

2021 Wood County Community Health Assessment

Executive Summary

Adult Data	
Mental Health	
Findings	Source
<ul style="list-style-type: none"> ● 49% reported that their mental health was not good for 4 or more days in the past month <ul style="list-style-type: none"> ○ 32% in 2018 ● 33% said that their mental health was not good for 8 or more days in the past 30 days ● 12% reported being sad, depressed, or hopeless for 2 or more weeks <ul style="list-style-type: none"> ○ 30% for people under age 30; 18% for people with income under \$25K ○ 3% of adults attempted suicide, and 3% considered attempting suicide ○ 38% reported stress, anxiety, depression, other emotional problems and physical health precluded them from usual activities like self-care, work and recreation <ul style="list-style-type: none"> ■ 32% in 2018 ● 25% of adults reported their mental health was affected by the COVID-19 pandemic ● 28% of adults looked for mental health services <ul style="list-style-type: none"> ○ 10% of them did not find a specific program; 5% found a program outside the county ○ 22% of adults had used a program or service to help with depression, anxiety, or other emotional problems for themselves or a loved one (up from 11% in 2018) ○ Reasons for not using mental health services: Had not thought of it (11%), cost (10%), stigma (4%), long wait (3%), did not find a program (2%), fear (2%) ○ 50% did not think they needed to seek care 	<p>p. 6</p> <p>p. 49</p> <p>p. 75</p> <p>p. 6</p> <p>p. 104</p> <p>p. 35-36</p> <p>p. 75</p> <p>p.75</p>
<p>Additional Analysis</p> <ul style="list-style-type: none"> ● Of the people who found mental health programs or services outside the county (5% of respondents), 39% were from Perrysburg, 37% were from Bowling Green and 11% were from Walbridge ● Of the people who said their mental health was not good for 8 or more days in the past 30 days, 33% said they did not think it was necessary to seek help 	
<p>Implications</p> <ul style="list-style-type: none"> ● Mental health challenges emerged as a significant issue for adults. While mental health/addiction was a priority in the 2019-2021 CHIP, several mental health factors were rated worse than 2018 ● Access to mental health services is an issue, as indicated by the percentage who did not find programs that suited their needs (10%) and those who went outside the county for care (5%). ● Awareness of the need for care may be an issue, as indicated by the percent of people who said their mental health was not good for 8 or more days and did not think they needed to seek care. 	
Weight Status	
<ul style="list-style-type: none"> ● 69% of adults were overweight or obese <ul style="list-style-type: none"> ○ 76% of adults with arthritis and 88% with diabetes are overweight or obese ● 23% of adults did not participate in any physical activity in the past week <ul style="list-style-type: none"> ○ 6% of those adults were unable to exercise ○ Reasons for not exercising include time (29%), laziness (23%), weather (21%), too tired (20%), pain or discomfort (17%), did not like to exercise (17%) ● 76% of adults ate less than the recommended 5+ servings of fruit/vegetables per day ● Reasons chosen for the types of foods eaten include: <ul style="list-style-type: none"> ○ Taste/enjoyment (73%), easy to prepare (60), healthy (54%), cost (46%), food they were used to (46%), what their family prefers (45%), nutritional content (33%), availability (31%) 	<p>p. 51</p> <p>p. 88, 91</p> <p>p. 51</p> <p>p. 52</p> <p>p. 52</p>
<p>Additional Analysis</p> <ul style="list-style-type: none"> ● 81% reported that they had no barriers to consuming fruits and vegetables <ul style="list-style-type: none"> ○ Of those who had barriers, 11% said they were too expensive, 8% said taste was an issue and 6% said preparation was an issue ● Less than 1% of respondents said they had no access to fruits and vegetables 	

