

2017

Ottawa County

Community Health Assessment



Examining the health of Ottawa County

Released on 08.30.2017

Foreword

The members of the Ottawa County Health Partners are pleased to present the 2017 health assessment of our community. This comprehensive community health assessment is the result of a strong commitment by dedicated community partners to work together to improve the health and well-being of residents of Ottawa County.

The health assessment gives us the opportunity to glance into our community, as well as our state and nation. The data presented in this report will provide valuable information to develop strategies that focus on wellness, access to care, and unmet community needs. This health assessment can be used as a guide for strategic planning and can help our community detect new health concerns, measure the impact of current improvement efforts, and lead the thoughtful use of local resources.

The 2017 assessment will prove invaluable to you as an agency or a community member. As we review the results of the assessment, we will continue to work collaboratively to coordinate resources, identify unfulfilled needs in our community, and strive to initiate quality programs to improve the health of our residents.

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Ottawa County General Health District

Magruder Hospital

Mental Health and Recovery Board of Erie and Ottawa Counties

United Way of Ottawa County

This report has been commissioned by Ottawa County Health Partners:

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Ottawa County Board of Developmental Disabilities

Ottawa County Commissioners

Ottawa County Department of Job & Family Services

Ottawa County Sheriff

Port Clinton City School District

Port Clinton Police Department

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

<http://www.hcno.org/community-services/data-link/>

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

Ottawa County General Health District

www.ottawahealth.org/

Hospital Council of Northwest Ohio

<http://www.hcno.org/community-services/community-health-assessments/>

Magruder Hospital

<https://www.magruderhospital.com/>

United Way of Ottawa County

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<http://www.mhrbeo.org/>

Ohio State University Extension

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Executive Summary

This executive summary provides an overview of health-related data for Ottawa County adults (ages 19 and older) and youth (ages 12-18) who participated in a county-wide health assessment survey during January-May 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 Ottawa 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 the adults and adolescents. The investigators decided to derive most of the adult survey items from the BRFSS and many of the adolescent survey items from the YRBSS. This decision was based on being able to compare local data with state and national data.

The project coordinator from the Hospital Council of Northwest Ohio conducted a series of meetings with the planning committee from Ottawa County. During these meetings, HCNO and the planning committee reviewed and discussed banks of potential survey questions. Based on input from the Ottawa County planning committee, the project coordinator composed drafts of surveys containing 114 items for the adult survey and 77 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 Ottawa County. There were 34,283 persons ages 19 and over living in Ottawa 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 Ottawa 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 3,696 youth ages 12 to 18 years old live in Ottawa County. A sample size of 348 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 Ottawa County. This advance letter was personalized, printed on Ottawa County Health Partners letterhead, and signed by Nancy Osborn, Health Commissioner of the Ottawa 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 Ottawa County Health Partners letterhead) describing the purpose of the study, a questionnaire, a self-addressed stamped return envelope, and a \$2 incentive. Approximately three weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging the recipients to reply, another copy of the questionnaire, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the mailing was 47% (n=527; CI=± 4.24). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

PROCEDURE | Adolescent Survey

Three out of four potential school districts agreed to participate. 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.

Permission slips were mailed home to parents of any student whose class was selected to participate. Two districts used passive permission slips and one district used active permission slips. The response rate for the districts that used passive permission slips was 95% (n=301; CI=± 5.41). The response rate for the district that used active permission slips was 28% (n=55; CI=± 13.12). The total response rate was 69% (n=356; CI=± 4.94).

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 Ottawa 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 Ottawa 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 Ottawa 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 Ottawa County, those responding to the survey were more likely to be older. For example, only six 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 six individuals are substantively different from the majority of Ottawa 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 via 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)

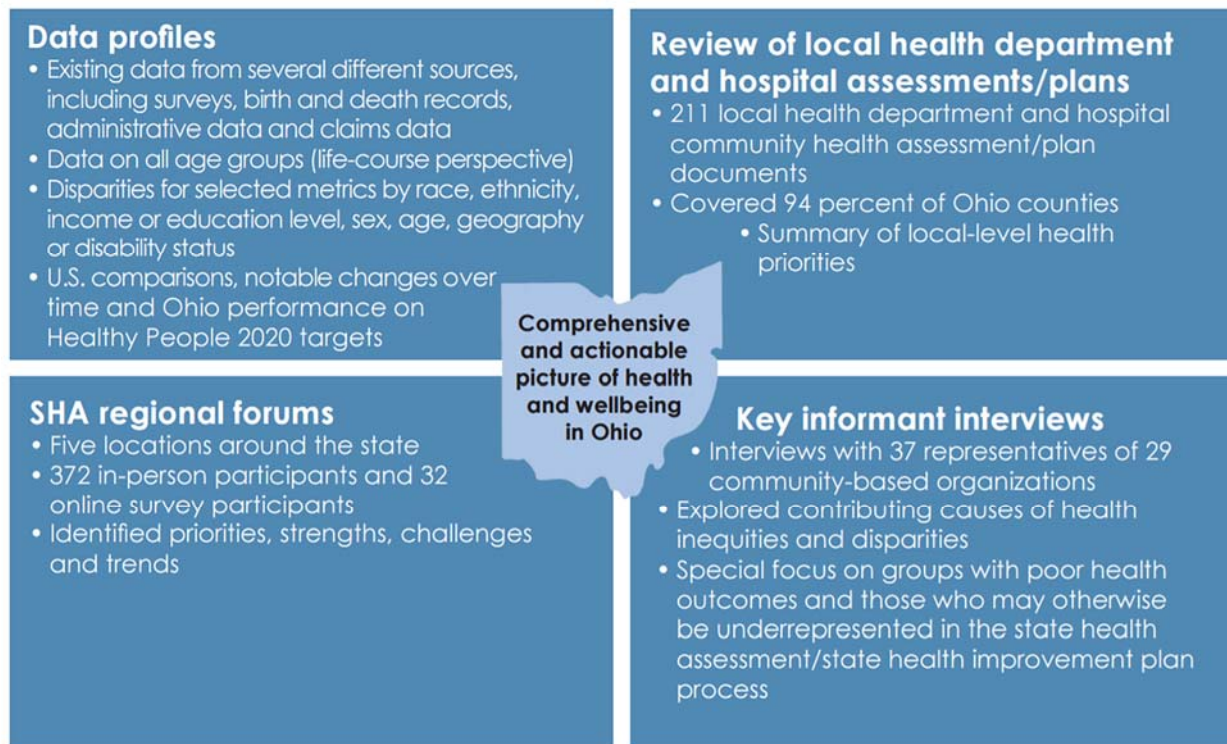
The 2016 Ohio state health assessment (SHA) provides data needed to inform health improvement priorities and strategies in the state. This assessment includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, a review of local health department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

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

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

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

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

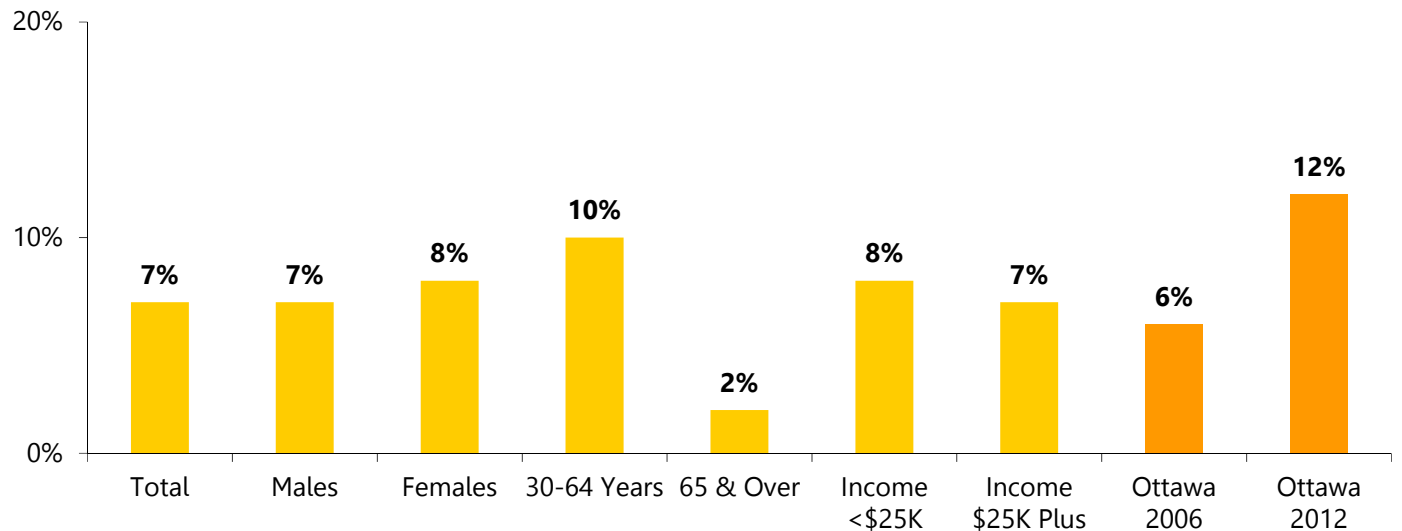


Data Summary | Healthcare Access

HEALTHCARE COVERAGE

The health assessment identified that 7% of Ottawa County adults were without healthcare coverage. The top reason adults gave for being without healthcare coverage was not being able to afford to pay the premiums (43%).

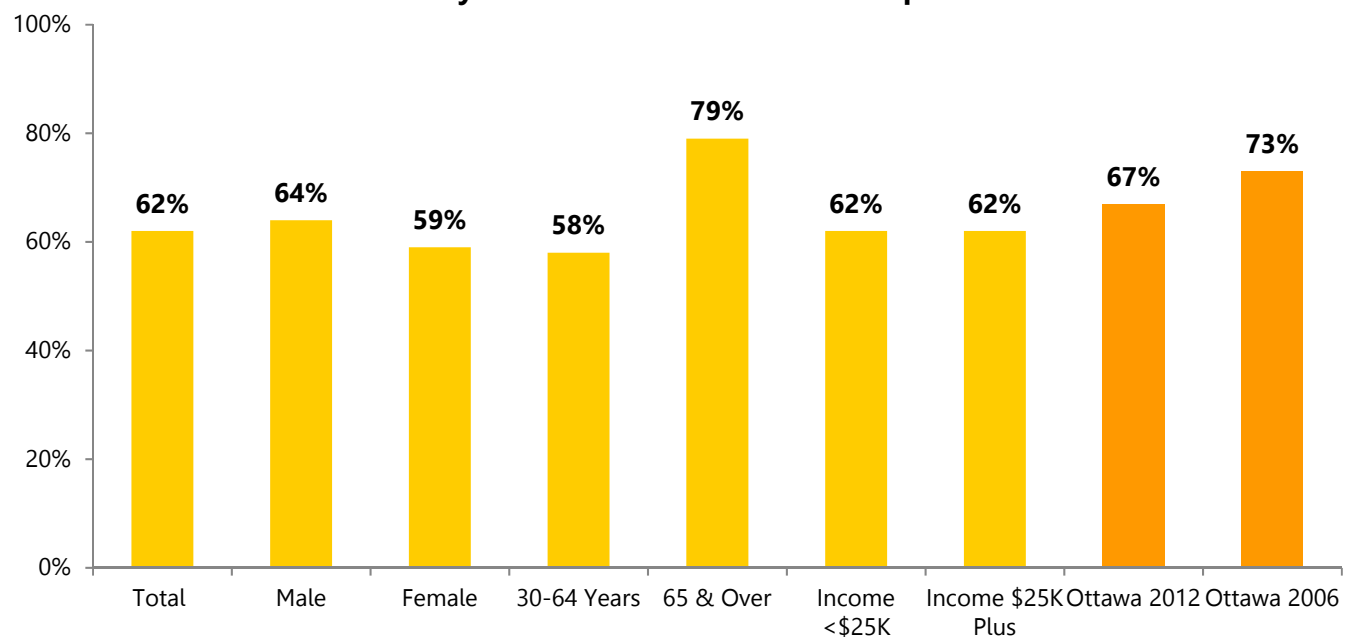
Uninsured Ottawa County Adults



ACCESS AND UTILIZATION

More than three-fifths (62%) of Ottawa County adults had visited a doctor for a routine checkup in the past year. More than four-fifths (83%) of adults went outside of Ottawa County for healthcare services in the past year.

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



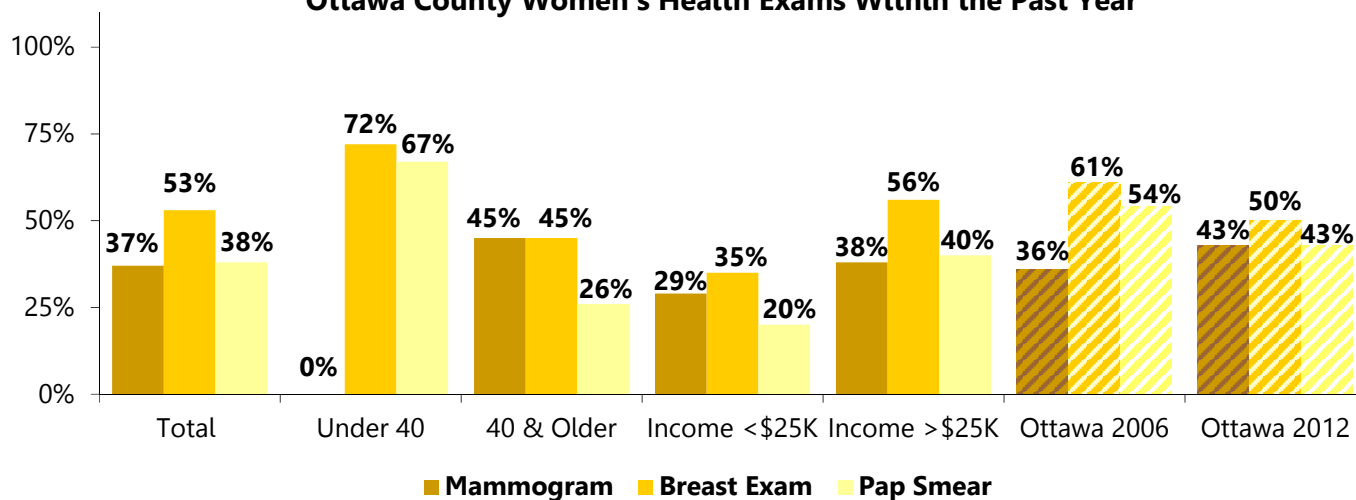
PREVENTIVE MEDICINE

Almost three-quarters (71%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Nearly half (49%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.

WOMEN'S HEALTH

In 2017, more than two-fifths (45%) of Ottawa County women over the age of 40 reported having a mammogram in the past year. Fifty-three percent (53%) of Ottawa County women ages 19 and over had a clinical breast exam and 38% had a Pap smear to detect cancer of the cervix in the past year. The health assessment determined that 5% of women survived a heart attack and 2% survived a stroke at some time in their life. Nearly two-fifths (37%) of women were obese, 31% had high blood pressure, 35% had high blood cholesterol, and 13% were identified as smokers, all known risk factors for cardiovascular diseases.

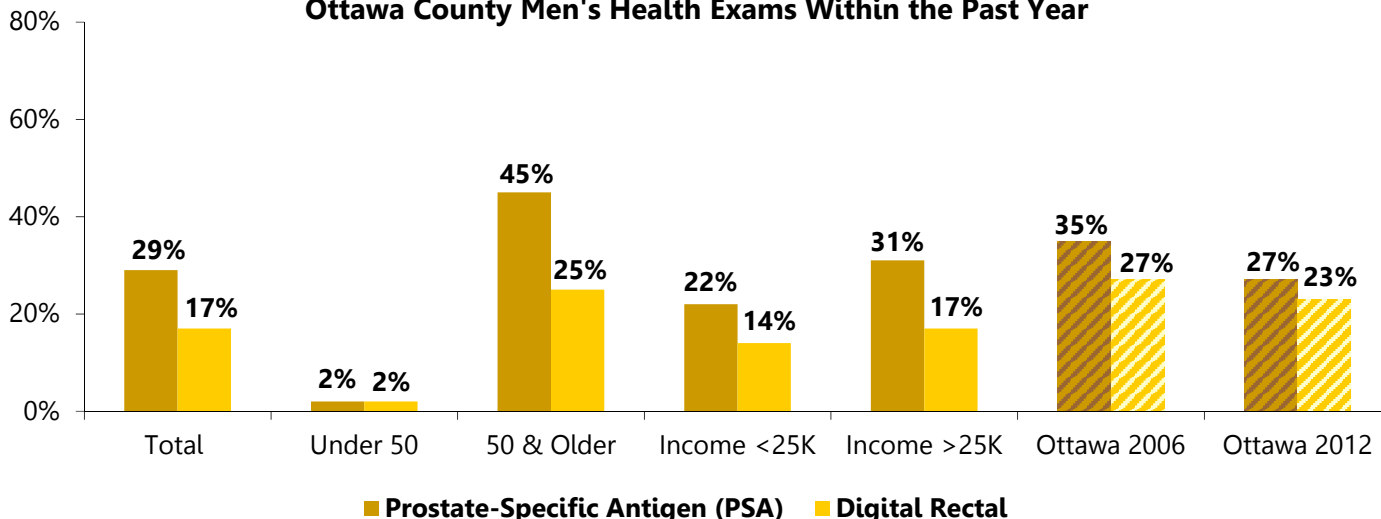
Ottawa County Women's Health Exams Within the Past Year



MEN'S HEALTH

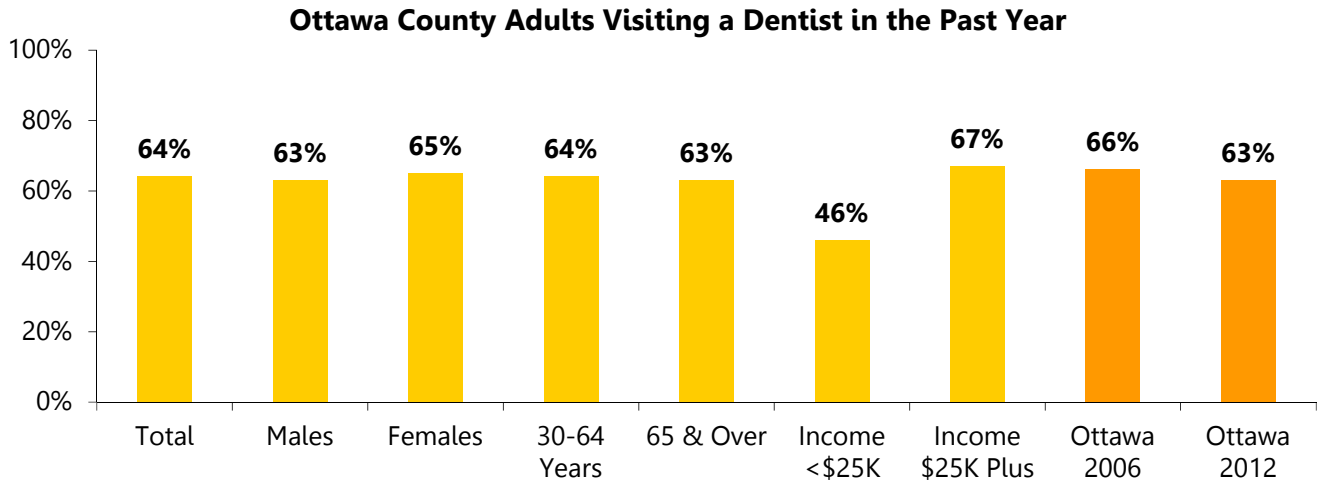
In 2017, 45% of Ottawa County males over the age of 50 had a Prostate-Specific Antigen (PSA) test within the past year. More than half (51%) of men had been diagnosed with high blood pressure, 44% had high blood cholesterol, and 17% were identified as smokers, which, along with obesity (45%), are known risk factors for cardiovascular diseases.

Ottawa County Men's Health Exams Within the Past Year



ORAL HEALTH

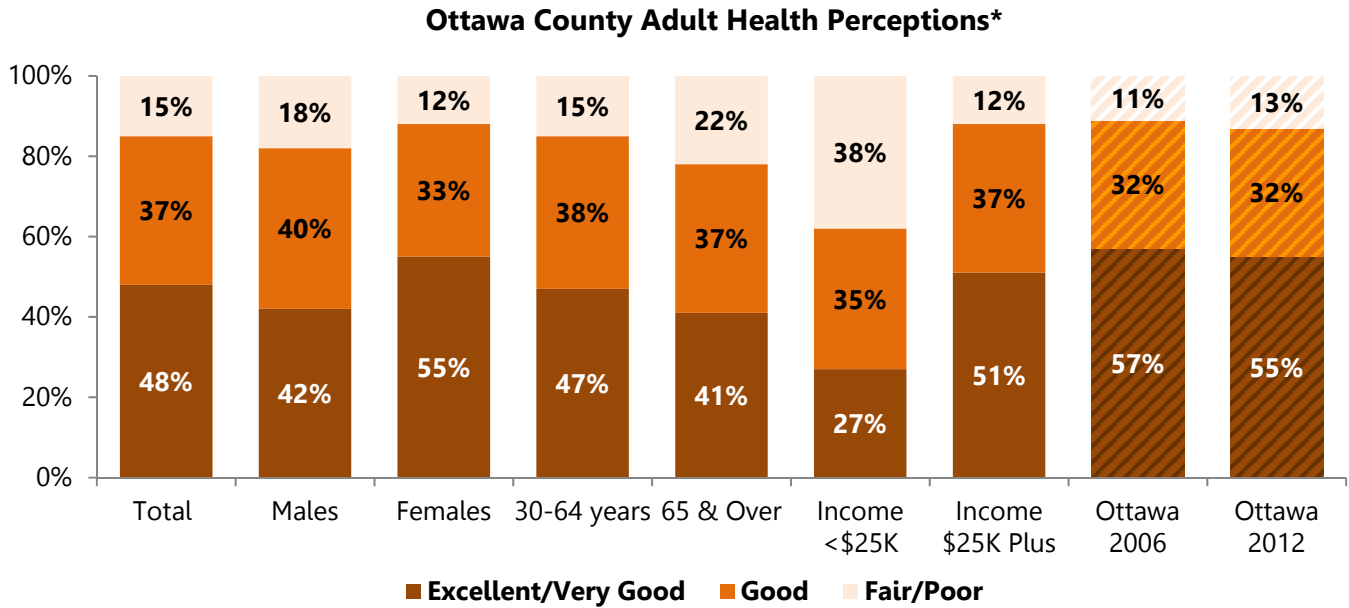
The health assessment has determined almost two-thirds (64%) of Ottawa County adults had visited a dentist or dental clinic in the past year. The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the previous twelve months.



Data Summary | Health Behaviors

HEALTH STATUS PERCEPTIONS

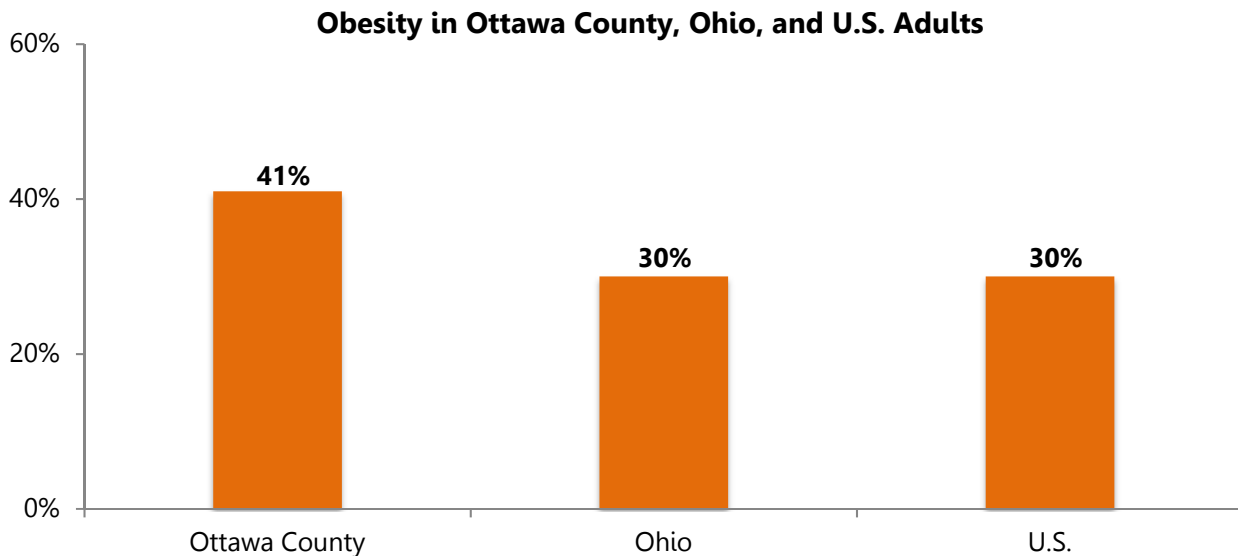
In 2017, nearly half (48%) of Ottawa County adults rated their health status as excellent or very good. Conversely, 15% of adults described their health as fair or poor, increasing to 38% of those with incomes less than \$25,000.



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

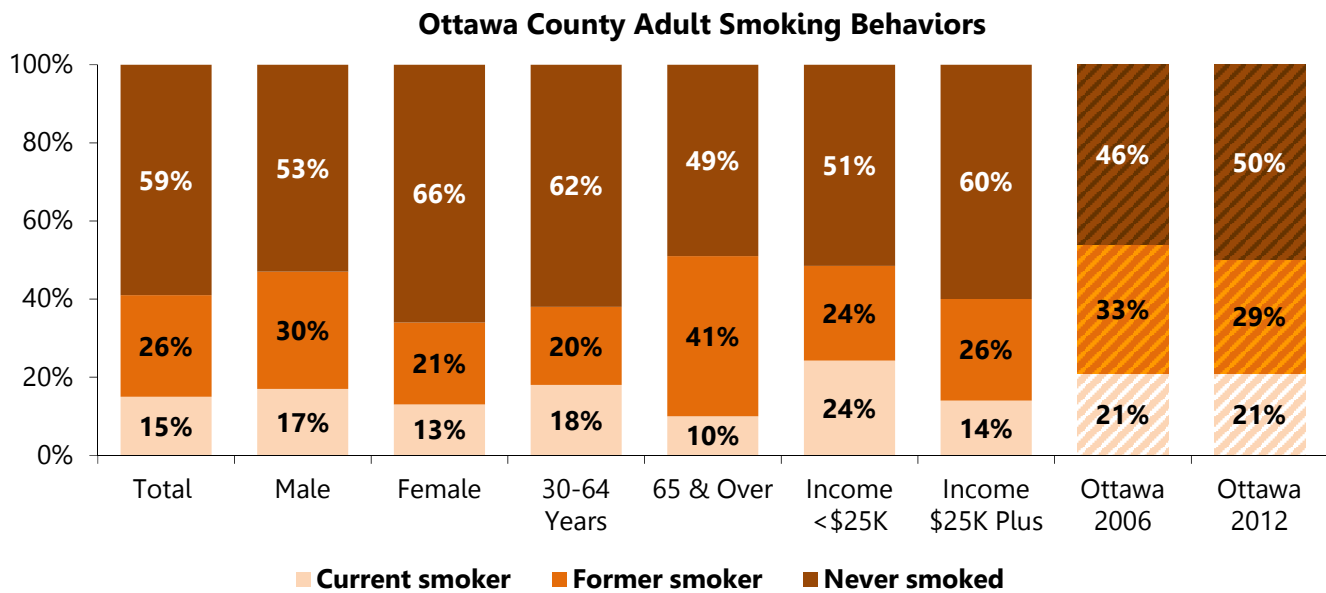
ADULT WEIGHT STATUS

More than three-fourths (77%) of Ottawa County adults were overweight (36%) or obese (41%) based on Body Mass Index (BMI). The 2015 BRFSS indicates that 30% of Ohio and of U.S. adults were obese by BMI. Fifty-four percent (54%) of adults engaged regularly in some type of physical activity or exercise for at least 30 minutes 3 or more days per week.



ADULT TOBACCO USE

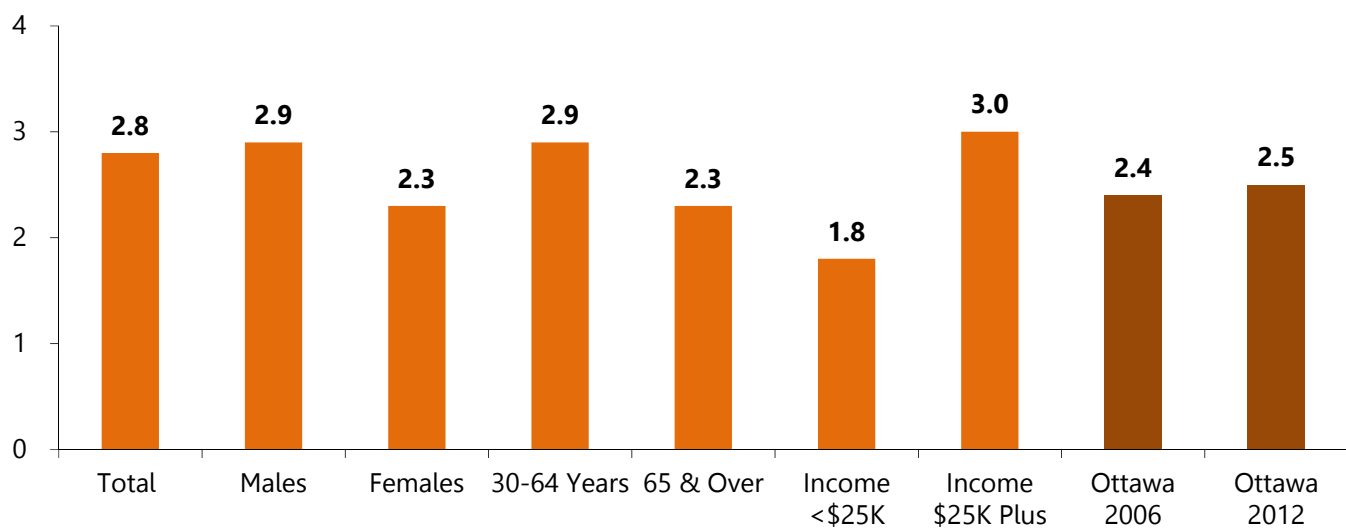
In 2017, 15% of Ottawa County adults were current smokers, and 26% were considered former smokers. Just over half (51%) of smokers reported trying to quit in the past year.



ADULT ALCOHOL USE

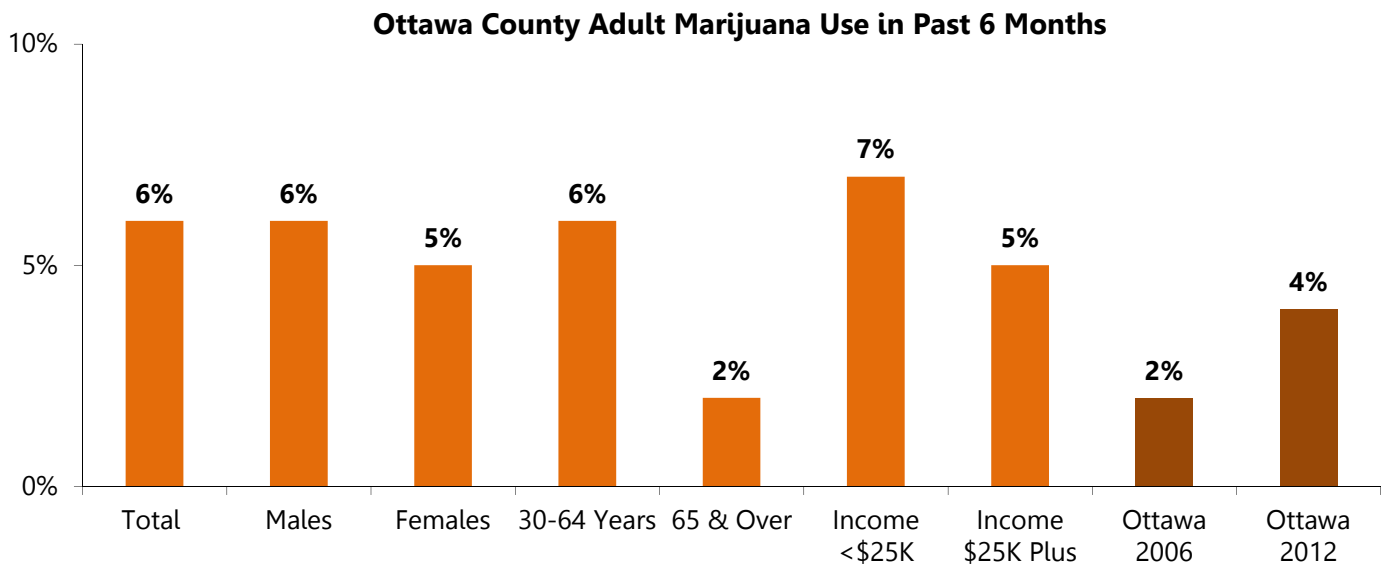
The health assessment indicated that 62% of Ottawa County adults were considered current drinkers. More than one-quarter (26%) of adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers

Adults Average Number of Drinks Consumed Per Drinking Occasion



ADULT DRUG USE

Six percent (6%) of Ottawa County adults had used marijuana during the past 6 months. Five percent (5%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

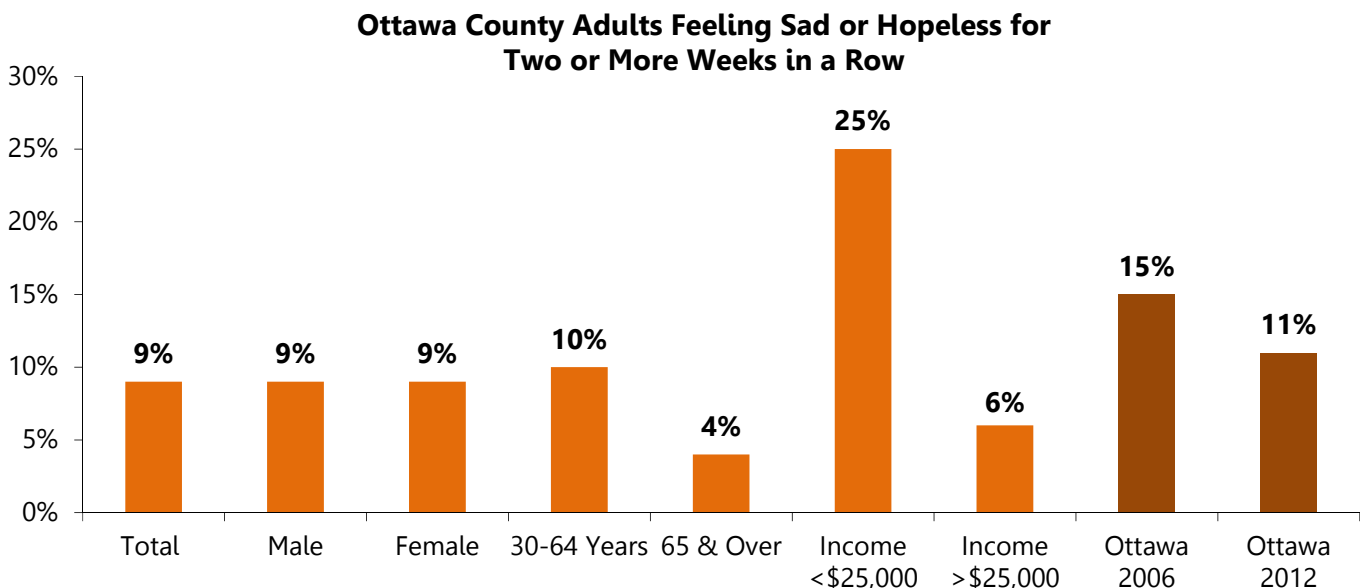


ADULT SEXUAL BEHAVIOR

In 2017, 66% of Ottawa County adults had sexual intercourse. Four percent (4%) of adults had more than one partner. Prevalence estimates suggest that young people aged 15-24 years acquire half of all new STDs and that 1 in 4 sexually active adolescent females have an STD, such as chlamydia or human papillomavirus (HPV) (*Source: CDC, STDs in Adolescents and Young Adults, 2014 STD Surveillance*).

ADULT MENTAL HEALTH

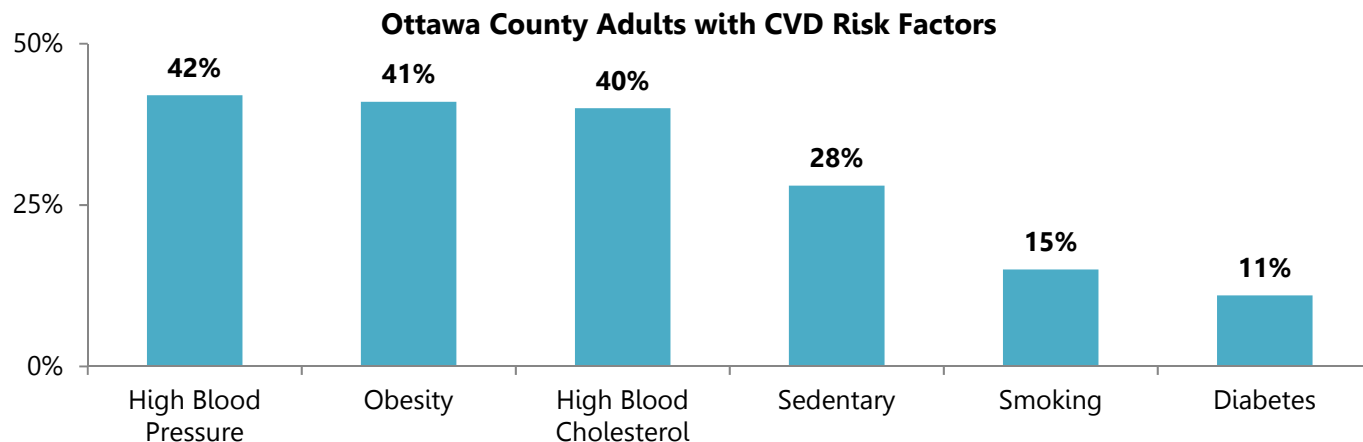
In 2017, 3% of Ottawa County adults considered attempting suicide. One out of eleven (9%) of adults felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities.



Data Summary | Chronic Disease

CARDIOVASCULAR HEALTH

The 2017 Ottawa County Health Assessment found that 7% of adults had survived a heart attack and 2% had survived a stroke at some time in their life. Just over two-fifths (42%) of Ottawa County adults had high blood pressure, 41% were obese, 40% had high blood cholesterol, and 15% were smokers, four known risk factors for heart disease and stroke. Heart disease (27%) and stroke (5%) accounted for 32% of all Ottawa County adult deaths in 2013-2015 (Source: CDC Wonder, 2017).



CANCER

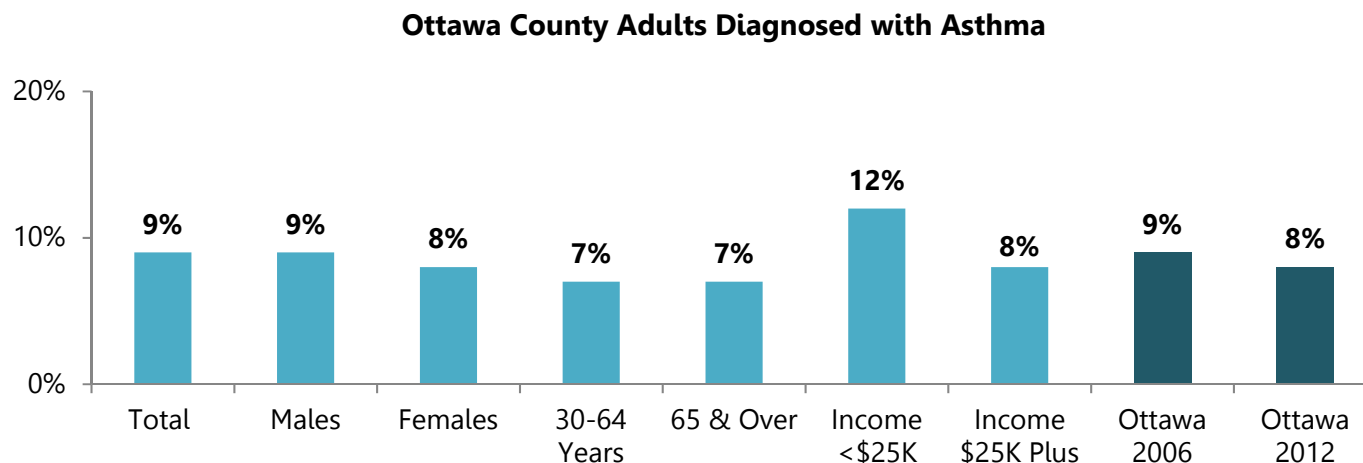
In 2017, 18% of Ottawa County adults had been diagnosed with cancer at some time in their life. The Centers for Disease Control and Prevention (CDC) indicates that from 2011-2015, a total of 573 Ottawa County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that avoiding 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

According to the Ottawa County survey data, 40% of Ottawa County adults were diagnosed with arthritis. The 2015 BRFSS, 28% of Ohio adults and 25% of U.S. adults were told they had arthritis.

ASTHMA

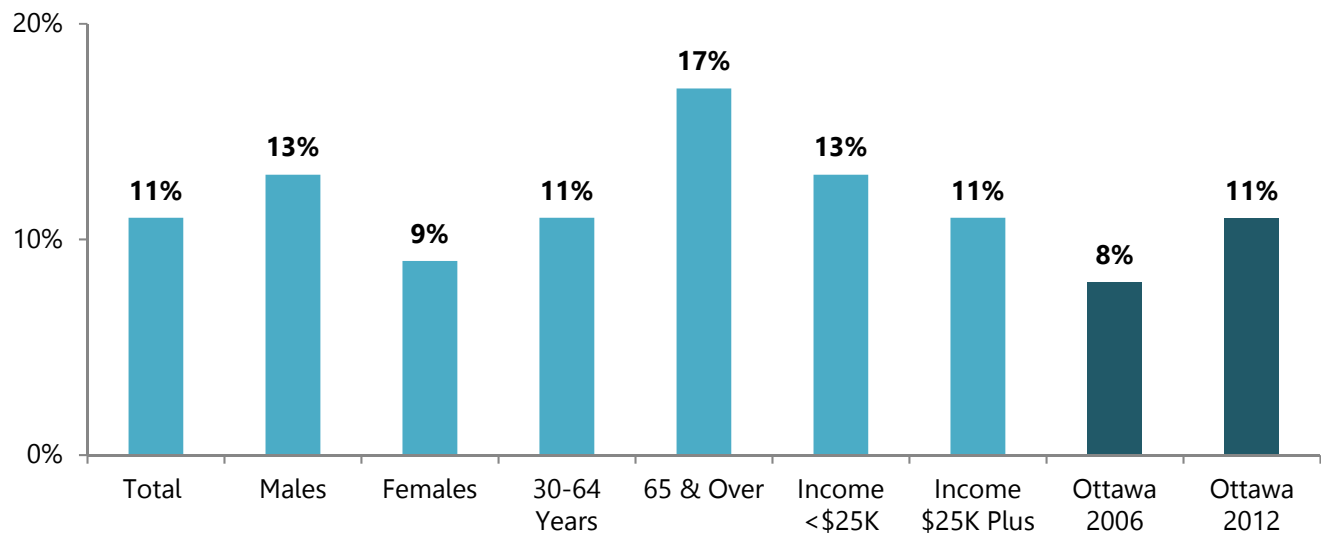
According to the Ottawa County survey data, 9% of adults had been diagnosed with asthma.



DIABETES

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

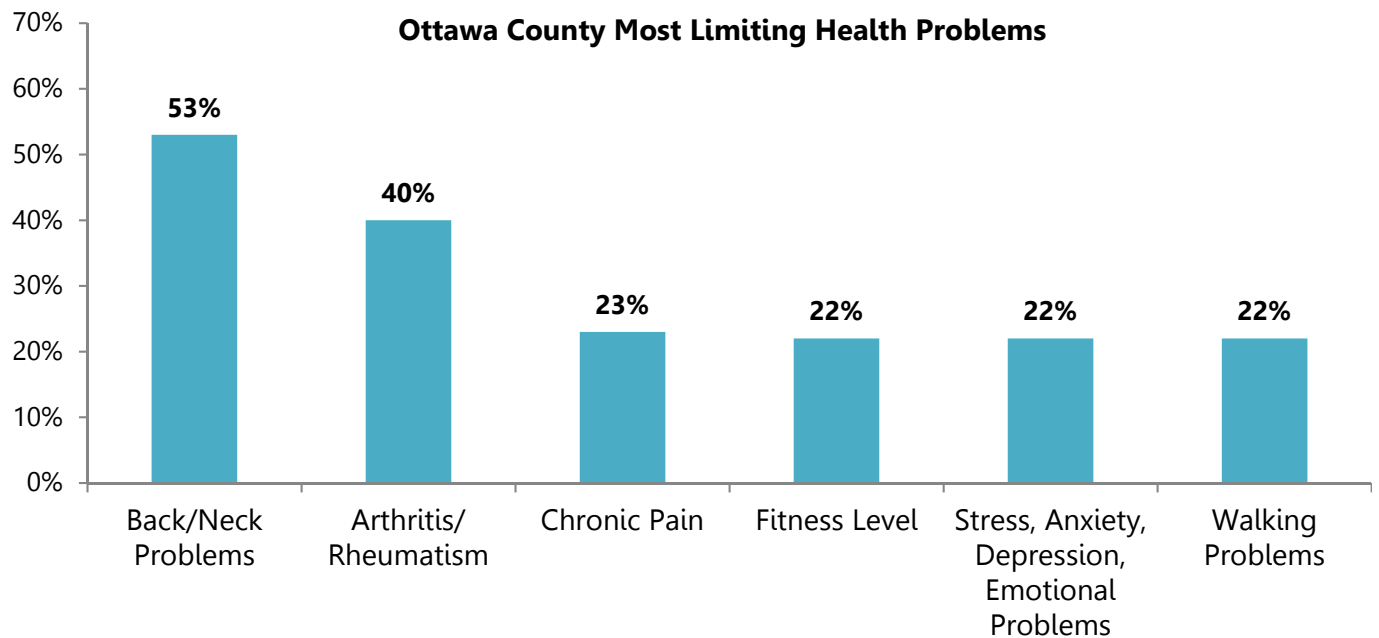
Ottawa County Adults Diagnosed with Diabetes



QUALITY OF LIFE

In 2017, back and neck problems were Ottawa County adult's most limiting health impairment.

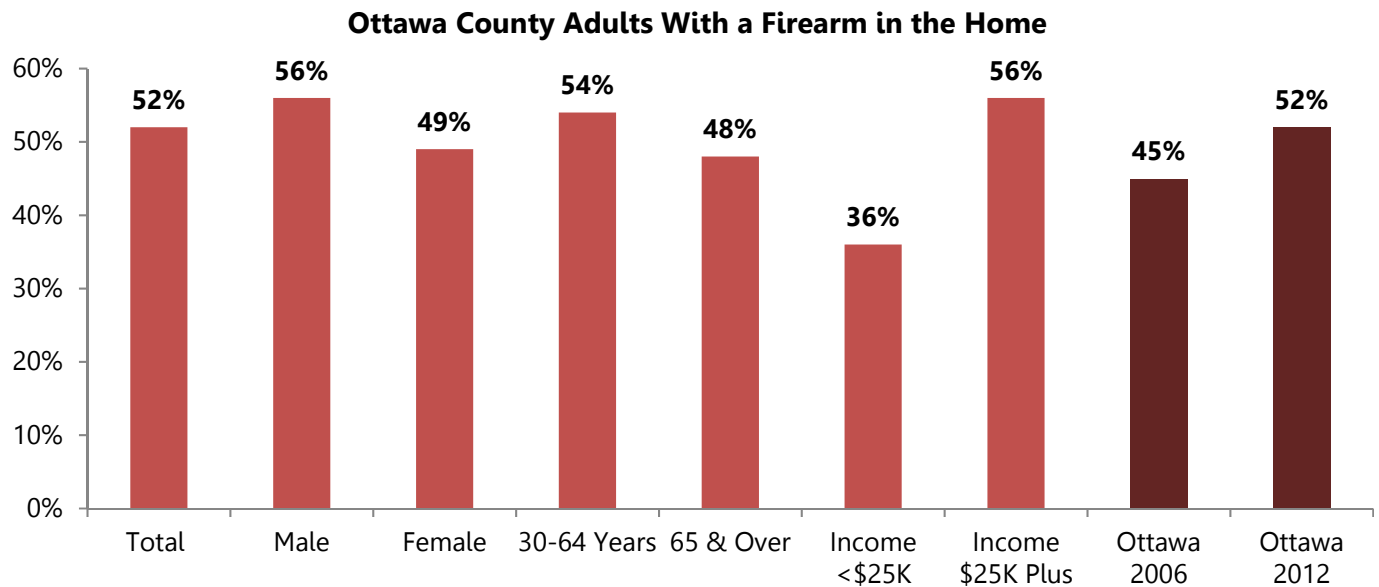
Ottawa County Most Limiting Health Problems



Data Summary | Social Conditions

SOCIAL DETERMINANTS OF HEALTH

In 2017, 7% of Ottawa County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Nine percent (9%) of adults needed help meeting their general daily needs.



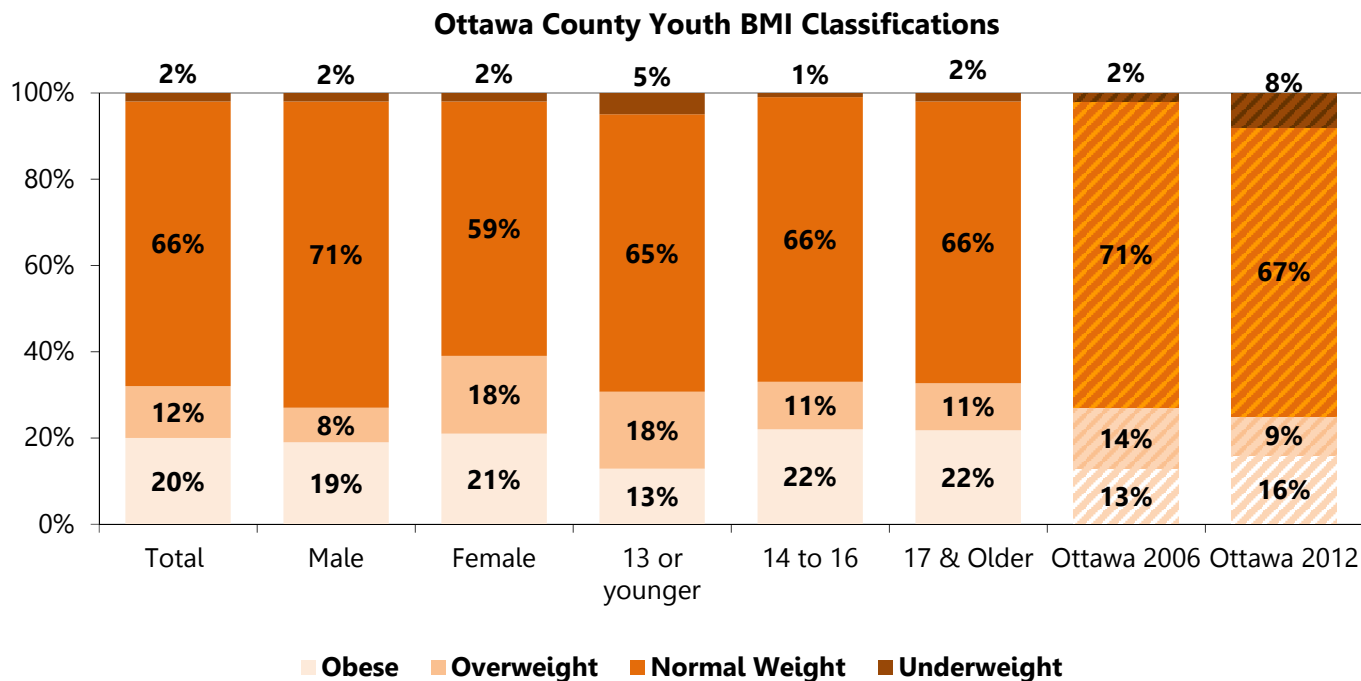
PARENTING

More than two-thirds (68%) of Ottawa County parents discussed social media issues with their 10-to-17-year-old in the past year. Sixty-seven percent (67%) of parents put their infant to sleep on their back.

