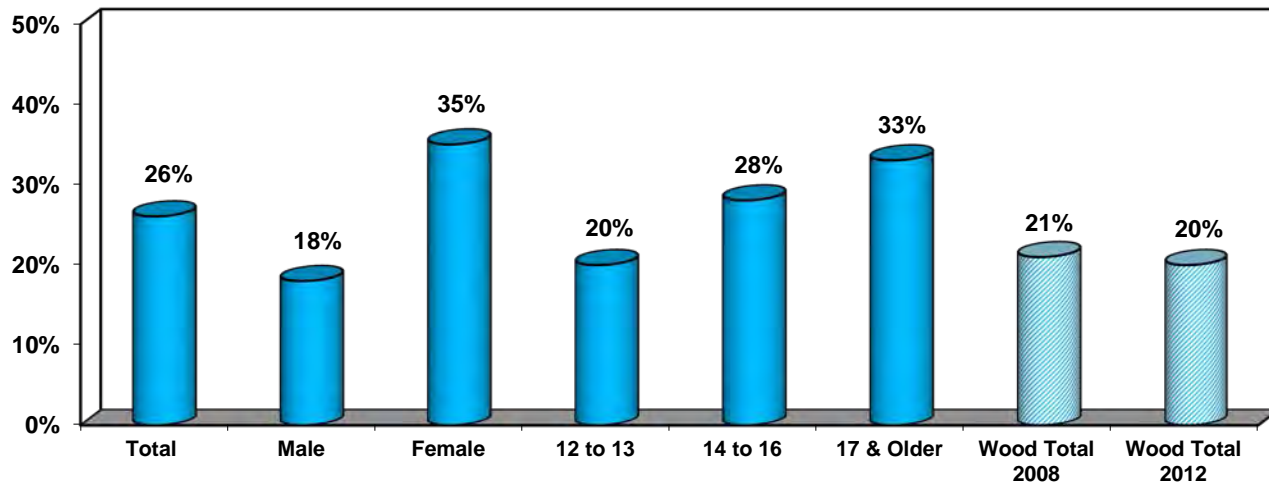
In 2015, the Health Assessment results indicated that 16% of Wood County 6th-12th grade youth had seriously considered attempting suicide in the past year and 6% admitted actually attempting suicide in the past year.

Youth Mental Health

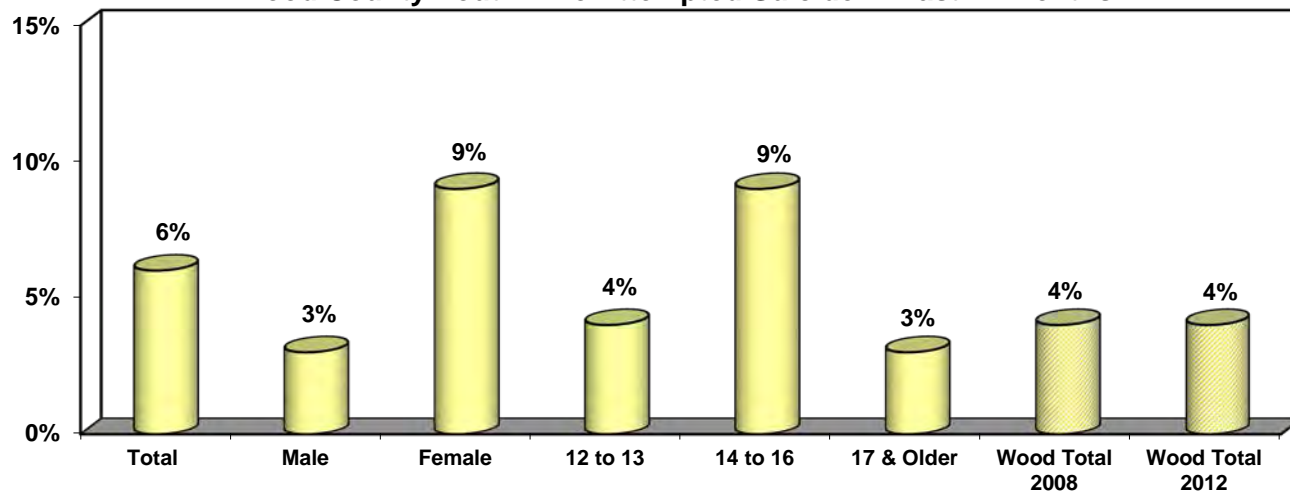
- In 2015, over one-quarter (26%) of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, increasing to 35% of females (2013 YRBS reported 26% for Ohio and 30% for the U.S.).
- 16% of youth reported they had seriously considered attempting suicide in the past 12 months, increasing to 20% of females. 19% of high school youth had seriously considered attempting suicide, compared to the 2013 YRBS rate of 17% for U.S. youth and 14% for Ohio youth.
- In the past year, 6% of Wood County youth had attempted suicide, increasing to 9% of females. 3% of youth had made more than one attempt. The 2013 YRBS reported a suicide attempt prevalence rate of 8% for U.S. youth and a 6% rate for Ohio youth.
- Of all youth, 2% made a suicide attempt that resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse, (2013 YRBS reported 1% for Ohio and 3% for the U.S.).
- Of those who attempted suicide, 7% resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse.
- Wood County youth reported the following causes of anxiety, stress and depression: academic success (43%), fighting with friends (28%), sports (28%), self-image (27%), fighting at home (27%), dating relationship (19%), peer pressure (19%), breakup (17%), death of close family member or friend (16%), being bullied (14%), poverty/no money (12%), parent divorce/separation (12%), caring for younger siblings (8%), parent lost their job (5%), ill parent (4%), not having enough to eat (3%), not feeling safe at home (3%), parent with a mental illness (3%), alcohol or drug use at home (3%), parent/caregiver with a substance abuse problem (2%), family member in the military (2%), sexual orientation (2%), not feeling safe in the community (1%), not having a place to live (1%) and other stress at home (23%).
- Wood County youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (45%), hobbies (31%), texting someone (30%), exercising (29%), talking to an adult (21%), talking to a peer (20%), eating (19%), praying (17%), using social media (14%), writing in a journal (9%), shopping (7%), breaking something (6%), reading the Bible (6%), self-harm (5%), smoking/using tobacco (4%), using prescribed medication (4%), drinking alcohol (3%), using illegal drugs (3%), talking to a medical professional (2%), vandalism/violent behavior (1%), using un-prescribed medication (1%), and gambling (1%).
- When Wood County youth are dealing with feelings of depression or suicide, they usually talk to the following: best friend (23%), parent/guardian (15%), girlfriend/boyfriend (11%), brother/sister (7%), professional counselor (4%), school counselor (3%), teacher (2%), coach (1%), pastor/priest/religious leader (1%), youth minister (1%), scout master/club advisor (1%), and someone else (3%). 20% reported they talk to no one. 54% of youth reported they did not have anxiety, stress, or depression.

