2017

Auglaize County Community Health Assessment



Examining the health of Auglaize County

Released on 08.28.2017

Foreword

The Auglaize County Health Department is pleased to present this publication, the result of the 2017 health assessment of adults and youth in Auglaize County. The data was collected through surveys of health status and health behavior that were conducted by the Hospital Council of Northwest Ohio. The survey results are reported along with health statistics and information gathered from the Ohio Department of Health and other relevant national, state and local data sources.

This report provides a "snapshot" of where county residents currently stand in terms of their health and health behaviors. The data components of this comprehensive review can serve as strategic planning sources for organizations and individuals who are striving to make Auglaize County a healthier community.

In this era of rising costs and shrinking revenues, it is imperative that we focus our limited resources on those services and activities that will have the greatest positive impact on county residents' health. In that respect, the report's information can influence the current course of action and support new areas of interest. An added value with this year's report is the access to data from similar studies have been completed in forty other Ohio counties; this information is available at www.hcno.org, and provides opportunities for comparison, sharing, and crossjurisdictional collaboration in planning.

This report would not have been possible without the assistance of several community leaders and organizations. We thank them for their support in making this health assessment a reality. We are indebted to the Ohio Department of Health for providing financial assistance through the Community Health Assessment Project and the Mental Health Recovery Services Board of Allen, Auglaize, and Hardin Counties and Grand Lake Health Systems for their donation of support funds. We are especially grateful to the Hospital Council of Northwest Ohio for providing professional expertise and guidance throughout the process, in developing and conducting surveys, collecting and analyzing data, and presenting information in a format that is useful and easy to comprehend.

We encourage you to be open to new ideas and collaborations as you use this report in considering the health needs of Auglaize County residents. It takes all of us, working together, to guide Auglaize County towards a healthier future.

Sincerely,

Oliver N. Fisher, MS RS Health Commissioner Auglaize County Health Department

Acknowledgements

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

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

The 2017 Auglaize County Health Assessment is available on the following websites:

Auglaize County http://www2.auglaizecounty.org/

Auglaize County Combined Health District www.auglaizehealth.org

Hospital Council of Northwest Ohio http://www.hcno.org/community/reports.html

We Care People - MHRSB of Allen, Auglaize and Hardin Counties www.wecarepeople.org

Table of Contents

Pages Primary Data Collection Methods Pages 2016 Ohio State Health Assessment (SHA) Page Data Summary Pages rend Summary Pages IEALTHCARE ACCESS Iealthcare Coverage Cocess and Utilization Pages reventive Medicine Pages Vomen's Health Pages Ien's Health Pages	5-6 7 8-20 21-24 25-28
2016 Ohio State Health Assessment (SHA) Data Summary rend Summary Pages IEALTHCARE ACCESS Iealthcare Coverage Iccess and Utilization Pages reventive Medicine Vomen's Health Pages Ien's Health Pages	7 8-20 21-24 25-28
Data Summary rend Summary Pages HEALTHCARE ACCESS Realthcare Coverage Reccess and Utilization Pages reventive Medicine Pages Vomen's Health Pages Ren's Health Pages	8-20 21-24 25-28
rend Summary HEALTHCARE ACCESS Itealthcare Coverage Pages Access and Utilization Pages Access reventive Medicine Pages Vomen's Health Pages Iten's Health Pages	21-24 25-28
HEALTHCARE ACCESS Itealthcare Coverage Pages Inccess and Utilization Pages Ireventive Medicine Pages Item's Health Pages Iten's Health Pages	25-28
lealthcare CoveragePagesloccess and UtilizationPagesreventive MedicinePagesVomen's HealthPageslen's HealthPages	
lealthcare CoveragePagesloccess and UtilizationPagesreventive MedicinePagesVomen's HealthPageslen's HealthPages	
Iccess and UtilizationPagesreventive MedicinePagesVomen's HealthPagesIen's HealthPages	
reventive MedicinePagesVomen's HealthPagesIen's HealthPages	
Vomen's HealthPagesIen's HealthPages	22-31
len's Health Pages	
5	
Oral Health Pages	44-46
9	11 10
IEALTH BEHAVIORS	
lealth Status Perceptions Pages	
dult Weight Status Pages	50-53
dult Tobacco Use Pages	
dult Alcohol Consumption Pages	
dult Drug Use Pages	
dult Sexual Behavior Pages	
dult Mental Health Pages	/6-//
HRONIC DISEASE	
ardiovascular Health Pages	70 00
ancer Pages	
rthritis Page	
isthma Pages	
Piabetes Pages	
Quality of Life Pages	
•	
OCIAL CONDITIONS	
	96-100
nvironmental Conditions Page	
arenting Page	102
OUTH HEALTH	
	103-106
3	107-109
	110-113
	114-116
	117-119
J	120-122
	123-125
5	126-128
APPENDICES	100 100
	129-133
	134-135
	136-137
DDFAIDIV IV Calcast Dawki sing tion	
PPENDIX IV — School Participation Page	139-140
PPENDIX V — Demographic Profile Pages	
PPENDIX V — Demographic ProfilePagesPPENDIX VI — Demographics and Household InformationPages	141-148
PPENDIX V — Demographic ProfilePagesPPENDIX VI — Demographics and Household InformationPagesPPENDIX VII — County Health RankingsPages	

Executive Summary

This executive summary provides an overview of health-related data for Auglaize County adults (19 years of age and older) and youth (ages 12 through 18) who participated in a county-wide health assessment survey during January-March 2017. 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 Auglaize County. From the beginning, community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

INSTRUMENT DEVELOPMENT

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

The project coordinator from the Hospital Council of Northwest Ohio conducted a series of meetings with the planning committee from Auglaize County. During these meetings, HCNO and the planning committee reviewed and discussed banks of potential survey questions. Based on input from the Auglaize County planning committee, the project coordinator composed drafts of surveys containing 114 items for the adult survey and 78 items for the adolescent survey. Health education researchers from the University of Toledo reviewed and approved the drafts.

SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and over living in Auglaize County. There were 33,601 persons ages 19 and over living in Auglaize 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 380 adults was needed to ensure this level of confidence. The random sample of mailing addresses was obtained from Melissa Data Corporation in Rancho Santa Margarita, California.

SAMPLING | Adolescent Survey

Youth in grades 6-12 in Auglaize County public school districts were used as the sampling frame for the adolescent survey. Using the U.S. Census Bureau data, it was determined that approximately 4,753 youth ages 12 to 18 years old live in Auglaize County. A sample size of 356 adolescents was needed to ensure a 95% confidence interval with a corresponding 5% margin of error. Students were randomly selected and surveyed in the schools.

PROCEDURE | Adult Survey

Prior to mailing the survey, an advance letter was mailed to 1,200 adults in Auglaize County. This advance letter was personalized, printed on Auglaize County Health Department letterhead, and signed by Oliver Fisher, Health Commissioner of the Auglaize County Health Department. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

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

The response rate for the mailing was 46% (n=532: CI=± 4.22). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

PROCEDURE | Adolescent Survey

The survey was approved by all participating superintendents. Schools and grades were randomly selected. Each student in that grade had to have an equal chance of being in the class that was selected, such as a general English or health class. Classrooms were chosen by the school principal. Passive permission slips were mailed home to parents of any student whose class was selected to participate. The response rate was 84% (n=405: CI=± 4.66).

DATA ANALYSIS

Individual responses were anonymous. Only group data was available. All data was analyzed by health education researchers at the University of Toledo using SPSS 21.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Auglaize 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 health assessments, it is important to consider the findings with respect to all possible limitations. First, the Auglaize 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 Auglaize County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

Furthermore, while the survey was mailed to random households in Auglaize County, those responding to the survey were more likely to be older. For example, only 12 respondents were under the age of 30. While weightings are applied during calculations to help account for this, it still presents a potential limitation (to the extent that the responses from these 12 individuals are substantively different from the majority of Auglaize County residents under the age of 30).

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

2016 Ohio State Health Assessment (SHA)

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

Similar to the 2016 Ohio SHA, the 2017 Auglaize County Community Health Assessment (CHA) examined a variety of metrics from various areas of health including, but not limited to, health behaviors, chronic disease, access to health care, and social determinants of health. Additionally, the CHA studied themes and perceptions from local public health stakeholders from a wide variety of sectors. **Note: This symbol** will be displayed in the trend summary when an indicator directly aligns with the 2016 Ohio SHA.

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

Comprehensive

and actionable picture of health and wellbeing

in Ohio

To view the full 2016 Ohio State Health Assessment, please visit: http://www.odh.ohio.gov/- /media/ODH/ASSETS/Files/chss/ship/SHA FullReport 08042016.pdf?la=en

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

Data profiles

- Existing data from several different sources, including surveys, birth and death records, administrative data and claims data
- Data on all age groups (life-course perspective)
- Disparities for selected metrics by race, ethnicity, income or education level, sex, age, geography or disability status
- U.S. comparisons, notable changes over time and Ohio performance on Healthy People 2020 targets

SHA regional forums

- Five locations around the state
- 372 in-person participants and 32 online survey participants
- Identified priorities, strengths, challenges and trends

Review of local health department and hospital assessments/plans

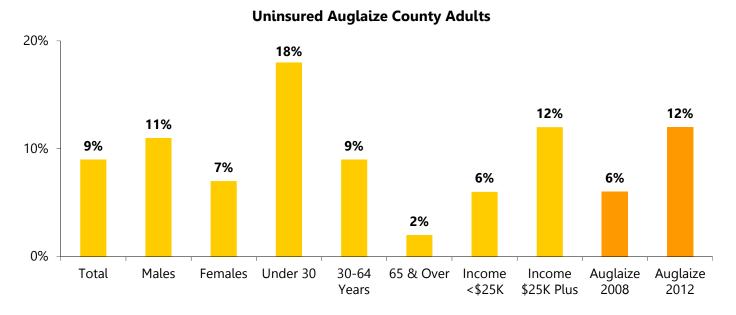
- 211 local health department and hospital community health assessment/plan
- Covered 94 percent of Ohio counties
 - Summary of local-level health priorities

- Interviews with 37 representatives of 29 community-based organizations
- Explored contributing causes of health inequities and disparities
- Special focus on groups with poor health outcomes and those who may otherwise be underrepresented in the state health assessment/state health improvement plan process

Data Summary | Healthcare Access

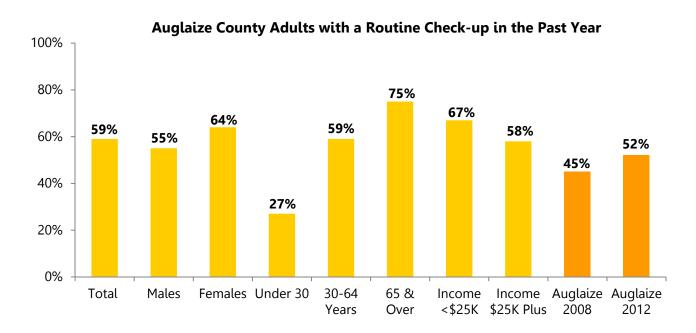
HEALTHCARE COVERAGE

The health assessment identified that 9% of Auglaize County adults were without health care coverage. Those most likely to be uninsured were adults under the age of 30 and those with an income level over \$25,000. In Auglaize County, 8.9% of residents live below the poverty level (Source: U.S. Census, American Community Survey 5 Year Estimate, 2011-2015).



ACCESS AND UTILIZATION

The 2017 health assessment identified that 59% of Auglaize County adults had visited a doctor for a routine checkup in the past year. Seventy one percent (71%) of adults went outside of Auglaize County for health care services in the past year.

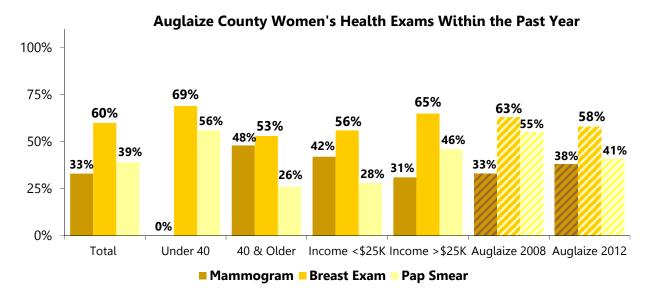


PREVENTIVE MEDICINE

More than three-fifths (61%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. More than half (52%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.

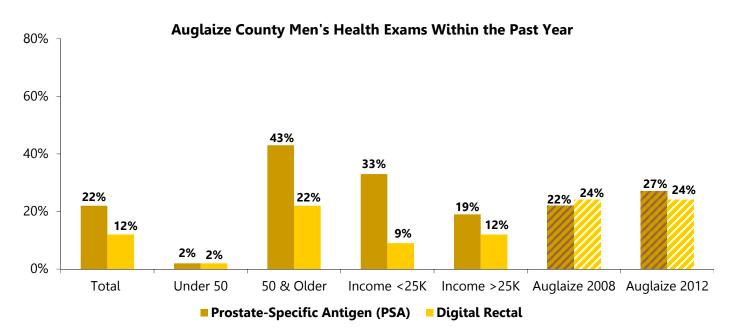
WOMEN'S HEALTH

In 2017, nearly half (48%) of Auglaize County women over the age of 40 reported having a mammogram in the past year. Sixty percent (60%) of Auglaize County women ages 19 and over had a clinical breast exam and 39% had a Pap smear to detect cancer of the cervix in the past year. Nearly half (46%) were obese, 38% had high blood pressure, 32% had high blood cholesterol, and 18% were identified as smokers, known risk factors for cardiovascular diseases.



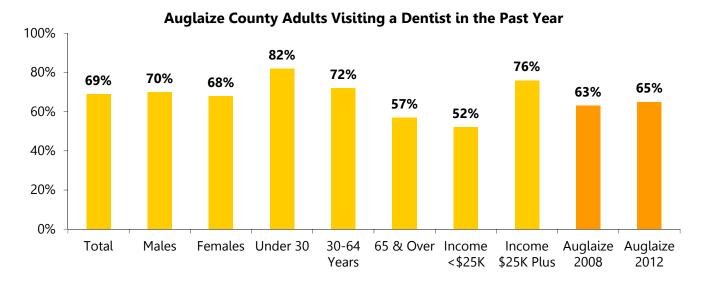
MEN'S HEALTH

In 2017, 43% of Auglaize County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. More than one-third (36%) of men had been diagnosed with high blood pressure, 35% had high blood cholesterol, and 15% were identified as smokers, which, along with obesity (32%), are known risk factors for cardiovascular diseases.



ORAL HEALTH

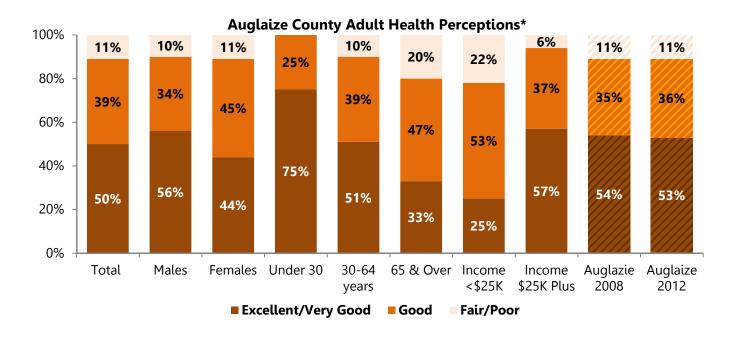
The health assessment has determined more than two-thirds (69%) of Auglaize County adults had visited a dentist or dental clinic in the past year. The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the past year.



Data Summary | Health Behaviors

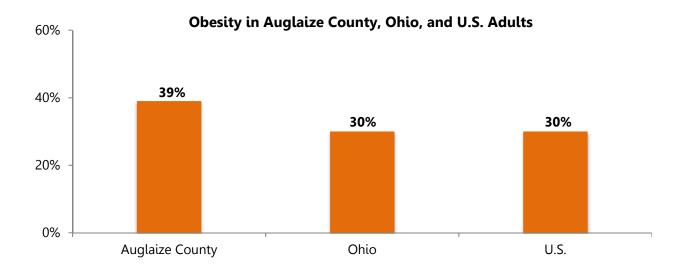
HEALTH STATUS PERCEPTIONS

In 2017, half (50%) of the Auglaize County adults rated their health status as excellent or very good. Conversely, 11% of adults described their health as fair or poor, increasing to 22% of those with incomes less than \$25,000.



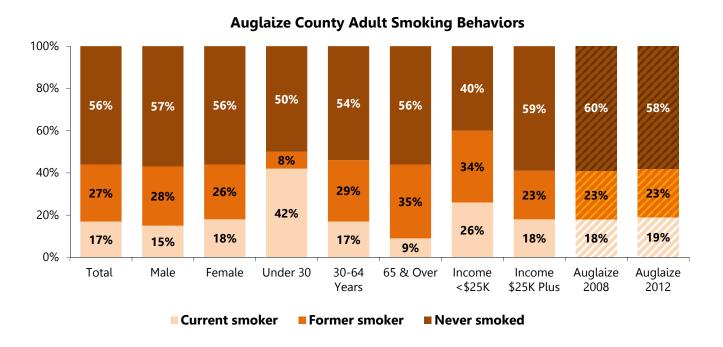
ADULT WEIGHT STATUS

The health assessment identified that 78% of Auglaize County adults were overweight or obese based on Body Mass Index (BMI). Nearly two-fifths (39%) of Auglaize County adults were obese. Nearly half (49%) of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week.



ADULT TOBACCO USE

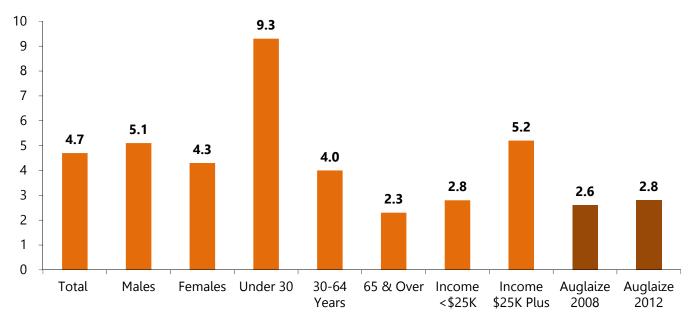
In 2017, 17% of Auglaize County adults were current smokers and 27% were considered former smokers. Thirtyeight percent (38%) of smokers reported trying to guit in the past year.



ADULT ALCOHOL USE

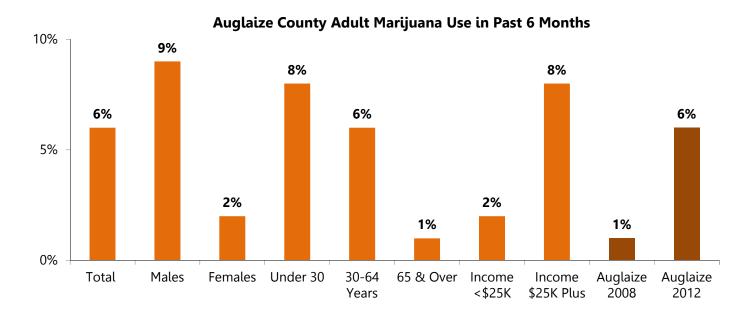
The health assessment indicated that 61% of Auglaize County adults had at least one alcoholic drink in the past month. Forty-five percent (45%) of those current drinkers were binge drinkers.





ADULT DRUG USE

In 2017, 6% of Auglaize County adults had used recreational marijuana during the past 6 months. Four percent (4%) 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 six months.



ADULT SEXUAL BEHAVIOR

In 2017, 64% of Auglaize County adults had sexual intercourse. Six percent (6%) of adults had more than one partner. The CDC estimates that youth ages 15-24 make up just over one quarter of the sexually active population, but account for half of the 20 million new sexually transmitted infections that occur in the United States each year. (Source: CDC, STDs in Adolescents and Young Adults, 2017 STD Surveillance).

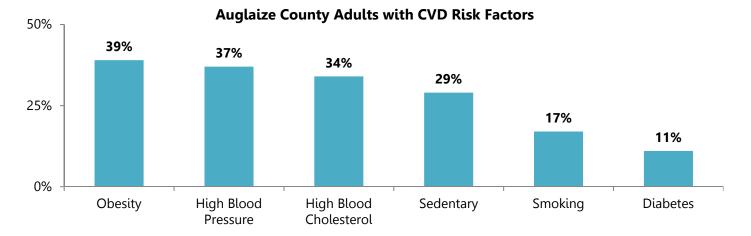
ADULT MENTAL HEALTH

In 2017, 2% of Auglaize County adults considered attempting suicide. Twenty-two percent (22%) of adults did not get enough rest or sleep almost every day for two or more weeks in a row. Nine percent (9%) of Auglaize County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems.

Data Summary | Chronic Disease

CARDIOVASCULAR HEALTH

The 2017 Auglaize County Health Assessment found that 6% of adults had survived a heart attack and 4% had survived a stroke at some time in their life. Nearly two-fifths (39%) were obese, 37% had high blood pressure, 34% had high blood cholesterol, and 17% were smokers, four known risk factors for heart disease and stroke. Heart disease (27%) and stroke (6%) accounted for 33% of all Auglaize County adult deaths in 2013-2015 (Source: CDC Wonder, 2017).



CANCER

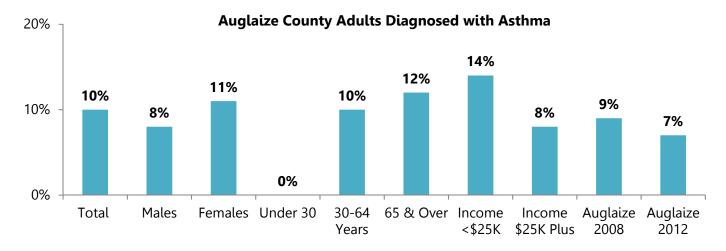
In 2017, 14% of Auglaize County adults had been diagnosed with cancer at some time in their life. The Centers for Disease Control and Prevention (CDC) indicates that from 2011-2015, a total of 529 Auglaize County residents died from cancer, the second leading cause of death in the county. The American 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.

ARTHRITIS

More than one-third (36%) of Auglaize County adults were diagnosed with arthritis. According to the 2015 BRFSS, 28% of Ohio adults and 25% of U.S. adults were told they have arthritis.

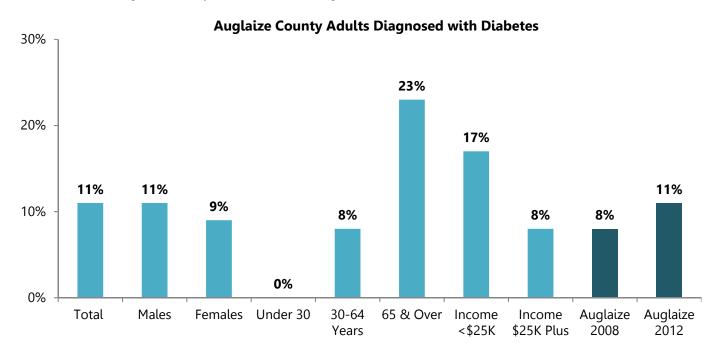
ASTHMA

According to the Auglaize County Health Assessment, 10% of adults had been diagnosed with asthma.



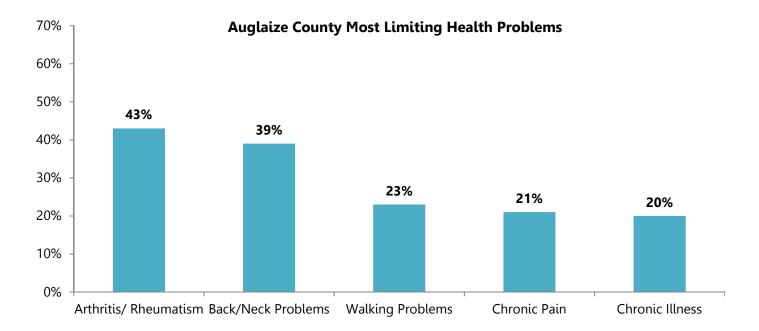
DIABETES

In 2017, 11% of Auglaize County adults had been diagnosed with diabetes.



QUALITY OF LIFE

In 2017, 27% of Auglaize County adults were limited in some way because of a physical, mental or emotional problem.



Data Summary | Social Conditions

SOCIAL DETERMINANTS OF HEALTH

In 2017, 5% of Auglaize County adults were threatened or abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Nearly half (49%) of adults kept a firearm in or around their home.

Auglaize County Adults With a Firearm in the Home 70% 60% 57% 60% 53% 49% 47% 50% 45% 40% 40% 38% 40% 29% 30% 20% 10% 0% Total Male Under 30 30-64 65 & Over Auglaize Female Income Income Auglaize

ENVIRONMENTAL HEALTH

Adults indicated that insects (7%), mold (7%) and rodents (3%) threatened their health in the past year. Adults also indicated television (82%), radio (70%), and internet (64%) as their main method or way of getting information from authorities in a large-scale disaster or emergency.

Years

<\$25K

\$25K Plus

2008

2012

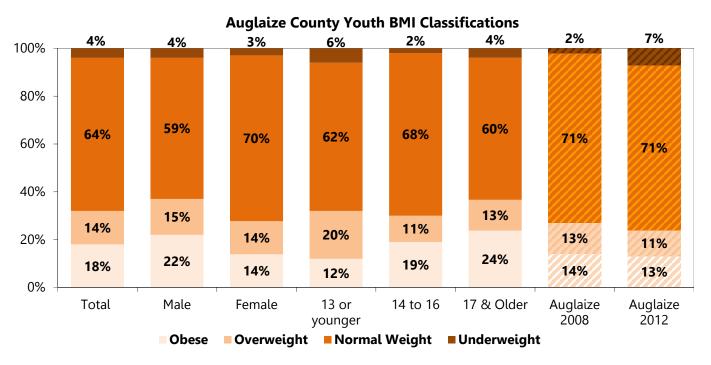
PARENTING

Two-thirds (66%) of parents discussed a career plan/post-secondary education with their 10-to-17 year-old in the past year. About nine out of ten (92%) of parents reported their child had received all recommended immunizations.

Data Summary | Youth Health

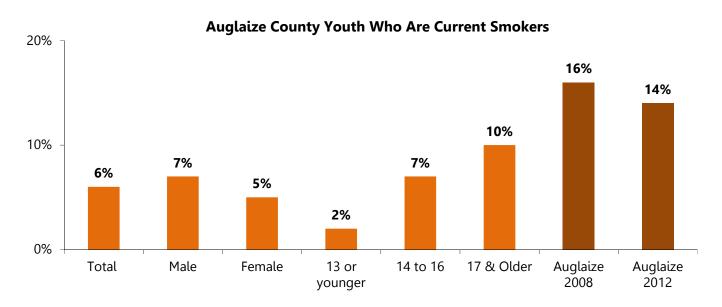
YOUTH WEIGHT STATUS

The health assessment identified that 18% of Auglaize County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 31% of Auglaize County youth reported that they were slightly or very overweight. Almost three-quarters (73%) of youth exercised for 60 minutes on 3 or more days per week.



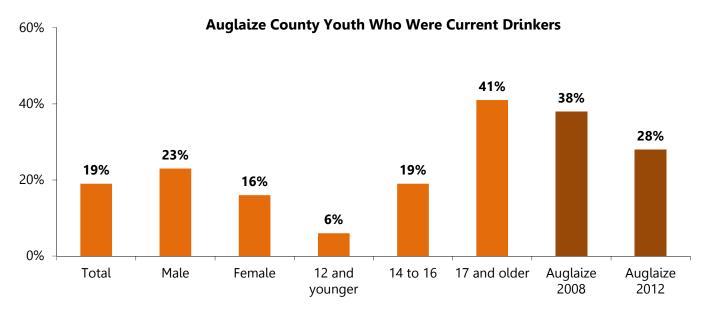
YOUTH TOBACCO USE

The health assessment identified that 6% of Auglaize County youth were current smokers, increasing to 10% of those ages 17 and older. Fourteen percent (14%) of those who had smoked a whole cigarette did so at 10 years old or younger. Two-thirds (66%) of youth who smoked in the past year had tried to quit smoking.



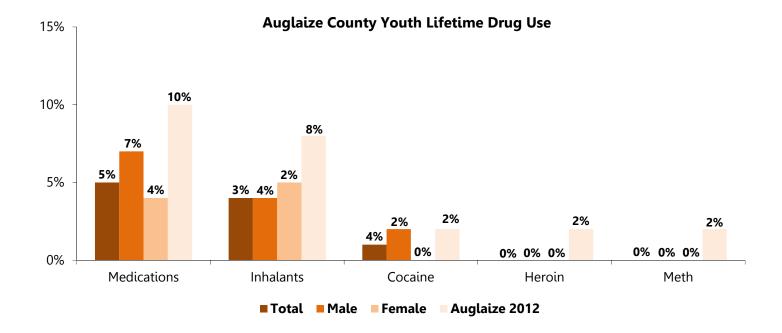
YOUTH ALCOHOL USE

Almost two-fifths (38%) of Auglaize County youth had drank at least one drink of alcohol in their life, increasing to 70% of youth seventeen and older. Almost one-fifth (19%) of youth had at least one drink in the past 30 days, defining them a current drinker. Of those who drank, 61% were defined as binge drinkers, increasing to 70% of males.



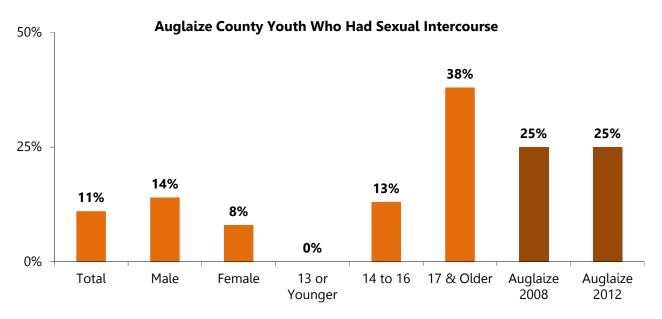
YOUTH DRUG USE

In 2017, 5% of Auglaize County youth had used marijuana at least once in the past 30 days, increasing to 8% of those ages 14-16. Five percent (5%) of youth used medications that were not prescribed for them or took more than prescribed to get high at some time in their life.



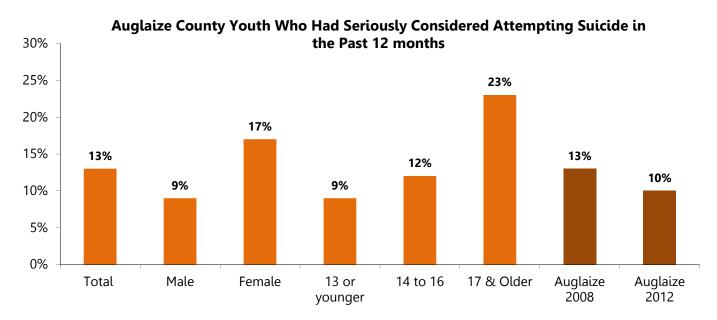
YOUTH SEXUAL BEHAVIOR

Disclaimer: Two out of five Auglaize County school districts did not ask sexual behavior questions. Please use data with caution. In 2017, 11% of Auglaize County youth have had sexual intercourse. Fourteen percent (14%) of sexually active youth had 4 or more sexual partners. Seven percent (7%) of youth were engaging in intercourse without a reliable method of protection, and 24% reported they were unsure if they used a reliable method. Sixteen percent (16%) of youth had not been taught about pregnancy prevention, sexually transmitted diseases, HIV, AIDS, or the use of condoms.



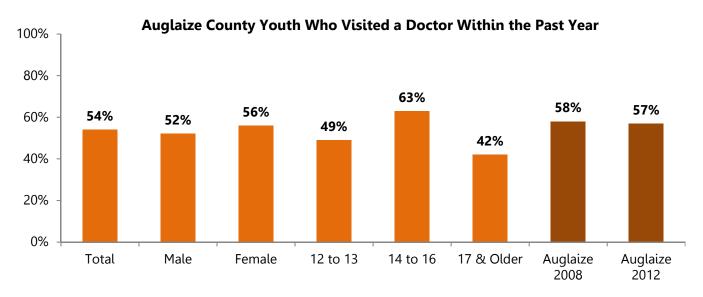
YOUTH MENTAL HEALTH

The health assessment results indicated that 13% of Auglaize County youth had seriously considered attempting suicide in the past year; 4% attempted suicide in the past year. One-quarter (25%) of youth who felt depressed or suicidal reported it would be very unlikely for them to seek help.



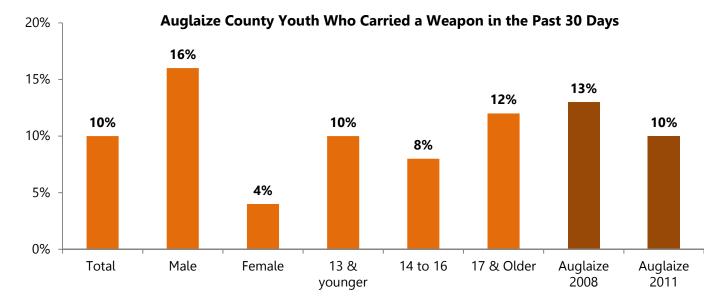
YOUTH SOCIAL DETERMINANTS OF HEALTH

Nearly one-quarter (24%) of youth had three or more adverse childhood experiences (ACEs). Twenty-four percent (24%) of Auglaize County youth drivers had texted while driving in the past 30 days. More than half of youth (57%) always wore a seatbelt when riding in a car driven by someone else.