Data Summary | Youth Health

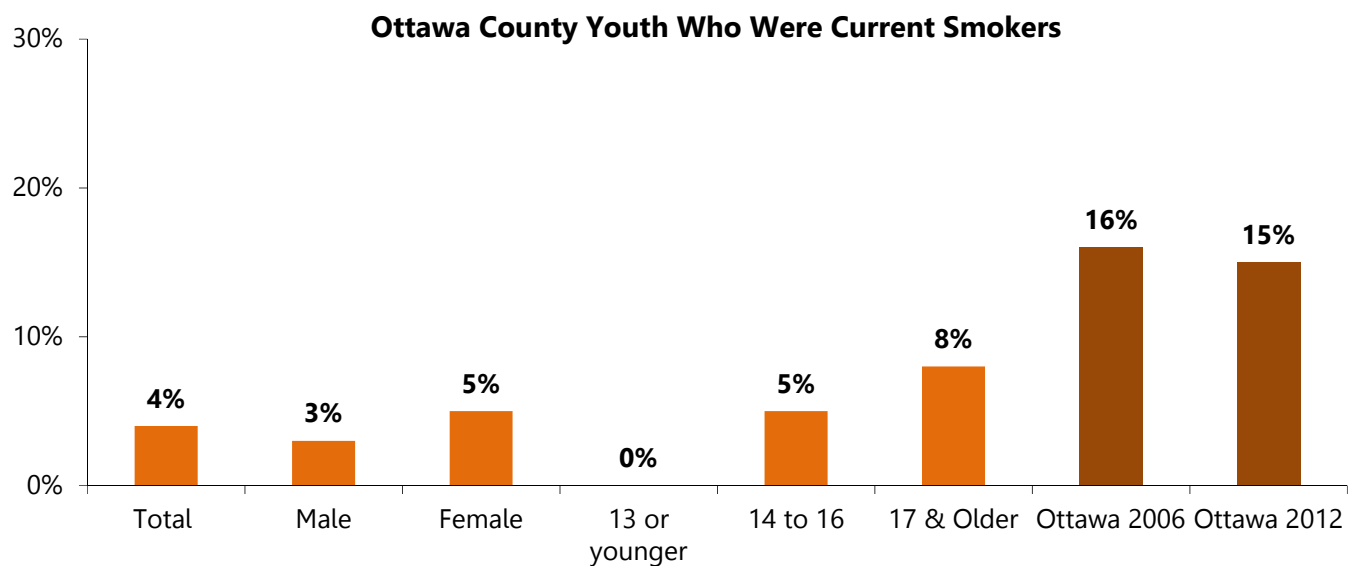
YOUTH WEIGHT STATUS

In 2017, 32% of youth were classified as overweight (12%) or obese (20%) according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 34% of Ottawa County youth reported that they were slightly or very overweight. About three-quarters (76%) of youth exercised for 60 minutes on 3 or more days per week.



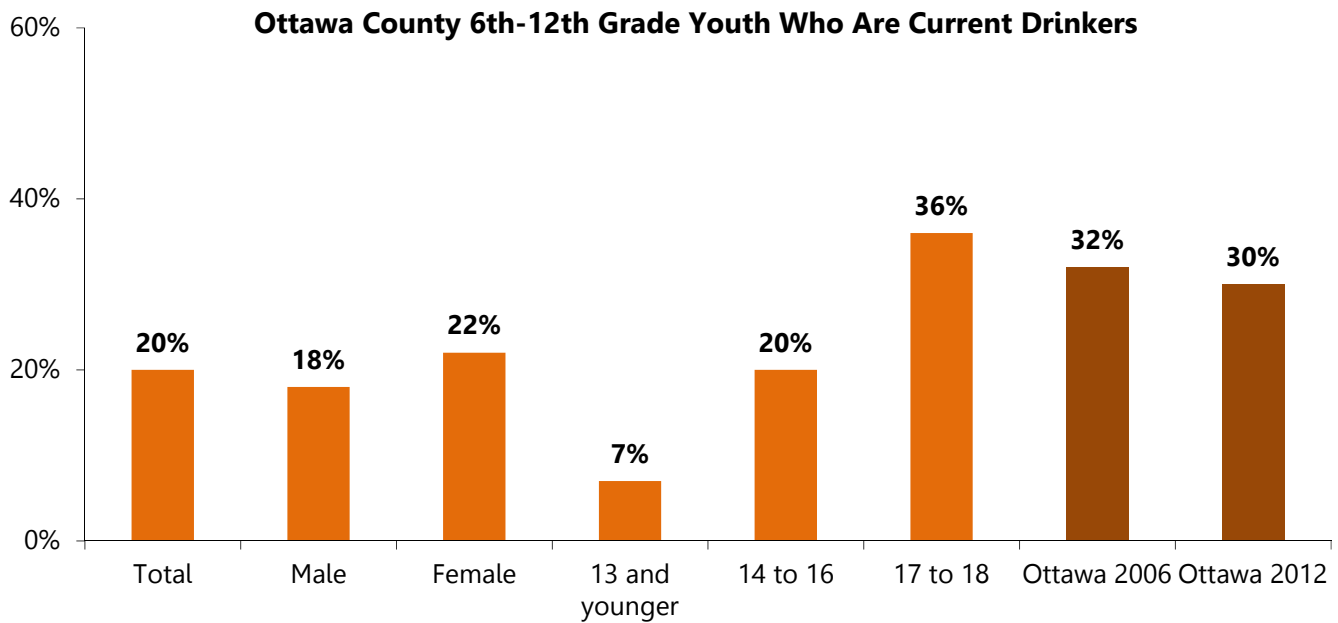
YOUTH TOBACCO USE

The health assessment identified that 4% of Ottawa County youth were current smokers, increasing to 8% of those ages 17 and older. One-tenth (10%) of those who had smoked a whole cigarette did so at 10 years old or younger. Ten percent (10%) of youth used e-cigarettes in the past year. The average age of onset for smoking was 13.2 years old.



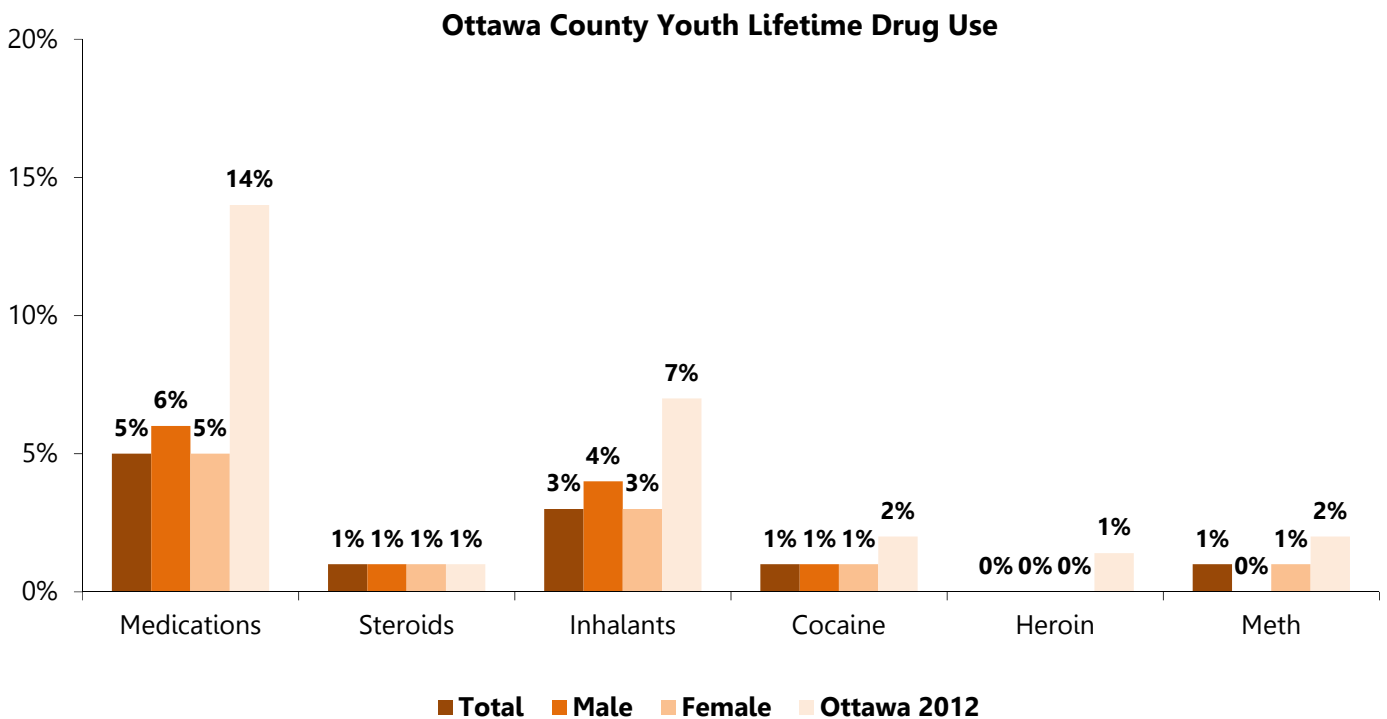
YOUTH ALCOHOL USE

More than two-fifths (45%) of all Ottawa County youth had at least one drink of alcohol in their life. One-fifth (20%) of youth had at least one drink in the past 30 days, increasing to 36% of those ages 17 and older. In the past 30 days, 17% of youth had ridden in a car driven by someone who had been drinking alcohol.



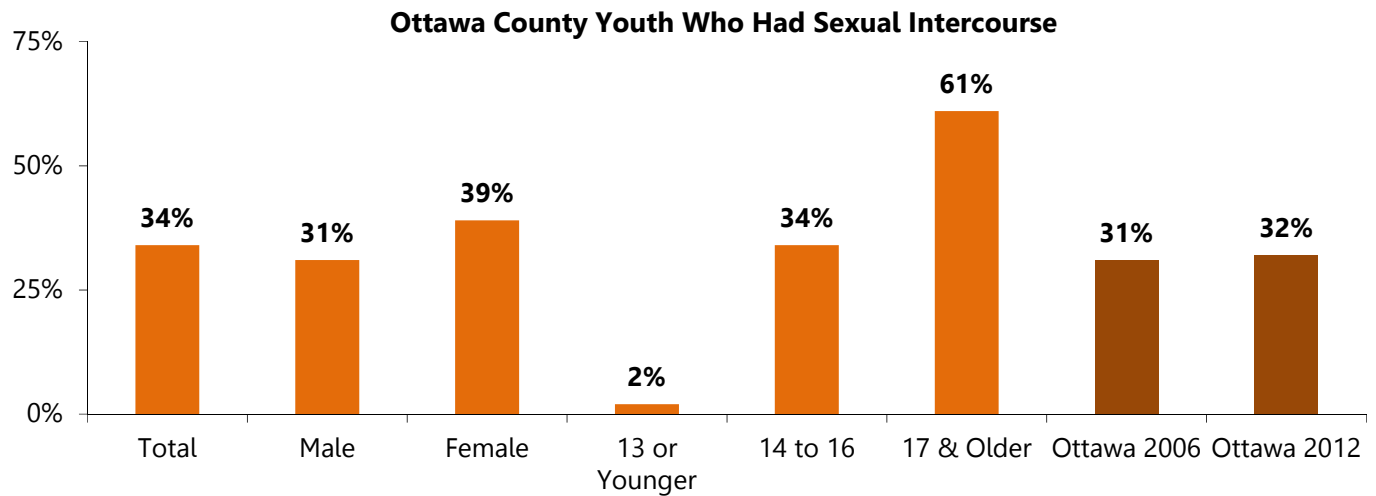
YOUTH DRUG USE

In 2017, 6% of Ottawa County youth had used marijuana at least once in the past 30 days, increasing to 11% of those ages 17 and older. 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.



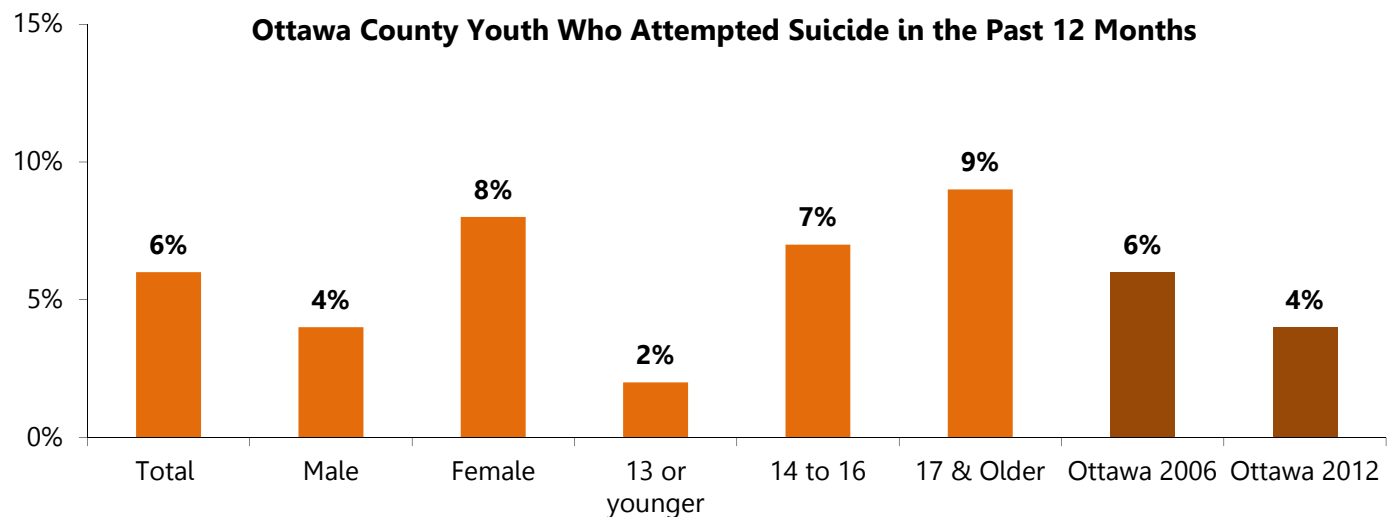
YOUTH SEXUAL BEHAVIOR

Over one-third (34%) of Ottawa County youth had sexual intercourse. One-quarter (25%) of youth had participated in oral sex and 8% had participated in anal sex. Of those who had sexual intercourse, 43% had multiple sexual partners. Note: Two Ottawa County schools did not ask sexual behavior questions.



YOUTH MENTAL HEALTH

In 2017, the health assessment results indicated that 26% of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. Fourteen percent (14%) of Ottawa County youth had seriously considered attempting suicide in the past year, and 6% attempted suicide in the past year.

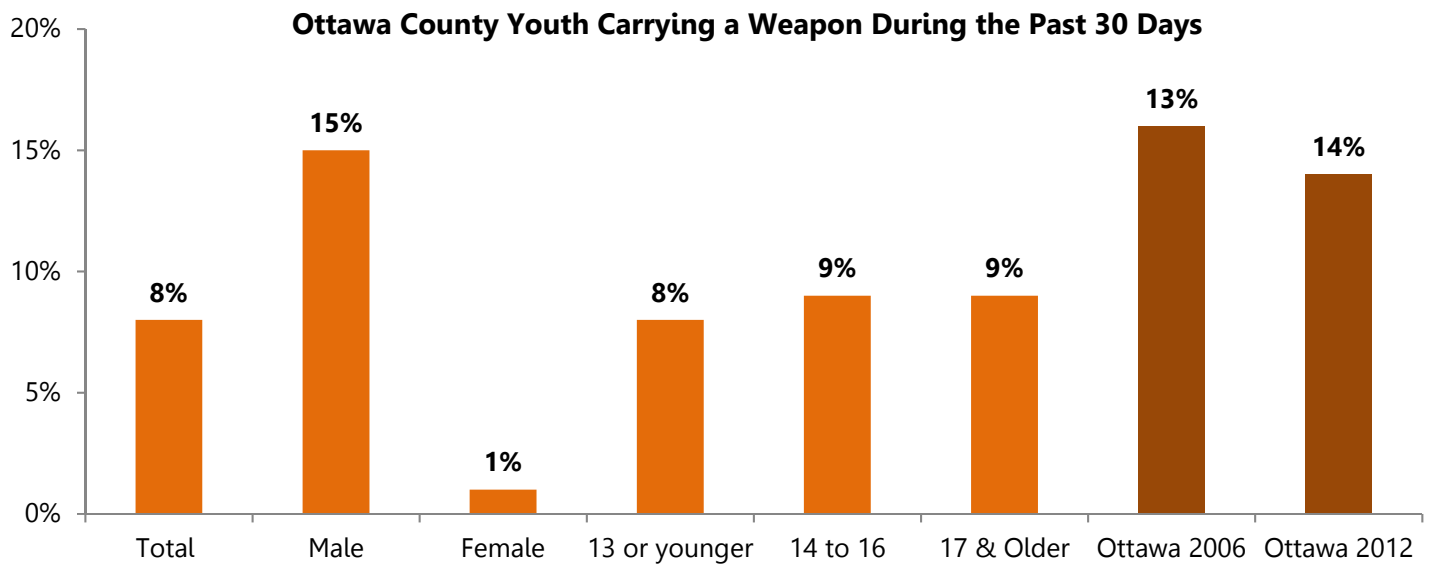


YOUTH SOCIAL DETERMINANTS OF HEALTH











Nearly three-quarters (74%) of youth visited a doctor for a routine checkup in the past year. Twenty-three percent (23%) of youth experienced three or more adverse childhood experiences (ACEs).

YOUTH VIOLENCE

Eight percent (8%) of Ottawa County youth carried a weapon (such as a gun, knife or club) in the past month. Just over one-fifth (22%) of youth had been involved in a physical fight, increasing to 32% of males. Over two-fifths (41%) of youth had been bullied in the past year.




Adult Trend Summary

Adult Variables	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Health Status					
Rated health as excellent or very good	57%	55%	48%	52%	52%
Rated general health as fair or poor 	11%	13%	15%	17%	16%
Rated their mental health as not good on four or more days in the previous month	18%	22%	26%	N/A	N/A
Average days that physical health not good in past month	N/A	3.1	4.8	4.0*	3.8*
Average days that mental health not good in past month	N/A	3.8	3.8	4.3*	3.7*
Healthcare Coverage, Access, and Utilization					
Uninsured	6%	12%	7%	8%	11%
Visited a doctor for a routine checkup in the past year 	73%	67%	62%	72%	70%
Arthritis, Asthma, & Diabetes					
Has been diagnosed with diabetes 	8%	11%	11%	11%	10%
Has been diagnosed with arthritis	37%	32%	40%	28%	25%
Has been diagnosed with asthma 	9%	8%	9%	14%	14%
Cardiovascular Health					
Had angina 	N/A	6%	6%	4%	4%
Had a heart attack 	4%	7%	7%	5%	4%
Had a stroke	1%	1%	2%	4%	3%
Has been diagnosed with high blood pressure 	32%	40%	42%	34%	31%
Has been diagnosed with high blood cholesterol	31%	38%	40%	37%	36%
Had blood cholesterol checked within the past 5 years	74%	76%	81%	78%	78%
Weight Status					
Overweight	34%	37%	36%	37%	36%
Obese 	33%	34%	41%	30%	30%
Alcohol Consumption					
Had at least one alcoholic beverage in past month	55%	63%	62%	53%	54%
Binge drinker (5 or more drinks in a couple of hours on an occasion) 	16%	24%	26%	18%	16%
Tobacco Use					
Current smoker 	21%	21%	15%	22%	18%
Former smoker	33%	29%	26%	24%	25%
Tried to quit smoking	70%	36%	51%	N/A	N/A
Drug Use					
Adults who used marijuana in the past 6 months	2%	4%	6%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	8%	9%	5%	N/A	N/A

N/A - Not Available

*2014 BRFSS Data

 Indicates alignment with Ohio SHA

Adult Variables	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Preventive Medicine					
Had a flu vaccine in the past year (age 65 and older)	N/A	70%	75%	58%	61%
Had a pneumonia vaccine (age 65 and older)	66%	61%	71%	72%	73%
Had a sigmoidoscopy/colonoscopy in the past 5 years (ages 50 and over)	N/A	54%	49%	68%*	69%*
Had a clinical breast exam in the past two years (age 40 and older)	68%	67%	61%	N/A	N/A
Had a mammogram in the past two years (age 40 and older)	64%	73%	64%	72%*	73%*
Had a Pap smear in the past three years	73%	68%	60%	74%*	75%*
Had a PSA test within the past year (age 40 and older)	N/A	54%	52%	43%*	43%*
Had a digital rectal exam within the past year	27%	23%	17%	N/A	N/A
Mental Health					
Felt sad or hopeless for two or more weeks in a row	15%	11%	9%	N/A	N/A
Considered attempting suicide in the past year	3%	5%	3%	N/A	N/A
Oral Health					
Adults who have visited the dentist in the past year	66%	63%	64%	65%*	65%*
Adults who had one or more permanent teeth removed	N/A	49%	42%	47%*	43%*
Adults 65 years and older who had all of their permanent teeth removed	N/A	9%	12%	18%*	15%*
Sexual Behavior					
Had more than one sexual partner in past year	5%	6%	4%	N/A	N/A

N/A - Not Available

*2014 BFRSS Data

■ Indicates alignment with Ohio SHA

Youth Trend Summary




Youth Variables	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Weight Control						
Obese 🇺🇸	13%	16%	20%	23%	13%	14%
Overweight 🇺🇸	13%	9%	12%	11%	16%	16%
Described themselves as slightly or very overweight	28%	26%	34%	35%	28%	32%
Trying to lose weight	51%	48%	50%	50%	47%	46%
Exercised to lose weight	49%	50%	54%	54%	N/A	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight	24%	34%	35%	36%	N/A	N/A
Went without eating for 24 hours or more	4%	5%	3%	1%	10%	13%*
Took diet pills, powders, or liquids without a doctor's advice	2%	2%	1%	2%	5%	5%*
Vomited or took laxatives	1%	2%	2%	2%	5%	4%*
Ate 1 to 4 servings of fruits and vegetables per day 🇺🇸	N/A	78%	85%	88%	N/A	N/A
Physically active at least 60 minutes per day on every day in past week	N/A	66%	28%	25%	26%	27%
Physically active at least 60 minutes per day on 5 or more days in past week	N/A	42%	55%	53%	48%	49%
Did not participate in at least 60 minutes of physical activity on any day in past week	N/A	7%	10%	12%	13%	14%
Watched TV 3 or more hours per day	N/A	35%	14%	15%	28%	25%
Unintentional Injuries and Violence						
Carried a weapon in past month	16%	14%	8%	8%	N/A	4%
Carried a weapon on school property in past month	3%	1%	1%	1%	N/A	4%
Been in a physical fight in past year	30%	26%	22%	19%	6%	8%
Threatened or injured with a weapon on school property in past year	N/A	7%	6%	4%	N/A	6%
Did not go to school because felt unsafe 🇺🇸	3%	6%	3%	3%	5%	6%
Electronically/cyber bullied in past year 🇺🇸	N/A	15%	11%	10%	15%	16%
Bullied in past year	N/A	50%	41%	40%	N/A	N/A
Bullied on school property in past year	N/A	34%	30%	28%	21%	20%
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year 🇺🇸	7%	6%	2%	2%	N/A	10%
Ever physically forced to have sexual intercourse	5%	3%	2%	2%	10%	11%
Mental Health						
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row 🇺🇸	21%	24%	26%	27%	26%	30%
Youth who had seriously considered attempting suicide in the past year 🇺🇸	13%	10%	14%	15%	14%	18%
Youth who had attempted suicide in the past year	6%	4%	6%	7%	6%	9%

N/A – Not available

* Comparative YRBS data for Ohio and U.S. is 2013

**Comparative YRBS data for Ohio is 2011


🇺🇸 Indicates alignment with Ohio SHA

Youth Variables	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Alcohol Consumption						
Ever tried alcohol	66%	59%	45%	52%	71%**	63%
Current drinker 	32%	30%	20%	25%	30%	33%
Binge drinker (of all youth) 	18%	14%	10%	14%	16%	18%
Drank for the first time before age 13 (of all youth)	38%	18%	11%	8%	13%	17%
Rode with someone who had been drinking alcohol in past month	24%	17%	17%	14%	17%	20%
Drove a car after drinking alcohol (of youth drivers)	7%	1%	1%	1%	4%	8%
Obtained the alcohol they drank by someone giving it to them	N/A	32%	42%	44%	38%	44%
Tobacco Use						
Ever tried cigarettes	37%	33%	17%	21%	52%**	32%
Current smokers	16%	15%	4%	5%	15%	11%
Smoked cigarettes on 20 or more days during the past month (of all youth)	7%	6%	1%	1%	7%	3%
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	13%	8%	5%	4%	14%**	7%
Tried to quit smoking (of those youth who smoked in the past year)	43%	50%	57%	52%	56%**	45%
Sexual Behavior						
Ever had sexual intercourse	31%	32%	34%	42%	43%	41%
Used a condom at last intercourse	76%	66%	59%	61%	51%	57%
Used birth control pills at last intercourse	26%	37%	17%	18%	24%	18%
Did not use any method to prevent pregnancy during last sexual intercourse	4%	15%	4%	4%	12%	14%
Had four or more sexual partners (of all youth)	8%	8%	6%	6%	12%	12%
Had sexual intercourse before age 13 (of all youth)	5%	2%	3%	5%	4%	4%
Drug Use						
Used marijuana in the past month 	14%	9%	6%	11%	21%	22%
Ever used methamphetamines	1%	2%	1%	0%	N/A	3%
Ever used cocaine	6%	2%	1%	1%	4%	5%
Ever used heroin	1%	1%	0%	0%	2%	2%
Ever used steroids	3%	1%	1%	1%	3%	4%
Ever used inhalants	13%	7%	3%	3%	9%	7%
Ever used ecstasy/MDMA/Molly	2%	2%	2%	2%	N/A	5%
Ever misused medications	15%	14%	5%	7%	N/A	N/A
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	15%	13%	6%	7%	20%	22%

N/A – Not available

* Comparative YRBS data for Ohio and U.S. is 2013

**Comparative YRBS data for Ohio is 2011

 Indicates alignment with Ohio SHA

Healthcare Access: Healthcare Coverage

Key Findings

The health assessment identified that 7% of Ottawa County adults were without healthcare coverage. The top reason adults gave for being without healthcare coverage was not being able to afford to pay the premiums (43%).

Health Coverage

- In 2017, 93% of Ottawa County adults had healthcare coverage.
- Seven percent (7%) of adults were uninsured, increasing to 10% of those ages 30-64. The 2015 BRFSS reported uninsured prevalence rates as 8% for Ohio and 11% for the U.S.
- One-in-twelve (8%) adults with children living in their household did not have healthcare coverage.
- The following types of healthcare coverage were used: employer (46%); Medicare (21%); someone else's employer (14%); Medicaid or medical assistance (5%); multiple sources, including private (5%); self-paid plan (3%); Health Insurance Marketplace (2%); military or VA (1%); and multiple sources, including government (1%).

7% of Ottawa County adults were uninsured.

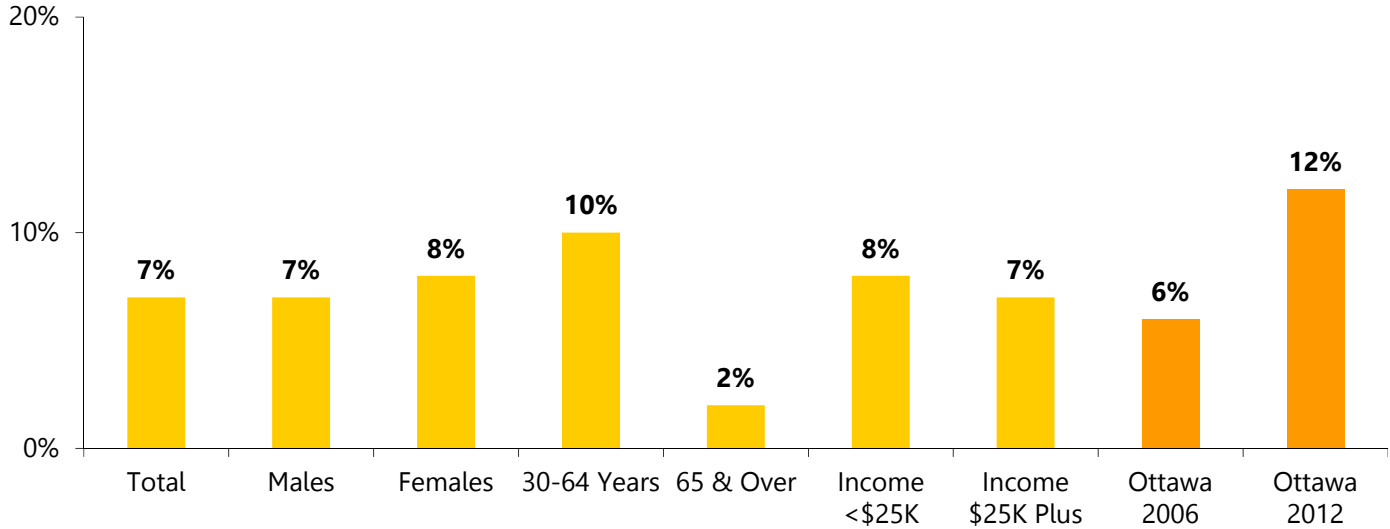
- Ottawa County adult healthcare coverage included the following: medical (96%), prescription coverage (90%), immunizations (78%), outpatient therapy (74%), preventive health (74%), dental (63%), vision/eyeglasses (63%), mental health (56%), alcohol and drug treatment (42%), durable medical equipment (40%), skilled nursing/assisted living (35%), home care (29%), hospice (29%), and transportation (11%).
- The top three reasons uninsured adults gave for being without healthcare coverage were:
 1. They could not afford to pay the premiums (43%)
 2. They lost their job or changed employers (41%)
 3. Their employer does not/stopped offering coverage (19%)

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

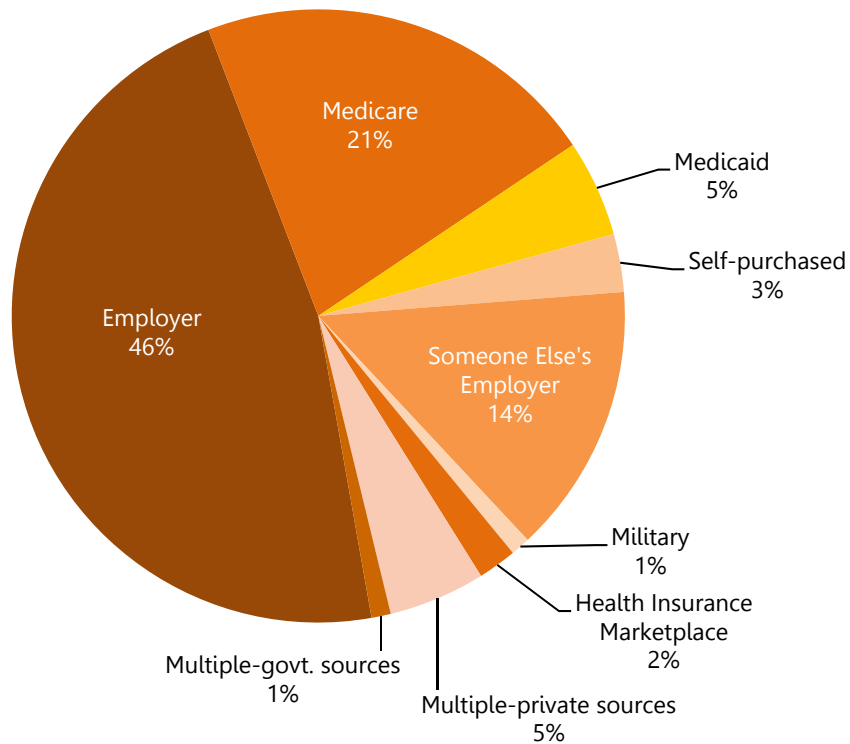
Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Uninsured	6%	12%	7%	8%	11%

The following graph shows the percentages of Ottawa County adults who were uninsured by demographic. Examples of how to interpret the information in the graph include: 7% of all Ottawa County adults were uninsured, including 8% of adults with incomes less than \$25,000 and 10% of adults ages 30-64. The pie chart below shows sources of Ottawa County adults' healthcare coverage.

Uninsured Ottawa County Adults



Source of Health Coverage for Ottawa County Adults



The following table indicates what was included in Ottawa County adults' insurance coverage.

Health Coverage Includes:	Yes	No	Don't Know
Medical	96%	<1%	4%
Prescription Coverage	90%	6%	3%
Immunizations	78%	5%	17%
Outpatient Therapy	74%	3%	23%
Preventive Health	74%	7%	19%
Dental	63%	31%	5%
Vision/Eyeglasses	63%	30%	7%
Mental Health	56%	5%	39%
Alcohol and Drug Treatment	42%	7%	51%
Durable Medical Equipment	40%	6%	54%
Skilled Nursing/Assisted Living	35%	8%	57%
Home Care	29%	10%	61%
Hospice	29%	7%	64%
Transportation	11%	29%	60%

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

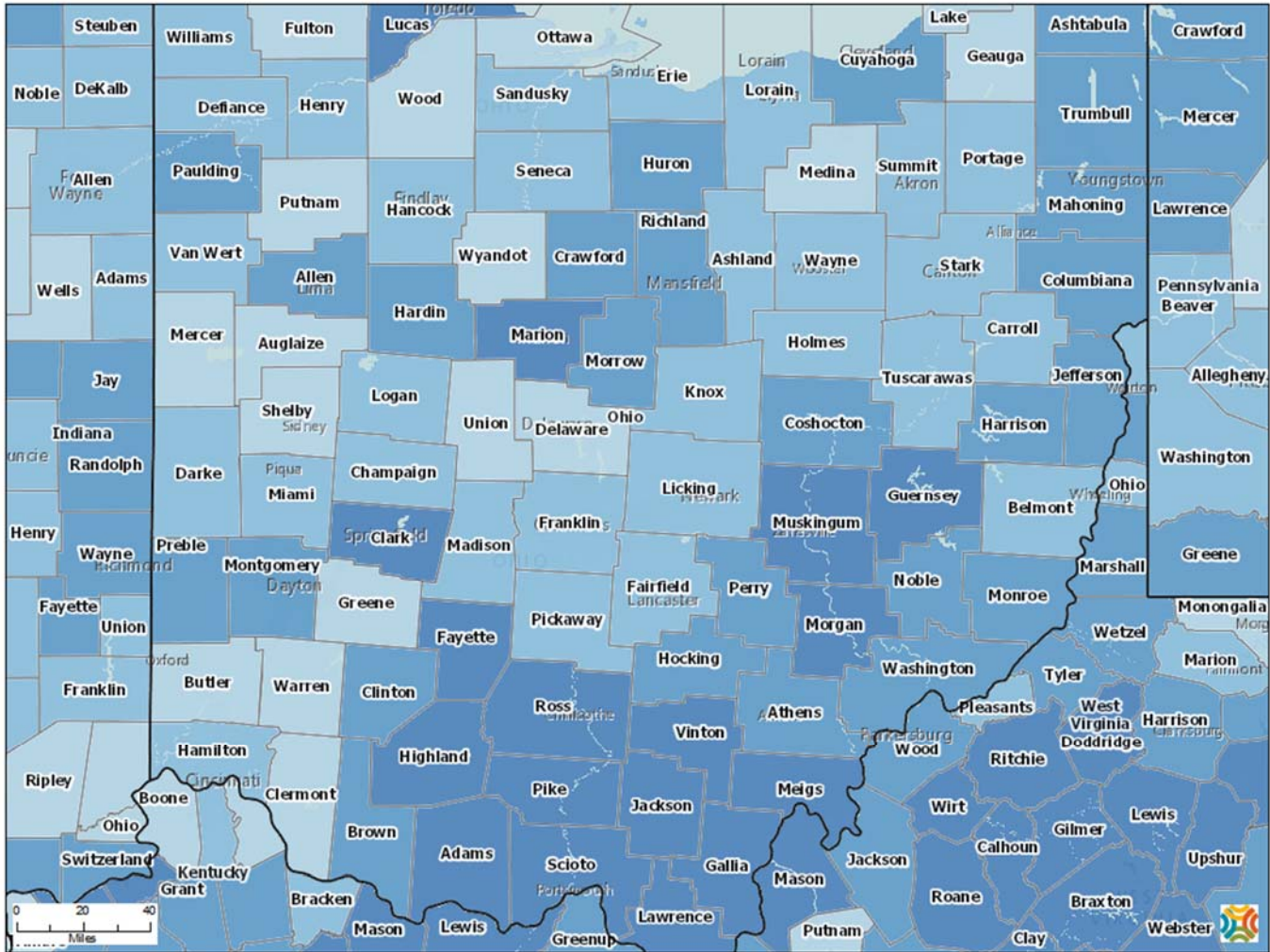
Objective	Ottawa County 2017	Ohio 2015	U.S. 2014**	Healthy People 2020 Target
AHS-1.1: Persons under age of 65 years with health insurance	100% age 20-24 90% age 25-34 92% age 35-44 92% age 45-54 89% age 55-64	84% age 18-24 88% age 25-34 89% age 35-44 93% age 45-54 93% age 55-64	76% age 18-24 74% age 25-34 80% age 35-44 84% age 45-54 87% age 55-64	100%

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

Sources: Healthy People 2020 Objectives, 2014 BRFSS, 2017 Ottawa County Health Assessment)

**2013 BRFSS Data. The 2014 U.S. BRFSS is not able to be broken down by age.

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



Map Legend

Insured, Medicaid / Means-Tested Coverage, Percent by County, ACS 2011-15

- Over 25.0%
- 20.1 - 25.0%
- 15.1 - 20.0%
- Under 15.1%
- No Data or Data Suppressed

Community Commons, 8/11/2017

*(Source: American Community Survey, as compiled by Community Commons, Updated 8-11-2017)
Description of indicator: This layer displays information about the types of health insurance coverage of individuals.*

Healthcare Access: Access and Utilization

Key Findings

More than three-fifths (62%) of Ottawa County adults had visited a doctor for a routine checkup in the past year. More than four-fifths (83%) of adults went outside of Ottawa County for healthcare services in the past year.

Healthcare Access

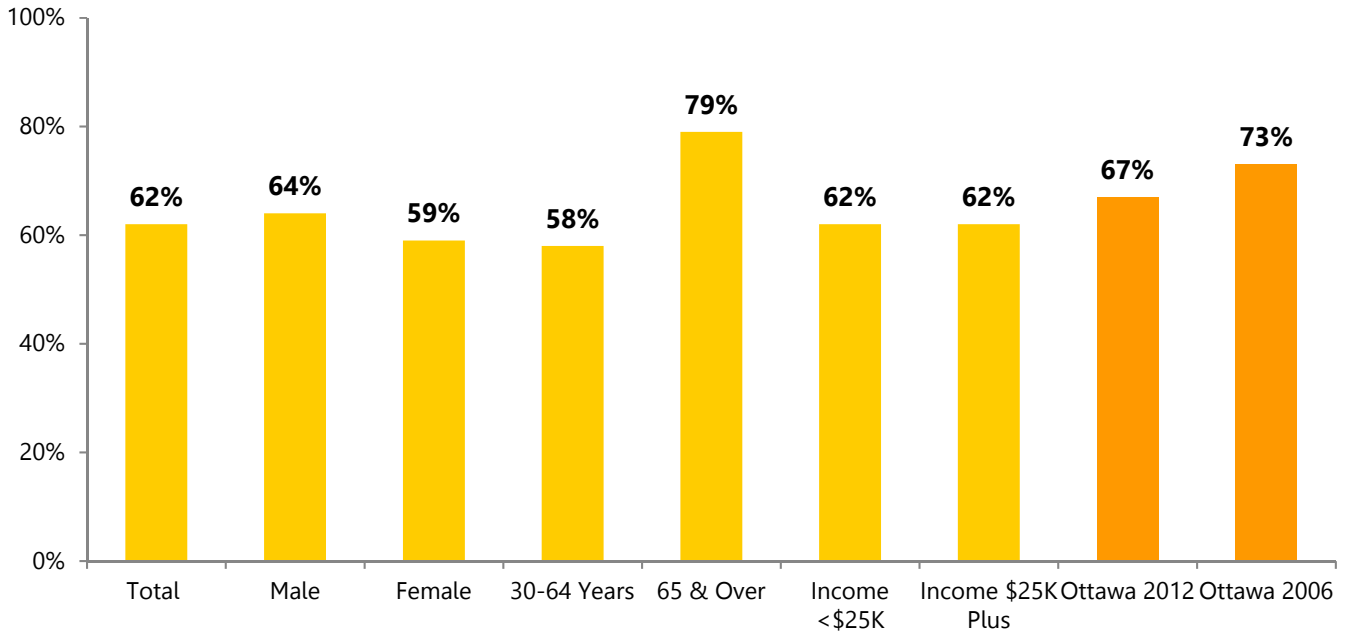
- More than three-fifths (62%) of Ottawa County adults visited a doctor for a routine checkup in the past year.
- Adults with healthcare coverage were more likely to have visited a doctor for a routine checkup in the past year (64%), compared to 40% of those without healthcare coverage.
- Adults visited the following places for healthcare services or advice: doctor's office (57%), multiple places including a doctor's office (22%), Internet (4%), urgent care center (3%), family and friends (3%), multiple places not including a doctor's office (3%), Department of Veteran's Affairs (VA) (2%), chiropractor (1%), hospital emergency room (1%), alternative therapies (<1%), and public health clinic or community health department (<1%). Three percent (3%) of adults indicated they had no usual place for healthcare services.
- Adults preferred to access information about their health or healthcare services from the following: doctor (85%), internet searches (37%), family member or friend (33%), Medical Portal (14%), advertisements or mailings from hospitals, clinics, or doctor's offices (5%), newspaper articles or radio/television news stories (5%), text messages (4%), social networks (3%), and billboards (<1%).
- The following may have prevented Ottawa County adults from seeing a doctor if they were sick, injured, or needed some type of healthcare: cost (29%), doctor would not take their insurance (15%), hours not convenient (13%), difficult to get an appointment (12%), could not get time off work (8%), worried they might find something wrong (6%), could not find childcare (3%), do not trust or believe doctors (3%), frightened of the procedure or doctor (2%), difficult to find/no transportation (2%), and some other reason (6%).
- More than four-fifths (83%) of adults went outside of Ottawa County for the following healthcare services in the past year: dental services (32%), specialty care (28%), primary care (24%), obstetrics/ gynecology (18%), cardiac care (10%), orthopedic care (10%), pediatric care (8%), cancer care (7%), pediatric therapies (4%), mental healthcare/counseling (3%), addiction services (2%), hospice/palliative care (1%), and other services (13%).
- Adults traveled to the following locations for their healthcare needs outside of Ottawa County: Toledo (42%), Sandusky (29%), Fremont (15%), Cleveland (12%), Bellevue (3%), Norwalk (2%), and other places (20%).
- Ottawa County adults had the following problems when they needed healthcare in the past year: could not get appointments when they wanted them (11%), did not have enough money to pay for healthcare or insurance (10%), too busy to get the healthcare they needed (7%), could not find a doctor they were comfortable with (4%), did not have child care (3%), could not find a doctor to take them as a patient (3%), too embarrassed to seek help (2%), healthcare plan did not allow them to see doctors in Ottawa County (2%), did not have transportation (1%), did not get health services because they were concerned about their confidentiality (<1%), and other problems that prevented them from getting healthcare (3%).
- Ottawa County adults had the following issues regarding their healthcare coverage: deductibles were too high (39%), premiums were too high (29%), co-pays were too high (26%), high HSA account deductible (10%), opted out of certain coverage because they could not afford it (9%), could not understand their insurance plan (7%), working with their insurance company (6%), opted out of certain coverage because they did not need it (3%), and did not know how to sign up or enroll (1%).

- More than one-quarter (29%) of adults did not get their prescriptions from their doctor filled in the past year.
- Those who did not get their prescriptions filled gave the following reasons: too expensive (72%), no prescriptions to be filled (58%), there was no generic equivalent (30%), side effects (20%), they did not think they needed it (16%), no insurance (16%), they stretched their current prescription by taking less than prescribed (13%), fear of addiction (8%), transportation (4%), and they were taking too many medications (2%).

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Visited a doctor for a routine checkup in the past year	73%	67%	62%	72%	70%

The following graph shows the percentage of Ottawa County adults who had a routine check-up in the past year. Examples of how to interpret the information include: 62% of all Ottawa County adults had a routine check-up in the past year, including 64% of males, 59% of females, and 79% of those ages 65 and older.

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



Availability of Services

- One-in-nine (11%) adults had looked for a program to assist in care for the elderly (either in-home or out-of-home) for either themselves or a loved one. Of those who looked, 44% looked for in-home care, 13% looked for out-of-home placement, 6% looked for an assisted living program, 2% looked for day care, and 2% looked for respite or overnight care. Thirty-three percent (33%) of adults looked for multiple types of programs to assist in care for the elderly.
- Seven percent (7%) of Ottawa County adults had looked for a program to assist in care for a disabled adult (either in-home or out-of-home) for either themselves or a loved one. Of those who looked, 44% looked for in-home care, 14% looked for out-of-home placement, 11% looked for a disabled adult program, 8% looked for an assisted living program, and 3% looked for day care. Nineteen percent (19%) of adults looked for multiple types of programs to assist in care for a disabled adult.
- Ottawa County adults reported they had looked for the following programs for themselves or a loved one: elderly care (10%); depression, anxiety or mental health (9%); weight problems (6%); disability (5%); end-of-life/hospice care (5%); marital/family problems (3%); alcohol abuse (2%); tobacco cessation (2%); detoxification of opiates/heroin (1%); family planning (1%); and drug abuse (<1%). No adults reported they had looked for a program for gambling abuse.

Ottawa County Adults Able to Access Assistance Programs/Services

Types of Programs (% of all adults who looked for the programs)	Ottawa County adults who had looked but had <u>NOT</u> found a specific program	Ottawa County adults who had looked and had found a specific program
Elderly Care (10% of all adults looked)	19%	81%
Depression or Anxiety (9% of all adults looked)	28%	72%
Weight Problems (6% of all adults looked)	43%	57%
End-of-Life/Hospice Care (5% of all adults looked)	0%	100%
Disability (5% of all adults looked)	56%	44%
Marital/Family Problems (3% of all adults looked)	50%	50%
Alcohol Abuse (2% of all adults looked)	0%	100%
Tobacco Cessation (2% of all adults looked)	50%	50%
Detoxification for Opiates/Heroin (1% of all adults looked)	67%	33%
Family Planning (1% of all adults looked)	50%	50%
Drug Abuse (<1% of all adults looked)	0%	100%

Healthcare Access: Preventive Medicine

Key Findings

Almost three-quarters (71%) of adults ages 65 and over had a pneumonia vaccination at some time in their life. Nearly half (49%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.

Preventive Medicine

- More than half (51%) of Ottawa County adults had a flu vaccine during the past 12 months.
- Three-quarters (75%) of Ottawa 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.
- One-third (33%) of adults had a pneumonia shot in their life, increasing to 71% 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.
- Ottawa County adults received the following vaccines: MMR in their lifetime (69%), tetanus booster (including Tdap) in the past 10 years (50%), chicken pox vaccine in their lifetime (44%), Zoster (shingles) vaccine in their lifetime (15%), pertussis vaccine in the past 10 years (11%), and human papillomavirus (HPV) vaccine in their lifetime (5%).
- Reasons for not receiving recommended immunization shots included the following: doctor did not recommend (3%), cost (3%), did not think immunization was necessary (2%), personal beliefs (2%), did not know where to go for immunization (1%), fear of immunization (1%), fear of getting sick (1%), fear of adverse effects (1%), pre-existing health issues (1%), religious beliefs (1%), fear of needles (<1%), and other reasons (3%). Five percent (5%) of adults indicated multiples reasons for not receiving the recommended immunizations.

Preventive Health Screenings and Exams

- Nearly half (49%) of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- In the past two years, adults had the following checked: vision (69%), hearing (27%), skin (21%), and bone density (12%).
- In the past year, 45% of Ottawa County women ages 40 and over had a mammogram.
- In the past year, more than two-fifths (45%) of men ages 50 and over had a PSA test.

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Had a pneumonia vaccination (ages 65 and over)	66%	61%	71%	72%	73%
Had a flu vaccine in the past year (ages 65 and over)	N/A	70%	75%	58%	61%
Had a sigmoidoscopy/colonoscopy in the past 5 years (ages 50 and over)	N/A	54%	49%	68%*	69%*

N/A – Not Available
*2014 BRFSS data

Ottawa County Adult Health Screening Results

General Screening Results	Total Sample*
Diagnosed with High Blood Pressure	42%
Diagnosed with High Blood Cholesterol	40%
Diagnosed with Diabetes	11%
Survived a Heart Attack	7%
Survived a Stroke	2%

*Percentages based on all Ottawa County adults surveyed

Healthy People 2020 Immunization and Infectious Diseases (IID)

Objective	Ottawa 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	71%	72%	73%	90%

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

Sources: Healthy People 2020 Objectives, 2014 BRFSS, 2017 Ottawa County Health Assessment

Who Should Get a Yearly Flu Shot?