The following graphs show the percentage of Wood County youth who had felt sad or hopeless almost every day for two weeks or more in a row and those who attempted suicide in the past 12 months (i.e., the first graph shows that 26% of all youth had felt sad or hopeless for two weeks or more, 18% of males and 35% of females).

Wood County Youth Who Felt Sad or Hopeless Almost Every Day for Two Weeks or More in a Row



Wood County Youth Who Attempted Suicide in Past 12 Months



2013 Ohio Suicide Statistics for Youth Grades 9-12

- 14% of Ohio youth seriously considered attempting suicide in the 12 months prior to the survey.
- 11% of Ohio youth made a plan about how they would attempt suicide in the 12 months prior to the survey.
- 6% of youth had attempted suicide one or more times in the 12 months prior to the survey.
- 1% of youth had a suicide attempt that resulted in an injury, poisoning, or an overdose that had to be treated by a doctor or nurse in the 12 months prior to the survey.

(Source: Centers for Disease Control and Prevention, Healthy Youth, YRBSS 2013)

Youth Comparisons	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2013 (9 th -12 th)
Youth who had seriously considered attempting suicide in the past year	9%	9%	16%	19%	14%	17%
Youth who had attempted suicide in the past year	4%	4%	6%	6%	6%	8%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (of all youth)	1%	1%	2%	2%	1%	3%
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	21%	20%	26%	31%	26%	30%

Wood County youth reported the following leading causes of anxiety, stress and depression: academic success (43%), fighting with friends (28%), sports (28%), self-image (27%), and fighting at home (27%).

Youth Suicide

Suicide affects all youth, but some groups are at a higher risk than others. Boys are more likely than girls to die from suicide. Girls, however, are more likely to report attempting suicide than boys. Several factors can put a young person at risk for suicide. However, having these risk factors does not always mean that suicide will occur.

Risk Factors Include:

- History of previous suicide attempts
- Family history of suicide
- History of depression or other mental illness
- Alcohol or drug abuse
- Stressful life event or loss
- Easy access to lethal methods
- Exposure to the suicidal behavior of others
- Incarceration

(Source: CDC 2014, Injury Center: Violence Prevention; Suicide Prevention; Youth Suicide http://www.cdc.gov/violenceprevention/pub/youth_suicide.html)

Youth | SAFETY

Key Findings

In 2015, 13% of youth had ridden in a car driven by someone who had been drinking alcohol in the past month and 4% of youth drivers had driven after drinking alcohol. 42% of youth drivers texted while driving.

13% of Wood County youth had suffered a blow or jolt to their head while playing with a sports team in the past year.

Personal Safety

- In the past 30 days, 13% of youth had ridden in a car driven by someone who had been drinking alcohol, (2013 YRBS reported 17% for Ohio and 22% for the U.S.) and 4% of youth drivers had driven a car themselves after drinking alcohol, (2013 YRBS reported 4% for Ohio and 10% for the U.S.).
- 6% of youth had played the choking game.
- Wood County youth drivers did the following while driving in the past month: wore a seatbelt (77%), talked on their cell phone (54%), ate (52%), texted (42%), used the internet on their cell phone (13%), used cell phone for other things (10%), checked facebook on their cell phone (8%), used illegal drugs (3%), applied makeup (3%), drank alcohol (1%), played electronic games on cell phone (3%), read (1%) and misused prescription drugs (1%).
- 90% of youth had a Twitter, Instagram, facebook, online gaming, or other social network account.
- Of those who had an account, they reported the following:
 - They knew all of "my friends" (48%)
 - Their account was currently checked private (45%)
 - Their parents had their password (22%)
 - They knew all of the people they play online (16%)
 - They had been asked to share personal info (12%)
 - They had been asked to meet someone they met online (8%)
 - Their friends had their password (7%)
 - They were bullied because of their accounts (7%)
 - Their parents do not know they have an account (6%)
 - They had participated in sexual activity with someone they met online (5%)
 - They share personal information (4%)
 - They had problems as a result of their account (4%)
- Over half (57%) of the youth who had a Twitter, Instagram, facebook, online gaming, or other social network account believed that sharing information online is dangerous.
- 6% of Wood County youth had gambled. Of youth who had gambled, they experienced the following: gambled while drunk or high (30%), gambled with larger amounts of money to get the same excitement (7%), and someone else expressed a concern (4%). No one reported lying to family members or others to hide gambling.
- Youth reported that they had participated in the following activities at least once a month: bet money on games of personal skill (3%), bought lottery tickets (3%), bought scratch offs (3%), bet money on sports games (2%), played cards for money (2%), bet money at a racetrack (1%), bet on fantasy sports leagues or games (1%), gambled for money online (1%), bet money on Keno (1%), and played Bingo for money (<1%).

Personal Health

- 13% of youth reported in the past year they had suffered a blow or jolt to their head while playing with a sports team (either during a game or during practice) which caused them to get “knocked out”, have memory problems, double or blurry vision, headaches or “pressure” in the head, or nausea or vomiting (2013 YRBS reported 12% for Ohio).
- Over three-fourths (79%) of youth had been to the dentist for a check-up, exam, teeth cleaning or other dental work in the past year (2013 YRBS reported 75% for Ohio).
- Over two-thirds (69%) of Wood County youth had visited the doctor for a routine check-up in the past year, 10% one to two years ago, and 2% said they had never been to the doctor for a routine check-up.
- Wood County youth reported the following adverse childhood experiences (ACE): parents became separated or were divorced (32%), parents or adults in home swore at them, insulted them or put them down (26%), lived with someone who was depressed, mentally ill or suicidal (21%), lived with someone who was a problem drinker or alcoholic (16%), lived with someone who served time or was sentenced to serve in prison or jail (13%), parents were not married (11%), lived with someone who used illegal drugs or misused prescription drugs (8%), parents or adults in home abused each other (6%), parents or adults in home abused them (4%), an adult or someone 5 years older than them touched them sexually (3%), an adult or someone 5 years older tried to make them touch them sexually (1%), and an adult or someone 5 years older than them forced them to have sex (1%).
- 20% of youth had three or more adverse childhood experiences

Youth Comparisons	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2013 (9 th -12 th)
Ridden with someone who had been drinking alcohol in past month	18%	17%	13%	14%	17%	22%
Drove a car after drinking alcohol (of all youth drivers)	6%	3%	4%	4%	4%	10%
Visited a dentist for a check-up within the past year	71%	82%	79%	79%	75%	N/A
Suffered blow or jolt to head	N/A	N/A	13%	15%	12%	N/A

N/A – Not available

Adverse Childhood Experiences (ACE)

- 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 5 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
 - STD's
 - 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.