YOUTH VIOLENCE

One-tenth (10%) of Auglaize County youth carried a weapon (such as a gun, knife or club) in the past month. About one-fifth (21%) of youth had been involved in a physical fight, increasing to 29% of males. Nearly half (46%) of youth had been bullied in the past year.



Adult Trend Summary

Adult Variables	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Health Statu	s				
Rated health as excellent or very good	54%	53%	50%	52%	52%
Rated general health as fair or poor	11%	11%	11%	17%	16%
Rated their mental health as not good on four or more days in the previous month	19%	20%	27%	N/A	N/A
Average days that physical health not good in past month	N/A	2.8	4.3	4.0*	3.8*
Average days that mental health not good in past month	N/A	2.9	4.1	4.3*	3.7*
Average days that poor physical or mental health kept them from doing their usual activities in past month	N/A	2.0	2.8	N/A	N/A
Healthcare Coverage, Access	s, and Utiliza	ition			
Uninsured	6%	12%	9%	8%	11%
Had at least one person they thought of as their personal doctor or health care provider	77%	77%	92%	82%	79%
Visited a doctor for a routine checkup in the past year	45%	52%	59%	72%	70%
Arthritis, Asthma, &	Diabetes				
Has been diagnosed with diabetes	8%	11%	11%	11%	10%
Has been diagnosed with arthritis	27%	38%	36%	28%	25%
Has been diagnosed with asthma 💓	9%	7%	10%	14%	14%
Cardiovascular H	ealth				
Had angina 💓	8%	7%	5%	4%	4%
Had a heart attack 💓	6%	7%	6%	5%	4%
Had a stroke	4%	2%	4%	4%	3%
Has been diagnosed with high blood pressure	35%	41%	37%	34%	31%
Has been diagnosed with high blood cholesterol	30%	37%	34%	37%	36%
Had blood cholesterol checked within the past 5 years	74%	78%	75%	78%	78%
Weight Statu	IS				
Overweight	39%	33%	39%	37%	36%
Obese 💓	33%	38%	39%	30%	30%
Alcohol Consum	ption				
Had at least one alcoholic beverage in past month	57%	51%	61%	53%	54%
Binged in past month (5 or more drinks in a couple of hours on an occasion)	20%	20%	28%	18%	16%
Tobacco Use	•				
Current smoker (currently smoke some or all days)	18%	19%	17%	22%	18%
Former smoker (smoked 100 cigarettes in lifetime & now do not smoke)	22%	23%	27%	24%	25%
Drug Use					
Adults who used marijuana in the past 6 months	1%	6%	6%	N/A	N/A
Adults who misused prescription drugs in the past 6 months N/A - Not available	2%	3%	4%	N/A	N/A

N/A - Not available *2014 BRFSS Data

Indicates alignment with Ohio SHA

Adult Variables	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015		
Preventive Medicine							
Had a flu shot in the past year (age 65 and older)	N/A	65%	67%	58%	61%		
Had a pneumonia vaccine (age 65 and older)	65%	58%	61%	72%	73%		
Had a sigmoidoscopy/colonoscopy in the past 5 years (ages 50 and over)	N/A	50%	52%	68%*	69%*		
Had a clinical breast exam in the past two years (age 40 and older)	71%	77%	66%	N/A	N/A		
Had a mammogram in the past two years (age 40 and older)	64%	71%	64%	72%*	73%*		
Had a pap smear in the past three years	70%	65%	64%	74%*	75%*		
Had a PSA test in within the past year (age 40 & over)	N/A	N/A	48%	43%*	43%*		
Had a digital rectal exam within the past year	24%	24%	12%	N/A	N/A		
Quality of Li	fe						
Limited in some way because of physical, mental or emotional problem	16%	22%	27%	21%	21%		
Mental Health							
Considered attempting suicide in the past year	5%	3%	2%	N/A	N/A		
Oral Health							
Adults who have visited the dentist in the past year	63%	65%	69%	65%*	65%*		

N/A - not available
*2014 BFRSS Data
Indicates alignment with Ohio SHA

Youth Trend Summary

Youth Variables	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
W	/eight Cont	rol				
Obese 💓	14%	13%	18%	21%	13%	14%
Overweight 💓	13%	11%	14%	11%	16%	16%
Described themselves as slightly or very overweight	30%	28%	31%	31%	28%	32%
Exercised to lose weight	N/A	28%	43%	48%	N/A	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight	N/A	8%	28%	32%	N/A	N/A
Went without eating for 24 hours or more	11%	2%	3%	4%	10%	13%*
Took diet pills, powders, or liquids without a doctor's advice	5%	1%	1%	2%	5%	5%*
Vomited or took laxatives	3%	0%	1%	1%	5%	4%*
Ate 1 to 4 servings of fruits and vegetables per day	N/A	81%	79%	82%	N/A	N/A
Physically active at least 60 minutes per day on every day in past week	N/A	69%	25%	25%	26%	27%
Physically active at least 60 minutes per day on 5 or more days in past week	N/A	49%	48%	49%	48%	49%
Did not participate in at least 60 minutes of physical activity on any day in past week	N/A	12%	10%	9%	13%	14%
Unintention	nal Injuries	and Violen	ce		T	
Always wore a seatbelt	39%	39%	57%	60%	92%	94%
Rarely or never wore a seatbelt	11%	14%	6%	4%	8%	6%
Carried a weapon in past month	13%	10%	10%	9%	14%	16%
Carried a weapon on school property in past month	3%	2%	1%	1%	N/A	4%
Been in a physical fight in past year	25%	23%	21%	19%	20%	23%
Threatened or injured with a weapon on school property in past year	4%	5%	3%	3%	N/A	6%
Did not go to school because felt unsafe	1%	3%	3%	2%	5%	6%
Electronically/cyber bullied in past year	8%	14%	12%	12%	15%	16%
Bullied in past year	56%	45%	46%	46%	N/A	N/A
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year	6%	8%	2%	3%	N/A	10%
	1ental Heal	th				
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	21%	20%	24%	27%	26%	30%
Youth who had seriously considered attempting suicide in the past year	13%	10%	13%	17%	14%	18%
Youth who had made a plan to attempt suicide	N/A	N/A	10%	12%	11%	15%
Youth who had attempted suicide in the past year	6%	4%	4%	4%	6%	9%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse N/A - Not Available	N/A	N/A	5%	6%	1%	3%

N/A – Not Available

*Comparative YRBS data for U.S. is 2013 Indicates alignment with Ohio SHA

Youth Variables	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)		
Alcol	nol Consum	ption						
Ever had at least one drink of alcohol in lifetime	60%	58%	38%	53%	71%**	63%		
Used alcohol during past month	38%	28%	19%	28%	30%	33%		
Binged during past month (5 or more drinks in a couple of hours on an occasion)	26%	18%	12%	18%	16%	18%		
Drank for the first time before age 13 (of all youth)	20%	16%	9%	7%	13%	17%		
Rode with someone who was drinking in past month	23%	18%	16%	12%	17%	20%		
Drank and drove (of youth drivers)	8%	7%	2%	2%	4%	8%		
Tobacco Use								
Ever tried cigarettes	30%	29%	21%	31%	52%*	32%		
Current smokers	16%	14%	6%	8%	15%	11%		
Smoked cigarettes on 20 or more days during the past month (of all youth)	7%	5%	1%	2%	7%	3%		
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	10%	7%	4%	5%	14%*	7%		
Tried to quit smoking (of youth who smoked in the past year)	40%	47%	66%	71%	56%*	45%		
Sex	ual Behavio	r***						
Ever had sexual intercourse	25%	25%	11%	20%	43%	41%		
Used a condom at last intercourse	61%	66%	31%	35%	51%	57%		
Used birth control pills at last intercourse	33%	28%	21%	23%	24%	18%		
Had four or more sexual partners (of all youth)	5%	7%	2%	3%	12%	12%		
Had sexual intercourse before the age 13 (of all youth)	3%	3%	1%	1%	4%	4%		
Did not use any method to prevent pregnancy during last sexual intercourse	17%	16%	7%	8%	12%	14%		
	Drug Use							
Used marijuana in the past month	8%	11%	5%	7%	21%	22%		
Used methamphetamines in their lifetime	1%	2%	0%	0%	N/A	3%		
Used cocaine in their lifetime	3%	2%	1%	1%	4%	5%		
Used heroin in their lifetime	2%	2%	0%	0%	2%	2%		
Used inhalants in their lifetime	9%	8%	4%	5%	9%	7%		
Used ecstasy/MDMA/Molly in their lifetime	N/A	2%	1%	2%	N/A	5%		
Ever misused medications	9%	10%	5%	7%	N/A	N/A		
	Oral Health		T					
Visited a dentist for a check-up within the past year	77%	77%	74%	76%	75%	74%		

N/A – Not Available

*Comparative YRBS data for U.S. is 2013

**Comparative YRBS data for Ohio is 2011

***Two out of five participating Auglaize County school districts did not ask sexual behavior questions. Please use data with caution.

Indicates alignment with Ohio SHA

Healthcare Access: Healthcare Coverage

Key Findings

The health assessment identified that 9% of Auglaize County adults were without healthcare coverage. Those most likely to be uninsured were adults under the age of 30 and those with an income level over \$25,000. In Auglaize County, 8.9% of residents live below the poverty level (Source: U.S. Census, American Community Survey 5 Year Estimate, 2011-2015).

Health Coverage

- In 2017, 91% Auglaize County adults had healthcare coverage.
 - In the past year, 9% of adults were uninsured, increasing to 12% of those with incomes more than \$25,000 and 18% of those under the age of 30. The 2015 BRFSS reported uninsured prevalence rates as 8% for Ohio and 11% for the U.S.
- Thirteen percent (13%) of adults with children did not have healthcare coverage, compared to 8% of those who did not have children living in their household.

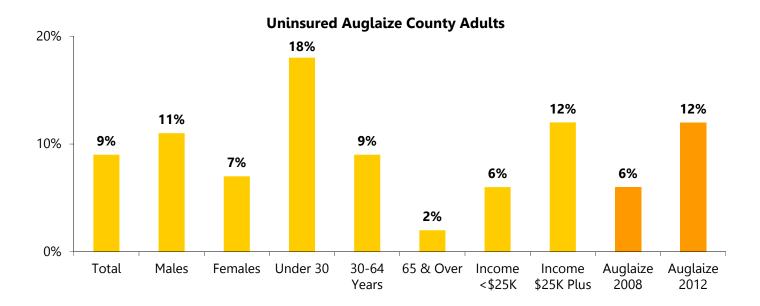
9% of Auglaize County adults were uninsured.

- The following types of healthcare coverage were used: employer (47%); Medicare (20%); someone else's employer (14%); Medicaid or medical assistance (5%); self-paid plan (5%); multiple, including private sources (4%); multiple, including government sources (2%); Health Insurance Marketplace (2%); and military or VA (<1%).
- Auglaize County adults ages 65 and older were enrolled in the following: Medicare (70%), Medicare Part D drug program (39%), and Medicare Advantage plan (21%).
- Auglaize County adult healthcare coverage includes the following: medical (93%), prescription coverage (86%), preventive health (74%), outpatient therapy (72%), immunizations (68%), dental (59%), vision (57%), mental health (52%), durable medical equipment (39%), alcohol and drug treatment (34%), home care (30%), skilled nursing/assisted living (29%), hospice (24%), and transportation (12%).
- The top reasons uninsured adults gave for being without healthcare coverage were:
 - 1. They lost their job or changed employers (58%)
 - 2. They could not afford to pay the premiums (37%)

^{*}Percentages do not equal 100% due to multiple responses

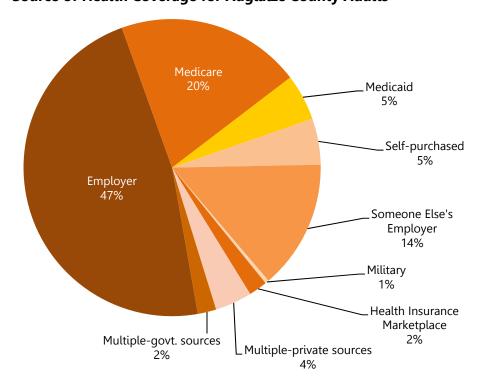
Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Uninsured	6%	12%	9%	8%	11%

The following graph shows the percentages of Auglaize County adults who were uninsured. Examples of how to interpret the information in the graph include: 9% of all Auglaize County adults were uninsured: 6% of adults with incomes less than \$25,000 and 18% of those under age 30. The pie chart shows sources of Auglaize County adults' healthcare coverage.



6% of Auglaize County adults with incomes less than \$25,000 were uninsured.

Source of Health Coverage for Auglaize County Adults



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

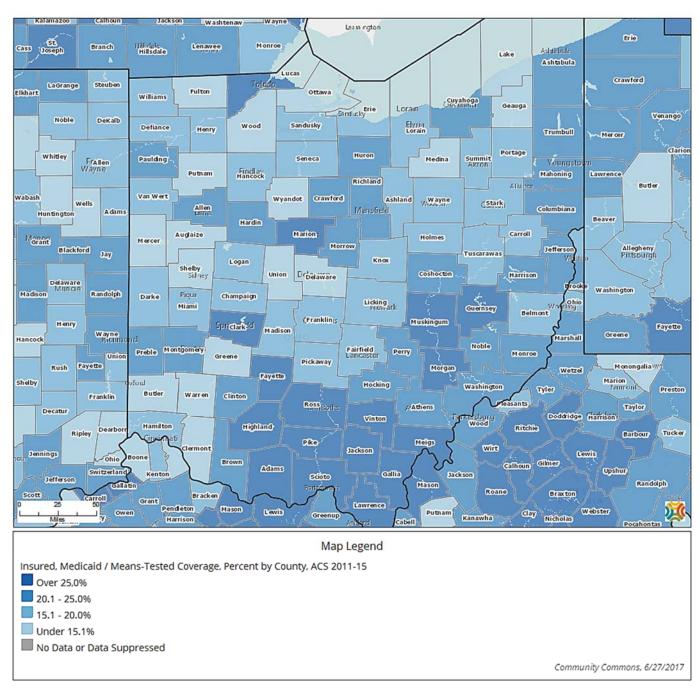
Health Coverage Includes:	Yes	No	Don't Know
Medical	93%	1%	6%
Prescription Coverage	86%	6%	8%
Preventive Health	74%	4%	22%
Outpatient Therapy	72%	3%	25%
Immunizations	68%	5%	27%
Dental	59%	34%	7%
Vision	57%	32%	11%
Mental Health	52%	2%	45%
Durable Medical Equipment	39%	6%	55%
Alcohol and Drug Treatment	34%	8%	58%
Home Care	30%	8%	62%
Skilled Nursing/Assisted Living	29%	6%	65%
Hospice	24%	7%	69%
Transportation	12%	19%	69%

Healthy People 2020 Access to Health Services (AHS)

Objective	Auglaize County 2017	Ohio 2015	U.S. 2015*	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health insurance	80% age 20-24 79% age 25-34 95% age 35-44 93% age 45-54 90% age 55-64	84% age 18-24 88% age 25-34 89% age 35-44 93% age 45-54 93% age 55-64	76% age 18-24 74% age 25-34 80% age 35-44 84% age 45-54 87% age 55-64	100%

Note: U.S. baseline is age-adjusted to the 2000 population standard Sources: Healthy People 2020 Objectives, 2015 Ohio BRFSS, 2015 BRFSS, 2017 Auglaize County Health Assessment *2014 BRFSS Data. The 2015 U.S. BRFSS is not able to be broken down by age.

Insured, Medicaid/Means-Tested coverage, Percent by Tract, ACS 2011-2015



(Source: American Community Survey, 2011-2015, 5 Year Estimates, as compiled by Community Commons)

Healthcare Access: Access and Utilization

Key Findings

The 2017 health assessment identified that 59% of Auglaize County adults had visited a doctor for a routine checkup in the past year. Seventy-one percent (71%) of adults went outside of Auglaize County for healthcare services in the past year.

Healthcare Access

- Nearly three-fifths (59%) of Auglaize County adults visited a doctor for a routine checkup in the past year, increasing to 75% of those over the age of 65.
- Adults with healthcare coverage were more likely to have visited a doctor for a routine checkup in the past year (60%), compared to 51% of those without healthcare coverage.
- Reasons for not receiving medical care in the past 12 months included: no need to go (24%), cost/no insurance (5%), wasn't open when they could get there (1%), too long of a wait for an appointment (1%), distance (1%), provider did not take their insurance (1%), no childcare (<1%), too embarrassed to seek help (<1%), and other problems that prevented them from getting medical care (2%).
- Adults visited the following places for healthcare services or advice: doctor's office (64%); multiple places, including a doctor's office (16%); Internet (5%); family and friends (4%); urgent care center (3%); multiple places, not including a doctor's office (1%); Department of Veteran's Affairs (VA) (1%); chiropractor (1%); alternative therapies (<1%); telemedicine (<1%); hospital emergency room (<1%); public health clinic or community health center (<1%); and some other kind of place (<1%). Four percent (4%) of adults indicated they had no usual place for healthcare services.
- Seventy-one percent (71%) of adults indicated they had a usual source of medical care. Reasons for not having a usual source of medical care included: had not needed a doctor (12%), had two or more usual places (7%), cost (3%), previous doctor unavailable/moved (2%), no insurance (1%), not accepting Medicare or Medicaid/Health Care Exchange (1%), did not know where to go (<1%), do not like/trust/ believe in doctors (<1%), and other reasons (3%).
- The following might prevent Auglaize County adults from seeing a doctor if they were sick, injured, or needed some type of health care: cost (24%); difficult to get an appointment (6%); doctor would not take their insurance (6%); hours not convenient (5%); could not get time off work (5%); worried they might find something wrong (5%); frightened of the procedure or doctor (3%); difficult to find/no transportation (2%); could not find childcare (1%); do not trust or believe doctors (1%); and some other reason (1%).
- Adults traveled to the following locations for their healthcare needs outside of Auglaize County: Allen County (48%), Mercer County (14%), Shelby County (10%), Van Wert County (1%), and somewhere else (14%).

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Had at least one person they thought of as their personal doctor or healthcare provider	77%	77%	92%	82%	79%
Visited a doctor for a routine checkup in the past year	45%	52%	59%	72%	70%

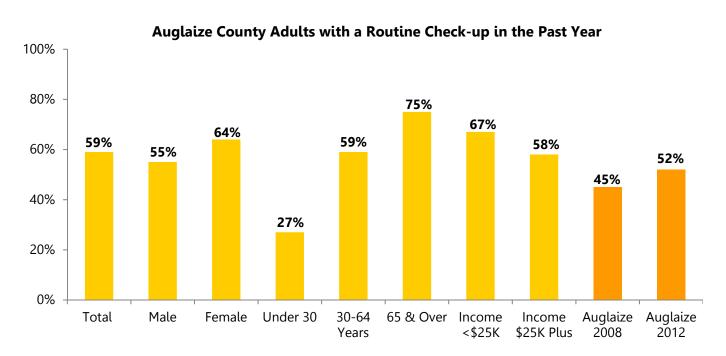
Availability of Services

Auglaize County adults reported they had looked for the following programs for themselves or a loved one:

Auglaize County Adults Able to Access Assistance Programs/Services

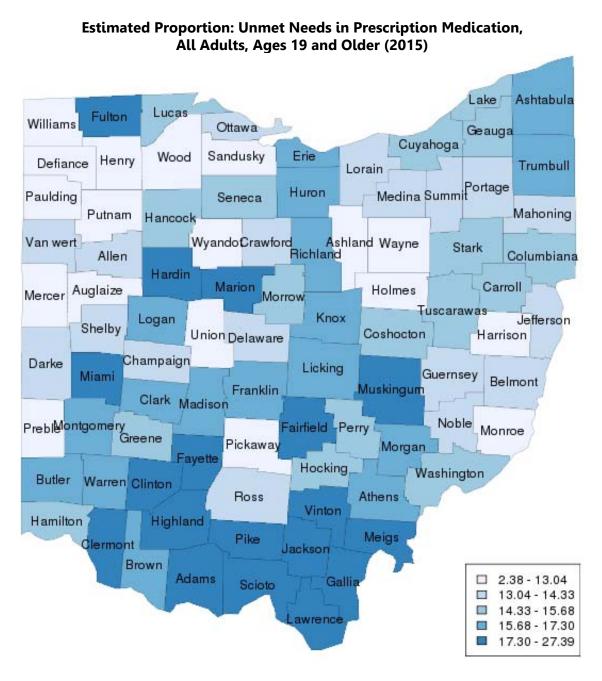
Types of Programs (% of all adults who looked for the programs)	Auglaize County adults who have looked but have <u>NOT</u> found a specific program	Auglaize County adults who have looked and have found a specific program
Depression or Anxiety (12% of all adults looked)	10%	90%
Weight Problem (9% of all adults looked)	32%	68%
Disability (5% of all adults looked)	8%	92%
Elderly Care (4% of all adults looked)	22%	78%
End-of-Life/Hospice Care (3% of all adults looked)	12%	88%
Marital/Family Problems (3% of all adults looked)	12%	88%
Tobacco Cessation (2% of all adults looked)	0%	100%
Alcohol Abuse (1% of all adults looked)	0%	100%

The following graph shows the percentage of Auglaize County adults who had a routine check-up in the past year. Examples of how to interpret the information on the first graph include: 59% of all Auglaize County adults have had a routine check-up in the past year, including 55% of males, 64% of females and 75% of those 65 years and older.



The following map shows the estimated proportion of all adults, ages 19 years and older, with unmet needs in prescription medication.

- Eleven percent (11%) of Auglaize County adults, ages 19 years and older, had unmet needs in prescription medication.
- Fifteen percent (15%) of Ohio adults, ages 19 years and older, had unmet needs in prescription medication.



Source: Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015

Healthcare Access: Preventive Medicine

Key Findings

More than three-fifths (61%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. More than half (52%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.

Preventive Medicine

- Nearly half (46%) of Auglaize County adults had a flu vaccine during the past 12 months.
- Sixty-seven percent (67%) of Auglaize County adults ages 65 and over had a flu vaccine in the past 12 months. The 2015 BRFSS reported that 58% of Ohio and 61% of U.S. adults ages 65 and over had a flu vaccine in the past year.
- Auglaize County adults received their last flu shot from the following places: workplace (19%); doctor's office/health maintenance organization (15%); store or pharmacy (15%); health department (2%); a school (2%); another type of clinic or health center (2%); hospital (2%); and some other place (1%).
- Nearly one-quarter (24%) of adults have had a pneumonia shot in their life, increasing to 61% of those ages 65 and over. The 2015 BRFSS reported that 72% of Ohio and 73% of U.S. adults ages 65 and over had a pneumonia shot in their life.
- Auglaize County adults have had the following vaccines: tetanus booster (including Tdap) in the past 10 years (62%); MMR in their lifetime (60%); chicken pox vaccine in their lifetime (39%); pertussis vaccine in the past 10 years (17%); Zoster (shingles) vaccine in their lifetime (14%); and human papillomavirus (HPV) vaccine in their lifetime (9%).

Preventive Health Screenings and Exams

- More than half (52%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- Nearly one-third (31%) of adults had been screened by a doctor or other health professional for skin cancer.
- In the past year, 48% of Auglaize County women ages 40 and over have had a mammogram.
- In the past year, more than two-fifths (43%) of men ages 50 and over have had a PSA test.

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Had a pneumonia vaccination (ages 65 and over)	65%	58%	61%	72%	73%
Had a flu vaccine in the past year (ages 65 and over)	N/A	65%	67%	58%	61%
Had a sigmoidoscopy/colonoscopy in the past 5 years (ages 50 and over)	N/A	58%	52%	68%*	69%*

N/A - Not Available *2014 BRFSS data

Auglaize County Adult Health Screening Results

General Screening Results	Total Sample
Diagnosed with High Blood Pressure	37%
Diagnosed with High Blood Cholesterol	34%
Diagnosed with Diabetes	11%
Survived a Heart Attack	6%
Survived a Stroke	4%

^{*}Percentages based on all Auglaize County adults surveyed

Healthy People 2020

Immunization and Infectious Diseases (IID)

Objective	Auglaize County 2017	Ohio 2015	U.S. 2015	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	61%	72%	73%	90%

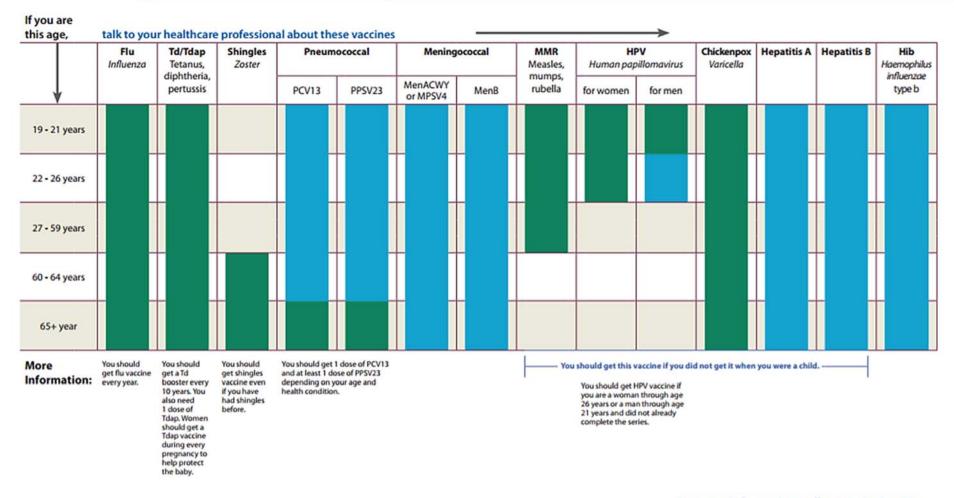
Note: U.S. baseline is age-adjusted to the 2000 population standard Sources: Healthy People 2020 Objectives, 2015 BRFSS, 2017 Auglaize County Health Assessment

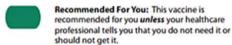
Auglaize County Adults Having Discussed Healthcare Topics With Their Healthcare Professional in the Past 12 Months

Healthcare Topics	Total 2017
Weight Control	34%
Family History	27%
Immunizations	25%
Safe Use of Prescription Medication	23%
Depression, Anxiety, or Emotional Problems	17%
Injury Prevention Such as Safety Belt Use & Helmet Use	13%
Tobacco Use	11%
Family Planning	9%
Safe Use of Opiate-Based Pain Medication	6%
Sexually Transmitted Disease (STDs)	4%
Alcohol Use	4%
Self-Testicular Exams	4%
Illicit Drug Abuse	1%
Domestic Violence	1%

INFORMATION FOR ADULT PATIENTS

2017 Recommended Immunizations for Adults: By Age





May Be Recommended For You: This vaccine is recommended for you if you have certain risk factors due to your health condition or other. Talk to your healthcare professional to see if you need this vaccine.

If you are traveling outside the United States, you may need additional vaccines.

Ask your healthcare professional about which vaccines you may need at least 6 weeks before you travel.

For more information, call 1-800-CDC-INFO (1-800-232-4636) or visit www.cdc.gov/vaccines



Healthcare Access: Women's Health

Key Findings

In 2017, nearly half (48%) of Auglaize County women over the age of 40 reported having a mammogram in the past year. Sixty percent (60%) of Auglaize County women ages 19 and over had a clinical breast exam and 39% had a Pap smear to detect cancer of the cervix in the past year. Nearly half (46%) were obese, 38% had high blood pressure, 32% had high blood cholesterol, and 18% were identified as smokers, known risk factors for cardiovascular diseases.

Women's Health Screenings

- In 2017, 67% of women had a mammogram at some time and one-third (33%) had this screening in the past year.
- Nearly half (48%) of women ages 40 and over had a mammogram in the past year and 64% had one in the past two years. The 2014 BRFSS reported that 72% of women 40 and over in Ohio and 73% in the U.S. had a mammogram in the past two years.

Auglaize County Female Leading Causes of Death, 2013 – 2015

- 1. Heart Diseases (25% of all deaths)
- 2. Cancers (20%)
- 3. Stroke (7%)
- 4. Chronic Lower Respiratory Diseases (5%)
- 5. Alzheimer's disease (4%)

Source: CDC Wonder, 2013-2015

Ohio Female Leading Causes of Death, 2013 - 2015

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

Source: CDC Wonder, 2013-2015

- Most (94%) Auglaize County women have had a clinical breast exam at some time in their life, and 60% had one within the past year. Almost two-thirds (66%) of women ages 40 and over had a clinical breast exam in the past two years.
- This assessment has identified that 89% of Auglaize County women have had a Pap smear and 39% reported having had the exam in the past year. 64% of women had a Pap smear in the past three years. The 2014 BRFSS indicated that 74% of Ohio and 75% of U.S. women had a Pap smear in the past three years.

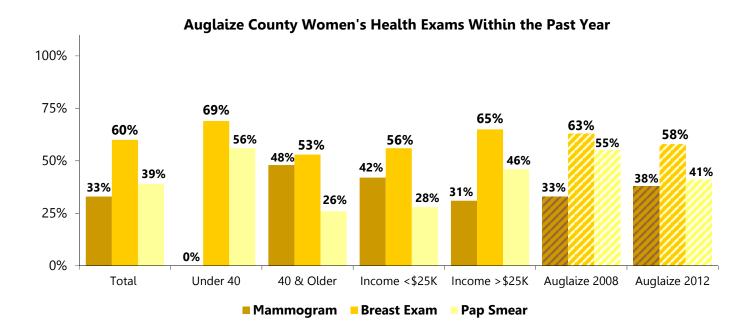
Women's Health Concerns

- Women used the following as their usual source of services for female health concerns: private gynecologist (61%), general or family physician (27%), community health center (1%), family planning clinic (1%), health department clinic (1%), and some other kind of place (1%). Eight percent (8%) indicated they did not have a usual source of services for female health concerns.
- In 2017, 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.
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Auglaize County, the 2017 health assessment has identified that:
 - 71% of women were overweight or obese (2015 BRFSS reports 61% for Ohio and 59% for U.S.)
 - 38% were diagnosed with high blood pressure (2015 BRFSS reports 31% for Ohio and 30% for U.S.)
 - 32% were diagnosed with high blood cholesterol (2015 BRFSS reports 36% for Ohio and 35% for U.S.)
 - 18% of all women were current smokers (2015 BRFSS reports 20% for Ohio and 15% for U.S.)
 - 9% had been diagnosed with diabetes (2015 BRFSS reports 11% for Ohio and 10% for U.S.)

Pregnancy

- Eighteen percent (18%) of Auglaize County women had been pregnant in the past 5 years.
- During their last pregnancy, Auglaize County women took a multi-vitamin with folic acid during pregnancy (63%), had a prenatal appointment in the first 3 months (63%), took a multi-vitamin with folic acid prepregnancy (52%), had a dental exam (40%), took folic acid during pregnancy (23%), experienced depression (17%), received WIC benefits (15%), took folic acid pre-pregnancy (12%), consumed alcoholic beverages (4%), and used marijuana (4%).

The following graph shows the percentage of Auglaize County female adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 33% of Auglaize County females had a mammogram within the past year, 60% had a clinical breast exam, and 39% had a Pap smear.

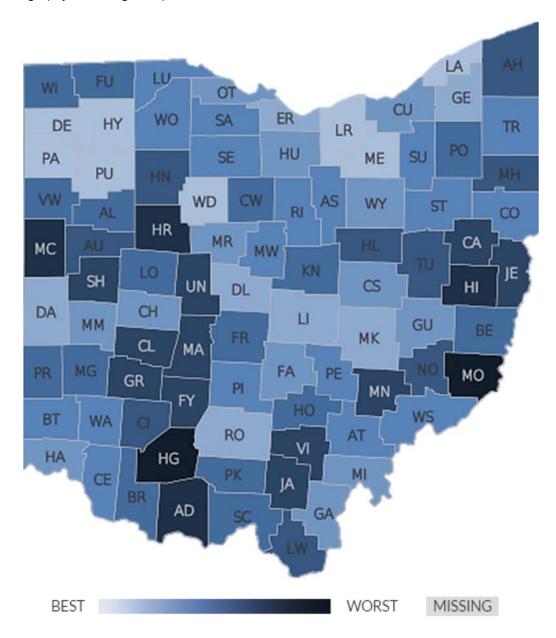


Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2014	U.S. 2014
Had a clinical breast exam in the past two years (age 40 & over)	71%	77%	66%	N/A	N/A
Had a mammogram in the past two years (age 40 & over)	64%	71%	64%	72%	73%
Had a Pap smear in the past three years	70%	65%	64%	74%	75%

N/A – Not Available

The following graph shows the Auglaize County percentage of female Medicare enrollees ages 67-69 that received mammography screening.