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

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

(Source: CDC, Seasonal Influenza (Flu), Who Should Get Vaccinated against Influenza, Updated in September 7, 2016)

If you are this age,

talk to your healthcare professional about these vaccines

If you are this age,	Flu <i>Influenza</i>	Td/Tdap Tetanus, diphtheria, pertussis	Shingles <i>Zoster</i>	Pneumococcal		Meningococcal		MMR Measles, mumps, rubella	HPV <i>Human papillomavirus</i>		Chickenpox <i>Varicella</i>	Hepatitis A	Hepatitis B	Hib <i>Haemophilus influenzae</i> type b
				PCV13	PPSV23	MenACWY or MPSV4	MenB		for women	for men				
19 - 21 years	Green	Green	Light Blue	Blue	Blue	Blue	Blue	Green	Green	Green	Green	Blue	Blue	Blue
22 - 26 years	Green	Green	Light Blue	Blue	Blue	Blue	Blue	Green	Green	Blue	Green	Blue	Blue	Blue
27 - 59 years	Green	Green	Light Blue	Blue	Blue	Blue	Blue	Green	Light Blue	Light Blue	Green	Blue	Blue	Blue
60 - 64 years	Green	Green	Green	Blue	Blue	Blue	Blue	Light Blue	Light Blue	Light Blue	Green	Blue	Blue	Blue
65+ year	Green	Green	Green	Green	Green	Blue	Blue	Light Blue	Light Blue	Light Blue	Green	Blue	Blue	Blue

More Information:

You should get flu vaccine every year.

You should get a Td booster every 10 years. You also need 1 dose of Tdap. Women should get a Tdap vaccine during every pregnancy to help protect the baby.

You should get shingles vaccine even if you have had shingles before.

You should get 1 dose of PCV13 and at least 1 dose of PPSV23 depending on your age and health condition.

You should get this vaccine if you did not get it when you were a child.

You should get HPV vaccine if you are a woman through age 26 years or a man through age 21 years and did not already complete the series.



Recommended For You: This vaccine is recommended for you *unless* your healthcare professional tells you that you do not need it or should not get it.



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



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

Healthcare Access: Women's Health

Key Findings

In 2017, more than two-fifths (45%) of Ottawa County women over the age of 40 reported having a mammogram in the past year. Just over half (53%) of Ottawa County women ages 19 and over had a clinical breast exam and 38% had a Pap smear to detect cancer of the cervix in the past year. The health assessment determined that 5% of women survived a heart attack and 2% survived a stroke at some time in their life. Nearly two-fifths (37%) of women were obese, 35% had high blood cholesterol, 31% had high blood pressure, and 13% were identified as smokers, all known risk factors for cardiovascular diseases.

Women's Health Screenings

- In 2017, 73% of women had a mammogram at some time and nearly two-fifths (37%) had this screening in the past year.
- More than two-fifths (45%) 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.
- Most (92%) Ottawa County women had a clinical breast exam at some time in their life, and 53% had one within the past year. More than three-fifths (61%) of women ages 40 and over had a clinical breast exam in the past two years.
- This assessment identified that 89% of Ottawa County women had a Pap smear, and 38% reported having had the exam in the past year. Sixty percent (60%) 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.

Note: Women's health screening recommendations vary.

Women's Health Concerns

- Women used the following as their usual source of services for female health concerns: private gynecologist (58%), general or family physician (24%), community health center (2%), family planning clinic (2%), and health department clinic (1%). Twelve percent (12%) indicated they did not have a usual source of services for female health concerns.
- Ottawa County women had experienced the following: menopause (53%), premenstrual syndrome (PMS) (20%), incontinence (13%), hormone replacement therapy (11%), perimenopause (11%), and osteoporosis (10%).
- In 2017, the health assessment determined that 5% of women had survived a heart attack and 2% had survived a stroke at some time in their life.
- From 2013-2015, major cardiovascular diseases (heart disease and stroke) accounted for 32% of all female deaths in Ottawa County (*Source: CDC Wonder, Underlying Cause of Death*).

Ottawa County Female Leading Causes of Death, 2013 – 2015

1. Heart Diseases (26% of all deaths)
2. Cancers (21%)
3. Chronic Lower Respiratory Diseases (7%)
4. Stroke (6%)
5. Alzheimer's (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 (5%)

Source: CDC Wonder, 2013-2015

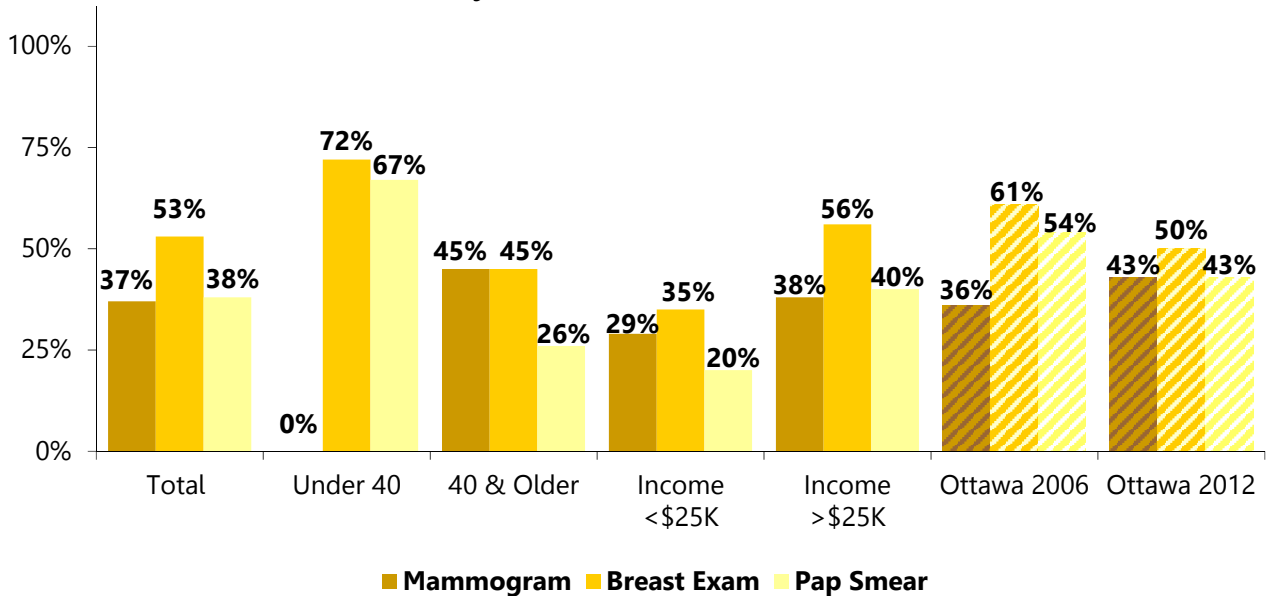
- Major risk factors for cardiovascular disease include smoking, obesity, high blood cholesterol, high blood pressure, physical inactivity, and diabetes. In Ottawa County, the 2017 health assessment has identified that:
 - 71% of women were overweight (34%) or obese (37%) (2015 BRFSS reports 61% for Ohio and 59% for U.S.)
 - 35% were diagnosed with high blood cholesterol (2015 BRFSS reports 36% for Ohio and 35% for U.S.)
 - 31% were diagnosed with high blood pressure (2015 BRFSS reports 31% for Ohio and 30% for U.S.)
 - 13% 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

- Fourteen percent (14%) of Ottawa County women had been pregnant in the past 5 years.
- During their last pregnancy, Ottawa County women had a prenatal appointment in the first 3 months (48%), took a multi-vitamin with folic acid during pregnancy (33%), had a dental exam (21%), took a multi-vitamin with folic acid pre-pregnancy (15%), received WIC benefits (15%), and smoked cigarettes or used other tobacco products (3%).
- Thinking back to their last pregnancy, 41% of women wanted to be pregnant then, 35% did not recall, 8% wanted to be pregnant sooner, 8% wanted to be pregnant later, and 8% did not want to be pregnant then or any time in the future.

The following graph shows the percentage of Ottawa County females that had various health exams in the past year. Examples of how to interpret the information include: 37% of Ottawa County females had a mammogram within the past year, 53% had a clinical breast exam, and 38% had a pap smear.

Ottawa County Women's Health Exams Within the Past Year

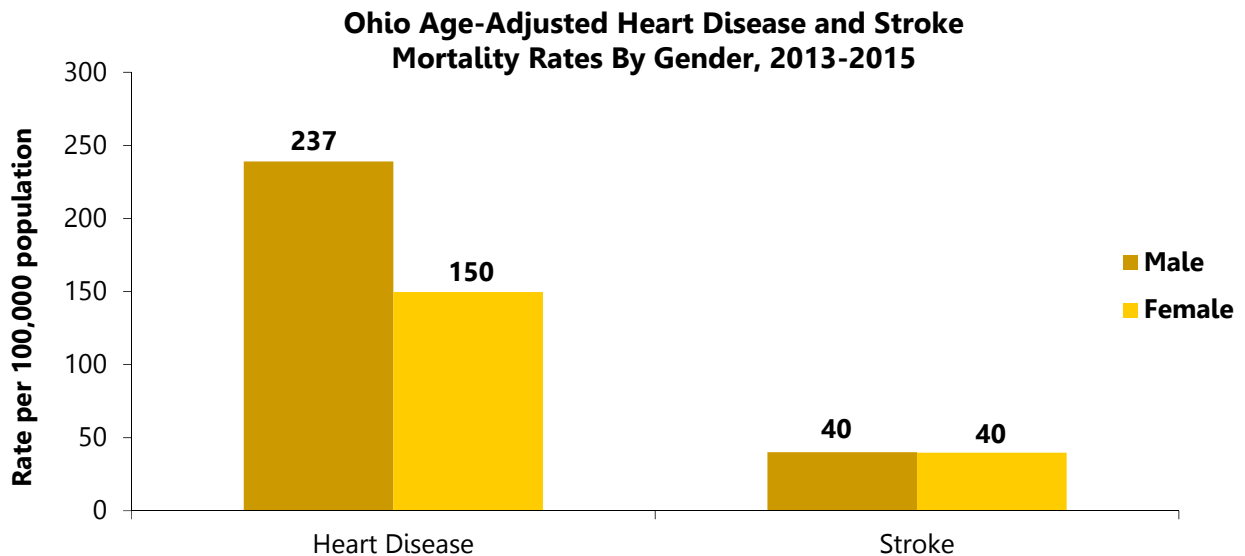
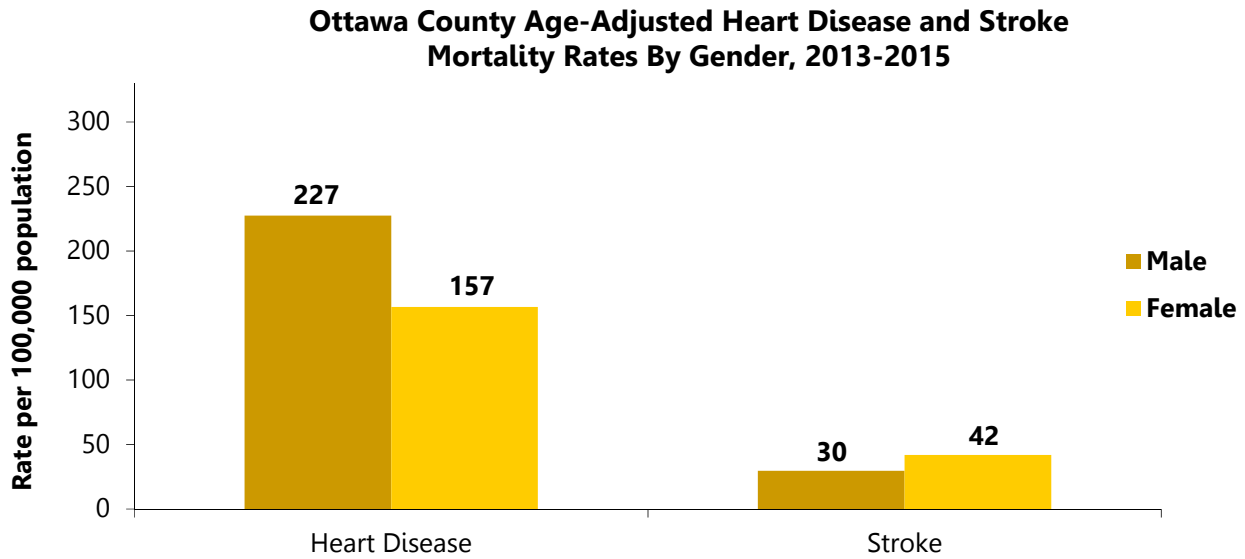


Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2014	U.S. 2014
Had a clinical breast exam in the past two years (age 40 & over)	68%	67%	61%	N/A	N/A
Had a mammogram in the past two years (age 40 & over)	64%	73%	64%	72%	73%
Had a Pap smear in the past three years	73%	68%	60%	74%	75%

N/A – Not Available

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

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



(Source: CDC Wonder, 2013-2015)

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

Women's Health Data

- Approximately 13% of adult females ages 18 years or older reported fair or poor health.
- 14% of adult females in the U.S. currently smoke.
- Of the adult females in the U.S., 19% had four or more drinks in one day at least once in the past year.
- Only 48% of adult females in the U.S. met the 2008 federal physical activity guidelines for aerobic activity through leisure-time aerobic activity.
- 39% of females ages 20 years and older are obese.
- 33% of females ages 20 and older have hypertension.
- There are 9% of females under the age of 65 without healthcare coverage.
- The leading causes of death for females in the United States are heart disease, cancer and chronic lower respiratory diseases.

Source: CDC, National Center for Health Statistics, Women's Health, Fast Stats, May 3, 2017

Healthcare Access: Men's Health

Key Findings

In 2017, 45% of Ottawa County males over the age of 50 had a Prostate-Specific Antigen (PSA) test within the past year. More than half (51%) of men had been diagnosed with high blood pressure, 44% had high blood cholesterol, and 17% were identified as smokers, which, along with obesity (45%), are known risk factors for cardiovascular diseases.

Men's Health Screenings and Concerns

- Half (50%) of Ottawa County males had a Prostate-Specific Antigen (PSA) test at some time in their life, and 29% had one in the past year.
- Three-quarters (75%) of males age 50 and over had a PSA test at some time in their life, and 45% had one in the past year.
- More than half (56%) of men had a digital rectal exam in their lifetime, and 17% had one in the past year.
- From 2013-2015, major cardiovascular diseases (heart disease and stroke) accounted for 33% of all male deaths in Ottawa County (Source: CDC Wonder).
- In 2017, the health assessment determined that 10% of men had a heart attack and 2% had 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 Ottawa County, the 2017 health assessment has identified that:
 - 84% of men were overweight or obese (2015 BRFSS reports 71% for Ohio and 70% for U.S.)
 - 51% were diagnosed with high blood pressure (2015 BRFSS reports 38% for Ohio and 34% for U.S.)
 - 44% were diagnosed with high blood cholesterol (2015 BRFSS reports 38% for Ohio and 38% for U.S.)
 - 17% of all men were current smokers (2015 BRFSS reports 23% for Ohio and 19% for U.S.)
 - 13% had been diagnosed with diabetes (2015 BRFSS reports 11% for Ohio and 11% for U.S.)
- From 2013-2015, the leading cancer deaths for Ottawa County males were lung, colorectal, and pancreatic cancers. Statistics from the same period for Ohio males indicate that lung, lymphoid, colorectal, and prostate cancers were the leading cancer deaths (Source: CDC Wonder).

Note: Men's health screening recommendations vary.

Ottawa County Male Leading Causes of Death, 2013 – 2015

1. Heart Diseases (29% of all deaths)
2. Cancers (28%)
3. Chronic Lower Respiratory Diseases (5%)
4. Accidents, Unintentional Injuries (4%)
5. Stroke (4%)

Source: CDC Wonder, 2013-2015

Ohio Male Leading Causes of Death, 2013 – 2015

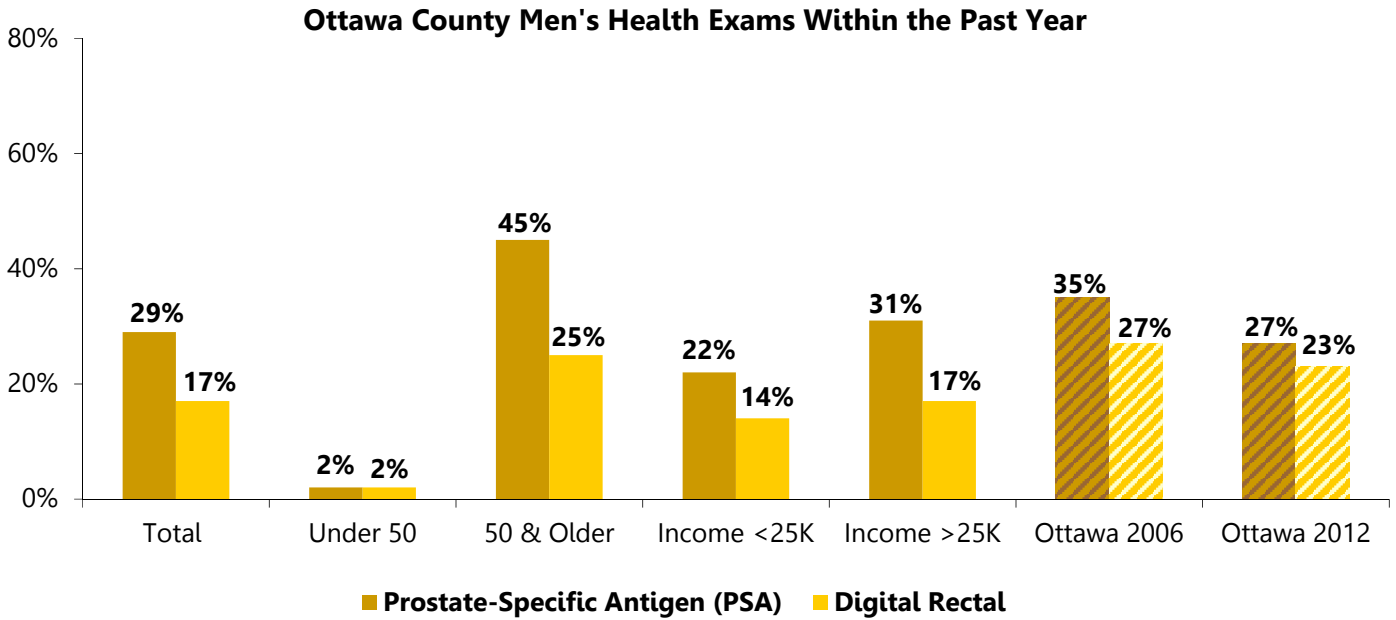
1. Heart Diseases (25% of all deaths)
2. Cancers (23%)
3. Accidents, Unintentional Injuries (7%)
4. Chronic Lower Respiratory Diseases (6%)
5. Stroke (4%)

Source: CDC Wonder, 2013-2015

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2014	U.S. 2014
Had a PSA test within the past two years (age 40 & over)	N/A	54%	52%	43%	43%
Had a digital rectal exam within the past year	27%	23%	17%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Ottawa County male adults that had various health exams in the past year. Examples of how to interpret the information include: 29% of Ottawa County males had a PSA test within the past year, and 17% had a digital rectal exam.



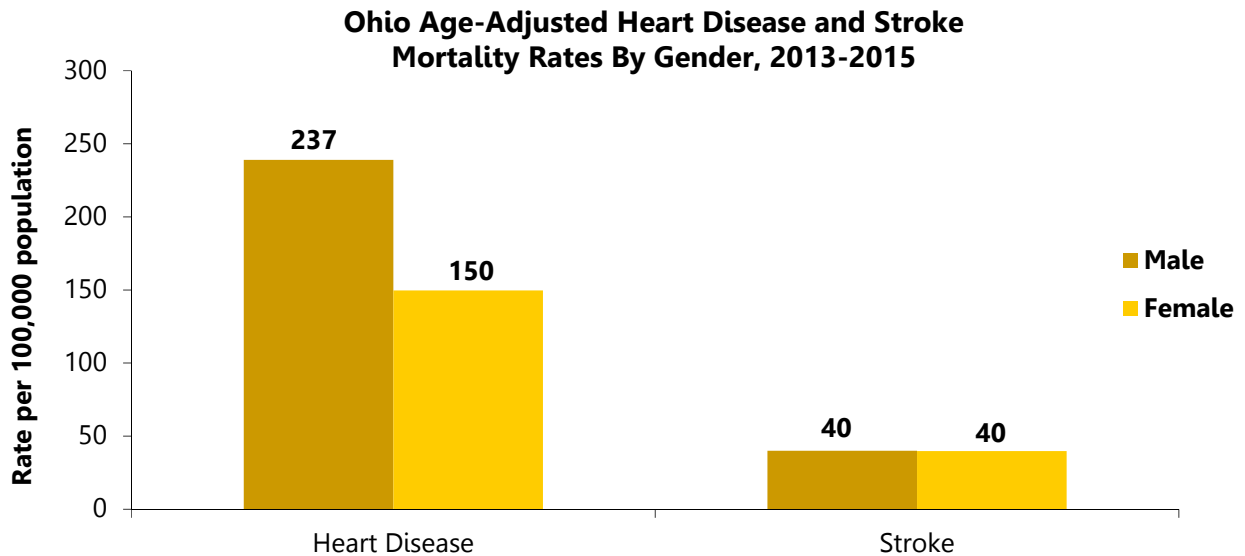
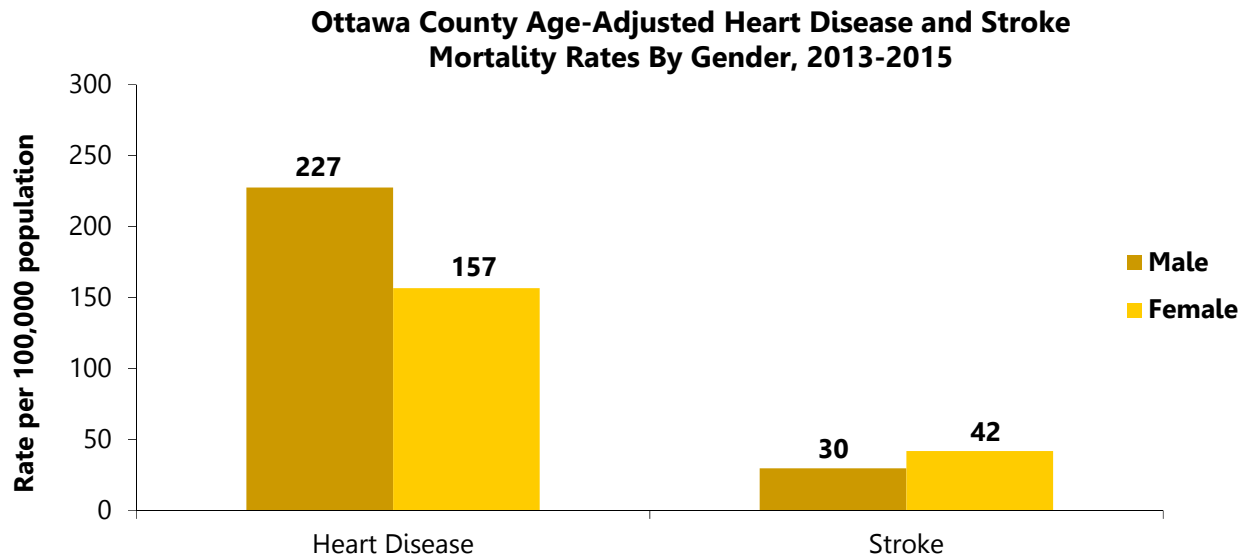
Men's Health Data

- Approximately 12% of adult males ages 18 years or older reported fair or poor health.
- 18% of adult males in the U.S. currently smoke.
- Of the adult males in the U.S., 32% had five or more drinks in one day at least once in the past year.
- Only 56% 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, May 3, 2017

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

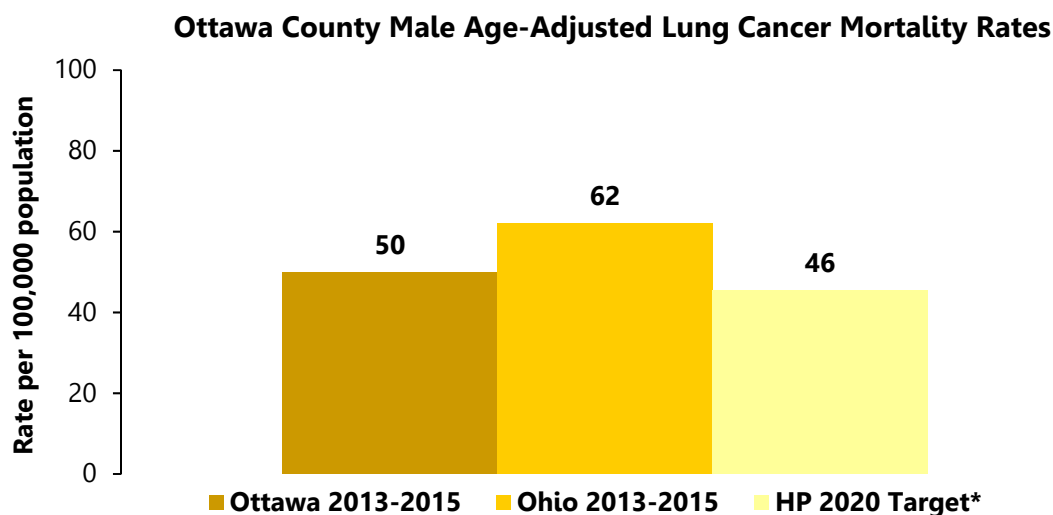
- From 2013-2015, the Ottawa County and Ohio male age-adjusted mortality rate was higher than the female rate for heart disease.
- The Ottawa County male age-adjusted heart disease mortality rate was lower than the Ohio male rate.



Source: CDC Wonder

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

- From 2013-2015, the Ottawa 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 almost two-thirds (64%) of Ottawa 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 previous 12 months.

Access to Dental Care

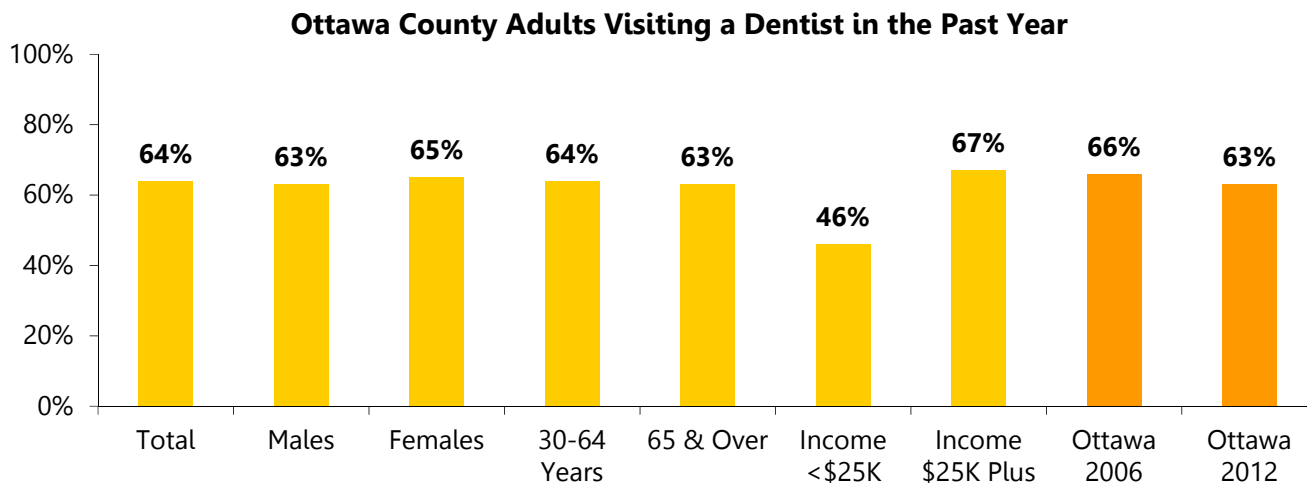
- In the past year, 64% of Ottawa County adults had visited a dentist or dental clinic, decreasing to 46% of those with incomes less than \$25,000.
- The 2014 BRFSS reported that 65% of Ohio adults and 65% of U.S. adults had visited a dentist or dental clinic in the previous twelve months.
- When asked the main reason for not visiting a dentist in the last year, 32% said cost; 20% had no reason to go/had not thought of it; 13% had dentures; 12% said fear, apprehension, nervousness, pain, and dislike going; 5% said their dentist did not accept their medical insurance; 2% did not have/know a dentist; 1% could not get into a dentist; 1% had transportation issues; and 1% could not find a dentist taking new Medicaid patients. Six percent (6%) of adults selected multiple reasons for not visiting a dentist in the past year.
- Nearly one-third (32%) of adults went outside of Ottawa County for dental services.
- More than two-fifths (42%) of adults had one or more of their permanent teeth removed, increasing to 65% of those ages 65 and over. The 2014 BRFSS reported that 47% of Ohio and 43% of U.S. adults had one or more permanent teeth removed.
- About one-in-eight (12%) Ottawa County adults ages 65 and over had all of their permanent teeth removed. The 2014 BRFSS reported that 18% of Ohio adults and 15% of U.S. adults ages 65 and over had all of their permanent teeth removed.

Adult Oral Health	Within the Past Year	Within the Past 2 Years	Within the Past 5 Years	5 or More years	Never
Time Since Last Visit to Dentist/Dental Clinic					
Males	63%	10%	11%	13%	1%
Females	65%	10%	9%	13%	0%
Total	64%	10%	11%	13%	1%

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Adults who had visited the dentist in the past year	66%	63%	64%	65%*	65%*
Adults who had one or more permanent teeth removed	N/A	49%	42%	47%*	43%*
Adults 65 years and older who had all of their permanent teeth removed	N/A	9%	12%	18%*	15%*

N/A – Not available
* 2014 BRFSS Data

The following graph provides information about the frequency of adult dental visits. Examples of how to interpret the information on the first graph include: 64% of all Ottawa County adults had been to the dentist in the past year, including 46% of those with incomes less than \$25,000.



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

Oral Health Basics

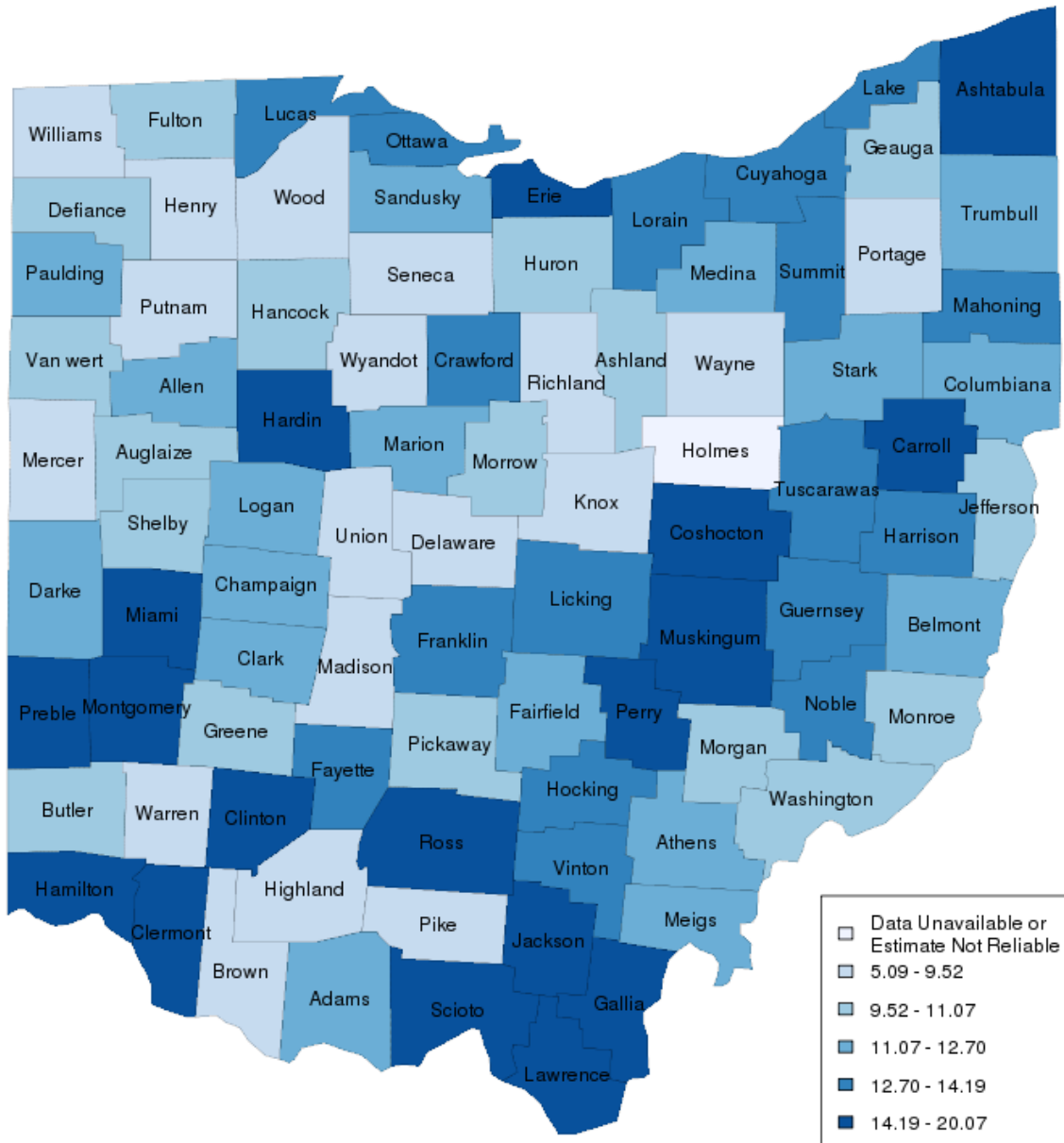
- Oral health affects our ability to speak, smile, eat, and show emotions. It also affects self-esteem, school performance, and attendance at work and school. Oral diseases—which range from cavities to gum disease to oral cancer—cause pain and disability for millions of Americans. They also cost taxpayers 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.

- Fourteen percent (14%) of Ottawa 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, nearly half (48%) of Ottawa County adults rated their health status as excellent or very good. Conversely, 15% of adults described their health as fair or poor, increasing to 38% of those with incomes less than \$25,000.

Adults Who Rated General Health Status Excellent or Very Good

- Ottawa County 48% (2017)
- Ohio 52% (2015)
- U.S. 52% (2015)

Source: BRFSS 2015 for Ohio and U.S.

General Health Status

- In 2017, nearly half (48%) of Ottawa County adults rated their health as excellent or very good. Ottawa County adults with higher incomes (51%) were most likely to rate their health as excellent or very good, compared to 27% of those with incomes less than \$25,000.
- Fifteen percent (15%) 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.
- Ottawa 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 (38%)
 - Were separated (25%) or divorced (22%)
 - Were 65 years of age or older (22%)
 - Had high blood pressure (22%) or high blood cholesterol (19%)

Physical Health Status

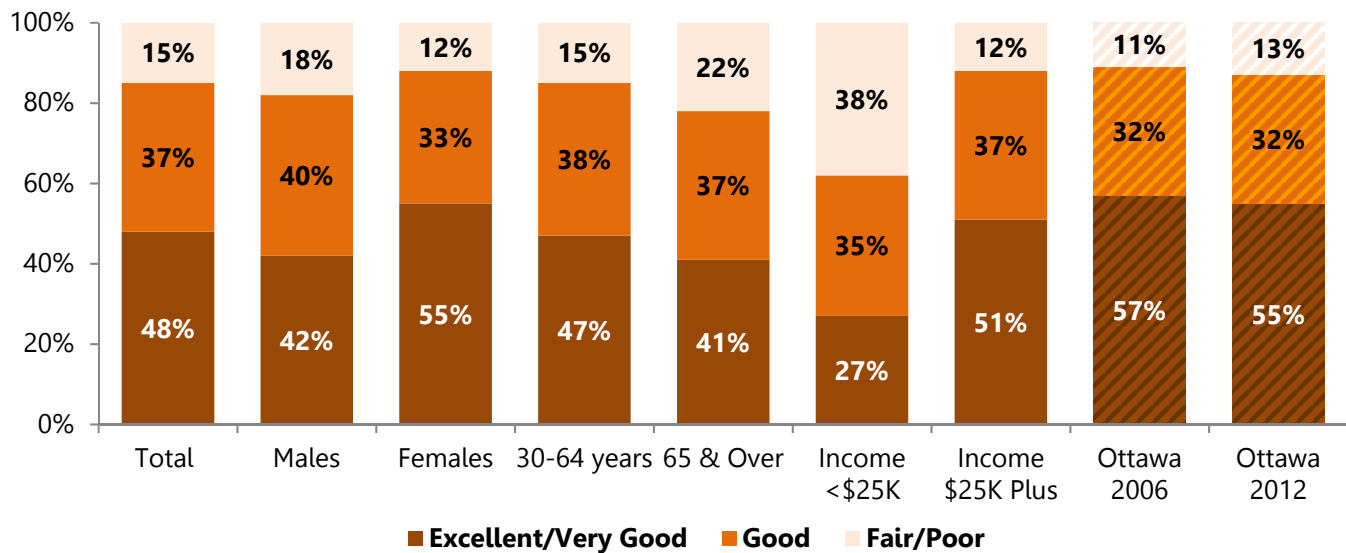
- In 2017, 31% of Ottawa County adults rated their physical health as not good on four or more days in the previous month.
- Ottawa County adults reported their physical health as not good on an average of 4.8 days in the previous month. Ohio and U.S. adults reported their physical health as not good on an average of 4.0 days and 3.8 days, respectively, in the previous month *(Source: 2014 BRFSS)*.

Mental Health Status

- In 2017, 26% of Ottawa County adults rated their mental health as not good on four or more days in the previous month.
- Ottawa County adults reported their mental health as not good on an average of 3.8 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)*.
- Ottawa County adults were most likely to rate their mental health as not good if they:
 - Had an annual household income under \$25,000 (45%)
 - Were female (32%)

The following graph shows the percentage of Ottawa County adults who described their personal health status as excellent/very good, good, and fair/poor. Examples of how to interpret the information include: 48% of all Ottawa County adults, including 55% of females, rated their health as excellent or very good. The table shows the percentage of adults with poor physical and mental health in the past 30 days.

Ottawa County Adult Health Perceptions*



*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	44%	22%	4%	4%	23%
Females	43%	22%	8%	5%	19%
Total	44%	22%	6%	5%	21%
Mental Health Not Good in Past 30 Days*					
Males	58%	17%	4%	<1%	17%
Females	46%	18%	5%	5%	21%
Total	52%	19%	4%	2%	19%

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

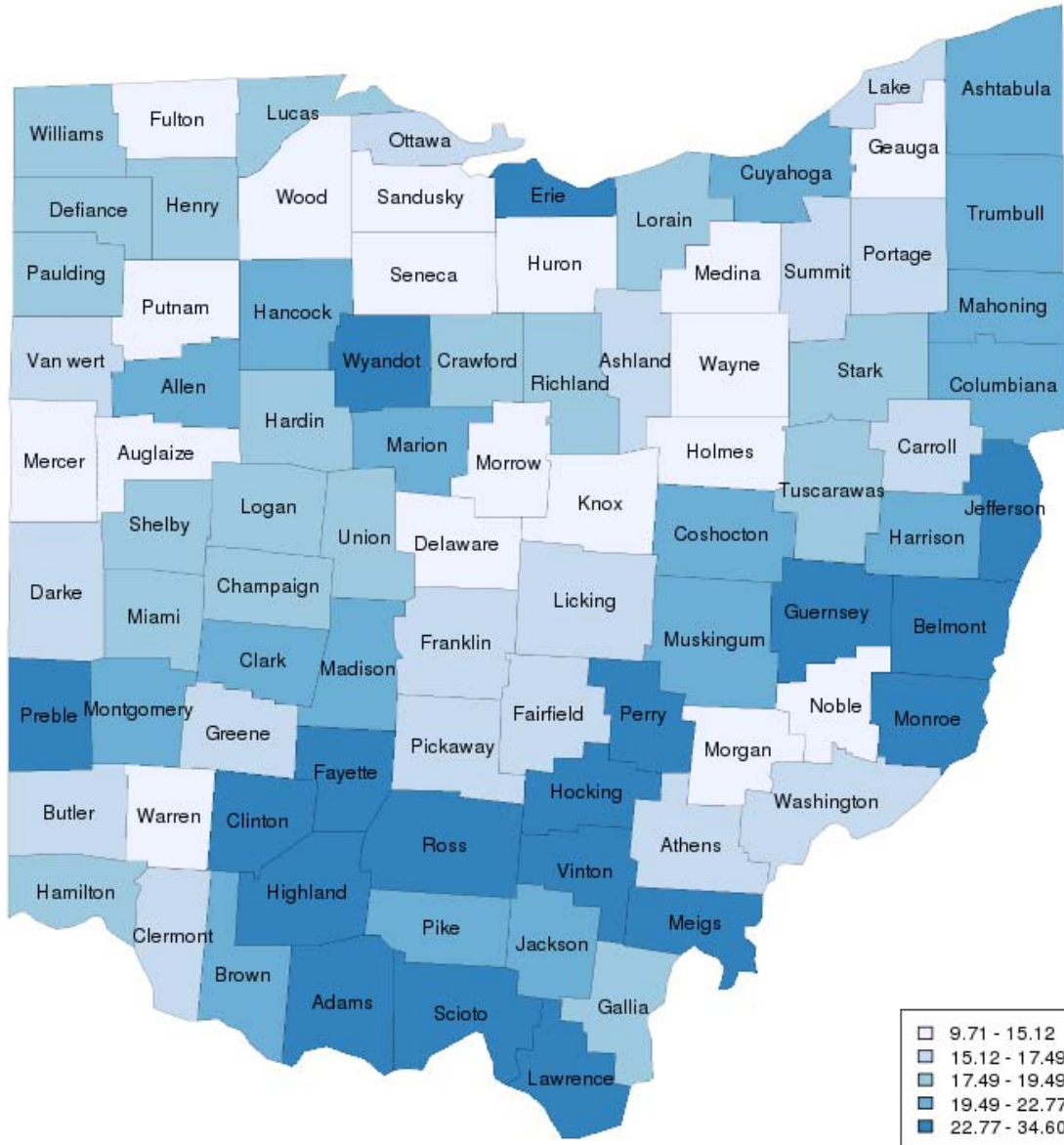
Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Rated health as excellent or very good	57%	55%	48%	52%	52%
Rated health as fair or poor	11%	13%	15%	17%	16%
Rated their mental health as not good on four or more days in the previous month	18%	22%	26%	N/A	N/A
Average days that physical health not good in past month	N/A	3.1	4.8	4.0*	3.8*
Average days that mental health not good in past month	N/A	3.8	3.8	4.3*	3.7*

*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.

- Fifteen percent (15%) of Ottawa County adults, ages 19 years and older, rated their overall health as fair/poor (Source: Ottawa County Health Assessment).
- 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: Ohio Medicaid Assessment Survey (OMAS) Adult Dashboard, 2015)

Health Behaviors: Adult Weight Status

Key Findings

More than three-fourths (77%) of Ottawa County adults were overweight (36%) or obese (41%) based on Body Mass Index (BMI). Fifty four percent (54%) of adults engaged in some type of physical activity or exercise for at least 30 minutes three or more days per week.

Adult Weight Status

- In 2017, the health assessment indicated that more than three-fourths (77%) of Ottawa County adults were either overweight (36%) or obese (41%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.
- More than half (53%) of adults were trying to lose weight, 29% were trying to maintain their current weight or keep from gaining weight, and 1% were trying to gain weight.
- Ottawa County adults did the following to lose weight or keep from gaining weight: ate less food, fewer calories, or foods low in fat (57%); drank more water (54%); exercised (43%); ate a low-carb diet (17%); smoked cigarettes (5%); used a weight loss program (2%); bariatric surgery (1%); took laxatives (1%); took prescribed medications (1%); went without eating 24 or more hours (1%); participated in a prescribed dietary or fitness program (1%); took diet pills, powders or liquids without a doctor's advice (1%); and health coaching (1%).

Physical Activity

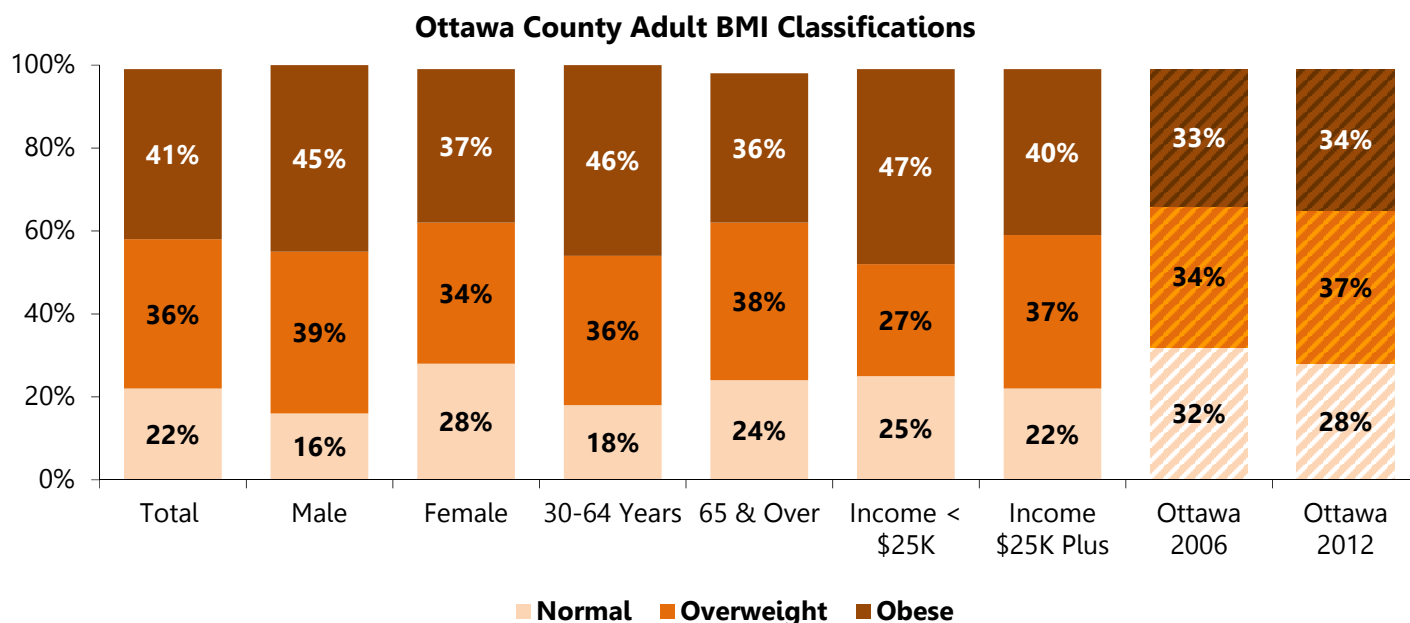
- In Ottawa County, 54% of adults engaged in some type of physical activity or exercise for at least 30 minutes on 3 or more days per week, and 28% of adults exercised 5 or more days per week. More than one-fourth (28%) of adults did not participate in any physical activity in the past week, including 5% who were unable to exercise.
- The CDC recommends that adults participate in moderate exercise for at least two hours and 30 minutes every week or vigorous exercise for at least one hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, the CDC also recommends muscle-strengthening activities that work all major muscle groups on two or more days per week (*Source: CDC, Physical Activity for Everyone*).
- Reasons for not exercising included the following: time (29%), laziness (20%), pain or discomfort (17%), too tired (17%), weather (17%), do not like to exercise (13%), could not afford a gym membership (9%), poorly maintained/no sidewalks (7%), no exercise partner (5%), no child care (5%), no walking/biking trails or parks (4%), no gym available (4%), lack of opportunities for those with physical impairments or challenges (3%), did not know what activities to do (2%), doctor advised them not to exercise (2%), neighborhood safety (1%), and transportation (1%).
- Ottawa County adults spent an average of 3.0 hours watching TV, 2.3 hours on the computer (during work), 1.3 hours on their cell phone, and 1.1 hours on the computer (outside of work) on an average day of the week.

Nutrition

- In 2017, 6% of adults ate 5 or more servings of fruits and vegetables per day, 22% ate 3-4 servings, and 64% ate 1-2 servings. Seven percent (7%) of adults ate 0 servings of fruits and vegetables per day. The American Cancer Society recommends that adults eat at least 2 ½ cups of fruits and vegetables per day to reduce the risk of cancer and to maintain good health. The 2009 BRFSS reported that only 21% of Ohio adults and 23% nationwide were eating the recommended number of servings of fruits and vegetables.

- Ottawa County adults reported the following reasons they chose the types of food they ate: taste/enjoyment (66%), cost (45%), ease of preparation/time (44%), healthiness of food (44%), food they were used to (40%), what their family prefers (30%), nutritional content (28%), availability (27%), calorie content (25%), artificial sweetener content (9%), if it is organic (9%), if it is genetically modified (8%), health care provider's advice (7%), if it is gluten free (7%), if it is lactose free (3%), other food sensitivities (3%), and other reasons (4%).
- In a typical week, adults ate out in a restaurant or brought home take-out food at the following frequencies: 1-2 meals (55%), 3-4 meals (21%), and 5 or more meals (5%). Nineteen percent (19%) of adults did not eat out in a restaurant or bring home take-out food in a typical week.
- Ottawa County adults purchased their fruit and vegetables from the following places: large grocery store (70%), local grocery store (67%), farmer's market (39%), grow their own/garden (28%), Dollar General/Store (3%), food pantry (2%), group purchasing-community supported agriculture (2%), community garden (1%), mail order food services (<1%), corner/convenience store (<1%), and other places (1%).

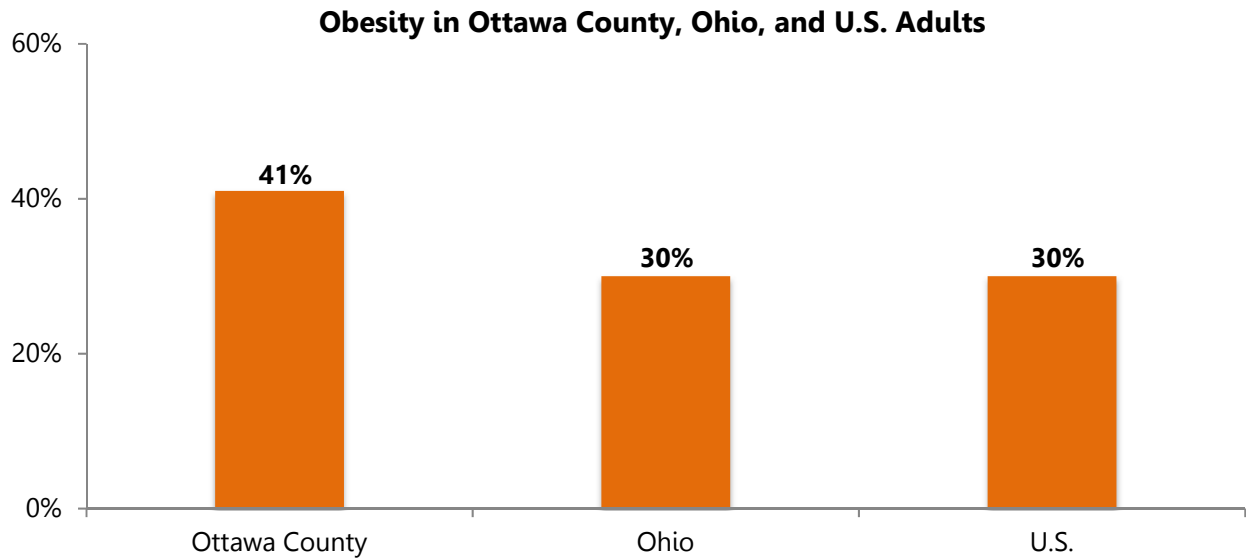
The following graph shows the percentage of Ottawa County adults who were overweight or obese by Body Mass Index (BMI). Examples of how to interpret the information include: 22% of all Ottawa County adults were classified as normal weight, 36% were overweight, and 41% were obese.