2021 Wood County Community Health Assessment

Executive Summary

Implications <ul style="list-style-type: none"> • Rates of obesity and overweight are slightly better than the 2018 CHA and consistent with rates in Ohio and the U.S. overall. Nevertheless, obesity is associated with higher rates of comorbidities such as arthritis, diabetes, cardiovascular diseases and death. • Inadequate physical activity is a risk factor for obesity, as are unhealthy eating habits. • Personal choices and preferences weigh heavily in individual decisions about how much to exercise and the kinds of foods people eat. 	
Alcohol, Tobacco and Drug Use	
Alcohol Use <ul style="list-style-type: none"> ○ 71% of adults in Wood County were current drinkers (Up from 68% in 2018) ○ Higher than 2019 Ohio (53%) and U.S. (54%) rates • 32% of adults were binge drinkers [consuming more than 4 (women) or 5 (men) alcoholic beverages on a single occasion in the past 30 days] 	p. 60
Tobacco Use <ul style="list-style-type: none"> • 10% of Wood County adults smoke; 8% of adults used e-cigarettes in the past year <ul style="list-style-type: none"> ○ 58% of smokers tried to quit in the past year; 21% are former smokers 	p. 60 p. 56
Recreational Drug Use <ul style="list-style-type: none"> • 9% used recreational marijuana in the past 6 months (Up from 6% in 2018) <ul style="list-style-type: none"> ○ 22% of people under 30 used recreational marijuana • 5% of adults had used medication not prescribed for them or took more than prescribed to feel good, high, more active, and/or alert during the past 6 months • 5% of adults had used other recreational drugs • 48% of those who used recreational drugs used them every day 	p. 64-65
Implications <ul style="list-style-type: none"> • Alcohol use rates increased over 2018, and are substantially higher than Ohio and the U.S. overall. Alcohol use is associated with higher risk of chronic disease. • While tobacco use did not increase, tobacco is the biggest preventable cause of disease in the U.S. 	
Health Behaviors	
<ul style="list-style-type: none"> • 14% of adults had been forced to engage in sexual activity when they did not want to at some point in their lifetime <ul style="list-style-type: none"> ○ 30% for people under age 30; 27% for people with income less than \$25,000 	p. 70-71
Additional Analysis <ul style="list-style-type: none"> • Two questions assessed participants experience with forced sexual activity. <ul style="list-style-type: none"> ○ All individuals who reported they had been forced to have sex were female. ○ 85% of people who reported they had been forced to engage in other sexual activity were female. 	
Implications <ul style="list-style-type: none"> • Sexual violence can negatively impact health in many ways. People who have experienced it are more likely to exhibit other unhealthy behaviors, including smoking tobacco, drug, and alcohol abuse, and engaging in risky sexual activity. 	
Health Care Access and Utilization	
<ul style="list-style-type: none"> • 7% of adults were without health care coverage; 10% of males were without coverage 	p. 75
Implications <ul style="list-style-type: none"> • People without insurance are less likely to have a primary care provider, and they may not be able to afford the health care services and medications they need. 	
Adverse Childhood Experiences (ACEs)	
<ul style="list-style-type: none"> • 19% of adults experienced 4 or more ACEs; 33% of adults under the age of 30. 	p. 39

2021 Wood County Community Health Assessment

Executive Summary

Additional Data		
Adult Behaviors	Experienced 4 or More ACEs	Did Not Experience Any ACEs
Current drinker (had at least one alcoholic beverage in the past month)	74%	66%
Classified as overweight or obese by BMI	71%	66%
Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)	55%	41%
Current smoker (currently smoke on some or all days)	23%	6%
Contemplated suicide in the past 12 months	13%	0%
Medication misuse in the past 6 months	0%	6%
Used recreational marijuana in the past 6 months	43%	3%

Implications

- ACEs can lead to poorer health outcomes including obesity, depression, and alcoholism. The greater the number of ACEs, the greater the risk for negative health outcomes.