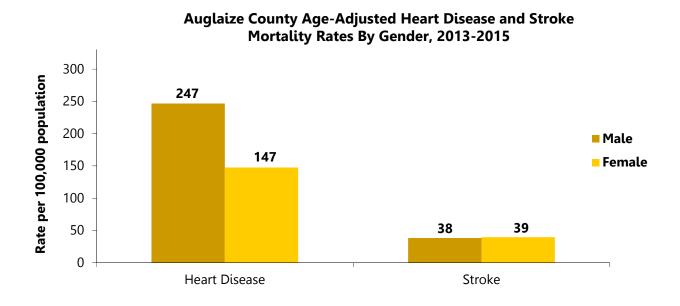
• Fifty-six percent (56%) of Auglaize County female Medicare enrollees ages 67-69 received mammography screening, compared to 61% for Ohio.

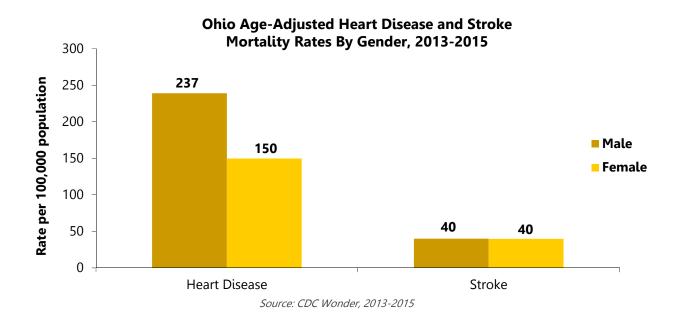


Source: Dartmouth Atlas of Health Care, 2014 as compiled by the 2017 County Health Rankings

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

- From 2013-2015, the Auglaize County and Ohio female age-adjusted mortality rate was lower than the male rate for heart disease and stroke.
- The Auglaize County female heart disease mortality rate was slightly lower than the Ohio female rate from 2013 to 2015.





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

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

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

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

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

Source: Centers for Disease Control and Prevention, What Can I Do to Reduce My Risk of Breast Cancer? Updated April 14, 2016

Healthcare Access: Men's Health

Key Findings

In 2017, 43% of Auglaize County males over the age of 50 had a Prostate-Specific Antigen (PSA) test. More than one-third (36%) of men had been diagnosed with high blood pressure, 35% had high blood cholesterol, and 15% were identified as smokers, which, along with obesity (32%), are known risk factors for cardiovascular diseases.

Men's Health Screenings and Concerns

- Two-fifths (40%) of Auglaize County males had a Prostate-Specific Antigen (PSA) test at some time in their life and 22% had one in the past year.
- Almost three-quarters (73%) of males age 50 and over had a PSA test at some time in their life, and 43% had one in the past year.
- Nearly half (47%) of men had a digital rectal exam in their lifetime and 12% had one in the past year.

Auglaize County Male Leading Causes of Death, 2013 – 2015

- 1. Heart Diseases (29% of all deaths)
- 2. Cancers (24%)
- 3. Accidents, Unintentional Injuries (6%)
- 4. Chronic Lower Respiratory Diseases (5%)
- 5. Stroke (5%)

Source: CDC Wonder, 2013-2015

Ohio Male Leading Causes of Death, 2013 – 2015

- 1. Heart Diseases (25% of all deaths)
- 2. Cancers (23%)
- 3. Accidents, Unintentional Injuries (7%)
- 4. Chronic Lower Respiratory Diseases (6%)
- 5. Stroke (4%)

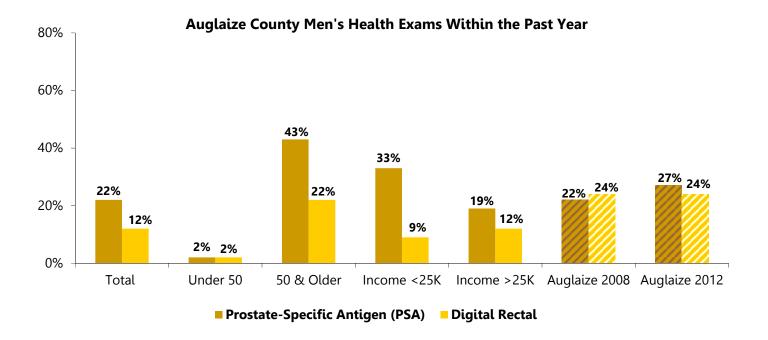
Source: CDC Wonder, 2013-2015

- The health assessment determined that 9% of men had a heart attack and 4% had a stroke at some time in their life
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, and diabetes. In Auglaize County, the 2017 health assessment has identified that:
 - 85% of Auglaize County men were overweight or obese (2015 BRFSS reports 71% for Ohio and 71% for U.S.)
 - 36% were diagnosed with high blood pressure (2015 BRFSS reports 38% for Ohio and 34% for U.S.)
 - 35% were diagnosed with high blood cholesterol (2015 BRFSS reports 38% for Ohio and 38% for U.S.)
 - 15% of all men were current smokers (2015 BRFSS reports 23% for Ohio and 19% for U.S.)
 - 11% had been diagnosed with diabetes (2015 BRFSS reports 11% for Ohio and 11% for U.S.)
- From 2013-2015, the leading cancer deaths for Auglaize County males were lung, colon and rectum, and pancreatic cancers. Statistics from the same period for Ohio males indicated that lung, lymphoid, colon and rectum, and prostate cancers were the leading cancer deaths (Source: CDC Wonder).

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2014	U.S. 2014
Had a PSA test in within the past two years (age 40 & over)	N/A	N/A	48%	43%	43%
Had a digital rectal exam within the past year	24%	24%	12%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Auglaize County male adults that had various health exams in the past year. Examples of how to interpret the information shown on the graph include: 22% of Auglaize County males had a PSA test within the past year, and 12% had a digital rectal exam.



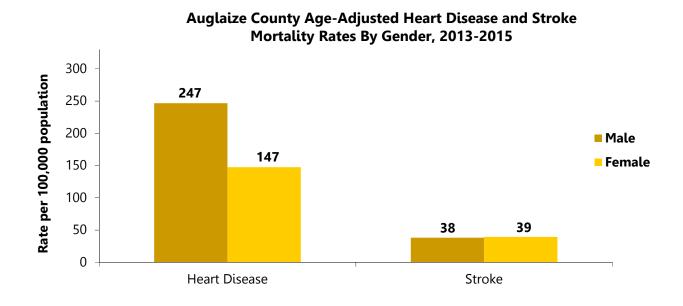
Men's Health Data

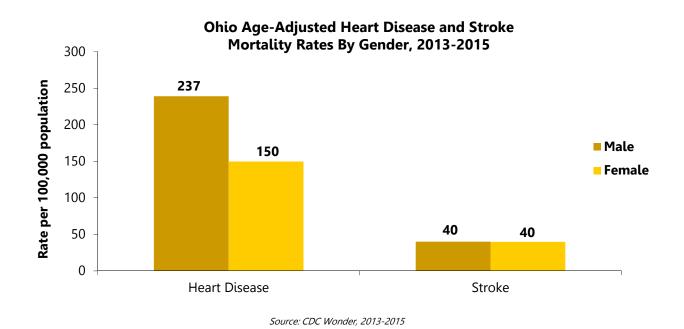
- Approximately 12% of adult males ages 18 years or older reported fair or poor health.
- 17% of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 30% had 5 or more drinks in 1 day at least once in the past year.
- Only 52% of adult males in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- 35% of men 20 years and over are obese.
- There are 12% of males under the age of 65 without healthcare coverage.
- The leading causes of death for males in the United States are heart disease, cancer and accidents (unintentional injuries).

Source: CDC, National Center for Health Statistics, Men's Health, Fast Stats, March 31, 2017

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

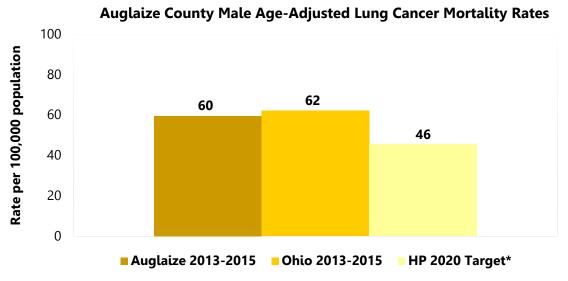
- From 2013-2015, the Auglaize County and Ohio male age-adjusted mortality rate was higher than the female rate for heart disease and stroke.
- The Auglaize County male age-adjusted heart disease mortality rate was higher than the Ohio male rate.





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

• From 2013-2015, the Auglaize County age-adjusted mortality rate for male lung cancer was lower than the Ohio rate but higher than the Healthy People 2020 objective.



Note: The Healthy People 2020 target rates are not gender specific. Source: CDC Wonder 2013-2015 and Healthy People 2020

Prostate Cancer Awareness

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

Source: Center for Disease Control and Prevention, Prostate Cancer Awareness, March 8, 2017

Healthcare Access: Oral Health

Key Findings

The health assessment has determined more than two-thirds (69%) of Auglaize County adults visited a dentist or dental clinic in the past year. The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the past year.

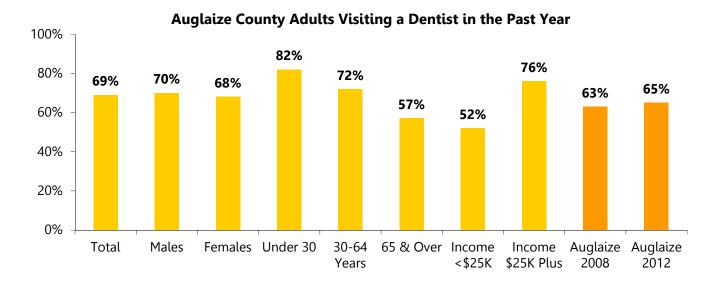
Access to Dental Care

- In the past year, 69% of Auglaize County adults had visited a dentist or dental clinic, decreasing to 52% of those with incomes less than \$25,000.
- The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the past year.
- Nearly four-fifths (79%) of Auglaize County adults with dental insurance had been to the dentist in the past year, compared to 58% of those without dental insurance.
- When asked the main reason for not visiting a dentist in the last year, 24% had no oral health problems/had not thought of it; 23% said cost; 13% had dentures; 12% said fear, apprehension, nervousness, pain, and dislike going; 3% said their dentist did not accept their medical coverage; 3% did not have/know a dentist; 2% said transportation; 1% used the emergency room for dental issues; 1% could not get into a dentist; and 1% could not find a dentist taking new Medicaid patients. Eight percent (8%) of adults selected multiple reasons for not visiting a dentist in the past year.
- Adults reported the following oral health issues: pain (5%), problems with dentures (5%), difficulty eating/chewing (4%), oral bleeding (3%), loose teeth (3%), no teeth (2%), missed work due to mouth pain (1%), and skipped meals due to pain (<1%).

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	70%	5%	11%	11%	1%			
Females	68%	10%	9%	10%	<1%			
Total	69%	7%	10%	11%	<1%			

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2014	U.S. 2014
Adults who have visited the dentist in the past year	63%	65%	69%	65%	65%

The following graph provides information about the frequency of Auglaize County adult dental visits. Examples of how to interpret the information on the first graph include: 69% of Auglaize County adults had been to the dentist in the past year including 82% of those under the age of 30 and 52% of those with incomes less than \$25,000.



Oral Health Basics

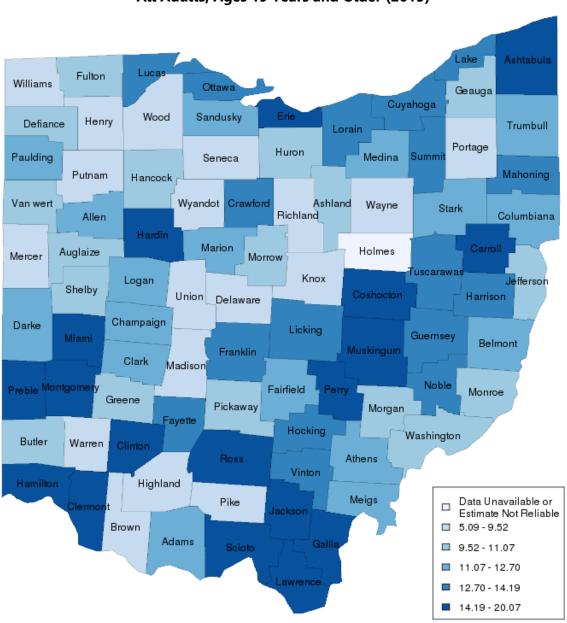
- Oral health affects our ability to speak, smile, eat, and show emotions. It also affects self-esteem, school
 performance, and attendance at work and school. Oral diseases—which range from cavities to gum
 disease to oral cancer—cause pain and disability for millions of Americans. They also cost taxpayers
 billions of dollars each year.
- Cavities (also called tooth decay) are one of the most common chronic conditions in the United States. By age 34, more than 80% of people have had at least one cavity. More than 40% of adults have felt pain in their mouth in the last year. On average, the nation spends more than \$113 billion a year on costs related to dental care. More than \$6 billion of productivity is lost each year because people miss work to get dental care.
- Oral health has been linked with other chronic diseases, like diabetes and heart disease. It is also linked with risk behaviors like using tobacco and eating and drinking foods and beverages high in sugar.
- Public health strategies such as community water fluoridation and school dental sealant programs have been proven to save money and prevent cavities.

Source: Centers for Disease Control and Prevention, Division of Oral Health, National Center for Chronic Disease Prevention and Health Promotion, October 8, 2015

The following map shows the estimated proportion of all adults, ages 19 years and older, with unmet needs in dental care.

- One-tenth (10%) of Auglaize County adults, ages 19 years and older, had unmet needs in dental care.
- Thirteen percent (13%) of Ohio adults, ages 19 years and older, had unmet needs in dental care.

Estimated Proportion: Unmet Needs in Dental Care, All Adults, Ages 19 Years and Older (2015)



Source: Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015

Health Behaviors: Health Status Perceptions

Key Findings

In 2017, half (50%) of the Auglaize County adults rated their health status as excellent or very good. Conversely, 11% of adults described their health as fair or poor, increasing to 22% of those with incomes less than \$25,000.

Adults Who Rated General Health Status Excellent or Very Good

- Auglaize County 50% (2017)
- Ohio 52% (2015)
- U.S. 52% (2015)

Source: 2015 BRFSS for Ohio and U.S.

General Health Status

- Half (50%) of Auglaize County adults rated their health as excellent or very good. Auglaize County adults with higher incomes (57%) were most likely to rate their health as excellent or very good, compared to 25% of those with incomes less than \$25,000.
- Eleven percent (11%) of adults rated their health as fair or poor. The 2015 BRFSS has identified that 17% of Ohio and 16% of U.S. adults self-reported their health as fair or poor.
- Auglaize County adults were most likely to rate their health as fair or poor if they:
 - Had been diagnosed with diabetes (40%)
 - Had an annual household income under \$25,000 (22%)
 - Were 65 years of age or older (20%)
 - Were widowed or divorced (19%)
 - Had high blood cholesterol (21%) or high blood pressure (18%)

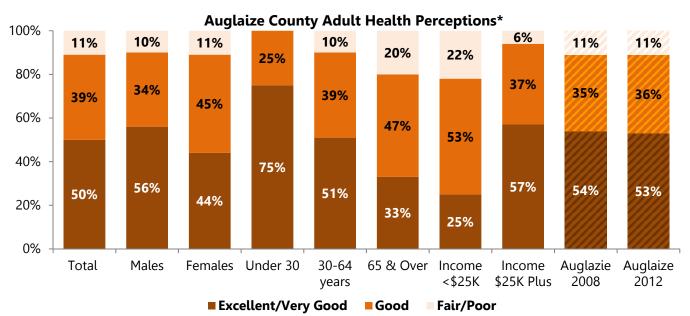
Physical Health Status

- More than one-fifth (22%) of Auglaize County adults rated their physical health as not good on four or more days in the previous month.
- Auglaize County adults reported their physical health as not good on an average of 4.3 days in the previous month. Ohio and U.S. adults reported their physical health as not good on an average of 4.0 days and 3.8 days, respectively, in the previous month (Source: 2014 BRFSS as compiled by County Health Rankings).
- Auglaize County adults were most likely to rate their physical health as not good if they:
 - Had an annual household income under \$25,000 (39%)
 - Were 65 years of age or older (29%)

Mental Health Status

- More than one-quarter (27%) of Auglaize County adults rated their mental health as not good on four or more days in the previous month.
- Auglaize County adults reported their mental health as not good on an average of 4.1 days in the previous month. Ohio and U.S. adults reported their mental health as not good on an average of 4.3 days and 3.7 days, respectively, in the previous month (Source: 2014 BRFSS as compiled by County Health Rankings).
- One-quarter (25%) of adults reported that poor mental or physical health kept them from doing usual activities such as self-care, work, or recreation.
- Auglaize County adults were most likely to rate their mental health as not good if they:
 - Had an annual household income under \$25,000 (37%)
 - Were female (36%)
 - Were under the age of 30 (33%)

The following graph shows the percentage of Auglaize County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 50% of Auglaize County adults, 75% of those under age 30, and 33% of those ages 65 and older rated their health as excellent or very good. The following 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	59%	16%	6%	3%	12%			
Females	47%	26%	6%	2%	15%			
Total	53%	20%	6%	3%	13%			
	Mental Health Not Good in Past 30 Days*							
Males	67%	13%	5%	2%	10%			
Females	49%	13%	8%	3%	25%			
Total	57%	15%	7%	3%	17%			

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

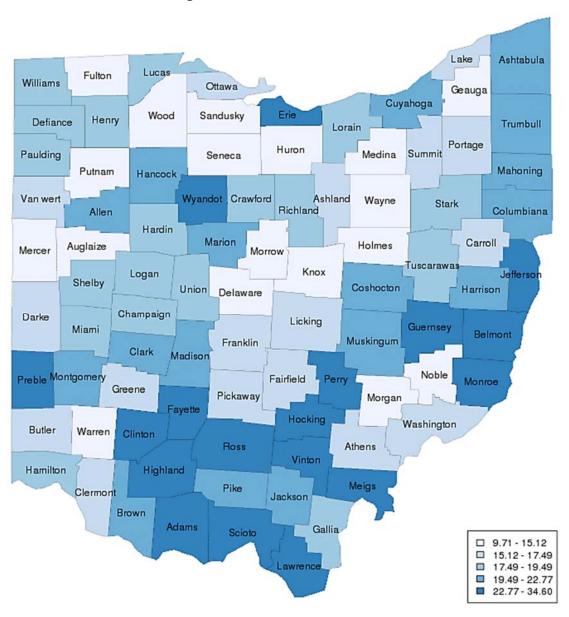
Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Rated health as excellent or very good	54%	53%	50%	52%	52%
Rated health as fair or poor	11%	11%	11%	17%	17%
Rated their mental health as not good on four or more days in the previous month	19%	20%	27%	N/A	N/A
Average days that physical health not good in past month	N/A	2.8	4.3	4.0*	3.8*
Average days that mental health not good in past month	N/A	2.9	4.1	4.3*	3.7*
Average days that poor physical or mental health kept them from doing their usual activities in past month	N/A	2.0	2.8	N/A	N/A

*2014 BRFSS data as compiled by County Health Rankings N/A - Not Available

The following map shows the estimated proportion of all adults, ages 19 years and older, who rated their overall health as fair/poor.

- One out of nine (11%) Auglaize County adults, ages 19 years and older, rated their overall health as fair/poor.
- Eighteen percent (18%) of Ohio adults, ages 19 years and older, rated their overall health as fair/poor (Source: Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015).

Estimated Proportion: Poor/Fair Overall Health, All Adults, Ages 19 Years and Older (2015)



Source for map: Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015

Health Behaviors: Adult Weight Status

Key Findings

The health assessment identified that 78% of Auglaize County adults were overweight or obese based on Body Mass Index (BMI). Nearly two-fifths (39%) of Auglaize County adults were obese. Nearly half (49%) of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week.

Adult Weight Status

- More than three-fourths (78%) of Auglaize County adults were either overweight (39%) or obese (39%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of preventable diseases.
- More than two-fifths (42%) of adults were trying to lose weight, 36% were trying to maintain their current weight or keep from gaining weight, and 1% were trying to gain weight.
- Auglaize County adults did the following to lose weight or keep from gaining weight: ate less food, fewer calories, or foods low in fat (44%); drank more water (43%); exercised (36%); ate a low-carb diet (11%); took diet pills, powders or liquids without a doctor's advice (3%); smoked cigarettes (3%); used a weight loss program (1%); took prescribed medications (1%); went without eating 24 or more hours (1%); participated in a prescribed dietary or fitness program (1%); bariatric surgery (<1%); and health coaching (<1%).

39% of Auglaize County adults are obese.

Physical Activity

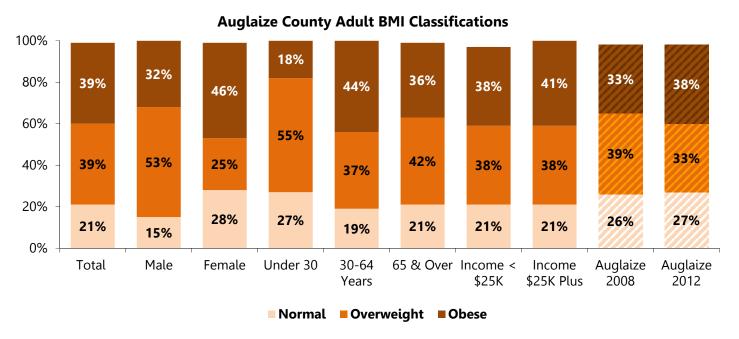
- Nearly half (49%) of adults engaged in some type of physical activity or exercise for at least 30 minutes 3 or more days per week; 27% of adults exercised 5 or more days per week; and 29% of adults were not participating in any physical activity in the past week, including 5% who were unable to exercise.
- The CDC recommends that adults participate in moderate exercise for at least 2 hours and 30 minutes every week or vigorous exercise for at least 1 hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, CDC also recommends muscle-strengthening activities that work all major muscle groups on 2 or more days per week (Source: CDC, Physical Activity for Everyone).
- Reasons for not exercising included the following: time (30%); too tired (23%); laziness (23%), weather (19%); pain or discomfort (18%); did not like to exercise (11%); could not afford a gym membership (9%); no exercise partner (5%), lack of opportunities for those with physical impairments or challenges (5%); no child care (4%); did not know what activities to do (3%); poorly maintained/no sidewalks (3%); no walking, biking trails or parks (2%); no gym available (2%); neighborhood safety (1%); transportation (1%); and doctor advised them not to exercise (<1%).
- Auglaize County adults spent an average of 2.9 hours watching TV, 1.5 hours on their cell phone, 1.3 hours on the computer (outside of work), and 0.3 hours playing video games on an average day of the week.

Nutrition

• Seven percent (7%) of adults ate 5 or more servings of fruits and vegetables per day, and 87% ate between 1 and 4 servings per day. Six percent (6%) of adults ate 0 servings of fruits and vegetables per day because they did not like them (3%), they could not afford them (2%), and they did not have access to them (1%). 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.

- Auglaize County adults reported the following reasons they chose the types of food they ate: taste/enjoyment (67%), cost (51%), ease of preparation/time (46%), healthiness of food (43%), food they were used to (43%), what their family prefers (41%), availability (32%), nutritional content (24%), calorie content (21%), artificial sweetener content (7%), if it is organic (5%), if it is genetically modified (5%), health care provider's advice (5%), if it is gluten free (5%), other food sensitivities (3%), if it is lactose free (3%), and other reasons (2%).
- In a typical week, adults ate out in a restaurant or brought home take-out food at the following frequencies: 1 to 2 meals (60%), 3 to 4 meals (18%), and 5 or more meals (10%). Twelve percent (12%) of adults did not eat out in a restaurant or bring home take-out food in a typical week.

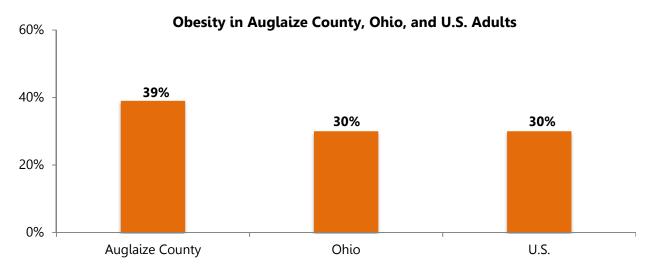
The following graph shows the percentage of Auglaize County adults who are overweight or obese by Body Mass Index (BMI). Examples of how to interpret the information include: 21% of all Auglaize County adults were classified as normal weight, 39% were overweight, and 39% were obese.



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

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Obese	33%	38%	39%	30%	30%
Overweight	39%	33%	39%	37%	36%

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



Source: 2017 Auglaize County Health Assessment and 2015 BRFSS

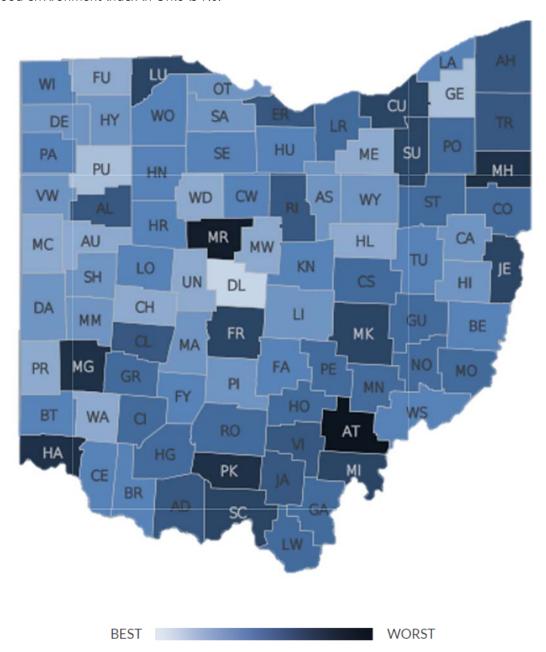
Obesity Facts

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

Source: CDC, Adult Obesity Facts, updated September 1, 2016

The Food Environment Index measures the quality of the food environment in a county on a scale from 0 to 10 (zero being the worst value in the nation, and 10 being the best). The two variables used to determine the measure are: limited access to healthy foods & food insecurity.

- The food environment index in Auglaize County is 8.4.
- The food environment index in Ohio is 7.0.



Source: USDA Food Environment Atlas, as compiled by County Health Rankings 2017

Health Behaviors: Adult Tobacco Use

Key Findings

In 2017, 17% of Auglaize County adults were current smokers and 27% were considered former smokers. Thirty-eight percent (38%) of smokers reported trying to quit in the past year.

In 2017, 17% of Auglaize County adults were current smokers.

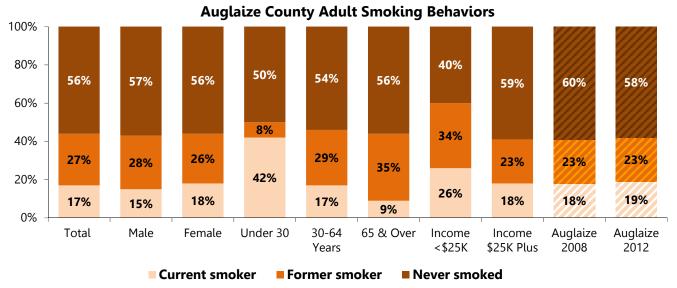
Adult Tobacco Use Behaviors

- The 2017 health assessment identified that nearly one-in-six (17%) Auglaize County adults were current smokers (those who indicated smoking at least 100 cigarettes in their lifetime and currently smoked some or all days). The 2015 BRFSS reported current smoker prevalence rates of 22% for Ohio and 18% for the U.S.
- More than one-quarter (27%) of adults indicated that they were former smokers (smoked 100 cigarettes in their lifetime and now do not smoke). The 2015 BRFSS reported former smoker prevalence rates of 24% for Ohio and 25% of the U.S.
- Auglaize County adult smokers were more likely to:
 - Have rated their overall health as poor (43%)
 - Have been under the age of 30 (42%)
 - Have been divorced (36%)
 - Have incomes less than \$25,000 (26%)
- Auglaize County adults used the following tobacco products in the past year: cigarettes (21%), cigars (5%), ecigarettes (3%), snuff (3%), chewing tobacco (3%), roll-your-own (2%), pouch (2%), Black and Milds (1%), Swishers (1%), pipes (1%), cigarillos (<1%), and little cigars (<1%).
- Thirty-eight percent (38%) of current smokers had stopped smoking for at least one day in the past year because they were trying to guit smoking.
- Auglaize County adults indicated they would support an ordinance to ban smoking/vaping in the following
 places: vehicle with a minor present (62%), parks or ball fields (44%), college/university campuses (42%), multiunit housing (42%), and fairgrounds (38%).

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Current smoker	18%	19%	17%	22%	18%
Former smoker	22%	23%	27%	24%	25%
Tried to quit smoking	60%	35%	38%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Auglaize County adults who used tobacco. Examples of how to interpret the information include: 17% of all Auglaize County adults were current smokers, 27% of all adults were former smokers, and 56% had never smoked.



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

Smoking and Other Health Risks

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

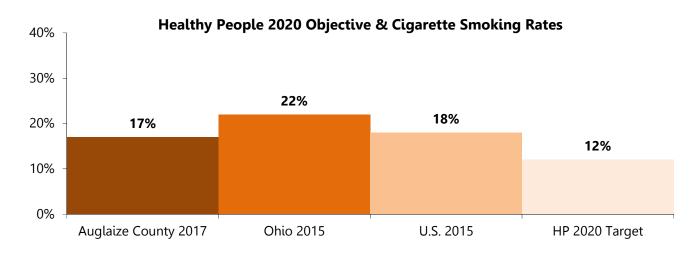
Electronic Cigarettes Use Among Adults: United States, 2014

- Electronic cigarettes (e-cigarettes) are battery-powered products that typically deliver nicotine in the form of an aerosol.
- In 2014, 12.6% of adults had tried e-cigarettes even one time, with use differing by sex, age, and race and Hispanic or Latino origin.
- About 3.7% of adults currently used e-cigarettes, with use differing by age and race and ethnicity.
- Current cigarette smokers and former smokers who quit smoking within the past year were more likely to use ecigarettes than former smokers who quit smoking more than 1 year ago and those who had never smoked.
- Among current cigarette smokers who had tried to quit smoking in the past year, more than half had tried an ecigarette and 20.3% were current e-cigarette users.
- Men were more likely than women to have tried an e-cigarette.
- More than 20% of adults aged 18-24 had tried an e-cigarette, with use declining steadily as age increased.
- In 2014, both American Indian/Native American and white adults were more likely than black, Asian, and Hispanic adults to have ever tried e-cigarettes and to be current e-cigarette users.

(Source: U.S. Department of Health and Human Services, National Center for Health Statistics Data Brief "Electronic Cigarette Use Among Adults, United States, 2014, updated October 2015)

The following graph shows Auglaize 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:

• The Auglaize County adult cigarette smoking rate was lower than the Ohio and U.S. rates and higher than the Healthy People 2020 target objective.

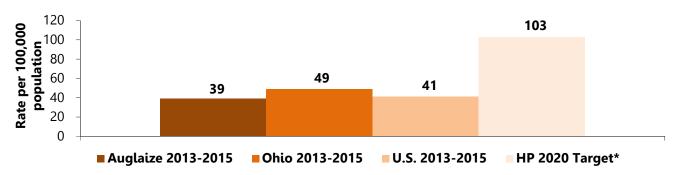


Source: 2017 Auglaize County Health Assessment, 2014 BRFSS and Healthy People 2020

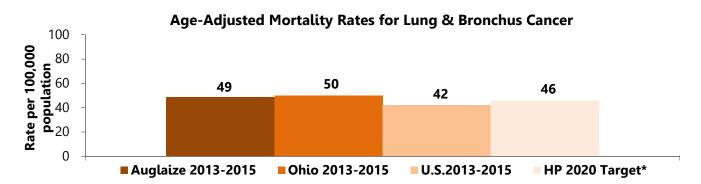
The following graphs show Auglaize County, Ohio, and U.S. age-adjusted mortality rates per 100,000 populations for chronic lower respiratory diseases (formerly COPD) and lung and bronchus cancer in comparison with the Healthy People 2020 objective. Auglaize County age-adjusted mortality rates for lung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

- From 2013-2015, Auglaize County's age-adjusted mortality rate for Chronic Lower Respiratory Disease was lower than the Ohio and U.S. rates, and Healthy People 2020 target objective.
- For the age-adjusted mortality rates for lung and bronchus cancer, Auglaize County rates were higher than U.S. and Healthy People 2020 target but lower than the Ohio rate.
- Disparities existed by gender for Auglaize County lung and bronchus cancer age-adjusted mortality rates. The 2013-2015 Auglaize male rates were substantially higher than the Auglaize female rates.