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

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Overweight	34%	37%	36%	37%	36%
Obese	33%	34%	41%	30%	30%

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



(Source: 2017 Ottawa 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

BMI Measurements

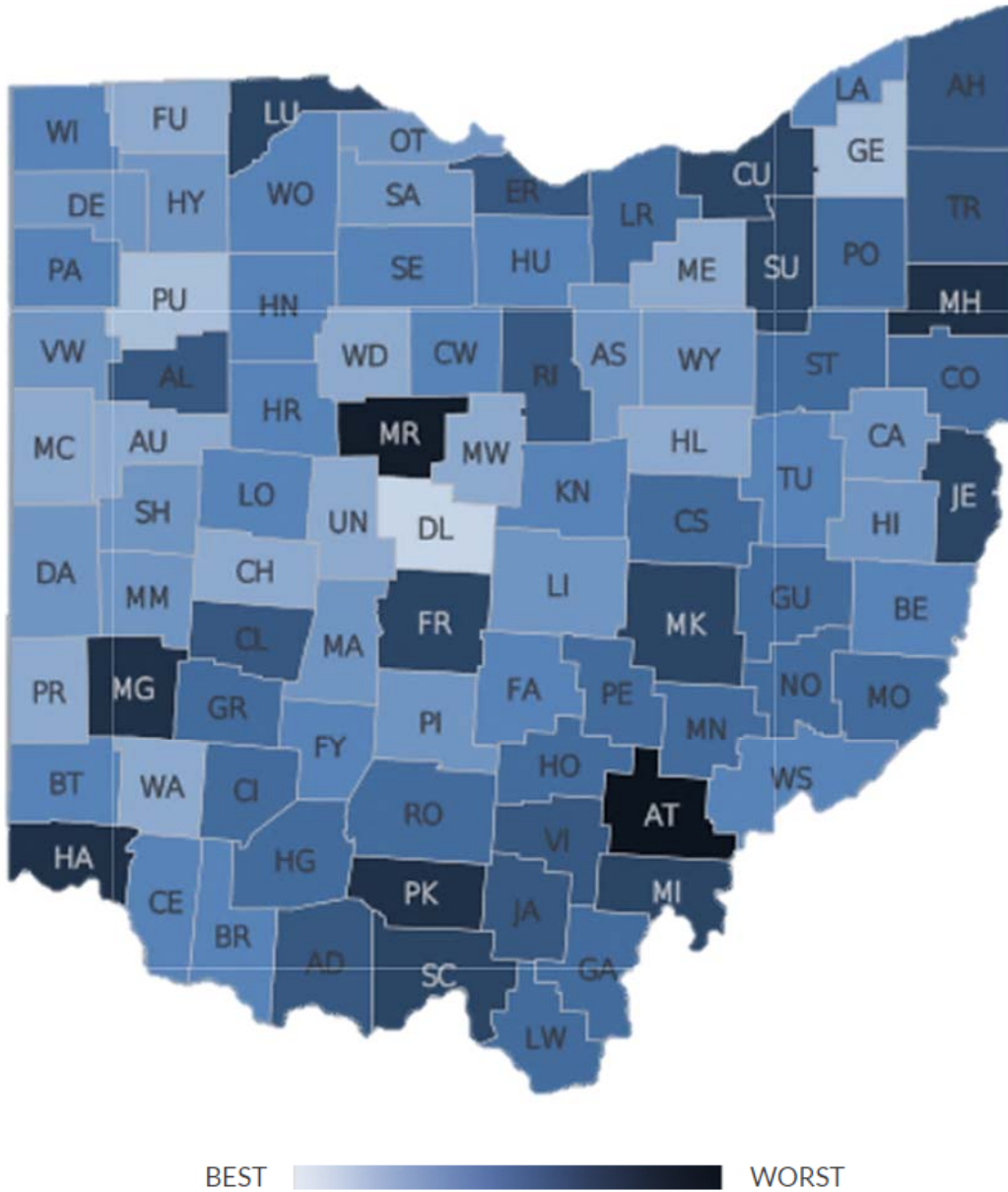
- Body Mass Index (BMI) is a person’s weight in kilograms divided by the square of height in meters.
- A high BMI can be an indicator of high body fat.
- BMI can be used to screen for weight categories that may lead to health problems but it is not diagnostic of the body fatness or health of any individual.

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

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

The Food Environment Index measures the quality of the food environment in a county on a scale from 0-10 (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 Ottawa County is 7.8.
- 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, 15% of Ottawa County adults were current smokers, and 26% were considered former smokers. Just over half (51%) of smokers reported trying to quit in the past year.

In 2017, 15% of Ottawa County adults were current smokers.

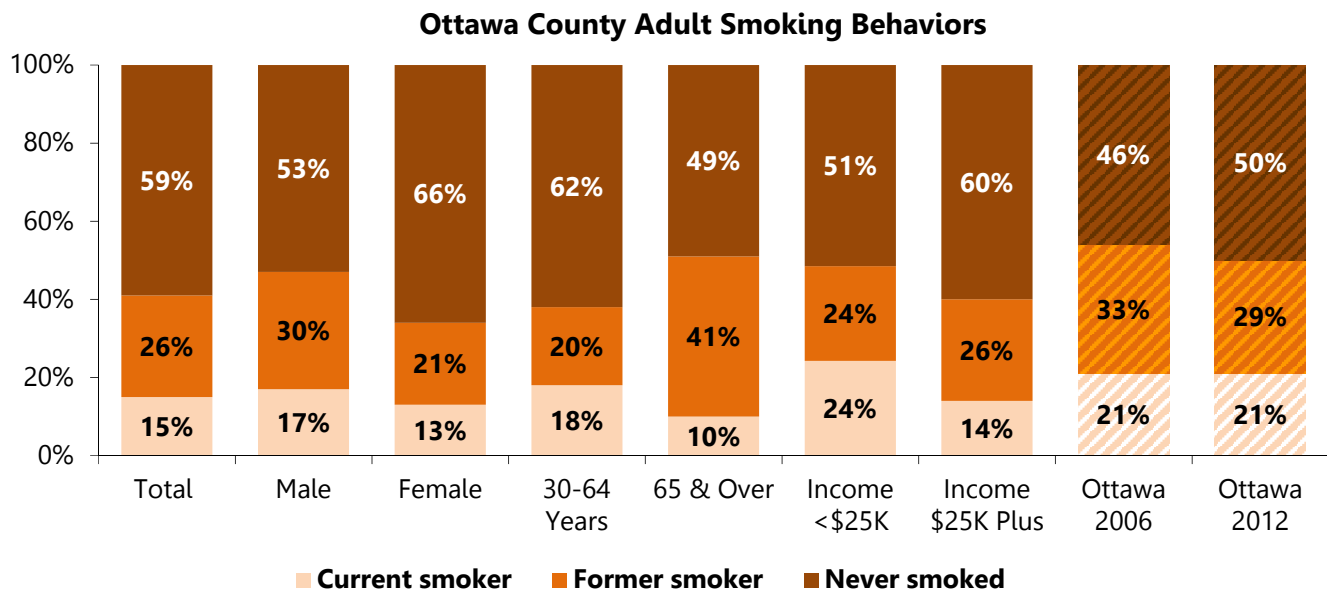
Adult Tobacco Use Behaviors

- The health assessment identified that 15% of Ottawa 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-fourth (26%) 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.
- Ottawa County adult smokers were more likely to have:
 - Been divorced (39%)
 - Rated their overall health as fair or poor (28%)
 - Incomes less than \$25,000 (24%)
- Ottawa County adults used the following tobacco products in the past year: cigarettes (21%), cigars (8%), chewing tobacco (6%), e-cigarettes (4%), Black and Milds (2%), Swishers (1%), little cigars (1%), cigarillos (1%), hookah (1%), and pouch (1%).
- Just over half (51%) of current smokers responded that they had stopped smoking for at least one day in the past year because they were trying to quit smoking.
- Ottawa County adults were exposed to second-hand smoke in the following places: friend's home (9%), home (7%), other relative's home (7%), car (6%), park/ball field (5%), and fairgrounds (4%). Seventy-four percent (74%) of adults indicated they were not exposed to second-hand smoke.

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Current smoker	21%	21%	15%	22%	18%
Former smoker	33%	29%	26%	24%	25%
Tried to quit smoking	70%	36%	51%	N/A	N/A

N/A – Not Available

The following graph shows the percentage of Ottawa County adults who used tobacco. Examples of how to interpret the information include: 15% of adults were current smokers, 26% of adults were former smokers, and 59% 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.

(Source: CDC, Effects of Cigarette Smoking, Smoking and Other Health Risks, May 15, 2017)

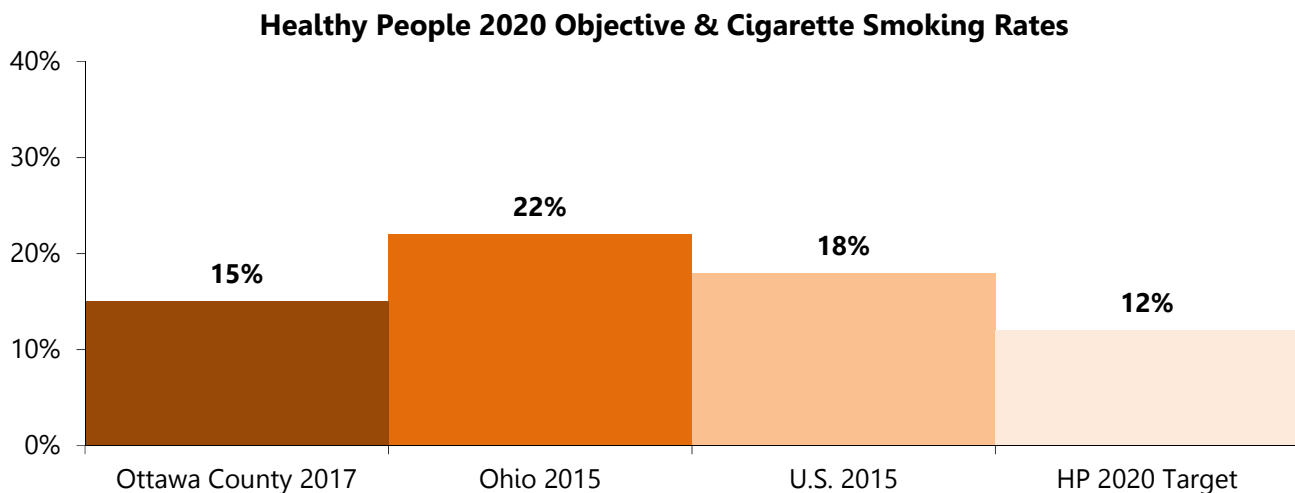
Electronic Cigarettes Use Among Adults: United States

- 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 e-cigarettes 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 e-cigarette 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 Ottawa 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 Ottawa County adult cigarette smoking rate was lower than the Ohio and U.S. rates, but slightly higher than the Healthy People 2020 target objective.

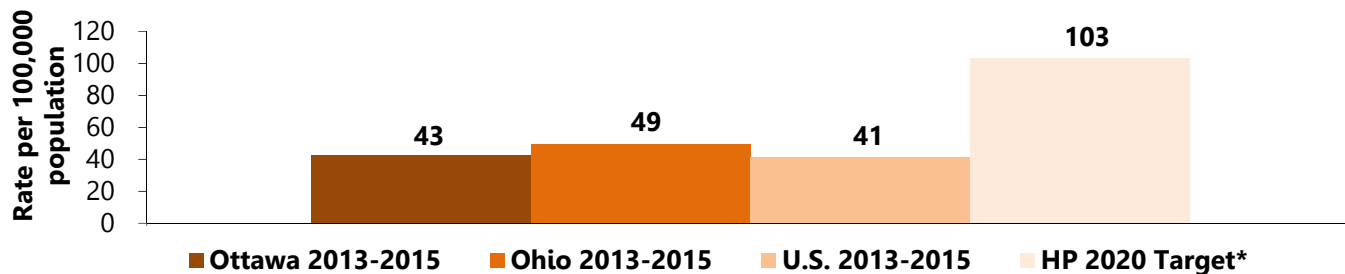


(Source: 2017 Ottawa County Health Assessment, 2014 BRFSS and Healthy People 2020)

The following graphs show Ottawa 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. Ottawa County age-adjusted mortality rates for lung and bronchus cancer by gender are shown below as well. These graphs show:

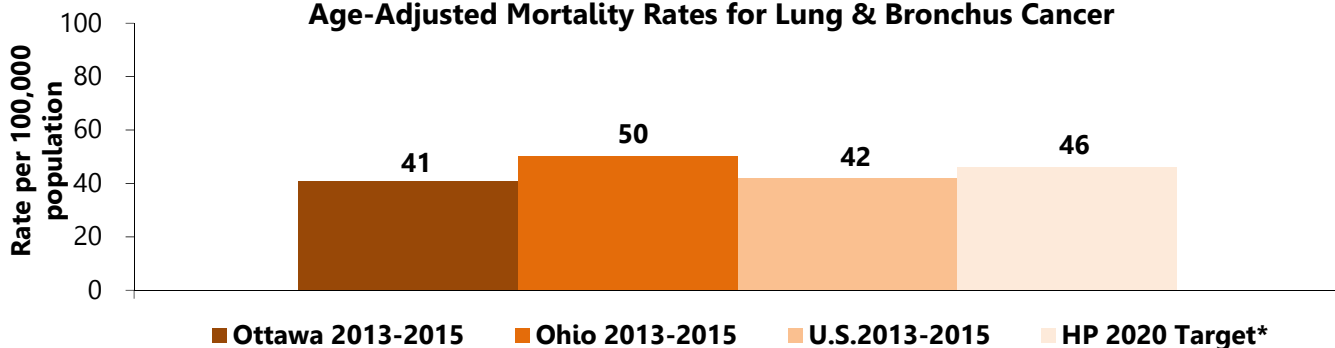
- From 2013-2015, Ottawa County’s age-adjusted mortality rate for Chronic Lower Respiratory Disease was higher than the U.S. rate but lower than the Ohio rate and the Healthy People 2020 target objective.
- Ottawa County’s age-adjusted mortality rate for lung and bronchus cancer was lower than the Ohio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

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



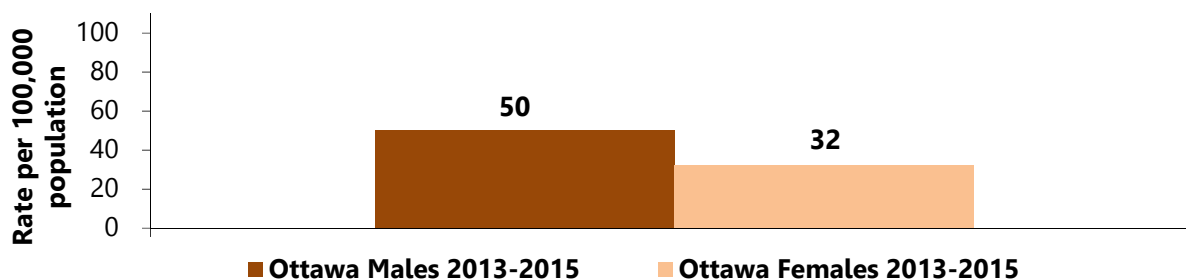
(Source: CDC Wonder and Healthy People 2020)
 * Healthy People 2020’s target rate and the U.S. rate is for adults aged 45 years and older.

Age-Adjusted Mortality Rates for Lung & Bronchus Cancer



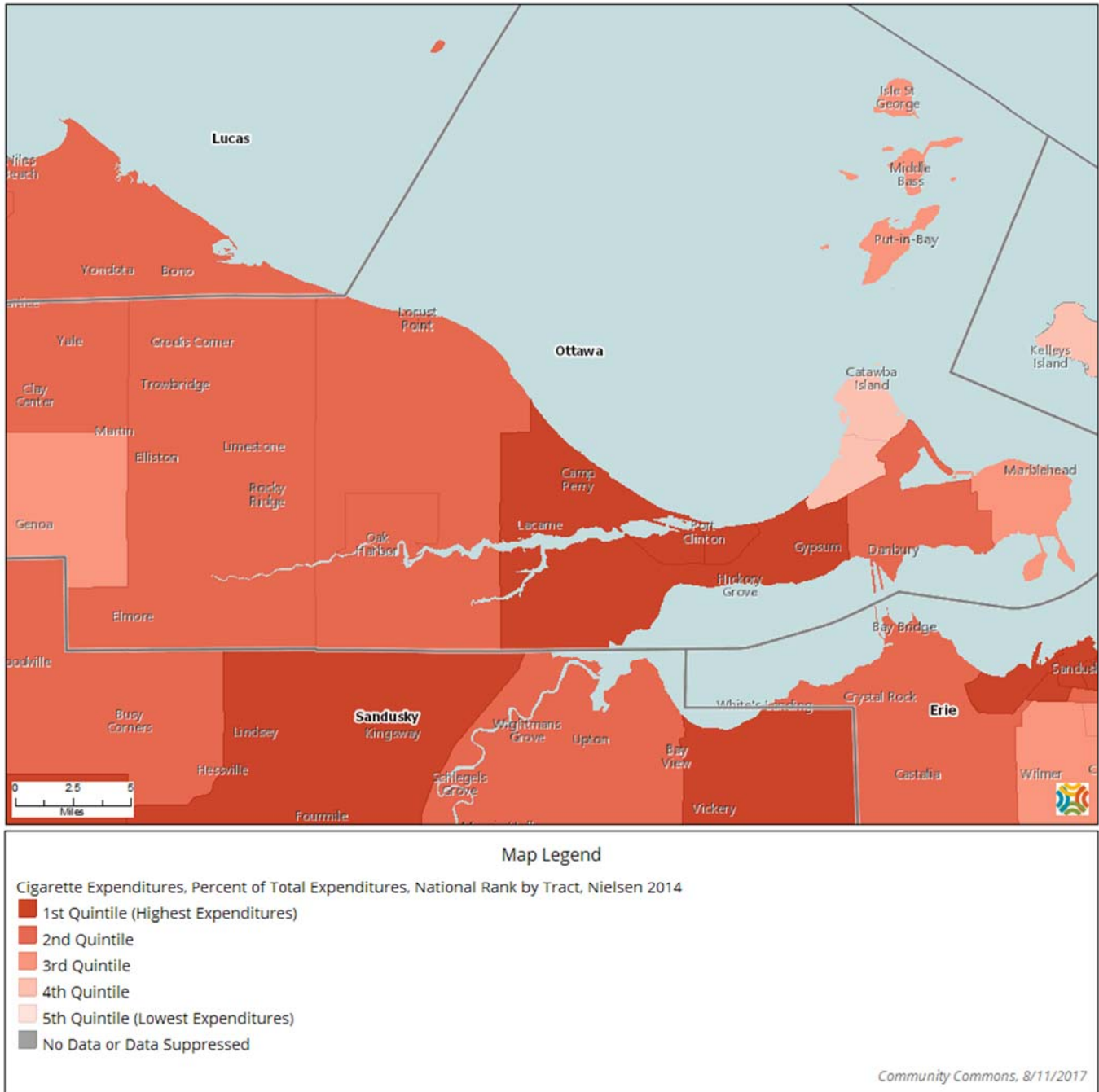
*Healthy People 2020 Target data is for lung cancer only
 (Sources: Healthy People 2020, National Cancer Institute, CDC Wonder)

Age-Adjusted Mortality Rates by Gender for Lung & Bronchus Cancer



(Source: CDC Wonder)

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



(Source: Community Commons, updated 8/11/2017)

Description of indicator: Tobacco expenditures included in this category are cigarettes only; cigars and other tobacco products are not included. Census tract level average and aggregated total household expenditures and category expenditures were acquired from the 2011 Nielsen Consumer Buying Power (CBP) SiteReports. To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked. Quintiles were assigned to each tract based on national rank and symbolized within the map.

Health Behaviors: Adult Alcohol Use

Key Findings

In 2017, the health assessment indicated that 62% of Ottawa County adults were considered current drinkers. More than one-quarter (26%) of adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers

62% of Ottawa County adults had at least one alcoholic drink in the past month.

Adult Alcohol Consumption

- In 2017, 62% of Ottawa County adults had at least one alcoholic drink in the past month. The 2015 BRFSS reported current drinker prevalence rates of 53% for Ohio and 54% for the U.S.
- Of those who drank, Ottawa County adults drank 2.8 drinks on average, increasing to 3.0 drinks for those with incomes more than \$25,000.

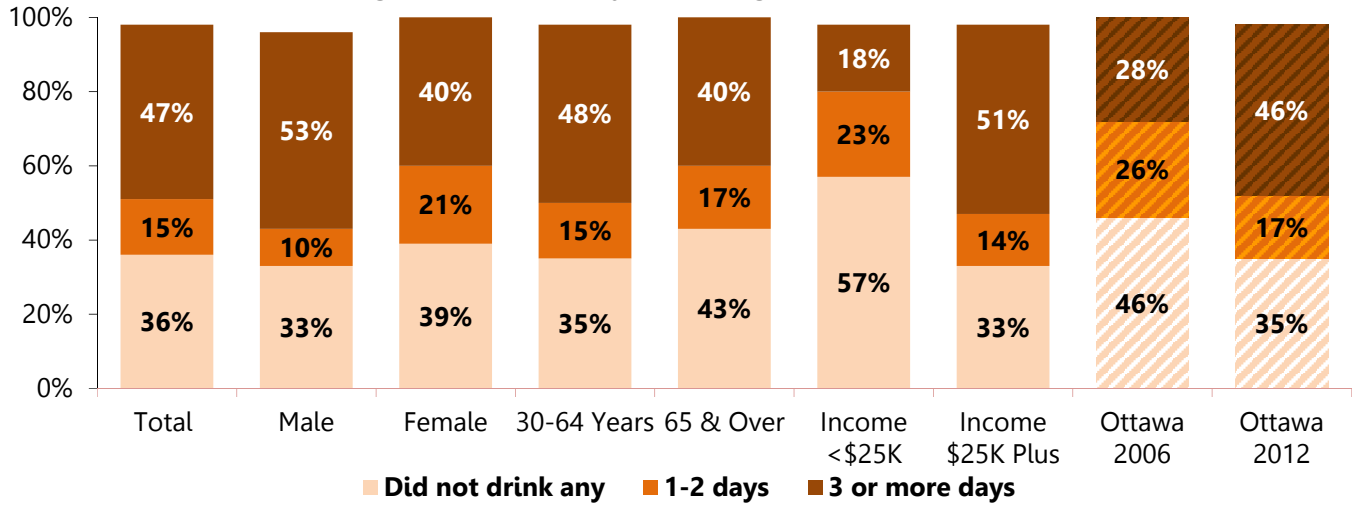
26% of Ottawa County adults were considered binge drinkers.

- More than one-quarter (26%) of Ottawa County adults reported they had five or more alcoholic drinks (for males) or four or more drinks (for females) on an occasion in the last month and would be considered binge drinkers (the 2015 BRFSS reported binge drinking rates of 18% for Ohio and 16% for the U.S.). Of those that drank in the past month, 41% were considered binge drinkers.
- Five percent (5%) of adults reported driving after having perhaps too much to drink.
- In the past month, Ottawa County adults reported driving the following motor vehicles after having one or more drinks: motor vehicle (38%), water craft (4%), ATV (2%), boat (1%), snowmobile (1%), motorcycle (1%), farm machinery (1%), and other vehicle (4%).

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Drank alcohol at least once in past month	55%	63%	62%	53%	54%
Binge drinker (drank 5 or more drinks for males and 4 or more for females on an occasion)	16%	24%	26%	18%	16%

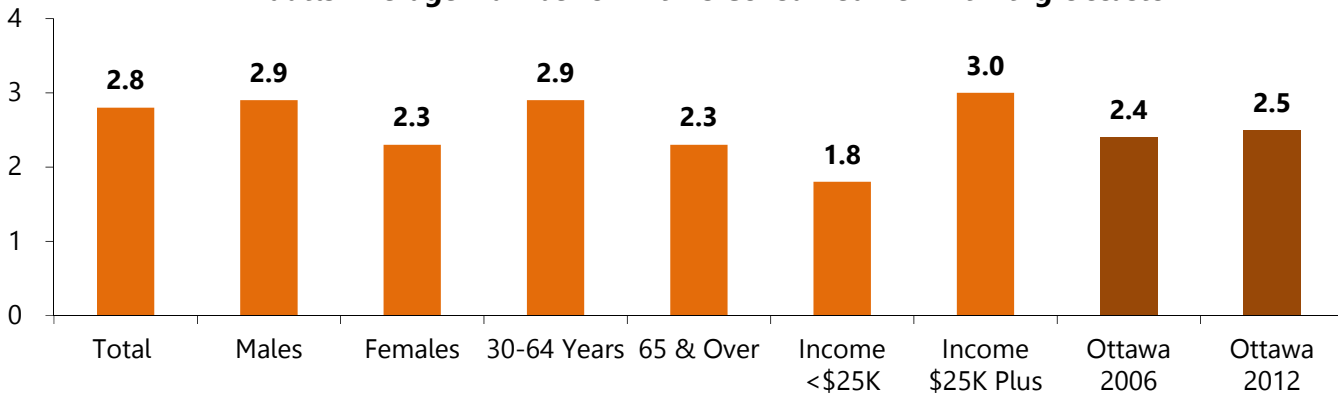
The following graphs show the percentage of Ottawa County adults consuming alcohol, the amount consumed on average, and a comparison of binge drinkers with Ohio and U.S. binge drinkers. Examples of how to interpret the information shown on the first graph include: 36% of all Ottawa County adults did not drink alcohol, 33% of Ottawa County males did not drink, and 39% of adult females did not drink.

Average Number of Days Drinking Alcohol in the Past Month

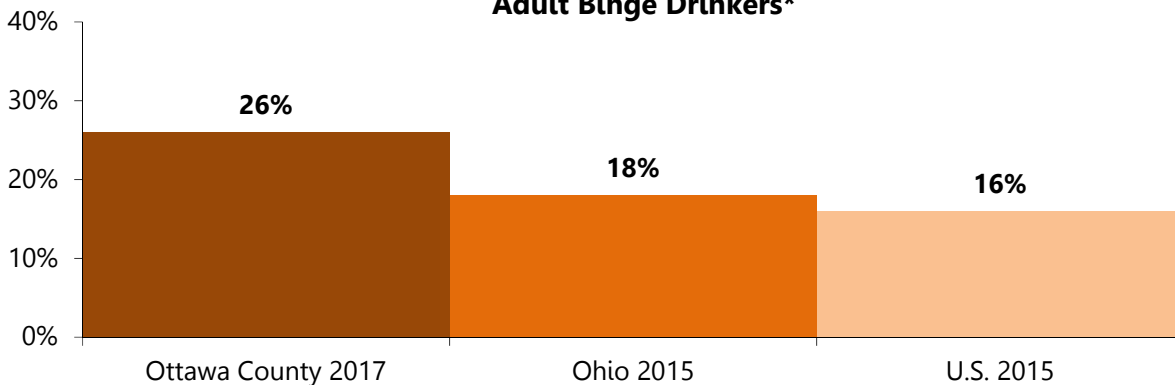


Note: Percentages may not equal 100% as some respondents answered "don't know"

Adults Average Number of Drinks Consumed Per Drinking Occasion



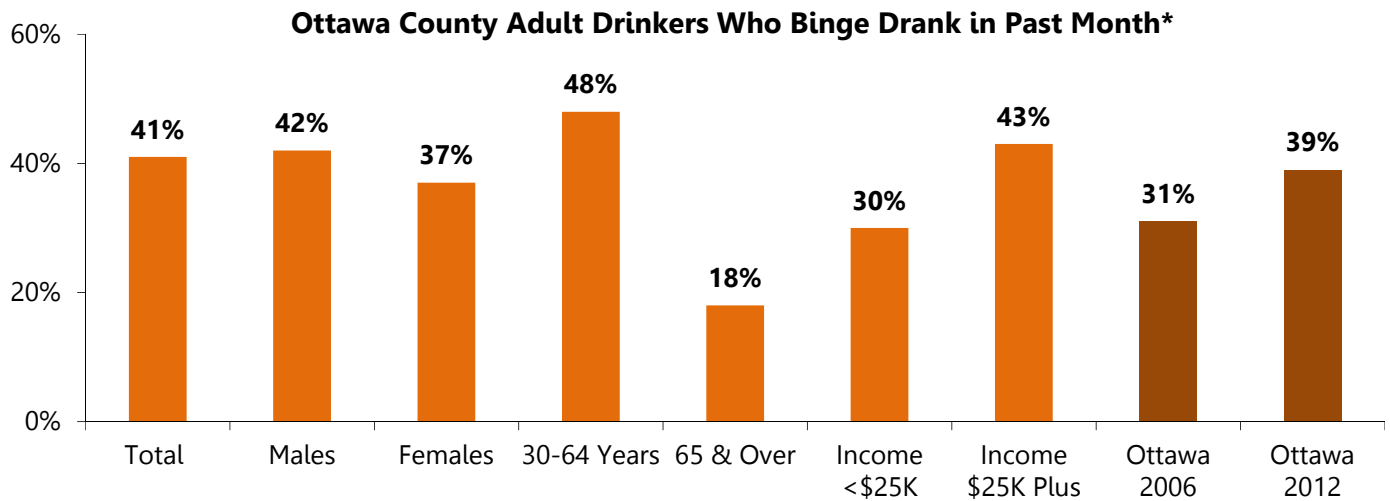
Adult Binge Drinkers*



(Source: 2015 BRFSS, 2017 Ottawa 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 graph shows the percentage of Ottawa County drinkers who binge drank in the past month.



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

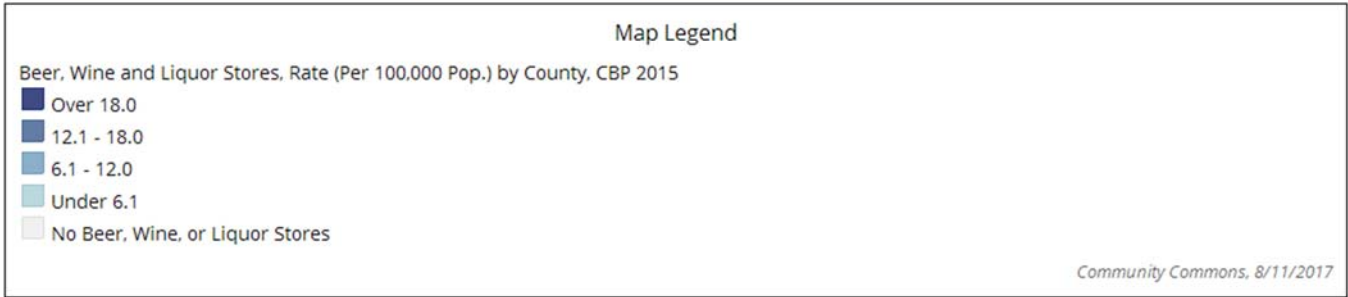
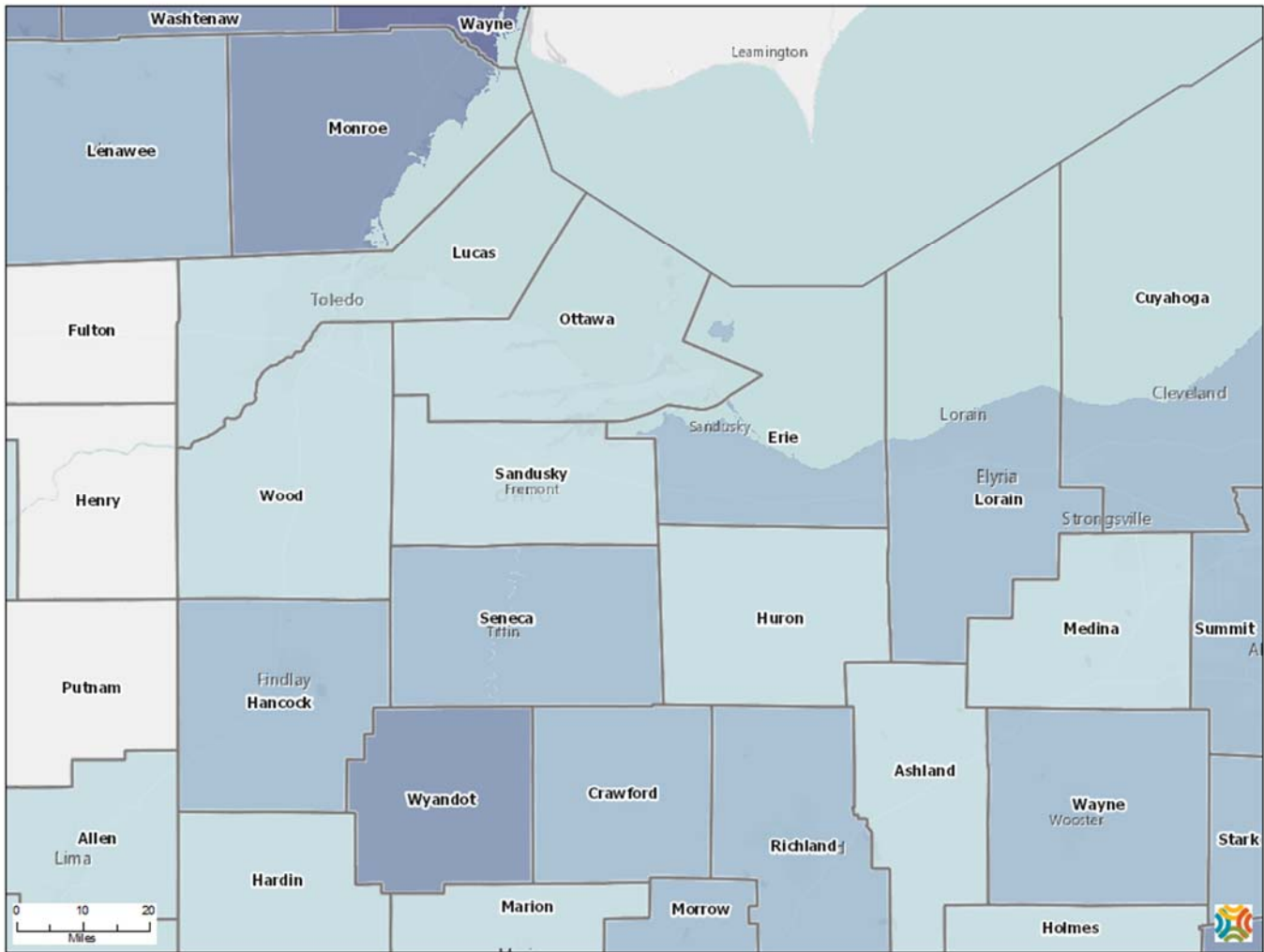
The following table shows the City of Port Clinton, Ottawa County, and Ohio motor vehicle accident statistics. The table shows:

- Five percent (5%) of the total crashes in Ottawa County in 2016 were alcohol-related, compared to 4% for Ohio.
- There were no fatal injury crashes that were alcohol-related in Ottawa County, as compared to 30% of alcohol-related fatal injury crashes in Ohio.
- Of the total number of alcohol-related crashes (46) in Ottawa County, 50% were property damage only, and there were no fatal injuries.
- 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 Port Clinton 2016	Ottawa County 2016	Ohio 2016
Total Crashes	104	902	300,016
Alcohol-Related Total Crashes	5	46	11,988
Fatal Injury Crashes	0	6	1,027
Alcohol-Related Fatal Crashes	0	0	304
Alcohol Impaired Drivers in Crashes	5	44	11,717
Injury Crashes	16	222	76,130
Alcohol-Related Injury Crashes	2	23	4,974
Property Damage Only	88	674	222,859
Alcohol-Related Property Damage Only	3	23	6,710
Deaths	0	6	1,107
Alcohol-Related Deaths	0	0	334
Total Non-Fatal Injuries	25	342	110,311
Alcohol-Related Injuries	2	27	7,033

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

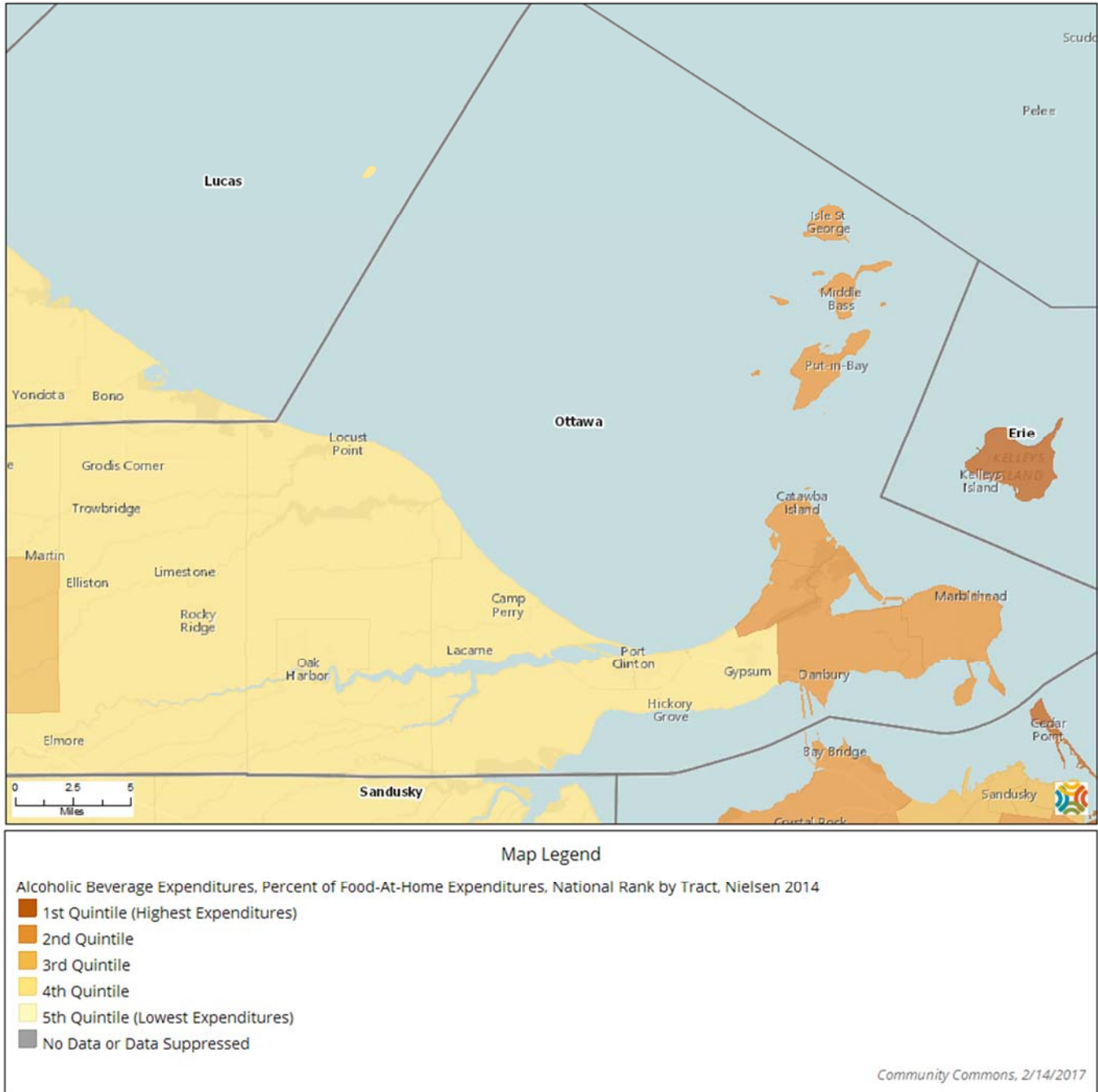
Beer, Wine and Liquor Stores, Rate (Per 100,000 Pop.) by County, (CBP) 2015



(Source: Community Commons, updated 08/11/2017)

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

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



(Source: Community Commons, updated 2/14/2017)

Description of indicator: Alcohol expenditures included in this category are any beer, wine, and liquor purchased for consumption at home. Alcohol purchased at restaurants and bars is not included. Census tract level average and aggregated total household expenditures and category expenditures were acquired from the 2011 Nielsen Consumer Buying Power (CBP) SiteReports. To generate acceptable map output in compliance with the Nielsen terms of use agreement, percent expenditures for each tract were sorted and ranked; quintiles were assigned to each tract based on national rank and symbolized within the map. Additional attributes include each tract's within-state rank and quintile.

Health Behaviors: Adult Drug Use

Key Findings

Six percent (6%) of Ottawa County adults had used marijuana during the past 6 months. Five percent (5%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months.

Adult Drug Use

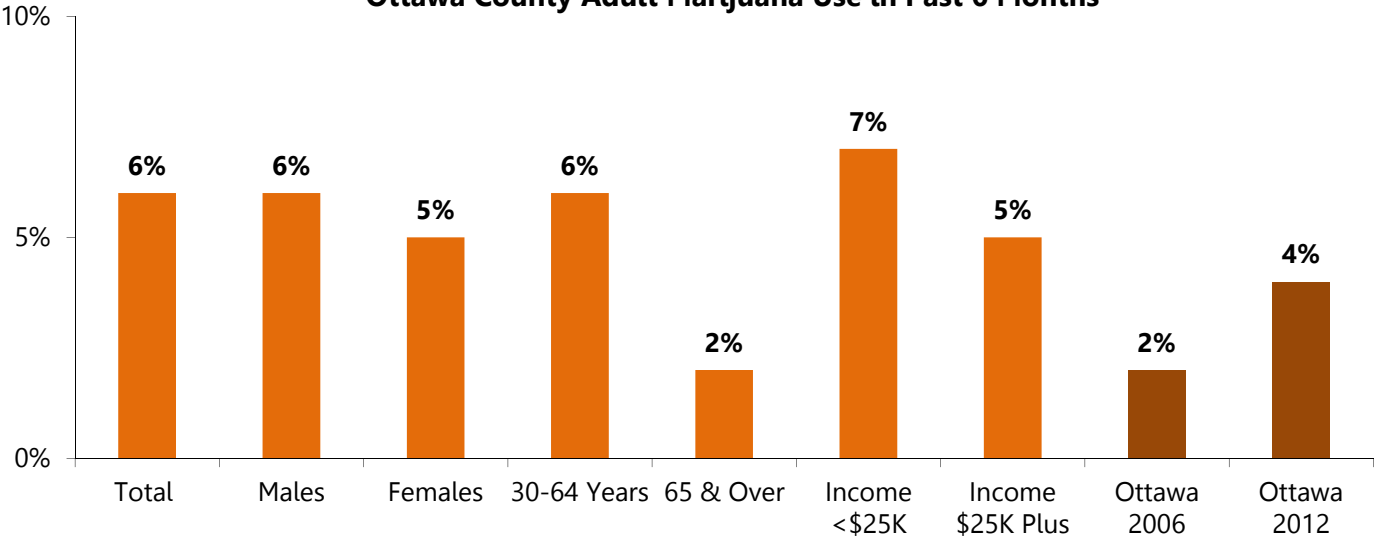
- Six percent (6%) of Ottawa County adults had used marijuana in the past 6 months, increasing to 7% of those with incomes less than \$25,000.
- Two percent (2%) of Ottawa County adults reported using other recreational drugs in the past six months such as cocaine, synthetic marijuana/K2, heroin, LSD, inhalants, Ecstasy, bath salts, and methamphetamines.
- When asked about their frequency of marijuana and other recreational drug use in the past six months, 29% of Ottawa County adults who used drugs did so almost every day, and 26% did so less than once a month.
- Five percent (5%) of adults had used medication not prescribed for them or they took more than prescribed to feel good or high and/or more active or alert during the past 6 months, increasing to 12% of those with incomes less than \$25,000.
- When asked about their frequency of medication misuse in the past six months, 48% of Ottawa County adults who used these drugs did so almost every day, and 18% did so less than once a month.
- Ottawa County adults indicated they did the following with their unused prescription medication: took as prescribed (42%), took it to the medication collection program (32%), threw it in the trash (22%), flushed it down the toilet (12%), kept it (12%), gave it away (1%), sold it (<1%), and some other destruction method (4%).
- One percent (1%) of Ottawa County adults had used a program or service to help with alcohol or drug problems for either themselves or a loved one. Reasons for not using such a program included the following: did not use drugs (86%), not needed (18%), had not thought of it (2%), could not get to the office or clinic (1%), stigma of seeking drug services (1%), could not afford to go (<1%), did not know how to find a program (<1%), no program available (<1%), fear (<1%), transportation (<1%), and other reasons (1%).
- As a result of drug use, adults indicated they or a family member: sought medical attention (3%), overdosed (2%), used Naloxone (2%), and had become deceased (1%).

Adult Comparisons	Ottawa County 2008	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Adults who used marijuana in the past 6 months	2%	4%	6%	N/A	N/A
Adults who misused prescription drugs in the past 6 months	8%	9%	5%	N/A	N/A

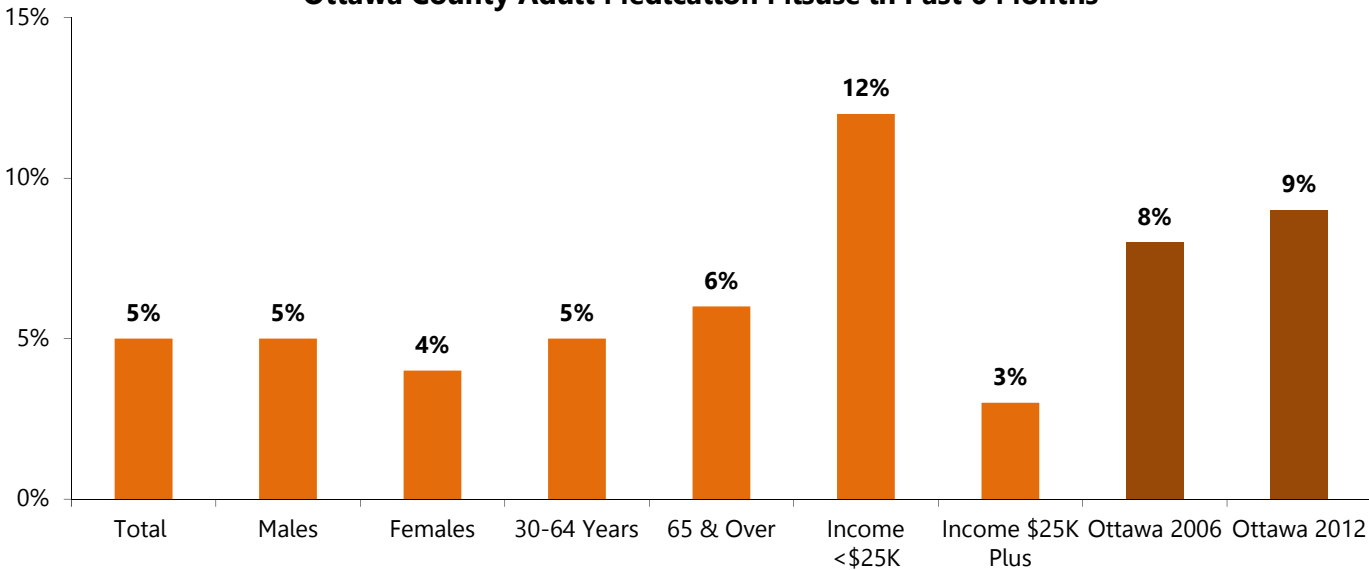
N/A – Not available

The following graphs indicate adult marijuana use and medication misuse in the past six months. Examples of how to interpret the information include: 6% of all Ottawa County adults used marijuana in the past six months; 7% of adults with incomes less than \$25,000 were current users.

Ottawa County Adult Marijuana Use in Past 6 Months

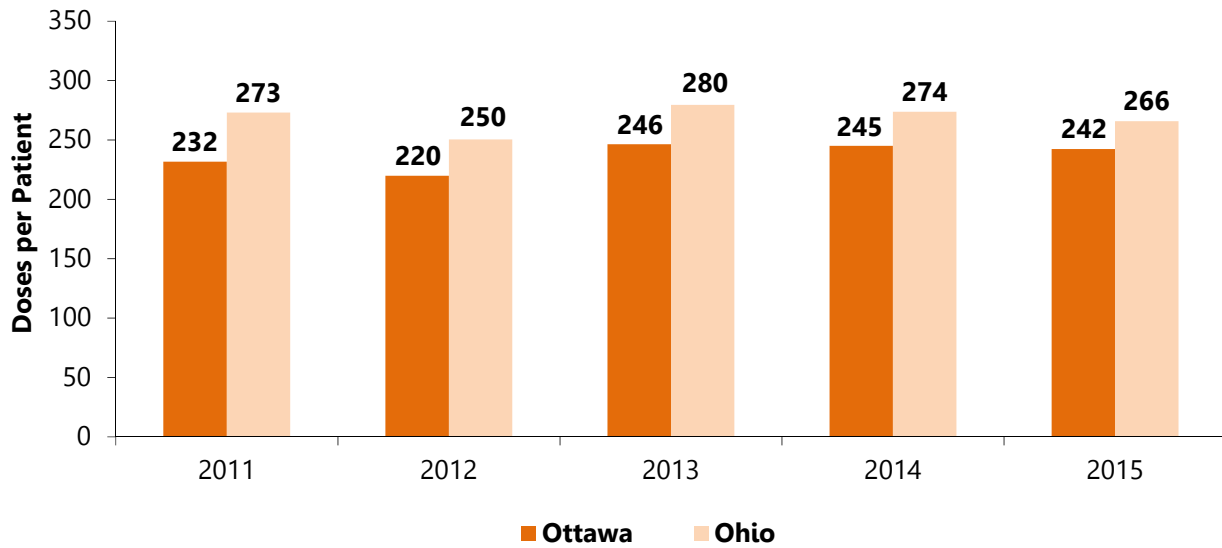


Ottawa County Adult Medication Misuse in Past 6 Months

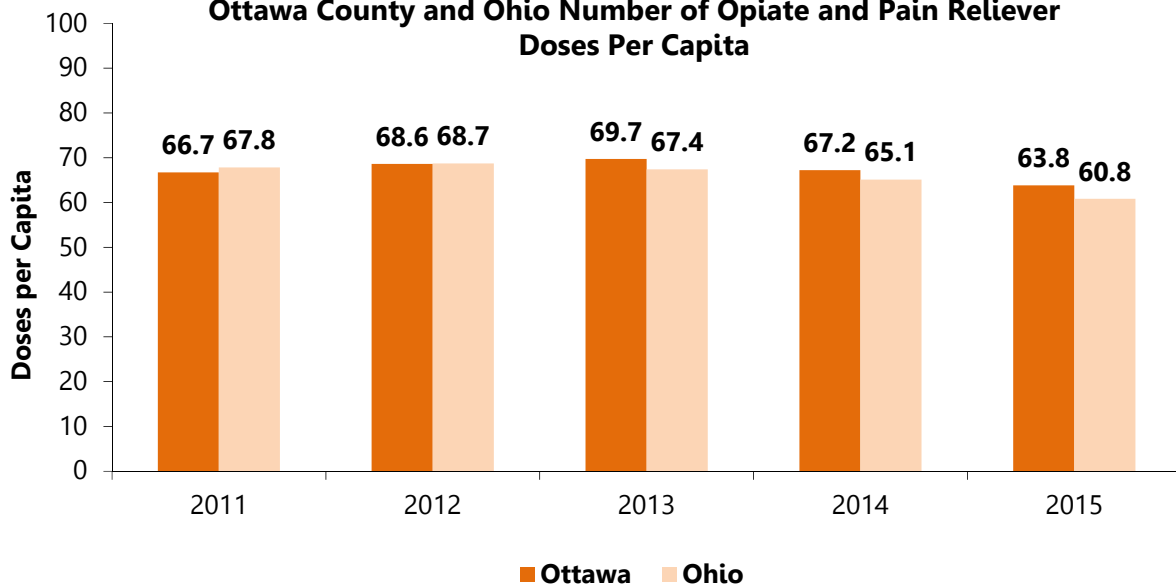


The following graphs show Ottawa County and Ohio opiate and pain reliever doses per patient and doses per capita.