Poverty and Health Outcomes	
Findings – Adults with Income Under \$25,000 per Year	Source
<p>Quality of Life</p> <ul style="list-style-type: none"> • 71% said quality of life was limited in some way vs. 34% of those with income >\$25,000. • 37% of adults rated their health as fair or poor vs. 7% of those with income >\$25,000. <p>Mental Health</p> <ul style="list-style-type: none"> • 75% rated their mental health as not good vs. 45% of adults with income >\$25,000. • 18% felt sad or hopeless 2+ weeks in a row vs. 10% of those with income >\$25,000. <p>Weight Status</p> <ul style="list-style-type: none"> • 87% are overweight or obese vs. 63% of those with income >\$25,000. • 68% are obese compared with 30% of those with income >\$25,000. <p>Access to Care</p> <ul style="list-style-type: none"> • 54% had a routine exam in the past year vs. 70% of those with income >\$25,000. • 29% visited a dentist or dental clinic v. 66% of those with income >\$25,000. <p>Chronic Conditions</p> <ul style="list-style-type: none"> • 13% had diabetes vs. 7% of those with income >\$25,000. <p>Alcohol, Tobacco and Drug Use</p> <ul style="list-style-type: none"> • 81% were current drinkers compared to 70% those with income >\$25,000 and had an average of 6.6 alcoholic drinks vs. 3.0 drinks for those with income >\$25,000. • 13% used recreational marijuana in the past 6 mos. vs. 3% with income >\$25,000. • 11% misused prescription medication in the past 6 mos. vs. 3% with income >\$25,000. <p>Sexual Behavior</p> <ul style="list-style-type: none"> • At some point in their lives, 27% had been forced to have sexual activity when they did not want to vs. 14% of the total adult population. <p>ACEs</p> <ul style="list-style-type: none"> • 26% experienced 4 or more ACEs vs. 17% of those with income >\$25,000 	<p>p. 95</p> <p>p. 48-9</p> <p>p. 48</p> <p>p. 76</p> <p>p. 53</p> <p>p. 53</p> <p>p. 37</p> <p>p. 46</p> <p>p. 92</p> <p>p. 61</p> <p>p. 65</p> <p>p. 65</p> <p>p. 70</p> <p>p. 100</p>
<p>Additional Analysis</p> <ul style="list-style-type: none"> • 9.9% of Wood County residents live in poverty (U.S. Census Bureau, 2021) • 2% of respondents said someone in the household went to bed hungry at least 2 days a week <ul style="list-style-type: none"> ○ Of those, 43% had household income at or below \$34,000 	
<p>Implications</p> <ul style="list-style-type: none"> • People who live in poverty generally have poorer health outcomes due to increased risk of mental illness, chronic diseases such as heart disease and heart disease and shorter life expectancy (Healthy People 2030). 	