(Source: CDC, Adverse Childhood Experiences (ACE) Study, January 18, 2013, <http://www.cdc.gov/ace/about.htm> & Adverse Childhood Experiences Reported by Adults, Last Reviewed: June 3, 2011, <http://www.cdc.gov/features/dsaces/index.html>)

Youth | VIOLENCE ISSUES

Key Findings

In Wood County, 10% of youth had carried a weapon in the past month. 16% of youth had been involved in a physical fight in the past year. 38% of youth had been bullied in the past year and 22% had been bullied on school property.

Violence-Related Behaviors

- In 2015, 10% of youth had carried a weapon (such as a gun, knife or club) in the past 30 days, increasing to 18% of males (2013 YRBS reported 14% for Ohio and 18% for the U.S.).
- 38% of youth had been bullied in the past year. The following types of bullying were reported:
 - 31% were verbally bullied (teased, taunted or called harmful names)
 - 20% were indirectly bullied (spread mean rumors about them or kept them out of a "group")
 - 9% were cyber bullied (teased, taunted or threatened by e-mail or cell phone) (2013 YRBS reported 15% for Ohio and the U.S.).
 - 7% were physically bullied (were hit, kicked, punched or people took their belongings)
 - 2% 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, 22% of youth had been bullied on school property (2013 YRBS reported 21% for Ohio and 20% for the U.S.).
- In the past year, 16% of youth had been involved in a physical fight, increasing to 24% of males. 7% had been in a fight on more than one occasion (2013 YRBS reported 20% for Ohio and 25% for the U.S.).
- 3% of youth reported a boyfriend or girlfriend hit, slapped, or physically hurt them on purpose in the past 12 months (2013 YRBS reported 7% for Ohio).
- 4% of youth reported an adult or caregiver hit, slapped, or physically hurt them on purpose in the past 12 months.
- Wood County youth had been forced to engage in the following: touched in an unsafe sexual way (3%), sexual intercourse (3%), other sexual activity (2%), and oral sex (2%).
- 23% of youth had purposefully hurt themselves at some time in their lives. They did so in the following ways: cutting (13%), scratching (10%), hitting (7%), biting (5%), burning (3%), and self-embedding (1%).

Types of Bullying Wood County Youth Experienced in Past Year

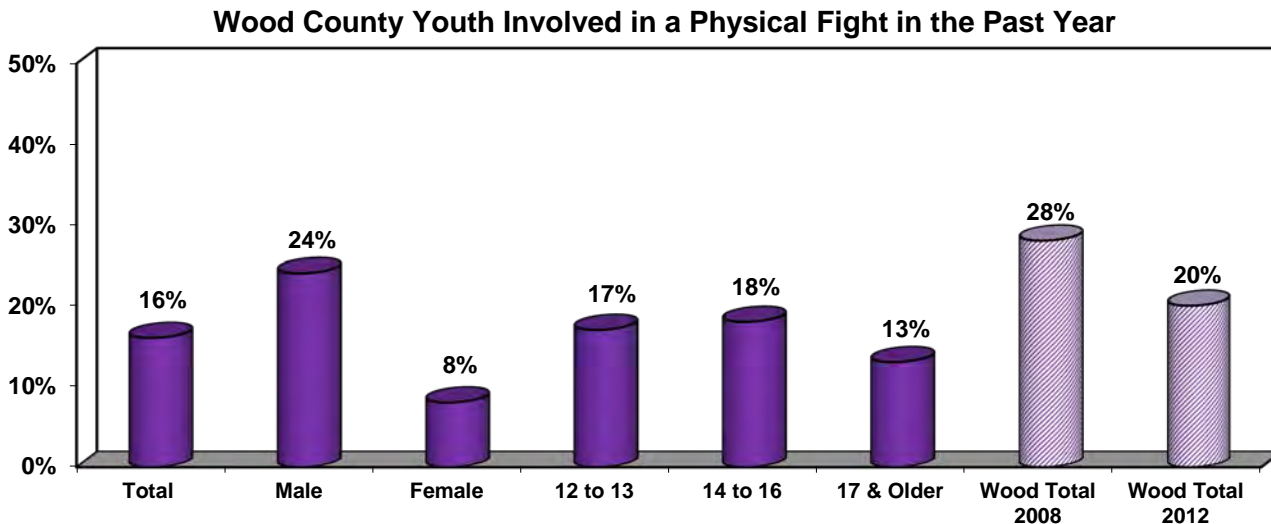
Youth Behaviors	Total	Male	Female	13 or younger	14-16 Years old	17 and older
Verbally Bullied	31%	25%	35%	33%	29%	32%
Indirectly Bullied	20%	11%	29%	20%	22%	16%
Cyber Bullied	9%	5%	12%	11%	9%	7%
Physically Bullied	7%	8%	5%	9%	6%	6%
Sexually Bullied	2%	<1%	4%	1%	4%	2%

Behaviors of Wood County Youth

Bullied vs. Non-Bullied

Youth Behaviors	Bullied	Non-Bullied
Hurt self in any way	37%	17%
Contemplated suicide in the past 12 months	29%	9%
Have drank alcohol in the past 30 days	18%	14%
Have used marijuana in the past 30 days	12%	7%
Attempted suicide in the past 12 months	12%	2%
Misused prescription medications in the past 30 days	7%	4%
Have smoked cigarettes in the past 30 days	5%	5%

The following graph shows Wood County youth involved in a physical fight in the past year. The graph shows the number of youth in each segment giving each answer (i.e., the graph shows that 16% of all youth had been in a fight in the past year, 24% of males and 8% of females).