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

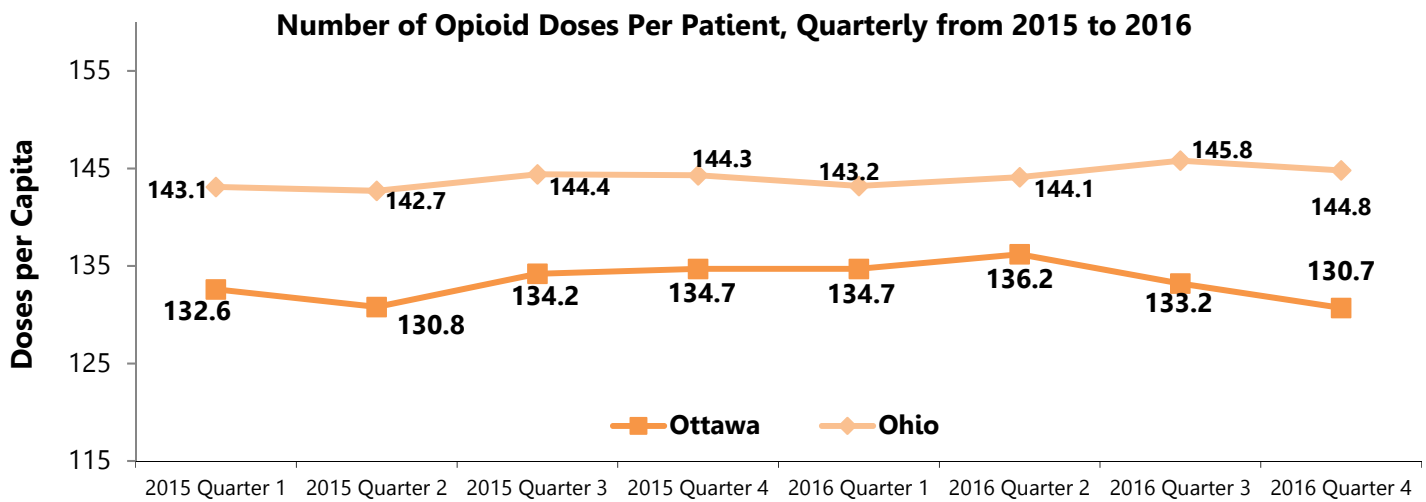
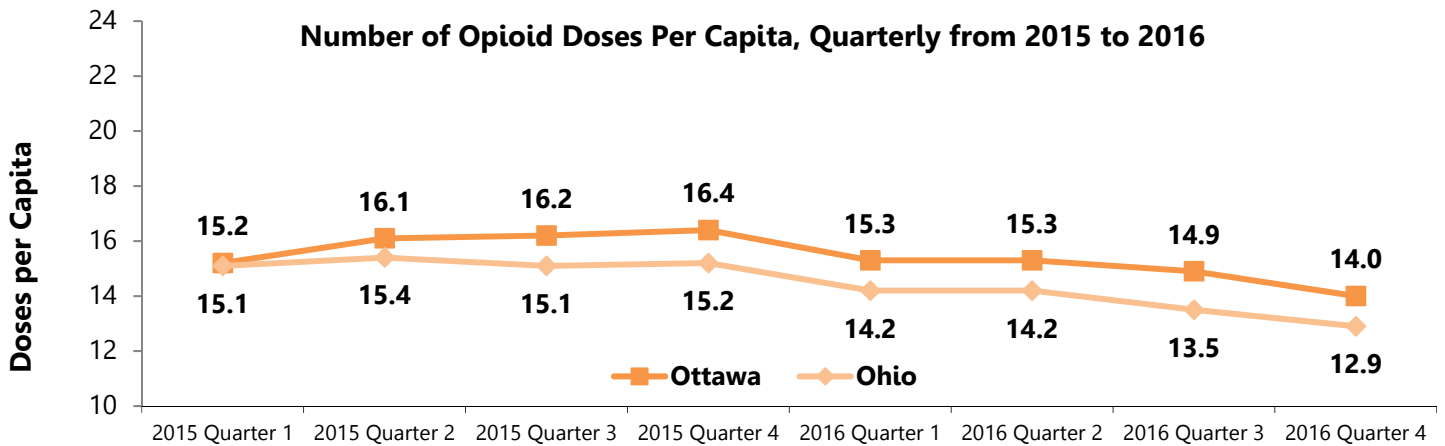


Ottawa County and Ohio Number of Opiate and Pain Reliever Doses Per Capita

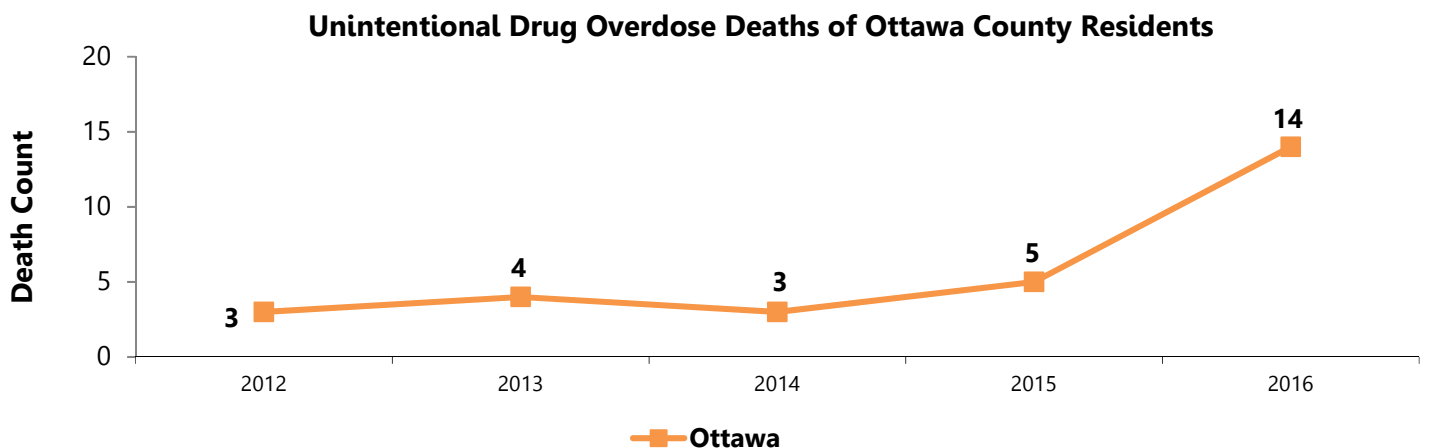


(Source: Ohio Automated Rx Reporting System, Quarterly County Data)

The following graphs show Ottawa County and Ohio quarterly opiate and pain reliever doses per patient and per capita, and annual unintentional drug overdose deaths.



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



(Source: ODH, Ohio Resident Mortality Data, 2012-2016)

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 2016)

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, 66% of Ottawa County adults had sexual intercourse. Four percent (4%) of adults had more than one partner. Prevalence estimates suggest that young people aged 15-24 years acquire half of all new STDs and that 1 in 4 sexually active adolescent females have an STD, such as chlamydia or human papillomavirus (HPV) (Source: CDC, STDs in Adolescents and Young Adults, 2016 STD Surveillance).

Adult Sexual Behavior

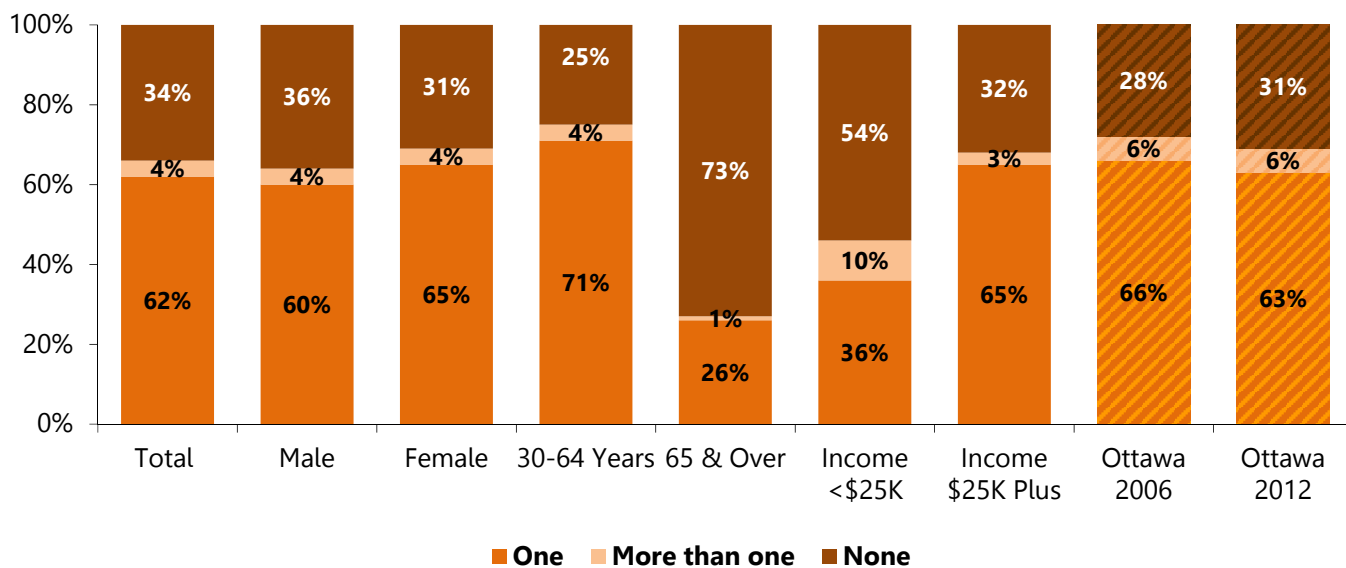
- Four percent (4%) of adults reported they had intercourse with more than one partner in the past year, increasing to 10% of those with incomes less than \$25,000.
- Ottawa County adults used the following methods of birth control: vasectomy (22%), they or their partner were too old (20%), hysterectomy (14%), tubes tied (14%), abstinence (11%), birth control pill (10%), ovaries or testicles removed (6%), condoms (6%), withdrawal (6%), IUD (3%), infertility (3%), rhythm method (1%), and shots (<1%).
- One-in-ten (10%) Ottawa County adults were not using any method of birth control.
- Ottawa County adults had been diagnosed with the following sexually transmitted diseases (STDs) in the past 5 years: human papilloma virus (HPV) (2%), genital herpes (2%), gonorrhea (<1%), hepatitis C (<1%), chlamydia (<1%), and other STDs (<1%).
- The following situations applied to Ottawa County adults in the past year: had anal sex without a condom (2%), tested for an STD (2%), had sex with someone they did not know (2%), thought they may have an STD (1%), used intravenous drugs (1%), treated for an STD (1%), had sexual activity with someone of the same gender (1%), gave or received money or drugs in exchange for sex (<1%), tested positive for hepatitis C (<1%), and knew someone involved in sex trafficking (<1%).
- Almost one-fifth (18%) of adults had been tested for HIV.

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Had more than one sexual partner in past year	5%	6%	4%	N/A	N/A

N/A – Not available

The following graph shows the sexual activity of Ottawa County adults. Examples of how to interpret the information include: 62% of all Ottawa County adults had one sexual partner in the last 12 months and 4% had more than one; and 60% of males had one partner in the past year.

Number of Sexual Partners in the Past Year



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

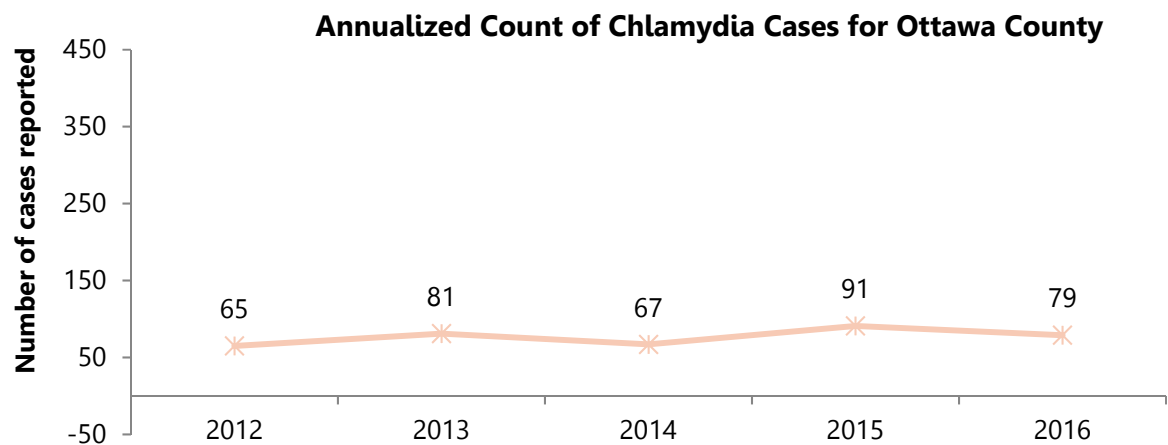
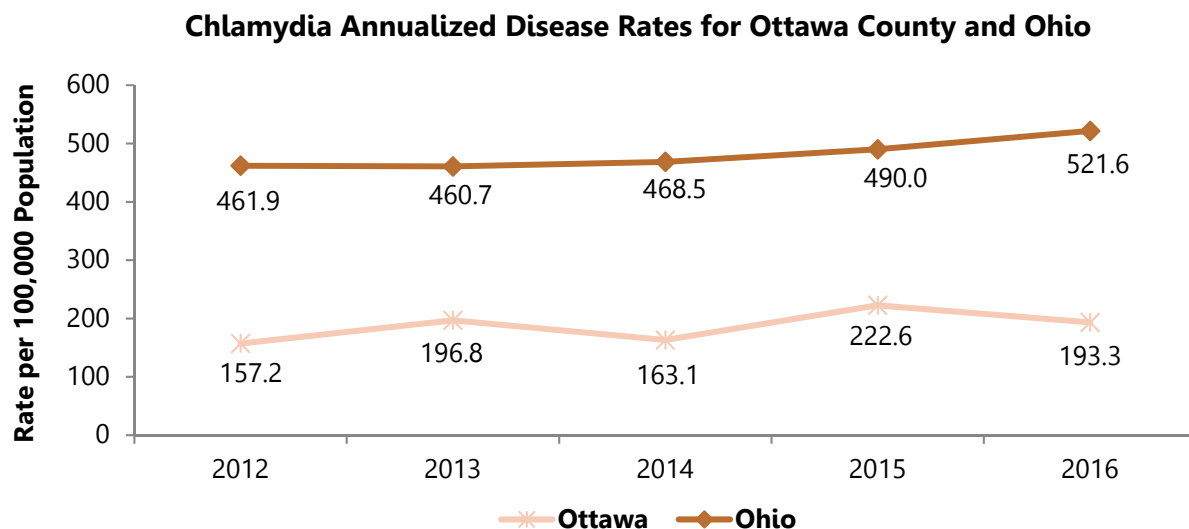
HIV in the United States

- More than 1.1 million people in the United States are living with HIV infection, and almost 1 in 87 (15%) are unaware of their infection.
- By race, African Americans face the most severe burden of HIV.
- The estimated incidence of HIV has remained stable overall in recent years, at about 50,000 new HIV infections per year.
- In 2015, 39,513 people were diagnosed with HIV infection in the United States. The number of new HIV diagnoses fell 19% from 2005 to 2014. In that same year, an estimated 18,303 people were diagnosed with AIDS.
- Since the epidemic began, an estimated 1,216,917 people in the United States had been diagnosed with AIDS
- An estimated 12,333 people with an AIDS diagnosis died in 2013 and approximately 658,507 people in the United States with an AIDS diagnosis had died since the epidemic.

Source: CDC, HIV in the United States: At a Glance, 6/9/2017

The following graphs show Ottawa County chlamydia disease rates per 100,000 population. The graphs show:

- Ottawa County chlamydia rates fluctuated from 2012-2016.

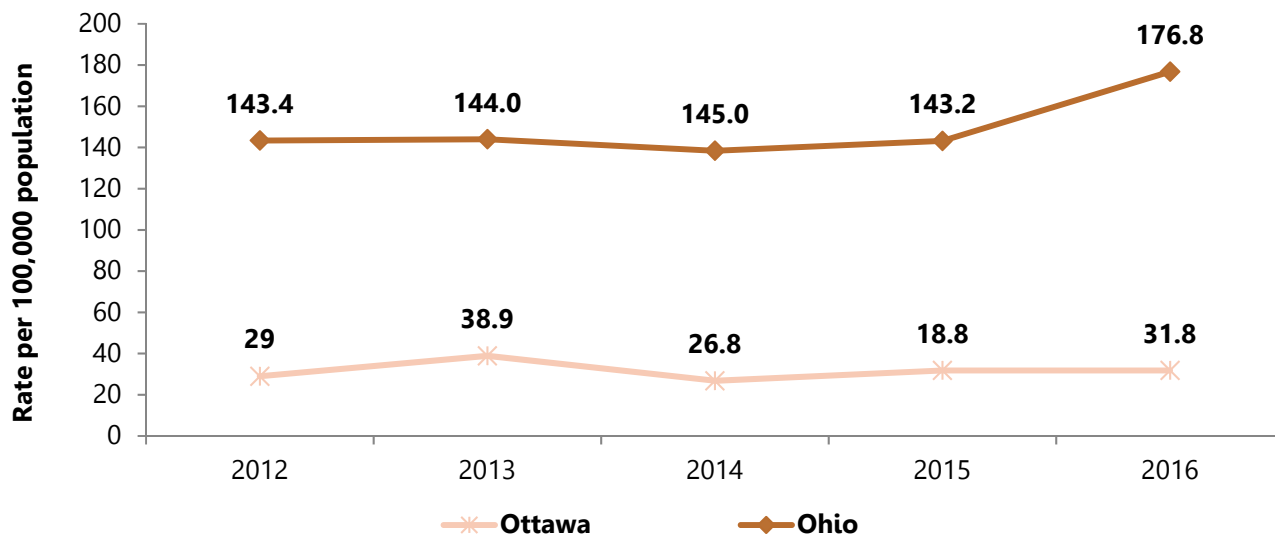


(Source for graphs: ODH, STD Surveillance, data reported through 05/07/2017)

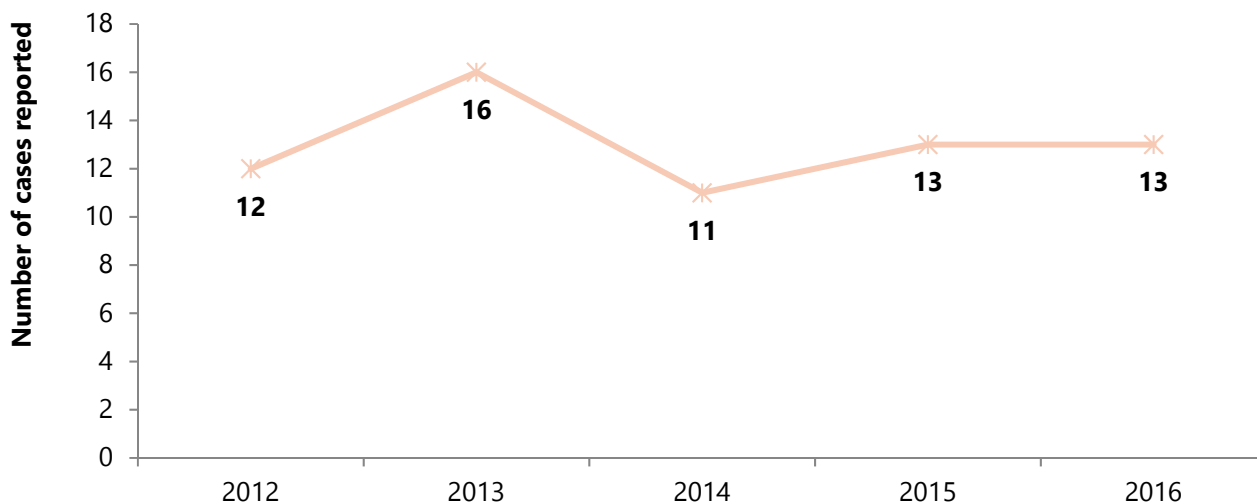
The following graphs show Ottawa County gonorrhea disease rates per 100,000 population. The graphs show:

- The Ottawa County gonorrhea rate fluctuated from 2012-2016.
- The Ohio gonorrhea rate stayed about the same from 2012-2015, 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 Ottawa County and Ohio



Annualized Count of Gonorrhea Cases for Ottawa County

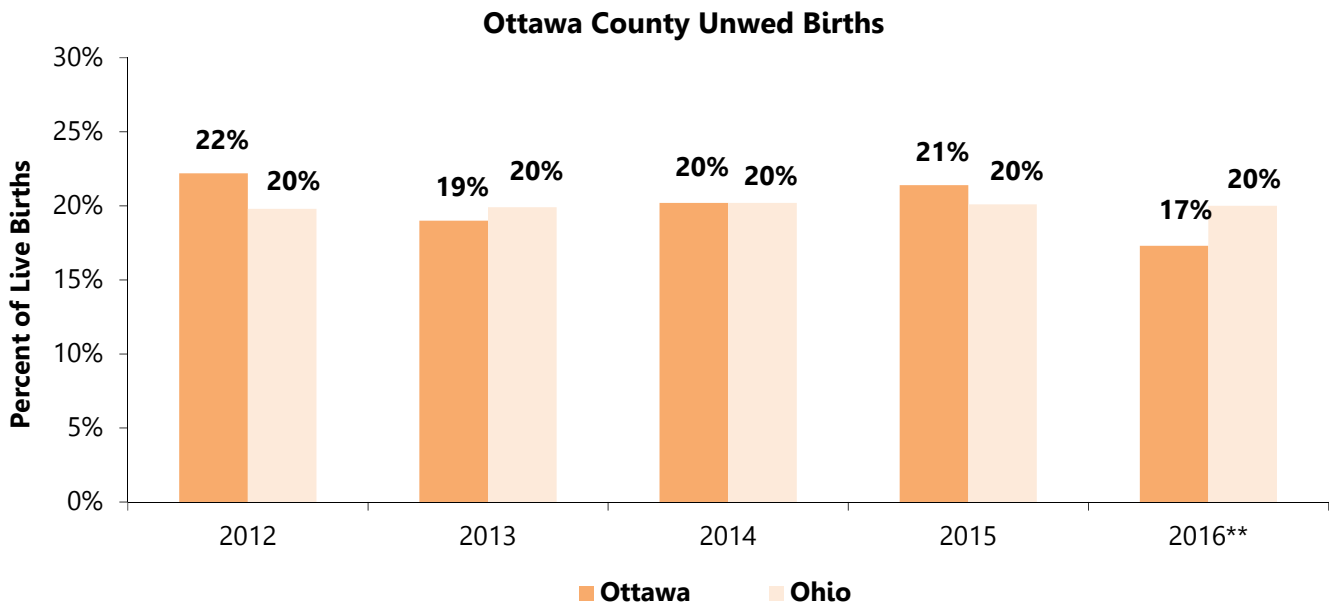
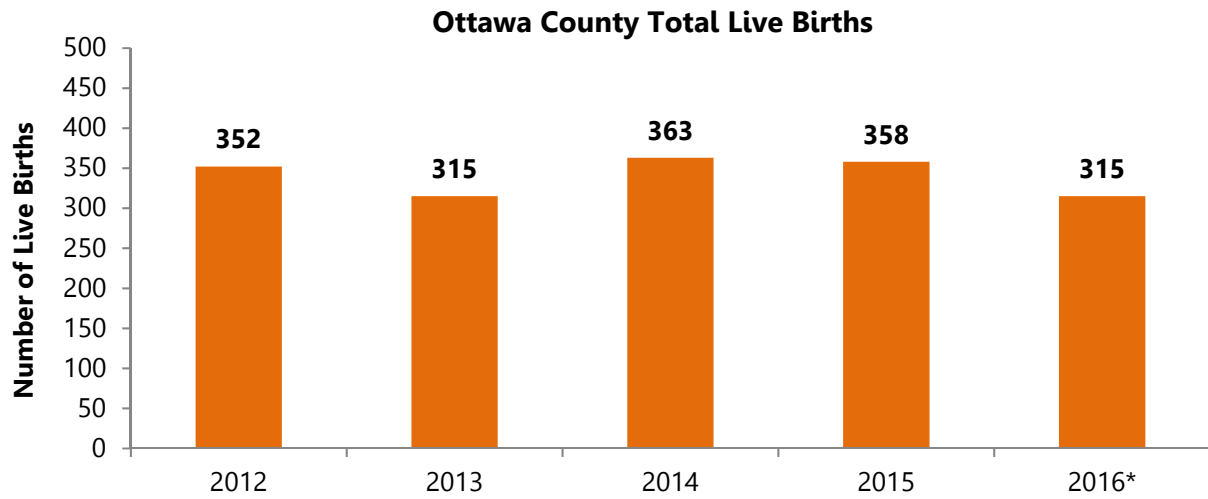


(Source for graphs: ODH, STD Surveillance, data reported through 05/07/2017)

Pregnancy Outcomes

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

- From 2012-2016, there was an average of 341 live births per year in Ottawa County.



Source for graphs: ODH Information Warehouse
 *Indicates preliminary data that may change

Health Behaviors: Adult Mental Health

Key Findings

In 2017, 3% of Ottawa County adults considered attempting suicide. One out of eleven (9%) adults felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities.

Adult Mental Health

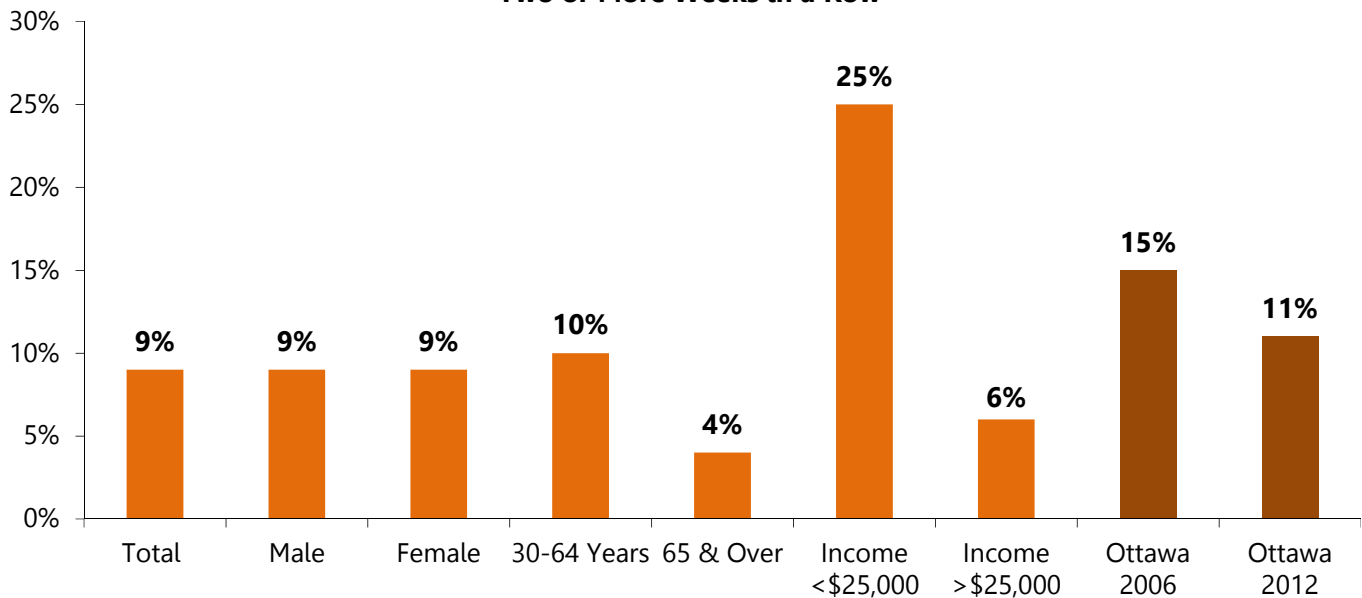
- Nine percent (9%) of Ottawa County adults felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities, increasing to 25% of those with incomes less than \$25,000.
- Three percent (3%) of Ottawa County adults considered attempting suicide in the past year.
- Less than one percent (<1%) of adults reported attempting suicide in the past year.
- Ottawa County adults reported they or a family member were diagnosed with or treated for the following mental health issues: anxiety or emotional problems (21%), depression (19%), an anxiety disorder (13%), attention deficit disorder (ADD/ADHD) (8%), post-traumatic stress disorder (PTSD) (5%), bipolar (4%), autism spectrum (3%), alcohol and illicit drug abuse (3%), developmental disability (3%), other trauma (3%), life-adjustment disorder (2%), eating disorder (1%), psychotic disorder (1%), problem gambling (<1%), and some other mental health disorder (2%). Sixteen percent (16%) indicated they or a family member had taken medication for one or more mental health issues.
- Ottawa County adults received the social and emotional support they needed from the following: family (72%), friends (64%), God/prayer (35%), church (21%), neighbors (8%), Internet (4%), community (4%), a professional (2%), self-help group (1%), and other (4%).
- Ottawa County adults indicated the following caused them anxiety, stress or depression: financial stress (35%), job stress (31%), marital/dating relationship (18%), death of close family member or friend (17%), fighting at home (17%), poverty/no money (17%), other stress at home (17%), sick family member (16%), unemployment (8%), caring for a parent (5%), family member with mental illness (5%), divorce/separation (4%), not having a place to live (2%), not having enough to eat (1%), sexual orientation/gender identity (1%), not feeling safe at home (1%), not feeling safe in the community (<1%), and other causes (13%).
- Ottawa County adults dealt with stress in the following ways: talked to someone they trust (39%), prayer/meditation (37%), slept (31%), ate more or less than normal (30%), exercised (29%), listened to music (29%), worked on a hobby (25%), drank alcohol (17%), worked (16%), took it out on others (8%), smoked tobacco (7%), used prescription drugs as prescribed (4%), used illegal drugs (1%), misused prescription drugs (1%), and other ways (10%).
- Nine percent (9%) of Ottawa County adults used a program or service for themselves or a loved one to help with depression, anxiety, or emotional problems. Reasons for not using such a program included the following: had not thought of it (12%), could not afford to go (7%), co-pay/deductible too high (5%), did not know how to find a program (4%), stigma of seeking mental health services (4%), other priorities (4%), fear (2%), could not get to the office/clinic (<1%), transportation (<1%), and other reasons (4%). Sixty-five percent (65%) of adults indicated they did not need such a program.

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Felt sad or hopeless for two or more weeks in a row	15%	11%	9%	N/A	N/A
Considered attempting suicide in the past year	3%	5%	3%	N/A	N/A

N/A – Not Available

The following graph shows Ottawa County adults who felt sad or hopeless for two or more weeks in a row in the past year. Examples of how to interpret the information include: 9% of all Ottawa County adults felt sad or hopeless for two or more weeks in a row, including 9% of males and 9% of females.

Ottawa County Adults Feeling Sad or Hopeless for Two or More Weeks in a Row



Suicide Facts

- 44,193 people in the U.S. died from suicide, and 1,104,825 people attempted suicide in 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 12-23-16

Chronic Disease: Cardiovascular Health

Key Findings

The 2017 Ottawa County Health Assessment found that 7% of adults had survived a heart attack and 2% had survived a stroke at some time in their life. Just over two-fifths (42%) of Ottawa County adults had high blood pressure, 41% were obese, 40% had high blood cholesterol, and 15% were smokers, four known risk factors for heart disease and stroke. Heart disease (27%) and stroke (5%) accounted for 32% of all Ottawa County adult deaths in 2013-2015 (Source: CDC Wonder, 2017).

Heart Disease and Stroke

- In 2017, 7% of Ottawa County adults reported they had survived a heart attack or myocardial infarction, increasing to 12% of those over the age of 65 and 14% 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).
- Two percent (2%) of Ottawa County adults reported they had survived a stroke, increasing to 5% of those with incomes less than \$25,000 and 6% 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).
- Six percent (6%) of adults reported they had angina or coronary heart disease, increasing to 9% of those over the age of 65 and 11% 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 6% of those over the age of 65 and 10% of those with incomes less than \$25,000.

High Blood Pressure (Hypertension)

- More than two-fifths (42%) 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.
- Eight percent (8%) of adults were told they were pre-hypertensive/borderline high.
- Most (91%) adults had their blood pressure checked within the past year.
- Ottawa County adults diagnosed with high blood pressure were more likely to have:
 - Been ages 65 years or older (61%)
 - Rated their overall health as fair or poor (60%)
 - Been classified as obese by body mass index (57%)
 - Incomes less than \$25,000 (52%)

Ottawa County Leading Causes of Death 2013-2015

Total Deaths: 1,401

- Heart Disease (27% of all deaths)
- Cancer (25%)
- Chronic Lower Respiratory Diseases (6%)
- Stroke (5%)
- Accidents, Unintentional Injuries (4%)

Source: CDC Wonder, 2017

Ohio Leading Causes of Death 2013-2015

Total Deaths: 345,955

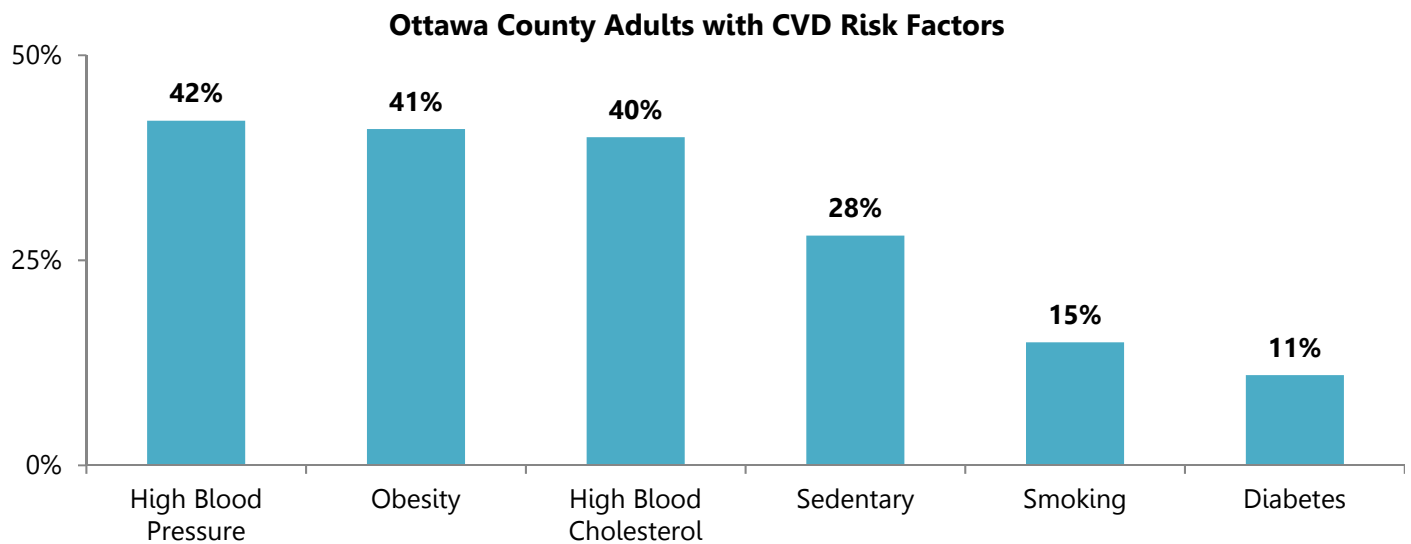
- Heart Disease (24% of all deaths)
- Cancers (22%)
- Chronic Lower Respiratory Diseases (6%)
- Accidents, Unintentional Injuries (5%)
- Stroke (5%)

Source: CDC Wonder, 2015

High Blood Cholesterol

- Two-fifths (40%) of adults had been diagnosed with high blood cholesterol. The 2015 BRFSS reported that 37% of Ohio and 36% of U.S. adults had been told they have high blood cholesterol.
- About four-fifths (81%) of adults had their blood cholesterol checked within the past 5 years. The 2015 BRFSS reported 78% of Ohio and U.S. adults had their blood cholesterol checked within the past 5 years.
- Ottawa County adults with high blood cholesterol were more likely to:
 - Have been ages 65 years or older (55%)
 - Rated their overall health as fair or poor (49%)

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



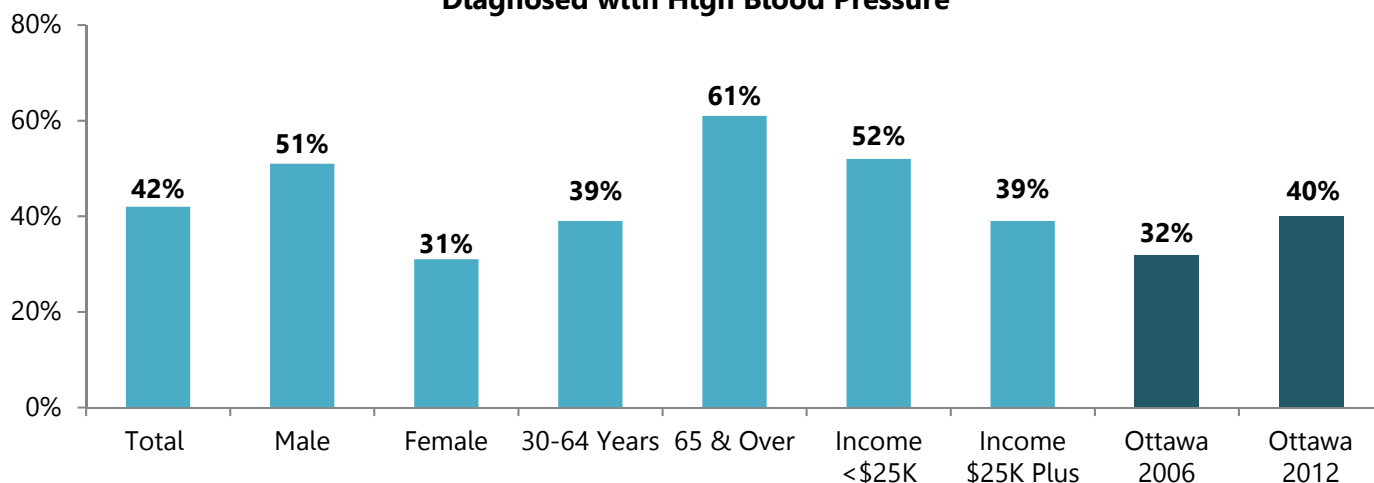
(Source: 2017 Ottawa County Health Assessment)

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Had angina	N/A	6%	6%	4%	4%
Had a heart attack	4%	7%	7%	5%	4%
Had a stroke	1%	1%	2%	4%	3%
Had high blood pressure	32%	40%	42%	34%	31%
Had high blood cholesterol	31%	38%	40%	37%	36%
Had blood cholesterol checked within past 5 years	74%	76%	81%	78%	78%

N/A – Not Available

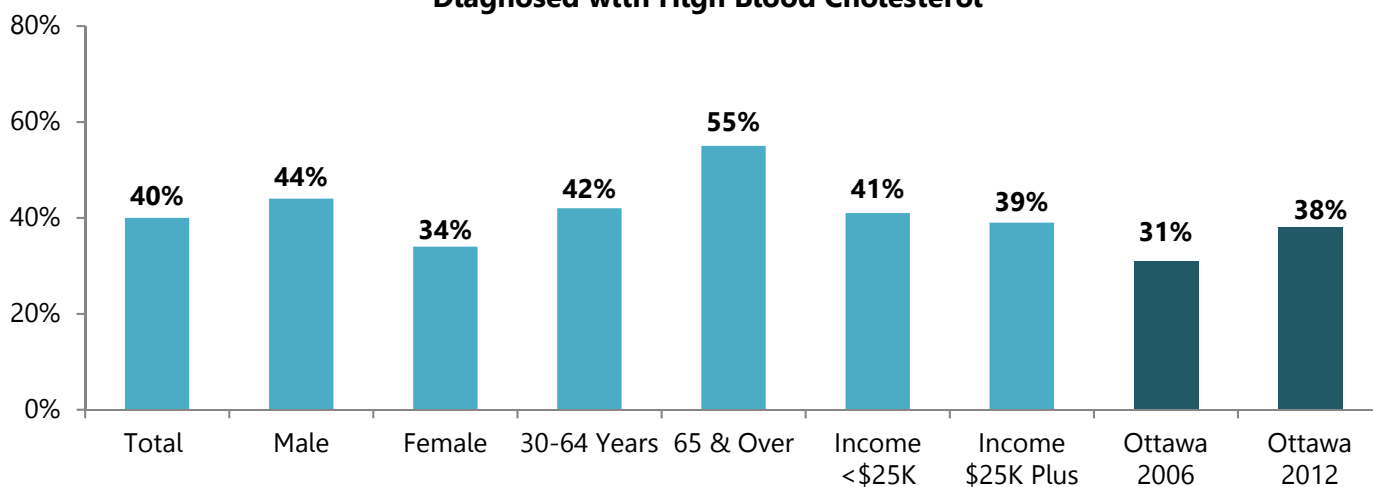
The following graphs show the percent of Ottawa County adults who had been diagnosed with high blood pressure, high blood cholesterol and cardiovascular disease. Examples of how to interpret the information on the first graph include: 42% of all Ottawa County adults had been diagnosed with high blood pressure, including 51% of males, 31% of females, and 61% of those 65 years and older.

Diagnosed with High Blood Pressure*

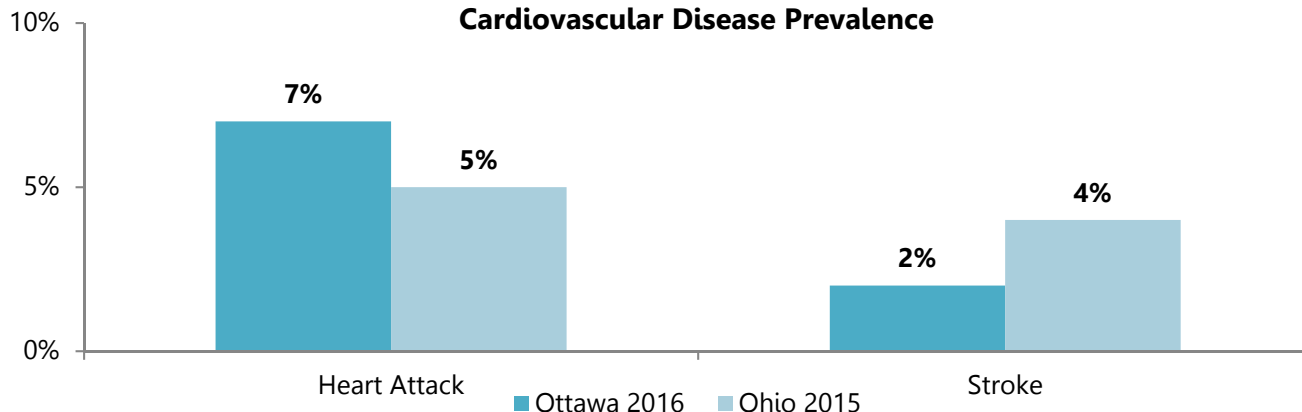


*Does not include respondents who indicated high blood pressure during pregnancy only.

Diagnosed with High Blood Cholesterol*



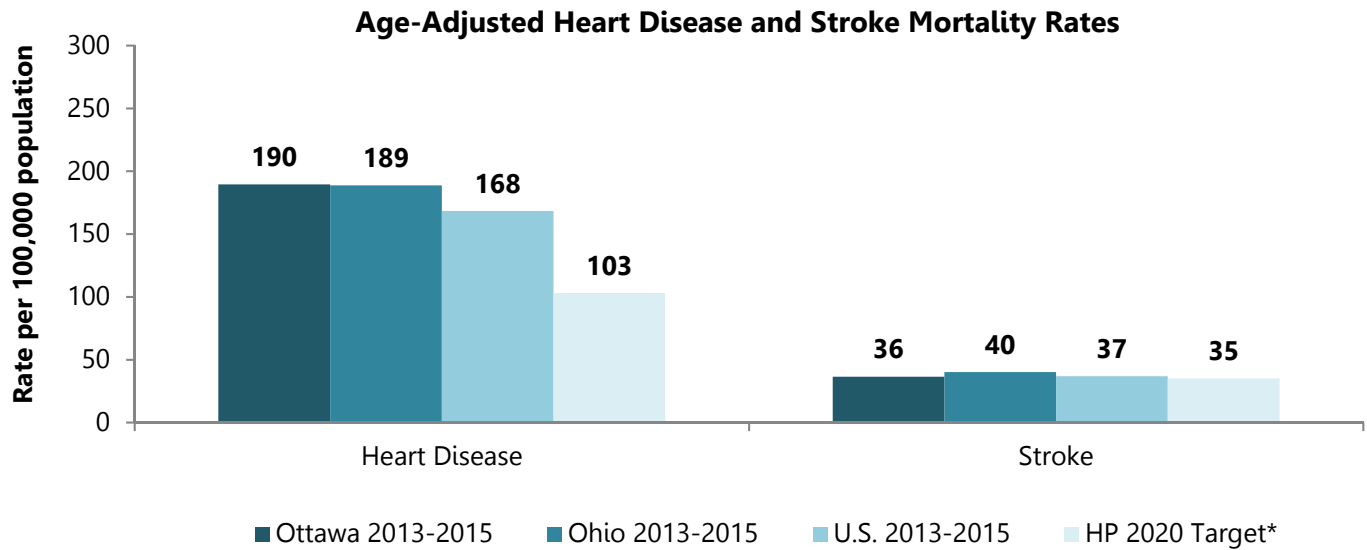
Cardiovascular Disease Prevalence



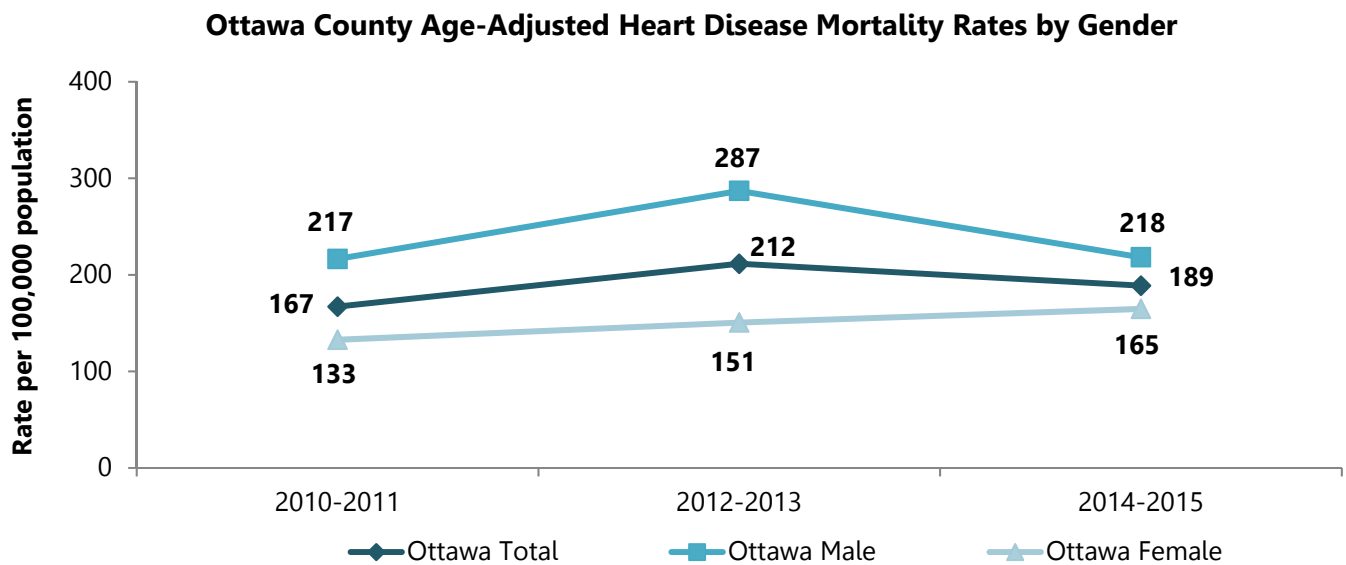
(Source: 2017 Ottawa County Health Assessment and 2014 BRFSS)

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

- When age differences are accounted for, the statistics indicate that from 2013-2015, the Ottawa County heart disease mortality rate was higher than Ohio, U.S., and the Healthy People 2020 target.
- The Ottawa County age-adjusted stroke mortality rate from 2013-2015 was lower than Ohio and U.S. rates, but was slightly higher than the Healthy People 2020 target objective.
- From 2012-2015, the total Ottawa County age-adjusted heart disease mortality rate decreased.