2021 Wood County Community Health Assessment

Executive Summary

Youth Data	
Mental Health	
Findings	Source
<ul style="list-style-type: none"> ● 29% of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities in the past year. <ul style="list-style-type: none"> ○ Only 23% reported that they did not have anxiety, stress or depression. ● Major contributors to anxiety, stress, or depression were: <ul style="list-style-type: none"> ○ Academic success (48%), self-image (36%), sports (33%), fighting with friends (30%). ● 14% of youth had seriously considered attempting suicide in the past year. <ul style="list-style-type: none"> ○ 5% attempted suicide in the past year. ● 20% purposely hurt themselves sometime in their life. ● Youth said they would reach out to the following to express feelings of depression or suicide: <ul style="list-style-type: none"> ○ Best friend (59%), parent (33%), girlfriend or boyfriend (22%), and sibling (22%) ○ 8% of youth reported they would seek care from a professional counselor ○ 6% reported they would seek help from a school counselor ○ 2% said they would seek help through a Crisis Text Line ● 25% reported they had no one to talk to. ● Youth coping mechanisms for mental health included sleeping (41%), hobbies (33%), exercising (29%), and (3%) Drinking alcohol/smoking/using tobacco/illegal drugs. 	<p>p.120</p> <p>p. 118</p> <p>p. 119</p> <p>p. 125 p. 118</p> <p>p. 118 p. 118</p>
<p>Additional Analysis 30% of youth reported being bullied in the past year, and 29% of youth who reported being bullied seriously considered attempting suicide.</p>	
<p>Implications</p> <ul style="list-style-type: none"> ● Mental health challenges emerged as a significant issue for youth. While rates of seriously contemplating suicide declined vs. 2018, nearly 20% of youth seriously considered or attempted suicide in the past year. ● Bullying may increase risk of suicide. ● Access to sources of support may be an issue, as 25% reported they had no one to talk to and only 8% reported that they would seek care from a professional counselor. 	
Weight Status	
<ul style="list-style-type: none"> ● 31% of Wood County youth were overweight or obese; 18% are obese. <ul style="list-style-type: none"> ○ 40% of all youth were trying to lose weight. ● 10% of youth did not participate in any physical activity in the past week. ● Methods to lose weight or keep from gaining weight included exercising (46%), increasing water intake (46%), and eating less food/few calories/low-fat foods (33%). ● 50% of youth who were bullied at school were overweight or obese. 	<p>p. 105 p. 107 p. 107 p.107 p. 126</p>
<p>Implications</p> <ul style="list-style-type: none"> ● Rates of obesity are slightly higher than the 2018 CHA, higher than rates in Ohio and consistent with the U.S. overall. Obesity is associated with higher rates of comorbidities such as arthritis, diabetes, cardiovascular diseases and death. 	
Tobacco Use	
<ul style="list-style-type: none"> ● 2% of youth were current smokers; 8% of youth had tried cigarette smoking. <ul style="list-style-type: none"> ○ Average age of onset for smoking was 12.7 years. ○ 14% of all those who had smoked a whole cigarette did so at 10 years old or younger, and 29% had done so by 12 years old. ● Types of tobacco used: e-cigarettes (9%); cigarettes (4%); Swishers (3%); Others (9%). ● Youth obtained cigarettes in the following ways: 	<p>p. 108</p> <p>p. 108</p>

2021 Wood County Community Health Assessment

Executive Summary

<ul style="list-style-type: none"> ○ Borrowed from someone else (71%) ○ Received from someone 18 years or older (57%) ○ Family member (43%) ○ Bought from the store or vending machine (43%) ● 41% of youth who used tobacco tried to quit using all tobacco. 	p. 108
	p. 108

Additional Analysis

- Vaping nicotine was highest in Bowling Green (4%), Perrysburg (2%) and Pemberville (1%).
 - Vaping flavoring was highest in Perrysburg (2%).
- Youth who smoke experienced 3 or more ACEs, experience bullying, consider or attempt suicide and engage in high-risk behaviors.

Youth Behaviors	Current Smoker	Non-Current Smoker
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	83%	18%
Had at least one drink of alcohol (in the past 30 days)	83%	10%
Felt sad or hopeless almost every day for 2 or more weeks in a row (in the past 12 months)	67%	28%
Used marijuana (in the past 30 days)	67%	4%
Misused prescription medications (in the past 30 days)	50%	2%
Bullied on school property (in the past 12 months)	33%	14%
Seriously considered attempting suicide (in the past 12 months)	33%	13%
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*

Implications

- The connection between smoking and ACEs, considering or attempting suicide, bullying and engaging in high-risk behaviors indicates that youth who smoke may need other types of support.
- Tobacco is a major preventable cause of disease and death in the United States.
- E-cigarettes are an emerging trend and typically deliver nicotine flavorings, marijuana and other additives through inhaling aerosol. Youth who use e-cigarettes may be more likely to smoke cigarettes in the future.