Youth Comparisons	Wood County 2008 (6 th -12 th)	Wood County 2012 (6 th -12 th)	Wood County 2015 (6 th -12 th)	Wood County 2015 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2013 (9 th -12 th)
Carried a weapon in past month	10%	10%	10%	11%	14%	18%
Been in a physical fight in past year	28%	20%	16%	15%	20%	25%
Electronically/cyber bullied in past year	12%	13%	9%	9%	15%	15%
Bullied in past year	46%	42%	38%	36%	N/A	N/A
Bullied on school property in past year	N/A	N/A	22%	20%	21%	20%
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year	4%	6%	3%	3%	7%	9%‡

‡ Comparative YRBS data for U.S. is 2009

N/A – Not available

Understanding Bullying

- Bullying is a form of youth violence. CDC defines bullying as any unwanted aggressive behavior(s) by another youth or group of youths who are not siblings or current dating partners that involves an observed or perceived power imbalance and is repeated multiple times or is highly likely to be repeated.
- Bullying can result in physical injury, social and emotional distress, and even death. Victimized youth are at increased risk for depression, anxiety, sleep difficulties, and poor school adjustment. Youth who bully others are at increased risk for substance use, academic problems, and violence later in adolescents and adulthood.
- Some of the factors associated with a higher likelihood of bullying behavior include:
 - Externalizing problems such as defiant and disruptive behavior
 - Harsh parenting by caregivers
 - Attitudes accepting of violence
- Some of the factors associated with a higher likelihood of victimization include:
 - Poor peer relationships
 - Low self-esteem
 - Perceived by peers as different or quiet

(Source: CDC, Injury Center: Violence Prevention, Understanding Bullying Fact Sheet, January 2014, http://www.cdc.gov/violenceprevention/pub/understanding_bullying.html)

Appendix I | WOOD COUNTY

HEALTH ASSESSMENT

INFORMATION SOURCES

Source	Data Used	Website
American Academy of Pediatrics (AAP)	<ul style="list-style-type: none"> ■ Safer Sex Guidelines 	www.ipch.org/DiseaseHealthInfo/HealthLibrary/adolescent/safesex.html
American Association of Suicidology	<ul style="list-style-type: none"> ■ Suicide Facts 	www.suicidology.org/resources/facts-statistics-current-research/suicide-statistics
American Cancer Society, Cancer Facts and Figures 2015. Atlanta: ACS, 2015	<ul style="list-style-type: none"> ■ 2015 Cancer Facts, Figures, and Estimates ■ Nutrition Recommendations 	www.cancer.org
American College of Allergy, Asthma & Immunology	<ul style="list-style-type: none"> ■ Asthma Facts 	http://acaai.org/news/facts-statistics/asthma
American Dental Association	<ul style="list-style-type: none"> ■ Oral Health in Older Adults 	www.ada.org/sections/publicResources/pdfs/faq.pdf
American Diabetes Association	<ul style="list-style-type: none"> ■ Type 1 and 2 Diabetes ■ Risk Factors for Diabetes ■ Diabetes Facts 	www.diabetes.org
American Foundation for Suicide Prevention	<ul style="list-style-type: none"> ■ Warning Signs for Suicide 	www.afsp.org/
American Heart Association, 2013	<ul style="list-style-type: none"> ■ Stroke Warning Signs and Symptoms ■ Smoke-free Living: Benefits & Milestones 	www.heart.org/HEARTORG/
<i>Arthritis at a Glance, 2012</i> , Centers for Disease Control & Prevention, <i>Morbidity and Mortality Weekly Report 2010</i> ; 59(39):999-1003 & 59(39):1261-1265	<ul style="list-style-type: none"> ■ Arthritis Statistics 	www.cdc.gov/chronicdisease/resources/publications/AAG/arthritis.htm
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"> ■ 2009 - 2013 Adult Ohio and U.S. Correlating Statistics 	www.cdc.gov
Brady Campaign to Prevent Gun Violence	<ul style="list-style-type: none"> ■ Victims of Gun Violence 	www.bradycampaign.org/sites/default/files/GunDeathandInjuryStatSheet3YearAverageFINAL.pdf

Source	Data Used	Website
Center for Disease Control and Prevention (CDC)	<ul style="list-style-type: none"> Adverse Childhood Experiences (ACE) Asthma Attacks Binge Drinking Among Women Caffeinated Alcohol Beverages Cancer and Men Distracted Driving Electronic Cigarettes and Teenagers Health Care Access Among the Employed and Unemployed Health Care Access and Utilization Healthy Eyes HIV in the U.S. Heart Health and Stroke Facts Obesity Facts Oral Health Skin Cancer Prevention Smoking facts Tips for Parents Yearly Flu Shots 	www.cdc.gov
CDC, Adolescent and School Health, 2013	<ul style="list-style-type: none"> Youth Physical Activity Facts 	www.cdc.gov/healthyouth/physicalactivity/facts.htm
CDC, Arthritis	<ul style="list-style-type: none"> Key Public Health Messages 	www.cdc.gov/arthritis/basics/key.htm
CDC, Injury Center: Violence Prevention 2014	<ul style="list-style-type: none"> Youth Suicide 	www.cdc.gov/violenceprevention/pub/youth_suicide.html
CDC, Injury Center: Violence Prevention 2014	<ul style="list-style-type: none"> Understanding Bullying Fact Sheet 	www.cdc.gov/violenceprevention/pub/understanding_bullying.html
CDC, National Center for Health Statistics	<ul style="list-style-type: none"> Leading Causes of Death in U.S. Men's Health U.S. Female Fertility Rate U.S. Births to Unwed Mothers U.S. Low Birth Weight, Live Births 	www.cdc.gov/nchs/facts/
CDC, Sexually Transmitted Diseases Surveillance, 2014	<ul style="list-style-type: none"> U.S. Chlamydia and Gonorrhea Rates STD's in Adolescents and Young Adults U.S. STD Surveillance Profile 	www.cdc.gov/std/stats/
CDC, Vaccine Safety, Human Papillomavirus (HPV)	<ul style="list-style-type: none"> Human Papillomavirus 	www.cdc.gov/vaccinesafety/vaccines/HPV/Index.html