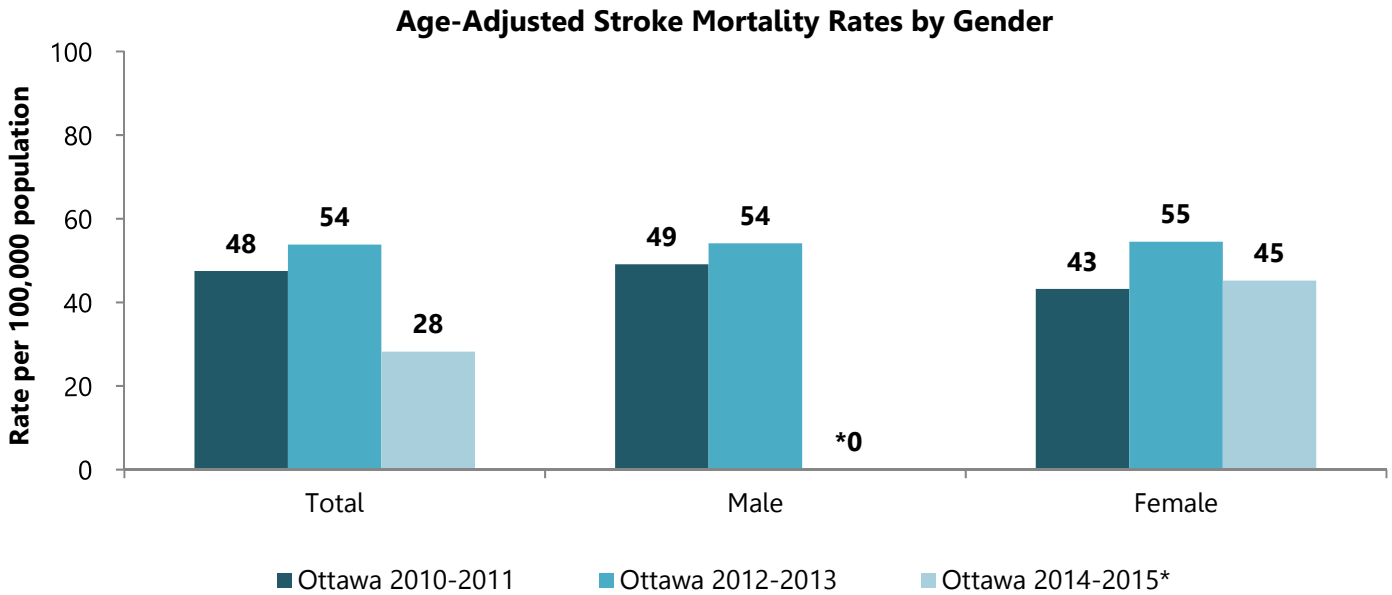
**The Healthy People 2020 Target objective for Coronary Heart Disease is reported for heart attack mortality.
(Source: CDC Wonder, Healthy People 2020)*



(Source: CDC Wonder, Underlying Cause of Death, 2006-2014)

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

- From 2012-2013, the Ottawa County stroke mortality rate was the same as males and slightly less than females.



**Note: 2014-2015 Male total is too small to be considered reliable
(Source: CDC Wonder, About Underlying Cause of Death, 2006-2014)*

Healthy People 2020 Objectives Heart Disease and Stroke

Objective	Ottawa Survey Population Baseline	2013 U.S. Baseline*	Healthy People 2020 Target
HDS-5: Reduce proportion of adults with hypertension	42% (2017)	31% Adults age 18 and up	27%
HDS-7: Decrease proportion of adults with high total blood cholesterol (TBC)	40% (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, 2017 Ottawa County Health Assessment)*

Chronic Disease: Cancer

Key Findings

In 2017, 18% of Ottawa 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 573 Ottawa County residents died from cancer, the second leading cause of death in the county. The American Cancer Society advises that avoiding 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.

Adult Cancer

- Almost one-fifth (18%) of Ottawa County adults were diagnosed with cancer at some point in their lives, increasing to 34% of those over the age of 65.
- Of those diagnosed with cancer, they reported the following types: breast (28%), skin cancer (24%), prostate (22%), melanoma (12%), cervical (7%), bladder (4%), colon (4%), endometrial (2%), lung (2%), non-Hodgkin's lymphoma (2%), ovarian (2%), esophageal (1%), head and neck (1%), pancreatic (1%), rectal (1%), renal (1%), leukemia (1%), thyroid (1%), and other types of cancer (6%). Eight percent (8%) of adults reported being diagnosed with multiple types of cancer.

18% of Ottawa 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 24% (573 of 2,345 total deaths) of all Ottawa 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 the following types of cancer: lung, colorectal, stomach, pancreas, kidney, bladder, uterine cervix, ovary (mucinous) and acute myeloid leukemia. The 2017 health assessment has determined that 15% of Ottawa 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=92) was the leading cause of male cancer deaths from 2011-2015 in Ottawa County. Cancer of the colon (n=23) and prostate cancer caused (n=17) male deaths during the same time period (*Source: CDC Wonder*).
- In Ottawa County, 17% of male adults were current smokers and 47% 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 Ottawa County from 2011-2015, followed by breast (n=39) and colon (n=32) cancers (*Source: CDC Wonder*).

Ottawa County Incidence of Cancer, 2010-2014

All Types: 1,497 cases

- Lung and Bronchus: 227 cases (15%)
- Breast: 212 cases (14%)
- Prostate: 183 cases (12%)
- Colon and Rectum: 147 cases (10%)

In 2015, there were 122 cancer deaths in Ottawa County.

Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 4/20/2017

- Approximately 13% of female adults in the county were current smokers and 54% had stopped smoking for one or more days in the past 12 months because they were trying to quit.
- According to the American Cancer Society, smoking causes 90% of lung cancer deaths in the U.S. Men and women who smoke are about 25 times more likely to develop lung cancer than nonsmokers (*Source: American Cancer Society, Facts & Figures 2017*).

Breast Cancer

- In 2017, 53% of Ottawa County females reported having had a clinical breast examination in the past year.
- Forty-five percent (45%) of Ottawa 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 in their 20s and 30s, a clinical breast exam should be done at least once every 3 years. Mammograms for women in their 20s and 30s are based upon increased risk (e.g., family history, past breast cancer) and physician recommendation. Otherwise, annual mammography is recommended beginning at age 40 (*Source: American Cancer Society, Facts & Figures 2017*).

Prostate Cancer

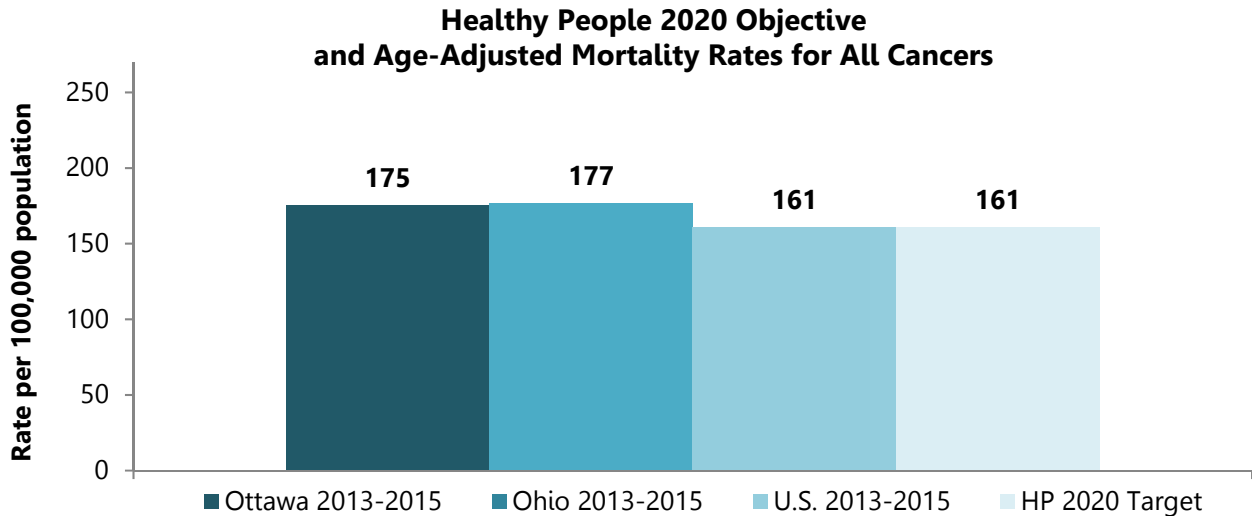
- Three-quarters (75%) of males age 50 and over had a PSA test at some time in their life, and 45% had one in the past year.
- More than half (56%) of men had a digital rectal exam in their lifetime, and 17% had one in the past year.
- CDC statistics indicate that prostate cancer deaths accounted for 1% of all male cancer deaths from 2011-2015 in Ottawa County.
- Incidence rates for prostate cancer are 60% higher in African Americans than in whites, and they are twice as likely to die of prostate cancer. In addition, about 56% of prostate cancers occur in men over the age of 65, and 97% occur in men 50 and older. Other risk factors include strong familial predisposition, diet high in processed meat or dairy foods, and obesity. African American men and Caribbean men of African descent had the highest documented prostate cancer incidence rates in the world (*Source: American Cancer Society, Facts & Figures 2017*).

Colon and Rectum Cancers

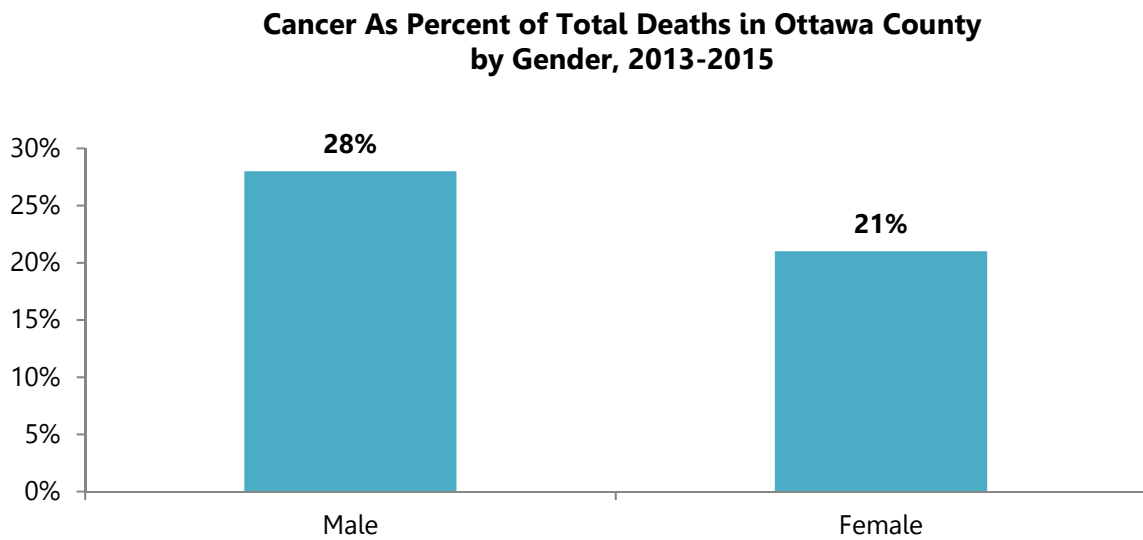
- The health assessment report identified that 49% of adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years.
- The CDC statistics indicate that colon, rectum, and anal cancer deaths accounted for 2% of all male and female cancer deaths from 2011-2015 in Ottawa County.
- The American 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 (*Source: American Cancer Society, Facts & Figures 2017*).

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

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



(Source: CDC Wonder ; Healthy People 2020)



(Source: CDC Wonder, 2013-2015)

Ottawa County Incidence of Cancer 2010-2014

Types of Cancer	Number of Cases	Percent of Total Incidence of Cancer
Lung and Bronchus	227	15%
Breast	212	14%
Prostate	183	12%
Colon and Rectum	147	10%
Other/Unspecified	138	9%
Melanoma of Skin	66	4%
Bladder	65	4%
Kidney and Renal Pelvis	60	4%
Non-Hodgkins Lymphoma	56	4%
Leukemia	46	3%
Pancreas	42	3%
Oral Cavity & Pharynx	38	3%
Thyroid	38	3%
Cancer and Corpus Uteri (Uterine Cancer)	37	2%
Esophagus	21	1%
Multiple Myeloma	20	1%
Stomach	20	1%
Liver and Bile Ducts	19	1%
Ovary	19	1%
Brain and CNS	12	1%
Larynx	11	1%
Cancer of Cervix Uteri (Cervical Cancer)	8	1%
Hodgkins Lymphoma	7	<1%
Testis	5	<1%
Total	1,497	100%

(Source: Ohio Cancer Incidence Surveillance System, ODH Information Warehouse, Updated 4/20/2017)

2017 Cancer Estimates

- 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

According to the Ottawa County survey data, 40% of Ottawa County adults were diagnosed with arthritis. According to the 2015 BRFSS, 28% of Ohio adults and 25% of U.S. adults were told they had 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).
- Two-fifths (40%) of Ottawa County adults were told by a health professional that they had some form of arthritis, increasing to 68% of those over the age of 65.
- Three percent (3%) of adults were diagnosed with rheumatoid arthritis.
- More than four-fifths (82%) 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 had 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 2017*).

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Diagnosed with arthritis	37%	32%	40%	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:

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

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

Chronic Disease: Asthma

Key Findings

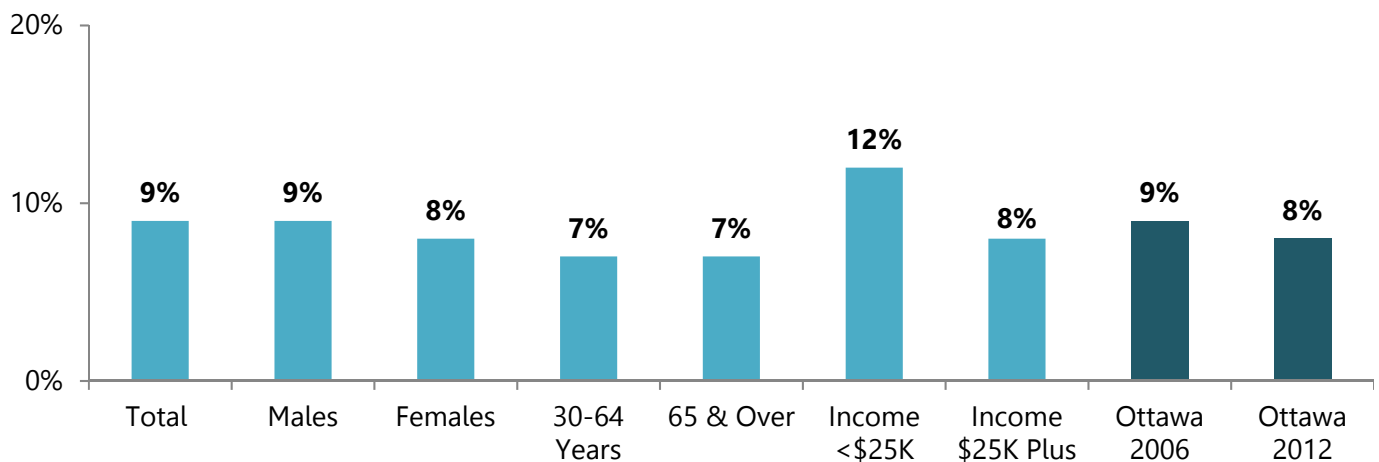
According to the Ottawa County survey data, 9% of adults had been diagnosed with asthma.

Asthma and Other Respiratory Disease

- In 2017, 9% of Ottawa County adults had been diagnosed with asthma.
- Fourteen percent (14%) of Ohio and U.S. adults had ever been diagnosed with asthma *(Source: 2015 BRFSS)*.
- One-in-fourteen (7%) adults had been diagnosed with COPD, increasing to 12% of those over the age of 65.
- There are several important factors that may trigger an asthma attack. Some of these triggers are tobacco smoke, dust mites, outdoor air pollution, cockroach allergens, pets, mold, smoke from burning wood or grass, infections linked to the flu, colds, and respiratory viruses *(Source: CDC, 2013)*.
- Chronic lower respiratory disease was the third leading cause of death in Ottawa County and the third leading cause of death in Ohio, in 2014 *(Source: CDC Wonder)*.

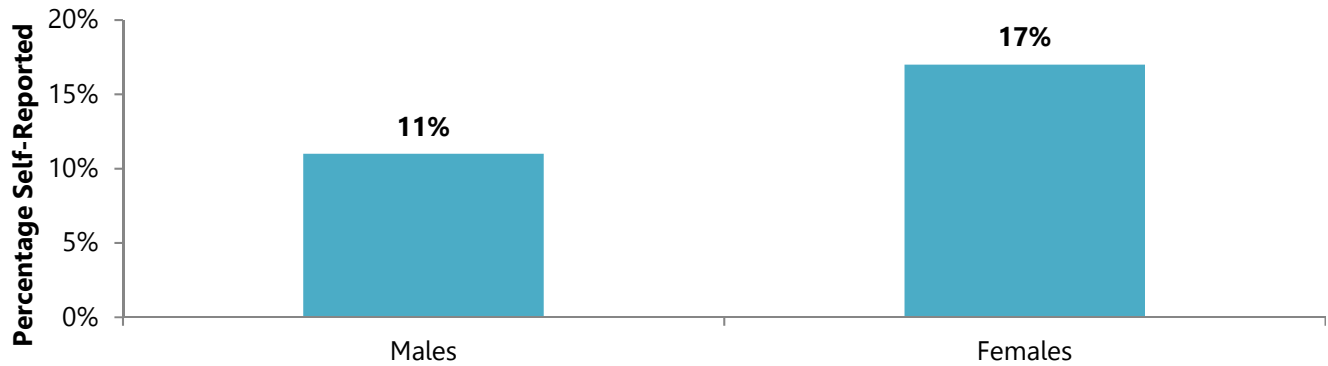
Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Had been diagnosed with asthma	9%	8%	9%	14%	14%

Ottawa County Adults Diagnosed with Asthma

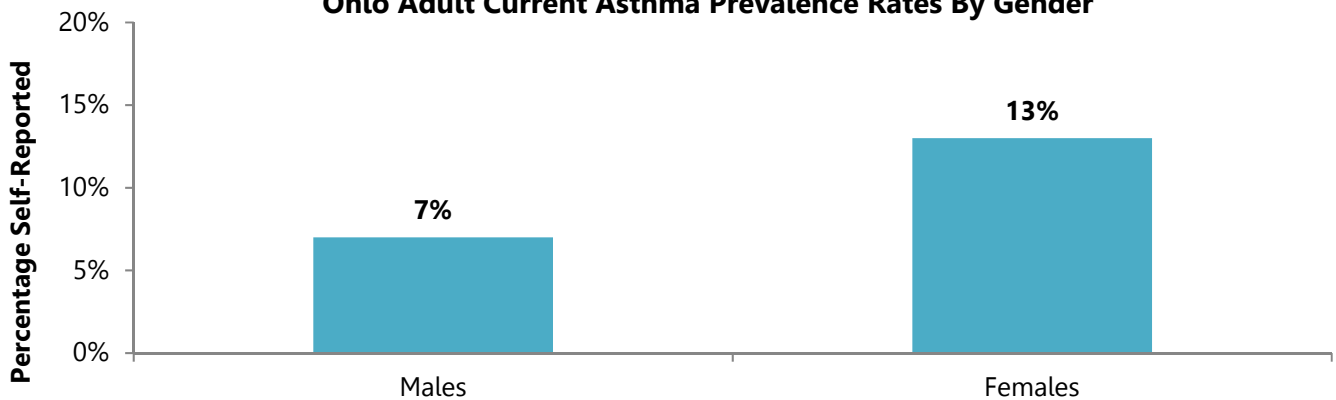


The following graphs demonstrate the lifetime and current prevalence rates of asthma by gender for Ohio residents.

Ohio Adult Lifetime Asthma Prevalence Rates By Gender



Ohio Adult Current Asthma Prevalence Rates By Gender



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
- 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.

(Source: American College of Allergy, Asthma, & Immunology, Asthma Facts, 2016)

Chronic Disease: Diabetes

Key Findings

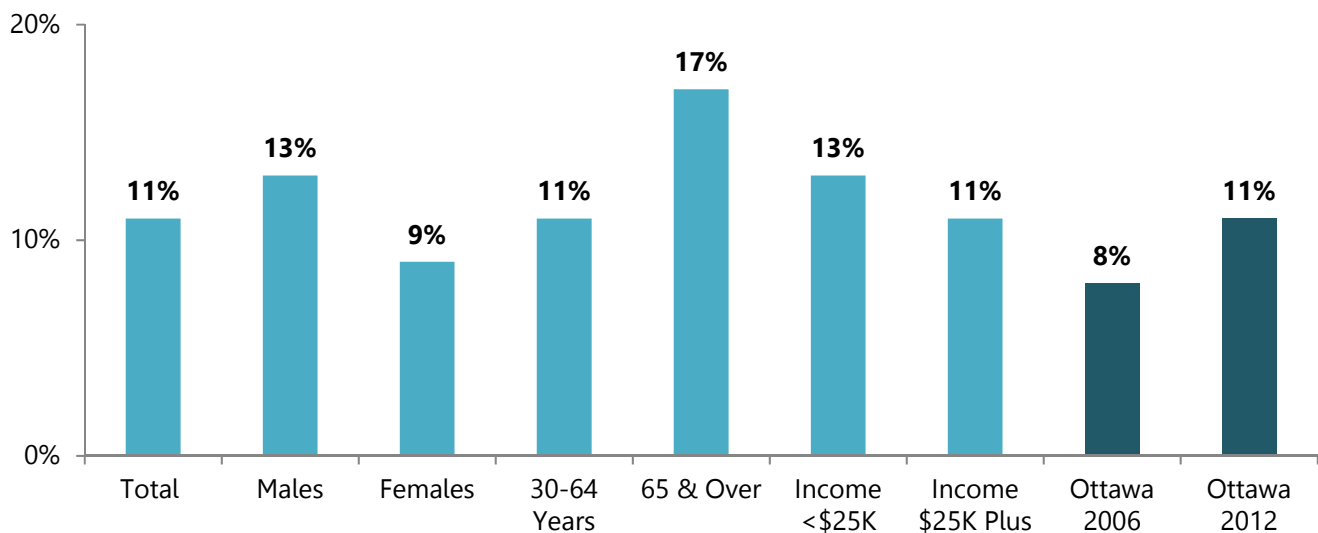
In 2017, 11% of Ottawa County adults had been diagnosed with diabetes.

Diabetes

- The 2017 health assessment has identified that 11% of Ottawa County adults had been diagnosed with diabetes, increasing to 17% of those over the age of 65. The 2015 BRFSS reports an Ohio prevalence of 11%, and a U.S. prevalence of 10%.
- Nine percent (9%) of adults had been diagnosed with pre-diabetes.
- Diabetics were using the following to treat their diabetes: diet control (79%), checking blood sugar (75%), diabetes pills (71%), annual vision exam (62%), checking A1C annually (60%), exercise (60%), checking their feet (54%), dental exam (33%), insulin (24%), injectable (12%), and taking a class (10%).
- Two-fifths (40%) of adults with diabetes rated their health as fair or poor.
- Ottawa County adults diagnosed with diabetes also had one or more of the following characteristics or conditions:
 - 90% were obese or overweight
 - 76% had been diagnosed with high blood cholesterol
 - 71% had been diagnosed with high blood pressure

Adult Comparisons	Ottawa County 2006	Ottawa County 2012	Ottawa County 2017	Ohio 2015	U.S. 2015
Diagnosed with diabetes	8%	11%	11%	11%	10%

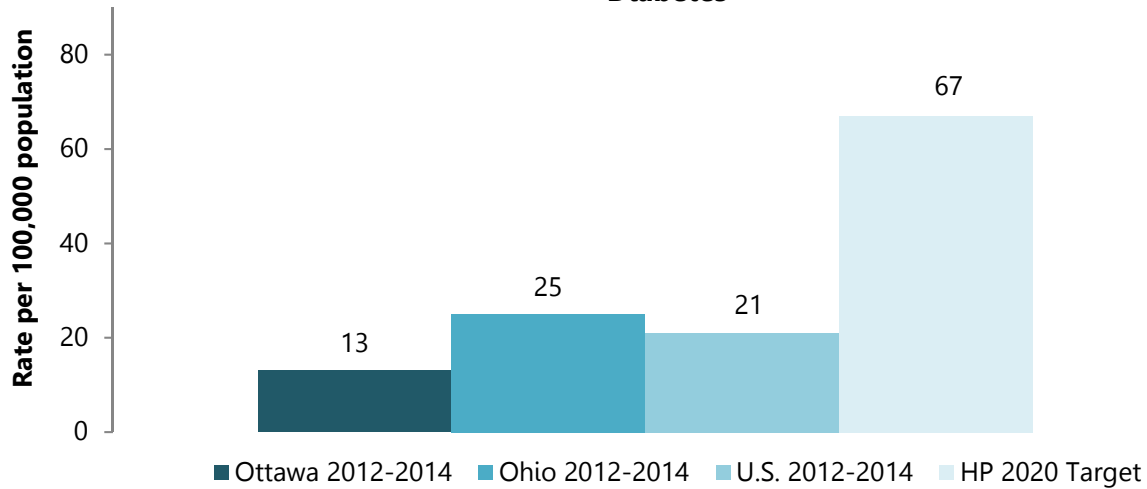
Ottawa County Adults Diagnosed with Diabetes



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

- From 2012-2014, Ottawa County's age-adjusted diabetes mortality rate was lower than the Ohio, U.S., and the Healthy People 2020 target objective rate.

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



(Source: CDC Wonder and Healthy People 2020)

Statistics About Diabetes

- In 2015, 30.3 million Americans, or 9.4% of the population, had diabetes. Approximately 1.25 million American children and adults have type 1 diabetes.
- Of the 30.3 million, 7.2 million were undiagnosed.
- 84.1 million Americans have prediabetes.
- 1.5 million Americans are diagnosed with diabetes every year.
- American Indians/Alaska Natives had a higher prevalence rate for diabetes.
- An estimated, 34% of people had prediabetes, increasing to 48% of those ages 65 and older.
- In 2014, 7.2 million hospital discharges and 14.2 million emergency department visits were due to diabetic complications.
- The economic cost of diagnosed diabetes in the U.S. is \$245 billion per year.
- Diabetes is the primary cause of death for 79,535 Americans each year, and contributes to the death of 252,806 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



1 in 3 is overweight



Physical inactivity



1 in 10 is obese

KEY ACTIONS

FOR EVERYONE



Eat healthily



Be physically active



Avoid excessive weight gain



Check blood glucose if in doubt



Follow medical advice

FOR GOVERNMENTS



Healthy Environments

ENSURE



Better Diagnosis & Treatment



Better Data

Chronic Disease: Quality of Life

Key Findings

In 2017, back or neck problems were Ottawa County adults' most limiting health impairments.

Impairments and Health Problems

- Among those who were limited in some way, the following most limiting problems or impairments were reported: back or neck problems (53%); arthritis/rheumatism (40%); chronic pain (23%); walking problems (22%); fitness level (22%); stress, depression, anxiety, or emotional problems (22%); sleep problems (20%); chronic illness (17%); lung/breathing problems (17%); hearing problems (14%); fractures, bone/joint injuries (13%); eye/vision problems (7%); dental problems (5%); mental health illness/disorder (4%); a learning disability (3%); substance dependency (1%); drug addiction (<1%); and other impairment/problem (7%).
- Ottawa County adults were responsible for providing regular care or assistance to the following: multiple children (15%); an elderly parent or loved one (8%); a friend, family member or spouse with a health problem (8%); grandchildren (4%); someone with special needs (4%); an adult child (3%); children with discipline issues (2%); a friend, family member or spouse with a mental health issue (2%); and a friend, family member or spouse with dementia (2%).
- In the past year, Ottawa County adults reported needing the following services: eyeglasses or vision services (27%), pain management (7%), hearing aids or hearing care (6%), a cane (6%), help with routine needs (5%), medical supplies (5%), help with personal care needs (4%), a walker (4%), durable medical equipment (3%), oxygen or respiratory support (3%), a wheelchair (2%), a personal emergency response system (2%), a special bed (1%), special telephone (1%), mobility aids or devices (<1%), and a wheelchair ramp (<1%).

Healthy People 2020

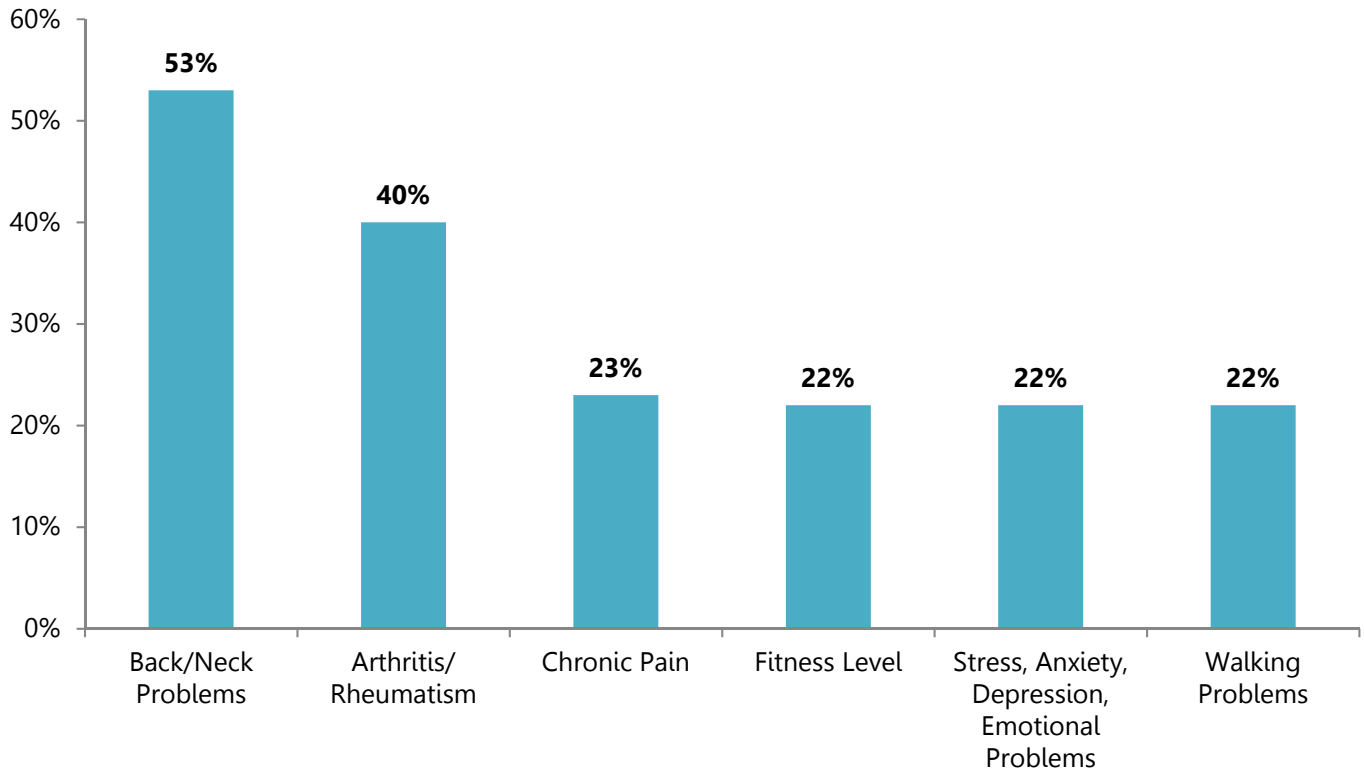
Arthritis, Osteoporosis, and Chronic Back Conditions (AOCBC)

Objective	Ottawa 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	40%	36%

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

The following graph shows Ottawa County adults' most limiting health problems.

Ottawa County Most Limiting Health Problems



Social Conditions: Social Determinants of Health

Key Findings

In 2017, 7% of Ottawa County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Nine percent (9%) of adults needed help meeting their general daily needs.

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



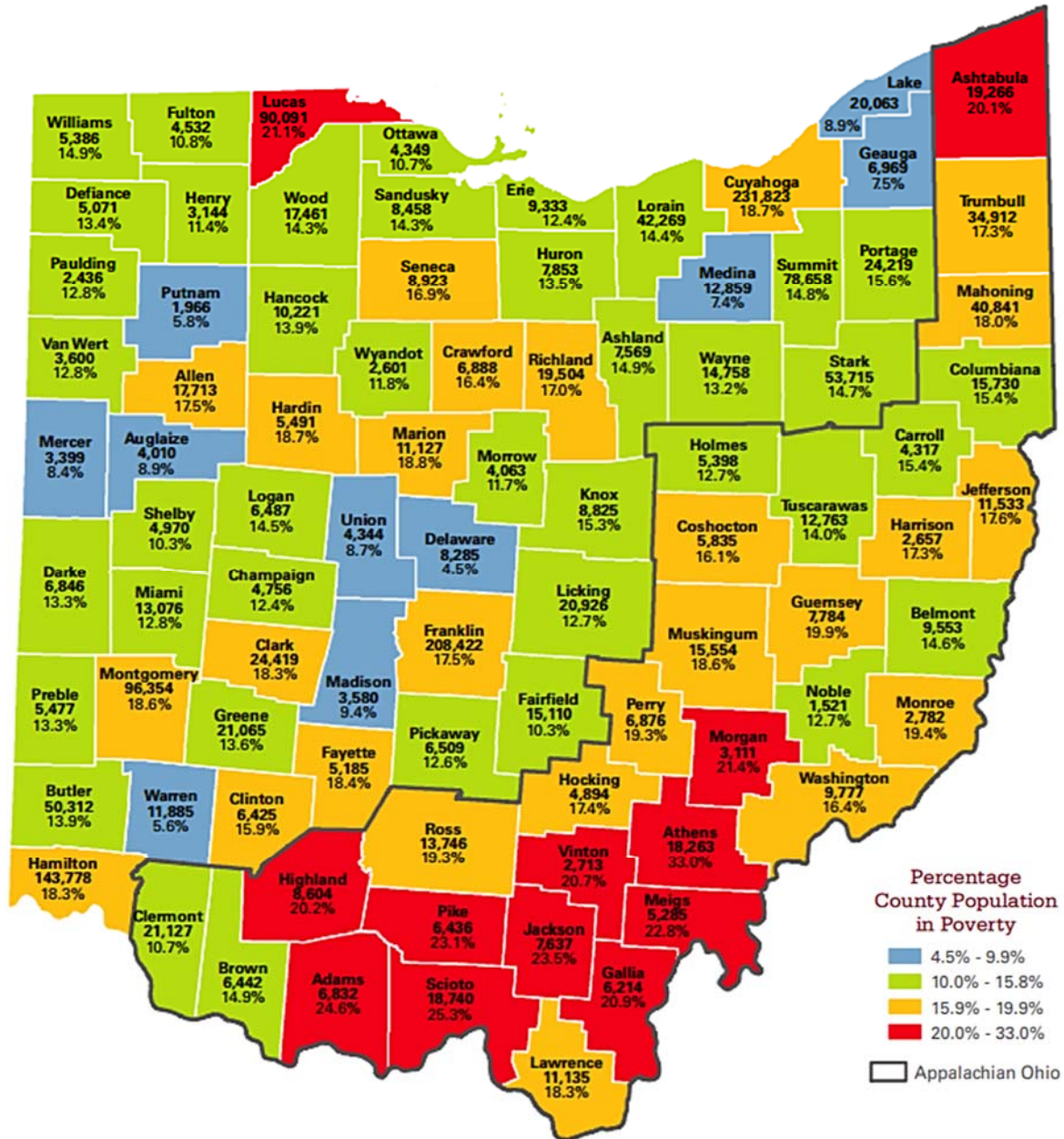
Economic Stability

- In the past month, 9% of adults needed help meeting their general daily needs, such as food, clothing, shelter or paying utilities, increasing to 30% of those with incomes less than \$25,000.
- Ottawa County adults received assistance for the following in the past year: healthcare (11%), food (8%), Medicare (8%), prescription assistance (7%), dental care (6%), mental illness issues (6%), home repair (5%), free tax preparation (4%), rent/mortgage (3%), utilities (3%), transportation (3%), employment (2%), legal aid services (2%), affordable childcare (2%), clothing (1%), diapers (1%), drug or alcohol addiction (1%), post-incarceration issues (<1%), and credit counseling (<1%).
- Ottawa County adults experienced the following food security issues in the past year: had to choose between paying bills and buying food (8%), went hungry/ate less to provide more food for their family (6%), loss of income led to food insecurity issues (5%), worried food would run out (4%), were hungry but did not eat because they did not have enough money for food (2%), and food assistance was cut (2%).
- The median household income in Ottawa County was \$58,793. 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, 2015).
- Almost 10% of all Ottawa County residents were living in poverty, and 15% 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 Ottawa County was 8.6 as of June 2017 (Source: Ohio Department of Job and Family Services, Office of Workforce Development, Bureau of Labor Market Information).
- There were 27,967 housing units, of which 38% were vacant (Source: U.S. Census Bureau, American Community Survey, 2011-2015).
- Eighty percent (80%) of occupied housing units in Ottawa County were owner-occupied, and 20% were renter-occupied (Source: U.S. Census Bureau, American Community Survey, 2011-2015).
- Rent in Ottawa County cost an average of \$696 per month (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.

- According to 2011-2015 American Community Survey estimates, approximately 1,775,836 Ohio residents or 15.8% of the population were in poverty.
- From 2011-2015, almost one in nine (11%) of Ottawa County residents were in poverty.

Estimated Poverty Rates in Ohio by County (2011-2015)



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

Education

- Ninety-three percent (93%) of Ottawa County adults 25 years and over had a high school diploma or higher (Source: U.S. Census Bureau, American Community Survey, 2011-2015).
- Twenty-two percent (22%) of Ottawa County adults 25 years and over had at least a bachelor's degree (Source: U.S. Census Bureau, American Community Survey, 2011-2015).

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: Healthy People 2020, Retrieved May 19 2017)

Social and Community Context

- Three percent (3%) of Ottawa County adults were threatened to be abused in the past year. They were threatened by the following: a spouse or partner (71%), someone outside their home (24%), a child (18%), and someone else (18%).
- Seven percent (7%) of Ottawa County adults were abused in the past year. They were abused by the following: a spouse or partner (71%), someone outside their home (24%), a child (12%), another family member (3%), and someone else (15%).
- Ottawa County adults experienced the following in the past 12 months: a close family member went to the hospital (41%); death of a family member or close friend (34%); had bills they could not pay (14%); someone in their household lost their job/had their hours at work reduced (10%); someone close to them had a problem with drinking or drugs (9%); household income was cut by 50% (6%); moved to a new address (4%); had someone homeless living with them (3%); became separated or divorced (3%); their child was threatened or abused by someone physically, emotionally, sexually, and/or verbally (1%); family was at risk for losing their household (1%); knew someone who lived in a hotel (1%); were homeless (1%); and witnessed someone in their family being hit or slapped (<1%).
- Ottawa County adults experienced the following adverse childhood experiences (ACEs): lived with someone who was a problem drinker or alcoholic (22%); their parents became separated or were divorced (21%); a parent or adult in their home swore at, insulted, or put them down (18%); lived with someone who was depressed, mentally ill, or suicidal (8%); someone at least 5 years older than them or an adult touched them sexually (8%); their parents or adults in their home slapped, hit, kicked, punched, or beat each other up (7%); a parent or adult in their home hit, beat, kicked, or physically hurt them (6%); their family did not look out for each other, feel close to each other, or support each other (5%); someone at least 5 years older than them or an adult tried to make them touch them sexually (5%); lived with someone who used illegal stress drugs, or who abused prescription medications (5%); 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 forced them to have sex (2%); did not have enough to eat, had to wear dirty clothes, and had no one to protect them (1%); and their parents were not married (1%).
- Twelve percent (12%) of Ottawa County adults had four or more ACEs in their lifetime.

Behaviors of Ottawa County Adults
Experienced 4 or More ACEs vs. Did Not Experience Any ACEs

Adult Behaviors	Experienced 4 or More ACEs	Did Not Experience Any ACEs
Current drinker (had at least one alcoholic beverage in the past month)	59%	68%
Binge drinker (drank five or more drinks for males and 4 or more for females on an occasion)	34%	27%
Had an income less than \$25,000	32%	14%
Felt sad or hopeless for two or more weeks in a row	31%	5%
Current smoker (currently smoke on some or all days)	28%	15%
Had two or more sexual partners	5%	3%

"ACEs" indicate adults who self-reported having experienced four or more adverse childhood experiences in their lifetime.

Adverse Childhood Experiences (ACE)

- Childhood abuse, neglect, and exposure to other traumatic stressors which we term adverse childhood experiences (ACE) are common. The most common are separated or divorced parents, verbal, physical or sexual abuse, witness of domestic violence, and having a family member with depression or mental illness.
- The short and long-term outcomes of these childhood exposures include a multitude of health and social problems such as:

— Depression	— Early initiation of smoking	— Risk for intimate partner violence
— Fetal death	— COPD	— Alcoholism and alcohol abuse
— Illicit drug use	— Unintended pregnancies	— Multiple sexual partners
— Liver disease	— Suicide attempts	— STD's
- Given the high prevalence of ACEs, efforts are needed at the state and local level to reduce and prevent childhood maltreatment and associated family dysfunction in the US.
- Studies are finding that there is a repetitive dose-response relationship between ACE and levels of exposure. A dose-response means that as the dose of the stressor increases, the intensity of the outcome will increase as well. As the number of ACEs increase so does the risk for the following:

— Myocardial Infarction	— Asthma	— Diabetes
— Mental Distress	— Disability	— Stroke
— Unemployment	— Lowered educational attainment	

Source: Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System Survey ACE Data, 2009-2014. As reported in 2015

Health and Health Care

- In the past year, 7% of adults were uninsured.
- Ottawa County adults had the following issues regarding their healthcare coverage: deductibles were too high (39%), premiums were too high (29%), co-pays were too high (26%), high HSA account deductible (10%), opted out of certain coverage because they could not afford it (9%), could not understand their insurance plan (7%), working with their insurance company (6%), opted out of certain coverage because they did not need it (3%), and did not know how to sign up or enroll (1%).

- See the Health Perceptions, Health Care Coverage, and Health Care Access sections for further health and health care information for Ottawa County adults.

Neighborhood and Built Environment

- More than half (52%) of Ottawa County adults kept a firearm in or around their home. Six percent (6%) of adults reported they were unlocked and loaded.
- Ottawa County adults reported doing the following while driving: eating (40%), talking on hand-held cell phone (36%), talking on hands-free cell phone (34%), not wearing a seatbelt (15%), texting (14%), using internet on their cell phone (4%), being under the influence of alcohol (2%), being under the influence of prescription drugs (2%), reading (2%), being under the influence of recreational drugs (<1%), and other activities (such as applying makeup, shaving, etc.) (1%).

Environmental Health

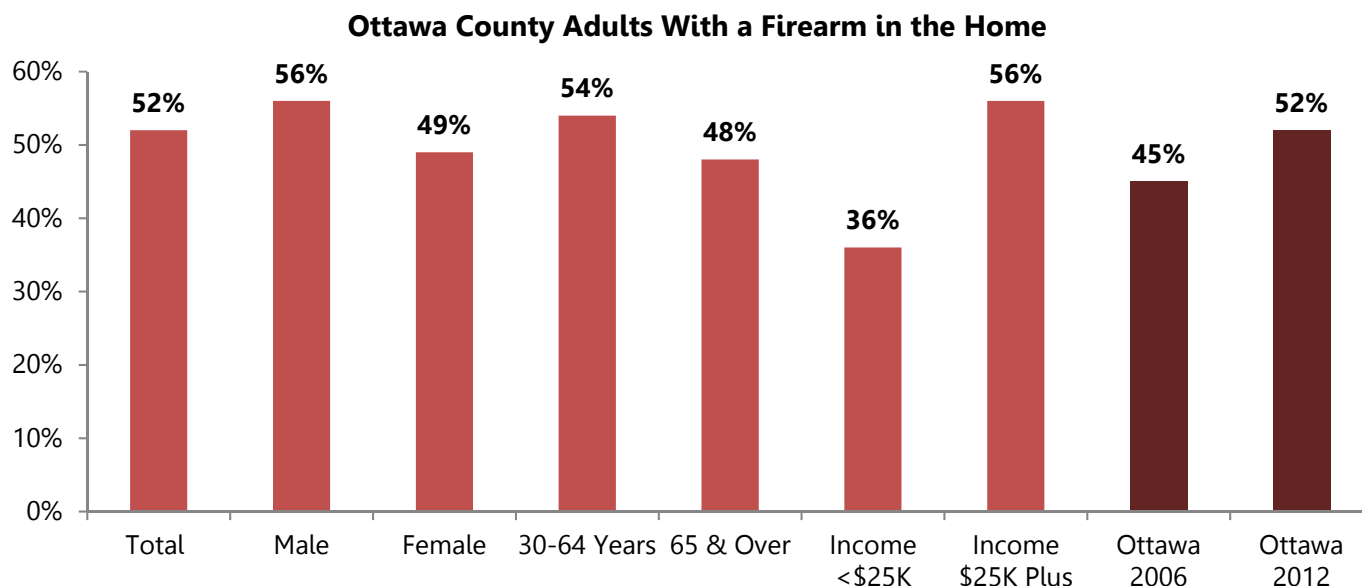
- Ottawa County adults thought the following threatened their health in the past year:

<ul style="list-style-type: none"> — Insects (6%) — Mold (6%) — Air quality (3%) — Rodents (3%) — Agricultural chemicals (2%) — Plumbing problems (2%) — Sewage/waste water problems (2%) — Temperature regulation (2%) — Unsafe water supply/wells (2%) 	<ul style="list-style-type: none"> — Chemicals found in products (1%) — Lice (1%) — Radon (1%) — Safety hazards (1%) — Asbestos (<1%) — Bed bugs (<1%) — Cockroaches (<1%) — Lead paint (<1%)
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Veterans' Affairs

- Just over half (51%) of adults reported an immediate family member had served in the military during the past 10-15 years. As a result of military service during the past 10-15 years, the following have affected veterans' immediate family members: post-traumatic stress disorder (PTSD) (6%), access to medical care at a VA facility (4%), had problems getting VA benefits (4%), marital problems (3%), had problems getting information on VA eligibility and applying (3%), could not find/keep a job (2%), housing issues (2%), major health problems due to injury (2%), access to mental health treatment (1%), substance/drug abuse (1%), access to medical care at a non-VA facility (<1%), and incarceration/re-entry (<1%).

The following graph shows the percentage of Ottawa County adults that had a firearm in or around the home. Examples of how to interpret the information shown on the graph include: 52% of all Ottawa County adults had a firearm in or around the home, including 56% of males.



INVEST IN YOUR COMMUNITY

4 Considerations to Improve Health & Well-Being for All

WHAT Know What Affects Health

www.countyhealthrankings.org

WHERE Focus on Areas of Greatest Need

Your zip code can be more important than your genetic code. Profound health disparities exist depending on where you live.

WHO Collaborate with Others to Maximize Efforts

HOW Use a Balanced Portfolio of Interventions for Greatest Impact

- Action in one area may produce positive outcomes in another.
- Start by using interventions that work across all four action areas.
- Over time, increase investment in socioeconomic factors for the greatest impact on health and well-being for all.

Four ACTION Areas

SOCIOECONOMIC FACTORS

PHYSICAL ENVIRONMENT

HEALTH BEHAVIORS

CLINICAL CARE

→ VISIT www.cdc.gov/CHInav FOR TOOLS AND RESOURCES TO IMPROVE YOUR COMMUNITY'S HEALTH AND WELL-BEING

NATIONAL PREVENTION STRATEGY

MARCH 2015

SOCIAL DETERMINANTS OF HEALTH | 99

Social Conditions: Parenting

Key Findings

More than two-thirds (68%) of Ottawa County parents discussed social media issues with their 10-to-17-year-old in the past year. Sixty-seven percent (67%) of parents put their infant to sleep on their back.

Parenting

- When asked how parents put their child to sleep as an infant, 67% said on their back, 28% said on their side, 15% said on their stomach, and 12% said in bed with them or another person.
- Children were put to sleep in the following places: crib/bassinet with bumper, blankets, or stuffed animals (56%); crib/bassinet without bumper, blankets, or stuffed animals (44%); pack n' play (38%); swing (37%); car seat (34%); in bed with parent or another person (30%); the floor (17%); and couch or chair (6%).
- Parents missed work an average of 2.5 days per year for their child's dental visits, 2.3 days for regular checkups, 1.6 days for injuries, 1.5 days for ear infections, 1.3 days due to behavioral or emotional problems, 1.3 days due to child's asthma, 1.2 days for head lice, 1.1 days for poisonings, and 2.5 days for other visits.
- Parents thought the following should be covered in sex education classes: biology/anatomy and physiology (74%), abstinence and refusal skills (73%), and birth control and use of condoms (68%). Ten percent (10%) of parents did not believe schools should offer sex education classes.
- Parents discussed the following topics with their child: social media issues (68%); bullying (66%); career plan/post-secondary education (63%); dating and relationships (59%); weight status (57%); body image (54%); negative effects of alcohol, tobacco, illegal drugs, or misusing prescription drugs (53%); volunteering (51%); school/legal consequences of using alcohol, tobacco, or other drugs (46%); abstinence and how to refuse sex (36%); birth control, condoms, safer sex and STD prevention (36%); refusal skills/peer pressure (34%); drinks (26%); and depression, anxiety, suicide (20%).

Dangers of Bed-Sharing

Many people confuse co-sleeping with bed-sharing, but they're not the same. When you sleep close enough to your baby that you can see, hear, touch or smell each other, it's called co-sleeping. Bed-sharing is a kind of co-sleeping. It's when babies and parents sleep together in the same bed. Some studies show that bed-sharing is the most common cause of death in babies, especially babies younger than 3 months old.

Why is bed-sharing dangerous? During bed-sharing, a baby can be hurt by:

- Getting trapped by the bed's frame, headboard or footboard
- Getting stuck between the bed and the wall, furniture or other objects
- Falling off the bed
- Being suffocated by pillows, blankets or quilts or from laying facedown
- Having another person roll on top of him
- SIDS

About half of all SIDS deaths happen when a baby shares a bed, sofa or sofa chair with another person. To help keep your baby safe from SIDS, don't bed-share if:

- Your baby is younger than 4 months old. This is when a baby is at highest risk of SIDS.
- Your partner or other children sleep in your bed.
- You smoke, even if you don't smoke in bed.
- You're very tired.
- You've had alcohol, used street drugs or taken certain prescription medicines, like antidepressants, or over-the-counter (also called OTC) medicines, like allergy or cough medicine that may make you sleepy. Taking these things can make it hard for you to wake up or respond to your baby.

Source: *March of Dimes, Bed-sharing, 2017*

Youth Health: Weight Status

Key Findings

In 2017, 32% of youth were classified as overweight (12%) or obese (20%) according to Body Mass Index (BMI) by age. When asked how they would describe their weight, 34% of Ottawa County youth reported that they were slightly or very overweight. About three-quarters (76%) of youth exercised for 60 minutes on 3 or more days per week.