Alcohol Use

<ul style="list-style-type: none"> ● 11% of Wood County youth had at least one drink of alcohol in the past 30 days. <ul style="list-style-type: none"> ○ 43% of youth who were current drinkers had at least an episode of binge drinking 	p. 112
<ul style="list-style-type: none"> ● Wood County youth obtained alcohol in the following ways: <ul style="list-style-type: none"> ○ From someone else (42%) ○ From a store or family member (35%) ○ Someone older bought it (32%) ○ A parent (29%) ○ An older friend or sibling (13%) ○ A friend's parent (13%) ○ Bought it with a fake ID (8%) 	p. 111

2021 Wood County Community Health Assessment Executive Summary

Additional Data		
Youth Behaviors	Current Drinker	Non-Current Drinker
Felt sad or hopeless for two or more weeks in a row (in the past 12 months)	63%	25%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	53%	15%
Seriously considered attempting suicide (in the past 12 months)	44%	10%
Bullied on school property (in the past 12 months)	33%	12%
Used marijuana (in the past 30 days)	28%	2%
Attempted suicide (in the past 12 months)	18%	3%
Misused prescription medications (in their lifetime)	13%	2%
Smoked cigarettes (in the past 30 days)	13%	0%

**Current drinkers are those youth surveyed who have self-reported having at least one drink of alcohol in the past 30 days.*

Implications

- While rates of youth alcohol consumption are lower than 2018 (15%) and well below Ohio (26%) and U.S. (29%) rates, alcohol use is connected to many chronic diseases and health conditions.
- 42% of youth obtained alcohol from a parent or a friend’s parents, suggesting that parents may need to be considered in efforts to impact youth alcohol consumption.
- The connection between alcohol use and ACEs suggests that youth who are drinkers may need other types of support.

Drug Use

<ul style="list-style-type: none"> • 5% of youth had used marijuana at least once in the past 30 days. • 3% used medications that were not prescribed for them or took more than prescribed to get high at some time in their life. • 4% were offered, sold or given an illegal drug on school property in the past year. • Reasons reported for not seeking help for alcohol, tobacco or other drug use: <ul style="list-style-type: none"> ○ Possibility of getting in trouble (26%) ○ Not knowing where to go (12%) • 74% of youth reported they did not think they needed help. 	<p>p. 115</p> <p>p. 115</p> <p>p. 115</p> <p>p. 115</p>
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Additional Analysis

- Vaping marijuana was highest in Bowling Green (3%), Perrysburg (1%) and Northwood (1%).

Implications

- While the rate of youth marijuana use is lower than 2018 (5% vs 9%) and well below Ohio and U.S. rates, marijuana use is associated with an increased risk of depression and suicide.
- The connection between marijuana use and ACEs suggests that youth who use marijuana may need other types of support.

Youth Violence and Bullying

<ul style="list-style-type: none"> • 30% of youth had been bullied in the past year. <ul style="list-style-type: none"> ○ 21% were verbally bullied. • Females had a higher rate of experiencing bullying (38%) compared to males (18%). • 8% (1 in 12) of youth carried a weapon (such as a gun, knife or club) in the past month. • 15% of youth had been involved in a physical fight. • 5% of youth had been hit, slapped or physically hurt by an adult in the past month. 	<p>p. 125</p>
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Additional Analysis

- Youth who reported being bullied also vaped nicotine (15%), flavoring (14%), marijuana (12%).
- 13% of youth who reported being bullied also carried weapons.
- 88% of 11th graders were bullied in the past year.
- Those who reported being bullied and carried a weapon lived in Bowling Green and Rossford (29%) and Luckey, Weston and North Baltimore (14%).