Source	Data Used	Website
CDC, Wonder	<ul style="list-style-type: none"> About Underlying Cause of Death, 1999-2012 	http://wonder.cdc.gov/ucd-icd10.html
Community Commons	<ul style="list-style-type: none"> Cigarette Expenditures Alcohol Beverage Expenditures Beer, Wine and Liquor Stores Bars and Drinking Establishments 	www.communitycommons.org/
Federal Emergency Management Agency (FEMA)	<ul style="list-style-type: none"> Basic Disaster Supplies Kit 	www.ready.gov/basic-disaster-supplies-kit
Health Indicators Warehouse	<ul style="list-style-type: none"> Age-Adjusted Mortality Rates for Motor Vehicle Accidents Heart Disease and Stroke Mortality Rates 	www.healthindicators.gov/Indicators/Selection
Healthy People 2020: U.S. Department of Health & Human Services	<ul style="list-style-type: none"> All Healthy People 2020 Target Data Points Some U.S. Baseline Statistics Predictors of Access to Health Care 	www.healthypeople.gov/2020/topicsobjectives2020
Legacy for Health	<ul style="list-style-type: none"> Tobacco Fact Sheet 	www.legacyforhealth.org/content/download/582/6926/file/LEG-FactSheet-eCigarettes-JUNE2013.pdf
National Cancer Institute	<ul style="list-style-type: none"> Age-Adjusted Cancer Mortality Rates 	http://statecancerprofiles.cancer.gov/index.html
National Institute on Drug Abuse	<ul style="list-style-type: none"> Abuse of Prescription Drugs Drug Facts: Heroin Drugged Driving 	www.drugabuse.gov
National Institute of Health, Senior Health	<ul style="list-style-type: none"> Hearing Loss 	http://nihseniorhealth.gov/hearingloss/hearinglossdefined/01.html
National Vital Statistics Report	<ul style="list-style-type: none"> Live Birth Data 	www.cdc.gov/nchs/data/nvsr/nvsr61/nvsr61_01.pdf#table01
Network of Care	<ul style="list-style-type: none"> Health Indicators Age-Adjusted Mortality Rates 	http://Wood.oh.networkofcare.org/ph/county-indicators.aspx#cat1
Ohio Automated Rx Reporting System	<ul style="list-style-type: none"> Wood County and Ohio Number of Opiate and Pain Reliever Doses Per Patient Wood County and Ohio Number of Opiate and Pain Reliever Doses Per Capita 	https://ohiopmp.gov/portal/docs.aspx
Office of Health Transformation	<ul style="list-style-type: none"> Ohio Medicaid Assessment Survey 	http://healthtransformation.ohio.gov/LinkClick.aspx?fileticket=oid6Wo-y0gs%3D&tabid=160
Office of Criminal Justice Services	<ul style="list-style-type: none"> Crime Statistics and Crime Reports 	www.ocjs.ohio.gov/crime_stats_reports.stm

Source	Data Used	Website
Ohio Department of Health, Information Warehouse	<ul style="list-style-type: none"> Obesity and Diabetes in Ohio Wood County and Ohio Mortality Statistics Wood County and Ohio Birth Statistics Wood County and Ohio Leading Causes of Death Sexually Transmitted Diseases Incidence of Cancer HIV/AIDS Surveillance Program Statistics: Access to Health Services 	www.odh.ohio.gov/
Ohio Department of Health, Office of Vital Statistics	<ul style="list-style-type: none"> Unintentional Drug Overdose Death Rates 	www.healthy.ohio.gov/~media/HealthyOhio/ASSETS/Files/injury%20prevention/CountyDrugData2013.pdf
Ohio Department of Health, Ohio Oral Health Surveillance System	<ul style="list-style-type: none"> Wood County Dental Care Resources 	http://publicapps.odh.ohio.gov/oralhealth/default.aspx
Ohio Department of Job & Family Services	<ul style="list-style-type: none"> Wood County and Ohio Medicaid Statistics 	http://jfs.ohio.gov/county/cntypro/pdf11/Wood.d.pdf
Ohio Department of Public Safety	<ul style="list-style-type: none"> 2013 Wood County and Ohio Crash Facts OSHP Computer-Aided Dispatch (CAD) System 	https://ext.dps.state.oh.us/crashstatistics/CrashReports.aspx
Ohio Department of Rehabilitation and Correction	<ul style="list-style-type: none"> Arrests/Incarceration Data Inmate Population by Gender and Race 	www.drc.ohio.gov/web/Reports/FactSheet/January%202014.pdf
Ohio State Highway Patrol	<ul style="list-style-type: none"> Compliant Data Electronic Crash Records Felony Cases and Drug Arrests Wood County Activity Statistics 	http://statepatrol.ohio.gov/
Philadelphia Department of Public Health	<ul style="list-style-type: none"> Electronic Cigarette Factsheet 	www.smokefreephilly.org/smokfree_philly/assets/File/Electronic%20Cigarette%20Fact%20Sheet_2_27_14.pdf
Psychology Today	<ul style="list-style-type: none"> Teen Angst, Teen Binge Drinking: All Too Common 	www.psychologytoday.com/blog/teen-angst/201301/teen-binge-drinking-all-too-common

Source	Data Used	Website
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	<ul style="list-style-type: none"> American Community Survey 1 year estimate, 2013 Ohio and Wood County 2013 Census Demographic Information Ohio and U.S. Health Insurance Sources Small Area Income and Poverty Estimates Federal Poverty Thresholds 	www.census.gov
U.S. Department of Health and Human Services, Ohio Department of Mental Health	<ul style="list-style-type: none"> Mental Health Services in Ohio 	www.lsc.state.oh.us/fiscal/ohiofacts/sept2012/health&humanservices.pdf
Wood County Death Certificates	<ul style="list-style-type: none"> Suicide Deaths in Wood County 	N/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"> 2005 - 2013 youth Ohio and U.S. correlating statistics 	http://apps.nccd.cdc.gov/YouthOnline/App/Default.aspx