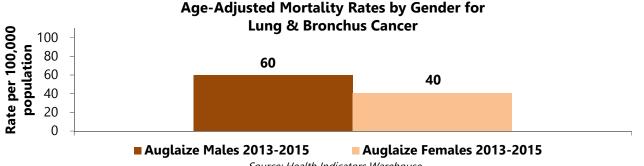
Age-Adjusted Mortality Rates for Chronic Lower Respiratory Diseases (Formerly COPD)



(Source: CDC Wonder and Healthy People 2020) * Healthy People 2020's target rate and the U.S. rate is for adults aged 45 years and older.

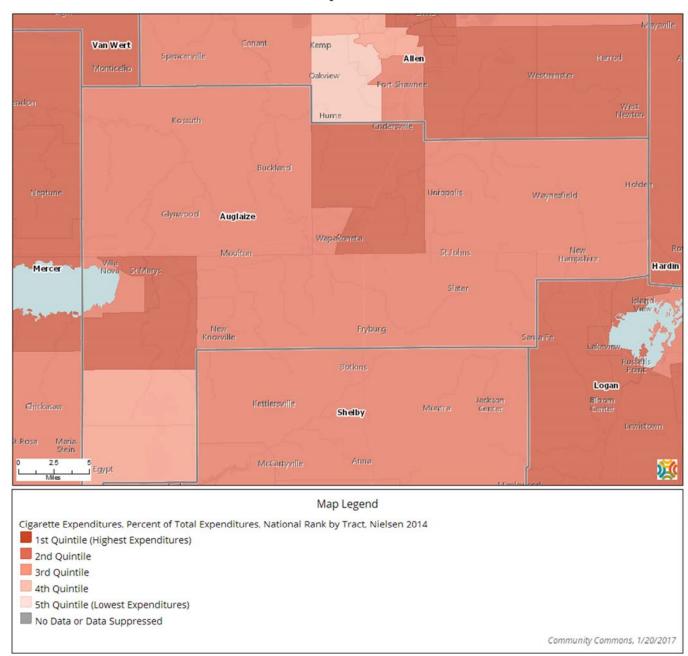


*Healthy People 2020 Target data is for lung cancer only Sources: Healthy People 2020, National Cancer Institute, CDC Wonder



Source: Health Indicators Warehouse

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



Source: Community Commons, updated 1/20/2017

Health Behaviors: Adult Alcohol Use

Key Findings

The health assessment indicated that 61% of Auglaize County adults had at least one alcoholic drink in the past month. Forty-five percent (45%) of those current drinkers were binge drinkers.

61% of Auglaize County adults had at least one alcoholic drink in the past month.

Adult Alcohol Consumption

- Sixty-one percent (61%) of Auglaize County adults had at least one alcoholic drink in the past month, increasing to 73% of those under the age of 30. The 2015 BRFSS reported current drinker prevalence rates of 53% for Ohio and 54% for the U.S.
- Of those who drank, Auglaize County adults drank 4.7 drinks on average, increasing to 9.3 drinks for those under the age of 30.

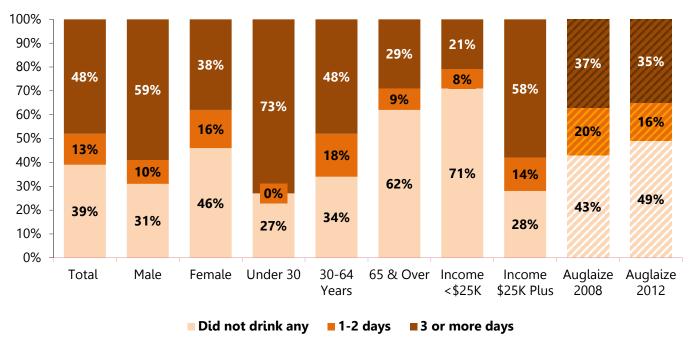
28% of Auglaize County adults were considered binge drinkers

- More than one-quarter (28%) of Auglaize County adults reported they had five or more alcoholic drinks (for males) or 4 or more drinks (for females) on an occasion in the last month and would be considered binge drinkers (the 2015 BRFSS reported binge drinking rates of 18% for Ohio and 16% for the U.S.). Of current drinkers, 45% were considered binge drinkers.
- Six percent (6%) of adults reported driving after having perhaps too much to drink, increasing to 8% of males.
- Auglaize County adults experienced the following in the past six months: drove a vehicle or other equipment after having any alcoholic beverage (11%); drank more than they expected (9%); used prescription drugs while drinking (5%); spent a lot of time drinking (3%); continued to drink despite problems caused by drinking (1%); drank more to get the same effect (1%); gave up other activities to drink (1%); tried to quit or cut down but could not (1%); failed to fulfill duties at work, home, or school (1%); and drank to ease withdrawal symptoms (1%).

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Drank alcohol at least once in past month	57%	51%	61%	53%	54%
Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)	20%	20%	28%	18%	16%

The following graphs show the percentage of Auglaize County adults consuming alcohol and the amount consumed on average. Examples of how to interpret the information shown on the first graph include: 39% of all Auglaize County adults did not drink alcohol including 31% of Auglaize County males and 46% of females.

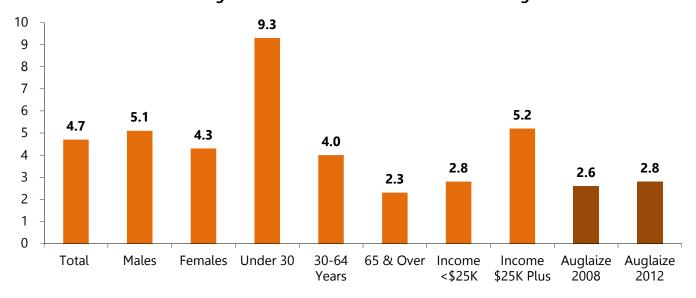




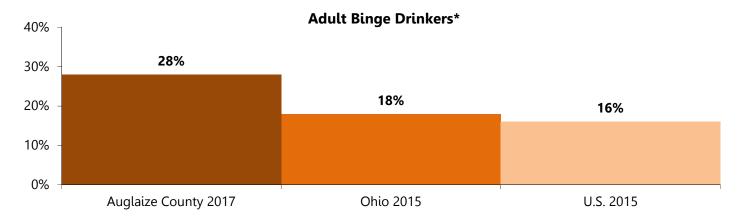
^{*}Percentages may not equal 100% as some respondents answered "don't know"

6% of Auglaize County adults were considered frequent drinkers (drank on an average of three or more days per week).

Adults Average Number of Drinks Consumed Per Drinking Occasion



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



Source: 2014 BRFSS, 2017 Auglaize 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.

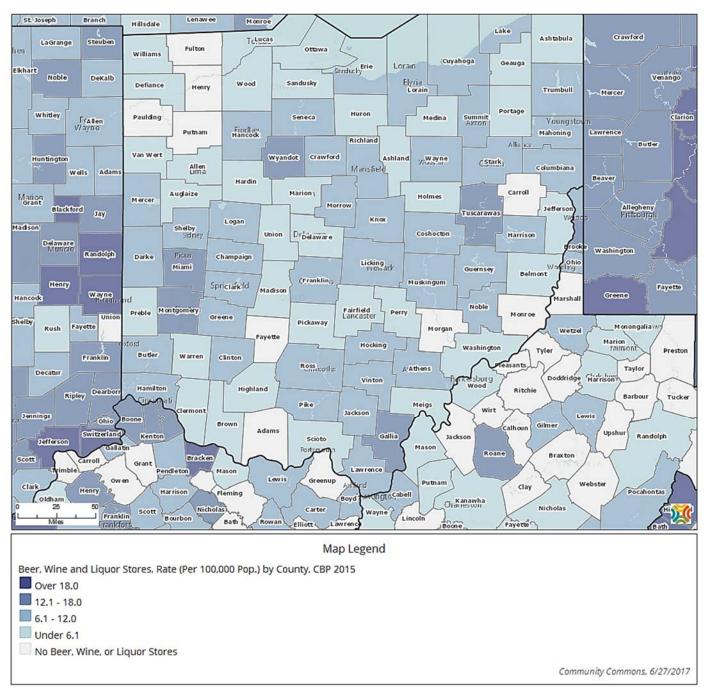
The following table shows the City of Wapakoneta, Auglaize County, and Ohio motor vehicle accident statistics. The table shows:

- Four percent (4%) of the total crashes in Auglaize County in 2016 were alcohol-related, compared 4% for Ohio.
- None of the fatal injury crashes in Auglaize County were alcohol-related, as compared to 30% of alcohol-related fatal injury crashes in Ohio.
- Of the total number of alcohol-related crashes (34) in Auglaize County, 53% were property damage only and 47% were non-fatal injury.
- There were 11,988 alcohol-related crashes in Ohio in 2016. Of those crashes, 56% were property damage only, 41% were non-fatal injury, and 3% were fatal injury.

	City of Wapakoneta 2016	Auglaize County 2016	Ohio 2016
Total Crashes	165	960	300,016
Alcohol-Related Total Crashes	7	34	11,988
Fatal Injury Crashes	0	4	1,027
Alcohol-Related Fatal Crashes	0	0	304
Alcohol Impaired Drivers in Crashes	7	34	11,717
Injury Crashes	30	233	76,130
Alcohol-Related Injury Crashes	3	16	4,974
Property Damage Only	135	723	222,859
Alcohol-Related Property Damage Only	4	18	6,710
Deaths	0	4	1,107
Alcohol-Related Deaths	0	0	334
Total Non-Fatal Injuries	47	356	110,311
Alcohol-Related Injuries	5	22	7,033

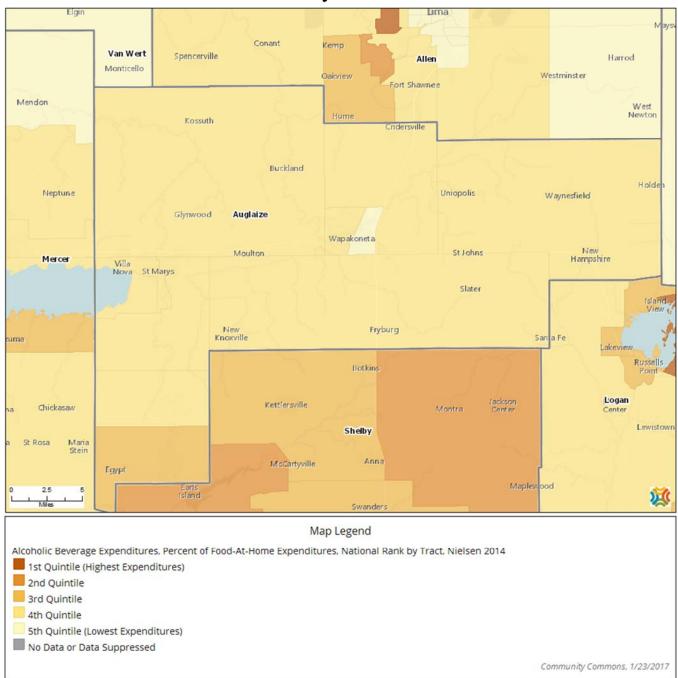
Source: Ohio Department of Public Safety, Crash Reports, Updated 5/20/2017, Traffic Crash Facts

Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by County, CBP 2015



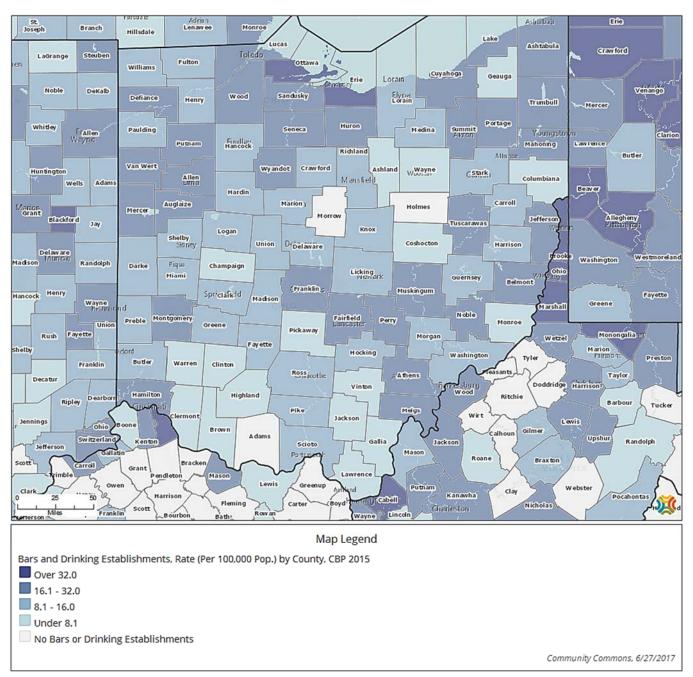
Source: Community Commons, updated 6/07/2017

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



Source: Community Commons, updated 1/23/2017

Bars and Drinking Establishments, Rate (Per 100,000 Pop.) ZCTA, CBP 2015



Source: Community Commons, updated 6/07/2017

Health Behaviors: Adult Drug Use

Key Findings

In 2017, 6% of Auglaize County adults had used recreational marijuana during the past 6 months. Four percent (4%) 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 six months.

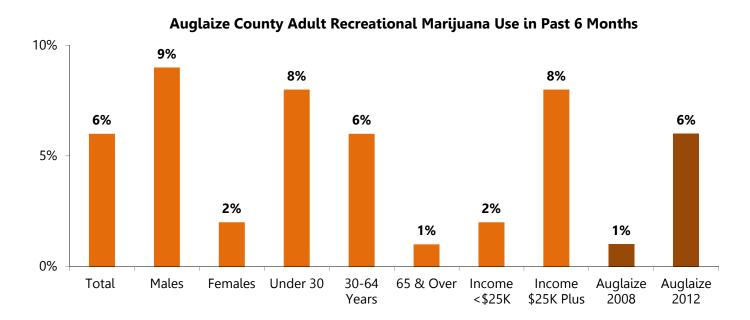
Adult Drug Use

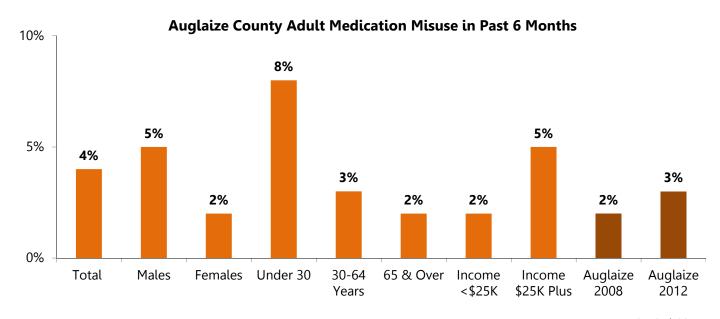
- Six percent (6%) of Auglaize County adults had used marijuana for recreational purposes in the past six months, increasing to 9% of males.
- Three percent (3%) of adults had used wax, oil with THC, or edibles for recreational purposes.
- Three percent (3%) of adults had used medicinal marijuana in the past six months.
- Adults reported using the following drugs illegally in the past six months:
 - Heroin, Fentanyl, or other opiates (3%)
 - Methamphetamines (3%)
 - Synthetic marijuana/K2 (2%)
 - Cocaine (2%)
 - LSD, mescaline, peyote, psilocybin, DMT, or mushrooms (2%)
 - Inhalants such as glue, toluene, gasoline, duster or paint (2%)
 - Ecstasy or GHB (2%)
 - Bath salts (2%)
- When asked about their frequency of marijuana and other recreational drug use in the past six months, 34% of Auglaize County adults who used drugs did so almost every day, and 14% did so less than once a month.
- Four percent (4%) 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, increasing to 8% of those under the age of 30.
- Adults misused the following medications:
 - Steroids (4%)
 - Tranquilizers (4%)
 - Ultram (4%)
 - OxyContin (3%)
 - Neurontin (3%)
 - Vicodin (3%)
 - Codeine, Demerol, Morphine, Percocet, or Dilaudid (3%)
 - Suboxone or Methadone/Vivitrol (2%)
 - Ritalin, Adderall, Concerta or other ADHD medications (2%)
- When asked about their frequency of medication misuse in the past six months, 33% of Auglaize County adults who used these drugs did so almost every day, and 20% did so less than once a month.
- Auglaize County adults obtained these medications from the following: primary care physician (87%), free from friend or family member (16%), multiple doctors (10%), bought from friend of family member (10%), ER or urgent care doctor (6%), bought from drug dealer (2%), and stole from a friend or family member (2%).

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2014	U.S. 2014
Adults who used recreational marijuana in the past six months	1%	6%	6%	N/A	N/A
Adults who misused prescription drugs in the past six months	2%	3%	4%	N/A	N/A

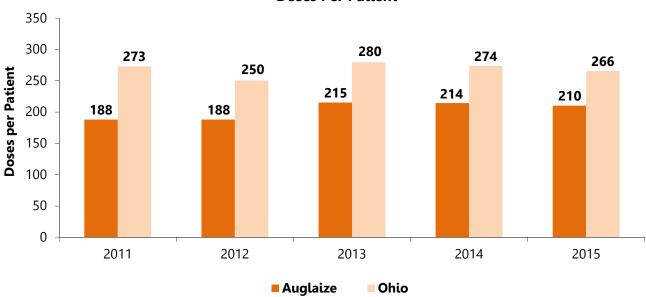
N/A – Not Available

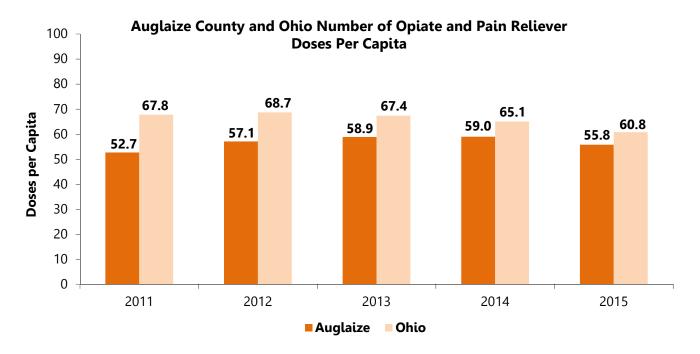
The following graphs indicate adult recreational marijuana use in the past six months and medication misuse in the past six months. Examples of how to interpret the information include: 6% of Auglaize County adults used recreational marijuana in the past six months, including 8% of those under the age of 30 and 2% of those with incomes less than \$25,000.





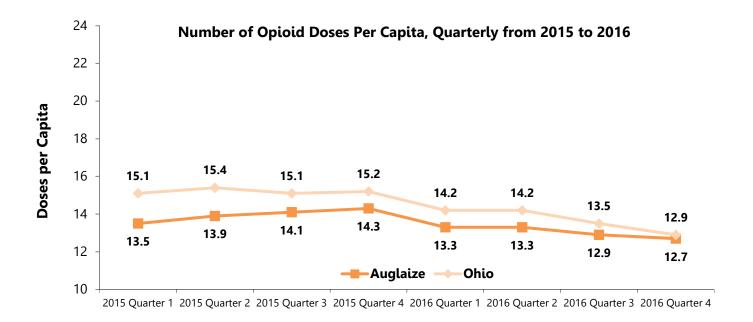


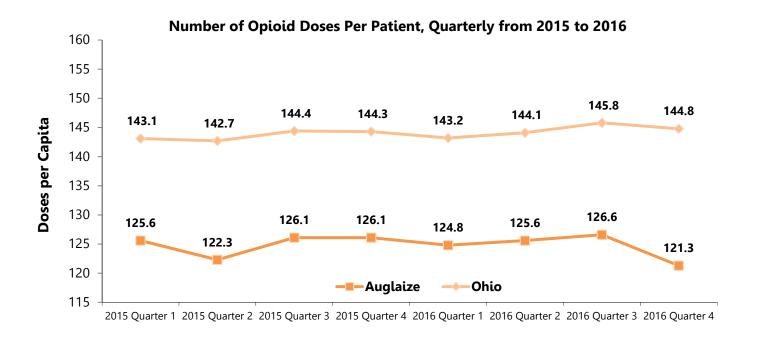




Source: Ohio Automated Rx Reporting System, Quarterly County Data

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

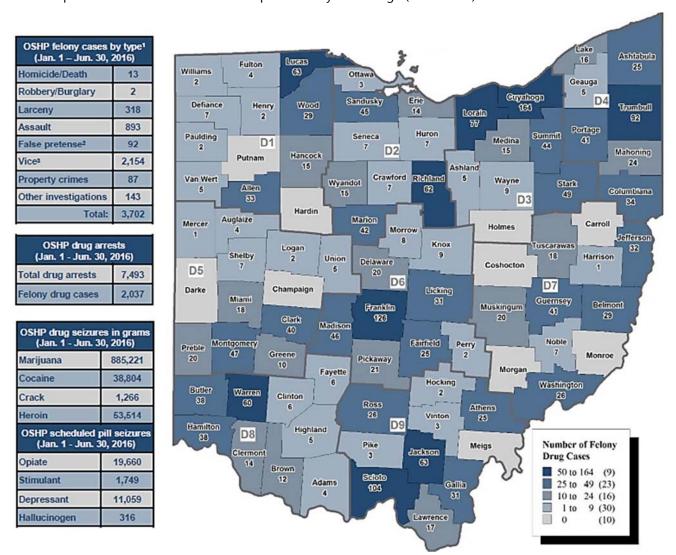




(Source: Ohio's Automated Rx Reporting System, 2015-2016)

Felony Cases and Drug Arrests January - June 2016

- Ohio State Highway Patrol (OSHP) investigated a wide range of felony offenses during the first half of 2016, including vice (2,154), assault (893), larceny (318), false pretense (92), property crimes (87), homicide/death (136), robbery/burglary (2), and various other types of felony offenses (143).
- OSHP Troopers made 7,493 total drug arrests during the first 6 months of 2016 a 20% increase compared to 2015 and a 35% increase compared to the previous 3-year average (2013-2015).
- Of the 7,493 drug arrests, over one-quarter (2,037 or 27%) included one or more felony drug charges. This represents a 37% increase over the previous 3-year average (2013-2015).



Source: Ohio State Highway Patrol, Felony Cases and Drug Arrests, January – June 2016

Abuse of Prescription (Rx) Drugs

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

Source: National Institute on Drug Abuse, Abuse of Prescription (Rx) Drugs Affects Young Adults Most, February 2017

Heroin

- Heroin is an opioid drug that is synthesized from morphine, a naturally occurring substance extracted from the seed pod of the Asian opium poppy plant.
- Nearly 80% of Americans using heroin (including those in treatment) reported misusing prescription opioids prior to using heroin.
- Heroin overdoses frequently involve a suppression of breathing. This can affect the amount of oxygen that reaches the brain, a condition called hypoxia.
- Heroin abuse is associated with a number of serious health conditions, including fatal overdose, spontaneous abortion, and infectious diseases like hepatitis and HIV.
- Chronic users may develop collapsed veins, infection of the heart lining and valves, abscesses, constipation and gastrointestinal cramping, and liver or kidney disease.
- A range of treatments including medicines and behavioral therapies are effective in helping people stop heroin
 use.

Source: National Institute on Drug Abuse, Drug Facts: Heroin, January 2017

Health Behaviors: Adult Sexual Behavior

Key Findings

In 2017, 64% of Auglaize County adults had sexual intercourse. Six percent (6%) of adults had more than one partner. The CDC estimates that youth ages 15-24 make up just over one quarter of the sexually active population but account for half of the 20 million new sexually transmitted infections that occur in the United States each year. (Source: CDC, STDs in Adolescents and Young Adults, 2017 STD Surveillance).

Adult Sexual Behavior

- Six percent (6%) of adults reported they had intercourse with more than one partner in the past year, increasing to 8% of those under the age of 30.
- Adults used the following methods of birth control: they or their partner were too old (18%), vasectomy (17%), hysterectomy (14%), abstinence (12%), tubes tied (11%), condoms (10%), birth control pill (9%), infertility (7%), IUD (5%), ovaries or testicles removed (3%), withdrawal (2%), rhythm method (2%), diaphragm (1%), shots (1%), emergency contraception (1%), and contraceptive implants (<1%).
- Thirteen percent (13%) of Auglaize County adults were not using any method of birth control.
- The following situations applied to Auglaize County adults in the past year: had anal sex without a condom (3%), tested for an STD (3%), had sexual activity with someone of the same gender (2%), had sex with someone they did not know (2%), thought they may have an STD (1%), treated for an STD (1%), used intravenous drugs (1%), and tested positive for Hepatitis C (1%).
- Six percent (6%) of adults have been forced to have sexual intercourse when they did not want to, increasing to 10% of females and those under the age of 30, and 12% of those with incomes less than \$25,000.
- Fifteen percent (15%) of adults have engaged in sexual activity following alcohol or other drug use that they would not have done if sober, increasing to 40% of those under the age of 30.

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Had more than one sexual partner in past year	5%	5%	6%	N/A	N/A

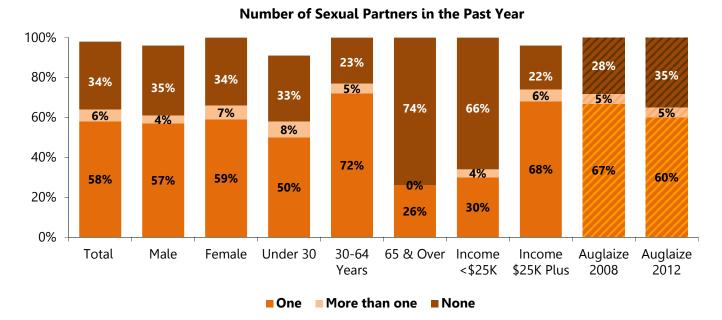
N/A – Not available

Contraceptive Use in the United States

- 16% of women aged 15-44 are currently using birth control pills.
- 7% of women aged 15-44 are currently using long-acting reversible contraception such as an Intrauterine device or contraceptive implant.
- 16% of women aged 15-44 are currently using female sterilization
- 5% of women aged 15-44 are currently using male sterilization

(Source: CDC, Contraceptive Use, Last Updated July 2016)

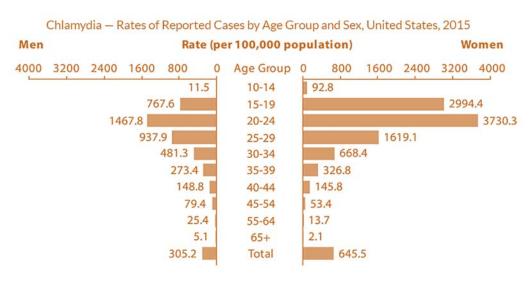
The following graph shows the sexual activity of Auglaize County adults. Examples of how to interpret the information in the graph include: 58% of all Auglaize County adults had one sexual partner in the last 12 months, including 6% had more than one and 34% had none.



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

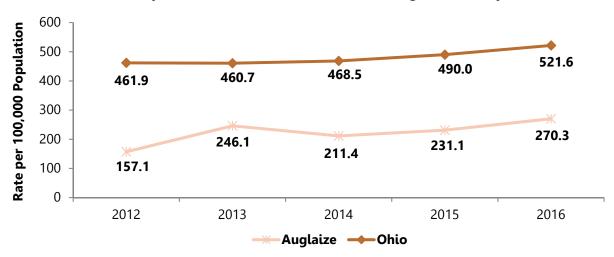
Chlamydia—United States

- In 2015, a total of 1,526,658 chlamydial infections were reported to CDC in 50 states and the District of Columbia. This case count corresponds to a rate of 478.8 cases per 100,000 population.
- During 2000–2011, the rate of reported chlamydial infection increased from 251.4 to 453.4 cases per 100,000 population.
- During 2011–2013, the rate of reported cases decreased to 443.5 cases per 100,000 population.
- The rate of reported cases then increased in 2014 and again in 2015. During 2014–2015, the rate increased 5.9%, from 452.2 to 478.8 cases per 100,000 population.



Auglaize County chlamydia rates fluctuated from 2012 to 2016.

Chlamydia Annualized Disease Rates for Auglaize County and Ohio



Number of cases reported

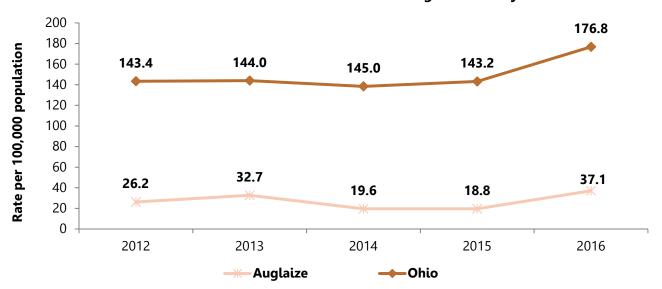
Annualized Count of Chlamydia Cases for Auglaize County

Source: ODH, STD Surveillance, data updated on 5/07/2017

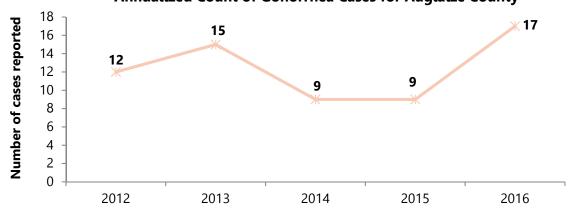
The following graphs show Auglaize County gonorrhea disease rates per 100,000 population. The graphs show:

- The Auglaize County gonorrhea rate fluctuated slightly from 2012 to 2016.
- The Ohio gonorrhea rate stayed about the same from 2012 to 2015, then increased significantly in 2016.
- The Healthy People 2020 Objective for gonorrhea is 257 new female and 198 new male cases per 100,000 population.

Gonorrhea Annualized Disease Rates for Auglaize County and Ohio



Annualized Count of Gonorrhea Cases for Auglaize County

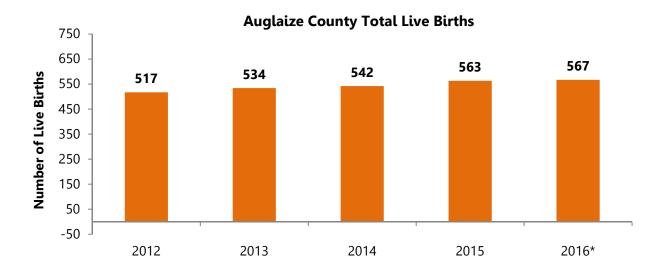


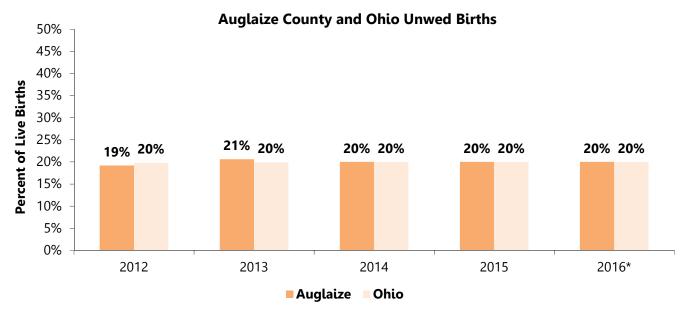
Source: ODH, STD Surveillance, data updated on 05/07/2017

Pregnancy Outcomes

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

• From 2012-2016, there was an average of 545 live births per year in Auglaize County.





Source: ODH Information Warehouse Updated 4-6-15 *Indicates preliminary data that may change

Health Behaviors: Adult Mental Health

Key Findings

In 2017, 2% of Auglaize County adults considered attempting suicide. Twenty-two percent (22%) of adults did not get enough rest or sleep almost every day for two or more weeks in a row. Nine percent (9%) of Auglaize County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems.

Adult Mental Health

 Auglaize County adults experienced the following almost every day for two weeks or more in a row: did not get enough rest or sleep (22%); felt worried, tense, or anxious (17%); felt sad, blue, or depressed (14%); had high stress (14%); felt very healthy and full of energy (7%); stopped doing some usual activities (7%); and unusual increase or loss of appetite (6%).