2021 Wood County Community Health Assessment Executive Summary

Additional Data		
Youth Behavior	Bullied	Non-Bullied
Felt sad or hopeless almost every day for 2 or more weeks in a row (in the past 12 months)	60%	23%
Overweight or obese	50%	28%
Experienced 3 or more adverse childhood experiences (ACEs) (in their lifetime)	42%	15%
Seriously considered attempting suicide (in the past 12 months)	29%	11%
Had at least one drink of alcohol (in the past 30 days)	25%	9%
Carried a weapon (in the past 30 days)	13%	7%
Used marijuana (in the past 30 days)	11%	4%
Attempted suicide (in the past 12 months)	10%	4%
Misused prescription medications (in their lifetime)	6%	2%
Smoked cigarettes (in the past 30 days)	4%	1%

Implications

- Youth who reported being bullied experience higher rates of depression, and more likely to consider or attempt suicide. They are also more likely to engage in risky behaviors such as smoking and drug use, suggesting that mental health and other types of support may lead to health improvements across many areas for youth who experience bullying.

Adverse Childhood Events

<ul style="list-style-type: none"> 19% of youth experienced three or more ACEs in their life. 42% of youth who were bullied experienced 3 or more ACEs in their life. 83% of youth who were current smokers were most likely to experience 3 or more ACEs 	<p>p. 29 p. 126 p. 109</p>
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Implications

ACES can lead to poorer health outcomes including obesity, depression, and alcoholism. The greater the number of ACEs, the greater the risk for negative outcomes.

2021 Wood County Community Health Assessment

Executive Summary

Child Data	
Mental Health	
Findings	Source
<ul style="list-style-type: none"> ● Parents reported their children took medication for the following conditions: <ul style="list-style-type: none"> ○ Attention deficit disorder or attention deficit hyperactivity disorder (78%) ○ Depression (57%) ○ Anxiety problems (25%) ● 8% of parents reported their child needed counseling in the past year; 3% reported their child needed psychiatry. ● 30% of parents reported their child was bullied in the past year. <ul style="list-style-type: none"> ○ 24% were verbally bullied (teased, taunted or called harmful names) ○ 11% were indirectly bullied (spread mean rumors about them or kept out of a “group”) ○ 4% were physically bullied (hit, kicked, punched or people took their belongings) ○ 2% were cyberbullied (teased, taunted, or threatened by email or cell phone) ○ No child was sexually bullied (using nude or semi-nude pictures to blackmail, intimidate, or exploit, or to pressure someone to have sex who does not want to) 	<p>p.129</p> <p>p. 133 p. 136</p>
<p>Additional Analysis</p> <ul style="list-style-type: none"> ● Rates of child bullying are consistent with youth bullying rates. ● In the 2018 CHA, parents reported their child took prescription medications for the following conditions: attention deficit disorder or attention deficit hyperactivity disorder (85%), depression (50%) and anxiety problems (25%). 	
<p>Implications</p> <ul style="list-style-type: none"> ● While comparisons to state and national data are not available, prescription medication prescribed for children suggest rates of depression and anxiety comparable to that of youth and adults. ● Since bullying rates are similar for children and youth, impacts to younger children may be comparable to those of youth. 	
Weight Status	
<ul style="list-style-type: none"> ● More than 21% of children were classified as obese by Body Mass Index calculation. <ul style="list-style-type: none"> ○ 12% were overweight, 59% were normal weight, and 8% were underweight. 	<p>p. 134</p>
<p>Implications</p> <ul style="list-style-type: none"> ● Obese, overweight and underweight children are at higher risks for various health conditions. ● Educating parents on healthy living for children may address under- and overweight conditions. 	
ACEs	
<ul style="list-style-type: none"> ● Parents reported their child ever experienced the following (ACEs): <ul style="list-style-type: none"> ○ Parents became separated or were divorced (13%) ○ Lived with someone who was mentally ill, suicidal, or severely depressed (5%) ○ Lived with someone who had a problem with alcohol or drugs (3%) ○ Lived with a parent/guardian who served time in jail (2%) ○ Saw or heard any parents or adults in their home physically hurt each other (1%) ○ Parent/guardian who died (1%) ○ Had been the victim of violence or witnessed violence in their neighborhood (<1%) 	<p>p. 138</p>
<p>Implications</p> <ul style="list-style-type: none"> ● Youth data indicates additional risk from experiencing multiple ACEs. ACEs can lead to poorer health outcomes including obesity, depression and alcoholism. The effects of ACEs can accumulate overtime, impacting the child through adulthood. ● The greater the number of ACEs, the greater the risk for negative health outcomes. Educating parents about ACEs and their impacts on children may be helpful. 	