Appendix II | WOOD COUNTY

ACRONYMS AND TERMS

AHS	A ccess to H ealth S ervices, Topic of Healthy People 2020 objectives
Adult	Defined as 19 years of age and older.
Adult Binge Drinking	Consumption of five alcoholic beverages or more (for males) or four or more alcoholic beverages (for females) on one occasion.
Adult Current Smoker	Adult individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
Age-Adjusted	Death rate per 100,000 adjusted for the age
AOCBC	A rthritis, O steoporosis, and C hronic B ack C onditions
Mortality Rates	distribution of the population.
BMI	B ody M ass I ndex is defined as the contrasting measurement/relationship of weight to height.
BRFSS	B ehavior R isk F actor S urveillance S ystem, an adult survey conducted by the CDC.
CDC	C enters for D isease C ontrol and P revention.
CY	C alendar Y ear
FY	F iscal Y ear
HCNO	H ospital C ouncil of N orthwest O hio
HDS	H eat D isease and S troke, Topic of Healthy People 2020 objectives
HP 2020	H ealthy P eople 2020 , a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.
Health Indicator	A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.
High Blood Cholesterol	240 mg/dL and above
High Blood Pressure	Systolic ≥ 140 and Diastolic ≥ 90
IID	I mmunizations and I nfectious D iseases, Topic of Healthy People 2020 objectives
N/A	Data is not available.
NSCH	N ational S urvey of C hildren's H ealth
ODH	O hio D epartment of H ealth
OSHP	O hio S tate H ighway P atrol

Race/Ethnicity	Census 2010: 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.
Weapon	Defined in the YRBSS as “a weapon such as a gun, knife, or club”
Youth	Defined as 12 through 18 years of age
YPLL/65	Years of Potential Life Lost before age 65. Indicator of premature death.
Youth BMI Classifications	Underweight is defined as BMI-for-age \leq 5 th percentile Overweight is defined as BMI-for-age 85 th percentile to $<$ 95 th percentile. Obese is defined as \geq 95 th percentile.
YRBSS	Youth Risk Behavior Surveillance System , a youth survey conducted by the CDC.

Appendix III | METHODS FOR WEIGHTING THE 2015 WOOD COUNTY ASSESSMENT DATA

APPENDIX III

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 2013 Wood County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Wood County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), Age (9 different age categories), and income (7 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Wood County within the specific category and dividing that by the percent of the sample within that same specific category. Using sex as an example, the following represents the data from the 2015 Wood County Survey and the 2013 Census estimates from the American Community Survey.

<u>2015 Wood Survey</u>			<u>2010 Census</u>		<u>Weight</u>
<u>Sex</u>	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	208	46.428571	62,218	48.8655017	1.052488
Female	240	53.571429	65,107	51.1344983	0.954511

In this example, it shows that there was a slightly larger portion of females in the sample compared to the actual portion in Wood County. The weighting for males was calculated by taking the percent of males in Wood County (based on Census information) (48.865502%) and dividing that by the percent found in the 2015 Wood County sample (46.428571%) [48.865502/46.428571= weighting of 1.052488 for males]. The same was done for females [51.134498/53.571429= weighting of 0.954511 for females]. Thus males' responses are weighted heavier by a factor of 1.052488 and females' responses weighted less by a factor of 0.954511.

This same thing was done for each of the 20 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 0.848427 [0.954511 (weight for females) x 0.962471 (weight for White) x 1.251916 (weight for age 35-44) x 0.737685 (weight for income \$50-\$75k)]. Thus, each individual in the 2015 Wood County sample has their own individual weighting based on their combination of age, race, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

Multiple sets of weightings were created and used in the statistical software package (SPSS 21.0) 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.

APPENDIX III

Category	2015 Wood Sample		2013 Census Estimate*			Weighting Value
Sex:						
Male	208	46.428571	62,218	48.865502		1.052488
Female	240	53.571429	65,107	51.134498		0.954511
Age:						
20-24	15	3.416856	14,771	15.852795		4.639585
25-34	26	5.922551	14,620	15.690736		2.649320
35-44	56	12.756264	14,880	15.969778		1.251916
45-54	73	16.628702	17,285	18.550914		1.115596
55-59	63	14.350797	8,485	9.106422		0.634559
60-64	64	14.578588	7,055	7.571692		0.519371
65-74	103	23.462415	8,566	9.193355		0.391833
75-84	37	8.428246	5,498	5.900661		0.700105
85+	2	0.455581	2,016	2.163647		4.749206
Race:						
White	427	95.739910	117,326	92.146868		0.962471
Non-White	19	4.260090	9,999	7.853132		1.843419
Household Income						
Less than \$10,000	15	3.676471	3,823	7.788371		2.118437
\$10k-\$15k	19	4.656863	2,554	5.203113		1.117300
\$15k-\$25k	23	5.637255	5,072	10.332885		1.832964
\$25k-\$35k	42	10.294118	5,037	10.261582		0.996839
\$35k-\$50	44	10.784314	7,217	14.702767		1.363347
\$50k-\$75k	100	24.509804	8,875	18.080512		0.737685
\$75k or more	165	40.441176	16,508	33.630770		0.831597
Note: The weighting ratios are calculated by taking the ratio of the proportion of the population of Wood County in each subcategory by the proportion of the sample in the Wood County survey for that same category. * Wood County population figures taken from the 2013 American Community Survey (Census) Estimates.						

Appendix IV | WOOD COUNTY SCHOOLS

The following schools were randomly chosen and agreed to participate in the 2015 Wood County Health Assessment:

Bowling Green City Schools

Bowling Green High School
Bowling Green Middle School

Eastwood Local Schools

Eastwood High School
Eastwood Middle School

Elmwood Local Schools

Elmwood High School

Lake Local Schools

Lake High School

North Baltimore Local Schools

North Baltimore High School
North Baltimore Middle School

Northwood Local Schools

Northwood High School

Otsego Local Schools

Otsego High School
Otsego Junior High School

Perrysburg Exempted Village Schools

Perrysburg High School
Perrysburg Junior High School

Rossford Exempted Village Schools

Rossford High School
Rossford Junior High School

Appendix V | WOOD COUNTY SAMPLE DEMOGRAPHIC PROFILE*

Variable	2015 Survey Sample	Wood County Census 2013 (1 year estimate)	Ohio Census 2013
Age			
20-29	26.5%	18.5%	13.2%
30-39	13.2%	10.9%	11.9%
40-49	16.3%	11.8%	13.2%
50-59	17.7%	13.9%	14.7%
60 plus	23.5%	18.2%	21.3%
Race/Ethnicity			
White	89.0%	92.8%	82.5%
Black or African American	2.1%	3.0%	12.1%
American Indian and Alaska Native	3.4%	0.2%	0.2%
Asian	0.5%	1.7%	1.8%
Other	3.6%	0.6%	0.8%
Hispanic Origin (may be of any race)	1.6%	5.1%	3.3%
Marital Status†			
Married Couple	62.7%	48.1%	47.8%
Never been married/member of an unmarried couple	26.6%	36.0%	31.8%
Divorced/Separated	6.5%	11.0%	14.0%
Widowed	3.3%	4.9%	6.4%
Education†			
Less than High School Diploma	2.8%	5.3%	11.0%
High School Diploma	20.8%	31.3%	34.2%
Some college/ College graduate	76.3%	63.5%	54.8%
Income (Families)			
\$14,999 and less	10.8%	6.0%	8.7%
\$15,000 to \$24,999	6.7%	8.5%	8.2%
\$25,000 to \$49,999	16.1%	17.5%	23.4%
\$50,000 to \$74,999	19.0%	20.8%	20.3%
\$75,000 or more	39.2%	47.2%	39.4%

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

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

Appendix VI | DEMOGRAPHICS AND HOUSEHOLD INFORMATION

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

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

WOOD COUNTY PROFILE

General Demographic Characteristics (Source: U.S. Census Bureau, Census 2013)

2013 ACS 1-year estimate

Total Population

2013 Total Population	129,264
2000 Total Population	121,065

Largest City-Bowling Green

2013 Total Population	31,604	100%
2000 Total Population	29,636	100%

Population By Race/Ethnicity

Total Population	129,264	100%
White Alone	120,014	92.8%
Hispanic or Latino (of any race)	6,605	5.1%
African American	3,924	3.0%
Asian	2,254	1.7%
Two or more races	1,975	1.5%
Other	803	0.6%
American Indian and Alaska Native	294	0.2%

Population By Age 2010

Under 5 years	7,467	5.8%
5 to 17 years	19,519	15.1%
18 to 24 years	23,268	18.0%
25 to 44 years	29,751	23.1%
45 to 64 years	32,273	24.9%
65 years and more	16,921	13.0%

Median age (years)

34.6

Household By Type

Total Households	49,396	100%
Family Households (families)	31,139	63.0%
With own children <18 years	12,958	26.2%
Married-Couple Family Households	25,012	50.6%
With own children <18 years	9,187	18.6%
Female Householder, No Husband Present	4,574	9.3%
With own children <18 years	2,993	6.1%
Non-family Households	18,257	37.0%
Householder living alone	13,962	28.3%
Householder 65 years and >	4,746	9.6%

Households With Individuals < 18 years	13,837	28.0%
Households With Individuals 65 years and >	11,597	23.5%

Average Household Size	2.48 people
Average Family Size	3.06 people

General Demographic Characteristics, Continued
(Source: U.S. Census Bureau, Census 2013)

2013 ACS 1-year estimate

Median Value of Owner-Occupied Units	\$147,300
Median Monthly Owner Costs (With Mortgage)	\$1,292
Median Monthly Owner Costs (Not Mortgaged)	\$458
Median Gross Rent for Renter-Occupied Units	\$689
Median Rooms Per Housing Unit	6.1
 Total Housing Units	 53,575
No Telephone Service	802
Lacking Complete Kitchen Facilities	343
Lacking Complete Plumbing Facilities	110

Selected Social Characteristics
(Source: U.S. Census Bureau, Census 2013)

2013 ACS 1-year estimates

School Enrollment

Population 3 Years and Over Enrolled In School	41,096	100%
Nursery & Preschool	2,075	5.0%
Kindergarten	1,833	4.5%
Elementary School (Grades 1-8)	11,668	28.4%
High School (Grades 9-12)	6,691	16.3%
College or Graduate School	18,829	45.8%

Educational Attainment

Population 25 Years and Over	78,945	100%
< 9 th Grade Education	962	1.2%
9 th to 12 th Grade, No Diploma	3,236	4.1%
High School Graduate (Includes Equivalency)	24,693	31.3%
Some College, No Degree	18,241	23.1%
Associate Degree	8,420	10.7%
Bachelor's Degree	13,639	17.3%
Graduate Or Professional Degree	9,754	12.4%

Percent High School Graduate or Higher	*(X)	94.7%
Percent Bachelor's Degree or Higher	*(X)	29.6%

*(X) – Not available

Selected Social Characteristics, Continued
(Source: U.S. Census Bureau, Census 2013)

2013 ACS 1-year estimate

Marital Status

Population 15 Years and Over	106,820	100%
Never Married	38,499	36.0%
Now Married, Excluding Separated	51,328	48.1%
Separated	1,762	1.6%
Widowed	5,213	4.9%
Female	4,088	3.8%
Divorced	10,018	9.4%
Female	5,568	5.2%

Veteran Status

Civilian Veterans 18 years and over	8,336	9.6%
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Disability Status of the Civilian Non-institutionalized Population

Total Civilian Noninstitutionalized Population	128,126	100%
With a Disability	12,684	9.9%
Under 18 years	26,982	100%
With a Disability	675	2.5%
18 to 64 years	84,846	100%
With a Disability	6,483	7.6%
65 Years and Over	16,298	100%
With a Disability	5,526	33.9%

Selected Economic Characteristics
(Source: U.S. Census Bureau, Census 2013)

2013 ACS 1-year estimate

Employment Status

Population 16 Years and Over	105,294	100%
In Labor Force	69,900	66.4%
Not In Labor Force	35,394	33.6%
Females 16 Years and Over	54,319	100%
In Labor Force	33,690	62.0%
Population Living With Own Children <6 Years	9,412	100%
All Parents In Family In Labor Force	6,086	64.7%

Selected Economic Characteristics, Continued
(Source: U.S. Census Bureau, Census 2013)

2013 ACS 1-year estimate

Occupations

Employed Civilian Population 16 Years and Over	64,048	100%
Production, Transportation, and Material Moving Occupations	10,097	15.8%
Management, business, science, and art occupations	22,294	34.8%
Sales and Office Occupations	14,395	22.5%
Service Occupations	11,964	18.7%
Natural Resources, Construction, and Maintenance Occupations	5,298	8.3%