Weight Status

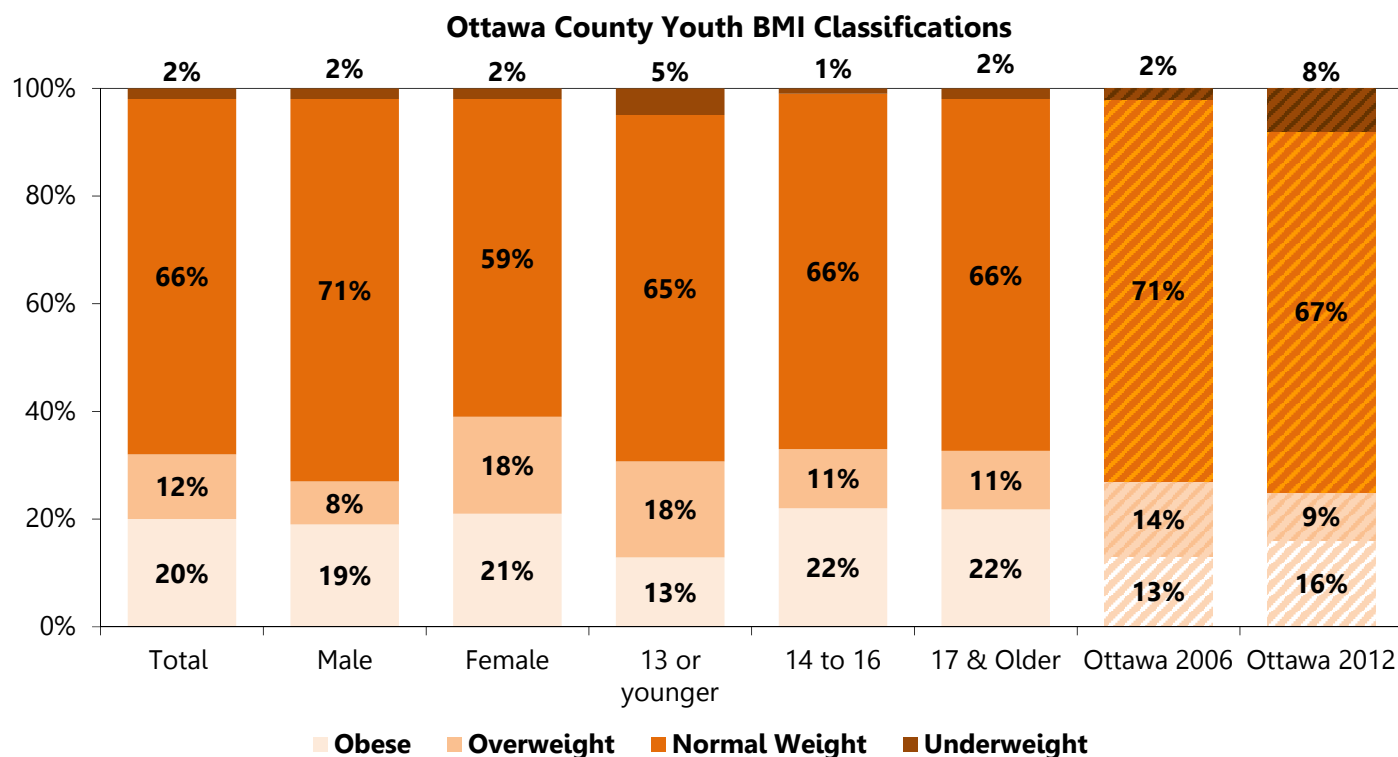
- BMI for children is calculated differently from adults. The CDC uses BMI-for-age, which is gender and age specific as children's body fatness changes over the years as they grow. In children and teens, BMI is used to assess underweight, normal, overweight, and obese.
- In 2017, 32% of youth were classified as overweight (12%) or obese (20%) by Body Mass Index (BMI) calculations, 66% were normal weight, and 2% were underweight.
- More than one-third (34%) 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.).
- Half (50%) of youth were trying to lose weight (YRBS reported 47% for Ohio in 2013 and 46% for the U.S. in 2015), increasing to 68% of Ottawa County female youth (compared to 34% of males).
- Youth did the following to lose or keep from gaining weight in the past 30 days:
 - Exercised (54%)
 - Drank more water (51%)
 - Ate more fruits and vegetables (42%)
 - Ate less food, fewer calories, or foods lower in fat (35%)
 - Skipped meals (16%)
 - Went without eating for 24 hours or more (3%) (2013 YRBS reported 10% for Ohio and 13% for the U.S.)
 - Vomited or took laxatives (2%) (2013 YRBS reported 5% for Ohio and 4% for the U.S.)
 - Smoked cigarettes or e-cigarettes to lose weight (2%)
 - Took diet pills, powders, or liquids without a doctor's advice (1%) (2013 YRBS reported 5% for Ohio and the U.S.)
- Eight percent (8%) of Ottawa County youth ate 5 or more servings of fruits and vegetables per day, 25% percent ate 3-4 servings, 60% ate 1-2 servings, and 7% ate 0 servings.

Physical Activity

- About three-fourths (76%) of Ottawa County youth participated in at least 60 minutes of physical activity on 3 or more days in the past week, 55% 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 28% did so every day in the past week (2013 YRBS reports 26% for Ohio and 2015 YRBS reports 27% for the U.S.). One in ten (10%) 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, children can engage in aerobic activity, muscle strengthening, and bone strengthening, as appropriate for their age. Children should participate in each of these types of activity on at least three days per week.

- Ottawa County youth spent an average of 3.6 hours on their cell phone, 2.1 hours on their computer/tablet, 2.1 hours playing video games, and 1.6 hours watching TV on an average day of the week.
- Fourteen percent (14%) of youth spent 3 or more hours watching TV on an average day (2013 YRBS reported 28% for Ohio and 2015 YRBS reports 25% for the U.S.).
- More than three-fifths (61%) of youth participated in a sports or intramural program, and 47% exercised outside of school.

The following graph shows the percentage of Ottawa County youth who were classified as obese, overweight, normal weight or underweight by Body Mass Index (BMI). Examples of how to interpret the information include: 66% of all Ottawa County youth were classified as normal weight, 20% were obese, 12% were overweight, and 2% were underweight for their age and gender.



Healthy People 2020 Nutrition and Weight Status (NWS)

Objective	Ottawa 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	20% (6-12 Grade)	13% (9-12 Grade)	14% (9-12 Grade)	15%*
	23% (9-12 Grade)			

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

(Sources: Healthy People 2020 Objectives, 2013 YRBS, NHANES, CDC/NCHS, 2017 Ottawa County Health Assessment)

Youth Comparisons	Ottawa County 2006 (6th-12th)	Ottawa County 2012 (6th-12th)	Ottawa County 2017 (6th-12th)	Ottawa County 2017 (9th-12th)	Ohio 2013 (9th-12th)	U.S. 2015 (9th-12th)
Obese	13%	16%	20%	23%	13%	14%
Overweight	13%	9%	12%	11%	16%	16%
Described themselves as slightly or very overweight	28%	26%	34%	35%	28%	32%
Trying to lose weight	51%	48%	50%	50%	47%	46%
Exercised to lose weight	49%	50%	54%	54%	N/A	N/A
Ate less food, fewer calories, or foods lower in fat to lose weight	24%	34%	35%	36%	N/A	N/A
Went without eating for 24 hours or more	4%	5%	3%	1%	10%	13%*
Took diet pills, powders, or liquids without a doctor's advice	2%	2%	1%	2%	5%	5%*
Vomited or took laxatives	1%	2%	2%	2%	5%	4%*
Ate 1 to 4 servings of fruits and vegetables per day	N/A	78%	85%	88%	N/A	N/A
Physically active at least 60 minutes per day on every day in past week	N/A	66%	28%	25%	26%	27%
Physically active at least 60 minutes per day on 5 or more days in past week	N/A	42%	55%	53%	48%	49%
Did not participate in at least 60 minutes of physical activity on any day in past week	N/A	7%	10%	12%	13%	14%
Watched TV 3 or more hours per day	N/A	35%	14%	15%	28%	25%

N/A- Not available

*Comparative YRBS U.S. data 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 **A**s are almost twice as likely to get regular physical activity than students who receive mostly **D**s and **F**s.

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](https://www.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

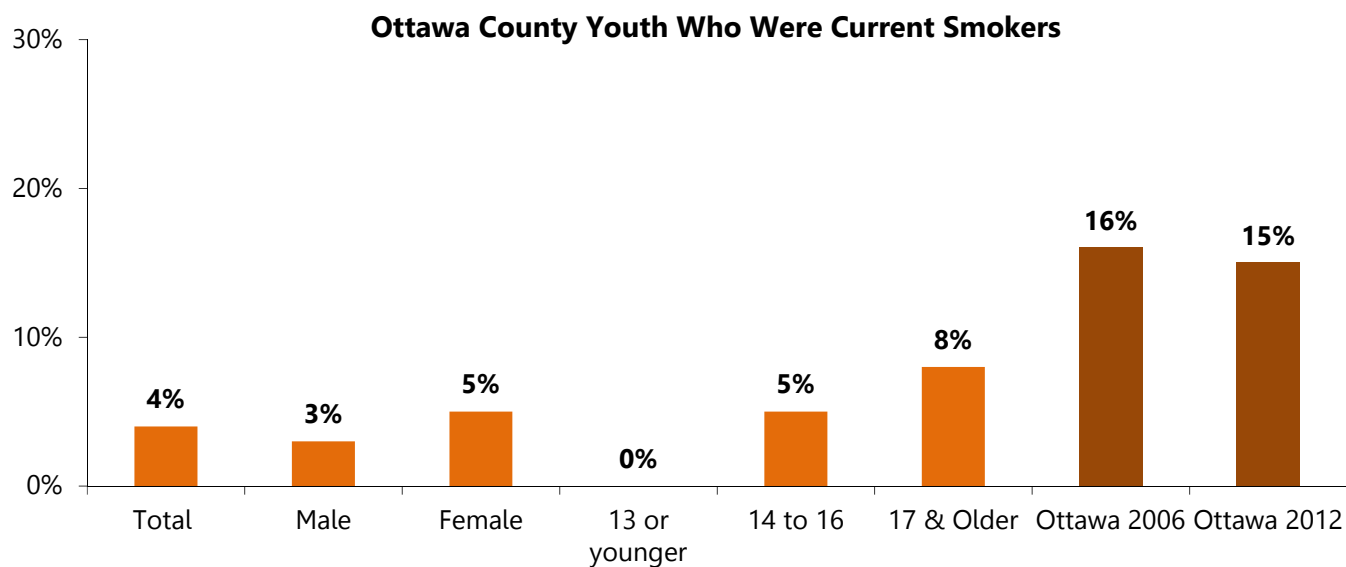
Key Findings

The health assessment identified that 4% of Ottawa County youth were current smokers, increasing to 8% of those ages 17 and older. One-tenth (10%) of those who had smoked a whole cigarette did so at 10 years old or younger. Ten percent (10%) of youth used e-cigarettes in the past year. The average age of onset for smoking was 13.2 years old.

Youth Tobacco Use Behaviors

- Seventeen percent (17%) of Ottawa County youth had tried cigarette smoking, increasing to 21% of those ages 17 and older (YRBS reported 32% for the U.S. in 2015).
- Four percent (4%) of youth were current smokers, having smoked at some time in the past 30 days, increasing to 8% of those 17 and older (YRBS reported 15% for Ohio in 2013 and 11% for the U.S. in 2015).
- Five percent (5%) of all youth had smoked a whole cigarette for the first time before the age of 13 (2015 YRBS reported 7% for the U.S.).
- One-tenth (10%) of those who had smoked a whole cigarette did so at 10 years old or younger, and another 17% had done so by 12 years old. The average age of onset for smoking was 13.2 years old.
- One percent (1%) of all youth smoked cigarettes on 20 or more days during the past month (2013 YRBS reported that 7% of Ohio youth smoked cigarettes on 20 or more days during the past month and 3% for the U.S. in 2015).
- One percent (1%) of current smokers smoked cigarettes daily.
- Youth used the following forms of tobacco in the past year: e-cigarettes (10%); cigarettes (9%); Black and Milds (7%); Swishers (5%); chewing tobacco, snuff, or dip (4%); pouch [snus] (2%); cigarillos (2%); hookah (2%); cigars (1%); and little cigars (1%).
- Youth smokers reported the following ways of obtaining cigarettes:
 - A person 18 years or older gave them the cigarettes (25%)
 - Bought cigarettes from a store or gas station (17%)
 - Took them from a store or family member (16%)
 - Borrowed cigarettes from someone else (13%)
 - Some other way (33%)
- More than half (57%) of youth who smoked in the past year had tried to quit smoking (2015 YRBS reported 45% for the U.S.).
- Youth reported being exposed to secondhand smoke in the following places: home (28%), other relative's home (28%), car (21%), friend's home (14%), park/ball field (9%), and fairgrounds (8%).

The following graph shows the percentage of Ottawa County youth who were current smokers (i.e. having smoked cigarettes in the past 30 days). Examples of how to interpret the information include: 4% of all Ottawa County youth were current smokers, including 3% of males and 5% of females.



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

Youth Comparisons	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Ever tried cigarettes	37%	33%	17%	21%	52%*	32%
Current smokers	16%	15%	4%	5%	15%	11%
Smoked cigarettes on 20 or more days during the past month (of all youth)	7%	6%	1%	1%	7%	3%
Smoked a whole cigarette for the first time before the age of 13 (of all youth)	13%	8%	5%	4%	14%*	7%
Tried to quit smoking (of those youth who smoked in the past year)	43%	50%	57%	52%	56%*	45%

* Comparative YRBS data for Ohio is 2011

Healthy People 2020 Tobacco Use (TU)

Objective	Ottawa County 2017	Ohio 2013	U.S. 2015	Healthy People 2020 Target
TU-2.2 Reduce use of cigarettes by adolescents (past month)	4% (6-12 Grade) 5% (9-12 Grade)	15% (9-12 Grade)	11% (9-12 Grade)	16%*

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

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

Behaviors of Ottawa County Youth
Current Smokers vs. Non-Current Smokers

Youth Behaviors	Current Smoker	Non-Current Smoker
Had had sexual intercourse	83%	32%
Participated in extracurricular activities	79%	92%
Been bullied in any way in the past year	71%	41%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	69%	21%
Had had at least one drink of alcohol in the past 30 days	57%	18%
Attempted suicide in the past 12 months	57%	4%
Seriously considered attempting suicide in the past 12 months	50%	12%
Had used marijuana in the past 30 days	43%	5%

E-Cigarette Use Among Youth and Young Adults

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

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

Youth Health: Alcohol Use

Key Findings

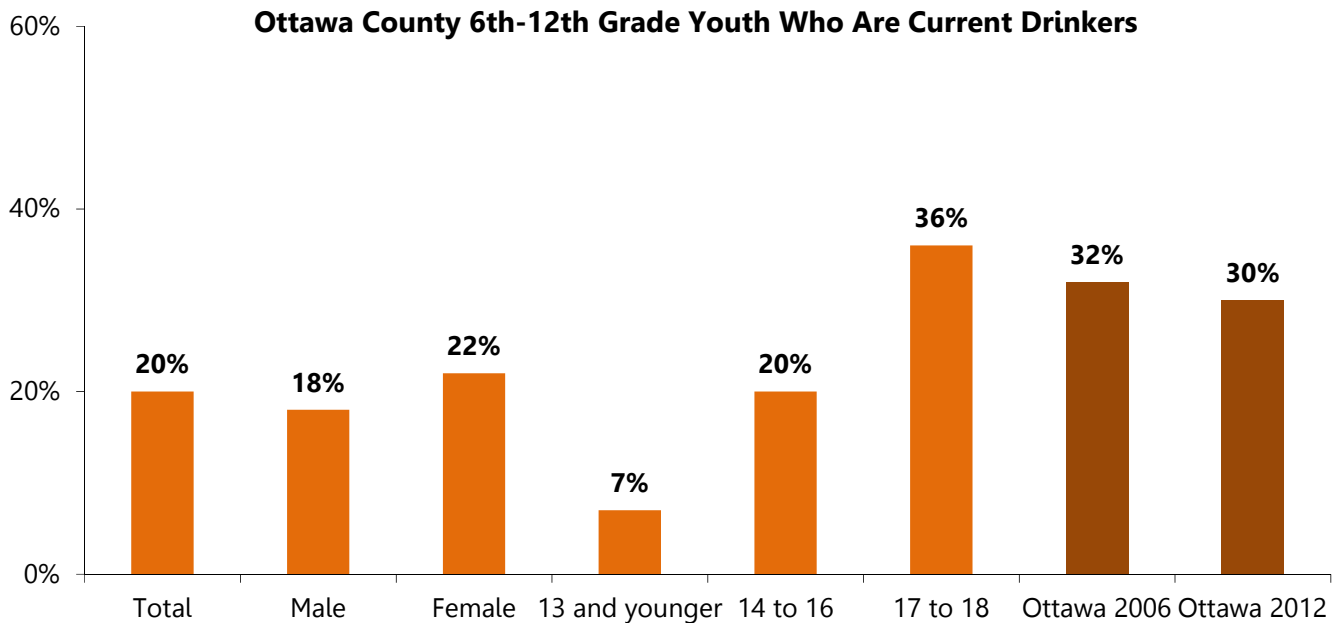
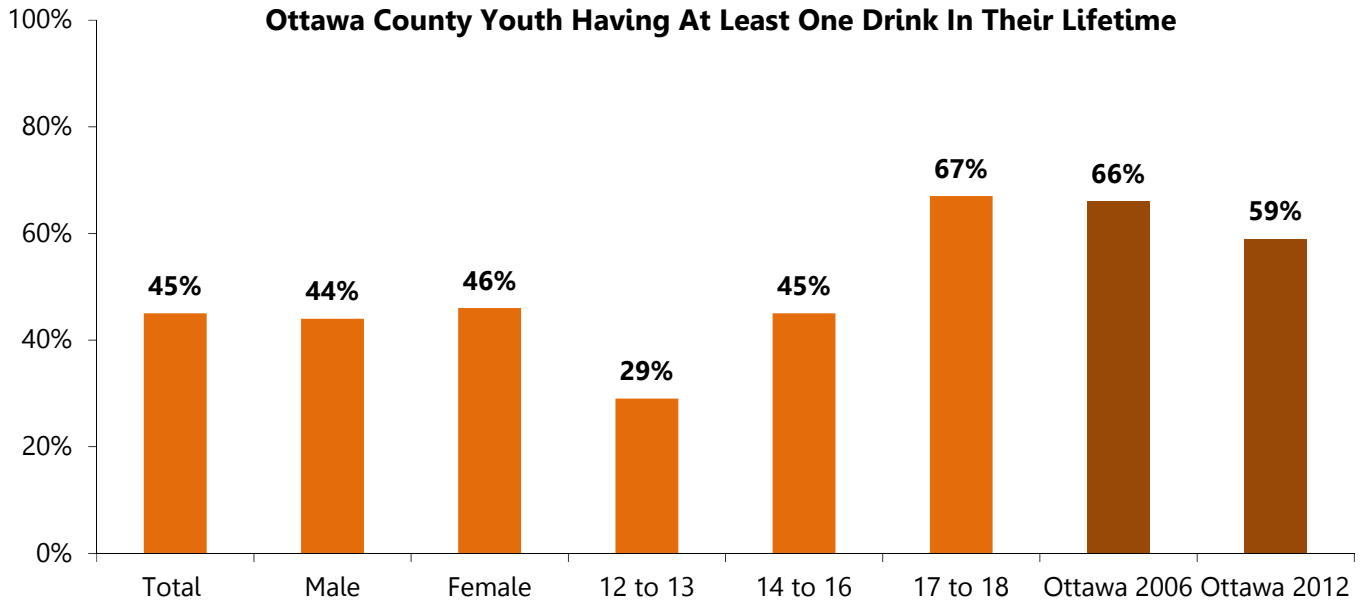
More than two-fifths (45%) of all Ottawa County youth had at least one drink of alcohol in their life. One-fifth (20%) of youth had at least one drink in the past 30 days, increasing to 36% of those ages 17 and older. In the past 30 days, 17% of youth had ridden in a car driven by someone who had been drinking alcohol.

Youth Alcohol Consumption

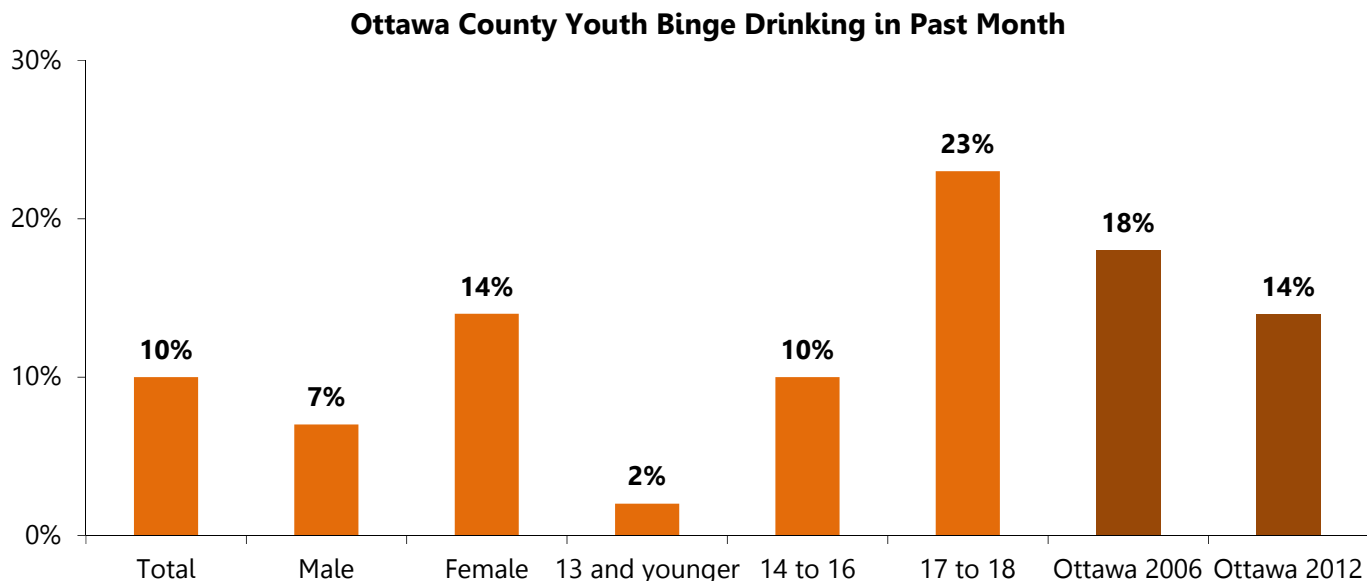
- In 2017, the health assessment results indicated that more than two-fifths (45%) of all Ottawa County youth had at least one drink of alcohol in their life, increasing to 67% of those ages 17 and older (2015 YRBS reports 63% for the U.S.).
- One-fifth (20%) of youth had at least one drink in the past 30 days, increasing to 36% 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, 10% had five or more alcoholic drinks on an occasion and were defined as binge drinkers, increasing to 23% 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 considered binge drinkers, increasing to 66% of females.
- Of all Ottawa County youth, 11% had drunk alcohol for the first time before the age of 13 (2013 YRBS reports 13% of Ohio youth drank alcohol for the first time before the age of 13 and 17% for the U.S. in 2015).
- More than one-quarter (29%) of Ottawa County youth who reported drinking at some time in their life had their first drink at 12 years old or younger, 29% took their first drink between the ages of 13 and 14, and 43% started drinking at 15 and older. The average age of onset was 13.5 years old.
- Ottawa County youth drinkers reported they got their alcohol from the following: someone gave it to them (43%) (2013 YRBS reports 38% for Ohio and 2015 YRBS reports 44% for the U.S.), a parent gave it to them (25%), someone older bought it for them (21%), took it from a store or family member (10%), an older friend or sibling bought it (7%), a friend's parent gave it to them (6%), bought it in a liquor store/convenience store/gas station (2%), bought it at a public event (2%), and obtained it some other way (19%).
- Youth drinkers reported drinking alcohol at the following places: in their home (52%); at a friend's home (48%), at another person's home (27%), in a public place (3%); at a public event (3%), and while riding in or driving a car or another vehicle (2%).
- Ottawa County youth binge drinkers reported they got their alcohol from the following: someone gave it to them (42%) (2013 YRBS reports 38% for Ohio and 2015 YRBS reports 44% for the U.S.), someone older bought it for them (36%), an older friend or sibling bought it (30%), a parent gave it to them (18%), a friend's parent gave it to them (9%), took it from a store or family member (3%), bought it in a liquor store/convenience store/gas station (3%), and obtained it some other way (15%).*
- Youth binge drinkers reported drinking alcohol at the following places: at a friend's home (58%), at another person's home (39%), in their home (36%), at a public event (3%), and while riding in or driving a car or another vehicle (3%).*
- In the past 30 days, 17% of youth had ridden in a car driven by someone who had been drinking alcohol (YRBS reported 17% for Ohio in 2013 and 20% for the U.S. in 2015).
- One percent (1%) of youth drivers had driven a car themselves after drinking alcohol (YRBS reported 4% for Ohio in 2013 and 8% for the U.S. in 2015).

**Please use data with caution as the number of reported binge drinkers (in the past 30 days) is small.*

The following graphs show the percentage of Ottawa County youth who had drunk in their lifetime and those who were current drinkers. Examples of how to interpret the information include: 45% of all Ottawa County youth had drunk at some time in their life, including 44% of males and 46% of females.



The following graph shows the percentage of Ottawa County youth who were binge drinkers. Examples of how to interpret the information include: 10% of youth binge drank in the past month, including 7% of males and 14% of females.



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

Youth Behaviors	Current Drinker	Non-Current Drinker
Participated in extracurricular activities	94%	91%
Had sexual intercourse in the past 12 months	75%	23%
Had been bullied in the past 12 months	58%	38%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	46%	18%
Had used marijuana in the past 30 days	26%	1%
Seriously considered attempting suicide in the past 12 months	25%	11%
Had smoked cigarettes in the past 30 days	12%	2%
Attempted suicide in the past 12 months	9%	5%

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

Youth Comparisons	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Ever tried alcohol	66%	59%	45%	52%	71%*	63%
Current drinker	32%	30%	20%	25%	30%	33%
Binge drinker (of all youth)	18%	14%	10%	14%	16%	18%
Drank for the first time before age 13 (of all youth)	38%	18%	11%	8%	13%	17%
Rode with someone who had been drinking alcohol in past month	24%	17%	17%	14%	17%	20%
Drove a car after drinking alcohol (of youth drivers)	7%	1%	1%	1%	4%	8%
Obtained the alcohol they drank by someone giving it to them	N/A	32%	42%	44%	38%	44%

*Comparative YRBS data for Ohio is 2011

Healthy People 2020 Substance Abuse (SA)

Objective	Ottawa 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	10% (6-12 Grade)	16% (9-12 Grade)	18% (9-12 Grade)	9%*
	14% (9-12 Grade)			

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

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 30-day consumption and binge drinking (5 or more drinks in a row in the last two weeks), and 12th grade daily alcohol consumption.
- 77% of 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-the-facts/research/statistics/underage-drinking-statistics>

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

Youth Health: Drug Use

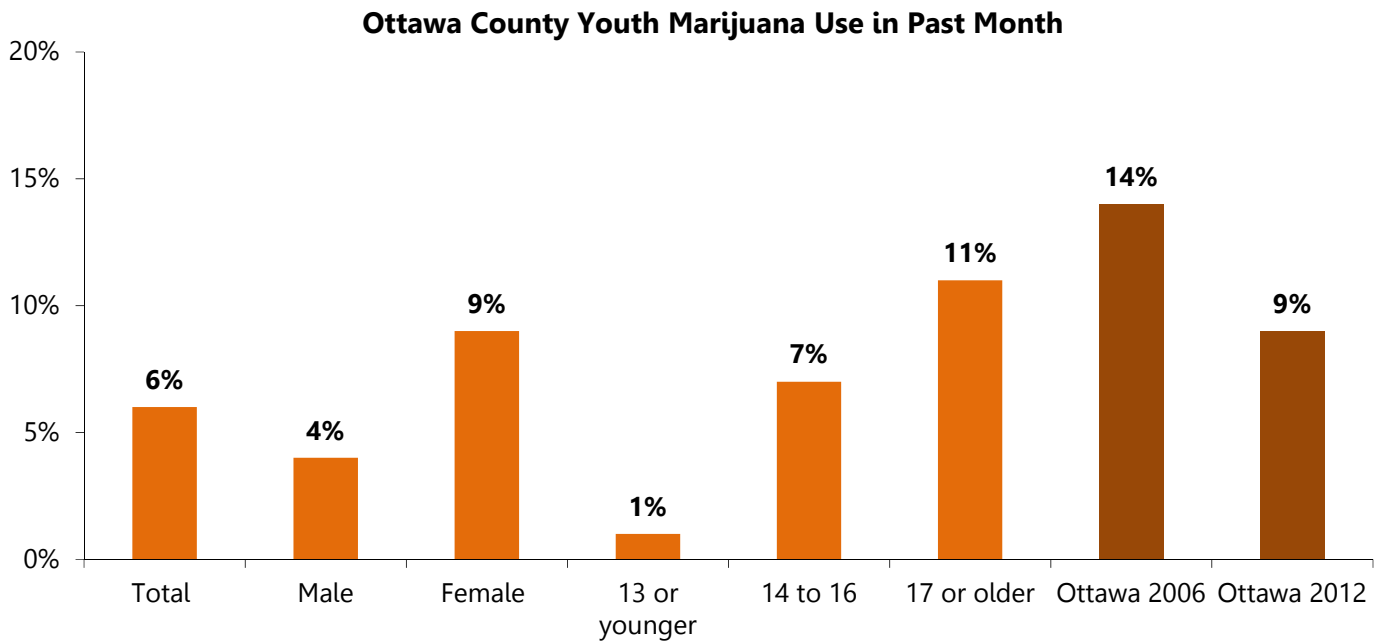
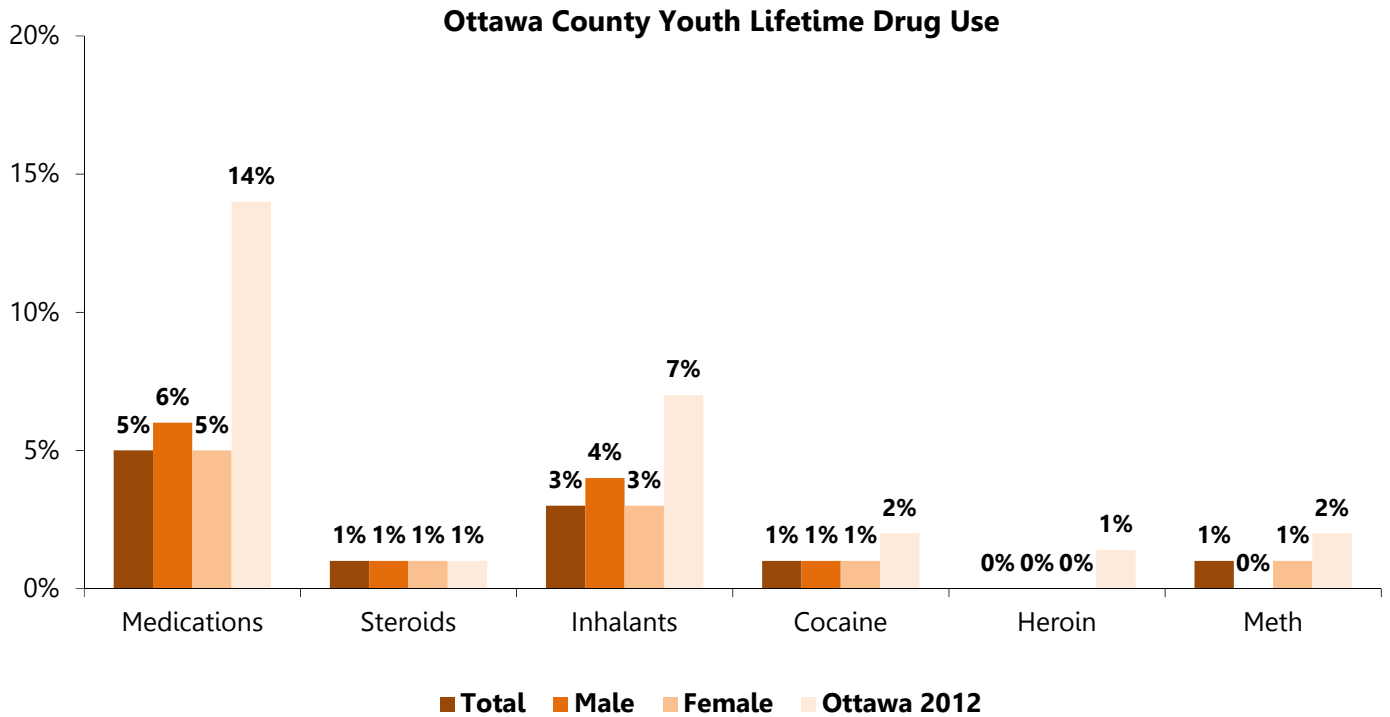
Key Findings

In 2017, 6% of Ottawa County youth had used marijuana at least once in the past 30 days, increasing to 11% of those ages 17 and older. 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, 6% of all Ottawa County youth had used marijuana at least once in the past 30 days, increasing to 11% of those over the age of 17. The 2013 YRBS found a prevalence of 21% for Ohio youth and a prevalence of 22% for U.S. youth in 2015.
- Ottawa County youth had tried the following in their life:
 - Inhalants (3%) (YRBS reports 9% for Ohio in 2013 and 7% for the U.S. in 2015)
 - Liquid THC (3%)
 - Misused over-the-counter medications (2%)
 - Misused cough syrup (2%)
 - Ecstasy/MDMA/Molly (2%) (YRBS reports 5% for the U.S. in 2015)
 - K2/spice (1%)
 - Posh/salvia/synthetic marijuana (1%)
 - Methamphetamines (1%) (YRBS reports 3% for U.S. in 2015)
 - Cocaine (1%) (YRBS reports 4% for Ohio in 2013 and 5% for U.S. in 2015)
- During the past 12 months, 6% of all Ottawa County youth reported that someone had offered, sold, or given them an illegal drug on school property (YRBS reports 20% for Ohio in 2013 and 22% for the U.S. in 2015).
- Five percent (5%) of Ottawa County youth used medications that were not prescribed for them or took more than prescribed to feel good or get high at some time in their lives, increasing to 8% of those over the age of 17.
- Youth reported having used the following substances during the school day while on school property:
 - E-cigarettes (1%)
 - Chewing tobacco (1%)
 - Illegal (1%)
 - Cigarettes (<1%)
 - Prescription drugs not prescribed to them (<1%)
- Youth reported their parents would disapprove of them doing the following:
 - Misusing prescription drugs (86%)
 - Smoking cigarettes (85%)
 - Using marijuana (82%)
 - Drinking alcohol (76%)
- Youth reported the following would keep them from seeking help if they were dealing with an alcohol, tobacco, or other drug problem: they can handle it themselves (16%), worried what others may think (8%), do not know where to go (6%), no time (4%), family would not support them in getting help (3%), paying for it (2%), transportation (1%), no treatment available (1%), and their friends would not support them in getting help (1%). Nearly three-quarters (72%) of youth reported that they would seek help.

The following graphs 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 had misused medication at some point in their life, including 6% of males and 5% of females.



Youth Comparisons	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Youth who used marijuana in the past month	14%	9%	6%	11%	21%	22%
Ever used methamphetamines	1%	2%	1%	0%	N/A	3%
Ever used cocaine	6%	2%	1%	1%	4%	5%
Ever used heroin	1%	1%	0%	0%	2%	2%
Ever used steroids	3%	1%	1%	1%	3%	4%
Ever used inhalants	13%	7%	3%	3%	9%	7%
Ever used ecstasy/MDMA/Molly	2%	2%	2%	2%	N/A	5%
Ever misused medications	15%	14%	5%	7%	N/A	N/A
Ever been offered, sold, or given an illegal drug by someone on school property in the past year	15%	13%	6%	7%	20%	22%

N/A- Not Available

Behaviors of Ottawa County Youth

Current Marijuana Use vs. Non-Current Marijuana Use

Youth Behavior	Current Marijuana User	Non-Current Marijuana User
Participated in extracurricular activities	90%	92%
Drank alcohol in the past 30 days	82%	15%
Smoked cigarettes in the past 30 days	27%	2%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	68%	20%
Ever misused medications	23%	4%
Seriously considered attempting suicide in the past 12 months	43%	12%
Attempted suicide in the past 12 months	24%	5%

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

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

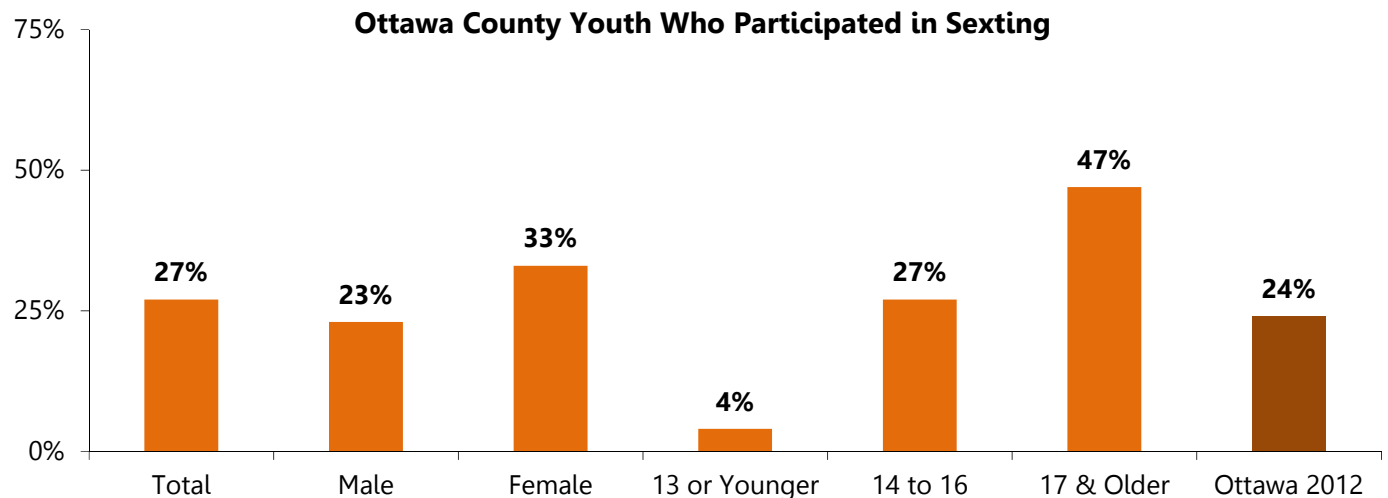
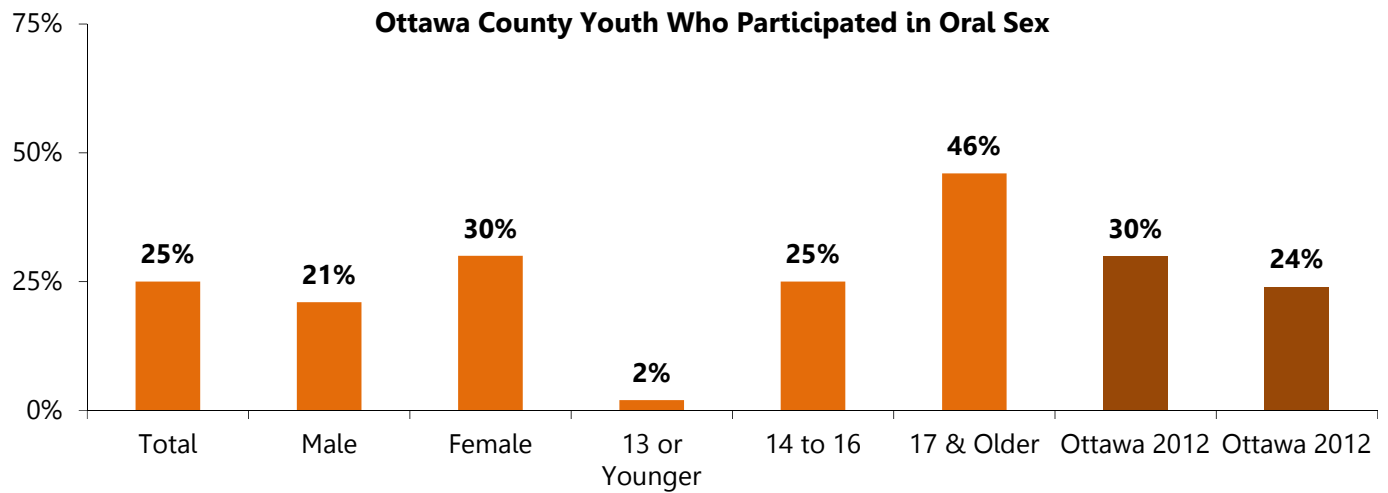
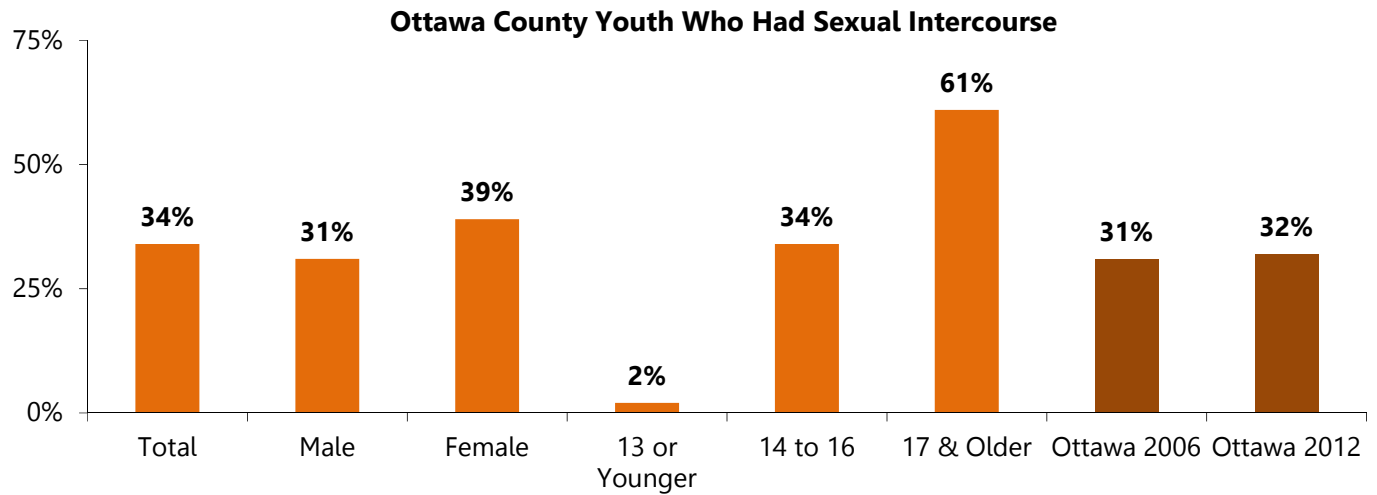
Key Findings

Over one-third (34%) of Ottawa County youth had sexual intercourse. One-quarter (25%) of youth had participated in oral sex and 8% had participated in anal sex. Of those who had sexual intercourse, 43% had multiple sexual partners. Note: Two Ottawa County schools did not ask sexual behavior questions.

Youth Sexual Behavior

- Over one-third (34%) of Ottawa County youth had sexual intercourse, increasing to 61% of those ages 17 and older (YRBS reports 43% for Ohio in 2013 and 41% for U.S. in 2015).
- One-quarter (25%) of youth had participated in oral sex, increasing to 46% of those ages 17 and older.
- One out of twelve (8%) youth had participated in anal sex, increasing to 18% of those ages 17 and older.
- More than one-quarter (27%) of youth had participated in sexting, increasing to 47% of those ages 17 and older.
- Thirty percent (30%) of youth had viewed pornography, increasing to 37% of males and 47% of those ages 17 and older.
- Of youth who had sexual intercourse in their lifetime, 57% had one sexual partner and 43% had multiple partners.
- Six percent (6%) of all Ottawa County youth had four or more sexual partners (YRBS reports 12% for Ohio in 2013 and 12% for the U.S. in 2015).
- Seventeen percent (17%) of sexually active youth had four or more partners (2013 YRBS reports 28% for Ohio).
- Of sexually active youth, 12% had done so by the age of 13. Another 52% had done so by 15 years of age. The average age of onset was 14.9 years old.
- Of all youth, 4% were sexually active before the age of 13 (YRBS reports 4% for Ohio in 2013 and 4% for the U.S. in 2015).
- Ottawa County youth had experienced the following: wanted to get pregnant (2%); had sex in exchange for something of value such as food, drugs, shelter or money (1%); been pregnant (1%); had a miscarriage (1%); had been treated for an STD (1%); and tried to get pregnant (<1%).
- Nearly three-fifths (59%) of sexually active youth used condoms to prevent pregnancy; 17% used birth control pills; 6% used the withdrawal method; 4% reported they were gay or lesbian; 3% used a shot, patch or birth control ring; and 3% used an IUD. However, 4% engaged regularly in intercourse without a reliable method of protection, and 3% reported they were unsure.
- Youth reported the following situations applied to them: they received a text or an e-mail with a revealing or sexual photo of someone (15%); they texted, e-mailed, or electronically posted a revealing or sexual photo of themselves (10%); and a revealing or sexual photo of them was texted, e-mailed, or posted electronically without their permission (2%).
- Youth were taught about pregnancy prevention, sexually transmitted diseases, HIV/AIDS, or the use of condoms by the following: school (80%), parents (64%), doctor (29%), friends (29%), internet or social media (26%), siblings (17%), church (4%), and somewhere else (2%). Six percent (6%) of youth reported they had not been taught about these subjects.

The following graphs show the percentage of Ottawa County youth who participated in sexual intercourse oral sex, and sexting. Examples of how to interpret the information include: 34% of all Ottawa County youth had sexual intercourse, including 31% of males and 39% of females.



Youth Comparisons	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Ever had sexual intercourse	31%	32%	34%	42%	43%	41%
Used a condom at last intercourse	76%	66%	59%	61%	51%	57%
Used birth control pills at last intercourse	26%	37%	17%	18%	24%	18%
Did not use any method to prevent pregnancy during last sexual intercourse	4%	15%	4%	4%	12%	14%
Had four or more sexual partners (of all youth)	8%	8%	6%	6%	12%	12%
Had sexual intercourse before age 13 (of all youth)	5%	2%	4%	5%	4%	4%

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.
- 43% did not use a condom the last time they had sex.
- 14% did not use any method to prevent pregnancy.
- 21% had drunk alcohol or used drugs before last sexual intercourse.
- 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 2015.
- Among young people (aged 13-24) diagnosed with HIV in 2015, 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 2015.

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

Youth Health: Mental Health

Key Findings

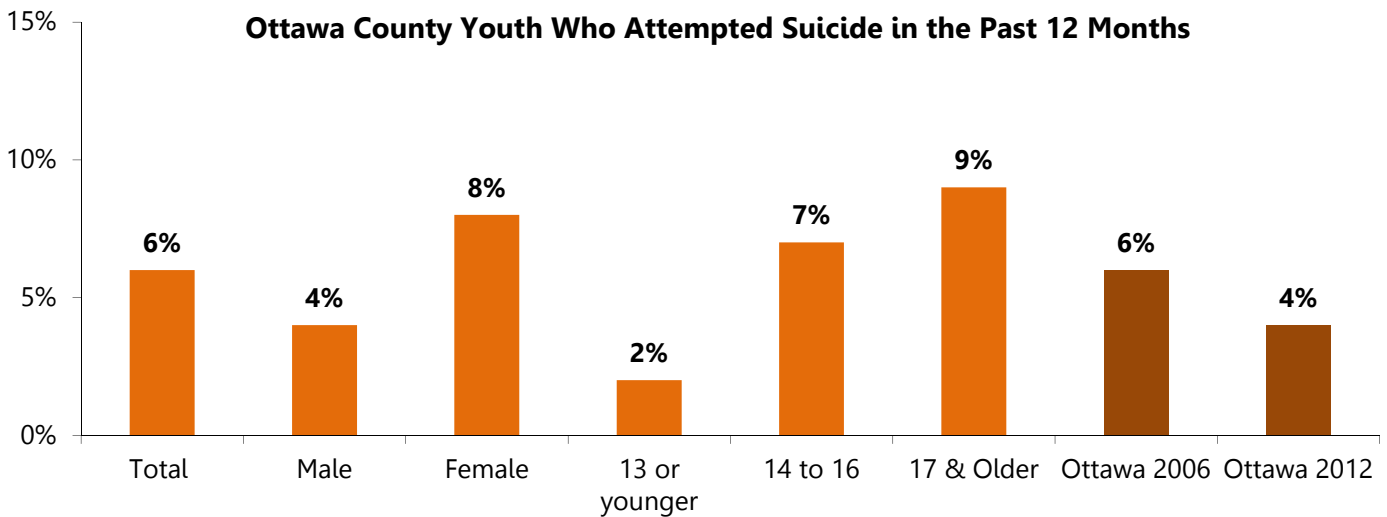
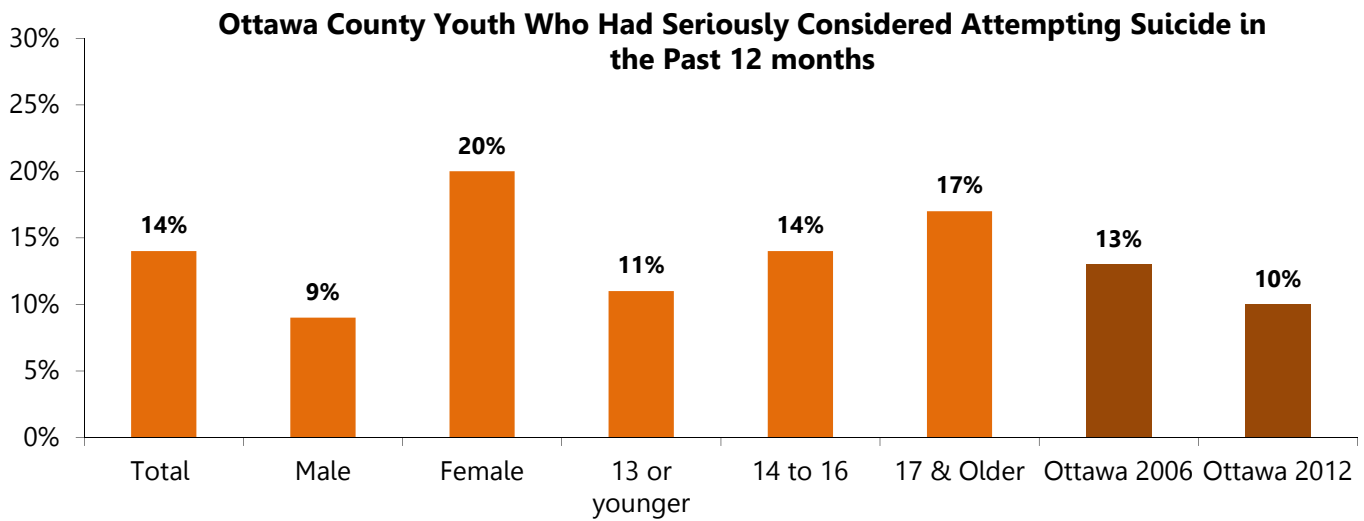
In 2017, the health assessment results indicated that 26% of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. Fourteen percent (14%) of Ottawa County youth had seriously considered attempting suicide in the past year, and 6% attempted suicide in the past year.