Suicide Facts

- 44,193 people in the U.S. died from suicide, and 1,104,825 people attempted suicide in the 2015.
- An average of one person killed themselves every 11.9 minutes
- Suicide is the 10th ranking cause of death in the U.S.
- For every female death by suicide, there are 3.3 male deaths.
- In 2015, there were 1,650 suicide deaths in Ohio.
- The leading suicide methods included:
 - Firearm suicides (49.8%)
 - Suffocation/Hanging (26.8%)
 - Poisoning (15.4%)
 - Cutting/Piercing (1.7%)
 - Drowning (1.2%)

Source: American Association of Suicidology, Facts & Statistics, Updated December 2017

- Two percent (2%) of Auglaize County adults considered attempting suicide in the past year.
- Less than one percent (<1%) of adults reported attempting suicide in the past year.
- Auglaize County adults reported they or a family member were diagnosed with or treated for the following mental health issues: anxiety or emotional problems (18%), depression (18%), an anxiety disorder (10%), attention deficit disorder (ADD/ADHD) (6%), post-traumatic stress disorder (PTSD) (4%), bipolar (3%), developmental disability (3%), life-adjustment disorder/issue (2%), other trauma (2%), alcohol and illicit drug abuse (1%), autism spectrum (1%), eating disorder (1%), psychotic disorder (1%), problem gambling (<1%), and some other mental health disorder (2%). Eighteen percent (18%) indicated they or a family member had taken medication for one or more mental health issues.
- Auglaize County adults received the social and emotional support they needed from the following: family (75%), friends (62%), God/prayer (41%), church (27%), neighbors (8%), Internet (5%), a professional (4%), community (3%), self-help group (<1%), and other (3%).
- Auglaize County adults dealt with stress in the following ways: talked to someone they trust (39%); listened to music (32%); prayer/meditation (31%); ate more or less than normal (28%); worked on a hobby (27%); exercised (22%); slept (22%); worked (22%); drank alcohol (16%); smoked tobacco (8%); took it out on others (7%); used prescription drugs as prescribed (6%); used illegal drugs (4%); misused prescription drugs (<1%); and other ways (9%).
- Nine percent (9%) of Auglaize 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: had not thought of it (7%), did not know how to find a program (6%), co-pay/deductible too high (3%), could not afford to go (3%), stigma of seeking mental health services (2%), fear (2%), other priorities (2%), could not get to the office/clinic (<1%), transportation (<1%), and other reasons (1%). Three-quarters (75%) of adults indicated they did not need such a program.
- The ratio of population to mental health providers in Auglaize County is 1,639:1 (Source: Mental Health and Recovery Services Board of Allen, Auglaize and Hardin Counties, 2017), compared to the Ohio ratio of 630:1 (Source: County Health Rankings, 2017).

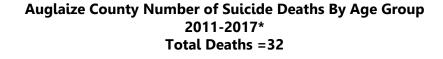
- Adults indicated they would do the following if they knew someone who was suicidal: talk to them (69%), try to calm them down (47%), call 911 (47%), call a crisis line (43%), call a friend (25%), take them to the ER (22%), call their spiritual leader (20%), and nothing (4%).
- On a typical day, adults rated their stress level as very high (4%), high (9%), moderate (41%), low (30%), and very low (16%).
- Thirty-three percent (33%) of adults have hit their head hard enough that they were dizzy, had a concussion, were knocked out, or had their "bell rung".

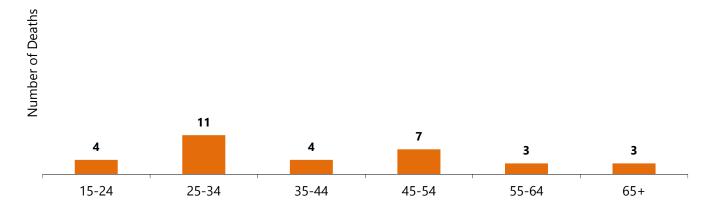
Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Considered attempting suicide in the past year	5%	3%	2%	N/A	N/A

N/A - Not available

The graph below shows the number of suicide deaths by age group in Auglaize County. The graph shows:

• From 2011-2017*, 34% of all Auglaize County suicide deaths occurred among 25-34 years old.





*Data for 2016 and 2017 are considered partial and may be incomplete, and should be used with caution (Source: ODH, Ohio Public Health Data Warehouse, Mortality, Leading Causes of Death, updated 4/14/2017)

Chronic Disease: Cardiovascular Health

Key Findings

The 2017 Auglaize County Health Assessment found that 6% of adults had survived a heart attack and 4% had survived a stroke at some time in their life. Nearly two-fifths (39%) were obese, 37% had high blood pressure, 34% had high blood cholesterol, and 17% were smokers, four known risk factors for heart disease and stroke. Heart disease (27%) and stroke (6%) accounted for 33% of all Auglaize County adult deaths in 2013-2015 (Source: CDC Wonder, 2017).

Heart Disease and Stroke

- Six percent (6%) of adults reported they had survived a heart attack or myocardial infarction, increasing to 14% of those over the age of 65 and 15% of those with incomes less than \$25,000.
- Five percent (5%) of Ohio and 4% of U.S. adults reported they had a heart attack or myocardial infarction in 2015 (Source: 2015 BRFSS).
- Four percent (4%) of Auglaize County adults reported they had survived a stroke, increasing to 11% of those over the age of 65.
- Four percent (4%) of Ohio and 3% of U.S. adults reported having had a stroke in 2015 (Source: 2015 BRFSS).

Auglaize County Leading Causes of Death 2013-2015

Total Deaths: 1,461

- Heart Disease (27% of all deaths)
- Cancer (22%)
- Stroke (6%)
- Chronic Lower Respiratory Diseases (5%)
- Accidents, Unintentional Injuries (4%)

Source: CDC Wonder, 2013-2015

Ohio **Leading Causes of Death** 2013-2015

Total Deaths: 345,955

- Heart Disease (24% of all deaths)
- Cancers (22%)
- Chronic Lower Respiratory Diseases (6%)
- Accidents, Unintentional Injuries (5%)
- Stroke (5%)

Source: CDC Wonder, 2013-2015

- Five percent (5%) of adults reported they had angina or coronary heart disease, increasing to 13% of those over the age of 65 and 15% of those with incomes less than \$25,000.
- Four percent (4%) of Ohio and U.S. adults reported having had angina or coronary heart disease in 2015 (Source: 2015 BRFSS).
- Three percent (3%) of adults reported they had congestive heart failure, increasing to 8% of those over the age of 65 and those with incomes less than \$25,000.

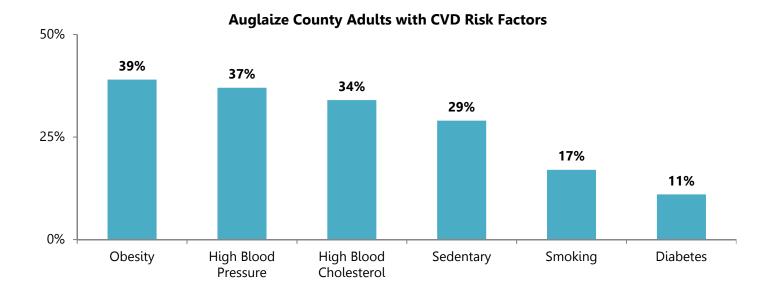
High Blood Pressure (Hypertension)

- More than one-third (37%) of adults had been diagnosed with high blood pressure. The 2015 BRFSS reports hypertension prevalence rates of 34% for Ohio and 31% for the U.S.
- Nine percent (9%) of adults were told they were pre-hypertensive/borderline high.
- Ninety percent (90%) of adults had their blood pressure checked within the past year.
- Auglaize County adults diagnosed with high blood pressure were more likely to have:
 - Been ages 65 years or older (60%)
 - Rated their overall health as fair or poor (58%)
 - Incomes less than \$25,000 (54%)
 - Been classified as obese by Body Mass Index (49%)

High Blood Cholesterol

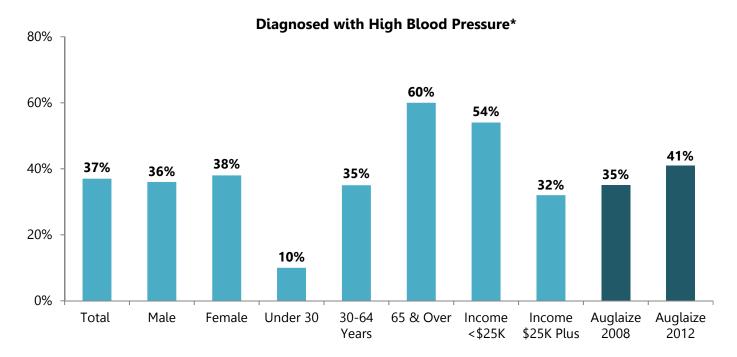
- More than one-third (34%) of adults had been diagnosed with high blood cholesterol. The 2015 BRFSS reported that 37% of Ohio and 36% of U.S. adults have been told they have high blood cholesterol.
- Three-fourths (75%) of adults had their blood cholesterol checked within the past 5 years. The 2015 BRFSS reported 78% of Ohio and U.S. adults had their blood cholesterol checked within the past 5 years.
- Auglaize County adults with high blood cholesterol were more likely to:
 - Have rated their overall health as fair or poor (62%)
 - Have been ages 65 years or older (52%)
 - Have been classified as obese by Body Mass Index-BMI (38%)
 - Have incomes less than \$25,000 (38%)

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

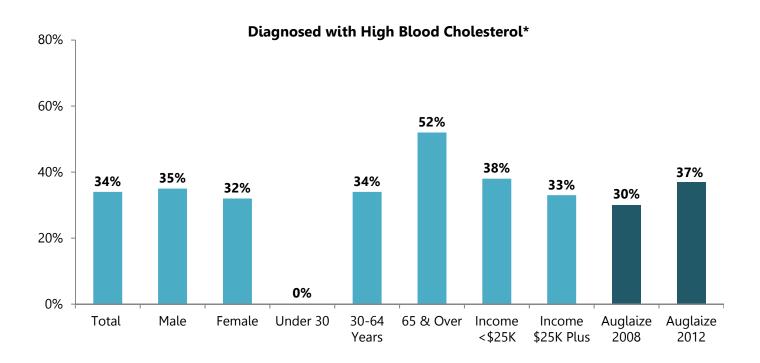


Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Had angina	8%	7%	5%	4%	4%
Had a heart attack	6%	7%	6%	5%	4%
Had a stroke	4%	2%	4%	4%	3%
Had high blood pressure	35%	41%	37%	34%	31%
Had high blood cholesterol	30%	37%	34%	37%	36%
Had blood cholesterol checked within past 5 years	74%	78%	75%	78%	78%

The following graphs show the number of Auglaize County adults who have been diagnosed with high blood pressure and high blood cholesterol. Examples of how to interpret the information on the first graph include: 37% of all Auglaize County adults have been diagnosed with high blood pressure including 36% of males, 38% of females, and 60% of those 65 years and older.



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



Healthy People 2020 Objectives

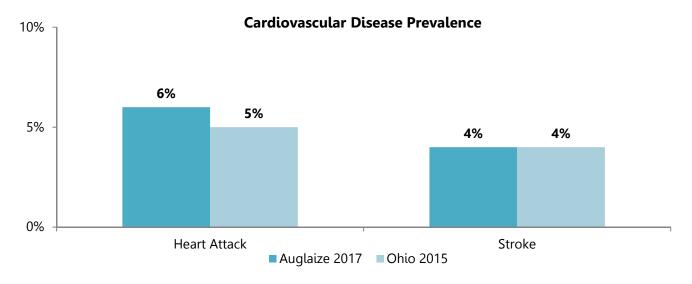
Heart Disease and Stroke

Objective	Auglaize Survey Population Baseline	2013 U.S. Baseline*	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	37% (2017)	31% Adults age 18 and up	27%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	34% (2017)	38% Adults age 20+ with TBC>240 mg/dl	14%

*All U.S. figures age-adjusted to 2000 population standard. Source: Healthy People 2020, 2013 BRFSS

The following graph shows cardiovascular disease prevalence for Auglaize County and Ohio.

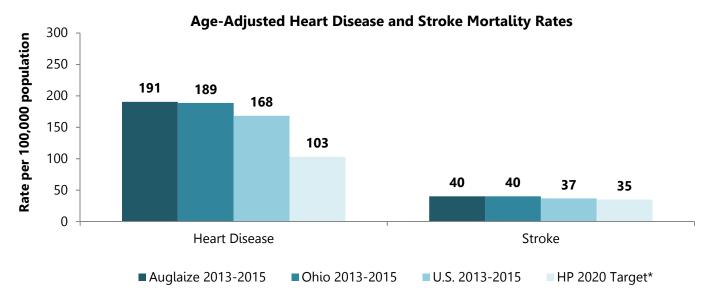
Heart attack prevalence in Auglaize County was slightly higher than Ohio.



Source: 2015 BRFSS

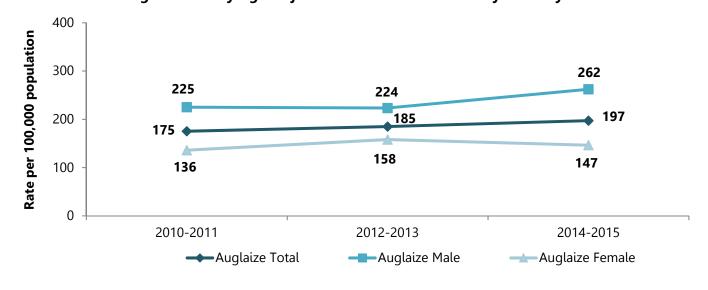
The following graphs show the age-adjusted mortality rates per 100,000 population for heart disease and stroke.

- When age differences are accounted for, the statistics indicate that from 2013-2015 Auglaize County heart disease mortality rate was higher than the figure for the state, the U.S., and Healthy People 2020 target.
- The Auglaize County age-adjusted stroke mortality rate from 2012-2014 was the same for the Ohio figure, higher than the United States figure, and higher than the Healthy People 2020 target objective.
- From 2010-2014, the total Auglaize County age-adjusted heart disease mortality rate decreased.



*The Healthy People 2020 Target objective for Coronary Heart Disease is reported for heart attack mortality. Source: Health Indicators Warehouse, Healthy People 2020

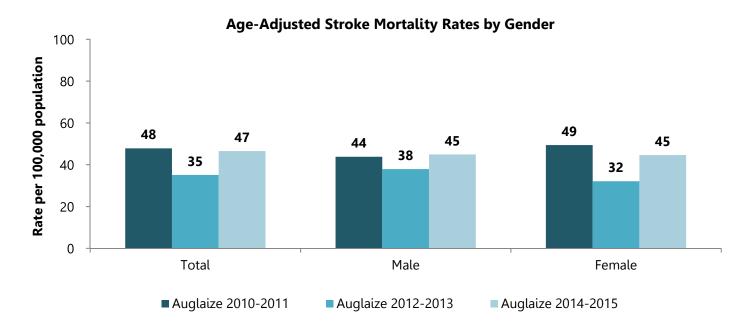
Auglaize County Age-Adjusted Heart Disease Mortality Rates by Gender



Source: CDC Wonder, Underlying Cause of Death, 2010-2015

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

From 2012-2013, the Auglaize County stroke mortality rate was higher for males than for females.



Source: CDC Wonder, About Underlying Cause of Death, 2010-2015

Chronic Disease: Cancer

Key Findings

In 2017, 14% of Auglaize County adults had been diagnosed with cancer at some time in their life. The Centers for Disease Control and Prevention (CDC) indicates that from 2011-2015, a total of 529 Auglaize 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.

Auglaize County Incidence of Cancer, 2010-2014

All Types: 1,332 cases

• Breast: 206 cases (15%)

Lung and Bronchus: 180 cases (14%)

Prostate: 137 cases (10%)

Colon and Rectum: 129 cases (10%)

In 2015, there were 95 cancer deaths in Auglaize County.

Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 4/27/2017

Adult Cancer

- Fourteen percent (14%) of Auglaize County adults were diagnosed with cancer at some point in their lives, increasing to 28% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: prostate (46%), breast (22%), skin cancer (17%), cervical (16%), melanoma (7%), colon (4%), head and neck (3%), Hodgkin's lymphoma (3%), non-Hodgkin's lymphoma (3%), ovarian (2%), esophageal (1%), lung (1%), oral (1%), renal (1%), thyroid (1%), and other types of cancer (11%). Thirteen percent (13%) of adults were diagnosed with multiple types of cancer.

14% of Auglaize 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 2011-2015, cancers caused 22% (529 of 2,428 total deaths) of all Auglaize County resident deaths. The largest percent (15%) of cancer deaths were from breast 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 has determined that 17% of Auglaize County adults were current smokers and many more were exposed to environmental tobacco smoke, also a cause of heart attacks and cancer.

Lung Cancer

- The CDC reports that lung cancer (n=79) was the leading cause of male cancer deaths from 2011-2015 in Auglaize County. Cancer of the colon (n=20) male deaths and prostate cancer caused (n=14) male deaths during the same time period (Source: CDC Wonder, 2011-2015).
- In Auglaize County, 15% of male adults were current smokers and 23% had stopped smoking for one or more days in the past 12 months because they were trying to quit.
- The CDC reports that lung cancer was the leading cause of female cancer deaths (n=64) in Auglaize County from 2011-2015 followed by breast (n=38) and colon (n=26) cancers (Source: CDC Wonder, 2011-2015).

- Approximately 18% of female adults in the county were current smokers and 37% had stopped smoking for one or more days in the past 12 months because they were trying to guit.
- According to the American Cancer Society, smoking causes 80% of lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers (Source: American Cancer Society, Facts & Figures 2017).

Breast Cancer

- In 2017, 60% of Auglaize County females reported having had a clinical breast examination in the past year.
- Nearly half (48%) of Auglaize 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 2017).
- For women at average risk of breast cancer, recently updated American Cancer Society screening guidelines recommended that those 40 to 44 years of age have the choice of annual mammography; those 45 to 54 have annual mammography, and those 55 years of age and older have biennial or annual mammography, continuing as long as their overall health is good and life expectancy is 10 or more years. For some women at high risk of breast cancer, annual screening using magnetic resonance imaging (MRI) in addition to mammography is recommended, typically starting at age 30 (Source: American Cancer Society, Facts & Figures 2017).

Prostate Cancer

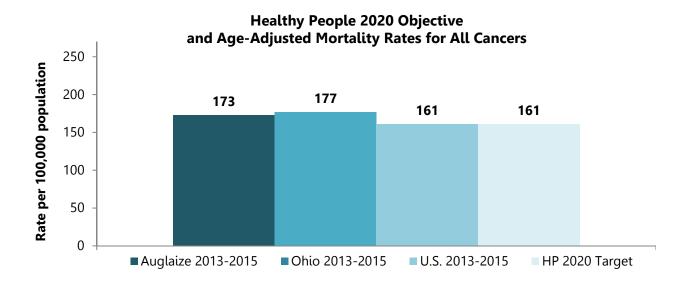
- CDC statistics indicate that prostate cancer deaths accounted for 1% of all male cancer deaths from 2011-2015 in Auglaize County.
- Incidence rates for prostate cancer are 74% higher in African Americans than in whites, and they are twice as likely to die of prostate cancer. Other risk factors include 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 2017).

Colon and Rectum Cancers

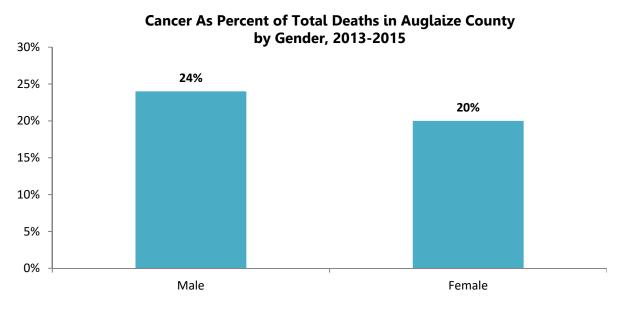
- The health assessment report identified that 52% of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- The CDC statistics indicate that colon, rectum, and anus cancer deaths accounted for 2% of all male and female cancer deaths from 2011-2015 in Auglaize County.
- The 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.

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

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



Source: Health Indicators Warehouse; Healthy People 2020



Source: CDC Wonder, 2013-2015

Auglaize County Incidence of Cancer 2010-2014

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer
Breast	206	15%
Lung and Bronchus	180	14%
Prostate	137	10%
Colon and Rectum	129	10%
Other/Unspecified	96	7%
Melanoma of Skin	84	6%
Bladder	71	5%
Non-Hodgkins Lymphoma	53	4%
Pancreas	52	4%
Kidney and Renal Pelvis	48	4%
Thyroid	40	3%
Cancer and Corpus Uteri	39	3%
Leukemia	38	3%
Ovary	24	2%
Brain and CNS	23	2%
Multiple Myeloma	22	2%
Oral Cavity & Pharynx	19	1%
Esophagus	14	1%
Stomach	13	1%
Larynx	11	1%
Liver and Bile Ducts	10	1%
Hodgkins Lymphoma	9	1%
Cancer of Cervix Uteri	8	1%
Testis	6	<1%
Total	1,332	100%

Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 6/05/2017

2017 Cancer Estimations

- In 2017, about 1,688,780 new cancer cases are expected to be diagnosed.
- The World Cancer Research Fund estimates that about 20% of the new cancer cases expected to occur in the U.S. in 2017 will be related to overweight or obesity, physical inactivity, and poor nutrition, and thus could be prevented.
- About 600,920 Americans are expected to die of cancer in 2017.
- In 2017, about 155,870 cancer deaths will be caused by tobacco use.
- In 2017, estimates predict that there will be 68,180 new cases of cancer and 25,430 cancer deaths in Ohio.
- Of the new cancer cases, approximately 10,660 (16%) will be from lung and bronchus cancers and 5,510 (8%) will be from colon and rectum cancers.
- About 9,430 new cases of female breast cancer are expected in Ohio.
- New cases of male prostate cancer in Ohio are expected to be 5,840 (9%).

Source: American Cancer Society, Facts and Figures 2017

Chronic Disease: Arthritis

Key Findings

More than one-third (36%) of Auglaize County adults were diagnosed with arthritis. According to the 2015 BRFSS, 28% of Ohio adults and 25% of U.S. adults were told they have arthritis.

Arthritis

- Adults are at higher risk of developing arthritis if they are female, have genes associated with certain types of
 arthritis, have an occupation associated with arthritis, are overweight or obese, and/or have joint injuries or
 infections (Source: CDC, 2016).
- More than one-third (36%) of Auglaize County adults were told by a health professional that they had some form of arthritis, increasing to 64% of those over the age of 65.
- Four-fifths (80%) of adults diagnosed with arthritis were overweight or obese.
- According to the 2015 BRFSS, 28% of Ohio adults and 25% of U.S. adults were told they have arthritis.
- An estimated 53 million U.S. adults (about 23%) report having doctor-diagnosed arthritis. By 2040, over 78 million people will have arthritis. Arthritis is more common among women (26%) than men (19%), and it affects all racial and ethnic groups. Arthritis commonly occurs with other chronic diseases, like diabetes, heart disease, and obesity, and can make it harder for people to manage these conditions (Source: CDC, Arthritis at a Glance 2016).

Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Diagnosed with arthritis	27%	38%	36%	28%	25%

Arthritis: Key Public Health Messages

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

Key self-management activities include the following:

- 1. Learn Arthritis Management Strategies Arthritis management strategies provide those with arthritis with the skills and confidence to effectively manage their condition. Self-Management Education has proven to be valuable for helping people change their behavior and better manage their arthritis symptoms. Interactive workshops such as the Arthritis Self-Management Program and the Chronic Disease Self-Management Program are low-cost (about \$25 \$35) and available in communities across the country. Attending one of these programs can help a person learn ways to manage pain, exercise safely, and gain control of arthritis.
- **2. Be Active** –Research has shown that physical activity decreases pain, improves function, and delays disability. Make sure you get at least 30 minutes of moderate physical activity at least 5 days a week. You can get activity in 10-minute intervals.
- **3. Watch your weight** –The prevalence of arthritis increases with increasing weight. Research suggests that maintaining a healthy weight reduces the risk of developing arthritis and may decrease disease progression. A loss of just 11 pounds can decrease the occurrence (incidence) of new knee osteoarthritis and a modest weight loss can help reduce pain and disability.
- **4. See your doctor** –Although there is no cure for most types of arthritis, early diagnosis and appropriate management is important, especially for inflammatory types of arthritis. For example, early use of disease-modifying drugs can affect the course of rheumatoid arthritis. If you have symptoms of arthritis, see your doctor and begin appropriate management of your condition.
- **5. Protect your joints** –Joint injury can lead to osteoarthritis. People who experience sports or occupational injuries or have jobs with repetitive motions like repeated knee bending have more osteoarthritis. Avoid joint injury to reduce your risk of developing osteoarthritis.

Source: Centers for Disease Control and Prevention, Arthritis: Key Public Health Messages, last updated July 2017

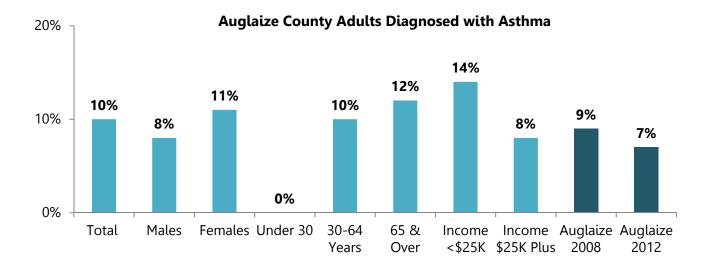
Chronic Disease: Asthma

Key Findings

According to the Auglaize County Health Assessment, 10% of adults had been diagnosed with asthma.

Asthma and Other Respiratory Disease

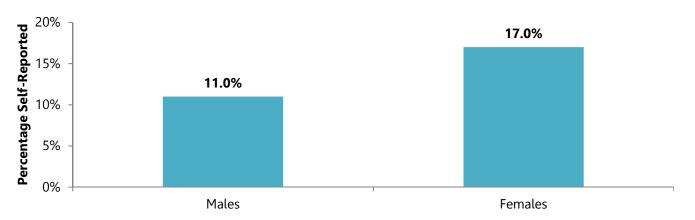
- In 2017, 10% of Auglaize County adults had been diagnosed with asthma, increasing to 14% of those with incomes less than \$25,000.
- Fourteen percent (14%) of Ohio and U.S. adults have ever been diagnosed with asthma (Source: 2015 BRFSS).
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke, dust mites, outdoor air pollution, cockroach allergens, pets, mold, smoke from burning wood or grass, infections linked to the flu, colds, and respiratory viruses (source: CDC, 2017).
- Chronic lower respiratory disease was the 4th leading cause of death in Auglaize County and the 3rd leading cause of death in Ohio in 2014 (Source: CDC Wonder, 2017).



Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Had been diagnosed with asthma	9%	7%	10%	14%	14%

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

Ohio Adult Lifetime Asthma Prevalence Rates By Gender



Ohio Adult Current Asthma Prevalence Rates By Gender 18% 16% **Percentage Self-Reported** 13.0% 14% 12% 10% 7.0% 8% 6% 4% 2% 0% Males **Females**

Asthma Facts

 The number of Americans with asthma grows every year. Currently, 26 million Americans have asthma. Of the 26 million, 18.9 million are adults

Source: 2015 BRFSS

- Almost 3,600 people die of asthma each year, nearly half of whom are age 65 or older.
- Asthma results in 439,000 hospitalizations and 1.8 million emergency room visits annually.
- Patients with asthma reported 14.2 million visits to a doctor's office and 1.3 million visits to hospital outpatient departments.
- Effective asthma treatment includes monitoring the disease with a peak flow meter, identifying and avoiding allergen triggers, using drug therapies including bronchodilators and anti-inflammatory agents, and developing an emergency plan for severe attacks.

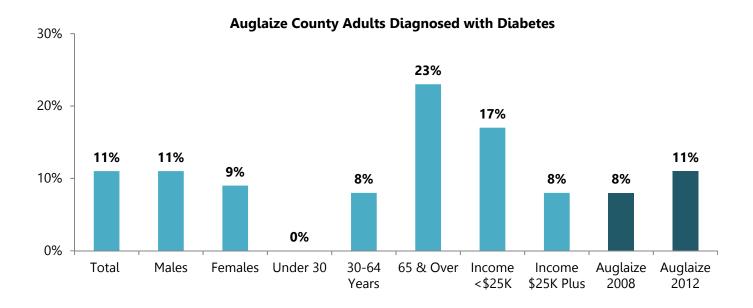
Chronic Disease: Diabetes

Key Findings

In 2017, 11% of Auglaize County adults had been diagnosed with diabetes.

Diabetes

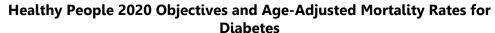
- The 2017 health assessment identified that 11% of Auglaize County adults had been diagnosed with diabetes, increasing to 23% of those over the age of 65. The 2015 BRFSS reports an Ohio prevalence of 11% and U.S. prevalence of 10%.
- Seven percent (7%) of adults had been diagnosed with pre-diabetes.
- Diabetics used the following to treat their diabetes: checking blood sugar (78%), diabetes pills (75%), diet control (71%), checking A1C annually (65%), annual vision exam (58%), checking their feet (53%), exercise (51%), insulin (36%), injectable (20%), dental exam (18%), and taking a class (11%).
- Two-fifths (40%) of adults with diabetes rated their health as fair or poor.
- Auglaize County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 90% were obese or overweight
 - 73% had been diagnosed with high blood pressure
 - 52% had been diagnosed with high blood cholesterol

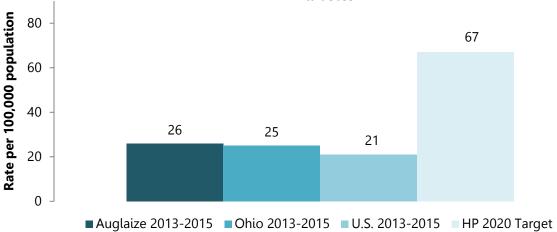


Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S. 2015
Diagnosed with diabetes	8%	11%	11%	11%	10%

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

• From 2013 to 2015, Auglaize County's age-adjusted diabetes mortality rate was higher than Ohio and the U.S., but lower than the Healthy People 2020 target objective rate





Source: Health Indicators Warehouse and Healthy People 2020

Statistics About Diabetes

- In 2012, 29.1 million Americans, or 9.3% of the population, had diabetes. Approximately 1.25 million American children and adults have type 1 diabetes.
- Of the 29.1 million, 8.1 million were undiagnosed.
- 86 million Americans have prediabetes.
- 1.4 million Americans are diagnosed with diabetes every year.
- 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.
- Diabetes kills more Americans every year than AIDS and breast cancer combined.
- Diabetes is the primary cause of death for 69,071 Americans each year, and contributes to the death of 234,051 Americans annually.

Source: American Diabetes Association, Statistics About Diabetes, Overall Numbers, Diabetes and Prediabetes, 2017



DIABETES

Risk factors for type 2 diabetes

Genetics, age and family history of diabetes can increase the likelihood of becoming diabetic and cannot be changed.



Unhealthy diet





Physical inactivity



KEY ACTIONS

FOR EVERYONE

- - Eat healthily
- Be physically active
- - Avoid excessive weight gain
- Check blood glucose if in doubt
- Follow medical advice

FOR GOVERNMENTS



#diabetes



Chronic Disease: Quality of Life

Key Findings

In 2017, 27% of Auglaize County adults were limited in some way because of a physical, mental or emotional problem.

Impairments and Health Problems

- More than one-fourth (27%) of Auglaize County adults were limited in some way because of a physical, mental or emotional problem (21% Ohio and U.S., 2015 BRFSS), increasing to 52% of those with incomes less than \$25,000.
- Among those who were limited in some way, the following most limiting problems or impairments were reported: arthritis/rheumatism (43%); back or neck problems (39%);, walking problems (23%); chronic pain (21%); chronic illness (20%); stress, depression, anxiety, or emotional problems (19%); sleep problems (16%); lung/breathing problems (14%); fitness level (14%); fractures, bone/joint injuries (13%); hearing problems (11%); eye/vision problems (10%); dental problems (6%); a learning disability (2%); and other impairments/problems (4%).
- In the past year, Auglaize County adults reported needing the following services or equipment: eyeglasses or vision services (28%), pain management (11%), help with routine needs (7%), a cane (5%), medical supplies (5%), a walker (5%), help with personal care needs (4%), a wheelchair (3%), hearing aids or hearing care (2%), oxygen or respiratory support (2%), a wheelchair ramp (2%), durable medical equipment (1%), a personal emergency response system (1%), mobility aids or devices (1%), a special bed (1%), and communication aids or devices (<1%).

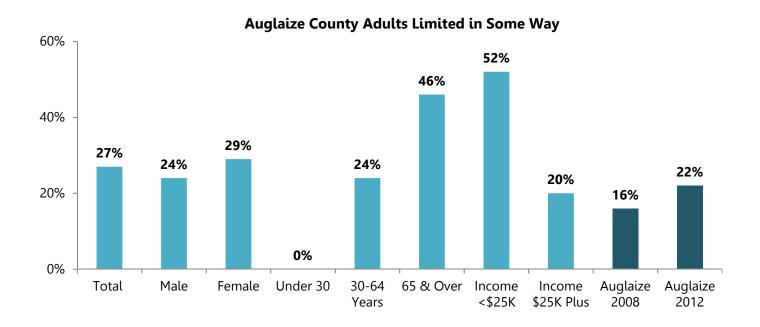
Adult Comparisons	Auglaize County 2008	Auglaize County 2012	Auglaize County 2017	Ohio 2015	U.S 2015
Limited in some way because of a physical, mental, or emotional problems	16%	22%	27%	21%	21%

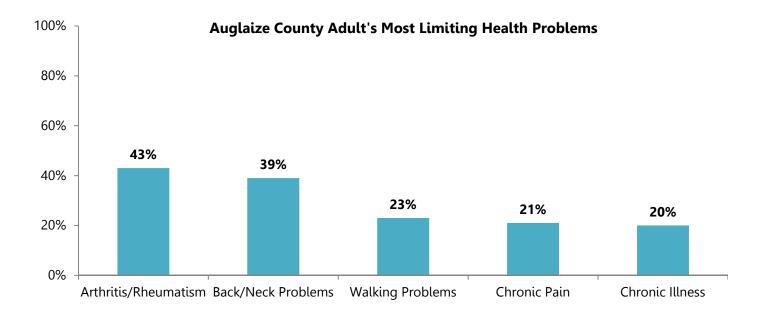
Healthy People 2020 Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Auglaize County 2017	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	43%	36%

Note: U.S. baseline is age-adjusted to the 2000 population standard Sources: Healthy People 2020 Objectives, 2017 Auglaize County Health Assessment

The following graphs show the percentage of Auglaize 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: 27% of Auglaize County adults are limited in some way including 24% of males and 46% of those 65 and older.