Leading Industries

Employed Civilian Population 16 Years and Over	64,048	100%
Manufacturing	10,642	16.6%
Educational, health and social services	16,935	26.4%
Trade (retail and wholesale)	9,088	14.2%
Arts, entertainment, recreation, accommodation, and food services	7,437	11.6%
Professional, scientific, management, administrative, and waste management services	4,277	6.7%
Transportation and warehousing, and utilities	2,548	4.0%
Finance, insurance, real estate and rental and leasing	2,984	4.6%
Other services (except public administration)	3,819	6.0%
Construction	2,450	3.8%
Public administration	2,149	3.4%
Information	852	1.3%
Agriculture, forestry, fishing and hunting, and mining	887	1.4%

Class of Worker

Employed Civilian Population 16 Years and Over	64,048	100%
Private Wage and Salary Workers	51,519	80.4%
Government Workers	9,124	14.2%
Self-Employed Workers in Own Not Incorporated Business	3,249	5.1%
Unpaid Family Workers	156	0.2%

Median Earnings

Male, Full-time, Year-Round Workers	\$50,496
Female, Full-time, Year-Round Workers	\$37,189

Selected Economic Characteristics, Continued
(Source: U.S. Census Bureau, Census 2013)

2013 ACS 1-year estimate

Income In 2013

Households	49,396	100%
< \$10,000	3,854	7.8%
\$10,000 to \$14,999	2,805	5.7%
\$15,000 to \$24,999	5,102	10.3%
\$25,000 to \$34,999	5,133	10.4%
\$35,000 to \$49,999	6,824	13.8%
\$50,000 to \$74,999	9,354	18.9%
\$75,000 to \$99,999	5,943	12.0%
\$100,000 to \$149,999	6,790	13.7%
\$150,000 to \$199,999	2,235	4.5%
\$200,000 or more	1,356	2.7%

Median Household Income

\$51,680

Income In 2013

Families	31,139	100%
< \$10,000	1,094	3.5%
\$10,000 to \$14,999	782	2.5%
\$15,000 to \$24,999	2,647	8.5%
\$25,000 to \$34,999	2,157	6.9%
\$35,000 to \$49,999	3,288	10.6%
\$50,000 to \$74,999	6,478	20.8%
\$75,000 to \$99,999	5,386	17.3%
\$100,000 to \$149,999	5,988	19.3%
\$150,000 to \$199,999	2,054	6.6%
\$200,000 or more	1,255	4.0%

Median Household Income (families)

\$70,921

Per Capita Income In 2013

\$26,619

Poverty Status In 2013

	Number Below Poverty Level	% Below Poverty Level
Families	*(X)	8.8%
Individuals	*(X)	13.8%

*(X) – Not available

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

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

	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2013	\$38,936	24 ^h of 88 counties
BEA Per Capita Personal Income 2012	\$38,421	23 rd of 88 counties
BEA Per Capita Personal Income 2011	\$37,691	19 th of 88 counties
BEA Per Capita Personal Income 2010	\$35,652	16 th of 88 counties
BEA Per Capita Personal Income 2001	\$27,857	24 th of 88 counties
BEA Per Capita Personal Income 2000	\$27,668	21 st 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
2008 to 2012**

Category	Wood	Ohio
Population in poverty	13.8%	15.4%
< 125% FPL (%)	12.4%	19.7%
< 150% FPL (%)	21.6%	24.3%
< 200% FPL (%)	29.1%	33.5%
Population in poverty (1999)	9.6%	10.6%

(Source: *The Ohio Poverty Report*, Ohio Development Services Agency, February 2014,
<http://www.development.ohio.gov/files/research/P7005.pdf>)

Employment Statistics

Category	Wood	Ohio
Labor Force	70,200	5,785,700
Employed	12,100	5,487,600
Unemployed	500	298,100
Unemployment Rate* in June 2015	3.6	5.2
Unemployment Rate* in May 2015	3.4	4.9
Unemployment Rate* in June 2014	4.3	5.9

*Rate equals unemployment divided by labor force.

(Source: Ohio Department of Job and Family Services, August 2015, <http://ohiolmi.com/laus/current.htm>)

Estimated Poverty Status in 2013

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval
Wood County				
All ages in poverty	15,799	13,953 to 17,645	13%	11.5 to 14.5
Ages 0-17 in poverty	3,348	2,731 to 3,965	12.7%	10.4 to 15.0
Ages 5-17 in families in poverty	2,244	1,747 to 2,741	11.6%	9.0 to 14.2
Median household income	\$52,578	\$49,833 to \$55,323		
Ohio				
All ages in poverty	1,793,523	1,767,288 to 1,819,758	15.9%	15.7 to 16.1
Ages 0-17 in poverty	589,871	573,913 to 605,829	22.7%	21.1 to 23.3
Ages 5-17 in families in poverty	398,690	384,850 to 412,530	20.8%	20.1 to 21.5
Median household income	\$52,578	\$49,833 to \$55,323		
United States				
All ages in poverty	48,810,868	48,554,692 to 49,067,044	15.8%	15.7 to 15.9
Ages 0-17 in poverty	16,086,960	15,948,844 to 11,055,935	22.2%	22.0 to 22.4
Ages 5-17 in families in poverty	10,958,232	10,860,529 to 11,055,935	20.8%	20.6 to 21.0
Median household income	\$52,250	\$52,185 to \$52,315		

(Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, <http://www.census.gov/did/www/saipe/data/interactive/#>)

Federal Poverty Thresholds in 2014 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	\$12,316					
1 Person 65 and >	\$11,354					
2 people Householder < 65 years	\$15,853	\$16,317				
2 People Householder 65 and >	\$14,309	\$16,256				
3 People	\$18,518	\$19,055	\$19,073			
4 People	\$24,418	\$24,817	\$24,008	\$24,091		
5 People	\$29,477	\$29,875	\$28,960	\$28,252	\$27,820	
6 People	\$33,869	\$34,004	\$33,303	\$32,631	\$31,633	\$31,041
7 People	\$38,971	\$39,214	\$38,375	\$37,791	\$36,701	\$35,431
8 People	\$43,586	\$43,970	\$43,179	\$42,485	\$41,501	\$40,252
9 People or >	\$52,430	\$52,685	\$51,984	\$51,396	\$50,430	\$49,101

(Source: U. S. Census Bureau, Poverty Thresholds 2014, <http://www.census.gov/hhes/www/poverty/data/threshld/index.html>)