Youth Mental Health

- In 2017, over one-quarter (26%) of youth reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities, increasing to 40% of females (YRBS reported 26% for Ohio in 2013 and 30% for the U.S. in 2015).
- One out of seven (14%) youth reported they had seriously considered attempting suicide in the past 12 months, increasing to 20% of females. Fifteen percent (15%) 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.
- In the past year, 6% of Ottawa County youth had attempted suicide, increasing to 9% of youth ages 17 and older. Three percent (3%) 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.
- Youth reported the following caused them anxiety, stress or depression: academic success (49%), fighting with friends (35%), self-image (33%), fighting at home (33%), sports (32%), death of close family member or friend (31%), stress at home (28%), peer pressure (24%), dating relationship (24%), being bullied (23%), breakup (23%), parent divorce/separation (15%), poverty/no money (14%), caring for younger siblings (7%), sick parent (6%), alcohol or drug use in the home (6%), sexual orientation (4%), not having enough to eat (3%), not having a place to live (2%), and other (15%). Sixteen percent (16%) of youth reported they did not have anxiety, stress or depression.
- Youth reported the following ways of dealing with anxiety, stress, or depression: sleeping (52%); hobbies (38%); texting someone (35%); exercising (30%); talking to a peer (24%); eating (24%); talking to someone in their family (22%); using social media (15%); breaking something (12%); praying/reading the Bible (8%); writing in a journal (8%); shopping (8%); and drinking alcohol, smoking/using tobacco, or using illegal drugs (4%). Sixteen percent (16%) 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 (53%), parents (32%), girlfriend or boyfriend (26%), brother/sister (15%), an adult relative (9%), caring adults (10%), school counselor (7%), adult friend (6%), professional counselor (4%), teacher (4%), coach (4%), youth minister (3%), pastor/priest (1%). Teen Line or First Call for Help (2%); and other (8%). More than one-quarter (27%) of youth reported they had no one to talk to when they had feelings of depression or suicide.
- Almost half (48%) 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 (18%), did not know where to go (13%), no time (12%), cost (8%), their family would not support them (6%), they were already in treatment (5%), transportation (5%), their friends would not support them (4%), and no treatment available (1%).
- Twelve percent (12%) of youth suffered a blow or jolt to their head while playing with a sports team which caused them to get “knocked out,” have memory problems, experience double or blurry vision, have headaches or “pressure” in the head, and/or cause nausea or vomiting.

Youth Comparisons	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa County 2017 (9 th -12 th)	Ohio 2014 (9 th -12 th)	U.S. 2014 (9 th -12 th)
Youth who felt sad or hopeless almost every day for 2 or more weeks in a row	21%	24%	26%	27%	26%	30%
Youth who had seriously considered attempting suicide in the past year	13%	10%	14%	15%	14%	18%
Youth who had attempted suicide in the past year	6%	4%	6%	7%	6%	9%

The following graphs show Ottawa County youth who had seriously considered attempting suicide in the past year and those who attempted suicide in the past year. Examples of how to interpret the information includes: 14% of all Ottawa County youth seriously considered attempting suicide, including 9% of males and 20% of females.



**Healthy People 2020
Mental Health and Mental Disorders (MHMD)**

Objective	Ottawa County 2017	Ohio 2013	U.S. 2015	Healthy People 2020 Target
HMD-2 Reduce suicide attempts by adolescents†	7% (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.*

*†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, 2015 YRBS, CDC/NCHHSTP, 2017 Ottawa County Health Assessment*

Behaviors of Ottawa 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	73%	36%
Experienced 3 or more adverse childhood experiences (ACEs) in their lifetime	67%	15%
Had at least one drink of alcohol in the past 30 days	35%	17%
Smoked cigarettes in the past 30 days	15%	2%
Used marijuana in the past 30 days	19%	4%

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

Youth Suicide

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

Risk Factors Include:

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

Source: CDC Injury Center: Violence Prevention; Suicide Prevention; Youth Suicide, 2015

Youth Health: Social Determinants of Health

Key Findings

Nearly three-quarters (74%) of youth visited a doctor for a routine checkup in the past year. Twenty-three percent (23%) of youth experienced three or more adverse childhood experiences (ACEs).

Personal Health

- Nearly three-quarters (74%) of Ottawa County youth visited a doctor for a routine checkup in the past year.
- Youth last saw a dentist for a check-up, exam, teeth cleaning, or other dental work less than a year ago (75%), (2013 YRBS reported 75% for Ohio), 1 to 2 years ago (12%), more than 2 years ago (5%), never (2%), and do not know (6%).

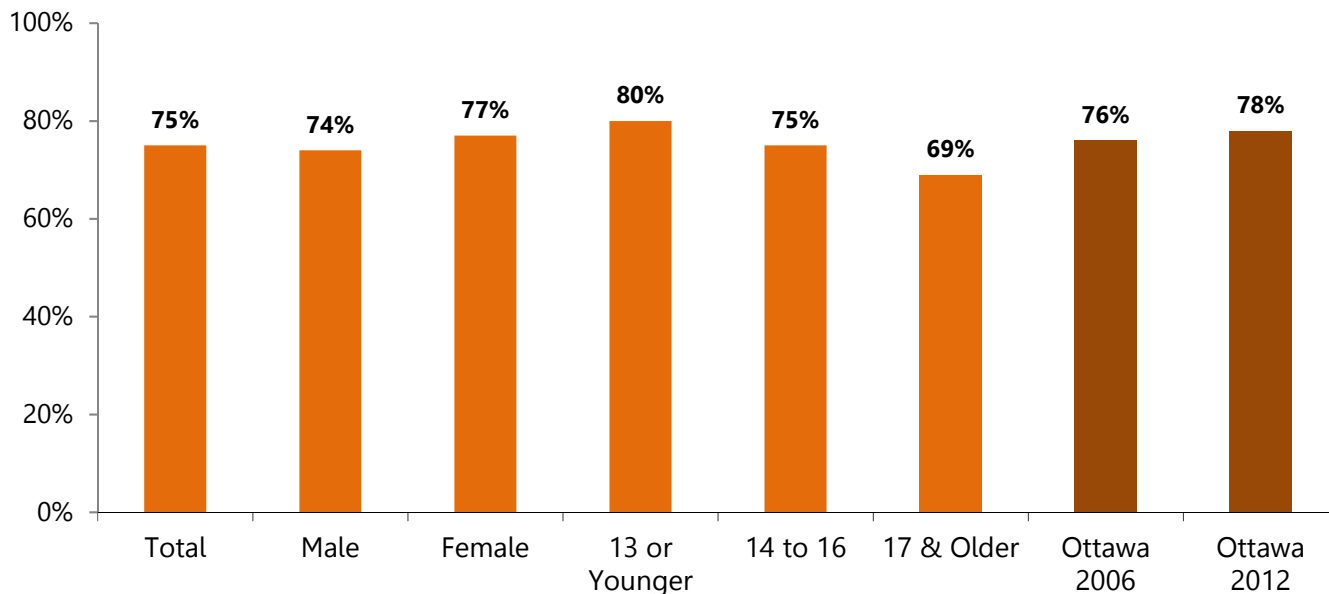
Personal Safety

- Ottawa County youth drivers did the following while driving in the past month: wore a seatbelt (90%), ate (44%), drove while tired or fatigued (31%), talked on their cell phone (30%), texted (28%), used cell phone for other things (25%), misused prescription drugs (6%), read (2%) and applied makeup (1%).
- Nearly 9 out of 10 (89%) 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 (63%)
 - They knew all their “friends” (56%)
 - Their parents had their password (23%)
 - They knew all the people they play online (25%)
 - Their friends had their password (12%)
 - They shared personal information (7%)
 - They had been asked to meet someone they met online (6%)
 - They were bullied because of their accounts (6%)
 - Their parents did not know they had an account (3%)
 - They had participated in sexual activity with someone they met online (2%)
- Over half (63%) of the youth who had a Twitter, Instagram, Facebook, online gaming, or other social network account believed that sharing information online is dangerous.

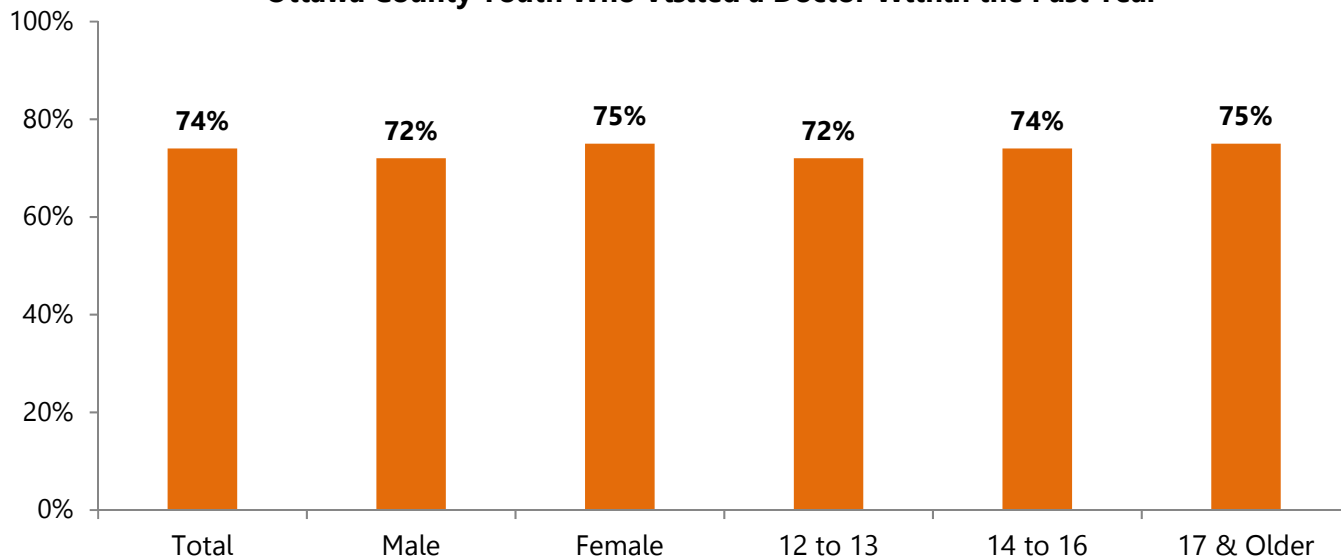
Youth Comparisons	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa County 2017 (9 th -12 th)	Ohio 2013 (9 th -12 th)	U.S. 2015 (9 th -12 th)
Visited a dentist for a check-up within the past year	76%	78%	75%	72%	75%	74%

The following graph provides information about the frequency of Ottawa County youth dental visits and routine doctor visits. Examples of how to interpret the information on the graphs include: 75% of all Ottawa County youth had been to the dentist in the past year, including 77% of females and 69% of those 17 and older.

Ottawa County Youth Visiting a Dentist in the Past Year



Ottawa County Youth Who Visited a Doctor Within the Past Year



Economic Stability

- One out of twelve youth (8%) reported they went to bed hungry because their family did not have enough money for food at least one night per week.

Social and Community Context

- Ottawa County youth lived with the following: both parents (56%), mother only (17%), mother and step-father (14%), father and step-mother (7%), father only (6%), grandparents (5%), mother and partner (3%), father and partner (3%), another relative (3%), guardians/foster parents (1%), and on their own with friends (1%).
- Youth indicated that their parent or guardian regularly talked to them about school (73%); asked about their homework (73%); made the family eat a meal together (63%); went to meetings or events at their school (60%); helped them with school work (50%); talked to them about healthy choices (46%); talked to them about social media (39%); and talked to them about drugs, alcohol and sex (33%). One out of eleven (9%) youth reported that their parent or guardian did not talk to them about any of these topics.
- Youth participated in the following extra-curricular activities: sports or intramural program (60%), exercised outside of school (47%), school club or social organization (30%), church or religious organization (15%), church youth group (13%), part-time job (26%), some other organized activity (13%), take care of siblings after school (18%), babysit for other kids (18%), volunteer in the community (12%), and take care of parents or grandparents (5%). One out of eleven (9%) 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 (27%), they did not fit in or feel comfortable (10%), they had a job (9%), transportation (7%), they could not afford it (6%), they had to watch younger siblings (5%), the activity did not exist or was not offered (3%), and their parents would not take them (2%).
- More than half (54%) of youth reported the following adverse childhood experiences (ACEs): parents became separated or were divorced (33%); parents or adults in home swore at them, insulted them or put them down (28%); family did not look out for each other, feel close to each other, or support each other (20%); 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%); lived with someone who was depressed, mentally ill or suicidal (10%); parents were not married (10%); lived with someone who used illegal drugs or misused prescription drugs (10%); parents or adults in the home abused each other (6%); parents or adults in home abused them (5%); 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 (3%); an adult or someone 5 years older than them made them touch them sexually (1%); and an adult or someone 5 years older than them forced them to have sex (1%).
- Nearly one-quarter (23%) of youth had three or more ACEs.

Behaviors of Ottawa County Youth

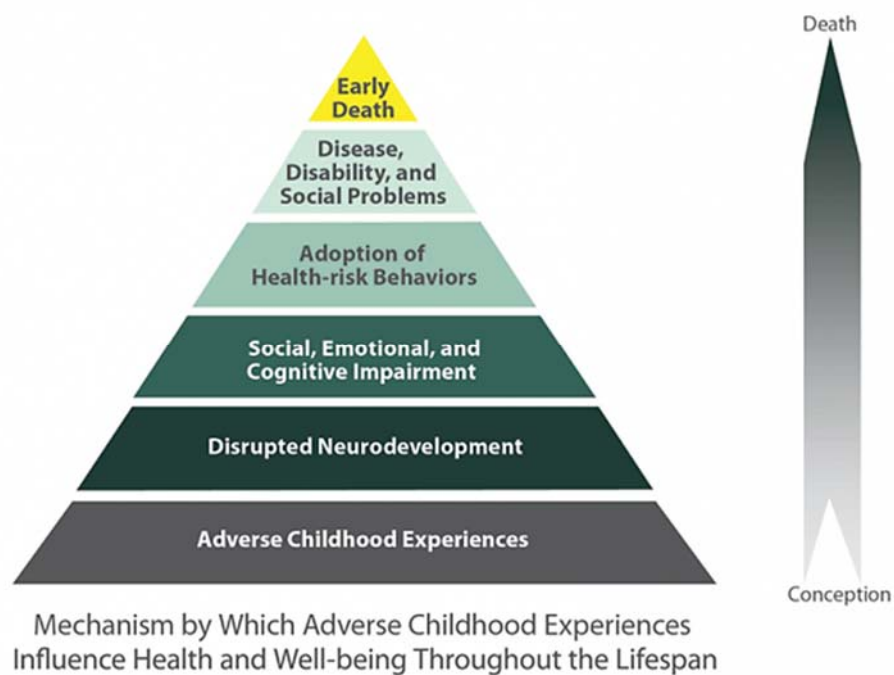
Experienced 3 or More ACEs vs. Did Not Experience Any ACEs

Youth Behaviors	Experienced 3 or More ACEs	Did Not Experience Any ACEs
Participated in extracurricular activities	89%	93%
Had had at least one drink of alcohol in the past 30 days	39%	14%
Seriously considered attempting suicide in the past 12 months	40%	3%
Used marijuana in the past 30 days	19%	1%
Had smoked cigarettes in the past 30 days	11%	1%
Attempted suicide in the past 12 months	17%	3%

"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
 - Fetal death
 - Illicit drug use
 - Liver disease
 - STD's
 - Multiple sexual partners
 - Alcoholism and alcohol abuse
 - COPD
 - Unintended pregnancies
 - Suicide attempts
 - Early initiation of smoking
 - Risk for intimate partner violence
- Given the high prevalence of ACEs, additional efforts are needed at the state and local level to reduce and prevent childhood maltreatment and associated family dysfunction in the US.



Source: CDC, *Adverse Childhood Experiences*, June 2016

Youth Health: Violence

Key Findings

Eight percent (8%) of Ottawa County youth carried a weapon (such as a gun, knife or club) in the past month. Just over one-fifth (22%) of youth had been involved in a physical fight, increasing to 32% of males. Over two-fifths (41%) of youth had been bullied in the past year.

Violence-Related Behaviors

- About one out of twelve (8%) of youth carried a weapon (such as a gun, knife or club) in the past 30 days, increasing to 15% 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.
- Six percent (6%) 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, 22% of youth had been involved in a physical fight, increasing to 32% 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, 63% had been in a fight on more than one occasion.
- In the past year, 8% 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, 3% of youth reported a parent or caregiver had hit, slapped or physically hurt them on purpose.
- One-fifth (20%) of youth purposefully hurt themselves by cutting, scratching, burning, hitting or biting, increasing to 29% of females.
- Four percent (4%) of youth reported someone touched them in an unsafe sexual way.
- Five percent (5%) of youth had been forced to participate in a sexual activity, increasing to 8% of those over the age of 17.

Bullying

- Just over two-fifths (41%) of youth had been bullied in the past year. The following types of bullying were reported:
 - 32% of youth were verbally bullied (teased, taunted or called harmful names)
 - 25% of youth were indirectly bullied (spread mean rumors about them or kept them out of a “group”)
 - 11% of youth were cyber bullied (teased, taunted or threatened by e-mail or cell phone) (YRBS reported 16% for Ohio in 2013 and 16% for the U.S. in 2015)
 - 6% of youth were physically bullied (were hit, kicked, punched or people took their belongings)
 - 2% 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)

- Nearly one-third (30%) of youth reported being bullied on school property in the past year.
- Thirty-seven percent (37%) of youth reported being a victim of teasing or name calling for the following reasons: weight, size, or physical appearance (30%); someone thought they were gay, lesbian or bisexual (10%); race or ethnic background (7%); and gender (3%).

Types of Bullying Ottawa County Youth Experienced in Past Year

Youth Behaviors	Total	Male	Female	13 and younger	14-16 years old	17 and older
Verbally Bullied	32%	24%	41%	41%	28%	32%
Indirectly Bullied	25%	14%	38%	23%	26%	27%
Cyber Bullied	11%	7%	16%	11%	10%	15%
Physically Bullied	6%	8%	5%	14%	4%	3%
Sexually Bullied	2%	0%	5%	1%	3%	3%

Behaviors of Ottawa County Youth *Bullied vs. Non-Bullied*

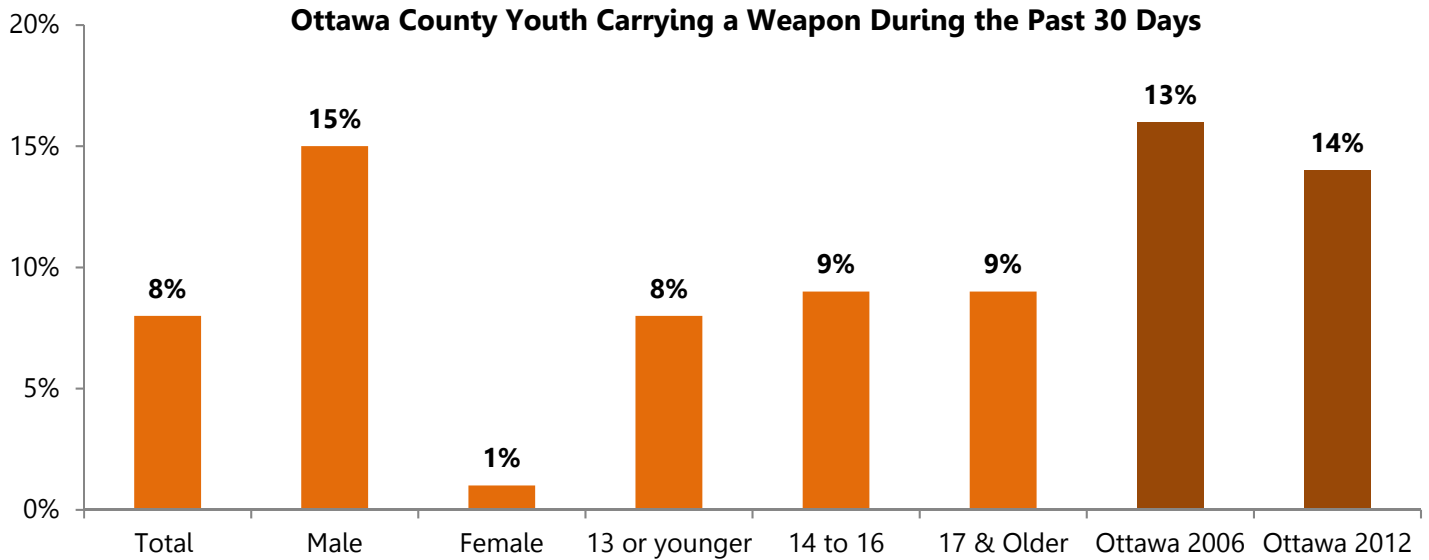
Youth Behaviors	Bullied	Non-Bullied
Participated in extracurricular activities	88%	94%
Felt sad or hopeless for two or more weeks in a row	43%	13%
Overweight or Obese	31%	11%
Had drank alcohol in the past 30 days	28%	15%
Seriously considered attempting suicide in the past 12 months	25%	6%
Had used marijuana in the past 30 days	12%	3%
Attempted suicide in the past 12 months	11%	2%
Had smoked cigarettes in the past 30 days	7%	2%

Healthy People 2020 Injury and Violence Prevention (IVP)

Objective	Ottawa County 2017	Ohio 2013	U.S. 2015	Healthy People 2020 Target
IVP-35 Reduce bullying among adolescents	41% (6-12 Grade) 40% (9-12 Grade)	21% (9-12 Grade)	20% (9-12 Grade)	18%*

*Note: The Healthy People 2020 target is for youth in grades 9-12 who reported they were bullied on school property in the past year.
Sources: Healthy People 2020 Objectives, 2015 YRBS, CDC/NCHHSTP, 2017 Ottawa County Health Assessment

The following graph shows Ottawa County youth who carried a weapon in the past 30 days. The graph shows 8% of all youth had carried a weapon in the past 30 days, including 15% of males and 1% of females.



Youth Comparisons	Ottawa County 2006 (6 th -12 th)	Ottawa County 2012 (6 th -12 th)	Ottawa County 2017 (6 th -12 th)	Ottawa 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	16%	14%	8%	8%	N/A	4%
Carried a weapon on school property in past month	3%	1%	1%	1%	N/A	4%
Been in a physical fight in past year	30%	26%	22%	19%	6%	8%
Threatened or injured with a weapon on school property in past year	N/A	7%	6%	4%	N/A	6%
Did not go to school because felt unsafe	3%	6%	3%	3%	5%	6%
Electronically/cyber bullied in past year	N/A	15%	11%	10%	15%	16%
Bullied in past year	N/A	50%	41%	40%	N/A	N/A
Bullied on school property in past year	N/A	34%	30%	28%	21%	20%
Hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in past year	7%	6%	2%	2%	N/A	10%
Ever physically forced to have sexual intercourse	5%	3%	2%	2%	10%	11%

N/A – Not available

Appendix I: Health Assessment Information Sources

Source	Data Used	Website
American Association of Suicidology	<ul style="list-style-type: none"> • Suicide Facts 	http://www.suicidology.org/Portals/14/docs/Resources/FactSheets/2015/2015datapgsv1.pdf?ver=2017-01-02-220151-870
American Cancer Society, Cancer Facts and Figures 2015. Atlanta: ACS, 2015	<ul style="list-style-type: none"> • 2015 Cancer Facts, Figures, and Estimates • Nutrition Recommendations 	www.cancer.org
American Cancer Society, Electronic Cigarette Use Doubles Among Teenagers, 2013	<ul style="list-style-type: none"> • Electronic Cigarettes and Teenagers in the U.S. 	https://www.cancer.org/latest-news/electronic-cigarette-use-doubles-among-teenagers
American College of Allergy, Asthma & Immunology	<ul style="list-style-type: none"> • Asthma Facts 	http://acaai.org/news/facts-statistics/asthma
American Dental Association	<ul style="list-style-type: none"> • Oral Health in Older Adults 	http://www.ada.org/en/~media/ADA/Public%20Programs/Files/JADA_Oral%20health%20concerns%20for%20older%20adults
American Diabetes Association	<ul style="list-style-type: none"> • Type 1 and 2 Diabetes • Risk Factors for Diabetes • Diabetes Facts 	www.diabetes.org
American Heart Association, 2013	<ul style="list-style-type: none"> • Stroke Warning Signs and Symptoms • Smoke-free Living: Benefits & Milestones 	www.heart.org/HEARTORG/
<i>Arthritis at a Glance, 2012, Centers for Disease Control & Prevention, Morbidity and Mortality Weekly Report 2010; 59(39):999-1003 & 59(39):1261-1265</i>	<ul style="list-style-type: none"> • Arthritis Statistics 	www.cdc.gov/chronicdisease/resources/publications/AAG/arthritis.htm
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	<ul style="list-style-type: none"> • 2009 - 2014 Adult Ohio and U.S. Correlating Statistics 	www.cdc.gov
Brady Campaign to Prevent Gun Violence	<ul style="list-style-type: none"> • Victims of Gun Violence 	http://www.bradycampaign.org/sites/default/files/Brady-Campaign-5Year-Gun-Deaths-Injuries-Stats_June2017.pdf

Source	Data Used	Website
Center for Disease Control and Prevention (CDC)	<ul style="list-style-type: none"> • Adverse Childhood Experiences (ACE) • Asthma Attacks • Binge Drinking Among Women • Caffeinated Alcohol Beverages • Cancer and Men • Distracted Driving • Electronic Cigarettes and Teenagers • Health Care Access Among the Employed and Unemployed • Health Care Access and Utilization • Healthy Eyes • HIV in the U.S. • Heart Health and Stroke Facts • Obesity Facts • Oral Health • Skin Cancer Prevention • Smoking facts • Tips for Parents • Yearly Flu Shots 	www.cdc.gov
Center for Disease Control and Prevention; National Center for Injury Prevention and Control	<ul style="list-style-type: none"> • Concussion Information 	www.cdc.gov/HEADSUP
CDC, Adolescent and School Health, 2013	<ul style="list-style-type: none"> • Youth Physical Activity Facts 	www.cdc.gov/healthyyouth/physicalactivity/facts.htm
CDC, Arthritis	<ul style="list-style-type: none"> • Key Public Health Messages 	www.cdc.gov/arthritis/basics/key.htm
CDC, Injury Center: Violence Prevention 2014	<ul style="list-style-type: none"> • Suicide Prevention • Youth Suicide 	www.cdc.gov/violenceprevention/pub
CDC, National Center for Health Statistics	<ul style="list-style-type: none"> • Leading Causes of Death in U.S. • Men's Health • U.S. Female Fertility Rate • U.S. Births to Unwed Mothers • U.S. Low Birth Weight, Live Births 	www.cdc.gov/nchs/fastats/
CDC, Physical Activity for Everyone	<ul style="list-style-type: none"> • Physical Activity Recommendations 	www.cdc.gov/physicalactivity/everyone/guidelines/adults.html
CDC, Press Release, 2013	<ul style="list-style-type: none"> • Electronic Cigarettes and Teenagers in the U.S. 	www.cdc.gov/media/releases/2013/p0905-ecigarette-use.html
CDC, Sexually Transmitted Diseases Surveillance, 2014	<ul style="list-style-type: none"> • U.S. Chlamydia and Gonorrhea Rates • STD's in Adolescents and Young Adults • U.S. STD Surveillance Profile 	www.cdc.gov/std/stats/
CDC, Vaccine Safety, Human Papillomavirus (HPV)	<ul style="list-style-type: none"> • Human Papillomavirus 	www.cdc.gov/vaccinesafety/vaccines/HPV/Index.html

Source	Data Used	Website
CDC, Wonder	<ul style="list-style-type: none"> About Underlying Cause of Death, 1999-2014 Ottawa County and Ohio Leading Causes of Death Ottawa County and Ohio Mortality Statistics 	http://wonder.cdc.gov/ucd-icd10.html
Community Commons	<ul style="list-style-type: none"> Cigarette Expenditures Alcohol Beverage Expenditures Beer, Wine and Liquor Stores Bars and Drinking Establishments 	www.communitycommons.org/
Health Indicators Warehouse	<ul style="list-style-type: none"> Age-Adjusted Mortality Rates for Motor Vehicle Accidents Heart Disease and Stroke Mortality Rates 	www.healthindicators.gov/Indicators/Selection
Healthy People 2020: U.S. Department of Health & Human Services	<ul style="list-style-type: none"> All Healthy People 2020 Target Data Points Some U.S. Baseline Statistics Predictors of Access to Health Care 	www.healthypeople.gov/2020/topic/objectives2020
National Institute on Drug Abuse	<ul style="list-style-type: none"> Drug Facts: Heroin Drug Facts: Drugged Driving 	www.drugabuse.gov
Office of Health Transformation	<ul style="list-style-type: none"> Ohio Medicaid Assessment Survey 	http://healthtransformation.ohio.gov/LinkClick.aspx?fileticket=oid6Wo-y0gs%3D&tabid=160
Office of Criminal Justice Services	<ul style="list-style-type: none"> Crime Statistics and Crime Reports 	www.ocjs.ohio.gov/crime_stats_reports.stm
Ohio Department of Health, Ohio Oral Health Surveillance System	<ul style="list-style-type: none"> Ottawa County Dental Care Resources 	http://publicapps.odh.ohio.gov/oralhealth/default.aspx
Ohio Department of Job & Family Services	<ul style="list-style-type: none"> Ottawa County and Ohio Medicaid Statistics 	http://jfs.ohio.gov/county/cntypro/pdf11/Ottawa.pdf
Ohio Department of Public Safety	<ul style="list-style-type: none"> 2015 Ottawa County and Ohio Crash Facts OSHP Computer-Aided Dispatch (CAD) System 	http://www.publicsafety.ohio.gov/crashes.stm
Ohio Mental Health and Addiction Services	<ul style="list-style-type: none"> Opiate and Pain Reliever Doses Per Capita Opiate and Pain Reliever Doses Per Patient 	http://mha.ohio.gov/Portals/0/assets/Research/Maps/Ohio_OARRS_Opioids_2012_v2.pdf
Ohio Department of Health, Ohio Oral Health Surveillance System	<ul style="list-style-type: none"> Ottawa County Dental Care Resources 	http://publicapps.odh.ohio.gov/oralhealth/default.aspx

Source	Data Used	Website
Ohio Department of Job & Family Services	<ul style="list-style-type: none"> Ottawa County and Ohio Medicaid Statistics 	http://jfs.ohio.gov/county/cntypro/pdf11/Ottawa.pdf
Ohio Department of Public Safety	<ul style="list-style-type: none"> 2015 Ottawa County and Ohio Crash Facts OSHP Computer-Aided Dispatch (CAD) System 	https://ext.dps.state.oh.us/crashstatistics/CrashReports.aspx
Ohio Mental Health and Addiction Services	<ul style="list-style-type: none"> Opiate and Pain Reliever Doses Per Capita Opiate and Pain Reliever Doses Per Patient 	http://mha.ohio.gov/Portals/0/assets/Research/Maps/Ohio_OARRS_Opioids_2012_v2.pdf
Ohio State Highway Patrol	<ul style="list-style-type: none"> Compliant Data Electronic Crash Records Felony Cases and Drug Arrests Ottawa County Activity Statistics 	http://statepatrol.ohio.gov/
Philadelphia Department of Public Health	<ul style="list-style-type: none"> Electronic Cigarette Factsheet 	www.smokefreephilly.org/smokfree_philly/assets/File/Electronic%20Cigarette%20Fact%20Sheet_2_27_14.pdf
Foundation for Advancing Alcohol Responsibility	<ul style="list-style-type: none"> Teen Binge Drinking: On the Decline 	https://responsibility.org/blog/underage-drinking-hits-record-low-levels/
U. S. Department of Commerce, Census Bureau; Bureau of Economic Analysis	<ul style="list-style-type: none"> American Community Survey 5 year estimate, 2014 Ohio and Ottawa County 2015 Census Demographic Information Ohio and U.S. Health Insurance Sources Small Area Income and Poverty Estimates Federal Poverty Thresholds 	www.census.gov
Youth Risk Behavior Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, Centers for Disease Control	<ul style="list-style-type: none"> 2009 - 2015 youth Ohio and U.S. correlating statistics 	http://apps.nccd.cdc.gov/YouthOnline/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 Mortality Rates	Death rate per 100,000 adjusted for the age distribution of the population.
Adult Binge Drinking	Consumption 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.
BRFSS	Behavior 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
FPL	Federal Poverty Line
FY	Fiscal Year
HCNO	Hospital Council of Northwest Ohio
HDS	Heart Disease and Stroke , Topic of Healthy People 2020 objectives
HP 2020	Healthy People 2020 , a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.
Health Indicator	A measure of the health of people in a community, such as cancer mortality rates, rates of obesity, or incidence of cigarette smoking.
High Blood Cholesterol	240 mg/dL and above
High Blood Pressure	Systolic ≥ 140 and Diastolic ≥ 90
IID	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

YPLL/65

Years of Potential Life Lost before age 65. Indicator of premature death.

**Youth BMI
Classifications**

Underweight is defined as BMI-for-age \leq 5th percentile

Overweight is defined as BMI-for-age 85th percentile to $<$ 95th percentile.

Obese is defined as \geq 95th percentile.

YRBS

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

Appendix III: Methods for Weighting the 2017 Ottawa 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 2016 Ottawa County survey, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Ottawa 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 Ottawa 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 2016 Ottawa County Survey and the 2015 Census estimates.

2017 Ottawa Survey			2015 Census Estimates		Weight
<u>Sex</u>	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	230	45.81673	20,432	49.63802	1.083404
Female	272	54.18327	20,730	50.36198	0.929475

In this example, it shows that there was a slightly larger portion of females in the sample compared to the actual portion in Ottawa County. The weighting for males was calculated by taking the percent of males in Ottawa County (based on Census information) (49.63802%) and dividing that by the percent found in the 2016 Ottawa County sample (45.81673%) [$49.63802 / 45.81673 =$ weighting of 1.083404 for males]. The same was done for females [$50.36198 / 54.18327 =$ weighting of 0.929475 for females]. Thus males' responses are weighted heavier by a factor of 1.083404 and females' responses weighted less by a factor of 0.929475.

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 1.368314 [0.929475 (weight for females) \times 0.98464 (weight for White) \times 1.48784 (weight for age 35-44) \times 1.00488 (weight for income \$50-\$75k)]. Thus, each individual in the 2016 Ottawa 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	Ottawa Sample	%	2015 Census Estimate*	%	Weighting Value
Sex:					
Male	230	45.81673	20,432	49.63802	1.083404
Female	272	54.18327	20,730	50.36198	0.929475
Age:					
20-24	1	0.19011	1,899	5.90008	31.03442
25-34	19	3.61217	3,905	12.13260	3.35882
35-44	49	9.31559	4,461	13.86006	1.48784
45-54	78	14.82890	6,211	19.29721	1.30132
55-59	64	12.16730	3,673	11.41179	0.93791
60-64	82	15.58935	3,318	10.30883	0.66127
65+	227	43.15589	8,719	27.08942	0.62771
Race:					
White	490	94.04990	38,118	92.60483	0.98464
Non-White	31	5.95010	3,044	7.39517	1.24287
Household Income:					
Less than \$10,000	15	3.12500	712	4.10753	1.31441
\$10k-\$15k	22	4.58333	844	4.86904	1.06234
\$15k-\$25k	67	13.95833	1,728	9.96885	0.71419
\$25k-\$35k	62	12.91667	1,964	11.33033	0.87719
\$35k-\$50	74	15.41667	2,773	15.99746	1.03767
\$50k-\$75k	97	20.20833	3,520	20.30691	1.00488
\$75k-\$100k	55	11.45833	2,138	12.33414	1.07643
\$100k-\$150k	53	11.04167	2,381	13.73601	1.24402
\$150k or more	35	7.29167	1,274	7.34972	1.00796

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

* Ottawa County population figures taken from the 2015 Census estimates.

Appendix IV: School Participation

The following schools were randomly chosen and agreed to participate in the 2016 Ottawa County Health Assessment:

Benton-Carroll-Salem Local Schools

Oak Harbor Middle School
Oak Harbor High School

Genoa Area Local Schools

Genoa Area Middle School
Genoa Area High School

Port Clinton City Schools

Port Clinton Middle School
Port Clinton High School

Appendix V: Ottawa County Sample Demographic Profile*

Variable	2016 Survey Sample	Ottawa County Census 2011-2015 (5 year estimate)	Ohio Census 2015
Age			
20-29	3.8%	9.2%	13.3%
30-39	14.2%	1.0%	12.2%
40-49	17.9%	12.5%	12.5%
50-59	23.6%	17.2%	14.3%
60 plus	39.0%	29.2%	22.4%
Race/Ethnicity			
White	95.3%	95.6%	82.0%
Black or African American	0.8%	0.9%	12.3%
American Indian and Alaska Native	0%	0.4%	0.2%
Asian	1.6%	0.4%	2.0%
Other	2.4%	1.5%	0.8%
Hispanic Origin (may be of any race)	3.3%	4.7%	3.5%
Marital Status†			
Married Couple	61.2%	57.1%	47.5%
Never been married/member of an unmarried couple	13.2%	22.5%	32.1%
Divorced/Separated	15.1%	12.5%	14.0%
Widowed	9.7%	8.0%	6.4%
Education†			
Less than High School Diploma	3.5%	7.4%	10.3%
High School Diploma	27.7%	38.6%	33.7%
Some college/ College graduate	68.0%	54%	56.0%
Income (Families)			
\$14,999 and less	6.9%	5.0%	7.7%
\$15,000 to \$24,999	10.0%	6.7%	7.4%
\$25,000 to \$49,999	23.8%	24.2%	22.1%
\$50,000 to \$74,999	21.7%	23.3%	20.2%
\$75,000 or more	30.6%	40.8%	44.7%

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

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

Appendix VI: Demographics and Household Information

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

Age	Total	Males	Females
Ottawa County	41,428	20,437	20,991
0-4 years	2,033	1,005	1,028
1-4 years	1,660	829	831
< 1 year	373	176	197
1-2 years	825	425	400
3-4 years	835	404	431
5-9 years	2,334	1,179	1,155
5-6 years	881	447	434
7-9 years	1,453	732	721
10-14 years	2,557	1,323	1,234
10-12 years	1,525	780	745
13-14 years	1,032	543	489
12-18 years	3,696	1,931	1,765
15-19 years	2,567	1,348	1,219
15-17 years	1,671	887	784
18-19 years	896	461	435
20-24 years	1,822	937	885
25-29 years	1,850	933	917
30-34 years	1,939	981	958
35-39 years	2,242	1,110	1,132
40-44 years	2,561	1,250	1,311
45-49 years	3,301	1,636	1,665
50-54 years	3,690	1,831	1,859
55-59 years	3,466	1,733	1,733
60-64 years	3,198	1,615	1,583
65-69 years	2,569	1,284	1,285
70-74 years	1,811	869	942
75-79 years	1,388	639	749
80-84 years	1,098	468	630
85-89 years	666	209	457
90-94 years	269	69	200
95-99 years	56	15	41
100-104 years	11	3	8
105-109 years	0	0	0
110 years & over	0	0	0
Total 85 years and over	1,002	296	706
Total 65 years and over	7,868	3,556	4,312
Total 19 years and over	32,342	15,786	16,556

OTTAWA COUNTY PROFILE

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

2011-2015 ACS 5-year estimate

Total Population

2016 Total Population Estimate (July 1)	40,636
2010 Total Population	41,428

Largest City-Port Clinton

2015 Total Population	6,025	100%
2010 Total Population	6,391	100%

Population By Race/Ethnicity

Total Population	41,162	100%
White Alone	39,368	95.6%
Hispanic or Latino (of any race)	1,956	4.8%
African American	398	1.0%
Asian	146	0.4%
Two or more races	597	1.5%
Other	625	1.5%
American Indian and Alaska Native	16	0.0%

Population By Age 2015

Under 5 years	1,770	4.3%
5 to 17 years	6,385	15.5%
18 to 24 years	2,717	6.6%
25 to 44 years	8,366	20.3%
45 to 64 years	13,213	32.1%
65 years and more	8,726	21.2%
Median age (years)	47.3	

Household By Type

Total Households	17,334	100%
Family Households (families)	12,034	69.4%
With own children <18 years	4,061	23.4%
Married-Couple Family Households	9,554	55.1%
With own children <18 years	2,733	15.8%
Female Householder, No Husband Present	1,702	9.8%
With own children <18 years	880	5.1%
Non-family Households	5,300	30.6%
Householder living alone	4,559	26.3%
Householder 65 years and >	2,219	12.8%
Households With Individuals < 18 years	4,474	25.8%
Households With Individuals 65 years and >	6,145	35.5%
Average Household Size	2.33 people	
Average Family Size	2.77 people	

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

2011-2015 ACS 5-year estimate

Median Value of Owner-Occupied Units	\$138,800
Median Monthly Owner Costs (With Mortgage)	\$1,199
Median Monthly Owner Costs (Not Mortgaged)	\$418
Median Gross Rent for Renter-Occupied Units	\$696
Median Rooms Per Housing Unit	5.8
Total Housing Units	27,967
No Telephone Service	452
Lacking Complete Kitchen Facilities	109
Lacking Complete Plumbing Facilities	93

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

2011-2015 ACS 5-year estimates

School Enrollment

Population 3 Years and Over Enrolled In School	8,591	100%
Nursery & Preschool	534	6.2%
Kindergarten	515	6.0%
Elementary School (Grades 1-8)	3,926	45.7%
High School (Grades 9-12)	1,961	22.8%
College or Graduate School	1,655	19.3%

Educational Attainment

Population 25 Years and Over	30,287	100%
< 9 th Grade Education	575	1.9%
9 th to 12 th Grade, No Diploma	1,663	5.5%
High School Graduate (Includes Equivalency)	11,698	38.6%
Some College, No Degree	6,640	21.9%
Associate Degree	3,145	10.4%
Bachelor's Degree	4,135	13.7%
Graduate Or Professional Degree	2,431	8.0%

Percent High School Graduate or Higher	*(X)	92.6%
Percent Bachelor's Degree or Higher	*(X)	21.7%

*(X) – Not available

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

Marital Status

Population 15 Years and Over	34,568	100%
Never Married	7,778	22.5%
Now Married, Excluding Separated	19,738	57.1%
Separated	415	1.2%
Widowed	2,765	8.0%
Female	2,066	11.8%
Divorced	3,906	11.3%
Female	1,985	11.3%

Veteran Status

Civilian Veterans 18 years and over	3,544	10.7%
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Disability Status of the Civilian Non-institutionalized Population

Total Civilian Noninstitutionalized Population	40,733	100%
With a Disability	6,383	15.7%
Under 18 years	8,144	100%
With a Disability	487	6.0%
18 to 64 years	24,145	100%
With a Disability	2,883	11.9%
65 Years and Over	8,444	100%
With a Disability	3,013	35.7%

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

Employment Status

Population 16 Years and Over	34,073	100%
In Labor Force	20,696	60.7%
Not In Labor Force	13,377	39.3%
Females 16 Years and Over	17,409	100%
In Labor Force	9,714	55.8%

Population Living With Own Children <6 Years	2,043	100%
All Parents In Family In Labor Force	1,449	70.9%

Class of Worker

Employed Civilian Population 16 Years and Over	19,539	100%
Private Wage and Salary Workers	16,069	82.2%
Government Workers	2,268	11.6%
Self-Employed Workers in Own Not Incorporated Business	1,141	5.8%
Unpaid Family Workers	61	0.3%

Median Earnings

Male, Full-time, Year-Round Workers	\$52,624
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

Occupations

Employed Civilian Population 16 Years and Over	19,539	100%
Production, Transportation, and Material Moving Occupations	3,721	19.0%
Management, business, science, and art occupations	5,856	30.0%
Sales and Office Occupations	4,358	22.3%
Service Occupations	3,535	18.1%
Natural Resources, Construction, and Maintenance Occupations	2,069	10.6%

Leading Industries

Employed Civilian Population 16 Years and Over	19,539	100%
Manufacturing	3,271	16.7%
Educational, health and social services	4,547	23.3%
Trade (retail and wholesale)	2,804	14.4%
Arts, entertainment, recreation, accommodation, and food services	1,926	9.9%
Professional, scientific, management, administrative waste management services	1,305	6.7%
Transportation and warehousing, and utilities	1,217	6.2%
Finance, insurance, real estate and rental and leasing	788	4.0%
Other services (except public administration)	942	4.8%
Construction	1,387	7.1%
Public administration	732	3.7%
Information	242	1.2%
Agriculture, forestry, fishing and hunting, and mining	378	1.9%

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

	Income	Rank of Ohio Counties
BEA Per Capita Personal Income 2015	\$44,978	16 th of 88 counties
BEA Per Capita Personal Income 2014	\$43,640	15 th of 88 counties
BEA Per Capita Personal Income 2013	\$42,432	11 th of 88 counties
BEA Per Capita Personal Income 2012	\$42,099	9 th of 88 counties
BEA Per Capita Personal Income 2011	\$40,432	10 th 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	17,334	100%
< \$10,000	712	4.1%
\$10,000 to \$14,999	844	4.9%
\$15,000 to \$24,999	1,728	10.0%
\$25,000 to \$34,999	1,964	11.3%
\$35,000 to \$49,999	2,773	16.0%
\$50,000 to \$74,999	3,520	20.3%
\$75,000 to \$99,999	2,138	12.3%
\$100,000 to \$149,999	2,381	13.7%
\$150,000 to \$199,999	735	4.2%
\$200,000 or more	539	3.1%

Median Household Income **\$53,914**

Income In 2015

Families	12,034	100%
< \$10,000	285	2.4%
\$10,000 to \$14,999	309	2.6%
\$15,000 to \$24,999	805	6.7%
\$25,000 to \$34,999	1,095	9.1%
\$35,000 to \$49,999	1,816	15.1%
\$50,000 to \$74,999	2,806	23.3%
\$75,000 to \$99,999	1,850	15.4%
\$100,000 to \$149,999	1,975	16.4%
\$150,000 to \$199,999	606	5.0%
\$200,000 or more	487	4.0%

Median Household Income (families) **\$64,597**

Per Capita Income In 2010-2014 **\$29,343**

Poverty Status In 2015

	Number Below Poverty Level	% Below Poverty Level
Families	*(X)	6.9%
Individuals	*(X)	24.4%

*(X) – Not available

**Poverty Rates, 5-year averages
2010 to 2014**

Category	Ottawa	Ohio
Population in poverty	10.3%	15.9%
< 125% FPL (%)	13.3%	20.5%
< 150% FPL (%)	18.6%	25.0%
< 200% FPL (%)	27.3%	34.3%
Population in poverty (2000)	6.4%	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	Ottawa	Ohio
Labor Force	20,200	5,719,600
Employed	18,300	5,379,600
Unemployed	1,900	340,000
Unemployment Rate* in February 2017	9.6	5.9
Unemployment Rate* in January 2017	10.1	6.0
Unemployment Rate* in February 2016	8.9	5.5

**Rate equals unemployment divided by labor force.*

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

Estimated Poverty Status in 2015

Age Groups	Number	90% Confidence Interval	Percent	90% Confidence Interval
Ottawa County				
All ages in poverty	3,901	3,128016 to 4,674	9.7%	7.8 to 11.6
Ages 0-17 in poverty	1,175	948 to 1,402	15.3%	12.4 to 18.2
Ages 5-17 in families in poverty	798	626 to 970	13.5%	10.6 to 16.4
Median household income	\$58,793	\$55,524 to \$62,062		
Ohio				
All ages in poverty	1,670,487	1,646,455 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

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

	Ottawa County	Ohio	U.S.
Health Outcomes			
Premature death. Years of potential life lost before age 75 per 100,000 population (age-adjusted) (2011-2013)	6,400	7,600	6,600
Overall health. Percentage of adults reporting fair or poor health (age-adjusted) (2014)	15%	15%	15%
Physical health. Average number of physically unhealthy days reported in past 30 days (age-adjusted) (2014)	3.6	3.7	3.6
Mental health. Average number of mentally unhealthy days reported in past 30 days (age-adjusted) (2014)	3.8	4.0	3.7
Maternal and infant health. Percentage of live births with low birthweight (< 2500 grams) (2007-2013)	7%	9%	8%
Health Behaviors			
Tobacco. Percentage of adults who are current smokers (2014)	16%	22%	18%
Obesity. Percentage of adults that report a BMI of 30 or more (2012)	31%	31%	28%
Food environment. Index of factors that contribute to a healthy food environment, 0 (worst) to 10 (best) (2013)	7.8	7.0	7.3
Physical activity. Percentage of adults aged 20 and over reporting no leisure-time physical activity (2012)	29%	25%	22%
Active living environment. Percentage of population with adequate access to locations for physical activity (2010 & 2014)	59%	83%	84%
Drug and alcohol abuse. Percentage of adults reporting binge or heavy drinking (2014)	16%	19%	18%
Drug and alcohol abuse and injury. Percentage of driving deaths with alcohol involvement (2010-2014)	37%	34%	30%
Infectious disease. Number of newly diagnosed chlamydia cases per 100,000 population (2013)	162.8	474.1	456
Sexual and reproductive health. Teen birth rate per 1,000 female population, ages 15-19 (2007-2013)	26	32	32

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

	Ottawa 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)	1,870:1	1,300:1	1,320:1
Access to dental care. Ratio of population to dentists (2014)	2,730:1	1,690:1	1,520:1
Hospital utilization. Number of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees (2013)	66	60	50
Diabetes. Percentage of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring (2013)	81%	85%	85%
Cancer. Percentage of female Medicare enrollees ages 67-69 that receive mammography screening (2013)	63%	61%	63%
Social and Economic Environment			
Education. Percentage of ninth-grade cohort that graduates in four years (2012-2013)	93%	81%	83%
Education. Percentage of adults ages 25-44 years with some post-secondary education (2010-2014)	63%	64%	64%
Employment, poverty, and income. Percentage of population ages 16 and older unemployed but seeking work (2014)	6.6%	4.9%	5.3%
Employment, poverty, and income. Percentage of children under age 18 in poverty (2014)	15%	21%	21%
Employment, poverty, and income. Ratio of household income at the 80th percentile to income at the 20th percentile (2010-2014)	4.0	4.8	5.0
Family and social support. Percentage of children that live in a household headed by single parent (2010-2014)	31%	36%	34%
Family and social support. Number of membership associations per 10,000 population (2013)	16.3	11.3	9.0
Violence. Number of reported violent crime offenses per 100,000 population (2010-2012)	82	290	380
Injury. Number of deaths due to injury per 100,000 population (2009-2013)	58	70	62

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

	Ottawa 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)	10.9	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)	12%	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)	31%	30%	34%

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