Social Conditions: Social Determinants of Health

Key Findings

In 2017, 5% of Auglaize County adults were threatened or abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Nearly half (49%) of adults kept a firearm in or around their home.

Healthy People 2020

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

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

Economic Stability

Nearly one-fifth (19%) of Auglaize County adults attempted to get assistance from a social service agency, increasing to 52% of those with incomes less than \$25,000.



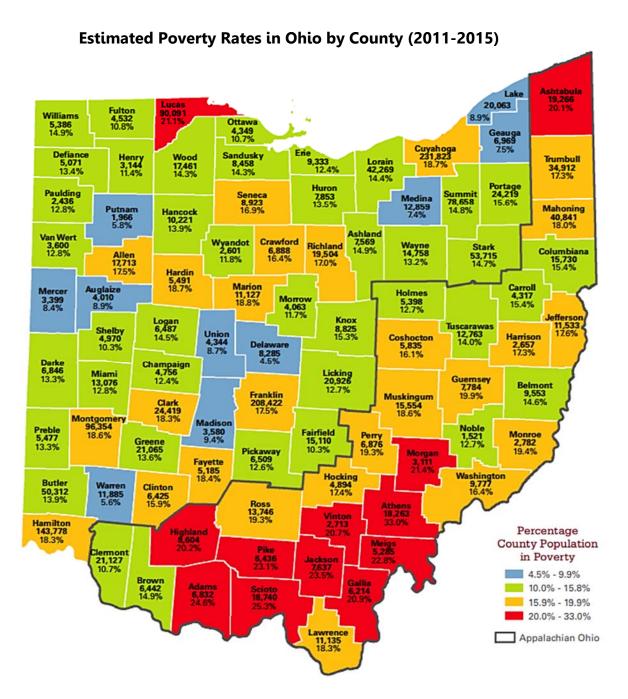
- Auglaize County adults received assistance for the following in the past year: healthcare (11%), prescription assistance (7%), Medicare (7%), food (7%), dental care (6%), mental illness issues (5%), utilities (4%), employment (3%), transportation (3%), home repair (2%), legal aid services (2%), clothing (1%), free tax preparation (1%), drug or alcohol addiction (1%), rent/mortgage (1%), affordable childcare (<1%), credit counseling (<1%), and post-incarceration transition issues (<1%).
- The median household income in Auglaize County was \$58,840. The U.S. Census Bureau reports median income levels of \$51,086 for Ohio and \$55,775 for the U.S. (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates,
- Nine percent (9%) of all Auglaize County residents were living in poverty, and 12% of children and youth ages 0-17 were living in poverty (Source: U.S. Census Bureau, Small Area Income and Poverty Estimates, 2015).
- The unemployment rate for Auglaize County was 3.4 as of May 2017 (Source: Ohio Department of Job and Family Services, Office of Workforce Development, Bureau of Labor Market Information).
- There were 59,977 housing units. The owner-occupied housing unit rate was 74%. Rent in Auglaize County cost an average of \$642 per month (Source: U.S. Census Bureau, American Community Survey, 2011-2015).

Education

- Ninety-three percent (93%) of Auglaize County adults 25 years and over had a high school diploma or higher (Source: U.S. Census Bureau, American Community Survey, 2011-2015).
- Seventeen percent (17%) of Auglaize County adults 25 years and over had at least a bachelor's degree (Source: U.S. Census Bureau, American Community Survey, 2011-2015).

The map below shows the variation in poverty rates across Ohio during the 2011-15 period.

- The 2011-2015 American Community Survey 5-year estimates that approximately 1,775,836 Ohio residents, or 15.8% of the population, were in poverty.
- From 2011-2015, almost 9% of Auglaize County residents were in poverty.



Source: 2011-2015 American Community Survey 5-year estimates, as compiled by Ohio Development Services Agency, Office of Research, Ohio Poverty Report, February 2017

Social Determinants of Health

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

Source: HealthyPeople2020, Retrieved May 19 2017

Social and Community Context

- Five percent (5%) of Auglaize County adults were threatened or abused in the past year. They were threatened or abused by the following: someone outside their home (59%), a spouse or partner (27%), a child (15%), a parent (4%), and someone else (11%).
- Auglaize County adults reported the following adverse childhood experiences (ACEs): their parents became separated or were divorced (18%); lived with someone who was a problem drinker or alcoholic (18%); a parent or adult in their home swore at, insulted, or put them down (17%); lived with someone who was depressed, mentally ill, or suicidal (13%); a parent or adult in their home hit, beat, kicked, or physically hurt them (8%); lived with someone who used illegal stress drugs, or who abused prescription medications (8%); their family did not look out for each other, feel close to each other, or support each other (7%); their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (6%); someone at least 5 years older than them or an adult touched them sexually (6%); lived with someone who served time or was sentenced to serve time in prison, jail or other correctional facility (3%); someone at least 5 years older than them or an adult tried to make them touch them sexually (3%); their parents were not married (2%); they did not have enough to eat, had to wear dirty clothes, and had no one to protect them (2%); and someone at least 5 years older than them or an adult forced them to have sex (1%).
- One-in-nine (11%) of adults experienced 4 or more ACEs, increasing to 56% of those who contemplated suicide in the past year.

Health and Health Care

- In the past year, 9% of adults were uninsured, increasing to 12% of those with incomes more than \$25,000 and 18% of those under the age of 30.
- Reasons for not receiving medical care in the past 12 months included the following: no need to go (24%), cost/no insurance (5%), wasn't open when they could get there (1%), too long of a wait for an appointment (1%), distance (1%), provider did not take their insurance (1%), no childcare (<1%), too embarrassed to seek help (<1%), and other problems that prevented them from getting medical care (2%).
- See the Health Perceptions, Health Care Coverage, and Health Care Access sections for further health and health care information for Auglaize County adults.

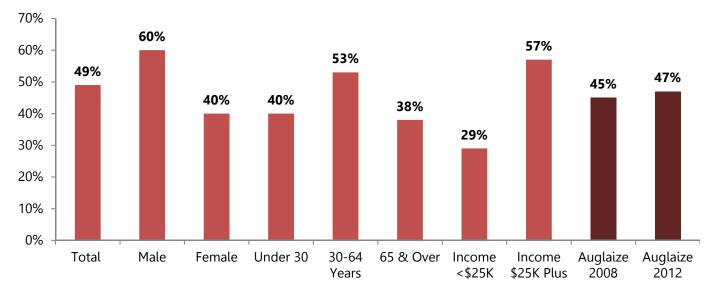
Neighborhood and Built Environment

Nearly half (49%) of Auglaize County adults kept a firearm in or around their home. Six percent (6%) of adults reported they were unlocked and loaded.

- Auglaize County adults reported doing the following while driving: eating (44%); talking on hand-held cell phone (42%); having kids in the car (27%); playing loud music (25%); talking on hands-free cell phone (25%); having pets in the car (18%); not wearing a seatbelt (17%); texting (14%); using internet on their cell phone (6%); being under the influence of alcohol (4%); reading (3%); being under the influence of prescription drugs (2%); being under the influence of recreational drugs (1%); and other activities (such as applying makeup, shaving, etc.) (1%).
- Half (50%) of adults had a carbon monoxide detector in their home.
- More than three-quarters (77%) of Auglaize County adults reported deliberately testing all of the smoke detectors in their home within the past year. Six percent (6%) have never tested the smoke detectors in their home.

The following graph shows the percentage of Auglaize County adults that have a firearm in or around the home. Examples of how to interpret the information shown on the graph include: 49% of all Auglaize County adults have a firearm in or around the home, including 60% of which were males, and 40% of those under 30 years old.

Auglaize County Adults With a Firearm in the 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.
 - 32,964 people die from gun violence and 75,962 people survive gun injuries.
- Every day, an average of 298 people is shot in America. Of those 298 people, 90 people die and 208 are shot, but survive.
 - Of the 298 people who are shot every day, an average of 48 are children and teens.
 - Of the 90 people who die, 31 are murdered, 56 are suicides, 2 die accidently and 1 with an unknown
 - Of the 208 people who are shot but survive, 151 are from assault, 45 are shot accidently, 10 are suicide attempts, and 2 are police interventions.

Source: Brady Campaign to Prevent Gun Violence, "There Are Too Many Victims of Gun Violence" Fact Sheet, 2016

INVEST IN YOUR COMMUNITY 4 Considerations to Improve Health & Well-Being for All WHAT Know What Affects Health WHERE Focus on Areas of Greatest Need Collaborate with Others to Maximize Efforts Your zip code can be more important than your PEOPLE COMMUNITY genetic code. Profound health disparities exist depending on where you live. 40% HEALTH INSURANCE SOCIOECONOMIC BUSINESSES **FACTORS** 10% COLLECTIVE PHYSICAL PUBLIC HEALTH CLINICAL EDUCATION E **ENVIRONMENT** CARE 30% HEALTH BEHAVIORS HEALTH CARE PROVIDERS GOVERNMENT FAITH-BASED PHILANTHROPISTS & INVESTORS Use a Balanced Portfolio of Interventions for Greatest Impact · Action in one area may produce positive outcomes in another. • Start by using interventions that ACTION work across all four action areas. Areas HEALTH BEHAVIORS SOCIOECONOMIC · Over time, increase investment in socioeconomic factors for the **FACTORS** greatest impact on health and well-being for all. PHYSICAL CLINICAL ENVIRONMENT CARE NATIONAL PREVENTION STRATEGY CDC VISIT WWW.cdc.gov/CHINAV FOR TOOLS AND RESOURCES TO IMPROVE YOUR COMMUNITY'S HEALTH AND WELL-BEING

Social Conditions: Environmental Conditions

Key Findings

Adults indicated that insects (7%), mold (7%) and rodents (3%) threatened their health in the past year. Adults also indicated television (82%), radio (70%), and internet (64%) as their main method or way of getting information from authorities in a large-scale disaster or emergency.

Environmental Health

Auglaize County adults thought the following threatened their health in the past year.

Insects (7%) Temperature regulation (2%)

- Mold (7%) Cockroaches (1%) Rodents (3%) Lead paint (1%)

Agricultural chemicals (2%) — Lice (1%)

— Air quality (2%) Plumbing problems (1%)

 Bed bugs (2%) Safety hazards (1%)

— Chemicals found in products (2%) Unsafe water supply/wells (1%)

Sewage/waste water problems (2%)

Disaster Preparedness

- Auglaize County households had the following disaster preparedness supplies: working flashlight and working batteries (87%); cell phone (83%); working smoke detector (82%); cell phone with texting (81%); computer/tablet (76%); home land-line telephone (53%); 3-day supply of nonperishable food for everyone in the household (52%); 3-day supply of prescription medication for each person who takes prescribed medicines (48%); working battery-operated radio and working batteries (46%); generator (40%); 3-day supply of water for everyone in the household (1 gallon of water per person per day) (34%); communication plan (22%); family disaster plan (10%); and a disaster plan (9%).
- Adults indicated the following as their main method or way of getting information from authorities in a large-scale disaster or emergency: television (82%), radio (70%), internet (64%), friends/family (60%), Emergency Alert System (46%), Facebook (44%), neighbors (42%), newspapers (28%), other social media (9%), Twitter (8%), and other methods (4%).

Social Conditions: Parenting

Key Findings

Two-thirds (66%) of parents discussed a career plan/post-secondary education with their 10-to-17 year-old in the past year. About nine out of ten (92%) of parents reported their child had received all recommended immunizations.

Parenting

- Parents put their child to sleep in the following places as an infant: crib/bassinette (with bumper, blankets, stuffed animals) (65%); car seat (45%); swing (43%); crib/bassinette (no bumper, blankets, stuffed animals) (43%); in bed with parent or another person (38%); pack n' play (35%); floor (23%); and couch or chair (18%).
- When asked how parents put their child to sleep as an infant, 74% said on their back, 25% said on their stomach, 24% said on their side, and 11% said in bed with them or another person.
- Forty-eight percent (48%) of parents reported their child always rode in a car seat when a passenger in a car. Forty-eight percent (48%) of parents indicated their child was too big for a car seat.
- Nearly one-third (32%) of parents reported their child always used a booster seat. Eleven percent (11%) of parents reported their child was too small for a booster seat and, 44% reported their child was over 4'9" and 80 pounds.
- Of the children eligible by height and weight requirements, 74% always wore a seatbelt without a booster seat, and 15% seldom or never wore a seatbelt without a booster seat.
- Ninety-two percent (92%) of parents reported their child had received all recommended immunization shots.
- Reasons for not receiving all recommended immunization shots included the following: fear of immunization (1%), did not think immunization was necessary (1%), personal beliefs (1%), fear of adverse effects (1%), pre-existing health issues (1%), and other reasons (1%).
- In the past year, nearly half (49%) of parents missed work due to their child's illnesses or injuries. Forty-one percent (41%) missed work for their child's medical appointments, 5% missed work due to their child's behavioral/emotional problems, 5% missed work due to lack of/unreliable child care, and 4% missed work due to their child's asthma.
- Parents reported their child had been diagnosed by a health care professional with the following: chronic condition (11%), hearing or speech impairment (4%), mental health disorder (4%), deformity or othopedic impairment (2%), autism spectrum disorder (1%), and other conditions (5%).
- Parents discussed the following sexual health and other health topics with their 10-to-17-year-old in the past vear:
 - Career plan/post-secondary education (66%)
 - Dating and relationships (59%)
 - Bullying (55%)
 - Body image (54%)
 - Weight status (51%)
 - Negative effects of alcohol, tobacco, illegal drugs, or misusing prescription drugs (48%)
 - Social media issues (46%)
 - Abstinence/how to refuse sex (42%)
 - Birth control/condom use/safer sex/STD prevention (40%)
 - Anxiety/depression/suicide (39%)
 - Refusal skills/peer pressure (33%)
 - School/legal consequences of using tobacco/alcohol/other drugs (32%)
 - Volunteering (31%)
 - Energy drinks (12%)

Youth Health: Weight Status

Key Findings

The health assessment identified that 18% of Auglaize County youth were obese, according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 31% of Auglaize County youth reported that they were slightly or very overweight. Almost three-quarters (73%) of youth exercised for 60 minutes on 3 or more days per week.

Youth Weight Status

- BMI for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific as children's body fat changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- Nearly one-fifth (18%) of Auglaize County youth were classified as obese by Body Mass Index (BMI) calculations (YRBS reported 13% for Ohio in 2013 and 14% for the U.S. in 2015); 14% of youth were classified as overweight (2013 YRBS reported 16% for Ohio and 2015 YRBS reported 16% for the U.S.); 64% were normal weight; and 4% were underweight.
- Almost one-third (31%) of youth described themselves as being either slightly or very overweight (2013 YRBS reported 28% for Ohio and 2015 YRBS reported 32% for the U.S.).
- Youth did the following to lose or keep from gaining weight in the past 30 days:
 - Exercised (43%)
 - Drank more water (37%)
 - Ate more fruits and vegetables (30%)
 - Ate less food, fewer calories, or foods lower in fat (28%)
 - Skipped meals (12%)
 - Went without eating for 24 hours or more (3%) (2013 YRBS reported 10% for Ohio and 13% for the U.S.)
 - Took diet pills, powders, or liquids without a doctor's advice (1%) (2013 YRBS reported 5% for Ohio and the U.S.)
 - Vomited or took laxatives (1%) (2013 YRBS reported 5% for Ohio and 4% for the U.S.)
 - Smoked cigarettes or e-cigarettes to lose weight (1%)
- Nearly two-fifths (39%) of youth did not do anything to lose or keep from gaining weight.

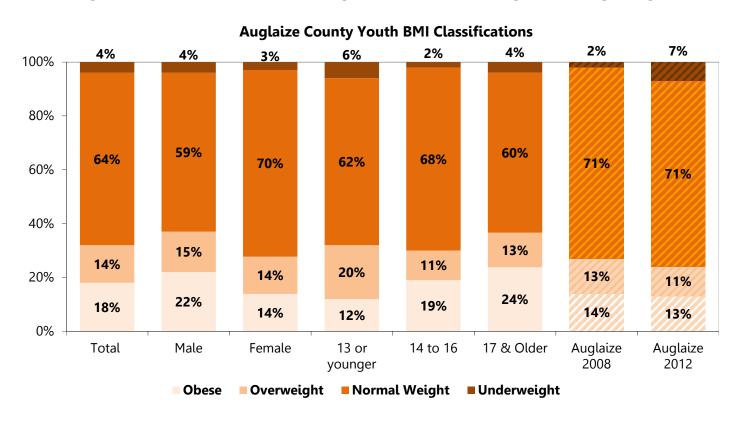
Nutrition

- Fourteen percent (14%) of youth ate 5 or more servings of fruits and vegetables per day, and four-fifths (79%) of youth ate 1 to 4 servings of fruits and vegetables per day. Seven percent (7%) of youth ate 0 servings of fruits and vegetables for the following reasons: they did not like fruits and vegetables (4%), they could not afford fruits and vegetables (<1%), they did not have access to fruits and vegetable (3%).
- Youth reported eating out or bringing home take-out food at the following frequencies: 1 to 2 meals per week (67%), 3 to 4 meals per week (13%), and 5 or more meals per week (3%). Youth ate out or brought home take-out an average of 2.0 times per week.
- Nearly one-quarter (24%) 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. About one-in-ten youth (9%) drank 3 or more sugary beverages per day.

Physical Activity

- Almost three-fourths (73%) of youth participated in at least 60 minutes of physical activity on 3 or more days in the past week; 48% did so on 5 or more days in the past week (2013 YRBS reports 48% for Ohio and 2015 YRBS reports 49% for the U.S.); and 25% did so every day in the past week (2013 YRBS reports 26% for Ohio and 2015 YRBS reports 27% for the U.S.). One-tenth (10%) of youth did not participate in at least 60 minutes of physical activity on any day in the past week (2013 YRBS reports 13% for Ohio and 2015 YRBS reports 14% for the U.S.).
- The CDC recommends that children and adolescents participate in at least 60 minutes of physical activity per day. 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.

The following graph shows the percentage of Auglaize County youth who were classified as obese, overweight, normal weight or underweight according to Body Mass Index (BMI) by age. Examples of how to interpret the information in the graph include: 64% of all Auglaize County youth were classified as normal weight, 18% were obese, 14% were overweight, and 4% were underweight for their age and gender.



Healthy People 2020 Nutrition and Weight Status (NWS)

Objective	Auglaize County 2017	Ohio 2013	U.S. 2015	Healthy People 2020 Target
NWS-10.4 Reduce the proportion of children and adolescents aged 2 to 19 years who are considered obese	18% (6-12 Grade) 21% (9-12 Grade)	13% (9-12 Grade)	14% (9-12 Grade)	15%*

Note: the Healthy People 2020 target is for children and youth aged 2-19 years. Sources: Healthy People 2020 Objectives, 2013 Ohio YRBS, 2015 U.S. YRBS NHANES, CDC/NCHS, 2017 Auglaize County Health Assessment

Youth Comparisons	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Obese	14%	13%	18%	21%	13%	14%
Overweight	13%	11%	14%	11%	16%	16%
Described themselves as slightly or very overweight	30%	28%	31%	31%	28%	32%
Exercised to lose weight	N/A	28%	43%	48%	N/A	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight	N/A	8%	28%	32%	N/A	N/A
Went without eating for 24 hours or more	11%	2%	3%	4%	10%	13%*
Took diet pills, powders, or liquids without a doctor's advice	5%	1%	1%	2%	5%	5%*
Vomited or took laxatives	3%	0%	1%	1%	5%	4%*
Ate 1 to 4 servings of fruits and vegetables per day	N/A	81%	79%	82%	N/A	N/A
Physically active at least 60 minutes per day on every day in past week	N/A	69%	25%	25%	26%	27%
Physically active at least 60 minutes per day on 5 or more days in past week	N/A	49%	48%	49%	48%	49%
Did not participate in at least 60 minutes of physical activity on any day in past week	N/A	12%	10%	9%	13%	14%

N/A – Not Available

^{*}Comparative YRBS data for U.S. is 2013

THE MORE THEY BURN THE BETTER THEY LEARN



YOUR CHILD **AMOUNT OF** ACTIVITY

VARIOUS ACTIVITIES

ACADEMIC ACHIEVEMENT

Did you know that kids who are physically active get better grades? Research shows that students who earn mostly As are almost twice as likely to get regular physical activity than students who receive mostly Ds and Fs.

Physical activity can help students focus, improve behavior and boost positive attitudes. Do what you can to help your child be physically active, be it running, biking or swimming. Any type of physical activity is good, and 60 minutes a day is best. Their grades will thank you!



FOR MORE INFORMATION, VISIT MakingHealthEasier.org/BurnToLearn

SOURCES

CDC. Physical Inactivity and Unhealthy Dietary Behaviors and Academic Achievement.

CDC. The association between school based physical activity, including physical education, and academic performance. Atlanta, GA: U.S. DHHS; 2010.

Youth Health: Tobacco Use

Key Findings

The health assessment identified that 6% of Auglaize County youth were current smokers, increasing to 10% of those ages 17 and older. Fourteen percent (14%) of those who had smoked a whole cigarette did so at 10 years old or younger. Two-thirds (66%) of youth who smoked in the past year had tried to quit smoking.

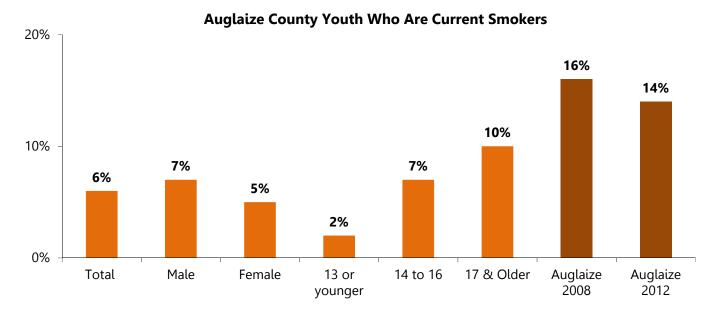
Youth Tobacco Use Behaviors

- One-fifth (21%) of Auglaize County youth had tried cigarette smoking, increasing to 36% of those ages 17 and older (YRBS reported 32% for the U.S. in 2015).
- Four percent (4%) of all youth had smoked a whole cigarette for the first time before the age of 13 (YRBS reported 7% for the U.S. in 2015).
- Fourteen percent (14%) of those who had smoked a whole cigarette did so at 10 years old or younger, and another 15% had done so by 12 years old. The average age of onset for smoking was 13.6 years old.
- Six percent (6%) of youth were current smokers, having smoked at some time in the past 30 days (YRBS reported 15% for Ohio in 2013 and 11% for the U.S. in 2015).
- One percent (1%) of all youth smoked cigarettes on 20 or more days during the past month (2013 YRBS reported 7% for Ohio and 3% for the U.S. in 2015).

In 2017, 6% of Auglaize County youth were current smokers, having smoked at some time in the past 30 days.

- About nine out of ten (91%) youth identified as current smokers were also current drinkers, defined as having had a drink of alcohol in the past 30 days.
- Youth used the following forms of tobacco in the past year: cigarettes (11%); e-cigarettes (8%); chewing tobacco, snuff, or dip (8%); cigars (5%); Swishers (5%); Black and Milds (3%); pouch [snus] (2%); cigarillos (2%); hookah (1%); and little cigars (1%).
- Youth smokers reported the following ways of obtaining cigarettes:
 - Borrowed cigarettes from someone else (30%)
 - A person 18 years or older gave them the cigarettes (30%)
 - Bought cigarettes from a store or gas station (20%) (2015 YRBS reported 18% for the U.S.)
 - Took them from a store or family member (20%)
 - Some other way (23%)
- Two-thirds (66%) of youth who smoked in the past year had tried to quit smoking (2015 YRBS reported 45% for the U.S.).

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



Behaviors of Auglaize County Youth

Current Smokers vs. Non-Current Smokers

Youth Behaviors	Current Smoker	Non- Current Smoker
Have had at least one drink of alcohol in the past 30 days	91%	15%
Participated in extracurricular activities	78%	93%
Have used marijuana in the past 30 days	65%	1%
Ever misused medications	57%	2%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	50%	23%
Been bullied in any way in the past year	48%	46%
Seriously considered attempting suicide in the past 12 months	48%	11%
Attempted suicide in the past 12 months	18%	3%

[&]quot;Current smokers" indicate youth who self-reported smoking at any time during the past 30 days.

Healthy People 2020

Tobacco Use (TU)

Objective	Auglaize County 2017	Ohio 2013	U.S. 2015	Healthy People 2020 Target
TU-2.2 Reduce use of cigarettes by adolescents (past month)	6% (6-12 Grade) 8% (9-12 Grade)	15% (9-12 Grade)	11% (9-12 Grade)	16%*

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

(Sources: Healthy People 2020 Objectives, 2013 Ohio YRBS, 2015 YRBS, CDC/NCHHSTP, 2017 Auglaize County Health Assessment)

Youth Comparisons	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Ever tried cigarettes	30%	29%	21%	31%	52%*	32%
Current smokers	16%	14%	6%	8%	15%	11%
Smoked cigarettes on 20 or more days during the past month (of all youth)	7%	5%	1%	2%	7%	3%
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	10%	7%	4%	5%	14%*	7%
Tried to quit smoking (of youth who smoked in the past year)	40%	47%	66%	71%	56%*	45%

^{*}Comparative YRBS data for Ohio is 2011

E-Cigarette Use Among Youth and Young Adults

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

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

Youth Health: Alcohol Use

Key Findings

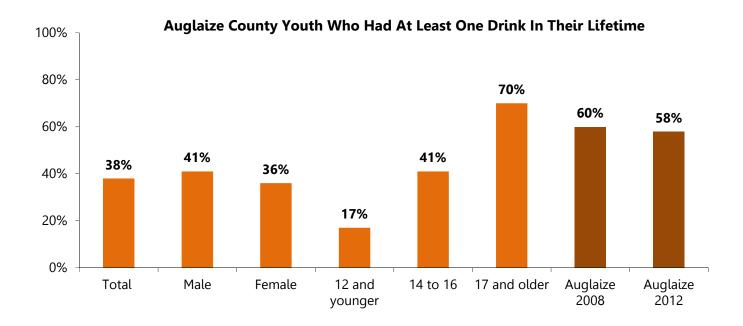
Almost two-fifths (38%) of Auglaize County youth had drank at least one drink of alcohol in their life, increasing to 70% of youth 17 and older. Almost one-fifth (19%) of youth had at least one drink in the past 30 days, defining them as a current drinker. Of those who drank, 61% were defined as binge drinkers, increasing to 70% of males.

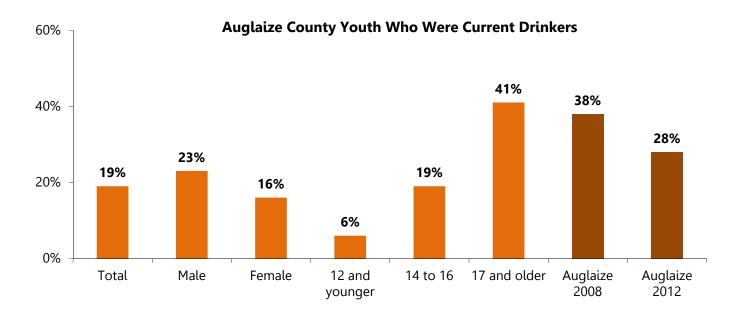
In 2017, 19% of Auglaize County youth had at least one drink in the past 30 days.

Youth Alcohol Consumption

- Almost two-fifths (38%) of youth had at least one drink of alcohol in their life, increasing to 70% of those ages 17 and older (2015 YRBS reports 63% for the U.S.).
- Almost one-fifth (19%) of youth had at least one drink in the past 30 days, increasing to 41% of those ages 17 and older (YRBS reports 30% for Ohio in 2013 and 33% for the U.S. in 2015).
- Based on all youth surveyed, 12% had five or more alcoholic drinks on an occasion in the last month and would be considered binge drinkers, increasing to 26% of those ages 17 and older. (YRBS reports 16% for Ohio in 2013 and 18% for the U.S. in 2015).
- Of those who drank, 61% were defined as binge drinkers, increasing to 70% of males.
- Of all youth, 9% had drunk alcohol for the first time before the age of 13 (YRBS reports 13% of Ohio youth drank alcohol for the first time before the age of 13 in 2013 and 17% for the U.S. in 2015).
- About one-quarter (26%) of youth who reported drinking at some time in their life had their first drink at 12 years old or younger, 34% took their first drink between the ages of 13 and 14, and 40% started drinking between the ages of 15 and 18. The average age of onset was 13.6 years old.
- Youth drinkers reported they got their alcohol from the following: someone gave it to them (38%)[2013 YRBS reports 38% for Ohio and 2015 YRBS reports 44% for the U.S.]; a parent gave it to them (27%); an older friend or sibling bought it to them (18%); someone older bought it (14%); bought it in a liquor store/convenience store/gas station (5%); a friend's parent gave it to them (4%); took it from a store or family member (4%); bought it with a fake ID (1%); and some other way (19%).
- Youth drinkers reported drinking alcohol at the following places: at a friend's home (56%); in their home (53%); at another person's home (14%); at a restaurant, bar or club (3%); on school property (3%); and while riding in or driving a car or another vehicle (1%).
- During the past month, 16% of all Auglaize County youth had ridden in a car driven by someone who had been drinking alcohol (YRBS reports 17% for Ohio in 2013 and 20% for the U.S. in 2015).
- Two percent (2%) of youth drivers had driven a car in the past month after they had been drinking alcohol (YRBS reports 4% for Ohio in 2013 and 8% for the U.S. in 2015).
- Youth reported the last time a parent or guardian talked to them about the dangers of underage drinking or drug use was less than a month ago (33%), 2-3 months ago (14%), 4-6 months ago (5%), 7-12 months ago (3%), and more than a year ago (19%). About one quarter (26%) of youth reported their parent never talked to them about this subject.

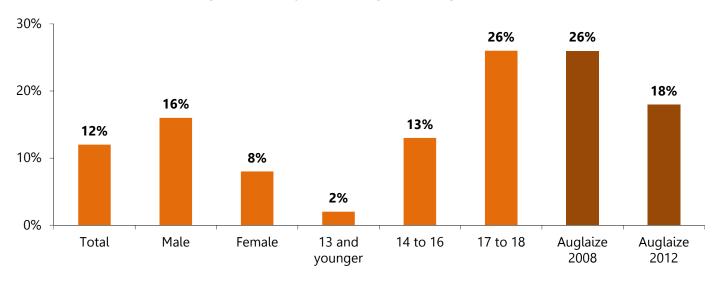
The following graphs show the percentage of Auglaize County youth who drank in their lifetime and who were current drinkers. Examples of how to interpret the information include: 38% of all Auglaize County youth have drank at some time in their life, including 41% of males and 36% of females.





The following graph shows the percentage of youth current drinkers who were binge drinkers. Examples of how to interpret the information include: 12% of youth binge drank in the past month, including 16% of males and 8% of females.

Auglaize County Youth Binge Drinking in Past Month



Based on all Auglaize County youth surveyed, 12% were defined as binge drinkers.