2021 Wood County Community Health Assessment Executive Summary

Demographics

<i>Variable</i>	<i>2021 Survey Sample</i>	<i>Wood County Census 2015-2019 (5-year estimate)</i>	<i>Ohio Census 2019 (1-year estimate)</i>
Age			
20-29	14.5%	19.0%	13.2%
30-39	25.7%	10.9%	12.6%
40-49	13.1%	11.5%	11.9%
50-59	17.5%	11.9%	13.1%
60 plus	26.9%	21.4%	24.6%
Race / Ethnicity			
White	94.9%	91.9%	83.5%
Black or African American	1.2%	2.6%	14.4%
American Indian and Alaska Native	0.8%	0.2%	0.8%
Asian	0.4%	1.7%	3.0%
Other	3.9%	1.5%	1.3%
Hispanic Origin (may be of any race)	3.5%	5.6%	4.0%
Marital Status			
Married Couple	62.5%	46.4%	47.0%
Never been married/member of an unmarried couple	20.9%	37.1%	32.7%
Divorced/Separated	8.7%	11.4%	13.9%
Widowed	6.0%	5.1%	6.3%
Education			
Less than High School Diploma	2.1%	5.7%	9.2%
High School Diploma	20.9%	30.7%	32.6%
Some college/ College graduate	76.6%	50.9%	58.1%
Income (Families)			
\$14,999 and less	7.1%	3.6%	6.0%
\$15,000 to \$24,999	8.0%	3.3%	5.9%
\$25,000 to \$49,999	13.1%	17.0%	18.7%
\$50,000 to \$74,999	19.3%	20.4%	19.4%
\$75,000 or more	45.0%	55.5%	49.9%

2021 Wood County Community Health Assessment

Executive Summary

Appendix

Adverse Childhood Experiences (ACEs): Potentially traumatic events that occur in childhood (0-17 years) and aspects of the child's environment that can undermine their sense of safety, stability, and bonding.

- Examples: Experiencing physical, emotional or sexual abuse or neglect, witnessing violence in the home or community, having a family member attempt or die by suicide, growing up in a household with substance use problems, mental health problems, instability due to parental separation or divorce, or household members being in jail or prison.
- Some children are at greater risk than others: women and several racial/ethnic minority groups were at greater risk for having experienced 4 or more types of ACEs.
- ACEs are linked to chronic health problems, mental illness, and substance use problems in adulthood. ACEs can also negatively impact education, job opportunities and earning potential.
(<https://www.cdc.gov/violenceprevention/aces/fastfact.html>)
- The CDC has identified ways communities can prevent ACEs:
 - Home visiting programs for pregnant women and families of newborns
 - Parent training programs
 - Intimate partner violence prevention
 - Social support for parents
 - Parent support programs for teens and teen pregnancy prevention programs
 - Mental illness and substance abuse treatment
 - High quality child care
 - Sufficient income support for lower income families

Social Determinants of Health (SDHs): Conditions in the environments where people are born, live, learn, work, play, worship and age that affect a wide range of health functioning and quality-of-life outcomes.

- Healthy People 2030 has classified social determinants of health into five domains:
 - Economic stability
 - Education access and quality
 - Social and community context
 - Health care access and quality
 - Neighborhood and built environment
- Examples: Childhood experiences, safe housing, transportation, education, language and literacy skills, social support, family income, employment, our communities, racism, discrimination, violence, access to nutritious foods and physical activity opportunities, and access to health services.