Behaviors of Auglaize County Youth

Current Drinkers vs. Non-Current Drinkers

Youth Behaviors	Current Drinker	Non-Current Drinker
Participated in extracurricular activities	93%	92%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	42%	20%
Seriously considered attempting suicide in the past 12 months	29%	10%
Smoked cigarettes in the past 30 days	28%	1%
Ever misused medications	24%	1%
Used marijuana in the past 30 days	22%	1%
Attempted suicide in the past 12 months	10%	2%

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

Healthy People 2020

Substance Abuse (SA)

Objective	Auglaize County 2017	Ohio 2013	U.S. 2015	Healthy People 2020 Target
SA-14.4 Reduce the proportion of persons engaging in binge drinking during the past month	12% (6-12 Grade) 18% (9-12 Grade)	16% (9-12 Grade)	18% (9-12 Grade)	9%*

*Note: The Healthy People 2020 target is for youth aged 12-17 years. (Sources: Healthy People 2020 Objectives, 2015 YRBS, 2017 Auglaize County Health Assessment)

Youth Comparisons	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th –12 th)	Ohio 2013 (9 th –12 th)	U.S. 2015 (9 th –12 th)
Ever had at least one drink of alcohol in lifetime	60%	58%	38%	53%	71%*	63%
Used alcohol during past month	38%	28%	19%	28%	30%	33%
Binged during past month (5 or more drinks in a couple of hours on an occasion)	26%	18%	12%	18%	16%	18%
Drank for the first time before age 13 (of all youth)	20%	16%	9%	7%	13%	17%
Rode with someone who was drinking in past month	23%	18%	16%	12%	17%	20%
Drank and drove (of youth drivers)	8%	7%	2%	2%	4%	8%

*Comparative YRBS data for Ohio is 2011

Teen Binge Drinking: On the Decline

- From 2015 to 2016, statistically significant declines in underage drinking were recorded for 8th and 10th grades lifetime and annual consumption and been drunk in the past year and lifetime, 8th grade past 30day consumption and binge drinking (5 or more drinks in a row in the last two weeks), and 12th grade daily alcohol consumption.
- 77% 8th graders report they have never consumed alcohol, down 67% proportionally from 70% in 1991 to 23% in 2016. Lifetime consumption of alcohol among tenth graders and twelfth graders declined proportionally 48% and 30%, respectively, since 1991
- One in five eighth grade students (18%), 38% of tenth graders, and 56% of twelfth graders report they consumed alcohol in the past year. See more at: http://responsibility.org/get-thefacts/research/statistics/underage-drinking-statistics

(Source: Foundation For Advancing Alcohol Responsibility: Underage Drinking Statistics)

Youth Health: Drug Use

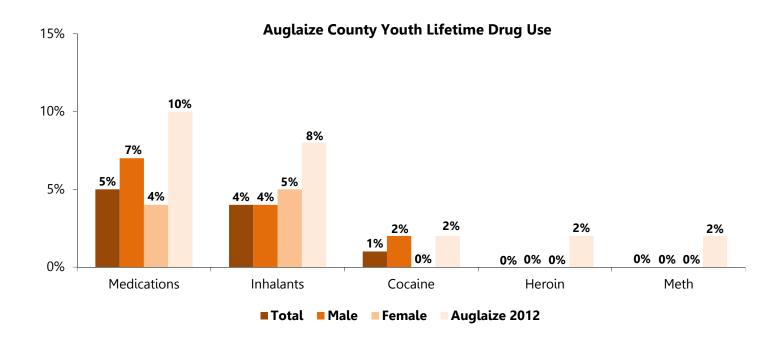
Key Findings

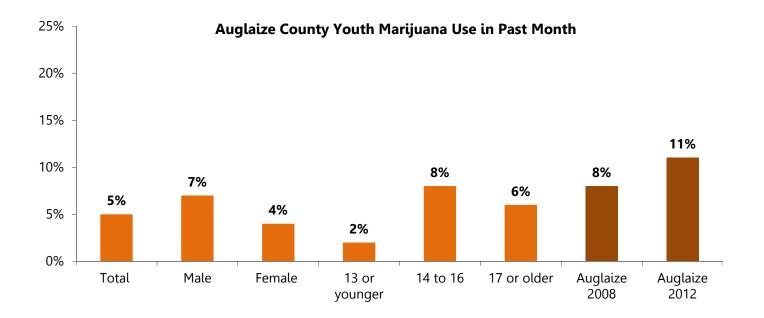
In 2017, 5% of Auglaize County youth had used marijuana at least once in the past 30 days, increasing to 8% of those ages 14-16. Five percent (5%) of youth used medications that were not prescribed for them or took more than prescribed to get high at some time in their life.

Youth Drug Use

- In 2017, 5% of all Auglaize County youth had used marijuana at least once in the past 30 days, increasing to 8% of those ages 14-16. The 2013 YRBS found a prevalence of 21% for Ohio youth and a prevalence of 22% for U.S. youth in 2015.
- Auglaize County youth have tried the following in their life:
 - Inhalants (4%) (YRBS reports 9% for Ohio in 2013 and 7% for the U.S. in 2015)
 - Misused cough syrup (3%)
 - Liquid THC (2%)
 - K2/spice (2%)
 - Misused over-the-counter medications (2%)
 - Bath salts (1%)
 - Went to a pharm party (1%)
 - Misused hand sanitizer (1%)
 - Posh/salvia/synthetic marijuana (1%)
 - Cocaine (1%) (YRBS reports 4% for Ohio in 2013 and 5% for U.S. in 2015)
 - Ecstasy/MDMA/Molly (1%) (YRBS reports 5% for the U.S. in 2015)
 - GhB (<1%)</p>
- Five percent (5%) of youth used medications that were not prescribed for them or took more than prescribed to get high at some time in their life.
- Youth who misused prescription medications got them in the following ways: a friend gave it to them (42%), a parent gave it to them (21%), they bought it from someone else (21%), they took it from a friend or family member (16%), they bought it from a friend (16%), and the internet (5%).
- In the past month, youth reported being on school property under the influence of the following:
 - Marijuana (2%)
 - Prescription drugs not prescribed for them (1%)
 - Alcohol (<1%)</p>
 - Other illegal drugs (<1%)
- Youth reported their parents would disapprove of them misusing prescription drugs (82%), smoking cigarettes (81%), using marijuana (75%), and drinking alcohol (67%).
- Youth agreed with the following statements: using marijuana leads to using other drugs (50%), marijuana is addictive (47%), medical marijuana should be legalized (38%), and recreational marijuana should be legalized (18%). Nearly one-quarter (24%) of youth disagreed with the above statements.
- Youth indicated the following reasons for not using drugs: parents would be upset (73%), personal values (70%), legal consequences (48%), being kicked out of extra-curricular activities (46%), health problems (41%), friends would not approve (36%), random student drug testing (17%), and other (28%).

The following indicate youth lifetime drug use and youth marijuana use in the past 30 days. Examples of how to interpret the information include: 5% of youth have misused medication at some point in their life, including 7% of males and 4% of females.





Behaviors of Auglaize County Youth

Current Marijuana Use vs. Non-Current Marijuana Use

Youth Behavior	Current Marijuana User	Non- Current Marijuana User
Participated in extracurricular activities	80%	92%
Drank alcohol in the past 30 days	80%	16%
Smoked cigarettes in the past 30 days	75%	2%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	74%	21%
Ever misused medications	60%	2%
Been bullied in any way in the past year	55%	45%
Seriously considered attempting suicide in the past 12 months	45%	11%
Attempted suicide in the past 12 months	10%	3%

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

Youth Comparisons	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Used marijuana in the past month	8%	11%	5%	7%	21%	22%
Used methamphetamines in their	1%	2%	0%	0%	N/A	3%
Used cocaine in their lifetime	3%	2%	1%	1%	4%	5%
Used heroin in their lifetime	2%	2%	0%	0%	2%	2%
Used inhalants in their lifetime	9%	8%	4%	5%	9%	7%
Used ecstasy/MDMA/Molly in their lifetime	N/A	2%	1%	2%	N/A	5%
Ever misused medications	9%	10%	5%	7%	N/A	N/A

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 2014 National Survey on Drug Use and Health (NSDUH), an estimated 10 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.
- One NHTSA study found that in 2009, 18 percent of drivers killed in a crash tested positive for at least one drug. A 2010 study showed that 1 percent of deadly crashes involved a drugged driver

(Source: National Institute on Drug Abuse, The Science of Drug Abuse & Addiction: Drug Facts: Drugged Driving, June 2016)

Youth Health: Sexual Behavior

Key Findings

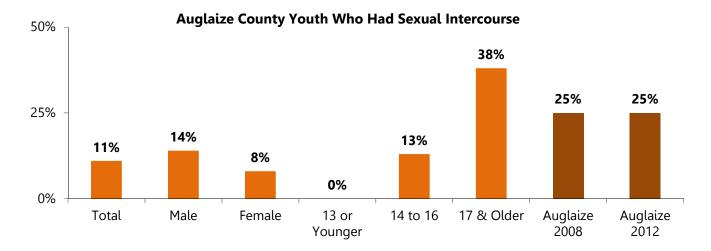
Disclaimer: Two out of five Auglaize County school districts did not ask sexual behavior questions. Please use data with caution. In 2017, 11% of Auglaize County youth have had sexual intercourse. Fourteen percent (14%) of sexually active youth had 4 or more sexual partners. Seven percent (7%) of youth engaged in intercourse without a reliable method of protection, and 24% reported they were unsure if they used a reliable method. Sixteen percent (16%) of youth had not been taught about pregnancy prevention, sexually transmitted diseases, HIV/AIDS, or the use of condoms.

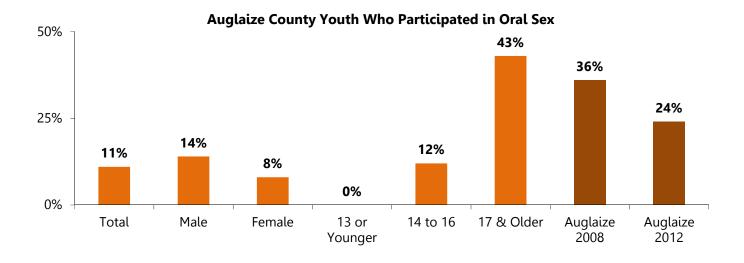
11% of Auglaize County youth have had sexual intercourse.

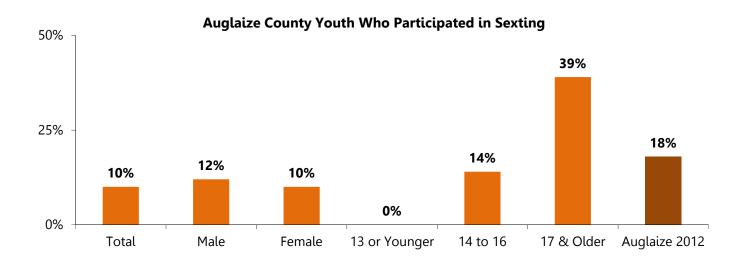
Youth Sexual Behavior

- Disclaimer: Two out of five participating Auglaize County school districts did not ask sexual behavior questions. Please use data with caution.
- Eleven percent (11%) of Auglaize County youth have had sexual intercourse, increasing to 38% of those ages 17 and over. (The YRBS reports 43% for Ohio in 2013 and 41% for U.S. in 2015).
- About one-in-ten (11%) youth had participated in oral sex, increasing to 43% of those ages 17 and over.
- Two percent (2%) of youth had participated in anal sex, increasing to 10% of those ages 17 and over.
- One-tenth (10%) of youth had participated in sexting, increasing to 29% of those ages 17 and over.
- Nearly one-fifth (19%) of youth had viewed pornography, increasing to 30% of males and 48% of those ages 17 and over.
- Of sexually active youth, 45% had one sexual partner and 55% had multiple partners.
- Fourteen percent (14%) of sexually active youth had 4 or more sexual partners (2013 YRBS reports 28% for Ohio).
- Two percent (2%) of <u>all</u> youth had 4 or more sexual partners (YRBS reports 12% for Ohio in 2013 and 12% for the U.S. in 2015).
- Of sexually active youth, 14% had done so by the age of 13, and another 41% had done so by 15 years of age. The average age of onset was 15.1 years old
- Of <u>all</u> youth, 1% were sexually active before the age of 13 (YRBS reports 4% for Ohio in 2013 and 4% for the U.S. in 2015)
- Almost one-third (31%) of youth who were sexually active used condoms to prevent pregnancy; 21% used birth control pills; 7% used the withdrawal method; 3% used a shot, patch or birth control ring; and 3% used an IUD. However, 7% were engaging in intercourse without a reliable method of protection, and 24% reported they were unsure.
- Youth learned about pregnancy prevention, sexually transmitted diseases, HIV/AIDS, and the use of condoms from school (69%), their parents (50%), their friends (19%), the internet or social media (19%), their doctor (18%), their siblings (12%), church (8%), and somewhere else (2%). Sixteen percent (16%) of youth had not been taught about these subjects.

The following graphs show the percentage of Auglaize County youth who participated in sexual intercourse, oral sex, and sexting. Examples of how to interpret the information include: 11% of all Auglaize County youth had sexual intercourse, including 14% of males, and 8% of females.







Youth Comparisons	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Ever had sexual intercourse	25%	25%	11%	20%	43%	41%
Used a condom at last intercourse	61%	66%	31%	35%	51%	57%
Used birth control pills at last intercourse	33%	28%	21%	23%	24%	18%
Did not use any method to prevent pregnancy during last sexual intercourse	17%	16%	7%	8%	12%	14%
Had four or more sexual partners (of all youth)	5%	7%	2%	3%	12%	12%
Had sexual intercourse before age 13 (of all youth)	3%	3%	1%	1%	4%	4%

Disclaimer: Two out of five participating Auglaize County school districts did not ask sexual behavior questions. Please use data with caution.

Sexual Risk Behavior

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

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

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

- Young people (aged 13-24) accounted for an estimated 22% of all new HIV diagnoses in the United States in
- Among young people (aged 13-24) diagnosed with HIV in 2014, 81% were gay and bisexual males.
- Half of the nearly 20 million new STDs reported each year are among young people, between the ages 15–24
- Nearly 230,000 babies were born to teen girls aged 15-19 years in 2014.

(Source: CDC, Adolescent and School Health, updated 3/10/17)

Youth Health: Mental Health

Key Findings

The health assessment results indicated that 13% of Auglaize County youth had seriously considered attempting suicide in the past year; 4% attempted suicide in the past year. One-quarter (25%) of youth who felt depressed or suicidal reported it would be very unlikely for them to seek help.

Youth Mental Health

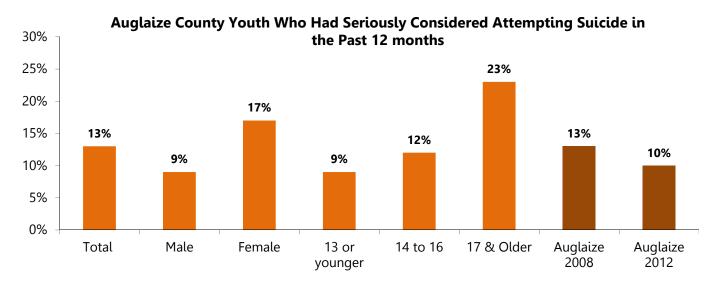
- More than two-fifths (43%) of youth hit their head hard enough that they were dizzy, had a concussion, were knocked out, or had their "bell rung."
- About one-quarter (24%) of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, increasing to 41% of females (YRBS reported 26% for Ohio in 2013 and 30% for the U.S. in 2015).
- Thirteen percent (13%) of youth reported they had seriously considered attempting suicide in the past 12 months, increasing to 17% of females. Seventeen percent (17%) of high school youth had seriously considered attempting suicide, compared to the 2015 YRBS rate of 18% for U.S. youth and the 2013 YRBS rate of 14% for Ohio youth.
- One-tenth (10%) of youth reported they had made a plan to attempt suicide in the past 12 months, increasing to 13% of those 17 and older.
- In the past year, 4% of youth had attempted suicide. Two percent (2%) of youth had made more than one attempt. The 2015 YRBS reported a suicide attempt prevalence rate of 9% for U.S. youth and a 2013 YRBS rate of 6% for Ohio youth.

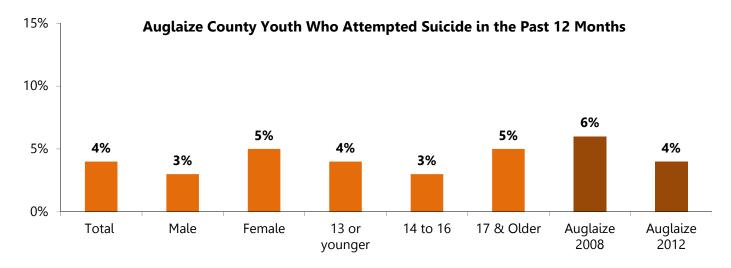
24% of Auglaize County youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.

- Of those who attempted suicide, 5% resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse. (YRBS reported 1% for Ohio in 2013 and 3% for the U.S. in 2015).
- Youth reported the following caused them anxiety, stress or depression: academic success (41%); fighting with friends (31%); stress at home (30%); self-image (29%); sports (28%); peer pressure (28%); death of close family member or friend (26%); fighting at home (23%); being bullied (20%); breakup (17%); dating relationship (16%); parent divorce/separation (12%); poverty/no money (9%); caring for younger siblings (6%); sexual orientation (4%); not having enough to eat (3%); not having a place to live (1%); and other (21%).
- Youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (38%); texting someone (33%); hobbies (30%); exercising (24%); talking to someone in their family (22%); talking to a peer (21%); eating (19%); praying/reading the Bible (17%); using social media (16%); breaking something (12%); writing in a journal (9%); shopping (5%); and drinking alcohol, smoking/using tobacco, using illegal drugs (5%). One-fifth (20%) of youth reported they did not have anxiety, stress, or depression.

- When youth had feelings of depression or suicide, they talked to the following: best friend (60%); parents (33%); girlfriend or boyfriend (26%); brother/sister (13%); an adult relative such as a grandparent, aunt or uncle (13%); professional counselor (10%); caring adults (9%); adult friend (9%); teacher (6%); school counselor (6%); coach (4%); pastor/priest (2%); youth minister (2%); Teen Line or First Call for Help (1%); and other (9%). Seventeen percent (17%) of youth reported they had no one to talk to when they had feelings of depression or suicide.
- Of youth who felt depressed or suicidal, 33% reported they would be very likely to seek help. One-quarter (25%) of youth reported it would be very unlikely for them to seek help.
- Almost half (49%) of youth reported they would seek help if they were dealing with anxiety, stress, depression or thoughts of suicide. Reasons for not seeking help included the following: they can handle it themselves (32%), worried what others might think (28%), no time (10%), did not know where to go (8%), their friends would not support them (6%), cost (4%), they were already in treatment (4%), their family would not support them (4%), and transportation (4%).

The following graphs show Auglaize County youth who had seriously considered attempting suicide in the past year and had attempted suicide in the past year. Examples of how to interpret the information includes: 13% of youth seriously considered attempting suicide in the past year, including 9% of males, and 17% of females.





Healthy People 2020

Mental Health and Mental Disorders (MHMD)

Objective	Auglaize County 2017	Ohio 2013	U.S. 2015	Healthy People 2020 Target
MHMD-2 Reduce suicide attempts by adolescents‡	<1% (9-12 Grade)	1% (9-12 Grade)	9% (9-12 Grade)	2%*

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

Behaviors of Auglaize County Youth

Contemplated Suicide vs. Did Not Contemplate Suicide

Youth Behaviors	Contemplated Suicide	Did Not Contemplate Suicide
Been bullied in any way in the past year	69%	42%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	51%	20%
Had at least one drink of alcohol in the past 30 days	41%	15%
Smoked cigarettes in the past 30 days	22%	4%
Used marijuana in the past 30 days	18%	3%

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

Youth Comparisons	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	21%	20%	24%	27%	26%	30%
Youth who had seriously considered attempting suicide in the past year	13%	10%	13%	17%	14%	18%
Youth who had made a plan to attempt suicide	N/A	N/A	10%	12%	11%	15%
Youth who had attempted suicide in the past year	6%	4%	4%	4%	6%	9%
Suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse	N/A	N/A	5%	6%	1%	3%

N/A – Not Available

*[‡]This objective is based upon attempted suicide that resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse.*Sources: Healthy People 2020 Objectives, 2013 Ohio YRBS, 2015 YRBS, CDC/NCHHSTP, 2017 Auglaize County Health Assessment

Youth Health: Social Determinants of Health

Key Findings

Nearly one-quarter (24%) of youth had three or more adverse childhood experiences (ACEs). Twenty-four percent (24%) of Auglaize County youth drivers had texted while driving in the past 30 days. More than half of youth (57%) always wore a seatbelt when riding in a car driven by someone else.

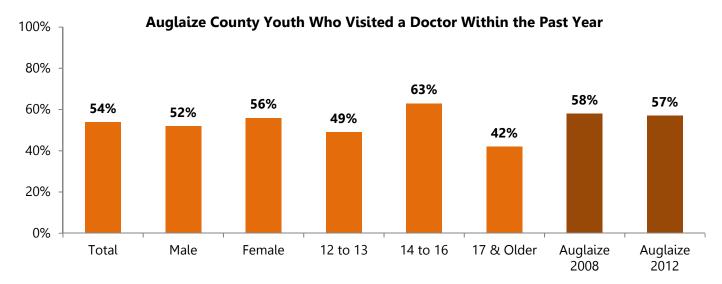
Personal Health

- More than half (54%) of youth had been to the doctor for a routine check-up in the past year, increasing to 63% of those ages 14 to 16.
- Three percent (3%) of youth reported having had never been to the doctor.
- Youth last saw a dentist for a check-up, exam, teeth cleaning, or other dental work: less than a year ago (74%), (2013 YRBS reported 75% for Ohio), 1 to 2 years ago (12%), more than 2 years ago (2%), never (1%), and do not know (11%).

Personal Safety

- In the past month, youth drivers did the following while driving: wore a seatbelt (99%), ate (47%), talked on their cell phone (35%), drove while tired or fatigued (34%), texted (24%), used their cell phone other than for talking or texting (16%), drank alcohol (<1%), misused prescription drugs (<1%), used marijuana (<1%), used illegal drugs (<1%), and applied makeup (<1%).
- About one-quarter (26%) of youth drivers had more than one distraction while driving.
- When riding in a car driven by someone else, youth reported they wore a seatbelt: always (57%), most of the time (31%), sometimes (7%), rarely (4%), and never (2%).
- Three percent (3%) of youth had played the choking game, also known as the pass-out game, space monkey, or dream game.
- Eighty-nine percent (89%) of youth had a Twitter, Instagram, Facebook, online gaming, or other social network account.
- Of those who had an account, they reported the following:
 - Their account was currently checked private (54%)
 - They knew all of their "friends" (50%)
 - They knew all of the people they play online (25%)
 - Their parents had their password (20%)
 - Their friends had their password (6%)
 - They were bullied because of their accounts (6%)
 - They had been asked to meet someone they met online (5%)
 - They share personal information (5%)
 - They had participated in sexual activity with someone they met online (5%)
 - Their parents do not know they have an account (4%)
- Nearly three-quarters (71%) of youth who had a Twitter, Instagram, Facebook, online gaming, or other social network account believed that sharing information online is dangerous.

Youth Comparisons	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Visited a dentist for a check-up within the past year	77%	77%	74%	76%	75%	74%
Always wore a seatbelt	39%	39%	57%	60%	92%	94%
Rarely or never wore a seatbelt	11%	14%	6%	4%	8%	6%



Social and Community Context

- Auglaize County youth lived with the following: both parents (65%), one parent (11%), mother and step-father (11%), father and step-mother (4%), mother and partner (3%), grandparents (3%), another relative (1%), and quardians/foster parents (1%). One percent (1%) of youth reported having shared parenting.
- Youth participated in the following extra-curricular activities: sports or intramural program (55%), school club or social organization (40%), exercise outside of school (36%), church or religious organization (29%), church youth group (23%), part-time job (23%), some other organized activity (20%), take care of siblings after school (18%), babysit for other kids (17%), volunteer in the community (16%), and take care of parents or grandparents (3%). Nearly one-tenth (8%) of youth did not participate in any extra-curricular activities.
- Youth did not participate in extra-curricular activities for the following reasons: they were not interested (25%), they had a job (5%), they had to watch younger siblings (5%), transportation (3%), the activity did not exist or was not offered (2%), they could not afford it (2%), and their parents would not take them (2%).
- More than half (53%) of youth reported the following adverse childhood experiences (ACEs): parents became separated or were divorced (31%); parents or adults in home swore at them, insulted them or put them down (25%); lived with someone who was depressed, mentally ill or suicidal (15%); family did not look out for each other, feel close to each other, or support each other (14%); lived with someone who was a problem drinker or alcoholic (13%); lived with someone who served time or was sentenced to serve in prison or jail (13%); parents were not married (12%); lived with someone who used illegal drugs or misused prescription drugs (11%); parents or adults in the home abused each other (6%); parents or adults in home abused them (6%); did not have enough to eat, had to wear dirty clothes, and had no one to protect them (3%); an adult or someone 5 years older than them touched them sexually (2%); and an adult or someone 5 years older than them forced them to have sex (<1%).
- Nearly one-quarter (24%) of youth had three or more adverse childhood experiences

Behaviors of Auglaize County Youth

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

Youth Behaviors	Experienced 3 or More ACEs	Did Not Experience Any ACEs
Participated in extracurricular activities	89%	95%
Have had at least one drink of alcohol in the past 30 days	33%	13%
Seriously considered attempting suicide in the past 12 months	28%	4%
Used marijuana in the past 30 days	16%	1%
Have smoked cigarettes in the past 30 days	12%	3%
Attempted suicide in the past 12 months	9%	1%

[&]quot;ACEs" indicate youth who self-reported having experienced three or more adverse childhood experiences in their lifetime.

Adverse Childhood Experiences (ACEs)

- Childhood abuse, neglect, and exposure to other traumatic stressors which we term adverse childhood experiences (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.
- The short and long-term outcomes of these childhood exposures include a multitude of health and social problems such as:

Depression
 Alcoholism and alcohol abuse

— Fetal death — COPD

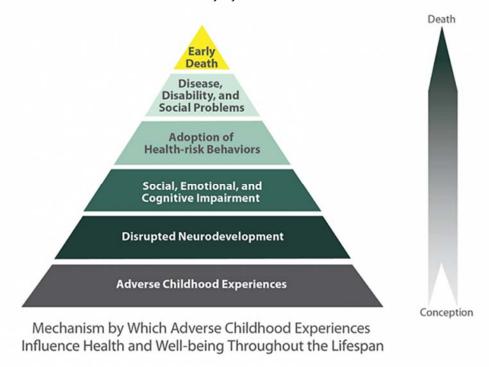
— Illicit drug use
 — Unintended pregnancies

Liver diseaseSuicide attempts

— STD's— Early initiation of smoking

Multiple sexual partners
 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,, June 2016

Youth Health: Violence

Key Findings

One-tenth (10%) of Auglaize County youth carried a weapon (such as a gun, knife or club) in the past month. About one-fifth (21%) of youth had been involved in a physical fight, increasing to 29% of males. Nearly half (46%) of youth had been bullied in the past year.

Violence-Related Behaviors

- One-tenth (10%) of youth carried a weapon (such as a gun, knife or club) in the past 30 days, increasing to 16% of males (YRBS reported 14% for Ohio in 2013 and 16% for the U.S. in 2015).
- One percent (1%) of youth had carried a weapon on school property in the past 30 days.
- Three percent (3%) of youth were threatened or injured with a weapon on school property in the past year (2015 YRBS reported 6% for the U.S.).
- Three percent (3%) of youth did not go to school on one or more days because they did not feel safe at school or on their way to or from school (YRBS reported 5% for Ohio in 2013 and 6% for the U.S. in 2015).

Physical and Sexual Violence

- In the past year, 21% of youth had been involved in a physical fight, increasing to 29% of males (YRBS reported 20% for Ohio in 2013 and 23% for the U.S. in 2015).
- Of those who had been in a physical fight, 50% had been in a fight on more than one occasion.
- In the past year, 6% of youth had been involved in a physical fight on school property.
- Two percent (2%) of youth reported a boyfriend or girlfriend hit, slapped, or physically hurt them on purpose in the past 12 months (2015 YRBS reported 10% for the U.S.).
- In the past year, 6% of youth reported an adult or caregiver had ever hit, slapped or physically hurt them on purpose.
- Over one-quarter (27%) of youth purposefully hurt themselves by cutting, scratching, burning, hitting or biting, increasing to 31% of females. Nearly one-tenth (9%) of youth had purposefully hurt themselves 10 or more times.
- Six percent (6%) of youth reported someone touched them in an unsafe sexual way.
- Two percent (2%) of youth had been forced to participate in a sexual activity when they did not want to, increasing to 5% of those over the age of 17.

Bullying

- Nearly half (46%) of youth had been bullied in the past year. The following types of bullying were reported:
 - Over one-third (36%) of youth were verbally bullied (teased, taunted or called harmful names)
 - About one-quarter (26%) of youth were indirectly bullied (spread mean rumors about them or kept them out of a "group")
 - More than one-tenth (12%) of youth were cyber bullied (teased, taunted or threatened by e-mail or cell phone) (YRBS reported 15% for Ohio in 2013 and 16% for the U.S. in 2015)
 - Six percent (6%) of youth were physically bullied (were hit, kicked, punched or people took their belongings)
 - One percent (1%) of youth were sexually bullied (used nude or semi-nude pictures to pressure someone to have sex that did not want to, blackmail, intimidate, or exploit another person)

Types of Bullying Auglaize County Youth Experienced in Past Year

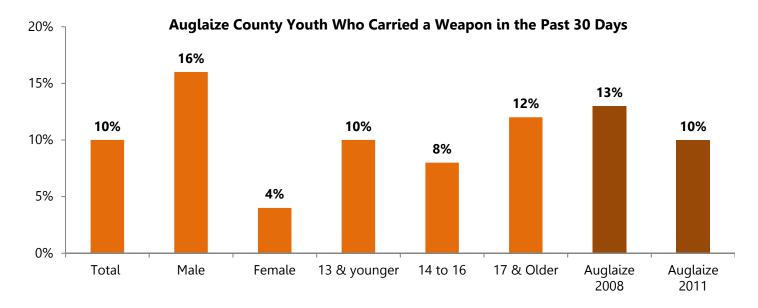
Youth Behaviors	Total	Male	Female	13 and younger	14-16 Years old	17 and older
Verbally Bullied	36%	32%	40%	36%	38%	31%
Indirectly Bullied	26%	12%	42%	24%	27%	28%
Cyber Bullied	12%	6%	18%	11%	11%	15%
Physically Bullied	6%	8%	4%	8%	4%	7%
Sexually Bullied	1%	0%	2%	0%	1%	2%

Behaviors of Auglaize County Youth

Bullied vs. Non-Bullied

Youth Behavior	Bullied	Non-Bullied
Participated in extracurricular activities	92%	92%
Felt sad or hopeless for two or more weeks in a row	38%	12%
Overweight or Obese	33%	27%
Drank alcohol in the past 30 days	22%	17%
Seriously considered attempting suicide in the past 12 months	20%	8%
Carried a weapon in the past 30 days	9%	10%
Attempted suicide in the past 12 months	7%	1%
Smoked cigarettes in the past 30 days	6%	6%
Ever misused medications	6%	5%
Used marijuana in the past 30 days	6%	4%

The following graph shows Auglaize County youth who carried a weapon in the past 30 days. The graph shows the number of youth in each segment giving each answer (i.e., the graph shows that 10% of all youth had carried a weapon in the past 30 days. including 16% of males and 4% of females).



Youth Comparisons	Auglaize County 2008 (6 th -12 th)	Auglaize County 2012 (6 th -12 th)	Auglaize County 2017 (6 th -12 th)	Auglaize County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Carried a weapon in past month	13%	10%	10%	9%	14%	16%
Carried a weapon on school property in past month	3%	2%	1%	1%	N/A	4%
Been in a physical fight in past year	25%	23%	21%	19%	20%	23%
Threatened or injured with a weapon on school property in past year	4%	5%	3%	3%	N/A	6%
Did not go to school because felt unsafe	1%	3%	3%	2%	5%	6%
Electronically/cyber bullied in past year	8%	14%	12%	12%	15%	16%
Bullied in past year	56%	45%	46%	46%	N/A	N/A
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year	6%	8%	2%	3%	N/A	10%

N/A – Not available

Source	Data Used	Website
American Association of Suicidology	Suicide Facts	www.suicidology.org/resources/fact s-statistics-current- research/suicide-statistics
American Cancer Society, Cancer Facts and Figures 2015. Atlanta: ACS, 2015	2015 Cancer Facts, Figures, and EstimatesNutrition Recommendations	www.cancer.org
American Cancer Society, Electronic Cigarette Use Doubles Among Teenagers, 2013	Electronic Cigarettes and Teenagers in the U.S.	www.cancer.org/cancer/news/electr onic-cigarette-use-doubles-among- teenagers
American College of Allergy, Asthma & Immunology	Asthma Facts	http://acaai.org/news/facts- statistics/asthma
American Diabetes Association	Type 1 and 2 DiabetesRisk Factors for DiabetesDiabetes Facts	www.diabetes.org
American Heart Association, 2013	 Stroke Warning Signs and Symptoms Smoke-free Living: Benefits & Milestones 	www.heart.org/HEARTORG/
Arthritis at a Glance, 2012, Centers for Disease Control & Prevention, Morbidity and Mortality Weekly Report 2010; 59(39):999-1003 & 59(39):1261-1265	Arthritis Statistics	www.cdc.gov/chronicdisease/resour ces/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	• 2009 - 2015 Adult Ohio and U.S. Correlating Statistics	www.cdc.gov
Brady Campaign to Prevent Gun Violence	Victims of Gun Violence	www.bradycampaign.org/sites/defa ult/files/GunDeathandInjuryStatShe et3YearAverageFINAL.pdf

Source	Data Used	Website
Center for Disease Control and Prevention (CDC)	 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 Men's Health Data Obesity Facts Oral Health Prostate Cancer Awareness Reduce Risk of Breast Cancer Skin Cancer Prevention Smoking facts Tips for Parents Yearly Flu Shots 	www.cdc.gov
CDC, Adolescent and School Health, 2013	Youth Physical Activity Facts	www.cdc.gov/healthyyouth/physical activity/facts.htm
CDC, Arthritis	Key Public Health Messages	www.cdc.gov/arthritis/basics/key.ht m
CDC, Injury Center: Violence Prevention 2014	Suicide PreventionYouth Suicide	www.cdc.gov/violenceprevention/p ub
CDC, National Center for Health Statistics	 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/fastats/
CDC, Physical Activity for Everyone	 Physical Activity Recommendations 	www.cdc.gov/physicalactivity/every one/guidelines/adults.html

Source	Data Used	Website
CDC, Press Release, 2013	Electronic Cigarettes and Teenagers in the U.S.	www.cdc.gov/media/releases/2013/ p0905-ecigarette-use.html
CDC, Sexually Transmitted Diseases Surveillance, 2014	 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)	Human Papillomavirus	www.cdc.gov/vaccinesafety/vaccine s/HPV/Index.html
CDC, Wonder	 About Underlying Cause of Death, 2009-2014 Auglaize County and Ohio Leading Causes of Death Auglaize County and Ohio Mortality Statistics 	http://wonder.cdc.gov/ucd- icd10.html
Community Commons	 Cigarette Expenditures Alcohol Beverage Expenditures Beer, Wine and Liquor Stores Bars and Drinking Establishments 	www.communitycommons.org/
Health Indicators Warehouse	 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	 All Healthy People 2020 Target Data Points Some U.S. Baseline Statistics Predictors of Access to Health Care 	www.healthypeople.gov/2020/topic sobjectives2020
Legacy for Health	Tobacco Fact Sheet	www.legacyforhealth.org/content/d ownload/582/6926/file/LEG- FactSheet-eCigarettes- JUNE2013.pdf
National Institute on Drug Abuse	Drug Facts: HeroinDrug Facts: Drugged Driving	www.drugabuse.gov

Source	Data Used	Website
Office of Health Transformation	Ohio Medicaid Assessment Survey	http://healthtransformation.ohio.go v/LinkClick.aspx?fileticket=oid6Wo- y0gs%3D&tabid=160
Ohio Department of Health, Information Warehouse	 Auglaize County and Ohio Birth Statistics Sexually Transmitted Diseases Incidence of Cancer HIV/AIDS Surveillance Program Statistics: Access to Health Services 	www.odh.ohio.gov/
Ohio Department of Health, Ohio Oral Health Surveillance System	Auglaize County Dental Care Resources	http://publicapps.odh.ohio.gov/oral health/default.aspx
Ohio Department of Job & Family Services	Auglaize County and Ohio Medicaid Statistics	http://jfs.ohio.gov/county/index.stm
Ohio Department of Public Safety	2015 Auglaize County and Ohio Crash Facts OSHP Computer-Aided Dispatch (CAD) System	https://ext.dps.state.oh.us/crashstati stics/CrashReports.aspx
Ohio Mental Health and Addiction Services	 Opiate and Pain Reliever Doses Per Capita Opiate and Pain Reliever Doses Per Patient 	http://mha.ohio.gov/Portals/0/asset s/Research/Maps/Ohio_OARRS_Opi oids_2012_v2.pdf
Ohio State Highway Patrol	 Compliant Data Electronic Crash Records Felony Cases and Drug Arrests Auglaize County Activity Statistics 	http://statepatrol.ohio.gov/
Philadelphia Department of Public Health	Electronic Cigarette Factsheet	Department of Health and Human Services, National Center for Health Statistics Data Brief "Electronic Cigarette Use Among Adults, United States, 2014, updated October 2015

Source	Data Used	Website
Psychology Today, 2013	Teen AngstTeen Binge Drinking: All Too Common	www.psychologytoday.com/blog/te en-angst/201301/teen-binge- drinking-all-too-common
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	 American Community Survey 5 year estimate, 2014 Ohio and Auglaize County 2015 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	Mental Health Services in Ohio	www.lsc.state.oh.us/fiscal/ohiofacts/ sept2012/health&humanservices.pd f
Youth Risk Behavior Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, Centers for Disease Control	• 2009 - 2015 youth Ohio and U.S. correlating statistics	http://apps.nccd.cdc.gov/YouthOnli ne/App/Default.aspx

Appendix II: Acronyms and Terms

AHS Access to Health Services, Topic of Healthy People 2020 objectives

Adult Defined as 19 years of age and older.

Age-Adjusted Death rate per 100,000 adjusted for the age

Mortality Rates distribution of the population.

Adult Binge DrinkingConsumption of five alcoholic beverages or more (for males) or four or more

alcoholic beverages (for females) on one occasion.

AOCBC Arthritis, Osteoporosis, and Chronic Back Conditions

BMI Body Mass Index is defined as the contrasting measurement/relationship of

weight to height.

BRFSSBehavior Risk Factor Surveillance System, an adult survey conducted by the CDC.

CDC Centers for Disease Control and Prevention.

Current Smoker Individual who has smoked at least 100 cigarettes in their lifetime and now

smokes daily or on some days.

CY Calendar Year

FY Fiscal Year

HCNO Hospital Council of Northwest Ohio

HDS Heart **D**isease and **S**troke, Topic of Healthy People 2020 objectives

HP 2020 Healthy **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 \geq 140 and Diastolic \geq 90

IID Immunizations and Infectious Diseases, Topic of Healthy People 2020 objectives

N/A Data is not available.

NSCH National Survey of Children's Health

ODH Ohio Department of Health
OSHP Ohio State Highway Patrol

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 YRBS as "a weapon such as a gun, knife, or club"

Youth Defined as 12 through 18 years of age

Years of **P**otential **L**ife **L**ost before age 65. Indicator of premature death. YPLL/65

Youth BMI

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. Classifications

Youth Risk Behavior Survey, a youth survey conducted by the CDC **YRBS**

Appendix III: Methods for Weighting the 2017 Auglaize County Health Assessment Data

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

In some cases, the procedures of the survey methods may purposefully over-sample a segment of the population in order to gain an appropriate number of responses from that subgroup for appropriate data analysis when investigating them separately (this is often done for minority groups). Whether the over-sampling is done inadvertently or purposefully, the data needs to be weighted so that the proportioned characteristics of the sample accurately reflect the proportioned characteristics of the population. In the 2017 Auglaize County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Auglaize County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, Non-White), Age (7 different age categories), and income (9 different income categories). The numerical value of the weight for each category was calculated by taking the percent of Auglaize 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 2017 Auglaize County Survey and the 2015 Census.

2017	<u> 17 Auglaize Survey</u>		<u>2015 (</u>		<u>ey</u> <u>2015 Census</u>		<u>Weight</u>
<u>Sex</u>	Number	<u>Percent</u>	<u>Number</u>	<u>Percent</u>			
Male	215	40.87452	22,745	49.58254	1.213043		
Female	311	59.12548	23,128	50.41746	0.852720		

In this example, it shows that there was a larger portion of females in the sample compared to the actual portion in Auglaize County. The weighting for males was calculated by taking the percent of males in Auglaize County (based on Census information) (49.58254%) and dividing that by the percent found in the 2017 Auglaize County sample (40.87452%) [49.58254 / 40.87452 = weighting of 1.213043 for males]. The same was done for females [50.41746 / 59.12548% = weighting of 0.852720 for females]. Thus males' responses are weighted heavier by a factor of 1.213043 and females' responses weighted less by a factor of 0.852720.

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 0.86473 [0.85272 (weight for females) x 0.98763 (weight for White) x 1.34733 (weight for age 35-44) x 0.76209 (weight for income \$50-\$75k)]. Thus, each individual in the 2017 Auglaize County sample has their own individual weighting based on their combination of age, race, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

Multiple sets of weightings were created and used in the statistical software package (SPSS 23.0) when calculating frequencies. For analyses done for the entire sample and analyses done based on subgroups other than age, race, sex, or income – the weightings that were calculated based on the product of the four weighting variables (age, race, sex, income) for each individual. When analyses were done comparing groups within one of the four weighting variables (e.g., smoking status by race/ethnicity), that specific variable was not used in the weighting score that was applied in the software package. In the example smoking status by race, the weighting score that was applied during analysis included only age, sex, and income. Thus a total of eight weighting scores for each individual were created and applied depending on the analysis conducted. The weight categories were as follows:

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

Category	Auglaize Sample	%	2014 Census*	%	Weighting Value
Sex:					
Male	215	40.87452	22,745	49.58254	1.213043
Female	311	59.12548	23,128	50.41746	0.852720
Age:					
20-24	5	0.95057%	2,636	7.84384%	8.25172
25-34	31	5.89354%	5,059	15.05386%	2.55430
35-44	62	11.78707%	5,337	15.88109%	1.34733
45-54	97	18.44106%	6,573	19.55901%	1.06062
55-59	71	13.49810%	3,614	10.75403%	0.79671
60-64	67	12.73764%	2,809	8.35863%	0.65621
65+	193	36.69202%	7,578	22.54954%	0.61456
Race:					
White	515	97.72296%	44,274	96.51429%	0.98763
Non-White	12	2.27704%	1,599	3.48571%	1.53081
Household Income:					
Less than \$10,000	10	2.30415%	835	4.58968%	1.99192
\$10k-\$15k	22	5.06912%	700	3.84763%	0.75903
\$15k-\$25k	21	4.83871%	1,916	10.53152%	2.17651
\$25k-\$35k	46	10.59908%	2,276	12.51031%	1.18032
\$35k-\$50k	55	12.67281%	2,727	14.98928%	1.18279
\$50k-\$75k	112	25.80645%	3,578	19.66690%	0.76209
\$75k-\$100k	76	17.51152%	2,806	15.42351%	0.88076
\$100k-\$125k	61	14.05530%	2,504	13.76354%	0.97924
\$125k or more	31	7.14286%	851	4.67762%	0.65487

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

^{*} Auglaize County population figures taken from the 2015 Census.

Appendix IV: School Participation

The following schools were randomly chosen and agreed to participate in the 2017 Auglaize County Health Assessment:

Minster Schools

Minster Junior/Senior High School

New Knoxville Local Schools

New Knoxville School

St. Marys City Schools

Memorial High School St. Marys Middle School

Wapakoneta City Schools

Wapakoneta High School Wapakoneta Middle School

Waynesfield-Goshen Local Schools

Waynesfield-Goshen Middle and High School

Appendix V: Auglaize County Sample Demographic Profile*

Adult Variable	2012 Adult Survey Sample	2017 Adult Survey Sample	Auglaize County Census 2011-2015 (5-year estimate)	Ohio Census 2015
Age				
20-29	17.2%	2.3%	11.2%	13.3%
30-39	7.5%	9.2%	11.0%	12.2%
40-49	15.7%	15.6%	12.9%	12.5%
50-59	21.0%	22.9%	15.5%	14.3%
60 plus	33.9%	48.9%	22.6%	22.4%
oo pias	33.376	10.570	22.070	22.170
Race/Ethnicity				
White	98.1%	97.4%	97.3%	82.0%
Black or African American	0.2%	0.4%	0.5%	12.3%
American Indian and Alaska Native	0.9%	0.9%	0.2%	0.2%
Asian	0%	0%	0.5%	2.0%
Other	1.3%	1.1%	0.4%	0.8%
Hispanic Origin (may be of any	.,,,,,,			
race)	0.4%	0.6%	1.4%	3.5%
Marital Status†				
Married Couple	65.2%	64.3%	58.4%	47.5%
Never been married/member of an				
unmarried couple	17.8%	8.8%	23.0%	32.1%
Divorced/Separated	10.8%	13.0%	10.5 %	14.0%
Widowed	4.3%	12.8%	8.0%	6.4%
Education†				
Less than High School Diploma	11.2%	4.0%	5.2%	10.3%
High School Diploma	22.1%	40.4%	43.9%	33.7%
Some college/ College graduate	64.8%	54.9%	48.6%	56.0%
Income (Families)				
\$14,999 and less	9.8%	6.0%	8.4%	7.7%
\$15,000 to \$24,999	10.7%	9.5%	10.5%	7.4%
\$25,000 to \$49,999	29.6%	18.9%	27.5 %	22.1%
\$50,000 to \$74,999	19.2%	21.1%	19.7%	20.2%
\$75,000 or more	15.9%	31.6%	33.9%	44.7%

^{*} The percent's 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). Percent's may not add to 100% due to missing data (non-responses).

[†] The Ohio and Auglaize 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.

	2008 Youth	2012 Youth	2017 Youth
Youth Variable	Survey	Survey	Survey
	Sample	Sample	Sample
Age	•	•	
12 years old or younger	11.7%	13.2%	20.0%
13 years old	10.7%	11.9%	15.8%
14 years' old	13.1%	16.1%	9.6%
15 years' old	16.2%	13.0%	17.5%
16 years' old	20.4%	18.2%	16.3%
17 years' old	17.8%	17.0%	12.3%
18 years old or older	10.1%	10.5%	8.4%
Gender			
Male	50.7%	46.6%	50.1%
Female	49.2%	52.9%	49.9%
Terriale	43.270	32.370	43.370
Sexual Orientation			
Heterosexual	N/A	N/A	85.2%
Bisexual	N/A	N/A	5.4%
Gay or lesbian	N/A	N/A	1.3%
Transgender	N/A	N/A	0.3%
Dago/Ethwisite			
Race/Ethnicity			
White	98.9%	95.1%	92.2%
American Indian and Alaska Native	.01%	3.6%	5.8%
Black or African American	0.1%	0.9%	3.3%
Hispanic or Latino	.01%	2.2%	3.3%
Asian	0.0%	0.7%	1.0%
Native Hawaiian or Other Pacific Islander	0.0%	0.2%	0.8%
Grade Level			
Middle School (6-8)	36.0%	20 20/	41.0%
High School (9-12)	63.7%	38.3% 61.7%	59.0%
Htgii Schoot (9-12)	03.7 /0	01.770	39.076
Individual Grade Level			
6 th grade	11.9%	12.3%	14.6%
7 th grade	12.4%	8.5%	18.3%
8 th grade	11.7%	17.4%	8.1%
9 th grade	14.2%	12.5%	16.3%
10 th grade	19.6%	17.7%	17.8%
11 th grade	18.2%	17.5%	13.1%
12th grade	11.7%	13.9%	11.9%

^{*} Percent's may not equal 100% due to missing data (non-responses) and/or multiple response questions.

Appendix VI: Demographics and Household Information

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

Age	Total	Males	Females
Auglaize County	45,949	22,787	23,162
0-4 years	3,086	1,594	1,492
1-4 years	2,459	1,280	1,179
< 1 year	627	314	313
1-2 years	1,215	652	563
3-4 years	1,244	628	616
5-9 years	3,152	1,606	1,546
5-6 years	1,264	645	619
7-9 years	1,888	961	927
10-14 years	3,331	1,733	1,598
10-12 years	2,021	1,044	977
13-14 years	1,310	689	621
12-18 years	4,753	2,504	2,249
15-19 years	3,265	1,722	1,543
15-17 years	2,097	1,085	1,012
18-19 years	1,168	637	531
20-24 years	2,267	1,134	1,133
25-29 years	2,539	1,276	1,263
30-34 years	2,517	1,270	1,247
35-39 years	2,800	1,448	1,352
40-44 years	3,007	1,484	1,523
45-49 years	3,452	1,727	1,725
50-54 years	3,582	1,844	1,738
55-59 years	3,315	1,679	1,636
60-64 years	2,575	1,238	1,337
65-69 years	1,932	926	1,006
70-74 years	1,569	723	846
75-79 years	1,261	539	722
80-84 years	1,140	456	684
85-89 years	752	270	482
90-94 years	330	104	226
95-99 years	68	13	55
100-104 years	8	1	7
105-109 years	1	0	1
110 years & over	0	0	0
Total 85 years and over	1,159	388	771
Total 65 years and over	7,061	3,032	4,029
Total 19 years and over	34,769	17,017	17,752

AUGLAIZE COUNTY PROFILE

General Demographic Characteristics (Source: U.S. Census Bureau, Census 2015)

2011-2015 ACS 5-year estimate

Total Population		
2015 Total Population	45,873	
2000 Total Population	46,611	
	-,-	
Largest City-Wapakoneta		
2015 Total Population	9,776	100%
2000 Total Population	6,474	100%
Population By Race/Ethnicity		
Total Population	45,873	100%
White Alone	44,677	97.3%
Hispanic or Latino (of any race)	632	1.4%
African American	207	0.5%
Asian	235	0.5%
Two or more races	456	1.0%
Other	167	0.4%
American Indian and Alaska Native	112	0.2%
Population By Age 2010		
Under 5 years	3,086	6.7%
5 to 17 years	9,944	21.6%
18 to 24 years	3,435	7.4%
25 to 44 years	10,863	
45 to 64 years	12,924	
65 years and more	7,061	15.3%
Median age (years)	40.0	
Household By Type	10 102	1000/
Total Households	18,193	100%
Family Households (families)	12,463	68.5%
With own children <18 years	4,908	26.9%
Married-Couple Family Households	10,320	56.7%
With own children <18 years	3,755	20.6%
Female Householder, No Husband Present	1,433	7.8%
With own children <18 years	794	4.4%
Non-family Households	5,730	31.4%
Householder living alone	4,785	26.3%
Householder 65 years and >	2,374	13.0%
Households With Individuals < 18 years	5,403	29.7%
Households With Individuals < 16 years Households With Individuals 65 years and >	5,309	29.7%
Households With mutitudals of years and >	3,303	∠J.∠ /0
Average Household Size	2.49 pe	eople
Average Family Size	3.02 pe	
· · · · · · · · · · · · · · · · · · ·	5.5 - pc	

General Demographic Characteristics, Continued (Source: U.S. Census Bureau, Census 2014)

2011-2015 ACS 5-year estimate

Median Value of Owner-Occupied Units Median Monthly Owner Costs (With Mortgage) Median Monthly Owner Costs (Not Mortgaged) Median Gross Rent for Renter-Occupied Units Median Rooms Per Housing Unit	\$133,300 \$1,141 \$390 \$642 6.1
Total Housing Units No Telephone Service Lacking Complete Kitchen Facilities Lacking Complete Plumbing Facilities	19,641 327 108 43

Selected Social Characteristics (Source: U.S. Census Bureau, Census 2014)

2011-2015 ACS 5-year estimates

School Enrollment

Population 3 Years and Over Enrolled In School Nursery & Preschool Kindergarten Elementary School (Grades 1-8) High School (Grades 9-12) College or Graduate School	10,969 897 524 5,061 2,560 1,927	100% 8.2% 4.8% 46.1% 23.3% 17.6%
Educational Attainment		
Population 25 Years and Over	30,970	100%
< 9 th Grade Education	711	2.3%
9 th to 12 th Grade, No Diploma	1,619	5.2%
High School Graduate (Includes Equivalency)	13,582	43.9%
Some College, No Degree	6,289	20.3%
Associate Degree	3,364	10.9%
Bachelor's Degree	3,602	11.6%
Graduate Or Professional Degree	1,803	5.8%
Percent High School Graduate or Higher	*(X)	92.5%
Percent Bachelor's Degree or Higher *(X) – Not available	*(X)	17.5%

Selected Social Characteristics, Continued (Source: U.S. Census Bureau, Census 2015) 2011-2015 ACS 5-year estimate

Marital Gratus		
Marital Status Deputation 15 Veets and Over	26 611	1000/
Population 15 Years and Over	36,611	100%
Never Married	8,421	23.0%
Now Married, Excluding Separated	21,381	58.4%
Separated	293	0.8%
Widowed	2,929	8.0%
Female	2,253	12.1%
Divorced	3,551	9.7%
Female	1,750	9.4%
Veteran Status		
Civilian Veterans 18 years and over	34,634	8.9%
Disability Status of the Civilian Non-institutionalized Population		
Total Civilian Noninstitutionalized Population	45,362	100%
With a Disability	5,443	12.0%
Under 18 years	11,239	100%
With a Disability	393	3.5%
18 to 64 years	26,944	100%
With a Disability 65 Years and Over	2,641 7,179	9.8% 100%
With a Disability	2,427	33.8%
Selected Economic Characteristics	<i>L</i> ,¬ <i>L</i> i	33.070
(Source: U.S. Census Bureau, Census 2015)		
2011-2015 ACS 5-year estimates		
Employment Status	25.046	1000/
Population 16 Years and Over	35,816	
In Labor Force Not In Labor Force	23,912 11,904	
Females 16 Years and Over	18,196	
In Labor Force	11,105	
2000 0.00	,	011070
Population Living With Own Children <6 Years	3,422	100%
All Parents In Family In Labor Force	2,703	79.0%
Class of Worker		
Employed Civilian Population 16 Years and Over	22,719	
Private Wage and Salary Workers	19,163	
Government Workers	2,414	
Self-Employed Workers in Own Not Incorporated Business	1,120	
Unpaid Family Workers	22	0.1%
Median Earnings	h	
Male, Full-time, Year-Round Workers	\$46,878	
Female, Full-time, Year-Round Workers	\$33,125	

Selected Economic Characteristics, Continued (Source: U.S. Census Bureau, Census 2015) 2011-2015 ACS 5-year estimate

	at	

Employed Civilian Population 16 Years and Over Production, Transportation, and Material Moving Occupations	22,719 5,829	100% 25.7%
Management, business, science, and art occupations Sales and Office Occupations Service Occupations Natural Resources, Construction, and Maintenance Occupations	•	29.4% 19.5% 15.6% 9.8%
Leading Industries Employed Civilian Population 16 Years and Over Manufacturing Educational, health and social services Trade (retail and wholesale) Arts, entertainment, recreation, accommodation, and food services Professional, scientific, management, administrative, and waste management services Transportation and warehousing, and utilities Finance, insurance, real estate and rental and leasing Other services (except public administration) Construction Public administration	22,719 6,796 4,626 2,768 1,666 1,539 1,000 632 1,064 1,310	20.4% 12.1% 7.3% 6.8% 4.4% 2.8% 4.7% 5.8%
Public administration Information Agriculture, forestry, fishing and hunting, and mining	614 346 358	2.7% 1.5% 1.6%

Bureau of Economic Analysis (BEA) Per Capita Personal Income (PCPI) Figures		
	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2015	\$42,736	18 th of 88 counties
BEA Per Capita Personal Income 2014	\$41,913	18 th of 88 counties
BEA Per Capita Personal Income 2013	\$39,851	18th of 88 counties
BEA Per Capita Personal Income 2012	\$40,188	18 rd of 88 counties
BEA Per Capita Personal Income 2011	\$38,486	19 nd 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)

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

2011-2015 ACS 5-year estimate

Income In 2015 Households < \$10,000 \$10,000 to \$14,999 \$15,000 to \$24,999 \$25,000 to \$34,999 \$35,000 to \$49,999 \$50,000 to \$74,999 \$75,000 to \$99,999 \$100,000 to \$149,999 \$150,000 to \$199,999 \$200,000 or more Median Household Income	18,193 835 700 1,916 2,276 2,727 3,578 2,806 2,504 529 322	12.5%
Income In 2015 Families < \$10,000 \$10,000 to \$14,999 \$15,000 to \$24,999 \$25,000 to \$34,999 \$35,000 to \$49,999 \$50,000 to \$74,999 \$75,000 to \$99,999 \$100,000 to \$149,999 \$150,000 to \$199,999 \$200,000 or more	12,463 283 235 829 1,169 1,745 2,789 2,425 2,223 454	14.0% 22.4% 19.5%
Median Household Income (families)	\$67,207	
Per Capita Income In 2010-2014	\$25,727	
Poverty Status In 2015 Families Individuals	Number Below Poverty Level *(X) *(X)	% Below Poverty Level 6.1% 8.9%

*(X) – Not available

Poverty Rates, 5-year averages 2010 to 2014

Category	Auglaize	Ohio
Population in poverty	9.2%	15.9%
< 125% FPL (%)	13.3%	20.5%
< 150% FPL (%)	19.0%	25.0%
< 200% FPL (%)	29.0%	34.3%
Population in poverty (2000)	5.9%	9.8%

(Source: The Ohio Poverty Report, Ohio Development Services Agency, February 2016, http://www.development.ohio.gov/files/research/P7005.pdf)

Employment Statistics

Category	Auglaize	Ohio
Labor Force	24,200	5,657,600
Employed	23,100	5,318,600
Unemployed	1,100	339,000
Unemployment Rate* in January 2017	4.5	6.0
Unemployment Rate* in December 2016	3.7	4.8
Unemployment Rate* in January 2016	4.2	5.6

*Rate equals unemployment divided by labor force. (Source: Ohio Department of Job and Family Services, January, 2017 http://ohiolmi.com/laus/current.htm) **Estimated Poverty Status in 2015**

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval		
Auglaize County						
All ages in poverty	3,920	3,158 to 4,682	8.7%	7.0 to 10.4		
Ages 0-17 in poverty	1,262	1005 to 1,519	11.5%	9.2 to 13.8		
Ages 5-17 in families in poverty	815	625 to 1,005	10.0%	7.7 to 12.3		
Median household income	\$58,840	\$54,861 to \$62,819				
Ohio						
All ages in poverty	1,670,487	1646,455 to 1,694,519	14.8%	14.6 to 15.0		
Ages 0-17 in poverty	546,968	532,624 to 561,312	21.2%	20.6 to 21.8		
Ages 5-17 in families in poverty	365,471	352,710 to 378,232	19.3%	18.6 to 20.0		
Median household income	\$51,086	\$50,853 to \$51,319				
United States						
All ages in poverty	46,153,077	45,878,016 to 46,428,138	14.7%	14.6 to 14.8		
Ages 0-17 in poverty	15,000,273	14,862,975 to 15,137,571	20.7%	20.5 to 20.9		
Ages 5-17 in families in poverty	10,245,028	10,145,484 to 10,344,572	19.5%	19.3 to 19.7		
Median household income	\$55,775	\$55,861 to \$55,860				

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

Federal Poverty Thresholds in 2015 by Size of Family and Number of Related Children Under 18 Years of Age

Chittaren onder 16 reals of Age							
Size of Family Unit	No Children	One Child	Two Children	Three Children	Four Children	Five Children	
1 Person <65 years	\$12,331						
1 Person 65 and >	\$11,367						
2 people Householder < 65 years	\$15,871	\$16,337					
2 People Householder 65 and >	\$14,326	\$16,275					
3 People	\$18,540	\$19,078	\$19,096				
4 People	\$24,447	\$24,847	\$24,036	\$24,120			
5 People	\$29,482	\$29,911	\$28,995	\$28,286	\$27,853		
6 People	\$33,909	\$34,044	\$33,342	\$32,670	\$31,670	\$31,078	
7 People	\$39,017	\$39,260	\$38,421	\$37,835	\$36,745	\$35,473	
8 People	\$43,637	\$44,023	\$43,230	\$42,536	\$41,551	\$40,300	
9 People or >	\$52,493	\$52,747	\$52,046	\$51,457	\$50,490	\$49,159	

(Source: U. S. Census Bureau, Poverty Thresholds 2015, http://www.census.gov/hhes/www/poverty/data/threshld/index.html)

Appendix VII: County Health Rankings

Auglaize County	Ohio	U.S.			
Health Outcomes					
5,600	7,600	6,600			
13%	15%	15%			
3.4	3.7	3.6			
3.6	4.0	3.7			
7%	9%	8%			
h Behaviors					
17%	22%	18%			
35%	31%	28%			
8.4	7.0	7.3			
28%	25%	22%			
67%	83%	84%			
18%	19%	18%			
32%	34%	30%			
211.2	474.1	456			
30	32	32			
	County C	County h Outcomes 5,600 7,600 13% 15% 3.4 3.7 3.6 4.0 7% 9% h Behaviors 17% 17% 22% 35% 31% 8.4 7.0 28% 25% 67% 83% 18% 19% 32% 34% 211.2 474.1			

Source: 2017 County Health Rankings for Auglaize County, Ohio and U.S. data

	Auglaize County	Ohio	U.S		
Clinical Care					
Coverage and affordability. Percentage of population under age 65 without health insurance (2013)	8%	10%	14%		
Access to health care/medical care. Ratio of population to primary care physicians (2013)	2,180:1	1,300:1	1,320:1		
Access to dental care. Ratio of population to dentists (2014)	2,700:1	1,690:1	1,520:1		
Hospital utilization. Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2013)	56	60	50		
Diabetes. Percentage of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring (2013)	85%	85%	85%		
Cancer. Percentage of female Medicare enrollees ages 67-69 that receive mammography screening (2013)	56%	61%	63%		
Social and Ec	onomic Environm	nent			
Education. Percentage of ninth-grade cohort that graduates in four years (2012-2013)	94%	81%	83%		
Education. Percentage of adults ages 25-44 years with some post-secondary education (2010-2014)	65%	64%	64%		
Employment, poverty, and income. Percentage of population ages 16 and older unemployed but seeking work (2014)	3.7%	4.9%	5.3%		
Employment, poverty, and income. Percentage of children under age 18 in poverty (2014)	12%	21%	21%		
Employment, poverty, and income. Ratio of household income at the 80th percentile to income at the 20th percentile (2010-2014)	3.8	4.8	5.0		
Family and social support. Percentage of children that live in a household headed by single parent (2010-2014)	21%	36%	34%		
Family and social support. Number of membership associations per 10,000 population (2013)	15.1	11.3	9.0		
Violence. Number of reported violent crime offenses per 100,000 population (2010-2012)	55	290	380		
Injury. Number of deaths due to injury per 100,000 population (2009-2013)	58	70	62		

Source: 2017 County Health Rankings for Auglaize County, Ohio and U.S. data

	Auglaize County	Ohio	U.S.	
Physical Environment				
Air, water, and toxic substances. Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) (2011)	11.7	11.3	8.7	
Air, water, and toxic substances. Indicator of the presence of health-related drinking water violations. 1 - indicates the presence of a violation, 0 - indicates no violation (FY 2013-2014)	No	N/A	N/A	
Housing. Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities (2008-2012)	10%	15%	19%	
Transportation. Percentage of the workforce that drives alone to work (2010-2014)	87%	83%	76%	
Transportation. Among workers who commute in their car alone, the percentage that commute more than 30 minutes (2010-2014)	21%	30%	34%	

Source: 2017 County Health Rankings for Auglaize County, Ohio and U.S. data N/A – Data is not available

Appendix VIII: Community Stakeholder Perceptions

What surprised you the most? (n=6)

- Overweight/obese percentages (2)
- Alcohol consumption
- Correlation to other risk factors
- The number of people experiencing ACE's
- Adult tobacco relationship to youth issues especially "attempted suicide"
- Low rates of physical activity
- Youth smoking and ways of obtaining tobacco
- Tobacco use correlating with other youth behaviors
- The percentage of youth that self-injure, strongly consider suicide or make an attempt
- Percentage of high blood pressure

What would you like to see covered in the report next time? (n=2)

- More transportation information
- Instead of asking "one drink in the past month," ask "how many binge drinking episodes have you had in the past week or month"

What will you or your organization do with this data? (n=6)

- Create community based programs for activity/education
- Develop a community health improvement plan (CHIP)
- Use it as a resource for our internal CHNA
- Develop healthcare coalition to address information across all ages (prevention)
- Use it for program planning and funding
- Take it to coalition/staff to determine best prevention strategies

Based on the community health assessment, what health topics do you see as the most important? Please list 2 or more choices. (n=6)

- Weight status (5)
- Mental health and addiction (2)
- High blood pressure (2)
- Alcohol consumption (2)
- Youth mental health
- ACEs experiences
- Physical activity
- Youth suicide rates
- Self-injury
- Drug use
- Healthcare access

Are there any groups or agencies you think would be valuable resources or partners to work towards the priority health issues? (n=5)

- Schools (2)
- Churches
- Joint Township District Memorial Hospital
- Develop healthcare coalition
- Hospitals
- YMCA's
- Ministerial associations

What are some barriers people may face regarding the issues identified? (n=4)

- Income levels (2)
- Finding access to services needed to address their issues
- Age
- Ability of local government to influence behavior
- Lack of direct services
- Lack of time
- Priorities
- Awareness that the issues exist

In your opinion, what is the best way to communicate the information from the community health assessment to the rest of public? (n=6)

- Newspaper (4)
- Partner Websites (2)
- Social media links (2)
- Use the CHIP to focus on priorities then communicate priorities along with goals/actions
- Internet
- Direct marketing to county health agencies
- Summary accompanied by a link to the assessment

Other comments or concerns: (n=1)

Is the slideshow presentation available to us?